

Community Needs Assessment 2010

Bradley County, Tennessee

**Sponsored by
United Way of Bradley County**

**In Support of
Bradley County Hospital Fund**

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History

In 2007, the United Way of Bradley County (UWBC) was selected by the Bradley Memorial Hospital Board of Trustees as the administrative entity for approximately twenty million dollars resulting from the sale of Bradley Memorial Hospital. These funds, separate from the regular United Way funds, were designated to provide health, wellness, and quality of life for Bradley County residents. The Bradley Memorial Hospital Endowment Fund (BMHEF) was thus established—designed and stipulated to preserve the corpus and to dedicate proceeds through interest and dividends toward helping to meet the community’s needs related to health, wellness, and quality of life.

To systematically and fairly distribute assistance from the BMHEF, a method was needed to prioritize community needs. Following the inception of the BMHEF in 2007, United Way of Bradley County, serving as administrator for BMHEF, contracted with the University of Tennessee at Chattanooga (UTC) for a preliminary local needs assessment centered around the questions: *“What is important to our community?”* and *“What assets do we have that can be used to improve and strengthen the health and social services environment of our community?”* The resulting *2008 Community Needs Assessment Report*, available at www.unitedwaybc.com, focused on county and state census data, public health data, and *Safe Schools/Healthy Students* federal project data. Interviews were conducted with informed citizens familiar with older adults and individuals with disabilities and a public face-to-face assessment at the Cleveland Housing Authority office.

In early 2008, the United Way contracted with the College of Social Work and the Office of Research and Public Services at the University of Tennessee at Knoxville

(UTK) to expand the original assessment to include a demographic profile of Bradley County and its people for the years 1990, 2000, and 2006. This report, completed in 2008, presented comparisons of demographics for Bradley County, State of Tennessee, and United States. Data originated from several sources but was primarily collected from the United States Census Bureau. The UTK report is available at www.unitedwaybc.com.

The UTC and UTK studies of 2007 and 2008 provided important demographic information to the UWBC toward systematic BMHEF distributions in 2008 and 2009. In 2009, an additional dimension for needs assessment emerged: a current *perception* of community needs that could be acquired quickly and inexpensively.

In 2009, UWBC decided to develop an abbreviated community assessment process that could be implemented in any year, completed within three months, and done exclusively through existing UWBC staff and volunteers with minimal office expense. Local evaluation contractors who presented backgrounds both in assessment processes and knowledge of the Bradley County community, were enlisted to develop a Community Needs Assessment (CNA) process. The evaluators' recommendations were submitted to the UWBC Board and the resulting process was utilized for the first time in the distribution of BMHEF in September 2010.

Purpose

The primary purpose of the Community Needs Assessment (CNA) is to provide current, independently acquired evidence of perceived community needs to qualified groups and agencies who may seek funding through the BMHEF. The CNA will also provide additional independent data and information to the UWBC for use in the annual distribution of available BMHEF through a competitive grant application process. The

CNA also must be a reasonable process that produces useful supporting data within constraints of UWBC and BMHEF resources, recognizing that the assessment would need to be replicated frequently to best reflect changing community needs, perhaps once every two or three years.

Evaluators, in collaboration with United Way staff, formed an *ad hoc* Community Needs Assessment Team (CNAT) comprised of representatives from all United Way agencies and all 2009-funded BMHEF agencies. The CNAT initially convened January 26, 2010. At this meeting, UWBC senior staff stated the purpose of the assessment, projected its advantages and its limitations, and shared a desire that the CNAT would provide immediate and useful guidance to ensure that the CNA could be applied to the 2010 BMHEF funding cycle. The evaluators then proceeded with a discussion to elicit CNAT input regarding: (1) assessment design; (2) perception of community need; (3) identification of “people groups” that should be included in the assessment; (4) data collection and analysis strategies; and (5) timeline for development and implementation of the process.

The CNAT reconvened on March 1, 2010 to review findings and recommendations from the initial meeting and to examine a draft of a proposed community assessment instrument developed by the evaluators in the interim, following recommendations of the CNAT and the UWBC. In developing the instrument, evaluators reviewed census data reported in previous UTC and UTK assessments and websites describing assessments and experiences for projects of similar scope and purpose in other parts of the country. The major issues delaying consensus of the CNAT on the first draft included wording of the assessment instrument and instructions for completing the

instrument. There was also considerable discussion on ways to ensure that perceptions of identified people groups were reflected in the assessment.

From initial meetings of the CNAT, five assessment areas emerged: (1) Education; (2) Income; (3) Health; (4) Veterans; and (5) the Elderly. The instrument was further revised by evaluators and presented to the CNAT and to UWBC staff. A consensus was reached on the content of the instrument and upon a basic strategy for distributing it among the identified people groups. Upon CNAT recommendations, the instrument was also translated into Spanish by Mosaic Center staff.

For 2010, the CNAT recommended a window of May 1—June 15 for completion of the assessment, with an expectation that the final CNA report would be presented to UWBC by July 31, so that results could be applied to the 2010 BMHEF distribution process. Following UWBC endorsement in April, the CNA was rolled out to the public through several press releases in the *Cleveland Daily Banner*, the United Way website and through UWBC staff and Local Evaluator interviews on local radio and cable television stations.

Methods

It is stated at the outset that the CNA is not a scientific assessment. It provides a broad brushstroke of *perceptions* of current community needs as reported by those completing the assessment. The CNA instrument itself was admittedly daunting to the average person who may be considering a response. Evaluators and the CNAT reached consensus with the full expectation that voluntary completion of a lengthy, formal assessment would likely bias the volume of responses toward individuals of higher educational achievement and higher income. To better interpret findings, evaluators

sought additional validation of CNA findings through face-to-face interviews with informed stakeholders, including Directors of the Cleveland Housing Authority, Veterans Affairs, and the Bradley County Health Department. In each follow-up interview it was evident that the CNA, with its admitted research limitations, would be useful as an appropriate and realistic indicator of community need.

The CNA was only designed to reflect perceptions of *community-wide* need. It was not intended to reflect individual or personal needs of respondents. Useful data were sought through responses of individuals who are directly associated with community services (teachers, health care associates, human services workers, human resource officers). These stakeholders expectedly represent higher educated, middle income segments of the community. The CNA was not expected to produce balanced samples from all demographic sectors, since local experience and reports in the literature indicated that persons of lower income and educational attainment traditionally do not participate in voluntary surveys. Evaluators concluded after reviewing outcomes with stakeholders, that the CNA as presented did provide an accurate indication of perceived community need. Further, it is expected that the current CNA will gain reliability through low-cost, frequent replication—a requirement for the process. Due to inherent research limitations, the CNA is therefore a *supportive* resource and is not intended to be cited as sole justification of need for any community service, level of need, or funding priority. Results will be valuable in the process of decision-making regarding BMHEF distribution, enabling more in-depth evaluation of community needs.

The CNAT, UWBC staff, and local evaluators agreed that the Community Needs Assessment must rely heavily upon online responses through the nationally recognized

Survey Monkey©. A full canvass of the community through paper assessments was rejected because the process would impractical in consideration of the cost and the predetermined necessity to replicate the assessment on a 2-3 year cycle. It was expected that reliance upon online responses would further bias the results toward higher educated and higher income respondents as noted in the previous section. The CNA, however, had to ensure that no one would be excluded from the opportunity to respond because of limited access to online resources. Thus, two methods of distribution and response were provided: (1) online response using Survey Monkey© through the UWBC website www.unitedwaybc.com; and (2) paper response through “ballot boxes” placed with instructions in a variety of locations considered to maximize coverage for all demographic groups.

To further promote responses among identified people groups, personal appearances, focus groups, and assessment distributions were made to the following:

- Bradley Initiative for Church and Community/Pastors’ Group
- Life Care Centers of America Associates
- Veterans’ of Foreign Wars
- American Legion
- Bradley County Senior Center
- Bradley County Senior Center – Bridge Club
- Southeast Tennessee Association of Human Resource Directors
- Bradley County Ministerial Association

The following organizations agreed to link the CNA instrument on their websites or to inform employees of the availability of the online assessment through the United Way website:

- Cleveland First Baptist Church
- Cleveland State Community College
- Lee University
- Cleveland City Schools
- Bradley County Schools

- Sky Ridge Medical Center
- Garden Plaza
- The Caring Place
- City of Cleveland
- Bradley County Government

Collection points (“ballot boxes”) were provided at the following locations:

- Cleveland Pediatric Center
- Cleveland Summit
- North Cleveland Towers
- YMCA Reception Area
- Boys’ and Girls’ Club of Cleveland
- Bradley County Department of Public Health

Following the conclusion of the assessment collection period, paper responses were entered into the electronic website format. A low volume of paper responses was predicted so that UWBC staff could quickly complete the entries. A contingency plan that would utilize community service and service learning volunteers through local higher education institutions was available in the event the volume of paper responses exceeded expectations.

Summary Data Reports for the CNA are included in the following Results section, but an important additional feature must be emphasized. Analysis of responses was facilitated by using Survey Monkey©, a web-based assessment service. A flexible design was adopted locally that would not restrict users to the Summary Data Reports as presented in the Results, but would open the analysis to any number of cross-referenced and filtered outcomes available from UWBC upon request. For example, a qualified community agency seeking further justification for a proposed UWBC/BMHEF project might wish to know how respondents in a certain zip code who had a certain income level and a certain job type responded to specific items on the assessment. Similarly, UWBC

will be able to gather additional insights as it reviews proposals prior to annual distribution of BMHEF funds.

Ratings of community needs are based upon *perception* of the extent to which the subject need is currently being met through existing services. To identify this, respondents were asked to rate each item as follows:

- Very Important Unmet Need
- Somewhat Important Unmet Need
- Important Unmet Need
- Need Is Adequately Met
- No Opinion/Don't Know

The instrument presented 43 items of perceived need arranged among five categories:

- Education
- Income
- Health
- Veterans
- The Elderly

An additional item addressed Awareness, asking: *“In general, to what extent do you think Cleveland/Bradley County citizens are aware of existing community services and how to contact them?”* Respondents were asked to rate this item with the following scale:

- Mostly aware of Services and How to Contact
- Somewhat aware of Service and How to Contact
- Know Services Exist but Don't Know How to Contact
- Do Not Know Services Exist or Who to Contact
- No Opinion/Don't Know

In addition to the 44 forced-choice items, the instrument provided two open-narrative questions to afford respondents opportunities to cite other community needs that may have not been fully addressed by the instrument and to express concerns regarding their personal needs. Open-narrative questions were:

- *“What could be done to improve community awareness about these services?”*

- *“Please tell us about other needed programs or services that you believe should be provided or improved to better meet your personal needs.”*

The CNA instrument gathered important demographic information from respondents that would be helpful in analyzing and applying results but individuals were not and could not be identified, ensuring that rights to privacy were protected. Demographic tags on the instrument included:

- Zip Code
- Occupational Area
- Highest Level of Completed Education
- Gender
- Number of people in household
- Annual Household Income from all sources
- Age

Results

A total of 889 completed assessment instruments were received during the 2010 Bradley County Community Needs Assessment (CNA) reporting period. Of these, 732 (82.4%) were online responses and the remaining 157 (17.6%) were paper responses. UWBC staff entered paper responses into the online database, allowing analysis through SurveyMonkey© to include all responses.

A foremost purpose in the 2010 Community Needs Assessment was to provide stakeholders with a flexible tool they could individually apply in gathering information focused on their respective needs. It is not the intent of this report to present all possible data reports that could be generated through the process. If all 44 assessment instrument items were cross-tabbed and filtered among six categories and within seven demographic sectors, then the number of output reports would reach into the thousands. The practicality of the assessment is not in a specific final report, but in the process that a

stakeholder may elect to use in pursuit of issues of interest. For example, one could target a search to express the perception of community need among: (1) females who are unemployed; and who (2) have less than a college degree; and who (3) have incomes under \$24,000; and who (4) live in Zip Code 37323.

Beyond the strength of developing a useful assessment process, important summary outcomes were gathered from the 2010 CNA. The following presentations are considered to be of widespread interest to all stakeholders.

I. Top Ten “Very Important Unmet Needs”

Seven of the top ten responses by percentage of respondents listing the item as “very important unmet need” were in the category of Health. The top-rated item across all responses was “affordable basic health care for adults with limited income” (Item 31). Two of the top ten responses related to needs of veterans: “mental health services for veterans with limited income” (Item 20); and “shelter for homeless veterans” (Item 37). The Top Ten “very important unmet needs” as reflected in the percentage of respondents for the identified items are:

1. Item 31 – Affordable basic health care for adults with limited income – 34.2%
2. Item 20 – Mental health and counseling services for those without insurance or unable to pay – 33.5%
3. Item 38 – Mental health services for veterans with limited income – 33.5%
4. Item 3 – Education for parents to help prepare their children to enter school – 33.3%
5. Item 34 – Basic health care for limited income adults with special needs and challenges – 33.2%
6. Item 37 – Shelter for homeless veterans – 32.8%
7. Item 30 – Dental care for adults with limited income – 32.6%
8. Item 23 – Nutritious foods including fresh fruits and vegetables either free or at reduced cost for people with limited income – 32.0%
9. Item 43 – Affordable health services for the elderly with limited income – 31.2%
10. Item 18 – Youth violence prevention programs – 30.3%

