

## **8. HEALTH AND SAFETY**

### **Introduction**

Public health and safety are core responsibilities of government. The definition of public safety today includes crime and fire prevention programs as well as public education regarding health and safety. The court system, public corrections and other less formal means of social control also play an important part in public safety.

Public health is the science and practice of protecting and improving the health of a community, with preventive medicine, health education, control of communicable diseases, application of sanitary measures, and monitoring of environmental hazards. Clearly, some elements influencing the public's health are not under the direct control of public institutions, such as the availability of health insurance and prescription medicines. Nevertheless, these items need to be included when considering issues related to the public's health.

### **Process**

Civic Alliance members reviewed public feedback on community issues and then met with or surveyed a number of key stakeholders in the community. After further research and discussion they decided on the following as key issues for this topic area. City staff provided technical support.

Statement 1

**There is a high level of distrust between the South Bend Police Department and segments of the local population.**

Facts and Supporting Information

- A recent local study (*Source: Community Policing in South Bend, Indiana: The Content of Community Policing and the Perceptions of Policing Audiences, by Professor Mel De Guzman, IUSB, October 2004*) found:
  - South Bend Police officers were generally happy with their work.
  - The police and community perceived major benefits of pursuing community policing. Police officers saw it as an effective anti-crime measure.
  - There were serious efforts to pursue community policing in South Bend but the activities and strategies lacked focus. The pursuit of community policing was much segmented.
  - There was a lack of communication between the citizens and the police.
- One study has found that the COP approach to policing was successful in direct proportion to a change in police officers attitudes (*Source: "Community Oriented Policing Across the US: facilitators and impediments to implementation". Zhao J., Thurman Q. C., Lovrich N. P. American Journal of Police, 1 April, 1995, vol. 14, no. 1, pp. 11-28*)
- The percentage of minorities employed by the South Bend Police Department is well below the demographic distribution within the community as a whole:
  - In 2000, the population of South Bend was 66.1 % Caucasian, 24.6% African American, 8.5% Hispanic and 1.3% Asian. (*Source: 2000 Census*) Of the 260 sworn police officers in the South Bend Police Department (*as of Nov 18, 2004*), 84.6% (220) are Caucasian, 12.0% (31) African American, 2.4% (7) are Hispanic, .4% (1) is Asian and .4% (1) is Native American. (*Source: South Bend Police Department*)
- The Police Department has very limited knowledge of South Bend's Hispanic population and their culture. (*Source: Interview with Chief Thomas Fautz, September 8, 2004*)
- Between January 1, 1993 and August 23, 2004, the South Bend Police Department paid out a total of \$573,735 in 52 civil suits. Of these suits, 72% (42) were made by South Bend residents. (*Source: South Bend Police Department*)
- Between August 12, 2002 and August 12, 2004, thirty-two civil suits which are still pending were brought against the South Bend Police Department. Of these suits, 78% (25) were made by South Bend residents. (*Source: South Bend Police Department*)
- The Police Chief recommended to the South Bend Board of Public Safety in October 2004 that one officer be fired for excessive use of force following several such allegations against him. The Board of Public Safety accepted the Chief's recommendation and terminated the officer's employment in November 2004.
- The discussion board on the website for the Fraternal Order of Police (FOP) shut down in August 2003 due to public outcry over the number of racially offensive comments that were posted there.
- A South Bend *Tribune* editorial ("*Time Has Come for Idea of Police Review Board,*" *South Bend Tribune*, Sept. 2, 2004) expressed support for the establishment of a Civilian Review Board ". . . to clear the air and enhance the authority and trust their people place in police departments . . ." Superior Court Judge Roland Chamblee, Jr. has said consideration should be given to the idea of establishing an independent Civilian Review Board if it would increase the community's confidence in the Police Department. The local branch of the NAACP, which has a long history of conflict with the department, and a local group called Community Action Partners also support the establishment of an independent Civilian Review Board.
- The Mayor of South Bend, the South Bend Police Department, and the local branch of the Fraternal Order of Police oppose the creation of another civilian review board, stating that the existing Board of Public Safety effectively serves that function.

Strengths and Opportunities

- In the IUSB study mentioned above:
  - 80% of respondents to a telephone survey believed that the South Bend Police Department was doing a good job.

- Everyone interviewed (general public, police officers and community leaders) expressed support for the COP philosophy. In addition, police officers expressed satisfaction with their chosen profession.
- Several meetings over the past few years, some private and some public, have been organized by the City in an effort to address police / community relations.
- The Mayor plans to make changes to the Board of Public Safety to invigorate its oversight role:
  - Increase the number of Mayoral appointees on the Board from 3 to 5. As of February 2005, a fourth person has been appointed.
  - Establish term limits for the tenure of appointees.
- All police patrol cars have in-car video cameras.
- In an annual exercise done by the South Bend *Tribune* to assess government agencies' responsiveness to requests for information from the public, in 2004 the *Tribune* had little difficulty requesting -- or receiving -- the documents their reporter requested from the South Bend Police Department's records division. (Source: "The State of Secrecy II - Public Access: Where does Indiana Stand Today?", by Jeff Romig, South Bend Tribune, Local Section, Oct 24, 2004)
- The South Bend Police Department runs several highly regarded programs (such as Volunteers in Policing, Project Marc, Citizen's Police Academy, Shop-A-Cop, among others).
- The South Bend Police Department has excellent working relationships with other county, state and federal law enforcement agencies.
- The South Bend Police Department has a very proactive Domestic Preparedness Program.
- The South Bend Police Department has actively pursued, and been awarded, federal grants to acquire the latest technologies to create crime tracking and analysis systems and to establish a crime lab which is recognized as one of the best in the region.
- Volunteers in Police Service and Civilian Police Academies (100+ Volunteers)
- Several significant changes have been implemented since 2002 when Thomas Fautz was appointed Police Chief:
  - 24 officers have been hired, 20.8% of whom have been of minority status.
  - The Police Department has installed a software package called IAPro which automatically, independently and objectively tracks the conduct of police officers, including all incidents where officers use force.
  - In September 2004, the Office of Professional Standards (Internal Affairs) changed the location of where complaints against officers can be filed from the police station to the Human Rights Commission, so individuals would not have to file their complaints at the police station.
  - In 2005, the Department will initiate a Cadet Program which will pay for college and provide part time work for participants in an effort to increase minority recruitment.
  - The amount of training provided for South Bend police officers is increasing, including the innovative "Tools for Tolerance" interactive computer simulation program.

