

Shippensburg, PA Community Assessment 2019



Prepared by Shippensburg Community Resource Coalition

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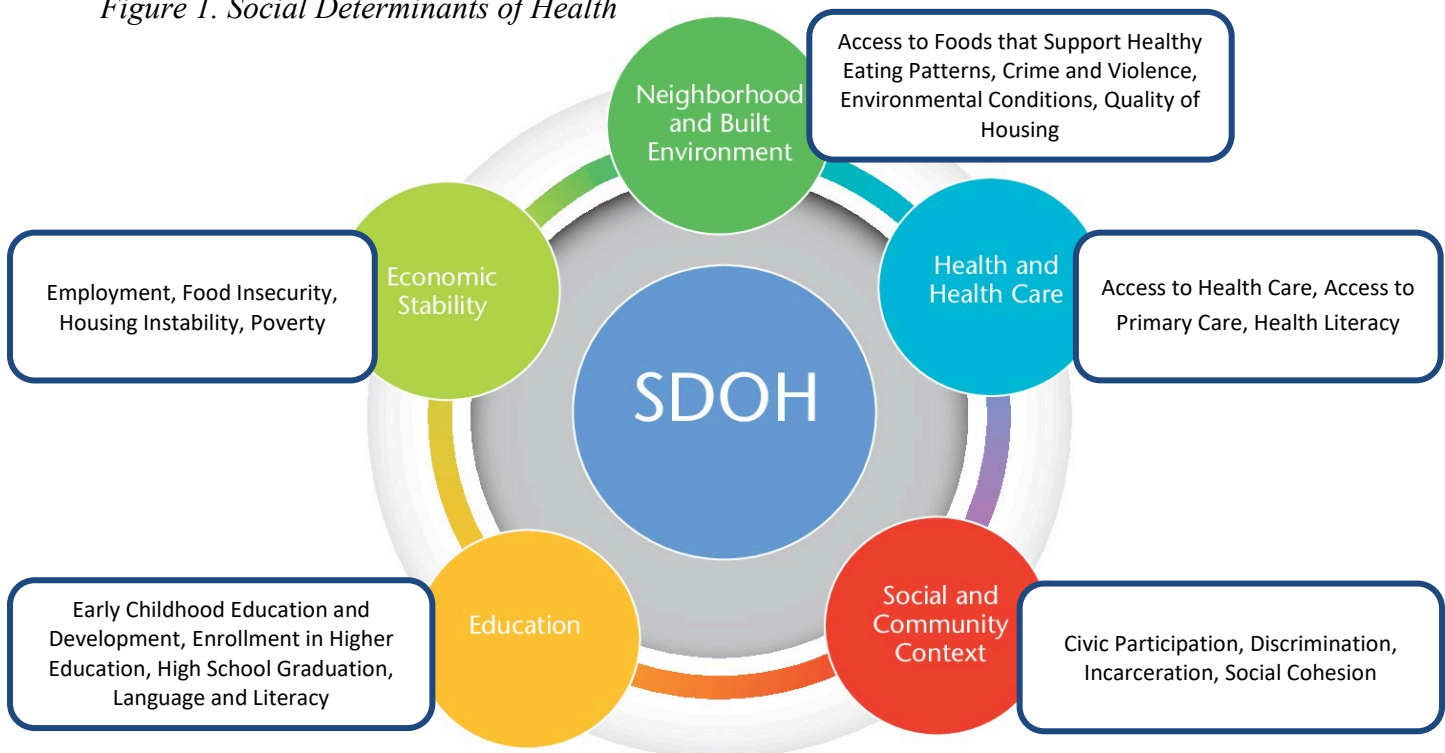
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EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

The Community Assessment was developed as a result of a strategic planning process of the Shippensburg Community Resource Coalition (SCRC) that occurred in 2013. There have been several community assessments in the surrounding areas that included Shippensburg, but were not exclusively focused on Shippensburg. The SCRC Board of Directors recognized the need to conduct an assessment that would help plan programs and secure funding for future endeavors and conducted the first community assessment in 2014. In 2018, the SCRC was awarded a grant from the Partnership for Better Health for the Healthy Shippensburg Project. The Healthy Shippensburg Project is directed by the Community Health Mobilizer and focuses on coalition building for systems change. In order to assess the Shippensburg community's systems, the Community Health Mobilizer collaborated with Shippensburg University and other community organizations to update the 2014 Community Assessment, with an emphasis on client involvement and social determinants of health. The social determinants of health are the ways that home, school, workplace, neighborhood, and community factors can impact one's health. According to Healthy People 2020, the five areas of social determinants of health are social and community context, health and healthcare, economic stability, education, and the neighborhood and built environment.¹

Figure 1. Social Determinants of Health

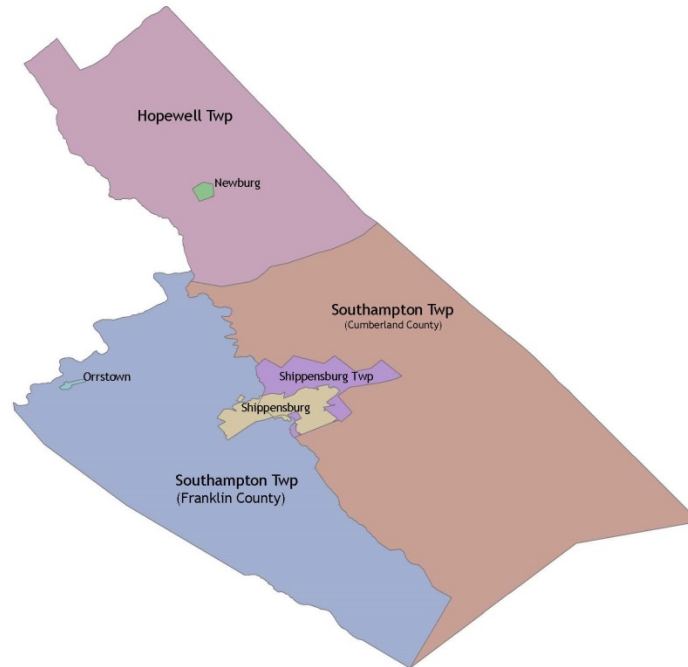


Source: Healthy People 2020: Social Determinants of Health

¹ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Social Determinants of Health. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

The community was geographically defined by the lines of the Shippensburg Area School District (SASD). Throughout the report, this area will be identified as the “Shippensburg area.”

Figure 2. Geographic Area of the Shippensburg Area School District



The strategic plan called for a new community assessment to be completed every five years. This Executive Summary provides a summarized version of the full report for the 2019 Shippensburg, PA Community Assessment. The full report is available by contacting the SCRC or visiting their website at www.shipresources.org.

Data was collected in multiple ways in order to understand more about how Shippensburg area residents are impacted by their homes, schools, workplaces, and neighborhoods, including data on residents’ perceived needs about social services and youth programming needs. These methods included a survey, focus groups, community key stakeholder interviews, and review of existing data. The survey was adapted from the United Way of Carlisle and Cumberland County’s Community Needs Assessment and originally created by the Penn State Data Center. The review of existing data occurred throughout the project timeframe. The other data was collected and analyzed as follows:

October 2018-November 2018.....Focus groups conducted
October 2018-November 2018.....Community key stakeholders interviewed
February 2019-April 2019.....Surveys distributed to at least 30 organizations and via
social media (5 Shippensburg Community pages and
messages to 33 organizations)
February 2019-September 2019.....Survey & focus group results analyzed
June 2019-October 2019.....Final report written

When conducting a community assessment, it is helpful to collect data in a variety of ways to provide a more complete picture of the strengths and challenges of the community. Each source of data is presented individually at first and analyzed for recurring themes. Then all sources of data are assessed together as a whole to provide an overall assessment. One should be cautious about taking the results from only one source of data on its own and generalizing it to the community as a whole. It is best to consider all sources of data as it provides a complete and more reliable picture of the whole community.

Demographic Information

Most of the demographic information in this section is from the United States Census Bureau, 2013-2017 American Community Survey (ACS) 5-Year Estimates. Data from other sources are noted as such. Following this Executive Summary is a two-page demographic overview with tables from the 2013-2017 ACS data. The total population within the SASD boundaries in 2017 was 29,893 people, which is an increase of just over 1,973 people from 2010 U.S. Census Bureau.² The population of the Shippensburg area has a younger median age (30.6 years), than the state median (40.7 years), perhaps because Shippensburg University is located in the town. The percentage of youth under the age of 18 is almost the same (21.3%) as the state (21.0%).³ It is a predominantly White/Caucasian area, with 92.3% of the population, which is a decrease of 0.9% from 2010.⁴ The Black/African American population is 3.9%, which is an increase of 0.4% from 2010. The Hispanic/Latino population is 3.0%, which is an increase of 0.2% from 2010. The 2020 U.S. Census Bureau will provide a more accurate comparison to 2010 data because the 2017 data is based on sampling. However, the U.S. Census Bureau does state that comparisons can be made between U.S. Census Bureau data and American Community Survey 5-Year Estimates.⁵

The poverty rate for all people in the Shippensburg area is 17.9% (2013-2017 ACS) which is 1.85% lower than previous measures 19.75% (2008-2012 ACS) and higher than the state rate of 13.1%.⁶ According to the Annie E. Casey Foundation, the rate of children and teens who qualified for free or reduced lunches has increased every year since 2010-2011. In 2017-2018, 41.5% of students in the district qualified for free or reduced lunch rates, this is an increase of 6.1% from 2012-2013.⁷ Finally, according to the U.S. Census Bureau, the median household

² U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: S0101 Age and Sex. https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/S0101/9700000US4221570

³ See Footnote 1.

⁴ See Footnote 1.

⁵ U.S. Census Bureau. American Community Survey. <https://www.census.gov/programs-surveys/acs/guidance/comparing-acs-data.html>

⁶ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: DP03 Selected Economic Characteristics.

https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/DP03/0400000US429700000US4221570

⁷ The Annie E. Casey Foundation: Kids County Data Center. School Lunch - Students eligible for free or reduced-price lunch in Pennsylvania. <https://datacenter.kidscount.org/data/tables/2720-school-lunch--students-eligible-for->

income is \$50,061 which is an increase of \$2,747 from 2010 and lower than the state median of \$56,951.⁸ The unemployment rate of the Shippensburg area is 4.6%, which is an increase of 0.1% from 2010, and higher than the state rate of 4.1%.

Shippensburg residents highest level of educational attainment is lower than the state's averages. Only 20.8% of Shippensburg residents receive a bachelor degree or higher compared to 30.1% for PA.⁹ Forty-five percent of residents achieve a high school diploma as the highest level of education compared to 35.6% of the state. Shippensburg also has a higher rate of the population completing less than ninth grade compared to the state's average (5.2% vs. 3.3% for PA). However, there is improvement since the 2010 Census. Educational attainment for a bachelor's degree or higher increased by 0.9% from 2010 and educational attainment for not completing ninth grade decreased 1.2% from 2010.¹⁰

According to the Future Ready PA Index, the Shippensburg Area Senior High School (SASHS) meets the interim goal/improvement target for performance in English Language Arts/Literature and meets the 2030 statewide goal for proficiency in Mathematics/Algebra 1.¹¹ The statewide average for high school graduation rate is 86.6%, SASHS graduation rate is 90.5%, similar to Carlisle Area Senior High School at 90.7% and above Chambersburg Area Senior High School at 82%.¹²

Community Survey

The survey questions were aimed at learning more about how satisfied residents are with the human services and youth programs that are available in Shippensburg and the importance of providing these programs and services. There were also questions designed to elicit ideas for new programs and services. There were 422 valid surveys, 24 surveys less than the 2014 Assessment. The surveys were available both online and in paper version. The survey results

free-or-reduced-price-

lunch?#detailed/2/any/false/1639,1600,1536,1460,1249,1120,1024,937,809,712/any/10324,10325

⁸ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: DP03 Selected Economic Characteristics.

https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/DP03/0400000US42|9700000US4221570

⁹ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: S1501 Educational Attainment.

https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/S1501/0400000US42|9700000US4221570

¹⁰ See Footnote 9.

¹¹ Future Ready PA: Shippensburg Area Senior High School. Proficient or Advanced on Pennsylvania State Assessments.

<https://futurereadypa.org/PerformanceDetail/233209203178131085137182251023145118024150025100/064138181095196083230174235056012199217224032242012170044177212254069212197057059041210232076035/067252007022085164088255016150149184199252177056>

¹² Future Ready PA: Shippensburg Area Senior High School. Career Standard Benchmarks: High School Graduation Rates.

<https://futurereadypa.org/Performance/233209203178131085137182251023145118024150025100/064138181095196083230174235056012199217224032242012170044177212254069212197057059041210232076035>

should be applied cautiously to the general population because there were several demographic differences between the survey sample and the 2013-2017 ACS data.

Overall, survey respondents were satisfied with the services and opportunities in Shippensburg. The areas that had the highest levels of satisfaction based on overall mean score, included quality of early childhood education, community safety, and efforts to improve literacy. It was also clear that many residents feel there is a strong sense of community and that the educational institutions and community safety are strengths of the area.

The three items that indicated some level of dissatisfaction based on overall mean score, included services for people who are re-entering the community after incarceration, the availability of mental health services, and the affordability of mental health services. Participants whose household income was above the poverty level indicated that they were dissatisfied with those same services. However, participant's whose household income was at or below the poverty level varied from the total survey sample and those above the poverty level, indicating some level of dissatisfaction with availability of mental health services, services for people who are re-entering the community after incarceration, and services to prevent and reduce homelessness (See Table 1).

Table 1. Areas of Dissatisfaction Based on Income Group

Respondents by Income Group	Top Areas of Dissatisfaction
All Survey Respondents	<ol style="list-style-type: none"> 1. Affordability of Mental Health Services (M=2.96, SD=0.95) 2. Availability Of Mental Health Services (M=2.98, SD=0.95) 3. Services for People who are Re-Entering the Community After Incarceration (M=2.98, SD=1.07)
Respondents Above the Poverty Level	<ol style="list-style-type: none"> 1. Affordability of Mental Health Services (M=2.96, SD =0.90)
Respondents At or Below the Poverty Level	<ol style="list-style-type: none"> 1. Services to Prevent and Reduce Homelessness (M=2.87, SD=1.05) 2. Services for People who are Re-Entering the Community after Incarceration (M=2.96, SD=1.04) 3. Availability Mental Health Services (M=2.98, SD=.94)

The overall mean scores indicated that it was important that 22 out of 23 of the services and programs listed on the survey were available within the Shippensburg area. The only item that was indicated as unimportant was services to treat gambling addictions with a mean of 2.82 ($SD = 0.91$). Those with the highest level of importance included quality daycare centers, affordable medical services, and supervised afterschool youth activities. Those identified as least important (but still identified as important according to respondents with a mean of 3.0+) were transportation services and opportunities for adult education.

In order to understand more about the program and service needs in the Shippensburg area, we defined need as a service that is ranked as important, but with which people indicated that they are not satisfied. By examining the services that had high importance scores, but lower satisfaction scores, we could more clearly identify needs. The following are the top four needs identified from the survey sample:

- Services to Reduce Harmful Drug Use
- Availability of After-School Youth Activities
- Mental Health Services
- Affordable Mental Health Services

When looking at identified needs based on income groups, respondents above the poverty level and those at or below the poverty level both identified mental health services and affordable mental health services as the two top identified needs. However, those at or below the poverty level identified needs mostly related to their economic instability:

- Services to Prevent and Reduce Homelessness
- Services to Prevent and Reduce Poverty
- Affordable Housing
- Opportunities for Adults with A Disability

Respondents whose income was above the poverty level identified some needs related to youth programming and services:

- Availability of After-School Youth Activities
- Services Specific to Youth
- Services to Reduce Harmful Drug Use

Survey respondents were asked open-ended questions about various types of programs/services that they felt are needed in Shippensburg, and Shippensburg's biggest strength and problem/issue. Survey respondents provided ideas for community safety programs/services. Suggestions to increase community safety and related programming ideas include:

- Increased police presence in the community
- Physical improvements such as street lamps, security cameras, and crosswalks

- Neighborhood watch programs
- Programs for youth to keep them occupied
- Education classes on specific topics for youth and adults
- Drug and alcohol education, prevention, and treatment

When asked about youth-related services and programs, many survey respondents indicated that something needed to be done to help youth have something to do, but there were limited specific ideas. After-school programming and non-sports related programming were mentioned the most. A need for a community center focused on youth activities was a strong theme, too. Other unique ideas offered include:

- | | |
|---|----------------------------------|
| • School-based after school programs | • Hobby clubs |
| • Youth center/indoor recreation | • After-school help |
| • Sports-related programming | • Secular volunteer clubs |
| • Age-specific programming (kid's club and teen programs) | • Non-sports related programming |
| • Summer programming | • Affordability of programs |
| • Consent education | • Healthy eating and lifestyles |
| • Mental health services | |

The most popular suggestions for needed social service programs were as follows:

- Mental health services
- Affordable quality housing
- Drug and alcohol services

One of the new open-ended questions asked respondents about the types of programs that are needed in Shippensburg for those who are re-entering the community after incarceration. We added this question after hearing from focus group members about the challenges of re-entry. The impact of incarceration and then re-entering the community after incarceration is part of the social determinant of health focus area of Social and Community Context. When members of the community leave the community but leave behind family and friends, this disrupts the social cohesiveness of the community. When they re-enter the community, a new equilibrium must be reached to integrate them back into the community. When asked what types of programs for those re-entering the community after incarceration are needed, many respondents responded “unsure” or “not applicable.” Respondents that identified programming needs include the following:

- Programs to gain employment
- Job or technical training
- Assistance obtaining housing, including transitional or half-way houses

When asked to identify the biggest strength of Shippensburg, respondents mentioned the following areas:

- “Sense of Community”
- Educational Institutions
- Small Town Size
- Low Crime

Survey respondents were asked what the biggest challenge, problem, or issue in Shippensburg. The top areas identified include:

- Drug and Alcohol Use
- Lack of Youth Activities
- Lack of Community Center
- Lack of Downtown Development and Empty Businesses
- Lack of Social Cohesion (community’s inability to work together as a whole)

Focus Groups

The Shippensburg Community Resource Coalition’s staff and social work interns facilitated five focus groups in the Shippensburg area as part of their community assessment to obtain a better sense of the community’s perspective on the health of the Shippensburg community in regards to nine topics: recreation/socialization, employment, food, housing, education, health care, mental health, crime and safety, discrimination, and social cohesion/community unity. The focus groups were held at the following social service agencies in order to hear from residents that have accessed social services: Shippensburg Produce and Outreach, Oasis of Love Bakery Distribution, Shippensburg Head Start Program, Tri-County Community Action, and Branch Creek Place senior center. Twenty-five community members participated in the focus groups. The results that follow reflect the perspectives of the focus group participants.

Focus group participants identified several strengths about the health of Shippensburg. Participants shared that Shippensburg does a good job of providing food resources such as food pantries and community meals. Another strength is the education system including the public schools and the university. Overall, they also identified Shippensburg as being a relatively safe place with limited instances of crime.

Areas of growth that focus groups identified were predominantly around the lack of transportation which is multi-faceted in its relationship to health. Without consistent, year-round, easy, accessible and flexible public transportation, Shippensburg residents struggle in accessing employment, health care services, mental health services, and county offices. It also affects the jobs they can acquire as they are limited to jobs in Shippensburg. The lack of employment opportunities with sufficient pay in Shippensburg was mentioned in most of the groups as a challenge. Recreation options for both youth and adults, including the lack of a community

center or indoor recreation facility is a concern. While there are sporting activities for youth, not all youth like sports nor can all families afford the cost associated with playing sports.

Another area of concern was not enough primary care providers or medical specialists in Shippensburg, thus requiring residents to travel to Chambersburg or Carlisle. A few participants shared about their “lack of a voice” in regard to community decision-making and that when they did speak up, those in authority and/or decision-makers did not listen to them. Lastly, participants discussed the lack of affordable and quality housing available to residents and families versus university students. They expressed that if they could afford to rent in Shippensburg that the quality would be poor and inhabitable. Since most leasing companies require a credit check and background check, participants expressed some difficulties in finding housing.

Community Key Stakeholder Interviews

Ten interviews with key community stakeholders were conducted as part of the community assessment to obtain information about their opinions on the social determinants of health and how they are impacting the Shippensburg area. Interviewees were chosen based on their stakeholder role in the community and the services they provide to residents, their circle of influence, and their high level of participation in the community. Common themes arose between each of the 10 community stakeholder interviews in the area of lack of transportation for residents, the lack of funding and time for new services, and the areas for improvement between the community and Shippensburg University. Many interviewees mentioned that the Shippensburg community does a good job of providing food to those that are experiencing food insecurity through their food pantries, community meals, and youth food security programs such as Hound Packs. Interviewees also felt safe in Shippensburg, stating low crime rates.

Interviewees felt that there was room for improvement in the overall health of the Shippensburg area but the degree of improvement ranged from fair to significant. One respondent mentioned that the poor health of Shippensburg is hidden. When asked what unmet needs to health Shippensburg residents faced, the lack of public transportation, affordable housing, and sufficient primary care physicians were the top three. Barriers to meeting those needs included financial resources, transportation for employment and services, knowledge about available services and how to access them. Interviewees were asked what additional service(s) they thought their organization could provide to help meet some of the unmet needs in the Shippensburg area. Participants suggested more collaboration with Shippensburg University, adult day services, increased use of the senior center as a community center, and the addition of a social worker to help with paperwork and applications for human service benefits. Respondents said that barriers to providing additional services included funding, time, and transportation for residents to access new services.

Interviewees were asked what they thought that the SCRC could provide to meet the needs of the community. Transportation was once again suggested as it continues to be a main barrier. Collaborating and strategizing with other organizations to help improve current services and bring in new services was also suggested. Lastly, when asked who their organization could partner with in the community, respondents predominantly answered “Shippensburg University.” Other organizations included the Boys and Girls Club of Shippensburg, school counselors, churches, and the Coy Public Library of Shippensburg.

Discussion and Recommendations

The strengths, challenges, recommendations are drawn from all data sources (existing data, surveys, focus groups and surveys) through the lens of the five focus areas of the social determinants of health: social and community context, health and healthcare, economic stability, education, and the neighborhood and built environment. The following strengths of the Shippensburg community were identified:

- | | |
|----------------------------------|---|
| • Safe Neighborhood | • Grief Services |
| • Sense of Community | • Food Resources |
| • Willingness to Help Each Other | • Quality Education |
| • Participation in Organizations | • Educational Programs from Early Childhood Through College |
| • Shared Resources | • High School Graduation Rate |
| • Community Nurse | • Raider Regional Transit |
| • Shippensburg Health Center | |

The following challenges are identified:

- | | |
|---|---|
| • Available and Affordable Mental Health | • Discrimination |
| • Available and Affordable Medical Services | • Times of Food Resources |
| • Social Cohesion | • Quality, Affordable Housing |
| • Member’s Opinions Do Not Matter | • Consistent, Reliable, Year-Round Transportation |
| • Transparency and Communication between Government, Institutions and Residents | • Drug and Alcohol Use |
| | • Poverty Rate |
| | • Employment Opportunities |

The following recommendations are based on the individual areas of focus for each social determinant of health.

Social and Community Context looks at how a community’s civic participation, social cohesion, discrimination faced by residents, and the incarceration rate impact the overall health and well-being of its residents. The following recommendations seek to improve Shippensburg’s civic participations and social cohesion:

- Increase the cohesion of the community as a whole by providing a space in which different social groups can interact, build trust, and establish a collaborative relationship
- Partner with Shippensburg University to increase understanding between students and residents, and bridge the gap between campus and town to create a common goal.
- Work with elected officials to strengthen the relationship they have with residents and increase collaboration across all resident social groups.
- Increase civic participation by sharing ways that people can become involved in organizations and encouraging participation in them.
- Provide education discrimination related to race, ethnicity, socioeconomic status, etc.

Health and Healthcare is the social determinant of health concerned with access to health care which is defined as the “timely use of personal health services to achieve the best possible health outcomes.”¹³ Recommendations to address increasing access to health care include the following:

- Increase partnerships with mental health providers to advocate for more mental health services that are affordable.
- Strengthen partnerships with area health organizations to advocate for more primary care providers and specialties.
- Increase awareness and knowledge of local health care services.
- Collaborate with current transportation companies, Raider Regional Transit and RabbiTransit, and other transportation options to address lack of transportation to medical facilities.
- Increase collaboration between human service providers and physicians.

Economic stability includes issues related to the community’s employment opportunities, poverty level, housing instability, and residents experiencing food insecurity. These four areas are all intertwined because without adequate employment opportunities providing a living wage¹⁴, community members will be at or below the poverty level, experiencing food insecurity, and housing instability due to their lack of financial resources.

- Increase and/or develop programs that help residents improve their socioeconomic status.
- Increase access to programs in Shippensburg that assist in finding and obtaining employment, including job training and soft skills training. This may mean developing new programs.

¹³ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Access to Primary Care. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-primary>

¹⁴ “Living wage” refers to a minimum wage that is the amount of money needed to meet a minimum standard of living in the U.S. According to MIT’s living wage calculator, the living wage for two adults and two children in PA is \$22.49 (Living Wage Calculation for Pennsylvania: <https://livingwage.mit.edu/states/42>)

- Develop programs for families and youth that strengthen the protective factors such as education, social and life skills, strong family relationships, and parenting skills.
- Increase collaboration between employers and employees about transportation to address the lack of transportation to places of employment.

Education examines the effects of early childhood education and development, the rate of high school graduation and enrollment in higher education, and language and literacy. The key issue of language and literacy is defined as spoken or written communication and includes one's level of ability to understand oral language, written language, numbers, and cultural and conceptual knowledge.¹⁵ Recommendations to address education:

- Increase collaboration between Shippensburg University and the town to explore providing more services such as literacy classes including GED classes, English as a Second Language, and adult education classes.
- Explore how Hound Packs could serve more children including Pre-K and kindergarten.
- Explore booster programs for children from kindergarten through third grade.

The neighborhood and built environment involves more than just the structures of a neighborhood or environmental conditions like air pollutants and temperature but also the amount of crime and violence in a community, and how accessible foods that support healthy eating patterns are to residents. The following are recommendations to address the challenges facing Shippensburg in the area of the neighborhood and built environment:

- Increase outreach efforts with landlords and property managers to educate them on the impact of quality housing and ways they can collaborate with housing authorities and tenants to make housing more affordable.
- Conduct a walkability assessment of Shippensburg.
- Conduct an assessment of safety features in Shippensburg including, crosswalks, street lamps, and security cameras.
- Collaborate with local organizations to establish an indoor recreational facility.
- Develop more youth programs, particularly related to after school supervised activities.
- Collaboration between the school district, police department, and parents to develop programming to decrease the drug and alcohol use of youth.
- Provide assistance to community members in organizing community watches.
- Assess days and times that food resources are available to address barriers to accessing them.

¹⁵ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Language and Literacy. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/language-and-literacy>

FULL REPORT: SHIPPENSBURG, PA COMMUNITY ASSESSMENT

DEMOGRAPHIC INFORMATION

Shippensburg Community Assessment 2019

Demographic Overview



Population by Race

RACE	Estimate	Percent
White	27596	92.30%
Black or African American	1168	3.90%
American Indian and Alaska Native	66	0.20%
Asian	303	0.50%
Asian Indian	76	0.30%
Chinese	66	0.20%
Filipino	0	0.0%
Japanese	0	0.0%
Korean	52	0.20%
Vietnamese	67	0.20%
Other Asian	42	0.10%
Some other race	257	0.90%
Two or more races	503	1.70%
HISPANIC OR LATINO and RACE		
Total population	29,893	29,893
Hispanic or Latino (of any race)	902	3.00%
Mexican	338	1.10%
Puerto Rican	262	0.90%
Cuban	19	0.10%
Other Hispanic or Latino	283	0.90%
Not Hispanic or Latino	28,991	97.2%

Population by Age

AGE	Estimate	Percent
Under 5 years	1,896	6.30%
5 to 9 years	1,830	6.10%
10 to 14 years	1,615	5.40%
15 to 19 years	3,134	10.50%
20 to 24 years	3,758	12.60%
25 to 34 years	4,178	14.00%
35 to 44 years	2,966	9.90%
45 to 54 years	3,316	11.10%
55 to 59 years	1,584	5.30%
60 to 64 years	1,402	4.70%
65 to 74 years	2,563	8.60%
75 to 84 years	1,066	3.60%
85 years and over	585	2.00%
Median age (years)	30.6	(X)

Population by Gender

Population by Gender	Estimate	Percent
Total population	29,893	
Male	14,287	47.80%
Female	15,606	52.20%

Population Under Age 18 years

Male	2017 ACS	Female	2017 ACS
Under 5	1,014	Under 5	882
5 to 9 years	863	5 to 9 years	967
10 to 14 years	720	10 to 14 years	895
15 to 17 years	508	15 to 17 years	682
18 to 19 years	983	18 to 19 years	961

Population Below Poverty

Years		Shippensburg Area School District	%	PA	U.S.
<u>2012-2017</u>	<u>Population in Poverty</u>	4,970	17.9%	12.0%	13.0%
	<u>Families in Poverty</u>	565	8.9%	9.1%	10.9%
<u>2006-2010</u>	<u>Population in Poverty</u>	3,087	12.7%	12.4%	13.8%
	<u>Families in Poverty</u>	355	5.7%	8.5%	10.1%
<u>2005-2009</u>	<u>Population in Poverty</u>	3,270	13.8%	12.1%	13.5%
	<u>Families in Poverty</u>	341	5.6%	8.3%	9.9%

Shippensburg Community Assessment 2019

Demographic Overview



Households by Type

Households by Type	Estimate	Percent
Total households	11,180	(X)
Family households (families)	6,669	59.70%
With own children under 18 years	2,956	26.44%
Married-couple family	5,119	45.79%
With own children under 18 years	1,889	16.90%
Male householder, no wife present, family	335	3.00%
With own children under 18 years	174	1.56%
Female householder, no husband present, family	1,215	10.87%
With own children under 18 years	893	7.99%
Nonfamily households	4,511	40.30%
Householder living alone	3,232	28.90%
65 years and over	1,360	12.20%
Average Household Size	2.48	(X)
Average Family Size	3.05	(X)

Educational Attainment

Educational Attainment	Estimate	Percent
Population 25 years & over	17,660	(X)
Less than 9th grade	922	5.20%
9th to 12th grade, no diploma	1,782	10.10%
High school graduate (includes equivalency)	7,939	45.00%
Some college, no degree	2,269	12.80%
Associate's degree	1,402	7.90%
Bachelor's degree	14,956	84.69%
Graduate or professional degree	1,325	8.5%

Household Income

Household Income (inflation of dollars)	Estimate	Percent
Total households	11,180	(X)
Less than \$10,000	622	5.60%
\$10,000 to \$14,999	612	5.50%
\$15,000 to \$24,999	1,328	11.90%
\$25,000 to \$34,999	1,412	12.60%
\$35,000 to \$49,999	1,610	14.40%
\$50,000 to \$74,999	2,148	19.20%
\$75,000 to \$99,999	1,397	12.50%
\$100,000 to \$149,999	1,483	13.30%
\$150,000 to \$199,999	268	2.40%
\$200,000 or more	300	2.70%
Mean household income (dollars)	\$65,301	(X)
Income of Families	6,669	
Less than \$10,000	235	3.50%
\$10,000 to \$14,999	64	1.00%
\$15,000 to \$24,999	569	8.50%
\$25,000 to \$34,999	688	10.30%
\$35,000 to \$49,999	870	13.00%
\$50,000 to \$74,999	1,473	22.10%
\$75,000 to \$99,999	1,050	15.70%
\$100,000 to \$149,999	1,194	17.90%
\$150,000 to \$199,999	230	3.40%
\$200,000 or more	296	4.40%
Mean family income (dollars)	\$80,683	(X)

Occupation

Occupation	Estimate	Percent
Population 16 years and over	24,087	(X)
In labor force	15,614	64.80%
Civilian labor force	15,605	64.80%
Employed	14,497	60.20%
Unemployed	1,108	4.60%
Armed Forces	9	0.0%
Not in labor force	8,473	35.20%

Assessment Area: Shippensburg Area School District, Pennsylvania
2013-2017 American Community Survey 5-year estimates

For the full SCRC Community Assessment of Shippensburg, please visit the SCRC website: www.shipresource.org

DEMOGRAPHIC INFORMATION

The service area for this report is defined by the boundaries of the Shippensburg Area School District. Efforts were made to derive demographic data utilizing those boundaries. The Shippensburg Area School District area is 129 square miles according to the Shippensburg Area School District website and is unique as it is located in both Cumberland and Franklin Counties in Pennsylvania.¹⁶ It is within 15 miles of the Franklin County seat of Chambersburg and approximately 20 miles from the Cumberland County seat of Carlisle. The school district area includes all or part of Hopewell Township, Newburg, Southampton Township Cumberland County, Southampton Township Franklin County, Orrstown, Shippensburg Township and Shippensburg Borough. The Shippensburg borough website describes the area as a rural community. There are two major highways, I-81 and I-76 (the Pennsylvania Turnpike), that run through the area. It is located close to many metropolitan areas including Washington D.C., Baltimore and Philadelphia. It is the most historical community in the Cumberland Valley, according to the Shippensburg Borough website. Shippensburg University, a member of the Pennsylvania State System of Higher Education (PASSHE), is located here. For additional demographic information, please see the Demographic Overview.