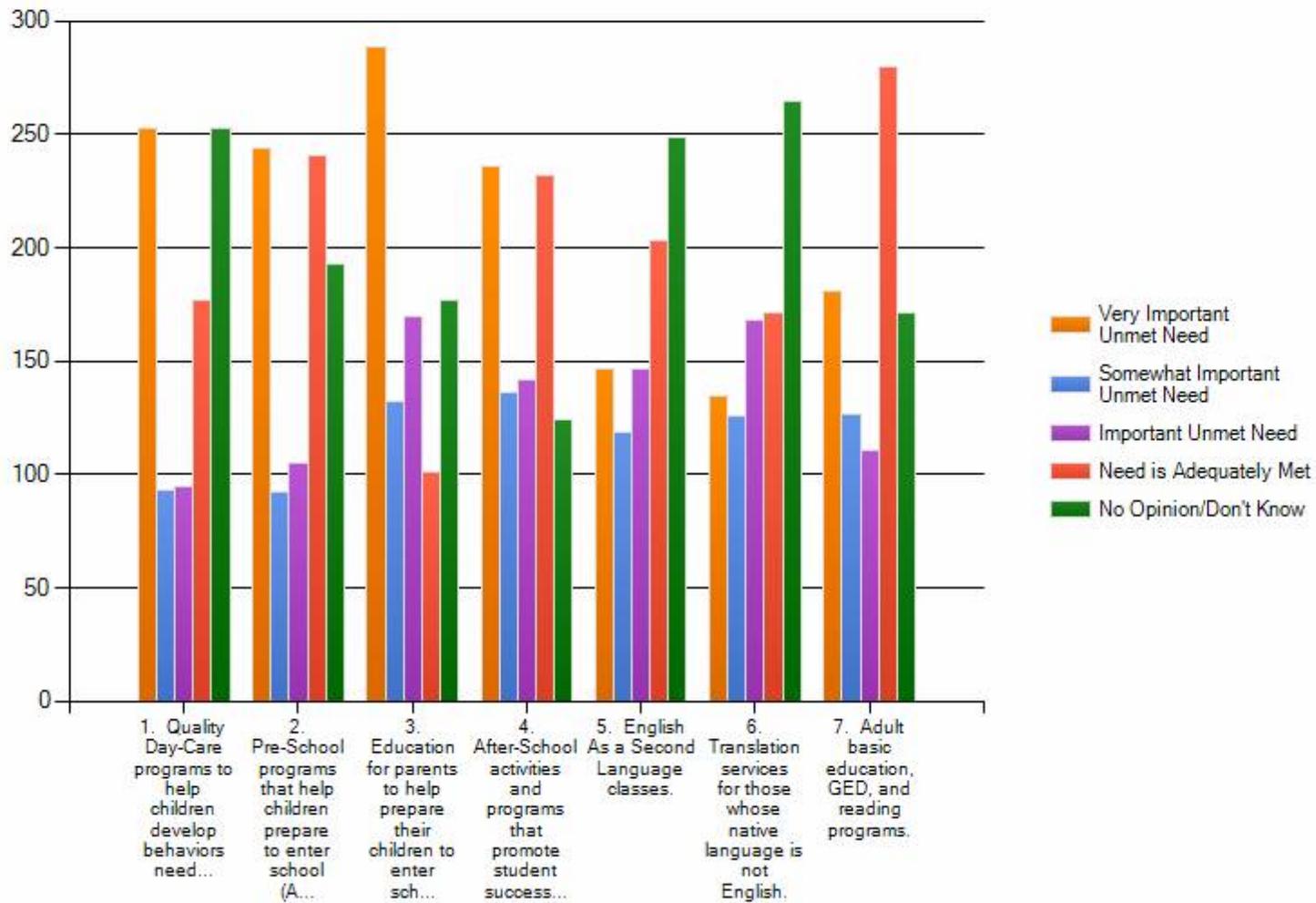
II. Top Two “Very Important Unmet Needs” in the Five Categories

- Education
 1. Question 3 – Education for parents to help prepare their child to enter school – 34.0% (249)
 2. Question 1 – Quality Day-Care programs to help children develop behaviors need to enter school (Ages 0-3) – 30.5% (223)
- Income
 1. Question 15 – Job skills training – 29.2% (213)
 2. Question 14 – Finding a job or a better job – 28.5% (208)
- Health
 1. Question 20 – Mental health and counseling services for those without insurance or unable to pay – 32.7% (241)
 2. Question 23 – Nutritious foods including fresh fruits and vegetables either free or at reduced cost for people with limited income – 31.2% (229)
- Veterans
 1. Question 38 – Mental health services for veterans with limited income – 32.4% (236)
 2. Question 37 – Shelter for homeless veterans – 31.8% (235)
- Elderly
 1. Question 43 – Affordable health services for the elderly with limited income – 30.3% (221)
 2. Question 39 – In-home care services for the elderly – 28.7% (210)

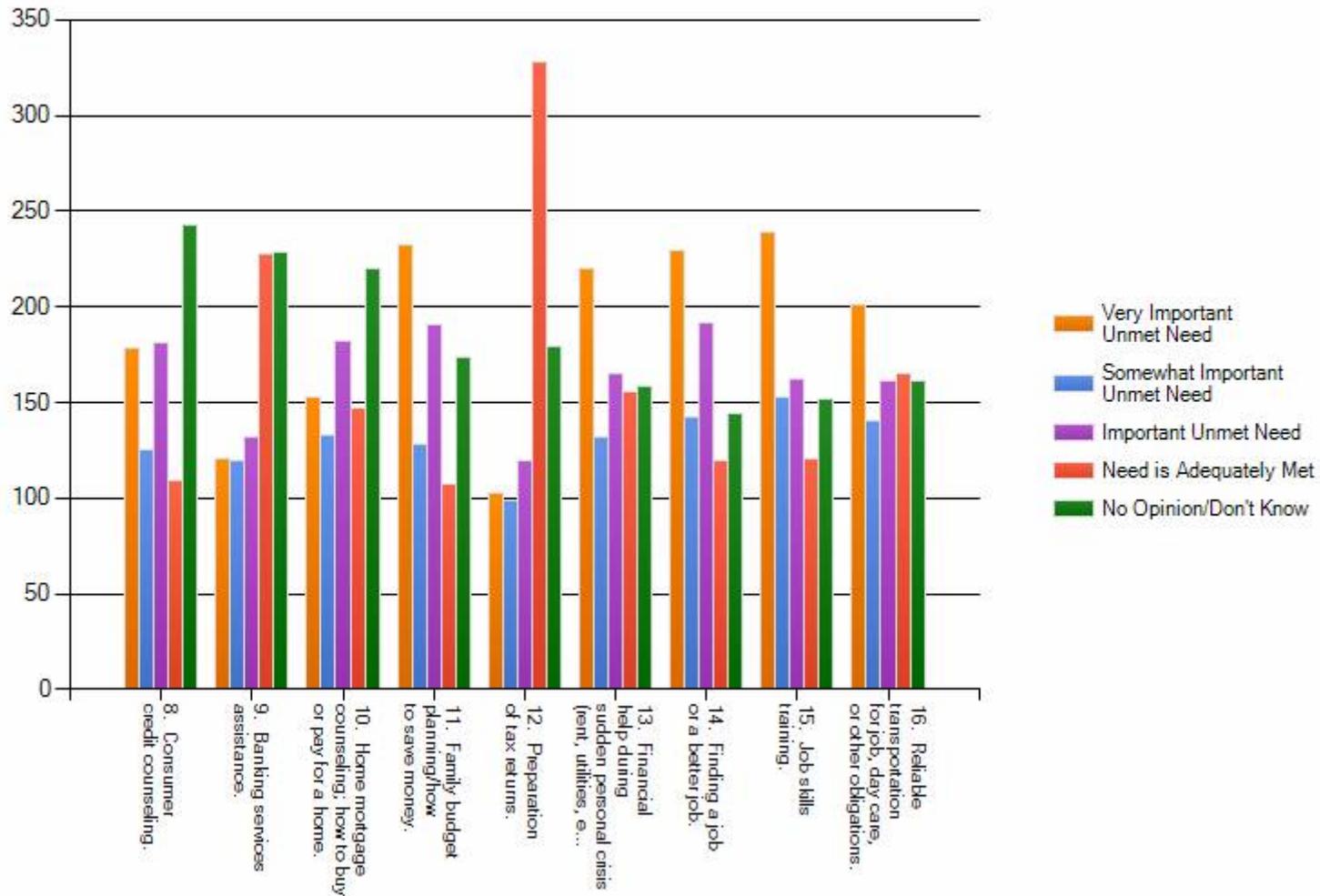
III. Summary of All Responses for All Assessment Instrument Items

In the following charts and tables, responses for all 44 assessment items are presented from the five categories: Education, Income, Health, Veterans, Elderly. Each item from the instrument for each category is recorded horizontally, and the number of responses is recorded vertically. Respondents rated their perceptions of community need for each item according to a scale: Very Important Unmet Need, Somewhat Important Unmet Need, Important Unmet Need, Need is Adequately Met, No Opinion/Don't Know.

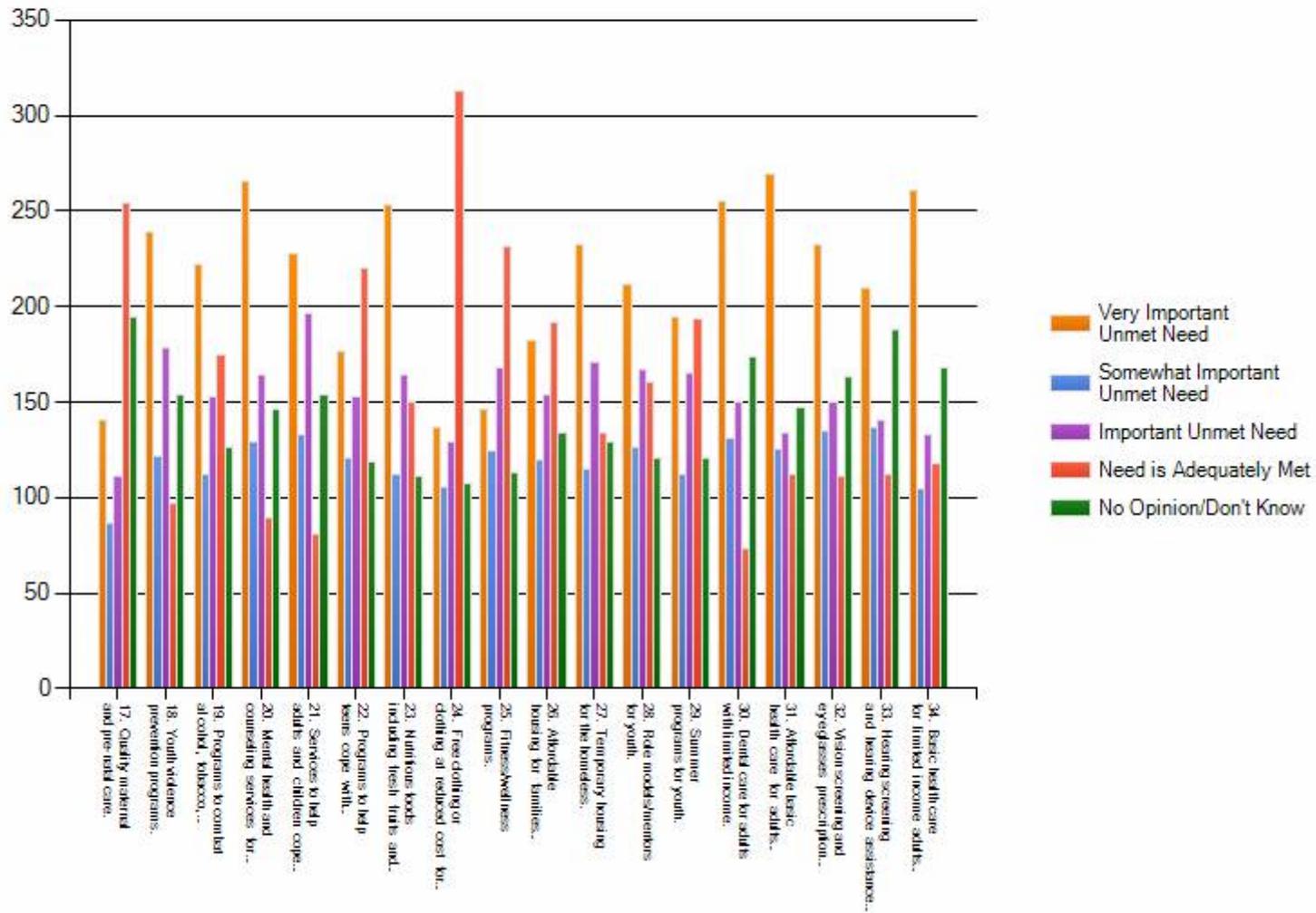
Education - Please rate the importance of each service according to how well it is currently meeting the community's needs:



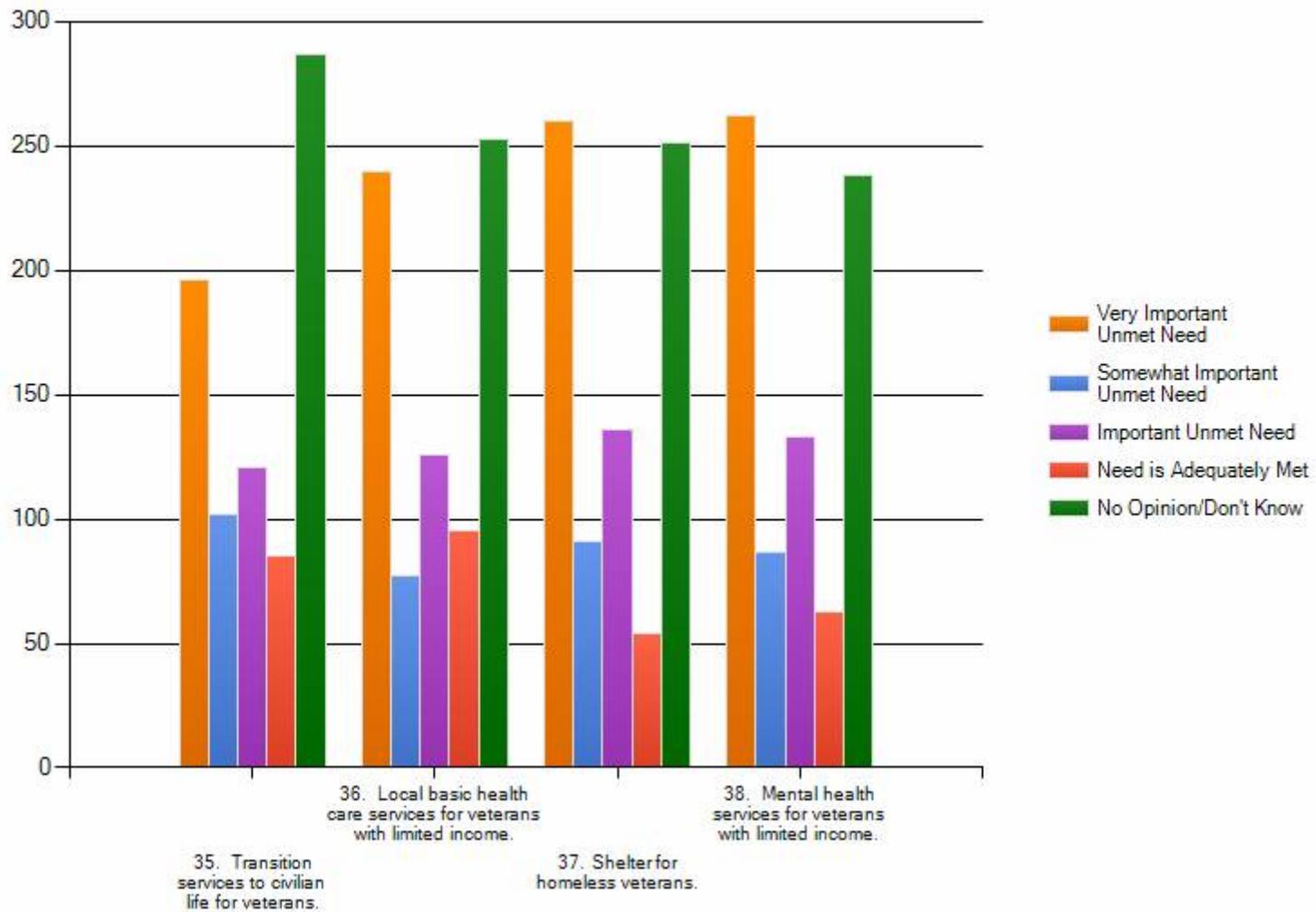
Income - Please rate the importance of each service according to how well it is currently meeting the community's needs:



