STRIVE EMPOWER STRENGTHEN



Community Needs Assessment 2020

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Executive Summary

The Community Action Council of Lewis, Mason and Thurston Counties (CACLMT) is a non-profit organization providing assistance in the realms of housing, health, and hunger to the areas it serves. The agency was founded in 1966 to improve the lives of all community members through empowerment and the promotion of self-sufficiency. CACLMT provides services to five counties in Washington State and is headquartered in Lacey, Washington. The Community Needs Assessment focuses on the three counties where the majority of services and programs are provided, which are Lewis, Mason, and Thurston counties.

This Community Needs Assessment was conducted in the fall of 2020 in order to provide baseline data about the communities we serve and identify gaps in regard to service needs in the area.

Unlike CACLMT's prior Community Needs assessments, this assessment includes information about how our community and our organization were affected by the COVID-19 pandemic. It is important to appropriately address the burdens and additional needs placed on our service area and service delivery due to COVID-19. Additionally, it is important to note that some of the census data, as well as stakeholder responses, may be skewed due to the effects of the pandemic, with unemployment being an example.

Through this Community Needs Assessment, CACLMT will be looking at three major program umbrellas: housing, health, and hunger. The intricacies of poverty are vast and complicated; there are dozens of local community resources that cover needs we will not be addressing in this document. We understand that each component influences the next as a contributor to poverty, but for purposes of this assessment, we will be highlighting services in housing, health, and hunger.

Introduction to Community Action Council of Lewis, Mason, and Thurston Counties (CACLMT)

In the 2019 fiscal year, CACLMT offered support for more than 8, 880 families living in our communities, helping more than 22,000 individuals move toward self-sufficiency.

As our communities continue to evolve and change, so do needs in those communities. Assessing and understanding the needs of our communities we serve is an essential step in ensuring that CACLMT has programs and services that are relevant and responsive to both the actual needs in our communities and to our mission as an organization. This Community Needs Assessment (CNA) provides key information about our communities that will help guide our organizations strategic planning and program processes over the next five years.

History

For more than 50 years, CACLMT has been helping low-income communities in Lewis, Mason, Thurston, Kitsap, and Grays Harbor counties. CACLMT was founded in 1966 and our mission continues to improve the lives of all community members through empowerment practices and helping low-income individuals and families obtain self-sufficiency. Typical programs Community Action Agencies offer nationwide are Family Support, Food and Nutrition, Economic Security, Youth Services, Services for Older Americans, and Housing. CACLMT was the foundation for many program developments that continue to meet high priority needs in our community.

Mission

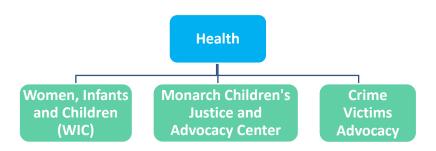
CACLMT is a private, non-profit 501(c)(3) agency governed by a volunteer Board of Directors. By providing direct services and maintaining community partnerships, our mission is to strengthen individuals and families to lessen the impacts of poverty.

What We Do

Our programs and services help people build stable and self-sufficient lives by meeting basic needs for health, hunger, housing and community engagement. CACLMT works every day to disseminate services to members of our community while maintaining a high level of excellence in client service, respect and dignity.

We believe everyone should have their basic needs met. We are committed to administering a diverse menu of services to our community addressing the themes of health access, mitigation of hunger, affordable housing, and community engagement services. Various initiatives are grouped under each of these themes as presented below.



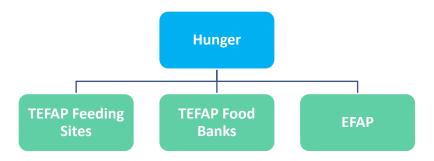


Women, Infants and Children (WIC): Provides nutritional foods and nutrition education to help low-income households select healthy foods for pregnant, breastfeeding, and post-partum women, babies, and small children. WIC also provides breast feeding support, medical referrals, nutritional vouchers, and referrals to pre/postpartum mothers, infants, and children.

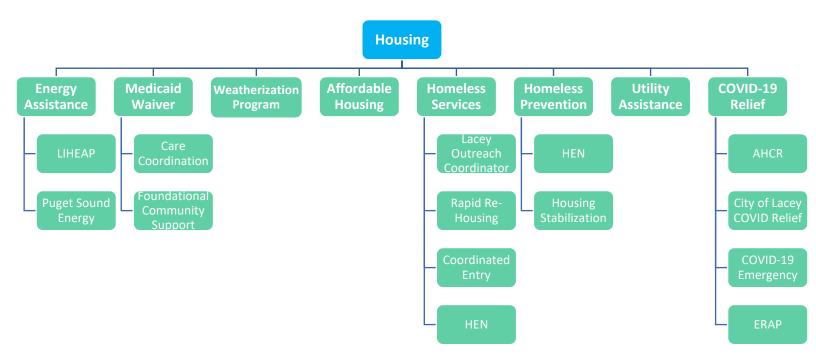
Monarch Children's Justice and Advocacy Center (MCJAC): Provides a wide range of services at no cost to sexually, physically or neglected children and non-offending caregivers. Services include forensic exams, therapy, case development, family support, and case coordination. We work to reduce the incidence and impact of child abuse by providing a coordinated, multidisciplinary response to victims of child abuse and their families. This response includes prevention, investigation, prosecution, and treatment- which includes community partners who are experts in those areas.

Youth Advocacy Center (YAC) Lewis County: Satellite center of MCJAC providing forensic interviewing services, along with other wrap-around services to child victims of abuse and their families.

Crime Victims Advocacy: The Crime Victim Service Centers (CVSC) are part of a state-wide effort to bridge the gap between victims and the services they need. The CVSC are a part of the Region 11 Crime Victims Advocacy Network. Our advocates provide free and confidential services to victims of crime in Mason and Lewis Counties. We work to protect the rights and dignity of crime victims by providing support, referrals an advocacy in a compassionate, proactive and empowering manner.



The Emergency Food Assistance Program (TEFAP) and Emergency Food Assistance Program (EFAP): Coordinates the purchase of nutritious food not readily available to local food banks. TEFAP food banks and feeding sites provide food assistance for individuals in all our service areas. EFAP provides food at our Mason County Food Banks.



ENERGY ASSISTANCE

Energy Assistance: Our Energy Assistance program believes in providing equitable, confidential, and reliable energy assistance services to low-income families and individuals. LIHEAP, a federally funded program, assists residents with their gas, electricity, oil, wood, and propane costs. Puget Sound Energy HELP provides assistance with the cost of natural gas and electricity consumption to qualified PSE customers—with an account in their name or in the name of a member of the household.

MEDICAID WAIVER

Care Coordination (Pathways): Through the Pathways Program, our Care Coordinators work with clients to access support services. Focusing on service navigation, referrals, and education to ease the process of accessing care and support. This program enables a Care Coordinator to work with clients on multiple focuses at the same time, to build confidence and know-how, with a goal of self-sufficiency.

Foundational Community Supports: Program that includes Supportive Housing and Supportive Employment. Targeted Medicaid benefits are used to help eligible clients with complex health needs obtain and maintain housing and employment stability by in-depth case management services

WEATHERIZATION PROGRAM

Weatherization Program: Our weatherization services help households reduce home energy consumption while increasing the health, safety, comfort, and longevity of homes. Weatherization is the application of energy efficiency measures to a home. These include ceiling, wall and floor insulation; closing heat-escaping gaps by caulking, weather

stripping, or broken window replacement; and heating system improvements. The measures are done according to established technical specifications, cost-effectiveness tests, and relevant building codes.

AFFORDABLE HOUSING

Affordable Housing: We provide affordable housing through our rental properties and have the capacity to develop new or preserve affordable in our service areas by working with multiple jurisdictions. In past years, we have housed over 692 people in 375 units.

HOMELESS SERVICES

Lacey Outreach Coordinator: Responds to people with mental and/or substance use disorders, behavioral, housing, financial and other social service needs. The OC makes a considerable amount of public contact and is intended to bridge the gap between law enforcement and/or emergency medical response and the social service needs of people in the Lacey community who are in this population.

Rapid Re-Housing: Provides short-term rental assistance and case management services. The goals are to help people obtain housing rapidly, increase self- sufficiency, and stay housed. It is offered without requirements (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are personalized to the needs of the person. This program employs the Housing First model and is aimed to serve the highest vulnerable members of our community.

Coordinated Entry: Intakes and assessments for homeless single adults and veterans identifying vulnerability, interest and eligibility for housing. This program reduces the number of people entering into homelessness by offering prevention and diversion resources, and our Coordinated Entry Specialist matches single individuals to appropriate programs and resources as space becomes available.

Housing and Essential Needs (HEN): Prevents the homelessness of and to rehouse adults who are medically incapacitated and unable to work, and assist them with basic essential needs such as utility payments, personal hygiene products, and transportation. Last year a monthly average of 317 individuals who were either homeless, or at risk of being homeless received assistance.

HOMELESS PREVENTION

Housing and Essential Needs (HEN): Prevents the homelessness of and to rehouse adults who are medically incapacitated and unable to work, and assist them with basic essential needs such as utility payments, personal hygiene products, and transportation. Last year a monthly average of 317 individuals who were either homeless, or at risk of being homeless received assistance.

Housing Stabilization Program: Provides rental assistance and short-term housing stabilization case management for single adults and families whom are at risk of losing their primary nighttime residence.

UTILITY ASSISTANCE

Utility Assistance: Provides payment assistance to single adults and families at risk of losing their primary nighttime residence or maintaining stable housing by preventing discontinuance of water or sewer services.

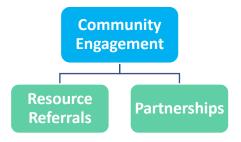
COVID-19 RELIEF

Affordable Housing COVID Response (AHCR): Provides emergency housing services in response to COVID-19. AHCR helps individuals and families maintain housing. AHCR will serve clients that are at or below 60% AMI, have missed a partial or full rent/mortgage payment since March 2020 and have been impacted by the COVID19 pandemic.

City of Lacey COVID Relief Fund: Partnership between Community Action Council (CAC) and the City of Lacey to support Lacey residents impacted by the COVID19 pandemic. The City has allocated funding to support residents with rental/mortgage assistance, water/sewer assistance, WIFI assistance, and childcare.

COVID-19 Emergency Funds: These programs assists individuals and families who have experienced a loss in income due to the COVID19 Pandemic, who are at or below 200% of the Federal Poverty line and have household needs that could include rent, utilities, childcare and other needs dependent on the funding source Funders include: United Way of Thurston County, United Way of Lewis County, The Community Foundation of South Puget Sound, Lewis and Mason County Community Development Block Grant.

Eviction Rent Assistance Program (ERAP): Prevents evictions by paying past due, current, due and future rent, targeting limited resources to those with the greatest needs while working to distribute the funds equitably.



Resource Referrals: Over 30,577 people received appropriate resource referral to Community Action Council services, as well as other service providers in the community.

Partnerships: CACLMT partners with 70 public and private organizations to expand resources and opportunities in order to achieve positive family and community outcomes. Partnerships include non-profits, faith-based organizations, local governments, and private organizations.

Our Service Area

CACLMT's primary service area is Lewis, Mason, and Thurston counties, with selective services in Kitsap and Grays Harbor counties. CACLMT provides surplus commodity foods to Kitsap and manages affordable housing in Grays Harbor. CACLMT is in legislative districts 2, 20, 22, & 35, along with congressional districts 3, 6, & 10.

Data in this assessment consists of Lewis, Mason, and Thurston counties, considering the majority of our clientele base resides in this area. Focusing on the major three counties we serve will allow us to have non-skewed data and thus, we can better understand the specific needs of the communities. Additional data was collected for the state of Washington to assess and compare with state data as well as national data.



Overview of Assessment Process

Purpose & Goals for Community Needs Assessment (CNA)

As a Community Action Agency, CACLMT is required to complete a CNA every three years. The goal of the assessment process is to understand the extent of community needs, our resources and partners available to meet those needs. The results will help us create openings for community by-in, create opportunities for new alliances and connections with new partners, generate authentic input from stakeholders, indicate causes and conditions to enhance capacity to respond to change, and guide our board governance to align our strategic plan to ensure our services meet the needs and issues affecting our low-income communities.

Methods of Data Collection and Analysis

Quantitative data was mostly gathered from the U.S. Census Bureau's American Community Survey (ACS) data for each county of Lewis, Mason, and Thurston and also including data for Washington State and Nationwide. Five-year ACS estimates were used to ensure quality of data. These estimates represent average characteristics over a five-year period of time and are therefore less current than one-year ACS estimates. However, because the five-year estimates use a larger sample size, they are more reliable, particularly with smaller populations. The five-year survey data ranges from 2014-2018. Quantitative data was also collected from U.S. Census Bureau's community fact finder for all counties and State listed above, with comparisons from the year 2010 and 2019.

Other data regarding, but not limited to, health, housing, poverty, food security, and education were collected from state agencies, federal agencies, and public access community evidence-based data bases. These include but are not limited to, Department of Social and Health Services (DSHS), Department of Health (DOH), Center for Disease Control and Prevention (CDC), and Community Commons.

Client feedback for 2019 was collected through in-person surveys mainly on-site and offsite for those clients receiving Weatherization assistance. Client feedback does not include responses from Monarch Children's Justice and Advocacy Center and the Crime Victims Center. Qualitative data was gathered from the Community Stakeholder Survey, conducted in 2020.

Participant Profile

The below three surveys help in depicting a better understanding of community needs from the perspective of clients and community stakeholders.

<u>Client Satisfaction Survey:</u> The 2019 Client Satisfaction Survey does not collect gender or race/ethnic characteristics and therefore, these demographics cannot be measured.

<u>Annual Client Survey:</u> The 2019 Annual Client Surveys demographic data provides a glimpse of who the Council serves: the respondents indicated they were 43% were male, 57% female, 74% were white, 20% Latino, 4% African American and 4% Asian, 63% rented their homes, 23% were homeowners, 1% were homeless, 28% were employed, 44% were either on Social Security, SSI or pension, and 9% received Public Assistance, and 63% had incomes at or below 50% of poverty.

Community Stakeholder Survey: In 2020, a Community Stakeholder Survey was distributed to a list of 346 stakeholders between Lewis, Mason, and Thurston counties and results were compiled. Out of the 346 stakeholders to whom the survey was sent, 95 responded (n=95), which resulted in a 27% response rate. Respondents participated from Education, Faith-based, Non-profit, For-profit, and Community-based Organization sectors. The majority of respondents were from community-based organizations, with Thurston County stakeholders as the highest number of respondents. Additionally, gender or race/ethnic characteristics were not part of the stakeholder survey questions and could not be measured.

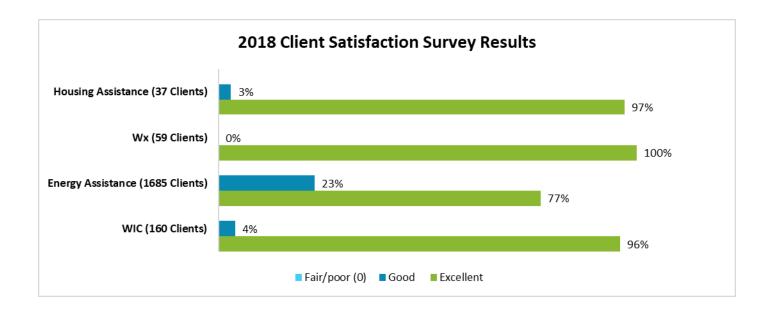
Client Satisfaction, Client Feedback, & Service Utilization

2018 Customer Satisfaction

To ensure CACLMT is providing impactful services to clients, CACLMT conducts annual client satisfaction surveys. In 2018, the majority of client respondents indicated services received were excellent, followed by good, with no poor/fair ratings.

Clients were asked a variety of questions specific to type of appointment and services received. Surveys were collected onsite and offsite during office hours, generally after each appointment with Housing assistance, Weatherization (Wx), Energy assistance, or WIC, and as prospective clients came into CACLMT offices to access services.

Survey objectives were to collect client feedback on their overall experience in relation to service delivery. The 2018 client satisfaction surveys included 1,941 total respondents, four CACLMT program ratings are captured in the graph below. This illustrates the results of client's overall experience.



2019 Annual Client Survey

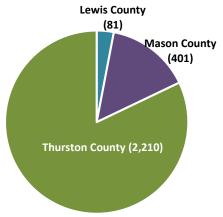
The Annual Client Needs Survey was conducted from October 2018 through August of 2019. The survey is anecdotal and makes no claim of statistical validity. Though the results may not be statistically valid, the results/data illustrated do provide valuable insights into the respondents' perceived needs. A total of 2,692 clients voluntarily participated. The large number of respondents allows the reader to make some positive inferences as to the data pertaining to community needs and services.

The surveys were voluntary and randomly conducted in each county and were either completed by the respondent themselves, by staff interview over the phone, or by staff interviewing the respondent during a service appointment.

All survey respondents were clients accessing services at our direct service sites in Lewis, Mason, and Thurston Counties. The data below summarizes many of the findings. The full report provides more county specific information revealing the variations to the questions (See Appendix A for total results).

1. IN WHICH COUNTY DO YOU LIVE?

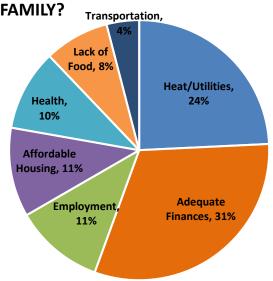
A Total of 2,692 People Responded to the Survey



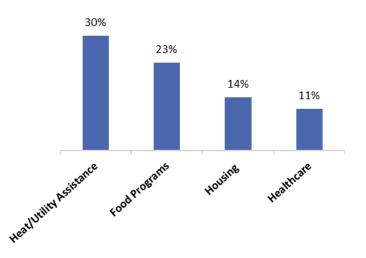
2. WHAT IS THE BIGGEST PROBLEM FACING YOU OR YOUR FAMILY?

"Hours reduced at work so things are tight; Cannot afford food all the time."

"My husband was injured and we have a child with cancer."



Most Needed Family Services



3. ARE THERE 5 SERVICES YOU OR YOUR FAMILY NEED MOST?

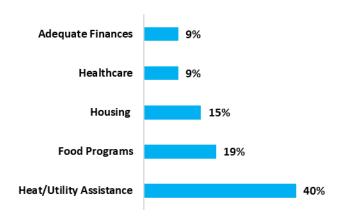
Combined results reveal that **heat/utility assistance** was the number one service families need the most (30%). This result is somewhat anticipated in that a majority of the survey respondents were accessing energy assistance services. Recognizing that it is important to note the next responses.

4. WHAT KIND OF HELP IS THE MOST IMPORTANT FOR YOU OR YOUR FAMILY?

Consistent with question 3 above, combined results illustrate that heat/utility assistance ranked the highest (40%) followed by food programs (19%), affordable housing (15%), adequate finances (9%), and healthcare (9%).

