

# Skagit County Low-Income Needs Assessment 2009

*A study of needs and resources for low-income  
people in Skagit County, Washington*

Commissioned by

**Skagit County Community Action Agency**

Research and Reporting by

**Cornerstone Strategies, Inc.**

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United Way of Skagit County  
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## Table of Contents

<b>Acknowledgements</b> .....	<b>5</b>
<b>Preface</b> .....	<b>6</b>
<b>Executive Summary</b> .....	<b>7</b>
<b>Introduction</b> .....	<b>20</b>
Skagit County Community Action Agency .....	20
Project Context .....	20
Purpose of the Low-Income Needs Assessment .....	21
Collecting Information .....	21
Poverty.....	22
How is poverty measured? .....	22
Poverty by the Numbers .....	23
<b>Survey Respondents: Who Are They?</b> .....	<b>24</b>
Geographic Distribution .....	24
Gender and Age .....	24
Duration of Residence in Skagit County.....	24
Household size and family status .....	25
Veteran status.....	25
Disability .....	25
Race and Ethnicity.....	26
Language.....	27
Listening to the experiences of our local Slavic Community .....	28
<b>Employment, Education, Finance and Legal</b> .....	<b>29</b>
Income .....	29
Poverty Status .....	30
Employment & Business.....	31
Employment & Business Recent Developments .....	34
Financial and Legal Situation .....	35
Legal Assistance.....	38
Financial and Legal Services Recent Developments .....	38
Education, Communication and Literacy .....	40
Information and Literacy Recent Developments .....	42
<b>Housing and Homelessness</b> .....	<b>44</b>
Housing Type and Condition .....	44
Housing Stability .....	45
Homeownership.....	47
Housing Cost Burden and Assistance .....	48
Housing Recent Developments .....	49
<b>Health and Healthcare</b> .....	<b>51</b>
Overall Health Status.....	51
Health Insurance.....	52

Primary Care.....	53
Health and Health Care Recent Developments .....	57
<b>Parenting and Child Development .....</b>	<b>58</b>
Parenting Challenges .....	58
Child Safety and Family Situation.....	60
Child care.....	60
Parenting and Child Development Recent Developments .....	61
<b>Food and Nutrition .....</b>	<b>62</b>
Food Security and Assistance .....	62
Accessing Community Resources.....	63
Child Nutrition .....	64
Food and Nutrition Recent Developments.....	65
<b>Transportation .....</b>	<b>67</b>
Transportation Challenges .....	67
Public Transit Use.....	68
Transportation Recent Developments .....	69
<b>Service gaps analysis – consumer and provider perspectives .....</b>	<b>70</b>
All Consumers .....	74
Spanish-speaking consumers .....	75
Senior consumers.....	76
Service Providers.....	77
<b>Appendix A: Survey Questionnaire .....</b>	<b>78</b>
<b>Appendix B: Survey Agency and Program Sites .....</b>	<b>91</b>

## Table of Tables

Table 1 Federal Poverty Guidelines for Year 2009.....	23
Table 2 Respondent household monthly income by household size.....	29
Table 3 Low-income respondent households by poverty status and household size.....	30
Table 4 Renter and owner cost and cost burden.....	48

## Table of Figures

Figure 1 Geographic distribution of survey respondents (N=635) .....	24
Figure 2 Respondent race and ethnicity (N=619) .....	26
Figure 3 Respondent language usually spoken at home (N=590).....	27
Figure 4 Percent of all households with a person whose disability limits one or more activities (N=612) .....	25
Figure 5 Household income sources (N=580) .....	29
Figure 6 Household income sources - Spanish speakers compared to other respondents .....	30
Figure 7 Reason why getting or keeping a good job is hard for household (n=423).....	31

Figure 8 Reason why getting or keeping a good job is hard for household - Spanish speakers compared to other respondents .....	32
Figure 9 Main concerns about starting a new business (n=69) .....	33
Figure 10 Services used for help starting a business (n=74).....	33
Figure 11 Financial situations experienced by survey respondents in the last 12 months (n=479).....	35
Figure 12 Financial situations experienced by survey respondents in the last 12 months - Spanish speakers compared to other respondents .....	35
Figure 13 Proportion of respondents who reported that a situation happened frequently in the past 12 months.....	36
Figure 14 Problems getting help with the above financial situations (n=359). 37	
Figure 15 Access to tax credits and checking accounts .....	37
Figure 16 Access to legal assistance (n=628) .....	38
Figure 17 Educational attainment of survey respondents over 25 years old (n=479).....	40
Figure 18 Proportion of respondents who would like to increase knowledge and skills (n=463).....	41
Figure 19 Proportion of respondents who would like to increase knowledge and skills - Spanish speakers compared to other respondents .....	41
Figure 20 Access to media and communication technology (n=598) .....	42
Figure 21 Respondent housing type (n=594).....	44
Figure 22 Housing condition (n=507).....	44
Figure 23 Current housing problems (n=570) .....	45
Figure 24 Housing situations experienced in the past year (n=630) .....	46
Figure 25 Housing situations experienced in the past year - Spanish speakers compared to other respondents .....	46
Figure 26 Barriers to homeownership (N=576).....	47
Figure 27 Mean renter and owner housing cost for survey respondents with and without housing assistance .....	49
Figure 28 Respondent general health status (n=625) .....	51
Figure 29 Respondent general health status by income group (income group boundaries that divide the respondent group into equal thirds: low=\$0-760/month; middle=\$761-1399; high=\$1,400+).....	51
Figure 30 Respondent's type of health insurance (n=656) .....	52
Figure 31 Where survey respondents usually go for medical care (n=624) ...	53
Figure 32 Where survey respondents usually go for medical care - Spanish speakers compared to other respondents .....	53
Figure 33 Where survey respondents usually go for health care by type of insurance plan.....	54
Figure 34 Where survey respondents usually go for dental care (562) .....	55
Figure 35 Where survey respondents usually go for advice for mental health care(n=277).....	55
Figure 36 Proportion of survey respondents who needed medical, dental, mental health care or prescriptions in the last 12 months, but did not get it (n=656).....	56
Figure 37 Main reasons for not getting each type of health care.....	56
Figure 38 Problems respondents have experienced with their children (n=316) .....	58
Figure 39 Problems respondents have experienced with their children - Spanish speakers compared to other respondents .....	59
Figure 40 Proportion of survey respondents with children who report having car seats for their young children, children's health insurance	

	coverage, and whether they were a grandparent raising their grandchildren .....	60
Figure 41	Reasons for difficulty keeping adequate child care services (n=71) .....	60
Figure 42	Respondent household food security and assistance indicators....	62
Figure 43	Food security and assistance indicators by income group (income group boundaries that divide the respondent sample into equal thirds: low=\$0-670/month; middle=\$671-1399; high=\$1,400+) .....	62
Figure 44	Food assistance programs used by survey respondents (N=488) .	63
Figure 45	Percent of Skagit County public school students eligible for free and reduced price meals 1998-2009 (Office of Superintendent of Public Instruction) .....	64
Figure 46	Percent of school district enrollment eligible for free or reduced lunch (Source: individual school districts).....	65
Figure 47	Household car problems in past 12 months (n=565).....	67
Figure 48	Household car problems in past 12 months - Spanish speakers compared to other respondents .....	68
Figure 49	Proportion of regular bus users within income groups (income group boundaries that divide the respondent sample into equal thirds: low=\$0-670/month; middle=\$671-1399; high=\$1,400+).....	68
Figure 50	Reasons for not regularly using the bus by non-regular bus users (n=428).....	69
Figure 51	Proportion of providers and clients who rate services extremely important to their households.....	70
Figure 52	Proportion of survey respondents who rate services “very hard to get” .....	71
Figure 53	Percent of client and service provider survey respondents who perceive an extreme gap in their community for the listed service (extreme service gap is defined here as “extremely important” to their household and “very hard to get”).....	72
Figure 54	Low-income household survey respondents’ perspectives on services’ importance and availability .....	74
Figure 55	Low-income household survey respondents’ perspectives on services’ importance and availability - Spanish speaking consumers .....	75
Figure 56	Low-income household survey respondents’ perspectives on services’ importance and availability - Senior consumers .....	76
Figure 57	Service provider survey respondents’ perspectives on low-income services importance and availability .....	77

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Lastly, this report could not have become a reality were it not for the professional oversight provided by Greg Winter, our Research Consultant of Cornerstone Strategies, Inc.

For online access to this report in Executive Summary or full report format, please visit the Skagit County Community Action Agency website at [www.skagitcap.org](http://www.skagitcap.org).

Organizations interested in obtaining specialized reports may be arranged with Cornerstone Strategies at [gregw@cstonestrategies.com](mailto:gregw@cstonestrategies.com)

With Appreciation,  
Karen Parnell, Project Director

## Preface

Skagit County Community Action Agency has been serving low-income families in Skagit County, Washington, for more than 30 years. Such longevity does not happen by accident. Rather, it reflects the capacity of our agency to accurately assess the needs of our clients, to listen with empathy, to understand the changes affecting the Skagit community, and to work with our community partners to design effective programs that truly meet local needs.

Thus, every four years, Community Action conducts an extensive low-income needs assessment that becomes the foundation of our planning efforts, and as a source of information for numerous other organizations delivering services to local needy families. On behalf of local grant writers, we also believe it helps attract millions of dollars in resources to our community.

As we embarked on this study, we recognized that this is a time of unprecedented economic struggle for local families, many whom have never before had to rely on assistance. The number of clients we serve has increased exponentially, as has their stress and confusion. It is also a time of dwindling resources for those of us who serve them. The safety net of the Skagit community is challenged as never before.

The silver lining: organizations and individuals in Skagit County are pulling together as never before to find new ways to work together, and to keep our safety net intact. People are asking, how can I help? Organizations are asking how we can work together as efficiently and effectively as possible. Turf battles are down, volunteerism and individual donations are up.

In this atmosphere, we trust this study will be part of the solution, helping equip our community to plan for challenges that are before them, whether in housing the homeless, feeding hungry families, heating homes, finding access to health care, improving job and literacy skills, or connecting to volunteer opportunities.

The data we collected from nearly 700 low-income households helps give dimension to our local landscape. Clients from 36 organizations completed our rather lengthy questionnaire, describing for us their reality as they search for employment, education, housing, transportation, healthcare, childcare, and food and nutrition. In response to the rapid growth of the county's Latina/Latino population, the report also includes separate analyses of the Spanish language subpopulation on select topics.

As we designed the research tool, we were grateful for the valuable input from the newly formed Skagit Alliance for Health Care Access, the Northwest Workforce Council, Economic Development Association of Skagit, and the Home Trust of Skagit. Several key modifications were adapted from the recent Whatcom Prosperity Project, also conducted by Cornerstone Strategies. Our greatest hope is that this survey will be a key tool as together we create a new decade, a stronger and more resilient safety net, and a healthier community for all.

William B. Henkel  
Executive Director

## Executive Summary

### Introduction

Skagit County Community Action Agency, working with the support of other service providers, local government and the private sector, produces a comprehensive countywide needs assessment for the following purposes:

- ✓ Explore and illustrate the dimensions of poverty in Skagit County,
- ✓ Provide a strategic planning tool for agencies, organizations and individuals seeking to confront poverty in Skagit County, and
- ✓ Present a locally significant and reliable study for use by local communities and funders and to attract resources necessary to combat poverty in Skagit County.

### Who was surveyed?

Overall, 656 households responded to the survey. These households include a total of 2,215 persons. During a 12-week period in the summer and fall of 2009, this project intensively sampled as many unduplicated households as possible from social and health service sites throughout the county. In addition, 92 staff from 59 agencies responded to our service provider survey.

### What were the clients like?

- ❑ **Residency:** 43% of households live in Mount Vernon. The rest live in small cities or unincorporated Skagit County. 77% have lived in Skagit County for four years or longer.
- ❑ **Family status:** 62% of households are families with children; 43% include children 0-5 years old. 6% of respondents said that they have an aging parent living with them, and 5% of households with children at home said that they were a grandparent raising a grandchild.
- ❑ **Employment:** 53% of client households include wage earners; 17% rely, to some degree, on Temporary Assistance for Needy Families (TANF). Retirees make up 16% of the client respondents. Spanish speakers are more likely to have income from wages (82%).
- ❑ **Income:** 50% of client households report less than \$1,000 in total monthly household income; 73% have household incomes that are at or below the Federal Poverty Level.

- ❑ **Race and Ethnicity:** 55% of respondents are white, 10% Native American, 3% African-American, 1% Native Hawaiian/Pacific Islander, <1% Asian, and 2% represent other ethnic heritage; 34% of all respondents are of Hispanic or Latino ethnicity.
- ❑ **Language:** 19% usually communicate in Spanish; 6% usually speak another non-English language.
- ❑ **Veterans:** 15% of respondent households have at least one veteran member.

### What were the clients' high priority needs?

- ❑ High priority needs with lower availability: According to client respondents, affordable housing, medical care, dental care, home heating assistance and living wage jobs are high priority services that are hard to access. These are the same service gaps indicated in the 2005 LINA survey.
- ❑ Compared to other clients, those who normally speak Spanish identified the same service gaps. However, they also tend to give adult basic education higher importance ratings.
- ❑ Seniors (60 years old and older) also identified the same five service gaps in this survey; however, in 2005 they only identified affordable housing and dental care.
- ❑ Service providers agree with clients: affordable housing, affordable medical and dental care, and living wage jobs are priority needs with low availability. They would add to that list transportation and mental health treatment services.

### What were the findings based on categories of need?

**Housing:** More than half of survey respondents (55%) rent their housing. Another 17% are homeowners. The remaining survey respondents currently share housing with another household (14%), live in transitional housing or an emergency shelter (6%), are homeless (6%), or live in employer-provided housing (1%).

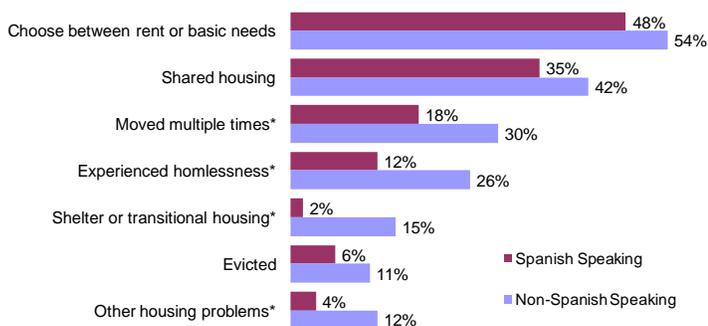
- ❑ Survey respondents were asked about current housing problems as well as housing

situations they had experienced in the past 12 months. More than half of respondents reported that bad credit makes it hard to find a place to rent (54%). The affordability of renting or owning a home were also common barriers to stable housing, at 48% and 41% respectively.

- 67% of renters and 76% of homeowners pay more than 30% of their gross income per month for rent or mortgage;

Housing costs	Renters	Owners
Mean cost	\$ 530	\$ 989
Median cost	\$ 500	\$ 947
Mean cost burden (% of income spent on rent or mortgage)	50%	68%
Median cost burden	43%	53%
Cost burden >30% of income	67%	76%

- More than half of respondents (52%) said that in the last 12 months they had to choose between paying the rent or mortgage and other basic needs. 41% have had to share housing to avoid homelessness and many have moved multiple times in the past year (27%). About one in four respondents have experienced homelessness in the past year (23%).
- Spanish speaking households were less likely to have experienced each of these negative housing situations in the past year. Most significantly, they were less likely to have moved multiple times, have experienced homelessness, or have stayed in an emergency or transitional shelter.



- 71% say that they want to buy a home some day.

### Recent Developments in Housing Services

- Skagit's 2009 homeless count of 2,306, compared to 1,182 in 2005, is the highest per capita in WA. Approximately 50% were children under age 18, of which 522 were homeless children in schools.
- 2060 Funding legislation begun in 2004 taps building permit fees to dedicate funds for low-income housing and homeless prevention, has grown to four bills. Variable with the real estate market, about \$500,000 is available annually, up from \$168,000 in 2004.
- SCCAA's emergency family shelter expanded from four to ten apartments in 2008. Re-named the William J. Shuler Family Development Center, services include self-sufficiency on-site support resources.
- SCCAA manages 43 transitional housing units across the county, up from 36 in 2005. Families receive subsidized rent and family support services for up to two years.
- Skagit Housing Connections, new in 2009, is a 1-Stop Homeless Service Center for those who are homeless or facing homelessness, with mortgage and rental funds, case management, and education services. The program streamlines services for hard-to-serve clients.
- Opened in November 2009, the nine-unit Anacortes Family Center (AFC) provides emergency and transitional shelter for single mothers, families with children, and single women. (<http://www.AnacortesFamily.org>) Fidalgo Island Share-a-Home, run by AFC, brings together home providers with home seekers looking for an affordable place to live. (<http://www.FidalgoFish.org>)
- The Wilson Hotel renovation, completed in 2006, provides 25 one bedroom and studio apartment managed by the Anacortes Housing Authority. It serves low and very-low-income renters and units include five which are handicap-accessible. Within walking distance of services, the hotel features five commercial spaces on the first floor.
- Home Trust of Skagit (HTS), a nonprofit community land trust (CLT) dedicated to creating permanent home ownership affordability, formed in 2009. Under SCCAA's umbrella, HTS works with groups in Anacortes, LaConner, and Hamilton. The 2005 LINA presented a CLT concept paper as part of relocation options for Hamilton.

- ❑ SCCAA acquired Channel Cove, an affordable neighborhood of 22 rental units in LaConner in late 2006. A feasibility study to transition four units to home ownership using the CLT model, and build ten new units in Phase II is underway.
- ❑ SCCAA's Volunteer Chore Program helps seniors and disabled adults stay in their homes with a focus on home repairs and handicap modifications. Expanding on this, an Anacortes 2009 ARRA project will provide local contractors home repair jobs to weatherize selected senior homes. Staff cite a trend of more seniors, often recent retirees, living on the edge of homelessness, a situation frequently aggravated by mental health issues which hamper their ability to carry out life management strategies.



**Childhood Development and Parenting:** 62% of respondents have children.

- ❑ **Affordability is the main barrier to child care services:** 44% say they can't find affordable child care. Parents frequently cite a lack of community child care services that provide: weekend care (21%), evening care (30%), infant care (34%), part-time care (20%), and care for special needs children (23%).
- ❑ **Children's health and dental care:** most parents (84%) say their children have some type of health insurance. Still, 16% of family households with children do not have children's health insurance.
- ❑ **Car safety seats:** 20% of households with children under the age of seven do not have car safety seats for each of their young children.
- ❑ **Youth problems:** When asked what problems their children experience, more than half of parents say their children have no problems. Of those that report problems, cited most frequently are emotional or behavioral problems, a learning disability, weight or eating habits (including concern about both overweight and underweight problems), and skipping or dropping out of school.

#### **Recent Developments in Childhood Development and Parenting Services**

- ❑ The Children's Council of Skagit County connects monthly to increase public awareness of early childhood education, provide family support, and coordinate agency

services. Members include a wide variety of agency representatives and individuals.

- ❑ Annually, Early Childhood Connections Conference provides STARS training for child care providers, with workshops in Spanish.
- ❑ Skagit's Early Head Start's ARRA stimulus funds will increase enrollment from 83 to 103 through Sept 2011, and will also provide minimal facility upgrades. After 8 years of flat funding, the program will receive a small operation increase in 2010.
- ❑ SCCAA provides early childhood education to children of families enrolled in their ESL classes. Even Start Family Literacy, begun in 2006 and held at Madison School, is a partnership of SCCAA, MVSD, Head Start, Migrant Head Start, and SVC.
- ❑ SVC's Child and Family Learning Center, opened in 2004, serves as a lab for WWU and SVC Early Childhood Education and Human Services students. It provides inclusive bilingual classrooms for HeadStart and SPARC.
- ❑ Welcome Baby was cut from the county budget in early 2009. Limited services are conducted by volunteers.
- ❑ The highly acclaimed At-Risk Intervention Specialist (ARIS) program, begun in 1991, is undergoing severe budget cuts and reorganization as 2009 closes. ARIS delivered successful services in the schools, community, and home settings, serving thousands of students, ages pre-school to eighteen.
- ❑ Skagit Preschool and Resource Center (SPARC) collaborates with Head Start, placing children with disabilities in their classrooms, and provides special education staff support in Head Start classrooms. SPARC retracted their Neuro-developmental Center, formerly an off-site location, to their main office in 2005.
- ❑ Best Place early learning centers under the county's 21st Century Learning Grant, phased out in 2005, transitioned to YMCA Child Care serving children one month through 12 years of age. Early learning centers operate full-time year round, with school-age sites operating on school district's schedule. Summer licensed school-age day camp programs operate and accept DSHS subsidies.
- ❑ Skagit's Child Care Resource & Referral, hosted by Volunteers of America, reported that 2007 licensed family child care centers numbered 168, a drop from 184 in 2004. 39% of licensed providers have Spanish-speaking

staff. Nearly 50% of requests for referrals in 2007 were for weekend or evening care, and over half were from low-income families.

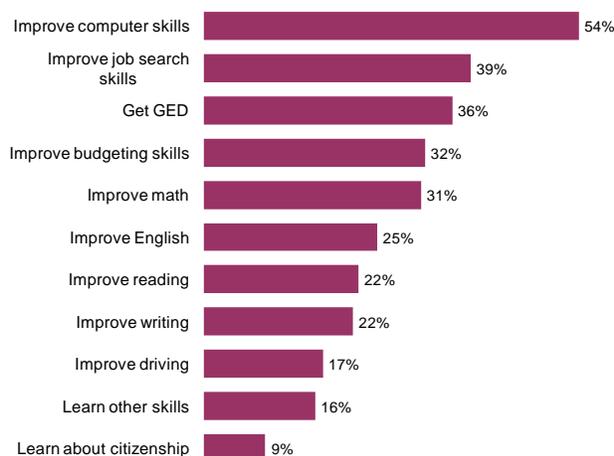
- ❑ Current active TANF cases in Oct 2009 is 1,032, of these cases 389 are child only cases where the parents or relatives are not active on TANF with the child. A 6-month average of 603 families received Working Child Care Connections each month in 2009, a 40% decrease from 1,000-plus in 2005. See discussion in Employment & Income.



**Education, Communication and Literacy:** More than a third of respondents have some form of post-secondary education. They have attended a trade school or some college education (25%), or have a two-year degree or higher (12%). About one in four survey respondents do not have a high school diploma or GED (26%).

Respondents were asked which free literacy services they would like to participate in to improve certain literacy skills.

- ❑ 54% want to improve their computer skills
- ❑ 32% would like to improve their finance and budgeting skills
- ❑ 36% want to obtain their high school equivalency degree (GED)
- ❑ 39% want to improve their job search skills
- ❑ Spanish-speaking clients are more interested in improving their English language skills (70%) and learning about citizenship (15%)



- ❑ **Communication:** Just over half of respondents have access to a working landline phone at home (55%), and just under half have home internet access (48%). Cell phones

are also common, with 44% having cell phone contracts, and 41% having a pre-paid or “pay as you go” cell phones. One in four respondents say they watch Spanish TV 26.

**Recent Developments in Education, Communication and Literacy Services**

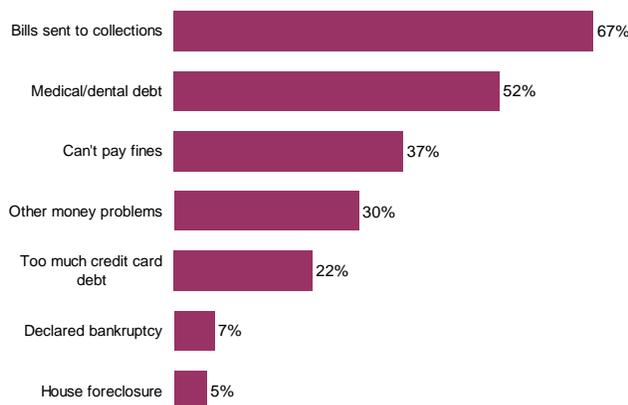
- ❑ Significant changes for SCCAA’s literacy services were the loss of 21st Century funding which impacted staffing levels and the ability to provide appropriate early childhood education. SCCAA has developed a skilled leadership base that has recruited, trained, and built an awesome team of early childhood staff. The 200 adults served by approximately 40 volunteers remains stable. Services provided by VISTAs, AmeriCorps VISTAs, and other volunteers is a large part of positive outcomes in families.
- ❑ SCCAA became the sponsoring organization for the Washington Reading Corps (WRC) AmeriCorps program in 2006 with positions in 19 elementary schools and early learning centers in Skagit, Whatcom, and Snohomish counties. In 2006, the program had 34 positions and one full time staff person. In 2007, it expanded to 60 positions and three full time staff, and currently WRC has 58 AmeriCorps members and three full-time staff. Services focusing on struggling readers reach 1,000 youth in Skagit County.
- ❑ Skagit Valley College charges \$25 per quarter, with low-income waivers available, to students enrolling in ABE, ESL, and GED classes, including assistance in GED test preparation. Also, see I-BEST information in Employment and Income section.
- ❑ Teen GED is headed up by a VISTA staff person through SCCAA’s literacy program. The program works in partnership with WorkSource where a computer lab is staffed with volunteer tutors. A new venture is being formed to provide educational support to detainees in the juvenile detention center.
- ❑ Goodwill Job Training & Education Programs provide ESOL (English speakers other than English) and in 2009 began offering citizenship education support.
- ❑ SCCAA administers Community Voice Mail, free 24-hour voice mail for homeless and phoneless individuals, through partnering sponsors. Services expanded in 2008 to provide access to local job opportunities and other vital resources through Broadcast

Messaging. Additionally, since 2006, WTAP (Washington Telephone Assistance Program) offers low-income households basic monthly phone service for \$8. Households receiving public assistance, such as TANF or Food Stamps qualify.

- ❑ SCCAA and the City of Mount Vernon partner to produce Spanish information and education to Comcast viewers on TV 26. 2009 contributing partners were Mount Vernon School District, Skagit Valley Hospital, and Washington State University. Special funding covered SVC's Champions of Diversity awards ceremony. Additional partners and sponsors are being sought to stabilize funding and expand programming.
- ❑ SVC-based KSVR radio (91.7 FM) provides a broad range of programming, including a weekly radio program produced by Washington State University (WSU) Extension. The WSU radio program provides information and education for Spanish listeners. Program funding was lost in June 2009 with WSU budget cuts. Interim funds maintained programming through 2009; however, the program's future is uncertain.



**Financial and Legal Assistance:** Among a list of seven types of money problems clients may have experienced in the 12 months prior to the survey, respondents most frequently reported having bills sent to collections (67%); having debt from medical or dental care (52%); and having fines that are hard to pay off (37%).



- ❑ Survey respondents were also asked what problems they had getting help with the financial situations they experienced. Thirty percent of respondents said they did not have any problems getting help with their finances. Of those who did have problems getting help,

two-thirds could not afford financial help (68%). The next most common issues were not knowing where to go (42%) and not have transportation to get financial help (22%).

- ❑ 33% of clients needed legal assistance in the past year, but could not afford it.
- ❑ The most frequent response to the need for legal assistance was to do nothing (42%); 27% turned to SCCA Legal Clinic for help.

**Recent Developments in Financial and Legal Services**

- ❑ Financial Education, is being addressed as part of SCCAA's literacy program. A VISTA is working to form an Asset Development and Microenterprise Coalition. Community volunteers provide financial education in banking & savings, budgeting, debt-elimination and credit repair for community members, literacy students and SCCAA's housing program participants.
- ❑ SCCAA's Volunteer Legal Program reports increased requests for services, especially in the last year, with family law, housing, and consumer issues, including bankruptcy comprising the main presenting problems. Hispanic clients accessing this program have increased to comprise 32% of clients receiving services in 2008 and 2009, compared to 28% in 2004.
- ❑ The Dispute Resolution Center (DRC), formerly a county-run mediation department, merged in late 2009 with Volunteers of America Dispute Resolution Center. The DRC provides contracted services to the county and has secure funding from a surcharge on district and civil court filing fees. Services are available on a sliding income scale. Volunteer mediators provide low cost mediation, facilitation and training. [www.voaww.org/drc](http://www.voaww.org/drc)
- ❑ The Juvenile Detention Alternative Initiative (JDAI), begun in July 2009, is one of seven WA pilots. JDAI promotes system improvements resulting in less use of secure confinement without increasing criminal activity or failed court appearances. Skagit's program includes a focus on disparate Hispanic youth detention, which comprised about 33% of all referrals to the juvenile court and 36% of all juvenile detention admissions in 2009.
- ❑ Catholic Community Service's Family Immigration Program, opened in 2006, provides legal services in family immigration and citizenship, including family reunification, family petitions, immigrant visa and adjustment

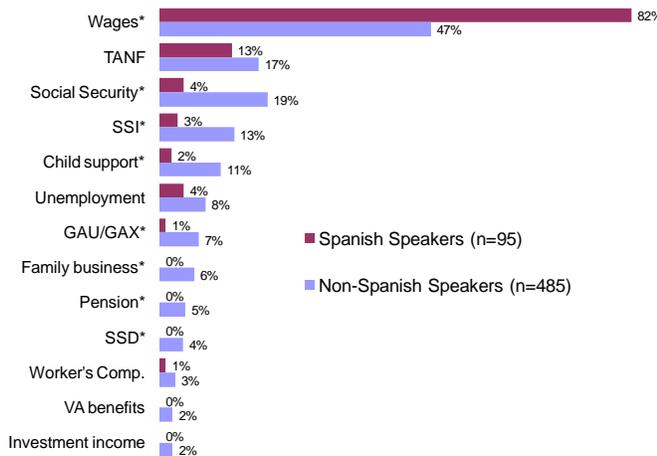
of status applications. Service to renew Lawful Permanent Resident cards, work permits and other documents is also provided. CCS can provide services in multiple languages. [www.ccsww.org](http://www.ccsww.org)

- ❑ Long-Term Care Ombudsman program for Skagit, Whatcom, Island, and San Juan was moved from Northwest Regional Council to SCCAA in January 2008. Many issues involve eviction and/or discharge of senior and disabled residents from area long-term care settings.