#### Benefits of Addressing the Issue

- Police - community relations are a significant part of a community's quality of life. Establishing trust between the police and the community will make it possible for the police to implement effective problem-solving strategies to prevent crime, an important element of the community oriented policing philosophy. Establishing that trust will reduce existing tensions and create the opportunity for the police department to actively partner with the community in working toward the Vision established for South Bend's future.

#### Stakeholders

*The following stakeholders were consulted:*

- South Bend Mayor's Office
- South Bend Police Department
- South Bend Common Council

- South Bend / St. Joseph County Building Department
- St. Joseph County Health Department
- St. Joseph County Commissioners
- St. Joseph County Prosecutor’s Office
- St. Joseph County Sheriff’s Department
- St. Joseph County Superior Court Judge Roland Chamblee, Jr.
- St. Joseph County Chamber of Commerce
- St. Joseph County Minority Health Coalition
- Healthy Communities Initiative (HCI)
- Saint Joseph Regional Medical Center
- NAACP
- St. Adalbert’s Parish
- Community Action Partners (CAP)
- Indiana University South Bend (Civil Rights Heritage Center)
- Howard Park Neighborhood Association
- Neighborhood Resources Corporation (formerly NRTSC)
- Youth Services Bureau
- Boys & Girls Clubs of St. Joseph County
- South Bend Tribune
- WSBT TV
- 245 stakeholders responded to the Panel’s *Stakeholder Survey*

*General stakeholder reaction:*

- Some stakeholders said minorities feel targeted by Caucasian police officers.
- One stakeholder expressed the opposing belief that police officers’ fear of being sued or being charged with racism inhibits their ability to enforce the law.
- Several stakeholders said it is sometimes very difficult to get information from the SBPD.
- A stakeholder comment: “. . . I can positively say that, though suspicions of racism among police is real among my neighbors, far more present, frequent, and actual is the complaint of inadequate police protection. . . .In the minds of many police officers . . . my neighborhood is already conceded as a high-crime area . . . The result is I suspect many police officers effectively, even unwittingly, tolerate crime. . . . Another very concrete matter that affects public confidence in the police is the prosecution of ‘low-level’ crimes. . . . City residents are entitled to the aggressive and consistent upholding of that quality of life. . . . I should say that most of my interactions with individual police officers have left me with favorable impressions of their professionalism and courteous conduct. Nevertheless, a great many of those positive exchanges have left me still with this lingering doubts about their accountability to the city itself and its ‘high crime’ areas.” (Source: from written comments on Draft 2 of the Current Conditions Report, submitted by Caleb Congrove, January 2005)

Statement 2

Many properties within the city are not well-maintained.

Facts and Supporting Information

- 60% of respondents to the Panel's *Stakeholder Survey* agreed with the statement "People do not take responsibility for maintaining their properties" and 94% thought it was an important issue.
- The Department of Code Enforcement, which enforces housing codes in South Bend, has limited ability to enforce standards:
  - The Department's authority comes from South Bend's Municipal Code: Chapter 6 (adopting Indiana's Unsafe Building Code and the International Property Maintenance Code); and Chapter 1653, dealing with nuisance properties. Most of these Codes deal with safety issues, though some address aesthetics.
  - The Department has no jurisdiction to deal with a vacant property unless it falls into disrepair and presents a visible violation of Municipal Code.
  - The Department's computer software is outdated and incompatible with other systems; much office work and field work by Inspectors is done largely with paper. The Department's electronic databases are incomplete due to lack of staff to do input. (Source: *Interview with Director, Dept of Code Enforcement, Oct 21, 2004*)
- The number of structures in the city found to be "in need of minor repair" increased from 17.8% of all structures to 28.3% over the 1991 to 1999 period. During the same period, the number of structures found to be "substandard / deteriorating" had risen from 1.4% of all structures to 1.9%. (Source: *Windshield Surveys in South Bend (1991 and 1998-99)*; in the *Housing and Community Development Plan, 2000 - 2004, Final - November 1999, St. Joseph County Housing Consortium, pg.26*)
- As of Oct 22, 2004, there were approximately 250 people on the waiting list for the City's CDBG-funded South Bend Home Improvement Program for low-income homeowners. (Source: *Senior Housing Specialist, Division of Community Development*)
- In 2004, environmental citations increased over 2003 in the following areas: litter, loose trash, graffiti, and grass over 9-inches tall and weeds on vacant lots. (Source: "*Violations Summary Report, Environmental Complaints, 1/04/04 thru 10/25/04, Department of Code Enforcement*")
- In 2000, there were 46,230 housing units within the city limits of South Bend. Of those, 31,278 (67.7%) were built prior to 1960. Ninety percent of all units built prior to 1960 are expected to contain lead-based paint, a serious health hazard for children. (*Census 2000*) South Bend is on the Centers for Disease Control's list of communities with at least 500 potentially lead poisoned children. (Source: *St. Joseph County Health Department, City Plan Stakeholder Report, 2004, pg. 1*)

Strengths and Opportunities

- In 2003: Code Enforcement demolished 30 houses and 22 accessory buildings; boarded up 489 structures; sent 14,884 letters to property owners notifying them their property was a "nuisance" according to City code and sent a crew to clean up 4,797 of those properties; and towed 991 abandoned vehicles. (Source: *South Bend Department of Code Enforcement, 2003 Annual Report*)
- The Director of the Historic Preservation Commission stated (10-22-04):
  - There are 8 Historic Districts within South Bend; a ninth district is currently being established. There are approximately 1,000 homes within those districts.
  - All historic districts have minimum maintenance standards. In addition, some districts have developed additional requirements based on Department of Interior guidelines for historic districts. All of these standards have been incorporated into the City's Municipal Code.
  - In the historic districts, a Certificate of Appropriateness from the Historic Preservation Commission is required prior to getting a building permit.
- These historic districts contain hundreds of beautiful, architecturally significant, well-maintained homes.
- There are many active neighborhood organizations in the city which are involved in strengthening the social and physical fabric of their neighborhoods. (see *Community Building, Statement 8, Strengths section*)

