

Community Action Program Committee, Inc.  
**Community Needs Assessment**  
Escambia County, Florida  
July 2014



**The Community Action Promise**

*Community Action changes people's lives, embodies the spirit of hope, improves communities and makes America a better place to live. We care about the entire community, and we are dedicated to helping people help themselves and each other.*



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## OUR MISSION

The mission of Community Action Program Committee, Inc. is to help low-income families achieve self-sufficiency by creating solutions to poverty in collaboration with community stakeholders.

## OUR VISION

Community Action Program Committee, Inc. is a non-profit organization with a vision to change people's lives, improve communities, and make the county a better place to live. The Community Action Program Committee, Inc. is dedicated to helping people help themselves and teach each other.



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## INTRODUCTION & OVERVIEW

The mission of the *Community Action Program Committee, Inc. (CAPC)*, is to assist low-income people in Escambia County to achieve self-sufficiency. The purpose of the agency shall be to carry out the overall responsibility of planning, coordinating, evaluating and administering a “Community Action Program” to that end.



As a part of continuing to fulfill this mission, CAPC regularly assesses the internal and external factors impacting Escambia County, FL and its residents. Additionally, CAPC is the grantee for the Escambia County Early Head Start and Head Start Programs. Early Head Start is a community-based program for low-income families with pregnant women, infants and toddlers up to age 3. This program provides opportunities for 10 pregnant women and 70 children along with their families. The Head Start Program provides opportunities for 855 children and their families to participate in a comprehensive, quality, holistic early childhood and parental development program.

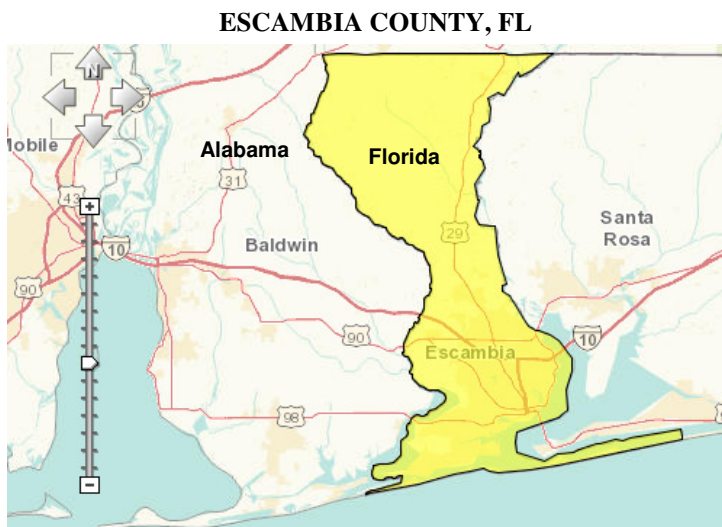
Both programs provide a range of individualized services in the areas of education, early childhood development, medical, dental, mental health, nutrition and parental involvement. In addition, the entire range of Head Start services is responsive and tailored to each child and their family’s developmental, ethnic, cultural and linguistic heritage and experience.

### PRIMARY STATISTICS AND REQUIRED INFORMATION Head Start Program Performance Standards (45 CFR 1300)

#### 1. Demographic make-up of Head Start eligible children and families including their estimated number, geographic location and racial/ethnic composition.

##### 1A. GENERAL DESCRIPTION OF ESCAMBIA COUNTY

Escambia County is the westernmost county in the state of Florida, with the City of Pensacola serving as its county seat. It is bordered by Alabama on the north (Baldwin County, AL) and west (Escambia County, AL), Santa Rosa County (FL) on the east and the Gulf of Mexico on the south. The county has a total area of 875.57 square miles, of which 662.35 square miles is land and 213.21 square miles is water.



## 1B. BASIC DEMOGRAPHICS

According to the 2008-2012 American Community Survey, Florida has an estimate population of 18,885,152. Escambia County has an estimated population of 298,864.

	Escambia County	Florida
<b>Total Population</b>	298,864	18,885,152
<b>Males</b>	147,848	9,232,292
<b>Females</b>	151,016	9,652,860
<b>Median Age</b>	37.5	40.8

Source: U. S. Census Bureau, 2008-2012 American Community Survey

Basic Demographics of the Head Start Population (Escambia County)			
TOPIC	2010 - 2011	2011 - 2012	2012 - 2013
Total Funded Head Start Enrollment	855	855	855
Total Actual Head Start Enrollment	956	972	946
Number Enrolled Second Year	272	359	229
Head Start Enrollment By Age			
Under Three Years	5	9	4
Three Years	388	363	389
Four Years	563	600	553
Five Years	0	0	0
Ethnicity			
TOPIC	2010 - 2011	2011 - 2012	2012 - 2013
Hispanic or Latino Origin	44	61	62
Non-Hispanic/Non-Latino Origin	912	911	884
Race			
Category	2010 - 2011	2011 - 2012	2012 - 2013
American Indian/Alaskan Native	3	2	0
Asian	4	7	8
Black/African-American	756	737	714
Native Hawaiian or Pacific Islander	6	7	4
White/Anglican-American	142	180	187
Bi/Multi-Racial	44	39	33
Other	0	0	0
Unspecified	1	0	0
Dominant Language			
English	917	927	889
Spanish	28	34	47
Middle East/South Asian	1	2	4
Other: East Asian	10	9	6

# 1C. RACE AND ETHNICITY BY ZIP CODE

Name	Race 2013 Estimates						Ethnicity	
	White	Black	Am. Indian	Asian/PI	Multi-race	Other Race	Hispanic Origin	Non- Hispanic Origin
32501 Pensacola	42.0%	53.1%	0.6%	1.5%	2.0%	0.8%	5.8%	94.2%
32502 Pensacola	56.8%	36.4%	0.9%	2.2%	3.0%	0.8%	3.7%	96.3%
32503 Pensacola	65.8%	27.3%	0.6%	3.1%	2.5%	0.7%	3.8%	96.2%
32504 Pensacola	78.5%	14.2%	0.6%	2.9%	2.6%	1.1%	5.0%	95.1%
32505 Pensacola	38.7%	52.9%	0.9%	3.2%	3.1%	1.3%	4.3%	95.7%
32506 Pensacola	68.2%	19.1%	0.8%	5.4%	4.7%	1.8%	6.5%	93.5%
32507 Pensacola	74.1%	16.6%	0.9%	2.9%	3.8%	1.7%	6.2%	93.8%
32508 Pensacola	74.1%	12.8%	1.2%	4.2%	4.7%	3.1%	17.5%	82.5%
32509 Pensacola	75.2%	16.9%	0.8%	2.7%	2.6%	1.8%	10.0%	90.0%
32511 Pensacola	72.0%	14.2%	0.7%	4.7%	5.8%	2.7%	13.8%	86.2%
32514 Pensacola	74.6%	17.0%	0.7%	2.7%	3.3%	1.6%	6.2%	93.8%
32526 Pensacola	75.2%	15.0%	1.0%	4.0%	3.9%	1.0%	4.8%	95.3%
32533 Cantonment	82.7%	12.3%	1.0%	1.6%	2.0%	0.5%	2.8%	97.2%
32534 Pensacola	64.3%	28.9%	1.2%	1.2%	3.1%	1.4%	4.5%	95.5%
32535 Century	65.6%	29.4%	1.4%	0.4%	2.4%	0.9%	4.4%	95.6%
32561 Gulf Breeze (Part)	96.2%	0.4%	0.5%	1.3%	1.1%	0.4%	2.6%	97.4%
32568 Mc David	85.4%	8.9%	3.8%	0.3%	1.2%	0.4%	1.7%	98.3%
32577 Molino	87.5%	8.0%	2.0%	0.4%	1.8%	0.4%	1.7%	98.3%

**Source:** Haas Center – UWF – 2013 Estimates

## 1D. AGE DISTRIBUTION BY ZIP CODE

Name	Median Age	Population by Age 2013 Estimates								
		Population	0-14	15-24	25-34	35-44	45-54	55-64	65-74	75 Plus
32501 Pensacola	42.2	12,224	15.7%	11.4%	13.8%	13.1%	17.8%	12.9%	7.9%	7.4%
32502 Pensacola	43.9	3,415	13.7%	11.6%	14.1%	12.0%	17.3%	15.4%	8.2%	7.7%
32503 Pensacola	36.0	32,336	14.9%	21.3%	12.9%	9.9%	13.1%	12.9%	7.5%	7.6%
32504 Pensacola	42.0	22,358	15.5%	12.8%	14.3%	10.6%	14.1%	14.6%	9.2%	8.8%
32505 Pensacola	35.0	28,683	23.2%	14.2%	12.6%	10.9%	14.5%	12.2%	6.8%	5.6%
32506 Pensacola	36.6	34,364	20.7%	13.7%	13.7%	11.7%	14.0%	11.9%	7.7%	6.4%
32507 Pensacola	37.1	30,056	19.4%	14.7%	13.6%	11.3%	14.1%	12.8%	8.4%	5.7%
32508 Pensacola	20.4	6,042	4.7%	80.9%	11.4%	1.8%	0.9%	0.3%	0.1%	0.0%
32509 Pensacola	41.9	669	14.2%	9.8%	14.9%	16.1%	17.1%	15.3%	8.1%	4.4%
32511 Pensacola	20.4	1,175	12.7%	69.1%	14.7%	2.8%	0.4%	0.2%	0.1%	0.0%
32514 Pensacola	35.3	38,188	16.1%	18.2%	15.3%	10.0%	12.0%	11.8%	8.1%	8.5%
32526 Pensacola	40.0	37,385	19.1%	12.7%	12.4%	12.2%	14.9%	13.8%	8.9%	6.0%
32533 Cantonment	42.3	27,360	18.3%	13.4%	9.7%	12.4%	17.2%	14.3%	8.9%	5.8%
32534 Pensacola	38.3	14,341	18.9%	13.6%	13.7%	11.3%	14.2%	13.5%	8.4%	6.4%
32535 Century	39.2	6,631	14.0%	12.4%	17.1%	15.0%	16.1%	11.5%	7.5%	6.4%
32561 Gulf Breeze (Part)	49.5	7,730	13.2%	11.5%	7.2%	10.2%	19.0%	18.2%	10.8%	9.9%
32568 Mc David	45.3	3,168	16.1%	12.9%	8.7%	11.8%	15.9%	17.1%	10.4%	7.0%
32577 Molino	45.8	4,782	16.9%	12.8%	8.0%	11.1%	18.2%	15.3%	11.1%	6.7%

**Source:** Haas Center – UWF -- 2013 Estimates



## 1E. HOUSEHOLD AND FAMILY SIZES BY ZIP CODE

Name	Population	Total Families (Family Households)	Adopted Child	Biological Child	Grandchild	% Grandchild	Stepchild
32501 Pensacola	12,224	2,311	67	2,580	487	21%	88
32502 Pensacola	3,415	771	12	695	87	11%	24
32503 Pensacola	32,336	7,312	188	6,886	913	12%	322
32504 Pensacola	22,358	5,961	140	5,062	418	7%	303
32505 Pensacola	28,683	7,099	196	8,406	1,469	21%	368
32506 Pensacola	34,364	9,082	254	9,190	904	10%	651
32507 Pensacola	30,056	7,777	178	7,420	704	9%	427
32508 Pensacola	6,042	208	8	290	5	2%	31
32509 Pensacola	669	*	1	129	16	*	14
32511 Pensacola	1,175	*	2	125	1	*	12
32514 Pensacola	38,188	9,021	218	7,833	763	8%	486
32526 Pensacola	37,385	10,336	275	9,622	1,253	12%	713
32533 Cantonment	27,360	7,829	254	7,359	911	12%	609
32534 Pensacola	14,341	3,836	107	3,643	572	15%	267
32535 Century	6,631	1,344	49	1,271	255	19%	82
32561 Gulf Breeze	7,730	2,250	41	1,845	95	4%	92
32568 Mc David	3,168	928	34	796	130	14%	64
32577 Molino	4,782	1,399	40	1,166	212	15%	92

*\*Data not available*

**Source:** Haas Center – UWF -- 2013 Estimates

*1E. HOUSEHOLD AND FAMILY SIZES BY ZIP CODE (Continued)*

<b>Name</b>	<b>Population</b>	<b>Total Families (Family Households)</b>	<b>Householder: Female</b>	<b>Householder: Male</b>
32501 Pensacola	12,224	2,311	1,340	996
32502 Pensacola	3,415	771	367	374
32503 Pensacola	32,336	7,312	2,878	4,467
32504 Pensacola	22,358	5,961	2,005	3,912
32505 Pensacola	28,683	7,099	3,890	3,175
32506 Pensacola	34,364	9,082	3,381	5,684
32507 Pensacola	30,056	7,777	2,801	4,862
32508 Pensacola	6,042	208	43	160
32509 Pensacola	669	0	41	100
32511 Pensacola	1,175	0	25	69
32514 Pensacola	38,188	9,021	3,235	5,789
32526 Pensacola	37,385	10,336	3,263	6,954
32533 Cantonment	27,360	7,829	2,094	5,711
32534 Pensacola	14,341	3,836	1,543	2,310
32535 Century	6,631	1,344	465	874
32561 Gulf Breeze	7,730	2,250	735	1,495
32568 Mc David	3,168	928	218	693
32577 Molino	4,782	1,399	325	1,075

**Source:** Haas Center – UWF -- 2013 Estimates

## 1F. FAMILY INCOME BY ZIP CODE

Name	Population	Median	Average	Average (Mean) Family Household Income	Median Family Household Income	Total Families (Family Households)
32501 Pensacola	12,224	\$24,549	\$41,976	\$54,396.00	\$31,851.00	2,311
32502 Pensacola	3,415	\$33,042	\$52,622	\$68,825.00	\$40,163.00	771
32503 Pensacola	32,336	\$41,508	\$62,132	\$77,615.00	\$52,609.00	7,312
32504 Pensacola	22,358	\$44,536	\$63,236	\$77,690.00	\$56,488.00	5,961
32505 Pensacola	28,683	\$28,489	\$39,734	\$45,976.00	\$34,322.00	7,099
32506 Pensacola	34,364	\$39,715	\$50,322	\$58,545.00	\$48,042.00	9,082
32507 Pensacola	30,056	\$41,341	\$60,113	\$68,799.00	\$49,532.00	7,777
32508 Pensacola	6,042	\$48,362	\$57,044	\$62,126.00	\$52,810.00	208
32509 Pensacola	669	\$0	\$0	\$0.00	\$0.00	0
32511 Pensacola	1,175	\$0	\$0	\$0.00	\$0.00	0
32514 Pensacola	38,188	\$43,172	\$59,485	\$73,625.00	\$56,725.00	9,021
32526 Pensacola	37,385	\$47,474	\$61,912	\$71,136.00	\$56,016.00	10,336
32533 Cantonment	27,360	\$52,830	\$66,232	\$74,077.00	\$60,861.00	7,829
32534 Pensacola	14,341	\$41,403	\$58,266	\$67,657.00	\$54,055.00	3,836
32535 Century	6,631	\$33,704	\$46,007	\$53,065.00	\$42,820.00	1,344
32561 Gulf Breeze	7,730	\$72,482	\$111,767	\$127,382.00	\$91,296.00	2,250
32568 Mc David	3,168	\$40,837	\$54,391	\$60,902.00	\$49,894.00	928
32577 Molino	4,782	\$53,373	\$67,968	\$77,306.00	\$60,360.00	1,399

*Source: Haas Center – UWF -- 2013 Estimates*

The U. S. Department of Health and Human Services (DHHS) releases a set of “poverty guidelines” on an annual basis. Nationally, there was an increase in the number and percentage of people with an income-to-poverty ratio below 125% when comparing 2000 and 2012 data. Similar increases were experienced in Florida.

Area	2000 Below 125 %		2012 Below 125 %	
	Number	Percentage	Number	Percentage
United States	45,071,197	16.5%	63,569,291	20.8%
Florida	2,695,428	17.4%	4,288,362	22.7%

*Sources: U. S. Census Bureau, Census 2000 Supplementary Survey and 2012 American Community Survey; Census Poverty: 2000 to 2012, ACS Brief (Issued: September 2013)*

<b>DHHS 2012 Poverty Guidelines</b>		
<b>Family Size</b>	<b>100%</b>	<b>125%</b>
1 Person	\$11,170	\$13,963
2 Persons	\$15,130	\$18,913
3 Persons	\$19,090	\$23,863
4 Persons	\$23,050	\$28,813
5 Persons	\$27,010	\$33,763
6 Persons	\$30,970	\$38,713
7 Persons	\$34,930	\$43,663
8 Persons	\$38,890	\$48,613

## 1G. POVERTY AND PARTICIPATION IN GOVERNMENT PROGRAM

The poverty data reported is based upon the U. S. Census Bureau's *Small Area Income and Poverty Estimates* (SAIPE). SAIPE data is produced for school districts, counties, and states. The main objective of this statistical program is to provide updated estimates of income and poverty statistics for the administration of federal programs and the allocation of federal funds to local jurisdictions. Estimates for 2012 were released in December 2013. These estimates combine data from administrative records, post-census population estimates, and the decennial census with direct estimates from the *American Community Survey* to provide consistent and reliable single-year estimates. These model-based, single-year estimates are more reflective of current conditions than multi-year survey estimates. Using SAIPE data, there are 50,534 individual persons living below the poverty line within Escambia County.

Figure 1: Poverty

<b>Geographic Area</b>	<b>All Ages</b>		<b>Age 0-17</b>		<b>Age 5-17</b>	
	<b>Number of Persons</b>	<b>Poverty Rate</b>	<b>Number of Persons</b>	<b>Poverty Rate</b>	<b>Number of Persons</b>	<b>Poverty Rate</b>
<b>Escambia County, Florida</b>	50,534	17.8	17,401	27.6	11,686	26.4
<b>Florida</b>	3,248,276	17.2	1,011,096	25.6	693,284	24.1
<b>United States</b>	48,760,123	15.9	16,396,863	22.6	11,086,537	21.0

Figure 2: Change in Poverty from 2000 to 2012

<b>Geographic Area</b>	<b>Persons in Poverty, 2000</b>	<b>Poverty Rate, 2000</b>	<b>Persons in Poverty, 2012</b>	<b>Poverty Rate, 2012</b>	<b>Change in Poverty Rate, 2000 - 2012</b>
<b>Escambia County, Florida</b>	40,144	14.8	50,534	17.8	3.0
<b>Florida</b>	1,877,399	11.7	3,248,276	17.2	5.5
<b>United States</b>	31,581,086	11.3	48,760,123	15.9	4.6

An estimated 4,631,405 Florida families live below the poverty level. In Escambia County (FL), an estimated 9,470 families live in poverty. The following data was produced by the U. S. Census Bureau's *2008-2012 American Community Survey 5-Year Estimates*.

Figure 3: Families in Poverty

Escambia County		
Subject	Total ACS Estimate	Number Below Poverty Level
Families	71,201	9,470 (13.3%)
With related children under 18 years	31,547	6,972 (22.1%)
Married-Couple Families	49,507	2,920 (5.9%)
With related children under 18 years	18,097	1,701 (9.4%)
Female Head of Household, No Husband Present	16,878	5,739 (34%)
With related children under 18 years	10,905	4,656 (42.7%)
Senior Population		
People 65 and Older	42,111	3,725 (8.8%)

Florida		
Subject	Total ACS Estimate	Number Below Poverty Level
Families	4,631,405	527,980 (11.4%)
With related children under 18 years	2,042,513	375,822 (18.4%)
Married-Couple Families	3,381,657	209,662 (6.2%)
With related children under 18 years	1,272,006	115,752 (9.1%)
Female Head of Household, No Husband Present	930,045	259,482 (27.9%)
With related children under 18 years	598,529	219,061 (36.6%)
Senior Population		
People 65 and Older	1,087,384	64,155 (5.9%)

According to data released by the “Kids Count Data Center” (a program of the Annie E. Casey Foundation), the number of Florida’s children (persons under 18 years of age) living in poverty is continuing to rise, from 21% in 2008 to 28% in 2012. Based on the *Kids Count Data Ranking* process, Florida tied with West Virginia, Oklahoma and Ohio for the 34<sup>th</sup> highest poverty rate for the 0-5 age group.

