
Vulnerable Populations

Description

Some populations in the community share common characteristics that make them more susceptible to “falling through the cracks”. Three such groups are the elderly, people with disabilities, and young children. All three groups are vulnerable to financial constraints, a lack of available resources and services, and insufficient public awareness of their situations. All three often find it difficult to advocate for, or provide for all of their needs themselves, and must rely on others for at least some support services. Each group, in turn, also faces unique challenges.

Other at-risk populations in our community include the children and families experiencing poverty, the growing number of Spanish-speaking individuals, those suffering from mental health issues, teens, individuals who are HIV positive and are dealing with AIDS, and transients.

THE ELDERLY

As they grow older, the elderly may find themselves facing new challenges, such as fighting a chronic disease or acute illness, becoming socially isolated and lonely, and trying to live on a fixed income. Some are no longer able to drive safely, further limiting their mobility and opportunities to seek company and services. If they have lost a spouse, there is less incentive to shop for and cook healthy, varied meals. Many are forced to leave lifetime residences filled with cherished memories that are now too large and challenging for them to take care of, or do not have the physical accommodations that might allow them to stay instead of moving in with family or friends, or to an institution. Families that take in the elderly find it difficult to obtain respite care. Helping individuals struggling with Alzheimer’s can be especially taxing on the caregiver.

Monroe County Fast Facts

- There were 11,074 people over the age of 65 in 2000, or 9.2% of the population.
- The number of elderly over the age of 65 has increased by almost 20% in the last ten years.

For additional statistics, please see the Supplement.

Key Findings

- About 8% reported having an elderly person as part of their household; 4% of the households had both elderly and disabled members.
- Getting transportation for services was a major problem for 4% and a minor problem for 10%.
- Finding elder care for the member of the household was a major problem for 3% and a minor problem for 6%. It was a slightly greater challenge for individuals with low-incomes.

Data collected from the key informant interviews and the provider surveys also indicated the following needs:

- Services to help the elderly remain in their homes, including an emergency home repair program, in-home help with housekeeping and meal preparation, nutrition advice, and assistance with home modification for elderly with disabilities. More hot lunches are needed for the homebound. A delivery service for low-cost prescriptions would also be helpful.
- Transportation services to help the elderly shop for food and household needs, access health services, and engage in community activities. The transportation services should be equipped to handle the needs of elderly who are disabled, even temporarily. Transportation services are especially needed in rural areas of the county. However, the ADA limits eligibility and many elderly don't qualify for this program
- An ombudsman to help connect the elderly to services, including fitness and wellness activities, care planning and management, legal services, and adult protective services. Limited resources have probably kept this from happening. The service could provide information and referral for community providers as well.
- Non-medical assisted living for low and moderate income elderly. There are several retirement communities, but they are beyond the means of many elderly, and some have waiting lists of up to two years for admission.
- Additional elder care resources, including expanded elder day care capacity and some evening elder care. There is a special need for resources, caregiver support and services for patients with Alzheimer's.
- Greater public awareness of the needs of the elderly.
- Employment services to connect the elderly with job and volunteer opportunities.

Examples of Community Efforts

- Area 10 Agency on Aging serves the elderly and disabled, providing in-home services and some transportation through the Rural Transit System. The agency also advocates for the needs of the elderly in Monroe and Owen Counties and runs the Endwright Center, where senior citizens have the opportunity to participate in exercise programs, social activities and much more.
- The Evergreen Project is a community effort dedicated to provide affordable housing options for seniors in downtown Bloomington, near service providers, transportation options and social activities. This project is working to obtain the necessary funding to proceed.
- Several area churches have collaborated on a volunteer program to provide in-home “helping-hand” type services and shopping assistance to the home bound.
- The Senior Services Guide informs seniors about available services that can help them remain in their homes for as long as possible.
- Several organizations, including the Monroe County Council for Older Americans and Bloomington Adult Community Center have recreational activities for seniors, and offer support for health and socialization.

Places to Start

- People are moving to Bloomington to retire, encouraged by recent community ratings in national publications. The community needs to find ways to tap into the growing resource of older citizens. A healthy and strong retired population has a lot to contribute to the community, including serving as volunteers.
- Establish an ombudsman to help serve as a clearinghouse for elder issues and to connect the elderly to needed services, to help build public awareness and to provide information and referral for community providers.
- Work with existing service providers and other community organizations to prioritize ways to help the elderly remain in their homes through access to home repair and maintenance programs, to supply nutrition and food assistance where needed, and to assist with home modification for the elderly with disabilities.
- Examine existing transportation services, identifying priority geographic areas, costs and alternatives.
- Work with the housing community and developers to create additional non-medical assisted living for low and moderate income elderly.