**Employment and Income:** Getting or keeping a job was a problem for nearly two in three (65%) of all respondent households. Respondents cite lack of available jobs, recent layoff, their own job skills, a physical or mental disability, and lack of transportation as the main barriers to employment for household members.

Compared to other respondents, clients who usually speak Spanish are more likely to have income from wages (82% compared to 47%), and less likely to have income from Social Security and SSI.



**Recent Developments in Employment Services**

- ❑ WorkSource Skagit Career Center ([www.WorkSourceNorthwest.com](http://www.WorkSourceNorthwest.com)), a one-stop comprehensive career center opened in 2006. Varied services are available in-person or on-line. Service numbers doubled in 2009 over those in 2008.
- ❑ Skagit Valley College partnered with eight school districts to obtain a \$24.4 million legislative allocation to establish the Northwest Career & Technology Academy to open in 2010. It will provide technical job-skills training to high school students.

- ❑ EDASC, providing assistance to those looking to start, sustain or expand a business, partnered with SVC's Business Resource Center to establish the Latino Business Retention and Expansion Initiative in 2004. A 2009 re-crafted mission offers access to capital and other resources to support Latino enterprises. ([www.skagit.org](http://www.skagit.org))

- ❑ Skagit Valley College's Integrated Basic Education and Skills Training (I-BEST), launched in 2006, pairs English as a Second Language (ESL)/Adult Basic Education (ABE) instructors with professional-technical instructors to provide dual literacy education and workforce skills.

- ❑ SCCAA became the Skagit contractor in 2007 for WorkFirst Community Jobs & Supported Work programs, providing paid and unpaid work experiences for TANF parents at nonprofit organizations and public agencies.

- ❑ SCCAA's volunteer center expanded in 2008 to the Skagit Volunteer Center, able to provide its volunteer and pre-employment opportunities 24/7 through on-line at [www.1800volunteer.org](http://www.1800volunteer.org) or linked at [www.skagitcap.org](http://www.skagitcap.org).

- ❑ Since 2007, Goodwill Job Training & Education has offered broader career services and computer training, the latter also for ESOL (English speakers of other languages). Their 5-month retail and merchandising program was discontinued in 2007.

- ❑ DSHS Working Connections Child Care monthly caseload in 2009 decreased 40% compared to the 2005 study. Services peaked in late 2008, then declined as service-related and manufacturing jobs also declined.



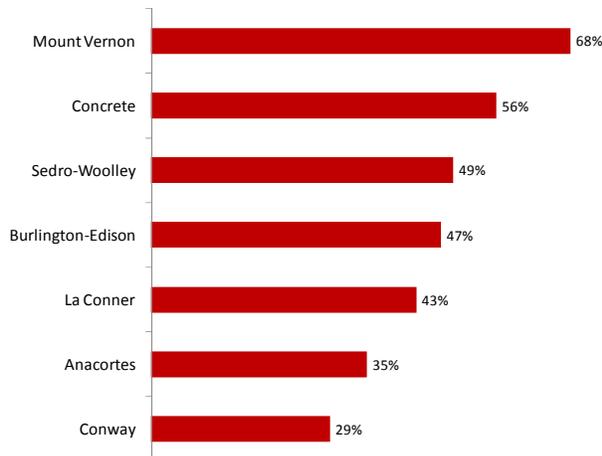
**Food and Nutrition:** 23% of clients say that someone in their household had gone hungry for lack of food.

- ❑ 80% of clients relied on one or more food assistance programs.

- ❑ Food stamps, food banks, Special Supplemental Nutrition Program for Women, Infants and Children (popularly known as WIC) are the most frequently mentioned assistance programs used.

- ❑ Among Skagit County school districts, Mount Vernon and Concrete exhibited the highest eligibility rates: 68% and 56% respectively during the current school year. Sedro-Woolley, La Conner, and Burlington-Edison each have

nearly half of their enrollment eligible for free or reduced price meals. Conway (29%) and Anacortes (35%) exhibit the lowest eligibility rates, near or exceeding one-third of enrollment.



**Recent Developments in Food and Nutrition Services**

- ❑ Skagit County's Food Bank Distribution Center (FDBC), purchased by Skagit County in 2007 and operated by SCCAA, shares space with Sedro Woolley's Helping Hands Food Bank. An expansion is planned to modify the existing plant to more efficiently serve 13 area food banks and five hot meal programs.
- ❑ Skagit Food Share Alliance, formed in 2008, works with local farmers to purchase locally grown produce for food banks and hot meal programs. A first-annual Bite of Skagit, fundraiser to support SFSA was held in 2009.
- ❑ Skagit's food banks provided 246 lbs of food/household in 2009 as compared to 227 lbs in 2005. SeaMar's food bank closed in mid-year 2009, shifting the load of homeless individuals formerly served at this operation to other area food banks.
- ❑ SCCAA oversees the Basic Food Outreach Program (BFO) for DSHS Region 3, a 5-county region. Income eligibility guidelines increased from 130% FPL to 200% in October 2008. Since 2005, households approved for food stamps in Skagit County have increased approximately 72% from 5,036 to 8,675, with one in seven Skagit County households relying on food stamps.
- ❑ Whole grains and fresh vegetables became part of the regular WIC package in 2009. Farmer's Market WIC food coupons (\$22,750)

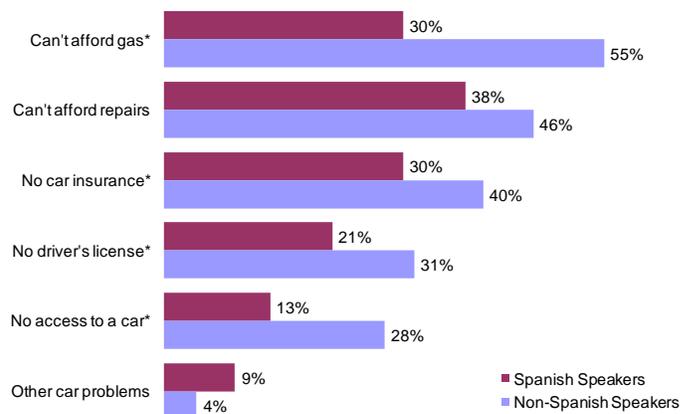
increase the nutritional value and variety of diets of low-income young families. WIC brings \$2,834,828 to local markets annually.

- ❑ Skagit County's Meals on Wheels served over 130,000 meals in 2009. Despite cuts in staff and funding in 2009, services are being maintained, partially through 250 volunteers.



**Transportation:** Almost half (47%) of respondent households say that transportation has been a major problem in the past year.

- ❑ 51% cannot afford gas; about half cannot afford car repairs; 38% have no car insurance, 25% have no access to a car, and 29% do not have a driver's license (compared to only 17% in 2005).
- ❑ Spanish speaking clients were significantly less likely to report having had a transportation problem in the past year (39% compared to 47%). When asked about specific types of transportation problems, Spanish speakers were less likely to report most problems, significantly: not being able to afford gas; not having insurance; not having a driver's license; and not having access to a car.



- ❑ 22% of households regularly use Skagit Transit, up significantly from 13% in 2005. Of those that don't, about half (51%) say they prefer to use their car; 20% say that the bus schedule does not work for them; 19% say there is no bus stop close to home, and 13% say there is no bus service where they are going.

**Recent Developments in Transportation Services**

- ❑ Requests come to many Skagit service providers for gas vouchers, auto repair, and SKAT passes. Gas prices, which peaked in

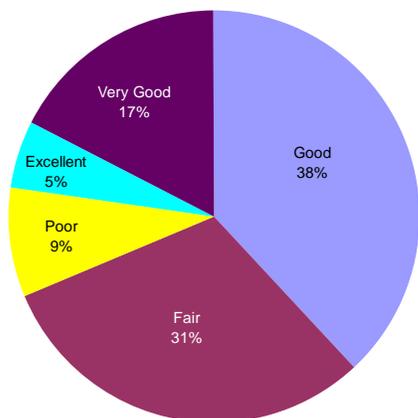
Summer 2008 at \$4.37/gallon in the Seattle area, have leveled to an average of \$2.80/gallon, compared to 2005 prices which fluctuated from a low of \$1.75 to \$2.80.

- Skagit Transit (SKAT) provides service throughout most of Skagit County, with 13 fixed routes, up from 10 in 2005, and 11 Dial-A-Ride routes, in addition to a Vanpool program for commuters. Expanded transit service beginning in May 2009, resulted in increased service hours, additional trips on the Everett Express, new fixed and Dial-a-Ride routes, expanded Saturday service, and the re-introduction of Sunday service in urban areas, efforts funded by sales tax dollars resulting from the approval of the 2009 *Proposition 1*. Other services link passengers to Island and Whatcom County transits. Regular monthly fare cards are \$25/month, up from \$15 in 2005. [www.SkagitTransit.org](http://www.SkagitTransit.org).



**Health and Healthcare:** A majority of respondents rate their general health positively, reporting good (38%), very good (17%), or excellent (5%) health status. About a third of respondents said their health was fair (31%) and less than ten percent had poor health.

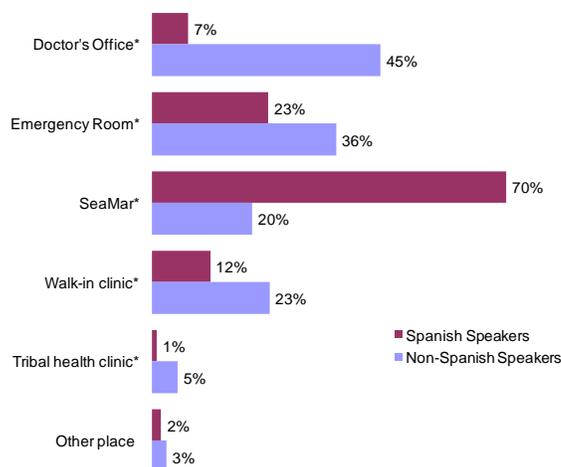
**Respondent Health Status**



Sampled households were divided into three roughly equal sized groups based on income. Those in the lowest income group were nearly twice as likely to report poor or fair health as those in the highest income group.

- Uninsured:** Among low-income Skagit County clients, 28% are uninsured (34% in 2005).
- Primary care:** Survey respondents reported that they usually get their medical care from a private doctor's office (39%), a community health clinic such as Sea Mar (29%), or the hospital emergency department (34%).

Spanish speaking clients were much more likely than others to seek medical care at SeaMar, though less likely to seek medical care at a doctor's office, the emergency room, a walk-in clinic, or the Tribal health clinic.



- More than a third of respondents reported that someone in their household had a problem getting needed medical care (37%) or dental care (40%) in the past 12 months. Almost as common, were problems in getting needed prescriptions (31%). By far, the most common reasons for not receiving any of four types of health care (medical, dental, mental health, or prescriptions) are the high cost and not having insurance. Not knowing where to go was a significant barrier for mental health care (23%).

**Recent Developments in Health Care Services**

- Skagit County Alliance for Health Care Access (SCAHA) formed in 2009 to address health care access for the uninsured, those with Medicaid or Medicare, and undocumented individuals.
- Apple Health for Kids is free health/dental coverage for children, citizen and non-citizens, 18 or younger in families below 200 percent of the Federal Poverty Level. Families up to 300% FPL may be eligible for coverage for a low cost.
- Washington State Basic Health monthly premium increased from \$36 to \$61.60 with a yearly deductible increase from \$150 to \$250. With enrollment frozen in early 2009 and further cuts in late December, its future is uncertain.
- WA's Medicaid-funded Maternity Support Services (MSS) received major cuts in 2009.

New criteria restrict services for low risk women, with highest service levels for women at risk for premature birth. In 2007, 59.8% of Skagit births were Medicaid-covered, compared to WA's 47.3%. State deficits still threaten MSS.

- ❑ 2009 expansion of Skagit Valley Hospital allowed placement of a Veteran's Health Care Center as well as an urgent care clinic for SeaMar on the SVH campus.
- ❑ Medicaid reimbursable dental care was supplied to 9,602 people in Skagit County in 2008, of which 2,216 were adults (18-64) and 212 were seniors (65+). Currently, nine dental clinics in Skagit County accept medical coupons.
- ❑ SeaMar Dental Clinics provide 4 operatories in Burlington and 5 in Mount Vernon, serving low-income adults and children on a sliding-fee or with medical coupons. The Mount Vernon clinic plans to expand to a total of 10 operatories.
- ❑ The ABCD program (Access to Baby and Child Dentistry), new to Skagit County in 2004, is overseen by the health department. It provides enhanced reimbursements to dentists for serving Medicaid-eligible infants through age five with fluoride treatments and parent education on early teeth and gum care. ABCD

often provides points of entry for other family members to a dental home. The health department also applies free dental sealants to qualified 2nd grade children in schools that have a high threshold of enrollments eligible for free/reduced school lunches. The sealant program, in its tenth year, has brought about significant improvements in children's dental health.

- ❑ SCCAA's Mobile Dental Unit conducted 16 clinics in 2009, compared to 28 in 2005, the reduction spurred by competition from other communities for Northwest Medical Team's mobile unit as well as difficulty in recruiting dentists. A 3-year VISTA dental care access project is addressing this community problem.
- ❑ Catholic Community Services (CCS) began a school-based mental health program in 2008 serving K-8 in all school districts. Masters level therapists served 329 families in 2008-09. The program is funded by one tenth of one per cent sales tax dollars
- ❑ Peer Connection Center, a drop-in day activity center for individuals with diagnosed mental health conditions opened in 2007, serves up to 1,500 peers per month. Start-up funds, partially met through the county's one-tenth of one percent state taxes, will expire at the end of 2009. The center faces serious financial challenges to maintain its current service level.

**Low-income service gaps.** Low-income client survey respondents and a separate sample of 92 Skagit County social and health service provider staff (in a separate survey) rated both the *importance* and the *availability* of 15 categories of services for low-income people in Skagit County. Clients rated the importance and availability of services to their own household; providers rated the importance and availability of the services to their client population. Below, we examine the similarities and differences in client and provider perspectives as a method of analyzing low-income service gaps in Skagit County.

**Gap analysis using importance-availability coordinate system.** Because respondents rated these services on five-point scales,<sup>1</sup> one way to analyze these data is to calculate the average *importance* and *availability* scores for each service. These data form the basis of an *importance-availability* coordinate rating system (see figures on following page). The average importance and availability ratings among clients and providers were calculated and plotted on the graph. The lines making up the “*crosshairs*” of each graph represent the average importance score and the average availability score for each group of respondents.

The importance-availability charts are divided into quadrants that rate low-income services as follows:

*Quadrant I*    *Services that rank above average in importance, but below average in availability*

*Quadrant II*    *Above average in importance and availability*

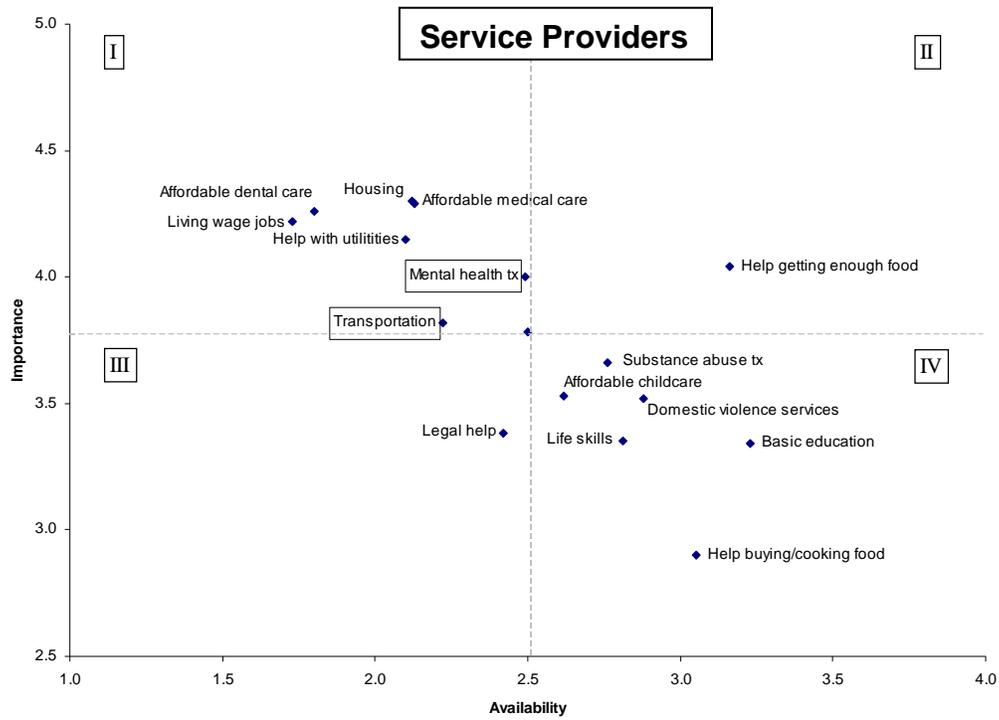
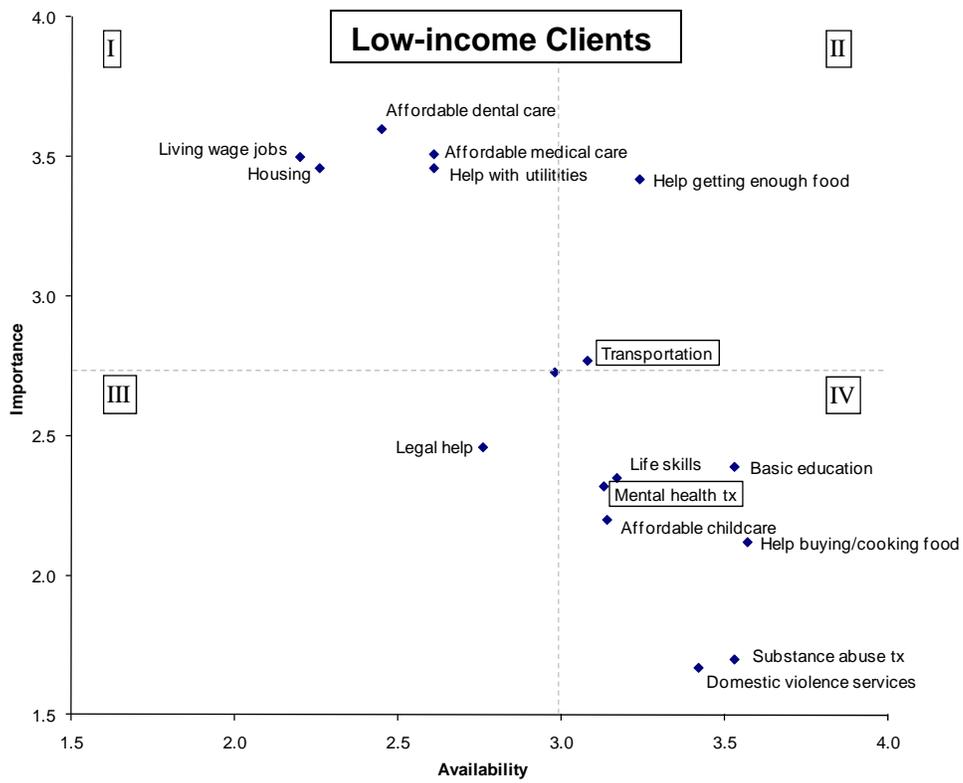
*Quadrant III*    *Below average in importance and availability*

*Quadrant IV*    *Below average in importance, but above average in availability*

Individuals and organizations planning for future services may want to pay particular attention to the services that appear in the first quadrant (labeled “I”) of both the low-income client and service provider graphs. These are the services that, on average, both groups agree are very important to low-income households and hard to access. For this study, we find that both groups agree that affordable housing, medical and dental care, living wage jobs, and energy assistance are in high demand but relatively scarce (service providers would add transportation and mental health services to that list). This should not be interpreted to mean that the other services are not worthy of attention. Certainly there are many households in dire need of these services and not enough resources to satisfy that need. However, the services that appear in quadrant I are those for which the gap between need and supply is the largest, based on low-income client and service provider perceptions.

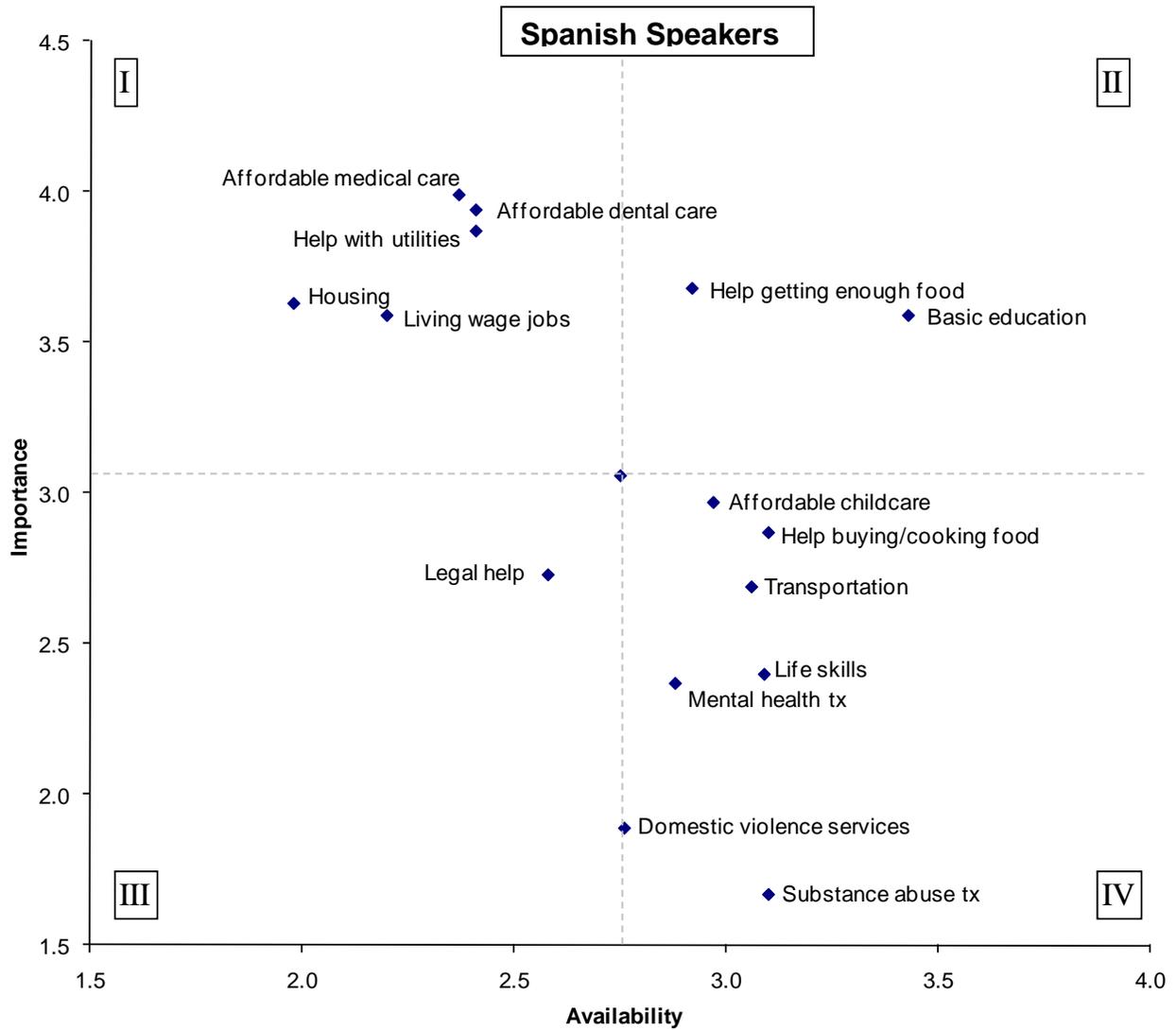
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<sup>1</sup> Importance scale ranged from 1, for “*not important*” to 5, for “*extremely important*”; Availability scale ranged from 1, for “*very hard to get*” to 5, for “*very easy to get*”



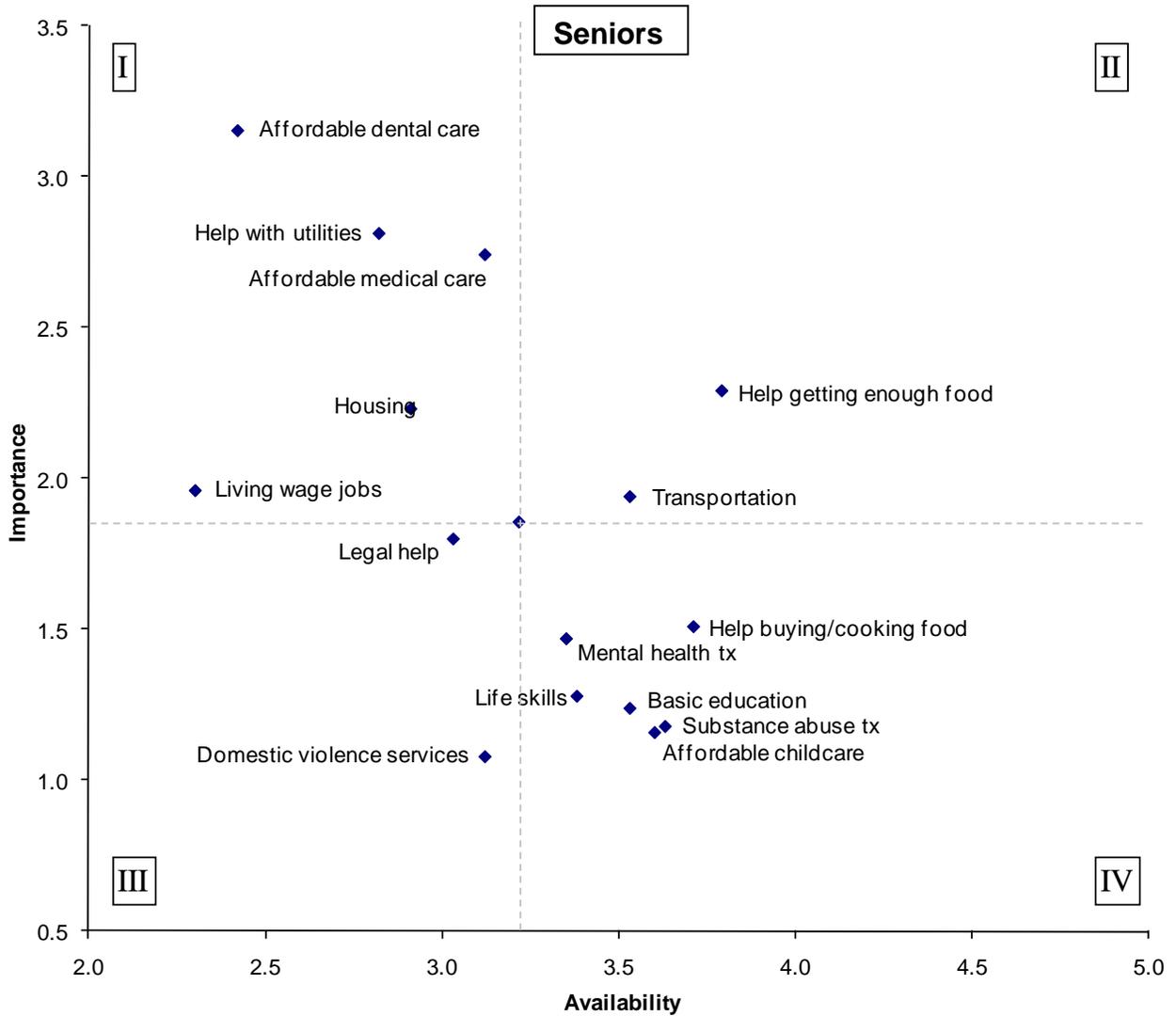
**Spanish-speaking consumers:** Clients who normally speak Spanish at home consider the same services above average in importance, yet below average in availability: affordable housing, dental and medical care, energy assistance and

living wage jobs. Spanish speaking clients tend to assign higher importance scores to adult basic education. They also see transportation as slightly less important and more available.



**Senior consumers:** Compared to the overall sample of low-income clients, senior clients (60 years and older) perceive the same services to be high in importance and low in availability; however, in 2005, seniors identified only affordable housing and dental care as high unmet needs. Not surprisingly, seniors

assign lower importance to child care and living wage jobs. And while seniors assign high importance to energy assistance and affordable medical care, they perceive these services as relatively easy to get compared to all low-income clients.



## Introduction

### Skagit County Community Action Agency

Skagit County Community Action Agency (SCCAA) is part of a nationwide network of Community Action Partnerships (CAPs), community-based organizations mandated to provide services and to advocate for the interests of the poor. As with other CAPs, Skagit County Community Action Agency serves as administrative umbrella for numerous local programs that would be unable to stand individually. Cost-effectiveness, flexibility in programming, responsiveness to community need, and local control has made local CAPs increasingly attractive to community leaders.

While SCCAA opened its doors in 1979, the majority of the nation's approximately 1,000 CAPs were created in 1964, following the signing of the Economic Opportunity Act by President Lyndon Johnson. CAPs are now recognized nationally as lead agencies for any program or activity intended to assist low-income people. Particular emphasis is placed on developing programs and services that promote self-sufficiency. In accordance with one of its major federal mandates, the CAP network assumes a major role of understanding the dimensions of poverty at the local level and identifying gaps in services to the local low-income population, and working with community partners and our own programming to fill those gaps. Thus, this Low-Income Needs Assessment enables SCCAA to meet this major mandate — to study poverty at the local level and work toward ending it.



### Project Context

The issue of poverty is not new, yet it has a significant impact on our entire community. For a long time, communities around the country and around the world have been attempting to evaluate and remediate factors that contribute or lead to poverty, targeting both generational issues and situational life events.