Location	Age group	Data Type	2008	2009	2010	2011	2012
Florida	0 to 5	Number	282,000	328,000	336,000	360,000	363,000
		Percent	21%	24%	26%	28%	28%
	6 to 17	Number	439,000	524,000	588,000	620,000	638,000
		Percent	17%	20%	22%	23%	24%
	Less than 18	Number	721,000	852,000	924,000	980,000	1,001,000
		Percent	18%	21%	23%	25%	25%

## Poverty: Families with Children 5 and Under

Escambia County				
Subject	Total Estimate	In Married Couple Family	Male Headed Household (No Wife)	Female Headed Household (No Husband)
Children under 18 years in households	63,732	35,853	4,147	23,143
AGE				
Under 6 years	35.4%	33.2%	31.7%	39.5%
6 to 11 years	31.6%	32.4%	34.0%	30.0%
12 to 17 years	33.1%	34.3%	34.3%	30.4%

Florida				
Subject	Total Estimate	In Married Couple Family	Male Headed Household (No Wife)	Female Headed Household (No Husband)
Children <18 years in households	3,985,969	2,485,389	309,046	1,161,742
AGE				
Under 6 years	32.4%	32.6%	36.1%	31.0%
6 to 11 years	33.0%	33.3%	30.7%	32.7%
12 to 17 years	34.7%	34.0%	33.2%	36.3%

Source: U. S Census Bureau, 2008-2012 American Community Survey

### Head Start Families

Based upon data included in CAPC's *Head Start Community Assessment Update* (2012-2013), there were 871 total families enrolled. Of those families, 677 were single parents. Among the single parent households, 290 were employed. Among the 194 two-parent households, 26 homes included two working parents and 130 households included at least one working parent. A majority of the parents (73%) earned a high school diploma or GED. However, only approximately 1% earned a Bachelor's or Advanced degree and 3% attended college or a vocational school.

	2010-2011	2011-2012	2012-2013
<b>Number of Enrolled Families</b>	<b>883</b>	<b>900</b>	<b>871</b>
Number of Two-parent Families	174	204	194
Number of Single Parent Families	709	696	677
<b>Employment Status (Two-parent Household)</b>			
Both Parents Employed	21	19	26
One Parent Employed	110	131	130
Both Parents Not Employed	43	54	38
<b>Employment Status (Single Parent Household)</b>			
Parent Employed	323	300	290
Parent Not Employed	486	396	387
<b>Job Training/School (Two-parent Household)</b>			
Both Parents in Training or School	4	5	4
One Parent in Training or School	15	17	23
Neither Parent in Training or School	155	172	167
<b>Job Training/School (Single Parent Household)</b>			
Parent in Training or School	52	63	61
Parent Not In Training or School	657	633	616

Additionally, 67 households were provided “emergency/crisis” assistance during the 2012-2013 year. “Housing Assistance” was provided to 36 families, which is a 100% increase from the 18 families provided with housing assistance during the previous year.

## **Major Causes of Poverty in Escambia County**

### Un- or Underemployment/Lack of an Opportunity to Earn a Livable Wage

As found in communities across America, root causes to poverty often point toward poor access to jobs/unemployment, a lack of job readiness skills and/or numerous educational barriers. In an April 2014 article titled, “Jobs: The Best Way to Fight Poverty,” authors Keith Hall and Charles Blahous (senior research fellows at George Mason University’s Mercatus Center) note that “an increase in the employment rate is the only thing that has reliably reduced poverty” since the 1990s. Hall and Blahous also note that “there has never been a drop in the poverty rate that wasn’t associated with a rise in the employment rate.”

Surveys issued to Escambia County residents and a series of focus groups conducted by a third-party company on behalf of the *Community Action Program Committee, Inc.* found that local residents also viewed unemployment as one of Escambia County’s most important problem/challenge. Beyond simply discussing unemployment, residents discussed the *underemployment* of more qualified workers and the disconnect between wages earned and the cost of living (e.g., rent, child care, food, etc.). Being a tourist destination, several employment opportunities are seasonal or temporary positions (e.g., construction, etc.); which adds another employment limitation.

### Education/Job Training/Job Readiness

Education and job readiness are often the links between a person obtaining a job that barely pays a livable wage and a person who is qualified and capable of obtaining employment positions that will allow upward economic mobility. An educational pipeline that is proactive and broad enough to guide students from a K-12 environment...to an institution of higher learning or a technical certification...to an employed position is needed.

### Child Care

While access to affordable child care may not be the direct cause of poverty, it is certainly a major contributor. *Child Care Aware’s* “Parents and the High Cost of Child Care 2013 Report,” documents the link between child care, economics and a community’s workforce. During a three-month period, 29 percent of employed parents experienced some type of child care breakdown that resulted in absenteeism, tardiness and reduced concentration at work. Employee absenteeism as a result of child care breakdowns, was found to cost U. S. businesses \$3 billion annually and could lead to the loss of employment. Additionally, the average annual cost of child care for an infant placed in a child care center in Florida is \$8,299.00 (\$692/month); while the state median income for a single mother is \$24,993.00 (33.20% of the state median income).

### **Path to Poverty: Local Head Start Snapshot**

The following data provides a snapshot of several factors that contribute to poverty as they relate to households with children enrolled in the Head Start program during the 2012-2013 term. In 2012-2013, there were **871 families** (946 children) enrolled in Head Start. Of these families, **677 households were single-parent families** (194 two-parent families). According to a January 2014 Census Bureau report, single female-led households entered poverty at a rate of 10% (single male-led was 8.6%) compared to married couples who entered poverty at a rate of 4% between 2009-2011. Female-led households exited poverty at a lower rate of 25.2% (male-led households exit at 37.6%) compared to 44.3% for married couples (*Dynamics of Economic Well-being: Poverty, 2009-2011, January 2014, p70-137*).

In terms of employment, **387 of the 677 single-parents were unemployed**. Only **26 families (of 871 families) consisted of two parents who were both employed**. Education is closely correlated with future employment options. Of the 871 households, **831 parents earned a high school diploma, GED or less** (191 did not earn a high school diploma or GED at all). Only 30 parents possessed some college, vocational school training or an Associate's degree. The level of education a person earns is directly linked to the job opportunities that may or may not be accessible to them. **Among all 871 households, 783 consisted of families where no parents in the home were in a job training program or school.**

### **Needs of the Low-income Hispanic and Vietnamese Population in Escambia County**

Based on 2010 Census Data, Escambia County is home to 14,061 (4.7%) Hispanic or Latino residents. Of this population, 5,611 (1.9%) are Mexican, 3,033 (1%) are Puerto Rican, 1,036 (0.3%) are Cuban and 241 (0.1%) are Dominican. Less than 1% of all Hispanic or Latino residents are from other countries in Central America, and less than 1% are from South American countries.

During the 2012-2013 term, there were 62 (6%) Hispanic students enrolled in the Head Start program, and 47 students who spoke Spanish as the dominant language in their household. Needs associated with education, employment, housing, health care and other barriers experienced by low-income persons in Escambia County are also experienced by the low-income Hispanic population. However, the language barrier adds another factor that has the potential to intensify problems or challenges; while decreasing accessibility. CAPC attempts to mitigate this problem by hiring a translator, to the extent one is available, on a case-by-case basis. The agency is also exploring the possibility of investing in a pay-per-use translation service.

Escambia County's Asian population accounts for less than 3% of the total population. The portion of that group who are Vietnamese is not specifically identified within available Census data, nor were targeted Vietnamese-specific services identifiable at the time of this report.



## 1H. NATIVITY AND LANGUAGE

Escambia County				
Subject	Total Estimate	People who speak only English at home	Percent distribution of people who speak a language other than English at home	Primary Language Spoken at Home: Spanish or Spanish Creole
Total population 5 years and over	280,120	257,091	23,029	10,257
AGE				
5 to 17 years	16.2%	16.5%	13.2%	16.1%
18 to 64 years	68.3%	67.6%	75.5%	77.5%
65 years and over	15.5%	15.9%	11.3%	6.3%
NATIVITY AND CITIZENSHIP STATUS				
Native population 5 years and over	93.9%	98.0%	48.0%	66.6%
Foreign-born population 5 years and over	6.1%	2.0%	52.0%	33.4%
Naturalized U.S. citizen	3.2%	1.2%	25.0%	10.2%
Not a U.S. citizen	2.9%	0.8%	27.0%	23.2%

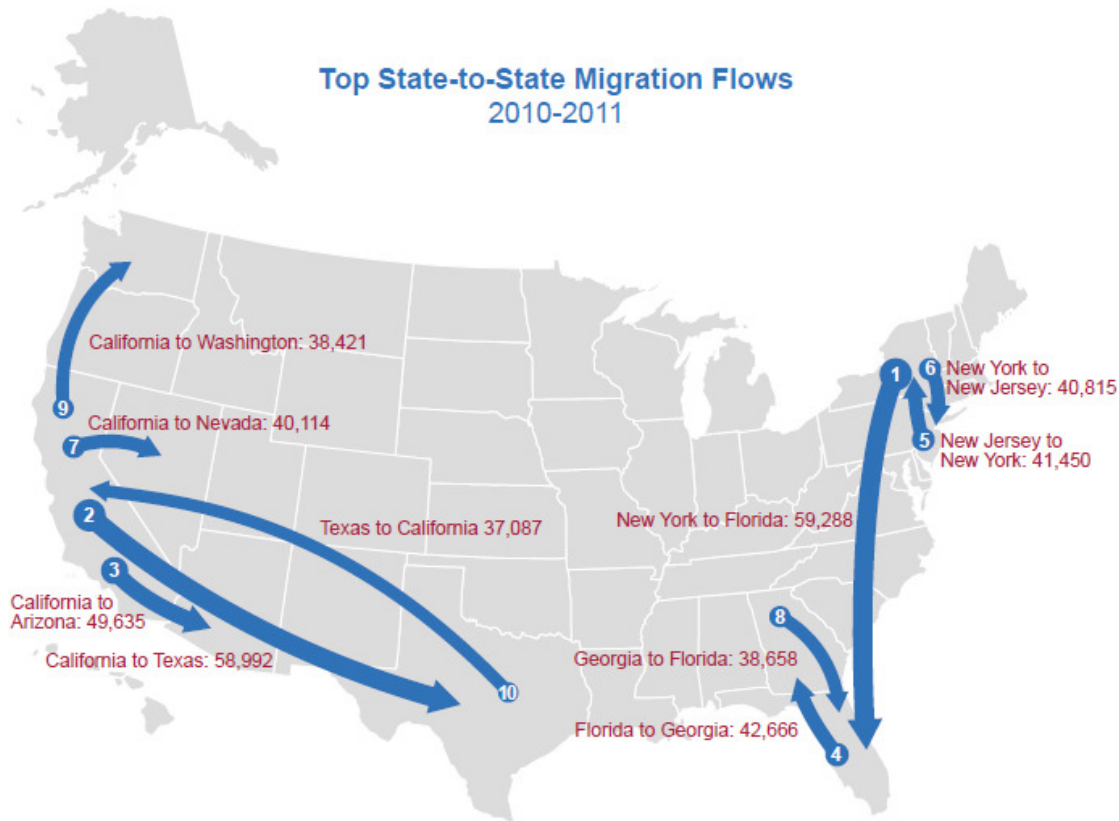
Florida				
Subject	Total Estimate	In Married Couple Family	Male Headed Household (No Wife)	Female Headed Household (No Husband)
Total population 5 years and over	17,808,954	12,951,107	4,857,847	3,566,368
AGE				
5 to 17 years	16.4%	16.3%	16.7%	17.5%
18 to 64 years	65.1%	63.2%	70.0%	70.4%
65 years and over	18.5%	20.5%	13.3%	12.0%
NATIVITY AND CITIZENSHIP STATUS				
Native population 5 years and over	79.6%	94.6%	39.6%	43.7%
Foreign-born population 5 years and over	20.4%	5.4%	60.4%	56.3%
Naturalized U.S. citizen	10.1%	3.2%	28.3%	25.3%
Not a U.S. citizen	10.3%	2.1%	32.1%	31.0%

## 11. GEOGRAPHIC MOBILITY

The nation's overall mover rate increased from a record low of 11.6 percent in 2011 to 12.0 percent in 2012. About 36.5 million people (one year and older) moved, which is an increase from the 2011 estimate of 35.1 million. In 2012, the majority of people who lived at a different residence one year ago moved within the same county (64.4 percent).

Among the 11.8 million inter-county movers (people who moved to another county), either within the same state or to a different state, most (40.2%) moved a distance of less than 50 miles. Therefore, even though they moved to a different county, the largest percentage did not move far from their previous place of residence.

In terms of state-to-state mobility, Florida is mentioned twice among the top 10 states to receive new residents. From New York to Florida ranked #1 at 59,288 people. People moving from Georgia to Florida equaled 38,658. Persons moving out of Florida also earned a top 10 slot. Florida residents moving to Georgia hit 42,666.



Source: U. S. Census Bureau, 2011 American Community Survey

**2. Other child development and child care programs that are serving Head Start-eligible children, including publicly funded state and local pre-school programs; and approximate number of Head Start children served by each.**

**2A. Other child development and child care programs. Voluntary Pre-Kindergarten**

Subsidized child care is administered through the *Early Learning Coalition of Escambia County*. This school readiness program is available at more than 250 child care centers, family child care homes, faith-based programs and after school programs in Escambia County. Priority is given to children in families receiving TANF assistance, children in families with protective service involvement and children with diagnosed disabilities. Families of low-income working families are served with eligibility criteria determined based on total household income and a work requirement of at least 20 hours per week. The basic age of eligibility is between birth to age twelve. Additionally, some services are provided for special needs teens (ages 13-18). A co-payment is required based on a sliding fee scale.

Transportation is not provided for programs through the *Early Learning Coalition*, but some individual private providers do offer transportation services. School readiness services include placement for full-time and part-time care for infants, toddlers, preschoolers, and school-age children. “Wrap-around” child care is provided for families in voluntary pre-kindergarten and Head Start programs that require more than part-time care to support the employment of the parent. The local Head Start program provides more extensive support services (e.g., nutrition, health, mental health and family involvement) than many of the private school readiness programs.

In June 2014, the *Early Learning Coalition* reported that 4,755 children were served in Escambia County through the subsidized school readiness program. Support services provided by the *Early Learning Coalition* include *Child Care Resource and Referral*, in-service training, accreditation support, child health screening, child developmental screening and assessment, inclusion support, and continuing education units through the *International Association for Continuing Education and Training*.

**Voluntary Pre-kindergarten** was established in Florida in August 2005. This program is funded 100% by Florida’s general revenue budget, and is available for any four-year-old child residing in the state. The program has two options for parents. The first is a 540-hour school year program. The second is a 300-hour summer program. Parents may select from one of the 100 providers in Escambia County; which includes private child care, public schools, Head Start, family child care homes and faith-based centers. The *Early Learning Coalition* reports that there were 2,632 children served through the Voluntary Pre-Kindergarten Program as of June 2014.

The **Title I Voluntary Pre-Kindergarten Program** is provided by the School District of Escambia County. This program operates nine (9) school sites and two (2) centers. Children who are four years of age on or before September 1st of the school year, and whose parents reside in a Title I school attendance area, are eligible for the program. The Voluntary Pre-Kindergarten Program is supplemented by the School District’s Title I program to extend the day for students. The School District’s Title I Voluntary Pre-Kindergarten Program is a full day, high quality program using teachers with a four-year college degree. The pre-kindergarten programs are available at the following school attendance areas: Bratt, Ensley, Global Learning Academy, Jim Allen, Lincoln Park, Molino Park, Montclair, McMillan Community Learning Center, Navy Point, Oakcrest, Semmes, Sherwood, Warrington, Weis, and West Pensacola.

The **Title I Migrant Pre-Kindergarten Program** is offered to three- and four-year old children whose families are employed in migratory occupations.

As of June 2014, the following data described the extent of child care resources available in Escambia County:

<b>Child Care Resources in Escambia County June 2014</b>	
<b>Type of Child Care Provider</b>	<b>Number of Child Care Providers</b>
Secular Centers	90
Faith Based Centers	35
School Age Only	30
Licensed Family Child Care Homes	27
Large Family Child Care Homes	6
Early Head Start	1
Head Start Programs	14
School Based Pre-K Programs	13
Secular Centers (Exempt)	7
Faith Based Centers (Exempt)	17
Registered Family Child Care Homes	86
<b>Number of Children Enrolled and Served</b>	
Total School Readiness Children Enrolled (as of June 23, 2014)	3,372
Total School Readiness Children Served in 2014 (as of June 23, 2014)	4,755

*Source: Early Learning Coalition of Escambia County*

## **2B. Child Care Affordability — Escambia County**

The U. S. Department of Health and Human Services (DHHS) considers ten percent of a family's income for child care as a benchmark for affordability. For Escambia County, the average household income is \$58,570 (2008-2012 American Community Survey). Based upon the DHHS 10% benchmark, affordable child care should be \$488 or less per month. On average, child care costs 10-12% of a family's annual income in Florida (Child Care Aware, 2013).

Based upon *Child Care Aware's* "Parents and the High Cost of Child Care 2013 Report," Florida tied with Texas and Maryland for a 24th ranking in regard to providing the *least affordable child care for an infant in a [child care] center*. This ranking was based upon annual cost vs. annual income.

**3. The estimated number of children with disabilities four years old and younger, including the types and disabilities and relevant services and resources provided to these children by community agencies.**

### **3A. Individuals with Disabilities Act — IDEA**

The *Individuals with Disabilities Act* (IDEA) Part C is federal legislation establishing early intervention services for infants and toddlers, from birth through two years of age. Sacred Heart Hospital/DEI is responsible for implementing Part C services in Escambia County. IDEA Part B applies to school-age children with disabilities, ages three to twenty-one. The School District of Escambia County is responsible for implementing the Part B program. Sacred Heart Hospital/DEI and the School District of Escambia County have agreed to implement a collaborative system that includes the involvement of family members in planning the transition process for eligible children from Part C at age three to a Part B **exceptional** student education program in the Escambia County School District.

### **3B. Escambia County School District Pre-K Disabilities Program**

The Escambia County School District's *Pre-K Disability Program* provides pre-k educational services to eligible children ages 3-5 with a current Individual Education Plan. There are a variety of service options ranging from "walk-in" services for speech, language, occupational and physical therapies; as well as the resource room or separate class options. Inclusion options are available at specific Pre-K and Voluntary Pre-K (VPK) school sites. These site locations currently include McMillan Pre-K Center; as well as the Holm, Weis, Jim Allen, Lincoln Park, OJ Semmes, Oakcrest, Navy Point, West Pensacola and Warrington elementary schools. The Escambia County School District's *Pre-K Disabilities Program* served 525 students, ages three to five, during the 2013-2014 school year.

<b>Pre-K Disabilities Program -- Children 3 – 5 2013-2014</b>	
<b>Disability</b>	<b>Students</b>
Other Health Impairment	20
Orthopedic Impairment	10
Speech Impaired	132
Language Impaired	49
Deaf – Hard of Hearing	4
Visually Impaired	3
Emotional Behavioral Disabilities	0
Specific Learning Disability	1
Hospital/Homebound	2
Traumatic Brain Injury	0
Autism Spectrum Disorder	40
Developmentally Delayed	264
Dual Sensory Impaired	0
Intellectually Disabled	0
Total # of Students	525
<i>Source: Escambia County School District, 2014</i>	

### 3C. Head Start Program

Of the 97 students diagnosed with a disability during the 2012-2013 year, 73 (75%) were diagnosed with a speech or language impairment, and 24 (25%) were diagnosed with a non-categorical/developmental delay.

	2010-2011	2011-2012	2012-2013
Referred/Receiving Mental Health Services	70	74	94
Total Diagnosed with a Disability	112	105	97
Types of Disabilities			
Speech or Language Impairment	64	70	73
Mental Retardation	2	0	0
Visual Impairments	2	1	0
Learning Disabilities	0	0	0
Autism	1	1	0
Non-Categorical/Developmental Delay	43	33	24
Multiple Disabilities	0	0	0

### 3D. Community Resources

It is recognized that no single agency has all the resources to meet a family's needs and that only through interagency collaboration can comprehensive services be delivered. In Escambia County, participating agencies have developed an interagency agreement to establish a collaborative system for providing quality services to children eligible for Part C Early Steps services and their families, and to facilitate a seamless system for transitioning children from Part C to Part B services at age three.

The purpose of the this *Interagency Transition Agreement* is to express and document the interagency commitment to this process during all phases of identification, service provision and transition for children (birth through kindergarten) with disabilities, and their families.

Within this agreement, procedures are outlined that enhance efforts to provide a complete continuum of family-centered, coordinated, collaborative services consistent with the requirements of Part C/Early Steps, Part B/Local Education Agencies and other service delivery systems.

Participating agencies agree to share information about children in a way that respects each family's confidentiality and facilitates the provision of services in order to avoid duplication of services and gaps in services.

The "transition period" is an important aspect of this interagency agreement. Participating agencies agree that transition is a major event in a family and child's life, and that family participation, is crucial to this process. Escambia County's participating agencies are committed to keeping each other well informed.

#### **Participating Agencies**

In addition to Sacred Heart Hospital/DEI and the School District of Escambia County, the following agencies have agreed to participate in this interagency collaboration.