"Recently divorced from an abusive husband and I am left with three children and no support. I do not know what to do, we need everything."

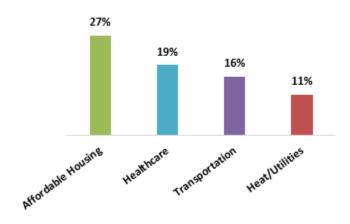
Most Important Help



5. IS THERE HELP YOU NEED THAT IS NOT AVAILABLE TO YOU?

This question provides the best insight into the clients' perception of needs and availability of services. Responses also help guide analysis regarding potential gaps in services, increased outreach or advocacy for services. The highest response to this question was affordable housing (27%), followed by healthcare (19%), transportation (16%) and heat/utilities (11%).

Help Needed, but Not Available



"Fighting cancer is breaking me. I can't keep everything straight. I do not know what to do and need money for medications and my home needs repairs. I am confused what to do."

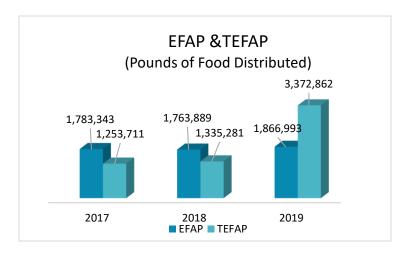
Summary of Community Feedback

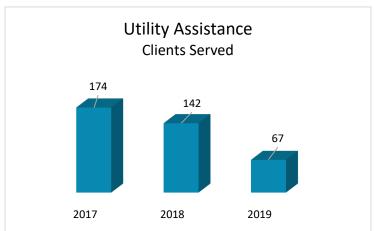
Respondents from **2019 Annual Client Survey** indicated three major categories related to services needed and those most important: the biggest problems facing them or their families, services most needed, and help needed but is unavailable. In ranking order, the biggest problems facing them or their families are adequate finances, heat/utilities, employment, health, affordable housing, lack of food, and transportation. In ranking order, the most needed services are heat/utility assistance, food programs, housing, and healthcare. Help that is most needed but unavailable is affordable housing, healthcare, transportation, and heat/utilities.

Respondents from **2020 Community Stakeholder Survey** indicated three categories addressing issues and needs for adults, youth, and overall community needed services. The biggest problems facing adults were mental health issues and access to affordable housing. The biggest problems facing youth were mental health issues, substance abuse, and lack of opportunities to develop skills needed as an adult. The overall most needed services were affordable housing, mental health services, homeless services/shelters, and help for those that cannot pay their rent or mortgage.

Food insecurity, lack of affordable housing/utility assistance, childcare costs, employment and other hardships affect many children, adults, and families- not just those who are considered low-income.

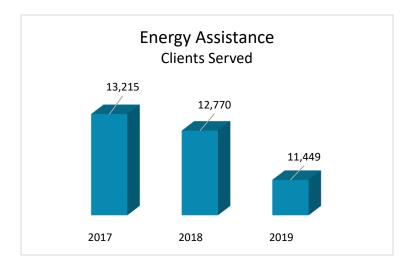
Overview of CACLMT Service Numbers for All Programs, Fiscal Years 2017, 2018, & 2019

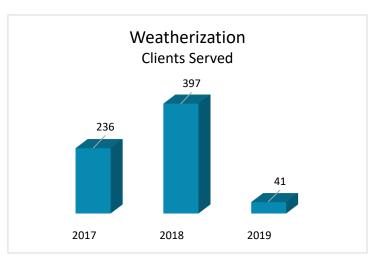


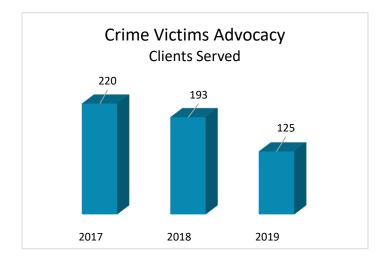


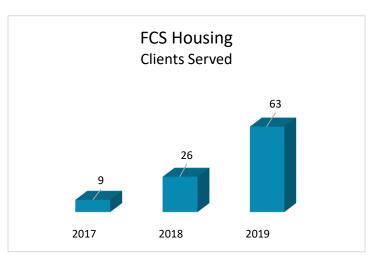


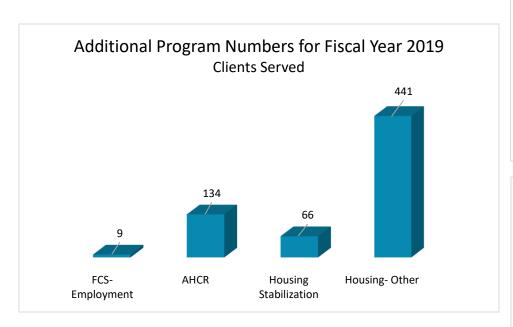
















Within certain programs, services numbers have increased while others have shown a decrease. It is difficult to fully determine why certain programs have experienced a decrease or increase in numbers from 2017 to 2019. We must take into account funding sources, staff numbers, the COVID-19 pandemic, and economy among other interdependent complexities to gain a better understanding of how program service numbers are impacted. Additionally, some programs were created in 2019-2020 fiscal year in order to meet the needs that the COVID-19 pandemic placed on our community.

Community Collaboration and Partnerships

CACLMT partners with 70 public and private organizations to expand resources and opportunities in order to achieve positive family and community outcomes. Partnerships include non-profits, faith-based organizations, local governments, and private organizations.

Beginning in 2016, CACLMT developed a comprehensive survey process to measure client satisfaction. Moving forward, CACLMT plans to utilize this data throughout the strategic planning process to better align services with client needs.

The 2019 Annual Client Survey results provide valuable insight into the clients' perception of needs and services.

In 2020, a Community Stakeholder Survey was distributed to a list of 346 stakeholders between Lewis, Mason, and Thurston was compiled. Out of the 346 stakeholders, to whom the survey was sent, 95 responded (n=95). Respondents participated from Education, Faith-based, Non-profit, For-profit, and Community-based Organization sectors. Moving forward, CACLMT plans to utilize this data throughout the strategic planning process to better align services with CACLMT's service area and agency needs (See Appendix B for full survey report).

Sample Agency Partnerships:

- City of Lacey
- City of Olympia
- City of Shelton
- City of Tumwater
- Community Foundation of South Puget Sound
- March of Dimes
- ROOF
- TOGETHER!
- United Way of Lewis County
- United Way of Mason County
- United Way of Thurston County
- Paul G. Allen Family Foundation
- Cascade Natural Gas Corporation
- Lewis County PUD #1
- Mason County PUD #1
- Mason County PUD #3
- Puget Sound Energy

- Chehalis Tribe
- Nisqually Tribe
- Bonneville Power Administration
- Department of Agriculture
- Department of Energy
- Department of Health and Human Services
- Department of Housing and Urban Development
- Federal Emergency Management Agency
- Department of Commerce
- Department of General Administration
- Department of Health
- Department of Social and Health Services
- Superintendent of Public Instruction
- Southwest Washington Health District
- Washington State Rural Development Council

COVID-19 Pandemic

This section will provide an overview about how the COVID-19 pandemic has impacted our community, our services and funding, in addition to how our organization's service delivery model will shift moving forward. Additionally, it is important to note that some data throughout this assessment may be skewed due to the impacts of the pandemic on our community, members, staff, and funders.

Date of First Confirmed Case of COVID-19 in Community Assessment Area

WA State- January 21st, 2020 Mason County- March 23rd, 2020 Lewis County- March 15th, 2020 Thurston County- March 11th, 2020

First date state/local officials issued policies limiting activity:

<u>February 29th, 2020</u>- Governor's Proclamation (20-05) State of Emergency for all counties in the State of Washington as a result of COVID-19.

<u>March 12th, 2020</u>- Thurston County Board of Health and County Commissioners declare a COVID-19 related emergency. <u>March 19th, 2020</u>- Governor signs Proclamation (20-06), pertaining to risks of person living in congregated care settings.

Due to the rapid increase in cases for Lewis, Mason and Thurston counties, many businesses were unable to continue to provide goods and services as they once were, , employees of agencies and organizations began working remotely from home, and schools closed to in-person learning and moved to a distance learning model. This placed many burdens and challenges on the community as a whole, and presented CACLMT with barriers and challenges when shifting and pivoting service delivery models in order to accommodate for safety and health protocols during a global pandemic.

Community Burden & Challenges

Some burdens and challenges placed on our community members were: loss in income/employment, the inability to pay rent or mortgage, food insecurity, increased electric/water bills, increase in stress on families confined to their home with no access to outside support systems such as teachers, counselors, and workplace support, insufficient or no internet for distance learning, among many others.

CACLMT Challenges & Adjustments

As a result, CACLMT had to adjust rapidly to ensure we were still able to provide continued delivery of services across our service delivery area for each program of our organization. For example, the Weatherization program temporarily suspended services in client homes, and instead focused on training and technical practice for employees, as well as remodel assistance for Monarch's Capital Campaign. Additionally, our office closed to the public which resulted in needing to create systems and software for telehealth services, mailing out applications to clients, and drop boxes for physical paperwork to be returned. When services were absolutely required to be in person, adequate personal protective equipment was critical to ensure safety for staff and clients.

CACLMT was chosen by multiple funders to distribute a large influx of emergency funding in order to provide services to community members impacted by COVID19. There were increases in funding to the Energy Assistance LIHEAP and PSE Help programs. The Housing program added COVID19 Emergency Funds in Lewis, Mason and Thurston counties, and included funding sources from the United Way of Thurston County, the United Way of Lewis County, the Community Foundation of South Puget Sound, the City of Tumwater, the City of Lacey, and Community Development Block Grant Funds from Lewis and Mason Counties.

Moving Forward

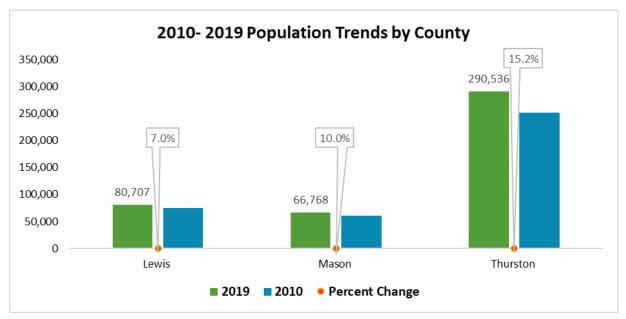
We will continue to monitor the COVID cases and its effects on our communities while ensuring our clients' needs are being met and ensure the safety of clients and staff during this unprecedented time. Additionally, our staff will ensure to continue to distribute high level services to clients and integrity of our programs.

Community Demographic Profile

The following information will focus on data collected to better understand the community we serve and client needs based on the data collected. This section covers data on population, disability, veterans, age, gender, race/ethnicity, family structure, childcare, education attainment, employment/income, housing, health, food security, transportation, poverty, homelessness, cost of living, and living wages. This assessment collected data from primary and secondary data sources. Primary data utilized was CACLMT's internal client data. Secondary data was collected through census data and other local reputable sources.

Population

Current population demographics and changes in demographic composition over time play a determining role in the types of health and social services needed by communities. A significant positive or negative shift in total population over time impacts the utilization of community resources.



Data Source: US Census Bureau, Quick facts: Population Estimates. 2010 & 2019.

Thurston County had the most significant population increase from 2010 to 2019 at 15.2 percent, Mason's population increased approximately 10 percent, and Lewis County increased by 7 percent.

Population Trends of Top 5 Cities in Lewis, Mason, and Thurston Counties

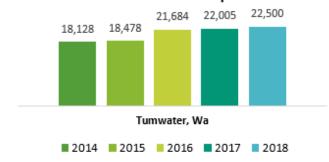
5 Year trends in Population



5 Year trends in Population



5 Year trends in Population



5 Year trends in Population



Data Source (5 graphs): US Census Bureau, American Community Survey. 2014-18.

5 Year trends in Population

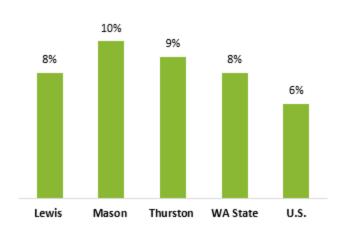


Lacey, Olympia, Shelton, Centralia, and Tumwater all had a consistent population increase from 2014-2018.

Population Geographic Mobility

Population in-migration assesses changes in residence within a one-year period. Persons included are those who moved to a new household from outside their current county of residence, from outside their state of residence, or from abroad are considered part of the in-migration population. Persons who moved to a new household from a different household within their current county of residence are not included.

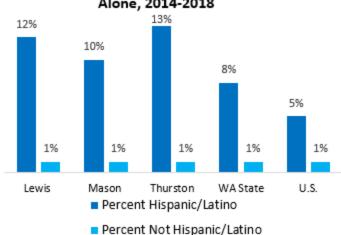
Population In-Migration By County, State, National



Data Source: Community Commons. US Census Bureau, American Community Survey. 2014-18.

Mason and Thurston counties are experiencing the highest changes in residence compared to Lewis county and are slightly above the state and national level.

Population In-Migration by Ethnicity Alone, 2014-2018

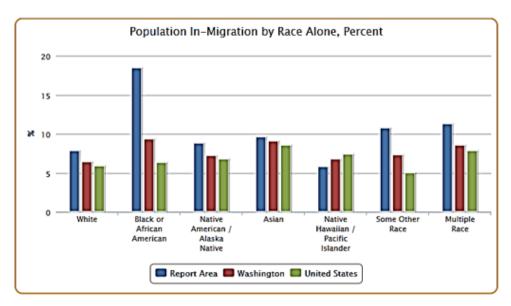


Data Source: Community Commons. US Census Bureau, American Community Survey. 2014-18.

Thurston County has the highest percent of in-migration within the Hispanic/Latino population.

Overall, this population data illustrates consistent increase in all county populations. With Thurston County having the highest percent increase in population change from 2010-2016.

Hispanic/Latino and Black/African American populations have highest percent of in-migration rate overall.



Data Source: Community Commons (2017). US Census Bureau, American Community Survey. 2014-18.

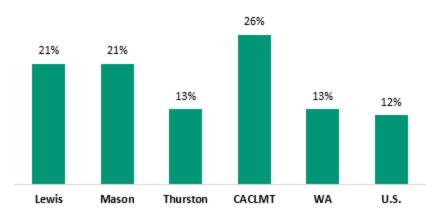
*Report Area includes all Counties in CACLMT's Service Area (Lewis, Mason, Thurston, Kitsap, & Grays Harbor).

Black or African American persons have the highest increase in-migration within CACLMT service areas. This graph illustrates the percentage of total in-migration population.

Disability

Current disability demographics and changes in demographic composition over time play a determining role in the types of health and social services needed by communities. This graph reports the percentage of the total civilian non-institutionalized population with a disability. Disability data is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

Percent of Population with a Disability by County, State, National levels, & CACLMT Clients



Data Source: US Census Bureau, American Community survey. 2014-18.

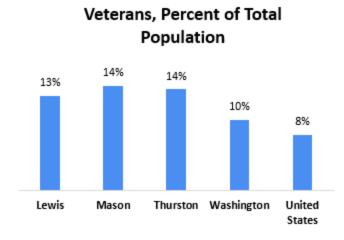
Client data from CACLMT for 2019-20 fiscal year.

Lewis and Mason Counties take the lead as having the highest population with a disability compared to Thurston county, state and national rates.

^{*} Figures rounded to nearest whole percent.

Veterans

Current veteran demographics and changes in demographic composition over time play a determining role in the types of health and social services needed by communities. This graph reports the percentage of the population age 18 and older that served (even for a short time), but is not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or that served in the U.S. Merchant Marine during World War II.



In general, individuals living in rural areas differ from their urban counterparts in terms of demographic characteristics, social ties, culture, and access to infrastructure and institutional support. Much depends on the geography itself. In some parts of the country, rural residents may face substantial physical barriers to accessing services and amenities, including longer travel times, lack of transportation options, and limited availability of services (US Census Bureau, American Community Survey Reports, 2014-2018).

Data Source: US Census Bureau, American Community Survey. 2014-18.

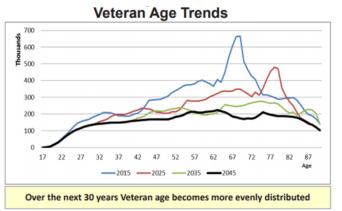
National Veteran Data

In 2015, there were 7.2 million working age Veterans (nationally) who participated in the labor force (out of 9.4 million working age Veterans). Of those in the labor force, almost 341,000 (or 4.7%) fell below the official poverty level. Racial and ethnic minorities have a higher poverty rate than non-minorities regardless of Veteran status. The low-income and poverty rate for Veteran minorities is 6.4% compared to 4.0% for non-Minorities.

Veterans and non-Veterans with a disability are more likely to be low-income and in poverty than those who are non-disabled. The poverty rate for Veterans with a disability is 7.9% compared to 4.4% for those with no disability (National Center for Veterans Analysis and Statistics, Department of Veterans Affairs (2017).

Veteran Population	Washington 582,265	United States 21,369,602
Percent female	8.6	7.3
Unemployment rate for veterans	6.4	5.3
Number of homeless veterans	1,433	49,865
Median household income (In 2014 inflation-adjusted dollars)	\$67,912	\$61,884
Number of VA* facilities	26	1,356
Number of veteran-owned business	es 49,712	2,540,706
* VA = Department of Veterans Affairs		

Data Source: US Census Bureau, American Community Survey 2014-2018. Graph Source: https://www2.census.gov/library/visualizations/2015/comm/vets/wa-vets.pdf



Source: Veteran Population Projection Model 2016: Congressional Briefing, June 2017, revised. Prepared by the National Center for Veterans Analysis and Statistics as of May 14, 2018.

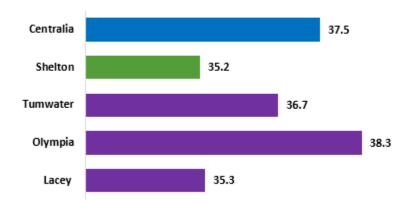
^{*}Figures rounded to nearest whole percent.

Age

Current age demographics and changes in demographic composition over time play a determining role in the types of health and social services needed by communities.

The age of community members is relevant because it is important to understand the percentage of infants, young children, teens, and adults in the community. Each population has unique health needs which should be considered separately from other age groups.

2018 Median Age by Top 5 Cities in Lewis, Mason, and Thurston Counties

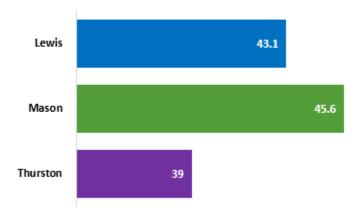


Thurston County has the lowest median age compared to other counties; however, Tumwater, Olympia, and Centralia cities have the highest median age compared to those cities of Lacey and Shelton. Thurston County's overall median age by county and cities remains relatively consistent, whereas Mason and Lewis both have a higher median age by county than by city.

