



SWCAP

Southwestern Wisconsin Community Action Program, Inc.

**Community
Needs Assessment
2025**

Southwestern Wisconsin Community Action Program (SWCAP) utilizes a planning cycle based on a Results Oriented Management and Accountability (ROMA) framework. All parts of this cycle are guided by the agency’s Strategic Plan which, in turn, is informed by the Community Needs Assessment (CNA) every three years.

A CNA compiles both qualitative and quantitative data surrounding needs within the community. This document serves to guide the SWCAP Board and staff to understand the needs of the community and guide the strategic planning of the agency.

Data Collection and Analysis

The CNA is comprised of quantitative data, surveys, and interviews of program participants, Board members, staff, leadership, and the general public throughout our five-county service area: Grant, Green, Iowa, Lafayette, and Richland Counties. Due to having some programs that provide services outside these five counties, there is data that is indicated as Outside Service Area.

Survey

The survey was performed as part of the CNA, to better understand the needs of the general population and specifically those being served at SWCAP. English and Spanish surveys were distributed electronically and in person throughout SWCAP programs and partners in an attempt to reach a broad demographic and to increase participation. Links to the survey were posted on SWCAP social media sites and shared by partners. Postcards with a QR code to the electronic survey were shared with partners to be placed in their organization; leadership conducted presentations at college campuses and other partners to extend the participation reach. Surveys became available for 80 days, October 2024 through December 2024, receiving responses throughout the five-county service area.

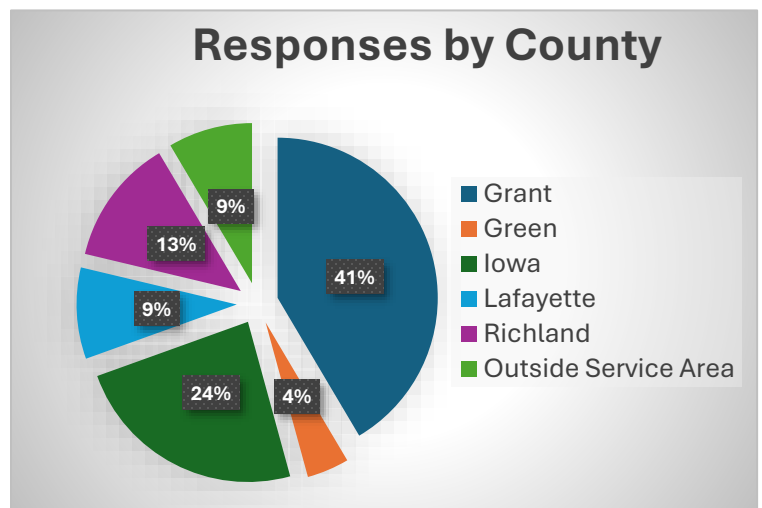
Interviews

Interviews were conducted with SWCAP Board members, leadership staff, and program staff. The interviews were conducted either over the phone, through video conferencing, or in person; all interviewees were asked the same questions.

Community Needs Assessment Findings

The CNA resulted in 298 responses, 118 residents of Grant County, 12 residents of Green County, 67 residents of Iowa County, 26 residents of Lafayette County, 35 residents of Richland County, and 24 individuals residing outside our five-county service area. Of the 282 participants, 85% of the respondents were female, 15% were male.

Several areas of need were identified throughout the surveys and interviews, all of which have been needs raised in the last several CNAs. Below is an overview based on the frequency the need was identified.



1. Housing:

Of the respondents, 37% identified housing as a gap in the community. Specific areas listed within housing include lack of affordable housing, the need for housing assistance, barriers to homeownership, and the need for transitional housing. This has been a reoccurring area of need since 2016.

“It becomes difficult trying to purchase a house with fixed income, or limited income. Usually turned away without a call back or response.”

Historically this has been believed to be due to aged housing stock and the lack of reasonably priced new housing construction. On average, 75% of the residents in the five-county service area are homeowners, 52% of those homes being valued at \$200,000 or more.

The average median rent is \$845 a month. According to the US Census Bureau, on average 55.6% of renters pay between \$500 to \$999 a month in rent costs, 27.4% pay between \$1,000 and \$1,999 a month in rent in our service area.

“Housing, we do our best to fill that gap. If the Platteville, Cuba City, Lancaster rent is \$1,200 a month, I don’t know how people can afford to buy paying that kind of rent. We have to get that back under control.”

Additional barriers were identified in the CNA beyond affordability, including prior evictions on rental history, record of felony charges, and lack of budgeting knowledge.

“Housing, specifically for people who are low-income who have a prior eviction, or felony charges on their record.”

2. Transportation:

Another need that has been high on the list for several years is transportation. Of the respondents, 15% identified transportation as a gap in the community. Specific areas within transportation were identified such as affordable transportation, the cost of vehicle repairs, and options for those who may not qualify for current programs.

“There isa lack of reliable transportation. We have LIFT and Work N’ Wheels, but not everyone qualifies.”

Living in a rural area, transportation is a necessity of daily life to get to work, access healthcare, or shop. With a limited number of options available, programs like LIFT have become a necessity for many individuals.

Additionally, vehicles need to have regular maintenance and be insured. The cost of motor vehicle maintenance and repair has increased by 5.8%, vehicle insurance has increased by 11.1%.

“Fixing my car is more than what I expected.”

[12-month percentage change, Consumer Price Index, selected categories](#)

“Transportation, we have some programs that can do it but they don’t have capacity and it’s more urgent.”

3. Mental Health & Childcare

a. Mental Health:

Responses came back with a tie between mental health and childcare as the third highest need. The last several years we have seen an increase in the need for mental health services. With an average of one mental health provider for every 734 people in our service area; we have a severe shortage of mental health providers.

Statewide there has been an improvement in mental health care providers. Our service area has also experienced an improvement, with the exception of Iowa County, which experienced an 11.41% increase from 2022 to 2023.

“More help for those facing mental health issues by creating activities to reach those struggling.”

“Mental health for those without insurance or on Badger Care.”

Wisconsin	370:1, 1 mental health provider for every 370 people <ul style="list-style-type: none"> National average 300:1 Poor mental health days 5.4* <ul style="list-style-type: none"> National average 5.1
Grant County	560:1, 1 mental health provider for every 560 people Poor mental health days 5.3 <i>Grant county is fairing slightly worse than the average county in Wisconsin for Community Conditions. **</i>
Green County	660:1, 1 mental health provider for every 660 people Poor mental health days 5.4 * <i>Green county is fairing about the same as the average county in Wisconsin for Community Conditions.</i>
Iowa County	1,260:1, 1 mental health provider for every 1,260 people Poor mental health days 5.3 * <i>Iowa county is fairing about the same as the average county in Wisconsin for Community Conditions.</i>
Lafayette County	530:1, 1 mental health provider for every 530 people Poor mental health days 5.4 * <i>Lafayette county is fairing slightly worse than the average county in Wisconsin for Community Conditions.</i>
Richland County	660:1, 1 mental health provider for every 660 people Poor mental health days 5.4 * <i>Richland county is fairing worse than the average county in Wisconsin for Community Conditions.</i>

* Average number of days people reported poor mental health out 30 days.

**Community Conditions include the social and economic factors, physical environment and health infrastructure in which people are born, live, learn, work, play, worship and age. Community conditions are also referred to as the social determinants of health.

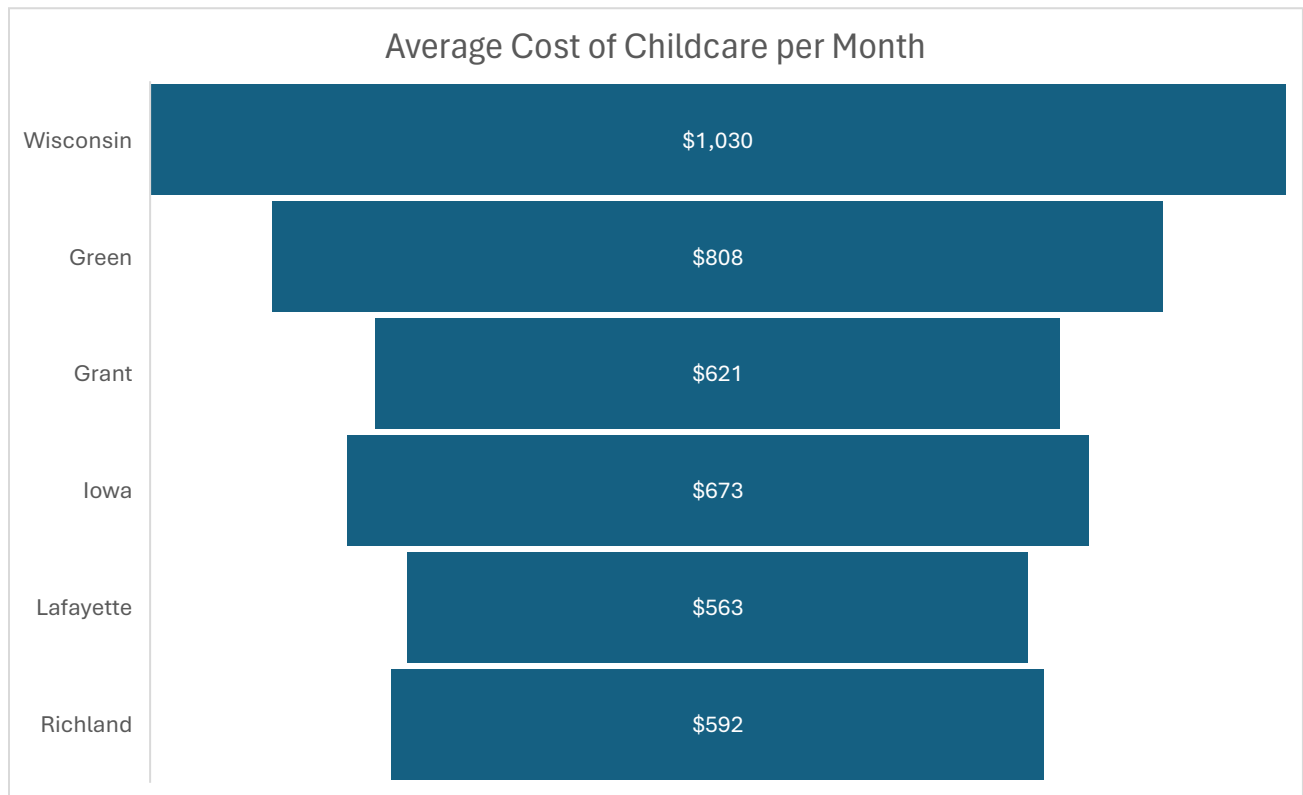
Change in the Ratio of Total Population of Mental Health Care Providers			
	+/-	2023	2022
Wisconsin	-19.19%	370:1	441:1
Grant	-36.07%	560:1	762:1
Green	-15.61%	660:1	763:1
Iowa	+11.41%	1,260:1	1,131:1
Lafayette	-8.30%	530:1	574:1
Richland	-8.94%	660:1	719:1

b. Childcare:

Childcare is not affordable for working families across the state, particularly for those who are experiencing poverty and economic insecurity. Paying for childcare is a huge financial burden for certain groups, including single-parent families.

