

# Community Needs Assessment for Riley County

Assessment conducted by the Center for Community Support and Research



WICHITA STATE UNIVERSITY Center for Community Support and Research

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# **Executive Summary**

In an effort to gain insights from the community for the purposes of planning and community improvement, Wichita State University's Center for Community Support and Research (CCSR) was contracted to conduct a community-wide needs assessment for Riley County, which included the compilation of selected secondary data, administration of a community survey, key informant interviews, and focus groups with persons who were underrepresented in the survey. Secondary data, which is publicly available such as that from the Census survey, Kansas Behavioral Risk Factor Surveillance System (BRFSS), and others, was compiled for the most recent years available. Additionally, a community survey was conducted via the internet, mail, phone, and through administration at public locations or meetings to gather input from residents regarding their perceptions of community strengths and needs in 11 different topic areas (Quality of Life, Health, Mental Health, Social Issues, Children and Youth, Education, Aging, Housing, Transportation, Infrastructure, and Economics and Personal Finance).

A total of 1,126 surveys were completed. Although significant efforts were made to solicit participation by a broad sample of community members, the survey respondents were largely white, female, middle-aged or older, educated, and had higher incomes than the general population. In order to gain additional insight on the issues addressed in the survey as well as any other topics of concern, key informant interviews were conducted with 25 community members representing a wide range of interests and professions (e.g., ecumenical, business, healthcare, social service, education). Additionally, a focus group was held for each of the three populations that were underrepresented in the survey - young adults (18-24 years old), persons with low income, and Hispanics/ Latinos. The primary strengths and needs that were identified for Riley County were remarkably consistent regardless of method of data collection.

The overarching theme of all of the data collected is that Riley County is a community that is divided between a **high quality of life, prosperity, and** growth on one hand, and dwindling resources for and lack of attention to those who are most in need on the other. More specifically, the primary findings across all methods are:

#### THIGH QUALITY OF LIFE

Riley County generally offers a high quality of life due to such factors as good schools, safety, a clean environment, and a strong sense of community.

# LACK OF ACCESSIBLE AND AFFORDABLE CHILD CARE

According to the Department for Children and Families (2013), the funding for child care assistance in Riley County has decreased over the past few years as has the number of children receiving this benefit. This is another area that appears to be of particular concern for those who have low incomes; however, 11% of the survey respondents, who tend to have higher incomes than average, report having lost or quit a job due to child care issues. Over 40% also indicate that child care is not affordable.



#### "INVISIBLE" POPULATION WITH SIGNIFICANT NEEDS

As Riley County grows and prospers, those who have fewer resources or who are outside the mainstream (e.g., non-English speakers, those with disabilities or mental illness, persons with low income) have a sense of being forgotten or pushed aside. This population was described by one participant as "invisible" because they are easy to overlook in the midst of general prosperity. They have significant issues with housing, transportation, and access to necessary health and mental health services that are surpassing the decreasing funding for such necessities. Persons in the military and students are affected by this issue as well given that they are often lower income but not thought of as being in need of assistance. The effect is an expanding divide between those who have resources and those who do not.

# SPIRIT OF COMMUNITY AND COLLABORATION

While the needs may be great for many in Riley County, service providers and others in the community are oriented toward working together to leverage resources and bridge gaps for those most in need. The work of the Riley County Council of Social Service Agencies (RCCSSA) was highlighted as a key catalyst for cooperation and collaboration. Kansas State University and other organizations and businesses are also seen as constructive partners in efforts to address needs and better the community.

### GROWTH

Riley County is experiencing a "boom" of sorts with the likely addition of the National Bio and Agro-Defense Facility as well as other business development efforts. While this is seen as a positive by many, others are concerned that the "bottom will fall out" as one participant noted and that the community does not have the infrastructure to support such rapid growth.

#### **LACK OF AFFORDABLE HOUSING**

Affordable housing is a major issue across the community for students, low income, and even middle class persons. Secondary data show that the average value of an owner-occupied house in Riley County is much greater than for the state of Kansas (\$174,900 versus \$129,500). There is a sense of an inflated value being placed on housing, including rentals, by those who are selling and leasing properties.

# LACK OF ACCESSIBLE & AFFORDABLE MENTAL HEALTH SERVICES

Respondents to the community survey rated access to and affordability of mental health services in the community as their top concern related to mental health. This need was echoed frequently in key informant interviews and focus groups. Mental health services appear to be particularly difficult to access and afford for persons with low income and those who do not speak English.

# Acknowledgments

The assessment was conducted by Wichita State University's Center for Community Support and Research (CCSR). The Riley County Seniors' Service Center provided leadership and coordination of this project on the local level and contracted with CCSR to conduct the assessment concurrently in Riley and Pottawatomie Counties to meet the needs of various partners. However, this community needs assessment was the culmination of a collaborative effort by multiple persons and organizations.

We would like to thank the individuals who participated in the community needs assessment survey, interviews and focus groups. They provided us with insight into the needs of our communities and what is important to the quality of their lives. We would like to thank the agencies that funded the Riley and Pottawatomie Counties Community Needs Assessments:

- Caroline Peine Charitable Foundation (Manhattan Fund)
- Konza United Way
- Mercy Regional Health Center
- Riley County Council on Aging
- Wamego Health Center

We would also like to thank the agencies that participated as members of the design team to complete a draft of the assessment:

- Konza United Way
- Mercy Regional Health Center
- Riley County Health Department
- Riley County Seniors' Service Center

Finally, we would like to thank the following partners that provided input regarding the draft assessment or were instrumental in encouraging the community to complete the survey or in disseminating and collecting surveys in Riley and Pottawatomie Counties. Because many organizations participated in disseminating or collecting surveys, our apologies to any that were inadvertently omitted.

1350KMAN Angel 95FM Bethel AME Church Bia Brothers Bia Sisters of **Riley County Big Lakes** Development Center Boys & Girls Club of Manhattan Catholic Charities of Northern Kansas Center on Aging - KSU Child Development Center - KSU City of Leonardville City of Manhattan City of Manhattan Parks & Recreation City of Manhattan Social Services Advisory Board City of Ogden City of Randolph City of Riley Colorado Plaza Apartments Community Health Ministries -Manhattan Community Health Ministries - Wamego

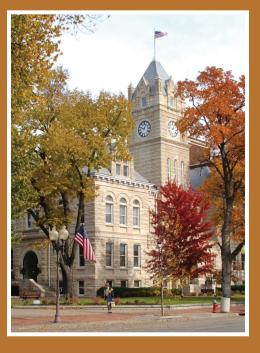
Department of Sociology. Anthropology & Social Work - KSU Douglass Community Center Downtown Manhattan, Inc. Family Connections of Riley County First Presbyterian Church First United Methodist Church Flint Hills Area Transportation Agency Flint Hills Breadbasket Flint Hills Community Clinic Flint Hills Human **Rights Project** Flint Hills Volunteer Center (formerly **RSVP** of the Flint Hills, Inc.) Friendship Meals Program Garden Grove Apartments

Greater Manhatttan Community Foundation HandsOn Kansas State Homecare & Hospice Homestead Assisted Living Housing & Credit Counseling Inc. -Manhattan Kansas Legal Services Konza Prairie Community Health Clinic Konza United Way **KSNT** News League of Women Voters of Manhattan/ **Riley County** LGBT Resource Center - KSU Lion's Club Manhattan Area Chamber of Commerce Manhattan Area Habitat for Humanity Manhattan Area Housing Partnership

Manhattan Area Technical College Manhattan Arts Center Manhattan Broadcasting Manhattan Emergency Shelter, Inc. Manhattan Housing Authority Manhattan Public Library Manhattan/Riley County Preservation Alliance Manhattan-Ogden USD 383 Head Start/ Early Head Start Meadowlark Hills Retirement Community Mercy Regional Health Center National Church Residences North Central Flint Hills Area Agency on Aging Ogden Friendship House Pawnee Mental Health Services

**Pilgrim Baptist** Church Pottawatomie County Health Department **Riley County Riley County** Community Corrections **Riley County Council** on Aging **Riley County** Extension Riley County Health Department **Riley County Police** Department **Riley County Seniors'** Service Center Saint Luke's Episcopal Church -Wamego Salvation Army School of Leadership Studies - KSU Seven Dolors Catholic Church Shepherd's Crossing South Manhattan Neighborhood Association

Stoneybrook Retirement Community Sunflower CASA Project, Inc. Sunny 102.5 The Crisis Center The Kansas State Collegian The Manhattan Free Press The Manhattan Mercury Three Rivers, Inc. UFM Community Learning Center USD 320 Wamego USD 323 Rock Creek USD 378 Rilev USD 383 Manhattan/ Ogden USD 383 Open Door USD 384 Blue Valley Via Christi Retirement Village Wamego Chamber of Commerce Wamego Health Center Wamego Smoke Signal **WIBW News** Wonder Workshop



# **Riley County Community Profile**

According to the 2010 Census, Riley County encompasses 609.77 square miles in Northeast Kansas with approximately 117 persons per square mile (compared to an average of 35 persons per square mile across Kansas). The total population of Riley County in 2013 was estimated at 75,394. Manhattan is the largest city in the county with a population of 56,143 (2013 Census estimate) that includes over 24,000 Kansas State University students and a large number of Fort Riley soldiers and their families. Riley County is slightly more diverse than the norm for the state with approximately 87% white, 7% African American, 7% Hispanic or Latino, 4% Asian, 3% two or more races, and less than 1% Native American or Pacific Islander. Due to the large number of Kansas State University (KSU) students, the population tends to be younger than the state average. Although agriculture plays a large role in the economy and culture of Riley County, the largest employers are Fort Riley

(military and civilian employees), Kansas State University, and the Manhattan/Ogden Unified School District (USD 383). Manhattan may soon become home to the National Bio and Agro-Defense Facility (NBAF) which will likely bring revenue and additional (albeit highly specialized) employment. Riley County typically experiences lower rates of unemployment, crime, and a number of other indicators that negatively impact quality of life as compared to state averages and is rated as the second healthiest county in Kansas according to the 2014 Robert Wood Johnson Foundation's County Health Rankings

# Community Needs Assessment Purpose and Introduction

Needs assessments are a valuable tool in determining community perceptions, strengths, and concerns for the purposes of planning and community improvement. Community assessments are also helpful or required for accreditation for local health departments and hospitals. Riley County has not undertaken a comprehensive community assessment that covers multiple areas of community life for nearly 20 years (since 1997). For these reasons, the Riley County Seniors' Service Center in cooperation with Konza United Way, Mercy Regional Health Center, Riley County Health Department, and other community partners commissioned the community assessment that is detailed in this report. The purpose was to gather information from multiple sources, including publicly available data and community members themselves, in order to highlight community strengths and needs for use by local individuals and organizations to guide efforts to address issues and plan for the future. **NOTE**: Riley County Senior's Services contracted with the Center for Community Support and Research to conduct the needs assessment concurrently for both Riley and Pottawatomie Counties in order to meet the needs of various partners that serve both areas. However, other than certain details related to methodology, the information contained in this report pertains only to Riley County.

Community needs assessments involve the key elements of convening stakeholders for planning (e.g., determining area of focus for the assessment, reviewing instruments, identifying the target

population and avenues for dissemination), administration of a community survey and/or use of qualitative methods (i.e., interviews, focus groups) to gather public perceptions, analysis of data, and reporting to key partners and the community. Community needs assessments typically use the approach of gathering data from a convenience sample, which is defined as those most easily accessible to and interested in the topic or community. This method differs from basic laboratory research methods in which samples are recruited or randomly selected. For the purpose of gathering responses from a broad cross-section of the community, the partners and supporters of the Riley County community needs assessment solicited participation from people of all ages, ethnicities, income brackets, professions, and other qualifiers that might impact one's experience and perception of the community. Every effort was made to gather input from a wide range of community members consistent with Census data for Riley County. As is noted in the demographics section below, despite all efforts, populations such as younger adults, Latino/ Hispanic persons, and persons with lower incomes are not proportionately represented; however, this is a common limitation of a convenience sample because the response rate and demographics are dependent upon the willingness of community members to respond. As is noted in the section on the Subsample Analysis (Appendix A), this limitation was addressed through several analyses that confirm the consistency of results across the community based on comparison of results of a) a random sample phone and mail survey and b) analysis of a random subsample of survey responses that reflect the Census data for Riley County relative to age.

The following report includes detailed information about the methodology of the community survey, demographics of respondents, and survey data for Riley County. An overview of relevant secondary data (i.e., data available through public sources such as the 2010 Census, Kansas Behavioral Risk Factor Surveillance System (BRFSS), Kansas Department for Children and Families, Kansas Kids Count, Kansas Communities That Care, etc.) has also been included to provide comparison points. Additionally, this report contains the qualitative findings from key informant interviews and focus groups. Survey data regarding Quality of Life is presented first followed by sections on Physical Health, Mental Health, Social Issues, Children and Youth, Education, Aging, Housing, Transportation, Infrastructure, and Economics and Personal Finance. As noted, each topic section except Quality of Life begins with the related secondary data. Survey data are from the Community Needs Assessment survey that was completed (at least partially) by 1,126 Riley County residents. The survey was administered via the internet, mail, phone, and through community meetings and organizations.

In order to gather further information on community perceptions, especially with underrepresented populations, key informant interviews and focus groups were conducted during September and October 2014. Key informant interviews were conducted with 25 community members representing a diverse range of professions and interests (e.g., nonprofit, ecumenical, educational, business, healthcare). Three focus groups were conducted with persons from populations that were underrepresented in the community survey (i.e., Hispanic/Latino, 18- to 24-yearolds, and persons with low incomes). The qualitative data from the interviews and focus groups help add richness to the secondary and survey findings as well as providing confirmation as to whether the quantitative data are truly descriptive of the experiences of persons in the community, particularly those who may not have been well-represented among survey respondents.

# Design

In conducting this community needs assessment, the sponsors sought to improve the local quality of life and community for Riley County. To achieve this goal, a comprehensive literature review of needs assessment surveys was performed by Wichita State University's Center for Community Support and Research (CCSR) to determine best practices and how other communities had recently assessed their needs, designed their research approach, and chosen potential survey items. CCSR worked with the design team, which included representatives from Riley County Seniors' Service Center, Konza United Way, Mercy Regional Health Center, and Riley County Health Department, to complete a draft assessment. Community partners were then invited to a community meeting to provide feedback. Once the design team approved the final survey, Institutional Review Board (IRB) approval was obtained through Wichita State University. The needs assessment consists of 12 sections: Quality of Life, Physical Health, Mental Health, Social Issues, Children and Youth, Education, Aging, Housing, Transportation, Infrastructure, Economics and Personal Finance, and Demographic Information. The survey can be seen in Appendix B. It took approximately 30 minutes to complete.

The key informant interviews were designed by researchers at CCSR to be semi-structured. Questions allowed interviewees to provide information specific to their primary area of experience and as a community member in general. The focus group questions were designed with the similar purpose of allowing participants to provide feedback as to whether findings from the secondary data, survey, and interviews were reflective of their own experiences as well as their thoughts on the strengths and needs of the community. Institutional Review Board approval was secured for the interviews and focus groups. The interview and focus group questions are included in Appendix C and E, respectively.

The elements of this community needs assessment were designed to provide triangulation in three areas: triangulation of methods, triangulation of sources, and triangulation of analysts (Patton, 1999). These are recommended methods for increasing the likelihood that the data gathered and findings provided are accurate and truly representative of perceptions of the entire community. Triangulation of methods was achieved through the use of secondary data sources, survey data, and qualitative data from interviews and focus groups. Triangulation of sources involved gathering input from the general public through the survey, key community leaders and service providers through interviews, and members of groups that were underrepresented in other methods through focus groups. Finally, three primary researchers led this project, reviewed each other's work, and provided reliability checks on the qualitative analysis.

### **SECONDARY DATA**

Secondary data are typically collected by large institutions or organizations and made available publicly. The most well-known example of a secondary data source is the U.S. Census. For the purposes of this community assessment, CCSR compiled relevant pieces of secondary data to complement and compare to the survey, interview, and focus group data. The most recent secondary data available were used whenever possible; however, secondary data can often be several years old due to the arduousness of collection across large populations. Additionally, some secondary data are not available on a county level due to limitations in data collection or ethical issues in reporting on issues that affect a small number of persons in a given community. Given that multiple entities publish data on the same issues, it is also possible to find differences in what appears to be similar data. This is often due to slight differences in the reporting period, characteristics of the sample, method of data collection, or other variables. This report includes secondary data that are 1) easily understandable, 2) most relevant to the general community, and 3) from credible, well-respected sources. Whenever possible, CCSR included data from the original source rather than relying on compilations (e.g., Robert Wood Johnson County Health Rankings, Kansas Health Matters, etc). All data reported include the exact source and year from which the numbers were taken.

**NOTE:** Several organizations have created community assessments for the Northeast Region or Riley County on targeted topics (i.e., NEK-CAP Inc. Community Action Partnership Comprehensive Community Assessment regarding poverty, Flint Hills Regional Council's 2014 Flint Hills Workforce Study, Riley County Local Public Health System Assessment). The reports from these organizations were reviewed by CCSR and relevant data that were not available elsewhere or from a more recent year were incorporated into this report; however, the secondary data included in this report is not meant to be exhaustive, but to provide a comparison for similar survey, interview, or focus group findings from the current community needs assessment.

# Survey Methodology

### SAMPLE SELECTION

To ensure a meaningful sample, a mixed-method survey approach was utilized. A convenience sample was used for the online and paper surveys, and a random sample was used for the phone and mail surveys. The same survey was used across all methods of administration. A total of 1,126 surveys for Riley County were gathered across all methods of administration.

### Online Survey

The online survey was created and administered in Qualtrics and posted on linked websites, Riley-PottSurvey.com and Riley-PottawatomieSurvey.com, which were created to disseminate the survey. The Project Coordinator at Riley County Seniors' Service Center worked closely with the survey sponsors to create a roster of community partners across Riley County who would assist with disseminating the survey website. The community partners were asked to promote and distribute the website via their own websites, social media accounts, internal staff email, and other regular media outlets. The community partners were also updated throughout the survey collection to ensure effective and efficient administering of the survey. The list of community partners can be seen under the Acknowledgments.

The survey began April 21, 2014, and was closed May 26, 2014. To ensure the sample represented the population in Riley County, the distribution by age, gender, race, and ethnicity were compared weekly to the 2010 U.S. Census data and reported back to the Project Coordinator at Riley County Seniors' Service Center to adjust collection methods. The online survey was offered in English, Spanish, and Korean.

# Paper Survey

The paper survey was made available at Riley County Seniors' Service Center and in other locations throughout the community through the efforts of the community partners. Self-addressed envelopes were provided along with the survey. Respondents could either mail their completed surveys directly back to CCSR or, if completing a survey at a particular site or event, surveys were collected by a designated person at the site/location and sent in bulk back to CCSR. Special efforts were made to administer surveys at community events and/or at organizations that cater to populations that tend to be underrepresented in community discussions and planning (i.e., Latino, Korean, older adults, youth, persons with disabilities, etc.). The paper survey was offered in English, Spanish, and Korean.

### Phone and Mailed Survey

To expedite the collection of data, CCSR contracted with the Docking Institute University Center for Survey Research at Fort Hays State University to conduct the phone and mail surveys. The Docking Institute used an address-based random sample in Riley County with the goal of completing at least 100 phone and 50 to 75 mailed surveys. They called residences for which a phone number was available and mailed the survey to the remaining addresses. For the phone surveys, the Docking Institute attempted to make calls for approximately two weeks, trying each selected phone number up to three times. The phone survey was administered in English or Spanish and only administered to persons over the age of 18. The total number of random phone surveys collected was 88 for Riley County. The total number of dialings was 3,041 with a 26.6% incidence rate, and the total number of refusals was 378 across both Riley and Pottawatomie counties. For the mailed survey, the Docking Institute did one mailing for both counties to 600 addresses with no reminders or follow-up mailings. The mailed survey was in English and included a self-addressed envelope to be returned to the Docking Institute. The total number of returned mailed surveys was 41 for Riley County.

The total number of surveys by survey type and by language for Riley County can be seen in Tables 1 and 2.

Table 1. Survey Type for Riley County. (n=1126)

Survey Type	Frequency	%
Online	868	77.1
Mail	41	3.6
Phone	88	7.8
Paper	129	11.5

#### Table 2. Survey Language for Riley County. (n=1126)

Language	Frequency	%
English	1119	99.4
Spanish	6	.5
Korean	1	.1

### GEOGRAPHIC DISTRIBUTION OF SURVEY PARTICIPANTS

For the data in this section and those that follow, most percentages are figured based on surveys from 1126 persons (i.e., N=1126) unless otherwise specified. Particularly for demographics, the number and percentage of the total who did not answer the question is included with the data.

#### Table 3. Do you consider this county to be your permanent residence?

Answer	Frequency	%
Yes	1059	94.0
No	59	5.2
Not answered	8	0.7

#### Table 4. What city is listed on your address?

City	Frequency	%
Manhattan	763	67.8
Leonardville	43	3.8
Riley	29	2.6
Jackson	21	1.9
Ogden	8	0.7
Randolph	8	0.7
Fancy Creek	5	0.4
May Day	2	0.2
Abilene	1	0.1
Bala	1	0.1
Blue Rapids	1	0.1
Center (RL)	1	0.1
Clay Center	1	0.1
Fort Riley	1	0.1
Junction City	1	O.1
St Augustine	1	0.1
Wamego	1	0.1
Zeandale	1	0.1
Not Answered	237	21.0

#### Table 5. What is your zip code?

Answer	Frequency	%
66502	657	58.3
66503	371	32.9
66531	40	3.6
66449	14	1.2
66554	12	1.1
66517	10	0.9
66411	4	0.4
66506	3	0.3
66505	2	0.2
66520	1	0.1
66223	1	O.1
66441	1	0.1
66547	1	0.1
66442	1	0.1
66502	1	0.1
66609	1	0.1
67410	1	0.1
67432	1	0.1
Not Answered	4	0.4

### SAMPLE CHARACTERISTICS

Respondents were asked a series of questions about age, gender, race, ethnicity, income, and education to help assess the comparability of the survey respondents with the general population in Riley County, as reflected in the 2010 U.S. Census. Additionally, marital status, military service, employment status, student status, religious involvement, access to the Internet, and access to community information were also asked to help with the interpretation of the survey results. The demographics (with the exception of age) were at the end of the survey, and 20-25% of respondents did not answer the questions. This may have been due to survey length instead of unwillingness to provide demographic information.

#### Age

Five percent (5.2%) of the survey respondents ranged from 18 to 24 years of age. Nearly 18 percent (17.6%) of respondents ranged from 25 to 34 years of age. Twenty-six percent (26.1%) of respondents ranged from 35 to 49 years of age. Twenty-seven percent (27.4%) of respondents ranged from 50 to 64 years of age. Thirteen percent (13.1%) of respondents ranged from 65 to 74 years of age. Ten percent (10.2%) of respondents were age 75 or older. The age of the survey respondents was compared to the 2010 Census data. See Table 6. Younger people (18-24 and 25-34) were underrepresented while middle-aged and older people were overrepresented (35-49, 50-64, and 65+) when compared to the general population.

#### Table 6. Age

Answer	Survey Sample	%	Census Data	%
18 to 24 years	58	5.2	18325	35.1
25 to 34 years	198	17.6	12416	23.8
35 to 49 years	294	26.1	8479	16.2
50 to 64 years	309	27.4	7795	14.9
65 years and over	263	23.4	5208	10.0
Not answered	4	0.3		

#### Gender

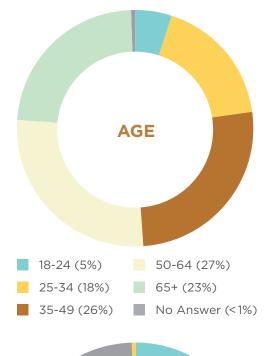
Fifty-nine percent (59%) of the survey respondents were female, and twenty-one percent (21.3%) of respondents were male. Less than one percent (0.3%) of respondents identified as other. The gender of the survey respondents was compared to the 2010 Census data. See Table 7. Men were underrepresented while women were overrepresented when compared to the general population.

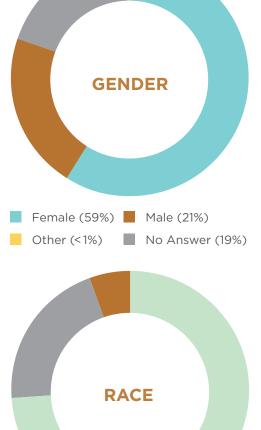
#### Table 7. Gender

Answer	Frequency	%	Census Data	%
Female	664	59.0	34075	47.9
Male	240	21.3	37040	52.1
Not Answered	219	19.4		
Other	3	0.3		

#### Race

Seventy-four percent (74.1%) of the survey respondents identified as White. Almost two percent (1.8%) of respondents identified as African American/Black. One percent of respondents identified as Multiracial (1.4%) or Other (1.1%). Less than one percent identified as Asian (0.7%), American Indian or Alaska Native (0.3%), Native Hawaiian or Pacific Islander (0.1%). See Table 8. The race of the survey respondents was







compared to the 2010 Census data. Minorities as a whole were underrepresented when compared to the general population; however, just over 20% of respondents to the survey did not answer this question.