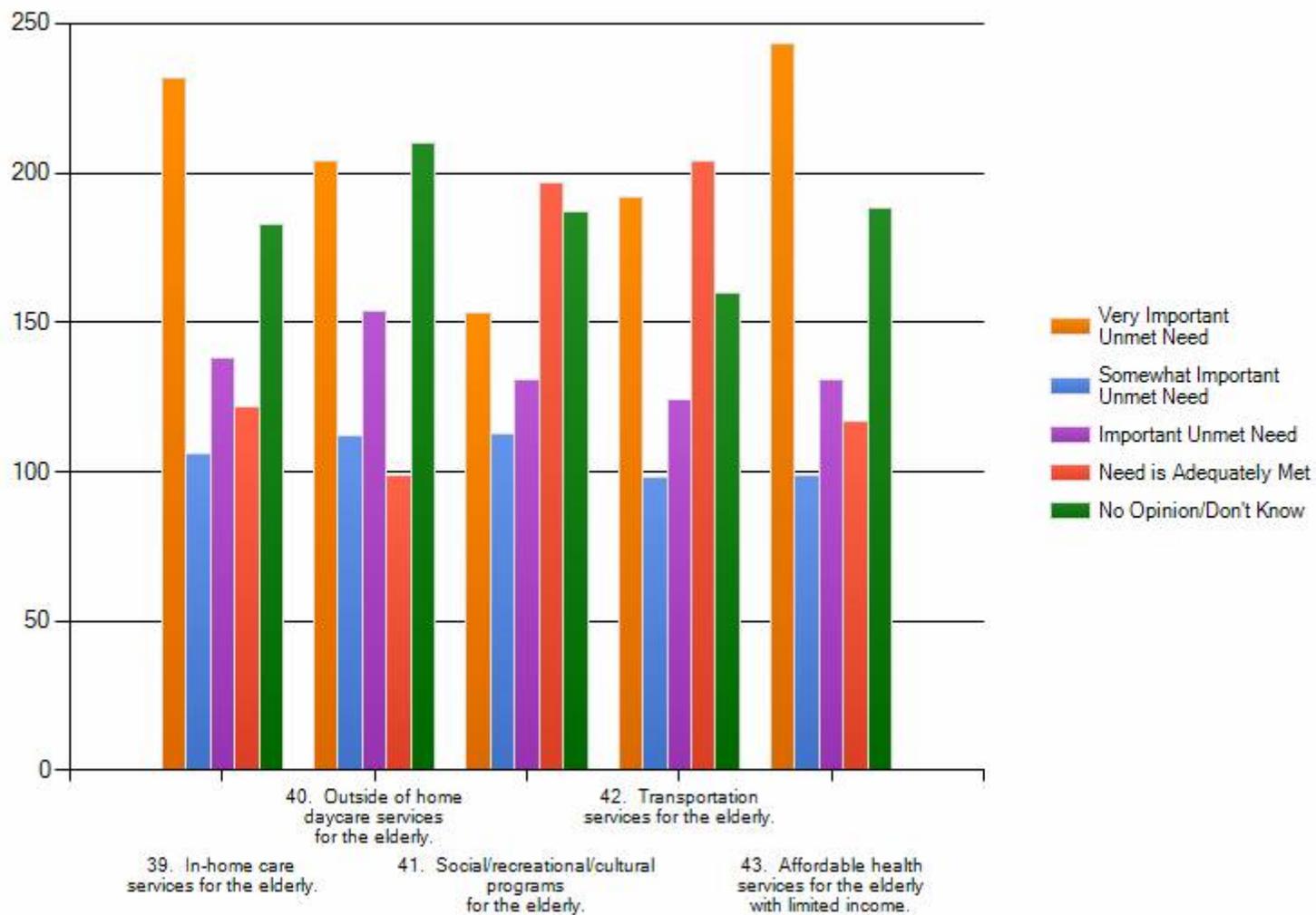
Health - Please rate the importance of each service according to how well it is currently meeting the community's needs:



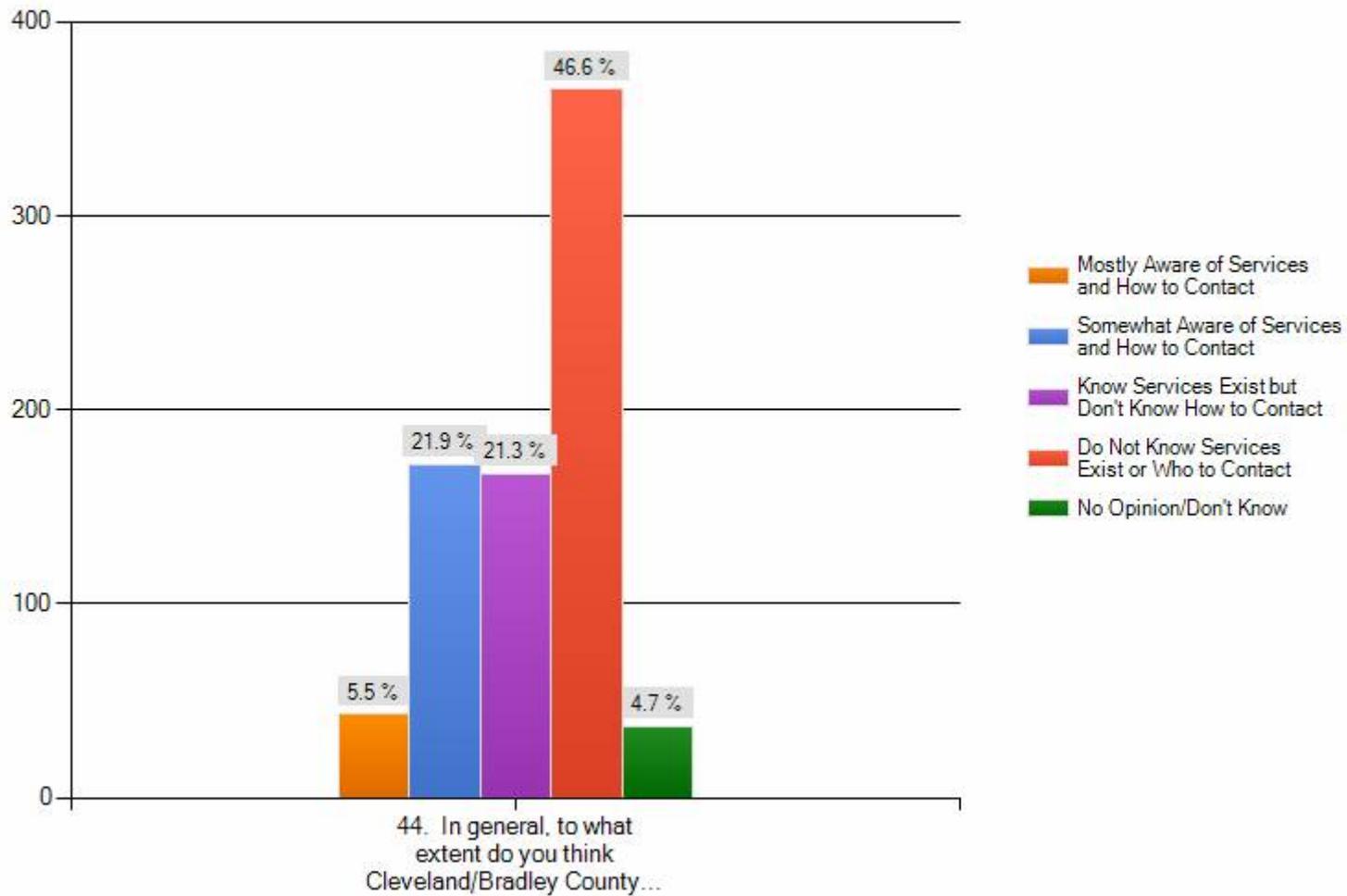
Veterans - Please rate the importance of each service according to how well it is currently meeting the community's needs:



Elderly - Please rate the importance of each service according to how well it is currently meeting the community's needs:

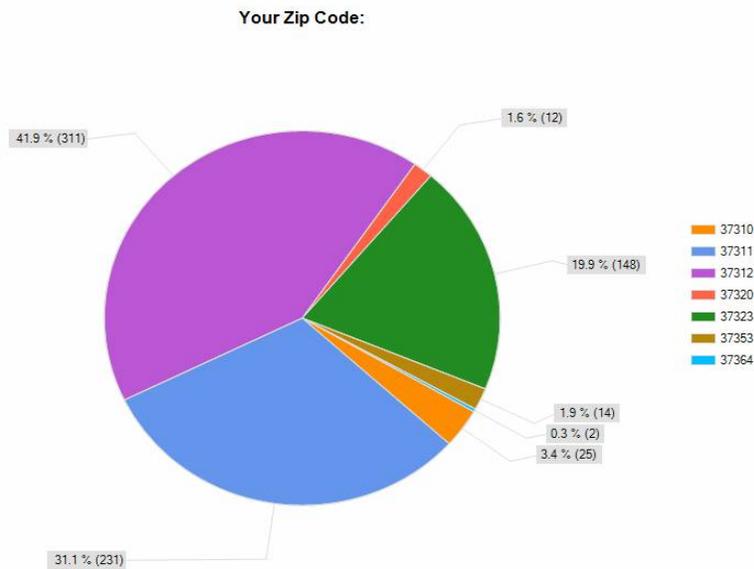


Awareness - Please rate the importance of each service according to how well it is currently meeting the community's needs:



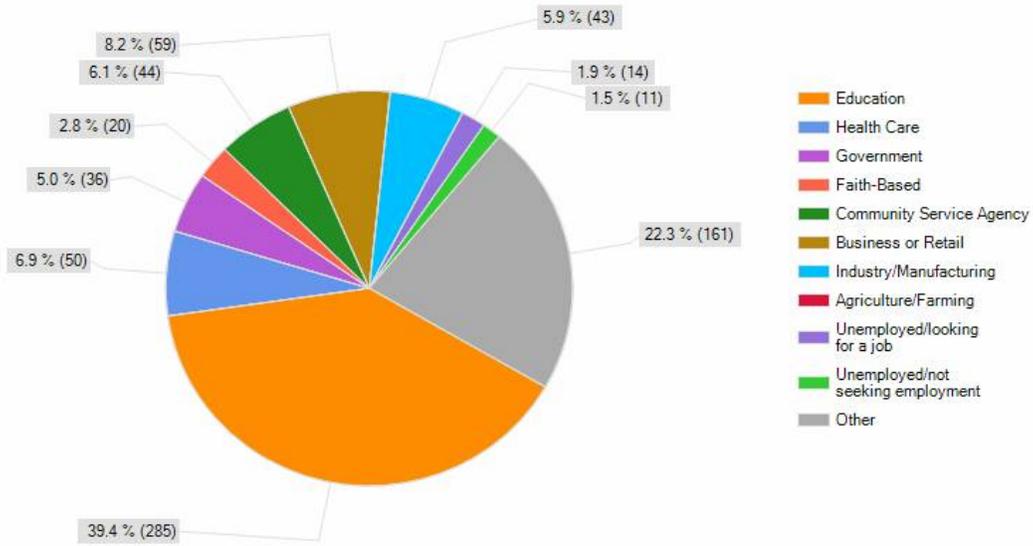
IV. Number of Responses by Demographic Groupings

This section illustrates the total number of assessment instruments received from respondents representing each demographic grouping as provided in the assessment instrument: Zip Code, Occupation, Level of Education, Gender, Number in Household, Household Income, and Age. A table is provided beneath each chart for clarity.