Poverty is often defined by quantitative measures, such as a threshold of \$1,838 per month for a family of four (2009 Guidelines, Health and Human Services). However, many aspects of poverty are not reflected in statistical indicators. Insufficient income to meet basic needs is a typical feature of most definitions of poverty. Nevertheless, this in itself does not take into account the myriad social, cultural, and political

aspects of poverty. Poverty is not only deprivation of economic or material resources, but also a violation of human dignity.

Statistics from a wide variety of sources indicate the extent of the poverty problem in our community:

- In 2009, nearly half (49%) of school children in Skagit County schools qualify for the free or reduced-price lunch program. In Mount Vernon, that figure is 65% (Washington State Office of the Superintendent of Public Instruction).
- In 2008, 11% of Skagit County residents lived below the poverty level. And more than half (56%) of single parent families with young children live in poverty. We don't yet know these statistics for 2009, but it is almost certainly higher (U.S. Census Bureau, American Community Survey).
- Median household income in the County has declined two years in a row, from \$51,891 in 2007 to \$48,606 in 2009. Over the same period Washington State median income declined from \$54,086 to \$52,413 (Washington State Office of Financial Management).

### **Purpose of the Low-Income Needs Assessment**

Skagit County Community Action Agency, working with the support of other service providers, local government and the private sector, produces a comprehensive countywide needs assessment for the following purposes:

- Explore and illustrate the dimensions of poverty in Skagit County,
- Provide a strategic planning tool for agencies, organizations and individuals seeking to confront poverty in Skagit County, and
- Present a locally significant and reliable study for use by local communities and funders and to attract resources necessary to combat poverty in Skagit County.

### **Collecting Information**

This Low-Income Needs Assessment (LINA) presents the findings of a low-income client community survey. We begin by describing the demographic characteristics of the sample of 656 low-income households who completed a self-administered questionnaire (in English or Spanish). The LINA presents detailed analyses of client survey data within several general categories of need and services: housing, child development and parenting, information and literacy, financial and legal assistance, food and nutrition, transportation, healthcare.

## Poverty

Poverty is hunger. Poverty is lack of shelter. Poverty is being sick and not being able to see a doctor. Poverty is not having access to school and not knowing how to read. Poverty is not having a job, is fear for the future, living one day at a time. Poverty is losing a child to illness brought about by unclean water. Poverty is powerlessness, lack of representation and freedom.

Most often, poverty is a situation people want to escape. So poverty is a call to action -- for the poor and the wealthy alike -- a call to change the world so that many more may have enough to eat, adequate shelter, access to education and health, protection from violence, and a voice in what happens in their communities.

To know what helps to reduce poverty, what works and what does not, what changes over time, poverty has to be defined, measured, and studied -- and even experienced. As poverty has many dimensions, it has to be looked at through a variety of indicators -- levels of income and consumption, social indicators, and indicators of vulnerability to risks and of socio/political access.

## How is poverty measured?

Following the Office of Management and Budget's (OMB) Statistical Policy Directive 14, the U.S. Census Bureau uses a set of money income thresholds that vary by family size and composition to determine who is poor. If a family's total income is less than that family's threshold, then that family, and every individual in it, is considered poor. The poverty thresholds do not vary geographically, but they are updated annually for inflation using the Consumer Price Index. The official poverty definition counts money income before taxes and does not include capital gains and noncash benefits (such as public housing, Medicaid, and food stamps).

The poverty guidelines are another version of the federal poverty measure. They are issued each year in the Federal Register by the Department of Health and Human Services (HHS). The guidelines are a simplification of the poverty thresholds for administrative purposes -- for instance, they are used in determining financial eligibility for certain federal programs. Programs using the guidelines (or percentage multiples of the guidelines for instance, 125 percent or 185 percent of the guidelines) in determining eligibility include Head Start, the Basic Food Program (formerly, the Food Stamps Program), the National School Lunch Program, the Low-Income Home Energy Assistance Program, and the Children's Health Insurance Program. Note that in general, cash public assistance programs (Temporary Assistance for Needy Families, or TANF, and its predecessor Aid to Families with Dependent Children, and Supplemental Security Income) do NOT use the poverty guidelines in determining eligibility.

## Poverty by the Numbers

*Poverty guidelines*, as established by the Federal Office of Management and Budget, are shown in Table 1. The guideline of 125% of the federal poverty level is used as an eligibility criterion for many programs that assist persons in Skagit County.

**Table 1 Federal Poverty Guidelines for Year 2009**

FAMILY SIZE	INCOME PER MONTH (\$) AT 100% OF FPL	MONTHLY ELIGIBILITY LIMITS AT 125% OF FPL (\$)	ANNUAL LIMIT AT 125% OF FPL (\$)
1	\$903	\$1,128	\$13,538
2	\$1,214	\$1,518	\$18,213
3	\$1,526	\$1,907	\$22,888
4	\$1,838	\$2,297	\$27,563
5	\$2,149	\$2,686	\$32,238
6	\$2,461	\$3,076	\$36,913
7	\$2,773	\$3,466	\$41,588
8	\$3,084	\$3,855	\$46,263

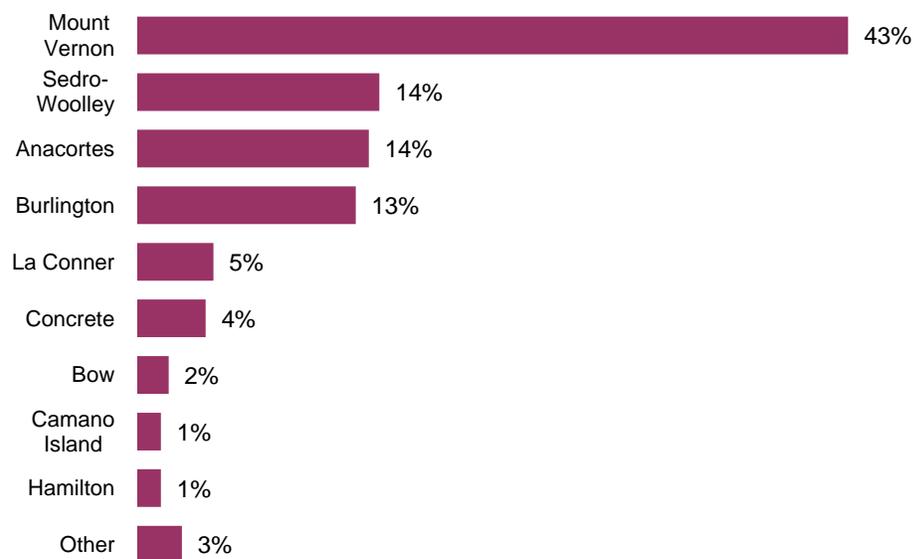
The U.S. Census Bureau estimates that 11% of the Skagit County population had household income at or below 100% of the federal poverty level in 2008 (the last year that estimates are available). Of Skagit County's single mother families with children less than five years old, 56% live in poverty.

## Survey Respondents: Who Are They?

Overall, 656 households responded to the survey. These households include a total of 2,215 persons. Because there is no existing list of all low-income households (or persons) in Skagit County, it is not possible to draw a random sample from a well-defined population. Rather, in this study, the team chose to intensively sample as many unduplicated households as possible from social and health service sites throughout the county, including outreach to home-bound individuals known by these service providers.

### Geographic Distribution

Forty-three percent of survey respondents live in Mount Vernon (Figure 1). The next most common cities are Sedro-Woolley, Anacortes, and Burlington.<sup>2</sup>



*Figure 1 Geographic distribution of survey respondents (N=635)*

### Gender and Age

Three in four survey respondents were female (75%). They ranged in age from 18 to 86 years old. The mean and median ages were 38.2 and 35 years, respectively.

### Duration of Residence in Skagit County

Survey respondents were asked how long they have lived in Skagit County. The mean and median number of years lived here are 15 and 10 years, respectively. Over three-quarters (77%) of respondents have lived in Skagit County for four years or longer.

<sup>2</sup> Other cities include Lyman, Rockport, Clear Lake, Conway, Lake Stevens.

### Household size and family status

The average household size of the survey sample was 3.6 persons and the median household size was three persons. 62% of households included children, and 43% included children 0-5 years old. 17% of households included at least one senior (at least 60 years old).

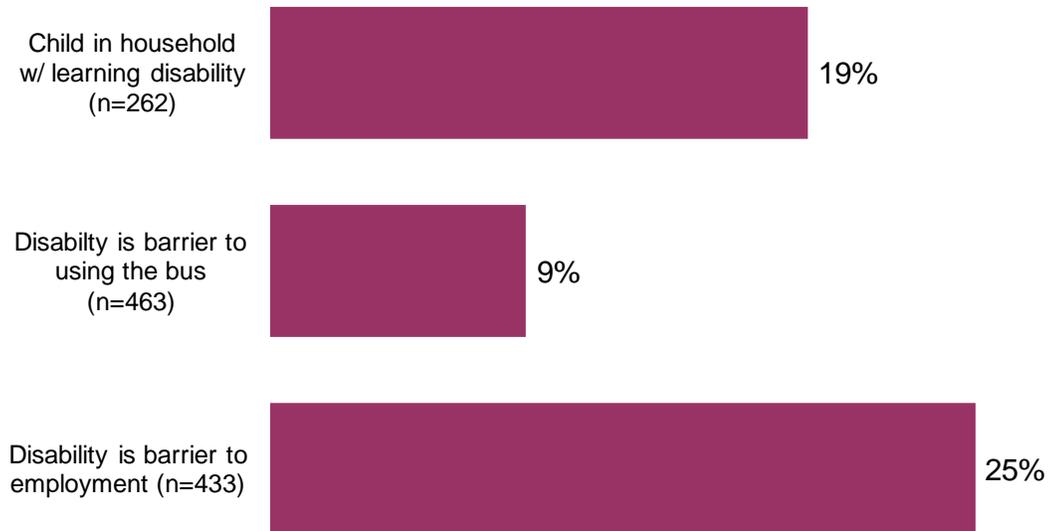
A small number (6%) of respondents said that they have an aging parent living with them, and 5% of households with children at home said that they were a grandparent raising a grandchild.

### Veteran status

When asked if anyone in the household had served in the military, 15% indicated there was at least one veteran in the household (compared to 12% in 2005).

### Disability

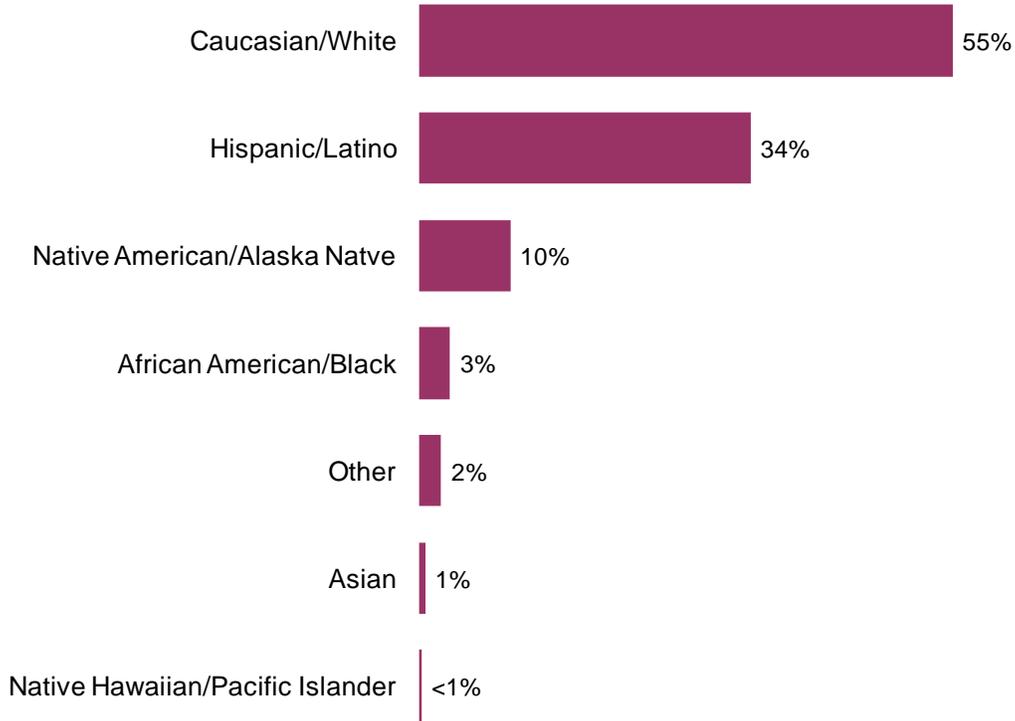
Though survey respondents were not asked directly if anyone in their household has a disability, they were asked if a disability is a barrier to using the SKAT bus (9%), or securing employment (25%). Families with children were also asked if they had a child with a learning disability. Nearly one in five families (19%) reported having a child with a learning disability.



**Figure 2** Percent of all households with a person whose disability limits one or more activities (N=612)

### Race and Ethnicity

In this survey, respondents were invited to check all race and ethnicities that applied. More than half of survey respondents identified as white (55%), 10% are Native Americans, 3% African American, 1% Asian and less than 1% are Hawaiian or Pacific Islanders. One in three survey respondents (34%) identified themselves as Hispanic or Latino (Figure 3).<sup>3</sup>

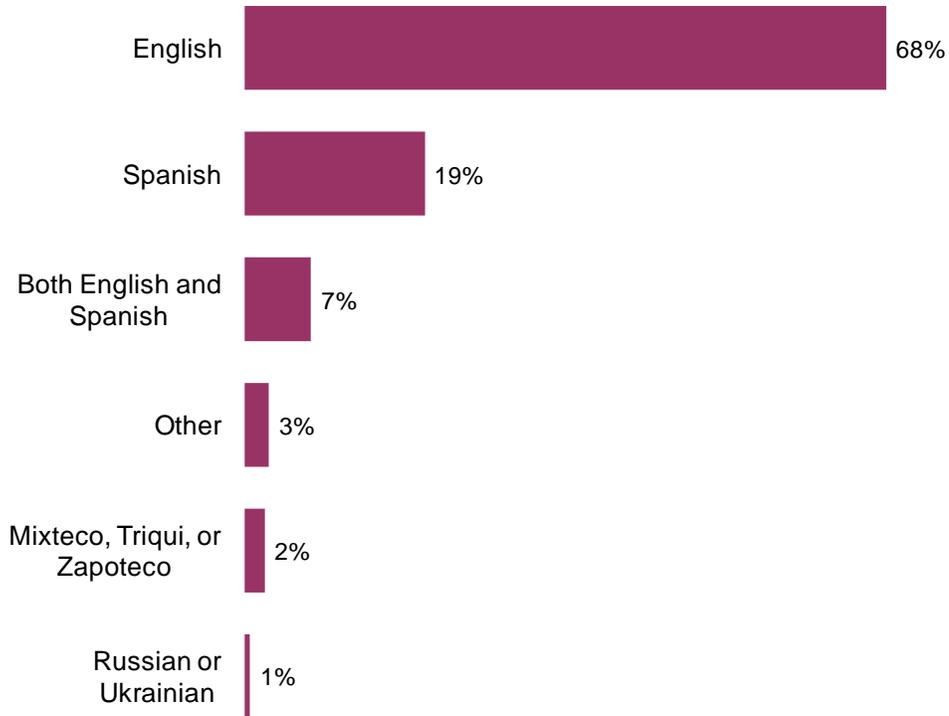


**Figure 3 Respondent race and ethnicity (N=619)**

<sup>3</sup> 52% of respondents identified as non-Hispanic white-only, while the remaining respondents were non-white or of mixed race/ethnicity. Other races listed include Azerbaijani-Farsi-American (1); First Nations/Aboriginal (1); German (1); Greek (1); Indio Native Oaxaca Mexican (1); Irish, Finnish, Croatian (1); Mixed/Multi-Ethnic (3); and Ukrainian (3).

**Language**

Many survey respondents speak a language other than English at home (Figure 4). While the vast majority speak English (68%), and the next most common is Spanish (19%). Seven percent of clients wrote in that they speak both Spanish and English at home. In fact, most respondents who spoke another language at home also spoke English. Other languages included Mixteco, Triqui, or Zapoteco (2%); Russian or Ukrainian (1%), and less than one percent spoke German; Arabic; Coast Salish; Indian American; Indonesian; Marshallese; and American Sign Language (ASL).



*Figure 4 Respondent language usually spoken at home (N=590)*

### Listening to the experiences of our local Slavic Community

*While the Slavic population has a significant presence in Skagit County, it is difficult to determine their true numbers since it is not a racial/ethnic category. Russian language surveys were used in the 2005 LINA study, but accounted for a very small percentage of respondents. While resources were not expended for a separate survey questionnaire in the Russian language for the 2009 study, a Russian/Ukrainian focus group was conducted to draw input from this community to inform the process.*

*Ten immigrant households, all congregants of a 200-member Slavic gospel church, provided insights about the unique challenges they face. Other Slavic immigrants who came to this country under non-religious interests, are interspersed in the Skagit community, and were not addressed in these interviews.*

*Participants expressed appreciation for the opportunity to talk about their needs. Discussions centered around employment, health care, housing, food, transportation, child care, financial stability, and legal issues. Their children ranged in age from infants to young adults, with numbers ranging from two to eight. Two households take care of aging parents, and another two women were recent widows. Length of time in the U.S. ranged from nine months to 11 years, with language skills spanning from no English language skills, to speaking and understanding some English, to the host and the interpreter who have good English skills.*

*The church is central in providing friendships and support, including support for those with marriage difficulties, depression or other mental health issues. Families report using social service programs including food banks, DSHS, SVC & Goodwill language classes, and SCCAA services: WIC, energy, critical needs, literacy, and housing programs. The focus group host works at SCCAA and likely serves as a “magnet” in attracting Slavic families to SCCAA and in making them comfortable to ask for help.*

*The economic downturn has had a profound, negative impact – those that had regular jobs have lost jobs or at best, have had their hours cut. Most men have a building trades background, while the group’s interpreter has a Russian law degree and is now pursuing an MBA and hopes to help fellow Russians develop their own business. Poor English skills were cited by participants as a major barrier to employment. As all use a family car, spiraling gas prices heavily impact everyone. One of the families that bought a home is now fearful of losing it, and reports other families in the same situation. All report having extreme difficulty paying rent.*

*All children have medical coupons, while none of the adults have health coverage. Adults report they travel to Russia for necessary dental care. When ill, they stay home to get well and do not go to a doctor or a hospital emergency room. Several expressed skepticism and distrust of immunizations. Women do not receive annual gynecological care, but do use medical coupons for prenatal care.*

*Families use HeadStart, but in general no other childcare or preschool. Children attend public school through elementary, then are typically home-schooled, possibly re-entering public school for their senior year. Families report teenage children as “not rebellious”, that they are taught good family values and are for the most part well behaved.*

*All families have bank accounts. While not all use credit cards, those that do report problems in understanding rules around getting bills paid by the due date, and some have had to face penalties and extra credit charges.*

*While the general perception is that Slavic immigrants are educated, resourceful, and pick up English skills rather quickly, this is not always so. Women are generally stay-at-home mothers and have limited exposure to English, except perhaps through television. Participants seemed willing to volunteer, and this may be an avenue to interact with other community members.*

## Employment, Education, Finance and Legal

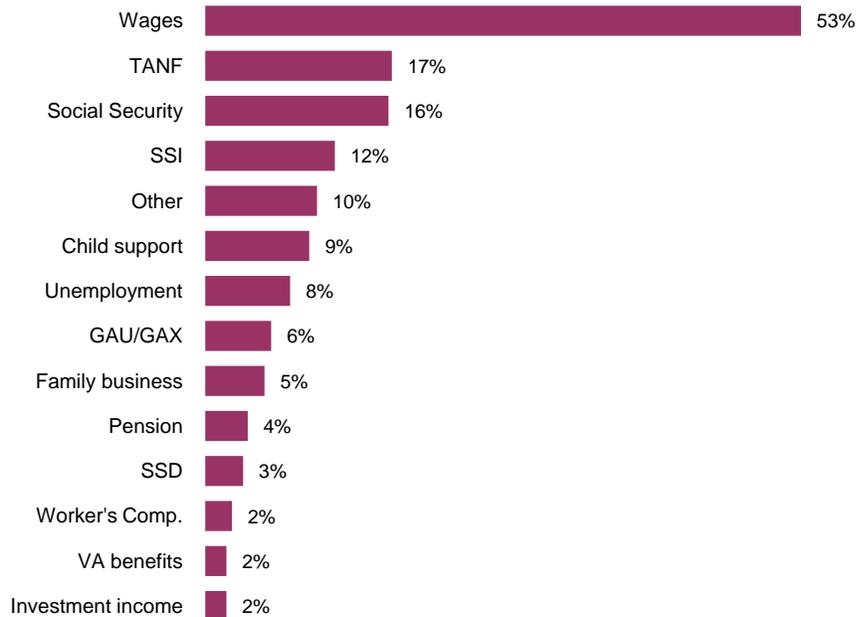
### Income

The mean monthly income from all sources for survey respondent households is \$1,211 and the median monthly income is \$1,000 (Table 2). Monthly household incomes ranged from \$0 to \$5,000 per month. The median monthly income ranged from \$769 for single-person households to \$1,345 for households of eight or more.

**Table 2 Respondent household monthly income by household size**

Household size	Number of households	Mean	Median	Minimum	Maximum
1	84	\$ 845	\$ 769	\$ 0	\$ 2,990
2	70	\$ 1,100	\$ 899	\$ 0	\$ 4,500
3	66	\$ 1,036	\$ 800	\$ 0	\$ 3,900
4	71	\$ 1,445	\$ 1,400	\$ 100	\$ 3,500
5	50	\$ 1,453	\$ 1,400	\$ 0	\$ 4,500
6	31	\$ 1,600	\$ 1,500	\$ 0	\$ 5,000
7	20	\$ 1,452	\$ 1,350	\$ 0	\$ 4,000
8+	12	\$ 1,506	\$ 1,345	\$ 780	\$ 2,800
Total	409	\$ 1,211	\$ 769	\$ 0	\$ 2,990

More than half of respondent households (53%) include at least one member with employment income (Figure 5). The next most frequently reported income sources are Temporary Assistance for Needy Families, referred to as TANF (17%); Social Security (16%); and SSI (12%).



**Figure 5 Household income sources (N=580)**

Spanish speaking respondents were much more likely to report earned income and less likely to report all other types of income.

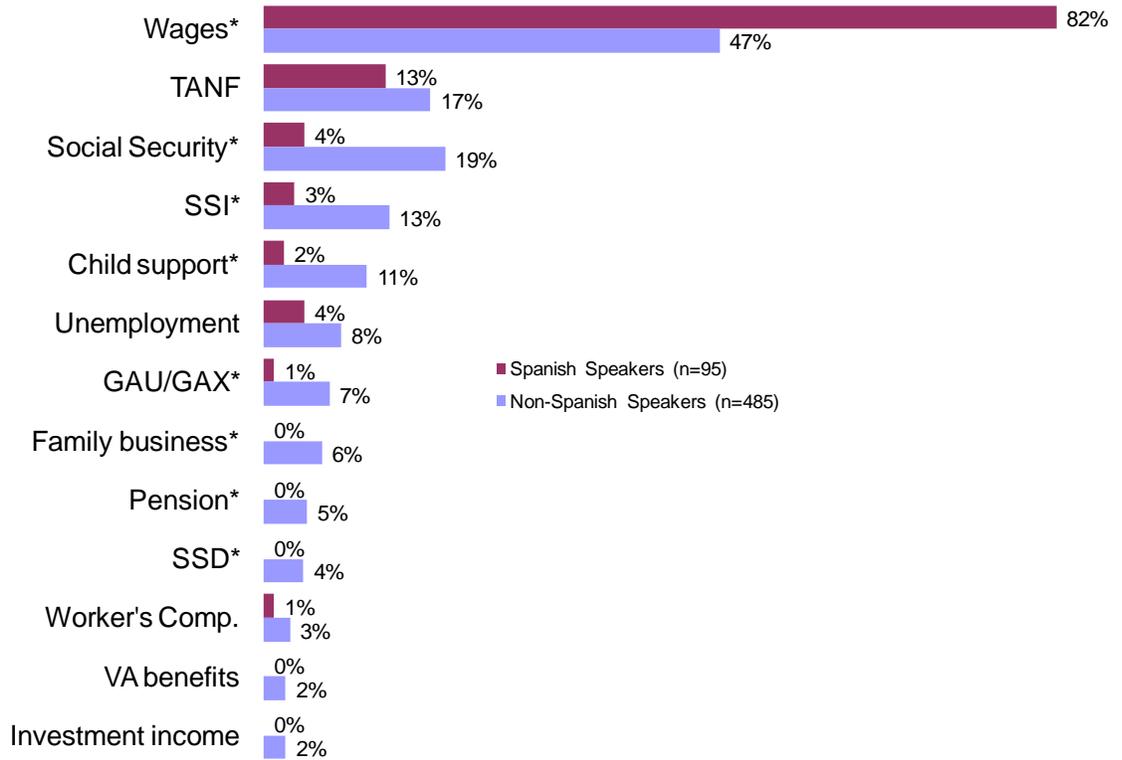


Figure 6 Household income sources - Spanish speakers compared to other respondents (\*difference is statistically significant)

### Poverty Status

Adjusting for family size, the proportion of survey respondents who report household income at or below the federal poverty level (FPL) is 73% (Table 3); those households at or below 125% of FPL account for 84% of respondent households.

Table 3 Low-income respondent households by poverty status and household size

Household size	Number of respondent households	Federal Poverty Level (FPL) threshold Income per month (\$)	% of Skagit County low-income households at or below FPL threshold	Monthly income eligibility limits at 125% of FPL (\$)	% of Skagit County low-income households at or below 125% FPL	Number of respondent households at or below FPL threshold	Number of respondent households at or below 125% FPL
1	85	\$ 903	60%	\$1,128	75%	51	64
2	75	\$ 1,214	67%	\$1,518	80%	50	60
3	66	\$ 1,526	82%	\$1,907	88%	54	58
4	73	\$ 1,838	70%	\$2,297	86%	51	63
5	52	\$ 2,149	81%	\$2,686	89%	42	46
6	32	\$ 2,461	78%	\$3,076	91%	25	29
7	20	\$ 2,773	90%	\$3,466	95%	18	19
8	7	\$ 3,084	100%	\$3,855	100%	7	7
<b>All households</b>	<b>410</b>		<b>73%</b>		<b>84%</b>		

### Employment & Business

About two-thirds of survey respondents (65%) said that getting or keeping a good job had been a problem for someone in their household (compared to 58% in 2005). Spanish speaking respondents were significantly more likely to report difficulty finding and keeping a good job than other respondents (72% compared to 63%). Top reasons for difficulty getting or keeping a good job include too few jobs (60%); recent layoffs or reduced hours (32%); physical or mental disability (25%); lacking the right kinds of skills (43%); and lack of transportation (30%). Other employment barriers indicated by just a few respondents included pregnancy and parenting, being retired or too old to work, and current enrollment in school.