#### Table 8. Racial Categories

Answer	Survey Sample	%	Census Data	%
White	834	74.1	59203	83.2
African American/ Black	20	1.8	4530	6.4
Multiracial	16	1.4	2509	3.5
Other	12	1.1	1300	1.8
Asian	8	0.7	2996	4.2
American Indian or Alaska Native	3	0.3	433	0.6
Native Hawaiian or Pacific Islander	1	0.1	144	0.2
Not Answered	232	20.5		

#### Ethnicity

Seventy-three percent (73.1%) of the survey respondents identified as Not Hispanic or Latino. Two percent (2%) of respondents identified as Hispanic or Latino. The ethnicity of the survey respondents was compared to the 2010 Census data. See Table 9. Hispanics and Latinos were underrepresented when compared to the general population; however, nearly 25% of those who submitted a survey did not report their ethnicity.

Table 9. Ethnic Category

Answer	Survey Sample	%	Census Data	%
Not Hispanic or Latino	823	73.1	66505	93.5
Hispanic or Latino	23	2.0	4610	6.5
Not Answered	280	24.9		

#### Income

The household income of survey respondents is shown in Table 10. The median household income for Riley County is \$43,364. Sixteen percent (16%) of all respondents reported having incomes lower than the \$35,000 to \$49,999 category, and forty-seven percent (47%) of respondents reported having incomes higher than this category. A majority of the survey respondents reported being in income categories higher than the median income.

*Table 10. What was your total household income last year, before taxes?* 

Answer	Frequency	%
Less than \$10,000	29	2.6
\$10,000 to \$14,999	34	3.0
15,000 to \$24,999	44	3.9
\$25,000 to \$34,999	70	6.2
\$35,000 to \$49,999	117	10.4
\$50,000 to \$74,999	160	14.2
\$75,000 to \$99,999	171	15.2
\$100,000 to \$199,999	186	16.5
\$200,000 or more	36	3.2
Not Answered	279	24.8

Note: Median household income for Riley County is \$43,364 (2010 US Census)

#### Education

Nearly 19 percent (18.6%) reported having some college or technical training, and twenty-five percent (25.3%) reported being college graduates. Thirtyone percent (31%) reported having a graduate or professional degree. Only one percent (1%) had less than a high school diploma. See Table 11. The education level of the survey respondents was compared to the 2010 Census data at the state and national level. The high school and college graduates were comparable; however, the graduate or professional degrees were much higher than the general population. See Table 12. (Page 11) Table 11. What is the highest level of school, college or vocational training that you have finished?

Answer	Frequency	%
Less than 9th grade	2	0.2
9-12th grade, no diploma	9	0.8
High school graduate (or GED/equivalent)	53	4.7
Associate's degree or vocational training	82	7.3
Some college (no degree)	127	11.3
Bachelor's degree	285	25.3
Graduate or professional degree	349	31.0
Not Answered	219	19.4

Table 12. Education level comparison across survey sample, state, and nation.

Degree	Survey Sample	Kansas Census Data	US Census Data	
High school graduate	80%	86%	80.4%	
Bachelor's degree	25%	25.8%	24.4%	
Graduate or professional degree	31%	8.7%	8.9%	
Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%				

#### **Other Demographics**

Table 13. What best describes your current marital status?

Answer	Frequency	%
Married	603	53.6
Single, never married	111	9.9
Divorced	92	8.2
Widowed	62	5.5
Not married, but living together	21	1.9
Domestic partnership or civil union	11	1.0
Not Answered	226	20.1

#### Table 14. Have you been a member of the Armed Services/Military?

Answer	Frequency	%
Yes	123	10.9
No	784	69.6
Not Answered	219	19.4

#### Table 15. If "yes" to being a member of the Armed Services/Military: What is your current status?

Answer	Frequency	%
Inactive	61	5.4
Retired	47	4.2
Disabled or Injured	10	0.8
Active	5	0.4

#### Table 16. What is your employment status?

Answer	Frequency	%
Employed full-time (one job)	441	39.2
Retired	179	15.9
Working more than one job	80	7.1
Employed part-time	75	6.7
Self-employed	54	4.8
Homemaker	26	2.3
Disabled	20	1.8
Unemployed for more than 1 year	11	1.0
Unemployed for 1 year or less	9	0.8
Not Answered	231	20.5

#### Table 17. What county do you currently work in?

Answer	Frequency	%
Riley	719	63.9
Pottawatomie	21	1.9
Other	49	4.4
Not Answered	337	29.9

#### Table 18. Are you a student taking courses for credit?

Answer	Frequency	%
Yes	74	6.6
No	820	72.8
Not Answered	232	20.6

Table 19. I am a student...

Answer	Frequency	%
Part-time	33	2.9
Full-time	41	3.6

Table 20. Which of the following best describes the school you are attending?

Answer	Frequency	%
Four-year college or university	52	4.6
Two-year community college	11	1.0
Vocational, technical, or trade school	5	0.4
Other	9	0.8

#### Table 21. Do you participate in a religious/faith community? (n=897)

Answer	Frequency	%	
Yes	579	51.4	
No	318	28.2	
Not Answered	229	20.3	

Table 22. Which of the best describes how you access the Internet?

Answer	Frequency	%
Home Computer	792	70.3
Mobile (cell phone, tablet, etc.)	578	51.3
Work Computer	499	44.3
Public Computer	57	5.1
I don't access the Internet	33	2.9
Note: Each person may have s option. Totals will not equal 10		nan one

# Table 23. How do you normally get your news about community events?

Answer	Frequency	%		
Newspaper	548	48.7		
Friends/Family	539	47.9		
Internet	515	45.7		
Radio	479	42.5		
Social media (Facebook, Twitter, etc.)	460	40.9		
TV/local cable	437	38.8		
Email/RSS	307	27.3		
Community flyers	236	21.0		
Newsletters	212	18.8		
Note: Each person may have selected more than one option. Totals will not equal 100%.				

# **Interview Methodology**

To ensure broad representation among key informants to be interviewed, CCSR provided a grid on which the potential interviewees' professions/areas of expertise or special interests could be plotted (see Appendix D). A total of 28 potential interviewees were identified through this process by the Project Coordinator at the Riley County Seniors' Service Center. The potential interviewees were then contacted by the Project Coordinator to inform them that they would receive an email from CCSR researchers to set up their interview. Interviews were scheduled over three days during which CCSR researchers would be in Manhattan. Twenty-six of the potential interviewees scheduled interviews. Twenty-three key informants participated in in-person interviews. Three persons were unable to attend their scheduled interviews due to unforeseeable circumstances, but two were interviewed via phone within two weeks. One person did not reschedule. All in-person interviews were held at the Manhattan Public Library. Two CCSR researchers conducted concurrent interviews in separate rooms. The



same interviewers conducted the phone interviews. Each interview lasted between 30 to 50 minutes.

The interviews were semi-structured, meaning that CCSR researchers had a list of specific openended questions to cover, but participants were able to address any topic they wished related to the community. Prior to starting the interview, interviewees were asked to sign an informed consent statement outlining the purpose and process for the interview, assurance of confidentiality, and other details. All participants signed the consent form. During the interviews, the interviewers took extensive notes on each question and also recorded the conversation via digital recorder. The recording was to be used in the event that the researchers' notes were not clear or further detail was needed for the purpose of analysis. All interviewees were asked the same questions concerning their perspective on strengths and needs in the community, both from their unique perspective (usually focused on their profession or position in the community) and in general (see Appendix C for the interview questions). CCSR researchers asked followup questions to clarify anything that was not clear, but allowed interviewees to talk as much or as little as they desired in response to any given question.

Interview responses were analyzed using exploratory thematic analysis (Guest, McQueen & Namey, 2012). Exploratory thematic analysis is a method of categorizing qualitative data for the purpose of discerning a pattern in comments from participants. The exploratory nature (versus confirmatory) allows the content of participants' comments to drive the analysis rather than being directed by the hypothesis of the researcher. Using this method, the two CCSR researchers reviewed the notes from the interviews they conducted individually, identified themes across their individual interviews, then compared and came to consensus on themes present across all interviews. A third researcher who is involved in the project but did not conduct any of the interviews reviewed the notes from five interviews (23%) and created her own list of themes. The list from the third researcher was compared against that developed by the other two researchers. Any differences were discussed, and the final list of themes was developed through consensus by all three researchers. This technique was used as a way of verifying the accuracy of the analysis and can be considered a form of inter-rater reliability (Creswell, 2007).

# **Focus Group Methodology**

Although every effort was taken to ensure that respondents to the survey were representative of the population of Riley County, participants tended to be female, Caucasian, middle-aged or older, and have higher income than average. This is a typical issue for community surveys that deal with a large range of topics for which it is not appropriate to target particular populations. To compensate for this limitation, focus groups were conducted with persons from populations that were underrepresented in the survey: 18- to 24- year olds, Hispanics/Latinos, and persons with low income. It is acknowledged that the limited number of persons in a focus group cannot adequately speak for the group they represent; however, gathering input from at least a few persons from a population can provide a foundation for confirming whether the survey data can be considered reflective of the bulk of the community.

CCSR provided data to representatives of sponsoring organizations regarding demographics of survey respondents as compared with 2010 Census data. Based on this information and knowledge of the community, the Project Coordinator from the Riley County Seniors' Service Center identified which groups to target for participation in focus groups. The Project Coordinator set up the three focus groups, one each with 18- to 24-year-olds, persons with low income, and Hispanics/Latinos. The focus group with persons with low incomes was arranged through the First United Methodist Church, and the focus group with Hispanics/Latinos was arranged through the Manhattan-Ogden USD 383. Focus groups were conducted over three days in October 2014. Five persons attended the focus group for 18- to 24-yearolds, 13 participated in the group for persons with low income, and 8 participated in the focus group for Hispanics/Latinos. Each focus group lasted between 50 and 90 minutes.

Institutional Review Board approval was secured by

CCSR from Wichita State University. Prior to the start of each focus group, CCSR researchers explained the purpose and protection of confidentiality. Each participant was asked to sign a consent form that outlined the purpose, confidentiality, use of results, and other details. All participants signed the consent form. CCSR researchers designed the focus group questions to allow participants to provide feedback on findings from all sources of data collected to date (i.e., secondary data, community survey, and interviews) as well as add their own input on primary strengths

and needs of the community (see the focus group questions in Appendix E). CCSR researchers wrote down all comments on a flipchart so that participants could provide correction if needed. used exploratory thematic analysis (Guest, McQueen & Namey, 2012) to identify themes in participant comments. Because two CCSR researchers were present at all focus groups, they themed all comments collaboratively. The comments from each group were analyzed separately and collectively in order to identify any unique issues by group as well as those that occur across populations.

# Riley County Secondary Data and Survey Results

# Quality of Life

### SUMMARY OF FINDINGS

Respondents to survey questions regarding Quality of Life were largely satisfied across all areas except for local government and the belief that all residents think they can make the community a better place to live. On a scale of 1 to 5, respondents indicated the highest levels of satisfaction with the availability of volunteer opportunities (mean=4.19), Riley County being a good place to raise children (mean=4.15), a beautiful place to live (mean=4.14), and a safe place to live (mean=4.11). Mean ratings for the lowest ranked

Respondents to survey questions regarding Quality of Life were **largely satisfied across all areas** except for local government and the belief that all residents think they can make the community a better place to live. areas, local government and the perception that residents think they can make the community better, were 3.14 and 3.17 respectively (out of 5). The fact that there is a high level of satisfaction with volunteer opportunities in Riley County but also a lower level of satisfaction regarding residents thinking they can make the community a better place to live seems to indicate a discrepancy between the perception of opportunities available and

a sense of empowerment or responsibility to take advantage of them.

Responses to the question regarding the most important contributors to a high quality of life are

As with key informant interviews, CCSR researchers

consistent with those items that were rated most highly on satisfaction for Riley County. Namely, the primary contributors are thought to be good schools, being a good place to raise children, and a good environment (i.e., clean, safe).

### **QUALITY OF LIFE SURVEY DATA**

Table 24. Please rate the following statements about the quality of life in your community based on your experiences (1=Strongly Disagree, 5=Strongly Agree)

Statement	N	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Mean (Range 1-5)
There are opportunities to volunteer in my community.	1119	1.0%	2.0%	9.0%	53.0%	35.0%	4.19
This is a good place to raise children.	1106	1.0%	3.0%	12.0%	51.0%	35.0%	4.15
This is a beautiful place to live.	1118	1.0%	3.0%	12.0%	50.0%	35.0%	4.14
This is a safe place to live.	1115	1.0%	2.0%	10.0%	59.0%	28.0%	4.11
I am satisfied with the quality of life in this community.	1116	1.0%	6.0%	9.0%	59.0%	23.0%	3.95
This is a good place to retire.	1116	2.0%	9.0%	20.0%	43.0%	27.0%	3.83
I am satisfied with the local schools.	1100	1.0%	7.0%	22.0%	49.0%	21.0%	3.77
The community is strengthened by its diversity.	1098	2.0%	9.0%	21.0%	45.0%	22.0%	3.73
All individuals and groups have the opportunity to contribute to and participate in the community's quality of life.	1103	3.0%	10.0%	18.0%	50.0%	19.0%	3.71
There is an active sense of civic responsibility, engagement, and pride in shared accomplishments.	1109	3.0%	10.0%	21.0%	52.0%	14.0%	3.64
I am satisfied with the healthcare system in this community.	1115	3.0%	14.0%	17.0%	52.0%	14.0%	3.60
There is economic opportunity in this community.	1112	4.0%	13.0%	19.0%	47.0%	16.0%	3.57
There are networks of support for individuals and families during times of stress and need.	1108	3.0%	11.0%	25.0%	49.0%	13.0%	3.56
There are plenty of recreational activities for my family and me.	1117	5.0%	17.0%	14.0%	46.0%	18.0%	3.55
All residents think that they can make the community a better place to live.	1097	4.0%	21.0%	36.0%	32.0%	7.0%	3.17
I am satisfied with local government.	1112	6.0%	18.0%	34.0%	36.0%	5.0%	3.14

Table 25. What are the three most important factors that contribute to a high quality of life in this community?

to a high quality of the in this commanity.		
Answer	Frequency	%
Good schools	374	33.2
Good place to raise children	334	29.7
Clean environment	280	24.9
Safe neighborhoods	272	24.2
Healthy economy	215	19.1
Low crime	201	17.9
Jobs with adequate wages	199	17.7
Arts and cultural events	165	14.7
Affordable housing	159	14.1
Parks and recreation	151	13.4
Religious or spiritual values	143	12.7
Strong family life	140	12.4
Availability of healthcare	130	11.5
Healthy behaviors and lifestyles	98	8.7
Equality	59	5.2
Other	50	4.4
Access to affordable health	46	4.1
insurance		
Career enhancement	46	4.1
Low disease rates	26	2.3
Resources for parents	25	2.2
Low level of child abuse	7	0.6

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%

# Physical Health (Including Physical Activity, Nutrition, Tobacco Use)

### SUMMARY OF FINDINGS

#### **Physical Health**

According to the Robert Wood Johnson Foundation's 2014 County Health Rankings, Riley County is ranked as the second healthiest county in Kansas (out of 98) based on 29 indicators including smoking, education, employment, physical inactivity, and access to healthy foods. Secondary data support this ranking and show that rates of numerous serious diseases and conditions (e.g., hypertension, cancer, diabetes, etc.) are lower than state averages as are rates for many health risks (e.g., obesity, inactivity, smoking, etc.). Additionally, fewer adults than average for Kansas rate their health as fair or poor or lack healthcare coverage in Riley County.



87% percent of the respondents indicated that their health was good, very good, or excellent.

Although the population of Riley County tends to skew younger than the state average due to the large number of college students, the community needs assessment survey was completed by a large number of middleaged and older adults and also supports the image of Riley County residents as relatively healthy. Specifically, 87% percent of the respondents indicated that their health was good, very good, or excellent. Other findings from the survey regarding physical health in Riley County include:

- The majority of respondents rely on a doctor/nurse and/or the Internet for health information.
- Nearly a quarter of the respondents have been diagnosed with high blood pressure (hypertension) and/or high cholesterol. This is fairly consistent with rates reported through secondary data.
- Nearly 12% of respondents (11.8%) reported having any type of mental health diagnosis. For those who chose to specify their diagnosis, depression was the most frequently mentioned.
- The large majority of respondents have health insurance (92.6%), and 78.6% agreed or strongly agreed with the statement: "I can access the healthcare I need in this community."
- The majority (87.1%) consult a professional when they are sick and most often go to their doctor (75.8%) over other options when they are sick.
- The majority of survey respondents (64.7%) report receiving the flu shot or nasal spray, which is a much higher percentage than reported in the most recent BRFSS (39.6% in 2013).
- The top ranked needs for Riley County related to physical health were affordable health services, affordable health insurance, and facilities for physical activity (including parks, trails, and recreation centers); however, none of the top ranked needs were selected by more than 50% of respondents.

Concurrent with this community needs assessment, the Riley County Health Department sponsored a Local Public Health Systems Assessment that brought together approximately 100 community members with knowledge in the area of public health to discuss the current state of 10 essential public health services. As a result of the discussion and use of a standardized tool to score activity level in the 10 public health service areas, it was determined that the local Riley County public health system is performing its mission well. No essential services were scored in the "no activity" or "minimal activity" range. Specifically, the 10 essential services were rated as follows:

- Monitor Community Health Status
   MODERATE ACTIVITY
- 2. Diagnose and Investigate Health Problems and Hazards OPTIMAL ACTIVITY
- Inform and Educate about Health Issues- MODERATE ACTIVITY
- 4. Mobilize Community Partners to Solve Health Problems - SIGNIFICANT ACTIVITY
- 5. Develop Policies and Plans that Support Health Efforts - MODERATE ACTIVITY
- 6. Enforce Laws that Protect Health and Safety- SIGNIFICANT ACTIVITY
- 7. Link People to Services, Assure Provision of Healthcare **SIGNIFICANT ACTIVITY**
- 8. Assure Competent Public Health and Healthcare Workforce - MODERATE ACTIVITY
- 9. Evaluate Personnel and Population-Based Health Services **- MODERATE ACTIVITY**
- 10. Research Innovative Solutions to Health Problems - MODERATE ACTIVITY

The following subsections highlight the major findings regarding the areas of physical activity, nutrition, and tobacco use. The specific secondary and survey data for all areas of physical health follow the summaries of findings.

#### **Physical Activity**

According to the Physical Activity Guidelines for Adults (U.S. Department of Health and Human Services), adults should get at least 2 hours and 30 minutes of moderate intensity aerobic physical activity per week and strengthening exercises on at least two days each week. Secondary data for Riley County indicate that the majority of residents (77%) do not get the recommended amount of aerobic and strengthening activity. This is somewhat higher than the 59.5% of survey respondents who report getting less than three hours of any type of exercise or physical activity (outside of their regular job) each week. When asked about further specifics related to physical activity, survey respondents indicated the following:

- Some of the primary reasons they do not exercise are lack of time, not liking exercise, and the cost.
- They most often exercise at home, in their neighborhood, or at the park.
- The majority of respondents (61.6%) agreed or strongly agreed with the statement: "There are enough options for physical activity in this community." The same is true for the statement: "This community values physical activity," with 62.5% agreeing or strongly agreeing.



77% do not get the recommended amount of aerobic and strengthening activity

#### Nutrition

Current dietary guidelines recommend that depending upon gender, age, and level of physical activity, most adults should consume 1 to 2 cups of fruit and 2 to 3 cups of vegetables each day (U.S. Department of Agriculture). The guidelines also recommend that fruits and vegetables should be half of the typical person's plate with proteins (lean meat, poultry, seafood, beans, etc.) and grains (primarily whole grains) being roughly 1/4 each. Of the respondents on the community needs assessment survey, 73.4% indicate that they eat healthy foods overall; however, secondary data indicate that 37.8% of Riley residents consume fruit less than one time per day, and 25.3% consume vegetables less than once per day. Similarly, 46.8% of the community needs assessment survey respondents reported eating fruits and/or vegetables two times or less per day. Other data from the community needs assessment survey include the following:

 When asked why they do not eat enough fruits and/or vegetables, the reasons typically focused on cost and convenience, including not having enough time to purchase or prepare them, and it not being a priority. 46.8% reported eating fruits and/or vegetables two times or less per day

- Responses were varied when asked how strongly they agreed or disagreed with the statement: "This community values healthy eating." While the largest number agreed (38.8%), nearly 50% were neutral (37.2%) or disagreed to some extent (12.5%).
- The majority of respondents agreed or strongly agreed (74.8%) with the statement: "I can access the healthy food I need in this community."
- Nearly 10% of the respondents indicated that they are often concerned about having enough food for them and/or their families to eat.

#### Tobacco Use

According to the 2011 BRFSS, 15.2% of Riley County residents surveyed smoked cigarettes as compared to 22.0% for Kansans as a whole. On the community needs assessment survey, 7.1% reported being a current smoker or tobacco product user; however, 5.4% of the respondents did not answer this question. Those who indicated that they smoke or use tobacco products were asked an additional question about where they would go for help if they want to quit. The most frequently reported answer was doctor (39%) followed by "Not applicable: I don't want to quit" (16%). Thirteen percent (13%) indicated that they did not know where to go.

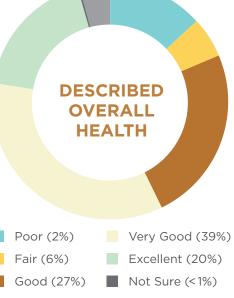
See Tables 26 through 54 for more specific secondary and survey data for physical health, physical activity, nutrition, and tobacco use.

# SECONDARY PHYSICAL HEALTH DATA (INCLUDING PHYSICAL ACTIVITY, NUTRITION, TOBACCO USE)

Personal Health	Riley County	Kansas	Source
Percent of adults with fair or poor self-perceived health status, 2013	8.7%	15.4%	BRFSS
Percent of population without health insurance, 2013	6.2%	12.3%	US Census Bureau American Community Survey
Ratio of population to primary care physicians, 2011	1695.5 per physician	1815.5 per physician	Kansas Health Matters
Percent of adults with hypertension, 2013	18.9%	31.3%	BRFSS
Percent of adults who had angina or coronary heart disease (weighted), 2013	1.5%	4.2%	BRFSS
Percent of adults tested and diagnosed with high cholesterol, 2013	28.6%	38.1%	BRFSS
Rate of age-adjusted cancer (all cancers, per 100,000), 2007 - 2011	471.95	501.84	KS Cancer Registry
Percent of adults diagnosed with diabetes, 2013	4.5%	9.6%	BRFSS
Percent of adults who were immunized against influenza in the past 12 months, 2013	39.6%	42.2%	BRFSS
Percent of adults who are obese, 2013	20.7%	30.0%	BRFSS
Percent of adults living with a disability, 2013	15.5%	21.1%	BRFSS
Percent of adults not doing enough physical activity to meet both aerobic and strengthening exercise recommendations, 2013	39.0%	42.0%	BRFSS
Percent of adults who reported consuming fruit less than one time per day, 2013	44.6%	41.7%	BRFSS
Percent of adults who reported consuming vegetables less than one time per day, 2013	27.3%	22.9%	BRFSS
Percent of adults who currently smoke cigarettes, 2013	19.8%	20.0%	BRFSS

Table 26. Selected secondary physical health data.





#### No Answer (5%)



 Strongly Disagree (3%)
 Disagree (7%)
 Neither Agree nor Disagree

(7%)

 Agree (50%)
 Strongly Agree (29%)
 No Answer (5%)

### PHYSICAL HEALTH SURVEY DATA (INCLUDING PHYSICAL ACTIVITY, NUTRITION, TOBACCO USE)

#### **Physical Health**

Table 27. How do you get most of your health-related information? Mark all that apply.

Answer	Frequency	%	
Doctor/Nurse	829	73.6	
Internet	609	54.1	
Friends and family	433	38.5	
Other	247	21.9	
Pharmacist	232	20.6	
Hospital	175	15.5	
Books/magazines	106	9.4	
Health department	92	8.2	
My child's school	49	4.4	
Church	38	3.4	
Help lines	16	1.4	
Note: Percent based on total N (1126). Each person may have selected more than one			

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

#### Table 28. How would you describe your overall health?)

Answer	Frequency	%	Mean (Range 1-5)
Poor	17	1.5	
Fair	72	6.4	
Good	309	27.4	
Very Good	443	39.3	3.74
Excellent	229	20.3	
Not Sure	3	0.3	
Not Answered	53	4.7	



Table 29. Has a health professional ever diagnosed you with one of the following?

Answer	Frequency	%
High Blood Pressure	264	23.4
High Cholesterol	255	22.6
Any Type of Mental Health Diagnosis	133	11.8
Diabetes	87	7.7
Cancer	82	7.3
Heart Disease	56	5.0
Chronic Lung Disease	28	2.5
Alzheimer's/Dementia	5	0.4

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

#### Table 30. What was your mental health diagnosis?

Diagnosis	Frequency
Depression	54
Anxiety and Depression	19
Anxiety	9
Bipolar	5
PTSD	3
ADHD	2
Schizophrenia	2
Post Partum Depression	2
Panic Disorder	1
Asperger	1
ADHD and Anxiety	1
ADHD and Depression	1
ADHD, Anxiety, and Depression	1
PTSD and Anxiety	1
PTSD and Depression	1
Note: This question was asked only of those report health diagnosis.	ing a mental

#### Table 31. Do you have health insurance?

Answer	Frequency	%
Yes	1039	92.6
No	42	3.7
Not Answered	45	4.0

Table 32. Do you consult a professional when you are sick?

