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Community Report Card



The Delta Strategy is a partner with
Grand Rapids Community College

Improving by the Numbers . . .

2004 – 2005

A Tale of Two Cities: The Community Survey reveals disparities, but community leaders offer hope in their stories



PHOTO BY MATT MATHEWS

Also in this issue:

- *Did Kent County make the grade? Some say yes. See page 4 for "the rest of the story."*
- *Are you better off financially this year than last year? Find out how others responded on page 10.*
- *How does race influence the health rating? See page 14 for details.*

TO CONTACT US FOR MORE INFORMATION ON HOW TO PARTICIPATE:

Call: 616.234-4316 Fax: 616.234.3929 email: info@deltastategy.org
Check our website: www.deltastategy.org for general information.



Our process:

- A clear vision and goals tell us where we want to be
- Diverse leadership from across the community guides us to our vision
- Continuous improvement and disciplined problem-solving actually help us address the problems
- Measurable results get us closer to the vision
- And most important, the trust and teamwork that come from real collaboration are the foundation on which The Delta Strategy process is built.

Mission: To build the capacity of the community to solve our challenging and complex problems by engaging in the Delta community improvement process with people and organizations seeking change.

Vision: The Delta Strategy serves as a catalyst for social change by fostering community learning and problem-solving. We help build a community in which all members and sectors are empowered to participate equally and effectively in creating a better future for all.

Core Values: Community learning and dialogue. We believe that open, respectful community dialogue and learning take time and constitute real action. We help to create opportunities for open dialogue and learning, thus empowering the community to learn together, forge a shared sense of the issues, build consensus, and design and implement innovative and sustainable solutions. Delta Strategy facilitators remain neutral: we help to design and lead processes, but leave it up to the community to determine the results.

Inclusiveness. The Delta Strategy promotes community problem-solving strategies that maximize participation of the whole community. We respect and seek diversity – in ethnic and racial background, age, spirituality, socio-economic status, education, and other characteristics – because we value the voice of each individual and varied perspectives.

Collaboration. The Delta Strategy helps to link community capabilities – individuals, organizations and institutions – within and across sectors and systems to foster a climate of collaboration in addressing community issues.

Accountability / Impact. The Delta Strategy believes that tough, cross-sector community issues are solvable when all of the players are involved and committed to an effective problem-solving process. We monitor and measure our work and the work of the community in order to demonstrate the impact of the work and to share our learnings with others. (This involves making implicit knowledge explicit).

These core values link to the Grand Rapids Community College's mission of providing the community with learning opportunities that enable people to achieve their goals. They also link to the Community Outreach, Community Partnerships, and Diversity outcomes GRCC seeks to achieve.

Shared Community Indicators

What are Indicators? Indicators are data that point out a condition or issue. They are measurements that show the combined effects of numerous actions and conditions. Progress toward community improvement can be measured by indicators.

Where are Indicators? The Community Research Institute (CRI), monitors local and regional social conditions and provides this information to the local nonprofit and philanthropic sectors as a one-stop shop for data about the Greater Grand Rapids community. The Institute helps organizations understand the evolving needs of the community, document these needs for grant applications, and measure the success of their various programs and initiatives. Indicators are available at the CRI website: www.cridata.org

Who Uses Indicators? An example is; The Delta Strategy uses indicators to chart change in a community improvement process addressing economic self-sufficiency of families. The United Way asks all of its partner agencies to use indicators to report their progress and outcomes.

HEALTH AND WELL-BEING Improve health and well-being of babies and children • Teen pregnancy • Infant mortality • Pre-natal care • Birth weight • Immunizations for young children • Lead poisoning in children • Improve physical and mental health and well-being of children, teens, adults and seniors • Causes of preventable hospitalization • Causes of death • HIV/AIDS and sexually transmitted diseases • Obesity • Smoking • Exercise and nutrition • Alcohol and drug use among teenagers • Suicide • Mental illness, substance abuse, developmental disabilities treatment • Providers of personal and household assistance to older adults • Older adults needing and receiving personal and household assistance • Ensure access to health care • Uninsured and underinsured residents • MIChild, Medicare/Medicaid, Kent Health Plan enrollments.

SAFE HOMES AND NEIGHBORHOODS Improve child safety • Child abuse and neglect • Improve family safety • Elder abuse • Improve neighborhood/community safety • Violent crimes by adults • Crimes by juveniles • Feeling safe in own neighborhood • Police response time.

ECONOMIC WELL-BEING Reduce poverty • Poverty rate • Improve access to economic/employment opportunities • Unemployment • Public transportation: unmet needs • Childcare costs • Subsidized childcare • Improve access to affordable housing • Housing wage • Housing expenditures of more than 30% of income.

EDUCATION AND DEVELOPMENT Ensure opportunities for early childhood development • Childcare: state licensed and accredited • Improve school achievement • School attendance • 8th grade graduates entering 9th grade • Class size • MEAP math and reading scores - 8th grade • Schools attended by end of elementary school • School spending per capita • Reduced-price and free lunches • Promote adult education • Education and vocational attainment • Birth to mothers with less than 12 years of education.

COMMUNITY DECISION-MAKING, FELLOWSHIP AND INCLUSION Increase participation in community decision-making • Voter participation • Increase participation in community development • Volunteerism • Celebrate diversity and inclusiveness • Segregation - residential.

The 2005 Community Survey: A Tale of Two Cities

The Community Research Institute is pleased to present the results of our annual Community Survey of Greater Grand Rapids.

Written with a broad stroke, the results of the 2005 Community Survey of Greater Grand Rapids tell a bright and positive story. The perceptions, gathered from a representative sample of county residents, indicate that most people feel good about the community, safe in their neighborhoods and are managing financially. This is great news for the area, given the tough economic times Western Michigan has experienced in the last 12 months. Perceptions of the community in 2005 are consistent with those gathered in the 2004 survey. Generally, people perceive the state of the community and their families to be good.

Eight out of ten respondents said that, overall, the Greater Grand Rapids area is an "excellent" or a "good" place to live. As in the past few years, the number one priority for the area in 2005 should be education according to residents. Also as in other years, safety and health were identified as areas that should be priorities. One difference in 2005 was an increased interest in employment or economic topics. While not as strong as education, safety or health, more people mentioned employment/economics as an area that should be a priority in 2005 than in previous years.