**Agency for Persons with Disabilities (APD):** The Agency for Persons with Disabilities (APD) assists Escambia County residents with developmental disabilities (age 3 and older), and their families or guardians. This program helps individuals achieve personal independence and community integration

through the provision of appropriate services. **Eligibility** – Individuals ages three to five years who have, or who are at risk for, one or more of the following diagnoses are eligible to receive services: mental retardation, cerebral palsy, autism, spina bifida and Prader-Willi syndrome. The Florida Legislature determines funding for waiver services annually. Individuals and their families/guardians may apply for services at their local APD area office.

**The Center for Autism and Related Disabilities at Florida State University (FSU-CARD):** FSU-CARD is one of seven CARD centers funded by the Florida Legislature. CARD is coordinated as a grant program through the Florida Department of Education. FSU-CARD provides service in eighteen counties along the Panhandle region of northern Florida. The Pensacola office serves Escambia, Santa Rosa, and north Okaloosa counties. CARD serves individuals of any age with:

- Autism Spectrum Disorders (ASD) including Autistic Disorder, Pervasive Developmental Disorder Not Otherwise Specified (PDD-NOS), Rett's Disorder, Asperger's Disorder and Childhood Disintegrative Disorder.
- Related Disabilities including deaf-blind (hearing and vision impaired), and hearing impaired or vision impaired with other disabling conditions.

FSU-CARD provides services to individuals and their families to assist with communication, social, and behavioral issues. For children under the age of 6 years, CARD provides assistance toward diagnosis through assessments and observations.

The FSU-CARD also provides current information, consultation and support to clients, families and professionals through its lending library, workshops and guidance with visuals and curriculum. FSU-CARD offers training and partnerships to professionals and pre-professionals who serve, or are preparing to serve, this particular population. **Eligibility** – FSU-CARD services are free and are designed to build on the capacities of state and local resources, not duplicate or replace them.

**Children's Medical Services (CMS) Network:** CMS is a federal and state funded program through the Department of Health that serves financially eligible children (birth to 21) with special health care needs. CMS provides care coordination for children with long-term chronic medical conditions. Children may be referred through their family physician or pediatrician, or may self-enter. **Eligibility** -- In addition to age and financial eligibility, children will be screened by a nurse to see if they meet clinical eligibility. Children should be insured through private insurance, Medicaid or Florida Kid Care. Children who are unable to obtain insurance may receive coverage under the CMS Safety Net Package.

**Community Action Program Committee/Head Start:** The *Community Action Program Committee* and its *Head Start Program* assists members of the community through many different programs if they meet required income guidelines. Available programs include:

- Early Head Start, Head Start and VPK;
- Emergency and supportive services;
- Low Income Home Energy Assistance Program (LIHEAP);
- Employment and education assistance (Long-Term Case Management);
- Weatherization (serving Escambia, Santa Rosa and Okaloosa counties);
- Assistance with sports registration, uniform fees, tutoring, and birth certificates;
- Study assistance for adults;
- Housing referrals;
- Budgeting assistance, etc.

**CAPC Early Head Start Program:** The mission of Early Head Start is to promote healthy prenatal outcomes for pregnant women, enhance the development of very young children and promote healthy family functioning. EHS is a comprehensive and flexible program that serves 24 children in a center-based facility, 46 children (ages 0-36 months) in a home-based facility and 10 pregnant women. The program is designed to reinforce and respond to the unique strengths and needs of each individual family.

**CAPC Head Start Program:** The **Head Start Program** is funded through the U. S. Department of Health and Human Services. The Escambia County Head Start Program serves 855 three- and four-year old children each year and provides supportive services to the entire family.

Head Start's focus is "Helping Children Succeed by Getting a Head Start in Life." It is designed for children in low-income families. Head Start is a dynamic preschool program. The program assists children in becoming physically, socially, intellectually and emotionally adjusted. Head Start offers a variety of parental assistance programs and health programs. Services include:

- Social services;
- Dental services;
- Parent involvement;
- Speech, vision and hearing screening;
- Services for children with special needs;
- Individualized teaching;
- Transportation;
- Extended Day VPK Program;
- USDA approved meals;
- Male involvement;
- Literacy based education curriculum, etc.

**Department of Children and Family Services:** The Department of Children and Family Services is the state agency mandated by *Florida Statute 409* to provide social and economic services.

- **Child Protective Investigations (CPI):** All reports of allegations of abuse, neglect and/or abandonment are investigated by Child Protective Investigations. Child Protective Investigations may refer children and their families to prevention/diversion programs, voluntary protective supervision, or court-ordered services to include in-home and out-of-home care. **Eligibility** – All children and families referred to the Florida Abuse Hotline who are determined to be in need of assistance.
- **Automated Community Connection to Economic Self-Sufficiency (ACCESS):** ACCESS is the Department of Children and Family Services program that provides Food Stamps, Medicaid, and other financial assistance to eligible families. **Eligibility** – Families and individuals whose income and assets are within established State and Federal Guidelines.
- **Child Abuse Prevention and Treatment Act (CAPTA):** The Child Abuse and Treatment Act has a significant requirement for States to have provisions and procedures for the referral of children who are involved in verified cases of child abuse or neglect to early intervention services under Part C of the IDEA [42 U S C 5106a Sec 106 (b)(2)(A)(xx)]. Additionally, the Federal Individuals with Disabilities Education improvement Act of 2004 contains requirements regarding the referral of children to Part C who are under the age of three and involved in a verified case of abuse or neglect or affected by illegal substance abuse or withdrawal symptoms from prenatal drug exposure (20 U S C, Sections 1437 (a)(6)(A) and (B)).

**Division of Blind Services -- Children and Families Program:** The Division of Blind Services Children and Families Program (CFP), under the State of Florida Department of Education, facilitates the



participation of children who are blind or visually impaired within the family, community, and educational settings. Senior Rehabilitation Specialists from the Children and Families Program can serve eligible children from birth to six years of age so they may reach their developmental and educational goals needed to transition from preschool to elementary school. The following is a list of services available to parents and their child upon eligibility determination and implementation of either an *Individualized Written Rehabilitation Plan* with the *Division of Blind Services* (DBS), or DBS's participation in the child's *Family Support Plan*:

- Guidance and counseling;
- Advocacy;
- Liaison services between family and other agencies;
- Participation and representation in FSP and IEP meetings when requested by the client;
- Coordination of vision related early intervention services;
- Loaning of any current holdings of educational materials (brochures, books, videos, fliers regarding related trainings, and other related material) upon request to the family for assistance to the parents in their child's development; and
- The *Talking Books Library* services.

#### ***Eligibility –***

- 1) The presence of a bilateral visual impairment which, with the best correction for that individual, constitutes or results in a substantial impediment to the child's ability to learn, function independently, or to become employed; and
- 2) A reasonable expectation that services may benefit the child and family in terms of education, independence, and transition.

Currently, early intervention instructional services for children with visual impairments are contracted. Contract funding is provided through a general revenue allocation under F.S. 413.092, the *Blind Babies Program*.

**Early Learning Coalition of Escambia County:** The Early Learning Coalition supports families that need to access subsidized funding for early learning programs for children birth to age five and for school age children that have a preschool age sibling. Eligibility for school readiness services is based on financial need or involvement with the Department of Children and Families through protective services or receipt of TANF. Early learning programs are available throughout the county to support the needs of working families 24 hours/seven days a week.

The Early Learning Coalition of Escambia County has the following programs:

- **School Readiness** – is for families that need to access subsidized funding for early learning programs for children birth to age five and for school age children that have a preschool sibling. Early Learning programs are available throughout the county to support the needs of working families 24 hours/seven days a week. The Coalition supports a variety of professional development opportunities for staff of early learning programs and families of young children. **Eligibility** – for school readiness services is based on financial need or involvement with the Dept. of Children and Families through protective services or receipt of Temporary Assistance for Needy Families (TANF)
- **Voluntary Pre-kindergarten (VPK):** The Coalition issues eligibility certificates for the VPK. VPK provides a high-quality pre-k program for all 4-year-olds at an eligible public or private provider chosen by the family. **Eligibility** – Must be a resident of Florida and the child must be four years old by September 1<sup>st</sup> of the year in which they are participating. Parents may select either a 540 hour school year program or a 300 hour summer program.

**Escambia County Health Department:** The Escambia County Health Department provides a number of programs and services that support the transition of children from Part C to Part B. These include:

- **Healthy Start Program:** The Healthy Start Program has the primary objective of addressing the prenatal and infant care needs of all pregnant women and infants up to age 3 who are at greater risk of poor outcomes in their pregnancy or during the first years of life. The program's focus is a holistic approach to maternal and child health – service planning, community involvement, funding and provision of services to help reduce these risks. This is accomplished through the development and implementation of coordinated systems of maternal and child healthcare, eliminating barriers to care by providing pregnant women and babies with the resources and help they need to have a healthy pregnancy and a healthy birth. **Eligibility** – Eligibility is based on need and level of risk for poor outcomes at birth or in the first years of life using a prenatal or postnatal infant screening process.
- **Women, Infants and Children (WIC):** The Federal Supplemental Nutrition Program provides vouchers for free food to use at local grocery stores as well as nutrition and breastfeeding counseling for women and infants and children under 5 years of age. To be eligible, one must be:
  - A pregnant woman, or
  - A breastfeeding woman, or
  - A woman who has recently delivered, or
  - An infant or child under 5 years of age, and
  - Financially eligible (Medicaid, Food Stamps and wages/TANF recipients are automatically qualified).
- **School Health/ELC and Head Start Nurses:** The Escambia County Health Department provides services to children and students in childcare programs, Pre-K, and public schools.
- **Immunizations:** All child and adolescent immunizations in accordance with the Bureau of Immunizations Schedule and the Florida School Guidelines are available to eligible children ages 0 – 18 free of charge.
- **Dental:** Medicaid eligible Children and those in Head Start may receive comprehensive emergency care, cleanings, fluoride treatment, sealants, restorative (fillings), extractions, and x-rays.

**90 Works Programs:** The 90 Works Programs are designed to help families overcome homelessness, poverty and family violence by becoming self-sufficient. Programs are geared to promote safety, stability and support in order to move families from being in crisis and vulnerable. Each program has specific eligibility requirements. 90Works is built on a case management model that focuses on moving families to stability in areas of housing, transportation, income, health, support and safety. Programs under the Families Count umbrella in Escambia County are:

- **Child Protection Team (CPT):** The Child Protection Team is a medically led multidisciplinary team that provides a variety of assessment activities critical in identifying and evaluating child abuse, abandonment, and neglect. The recommendation from these assessments provide for effective interventions and treatments in securing successful long term outcomes for children and families. Children from birth to thirty-six months who have been determined to be victims of substantiated case of child abuse or neglect or who have demonstrated a developmental delay will be referred to the local Early Steps program for further assessment and follow up.
- **Children's Medical Foster Care (CMFC):** The Children's Medical Foster Care program operates in conjunction with Children's Medical Services and is funded by the Florida Department of Health, Children's Medical Services. CMFC is part of a community based foster care system that has been designed to allow medically complex children that are unable to safely remain in the care of the families or guardians the opportunity to live and receive medically necessary care in the most cost effective and least restrictive environment. CMFC staff provides direct, intensive nursing and social work care coordination to the medical foster care child and family.

**FamiliesFirst Network:** The FamiliesFirst Network is the child protection division of Lakeview Center, Inc., under contract with the Department of Children and Families as the Circuit 1 *lead agency for community based care*. Services cover the four counties in Circuit 1 (Escambia, Santa Rosa, Okaloosa and Walton) and include in-home protective supervision, out-of-home care (relative, non-relative, and foster care), adoptions, case management, court facilitation, foster home licensing, and a variety of child/family supports through members of the sub-provider network. **Eligibility** – Referrals are from the Department of Children and Families protective investigators, resulting from allegations of child abuse or neglect.

**Florida Diagnostic and Learning Resources System (FDLRS)/Emerald Coast :** The Florida Diagnostic and Learning Resources System is a statewide network of nineteen centers serving families, teachers, agencies and other professionals who work with exceptional students. Our local FDLRS Center, FDLRS/Emerald Coast, provides support services to district Exceptional Student Education (ESE) programs in Escambia, Santa Rosa and Okaloosa counties in four functional areas: Child Find, Human Resource Development, Instructional Technology, and Parent Services.

- **Child Find:** Child Find assists in the location, identification and evaluation of all children and youth birth – 21 years of age, with emphasis on children 3-5 years of age who have, or are at risk of developing, special or unique educational needs. Child Find will provide free developmental, speech, language, hearing and vision screenings to determine if a need exists for further evaluation. Children referred for further evaluation may be eligible for services in the public school system. Referrals are made to other agencies as appropriate. **Eligibility** – Any child/student not enrolled in public school. Children attending public schools will be screened and evaluated by the public school the child attends. Children receiving services from Part C can begin to transition to Part B services through Child Find at age two years and three months.

Child Find specialists are also available upon request to provide information or training based on the *Grow to 5!* modules. *Grow to 5!* is a series of 13 modules which provide information and resources to families, early childhood educators, health care providers, and other related service personnel who work with young children.

Additional services are available to district, agency, community and other personnel working with students with disabilities and/or gifted students and their families, and include:

- **Human Resource Development:** Specialists provide direct service to teachers, parents, agency personnel and others working with exceptional students through in-service activities and individual consultation designed to improve student outcomes. Training provided is research-based and designed to meet data-driven needs.
- **Instructional Technology:** Instructional technology specialists provide consultation and training in assistive technology to teachers, parents, agency personnel, and others working with exceptional students. Instructional technology workshops are offered as requested. A mobile technology lab is available by appointment for evaluation of assistive devices and specialized software.
- **Parent Services:** Parent services specialists assist districts in the development of partnerships between families and professionals that allow for shared responsibility for improving the education of children and youth who are exceptional and/or have special or unique educational needs. Training is offered on a variety of topics throughout the year to assist families in helping their ESE or gifted child be successful in school. A listing of scheduled training can be found at [www.fdlrswestgate.org](http://www.fdlrswestgate.org). Individual consultation is also available, as is a resource library with books and videotapes on various topics in exceptional and gifted education. The library database is also available via the website. The Parent Page newsletter is mailed twice a

year to homes of all ESE and/or gifted education students in the region. Parent specialists also participate in community events as appropriate, including annual Exceptional Saturday events in Escambia and Okaloosa counties.

**Florida Inclusion Network:** The Florida Inclusion Network maintains a district and regional network of facilitators, consultants and practitioners to assist schools and school districts in the implementation of effective and inclusive educational practices. To fulfill this purpose there are currently nine district fiscal agents and seven university fiscal agents operating at total of 18 offices. Facilitators in three of the FIN sites perform specialized tasks of product development, statewide network support, technology applications and network administration. Facilitators in the remaining sites provide professional development, technical assistance, and information dissemination to schools and school districts throughout the state. FIN/UWF supports the Escambia County network. Resources and information about FIN can be found on their website at [www.FloridaInclusionNetwork.com](http://www.FloridaInclusionNetwork.com).

**Independence for the Blind of West Florida, Inc.:** The Early Intervention Program is an itinerant--based program designed for infants and children, from birth to age 5, who are blind or visually impaired. The goal is to teach them skills needed to develop school readiness, improve self-sufficiency and maximize physical, emotional, mental and social skills development.

**Infant Mental Health of Northwest Florida:** Infant Mental Health of Northwest Florida is a collaboration of three county chapters of the Florida Association for Infant Mental Health to promote a system of infant mental health services and qualified service providers. Infant mental health is the ability of children from birth to age 5 to grow, develop and learn in a way that enhances their social and emotional health, both as an individual and in their relationship with others. Services fall into three service provider levels: Level I or frontline caregivers including families and child care providers; Level II includes interventionists and home visitor services; and Level III includes mental health therapists. Level III services may include screening, parent education, training and technical assistance for child care providers, intervention home visits for families of children with risk factors and mental health treatment.

**Sacred Heart Hospital/Early Steps:** The Early Steps Program is a component of IDEA. It is a family focused, multidisciplinary, community-based program that provides a comprehensive system of early intervention services for infants and toddlers in Escambia, Santa Rosa, Okaloosa and Walton Counties with a developmental delay or an established condition, and their families. Services are provided in the child's natural environment. Services include: referral, screening, family assessment, first contact, eligibility evaluation, assessment, service coordination, individualized family support plan development, funding for services as identified, delivery of services, evaluation of strategies, periodic review, annual reassessment, and transition planning. **Eligibility** – Eligibility is based on a 1.5 standard deviation below the mean on a standardized test protocol, or an established condition that places a child at risk for developmental delay. All families, regardless of income, are potentially eligible.

The primary purpose of the Early Steps Program is to implement the Individuals with Disabilities Education Act (IDEA), Part C, which ensures early intervention services for children birth to 36 months of age with an established condition having a high probability of developmental disability or developmental delay in any one area of development

**School District of Escambia County:** The school system is responsible for conducting evaluations and intervention activities in the areas of speech and language, gross and fine motor, perceptual, cognitive, audiological, social, adaptive, and psychological development for children ages birth through 21. Programs include:

- **Migrant Education Program (MEP):** The overarching purpose of the migrant education program is to ensure that children of migrant workers have access to and benefit from the same free, appropriate

public education, including public preschool education provided to other children. MEP funds help state and local educational agencies remove barriers to the school enrollment, attendance and interagency collaboration to promote achievement of migrant children.

- ***Title I VPK Pre-Kindergarten Program:*** The Title I VPK program serves children whose parent or guardian resides in a Title I attendance area. The Pre-Kindergarten Program in collaboration with Head Start, Title I, ESE and Voluntary Pre-Kindergarten. The prekindergarten program includes Inclusion, Migrant, family literacy and Title I Head Start Collaborative classes. These classes are located at various school sites in the county. The District's pre-kindergarten program is funded collaboratively by Title I, Health Start, the Early Learning Coalition, and the IDEA grant. Additionally, the school district operates a Summer VPK program for children who have not participated in the VPK program and will be entering kindergarten in the fall which is funded through Florida's voluntary pre-kindergarten program.

**In addition to the programs that have signed the collaborative agreement, other programs and services include the following:**

The **Developmental Evaluation and Intervention (DEI) Program** follows high risk infants in the Intensive Care Nursery at Sacred Heart Hospital who are born with medical conditions and/or developmental concerns. The DEI Program is operated by Sacred Heart Hospital with a grant from Children's Medical Services. The DEI Program has been designated the lead agency in for Part H/C of the IDEA. The core services conducted by DEI are child find (identification and screening), service coordination, multidisciplinary evaluation and family support planning. Referrals are made to community providers for direct services including audiology, educational services, psychological services, occupational therapy, family training, physical therapy, vision services, nutrition, transportation, and speech and language services.

The **Council on Aging of West Florida** is a non-profit organization that has served seniors and their families since 1972. It provides community based home services in an effort to enable the elderly to live a healthy, safe and independent life in their own familiar surroundings. The council's services are extremely important for grandparents who are the caregivers for young children. The Council on Aging of West Florida provides programs and services such as Meals on Wheels, congregate meal sites and senior centers, Adult Day Health care and Alzheimer's respite care, case management, information and referral services, Foster Grandparent and senior Companion programs.

**Emerald Coast Pediatric Primary Care, Inc.** is sponsored by the Florida Department of Health under a contract with the Children's Medical Services Program. The purpose of the Emerald Coast Pediatric Primary Care is to ensure that the pediatric population of its four-county service area enters a comprehensive, coordinated system of pediatric health care as early in life as possible. Children who receive Medicaid or Title XXI funding are eligible for the program with the main priority being CMS clients and their siblings. Currently the program has more than 1,200 children enrolled who reside in Escambia County.

The **Infant Hearing Impairment (IHIP) Program**, part of the Developmental Evaluation and Intervention Program, serves all *Sacred Heart Hospital Intensive Care Nursery* infants who have risk factors for hearing impairment according to state guidelines. If an infant fails two hearing tests the infant is referred for a complete hearing evaluation.

The **Pediatric Acute Care Clinic** at Sacred Heart Hospital offers urgent care for children for children birth to age 18. All children are accepted regardless of payment source. The hours of operation are Monday through Friday from 8:30 am to 8:00 pm, and Saturday and Sunday from 1:00 pm to 8:00 pm.

The **Sacred Heart Pediatric Care Center** offers well and sick outpatient care for children birth to 18 years of age. The care center includes acute care, primary care, immunizations, laboratory testing, and diagnostic evaluation. The clinic operates from 8:30 am – 4:00 pm, Monday through Friday. Appointments are required for clinical services. All payment sources are accepted including Medicaid and Medipass.