Data Source: 2014-2018 American Community Survey 5-year estimates.

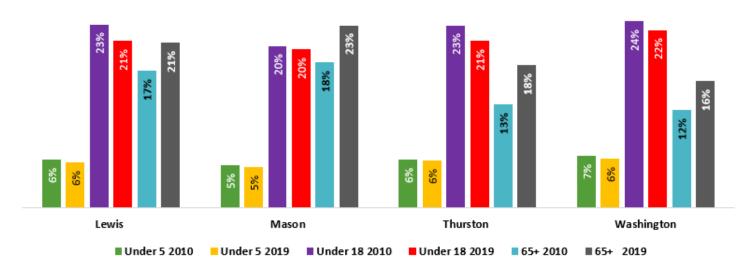
2018 Median Age by County

Mason County has the highest median age compared to other counties. However, the city of Shelton has the lowest median age compared to other top cities.



Data Source: US Census Bureau, American Community Survey. 2014-18.

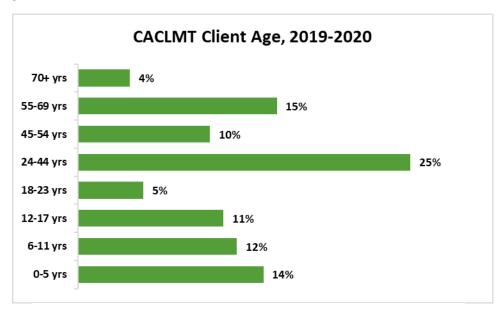
2010-2019 Age Trends by County and State



Data Source: US Census Bureau, Quick facts: Population Estimates. 2010 & 2019.

* Figures rounded to nearest whole percent.

Age trends have not changed significantly between 2010 & 2019 for age under 5 and under 18. While the most significant changes have occurred with ages 65 and over, indicating an increase in older populations in all counties, which are slightly higher than those in the state overall.



Data Source: Client data from CACLMT for 2019-2020 fiscal year.

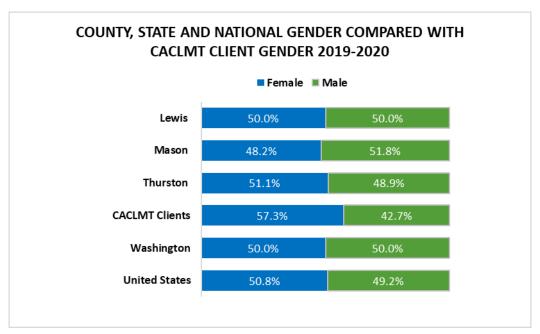
CACLMT serves majority of clients between ages 24-44 years (25%), followed by ages 55-69 (15%), and ages 0-5 (14%). It is important to note that the previous CNA identified ages 55-69 as the lowest percentage of clients. Clients aged 70 years and over continue to make up the lowest percentage at 4%.

Gender

Current gender demographics and changes in this demographic composition over time play a determining role in the types of health and social services needed by communities.

A total of 208,934 females resided in CACLMT's service area according to the U.S. Census Bureau American Community Survey 2014-18 5-year estimates. Females represented 49.8% of the total population in the area, which was less than the national average of 50.8%.

A total of 205,324 males resided in the service area according to the U.S. Census Bureau American Community Survey 2014-18 5-year estimates. Males represented 50.2% of the total population in the area, which was greater than the national average of 49.2% (Community Commons, 2017).



Data Source: US Census Bureau, American Community Survey. 2014-2018. Client data from CACLMT for 2019-2020 fiscal year.

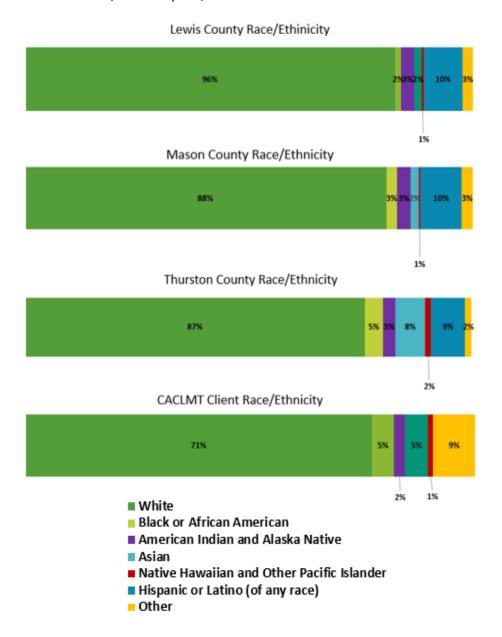
Thurston county has a slightly higher percentage of female gender compared to other counties. Lewis county falls at an equal gender distribution which is aligned with the state gender distribution. Mason county has a slightly higher percentage of males compared to the other counties. CACLMT serves a larger percentage of females (57.3%) than males (42.7%).

Race/Ethnicity

Current race and ethnicity population demographics and changes in this demographic composition over time play a determining role in the types of health and social services needed by communities.

Studies have demonstrated a strong association between minority race, low socioeconomic status, and lack of potential access to care (e.g., no insurance coverage), and a greater need for social services.

The five racial and ethnic categories that are most identified are: African American or Black, Asian, Latino or Hispanic, Native American, and European, Caucasian or White.



The majority of the population in all counties identify as white, with Lewis and Mason County having the highest percentage at 96 and 88 percent. The second largest percentage of minority race/ethnicity in overall counties is Hispanic/Latino and Asian. However, Hispanic/Latino and Black/African American populations have highest percent of in-migration rate overall for 2017. Which means more of this race/ethic minority is moving into these counties and we may see an increase in the population of Hispanics/Latinos and African Americans/Blacks in the future.

Mason and Lewis have the largest American Indian/Alaska Native population compared to Thurston, and Native Hawaiian and Other Pacific Islander rank very low in 1-2 percent range for all counties.

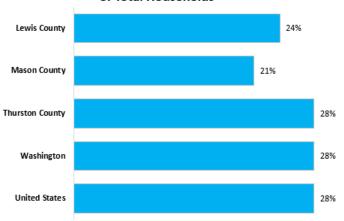
CACLMT also serves a high population of white clients at 71 percent, however this population is lower compared to other counties overall.

Data Source: US Census Bureau, American Community Survey. 2014-2018. Client data from CACLMT for 2019-2020 fiscal year.

^{*}Percentage rounded to nearest whole number.

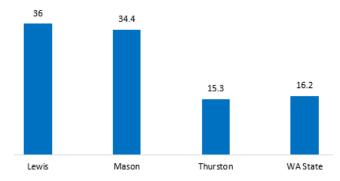
^{*}Percentage totals may not equal 100 percent, due to persons choosing multiple race/ethnicities.

Families with Children (Under Age 18), Percent of Total Households



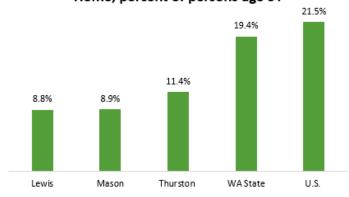
Data Source: US Census Bureau, American Community Survey. 2014-18.

Teen Birth Rate per 1,000 Teenage Girls (Age 15-19)



Data Source: Washington State Dept. of Health (2017).

Language other than English Spoken at Home, percent of persons age 5+



Data Source: US Census Bureau, American Community Survey. 2014-18.

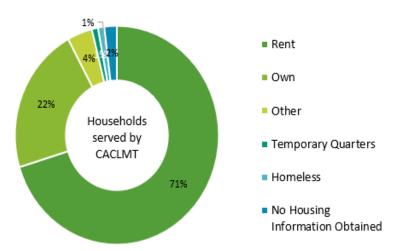
Thurston County has the highest percentage of persons who speak another language other than English at home, compared to other counties. All CACLMT service counties fall below the state and national levels.

It is important to track the rates of birth among teenage girls (ages 15-19), because this demographic is especially vulnerable to effects of poverty, reduced economic opportunities, and low educational attainment. Rates of birth for this population are also reflective of health care access, health education, and family planning services. Lewis and Mason counties have the highest rate of teen births compared to Thurston County and the state level. Thurston County falls below the state teen birth rate.

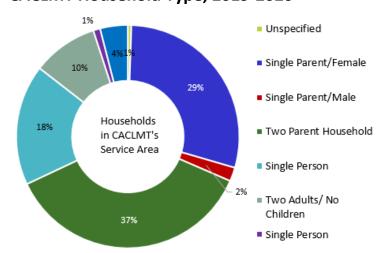
^{*}Figures rounded to nearest whole percent.

^{*}Figures rounded to nearest whole number.

CACLMT Housing Composition, 2019-2020



CACLMT Household Type, 2019-2020

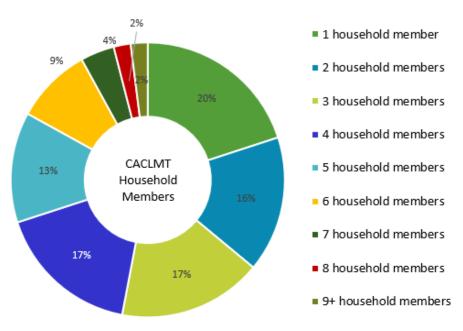


Data Source: Client data from CACLMT for 2019-2020 fiscal year.

*Figures rounded to nearest whole percent.

Data Source: Client data from CACLMT for 2019-20 fiscal year. *Figures rounded to nearest whole percent.

CACLMT Household Size, 2019-2020



In Housing Composition, renters make up the majority of households at 71 percent, followed by owners at 22 percent.

Two parent households make up the majority of Household Type, at 37 percent. Single female parents were the second highest, at 29 percent.

The majority of CACLMT's household size is one household member at 20 percent. Two, three, and four household members make up the next highest percent served by CACLMT between 16 and 17 percent.

Data Source: Client data from CACLMT for 2019-2020 fiscal year.

^{*}Figures rounded to nearest whole percent.

Child Care

Without a network of child care support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

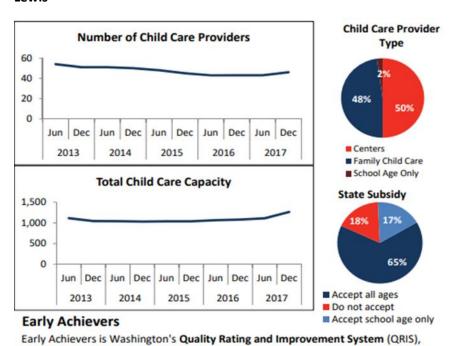
Trends in Child Care

In most parts of Washington, the number of child care providers and capacity for children declined several years ago, but since 2013 the number of providers has become more stable.

The median cost of child care centers and family child care are more costly in Thurston County than Lewis and Mason Counties which could be due to factors related to cost of living, accessibility, and taxes.

CACLMT serves 14 percent of children ages 0-5, 13 percent of children ages 6-11, and 11 percent of children ages 12-17 years. Children within age range of 0-11 years old are the most likely to receive child care assistance- which makes this age group (0-11) the highest percent served at a combined 38 percent for CACLMT services (Child Care Aware, 2017).

Lewis



which gives training, technical assistance, coaching, awards, scholarships, and other

In Lewis County, the number of child care providers has dropped from 54 with capacity for 1123 children in 2013, to 43 providers with capacity for 1081 children in December of 2017.
*Includes licensed child care (centers and family child care) and exempt school-age programs only.

Statewide, 3,921 child care providers participate in Early Achievers.

benefits to child care providers to improve the quality of their care.

Approximately 71% of licensed child care providers in Lewis County are enrolled in Early Achievers. Early Achievers provides families with valuable child care program quality information so they can make informed child care choices.

Early Achievers	(QRIS)
Participatio	n
Total	42
Child Care Centers	19
Family Child Care	13
Head Start & State Preschool Sites	10
Enrollment as of	3/8/18

Data Source: Child Care Aware of Washington (2018). Lewis County Child Care Aware 2018 Demographics.

Lewis

Demographics	
Population ¹	
Total Population in 2017	77,440
Change since 2013	1,240
Children under 5 yrs	4,530
Children under 15 yrs	14,012
K-12 Enrollment ²	12,029
Economics % of children under 18 living in poverty ³	19.8%
% of children under 6 w/ all parents working ⁴	55.8 to 65.4%
Median Household Income ¹	\$47,143
Unemployment Rate⁵	5.9%

Monthly Cost of Child Care in 2017

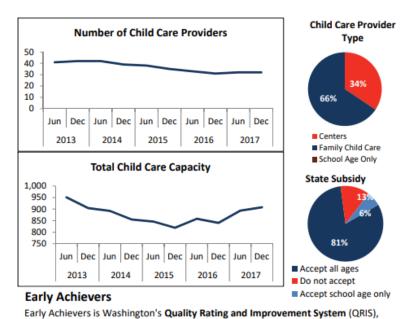
Centers	Median Cost	75th Percentile Cost	State Subsidy Rate	Median Cost as a % of Median Income
Infant	\$754	\$794	\$827	19%
Toddler	\$657	\$705	\$710	17%
Preschool	\$598	\$645	\$620	15%
School Age	\$325	\$363	\$607	8%

Family Child Care	Median Cost	75th Percentile Cost	State Subsidy Rate	Median Cost as a % of Median Income
Infant	\$652	\$752	\$722	17%
Toddler	\$639	\$684	\$628	16%
Preschool	\$587	\$612	\$589	15%
School Age	\$466	\$586	\$555	12%

Data Source: Child Care Aware of Washington (2018). Lewis County Child Care Aware 2018 Demographics.

Mason

Achievers.



which gives training, technical assistance, coaching, awards, scholarships, and other

In Mason County, the number of child care providers has dropped from 41 with capacity for 951 children in 2013, to 32 providers with capacity for 908 children in December of 2017.

*Includes licensed child care (centers and family child care) and exempt school-age programs only.

Statewide, 3,921 child care providers participate in Early

benefits to child care providers to improve the quality of their care.

Approximately 76% of licensed child care providers in Mason County are enrolled in Early Achievers. Early Achievers provides families with valuable child care program quality information so they can make informed child care choices.

Farly Achievers (QRIS)
Participation

Total 29
Child Care Centers 10
Family Child Care 16
Head Start & State 3
Preschool Sites

Enrollment as of 3/8/18

Data Source: Child Care Aware of Washington (2018). Mason County Child Care Aware 2018 Demographics.

Mason

Demographics Population ¹	
Total Population in 2017	63,190
Change since 2013	1,390
Children under 5 yrs	3,226
Children under 15 yrs	10,179
K-12 Enrollment ²	9,063
Economics	
% of children under 18 living in poverty ³	22.6%
% of children under 6 w/ all parents working ⁴	47.4 to 65%
Median Household Income ¹	\$53,633
Unemployment Rate ⁵	5.6%

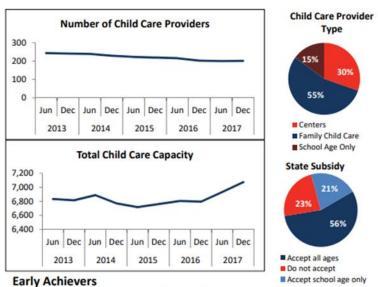
Monthly Cost of Child Care in 2017

Centers	Median Cost	75th Percentile Cost	State Subsidy Rate	Median Cost as a % of Median Income
Infant	\$763	\$808	\$827	17%
Toddler	\$676	\$702	\$710	15%
Preschool	\$592	\$606	\$620	13%
School Age	\$368	\$433	\$607	8%

Family Child Care	Median Cost	75th Percentile Cost	State Subsidy Rate	Median Cost as a % of Median Income
Infant	\$650	\$745	\$722	15%
Toddler	\$607	\$683	\$628	14%
Preschool	\$550	\$618	\$589	12%
School Age	\$338	\$514	\$555	8%

Data Source: Child Care Aware of Washington (2018). Mason County Child Care Aware 2018 Demographics.

Thurston



*Includes licensed child care (centers and family child care) and exempt school-age programs only.

children in December of 2017.

In Thurston County, the number of child

with capacity for 6834 children in 2013,

to 201 providers with capacity for 7074

care providers has dropped from 243

Early Achievers is 14

Early Achievers is Washington's **Quality Rating and Improvement System** (QRIS), which gives training, technical assistance, coaching, awards, scholarships, and other benefits to child care providers to improve the quality of their care.

Statewide, 3,921 child care providers participate in Early Achievers.

Approximately 72% of licensed child care providers in Thurston County are enrolled in Early Achievers. Early Achievers provides families with valuable child care program quality information so they can make informed child care choices.

Early Achievers (QRIS)
Participatio	n
Total	133
Child Care Centers	49
Family Child Care	76
Head Start & State Preschool Sites	8
Enrollment as of	3/8/18

Data Source: Data Source: Child Care Aware of Washington (2018). Thurston County Child Care Aware 2018 Demographics.

Thurston

Demographics	
Population ¹	
Total Population in 2017	276,900
Change since 2013	16,800
Children under 5 yrs	15,914
Children under 15 yrs	50,323
K-12 Enrollment ²	43,031
Economics	
% of children under 18	12%
living in poverty ³	1276
% of children under 6 w/	53.4 to 61.6%
all parents working ⁴	
Median Household Income ¹	\$61,676
Unemployment Rate⁵	4.3%

Monthly Cost of Child Care in 2017

Centers	Median Cost	75th Percentile Cost	State Subsidy Rate	Median Cost as a % of Median Income
Infant	\$997	\$1,083	\$827	19%
Toddler	\$867	\$974	\$710	17%
Preschool	\$769	\$867	\$620	15%
School Age	\$494	\$563	\$607	10%

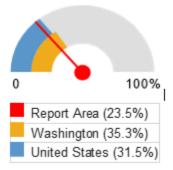
Family Child Care	Median Cost	75th Percentile Cost	State Subsidy Rate	Median Cost as a % of Median Income
Infant	\$750	\$849	\$722	15%
Toddler	\$702	\$777	\$628	14%
Preschool	\$628	\$696	\$589	12%
School Age	\$433	\$542	\$555	8%

Data Source: Child Care Aware of Washington (2018). Thurston County Child Care Aware 2018 Demographics.

Education Attainment

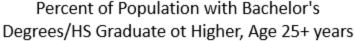
Education attainment is relevant because educational attainment has been linked to positive health outcomes. Lack of educational achievement effect access to care, employment, and a community's ability to engage in healthy behaviors.

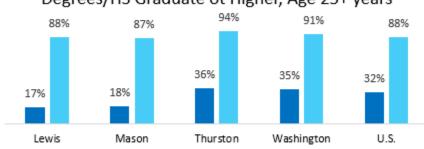
Percent Population Age 25+ with Bachelor's Degree or Higher



Data Source: Community Commons (2018).