- The City financially supports the work of the Neighborhood Resources Corporation which works to develop the capacity of neighborhood groups and which helps distribute information on property maintenance.
- The City financially supports the work of Rebuilding Together, a national program working with volunteers to repair homes of low-income, disabled and elderly neighbors. Approximately 35 homes are repaired annually through this program (*Source: Division of Community Development, City of South Bend*)
- The City employs several neighborhood planners who work with neighborhood organizations to build capacity, assist residents in neighborhood organizing and help encourage residents to maintain their property. (*Source: Division of Community Development, City of South Bend*)
- The City supports the work of local community development corporations (CDC's such as South Bend Heritage Foundation and Near Northwest Neighborhood, Inc) in their neighborhood revitalization work, including the rehabilitation of dilapidated housing.
- The City funds several programs which enhance the physical appearance of the city:
  - *Residential Enhancement Matching Grant Program*: matching grants from the City for up to \$7,500 for exterior improvements to owner-occupied homes on the near west side;
  - *Commercial Corridor Façade Improvement Matching Grant Programs*: matching grants up to \$20,000 for exterior improvements to commercial and industrial buildings located along an extended stretch of Western Avenue and Lincoln Way West;
  - *South Bend Home Improvement Loan Program*: uses CDBG funds for loans and loan/grant combinations for essential repairs in approximately 50 homes (annually) owned by low-income households;
  - *Downtown South Bend Façade and Streetscape Improvement Program*: provides 50% grant (up to \$25,000 grant) to property owners seeking to renovate or restore building facades and adjacent streetscape features in downtown South Bend.
  - *Lamppost Lighting Project*: the City will split the cost of the lamppost with the property owner and install it.
  - *Lincoln Way West Tree Planting Program*: the City will plant a tree of the property owner's choice (4 to choose from) in the tree lawn within a targeted area of Lincoln Way West. The trees and the planting are both free of charge.
- The City is actively involved in the Lead Task Force, a coalition headed by the St. Joseph County Health Department, working toward the elimination of lead-based paint hazards in the city by 2010.

#### Benefits of Addressing the Issue

- Well-maintained structures improve a neighborhood's quality of life by contributing a sense of order and stability; they protect and encourage investment in the neighborhood.
- Well-maintained properties can support civility and strengthen "neighborliness" among residents.
- Addressing the issue of lead-based paint hazards will improve public health.

#### Stakeholders

*The following stakeholders were consulted:*

- South Bend Mayor's Office
- South Bend Police Department
- South Bend Common Council
- South Bend / St. Joseph County Building Department
- St. Joseph County Health Department
- St. Joseph County Commissioners
- St. Joseph County Prosecutor's Office
- St. Joseph County Sheriff's Department
- St. Joseph County Superior Court Judge Roland Chamblee, Jr.
- St. Joseph County Chamber of Commerce
- St. Joseph County Minority Health Coalition

- Healthy Communities Initiative (HCI)
- Saint Joseph Regional Medical Center
- NAACP
- St. Adalbert's Parish
- Community Action Partners (CAP)
- Indiana University South Bend (Civil Rights Heritage Center)
- Howard Park Neighborhood Association
- Neighborhood Resources Corporation (formerly NRTSC)
- Youth Services Bureau
- Boys & Girls Clubs of St. Joseph County
- South Bend Tribune
- WSBT TV
- 245 stakeholders responded to the Panel's *Stakeholder Survey*

*General stakeholder reaction:*

- *City Plan Stakeholder Report, 2004* identified deteriorating housing as a challenge facing the community:
  - South Bend Police Department: "A growing concern for the health of our neighborhoods is the increasing number of housing stock which is problematic and/or deteriorating. The city must have the means to hold property owners responsible for maintaining properties that encourages healthy, vibrant and responsible neighborhoods." (pg.2)
  - Historic Preservation Commission: "Encouraging property owners to properly maintain an aging building stock is and will continue to be a challenge." (pg.4)

Statement 3

**Many people living in South Bend have inadequate access to affordable healthcare.**

Facts and Supporting Information

- Lack of access, whether due to linguistic, cultural, racial, geographic, or organizational factors, can jeopardize the health of large segments of our population. Poor or unsafe housing, poverty, poor nutrition, poor air quality, and other determinants have an adverse effect on access to care and health status. In short, access problems affect all people and all sectors of society - the business community, federal, state, and local government (supported by taxpayers), health care providers, and patients. (Source: Meyer, JA and Silow-Carroll, S. *Increasing Access: Building working solutions*. Prepared for W.K. Kellogg Foundation. Economic and Social Research Institute: Washington, DC. June 2000)
- The St. Joseph County Health Department indicated a number of particularly pressing health issues:
  - People who are uninsured, underinsured and underserved; untreated chronic illnesses obesity, diabetes, lead, TB, dental services; cancer morbidity,
  - Census Tracts 17, 19, 20 - 24, 27, 29 and 30 (downtown, west of downtown and immediately south of downtown) are federally designated medically and dentally underserved areas.
  - There are large numbers of undocumented in the community (estimated at 25,000 countywide) that increases the health care burden both due to lack of insurance and the threat from communicable diseases such as multi-drug resistant TB which remain unidentified and untreated.
- 9.4% of all Hoosiers under age sixty-five were counted as uninsured in a 2000 Indiana telephone survey. That Indiana survey echoed most of the findings revealed in similar national surveys:
  - Uninsurance rates are higher among those with lower incomes.
  - The highest rates of uninsurance are found among African Americans and those listed as "other", including Asians, American Indians, and persons of mixed race.
  - The rate of uninsurance for young adults age 18 - 24 is 19.3%.
  - Married people have the lowest rates of uninsurance (6.2%) and unmarried partners the highest (30.2%).
  - Full-time employees have the lowest rate of uninsurance (7.4%), while the unemployed have the highest rate (35.0%).
  - A patient's cost at the time of visit is much higher for the uninsured.
 (Source: *Indiana Health Insurance Study: www.state.in.us/fssa/programs/chip/insurance/study.html: Oct 8, 2004*)
- During Fiscal Year 2004 (July 1, 2003 - June 30, 2004), Saint Joseph Regional Medical Center estimated that the number of emergency room patients listed as self-pay and written off as bad debt and/or charity at their South Bend location to be 2,794 people. (Source: *Finance Department. Saint Joseph Regional Medical Center*)

