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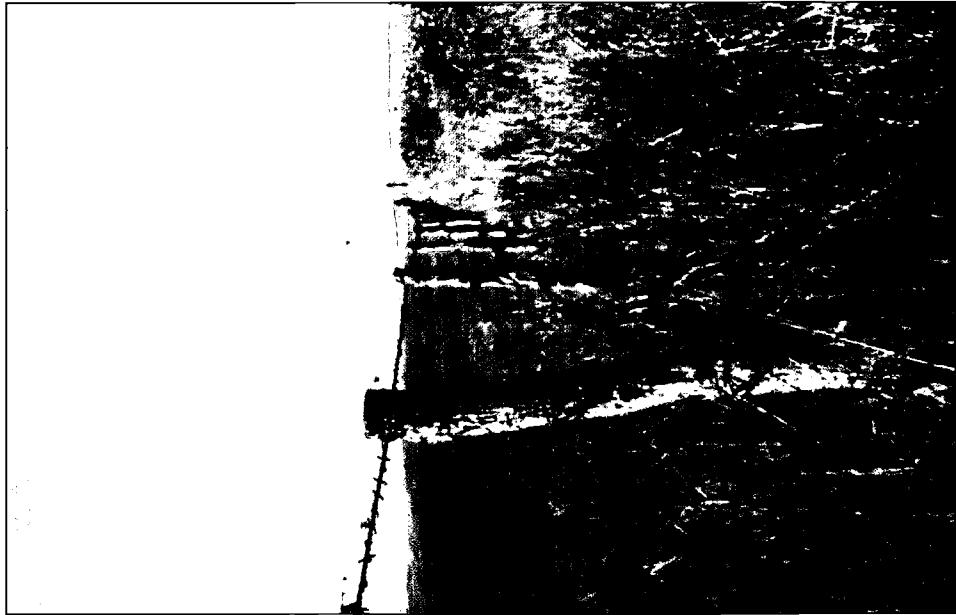
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ABSTRACT

A study examined the unique conditions affecting quality of life for low-income rural children and their families in Nebraska, North Dakota, and South Dakota. Qualitative data were gathered from 11 focus groups conducted in a variety of rural communities, including tribal reservations, across the three states, and from interviews with professional service providers and community leaders. Quantitative data were gathered from secondary sources such as the U.S. Census Bureau. Findings covered economic opportunity, social networks, and services and supports. In the area of economic opportunity, it was noted that jobs were insufficient, and wages were incapable of supporting families. Transportation was also an obstacle. Public transportation was not available in rural areas, and much travel was required to access jobs, stores, and services. Concerning social networks, there was a strong sense of community, but recreational opportunities were scarce, especially for youth. Ethnic minorities and new residents experienced a good bit of prejudice and discrimination. Sparse population densities and population decline contributed to isolation. Problems related to social services included lack of access within a reasonable distance; stigma in rural areas against seeking services; dying communities that leave families without services; and consolidation of schools that complicates parent participation, student involvement in after-school activities, and staff knowledge of family conditions. Child care and medical services were especially sparse. Recommendations for policy are discussed. Ten maps present various demographic information. (TD)

A Rural Road: Exploring Economic Opportunity, Social Networks, Services and Supports that Affect Rural Families



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The Rural Great Plains Collaborative Project

December 2001

The Rural Great Plains Collaborative Project

Funding by: The Annie E. Casey Foundation, Baltimore, Maryland

Implemented by:

Voices for Children in Nebraska
North Dakota KIDS COUNT!
South Dakota KIDS COUNT Project

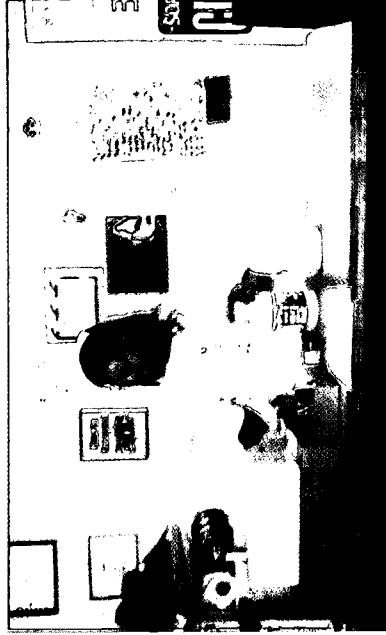
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Preface

KIDS COUNT, a project of the Annie E. Casey Foundation, is a national and state-by-state effort to track the status of children in the United States. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure brighter futures for all children. At the national level, KIDS COUNT publishes a yearly *KIDS COUNT Data Book* and related publications addressing concerns that affect child outcomes nationally. The Foundation also funds a nationwide network of state-level KIDS COUNT projects that provides a community-by-community picture of the condition of children in individual states.

In 2000, the Annie E. Casey Foundation embarked on a decade long effort to help neighborhoods become places where children and their families can flourish. This effort is called the Neighborhood Transformation/Family Development Initiative and is an innovative approach to promote family integrity. The basic premise behind the work is that children do well when their families do well, and families do better when they live in supportive communities. The centerpiece of Neighborhood Transformation/Family Development is *Making Connections*. It is focused on strengthening families by connecting them to the opportunities, resources, and support they need to rear happy, healthy, confident and successful children.



The three kinds of connections the Foundation identified as most critical include:

1) **Economic Opportunity** - connecting young people and adults to information and networks that increase their pathways to local and regional labor markets, their access to affordable goods and services, and the likelihood that they will secure adequate and predictable incomes and meaningful opportunities to accumulate savings and assets.

2) **Social Networks** - connecting families to networks of friends, neighbors, kin, community organizations, role models, mentors, faith-based institutions, and other positive social relationships that encourage and provide neighbor-to-neighbor support and mutual aid and make people feel less isolated and alone.

3) **Services and Supports** - connecting people in need to accessible, affordable, family-centered, and culturally appropriate forms of help that provide preventive and ongoing support.

Acknowledgments

The Rural Great Plains Collaborative is grateful to everyone who played a role in helping to document the needs of rural families and their children in North Dakota, South Dakota, and Nebraska. A special thank you to the families who took time out of their busy schedules to participate in focus groups and to those who proofed the report.

The Project also wishes to thank the following people:

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Jan Losby, Institute for Social and Economic Development (ISED), Coralville, Iowa, for training she provided in preparation for conducting focus groups and for providing comments on the report.

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Introduction/Background

“Larger cities give more opportunity to explore different people (you are invisible). Rural environment gives opportunity to know yourself.” Participant quote

The Great Plains Rural Collaborative was born out of a shared concern among the KIDS COUNT Projects in Nebraska, North Dakota and South Dakota about the issues affecting rural children and their families. The directors of these three programs identified a common concern later confirmed by a wider group of KIDS COUNT projects: rural families face unique challenges to their effectiveness and long-term success in raising their children, yet there is not a body of research nor a common language that documents the circumstances which endanger their ability to raise healthy children in rural communities. With the interest of the larger KIDS COUNT Network as a backdrop and the encouragement of the Foundation, the Great Plains Rural Collaboration was inspired to envision how a study could be designed to begin to document the unique conditions affecting the quality of life for low income rural children and their families. As the three state projects have met to design the mechanics of this process, the help of respective State Data Centers and national expertise on rural issues has been sought. The Strengthening Rural Families meeting sponsored by the Annie E. Casey Foundation in August, 2000 also provided valuable insight into the structuring of this project. It is hoped that this project will enrich the understanding of how rural and urban children and their families share the need for connections, albeit in different types of neighborhoods.

The purpose in conducting this research is to identify the presence of consistent themes for low-income families in the three states and also the circumstances influencing the experience of disconnection for families raising children in rural communities. Through information gathered thus far, it has become evident that low income families raising children in

rural areas face challenges on different levels—from meeting their most basic needs to job satisfaction. In an effort to explore how the challenges of rural families relate to the Casey Foundation’s Neighborhood Transformation/Family Development *Making Connections* themes, quantitative and qualitative data have been organized to reflect the three types of connections identified as central to family success.

Qualitative Data: Focus Groups

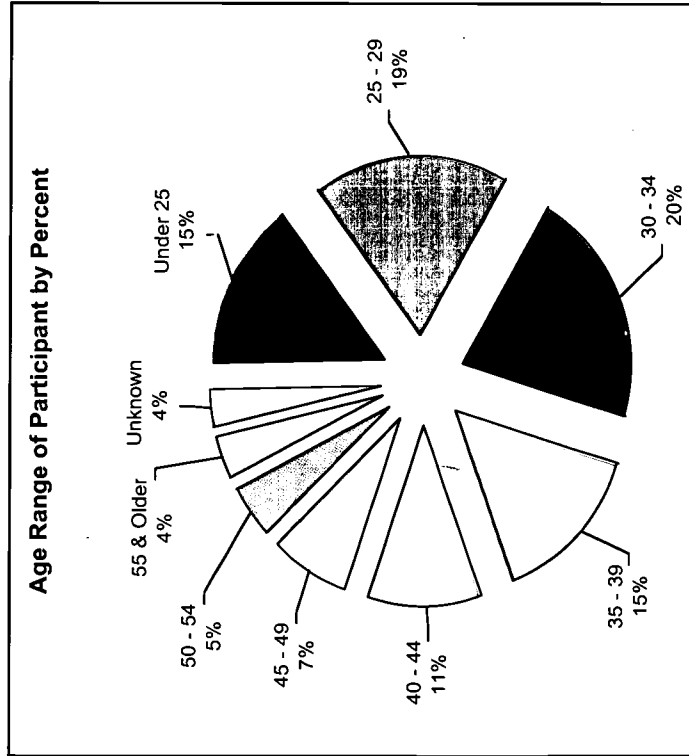
Eleven focus groups were conducted during July and August, 2001, throughout the three states. Focus group and key informant input was sought to put stories, explanations, and meaning behind the raw numbers in the quantitative data collected to look at circumstances affecting rural children and their families.

Because the report is about rural poverty, the focus groups were conducted in or near a variety of rural communities. Five of the focus groups were on tribal reservations. All focus group sessions were held in locations convenient to and comfortable for participants. The groups were composed of families with children having incomes approximately at or below 185% of poverty level.

Contact with focus group participants was made through individuals or agencies working with families fitting the project definition of ‘rural’ and ‘low income,’ and included program directors, tribal social service agencies, regional social service agencies and churches. These individuals or agencies contacted participants and helped arrange for meeting space,

Introduction/Background

child care, and food/beverages to accommodate focus group participants. Contact people either provided names and addresses for respective states to send individual invitations or sent them locally. They were critical to the success of focus groups both in terms of their relationship with participants as well as their attention to the details of meeting arrangements. In most instances the individual who coordinated meeting logistics was available at the time of the focus group but was not included in the focus group discussion. Eight to 10 focus group participants were sought in each location. The actual number of participants ranged from two to 11. The following chart indicates the age ranges of participants.



Focus groups were intended to provide a contextual background for available quantitative data, and to supplement sections lacking available quantitative data. Focus group questions were designed to direct discussion toward community benefits and challenges and identify ways that families make connections in the following three areas:

- Economic Opportunity such as jobs, wages and cost of living;
- Social Networks including churches, schools and recreation; and
- Services and Supports such as medical, child care and shopping.

Information gleaned from focus group discussions is qualitative data weaving experiences, anecdotes and personal perspective among data that can be quantified. The probes or lead-ins for focus group questions asked participants to, “give me a picture of...” or “give me an example of...” by discussion facilitators.

To maximize participation, focus groups were scheduled at a time and location convenient for participants. Food [lunch or dinner] and child care were provided for participants and their children. Transportation or reimbursement for transportation was offered and a \$10.00 stipend was given to each participant. Consent forms authorizing the release of information gathered were signed by all participants. Some participants also signed releases allowing photographs and identifying information to be used. There were no participants who chose to leave after reviewing the consent form. Each focus group lasted approximately 2 ½ hours including the time for eating and socializing.

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Jan Losby, PhD, of the Institute for Social and Economic Development (ISED), Coralville, Iowa, trained a team from Nebraska and South Dakota in focus group facilitation. Teams of three people staffed each of the focus groups with one facilitating, one taking notes, and one overseeing logistical details. To achieve as much accuracy as possible, each meeting was tape-recorded with full knowledge and permission of participants.

Key Informant Interviews

In most communities, additional contextual information was sought from professional service providers or community leaders. This information was used to validate, refute or expand upon results of focus group discussions. Key informants included program directors, social workers, tribal leaders, elected officials, business owners, service providers and educators. Over thirty key informant interviews were conducted in the three states.