When asked how safe they feel in their neighborhoods, 95% said they were "somewhat" or "very safe" and 7 out of 10 said they view their neighborhood as "desirable" or "very desirable."

The survey found that the majority of residents in general would consider their economic status as satisfactory. Most people, about 8 out of 10, responded positively to questions about family economics. Eighty-three percent indicated that their family is doing "better," "somewhat better" or "about the same" today when compared to a year ago. When asked "How well does the amount of money you have take care of your necessities?" 84% (just more than 8 out of 10) said that the money took care either "very well" or "somewhat well." If they needed help, the majority of residents indicated they knew where to go for help.

A series of questions on the survey asked how often in the last twelve months did the adults in the household not have enough money for food, shelter, utility bills, a doctor visit or a prescription. About 8 out of 10 people said that such a situation never occurred in the last twelve months.

While the Community Survey story is accurate when written with this broad stroke, a finer pen adds important detail. It is, as the legendary radio commentator Paul Harvey would say, the "rest of the story." Perceptions of Greater Grand Rapids vary by people's age, their ethnicity and where they live. It is in the income category, however, where the disparity in perceptions is striking. Having financial resources has a significant influence on how people see their community and their situations.

Consider the overall grade for the area. A far greater percentage of people with incomes of \$50,000 said the area was an "excellent" or "good" place to live. Over 30% of those making less than \$25,000 said the area is "fair" or "poor." Those making less than \$50,000 were more likely to select crime and safety as topics that should be community priorities. Less than half of those making under \$25,000 rated their neighborhood as "very safe," with 11% saying their neighborhood is "somewhat" or "very unsafe." While 84% of those making \$50,000 or more find their neighborhood "very desirable" or "desirable" as a place to live, only half of those making less than \$25,000 feel the same.

When we look at employment numbers, it is important to remember that according to the 2000 U.S. Census, 73% of adults are in the labor force (includes employed or unemployed) and 27% are not (includes retired or disabled). Overall, 30% of the Community Survey respondents were retired, which is consistent with the Census percentage. Of the other 70%, 40% said they were working and satisfied, 11% said they were working but looking for a better job and 8% said they were not working but looking. The remaining

said that they were not looking because they need new skills, transportation or "can't find a job."

When income levels are used to compare employment, a number of things emerge. We find that the highest percentage of those who are not working because they are retired have income of less than \$25,000 a year. Forty-two percent of the people in that income category are retired compared to 26% of those in the \$25,000 to \$49,000 income level and 16% of those with income of \$50,000 or more. In the \$50,000 group, 68% are working and satisfied with their jobs while only 17% feel that way if they make less than \$25,000 and 33% of those people said that lack of transportation is sometimes or often a problem in getting to work.

Family condition is also influenced by income. While only 9% of those making \$50,000 or more said their families are somewhat worse or worse off than last year, 25% of respondents making less than \$25,000 said they were worse off than last year. Over half of the people in that group said they worry about running out of money for food and clothing. A number indicated that they had skipped meals because of lack of money for

food. When asked about their health, 43% rated it fair to poor compared to 8% of those making \$50,000 or more.

According to the 2000 Census, there are 48,400 people living in poverty in Kent County. The 2005 Community Survey found that community perception and family circumstances are significantly different for people in that category. If you are poor in Greater Grand Rapids you are more likely than others to feel you live in an undesirable neighborhood, you are worse off than last year, feel unsafe or feel you are only fairly healthy. You are less likely to be working, less likely to have enough money to pay for necessities and more likely to worry about having food or shelter or utility money.

The Community Research Institute presents these survey results with the hope that this detailed Greater Grand Rapids story will be the basis for dialogue and action across the community. The outcome of such work will hopefully mean good news for everybody in the years ahead.

*Dr. Mary McDonald,
Senior Researcher for the
Johnson Center for Philanthropy and
Nonprofit Leadership*

When asked, respondents of the 2004 Community Survey said the **#1 Priority** for our community is:

▲ Education

The 2004 Community Survey also asked respondents to give the community an overall grade.

For the 4th year in a row we earned a "B"

Community Grade / Priorities

- Over 3/4ths of the respondents view the community as "Excellent or Good" (almost 77% combined).
- The community view varies by age, income and race. A higher percentage of people 45 and older rated the Grand Rapids area as excellent than those who are younger. Ninety percent of those making \$50,000 or more rated the area excellent or good compared to 64% of those making less than \$25,000. Three out of ten people of color rated the area as "fair" compared to 15% of the Caucasians.
- Priorities remained the same as in 2003 with education considered the area's #1 priority.
- Many responders identified "jobs/ employment" or the economy as a major priority for the community in 2005.

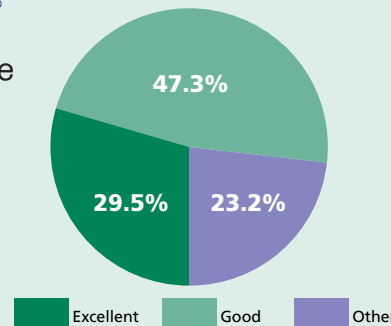


"Low-income core city residents commonly experience unemployment rates 2-5 times that of other city residents. These high unemployment rates have a staggering effect creating severe stressors on family wellness that results in increases in child abuse and neglect, domestic violence, substance abuse and crime. Most root cause analysis would lead us to unemployment as a key issue. However, many times we are lured into addressing symptoms with more vigor. Strangely, our common solution sets may be following a well known archetype in the systems thinking world called limits-to-success where the constraint may simply be lack of seamless coordination."