In Wisconsin, families of three with two adults and one child, earning \$20,578 (100% of the Federal Poverty Level), spend an average of 53% of their household income on childcare. Families of two with one adult and one child, earning \$17,662 (100% of Federal Poverty Level) spend an average of 62% of their household income on childcare.

In Wisconsin, the average monthly price of full-time childcare is \$1,030 per child in center-based childcare. That’s 60% of the household income for a family of three earning \$20,578.



“Childcare services is a big issue, not sure if it relates to anything with SWCAP. I know a lot of couples where one person has quit their job to stay home with kids because they can’t afford childcare.”

4. Food & Elder Resources

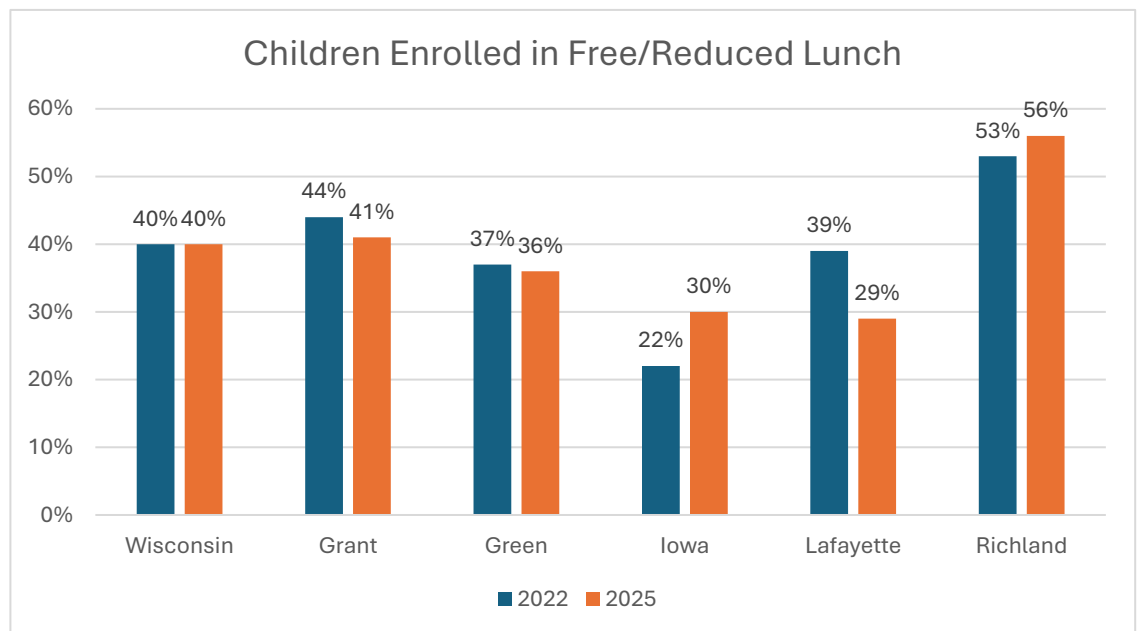
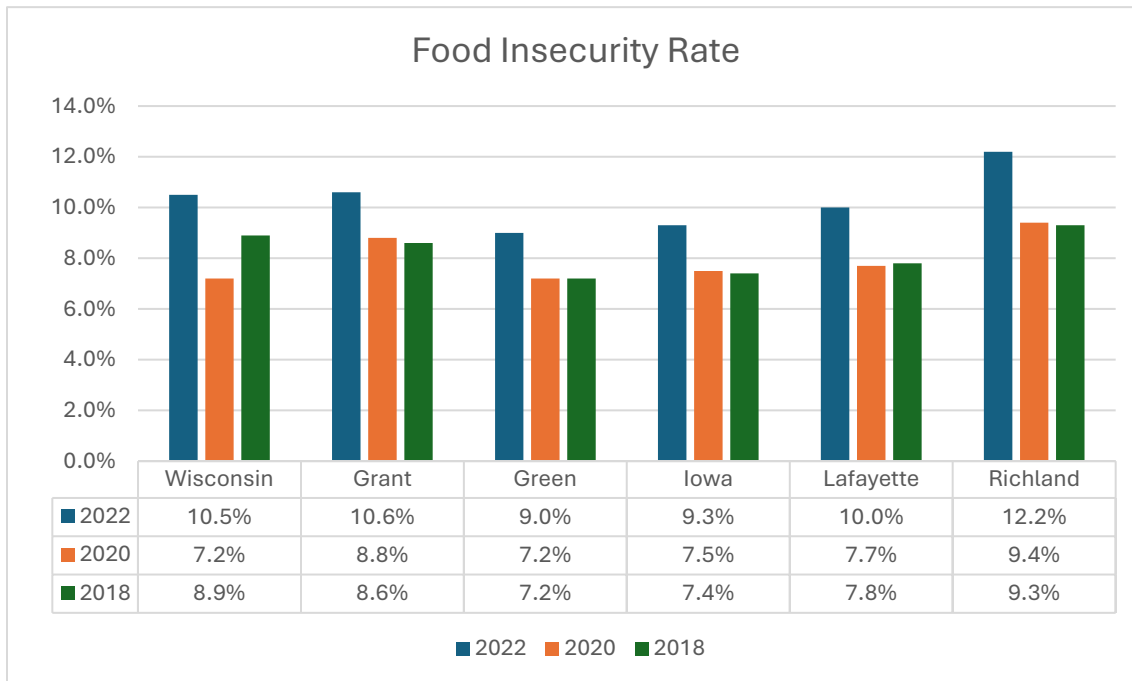
a. Food:

Food insecurity has been a common theme throughout the Community Needs Assessment this year and years prior. There was an increase in the food insecurity rate from 2020 to 2022 by 28.87%, Largely due to higher food costs and the phasing out of many pandemic relief measures.

“I know for us, we are having difficult a very difficult time affording proper meals. We can’t be the only ones.”

Regardless of whether a person officially lives in poverty or experiences food-insecurity, there are many people who need food assistance. In many cases, people who experience food insecurity are above the

federal gross income limit for Supplemental Nutrition Assistance Program (SNAP) of 130% of the federal poverty limit (FPL). Approximately 50% of people facing food insecurity are ineligible for assistance programs like SNAP. Across the state of Wisconsin, an estimated 617,790 individuals experience food insecurity.



b. Elder Resources:

One area that was newly identified need in this Community Needs Assessment was elder resources. This issue was brought up throughout the survey and interview process. Many participants indicated that the elder population are just outside of the range to receive program services yet still need assistance. Others indicated that

“Elderly community that are above the ‘poverty’ level. They have a fixed income barely meeting their needs and are unable to get help with things like weatherization, home repair.”

elders don't understand area resources. On average, 10% of people 65 or older in our service area are living in poverty.

There were comments regarding not understanding benefits available to the elderly or how to gain a better understanding of those resources. There is also concern regarding older adults facing barriers to accessing transportation. Some requests that are received throughout the agency involve tasks such as pruning or putting up plastic on windows. These are services that are needed but have no resources in the community to meet the needs.

	Persons 65+	Persons 65+ in poverty	% of Persons 65+ in poverty
Grant	8,867	838	9.5%
Green	7,114	582	8.2%
Iowa	4,632	541	11.7%
Lafayette	3,275	372	11.4%
Richland	4,102	511	12.5%

“Some area food pantries are a pretty significant concern. Elderly service, we’ve struggled with the ADRC a bit with what they do and what they provide.”

5. Substance Misuse Treatment

The final area of need, drug rehab, is another new area on the Community Needs Assessment. Drug overdose deaths are a leading contributor to premature death. In 2022, the number of drug overdose deaths was ten times higher than it was in 1999. These are due to both prescribed opioids and illegal opioids. On average, 2.24% of deaths in Wisconsin are due to drug overdose; Wisconsin’s overdose death rate is 1.93% higher than the national average.

“Local substance abuse treatment that works with Badger Care and other accessible insurance companies.”

The average cost for an individual seeking outpatient drug rehabilitation services in Wisconsin is \$1,708. There are a total of 327 active substance abuse clinics in Wisconsin, only two facilities in Wisconsin offer free drug rehab treatment for all clients.

Individuals in Wisconsin encounter significant barriers accessing drug treatment including financial limitations, lack of readily available treatment options in rural areas, insurance challenges, and the stigma surrounding addiction.

	Drug Overdose Deaths per 1000,000 people	Motor vehicle crash deaths involving alcohol
Wisconsin	29	33%
Grant	12	34%
Green	15	33%
Iowa	Not available	32%
Lafayette	Not available	25%
Richland	23	25%

Data

County	Zip Code/City	Responses
Grant	53573 - Muscoda	7
Grant	53804 – Bloomington	1
Grant	53805 - Boscobel	12
Grant	53806 - Cassville	1
Grant	56807 – Cuba City	2
Grant	53809 - Fennimore	7
Grant	53811 – Hazel Green	1
Grant	53813 - Lancaster	9
Grant	53818 - Platteville	58
Grant	53820 - Potosi	1

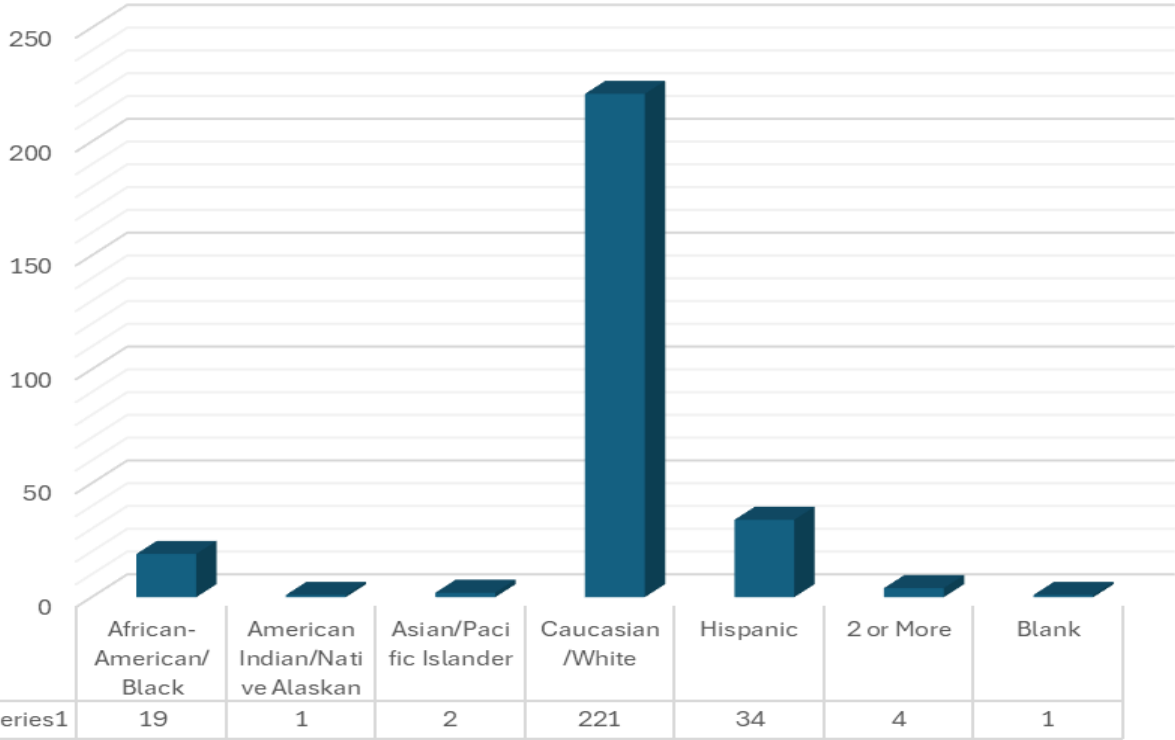
County	Zip Code/City	Responses
Green	53502 - Albany	2
Green	53520 - Brodhead	1
Green	53550 - Juda	1
Green	53566 - Monroe	5