Total Population

The total population within the Shippensburg area in 2017 was 29,893 people, a 7% increase since 2010 (27,920 people).¹⁷ The total population of students in the Shippensburg Area School District was 3,400 people, a 6.25% increase since 2010 (3,200 students). This is lower than the state average of 277.04 people per square mile, yet it is higher than the national average of 87 people per square mile.

Population by Age

The youth population of Shippensburg area (under age 18) was 21.8% of the population in 2017.¹⁸ The PA youth population in 2017 was 20.8%. The median age of the population is 30.6 years for the Shippensburg area. The median age in Pennsylvania is 40.6 years.

Population by Race

The population in the service area is predominately white with 92.3% of the population (81.1% for PA).¹⁹ The black or African American population is 3.9% of the service area population (11.1% of PA). The Hispanic or Latino population accounts for 3.0% of the population in our service area (6.8% for PA).

¹⁶ Shippensburg Borough. About Shippensburg. <http://borough.shippensburg.pa.us/Shippensburg-Area/About-Shippensburg>

¹⁷ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: S0101 Age and Sex. https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/S0101/9700000US4221570

¹⁸ See Footnote 16.

¹⁹ See Footnote 16.

Poverty and Homelessness

The poverty rate for persons and families in the service area is 17.9%, (2013-2017).²⁰ This is higher than the poverty rate statewide, which was 13.1% for the same time period. The poverty rate in the SASD service area has decreased from 19.75% in the 2008-2012 timeframe. The same trends are evident with the percentages of families in poverty. According to the Annie E. Casey Foundation in the 17/18 school year 41.5% of children and teens qualified for free or reduced lunch, which is an increase from the 12/13 school year where 35.4% of students qualified.²¹ This rate has increased each year since the 10/11 school year. Of the students enrolled in SASD, 28.6% are covered by Medicaid/CHIP, alone or in combination from 2012-2016.²² The median household annual income for the service area is \$50,061 (\$56,951 for PA).²³

The Shippensburg Area School District is required by federal mandate to track data regarding students who are homeless. The 2018-2019 data indicates that 66 students in the district were identified as homeless during the school year. Since the start of the current 2019-2020 school year from August to November 2019, 47 students have been reported as homeless. Some of the reasons for homelessness include eviction, parental job loss, domestic violence, and parental incarceration among other poverty-related circumstances.

Employment Status

The majority of the population in the service area are employed (60.2%) and the rest of the population unemployed, disabled, or retired.²⁴ The unemployment rate is 4.6%. The Pennsylvania unemployment rate is 4.1%.

Education

Shippensburg residents highest level of educational attainment is lower than the state's averages. Only 20.8% of Shippensburg residents receive a bachelor degree or higher compared to 30.1% for PA.²⁵ Forty-five percent of residents achieve a high school diploma as the highest level of

²⁰ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: DP03 Selected Economic Characteristics.

https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/DP03/0400000US429700000US4221570

²¹ The Annie E. Casey Foundation: Kids County Data Center. School Lunch - Students eligible for free or reduced-price lunch in Pennsylvania. <https://datacenter.kidscount.org/data/tables/2720-school-lunch--students-eligible-for-free-or-reduced-price-lunch?#detailed/2/any/false/1639,1600,1536,1460,1249,1120,1024,937,809,712/any/10324,10325>

²² Georgetown University Health Policy Institute: Center for Children and Families. Medicaid/CHIP Coverage by School Districts, 2012-2016 <https://ccf.georgetown.edu/medicaidchip-coverage-by-school-districts-2012-2016/>

²³ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: DP03 Selected Economic Characteristics.

https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/DP03/0400000US429700000US4221570

²⁴ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: DP03 Selected Economic Characteristics.

https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/DP03/0400000US429700000US4221570

²⁵ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: S1501 Educational Attainment. https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/S1501/0400000US429700000US4221570

education compared to 35% of the state. Shippensburg also has a higher rate of the population completing 12th grade with no diploma than the state's average (10.1% vs. 6.8% for PA). Also, 5.2% completed less than 9th grade compared to 3.3% for PA.

The Shippensburg Area School District operates five public educational facilities and jointly operates a laboratory school, the Grace B. Luhrs University Elementary School with Shippensburg University of Pennsylvania.²⁶ Within Shippensburg, Pennsylvania, non-public, non-licensed schools also exist. The following schools are located within Shippensburg, Pennsylvania and are non-public and non-licensed; Anchor Christian Day School, Chestnut Grove Parochial School, Clearfield Parochial School, Country View School, Living Faith School, Middle Run Parochial School, Oak Grove Parochial School, Otterbein School, Oak Grove Parochial School, Running Pump Road Parochial School, Shady Lane Amish School, South Mountain Parochial School, and Spring Hill Parochial School (Pennsylvania Department of Education). The table below indicates the schools operated or jointly operated by the Shippensburg Area School District.

Table 2. Shippensburg Area School District Operated Schools

School	Grades	Enrollment
Grace B. Luhrs University Elementary School	K-5	128
James Burd Elementary	K-3	476
Nancy Grayson Elementary School	K-3	447
Shippensburg Area Intermediate School	4-5	473
Shippensburg Area Middle School	6-8	811
Shippensburg Area Senior High School	9-12	1032

Source: SASD Fast Facts²⁷

Shippensburg University (SU) of Pennsylvania is the only college located in the Shippensburg Area School District and was founded in 1871 and is a member of the Pennsylvania State System of Higher Education. SU offers more than 100 undergraduate degree programs, eight pre-professional programs, and 50 graduate programs. This year (2019 fall semester) enrollment is 5,286 undergraduate students and 810 graduate students for a total of 6,096 students.²⁸ For the 2018 school year, 5,913 students were in-state residents and out-of-state residents accounted for 401 students. Out of 5,913 Pennsylvania students, 893 Franklin County residents and 1054 Cumberland County students enrolled for the 2018 school year.²⁹

²⁶ Shippensburg Borough. About Shippensburg. <http://borough.shippensburg.pa.us/Shippensburg-Area/About-Shippensburg>

²⁷ Shippensburg Area School District Fast Facts. <http://www.shipk12.org/fast-facts/>

²⁸ Shippensburg University Enrollment and Compliance Report https://www.ship.edu/globalassets/irp/enrcomp_196_revised_for_site_credits.pdf

²⁹ Shippensburg University Enrollment by Geographic Area https://www.ship.edu/globalassets/irp/enrollment_by_geographic_2018.pdf

According to school counselors at the Shippensburg Area Senior High School the Shippensburg Area School District and Shippensburg University of Pennsylvania have a collaborative agreement for school district students to be able to take college courses on the university campus and receive college credit. This opportunity is available to high school junior and senior year students who meet criteria based upon grade point averages and faculty recommendation.

The Pennsylvania System of School Assessment (PSSA), Keystone Test and Preliminary SAT (PSAT) are the three tests used to measure students' academic proficiency. The PSSA measures proficiency in math and language arts in grades 3-8 and in science for grades fourth and eighth. The Keystone Tests are taken in high school for the subject areas of algebra I, biology, and literature as an end-of-the-year exam for those courses. The PSAT is given to eleventh graders and is a practice version of the SAT exam which is taken by students applying to colleges.

Table 3. 2018 Shippensburg Area School District and State Testing Results

2018 PSSA SCORES – PROFICIENT/ADVANCED		
MATH	SASD	STATE
Grade 3	54%	54%
Grade 4	54%	44%
Grade 5	59%	45%
Grade 6	45%	40%
Grade 7	46%	39%
Grade 8	34%	31%
LANGUAGE ARTS	SASD	STATE
Grade 3	59%	64%
Grade 4	58%	60%
Grade 5	66%	59%
Grade 6	63%	63%
Grade 7	55%	62%
Grade 8	59%	62%
SCIENCE	SASD	STATE
Grade 4	83%	76%
Grade 8	56%	54%
KEYSTONE TEST SCORES		
ALGEBRA I	56% of students proficient/advanced	
BIOLOGY	55% of students proficient/advanced	
LITERATURE	64% of students proficient/advanced	
2017-18 SAT SCORES (Class of 2018)		
SASD: Reading/Writing = 513	Math = 530	Total = 1043
STATE: Reading/Writing = 530	Math = 520	Total = 1050

Source: SASD Shippensburg Area School District 2019 Annual Report to the Community³⁰

³⁰ <http://www.shipk12.org/wp-content/uploads/2019/06/2019-Annual-Report-to-the-Community.pdf>

COMMUNITY SURVEY OF RESIDENTS

COMMUNITY SURVEY OF RESIDENTS

Summary

The Shippensburg Community Resource Coalition developed a survey to assess residents' levels of satisfaction with and opinions about the importance of providing social services and youth-related programs. The survey was distributed widely with the target population of people living within the boundaries of Shippensburg Area School District. There were 422 surveys collected.

Methods

Survey data was collected from February 2019 through April 2019 by distributing the survey to over 30 agencies and organizations, posting the survey on 5 different Shippensburg community Facebook pages, and messaging 33 organizations and businesses through Facebook Messenger in the Shippensburg area. These included a wide variety of private nonprofit organizations, county social service organizations, businesses, churches, and educational institutions. Please see the Table 3 for the full list of organizations. There was a paper version of the survey and an online version available through Survey Monkey. The survey included 52 Likert scale questions, six brief open-ended questions and 16 demographic questions. The full survey is available in the Appendix. The geographic area for the survey was defined as the Shippensburg Area School District boundaries. This includes all or parts of Shippensburg Borough, Shippensburg Township, Hopewell Township, Newburg Borough, Southampton Township of Franklin County, Southampton Township of Cumberland County, and Orrstown Borough. In order to participate in the survey, respondents needed to be at least 18 years old and living within the Shippensburg Area School District boundaries. Survey respondents self-selected whether these criteria applied. A total of 422 people agreed to participate in the survey, were 18 years old and over, and completed at least some of the questions on the survey.

The survey was adapted from a survey that was created by the Center for Survey Research, Penn State Harrisburg that was used by the United Way of Carlisle and Cumberland County in 2011. The purpose of using a similar survey was to provide an opportunity to compare results with a neighboring community. The survey was further edited and developed by the Shippensburg Community Resource Coalition's Community Health Mobilizer, Sonja Payne, the Community Youth Mobilizer, Laura Masgalas, and the SCRC Board Chair, Liz Fisher. The Healthy Shippensburg Coalition also reviewed and approved the survey. The survey distribution was approved by the Shippensburg University Human Subjects Committee (IRB approval). The 2019 survey was modified from the 2014 survey. The following changes were made to the 2019 survey:

How satisfied are you with the opportunities and services available within Shippensburg Area School District boundaries? The following areas of satisfaction were changed in the 2019 Community Assessment:

- Added: Availability of services for people identifying as LGBTQ+?
- Added: Availability of alcohol/tobacco/drug *treatment* services?
- Changed: Availability of services for domestic violence? To *Availability of services for trauma and abuse?*
- Changed: Efforts to reduce *harmful* drug use?
- Changed: Opportunities for *adults* with a disability *to participate in programs with peers?*
- Removed: Access to quality housing?
- Removed: Availability of shelters for people who are homeless?
- Removed: Availability of support groups?
- Removed: Availability of indoor recreation facilities?

In the section addressing “How important is it that the following are available within Shippensburg Area School District boundaries?” the following areas were changed in the 2019 Community Assessment survey:

- Added: Services to treat gambling addictions?
- Removed: Support groups?
- Removed: Indoor recreation facilities?

The following open-ended questions were changed in the 2019 Community Assessment survey:

- Added: What types of community safety programs/services are needed in Shippensburg?
- Added: What types of programs for those re-entering the community after incarceration are needed in Shippensburg?
- Removed: What types of support groups are needed in Shippensburg?
- Removed: Is there anything else you would like us to know?

The following demographic questions were changed in the 2019 Community Assessment survey:

- Added answer to “Do you and/or members of your household own or rent your current residence?”: *Own/Rent: added “Other, please explain”*
- Added answer to “Which of the following categories best describes your educational level?”: Educational level: *Technical school without an associate degree*
- Added answer to “Which one of the following best describes your educational level?”: *Race: removed “I don’t know” and added “Prefer not to say”*
- Added question: *Do you consider yourself a member of the Lesbian, Gay, Bisexual and/or Transgender (LGBT) community?* Answers: Yes; No; No, but I identify as an Ally; Prefer not to say
- Added question: *Do you identify as transgender?* Answers: Yes; No; Prefer not to say

- Added question: *How do you identify your gender?* Answers: Male; Female; Non-binary/ third gender; Prefer not to say
- Added question: *Is English your primary language?* Answers: Yes; No
- Changed the following answers to the question, “With respect to employment, are you:”
 - Currently working *full-time (32+ hours per week)*
 - Currently working *part-time (less than 32 hours per week)*
- Removed answer to “Which one of the following best describes your educational level?”: *I don’t know*
- Removed question: *Is there anything else you would like us to know?*
- Removed question: *What is your sex? __Male, __Female*

Most of the 2019 survey changes were to reflect inclusive language in the answers. The gambling addiction question was added because a casino may be built nearby in the near future. The questions about gender identity and sexual orientation were changed to be more inclusive. The question about shelters for those experiencing homelessness were removed because of the lack of homeless shelters and services in Shippensburg has been well documented. Questions related to indoor recreation facilities were removed as this is a known need that Shippensburg Community Parks and Recreation Authority is working to address. Other Shippensburg organizations are attempting to address this concern and SCRC will provide support as needed. Support groups are another known need from the 2014 Community Assessment that the SCRC has plans in progress to increase the number of youth support groups as well as other groups. As such, the need to reassess for the need of support groups was unnecessary.

The survey focused on two primary objectives. The first was to understand more about how satisfied respondents are with opportunities and services in Shippensburg. The overall question was “How satisfied are you with the opportunities and services available within Shippensburg Area School District boundaries?” There were 27 categories with Likert Scale responses that included: no services available, very dissatisfied, dissatisfied, satisfied and very satisfied. The questions included, but were not limited to, topics such as housing, employment, education, health, mental health and youth services.

The second objective was to understand how important respondents feel these opportunities and services are. The overall question was, “How important is it that the following are available within Shippensburg Area School District boundaries?” The Likert scale responses included: completely unimportant, unimportant, important and very important. There were 25 categories that mirrored most of the categories from the previous question (housing, employment, education, health, mental health, youth services, etc.).

One final Likert scale question provided an opportunity to indicate overall satisfaction with the community. There were also demographic questions and brief open-ended questions. The open-ended questions were designed to elicit respondents’ opinions about:

- Types of community safety programs/services that are needed
- Types of youth programs that are needed
- Types of social service programs that are needed
- Types of programs for those re-entering the community after incarceration that are needed
- Biggest strength in Shippensburg
- Biggest problem, issue or need in Shippensburg

Demographic questions asked for respondent information regarding age, race/ethnicity, English as the primary language, educational attainment, employment status, number of people in household, residence, income, gender, LGBTQ+ identity and allies of LGBTQ+ community.

SurveyMonkey was used to collect all of the online surveys (which consisted of about 75% of all survey responses). Paper survey results were entered into SurveyMonkey. The SurveyMonkey data was downloaded into Excel and then entered into a dataset using IBM SPSS Statistics 25 for Microsoft Windows. Data analysis was done using Excel and SPSS.

The following organizations were known to have helped with survey distribution. We also appreciate those organizations that helped us without formal recognition. The online Survey Monkey link was also posted on the five Shippensburg Community Facebook pages and 33 organizations/business/churches were messaged on Facebook to ask them to post the survey link on their page, too.

Table 4. Organizations that Helped with Community Survey Distribution

Organization Name	
Boys and Girls Club	One Bean Coffee Shop
Branch Creek Place Senior Center	Partnership for Better Health
Christ Among Neighbors	PMI Pregnancy Resource Center
Christ United Methodist Church	Prince Street Church of the United Brethren in Christ
Cottages of Shippensburg	Raystown Crossing
Cumberland County Aging and Community Services Homeless Assistant Program	Roxbury Ridge
Cumberland County Housing and Redevelopment Authorities	Roxbury Treatment Center
Cumberland County Human Services Departments	Shippensburg Area School District
Cumberland County Office of Aging and Community Services	Shippensburg Chamber of Commerce
Cumberland/Perry Drug and Alcohol Commission	Shippensburg Church of the Brethren

Organization Name	
Cumberland/Perry Mental Health/Intellectual and Development Disabilities	Shippensburg Community Nurse
Drew Michael Taylor Foundation	Shippensburg First Church of God
Episcopal Square	Shippensburg Head Start Program
Franklin County Housing Authority	Shippensburg Ministerium
Franklin County Mental Health/Intellectual and Development Disabilities	Shippensburg Police Department
Franklin County Human Services Department	Shippensburg Produce and Outreach
Franklin Family Services	Shippensburg Health Center: Wellspan Health formerly known as Summit Health
Grace United Church of Christ	Shippensburg University
Katie's Place Thrift Shoppe	St. Andrew's Episcopal Church
King's Kettle Food Pantry	Tri-County Community Action
Memorial Lutheran Church	Trinity United Methodist Church
Messiah United Methodist Church	Universal Community Behavioral Health
Oasis of Love Bread Food Pantry	Village of Timber Hill

Results

A total of 422 SCRC surveys were collected. The results are presented in this section according to sections of the survey: demographic information (compared to U.S. Census Bureau data when available), satisfaction and importance questions and, finally, open-ended questions.

Demographic Information

The demographic categories included: household composition, age and gender of respondents, identification with LGBTQ+ community, resident ownership or rental status, educational attainment, employment status, annual household income, years respondents lived in the SASD and location of residence, and finally, race and inquiry into Hispanic origin. The results are reported as a summary and then more details are provided according to these groupings. The American Community Survey (ACS) data is from the 2013-2017 5-year estimates. The total population for the SASD is 28,194 people. While a total of 422 surveys were collected, some participants chose not to answer every question. Thus, the discrepancy in the number of survey respondents in the table below versus the total number of surveys collected.

Table 5. 2013-2017 American Community Survey 5-year Estimates vs. Survey Sample

Item	SCRC Survey Respondents Number	SCRC Survey Respondents Percent	American Community Survey Percent
Average Household Size	347	3.3 people	2.48 people
Gender (Reported as Sex in ACS)	357		

Item	SCRC Survey Respondents Number	SCRC Survey Respondents Percent	American Community Survey Percent
Male	81	22.7%	47.8%
Female	263	73.7%	52.2%
Non-binary/ Third Gender	1	0.28%	(X)
Prefer Not to Say	9	2.5%	(X)
Prefer to Self-Describe	3	0.84%	(X)
Transgender	350		
Yes	3	0.86%	(X)
No	340	97.14%	(X)
Prefer Not to Say	7	2.00%	(X)
Member of the Lesbian, Gay, Bisexual and/or Transgender (LGBT) Community	352		
Yes	11	3.13%	(X)
No	287	81.53%	(X)
Prefer not to say	8	2.27%	(X)
No, but I identify as an Ally	46	13.07%	(X)
Race	344		
Native Hawaiian or Pacific Islander	0	0%	0.3%
American Indian or Native Alaskan	3	0.84%	0.2%
Asian	5	1.4%	1.2%
Multiracial	6	1.7%	1.7%
Black African American	7	2.0%	3.9%
White	322	90.5%	92.3%
Other	3	0.84%	1.2%
Prefer Not to Say	14	3.9%	(X)
Hispanic or Latino	344		
Yes	6	1.74%	3.0%
No	338	98.26%	97.0%
English as Primary Language	350		
Yes	344	98.29%	(X)
No	6	1.71%	(X)
Home Ownership	356		
Own	260	73.0%	63.3%
Rent	89	25.0%	36.7%
Other	7	2.0%	(X)
Household Composition	253		
With children under 18 present	205	66.6%	29.0%
Householder living alone	48	13.8%	28.9%
Age Distribution	350		
Under 5 years	N/A		6.30%
5 to 9 years	N/A		6.10%
10 to 14 years	N/A		5.40%
15 to 19 years (only 18+ in survey)	3	0.88%	10.50%
18 to 24 years	9	2.64%	19.1%
20 to 24 years	6	1.76%	12.60%
25 to 34 years	51	15.00%	14.0%
35 to 44 years	102	30.00%	9.90%
45 to 54 years	70	20.59%	11.10%
55 to 59 years	20	5.88%	5.30%
60 to 64 years	21	6.18%	4.70%
65 to 74 years	45	13.24%	8.60%

Item	SCRC Survey Respondents Number	SCRC Survey Respondents Percent	American Community Survey Percent
75 to 84 years	15	4.41%	3.60%
85 years and over	6	1.76%	2.00%
Mean (Average) age (years)		45	30.6
Educational Attainment (25+ years)	331		
Less than 9 th grade	2	0.6%	5.20%
9 th to 12 th grade, no diploma	15	4.5%	10.10%
High school graduate or equivalency	59	17.8%	45.00%
Some college, no degree	43	13.0%	12.60%
Technical School without an associate degree	15	4.5%	(X)
Associate degree	32	9.7%	6.3%
Bachelor's degree	75	22.7%	12.8%
Graduate or professional degree	87	26.3%	7.9%
Total High School Diploma and Higher	311	93.96%	84.7%
Bachelor's Degree or Higher	162	48.94%	20.8%
Employment	348		
Currently Working	228	65.52%	76.59%
Currently working full time (32+ hours a week)	193	55.46%	54.00%
Currently working part-time (less than 32 hours a week)	35	10.06%	28.94%
Unemployed	33	7.26%	4.60%
Currently not working but looking for work	16	4.60%	(X)
Not working and not looking for work	17	4.89%	(X)
Retired – not working and not looking	65	18.68%	(X)
Disabled – not working and not looking	22	6.32%	22.37%
Household Income	327		
Less than \$10,000	29	8.9%	5.6%
\$10,000 to \$14,999	24	7.3%	5.5%
\$15,000 to \$24,999	17	5.2%	11.9%
\$25,000 to \$34,999	26	7.9%	12.6%
\$35,000 to \$49,999	30	9.2%	14.4%
\$50,000 to \$74,999	55	16.8%	19.2%
\$75,000 to \$99,999	54	16.5%	12.5%
\$100,000 to \$149,999	55	16.8%	13.3%
\$150,000 to \$199,999	32	9.8%	2.4%
\$200,000 or more	5	1.5%	2.7%
Median household income (dollars)			\$50,061
Mean household income (dollars)			\$65,301

Source: SCRC Community Survey and 2013-2017 American Community Survey 5-year Estimate

Age - What is your age?

The age sample consisted of 341 valid responses; 81 survey participants did not answer the question. The mean age reported was 48 years (SD=15.51 years). Respondent ages ranged from 18 to 93 years old. The median age of survey respondents was 45 years. There appears to be an overrepresentation in the survey sample of the age categories of 35 to 44 years and 45 to 54 years. Also, the age category of 18-24 appears to be under-represented based on 2013-2017 ACS data. These differences could impact other survey demographics such as household income, owning versus renting a home, and educational attainment in the survey sample.

According to the ACS, the median age of residents within the Shippensburg Area School District is 30.6 years. It is likely that the lower median age for the SASD is due to college students. According to The Pew Research Center, one's residence on the census is determined by if they live or stay at the residence most of the time or stay at the residence more time than any other place they might live or stayed there on April 1, 2010 and had no permanent place to live. Thus, college students' place of residence would be their college address as they live there for about nine months of the year.

Gender – *How do you identify your gender? Do you identify as transgender?*

Two hundred sixty-three of the 357 participants identified gender as female, which is the majority of respondents (73.67%). The expected percentage of females in Shippensburg Area School District boundaries, according to the 2013-2017 ACS, was 52.2%. It appears that the survey sample included an overrepresentation of women. The sample included 81 respondents (22.7%) who indicated male as their gender. The 2019 survey added the categories of non-binary/third gender, prefer to self-describe, and prefer not to say. One (N=1) participant indicated non-binary/third gender, and nine (N=9) respondents selected prefer not to say. There were 350 valid answers for the question “Do you identify as transgender?” The number of respondents that skipped this question was 72. Three (N=3) participants responded that they identified as transgender. Seven (N=7) respondents selected “prefer not to say” if they identified as transgender. The majority responded that they did not identify as transgender (N=340, 97.14%).

Lesbian, Gay, Bisexual, Transgender (LGBT) Identity –*Do you consider yourself a member of the Lesbian, Gay, Bisexual and/or Transgender (LGBT) community?*

Three-hundred fifty-two (N=352) responses were valid for this question. Those that identified with the LGBT community equaled 11 (3.3%). Forty-six (N=46) respondents (13.07%) stated that they are allies of the LGBT community. Seventy (N=70) respondents skipped the answer.

Household Composition - *How many adults live in your household? How many children (under age 18) live in your household?*

There were 345 valid responses to the question of number adults in the household. The mean number of adults in the household was 2.04 adults (SD = .753). The most frequently reported number of adult household members was two, with 64.35% (N=222) of participants indicating two adults in the household. One must be an adult, 18 years or older to complete the survey, as such there should be at least one adult in each household. However, there were 82 (19.4%) missing values to the question “How many adults live in your household?”

There were 308 valid responses to the question of number of children in the household. Of survey respondents, 66.6% (N=205) have children living in their household. Of those responses, 25.65% (N = 79) had one child in the household and 27.7% (N=84) had two children in the household. The 2013-2017 ACS indicates that 29.0% of households in Shippensburg have children present. There is a significant overrepresentation of households with children in the survey sample. Some categories of household composition, such as married-couple families,

could not be compared to ACS data because the survey did not include questions that would enable these comparisons.

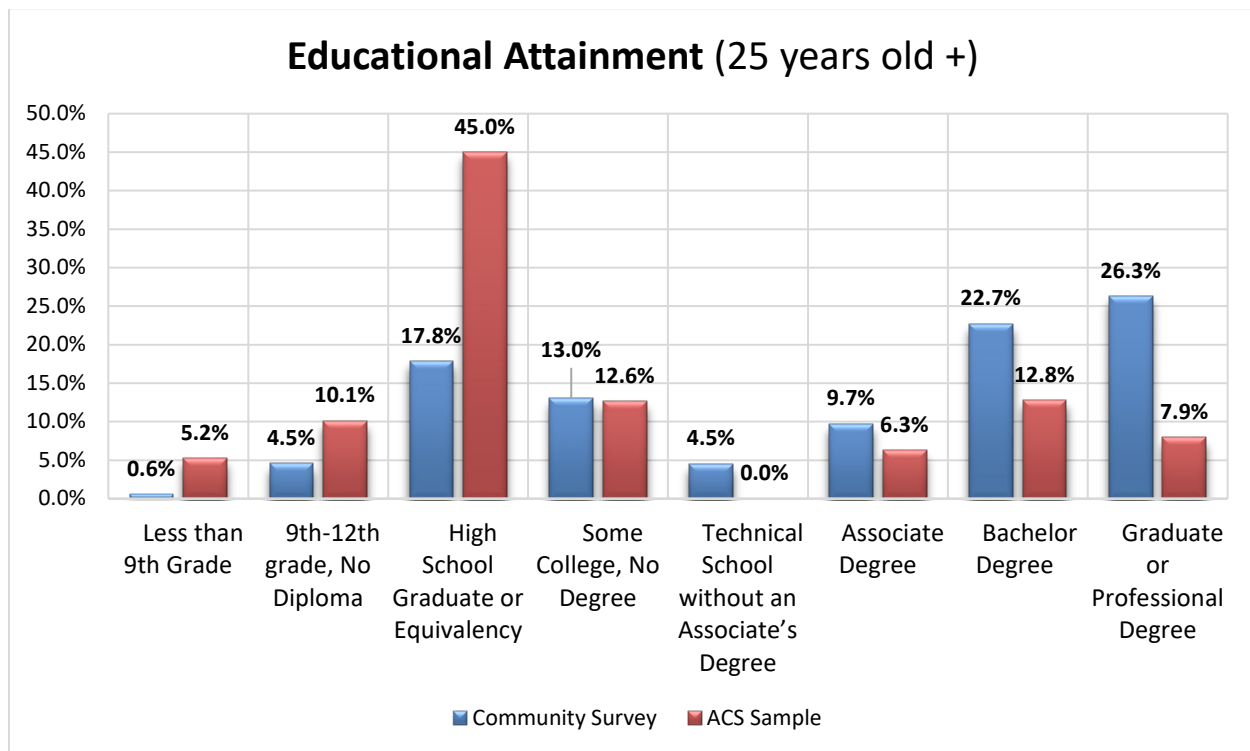
Resident Ownership or Rental Status - *Do you and/or members of your household own or rent your current residence?*

Frequencies were run to determine whether owning or renting is more prevalent among survey respondents. The majority of surveyed individuals, 73.03% (N = 260), own their residence. Renters comprised 25.0% (N = 89) of respondents, and 66 did not answer the question. The survey sample was about 10% higher than the 2013-2017 ACS which was 63.3% owned their residence and 36.7% rented their residence. This difference might be related to the overrepresentation of survey respondents in the higher age categories as those who are older may be more likely to own a home versus renting it.

Educational Attainment - *Which of the following categories best describes your education level?*

The sample consisted of 353 valid responses and 69 participants did not report their educational attainment. The most frequently occurring highest level of education was graduate or professional degree (26.35%, N=93) followed by bachelor's degree (22.38%, N=79). The least frequently reported highest level of educational attainment identified was less than 9th grade (0.57%, N=2). In order to compare it with the 2013-2017 ACS data which categorizes it as respondents who are 25 years old and over, SPSS was used to select only those respondents who were 25 years old and over. There were 331 respondents who were 25 years old and over. Figure 3 compares survey responses with ACS data. Compared to the ACS data, the survey appears to have disproportionately sampled individuals with higher-level educations.

Figure 3. Educational Attainment Comparison between 2013-2017 ACS and Community Survey



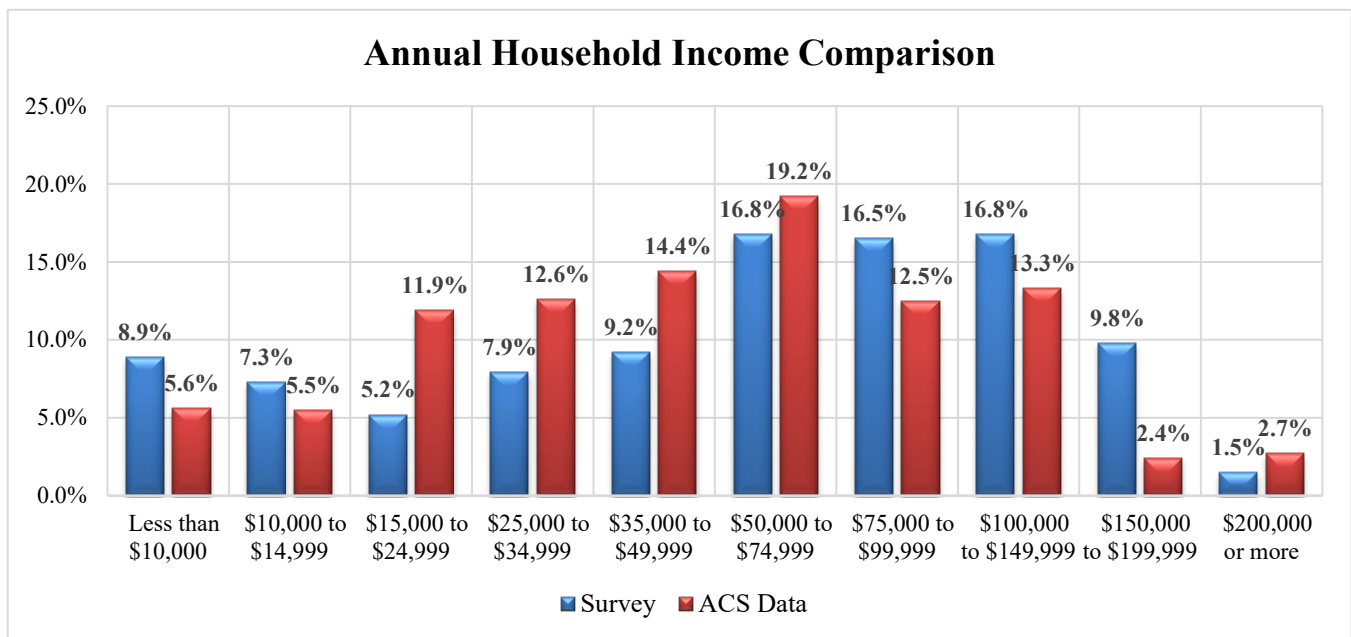
Employment Status - With respect to employment, are you: Currently working full-time (32+ hours per week), currently working part-time (less than 32 hours per week), Currently not working but looking for work, Not working and not looking for work, Retired- Not working and not looking, Disabled-Not working and not looking

The sample had 348 valid responses; 74 participants did not answer the question of employment status. Slightly more than half of participants (55.46%, N = 193) reported *currently working full-time*. This was followed by the categories of *Retired-Not working and not looking* (18.68%; N = 65) and *currently working part-time* (10.06%, N = 35). Participants *currently not working but looking for work* consisted of 4.6% of participants (N = 16). Participants *not working and not looking for work* accounted for 4.89% (N = 17) and participants *disabled-not working and not looking* consisted of 6.32% (N=22). Combining the last three categories indicates that 29.89% (N = 104 participants) were not working and not looking for work. The survey sample only had a difference of 11% when looking at those that were employed, 65.52% versus 76.59% in the 2013-2017 ACS. Compared to the ACS, the survey sample did have a lower representation of respondents who were disabled and not working (6.32% versus 22.37% in the ACS). The number of survey respondents working part-time was also underrepresented as 10.06% (N=35) stated they were working part-time compared to 28.94% in the ACS.