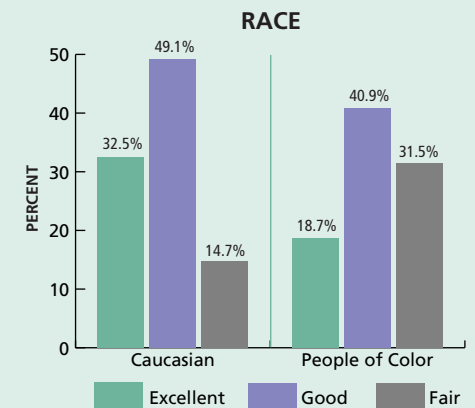
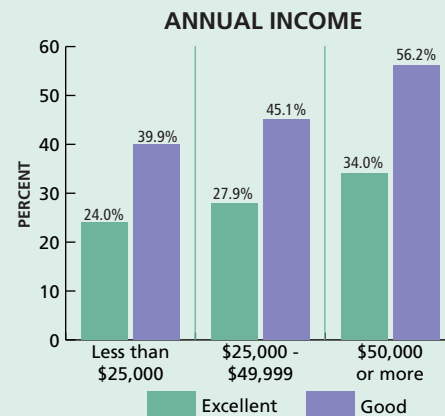
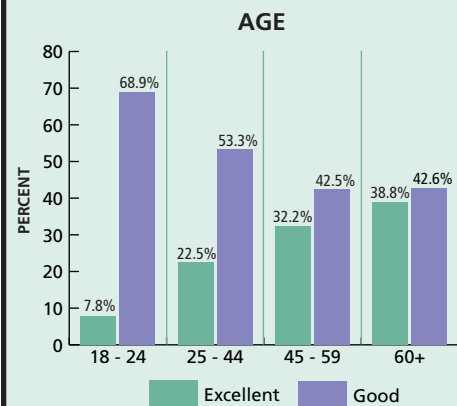
Chaná Edmond-Verley
Executive Director, Jubilee Jobs

COMMUNITY PERCEPTION:

Overall, what grade would you give to the Greater Grand Rapids area as a place to live?



Lower grades were more likely from younger people, people of color and lower income.



Community Grade / Priorities

Common Priorities

The root word of “community” is “common” and it is important to identify common areas of concern, determine common priorities and develop common action steps in order to create effective community change.

The 6th Annual Community Report Card is the tool in which we have identified common areas of concern. Through several community meetings, dialogue groups, data gathering and collective wisdom of community leaders, you will see the common areas of concern surface in this year’s Report Card.

Please take some time to review the data and take a mental note of the areas you would like to see as a priority. Because community includes everyone who lives within Kent County, we need to hear from all of you in order to determine our community priorities.

The Delta Strategy will provide several public forums in which you will have an opportunity to let your voice be heard. Please don’t miss the chance to make sure our action steps include everyone.

*Tamber Moore
The Delta Strategy*



PHOTO BY MATT MATHEWS

“What I encounter with the people at Baxter Community Center are the benefits to further their ability to read. Some of the people think it’s too late to start over again at the prime age of 55. If we can show them the benefits and the opportunities that await them when they take advantage of reading improvement, I think we can somehow show them a vision for their lives to improve. That will break the bondage of fear and shame that holds them back”

**Brian Jones,
Community Outreach Coordinator,
Baxter Community Center**

Equal Opportunity

- Belief in equal opportunity and treatment decreased from '03 to '04 when considered by race (in '03, 95% of the Caucasian respondents believed they had equal opportunity and treatment and in '04 87%; in '03 82% of people of color and in '04, 68%).
- Beliefs about equal opportunity and treatment are influenced by both race and income.
- Of those responding to the question about income, 43% of the people of color indicated income of less than \$25,000 (compared to 29% in '03) and 20% of the Caucasians reported such an income level (19% in '03).

Listen and Learn

A wise man once said, "everyone must be quick to hear, slow to speak, and slow to anger." In my opinion, we as a community need to consider this wisdom when reviewing the data that's been compiled pertaining to safety in Greater Grand Rapids. Although people in general feel safe in their neighborhoods, it's painfully

obvious that attitudes change when considering location, income and race.

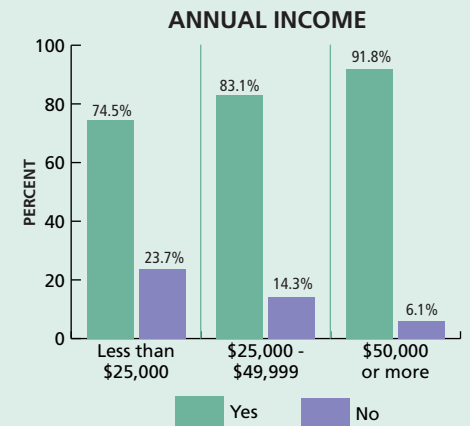
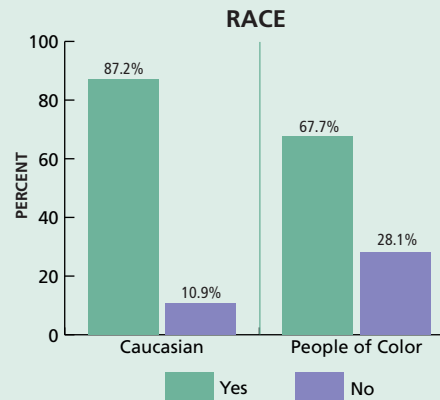
I'm convinced that a lack of awareness about different races and ethnicities as well as generalizations about police officers has an effect on our beliefs and actions. I believe that parity can exist in

our communities when we all make a concerted effort to listen to one another, respect one another, and trust one another. Are there any volunteers out there committed to being "all ears?"

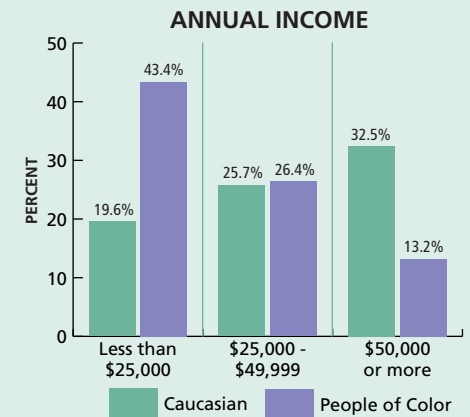
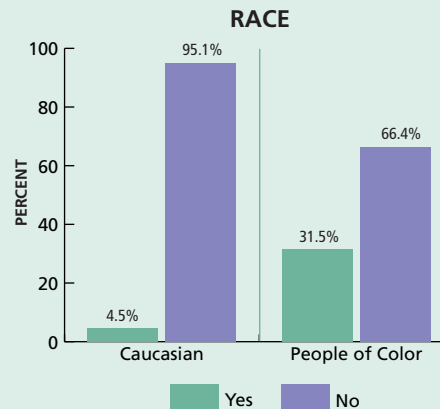
*Joe Jones
Business Owner/Community Activist*

COMMUNITY PERCEPTION:

Do you believe you and your family experience equal opportunity and treatment compared to others?