County	Zip Code/City	Responses
Iowa	53503 - Arena	1
Iowa	53507 - Barneveld	6
Iowa	53516 - Blanchardville	2
Iowa	53526 - Cobb	1
Iowa	53533 - Dodgeville	27
Iowa	53535 - Edmund	1
Iowa	53544 - Hollandale	1
Iowa	53553 - Linden	3
Iowa	53565 – Mineral Point	15
Iowa	53580 - Rewey	1
Iowa	53582 - Ridgeway	5

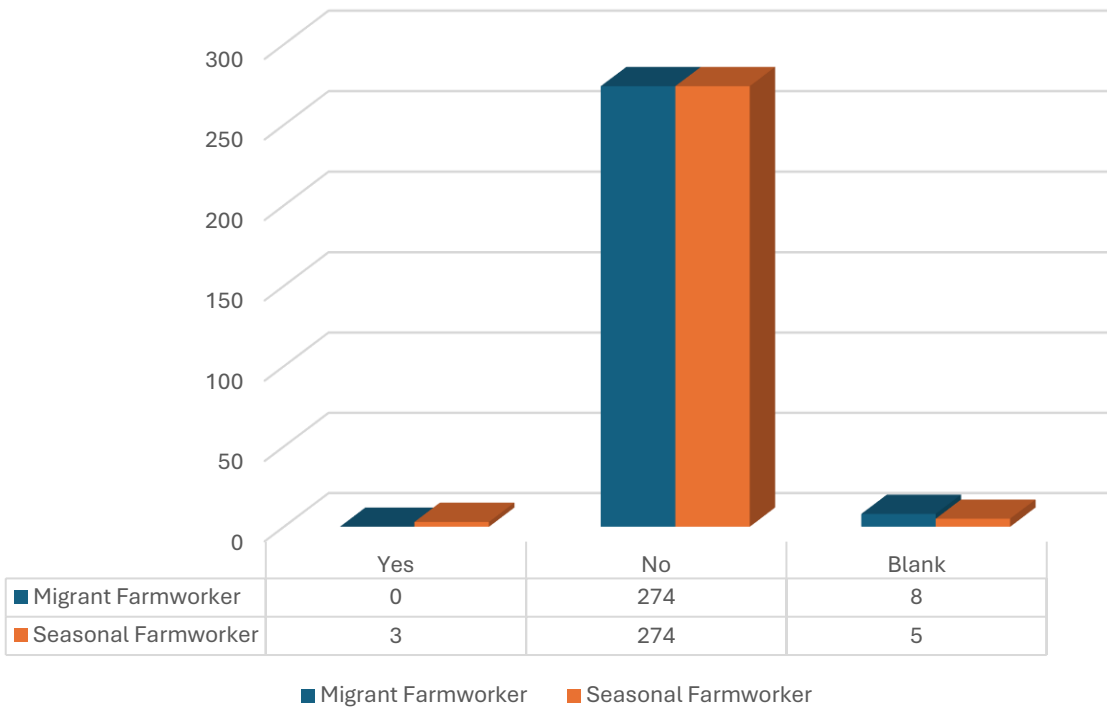
County	Zip Code/City	Responses
Lafayette	53504 - Argyle	4
Lafayette	53510 - Belmont	3
Lafayette	53530 - Darlington	7
Lafayette	53541 – Gartiot	1
Lafayette	53586 - Shullsburg	4
Lafayette	53587 – South Wayne	1
Lafayette	53803 - Benton	2

County	Zip Code/City	Responses
Richland	53518 – Blue River	2
Richland	53556 – Lone Rock	4
Richland	53581 – Richland Center	26

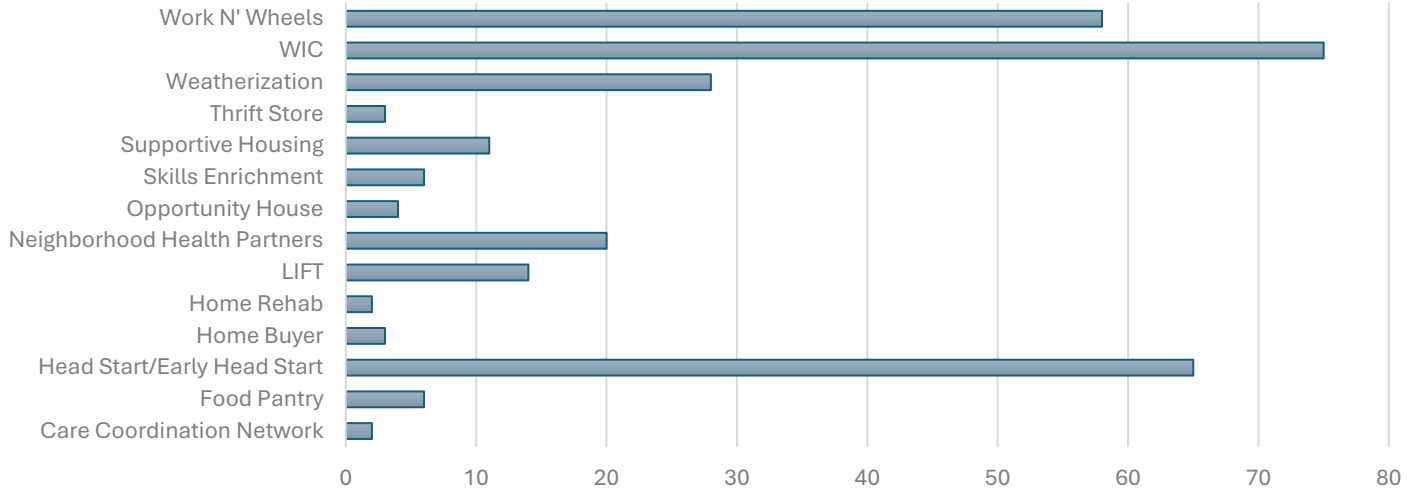
Response by Ethnicity



Farmworker Status

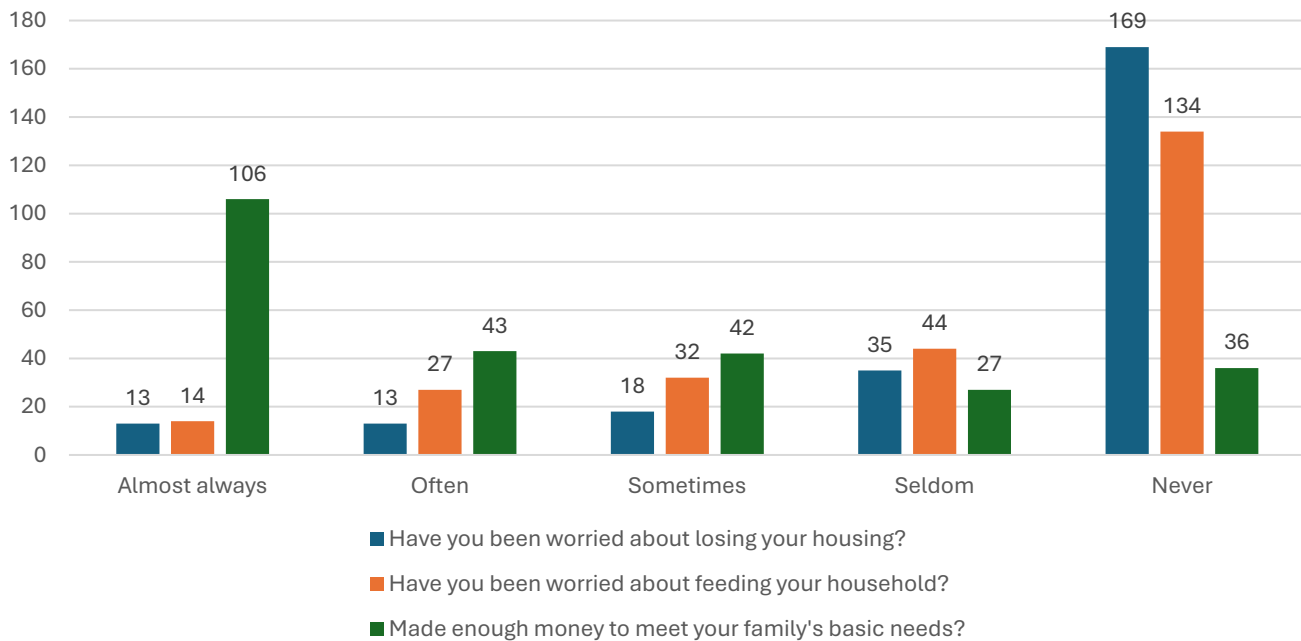


Program Participants



	Care Coordination Network	Food Pantry	Head Start/Early Head Start	Home Buyer	Home Rehab	LIFT	Neighborhood Health Partners	Opportunity House	Skills Enrichment	Supportive Housing	Thrift Store	Weatherization	WIC	Work N' Wheels
# Participants	2	6	65	3	2	14	20	4	6	11	3	28	75	58

In the last 12 months



Respondents were asked about the importance and satisfaction level of multiple areas: food security, childcare, healthcare, transportation, housing, education, and the community. Below are the responses in regard to each area.

Food Security:

- Affordable food availability
 - 96% indicated the importance of affordable food
 - 51% indicated dissatisfaction with the affordability of food
- Healthy food availability
 - 93% indicated the importance of healthy food
 - 29% Indicated dissatisfaction with availability of healthy food
- Enough food to feed self and family
 - 95% indicated the importance of having enough food.
 - 19% indicated dissatisfaction with having enough food to feed themselves and/or their family.
- Cultural foods
 - 59% indicated the importance of having access to foods that meet their cultural needs.
 - 8% indicated dissatisfaction with having access to foods that meet their cultural needs.

Childcare:

- Affordable childcare
 - 75% indicated the importance of affordable childcare,
 - 36% indicated dissatisfaction with available affordable childcare.
- Safe childcare
 - 82% indicated the importance of safe childcare,
 - 15% indicated dissatisfaction with available safe childcare.
- Quality childcare
 - 80% indicated the importance of quality childcare,
 - 22% indicated dissatisfaction with available quality childcare.