A key informant interview was developed using the same areas of Economic Opportunity, Social Networks, Services and Supports. Key informant contacts were made directly by each of the focus group team members. Some key informants were individuals already familiar to the KIDS COUNT organizations, some were individuals recommended by focus group community coordinators; and some were people encountered in communities where focus groups were convened.

About one-third of the key informant interviews were completed in person. The remaining two-thirds were completed over the phone. Key informant interviews were useful in providing historical information about schools, businesses, rural lifestyles, etc. as well as projections about future trends.

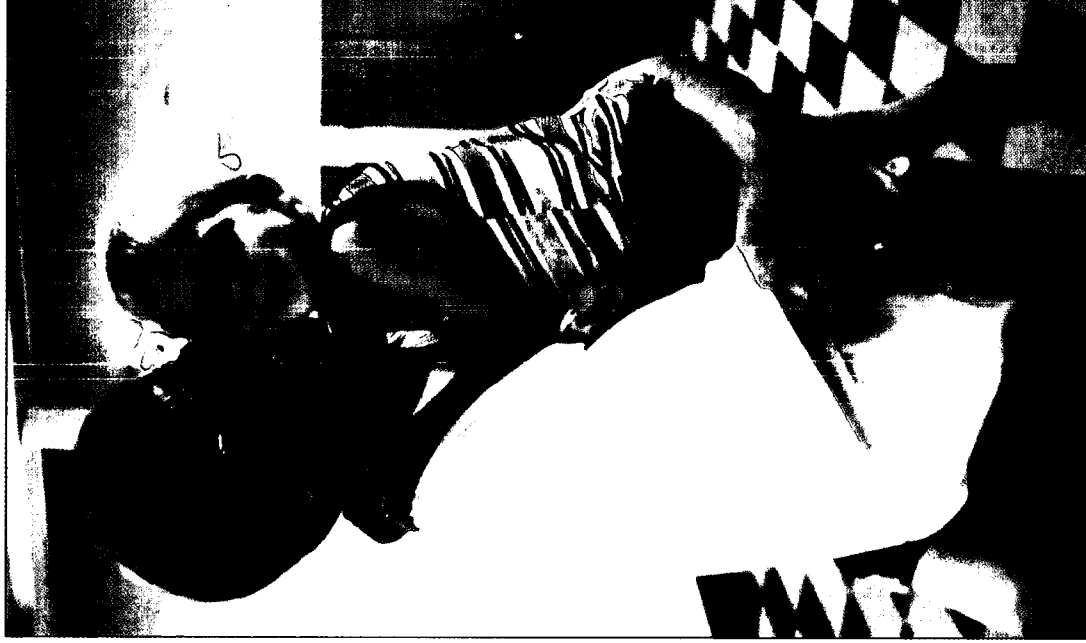
Quantitative Data

Quantitative data have been selected for inclusion in this report based on their relevance to circumstances described by low-income families with children who participated in focus groups across the three participating states. It is important to note that most currently available and widely used data fall short of accurately depicting the conditions affecting low income rural families and their children, because unique contextual factors are often hidden. For example, if one looks only at unemployment rates in the three-state region, a relatively secure economic environment could be surmised; however, families report the necessity of maintaining from two to four jobs in order to provide the 'basics' for their families. This circumstance is reflected in Census Data, indicating that the three-state region has the highest rates of multiple job holding in the United States. Multiple job holding rates are typically related to a preponderance of low wage jobs, which is confirmed by data indicating that the majority of work force participants occupy service-sector jobs in all three states. These factors become part of a larger picture of disadvantage for low-income rural families and their children, when the implications are witnessed in a lack of affordable housing, child care and health benefits for many families.

Introduction/Background

Themes

Within the three areas around which this report is organized, themes arose for participating families: **Economic Opportunity** - Jobs and Transportation; **Social Networks** - Community and Recreation; **Services and Supports** - Medical and Child Care. These themes will be highlighted throughout the following discussion of respective research findings as they portray ways in which rural families are impacted by the presence or absence of connections in their communities. It should be noted that additional issues were identified that could also be considered central to the experiences of participating families. Among these are: education, housing, the role of churches, and access to public safety services, to name a few. While space in this publication does not allow a full elaboration of these concerns, it is anticipated that they will be further explored and explicated as efforts to document the rural experience continues. Direct quotes from focus group participants or from a key informant interview are signified by *italics*.



A Compelling Case: Rural Disparity

*[A doctor in a larger city said to a participant receiving services]
“Gee is there anything west of [a large town in the state] and of course my son just said, ‘yes, my house.’” Participant quote*

Definitions

For the purposes of this project, county was used as the basic unit of analysis. The U.S. Census Bureau defines metropolitan counties and non-metropolitan counties. Non-metropolitan counties are further broken out into non-metropolitan urban counties and non-metropolitan rural counties. The definitions are as follows:

Metropolitan counties are defined as those counties included in Metropolitan Areas (MA). The general concept of an MA is one of a large population nucleus, together with adjacent communities that have a high degree of economic and social integration with that nucleus. Each MA must contain either a place with a minimum population of 50,000 or a Census Bureau-defined urbanized area and a total MA population of at least 100,000. An MA comprises one or more central counties. An MA also may include one or more outlying counties that have close economic and social relationships with the central county. An outlying county must have a specified level of commuting to the central counties and also must meet certain standards regarding metropolitan character, such as population density, urban population and population growth.

Non-metropolitan urban counties are those counties outside an MA with places having a population of 2,500 persons or more.

Non-metropolitan rural counties are those counties outside an MA with places having a population less than 2,500.

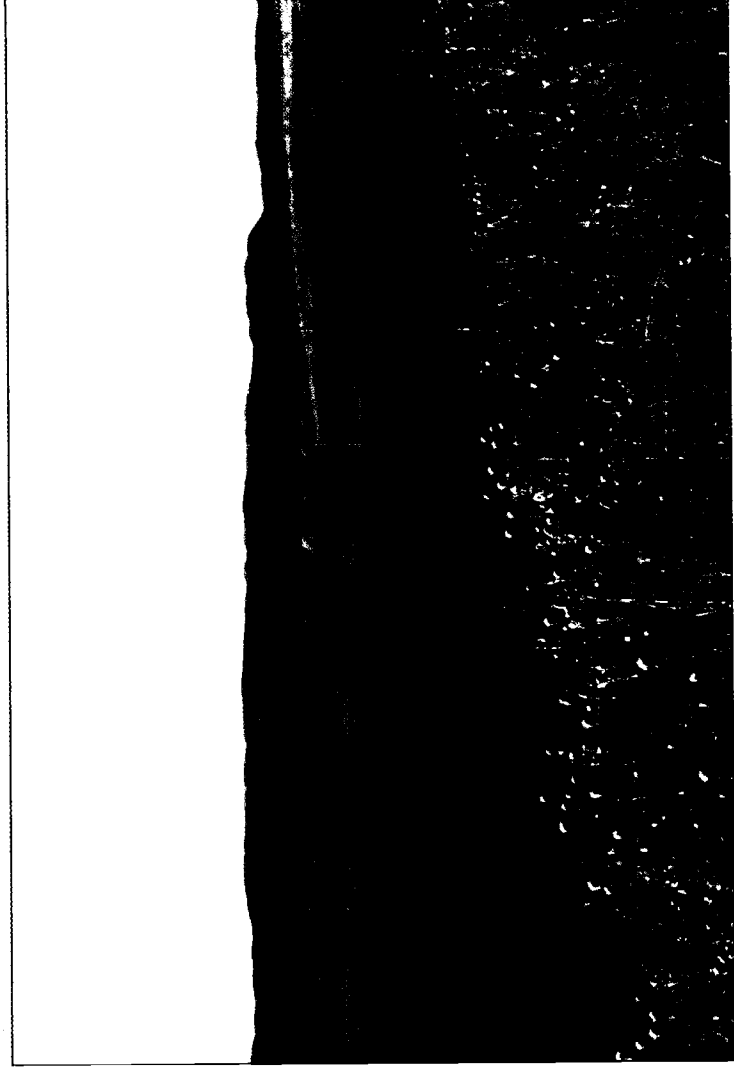
The following maps provide some insight into rural-urban differences across the three states. The map Metropolitan and Non-Metropolitan Status in the United States by County: 1993 (page 12) shows the distribution of counties by metropolitan status. More than 80 percent of the nation's population lives within the 258 Metropolitan Statistical Areas and 18 Consolidated Metropolitan Statistical Areas. Nonetheless, there is a wide distribution of non-metropolitan counties including those lacking a city of at least 2,500 people labeled as rural. The map clearly shows the small number of counties that qualify as metropolitan in the three-state area.

The map on page 13 illustrates another way to view rural counties. The Rurality Scores for U.S. Counties, 1994, scores counties based on their connectedness to a larger society. Instead of viewing rural as a measure of city size, it views rural as a function of isolation. This approach to classifying rural counties results in a very different distribution of counties.

A Compelling Case: Rural Disparity

The Northeastern and Upper Great Lakes regions have a significant number of non-metropolitan counties including those labeled as rural, however, they have few counties that rank high on the isolation index.

Dr. Charles Cleland measured rurality by “degree of isolation from and inability to participate in the programs of the larger society.” In his research, counties are rated based on: access to a city by interstate, education level of citizens, percent of citizens employed in professional and related services, percent employed in public service/administration, median family income, the incidence of poverty, the number of local newspapers, recent population growth, the popularity of the county as a retirement destination, and population density.