In the past year, have you felt that you were discriminated against for race or ethnicity?



Infant mortality continues to be a serious health issue in Kent County with rates for African-American infants nearly three times that of Caucasian infants.

Infant Mortality by Race/Ethnicity, Kent County

Rate per 1,000 live births

	1994-96	1995-97	1996-98	1997-99	1998-00	1999-01	2000-02	2001-03
Caucasian	6.6	6.0	5.8	5.6	6.5	6.7	6.8	7.0
African-American	18.9	21.4	21.3	18.3	17.4	17.3	18.9	19.4
Total	8.2	8.0	7.6	7.0	7.7	8.0	8.4	8.5

Source: Michigan Department of Community Health

Discrimination Complaints, Housing

YEAR	Number of Racial Housing Complaints	Total Number of Housing Complaints	Annual Percentage of Racial Housing Complaints
1996	82	155	53%
1997	72	159	45%
1998	88	152	58%
1999	71	134	53%
2000	56	145	39%
2001	79	154	51%
2002	62	120	52%
2003	54	153	35%
2004	69	136	51%

Source: Fair Housing Center of Greater Grand Rapids



Diversity of Kent County Employees by Race & Gender

Figures are the percentage of the total employees in that category

	1997	1998	1999	2000	2001	2002	2003
Caucasian	85.3	83.2	82	82	84.1	84.2	84.4
African-American	9.6	10	8.9	8.9	10.8	10.3	10.1
Hispanic	2.4	2.4	2.8	2.8	2.9	3.2	3.2
Asian	1	1.2	1.1	1.1	1.4	1.3	1.2
American Indian	0.3	0.2	0.5	0.5	0.6	0.8	0.7
Male	46.2	46.5	49.4	46.6	46.4	47.2	48.0
Female	53.8	53.5	50.5	53.4	53.6	52.8	52.0

Source: Kent County Human Resources Department

Education

- A slightly smaller percentage of children are reported to attend public schools. 79% in 2004 compared to 84% in 2003.
- Children of color attend public school at a higher percentage than Caucasian children.
- Nearly nine out of 10 parents reported attending teacher conferences.
- Parental involvement in conferences is high in all kinds of districts ... urban, suburban, and rural.



"If we would decide as a community that we wanted to make the education of our urban youth a priority, that would happen. If we don't get this done, the greater Grand Rapids community is not going to survive. Everybody has a stake in this."

**Bert Bleke, Superintendent,
Grand Rapids Public Schools**

Good Schools for Grand Rapids: The Stakes Have Never Been Higher

The economic and cultural health of greater Grand Rapids ... from the city to the suburbs ... depends on the ability of the community to provide quality schools for all children. Quality education is the defining issue for our community and has vast implications for whether or not we continue to grow as a city and a region.

This is why the Grand Rapids Education Reform Initiative [ERI] issued the Straight A Plan for Education Reform in September 2002. The plan is the first

community wake-up call about the state of education in the City of Grand Rapids. It calls for a transformation in how we educate students for 21st century work and life.

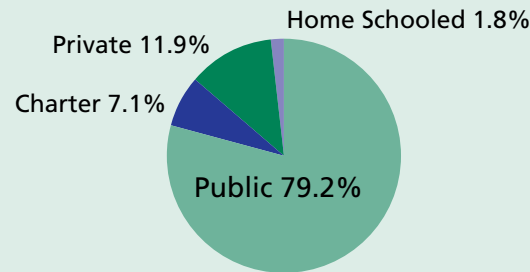
We believe all students must have access to educational options that will equip them with the skills necessary to succeed in the new economy. At a minimum those skills require creative problem solving, active citizenship, and the ability to work on a global playing field. Without this focus, the capacity for

our community to thrive in a 21st century economy is at stake.

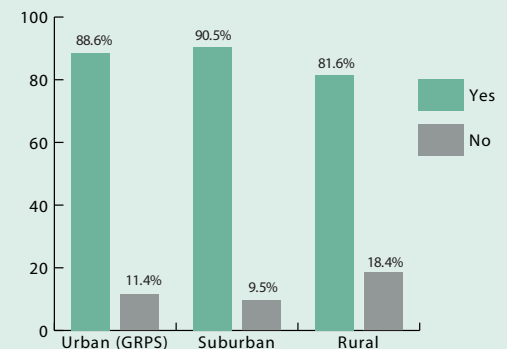
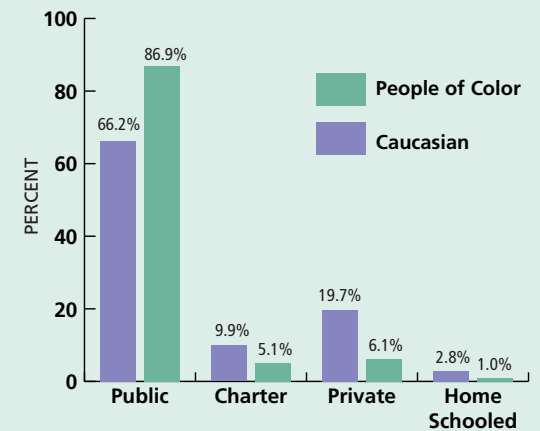
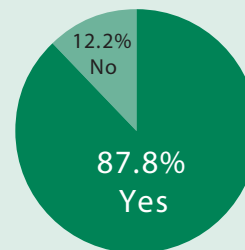
This has been a challenging year for K-12 education in Grand Rapids and throughout Kent County. Our schools have worked to fulfill their mission in an environment of ever-changing fiscal and administrative pressures. Despite these challenging times, the ERI has partnered with the schools and with other community organizations to implement new opportunities for moving our schools to the next level.

COMMUNITY PERCEPTION:

What type of school does your child attend?



In the past year, have you attended a parent-teacher conference?



Systemic education reforms that impact children from infancy to age 18 have been our priority. Our focus has been on community accountability, policy change, meaningful parental involvement, bringing community services into the schools, early childhood education and care, and organizing our neighborhood leadership to help design schools that will serve as the hub of the neighborhood.