Healthcare:

- Medical health care
 - 100% indicated the importance of medical health care,
 - 0% indicated dissatisfaction with medical health care.
- Medical health care that meets my need
 - 100% indicated the importance of medical health care that meets individual needs,
 - 19% indicated dissatisfaction with medical health care that meets their needs.
- Mental health care
 - 100% indicated the importance of mental health care,
 - 18% indicated dissatisfaction with mental health care.
- Mental health care that meets my need
 - 94% indicated the importance of mental health care that meets individual needs,
 - 17% indicated dissatisfaction with mental health care that meets their needs.
- Affordable lifesaving medication
 - 95% indicated the importance of affordable lifesaving medication,
 - 12% indicated dissatisfaction with affordable lifesaving medication.

Transportation:

- Have reliable transportation available
 - 99% indicated the importance of having reliable transportation available,
 - 8% indicated dissatisfaction with availability of reliable transportation.
- Transportation services in area meet my need

- 88% indicated the importance of transportation services that meet their needs,
- 27% indicated dissatisfaction with transportation services that meet their needs.
- Able to afford regular maintenance on my vehicle
 - 96% indicated the importance of being able to afford regular maintenance on their vehicle,
 - 41% indicated dissatisfaction with the affordability of regular maintenance on their vehicle.
- Able to obtain a vehicle loan
 - 79% indicated the importance of being able to obtain a vehicle loan,
 - 31% indicated dissatisfaction with being able to obtain a vehicle loan.

Housing:

- Quality housing available
 - 92% indicated the importance of quality housing available,
 - 31% indicated dissatisfaction with the availability of quality housing.
- Safe housing
 - 94% indicated the importance of safe housing,
 - 16% indicated dissatisfaction with the availability of safe housing.
- Able to afford my current housing
 - 92% indicated the importance of being able to afford their current housing,
 - 25% indicated dissatisfaction with the affordability of their current housing.

Education:

- Quality education available
 - 90% indicated the importance of quality education available,
 - 27% indicated dissatisfaction with the quality of available education.
- Education available to me will help me get a higher paid job
 - 78% indicated the importance of the education available to aid them in gaining a higher paid job,
 - 12% indicated dissatisfaction with the education available to aid them in gaining a higher paid job.

Community:

- My community as a place to live
 - 97% indicated the importance of their community as a place to live,
 - 11% indicated dissatisfaction in their community as a place to live.

Low vaccine rates Mental health stigma

How about some help for single moms, domestic abuse victims, low income, mental health diagnosis and disability potentially or homeless mothers and children low income unemployed mothers
mental health, economic development, housing

Mental Health help for those without insurance or on Badger Care, increasing WIC in person visits, need for advertising SWCAP services more, etc.

I'm new to the area, had a rough patch and am trying to get my life together and our community isn't very helpful sometimes due to stigma and a culture of common enemy intimacy, gossip, adults that's still are in the mean girls club. Warmer community culture would be nice.

ELL tutoring and resource support for Latino population in Grant County

I own a retail business and usually in the winter I will have homeless people come in. They don't always say that they are homeless, but when I visit with them, I can find out their needs. I often keep gloves, hats, neck scarves, as well as cans of veggies, soup, etc., with pull tabs handy. These might be missing a label but are still good. I have also referred some to local churches or local police for help with housing or other needs. I am glad to help whenever I can. I would like to see where different resources can be combined into a list with contact info so that we can find help for each person's needs. I am sure that there are others who are helping, but if we could work together, we could better serve our homeless neighbors.

I think SWCAP would be the best conduit to deliver elder resource information not provided by municipal or county agencies that are restricted by funding and state guidelines

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I'm not sure

Housing assistance housing availability

transportation, congregate meals for senior

public transportation

affordable rental/housing

Help for seniors for maintenance items, yard work, etc. Would be nice if high school or college kids/organizations could do that. Property taxes getting very high in Platteville.

homeless

Mental help assistance

Homeless need housing

wait listed 4 yrs for home repair

Nursing homes

childcare, help with applying for disability/eligibility

Addiction

Housing

Rent and transportation

More supportive housing, dental care needed, more mental health care needed

Transportation, support

Not for me personally

Availability in fast women's health

Things to do in the winter months

Affordable Housing

No available transportation on weekends or after 430 pm.

There is little no housing availability in Monroe for people with disabilities. Most apt complexes in Monroe want 3x times the rent in income. Well, that isn't happening on Disability. The only low income apt is on a waitlist for a long time. My daughter has been homeless for 7 months. Unacceptable.

Affordable housing.

I feel that affordable housing and food are the biggest needs.

Affordable Housing

Elderly have too much pride or are unaware of the services available to them.

Drug education and addiction services

Elderly community that are above the "poverty" level. They have a fixed income barely meeting their needs, and are unable to get help with things like weatherization, home repair.

Mineral Point needs Lift transportation with a Mineral Point Driver that way it doesn't cost \$17 dollars to go to the store or gym.

It becomes difficult in trying to purchase house with fixed income, or limited income. Usually turned away without call back or response.

Need more affordable housing, ideally programs to encourage home ownership. Not Enough free spaces for people to just exist. Need affordable health care so people can get jobs that don't include benefits. Mental health services and addiction recovery services, could use more of both.

Child care

A Head Start classroom that is located in the city of Fennimore.

Food costs too high not enough people can afford enough to eat

Affordable daycare, after school hours. Low cost housing.

I know for us, we are having a very difficult time affording proper meals. We can't be the only ones.

Fixing on my car it's more than what I expected

More help for those facing mental health issues by creating activities to reach those struggling.

Assistance with personal needs/items

Transitional type housing and programming. The kind that really walks you through budgeting in a way that holds you accountable. The kind that has financial control and you work and learn your way into progressively getting it into your own control.

More car programs in Madison are needed. And either the work and wheels program it would be nice to be able to go to a choice of different mechanics

Housing affordability car repair funds

Drug rehab

More food pantry access/hours, more locations, more access for single individuals struggling with housing/renter assistance, more community support and more communication of the programs offered, non-profit contributions

Income limits to receive certain services/help are too low and prevent many people who need help from receiving it.

MENTAL HEALTH

Help for housing

Help with mortgage payment and water payment

Need for child care to be able to work a full scheduled work week.

Affordable housing and child care.

Proper, safe affordable housing. Senior housing

I think there needs to be additional substance abuse services.

Local Substance abuse treatment that works with badger care and other accessible insurance companies

Not much for services

Help understanding Medicare options for the elderly and disabled.

I think the income requirements need to change. My fiancé and I just lost all our assistance due to him getting a raise. We are struggling now

affordable transportation for those NOT enrolled in managed care programs.

Housing and homeless services

Quality childcare with openings

Would like better access to English second language class and also Spanish language class. Need to have eradication plan for cockroach in homes, apartments, businesses. Including education and actual plan that works

Affordable, transitional housing, community health workers, social belonging, culturally appropriate leadership
Transitional Housing, better transportation, more resources for the ageing population,

With all the people who have come from central America and Mexico, employment has become increasingly hard to find.

Medical insurance that includes dental

Interview Results

1. What do you believe are some of the primary drivers of poverty in this region?

- Lack of resources for children with needs and parents ability to take off work to attend.
- I believe the primary driver of poverty in any region is wage suppression in favor of profit/unending profit expansion. Another primary driver is fewer employment options in a rural area. Often, more resources are required just to maintain employment, e.g. a vehicle to travel to work. Finally, generational mindset could be a primary driver. When a person's family has always been in poverty, that is what is comfortable; they may not be able to conceptualize another way, or a sense of pride or fear may get in the way.
- Education, access to education, grades, higher education, knowledge base of how to do it. Cultural, what they've learned from their families. Positive goal setting, so they can see a way out. On the other side, not planning in life or the uncertain circumstances in life that tap their resources. Living off social security is not a living, nor was it ever intended to be.
- I don't think a lot of people make a working wage to get out of poverty. They are working two or three jobs to make ends meet. That's a big one to me. We don't offer enough highly paid jobs.
- Transportation, lack of food, cost of healthcare including health insurance.
- Lack of education, without a good education it's difficult to get a decent wage to move out of poverty. High housing costs, including utilities. Food costs and lack of housing, energy costs, transportation are also contributing factors of poverty.
- There aren't enough employers who pay enough or give enough hours to people. A lot of people who work as either on-call or as needed workers, and those are the people that I see at the food pantry and those that I give rides to as well. Lack of reliable transportation.
- Low wages, that about it. There are low wages in our area.
- There is a lot of need.
- Low wages coupled with the high cost of living (rent, childcare, medical costs, education, transportation, etc.). For non-US citizens this is even more pronounced.
- Educational access, lack of childcare. People can't educate themselves, they are forced into the jobs that can fit into their lives as parents and impact economic mobility. Stagnation, population growth stagnation in order to improve your economic position, it helps to have more money coming in. Richland County is losing population which is the opposite of what you want to see.
- Housing for sure, low-income jobs, not enough jobs maybe, transportation. Having a vehicle, being able to get a vehicle.
- This is a huge farming community; the farmers have been slowly dwindling down. The older community is struggling, they didn't pay into social security, so they are living on almost nothing.
- Probably living wage jobs, lacking resources. Whether people don't know that certain resources exists, or we just don't have them.
- I think that some of these small communities in our region, there is a lack of industry. In Madison you could apply for 10 to 15 industries that are paying a decent wage. Here it may be one or two, and they may not be hiring. Limited opportunities, limited wages. Housing is really, really expensive. Lack of affordable housing can drive people into having to rent which may make things tight for them even with a decent paying job. Public transportation, it's not really feasible like in Madison where you could take a bus. They may get a cheaper vehicle, which leads to repairs, which impact their funds. Childcare, it's hard to find especially under two years old.

- Lack of affordable housing, lack of living wage jobs, generational poverty.
- Unemployment

2. What do you consider to be the most significant strengths of our community (region)?

- Many resources but not a lot of awareness.
- Caring passionate people who want to help others.
- Smaller communities, if you are a part of the community, can have a strong sense of helping others. Sometimes it can be hard to break into that. Social ties can be a strength. I'm thinking now if you're on the outside, how do you get in. Overall, smaller communities, you can make connection because there is only so many social circles there. When I was in high school in Madison, my parents didn't know my friend's parents until they became my friends. Here you may know parent's names of other kids in a classroom because it's smaller. You may have more resources in Madison, but you become a name or a number there. Wide open spaces, you aren't constantly surrounded by noise, concrete. There's pros and cons to everything. Sometimes smaller school systems provide more for kids to be involved in a team or a club. They work hard to include kids in a variety of things as opposed to Madison where they cut kids from things because of the number of students. Here kids don't have to compete to be the best, they can just be kids. Teachers get to know kids better due to the smaller population. Churches are a pretty important part of a small community; they are viewed as a resource and a social connection. Maybe more than in Madison or Milwaukee because they have more resources. Schools really want to get and keep kids involved, clubs or activities. They also had scholarships, if my daughter would have stayed as part of the drama program for four years she would have had a scholarship to put toward college. They look at how they can develop kids and assist them with further education.
- Strong family values and spirit of volunteerism.
- There are willing collaborators out there, you have to find them. They aren't easy to find. There are people out there that have the same mission and values, want to help people, want to see them succeed. That's one strength. We have some resources, healthcare related, we are fortunate to have two free clinics. Sometimes accessibility is hard, but we have them. We have OB care for deliveries which a lot of areas don't have, they have to drive an hour to get there.
- When there's a need in the community, the community reaches out to help. It's very tight knit, when someone is in need people reach out. Someone lost their barn and the hay for their horses; the community came together to provide what was needed.
- We do good with collaboration among agencies. In Iowa County I work a lot with law enforcement and court system, they are victim oriented.
- For all that they bicker and have political differences, I do feel there are strong ties within the region. I'm an only child, but from what I understand you will fight your sibling to the death but if someone goes after your sibling you will fight them for to the death. The community is like that, they have a deep devotion to it's values and it's way of life. It causes a sense of resiliency. I would rely on my neighbors if I needed to, I think I would feel comfortable approaching them if I had a concern.
- All the things that are addressed at SWCAP are needs. I was familiar with Head Start and food banks. There is a real strength at SWCAP, wish there were more organizations like it; organizations like SWCAP, that are trying hard. Can't think of other organizations, haven't been involved in this very long.
- Hard workers in our region.