#### ***4. Data regarding education, health, nutrition and social service needs of Head Start eligible children and their families***

##### **4A. Education**

<b>Education Levels By Age Escambia County</b>	<b>Total</b>	<b>Male</b>	<b>Female</b>
Population 18 to 24 years	38,834	20,855	17,979
Less than high school graduate	14.3%	15.3%	13.2%
High school graduate (includes equivalency)	32.2%	39.2%	24.1%
Some college or associate's degree	48.0%	40.4%	56.9%
Bachelor's degree or higher	5.4%	5.2%	5.8%
Population 25 years and over	195,863	94,261	101,602
Less than 9th grade	3.8%	4.1%	3.5%
9th to 12th grade, no diploma	9.1%	9.4%	8.8%
High school graduate (includes equivalency)	29.3%	29.7%	28.9%
Some college, no degree	24.2%	22.7%	25.6%
Associate's degree	10.4%	9.5%	11.3%
Bachelor's degree	14.9%	15.3%	14.6%
Graduate or professional degree	8.3%	9.3%	7.3%
Percent High School Graduate or Higher	87.1%	86.5%	87.7%
Percent bachelor's degree or higher	23.2%	24.7%	21.9%
Population 25 to 34 years	38,367	19,763	18,604
High school graduate or higher	88.7%	85.0%	92.5%
Bachelor's degree or higher	23.6%	20.9%	26.4%
Population 35 to 44 years	34,246	17,195	17,051
High school graduate or higher	89.4%	86.7%	92.1%
Bachelor's degree or higher	25.3%	22.4%	28.1%
Population 45 to 64 years	79,814	38,599	41,215
High school graduate or higher	89.2%	88.3%	90.0%
Bachelor's degree or higher	23.7%	25.6%	21.9%
Population 65 years and over	43,436	18,704	24,732
High school graduate or higher	80.3%	84.2%	77.4%
Bachelor's degree or higher	20.3%	28.7%	14.0%

Source: U. S. Census Bureau, 2008-2012 American Community Survey

<b>Education Levels By Age Florida</b>	<b>Total</b>	<b>Male</b>	<b>Female</b>
Population 18 to 24 years	1,755,155	899,471	855,684
Less than high school graduate	17.8%	20.9%	14.6%
High school graduate (includes equivalency)	30.9%	33.5%	28.2%
Some college or associate's degree	43.6%	39.4%	48.0%
Bachelor's degree or higher	7.7%	6.1%	9.3%
Population 25 years and over	13,127,624	6,286,615	6,841,009
Less than 9th grade	5.6%	5.8%	5.4%
9th to 12th grade, no diploma	8.6%	9.3%	7.9%
High school graduate (includes equivalency)	29.8%	29.4%	30.3%
Some college, no degree	21.1%	20.4%	21.8%
Associate's degree	8.7%	7.8%	9.5%
Bachelor's degree	16.8%	17.1%	16.6%
Graduate or professional degree	9.4%	10.2%	8.6%
<b>Percent High School Graduate or Higher</b>	85.8%	84.9%	86.7%
Percent bachelor's degree or higher	26.2%	27.3%	25.2%
Population 25 to 34 years	2,307,813	1,160,960	1,146,853
High school graduate or higher	86.9%	83.9%	90.0%
Bachelor's degree or higher	26.3%	22.4%	30.4%
Population 35 to 44 years	2,443,968	1,214,843	1,229,125
High school graduate or higher	88.2%	86.1%	90.2%
Bachelor's degree or higher	28.6%	26.6%	30.5%
Population 45 to 64 years	5,078,279	2,443,409	2,634,870
High school graduate or higher	88.0%	86.8%	89.0%
Bachelor's degree or higher	27.1%	28.4%	25.9%
Population 65 years and over	3,297,564	1,467,403	1,830,161
High school graduate or higher	80.0%	81.3%	79.0%
Bachelor's degree or higher	22.9%	29.8%	17.3%

Source: U. S. Census Bureau, 2008-2012 American Community Survey

### Total School Enrollment

<b>Total School Enrollment Escambia County</b>	<b>Total Estimate</b>	<b>Public School (%)</b>	<b>Private School (%)</b>
Population 3 years and over enrolled in school	75,098	78.5%	21.5%
Nursery school, preschool	4,630	64.2%	35.8%
Kindergarten to 12th grade	45,256	87.2%	12.8%
Kindergarten	4,011	85.2%	14.8%
Elementary: grade 1 to grade 4	13,307	86.9%	13.1%
Elementary: grade 5 to grade 8	13,844	84.9%	15.1%
High school: grade 9 to grade 12	14,094	90.4%	9.6%
College, undergraduate	22,794	65.0%	35.0%
Graduate, professional school	2,418	70.3%	29.7%

Source: U. S. Census Bureau, 2008-2012 American Community Survey

<b>Total School Enrollment Florida</b>	<b>Total Estimate</b>	<b>Public School (%)</b>	<b>Private School (%)</b>
Population 3 years and over enrolled in school	4,582,703	82.4%	17.6%
Nursery school, preschool	285,402	51.8%	48.2%
Kindergarten to 12th grade	2,958,447	88.6%	11.4%
Kindergarten	221,443	85.4%	14.6%
Elementary: grade 1 to grade 4	886,646	88.6%	11.4%
Elementary: grade 5 to grade 8	908,318	88.4%	11.6%
High school: grade 9 to grade 12	942,040	89.7%	10.3%
College, undergraduate	1,125,673	78.3%	21.7%
Graduate, professional school	213,181	57.9%	42.1%

Source: U. S. Census Bureau, 2008-2012 American Community Survey

### Education Level of Head Start Parents

<b>Category</b>	<b>2010-2011</b>	<b>2011-2012</b>	<b>2012-2013</b>
Less than High School Diploma	168	181	191
High School Diploma or GED	654	665	640
Some College, Vocational School or Associate's Degree	47	37	30
Bachelor's or Advanced Degree	14	14	10

### School Readiness

Florida was one of the first states in the country to offer free pre-kindergarten for all 4-year-olds regardless of family income. The *Voluntary Pre-Kindergarten (VPK) Education Program* (VPK) prepares early learners for success in kindergarten and beyond. Children must live in Florida and be four years old on or before September 1<sup>st</sup> of the current school year to be eligible.

By law [Section 1002.69(5), Florida Statutes (F.S.)], the Florida Department of Education/State Board of Education is required to calculate and set a minimum kindergarten readiness rate every year for each private or public school VPK Provider of either the school-year program (540 hours) or summer program (300 hours). The *VPK Provider Kindergarten Readiness Rate* measures how well a VPK provider prepares four-year-olds to be ready for kindergarten based upon the *Florida Early Learning and Developmental Standards for Four-Year Olds (2011)*, which describes what four-year-old children should know and be able to do by the end of the VPK program in the areas of physical health, approaches to learning, social and emotional development, language and communication, emergent literacy, mathematical and scientific thinking, motor development, social studies, and the arts.

In 2011, the legislature changed the previous definition of “ready for kindergarten” to include only those children who were ready on both the *Early Childhood Observation System* (ECHOS™) and the *Florida Assessments for Instruction in Reading* (FAIR). As a result of this change, the 2010-11 VPK Provider Kindergarten Readiness Rate is expressed as the percentage of children ready on both measures on a scale of 0-100 and displayed as:

- Children Ready for Kindergarten (At or Above 70%)
- Children Screened On Both Measures
- Percent of Children Ready for Kindergarten

Of the 101 VPK programs reviewed by the *Early Learning Coalition of Escambia County* during the 2012-2013 term, 23 (23%) did not meet the minimum threshold and were labeled as a “Low Performing Provider.”



County	School Readiness Enrollments By Age						Special Needs <sup>1</sup>	Total*
	Infant	Toddler	2 Yr	3 Yr	4 Yr	5 Yr		
State	10,952	23,037	29,504	31,957	31,284	21,599	921	211,075
Escambia	278	510	587	574	575	408	42	4,598

*Florida Office of Early Learning, School Readiness Fact Book, FY 2013-2014, As of April 2014.*

### **Number of elementary, middle, high school and college students using tutoring services in the county.**

According to the *No Child Left Behind Act*, supplemental educational services include free tutoring and other supplemental academic enrichment services that are in addition to instruction provided during the school day. Title I public schools that fail to meet adequate yearly progress toward meeting state academic standards for three or more consecutive years must offer supplemental educational services to eligible students.

During the 2012-2013 school term, 44 public or charter schools were designated as “Title I” schools. Among those 44 schools, 10,487 students were eligible to receive tutoring services through the “Supplemental Education Services” program. Of those eligible, 1,700 students (elementary, middle and high school students combined) participated in the program (Escambia County School District, 202-2013).

Title III funds provided through the U. S. Department of Education, allows a portion of the funding to be used for student retention; which may include tutorial services. The University of West Florida is a designated “Title III” college within Escambia County. Although the exact number of students served was not available at the time of this report, UWF does offer free tutoring to its students. These tutoring sessions are often taught by students and can be accessed by appointment.

## Achievement of Children w/Disabilities —Escambia and Florida

The *Florida Department of Education, Bureau of Exceptional Education and Student Services* administers programs for students with disabilities. Based upon the Department's *2012-2013 Annual Progress Report*, 47.7% of the young people with an *Individual Education Plan* (IEP) graduated from high school with a regular diploma during the 2010-2011 school term; meeting the Department's targeted goal.

The need for additional effort is recognized in meeting targeted reading and math goals:

<b>Target Objective</b>	Indicator 3C – 34% of students with disabilities in grades three through ten will demonstrate proficiency in reading; and 37% of students with disabilities in grades three through ten will demonstrate proficiency in math
<b>Actual (2012-2013)</b>	In 2012-13, 28.4% of students with IEPs in grades three through ten demonstrated proficiency in reading (58,108/204,368) and 31.7% of students with IEPs in grades three through ten demonstrated proficiency in math (62,759/197,784).

<b>Target Objective</b>	Indicator 3A – 10% of school districts will meet Annual Measurable Outcome (AMO) targets in reading and 15% will meet AMO targets in math.
<b>Actual (2012-2013)</b>	In 2012-13, 1% (1/73) of districts met AMO targets in reading; 4% (3/73) of districts met AMO targets in math for the students with disabilities subgroup.

According to the Escambia County school district's *2010-11 Adequate Yearly Progress (AYP)* report, only 30% of students with disabilities scored at or above grade level in reading (with a goal of 79% or more); and 33% of students with disabilities scored at or above grade level in math (with a goal of 80% or more). In 2009, students with disabilities experienced a graduation rate of 30%; while 31% graduated in 2010.

### 4B. NUTRITION

#### Free and reduced lunches in Escambia County School District

As of for the 2013-14 school term, 26,458 children were eligible to receive free and reduced school lunches in the Escambia County School District. Seven (7) schools within the district, that also house Head Start classrooms or collaborative classrooms, report having an 80% or higher rate of children eligible for the free/reduced lunch program. Those schools include: Ferry Pass (82%), Ensley (86%), Myrtle Grove (84%), O. J. Semmes (95%), Sherwood (90%), Oakcrest (95%), and Lincoln Park (90%).

#### Participants in WIC

In March 2014, 444,812 pregnant women and children participated in the WIC program throughout Florida. During this same month, 11,006 pregnant women and children in Escambia County were eligible for enrollment in the WIC program.

#### Early Head Start and Head Start Family Participation in WIC

In 2012-2013, eighty-nine percent (89% = 350) of the Early Head Start families were participating in the WIC program. Fifty-four percent (54% = 299) of the Head Start families were participating in the WIC program.

### 4C. HEALTH/MEDICAL

The amount of health resources available in a county is used as a measure for access to health care. For this reason, a higher number of health resources are viewed as desirable, and fewer are viewed as a potential barrier to care. According to data compiled by the Florida Department of Health and reported through its CHARTS system, there were 814 licensed physicians practicing in Escambia in 2011; which is at a rate of

271.7 per a population of 100,000. This number is an increase from the 737 licensed physicians documented in 2009. However, the number of dentists slightly decreased from 150 in 2009 to 145 in 2011. The rate of dentists in Escambia County (48.4 per 100,000) is lower than the rate of dentists in the state of Florida as a whole (53.4 per 100,000).

The table below provides even greater detail regarding physician availability in Escambia County.

**Physician Availability**  
*Data Based on 2011 Fiscal Year*

Physician Type	Number	Rate per 100,000 Population	
	Escambia County	Escambia County	Florida
Total Licensed Dentists	145	48.4	53.4
Total Licensed Physicians	814	271.7	260.2
Licensed Family Practice Physicians	94	31.4	23.9
Licensed Internists	140	46.7	48.1
Licensed OB/GYN	33	11.0	9.8
Licensed Pediatricians	76	25.4	21.3

*Sources: Division of Medical Quality Assurance and Office of Planning, Evaluation and Data Analysis, Florida Department of Health; Florida Agency for Health Care Administration*

In Escambia County, the rate of available physicians per a population of 100,000 is slightly higher than the state as a whole for licensed physicians, family physicians, OB/GYN and pediatricians. Internists and dentists are less available for Escambia County than Florida's rate per a population of 100,000.

**Physicians and Dentists Acceptance of Medicaid**

In August 2012, Dr. Sandra Decker, PhD, an economist with the CDC's National Center for Health Statistics (NCHS) presented research titled, "*Physician Acceptance of New Medicaid Patients by State in 2011*" at the NCHS National Conference on Health Statistics. Using data on office-based physicians from the 2011 National Ambulatory Medical Care Survey Electronic Medical Records Supplement, Dr. Decker found that 96% of the physicians surveyed accepted new patients in 2011. However, 31% (1/3) were unwilling to accept any new Medicaid patients; 17% would not accept new Medicare patients; and 18% of physicians would not accept new privately insured patients.

The acceptance rate is linked to reimbursement rates; and ultimately access to care. Physicians in smaller practices and those in metropolitan areas were less likely than others to accept new Medicaid patients. At this time, state level data was the best information identified as it relates to physician acceptance of Medicaid patients. In Florida, 59.1% of office-based physicians accepted new Medicaid patients in 2011; compared to the national average of 69.4 percent.

Higher state Medicaid-to-Medicare fee ratios were correlated with greater acceptance of new Medicaid patients. Dr. Decker's findings will serve as a useful baseline from which to measure the anticipated impact of Affordable Care Act provisions that could boost Medicaid payment rates to primary care physicians in some states, while increasing the number of people with health care coverage.

Full Report: Decker, S. (August 2012). "*In 2011, Nearly One-Third of Physicians said They Would Not Accept New Medicaid Patients, But Rising Fees May Help.*" Health Affairs. Vol. 31, No. 8.

## Medical Facilities in Escambia County

2011

Hospital and Nursing Home Beds	Number	Rate per 100,000 Population	
	Escambia County	Escambia County	Florida
Total Hospital Beds	1,527	509.7	319.2
Total Acute Care Beds	1,213	404.9	262.9
Total Specialty Care Beds	314	104.8	56.3
Total Nursing Home Beds	1,723	575.1	438.0

*Sources: Division of Medical Quality Assurance and Office of Planning, Evaluation and Data Analysis, Florida Department of Health; Florida Agency for Health Care Administration*

Escambia County has more total hospital beds, acute care beds, and specialty care beds per population than the state as a whole. However within the county, there has been a slight decrease in available specialty care beds (from 365 to 314) and hospital beds (from 1,543 to 1,527) since 2009. Total acute care beds have increased from 1,178 to 1,213 between 2009-2011.

### 4D. PUBLIC HEALTH INDICATORS

The Florida Department of Health maintains a comprehensive data analysis and reporting system that compares county-state performance in achieving goals that Florida has adopted regarding selected key public health indicator areas. This data, found at [www.floridacharts.com](http://www.floridacharts.com), reflects how Escambia County compares with Florida as a whole.

Public Health Indicators 2010-2012		
Indicator	Escambia County	Florida
<b>1. Low Birth Weight</b>		
Percent of births under 1,500 grams	1.6	1.6
White	1.2	
Black	2.6	
Hispanic	1.9	
Percent of births under 2,500 grams	10.4	8.7
White	8.4	
Black	15.1	
Hispanic	8.0	
<b>2. Infant Mortality</b>		
Infant Deaths (0-364 days per 1,000 births)	8.6	6.3
White	6.0	
Black	14.1	
Hispanic	9.4	
Neonatal Deaths (0-27 days per 1,000 births)	5.5	4.2
White	4.0	
Black	9.0	
Hispanic	7.8	
Post-neonatal Deaths (28-364 days per 1,000 births)	3.1	2.2

Public Health Indicators 2010-2012		
Indicator	Escambia County	Florida
White	2.0	
Black	5.1	
Hispanic	1.6	
<b>3. Prenatal Care</b>		
Percent births receiving 1 <sup>st</sup> trimester of prenatal care	79.5%	79.9%
White	84.5%	
Black	68.2%	
Hispanic	76.9%	
<b>4 Teen Pregnancy</b>		
Births to mothers 10-14 per 1,000	0.7	0.4
Births to mothers ages 15-19 per 1,000	40.7	29.6
White	31.9%	
Black	64.8%	
Hispanic	30.4%	
Percent of Births to Unwed Mothers	50.4	47.7
White	36.6%	
Black	82.1%	
Hispanic	40.3%	
<b>5. Enteric Disease Rate per 100,000</b>		
Enteric disease rate per population of 100,000 <i>Source: Florida Department of Health, Division of Public Health Statistics &amp; Performance Management, 3-year rolling rates (2010-2012)</i>	74.3	63.9
<b>6. Reported AIDS Cases</b>		
AIDS cases at a three-year rate per 100,000 population <i>Source: Division of Disease Control, Florida Department of Health 2010-2012</i>	12.7	16.3
<b>7. Tuberculosis</b>		
Tuberculosis cases at a three-year rate per 100,000 population <i>Source: Division of Disease Control, Florida Department of Health 2010-2012</i>	2.2	2.9
<b>8. Immunizations</b>		
Percent of kindergarten children fully immunized <i>Source: Florida Department of Health, 2013-2014 School Year (Public and private schools as of November 2013)</i>	94.7%	93.2%
Percent of 7 <sup>th</sup> grade children fully immunized <i>Source: Florida Department of Health, 2013-2014 School Year (Public and private schools as of November 2013)</i>	95.5%	96.6%
<b>9. Access to Dental Care</b>		
Adults who could not see a dentist in the past year due to cost <i>*2007 Telephone Survey</i>	20.1%	19.2%
Adults who visited a dentist or a dental clinic in the past year. <i>*2010 Telephone Survey</i>	50.6%	64.7%

Public Health Indicators 2010-2012		
Indicator	Escambia County	Florida
<b>10. Breast Cancer</b>		
Breast cancer age adjusted rate of women and men per 100,000 <i>Source: The Florida Cancer Data System, 2012</i>	70.86	59.24
Percent of women 40 years of age or older who received a mammogram in the past year.	62.8%	61.9%
<b>11. Cervical Cancer</b>		
Age adjusted rate of women per 100,000 <i>Source: The Florida Cancer Data System, 2012</i>	4.46	4.12
<b>12. Smoking Deaths</b>		
Smoking-attributable mortality rate per 100,000 >age 35 <i>Source of State Data: CDC, State Highlights, 2010</i> <i>Source of County Data: 2004-2006 most recent data available</i>	272.5	258.8
<b>13. Premature Death</b>		
Age-adjusted years of potential life lost for population < 75 years of age per 100,000 <i>Source: Health Indicators Warehouse, www.healthindicators.gov</i>	9,309.7	7,310.0

\*Data source: Behavioral Risk Factors Surveillance Telephone Survey conducted by the Florida Department of Health, Bureau of Epidemiology. Approximately 500 adults were surveyed in each county in the years 2002, 2007, and 2010.

#### 4E. MAJOR CAUSES OF DEATH IN ESCAMBIA COUNTY (by Race)

With the exception of deaths by cirrhosis and AIDS/HIV, the age-adjusted death rate for major causes of death in Escambia County exceed those for the state as a whole. In Escambia County, the age-adjusted death rates by heart disease; cancer; chronic lower respiratory disease (CLRD); stroke; diabetes; motor vehicle crash and pneumonia/influenza exceed rates in those same categories for the whole state of Florida. The only exceptions are death by cirrhosis at a rate of 9.0 in Escambia County compared to 10.6 as a state, and death by AIDS/HIV with rates relatively equal at 5.1 (Escambia County) and 5.0 (Florida).

There are also disparities identified among the White and Black/African-American populations. Among 7 of the 10 indicators analyzed (including total deaths), age-adjusted death rates were higher among members of the Black/African-American population. Exceptions in Escambia County include CLRD, Pneumonia/Influenza and Cirrohosis. Exceptions in the state of Florida, include CLRD, a Motor Vehicle Crash and Cirrohosis.