Answer	Frequency	%
Yes	981	87.1
No	94	8.3
Not Answered	51	4.5

#### Table 33. Where do you go most often when you are sick?

Answer	Frequency	%
My doctor's office	854	75.8
Medical clinic	46	4.1
Urgent care center	35	3.1
Hospital emergency room	17	1.5
Health department	9	0.8
Free clinic	6	0.5
Other	14	1.2
Note: Each person may have selected more than one option. Totals will not equal 100%.		

Table 34. In the last 12 months, have you received a flu shot or nasal spray?

Answer	Frequency	%
Yes	729	64.7
No	353	31.3
Not Answered	44	3.9

#### Table 35. I can access the healthcare I need in this community.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	34	3.0	
Disagree	74	6.6	
Neither Agree nor Disagree	80	7.1	3.96
Agree	559	49.6	
Strongly Agree	326	29.0	
Not Answered	53	4.7	

Table 36. What are the top three needs related to physical health in your community?

Answer	Frequency	%
Affordable health services	380	33.7
Affordable health insurance	337	29.9
Facilities for physical activity (including parks, trails, rec centers)	321	28.5
Increased health education/prevention (e.g., healthy eating, disease prevention, etc.)	249	22.1
Affordable prescriptions	213	18.9
Access to healthy food options	192	17.1
Increased number of healthcare providers	182	16.2
Availability of transportation for health services	181	16.1
Healthcare assistance for older adults	163	14.5
Dental care options	161	14.3
Other	126	11.2
Healthcare assistance for veterans/military	88	7.8
Children health services	87	7.7
Maternal health services	58	5.2
Tobacco use cessation (quitting) services	40	3.6
Prevention of infant morality	11	1.0

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.



Table 37. What are the top three needs related to physical health in your community – Other Comments

Answer	Frequency
Substance abuse prevention/treatment	16
Improve mental health services	11
Access to specialized healthcare providers	9
Access to affordable healthcare	8
Community recreation center	6
Bike lanes/sidewalks	6
Women's healthcare	4
Affordable healthy food	4
Disability/special needs services	4
Indoor pool	3
Personal responsibility	3
Reduced tax rate	2
Support groups	1
Emergency room services	1
Activities for youth	1
Note: Not all persons who answered "othe question gave a specific example.	er" to this



36% engage in 3 hours or more of physical activity per week

### **PHYSICAL ACTIVITY**

Table 38. During a normal week, other than in your regular job, how many hours a week do you engage in any physical activity or exercise?

Answer	Frequency	%
None	34	3.0
Less than 1 hour	119	10.6
1-2 hours	289	25.7
2-3 hours	228	20.2
3 hours or more	401	35.6
Not Answered	55	4.9

Table 39. Where do you go to exercise or engage in physical activity?

Answer	Frequency	%
Home	606	53.8
Neighborhoods	462	41.0
Park	382	33.9
Private gym/studio	252	22.4
Other	175	15.5
Public Recreation Center	92	8.2
Schools	39	3.5
Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.		

Table 40. Where do you go to exercise or engage in physical activity – Other Comments

Answer	Frequency	
Kansas State University	22	
Recreational Center	22	
Hiking/Walking trails	16	
Mall	16	
Senior Center	14	
Cycling/Biking	13	
Work	13	
Golf Course	6	
Pool	5	
UFM Community Learning Center	5	
Lake	3	
Note: Not all persons who answered "other" to this question gave a specific example.		

Table 41. If you don't exercise, what are the reasons you do not exercise?

Answer	Frequency	%
Other	47	4.2
I don't have enough time to	44	3.9
exercise.		
I don't like to exercise.	33	2.9
It costs too much to exercise.	16	1.4
My job is physical or hard labor.	10	0.9
I would need child care and I	6	0.5
don't have it.		
I don't know how to find exercise	6	0.5
partners.		
Exercise is not important to me.	4	0.4
There is no safe place.	0	0.0
Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.		

Table 42. If you don't exercise, what are the reasons you do not exercise – Other Comments

Answer	Frequency
Medical Condition	7
Lack of Access to Facilities	6
Disability	4
Note: Not all persons who answered "othe	r" to this
question gave a specific example.	



58% responded that they ate healthy foods overall.

# Table 43. There are enough options for physical activity in this community.

Answer	Frequency	%	Mean (Range 1-5)
Strongly	35	3.1	
Disagree Disagree	166	14.7	
Neither Agree nor Disagree	177	15.7	3.58
Agree	537	47.7	
Strongly Agree	157	13.9	
Not Answered	55	4.9	

#### Table 44. This community values physical activity.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	17	1.5	
Disagree	71	6.3	
Neither Agree nor Disagree	272	24.2	3.68
Agree	577	51.2	
Strongly Agree	127	11.3	
Not Answered	62	5.5	

### NUTRITION

#### Table 45. Overall, I eat healthy foods.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	9	0.8	
Disagree	67	6.0	
Neither Agree nor Disagree	164	14.6	3.86
Agree	652	57.9	
Strongly Agree	174	15.5	
Not Answered	58	5.2	

Table 46. In a typical day, how many times do you eat fruit and/or vegetables?

Answer	Frequency	%
None	9	0.8
Once	165	14.7
Twice	353	31.3
Three times	307	27.3
Four or more times	232	20.6
Not Answered	60	5.3

Table 47. If you don't eat enough fruits and vegetables (2 cups of each) on a typical day, what are the reasons you do not?

Answer	Frequency	%
Not applicable; I eat enough fruits and vegetables.	424	37.7
It costs too much.	197	17.5
I don't have enough time to purchase and prepare them.	174	15.5
I don't like all or some of them.	119	10.6
Other	97	8.6
Others in my household don't like all or some of them.	83	7.4
I'm not able to get to a grocery store.	60	5.3
I have dietary restrictions due to a medical condition.	34	3.0
I don't know how to cook them.	28	2.5
I have dietary restrictions due to religious beliefs/customs.	1	0.1

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%. Table 48. If you don't eat enough fruits and vegetables (2 cups of each) on a typical day, what are the reasons you do not – Other Comments

Answer	Frequency
Not a priority	33
Busy lifestyle	7
Not available in the area	4
Low quality in the area	3
Daily recommendations are too much	3
Cooking for only one person	2
Dental problems	2
Take supplements instead	1
Note: Not all persons who answered "othe	r" to this
question gave a specific example.	

#### Table 49. This community values healthy eating

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	20	1.8	
Disagree	121	10.7	
Neither Agree nor Disagree	419	37.2	3.40
Agree	437	38.8	
Strongly Agree	54	4.8	
Not Answered	75	6.7	

#### Table 50. I can access the healthy food I need in this community.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	16	1.4	
Disagree	82	7.3	
Neither Agree nor Disagree	117	10.4	3.85
Agree	650	57.7	
Strongly Agree	192	17.1	
Not Answered	69	6.4	

Table 51. Are you often concerned about having enough food for you and/or your family to eat?

Answer	Frequency	%
Yes	110	9.8
No	949	84.3
Not Answered	66	5.9

### **TOBACCO USE/SMOKING**

#### Table 52. Do you currently smoke/use tobacco products?

Answer	Frequency	%
Yes	80	7.1
No	985	87.5
Not Answered	61	5.4

#### Table 53. Where would you go for help if you wanted to quit?

Answer	Frequency	%
Doctor	33	41.3
Not applicable; I don't want to quit.	14	17.5
Other	12	15.0
I don't know	11	13.8
Private counselor/therapist	7	8.8
KS Quitline	4	5.0
Church	2	2.0
Pharmacy	1	1.0
Health Department	1	1.0
Noto: Porcont based on n=80	Each parson ma	

Note: Percent based on n=80. Each person may have selected more than one option. Totals will not equal 100%.

# Table 54. Where would you go for help if you wanted to quit? – Other Comments

Answer	Frequency
By myself - I don't need assistance	5
Friends/Family	1
Social Smoker Only	1
E-cigarette	1
VA Hospital	1
Note: Not all persons who answered "oth	ner" to this
question gave a specific example.	

# Mental Health

### **SUMMARY OF FINDINGS**

It is estimated that 4.33% of Kansans over the age of 18 have experienced a serious mental illness in the last year (National Survey on Drug Use and Health, 2011-2012). For Riley County, the 2013 BRFSS found that 9.8% of the respondents reported their mental health was not good on 14 or more of the past 30 days. None of the respondents to the community needs assessment survey indicated their mental health was poor at the time of the survey, but as noted previously (in the Physical Health section), 11.8% of respondents reported having been diagnosed with mental illness of any type at some time, with depression being the diagnosis mentioned most frequently. Other data related to mental health include the following:

- Twenty-six percent (26%) of respondents reported they consult a professional when their mental health is not good (51% indicated their mental health is always good), and the largest number said they would go to a private practitioner or a community mental health center.
- Although responses were spread across the scale from strongly disagree to strongly agree, only 25.1% either agreed or strongly agreed with the statement: "This community has adequate mental health services for people who need them."
- For responses regarding mental health needs in the community, the top ranked items focused on affordability and access. Specifically, the top five needs are:
  - 1. Affordable mental health services
  - 2. Affordable health insurance that includes mental healthcare
  - 3. High quality mental health services
  - 4. Increased mental health education/prevention
  - 5. Increased number of mental healthcare providers

See Tables 55 through 61 for specific data related to mental health.

### SECONDARY MENTAL HEALTH DATA

#### Table 55. Selected secondary mental health data.

Mental Health	Riley County	Kansas	Source
Percent of adults reporting that mental health was not good on 14 or more days in the past 30 Days, 2013	9.8%	9.7%	BRFSS
Percent of adults ever diagnosed with a depressive disorder, 2013	23.9%	18.1%	BRFSS
Percent of Medicare recipients with depression, 2008 - 2012	17.2%	16.2%	Centers for Medicare and Medicaid Services
Percent of Medicare recipients with schizophrenia and other psychotic diagnoses, 2008 - 2012	4.4%	4.0%	Centers for Medicare and Medicaid Services
Rate of children Under 18 hospitalized for mental health (per 1,000), 2013	0.59	2.61	Kansas Kids Count

### MENTAL HEALTH SURVEY DATA

*Table 56. How would you describe your overall mental health?* (*n*=1039)

Answer	Frequency	%	Mean (Range 1-5)
Poor	5	0.0	
Fair	39	4.0	
Good	214	21.0	4.13
Very Good	331	32.0	4.15
Excellent	443	43.0	
Not Sure	7	1.0	

Table 57. Do you consult a mental health professional when your mental health is not good? (n=1026)

Answer	Frequency	%
Yes	271	26.0
No	235	23.0
My mental health is always good.	520	51.0

Table 58. Where do you go most often when your mental health is not good?

Answer	Frequency	%		
Private practice	192	17.1		
Community Mental Health Center	48	4.3		
Fort Riley	8	0.7		
Hospital emergency room	2	0.2		
Other	34	3.0		
Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.				

Table 59. This community has adequate mental health services for people who need them.

Frequency	%	Mean (Range 1-5)
114	10.1	
244	21.7	
374	33.2	2.85
245	21.8	
37	3.3	
112	10.0	
	114 244 374 245 37	114       10.1         244       21.7         374       33.2         245       21.8         37       3.3

Table 60. What are the top three needs related to mental health in your community?

Answer	Frequency	%		
Affordable mental health services	449	39.9		
Affordable health insurance that includes mental healthcare	404	35.9		
High quality mental health services	356	31.6		
Increased mental health education/ prevention	312	27.7		
Increased number of mental healthcare providers	306	27.2		
Substance abuse prevention/ treatment	214	19.0		
Children mental health services	191	17.0		
Affordable prescriptions	170	15.1		
Availability of transportation for mental health services	136	12.1		
Other	60	5.3		
Note: Percent based on total (N=1126). Each person may have selected more than one option. Totals will not				

Table 61. What are the top three needs related to mental health in your community– Other Comments

equal 100%.

Answer	Frequency
Inpatient mental health services	9
Access to mental health services	6
High quality mental health providers	5
Community education	3
Increased number of mental health providers	3
State funding	3
Support groups	2
Alternative therapies	1
Children mental health services	1
Evaluation	1
Housing options for people with chronic mental illness	1
Substance abuse prevention/treatment	1
Transportation services	1
Veteran services	1
Note: Not all persons who answered "other question gave a specific example.	" to this



# Social Issues

### SUMMARY OF FINDINGS

Social issues is a broad topic area that encompasses foundational concerns such as poverty and resulting problems like substance abuse, crime, suicide, and others. Although the topics included in the secondary data and survey are in no way exhaustive of the social issues facing Riley County, they provide an overview of some of the concerns that tend to have the greatest impact on a community. Like the state itself, Riley County is experiencing an increase in residents and their children living at or below the poverty level. At the same time, assistance to those most in need is decreasing (e.g., decreased amount of child care assistance available and fewer families receiving it); however, Riley County fares well as compared to the state in general on many of the pieces of secondary data, except for drop-out rates and adult binge drinking. The data from the survey support the secondary data in terms of noting substance abuse (including alcohol), poverty, mental health issues, and lack of child care as primary concerns. Survey data indicate that discrimination is an area of concern as well. The key findings of the survey are:

• The large majority of respondents indicated that they do not personally experience social issues such as substance abuse, domestic violence, disability, or homelessness. This is likely due to a limitation in

sampling those who experience these issues or discomfort in disclosing this information.

- Discrimination due to sexual orientation and race were both reported by over 17% of the respondents. Discrimination related to sexual orientation and/or race appears most likely to occur in public accommodations.
- Four of the top seven concerns of respondents are directly related to substance abuse including drinking
  and driving, youth drug or alcohol use, adult drug or alcohol use, and manufacture or selling of drugs. The
  presence of a large number of college students in the community as well as the proximity to rural areas
  (where manufacturing of methamphetamine is most likely to occur) are likely contributors to these findings.
  The top five needs related to social issues are:
  - 1. Availability of services for people with low income
  - 2. Positive activities for youth
  - 3. Availability of employment
  - 4. Availability of mental health services
  - 5. Child care

See Tables 62 through 71 for specific data related to social issues.

### SECONDARY SOCIAL ISSUES DATA

Table 62. Selected secondary social issues data.

Social Issues	Riley County	Kansas	Source
Percent of persons (all ages) below federal poverty level, 2012	21.2%	14.0%	US Census Bureau Small Area Income and Poverty Estimates
Percent of persons under 18 below federal poverty line, 2012	19.0%	19.0%	US Census Bureau Small Area Income and Poverty Estimates
Percent of persons with food insecurity, 2012	16.2%	15.0%	Kansas Association of Community Action Programs Hunger Atlas
Rate of single parent households (per 1,000), 2010	65.22%	89.76%	Kansas Child and Family Well- being Indicators (KSU and Dept. for Children and Families)
Percent of county population receiving child care assistance, 2010	0.21%	0.65%	Kansas Child and Family Well- being Indicators (KSU and Dept. for Children and Families)
Percent of 9th grade students enrolled in 2007 - 2008 who graduated in 2011 - 2012	76.12%	84.92%	Kansas Kids Count
Rate of infant mortality (deaths per 1000 live births), 2012	7.65	6.07	Kansas Kids Count
Rate of teen pregnancy (per 1,000), 2012	14.5	19.7	KDHE
Percent of adults who are binge drinkers, 2013	24.4%	15.4%	BRFSS
Index of crime offenses (per 1,000), 2013	18.1	31.4	Kansas Bureau of Investigation
Rate of violent crime (per 1,000), 2013	2.0	3.2	Kansas Bureau of Investigation
Rate of teen violent deaths (per 100,000 15- to 19-year-olds due to suicide, homicide, or motor vehicle accident), 2011	13.16	29.83	Kansas Kids Count
Deaths due to suicide, 2012	9	505	KDHE
Number of domestic violence incidents, 2012	557	24,373	Kansas Bureau of Investigation
Number of domestic violence arrests, 2012	228 (40.9% arrest rate)	14,102 (57.9% arrest rate)	Kansas Bureau of Investigation
Rape incidents, 2012	27	1,069	Kansas Bureau of Investigation
Rape arrests, 2012	4 (14.8% arrest rate)	222 (20.8% arrest rate)	Kansas Bureau of Investigation
Alcohol related driving deaths/all vehicle accident deaths, 2008 - 2012	3/16 (19.0%)	691/1992 (35.0%)	National Highway Traffic Safety Administration (Fatality Analysis Reporting System)

### SOCIAL ISSUES SURVEY DATA

Table 63. Do you or anyone in your household have a substance use issue (e.g., drink too much alcohol, have a problem with legal or illegal drugs)?

Answer	Frequency	%
Yes	53	5.2
No	971	94.8
Not answered	102	

Table 64. Do you or anyone in your household currently experience domestic violence (e.g., violence between adult partners)?

Answer	Frequency	%
Yes	7	0.7
No	1016	99.3
Not answered	103	

Table 65. Excluding mental illness, do you or anyone in your household have a physical or developmental disability?

Table 66. Are you or anyone in your immediate family currently homeless (e.g., no permanent place to live on a daily basis)?

Answer	Frequency	%	Answer	Frequency	%
Yes	134	13.2	Yes	9	0.9
No	885	86.8	No	1009	99.1
Not answered	107		Not answered	108	

Table 67. Have you personally experienced or witnessed discrimination in this community based on any of the following?

% Experiencing	Setting Where Discrimination Occurred			
Any Discrimination	% Housing	% Public	% Employment	
17.4	5.4	11.7	11.5	
17.1	3.9	10.8	8.8	
12.2	3.2	8.3	8.8	
10.8	3.2	6.9	8.6	
10.7	2.8	6.5	5.7	
9.6	2.4	6.1	4.9	
9.1	1.2	4.9	4.4	
8.8	1.0	4.2	3.0	
	Any Discrimination 17.4 17.1 12.2 10.8 10.7 9.6 9.1	Any Discrimination% Housing17.45.417.13.912.23.210.83.210.72.89.62.49.11.2	Any Discrimination% Housing% Public17.45.411.717.13.910.812.23.28.310.83.26.910.72.86.59.62.46.19.11.24.9	

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Table 68. Please choose the top three social issues that are of most concern in your community

Answer	Frequency	%
Inattentive driving	305	27.1
Drinking and driving	301	26.7
Poverty	290	25.8
Youth drug or alcohol use	270	24.0
Mental illness	208	18.5
Adult drug or alcohol use	202	17.9
Manufacture or selling of drugs	143	12.7
Hunger	138	12.3
Homelessness	127	11.3
Domestic violence	107	9.5
Cybercrime	103	9.1
Discrimination	99	8.8
Child physical or sexual abuse	95	8.4
Property crime	92	8.2
Violent crime	68	6.0
Suicide	55	4.9
Teen pregnancy	41	3.3
Other	37	3.3
Youth/gang violence	19	1.7
Elder abuse	11	1.0

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Top Needs Related to Social Issues

Availability of services for people with low incomes

Positive activities for youth

Availability of employment

Availability of mental health services

Child care

Table 69. Please choose the top three social issues that are of most concern in your community - Other Comments

Answer	Frequency
College students' negative behaviors	5
Diversity issues/discrimination	3
Child neglect	2
Cost of Living	1
Disability access	1
Guns	1
Safe housing	1
Reliable low cost Transportation	1
Lack of personal responsibility	1
Poverty	1
Suicide	1

Table 70. What are the top three needs related to social issues in your community?

Answer	Frequency	%
	in equency	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Availability of services for	382	33.9
people with low incomes		
Positive activities for youth	293	26.0
Availability of employment	284	25.2
Availability of mental health	248	22.0
services	240	22.0
Child care	224	19.9
Housing options for homeless	100	147
persons	166	14.7
Options for arts and	155	17.0
entertainment activities	155	13.8
Substance abuse prevention or	100	11 🕞
treatment	129	11.5
Services for older adults	124	11.0
Services to veterans/military	96	8.5
Services for persons with	0.7	0.7
disabilities	93	8.3
Better enforcement of laws	93	8.3
Availability of support groups/	07	
peer support	87	7.7
Other	74	6.6
Services for domestic/sexual	70	<u> </u>
violence survivors	70	6.2
Changing local laws	68	6.0

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Table 71. What are the top three needs related to social issues in your community? – Other Comments

Answer	Frequency
Public transportation	5
Livable wages	3
Affordable housing	2
Affordable legal services	2
Personal responsibility	2
Internet services	1
More access to elected officials	1
Secular support groups	1
Dental health services	1
Rental maintenance	1
Funding for social services	1
Religion	1
Local control of school curriculum	1
Financial accountability of public	1
school system	
Unbiased law enforcement	1
Animal control	1
Eliminate discrimination	1
Promotion of historic preservation	1
Restaurants	1
Economic development	1
Sexual health education	1
Mental health short-term care	1

# Children and Youth

### SUMMARY OF FINDINGS

According to the 2010 Census, just over 26% of Riley County family households include children under the age of 18. In comparison, 34.1% of the respondents to the community survey indicated that they have children under the age of 18. In general, the responses to the community survey are relatively consistent with secondary data that indicate that Riley County children and youth fare well as compared to state averages. Areas of concern, based on secondary data, are inadequate prenatal care, infant mortality, the rate of children hospitalized for mental health issues, and the number not completing high school. Additionally, data from the Department for Children and Families for 2013 show that the number of children receiving child care assistance in Riley County has gone down as



funding has decreased. Responses to the survey highlight this issue with child care for young children being the number one need. Employment opportunities were identified as the number one need for older youth. Other key findings from the survey are:

- Of the respondents to this section of the survey, approximately 14% are single parents, nearly 10% have kids with developmental disabilities, 4% have children with physical disabilities, 6% have children with a chronic disease, and over 10% have children with a mental illness.
- The majority are satisfied with the education their children are receiving. Interestingly, the number who are dissatisfied is nearly equal to those reporting that their children have been afraid to go to school because of bullying.
- Nearly half are dissatisfied with non-school activities.
- Eleven percent have lost or quit a job due to childcare issues, and 41% report that child care is not affordable; however, over 90% who use child care are satisfied with it.
- When asked to rate how well the community meets the needs of children and youth, youth employment, needs of mothers for whom English is not their first language, and support for single parents are the issues that were rated lowest.

- The top ranked needs for children 0 12 years old are:
  - 1. Child care for children 0-5
  - 2. Financial assistance to families (for nutrition, child care, housing, etc.)
  - 3. Afterschool programs
  - 4. Parenting education/skills development
  - 5. Recreational activities
- The top ranked needs for youth aged 13 18 are:
  - 1. Employment opportunities for teens
  - 2. Opportunities to contribute to the community (e.g., volunteering, leadership development, participation in community decision-making)
  - 3. Financial skills training
  - 4. Recreational activities
  - 5. Bullying/relationship violence prevention

See Tables 72 through 95 for specific data related to children and youth.

### SECONDARY CHILDREN AND YOUTH DATA

#### Table 72. Selected secondary children and youth data.

Percent of births with inadequate prenatal care, 2010-201213.4%11.7%Kansas Department of Health and EnvironmentPercent of prenature births (less than 37 weeks of completed gestation), 20129.9%3.7%Kansas Department of Health and EnvironmentRate of infant mortality (deaths under age 1 per 1000 live births), 20127.6%6.07Kansas Department of Health and EnvironmentPercent of present of infants fully immunized at 24 months, 20127.7%71.7%Kansas Department of Health and EnvironmentPercent of live births to mothers without a high school diploma, 20115.4%15.63Kansas Child and Family Well-being Indicators (KSU and Dept. for Children and Familes)Percent of children under age 18 living below federal poverty line, 20129.0%19.0%US Consus Bureau Small Area Income and Powerty EstimatesPercent of children under 19 with no health insurance coverage, 20112.37221,444Kansas Kids CountNeregae mothy enrollement of children in the Kansas Food and Powerty Estimates13.7%Kansas Kids CountNeregae mothy enrollement of children in the Kansas Food and present of children on children in the Kansas Food and present of children in the Kansas Food substance Program (TANC), 201221.74Kansas Kids CountNeregae mothy enrollement of children in the Kansas Food and present of the grade students enrolleging in the free and reduced price lunch program, 201221.74Kansas Kids CountNeregae mothy enrollement of children in the Kansas Food and Environment21.83Kansas Kids CountPercent of the grade students enrollegingingi	Children and Youth	Riley	Kansas	Source
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using marijuana in the last 30 days, 2014 Rate of children under age 18 hospitalized for mental health	binge drinking (having 5+ consecutive drinks on at least one	6.73%	9.76%	Kansas Communities That Care Survey
Rate of children under age 18 hospitalized for mental health		7.96	8.42	Kansas Communities That Care Survey
(per 1,000 children), 2012 3.94 2.65 Kansas Kids Count	Rate of children under age 18 hospitalized for mental health (per 1,000 children), 2012	3.94	2.65	Kansas Kids Count

### CHILDREN AND YOUTH SURVEY DATA

Table 73. Are you a parent or custodial grandparent/guardian of someone under 18?

Answer	Frequency	%
Yes	341	34.1
No	658	65.9
Not Answered	127	

The following questions were designed to be completed by ONLY those who indicated that they were parents, grandparents or guardians of children under 18. The percentages for each question were figured based on the number of respondents to that question (not on the total number of survey respondents like most questions).

#### Table 74. Are you a single parent?

Answer	Frequency	%
Yes	52	14.8
No	300	85.2

Table 75. Do any of your children have a developmental disability?

Answer	Frequency	%
Yes	33	9.5
No	315	90.5

#### Table 76. Do any of your children have a physical disability?

Answer	Frequency	%
Yes	12	3.4
No	337	96.6

#### Table 77. Do any of your children have a chronic disease?

Answer	Frequency	%
Yes	20	5.8
No	327	94.2

Table 78. Have any of your children been diagnosed with a mental illness or emotional disturbance?