- It used to be the churches; I don't know if it still is. Churches used to bind the community together. There are still some churches that do good work; meals, food pantries. We have good employers with a foot print, Cummings, Cardinal Glass, Lands End.
- Local communities have strong support from church congregations. Non-profits can be strength in the community as well.
- The people, they look out for their neighbors and help when/if they can. I feel that we've done a fairly good job of education on resources.
- Quality schools, good church, good community events; things that pull people together, find partnerships. We only have a few economic drivers, Cummins, SW Tech. I don't even think I can say UW Platteville, they've laid off a lot of people. SW Tech is getting people through school and people are staying here.
- I run an Airbnb, people ask me why anyone would come to Richland Center to stay at you BNB. We have a marketable area, the driftless area. The draw for people to come here, a rural, sort of city, in between. We are an hour away from all kinds of incredible opportunities. It's an hour to the Dells, Dubuque, Madison, the airport. I think we do a poor job marketing that. We have a beautiful area, decent tax break, down-to-earth.
- Many people are hardworking and caring and will step up for neighbors/community members in times of need.
- Small communities working closer together.

3. *Have you noticed any gaps in the services or resources available in our community?*

- Closure of food pantry and the high need of church drive pantries.
- We get a lot of requests from senior citizens for help with routine maintenance items, like pruning overgrown vine or putting plastic up on windows – there aren't any good referrals for these situations. We get a fair number of requests for help with picking up and delivering appliances. Mortgage payment assistance as a lump sum to cure delinquency once the hardship is resolved and/or ongoing assistance to prevent delinquency while a homeowner is experiencing a temporary hardship.
- From my perspective, not many. Then again, I'm a go getter looking for things. I have to look at it from the perspective of what resources are looking for that they don't have. Someone staying at my BnB said you don't have Uber here. Education, it would be good to get people closer. Some resources where people can get hands on training. I think people would support that. We are missing housing. We have some horrible housing gaps. We need to get more people here and we don't have places for them to stay. We have good housing potential, in older homes that could be refurbished. Guidance of how to rehab those homes would be great. Some way to do community communications. You can go to the Richland Center tourism site and it's not always correct. If we could hone in on this as a region.
- Affordable housing, well-paying jobs. For non-US citizens these gaps are larger.
- Housing, we do our best to fill that gap. If the Platteville, Cuba City, Lancaster rent is \$1,200 a month. I don't know how people can afford to buy paying that kind of rent. We have to get that back under control. I think people are going to struggle putting food on the table soon. There are food pantry popping up.
- Yes, affordable housing, when we do have homeless we struggle with what to do with them.
- It is difficult to find affordable housing and/or rental to meet the needs of all citizens of our community.
- There is a lack of reliable transportation. We have LIFT and Work N Wheels but not everyone qualifies.
- Lack of affordable housing.

- Senior food/meals in the community. Not enough for seniors around, if you are only delivering meals to seniors, it's not enough. They need interactions. Childcare services is a big issue, not sure if it relates to anything with SWCAP. Know a lot of couples where one person has quit their job to stay home with kids because they can't afford.
- There are things that I know that exist that aren't on offer. I'm from the east coast, went to school in Madison. When I'm dealing with guardianship and placements, access to IEPs, social services. The providers do their best but they suffer from lack of resources. There are things that are done elsewhere and aren't done here. It also may not be feasible around here. Even without getting into the specialization level of counselors, reliable access to social workers in all of their context. There are limited to what social workers can do, someone to do the research, to make the calls on your behalf, the search for additional resources. I want to ensure that the person under my care is getting resources to live their best life. Having a dedicated social worker who can be on the lookout, knowing what is out there and the education that they can offer, the basics, the support, the expertise.
- Reliable transportation, counseling seems to be a big thing especially for children, lower income housing.
- More in domestic violence, women's outreach. I think Family Advocates is the only thing in our region. Not everyone has a vehicle or can get the help that they need. I wish there was something in the region to help support women in the DV area.
- Transportation, we have some programs that can do it but they don't have capacity and it's more urgent. Housing, specifically for people who are low income who have a prior eviction or felony charges on their record. Some areas, food pantries are a pretty significant concern. Elder services, we've struggled with the ADRC a bit with what they do and what they provide, having the resources for them or their adult children.
- Public transportation, I know it's not very feasible. If you live in Darlington and want to get a job in Cummins in Mineral Point, it's not possible to get to work without a vehicle. Rental housing and apartments, it can be hard to get into communities sometimes. They will rent small houses but it's by word of mouth, it's not in the papers. Childcare, we offer it but it's not as much as we need. Some small communities don't have grocery stores, Kwik Trip has filled that niche. We only have one community college in our service area, SW Tech, maybe Blackhawk too. We have open four year college with UW Platteville. Summer programming is a gap, what do 5-, 6-, or 7-year-olds have for childcare if we have a lack of childcare. What do the families with kiddos do when schools have the scheduled early close? That happened to me with my daughter, the school closed at noon every Friday and she was only 12, she couldn't go to childcare.
- Housing, certain medical specialists, family promise – get community members involved in hands on helping and increase awareness of homelessness.

4. Based on your experience, which community resources do you consider most valuable and why? Are there particular programs, services, or organizations that stand out as especially beneficial?

- Community Health Workers, food pantries.
- SWCAP's approach, whole family/no wrong door, should increase ease of access.
- Childcare for the population that has young children. It's the first step in having options for work. If you don't have children, access to food where you don't have to drive. Darlington has a grocery store and a Dollar General, Mineral Point's grocery store closed in the last few years. If Darlington didn't have a grocery store, I would have to drive to Dodgeville or Platteville to buy groceries. Or get to know my Amish neighbors. Access to food is important to everyone. If

you're older and aren't comfortable driving to Dodgeville, more comfortable driving on the slow streets of Darlington, it would be hard without a grocery store.

- Salvation Army has been rather helpful, they can provide food vouchers, hotel vouchers when it's more urgent. They've been helpful when CHWs have a family in need. Transportation, that is an absolute must have. Whether it's to get to food, work, healthcare provider. Housing is a must because it's such a problem. If I didn't work in the role that I do, I wouldn't have any idea of the housing issue. We may not be the one to do it, but it's needed in the area. Food, those are the three biggest resources.
- Badger Care, Food Share, Head Start, the Free Clinics, and Emergency Medicaid for non-US Citizens play a huge role in helping families. For non-US citizens without children born in the US, many of these programs are not accessible.
- SWCAP is very well rounded in what we offer, you see that on social media. That tells me we have a huge impact on the community. Knowing what's out there, I think it's SWCAP. No one else makes that big of an impression on me, other than SWCAP, I can't think of another entity that makes me go 'wow, I like what they do.'
- I bring up Work N Wheels a lot in my profession, homelessness, we're trying in this area. I think we're victim focused and helping in this area, especially in treatment court. SWCAP is a big one, Family Advocates.
- Head Start, that ties into everything that I've been talking about. Education for the children, childcare. I've been staying on top of the articles that the closer of Head Start across the state and the impact. I've sure it's \$3 to \$4 of economic growth for every dollar spent on the Head Start program. Any social services, I work mostly with the county level. My belief is our obligation as a society is to establish a minimum quality of life for our most valuable. Shouldn't be a billionaire if we have a veteran un-housed. HHS is the foundation of what our society should be, they are caring for the most valuable among us. Any social services, whether government or faith based, do a lot of good work. Anyone who is willing to devote themselves to the service of others.
- Planned Parenthood, childcare, things for seniors. WIC, the specific programs. I like the ADRC, services for "old fold," services for Head Start. I can remember way back when my sister was in grade school, the little Head Start bus would come.
- Green County development corporation, they have a finger in almost every pie now. The biggest thing they have going right now is having high school kids build houses, they have a lot of donations and resources. Remodeled one last year, and building one this year.
- LIFT is very valuable to fill that transportation gap. The food pantries, even though they only qualify one a month, it fills the gap. Health care, we have a free clinic but it's slammed. They don't have enough people to help. And dental care, they forgo it because it's expensive and not covered by Medicare or Medicaid, it's a big gap. ADRC has resource guide, it's excellent for telling people what's available. I believe it has resources in other areas, Madison.
- Housing/Energy program, help qualify residence receive energy assistance for high utility bills. The LIFT rides provide much needed rides to/from doctor's appointments, work, plus. Home Rehab program allows homeowners to reinvest in their own home, while building equity. This program puts emphasis on home ownership and not financial burden on the non-profit.
- The food pantry, a lot of our small communities have rallied around that and a lot of the little churches in the smaller communities provide some sort of service. And the ADRC are good community organization resources, they have services to meet the needs of the people in Iowa County.

- ADRC the meals program, it helps a lot of people that are trying to stay in their homes. The delivery of meals is a godsend, they wouldn't be able to stay in homes. Without the counseling components, people wouldn't be alive.
- Elderly, the ADRC is incredible resource that is not utilized as much as it should be in my book. People don't realize those resources are there. The city offices, if I have a question I go to them, government services, that's usually where I start. Kiwanis, Lions. The Chamber is trying, I think they could do better. We have a group around here called Rejuvenate or Revitalize, they hold all kinds of events. A 4th of July event, Best of the Year; they do a really good job. They did COVID Bucks in the area when you couldn't get out.
- I'm currently very interested in community and mutual aid resources, true community programs with robust community buy-in and participation, and how they balance with radical self-responsibility. If isolation and disconnection is what is allowing extreme divineness to grow among us, how do you see ourselves in each other and trust one another without becoming self-denigrating or stagnant.
- High cost of housing, lack of housing.