Resident 3-Year Age-Adjusted Death Rates, 2010-12, by Cause	Escambia County			Florida		
	White	Black	All Races	White	Black	All Races
Total Deaths	845.8	1,051.5	871.7	674.5	765.8	682.0
Heart Disease	178.1	245.8	187.3	153.5	176.9	155.5
Cancer	184.0	203.8	185.1	161.1	166.5	160.4

Resident 3-Year Age-Adjusted Death Rates, 2010-12, by Cause	Escambia County			Florida		
	White	Black	All Races	White	Black	All Races
CLRD*	55.3	33.9	50.8	40.9	23.2	39.0
Stroke	43.3	82.3	49.7	29.6	48.0	31.5
Diabetes	20.7	60.7	27.5	17.6	39.4	19.6
Motor Vehicle Crash	13.8	16.2	14.1	12.8	12.1	12.3
Pneumonia/Influenza	11.8	11.5	11.6	8.6	11.0	8.8
Cirrhosis	11.0	1.7	9.0	11.7	5.6	10.6
AIDS/HIV	1.6	18.5	5.1	2.2	21.0	5.0

Data Source: Florida Office of Vital Statistics, Florida Department of Health CHARTS System

\*Chronic Lower Respiratory Disease

Mortality trends as reported by the Florida Department of Health find that there has been an overall decline in age-adjusted death rates from 1970 to 2003. Though the gap between death rates of Nonwhites and Whites is diminishing, Nonwhites experienced significantly higher age-adjusted death rates during the period than did Whites.

The overall decline in age-adjusted death rates in the last 30 years can be largely attributed to a 43.7% decrease in the rate of deaths due to heart disease. Even with the drop in rates, heart disease continues to be the leading cause of death in Florida. Although there has been a slight reduction in rates, cancer deaths remain relatively the same and rank as the second leading cause of death. There have also been significant decreases in age-adjusted death rates for six other leading causes of death. For example, the age-adjusted death rates for stroke decreased by 65.2%, the largest reduction in rates for any of the leading causes of death.

Since 1970, increases in age-adjusted death rates have occurred for three of the leading causes of death: chronic lower respiratory disease, diabetes, and kidney disease. Chronic lower respiratory disease, which includes asthma deaths, increased by 109.4%. Diabetes deaths increased by 18.9% and deaths attributed to kidney disease increased by 106.5%. Since 1980, the first year for which data are available, deaths due to Alzheimer's disease have also increased steadily.

The total age-specific mortality rate for children under 1 year of age has decreased from 1970 to 2000. The age-specific rate of death caused by perinatal conditions—the leading cause of death in 1970 and 2000 for children less than 1 year of age—decreased by more than two-thirds over the 30-year period. *Congenital anomalies* ranks as the second leading cause of death for children less than 1 year of age.

In 2000, unintentional injury was the leading cause of death in Florida for persons ages 1 to 44. The age-specific rate of death due to unintentional injuries decreased by more than 50% for children ages 1 to 4 from 1970 to 2000. For residents ages 45-74, cancer is the leading cause of death. HIV/AIDS now ranks as one of the top five causes of death for Florida residents ages 25 to 54.

## Robert Wood Johnson Foundation's *County Health Rankings & Roadmaps* Report

The *County Health Rankings & Roadmaps* report (2014) released by the Robert Wood Johnson Foundation is a helpful tool used to interpret Escambia County's overall health status in a snapshot. According to this report, Escambia County ranks 57<sup>th</sup> out of Florida's 67 counties on health outcomes; compared to a higher ranking of 47<sup>th</sup> in 2011. Health outcomes account for morbidity and mortality, while health factors include health behaviors, clinical care, social and economic factors, and the physical environment.

Unfortunately, the rankings show that Escambia County's previously strong area of clinical care dropped from 6<sup>th</sup> place (2011) to 30<sup>th</sup> (2014). This ranking includes statistics regarding the number of uninsured adults, primary care providers to population ration, the number of preventable hospital stays, and the percent of Medicare enrollees who receive screenings for diabetes and breast cancer. In comparison, there was a decrease in the number of diabetic screenings (from 83% to 78%) and a decrease in the number of mammography screenings (from 64% to 61%). However, this category now includes two additional factors that were not included in 2011. The number of dentist per patient (1,935:1) and the number of mental health providers per consumer (857:1).

The report also sheds light on factors that are resulting in poor health results exhibited by a portion of Escambia County residents and what more the community can do to make the county a healthier place to live. Compared to 2011 reports, premature deaths increased from 9,184 to 9,310; which is still higher than Florida's average of 7,310. Escambia County residents are also experiencing a high incidence of low birth weight, adult obesity at 30% of the population and a high incidence of alcohol-impaired driving deaths.

### 4F. COMMUNICABLE DISEASE IN ESCAMBIA COUNTY

Sexually Transmitted Diseases (STD)	Escambia County		Florida
	Number of Cases (annual avg.) 2010-2012	3-Yr Rate per 100,000 2012-2012	3-Yr Rate per 100,000
Total Gonorrhea, Chlamydia & Infectious Syphilis	2,336.0	780.7	513.7
Infectious Syphilis Cases	45.3	15.1	6.7
Gonorrhea Cases	552.3	184.6	104.6
Chlamydia	1,738.3	580.9	402.4
<b>Vaccine Preventable Diseases</b>			
Selected Vaccine Preventable Disease Rate-All Ages	36.7	12.3	3.7
Acute Hepatitis B Cases	3.0	1.0	1.5
Measles	0.0	0.0	0.0
Mumps	0.0	0.0	0.1
Rubella	0.0	0.0	0.0
Pertussis	33.7	11.3	2.0
Tetanus	0.0	0.0	0.0



<b>AIDS and Other Diseases</b>			
AIDS Cases	38.0	12.7	16.3
Meningococcal Meningitis	0.0	0.0	--
Hepatitis A Cases	0.7	0.2	0.9
Tuberculosis Cases	6.7	2.2	2.9

*Data Source: Division of Disease Control, Florida Department of Health*

#### **4G. HEAD START CHILDREN RECEIVING MEDICAL TREATMENT**

Of the 946 Head Start children enrolled during the 2012-2013 term, 99% (932) received all of the required immunizations for their age group. In terms of treated medical conditions, only 4 students (less than 1%) were treated for vision problems compared to 21 students treated during the previous year. There was also a 75% decrease in the number of children treated for asthma (from 20 to 5 students).

The number of Head Start children receiving dental treatment is slightly down from 883 (2011-12) to 869 (2012-13). The number of children needing dental care remained exactly the same at 310 from last year to the current 2012-2013 year. In terms of physical weight, 555 (60%) children were at a healthy weight. Three hundred (33%) children were overweight. Of these students, over half (160) possessed a body mass index over 95%; which is considered “obese” by the Centers for Disease Control and Prevention.

<b>Treated Conditions</b>	<b>2010-2011</b>	<b>2011-2012</b>	<b>2012-2013</b>
Anemia	16	0	3
Asthma	17	20	5
Diabetes	0	0	0
Hearing Difficulties	11	8	3
Vision Problems	20	21	4
High Lead Level	3	3	2
Immunizations Up-to-Date/All Possible	949	964	932

<b>Dental Treatment</b>	<b>2010-2011</b>	<b>2011-2012</b>	<b>2012-2013</b>
Head Start Children Receiving Preventive Dental Care	878	883	869
Head Start Children Needing Dental Treatment	204	310	310

<b>Body Mass Index</b>	<b>2010-2011</b>	<b>2011-2012</b>	<b>2012-2013</b>
Underweight	30	82	68
Healthy Weight	502	592	555
Overweight (between 85%-95%)	157	123	140
Obese (over 95%)	126	162	160
Total Overweight (85% and over)	283	285	300

## 4H. MEDICAL INSURANCE

### Health Insurance Rate in Escambia

According to the U. S. Census Bureau's *Small Area Health Insurance Estimates (SAHIE) Program* (March 2014), 10% or less of children (under age 19) residing in Escambia County are uninsured. Additionally, 20.1-25.0 percent of working age adults (18-64 years of age) are uninsured in Escambia County.

<b>Health Insurance Coverage By Race – Florida 2012</b> <b>Population Under Age 65</b> <b>Percent Uninsured</b>		
Non-Hispanic White	Non-Hispanic Black	Hispanic
15.1 – 25.0% <i>Florida ranked among the top fifteen (15) states with the highest percentage of uninsured in this category.</i>	25.1 – 35.0% <i>Florida ranked among the top three (3) states with the highest percentage of uninsured in this category.</i>	Above 35% <i>Florida ranked among the top twelve (12) states with the highest percentage of uninsured in this category.</i>

<b>Health Insurance Coverage by Poverty Level – Florida 2012</b> <b>Population Under Age 65</b> <b>Percent Uninsured</b>		
Living at or Below 138% Poverty	Living at or Below 250% Poverty	Living at or Below 400% Poverty
Above 35%	25.1 – 35.0%	25.1 – 35.0%

<b>Insurance Status of Total Head Start Families</b>	<b>2010-2011</b>	<b>2011-2012</b>	<b>2012-2013</b>
Health Services Paid by Medicaid/EPST	809	854	871
State Chip Program	0	4	2
Combined State/Medicaid	0	0	0
State Only Funded Insurance	10	7	3
Private Health Insurance	58	54	48
No Insurance	78	57	22

In 2012-2013, thirteen percent of the children enrolled in the Early Head Start program had no health insurance. Forty-two percent of the pregnant women served did not have health insurance. Only 3 percent of the Early Head Start children were covered by a private insurance plan.

Within the Head Start program, 2 percent had no health insurance coverage. Five percent were covered by a private insurance plan. The remaining children were covered by a government-sponsored health insurance plan.

## 4I. EMPLOYMENT

### Leading Industries

The health care sector is the leading industry in terms of annual payroll and number of employees.

2007 NACIS Code	Type of Industry	Year	No. of Establishments	Annual Payroll (\$1,000)
00	Total for all sectors	2010	6,618	3,273,443
62	Health care and social assistance	2010	741	876,191
44-45	Retail trade	2010	1,125	363,207
54	Professional, scientific, and technical services	2010	789	251,822
23	Construction	2010	619	251,418
52	Finance and insurance	2010	411	230,941
31-33	Manufacturing	2010	173	226,600
56	Administrative and support and waste management and remediation services	2010	353	202,981
42	Wholesale trade	2010	310	173,217
72	Accommodation and food services	2010	525	155,073
81	Other services (except public administration)	2010	676	98,953
51	Information	2010	117	94,431
48-49	Transportation and warehousing	2010	171	76,843
61	Educational services	2010	76	58,380
55	Management of companies and enterprises	2010	46	53,522
53	Real estate and rental and leasing	2010	354	42,079
71	Arts, entertainment, and recreation	2010	83	23,965
11	Agriculture, forestry, fishing and hunting	2010	7	1,132
99	Industries not classified	2010	7	71
21	Mining, quarrying, and oil and gas extraction	2010	11	D
22	Utilities	2010	24	D

Source: U.S. Census Bureau, 2010 County Business Patterns

D = Withheld to avoid disclosing data for individual companies; data are included in higher level totals

<b>Top 10 Employers</b> (by number of persons employed) <i>Greater Pensacola Chamber of Commerce and Santa Rosa Economic Development</i>				
Company	Employees	Company Description	Headquarters	NAICS
Baptist Health Care	4,133	Healthcare	Pensacola, FL	621110 Hospitals, general medical and surgical
Sacred Heart Health Systems	3,483	Healthcare	St. Louis, MO	621110 Hospitals, general medical and surgical
Navy Federal Credit Union	3,113	Financial Service Center	Vienna, VA	522130, 522320 Credit Union, Financial Service Center
Gulf Power Company	1,522	Electric Provider	Pensacola, FL	221122 Electric Power Generation, Transmission & Distribution
West Florida Healthcare	1,300	Healthcare	Nashville, TN	621110 Hospitals, general medical and surgical

Ascend Performance Materials	830	Manufacturing	Houston, TX	325211 Plastics Material and Resin Manufacturing
West Corporation	800	Business, Processing, Outsourcing	Omaha, NE	561422 CRM Solution Provider, Customer Care Center
Medical Center Clinic	500	Healthcare	Pensacola, FL	621111 Medical Centers and Clinic
Santa Rosa Medical Center	498	Healthcare	Milton, FL	621111 Medical Centers and Clinic
International Paper	475	Manufacturing	Tokyo, Japan	322121 Paper (except Newsprint) Mills

### Occupations and Types of Employment

Occupations and Types of Employment Escambia County, Florida	Total Estimate	Male	Female
Civilian employed population 16 years and over	124,672	50.1%	49.9%
Management, business, science, and arts	39,728	44.4%	55.6%
Computer, engineering, and science	4,418	73.0%	27.0%
Education, legal, community service, arts, and media	12,142	34.5%	65.5%
Healthcare practitioner and technical	8,638	25.0%	75.0%
Service	25,910	45.4%	54.6%
Healthcare support	3,516	10.9%	89.1%
Protective service occupations (e.g., law enforcement, firefighting, etc.)	2,825	83.0%	17.0%
Food preparation and serving related occupations	9,262	49.8%	50.2%
Building and grounds cleaning and maintenance	5,755	59.9%	40.1%
Personal care and service	4,552	21.3%	78.7%
Sales and office	35,496	35.0%	65.0%
Natural resources, construction, and maintenance	11,832	97.3%	2.7%
Farming, fishing, and forestry	333	95.2%	4.8%
Construction and extraction	6,674	97.1%	2.9%
Installation, maintenance, and repair	4,825	97.6%	2.4%
Production, transportation, and material moving	11,706	77.8%	22.2%

Source: U.S. Census Bureau, 2008-2012 American Community Survey

## Wages: Estimate of Earnings By Gender

Estimate of Earnings By Gender Escambia County, FL	Total Estimate	Median Earnings (Dollars) For Males	Median Earnings (Dollars) For Females
Civilian employed population 16 years and over	27,713	32,550	24,256
Management, business, science, and arts	42,963	53,288	37,169
Computer, engineering, and science	51,558	52,275	50,016
Education, legal, community service, arts, and media	34,348	43,317	32,321
Healthcare practitioner and technical	43,593	67,043	39,146
Service	16,680	19,569	15,104
Healthcare support	20,652	17,146	21,139
Protective service occupations (e.g., law enforcement, firefighting, etc.)	35,915	36,055	35,243
Food preparation and serving related occupations	13,489	14,442	12,040
Building and grounds cleaning and maintenance	16,750	19,929	14,074
Personal care and service	14,826	23,571	13,065
Sales and office	24,405	28,815	22,685
Natural resources, construction, and maintenance	31,018	31,255	18,958
Farming, fishing, and forestry	39,102	39,727	-
Construction and extraction	27,041	27,560	14,403
Installation, maintenance, and repair	37,074	36,853	41,250
Production, transportation, and material moving	26,346	30,325	16,316

Source: U.S. Census Bureau, 2008-2012 American Community Survey

## Job Creation Rate in Escambia County

The *Greater Pensacola Chamber of Commerce* reports a 2% job growth rate in 2012, which is a decrease from a 12% job growth rate in 2010. A portion of this 10% reduction in job growth from 2010 to 2012 could be attributed to the *Deep Horizon* catastrophe, more commonly known as the *BP Oil Spill*. As a result, there was an influx of construction workers and teams of crews who temporarily descended on the area in order to address the impact of the spill.

## Number of Small Businesses Started in the Community Yearly

Small businesses are defined as organizations with less than 500 employees. In Florida, small businesses represent 98.9% of all employers and employ 42.9% of the private-sector labor force (SBA, 2013). According to the *Small Business Profile* published by the Small Business Administration (February 2013), 129,059 small businesses opened and 124,471 small businesses closed in 2011. The total number of small business establishments in Escambia County is 6,529, which employees 96,255 people.

Escambia County				
ENTERPRISE EMPLOYMENT SIZE	NUMBER OF FIRMS	NUMBER OF ESTABLISHMENTS	EMPLOYMENT	ANNUAL PAYROLL (\$1,000)
1: Total	5,385	6,529	96,255	3,359,394
2: < 20	4,155	4,186	16,086	506,954
3: 20-99	435	504	13,781	481,338
4: 100-499	192	295	11,445	380,990
5: 500+	603	1,544	54,943	1,990,112

*Source: U. S. Census Bureau, 2011 County Business Patterns*

### Barriers that Prevent People from Obtaining Employment

According to Enterprise Community Partners (a national nonprofit that provides expertise in affordable housing and sustainable communities), primary barriers to employment include substance abuse, unreliable child care or lack of interpersonal skills (e.g., customer service, conflict resolution, etc.). Secondary barriers include inadequate money management skills, inappropriate work attire, etc.

Focus groups held June 3-4, 2014 resulted in the documentation of similar barriers (two groups facilitated with a total of twenty participants). Unemployment was listed as the #1 social problem/challenge. Barriers described by focus group participants included a lack of education or marketable skills, substance abuse, inadequate transportation and inadequate soft skills (e.g., customer service, interpersonal skills, etc.).

### Unemployment Rate in Escambia County and Florida

For Florida and Escambia County, there has been a steady decline in the unemployment rate. As of April 2014, the unemployment rate for Escambia County was 6.25%, which is nearly the same as Florida's unemployment rate of 6.2%.

Category	April 2011	April 2012	April 2013	April 2014
<b>Florida Unemployment Rate</b>	10.6%	9%	7.6%	6.2%
<b>Escambia County Unemployment Rate</b>	10.04%	8.77%	7.55%	6.52%

*Source: Haas Center, Economic Data, Florida and County-level Datasets, 2014*

### Impact of the BP Oil Spill on employment in Escambia County

On April 20, 2010, an explosion occurred on the *Deep Horizon*, an oil rig leased by British Petroleum (BP); which gushed an estimated 4.9 million barrels of oil into the Gulf of Mexico, making it the largest accidental marine oil spill in U. S. history. Being on the Gulf of Mexico, a major portion of Escambia County's economy relies upon tourism and commercial fishing. Among the five coastal counties in Northwest Florida that are closest to the site of the oil spill (Escambia, Santa Rosa, Okaloosa, Walton and

Bay Counties), more than 45,000 jobs were supported by visitor spending at the time of the explosion.<sup>1</sup> With a decrease in tourism, there was also a decrease in the number of visitors during the summer of 2010. This loss of tourism dollars was slightly offset by construction crews and temporary workers who arrived in the area as a part of the clean-up and recovery efforts.

The February 15, 2012 edition of the Canadian Journal of Fisheries and Aquatic Sciences published an article titled, “*Impact of the Deepwater Horizon well blowout on the economics of US Gulf fisheries.*” Within this article, researchers find that the spill could result in present value of \$3.7B in total revenue losses, \$1.9B in loss of total profits, \$1.2B in loss of wages and a \$8.7B negative impact on the economy over a seven-year period. Commercial and recreational fisheries are expected to suffer the most losses at \$1.1B in total profit losses and \$3.5B in total economic losses.

#### **4J. HOUSING**

Based upon data included in the *Escambia Consortium, Florida, 2010-2014 Consolidated Plan (2012)* prepared for the U. S. Department of Housing and Urban Development; there were 136,703 units of housing in 2010 servicing a population of 297,619. A combination of the general economic downturn, the BP Oil Spill, housing foreclosures in the local market, and declining property values are listed as major contributors that “wreaked havoc on the local economy and the local housing/construction industry.” Additionally, much of the local affordable housing stock available to families within lower income ranges are generally older homes in need of significant repair and modernization.

##### Housing Characteristics

According to the *2008-2012 American Community Survey (5-Year Estimates)*, there are approximately 137,117 total housing units in Escambia County, Florida. Of those units, 112,012 units are occupied and 25,105 are vacant.

YEAR STRUCTURE BUILT	
Total Housing Units	137,117
Built 2010 or later	274
Built 2000 to 2009	20,536
Built 1990 to 1999	22,380
Built 1980 to 1989	26,589
Built 1970 to 1979	26,096
Built 1960 to 1969	15,779
Built 1950 to 1959	14,648
Built 1940 to 1949	5,657
Built 1939 or earlier	5,158

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<sup>1</sup> Harper, R. 2010. *The Economic Impact to Northwest Florida of Deepwater Horizon Oil Spill*. Haas Center for Business Research and Economic Development, University of West Florida.

UNITS IN STRUCTURE	
Total housing units	137,117
1-unit, detached	90,478
1-unit, attached	4,440
2 units	4,764
3 or 4 units	6,123
5 to 9 units	6,493
10 to 19 units	5,090
20 or more units	10,336
Mobile home	9,210
Boat, RV, van, etc.	183

#### Occupied Housing Unit Characteristics (Homeownership vs. Rental)

Of the 112,012 occupied units, 73,261 are owner-occupied units with an average household size of 2.53. The remaining 38,751 units are renter-occupied with an average household size of 2.40. In terms of household size, 30% of all occupied housing units is comprised of a one-person household; two-person households make up 37%, three-person households are at 15.4% and four or more-person households make up 17.7%.