The report area includes all counties within CACLMT service area combine. The graph indicates CACLMT's service area to be less than the state and national average for the population with a Bachelor's degree or higher. 23.5% of the population aged 25 and older, or 86,022 have obtained a Bachelor's level degree or higher.





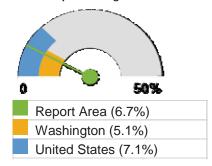
■ Bachelor's Degree or Higher ■ High School Graduate or Higher

Data Source: US Census Bureau, American Community Survey 5-Year Profiles. 2014-18.

Thurston maintains the highest percentage of population with HS graduates or college education compared to other counties and is slightly higher than the state percentage.

^{*}Figures rounded to nearest whole percent.

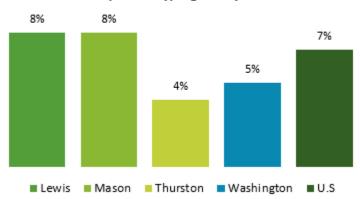
Percent Population Age 25+ with No HS



Data Source: Community Commons (2017).

Within CACLMT's service area (report area) there are 6.7% persons aged 25 and older without a high school diploma (or equivalency) or higher. This represents the total population within our service area-aged 25 and older is slightly larger than the state average. According to this indicator, our service area has a high percentage of persons with a high school diploma.

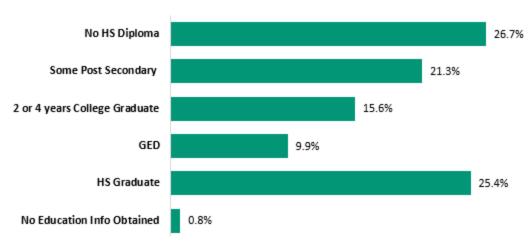
Percentage of Population with No HS diploma (or equivalency), Age 25+ years



Data Source: US Census Bureau, American Community Survey. 2014-18. 5-vear estimates. *Figures rounded to nearest whole percent.

Lewis and Mason Counties have highest percent of population without a High School Diploma or equivalent. Thurston county has the lowest percentage out of all the counties and falls below the state and U.S. rate. All counties compare similarly with the overall state and U.S. percent.

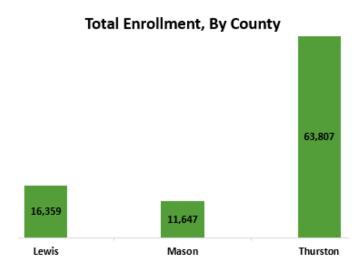
CACLMT Client Education Level



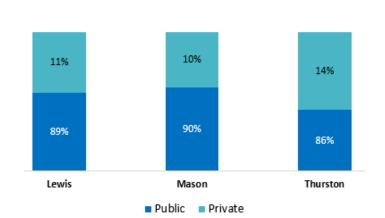
Data Source: Client data from CACLMT for 2019-20 fiscal year.

Out of 7,638 client education data, CACLMT clients average a 25.4% High School graduation rate, however, it should be noted that not all client education data was recorded to represent the client served for the 2019-20 fiscal year. A small percentage at 9.9% of CACLMT clients received their GED certificate, while 26.7% did not obtain their High School diploma.

Enrollment, Graduation, and Dropout Rate by County



School Enrollment (Overall), By County

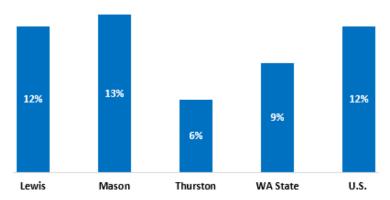


Data Source: US Census Bureau, American Community Survey. 2019.

Data Source: US Census Bureau, American Community Survey. 2019.

Thurston county has the highest total enrollment at 63,807 students with a public-school enrollment of 86% and a private school enrollment of 14%. Lewis county has a total enrollment of 16,359 students, with a public-school enrollment of 89% and a private school enrollment of 11%. Mason county has the lowest total enrollment at 11,647 students with a public-school enrollment of 90% and a private school enrollment of 10%. It is important to note homeschool and non-enrollment is not represented within this data.

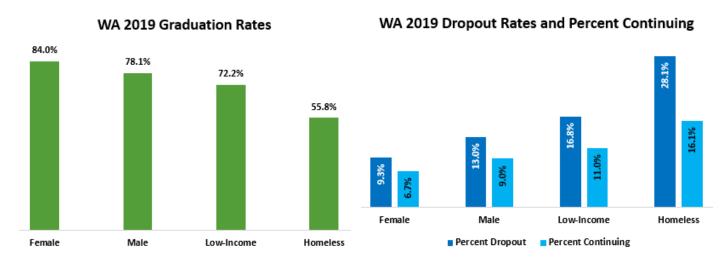
Dropout Rates 2019, By County



Data Source: US Census Bureau, American Community Survey. 2019.

Mason county has the highest dropout rate which also exceeds the state and U.S. rates. Lewis county has the second highest dropout rate which falls in line with the U.S. rate and exceeds the state rate by 3%. Thurston county has the lowest dropout rate and falls below the state and U.S. rate.

State Graduation and Dropout Rates



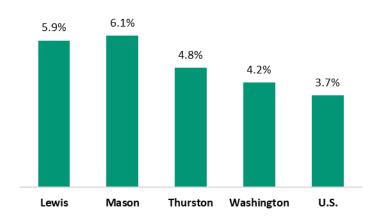
Data Source: Office of the Superintendent of Public Instruction (OSPI), 2019, U.S. Department of Education.

Graduation rates for 2019 indicate females have a higher graduation compared to males, low-income, and homeless individuals. Dropout rates for 2019 indicate homeless individuals have the highest rate at 28.1%, followed by low-income individuals at 16.8%, followed by males at 13%, and the lowest rate is females at 9.3%. Percent continuing education rates for 2019 indicate homeless individuals have the highest rate at 16.1%, followed by low-income individuals at 11%, followed by males at 9.0%, and the lowest rate is females at 6.7%

Employment/Income

Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

Unemployment Rate, by County, State & National, 2019



In 2019, all counties reported a higher unemployment rate compared to the statewide and national rate. Lewis and Mason counties reported the highest unemployment rate, with Thurston following close behind.

Data Source: US Department of Labor, Bureau of Labor Statistics. 2019 - July. *Not seasonally adjusted

Lewis

Annual average unemployment in Lewis County has been declining since the 13.3 percent rate posted in 2009. In 2019 that streak ended, as unemployment rose from 6.3 percent in 2018 to 6.5 percent in 2019. In 2017 the rate was 6.6 percent.

Since 2014, the labor force in the county has steadily grown, up nearly 4,000 above 2014 totals. This gain in the labor force may indicate a continued faith in the local economy as well as a more positive job market (Employment Security

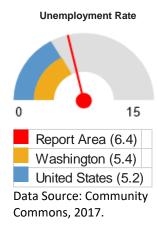
Mason

Compared to the 2010 high of 11.9 percent, the county has had declining unemployment rates. The 2019 rate was 6.6 percent. The 2018 average annual rate was 6.3 percent.

The labor force has been above 23,000 since 2011 on an average annual basis but remains below the 25,549 total for 2009. The 2019 data showed a slight increase in this metric, averaging 24,971 (Employment Security Dept. 2020).

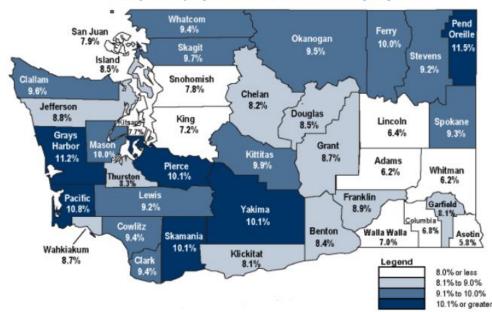
Thurston

The year 2019 continued the run of positive news for the Thurston County economy. The unemployment rate has remained low and nonfarm payrolls expanded consistently over the year. Government employment in the county has remained steady and strong with no reason to see this trend not continuing into 2020. Ground has been broken on many new projects, including a craft brewing and retail sector in Tumwater, which will include craft brewing space, distillery space and South Puget Sound Community College classrooms, as it launches new craft brewing and distillery classes. The general tone of this data supports a belief in continued prosperity as we march into 2020 (Employment Security Dept. 2020).



The unemployment rate clearly indicates a concern that CACLMT service area (report area) is higher than the state and national average.

August 2020 County unemployment rates, not seasonally adjusted



Data Source: Washington State Employment Security Department (2020). Monthly Employment Report.

Employment by Age and Gender

Lewis

In 2018, the largest job holder age group in Lewis County was the 55 and older age category, making up 25.9 percent of employment across all industries. The next largest share was among people age 35 to 44 with 21.0 percent of employment.

Females made up 48.3 percent of the labor force in Lewis County with males making up the difference at 51.7 percent in 2018. Men were more often represented in higher paying industries (Employment Security Dept. 2020).

Mason

In 2018, the largest job holder age group in Mason County was the 55 and older age category, making up 25.4 percent of employment across all industries. The next largest share was among people aged 25 to 34 with 21.2 percent of employment.

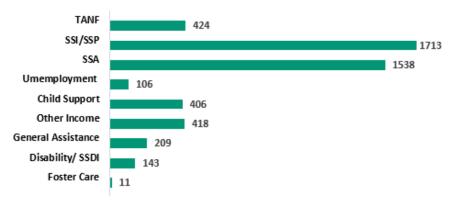
Females made up 50.7 percent of the labor force in Mason County with males making up the difference at 49.3 percent in 2018. Men were more often represented in higher paying industries (Employment Security Dept. 2020).

Thurston

In 2018, the two largest employed age categories were those 35 to 44 years old with 22.4 percent of the jobs, and those 55 and older with 24.6 percent of the jobs.

Men held 46.7 percent of the jobs in the county and women held 53.3 percent of jobs in 2018 (Employment Security Dept. 2020).

CACLMT Household Public Benefits Source

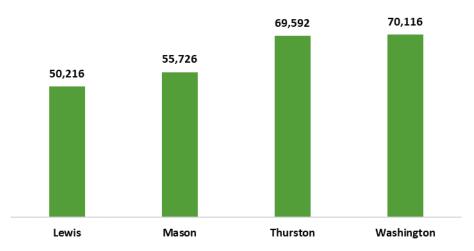


Approximately 63 percent of CACLMT family households rely on public assistance and approximately 37 percent of households report having one or more sources of income.

Data Source: CACLMT 2019-2020 Fiscal Year Client Data.

The above graph data illustrates public benefit numbers per household, not per client. Supplemental Security Income/State Supplementary Payment (SSI/SSP) and Social Security (SSA) rank as highest benefit source for family households. A total of 1,713 households receive SSI/SSP benefits and 1,538 households receive SSA benefits as their income. The next highest ranked benefit source is Temporary Assistance for Needy Families (TANF). A total of 424 households receive TANF benefits.

Median Household Income by County and State



Both Thurston and Mason counties have the highest median household income compared to Lewis county, but do not surpass the statewide rate.

Data Source: 2014-2018 American Community Survey 5-year Estimates.

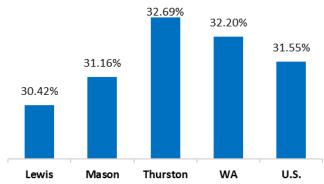
Housing

Cost burden

Housing cost is an essential component for all communities, as the high cost of renting or mortgage payments can push households into poverty. Additionally, households who spend the majority of income on housing costs may not have enough to afford other basic necessities.

A standard principal indicates households should devote no more than 30 percent of their income to housing. For instance, in Olympia, approximately 52 percent of households are overburdened (making less than \$3,173 a month and renting at or above the median rent), rental assistance programs are scarce, and even waitlists to access federal Section 8 vouchers can be as long as two years, according to the Housing Authority of Thurston County.

Percentage of Overall Cost Burdened Households (over 30% of income)



All counties reported a 30-32 percent range of cost burdened households which compare to the national and state rate.

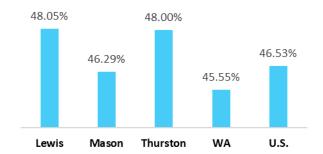
In graphs below, Thurston and Lewis counties have the highest percentage of cost burdened rental households, while Mason County has the highest percentage of cost burden in owner households.

Graph Data Source: Community Commons (2017). Custom community health needs assessment report courtesy of community commons CHNA indicator report, US Census Bureau, American Community Survey. 2001-2015.

Percentage of Owner occupied Households w/Morgages that are Cost Burdended



Percentage of Rental Households that are Cost Burdended



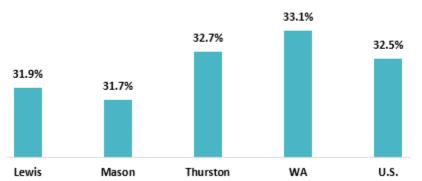
Data Source: Community Commons. Custom community health needs assessment report courtesy of community commons CHNA indicator report, US Census

Bureau, American Community Survey. 2014-2018

Substandard Housing

This data illustrates the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1.01 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%. Selected conditions provide information in assessing the quality of the housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard (Community Commons, 2017).

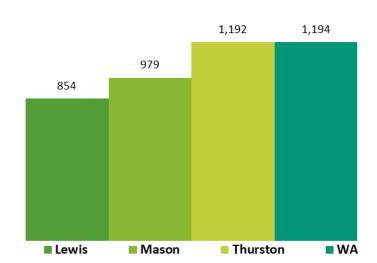
Percent Occupied Housing Units with One or more Substandard Conditions



Data Source: US Census Bureau, American Community Survey, 2014-2018.

All counties are at or 1% below state and national average for percentage of substandard conditions. However, substandard housing remains a large concern for many communities our organization services.

Median Gross Rent



Data Source: US Census Bureau, American Community Survey. 2014-2018.

The nation experienced an overall average increase of \$21 in median gross rent according to statistics released from the 2012-2016 American Community Survey (ACS) fiveyear estimates, compared to 2007-2011 ACS five-year estimates results, which have been adjusted for inflation. Gross rent is the contract rent plus the estimated average monthly cost of utilities (electricity, gas, and water and sewer) and fuels (oil, coal, kerosene, wood, etc.) if these are paid by the renter (or paid for the renter by someone else). (Community Commons, 2017).

Thurston County has the highest median gross rent and falls in line with the state average, while Mason and Lewis counties fall below the state average.

Area Median Income (AMI)

Affordable housing program eligibility is always determined by one's income. Each household's income is compared to the incomes of all other households in the area. This is accomplished through a statistic established by the government called the Area Median Income, most often referred to as AMI. The AMI is calculated and published each year by HUD.

Lewis County:

Income and Rent Overburden in Lewis County

The median gross income for households in Lewis County is \$44,100 a year, or \$3,675 a month. The median rent for the county is \$801 a month.

Households who pay more than thirty percent of their gross income are considered to be Rent Overburdened. In Lewis County, a household making less than \$2,670 a month would be considered overburdened when renting an apartment at or above the median rent. Approximately 49.88% of households who rent are overburdened in Lewis County.¹

In Lewis County, HUD calculates the Area Median Income for a family of four as \$63,400.

There are 24 low income housing apartment complexes which contain 1,379 affordable apartments for rent in Lewis County, Washington. Many of these rental apartments are income-based housing with about 655 apartments that set rent based on income. Often referred to as "HUD apartments", there are 724 subsidized apartments in Lewis County.

Lewis County, WA Affordable Housing	Snapshot
Total Affordable Apartment Properties	24
Total Low Income Apartments	1,379
Total Housing Units with Rental Assistance	655
Percentage of Housing Units Occupied By Renters	32.62%
Average Renter Household Size	2.50
Average Household Size	2.52
Median Household Income	\$44,100 ±\$1,437
Median Rent	\$801 ±\$23
Percentage Of Renters Overburdened	49.88% ± 3.3pp
Total Population	75,515

Data Source: https://affordablehousingonline.com/housing-search/Washington/Lewis-County#guide. 2010 Census and 2015 5-Year American Community Survey.

¹ Margin of Error: ± 3.3 percentage points.

Mason County:

Income and Rent Overburden in Mason County

The median gross income for households in Mason County is \$50,406 a year, or \$4,201 a month. The median rent for the county is \$884 a month.

Households who pay more than thirty percent of their gross income are considered to be Rent Overburdened. In Mason County, a household making less than \$2,947 a month would be considered overburdened when renting an apartment at or above the median rent. Approximately 51.59% of households who rent are overburdened in Mason County.¹

The HUD funded Public Housing Agency that serves Mason County is the <u>Bremerton Housing Authority</u>. In Mason County, HUD calculates the Area Median Income for a family of four as \$60,500.

There are 11 low income housing apartment complexes which contain 493 affordable apartments for rent in Mason County, Washington. Many of these rental apartments are income-based housing with about 400 apartments that set rent based on income. Often referred to as "HUD apartments", there are 93 subsidized apartments in Mason County.

Mason County, WA Affordable Housing Snapshot

Total Affordable Apartment Properties	11
Total Low Income Apartments	493
Total Housing Units with Rental Assistance	400
Percentage of Housing Units Occupied By Renters	23.05%
Average Renter Household Size	2.82
Average Household Size	2.58
Median Household Income	\$50,406 ±\$2,362
Median Rent	\$884 ±\$36
Percentage Of Renters Overburdened	51.59% ± 6.41pp
Total Population	60,791

Data Source: https://affordablehousingonline.com/housing-search/Washington/Mason-County#guide. 2010 Census and 2015 5-Year American Community Survey.

¹ Margin of Error: ± 6.41 percentage points.

Thurston County:

Income and Rent Overburden in Thurston County

The median gross income for households in Thurston County is \$61,677 a year, or \$5,140 a month. The median rent for the county is \$1,054 a month.

Households who pay more than thirty percent of their gross income are considered to be Rent Overburdened. In Thurston County, a household making less than \$3,513 a month would be considered overburdened when renting an apartment at or above the median rent. Approximately 46.67% of households who rent are overburdened in Thurston County.¹

In Thurston County, HUD calculates the Area Median Income for a family of four as \$86,700.

There are 34 low income housing apartment complexes which contain 2,938 affordable apartments for rent in Thurston County, Washington. Many of these rental apartments are income-based housing with about 712 apartments that set rent based on income. Often referred to as "HUD apartments", there are 2,226 subsidized apartments in Thurston County.