- Establish additional elder care resources, including caregiver support and services for patients with Alzheimer's. This initiative could parallel employment support efforts for other types of care, like child care, for some families.

INDIVIDUALS WITH DISABILITIES

Individuals with disabilities vary in their need for support services to achieve and maintain independence. Services can be costly, and many agencies and consumers are struggling with tightening budgets. Providing quality, cost-effective services to clients with multiple disabilities that might include a mental disability can be very time consuming and challenging. Current gaps in service include the need for additional in-home assistance and transportation. Parents caring for someone at home are often concerned with their child's future as they themselves get older and face needs of their own. There is a lack of advocates to deal with finances, appointments, doctors, and transportation. To deal with cost and resource constraints, agencies may rely heavily on volunteers. However, finding committed long-term volunteers can be difficult due to their busy schedules. Also, people with disabilities are still often hampered by public discomfort and misunderstanding of their capabilities. Greater awareness and education about these issues are needed.

Monroe County Fast Facts

- There are 2,130 people with disabilities, ages 5 to 20 years living in Monroe County (2000).
- There are 8,518 people with disabilities ages 21 to 64 years living in Monroe County (2000).
- There are 4,097 people with disabilities 65 years and over living in Monroe County (2000).

Key Findings

- About 4% of the households surveyed reported having a household member with a disability.
- Of those with a disabled household member, 4% found finding transportation for that person to be a major problem; about 10% reported it to be a minor problem. Slightly more than 20% said that finding services for a household member with a disability was a major problem; 13% said it was a minor problem. Transportation was more of a challenge for low-income individuals.
- Like many other social services, demand is increasing while some resources are becoming more scarce. Disability benefit requests from the office of Social Security increased 15% from 2001 to 2002. Many consumers do not have the funds to pay for services, increasing the burden on the service providers.

- As with the elderly population, there is a lack of advocates to deal with finances, appointments, doctors, transportation, in-home help, and similar issues.
- Many of the services that could benefit the disabled population are dispersed among various agencies and programs, making them more difficult to access. Greater communication and continuity among services or a “one-stop shopping” option could potentially help to streamline the process and make it more convenient for clients to access assistance. A greater emphasis on educating the public about the agencies and their services would also help those in need access the appropriate assistance more easily.
- Families who are providing care for a person with disabilities need respite services for at least several hours a week. At this time, few families are able to access such services.
- Additional support is needed for modifications to exterior stairs or curbs outside of homes; some organizations can only provide support for access in the house.
- Transportation services for the disabled are in need of further expansion. Providers believe that transportation services are more comprehensive than they used to be, but there are still additional needs. People with disabilities may also need instruction on how to use the public transit system, or assistance with access.
- Some people with disabilities are not receiving the medical services they need due to a lack of funding or mechanisms for helping them gain access.
- It is difficult for many providers serving people with disabilities to use volunteers due to the specialized training that is required.

Examples of Community Efforts

- Attitudes towards people with disabilities have improved in recent years. Hire Potential Indiana, a collaborative effort between Options for Better Living and the Greater Bloomington Chamber of Commerce, provides a forum for business leaders to talk about the success that they have had in hiring people with disabilities.
- Stone Belt Center has innovative individualized “consumer” (the staff’s term for a client) plans. Its new partnership with a leather manufacturing company allows some of its consumers the opportunity to work under the mentorship of a leather craftsman in an employment situation.
- There are several organizations that work to advocate on behalf of persons with disabilities. In some cases, they are able to provide needed equipment,

such as wheelchairs and walkers, by loaning them to clients or renting them at a reasonable rate.

- PALS is a therapeutic horse back riding program for children, teens and adults with physical, mental, and cognitive disabilities. It collaborates with a number of organizations to provide services. It has a limited number of scholarships.