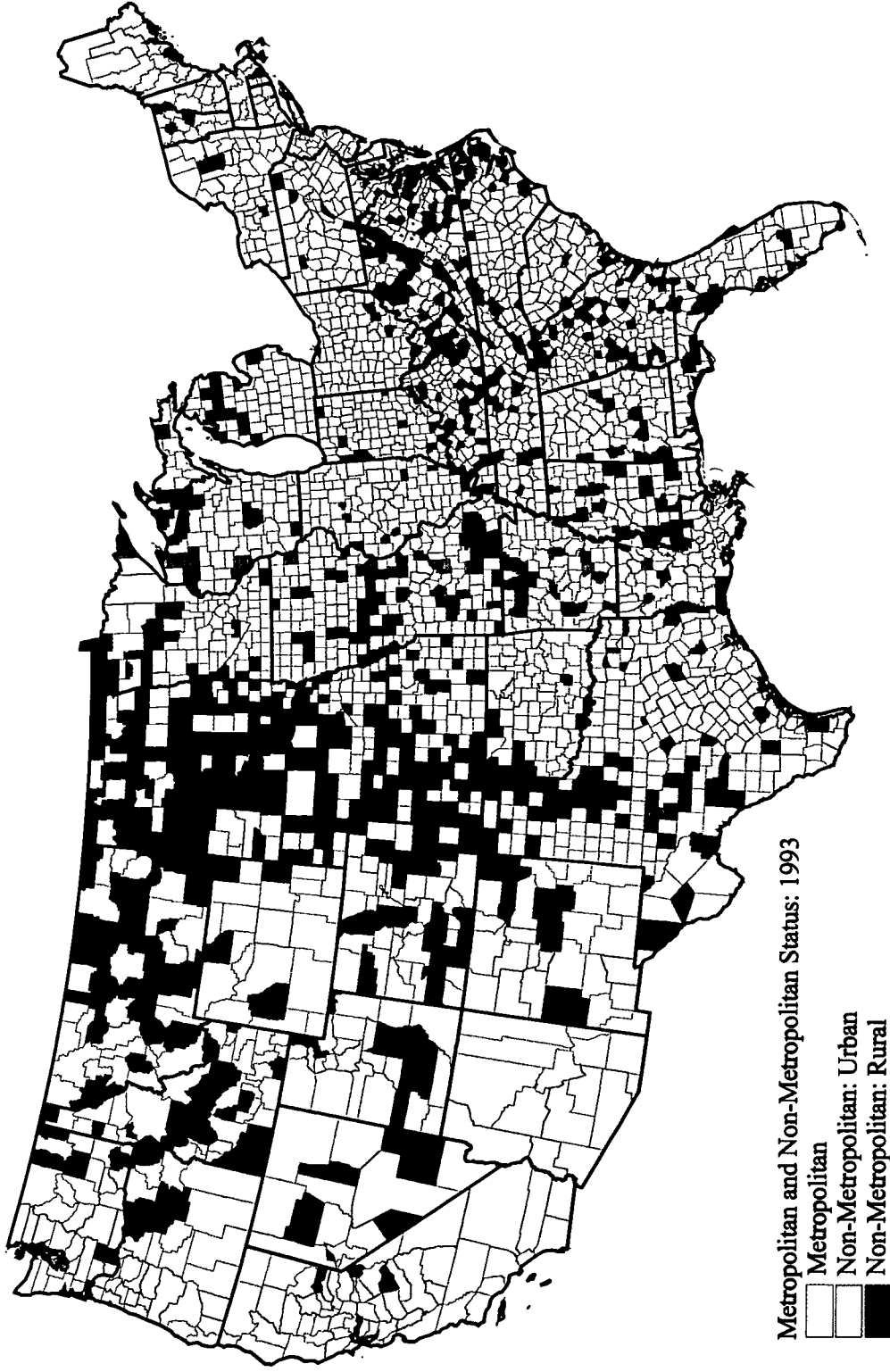


A Compelling Case: Rural Disparity

MAP 1

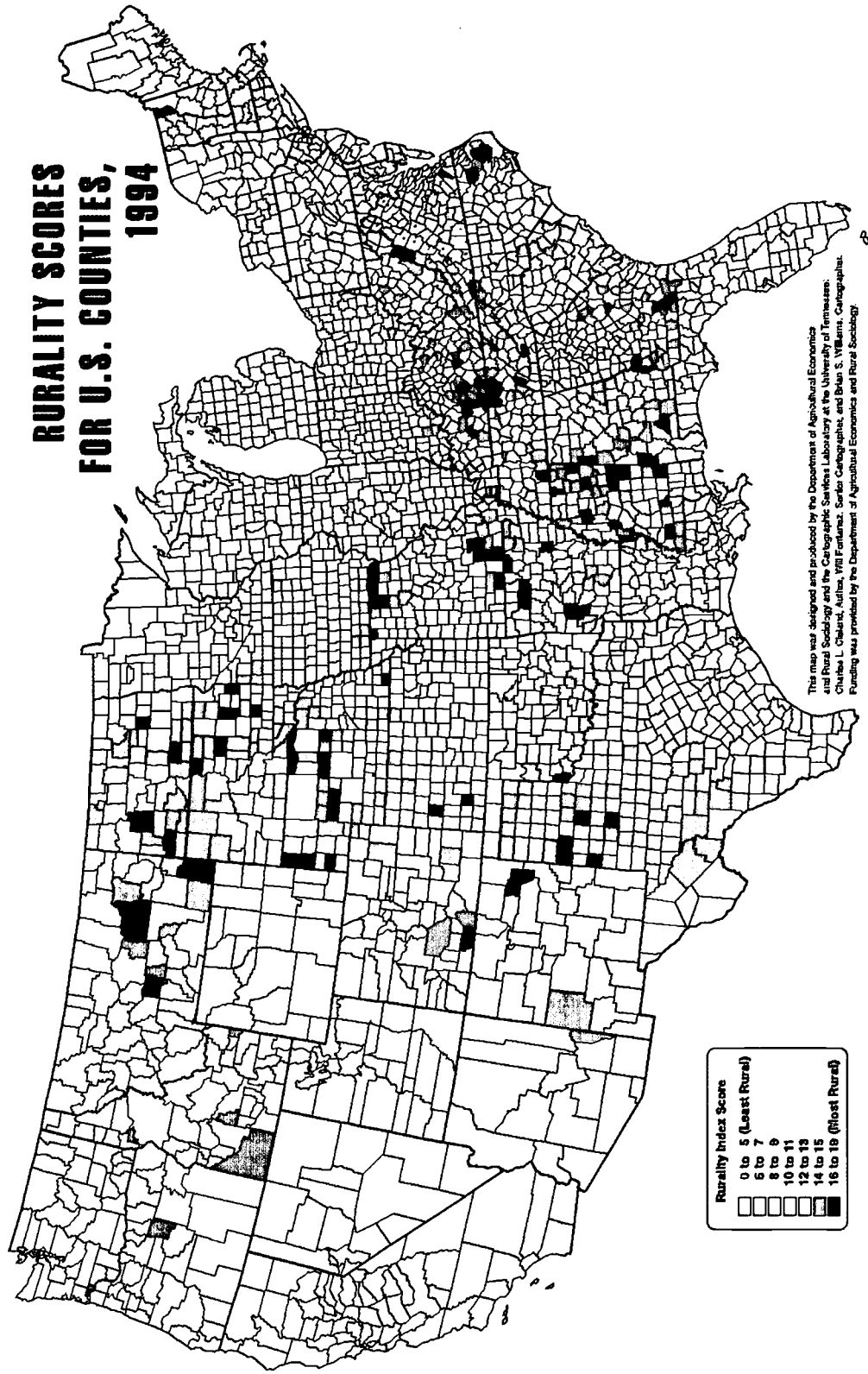
Metropolitan and Non-Metropolitan Status in the United States by County: 1993

Source: U.S. Department of Agriculture, *Economic Research Service (ERS), 1993 Rural-Urban Continuum Codes.*



A Compelling Case: Rural Disparity

MAP 2



A Look at Rural Children and Families

“A lot of schools around us don’t have wrestling at all so then we’re running clear to other cities 60 miles away to wrestle. Which seems to be a long time when you only have six minutes on the mat.” Participant quote

“We would like to be in a small town, but we just can’t make it. I have to count every nickel and dime that I make. We have to do that every single month of my life, so we have to try to get out of here.” Participant quote

“I’ve been in other places and travel quite a bit, but this is our home, this is where we feel safe.” Participant quote

“It’s where my roots are.” Participant quote

Project Description

The purpose of the Rural Great Plains Collaborative Project is to explore rural poverty from a statistical and community-based research aspect and identify those specific issues impacting children living in rural areas. The development of methods that can be utilized by other similarly situated states to replicate and expand upon this initiative is an important goal as well.

The project uses a dual approach in collecting qualitative and quantitative information about poverty in rural areas. Qualitative data were gathered from focus groups and key informants, while quantitative data were gathered from secondary sources, e.g., U.S. Census Bureau.

The Rural Great Plains Collaborative looks at the Annie E. Casey Foundation’s *Making Connections* themes from their Neighborhood Transformation/Family Connections initiative, through the perspective of participants in the focus groups and through data at the county and state levels. Few people realize that 18 of the poorest 50 counties in the nation are in Nebraska, North Dakota and South Dakota¹. What follows is a snapshot of life, in terms of economic opportunity, social networks, services and supports, for low-income families and children in rural communities in Nebraska, North Dakota, and South Dakota.

¹Funk, Patricia and Jon Bailey. (2000). *Trampled Dreams: The Neglected Economy of the Rural Great Plains*. Walthill, NE: Center for Rural Affairs. page 6.

A Look at Rural Children and Families

Economic (ek-y-‘näm-ik) – of or relating to a household or its management.

The Annie E. Casey Foundation *Making Connections* defines Economic Opportunity as connecting young people and adults to information and networks that increase their pathways to local and regional labor markets, their access to affordable goods and services, and the likelihood that they will secure adequate and predictable incomes and meaningful opportunities to accumulate savings and assets.

“I have a college degree but I have to live on housing assistance and child care assistance... I don’t think after going through college this is something I should be doing.” Participant quote

Contrary to popular belief, economic distress in rural areas is longstanding and chronic. While there are periodic economic crises, they are seen as a symptom of a larger problem – neglect by state and federal policy makers of economic development strategies needed in the region. These and similar rural communities have often been ignored because they defy commonly held beliefs about poverty:

- unemployment rates are generally low
- there are few minorities
- the poor are generally not concentrated in one area, and the homeless are invisible
- although the land base is large, the population is small.²

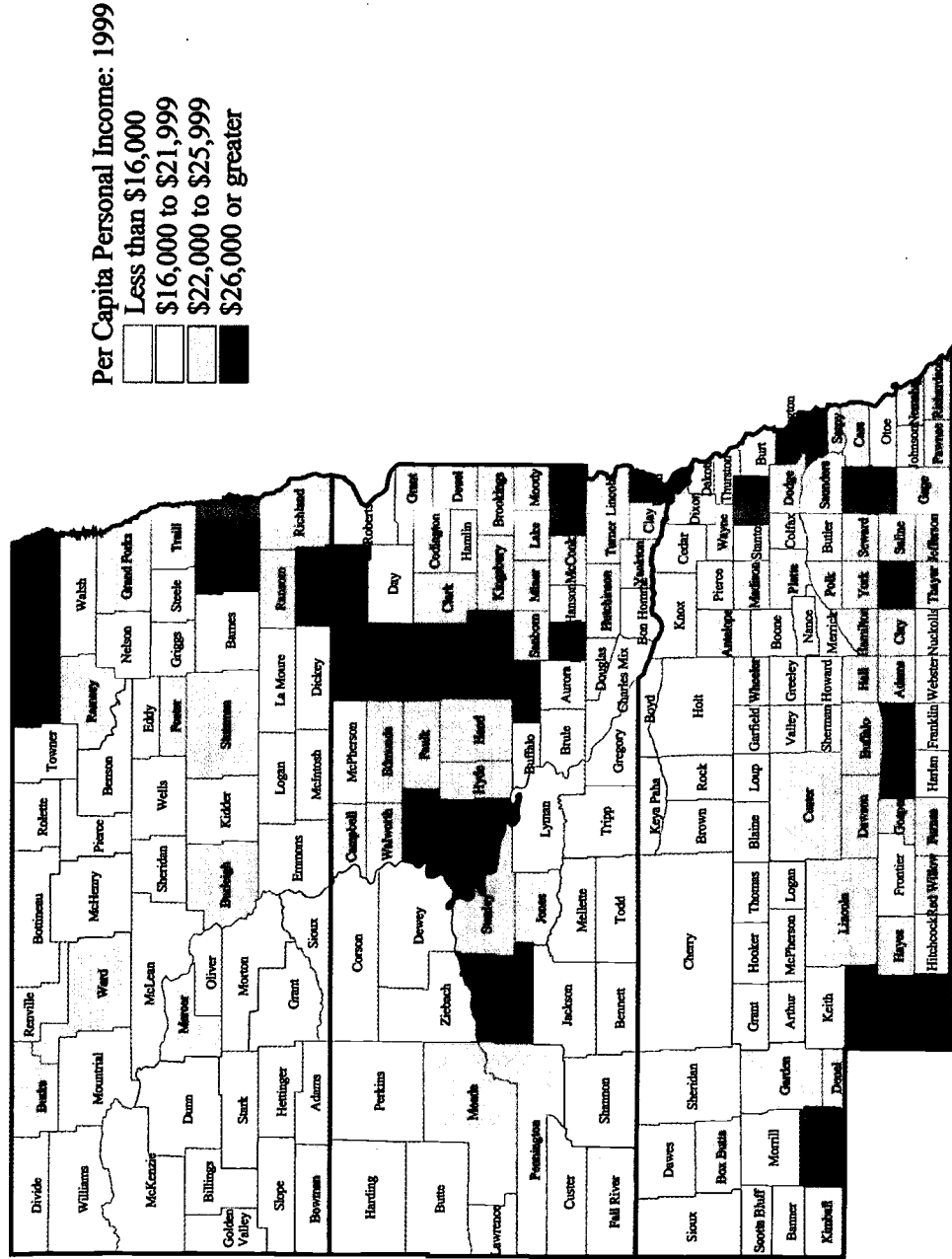
The Per Capita Personal Income in Nebraska, North Dakota and South Dakota by County: 1999 map (page 16) identifies levels of personal income in the three state area. Counties with relatively high per capita personal income in the three-state region are concentrated on the eastern side of the state and in close proximity to the major interstate highways. In contrast, the lowest per capita personal income areas are in Native American reservation counties. Only a few counties show per capita income of \$26,000 or greater. Large areas with per capita personal income of less than \$22,000 are apparent.

² *IBID.*, p.14.