Thurston County, WA Affordable Housing Snapshot

Total Affordable Apartment Properties	34
Total Low Income Apartments	2,938
Total Housing Units with Rental Assistance	712
Percentage of Housing Units Occupied By Renters	35.44%
Average Renter Household Size	2.41
Average Household Size	2.52
Median Household Income	\$61,677 ±\$1,071
Median Rent	\$1,054 ±\$19
Percentage Of Renters Overburdened	46.67% ± 2.38pp
Total Population	262,723

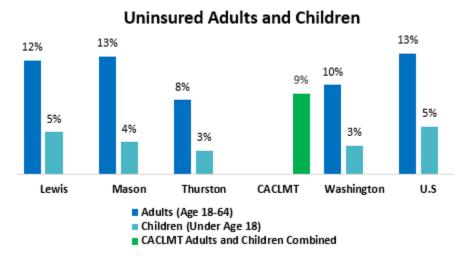
Data Source: https://affordablehousingonline.com/housing-search/Washington/Thurston-County#guide. 2010 Census and 2015 5-Year American Community Survey.

¹ Margin of Error: ± 2.38 percentage points.

Health

Includes overall health, Child Abuse, and Dental Health.

The lack of health insurance is considered a *key driver* of health status. The World Health Organization (WHO), identifies the determinants of health include the social and economic environment, social status, educational level, the physical environment, and a person's individual characteristics and behaviors status (WHO, 2017).

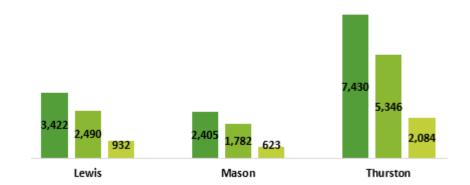


This graph reports the percentage of adults age 18 to 64 without health insurance coverage. This is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status (Community Commons, 2017).

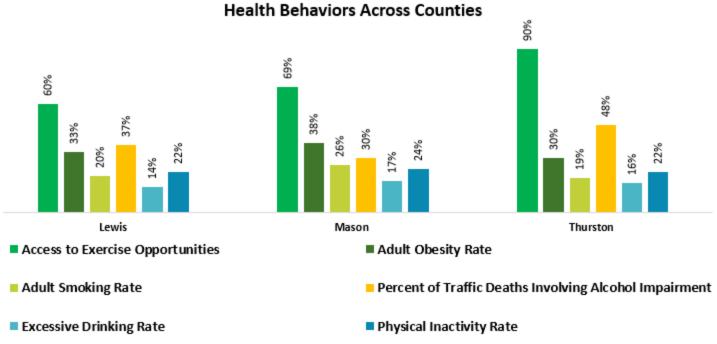
Data Source: Community Commons (2017). US Census Bureau, American Community Survey, Medicaid and Children's Health Insurance Program (CHIP), Community Commons, Small Area Health Insurance Estimates. 2015. CACLMT 2016-2017 fiscal year client data.

WIC Nutrition Program Data by County - Federal Fiscal Year 2019

Thurston County has the highest percent served by WIC. Mason County has the lowest percent served by WIC.



WIC Data Source: Washington Dept. of Health, Maternal and Child Health Data Reports, 2019.



Data Source: Centers for Disease Control and Prevention (2017). National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online].
*Figures rounded to the nearest whole percent.

Measuring morbidity and mortality rates allows assessing linkages between social determinants of health and outcomes. By comparing, for example, the prevalence of certain chronic diseases to indicators in other categories (e.g., poor diet and exercise) with outcomes (e.g., high rates of obesity and diabetes), various causal relationship may emerge, allowing a better understanding of how certain community health needs may be addressed (community Commons, 2017).

The adult obesity rate of Lewis County, WA was 33.1% in 2017. The adult obesity rate of Mason County, WA was 37.8% in 2017. The adult obesity rate of Thurston County, WA was 30.0% in 2017. The adult obesity rate of Washington state was 28.5% and the U.S. rate was 29.5% in 2017. All three counties exceed the state and U.S. adult obesity rates.

2017 Childhood Obesity in Washington State:

In Washington, 13.3% of children ages 2-4 years old and receiving WIC services were obese and the state ranked 28th in the country. Children ages 10-17 had an obesity rate of 11.9% and ranked 41st in the country. About 12 percent of 10th graders in WA public schools were obese (minority students of color continue to be at increased risk of overweight and obesity than white or Asian peers.

2017 Adult Obesity in Washington State:

About 29 percent of adults were obese. Adult obesity trends started to level off over the past few years, however there was a significant increase during 2014-2016, from 26 percent to 29 percent (during this time, males had a higher prevalence of obesity than females, BRFSS). Obesity rates are higher among lower income populations.

Obesity prevalence was lowest among adults ages 18-24. Black and Hispanic adults had higher rates of obesity than non-Hispanic whites and Asians.

Data Source: Centers for Disease Control and Prevention (2017). National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online].

*Behavioral Risk Factor Surveillance System (BRFSS). BRFSS is the nation's premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services [CDC, 2017].



Weatherization Assistance is an example of one CACLMT program which improves health benefits.

Weatherization increases overall health benefits related to asthma, allergies, stress, and carbon monoxide poisoning.

Data Source: Office of Energy Efficiency and Renewable Energy, 2017. Graphic by Sarah Harman, Dept. of Energy.

Studies show that weatherization improvements, such as air sealing, insulation, and improved heating and cooling equipment can reduce asthma and allergy triggers in the home. Weatherization can reduce residents' stress by strengthening energy affordability and their sense of security. After receiving weatherization services, residents reported sleeping better and demonstrated increased levels of energy. To help prevent carbon monoxide poisoning indoors, weatherization crews test furnaces and stoves for gas leaks and install alarms for smoke and carbon monoxide in the home (U.S. Department of Energy, Office of Energy Efficiency and Renewable Energy, 2017).

Adverse Childhood Experiences (ACEs)

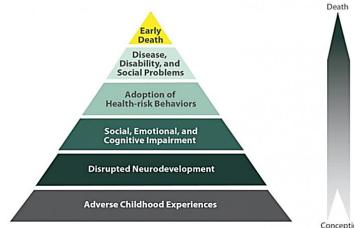
The ACE Pyramid represents the conceptual framework for the ACE Study. The ACE Study has uncovered how ACEs are strongly related to development of risk factors for disease, and well-being throughout the life course.

Childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue.

Adverse Childhood Experiences have been linked to:

- risky health behaviors,
- chronic health conditions,
- low life potential, and
- early death.

As the number of ACEs increases, so does the risk for these outcomes (Center for Disease Control and Prevention, 2017).



Mechanism by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

Data Source: CDC. gov. (2017). Retrieved from https://www.cdc.gov/violenceprevention/acestudy/about .html

IN THE LIVES OF WASHINGTONIANS:

ACEs ARE COMMON

1 or More ACE 62%

ACEs CO-OCCUR / CLUSTER

26% of adults report 3 or more ACEs

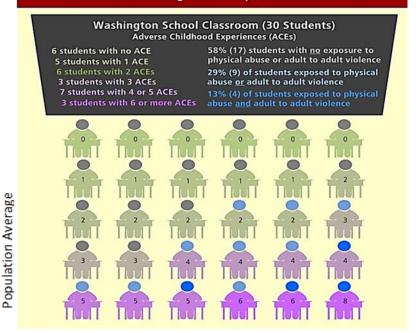
5% of adults have 6 or more ACEs

Among adults exposed to physical abuse, 84% reported at least 2 more ACEs

Among adults exposed to sexual abuse, 72% reported at least 2 more ACEs

Data Source: University of Washington, Northwest center for Public Health Practice (2011).

OLDER CHILDREN - High School Sophomores and Seniors



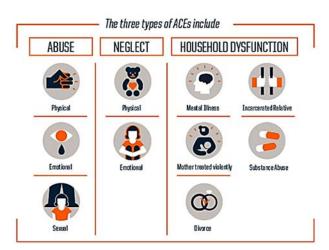
Data Source: University of Washington, Northwest center for Public Health Practice (2011).

Washington was one of the first states to add the ACE module to their Behavioral Risk Factor Surveillance System (BRFSS) in 2009 to assess the prevalence of ACEs in its adult population and inform prevention action.

ACEs Are Important Because:

- Negative childhood experiences are related to major risk factors for the leading causes of illness and death and poor quality of life among adults.
- ACEs are common among all segments of the population.
- ACEs are connected. People who report any ACE are likely to experience adversity in other categories.

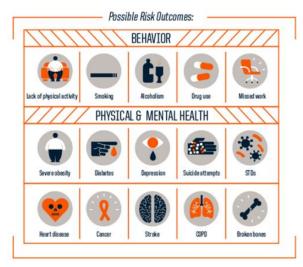
Source: CDC, Division of Violence Prevention, 2017. Retrieved from https://www.cdc.gov/violenceprevention/acestudy/pdf/ace_case_study_washington.pdf



Data Source: Truth about Aces, 2017. Retrieved from https://www.rwjf.org/en/library/infographics/the-truth-about-aces.html

Current data on ACE trends could not be either accessed or found for Washington State in the last few years. However, this information remains relevant as the ACEs study is on-going and provides a basis for critical examination into the health of communities.

ACEs are correlated to child abuse, please see below for child abuse data.



Data Source: Truth about Aces, 2017. Retrieved from https://www.rwjf.org/en/library/infographics/the-truth-about-aces.html

Child Abuse

Specific county data could not be found and statewide data remained inaccessible or highly outdated. The below information only contains national data for child abuse in 2018 compared with CACLMT 2019-20 Program numbers.

National Statistics on Child Abuse¹

In 2018, an estimated 1,770 children died of abuse and neglect at a rate of 2.39 per 100,000 children in the national population. ¹ This is an increase from 1,670 children that died from abuse and neglect in 2015. In 2019, Children's Advocacy Centers (CACS) around the country served more than 371,060² child victims of abuse, providing victim advocacy and support to these children and their families.

Nearly 700,000 children are abused in the U.S annually. Comparing the national rounded number of victims from 2014 (675,000) to the national rounded number of victims in 2018 (678,000) shows an increase of 0.4 percent.

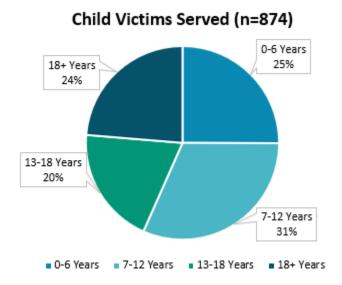
CPS protects more than 3 million children. The national rounded number of children who received a child protective services investigation response or alternative response increased 8.4 percent from 2014 (3,261,000) to 2018 (3,534,000).

The youngest children were most vulnerable to maltreatment. Children in the first year of their life had the highest rate of victimization of 24.2 per 1,000 children in the national population of the same age.

Neglect is the most common form of maltreatment. Data from 2018 shows more than four-fifths (84.5%) of victims suffer a single type of maltreatment. Sixty percent (60.8) are neglected only, 10.7 percent are physically abused only, and 7.0 percent are sexually abused only. More than 15 percent (15.5%) are victims of two or more maltreatment types.

About four out of five abusers are the victims' parents. A parent of the child victim was the perpetrator in 78.1% of substantiated cases of child maltreatment.

CACLMT Abuse Numbers, 2019-2020 Fiscal Year



Monarch Children's Justice and Advocacy Center, 2019-2020 Demographics

Client Demographics	# Clients
Male	211
Female	657
Trans	4
Non-Binary	2
Sexually Abused	809
Physically Abused	53
Neglected	4
Witness to Violence	8
Child Fatalities	0

NOTE: As a result of COVID-19 and schools transitioning to distance learning models, many abuse cases are not being reported. It is expected that once children return to school the numbers will see a dramatic increase due to children's interactions with safe adults who monitor the well-being of children: such as teachers, counselors, principals, and child care staff

¹ All national child abuse statistics cited from U.S. Administration for Children & Families, Child Maltreatment 2018. https://www.acf.hhs.gov/sites/default/files/cb/cm2018.pdf

² National Children's Alliance 2019 National Statistics. https://www.nationalchildrensalliance.org/wp-content/uploads/2020/02/Annual-2019-National-Statistics.pdf

Dental Health

Despite improvements in some measures, tooth decay continues to be a major health concern for children in Washington. County Specific data could not be found on oral health issues (Washington State Department of Health Smile Survey, 2015-2016).

The CACLMT WIC Program discusses oral health care, especially with pregnant mothers and bottle-fed toddlers.

With elementary children, decay experience is too high and disparities are significant. Large gaps exist by income, race and ethnicity, and language spoken at home (Washington State Department of Health Smile Survey, 2015-2016).

Decay Experience

- More than four out of every 10
 Head Start and ECEAP preschoolers
 (45 percent) had experienced tooth decay.
- Nearly half of those experiencing decay (21 percent overall) had rampant decay (with seven or more teeth affected).
- By the third grade, children from low-income households had at least 60 percent higher rates of decay experience in all categories.

Dental Health Resources

THURSTON COUNTY, DSHS ACCEPTED, CHILDREN TO AGE 18

Smiles 4 Kids 360-491-1414

ABCD-Thurston County 360-709-3070

SeaMar Dental 360-570-8016

Dr. Harold Holm 360-943-9260

Capital Dentistry 360-754-9300 (ABCD Program)

Dr. Danny Davidson 360-943-5775 (3 Years and Under)

Dr. Chuck Fankhauser 360-943-5639 (Ages 5-18)

Premier Dental 360-456-7628 (Ages 18 and Under)

Oral Health Disparities

- Compared with white children, children of Hispanic and Asian descent had much higher rates of decay experience, and American Indian/Alaskan Native children had more than double the rates of untreated decay.
- Children of color in second and third grades had significantly higher rates of decay experience and 40 to 180 percent higher rates of treatment need than white children.
- Kindergarten and third-grade children whose primary language spoken in the home was not English had more than a 50 percent higher rate of treatment need than Englishonly speakers.

MASON COUNTY, DSHS ACCEPTED, CHILDREN TO AGE 18

ABCD-Mason County 360-427-9670

Dr. Patrick Kwong 360-426-2631 (5 Years and Under)

Kamilchi Dental 360-427-1784 (12 Years and Up)

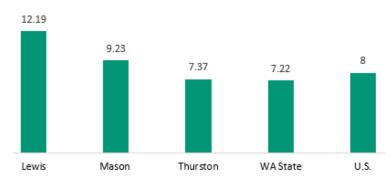
Community Dental Clinic 360-427-9670

Dr. Duane Moore 360-342-0526 (Ages 18 and Under)

Food Security

Food insecurity is often associated with poor health and poverty, which affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

2020 SNAP-Authorized Food Stores, Per 10,000 Population



Data Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Additional data analysis by CARES. 2020. Source geography: Tract

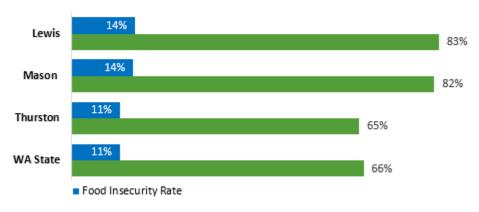
Thurston County has lowest rate of SNAP authorized retailers per 10,000 population in comparison to other service areas. All counties exceed the state and U.S. rates.

Each October, the federal government makes adjustments to SNAP maximum allotments, deductions, and income eligibility standards. These changes are a result of the cost-of-living adjustments (COLA). For fiscal year 20 SNAP benefit levels for minimum monthly allotment benefit is increasing from \$15 to \$16. The maximum benefit for one person is increasing from \$192 to \$194. This very small increase will largely impact those with no income who receive the maximum benefit amount and elderly/disable households who receive the minimum benefit amount (United States Department of Agriculture, Food and Nutrition Service, 2019).

SNAP offers nutrition assistance to millions of eligible, low-income individuals and families and provides economic benefits to communities. SNAP is the largest program in the domestic hunger safety net. The Food and Nutrition Service (FNS) works with State agencies, nutrition educators, and neighborhood and faith-based organizations to ensure that those eligible for nutrition assistance can make informed decisions about applying for the program and can access benefits. FNS also works with State partners and the retail community to improve program administration and ensure program integrity (United States Department of Agriculture, Food and Nutrition Service, 2019).

Food insecurity is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs. Additionally, when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment (Community Commons, 2017).

Food Insecurity Overall, 2018

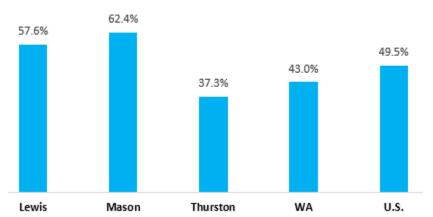


 Likely income eligibility for Federal Nutrition Assistance: % below 200% poverty (SNAP, WIC, free school meals, CSFP, TEFAP)

Data Source: Feeding America (2018). Map the Meal Gap mapping tool. *Figures rounded to nearest whole percent.

Lewis and Mason Counties have the highest percentage of food insecurity at 14 percent compared to Thurston county and statewide which are at 11 percent.

Children Eligible for Free/Reduced Price Lunch



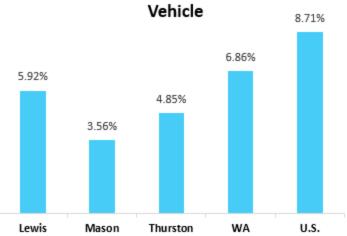
Data Source: National Center for Education Statistics, NCES - Common Core of Data. 2018-19.

Within Lewis, Mason, and Thurston Counties 28,855 public school students or 44.5% are eligible for Free/Reduced Price lunch out of 64,783 total students enrolled.

Transportation

The transportation system shapes community and city density. Transportation modes are highly dependent on density, and the ability to own a vehicle has a major impact on employment factors and ability to access other necessities, such as food, schools, etc. and social services and healthcare facilities. Below certain levels of density, many kinds of mass transit aren't economically feasible for communities.

Percentage of Households without a Motor

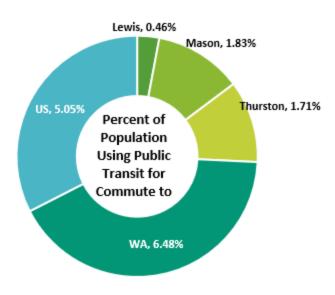


Data Source: US Census Bureau, American Community Survey. 2014-18.

Lewis and Thurston County have the highest percentage of households without a vehicle. This may indicate households are commuting by different means to work or may also work in close proximity to home. Mason County has the lowest percentage of households without a vehicle. The state and U.S. rates exceed CACLMT service areas.



Data Source: US Census Bureau, American Community Survey. 2014-18.



Data Source: US Census Bureau, American Community Survey. 2014-18.

An Example of Commute Trends for Thurston County:

Mode Split—Currently, most Thurston County residents drive alone to work (78%), followed by carpooling (10%). Only 3% walk or bike and 2% ride the bus.

Travel Time—Travel time to work for the region's residents increased over the last 20 years. In 1990, 46% of residents experienced 20 minute or longer commutes. By 2012–2016, this share increased to 55%.

