

Community Assessment Summary Report

Prepared for:



United Way of South Mississippi

Serving the Needs of Hancock, Harrison, and Pearl River Counties

And



The Bradley Research Group, LLC

An Applied Research and Decision Analytics Firm

Community Assessment: **The State of Our MS Coast Communities 2012**

Executive Summary

The objective of the Community Assessment Summary Report is to provide a deeper understanding of the issues relevant to the six coastal counties of Mississippi (Hancock, Harrison, George, Jackson, Pearl River and Stone) within the context of the current environment at the state and national levels. It may be used by organizations and businesses that care about south Mississippi and want to focus their resources on ways to improve lives in their community. The Community Assessment can give direction to civic clubs, faith communities, and not-for-profit organizations. Government entities, not-for-profits, and businesses can use the Assessment to assist them in allocating their charitable resources in areas where they will make the most difference.

The findings were categorized under the general headings of Income, Education, and Health. An attempt was made in each category to identify issues and trends at the national, state, and county levels.

In the past seven years south Mississippi has experienced the worst natural disaster in our nation's history, Hurricane Katrina, a deep economic recession, and the BP Deepwater Horizon oil spill disaster. Inasmuch, the overarching psyche of Mississippi Gulf Coast residents is both resilient yet fragile. It is generally understood that this is a difficult time for this area. The region is still recovering from the trilogy of aforementioned negative events, and the manner in which recovery moves forward is critical to the future of the area.

This summary will highlight in a very broad-based manner the overarching issues that were revealed during the assessment. However, it is suggested that readers refer to the body of the report for details.

Methodology and Data Sources:

The methodology for the study was to collect secondary research findings, review recent assessments from other local organizations, and to conduct five focus groups with local nonprofit agencies.

It should be noted that the focus groups consisted of a total of four one-hour sessions conducted with relevant service providers in the six-county area, with each session focusing on a different topic area. The topic areas were family violence, health, early childhood, and income. The overarching purpose of the focus groups was to provide a deeper context and understanding of the challenges in the study area.

In each group session, the resounding message was that service providers were

having to do more with less. State budgets and other funding sources are shrinking while the needs of the community are growing larger by the day. This phenomenon is providing a significant amount of stress on the current provider system. In many cases, service providers indicated that the current situation was the worst they had seen in their career. Notably, a portion of the increasing needs of the community are related to the delayed onset of issues associated with Hurricane Katrina and the BP oil spill.

Facts and statistics from multiple sources have been compiled in the Community Report Card to create a well-rounded picture of South Mississippi. A list of the sources accessed to create this report is included in the Appendix.

Demographics:

Mississippi's population growth has lagged behind the rest of the nation while 3 South Mississippi counties have experienced exceptional growth – George County 17.9%, Pearl River County 14.8% and Stone County 30.6%.

2010 Data Related Population								
	George	Hancock	Harrison	Jackson	Pearl River	Stone	Mississippi	United States
Total Population	22,578	43,929	187,105	139,668	55,834	17,786	2,967,297	308,745,538
% change since 2000	17.9%	2.2%	-1.3%	6.3%	14.8%	30.6%	4.3%	9.7%
% minority								
African American	8.1%	7.1%	22.1%	21.5%	12.3%	19.1%	37%	12.6%
Asian	.2%	1%	2.8%	2.2%	.4%	.3%	.9%	4.8%
Hispanic/Latino	2%	3.3%	5.3%	4.6%	1.7%	1.3%	2.7%	16.3%
Other	1.2%	.5%	3.3%	2.3%	2.3%	1.8%	1.5%	3%
White	89.8%	88.4%	69.7%	72.1%	84%	78.6%	58%	63.7%
Age of population								
Under 5	7.3%	6.3%	7.4%	6.8%	6.9%	6.6%	7.1%	6.5%
Under 18	26.8%	23.9%	24.5%	25.5%	24.6%	24.4%	25.5%	24%
Over 65	12.8%	15.2%	11.7%	12.4%	14.6%	12.1%	12.8%	13%

2010 Census

Education

The role of education has a significant cumulative effect on life opportunities and the capacity to fully participate in social issues. It serves in fundamental ways as a strong predictor of broader social engagement, lifetime income and health. "Researchers have known for decades that rising education levels positively influence a host of social factors: income, health, voting rates and even the likelihood that a person will stay out of prison." USA Today 5/13/2009

Early childhood education

Early childhood is a crucial time period for the development of the mental functions of children. By the age of 3, 90% of a child's brain development has already occurred. While Mississippi requires districts to offer full-school year, full-day kindergarten, children are not required to attend. In addition, only 31.8% of the state's 3 and 4 year olds participate in early childhood education.