#### Escambia County Housing Costs

The median value of an owner-occupied home is \$137,300. The median monthly mortgage cost for a homeowner is \$1,286.

Housing Values	
Owner-occupied units	73,261
Less than \$50,000	6,309
\$50,000 to \$99,999	17,223
\$100,000 to \$149,999	16,970
\$150,000 to \$199,999	13,906
\$200,000 to \$299,999	10,883
\$300,000 to \$499,999	5,212
\$500,000 to \$999,999	2,128
\$1,000,000 or more	630
Median Value (dollars)	\$137,300



<b>MORTGAGE STATUS</b>	
Owner-occupied units	73,261
Housing units with a mortgage	45,582
Housing units without a mortgage	27,679
<b>SELECTED MONTHLY OWNER COSTS (SMOC)</b>	
Housing units with a mortgage	45,582
Less than \$300	144
\$300 to \$499	726
\$500 to \$699	3,009
\$700 to \$999	9,279
\$1,000 to \$1,499	15,729
\$1,500 to \$1,999	8,519
\$2,000 or more	8,176
Median Monthly Owner Costs (dollars)	\$1,286

<b>GROSS RENT</b>	
Occupied units paying rent	36,590
Less than \$200	455
\$200 to \$299	1,017
\$300 to \$499	2,355
\$500 to \$749	9,253
\$750 to \$999	11,966
\$1,000 to \$1,499	9,061
\$1,500 or more	2,483
Median (dollars)	\$853
No rent paid	2,161
<b>GROSS RENT AS A PERCENTAGE OF HOUSEHOLD INCOME (GRAPI)</b>	
Occupied units paying rent (excluding units where GRAPI cannot be computed)	35,763
Less than 15.0 percent	2,842
15.0 to 19.9 percent	3,099
20.0 to 24.9 percent	5,117
25.0 to 29.9 percent	4,035
30.0 to 34.9 percent	4,028
35.0 percent or more	16,642
Not computed	2,988

#### **4K. HOMELESSNESS**

The **EscaRosa Coalition on the Homeless (ECOH)** works to eliminate homelessness by supporting people who are homeless or at risk of homelessness, and supporting local service providers and other interested individuals and groups through advocacy, education, organizing, and networking. In 2012, 1,423 homeless children were identified in Escambia County; which is about a **13% increase** from 1,237 children previously identified. Neighboring Santa Rosa County identified 1,651 homeless children, which is approximately a 20% increase from the 1,328 children previously identified.

According to the EscaRosa Coalition on the Homeless, the main causes of homelessness in Escambia County (and neighboring Santa Rosa County) are:

- Lack of job availability
- Lack of attainable, inexpensive housing
- Lack of intensive, multidisciplinary outreach interventions
- Failed family support systems
- Mental illness
- Alcoholism and drug abuse
- Voluntary choice

#### **4L. TRANSPORTATION**

Escambia County Area Transit (ECAT) is the primary mode of public transportation. Established in 1950, ECAT currently includes 1,500 stops that cover 285 miles of bus routes. ECAT provides service through a fixed-route bus system (operating 15+ routes/6 days per week), seasonal Pensacola Beach trolleys, UWF on-campus trolleys and ADA paratransit transportation vehicles.<sup>2</sup> Accessing a 10-year time period from 1999 to 2009, there was a 29% decline in “annual fixed route ridership” from 1,602,980 (1999) to 1,131,853 (2009).

##### **Fare Structure**

###### Base Fare - \$1.75

The base fare of \$1.75 applies to all riders other than the reduced fares described below.

###### High School and College Students - \$1.25 (with valid student ID)

###### Elementary and Middle School Students - \$1.25

Elementary and Middle School students taller than the top of the fare box pay \$1.25.

###### Students/Children - Free

Students and/or children with a height equal to or shorter than the top of the fare box ride for free.

###### Senior and Disabled Reduced Fare - 85¢ (with valid ECAT Reduced Fare ID)

###### Medicare Card Holders - 85¢ (with valid ID or ECAT Reduced Fare ID)

###### Seasonal Pensacola Beach Trolley – Free

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<sup>2</sup> Source: Escambia County Area Transit. September 2011. *ECAT Transit Development Plan Major Update 2012-2021*.

### University of West Florida (UWF) – Free

Consists of four campus-themed trolleys, and runs seven days a week. This service is free and available to everyone.

### **ADA Transportation**

For ADA eligible riders, ECAT provide both curb-to-curb and upon request, door-to-door transportation. ADA Transportation certified individuals possessing an ADA identification card ride free on fixed-route buses. ADA transportation is provided in accordance with a contract through Escambia County. Currently, this service is provided through *Pensacola Bay Transportation*.

### Paratransit Services

In 2010, Pensacola Bay Transportation operated 283,287 passenger trips. Of these trips, 169,080 were employment related and 59,713 were related to a medical purpose. Primary sponsors in the coordinated system include the *Commission for the Transportation Disadvantaged Trust Fund*, the *Agency for Health Care Administration* (AHCA, also known as Medicaid), the *Agency for Persons with Disabilities*, and the *Department of Elder Affairs*.

### **On-board Survey of ECAT Customers**

A third-party firm, Kelly Services, was hired to provide surveyors on buses to assess the customer's ECAT experience. Surveyors rode ECAT, and completed a total of 970 surveys from June 15-18, 2011. A sample of the results are as follows:

- When assessing income, 90% of Saturday riders and 49.7% of weekday riders have annual household incomes less than \$10,000. Only 7.4% of weekday customers resided in households earning \$30,000 or more. None (0%) of the customers surveyed on Saturday reported annual household incomes over \$24,999.
- During the weekday, 29.6% of the passengers are traveling to work, 10.3% are going to school and 8.1% are going to the doctor/dentist.
- On Saturdays, 20% of the passengers are traveling to work, 30% are returning home and 20% are shopping or completing errands.
- 57.1% of weekday passengers and 80% of Saturday passengers do not possess a valid driver's license.
- 60% of Saturday customers ride ECAT six or seven times each week.
- 45% of weekday customers ride ECAT five or six times each week.
- 40% of Saturday customers state that they ride ECAT because "ECAT fits my budget better."
- 42% of weekday customers ride ECAT because either a "car is not available all the time" or a "car is not available" at all.
- If ECAT were not available 10% of Saturday riders and 27% of weekday riders would have to walk or ride a bicycle; 60% of Saturday riders and 32.5% of weekday riders would try to find a ride with someone else.

#### 4M. CRIME AND VIOLENCE

##### Prisoner Admissions

The number of inmate admissions (July 1, 2012 to June 30, 2013) to Florida state prisons increased for the first time since FY 2007-08, rising from 32,279 (FY 2011-12) to 33,295 (FY 2012-13), a 3.1% increase. Most of the inmates admitted to prison in FY 2012-13 were **male (88.4%)**, **white (53.2%)** and between the **ages of 25-34**. Most (54.1%) had not served time in Florida state prisons before.

An almost equal number of admitted inmates were sentenced for property (32.6%) or violent (31.1%) crimes. Over the last five years, prison admissions for drug crimes has gradually decreased from 27.4% of total admissions in FY 2008-09 to 24.2% in FY 2012-13. The average sentence length of these inmate admissions is 5.1 years.

Admissions by Offense Type for FY 2012-13				
Type of Offense	Number	Percent	Average Sentence Length in Years	Average Age at Admission
Murder, Manslaughter	1,035	3.1%	25.3	33.6
Sexual offenses	1,791	5.6%	12.9	38.8
Robbery	2,354	7.2%	8.0	28.1
Violent Personal offenses	4,509	14.0%	4.5	34.4
Burglary	5,679	17.5%	4.9	30.8
Theft/Forgery/Fraud	5,262	16.3%	2.5	35.7
Drug offenses	7,847	24.2%	3.2	35.6
Weapons	1,469	4.5%	3.5	31.2
Other	2,471	7.6%	2.9	38.1
Data unavailable				878

*Source: Florida Department of Corrections, 2012-2013 Annual Report*

##### Prisoner Releases

In FY 2012-13, 33,137 offenders were released from Florida's prisons, a 3.8% decrease from FY 2011-12. Most of the permanent releases (20,984 or 63.3%) were released because their sentences expired. Approximately 15.3% (5,085) were released to probation or community control. Additionally, 16.2% (5,374) were released to conditional release supervision, a type of supervision for more serious offenders. The majority of offenders released in FY 2012-13 were **white (17,133 or 51.7%)** and **male (29,486 or 89.0%)**. An estimated 34.7% were between the **ages of 25-34** (11,512) and 33.4% were between the ages of 35 and 49 (11,061). Approximately 30.6% were serving time for violent offenses (10,145) and 31.3% were serving time for property crimes (10,359).

Release by Offense Type for FY 2012-13				
Type of Offense	Number	Percent	Average Sentence Length in Years	Average Age at Release
Murder, Manslaughter	759	2.3%	18.7	42.9
Sexual Offenses	1,573	4.8%	9.5	42.5
Robbery	2,651	8.0%	7.5	32.3
Violent Personal Offenses	4,823	14.5%	3.8	35.9
Burglary	5,658	17.1%	4.2	32.8
Theft/Forgery/Fraud	5,025	15.1%	2.6	36.9
Drug Offenses	8,478	25.6%	3.2	36.4
Weapons	1,417	4.3%	3.6	33.4
Other	2,753	8.3%	2.9	38.7

Source: Florida Department of Corrections, 2012-2013 Annual Report

Escambia County is the home of Century Correctional Institution (CI), Century Work Camp (WC) and Pensacola Work Release Center. As of June 30, 2013, Century CI (opened 1991) contained a prison population of 1,399 inmates; Century WC (opened 1994) consisted of 279 work camp inmates; and Pensacola WRC (opened in 1973) consisted of 79 work release individuals. All three (3) facilities are designed for male populations.

#### Skills Taught While Incarcerated

While incarcerated, inmates have the option of participating in a variety of educational and vocational programs. These options consist of four categories in various forms: Academic & Special Education, Career & Technical Education, Faith- & Character-Based and Substance Abuse Treatment. Inmates have an opportunity to earn their GED or a skill/trade in preparation for re-entering the general population.

## **4N. COURT ORDERED CHILD SUPPORT**

Since 1994, the Florida Department of Revenue (DOR) has administered the Child Support Program. Based upon available state-level data documented in the *2011-2012 Florida Department of Revenue Annual Report*, there were a total of 942,313 child support cases in 2012. Of these cases, 694,485 were court ordered child support cases.

## **4O. OTHER**

### Safelink Wireless Program

SAFELINK WIRELESS® service is a program for income-eligible households provided by TracFone Wireless, Inc. In order to participate in the SAFELINK WIRELESS® service, persons must meet certain eligibility requirements set by each State where the service is to be provided. These requirements are based on a person's participation in a state or federal support program, or by meeting the *Income Poverty Guidelines* as defined by the U.S. Government. SAFELINK WIRELESS® service is also limited to one person per household.

### **General Eligibility - Florida**

You are eligible if you receive benefits from one of the following programs:

- Medicaid
- Supplemental Nutrition Assistance Program (SNAP) Food Stamps
- Temporary Assistance for Needy Families (TANF)
- Supplemental Security Income (SSI)

- National School Lunch Program's (free lunch program)
- Low-Income Home Energy Assistance Program (LIHEAP)
- Federal Public Housing Assistance (Section 8)
- Bureau of Indian Affairs Programs (Tribal Temporary Assistance for Needy Families)

#### Lifeline/Link-up Program

The Lifeline Assistance Program is designed to ensure that all residents of Florida have access to telephone service and connections in their homes.

- **Lifeline Assistance** is a public assistance program that reduces the monthly telephone bill (up to \$10.00 per month). The reduction is in the form of a credit and is deducted from the basic service charge qualified, income-eligible subscribers.
- **Link-Up America** pays one-half (up to a maximum of \$30) of the initial installation fee for a traditional, wireline telephone or activation fee for a wireless telephone for a primary residence. It also allows participants to pay the remaining amount they owe on a deferred schedule, interest-free.

Low-income residential heads of households are eligible. Income is determined by the federal poverty guidelines, which are based on the number of people in the household and the total amount of money received by **each member** in the household. Applicants may be eligible if their income is less than 150% of the U.S. poverty guideline.

#### **Number of residents qualifying for the Earned Income Tax Credit (EITC) when filing taxes**

EITC (Earned Income Tax Credit) is a benefit for working people who have low to moderate income, and is recognized an effective anti-poverty program. Participation is estimated to range between 75 percent and 80 percent of eligible claimants; though the participation rate for taxpayers with children is somewhat higher, around 85 percent.

State-level data is provided by the IRS (<http://www.eitc.irs.gov/EITC-Central/eitcstats>). In 2013, there were two million EITC claims were submitted by Florida residents, which translates into \$5 billion dollars. The average amount of an EITC claim for an individual household is \$2,386; slightly higher than the national average of \$2,335.

In order for a household to claim EITC on their tax return, the household must meet *all* the following rules as defined by the U. S. Internal Revenue Service:

- You, your spouse (if you file a joint return), and all others listed on Schedule EIC, must have a Social Security number that is valid for employment
- You must have earned income from working for someone else or running or operating a farm or business
- Your filing status cannot be married filing separately
- You must be a U.S. citizen or resident alien all year, or a nonresident alien married to a U.S. citizen or resident alien and filing a joint return
- You **cannot** be a qualifying child of another person
- You cannot file Form 2555 or Form 2555 EZ (related to foreign earned income)
- You must meet the earned income, AGI and investment income limits (income limits change each year), see EITC Income Limits for the tax year amounts
- And you must meet one of the following:
  - Have a qualifying child (see who is a qualifying child below)
  - If you do not have a qualifying child, you must:

- be age 25 but under 65 at the end of the year,
- live in the United States for more than half the year, and
- not qualify as a dependent of another person.

## Community Engagement and Participation Reports

### **5. The education, health, nutrition and social service needs of Head Start eligible children and their families as defined by families of Head Start children and by institutions in the community that serve young children.**

In order to better assess the needs of the local community, as well as, Head Start eligible children and their families; the *Community Action Program Committee, Inc.* spent several months (April 2014 to June 2014) engaging parents and members of the general community in a series of surveys, one-on-one interviews and focus groups. Surveys were completed by 47 general members of the community, and focus groups were conducted with 20 Escambia residents and community leaders. There was also an internal survey conducted with 21 Head Start parents and 70 CAPC staff members. In addition to these surveys, one-on-one interviews were conducted with five (5) Head Start parents/volunteers. The results of these assessment opportunities are as follows:

#### Head Start Parent and Staff Surveys

Survey participants were asked to list the needs of Escambia County as it relates to the areas of education, transportation, nutrition, health and social services. Their responses have been documented below (please note that the subcategories are listed in no particular order).

Number of Participating Head Start Parents: 21

Number of Participating Staff Members: 70

#### **Education**

##### Increase Early Childhood Education

Parents are interested in increasing early childhood education, early literacy programs for toddlers and access to additional Head Start centers.

##### Curriculum Improvements

Improvements to the curriculum that includes cooking classes, more opportunities to be creative, an increase emphasis on the child's strengths, summer classes. Parents are also interested in their own personal development: evening GED classes, trade classes, etc.

##### Supplemental Enrichment Programs or Services

Increase more field trips for students, and tutoring opportunities for elementary, middle, and high school.

##### Facility/Building Improvements

Older centers need to be remodeled. .

##### Teacher Training/Continuing Education

Increase training for teachers.

##### Technology

Utilize more technology in the classroom.

## **Transportation**

### Staffing

Permanent bus aides should be used to make trips shorter, and not interfere with classroom time.  
Increase the number of buses to transport children.

### Bus Routes/Scheduling

The change in the public bus routes and schedule are inconvenient.  
There is an interest in transportation being made available to parents for appointments.  
More transportation options are needed for more rural areas of the county.  
Bus passes are desired for crisis situations or medical appointments.

## **Nutrition**

### Nutrition-based Education for Parents

Increase classes for parents on the nutritional value of food.  
Increase school-based programs to promote nutrition and physical activity.

### Meal Options/More Food Choices

There is a strong desire to see more variety in available menus, types of foods offered, balanced food portions and healthier meals.  
Increase food vouchers or options for parents who are not eligible for the food stamp program.  
Increase options for affordable, fresh produce.

### Paperwork Reduction

Less paperwork: Why do teachers have to write what is delivered? This could be typed up the day before and signed by bus drivers when picked up. The teachers can sign off.

## **Health**

### Health-based Education for Parents

Start training teachers and parents for different eating disorders.  
Increase parent participation in children's sports or recreational exposure.  
Increase planned parenting options.

### Health Care Access and Costs

Increase affordability and access to health care.  
Negotiate discounted gym memberships.  
Increased access to exercise equipment and family friendly walking tracks and playgrounds.

### Improved Medical Treatment

Better medical attention is needed for those with disabilities and eating disorders.  
Send medical reminders when check-ups are due.  
Maintain accurate records that include medication records, enrollment information, personnel records, and daily attendance.

## **Social Services**

### Home Visits and Staffing

Increase home visits and keeping families updated.  
Provide positive support, and establish positive relationships.

### Counseling and Special Services

Increase counseling services provided for parents and staff.  
Provide more specialized therapies.



### Housing Assistance/Home Repairs

Additional help is needed with housing, repairs, and clothing.

## **[End of Head Start Program and Staff Survey Report]**

### **Head Start Parents: Interview Results**

More in-depth interviews were conducted by a third party entity, *Strategic Resource Solutions*, with five (5) volunteer Head Start parents. The feedback gathered will be used to improve the Head Start program, establish realistic goals and enhance service delivery.

### **BASIC DEMOGRAPHICS**

**Number of Parents:** 5 (100% female)  
**Gender:** 5 Female (100%)  
**Race/Ethnicity:** 4 Black/African-American 1 White/Caucasian  
**Employment Status:** 2 Full-time Employed 3 Unemployed

**Educational Level:** 1 Did not graduate from high school  
2 Graduated from high school or earned a GED  
2 Attended 1-2 years of college or technical school

#### **Annual Household Income:**

1 Less than \$10,000  
1 \$10,000 - \$19,999  
2 \$20,000 - \$34,999  
1 \$35,000 - \$49,999

#### **Ages of Children and Adults Represented by All Five Households (Combined):**

7 Birth to 5  
4 6-12  
1 13-17  
1 18-20  
4 21-29  
1 30-39  
1 40-49

**Housing Status:** 5 Rent 0 Own 0 Homeless

#### **Types of Household Income:**

3 Earnings from job/wages  
1 SSI/SSDI  
4 Child Support  
1 Other: Adoptive Services

**What do you think is Escambia County's MOST important social service need? Why?**

- Jobs: I'm currently looking for work.
- Jobs Training: You need job skills in order to find work
- Food Assistance: It helps us with a small income feed of our families .
- Senior Citizen Services: My grandmother is elderly and needs help
- Homeless Services: I work at a homeless shelter for youth and adults call as well

**What do you think is Escambia County's second important social service need?**

- Jobs
- Legal Assistance
- Juvenile Crime Prevention
- Education (2)

**What do you think is Escambia County's third important social service need?**

- Accessible Health Care (2)
- Jobs
- Juvenile Crime Prevention
- Youth Services

The need for jobs appeared on all three lists. Juvenile crime prevention, accessible health care and education were all mentioned twice as one of Escambia County's most important social service needs.

**What do you think is Escambia County's MOST important social problem or challenge? Why?**

- Crime: There is so much crime going on now.
- Drug/Substance Abuse: Because the crime rate is higher because of drug abuse
- Teen Pregnancy: I see so many teen walking around pregnant and they need help.
- Domestic Violence: It more common than not and it's not being reported
- Unemployment: Because it's hard for middle aged people who haven't worked to find jobs.

**What do you think is Escambia County's second important social problem or challenge?**

- Crime (3)
- Drug/Substance Abuse (2)

**What do you think is Escambia County's third important social problem or challenge?**

- Crime
- Drug/Substance Abuse
- Teen Pregnancy
- Domestic Violence
- Child Abuse

"Crime" was mentioned five times, and "substance abuse" was mentioned four times as Escambia County most important social problem or challenge. "Teen pregnancy" and "domestic violence" were both mentioned twice.

**Do you have suggestions or ideas to help improve the quality of life for Escambia residents?**

- Promote community affairs
- More community-involved activities
- They need to work on the roads in Escambia County
- We need more job training

**If you have personally used services provided by CAPC, which services did you use?**

- 5 Early Head Start
- 3 Head Start
- 1 Utility Assistance
- 2 Employment Services
- 1 Educational Services/GED
- 1 Legal Services

All five interview participants rated CAPC's services as either "Excellent" or "Good."