A Look at Rural Children and Families

MAP 3

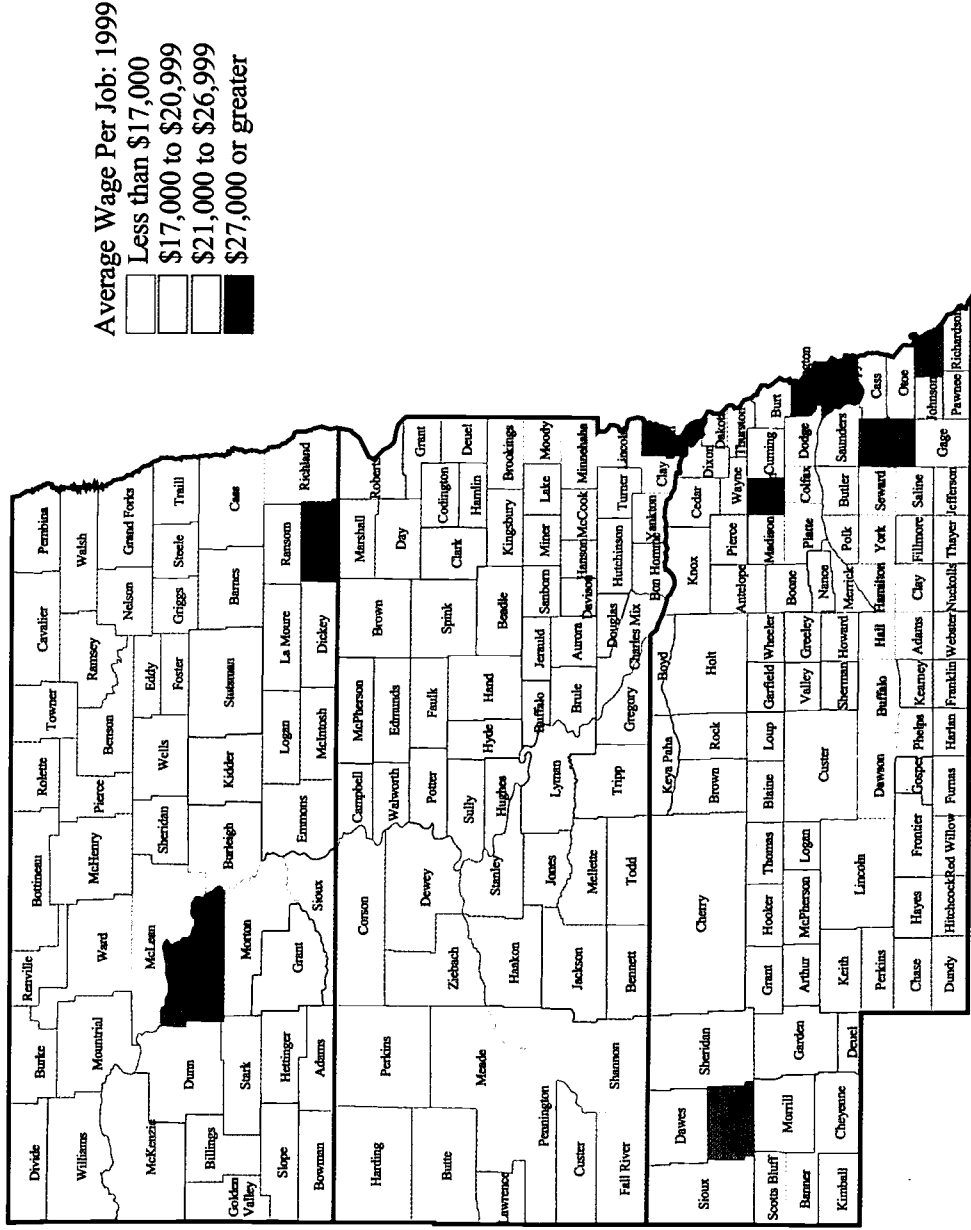
Per Capita Personal Income in Nebraska, North Dakota and South Dakota by County: 1999
Source: U.S. Bureau of Economic Analysis, Regional Economic Information System, Table CA05, 1969 to 1999



A Look at Rural Children and Families

MAP 4

Average Wage Per Job in Nebraska, North Dakota and South Dakota by County: 1999
Source: U.S. Bureau of Economic Analysis, *Regional Accounts Data, County Wage and Salary Summary CA34, 1969 to 1999*



A Look at Rural Children and Families

The Average Wage Per Job in Nebraska, North Dakota and South Dakota by County: 1999 (page 17) offers another approach to viewing the economic viability of a county by assessing the average wage per job. This indicator is less influenced by extremes, as is the case for per capita personal income. For example, several high income wage earners in a small county can artificially inflate per capita income. Using this measure, the concentration of high-income counties in the three-state area tends to center in or near major population centers.

The Poverty Status of Children Ages 0 to 17 Years of Age in Nebraska, North Dakota and South Dakota: 1997 map (page 19) shows large sections in all three states where great percentages of children live in poverty. Most of these areas are counties with a low population density.

Two major themes were identified for Economic Opportunity in rural areas. They were employment and transportation

Employment

Focus group participants cite a need for viable employment opportunities in or near rural communities. There are insufficient jobs, given the diminishing agricultural economy and few alternative employment opportunities with wages capable of supporting families. As one focus group participant stated, *"The number of jobs here is about eight and they'll probably be filled until those people pass away."* Another stated, *"we farm...and we are struggling to survive. I think we are about to exit the farming scene."* In addition, many participants noted that it was "who you know" and "your family name" that filled job vacancies *"getting jobs is difficult if you're not from here."* *"In our community it depends on what your name is."*

In rural communities, dual income families are an economic necessity more than a luxury. Many of the job opportunities in rural areas are in the construction or agriculture industries. Much of this type of work is seasonal, with no benefits and no guarantees of a regular paycheck. Spouses of ranchers and farmers often hold jobs in order to have medical insurance or provide a stable source of income. Nebraska, North Dakota, and South Dakota have some of the highest multiple job holding rates in the nation (more than 9 percent, compared to 6.3 percent nationally)³.

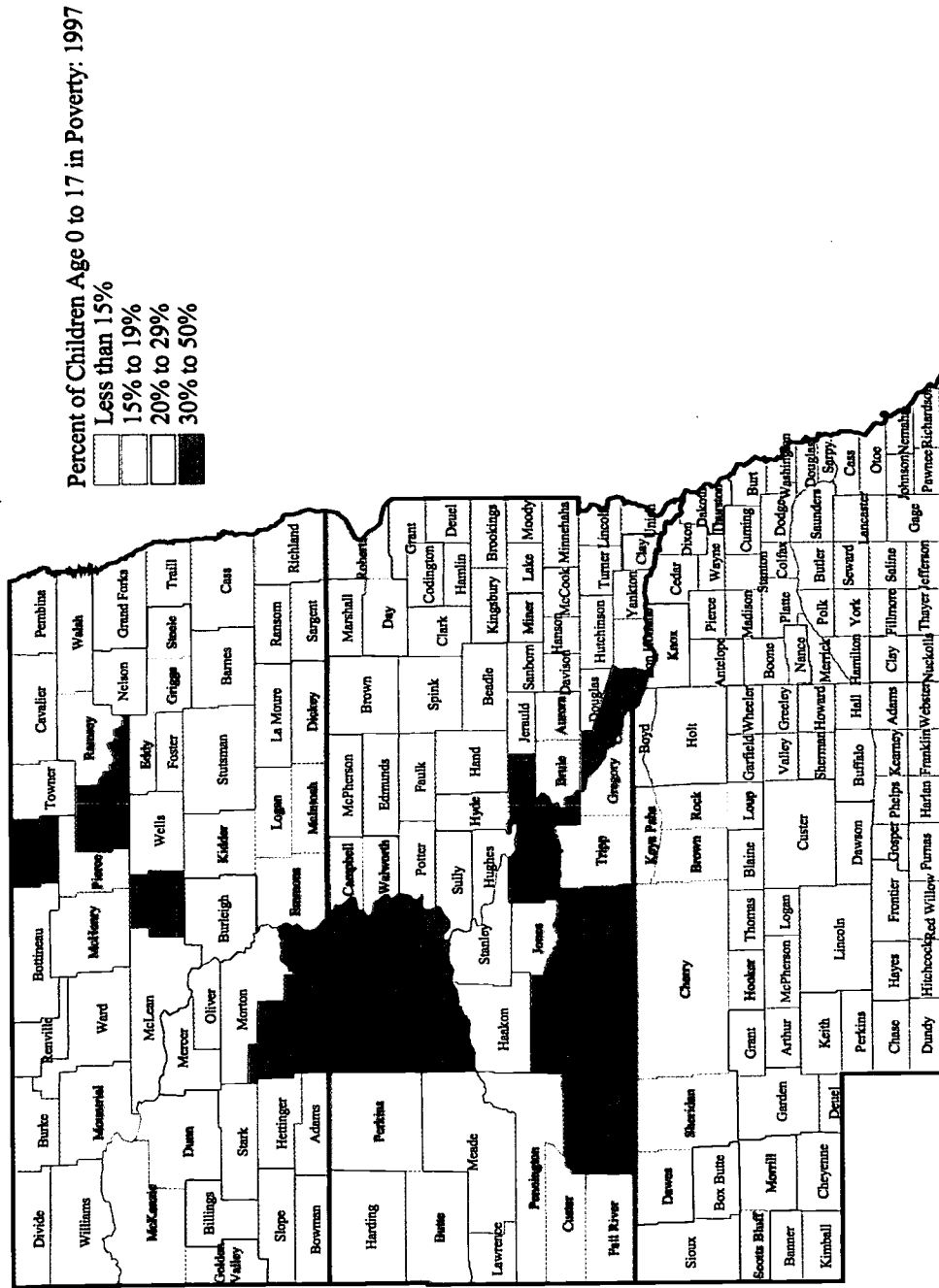
One focus group participant had this to say about dealing with economic hardships in a rural area *"I found one big perk for living out in the sticks like I do; we don't qualify for assistance because of about \$10 a month. As long as I have a rifle and ammunition, my kids won't go hungry. They don't know what beef tastes like, we've had venison for so long. I bought [my son] a burger one time and he said, what's wrong with the beef — I said, 'It is beef.' We have an acre garden so we have a lot of vegetables put away, but we generally have groceries. If you need assistance in the winter, a lot of hunters donate meat to a lot of assistance groups."* While hunting and gardening can feed many rural families, it isn't the answer for all. Some rural families don't have skills, land, or resources to supplement their income in this manner.

³North Dakota State Data Center. (2000). "Multiple Jobholders in North Dakota: 1998." Fargo, ND: North Dakota State University.

A Look at Rural Children and Families

MAP 5

Poverty Status of Children Ages 0 to 17 Years of Age in Nebraska, North Dakota and South Dakota: 1997
 Source: U.S. Census Bureau, *Small Area Income and Poverty Estimates Program*



A Look at Rural Children and Families

Participants noted that when they had access to jobs, those jobs paid minimum wage or slightly higher. One participant said, *"I have been here for two years and have had at least eight jobs. All of them paid minimum wage—\$7.00 an hour, most with no benefits. Hopefully, next year I should finish my third degree and go to teach for \$18,000 a year...Fairly pathetic to make a living here."*

Even professions that require post-secondary degrees are paid at a lower scale than in urban areas. When a business does locate in a rural community, the jobs tend to be those requiring no special skills. While this can be beneficial at an entry level, it does not allow for the employee to advance or develop valuable transferable skills. As a focus group participant aptly stated, *"We need people to understand that jobs should matter."* Another participant expressed incredulously, *"It's like a big mystery - why our young people graduate college and leave the state! You moron - they can go over here and flip burgers for more than they can make with a college education."*

Plant closings or layoffs have a more devastating impact on smaller communities. Individuals living in rural areas do not have access to alternative job opportunities and are more likely to have difficulties finding another job. One participant bitterly noted, *"At my job they gave us a 5 percent decrease in pay. So your only choice is either you take the 5 percent or you're gone."*

As with focus group participants, most key informants felt that more jobs, regardless of wages, would help some communities. While some of the key informants felt that unemployment, in itself, was not a problem,

many indicated that higher wages and more professional advancement potential would help the economic situation of families. One individual said that it was important to *"appeal to the social justice of the business community to pay adequate wages to workers."* Many individuals expressed frustration that young college graduates leave the region in order to receive better wages. Interestingly, others feel that the strong, close-knit family structure of these communities may contribute to high unemployment, as individuals may be less willing to leave the community and family members to seek employment elsewhere.

Some key informants recognize the need for communities to adapt to the changing agricultural environment. In the past, a strong farm economy drove the vibrancy of a community. This dependence on agriculture left many towns struggling when the market declined. After many years of a depressed agriculture market, many towns have had to adapt, bring in new businesses or, in essence, cease to exist. This transition has proven to be difficult for many long-time residents.

Other key informants cite a need for greater public awareness about available programs, and more community collaboration to get the word out to families about available programs.