Annual Household Income - What is your total annual household income before taxes?

There were 327 valid responses to the question and 95 participants skipped this question. In terms of income, participants were clustered at the top of the income range, with 55 (16.82%) individuals making \$100,000-149,999 per year, 54 (16.51%) individuals making \$75,000 – \$99,999 per year, and 55 (16.82%) making \$50,000-74,999 per year. Figure 3 compares the annual household income from the survey with the 2013-2017 ACS data. The survey sample is over representative of the higher incomes and under representative of the low to middle income households. ACS data indicates the mean income to be \$65,301 with $\pm 4,611$ margin of error. Of note is that according to the ACS, 50% of the population make \$49,999 or less, well below the mean income of \$65,301.

Figure 4. Comparison between 2013-2017 ACS and Survey Data on Income.



Years Lived in Shippensburg Area School District - How many years have you lived in Shippensburg Area School District?

The sample had 355 valid responses (67 surveys were missing this data). The mean number of years lived in SASD was 25.38 years (SD=19.42) with a median of 20 years. The range was less than one year to 92 years.

Residence - Which borough or township do you live in?

There were 353 valid responses to this question and 69 respondents skipped the question. The results, in order of most frequent to least are:

Table 6. Borough or Township of Residence

Borough or Township	Percent of Responses	Number of Responses
Shippensburg Borough	32.3%	114
Southampton Township Franklin County	29.5%	104
Southampton Township Cumberland County	21.0%	74
Hopewell Township	7.1%	25
Shippensburg Township	6.8%	24
Newburg Borough	0.9%	3
Other (please specify)	0.6%	2
I don't know	1.7%	6

Race, Hispanic or Latino Ethnicity, and English Primary Language - *Do you consider yourself to be Hispanic or Latino? Which one of the following best describes your race? Is English your primary language?*

There were 338 valid responses for the question about ethnicity. Six (N=6) participants (1.74 %) reported they were Hispanic or Latino. Compared to the 2013-2017 ACS, the survey sample was slightly underrepresented as the ACS reported 3.00% as identifying as Hispanic or Latino. There were 356 valid responses to the question about race. The majority, 90.45% (N = 322) indicated they were White, slightly under the ACS at 92.30%. Black or African Americans were also slightly underrepresented when compared to the ACS: 1.97% (N=7) versus 3.90% ACS. The remaining responses were Multiracial (N = 6, 1.69%); Asian (N = 5, 1.40%); American Indian/Alaskan Native (N = 3, 0.84%) and Native Hawaiian/ Pacific Islander (N = 0, 0%). Three participants indicated Other (0.84%) and 14 indicated “Prefer not to say” (14, 3.93%). Three-hundred fifty participants responded to the question about English being their primary language. Of those, 98.29% (N=344) selected English as their primary language which was slightly higher than the ACS at 91.9%. Only 6 (1.71%) respondents reported that English was not their primary language.

Satisfaction with Shippensburg as a Place to Live – *How satisfied are you with Shippensburg as a place to live?*

A total of 357 survey respondents answered this question. Over half of them were satisfied with Shippensburg as a place to live and 13.45% (N=48) were very satisfied. Twenty percent were neither satisfied or dissatisfied. A total of 13.72% were either dissatisfied or very dissatisfied with Shippensburg as a place to live.

Services and Opportunities in Shippensburg

Three sections of the survey included questions to understand more about the opinions of respondents related to the services and opportunities in Shippensburg. There were two sections

that included Likert Scale responses and six open-ended questions to elicit further responses. The results are reported for each Likert Scale section and then the open-ended questions.

Level of Satisfaction with Services and Opportunities in Shippensburg - *How satisfied are you with the opportunities & services available within Shippensburg Area School District boundaries?*

This section presents the *satisfaction* survey results using the mean score of each item. The higher the mean score, the more satisfaction with the service or opportunity (0 = No Services Available, 1 = Very Dissatisfied, 2 = Dissatisfied, 3 = Satisfied, 4 = Very Satisfied). The results of each survey item and the frequency and percentage for each response category are included at the end of this section.

Survey respondents were generally satisfied with 24 of the items on the survey, as indicated by the mean score on these items. The top three highest means were for quality of early childhood education ($M = 3.81$, $SD = .82$), community safety ($M = 3.73$, $SD = .77$), and efforts to improve literacy ($M = 3.64$, $SD = .86$).

Three of the survey items had a mean that indicated at least some level of dissatisfaction. These three areas included services for people who are re-entering the community after incarceration ($M = 2.98$, $SD = 1.07$), the availability of mental health services ($M = 2.98$, $SD = .95$), and the affordability of mental health services ($M = 2.96$, $SD = .95$).

The following table and graph includes all of the questions from the survey in order of lowest mean (least satisfaction) to highest mean (most satisfaction).

Table 7. Level of Satisfaction of Services

Item	N	Mean	Standard Deviation	Rank
Satisfaction of Affordability of Mental Health Services	365	2.96	0.95	25
Satisfaction of Available of Mental Health Services	377	2.98	0.95	24
Satisfaction of Services for People who are Re-Entering the Community after Incarceration	324	2.98	1.07	24
Satisfaction of Efforts to Reduce Harmful Drug Use	371	3.01	0.9	23
Satisfaction of Availability of Adequate Transportation	402	3.02	1.02	22
Satisfaction of Availability of Services for People Identifying as LGBTQ+	319	3.04	1.2	21
Satisfaction of Efforts to Improve Ethnic or Racial Harmony	365	3.08	1.02	20
Satisfaction of Efforts to Prevent & Reduce Homelessness	385	3.1	0.96	19
Satisfaction of Services for People whose 1st Language Is Not English	339	3.14	1.11	18
Satisfaction of Availability of Services for Trauma and Abuse	363	3.15	0.98	17

Item	N	Mean	Standard Deviation	Rank
Satisfaction of Services Specific to Youth	370	3.15	0.96	16
Satisfaction of Efforts to Prevent & Reduce Poverty	396	3.2	0.92	15
Satisfaction of Opportunities for Adult Education	387	3.22	1.01	14
Satisfaction of Availability of Supervised After School Youth Activities	384	3.22	0.92	14
Satisfaction of Opportunities for Adults with a Disability	339	3.23	0.93	13
Satisfaction of Opportunities for Children with a Disability	339	3.24	0.93	12
Satisfaction of Availability of Affordable Daycare Centers	364	3.25	0.88	11
Satisfaction of Availability of Alcohol/Tobacco/Drug Treatment	365	3.3	0.92	10
Satisfaction of Quality Daycare Centers	352	3.36	0.92	9
Satisfaction of Affordability of Medical Services	406	3.42	0.86	8
Satisfaction of Availability of Youth Employment Opportunities	386	3.46	0.81	7
Satisfaction of Availability of Employment Opportunities for Adults	408	3.51	0.79	6
Satisfaction of Services Specific to Older Adults	365	3.53	0.88	5
Satisfaction of Access to Affordable Housing	396	3.61	0.82	4
Satisfaction of Efforts to Improve Literacy	378	3.64	0.86	3
Satisfaction of Community Safety	398	3.73	0.77	2
Satisfaction of Quality of Early Childhood Education	391	3.81	0.82	1

Level of Importance of Services and Opportunities in Shippensburg - *How important is it that the following are available within Shippensburg Area School District boundaries?*

This section presents information about how *important* respondents feel services and opportunities are for the Shippensburg area using mean scores. Higher mean scores indicate that the respondents felt it was important that the service or opportunity is available in Shippensburg (1 = Completely Unimportant, 2 = Unimportant, 3 = Important, 4 = Very Important). The results of each survey item and the frequency and percentage for each response category are included at the end of this section.

Survey respondents generally felt that 23 items were important to have within Shippensburg Area School District boundaries, as indicated by the mean score on these items. The opportunities and services that survey respondents reported as being of the highest importance were for quality daycare ($M = 3.57$, $SD = .67$), affordable medical services ($M = 3.54$, $SD = .63$), and supervised afterschool youth activities ($M = 3.52$, $SD = .66$).

The survey item with the lowest mean was services to treat gambling addictions ($M = 2.82$, $SD = .91$). All other items on this part of the survey indicated some level of importance because the mean was over 3.0. The following three items had a mean score indicating some level of importance, but they were the lowest means after services to treat gambling addictions: transportation services ($M = 3.17$, $SD = .77$), opportunities for adult education ($M = 3.17$, $SD = .68$), and programs to improve ethnic or racial harmony ($M = 3.25$, $SD = .77$).

The following table and graph include all of the questions from the survey in order of least importance to most importance.

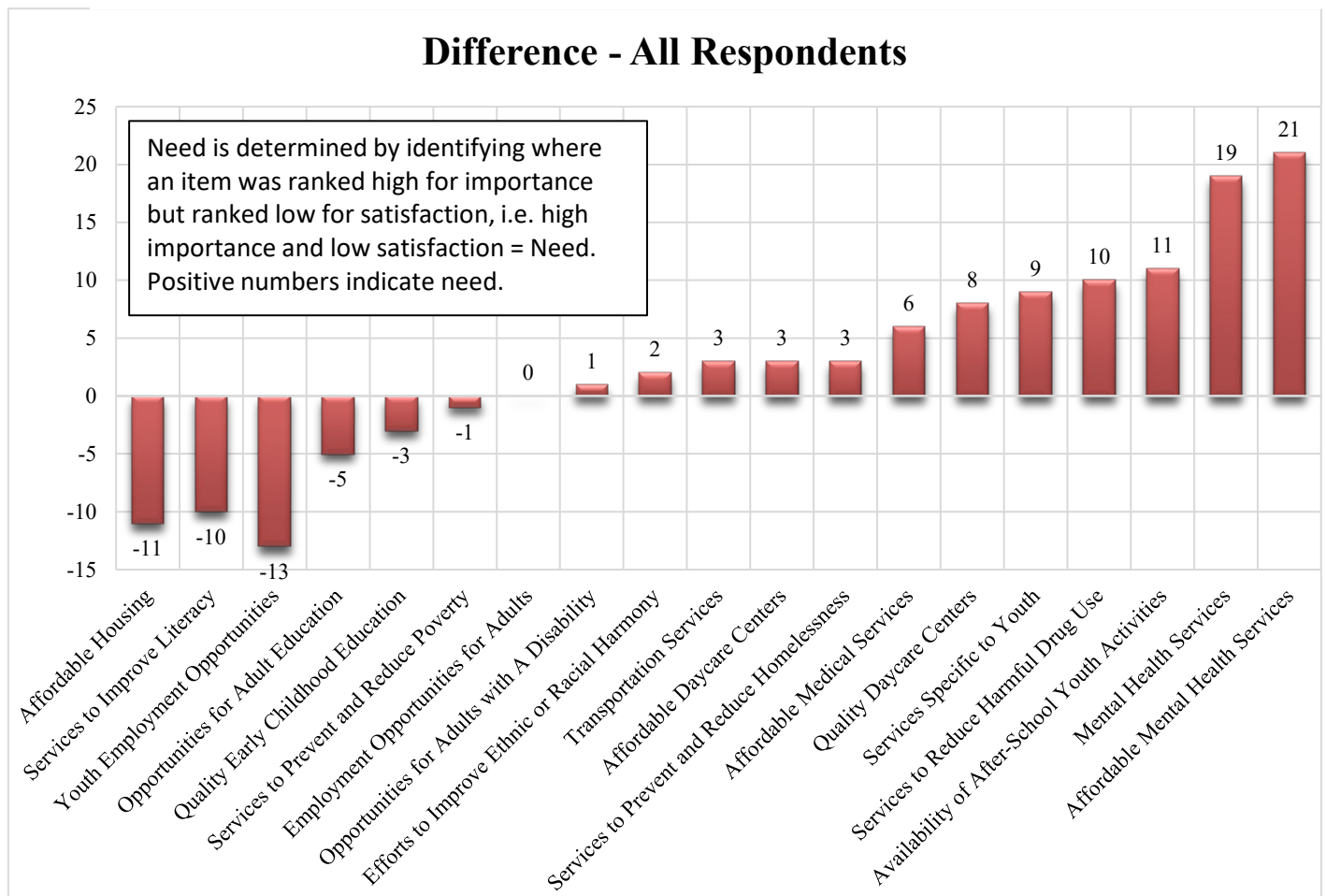
Table 8. Level of Importance of Services

Item	N	Mean	Standard Deviation	Rank
Importance of Services to Treat Gambling Addictions	395	2.82	0.91	20
Importance of Transportation Services	411	3.17	0.77	19
Importance of Opportunities for Adult Education	404	3.17	0.68	19
Importance of Programs to Improve Ethnic or Racial Harmony	398	3.25	0.77	18
Importance of Youth Employment Opportunities	408	3.26	0.7	17
Importance of Services to Prevent and Reduce Poverty	410	3.31	0.7	16
Importance of Services to Prevent and Reduce Homelessness	408	3.31	0.74	16
Importance of Affordable Housing	417	3.32	0.74	15
Importance of Services to Improve Literacy	400	3.35	0.69	14
Importance of Services to Reduce Alcohol/Tobacco/Drug Use	399	3.39	0.73	13
Importance of Opportunities for People with Disabilities	404	3.4	0.68	12
Importance of Services for People who are Homeless	403	3.41	0.7	11
Importance of Quality Housing	414	3.42	0.68	10
Importance of Services for Survivors of Domestic Violence	404	3.44	0.66	9
Importance of Affordable Daycare Centers	408	3.46	0.69	8
Importance of Services Specific to Youth	398	3.46	0.65	7
Importance of Employment Opportunities for Adults	412	3.48	0.69	6
Importance of Mental Health Services	406	3.49	0.66	5
Importance of Quality Early Childhood Education	405	3.51	0.65	4
Importance of Affordable Mental Health Services	402	3.51	0.65	4
Importance of Supervised Afterschool Youth Activities	402	3.52	0.66	3
Importance of Affordable Medical Services	409	3.54	0.63	2
Importance of Quality Daycare Centers	406	3.57	0.67	1

Satisfaction and Importance as an Indicator of Need – All Respondents

The survey provided a way to identify the most important needs by examining satisfaction levels and importance levels together. A need in the community can be defined as a service that is ranked important, but that people indicate they are not satisfied with. In other words any service with a high importance score and a low satisfaction score would be assumed to be a “need.” Using this definition, needs were identified by subtracting the rank importance from the rank of satisfaction for each item on the survey. The result is a positive or negative number. Positive numbers indicate that satisfaction rank was lower than importance rank, indicating need. The higher the number, the larger the difference between importance and satisfaction, and therefore, the greater the need. The following graph identifies the result for each item.

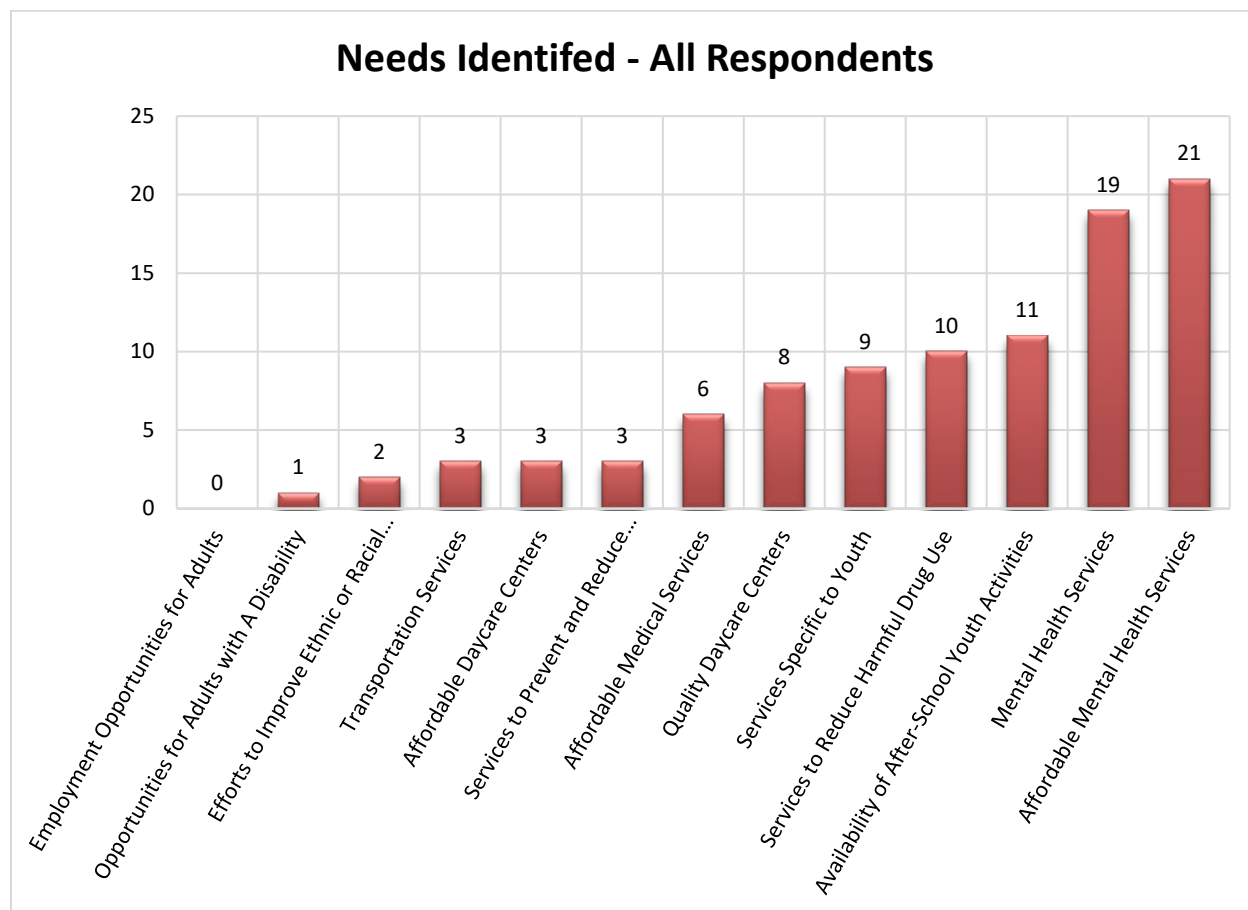
Figure 5. Need Score of Services and Programs for All Respondents.



Generally, it would appear that the greatest needs identified by survey respondents focus around two general themes: 1) affordable mental and medical health services; and 2) services for youth.

The following graph indicates only those items with a positive difference, indicating the most need with the higher numbers.

Figure 6. Needs Identified by All Respondents



Comparison of Respondents At or Below Poverty Level versus Above the Poverty Level

It is important to understand how people who may be beneficiaries of social services and programming identify Shippensburg's needs and examine whether there are differences between their responses and the responses of respondents that are above the poverty level. This is especially true given the overrepresentation of higher income respondents for this survey.

Respondents above the poverty level were selected to compare with those at or below the poverty level. Also, respondents that did not answer the questions about the number of adults and children in their household or those who did not answer the income question, could not be included in this analysis. This left a total of 293 valid surveys to compare. There were 62 (14.7%) respondents at or below the poverty level and 231 (54.7%) respondents above the poverty level. It should be noted that many assistance programs use guidelines for 125%-200% of the poverty level which allows people to have a higher level of income and still receive

benefits. For example, to be eligible for free-lunch, one must be at 130% of the poverty level. The following chart identifies the 2019 guidelines for 100% of the poverty level.³¹

Table 9. 2019 Poverty Guidelines

2019 Poverty Guidelines for the 48 Contiguous States and the District of Columbia	
Persons in Family/Household	Poverty Guideline (100% Poverty Level)
For families/houses with more than 8 persons, add \$4,420 for each additional person.	
1	\$12,490
2	\$16,910
3	\$21,330
4	\$25,750
5	\$30,170
6	\$34,590
7	\$39,010
8	\$43,430

Demographics of Respondents At or Below Poverty Level vs Above Poverty Level

In order to have a full picture of the differences between these two groups, looking at the demographics of each group and comparing them can offer. Some things to note is that those at or below the poverty level had a lower rate of white race and a higher rate of people of color/multiracial. They also had a higher rate of renting versus home ownership. Those above the poverty level had a higher rate of currently working full-time and a higher rate of educational attainment, specifically for bachelor's degree or higher.

The following table shows the demographics for those at or below the poverty level and respondents about the poverty level.

Table 10. Comparison of Demographics of Survey Respondents At or Below Poverty Level vs. Above Poverty Level.

Demographic Item	At or Below Poverty Level	Above Poverty Level
Average Household Size	3.24	3.4
Gender	N=61	N=205
Male	1.6% (1)	0.5% (1)
Female	93.4% (57)	98.0% (201)
Non-binary/ Third Gender	4.9% (3)	1.5% (3)
Prefer Not to Say	0	0
Prefer to Self-Describe	0	0
Transgender	N=61	N=227
Yes	1.6% (1)	0.4% (1)
No	93.4% (57)	98.2% (223)
Prefer Not to Say	4.9% (3)	1.3% (3)

³¹ U.S. Department of Health & Human Services: Office of the Assistant Secretary for Planning and Evaluation. (2019). Poverty Guidelines: U.S. Federal Poverty Guidelines Used to Determine Financial Eligibility for Certain Federal Programs. <https://aspe.hhs.gov/poverty-guidelines>

Demographic Item	At or Below Poverty Level	Above Poverty Level
Member of the Lesbian, Gay, Bisexual and/or Transgender (LGBT) Community	N=62	N=229
Yes	6.5% (4)	2.6% (6)
No	77.4% (48)	82.1% (188)
Prefer not to say	6.5% (4)	1.3% (3)
No, but I identify as an Ally	9.7% (6)	13.9% (32)
Race	N=61	N=230
Native Hawaiian or Pacific Islander	(X)	(X)
American Indian or Native Alaskan	1.6% (1)	(X)
Asian	11.5% (7)	2.6% (6)
Multiracial	18.0% (11)	10.4% (24)
Black African American	(X)	0.4% (1)
White	60.7% (37)	83.5% (192)
Other	(X)	0.4% (1)
Prefer Not to Say	8.2% (5)	2.6% (6)
Hispanic or Latino	N=57	N=227
Yes	3.5% (2)	0.9% (2)
No	96.5% (55)	99.1% (225)
English as Primary Language	N=59	N=229
Yes	94.9% (56)	98.3% (225)
No	5.1% (3)	1.7% (4)
Home Ownership	N=62	N=232
Own	36.1% (22)	80.5% (186)
Rent	60.7% (37)	17.7% (41)
Other	3.3% (2)	1.7% (4)
Age Distribution	N=57	N=221
18 to 24 years	3.5% (2)	1.0% (2)
25 to 34 years	26.3% (15)	16.0% (37)
35 to 44 years	19.3% (11)	35.7% (79)
45 to 54 years	12.3% (7)	22.2% (49)
55 to 59 years	3.5% (2)	10.0% (12)
60 to 64 years	5.3% (3)	5.0% (10)
65 to 74 years	21.1% (12)	9.0% (20)
75 to 84 years	3.5% (2)	5.0% (10)
85 years and over	1.8% (1)	10.0% (2)
Mean (Average) age (years)	48.8	46.3
Household Composition	N=62	N=231
With children under 18 present	53.2% (33)	73.2% (169)
Householder living alone	35.5% (22)	26.8% (62)
Educational Attainment	N=60	N=230
Less than 9 th grade	1.7% (1)	0.4% (1)
9 th to 12 th grade, no diploma	15.0% (9)	1.3% (3)
High school graduate or equivalency	35.0% (21)	14.3% (33)
Some college, no degree	20.0% (12)	13.0% (30)
Technical School without an Associate's Degree	6.7% (4)	3.9% (9)
Associate degree	11.7% (7)	11.3% (26)
Bachelor's degree	1.7% (1)	27.4% (63)
Graduate or professional degree	8.3% (5)	28.3% (65)
Total High School Diploma and Higher	83.3% (50)	98.3% (226)
Bachelor's Degree or Higher	10% (6)	54.3% (125)
Employment	N=61	N=228
Currently working full time (32+ hours a week)	19.7% (12)	65.4% (149)

Demographic Item	At or Below Poverty Level	Above Poverty Level
Currently working part-time (less than 32 hours a week)	11.5% (7)	8.8% (20)
Currently not working but looking for work	18.0% (11)	2.6% (6)
Not working and not looking for work	4.9% (3)	5.3% (12)
Retired – not working and not looking	21.3% (13)	14.0% (32)
Disabled – not working and not working	24.6% (15)	3.9% (9)
Household Income	N=62	N=231
Less than \$10,000	38.7% (24)	(X)
\$10,000 to \$14,999	29.0% (18)	3.9% (9)
\$15,000 to \$24,999	9.7% (6)	4.8% (11)
\$25,000 to \$34,999	16.1% (10)	8.7% (20)
\$35,000 to \$49,999	6.4% (4)	9.5% (22)
\$50,000 to \$74,999	(X)	19.0% (44)
\$75,000 to \$99,999	(X)	19.0% (44)
\$100,000 to \$149,999	(X)	21.6% (50)
\$150,000 to \$199,999	(X)	11.7% (27)
\$200,000 or more	(X)	1.7% (4)

Table 11. Comparison of Satisfaction with Shippensburg as a Place to Live

Satisfaction with Shippensburg as Place to Live	At or Below Poverty Level	Above Poverty Level
	N=61	N=230
Very Dissatisfied	18.0% (11)	20.4% (47)
Dissatisfied	6.6% (4)	1.3% (3)
Neither Satisfied or Dissatisfied	6.6% (4)	9.6% (22)
Satisfied	50.8% (3)	54.3% (125)
Very Satisfied	18.0% (11)	14.3% (33)

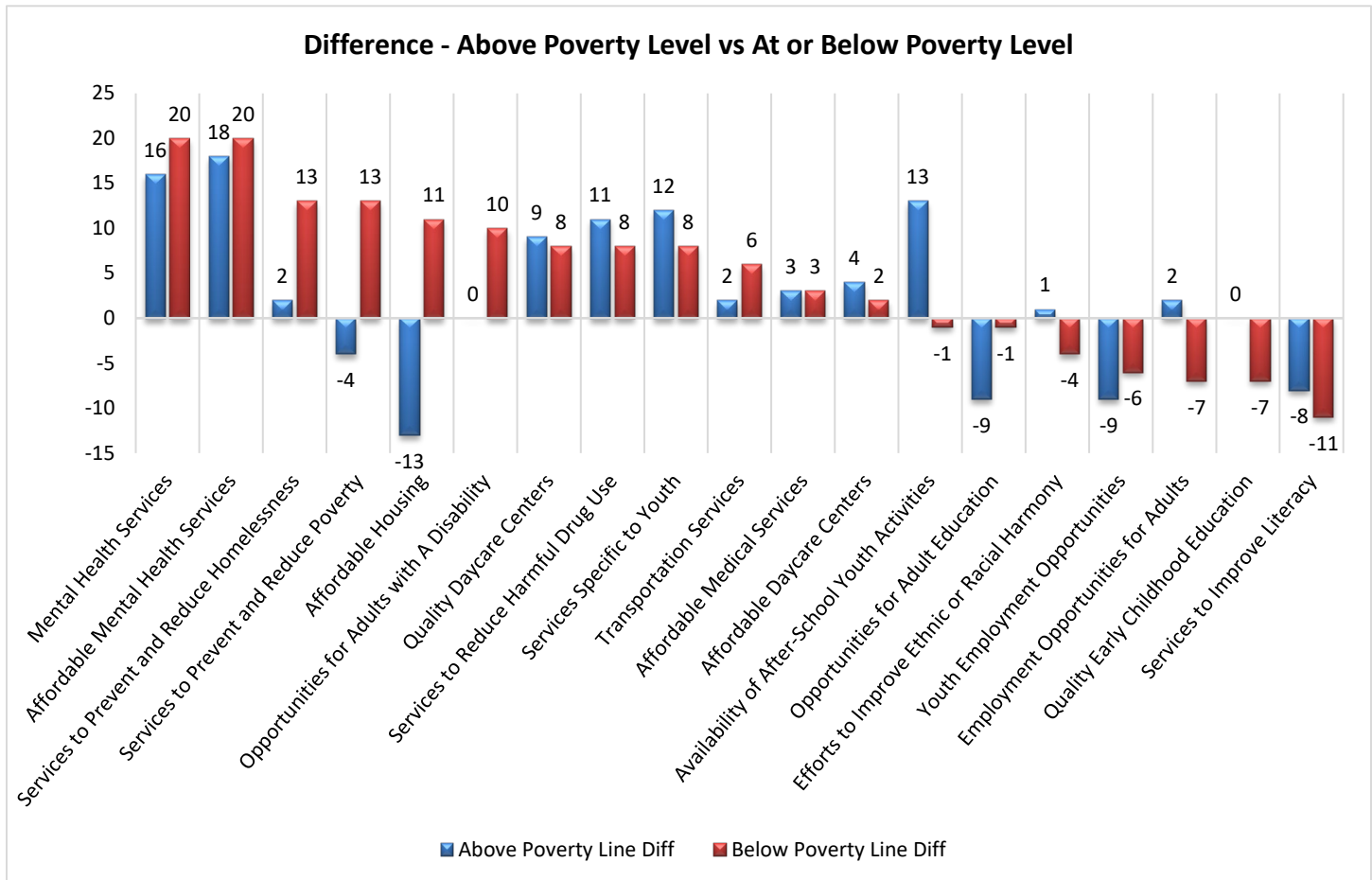
Satisfaction and Importance as an Indicator of Need – Respondents at or below Poverty Level

Identifying the individual needs of these two groups is important to better understand the needs of the community as a whole. It is important to understand how people who may be beneficiaries of social services and affordable youth programming identify needs and examine whether there are differences between their responses and respondents that are above the poverty level.

As explained previously, a need in the community can be defined as a service that is ranked important, but that people indicate they are not satisfied with. Needs were identified by subtracting the rank of importance from the rank of satisfaction for each item on the survey. The result is a positive or negative number. Positive numbers indicate that satisfaction rank was lower than importance rank indicating need. The higher the number, the larger the difference between importance and satisfaction, and therefore, the greater the need. The following graph

compares the results for each item between survey respondents at or below the poverty level versus those above the poverty.

Figure 7. Comparison of Needs Difference At or Below the Poverty Level vs Above the Poverty Level



Note: Need is determined by identifying where an item was ranked high for importance but ranked low for satisfaction, i.e. high importance and low satisfaction = need.

Respondents above the poverty level and those at or below the poverty level both identified mental health services and affordable mental health services as the two top identified needs. However, that is where the similarities stop. Those at or below the poverty level identified needs related to income challenges:

- Services to Prevent and Reduce Homelessness
- Services to Prevent and Reduce Poverty
- Affordable Housing
- Opportunities for Adults with A Disability

Respondents whose income was above the poverty level, identified needs related to youth programming and services:

- Availability of After-School Youth Activities
- Services Specific to Youth
- Services to Reduce Harmful Drug Use

People at or below the poverty level identified seven areas as needs more than those in the above poverty level sample with the largest differences in opinions about:

- Services to Prevent and Reduce Homelessness (Above Poverty Level: 2; Poverty Level: +13)
- Services to Prevent and Reduce Poverty (Above Poverty Level: -4; Poverty Level: +13)
- Affordable Housing (Above Poverty Level: -13; Poverty Level: +11)
- Opportunities for Adults with A Disability (Above Poverty Level: 0; Poverty Level: +10)

Open-Ended Questions

The survey included six brief open-ended questions to try to understand more about the strengths and challenges of Shippensburg overall and the specific programming needs for Shippensburg (community safety, youth programming, social service programming, programs for those re-entering the community after incarceration). The results of each question are reported in this section. Each question was reviewed using open-coding. Themes were identified and then frequencies and percentages for categories were calculated.

What types of community safety programs/services are needed Shippensburg?

Slightly less than half (45.0%) of respondents provided replies for this question. There were a total of 190 recommendations for community safety programs or services. However, that included 35 (18.4%) responses that indicated that the respondents were unsure about what types of community safety programs or services are needed in Shippensburg. The following table shows the recommendations with the number and percent of respondents that shared the same suggestion.