Our work will not end with the conclusion of a school year or a difficult funding cycle. The ERI was created through a unique 20-year philanthropic commitment between the Frey, Grand Rapids Community, and Steelcase Foundations to focus long-term attention on creating the schools Grand Rapids needs to maintain a competitive advantage. The initiative has student achievement as the number one goal.

At the heart of the ERI is the value that education is a community responsibility. Students and schools cannot meet the challenges ahead alone. The broader community must meet them halfway and everyone must be willing to contribute the time, talent, and resources to protect our most valuable community asset – our children.

Grand Rapids Education Reform Initiative



In addition to English, 54 languages are currently used by GRPS students.

The top four languages:

1. Spanish
2. Vietnamese
3. Bosnian
4. Somalian

Source: Grand Rapids Public Schools 2004

Daycare Slots

2000	2001	2002	2003	2004
18,339	18,460	17,882	19,992	21,851

Source: Kent County 4C

2004 Kent County Daycare Slots by Type

TYPE	NUMBER
Family Homes	6,108
Group Homes	2,100
Center/Preschool Programs	13,643
Total	21,851

Source: Kent County 4C

"If we are truly concerned about improving our future, as we apply all the data we collect in this community, the fundamental question we should be asking is: Is it good for the child?"

If we can answer 'yes' each time we ask this question, we know we are making a positive step forward."

Candace Cowling
Child and Family Resource Council

"Reading is so important that we at WOOD-TV8 feel it's never too early to start. That's why we joined forces with our Intermediate School Districts (ISD's) who took on the challenge to read to kids 0 - 5 years old, so that when they started school, their chance for success was greater. I think it's great that television can help educate people on the importance of reading and show parents how to do it."

Eva Aguirre Cooper
Communications Director
WOOD / WOTV / WXSP / WZPX

"Students at Alexander Elementary, Bank One's partner school, are reading better and comprehending more — and test scores prove it. Focused effort and perseverance by Alexander staff, volunteers, parents and students demonstrate significant improvement is possible. Take the test scores down to the individual level, and you'll find students whose eyes glimmer with joy and hope as the world opens to them through reading."

Richard Haslinger
President, West Michigan
Bank One



Family Economics

- Only three out of 10 of those responding indicated that they are doing better (somewhat better or better) this year than last while seven of ten indicated they are doing about the same or worse.
- Family condition was not influenced by race, age, gender. It was influenced by income with 25% of the people who make less than \$25,000 indicating they are worse off.
- There was little change in the proportion of those who lack transportation to get to work; 11% saying "sometimes" compared to 15% in 2003.
- Worry about running out of money for food, clothing and shelter is significantly related to race.

"There's little reason to expect a return to the old days. Free trade agreements and access to low-cost labor outside the United States will continue to eat away at low-skill, non-specialized manufacturing jobs. There's nothing you can do about that. There are some industries where you can get what you call a premium and you differentiate yourself with value-added products where you're not as sensitive to globalization."

Win Irwin
Irwin Seating Company

New Priorities for Americans: Preparing for the Future

Gone is the linear approach to climbing the career ladder. We no longer attend school, then work, and finally retire 40 years later (from the same organization). Now we have a cyclical approach. We have become lifelong learners. We need to continue learning to keep working. Continuous education will be the norm to get and keep employment. We will have a conventional education to

lifelong learning.

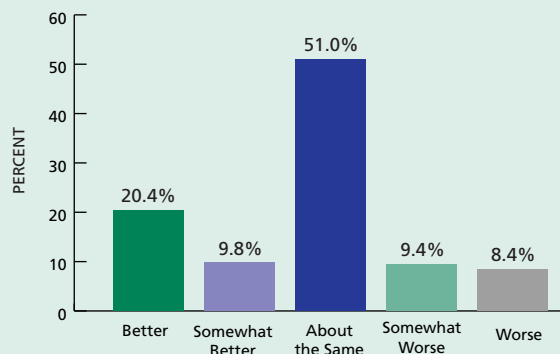
Change, for most, is a necessary challenge, and we handle it reluctantly, trying to manage what we often can't control. And change is happening faster than ever before ... seemingly overnight!

The key is knowledge ... flexible knowledge and skills ... to learn

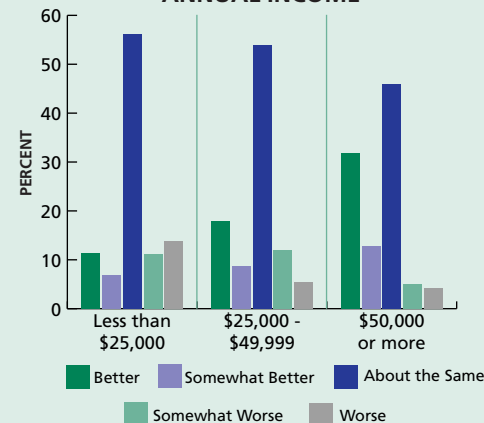
quickly and adapt to new jobs. Our future competitiveness depends on our workforce, and the quality of our workforce depends on education. Higher education is the platform from which to build a sound economy via a skilled workforce. We need to educate and train our workforce, so we have the right skills at the right time. Not everyone needs a Bachelors of Arts

COMMUNITY PERCEPTION:

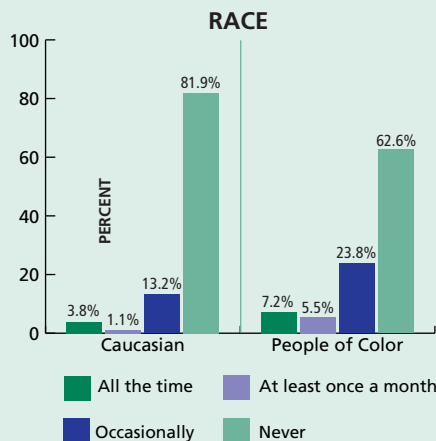
How well are you and your family doing financially today compared to a year ago?