A Look at Rural Children and Families

Transportation

In rural communities, one of the most significant obstacles to maintaining successful employment is the requirement to travel a great distance to get to a job or to get support for employment. While most focus group participants have become accustomed to travel as a way of life, many expressed frustrations with the by-products of having to travel so much. One participant had this to say, *"My husband, he leaves at four in the morning to travel to work, works all day, comes back at eight or nine in the evening, goes to sleep at ten and he travels again the next morning."*

Focus group participants also expressed concerns about vehicle reliability. Because little or no public transportation exists in rural areas, having an operational car or other vehicle is a necessity. Individuals in rural areas must travel to have repairs or regular servicing not only for their cars but their agricultural equipment as well, *"Yesterday, I did a 240 mile round trip for parts for our tractor."* Another participant complained of a 2-3 month wait for auto repairs.

The benefits of traveling to a location where jobs pay better are negated by the costs of commuting. Vehicle maintenance, fuel costs, and other expenses eat into higher wages. Participants provided an example, *"Stores cost more in a rural community. They can jack up the prices because by the time you drive 2 hours, you're not saving any money."* *"It costs \$18 for a can of baby formula here, [while in the larger towns] at a Wal-Mart or Safeway it's \$8-\$13."*

Also noted was access to services that enable individuals to maintain employment. Reliable, quality child care often requires traveling great distances. (See *Services and Support* section for more information about child care.)

As with the focus group participants, transportation is seen as a concern among key informants. The high cost of travel to areas where employment opportunities exist can negate higher wages. In one area, a business provides transportation for \$3.00 each way. Since full-time wages are about \$6.00 per hour, travel costs and travel time reduce the take home pay to just about minimum wage.



Individuals seeking assistance in finding work are challenged by transportation problems as well. One key informant relates that the nearest job service office is 80 miles away.

Many services needed to support regular employment, like childcare or auto repair/servicing, are scarce in smaller communities. Unpredictable weather may exacerbate transportation problems. Another key informant notes that the state should do away with the asset-test, which limits families to a specified amount of assets. For example, having more assets in the form of a newer car makes people ineligible for services they need. Conversely, having less assets in the form of an older car can make transportation uncertain but makes a family eligible for services.

A Look at Rural Children and Families

Social ('sô-shýl) - tending to form cooperative and interdependent relationships with one's fellows.

The Annie E. Casey Foundation *Making Connections* defines Social Networks as connecting families to networks of friends, neighbors, kin, community organizations, role models, mentors, faith-based institutions, and other positive social relationships that encourage and provide neighbor-to-neighbor support and mutual aid and make people feel less isolated and alone.

The quote that best sums up what it is like to live in a rural area and one that everyone found humorous, *"The best part about living in a rural area is that everyone knows everyone's business and the worst part about living in a rural area is that everyone knows everyone's business."*

Living in a rural area appears to be a dichotomy. It's easy yet it's difficult. There is a feeling of safety, yet in an emergency it takes a while for someone to respond. The dichotomy goes something like this:

A family lives in a rural area because of family, they were born there or moved there to be close to relatives but it is difficult to find a job and make a living. If the family moves, access to relatives for child care or transportation or other social supports are lost so the family stays in the rural community. It's a vicious cycle in which many families find themselves.

It is difficult to make and keep connections to networks of family, friends, and neighbors as they leave the area to pursue opportunities in other parts of the country. The population of Nebraska, North Dakota, and South Dakota grew at almost the same rate as the nation. But, if you look at each county, especially the rural counties, a decidedly different picture emerges. The Percent Change in Family Households in Nebraska, North Dakota and South Dakota by County 1980-2000 map (page 24) identifies large pockets where family households decreased.

The Percent Change in Total Population for the U.S. by County: 1990-2000 map (page 25) shows more than 56 percent of the counties in the U.S. that declined during the past decade were located in the 12 states that comprise the Great Plains. Of the 1,009 counties in the Great Plains region, more than one-third lost population during the past decade.

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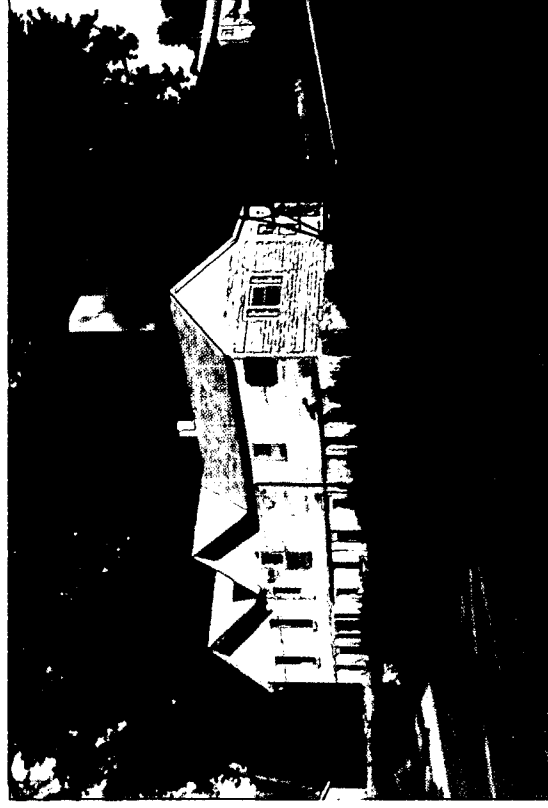
When people think of rural, they think of an idyllic place that is far removed from the masses of people in an urban setting. Said one participant, *“One of the nicest things is (like she said) the peace and quiet but also it gets very lonely.”* Isolation for poor rural families looks quite different than isolation for poor urban families. Isolation is magnified in the rural Great Plains by issues of:

- Distance – many miles between towns or to the nearest neighbor.
- Transportation – no public transportation and unreliable cars.

Why do people live in rural areas? As one participant stated, *“We try to instill that the kids can go to college and there’s a whole different life out there. A lot of times, people that are raised here, stay here throughout their whole life and they never leave. You might have relatives and go and visit but it is because everybody loves being here, it is their home and they don’t want to leave.”* As many other participants stated, *“It’s where my roots are”* or *“I’ve lived here all my life, and my parents, my grandparents, my cousins, you know, they all live here.”* There is something that captures the whole being of people who live in rural areas, be it the wide open spaces or the stars at night or the deep sense of peace they feel. If they farm, the connection to the land is so strong that when they retire and move to town, they often die within the year. One participant stated it this way, *“There’s some Sunday’s my husband and I head out on our horses. We go out in the hills. It is like nobody else has ever been there before. It’s*

very relaxing and soothing. It’s times like that, that really makes us think yep, we’re doing the right thing.” There were nods of agreement with this statement.

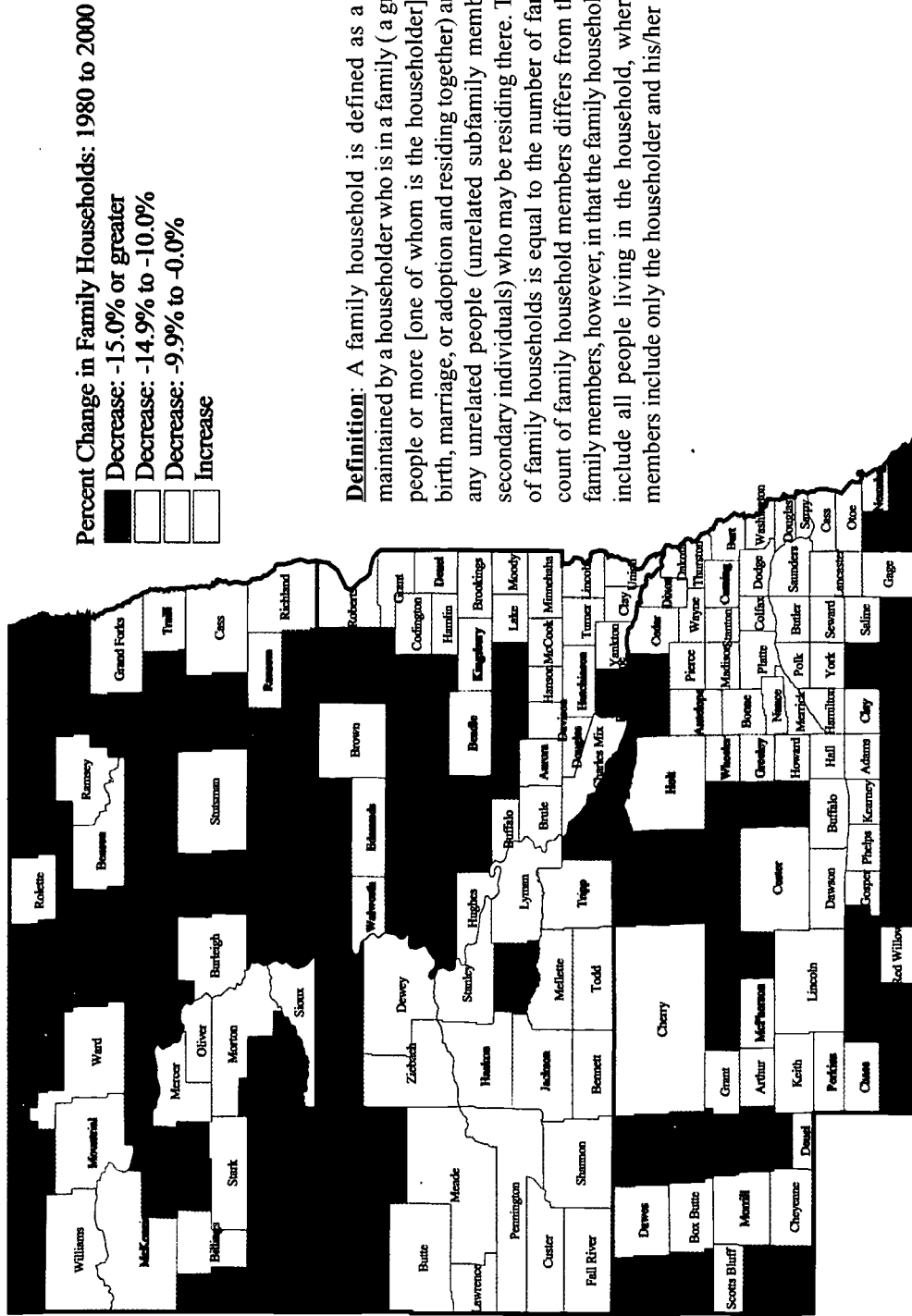
The map Non-Movers in Nebraska, North Dakota and South Dakota by County: 1996-97 to 1998-99 Three Year Averages (page 26) shows the percent of each county where residents have not moved in a tax filing year. The three-state area is relatively stable. Only a small proportion of the counties had more than 10 percent of their households move across county lines during the last three years of the 1990s. The significant population loss that is occurring in the region is due, in part, to natural decline (i.e., more deaths than births). In addition, there is very little in-migration, which helps account for the low mobility.