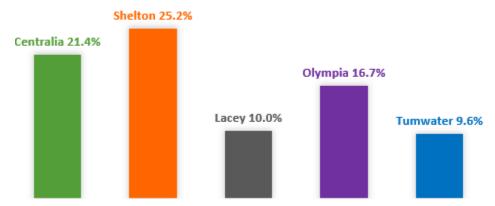
The bulk of the increase in commute lengths has occurred in trips that last over 30 minutes. Commutes longer than 30 minutes increased from 23% of the trips in 1990 to 32% of the total trips in the 2012–2016 period (U.S. Bureau of the Census: American Community Survey).

Travel time to work can show how far residents have to commute for available jobs. In more rural areas such as Mason, the commute is longer, which may indicate residents having to drive farther either out of county for employment or possible high traffic congestion within counties.

Poverty

Poverty affects access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community. Poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Persons in Poverty, in Top 5 Cities for Lewis, Mason, and Thurston Counties



Centralia and Shelton have the highest poverty level (below 100 percent) compared to the other top cities.

Source: 2014-2018 American Community Survey 5-Year Estimates.

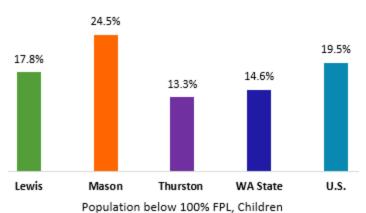
Population Below 100% Poverty Level, By County

Individuals in Lewis and Mason County have the highest poverty level (below 100 percent) exceed the state and U.S. rate. Thurston county has the lowest poverty level and is lower than the state and U.S. rates.



Source: 2014-2018 American Community Survey 5-Year Estimates.

Percentage Population Under Age 18 in Poverty



Data Source: US Census Bureau, American Community Survey. 2014-18.

Individuals under age 18 in Lewis and Mason County have the highest poverty level (below 100 percent) compared to Thurston. Mason county exceeds both the state and U.S. rates. While Lewis county exceeds the state rate but falls below the U.S. rate. Thurston county has the lowest rate and falls below both the state and the U.S. rates.

About 15 million children in the United States – **21% of all children** – live in families with incomes below the federal poverty line, a measurement that has been shown to underestimate the needs of families.

Research shows that, on average, families need an income of about twice that level to cover basic expenses. Using this standard, 43% of children live in low-income families.

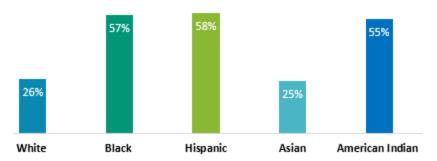
Poverty affects children's socioemotional development

Peer Group – Poor children are more likely to experience peer rejection and children who are isolated from mainstream groups.

School – Poor children are more likely to attend schools with fewer resources and low achieving and poor-behavior classroom environments can increase children's behavior problems (psychological distress).

Child Characteristics – Poor children who have genetically predisposing health risks are vulnerable; sex, temperament and undernutrition are important factors for assessment considerations.

Children in Low-Income Families, in WA, by Race/Ethnicity, 2018



Data Source: National Center for Children in Poverty Washington Demographic Profiles (nccp.org).

Hispanic and Black children are among the highest percentage in low-income families compared to other race populations.

Generally, minority Races/Ethnicities are more likely experience poverty and be in low-income families.

Homeless Population

Washington State Overall- Past

Housing prices are increasing more rapidly than incomes both nationally and in Washington, which is affecting the gains our state has made since 2006 to reduce homelessness (Washington State Affordable Housing Advisory Board). As rents and home prices continue to increase, financial challenges that contribute to homelessness are forecasted to continue.

Due in large part to the historic increases in the cost of housing, the number of people experiencing homelessness in Washington increased for the third year in a row. The prevalence (per-capita) of homelessness in the state also increased for the third year in a row. Although the overall prevalence of homelessness in Washington is down more than 17 percent over the last 10 years, the recent increases in homelessness are concerning (Dept. of Commerce, 2016, annual report on homelessness in Washington State).

Important Points

- Point-in-time counts tallied 7.3 percent more homeless people in Washington state this year than in 2015, according to an annual U.S. Department of Housing and Urban Development report released Thursday.
- Washington's counts showed an increase of 1,408 people sleeping outside and in shelters the country's second-largest bump behind California. The state's total number was 20,827.
- Thirteen states saw increases from 2015 to 2016. In seven, including Washington, at least half the people counted were sleeping without shelter. Washington's number this year was smaller than in 2010 but larger than in 2007, according to the report.
- The Washington state counts were carried out in seven areas: Seattle-King County, Everett-Snohomish County, Tacoma-Pierce County, Spokane, Yakima, Vancouver-Clark County and the rest of Washington its smaller, more rural communities.
- Homelessness has grown since 2010 in Seattle-King County, while dropping in the other six areas, according to
 the counts. The counts are estimates and are carried out differently in different areas.

Washington State Overall- Present

While housing starts are at a 13-year high in fast-growing areas of Washington, affordability remains a problem for most households. In 2019, despite increased permitting activity, housing affordability worsened throughout the state by 10%. For low and extremely low-income households, the situation is much more dire. Twenty-two percent of Washington renters (234,362 households) are extremely low-income, and there is a deficit of 165,345 units that are both affordable and available to them.²

2019 Policy Actions as recommended by Department of Commerce and the Affordable Housing Advisory Board (AHAB)

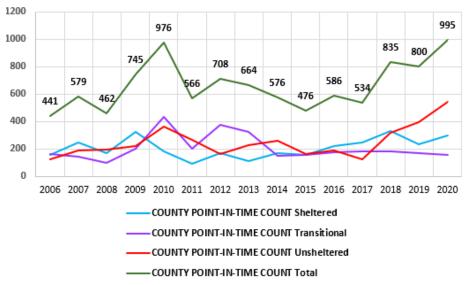
- 1. Expand housing choices for low and moderate-income households.
- 2. Authorize effective tools to help local governments reach appropriate housing goals.
- 3. Substantially increase the number of units specifically affordable to low and extremely low-income households through increased state funding for subsidized housing.

¹ Most of the increase in housing construction occurred in King and Pierce Counties. Center for Real Estate Research, Housing Market Report Q2, 2019, http://realestate.washington.edu/wp-content/uploads/2019/09/2019Q2WAHMR.pdf.

² National Low Income Coalition, Out of Reach 2019: Washington State, https://reports.nlihc.org/oor/washington.

Thurston County Homeless Census

Thurston County Overall Point-In-Time Count



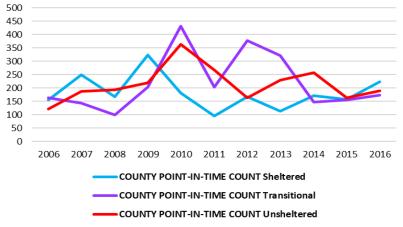
Data Source: Thurston County Public Health and Social Services (2020).

The 2020 Thurston County homeless census found that 995 individuals were homeless or lived in emergency or transitional housing. This total is significantly increasing since 2015 when there were 476 homeless individuals. Several reasons may account for the increase in homelessness such as a lack in new housing resources, changes in economy, changes in the census methodology, non-cooperation of some homeless populations, and among many other factors. The largest increases were seen been 2017-2018 and 2019-2020.

Of the homeless population, approximately 32% were unsheltered (or living in places not meant for human habitation such as cars, tents, parks, sidewalks, abandoned buildings, or on the street) in 2016.

The number of homeless public-school students fell for the first time in the 2015-2016 school year since the 2011-2012 school year. The number of homeless public-school students in the 2015-2016 school year (1,521) fell 14% from the previous school year (1,776). Most of the decrease is attributed to the Olympia and Tumwater school districts.

Thurston County School-Aged Homeless



Data Source: Thurston County Public Health and Social Services (2016).

This data represents a slight 2% or a 36 student increase from 2016-17 to

2017-18, and 583 more students and a 66% increase since 2011-12.

Thurston County Homeless Students 2008 - 2018



Data Source: Thurston County Public Health and Social Services (2016).

Poverty and Root Causes

Understanding the depth of economic hardship

Economic hardship can create barriers to opportunity and the resources necessary to live a long and healthy life. As a result, low-income communities often face more adversity and become entwined in generational cycles of poverty.

Federal Poverty Level (FPL)

FPL is a measure of income issued every year by the Department of Health and Human Services (HHS). Federal poverty levels are used to determine your eligibility for certain programs and benefits, including savings on Marketplace health insurance, and Medicaid and CHIP coverage.

The 2020 federal poverty level (FPL) income numbers below are used to calculate eligibility for Medicaid and the Children's Health Insurance Program (CHIP). 2019 numbers are slightly lower, and are used to calculate savings on Marketplace insurance plans for 2020 (HealthCare.gov).

How federal poverty levels are used to determine eligibility for reduced-cost health coverage

- **Income between 100% and 400% FPL:** If your income is in this range, in all states you qualify for premium tax credits that lower your monthly premium for a Marketplace health insurance plan.
- **Income below 138% FPL:** If your income is below 138% FPL and your state **has** expanded Medicaid coverage, you qualify for Medicaid based only on your income.
- Income below 100% FPL: If your income falls below 100% FPL and your state hasn't expanded Medicaid coverage, you won't qualify for either income-based Medicaid or savings on a Marketplace health insurance plan. You may still qualify for Medicaid under your state's current rules. (HealthCare.gov).

2020 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRIC	T OF COLUMBIA
PERSONS IN FAMILY/HOUSEHOLD	POVERTY GUIDELINE
For families/households with more than 8 persons, add \$4,480 for	each additional person.
1	\$12,760
2	\$17,240
3	\$21,720
4	\$26,200
5	\$30,680
6	\$35,160
7	\$39,640
8	\$44,120

Data Source: U.S. Department of Health & Human Services. Office of The Assistant Secretary for Planning and Evaluation (2020).

Poverty is often defined as a lack of necessities, basic food, shelter, medical care, and safety. However, what is a necessity to one person is not uniformly a necessity to another, which means needs may be relative. Research suggests that, on average, families need an income of about twice the federal poverty threshold to meet their most basic needs. Food insecurity, lack of affordable housing, and other hardships affects many children, adults, and families; not just those who are considered poor.

5 Theories of Poverty:

- 1. Poverty caused by individual Challenges
- 2. Poverty caused by Cultural-Belief systems that support Sub-Cultures of poverty
- 3. Poverty caused by Economic, Political, and Social Distortions or Discrimination
- 4. Poverty caused by Geographical Disparities
- 5. Poverty caused by Cumulative and Cyclical Interdependencies (Source: Bradshaw, T. (2007).

Cost of living

Thurston County Overview

Cost of living indices are based on a U.S. average of 100. An amount below 100 means the county being examined is cheaper than the US average. A cost of living index above 100 means the county being examined is more expensive.

Lewis County, Washington cost of living is 93. This means Lewis County's cost of living is less expensive than the US average.

Mason County, Washington cost of living is 102.5. This means Mason County's cost of living is more expensive than the US average.

Thurston County, Washington cost of living is 107.9. This means Thurston County's cost of living is more expensive than the US average.

Housing is considered the biggest factor in the cost of living difference. The median home price in Lewis is \$235,000. The median home price in Mason is \$275,800. The median home price in Thurston is \$320,300.

Cost of Living	Lewis	Mason	Thurston	WA State	U.S.
Overall	93	102.5	107.9	118.7	100
Grocery	99.1	100.5	100.6	101.1	100
Health	80.2	96.1	82.2	83.8	100
Housing	101.6	119.3	138.5	164.9	100
Utilities	68.9	71.2	72.9	74	100
Transportation	90.8	99.3	99.8	113.6	100
Miscellaneous	95.8	97.8	101.1	99.4	100

Data Source: Sperlings Best Places (2020).

Below are what is included in Cost of Living categories:

Grocery: The average cost of food in Grocery stores in an area.

Health: The average cost of health care calculated using the standard daily rate for a hospital room, and the costs of a doctor's office visit and a dental checkup.

Housing: The average cost of an area's housing, which includes mortgage payments, apartment rents, and property tax. **Utilities:** The average cost of heating or cooling a typical residence for the area, including electricity and natural gas. **Transportation:** The average cost of gasoline, car insurance and maintenance expenses, and mass transit fare for the

area. The cost of the vehicle and any vehicle registration and license taxes are not included.

Miscellaneous: The cost index of those goods and services not included in the other cost of living categories, including clothing, restaurants, repairs, entertainment, and other services.

The total of all the cost of living categories weighted subjectively as follows: housing (30%), food and groceries (15%), transportation (10%), utilities (6%), health care (7%), and miscellaneous expenses such as clothing, services, and entertainment (32%). State and local taxes are not included in any category. Updated: September, 2019.

Living Wage

According the Department of Urban Studies and Management at MIT (2020), the living wage is defined as the wage needed to cover basic family expenses (basic needs budget) plus all relevant taxes. Values are reported in 2020 dollars. To convert values from annual to hourly, a work-year of 2,080 hours (40 hours per week for 52 weeks) per adult is assumed. The basic needs budget and living wage are calculated as follows: Basic needs budget = Food cost + childcare cost + (insurance premiums + health care costs) + housing cost + transportation cost + other necessities cost AND Living wage = Basic needs budget + (basic needs budget*tax rate).

Living Wage Calculation for Lewis, Mason, and Thurston Counties, Washington

The living wage shown is the hourly rate that an **individual** in a household must earn to support his or herself and their family. The assumption is the sole provider is working full-time (2080 hours per year). The tool provides information for individuals, and households with one or two working adults and zero to three children. In the case of households with two working adults, all values are **per working adult, single or in a family** unless otherwise noted.

Living Wage Calculation for Lewis County, Washington

		1 A	DULT				DULTS DRKING)				OULTS WORKING)	
	0 Children	1 Child	2 Children	3 Children	0 Children	1 Child	2 Children	3 Children	0 Children	1 Child	2 Children	3 Children
Living Wage	\$10.62	\$23.79	\$28.94	\$36.38	\$17.50	\$21.64	\$24.17	\$27.89	\$8.75	\$1 3.25	\$15.80	\$18.95
Poverty Wage	\$6.00	\$8.13	\$10.25	\$12.38	\$8.13	\$10.25	\$12.38	\$14.50	\$4.06	\$5.13	\$6.19	\$7.25
Minimum Wage	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00

Data Source: Dept of Urban Studies and Management at MIT (2020).

Living Wage Calculation for Mason County, Washington

		1 A	DULT				DULTS DRKING)				OULTS WORKING)	
	0 Children	1 Child	2 Children	3 Children	0 Children	1 Child	2 Children	3 Children	0 Children	1 Child	2 Children	3 Children
Living Wage	\$11.02	\$24.41	\$29.56	\$36.74	\$18.15	\$22.26	\$24.80	\$28.25	\$9.07	\$1 3.56	\$16.11	\$19.12
Poverty Wage	\$6.00	\$8.13	\$10.25	\$12.38	\$8.13	\$10.25	\$12.38	\$14.50	\$4.06	\$ 5.13	\$6.19	\$7.25
Minimum Wage	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00

Data Source: Dept of Urban Studies and Management at MIT (2020).

Living Wage Calculation for Thurston County, Washington

		1 A	DULT				DULTS DRKING)				DULTS WORKING)	
	0 Children	1 Child	2 Children	3 Children	0 Children	1 Child	2 Children	3 Children	0 Children	1 Child	2 Children	3 Children
Living Wage	\$12.74	\$25.39	\$30.54	\$39.15	\$19.11	\$23.24	\$25.78	\$30.66	\$9.55	\$14.05	\$16.60	\$20.33
Poverty Wage	\$6.00	\$8.13	\$10.25	\$12.38	\$8.13	\$ 10.25	\$12.38	\$14.50	\$4.06	\$5.13	\$6.19	\$7.25
Minimum Wage	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00

Data Source: Dept of Urban Studies and Management at MIT (2020).

Assessment Key Findings

- Individual and systemic barriers are key factors for those in poverty to move beyond generational cycle of poverty.
- Feedback from 2019 Annual Client Survey highlighted biggest problems and most needed services are adequate finances, heat/utilities, employment, health, affordable housing, lack of food, and transportation.
- Community Stakeholder survey highlighted biggest problems facing adults were mental health and affordable housing. The biggest problems for youth were mental health, substance abuse, and lack of skill building opportunities.
- Overall needed services identified by stakeholders were affordable housing, mental health services, homeless services/shelters, and help for those that cannot pay their rent or mortgage (report was strictly stakeholder perceptions).
- Key Findings highlighted CACLMT primary service areas (Lewis, Mason, and Thurston).
- Lewis and Mason Counties appear to have the highest disadvantage overall, including the highest percentage of
 individual and household poverty level.

SECTOR SPECIFIC KEY FINDINGS

POPULATION pg # 19-21
 Population in all three counties is steadily increasing.
 Black/African American and Hispanic/Latino populations are increasing. More bilingual services may be needed to accommodate language barriers needs.
 Concrete data could not be found for undocumented persons within counties.
AGE/GENDER24-26
 Median age for counties is between 30-40 years, however the elderly population has significantly increased from 2010-2019.
 CACLMT's largest age groups served are clients between the ages of 24-44 years and 0-5 years.
 There is almost a 50/50 percent divide between female and male population in counties overall, with CACLMT serving more females at approximately 57 percent.
FAMILY STRUCTURE
 The highest percentage of families with children are located in Thurston and Lewis Counties.
 Mason and Lewis have the highest teen birth rate compared to Thurston County.
 CACLMT serves majority of 2-parent households with single female parents as the next highest household type.
CHILD CARE
 The capacity for child care centers has dropped from 2014-2018 for Lewis, Mason, and Thurston Counties. The median cost of child care centers and family child care are more costly in Thurston County than Lewis and Mason Counties which could be due to factors related to higher cost of living and accessibility.
EDUCATION ATTAINMENT
 Lewis and Mason counties have highest percentage of population with no HS diploma, both at 8 percent. Lewis and Mason Counties also have the highest dropout rate in 12 and 14 percent range for the class of 2019. Approximately 27% of CACLMT clients have no HS Diploma.
EMPLOYMENT/INCOME
 Median household income is lowest in Lewis and Mason counties within \$50,000 - \$55,000 range. Thurston County has the highest median income at \$69,000 range.
• In July of 2019, the total service area unemployment rate average (5.6) surpasses the state average (4.2), with Lewis at 5.9%, Mason at 6.1%, and Thurston at 4.8%.
 Approximately 63 percent of CACLMT households rely on public assistance and 37 percent of households report having one or more sources of income.
HOUSING
 Thurston and Mason Counties have the highest median gross rent, which do not exceed the state average.

31.1 percent, and Lewis at 30.4 percent.
Mason has the highest percent of cost burdened owner households at approximately 36 percent and the highest

• Thurston has the highest percentage of overall cost burdened households at 32.6 percent, followed by Mason at

 Mason has the highest percent of cost burdened owner households at approximately 36 percent and the highest percent of cost burdened renter households are in Lewis and Thurston Counties at approximately 48 percent.