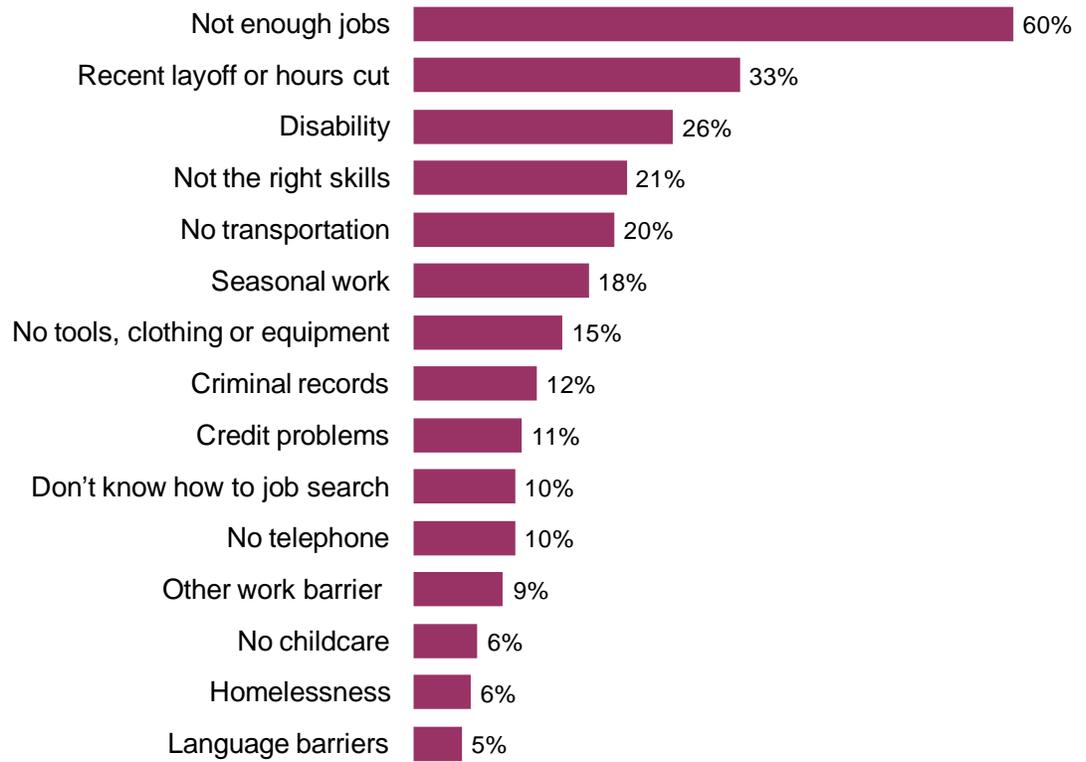
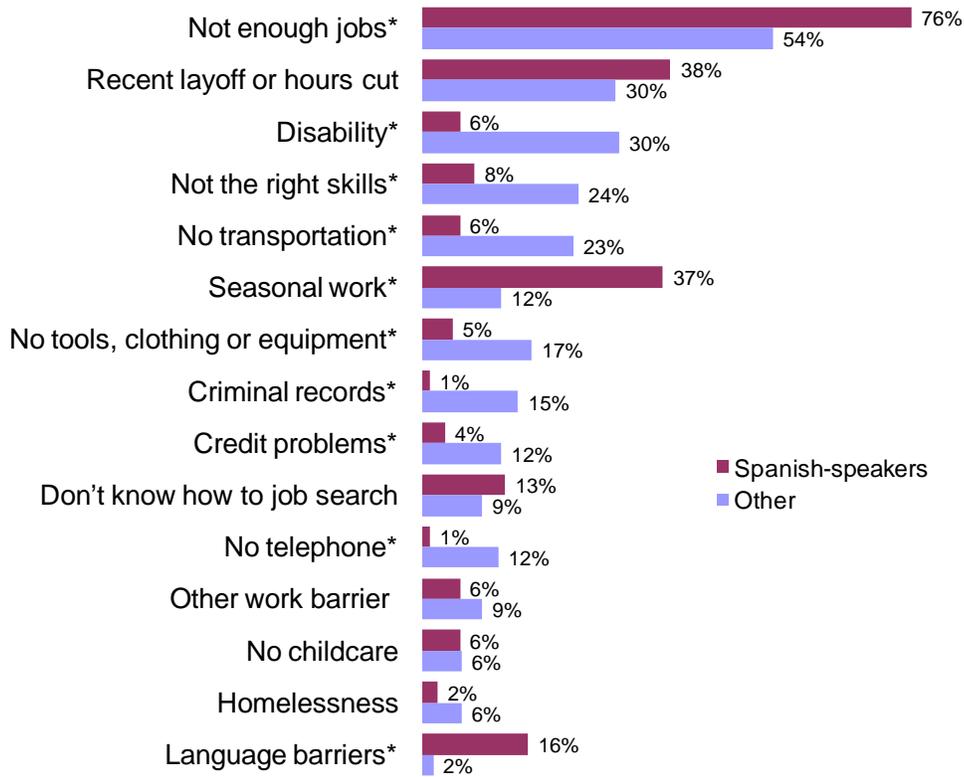


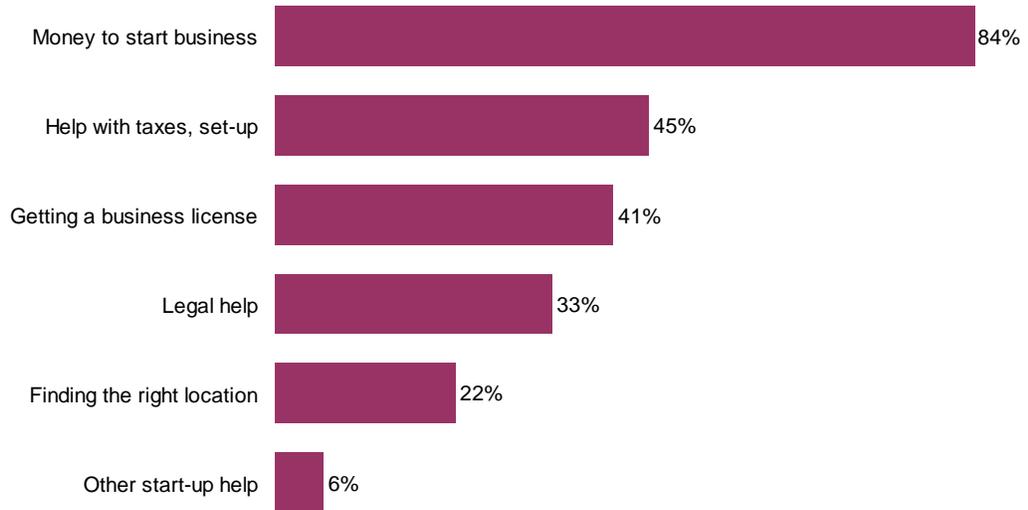
Figure 7 Reason why getting or keeping a good job is hard for household (n=423)

Spanish speaking respondents were significantly more likely to report not enough jobs, seasonal work, or a language barrier as reasons why it is hard to find a keep a good job. They were less likely to report most other employment barriers, such as disability, transportation, not having the right skills or equipment, and issues with credit or criminal history.



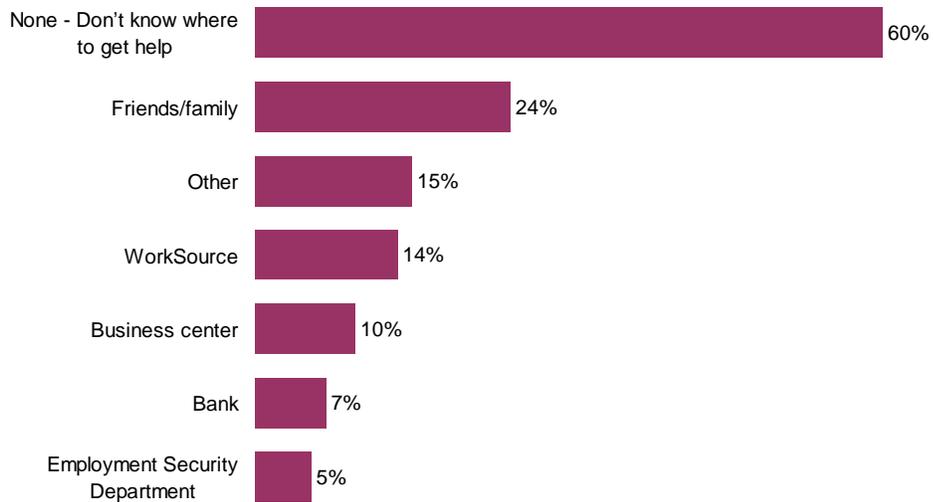
**Figure 8 Reason why getting or keeping a good job is hard for household - Spanish speakers compared to other respondents (\*difference is statistically significant)**

When asked if they had started a new business in the past 12 months or planned to start one in the coming year, the majority of the respondents said no (92%), a few did not know (3%), and 5% said answered yes. The primary barrier to starting a business was start-up funds (84%), almost twice as common as help with taxes and set-up (45%), and getting a business license (41%).



**Figure 9** Main concerns about starting a new business (n=69)

The majority of respondents did not know where to go for help starting up a business (60%). Those that did get help, were most likely to get help from friends or family (24%), or other sources (15%). Fewer respondents sought help at formal institutions such as WorkSource, a bank, or business center.



**Figure 10** Services used for help starting a business (n=74)

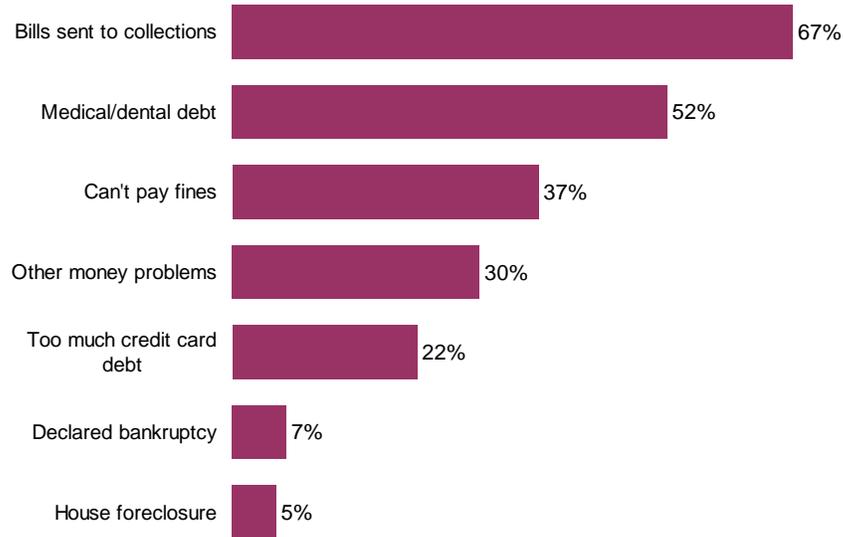
Respondents described a wide array of business start-up ideas. Many wanted to start a service oriented business, including child care, adult day care, pet care, cleaning, massage, and catering. Others were interested in construction (3), manufacturing, handyman, or tool repair services. Business ideas also included computer, interpreting, legal, and dating services. Still others dreamt of their own espresso stand or restaurant. Some respondents wanted to go into the retail sector (5), selling everything from clothes and DVD's to Magic cards and outdoor ponds. Many were also interested in making or selling handmade crafts, such as furniture (2), jewelry (2), photography (2), and other arts.

### **Employment & Business Recent Developments**

- WorkSource Skagit Career Center ([www.WorkSourceNorthwest.com](http://www.WorkSourceNorthwest.com)), a one-stop comprehensive career center opened in 2006. Varied services are available in-person or on-line. Service numbers doubled in 2009 over those in 2008.
- Skagit Valley College partnered with eight school districts to obtain a \$24.4 million legislative allocation to establish the Northwest Career & Technology Academy to open in 2010. It will provide technical job-skills training to high school students.
- EDASC, providing assistance to those looking to start, sustain or expand a business, partnered with SVC's Business Resource Center to establish the Latino Business Retention and Expansion Initiative in 2004. A 2009 re-crafted mission offers access to capital and other resources to support Latino enterprises. ([www.skagit.org](http://www.skagit.org))
- Skagit Valley College's Integrated Basic Education and Skills Training (I-BEST), launched in 2006, pairs English as a Second Language (ESL)/Adult Basic Education (ABE) instructors with professional-technical instructors to provide dual literacy education and workforce skills.
- SCCAA became the Skagit contractor in 2007 for WorkFirst Community Jobs & Supported Work programs, providing paid and unpaid work experiences for TANF parents at nonprofit organizations and public agencies.
- SCCAA's volunteer center expanded in 2008 to the Skagit Volunteer Center, able to provide its volunteer and pre-employment opportunities 24/7 through on-line at [www.1800volunteer.org](http://www.1800volunteer.org) or linked at [www.skagitcap.org](http://www.skagitcap.org). The center also sponsors over 80 AmeriCorps State and VISTA positions that provide direct service and build capacity in schools and non-profits in Skagit, Whatcom, and Snohomish counties.
- Since 2007, Goodwill Job Training & Education has offered broader career services and computer training, the latter also for ESOL (English speakers of other languages). Their 5-month retail and merchandising program was discontinued in 2007.
- DSHS Working Connections Child Care monthly caseload in 2009 decreased 40% compared to the 2005 study. Services peaked in late 2008, then declined as service-related and manufacturing jobs also declined.
- In 2009 SCCAA received funds from the American Recovery and Reinvestment Act (ARRA) to sponsor 12 AmeriCorps positions in Skagit County focusing on weatherization, food access, and nonprofit capacity building. The VISTA project at SCCAA expanded from 9 to 11 slots, also with ARRA funding.

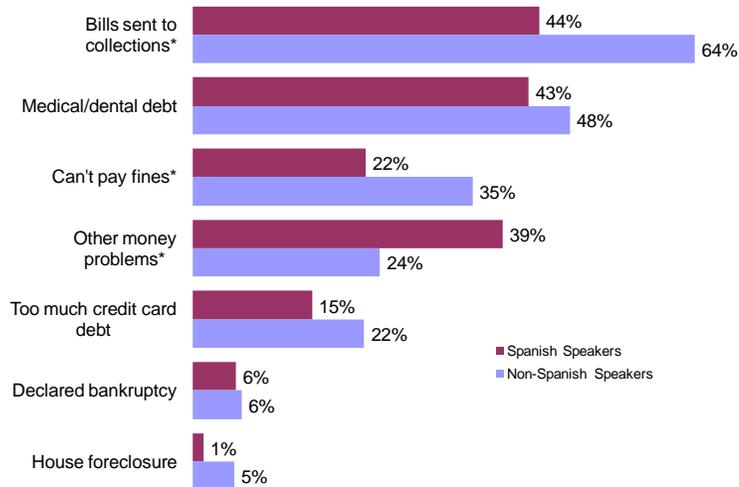
### Financial and Legal Situation

Among a list of seven types of money problems clients may have experienced in the 12 months prior to the survey, respondents most frequently reported having bills sent to collections (67%); having debt from medical or dental care (52%); and having fines that are hard to pay off (37%).



**Figure 11 Financial situations experienced by survey respondents in the last 12 months (n=479)**

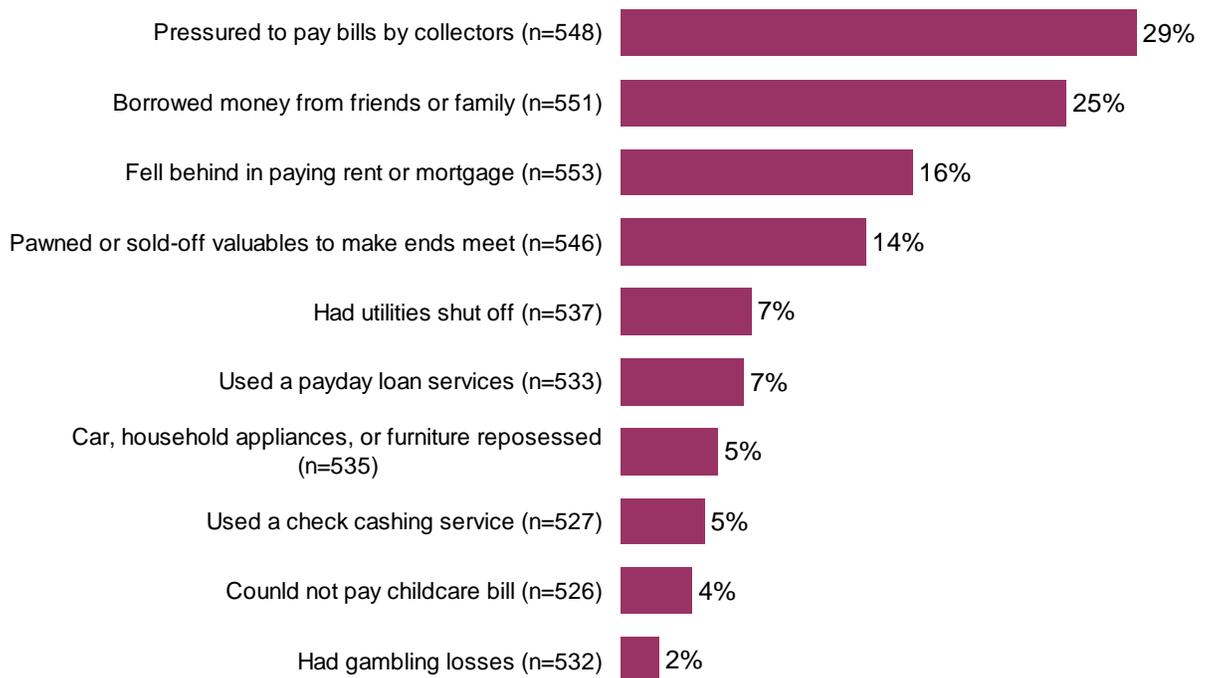
Spanish speaking respondents were much less likely to report most types of money problems, especially having bills sent to collections or having fines they are unable to pay. However, Spanish speaking respondents were significantly more likely to report other money problems, though most did not describe what these problems were.



**Figure 12 Financial situations experienced by survey respondents in the last 12 months - Spanish speakers compared to other respondents (\*difference is statistically significant)**

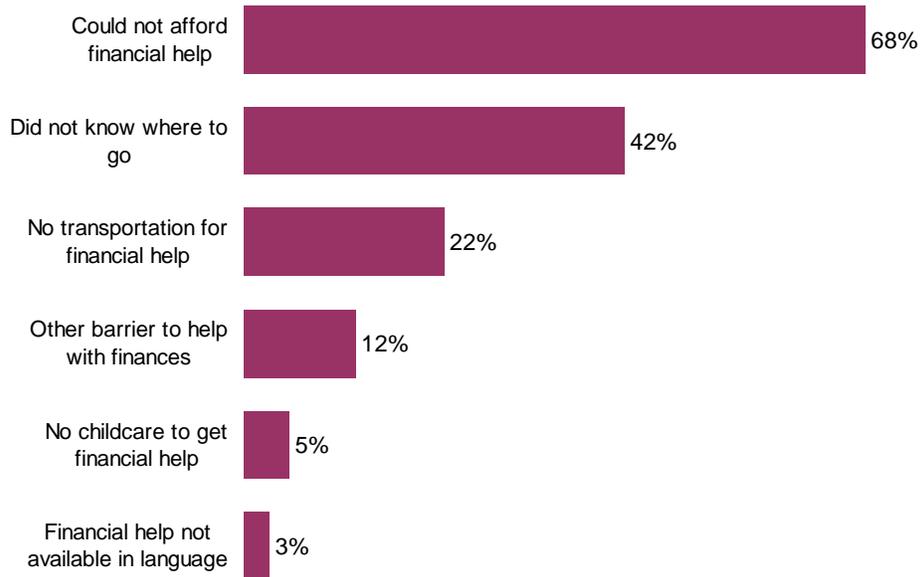
Some respondents took the time to describe other money problems they had experienced in the past twelve months. The most common issue was simply not having enough money. Some also reported unemployment, job loss, and reduced hours. Debt and outstanding bills were also reported as well as the impact of housing and utility costs. For some households, even meeting basic needs such as food, clothing, diapers, transportation, or medical was challenge. For additional indicators of financial challenges, see also housing challenges Figure 23 and food security by income group Figure 43.

Figure 13 below shows the frequency in which survey respondents experienced 10 different financial problems, rating each between 1 for *did not happen* and 5 for *happened frequently*. Not only do more people experience bills being sent to collectors than other problems (Figure 11), but one third of respondents reported that it “happened frequently” in the past 12 months (Figure 13). The next experiences most likely to have happened frequently were borrowing money from friends or family (25%); falling behind in rent or mortgage payments (16%); and pawning or selling off valuables to make ends meet (14%).



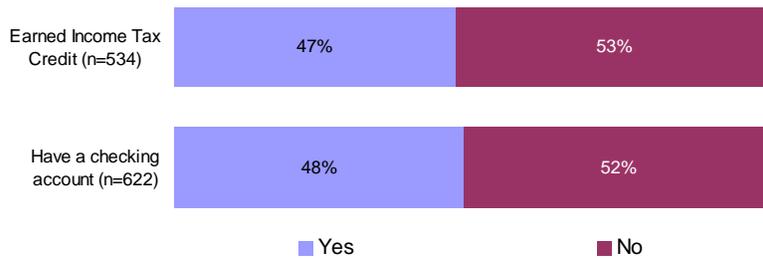
**Figure 13** Proportion of respondents who reported that a situation happened frequently in the past 12 months

Survey respondents were also asked what types of problems they had getting help with the financial situations they experienced. Thirty percent of respondents said they did not have any problems getting help with their finances. Of those who did have problems getting help, two-thirds could not afford financial help (68%). The next most common issues were not knowing where to go (42%) and not have transportation to get financial help (22%).



**Figure 14 Problems getting help with the above financial situations (n=359)**

Two additional indicators of financial situation are whether a household has accessed the Earned Income Tax Credit and whether they have a checking account at a bank or credit union. Slightly less than half of survey respondents answered yes to each of these.



**Figure 15 Access to tax credits and checking accounts**

## Legal Assistance

One in three respondents (33%) reported that someone in their household had needed legal assistance in the past 12 months. About half of those that needed legal assistance were able to get the help they needed.

The most common source of legal help reported by clients was a court appointed or public attorney. Also mentioned were CLEAR, NW Justice Project, and the Community Action Lawyer Program.

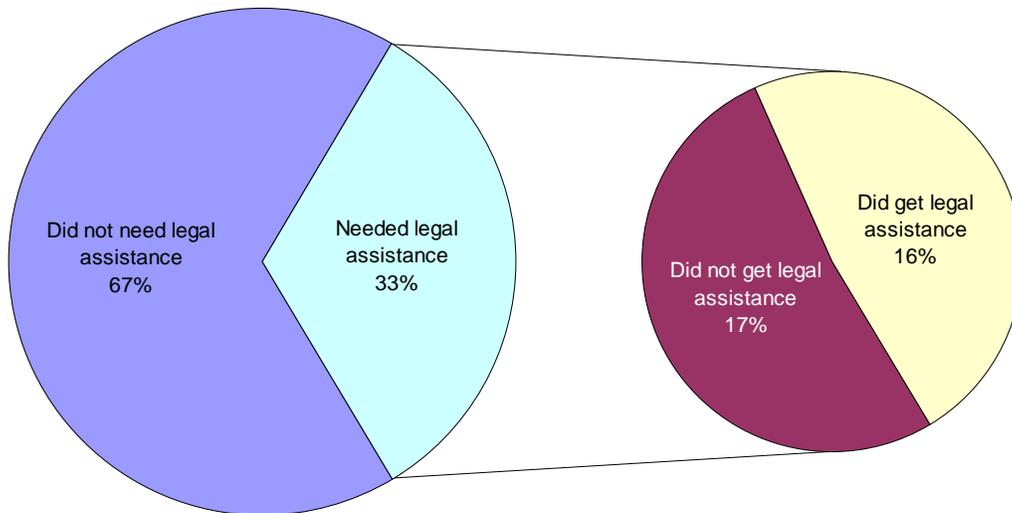


Figure 16 Access to legal assistance (n=628)

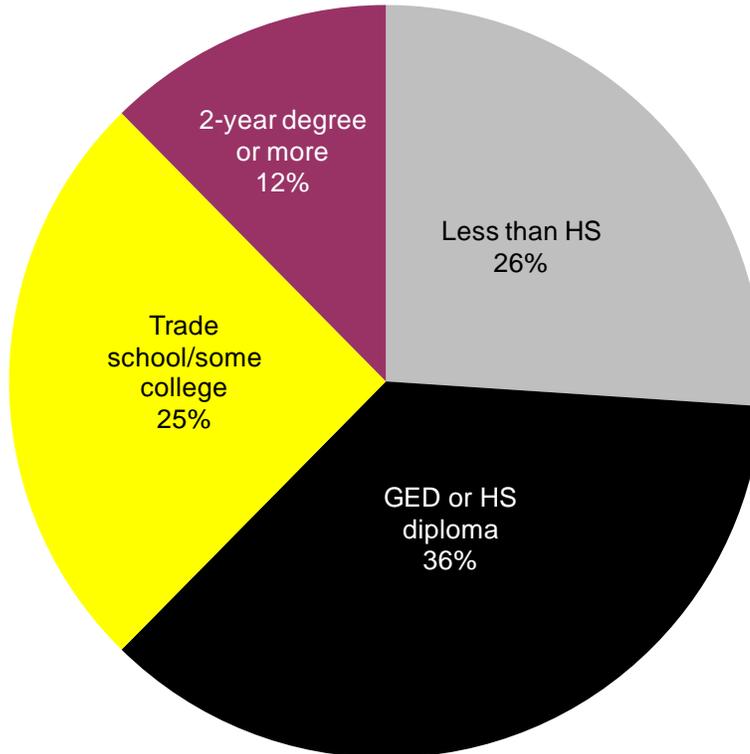
## Financial and Legal Services Recent Developments

- Financial Education, addressed as part of SCCAA's literacy program through a VISTA position, is working to form an Asset Development and Microenterprise Coalition. Community volunteers provide financial education in banking & savings, budgeting, debt-elimination and credit repair for community members, literacy students and SCCAA's housing program participants.
- SCCAA's Volunteer Legal Program reports increased requests for services, especially in the last year, with family law, housing, and consumer issues, including bankruptcy comprising the main presenting problems. Hispanic clients accessing this program have increased to comprise 32% of clients receiving services in 2008 and 2009, compared to 28% in 2004.
- The Dispute Resolution Center (DRC), formerly a county-run mediation department, merged in late 2009 with Volunteers of America Dispute Resolution Center, serving Snohomish, Island and Skagit Counties. Located in Mount Vernon, the DRC provides contracted services to the county and has secure funding from a surcharge on district and civil court filing fees. Services are available on a sliding income scale. Volunteer mediators provide low cost mediation, facilitation and training. [www.voaww.org/drc](http://www.voaww.org/drc)

- The Juvenile Detention Alternative Initiative (JDAI), partially funded through the Governor's Juvenile Justice Advisory Committee, opened in July 2009, is one of seven WA pilots. JDAI promotes system improvements resulting in less use of secure confinement without increasing criminal activity or failed court appearances. Skagit County's program includes a focus on disparate Hispanic youth detention, which comprised about 33% of all referrals to the juvenile court and 36% of all juvenile detention admissions between in 2009.
- Catholic Community Service's Family Immigration Program, opened in 2006, provides legal services to area residents in family immigration and citizenship. Services include family reunification, family petitions, immigrant visa and adjustment of status applications. Service to renew Lawful Permanent Resident cards, work permits and other documents is also provided. CCS can provide services in multiple languages. [www.ccsww.org](http://www.ccsww.org)
- Long-Term Care Ombudsman program for Skagit, Whatcom, Island, and San Juan was moved from Northwest Regional Council to SCCAA in January 2008. Volunteers and staff are responding to a growing caseload of issues involving eviction and/or discharge of senior and disabled residents from area long-term care settings.
- The Skagit County Office of Assigned Counsel performs eligibility screening for indigent defense services for Skagit County Superior Court, Skagit County District Court, and the Mount Vernon and Burlington Municipal Courts, the latter added in 2008. Referrals processed by this office in 2009 were 7,030, a 12% increase over those processed in 2008, and a 42% increase over 2005.

### Education, Communication and Literacy

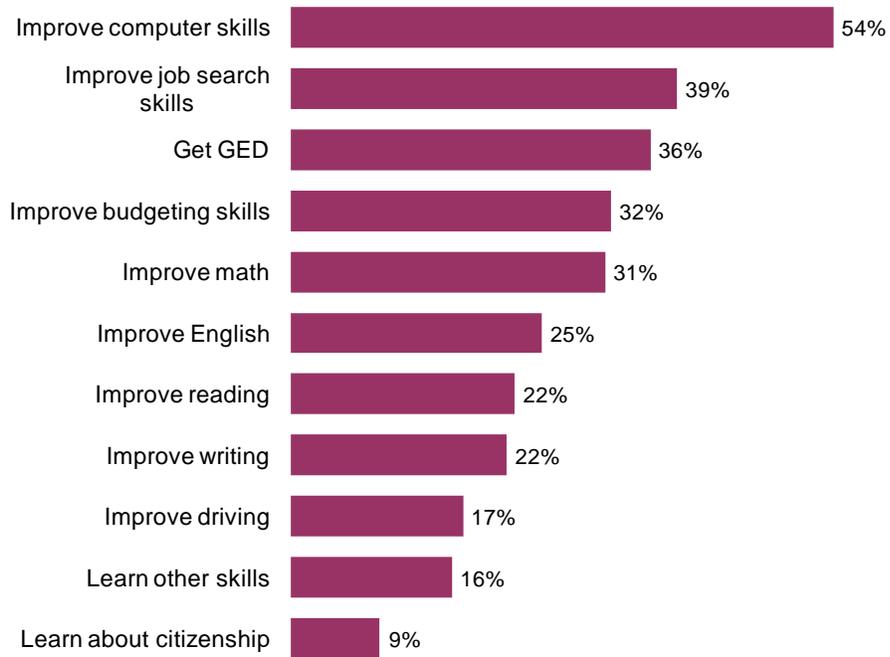
More than a third of respondents have some form of post-secondary education (Figure 17). They have attended a trade school or some college education (25%), or have a two-year degree or higher (12%). About one in four survey respondents do not have a high school diploma or GED (26%).



*Figure 17 Educational attainment of survey respondents over 25 years old (n=479)*

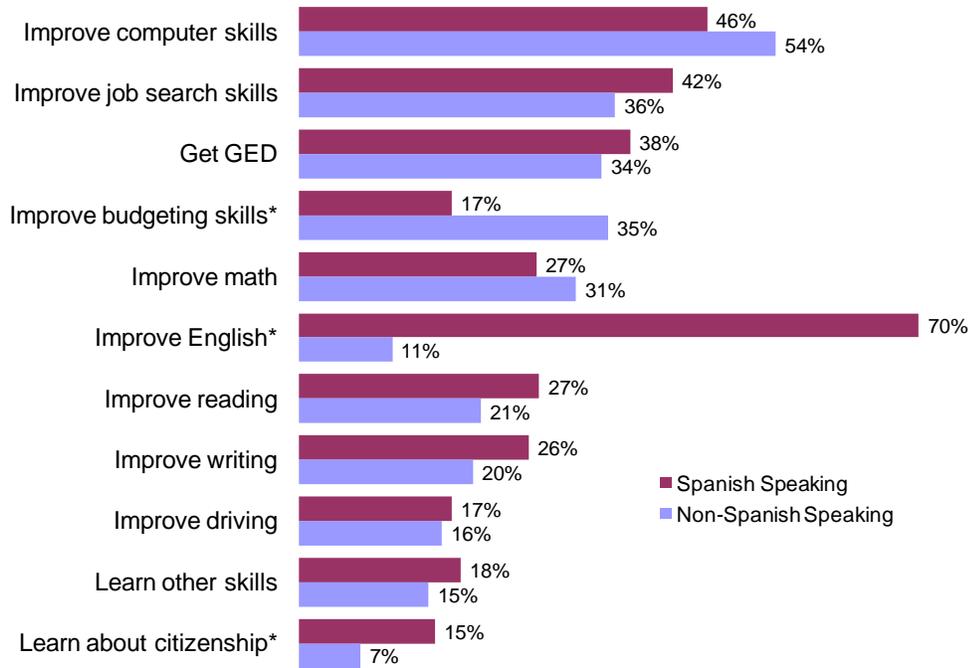
Many respondents expressed an interest in improving their skills. More than half of respondents said they wanted to improve their computer skills (53%). Gaining job search skills (38%) and getting a GED (36%) were the next most desired self-improvements. Combined with the education information above, it appears that most people who don't have a high school diploma or GED would like to get one.