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MAP 6

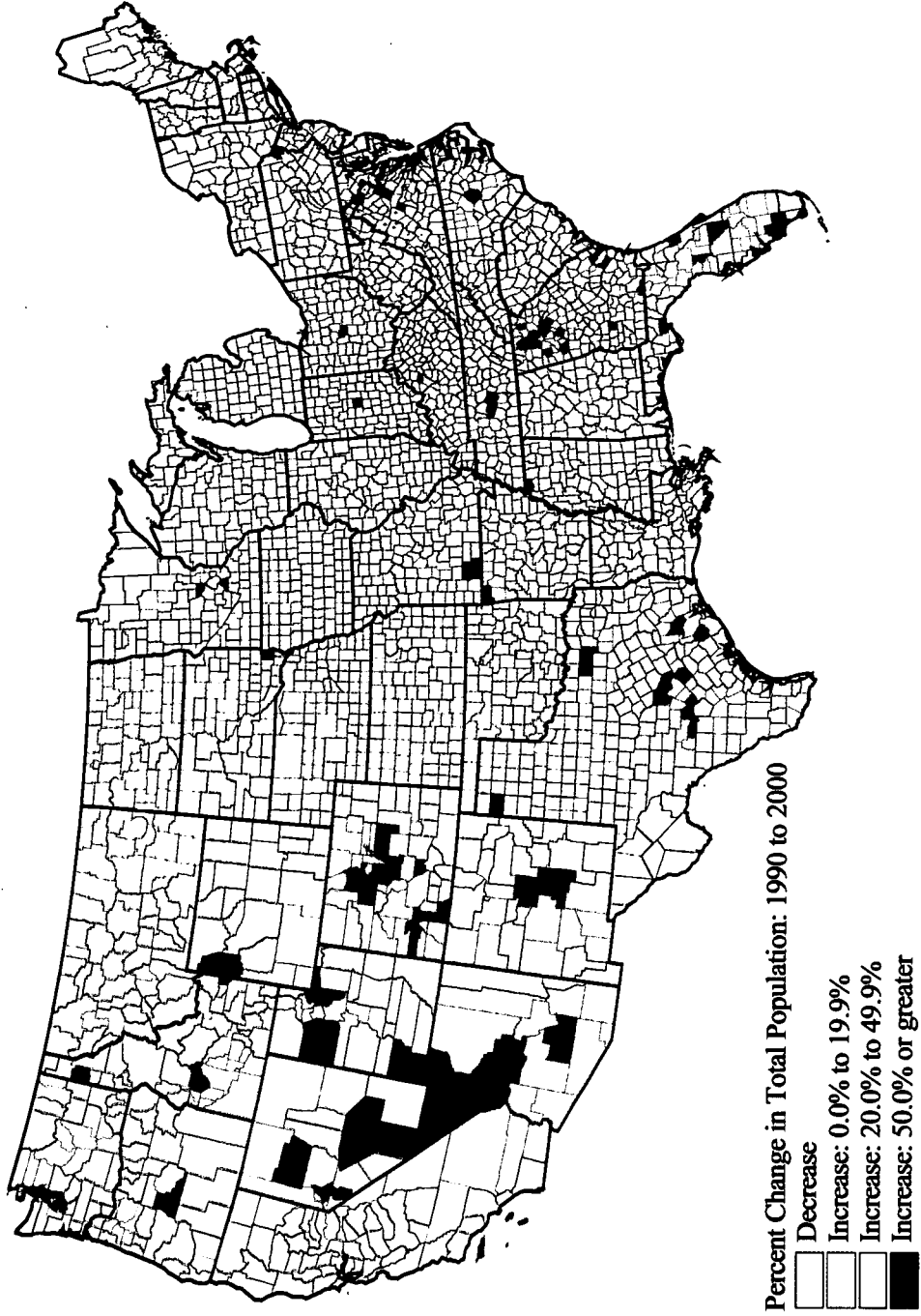
Percent Change in Family Households in Nebraska, North Dakota and South Dakota by County: 1980 to 2000
 Source: U.S. Census Bureau, 1980 and 2000 Decennial Census



A Look at Rural Children and Families

MAP 7

Percent Change in Total Population for the U.S. by County: 1990 to 2000
Source: U.S. Census Bureau, 1990 and 2000 Decennial Census

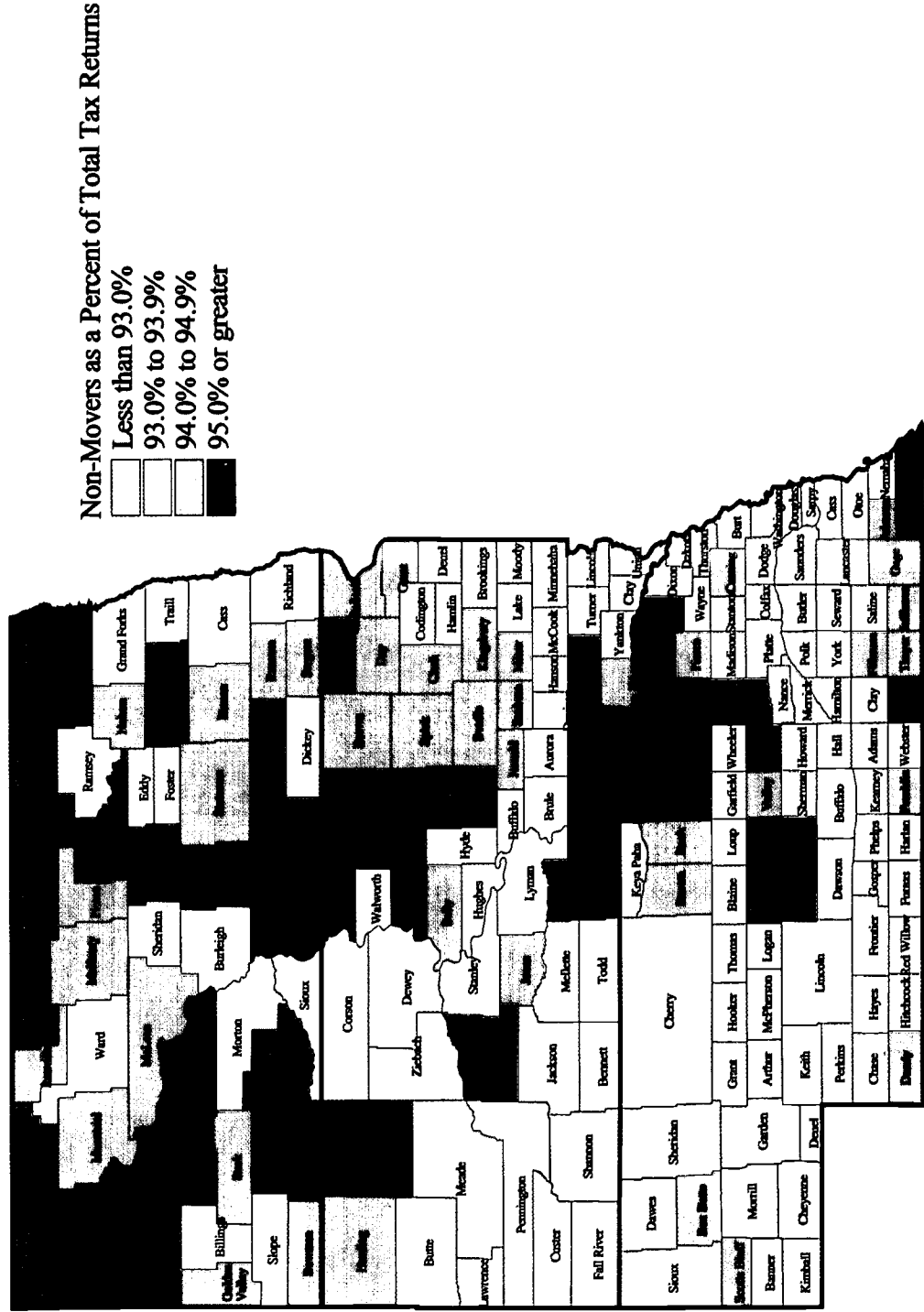


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MAP 8

Non-Movers in Nebraska, North Dakota and South Dakota by County: 1996-97 to 1998-99 Three Year Average

Source: Internal Revenue Service, Sample Flow Files. Description: Tax return filers who did not move in filing year as a percent of total tax returns.



A Look at Rural Children and Families

Two major themes were identified for Social Networks in rural areas. They were community and recreation.

Community

People do feel a sense of community, even if the neighbor is up the road a bit, *“We live far enough in the sticks that we don’t have any neighbors to speak of so the nearest neighbors for the kids to play with are a couple miles away.”*

Participants spoke about the people and the rural lifestyle. They feel their kids are safe.

“People watch out for your children. My neighbors actually got to me before the cops did when I had an emergency at home.”

“It’s a small town and I know that if I take my child over to the sitter I know that my child will be well taken care of because I know everything about them and I don’t have to worry about them.”

“I like the consistency and my kids are going to have the same friends all their life. I like that. I like the hominess. Even though it can sometimes be a problem of everybody knows everybody’s business, it’s also an asset that... in my neighborhood if my kids are being rotten, you know, my neighbors are going to get after them. And that’s fine. Cause I’m going to get after their kids. So it works real well.”

While some things are definitely more difficult in a rural setting, other things are seen as easier, *“...so there are pros and cons to everything - it doesn’t matter where you live or what you do. I think it’s just what you make of your situation.”*

The rural environment is often seen as a positive despite challenges. People are able to have animals, i.e., horses, have closer access to lakes and fishing, and just enjoy the scenery.

Some parents believe living rural instills values in children. *“I think one of the greatest things about living in the country and stuff is the kids learn that things don’t come for nothing. You have to work at what you have and everybody has responsibilities and chores and things like that, you know. And they realize how important work is and I think that’s gotta be one of the greatest lessons for kids these days.”* Participants note that when one lives in a rural area one isn’t as likely to take everyday things such as showers or electricity for granted. Children learn at an early age that they have to work for what they have.

While these are specific quotes from individual participants, they relate the general sentiment at each of the focus groups in the three states. Conversely, people new to rural communities feel more isolated and have a difficult time feeling a part of the community.

People agree, wholeheartedly, with the statement, *“I’ve been here ten years and I’m still the new guy!”* The sense of isolation is more acute the farther out and away one is from other families. Transitioning to a larger city is also seen as difficult. Children need to be supervised more

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closely since they do not have a sense of being afraid. *“Not too long ago I went to Michigan and my 7 year old would look at me stunned when I’d say ‘you cannot leave mom’s sight.’ She looked at me like ‘you’re mean.’ You know it was harder to get her to understand you cannot leave my sight. So it’s harder when you come from small town.”*

Key informants have a similar view of living in a rural community. *“You are closer to family here. You spend a lot of time keeping your kids busy. In a city, kids’ parents can send them away to go to a movie, skate, etc., so families aren’t together as much.”*

Most of the key informants see the sense of “community” is the strongest positive aspect of living in a rural area. There is a shared belief that facing adversity as a community makes it stronger and helps children develop a strong work ethic. Parents believe their children are safer in their small communities than they would be in a larger, more urban area. Also, key informants feel that smaller schools are more responsive to parents and allow greater participation in events (like homecoming, sports, or other extracurricular activities). One key informant feels that children living in rural communities are better off because inner-city influences are lacking, but acknowledges that alcohol use is high. Alcohol use may be high because of limited positive activities, and kids are not exposed to a larger world perspective.

While some of the focus group participants express a feeling of isolation, most key informants feel they were only as alone as they want to be. Many articulate the commitment of small communities to “pitch in” and help when things need to get done. One key informant reports that her husband had a serious accident and required air transportation to another state for medical care. During their absence, neighbors cared for their animals, took some animals to their own ranches, and paid the couple’s bills out of their own bank accounts.

Most key informants believe there are adequate supports for families in need. Private organizations, churches and the business community were cited as sources of assistance to individuals in need. One key informant thinks there are adequate supports in place, but people in need do not always know about them. Most report there is a stigma attached to receiving assistance. Similar to the focus group participants, the key informants feel that social services programs are not flexible enough to meet the needs of individuals who need help. States one social worker, *“It is a challenge for us to meet the needs of clients everyday - I always try to remember how much harder it must be for the clients.”*

Recreation

Inadequate recreational, cultural, and educational programs limit opportunities for creative outlets. Another recurring theme in the focus groups is a lack of recreational opportunities for children and youth. As one participant stated, *“I have teenagers, my kids get bored real fast and during the summer it is very hard to keep them occupied.”*

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Another stated, *“Mostly middle and high school students - all they do is just drive around here...it's either that or drinking.”*

For many families, recreational activities in rural areas are as expensive as extracurricular sports activities. Yet recreational activities are needed because, *“There is nothing for kids to do...”* A focus group participant suggests that reduced family fees are needed. For the most part, sports are seen as good, enhancing self-esteem in both boys and girls. As in most parts of the country, many dual income families find it difficult to attend activities in which their children participate. It is especially complicated if parents have two or more children in sports activities at the same time.

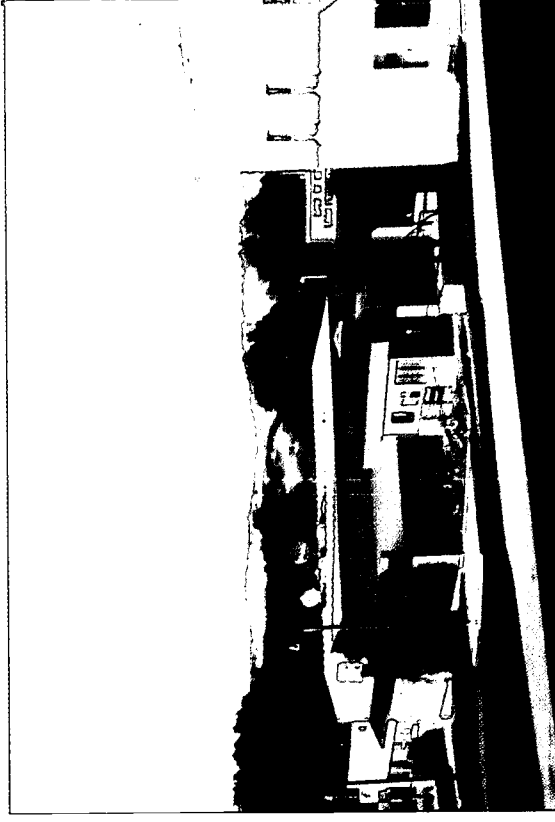
Other participants are even more frustrated with the lack of fine arts activities such as art, music, and drama, *“My kids aren't sporty. They want to do more art activities. There aren't things like that around here, not as many educational opportunities.”*

Transportation also plays a role in children's ability to participate in recreational activities. As one key informant reports, baseball games are typically 100 miles or more round trip.