Answer	Frequency	%
Yes	36	10.3
No	313	89.7

## Table 79. Are you satisfied with the education your children are receiving?

Answer	Frequency	%
Yes	286	83.9
No	55	16.1

#### Table 80. Are your children home-schooled?

Answer	Frequency	%
Yes	11	3.2
No	331	96.8

Table 81. Have any of your children been afraid to attend school/ other activities due to bullying?

Answer	Frequency	%
Yes	58	17.1
No	282	82.9

Table 82. Are you satisfied with non-school activities for your children in your community?

Answer	Frequency	%
Yes	188	54.9
No	154	45.1

*Table 83. Have you ever quit or lost a job because you did not have the child care you needed?* 

Answer	Frequency	%
Yes	38	11.0
No	307	89.0

#### Table 84. Do you use child care for your children?

Answer	Frequency	%
Yes	143	36.6
No	248	63.4

Table 85. What type of child care do you use? Check all that apply.

Answer	Frequency	%
Licensed Day Care Home	46	20.4
Afterschool/Latchkey Program	43	19.1
Child care center	41	18.2
Relative or friend	38	16.9
Preschool	35	15.6
Other	15	6.7
Group Day Care Home	7	3.1

Table 86. What type of child care do you use? Check all that apply. – Other Comments

Answer	Frequency
Nanny	3
Before school	2
Boys & Girls Club	2
Hired In-home babysitter	2
Summer camp	1
Discovery Center	1

Table 87. Are you satisfied with the quality of the child care you currently receive?

Answer	Frequency	%
Yes	134	91.8
No	12	8.2

Table 88. Are you satisfied with the child care options that are available to you?

Answer	Frequency	%
Yes	60	41.7
No	84	58.3

Table 89. Do you receive any type of child care assistance?

Answer	Frequency	%
Yes	16	10.9
No	131	89.1

#### Table 90. Is your child care affordable?

Answer	Frequency	%
Yes	85	59.0
No	59	41.0

The following questions were asked of all respondents regardless of whether they indicated having children or grandchildren under the age of 18.

Table 91. In your opinion, how well does your community generally meet the needs of children and/or adolescents in the following areas?

Statement	N	Very Poor	Poor	Fair	Good	Very Good	Mean (1-5)
Quality education	773	0.9%	3.2%	12.4%	46.1%	37.4%	4.16
Volunteer opportunities	743	0.8%	4.3%	16.2%	41.0%	37.7%	4.10
Postnatal care (birth through first year)	573	1.0%	4.2%	14.7%	45.5%	34.6%	4.08
Prenatal care (pregnancy)	577	1.9%	4.9%	16.1%	44.0%	33.1%	4.02
College or career preparation	713	1.8%	6.3%	16.3%	39.6%	36.0%	4.02
Physical health	733	0.8%	5.2%	19.6%	50.9%	23.5%	3.91
Recreational opportunities	815	2.5%	9.0%	18.4%	38.9%	31.3%	3.88
Quality of child care for children 0-5	587	3.2%	9.9%	27.1%	39.7%	20.1%	3.64
Dental health	684	3.9%	10.5%	24.0%	41.1%	20.5%	3.64
Needs of children/youth with disabilities	482	3.3%	11.6%	28.8%	39.6%	16.6%	3.55
Violence/bullying prevention	606	3.5%	12.0%	30.0%	36.8%	17.7%	3.53
Prenatal support/training	541	3.0%	16.6%	28.7%	35.9%	15.9%	3.45
Access to child care for children 0-5	617	4.4%	17.2%	32.7%	28.8%	16.9%	3.37
Mental health	643	6.5%	20.2%	32.2%	31.1%	10.0%	3.18
Needs of children whose first language isn't English	367	7.9%	19.3%	33.2%	27.8%	11.7%	3.13
Basic needs of low-income children/youth	526	7.2%	24.0%	35.9%	24.9%	8.0%	3.02
Needs of mothers whose first language isn't English	363	9.4%	22.0%	35.8%	25.6%	7.2%	2.99
Support for single parents	434	6.7%	25.8%	36.4%	25.3%	5.8%	2.98
Employment for youth	525	8.2%	24.0%	36.6%	24.0%	7.20%	2.98

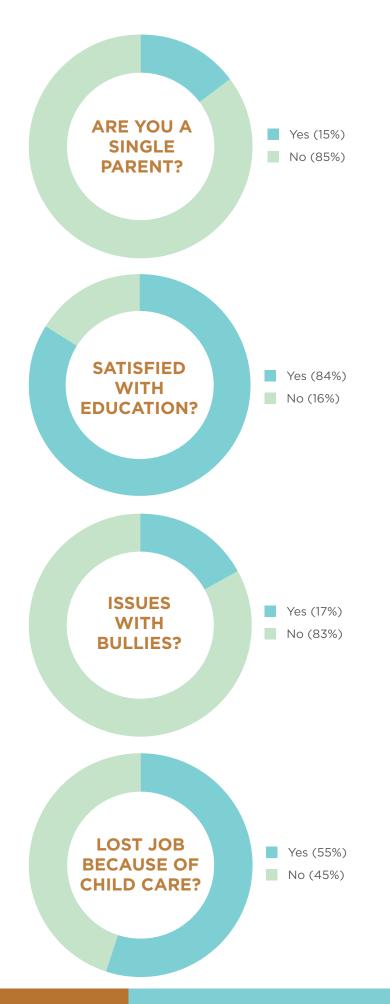


Table 92. What are the top three needs related to children (0-12) in your community?

Answer	Frequency	%
Child care for children 0-5	264	23.4
Financial assistance to families	258	22.9
(for nutrition, child care,	200	22.0
housing, etc.)		
Afterschool programs	252	22.4
Parenting education/skills	206	18.3
development		
Recreational activities	189	16.8
Mentoring programs for	165	14.7
children		
Early childhood intervention	158	14.0
programs (e.g., Head Start,		
etc.)		
Public education	144	12.8
Bullying prevention	144	12.8
Nutrition programs (e.g. WIC,	131	11.6
free and reduced lunch, etc.)		
Services for children with	113	10.0
physical or developmental		
disabilities	100	0.1
Mental healthcare	102	9.1
Medical care	74	6.6
Dental Care	72	6.4
Transportation	64	5.7
Other Note: Percent based on total N (	35	3.1

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Table 93. What are the top three needs related to children (0-12) in your community? – Other Comments

Answer	Frequency
Arts	1
Breastfeeding support	1
Comprehensive sex education	1
Disability services	1
Funding for K-12 schools	1
Local history education	1
Preschool	1
Quality school lunches	1
Recreation center	1
Transportation	1

Table 94. What are the top three needs related to adolescents (13-18) in your community?

	_	<b>A</b> (
Answer	Frequency	%
Employment opportunities for teens	241	21.4
Opportunities to contribute to the community (e.g., volunteering, leadership	200	17.8
development, participation in community decision-making)		
Financial skills training	190	16.9
Recreational activities	168	14.9
Bullying/relationship violence prevention	160	14.2
Appropriate internet/technology use (e.g., sexting, cyberbullying, etc.)	154	13.7
Workforce training for teens	138	12.3
Mentoring programs for adolescents	125	11.1
Substance abuse prevention/treatment	119	10.6
Public Education	98	8.7
Parenting Education/skills development (for parents of adolescents	97	8.6
Teen pregnancy prevention/Sex education	89	7.9
Access to Higher Education Group	81	7.2
Obesity prevention	81	7.2
Cultural enrichment opportunities	80	7.1
Mental healthcare	76	6.7
Transportation	57	5.1
Services for children with physical or developmental disabilities	56	5.0
Tutoring	39	3.5
Other	31	2.8
Access to technology/computers	25	2.2
Dental care	21	1.9
Medical care	13	1.2
Note: Percent based on total N (1126). Each person may have selected more than on equal 100%.	e option. Totals w	ill not

Table 95. What are the top three needs related to adolescents (13-18) in your community? – Other Comments

Answer	Frequency
Skills training	3
Community involvement	2
Internet services	1
Local history education	1
Affordable housing	1
Arts	1
College preparation	1
Funding for schools	1
Mental health services	1
Disability services	1
Substance abuse prevention/treatment	1
Sex education	1
Transportation	1
Work opportunities	1

## Education

## SUMMARY OF FINDINGS

The population of Riley County has more high school graduates and persons with a bachelor's degree or above than the state average; however, according to data compiled by Kansas Action for Children (Kansas Kids Count), Riley County is somewhat lower than the state average in terms of those who were enrolled in 9th grade in 2007-2008 and graduated in 2011-2012. This is likely due to the transient nature of a high number of military personnel and students. Other secondary data indicate that Riley County fares better than average for the state related to early childhood education opportunities and school achievement. The exception is early childhood education for low-income families (i.e., Early Head Start). This issue is echoed in the survey responses to the previous section (Children and Youth), but responses in this section indicate overall satisfaction with education in Riley County with some concerns regarding ways to maintain quality. Other key survey findings are:

- Respondents rated the quality of teachers and schools highest, but the amount of money spent per student and availability of afterschool programs were the lowest rated.
- The top five identified needs are:
  - 1. Getting and keeping good teachers
  - 2. Increased parental involvement
  - 3. Increased expectations for student achievement
  - 4. Equality in funding among school districts
  - 5. More artistic and musical activities

**Note:** Because education has the potential to impact everyone in the community, it was determined that responding to this section should not be limited to those who have or had children in Riley County schools. Therefore, responses should reflect the perceptions of those who have direct experience with the local K-12 educational system as well as those who do not.

See Tables 96 through 99 for specific data related to education.

## SECONDARY EDUCATION DATA

#### Table 96. Selected secondary education data.

Education	Riley County	Kansas	Source
Number of Early Head Start slots per 100 children (0-3 years of age) below 100% of poverty, 2012	1.48	6.32	Kansas Kids Count
Number of Head Start slots available per 100 children (3-4 years of age) below 100% of poverty, 2012	48.46	43.09	Kansas Kids Count
Percent of elementary schools that offer pre-K or four-year-old at-risk program, 2012-2013	54.55%	49.55%	Kansas Kids Count
Percent of elementary schools that offer full-day and every day kindergarten, 2012-2013	100.0%	85.93%	Kansas Kids Count
Percent of 5th graders meeting standards, exceeding standards or scoring exemplary on reading assessments, 2011-12	92.12%	87.09%	Kansas Kids Count
Percent of 9th grade students enrolled in 2007 – 2008 who graduated in 2011 - 2012	76.12%	84.92%	Kansas Kids Count
Percent of k-12 public schools that meet the Adequate yearly progress requirements, 2012	88.24%	79.6%	Kids Count Data Center
Percent of persons 25+ who graduated high school or higher, 2008 - 2012	95.4%	89.7%	US Census Bureau State and County
Percent of persons 25+ with bachelor's degree or higher, 2008-2012	45.4%	30.0%	US Census Bureau State and County

## **EDUCATION SURVEY DATA**

#### The Education questions were asked of all respondents regardless of whether they have school aged children.

Table 97. How would you rate K-12 education in your community in the following areas?

Statement	N	Very Poor	Poor	Fair	Good	Very Good	Mean (1-5)
The quality of the schools your child attends	490	1.0%	2.0%	10.0%	45.3%	41.6%	4.24
The quality of teachers	702	0.1%	1.4%	10.5%	52.0%	35.9%	4.22
The overall quality of schools.	689	0.6%	1.7%	10.2%	53.4%	34.1%	4.19
The quality of school buildings.	709	1.1%	3.2%	18.2%	47.0%	30.5%	4.02
The availability for up-to-date technology for students to use.	618	0.8%	4.2%	15.7%	52.4%	26.9%	4
The availability of extracurricular programs, clubs, or sports.	659	1.1%	5.5%	17.6%	44.6%	31.3%	4
The quality of curriculum.	622	1.6%	4.2%	17.4%	52.3%	24.6%	3.94
The availability of support resources at the school (counselors, tutors, etc.).	606	1.5%	6.1%	25.7%	41.7%	24.9%	3.83
The amount of parental involvement in the child's education.	602	1.3%	7.5%	25.1%	46.5%	19.6%	3.76
Availability of afterschool programs.	579	3.8%	11.2%	26.6%	39.9%	18.5%	3.58
The amount of money a school spends per student.	558	5.7%	14.9%	31.0%	35.5%	12.9%	3.35

Table 98. What are the top three needs regarding education in your community?

Answer	Frequency	%
Getting and keeping good teachers	395	35.1
Increased parental involvement	199	17.7
Increased expectations for student achievement	181	16.1
Equality in funding among school districts	174	15.5
More artistic and musical activities	159	14.1
Addressing bullying	135	12.0
Increased student discipline	114	10.1
Increased quality of instruction by teachers	111	9.9
Addressing overcrowding in schools	110	9.8
Increased quality of curriculum	106	9.4
Availability of quality computers and technology	102	9.1
More involvement of students in decision-making	89	7.9
Addressing fighting, violence, and/or gangs	75	6.7
Availability of physical activities and sports	70	6.2
Increased amount of time students spend in school	68	6.0
More extracurricular activities	59	5.2
Addressing the condition of school buildings	56	5.0
Other	56	5.0
Raising standardized test scores	31	3.8
Updated textbooks	18	1.6
-	18	1.6

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Table 99. What are the top three needs regarding education in your community? – Other Comments

Answer	Frequency
Not teaching to the test	5
Adequate state funding	4
Second high school	4
Vocational education	2
Behavioral interventions	2
More second language opportunities	2
Affordability	1
Better communication between	1
teachers and parents	
Better understanding of bullying	1
Creative teachers	1
Diversity education	1
Diversity of staff	1
Diversity of staff	1
Drug interventions	1
Equal access to funding	1
Equal access to sports	1
Flexible lunch time	1
Full-time school nurse for each building	1
Health and fresh school lunches	1
Learning through play	1
Less state involvement	1
Less technology	1
Less time in school	1
Less vacation	1
More physical activities and recess	1
More support for middle school students	1
More tutoring	1
New superintendent	1
Not using Native Americans as mascots	1
Not using the common core	1
Parent education	1
School counselors	1
Smaller classroom sizes	1

## Aging

## SUMMARY OF FINDINGS

The population of Riley County skews much younger than is average for the state, with only 7.6% being over 65 (compared to 14% for the state). Regardless, data on health and wellness (as outlined in the previous section on Physical Health) indicate that the population is relatively healthy even when adjusted for age. Survey findings support this, with 87% of respondents, most of whom are middle-aged or older, reporting that they are in good health. At the same time, survey findings specific to aging indicate that there may be a need for additional resources for older adults and their caregivers. Some questions in this section were asked of all respondents while others were directed at persons who were 55 or older. The key findings for survey questions to all respondents and those who were 55 or older are:

Findings from questions for all respondents:

- Just over 45% responded that they agree that the community is supportive of healthy aging; however, another 28.7% were either neutral or disagreed with this statement.
- When asked if there were enough services for older adults in the community, responses were only slightly positive with nearly 40% being neutral or disagreeing.
- Nearly 100 respondents indicated that they are caretakers for someone 55 or older. Over 1/3 indicated that they do not have the services they need as a caregiver. The top five needs for caregivers are:
  - 1. Affordable home care
  - 2. Caregiver respite
  - 3. Knowing where to go for assistance
  - 4. Mental health services
  - 5. Support group
- The top five needs related to aging as identified by all respondents are:
  - 1. Affordable housing
  - 2. Independent living in the home
  - 3. Transportation
  - 4. Ease of mobility in the community
  - 5. Affordable prescriptions

Findings from questions for persons 55 years or older:

- When asked about factors that are most important to them, those who identified as 55 or older mentioned issues related to health and independence most frequently. These priorities are consistent with the needs identified by respondents of all ages.
- The top five priorities for those 55 or over are:
  - 1. Staying healthy
  - 2. Having adequate health insurance coverage
  - 3. Being able to stay in your own home
  - 4. Having enough money to live comfortably and do the things you want to do
  - 5. Affording the cost of out-of-pocket healthcare expenses and prescription drugs

See Tables 100 through 109 for specific data related to aging.

## **SECONDARY AGING DATA**

Table 100. Selected secondary aging data.

Aging	Riley	Kansas	Source
Percent of population 65 years and over, 2013	7.60%	14.0%	US Census Bureau State and County QuickFacts
Number of assisted living facilities (regulated by KDADS), 2014	5	211	Kansas Department for Aging and Disability Services
Nursing homes (regulated by KDADS), 2014	4	311	Kansas Department for Aging and Disability Services
Home Plus facilities (regulated by KDADS), 2014	1	130	Kansas Department for Aging and Disability Services
Alzheimer's/memory care units (regulated by KDADS), 2014	1	88	Kansas Department for Aging and Disability Services
Number of persons enrolled in Medicare (hospital and/or supplemental medical for aged), 2012	5,737	378,549	Centers for Medicare and Medicaid Services

## AGING SURVEY DATA

The following questions were asked of all respondents regardless of their age.

#### Table 101. This community is supportive of healthy aging.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	3	0.3	
Disagree	42	3.7	
Neither Agree nor Disagree	282	25.0	3.7
Agree	513	45.6	
Strongly Agree	77	6.8	
Not Answered	209	18.6	

Table 102. The necessary senior services are available in this community.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	7	0.6	
Disagree	74	6.6	
Neither Agree	362	32.1	
nor Disagree			3.5
Agree	403	35.8	
Strongly Agree	69	6.1	
Not Answered	211	18.7	



#### Table 103. Choose the top three needs for older adults in your community?

Answer	Frequency	%
Affordable housing	245	21.8
Independent living in the home	210	18.7
Transportation	181	16.1
Ease of mobility in the community	150	13.3
Affordable prescriptions	141	12.5
Home healthcare options	132	11.7
Caregiver support	130	11.5
Medical care	100	8.9
Finances/Income	100	8.9
Access to daily meals	94	8.3
Assisted living options	90	8.0
Long term care options	81	7.2
Respite services for caregivers	75	6.7
Day programs	73	6.5
Memory care options/dementia support	69	6.1
Health insurance	69	6.1

Answer	Frequency	%
Mental health services	68	6.0
Independent living in a retirement community	62	5.5
Personal care services	57	5.1
Employment	37	3.3
Legal services	34	3.0
Other	32	2.8
Dental Care	31	2.8
Safety	31	2.8
Vision Care	23	2.0
Utility assistance	20	1.8
Hospice	19	1.7
Elder abuse	14	1.2
Substance abuse	1	0.1
Note: Percent based on total N (1126		

may have selected more than one option. Totals will not equal 100%. Table 104. Choose the top three needs for older adults in your community? – Other Comments

Answer	Frequency
Affordable assisted living options	1
Affordable hearing aids	1
Affordable housing	1
Community involvement	1
Education opportunities for people in	1
long-term care	
Geriatrician	1
Low impact exercising options (water)	1
Low property taxes	1
Public transportation	1
Reporting elder abuse	1

Table 105. Are you a caregiver for an older adult (spouse, parent, etc.)?

Answer	Frequency	%
Yes	96	10.9
No	786	89.1
Not Answered	244	

The following questions were asked of ONLY those who indicated they are caregivers for an older adult.

Table 107. If no, what services do you need?

Answer	Frequency
Affordable home care	5
Caregiver respite	5
Knowing where to go for assistance	3
Mental health services	3
Support group	2
Reliable transportation	2
More activities	2
Affordable contractors for modification of home	1
Family involvement	1
PA at the Health Department	1
Public transportation	1
Meals delivered outside the city limits	1
Financial assistance for caregiving	1
Memory support	1

## **OLDER ADULT NEEDS ASSESSMENT**

#### Table 108. Are you 55 years or older?

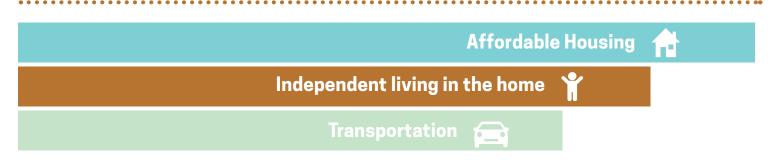
Answer	Frequency	%
Yes	358	39.0
No	560	61.0
Not Answered	208	

#### Table 106. If yes, are you receiving the services you need?

Answer	Frequency	%
Yes	60	61.9
No	37	38.1

The questions in Table 109 were designed to be completed by ONLY those who indicated that they were 55 years or older.

### TOP THREE NEEDS FOR OLDER ADULTS



## Table 109. How important are the following in your life right now?

Statement	N	Not Important	Somewhat Important	Moderately Important	Important	Very Important	Mean
Staying healthy	356	0.0%	0.3%	1.7%	12.1%	86.0%	4.84
Staying mentally sharp	363	0.3%	1.1%	2.8%	22.0%	73.8%	4.68
Having adequate health insurance coverage	361	1.1%	1.1%	3.9%	18.6%	75.3%	4.66
Being able to stay in your own home.	360	1.1%	0.6%	4.4%	20.0%	73.9%	4.65
Spending time with family and friends	360	0.3%	1.1%	7.2%	30.3%	61.1%	4.51
Having enough money to live comfortably and do the things you want to do	362	1.1%	2.8%	4.7%	29.6%	61.9%	4.48
Affording the cost of out-of-pocket healthcare expenses and prescription drugs	358	1.4%	2.8%	7.8%	24.3%	63.7%	4.46
Having enough money to meet daily living expenses	361	2.2%	1.9%	7.5%	24.7%	63.7%	4.46
Protecting yourself from consumer fraud	363	1.7%	3.3%	10.2%	23.4%	61.4%	4.4
Medicare benefits	355	8.2%	1.4%	5.9%	19.7%	64.8%	4.32
Social Security Benefits	356	7.6%	2.2%	5.6%	21.1%	63.5%	4.31
Having quality long-term care for yourself or a family member	356	5.1%	2.5%	7.9%	26.1%	58.4%	4.3
Learning New things	355	0.6%	1.7%	10.4%	42.5%	44.8%	4.29
Enforcement of quality standards for nursing homes	355	3.9%	3.7%	9.0%	29.9%	53.5%	4.25
Saving money for everyday expenses like groceries, gasoline, and dining out	354	3.1%	5.4%	8.2%	33.1%	50.3%	4.22
Being able to use my cell phone with confidence	353	7.1%	4.8%	11.0%	33.4%	43.6%	4.02
Being able to go online to use email and manage my finances with confidence	352	9.7%	5.1%	8.8%	27.6%	48.9%	4.01
Being able to volunteer in my community	351	3.4%	4.3%	15.1%	44.2%	33.0%	3.99
Having access to public transportation	356	18.5%	11.8%	18.5%	23.6%	27.0%	3.3

## Housing

## SUMMARY OF FINDINGS

A number of indicators show housing in Riley County to be in the midst of a boom while also being an area of extreme concern. The 2015 Manhattan Housing Forecast from Wichita State University's Center for Real Estate indicates that construction of new homes in Manhattan should increase by 4.3% while sales should increase by 5.5% (versus 2.6% for Kansas). At the same time, the inventory of active listings is relatively low. Additionally, average home values are expected to rise by 2.5%. Census data show that the median value of owner-occupied housing is already notably higher than the state average (\$174,900 versus \$129,500, respectively). Residents in Riley County are also less likely than average to own their home and are more likely to live in a multi-unit structure. These pieces of secondary data help support the feedback from survey respondents that the lack of affordable housing is a primary concern. Other key findings from the survey are:

- Over 75% of respondents reported owning their own home. This is not consistent with Census data that shows just over 40% home ownership in Riley County.
- Of those who do not own their home, over 70% would prefer to own it.
- Over 79% of those who responded to the question indicated that there is a lack of affordable housing. This is echoed in the list of needs related to housing in the community with "variety of affordable housing options" being selected by over 50% of the respondents.
- The top five identified needs regarding housing are:
  - 1. Variety of affordable housing options
  - 2. Assistance with property repair and maintenance
  - 3. Higher quality rentals
  - 4. Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)
  - 5. Neighborhood improvement programs

See Tables 110 through 117 for specific data related to housing.

## SECONDARY HOUSING DATA

Table 110. Selected secondary housing data.

Housing	Riley County	Kansas	Source
Number of housing units, 2013	29,437	1,239,755	US Census Bureau American Community Survey
Percent of vacant housing units, 2013	9.0%	10.2%	US Census Bureau American Community Survey
Percent of homeownership, 2008-2012	42.8%	68.2%	US Census Bureau State and County QuickFacts
Percent of housing units in multi-unit structures, 2008-2012	39.4%	17.6%	US Census Bureau State and County QuickFacts
Median value of owner-occupied housing units, 2011-2013	\$174,900.00	\$129,500.00	US Census Bureau American Community Survey
Number of households, 2008-2012	25,711	1,109,391	US Census Bureau State and County QuickFacts
Number of persons per household, 2008-2012	2.43	2.5	US Census Bureau State and County QuickFacts

## HOUSING SURVEY DATA

Table 111. Which of the following best describes your current living arrangements?

Answer	Frequency	%
I live with my spouse/ partner/significant other	643	69.9
I am the only person in my household	170	18.5
l live with other family, friends, or roommates	94	10.2
I live in my parents' home.	12	1.3
I have no place to live	1	0.1
Not answered	206	

#### Table 112. Is your current housing acceptable to you?

Answer	Frequency	%
Yes	866	93.8
No	57	6.2
Not Answered	203	

#### Table 113. Do you own your home or residence?

Answer	Frequency	%
Yes	689	75.3
No	226	24.7
Not Answered	211	

#### Table 114. If no, would you prefer to own your residence?

Answer	Frequency	%
Yes	165	70.8
No	68	29.2

Table 115. Do you think there is a lack of affordable housing in your community?