Strengths and Opportunities

- There are 7 extremely high quality medical clinics in South Bend providing care for eligible uninsured. In addition, Saint Joseph Regional Medical Center offers 22 screening clinics on a periodic basis for blood pressures and blood sugars.
- Emergency Medicaid coverage exists for undocumented residents.
- Hoosier Healthwise, Indiana's Medicaid program, provides medical coverage for pregnant women and children through age 18 at very affordable rates.
- Project Homecoming, an initiative of Indiana Health Centers, Inc., offers a full range of primary health care services on a sliding fee scale to homeless individuals and families.
- United Way of St. Joseph County has a hotline, First Call for Help, linking people with services.
- Support for expanding access and health insurance reform was registered by local officials:
  - "We do have the money; we need to decide how best to use our money." *Charlotte Pfeifer, South Bend Common Council Member.*

- “Health care needs to be available to all Americans so they can seek medical treatment promptly.” *Mayor Stephen Luecke. (Source: Both quoted in South Bend Tribune, October 7, 2004)*
- A number of programs have been tried in the past to address the question of access to care:
  - The Community Health Partnership (CHP) project (1994-1997) designed to provide health care services in a managed care setting to a segment of the uninsured population of South Bend in employment transition lacking access to or unable to afford health insurance. This collaboration between Memorial Hospital and Partners Health Plan donated care for about 960 participants for 2 yrs.
  - Memorial Hospital followed up the CHP project with one designed to provide free medical prescriptions for those in need.
  - Saint Joseph’s Regional Medical Center has supported a clinic for years through the tithing of its physicians.
  - Healthy Communities Initiative received a grant in 2003 from the federal Health Resources and Services Administration (HRSA) for the *Healthy Communities Access Project* to create a coordinated system of health care for the low-income medically uninsured and underinsured populations in St. Joseph County to maximize access to health care and to eliminate disparities in health outcomes. HCI is working in consortium with Indiana Health Center, Memorial Health and Hospital System, Saint Joseph Regional Medical Center, St. Joseph County Health Department and United Way of St. Joseph County on this project which includes standardizing / coordinating information gathering between the partners.
- Hospitals in South Bend have applied a percentage of their income to charitable uses for years. See table below for 2001-2003:

Allocation of Dollars and Persons Served under Charity Care Policies				
South Bend Hospitals, 2001-2003				
	2001	2002	2003	% Change
Hospital	<i>Persons Served</i>			
Memorial Hospital and Health System	2,321	2,181	2,799	
Our Lady of Peace Hospital	3	5	1	
Saint Joseph Regional Medical Center	5,369	4,892	2,082	
<b>ALL Hospitals</b>	<b>7,693</b>	<b>7,078</b>	<b>4,882</b>	<b>-37%</b>
	<i>Dollars Allocated</i>			
Memorial Hospital and Health System	\$1,406,977	\$1,477,122	\$1,939,266	
Our Lady of Peace Hospital	\$36,551	\$124,000	\$3,458	
Saint Joseph Regional Medical Center	\$4,561,590	\$3,349,108	\$2,648,689	
<b>ALL Hospitals</b>	<b>\$6,005,118</b>	<b>\$4,950,230</b>	<b>\$4,591,413</b>	<b>-24%</b>
<b>Allocation per person (All Hospitals)</b>	<b>\$781</b>	<b>\$699</b>	<b>\$940</b>	<b>20%</b>
Source: Indiana State Department of Health. "2003 Hospital Fiscal Report."				
<a href="http://www.in.gov/isdh/regsvcs/acc/fiscal03/index.htm">http://www.in.gov/isdh/regsvcs/acc/fiscal03/index.htm</a>				

#### Benefits of Addressing the Issue

- Addressing this issue would provide benefits for individuals and the entire health care system:
  - Hospitals’ costs would be reduced because people would use emergency rooms less frequently as their primary care.
  - Employers would benefit through less lost work time and increased employee productivity.
  - Physicians, hospitals, and other providers incur fewer costs associated with bad debts.

### Stakeholders

*The following stakeholders were consulted:*

- South Bend Mayor's Office
- South Bend Police Department
- South Bend Common Council
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- Howard Park Neighborhood Association
- Neighborhood Resources Corporation (formerly NRTSC)
- Youth Services Bureau
- Boys & Girls Clubs of St. Joseph County
- South Bend Tribune
- WSBT TV
- 245 stakeholders responded to the Panel's *Stakeholder Survey*

*General stakeholder reaction:*

- All health system stakeholders expressed concern for the growing number of uninsured and under-insured in the community and the financial strain that causes on local health care providers.
- Saint Joseph Regional Medical Center identified 3 issues in a 2004 update of its current strategic plan: The number one issue was the lack of access to a medical services "home" for the uninsured. (*Source: Mission Assessment Report. Integrated Mission Committee. Saint Joseph Regional Medical Center. March 24, 2004*)

Statement 4

There are health disparities between non-minorities and minorities in South Bend the causes of which need to be investigated.

Facts and Supporting Information

- “The future health of the nation will be determined to a large extent by how effectively we work with communities to reduce and eliminate health disparities between non-minority and minority populations experiencing disproportionate burdens of disease, disability, and premature death.” (Source: *Guiding Principle for Improving Minority Health*. Centers for Disease Control, Office of Minority Health)
- Selected local health disparities between non-minorities and minorities include:
  - **Heart Disease:** in 2000, the mortality rate (per 100,000) in St. Joseph County for Caucasian females was 187.3; for African American females 288.6 (Source: *The Health Status and Determinants of Health of St. Joseph County Residents: A Community Health Assessment*, St. Joseph County Health Department, March 2003; pg. 27)
  - **Breast cancer:** The age-adjusted breast cancer rate (per 100,000) between 1990 and 2001 in South Bend was **40 percent** higher for Black females than White females for women ages 40 and older. (Source: *Underlying mortality data provided by NCHS (www.cdc.gov/nchs)*)
  - **Prostate cancer:** Age-adjusted death rates (per 100,000) for prostate cancer for men 65 and older in St. Joseph County were **235 percent** higher for African American men compared to Caucasian men over the 1990-2001 period. (Source: *Underlying mortality data provided by NCHS (www.cdc.gov/nchs)*).
  - **Infant mortality:** The infant mortality rate for African Americans is much higher than other groups in the county:

Race / Ethnicity	Births	Deaths	Rate per 1,000 births
ALL	15,443	121	7.8
Caucasian	12,507	72	5.8
African American	2,545	46	18.1
Hispanic	1,429	10	7.0

Source: Indiana State Department of Health.  
[http://www.in.gov/isdh/dataandstats/mortality/mortality\\_index.htm](http://www.in.gov/isdh/dataandstats/mortality/mortality_index.htm)

- **Diabetes:** Age-adjusted death rates (per 100,000) in 2002 in St. Joseph County for Caucasians: 23.9; for African Americans: 50.3; for African American females: 66.5. (Source: *The Health Status and Determinants of Health of St. Joseph County Residents: A Community Health Assessment*, St. Joseph County Health Department, March 2003)
- **HIV/AIDS:** African Americans are 7.5 times more likely to be living with HIV in St. Joseph County than Caucasians. African Americans represent 11% of the county’s estimated 2003 population, but comprise 49% of the county’s population with HIV.