While the key informants recognize that recreation in a traditional, “urban” definition is very limited; most felt there are more opportunities in a rural area to participate in outdoor activities like hunting and fishing or horseback riding. One informant describes the opportunities to learn about nature and the great outdoors on a daily basis in rural areas. Many express a need for children and adults alike to be resourceful in

the quest for recreation. In some cases, this is seen as positive, since parents and children need to work together to come up with things to do.

Several key informants mention the frustration of having to travel considerable distances to shop or to see a movie. Children with access to extracurricular activities often have to travel several hours to attend functions. One key informant sees the need for a boys or girls club or a latchkey program in her community. Many key informants feel children in their communities can easily become bored and get involved in less wholesome activities. One believes that the limited recreational activities have resulted in violence, and alcohol and drug use. Several express concern over the number of high school aged children who use alcohol as a form of entertainment. Drinking and driving is a serious concern.



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Services (‘sýr-výs) – the work performed by one that contributes to the welfare of others.

Supports (sý-‘pó(ý)rt) – to provide a basis for the existence or subsistence.

The Annie E. Casey Foundation *Making Connections* defines **Services and Supports** as connecting people in need to accessible, affordable, family-centered, and culturally appropriate forms of help that provide preventive and ongoing support.

“Living in a rural area you have to go outside [of town] for everything. It is part of the package and you deal with it.”
Participant quote

“Let’s start with medical... we’re still in the Stone Age here.” Participant quote

Research confirms that fragmented connections to basic support systems similarly affect the well-being of children and their families in urban and rural areas alike. It also suggests that small agricultural communities suffer problems fundamentally different from those of urban communities and trade centers in these states – requiring different resources and strategies to address family needs. Some of these problems are:

- Lack of access to social services in rural areas within a reasonable proximity, ranging from therapists to domestic violence centers to WIC clinics.

- The stigma in rural areas, which often prevents families from seeking services to meet their basic needs.
- Frayed and dying communities, leaving families without a grocery, post office, shoe store, or barber.
- Frayed connections in rural communities to faith communities, with traveling ministers and congregations combining or relocating to centralized communities a distance from the smaller community.
- School consolidations placing children in a school that could be 30 to 60 miles from home, complicating parent participation and student involvement in after-school activities, as well as limiting school staff knowledge of child and family well-being. The school has been removed as a center of activity in many of these rural communities.

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Two major themes were identified in the area of Services and Supports. They are child care and medical care. Both require employment benefits or insurance to help pay the costs. The map on the Income Maintenance Payments Per Capita in Nebraska, North Dakota and South Dakota by County: 1999 (page 32) shows that most of the counties in the three states have maintenance payments of less than \$300. Counties with the highest proportions of income maintenance payments and poverty tend to be the Native American reservation areas. Realize that income maintenance programs help sustain a current level of income, but do not necessarily bring recipients up to a higher level of income.

Childcare

One of the more frustrating obstacles to employment for rural parents is the lack of high-quality and affordable child care. Participants express concern that they are being required to work, but there is no place to leave their children. The Women with Children Under 6 Years: Percent in the Labor Force in Nebraska, North Dakota and South Dakota by County: 1990 map (page 33) illustrates that the counties with the highest proportion of women in the labor force with preschool age children tend to be fairly dispersed. It is noteworthy that counties with a high proportion of women in the labor force do not tend to be those with a high average wage per job. One participant mimicked, "*Get out and work, get out and work, but are they helping us to get the quality of daycare that we need?*" Others stated, "*You know, we have zero daycare it seems like. I quit my job*

just for the simple fact that daycare is scarce in our community," and, "*Over half my paycheck goes to childcare each week but I know they're going to be OK when I'm gone...It's not affordable but it's good. The ones you can afford you don't really want to leave them there."*

Access to affordable and high quality childcare is a serious concern for many focus group participants. They note an additional concern that confusion about child care licensing requirements has prompted some providers to shut their doors.



Another barrier for parents is that children with disabilities or health problems are very difficult to place into any childcare facility. Childcare providers cite higher costs of insurance and lack of staff training as reasons they cannot take children with special needs.

The requirement for childcare during nontraditional hours is also viewed as a challenge to many families, "*One of the things is that there are no day care places that are open from 10 pm to 6 am."* Parents who work less traditional hours must rely on friends, relatives, and at times other less reliable childcare.

Programs that prepare children for school, such as preschool and Head Start are not available for many children. Parents feel that their young children are missing out on an important educational building block that affects readiness for school.

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MAP 10

Women with Children Under 6 Years: Percent in the Labor Force in Nebraska, North Dakota and South Dakota by County: 1990

Source: U.S. Census Bureau, 1990 Census, STF3 Table P73



A Look at Rural Children and Families

As with focus group participants, many key informants are very frustrated with the lack of available, affordable, high quality childcare in their areas. Key informants also see that, in addition to limited childcare resources, programs that specialize in child development like Head Start are filled to the limit. One key informant observes, *"Families are beginning to understand quality child care as opposed to dropping children at a depository."*

The high cost of childcare, when combined with low wages, can impact the feasibility of parents' seeking employment. When there is serious concern about the quality of care available to their children, parents experience stress, which may influence job retention and satisfaction. The situation becomes more complicated for families with special needs children, for whom childcare resources and provider training are extremely limited.

Medical

Another area of great concern to focus group participants throughout all three states is the issue of medical care. Medical care included hospital or clinic care, dental care, and eye care. One participant voices a concern heard at many of the focus groups, *"Now, everything's being consolidated and you've got the transportation issue; you've increased numbers being served in one place."* Another stated, *"We do not have access to enough doctors - we don't have any kind of emergency room services... we have to come to town for that... which is kind of scary when you think about that."*

During the discussions, a myriad of problems associated with medical care arose. Most concerns centered on the access to care, continuity of care, and the difficulty of getting and keeping medical insurance.

Access to medical care was a serious concern. *"I think in the rural communities that a key point is that the services aren't there. I mean we travel over 100 miles each way to take our kids to therapy."* Focus group participants often have to travel great distances to see a medical professional, only to be referred to a larger community with more specialists. Community or regional facilities often operate on a limited basis with patients seeing nurses or physicians assistants in most cases. Many of the available facilities operate during limited hours and days. Individuals without access to reliable transportation have very few health care options and few communities have specialty medical care, such as dentists and eye doctors. Once again, considerable travel is often required to get these kinds of special services. Said one participant, *"they can't keep the doctors and dentists."* Residents of rural communities also sense that the number of medical personnel who choose to practice in rural areas are affected by rural isolation, as one participant wryly notes *"...they say 'oh my gosh we're at the end of the world."*

Continuity of care is also a concern. Focus group participants express concern about the high turnover rate of health professionals in rural areas. *"I think one of the biggest problems we have is the big turnaround. My son has had 5 or 6 different counselors, they either quit or move on."* Mergers and takeovers of small medical centers have reduced the number of physicians and the doctor-patient relationship has suffered.

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Communities struggle to recruit medical professionals who will stay long enough to establish patient trust and confidence. Many individuals describe experiences of repeating diagnostic tests because of interruptions in the continuity of medical providers.

In addition to limited medical personnel, there is concern about the availability of prescription services. Ordering and picking up prescriptions is seen as a particular hardship for people without transportation or those living in rural isolated areas. *"I have a neighbor who doesn't have a vehicle, so yesterday I wanted to try to help her pick up her prescription. Of course her Medicaid number was denied, so she needed to just get a couple days of medicine until she could get the thing straightened out with Medicaid. But that is a real issue for people if they don't have transportation."* Getting prescriptions filled is also a challenge because there are so few local pharmacies. While mail-order prescriptions can be helpful, erratic mail service may prevent a patient from getting vitally important medication in a timely manner.

"I know I take prescription drugs - you gotta drive up and get your prescription handed to you or get it in the mail. You know I'll go 2-3 days sometimes, especially if it's a holiday, without my pills. When you run out of them you're so damn sick you can't take care of yourself. So that's a big issue. If I could drive up and get them all the time that would be fine and dandy. But I can't do it, so sometimes I gotta have them sent in the mail."

Also, there appears to be few dentists or eye doctors who will take Medicaid patients. Nebraska, North Dakota and South Dakota are all experiencing shortages of dentists, especially in rural areas. There are also long waiting lists to see eye doctors. Many times these professional services are treated as luxuries rather than necessities in rural communities.

The affordability of medical insurance is a concern for rural residents. Insurance is not always a benefit provided to employees, especially those with low-paying jobs or individuals employed seasonally. While many may qualify for Medicaid, many feel a stigma exists in using this type of public assistance. As one participant voiced *"Social Services doesn't want to help you - they make you feel 'little' - like it's their bank account."*

Disabilities or special needs make obtaining medical insurance difficult. Focus group participants relate being uninsured due to the excessive cost of private medical insurance. In addition, individuals using public assistance are often concerned that the quality of their care is compromised.



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Parents often sacrifice their own insurance in order to make certain their children are covered. Several examples of how medical problems cause serious financial hardship were cited.

situation. So here yesterday he was on the phone for hours. You know one person said "well if all you can give is \$50 per month then we won't accept your payment."

Many participants feel they have experienced discrimination in seeking medical care, because they are poor and/or of minority background. They describe how they have experienced stigma leading to discrimination. Some group members relate that when they have sought medical care for an illness, they were asked first about insurance and secondly about their illness. Many people point out that bills and collecting agencies are not often willing to work with families to reduce debt. Others note their ability to write off medical debt with more flexible programs and hospitals. One participant best summed up the experience of stigma due to racial background:

"And they won't accept payments and you know I just get frustrated right now this is part of our frustration and stress just coming from that because we are low income family and I notice that you don't get accepted very well. And I don't know... our nationality is Hispanic and we haven't been treated very nicely because of that. We've got, we've had racial comments and stuff like that. I don't know if that's part of it or not, but it is hard. I mean that's why it can be so frustrating to figure out because it's not my fault I'm Mexican you know. I would try to work with them. My husband tried, you know, he said well maybe you're not talking to them right or maybe you're not telling them our

In the area of medical care, key informants echo the sentiments of focus groups participants. Key informants are, in general, very concerned with the access to and availability of medical services. In most instances, communities lack any type of full time medical facility and may not even have anything available on a part-time basis. Dental and optometric services are scarce, even on a part-time basis.

Most key informants worry about the lack of local pharmacies, as well. Of great concern is the high turnover rate of physicians in local and regional clinics. Tribal members are concerned about the level of care they receive at the Indian Health Service facilities, since most of the physicians do not stay around for very long, or may not hold qualifications necessary to treat specific problems. Most people interviewed express a high level of concern about having to travel, sometimes for hours, to see a medical professional of any kind.

One key informant points out that despite writing grants, there is very little money available to rural communities for bricks and mortar or infrastructure dollars to build structures that could house needed programs. When asked what would be the one thing you would change about your community to make things better for children and families, one key informant states, "*access to medical, dental, and mental health services and the ability to pay for those services.*"

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Stigma, Prejudice and Other Discussion

The previous discussion has identified some of the issues affecting children and families in rural areas. Of even greater concern is the fact that these families are not concentrated in neighborhoods that can be easily identified, examined, and publicized, but are invisibly scattered across the countryside. Townspeople are allowed to believe they don't have poor families in their community because rural poverty isn't obvious and concentrated. Community members with minority backgrounds are likewise overlooked. Participants describe feeling stigmatized by being labeled poor as well as by racial prejudice in small communities. Prejudice and stigma are barriers to seeking help, especially in one's own community. Sometimes people drive to a social service office in a neighboring town to prevent neighbors from knowing they are seeking assistance.

"In a smaller community because everybody knows everybody it's not always a benefit to be qualified for WIC or Head Start because of the social stature that goes along with it."