Today, 1 out of every 14 of Mississippi's five year olds cannot move successfully from kindergarten to first grade due to lack of skills mastered.

James Heckman, Nobel laureate in economics from the University of Chicago, reviewed the literature and found that the long-term, economic return on investment in high-quality early childhood education programs is more than 8 to 1 (Heckman 2000).

Heckman concludes, "We cannot afford to postpone investing in children until they become adults, nor can we wait until they reach school age—a time when it may be too late to intervene. Learning is a dynamic process and is most effective when it begins at a young age and continues through to adulthood." (Heckman 2000, pg. 50)

K-12 Education

By almost every measure the nation is becoming less competitive on an international scale. In Mississippi, the current situation is worse. The Corporation for Enterprise Development (CFED) *Assets and Opportunities Scorecard* assigned Mississippi a grade of *F* in Education based on test performance and state education policies.

At the local level we have some school districts performing reasonably well, and some that are underperforming at *all* levels. However, when a large proportion of our third grade students cannot read at a proficient level, there is much work to do in our own community.

A recent national study predicted that 63% of all job openings in the next six years will require some level of post-secondary education.

Public School Districts	Graduation Rate	ACT Composite Score	% Scoring Basic or Lower in 3rd Grade Reading 2009-2010
Mississippi	71.4%	18.5	50.0%
Bay St. Louis	82.7%	19.1	39.0%
Biloxi	82.2%	20.7	40.0%
George County	67.5%	19.9	51.0%
Gulfport	69.9%	20.7	40.0%
Hancock County	74.8%	20.3	40.0%
Harrison County	77.6%	19.3	38.0%
Jackson County	77.4%	20.1	42.0%
Long Beach	83.7%	20.9	42.0%
Moss Point	73.9%	16.7	38.0%
Ocean Springs	87.1%	21.0	37.0%
Pascagoula	72.9%	18.8	57.0%
Pass Christian	84.7%	21.4	29.0%
Pearl River	69.9%	19.9	43.0%
Picayune	68.6%	18.6	47.0%
Poplarville	83.9%	19.6	56.0%
Stone County	81.1%	18.4	47.0%

Income

In multiple measures of poverty, many Mississippians clearly lack economic security. Given the inter-connected nature of today's economy, it is essential that counties not only measure their income gains and losses relative to the state's climate, but also against the regional and national climate.

In all six South Mississippi counties studied, the median household income and the per capita income are substantially less than the national median income, but higher than the state median income. These counties demonstrate above-average performance in a number of areas when compared to the rest of the state yet those measures don't take into account the full context of a globally competitive environment.

Nearly 1 in 3 working families in the US are struggling to meet basic needs, an increase

of 1.7 million people since 2008. Approximately 6% of American workers earn the federal minimum wage or less. However, in Mississippi, that proportion increases to 9.5%. To make matters worse, the poorest 20% of families in Mississippi pay 2 times more of their income in taxes than the wealthiest 1% of families.

2010 Data Related to Economic Well-Being								
	George	Hancock	Harrison	Jackson	Pearl River	Stone	Mississippi	United States
Median Housing Value (1)	\$92,400	\$150,700	\$142,700	\$125,500	\$121,700	\$105,400	\$96,500	\$188,400
Home Ownership Rate (1)	83%	75.4%	66.5%	72.7%	78%	77.4%	70.8%	66%
Median HH Income (2)	\$45,492	\$44,494	\$45,668	\$47,906	\$40,038	\$43,728	\$37,881	\$51,914
Per Capita Income (2)	\$19,452	\$21,935	\$22,880	\$22,655	\$20,014	\$21,691	\$19,977	\$27,334
Population below the poverty line	14.4%	14.7%	15.3%	14.8%	20.1%	17.5%	21.2%	13.8%
Children in poverty	26%	30%	30%	25%	32%	28%	32%	