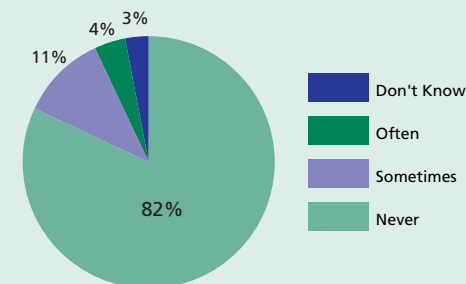
ANNUAL INCOME



How often do you worry about running out of money for shelter for you and your family?



How often is lack of transportation a problem for you in getting to work or other places you need to go?



degree, but everyone needs some post High School training. The winners will be those with education. Our ability to succeed as a nation is dependent upon our ability to educate, train, place, retain, and compensate a diverse workforce and work together.

Our communities don't operate in silos.

Jobs & the economy ... looking for a job? Get an education!

We are a system. We focus on jobs and the economy, but we can't have a strong workforce without people who are well educated. It starts in the K-12 system, but it continues into other realms of lifelong learning.

The most important thing to master is "learning to learn" to gain new skills, new knowledge, and new attitudes and behaviors needed to succeed in work and life.

The relationship between the employer and the learner is critical.

The importance of the community college becomes evident. Half the students are over 25 years old and 1/3 are older than 30. Community colleges lead the nation in serving growing minority populations. No other source of higher education is even close to meeting the needs of these populations at the pace of the community colleges. If our community schools are superior, our workforce will be better and our economic future will be stronger. We need to think resources and reform. It's not the government's job or the private sector's job. It's our community's responsibility to make it happen.

Taken from **The Jobs Revolution: Changing How America Works** by Steve Scanland. Steve and Kathryn Scanland, Senior Consultants with The Greystone Group; offices in Washington, D.C., Chicago and Grand Rapids.

Unemployment Rates

	2000	2001	2002	2003	2004
Kent County	2.8	5.0	6.3	7.8	6.5
Grand Rapids	3.9	7.0	8.8	10.5	9.0
Michigan	3.4	5.3	6.2	7.0	6.8
U.S.	4.2	4.8	5.8	6.0	5.5

Source: Michigan Department of Career Development



"This last year, it was reported by the ENTF (Emergency Needs Task Force) Food Subcommittee that 49% of persons not able to access available food resources were unable to do so because of lack of transportation to or from a local pantry."

Dave Bulkowski
Disability Advocates

Emergency Calls for Help answered a record number of calls in 2004. When compared to 2002, there were 2,173 more calls for rent/mortgage assistance, 2,920 more calls for heat, 435 calls for prescription assistance and 1,781 more calls for emergency food.

Emergency Calls for Help (211)

	2000	2001	2002	2003	2004
Rent/Mortgage	2,920	3,208	4,105	6,050	6,278
Shelter	1,230	1,484	1,613	2,272	2,298
Rent Deposit	328	380	664	481	601
Electric	1,851	1,918	1,884	2,502	2,912
Heat	2,093	1,466	1,796	3,730	4,716
Telephone	116	70	92	105	100
Local Transportation	723	577	1,161	1,709	1,743
Prescription Assistance	753	599	824	955	1,259
Furniture	664	947	501	705	799
Appliances	253	402	201	225	266
Emergency Food	3,843	4,371	3,824	4,969	5,605

Source: Heart of West Michigan United Way

Poverty Rates

Figures are the percentage of the total employees in that category

	1979	1989	1997	1999	2000	2001	2002	2003
Individuals: Kent County	8.5%	9.0%	8.7%	8.9%	8.9%	11.8%	8.6%	8.4%
Children: Kent County	11.1%	12.8%	13.4%	10.4%	10.2%	15.2%	11.6%	9.8%

Source: U.S. Census 2000, for 2000 figures
American Community Survey for 2001-2003 figures

"We must work to retain dollars in our community. Statistics tell us that when consumers shop at locally owned businesses, close to 75% of those dollars stay in our community."

Frequenting small businesses is one way to keep our local economy going. As a small business owner, I encourage us to support local businesses so our local economy can be strong and grow. This will also put more local people to work."

Bing Goei, Owner
Eastern Floral

Safety

- Generally, people feel safe in their neighborhoods.
- Location, income, and race significantly influence feelings of safety in neighborhoods.
- A vast majority of people have not been victims of crimes such as burglary or assault.

Domestic Violence and the Workplace

Employers lose between \$3 and \$5 billion every year in absenteeism, lower productivity, higher turnover and health and safety costs associated with battered workers.

Of battered workers, 96% experience problems at work due to abuse, and

74% are harassed while at work by their abuser.

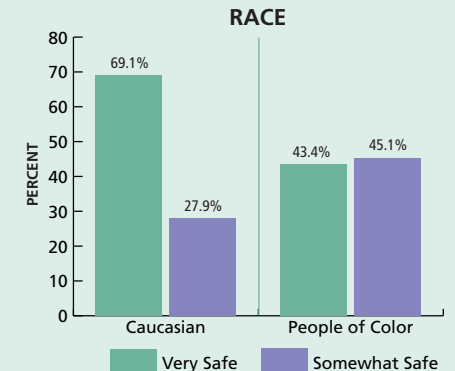
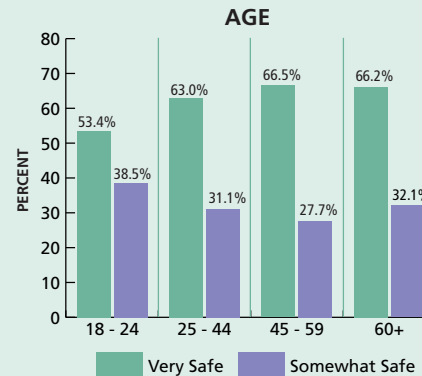
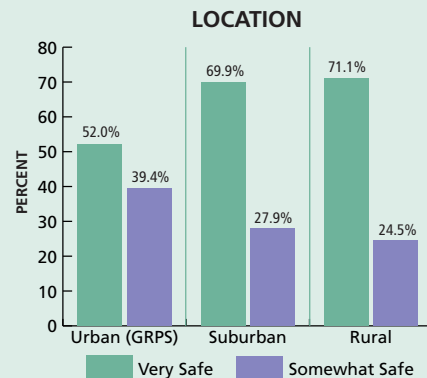
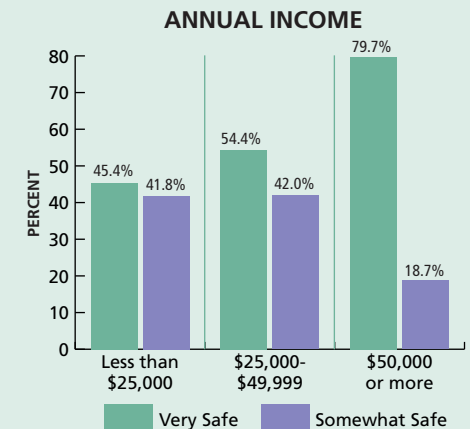
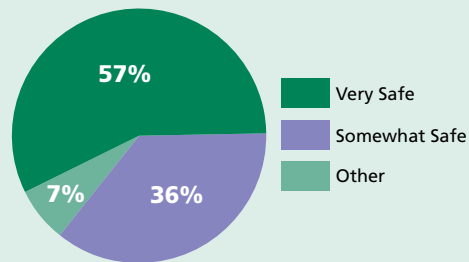
Domestic violence is a primary cause of homelessness for women and children in 56% of surveyed cities.