Community Safety Programs/Services	Number	Percent
Programs for Youth	44	23.2%
Educational Classes on Specific Topics	39	20.5%
Unsure/Don't Know	35	18.4%
Drug and Alcohol	24	12.6%
Increase in Police Presence in the Community	20	10.5%
Neighborhood Watches	17	9.0%
Physical Improvements	14	7.4%

Program and service categories mentioned that were less popular included mental health services, services for the homeless, public transportation, domestic violence services, and safety services for university students such as free transportation from the bars to campus.

Specific recommendations related to the main themes include:

- **Drug and Alcohol:** Responses were often non-specific but centered around three themes: education, prevention, and treatment. One respondent stated, “Address the drug problem by being effective at prevention with youth. The school is disconnected from understanding this need.”
- **Programs for Youth:** Ideas included programs to teach them how to be safe in different situations, supervised afterschool and evening activities, and increased monitoring in the schools, specifically by paid professionals such as school resource officers or full-time police in the school.
- **Educational Classes:** Recommendations were about safety skills such as classes on gun safety, active shooter training, self-defense, driver awareness, and pedestrian safety.
- **Physical Improvements:** Respondents would like more streetlamps, security cameras, and crosswalks at more corners.
- One respondent captured the interdependent nature of different programs: “All services are needed, mental health, drug/alcohol, homelessness. If any of these are missing, we allow groups of people to suffer and force them to look elsewhere for help.”

What types of youth programs are needed in Shippensburg?

Fifty-five percent of survey respondents provided a reply to this question. There were a total of 234 recommendations for different types of youth programs, however, 6 (2.5%) of those responses essentially stated that the respondent did not have any program recommendations, and 12 respondents (5.1%) said any youth programs would be an improvement. The following table shows the recommendations with the number and percent of respondents that shared the same suggestion.

Youth Programs/Services	Number	Percent
After-School Programs	45	19.2%
Non-Sports Related Activities <ul style="list-style-type: none">• Art• Academics	42	18.0%
Community Center <ul style="list-style-type: none">• Youth-centered activities• Indoor and accessible for all seasons especially during the winter months	37	15.8%
Sports-Related Programs	29	12.4%
Age-Specific General Programming: <ul style="list-style-type: none">• Kid’s Club• Teen Programs	14 13	6.0% 5.6%
Summer Programming	11	4.7%

Some other specific recommendations included rape education, mental health services, hobby clubs, after-school help, secular volunteer clubs, and healthy eating and lifestyles. One critique was the affordability of programming for youth. The need for free programming was mentioned by 13 respondents (5.6%). Another critique focused on the previously mentioned fact that the majority of current youth programming in Shippensburg focuses on sports rather than things like arts or academics.

What types of social services programs are needed in Shippensburg?

Forty-seven percent of survey respondents provided a reply to this question. From those replies, a total of 197 recommendations were placed into relevant categories. As with previous questions, many respondents (23, 11.7%) simply said that they did not have a recommendation for social service programming in Shippensburg. A further 7.1% (14 responses) simply indicated that anything would be better than the status quo and 4.1% (8 responses) responded “N/A,” not applicable. The following chart is the major themes that surfaced in the survey and specific examples of social service program under those themes:

Social Service Programs	Number	Percent
Mental Health Services <ul style="list-style-type: none"> • More outpatient mental health services • Counseling for children whose parents are separated • More mental health providers 	39	19.8%
Affordable, Quality Housing <ul style="list-style-type: none"> • Programs for homeless • Homeless shelter • Emergency homeless shelter • Affordable housing • Assistance gaining housing 	26	13.2%
Drug and Alcohol Services <ul style="list-style-type: none"> • Addiction services • Drug rehabilitation • Support for those in recovery • Support services for families of drug use • Training teachers about drug use • Education classes for youth about the dangers of drugs • Halfway house for women 	16	8.1%

Other less popular categories of social service recommendations were in the areas of:

- **Services for Youth:** Recommendations included job training, education opportunities for non-school aged children, programs for working parents that leave their children at home, after-school care, infant care needs, free or reduced rate youth programs.

- Services for Seniors: Suggestions included dementia and Alzheimer's support services and free or reduced rate activities for older adults. Some of the recommendations included services that are already available: a senior center (Brank Creek Senior Center), meals for the homebound (Meals on Wheels), and an organization to help senior citizens (Area Agency on Aging but they are located in Chambersburg and Carlisle). This shows that some the services that are available for seniors may not be well known in the community.
- Services to Help those Experiencing Poverty: Program ideas were financial literacy, access to food, education, job coaching, and programs to help prevent poverty.
- Life Skills Education: Ideas included budgeting, healthy relationships, internships, and job shadowing experiences.
- Services for those with Disabilities: Specific recommendations are an increase of support in schools for children with "autism and ADHD support in mainstream classes," psychiatrists and therapists, support groups, increase options for children with disabilities, and autism/Asperger specific services.
- Employment: Ideas are job training/coaching, help finding a job, unemployment counseling/help, and affordable/quality childcare centers that work with a warehouse schedule.
- Access to Services: Suggestions are public transportation, easier access so more people can get help, and central organization or office to share all the information that is available.
- Food Resources: Recommendations included healthy food option for Hound Packs and Summer Lunch Program, bigger food banks, and better advertising of community meals.
- Domestic Violence Services: Specific ideas included Women In Need and affordable housing for abuse victims.

Some of the more unique recommendations from the respondents included trauma informed services, infant care needs, more GED classes, mixers like daddy-daughter dances, café open 24-hours, reading literacy, and financial literacy.

As a part of the analysis of these responses a separate category for criticisms was created. Some of those critical responses were quite informative. One respondent critiqued the school district, saying: *"There needs to be better support services for children with autism. Our school district is horrible with educating these kids, there are no sports or activities for anyone who is disable."* Multiple people mentioned the need to advertise what social services are available in Shippensburg, especially with the difficulties of *"Shippensburg being in two counties"* and services are different based on which county one lives in. A few comments focused on a general lack of services in Shippensburg, such as: *"job training," "more group therapy and mental health providers"* and *"helping families out of poverty."* A critique of the warehouses in Shippensburg is that

None of the warehouse schedules are conducive to families. The schedule of each is different and most shifts begin and end outside the normal childcare hours-we need quality/affordable childcare if people want to last at these jobs and improve their economic situation.

What types of programs for those re-entering the community after incarceration are needed in Shippensburg?

While 229 survey participants skipped this question, 193, or 45.7% of survey participants provided an answer. Of those, 39 respondents were unsure or did not know what programs were needed. Seven (3.6%) respondents put “N/A”, not applicable and seven (3.6%) thought no programs or services to help those re-entering the community after incarceration are needed in Shippensburg. One respondent said when asked about programs and services needed, “none as criminals in Cumberland County have it made.” On the opposite side of the spectrum, one respondent stated “these people have paid their debt and answered for any crime. We can’t keep people down for the rest of their life and limit their chance to succeed.” The following chart includes the major themes and specific examples from the survey:

Programs for those Re-Entering the Community after Incarceration	Number	Percent
Employment Programs <ul style="list-style-type: none"> • Job training/technical skills training • Soft skills training including interview preparation • Assistance finding work opportunities • Job partner programs • Education for employers about hiring employees recently released from incarceration as well as providing incentives to employers for hiring them. 	84	43.5%
Housing <ul style="list-style-type: none"> • Obtaining housing • Half-way housing • Transitional housing • Community housing 	36	18.7%
Educational Programs <ul style="list-style-type: none"> • Mentorships • Life skills • Education about employment • Education for the community, “public education on how to treat and react to ex-inmates.” 	23	12.0%

Other less popular categories included rehabilitation facilities to help them re-integrate into the community, and mental health services including support groups, and transportation.

What is the biggest problem, issue or need in Shippensburg?

About 35% of surveyed individuals did not identify a need or respond to the question.

Approximately 65% of respondents provided a reply for this question which is the highest response rate of all the open-ended questions. Of those, 2.9% (8) were unsure what is Shippensburg's biggest problem or need.

Shippensburg's Biggest Problem, Issue or Need	Number	Percent
Drugs and Alcohol	60	21.8%
Youth <ul style="list-style-type: none">• Lack of youth activities• Lack of youth center/community center	43	15.6%
Lack of Downtown Development and Empty Businesses <ul style="list-style-type: none">• Affordable places for businesses to want to come to town• Empty stores• Empty buildings downtown• Better selection of restaurants• Downtown lacks businesses• Lack of business opportunities for those with higher educational degrees• Lack of vision for downtown development• Locals do not support local businesses	40	14.6%
Community's Inability to Work Together <ul style="list-style-type: none">• Community cannot work together• Township development• Fragmented government• Communication and transparency• Elected officials need to be transparent and work together• School directors are not involved enough• No efforts from the community to make the town beautiful• Lack of social capital• Apathy• Shippensburg University: Community support of University, Cohesiveness with the University, Collaboration between the community and the University• Resistance to change• Need more social workers in schools and community	33	12.0%
Deterioration of Built Environment <ul style="list-style-type: none">• Abandoned or neglected buildings• Poor road conditions• Out-dated schools and facilities• No restaurants or shopping• Close proximity to I-81• Warehouses being built	31	11.3%

Shippensburg's Biggest Problem, Issue or Need	Number	Percent
<ul style="list-style-type: none"> • Lack of downtown 		
Lack of Activities <ul style="list-style-type: none"> • Have to leave town for activities • Lack of recreational activities • Lack of evening/weekend activities and facilities that are not center around alcohol • Events facility not associated with Shippensburg University or the University starts to branch into the community and allows other events on campus 	31	11.3%
Lack of Quality, Affordable Housing <ul style="list-style-type: none"> • Services for those experiencing homelessness • Lack of women's shelters • Lack of affordable housing for seniors • Rundown houses 	27	9.8%
Poverty <ul style="list-style-type: none"> • Growing low socioeconomic population • Number of families and students living below poverty level • Programs to address root causes of poverty versus only the surface issues 	18	6.6%
Lack of Employment Opportunities <ul style="list-style-type: none"> • Low wages • Dead-end jobs • Job readiness 	17	6.2%
Other Problems, Issues, and Needs (responses that were not identified by a majority of respondents but by a few people) <ul style="list-style-type: none"> • Discrimination • Relationship between Shippensburg University and the community • Lack of transportation (public, consistent, reliable) • Lack of community center • School Systems (educational services in school and educational opportunities) • Mental health services • Services for seniors • Safety in schools • Lack of restaurants • Unsure what problems, issues, or needs are in Shippensburg 	81	29%

The following are quotes related to some of the themes related to Shippensburg's biggest problem, issue or need.

Specific Services Needed: The need for homeless shelters and activities for youth in the form of a community center, *“somewhere or something for our youth to congregate without worry of drugs or illegal substances”* and *“support center/community center for our youth is greatly needed to facilitate programs.”* Respondents spoke of the difficulty of being located in two counties, *“being part of 2 counties – must travel for services, etc.,”* and *“most services, social services are geared toward Chambersburg or Carlisle.”*

Lack of Cohesiveness in the Community and their Inability to Work Together: *“Elected officials need to start being transparent and working together. Municipality officials don’t talk to each other. The school directors are not involved enough.”* Many respondents felt that other barriers to community cohesiveness was that some residents do not want change: *“lack of change, being stuck in the old ways of doing things.”* *“Too many people are compelled to complain but not help make a difference.”* Respondents also wanted a better relationship between the town and Shippensburg University: *“more collaboration between the community-at-large and the University.”*

Lack of Youth Activities and Community Center/Youth Center: Respondents identified the lack of after-school programs and evening and weekend activities: *“Lack of...things for teens to do outside of school and on weekends. There is not one single hangout spot in town.”* The shortage of youth programs in the Shippensburg area appears to be a concern for many residents, with the most common replies identifying that there is *“nothing for the youth to do”* and calling for *“activities for youth.”* Respondents also stated the need for *“youth non-sport activities,”* too.

Infrastructure: Respondents critiqued three main areas: the conditions of the roads, the downtown, and the school facilities. *“Roads. They are in terrible shape. Infrastructure!!!!”* Many respondents identified that downtown there are *“too many empty buildings, need more business”* and the downtown needs more businesses to *“encourage community vibrancy and pride.”* Lastly, respondents identified the school facilities as needing repair: *“outdated schools and facilities.”*

What is the biggest strength in Shippensburg?

Sixty percent of respondents provided a reply to this question. The following chart presents those who responded to this question about Shippensburg’s biggest strengths.

Biggest Strength in Shippensburg	Number	Percent
Sense of Community <ul style="list-style-type: none"> • Community members willing to help each other • Friendly community/neighbors • Small-town feel • Close-knit community 	81	32.0%
Education (Public Schools and Shippensburg University) <ul style="list-style-type: none"> • Educational system/Schools 	42	16.6%

Biggest Strength in Shippensburg	Number	Percent
<ul style="list-style-type: none"> • Access to education • Shippensburg University 		
Small Town Size	19	7.5%
Low Crime <ul style="list-style-type: none"> • Safety • Safe environment • Low crime rate • Town well monitored 	15	6.0%

Following are some quotes that highlight the larger themes discussed in the surveys relating to the biggest strength of Shippensburg.

- **Sense of Community:** Many survey respondents identified sense of community as a strength of the Shippensburg area. In particular, many found the rural location, small population, and *“close knit community”* as positive attributes. *“I think the community is close, everyone is kind and involved in many organizations.”* Another respondent was able to summarize it this way, *“The people. If you know anyone who’s lived here most of their life, they are great people and love this town. They are also the first [to] rally around those who are hurting.”*
- **Willingness of Community Members to Help Each Other:** Respondents felt that when a community had a problem or need that residents rallied provide help, *“community coming together when there is someone in need.”*
- **Shippensburg University:** Some respondents indicated Shippensburg University as an asset to the community, as *“it helps to raise the overall level of education within Shippensburg”* and *“Luhrs [Performing Arts Center] brings culture to the town.”*

Almost 15% of individuals identified other strengths within Shippensburg such as:

- **Proximity to Amenities:** close to physicians, stores, restaurants, and banks, strategic location, parks, access to highway and turnpike, Wal-Mart, location between Harrisburg, Washington D.C., and Baltimore
- **Access to Food Resources:** Shippensburg Produce and Outreach, church meals, food pantry, outreach programs for hunger, King’s Kettle, churches providing community meals,
- **Social Activities:** churches, Shippensburg Public Library, good fellowship in all the churches, sports
- **Social Services:** Katie’s Place, two county program access, religious groups who have free meals/money for gas/rent, number of social service agencies
- **Senior Services:** Brank Creek Place senior center
- **EMS, Fire station/Fire Fighters, and Police Station/Police officers.**

Comparison of 2014 and 2019 Community Assessment

As mentioned previously, the 2019 Community Assessment survey was similar to the 2014 Community Assessment in order to allow for comparison between the two assessments. Both assessments identified safety and the educational institutions in Shippensburg as strengths. The 2014 assessment identified “community cohesion” as a strength whereas in 2019, “sense of community” was identified. The 2014 assessment also identified church involvement in community and a large young adult population as a strength. Food resources such as community meals and food banks were highlighted as a strength in the 2019 assessment. Challenges were similar in both years with access to affordable mental health services as one of the top concerns as was the lack of youth programs and services. The 2014 assessment identified poverty and homelessness as another challenge and housing and social cohesion was identified in the 2019 assessment as challenges. In both assessments, transportation was mentioned frequently as a common barrier to meeting unmet needs.

Table 12. Comparison of Strengths between 2014 and 2019 Community Assessment

2014 Strengths	2019 Strengths
Safety	Safety
Community Cohesion	“Sense of Community”
Educational Institutions	Educational Institutions
Church Involvement	Food Resources
Large Young Adult Population	High School Graduation Rate
Lower Unemployment Rate	

Table 13. Comparison of Challenges between 2014 and 2019 Community Assessment

2014 Challenges	2019 Challenges
Mental and Physical Health Services	Mental Health Services
Youth Programs and Services <ul style="list-style-type: none"> • After-school activities • Community center • Services specific to youth 	Youth Programs and Services <ul style="list-style-type: none"> • After-school activities
Poverty and Homelessness	Housing
	Social Cohesion
<i>Barrier to Meeting Unmet Needs: Transportation</i>	

While similarities and differences between the two assessments can be cautiously drawn, one must be cautious in saying there is “proof” of progress in meeting a need or not meeting it in the past five years. Also, as the community survey was not selected randomly either time, one must be cautious in comparing the two assessments with each other as the demographics for each survey sample was not an exact representation of the Shippensburg Area. They also varied in that the 2014 sample had a higher percentage of low-income respondents and the 2019 sample had a

higher percentage of wealthy respondents. A comparison of demographics can be found in the Appendix.

Comparison of Satisfaction and Importance Rankings

A table with all of the satisfaction and importance rankings for 2014 and 2019 can be found in the Appendix. The following tables are a summary of the top areas of satisfaction and dissatisfaction for 2014 and 2019. Satisfaction remained the highest with community safety and quality of early childhood education in 2014 and 2019. Areas of dissatisfaction were different between 2014 and 2019, partially because some of the items were not included in both years. In 2014, areas of dissatisfaction were centered on youth services. However, in 2019, dissatisfaction was highest with availability and affordability of mental health services. The 2014 and 2019 both identified available medical services and quality early childhood education as most important. In 2014, all areas of importance had a mean score of 3 or above indicating that the item was important (unimportant is a mean score of 2 or lower). In 2019, only one item had a mean score lower than 3, indicating some sense of unimportance: services to treat gambling addiction. The following tables are the highest and lowest areas of satisfaction and importance for the 2014 and 2019 survey. A complete list of the rankings for the 2014 and 2019 community assessment is in the Appendix.

Table 14. Comparison of Areas of Satisfaction between 2014 and 2019 Assessments

Area of Satisfaction	2014	2019
Community Safety	M = 3.87 (SD = .68)	M = 3.73 (SD = .77)
Access To Quality Housing	M = 3.75 (SD = .86)	Not Included in Survey
Quality Of Early Childhood Education	M = 3.72 (SD = .90)	M = 3.81 (SD = .82)
Efforts To Improve Literacy	Not Included in Survey	M = 3.64 (SD = .86)

M = Mean; SD = Standard Deviation

Table 15. Comparison of Areas of Dissatisfaction between 2014 and 2019 Assessments

Area of Dissatisfaction	2014	2019
Availability of Indoor Recreation Facilities	M = 2.67 (SD = 1.01)	Not Included in Survey
Availability of Shelters for People who are Homeless	M = 2.76 (SD = 1.08)	Not Included in Survey
Services Specific to Youth	M = 2.97 (SD = .97)	Not an Area of Dissatisfaction
Availability of Supervised After School Youth Activities	M = 2.98 (SD = .98)	Not an Area of Dissatisfaction
Services For People who are Re-Entering the Community after Incarceration	Not Included in Survey	M = 2.98 (SD = 1.07)

Area of Dissatisfaction	2014	2019
Availability of Mental Health Services	Not an Area of Dissatisfaction	M = 2.98 (SD = .95)
Affordability of Mental Health Services	Not an Area of Dissatisfaction	M = 2.96 (SD = .95)

M = Mean; SD = Standard Deviation

Table 16. Comparison of Areas of Importance between 2014 and 2019 Assessment

Area of Importance	2014	2019
Affordable Medical Services	M = 3.61 (SD = .55)	M = 3.54 (SD = .63)
Employment Opportunities For Adults	M = 3.57 (SD = .62)	Not a Top Area of Importance
Quality Early Childhood Education	M = 3.53 (SD = .60)	M = 3.57 (SD = .67)
Supervised Afterschool Youth Activities	Not a Top Area of Importance	M = 3.52 (SD = .66)

M = Mean; SD = Standard Deviation

Table 17. Comparison of Areas of Least Important between 2014 and 2019 Assessment

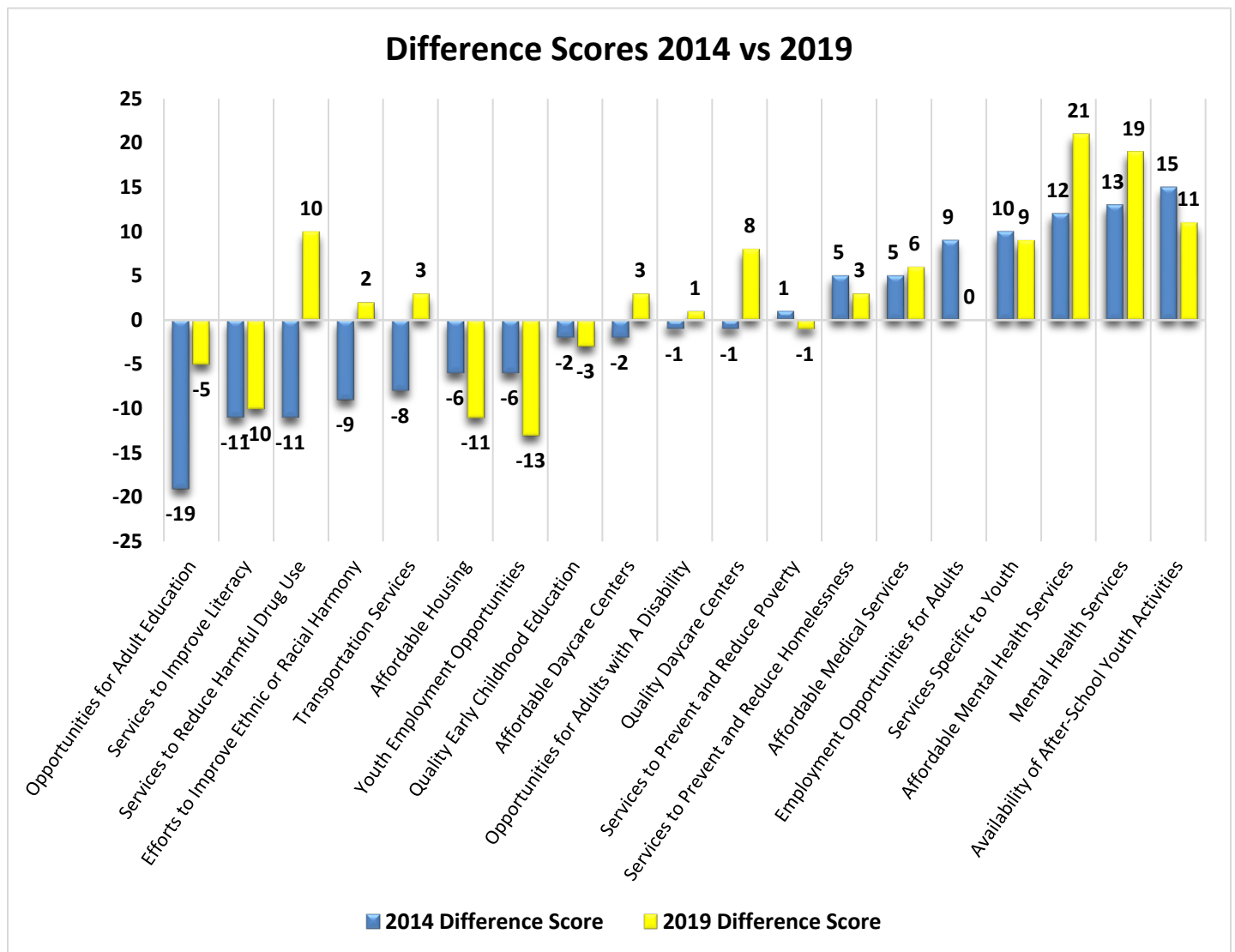
Area of Least Importance	2014	2019
To Improve Ethnic and Racial Harmony	M = 3.22 (SD = .71)	M = 3.25 (SD = .77)
Support Groups	M = 3.25 (SD = .64)	Not Included in Survey
Opportunities for Adult Education	M = 3.26 (SD = .65)	M = 3.17 (SD = .68)
Treat Gambling Addictions	Not Included in Survey	M = 2.82 (SD = .91)
Transportation Services	Not an Area of Least Importance	M = 3.17 (SD = .77)

M = Mean; SD = Standard Deviation

Comparison of Identified Needs

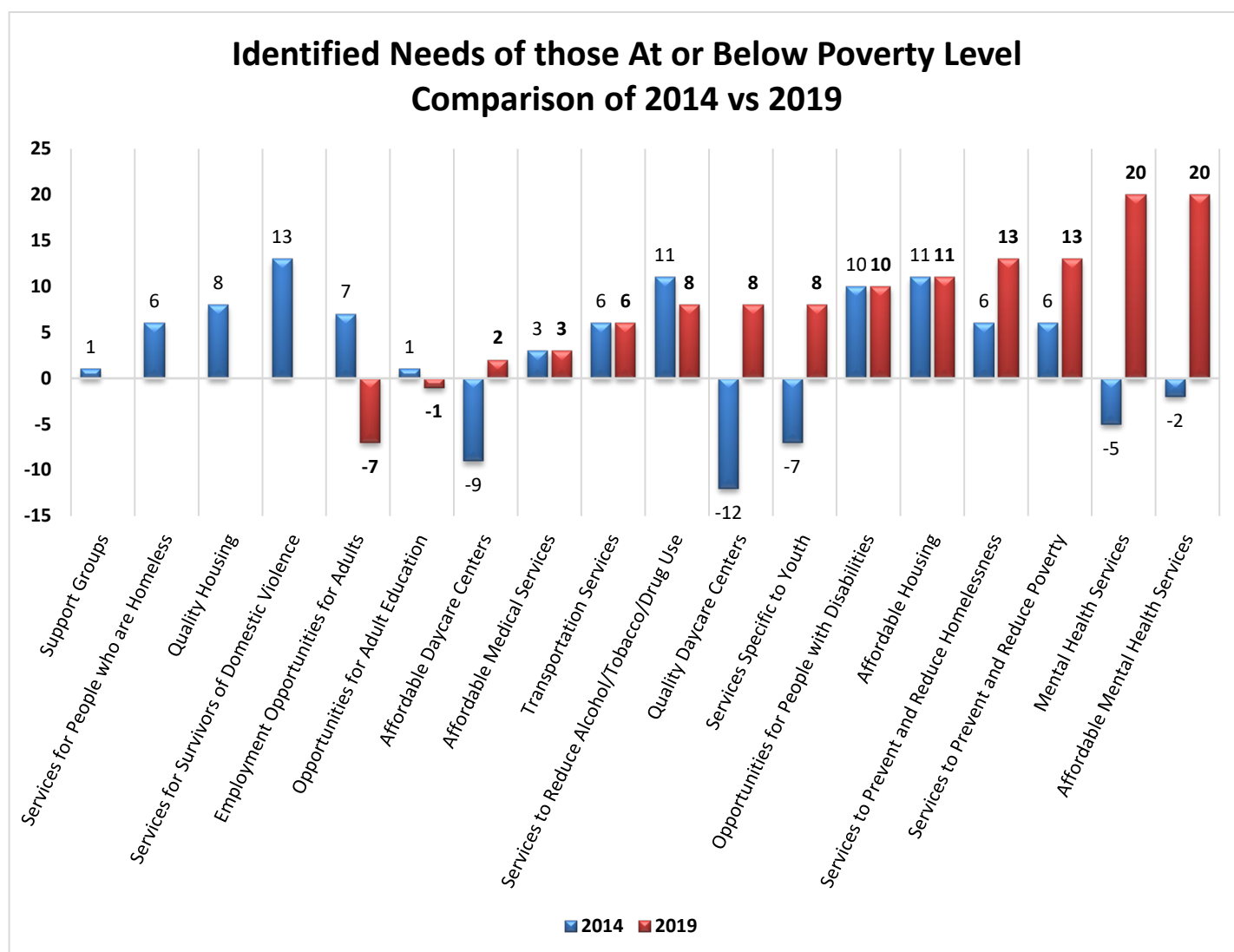
In comparing the needs that were identified in the 2014 and 2019 assessment, the top three needs remained the same: affordable mental health services, mental health services, and availability of afterschool youth activities. Only two identified needs in 2014 did not rank as a need in 2019: employment opportunities for adults and services to prevent and reduce poverty. However, five needs in 2019 were not identified as needs in 2014: services to reduce harmful drug use, quality daycare centers, efforts to improve ethnic or racial harmony, transportation services, and affordable daycare centers. Of note is the need score of 10 for services to reduce harmful drug use in 2019 but in the 2014 assessment it was -11. This increase in concern about drug use was also reflected in the other data collection methods in the current assessment. It is also interesting to note that youth programming and services are still an identified need even if the need score is slightly lower.

Figure 8. Difference in Rating Scores between 2014 and 2019



The 2014 survey had 109 respondents at or below the poverty level and the 2019 survey sample had 62 respondents at or below the poverty level. Mental health services and affordable mental health services remain one of the top identified needs for this group of respondents, as does items related to youth for both years. Affordable, quality daycare centers did not rank as a need in 2014 (Need= -11 (affordable daycare), -13 (quality daycare)) but did in 2019 (Need= 2 (affordable daycare), 8 (quality daycare)). The following chart compares the 2014 and 2019 identified needs of respondents at or below the poverty level. The first four items were not included in the needs analysis in the 2019 assessment.

Figure 9. Comparison between 2014 and 2019 Identified Needs of those At or Below Poverty Level



Community Strengths

In looking at the community assessment as a whole, both assessments identified satisfaction with community safety as a strength of the Shippensburg community. Educational institutions such as the school district and Shippensburg University were frequently mentioned as a strength, too. A strength in the 2014 assessment was community cohesion. Community cohesion is the aspect of togetherness and bonding exhibited by members of a community. It is the need for strong and positive relationships between people from different backgrounds, tackling inequalities and developing a positive climate of opinion to support diversity. In 2019, community cohesion was not identified as a strength but participants felt they shared a strong “sense of community.” The difference is that a “sense of community” refers to one’s sense of belonging in one’s own social group such as those in their neighborhood, their church, their friend-group or work-group. It does

not refer to an intermingling between social groups or working together on addressing larger community issues outside of one's own group.

Other areas of strength that differed between the two assessments were the church's involvement in the community, large young adult population, and an unemployment rate lower than the state's in the 2014 assessment. In the 2019 assessment, the area churches were mentioned in conjunction with the many food resources that the community provides, specifically the community meals available most nights of the week. Shippensburg's high school graduation rate is another strength which has improved since the last community assessment and is now higher than the state's average and Chambersburg Area School District. While Shippensburg still has a large young adult population, it did not come up in the 2019 assessment as a strength.

Community Challenges

A lack of mental health services that are available and affordable continue to be a primary community challenge for all respondents but also those at or below the poverty level in 2014 and in 2019. Respondents stated that not only was there a lack of providers but also providers that accepted their insurance. The lack of after-school activities for youth was identified as a significant challenge in both assessments. However, in 2014 the lack of a youth community center and services specific to youth were also included in the top community challenges. Another commonality is that transportation continued to be a barrier to meeting unmet needs in both of the assessments.

One of the main differences between the two assessments for challenges was the lack of affordable housing identified in the 2019 assessment. While it was not a need for all respondents in 2014 or 2015, those at or below the poverty level did rank it as a need. In the 2019 focus groups, it was mentioned in all the focus groups and in 60% (N=6) of the stakeholder interviews. Services related to reducing poverty and homelessness was not perceived as much of a challenge in 2019 as in 2014. Since 2015, the poverty rate for Shippensburg has started to trend downward, decreasing 4.8%. Homelessness and the lack of a shelter in Shippensburg was a common theme in survey and focus groups in 2014. While it was mentioned in the 2019 assessment, it was not one of the more prevalent themes. The 2014 assessment also reported a higher level of confusion about social service programs such as what was available, how to receive them, and eligibility that was not as evident in the 2019 assessment.

Another difference was the lack of social cohesion identified in the 2019 assessment. Social cohesion is similar to community cohesion but it does not focus on inequalities or supporting diversity. "Social cohesion refers to the strength of the relationships and the sense of solidarity among members of a community."³² While respondents reported that a strength is the "sense of

³² Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Social Cohesion. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/social-cohesion>

community”, the social cohesion is low when moving between social groups and between institutions (government, school district, Shippensburg University). Focus group participants also said that they felt unheard and that their opinions did not matter in the community at large, another indicator of lack of social cohesion.

Progress Over the Past 5 Years

Lastly, the 2014 assessment identified five “next steps” or goals that the SCRC would focus on in response to the results of the assessment:

- Bring together interested participants, through SCRC Committees, to:
 - Increase access to youth services
 - Increase access to social services
 - Develop ongoing resources and research to support social services & youth services
- Secure resources for SCRC Director
- Continue to share results

In response to increasing access to youth services, the SCRC, in conjunction with the Shippensburg University’s Counseling Department, started a middle school support group and a high school support group was added this year. The Teen Leadership Club continues to flourish in the middle school and one started in the high school this year. In 2018, the Teen Leadership Camp was reinstated and incorporated into the Summer Lunch Program. The Summer Lunch Program has grown exponentially and now offers 7 weeks of breakfast, lunch, and programming, averaging 55 children each day. Also, in 2018, the SCRC was awarded the Communities That Care grant, an initiative focused on identifying the risk and protective factors of youth and using evidenced based programming to increase protective factors and decrease risk factors.