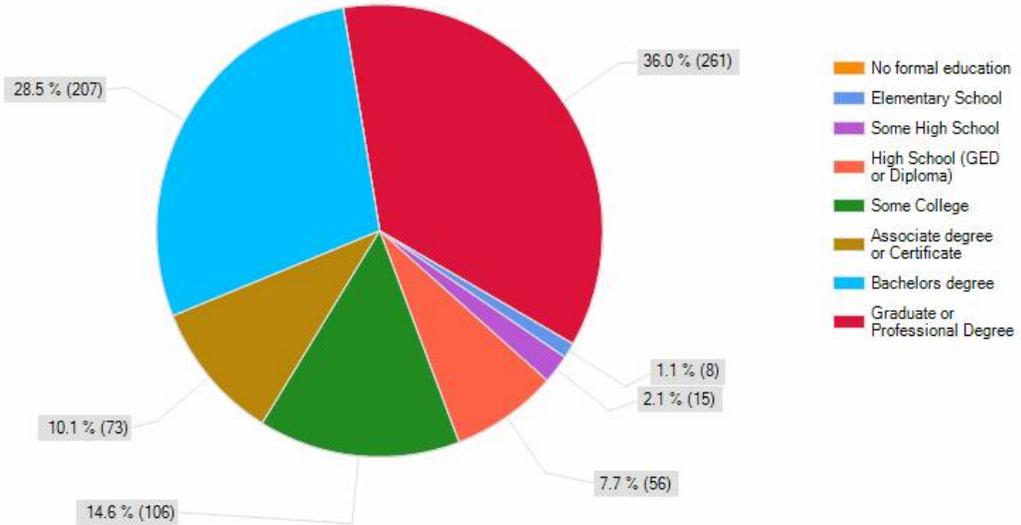
Zip Code	Number of Responses	Percent of Responses
37310	25	3.4
37311	231	31.1
37312	311	41.9
37320	12	1.6
37323	143	19.9
37353	14	1.9
37364	2	0.3

Your Occupation Area:



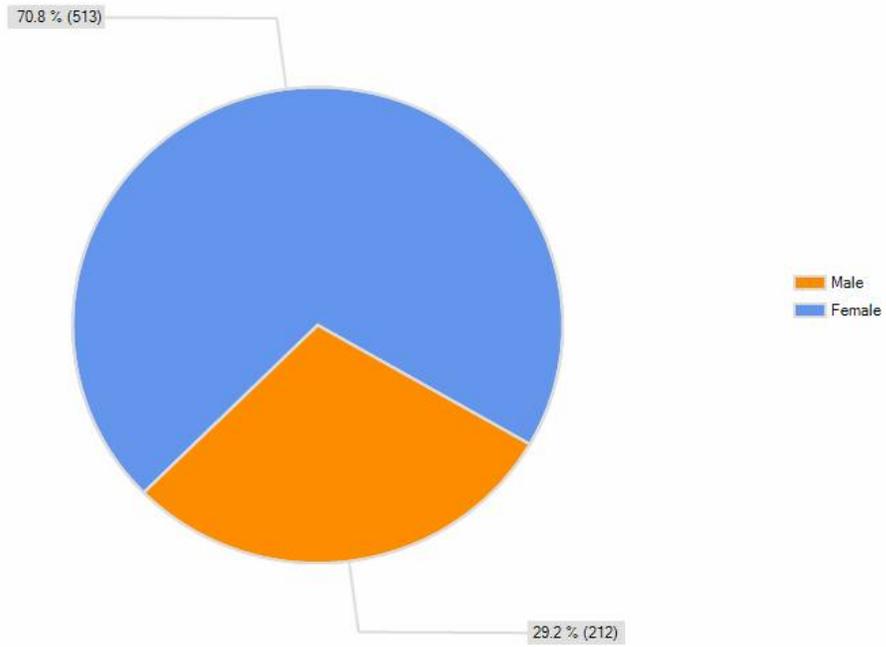
Occupation	Number of Responses	Percent of Responses
Education	285	39.4
Health Care	50	6.9
Government	36	5.0
Faith Based	20	2.8
Community Service Agency	44	6.1
Business or Retail	59	8.2
Industry/Manufacturing	43	5.9
Agriculture/Farming	0	0
Unemployed Looking for Work	14	1.9
Unemployed Not Looking for Work	11	1.5
Other	161	22.3

Your Highest Level of Completed Education:



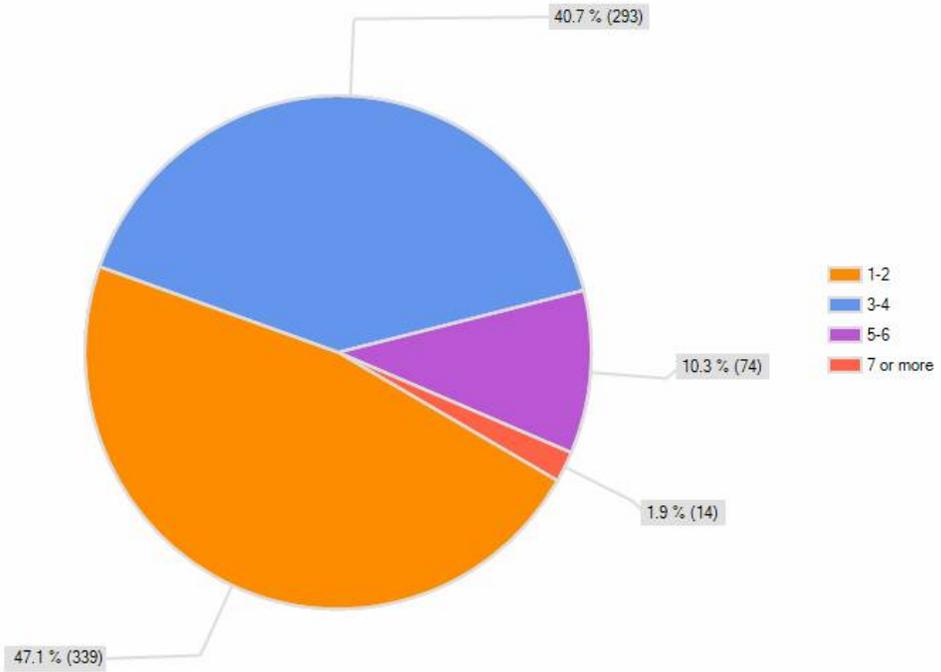
Highest Completed Educational Level	Number of Responses	Percent of Responses
No formal education	73	10.1
Elementary School	8	1.1
Some High School	15	2.1
High School/GED	261	36.0
Bachelors	207	28.5
Graduate/Professional	261	36.0

Your Gender:



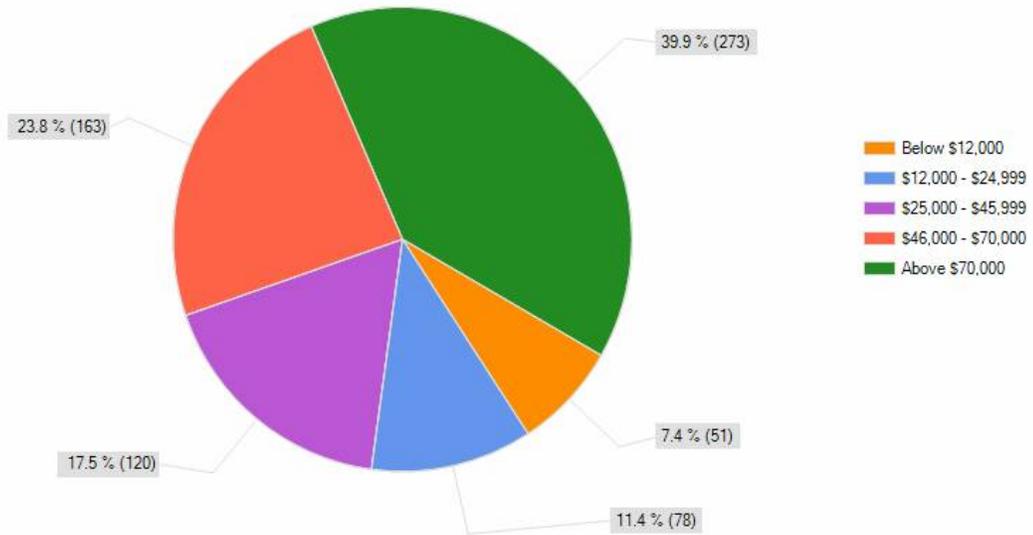
Gender	Number of Responses	Percent of Responses
Female	513	70.8
Male	212	29.2

Number of people in your household:



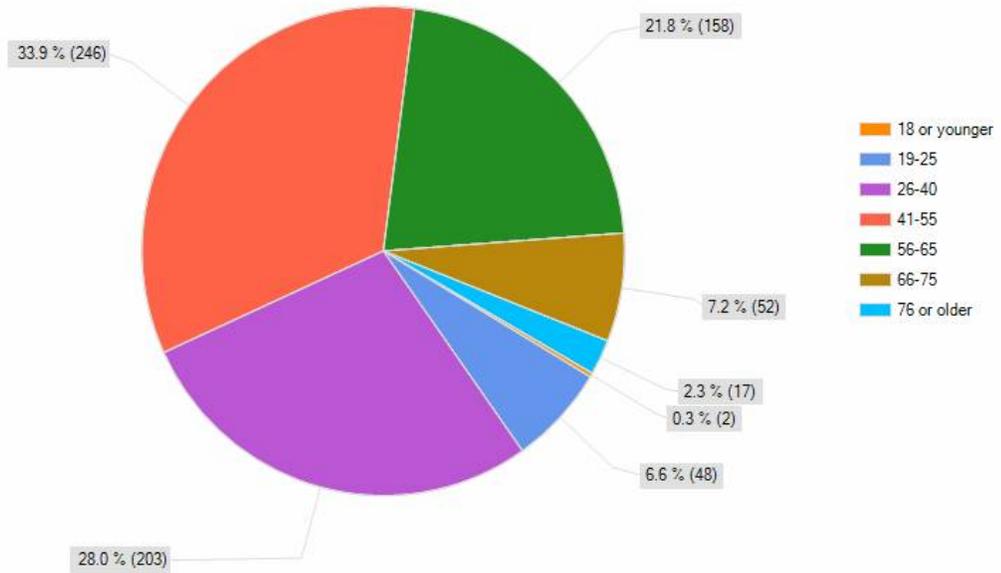
Number of People In Household	Number of Responses	Percent of Responses
1-2	339	47.1
3-4	293	40.7
5-6	74	10.3
7 or More	14	1.9

Your Annual Household Income from all sources:



Annual Household Income	Number of Responses	Percent of Responses
Below \$12,000	51	7.4
\$12,000 - \$24,999	78	11.4
\$25,000 - \$45,999	120	17.5
\$46,000 - \$70,000	163	23.8
Above \$70,000	273	39.9

Your Age:



Age Group	Number of Responses	Percent of Responses
18 or Younger	52	7.2
19-25	158	21.8
26-40	203	28.0
41-55	246	33.9
56-65	158	21.8
66-75	52	7.2
76 or Older	17	2.3

V. Awareness of Services

In this section, charts illustrate the levels of awareness of citizens about community services and how to contact them, as provided in Item Number 44 on the assessment instrument. Tables are presented for each demographic grouping provided on the assessment instrument. Each chart scales awareness according to choices provided in the left column. Cells in the charts show the total number of assessment instruments received and the percent that number represents among all responses received.

a. By Annual Household Income

Awareness, by Income	Below \$12,000	\$12,000 – \$24,999	\$25,000 - \$45,999	\$46,000 - \$70,000	Above \$70,000
Mostly Aware	14.6% (7)	10.3% (8)	4.0% (5)	4.08% (8)	2.2% (6)
Somewhat Aware	14.6% (7)	16.7% (13)	23.8% (30)	25.3% (42)	20.7% (57)
Know services exist, but don't know how to contact	25.0% (12)	20.5% (16)	19.8% (25)	19.3% (32)	22.5% (62)
Do not know services exist or how to contact	27.1% (13)	47.4% (37)	48.4% (61)	48.2% (80)	50.7% (140)
No Opinion/Don't know	12.5% (6)	5.1% (4)	4.0% (5)	2.4% (4)	4.0% (11)

b. By Age

Awareness, by Age in Years	Under 18	19-25	26-40	41-55	56-75	76+
Mostly Aware	0	4 (8.3%)	14 (6.8%)	13 (5.2%)	3 (1.9%)	2 (11.8%)
Somewhat Aware	0	9 (18.8%)	47 (22.7%)	43 (17.1%)	42 (26.3%)	5 (29.4%)
Know services exist, but don't know how to contact	1 (50%)	12 (25.0%)	37 (17.9%)	67 (26.6%)	30 (18.8%)	2 (11.8%)
Do not know services exist or how to contact	1 (50%)	21 (43.8%)	101 (48.8%)	117 (46.4%)	77 (48.1%)	6 (35.3%)
No Opinion/Don't know	0	2 (4.2%)	8 (3.9%)	12 (4.8%)	8 (5.0%)	2 (11.8%)

c. By Highest Level of Completed Education

Awareness, by Highest Level of Completed Education	No Formal Educ	Elem. School	Some High School	GED or High School Diploma	Some College	Associates Degree	Bachelors Degree	Grad or Prof Degree
Mostly Aware	0	1 (12.5%)	2 (12.5%)	9 (15.8%)	9 (8.3%)	3 (4.1%)	6 (2.8%)	5 (1.9%)
Somewhat Aware	0	0	5 (31.3%)	17 (29.8%)	14 (12.8%)	13 (17.6%)	49 (22.9%)	63 (23.8%)
Know service exist, but don't		2 (25%)	2 (12.5%)	12 (21.2%)	28 (25.7%)	12 (16.2%)	45 (21.0%)	56 (21.1%)

know how to contact								
Do not know services exist or how to contact	0	3 (37.5%)	3 (18.8%)	13 (22.8%)	52 (47.7%)	44 (59.5%)	109 (50.9%)	130 (91.1%)
No Opinion/Don't know	0	1 (12.5%)	3 (18.8%)	6 (10.5%)	6 (5.5%)	2 (2.7%)	5 (2.3%)	11 (4.2%)

d. By Zip Code

Awareness, By Zip Code	37310	37311	37312	37320	37323	37353	37364
Mostly Aware	1 (4.0%)	16 (7.0%)	10 (3.2%)	0	13 (8.8%)	0	0
Somewhat Aware	3 (12.0%)	47 (20.5%)	66 (21.4%)	2 (20.0%)	36 (24.5%)	5 (35.7%)	0
Know services exist, but don't know how to contact	7 (28.0%)	48 (21.0%)	66 (21.4%)	5 (50%)	29 (19.7%)	3 (21.4%)	2 (100%)
Do not know services exist or how to contact	12 (48.0%)	106 (46.3%)	150 (48.7%)	3 (30.0%)	66 (44.9%)	5 (35.7%)	0
No Opinion/Don't know	2 (8%)	12 (5.2%)	16 (5.2%)	0	3 (2%)	1 (7.1%)	0

e. By Number of People in Household

Mostly Aware	15 (4.3%)	18 (6.1%)	4 (5.3%)	1 (7.1%)
Somewhat Aware	85 (24.3%)	50 (16.9%)	18 (23.7%)	3 (21.4%)
Know services exist, but don't know how to contact	69 (19.7%)	72 (24.4%)	12 (15.8%)	3 (21.4%)
Do not know services exist or how to contact	165 (47.1%)	142 (48.1%)	38 (50.0%)	6 (42.9%)
No Opinion/Don't know	16 (4.6%)	13 (4.4%)	4 (5.3%)	1 (7.1%)

Conclusions

The 2010 Community Needs Assessment (CNA) provides a reasonable platform that can be efficiently used in future assessments and within existing resources of the United Way of Bradley County. As developed and implemented, there are trade-offs. The CNA could not be a fully scientific research project and at the same time be done with minimal cost, knowing that it would be replicated every two or three years. The intent of the CNA is to capture generalized perceptions of community needs by a substantial number of residents on a regular basis and at the lowest possible cost. Results of the most recent CNA could then be used along with current census data and other sources of information to improve evidence based decision-making by UWBC, BMHEF, and community service agencies. Web-based data analysis makes the process utilitarian in function, enabling anyone in the community the opportunity to obtain specific cross-tabulations and filtered information to explore their respective interests.

Response to the CNA is considered acceptable from a community of this size, with 889 completed instruments included in the analysis. It was found that online administration of the assessment is more easily managed when seeking responses from large groups of people. However, there must be a reasonable effort to afford opportunity for response to those without computer access or Internet. The selected method of providing printed assessment instruments and collection boxes with instructions and assistance is a non-scientific procedure, but it is considered acceptable within the limitations of the project.