Answer	Frequency	%
Yes	703	79.3
No	184	20.7
Not Answered	239	

Table 116. What are the top three needs related to housing in your community?

Statement	Frequency	%
Variety of affordable housing options	584	51.9
Assistance with property repair and maintenance	294	26.1
Higher quality rentals	287	25.5
Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)	275	24.4
Neighborhood improvement programs	230	20.4
Low-income housing assistance (Section 8)	193	17.1
Education about financing options for homeownership	172	15.3
Senior housing	163	14.5
Education about responsible homeownership	123	10.9
Historic Preservation	102	9.1
Other	53	4.7
Note: Percent based on total N (1126)		

selected more than one option. Totals will not equal 100%.

## Table 117. What are the top three needs related to housing in your community? – Other Comments

Answer	Frequency
Affordable housing	16
Rental inspections	4
Median income housing	3
Lawn services	3
Responsible rental owners	2
No specials	2
Better financing options	1
Fewer investment properties/rentals	1
Less expensive university housing	1
Low property taxes	1
Lower population growth rate	1
More greenbelts	1
Public transportation	1
Quality rentals	1
Refurbish neighborhoods	1
Responsible renters	1
Safe housing	1



## Transportation

## SUMMARY OF FINDINGS

Riley County appears to be relatively typical for the state in terms of the number of cars residents can access. It also appears to be safer than is average for the state with a higher rate of seat belt use, lower percentage of fatal drinking/driving crashes out of all fatal accidents, and a generally low rate of traffic accident mortality. Fewer individuals are also likely to have long commutes than is average for the state. Survey responses indicate few issues with transportation as an impediment to daily life; however, the sample of respondents tends to be older and have higher incomes than average for Riley County. The responses regarding top needs show concern about ways to make the community more accessible to those who can't or don't want to use private vehicles as well as the increasing problem of texting and driving. Key findings from the survey are:

- The majority of respondents have two or fewer cars, and more than 90% typically use a car (either driving or riding with others) to go to their most frequent destinations.
- Just over 5% reported issues with transportation interfering with their regular activities.
  - The top five identified needs related to transportation are:
    - 1. Improve public transit service
    - 2. Develop a pedestrian friendly transportation system to make areas more walkable (improve sidewalks, crosswalks, signals, etc.)
    - 3. Provide maintenance and improvements to existing facilities (intersection or interchange improvements, pavement of gravel roads, bridge repairs, etc.)
    - 4. Expand and improve the bike route system (bike paths, bike lanes) to increase the number of people who bike as a form of transportation
    - 5. Address texting and driving

See Tables 118 through 124 for specific data related to transportation.

## SECONDARY TRANSPORTATION DATA

Table 118. Selected secondary transportation data.

Mental Health	Riley County	Kansas	Source
Percent of adults who reported they do not always wear a seatbelt when they drive or ride in a car, 2013	12.3%	17.0%	BRFSS
Rate of age-adjusted traffic injury mortality (per 100,000 population), 2010-2012	5.1	14.80	Kansas Department of Health and Environment
Alcohol related driving deaths, 2008 - 2012	3	691	National Highway Traffic Safety Administration (Fatality Analysis Reporting System)
All vehicle accident deaths, 2008 - 2012	16	1992	National Highway Traffic Safety Administration (Fatality Analysis Reporting System)
Percent having access to one or more vehicles, 2013	93.8%	94.4%	US Census Bureau American Community Survey
Percent who drive more than 30 minutes to work per day (i.e., long commute), 2011	14.0%	20.0%	Robert Wood Johnson Foundation County Health Rankings

## TRANSPORTATION SURVEY DATA

Table 119. How many operating vehicles (cars, trucks, vans, motorcycles) do you have in your household that are used for personal transportation?

Answer	Frequency	%
None	31	3.4
One	254	27.5
Тwo	413	44.8
Three	161	17.5
Four or more	63	6.8
Not Answered	204	

Table 120. What method of transportation do you normally use to go to work, school, or your most frequent destination?

Statement	Frequency	%
Car/truck/van - drive alone	800	86.9
Carpool/Ride with others	46	5.0
Walk	38	4.1
Bicycle	14	1.5
Other	11	1.2
Motorcycle	5	0.5
Public transportation	3	0.3
Тахі	2	0.2
Specialized transportation (e.g. for people with disabilities)	2	0.2
Not answered	205	

Table 121. What method of transportation do you normally use to go to work, school, or your most frequent destination? – Other Comment

Answer	Frequency	Answer	Frequency
Walk	3	Hybrid car	1
Bus	2	Can't drive	1
Car	2	Family member drives	1
Тахі	2	Work from home	1
Bicycle	1		

#### Table 122. Do issues with transportation regularly prevent you from doing what you need to do?

Answer	Frequency	%
Yes	49	5.4
No	860	94.6
Not Answered	217	

Table 123. What are the top three transportation-related needs in your community?

Statement	Frequency	%
Improve public transit service	453	40.2
Develop a pedestrian friendly transportation system to make areas more walkable (improve sidewalks, crosswalks, signals, etc.)	362	32.1
Provide maintenance and improvements to existing facilities (intersection or interchange improvements, pavement of gravel roads, bridge repairs, etc.)	347	30.8
Expand and improve the bike route system (bike paths, bike lanes) to increase the number of people who bike as a form of transportation	311	27.6
Address texting and driving	295	26.2
Increase specialized transportation services for people with disabilities and /or special needs	172	15.3
Expand local taxi services	91	8.1
Improve traffic signals	89	7.9
Improve driver education	86	7.6
Widen existing roads	65	5.8
Increase options for overnight public parking	49	4.4
Other	46	4.1
Build new roads	45	4.0
Note: Percent based on total N (1126). Each person may have selected more than one opti	on. Totals will	not

equal 100%.

Table 124. What are the top three transportation-related needs in your community? – Other Comments

Answer	Frequency	Answer	Frequency
Expand bus system hours and routes	7	Increase public school bus routes	1
Increase road maintenance	6	Increase safety at crosswalks	1
Bike lanes	5	Increase specialized transportation	1
Increase traffic law enforcement	3	Increase taxi service	1
	5	Lower speed limits	1
Dangerous driving	2	Mariatt-Junietta Bridge	1
Sidewalks	2	Overnight parking options	1
Re-paint road lines	2	Street drainage	1
Community bicycle education	1	Transportation for older adults	1
Coordinate traffic signals	1	Wider parking spaces	1
Eliminate the bus system	1		
Improve street signs	1		

## Infrastructure

## SUMMARY OF FINDINGS

Secondary data related to indicators that make a community livable and sustainable show that Riley County does well in most areas. Riley County experiences a low level of pollution, has a higher ratio of healthcare professionals to residents than average, and generally has availability of valued resources (e.g., Internet); however, the secondary data indicate an issue with access to healthy food and exercise opportunities across the community. Responses to the survey echo the secondary data, with participants rating essential services (i.e., fire, emergency services, library) and environment highly. As has been noted in previous sections, the areas of concern are focused on options for navigating the community, housing, and roads maintenance. The specific key findings from the survey are:

- Respondents were asked to rate the public services/features on a scale from very poor to very good. The services/features that were rated most highly are:
  - 1. Library facilities
  - 2. Fire department
  - 3. Emergency services
  - 4. Air quality
  - 5. Clean environment

## SECONDARY INFRASTRUCTURE DATA

Table 125. Selected secondary infrastructure data.

- The services/features that were rated lower (although still had a mean rating of "fair") are:
  - 1. Paths/safe options for biking and walking
  - 2. Code enforcement for private properties
  - 3. Road maintenance

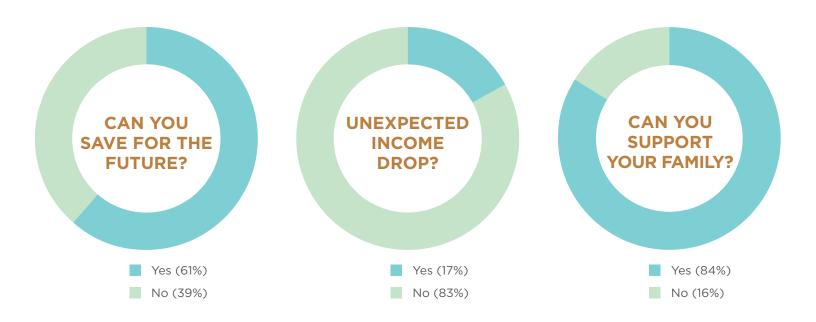
See Tables 125 through 126 for specific data related to infrastructure.

Infrastructure	Riley County	Kansas	Source
Average daily amount of fine particulate matter (air pollutant) in micrograms per cubic meter (PM2.5), 2011	9.5	10.9	Robert Wood Johnson Foundation County Health Rankings
Ranking of lack of access to healthy food and food insecurity (i.e., food environment index) from 0 (worst) to 10 (best), 2013	5.3	7.5	Robert Wood Johnson Foundation County Health Rankings
Percent of individuals with access to exercise opportunities, 2014	60.0%	71.0%	Robert Wood Johnson Foundation County Health Rankings
Ratio of population to primary care physicians, 2014	1,490:1	1,380:1	Robert Wood Johnson Foundation County Health Rankings
Ratio of population to dentists, 2014	1,942:1	1,987:1	Robert Wood Johnson Foundation County Health Rankings
Ratio of population to mental health providers, 2014	861:1	888:1	Robert Wood Johnson Foundation County Health Rankings
Percent of population experiencing severe housing problems (i.e., lack of complete kitchen facilities, lack of complete plumbing, severely overcrowded, or severely cost over-burdened), 2007 – 2011	13.0%	23.0%	Robert Wood Johnson Foundation County Health Rankings
Percent of households with broadband internet subscription, 2013	78.4%	73.0%	US Census Bureau American Community Survey

## **INFRASTRUCTURE SURVEY DATA**

Table 126. How would you rate the following public services/features in your community?

Statement	Ν	Very Poor	Poor	Fair	Good	Very Good	Mean
Library facilities	888	0.6%	0.8%	8.3%	45.4%	44.9%	4.33
Fire department	881	0.2%	0.3%	6.4%	53.6%	39.5%	4.32
Emergency services (e.g., ambulance, paramedics)	885	0.6%	0.6%	8.4%	56.9%	33.6%	4.22
Air quality	890	0.4%	2.0%	10.8%	59.0%	27.8%	4.12
Clean environment	894	0.3%	1.5%	12.9%	58.9%	26.4%	4.1
Quality of drinking water	898	0.9%	2.8%	13.6%	53.8%	29.0%	4.07
Parks and recreation facilities	886	0.9%	4.0%	14.4%	50.7%	30.0%	4.05
Police or Sheriff's department	885	1.2%	4.3%	13.0%	51.3%	30.2%	4.05
Maintenance of public grounds (e.g., parks, government buildings)	893	0.3%	2.0%	14.9%	60.0%	22.7%	4.03
Trash pick-up	879	1.3%	3.5%	14.7%	56.1%	24.5%	3.99
Emergency preparedness (e.g., dealing with natural disasters, etc.)	866	0.8%	2.1%	19.5%	59.5%	18.1%	3.92
Animal Control	854	1.6%	3.9%	23.0%	56.9%	14.6%	3.79
Snow removal	895	2.8%	6.7%	24.9%	47.4%	18.2%	3.72
Handicapped accessibility of public facilities	864	1.2%	6.5%	28.9%	48.6%	14.8%	3.69
Internet access	859	3.4%	7.6%	24.3%	47.4%	17.3%	3.68
Crime prevention activities	851	1.8%	9.9%	32.9%	45.8%	9.6%	3.52
Code enforcement for private properties	845	3.8%	12.8%	33.6%	42.1%	7.7%	3.37
Paths/safe options for biking and walking	876	4.0%	14.6%	34.0%	37.7%	9.7%	3.34
Road maintenance	895	3.4%	15.0%	38.9%	37.1%	5.7%	3.27



## **Economics and Personal Finance**

## **SUMMARY OF FINDINGS**

According to the 2015 Manhattan Housing Market forecast (Wichita State University's Center for Real Estate), the economic picture for the community is relatively positive. In particular, employment rates for 2015 are projected to be 6.6% higher than in 2007, which was before the recent recession, but the median income amount for Riley County residents is lower than the state average while the median value of owner-occupied housing is significantly higher. Other secondary data support this contrast in that some items illustrate a community that is economically robust, but includes a certain group of people who struggle. Survey findings also illustrate a community where some do well while others experience limited opportunities and resources. Key survey findings are:

- Although a relatively small number of respondents
   report not making enough to meet their expenses each month or having difficulty covering bills, over 1/3 report not earning enough to save money or plan for the future.
- The majority feel that their skills or education are being fully used in their current jobs and that there are a variety of jobs in the community.
- Responses were more mixed related to the availability of opportunities to increase job skills, with just over 50% indicating that they "disagree" or "strongly disagree" that there are enough wellpaying jobs in the community.
- Respondents were somewhat negative about property and sales taxes with a larger percentage indicating that they "disagree" or "strongly disagree" that sales and property taxes are reasonable as compared to those who "agree" or "strongly agree."
- The goods or services that respondents were most likely to purchase in their community are groceries, general household supplies, and restaurant/ entertainment. The goods or services that were most likely to be purchased outside of the respondents' communities are clothes, car/truck, arts, and insurance. For online purchases, clothes and electronics were at the top of the list.
- The top five economic/personal finance needs in the community are:
  - 1. Availability of jobs
  - 2. Emergency assistance to individuals or families (e.g., for utilities, food, rent, etc.)
  - 3. Assistance with searching for and gaining employment
  - 4. Small business development
  - 5. Low-cost resources to help with personal finance management

## SECONDARY ECONOMICS AND PERSONAL FINANCE DATA

Economics/Personal Finance Data	Riley County	Kansas	Source
Median value of owner-occupied housing units, 2013	\$174,100.00	\$129,700.00	US Census Bureau American Community Survey
Median household income, 2013	\$43,778.00	\$50,972.00	US Census Bureau American Community Survey
Rate of unemployment, August 2014	4.3%	4.8%	US Bureau of Labor Statistics
Percent of persons (all ages) below federal poverty level, 2012	21.2%	14.0%	US Census Bureau Small Area Income and Poverty Estimates
Number of private nonfarm establishments, 2012	1,527	73,944	US Census Bureau State and County QuickFacts
Number employed at private nonfarm establishments, 2012	20,249	1,134,216	US Census Bureau State and County QuickFacts
Nonemployer establishments (small establishments with no more than one employee), 2012	3,045	188,168	US Census Bureau State and County QuickFacts
Amount of merchant wholesaler sales (in thousands), 2007	93,235	45,863,865	US Census Bureau State and County QuickFacts
Amount of retailer sales (in thousands), 2007	728,603	34,538,332	US Census Bureau State and County QuickFacts
Retail sales per capita, 2007	\$10,498	\$12,444.00	US Census Bureau State and County QuickFacts
Accommodation and food services sales (in thousands), 2007	125,435	4,192,347	US Census Bureau State and County QuickFacts
Number of building permits, 2012	407	6,252	US Census Bureau State and County QuickFacts

Table 127. Selected secondary economics and personal finance data.

### ECONOMICS AND PERSONAL FINANCE SURVEY DATA

Table 128. In a typical month, how difficult is it for you to cover your expenses and pay all your bills?

Answer	Frequency	%
Very Difficult	35	3.9
Difficult	113	12.4
Neither Easy nor difficult	356	39.2
Easy	232	25.6
Very easy	172	18.9
Not answered	218	

#### Table 129. Do you make enough money to save/plan for the future?

Answer	Frequency	%
Yes	553	61.4
No	348	38.6
Not Answered	225	

Table 130. In the past 12 months, have you or your household experienced a large drop in income which you did not expect?

Answer	Frequency	%
Yes	155	17.1
No	750	82.9
Not Answered	221	

Table 131. Do you make enough money to support yourself and/or family?

Answer	Frequency	%
Yes	753	84.1
No	142	15.9
Not Answered	231	

## Table 132. Do you feel like your skills and/or education are being fully used in your current job or in retirement?

Answer	Frequency	%
Yes	579	63.8
No	211	23.2
I don't have a job	118	13.0
Not answered	218	

#### Table 133. There are a variety of jobs available in my community.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	46	5.1	
Disagree	220	24.5	
Neither Agree nor Disagree	259	28.9	3.2
Agree	312	34.8	
Strongly Agree	60	6.7	
Not Answered	229		

#### Table 134. There are enough well-paying jobs in my community.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	90	10.1	
Disagree	358	40.0	
Neither Agree nor Disagree	270	30.2	2.7
Agree	153	17.1	
Strongly Agree	23	2.6	
Not Answered	232		

Table 135. There are opportunities for increasing my jobs skills.

Answer	Frequency	%	Mean (Range 1-5)
Strongly	31	3.5	
Disagree Disagree	113	12.9	
Neither Agree nor Disagree	274	31.3	3.5
Agree	390	44.6	
Strongly Agree	67	7.7	
Not Answered	251		

#### Table 136. Property taxes in my community are reasonable.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	129	14.5	
Disagree	271	30.5	
Neither Agree nor Disagree	298	33.5	2.6
Agree	175	19.7	
Strongly Agree	16	1.8	
Not Answered	237		

#### Table 137. Sales taxes in my community are reasonable.

Answer	Frequency	%	Mean (Range 1-5)
Strongly Disagree	95	10.6	
Disagree	293	32.8	
Neither Agree nor Disagree	259	29.0	2.8
Agree	236	26.4	
Strongly Agree	11	1.2	
Not Answered	232		

Table 138. Where do you most often purchase the following goods or services? Check all that apply.

	,			
Statement	% In My Community	% Outside My Community	% Online	% N/A
Groceries	69.5	22.9	17.8	0.1
Clothes	68.4	21.5	13.5	0.5
General household supplies	67.8	18.9	5.8	0.3
Banking services	64.9	17.5	5.6	0.2
Pet supplies	64.1	15.7	4.2	22.4
Legal services	61.7	13.9	2.9	25.1
Insurance	61.5	11.3	2.9	1.8
Medical	60.6	11.0	2.2	1.2
Dental	60.4	10.0	2.0	2.4
Car/Truck purchase	57.9	8.2	1.8	6.9
Office/School supplies	56.4	8.2	1.5	4.8
Grooming and salon service	50.3	7.6	1.0	4.6
Tools and Hardware	49.7	6.1	0.8	4.2
Appliances	49.6	6.0	0.5	5.8
Electronics	45.4	6.0	0.4	2.4
Restaurant/Entertainment	44.0	6.0	0.2	0.6
Arts	40.9	4.4	0.2	10.1

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Table 139. What are the top three economic/personal finance needs in your community?

Statement	Frequency	%
Availability of jobs	404	35.9
Emergency assistance to individuals or families (e.g., for utilities, food, rent, etc.)	237	21.0
Assistance with searching for and gaining employment	235	20.9
Small business development	229	20.3
Low-cost resources to help with personal finance management	212	18.8
Availability of low-interest loans	144	12.8
Workforce development training	117	10.4
Availability of college or career preparation in schools	87	7.7
Access to education	73	6.5
Other	46	4.1
Employment opportunities for youth	13	1.2
Employment opportunities for older adults	11	1.0

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Table 140. What are the top three economic/ personal finance needs in your community? – Other Comments

Answer Freque	ency
Living wage	9
Affordable housing	3
Job diversity	2
Vocational education	2
Affordable post-secondary education	1
Business-friendly	1
community	
Emergency assistance	1
Higher interest rate for savings	1
Increase teacher salaries	1
Locally owned businesses	1
Low cost personal finance assistance	1
Lower taxes	1
Older adult assistance	1
On the job skills training	1
Reduced cost of living	1

# **Key Informant Interviews**

CCSR researchers conducted one-on-one in-person interviews with 25 key informants who were identified by the Project Coordinator of the Riley County Seniors' Service Center. The key informants represented a wide range of interests and sectors in the community. The areas represented included social service, education, law enforcement, city/county government, physical and mental health, ecumenical, and military among others. Interviews were semi-structured and generally covered questions regarding community strengths and needs. Notes from all interviews were analyzed to determine overarching themes regardless of the interviewee's area of interest or expertise.

The following themes emerged most frequently across all interviews. Some interviewees gave perspectives that were specific to their areas of interests/expertise. Such specific input was either combined with more general themes or left out in order to protect the confidentiality of participants. Issues that were mentioned by multiple interviewees regardless of their area(s) of interest are included in the descriptions of the major themes below:

#### **Community growth**

The complex issue of community growth emerged as the overarching issue across all interviews. Interviewees highlighted the connection between the current community growth, particularly in Manhattan, and

the other major themes of lack of affordable housing, increased need and lack of resources, and disparities across multiple groups.

Interviewees expressed a tension between the desire to preserve what is great about the community and the expected impact of such fast and expansive growth. Regionalization and the resulting change from being a relatively contained community to a hub for multiple communities was noted as a positive by a number of interviewees. Regionalization makes it possible to share resources across communities, but also contributes to a potential drain on resources for some. In general, interviewees frequently mentioned the National Bio and Agro-Defense Facility as a great contributor to growth, but also a source of potential trouble (i.e., difficulty recruiting employees due to high cost of housing, a focus on jobs for highly educated, financially stable persons rather than those that would be appropriate for the most needy community members, etc).

Finally, many interviewees expressed their concern that the focus on new buildings and community improvements brought by growth may divert attention away from the increasing needs of those who have the least resources.



Increased need but lack of resources

Despite, or possibly because of, community growth, interviewees noted an increase in those with significant needs (i.e., due to poverty or being marginalized in some way)

while resources to serve them are diminishing. They noted that decisions at the state level are contributing to this issue, but also expressed concern that growth in the community has created a false sense that everyone is prospering. Growth brings more people to the community, many of whom are low income. This is in addition to persons already in the community who are low income or have significant health or social service needs (including military and students). In the current climate of local, state, and federal budget cuts to funding for health, mental health, and social services, the increased number of persons in need is straining the already limited availability of resources. The lack of resources extends to the areas of child care, mental health services, healthcare, transportation, and services for those with disabilities.

# Lack of affordable housing and low wages

These themes were often mentioned together, as interviewees saw a tight connection between the two. The value of

housing, both owner-occupied and rental, is high in Riley County while the median income is lower than average for the state. This combination makes it difficult for residents to make enough to reasonably afford to live in Riley County. Also, interviewees indicated that the lack of affordable housing and low wages are intertwined with community growth. Specifically, the boom in the economy contributes to new housing construction, which in turn drives up costs and creates a surplus of places that many community members cannot afford. At the same time,



very few lower income housing options are being created or even maintained. The strain on housing resources created by the influx of students is an additional contributor to the problem. Interviewees noted that it has become accepted that students will live in substandard housing, which is problematic, but this issue affects the larger community as well.



#### Disparities among "haves" and "have nots"

"Disparity" in this instance encompasses access to resources and respectful, equitable treatment for groups such as

students, older adults, Hispanics/Latinos and other ethnic minorities, those with disabilities, persons with low income, the LGBT community, and others who tend to be marginalized amongst a predominant white middle class majority.

Although it would seem that community growth would benefit all residents equally, many of the interviewees noted their concern about the occurrence of the opposite – that those who have the fewest resources and protections are actually receiving less. This is closely related to the theme of "increased need but lack of resources," but the nuance is in the widening gap between those who are secure and/or benefitting from growth and those who are marginalized already. As noted previously, the growth of the community has created a sense among many of the interviewees, as well as those they serve, that those who are marginalized are being ignored or dismissed in the midst of general prosperity.

> Sense of community and collaboration One of the great strengths noted by all interviewees is the sense of community and collaboration present in Riley County. Individual interviewees noted how this

willingness to get involved and contribute to the community served to support high quality educational options (i.e., school districts and Kansas State University), committed and effective social service agencies, community-involved businesses, a safe, clean and attractive environment, and innovative, collegial healthcare providers.

Specifically, interviewees noted Fort Riley and Kansas State University as valuable assets in creating a sense of community. Additionally, they highlighted the consolidated Police Department as another example of a community that pulls together and shares effective resources. Of special note is the sentiment that social service agencies in the area are exceptionally good at collaborating to decrease duplication of services and leverage available resources for the benefit of those they serve. This strength was highlighted by numerous interviewees.

## Strong but inconsistent community leadership

Several interviewees had both positive and negative comments about community leadership (i.e., city commIssion and county commission). On the positive side, they credited

the city leadership of Manhattan specifically with their efforts to help create the growth currently being experienced by the city. Also, several interviewees noted the support of community leaders for social services and helping secure funding for various agencies. At the same time, some interviewees noted that the direction set by community leadership changes with each election, so continuity is an issue. Extremism among community leadership was also noted as an obstacle to consistent movement forward on issues such as community improvements and support for social services among others.



# Presence of and need for recreational resources and activities

A number of interviewees mentioned the parks and recreational facilities as a community positive. Some said that the

community is very walkable and bikeable, but they also noted a need to highlight the community's natural outdoor features and parks to increase physical activity and use by families of all types. Several expressed a desire for more efforts to connect various parts of the community (including towns outside of Manhattan) with bike and walking paths for ease of navigability for those who either cannot or do not want to use a car or bus.



## Need for a centralized "one stop shop" for health and social services

Somewhat related to "increased need but lack of resources," several interviewees expressed a need for a "one stop shop"

where those in need can access a variety of resources. They mentioned the common issue of persons in need having to go to multiple locations in order to access one resource (e.g., going to one location to get a referral, another to see a provider, then another to get the actual resource needed). This creates significant difficulties for the person due to time, transportation, and child care in many cases. In general, this desire to create a one stop shop would help address the concern expressed by one interviewee that the current process for accessing resources focuses on convenience for providers of services rather than for the recipients of those services.