	ST JOSEPH COUNTY				Indiana	
	Sep-04	%	2003	%	2003	%
Male	257	75%	264	76%	5916	82%
Female	87	25%	85	24%	1286	18%
Caucasian	146	42%	163	47%	4347	60%
African Amer	184	53%	172	49%	2454	34%
Hispanic	13	4%	13	4%	357	5%
Total	344	100%	349	100%	7202	100%

Source Pop. Est.: Fedstats.gov

State HIV Data: <http://www.in.gov/isdh/programs/hivstd/quarterly/2003/dec2003/glance.htm#Cumulative>

- **Elevated Blood Lead Levels (EBLL):** A blood lead level equal to or greater than 10 micrograms of lead per deciliter of blood is considered elevated. Children with elevated blood lead levels (EBLLs) are classified as lead-poisoned. African American children are much more likely to be lead poisoned than Caucasian children (see table below):

Children ≤ 6 yrs old, first blood test between 1/1/95 and 12/31/04 in South Bend				
Selected races	# children tested	% of all tested	# with confirmed BLLs ≥ 10 ug/dL	Confirmed BLLs ≥ 10 ug/dL as % of racial group tested
Caucasian	4,267	44.5%	212	4.9%
African American	3,026	31.4%	266	8.7%
Other known	588	6.2%	28	4.7%
Unknown race	1,729	17.9%	221	12.7%
total	9,610	100.0%	727	7.5%

St. Joseph County Health Department, March 2005

Note: The "unknown" category refers to children who did not have racial information provided when they were tested.

- During the time period 1995-1999, homicide was the 5<sup>th</sup> leading cause of death among African Americans and Latinos in St. Joseph County. In the same time period, homicide did not make the top ten leading causes of death for Caucasians in St. Joseph County. (2001 *Minority Health Report*, from the *Indiana Office of Minority Health*)
- Minority physicians and surgeons, registered nurses and dentists make up only a very small percentage of those medical professions in South Bend, with the exception of Asians who are over-represented (see table below):

Physicians & surgeons, registered nurses and dentists in South Bend city: by race / ethnicity								
Race	South Bend population		Physicians & Surgeons		Registered Nurses		Dentists	
			Number	% of total	Number	% of total	Number	% of total
White non-Hispanic	71,195	66.1%	348	82.5%	1,616	92.7%	84	81.6%
Black non-Hispanic	26,522	24.6%	35	8.3%	63	3.6%	4	3.9%
Amer Indiana / Alask Nat	440	0.4%	0	0.0%	4	0.2%	0	0.0%
Asian non-Hispanic	1,292	1.2%	29	6.9%	14	0.8%	15	14.6%
Two or more races	3,021	2.8%	0	0.0%	32	1.8%	0	0.0%
Hispanic (of any race)	9,110	8.5%	10	2.4%	14	0.8%	0	0.0%
<b>totals</b>	<b>107,789</b>	<b>100%</b>	<b>422</b>	<b>100%</b>	<b>1,743</b>	<b>100%</b>	<b>103</b>	<b>100%</b>

South Bend pop. totals exceed number/percentage given because Hispanics are of any race and may be double counted.  
 Source: Equal Employment Opportunity (EEO) Worksite Data for South Bend city, IN  
 Special EEO Tabulation, based on Census 2000 data, <http://www.census.gov/eo2000/index.html>.

**Strengths and Opportunities**

- For more information on outreach services, see *Health & Safety, Statement 5, “Strengths and Opportunities”* section.
- Memorial Hospital and Health System is engaged in several outreach programs to minorities in South Bend, including:
  - “Diabeticos Saludables”: Spanish language diabetes education, a 4-class module and monthly support group; free supplies distributed: 104 clients enrolled in 2004.
  - “Prostate health”: Prostate Health Awareness Fair provided prostate exams to approximately 458 men in 2004
  - The “Memorial Hispanic Initiative” reaches out to the Hispanic community.

- “African American Women in Touch”: Breast Care Awareness / Breast Cancer outreach to African American women reaching 1,200 women, with 700+ scheduled for free mammograms annually.
- School Based Programs: educates middle to high school students on teenage pregnancy prevention, HIV/AIDS prevention, discourage smoking, peer pressure reached 2,520 students in 2004
- Prenatal care: Fore healthy birth outcomes, program targets pregnant, low-income women/families on Medicaid or uninsured, 400 served in 2004.
- Screenings at health fairs: glucose, blood pressure, cholesterol, depressions, osteoporosis and sickle cell: 1,736 individuals screened in 2004. (Source: Executive Director, Community Health Enhancement, Memorial Hospital and Health System)
- Saint Joseph Regional Medical Center is engaged is several outreach programs to minority communities in South Bend.
- The St. Joseph County Minority Health Coalition is active in South Bend helping minorities who lack healthcare by referring them to appropriate agencies / clinics and advocating on their behalf.
- There are 7 extremely high quality medical clinics in South Bend providing care for eligible uninsured.
- United Way of St. Joseph County has hotline, *First Call for Help*, linking people with services.
- Healthy Communities Initiative received a grant in 2003 from the federal Health Resources and Services Administration (HRSA) for the *Healthy Communities Access Project* to create a coordinated system of health care for the low-income medically uninsured and underinsured populations in St. Joseph County to maximize access to health care and to eliminate disparities in health outcomes. HCI is working in consortium with Indiana Health Center, Memorial Health and Hospital System, Saint Joseph Regional Medical Center, St. Joseph County Health Department and United Way of St. Joseph County on this project which includes standardizing / coordinating information gathering between the partners. (Source: Executive Director, Health Communities Initiative of St. Joseph County)

#### Benefits of Addressing the Issue

- Discovering the cause of existing health disparities will make it possible to begin working toward the elimination of those disparities.
- Health problems will be caught sooner; more timely treatment will improve quality of life and reduce costs on the local health care system.