The only suggestion for improvement is to offer summer programs for children. As it relates specifically to the Head Start program, all five parents stated that they were offered an opportunity to set goals for themselves and their families.

**Did offer to assist you with setting goals for you and your family?** 5 Yes

**Did a Head Start staff member follow-up with you in an effort to assist you in meeting your goals/needs in a timely manner?** 4 Yes 1 No

**What do you like the most about the Head Start program?**

- They helped my daughter to advance in her education and different community activities
- How well they teach
- They helped my kids prepare for school
- Their patience with my son
- They are wonderful with the preschoolers and provide great information

**Is there anything you would change about the program?**

- Add more programs
- They need more summer and reading programs
- N/A - 3

**What would make the Head Start program better for you and your family?**

- More schools offering head start
- Offer more programs
- I would make it year round
- They need to expand their district.
- N/A (1)

**Do you feel that Head Start is preparing your child for school?** 5 Yes

**As a result of Head Start, what type of things is your child learning or demonstrating at home?**

- She knows her address my phone number, recycling and land marks
- Know their name and alphabets
- They know their letters and numbers
- They are reading, know their letters and numbers
- He knows his alphabets, numbers and name

Would you recommend this program to other families? 5 Yes

How would you rate the Head Start staff? 2 Excellent 3 Good

How would you rate the overall Head Start program? 2 Excellent 3 Good

[End of *HEAD START PARENTS: INTERVIEW RESULTS* Report]

## Escambia County Community Needs Survey

**Number of Participants:** 47 (38 of 47 lived within Escambia County)

**Gender:** 14 Male 32 Female

**Race/Ethnicity:** 17 Black/African-American  
27 White/Caucasian  
3 American Indian  
1 Multi-racial

**Employment Status:** 36 Full-time Employed  
3 Part-time Employed  
4 Self-Employed  
1 Unemployed  
2 Retired

**Length of Time as a Resident of Escambia County:**  
2 Less than 1 year  
3 1 - 5 years  
5 6 - 10 years  
3 11-14 years  
4 15 -20 years  
25 More than 25 years

**Educational Level:** 4 Graduated from high school or earned a GED  
9 Attended 1-2 years of college or technical school  
4 Graduated with Associates degree or certificate  
1 Attended 3-4 years college or technical school  
16 Graduated with a Bachelor's Degree  
15 Graduated with a Master's degree or higher

**Annual Household Income:**  
3 Less than \$10,000  
4 \$10,000 - \$19,999  
4 \$20,000 - \$34,999  
7 \$35,000 - \$49,999  
7 \$50,000 - \$74,999  
11 \$75,000 - \$99,999  
10 \$100,000 or more

**Ages of Children and Adults Represented by All Participating Households (Combined):**  
24 Birth to 5  
51 6-12  
8 13-17  
7 18-20  
10 21-29  
10 30-39  
17 40-49  
139 50 – 64  
13 65 and over

**Housing Status:**        5 Rent   38 Own   2 Homeless   2 Live with Family or Friends

**Types of Household Income:**

<u>41</u>	Earnings from job/wages
<u>1</u>	Veterans Benefits
<u>11</u>	Social Security
<u>0</u>	TAFDC (Welfare Program)
<u>0</u>	Emergency Assistance
<u>1</u>	Worker's Compensation
<u>2</u>	SSI/SSDI
<u>10</u>	Retirement
<u>1</u>	Child Support
<u>1</u>	Other: EBT

**What do you think is Escambia County's MOST important social service need? Why?**

"Education" was ranked first in terms of being the most important need with "jobs" following closely behind.

7	Affordable Housing
2	Child Care
1	Accessible Health Care
<b>11</b>	<b>Jobs</b>
3	Job Training
1	Legal Assistance
0	Food Assistance
2	Juvenile Crime Prevention
1	Senior Citizen Services
3	Services for Persons with Disabilities
1	Homeless Services & Prevention
<b>12</b>	<b>Education</b>
2	Transportation
0	Financial Literacy
0	Youth Services
0	Veteran Services
1	Other: Self-sufficiency

**Comments Provided:**

<b>Education:</b> If we can educate the people sufficiently - it is the first step to gainful employment that can mitigate health and other basic needs
<b>General Comment:</b> We will always have the poor with us but when it affects families with minor children Who have nowhere to go, and sleep in the park or in a car. There is not enough funding in Pensacola that will assist with first month's rent, and utility deposits. It is so sad that grown men and women have all most all of the resources in the community. I am not talking about a free ride, but it is a shame that people do not do very much to resolve this issue.
<b>Affordable Housing:</b> Housing is not affordable so individuals cannot afford to live on their own and transportation in this city is beyond ridiculous. Job training is necessary to attract better paying employers to the area
<b>Job Training:</b> Without proper job training, it's very difficult for persons to achieve gainful employment
<b>Youth Services:</b> It's important because many of the youth today are in trouble due to lack of education which leads to lack of employment. Thus a vicious cycle begins to permeate throughout neighborhoods.
<b>Self-Sufficiency:</b> Self-sufficiency is critical to a person's move forward. It affords a person the opportunity to not only obtain training in hard skills but also soft skills such as the following: Balancing Family and Work, Communication Skills, Conflict Resolution, Critical Thinking and Problem Solving, Decision Making, Dress for Success, Emotional

Intelligence, just to name a few...People are not equipped to work in the jobs that are available and they are not equipped to provide products and services ad business owners and persons, which is another area that needs to be addressed in Escambia County. We don't have enough emerging businesses in the African American community...
<b>Homelessness:</b> Homelessness is more of an issue than people want to admit. If families cannot afford to even rent a home, how can we expect them to work, address personal issues or have any incentive to relinquish government benefits?
<b>Jobs:</b> Through my employment at Families First Network, I work with a segment of our community that continuously struggle with obtaining/maintaining employment. Many of the issues we see in dependency court would be avoided if families had stable sufficient income.
<b>Affordable Housing:</b> Because on limited income if you can afford housing you cannot live in the house...the landlord is slum
<b>Jobs:</b> From my experience job searching and what I have heard from others
<b>General Comment:</b> I think most social problems and issues needing correction start with Ignorance.
<b>Affordable Housing:</b> Lack of housing contributes to homelessness, unhealthy children, poor school performance, nutrition
<b>Job Training (Persons with Disabilities):</b> My brother is low functioning and would not be able to hold a paying job if not for Project Search. There are not enough job training programs for the mentally handicapped in Escambia County.
<b>Jobs:</b> There are not enough jobs, for our citizens here in Pensacola. Without jobs people look for other ways to feed their families. The crime rate climbs.
<b>Transportation:</b> Need improved transportation for the elderly that is both affordable and reliable. Reliability has been a major problem.
<b>Jobs:</b> If people are able to work and earn a decent living, then they would be able to afford the necessities: housing, food and transportation.
<b>Transportation:</b> I work with adults and youth that lack transportation. We can provide them with all sorts of services but if they cannot get there it won't matter. It is not because of lack of bus tickets, just lack of bus stops and times the bus runs.
<b>Education:</b> its needed for the growth in Pensacola
<b>Education:</b> Most jobs require some type of education.
<b>Jobs:</b> Putting People To Work has been a key factor of the growth of any civilization...even dating far back into antiquity. Many leaders found that 'putting the people to work' gives every citizen ownership of country, pride, ethics, financial stability, and the opportunity to achieve.
<b>Education:</b> In our family, we believe that a high quality education provides the best opportunity for individuals from all walks of life to gain skills and knowledge needed to improve their personal quality of life and to contribute to their community.
<b>Accessible Health Care:</b> Keeping people healthy is the way to achieve higher standards in education and work for development.
<b>Education:</b> Too many don't have the basic educational tools to take advantage of job training in order to get better paying, more stable jobs.

### What do you think is Escambia County's second important social service need?

Education and "jobs" were ranked at the top of this list; with "job training," "affordable housing" and "transportation" following closely behind.

5 Affordable Housing

1 Child Care

1 Accessible Health Care

### 7 Jobs

6 Job Training

0 Legal Assistance

0 Food Assistance

2 Juvenile Crime Prevention

2 Senior Citizen Services

2 Services for Persons with Disabilities

4 Homeless Services & Prevention

**8 Education**

5 Transportation

0 Financial Literacy

3 Youth Services

0 Veteran Services

1 Other: Better health care for the elderly

1 Other: Rate of abuse and neglect is contributing to their early death

**What do you think is Escambia County's third important social service need?**

6 Affordable Housing

1 Child Care

4 Accessible Health Care

2 Jobs

5 Job Training

0 Legal Assistance

2 Food Assistance

2 Juvenile Crime Prevention

2 Senior Citizen Services

0 Services for Persons with Disabilities

5 Homeless Services & Prevention

7 Education

5 Transportation

3 Financial Literacy

1 Youth Services

0 Veteran Services

1 Other: Culturally stagnant in status quo

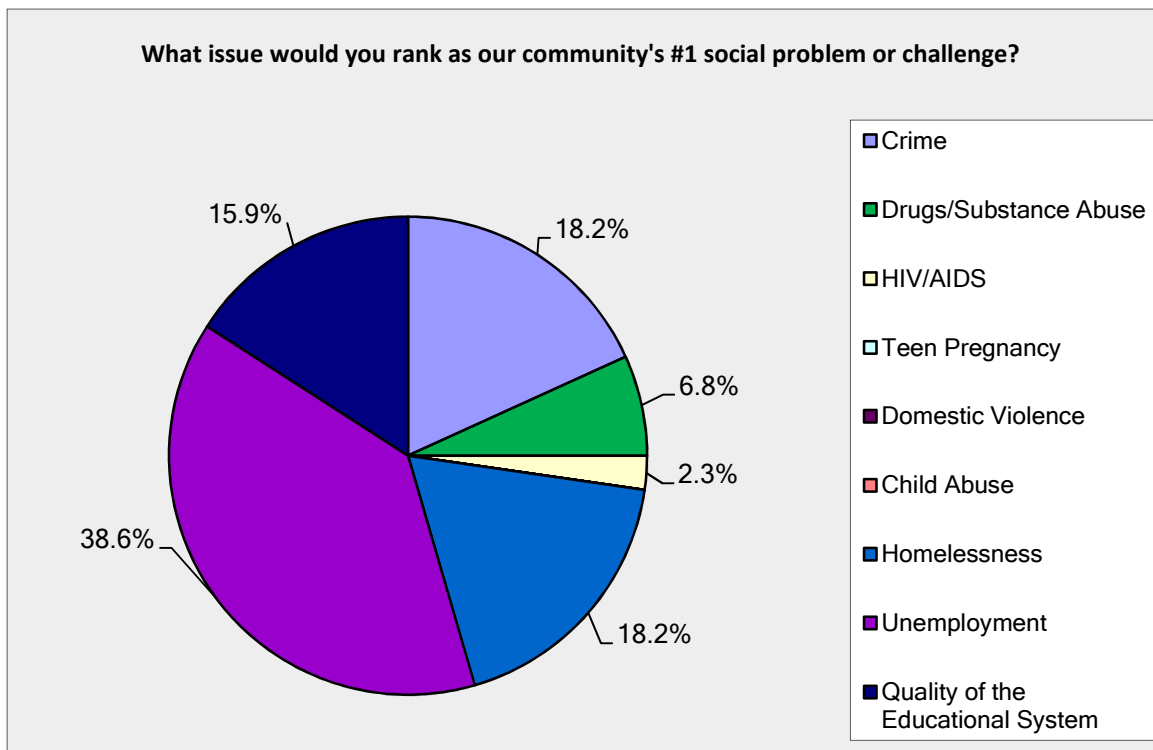
1 Other: We need to educate young mothers in all aspects of childcare, jobs, etc.

1 Other: Affordable housing and homelessness are linked



**What do you think is Escambia County's MOST important social problem or challenge? Why?**

8	Crime
3	Drugs/Substance Abuse
1	HIV/AIDS
0	Teen Pregnancy
0	Domestic Violence
0	Child Abuse
8	Homelessness
<b>17</b>	<b>Unemployment</b>
7	Quality of the Educational System
1	Other: Under-employment (wage rate makes it difficult to meet basic needs)
2	Other: Mental Health
1	Other: Work Ethic



## General Comments:

<b>Unemployment:</b> Most but not all homeless women with children are homeless due to a lack of employability skills, and they lose the job not long after finding it. Lack of proper clothing to look for a job, and no transportation.
<b>Unemployment:</b> unemployment contributes to many of the above issues
<b>General Comments:</b> The majority of youth that have prior records can't get jobs. These youth go into adulthood with the same issues do to their prior record. We need training programs to work with youth, adults & employers. We also need appropriate mental health services for youth.
<b>Unemployment:</b> Unemployment creates an environment of dependency
<b>General Comment:</b> Not enough economic development to bring great companies to the area.
<b>Quality of the Educational System:</b> Many members of our community are uneducated due to biased testing systems put in place throughout the state. This creates a system of failure and high school dropouts. All of which leads to unemployment and an avenue for criminal activities to start.
<b>Drugs/Substance Abuse:</b> It is hard to control and easy to get. Drugs are a coping mechanism for many that are either a product of the above circumstances or lead to it.
<b>Drugs/Substance Abuse:</b> Many of those who we find that are abusing drugs are being driven by the need for adequate mental health care. Many abuse substances to address untreated mental health needs.
<b>General Comment:</b> Complacency.
<b>Unemployment:</b> It contributes to family problems, divorces, family break-ups, child neglect
<b>Drugs/Substance Abuse:</b> There are not enough treatment programs designed to help those with substance abuse issues, they are simply incarcerated & released back onto the streets with the same issues they went into jail with.
<b>Drugs/Substance Abuse:</b> Too many drugs, and not enough legal jobs.
<b>Homelessness:</b> I see a lot of homeless people asking for help. They have no place to go.
<b>Crime:</b> There've been so many unsolved murders with youth. Drive by shootings, etc.
<b>Incarcerated youth:</b> We have the most incarcerated youth in the entire state of Florida!!
<b>School Dropouts:</b> too many drop outs
<b>Crime:</b> So many unsolved crimes and people dying .
<b>Quality of the Educational System:</b> Education is the great equalizer. Education transverse the great divides of society no matter the sex, race, economic status, etc. If our citizens within society receive quality education, it by default starts to solve the many other social problems within a community (trickle down affect).
<b>Drugs/Substance Abuse:</b> Many of the other problems stem from Drug/Substance abuse
<b>Quality of the Educational System:</b> Without a good education to create opportunity, our young people will gravitate to these other problems - crime, drugs, teen pregnancy, etc. Education opens doors to opportunity, which shows youth that there is a better way to spend your time.
<b>General Comment:</b> There are too many people being pushed into a life of homelessness because of poor education, eviction, mounting healthcare costs, etc.
<b>Homelessness:</b> More people are without a home that seems apparent to most. All of these other problems will ultimately lead to homelessness. That being said, we have to work to solve the other problems as part of the homelessness solution.

## What do you think is Escambia County's second important social problem or challenge?

- 9 Crime
- 9 Drugs/Substance Abuse
- 2 HIV/AIDS
- 0 Teen Pregnancy
- 5 Domestic Violence
- 0 Child Abuse
- 4 Homelessness
- 10 Unemployment**
- 6 Quality of the Educational System
- 1 Other: personal responsibility
- 1 Other: Without education we recycle ignorance

**What do you think is Escambia County's third important social problem or challenge?**

**11 Crime**

4 Drugs/Substance Abuse

1 HIV/AIDS

2 Teen Pregnancy

3 Domestic Violence

1 Child Abuse

9 Homelessness

6 Unemployment

7 Quality of the Educational System

1 Other: poverty

1 Other: Need ongoing crime prevention programs

1 Other: Young mothers do not know how to raise children and families

**Do you have suggestions or ideas to help improve the quality of life for Escambia residents?**

Universal intake of those using social services in the community (common portal system) that reduces duplication of service and misuse of resources
Bus routes need to be simpler, takes too long to get where you need to go. Bus tickets are too high for people who have no money. Funding for first month's rent. Better paying jobs, more work hours.
People need good paying jobs and affordable housing in order to have a better quality of life. They need to be able to thrive so they can help each other
More neighborhood programs. Mental health services. Legal services because there are so many youth in the system that should not be & this is mainly due to lack of good legal representation.
Develop training programs beginning at middle school level for our youth to transition in to after completion of high school. Leaders/Elected officials should become more innovative in efforts to move this idea forward
Higher paying jobs and more opportunity
Yes, I do. When students are properly educated, they become better citizens. Students need educational opportunities to include vocational tracks for struggling students. Those students could get the training they need then join a productive workforce after high school graduation. Not every student will attend college so why not train them for other job opportunities. Right now that option is available only at CERTAIN schools and locations. It should be an option at all schools.
Yes, we need to design and create programs that matter to help teach, innovate, motivate, inspire and allow community members to be sufficient in across all disciplines...
Address generational poverty and all the issues that go with it.
Develop more comprehensive long-term mental health care & substance abuse treatment to include housing
Unsure
No litter. Litter is the gateway to many further social problems.
Yes, get all politicians and community involved
More funding.
Yes. We need more positive outlets for our residents, especially the young people.
Punching Bags, at our schools to help students with anger issues.
I would like to see improved transportation. I would like to see more programs that link agencies inter-generationally (e.g., children and elderly). I would like to see more volunteers in the school to teach financial literacy, values clarification, and other practical matters.
The solution is employment, education, crime prevention.
Social Services need to be monitored more. There are services and funding, people just do not use them for what is actually needed.
put the true stats out
Incorporate more social service programs especially substance abuse for women.

Educate the community on the help available. When they know better, they can do better.
Greater collaboration among government, school system, private sector, social service organizations. Our challenges are not created in silos and will not be solved in silos, either.
Start with access to healthcare
A lot of our services are becoming too compartmentalized. More holistic support of those in need and better safety nets for those on the brink.

**If you have personally used services provided by CAPC, which services did you use?**

31 N/A

1 Early Head Start

5 Head Start

2 Utility Assistance

4 Weatherization/Home Repair

1 Employment Services

1 Small Business Development

1 Legal Assistance

3 Other:

- Fortunately, I have not had a need to use services provided by CAP. However, I have attempted to seek help for individuals in need of your services. I feel your staff is not equipped with the necessary skills to handle the people they service, more focus should be placed on training that would change the way in which some of your staff handle people.
- We are partners of CA
- I am a special education teacher. I refer my adult students with disabilities to all of the services listed that apply to each student.

**Did offer to assist you with setting goals for you and your family?** 2 Yes 1 No 23 N/A

**Did a Head Start staff member follow-up with you in an effort to assist you in meeting your goals/needs in a timely manner?** 2 Yes 0 No 24 N/A

**What do you like the most about the Head Start program?**

- People care about my grandchild

**Is there anything you would change about the program?**

- N/A

**Do you have additional questions, comments or suggestions as it relates to the need of our community?**

Education is the key to what ails most of our urban communities. Communities need to provide a viable source of education and training for its members.
A designated liaison or something as little as a designated referral form by which certain clients who are currently working with other providers could be identified and assisted with the services you offer would be awesome and extremely helpful.
We are on the right track as a community, bannin together to try and connect our community as united. I have tried punching bags many times, they truly do help the youngsters burn off stress.
Thank you for the invitation to share my thoughts.
Community Action needs to have more youth assistance services. Youth services are needed more than anything else in this county.
We need more black leaders in this community.

**[End of Escambia Community Needs Survey Report]**

## Community Focus Group Report

Two focus group sessions were conducted among the community stakeholders, business leaders and the general public to help assess community needs from the public's perspective. Both sessions were facilitated by a third-party company, *Strategic Resource Solutions*, independent of staff affiliated with *Community Action Program Committee, Inc.*

### Focus Group Session One

Date: June 3, 2014 (Tuesday)

Time: 6:00 p.m. – 7:00 p.m.

Number of Participants: 9

Location: Main Public library, 239 North Spring Street, Pensacola, FL 32502

### Focus Group Session Two

Date: June 4, 2014

Time: 12:00 p.m. – 1:00 p.m.

Number of Participants: 11

Location: Main Public library, 239 North Spring Street, Pensacola, FL 32502

### Total participants: 20

One person chose not to complete a survey, but participated in the discussion.

Three people missed the opening exercise, which accounts for difference in the number of people responding to the first question that asked participants to rank their choices.

### Incentives

- Food: A light meal of sandwiches and chips were provided through a local deli.
- Gift Card: A \$20 Wal-Mart gift card was offered to each participant (Declined: 2 of 20).