# **Focus Groups**

One focus group was conducted with each of three populations that were underrepresented in the community needs assessment survey: 18- to 24-yearolds, persons with low income, and Hispanics/ Latinos. The focus groups were held over three days in locations that were most convenient for each audience. Each focus group lasted between 50 and 90 minutes. Five persons participated in the 18- to 24-year-old focus group, 13 participated in the focus group for persons with low income, and 8 participated in the Hispanic/Latino focus group.

Researchers gave a brief presentation of findings from secondary data, survey, and interviews at the beginning of each focus group. Participants were then asked for their reactions to the findings (i.e., are findings consistent with your experience, what stands out to you). Participants were also given the chance to provide input on community strengths and needs. All comments were written on flipcharts by the researchers. The comments on the flipcharts were then themed by the researchers who conducted the focus groups. Themes were developed regardless of the question because participants tended to intermingle comments about strengths and needs. Themes that occurred consistently in at least two of the groups are provided as an overall summary. Themes for each focus group by population are also included below.

## **OVERALL THEMES**

The following themes represent those that were mentioned across at least two of the focus groups. The explanatory statements below reflect what participants expressed, not an interpretation by researchers.

## A division between "haves" and "have nots"

All groups identified this issue in some form. The general consensus is that Riley County

is a great place for those with resources, but those who have low income (including military and students), do not speak English well, or have disabilities (to name just a few examples) feel left out and ignored. The focus on growth in the community while there is a lack of adequate resources for those in need helps fuel this division.



### Lack of affordable housing

This was discussed in all three focus groups and is considered a major concern. Participants noted that expectations of what people can pay, particularly students and those

with lower incomes, is unreasonable. The burden of the cost of housing impacts buying power in general. Also, high property taxes contribute to difficulties in affording desirable housing.



# Lack of access to and affordability of resources

All groups recognized that Riley County offers a number of exceptional services and resources for those who are in need.

In addition to demand for resources surpassing the funding to support them, participants also noted the following issues with access and affordability of resources:

• The need for a centralized access point for resources

Participants provided examples of having to go to multiple locations in order to access the resources they need (e.g., being sent from doctor to doctor or agency to agency). They suggested a centralized access point as a way to reduce barriers related to transportation, disability, income, and work hours.

- The need for diversity in providers This includes making sure that providers not only represent the diversity of the community, but also offer translation or bilingual assistance.
- The need for affordable services that allow for payment plans

Participants expressed a willingness to pay for services, but said that some providers require full payment before delivering services. This is not feasible for those on fixed incomes, including students.

# Concerns regarding growth in the community

While some are concerned about the National Bio and Agro-Defense Facility and potential health and safety hazards, the larger issue is fear of what may happen if the "bottom falls out" as one participant said. The same participant noted that uncontrolled growth contributes to poverty and "brain drain" when students graduate and cannot

afford to stay in the community.



#### Town versus Gown attitude

While Kansas State University and other area colleges are considered a great benefit to the community, the division between students and residents is somewhat

related to the concern regarding "haves" and "have nots." Overall, students (and faculty) are seen as great contributors to the community even though issues such as underage drinking are a concern.

#### Lack of transportation options

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Although participants recognized the benefit of the demand response service of the Flint Hills ATA, transportation is still a problem for many who do not have

their own reliable vehicle. Participants feel that there are not enough bus stops in the areas where public transportation is most needed. Also, the lack of benches in the proximity of some stops is an issue for those with disabilities. It was also suggested that there be a resource for those who have their own vehicle and just need some free or low-cost assistance with mechanical repairs.



# Educational system as a community strength

All groups noted that the schools in Riley County provide an excellent education to children and youth. One suggestion is to make

school activities, including sports, more affordable for parents who have lower incomes.



The following themes are listed by focus group/population.

## 18 - 24 YEAR OLDS

#### Lack of affordable housing

Participants noted that gentrification is occurring and contributing to the lack of affordable housing. They also indicated that sellers and leasing agents/landlords have unrealistic expectations of the ability of people, particularly students, to pay for housing. The

high rate of property taxes also contributes to the issue. They linked the lack of affordable housing to the general economic impact. As one participant said: "housing cost impacts buying power."

### Concerns regarding community growth

Participants linked a number of negative conditions to community growth that they think is too rapid. One concern is that while growth is occurring, economic productivity is decreasing and poverty is increasing. It was also mentioned that potential cuts at Fort Riley could further erode the situation. On the positive side, they gave examples of businesses that had come to Riley County specifically to take advantage of the access to qualified workers and students.

# "Invisible population" of people with significant needs

Participants discussed the tendency in the community to overlook those who are in need. They indicated that many former or current military personnel fall

into this category as do a large number of students, but because of the growth in the community, these persons are ignored and fall further behind. Additionally, there is a lack of adequate resources to help these persons due to lack of funding and increasing demand. Participants identified a number



of organizations they believe to be very effective and helpful despite decreasing funding.



### "Town" versus "Gown"

Although they noted the disconnect between the campus and larger community, they also believe students are a greater benefit than burden to the community. In general, they

see K-State as a major resource and, in some ways, the reason the community exists.



#### Sense of community

Participants noted the tendency of the community to come together, particularly related to University events and among nonprofit/social service organizations.



# Educational system as a community strength

Participants gave examples of the quality of schools and teachers in Riley County.

#### Other comments

Although not major areas of discussion, participants also suggested apathy among young adults, parking, and transportation as community needs/concerns.

## PERSONS WITH LOW INCOMES

During the focus group with persons with low incomes, one participant challenged the researchers to verify that they understood and would reflect the overall theme of all comments. Participants agreed with the following summary statements provided by researchers. These statements are provided here to honor the request that they be included in this report:

- Riley County has no safety net and little concern for the well-being of those with few resources.
- Those with few resources seldom have a say in what's best for them. The phrase "nothing about me without me" describes their desire to be treated respectfully.

Other themes based on participant comments:

#### Division between "haves" and "have nots"

This was the primary theme of the focus group. Participants said that they do not feel listened to when they try to get their needs

met. They also feel that the community does not care as much about those who have few resources as it does about growth. As one participant said, the community is focused on wants rather than needs.

#### Lack of affordable housing

For this population, the lack of affordable housing encompasses issues with landlords who require unreasonable rents and do not take care of properties as well as the

need for extended stay shelters. They also noted the concern about a shortage of and long waiting lists for Section 8 housing. Participants discussed the desire for the vacant grocery store (Ray's Apple Market) to be turned into a shelter for those in need.

# Lack of resources/services for those in need

Participants provided a long list of services that are either not affordable or available to the extent needed. This list

includes mental health care, dental care, legal services, assistance for youth who age out of foster care,

and assistance with equipment repair for those with disabilities. They suggested that the community needs options to allow people to bathe and do laundry even if they do not have shelter. Additionally, they noted a need for more diversity in service providers, including law enforcement

## Need for centralized resource access

Related to a lack of resources is the acknowledgement that the community does offer some good options for assistance; however, participants provided examples of being sent from location to location to try to access one resource (e.g., they have to go to one location to get a voucher, then another to get the resource). They suggested that organizations work together to figure out a way to centralize the access to resources to reduce the burden in time, money, and transportation on those they serve.



#### Lack of transportation options

Participants are aware of the demand response service of the Flint Hills ATA, but do not feel that it is as helpful as some think. Their main concerns were that the

demand response is not helpful if you cannot plan ahead (i.e., in an emergency) and that the regular bus stops are too far apart. Additionally, they expressed a concern about benches not being accessible at all stops, which is a problem for persons with disabilities. They also suggested that it would be helpful if there were a free or low-cost option for getting car repairs for those who have their own transportation. Finally, those who need to go to other cities for medical care have few resources for transportation to appointments.

#### Availability of helpful organizations



Participants acknowledged such organizations as local churches, Shepherd's Crossing, the Flint Hills Bread Basket, and Harvesters as community

strengths. They also noted the availability of such 24hour businesses as Wal-Mart and Hy-Vee as resources for those who have no shelter but need to be inside for at least short periods of time.





#### Other themes

Although not discussed at length, each of the following issues was mentioned: underage drinking in Aggieville, concerns about the safety of NBAF, funding issues

causing the hours for the library and pool to be shortened, Town versus Gown attitude, and racial profiling by the police department. The fact that the Riley County Police Department works well with Pawnee Mental Health was also mentioned as a strength.

#### **HISPANIC/LATINO**



## Inability to get resources without driver's licenses

Participants discussed how access to many important resources is dependent on the person having a driver's license. For some in this population, this creates great difficulty in accessing medical care, housing, and other essential services. Lack of affordable housing

Participants feel that there is a lack of affordable housing and that people can't afford newly built options. The consequence is that people are living in

trailers without running water or share housing with more than one family.

Lack of access to affordable and culturally competent medical care Participants provided examples of incidents when they were denied medical

care because they could not pay the entire cost before receiving services. They said they are willing and able to pay in installments, but felt the lack of accommodation is a significant barrier in the community. They indicated that this practice among various clinics is a barrier to preventive care. It causes them to either go to Junction City where they can pay by installment or to go to the emergency room when sick. They also mentioned the need for bilingual medical care providers or at least the availability of a translator. Finally, the lack of a driver's license was mentioned again as a barrier to getting medical coverage, which would help them take preventive measures and get care when needed.



#### Need for centralized resource access

Participants echoed the need for a "one stop shop" to access resources in the community. They gave examples of going from place to place trying to get one

resource. They specifically mentioned being passed from doctor to doctor as an impediment to consistent healthcare.



## Educational system as a community strength

Participants were very complimentary of the school system and believe their children are receiving a good education.

They suggested that scholarships for sports and other activities be made available to assist those who have fewer financial resources.



#### Library as a community strength

Participants were appreciative of the efforts of the library to provide children's services in Spanish.

## **Appendix A: Subsample Analysis of Survey Data**

To further examine the findings of the survey and compare survey methods, two subsamples were created. Selected questions from the survey were compared across subsamples.

### **METHODOLOGY**

The first subsample was created to match the exact age proportions based on the U.S. Census. Since 35.1% of Riley County is 18 to 24 years old, all of the total survey participants (58) were used to create a random subsample. SPSS was used to pull random selections from each of the other ages groups based on the U.S. Census age proportions to create a random subsample reflective of the population based on age. The second subsample was the random sample of mail and phone surveys. The age distributions for the total survey, the U.S. Census, the randomly created survey subsample, and mail/phone survey can be seen in Table 142. Once the subsamples were created, questions related to contributors to quality of life, top social issues concerns, and top needs for all topics (except Quality of Life) were analyzed using SPSS. The top five needs for each topic for the three samples can be seen in Tables 143 through 178.

#### **SUMMARY OF FINDINGS**

The two subsamples differ in unique ways that are useful for comparison. The random subsample is the exact age proportion of Riley County based on the U.S. Census, and the mail/phone survey subsample is the number of people that responded to the survey either by phone or by mail based on a random selection of addresses in Riley County. Interestingly, the mail/ phone sample had similar age proportions as the total survey. Both the total survey sample and the mail/ phone survey sample were disproportionately older adults. The mail/phone survey ultimately was less representative of the population than the total survey, with 52.3% of the respondents being over the age of 65, which most likely indicates a selection bias based on a mail/phone survey method. Overall, 78% of the needs were found across all three samples. Most of the sections had three to four needs in agreement

across all three samples. Aging and Children 13-18 had the fewest in agreement with only two needs in agreement across all three samples.

### TOP NEEDS ACROSS ALL THREE SAMPLES

#### **Quality of Life**

Four factors that contribute to a high quality of life were found in all three samples, albeit not in the same order: Good Schools, Clean Environment, Safe Neighborhoods, and Good Place to Raise Children. Note: Quality of Life is the only topic for which respondents were asked about what contributes to a high quality of life rather than needs in this area.

#### **Physical Health**

Three needs were found in all three samples in the same order: Affordable Health Services, Affordable Health Insurance, and Facilities for Physical Activity.

#### Mental Health

Four needs were found in all three samples, albeit not in the same order: Affordable Mental Health Services, Affordable Health Insurance that Included Mental Healthcare, High Quality Mental Health Services, and Increased Number of Mental Healthcare Providers.

#### **Social Issues**

Two social issues questions were asked. The top social issues that are of most concern in all three samples, though not in the same order, were: Drinking and Driving, Inattentive Driving, Poverty, and Youth Drug and Alcohol Use. The top three needs in the Social Issues section, though not in the same order, were: Availability of Services for People with Low Incomes, Availability of Employment, and Positive Activities for Youth.

#### **Children and Youth**

Two children and youth questions were asked. The top needs related to children 0-12 in all three samples, not in the same order, were Financial Assistance for Families, Child Care for 0-5, and Afterschool. The top needs related to children 13-18 in all three samples not in the same order, were Employment Opportunities for Teens and Financial Skills Training.

#### Education

Getting and Keeping Good Teachers was the number one need across all three samples. Increasing Parent Involvement and Increased Expectations for Student Achievement were also seen across all three samples.

#### Aging

Two needs were found in all three samples, albeit not in the same order: Affordable Housing and Transportation.

#### Housing

The top needs related to housing in all three samples, but not in the same order, were: Higher Quality Rentals, Variety of Affordable Housing Options, Code Enforcement, and Assistance with Property Repair and Maintenance.

### Transportation

Four needs were consistent in all three samples, although not in the same order: Improve Public Transit Service, Develop a Pedestrian Friendly Transportation System to Make Areas More Walkable, Address Texting and Driving, and Expand and Improve the Bike Route System.

#### **Economics and Personal Finances**

Availability of Jobs was the number one need across all three samples. Small Business Development and Assistance with Searching For and Gaining Employment were also seen across all three samples.

#### Table 141. Age comparisons across samples

Answer	Survey Sample	%	Random Subsample	%	Census Data	%	Mail/Phone Survey	%
18 to 24 years	58	5.2	58	34.7	18325	35.1	2	1.0
25 to 34 years	198	17.6	40	24.0	12416	23.8	10	4.9
35 to 49 years	294	26.2	27	16.2	8479	16.2	27	13.2
50 to 64 years	309	27.5	25	15.0	7795	14.9	57	27.8
65 years and over	263	23.4	17	10.2	5208	10.0	105	52.3

## **QUALITY OF LIFE**

Table 142. What are the three most important factors that contribute to a high quality of life in this community? – Total Survey

Statement	Frequency	%			
Good schools	374	33.2			
Good place to raise children	334	29.7			
Clean environment	280	24.9			
Safe neighborhoods	272	24.2			
Healthy economy	215	19.1			
Note: Percentage based on total N (1126). Each					
person may have selected more than one option.					
Totals will not equal 100%					

Table 143. What are the three most important factors that contributeto a high quality of life in this community? – Random Subsample

Statement	Frequency	%			
Safe neighborhoods	56	33.5			
Clean environment	47	28.1			
Good place to raise children	44	26.3			
Good schools	42	25.1			
Jobs with adequate wages	37	22.2			
Note: Percentage based on total N (167). Each					
person may have selected more than one option. Totals will not equal 100%					

Table 144. What are the three most important factors that contribute to a high quality of life in this community? – **Mail and Phone Surveys Only** 

Statement	Frequency	%
Good place to raise children	71	34.6
Safe neighborhoods	43	21.0
Good schools	43	21.0
Clean environment	36	17.6
Arts and cultural events	30	14.6
Note: Percentage based on to	otal N (205). Ea	ch
person may have selected m	ore than one op	tion.
Totals will not equal 100%		

## **PHYSICAL HEALTH**

Table 145. What are the top three needs related to physical health in your community? – **Total Survey** 

Statement	Frequency	%
Affordable health services	380	33.7
Affordable health insurance	337	29.9
Facilities for physical activity	321	28.5
Increased health education/prevention	249	22.1
Affordable prescriptions	213	18.9
Note: Percent based on total N (1126). Each person		
may have selected more than one option. Totals will not equal 100%.		

Table 146. What are the top three needs related to physical health in your community? - **Random Subsample** 

Statement	Frequency	%
Affordable health services	64	38.3
Affordable health insurance	47	28.1
Increased health education/ prevention	47	28.1
Facilities for physical activity	46	27.5
Access to healthy food options	33	19.8
Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal 100%.		

Table 147. What are the top three needs related to physical health in your community? – **Mail and Phone Surveys Only** 

Statement	Frequency	%
Affordable health services	44	21.5
Affordable health insurance	43	21.0
Facilities for physical activity	39	19.0
Access to healthy food options	36	17.6
Affordable prescriptions	25	12.2
Note: Percent based on total N (205). Each person		
may have selected more than one option. Totals will not equal 100%.		

### **MENTAL HEALTH**

Table 148. What are the top three needs related to mental health in your community? – **Total Survey** 

Statement	Frequency	%
Affordable mental health services	449	39.9
Affordable health insurance that includes mental healthcare	404	35.9
High quality mental health services	356	31.6
Increased mental health education/prevention	312	27.7
Increased number of mental healthcare providers	306	27.2
Note: Percent based on total	N (1126) Each p	erson

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal Table 149. What are the top three needs related to mental health in your community? – **Random Subsample** 

Statement	Frequency	%
Affordable mental health services	73	43.7
Increased mental health education/prevention	54	32.3
Affordable health insurance that includes mental healthcare	52	31.1
High quality mental health services	49	29.3
Increased number of mental healthcare providers	37	22.2
Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal		

Table 150. What are the top three needs related to mental health in your community? – *Mail and Phone Survey Only* 

Statement	Frequency	%
Affordable mental health services	47	22.9
Affordable health insurance that includes mental healthcare	53	25.9
High quality mental health services	28	13.7
Increased number of mental healthcare providers	30	14.6
Affordable prescriptions	25	12.2
Note: Percent based on total N		

may have selected more than one option. Totals will not equal

## **SOCIAL ISSUES**

Table 151. Please choose the top three social issues that are of most concern in your community – **Total Survey** 

Statement	Frequency	%
Inattentive driving	305	27.1
Drinking and driving	301	26.7
Poverty	290	25.8
Youth drug or alcohol use	270	24.0
Mental illness	208	18.5
Note: Percent base may have selected not equal 100%.		· · · · · · · · · · · · · · · · · · ·

Table 152. Please choose the top three social issues that are of most concern in your community – **Random Subsample** 

Statement	Frequency	%
Drinking and driving	55	32.9
Inattentive driving	44	26.3
Poverty	39	23.4
Youth drug or alcohol use	33	19.8
Adult drug or alcohol use	30	18.0
Note: Percent based on total N (167). Each person		
may have selected more than one option. Totals will		
not equal 100%.		

Table 153. Please choose the top three social issues that are of most concern in your community – **Mail and Phone Survey Only** 

Statement	Frequency	%
Drinking and driving	53	25.9
Adult drug or alcohol use	43	21.0
Youth drug or alcohol use	43	21.0
Inattentive driving	41	20.0
Poverty	22	10.7
Hunger	22	10.7

Note: Percent based on total N (205). Each person may have selected more than one option. Totals will not equal 100%.

Table 154. What are the top three needs related to social issues in your community? – **Total Survey** 

Statement	Frequency	%
Availability of services for people with low incomes	382	33.9
Positive activities for youth	293	26.0
Availability of employment	284	25.2
Availability of mental health services	248	22.0
Child care	224	19.9
Note: Percent based on total N (1126). Each person		
may have selected more than one option. Totals will not equal 100%.		

Table 155. What are the top three needs related to social issues in your community? – **Random Subsample** 

Statement	Frequency	%
Availability of services for people with low incomes	62	37.1
Availability of employment	50	29.9
Positive activities for youth	45	26.9
Options for arts and entertainment activities	31	18.6
Housing options for homeless persons	29	17.4
Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal 100%.		

Table 156. What are the top three needs related to social issues in your community? – **Mail and Phone Survey Only** 

Statement	Frequency	%
Availability of services for people with low incomes	39	19.0
Availability of support groups/ peer support	29	14.1
Availability of employment	28	13.7
Positive activities for youth	23	11.2
Availability of mental health services	22	10.7

Note: Percent based on total N (205). Each person may have selected more than one option. Totals will not equal 100%.

## **CHILDREN AND YOUTH**

Table 157. What are the top three needs related to children (0-12) in your community? – **Total Survey** 

Statement	Frequency	%
Child care for children 0-5	264	23.4
Financial assistance to families (for nutrition, childcare, housing, etc.)	258	22.9
Afterschool programs	252	22.4
Parenting education/skills development	206	18.3
Recreational activities	189	16.8
Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.		

Table 158. What are the top three needs related to children (0-12) in your community? - **Random Subsample** 

	Statement	Frequency	%
(	Financial assistance to families (for nutrition, child care, housing, etc.)	36	21.6
/	Afterschool programs	33	19.8
(	Child care for children 0-5	32	19.2
F	Public education	30	18.0
	Parenting education/skills development	28	16.8
r	Note: Percent based on total N (16 may have selected more than one not equal 100%.		

Table 159. What are the top three needs related to children (0-12) in your community? – Mail and Phone Survey Only

Statement	Frequency	%
Afterschool Programs	46	22.4
Child care for children 0-5	32	15.6
Mentoring programs for children	32	15.6
Financial assistance to families	28	13.7
(for nutrition, child care,		
housing, etc.)		
Recreational activities	25	12.2
Note: Percent based on total N (2	205). Each per	son
may have selected more than one	e option. Total	s will
not equal 100%.		

Table 160. What are the top three needs related to children (13-18) in your community? – **Total Survey** 

Statement	Frequency	%
Employment opportunities for teens	241	21.4
Opportunities to contribute to the community (e.g., volunteering, leadership development, participation in community decision-making)	200	17.8
Financial skills training	190	16.9
Recreational activities	168	14.9
Bullying/relationship violence prevention	160	14.2
Note: Percent based on total N (11:	26). Each pers	son

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.

Table 161. What are the top three needs related to children (13-18) in your community? - **Random Subsample** 

Statement	Frequency	%
Employment opportunities for teens	30	18.0
Opportunities to contribute to the community (e.g., volunteering, leadership development, participation in community decision-making)	27	16.2
Financial skills training	22	13.2
Access to higher education	20	12.0
Appropriate internet/ technology use (e.g., sexting, cyberbullying, etc.)	20	12.0

Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal 100%. Table 162. What are the top three needs related to children (13-18) in your community? – *Mail and Phone Survey Only* 

Statement	Frequency	%
Access to higher education	31	15.1
Financial skills training	30	14.6
Employment opportunities for teens	29	14.1
Recreation activities	27	13.2
Public Education	25	12.2
Note: Percent based on total N	(205) Each ne	rson

Note: Percent based on total N (205). Each person may have selected more than one option. Totals will not equal 100%.

## **EDUCATION**

Table 163. What are the top three needs regarding education in your community? -**Total Survey** 

Statement	Frequency	%
Getting and keeping good teachers	395	35.1
Increased parental involvement	199	17.7
Increased expectations for student achievement	181	16.1
Equality in funding among school districts	174	15.5
More artistic and musical activities	159	14.1

Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%. Table 164. What are the top three needs regarding education in yourcommunity? - Random Subsample

Statement	Frequency	%
Getting and keeping good teachers	54	32.3
More artistic and musical activities	26	15.6
Increased parental involvement	21	12.6
More involvement of students in decision-making	20	12.0
Increased expectations for student achievement	19	11.4
Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal 100%.		



Table 165. Choose the top three needs for older adults in your community? -**Total Survey** 

Statement	Frequency	%
Affordable housing	245	21.8
Independent living in the	210	18.7
home		
Transportation	181	16.1
Ease of mobility in the	150	13.3
community		
Affordable prescriptions	141	12.5
Note: Percent based on total N (1126). Each person		
may have selected more than o	one option. Tota	als will
not equal 100%.		

Table 165. What are the top three needs regarding education in your community? – *Mail and Phone Survey Only* 

Statement	Frequency	%
Getting and keeping good teachers	41	20.0
Equality in funding among school districts	27	13.2
Addressing bullying	22	10.7
Increased parental involvement	20	9.8
Increased expectations for student achievement	19	9.3
Note: Percent based on total N	(205), Each pe	rson

may have selected more than one option. Totals will not equal 100%.

## Table 167. Choose the top three needs for older adults in your community? - **Random Subsample**

Statement	Frequency	%
Transportation	33	19.8
Affordable housing	30	18.0
Ease of mobility in the community	26	15.6
Independent living in the home	22	13.2
Affordable prescriptions	21	12.6
Note: Percent based on total N (167). Each person		
may have selected more than one option. Totals will not equal 100%.		

Table 168. Choose the top three needs for older adults in your community? – *Mail and Phone Survey Only* 

Statement	Frequency	%
Medical care	54	26.3
Transportation	41	20.0
Caregiver support	34	16.6
Affordable housing	29	14.1
Assisted living options	22	10.7
Note: Percent based on total N (205). Each person		
may have selected more than on ot equal 100%.	one option. Tot	als will

## HOUSING

Table 169. What are the top three needs related to housing in your community? – **Total Survey** 

Statement	Frequency	%
Variety of affordable housing options	584	51.9
Assistance with property repair and maintenance	294	26.1
Higher quality rentals	287	25.5
Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)	275	24.4
Neighborhood improvement programs	230	20.4
Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.		

Table 170. What are the top three needs related to housing in your community? – **Random Subsample** 

Statement	Frequency	%
Variety of affordable housing options	77	46.1
Higher quality rentals	50	29.9
Neighborhood improvement programs	35	21.0
Assistance with property repair and maintenance	33	19.8
Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)	32	19.2
Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal 100%.		