#### Stakeholders

*The following stakeholders were consulted:*

- South Bend Mayor’s Office
- South Bend Police Department
- South Bend Common Council
- South Bend / St. Joseph County Building Department
- St. Joseph County Health Department
- St. Joseph County Commissioners
- St. Joseph County Prosecutor’s Office
- St. Joseph County Sheriff’s Department
- St. Joseph County Superior Court Judge Roland Chamblee, Jr.
- St. Joseph County Chamber of Commerce
- St. Joseph County Minority Health Coalition
- Healthy Communities Initiative (HCI)
- Saint Joseph Regional Medical Center
- NAACP
- St. Adalbert’s Parish

- Community Action Partners (CAP)
- Indiana University South Bend (Civil Rights Heritage Center)
- Howard Park Neighborhood Association
- Neighborhood Resources Corporation (formerly NRTSC)
- Youth Services Bureau
- Boys & Girls Clubs of St. Joseph County
- South Bend Tribune
- WSBT TV
- 245 stakeholders responded to the Panel's *Stakeholder Survey*

*General stakeholder reaction:*

- Stakeholders recognized and were concerned with existing health disparities between those with and without insurance, but also by race, ethnicity and socio-economic status.

Statement 5

Programs designed to prevent disease and promote health do not adequately reach the populations most in need.

Facts and Supporting Information

- "Approximately 95 percent of the \$1.4 trillion that we spend as a Nation on health goes to direct medical services, while approximately 5 percent is allocated to preventing disease and promoting health. This approach is equivalent to waiting for your car to break down before you take it in for maintenance." (Source: Secretary of Health, Thomas Thompson, 2004)
- The State of Indiana's current health priorities have individual and community dimensions. The priorities are:
  - personal health management;
  - children and adolescent health promotion;
  - access to quality health care; and
  - education and community-based programs.
- A combination of biological, behavioral (i.e., personal choices), and environmental factors influence individual health. Sometimes these choices are due to personal preference, and sometimes these choices are due to lack of information and other external circumstances ... These choices create opportunities for communities to educate, inform, and mobilize.
- Education and community-based programs play a role in helping communities reach out to their diverse populations with information, resources, and specific initiatives. The goal is to facilitate sound choices by individuals and communities alike. (Source: State of Indiana, Indiana State Department of Health, A Plan for Community Health Improvement, 2004-2007)
  - Personal Health Management: Indiana's challenges include high death rates from preventable diseases. Often behavioral choices influence outcomes for chronic disease, and many factors shape these decisions. Indiana ranks 46th nationally in prevalence of smoking among adults and 46th nationally for smoking during pregnancy. (Source: Smokefree Indiana at [www.smokefreeindiana.org](http://www.smokefreeindiana.org) )
  - Children and Adolescent Health Promotion: In Indiana, 22.7% of children are overweight compared to 16.1% nationally. (Source: Community Nutrition Research, USDA; available online at [www.ba.ars.usda.gov/cnrg/services/state18.html](http://www.ba.ars.usda.gov/cnrg/services/state18.html). 4/30/04)
- While smoking remains the single most preventable cause of mortality, rates of smoking cessation counseling of patients, both in the hospital and during office visits, are only 40 percent and 60 percent, respectively.
- Screening for colorectal cancer is 42.5 percent. Too many cancers are detected at a late stage, leading to suffering and premature death.

Strengths and Opportunities

- Indiana's current State Health Plan (A Plan for Community Health Improvement, 2004-2007) emphasizes prevention as the key and best strategy for improving health and health status.
- There are several programs that prevent disease and promote health locally. To mention just a few:
  - St. Joseph County Health Department: (Information is for calendar year 2004)
    - Academy of Dreams: Pregnancy postponement program geared to minority girls, 12-15 years old; three classes offered through Madison Center and the Juvenile Justice Center. 65 participants: 43 African Americans, 11 Hispanic, 10 Caucasian.
    - Diabetes Task Force
      - Media Campaign: 12 billboards, 3 in Spanish, displayed for 8 weeks countywide; 2 articles, 1 in Spanish.
      - 3000 English / 1500 Spanish placemats on diabetes distributed to 16 restaurants.
      - Diabetes Risk Assessment - Annual event; diabetes screenings at 17 sites countywide. 896 participants: 363 African American, 245 Hispanic, 288 white
    - Presentations: To schools, community groups and other locations on chronic health conditions, physical activity, STDs, alcohol/drugs/tobacco, nutrition, hygiene and environmental topics. 3,157 total participants.
    - Tobacco Compliance Checks: Monthly checks at area tobacco selling establishments countywide. 236 checks; 32 violations found and cited.