## BASIC DEMOGRAPHICS

**Gender:** 9 Male 10 Female

### **Race/Ethnicity:**

13 White/Caucasian

4 African-American/Black

1 American Indian

1 Multi-racial

### **Age**

4 25-34

3 35-44

3 45-54

6 55-64

3 65 or over

**Employment Status**

- 12 Full-time employed
- 1 Part-time employed
- 3 Self-employed
- 0 Unemployed-student
- 0 Unemployed-SSI/Disability
- 1 Unemployed
- 2 Retired

**Highest Level of Education**

- 0 Did not graduate from High School (11th grade or less)
- 4 Graduated from High School or earned GED
- 3 Attended 1-2 years college or technical school
- 1 Graduated with Associates degree or certificate
- 0 Graduated with technical degree or certificate
- 0 Attended 3-4 years college or technical school
- 6 Graduated with Bachelor's degree
- 5 Graduated with Master's degree or higher

**Annual Household Income**

- 1 Less than \$10,000
- 3 \$10,000 - \$19,999
- 2 \$20,000 - \$34,999
- 1 \$35,000 - \$49,999
- 3 \$50,000 - \$74,999
- 4 \$75,000 - \$99,999
- 5 \$100,000 or more

**Housing Status**

- 1 Rent
- 16 Own
- 1 Homeless

**Question: What do you like or love about living here [Escambia County/Pensacola Area]?**

- The climate is great
- Roads; Interstate system; The city is easy to get to
- The Beaches!!!
- Friendly
- Small community
- Historical – I like the historic houses; many have been preserved
- Downtown event: Gallery Night
  - o Vendors; Street performers, occurs one day a month;
  - o The city comes together, different people at one time.
  - o The people are great; nice for families
- High population of natives; people who grew up here

**Question: If I were thinking about moving here, what would you want me to know or be aware of?**

- Negative side possible flooding
- Hurricanes; Some years we hardly get a chance to catch our breath before another hits

**Question: What do you think is Escambia County's MOST important *social service need*?**

**Rank your 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choices.**

**1<sup>st</sup> Choice**

**(combined responses)**

Educational System – 4  
Parental Involvement in Ed - 1  
Affordable Housing - 3  
Homelessness – 1  
Jobs/Job Training – 2  
Health Care – 1  
Services for Persons  
w/Disabilities –1  
Juvenile Crime Prevention – 1  
Substance Abuse/Drugs - 1  
Senior Services – 1  
Affordable Legal Services - 1

**2<sup>nd</sup> Choice**

**(combined responses)**

Jobs/Job Training – 6  
Transportation – 3  
Crime – 1  
Educational System – 1  
Poverty – 1  
Healthcare for Seniors - 1  
Affordable Housing - 2  
Youth Services – 1  
Services for Persons  
w/Disabilities –1

**3<sup>rd</sup> Choice**

**(combined responses)**

Jobs/Job Training – 4  
Transportation – 3  
Crime – 1  
Educational System – 2  
Homelessness – 3  
Senior Services - 1  
Affordable Housing – 2  
Juvenile Crime Prevention - 1

*Out of 17 respondents, 8 people ranked jobs/job training as their first or second choice; and 4 people selected jobs/job training as their third choice.*

**Question: What do you think is Escambia County's MOST important *social problem or challenge*?**

**Rank your 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choices.**

**1<sup>st</sup> Choice**

**(combined responses)**

Unemployment/Jobs – 7  
Substance Abuse/Drugs – 3  
Crime – 3  
Quality of the Educational  
System – 3  
Teen Pregnancy/Youth - 1  
Poverty – 1  
HIV/AIDS – 1  
Services for Persons  
w/Disabilities –1

**2<sup>nd</sup> Choice**

**(combined responses)**

Unemployment/Jobs – 5  
Substance Abuse/Drugs – 5  
Crime – 3  
Quality of the Educational  
System – 3  
Teen Pregnancy/Youth – 2  
Homelessness - 2

**3<sup>rd</sup> Choice**

**(combined responses)**

Unemployment/Jobs – 1  
Substance Abuse/Drugs – 2  
Crime – 3  
Quality of the Educational  
System – 4  
Teen Pregnancy/Youth - 2  
Homelessness - 4  
Domestic/Child Abuse - 4

*By far, unemployment/jobs were considered as the most important social problem or challenge in Escambia County. Out of 20 respondents, 12 people ranked unemployment/jobs as their first or second choice.*

## **GROUP DISCUSSION**

(Unedited Comments By Topic)

### Unemployment/Jobs

- People need a livable wage.
- There is a lack of skilled work; many jobs here are seasonal due to tourism.
- Escambia County has a lot of military. Seniors and retirees.
- The military subsidizes income levels that would otherwise meet poverty guidelines.
- Jobs are critical
- Livable wage needed; people are working, but they are not making enough to provide for their families.
- The types of available jobs go back to education, or the lack of “sufficient” education.

### Substance Abuse/Drugs

- People hooked on drugs have problems getting and keeping jobs, which can lead to crimes and some of these other issues we’re talking about.
- Drugs a lot of the teens are self-medicating
- Drugs are easy access

### Crime

- 47% of African American males are incarcerated; There are no re-entry programs in Northwest Florida.
- Public policies make it difficult for a person who has been incarcerated to succeed; If a person committed a felony, their record carries a blemish even if they are juveniles (although there is pending legislation to adjust for the type of crimes committed). This makes it harder to find employment and get back on your feet.
- When I was coming up...once you go to jail and do your time...it’s over. Your rights are restored, but this is not the case now.
- Crime among adults and children are tied to the lack of a strong educational foundation.

### Quality of the Educational System

- Low income wages also comes from lack of education.
- I think the educational systems are good, but parents need to play a larger role. The teachers and schools can’t do it all.
- The development of children between the ages of 0-5 is key.
- The FCAT has caused the school system levels to go down.
- We are not adjusting to the way this generation of students learn.
- Vocational programs are limited. There needs to be a proactive educational pipeline from high school to 2- or 4- year college...leading directly into jobs.
- I feel that all of these pipelines do exist through the career academies and a number of community partnership with the educational system. I believe part of the problem is that people may not know about all of the various options that exists. Perhaps one large part of the problem is associated with the marketing and coordination of existing services.
- Yes, but only about 30% of students have access to career academies. These options need to be widespread, especially in failing or troubled schools.
- A lot of people stop at high school diploma or less; Some of them stop by choice or for other factors going on in their lives.
- Public education isn’t good; It needs improvement.



- Education is how to improve ourselves. Teachers are blamed, but parents also have the primary responsibility. If students don't get a good educational start, they spend the first few years trying to catch up or end up in remedial classes.
- Social media is affecting education today; I just read a report stating that 21% of 3<sup>rd</sup> graders aren't reading on grade level; statistically the number won't change; Students are being labeled unsuccessful early...3<sup>rd</sup> grade is too early to slap that label on a child, and from that point on they are placed on a different track.
- Families are dysfunctional; Common core is going to be a huge problem because children will no longer be taught to think, but to merely recite facts and data;
- Education starts at home; Communication starts at home; I'm aware of a situation where a child didn't know his legal name because he was only called by his nickname.
- If we are going to push education we need to push entrepreneurship. I think this is a huge missing piece. Traditional jobs are no longer available like they used to be. Teaching more students how to start and operate their own business.
- 30% of students can get into career academy.
- There must be an additional focus on soft skills development.

#### Teen Pregnancy/Youth

- I see a lot of generational poverty, which is an issue that is deeper than just "teen pregnancy."
- Many of the girls I work with don't want to repeat their mothers' mistakes.

#### Poverty

- Jobs are critical...people need a livable wage;
- The types of available jobs paying livable wages goes back to education.
- Poverty is a symptom of many of the other problems we've discussed.

#### HIV/AIDS

- The HIV/AIDS rate is the highest across Florida in Escambia County. We don't address it enough.

#### ADA Issues/Accommodating Persons with Disabilities

- ADA issues need to be addressed.
- 21% of the local population is disabled.
- Our beaches are not accessible for the disabled. They are not accessible for wheelchairs. Events aren't accessible for the handicapped. There needs to be a focus on "Community Inclusion" for persons with disabilities. This community needs to be desegregated in that sense (e.g., housing, seating at public events, etc.).
- Decrease accessibility = negative impact on tourism = negative economic impact
- Persons with disabilities need more training strategies

#### Affordable Housing

- Before Hurricane Ivan, making minimum wage could get an affordable 2-bedroom apartment. After the hurricane housing isn't as affordable. Wages didn't change. Income levels don't match available rents.

### Homelessness

- 90% of homeless in Escambia county work but can't afford a home. Something's wrong with that.
- Waiting lists are so long for section 8.
- There just not enough affordable homes.

### Transportation

- Public transportation isn't good at all.
- A few years ago they came in and changed the bus route system. Now I can't get a handle on how the buses run.
- I know! We had many clients with disabilities who rented or purchased housing based upon the previous bus routes, now some of them have to really go out of their way to get to a bus stop.
- Many bus stops have curbs that are difficult to access for persons with a wheelchair, a disability or even parents pushing strollers.
- Many bus stops offer no shelter from the elements.

### Healthcare

- It is my understanding that we have one of the highest cancer rate in the nation. Homeless people get \$5.00 healthcare at a local community clinic, but the quality suffers because it's so crowded.
- Florida chose not to expand Medicaid. I feel that this is going to have a very negative impact on our community.

### General Comments

- **Young Professionals:** Young professionals are slowly coming back and staying, which is encouraging.
- We definitely have a lot of natives here in Pensacola...people who were born and raised here.
- Hurricanes have really changes the city. Landlords starting charging higher rents as a result of subsidies, but these subsidies were temporary and prices never returned to previously lower rates.
- Hurricane and the BP oil spill brought in many a larger Hispanic population due to construction and temporary jobs. Many families decided to stay in the area.
- **Childcare:** Subsidized childcare has increased parents are working again. Childcare is very expensive.
- Escambia County needs livable wages. Escambia County needs more high level industries paying better wages.
- **Foster Care:** The foster care system isn't good at all. I am a product of it. Kids aren't really prepared to be released on their own, and they end up struggling or lost in the system. Group homes are continuing to close...where are these kids going to go?
- I've been in this community for over 30 years, and we're still talking about the same problems. Over the last 30 years there hasn't been much of a change. I hope that some pieces of this discussion leads to real change.
- **City/County Involvement** – There is a lack of City/County involvement in addressing these issues.
- Seniors need more help navigating various systems that are designed to help them.
- Affordable legal services is a need, and prevent people from being taken advantage of.

**Question: Prior to receiving this survey, were you familiar with the Community Action Committee Partnership, Inc. and the services it provides?**

55% Yes 45% No

Some individuals who stated “No” were familiar with the Head Start program, but was not aware of CAPC’s link with the program.

- “I’ve been working with youth in Pensacola for nearly 30 years, and had never heard of the agency”
- They need more outreach and marketing to let more people know what they do.

**Question: Are there any topics that we missed or did not cover?**

- **CAPC:** It would be nice if the agency shared to outcome of this process with the participants. I’m interested in knowing how they’re going to use this information.
- **CAPC:** Yes, they could use our email addresses to forward an update.

**[End of *Community Focus Group Report*]**

## **6. Resources in the community that could be used to address the needs of Head Start eligible children and their families, including the assessment of their availability and accessibility.**

### **Community Resources**

Not unlike other communities, resources are not sufficient to serve the number of children and families in need. The number of children and families served by various programs in Escambia County has been cited throughout this document. In order to understand better the services and populations served by these organizations, agencies and programs, an outline of the major services, not previously cited, is provided in this section. Although this is not an exhaustive list of services, it does provide a solid overview of available options.

**2-1-1 of Northwest Florida** is an information and referral service for individuals physically located in Escambia, Santa Rosa, Okaloosa, Bay, Calhoun, Gulf, Holmes, Jackson and Washington Counties (FL). Similar to dialing 9-1-1 for emergency services, individuals may dial 2-1-1 for social services. This service is also accessible online at <https://escambia.communityos.org>.

**Pensacola Bay Transportation** provides transportation assistance to the transportation disadvantaged, including the elderly and disabled. Applications must be submitted, and a 24-hour advance notification is needed to schedule a ride.

The **Area Housing Commission** provides low and moderate income rental housing units in the Escambia County area. Offices are open Monday – Friday from 8:00 a.m. – 5:00 p.m. Head Start has formal agreements with several of the Housing Commissions and provides classrooms for children on site at Moreno Court and Morris Court.

**Baptist Speech and Hearing Clinic** provides speech and hearing services to individuals referred from a physician's office. The clinic is open Monday – Friday from 8:00 a.m. – 4:30 p.m.

**Catholic Charities** provides adoption services, case management, disaster relief, emergency family assistance and immigration and refugee services. Hours are Monday – Friday from 9:00 a.m. - 5:00 p.m.

**Community Action Program (CAP) Committee, Inc.** provides the following programs:

- Community Services Program
- Low Income Heating and Energy Program

### **Community Services Program**

The department's primary two goals are:

- Help low-income people become self-sufficient through employment, employment support or economic asset enhancement.
- Help low-income people, especially vulnerable population, achieve their potential by strengthening family and other supportive systems, encouraging independent living, providing emergency services and fostering child/family development.

The focus of the CSBG funding has been on employment, education and other self-sufficiency programs developed to help our customers succeed in their goals to become productive citizens. The Community Services Department assists customers both on an as needed basis and long-term case management effort.

The following services are offered to customers not enrolled in long-term case management and based on available resources

- Opportunities for crisis/emergency assistance (rent, utilities, food vouchers, prescriptions, transportation, and childcare) based on availability of resources
- Help with GED, trade/vocational education, or higher education to improve opportunity for jobs with a livable wage.
- Assess employability skills and opportunity to participate in the *Community Action Program Committee's Job Readiness Program*, which also includes job placement services.

Community Services Program customers enrolled in long-term case management enjoy an extensive and detailed approach to managing their move from a crisis situation to self-sufficiency. The services and advantages of long term case management will consist of the following programs: Employment, Education, Small Business Development, Home Acquisition, Expunge/Sealing of Criminal Record, CDL License and Individual Development Account Program (IDA). Customers who are actively involved in the Long-Term Case Management Program will be eligible for assistance with rent/mortgage payment, rent deposits, utility bills (gas, water, electric) and utility deposits twice a year based on the needs of the customers.

#### **Low Income Home Energy Assistance Program (LIHEAP)**

The energy program is to assist with a source of heating and cooling in a residential dwelling. The Low Income Home Energy Assistance Program has three categories of assistance: Home Energy Assistance, Crisis Assistance, and Weather Related Assistance.

**Home Energy Assistance:** Home Energy Assistance helps eligible households in meeting the cost of home energy and allows for a benefit payment for eligible households whom have obligations for home energy. The program only allows for a home energy benefit once per program year to eligible households. The amount of the benefit is based on a benefit matrix provided by the Department of Community Affairs.

**Crisis Assistance:** Crisis Assistance helps eligible households resolve or mitigate a home energy crisis. Crisis is defined as no access or being in immediate danger of losing access to needed home energy. A crisis category allows for a benefit payment for eligible households that have an unavoidable heating (payment made October – March) and cooling crisis (payment made April – September). It may pay the actual home energy bill owed by eligible households and/or other necessary energy expenses. The amount of the benefit payment is the minimum amount necessary to resolve the crisis. A household may be determined eligible during only one heating season and one cooling season per contract year. Agencies may make a crisis benefit payment not to exceed the maximum benefit per crisis of \$600.

**Weather Related Assistance:** Weather Related Assistance helps eligible households resolve or mitigate a home energy crisis caused by an emergency declared by the Department of Community Affairs, Governor or President and the emergency exists due to weather related conditions. Some measures allowed during the hurricanes' aftermath were of a restorative nature. Restoring is construed in the most general sense as anything necessary to restore home power, electric, gas, oil, or other. Activities allowed were building wiring inspection, utility box replacement, equipment repair/purchase, blankets, fans, utility pole installation, electrical and other utility inspections, contractors/subcontractors cost when applicable and two months utility assistance. The maximum amount allowable for each crisis is set by the Department of Community Affairs depending on the extent of the damage. Agencies will grant assistance to eligible households until they exhaust available funds.

### **LIHEAP Application Process**

The agency must verify LIHEAP eligibility requirements. Verify means to secure proof of the accuracy of information given by the households by obtaining from another source. The application process is designed to obtain information needed to determine eligibility and prevent duplication of services. The following information must be obtained along with a completed application: Picture ID for all persons in the household 19 years of age or older, social security cards for everyone in the house hold, current income of all persons in the household, current home energy bill. A client file is established for each client including all needed information to process the application. All applicants approval or denial is based on meeting income requirements, after requirements are met the applicants are notified of the approval or denial status then payment is forwarded to the utility company.

**Safelink:** Lifelink is a program that provides free cells phones and airtime each month for income eligible customers.

**LIFELINE/Link-up:** The Lifeline/Link-up program provides affordable telephone service for income-eligible consumers.

- **Lifeline Assistance** provides discounts on basic monthly service at the primary residence for qualified telephone subscribers. These discounts can be up to \$10.00 per month, depending on your state.
- **Link-Up America** pays one-half (up to a maximum of \$30) of the initial installation fee for a traditional, wireline telephone or activation fee for a wireless telephone for a primary residence. It also allows participants to pay the remaining amount they owe on a deferred schedule, interest-free.

For each of the services provided by the Community Action Program Committee, Inc. clients must meet the Poverty Income Guidelines established. For the Community Services Program, they must meet the CSBG Poverty Income Guidelines. For Weatherization, they must meet Weatherization Poverty Income Guidelines. For the Energy Assistance Program, they must meet LIHEAP Poverty Income Guidelines.

### **COOPERATIVE AGREEMENTS**

The CAPC Head Start program, through the Community Action Program (CAP) Committee, Inc. also has cooperative agreements with the following community agencies/organizations:

**Catholic Charities:** The *Catholic Charities* program accepts referrals for basic living needs (food, utilities, and housing).

**United Way:** *United Way* enables networking for services and goods (free income tax service, community house and office items).

**University of Florida Extension Services:** The *University of Florida Extension Services* program offers trainings and workshops for Head Start parents.

**Pensacola State College:** *Pensacola State College* provides a GED instructor for our on-site GED class.

**Families First Network:** *Families First Network* offers invaluable information and counseling with regards to suspected child abuse/neglect and will provide trainings for staff and parents.

**Council on Aging:** The *Council on Aging* provides foster grandparents to volunteer in classrooms.

**Workforce ESCAROSA:** *Workforce ESCAROSA* places volunteers to perform community service hours.

**AHCA (Agency for Health Care Administration Area/Medicaid):** *AHCA* provides consultation on Medicaid issues.

**Manna Food Bank:** *Manna Food Bank* provides assistance and guidance for the Head Start garden.

**It's A Blessing:** The *It's a Blessing* program provides monthly list of food items offered to the public.

**Pensacola Habitat for Humanity:** *Habitat for Humanity* provides seminars to parents/staff on becoming a homeowner.

**Project Reach:** *Project Reach* provides consultation on the homeless, while also issuing their booklet "Street Survival Guide."

**Community Drug and Alcohol Commission:** The *Community Drug and Alcohol Commission* provides workshops, trainings, and classes for Head Start parents and staff.

**State of Florida Department of Children and Families:** The *Florida Department of Children and Families* provides an ACCESS (Automated Community Connection to Economic Self Sufficiency) computer for individuals to check on Social Security, food stamp benefits, etc.

#### **Other Community Services**

**Escambia County Health Department:** The *Escambia County Health Department* is also responsible for immunizations. Parents must make an appointment at the Molino and Century clinics. Other clinic locations allow walk-ins. The *Escambia County Health Department* also operates a "Shot Mobile" that provides immunizations at various locations throughout the county.

**First Call for Help:** *First Call for Help* is a free telephone-based comprehensive information and referral service with more than 250 agencies and more than 500 programs or services listed. *First Call* serves approximately 1,000 calls per year. Information is also available to professionals in the *Directory of Community Services* in print and diskette form. The call center is open 8:00 a.m. – 5:00 p.m., Monday through Friday.

**Loaves and Fishes:** *Loaves and Fishes* provide shelter for single parents with children, married couples with children, and pregnant women.

**Legal Services of Northwest Florida:** *Legal Services of Northwest Florida* provides legal services with individuals with landlord-tenant and consumer issues. Hours are Monday – Thursday for 9:00 a.m. – 4:00 p.m., and on Friday from 9:00 a.m. -1:00 p.m.

**Community Enterprise Investments, Inc. (CEII)** provides credit counseling and training free of charge. monthly group and individual home ownership and credit counseling and training are provided. Hours are Monday – Friday from 8:00 a.m. – 5:00 p.m.