HOMELESSNESS
 Lewis, Mason have the highest percentage of individual and household poverty level, below 100 percent. Race/Ethnic minorities are more likely to experience poverty, especially households with children. Education attainment is seen as a primary pathway to living-wage and wealth building employment- high percent of drop-out rates and no HS diploma/GED are a concern for families and community to thrive in the future.
POVERTY
 Thurston and Mason had the highest percentage of public transit usage for commute to work. Lewis had the highest rate of percentage of households without a motor vehicle at 5.9 percent, followed by Thurston at 4.8 percent, and Mason being the lowest at 3.5 percent.
 Thurston and Mason Counties had lowest rate of SNAP retailers. All service area counties fall above the state rate. Lewis and Mason have the highest overall food insecurity rates.
FOOD SECURITY
 CACLMT has 9% of uninsured clients (both adults and children combined). Despite improvements in some measures, tooth decay continues to be a major health concern for children in Washington. County Specific data could not be found on oral health issues. In WA about 13 percent of children (ages 2-4 years old and receiving WIC services) were obese. CACLMT's Monarch Children's Justice and Advocacy Center served 874 children in 2019-20 fiscal year.
HEALTH (OVERALL, CHILD ABUSE & DENTAL)45-50
CACLMT clients are majority comprised of renters at 71 percent.
• Lewis, Mason, and Thurston remain in 31-32 percent range for identified nomes where the quality of living and housing can be considered substandard.

• In prior years, the Thurston county homeless population had been decreasing since 2010, now as of 2020, the homeless population numbers are at an all-time high.

Recommendations

As CACLMT moves forward, it is essential to consider how effective and accessible its programs are for individuals and families. Health, hunger, and housing continue to be significant issues within CACLMT's service area. Without these services, basic needs could not be met in our growing communities.

Data Limitations

Data findings were limited to most current information and accessibility of reputable sources. For instance, interesting data was found on certain topics but was dated by approximately 5 years. It was decided this data was not current enough for relevance and intentionally left out. Additionally, many topics were left out due the vast extent of information which could be found by accessing other local community resources. Data findings were framed by CACLMT program services categories and it is important to note that not all community needs are addressed in this document due to time and resource limitations.

Conclusion

As CACLMT continues to advocate for basic needs to be accessible to all community members, we are cognizant that we cannot be the only advocating voice on behalf of low-income individuals and families. Working in partnership with our fellow community resource providers, decision and policy makers, and most importantly the clients we serve, we need to make our voice heard at local, state and federal levels, to ensure that solid funding is in place, and that vital services continue to be provided.

Our programs address 3 fundamental needs that every citizen needs to thrive:

- Housing: affordable shelter, heat, and homelessness
- Health: access to nutritious food and information/referrals for pregnant mothers and their young children, advocacy and justice for victims of sexual abuse, and oral health care
- Hunger: food for families, individuals and children

The sustaining goal of CACLMT, which has been identified throughout this process, is the role we play in advocating for changes that will get at the root of the struggles for families and individuals in our community. Engaging the community in what we do and how well we do it will only add to the strength of our advocacy and help families become more self-sufficient.

ACTION TOWARDS GOALS

To improve Community Engagement through:

- Conducting Annual Client Surveys and adapting them as needed to better understand the needs/satisfaction of
 the population we serve. We will also be adopting a more thorough -statistically accurate survey- for a portion
 of our client base in order to broaden our understanding of potential gaps in the resources available to our
 community.
- Evaluating surveys, assessments, partnerships and our continual interactions with clients, we will continue to function in a results-oriented management style.
- Understanding the presence of social media and the numerous avenues of communication our clients use, we
 will continue update and engage our community through multiple possibilities of engagement (website,
 Facebook, and community events).
- By strengthening our existing partnership and developing new partnerships as they arise, will lead to an
 expansion of services in our community.

APPENDIX A

Annual Client Survey

Community Assessment

2019



Community Action Council of Lewis, Mason & Thurston Counties

Approved by the Community Action Council of Lewis, Mason & Thurston Counties Board of Directors on Moth/Day. 2019.

The Annual Client Needs Survey was conducted from October 2017 through August of 2018. The survey is anecdotal and makes no claim of statistical validity. Though the results may not be statistically valid, the results/data Illustrated do provide valuable insights into the respondents' perceived needs. A total of 2,692 clients voluntarily participated. The large number of respondents allows the reader to make some positive inferences as to the data pertaining to community needs and services.

The survey design was intended to be simple to complete by participants. There were five questions as follows:

- 1. In which county do you live?
- 2. What is the biggest problem facing you or your family?
- 3. Are there five services you or your family need most?
- 4. What kind of help is the most important for you or your family?
- 5. Is there help you need that is not available to you?

Questions were intended to elicit an original, immediate response by not leading the respondent to a checklist of suggested, acceptable responses. The questions are consistent with surveys conducted in prior years.

It should be noted that due to the voluntary nature of the survey, respondents provided no response, partially responded or provided multiple responses though only a single response was elicited. Due to the variability of responses, "like" responses were grouped under a common category. For example, the category "Health" includes responses related to poor health, lack of medical care, lack of dental care, no health insurance and mental health care. Other categories include Utilities, Food, Housing, Transportation, and Other. The top responses are illustrated for each question. (Note: total percentage illustrated may not equal 100%, only the top responses are illustrated.)

The surveys were voluntary and randomly conducted in each county and were either completed by the respondent themselves, by staff interview over the phone, or by staff interviewing the respondent during a service appointment. The goal was to complete 2,000 - 3,000 surveys. A total of 2,692 surveys were completed. All respondents were clients accessing services at our direct service sites in Lewis, Mason and Thurston counties.

The following reveals respondents' selected, demographic data and provides a glimpse of who the Council serves:

- Gender: 43% were male, 57% female
- Related to Ethnicity: 74% were white, 20% Latino, 4% African American and 4% Asian
- Housing: 63% rented their homes, 23% were homeowners, 1% were homeless
- Income/Employment: 28% were employed; 44% were either on Social Security, SSI or pension; and 9% received public assistance
- Income Level: 63% had incomes at or below 50% of poverty level

There was no direct county requirement other than attempting to access as many respondents who would voluntarily respond. (Note: The number of surveys completed by Lewis County was lower than usual this year. As stated, the surveys are voluntary. Efforts are being made to try to increase the

number of responses for 2020.) Survey respondents included only those individuals seeking services from the Council or who had been a recipient of services. Respondents participated voluntarily and were not chosen at random from the population of low-income people in the community. There is no attempt to generalize the results of the survey to the entire population of low-income families in our service area. Though not generalizing the results across the entire population, inferences certainly can be made regarding the population based on the sample size of the survey. The survey results provide valuable insight into the clients' perception of needs and services. The following is a summary of survey results.

1. In which county do you live?

The following are the number of people that responded, by county.

Lewis	81
Mason	401
Thurston	2,210
Total Responses	2,692

2. What is the biggest problem facing you or your family?

"Hours reduced at work so things are tight, Cannot afford food all the time ."

#1 Problem	Adequate Finances 31%	
#2	Heat/Utilities 24%	
#3	Employment 11%	
#4	Health 10%	
#5	Affordable Housing 11%	
#6	Lack of Food 8%	
#7	Transportation 4%	

3. Are there five services you or your family need most?

Combined results reveal that heat/utility assistance was the number one service families need the most (30%). This result is somewhat anticipated in that a majority of the survey respondents were accessing energy assistance services. Recognizing that it is important to note the next ranked responses:

"My husband was injured and we have a child with cancer"

#1 Service Needed:	Heat/Utility Assistance (23%)
#2	Food Programs (23%)
#3	Housing (14%)
#4	Healthcare (11%)

4. What kind of help is the most important for you or your family?

Consistent with question 3 above, combined results illustrate that heat/utility assistance ranked the highest (40%).

Heat/Utility Assistance (40%)	#1 Most Important Kind of Help:
Food Programs (19%)	#2
Affordable Housing (15%)	#3
Healthcare (9%)	#4
Adequate Finances (9%)	#5

"Recently divorced from an abusive husband and I am left with three children and no support. I do not know what to do, we need everything."

5. Is there help you need that is not available to you?

This question above all others provides the best insight into the clients' perception of needs and availability of services. Responses also help guide analysis regarding potential gaps in services, increased outreach or advocacy for services.

Affordable Housing (27%)	#1 Help That is Not Available:
Healthcare (19%)	#2
Transportation (16%)	#3
Heat/Utilities (11%)	#4

The total results are illustrated in Addendum 1 of this summary report. The above data summarizes many of the findings. The full report provides more county specific information revealing the variations to the questions.

ADDENDUM 1

2019 SURVEY RESULTS

Addendum 1 presents all the data for the 2019 Survey. Data is segregated by question, combined responses (all three counties), and individual counties. Further, the number of responses to the questions, by counties, is included. The number of responses by county will differ from the number of respondents due to: no response by some respondents and or multiple responses to a question by others. (Note the data below illustrates the percentage of responses per topic. For example, for Adequate Finances, the .31 should be translated to 31% of the total response indicated that adequate finances were the biggest problem facing the family).

2. WHAT IS THE BIGGEST PROBLEM FACING YOU OR YOUR FAMILY?

Lewis	78	
Mason	419	
Thurston	2,865	
Total Responses	3,362	

Responses	Combined	Lewis	Mason	Thurston
Adequate Finances	.31	.30	.31	.31
Heat/Utilities	.24	.29	.27	.23
Healthcare	.10	.11	.10	.10
Affordable Housing	.11	.11	.11	.11
Lack of Food	.08	.01	.07	.09
Transportation	.04	.01	.03	.04
Employment	.11	.16	.10	.11
Other	.01	.01	.01	.01

3. ARE THERE 5 SERVICES YOU OR YOUR FAMILY NEED THE MOST?

Lewis	137	
Mason	725	
Thurston	4,188	
Total Responses	5,050	

Responses	Combined	Lewis	Mason	Thurston
Adequate Finances	.07	.05	.07	.07
Heat/Utilities	.23	.36	.31	.30
Healthcare	.11	.08	.10	.12
Affordable Housing	.14	.14	.12	.14
Food Programs	.23	.18	.25	.23
Transportation	.07	.06	.06	.07
Employment	.02	.04	.03	.02
Other Responses	.13	.09	.06	.05

4. WHAT KIND OF HELP IS THE MOST IMPORTANT FOR YOU OR YOUR FAMILY?

Lewis	64	
Mason	297	
Thurston	1,901	
Total Responses	2,262	

Responses	Combined	Lewis	Mason	Thurston
Adequate Finances	.09	.17	.09	.09
Heat/Utilities	.40	.42	.41	.43
Healthcare	.09	.06	.09	.09
Affordable Housing	.15	.14	.14	.16
Food Programs	.19	.11	.19	.17
Transportation	.03	.03	.04	.02
Employment	.02	.05	.02	.02
Other Responses	.03	.02	.02	.02

5. IS THERE HELP YOU NEED THAT IS NOT AVAILABLE TO YOU?

Lewis	10	
Mason	61	
Thurston	610	
Total Responses	681	

Responses	Combined	Lewis	Mason	Thurston
Adequate Finances	.10	.00	.10	.10
Heat/Utilities	.11	.00	.18	.11
Healthcare	.19	.20	.16	.20
Affordable Housing	.27	40	.33	.27
Food Programs	.09	.00	.07	.09
Transportation	.16	.20	.10	.16
Employment	.03	.10	.02	.03
Other Responses	.05	.10	.04	.04

ADDENDUM 2

The data in Addendum 2 is a more in-depth review of how people responded within the general categories as illustrated in Addendum 1. For example, in Addendum 1 "Health" appears as its own category. However, when looking at the data that comprised the "Health" category we wanted more insight into what specific issues were included. In Addendum 2, Question 1, (combined below) illustrates that 26% had no health insurance, 43% were in "poor health" (cancer, injury, disability), 24% had no mental health care (but feel they need it), and 7% lacked dental care.

Analysis was completed and illustrated for the categories including Health (above), Hunger, Utilities, Housing, and Transportation. Consistent with Addendum 1, all data presented includes the combined results for all counties along with the individual county responses.

It should be noted that the percentages will add up to 100% due to the categorization of data and the inclusion of all responses associated with the category.

2. WHAT IS THE BIGGEST PROBLEM FACING YOU OR YOUR FAMILY?

Hunger	Combined	Lewis	Mason	Thurston
Lack of Food	.93	1.00	.94	.82
Food Bank	.00	.00	.00	.06
Food Stamps	.07	.00	.06	.12

Utilities	Combined	Lewis	Mason	Thurston
Heat/Utilities	.96	1.00	.97	.98
Water/Sewer	.04	.00	.03	.02

Housing	Combined	Lewis	Mason	Thurston
Lack of Housing	.81	1.00	.69	.89
Housing Repairs	.19	.00	.31	.11

Transportation	Combined	Lewis	Mason	Thurston
No Transportation	.60	1.00	.69	.58
Fuel Cost	.20	.00	.15	.24
Repairs	.20	.00	.16	.18

Health	Combined	Lewis	Mason	Thurston
Poor Health	.43	.38	.37	.06
Lack of Dental Care	.07	.12	.08	.08
No Insurance	.26	.00	.30	.58
Mental Health Care	.24	.50	.25	.28

3. ARE THERE 5 SERVICES YOU OR YOUR FAMILY NEED THE MOST?

Hunger	Combined	Lewis	Mason	Thurston
Lack of Food	.70	.80	.64	.71
Food Bank	.07	.12	.07	.07
Food Stamps	.23	.08	.29	.22

Utilities	Combined	Lewis	Mason	Thurston
Heat/Utilities	.94	.96	.96	.94
Water/Sewer	.06	.04	.04	.06

Housing	Combined	Lewis	Mason	Thurston
Lack of Housing	.80	.74	.75	.82
Housing Repairs	.20	.26	.25	.18

Transportation	Combined	Lewis	Mason	Thurston
No Transportation	.49	.50	.44	.48
Fuel Cost	.37	.38	.39	.36
Repairs	.14	.12	.17	.16

Health	Combined	Lewis	Mason	Thurston
Poor Health	.05	.09	.06	.05
Lack of Dental Care	.17	.18	.17	.20
No Insurance	.58	.45	.63	.50
Mental Health Care	.21	.28	.14	.25

4. WHAT KIND OF HELP IS THE MOST IMPORTANT FOR YOU OR YOUR FAMILY?

Hunger	Combined	Lewis	Mason	Thurston
Lack of Food	.78	1.00	.80	.82
Food Bank	.05	.00	.02	.06
Food Stamps	.17	.00	.18	.12

Utilities	Combined	Lewis	Mason	Thurston
Heat/Utilities	.97	1.00	.80	.82
Water/Sewer	.03	.00	.02	.06

Housing	Combined	Lewis	Mason	Thurston
Lack of Housing	.85	.89	.78	.82
Housing Repairs	.15	.11	.22	.18

Transportation	Combined	Lewis	Mason	Thurston	
No Transportation	.49	1.00	.42	.58	
Fuel Cost	.33	.00	.25	.24	
Repairs	.18	.00	.33	.18	

Health	Combined	Lewis	Mason	Thurston
Poor Health	.05	.25	.12	.05
Lack of Dental Care	.11	.50	.15	.08
No Insurance	.61	.25	.69	.59
Mental Health Care	.23	.00	.04	.28

5. IS THERE HELP YOU NEED THAT IS NOT AVAILABLE TO YOU?

Hunger	Combined	Lewis	Mason	Thurston
Lack of Food	.67	.00	.80	.67
Food Bank	.07	.00	.02	.08
Food Stamps	.26	.00	.18	.25

Utilities	Combined	Lewis	Mason	Thurston	
Heat/Utilities	.71	.00	.98	.68	
Water/Sewer	.29	.00	.02	.32	

Housing	Combined	Lewis	Mason	Thurston	
Lack of Housing	.75	.50	.78	.78	
Housing Repairs	.25	.50	.22	.22	

Transportation	Combined	Lewis	Mason	Thurston	
No Transportation	.40	.50	.42	.43	
Fuel Cost	.28	.00	.25	.28	
Repairs	.32	.50	.33	.29	

Health	Combined	Lewis	Mason	Thurston	
Poor Health	.09	.50	.12	.08	
Lack of Dental Care	.37	.00	.15	.36	
No Insurance	.34	.00	.69	.34	
Mental Health Care	.20	.50	.04	.22	

APPENDIX B

Community Stakeholder Survey, 2020

The Community Action Council of Lewis, Mason and Thurston Counties is a private nonprofit whose mission is to, "strengthen individual and families to less the impacts of poverty." Services provided by the Council are categorized by priorities of health, hunger, housing, and community engagement. Every three years, the Council does a Community Needs Assessment (CNA) to access the needs of community members within the services areas. During the 2020 CNA process, gathering data from stakeholders regarding their perspective on the needs of community members was an integral step. A community stakeholder survey was created and a list of 346 stakeholders between Lewis, Mason and Thurston counties was complied. The 10-question survey was sent via Survey Monkey to the list of stakeholders; each were given 2 weeks to respond and received one follow-up/reminder email. Out of the 346 stakeholders to whom the survey was sent, 95 responded (n=95). Unlike prior years, this survey asks two questions at the end of the survey that focuses on community needs specific to the COVID-19 pandemic.

Survey Details

10 question survey regarding needs and services sent via Survey Monkey online survey service

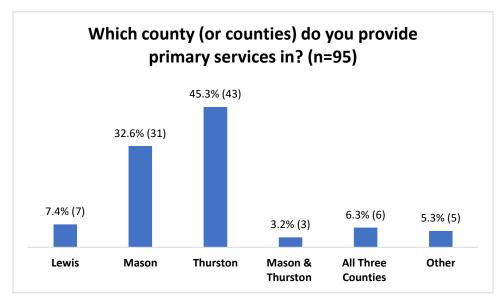
346 stakeholders received Survey/ 95 respondants

Survey results were anonymous, respondents were allowed to skip questions

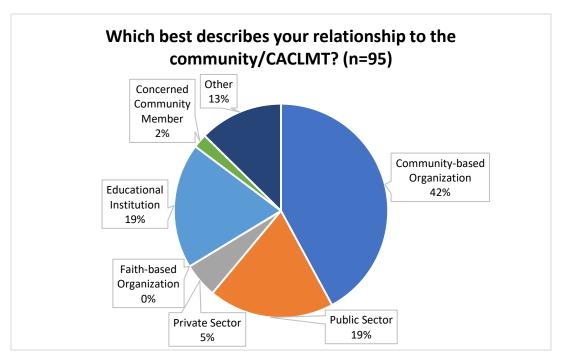
8 selection questions / 2 free-form write in question

Survey Results: Overview

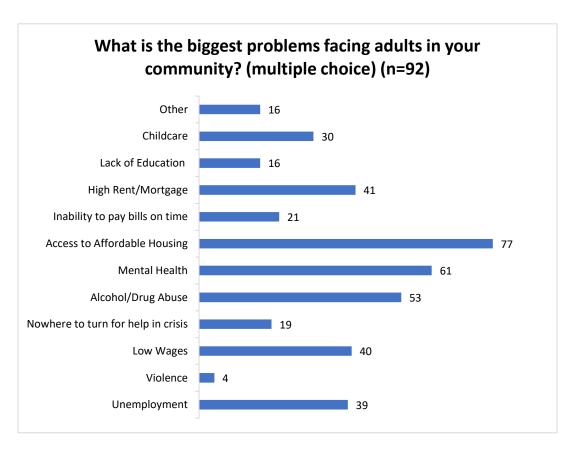
- Thurston Co. stakeholders were the highest respondents.
- Majority of respondents were from community-based organizations.
- Respondents indicated the biggest problems facing adults were affordable housing and mental health.
- The biggest problems facing youth were mental health issues, lack of opportunities to develop skills needed as an adult, and substance abuse.
- Overall services needed:affordable Housing, mental health services, homeless services/shelters, and help for those that cannot pay their rent or mortgage.
- Overall lack of resource awareness were: secure housing, social security/financial building, legal services, reliable transportation, weatherization/home repair, and dental care.
- The primary concerns after the COVID-19 pandemic ends were: mental health, housing/utilities, and employment/unemployment.