The CNA reflects *perceived* needs across the community, as reported by those who responded. It does not address *specific* needs of individuals. There was an

expected imbalance in the number of respondents across levels of income, education, and zip codes. It is a difficult and costly process to obtain large-scale information from those who may be more in need of services. Based upon extensive input from representatives of current United Way of Bradley County and Bradley Memorial Hospital Endowment Fund funded agencies (the CNAT); from Focus Group discussions; and from follow-up interviews with key stakeholders, it is concluded that results of this assessment appropriately reflect the broad perception of current community needs. The assessment served its intended purpose, yielding a process suitable for replication with minimal cost.

Data suggest that Health issues are the primary focus of perceived community need, particularly mental and psychosocial/emotional health. School readiness for children is a major concern in Education. Personal finance and money management are not perceived as critical needs, yielding to job training and finding jobs as important needs in the Income section of the assessment. Assistance for homeless Veterans and for mental health services for Veterans with limited income appeared to be a significant need. Among the Elderly, needs centered on health care for those with limited incomes and on provisions for in-home care services.

Somewhat surprisingly, among all demographic groupings there was a pronounced lack of awareness of existing community services and how to contact agencies for available services. Even among professionals who interact with all socio-economic levels during their regular jobs, operational knowledge of services provided in Bradley County and specific knowledge as to how they would contact a service agency appears to be inadequate. In addition to their scaled responses, 370 respondents provided written comments about improving knowledge of these services within to the community.

These written responses are provided unedited and in their entirety in the Appendix. In addition, over 200 respondents indicated other needed programs and services that should be provided or improved to better meet their personal needs. These responses are also included in the Appendix.

Recommendations

The 2010 Community Needs Assessment (CNA) provides useful information to UWBC agencies and for applicants seeking funding from BMHEF. The CNA will also serve as an additional tool for BMHEF administrators as they select programs for funding.

The 2010 CNA provided essential experimentation and field testing of the assessment process to help guide the process in future assessments. It is crucial that the process can be reasonably replicated every 2-3 years without increasing operating costs for the Bradley County United Way or decreasing the corpus of the Bradley Memorial Health Fund. In the course of pursuing the 2010 CNA, several recommendations emerged:

- Conduct the CNA in Spring; restrict response window to six weeks; complete report by August 1 for use in Fall funding decisions
- Continue and encourage online format through UWBC website
- Increase awareness of onsite response through links on agency websites throughout the community (e.g., school districts, higher education institutions, hospitals, churches, business/industry newsletters, libraries, social service and health providers, etc.)
- Provide paper responses and collection points in locations recommended by the CNAT (Community Needs Assessment Team)
- Translate the assessment instrument into other languages as recommended by the CNAT
- Charge the CNAT with identifying informed stakeholders for face-to-face interviews or Focus Groups, to be mutually agreed upon by UWBC leadership who will coordinate and/or conduct sessions

- Review current US census data to reflect demographic changes within the community, identify distribution points, identify focus groups, and provide additional information for interpreting assessment results.
- Administer the assessment process entirely through existing UWBC staff and with a minimum of additional supplies and expenses
- Analyze assessment results using a cost-effective, nationally recognized, web-based data analysis instrument (e.g., SurveyMonkey©)
- Designate the CNAT as an *ad hoc* advisory group for the UWBC and BMHEF, and that CNAT consist of one representative from each United Way agency and BMHEF grant recipients from the immediately preceding funding year
- Change content of the assessment instrument, if suggested by UWBC staff, by adding or deleting items rather than modifying existing questions in ways that change their meaning, so as to preserve as many items as possible for longitudinal analysis and trends
- Place terminals in areas suggested by the CNAT to increase access to public domain computers at community locations (e.g., Cleveland Public Library, etc.); eliminate one-respondent restriction per Internet Provider (IP) address on community-access computers; train volunteer associates in the location to assist persons in electronic CNA response
- Promote the CNA as only a tool in the presentation of need by an applicant for BMHEF grant funding, and for the BMHEF Distribution Committee's process of deciding grant recipients; the CNA alone is not sufficient or conclusive evidence for establishing a community need
- Ensure that the CNAT and the UWBC mutually agree to consider, if needed or desired, post-analysis feedback from appropriate informed individuals or agencies prior to release of the final report
- Assign all requests for further analysis of any CNA findings, cross-tabulations, or filters to the currently designated UWBC contact person for the BMHEF.

Appendix: **Open-Ended Comments Provided by Respondents**

The following responses were recorded *verbatim* from respondents, without editing except in the rare circumstance of excluding comments that identified persons or agencies. Two questions were provided in the CNA:

- **Question 1:** What could be done to improve community awareness about these services? (370 responses, recorded below)
- **Question 2:** Please tell us about other needed programs or services that you believe should be provided or improved to better meet your personal needs. (206 responses, recorded below)

Question 1: What could be done to improve community awareness about these services?

1. Better listings in phone book - brochures for other services offered - such as new Hope brochures available for pick up at Health Department.
2. Maybe monthly newsletters
3. Have more opportunities for after school and summer child care. More help with dental and vision for people who can't afford it.
4. Pray and depend on God.
5. More social functions to reach people.
6. More publicity.
7. More dollars.
8. Advertise more.
9. More flyers at government buildings (DHS, Health Dept. etc.)
10. Let citizens know where to find them by newspaper
11. Maybe through the mail.
12. Post flyers at local workplaces and public areas.
13. Make a website available and post posters about you service. make brochures and leave that at local health department.
14. Nothing
15. More contacts, handouts.
16. Send (mail out) brochures or fridge magnet sheets with important names/numbers.
17. Community networking opportunities that bring together UW agencies, other noon profits, faith based organizations/church, healthcare providers, school systems and businesses.
18. Personnel should be easier to talk to than a machine.
19. More advertising.

20. We need more ads.
21. More ads.
22. More ads with posters and ads on TV.
23. Radio.
24. More advertising of your services, example pamphlets in doctors' offices, bulletin boards in churches and grocery stores - anywhere the average citizen would be.
25. TV
26. Churches can let people know about the services that don't have or can't afford cable to see the ads on TV, community meetings, once a month for those who don't know about them.
27. I don't believe in entitlement programs-if someone is able to pay for services. THEY SHOULD and not place it on the back of taxpayers and the community. Our company helps co-workers during stressful times in their lives: illness and other temporary situations. Many churches have outreach programs for those needing temporary assistance.
28. Have an actual town meeting, with the community and have the needs of these services present and presented where people can understand the services which are available.
29. They needed to tell people about the services that available to the people of Bradley County.
30. Marketing-handbooks utilize various means of distribution. Direct mail, churches, businesses, chamber of commerce, government offices.
31. More public information.
32. People go to the police or hospitals when in need. If the services exist, and these organizations are made aware and have the information to give, more people will be aware.
33. Give lists out to grocery stores and schools.
34. Educate on Health Care Reform Act and how it will improve healthcare for those with limited income and those with special needs and those who are elderly.
35. By phone, through the churches.
36. Survey every two years for responses.
37. Meetings to inform every (every section) people of available services.
38. Coordinate current program and services. Too many duplications.
39. More community awareness programs--to aid those seeking help.
40. At local stores/pharmacies pamphlets put up so younger and older generations can find out what services are offered in the community. Like 3 foot section with pamphlets.
41. Send out booklets with the phone books with all info and phone numbers and what they are for. Everyone gets phone books or knows another person with one.

42. E-mail blasts about closures (pool, gym, indoor track). Twice in April I work up at 5 a.m. to jog indoor track only to find it closed. It also happened on Healthy Kids Day. If I knew, I wouldn't have come.
43. Human Services could tell the elderly about more services they have (which they don't do unless someone asks about them).
44. TV, schools, medical offices.
45. Lists of services handed out to all local churches to connect with people.
46. Billboards, commercials.
47. United Way never helps those who have worked and tried but lost job. They help the lazy and unemployed. Ridiculous! Ads in the paper! How about a billboard with a website to look it up? Possible flyers in schools and doctor's offices. A mailing to all Bradley/Cleveland residents. Get the word out.
48. A lot of different ways.
49. Newsletters - announcements.
50. Talk about it through media.
51. More signs maybe in the phone book.
52. Getting companies and corporations to get involved in having or getting involved in community services. Community services coming into the workforce.
53. Y'all do good work for the people.
54. Find a better way to communicate services that are available.
55. Distribution of information to homeless/low income individuals at various places such as community kitchen, public library, The Caring Place, churches, etc.
56. More communication.
57. I think fewer red tape. Paper work and have all the local food banks hand out flyers.
58. More outreach programs for community and medical help for people without insurance.
59. Suggestions from other businesses on where to go for help.
60. Be more available for people who need these services.
61. Public notices.
62. To help people who need food and assist in. All I can think of...
63. Post a list of services and phone numbers.
64. Make better advertisements. Let people know better.
65. More community knowledge is needed. Ads on TV, etc.
66. A lot of people don't get the newspaper or have access to TV with cable - need to provide a newsletter to individual homes.
67. Make information more accessible - though how to do this will be a major issue.
68. Use of media and billboards.
69. Flyers sent to homes.

70. Community organizations should be proactive about finding those in need and reaching out to them. They should exhibit attitudes of service. Often those in need are treated poorly because they are poor.
71. Mailings to all residents whether they fit into a certain category or not.
72. Most people find out when they or someone they care for needs services. But some people are more isolated and may be ignorant of services. maybe a general services information line would help or a kind of talking directory (literacy is sometimes a problem and a voice is helpful to illiterate people who don't know what heading to look under).
73. Send (by mail) each resident/residence a directory of all community services available with contact numbers.
74. Keep our services in our town. Do not outsource them.
75. Advertise in the phone book, television or the internet. Many people with lower incomes don't receive a newspaper.
76. A website that has information on all different programs available and easily understandable.
77. PR program to inform of existing programs. Use Cleveland Daily Banner to do regular feature on each program.
78. Advertising.
79. I am an educator. I am embarrassed to say that many of these services, I am unaware of myself. Please continue to send information to the Title One teachers in the public schools, so that we can disseminate it for you. Flyers are great!
80. Advertising.
81. Services could be more publicized.
82. The people who know how to "work the system" know how to get all these services free. Others don't know they exist.
83. Possibly teachers/churches aware of families needing services and someone visiting family to explain available services. In person contact always better than sending info home via student. Contact could be a volunteer group. Maybe being done?
84. Outreach through public schools, newspapers, radio, TV, materials to be left with local businesses and industry.
85. E-mail to all churches and non-profits a yearly update all available resources with phone numbers and addresses.
86. Have announced on evening TV news and in local and Times Free Press.
87. Prominently displayed in emergency rooms, walk-in clinics, doctors' offices, drugstores, grocery stores, churches.
88. Advertising, radio, billboards, etc.
89. Flyer in the mail like the MINT magazine with the local agencies contact info, maybe quarterly.

90. Flyers at food bank, health department, and Human Services Department.
91. Better communication between county and city governments with the integration of better joint education platform (i.e., website, literature)
92. Website and bulletin board/brochures at doctors' offices.
93. There needs to be a general awareness program to inform the public about the services available. I felt stupid in answering this survey because I was so uninformed!
94. Small community meetings; flyers with info mailed to each home; a service provider fair or booth at a community gathering place or Wal Mart.
95. Have each agency informed about the services provided by others.
96. More advertisement in newspapers, billboards, handouts in churches, flyers.
97. More publications about the services offered in Cleveland.
98. Newspapers, posters, media.
99. Advertising campaign - letters/flyers.
100. More advertisement.
101. Speak to churches and companies about available services.
102. Publish info and mail out to citizens.
103. More advertising.
104. Announcements through the newspaper, radio, etc. Flyers in the community, information, partnerships with the churches in our area; announcements given to children in school to take home to parent.
105. Monthly newsletters detailing projects currently available and progress.
106. Provide a comprehensive directory of services.
107. Beat the streets.
108. Survey the needs community wide and organize programs that facilitate these services.
109. Better advertising (e.g., billboards, mail outs)
110. Make community resource manuals and hand them out at health fairs, job employment offices, DSC, DHS, day cares, post office, court, etc. Our agency is part a inner-agency council and we have put one together and pass it out to every client we have. I find it very helpful myself because I don't know about everything available in our community.
111. Flyers, brochures, street signs.
112. Information sent with electric or phone bills, etc.
113. More TV commercials.
114. Citizens are aware of services.
115. Information into schools, at PTOs, at school/parent events and on websites.
116. Publish in newspaper. Post at grocery stores.
117. Put info in newspaper; sent it out to assisted living facilities and nursing homes and make sure it is explained to residents.

118. Invite teachers and principals to participate in developing brochures to help new-coming residents know the services available in the Cleveland community.
119. Provide an airing on the local TV station. Provide an article first Sunday of every month in the paper - may it's weekly! THIS IS WHAT WE NEED - provide an online web reference tool that people can access to find help. State up front what the person needs to qualify or apply.
120. TV advertising.
121. Information located a places the target population would frequent.
122. More publicity about them and go into the local communities door-to-door and mail-out info pamphlets.
123. One number to call to be directed to whatever services may be needed.
124. Create and distribute flyers to social services offices or local school registration sites.
125. Make it more known by ads in newspapers, TV, radio, etc.
126. More information sent home with school age children who take info home to parents.
127. Community meetings.
128. I think all in one information booklets need to be given to all residents or perhaps include several pages in the phone book that list services, information about service, and phone number.
129. Go to the areas of need in the community and talk with the people there. Hand paper in gas stations and stores in areas where help is most needed.
130. Community events, marketing, newspaper, large business owners advertisement.
131. Tell what services are for people other than young children.
132. Provide information to schools, to distribute to students. In many cases, the students may benefit from the services, or they may know someone who can. Also, flyers and booths could feature information about these services at the Cleveland Block Party. This may already be a feature of the awareness program. However, I haven't been to the Block Party in a number of years so I wouldn't know.
133. Get the word out not everyone has computers.
134. Newspaper, flyers sent home to school-aged kids, mailings.
135. Train educators and school personnel, and church groups as well.
136. Advertise...advertise....advertise.
137. Set up a phone-a-thon to homes in Bradley County & use Lee University students who need to do community hours; mail out info to homes, key agencies can provide this info to their clients, such as Hiwassee Mental Health Center, all other counseling centers in Bradley Co., Sky Ridge Medical Center, all doctor offices, Cleveland Utilities, brochures in local businesses, especially Wal-Mart' could use community volunteers to hand out brochures at Wal-Mart, Goodwill, ReStore, clothing resale shops, thrift stores, food stores--SuperSavers, Bi-Lo, etc. Start a

- public service campaign (with a catchy title, "Helping Hands Helping Others", or "Bradley County Cares") and give public recognition weekly in the newspapers about folks who are working to help meet needs in others' lives.
138. Utilize the schools as a basis for offering programs by flyers sent home to children. Put tidbit information about services in school newsletters that are sent home with report cards. Provide teachers with training to know what services are available so they can provide information to parents.
 139. Share information with local churches - schools.
 140. Promote your services more to the public.
 141. Advertisement on radio and in the newspaper.
 142. Hire more friendly and knowledgeable people.
 143. Needs to be addressed to high school students who are about to enter the real world.
 144. Send information about these services through the mail to all citizens.
 145. Bring churches to coordinate these services and let the people serve those in need.
 146. Made better known in the Banner.
 147. Public service announcements on local radio stations, TV, and billboards.
 148. Have a place for people to report those they see who need help.
 149. The average person in Bradley County does not read the paper or have access to an internet service. I am not sure how you get this information to them. One way might be to provide this information to the Chamber, United Way, and local churches and businesses.
 150. REPEAT REPEAT REPEAT REPEAT
 151. More info in churches, schools, and other social settings.
 152. TV and radio commercials.
 153. Nothing. I think services are adequate and the general public has adequate access to knowledge of these services.
 154. More advertising around where to go to find such services. Direct people to United Way website and direct people to agencies based on need.
 155. Have a fair to show all the services. Provide websites that show how you can get services and are able to apply online.
 156. One main office and one phone number or e-mail address that would be easy to remember and easy to advertise. For instance HELP! or Bradley NOW! I am aware of many services but to be truthful if I was starting to look for these services I wouldn't know who to call or where to look for it. We need a Universal office. Then go on the radio, newsprint, internet and all relief agencies and let them give this name and number.
 157. Listed in a way that an elderly person can look up and understand. Under one heading in the phone book.
 158. Get churches to help - they are constantly contacted by people needing help.