When asked to describe other skills they wanted to learn, respondents were most likely to mention job training. Specific interests included law, culinary arts, nursing, mechanics, medical billing, and millwright skills. Ten respondents said they wanted to go to college and six wanted to learn a second language, including Spanish and sign language. Seven respondents expressed a need to improve their life skills, including coping, organization, and independent living skills such as cooking. A few respondents mentioned wanting to increase general office skills and improve their spelling.



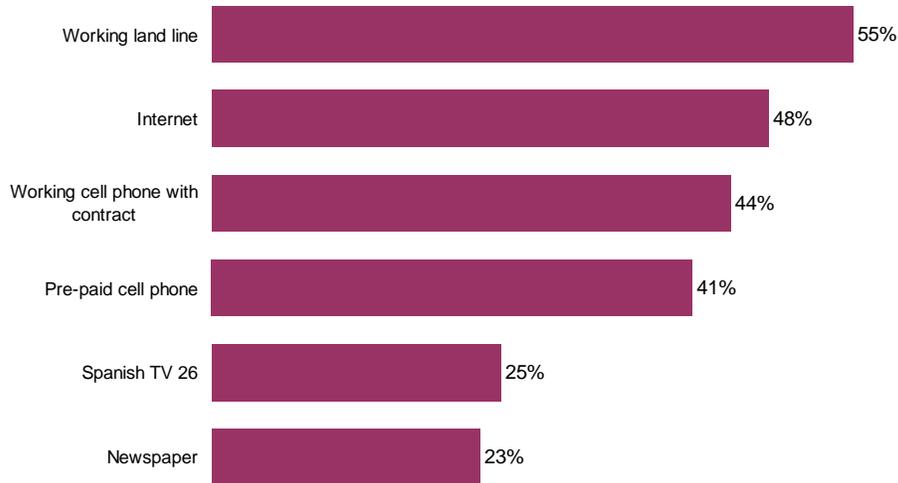
**Figure 18** Proportion of respondents who would like to increase knowledge and skills (n=463)

Spanish speakers were much more likely to say they wanted to improve their English and to learn about citizenship. They were less likely to report wanting to learn about budgeting.



**Figure 19** Proportion of respondents who would like to increase knowledge and skills - Spanish speakers compared to other respondents (\*difference is statistically significant)

Just over half of respondents have access to a working landline phone at home (55%), and just under half have home internet access (48%). Cell phones are also common, with 44% having cell phone contracts, and 41% having a pre-paid or “pay as you go” cell phones. One in four respondents say they watch Spanish TV 26.



**Figure 20 Access to media and communication technology (n=598)**

### Information and Literacy Recent Developments

- Significant changes for SCCAA’s literacy services were the loss of 21st Century funding which impacted staffing levels and the ability to provide appropriate early childhood education. SCCAA has developed a skilled leadership base that has recruited, trained, and built an awesome team of early childhood staff. The 200 adults served by approximately 40 volunteers remains stable. Services provided by VISTAs, AmeriCorps VISTAs, and other volunteers is a large part of positive outcomes in families.
- SCCAA became the sponsoring organization for the Washington Reading Corps (WRC) AmeriCorps program in 2006 with positions in 19 elementary schools and early learning centers in Skagit, Whatcom, and Snohomish counties. In 2006, the program had 34 positions and one full time staff person. In 2007, it expanded to 60 positions and three full time staff, and currently WRC has 58 AmeriCorps members and three full-time staff. Services focusing on struggling readers reach 1,000 youth in Skagit County.
- Skagit Valley College charges \$25 per quarter, with low-income waivers available, to students enrolling in ABE, ESL, and GED classes, including assistance in GED test preparation. Also, see I-BEST information in Employment and Income section.
- Teen GED is headed up by a VISTA staff person through SCCAA’s literacy program. The program works in partnership with WorkSource where a computer lab is staffed with volunteer tutors. A new venture is being formed to provide educational support to detainees in the juvenile detention center.

- Goodwill Job Training & Education Programs provide ESOL (English speakers other than English) and in 2009 began offering citizenship education support.
- SCCAA administers Community Voice Mail, free 24-hour voice mail for homeless and phoneless individuals, through partnering sponsors. Services expanded in 2008 to provide access to local job opportunities and other vital resources through Broadcast Messaging. Additionally, since 2006, WTAP (Washington Telephone Assistance Program) offers low-income households basic monthly phone service for \$8. Households receiving public assistance, such as TANF or Food Stamps qualify.
- SCCAA and the City of Mount Vernon partner to produce Spanish information and education to Comcast viewers on TV 26. 2009 contributing partners were Mount Vernon School District, Skagit Valley Hospital, and Washington State University. Special funding covered SVC's Champions of Diversity awards ceremony. Additional partners and sponsors are being sought to stabilize funding and expand programming.
- SVC-based KSVR radio (91.7 FM) provides a broad range of programming, including a weekly radio program produced by Washington State University (WSU) Extension. The WSU radio program provides information and education for Spanish listeners. Program funding was lost in June 2009 with WSU budget cuts. Interim funds maintained programming through 2009; however, the program's future is uncertain.

## Housing and Homelessness

### Housing Type and Condition

More than half of survey respondents (55%) rent their housing (Figure 21). Another 17% are homeowners. The remaining survey respondents currently share housing with another household (14%), live in transitional housing or an emergency shelter (6%), are homeless (6%), or live in employer-provided housing (1%).

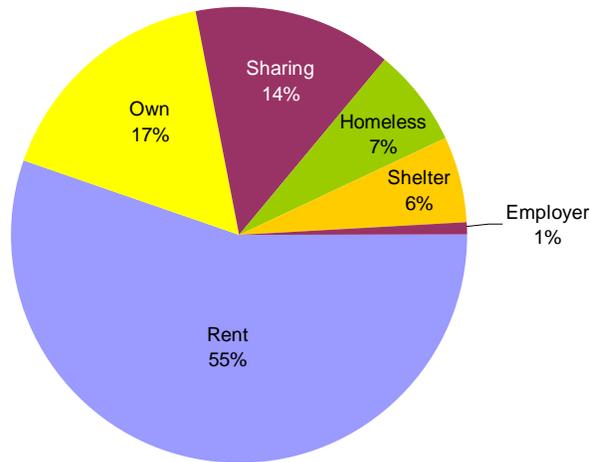


Figure 21 Respondent housing type (n=594)

Most survey respondents reported their housing to be in good shape (39%) or needing only minor repairs (41%). Just 3% said that their home is in such bad shape that it is unsafe, and 2% said their home needs disability access improvements (Figure 22). It is worth noting that within this sample, there is no association between household income and housing condition.

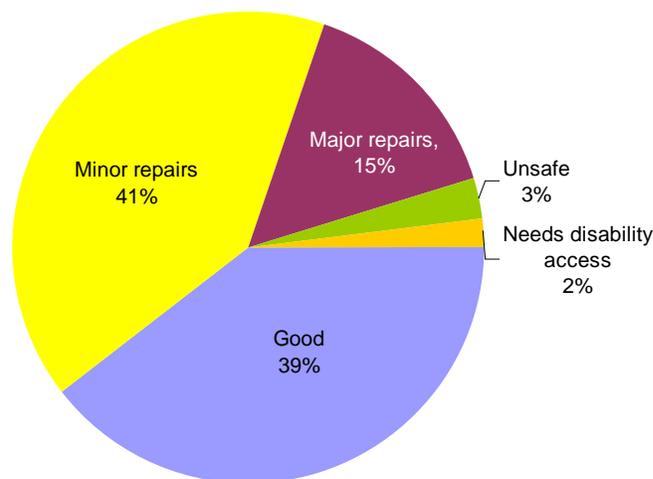


Figure 22 Housing condition (n=507)

### Housing Stability

Survey respondents were asked about current housing problems as well as housing situations they had experienced in the past 12 months. More than half of respondents reported that bad credit makes it hard to find a place to rent (54%). The affordability of renting or owning a home were also common barriers to stable housing, at 48% and 41% respectively.

When respondents described other housing problems, the most common issue was lack of employment or insufficient income. Many households had difficulty paying their utility bills. A few respondents cited family break-ups as a cause of housing instability. Also mentioned was neighborhood problems such as substance use and vandalism. Some respondents faced housing challenges related to their criminal background, disability, or desire to live with their pets.

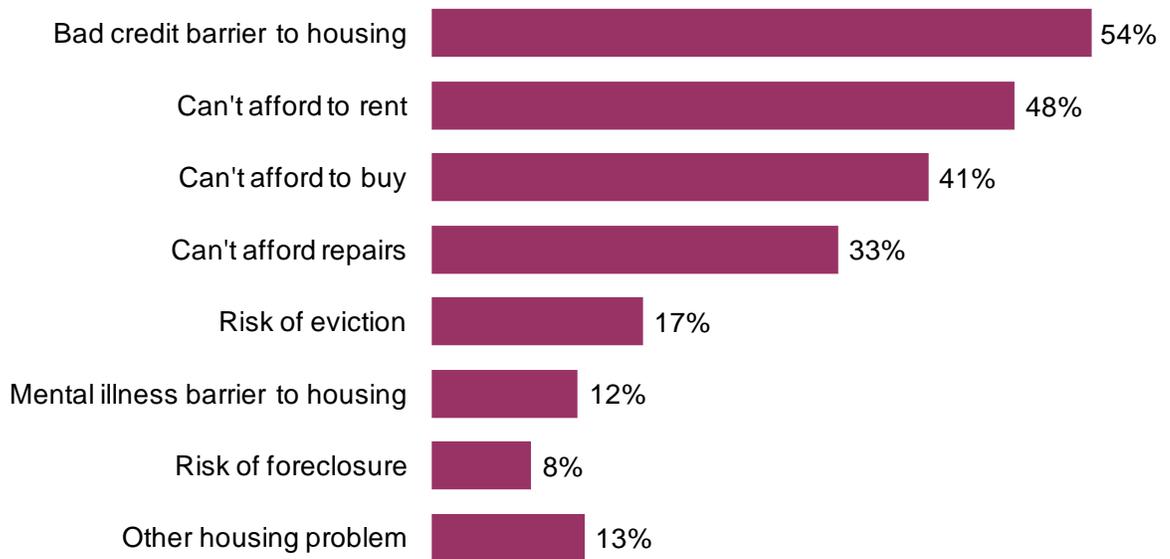


Figure 23 Current housing problems (n=570)

More than half of respondents (52%) said that in the last 12 months they had to choose between paying the rent or mortgage and other basic needs. 41% have had to share housing to avoid homelessness and many have moved multiple times in the past year (27%). About one in four respondents have experienced homelessness in the past year (23%).

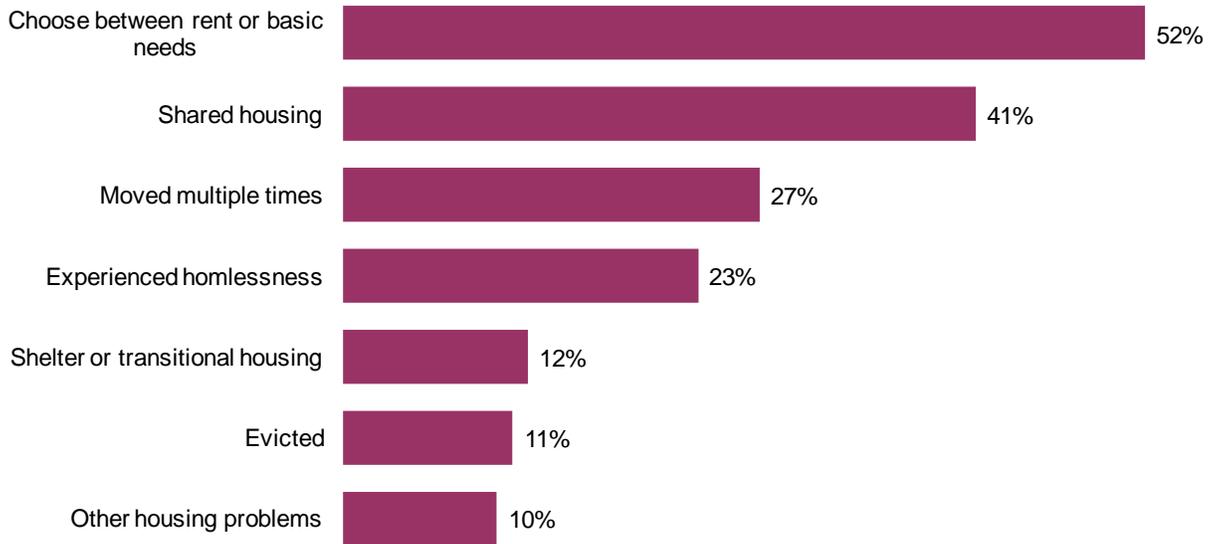


Figure 24 Housing situations experienced in the past year (n=630)

Spanish speaking households were less likely to have experienced each of these negative housing situations in the past year. Most significantly, they were less likely to have moved multiple times, have experienced homelessness, or have stayed in an emergency or transitional shelter.

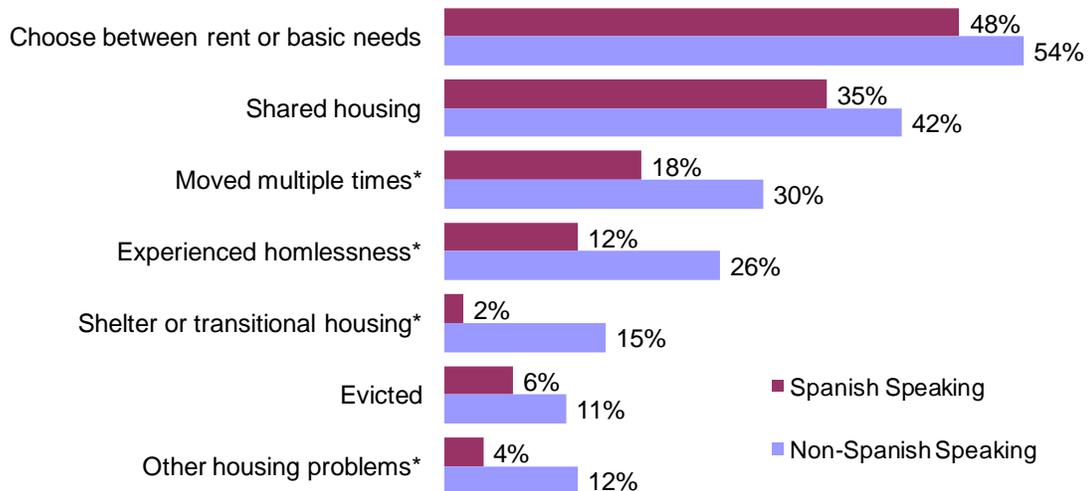
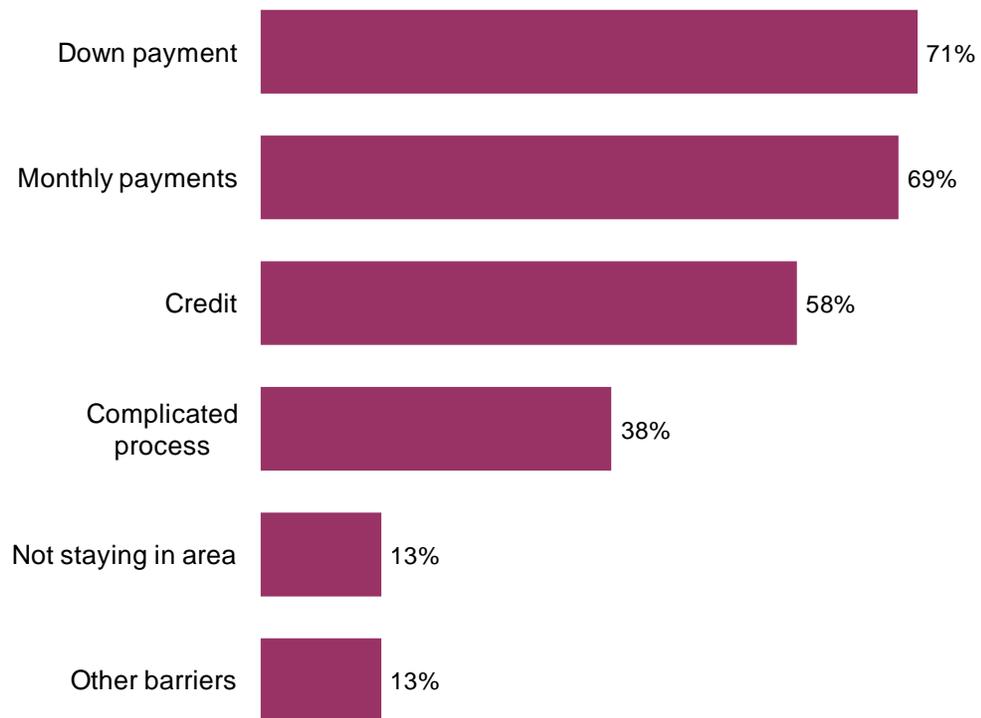


Figure 25 Housing situations experienced in the past year - Spanish speakers compared to other respondents (\*difference is statistically significant)

### Homeownership

Seventy-one percent of respondents said they hope to buy a home someday; 18% said no and 11% said they did not know. When asked what prevented them from buying a home, affordability of the down payment (71%) and of the monthly mortgage payments (69%) were the two biggest barriers. Bad credit also affects more than half of survey respondents (58%). More than a third (38%) are deterred by the complicated home buying process. When describing other reasons that kept them from buying a home, the number one reason was insufficient employment or income. Several respondents said they were too young or not ready to buy a home, while others thought they were too old. A few respondents mentioned immigration status or health/disability as barriers to homeownership. Others were happy renting or did not want the responsibility of upkeep or repairs.



*Figure 26 Barriers to homeownership (N=576)*

### Housing Cost Burden and Assistance

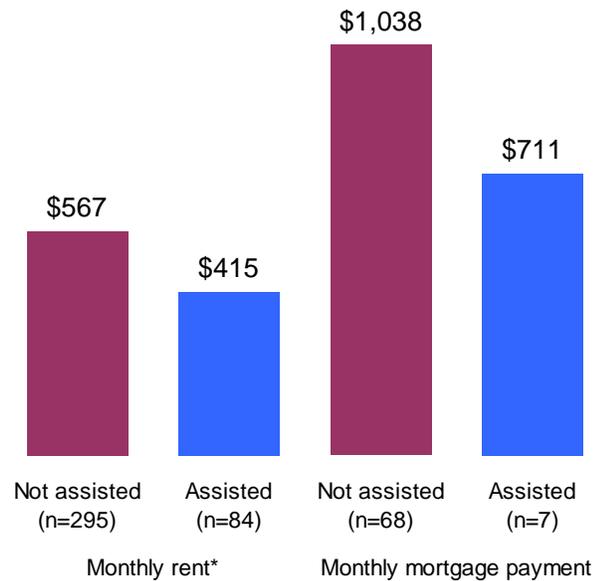
On average, low-income renter households pay \$530 per month for rent, and low-income homeowners pay \$989 per month for mortgage payments (Table 4). Housing is considered to be affordable when households spend no more than a third of their pretax income on housing costs. Comparing household income to reported rent or mortgage payment, a conservative estimate of the housing affordability rate can be determined for this sample of low-income households. Three quarters of low-income homeowners (76%) and two thirds of renters (67%) are spending more than a third of their household income on mortgage or rent payments. The proportion of low-income clients paying more than a third of income for housing costs is certainly higher than what could be estimated with this survey data because the questionnaire did not measure other housing costs such as insurance, property taxes and maintenance.

Compared to the results of the 2005 Low-Income needs Assessment, housing costs and cost burden remain nearly identical for renters; however, low-income homeowners are facing significant increases in costs and costs burden.

**Table 4 Renter and owner cost and cost burden**

	Renters n=417		Owners n=78	
	2005 (n=416)	2009 (n=417)	2005 (n=82)	2009 (n=78)
<b>Mean monthly cost (rent or mort. pmt.)</b>	\$520	\$530	\$720	\$989
<b>Median monthly cost (rent or mort. pmt.)</b>	\$550	\$500	\$710	\$947
<b>Mean cost burden (% of income spent on rent)</b>	50%	50%	50%	68%
<b>Median cost burden</b>	44%	43%	43%	53%
<b>Cost burden &gt;30% of income</b>	66%	67%	76%	76%

Housing assistance in the forms of various subsidies for low-income renters (e.g. Section 8 voucher) and homeowners (e.g. down payment assistance) are meant to reduce the household's housing cost burden. Figure 27 demonstrates this by comparing the average rent and mortgage payments for survey respondents with and without some form of housing assistance. Though the effect of financial assistance appears greater for homeowners, the number of homeowners who receive mortgage assistance is very few. The difference between housing cost for renters who receive or do not receive housing assistance is statistically significant, and affects a greater number of people. On average, households without assistance pay \$567 per month compared to only \$415 for renters with assistance.



**Figure 27 Mean renter and owner housing cost for survey respondents with and without housing assistance**

### Housing Recent Developments

- Skagit's 2009 homeless count of 2,306, compared to 1,182 in 2005, is the highest per capita in WA. Approximately 50% were children under age 18, of which 522 were homeless children in schools.
- 2060 Funding legislation begun in 2004 taps building permit fees to dedicate funds for low-income housing and homeless prevention, has grown to four bills. Variable with the real estate market, about \$500,000 is available annually, up from \$168,000 in 2004.
- SCCAA's emergency family shelter expanded from four to ten apartments in 2008. Re-named the William J. Shuler Family Development Center, services include self-sufficiency on-site support resources.
- SCCAA manages 43 transitional housing units across the county, up from 36 in 2005. Families receive subsidized rent and family support services for up to two years.

- Skagit Housing Connections, new in 2009, is a 1-Stop Homeless Service Center for those who are homeless or facing homelessness, with mortgage and rental funds, case management, and education services. The program streamlines services for hard-to-serve clients.
- Opened in November 2009, the nine-unit Anacortes Family Center (AFC) provides emergency and transitional shelter for single mothers, families with children, and single women. (<http://www.AnacortesFamily.org>) Fidalgo Island Share-a-Home, run by AFC, brings together home providers with home seekers looking for an affordable place to live. (<http://www.FidalgoFish.org>)
- The Wilson Hotel renovation, completed in 2006, provides 25 one bedroom and studio apartment managed by the Anacortes Housing Authority. It serves low and very-low-income renters and units include five which are handicap-accessible. Within walking distance of services, the hotel features five commercial spaces on the first floor. It received the Valerie Sivinski Award for Outstanding Achievement in Historic Preservation Rehabilitation Projects from the Washington State office of Historic Preservation.
- Home Trust of Skagit (HTS), a nonprofit community land trust (CLT) dedicated to creating permanent home ownership affordability, formed in 2009. Under SCCAA's umbrella, HTS works with groups in Anacortes, LaConner, and Hamilton. The 2005 LINA presented a CLT concept paper as part of relocation options for Hamilton.
- SCCAA acquired Channel Cove, an affordable neighborhood of 22 rental units in LaConner in late 2006. A feasibility study to transition four units to home ownership using the CLT model, and build ten new units in Phase II is underway.
- SCCAA's Volunteer Chore Program helps seniors and disabled adults stay in their homes with a focus on home repairs and handicap modifications. Expanding on this, an Anacortes 2009 ARRA project will provide local contractors home repair jobs to weatherize selected senior homes. Staff cite a trend of more seniors, often recent retirees, living on the edge of homelessness, a situation frequently aggravated by mental health issues which hamper their ability to carry out life management strategies.
- SCCAA, Skagit County's "Low-Income Energy Assistance" (LIHEAP) helped 2,140 households in 2008/09. About 1,000 more families than usually are served due to an infusion of economic stimulus funds. Services will reach only half as many families in 2009/10 unless more funding is received. Annual household awards, averaging just under \$500, are dependent on family size, income, and size of the heating bill. Supplemental funds are available to qualified families from several other sources. These extra family awards are generally under \$150, although some families could receive as much as \$1,500.

## Health and Healthcare

### Overall Health Status

A majority of respondents rate their general health positively (Figure 28), reporting good (38%), very good (17%), or excellent (5%) health status. About a third of respondents said their health was fair (31%) and less than ten percent had poor health.

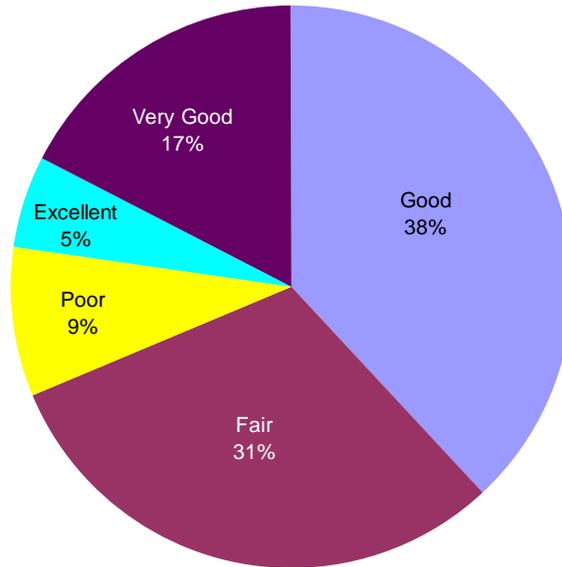


Figure 28 Respondent general health status (n=625)

Within our study's sample, household income is associated with general health status (Figure 29). Sampled households were divided into three roughly equal sized groups based on income. Those in the lowest income group (\$0-760/month) were much more likely to report poor or fair health as those in the highest income group (\$1,400 and higher).

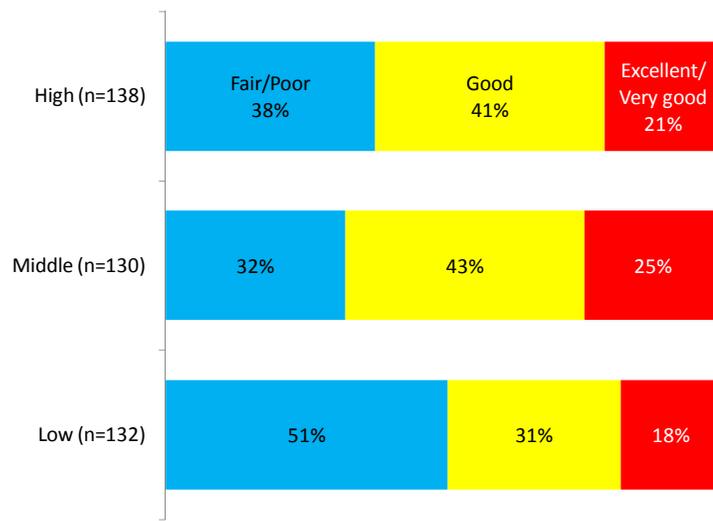
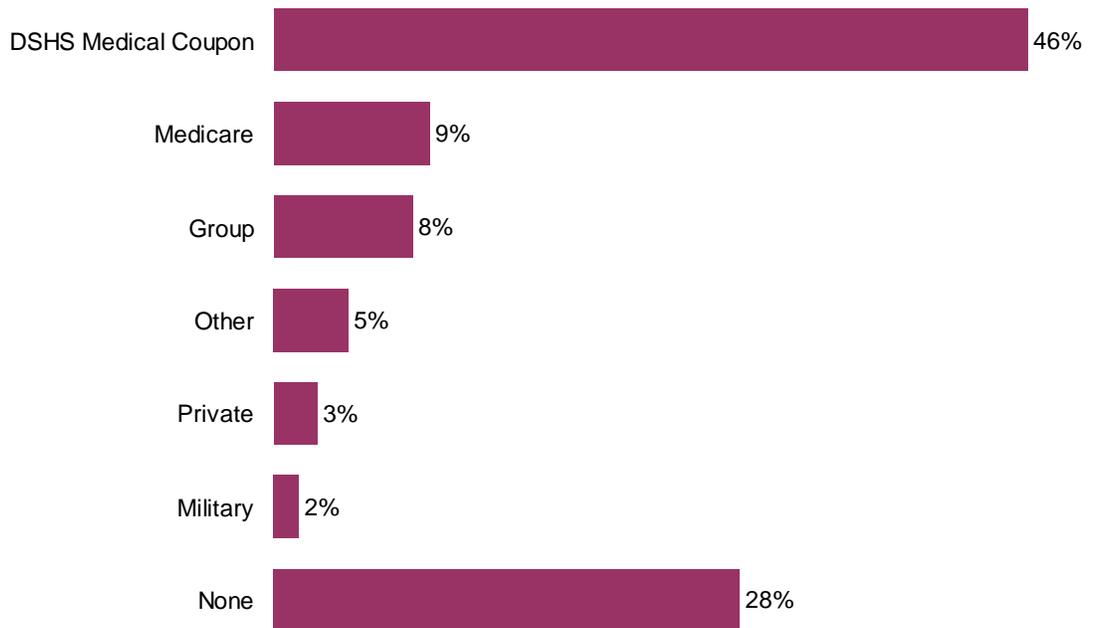


Figure 29 Respondent general health status by income group (income group boundaries that divide the respondent group into equal thirds: low=\$0-760/month; middle=\$761-1399; high=\$1,400+)

### Health Insurance

Nearly half of survey respondents (46%) rely on DSHS coupons or Medicaid for medical coverage (Figure 30). More than one quarter of survey respondents (28%) have no medical coverage. Commercial insurance plans were divided between those who pay for individual insurance out of pocket (3%) or through a group plan (8%).