The addition of two staff members has allowed for more partnerships with Franklin County and Cumberland County in which the needs of Shippensburg are being recognized more. New medical specialists and services, including mental health providers have come to Shippensburg, too. Also, the Raider Regional Transit has added a fixed route in Shippensburg to assist in addressing the transportation needs.

The SCRC continues to leverage partnerships and apply for funding to support social services and youth services. Their partnership with Shippensburg University has allowed for consistent evaluation of programming and community needs that have assisted them in their efforts to secure resources. Most notably, the Communities That Care grant was awarded in part by showing SCRC’s commitment to Shippensburg’s health and well-being through their procurement of the Healthy Shippensburg project and by providing data from their current programming showing the need in Shippensburg for youth programming focused on protective factors.

The SCRC hoped to secure resources for an SCRC Director which would have been the first paid staff of the organization. Though through the Communities That Cares grant and the Healthy Shippensburg Project grant, a Community Youth Mobilizer and a Community Health Mobilizer were hired. Also, a graduate assistant was provided with the CTC initiative. Since both Community Mobilizers hold Master of Social Work degrees, master and bachelor social work students are now interning each academic semester with the SCRC. Thus, instead of one staff member, two full-time staff with multiple students assisting them have significantly increased the work capacity of SCRC.

Lastly, the SCRC continues to share the results of its work with its partners and the community. In 2017, a new website became operational to help increase SCRC's visibility but also to share its work with the community. In 2018, a Technical Writing Intern assisted in creating an annual report to help share SCRC's progress and news in a more professional manner. The SCRC continues to share its results in its reporting and through student research projects, aiming to be transparent in all its endeavors.

FOCUS GROUPS OF COMMUNITY MEMBERS

FOCUS GROUPS OF COMMUNITY MEMBERS

Summary

The Shippensburg Community Resource Coalition conducted five focus groups to obtain a better sense of the community's perspective on the health of the Shippensburg community in regards to nine topics: recreation/socialization, employment, food, housing, education, health care, mental health, crime and safety, discrimination, and social cohesion/community unity. The last question was aimed at investigating the participants' opinions on the biggest challenges or problems in Shippensburg. Following are the main questions asked in each focus group:

- Question 1: Where do you go for recreation and/or to socialize?
- Question 2: How do people find out where to go for help?
- Question 3: What are the strengths and weaknesses of employment in Shippensburg?
- Question 4: What are the strengths and weaknesses related to food in Shippensburg?
- Question 5: What are the strengths and weaknesses of housing in Shippensburg?
- Question 6: What are the strengths and weaknesses related to education in Shippensburg?
- Question 7: What are the strengths and weaknesses of health care in Shippensburg?
- Question 8: What are the strengths and weaknesses of mental health care in Shippensburg?
- Question 9: What is crime and safety like in Shippensburg?
- Question 10: What is the extent of discrimination in Shippensburg?
- Question 11: To what extent do you feel like your voice and opinion matters in the community?
- Question 12: What do you think are some of the biggest challenges or current problems in your area?

A description of the methodology and a summary of the findings for each focus group question is below.

Methodology

A total of five focus groups were conducted between October 30, 2018, and November 7, 2018. The focus groups were conducted by Shippensburg University social work students, who were supervised by the SCRC Board Chair and Community Health Mobilizer.

To prepare for the focus groups, the SCRC Chair and the Community Health Mobilizer worked with Shippensburg University social work students to develop a facilitation guide with 12 key questions to explore participants' opinions surrounding 10 areas related to the social determinants of health in the Shippensburg area. The facilitation guide used for the focus group is included in the Appendix. Target audiences selected for the focus group included Shippensburg neighborhood community centers, recipients of social services including food pantries, and community members. Invitational flyers promoting the focus groups were sent out

via social service agencies stating the date, time, and location. A \$10.00 grocery store gift card was provided to participants who attended. The five focus groups each lasted between 1 hour to 1 hour 20 minutes and were held at several social service programs. Twenty-five individuals participated in the five focus groups and 3-4 students were assigned to facilitate and record each session.

Each focus group was recorded and participants signed a consent form at the beginning (see Appendix). Participants were aware that their input would be confidential and summaries would be presented.

After the focus groups were completed, the students transcribed their recordings. Social work students presented their findings and recommendations for each focus group. These presentations were helpful in creating this report. The results are first presented in this section by each question.

Results

The focus group sessions were transcribed and themes identified using open coding. The common themes and samples of responses are presented for each question.

Question 1: Where do you go for recreation and/or to socialize?

At least some members in all five focus groups stated that most of their socialization happens at church. Participants mentioned being involved in church activities outside of Sunday morning such as weekly Bible studies, prayer meetings, and helping with the community meals. Another theme was socializing with other residents in their housing building. Another theme was socializing at the community meals. Respondents go early so that they have more time to socialize. Lastly, socializing with other parents when their children have sports practice or games was a common response.

The main barrier to recreation was the financial cost to participate in activities including children's ability to participate in organized sports. Another common theme was the lack of a community center or recreation center especially in the winter months when the weather does not allow for outside activities. While people mentioned taking their children to the local parks, transportation to the parks was a barrier. Also, some parents commented that their children did not want to play outside or were too young to walk the distance to the park. Participants also said that there were not many places to go for entertainment, regardless of one's age.

The following are quotes from focus group participants regarding their recreation and socialization:

"No community center, that doesn't give people a whole lot to do...bowling alleys, I'd like to see for the kids, something for the teenagers to do. They don't have anything to do so you know what that leads to, things they shouldn't be doing."

“And there's no place to eat in town here. You gotta go out of town if you really want something good to eat...Chambersburg or Carlisle.”

“Recreation... (pauses) I try to get my kids to the park but it's a very long walk (laughs) cause I don't drive so I try to get them to the park when it's like springtime, summertime. I don't go now, it's too cold. Um, and where I go to socialize? I just socialize in my apartment. (pauses) So yes, I socialize in my own apartment building cause there's many people.”

“I contacted the (name of agency) over here and basically anything that I do there is going to cost me money so I can't afford to socialize ... That's pretty sad.”

“We go around to the church that have the meals and the snacks. We get there early so we can sit and talk.”

Question 2: How do people find out where to go for help with the topics on this paper? (NOTE: “this paper” refers to a handout that listed each of the topics for the focus group – socialization, employment, etc. See Appendix.)

Word of mouth was the most stated source for finding help among all the focus groups. Other places that were mentioned include church, food pantries, Katie's Place, schools, case managers, the internet, and social media. For information about job openings, people listened to the Shippensburg Radio at noon and read the local newspaper, The News Chronicle. When asked what could be done to help people find out about services, participants said to advertise more such as in the newspapers, billboards, flyers in the mail and the Franklin Shopper. Also, focus group members suggested that flyers be hung up where *“the poor would be able to see. Laundromat bulletin boards...over at Katie's Place.”* It was also brought up that computer skills could be limited so information should be available places other than online.

The following are quotes from focus group participants in response to the question, “How do people find out where to go for help?”

“Pretty much church, Head Start, and sometimes, if you go to the pantry or to where you get the produce. What is that called?” “SPO. Katie's Place.”

“I usually hear it from work or church or the internet and social media.”

“Just by word of mouth.”

Question 3: What are the strengths and weaknesses of employment in Shippensburg?

A common theme was the need to need to commute outside of Shippensburg to secure a job above minimum wage. Carlisle was the most common place mentioned with more employment opportunities. Residents perceive the job requirements in Shippensburg as requiring a higher level of education than other towns. They state *they “can't get a job without a high school*

diploma” and “jobs in Ship require a higher level of education.” While some participants brought up the warehouse jobs in the area, the hours and mandatory overtime for a wage that still was not enough to pay all the bills are drawbacks to working at them. Barriers to job opportunities include lack of employment services to assist residents with obtaining employment, lack of public transportation to consistently get to work, lack of services to help those with a criminal background obtain employment, and lack of daycares that accommodate 2nd and 3rd shift employees. Residents must travel to Chambersburg or Carlisle to CareerLink for employment services. Participants of the focus groups identified the following employment places: warehouse jobs in Carlisle, orchard jobs, Wal-Mart, Taco Bell, P&G in Shippensburg, Shippensburg Cold Storage, waiting tables, and mill jobs. Respondents identified the following programs for receiving help with employment: CareerLink in Chambersburg and Carlisle, an employment program for people who are 50 years old and over, and the welfare office (Department of Human Services).

The following are quotes from members in the focus groups regarding employment in Shippensburg:

“There are some jobs here but they don't pay you enough when you stop and consider how high the housing is and how high the groceries are and so forth.”

“One thing I think is minimum wage, a lot of the restaurant workers, I think work for minimum wage. Hard to raise a family and pay your bills.”

“If you have the education you can get it [job], just because you don't have a diploma saying you can't do the work, but you can.”

“And in places of employment if there's a family member that's sick, a lot of places, a lot of places, some of them don't offer family leave for that. That's the other thing.”

“Then they also say if you're sick, stay home.”

“And if you do, you get written up for it. Then you get so many points, you get, you're out the door.”

“Childcare is definitely an issue in this area, especially finding an evening daycare like a daycare that is open like for second shift people or even third shift people because there's a lot of third shift people that have jobs that have children.”

“Because the honest to god truth is, if you aren't making 22 dollars an hour at a job in PA, you're not living comfortable, or even close to it.”

Question 4: What are the strengths and weaknesses related to food in Shippensburg?

The majority of focus group participants felt that there were a variety of sufficient food resources for residents including food pantries and free community meals throughout the week. Two barriers to accessing food resources are a lack of transportation and the time that food pantries

and community meals are offered. Those who work until 6 pm, a common warehouse work schedule, are not able to access the food pantries and the free meals as most are closed by 6:00 pm or 6:30 pm. There is limited monthly delivery services for residents who are unable to pick up their food during distribution times. Also, participants felt that the advertising of food resources could be improved so more people are aware of the food resources available in Shippensburg. A common theme in the focus group was problems that participants had with their Supplemental Nutrition Assistance Program (SNAP) benefits. They talked about how working or receiving a raise significantly cut the amount of assistance they received, stating it was a *“vicious cycle.”* Participants also shared struggles with the welfare office (Department of Human Services) about the length of time to receive SNAP benefits and lost paperwork that resulted in not receiving them for a certain amount of time. Some participants perceive a local food bank as having limited quality food and inconsistencies in the types of food that participants receive.

Food resources mentioned by participants included Aldi grocery store, Giant, Weis Markets, Wal-Mart, Shippensburg Produce and Outreach, Katie’s Place, King’s Kettle, Oasis of Love bread, Saint Paul’s Church in Chambersburg, King Street Church in Chambersburg, Orrstown Church, Shippensburg University’s *“leftover food”* (referring to the Food Recovery program), and Big Springs church. Places that serve community meals at churches that were mentioned include Memorial Lutheran Church, Christ United Methodist Church, Shippensburg First Church of God Annex Building, Messiah Church, and Church of the Brethren on Washington Street. The welfare office, a service on Prince Street, and a service in Big Springs were also mentioned in conjunction with food resources.

The following are quotes from members in the focus groups regarding the strengths and weaknesses of food resources in Shippensburg.

“Food! No one in Shippensburg goes hungry. That’s one good thing about Shippensburg and one reason why I came back.”

“And there’s [food pantry] and they give out huge amounts of food. If you don’t mind eating what they give out. I’ll just leave it at that but, um, no, not hungry. There are no hungry here. Basically, you could be poor live on the streets and you can still have something to eat.”

“The University gives out leftover food that they don’t sell that day and takes it to different places and has it boxed up in little containers and you can pick what you want from what they have. People can pick and take that home.”

“The food situation, there’s a lot of people that have a hard time getting stuff to eat in this town...they don’t know anything about it and they don’t want to be, ah, embarrassed because they are getting help.”

“I only make 800 some dollars every two weeks. That’s my rent. The next check, that’s my car insurance, my electric, and my phone bill. Then after that, getting food is reasonably impossible.”

Everyone's like "well, why you don't go to the grocery store and buy food?" Well, one, half the time I don't have time to cook and for two, it's just cheaper to go to McDonald's and just get, ya know, three dollar burgers and feed my kids that way. Like it's not healthy or good but to buy five pounds of hamburger is ten dollars."

"I mean, just keep the bare necessities in the house. You keep milk, bread, eggs, some lunch meat, and that's pretty much what you go with."

Question 5: What are the strengths and weaknesses of housing in Shippensburg?

All five focus groups reported a lack of affordable, quality housing for Shippensburg residents and families. Respondents stated that the landlords cater to Shippensburg University students so that they can charge higher rental fees and do not want to rent to families. The housing options that are affordable are *"not safe to live in," "not sanitary,"* and *"not quality homes."* Some focus group members shared that they had had issues with vermin, cockroaches, and bed bugs. They also reported issues with plumbing and water. When seeking out help from the landlords for the previously mentioned concerns, the landlords are reported as being *"unhelpful"* and *"slumlords."* Another barrier to obtaining housing is that most landlords run background checks and credit checks which make some individuals ineligible to rent. While some services were mentioned that provide housing assistance, it is limited assistance. Organizations and services mentioned regarding housing include Craig's List, Zillow, Salvation Army, Oasis of Love Church, Christ Among Neighbors, *"North Star Properties or something,"* HUD housing, Episcopal Square, the Cottages, and the Welfare Office.

Another recurring theme related to housing was the lack of a shelter in Shippensburg. There is no overnight shelter and people have to go to either Carlisle or Chambersburg but reported that both of them are often full. The senior center in Shippensburg is open in the winter for emergencies. *"They call us [senior center] a warm house or something."*

The following are quotes from members in the focus groups regarding the strengths and weaknesses of housing in Shippensburg.

"The housing is terrible. It's either, you know, um, something you don't want to live in or something you can't afford to live in. Um, you have nothing."

"It's hard. People you know up in the higher class don't want to see it or don't want to help us and here we are on the low class and we are struggling. We are struggling every day."

"I can't afford my property tax. I think that's ridiculous. I'm 85 going on 86 and I still have to pay property taxes and I'll tell you I don't know where I'll get my money for the 2019 taxes. So I have to fold up house and get out and try and rent. If I rent for \$800 dollars a month, it would be more than my taxes."

“It’s ridiculous to pay, to find a place here in town is here \$600 or \$650 a month for 2 bedroom that includes everything and it’s nearly impossible. You have to pay, well, I pay \$800 in rent and what I can’t get, my husband has to pull the slack of. We have to [pay] water, sewer, and trash separately. The electric plus mow our own grass and shovel our own sidewalk. It’s impossible. They expect us, our landlord gets \$800 of free money that doesn’t fix the place up. We’ve complained about it. It’s pretty much a slumlord... it’s very difficult for the end of the month. We struggle very much for food and with everything else.”

“Not having anything against y’all, college students, but when I was living with my sister I was checking to see if I could [afford] a place for myself and my boyfriend and everywhere I go, they only housed college students. For a family like me and my boyfriend to have [to] find a place cuz, once again I don’t have anything against you, college students, pretty much every place is catering to college students.”

[Referring to Veterans and the elderly]... “Why isn’t there housing or some kind of temporary shelter to help them get on their feet and teach them and show them... But there’s a lot of homeless who need a roof overhead, a warm place to take a shower, warm place to sleep.”

“I mean we have no shelters for people in Shippensburg. I mean, ya, have, maybe one in Chambersburg but it’s full most of the time. We have a facility in Carlisle and it’s full most of the time. I mean, there is no in-between.”

But, um, in the wintertime, we are opened for emergencies... The people off the streets can come in here and get warm.” [referring to senior center] “Yeah, we’re, I don’t know, they call us a warm house or something... Anybody can come in here, no matter what age. Yeah, we don’t turn people away.”

Question 6: What are the strengths and weaknesses related to education in Shippensburg?

The participants had opposing views of the educational opportunities in Shippensburg. Some residents feel that the schools provide quality education with sufficient services for students that require extra help. However, other residents believe that there is a lack of quality education especially for students requiring special education services and alternative schooling. Some participants with children currently attending school expressed concern over the material being taught. They felt that their children were required to learn too much information in a year and harder concepts at younger grades. They reported that their kids were “*struggling*.”

There were several mentions of the desire for Shippensburg University to do more to support the educational needs of the community such as tutoring, literacy programs, and GED classes. It was suggested that GED classes could be offered at the library. Participants also wanted classes to learn about computers and classes to teach people how to obtain better jobs and then help them get a job.

Schools mentioned in the focus groups were Vo-Tech, Shippensburg Area School District (SASD), Nancy Grayson school, and alternative schools.

The following are quotes from members in the focus groups regarding the strengths and weaknesses of education in Shippensburg.

“I think the education opportunities in Shippensburg are, are, more diverse than they were when I went to school.”

“The education around here is really good, Shippensburg has (pause) title one schools.”

“...they’re a title one school, and to keep their title one funding and keep that money, they have to push so much stuff. Unfortunately, it’s coming down on some of the kids that just can’t keep up, and there’s not a whole lot they can do for them except keep pushing them through.”

“The GED thing...if it was where they could go. Like maybe the library...It would help the lower class. And I don’t hear or see anything here in this town that offers that.”

“See like you guys on campus [referring to college students] you want to be teachers, come out and help us...That’d be cool...That’d be awesome...Not outside of town...in town, the library.”

“Nowadays they do not focus on math with you when you have an ADHD kid who can’t understand math or can’t think outside the box. I’ve had problems trying to get my daughter extra math help.”

Question 7: What are the strengths and weaknesses of health care in Shippensburg?

Lack of healthcare services in Shippensburg and difficulties accessing those services were recurring themes in all of the focus groups. Participants identified the Shippensburg Health Center on Walnut Bottom Road as a place that has primary care physicians, x-rays, and blood work. In order to receive healthcare services besides a primary care physician (PCP), residents must travel to Chambersburg, Carlisle, or other areas to receive care. Specifically, participants identified the lack of a pediatrician in Shippensburg or other specialists besides one. Some respondents also stated that they would rather go to Urgent Care than a primary care physician as it was easier and the wait to see a PCP is long.

Barriers to receiving medical care include lack of transportation, financial means, and providers that do not accept specific types of insurance. As previously mentioned, there is limited public transportation in Shippensburg. While people who receive Medicaid and Medicare can use the RabbiTransit bus for medical appointments, the RabbiTransit may take up the whole day and must be scheduled by noon the day before an appointment. Financially, those who do not receive Medicaid or Medicare Part D Extra Help, struggle to pay for their co-pays for physician visits and medications. Medicare does not cover any dental services or eye exams. While Medicaid does cover dental services and eye exams, there are no dentists in Shippensburg that accept

Medicaid. Participants said that there are very few physicians that accept their insurances in Shippensburg. They have to travel to Carlisle, Chambersburg, or further to see physicians accepted by their insurance. Another concern is the general health of Shippensburg residents, specifically those with chronic conditions such as diabetes.

Organizations and services mentioned include Urgent Care, Keystone Behavioral Health (in Chambersburg), Etter Health Center (Shippensburg University Campus), Summit Primary Care, Ludwick Eye, orthopedic specialists Dr. Lyons and Dr. Richardson, social worker at Summit, Dr. Robertson, neurologist, OB/GYN, the “hospital,” “clinics,” and physicians (names not given).

The following are quotes from members in the focus groups regarding the strengths and weaknesses of healthcare in Shippensburg.

“About a year ago I woke up in the night with symptoms of a heart attack and it frightened me and, I, it was 2 a.m. I didn’t have anybody to wake up, so I called an ambulance and [it] was a busy night. So, they had to get an ambulance from some other community. I was billed \$1600 dollars.”

“If you’re on Medicaid and Medicare which I am, okay, I had two doctors to choose from and neither one of them helped me.”

“Yeah, I take the Rabbit [RabbiTransit]. But you got to schedule a day before twelve o’clock. They don’t bother with you. Yup. And it takes them forever to pick you up. Both ways. And you’re on that bus. I was on the bus one day for over two and half hours just to get home.”

“Prescriptions are really ridiculous. The prices of them, you can call a doctor and you could wait two months to get in, in this area.”

“Don’t get me wrong, the doctors here in Shippensburg up here at the summit place are good. They can do what they can do but they want to send you out to other doctors’ offices but you can’t get there if you don’t drive. Like to have a special test done. So it’s like, okay, what are you supposed to do.”

“I couldn’t tell you the last time I’ve been to see a doctor.”

“The social worker over at Summit at cancer was excellent. I got to apply, and they wrote off the rest of his payment as hardship because it was only, both were disabled. They were excellent there.”

Question 8: What are the strengths and weaknesses of mental health care in Shippensburg?

Of the mental health services offered in Shippensburg, participants felt that they were limited and unaffordable. In order to receive mental health services, specifically psychiatry for

medication management and therapy, they have to go outside of Shippensburg to Chambersburg or Carlisle. One participant stated that they had to have their obstetrics/gynecologist give them a prescription for their anxiety medication due to the difficulties they had scheduling an appointment with a mental health provider. The lack of public transportation is again a barrier in accessing mental health services. Focus group members heard a new mental health office is opening in Shippensburg but *“don’t believe new office is coming to Ship” as they have been “let down in the past.”* Some participants with children also expressed concern about their children being diagnosed with ADHD and being overmedicated.

The facilitators of the focus groups identified that some residents had a lack of understanding about mental health in regards to its prevalence in Shippensburg and services, *“There is no one we know that has mental problems or diagnosed with any”* and *“I haven’t heard anything about that.”* Services identified were Pathways Counseling and Keystone Behavioral Health, both of which are located in Chambersburg and accept Medicaid, Service Access Management, a provider in Mechanicsburg, *“rehab halfway house,”* and Growing Edges Counseling (a free community clinic at Shippensburg University).

The following are quotes from members in the focus groups regarding the strengths and weaknesses of mental health in Shippensburg.

“My [child] has to go to Chambersburg for her mental health also, and everything, everything is involving Chambersburg.”

“Mental health, it takes a bit of time to get in but you can.”

“There’s no place in town here for mental health.”

“We have no mental health facility.”

“The mental health to me, ties right in with it. But other than Growing Edges, I get no help with that at all.”

“There are no psychiatrists here as far as I know that would see me with my insurance. That’s why I found out about Growing Edges. I hooked up with them...but as far as actual psychiatrist that’ll see someone on Medicare and Medicaid here in Ship, doesn’t exist.”

Question 9: What is crime and safety like in Shippensburg?

Focus group participants were divided about the level of crime occurring in Shippensburg and their feelings of safety. Some respondents felt safe walking around town during the night while others expressed that it was unsafe to walk alone at night in Shippensburg. Those living on the outskirts of town or in more rural places expressed feeling safe at home. Focus group participants were also divided about the use of drugs and alcohol. While the majority shared their concern about the use of drugs, especially in the schools and at Shippensburg University, some felt that

Shippensburg was far enough away from bigger cities that it was not a problem. A strength of Shippensburg is that it has two police stations: Shippensburg University Police Station and the town's police station. But some respondents still felt that there was not enough law enforcement in Shippensburg. It was reported that different parts of town have more crime than others such as prostitution, drug dealing, and drug use. They also shared that things disappeared from their front porches and backyards. Participants felt that the police handle situations differently based on the people involved in the incident. Some residents felt that a *"good bit of the crime is due to college students."* Respondents identified the lack of after-school programming and community activities for youth as a cause of the crime, and stated that if there were more youth activities, they would have something to do and *"not get into trouble."*

The following are quotes from members in the focus groups regarding crime and safety in Shippensburg.

"It's safe but as long as you don't walk alone at night."

"Yeah, you don't walk at night. You're okay."

"I walk at night, I'm alright. Well sometimes with my dog (inaudible) (laughing) She thinks she's a big bad watchdog. Um, no, it's better than Chambersburg. It's, it's better than Carlisle. Um, I walk here at night. Now don't keep, uh, anything that cost a lot in your backyard. It'll disappear."

"So it's not too bad. On a scale of one to 10, I'd say it's about a four."

"Marijuana mostly and they sell it like where we live. We live here and there's a little alley way and then their house and they're known to sell. That's a high traffic for marijuana. People sell off their back porch and then you go across the street and ... drugs and prostitution."

"But at night, I feel safe coming and going from my house."

"Well, the crime in this town, there's nothing for the kids to do."

"Good bit of the crime is, now is the college kids."

"I feel safe. I really do."

Question 10: What is the extent of discrimination in Shippensburg?

Focus group members, overall, felt that while they faced various kinds of discrimination in Shippensburg, it was *"not as bad as some places."* A common theme in the focus groups was that residents needing social services felt discriminated against by Shippensburg University students. Elderly participants felt that college students discriminated against them. Also, when residents were standing in line for services outside of buildings, they reported that college students would give them *"dirty looks"* and say *"bad words"* to them. This name-calling, but not

by college students, was also expressed by a respondent who worked with clients with *“mental illnesses.”*

Racial discrimination and political discrimination were also identified by focus group members. Respondents said that not many *“blacks and Latinx live here,”* and *“biased people live here.”* They are “old school” in their beliefs and actions towards non-white residents. One participant said that they experienced political discrimination from Republicans as they are a Democrat. Also, participants felt that the Shippensburg University students are favored in the community and their needs are given preference over residents, especially with housing. Residents also felt that they were judged about their past including those with a criminal background even if they only had a misdemeanor.

When asked where focus group members went to report discrimination, they responded that they went to the police station, Carlisle, Chambersburg, or the *“people in Harrisburg”* referring to the Humans Relation Commission located in Harrisburg.

The following are quotes from members in the focus groups regarding the extent of discrimination in Shippensburg.

“It's not as bad as some places but it's bad.”

“Well, there aren't as many blacks here than Latinos. Umm, most people were white, uh, so you see more of that. And there are a lot of people here old school that don't like that, you know? I don't look it but I'm Indian. So if they, you know, there were some people here that knew that they wouldn't like that. You know what I'm saying? Um, yeah there are a lot of biased people here.”

“If I'm walking down the street, you know, maybe, maybe they've been drinking too much. Maybe not. Whatever...but they make remarks like, oh, ‘get out of the old lady's way!’ You know, or and then turn around and say something like, ‘We're students. Forgive us, we're students, You know? Well, how'd they know I wasn't a student?’”

“We get put down. We're called names because we're standing in line for food, right? Yeah. We get dirty looks, we get, you know, bad words said to us.”

“I used to have to work with the mentally ill. I used to take them out to restaurants, and you know, they can really get laughed at. You know, and...I've been made fun of because my race. Not here but different places. And you know I don't make fun of anyone. You know...but on the other hand, I can understand enough of a different language to know when they're saying things about me. You know, I don't respond. I keep going. But you know, there are some violent people in this town who have really negative attitudes.”

“Sometimes I think the doctors think if you are old, you are going to die soon anyway. So why bother with you. That's what I think.”

"I don't think there is any race discrimination. Nothing going on with the blacks and whites but I don't know. I am old. I know kids pick on one another. There are bullies."

"But it's not as bad as when I was small. Now we've got a bigger- like the college, there's more, more of them, more things going on with all kinds of races. So it's improving."

"My caseworker judged me right soon as they saw my felony and...I have to live with my felony for the rest of my life."

Question 11: To what extent do you feel like your voice and opinion matters in the community?

The majority of participants felt that their voices and opinions did not matter in the community. They felt under-represented in the community and that their opinion lacks weight in decision-making. They felt brushed aside, even to the point of not expressing their opinions at all because they felt it would not make a difference. Those that did report expressing their opinions felt that despite voicing their concerns and opinions multiple times, it was never taken into account or made a difference.

The following are quotes from members in the focus groups about whether or not they felt their voices were heard in the community and their opinions mattered.

"...I voice my opinion till all blue in the face and it's not gonna get me nowhere."

"No. You know why? No one cares."

"No one cares, especially if they don't have kids and it's not happening around them or somebody they know. Blind-sighted."

Question 12: What do you think are some of the biggest challenges or current problems in your area?

The lack of public transportation was identified as the biggest problem in Shippensburg followed by the lack of affordable, quality housing. Other challenges that were mentioned are the lack of doctors such as specialists and those that accept more insurances, employment opportunities with sufficient wages, and not enough stores and good restaurants. Comments related to transportation came up in every focus group, especially concerning residents' ability to get services such as medical and mental health appointments. Most participants only named RabbiTransit as an option for transportation. The Raider bus was mentioned but residents were not pleased that it only ran during Shippensburg University's academic calendar when school was in session. One participant talked about the "blue line:"

It's a bus. Well, basically, what it does, it goes up around the college, comes down Burd Street, mostly where you wanna go. They go to Giant, they go to, uh, Walmart, every

place like that. And then in two hours, they'll come back and take you back home to where they picked you up at.

Other participants in the group were not familiar with the Blue Line and requested help obtaining a schedule.

The following are quotes in response to the question "What do you think are the biggest challenges in the Shippensburg area?"

"Not enough stores." "Yeah, we're losing one, Lowe's."

"I think transportation is another problem in Shippensburg. And again, in my community, people are more and more not able to drive themselves."

"Affordable housing, employment, and doctors."

"Transportation sucks." "Yeah, housing, transportation, health."

COMMUNITY KEY STAKEHOLDER INTERVIEWS

COMMUNITY KEY STAKEHOLDER INTERVIEWS

Summary

The Shippensburg Community Resource Coalition conducted 10 interviews with community stakeholders as part of their community assessment to obtain information about their opinions on the social determinants of health and how they are impacting the Shippensburg Area School District area. The following questions were asked of each community stakeholder:

- Question 1: How would you describe the overall health of the Shippensburg community?
- Question 2: What do you believe are the unmet needs of the community as it relates to health? What are the unmet needs of the community as it relates to the social determinants of health?
- Question 3: What are the barriers to those needs being met?
- Question 4: What are the services related to health that your organization offers to the Shippensburg community?
- Question 5: What additional service(s) could your organization provide to meet the needs of the community?
- Question 6: What are the barriers to providing these services?
- Question 7: What services do you think the Shippensburg Community Resource Coalition could provide to meet the needs of the community?
- Question 8: What are the opportunities for partnering to provide services in the community?

Common themes arose between each of the 10 community stakeholder interviews in the area of lack of transportation for residents, the lack of funding and time for new services, and the discord between the community and Shippensburg University. Many interviewees mentioned that the Shippensburg community does a good job of providing food to those that are experiencing food insecurity through their food pantries, community meals, and youth food security programs such as Hound Packs. Interviewees also felt safe in Shippensburg stating low crime rates.

A description of the methodology and a summary of the major themes for each question follow below.

Methodology

A total of 10 community stakeholder interviews were conducted between September 2018 - November 2018. The interviews were conducted by a Shippensburg University Bachelor of Social Work (BSW) intern for the Shippensburg Community Resource Coalition (SCRC) and the Community Health Mobilizer. A detailed description of the methodology used to conduct the interviews is presented below.

To prepare for the community stakeholder interviews, the Community Health Mobilizer worked with two BSW interns and a Master of Social Work (MSW) intern to develop a facilitation guide with 8 key questions to investigate the social determinants of health and their impact on the Shippensburg community. The facilitation guide used for the community stakeholder interviews is included in the Appendix. Interviews were conducted with human service agency providers, grant funders, community members, social workers, educators, and church leaders. The interviews were held in various parts of the community depending on the schedule of the interviewee.

The format for the interviews included a BSW intern facilitating and recording the interview along with the Community Health Mobilizer to oversee the interview and provide additional transcription services. Each interview began with information about the SCRC, the goals of the community assessment, and information on the social determinants of health, including a handout explaining the five areas: social and community context, health and healthcare, economic stability, education, and the neighborhood and built environment (see Appendix). Each interview was recorded and participants signed an informed consent form before engaging in the interview (see Appendix). Participants were aware that their input would be confidential and summaries would be presented.

After the interviews were completed, the social work interns transcribed the recordings. The Community Health Mobilizer coded the interviews using open coding, analyzing the transcripts for recurring themes, specifically reviewing for social determinants of health. The responses are presented for each question asked in the interview.

Results

The community stakeholder interviews were transcribed and themes identified using open coding. The common themes, and samples of responses, are presented for each question.

Question 1: How would you describe the overall health of the Shippensburg community?

The responses to this question varied amongst the interviewees. All of them felt that there was room for improvement but responses varied from fair to significant with some mentioning that the poor health of Shippensburg is hidden. Most interviewees mentioned that Shippensburg does a good job of providing food for those experiencing food insecurity. Areas of concern were the lack of transportation as a barrier to health, homelessness, cyclical nature of poverty, lack of affordable housing, smoking and drugs, lack of physical activities, and the split between Franklin and Cumberland Counties.

The following are sample comments from the interviewees about the overall health of Shippensburg:

“What I want to try to say is that I think that on the surface, it looks great, but there’s a lot of hidden needs that folks are not very upfront about. For example, I come around the corner on Tuesday afternoons at the King’s Kettle over here and there’s a line on the whole block. I had no idea that that amount of need was right here in our community.”

“Fifty-percent healthy and 50% unhealthy because there is a high homelessness rate and high poverty rate.”

“As a community, we’ve been trying...everybody’s been trying to make it a better community...I grew up here and I see how much more is offered for families, but I do see that there is still more of a need.”

“It’s fair. There’s always room for improvement, I believe, in any community.”