159. Maybe a community event that benefits United Way and to have booths for each service, so people in community can learn about.
160. Flyers distributed in electric power bills or available at doctors' offices and/or hospital.
161. Either have a webpage or flyer that would show the programs for each season.
162. Bulletins to the home, letters, maybe on the news.
163. Unfortunately, TV is the probably the only way; even then, crawl lines would have to be attached to popular shows or the info will never be seen.
164. Get the word out in a multitude of ways in a multitude of different arenas.
165. Word of mouth is the number one way to communicate available services for low income citizens. Personal contact is the number one way to accomplish this - people on the ground.
166. Online system connecting citizens to services. The system should be broadly marketed to public, churches, schools, and any/all that come in contact with those in need.
167. Outreach program in low income areas.
168. Advertising in public places (grocery and discount shopping stores, etc.)
169. Bulk mail
170. More articles in paper; inform civic groups.
171. What services?
172. More communications - outreach.
173. Public notices.
174. More public awareness spots on radio and local TV; make listings of services available at government offices, agencies, schools, hospital and doctors' offices
175. Mail letters to Bradley County showing services available.
176. How about an annual community briefing and invite people who may receive call? For example invite people who answer the phone at the Health Dept., chamber, Police/Sheriff's Office, Fire Depts. Social Security Office, Employment Office. Sometimes those people know about their area, but not other services offered.
177. Take information brochures to different community companies to spread the word.
178. Public newsletters.
179. More advertisements or postings in offices and buildings where people with these needs might be.
180. There are many services for low income and elderly people but they do not know about them or do not know how to contact anyone about them. Or they do know about them but cannot take part because their income is not low enough or the "quota" for the year has been met for services. Also, transportation to and from services is not available or cost too much. The community does not think about

those folks who are just above the low income status. People who do not qualify for services but need them but still can't afford them. We need to reach out and help more. Also those who do want to help do not know who to contact. More education is needed for those who do want to help in some way.

181. TV info
182. Make information visible to professional offices (i.e., doctor office, dentist, etc.)
183. Those who are in need are very much aware of these services.
184. United Way could regularly promote year round public service announcements related to the programs it funds.
185. Have readily available information in hand when being called upon for assistance.
186. More advertising. Mail outs, print/radio media, etc.
187. More advertising.
188. List some of these services in public places - doctors' office, center, malls, restaurants.
189. Advertise a website where a list of services and who to contact is found easily.
190. United Way needs to do a better job of promoting the agencies it supports. Too much public relations dollar is spent on promoting UW as the conduit rather than the service.
191. A better understanding among the local agencies and what each one provides.
192. I would like to see community organizations have some sort of centralized contact center. I know that would be a huge undertaking, but if people could just call one number and get referred to the appropriate community agency then that would solve a lot.
193. More ways to get the word out.
194. New advertising strategies.
195. Advertise what services are available.
196. Centralize information on services. A 911 type of access to this information. An 800 number for providers to list their services on the centralized information. Publicize the way to access this information.
197. Presentations in areas where the target groups gather.
198. General advertising, word of mouth.
199. Newspaper highlights about services. Have service providers work with church leaders, mental health organizations, schools, hospitals, etc. A spirit of cooperation is greatly needed. Link all service providers. Have a website where citizens of Bradley Co. could go to access help programs.
200. It would be helpful to have a centralized location to contact to locate information on available community services.
201. More information to low income families.
202. Offer online access to apps and info ads on local TV during prime hours and radio stations

203. Making sure that local agencies have correct contact information and are aware of services so that they may pass it along to clients that are in need.
204. More information published about how to access community services.
205. Revive the committee which had been tasked to list all available programs according to services provided, not just UW programs...provide information to area school systems, churches, Chamber of Commerce, DCS, Courts
206. Brochure listing all available services...advertise.
207. United Way sponsored education events at senior housing sites (N. Cleveland Towers, Heritage Oaks). A county specific 211 guide, possibly combined with Polk County.
208. A community awareness campaign that also demonstrates effective use of resources. Programs without a positive outcome should be reviewed and funding re-evaluated.
209. I think people involved in churches are aware of these programs or have ways of finding out. Effort to find people not involved in a church or no longer active.
210. If all service agencies knew about all service agencies programs and assistance, it would be helpful, but some don't seem to be interested in being "in the team" to take care of other needs than their own. Establishment of a service providers coalition might be helpful.
211. INFORM THRU LOCAL NEWS MEDIA
212. Information in churches, billboards, websites
213. Better advertising of each program, get the word out.
214. Blue pages in phone book. flyers and brochures placed regularly in doctors' offices, malls, post office, hospital waiting areas, etc.
215. Provide a central location for information and advertise publicly.
216. Informational meetings held in schools to reach adults with school age children.
217. It seems that most services listed are for individuals who do not take the newspaper and may need personal contact to inform them of services. Personal interview with each family at public schools to determine other household needs; same at health department or with people who access resources at places such as The Caring Place
218. More detailed ads
219. I think the community should come together and try to accomplish these goals.
220. Radio and local TV commercials, sending information to churches and other organizations that have outreach programs, grass-roots; going into low-income areas and talking to people about their needs and how they can be filled
221. When public events are planned an article in the paper should post the availability of transportation for those in need. Bus schedules should be conveniently available. Where can you get one
222. Information sent by mail.

223. Make them easy to find in phone directory.
224. More public venues, information bulletins to our community.
225. Media attention and community involvement.
226. Information sent via the student (flyers) sent home describing services.
227. TV, newspaper, flyers in agencies - promote greater "word of mouth" advertising.
228. Better advertisement, billboards, college campuses, ways to get the community involved. Get churches, larger organizations involved to get the word out.
229. More local promos on TV and known gathering places.
230. A facility located at a central location (possibly to downtown) which offers literature and kind people to direct those in need - the UW office?
231. Better coordinated public information among and between providers
232. Website info, newspaper articles, financial report
233. Bring programs to local schools to inform parents/community through meetings regarding services available. Many people do not read the local paper. Another way would be through PSAs on local radio stations.
234. Discuss the programs more in the paper, radio, at all locations, where people gather, Health Dept, Senior Center, schools, churches.
235. Make the services available to places frequented by the public, such as schools, churches, doctors' offices, restaurants. Also somehow make the distribution locations responsible for giving out the materials and tell their customers about the community services.
236. Many people do not have access to newspapers but do watch TV. Let's have frequent public service announcements about available services and how to connect with them. These should be at a variety of times to reach those with different schedules.
237. It is always difficult to get information about any program. In fact, I think the difficulty is usually purposeful so as to deter people from taking advantage of them.
238. More services in the schools to help families link to community services and make services easier to access.
239. A planned, sustained, well-funded public education effort.
240. E-mail, mass mailings, newspaper articles.
241. More articles in newspaper.
242. Advertise in the local People News.
243. Posters listing pertinent services in the doctors' offices, hospitals, schools, health dept. etc. to be placed in prominent places.
244. Education classes for seniors that stress awareness of these services.
245. Series of articles in the Banner.

246. Maybe a one number/location people could contact that states it is for providing services to those in need. A lot of people don't understand what the United Way does.
247. Radio, TV, one on one.
248. Have some informational programs about these services at the area churches.
249. Mass mailing of information.
250. To provide interns gas money, more interns would volunteer.
251. Need more publicity in Banner and on the radio.
252. Advertise one website with all services. Make a pamphlet with all services.
253. Have a Volunteers in Medicine Clinic established in Cleveland. There is one in Chattanooga.
254. Through media, mail-outs, medical facilities (doctors, hospital).
255. Posters, billboards, ads at the places they go, flyers at hospitals, doctors' offices, meetings held at schools to explain services available.
256. Better advertisement for services offered.
257. TV/radio/newspaper/churches
258. Hire professional social workers.
259. Newspaper community announcement, TV and radio spots.
260. More mailing of services and contact info with description to every resident and to every church in town.
261. Advertise help. Don't just wait for people to stumble onto services. Let people know they can get help. And have friendly staff that at least act like they want to help instead of discouraging people from getting help. They always discourage me on getting help and that's sad.
262. Mailout of brochures with phone numbers, websites, and addresses. Hard copies in the hands of people seem to work best.
263. Educate service people they may come into contact with...educate churches.
264. Radio, facebook, twitter.
265. Provide to each resident a list of services and phone numbers for information.
266. More advertising.
267. Advertisement/marketing to targeted population.
268. Provide more publication and news announcements of programs available.
269. Publicity in newspaper and on radio/TV
270. Develop a network/clearinghouse for benevolent agencies. So many programs duplicate services in ways that fragment the services offered in the community. For instance, many programs seek to provide Christmas support to families with limited incomes, if these programs worked in concert, the help could benefit more families.
271. I think that those needing services can find out about them, but I don't know for sure. I don't need these services myself (praise God).

272. Develop a well advertised central resource contact to direct people to appropriate agencies in the community.
273. A centralized location of social work/resource connection might be useful, as well as a newsletter or resource guide distributed to the poorer communities, personally delivered and explained by representatives/volunteers. More outreach (on a personal level) is needed.
274. Prepared guides (regularly updated) available at various locations - courthouse, police dept., library, local "ministries" (i.e., Habitat store, Salvation Army, Caring Place, booth at Bradley Square Mall, Goodwill Store), as well as available to local churches and groups for distribution to the community.
275. This is a hard one to figure. You have to think of a way to advertise them where a significant portion of target group will see it. Many who need these services have TVs and watch them a lot for lack of Sending things home from school may be good because (almost) all children attend school, but then again, often parents never see what you send home with a child. But that may be worth a shot.
276. Get Lee University advertising/public relations majors to assist for free
277. Mailer, advertisement, community fair, open storefront with materials
278. NEWSPAPER, RADIO
279. Infiltrate churches, schools, colleges/universities (or any other places where people are collectively gathering) in Cleveland with documents listing and contact information.
280. Advertise in the paper
281. Possibly some sort of electronic bulletin board as well as print materials available at businesses throughout the county.
282. More advertisement.
283. Continue to increase networking and advertising of various services.
284. Promotional blitz in local papers, brochures at local businesses, information distributed at churches and local employee meetings
285. Radio announcements, mailers, billboards, flyers in grocery stores/Habitat ReStore/UGO/Caring Place - place the advertisements in locations where the people frequent
286. Marketing campaign that focuses on communicating services.
287. Multimedia exposure.
288. Possibly health fairs within the neighborhoods that house low SES individuals.
289. Improved community and organizational collaboration, centralized site for accessing community resource information
290. One way would be sending notification home with the children attending Bradley County and City Schools.
291. Send out flyers to the schools and maybe put an ad in the paper.

292. Monthly PSAs, brochures and info bulletins sent out to local public schools and government agencies and doctor's office waiting rooms.
293. Advertise a central place of contact through local TV stations (not cable), radio, schools, doctors' and dentists' office. Make it easy to find help in telephone directories.
294. Newspaper, radio, website.
295. Newspaper, media, contact with public and officials at public meetings such as city/county commission meetings, etc.
296. Keep funding Nancy's House.
297. Education about services through as many outlets as possible, such as Red Cross, clubs, churches, schools, library, Home Health, etc.
298. Public Service Announcements, TV and radio.
299. Directories distributed throughout community.
300. Employer communication, church communication and more municipality communication.
301. Radio and/or TV commercials on local channels. Pamphlets or brochures available throughout the community.
302. There should be more social networking sites to advertise these programs through Facebook. The only way people hear about these programs is through flyers, which seem ineffective to me.
303. Provide community businesses, leaders, churches with a services directory to include what issues are addressed by the agency, qualification for services criteria, and who to contact.
304. Advertise, promote through social groups (e.g., churches and schools).
305. Have it all listed in one place so it's easily accessible. And then have that widely available.
306. Continued leadership of the United Way. Quit funding programs that do not attempt to sustain themselves. Better coordination with the media.
307. Publish brochures, list services in phone book, publish services in Banner, etc. help line to call.
308. Using the school system to get information to parents and adults. Using local hospitals and doctors to hand out information to patients and clients who are in need of mental health services that are free or at a reduced cost. Possibly using community events like the local farmers' market during the summer to hand out information on services and the local car shows they hold once a month during the summer.
309. An almost impossible task-direct mail to all addresses might help; billboards; posters in healthcare facilities/dentists' offices, etc.' even posters/placemats in restaurants frequented by those in need.