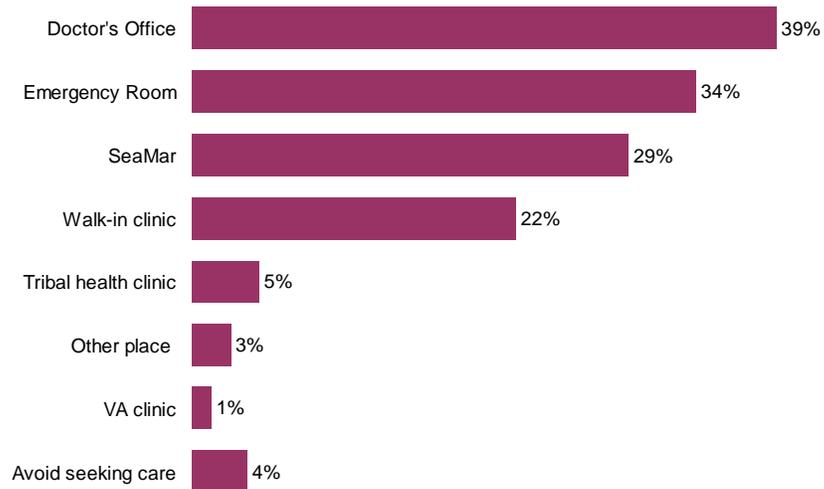
Of the 5% of respondents that reported another type of primary health insurance, the most common responses were Basic Health, SeaMar health clinic, Indian or native health, Regence Blue Shield, Veterans' Association, Community Health Plan of WA, and insurance through a family member. Several respondents reported having more than one source of health insurance, such as DSHS medical coupon and Medicare or DSHS medical coupon and a group plan.



*Figure 30 Respondent's type of health insurance (n=656)*

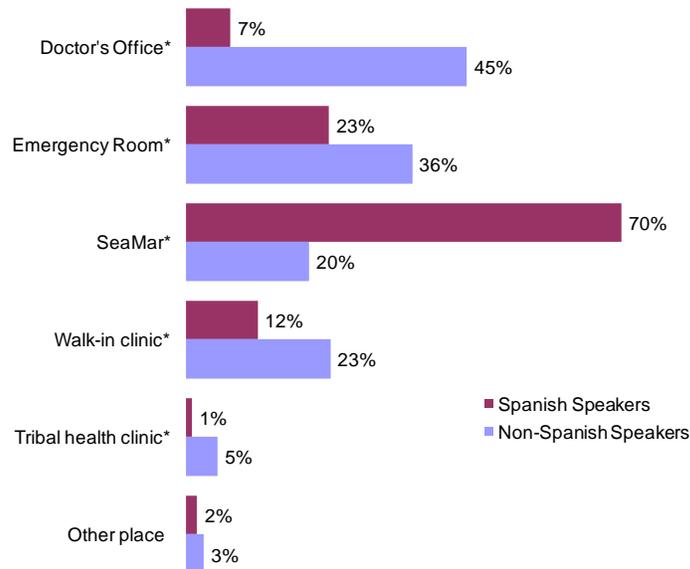
### Primary Care

Survey respondents reported that they usually get their medical care from a private doctor’s office (39%), a community health clinic such as Sea Mar (29%), or the hospital emergency department (34%). 4% of clients offered comments indicating that they avoid seeking needed medical care.



**Figure 31** Where survey respondents usually go for medical care (n=624)

Spanish speaking clients were significantly more likely to seek medical care at SeaMar than non-Spanish speakers, though less likely to seek medical care at a doctor’s office, the emergency room, a walk-in clinic, or the Tribal health clinic.



**Figure 32** Where survey respondents usually go for medical care - Spanish speakers compared to other respondents (\*difference is statistically significant)

Where survey respondents usually go for medical care is associated with the type of coverage they carry (Figure 33). For example, those with group health insurance, private insurance, or Medicare are much more likely to seek medical care at a doctor's office than respondents with military plans or Medicaid. Those without any health insurance are the least likely to go to a doctor's office (14%), and the most likely to go to the emergency department for medical care (44%).

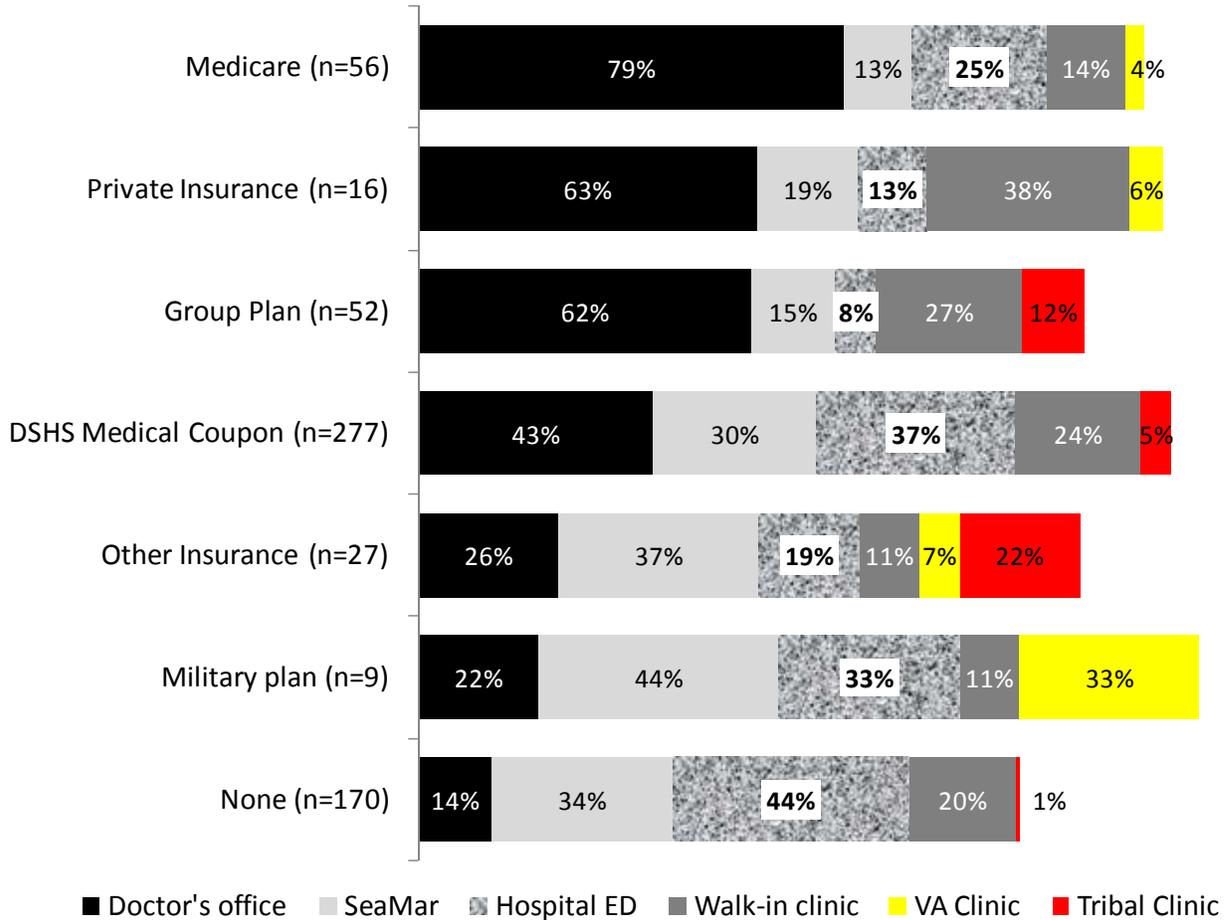
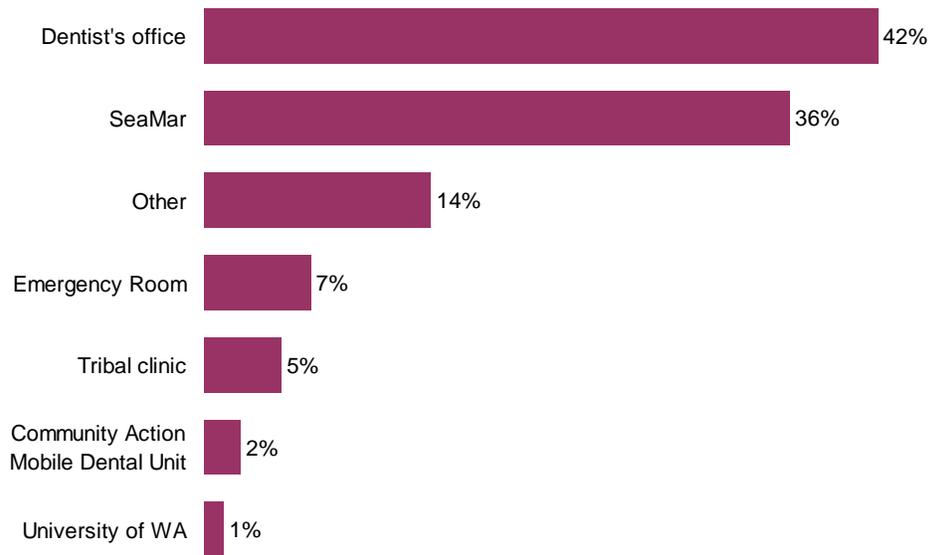


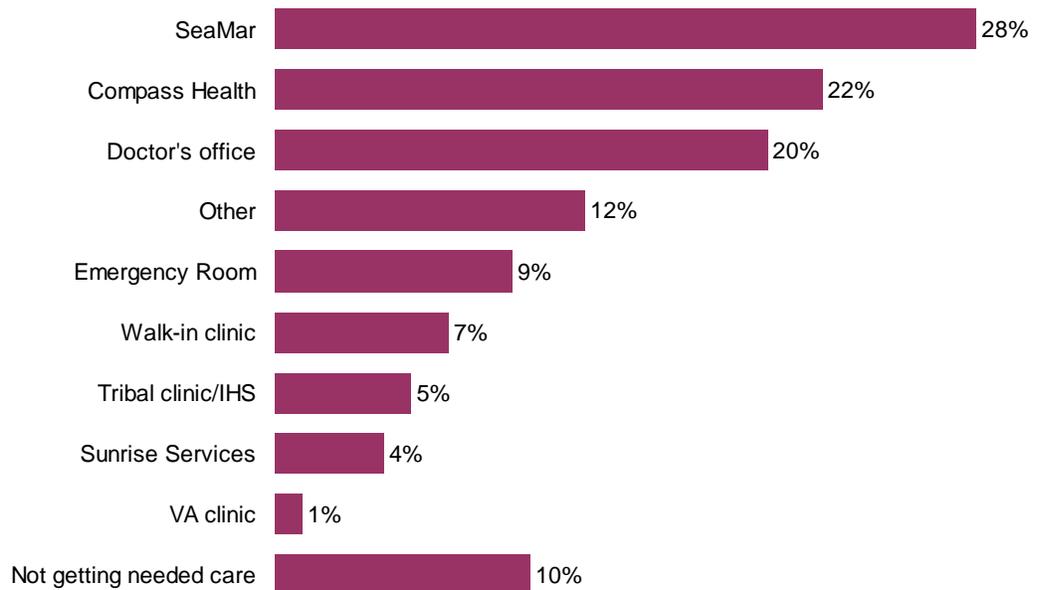
Figure 33 Where survey respondents usually go for health care by type of insurance plan

The most common source for dental care reported by respondents was a dentist's office (42%), followed closely by SeaMar community health clinic (36%).



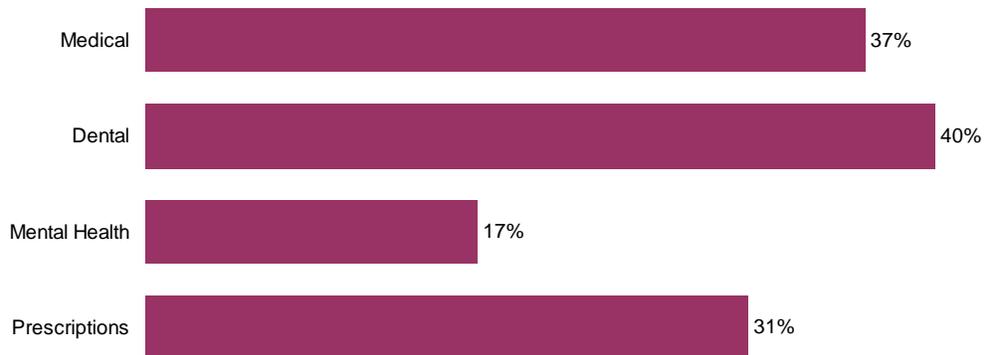
**Figure 34** Where survey respondents usually go for dental care (562)

Though not all households have a need for mental health care, of those that did, a striking 10% wrote in that they were not getting needed care. Common places to get mental health care are SeaMar (28%), Compass Health (22%), and a doctor's office (20%).



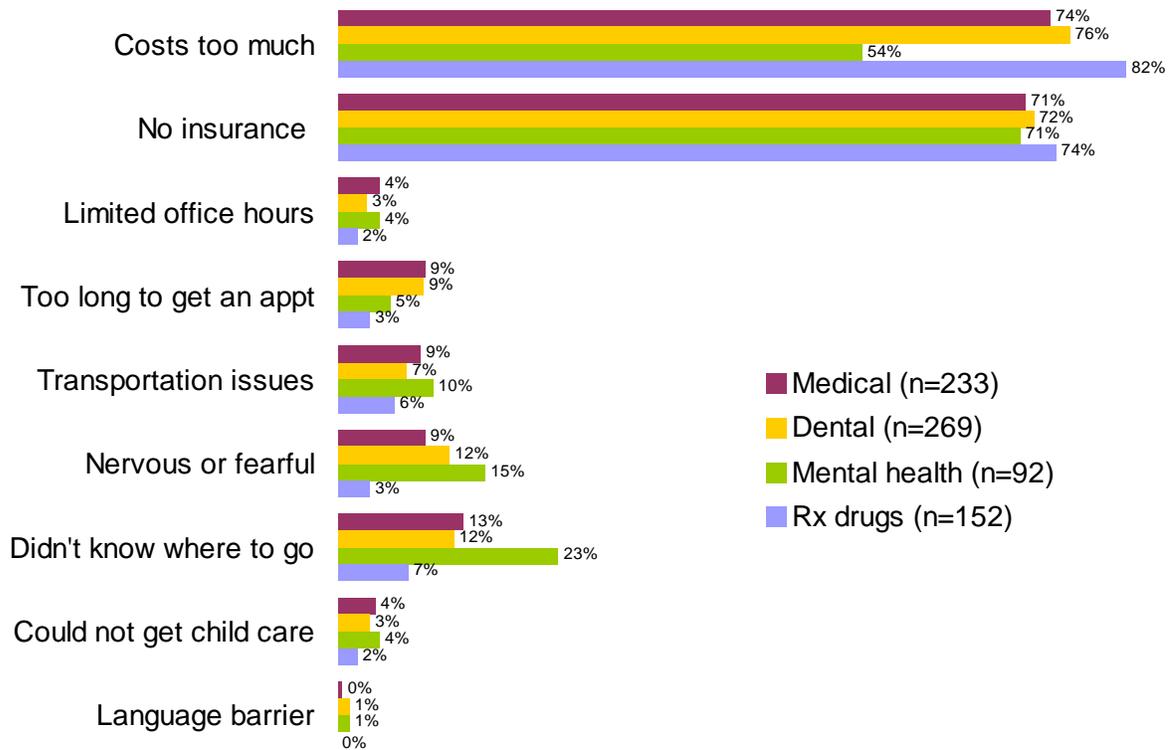
**Figure 35** Where survey respondents usually go for advice for mental health care(n=277)

More than a third of respondents reported that someone in their household had had a problem getting medical care (37%) or dental care (40%) in the past 12 months. Almost as common, were problems in getting needed prescriptions (31%).



**Figure 36** Proportion of survey respondents who needed medical, dental, mental health care or prescriptions in the last 12 months, but did not get it (n=656)

By far, the most common reasons for not receiving any of four types of health care (medical, dental, mental health, or prescriptions) are the high cost and not having insurance (Figure 37). Not knowing where to go was a significant barrier for mental health care (23%).



**Figure 37** Main reasons for not getting each type of health care

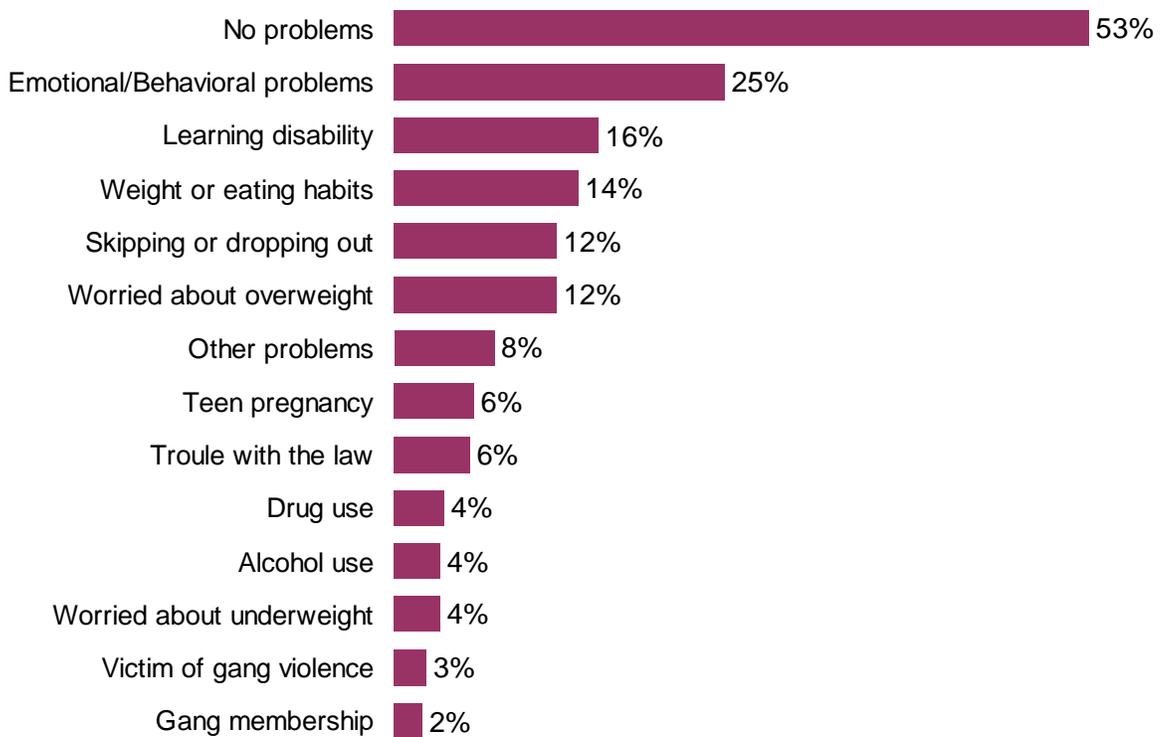
## Health and Health Care Recent Developments

- Skagit County Alliance for Health Care Access (SCAHA) formed in 2009 to address health care access for the uninsured, those with Medicaid or Medicare, and undocumented individuals.
- Apple Health for Kids is free health/dental coverage for children, citizen and non-citizens, 18 or younger in families below 200 percent of the Federal Poverty Level. Families up to 300% FPL may be eligible for coverage for a low cost.
- Washington State Basic Health monthly premium increased from \$36 to \$61.60 with a yearly deductible increase from \$150 to \$250. With enrollment frozen in early 2009 and further cuts in late December, its future is uncertain.
- WA's Medicaid-funded Maternity Support Services (MSS) received major cuts in 2009. New criteria restrict services for low risk women, with highest service levels for women at risk for premature birth. In 2007, 59.8% of Skagit births were Medicaid-covered, compared to WA's 47.3%. State deficits still threaten MSS.
- 2009 expansion of Skagit Valley Hospital allowed placement of a Veteran's Health Care Center as well as an urgent care clinic for SeaMar on the SVH campus.
- Medicaid reimbursable dental care was supplied to 9,602 people in Skagit County in 2008, of which 2,216 were adults (18-64) and 212 were seniors (65+). Currently, nine dental clinics in Skagit County accept medical coupons.
- SeaMar Dental Clinics provide 4 operatories in Burlington and 5 in Mount Vernon, serving low-income adults and children on a sliding-fee or with medical coupons. The Mount Vernon clinic plans to expand to a total of 10 operatories.
- The ABCD program (Access to Baby and Child Dentistry), new to Skagit County in 2004, is overseen by the health department. It provides enhanced reimbursements to dentists for serving Medicaid-eligible infants through age five with fluoride treatments and parent education on early teeth and gum care. ABCD often provides points of entry for other family members to a dental home. The health department also applies free dental sealants to qualified 2nd grade children in schools that have a high threshold of enrollments eligible for free/reduced school lunches. The sealant program, in its tenth year, has brought about significant improvements in children's dental health.
- SCCAA's Mobile Dental Unit conducted 16 clinics in 2009, compared to 28 in 2005, the reduction spurred by competition from other communities for Northwest Medical Team's mobile unit as well as difficulty in recruiting dentists. A 3-year VISTA dental care access project is addressing this community problem.
- Catholic Community Services (CCS) began a school-based mental health program in 2008 serving K-8 in all school districts. Masters level therapists served 329 families in 2008-09. The program is funded by one tenth of one per cent sales tax dollars
- Peer Connection Center, a drop-in day activity center for individuals with diagnosed mental health conditions opened in 2007, serves up to 1,500 peers per month. Start-up funds, partially met through the county's one-tenth of one percent state taxes, will expire at the end of 2009. The center faces serious financial challenges to maintain its current service level.

## Parenting and Child Development

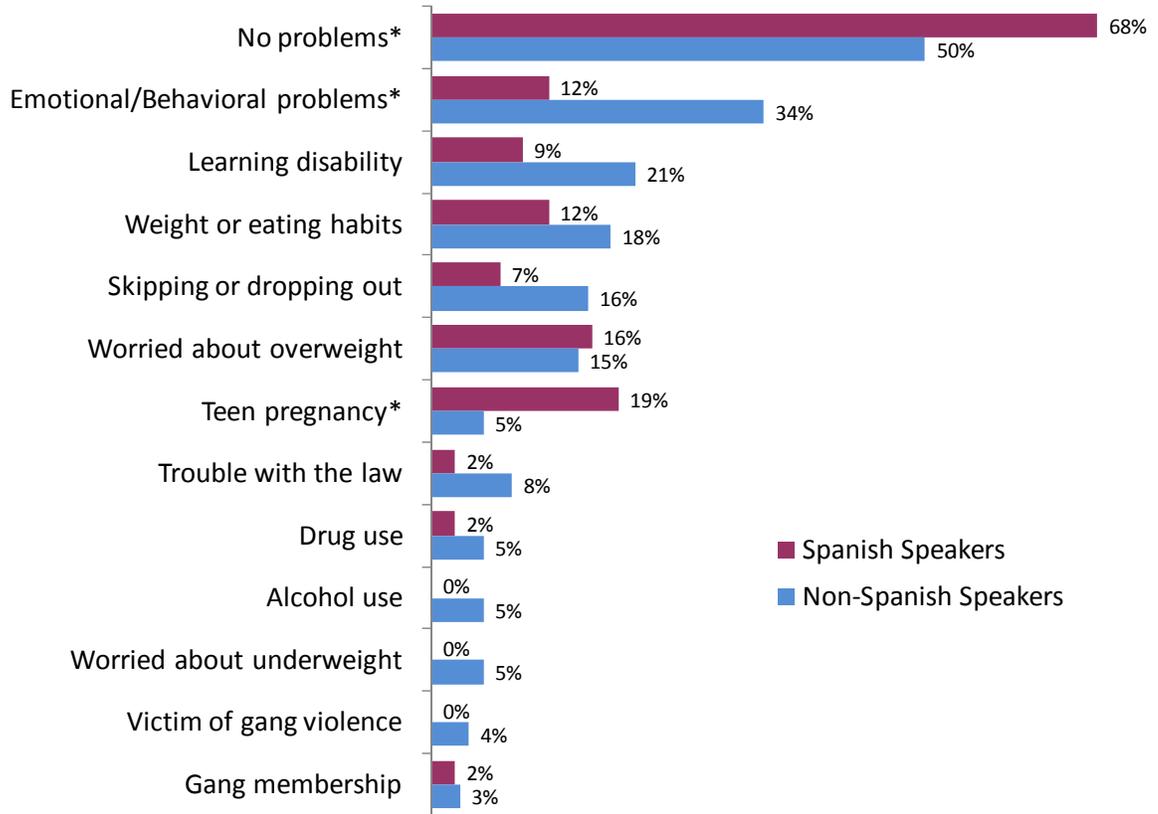
### Parenting Challenges

Respondents with children under 18 years old living at home were asked what problems they had experienced with their children (Figure 38). More than half (53%) of respondents reported that they have had no problems with their children (down from 57% in 2005). The most common problems reported were emotional/behavioral problems at 25%. Learning disabilities are an issue for 16% of respondents. Additionally, 14% of parents said they are worried about their children’s weight or eating habits. Concern about being overweight is much more common (12%) than concerns about being underweight (4%).



*Figure 38 Problems respondents have experienced with their children (n=316)*

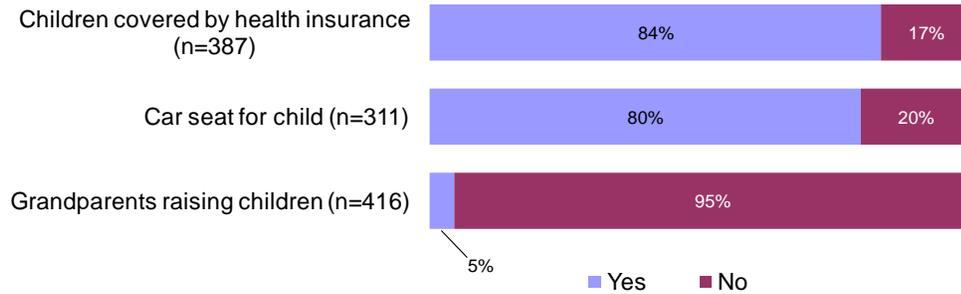
Spanish speaking respondents were significantly more likely to report no problems with their children. They were less likely than other respondents to report most types of problems, notably emotional/behavioral problems. The only problem that Spanish speaking respondents were more likely to report is teen pregnancy.



**Figure 39 Problems respondents have experienced with their children - Spanish speakers compared to other respondents (\*difference is statistically significant)**

### Child Safety and Family Situation

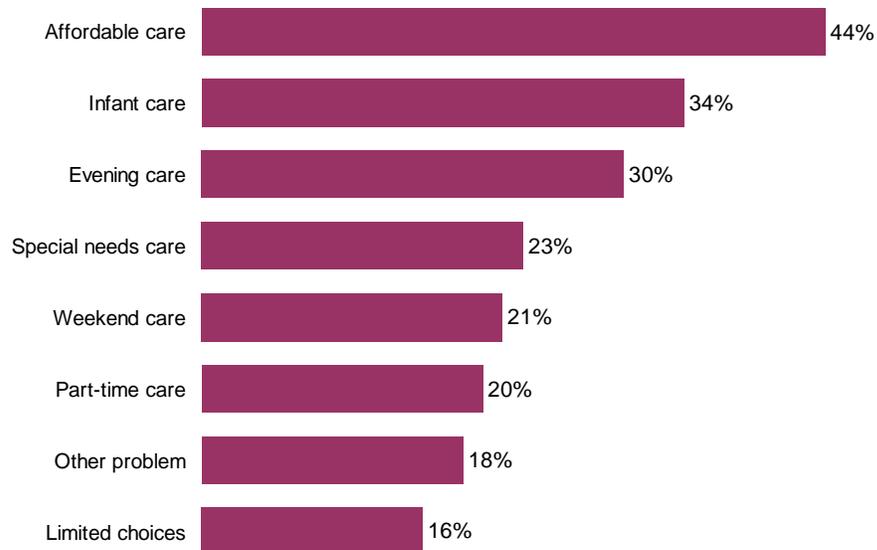
Of the survey respondents with children under 18 living at home, 84% said their children are covered by health insurance (down from 91% in 2005). Four out of five (80%) households with young children have a car seat for each child that needs one (down from 85% in 2005). Five percent of respondents with children in their household say these children are raised by their grandparents.



**Figure 40** Proportion of survey respondents with children who report having car seats for their young children, children’s health insurance coverage, and whether they were a grandparent raising their grandchildren

### Child care

Respondents that use child care use between 1 and 70 hours per week, with an average of 30 hours (median 35). One in five (22%) reported they had had problems getting or keeping adequate child care services in the past 12 months. Of those who do find it hard to get or keep child care, almost half say it is hard to find affordable services (Figure 41). Some also find it difficult to find child care services that fit their needs, such as evening (30%), weekend (21%), and part-time (20%) care. Care for infants (34%) and children with special needs (23%) were hard to find for some survey respondents.