“I just think it seems like there’s a lot of unhealthy behaviors that seem to take place in the town...a lot of smoking...drinking...there just doesn’t seem to be a lot of things for people to lead healthy lifestyles.”

Question 2: What do you believe are the unmet needs of the community as it relates to health? What are the unmet needs of the community as it relates to the social determinants of health?

The lack of affordable housing for residents and families of Shippensburg was mentioned by 60% (N=6) of interviewees, some of them sharing their own personal struggles with finding affordable housing. Respondents said that landlords in Shippensburg prefer to rent to Shippensburg University students over families. Also, while there may be housing options, the cost of rent is too high for many families. The lack of affordable housing is also tied to those experiencing homelessness, another unmet need mentioned by participants.

Another common unmet need identified by 50% (N=5) of the interviewees is the lack of public transportation in Shippensburg. If residents do not own a vehicle or have enough gas money, transportation to access services is a hardship. While there is RabbiTransit, one must apply for a card to be able to use it. One is eligible if they receive Medical Assistance and can only use it for medical appointments made in advance.

The third area of unmet needs in Shippensburg is the lack of enough primary care physicians. While there are a few, it is not enough to keep up with the demand. Thus, many residents go to the urgent care clinic for sick visits as they can be seen on the same day versus having to wait for an appointment. Other unmet needs that were mentioned by more than one interviewee included lack of knowledge of available services and how to access them, coordination of human services, employment opportunities, affordable and quality daycare, and recreation options during the winter.

The following are sample comments from the interviewees about the unmet needs of Shippensburg residents:

“A lot of my clients tend to go through Urgent Care because they can get seen faster instead of going to a primary care doctor and not being seen for a couple weeks.”

“Another problem that I see, which is transportation. Some of my clients have gotten waivers to use the Rabbit transportation and others haven’t. I have a client who has severe mental health problems. She can’t receive any services because she doesn’t have any way to get there.”

“Transportation and coordination of services (human services). Community/public engagement is not good.”

“Housing is one of the biggest issues I see...they’re living doubled up, which means then that the environment is usually not a healthy environment.”

Question 3: What are the barriers to those needs being met?

The common themes that arose in identifying barriers to meeting the previously identified unmet needs include financial resources, transportation, knowledge about available services, how to access services, and coordination of services for those in need. The lack of financial resources is an ongoing barrier for communities. Transportation is not only an unmet need but also a barrier to meeting those needs as one cannot receive services, obtain a job, or go the doctor’s office without some form of transportation. In respect to the services that are available, the lack of a central place for services is a barrier to people’s ability to access services. Also, the lack of knowledge in the community about available services, how to access them, and how to navigate the system are barriers not only for community members but also for human service providers.

The following are sample comments from the interviewees about the barriers to meeting unmet needs of Shippensburg residents:

“Transportation, I think, is going to be across the board.”

“Childcare is...an extreme barrier for anybody. Even though there are multiple childcare options in the area, it's what is affordable...It was costing me more than what I was even bringing home a paycheck [to pay for childcare for three children].”

“My main thing was if we could come up with some type of delivery service that can...take the food from the food pantry and get it together. Then have some type of delivery service for those families that do suffer with transportation...someone that would be able to pick the items up and take it to the family.”

“[The] community is disjointed and I believe it comes from the geographical proximity of Shippensburg. It is geographically split between Franklin and Cumberland County.”

Transportation is a barrier too. There is competition amongst services between Franklin and Cumberland counties.”

“Community/public engagement is not good. There is a lack of knowledge about what services do exist or how to navigate the services with respect to what services can be obtained from Franklin and Cumberland counties.”

“I’m not sure where the disconnect is in the Shippensburg area. I wish there was a way to partner with more organizations down here...One of my biggest frustrations is to get people to understand that Shippensburg area is a part of the Franklin County too.”

“Housing is tricky because a lot of people don't want to rent to families in the Shippensburg area anymore.”

Question 4: What are the services related to health that your organization offers to the Shippensburg community?

Services related to health that the interviewees provide did not have much overlap. The only overlap occurred in referral for services but those giving referrals were targeting different populations: students, elderly, and Cumberland County residents. The following services were identified:

- Support groups
- Referrals to local services
- Applying for benefits
- Coordination of services
- Early childhood education
- Case management
- In-home health services
- In-school support and services
- Services to the aging population
- Funder
- Educator
- Link, Convener
- Health care
- Health education and health awareness activities
- Drug and alcohol services
- Food resources

The following are sample comments from the interviewees about services related to health that their organization offers to the Shippensburg Community:

“I assist families in applying for medical assistance.”

“We offer a lot of educational pieces. Our health manager is amazing at communicating with families, making sure that the kids all have their physicals every year and their dental checkups.”

“Provide free in-home care service for adults ages 18 and older. I do medication management and wound care.”

“School nurses are really big on hygiene for the students.”

“Senior Center provides exercise, assistance with Medicare... Nutritional meals Monday through Friday (one meal per day).”

“Health promotion, health education, health awareness activities for Summit Health in Franklin County including Shippensburg.”

Question 5: What additional service(s) could your organization provide to meet the needs of the community?

Since the interviewees all hold different roles in the Shippensburg community, the additional services that they could provide varied greatly. However, most mentioned an increase in programming in their specific areas such as increasing current programs, supportive programming, educational services such as literacy classes and self-sufficiency classes, and new support groups. The following list is specific services mentioned:

- More collaboration with Shippensburg University
- Programs that encourage more physical activities and education
- Elder Day services
- Increase the use of the senior center as a community center
- A social worker with the community nurse to assist with paperwork/applications
- Van for transportation
- Petty cash fund for medication co-pays, laundromat, and other basic incidental needs

Question 6: What are the barriers to providing these services?

Three main themes emerged as barriers to organizations increasing their services: funding, time, and transportation. If there was more funding, employees could move from part-time hours to full-time hours. Also, more employees could be hired to assist with current and new services, thus increasing the amount of time that employees have to spend on programming and with clients. Lastly, transportation is a dual-faceted barrier as it is an unmet need and a barrier to access services. Interviewees felt that the lack of transportation options impeded community members' ability to access new services in addition to the current services being offered. As Shippensburg is a rural area, the lack of public transportation is complicated.

Other barriers that were mentioned include finding space for programming as there is not a community center, community support for services including recruitment to participate in new services, and conflicting schedules between staff and clients such as clients are working during the hours the service is offered.

The following are comments from the interviewees about barriers to providing additional services:

“I’ve explored a petty cash fund...I don’t have anywhere to refer these clients to because I don’t have that money available.”

“Funding and time as well as self-made barriers. Some people do refuse services because they feel they do not need help.”

“Funding.”

“Most families and staff do not have good schedules.”

“Time.”

“Finding space and people [to participate in the programs].”

Question 7: What services do you think the Shippensburg Community Resource Coalition could provide to meet the needs of the community?

Forty-percent (N= 4) of interviewees stated that the SCRC could provide assistance with the lack of transportation. Another theme was collaboration and support to other organizations to help improve current services, such as changing the times of food pantries and community meals to be more convenient for working residents. Also, there were ideas for collaborating to bring new services to Shippensburg such as mental health services, health education programming, and services for substance use and domestic violence. Lastly, SCRC could continue to be an informational hub about available services and help connect people to services. One interviewee felt that the SCRC could be a *“strategist when it comes to identifying [unmet] needs and then strategizing a way to receive those needs.”* With SCRC’s connection to Shippensburg University, they could also do more research and assessment.

The following are comments from the interviewees about what they think the SCRC could provide to meet the needs of the community:

“The coalition could be a convener and connector resources and people.”

“It could be an informational hub.”

“Research/assessments”

“Coordinate all the facilities like mental health, social, counseling, charitable giving...the community meals.”

“Partnering to avoid transportation issues.”

“Resources for individuals who have issues with substance abuse.”

Question 8: What are the opportunities for partnering to provide services in the community?

Partnering with Shippensburg University was mentioned the most in answer to this question. Participants mentioned partnering with the Department of Social Work and Gerontology, the Counseling Department, and student organizations. It was also suggested that *“having a community day where the community and university come together to have a common purpose”* would increase the partnership bond between the Shippensburg community and Shippensburg University. Other organizations that were mentioned as opportunities for partnering include:

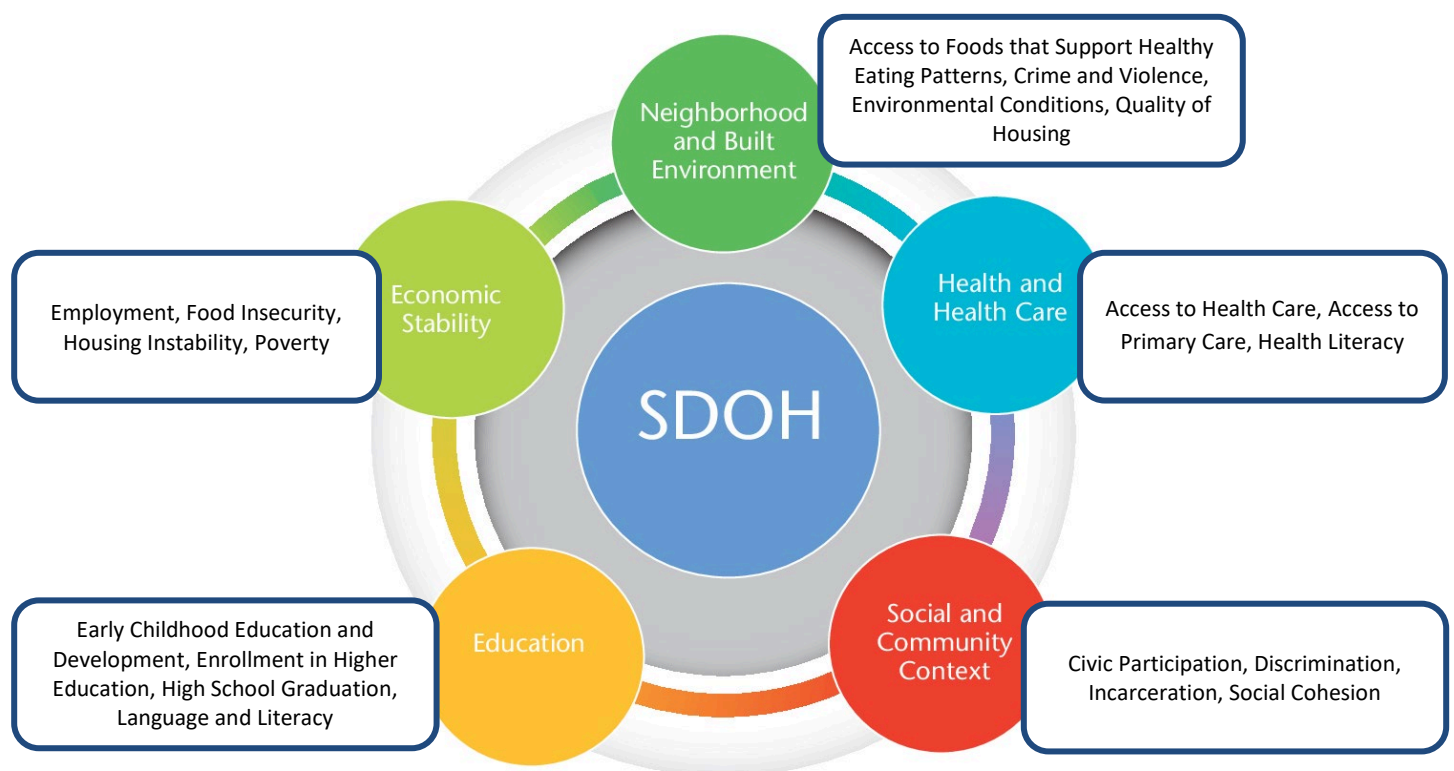
- The Harbor
- School counselors
- Churches
- Shippensburg University’s Food Recovery Network to more community meals
- The Boys and Girls Club of Chambersburg and Shippensburg
- Coy Public Library of Shippensburg
- Early childhood education centers
- Cumberland County agencies
- Franklin County agencies

DISCUSSION AND RECOMMENDATIONS

DISCUSSION AND RECOMMENDATIONS

The 2019 Community Assessment centered on the social determinants of health. The social determinants of health are the ways that home, school, workplace, neighborhood, and community factors can impact one's health. According to Healthy People 2020, the five areas of social determinants of health are social and community context, health and healthcare, economic stability, education, and the neighborhood and built environment.³³ The questions asked at both the focus groups and the stakeholder interviews focused on the social determinants of health impacting the overall health of Shippensburg residents. The purpose of the community assessment was to combine the results of the community survey, focus groups, and stakeholder interviews and analyze the results through the lens of the social determinants of health to identify which of them are areas of growth for the Shippensburg community.

Figure 11. Social Determinants of Health (SDOH)



Source: Healthy People 2020: Social Determinants of Health (SDOH).³⁴

³³ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Social Determinants of Health. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

³⁴ See Footnote 33.

This community assessment was funded by the Partnership For Better Health as part of the Healthy Shippensburg Project, an initiative to improve the overall health and well-being of Shippensburg through systems change. “‘Systems change’ is a shift in the way that a community makes decisions about policies, programs, and the allocation of its resources — and, ultimately, in the way it delivers services to its citizens.”³⁵ Part of the Healthy Shippensburg Project initiative is the Healthy Shippensburg Coalition, a group of community members, human service providers, business owners, and community stakeholders that will use the results of this community assessment to inform their decision about which social determinants of health to focus on. Their preliminary recommendations are included in following section under “recommendations.”

Social Determinants of Health

Social and Community Context

The social and community context of health includes how a community’s civic participation, social cohesion, discrimination faced by residents, and the incarceration rate impact the overall health and well-being of its residents.³⁶ These key issues of social and community context are all dealing with the relationships that people have in their lives. At the community level, we are specifically looking at the quality and quantity of the relationships that community members have with each other and between social groups. Relationships can positively or negatively impact physical health and psycho-social well-being.

Strengths

According to Healthy People 2020, “social cohesion refers to the strength of the relationships and the sense of solidarity amount members of a community.”³⁷ The Shippensburg community appears to be well-connected and united, with respondents stating their strong sense of community and willingness to help each other as the biggest strength in the community. Community members' participation in “*many organizations*” such as religious organizations, youth sports, community meals, and civic and social clubs is another strength. Social capital, or shared group resources, is another indicator of social cohesion. Throughout the assessment, participants shared that they learned about social services, employment opportunities, and community events mainly by word of mouth. This ability to spread the word about available resources is a positive indicator of social cohesion.

Another indicator of social and community context is discrimination. Focus group participants shared that the discrimination is “*not as bad when I was small...there’s more of them [college*

³⁵ CCI Tools for Federal Staff: What is Systems Change. http://www.ccitoolsforfeds.org/systems_change.asp

³⁶ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Social Determinants of Health. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

³⁷ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Social Cohesion. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/social-cohesion>

students], more things going on with all kinds of races. So it's improving." It is important to note, however, that focus group participants were almost all identified as White. This limits our understanding of the experiences of those who would be more likely to experience discrimination. To gain a better understanding of minority's perspective on discrimination, the community survey cases in which the respondent identified as a minority (non-white race, Hispanic/Latino, LGBT or language other than English spoken at home) were pulled out and analyzed. There were 74 valid responses from minority participants (17.5% of all valid responses). There was no notable difference in responses about discrimination and related programs and services from those that identified as a minority versus those who did not.

Residents involvement in the community was also identified as a strength, *"I think the community is close, everyone is kind and involved in many organizations."* A willingness to help each other was also expressed, *"community coming together when there is someone in need."*

Challenges

Areas for growth in the social and community context are related to some of the strengths that were identified. In the open-ended questions of the survey, the lack of social cohesion ranked as the fourth biggest issue and/or need yet they also identified Shippensburg as being a *"close-knit community"* and as having a strong sense of community. One reason for this dissonance could be from people feeling close to their neighbors or those in their own social group but not feeling united as a community at large. In the focus groups, the majority of participants felt that their voice and opinion did not matter in the community. Some participants expressed their reluctance to even voice their opinions after being ignored on other occasions. A lack of transparency and inability to work together was identified. This lack of transparency and communication between elected officials, the school district and community members leads to a lack of trust and a decrease in social cohesion. Another area of disconnect was identified between Shippensburg University and the town (Shippensburg area). This town-gown conflict is common in towns with a university but is an area for growth. Key stakeholders stated that the *"university and community need to partner more;"* and *"There is not a lot of collaboration between community members and university students to show that support."* Focus group members also expressed a need for more collaboration between social service agencies that would help everyone know about the various resources available in the Shippensburg area.

While respondents stated that discrimination is better now, they also described current discrimination that they faced. For example, one participant noted being yelled at by college students when are standing in line for services or walking around town. People who were previously incarcerated experienced discrimination in looking for employment and housing. It was also mentioned that there is limited racial diversity, as evidenced by the demographics: 92.3% white/Caucasian (ACS, 2013-2017). Racial discrimination was expressed in the focus groups as being a problem or issue in Shippensburg, *"And there are a lot of people here old school that don't like that you know?...There are a lot of bias people here."* The survey identified that "Efforts to Improve Ethnic or Racial Harmony" is somewhat of a need.

Recommendations

Recommendations to address the gaps in the social and community context are centered on building relationships within the community. While there is strong social cohesion between neighbors or those in the same social group, participants expressed disconnect between the following groups: Shippensburg University and Shippensburg, the town; town officials including the school district and community members; and between different social groups. Community assessment participants shared some ideas on ways to increase collaboration amongst these groups. To increase the social cohesion between the university and the town, the “*University should post on social media what they are doing for the community, then that would have a positive outlook*” or “*Community day where community and university come together to have a common purpose.*” The Healthy Shippensburg Coalition suggested a partnership with the university in helping to carry out some of the work of the coalition which will help create common ground between the two. The coalition also suggested more community outreach and engaging key stakeholders of the community in an effort to increase the social cohesion.

The following are more recommendations:

- Increase the cohesion of the community as a whole by providing a space in which different social groups can interact, build trust, and establish a collaborative relationship.
- Partner with Shippensburg University to increase understanding between students and residents and bridge the gap between gown and town to create a common goal.
- Work with elected officials to strengthen the relationship they have with residents and increase collaboration across all resident social groups.
- Increase civic participation by sharing ways that people can become involved in organizations and encouraging participation in them such as the SCRC and their Healthy Shippensburg Coalition or the Communities That Care community board.
- Provide education discrimination related to race, ethnicity, socioeconomic status, etc.

Health and Healthcare

Access to health-related services, including mental health services was a common theme across all data measures. Access to health care is defined as the “timely use of personal health services to achieve the best possible health outcomes.”³⁸ If Shippensburg residents are not able to access physical and mental health services in a timely manner, it is probable that their condition will worsen and require more resources to treat than if they were able to receive treatment at the start of symptoms. The hassle of obtaining treatment whether it is related to having enough physicians to meet the demand in a timely manner, transportation to services, or acceptance of insurance are all barriers that can lead to poor health outcomes. According to Healthy People 2020, primary care providers are related to positive health outcomes because they develop relationships,

³⁸ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Access to Health Care. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-health>

provide the usual source of care, preventative care, and are able to detect, manage, and treat chronic diseases.³⁹

Strengths

The Shippensburg area has some strengths in health and healthcare. The Shippensburg Community Nurse is a nurse funded by the Shippensburg Civic Club that provides free home-based services to any Shippensburg resident. The nurse assists with wound care, nutritional counseling, chronic disease management such as diabetes education, blood pressure checks, filling weekly medication organizers, as well as picking up medications at pharmacies and even groceries. Having a partnership that bridges the gap between in-patient services and doctor's instructions increases positive health outcomes. Another strength is the Shippensburg Health Center which has an urgent care, primary care providers, physical therapy and lab services. While it is not located downtown, it is close enough to town that it is walkable if able to walk. They also accept most insurances, including Medicaid. In terms of transportation to medical appointments, those who are over 60 years old, have Medicaid, or a disability are able to have free transportation through the RabbiTransit system. The Raider Regional Transit bus does not provide transportation to any medical offices, however, it does drop off at Shippensburg Shopping Center on Walnut Bottom Road, which is within walking distance of the Shippensburg Health Center.

The schools in the area assist in providing health services or case management of health care services. The Shippensburg Early Head Start program works with families to make sure that pregnant women are receiving appropriate prenatal health care and follows the child and family throughout the Head Start program including their yearly physicals and vaccines. The Head Start program ensures that its students are receiving their vaccines, physicals, and meeting developmental milestones. The nurses in the public schools also provide basic services and general hygiene help to students. A strength in mental health services is the Growing Edges Counseling Center at Shippensburg University that provides free counseling services to the community during the academic school year. Shippensburg also has the Drew Michael Taylor Foundation that provides grief support groups for all ages as well as other services related to coping with a loss.

Challenges

Areas of concern that surfaced in the community assessment were primarily related to lack of providers in Shippensburg and a lack of transportation to access health care providers in Chambersburg or Carlisle. Some interviewees stated that their clients go to urgent care instead of seeing a primary care provider due to the wait time to see them and the convenience of Urgent Care. While it is good that residents are receiving care at Urgent Care, they are only receiving

³⁹ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Access to Primary Care. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-primary>

medical care in times of illness. Building a relationship with one's primary care provider and having routine check-ups and preventative care significantly increases positive health outcomes⁴⁰. Providers needed in Shippensburg include mental health providers, specialists such as pediatricians, and more primary care providers to cut down on the wait time to see a primary care provider. Respondents also mentioned that finding providers that accept their insurance was another barrier and often required them to go outside of Shippensburg.

Drug and alcohol use was another area of concern, ranking as the highest problem in the Shippensburg area by 22% of survey respondents. It also ranked as fourth in needed social services and needed community safety services in Shippensburg. The comments about drug and alcohol were in reference to providing education, prevention, and treatment services. The health effects of drug and alcohol use are varied and can occur even after one use. Short-term effects range from changes in appetite, sleep patterns, heart rate, blood pressure, mood to heart attack, stroke, psychosis, and death.⁴¹ "Longer-term effects can include heart or lung disease, cancer, mental illness, HIV/AIDS, hepatitis, and others. Long-term drug use can also lead to addiction."⁴²

Recommendations

Recommendations include increasing the number of mental health providers and medical specialists, specifically those that accept Medicaid. This recommendation has already made progress since the data was originally collected. Franklin Family Services opened an office in Shippensburg providing outpatient therapy, family-based treatment, and behavioral health rehabilitation services. Franklin Family Services also accepts Medicaid, addressing the top two needs identified by all survey respondents, at all income levels: availability and affordability of mental health services. In terms of physical medicine, Wellspan Health formerly known as Summit Health opened a new office with more specialists: obstetrician/gynecologist, cardiology, pulmonary, and sleep medicine. Also, UPMC Pinnacle has pediatric specialists at their new Shippensburg location on Walnut Bottom Road. UPMC Pinnacle and Wellspan both accept Medicaid and Medicare insurance.

Other recommendations include better collaboration between medical doctors and social service agencies in the community. If doctors are able to suggest relevant social services that will help their patient's quality of life, their positive health outcomes will increase, too. Increasing the community's knowledge about health care services in Shippensburg including helping people apply for medical assistance and other services such as RabbiTransit may increase residents' use

⁴⁰ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Access to Primary Care. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-primary>

⁴¹ National Institute on Drug Abuse. (2017, March 23). Health Consequences of Drug Misuse. <https://www.drugabuse.gov/related-topics/health-consequences-drug-misuse>

⁴² See Footnote 43.

of health care services in a timelier manner. Working with Raider Regional Transit to have bus stops at medical offices would be helpful, too.

Economic Stability

Economic stability includes issues related to the community's employment opportunities, poverty level, housing instability, and residents experiencing food insecurity. These four areas are all intertwined because without adequate employment opportunities that provide a living wage⁴³, community members will be at or below the poverty level, experience food insecurity and housing instability due to their lack of financial resources.

Strengths

Of these four areas, Shippensburg's strength lies in addressing food insecurity. Across all data methods, the available food resources for those experiencing food insecurity was praised. Participants mentioned Shippensburg Produce and Outreach (SPO): a weekly food bank that provides fresh produce, King's Kettle: a monthly food pantry, community meals at local churches that offer dinner during the week and breakfast on Saturdays, and Hound Packs, a program for SASD students that provides 7 meals and 1-2 snacks every weekend through the school year. Another youth food insecurity program not mentioned by participants is the Summer Lunch Program which offers breakfast, lunch, and snacks during 7 weeks in the summer and programming from 9:00-11:30 am. Participants in these program also receive information about other services in Shippensburg through their participation. SPO is located at Katie's Place, which houses three other agencies: Tri-County Community Action, SCRC, and Christ Among Neighbors. During distribution, Tri-County Community Action staff are available for help with applying for assistance and case management. Christ Among Neighbors also makes appointments with people for cash assistance for a variety of crisis situations such as housing and utilities.

Another strength is Shippensburg's Early Head Start program which assists pregnant women in having a healthy pregnancy and follows the family once the baby is born. According to Love, et al., (2002), Early Head Start can help fight poverty by giving infants and toddlers a healthier life, reversing the negative health outcomes normally associated with families experiencing poverty.⁴⁴ Another strength is the Getting Ahead program facilitated by Tri-County Community Action. This program works with a small group of participants to help them achieve a higher socioeconomic status through teaching them financial literacy, helping them set goals in their personal and professional lives, and working with them to achieve those goals. The program

⁴³ "Living wage" refers to a minimum wage that is the amount of money needed to meet a minimum standard of living in the U.S. According to MIT's living wage calculator, the living wage for two adults and two children in PA is \$22.49 (Living Wage Calculation for Pennsylvania: <https://livingwage.mit.edu/states/42>)

⁴⁴ Cited in Healthy People: Poverty <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/poverty#32> Love JM, Kisker EE, Ross CM, Schochet PZ, Brooks-Gunn J, Paulsell D, Brady-Smith C. Making a difference in the lives of infants and toddlers and their families: The impacts of Early Head Start. Princeton (NJ): Mathematica Policy Research; 2002.

partners with other organizations and community members to provide mentors for the participants.

Challenges

Shippensburg area's poverty rate, 17.9% is higher than the state's, 13.1%. However, since 2016, the Shippensburg area poverty level has started to trend downward with a 4.8% decrease. The areas of most concern are employment and housing instability. Housing instability is defined as "having trouble paying rent, overcrowding, moving frequently, staying with relatives, or spending the bulk of the household income on housing"⁴⁵ Focus group participants and stakeholder interviewees all identified housing concerns as one of the biggest problems in Shippensburg. Focus group participants stated that it was difficult to find affordable housing and landlords would rent to students versus families. As a university town, a large number of units are rented to college students who are often less demanding as renters. In addition, owners may prefer to rent to college students because they may charge per bedroom or student. However, Shippensburg University has changed their housing policy to require students to live on campus for the first two years instead of only the first year. This policy change will likely have effects on the housing market for Shippensburg residents because there will be less students renting off-campus. Among survey respondents at or below the poverty level, affordable housing ranked as the fourth need. Those above the poverty level did not identify affordable housing as a need. In the open-ended question section of the survey for all respondents, housing was identified as a top social service program need and as a program that is needed for those re-entering the community after incarceration.

All methods of data collection identified the lack of employment opportunities as an area of concern for the Shippensburg area. Gainful employment requires a variety of conditions to be met in order to work: training/education to do the job, transportation to and from the job, affordable, quality daycare if one has children, and a wage that is sufficient to support a family. All of these conditions were identified as areas of growth in the Shippensburg area with transportation being a top concern in the focus groups and stakeholder interviews, too.

Recommendations

In order to help individuals and families overcome the above risk factors, we must address economic mobility. More programs are needed that focus on helping participants to improve their socioeconomic status through employment, education, and financial literacy. The Getting Ahead program held a group in the Fall of 2018 which was successful but it would helpful to have more than one group going which will require more participation from the community. An evidenced-based program, Families Strengthening Families which currently runs in Chambersburg and Waynesboro may also be an option. By building on the protective factors of

⁴⁵ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Housing Instability. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/housing-instability>

improving family relationships, parenting skills, and improving youth's social and life skills, the programs helps increase family's resilience and family strengths which can help a family overcome poverty.⁴⁶ The outcomes have shown an increase in educational success, social skills, and a decrease in drug and alcohol use.⁴⁷ Another option in an effort to increase affordable housing, includes landlord engagement meetings about the different services and resources available through housing authorities. Also, offering education to renters to help them understand their rights and landlords' expectations.

To address systems change in respect to economic stability, an "Employment Coalition" is recommended. The coalition would look at the system-wide, structural changes that need to be made to improve wages and benefits of employees in Shippensburg. The coalition would consider the policies and procedures that needed to be changed to increase wages to a living wage and improve employee benefits such as health insurance, paid time off, and sick leave.⁴⁸ Collective bargaining is one tactic that the coalition could use to achieve change.⁴⁹ While "collective bargaining" is often thought of as "unions," the Employment Coalition could act as the intermediary between the employer and employees.

Transportation has been an ongoing concern in Shippensburg. This year, the Capital Area Transit bus has partnered with Raider Regional Transit to expand their route with more bus stops to many apartment complexes, Giant Food Store, Wal-Mart, Target, Aldi's, and downtown Shippensburg. They will also pick up community members at their house if they live within $\frac{3}{4}$ of a mile from a bus stop. While this is a good first step, the hours are limited, 7:00am-5:00pm Monday – Friday, and Saturday from 1:00pm-10:45pm. Also, it would be helpful to find transportation options to help people commute to work.

Education

Education examines the effects of early childhood education and development, the rate of high school graduation and enrollment in higher education, and language and literacy. The first five years of a child's life are a crucial time for children as meeting developmental milestones and early education can significantly improve health outcomes. A positive educational experience from early childhood through high school graduation is connected to better personal and health outcomes such as improved socioeconomic status, decreased rate of chronic health conditions and premature deaths.⁵⁰ The key issue of language and literacy is defined as spoken or written

⁴⁶ Strengthening Families Program: Program Descriptions. <https://strengtheningfamiliesprogram.org/about.html#outcomes>

⁴⁷ See Footnote 46.

⁴⁸ Holzer, Harry J. (2008). Living wage laws: How much do (can) they matter? https://www.brookings.edu/wp-content/uploads/2016/06/living_wage_report.pdf

⁴⁹ National Labor Relations Board: Collective Bargaining. <https://www.nlrb.gov/rights-we-protect/whats-law/employees/i-am-represented-union/collective-bargaining-rights>

⁵⁰ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Early Childhood Development and Education. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/early-childhood-0>

communication and includes one's level of ability to understand oral language, written language, numbers, and cultural and conceptual knowledge.⁵¹ Language and literacy specifically impact one's health through a person's ability to access health care services, understand health information, use medication as prescribed, and seek preventative services.

Strengths

Some respondents of the community assessment identified Shippensburg as having quality public education, including special education services. Education was the second biggest strength mentioned in the open-ended question about Shippensburg's strengths in the survey. Also, focus group participants identified that the Hope Reformed Presbyterian Church offers free GED classes throughout the year. Having a high school diploma, or equivalency, increases one's earning potential and thereby increases positive health outcomes. Another strength of Shippensburg is the high school graduation rate which is higher than that of the state's high school graduation rate, 90.5% versus 86.6%.⁵² It is helpful that Shippensburg has Early Head Start and Head Start to assist with protective factors in the first five years of a child's life. The elementary school also has a program called "Ready, Set, Go!" for all SASD parents and their children in Pre-K through first grade to help familiarize parents and children with the school, early literacy activities for the children that they can also do at home, and educational workshops for parents on developmental milestones and preparing their children to be successful in school. At the middle school, SCRC provides support groups to help students learn about healthy lifestyles including making healthy decisions academically and personally. SCRC also collaborates with the middle school to provide the Teen Leadership Club which helps adolescents develop into empowered leaders. It also gives them exposure to Shippensburg University. The survey showed that respondents were satisfied with "Efforts to Improve Literacy" and did not identify it as a need. However, this result is likely skewed because if respondents could read the survey to complete it, they probably do not need literacy classes. Social work students did read the survey to some participants, but it was not recorded so it is unknown the number of respondents that required reading help.

Challenges

Areas of concern regarding education and literacy in Shippensburg include the low rate of higher educational attainment, the lack of English literacy classes for residents who need to learn or improve their English, and adult education classes. While the focus groups and surveys identified education as being a strength, it was also mentioned as a concern, with participants asking for better special education services, improved school facilities, and more Head Start programs.

⁵¹ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Language and Literacy. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/language-and-literacy>

⁵² US Census. Educational Attainment. 2013-2017 American Community Survey 5-Year Estimates. S1501. <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

Another concern is that while Shippensburg has an above average high school graduation rate, few students go on to obtain a higher education degree (associates/bachelor/graduate degree).