310. You need to have more advertisements. You need to put it out there and let people know.
311. Televised information on local channels.
312. Centralize 11 system that is for our LOCAL community and list all the resources in BRADLEY county.
313. Provide schools, churches, hospitals, and other common community places with brochures as well as train key individuals about their existence and how to suggest or give them out to people in need of their services.
314. Community website with community services info, advertised by billboards and handouts.
315. Possibly a local 211 service.
316. Health Fairs and other types of community events seem to help spread the word about services. Newspaper articles are helpful also.
317. Advertisement. Send brochures home with school children.
318. Develop a directory and distribute to schools, doctors' offices, emergency shelter, and other public locations.
319. Promotion.
320. Public service announcements on TV; directory of all available services and what they can provide.
321. Programs through the churches or speakers at PTO and community meetings.
322. Commercials, pamphlets of service offered.
323. Networking with the community itself rather than just between agencies and providers themselves.
324. Have them regularly listed in the newspaper or send out a pamphlet with list of available services and contact names and numbers.
325. Social workers could make rounds to efficiency hotel rooms where people are next to being on the streets. Assist them then and do substance abuse education, teach the difference between slavery and freedom from addictions.
326. More information made available to senior citizens thru newspaper and mail.
327. People are aware of most services but when they contact the services they usually don't receive the services or they are referred to other agencies. Other agencies do not know what services other agencies offer. With all the services listed in the resource manual, I think over half do not provide services that they should. Why do we have so many problems with all the listed services in place? When someone needs help they need help not to be placed on waiting list. The personnel at most of these agencies are rude and when someone is down, the last thing they need is to be kicked again. I think we have a great problem with the youth and no one is trying to improve these services. We can not move forward without the youth.
328. Meetings at school or more health fairs for parents; town hall meetings; flyers to be sent home with children.

329. They need to be advertised better. Posters that can be placed in public locations such as Health Dept., schools, doctors' offices, etc.
330. I think you should send home flyers with school children.
331. Have someone set up a booth at school events in high-need areas (high poverty schools).
332. Radio advertising, ads in local paper.
333. A general mailing to everyone's mailbox, have public information spots on radio and TV, front page newspaper articles, give public service organizations flyers to hand out to clients.
334. Provide more information in the newspaper about agencies and their programs.
335. I think Bradley County has done a fantastic job getting the services to the community at large. However, I feel that one of the best ways is to bring together these service providers so they are aware of others services and if they encounter individuals who are in need of the services they know who to contact.
336. Advertise, newspaper, TV.
337. Newsletters/e-mails even Facebook information. The schools are a good source as are the local churches.
338. Better public awareness of a comprehensive Resource Guide.
339. Advertising services on the radio and newspapers.
340. Advertising more on radio and newspaper and billboards.
341. DCS, DHS, community kitchens, homeless shelter, ER, elementary schools, churches, Latino grocery stores, etc. would be great places to distribute a list of community resources and how to access.
342. Acquire volunteers to distribute information door-to-door. Newspaper, public announcement, etc.
343. Education advertisement, newspaper articles, TV, ads, circulars, websites.
344. Services Menu. Do we have a website? Work with schools?
345. Visit the elderly and inform them of services available to them. This would also give us a way to check on them and make sure they have what they need and are living in proper conditions.
346. Representatives could go into the areas that need the most assistance, for example, housing authority areas, and give little classes educating the people of the opportunities available to them, and to help them get connected with the services offered.
347. Service Information fair at the Mall, advertise your website, disseminate information through schools.
348. Since most people must shop for food, I would like to see a booth or table setup with brochures for a volunteer to answer questions for people in need at least once a month or rotate the locations to different stores. Not just a place for asking for contributions.

349. Service Announcement on Channel 22; pamphlets handed out at school.
350. Existing agencies should share information amongst themselves and make clients aware of all the services that may be available to them.
351. Print a sheet which lists available services with a contact number for each service and leave this sheet with secretaries at churches and schools.
352. Provide information during church, to school counselors, at Chamber meetings, doctors' offices and hospital.
353. If all of these services are available, I had no idea...I think a list could be made available to teachers, churches, physicians, and any other people that serve the public. If a need is seen, the service could be offered to that person.
354. Churches and schools need to be informed of services.
355. Educate the public of what is out there to help people.
356. Have public meeting.
357. More info to service providers, especially teacher who work with transition services and physicians who work with elderly and their families.
358. Greater radio public service announcements.
359. Go to churches and neighborhoods to hold meetings about services. You must go to them instead of them coming to you.
360. Advertising; bring it to awareness of churches who could better direct people to services that meet their needs.
361. Have it clearly listed in phone book. Maybe several places so it is easier to find.
362. A central information number or place where referrals would be made to existing agencies.
363. Those who abuse the services know where to find them. Those who work hard don't. Have frequently updated list of services for companies when they let someone go, for schools, churches, social service agencies, etc.
364. Get people a job who depend on the community to pay their bills every month. Convince them to help themselves first.
365. Hire Matt Ryerson as the Community Liaison for Cleveland and Bradley County.
366. I believe those who are in the most need of the services are either not fully aware of the benefits of the service or reluctant to use the services. Those who are completely aware are more likely to have used the services or work in the service sector. Continue to participate in public events and support from the local media to promote the organizations and programs that are available.
367. Effective marketing and advertising.
368. Use billboards to give info line numbers.
369. More communications through brochures because there are still people out there who may not have access to computer or internet.
370. Publicize this information in the black community – it appears that the elderly and even younger black citizens are not aware of the many programs offered – also,

they need to understand the services are there for them and should not be afraid to take advantage of them.

Question 2: Please tell us about other needed programs or services that you believe should be provided or improved to better meet your personal needs.

1. None
2. Program in place. More publicity.
3. Summer recreation at parks during summers. More stuff for kids.
4. Care given program for elderly. I care for my husband 24/7 and need someone to sit for him sometimes that kind of program.
5. I think the pre-schools need to be for all families not just low income and their needs to be more classes to meet the growth of the community.
6. Dental needs – a lot of people including me need dental assistance.
7. None that know of.
8. Child care for parents who attend GED classes.
9. The pre-K programs in Bradley Co. are very limited for those of us who are “above income”. We still have mortgages, insurance, etc. we pay for, and it’s almost like we are penalized because we actually work. Our kids then don’t qualify.
10. I work with TennCare and Blue Care population. There are NO dental or vision care resources for adults that can be easily accessed on a regular basis.
11. Transportation for non-medical errands is also an issue for those on fixed income and cannot afford SETHRA. Home and vehicle modification is also an issue for low-income population.
12. Affordable insurance to keep.
13. Lower income insurance.
14. Better ways of determining who should or should not be provided benefits or services.
15. I feel you should educate on pregnancy prevention because once one is pregnant there’s WIC, TennCare, the Health Dept., but not enough emphasis on not getting into the situation to start with. Nancy’s House is a real need!! You should really sponsor it versus children and their parents at the YMCA. Sponsorship should be for the children not parents!!
16. None
17. There is a need for another Adult Day Care Center for people who have to work and leave elderly parents for a few hours. Some areas in the community need help in how to keep neighborhood up to par.

18. We weren't sure who to contact and how to get the help we needed. We heard from word of mouth and relied on that to find help. We wanted to do something but don't know how (child abuse).
19. Free babysitting services for low income or needy families for when you have to go to the doctor.
20. Fitness/Wellness/Exercise for individuals with special needs – swim lessons or sport games with instructors trained with special needs individuals.
21. We must find a way to get the people out.
22. Not sure
23. Meeting the needs of children and parents are the most important – make parents want to seek help and not having to beg.
24. How to deal with children at pre-teen/teen on sexual issues.
25. Care for 8 – 10 year old on Saturday. They aren't allowed in gym or nursery and I don't feel comfortable with them in pool alone.
26. Hiwassee Mental Health needs group therapy funds.
27. Transportation – better accommodating of those who can't get somewhere to be picked up.
28. I think you need to help the working man/woman out better. I personally and 3 others I know have paid into United Way and received nothing in our hour of need. N-O-T-H-I-N-G. You lost our contributions. The poor need help too, but sometimes the poor totally use and abuse the systems. Help someone down on their luck rather than making begging and taking a lifestyle for the lazy. Think about this when contributions are down, here's why.
29. Transportation to VA.
30. None
31. Nothing
32. Affordable dental care for people of all ages!!! Even individuals with middle income cannot afford \$800 - \$1,000 to have a tooth "crowned".
33. Healthcare programs made available to people with no insurance.
34. Help with utilities. Also things like spray for bugs and mice. Reduced cost of fixing a vehicle when it quits.
35. To help people who need food and assist is all I can think of.
36. Help finding people and placement with a job.
37. Single mothers with no high school diploma.
38. Low cost housing, medical, dental, vision, job search service – knowledge.
39. Transportation to get to work.
40. You pretty much covered everything except spousal abuse which is not really talked about or dealt with.
41. When sudden illness comes and you don't qualify for food stamps or other services because of income from one spouse but the bills are based on two

- incomes and you have lost one income, help for a little while, while they try to fix the problem.
42. Our community has so many people in need of the services mentioned above. There's just not enough money to go around. I know for a fact that the GED program is seriously lacking needed supplies such as paper, pencils, etc., hindering their ability to help so many in need of their service.
 43. Jobs
 44. Would like to see Senior Center offer more programs and be more involved with the elderly.
 45. Our needs are immaterial.
 46. If more information regarding all the topics mentioned in this survey were adequately addressed and shared with the public, I do not believe there would unmet areas of need.
 47. A local veterans home and health clinic.
 48. Do not promote children past third grade that are not able to read or write. No social promoting of students. Do not allow a parent to mandate to a principal that a teacher be fired for some silly reason a teacher did outside of school hours. They need to change the school hours to being at 8:00 a.m. instead of 7:30 a.m. Students are not mentally awake at the 7:30 a.m. hour. Students need to be allowed to hear about other countries from people living there. The students need a broader exposure to countries around the world.
 49. Teen mental health and parental respite care with teens. Lots of program for small children, but cannot find any for teens and their families.
 50. Dental/vision for low income. Just because people have jobs and don't qualify for food stamps and housing doesn't mean they can afford these things.
 51. Clean drinking water to fringe areas of the county. Better storm water control and management.
 52. Another community pool for summer. Finish greenway further north. Add another head start program. Expand the Regional Intervention Program to include community seminars and further funding for advertisement and website development. Expand Regional Intervention Program to provide a nursery for those who have target children in the program, but have children too young to attend.
 53. Shelters for the homeless and help for those who have lost their homes.
 54. Services for troubled children is greatly needed – especially for those students who do not meet Special Ed services criteria; also a need for parenting programs to help parents know how to work with their children; more collaboration with the juvenile justice system to help students before the student becomes a part of the juvenile system.
 55. I am fine at the moment; blessed and highly favored.

56. Help with medical needs when insurance does not cover and it is an emergency.
Food, money help when needed.
57. More food banks for people, not just people with low income. We all need help.
58. Parenting classes, especially for single parent families.
59. I believe public transportation is of utter importance in this community, but is lacking.
60. More public and low-income housing so that the wait isn't as long for those who really need it. Sometime people are in desperate situations and they can't afford to wait for 2 years until something becomes available. Also more funding to help with rent, utilities, deposits.
61. SETHRA could start earlier to get people to work by 7 a.m.
62. I believe that most parents are at a loss of what to do by the child reaches 3rd or 4th grade. I think there needs to be some sort of parenting class that they should attend and get certain SMALL perks if they implement suggestions given to them with positive feedback. The "perks" would be small but still valuable to people and they would have to meet certain goals as far as their child and their child's education. Basically, teach some parents how to parent and not give up.
63. I can't think of anything – BICC (Parent Educator) program is wonderful.
64. Volunteer tutoring in which the tutor could gain extras (i.e., college students without insurance that volunteer tutoring of students in Cleveland schools could gain assistance with medical bills or get free exams).
65. American citizens with limited income need help with health/vision/dental screening AND care. Maybe use the senior center to provide screening once a month (to help people). Or...use First Baptist Church since they have a large facility.
66. Job placement services for young adults not in college or for college students.
67. We need more grief support groups around and also professional counselors to help with grief one on one. I feel we also need a place for mentally handicapped to stay while their care giver has to work. It would be nice.
68. Alzheimer's patients need for home care.
69. Affordable wellness programs. There is the YMCA but it does not provide scholarships for "the working poor". More affordable services for "the working poor" who make too much money to get any assistance but do not make enough money to pay for some of these services. I think there needs to be more workshops/trainings about money management, budgeting, mortgages, etc. not only for adults but for TEENAGERS. Most teen do not understand these concepts because they do not focus on the teenager. The trainings need to be educational to prevent financial problems before they exist, not just training to help people get out of financial trouble.

70. Pre-school classes and transportation provided for children that need to attend that don't come to head start. Or have more classes like head start provided at more of the elementary schools.
71. More help for sudden layoffs or reduced income. More drug awareness information classes offered.
72. Help for the elderly.
73. Affordable medical care med, etc.
74. More assistance for students with special needs, especially those with TennCare and limited transportation.
75. Drug Rehabilitation; something like an amnesty area where addicts can go for real help, shelters for the homeless, jobless, etc.
76. In-school mental health counseling for students with problems, especially for those with no insurance coverage.
77. Pre-school programs should be structured and balanced so there can be disciplinary actions taken when children have behavioral issues. This would help both the child and Kindergarten teachers to be able to help the child be successful in a regular educational setting. It appears now that disciplinary actions are not allowed to be taken with pre-school children and this does not present an accurate picture to parents or children when regular education begins.
78. Free counseling and tutoring services for teens.
79. Autism and special services for special needs children of school age when school system will not provide services; medical coverage of ABA and bio-medical treatment for autism.
80. The veterans need more assistance.
81. Budgeting/Loan/Mortgage classes on what these things are and how we are responsible for them.
82. More running and cycling races in Cleveland/Bradley County. More people will see the races and it will encourage them to exercise more.
83. Again, the churches should be providing for people in need and not the government.
84. Middle class America is suffering the worse right now and there should be some assistance for this group as well as the lower income families.
85. Stress management program to help stem domestic violence, domestic violence counseling, programs for victims of rape and sexual abuse.
86. I can take care of myself and do not need your help at this time. I also feel that English should be the official language of the US and that e should not have to provide special services to people that do not speak English.
87. None.
88. Bradley County needs better services for our eldest population.