From The American Institute on Domestic Violence



COMMUNITY PERCEPTION:

How safe do you feel in your neighborhood?



"The most commonly asked question that we hear is, "Why doesn't she leave?" The answers to that question are complicated and vary depending on the circumstances. The most dangerous time for a battered woman is after she leaves the relationship. Women are frequently unable to provide financially for themselves and their children. There are many reasons, but the real question is, "Why should she have to?" Why are we, as a society, unwilling or unable to believe that a battered woman deserves to be safe in her own home? Battered women and their children do not deserve to be further victimized as a result of the batterers' crimes. Batterers need to be held accountable. Survivors need to be safe."

Carla Blinkhorn, President/CEO
YWCA of Grand Rapids

Index Crimes Reported in Kent County

Type of Offense	1997	1998	1999	2000	2001	2002	2004
Arson	143	175	111	195	128	178	181
Assault-Aggravated	2,097	2,212	1,717	1,999	2,023	2,257	2,076
Burglary	4,632	5,704	4,200	4,690	5,044	4,959	4,360
Larceny	14,463	15,434	13,181	15,542	14,997	14,331	14,864
Motor Vehicle Theft	1,557	1,915	1,415	1,500	1,359	1,336	1,296
Murder/Manslaughter	28	29	13	18	15	13	20
Rape (includes attempts)	132	308	182	232	235	242	258
Robbery	668	792	545	740	679	622	700

Source: Uniform Crime Report, Michigan State Police

"The Reentry Roundtable, which is a product of the work of Delta Strategy, is a unique example of what collaboration can bring about in a community. Through the efforts of the Roundtable, social service agencies have networked with corrections, neighborhood agencies, faith based agencies, and a number of concerned citizens to increase the resources that help ex-offenders change their lives. The safety of the community is truly impacted when ex-offenders achieve productive crime-free life styles. This kind of permanent change is more possible through the collaboration enhanced by the Roundtable. The passion exhibited by the members of the Roundtable gives testament to the commitment of the folks in Kent County to making our communities better and safer, one person at a time. I suspect that the level of effort seen around this issue is unmatched by any other community."

Valerie Martin
 Chief, U.S. Probation and Pretrial Services
 Western District of Michigan
 President, Reentry Roundtable



"Grand Rapids continues to be a relatively safe city, with a proud tradition of supporting neighborhood associations that are focused on working in partnership with the Grand Rapids Police Department and various City departments to maintain a high standard of quality of life for our citizens."

Like many urban cities in America, our citizens of color are disproportionately represented in violent crime rates. In addition, our public school students are dropping out of school at alarming rates, resulting in young citizens developing a sense of despair and hopelessness.

In order to address this significant problem, the GRPD has renewed its commitment to youth centered crime prevention initiatives such as Youth Commonwealth and various after school programs. Throughout the upcoming year, the GRPD and community leaders must work together to address the systemic causes of violent crime in our community. These causes are poverty, family issues, ambivalence of those who believe that they are not affected, and education. It is our sincere belief that the future of our great city is bright, as long as we direct our undivided attention toward the needs of children."

Harry P. Dolan,
 Chief of Police, Grand Rapids

Child Abuse Cases

Child Abuse and Neglect in Kent County
 (Rate per 1,000 children)

1997	1998	1999	2000	2001	2002	2003
4.8	5.6	8.6	8.6	9.0	10.4	10.3

Source: Kids Count in Michigan

- Eight out of 10 community survey respondents indicated that they rate their health to be excellent or good.
- Income had significant influence on how respondents viewed their health. A larger percentage of those who reported income of \$50,000 or more rated health at "excellent."
- Race also significantly influenced health rating.
- Over half of the respondents reported that they are not overweight while 24% indicated that they were 20 lbs. or less overweight. About 18% reported that they are between 21 and 50 lbs. overweight.
- People most often mentioned "stress" as their number one health concern.
- Ninety percent of respondents indicated they have health insurance.
- In terms of prevention, 79% get a physical exam once a year, 78% see a dentist and 80% don't smoke.
- The percentage of People of Color who visit a dentist once a year is lower than the percentage of Caucasians, the percentage who get a physical exam is the same for both groups.