"I just think a lot of those people don't take those services because of the stigma that is associated with it. In our community we have a hard time filling our Head Start slots because people don't want to be associated with Head Start because they're afraid how people in the community are going to think of them because they are in Head Start."

Others travel outside their community to use a social worker who is kinder or more effective. Said one participant, *"They have one of the worst caseworkers here, I have ever seen in my life...he forgets to*

submit your stuff to the state, so your cupboards are empty, you go to the store, fill up your cart and go to the checkout line and he forgot to put the food stamps in your account." And another stated, *"It comes down to, again, that there is a stigma associated with asking for help and everybody knows if you've done it and then you're kind of shunned in the community because of that. I think I know a lot of people who live in one town who are on food stamps who won't use food stamps in that town because they don't want anybody to know that they get them. They'll go to another town where they're not known, they're not as embarrassed to use them. You know they try to go somewhere where nobody knows them..."*

In addition to discrimination because of ethnicity and race, new residents or old residents without a 'family name' feel prejudice, *"The school system...they pick their favorites...you have to have the name, you have to have the money...my son had a tough five years...there's drugs in school. Drugs were found in a locker at school and because the daddy had money and a name nothing happened."* Participants agree that support from school administration is crucial in effectively addressing student concerns. People in the armed services or of foreign birth also feel the sting of prejudice in small rural communities.

Many racially prejudicial actions occur in rural school settings (junior high, high school), *"I get that all the time. I was standing in line serving and this gal walks up with her kids, four of them, and she was pretty crabby, you could see that. Here I was serving food, and her comment was 'you guys knock it off - you're acting just like white people.' You know? Out of the 6 people that were standing there all of them are pretty dark in comparison to me."*

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Racial discrimination incidents negatively influence relationships and contribute to lower self esteem for the victims of this behavior. Some participants relate their attempts to address prejudicial incidents, "I will step in when others are affected by injustice/unfairness even though I don't speak up for myself."

Conclusion

There is so much more that participants had to say about living in rural areas. The words you read here cannot capture the facial expressions, the slumped shoulders, the heads held high, the earnest concerns people shared or the frustrations they felt with many of the programs they need to make ends meet. What follows is a dialog that took place at one of the focus groups between participants...

"I think the Head Start philosophy should just be you know, countrywide. I mean it shouldn't be just in low-income. It should support the whole community."

"And teacher pay. They don't make enough money in this state. They don't make enough money anywhere"

"They should enlist more parents help. Volunteers. Parents would do things if they just would allow them to."

"But, just to be a devil's advocate to that, if the parents are getting forced to go back to work by welfare reform, it's really hard to incorporate volunteer time into your child's academic, you know...you need to go up one step further, as far as getting the employers involved. You know, giving the employees credit

for volunteering, we can lose one man hour here and there, but look at the benefit that the company is creating because these parents are going home and helping out in the community or helping their children, or a group of children."

"You'll get more quality time from the employee when he's here then too."

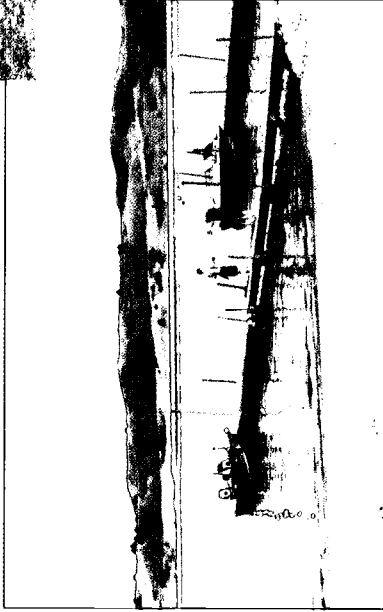
"I know in the military they do. They get credit for volunteering in the community. The military is very good about this, you go in, you tell them I gotta do this with my kids, and they'll work around you. And that would probably be, if more employers were willing to do that, I think that would be great."

"You're looking at a more well rounded individual."

"And a better community because the kids are better and the parents are happier. The kids are getting the better education. The teachers are getting a little bit of a break because all of the education needs aren't just laid on them. Now they're, as you said, a team member with the parents."

This conversation reflects some of the connections focus group participants feel are key to their success as parents in small rural communities. They want to be good parents and live in communities that support their efforts in meeting the needs of their children. Their aspirations confirm the basic premise upon which the Neighborhood Transformation/Family Development Initiative is based: "children do well when their families do well, and families do better when they live in supportive communities."

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Where do we go from here?

As a way to extend learning opportunities embodied within the Casey Foundation's *Making Connections* Initiative, the Rural Great Plains Collaboration sought to know, what are the "specific and concrete obstacles rural families face each day?" How do accessibility to and availability of resources play into those obstacles? How do trust and stigma factor in? This report is a beginning profile of the factors and characteristics of low-income rural families at risk for poor outcomes.

The lesson learned in gathering the data contained in this report is that we need better indicators to more accurately reflect the struggles of rural families and their children. It is not effective to simply note how many families lack the housing they need, when inadequacy of available housing resources is not factored into the equation. Transportation challenges take on new meaning when one understands that assets tests for needed services limit families to a barely functional car in order to qualify for benefits which could provide the nutrition their children need to avoid going to bed hungry. In short, we have only begun to define the terms and indicators, which would better measure the dimensions of rural poverty. It is hoped that analysis of currently available quantitative data will facilitate a more concerted effort to recognize gaps in the present information and develop data tailored more accurately to the needs of rural children and their families.

As with any research, finding answers leads to additional questions. As the project developed this past year, issues were raised that the project did not cover. An obvious one was that current data were not yet available from the 2000 Census. It is important then, that the data identified here be updated with 2000 Census figures. Trend information could then be added to these findings. In addition, it is important to expand the quantitative analysis to more fully explore and profile rural areas to better identify pertinent data before designing a national perspective.



Beyond the need for better data and a review of upcoming Census data, some preliminary policy implications can be suggested from this research of the three areas of focus in this report. These are initial responses to family input, and should not be viewed as final recommendations. The opportunity to further develop these ideas with input from community representatives would complete the picture. Rural residents need to be engaged in the process of framing their own policy agenda.

Economic Opportunity: With so many parents holding multiple jobs in low-wage employment situations, there are many potential policy implications. It is sufficient to note that because the current rural economic climate is based largely on agricultural and service sector jobs, the

Where do we go from here?

challenge is to encourage a collaboration of public and private, local, state and federal partnerships to raise to a higher level the issues of the changing rural economy and the need for family friendly work incentives. A range of ideas needs to be explored: TANF monies can be made available to parents who split their time between care for their children and work; job-sharing can enable some parents to work part time; flex time can allow some families to utilize child care resources when they are more available; companies can be offered tax incentives for creative benefit packages, perhaps shared across companies.

There are numerous agricultural and business policies which must be more carefully examined but if family success is the yardstick for business success, the bottom line of all will benefit.

Social Networks: Revitalize communities with community-partnership opportunities. Offer incentives for communities to regionalize solutions, with the goal of offering more socialization and recreation outlets closer to home. If one community seeks public support for funding to build a swimming pool, perhaps a different community can erect the winter recreation facility. Where schools have consolidated, create community resource centers inside the existing buildings. Involve state level policy makers in efforts to promote all levels of community support, including agricultural development and capital development which impact business development and ultimately the social and educational institutions of communities.

Services and Supports: In the short term, ensure that rural families have access to federal and state subsidized child care, housing, and medical benefits. Determine how the states and communities can maximize these benefits for families who need them. Create access, rather than asset tests to reward families who are able to improve the well being of their families through these programs. Create a strategy to support the earliest learning needs of low income rural children by building on the success of programs like Early Head Start and Head Start, adding state subsidies to maximize the federal funding already bringing these programs to families in need. Seek to ensure every family has access to the highest quality early learning opportunities and care for their children as an early investment in their later educational success and their family's economic security. Regionalize medical resources through incentives to providers who come to remote rural areas on a rotating basis, and adjust Medicaid/Medicare reimbursements to reward this expansion of medical services to communities with no physicians in residence. If a family must access medical care many miles away, provide reimbursement for transportation expenses and create regional resources that can get families from adjacent communities to medical clinics on a routine basis.

Creating a strategy to discuss the application(s) of research findings as a step toward proactive policy recommendations is necessary. The Rural Great Plains Collaborative is a beginning.

Data Sources

Map 1: Metropolitan and Non-Metropolitan Status in the U.S. by County; 1993

Source: *U.S. Department of Agriculture, Economic Research Services (ERS), 1993 Rural-Urban Continuum Codes.*

Map 2: Rurality Index for the U.S. by County: 1994

Source: *Charles Cleland, PhD, Department of Agricultural Economics and Rural Sociology. University of Tennessee.*

Map 3: Per Capita Personal Income in Nebraska, North Dakota, and South Dakota by County: 1999

Source: *U.S. Bureau of Economic Analysis, Regional Economic Information System, Table CA05, 1969 to 1999.*

Map 4: Average Wage Per Job in Nebraska, North Dakota, and South Dakota by County: 1999

Source: *U.S. Bureau of Economic Analysis, Regional Economic Information System, Table CA34, 1969 to 1999.*

Map 5: Poverty Status of Children Ages 0 to 17 Years of Age in Nebraska, North Dakota, and South Dakota: 1997

Source: *U.S. Census Bureau, Small Area Income and Poverty Estimates Program.*

Map 6: Percent Change in Family Households in Nebraska, North Dakota, and South Dakota by County: 1980 to 2000

Source: *U.S. Census Bureau, 1980 and 2000 Decennial Census.*

Map 7: Percent Change in Total Population for the U.S. by County: 1990 to 2000

Source: *U.S. Census Bureau, 1990 and 2000 Decennial Census.*

Map 8: Non-Movers in Nebraska, North Dakota, and South Dakota by County: 1996-97 to 1998-99 Three Year Average

Source: *Internal Revenue Service, Sample Flow Files Description Tax return filers who did not move in filing year as a percent of total tax returns.*

Map 9: Income Maintenance Payments Per Capita in Nebraska, North Dakota, and South Dakota by County: 1999

Source: *U.S. Bureau of Economic Analysis, Regional Economic Information System, Table CA35, 1969 to 1999.*

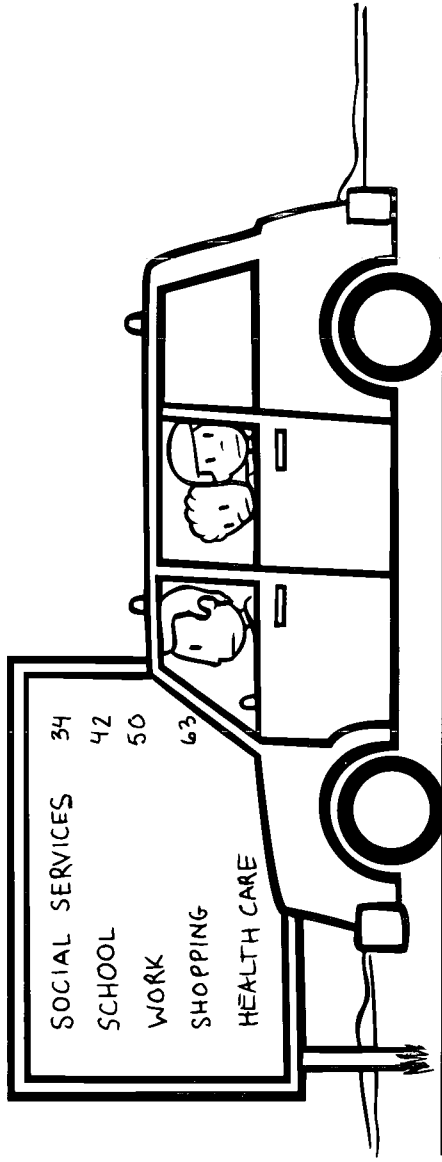
Map 10: Women with Children Under 6 Years: Percent in Labor Force in Nebraska, North Dakota, and South Dakota by County: 1990

Source: *U.S. Census Bureau, 1990 Census, STF3 Table P73.*

¹ Funk, Patricia and Jon Bailey. (2000). *Trampled Dreams: The Neglected Economy of the Rural Great Plains.* Walthill, NE: Center for Rural Affairs.

² Funk, Patricia and Jon Bailey. (2000). *Trampled Dreams: The Neglected Economy of the Rural Great Plains.* Walthill, NE: Center for Rural Affairs.

³ North Dakota State Data Center. (2000). "Multiple Jobholders in North Dakota: 1998." Fargo, ND: North Dakota State University.



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