- *W.I.S.H. Conference (Women Inspired to Stay Healthy)*: Yearly health related conference for minority women; focus on living a healthy life; workshops on healthy eating, physical activity and healthy habits; health screens on blood glucose, bone density and stroke assessments. 63 participants: 59 African American, 4 Caucasian.
- Participation in 124 health fairs with 9,300 participants. (Source: Director of Health Education, St. Joseph County Health Department)
- Healthy Communities Initiative:
  - Smoking education and cessation: outreach to youth K - 12; STQP adult cessation classes in collaboration with Memorial Hospital and Saint Joseph Regional Medical Center; and smoking cessation outreach to pregnant women.
  - Family Health Navigators: caseworkers assigned to 11 community locations, including to eight indigent clinics and three emergency rooms to help clients navigate the health care system and to optimize available preventative and primary care services. As of March 2005, case managers working with 207 clients.
  - Healthy Communities Access Project (HCAP): Goal of this program is to maximize access to health care services and eliminate disparities in health outcomes. Results include: 294 clients enrolled; 361 medical providers offer services, covering 22 specialties. \$322,499 worth of services donated through this program. (Source: Executive Director, Healthy Communities Initiative of St. Joseph County)
- Saint Joseph Regional Medical Center:
  - Diabetes classes: Education and support groups provided as follow-up after diagnosis to encourage compliance. Approximately 25 people attend the classes held weekly. Kidney screenings are also done. 60 people screened, 65% Hispanic, 11% American Indian, 2% African American, 22% Caucasian.
  - Prostate cancer: Support groups and education, post-surgery. Prostate screenings at RCLC and Healthy Family Center over two-day period, Aug 2004: 150 screened.
  - At various outreach sites during first 10 months of 2004 fiscal year: 2,558 blood pressure readings; 1,286 blood glucose readings; presentations made to 4,641 people; and 2,268 people reached at health fairs. Free vision screenings also done regularly with the Lions Club. (Source: Community Outreach Coordinator, Saint Joseph Regional Medical Center)
- Memorial Hospital and Health System:
  - Office of Minority Health: Free prostate screenings; in 2002 - 2003 calendar years, 1, 239 prostate screenings provided, 348 of those screened were minorities. Of those screened, 79 had elevated PSAs and 91 were recommended to follow-up with a physician.
  - Women in Touch breast cancer program: Free mammograms provided to the uninsured. From 2000 to 2004, 3,179 mammograms given, 2,004 were minorities; 26 women with breast cancers found, 23 of whom were minorities. (Source: Coordinator, Women in Touch program, Memorial Hospital and Health System)
  - Please see Health & Safety Statement 4, Strengths section, for additional local outreach programs/activities.
- St. Joseph County put in place a comprehensive community assessment process using the Centers for Disease Control's Mobilizing for Action through Planning and Partnerships (MAPP) model in 2001.
- There are many outstanding examples of best practices in States across the Nation. These interventions include:
  - A successful suicide prevention program instituted by the U.S. Air Force.
  - An initiative in Massachusetts to lower the smoking rate.
  - A Michigan project to provide better prevention, detection, and treatment of diabetes. (Source: AHRQ. National Healthcare Quality Report. [www.ahrq.gov/qual/nhqr03/nhqrsum03.htm](http://www.ahrq.gov/qual/nhqr03/nhqrsum03.htm))

#### Benefits of Addressing the Issue

- Many health problems will be prevented; people will be healthier with a higher quality of life.
- The cost burden on families and institutions related to living with and treating chronic diseases will be significantly reduced.

Stakeholders

*The following stakeholders were consulted:*

- South Bend Mayor’s Office
- South Bend Police Department
- South Bend Common Council
- South Bend / St. Joseph County Building Department
- St. Joseph County Health Department
- St. Joseph County Commissioners
- St. Joseph County Prosecutor’s Office
- St. Joseph County Sheriff’s Department
- St. Joseph County Superior Court Judge Roland Chamblee, Jr.
- St. Joseph County Chamber of Commerce
- St. Joseph County Minority Health Coalition
- Healthy Communities Initiative (HCI)
- Saint Joseph Regional Medical Center
- NAACP
- St. Adalbert’s Parish
- Community Action Partners (CAP)
- Indiana University South Bend (Civil Rights Heritage Center)
- Howard Park Neighborhood Association
- Neighborhood Resources Corporation (formerly NRTSC)
- Youth Services Bureau
- Boys & Girls Clubs of St. Joseph County
- South Bend Tribune
- WSBT TV
- 245 stakeholders responded to the Panel’s *Stakeholder Survey*

*General stakeholder reaction:*

- Almost 50% of stakeholders responding to the Panel’s *Stakeholder Survey* agreed that “There is a culture of unhealthiness in the region” and 85% thought this was an important issue.
- Almost 46% of stakeholders responding to the Panel’s *Stakeholder Survey* agreed that “People don’t take personal responsibility for their health” and 87% thought this was an important issue.
- Saint Joseph Regional Medical Center identified lack of health and wellness programs as a serious problem.
- The St. Joseph County Health Department identified the lack of preventative care and wellness programs as a serious community issue.

Statement 6

**There is insufficient support for ex-offenders re-entering society.**

Facts and Supporting Information

- The number of prison inmates continues to grow. Most of them will eventually be released.
- There were 246 adult ex-offenders on parole who moved back to South Bend in 2003. This is a fairly constant number year to year. (Source: District Director, Correction Department of Parole Division; Program Manager, DuComb Community Corrections)
  - Of those mentioned above, 20 were sex offenders and 25 were women. (Source: Program Manager, DuComb Community Corrections)
- As of December 31, 2004, there were 4,213 people on probation in St. Joseph County: 1,773 felons and 2,440 misdemeanor offenders.
  - Of that total, 2,267 (53.9%) are Caucasian; 1,603 (38.0%) are African American; 281 (6.6%) are Hispanic; and 62 (1.5%) are listed as other. (Source: Chief Probation Officer, Adult Probation, St. Joseph County)
- Many businesses are reluctant to hire someone who reports having served time for a felony.

Strengths and Opportunities

- There are a few faith-based groups working with ex-offenders: God Cares Ministry, Companions on the Journey, and Men of Scars.
- The Center for the Homeless and Hope Rescue Mission also take in homeless ex-offenders; sometimes St. Margaret's House will take in a female ex-offender.
- DuComb Community Corrections provides work release, day detention, home detention and community service restitution programs for nonviolent offenders as an alternative to prison, with a capacity of 23 at any given time. (Source: Program Manager, DuComb Community Corrections)
- Dismas of Michiana, Inc. is a residential program for ex-offenders to help rehabilitate them back into society with a capacity for 14 ex-offenders at any given time: six females, eight males. Dismas also organizes a support group for female ex-offenders. (Source: Executive Director, Dismas of Michiana, Inc.)
- The City of South Bend provides funding to the Workforce Investment Board's job training program for ex-offenders.

Benefits of Addressing the Issue

- With the proper support, this vulnerable population can become productively involved in the local community.
- The recidivism rate can be reduced to the benefit of all.

Stakeholders

*The following stakeholders were consulted:*

- South Bend Mayor's Office
- South Bend Police Department
- South Bend Common Council
- South Bend / St. Joseph County Building Department
- St. Joseph County Health Department
- St. Joseph County Commissioners
- St. Joseph County Prosecutor's Office
- St. Joseph County Sheriff's Department
- St. Joseph County Superior Court Judge Roland Chamblee, Jr.
- St. Joseph County Chamber of Commerce
- St. Joseph County Minority Health Coalition

- Healthy Communities Initiative (HCI)
- Saint Joseph Regional Medical Center
- NAACP
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- Community Action Partners (CAP)
- Indiana University South Bend (Civil Rights Heritage Center)
- Howard Park Neighborhood Association
- Neighborhood Resources Corporation (formerly NRTSC)
- Youth Services Bureau
- Boys & Girls Clubs of St. Joseph County
- South Bend Tribune
- WSBT TV
- 245 stakeholders responded to the Panel's *Stakeholder Survey*

*General stakeholder reaction:*

- Superior Court Judge Richard Chamblee, Jr. stated that this population lacks adequate opportunities.
- Other stakeholders, particularly from minority communities, expressed their concern for the limited services available to help support re-entry for ex-offenders.