Table 171. What are the top three needs related to housing in your community? – *Mail and Phone Survey Only* 

Statement	Frequency	%		
Higher quality rentals	43	21.0		
Low income housing assistance (Section 8)	42	20.5		
Assistance with property repair and maintenance	40	19.5		
Variety of affordable housing options	37	18.0		
Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)	29	14.1		
Note: Percent based on total N (205). Each person may have selected more than one option. Totals will not equal 100%.				

### **TRANSPORTATION**

Table 172. What are the top three transportation-related needs in your community? - **Total Survey** 

Statement	Frequency	%	
Improve public transit service	453	40.2	
Develop a pedestrian friendly			
transportation system to make	362	32.1	
areas more walkable (improve	502	52.1	
sidewalks, crosswalks, signals, etc.)			
Provide maintenance and			
improvements to existing			
facilities (intersection or	347	30.8	
interchange improvements,	017	0010	
pavement of gravel roads,			
bridge repairs, etc.)			
Expand and improve the bike			
route system (bike paths, bike			
lanes) to increase the number	311	27.6	
of people who bike as a form of			
transportation			
Address texting and driving	295	26.2	
Note: Percent based on total N (1126). Each person			
may have selected more than one option. Totals will			
not equal 100%.			

Table 173. What are the top three transportation-related needs in your community? – **Random Subsample** 

Statement	Frequency	%	
Improve public transit service	62	37.1	
Develop a pedestrian friendly transportation system to make areas more walkable (improve sidewalks, crosswalks, signals, etc.)	52	31.1	
Provide maintenance and improvements to existing facilities (intersection or interchange improvements, pavement of gravel roads, bridge repairs, etc.)	45	26.9	
Expand and improve the bike route system (bike paths, bike lanes) to increase the number of people who bike as a form of transportation	44	26.3	
Address texting and driving	36	21.6	
Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal 100%.			

Table 174. What are the top three transportation-related needs in your community? – **Mail and Phone Survey Only** 

Statement	Frequency	%
Address texting and driving	55	26.8
Increase specialized transportation services for people with disabilities and/or special needs	38	18.5
Improve public transit service	36	17.6
Develop a pedestrian friendly transportation system to make areas more walkable (improve sidewalks, crosswalks, signals, etc.)	34	16.6
Expand and improve the bike route system (bike paths, bike lanes) to increase the number of people who bike as a form of transportation	27	13.2
Note: Percent based on total N (	205). Each pe	rson

may have selected more than one option. Totals will not equal 100%.

### ECONOMICS AND PERSONAL FINANCES

Table 175. What are the top three economic/personal finance needs in your community? - **Total Survey** 

Statement	Frequency	%
Availability of jobs	404	35.9
Emergency assistance to individuals or families (e.g., for utilities, food, rent, etc.)	237	21.0
Assistance with searching for and gaining employment	235	20.9
Small business development	229	20.3
Low-cost resources to help with personal finance management	212	18.8
Note: Percent based on total N (1126). Each person may have selected more than one option. Totals will not equal 100%.		

Table 176. What are the top three economic/personal finance needs in your community? -**Random Subsample** 

Statement	Frequency	%	
Availability of jobs	56	33.5	
Small business development	33	19.8	
Emergency assistance to individuals or families (e.g., for utilities, food, rent, etc.)	32	19.2	
Availability of low-interest loans	28	16.8	
Assistance with searching for and gaining employment	27	16.2	
Note: Percent based on total N (167). Each person may have selected more than one option. Totals will not equal 100%.			

Table 177. What are the top three economic/personal finance needs in your community? – *Mail and Phone Survey Only* 

Statement	Frequency	%
Availability of jobs	51	24.9
Small business development	32	15.6
Employment opportunities for youth	32	15.6
Assistance with searching for and gaining employment	30	14.6
Employment opportunities for older adults	26	12.7

Note: Percent based on total N (205). Each person may have selected more than one option. Totals will not equal 100%.

# Appendix B: Riley County and Pottawatomie County Community Needs Assessment Survey

The following survey was used for online, hard copy, and phone administration. The survey was translated into Spanish and Korean. The consent form was also translated and used for all versions except for the phone survey, for which a shortened statement was used. The sections included in this Appendix are those for which data is provided in the previous report (i.e., Quality of Life, Physical Health (including physical activity, nutrition, and tobacco use/smoking), Mental Health, Social Issues, Children and Youth, Education, Aging, Housing, Transportation, Infrastructure, and Economics and Personal Finance, and Demographics).

# Riley/Pottawatomie County Community Needs Assessment Consent Form

#### Purpose

You are invited to take part in a survey about the quality of life in Riley and Pottawatomie Counties that includes questions about your experiences and opinions about your community. The information from this survey will be used to help organizations in Riley and Pottawatomie Counties better understand what residents think about the community and the needs that are present in communities in this area.

#### **Participant Selection**

You are being asked to participate in this survey because you are a resident of Riley or Pottawatomie Counties. Anyone over the age of 18 is invited to complete this survey. It is expected that approximately 850 people will take this survey.

#### **Explanation of Procedures**

If you decide to participate, you can take the survey after reading and agreeing to this consent statement. The survey contains questions about you (e.g., your age, your zip code, whether you've had certain experiences such as substance abuse within your household, etc.), but will mainly focus on what you think about your community. A few questions may seem sensitive (i.e., how would you describe your overall mental health on a scale of poor to excellent), but the information will only be used to gain an idea of how many people in the community deal with common issues. The survey is broken into sections focusing on various issues that may affect your community. The survey will take approximately 30 minutes to complete. You are asked to answer as many questions as possible, but you can skip questions that make you uncomfortable, aren't applicable to you, or if you don't know the answer. This survey is anonymous, so we do not need your name or any other identifying information. Once you complete this survey, your answers will be combined with those of all other participants, and a report on the results will be provided to Riley County Seniors' Service Center prepared by Wichita State University's Center for Community Support and Research staff. Riley County Seniors' Service Center will publish the report for the use of communities in Riley and Pottawatomie Counties. If you prefer to take the survey online, you can go to www.Riley-PottSurvey.com.

#### Discomfort/Risks

You may feel uncomfortable with some of the questions that ask about whether you or anyone in your household has experience with certain social issues (e.g., substance abuse, domestic violence, etc.). This survey is completely anonymous, so no one will be able to connect your name with your answers. Also, if you feel uncomfortable with a question, you may skip it.

#### Benefits

The benefit of participating in this survey is an opportunity to provide input regarding what people in the community experience, what they think of their community now, and what they think may need to change for the future. This will help your community plan and take action on issues that affect residents.

#### Confidentiality

This survey is anonymous and does not ask you to provide your name or other identifying information. All of your responses will be combined with those of others so that we can compile a report on general opinions and experiences without reporting any individual answers. The report on the combined responses will be provided to Riley County Seniors' Service Center to distribute for use in Riley and Pottawatomie Counties.

#### **Refusal/Withdrawal**

Participation in this survey is entirely voluntary. You can choose to skip questions or stop taking the survey at any time. Your decision on whether or not to participate will not affect your relationship with Wichita State University and/or Riley County Seniors' Service Center. If you agree to participate in this study, you are free to quit the survey at any time without penalty.

#### Contact

If you have any questions about this research, you can contact me at: Dr. Tara Gregory, 316-978-3714 or tara. gregory@wichita.edu. If you have questions pertaining to your rights as a research subject, or about researchrelated injury, you can contact the Office of Research and Technology Transfer at Wichita State University, Wichita, KS 67260-0007, telephone 316-978-3285.

You are under no obligation to participate in this survey. By checking "agree" on the next page, this indicates that you have read the information above and have voluntarily decided to participate

Please detach this consent form and keep it for your records.

The survey starts on the next page.

Thank you for your interest in taking this Riley County/Pottawatomie County Community Needs Assessment survey. The purpose of this survey is 1) to get your input on the quality of life in your community and 2) to identify the unmet needs in your community. Some of the questions ask you about your personal experiences. Some ask about your opinions on the community. We do not need your name or any identifying information, so please feel free to be completely honest. Anyone who lives in Riley or Pottawatomie Counties is invited to take this survey. We expect at least 850 people to take this survey. We encourage you to answer as many questions as possible. This survey will take about 30 minutes to complete. This survey is also available online at www.Riley-PottSurvey.com. If you are using a public computer, you need to complete the survey all at once. If you are using a personal computer, you may stop taking the survey at any point and come back to it later. You just need to complete the survey within 2 weeks. The survey will close on May 26, 2014. Please take the survey only once.

You are under no obligation to participate in this survey. By checking "I agree" below, it indicates that you have read the consent and have voluntarily decided to participate.

l agr	ee
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What county do you currently live in?

	Ri	ley
--	----	-----

Pottawatomie

# Do you consider this county to be your permanent residence?

	Yes
,	

	N	0	

#### What city is listed on your address?

What is your zi	p code?		What is your age?	
66411	66506	66535	Under 18 years	50 to 64 years
66449	66517	66547	18 to 24 years	65 to 74 years
66502	66520	66554	25 to 34 years	75 years and over
66503	66521	66962	35 to 49 years	
66505	66531	67487		
Other			]	

In the following sections, most of the questions ask about "your community" or "the community." "Community" in this survey means the area around which you live. For most people, this will be their city or town. For those who live in rural areas, this may include the town where they get services. Also, some of the questions ask about "needs" in the community. When you answer questions about "needs," think about those things that are either completely lacking or should be improved in order to increase the quality of life in your community.

### **QUALITY OF LIFE**

#### Please rate the following statements about the quality of life in your community based on your experiences.

	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
I am satisfied with the quality of life in this community.	1	2	3	4	5
I am satisfied with the healthcare system in this community.	1	2	3	4	5
I am satisfied with the local schools.	1	2	3	4	5
I am satisfied with local government.	1	2	3	4	5
This is a good place to raise children.	1	2	3	4	5
This is a good place to retire.	1	2	3	4	5
This is a safe place to live.	1	2	3	4	5
This is a beautiful place to live.	1	2	3	4	5
There is economic opportunity in this community.	1	2	3	4	5
There are networks of support for individuals and families during times of stress and need.	1	2	3	4	5
There is an active sense of civic responsibility, engagement, and pride in shared accomplishments.	1	2	3	4	5
There are plenty of recreational activities for my family and me.	1	2	3	4	5
There are opportunities to volunteer in my community.	1	2	3	4	5
All individuals and groups have the opportunity to contribute to and participate in the community's quality of life.	1	2	3	4	5
All residents think that they can make the community a better place to live.	1	2	3	4	5
The community is strengthened by its diversity.	1	2	3	4	5

#### What are the three most important factors that contribute to a high quality of life in this community?

Access to affordable health insurance	Jobs with adequate wages
Affordable housing	Low crime
Arts and cultural events	Low disease rates
Availability of healthcare	Low level of child abuse
Career enhancement	Parks and recreation
Clean environment (including water, air, sewage, waste disposal)	Religious or spiritual values
Equality	Resources for parents
Good place to raise children	Safe neighborhoods Strong family life
Good schools	Other
Healthy behaviors and lifestyles	
Healthy economy	

### **HEALTH INFORMATION**

#### How do you get most of your health-related information? Check all that apply.

Books/magazines	Health department	My child's school
Church	Help lines	Pharmacist
Doctor/nurse	Hospital	Other
Friends and family	Internet	

#### **Personal Health**

#### How would you describe your overall health?

Poor	Fair	Good	Very Good	Excellent	Not Sure
1	2	3	4	5	0

#### Has a health professional ever diagnosed you with one of the following? Check all that apply.

following? Check all that apply.	Strongly	Disagree	Neither Agree Nor	Agree	Strongly
Alzheimer's/Dementia	Disagree		Disagree		Agree
Cancer	1	2	3	4	5
Chronic Lung Disease					
High Cholesterol	Physical Activ		u	lon't exercise	what are
Diabetes	During a norma in your regular	-		sons you do r	
Heart Disease	hours per week	do you engag	e in Select	up to three.	
High Blood Pressure	any physical ac	tivity or exerci	ise? My	job is physica	al or hard labor
Any Mental Health Diagnosis	None None		Ex	ercise is not im	portant to me.
If so, what was your diagnosis:	Less than 1	Less than 1 hour			ess to a facility
	1-2 hours				gs I need, like
	2-3 hours		a p	ool, golf cour	se, or a track.
Do you have health insurance?	3 hours or	more		on't have eno	Jah time
Yes	lf you exercise,	where do you	±	exercise.	
No No	to exercise or e activity? Chec	engage in phys	ical . Iw	ould need chi	ld care and I
Do you consult a professional	Home		do	n't have it.	
when you are sick?	Neighborh	oods		on't know hov	
Yes	Park		exe	ercise partners	5.
No	Private gyr	n/studio	Id	on't like to exe	ercise.
If yes, where do you go most often	Public Recr	reation		costs too muc	h to oversise
when you are sick?	Center				n to exercise.
My doctor's office	Schools		Th	ere is no safe	place.
Medical clinic	Other			her:	
Health department					
Urgent care center					

#### There are enough options for physical activity in this community.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### Other:

health insurance, etc.)

# In the last 12 months, have you received a flu shot or nasal spray?

Hospital Emergency Room

Free Clinic (e.g. Safety Net

Clinic, Clinics that don't require

Yes
No

## This community values physical activity.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### I can access the healthcare I need in this community.

#### Nutrition

None Once

Twice

Three times

Four or more times

Overall, I eat healthy foods.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

### In a typical day, how many times do you eat fruit and/or vegetables?

#### This community values healthy eating.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### I can access the healthy food I need in this community.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### Are you often concerned about having enough food for you and/ or your family to eat?

Yes

No

Yes

No

Smoking/Tobacco

tobacco products?

Do you currently smoke/use

# help if you wanted to quit? Not applicable: I don't want to quit

Not applicable, I doll't want to quit
Church
Doctor
Health Department
KS Quitline
Pharmacy
Private counselor/therapist
l don't know
Other

If yes, where would you go for



## If you don't eat enough fruits and vegetables (2 cups of each) on a typical day, what are the reasons you do not? Select up to three. Not applicable; I eat enough fruits and vegetables.

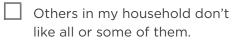
It costs too much.
I don't have enough time to

grocery store

i don chave e	nough time to
purchase and	prepare them.

I don't know how to
 cook them.

1	I don't like all or some of the
	healthy foods.



I have dietary restrictions due a medical condition.

I have dietary restrictions due to religious beliefs/customs.

Other

#### **Overall Health Needs**

#### What are the top three needs related to physical health in your community?

Healthcare assistance for

Healthcare assistance for

Increased health education/

disease prevention, etc.)

Increased number of

healthcare providers

prevention (e.g., healthy eating,

veterans/military

older adults

### MENTAL HEALTH

#### How would you describe your overall mental health?

ur community?			-	Very		
Access to healthy food options	Poor	Fair	Good	Good	Excellent	Not Sure
Affordable health insurance	1	2	3	4	5	0
Affordable health services	Do you cons professional health is not	when your			re do you go 1 your menta	
Affordable prescriptions	Yes	9			unity mental center	
Availability of transportation for health services	No My ment	tal health is		Fort R	iley	
Children health services	always g	iood.		Hospit	al emergency	room
Dental care options				Private	e practice	
Facilities for physical activity (including parks, trails, rec centers)				Other		

This community has adequate mental health services for people who need them.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### **Overall Mental Health Needs**

What are the top three needs related to mental health in your community? Affordable health insurance that includes mental healthcare

Maternal health services	Affordable mental	Increased mental health education/prevention
Prevention of infant mortality		
Substance abuse prevention/	☐ Affordable prescriptions	Increased number of mental healthcare providers
treatment	Availability of transportation for mental health services	Substance abuse prevention/
Tobacco use cessation (quitting) services	Children mental health services	treatment
Other		Other
	High quality mental health services	

#### A16

#### **Social Issues**

Yes

No

Do you or anyone in your household have a substance use issue (e.g., drink too much alcohol, have a problem with legal or illegal drugs)? Excluding mental illness, do you or anyone in your household have a physical or developmental disability?

Yes
NO

Do you or anyone in your household currently experience domestic violence (e.g., violence between adult partners)? Are you or anyone in your immediate family currently homeless (e.g., no permanent place to live on a daily basis)?

Yes	Yes
No	No

Have you personally experienced or witnessed discrimination in this community based on any of the following? Check all that apply. Also, please check if the discrimination occurred in one of the settings listed below (i.e. housing, public accommodation, education).

		Setting		
	Discrimination based on:	In Housing	In Public Accommodation (e.g., retail stores, service establishments, educational institutions, recreation facilities, etc.)	In Employment
Race				
Religion				
Ethnicity				
Sexual Orientation				
Age				
Gender				
Gender Identity				
Disability				

#### Please choose the top three social issues that are of most concern in your community:

Adult dr		Discrimination	Hunger	Property crime	Youth drug or alcohol use
Child physical	or	Domestic violence	Inattentive driving	Suicide	Youth/gang violence
sexual al		Drinking and driving	Manufacture or selling	Teen pregnancy	Other
Cybercri (includir identity	Ig	Elder abuse	of drugs	Violent crime (including	
online so phishing	cams,	Homelessness	Poverty	assault, rape, murder)	

#### What are the top three needs related to social issues in your community?

you	ır community?	grandparent/guardian of someone under 18?	activities due to bullying?
	Affordable legal services	Yes	No No
	Availability of employment	No	Are you satisfied with non-school
	Availability of mental health services	If yes: Are you a single parent?	activities for children in your community?
	Availability of services for people with low incomes	Yes No	Yes No
	Availability of support groups/ peer support	Do any of your children have a developmental disability?	Have you ever quit or lost a job because you did not have the childcare you needed?
	Better enforcement of laws	Yes No	Yes No
	Changing local laws Child care	Do any of your children have a physical disability?	Do you use childcare for your children?
	Housing options for homeless persons	Yes No	Yes No
	Options for arts and entertainment activities	Do any of your children have a chronic disease?	If yes, what type of childcare do you use? Check all that apply.
	Positive activities for youth	Yes No	Licensed Day Care Home
	Services for domestic/sexual violence survivors	Have any of your children been diagnosed with a mental illness or	Group Day Care Home
	Services for older adults	emotional disturbance?	Child Care Center
	Services for persons with disabilities	Yes No	Preschool     Afterschool/Latchkey Program
	Services to veterans/military	Are you satisfied with the education your children are	Relative or Friend
	Substance abuse prevention or treatment	receiving?	Other
	Other	No	
		Are your children home-schooled?	
		Yes	

**Children and Youth** 

Are you a parent or custodial

Have any of your children been

afraid to attend school/other

activities due to bullying?

No	
----	--



If yes,	Do you receive any type of childcare assistance?
Are you satisfied with the	Yes
quality of the childcare you currently receive?	
Yes	└ No
No	Is your childcare affordable?
Are you satisfied with the childcare options that are	Yes
available to you?	No No
Yes	
No	

In your opinion, how well does your community generally meet the needs of children and/or adolescents in the following areas?

	Very Poor	Poor	Fair	Good	Excellent	
Prenatal Care (pregnancy)	1	2	3	4	5	Don't Know
Postnatal Care (birth through first year)	1	2	3	4	5	Don't Know
Access to Childcare for Children 0-5	1	2	3	4	5	Don't Know
Quality of Childcare for Children 0-5	1	2	3	4	5	Don't Know
Parental Support/Training	1	2	3	4	5	Don't Know
Support for Single Parents	1	2	3	4	5	Don't Know
Quality Education	1	2	3	4	5	Don't Know
College or Career Preparation	1	2	3	4	5	Don't Know
Needs of Children/Youth with Disabilities	1	2	3	4	5	Don't Know
Dental Health	1	2	3	4	5	Don't Know
Mental Health	1	2	3	4	5	Don't Know
Physical Health	1	2	3	4	5	Don't Know
Violence/Bullying Prevention	1	2	3	4	5	Don't Know
Recreational Opportunities	1	2	3	4	5	Don't Know
Volunteer Opportunities	1	2	3	4	5	Don't Know
Needs of Mothers Whose First Language Isn't English	1	2	3	4	5	Don't Know
Needs of Children Whose First Language Isn't English	1	2	3	4	5	Don't Know
Basic Needs of Low-Income Children/Youth	1	2	3	4	5	Don't Know
Employment for Youth	1	2	3	4	5	Don't Know

#### What are the top three needs related to children (0-12) in your community?

Afterschool programs	Early childhood	Medical care	Parenting education/	Services for children with physical or developmental
	intervention	Mental	skills development	disabilities
Bullying prevention	programs (e.g., Head	health care	Public	Transportation
Childcare for	Start, etc.)	Mentoring programs	education	Other
children 0-5	Financial	for children	Recreational	
Dental care	assistance to families (for nutrition, childcare, housing, etc.)	Nutrition programs (e.g. WIC, free and reduced lunch, etc.)	activities	

#### What are the top three needs related to adolescents (13-18) in your community?

Access to higher education	Medical care	Recreational activities
Access to technology/ computers	Mental health care	Services for children with physical or developmental
Appropriate internet/	Mentoring programs for adolescents	 disabilities
technology use (e.g., sexting, cyberbullying, etc.)	Obesity prevention	Substance abuse prevention/treatment
Bullying/relationship violence prevention	Parenting education/skills development (for parents	Teen pregnancy prevention/ Sex education
Cultural enrichment	 of adolescents)	Transportation
opportunities Dental care	Opportunities to contribute to the community (e.g., volunteering, leadership	Tutoring
Employment opportunities	development, participation in community decision-making)	Workforce training for teens
for teens Financial skills training	Public education	Other

#### Education

#### How would you rate K-12 education in your community in the following areas?

	Very Poor	Poor	Fair	Good	Excellent	
The quality of the school your child attends.	1	2	3	4	5	N/A
The overall quality of schools.	1	2	3	4	5	Don't Know
The quality of teachers.	1	2	3	4	5	Don't Know
The amount of parental involvement in the child's education.	1	2	3	4	5	Don't Know
The availability of support resources at the school (counselors, tutors, etc.).	1	2	3	4	5	Don't Know
The availability of up-to-date technology for students to use.	1	2	3	4	5	Don't Know
The availability of extracurricular programs, clubs, or sports.	1	2	3	4	5	Don't Know
The amount of money a school spends per student.	1	2	3	4	5	Don't Know
The quality of school buildings.	1	2	3	4	5	Don't Know
The quality of curriculum.	1	2	3	4	5	Don't Know
Availability of afterschool programs.	1	2	3	4	5	Don't Know

#### What are the top three needs regarding education in your community?

Addressing bullying	Increased parental involvement
Addressing fighting, violence, and/or gangs	Increased quality of curriculum
Addressing overcrowding in schools	Increased quality of instruction by teachers
Addressing the condition of school buildings	Increased student discipline
Availability of physical activities and sports	More artistic and musical activities
Availability of quality computers and technology	More extracurricular activities
Equality in funding among school districts	More involvement of students in decision-making
Getting and keeping good teachers	Raising standardized test scores
Increased amount of time students spend in school	Updated textbooks
Increased expectations for student achievement	Other



### Aging

This community	is supportive	Are you a caregiver for an older adult (spouse, parent, etc.)?			
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Yes No
1	2	3	4	5	
The necessary se	enior services	are available in th	is commun	iity.	If yes, are you receiving the services you need?
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Yes No
1	2	3	4	5	
					If no. what services do vou need?
Choose the top t	hree needs fo	r older adults in y	our comm	unity?	
Access to da	ily meals	Financ	es/Income		Mental health services
Affordable h	ousing	Health	insurance		Personal care services
Affordable p	rescriptions	Home	health care	e options	Respite services for caregivers
Assisted livir	ng options	Hospic	ce		Safety
Caregiver su	pport		endent livin		Substance abuse
Day program	าร		nent comm		Transportation
Dental care				g in the home	Utility assistance
Ease of mob			services		Vision care
the commun	ity	Long t	erm care o	ptions	Other
Elder abuse		Medica	al care		
Employment	:		ry care opt ntia suppor		

#### Are you 60 years old or older?

Yes

No

#### If yes, how important are the following in your life right now?

	Not Important	Somewhat Important	Moderately Important	Important	Very Important
Staying mentally sharp	1	2	3	4	5
Spending time with family and friends	1	2	3	4	5
Learning new things	1	2	3	4	5
Receive or continue to receive Social Security benefits	1	2	3	4	5
Receive or continue to receive Medicare benefits	1	2	3	4	5
Having enough money to meet daily living expenses	1	2	3	4	5
Having adequate health insurance coverage	1	2	3	4	5
Affording the cost of out-of-pocket health care expenses and prescription drugs	1	2	3	4	5
Having quality long-term care for yourself or a family member	1	2	3	4	5
Staying healthy	1	2	3	4	5
Being able to stay in your own home	1	2	3	4	5
Protecting yourself from consumer fraud	1	2	3	4	5
Saving money for everyday expenses like groceries, gasoline, and dining out	1	2	3	4	5
Having enough money to live comfortably and do the things you want to do	1	2	3	4	5
Having access to public transportation	1	2	3	4	5
Enforcement of quality standards for nursing homes	1	2	3	4	5
Being able to volunteer in my community	1	2	3	4	5
Being able to use my cell phone with confidence	1	2	3	4	5
Being able to go online to use email and manage my finances with confidence	1	2	3	4	5

#### Housing

#### Which of the following best describes your current living arrangements?

I am the only person in the household.

or roommates.

I live in my parents' home.

I live with other family, friends,

I have no place to live.