89. Reliable transportation for those without a car. I have an 8 month old and we have one vehicle. If he needs to go to the doctor, I cannot take a bus because he won't have a car seat.
90. I would just like to see the area over in the East part of Cleveland around the 800 Benton Pike area. We have been working on trying to make it better for the youth there.
91. Would like scholarship opportunities for high school kids in an at-risk situation.
92. We definitely need more rooms for the homeless. Right now there are only 40 something. We should never have to turn someone away. For a county our size, this is just too small.
93. Some residents need assistance with general maintenance of their properties. The Coalition for Community Improvement Committee, a part of the local KAB is in desperate need of volunteers and churches to assist with these projects.
94. Having to go to Chattanooga in an emergency is not very convenient – Memorial extension in Cleveland would be wonderful!
95. Affordable day care programs for children after school or before school starts for pre-K and kindergarten children. As a single parent, it is impossible to take your child to the local pre-K programs and difficult to afford the after care for kindergarten children as well as paying for everything else.
96. Programs are needed for children with physical or behavioral challenges. Present program cannot and do not adequately address this need.
97. There desperately needs to be after school programs, sports programs, and summer activities for children whose physical and/or behavioral challenges make them difficult to handle in the regular program setting.
98. Transportation
99. Discounted utility rates to low income families.
100. Most are covered by the intent of these questions.
101. Public transportation for those without cars. Also, housing regulations need to be enforced especially on rental property.
102. There are many people who need assistance but do not meet the income allowance such as those who are without jobs but have too much money in bank.
103. They are using this money for basic living expenses so can not afford medical treatment because they have too much money they can not spare or use except for basic living expenses. What happens to these people when it comes to going to the doctor or to the hospital. There is no funds to help them.
104. The previous suggestions sound important and needed but I don't now if we can afford so many in this economy.
105. We are blessed to have such a caring community that so many different levels citizens respond to different needs!
106. There are more than enough services to meet the needs of Cleveland.

107. Assistance with jobs, temporary housing, transportation, meals, day care for homeless while they search for permanent housing/work—the best program in town to meet this need is Family Promise of Bradley County. PLEASE SUPPORT THEM!!!
108. More engaging after-school programs for elementary age children. For example, programs that offer enrichments such as music, creative hobbies, physical games/ activities would be a great benefit to the community.
109. Medical and prescription care for elderly income people.
110. There are lot of good programs in our community. Some of the ones we have need expanding.
111. Helping people that try to work but have a hard time so they think they can get more help if they don't work.
112. We have a great many free or low cost services as well as opportunities for recreation in this county but we keep them a secret. Provide a weekly list of activities and highlight an in-depth look at one or two each week. The news announces them after they happen, before if they get paid. I would like to learn about them before they occur.
113. Need to focus resources on education and nutrition.
114. Helping families cope with their kids who have special needs or on the autism spectrum who deal with behavior problems.
115. More services to bring churches together to bridge the gaps. Better transitional housing for low income families trying to make it. More areas of outreach to provide training to individuals in “how to live” ie., finances, church, study, etc.
116. More help for those in the county 24/7 hot line.
117. I have no complaint about any of the local services. I am adequately served.
118. AIDS education/awareness and care for HIV positive individuals and their families; better resources for homeless; job banks/assistance for unemployed/underemployed; support for “quality of life” programs in literacy, the arts, health.
119. Abused women safe house; transitional homes for homeless.
120. Better services for those with limited transportation. A very important, currently unmet need is for a service to deliver groceries to homebound seniors.
121. Family planning and birth control.
122. Somehow or somewhere, there must be a way to reach parents/caregivers of young people other than sending “notes” home in kids' backpacks. Educating the adult is hared than reaching the kids. Research into establishment of some effective means of communication and then implementation of the program would be most helpful, if it is actually possible to do so.

123. More support to the Senior Center services and staff
124. Home care for the elderly services when seniors need bathing, walking.
Child care services for summer and after school that are affordable.
125. Taking some of the elderly and taking them to doctor's appointment and anything they needed help with.
126. I often get requests from community members for different types of help and the one thing I really see that our community is lacking is a mentor program for older teens. Big Pal Little Pal, Bridging the Gap, etc., all cut off at age 15. The later teen years are when kids can really start getting into more serious trouble. We need a program for young people 15 – 20 to have a positive influence in their lives and to have an activity that keeps them away from other more detrimental activities. Also, we have a lot of requests from elderly who can't do simple things around the house and yard. If we had a kind of "task force" of able-bodied people that could help local elderly, especially vets, with seasonal cleaning, yard work, clearing gutters, etc.
127. Employment programs for young adults that slip through the education system and are still floundering instead of being productive citizens.
128. Job training and job opportunities for convicted felons who have made life changes.
129. Health information – diet, nutrition, etc.
130. Healthy eating/cooking classes and community services open to more than just low income. People can go to work every day and have children and still need help every now and then.
131. Health care assistance, free clinics, income based dental, summer childcare programs similar to Big City University (unlike other programs this one concentrates on tutoring).
132. More athletic programs for children. The obesity rate is high, if grants could be made available to Bradley County Parks and Rec for programs such as wrestling, baseball and basketball – so children could be active would be beneficial. If BC P & R not interested in this possibility – suggest Boys and Girls Club or Community Center. NOT the YMCA it has a country club atmosphere.
133. As an elderly person living alone without family in the area, I would like someone or place to check in with. If I did not check in by a certain time each day, someone would check to be sure I am OK.
134. I don't think the present health care plans are an improvement in fact they will probably end up costing us. But, we need AFFORDABLE health care, free from restrictions of pre-existing conditions.
135. Mental health services for our schools.
136. Personal computers for the elderly and broadband access in rural areas.

137. Lower insurance premiums on supplemental Medicare insurance for seniors.
138. Behavior intervention program for children exhibiting behavior problems at school. There is a grant funded program in town, Regional Intervention Program, but it is not well known and has limited funding to operate.
139. Adult programs to help mentally challenged find work and cont. ed. (such as Trousdale School)>
140. Financial classes
141. Need to prevent gang violence and teenage graffiti tagging. After school programs, work with law enforcement, work with parents.
142. Improve the awareness of existing services so the elderly and their families may take advantage of services they may need.
143. More attention to the elderly who are at home alone.
144. My needs as a young adult are met, but I am concerned about the elderly and children in the community receiving the best care and services available for them.
145. Mental health services for children.
146. We need better after school programs and summer programs.
147. Help paying for school and after care programs for my children so I can go to school. Lack of these things makes it very hard for me to go to school. I have the willingness and the desire but is a slow go b/c of lack...Despite this I have 4.0, it is just taking longer to finish b/c I can only be at school a couple of days a week. Matt Ryerson is my law teacher and teaches on Wednesday nights only and it is nearly impossible to go b/c of lack of child care. Thank you for your time and listening.
148. More options for home schooled children (such as that offered by the YMCA), to encourage parents who take the responsibility to raise and educate their own children as opposed to relying on government and community to do it. I'm not sure that they should have to pay for every field trip and extra activity for children, when their fund go to local schools, whose children get to participate in many activities.
149. My adult low income clients on TennCare do not have dental needs met.
150. Extend Greenway to river.
151. Parent's class on how to deal with teenagers.
152. All programs should be available to ALL people not just certain groups. There are people who work every day that cannot get ahead and in reality they are just supporting the people who don't work or the girls who have multiple kids at our expense.
153. Network of benevolent agencies to prevent the duplication of services. This could help us help people more efficiently.

154. Publicize more opportunities to volunteer.
155. There are currently no programs or services for LGBT individuals and families in this area or surrounding areas.
156. We need more and better mental health services for the community. I am a mental health provider and there are very few competent practitioners to whom I can refer clients. Specifically, we need psychologists and psychiatrists (more than MA-level practitioners.).
157. More public transportation, glasses and basic health/dental care for those who have no income or are mentally ill.
158. Transportation
159. Funding for younger children with disabilities.
160. There needs to be a mental health facility and more child psychiatrists to work with the young child with mental health issues. There needs to be more quality inpatient facilities than just Valley Hospital for young children. These children with severe emotional and mental issues are completely left out and underserved. There also needs to be an active crisis team to work with young children in crisis and they could help them be transitioned into a mental health facility if needed. There also needs to be support groups for families with children with mental health issues. The education system needs to be working with the parents of these children n to help them become better parents and to get them the help that they frequently need (parenting, counseling, etc.)
161. Affordable health care/insurance.
162. Programs that educate parents what help they can get such as discounted after school programs. For some people (like myself) it's hard to ask for help when you need it and humiliating to have to ask for forms. I always paid full price which was hard and later found out other people paid less than half of what I paid for twice the children.
163. None that I know of.
164. I would love to see a UW sponsored speech/language-special needs clinic run during the summer month. There are so many kids in the area who are on waiting lists for medical therapist and school is not in session during the summer for them to receive those services. Many of our students need transportation which would be an issue.
165. More funding for meals on wheels. Many seniors are doing without because the program is full. From what I heard last, it was at least a year's wait before a person could receive services. The cost of fuel is a major concern for the volunteers doing the deliveries.
166. Someone to check on the elderly, ill persons each day who reside in their homes and are alone. (by phone or going by residence).

167. I'm an older HIV positive man with transportation issues and rely on Nancy's House for case management and assistance.
168. Grant writing training.
169. I just graduated, and I don't think enough local businesses provide GOOD jobs for college graduates. You pretty much have to move out of Cleveland or "know" the right person in order to get a respectable entry-level position. There isn't a good way to transition from student to worker. Lee doesn't provide and neither does CSCC.
170. Way for volunteers to be paired with agency/individual needs.
171. More ongoing evaluation, non-profit board training, fund development, capacity building.
172. Summer care and after school care services for single parents who are struggling to make ends meet while maintain job and trying to avoid obtaining government assistance for help.
173. Programs/assistance for individuals with physical (not mental/emotional) disabilities (e.g., MS, MD) for transportation, help with home repairs, etc. Practical help...
174. You need more people that really do care helping people because most are rude and hateful and don't care.
175. Central location for services in low income areas or a day when those services go to areas with residents that have difficulty accessing them.
176. Need a database that agencies and churches can post the names of people they help and the amount of money given as well as other services provided for them. My spouse works for a church that is continually helping people financially, providing housing, food, etc. Sometimes people go from place to place and are receiving funds from multiple places. A common data base that shares information among providers can eliminate the abuse of help.
177. More preschools for low income families.
178. More funding for programs that directly address the poverty and illiteracy.
179. Assistance in caring for my elderly parents.
180. Having a program for seniors who live alone and need help getting to and from doctor appts. Helping them get to the grocery store, or take food in. Most of all just to visit them, as most are very lonely and depressed. We have an Aunt in Nevada in this circumstance. Feel this is where our churches could be of great service to the community by having a list of people who would like to visit and do what is needed to help anyone who is not longer able to get out and is alone.
181. We need to focus more on the youth.
182. Counseling services for children and teens who have been sexually abused.

183. There are not a lot of services available to parents with special needs children as far as child care is concerned. I know many families that can not find day care centers or baby sitters to watch their disabled children so they can work.
184. Tie some social services to parenting obligations. They should give some time to receive, no handouts.
185. I'm not even sure of all the services that you provide, so it's hard to say.
186. I think that there are several good agencies in place, but with the rising number of impoverished families the need for the basic shelter, food, and clothing are also increased.
187. No transitional housing in community – homeless shelter only satisfies the needs of a certain segment of the local homeless population. More funding for rehabilitation and permanent housing for lower income families.
188. I think after school care needs improving.
189. I would love to see curbside recycling again. There are actually cities that are generating individual, business, and community revenue by recycling. I would love to see our city be environmental progressive. See recyclebank.com. Additionally, I would like to see more community services for our Latino immigrant neighbors...such a discriminated population!
190. Job Training Centers
191. Quality preschools is a high priority. I would also like to see support of great programs like Helping Paws and Kids on the Block continue in our schools.
192. Better help for parents dealing with adult children with disabilities. My parents are in this situation in another county and there is basically no help for them. He worked during the day, but nothing on the weekends ever or nights. There needs to be a quality respite program that is advertised and available to all parents of disabled children or spouses of disabled spouses.
193. I think if the families who need guidance and help in certain areas, can get help, and will willingly do what it takes to be the best that they can be, that it will automatically improve the community and my personal needs will be met. Also, maybe there is way we could use all the empty-run-down factories in Cleveland, or Bradley County, to clean them up and turn them into training facilities for different programs offered by the United Way.
194. Legal assistance for issues involving the elderly
195. Parenting classes/family support seems to be at the center of many issues facing our community. If we support strong family relationships, many issues are impacted such as drugs, family violence, juvenile delinquency, etc. Counseling/training to develop family relationships is generally not covered by insurance unless it is through the court or DCS. By this time, it is more difficult to repair the problems. Focus on prevention is always most effective. Natural supports could be placed in the schools that students attend, offering evening

- classes or support groups with counselors and/or therapist might involve more parents that would participate in a more clinical setting.
196. We could do such a better job of providing reliable transportation on a regular schedule that ran throughout the county and connected people to hospitals, jobs, clinics, community centers, and other buses to Chattanooga.
197. Before school care for elementary children that do not begin school until after 8:00 a.m.
198. Aggressive birth control counseling needs to be provided to teens and adults with limited incomes and education.
199. Instead of offering so much YMCA funding, encourage all families (middle income as well) to participate by subsidizing ALL for healthy reasons. The YMCA has outpriced itself for the middle income families.
200. The elementary schools need a professional mental health counselor for those children who are recommended to have weekly counseling services, but the organizations can only provide monthly because of lack of personnel.
201. Definitely feel that in-home services for the elderly would be beneficial.
202. Middle income people need help!!! Lower income people get all kinds of help to keep them from working...middle income people...especially men and singles...get no help.
203. Help for the elderly who have no other income coming in and are not able to go find a job to get the extra income. They are struggling all the time especially when the high light bills come in. Also they need food stamps and are not able to get them because of their income or they do not have children at home, come on these people have worked all their lives and can't get help now because they are older it just doesn't seem fair to me. For instance I know someone who has cancer and is retired and that is the only income, they went to try to get food stamps and could only get 44.00 a month...what is that going to buy them for a month? I know that is a government issue but someone is going to have to help the elderly out her. The younger you are and the more kids you have, the more help you will get. At least that is my opinion on the situation. Now there are a lot of organizations here that are not funded by the government and they do a great job, although it is just a eon time thing in most cases and that is great it is just not enough for some people. I personally feel that SOME of the people just think they are INTITLED to get help whether they really need it or not. That really bothers me! I do not mean to sound hateful or anything. I just feel that the elderly have worked all their lives and IF anyone is entitled to any help it is THEM.
204. I feel that many of the needs in the community are being addressed and a focus should be on enhancing existing programs rather than creating new ones.
205. Adult dental care, a shelter for people with families (especially children).

206. Psychological services for those with low incomes – drug and alcohol abuse programs – shelters for the homeless due to drug and alcohol abuse and young teens to leave school or graduate with no jobs – formal job training for these people as well as committed companies to hire these people – without discriminating against them.