Influence of poverty on child development

The level of influence that living in a high-poverty upbringing can have on the welfare of children cannot be overestimated. By most metrics, Americans are struggling today. It is abundantly clear that the recession and its repercussions have left unprecedented numbers of families hardly able to satisfy their basic needs. As compared to children with the same family income who live in more prosperous neighborhoods, children from economically underprivileged neighborhoods are significantly more likely to suffer from food hardships, to have difficulties with course work, to drop out of school, and to experience deficient health and behavioral problems.

Health

Nationally, and in each state, there is a consistent and striking pattern: as levels of education rise, health improves. Health among adults is powerfully linked with social factors such as household income, educational attainment and racial or ethnic group. American adults with the least education have the worst health, a 2009 Robert Wood Johnson study found. "In Mississippi, nearly 75% of adults who hadn't graduated from

high school reported being in less than very good health, compared with 37% of college graduates.” (Robert Wood Johnson Foundation Commission to Build a Healthier America May 2009)

National Overview

According to the *2011 America’s Health Rankings* commissioned by The United Health Foundation, the news was both good and bad. It is encouraging that the U.S. experienced modest improvements in areas such as smoking, cardiovascular disease, and violent crime. However, the nation continues to struggle with worsening rates of obesity and diabetes, and no improvements in other chronic health conditions. That said, with chronic disease impacting 130 million Americans and accounting for nearly 75% of healthcare costs, solutions must be found in the near future. Moreover, as compared to other nations, the picture is relatively disappointing. The World Health Organization compares the U.S. to the other member nations on a number of metrics. While the U.S. does outperform many countries, it is far from the best in many of the common measures to gauge overall health, and it lags behind its peers in other developed countries.

State Overview

Some of the highlights of the Mississippi 2011 health findings include:

- Smoking has decreased minimally in the past ten years from 23.5% to 22.9% of the adult population (506,000 people still smoke in Mississippi).
- In the past year, the rate of uninsured population increased from 17.7% to 19.2%.
- In the past five years, obesity increased from 30.9% to 34.5%, with 763,000 obese adults in MS.
- In the past five years, diabetes increased from 9.8% to 12.4% of the adult population. Currently, approximately 274,000 Mississippians have diabetes. Nationally, the percentage of teenagers testing positive for diabetes and pre-diabetes nearly tripled to 23% in 2007-2008 from 9% in 1999-2000.
- In the past ten years, the violent crime rate decreased from 349 to 270 offenses per 100,000 population.
- In the past ten years, the percentage of children in poverty increased from 16.4% to 33.7% of persons under age 18.
- The 2010 infant mortality rate for Mississippi was 9.6 infant deaths per 1,000 live births.
- Mississippi reported 55 births per 1,000 teens aged 15 to 19 in 2010, more than 60 percent above the U.S. average. The latest statistics from 2010 show, one 12 year old gave birth in the state, twenty-six 13 year olds, 88 fourteen year olds, 343 fifteen year olds, 588 sixteen year olds, and the numbers go up for 17, 18 and 19 year olds.

A summary of local health data follows on the next page.