**Figure 41** Reasons for difficulty keeping adequate child care services (n=71)

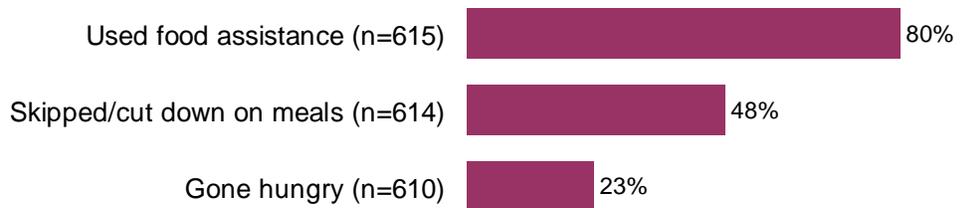
### Parenting and Child Development Recent Developments

- The Children's Council of Skagit County connects monthly to increase public awareness of early childhood education, provide family support, and coordinate agency services. Members include a wide variety of agency representatives and individuals.
- Annually, Early Childhood Connections Conference provides STARS training for child care providers, with workshops in Spanish.
- Skagit's Early Head Start's ARRA stimulus funds will increase enrollment from 83 to 103 through Sept 2011, and will also provide minimal facility upgrades. After 8 years of flat funding, the program will receive a small operation increase in 2010.
- SCCAA provides early childhood education to children of families enrolled in their ESL classes. Even Start Family Literacy, begun in 2006 and held at Madison School, is a partnership of SCCAA, MVSD, Head Start, Migrant Head Start, and SVC.
- SVC's Child and Family Learning Center, opened in 2004, serves as a lab for WWU and SVC Early Childhood Education and Human Services students. It provides inclusive bi-lingual classrooms for HeadStart and SPARC.
- Welcome Baby was cut from the county budget in early 2009. Limited services are conducted by volunteers.
- The highly acclaimed At-Risk Intervention Specialist (ARIS) program, begun in 1991, is undergoing severe budget cuts and reorganization as 2009 closes. ARIS delivered successful services in the schools, community, and home settings, serving thousands of students, ages pre-school to eighteen.
- Skagit Preschool and Resource Center (SPARC) collaborates with Head Start, placing children with disabilities in their classrooms, and provides special education staff support in Head Start classrooms. SPARC retracted their Neuro-developmental Center, formerly an off-site location, to their main office in 2005.
- Best Place early learning centers under the county's 21st Century Learning Grant, phased out in 2005, transitioned to YMCA Child Care serving children one month through 12 years of age. Early learning centers operate full-time year round, with school-age sites operating on school district's schedule. Summer licensed school-age day camp programs operate and accept DSHS subsidies.
- Skagit's Child Care Resource & Referral, hosted by Volunteers of America, reported that 2007 licensed family child care centers numbered 168, a drop from 184 in 2004. 39% of licensed providers have Spanish-speaking staff. Nearly 50% of requests for referrals in 2007 were for weekend or evening care, and over half were from low-income families.
- Extended graduation rates range from lows of 52.8% (Concrete) and 64.2% (Mount Vernon) to highs at LaConner (91.3%) and Sedro-Woolley (87.8%).
- See the following related progress indicators: "Juvenile Detention Alternative Interventions" in Financial and Legal Assistance; Catholic Community Services school-based mental health programs in Health and Healthcare; Oasis Teen Shelter in Housing.
- Current active TANF cases in Oct 2009 is 1,032, of these cases 389 are child only cases where the parents or relatives are not active on TANF with the child. A 6-month average of 603 families received Working Child Care Connections each month in 2009, a 40% decrease from 1,000-plus in 2005. See discussion in Employment & Income.

## Food and Nutrition

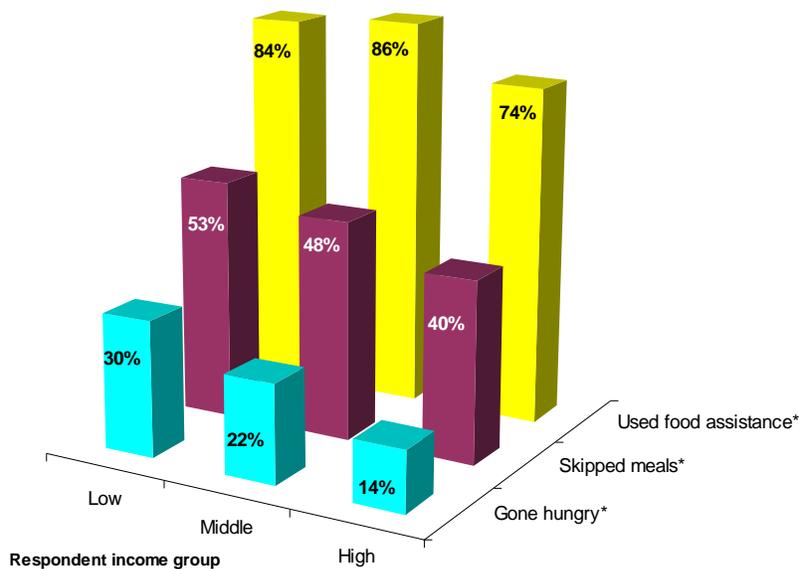
### Food Security and Assistance

Programs that supplement a household’s food supply help 80% of survey respondents (Figure 42). Even so, almost half (48%) said that someone in their household had skipped meals in the past 12 months because there was not enough money for food. Nearly one in four (23%) said that someone at home had gone hungry because they could not get enough food.



**Figure 42 Respondent household food security and assistance indicators**

These three food security indicators are all associated with household income (Figure 43). When the respondent sample is divided into roughly equal size groups based on income, households in the highest income group are significantly less likely to use food assistance (although 74% of them do), experience hunger, or skip meals.

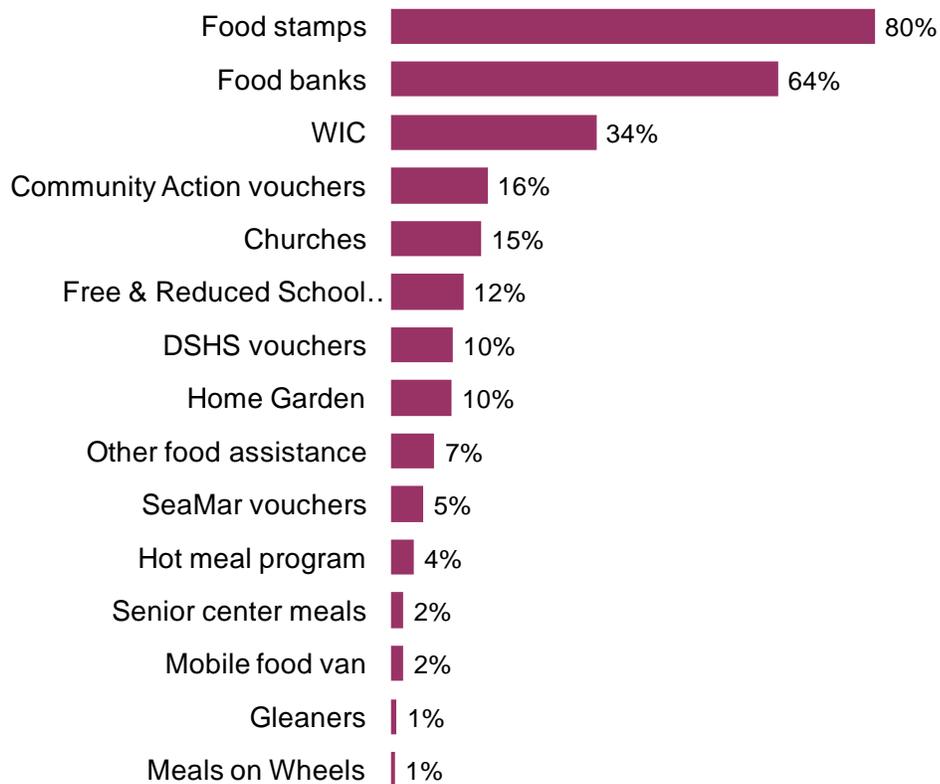


**Figure 43 Food security and assistance indicators by income group (income group boundaries that divide the respondent sample into equal thirds: low=\$0-670/month; middle=\$671-1399; high=\$1,400+)**

### Accessing Community Resources

Survey respondents rely on a wide variety of supplemental sources of food (Figure 44). Two stand out for the degree of participation by respondent households. More than three quarters of respondents receive food stamps (80%), and 64% use food banks. One third of households used WIC (or the *Special Supplemental Nutrition Program for Women, Infants, and Children*). Of respondents that reported other food assistance, the most common sources of help were friends and family, a tribal voucher program, and Friendship House.

Respondents were also asked, if they would use a public garden. The vast majority (82%) answered affirmatively.



**Figure 44 Food assistance programs used by survey respondents (N=488)**

### Child Nutrition

According to the Washington State Office of the Superintendent of Public Instruction, the National School Lunch and Breakfast Programs are designed to promote the health and well-being of children by providing nutritious meals to children in schools and child care facilities. The income eligibility guidelines for school meals are intended to direct benefits to those children most in need. The eligibility criteria is 130% of the federal poverty threshold for free and 185% for reduced-price meals.

Over the last 12 years there is a noticeable upward trend in the proportion of public school children who are eligible for free and reduced meals through the National School Lunch program (Figure 45). The increased need is primarily driven by the increased percentage of children eligible for free meals, from 25% in 1998 to 42% in 2009 (the 2008-2009 school year).

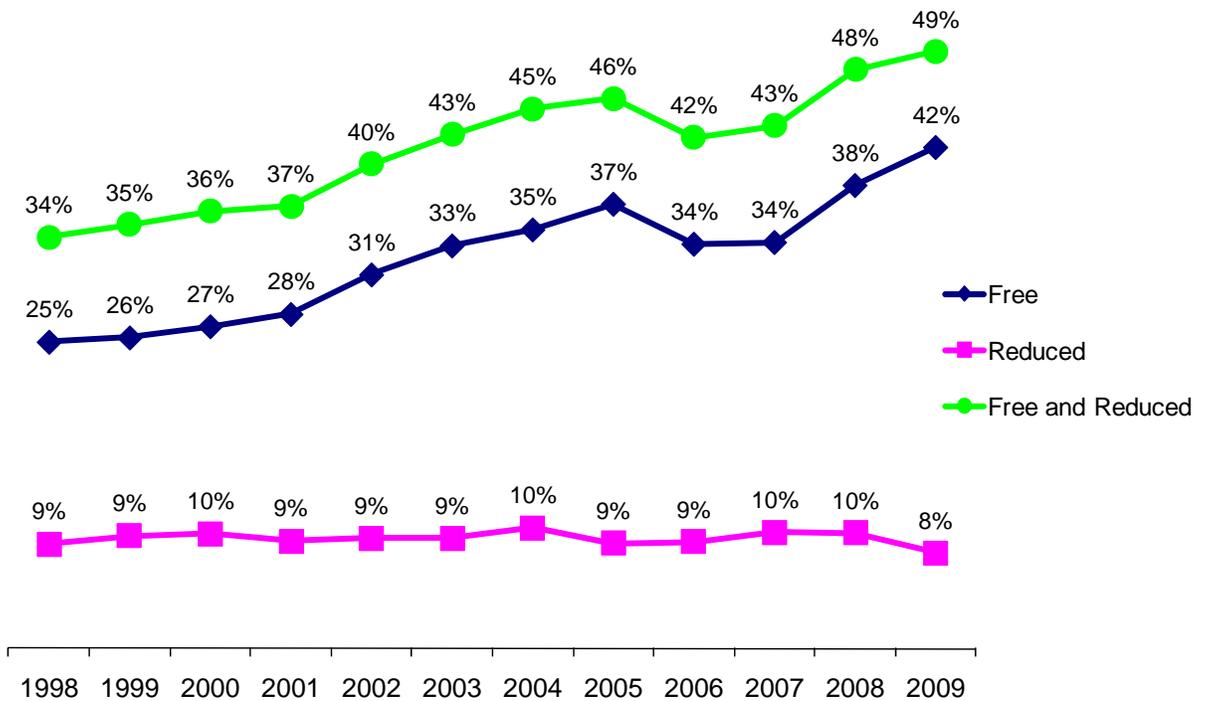
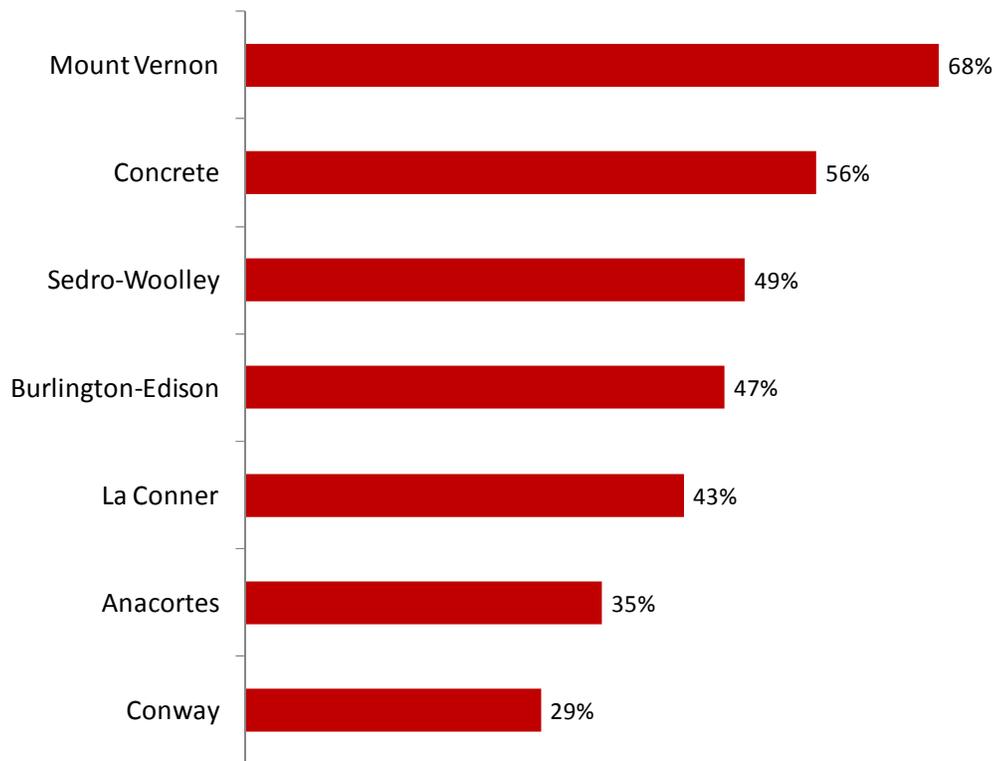


Figure 45 Percent of Skagit County public school students eligible for free and reduced price meals 1998-2009 (Office of Superintendent of Public Instruction)

Among Skagit County school districts, Mount Vernon and Concrete exhibited the highest eligibility rates: 68% and 56% respectively during the current school year. Sedro-Woolley, La Conner, and Burlington-Edison each have nearly half of their enrollment eligible for free or reduced price meals. Conway (29%) and Anacortes (35%) exhibit the lowest eligibility rates, near or exceeding one-third of enrollment.



*Figure 46 Percent of school district enrollment eligible for free or reduced lunch (Source: individual school districts)*

### Food and Nutrition Recent Developments

- Skagit County's Food Bank Distribution Center purchased by Skagit County in 2007 and operated by SCCAA, shares space with Sedro Woolley's Helping Hands Food Bank. AmeriCorps staff are developing a "Victory Garden" project that will bring home-grown produce into the FBDC for distribution to food banks. An expansion is planned to modify the existing plant to more efficiently serve 13 area food banks and five hot meal programs.
- Skagit Food Share Alliance (SFSA), formed in 2008, works with local farmers to purchase locally grown produce for food banks and hot meal programs. A first-annual Bite of Skagit fund-raiser to support SFSA was held in 2009.
- Skagit's food banks provided 246 lbs of food/household in 2009 as compared to 227 lbs in 2005. SeaMar's food bank closed in mid-year 2009, shifting the

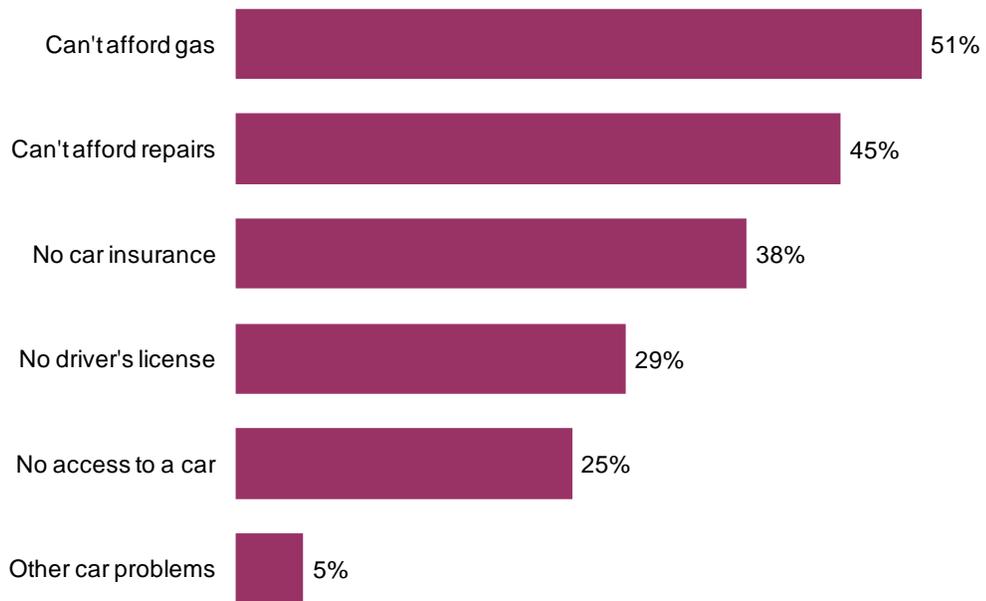
load of homeless individuals formerly served at this operation to other area food banks. SKAT began delivering food twice monthly to the Concrete Food Bank in 2009.

- SCCAA oversees the Basic Food Outreach Program for DSHS Region 3, a 5-county region. Income eligibility guidelines increased from 130% FPL to 200% in October 2008. Since 2005, households approved for food stamps in Skagit County have increased approximately 72% from 5,036 to 8,675, with one in seven Skagit County households relying on food stamps.
- Whole grains and fresh vegetables became part of the regular WIC package in 2009. Farmer's Market WIC food coupons (\$22,750) increase the nutritional value and variety of diets of low-income young families. WIC brings \$2,834,828 to local markets annually.
- The "Skagit County Healthy Communities Project" (SCHCP) continues in 2009 as a partnership of the local health department and Skagit Valley Hospital that started in 2003. Recent partnering extended to "Skagitonians to Preserve Farmland" and Mount Vernon's Farmer Markets to link families as well as hospitals and retirement communities, with fresh local produce.
- Skagit County's "Meals on Wheels" served over 130,000 meals in 2009. Average meal cost is over \$6.00, but suggest donations of \$3.00 per meal to supplement grant funding, United Way and other community support. Despite cuts in staff and funding in 2009, services are being maintained, partially through 250 volunteers.

## Transportation

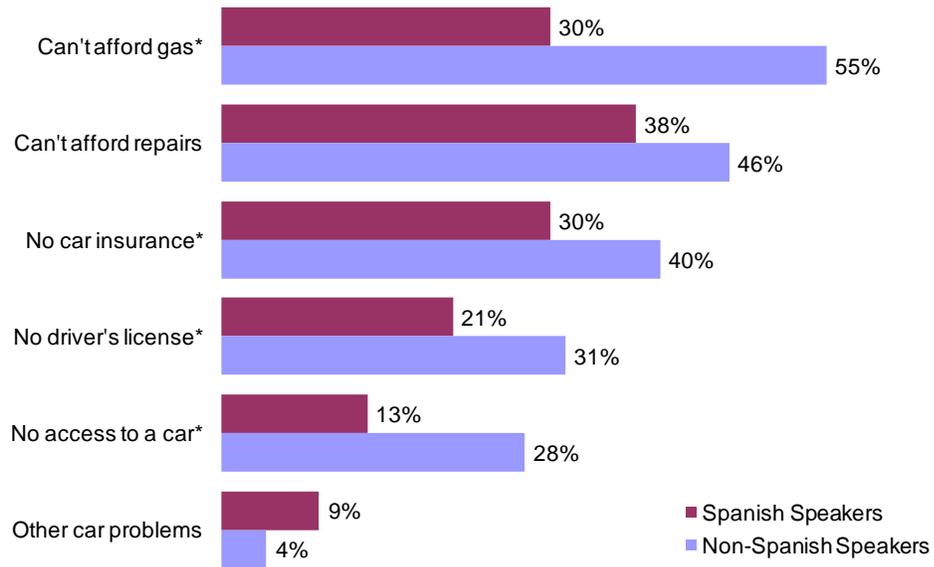
### Transportation Challenges

Almost half of respondents (47%) reported that transportation had been a problem in the past 12 months. Respondents were asked which of six car problem their household had experienced in the past 12 months. Affordability was the main barrier to car transportation, with about half of respondents unable to afford gas (51%) or car repairs (45%). Thirty-eight percent of respondents did not have car insurance, and more than one in four (29%) said they either don't have a driver's license or it is suspended (compared to only 17% in 2005).



**Figure 47 Household car problems in past 12 months (n=565)**

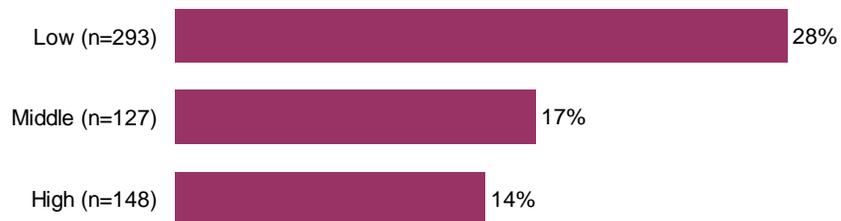
Spanish speaking clients were significantly less likely to report having had a transportation problem in the past year (39% compared to 49% of non-Spanish speakers). When asked about specific types of transportation problems, Spanish speakers were less likely to report most problems, significantly: not being able to afford gas; not having insurance; not having a driver's license; and not having access to a car.



**Figure 48 Household car problems in past 12 months - Spanish speakers compared to other respondents (\*difference is statistically significant)**

**Public Transit Use**

One in five respondents (22%) reported that someone in their household regularly uses the SKAT bus service, up from 13% in 2005. Regular bus use is significantly associated with household income. (Figure 49). Survey respondents in the lowest income group are significantly more likely to have a regular bus rider in their household.

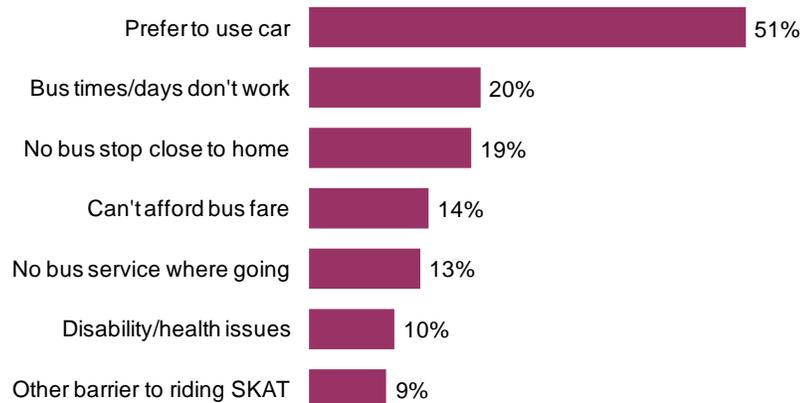


**Figure 49 Proportion of regular bus users within income groups (income group boundaries that divide the respondent sample into equal thirds: low=\$0-670/month; middle=\$671-1399; high=\$1,400+)**

Geographic location also significantly affects respondent bus use. Respondents who live in Mount Vernon are much more likely to ride the bus than respondents that live outside of Mount Vernon (28% versus 17%).

When asked why people in their households don't regularly use the bus, about half (51%) say they prefer to use their cars (Figure 50). The next most common reasons are related to bus schedules and routes: times/days don't work for them (20%), no bus stop close to home (19%), and no service where they are going (13%). Some reported the cost of bus fare (14%) or a disability (10%) as a barrier. It is significant to note that only 20% of 2009 respondents indicated bus times/days didn't work, compared to 31.9% in 2005, and only 13% of respondents indicated "no services where I am going" compared to 20% in 2005.

Many respondents said they just do not like to ride the bus, that they prefer to bike or walk to get where they are going, or that they did not need to get anywhere. The most common other barrier to using the SKAT bus was not knowing how to use the bus or understand the schedule. Other common concerns include safety and cleanliness, the difficulty of traveling with young children, and language barriers.



*Figure 50 Reasons for not regularly using the bus by non-regular bus users (n=428)*

## Transportation Recent Developments

- Requests come to many Skagit service providers for gas vouchers, auto repair, and SKAT passes. Gas prices, which peaked in Summer 2008 at \$4.37/gallon in the Seattle area, have leveled to an average of \$2.80/gallon, compared to 2005 prices which fluctuated from a low of \$1.75 to \$2.80.
- Skagit Transit (SKAT) provides service throughout most of Skagit County, with 13 fixed routes, up from 10 in 2005, and 11 Dial-A-Ride routes, in addition to a Vanpool program for commuters. Expanded transit service beginning in May 2009, resulted in increased service hours, additional trips on the Everett Express, new fixed and Dial-a-Ride routes, expanded Saturday service, and the re-introduction of Sunday service in urban areas, efforts funded by sales tax dollars resulting from the approval of the 2009 Proposition 1. Other services link passengers to Island and Whatcom County transits. Regular monthly fare cards are \$25/month, up from \$15 in 2005. [www.SkagitTransit.org](http://www.SkagitTransit.org)

### Service gaps analysis – consumer and provider perspectives

Survey respondents rated both the *importance* and the *availability* of 15 categories of services in Skagit County to their own household. An additional survey was conducted of service providers, in which they rated the same list of services. Below, we examine the similarities and differences in overall low-income respondent and service provider perspectives as a method of analyzing local low-income service gaps.

**Importance of services.** About half of the clients surveyed rated affordable dental care (52%); housing help (51%); affordable medical care (50%); and living wage jobs (47%) as extremely important to their household. Service providers also rate those services high, especially housing help (60%); affordable medical care (58%); and living wage jobs (52%). Many providers also rated help with utilities (58%) as extremely important. Providers were more likely than clients to view mental health services (37%); drug and alcohol treatment (28%), and domestic violence services (22%) as extremely important.

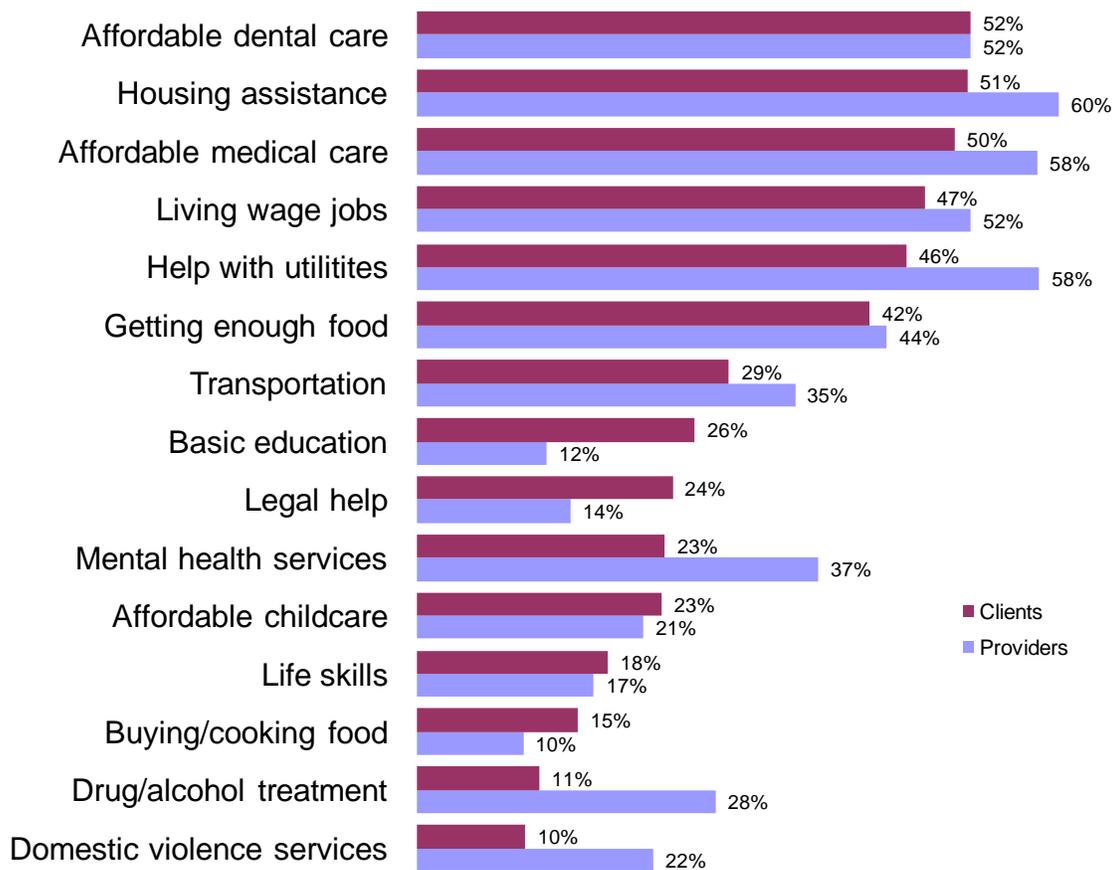
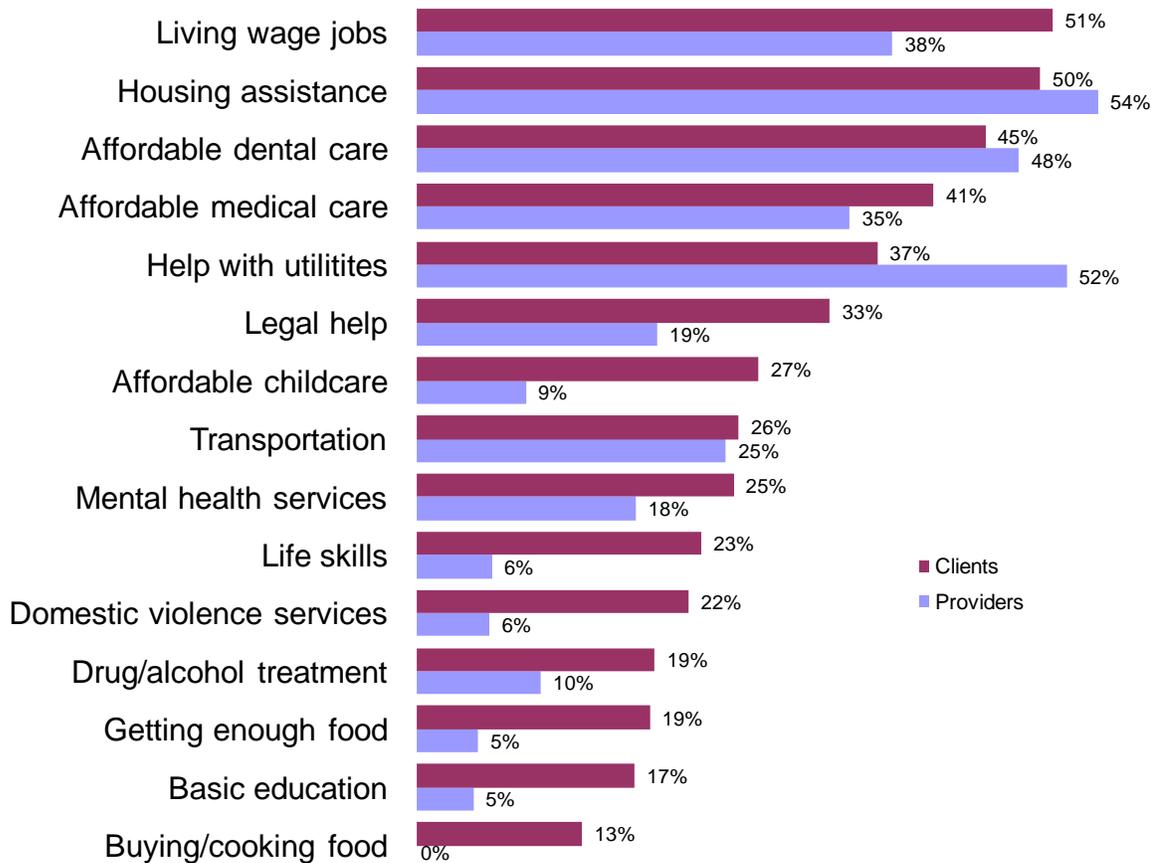