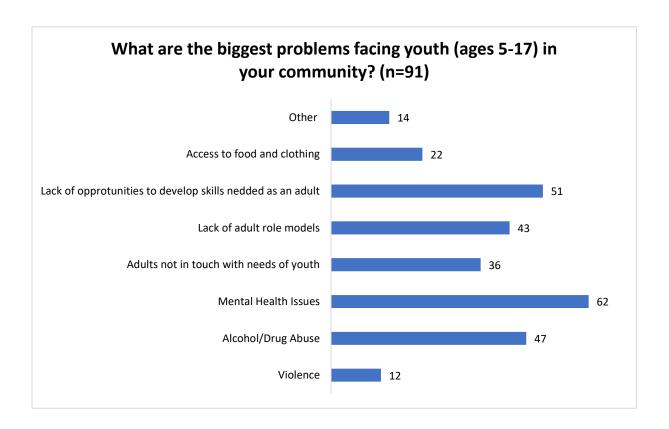
- Out of the three identified counties, Thurston County had the most community responses.
- Other responses included: Statewide; Kitsap; and Grays Harbor.



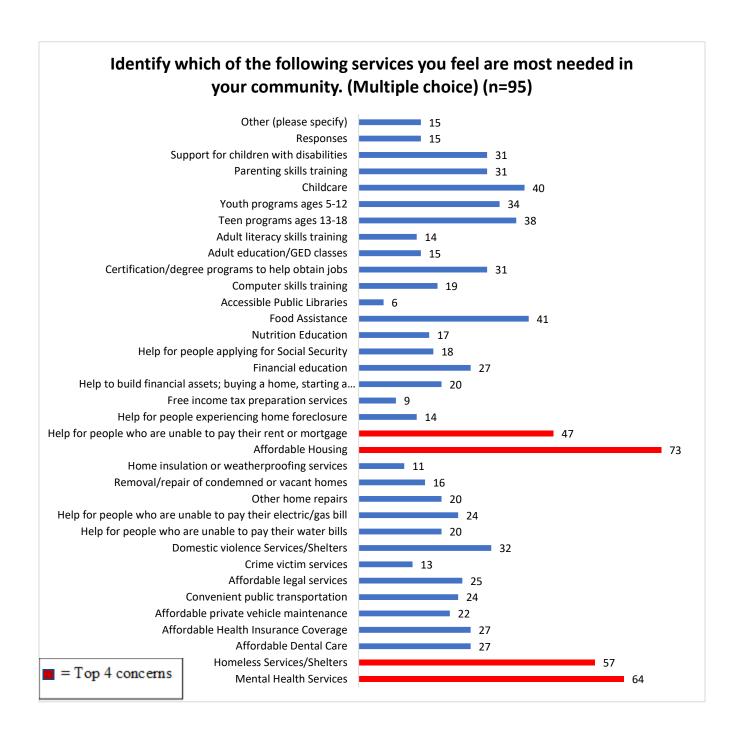
- The majority of respondents were from Community-based organizations.
- Other responses included: Hospital; Healthcare; Funder; Tribe; and Community Health Worker/Population Health.



- Respondents indicated the biggest problems facing adults were access to affordable housing and mental health.
- Other responses included: Lack of resources for mentally ill and addicted; Homelessness; Limited resources for people who are undocumented; Second chance landlords; Second chance employers; Mentors for those who are justice involved; Sponsors to help those struggling with addiction; Counselors specifically trained to assist adult survivors of childhood trauma (sexual, physical, etc.); Food access; Domestic violence; Fear of ICS; Obesity; Lack of resources for seniors/adults with disabilities on social security; Discrimination (systemic racism); Lack of transportation; and Coordinated Housing.



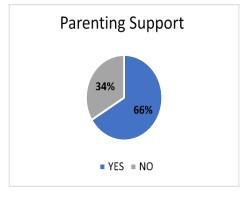
- This graph identifies the biggest problems facing youth were mental health issues, lack of
 opportunities to develop skills needed as an adult, and substance abuse.
- Other responses included: Lack of recreational facilities and opportunities; Poverty; Support for dealing with trauma; Unaccompanied youth housing; Positive roles of schools greatly impaired by COVID; COVID is creating a sense of isolation and hopelessness; Racial injustice; Liberal ideology; Climate Change destroying their future; Access to physical activity; Obesity; Marginal parenting; Safe affordable housing and reliable, affordable internet; LGBTQ+ acceptance from parents; Family Conflict; Lack of jobs/low wages; Medicaid Dental; One agency does not have all the answers, early intervention must be a primary focus- followed up with provider collaboration in meeting complex multiple needs; and Currently due to pandemic, isolation, no in person school and lack of resources to do virtual learning.

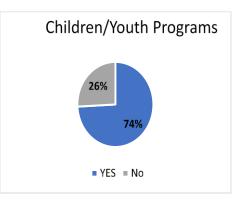


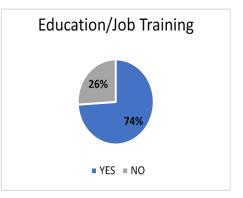
- This graph represents the top 4 overall needs of services in the community were: Affordable Housing,
 Mental Health Services, Homeless Services/Shelters, and Help for those that cannot pay their rent or mortgage.
- Other responses include: Noticeable lack of senior choice here. Seniors in need compound many of the problems above; Affordable housing for the middle class (Tumwater is outrageous), we struggle too!!! Programs for young adults 18 21 (job building skills, life skills, free training or certifications, etc.); Income, during economic recession of COVID; Bold action to stop climate change, and address home health/energy problems; Mental Health Supportive Housing; LGBTQUIA based housing; Free physical activity programs & substance abuse treatment programs; We need more support for the programs that already exist here; Need DDA to be funded and accept new clients AND fast cheap internet for

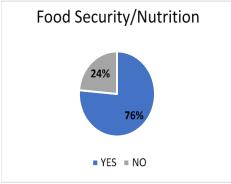
entire county; Permanent supportive housing; Comprehensive services.. all of these are vital and unfortunately -especially since covid are inaccessible.

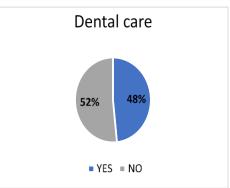
Would you know where to get help if you or someone you know were experiencing or in need of the following? (Select for YES or leave blank for NO) (n=89)

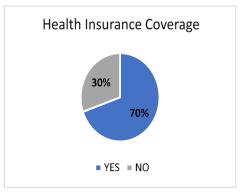


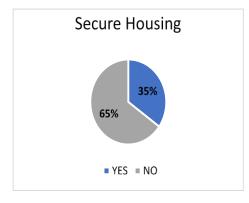


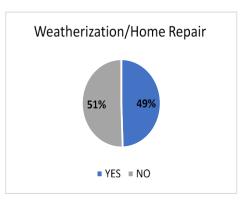


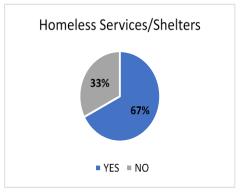


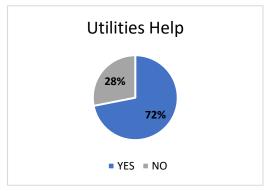


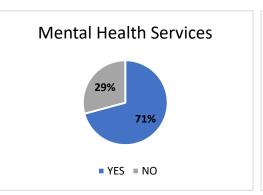


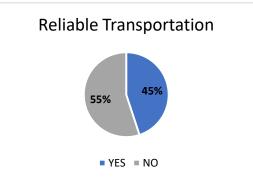


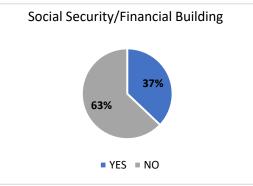


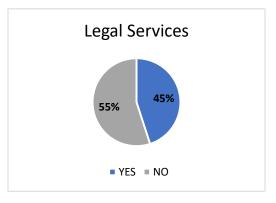




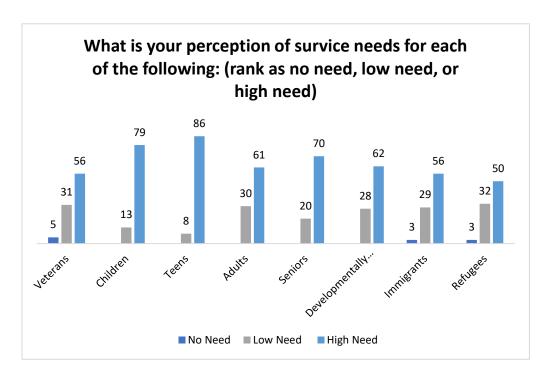








• Secure housing, social security/financial building, reliable transportation, legal services, and weatherization/home repair were the top five categories identified by stakeholders as they or someone they know would not knowing where to go to get help.



- This graph represents the total count of individual stakeholders and community members who ranked perception of needs for these demographic groups.
- Stakeholders indicated groups requiring high need services were **teens**, **children**, **and seniors**.

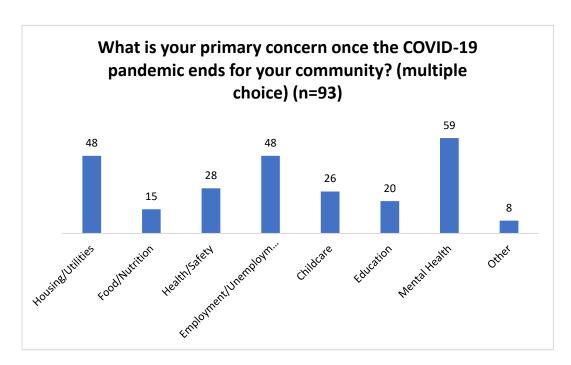
What do you think is most compelling unmet need in your low-income community today? (written responses) (n=82)

*not all responses included, summary of highlights and main points

Reoccurring themes in this response were mental health services, homelessness/shelter, substance abuse disorders, child care, living wage employment, community resource services, and education/distance learning.

- Mental health services (without a doubt!). The homeless situation in Thurston County may be directly attributed to substance use disorders. The substance use disorders are directly attributed to underlying mental health conditions. The mental health conditions cannot be addressed without access points for the low-income community. Most mental health treatment centers are reactionary and the community must wait until there is a crisis before addressing. Until we can improve mental health resources in the community, there's just no point in addressing other areas (residence, substance abuse, employment, etc.)
- Information where to obtain services
- Substance abuse law enforcement
- Both low-income and affordable housing are crucial. It is the foundation on which many other programs can be built. How can you pay your other bills if over half your income is rent? How do you thrive in school, when you're living in your car? How do you combat depression when you live in a molding RV or a decaying shed? My second priority would be mental/addiction services.
- Jobs and Transportation for East end of Lewis County
- Accessing distance learning with schools

- Shelter
- Access to wages to support family living.
- Wrap around services for families to have mental health support and support accessing services
- **Income**, due to COVID disruptions
- Affordable housing and living wage employment
- Access to drug rehabilitation
- Childcare & access to meaningful learning
- Education and job training
- All services along the DSHS spectrum.
- Housing is the hardest thing everything else, we can be creative, and help solve the problem
- Equitable access to affordable housing (rent & own)
- Finding permanent shelter for houseless families
- Affordable stable housing but also mental health and social support to keep the jobs to sustain the
 housing; and we need to support the mental health of our children youth and families
- Need for government to get off their back
- Repairs/ADA modifications to keep low income people safely in their homes, affordable housing, support to help people become responsible renters when transitioning from being homeless
- Those who don't qualify for State services but don't make enough money to pay out of pocket for help
- Appropriate access to needed services in the community
- Energy efficiency upgrades and retrofit for older rental homes.
- Having a **safe**, **just**, **equitable healthy community** to live and thrive in.
- Higher paying jobs so people can afford rent and childcare
- Living wage jobs and affordable housing
- **Food security** This is something HOPE is working on but it will be a long road for sure.
- Access to broadband services. With so many resources and education moving to virtual platforms, many community members are falling behind because they don't have reliable internet access.
- Not enough affordable housing, wages/Soc Sec don't come close to meeting needs.
- Mental health education and support for our entire community. The ability to handle stress and
 uncertainty with our modern world is extremely low! If you are too stressed out to manage your life,
 everything stops working. The average American is reporting "anxiety" they have never experienced
 before. As much as 40% of our population and they don't know what to do with it! This is not
 something that will go away quickly or easily because it has created a trauma cycle.
- Homeless Shelter and social services support, Case Management support for all ages (Navigators)
- Lack of affordable and handicapped accessible housing
- Fast, cheap internet, Low barrier shelter especially for families and single men using drugs
- Need to get assistance out faster and with fewer paperwork burdens on community members; more trauma-informed and trust-based supports for people in crisis
- Lack of coordination among organizations county/city wide
- Grandparents and other family members who take on raising a child often have not accessed resources in the community and are not familiar
- Easy access to coordinated support services.



- Stakeholder identified primary concerns after the COVID-19 pandemic for the community are: **Mental Health; Housing/Utilities, and Employment/Unemployment.**
- Other responses included: Government and non-government agencies that are responsible for providing services are at a reduces operating capacity, which causes a significant strain on the vulnerable members of our community. As a practitioner, I am unable to get community resource providers to answer their phones, return e-mails, or conduct basic job functions; Mental health/addiction services will be/are greater than ever including helping folks to feel safe again in social situations; Shelter, tiny homes, dependence on Olympia to solve homeless that needs a countywide solution; Evictions; Lack of affordable housing and overburdening/ taxing of home owners; So many!; Substance misuse; Phone minutes- tech support figuring out how to install or use items

What specific needs have you seen arise due to the COVID-19 pandemic? What additional challenges and burdens has COVID-19 caused for your community? (written responses) (n=69)

*not all responses included, summary of highlights and main points

Reoccurring themes in this response were affordable housing, mental health services, homelessness, isolation/socialization, internet support, child care, unemployment, and community resources.

- Access to electricity for the most vulnerable to charge their phones. Access to restrooms, showers, etc. I need community resource providers to accept 'some' risk and get back to work. I believe I have covered most of this response in Q9, but I need help. If community resource providers are not willing to accept risk, then get creative in the problem-solving process. If we can safely practice Halloween in Thurston County, we should be able to figure out a way to open up clothing banks to get folks some warm clothes.
- Funds to continue to provide non-profit services.

- **Child care** closing due to COVID demands or low enrollment; low supply of housing that exacerbates this issue of lack of affordable housing; stress related mental health needs; high rates of substance abuse
- Huge jump in numbers in deaths from addiction/depression/domestic abuse.
- Unemployment, affordable housing, food scarcity
- Isolated seniors lacking support, knowing about Meals on Wheels and other services
- Limited resources for families experiencing homelessness
- Those that have service or provider jobs (inc. low- Income services) have no or little access to childcare, and with school online, it requires someone to be at home with them.
- All issues have increased for each family and more families have problems than did before the pandemic. We need a place that people can go on the internet and in the community to find out about services and access them. We have great organizations that help but you have to know about each one and it is overwhelming to be sent from one place to another. It is also overwhelming to try to look for supports in our community because nothing is tied together so I can see in one place all the organizations that support and for what things. It would be great if I could go to a website that would connect me or at least give me contact info organizations that help with the different issues you have here.
- Access to services usually provided by schools, employment
- Surge in **domestic violence** issues, **LGBTQ** support
- Opportunity gap is exponentially widening for families with resources to access remote learning;
 children in childcare or in chaotic homes are not fully engaged, present but not learning.
- More stress, more isolation, still trying to use the same, flimsy coping skills
- Mental Health needs are huge and they are only going to grow especially when the kids and teenagers come back to school. We need a lot of mental health help for our young people who have been in isolation when they need social interaction to develop in a healthy way. Right now, we are only seeing the tip of the ice berg because families are often present with the children when they are on zoom calls with the teachers. They will open up and tell us a lot more when they are with us in person without a family member right there. We need more mental health support in schools.
- Fake news making sheeple out of the people
- Since people are home more, **home repair issues and conditions** are more of a problem.
- Lack of social support, many people don't have access to computers and the internet, Zoom isn't the
 answer to everything.
- Housing, money, community resources, Domestic violence, criminals let out of jails and prisons, ability to communicate with public again, reintegration into the community, lack of educational ability for all children and how grades affect their future due to lack of preparation with the educational system.
- Address indoor air quality, climate-driven wildfire smoke impacts
- Rioting downtown, businesses closed
- The high number of renters in our community. They are often the most vulnerable.
- Isolation of seniors and disabled
- Increased depression, anxiety, substance use
- Ability to pay bills, repair home/car, lack of employment.
- Supports with things not funded by the Cares Act car repairs, gas vouchers, water bills, etc.
- Mental health for women and families, parenting, education, rent-utilities assistance

• **Financial impact** of having to stay home with a family member with COVID and then having to quarantine for another 14 days after that

Conclusion

This Survey was a great indicator of stakeholder perception of needs for our communities. As we reflect on this data, affordable housing, mental health, and homelessness were significant concerns identified throughout the survey. Additionally, many other high need services were indicated, often in relation to other significant concerns. This survey also indicated many stakeholder perceptions of what our communities will need in order to recover from the burdens and challenges placed by COVID-19.

We would like to thank all stakeholders who participated in this survey as we look forward to using this pertinent information to better understand our community needs and guide our mission.

If you have any questions or comments regarding the survey, please contact Alisa Sheynfeld, CACLMT MPH Intern at asheynfe@kent.edu or Kirsten York, Director of Family Services at 360.438.1100 ext. 1135 office, Fax 360.491.7729, kirsteny@caclmt.org.

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