Health Disparities in our Community

If you're a black resident of Kent County, you are twice as likely to have cancer as your white neighbor. If you're a black man in Kent County, you'll die an average of eight years earlier than a

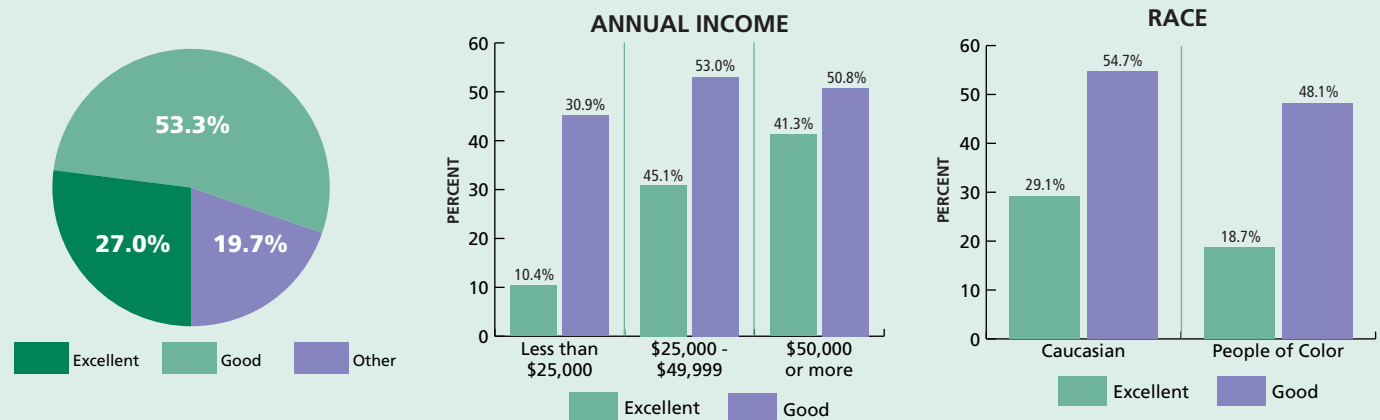
white man. And if you're a black infant in Kent County, you are twice as likely to die before your first birthday as the white baby next to you in the nursery. Although this may be a hard pill for

some to swallow, the disparities of our current state of health must be told.

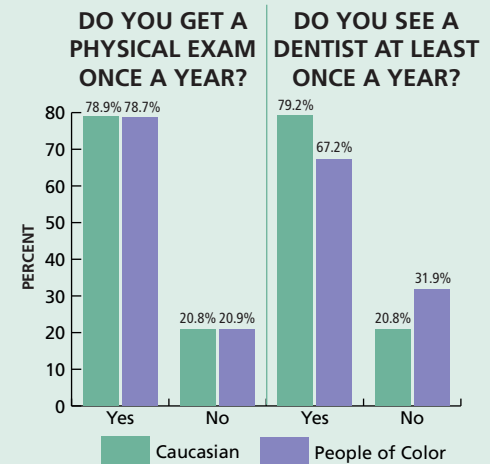
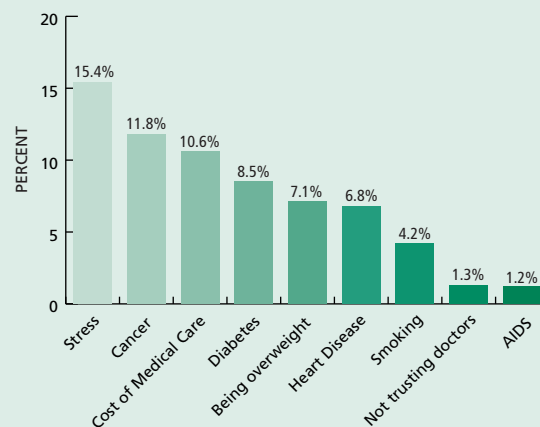
Health disparities or inequalities occur when members of certain population groups do not enjoy the same health

COMMUNITY PERCEPTION:

How do you rate your health?



What is your main personal health concern?



status as other groups. Disparities are most often identified along racial and ethnic lines showing that African-Americans, Hispanics, Native Americans, Asian Americans, Alaska Natives and whites have different disease rates and survival rates. But disparities also extend beyond race and ethnicity. For an example, cancer health disparities can involve biological, environmental, and behavioral factors, as well as differences noted on the basis of income and education.

At the national level, statistics on health disparities are startling. According to a recent report from the National Institutes of Health, disparities are reflected in all categories of disease, from infectious disease to vascular and endocrine diseases to mental illness. Below is a sampling of statistics on disparities:

- Minorities bear a greater disease burden associated with mental health disorders, due in part to a lack of access to quality mental health services. American Indians and Alaskan Natives suffer from an unusually high rate of suicide.
- African-American infants are 2 times as likely to die in their first year of life than whites, even when controlling for socioeconomic factors.
- African-American men are twice as likely as white men to die from prostate and colorectal cancers. While cancer survival rates for whites improved over the past decade, survival rates for African-Americans declined.
- African-Americans are twice as likely as whites to be diagnosed with diabetes. Latinos, American Indians, and certain Asian-Pacific Islander groups all have rates that far exceed that of whites.
- HIV prevalence in African-American women is 24 times that of white women. African-American men are 8 times as likely as their white counterparts to be diagnosed with HIV. (Source: Health Care For All)

There is no single, simple answer. Racial and ethnic minorities tend to receive lower-quality health care than whites do, even when insurance

status, income, age, and severity of conditions are comparable. This is the reason that work currently being done through organizations like Grand Rapids African American Health Institute (GRAAHI), Healthy Kent 2010, Nurse Family Partnership, The Healthy Start Initiatives and numerous others are so important. Delta Strategy is committed to providing our community with honest, factual information that is critical in encouraging collaboration among our community to address these issues beyond just reporting them from a national level.

Wayne Boatwright
Chief Diversity Officer, Saint Mary's Health Care



Teen Births to females under age 20

Figures are Percents of Total Births

	1997	1998	1999	2000	2001	2002
Flint	22%	21%	20%	20%	19%	18%
Detroit	20%	19%	18%	18%	17%	17%
Grand Rapids	16%	15%	15%	15%	14%	13%
Lansing	16%	15%	15%	15%	14%	14%
Kent County	12%	11%	12%	11%	11%	10%
Michigan	12%	12%	11%	11%	10%	10%

Source: Right Start in Michigan 2003

Health Insurance for Children

(Percent of total number of children in 2000 Census)

Type of Insurance	1999	2000	2001	2002	2003
MI Child	0.3%	0.7%	0.9%	1.1%	1.3%
Medicaid	18.2%	18.1%	21.3%	23.1%	27.5%

Source: Kids Count in Michigan, 2000, 2001, 2002, 2003, 2004

Domestic Violence

	1997	1998	1999	2000	2001	2002	2003
Number of Victims	1,231	1,872	1,718	1,942	2,048	4,338	3,062

Source: Michigan State Police, Uniform Crime Report

The following organizations and individuals are among the many who participated in and funded Delta Strategy activities this year. We are very grateful to every one of you.

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