I live with my spouse/partner/
significant other.

ls y	our current housing acceptable to you?	Transportation
	Yes	How many operating vehicles (cars, trucks, vans, motorcycles) do you have in your household that are
	No	used for personal transportation?
Do	you own your home or residence?	None None
	Yes	One
	No	Two
		Three
lf no	o, would you prefer to own your residence?	Four or more
	Yes	
	No	What method of transportation do you normally use to go to work, school, or your most
Do	you think there is a lack of affordable housing in	frequent destination?
you	r community?	Car/truck/van - drive alone
$\square$	Yes	
	No	Carpool/Ride with others
	at are the top three needs related to housing in	Motorcycle
you	r community?	Bicycle
	Assistance with property repair and maintenance	Walk
	Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)	Public transportation
	Education about financing options	Taxi
	for homeownership	Specialized transportation (e.g. for people
	Education about responsible homeownership	with disabilities)
	Higher quality rentals	Other
	Historic preservation	
	Low-income housing assistance (Section 8)	
	Neighborhood improvement programs	Do issues with transportation regularly prevent you from doing what you need to do?
	Senior housing	Yes
	Variety of affordable housing options	No
	Other	

#### What are the top three transportation-related needs in your community?

Address texting and driving	Improve public transit service
Build new roads	Improve traffic signals
Develop a pedestrian friendly transportation system to make areas more walkable (improve	Increase options for overnight public parking
sidewalks, crosswalks, signals, etc.)	Increase specialized transportation services for people with disabilities and/or special needs
Expand and improve the bike route system (bike paths, bike lanes) to increase the number of people who bike as a form of transportation	Provide maintenance and improvements to existing facilities (intersection or interchange improvements, pavement of gravel roads, bridge
Expand local taxi services	repairs, etc.)
Improve driver education	Widen existing roads
Other	

#### Infrastructure

#### How would you rate the following public services in your community?

	Very Poor	Poor	Fair	Good	Excellent	
Animal control	1	2	3	4	5	N/A
Emergency preparedness (e.g., dealing with natural disasters, etc.)	1	2	3	4	5	N/A
Emergency services (e.g., ambulance, paramedics)	1	2	3	4	5	N/A
Fire department	1	2	3	4	5	N/A
Police or Sheriff's department	1	2	3	4	5	N/A
Road maintenance	1	2	3	4	5	N/A
Trash pick-up	1	2	3	4	5	N/A
Quality of drinking water	1	2	3	4	5	N/A
Snow removal	1	2	3	4	5	N/A
Maintenance of public grounds (e.g., parks, government buildings)	1	2	3	4	5	N/A
Air quality	1	2	3	4	5	N/A
Clean environment	1	2	3	4	5	N/A
Library facilities	1	2	3	4	5	N/A
Parks and recreation facilities	1	2	3	4	5	N/A
Code enforcement for private properties	1	2	3	4	5	N/A
Paths/safe options for biking and walking	1	2	3	4	5	N/A
Crime prevention activities	1	2	3	4	5	N/A
Handicapped accessibility of public facilities	1	2	3	4	5	N/A
Internet access	1	2	3	4	5	N/A

#### **Economics and Personal Finance**

In a typical month, how difficult is it for you to cover your expenses and pay all your bills?

Very Difficult	Difficult	Neither Easy Nor Difficult	Easy	Very Easy
1	2	3	4	5

Do you make enough money to save/plan for the future?

Yes	
No	

In the past 12 months, have you or your household experienced a large drop in income which you did not expect?

Yes No

# Do you make enough money to support yourself and/or family?

Yes

### No

#### Do you feel like your skills and/or education are being fully used in your current job or in retirement?

Yes		
No		

I don't have a job

### There are a variety of jobs available in my community.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

There are enough well-paying jobs in my community.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### There are opportunities for increasing my job skills.

Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
2	3	4	5
	Disagree 2	Disagree Agree Nor Disagree	Disagree Agree Nor Agree Disagree

#### Property taxes in my community are reasonable.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### Sales taxes in my community are reasonable.

Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1	2	3	4	5

#### Where do you most often purchase the following goods or services? Check all that apply.

	In My Community	Outside My Community	Online	N/A
Groceries				
Clothes				
General household supplies				
Banking services				
Pet supplies				
Legal services				
Insurance				
Medical				
Dental				
Car/Truck purchase				
Office/School supplies				
Grooming and salon service				
Tools and Hardware				
Appliances				
Electronics				
Restaurant/Entertainment				
Arts				

#### What are the top three economic/personal finance needs in your community?

Access to education	Employment opportunities for older adults
Assistance with searching for and gaining employment	Employment opportunities for youth
	Low-cost resources to help with personal
Availability of college or career preparation in schools	 finance management
Availability of jobs	Small business development
Availability of low-interest loans	Workforce development training
	Other
Emergency assistance to individuals or families (e.g., for utilities, food, rent, etc.)	

# DEMOGRAPHIC

DEMOGRAPHIC INFORMATION	What best describes your current marital status? Single, never married	What is your employment status? Self-employed		
Gender:	Married	Working more than one job		
Male	Married	Employed full-time (one job)		
Female	Divorced	Employed part-time		
Other (please specify)	Widowed			
	Not married, but	Homemaker		
Racial Categories (Check one): White	living together	Retired		
	Domestic partnership	Disabled		
Asian	or civil union			
African American/Black	What was your total household	Unemployed for 1 year or less		
American Indian or	income last year, before taxes?	Unemployed for more than 1 year		
Alaska Native	Less than \$10,000	i year		
Native Hawaiian	\$10,000 to \$14,999	How many people in your		
or Pacific Islander	15,000 to \$24,999	household are working?		
Multiracial	\$25,000 to \$34,999			
Other (please specify)	\$35,000 to \$49,999			
	\$50,000 to \$74,999	What county do you currently work in?		
	\$75,000 to \$99,999			
Ethnic Category (Check one):	\$100,000 to \$199,999	Riley		
Hispanic or Latino	\$200,000 or more	Pottawatomie		
Not Hispanic or Latino		Other		
What is the highest level of school,	How many people does this income support?	Are you a student taking courses		
college or vocational training that		for credit?		
you have finished?		Yes		
Less than 9th grade	Have you been a member of the	No		
9-12th grade, no diploma	Armed Services/Military?	If yes:		
High school graduate	Yes	Part-time		
(or GED/equivalent)	No	— Full-time		
Associate's degree	If yes, what is your current status?			
or vocational training	Active			
Some college (no degree)	Retired			
Bachelor's degree	Disabled or Injured			
Graduate or professional degree	Inactive			



# Which of the following best describes the school you

How do you normally get your news about community events? Check all that apply.

Four-year college or university	Newspaper
	Community flyers
Two-year community college	Social media (Facebook, Twitter, etc.)
Vocational, technical, or trade school	Newsletters
	Email/RSS
Other	Friends/Family
Do you participate in a religious/	Internet
faith community?	Radio
Yes	TV/local cable
No	

# Do you have access to the Internet at your home or residence?

### **OTHER COMMENTS**

Please share any additional comments about the community here:

vou	access the Int
Whi	ch of the best
	No
	Yes

# you access the Internet? Check all that apply.

describes how

- Home Computer
- Work Computer
- Public Computer
- Mobile (cell phone, tablet, etc.)
- I don't access the Internet

Thank you for your participation.

### **INTERVIEWER INSTRUCTIONS:**

Introduce self and provide overview of the community assessment process (i.e., survey is completed, interviews are being conducted with key people in community, focus groups to be held next month). Explain the consent form and have the interviewee sign it. Ask the following questions but allow respondent to focus on whatever topic he/she chooses regardless of his/her noted area of expertise/interest.

- 1. Please provide us with some background on what you do in the community professionally.
- 2. How long have you been in this position/field?
- 3. Please provide us with some background on what you do in the community personally.

For the following questions, please think about the area(s) that are most closely related to your professional or personal interests and answer based on them. (Confirm with interviewee what area/ expertise he/she thinks is primary for him/her). This is what it means when I refer to "your area or expertise" in the following few questions. At any time, feel free to add comments about the community in general. But there are more general questions at the end of this survey as well.

- 4. How would you describe the current condition related to your area(s)?
- 5. What are the strengths?
- 6. What are the concerns?
- 7. When you think about the future of (fill in their area) what opportunities do you see?
- 8. When you think about the future of (fill in their area) what concerns you the most?
- 9. Over the next five years, what do you think could be done to address this?

The next questions focus on your experience in the community in general. Your responses may be very similar to those you've already given. That's O.K.

10. Thinking about the community in general (not necessarily related to your area):

a. What are the strengths of the community?

- b. What are the needs/challenges in
- the community?

Finally, just for the purposes of understanding if your perspective is reflected in the community needs assessment survey:

Did you take the Community Needs Assessment?
 YES NO

# Appendix D: Riley County Key Informant Expertise/Interest Grid

The following grid was created by CCSR to assist the sponsoring organizations of the Riley County Community Needs Assessment to select a representative group of key informants for the purpose of interviewing. The grid is comprised of areas of interest or expertise that are consistent with the topics in the survey and which help ensure representation of various populations within the community.

Place a check mark in the boxes that correspond with the areas of expertise/interest/involvement for each potential interviewee to ensure broad representation.

Interviewee Name	Name	Health	Mental Health	Social Issues	Children/ Youth	Education	Aging	Housing	Transport	Infrastruct	Econ/Pers Finance	Race/ Ethnicity	Low Income	Disability	Military	Other (e.g., rural, LGBT, 18- 24, etc.)

# **Appendix E: Riley County Focus Group Questions**

Introduce researchers and explain purpose of focus group (in the context of larger community survey). Explain consent form and ask participants to sign. Researchers write the key findings/results (no more than 10) from the community needs assessment on flip chart page and provide brief overview for participants. Researchers write down all comments on flip chart pages and ask participants to confirm that the notes are accurate.

#### **QUESTIONS:**

- 1. Are these findings/results consistent with your experiences in the community? What similarities/differences are there between your experiences and what is presented here?
- 2. What stands out to you in these findings/results?
- 3. Based on these findings and/or your experience, what do you see as the biggest strengths in the community?
- 4. Based on these findings and/or your experience, what do you see as the biggest needs in the community?

# **Appendix F: Additional Comments About the Community**

#### Table 127. Additional comments about the community.

Answer	Frequency	Answer	Frequ
Positive attitude towards the community	82	Concerns about how taxes are being spent by local	12
Affordable housing/ rentals	30	government Survey was too long	9
Cost of living is too high	19	Enhance mental health services	9
Lower property	17	Income inequality	9
taxes	17	Lower sales taxes	9
Need a community	16	Road maintenance	8
recreation center	10	Increase low income services	7
pedestrian infrastructure	14	Enjoy the current size of the city/	7
Enhance public	13	growth concerns	
transportation	10	Concerns about	
More employment opportunities	13	community leadership	7
Increase activities	12	strategies	
for youth	14	Community indoor pool	6

Answer	Frequency
Concerns about losing social services	6
Increase arts and entertainment	5
Increase sport facilities for youth	5
Internet services for rural areas	5
Enhance support for special needs children	4
Hunger	4
Improve school curriculums	4
Increase day activities for seniors	4
Increase recreational activities	4
Need living wages	4

Answer	Frequency
Priority for local business over chains	4
Regulations for rental owners	4
Rent control	4
Binge drinking	3
Consistent law enforcement	3
Great place to retire	3
Higher wages needed	3
Homelessness	3
Increase community knowledge of available services/ events	3
Increase local business development	3
Increase the number of parks	3
Restore historic buildings	3
Thanks for doing the survey	3
Too much focus on KSU and the military when making decisions	3
Access to health insurance	2
Affordable child care	2
Change the high school mascot	2
Concerns about current local politics	2
Concerns about losing sense of community	2
Decrease administrators salaries	2

Answer	Frequency
Decrease police budget	2
Decrease the duplication of services	2
Downtown looks great	2
Enjoy the senior center	2
Financial education	2
Great schools	2
Increase healthy food options	2
Improve support for technical college	2
Improve traffic flow	2
Increase activities for low income youth	2
Increase disability services	2
Increase income and business taxes	2
Increase local news coverage	2
Increase priorities to sustain natural areas	2
Increase quality of parks	2
LBGT discrimination	2
Manhattan is the priority, other communities are neglected	2
More focus on the middle class	2
More preschool options	2
Need children's mental health services	2
Overcrowding in the schools	2
Quality rentals	2

Answer	Frequency
Too much spending on sports	2
Volunteers to help older adults with home maintenance	2
Access to insurance that covers mental health services	1
Affordable hearing aids	1
Affordable long term care	1
Affordable medical care	1
Animal waste	1
Another hospital	1
Assistance for people who are just above the poverty line	1
Balancing the university needs with community needs	1
Better community planning	1
Better paying jobs for people with degrees	1
Bullying	1
Community education around cycling	1
Comprehensive sex education/ pregnancy prevention	1
Concerns about transient workers (military, college students) affect on wages	1
Decrease urban sprawl	1
Drugs in the schools	1

#### Table 127. Additional comments about the community. (Continued)

Answer	Frequency
Employment opportunities for older adults	1
Empowerment, engagement, and collaboration are needed	1
Enjoys Arts in the Park	1
Enjoys benefits receiving through affordable care act	1
Enjoys Chili Crawl	1
Enjoys current services	1
Enjoys the range of arts and entertainment	1
Home care for older adults	1
Home maintenance needs improvement	1
Improve art education	1
Improve coordination between service providers	1
Improve gifted education	1
Improve high school environment	1
Improve school buildings	1
Improve school lunches	1
Improve snow removal	1
Improve traffic law enforcement	1
Increase afterschool options	1
Increase assistance for seniors	1

Answer	Frequency
Increase child	1
care options	
Increase funding for schools	1
Increase parking	1
Increase rental	
spaces/meeting	1
rooms for groups	
Increase services	1
for immigrants	
Increase student	
housing options on	1
campus	
Increase support for Habitat for	1
Humanity	I
Increase teacher	
salaries	1
Increase tutoring/	1
mentoring	I
Increase variety of	1
community groups	
Increase voting	1
Increase women	
and minorities in	1
decision making roles	
Inpatient care/	
suicide prevention	1
Lack of gun control	1
Less government	
funding	1
Limited volunteer	1
opportunities	1
More grocery	
stores for rural	1
communities	
More hospital	1
services	
Need more	1
specialized physicians	I
Need second high	
school	1

Answer	Frequency
Overregulation	1
People with low	
incomes are	
underrepresented	1
in community	
decisions	
Problems with the	
survey drag and	1
drop	
Quality psychiatrists	1
Racial	1
discrimination	
Recycling services	1
Religious	1
discrimination	
Revitalize homes	1
downtown	
Sexual assault	1
services	
Specials too high	1
Texting and driving	1
Too much spending	1
on animals	
Underfunded social	1
services	
Need urgent care	1

# **Appendix G: Community Resources**

With the wealth of data obtained from the Comprehensive Community Needs Assessment as well as other local assessments, the community will embark on addressing and improving community health by engaging in a structured community health improvement planning process. Community Health Improvement Planning is the process of the community setting goals to link identified health needs with existing community assets and strengths. The following are many, though not all, of the assets and resources available in Riley County to address several of the prominent health issues in the community as well as the other topical sections covered in this Comprehensive Community Needs Assessment.

#### **General Community Assets**

- Big Lakes Developmental Center (https://biglakes.org)
- Catholic Charities of Northern Kansas (http://www.ccnks.org)
- Flint Hills Human Rights Project (www.fhhrp.com)
- Flint Hills Volunteer Center (www.flinthillsvolunteercenter.com)
- Greater Manhattan Community Foundation (www.manhattancf.org)
- HandsOn Kansas State (www.k-state.edu/leadership/programs/handson)
- Homecare & Hospice (www.homecareandhospice.org)
- Kansas Legal Services (www.kansaslegalservices.org)
- Konza United Way (www.konzaunitedway.org)
- League of Women Voters of Manhattan/Riley County (http://lwv.manhattanks.org)
- Manhattan Alliance for Peace & Justice (www.mapj.org)
- Manhattan Fire Department (www.cityofmhk.com/fire)
- Manhattan Public Library (www.mhklibrary.org)
- Ogden Friendship House (http://ogdenfriendshiphouse.org)
- Riley County Council of Social Service Agencies (RCCSSA)
- Riley County Emergency Medical Services (www.rileycountyems.org)
- Riley County Fire District 1 (http://www.rileycountyks.gov/217/Fire-District-1)
- Riley County Police Department
   (www.rileycountypolice.org)
- Shepherd's Crossing (www.shepherdscrossing.info/)
- The Crisis Center (www.thecrisiscenterinc.org)
- The Salvation Army (http://salarmymokan.org)
- UFM Community Learning Center (www.tryufm.org)

#### Aging

- Homecare & Hospice (www.homecareandhospice.org)
- Leonardville Nursing Home (http://www.leonardvillenh.org/)
- Manhattan Homestead Assisted Living (http://www.midwest-health.com/assisted-living/)
- Meadowlark Hills Retirement Community (www.meadowlark.org)
- North Central Flint Hills Area Agency on Aging (http://www.ncfhaaa.com/)
- Riley County Council on Aging (http://www. rileycountyks.gov/1143/Riley-County-Council-on-Aging-RCCOA)
- Riley County Seniors' Service Center (www. seniorsservicecenter.org)
- Three Rivers, Inc. (http://www.threeriversinc.org/)
- Stoneybrook Health Center (http://midwesthealth.ppi.net/Residence/ StoneybrookHealthCenter/)
- Via-Christi Village (www.viachristi.org/locations/seniors/manhattan)

#### **Children & Youth**

- Big Brothers Big Sisters of Riley County (http://riley.kansasbigs.org)
- Boys and Girls Club of Manhattan (www.bgclubmanhattan.com/)
- K-State Center for Child Development (www.k-state.edu/ccd/)
- Parents As Teachers (http://www.usd383.org/manhattan-ogden/usd-383schools/early-learning-programs/parents-as-teachers)
- Raising Riley RIGHT (http://raisingriley.com/)
- Riley County Child Care Licensing (www. rileycountyks.gov/1245/Child-Care-Licensing)
- Stepping Stones Child Advocacy Center (http://sunflowercasa.org/cac/)

- Sunflower Bridge Child Exchange & Visitation Center (http://sunflowercasa.org/cevc-2)
- Sunflower CASA Project, Inc. (http://sunflowercasa.org)
- Wonder Workshop (http://wonderworkshop.org/)

#### **Economic Development**

- Flint Hills Regional Council (http://flinthillsregion.org)
- Manhattan Area Chamber of Commerce (http://www.manhattan.org)

#### Education

- Blue Valley USD 384 (www.usd384.org)
- Flint Hills Christian School
   (http://flinthillschristianschool.org/)
- Manhattan Area Technical College (www.manhattantech.edu)
- Manhattan Catholic Schools (http://www.manhattancatholicschools.org/)
- Manhattan Christian College (http://www.mccks.edu/)
- Manhattan/Ogden USD 383 (www.usd383.org)
- Riley County USD 378 (www.usd378.org)
- Kansas State University (www.k-state.edu)

#### Healthcare

- Community Health Ministries (www.wamegochm.org)
- Flint Hills Community Clinic (http://flinthillscommunityclinic.org/)
- Irwin Army Community Hospital (http://iach.amedd.army.mil/)
- Konza Prairie Community Health Center Dental Clinic (www.konzaprairiechc.com/manhattan.htm)
- K+STAT Urgent Care (http://kstaturgentcare.com/)
- Lafene Student Health Center (www.k-state.edu/lafene/)
- Manhattan Area Technical College Dental Hygiene Clinic (www.manhattantech.edu/ programs/dental-hygiene)
- Manhattan Surgical Center (www.manhattansurgical.com)
- Manhattan Urgent Care (http://urgentcaremanhattanks.com)
- Mercy Regional Health Center (www.via-christi.org/ mercy-regional)
- Riley County Health Department (www. rileycountyks.gov/health)
- The Women's Health Group (http:// thewomenshealthgroup.com/)

#### Housing

- Housing & Credit Counseling, Inc. (www.hcci-ks.org)
- Manhattan Area Habitat for Humanity (http://mahfh.org)
- Manhattan Area Housing Partnership
- Manhattan Emergency Shelter, Inc. (www.mesikansas.org)
- Manhattan Housing Authority (www.mhaks.com)
- Mental Health & Substance Abuse
- Big Lakes Developmental Center (www.biglakes.org/)
- Central Kansas Foundation (www.c-k-f.org)
- Pawnee Mental Health Services, Inc. (www.pawnee.org/)
- Raising Riley Right Behavioral Health Consultation (http://raisingriley.com/index.php?\_p\_=43)
- The Crisis Center (www.thecrisiscenter.org/)

### Nutrition

- Flint Hills Breadbasket (http://breadbasket.manhattanks.org)
- Flint Hills Farmers Market
- Friendship Meals
- Harvesters (www.harvesters.org/)
- Hy-Vee Dietician/Classes (http://www.hy-vee.com/ stores/dietitian/default.aspx?s=530)
- Manhattan Farmers Market (http://www.manhattanfarmersmarket.org/)
- Mercy Light (http://www.viachristi.org/location/ mercy-regional-health-center/services/weight-loss)
- People's Grocery Community Support Agriculture (CSA) (www.peoplesgrocerycoop.com)
- Riley County K-State Research & Extension (www.riley.ksu.edu/p.aspx)

### **Physical Activity**

- City of Manhattan Bicycle Advisory Committee (http://www.ci.manhattan.ks.us/?nid=1081)
- City of Manhattan Parks & Recreation Department (http://www.ci.manhattan.ks.us/index.aspx?NID=21)
- Douglass Community Center (http://cityofmhk. com/index.aspx?nid=2197)
- Flint Hills Wellness Coalition (https://www.facebook.com FlintHillsWellnessCoalition)
- Private fitness clubs and gyms
- Transportation
- Flint Hills Area Transportation Agency (www. rileycountyks.gov/795/ATA-Bus)
- Flint Hills Regional Council (http://flinthillsregion.org/)

# **Sources of Data and References**

The following online sources were used in the compilation of secondary data. The references listed below were cited to support methodological approaches.

### **DATA SOURCES**

#### BRFSS (Behavioral Risk Factor Surveillance System)

http://www.kdheks.gov/brfss/ BRFSS2013/index.html

#### Centers for Medicare and Medicaid Services

http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CC\_Main.html

http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MedicareEnrpts/ Downloads/County2012.pdf

#### **Department for Children and Families**

http://www.dcf.ks.gov/Agency/Pages/ CountyPackets/2013-County-Packets-Excel.aspx

#### Flint Hills Regional Council

http://flinthillsregion.org/297/wichitastate-university-releases-manhattanhousing-market-forecast

#### Kansas Association of Community Action Programs Hunger Atlas http://www.kacap.org/

Resources/2012HungerAtlas/

#### Kansas Bureau of Investigation

http://www.kansas.gov/kbi/stats/ stats.shtml

http://www.kansas.gov/kbi/stats/docs/ pdf/2012\_DV\_Rape.pdf

#### Kansas Child and Family Well-being Indicators (KSU and Dept. for Children and Families)

http://www.dcf.ks.gov/Newsroom/ Documents/Childhood-Poverty-Task-Force/State%20of%20 the%20Family%20Report%20%20 Presentation%20by%20Dr%20 Jared%20Anderson.pdf Kansas Communities That Care Survey http://kctcdata.org/domain. aspx?code=10081

# Kansas Department for Aging and Disability Services

http://www.kdads.ks.gov/Adult\_Care\_ Homes/Facility\_Reports/Facility\_ Report\_Index.html

# Kansas Department of Health and Environment

http://www.kdheks.gov/hci/as/2012/ AS\_2012.pdf

http://www.kdheks.gov/hci/adol\_ teen\_preg/Adolescent\_Teenage\_ Pregnancy\_12.pdf

#### **Kansas Health Matters**

http://www.kansashealthmatters.org/ modules.php?op=modload&name=NS-In dicator&file=index&topic=0&topic1=Coun ty&topic2=Riley&group=category&regna me=Riley

#### Kansas Kids Count http://kac.org/county-fact-sheets/

Kids Count Data Center http://datacenter.kidscount.org/ data#KS/5/0

KS Cancer Registry http://www.kumc.edu/kcr/zsearch.aspx

#### Robert Wood Johnson Foundation County

#### Health Rankings

http://www.countyhealthrankings. org/app/kansas/2014/rankings/riley/ county/outcomes/overall/snapshot

# United States Department of Agriculture

http://www.ers.usda.gov/dataproducts/food-environment-atlas/goto-the-atlas.aspx#.VGYtAIfF\_OX

US Bureau of Labor Statistics

http://www.bls.gov/lau/laucntycur14.txt

#### US Census Bureau American Community Survey

http://factfinder2.census.gov/ faces/nav/jsf/pages/searchresults. xhtml?refresh=t#none

#### US Census Bureau Small Area Income and Poverty Estimates

http://www.census.gov/did/www/saipe/ data/

#### US Census Bureau State and County QuickFacts

http://quickfacts.census.gov/qfd/ states/20/20161.html

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Guest, G., MacQueen, K.M., & Namey, E.E. (2012). Applied thematic analysis. Los Angeles, CA: Sage.

Patton, M.Q. (1999). Enhancing the quality and credibility of qualitative analysis. Health services research, 34, 1189 - 1208.

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WSU Center for Community Support & Research partners with communities and organizations to strengthen Kansas through education, leadership development, facilitation, and research.

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That all Kansans use their talents and experiences to create thriving communities.

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