5. *What do you see as the primary challenges or barriers that individuals face when trying to access resources in our community?*

- Having the funds to drive to resources.
- America the corporation; rugged individualism; not starting young.
- Where to find them. Google doesn't really provide the answer of where to find things. Knowing there are resources there to help, I think a lot of people don't know the resources are there.
- There are long lines at food pantries. There is one, Rubies Pantry, that charge people to go there. They charge them \$25 to go and bring out two boxes. Then they take what they don't want and turn it back into the food pantry. ADRC, so many people rely on the food program. We need to be able to connect people to serves better. I have a daughter who is in an opioid recovery program. It's really hard to get her reengaged into the community. It's hared to get a place to rent or a job as a recovering addict. A lot of time people don't even know of the resources in the area. Or they don't realize all that are offered in one place.
- Transportation, the knowledge of knowing what resources are out there, sometimes I feel like they know what the resources are but don't have the knowledge to understand totally what that means. If I come to ADRC, what resources they have and what they mean to me. Generational poverty, stigma and access to internet.
- The administrative process of accessing programs is a big barrier. For many, it's confusing and off-putting. Transportation is also a big constraint. For non-US citizens these barriers are even more pronounced.
- Often the individuals are not aware of the variety of programs available to them. Once they become aware of beneficial programs the paperwork is overwhelming.
- The big one is transportation. Finding sufficient housing, there are a lot of people that are temporarily housed. I know of people living in ware-houses because that's all they can afford.
- Lack of knowledge, there are a lot of resources that are out there that people don't even know exist. The ADRC, there are all kinds of stuff that people don't know that exist.
- Small towns, I believe, not enough social events to get a grasp on what the needs are. I don't know what SWCAP gathers information. How do you gather information that is most important, in Belmont there is more than in Rouie or Platteville. People aren't aware of what's available. When I got to a certain age, there were things available to me that I wasn't aware of. No training on what to do when getting social security age. Information is necessary. There are things that adults pay attention to that 'kids' don't, you don't pay attention until you need to.

- Education but in a different way. Social services can tell you what's out there. It can be hard to get the information you need to get the service, transparency on the organizations side on what is available.
- For sure transportation, or gas vouchers, trying to get back and forth to appointments, especially out in the rural areas. It's difficult.
- From a financial perspective, they may be just over the income threshold and are left in a void. They need help, they can't because of their income level and maybe their bank won't help them. They can't get the financial resources they need. People who live in mobile homes who own the mobile home but live in a mobile home part, they aren't eligible. They have to own the property underneath, and we can't help them. There isn't a program out there to help them.
- Accessibility, when they call somewhere if they don't have luck with that service, leave a message and don't hear back. If they reach out today, someone needs to reach back out today.
- People don't always know. We're not always sharing all the resources that are available. We'll share if you ask or if you need it, not everything that is available. I got WIC, they never told me I could have received childcare assistance, they never told me about food stamps. They didn't branch out. It can be hard to ask for help. There is a lot of paperwork and sometimes people don't think it's worth it. Do we offer hours beyond what someone's workday may be? Transportation to get somewhere? Access to the internet may not be available where they live.
- Awareness of services, how to access.
- Awareness.

6. Based on your experience, what do you consider the top three issues that need to be addressed in our community?

- Transportation, food insecurity, insurance.
- Housing, good paying jobs, places for people to come together (gathering, youth, community centers).
- Housing, childcare, transportation.
- Transportation, housing, food insecurity.
- Aging population and their ability to access programs. Communication in the community seems to be a challenge. The state is seeing an increase in getting their furnaces outside of the program and then asking for assistance to pay the bill. Those that fall outside the parameters of the program (income level). They are cutting the funding for the meals on wheels program, there are people who need those meals that can't get out.
- Housing, transportation, counseling.
- Childcare, housing, education.
- Access to affordable housing, childcare, and transportation. These are at the foundation for any efforts to move out of poverty.
- Childcare, senior issues, national healthcare.
- Housing, food deserts, low wages.
- Housing, transportation, medical care.
- Education, housing, food.
- Housing, affordable housing, access to resources, hours of access.
- Shelter/housing, reliable food and being able to access it easily, mental health and being able to have enough connections pieces to appropriate mental health access. Take the shame away from it, the stigma.
- Housing, skilled workers that want to work, vision. I think if people had a vision of where things are going, what the possibilities are, I think that would change the other topics.

- Awareness seems to be a big one. Accessibility challenges spanning multiple generations, older people (or people living in the country) may not have internet or know how to use cell phones to access and provide info/docs (don't have computers or ability to scan docs); elderly and/or disabled people may not be able to drive or have reliable access to rides for in-office appointments.
- High cost of housing, lack of housing.

7. What are the biggest challenges or obstacles to addressing these concerns?

- Funds for rent to keep people in their home.
- America the corporation; rugged individualism; not starting young.
- Housing - In Richland Center area, land that people are willing to have developed. We are kind of rural, don't want to see big city populations so they don't want to sell land. Muscoda is having a housing boom. A company that refurbishes wind turbines and reuses them. They have a need to house the people to work there. Getting contractors or developers willing to come in on small scale projects. Skilled workers - The resources to get the skills. Where is SW WI do you go for those. The only location is Fennimore. They advertise for welding classes but you'd have to go to Fennimore. Vision - People, some people don't want it, to wait and be patient, to see what it is. It cannot be complicated. Get tied up in the details instead of focusing on where we're going.
- People should be earning a living wage that allows them to cover the basic five: housing, food, medical care, transportation, and education.
- Mental Health – Making people aware it's ok to have mental health issues. Food – Being able to supplement that food bill, wherever we can. Connecting low-income families with food sources. When they put out a call for filling the shelves, people step up and help fill them. That's been my experience in Platteville. Housing – I think we're on the right track, building so they have equity. We have an opportunity here to see if it will work.
- Housing – I feel there isn't a lot of landlords that want to rent or build, that want to accommodate Section 8 housing, again stereotypes "those people." Hours – The mindset "we've always done it this way." They can figure it out and get there. No one seems to be willing to adjust their hours to accommodate the people. Resources – When we have lack of resources everyone pulls back on resources even when that is when we have a higher need of resources. The mindset of shouldn't we be doing some outreach.
- Quality education for all. Adequate housing for all. If retirees and middle-income individuals have reasonable housing stock available to them, this opens new housing stock for lower income individuals. All of us must learn to live within our means, as well as build homes which are smaller in footprint.
- There isn't enough housing, and insufficient medical care for poor people. I know several undocumented individuals that live in horrible conditions. They drive and have semi reliable cars, but they don't have drivers licenses because they are undocumented. It used to be if hospitals took federal money, they had to care for anyone who came in, it filled up the ERs. I don't know if that's the same anymore.
- Housing, lack of people to build houses. Lack of developers come into rural communities and spend money to alleviate the situation.
- Money, the funding could be better. Funding is a big thing in a lot of different categories, I don't think funding from the state or federal government is done correctly. Lack of networking, which is hard to do in a small town/area versus in Madison.

- Investment, ultimately money makes the world go around and we don't have the developers who are willing to come in and build. We don't have the legislature support to keep the campus open.
- Funding, that would be the biggest thing. Finding grants to help. There's such a big need, I don't know that it's ever going to go away.
- Funding, obviously, and having the manpower to administer.
- Funding and collaboration. Funding because who knows what the future holds for federal and state funding. Collaboration, we cover a five-county area, there are enough people out there who want to work together to make this a better place to live. We need to look more regionally, none of the small communities have the resources to do it on their own.
- Transportation – It's costly, it's not feasible to run a bus route to Dodgeville to Platteville and back. Finding drivers, will they use their own vehicle. Housing – In the small communities we have old houses that are in need of repairs. To put in an apartment building is an investment, would you have enough people interested. I like Brett's idea of lower price point homes; I would like to see us go lower. Childcare – It's a double-edged sword. It's not a profitable business; well, it's a challenge to make it profitable. Shouldn't make it profitable on the back of people that need childcare. Our childcare license is based on the number of kids, it's a money maker. They are making money in that in my opinion.
- Money, politics/resistance to change, "NIMBY."
- Awareness.

8. *Can you share a story about a time when you or someone you know faced a significant challenge related to community need?*

- As someone new to the area, I felt it was difficult to connect with other adults. I think this is "typical" of rural communities but it led to feeling isolated.
- If I hadn't had family support, I would have had to live in low-income housing when I had my first child because child support is slow to get going. Mom with 5 kids, ran into her at the health department. She wanted to make sure her daughter had the HPV vaccine. She became part of the head start program. We discovered that she owned a piece of property, had a camper there and she and her five kids lived in the camper. There was a trailer there that needed some basic things to get hooked up. She didn't work, she saved her income tax refund and child support and paid her taxes on the land and pre-paid utilities. We encouraged her to get her GED. She was getting discouraged about getting the GED, someone reminded her that if she didn't get her GED she wouldn't be able to work at head start. She did get her GED and she did work at head start. The community, it might have been a church, paid to get the plumbing hooked up in the trailer. We found out the kids were sleeping on couch cushions. She never asked for things, the church got them beds. I saw her later working at Walmart, it was such a nice success story. All the things she had been doing with the limited resources she had, made others want to help her move up. Another family, the mom had 2 kiddos. She came in after her kids had left Head Start, she said she had an interview but didn't have any money to put gas in her car. Can I get \$10 to put gas in my car. Another time she came in after her husband had a heart attack and asked if I could get her feminine hygiene products because she didn't have the money to get any.
- A non-US citizen whose leg was amputated could not access the rehabilitative and prosthetic care he needed. It took a group of very generous donors to put together the money required to meet his needs. He is now working full-time and supporting his family.
- I've had a patient here who is a single mom, doesn't receive child support, has a learning disability, mild autism. It's hard for her to keep a job, had a 4 year old. Can't hold a job and

ends up behind on rent, utilities. She was here and mentioned she was dizzy and almost pass out. She would go days without food so her daughter could eat. We were able to get her to a pantry so she had food, we referred her to the CHWs for ongoing resources. Food insecurity hasn't been a problem any longer. Stull struggles with employment, think they were working on some Head Start enrollment.