Statement 7

The crime rate in South Bend, though declining, is significantly higher than comparable cities in Indiana.

Facts and Supporting Information

- The crime rate in South Bend, though declining over the 1995 - 2004 period, is still too high. See the table below:

South Bend Police Department, Part I Crimes Rates: 1995 thru 2004										
Year	Index offense Rate (total)	Violent Crime Rate					Property Crime Rate			
		Violent Crime Total	Murder	Rape	Robbery	Aggravated assault	Property Crime Total	Burglary	Larceny	Motor vehicle theft
1995	9,444.1	924.3	24.5	81.1	366.9	451.8	8,519.8	2,269.3	5,583.6	666.8
1996	10,140.7	957.7	20.6	87.1	479.8	370.1	9,183.1	2,698.7	5,795.6	688.7
1997	9,326.3	822.3	15.9	66.3	348.1	392.0	8,504.0	2,142.1	5,697.3	664.6
1998	8,901.3	761.2	13.6	70.9	348.6	328.2	8,140.1	2,005.9	5,400.2	734.0
1999	8,806.4	782.8	17.0	75.9	356.5	333.5	8,023.6	2,254.5	5,052.2	716.9
2000	7,882.1	739.4	11.1	63.1	360.0	305.2	7,142.7	1,790.5	4,684.2	668.0
2001	8,548.4	832.2	19.7	73.1	456.4	283.0	7,716.2	1,810.5	5,250.7	655.0
2002	7,720.3	771.7	18.8	87.5	333.2	332.2	6,948.5	1,718.5	4,689.7	540.2
2003	7,214.3	727.7	15.2	73.9	307.0	331.6	6,486.6	1,625.9	4,354.7	506.0
2004	6,946.2	722.0	9.5	67.3	325.9	319.3	6,224.2	1,473.4	4,240.1	510.7
% change, '95 - '04	<b>-26.45</b>	<b>-21.89</b>	-61.33	-17.05	-11.16	-29.32	<b>-26.94</b>	-35.07	-24.06	-23.41

Source: 1996 - 2002: U.S. Dept of Justice, Bureau of Justice Statistics, Data online.  
Source: 2003- -2004: South Bend Police Department, memo from Chief Fautz to Board of Public Safety, January 7, 2005  
\* Crime rate per 100,000 population. Population source: U.S. Census. Estimates used for 2001-2004.

- The crime rate in South Bend is higher than in comparable cities in Indiana. See the table below:

Index offense rate of selected Indiana cities: 1994 - 2003				
	South Bend Police Dept	Evansville Police Dept	Fort Wayne Police Dept	Gary Police Dept
1994	9,726.9	5,601.3	7,312.4	9,469.0
1995	9,444.1	5,725.9	6,900.6	
1996	10,140.7	5,633.1	7,500.7	9,678.2
1997	9,326.3	5,872.5	8,199.4	8,703.6
1998	8,901.3	6,302.0	7,569.9	6,702.0
1999	8,806.4	5,023.9	6,621.3	6,042.7
2000	7,882.1	5,111.8	5,888.9	6,132.6
2001	8,415.4	5,452.8	6,424.3	5,934.7
2002	7,513.1	4,997.0	5,831.5	5,584.5
2003	7,109.7	5,528.1	5,624.3	5,976.7
Change per annum	-3.4%	-0.1%	-2.9%	-5.0%

Sources: FBI, Uniform Crime Reports, prepared by the National Archive of Criminal Justice Data  
Notes: Rates are the number of reported offenses per 100,000 population. When data are unavailable, the cells are blank.  
Evansville Police Dept Indiana 2000 - Due to changes in reporting practices, annexations, and/or incomplete data, figures are not comparable to previous years' data.  
Variations in population coverage and reporting practices may cause differences in reporting from year to year.  
Date of download: Feb 09 2005. Bureau of Justice Statistics -<http://www.ojp.usdoj.gov/bjs>

#### Strengths and Opportunities

- The crime rate in South Bend has been declining.
- The South Bend Police Department has actively pursued, and been awarded, federal grants to acquire the latest technologies to create crime tracking and analysis systems and to establish a crime lab which is recognized as one of the best in the region.
- The South Bend Police Department runs several highly regarded programs (such as Volunteers in Policing, Project Marc, Citizen's Police Academy, Shop-A-Cop, among others).
- Volunteers in Police Service and Civilian Police Academies (100+ Volunteers).
- Almost 66% of stakeholders responding to the Panel's *Stakeholder Survey* believed South Bend is PERCEIVED as unsafe, though only 27% believed it IS unsafe.

#### Benefits of Addressing the Issue

- Less crime will improve the quality of life in every neighborhood in the city.
- A safe city will benefit the local housing market.
- Visitors feeling safe in the city in the evening will benefit the downtown entertainment district.

#### Stakeholders

*The following stakeholders were consulted:*

- South Bend Mayor's Office
- South Bend Police Department

- South Bend Common Council
- South Bend / St. Joseph County Building Department
- St. Joseph County Health Department
- St. Joseph County Commissioners
- St. Joseph County Prosecutor’s Office
- St. Joseph County Sheriff’s Department
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- Indiana University South Bend (Civil Rights Heritage Center)
- Howard Park Neighborhood Association
- Neighborhood Resources Corporation (formerly NRTSC)
- Youth Services Bureau
- Boys & Girls Clubs of St. Joseph County
- South Bend Tribune
- WSBT TV
- 245 stakeholders responded to the Panel’s *Stakeholder Survey*

*General stakeholder reaction:*

- Crime is one of the primary challenges for South Bend most often mentioned by stakeholders, both in terms of the perception of those who live outside the city and exaggerate its prevalence, and from those within the city who suffer from its very real effects.
- Some stakeholders expressed concern that certain neighborhoods “have been conceded as high crime areas” where police officers, even unwittingly, “tolerate” crime.