Local – Harrison, Hancock, Pearl River Counties

County Health Statistics 2012					
	Hancock	Harrison	Pearl River	Mississippi	National
HEALTH OUTCOMES					
Premature Death	9,680	10,724	12,162	10,811	5,466
<i>Morbidity</i>					
Poor or fair health	19.0%	20.0%	22.0%	22.0%	10.0%
Poor physical health days	4.4	4.0	5.1	4.1	2.6
Poor mental health days	4.6	5.0	4.7	4.1	2.3
Low birth weight	7.6%	10.5%	9.4%	11.8%	6.0%
HEALTH FACTORS					
<i>Heath Behaviors</i>					
Adult smoking	24.0%	27.0%	32.0%	24.0%	14.0%
Adult obesity	35.0%	36.0%	33.0%	36.0%	25.0%
Physical inactivity	30.0%	30.0%	30.0%	33.0%	21.0%
Excessive drinking	14.0%	16.0%	13.0%	11.0%	8.0%
Motor vehicle crash rate	28	21	39	31	12
Sexually transmitted infections	257	611	275	803	84
Teen birth rate	59	65	58	65	22
<i>Clinical Care</i>					
Uninsured	22.0%	21.0%	23.0%	21.0%	11.0%
Primary care physicians	1,500:1	1,272:1	2,063:1	1,155:1	631:1
Preventable hospital days	83	89	111	95	49
Diabetic screening	80.0%	74.0%	86.0%	80.0%	89.0%
Mammography screening	63.0%	61.0%	59.0%	58.0%	74.0%
<i>Social and Economic</i>					
Children in poverty	30.0%	30.0%	32.0%	32.0%	13.0%
Inadequate social support	23.0%	23.0%	21.0%	25.0%	14.0%
Children in single parent	30.0%	40.0%	30.0%	44.0%	20.0%
<i>Physical Environment</i>					
Air pollution-particulate	3	2	3	1	0
Air pollution-ozone days	1	11	1	3	0
Access to recreational facilities	7	8	5	7	16
Limited access to healthy foods	27.0%	22.0%	2.0%	11.0%	0.0%
Fast food restaurants	46.0%	51.0%%	63.0%	55.0%	25.0%

www.countyhealthrankings.org

Local – George, Jackson, Stone Counties

County Health Statistics 2012					
	George	Jackson	Stone	Mississippi	National
HEALTH OUTCOMES					
Premature Death	12,041	10,123	11,645	10,811	5,466
<i>Morbidity</i>					
Poor or fair health	24.0%	19.0%	24.0%	22.0%	10.0%
Poor physical health days	4.5	3.7	5.9	4.1	2.6
Poor mental health days	4.6	4.4	4.7	4.1	2.3
Low birth weight	10.5%	10.3%	10.4%	11.8%	6.0%
HEALTH FACTORS					
<i>Heath Behaviors</i>					
Adult smoking	26.0%	27.0%	31.0%	24.0%	14.0%
Adult obesity	38.0%	33.0%	34.0%	36.0%	25.0%
Physical inactivity	33.0%	29.0%	31.0%	33.0%	21.0%
Excessive drinking	9.0%	14.0%	8.0%	11.0%	8.0%
Motor vehicle crash rate	42	25	40	31	12
Sexually transmitted nfections	366	444	537	803	84
Teen birth rate	94	60	56	65	22
<i>Clinical Care</i>					
Uninsured	22.0%	20.0%	22.0%	21.0%	11.0%
Primary care physicians	2,500:1	1,282:1	1,816:21	1,155:1	631:1
Preventable hospital days	133	78	118	95	49
Diabetic screening	80.0%	77.0%	79.0%	80.0%	89.0%
Mammography screening	57.0%	66.0%	62.0%	58.0%	74.0%
<i>Social and Economic</i>					
Children in poverty	26.0%	25.0%	28.0%	32.0%	13.0%
Inadequate social support	19.0%	21.0%	21.0%	25.0%	14.0%
Children in single parent	22.0%	36.0%	36.0%	44.0%	20.0%
<i>Physical Environment</i>					
Air pollution-particulate	3	1	5	1	0
Air pollution-ozone days	2	13	2	3	0
Access to recreational facilities	4	11	12	7	16
Limited access to health foods	33.0%	18.0%	36.0%	11.0%	0.0%
Fast food restaurants	41.0%	51.0%	48.0%	55.0%	25.0%

Summary

The overarching yield of this assessment is a very strong belief that education is a primary driver of community and individual well-being. There is widespread agreement that there is an exceedingly strong relationship between education, income, and health. While there are many diverse needs on the Mississippi Gulf Coast, it is abundantly clear from the May 2012 Community Assessment Report that educational attainment is a key element of our society, leading to economic security and better health practices. Until all of our children can read, write, and critically think on a level that will allow them to compete on a national and international stage, it will be very difficult to move our communities and the state forward. Many of our economic and health challenges may be overcome with a focus on education first.