- A couple that cannot drive, one person is starting with dementia and the other is wheelchair bound. They weren't eating. I had to call the state on their behalf, within two weeks they had their interview and are now receiving meals. They have someone who stops by and visits and brings them a hot meal.
- I do support groups in jail, the connection between leaving jail and getting into a new environment is something that needs to be addressed. Just recently had a gentleman leave jail, he is now clean and sober, reaching out to support groups, finding better environment for himself, support from his family. Big thing was the family was willing to bring him back into the family and support him. Right now, his support groups are mandatory, we'll see what he does in the future.
- I have had multiple instances, either in my own search for a house here or working with other professionals here, local government, where we've had an opportunity or thought where we could make this happen or this person is willing to come here to help. It breaks down when it comes to where they will live. We run into a housing issue when trying to draw professionals to this area.
- I have a niece with three kids, husband is an over the road trucker without health insurance. She works at a childcare provider with her three kids. She doesn't get a paycheck, she gets healthcare. It's sad, she goes to work with her three kids and her paycheck pays for her childcare. No take home pay because it all goes to pay for childcare, but she does get insurance.
- When I retired from the marine corps, I was unemployed for 18 months. I couldn't get a job around here, I was told I was overqualified for the jobs. I would have done anything because of overqualified.
- I am working with a farm family, I have given them rides. Right now they are worried about getting deported. They've asked my wife and I to take their children if they were deported by ICE. It's a blended family, they have a family member here that is undocumented that helped them across the border. I know people in their 50 and 60s who are missing most of their teeth because it's been so long since they've seen a dentist if they've seen one at all. So, they have all their teeth removed and had to get dentures or live without teeth.
- When I was in elementary school, my dad had a quadruple bi-pass; having 9 siblings, made it difficult for my parents to provide well balanced diets. Our family was able to get on food stamps which helped fill the gaps for nutritious/fulfilling meals.
- I was in an abusive relationship; I had been coached very well by a woman who found herself in the same situation. She coached me to "when this happens, you need to be strong enough to get out for your safety and the safety of your children". I walked out with my kids the week before Christmas, I left everything. I had no idea of the resources, did not know about Family Advocates. There is definitely some needs out there that aren't being met and resources that aren't known about.
- Had a lung disorder which put her on opioids. The wrong people found out about her opioids, they were stealing and selling. The kids walked to the food pantry to get food a few times because they didn't want to tell anyone. What I hear my grandson tell me there isn't another kid who has gone through what I've gone through. I've talked to Unified about a support group

for teens. There isn't any place for kids to hang out, skate park, bowling alley, VFW to play pool. Trying to get him sober experiences.

- In 2017, I was involved in a motorcycle accident. I was riding on the rode I'd ridden on for years. I found myself on a dark, curvy hill in WI. Called 911, they couldn't find us. Sent us to another 911 center, they sent us back to the first 911 center and they hung up on us. My wife had to drive me to the hospital. The wrecker made it to the site when no emergency management services could find me. Got a call from the governor's office, was asked to help change the 911 system in WI. Had different level of services in each county. In Northern WI, they ask what the symptoms are and automatically sent an ambulance. We changed it, now you have to be medical certified and you will get medical assistance when you're on the phone with the dispatch.
- I have many stories related to foreclosure.
- Food pantries and the ability to get to them.

9. What is a goal that you hope SWCAP accomplishes in the future?

- Work with hospitals and schools to navigate the needs of the community.
- I hope SWCAP eventually no longer exists to "mitigate the causes and conditions of poverty," because poverty is eradicated.
- What SWCAP does needs to get out to the community on a much larger scale. Having the funding to do those things. You can only do so much because there is only so much funding available. XX houses in 3 years, increase that by xx% the following three years.
- I think we need to stay on top of the housing thing. We are one of the few resources that people will be able to put their finger on. Nobody knows who SWCAP but they know some of our services. Mental illness and addiction.
- Internally, that the employees are happy with SWCAP and happy to come to work each day. Finding out niche and focusing on those projects that we do best, so finding our focus.
- Help our clients move/stay out of poverty, making self-supporting individuals in their community.
- I do think we should stick with transportation program and that requires finding more people to be employed as drivers or volunteer as drivers.
- Focus more on Green County. There is very little that SWCAP does in Green County. Bring housing.
- Seek out private grants to fund programs without restrictive eligibility requirements.
- To go to a meeting as a board member and have everything go smoothly, work like it should, every program would do as expected. Two meetings in a row where we discussed healthcare which upsets everyone at the table. It may never happen but shooting for the stars. Probably networking, it's probably the best way to get the programs and ideas out there.
- Continue existing, I am saying that partially facetious but given what's going on at the national level, all the changes I've seen and all that I think are coming. I think it would be a victory to continue to operate and offer services. To convey that to the powers that be that this is a worth wild investment.
- I like the idea that Brett has with helping with middle class and housing. Housing is really hard to accomplish, a lot of times young people don't have that dream any more to own their own home. For whatever reason, generational or whatever, don't think they can own their own home. If more people had that goal and knew they could succeed in it, it would be helpful.
- I'm excited to see where we're going, there is so much talk about possibilities. There is discussions about stopping the things that have held us back, dropping the baggage, and move forward. We have people that are looking at tomorrow and the future, which is exciting to me.

- De-siloing, we've got to continue to work on that. It's hard to provide services that are needed when we are very siloed when we don't look at the whole situation. We're already doing some of it so when they walk in the door what are your need.
- I do hope that we can really get the whole family approach strategy going. I know that in the end it may not look like we envision it now. I think that could make a really big impact on the people in the community that come to us at different times. Sometimes it's a bump in the road, they aren't going to be using them all the time.
- Implement the no wrong door approach.
- More awareness.

10. Are you satisfied with the role of the SWCAP Board? If unsatisfied, what changes would you suggest?

- I don't know what they do. They could each write a short blurb about what they do/why they serve to be published with a picture in the SWCAP newsletter or separate email.
- I think there is less engagement than there used to be with the hybrid model. I was very impressed that Mike Britt came up to me at the All Staff in August and follow up on the finding. Donna Peterson is someone who knows our HS program and was on our policy council. I have a history with Martha, she has been helpful to the HS program in the past. No, I'm satisfied with some individuals but not the board as a whole. I would be open to a quarterly sit down with the board. When I first came in 2013, Ron Benish was one of the board members. I want more questions; I want them to ask why. He was in education; he asked me a question at a board meeting, and he responded with I don't think you understand what I'm asking.
- Well, I would like to hear some feedback from them and never have questions or comments back. I would be interested in what they think of our programs. We don't utilize them enough. If we have a need, could they help and get us more involved.
- I've only attended a couple of board meetings, I wasn't impressed. Each committee had their person who spoke, there wasn't any excitement, just go through the motions. I thought because of the number of people and the level of complexity, there would be more excitement. When I attended my first board meeting, there was a hot mess going on with moving weatherization, I wanted to go to hear from the horse's mouth. I think that every person who is hired should have to sit in on one board meeting.
- I am not familiar with the role of the SWCAP Board.
- Yes, I sometimes wonder how I got on the finance part but I'm learning a lot from it. It worries me about funding, but that's any agency that's a non-profit. I really like the newsletter that's started recently, that's helpful. The board reports are very extensive, I think it's very important to know what everyone is doing. Not sure if it could be streamlined in any way.
- I am. As someone who does this type of training, I feel I have an adequate access to staff. I know who I need to reach out to.
- I am, I think attitudes are changing. I think Brett would like the board more involved, there is a lot of sharp people on the board.
- I wish I could do more, semi satisfied. I would like to see the meetings moved around in the area, have them in Fenimore or Highland. We have various sites and buildings, have it over in the clinic in Monroe. Showcase what we've got, see where we're going.
- So far so good, there is a lot of turn over and that bothers me. I'm concerned with how many changes there are on a semi-regular basis. I am concerned that people that get assigned to the board by the counties may not take it as seriously as the rest of us. I also don't like Zoom meetings. We get reports from the ED and the Senior Directors. I know a lot of people in the organization that are scared that they are going to lose their jobs because of talk of eliminating

LIFT and food pantries. I don't want to lose those programs. I think the more in person meetings we have the better.

- Yes
- I say so, I feel like we are more and better educated than I ever remember in the past. I appreciate that. I feel that having those committees and those reports from the staff leadership has made it a stronger organization. We've come over a lot of hurdles.
- It's not a stable board, it would be nice to have a full board. We have some real shiners, people that are embedded. Mike Britt has taken ownership of the Planning & Review, Donna has taken ownership of the Membership.
- I want to stir the pot because stirring the pot is the way to think beyond where you're set in place. I love COVID because it made us change how we did things in life, in business, etc. Why are we limiting our thinking until it slaps us in the face. I don't mind coming up with ideas that may or may not work and have people look at me like I'm stupid. I will get some answers from that. I would like to bring enough constructional disturbances to create new ideas.
- Seems fine. They seem more involved than some boards with which I've worked in the past.
- None.

11. Do you have any thoughts on what is working well internally at SWCAP and what can be improved from an operations standpoint?

- With the scare of uncertainty, I appreciate openness.
- The recent changes in SWCAP generally seem to be positive; though, some of the newer policies and procedures are edging on bureaucratic. HR also gets a bit aggressive in demanding personal medical information.
- I haven't been here long. I can see the vehicles doing housing work in the area.
- I like that you have the leadership team now. I think it's better that we have Brett, Courtney, Chris and Marisol in play. It's a major improvement.
- Diversify the funding sources and make them less government dependent.
- What's seems to be working well from my vantage point is the staff being more transparent. I appreciate that. Also the organization chart has been improved and found to be helpful. The current staff looks more broader, they aren't so focused on this is our little domain, they are more outward thinking, broader thinkers. Not just we're the Metro building.
- The fact that we have one committee that continues to not working, why can't we get that to work out. Just continue with the training for the Whole Family Approach. I think that will help SWCAP from what has been shared with the board.
- SWCAP has numerous programs that are beneficial for lower-income individuals. The problem is often these programs fail to communicate between each other.
- Not really. The Planning and Review committee were supposed to hear from program staff each month, but we haven't been meeting because we don't have a full committee.
- I think we're getting a handle on the finances, that's a good thing. I've been on finance committee a long time and we're getting information we've never had before; I appreciate that. Communications could be improved. Meeting once a month, things can slip through the cracks during that time. Emails would be fine.
- I think, considering what I don't see, you folks are the more important people that work there. It seems like a pretty well-oiled machine, based on the people that I have contact with. I think you guys work together pretty well. Overall, the main persons in the organization work well together.
- I think some of the higher, the roles that we've created and filled, having HR. I can see the benefit of having HR. Sometimes it gets lost when Brett gets going, his passion is clearly out

there and he makes it known. The leadership level at least is doing really well. Being on the personnel committee, I don't see any discouraging trends for line staff. I don't think there are any serious issues reported. The leadership team can't do it on their own, but it's the foundation that the agency is built on.

- I don't know that I do. I don't have any concerns. The financials are easy because Liani is there to simplify it with the charts and her explanation. Being on that committee has been beneficial for me.
- I like the direction that the agency is going, we have a sound structure from the ED filtering down. Things are being put in place to ensure that things are working well. I like the direction from Brett, the whole executive team. From where we've been and watch it develops, give me a comfort level, and to know there is support, whether it's good bad or indifferent. I like to know that support is there. We're still building, I don't see something sticking out as a major issue. The Employee Handbook is a godsend.
- A lot of the work you have been doing with the Admin team, having an HR team, redoing the policies/procedures so they make sense and are up to date, the values. All those things are really good, we have admin that is involved in the programs. I think getting that stuff to continue to trickle down, sharing more and more with my team. Trying to get our other folks in tuned which what's going on. Integration with the other programs. Trying to collaborate amongst our programs more which is helpful, continue to do that. Bring more people in, get more collaboration conversations going would be good.
- I think that comparing the structure from what things were to where they are now is stronger. When I first got here and you were having the Emerging Leaders training, that never happened before. The change to departments and director meetings. Manager meetings didn't go anywhere, and not all the voices had the same weight. I like how HR handles things, it saves a lot of time for hiring. Some things are still in flux, who handles what. There is new energy in the agency. With the idea of Emerging Leaders, changing to WFA. I like the new thoughts, the new structure, the 36 hour work week, how we value the employees.
- I'm most familiar with our agency and think we do a fine job of communicating with each other. I'd like more interactions with other programs.