Table 18. Highest Educational Attainment PA vs. SASD

Highest Educational Attainment	PA 2017	SASD 2017
High School Diploma (includes equivalency)	35.6%	45.0%
Associate Degree	8.2%	6.3%
Bachelor Degree	18.3%	12.8%
Graduate or Professional Degree	11.8%	7.9%

Source: 2013-2017 American Community Survey, 5-year Estimate

Forty-five percent of Shippensburg residents' highest educational attainment is a high school diploma which is 10% higher than the state's average.⁵³ Only 20.8% of Shippensburg residents receive a bachelor degree or higher compared to 30.1% for PA.⁵⁴ Better health outcomes such as reduced risk of chronic conditions including mental health, and premature death are associated with educational attainment beyond a high school diploma.⁵⁵ They are also more likely to have healthy lifestyle habits and seek preventative health care. The lack of literacy classes is also a concern as there are no classes within the Shippensburg area for which people can receive help to increase their written and oral literacy skills.

Recommendations

Collaboration between Shippensburg University and the community to provide more services such as literacy classes including GED classes, English as a Second Language, and adult education classes was mentioned across all data collection methods. Also, exploring mentorship programs between high school students and peer and/or university faculty mentors to help them navigate the college application and acceptance process may be helpful in encouraging students to obtain more education beyond high school. Students that have a sense of community within the higher education community are more likely to pursue, attend, and graduate from a higher education institute.⁵⁶ Early childhood education programs that include nutritional components are associated with better health outcomes. Explore how Hound Packs could serve more children including Pre-K. Programs to strengthen families' involvement in their children's schooling is

⁵³ US Census. Educational Attainment. 2013-2017 American Community Survey 5-Year Estimates. S1501. <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

⁵⁴ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates: S1501 Educational Attainment. https://factfinder.census.gov/bkmk/table/1.0/en/ACS/17_5YR/S1501/0400000US42/9700000US4221570

⁵⁵ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Enrollment in Higher Education. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/enrollment-in-higher>

⁵⁶ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Enrollment in Higher Education. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/enrollment-in-higher>

another recommendation. Lastly, booster programs for children from kindergarten through third grade that extend early childhood programs have been found to be helpful to addressing the educational social determinant of health. Explore what resources are available in Shippensburg for a booster program.

Neighborhood and Built Environment

The neighborhood and built environment involves more than just the structures of a neighborhood or environmental conditions like air pollutants and temperature but also the amount of crime and violence in a community, and how accessible are foods that support healthy eating patterns. Three environmental conditions, polluted air, contaminated water, and extreme heat are known to negatively impact one's health including long-term health outcomes such as the prevalence of childhood asthma, hypertension, heart-related disease and death, and even cancer.⁵⁷ Poor quality housing is the structural condition of housing but also the "quality of the social and physical environment in which the home is located" and encompasses the "air quality, home safety, space per individual, and presence of mold, asbestos, or lead."⁵⁸ Chronic disease, injuries, and poor mental health are associated with poor housing quality. While it can be easy to understand how crime and violence can impact one's health, seeing or hearing about crime and violence can also result in poor long-term behavioral and mental health outcomes, especially for youth.⁵⁹ Adults living in high crime and violence areas tend to participate in less physical activity which may lead to a higher body mass index score and higher levels of obesity. They may also have an increase in mental health concerns and self-report poorer physical health. Lastly, a lack of access to foods that support healthy eating patterns such as fresh fruit and vegetables and foods low in saturated and trans-fat, added sugars, and sodium is known to increase one's risk for high blood pressure, diabetes, and cancer.⁶⁰

Strengths

As mentioned earlier, participants in the surveys, focus groups, and stakeholder interviews identified food resources as one of Shippensburg's strongest strengths. Shippensburg has a weekly food pantry, Shippensburg Produce and Outreach that provides beneficiaries with fresh produce on a weekly basis. King's Kettle is a monthly food pantry and provides many needed staple pantry items. While there are no grocery stores located within the borough of

⁵⁷ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Environmental Conditions. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/environmental>

⁵⁸ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Housing Quality. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/quality-of-housing>

⁵⁹ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Crime and Violence. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/crime-and-violence>

⁶⁰ Office of Disease Prevention and Health Promotion. (n.d.). Healthy People: Access to Foods that Support Healthy Eating Patterns. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-foods-that>

Shippensburg, the Raider Regional Transit bus does go to the Wal-Mart Supercenter, Aldi's, Giant, and Target. The Ship Market, a farmer's market, runs May through October, twice a month. On the first Thursday of the month, children ages 5-12 can participate in Power of Produce (POP) and receive a voucher for free fruit or vegetables from a vendor. Respondents also felt that the Shippensburg area is a relatively safe neighborhood with limited crime and violence, identifying it in the survey responses as the fourth biggest strength. In the focus groups, most respondents felt safe walking around town at night.

Challenges

While food resources are a strength of the community, it was also mentioned that the times of the food pantries and the community meals are not conducive to those who are working day shift as they close around 6:00 pm. Also, the farmer's market is located outside of town, about two-and-a-half miles from the center of town. Those without transportation may struggle to get to the market. Another concern is the need for more quality housing in Shippensburg which was identified in all aspects of the community assessment. Focus group participants shared that the housing that they could afford had issues with the water quality, plumbing, "bugs" and "vermin," and was "unsafe." Quality housing ranked fifth in importance for respondents at or below the poverty level while it was number nine for those above the poverty level. Some respondents felt that it was not safe to walk around town at night and identified a lack of police presence as a concern. The use of drugs and alcohol, especially by youth and college students, in Shippensburg was a recurring theme. Drug and alcohol use are often associated with an increase in crime rates.⁶¹

Recommendations

In order to increase quality housing, there could be outreach efforts with landlords and property managers. According to the Cumberland County Housing Authority, no landlords or property managers accept housing assistance in the Shippensburg area except those that are already operating federal affordable housing units.⁶² Coalition participants also suggested lobbying for yearly rental inspections of units by qualified inspectors to be conducted across the board in all the boroughs and townships in the SASD. Participants also identified the need for more street lamps, crosswalks, and security cameras as ways to improve downtown safety. The coalition suggested that Shippensburg University could assist in providing an assessment of needed safety measures such as those mentioned above. For funding of improvements, the Coalition mentioned working with the Planning Commission and/or the Cumberland County Revitalization Specialist. The Planning Commission may also be able to help with transportation concerns. Another idea mentioned by a small number of survey respondents was to start neighborhood watches as a way to increase community safety. Respondents also felt that if there were more supervised activities for youth and a community center, that there would be a decrease in drug and alcohol use, and crime. In order to help form a more united front in combating youth's drug and alcohol use,

⁶¹ Bureau of Justice Statistics: Drug and Crime Facts. <https://www.bjs.gov/content/dcf/duc.cfm>

⁶² Schull, B. Personal communication July 12, 2019.

collaboration between the school system, the police department, and parents is recommended. The Communities That Care program is currently working towards that end and hopes to increase the protective factors of Shippensburg youth that will help reduce the current alcohol and drug use and prevent future use.

Limitations

Limitations will be addressed by each section of the community assessment.

Community Survey

While the survey helps to get feedback from a larger group of people, it is not a random sample and results should not be generalized to the whole population. Some respondents may have more experience with the items on the survey and others may have less. As such, multiple data methods were used to understand strengths and challenges in the community. The survey utilized was chosen because it allowed for comparison to a neighboring community and to the 2014 community assessment.

As the goal was to use the same survey so that it could be compared with the 2014 survey, the questions were kept relatively the same. However, when questions were changed, it was not checked to make sure that both satisfaction and importance items would match up to determine a need score for each item. As such, there were eight satisfaction items that did not correspond with an importance item:

1. Satisfaction with Community Safety
2. Satisfaction with Services Specific to Older Adults
3. Satisfaction with Services for Alcohol/Tobacco/Drug Treatment
4. Satisfaction with Opportunities for Children with A Disability
5. Satisfaction with Services for Trauma and Abuse
6. Satisfaction with Services for People whose 1st Language Is Not English?
7. Satisfaction with Services for People Identifying as LGBTQ
8. Satisfaction with Services for People who are Re-Entering the Community after Incarceration

There were four items of importance that did not match up with a corresponding satisfaction item:

1. Importance of Services for Survivors of Domestic Violence
2. Importance of Quality Housing
3. Importance of Services for People who are Homeless
4. Importance of Services to Treat Gambling Addictions

By not having all of these questions correspond with each other, it is possible that the identified needs could be skewed as one of these items could have a higher need value than the ones

currently in the report. On the Likert scale for the satisfaction and importance questions, adding a “Not Applicable” option would help give more valid and reliable responses. If a participant has not had any experience with the item, the current options would leave the respondent to guess, mark “Neutral” or skip the question.

Other issues with the survey questions include providing checkboxes from 0-10 for the number of adults and children living in one’s household. When the answer was left blank, the researchers did not know if that meant there were “0” children or that they did not want to answer to the question. For the question about total annual household income, it would be helpful to use the same income categories as the U.S. Census for better comparison. Employment status would be another area in which using the same categories as the U.S. Census may provide better comparison. Also, the survey was not offered in Spanish or any other language.

Focus Groups

Focus groups provide community members with a “voice” and the ability to tell their own story when conducting community assessments. However, what is shared in focus groups can not be generalized to the larger public as every one’s story is individualized. While themes can be drawn upon, it is not “proof” of a particular need or strength. Another limitation of the focus groups is their smaller size offering a limited perspective. Lastly, further explanation of the topic areas asked by the focus group facilitators may have cleared up some possible confusion about the topics, specifically mental health.

Community Key Stakeholder Interviews

The interviews with community key stakeholders have similar limitations as those related to the focus groups such as caution when generalizing their statements to the broader community. Also, the interviewees were not randomly selected but were specifically chosen based on the stakeholder position in the community. Input from community members about who they viewed as community stakeholders may have resulted in different interviewees.

Data Analysis

Compared to the 2014 community assessment, the 2019 community assessment had a higher rate of missing data and shorter answers to the open-ended questions. The increase in online surveys may be the result of this different. It is also possible that community members may have been saturated with completing surveys. When calculating the respondents that were at or below the poverty level, if the number of household members or income category was missing data, the poverty level could not be calculated. Also, since the income categories were defined, they did not match up exactly with the income guidelines for the poverty level. As such, it is possible that some of the respondents included in the poverty level may be erroneous if the income level was at the lower end of the identified income category.

APPENDICES

APPENDICES

Appendix A: Shippensburg Community Resource Coalition Survey

Shippensburg Community Resource Coalition Survey

Thanks for opening our survey! We are asking community members to complete this survey to help us provide more services in Shippensburg. Your feedback is very important!

The Shippensburg Community Resource Coalition (SCRC) is a collaborative effort to provide quality social services, counseling and youth programs that are accessible and safe and that recognize the dignity and worth of each person. Our goal is to help community members reach their full potential and we would like to understand more about the needs and priorities of community members.

When completing the survey, please keep in mind:

- You should not put your name on the survey so that it is anonymous.
- Only persons who are 18 years and older should complete this survey.
- We are asking people who live within the Shippensburg Area School District to complete the survey.*
- You may skip any question that you do not wish to answer and may choose not to complete the survey at any time without penalty.
- The survey will take approximately 10 minutes to complete.
- If you have any questions, comments, or concerns, please contact us at sp-scrs@shipresources.org.
- If you have any concerns regarding participant rights, please contact Shippensburg University Human Subjects Committee at irb@ship.edu.

This study has been approved by the Shippensburg University's Human Subjects Committee. By completing the survey, you are acknowledging that:

- You are at least eighteen years old
- You understand your rights as a research participant as outlined above.
- Your participation is fully voluntary
- You live in the Shippensburg Area School District and
- We can use your responses in our study.

Thank you for your time and help!

Liz Fisher, SCRC Board Chair

Sonja Payne, Community Health Mobilizer

SCRC Board of Directors

***The Shippensburg Area School District includes Shippensburg Borough, Shippensburg Township, Hopewell Township, Newburg Borough, Southampton Township and Orrstown Borough.**

Instructions for returning the survey:

Please circle one response that best describes your level of satisfaction or skip the question if you are unsure.
How **satisfied** are you with the opportunities & services available within Shippensburg Area School District boundaries?

	No Services Available	Very Dissatisfied	Dissatisfied	Satisfied	Very Satisfied
1. Access to affordable housing?	0	1	2	3	4
2. Availability of employment opportunities for adults?	0	1	2	3	4
3. Availability of youth employment opportunities?	0	1	2	3	4
4. Efforts to prevent and reduce poverty?	0	1	2	3	4
5. Efforts to prevent and reduce homelessness?	0	1	2	3	4
6. Availability of adequate public transportation?	0	1	2	3	4
7. Opportunities for affordable adult education?	0	1	2	3	4
8. Quality of early childhood education?	0	1	2	3	4
9. Efforts to improve literacy?	0	1	2	3	4
10. Availability of affordable daycare centers?	0	1	2	3	4
11. Quality of daycare centers?	0	1	2	3	4
12. Affordability of medical services?	0	1	2	3	4
13. Availability of mental health services?	0	1	2	3	4
14. Affordability of mental health services?	0	1	2	3	4
15. Opportunities for adults with a disability to participate in programs with peers?	0	1	2	3	4
16. Opportunities for children with a disability to participate in programs with peers?	0	1	2	3	4
17. Community safety?	0	1	2	3	4
18. Availability of services for trauma and abuse?	0	1	2	3	4
19. Availability of alcohol/tobacco/drug treatment services?	0	1	2	3	4
20. Efforts to reduce harmful drug use?	0	1	2	3	4
21. Availability of services for people identifying as LGBTQ+?	0	1	2	3	4
22. Availability of services for people whose 1 st language is not English?	0	1	2	3	4
23. Availability of services for people who are re-entering the community after incarceration?	0	1	2	3	4
24. Availability of supervised after school youth activities?	0	1	2	3	4
25. Efforts to improve ethnic or racial harmony?	0	1	2	3	4
26. Services specific to youth?	0	1	2	3	4
27. Services specific to older adults (60 years old and above)?	0	1	2	3	4



Please circle one response that best describes your answer or skip the question if you are unsure.

How **important** is it that the following are available within Shippensburg Area School District boundaries?

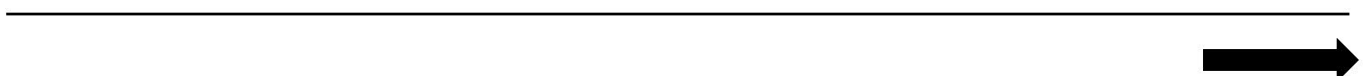
	Very Unimportant	Unimportant	Important	Very Important
1. Affordable housing?	1	2	3	4
2. Quality housing?	1	2	3	4
3. Employment opportunities for adults?	1	2	3	4
4. Youth employment opportunities?	1	2	3	4
5. Services to prevent and reduce poverty?	1	2	3	4
6. Services to prevent and reduce homelessness?	1	2	3	4
8. Transportation services?	1	2	3	4
9. Opportunities for adult education?	1	2	3	4
10. Quality early childhood education?	1	2	3	4
11. Services to improve literacy?	1	2	3	4
12. Affordable daycare centers?	1	2	3	4
13. Quality daycare centers?	1	2	3	4
14. Affordable medical services?	1	2	3	4
15. Mental health services?	1	2	3	4
16. Affordable mental health services?	1	2	3	4
17. Opportunities for people with a disability?	1	2	3	4
18. Services for survivors of domestic violence?	1	2	3	4
19. Services for people who are homeless?	1	2	3	4
20. Services to reduce alcohol/tobacco/drug use?	1	2	3	4
22. Supervised after school youth activities?	1	2	3	4
23. Programs to improve ethnic or racial harmony?	1	2	3	4
24. Services specific to youth?	1	2	3	4
25. Services to treat gambling addictions?	1	2	3	4

26. What types of community safety programs/services are needed in Shippensburg? _____

27. What types of youth programs are needed in Shippensburg? _____

28. What types of social services programs are needed in Shippensburg? _____

29. What types of programs for those re-entering the community after incarceration are needed in Shippensburg?



What is the biggest strength in Shippensburg? _____

What is the biggest problem, issue or need in Shippensburg? _____

1. What is your age? _____

2. Is English your primary language?

_____ Yes

_____ No

3. Do you consider yourself to be Hispanic or Latino?

_____ Yes

_____ No

4. Which one of the following best describes your race?

_____ White

_____ Black African American

_____ Asian

_____ Native Hawaiian or Pacific Islander

_____ American Indian or Native Alaskan

_____ Multiracial

_____ Other

_____ Prefer not to say

5. Which of the following categories best describes your educational level?

_____ Less than 9th grade

_____ 9th-12th grade, no diploma

_____ High school graduate or equivalency

_____ Some college, no degree

_____ Technical school without an associate's degree

_____ Associate's degree

_____ Bachelor's degree

_____ Graduate or professional degree

6. With respect to employment, are you:

_____ Currently working full-time (32+ hours per week)

_____ Currently working part-time (less than 32 hours per week)

_____ Currently not working but looking for work

_____ Not working and not looking for work

_____ Retired- Not working and not looking

_____ Disabled-Not working and not looking

7. How many adults live in your household? _____

8. How many children (under age 18) live in your household? _____

9. How many years have you lived in Shippensburg Area School District? _____

10. Which borough or township do you live in?

_____ Shippensburg Borough _____ Hopewell Township

_____ Shippensburg Township _____ Newburg Borough

_____ Southampton Township Cumberland County

_____ Southampton Township Franklin County

_____ Orrstown Borough _____ I don't know

_____ Other _____

11. Do you and/or members of your household own or rent your current residence?

_____ Own _____ Other, please explain:

_____ Rent _____

12. What is your total annual household income, before taxes?

_____ Less than \$10,000

_____ \$10,000-14,999

_____ \$15,000-24,999

_____ \$25,000-34,999

_____ \$35,000-49,999

_____ \$50,000-74,999

_____ \$75,000-99,999

_____ \$100,000-149,999

_____ \$150,000-199,999

_____ \$200,000 or more

13. How do you identify your gender?

_____ Male _____ Non-binary/ third gender

_____ Female _____ Prefer not to say

_____ Prefer to self-describe: _____

14. Do you identify as transgender?

_____ Yes

_____ No

_____ Prefer not to say

15. Do you consider yourself a member of the Lesbian, Gay, Bisexual and/or Transgender (LGBT) community?

_____ Yes _____ No, but I identify as an Ally

_____ No _____ Prefer not to say

16. How satisfied are you with your community as a place to live?

_____ Very Dissatisfied

_____ Dissatisfied

_____ Neither Dissatisfied nor Satisfied

_____ Satisfied

_____ Very Satisfied

Thank
you!

Appendix B: Satisfaction Descriptive Statistics, Ratings, & Percentages

The higher the mean score, the more satisfaction with the service or opportunity (0 = No Services Available, 1 = Very Dissatisfied, 2 = Dissatisfied, 3 = Satisfied, 4 = Very Satisfied).

How *satisfied* are you with the opportunities & services available within Shippensburg Area School District boundaries?

Item	N	Mean	Standard Deviation	Rank
Satisfaction of Affordability of Mental Health Services	365	2.96	0.95	25
Satisfaction of Available of Mental Health Services	377	2.98	0.95	24
Satisfaction of Services for People who are Re-Entering the Community after Incarceration	324	2.98	1.07	24
Satisfaction of Efforts to Reduce Harmful Drug Use	371	3.01	0.9	23
Satisfaction of Availability of Adequate Transportation	402	3.02	1.02	22
Satisfaction of Availability of Services for People Identifying as LGBTQ+	319	3.04	1.2	21
Satisfaction of Efforts to Improve Ethnic or Racial Harmony	365	3.08	1.02	20
Satisfaction of Efforts to Prevent & Reduce Homelessness	385	3.1	0.96	19
Satisfaction of Services for People whose 1st Language Is Not English	339	3.14	1.11	18
Satisfaction of Availability of Services for Trauma and Abuse	363	3.15	0.98	17
Satisfaction of Services Specific to Youth	370	3.15	0.96	16
Satisfaction of Efforts to Prevent & Reduce Poverty	396	3.2	0.92	15
Satisfaction of Opportunities for Adult Education	387	3.22	1.01	14
Satisfaction of Availability of Supervised After School Youth Activities	384	3.22	0.92	14
Satisfaction of Opportunities for Adults with a Disability	339	3.23	0.93	13
Satisfaction of Opportunities for Children with a Disability	339	3.24	0.93	12
Satisfaction of Availability of Affordable Daycare Centers	364	3.25	0.88	11
Satisfaction of Availability of Alcohol/Tobacco/Drug Treatment	365	3.3	0.92	10
Satisfaction of Quality Daycare Centers	352	3.36	0.92	9
Satisfaction of Affordability of Medical Services	406	3.42	0.86	8

Item	N	Mean	Standard Deviation	Rank
Satisfaction of Availability of Youth Employment Opportunities	386	3.46	0.81	7
Satisfaction of Availability of Employment Opportunities for Adults	408	3.51	0.79	6
Satisfaction of Services Specific to Older Adults	365	3.53	0.88	5
Satisfaction of Access to Affordable Housing	396	3.61	0.82	4
Satisfaction of Efforts to Improve Literacy	378	3.64	0.86	3
Satisfaction of Community Safety	398	3.73	0.77	2
Satisfaction of Quality of Early Childhood Education	391	3.81	0.82	1

Satisfaction with...	No Services Available	Very Dissatisfied	Dissatisfied	Satisfied	Very Satisfied
1. Access to affordable housing?	1.01% (4)	9.85% (39)	25.00% (99)	55.05% (218)	9.09% (36)
2. Availability of employment opportunities for adults?	0.98% (4)	10.05% (41)	31.37% (128)	51.72% (211)	5.88% (24)
3. Availability of youth employment opportunities?	1.55% (6)	11.40% (44)	30.83% (119)	51.55% (199)	4.66% (18)
4. Efforts to prevent and reduce poverty?	4.29% (17)	16.67% (66)	38.13% (151)	36.11% (143)	4.80% (19)
5. Efforts to prevent and reduce homelessness?	7.27% (28)	16.10% (62)	38.70% (149)	34.81% (134)	3.12% (12)
6. Availability of adequate public transportation?	7.46% (30)	25.12% (101)	28.61% (115)	35.07% (141)	3.73% (15)
7. Opportunities for affordable adult education?	7.75% (30)	13.44% (52)	32.82% (127)	40.57% (157)	5.43% (21)
8. Quality of early childhood education?	1.28% (5)	6.91% (27)	16.88% (66)	59.59% (233)	15.35% (60)
9. Efforts to improve literacy?	3.17% (12)	6.88% (26)	21.69% (82)	59.26% (224)	8.99% (34)
10. Availability of affordable daycare centers?	3.02% (11)	15.93% (58)	38.19% (139)	38.46% (140)	4.40% (16)
11. Quality of daycare centers?	2.84% (10)	15.34% (54)	31.25% (110)	44.03% (155)	6.53% (23)

Satisfaction with...	No Services Available	Very Dissatisfied	Dissatisfied	Satisfied	Very Satisfied
12. Affordability of medical services?	1.23% (5)	15.52% (63)	28.33% (115)	49.75% (202)	5.17% (21)
13. Availability of mental health services?	6.63% (25)	23.87% (90)	36.34% (137)	30.77% (116)	2.39% (9)
14. Affordability of mental health services?	7.40% (27)	23.01% (84)	38.08% (139)	29.32% (107)	2.19% (8)
15. Opportunities for adults with a disability to participate in programs with peers?	7.08% (24)	11.21% (38)	35.40% (120)	44.25% (150)	2.06% (7)
16. Opportunities for children with a disability to participate in programs with peers?	6.19% (21)	13.57% (46)	33.04% (112)	44.84% (152)	2.36% (8)
17. Community safety?	1.01% (4)	7.04% (28)	19.35 (77)	63.07% (251)	9.55% (38)
18. Availability of services for trauma and abuse?	7.71% (28)	14.60% (53)	37.19% (135)	36.36% (132)	4.13% (15)
19. Availability of alcohol/tobacco/drug treatment services?	4.66% (17)	13.97% (51)	32.33% (118)	45.21% (165)	3.84% (14)
20. Efforts to reduce harmful drug use?	3.77% (14)	26.15% (97)	37.47% (139)	30.46% (113)	2.16% (8)
21. Availability of services for people identifying as LGBTQ+?	14.11% (45)	18.18% (58)	26.06% (83)	32.60% (104)	9.09% (29)
22. Availability of services for people whose 1 st language is not English?	10.91% (37)	15.04% (51)	30.38% (103)	35.99% (122)	7.67% (26)
23. Availability of services for people who are re-entering the community after incarceration?	12.35% (40)	17.28% (56)	34.57% (112)	31.48% (102)	4.32% (14)
24. Availability of supervised after school youth activities?	3.13% (12)	19.27% (74)	35.42% (136)	36.72% (141)	5.47% (21)
25. Efforts to improve ethnic or racial harmony?	8.77% (32)	17.53% (64)	35.07% (128)	33.97% (124)	4.66% (17)
26. Services specific to youth?	5.14% (19)	18.65% (69)	37.30% (138)	33.78% (125)	5.14% (19)

Satisfaction with...	No Services Available	Very Dissatisfied	Dissatisfied	Satisfied	Very Satisfied
27. Services specific to older adults (60 years old and above)?	2.47% (9)	10.68% (39)	26.03% (95)	52.60% (192)	8.22% (30)

Appendix C: Importance Descriptive Statistics, Ratings, & Percentages

Importance Rankings

Higher mean scores indicate that the respondents felt it was important that the service or opportunity is available in Shippensburg (1 = Completely Unimportant, 2 = Unimportant, 3 = Important, 4 = Very Important)

Item	N	Mean	Standard Deviation	Rank
Importance of Services to Treat Gambling Addictions	395	2.82	0.91	20
Importance of Transportation Services	411	3.17	0.77	19
Importance of Opportunities for Adult Education	404	3.17	0.68	19
Importance of Programs to Improve Ethnic or Racial Harmony	398	3.25	0.77	18
Importance of Youth Employment Opportunities	408	3.26	0.7	17
Importance of Services to Prevent and Reduce Poverty	410	3.31	0.7	16
Importance of Services to Prevent and Reduce Homelessness	408	3.31	0.74	16
Importance of Affordable Housing	417	3.32	0.74	15
Importance of Services to Improve Literacy	400	3.35	0.69	14
Importance of Services to Reduce Alcohol/Tobacco/Drug Use	399	3.39	0.73	13
Importance of Opportunities for People with Disabilities	404	3.4	0.68	12
Importance of Services for People who are Homeless	403	3.41	0.7	11
Importance of Quality Housing	414	3.42	0.68	10
Importance of Services for Survivors of Domestic Violence	404	3.44	0.66	9
Importance of Affordable Daycare Centers	408	3.46	0.69	8
Importance of Services Specific to Youth	398	3.46	0.65	7
Importance of Employment Opportunities for Adults	412	3.48	0.69	6
Importance of Mental Health Services	406	3.49	0.66	5
Importance of Quality Early Childhood Education	405	3.51	0.65	4
Importance of Affordable Mental Health Services	402	3.51	0.65	4
Importance of Supervised Afterschool Youth Activities	402	3.52	0.66	3
Importance of Affordable Medical Services	409	3.54	0.63	2
Importance of Quality Daycare Centers	406	3.57	0.67	1

How *important* is it that the following are available within Shippensburg Area School District boundaries?

Importance of...	Very Unimportant	Unimportant	Important	Very Important
1. Affordable housing?	3.36% (14)	6.47% (27)	45.08% (188)	45.08% (188)
2. Quality housing?	2.90% (12)	2.42% (10)	44.93% (186)	49.76% (206)
3. Employment opportunities for adults?	2.91% (12)	2.43% (10)	38.35% (158)	56.31% (232)
4. Youth employment opportunities?	2.70% (11)	6.62% (27)	52.21% (213)	38.48% (157)
5. Services to prevent and reduce poverty?	3.41% (14)	3.41% (14)	51.95% (213)	41.22% (169)
6. Services to prevent and reduce homelessness?	2.94% (12)	7.60% (31)	45.34% (185)	44.12% (180)
8. Transportation services?	2.92% (12)	14.11% (58)	45.99% (189)	36.98% (152)
9. Opportunities for adult education?	1.98% (8)	10.40% (42)	56.44% (228)	31.19% (126)
10. Quality early childhood education?	1.73% (7)	3.46% (14)	36.79% (149)	58.02% (235)
11. Services to improve literacy?	2.25% (9)	5.50% (22)	47.50% (190)	44.75% (179)
12. Affordable daycare centers?	2.21% (9)	4.66% (19)	37.99% (155)	55.15% (225)
13. Quality daycare centers?	2.22% (9)	3.45% (14)	29.56% (120)	64.78% (263)
14. Affordable medical services?	1.71% (7)	2.20% (9)	36.67% (150)	59.41% (243)
15. Mental health services?	1.72% (7)	3.94% (16)	37.93% (154)	56.40% (229)
16. Affordable mental health services?	1.74% (7)	3.48% (14)	36.32% (146)	58.46% (235)
17. Opportunities for people with a disability?	2.23% (9)	4.21% (17)	45.05% (182)	48.51% (196)
18. Services for survivors of domestic violence?	1.98% (8)	3.71% (15)	42.82% (173)	51.49% (208)
19. Services for people who are homeless?	2.73% (11)	4.22% (17)	42.43% (171)	50.62% (204)
20. Services to reduce alcohol/tobacco/drug use?	2.51% (10)	7.52% (30)	38.85% (155)	51.13% (204)
22. Supervised after school youth activities?	1.74% (7)	4.23% (17)	34.33% (138)	59.70% (240)
23. Programs to improve ethnic or racial harmony?	3.27% (13)	10.55% (42)	43.72% (174)	42.46% (169)
24. Services specific to youth?	1.76% (7)	3.52% (14)	41.46% (165)	53.27% (212)
25. Services to treat gambling addictions?	8.61% (34)	26.08% (103)	40.25% (159)	25.06% (99)

Appendix D: Research Assistant Confidentiality Agreement

Research Assistant Confidentiality Agreement

This study, Shippensburg Community Resource Coalition Focus Groups, is being lead by Dr. Liz Fisher at Shippensburg University.

The study has the following objectives:

- To conduct focus groups,
- To collect data about social services and health in Shippensburg,
- To analyze the data collected,
- To include the data in a community assessment report.

Data from this study will be used to understand more about participants' opinions about social services and health in Shippensburg, PA.

I, _____, agree to:

1. Keep all the research information shared with me confidential by not discussing or sharing the research information in any form or format (e.g. audio recordings, transcripts, verbally) with anyone other than the Principal Investigator and research assistants;
2. Keep all research information in any form or format secure while it is in my possession;
3. Return all research information in any form or format to the Principal Investigator(s) when I have completed the research tasks;
4. After consulting with the Principal Investigator(s), erase or destroy all research information in any form or format regarding this research project that is not returnable to the Principal Investigator(s) (e.g. information stored on computer hard drive).

Research Assistant:

(print name) (signature) (date)

Principal Investigator:

(print name) (signature) (date)

If you have any questions or concerns about this study, please contact:
Dr. Liz Fisher, Professor, Shippensburg University, eafish@ship.edu, 717-477-1365

This study has been reviewed and approved by the Shippensburg University Human Subjects Committee.

This form is based on a form from Trent University, Ontario, Canada.

Appendix E: Stakeholder Interviews and Focus Groups Consent Form

Shippensburg Community Resource Coalition: Community Assessment

Informed Consent- Qualitative Stakeholder Interviews

Purpose

The purpose of this study is to assess the health and social service needs of the Shippensburg area. The information gathered will assist the Shippensburg Community Resource Coalition to determine future programming that will address the needs of the community.

You are being asked to participate in an interview that will last approximately 30 to 60 minutes and will include questions about your experiences in the community and your perception of community needs.

There are only minimal risks involved with this study. The conversation may be audio recorded and transcribed but will not include identifying information. This means that your name or any identifying information will not be included in any of the data, results, or findings.

Participants' Rights

I understand that my responses will be kept in the strictest confidence and will be available only to the researchers. No one will be able to identify me when the results are reported and my name will not appear anywhere in the written report unless consent is given below.

I also understand that I may dismiss any questions that I do not wish to answer or complete. I may choose not to participate or withdraw at any time during the study. If I am uncomfortable with any part of the study, I may contact the Principal Investigator, Dr. Liz Fisher, efish@ship.edu or 717-477-1365, or the Committee on Research on Human Subjects, at irb@ship.edu.

Consent to Participate

I acknowledge that I am at least eighteen years old, and that I understand my rights as a research participant as outlined above. I acknowledge that my participation is fully voluntary.

Print Name: _____ Date: _____

Signature: _____

Witness Name: _____

Witness Signature: _____

Shippensburg Community Resource Coalition: Community Assessment

Informed Consent- Focus Groups

Purpose

The purpose of this study is to assess the health and social service needs of the Shippensburg area. The information gathered will assist the Shippensburg Community Resource Coalition to determine future programming that will address the needs of the community.

You are being asked to participate in a focus group that will last between one and one and a half hours and will include questions about your experiences in the community and your perception of community needs. The conversation will be audio recorded and transcribed without identifying information. This means that your name or any identifying information will not be included in any of the data, results, or findings.