Places to Start

- Recruit a larger, more knowledgeable volunteer base to assist people with disabilities.
- Train advocates to help with finances, appointments, doctors, transportation, in-home help, and similar issues facing people with disabilities.
- Investigate the benefits and drawbacks of providing more services under one roof, or other mechanisms for making service delivery more streamlined. Look at the successes and challenges of other communities who have tried something similar.
- Create additional respite care options for families who are providing care for a person with disabilities.
- Evaluate where additional support services are most needed, for example in transportation, and the exterior access to homes.
- Work with other service providers in areas, including health care services, to ensure that people with disabilities are aware of and utilize these programs as needed.

YOUNG CHILDREN AND AFFORDABLE CHILD CARE

Research shows that young children need good nutrition, health care and positive learning experiences from birth. Children born into a family already struggling with issues like unemployment, stretched resources, stress and depression, and even substance abuse are often at risk for hunger, inadequate health care, lack of stimulating play and learning activities, unstable surroundings, and even neglect or abuse in severe cases. While some are fortunate to be cared for in licensed, quality day care settings, others may find themselves being watched by a designated neighbor who may or may not have skills or experience in child development.

Women who become single-parent families due to divorce, desertion, incarceration or death of a wage-earning spouse may have difficulty maintaining their prior income level and often must rebuild their own credit history. They may also lose health and other insurance benefits. This leaves them with fewer resources for basic family necessities. It is critical for parents with young children who are trying to improve their education or re-enter the workforce to have access to quality, affordable child care.

Accessing reliable, quality, affordable child care is one of the greatest barriers to women obtaining and keeping a job, or furthering their education. In addition, day care makes it possible for both parents to work, thereby increasing the family's economic well-being. The recent state fiscal crisis has led to cuts in the voucher programs that many relied on to help pay for day care. More subsidized day care is needed to help fill this void. Due to eligibility changes, the City no longer maintains a master waiting list. Monroe County United Ministries (MCUM), a major provider of subsidized day care, has a waiting list for services and estimates it is meeting only about 20% of the need.

Monroe County Fast Facts

- Monroe County had 203 children in Head Start in 2000.
- There were 2438 slots available for children in licensed day care facilities (2002).
- The annual number of children receiving child care vouchers was 1248 in 2002.
- About 12% of the children in Monroe County are living in poverty.
- In 2000, the license child care capacity of Monroe County was for 2,231 children. Of those, about 530 children were in subsidized care. There were 11 registered provider ministries.
- About 62% of children under age six (4135) live in a family in which all their caregivers (one or both parents) work.

Please see the Statistical Supplement for information from Kids Count.

Key Findings

Respondents were asked if they had difficulty finding affordable day care for the children in their household. About 38% had a minor problem. Finding day care during the work hours needed was more of a challenge with 53% reporting a minor problem. Many day care providers have adjusted their hours to have an earlier drop-off and later pick-up time, although not in sufficient numbers to meet the demand. Day care for ill children was identified as a problem by SPAN/MC (1998), and still remains an issue. Many day care providers close during holidays and school vacations. This presents a challenge for parents whose work schedules do not match the public school calendar. Similarly, finding transportation to get children in the household to day care is a challenge with 77% reporting this as a minor problem.

Other issues included:

- Township trustees and other providers are concerned about cuts in Head Start funding that have resulted in reduced services.
- Providers are concerned about policies that keep children in family situations that are not desirable, for example where a mother is using illegal drugs or is having multiple relationships.
- Although the State's Healthy Families program has had a positive impact on the prevention of child abuse and neglect, the program is being cut because of the present state budget deficits.

Examples of Community Efforts

- The Villages opened a new day care in response to community need. Middle Way House's FoodWorks provides healthy, nutritious meals and snacks for the children in this program.
- In 2002, the Community Kitchen supplied more than 11,000 summer breakfasts to school-age children.
- The Monroe County Step Ahead Council provides a forum for child care provider agencies to meet regularly and engage in cooperative planning. Step Ahead has sponsored several projects that have spun-off into community initiatives including Wrap-Around. The Council also works with the City's Child Care Services and other community organizations to provide health and development screening for young children and to support family events like the Celebration of Families.
- The Community Alliance to Promote Education (CAPE) project opened four Family Resource Centers in Monroe County. These centers serve as a source of information, resources, and parent education services for families of young children.

Places to Start

- Seek additional sources of funding to subsidize day care.
- Work cooperatively with other providers to establish innovative solutions to transportation problems.
- Continue to develop additional community capacity for quality, affordable day care. Some companies have investigated the possibility of providing on-site care, but these programs can be cost-prohibitive to run.