Wisconsin*		
Population 5,910,955 <ul style="list-style-type: none"> • 21% under 18 <ul style="list-style-type: none"> ○ 14% under 5 • 59.3% 18 to 64 • 19.7% 65+ years 	Median household income \$74,631 <ul style="list-style-type: none"> • Families \$96,999 • Couples \$110,739 • Single \$45,567 	Poverty level 10.7% <ul style="list-style-type: none"> • 12.8% under 18 • 10.1% 18 to 64 • 10% 65+ years
Families at 100% Federal Poverty Level <ul style="list-style-type: none"> • 53% 	Median gross rent \$1,071 <ul style="list-style-type: none"> • 36.9% \$500 - \$999/month • 50.3% \$1,000 - \$1,999/month 	Renters paying >30% income <ul style="list-style-type: none"> • 40.6%
Homeownership rate 67.9% <ul style="list-style-type: none"> • 2,272,726 total housing units 	Unemployment Rate, 3% Uninsured Rate, 6%	Low Birth Weight <ul style="list-style-type: none"> • 7.5%
Children in Single-Parent Homes <ul style="list-style-type: none"> • 22% 	Average household income spent on childcare <ul style="list-style-type: none"> • 31% 	Average monthly full-time childcare cost <ul style="list-style-type: none"> • \$915
# Child Care Centers (per 1,000 children under age 5) <ul style="list-style-type: none"> • 6 	Children eligible for free/reduced lunch <ul style="list-style-type: none"> • 	Estimated Food Insecurity Rate <ul style="list-style-type: none"> • All ages 7.2% • Children 12.6%
Households without vehicle <ul style="list-style-type: none"> • 6.3% 	Food Assistance <ul style="list-style-type: none"> • SNAP 700,875 • WIC 104,084 	Rarely or never get social & economic support needed <ul style="list-style-type: none"> • 10%

Grant County*		
Population is 51,409 <ul style="list-style-type: none"> • 21.2% under 18 <ul style="list-style-type: none"> ○ 5.7% under 5 • 58.3% 18 to 64 • 20.5% 65+ years 	Median household income is \$64,349 <ul style="list-style-type: none"> • Families \$85,715 • Couples \$95,176 • Single \$39,276 	Poverty level 13.4% <ul style="list-style-type: none"> • 8.3% under 18 • 6.1% 18 to 64 • 8.2% 65+ years
Families at 100% Federal Poverty Level <ul style="list-style-type: none"> • 36% 	Median gross rent \$812 <ul style="list-style-type: none"> • 64.5% \$500 - \$999/month • 23.4% \$1,000 - \$1,999/month 	Renters paying >30% income <ul style="list-style-type: none"> • 38.7%
Homeownership rate 69.1% <ul style="list-style-type: none"> • 22,110 total housing units 	Unemployment Rate, 2.9% Uninsured Rate, 9%	Low Birth Weight <ul style="list-style-type: none"> • 5.9%
Children in Single-Parent Homes <ul style="list-style-type: none"> • 19% 	Average household income spent on childcare <ul style="list-style-type: none"> • 34% 	Average monthly full-time childcare cost <ul style="list-style-type: none"> • \$621
# Child Care Centers (per 1,000 children under age 5) <ul style="list-style-type: none"> • 8 	Children eligible for free/reduced lunch <ul style="list-style-type: none"> • 41% 	Estimated Food Insecurity Rate <ul style="list-style-type: none"> • All ages 8.8% • Children 13.1%
Households without vehicle <ul style="list-style-type: none"> • 5.2% 	Food Assistance <ul style="list-style-type: none"> • SNAP 4,688 • WIC 766 	Rarely or never get social & economic support needed <ul style="list-style-type: none"> • 25%

Green County*		
Population is 36,951 <ul style="list-style-type: none"> • 21.9% under 18 <ul style="list-style-type: none"> ○ 5.1% under 5 • 57.3% 18 to 64 • 20.8% 65+ years 	Median household income is \$80,248 <ul style="list-style-type: none"> • Families \$97,889 • Couples \$108,074 • Single \$46,798 	Poverty level 7.0% <ul style="list-style-type: none"> • 8.3% under 18 • 6.1% 18 to 64 • 8.2% 65+ years
Families at 100% Federal Poverty Level <ul style="list-style-type: none"> • 45% 	Median gross rent \$851 <ul style="list-style-type: none"> • 59.5% \$500 - \$999/month • 27.5% \$1,000 - \$1,999/month 	Renters paying >30% income <ul style="list-style-type: none"> • 28.3%
Homeownership rate 75.1% <ul style="list-style-type: none"> • 16,273 total housing units 	Unemployment Rate, 2.4% Uninsured Rate, 6%	Low Birth Weight <ul style="list-style-type: none"> • 6.4%
Children in Single-Parent Homes <ul style="list-style-type: none"> • 21% 	Average household income spent on childcare <ul style="list-style-type: none"> • 28% 	Average monthly full-time childcare cost <ul style="list-style-type: none"> • \$808
# Child Care Centers (per 1,000 children under age 5) <ul style="list-style-type: none"> • 8 	Children eligible for free/reduced lunch <ul style="list-style-type: none"> • 36% 	Estimated Food Insecurity Rate <ul style="list-style-type: none"> • All ages 7.2% • Children 11.8%
Households without vehicle <ul style="list-style-type: none"> • 3.9% 	Food Assistance <ul style="list-style-type: none"> • SNAP 2,999 • WIC 449 	Rarely or never get social & economic support needed <ul style="list-style-type: none"> • 26%

Iowa County*		
Population is 23,956 <ul style="list-style-type: none"> • 21.9% Under 18 <ul style="list-style-type: none"> ○ 5.3% under 5 • 57.3% 18 to 64 • 20.8% 65+ years 	Median household income is \$83,372 <ul style="list-style-type: none"> • Families \$104,962 • Couples \$114,002 • Single \$45,179 	Poverty level 7.7% <ul style="list-style-type: none"> • 8.2% under 18 • 6.2% 18 to 64 • 11.7% 65+ years
Families at 100% Federal Poverty Level <ul style="list-style-type: none"> • 39% 	Median gross rent \$941 <ul style="list-style-type: none"> • 47.6% \$500 - \$999/month • 34.9% \$1,000 - \$1,999/month 	Renters paying >30% income <ul style="list-style-type: none"> • 31.4%
Homeownership rate 77.1% <ul style="list-style-type: none"> • 10,905 total housing units 	Unemployment Rate, 2.6% Uninsured Rate, 5%	Low Birth Weight <ul style="list-style-type: none"> • 6.5%
Children in Single-Parent Homes <ul style="list-style-type: none"> • 16% 	Average household income spent on childcare <ul style="list-style-type: none"> • 25% 	Average monthly full-time childcare cost <ul style="list-style-type: none"> • \$673
# Child Care Centers (per 1,000 children under age 5) <ul style="list-style-type: none"> • 5 	Children eligible for free/reduced lunch <ul style="list-style-type: none"> • 30% 	Estimated Food Insecurity Rate <ul style="list-style-type: none"> • All ages 7.5% • Children 10.9%
Households without vehicle <ul style="list-style-type: none"> • 3.2% 	Food Assistance <ul style="list-style-type: none"> • SNAP 1,944 • WIC 258 	Rarely or never get social & economic support needed <ul style="list-style-type: none"> • 25%

Lafayette County*		
Population 16,945 <ul style="list-style-type: none"> • 24.8% under 18 <ul style="list-style-type: none"> ○ 6.8% under 5 • 54.2% 18 to 64 • 21% 65+ years 	Median household income is \$72,091 <ul style="list-style-type: none"> • Families \$86,359 • Couples \$95,236 • Single \$40,928 	Poverty level 10.7% <ul style="list-style-type: none"> • 11.8% under 18 • 10% 18 to 64 • 11.4% 65+ years
Families at 100% Federal Poverty Level <ul style="list-style-type: none"> • 33% 	Median gross rent \$835 <ul style="list-style-type: none"> • 56.4% \$500 - \$999/month • 24.1% \$1,000 - \$1,999/month 	Renters paying >30% income <ul style="list-style-type: none"> • 27.9%
Homeownership rate 79.3% <ul style="list-style-type: none"> • 7,156 total housing units 	Unemployment Rate, 2.3% Uninsured Rate, 10%	Low Birth Weight <ul style="list-style-type: none"> • 5.9%
Children in Single-Parent Homes <ul style="list-style-type: none"> • 10% 	Average household income spent on childcare <ul style="list-style-type: none"> • 27% 	Average monthly full-time childcare cost <ul style="list-style-type: none"> • \$563
# Child Care Centers (per 1,000 children under age 5) <ul style="list-style-type: none"> • 5 	Children eligible for free/reduced lunch <ul style="list-style-type: none"> • 29% 	Estimated Food Insecurity Rate <ul style="list-style-type: none"> • All ages 7.7% • Children 12.4%
Households Without Vehicle <ul style="list-style-type: none"> • 4.6% 	Food Assistance <ul style="list-style-type: none"> • SNAP 1,438 • WIC 281 	Rarely or never get social & economic support needed <ul style="list-style-type: none"> • 24%

Richland County*		
Population 17,304 <ul style="list-style-type: none"> • 21.3% under 18 <ul style="list-style-type: none"> ○ 4.9% under 5 • 53.1% 18 to 64 • 25.6% 65+ years 	Median household income is \$62,649 <ul style="list-style-type: none"> • Families \$81,439 • Couples \$93,761 • Single \$36,118 	Poverty level 14.5% <ul style="list-style-type: none"> • 20.9% under 18 • 12.9% 18 to 64 • 12.5% 65+ years
Families at 100% Federal Poverty Level <ul style="list-style-type: none"> • 35% 	Median gross rent \$786 <ul style="list-style-type: none"> • 52.4% \$500 - \$999/month • 27% \$1,000 - \$1,999/month 	Renters paying >30% income <ul style="list-style-type: none"> • 26.5%
Homeownership rate 76.5% <ul style="list-style-type: none"> • 8,475 total housing units 	Unemployment Rate, 3% Uninsured Rate, 8% <ul style="list-style-type: none"> • Uninsured children 7% 	Low Birth Rate <ul style="list-style-type: none"> • 5.6%
Children in Single-Parent Homes <ul style="list-style-type: none"> • 22% 	Average household income spent on childcare <ul style="list-style-type: none"> • 36% 	Average monthly full-time childcare cost <ul style="list-style-type: none"> • \$592
# Child Care Centers (per 1,000 children under age 5) <ul style="list-style-type: none"> • 2 	Children eligible for free/reduced lunch <ul style="list-style-type: none"> • 56% 	Estimated Food Insecurity Rate <ul style="list-style-type: none"> • All ages 9.4% • Children 15%
Food Assistance <ul style="list-style-type: none"> • SNAP 2,252 • WIC 297 	Households Without Vehicle <ul style="list-style-type: none"> • 7.4% 	Rarely or never get social & economic support needed <ul style="list-style-type: none"> • 24%

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