There are minimal risks involved with this study, such as discomfort associated with sharing personal experiences or opinions. You are free to share or not share during this conversation. This project will help to learn more about gaps in services, identifying resources, and discovering issues that can benefit community members. In exchange for your attendance at this community conversation you will receive (circle all that apply): \$___ gift card at the beginning of the session/free meal. You may keep these regardless of your participation in the group.

Participants' Rights

I understand that my responses will be kept in the strictest confidence and will be available only to the researcher. No one will be able to identify me when the results are reported and my name will not appear anywhere in the written report. I also understand that I may dismiss any questions that I do not wish to answer or complete. I understand that the consent form will be kept separate from the data records to ensure confidentiality. I may choose not to participate or withdraw at any time during the study.

If I am uncomfortable with any part of the study, I may contact the Principal Investigator, Dr. Liz Fisher, efish@ship.edu or 717-477-1365, or the Committee on Research on Human Subjects, at irb@ship.edu.

Consent to Participate

I acknowledge that I am at least eighteen years old, and that I understand my rights as a research participant as outlined above. I acknowledge that my participation is fully voluntary.

Print Name: _____ Date: _____

Signature: _____

Witness Name: _____

Witness Signature: _____

Appendix F: Key Stakeholder Interview Guide

Start with script about SCRC, the goals of the community assessment, and info on the social determinants of health

Provide a handout regarding Social Determinants of Health

Interview Questions for Health Coalition Key Stakeholders

1. How would you describe the overall health of the Shippensburg community?
2. What do you believe are the unmet needs of the community as it relates to health?
What are the unmet needs of the community as it relates to the social determinants of health?
3. What are the barriers to those needs being met?
4. What are the services related to health that your organization offers to the Shippensburg community?
5. What additional service(s) could your organization provide to meet the needs of the community?
6. What are the barriers to providing these services?
7. What services do you think the Shippensburg Community Resource Coalition could provide to meet the needs of the community?
8. What are the opportunities for partnering to provide services in the community?



WHAT ARE SOCIAL DETERMINANTS OF HEALTH?

According to the Office of Disease Prevention and Health Promotion (ODPH), social determinants of health are "conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks" (Healthy People, 2018). The ODPH has created a campaign called Healthy People 2020 in an effort to address the social determinants of health. They have established 5 key areas of focus.



ECONOMIC STABILITY

Employment, Food Insecurity, Housing Instability, Poverty

EDUCATION

Early Childhood Education and Development, Enrollment in Higher Education, High School Graduation, Language and Literacy

SOCIAL & COMMUNITY CONTEXT

Civic Participation, Discrimination, Incarceration, Social Cohesion

HEALTH & HEALTHCARE

Access to Health Care, Access to Primary Care, Health Literacy

NEIGHBORHOOD & BUILT ENVIRONMENT

Access to Foods that Support Healthy Eating Patterns, Crime and Violence, Environmental Conditions, Quality of Housing

For more information please visit <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

Appendix H: Focus Group Facilitation Guide

SCRC Community Assessment Focus Group Script & Details

Date & Time of Focus Group:

Location, including directions:

Arrival Time:

Co-facilitator 1 Name & Phone Number:

Co-facilitator 2 Name & Phone Number:

Recorder/TimeKeeper Name & Phone Number:

Other Important Contact Information: Liz Fisher 717-440-5665 & Laura Masgalas

Number of scheduled participants =

Reminders:

- The goals of the focus groups are to:
 - Encourage discussion about strengths and challenges in the Shippensburg area related to health and social services.
 - To hear from other people in the group, exchange ideas and have face-to-face interaction.
 - To create synergy, build off the energy of the group.
 - To get more information than can usually be obtained on a written survey.
- Set the tone: participants should have fun and feel good about the session.
- Make sure every participant is heard.
- Get full answers (not just “we need more programs” Follow up to find out what types).
- Be sure you understand the comments.
- Monitor time closely.
- Keep discussion on track.
- Head off destructive exchanges of opinion about individual items.

Materials:

- | | |
|---|---|
| ○ Audio Recorder – check them out in department main office | ○ Evaluation Forms |
| ○ Paper & Pen for Recorder/TimeKeeper | ○ Watch |
| ○ Name Tags & Markers | ○ Recorder Form |
| ○ Pens/Pencils for participants | ○ Flip Chart Paper w/ guidelines & agenda |
| ○ Script | ○ Gift-cards |
| ○ Informed Consent Forms (2/participant) | ○ Refreshments |
| | ○ SCRC materials |

Opening

Good morning/afternoon/evening and thank you for coming to participate today in the focus group. My name is (insert name), and my partner's name is (insert name), and we are social work students from Shippensburg University who are working with the Shippensburg Community Resource Coalition. (Also give time for notetakers and Liz/Laura introduce themselves and explain their roles.) The purpose of this group is to discuss the strengths and weaknesses of health and social services in the Shippensburg area.

We have chosen to conduct these groups because they allow you to voice your thoughts, feelings, concerns, and comments about a particular topic being studied in ways that a survey cannot. Your opinion is important and your experiences matter. We are looking forward to learning from you. Throughout the conversation, we will ask a series of questions designed to get your feedback. This session should last approximately one to one and a half hours.

All of your responses will be kept strictly confidential and no names will be used outside of this room. We want to make you aware that we are audio recording this session, and the tapes will be transcribed. After the transcribing is complete all tapes will be fully erased and destroyed. We have a consent form that reviews this information so let's take a look at it now. (Read through the consent form & ask them to sign one copy and keep the 2nd.) Do you have any questions?

Warm-Up

First, we want to have a "kitchen table" conversation meaning everyone has the chance to participate and no one dominates. Second, there are no right or wrong answers. We want you to talk about your own beliefs, experiences, and views instead of going with the "expert" opinion. Third, we want everyone to keep an open mind and try to understand opinions different from yours. Fourth, we want everyone to try their best to stay on topic, and avoid going off topic. Lastly, we want this to be a meaningful conversation for everyone and want it to be a fun experience. Any questions? Let's begin with the first question.

We are going to talk about several different topics so we have a handout to share what these topics are. You can choose to share as much or as little as you like. (The topics on the handout include: employment, access to food, housing, education, health care, mental health care, crime & safety, discrimination)

Questions

Intro

1. How long have you lived in the Shippensburg area? And, please share a little about yourself.
2. Where do you go for recreation and/or to socialize?

3. How do people find out where to go for help with the topics on this paper?
4. What are the strengths and weaknesses of employment in Shippensburg?
 - a. Where have you or would you go for help if you or someone you know was looking for employment? (If they went for help, what was the experience like? What was the result?)
5. What are the strengths and weaknesses related to food in Shippensburg? (For example, is it affordable? Healthy? What you like to buy?)
 - a. Where have you or would you go for help if you or someone you know was looking for help getting enough food for you and/or family? (If they went for help, what was the experience like? What was the result?)
6. What are the strengths and weaknesses of housing in Shippensburg?
 - a. Where have you or would you go for help if you or someone you know was looking for housing? (If they went for help, what was the experience like? What was the result?)
7. What are the strengths and weaknesses related to education in Shippensburg? (for example, preschool/early childhood, public schools, GED programs, high school graduation, programs to help people learn to read, college classes)
 - a. Where have you or would you go for help if you or someone you know was looking for education services? (If they went for help, what was the experience like? What was the result?)
8. What are the strengths and weaknesses of health care in Shippensburg?
 - a. Where have you or would you go for help if you or someone you know was looking for health services? (If they went for help, what was the experience like? What was the result?)
9. What are the strengths and weaknesses of mental health care in Shippensburg?
 - a. Where have you or would you go for help if you or someone you know was looking for mental health services? (If they went for help, what was the experience like? What was the result?)
10. What is crime and safety like in Shippensburg?
 - a. Where have you or would you go for help if you or someone you know was looking for help related to crime or safety? (If they went for help, what was the experience like? What was the result?)
11. What is the extent of discrimination in Shippensburg?
 - a. Where would you or someone you know go for help if experiencing discrimination?
12. To what extent do you feel like your voice and opinion matters in the community?
13. What do you think are some of the biggest challenges or current problems in your area?
14. Anything else that you would like to share or questions that you think we should have asked?

Closing

Thank you for sharing your time with us! Please feel free to express any additional concerns you may have on the evaluation form (hand this out). There is also contact information on your informed consent form if you would like to talk to someone personally.

The results of this community assessment will be put into a final report, without your names included, and available to the community in 2019. If you would like a copy of the results you can leave your name and mailing address or email address on one of these index cards. As we said before, your confidentiality will be ensured.

The data will be used to help improve programs in the community.

Strengths and Weaknesses of Shippensburg Related to:

- Employment



- Food



- Housing



- Education



- Health Care



- Mental Health



- Crime and Safety



Appendix J: 2014 and 2019 Comparison of Satisfaction and Importance

How **important** is it that the following are available within Shippensburg Area School District boundaries?

The percent and (number) of respondents that selected an answer are in the chart below:

Importance of...	Very Unimportant 2014	Very Unimportant 2019	Unimportant 2014	Unimportant 2019	Important 2014	Important 2019	Very Important 2014	Very Important 2019
Affordable housing?	1.8% (8)	3.36% (14)	1.3% (6)	6.47% (27)	42.2% (188)	45.08% (188)	45.7% (204)	45.08% (188)
Quality housing?	1.6% (7)	2.90% (12)	0.4% (2)	2.42% (10)	45.5% (203)	44.93% (186)	43.3% (193)	49.76% (206)
Employment opportunities for adults?	1.3% (6)	2.91% (12)	2.2% (10)	2.43% (10)	29.6% (132)	38.35% (158)	56.3% (251)	56.31% (232)
Youth employment opportunities?	1.1% (5)	2.70% (11)	3.4% (15)	6.62% (27)	48% (214)	52.21% (213)	35.2% (157)	38.48% (157)
Services to prevent and reduce poverty?	1.8% (8)	3.41% (14)	3.1% (14)	3.41% (14)	44.8% (200)	51.95% (213)	38.6% (172)	41.22% (169)
Services to prevent and reduce homelessness?	1.6% (7)	2.94% (12)	5.4% (24)	7.60% (31)	40.6% (181)	45.34% (185)	39.7% (177)	44.12% (180)
Support Groups?	1.1% (5)	(X)	6.5% (29)	(X)	49.1% (219)	(X)	30.3% (135)	(X)
Transportation services?	1.1% (5)	2.92% (12)	7.2% (32)	14.11% (58)	45.15 (201)	45.99% (189)	36.3% (162)	36.98% (152)
Opportunities for adult education?	1.6% (7)	1.98% (8)	5.6% (25)	10.40% (42)	50.2% (224)	56.44% (228)	31.4% (140)	31.19% (126)
Quality early childhood education?	0.9 % (4)	1.73% (7)	2.2% (10)	3.46% (14)	33.4% (149)	36.79% (149)	49.6% (221)	58.02% (235)
Services to improve literacy?	1.1% (5)	2.25% (9)	4.5% (20)	5.50% (22)	44.4% (198)	47.50% (190)	37% (165)	44.75% (179)

Importance of...	Very Unimportant 2014	Very Unimportant 2019	Unimportant 2014	Unimportant 2019	Important 2014	Important 2019	Very Important 2014	Very Important 2019
Affordable daycare centers?	2% (9)	2.21% (9)	3.8% (17)	4.66% (19)	35.4% (158)	37.99% (155)	44.8% (200)	55.15% (225)
Quality daycare centers?	1.8% (8)	2.22% (9)	3.6% (16)	3.45% (14)	33.2% (148)	29.56% (120)	48% (214)	64.78% (263)
Affordable medical services?	0.4% (2)	1.71% (7)	1.3% (6)	2.20% (9)	30.7% (137)	36.67% (150)	56.3% (251)	59.41% (243)
Mental health services?	0.7% (3)	1.72% (7)	3.1% (14)	3.94% (16)	37 % (165)	37.93% (154)	46.2% (206)	56.40% (229)
Affordable mental health services?	0.7% (3)	1.74% (7)	4% (18)	3.48% (14)	37.7% (168)	36.32% (146)	44.4% (198)	58.46% (235)
Opportunities for people with a disability?	0.9% (4)	2.23% (9)	3.1% (14)	4.21% (17)	42.4% (188)	45.05% (182)	41.5% (185)	48.51% (196)
Services for survivors of domestic violence?	1.6% (7)	1.98% (8)	3.6% (16)	3.71% (15)	45.3% (202)	42.82% (173)	36.5% (163)	51.49% (208)
Services for people who are homeless?	2% (9)	2.73% (11)	6.1% (27)	4.22% (17)	41% (183)	42.43% (171)	38.8% (173)	50.62% (204)
Services to reduce alcohol/tobacco/drug use?	1.3% (6)	2.51% (10)	6.3% (28)	7.52% (30)	43.3% (193)	38.85% (155)	36.8% (164)	51.13% (204)
Indoor recreation facilities?	2% (9)	(X)	5.4% (24)	(X)	39.9% (178)	(X)	42.4% (189)	(X)
Supervised after school youth activities?	1.3% (6)	1.74% (7)	2.5% (11)	4.23% (17)	37.9% (169)	34.33% (138)	46% (205)	59.70% (240)
Programs to improve ethnic or racial harmony?	1.8% (8)	3.27% (13)	9% (40)	10.55% (42)	43.9% (196)	43.72% (174)	31.2% (139)	42.46% (169)

Importance of...	Very Unimportant 2014	Very Unimportant 2019	Unimportant 2014	Unimportant 2019	Important 2014	Important 2019	Very Important 2014	Very Important 2019
Services specific to youth?	2.2% (10)	1.76% (7)	3.8% (17)	3.52% (14)	38.8% (173)	41.46% (165)	43.3% (193)	53.27% (212)
Services to treat gambling addictions?	(X)	8.61% (34)	(X)	26.08% (103)	(X)	40.25% (159)	(X)	25.06% (99)

Importance Rankings

- Higher mean scores indicate that the respondents felt it was important that the service or opportunity is available in Shippensburg
 - 1 = Completely Unimportant, 2 = Unimportant, 3 = Important, 4 = Very Important
- If an item has a mean score of 3.0+, on average, those who took the community survey feel that the item is important to have in the community.
- Std. Dev = Standard Deviation

Item	N 2014	N 2019	Mean 2014	Mean 2019	Std Dev. 2014	Std Dev. 2019	Rank 2014	Rank 2019
Importance of Services to Treat Gambling Addictions	(X)	395	(X)	2.82	(X)	0.91	(X)	20
Importance of Transportation Services	400	411	3.30	3.17	0.67	0.77	4	19
Importance of Opportunities for Adult Education	396	404	3.26	3.17	0.65	0.68	3	19
Importance of Programs to Improve Ethnic or Racial Harmony	383	398	3.22	3.25	0.71	0.77	1	18
Importance of Youth Employment Opportunities	392	408	3.34	3.26	0.61	0.7	7	17
Importance of Services to Prevent and Reduce Poverty	394	410	3.36	3.31	0.65	0.7	10	16
Importance of Services to Prevent and Reduce Homelessness	390	408	3.37	3.31	0.74	0.74	12	16
Importance of Affordable Housing	406	417	3.45	3.32	0.62	0.74	17	15
Importance of Services to Improve Literacy	388	400	3.35	3.35	0.64	0.69	9	14
Importance of Services to Reduce Alcohol/Tobacco/Drug Use	391	399	3.32	3.39	0.67	0.73	5	13
Importance of Opportunities for People with Disabilities	393	404	3.42	3.4	0.61	0.68	14	12
Importance of Services for People who are Homeless	392	403	3.33	3.41	0.70	0.7	6	11
Importance of Quality Housing	406	414	3.44	3.42	0.60	0.68	16	10
Importance of Services for Survivors of Domestic Violence	388	404	3.34	3.44	0.65	0.66	8	9
Importance of Affordable Daycare Centers	386	408	3.43	3.46	0.69	0.69	15	8
Importance of Services Specific to Youth	393	398	3.40	3.46	0.69	0.65	13	7
Importance of Employment Opportunities for Adults	400	412	3.57	3.48	0.62	0.69	23	6
Importance of Mental Health Services	391	406	3.48	3.49	0.61	0.66	21	5

Item	N 2014	N 2019	Mean 2014	Mean 2019	Std Dev. 2014	Std Dev. 2019	Rank 2014	Rank 2019
Importance of Quality Early Childhood Education	385	405	3.53	3.51	0.60	0.65	22	4
Importance of Affordable Mental Health Services	387	402	3.45	3.51	0.62	0.65	18	4
Importance of Supervised Afterschool Youth Activities	391	402	3.47	3.52	0.63	0.66	19	3
Importance of Affordable Medical Services	397	409	3.61	3.54	0.55	0.63	24	2
Importance of Quality Daycare Centers	386	406	3.47	3.57	0.68	0.67	20	1
Importance of Support Groups	388	(X)	3.25	(X)	0.64	(X)	2	(X)
Importance of Indoor Recreation Facilities	401	(X)	3.36	(X)	0.70	(X)	11	(X)

How ***satisfied*** are you with the opportunities & services available within Shippensburg Area School District boundaries?

The percent and (number) of respondents that selected an answer are in the chart below:

Satisfaction with...	No Services Available 2014	No Services Available 2019	Very Dissatisfied 2014	Very Dissatisfied 2019	Dissatisfied 2014	Dissatisfied 2019	Satisfied 2014	Satisfied 2019	Very Satisfied 2014	Very Satisfied 2019
Access to affordable housing?	2.9% (13)	1.01% (4)	7.6% (34)	9.85% (39)	16.8% (75)	25.00% (99)	53.4% (238)	55.05% (218)	9.9% (44)	9.09% (36)
Access to quality housing?	2.2% (10)	(X)	6.5% (29)	(X)	15.7% (70)	(X)	56.1% (250)	(X)	11.9% (53)	(X)
Availability of employment opportunities for adults?	2.5% (11)	0.98% (4)	14.6% (65)	10.05% (41)	32.7% (146)	31.37% (128)	36.8% (164)	51.72% (211)	4.5% (20)	5.88% (24)
Availability of youth employment opportunities?	2.7% (12)	1.55% (6)	15.7 % (70)	11.40% (44)	29.4% (131)	30.83% (119)	35% (156)	51.55% (199)	3.6% (16)	4.66% (18)
Efforts to prevent and reduce poverty?	4.7% (21)	4.29% (17)	15% (67)	16.67% (66)	28.7% (128)	38.13% (151)	33.6% (150)	36.11% (143)	3.4% (15)	4.80% (19)
Efforts to prevent and reduce homelessness?	7% (31)	7.27% (28)	12.6% (56)	16.10% (62)	24.7% (110)	38.70% (149)	35.7% (159)	34.81% (134)	2.9% (13)	3.12% (12)
Availability of support groups?	3.6% (16)	(X)	7.8% (35)	(X)	23.8% (106)	(X)	42.4% (189)	(X)	4% (16)	(X)
Availability of adequate public transportation?	4.9% (22)	7.46% (30)	15.9% (71)	25.12% (101)	24.7% (110)	28.61% (115)	37.4% (167)	35.07% (141)	4% (18)	3.73% (15)
Opportunities for affordable adult education?	1.3% (6)	7.75% (30)	8.3% (37)	13.44% (52)	19.7% (88)	32.82% (127)	49.1% (219)	40.57% (157)	9.6% (43)	5.43% (21)
Quality of early childhood education?	2.7% (12)	1.28% (5)	6.5% (29)	6.91% (27)	13% (58)	16.88% (66)	51.3% (229)	59.59% (233)	10.5% (47)	15.35% (60)
Efforts to improve literacy?	3.4% (15)	3.17% (12)	6.3% (28)	6.88% (26)	20.9% (93)	21.69% (82)	44.6% (199)	59.26% (224)	5.8% (26)	8.99% (34)

Satisfaction with...	No Services Available 2014	No Services Available 2019	Very Dissatisfied 2014	Very Dissatisfied 2019	Dissatisfied 2014	Dissatisfied 2019	Satisfied 2014	Satisfied 2019	Very Satisfied 2014	Very Satisfied 2019
Availability of affordable daycare centers?	3.4% (15)	3.02% (11)	10.1% (45)	15.93% (58)	20% (89)	38.19% (139)	39% (174)	38.46% (140)	5.4% (24)	4.40% (16)
Quality of daycare centers?	2.9% (13)	2.84% (10)	5.6% (25)	15.34% (54)	16.4% (73)	31.25% (110)	47.5% (212)	44.03% (155)	4% (18)	6.53% (23)
Affordability of medical services?	2.2% (10)	1.23% (5)	12.3% (55)	15.52% (63)	24.4% (109)	28.33% (115)	43.3% (193)	49.75% (202)	7.2% (32)	5.17% (21)
Availability of mental health services?	5.2% (23)	6.63% (25)	13.5% (60)	23.87% (90)	25.1% (112)	36.34% (137)	29.1% (130)	30.77% (116)	4.7% (21)	2.39% (9)
Affordability of mental health services?	5.4% (24)	7.40% (27)	13.5% (60)	23.01% (84)	22.2% (99)	38.08% (139)	29.1% (130)	29.32% (107)	4.3% (19)	2.19% (8)
Opportunities for people with a disability?	3.8% (17)	(X)	11.2% (50)	(X)	26% (116)	(X)	30.7% (137)	(X)	5.4% (24)	(X)
Opportunities for adults with a disability to participate in programs with peers?	(X)	7.08% (24)	(X)	11.21% (38)	(X)	35.40% (120)	(X)	44.25% (150)	(X)	2.06% (7)
Opportunities for children with a disability to participate in programs with peers?	(X)	6.19% (21)	(X)	13.57% (46)	(X)	33.04% (112)	(X)	44.84% (152)	(X)	2.36% (8)
Community safety?	1.1% (5)	1.01% (4)	2.9% (13)	7.04% (28)	12.3% (55)	19.35 (77)	66.1% (295)	63.07% (251)	10.1% (45)	9.55% (38)
Availability of services for trauma and abuse?	7% (31)	7.71% (28)	7.8% (35)	14.60% (53)	23.3% (104)	37.19% (135)	31.2% (139)	36.36% (132)	2.9% (13)	4.13% (15)
Availability of shelters for people who are homeless?	13.7% (61)	(X)	13% (58)	(X)	29.6% (132)	(X)	18.2% (81)	(X)	2% (9)	(X)

Satisfaction with...	No Services Available 2014	No Services Available 2019	Very Dissatisfied 2014	Very Dissatisfied 2019	Dissatisfied 2014	Dissatisfied 2019	Satisfied 2014	Satisfied 2019	Very Satisfied 2014	Very Satisfied 2019
Availability of alcohol/tobacco/drug treatment services?	5.6% (25)	4.66% (17)	9% (40)	13.97% (51)	19.3% (86)	32.33% (118)	38.3% (172)	45.21% (165)	3.1% (14)	3.84% (14)
Efforts to reduce harmful drug use?	5.2% (23)	3.77% (14)	12.1% (54)	26.15% (97)	26.2 (117)	37.47% (139)	31.2 % (139)	30.46% (113)	2.7% (12)	2.16% (8)
Availability of indoor recreation facilities?	11.9% (53)	(X)	25.3% (113)	(X)	35.9% (160)	(X)	13.5% (60)	(X)	3.4% (15)	(X)
Availability of services for people identifying as LGBTQ+?	(X)	14.11% (45)	(X)	18.18% (58)	(X)	26.06% (83)	(X)	32.60% (104)	(X)	9.09% (29)
Availability of services for people whose 1 st language is not English?	(X)	10.91% (37)	(X)	15.04% (51)	(X)	30.38% (103)	(X)	35.99% (122)	(X)	7.67% (26)
Availability of services for people who are re-entering the community after incarceration?	(X)	12.35% (40)	(X)	17.28% (56)	(X)	34.57% (112)	(X)	31.48% (102)	(X)	4.32% (14)
Availability of supervised after school youth activities?	5.6% (25)	3.13% (12)	19.1% (85)	19.27% (74)	30.3% (135)	35.42% (136)	22.9% (102)	36.72% (141)	3.1% (14)	5.47% (21)
Efforts to improve ethnic or racial harmony?	5.2% (23)	8.77% (32)	11.7% (52)	17.53% (64)	26.7 (119)	35.07% (128)	30% (134)	33.97% (124)	3.6% (16)	4.66% (17)
Services specific to youth?	5.8% (26)	5.14% (19)	29.3% (86)	18.65% (69)	31.4% (140)	37.30% (138)	22.4% (100)	33.78% (125)	3.1% (14)	5.14% (19)
Services specific to older adults (60 years old and above)?	(X)	2.47% (9)	(X)	10.68% (39)	(X)	26.03% (95)	(X)	52.60% (192)	(X)	8.22% (30)

Satisfaction Rating

- The higher the mean score, the more satisfaction with the service or opportunity
 - 0 = No Services Available, 1 = Very Dissatisfied, 2 = Dissatisfied, 3 = Satisfied, 4 = Very Satisfied
- If an item has a mean score of 3.0+, on average, those who took the community survey are satisfied with that item.
- Std. Dev = Standard Deviation

Item	N 2014	N 2019	Mean 2014	Mean 2019	Std. Dev. 2014	Std. Dev. 2019	Rank 2014	Rank 2019
Satisfaction of Affordability of Mental Health Services	333	365	3.18	2.96	1.03	0.95	6	25
Satisfaction of Available of Mental Health Services	347	377	3.19	2.98	1.01	0.95	8	24
Satisfaction of Services for People who are Re-Entering the Community after Incarceration	(X)	324	(X)	2.98	(X)	1.07	(X)	24
Satisfaction of Efforts to Reduce Harmful Drug Use	347	371	3.17	3.01	0.98	0.9	5	23
Satisfaction of Availability of Adequate Transportation	390	402	3.22	3.02	0.99	1.02	12	22
Satisfaction of Availability of Services for People Identifying as LGBTQ+	(X)	319	(X)	3.04	(X)	1.2	(X)	21
Satisfaction of Efforts to Improve Ethnic or Racial Harmony	345	365	3.20	3.08	0.98	1.02	10	20
Satisfaction of Efforts to Prevent & Reduce Homelessness	370	385	3.18	3.1	1.02	0.96	7	19
Satisfaction of Services for People whose 1st Language Is Not English	(X)	339	(X)	3.14	(X)	1.11	(X)	18
Satisfaction of Availability of Services for Trauma and Abuse	322	363	3.21	3.15	1.02	0.98	11	17
Satisfaction of Services Specific to Youth	366	370	2.97	3.15	0.97	0.96	3	16
Satisfaction of Efforts to Prevent & Reduce Poverty	381	396	3.19	3.2	0.96	0.92	9	15
Satisfaction of Opportunities for Adult Education	393	387	3.65	3.22	0.85	1.01	22	14
Satisfaction of Availability of Supervised After School Youth Activities	362	384	2.98	3.22	0.98	0.92	4	14
Satisfaction of Opportunities for Adults with a Disability	(X)	339	(X)	3.23	(X)	0.93	(X)	13
Satisfaction of Opportunities for Children with a Disability	(X)	339	(X)	3.24	(X)	0.93	(X)	12
Satisfaction of Availability of Affordable Daycare Centers	347	364	3.42	3.25	0.95	0.88	17	11

Item	N 2014	N 2019	Mean 2014	Mean 2019	Std. Dev. 2014	Std. Dev. 2019	Rank 2014	Rank 2019
Satisfaction of Availability of Alcohol/Tobacco/Drug Treatment	337	365	3.33	3.3	0.95	0.99	16	10
Satisfaction of Quality Daycare Centers	342	352	3.57	3.36	0.85	0.92	21	9
Satisfaction of Affordability of Medical Services	401	406	3.45	3.42	0.92	0.86	19	8
Satisfaction of Availability of Youth Employment Opportunities	385	386	3.24	3.46	0.91	0.81	13	7
Satisfaction of Availability of Employment Opportunities for Adults	407	408	3.29	3.51	0.89	0.79	14	6
Satisfaction of Services Specific to Older Adults	(X)	365	(X)	3.53	(X)	0.88	(X)	5
Satisfaction of Access to Affordable Housing	404	396	3.66	3.61	0.90	0.82	23	4
Satisfaction of Efforts to Improve Literacy	362	378	3.53	3.64	0.89	0.86	20	3
Satisfaction of Community Safety	414	398	3.87	3.73	0.68	0.77	26	2
Satisfaction of Quality of Early Childhood Education	375	391	3.72	3.81	0.90	0.82	24	1
Satisfaction of Opportunities for People with a Disability	344	(X)	3.29	(X)	0.97	(X)	15	(X)
Satisfaction of Availability of Shelters for People who are Homeless	341	(X)	2.76	(X)	1.08	(X)	2	(X)
Satisfaction of Availability of Indoor Recreation Facilities	403	(X)	2.67	(X)	1.01	(X)	1	(X)
Satisfaction of Availability of Support Groups	367	(X)	3.43	(X)	0.90	(X)	18	(X)
Satisfaction of Access to Quality Housing	412	(X)	3.75	(X)	0.86	(X)	25	(X)

Appendix K: 2014 and 2019 Survey Demographic Comparison

Item	2014 SCRC Survey	2019 SCRC Survey
Average Household Size	2.06 adults	3.3 people
Gender (Reported as Sex in ACS)		
Male	31.3%	22.7%
Female	68.7%	73.7%
Non-binary/ Third Gender	(X)	0.28%
Prefer Not to Say	(X)	2.5%
Prefer to Self-Describe	(X)	0.84%
Transgender		
Yes	(X)	0.86%
No	(X)	97.14%
Prefer Not to Say	(X)	2.00%
Member of the Lesbian, Gay, Bisexual and/or Transgender (LGBT) Community		
Yes	(X)	3.13%
No	(X)	81.53%
Prefer not to say	(X)	2.27%
No, but I identify as an Ally	(X)	13.07%
Race		
Native Hawaiian or Pacific Islander	0.2%	0%
American Indian or Native Alaskan	0.7%	0.84%
Asian	0.7%	1.4%
Multiracial	1.2%	1.7%
Black African American	1.7%	2.0%
White	93.1%	90.5%
Other	1.7%	0.84%
Prefer Not to Say	0.4%	3.9%
Hispanic or Latino		
Yes	1.1%	1.74%
No	98.9%	98.26%
English as Primary Language		
Yes	(X)	98.3%
No	(X)	1.7%
Home Ownership		
Own	60.3%	73.0%
Rent	29.8%	25.0%
Other	0.1%	2.0%
Satisfaction with Shippensburg as Place to Live		
Very Dissatisfied	4.9%	3.08%
Dissatisfied	3.8%	10.64%
Neither Satisfied or Dissatisfied	15.9%	20.17%
Satisfied	48.0%	52.66%
Very Satisfied	16.8%	13.45%
Age Distribution		
15 to 19 years (only 18+ in survey)	0.8%	0.88%

Item	2014 SCRC Survey	2019 SCRC Survey
18 to 24 years	(X)	2.64%
20 to 24 years	7.6%	1.76%
25 to 34 years	15.4%	15.00%
35 to 44 years	25.2%	30.00%
45 to 54 years	19.5%	20.59%
55 to 59 years	11.5%	5.88%
60 to 64 years	6.8%	6.18%
65 to 74 years	8.7%	13.24%
75 to 84 years	3.5%	4.41%
85 years and over	0.5%	1.76%
Mean (Average) age (years)	46	45
Household Composition		
With children under 18 present	48.1%	66.6%
Householder living alone	51.9%	13.8%
Educational Attainment (18 years old+)		
Less than 9 th grade	0.9%	0.57%
9 th to 12 th grade, no diploma	5.8%	4.53%
High school graduate or equivalency	25.2%	17.56%
Some college, no degree	18.1%	13.60%
Technical School without an associate degree		4.25%
Associate degree	7.4%	10.76%
Bachelor's degree	15.9%	22.38%
Graduate or professional degree	26.5%	26.35%
Total High School Diploma and Higher		94.90%
Bachelor's Degree or Higher		48.7%
Employment		
Currently Working	70.3%	65.52%
Currently working full time (32+ hours a week)		55.46%
Currently working part-time (less than 32 hours a week)		10.06%
Unemployed		7.26%
Currently not working but looking for work	7.7%	4.60%
Not working and not looking for work	2.7%	4.89%
Retired – not working and not looking	10.7%	18.68%
Disabled – not working and not looking	8.5%	6.32%
Household Income		
Less than \$10,000	14.4%	8.9%
\$10,000 to \$14,999	6.4%	7.3%
\$15,000 to \$24,999	9.9%	5.2%
\$25,000 to \$34,999	10.2%	7.9%
\$35,000 to \$49,999	10.5%	9.2%
\$50,000 to \$74,999	14.6%	16.8%
\$75,000 to \$99,999	16.3%	16.5%
\$100,000 to \$149,999	13.8%	16.8%
\$150,000 to \$199,999	2.5%	9.8%
\$200,000 or more	1.4%	1.5%
Mean household income (dollars)	\$56,700	\$65,301

Item	2014 SCRC Survey	2019 SCRC Survey
Satisfaction with Shippensburg as Place to Live		
Very Dissatisfied	4.9%	3.08%
Dissatisfied	3.8%	10.64%
Neither Satisfied or Dissatisfied	15.9%	20.17%
Satisfied	48.0%	52.66%
Very Satisfied	16.8%	13.45%