Figure 51 Proportion of providers and clients who rate services extremely important to their households

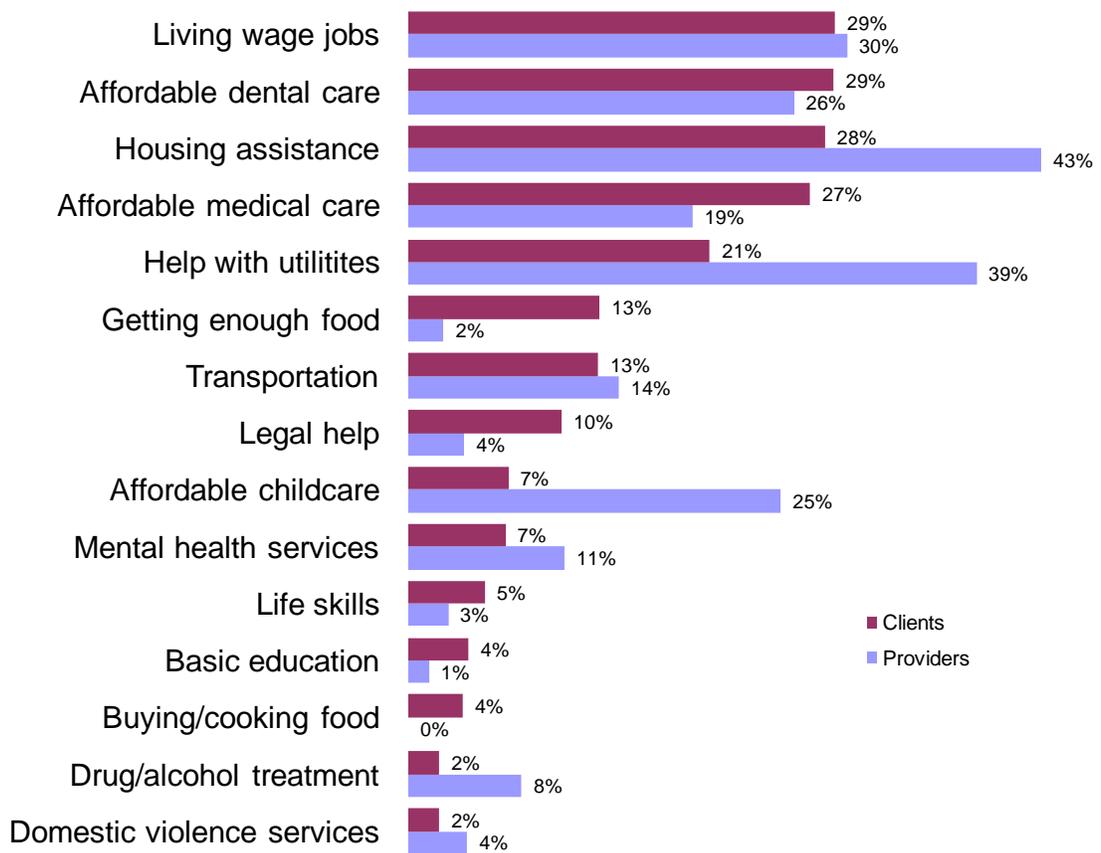
**Availability of services.** Significant proportions of survey respondents agree that some services are “very hard to get” in Skagit County (Figure 52). About half report that living wage jobs (51%) and help with housing (50%) are very hard to get. The services next most frequently reported as very hard to get are affordable dental and medical care (45% and 41% respectively). Providers were most likely to rate housing and utility assistance as the hardest to get (54% and 52% respectively). Major differences between client and provider perspectives on availability exist around affordable child care, life skills, domestic violence services, drug and alcohol treatment, food assistance, and basic education. All of these services are perceived as very hard to get by a great proportion of clients than of providers. This information may be useful in targeting outreach efforts.



*Figure 52 Proportion of survey respondents who rate services “very hard to get”*

**Services gap analysis using importance-availability index.** From an individual household's or individual service provider's perspective, if a social or health service is both "extremely important" to their household or their clientele and "very hard to get", there is a perceived extreme service gap for that particular service. Figure 53 presents the proportion of survey respondents in both groups who perceive an extreme service gap for each of the 15 services.

Services perceived most frequently as having an extreme service gap by low-income households are living wage jobs (29%), affordable dental and medical care (29%, 27%), and housing assistance (28%). While providers also see gaps in those services, they are most likely to emphasize gaps in housing and utilities assistance (43% and 39% respectively). Providers are much more likely that clients to perceive extreme gaps in affordable child care (25% compared to 7%) and substance abuse treatment (8% compared to 2%).



**Figure 53** Percent of client and service provider survey respondents who perceive an extreme gap in their community for the listed service (extreme service gap is defined here as "extremely important" to their household and "very hard to get")

**Services gap analysis using importance-availability coordinate system.** Because survey respondents rated these services on five-point scales,<sup>4</sup> another way to analyze these data is to calculate the average importance and availability scores for each service. These data form the basis of an “importance-availability” coordinate rating system (Figure 54 and Figure 57). The average importance and availability ratings among clients and providers were calculated and plotted on graphs. The lines making up the “crosshairs” of each graph represent the average importance score and the average availability score for each group of survey respondents.

The importance-availability charts are divided into quadrants that rate the services as follows:

*Quadrant I Services that rank above average in importance, and below average in availability*

*Quadrant II Above average in importance and availability*

*Quadrant III Below average in importance and availability*

*Quadrant IV Below average in importance, and above average in availability*

Individuals and organizations planning for future services may want to pay particular attention to the services that appear in the first quadrant (I) of these graphs. These are the services that, on average, are extremely important to low-income households and very hard for them to access. For this study, we constructed importance-availability charts for the low-income household survey respondents and for service provider survey respondents (Figure 54 and Figure 57).

*Technical note about these figures: Readers will note that the quadrants for each “importance-availability” chart are of different size. That’s because the “crosshairs” that delineate each chart’s quadrants are positioned at the average importance and availability scores for survey respondents within each group (low-income households and service providers).*

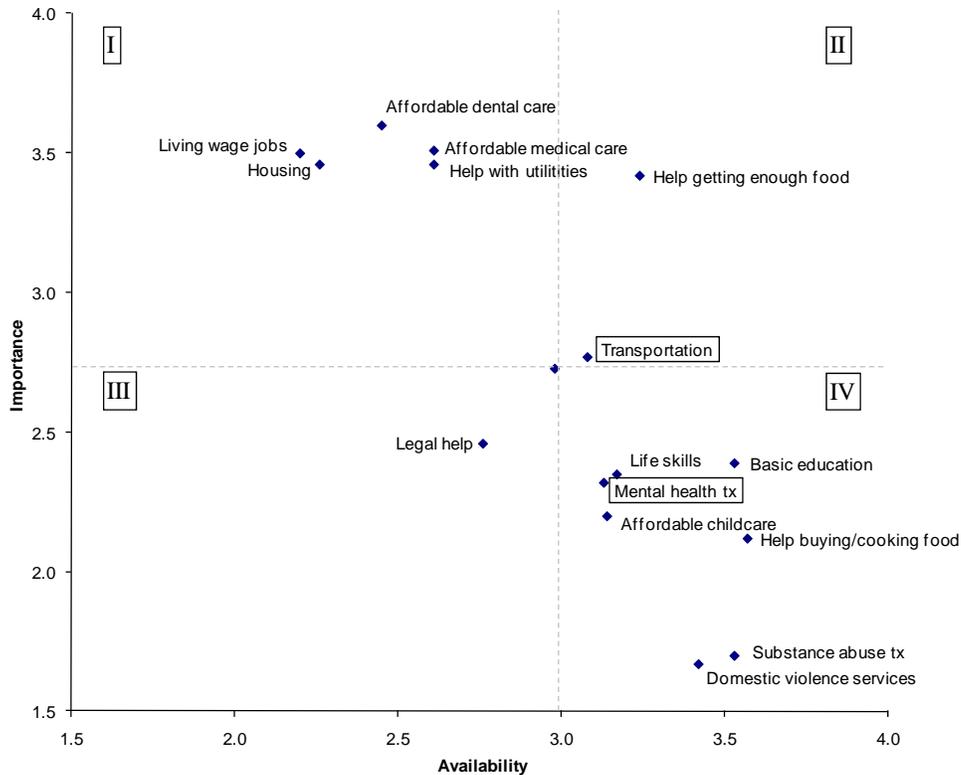
It is the first quadrant (I) that contains those services that planners would consider a priority for action based on consumer or provider opinion.

---

<sup>4</sup> Importance scale ranged from 1, for “not important” to 5, for “extremely important”; Availability scale ranged from 1, for “very hard to get” to 5, for “very easy to get”

### All Consumers

For this list of items, assistance with *housing and utilities, dental and medical care, and living wage jobs* appear to be high priority services needing attention based on the responses of all survey respondents. These are services that have a high potential to benefit every low-income household, so it should come as no surprise that these rank high in importance across the whole respondent sample. This service gap group is the same as that found in the 2005 LINA survey. This finding should not diminish the importance of other services that are needed by a smaller percentage of the population (e.g., child care is only important to households with children).



**Figure 54** Low-income household survey respondents' perspectives on services' importance and availability (boxed items are those services that service providers rated as high importance, low availability)

### Spanish-speaking consumers

Clients who normally speak Spanish at home considered the same services above average in importance, yet below average in availability as all clients: affordable housing, dental and medical care, energy assistance and living wage jobs. On average, Spanish speaking clients assigned higher importance scores to adult basic education. They also see transportation as slightly less important.

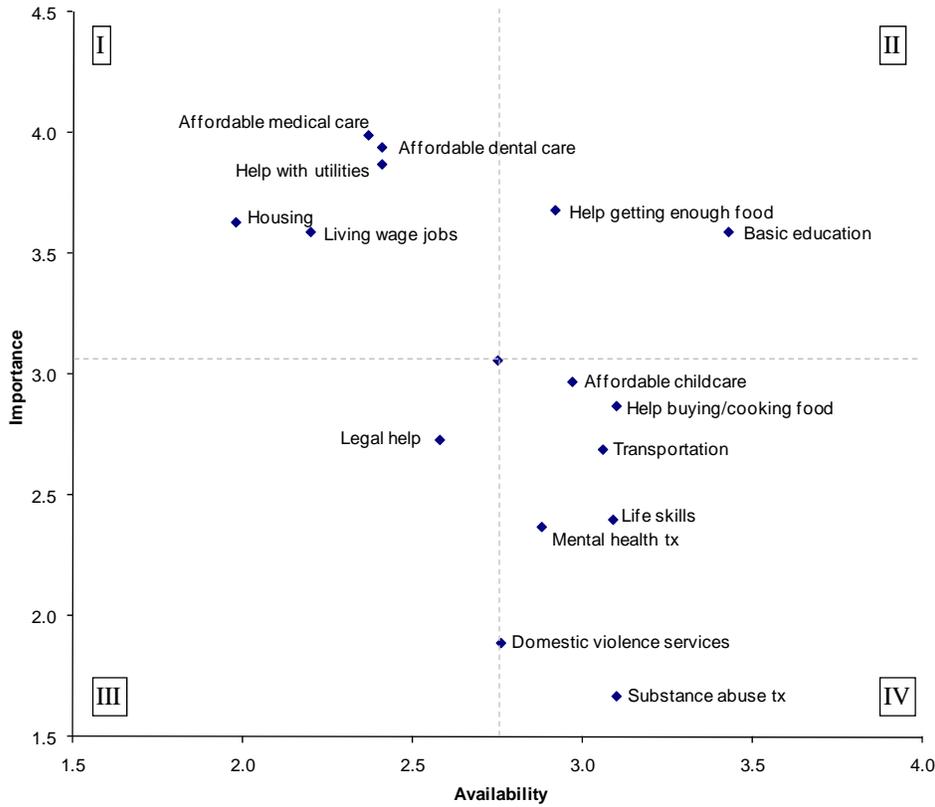


Figure 55 Low-income household survey respondents' perspectives on services' importance and availability - Spanish speaking consumers (N=88)

### Senior consumers

Compared to the overall sample of low-income clients, senior clients (60 years and older) perceive the same services to be high in importance and low in availability; however, in 2005, seniors identified only affordable housing and dental care as high unmet needs. Since then, help with utilities, affordable medical care, and living wage jobs are perceived by our senior citizens as being highly important, but relatively unavailable.

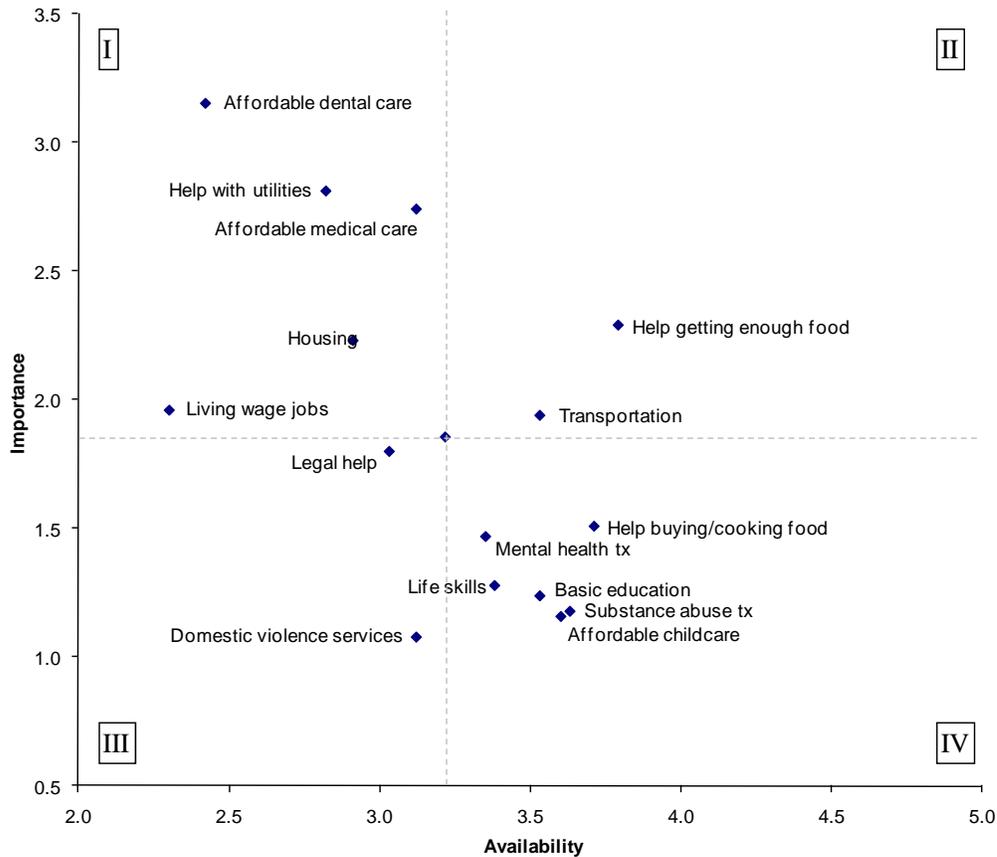
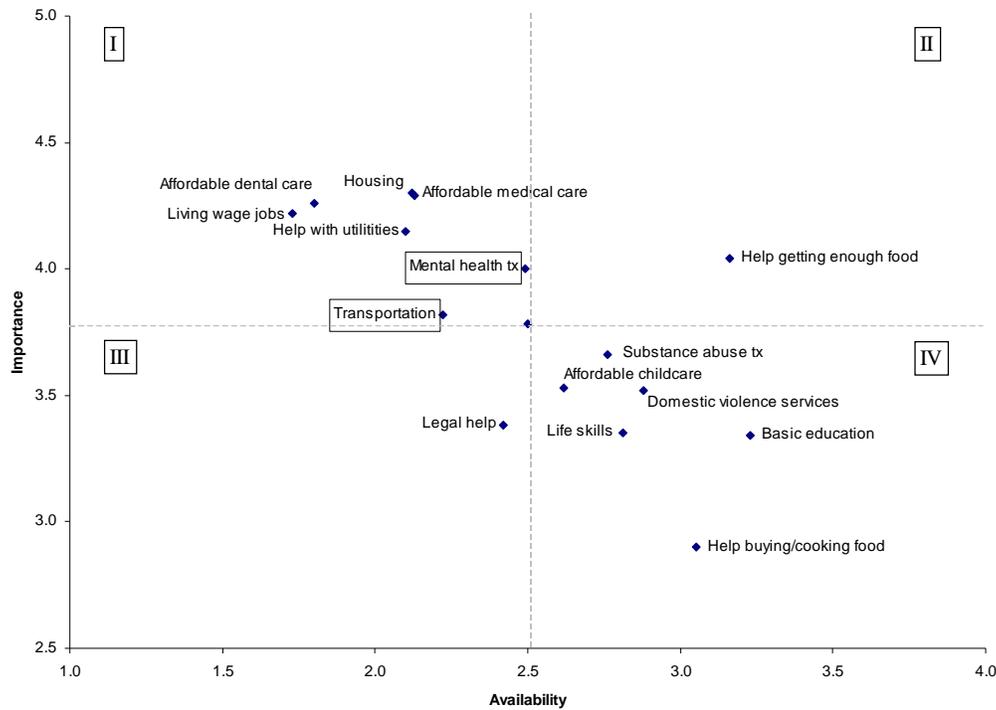


Figure 56 Low-income household survey respondents' perspectives on services' importance and availability - Senior consumers (N=60)

### Service Providers

SCCAA also surveyed service providers to compare their opinions about the importance and availability of community services to their clients. The respondents included 92 staff in 59 different service provider agencies, schools, and church leaders.

Service providers highlighted the same services gaps as did consumers, with the addition of transportation and mental health services. These differences are shown by the boxed items in the charts below.



**Figure 57** Service provider survey respondents’ perspectives on low-income services importance and availability (boxed items are those services that low-income consumers did not rate as high importance, low availability)

## **Appendix A: Survey Questionnaire**

# Needs of Skagit County Households

## WHAT DO YOU THINK?

### A community survey about needs for health and social services

Skagit County Community Action Agency is a local agency that provides health and human services to county residents. Community Action is conducting research with people who live in Skagit County so that county leaders and nonprofit organizations can develop better health and human service programs. An adult (18 or older) who is part of your household should complete this survey. Your participation in this survey is voluntary. The questions take about 15 minutes and your answers are completely confidential.

Thanks for your help!

Questions? Please contact Karen Parnell, Skagit County Community Action Agency in Mount Vernon  
(360) 416-7585 ext. 151



## HOUSING

Have any of the following housing situations happened to you in the last 12 months?

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Shared housing with another household to prevent being homeless      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Had to choose between paying rent OR paying for other basic needs    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Had to move multiple times   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Was homeless   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Was evicted from my home   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Stayed in shelter or transitional housing (including motel vouchers) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other housing problems? (PLEASE DESCRIBE BELOW)                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Q1. Which best describes the place where you are living this week? (CHECK ONLY ONE)**

- |  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> Rental housing                          | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Owner-occupied housing                  |                                     |
| <input type="checkbox"/> Sharing a home with another household   |                                     |
| <input type="checkbox"/> Transitional or emergency shelter       |                                     |
| <input type="checkbox"/> Employer-provided housing               |                                     |
| <input type="checkbox"/> I am homeless ⇒ <b>PLEASE SKIP TO 7</b> |                                     |

**Q2. What is your monthly payment for housing?**

Don't know

- |   |                                   |                   |
|---|-----------------------------------|-------------------|
| <input type="checkbox"/> If in OWNER housing  | Mortgage payment per <u>MONTH</u> | \$_____ per MONTH |
| <input type="checkbox"/> If in RENTAL housing | Rent payment per <u>MONTH</u>     | \$_____ per MONTH |

**Q3. Do you receive financial help with your rent or house payment?**

- |                              |                             |                                     |
|------------------------------|-----------------------------|-------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |
|------------------------------|-----------------------------|-------------------------------------|

**Q5. Here is a list of housing problems that some people experience. Do any of these statements apply to you?**

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| I am at risk of foreclosure on home that I own       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am at risk of eviction from home that I rent       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I cannot find affordable housing to buy              | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I cannot find affordable housing to rent             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I cannot afford to make needed repairs to my home    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Mental illness makes it hard to find a place to rent | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Bad credit makes it hard to find a place to rent     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Any other housing problems? (please describe below)  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Q6. Which of the following five statements best represents your opinion about the condition of your residence? (CHECK ONLY ONE)**

- |   |                                     |
|---|-------------------------------------|
| <input type="checkbox"/> In good shape, needs no repairs  | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Needs minor repairs  |                                     |
| <input type="checkbox"/> Safe, but needs major repairs  |                                     |
| <input type="checkbox"/> Such poor condition that it is unsafe  |                                     |
| <input type="checkbox"/> Needs disability access improvements, (wheelchair ramps, wider doorways, etc.) |                                     |

Q7. Do you hope to buy a home someday?

- Yes
- No

Don't know

Q8. Do any of the following prevent you from buying a home?

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Cannot afford the monthly payments         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Cannot afford a down payment               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do not have good credit                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will not be in this area very long         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| The home buying process is too complicated | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other reason? (PLEASE DESCRIBE BELOW)      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**CHILDCARE AND PARENTING**

\*\* Please go to Question 14 on next page if you do not have children less than 18 years old in your household

Q9. Are you a grandparent who is raising a grandchild?

- Yes     No     Don't know

Q10. Are your children covered by health insurance?

- Yes     No     Don't know

Q11. IF CHILDREN ARE LESS THAN 8 YEARS OLD AND SHORTER THAN 4' 9":

Do you have car safety seat for each child?

- Yes     No     I have no children that are shorter than 4' 9"     Don't know

Q12. IF YOU HAVE CHILDREN IN YOUR HOME UNDER 13 years old, PLEASE ANSWER THE FOLLOWING QUESTIONS; OTHERWISE PLEASE SKIP TO Q 13

When you work or attend school, how many hours do you usually use childcare per week?

\_\_\_\_\_ Hours per week

Have you had problems getting or keeping adequate childcare services in the last 12 months?

- Yes     No ⇒ PLEASE SKIP TO 13     Don't know

IF YES: What problems did you have? (CHECK ALL THAT APPLY)

- |  |  |
|--|--|
| <input type="checkbox"/> Infant care not available/hard to find    | <input type="checkbox"/> Couldn't find care for child with special needs |
| <input type="checkbox"/> Evening care not available/hard to find   | <input type="checkbox"/> Childcare choices were not good enough          |
| <input type="checkbox"/> Weekend care not available/hard to find   | <input type="checkbox"/> Other (please describe)                         |
| <input type="checkbox"/> Part-time care not available/hard to find |  |
| <input type="checkbox"/> Couldn't find affordable care             |  |

**Q 13. Here is a list of problems some parents experience with their children. Please check those problems you have had with your child(ren)? (CHECK ALL THAT APPLY.)**

- |  |  |
|--|--|
| <input type="checkbox"/> Skipping or dropped out of school | <input type="checkbox"/> Learning disability       |
| <input type="checkbox"/> Teen pregnancy                    | <input type="checkbox"/> Weight or eating habits   |
| <input type="checkbox"/> Alcohol use                       | <input type="checkbox"/> Worried about overweight  |
| <input type="checkbox"/> Drug use                          | <input type="checkbox"/> Worried about underweight |
| <input type="checkbox"/> Gang membership                   | <input type="checkbox"/> Have had no problems      |
| <input type="checkbox"/> Victim of gang violence           | <input type="checkbox"/> Other (please describe)   |
| <input type="checkbox"/> Trouble with law enforcement      |  |
| <input type="checkbox"/> Emotional or behavior problems    |  |
- 

**INFORMATION AND LITERACY**

**Q14. Here is a list of skills that some people are interested in improving. Please indicate if you, or other adults in your household, want help to improve any of these skills. (CHECK ALL THAT APPLY.)**  Don't know

- |  |  |
|--|--|
| <input type="checkbox"/> Reading           | <input type="checkbox"/> Get your GED (or high school equivalency) |
| <input type="checkbox"/> Writing           | <input type="checkbox"/> Learn or improve computer skills          |
| <input type="checkbox"/> Math              | <input type="checkbox"/> Financial and budgeting skills            |
| <input type="checkbox"/> Job search skills | <input type="checkbox"/> Citizenship education                     |
| <input type="checkbox"/> Learning English  | <input type="checkbox"/> Other skills you would like to learn      |
| <input type="checkbox"/> Driver's training |  |
- 

**Q15. Which of the following do you, or other family members, use in your home?**

- |   |                              |                             |                                     |
|---|------------------------------|-----------------------------|-------------------------------------|
| Internet                                | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |
| Working land-line phone                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |
| Pre-paid or "pay as you go" cell phone  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |
| Working cell phone with annual contract | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |
| Spanish TV 26 on Comcast TV cable       | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |
| Daily or weekly newspaper               | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |

**FINANCIAL AND LEGAL ASSISTANCE**

**Q16. Here is a list of money problems that people experience from time to time. Which of these problems has anyone in your home had this last 12 months? (CHECK ALL THAT APPLY)**  Don't know

- |  |   |
|--|---|
| <input type="checkbox"/> Bills turned over to collection agency  | <input type="checkbox"/> Declared personal bankruptcy |
| <input type="checkbox"/> House foreclosure                       | <input type="checkbox"/> Any other money problems?    |
| <input type="checkbox"/> Fines I can't pay                       |   |
| <input type="checkbox"/> Have built up too much credit card debt |   |
| <input type="checkbox"/> Have debt from medical/dental bills     | <input type="checkbox"/> None                         |
- 

What problems did you have in getting help with the items you checked above? (CHECK ALL THAT APPLY)

- |   |  |
|---|--|
| <input type="checkbox"/> None                         | <input type="checkbox"/> Could not get childcare |
| <input type="checkbox"/> Did not know where to go     | <input type="checkbox"/> Other (please describe) |
| <input type="checkbox"/> No transportation            |  |
| <input type="checkbox"/> Could not afford             |  |
| <input type="checkbox"/> Not available in my language |  |
-

Q17. Do you have a checking account at a bank or credit union?

- Yes       No       Don't know

Q18. Have you ever claimed the Earned Income Tax Credit (EITC)?

- Yes       No       Don't know

Q19. Has anyone in your home needed legal assistance in the last 12 months?

- Yes       No       Don't know

If YES, did you get help?

- No       Yes (Please tell us where you got help in the space below)
- 

## FOOD AND NUTRITION

Q20. In the last 12 months, have you or anyone in your home...

Gone hungry because you were not able to get enough food?

- Yes       No       Don't know

Skipped or cut the size of your meals because there wasn't enough money for food?

- Yes       No       Don't know

Used any food assistance services such as food stamps, food banks, or any other program that helps with food costs?

- Yes       No       Don't know

**If you got help with food, which of the following has your household used in the last 12 months?**

(CHECK ALL THAT APPLY)       Don't know

- |   |   |
|---|---|
| <input type="checkbox"/> Did not use any          | <input type="checkbox"/> Hot meal programs                |
| <input type="checkbox"/> Food Banks               | <input type="checkbox"/> Senior Center Meals              |
| <input type="checkbox"/> Food Stamps              | <input type="checkbox"/> Meals on Wheels                  |
| <input type="checkbox"/> SeaMar vouchers          | <input type="checkbox"/> Reduced price meals at school    |
| <input type="checkbox"/> Community Action Voucher | <input type="checkbox"/> Gleaners                         |
| <input type="checkbox"/> DSHS voucher             | <input type="checkbox"/> Community Action Mobile Food Van |
| <input type="checkbox"/> WIC                      | <input type="checkbox"/> Other (please describe)          |
| <input type="checkbox"/> Churches                 |   |
| <input type="checkbox"/> Food I grow in my garden |   |
- 

Q21. If a public garden was available to you, would you use it?

- Yes       No       Don't know
-



**Q28. Which of the following do you use as your PRIMARY health insurance that covers yourself? (PLEASE CHECK ONLY ONE)**

- None
  - DSHS Medical Coupon
  - Medicare
  - Commercial health insurance I pay for
  - Health insurance group plan through employer, union or association
  - Military plan
  - Other plan? (PLEASE DESCRIBE)
- 

**Q29. When you are sick or need medical care, where do you usually go? (CHECK ALL THAT APPLY)**

- A walk-in clinic
- A doctor's office
- SeaMar
- The hospital emergency room
- A Tribal health clinic
- Other place (PLEASE DESCRIBE) \_\_\_\_\_

**Q30. When you need dental care, where do you usually go? (CHECK ALL THAT APPLY)**

- Community Action Mobile Dental Unit
- A dentist's office
- SeaMar
- The hospital emergency room
- A Tribal health clinic
- University of Washington Dental Clinic
- Other place (PLEASE DESCRIBE) \_\_\_\_\_

**Q31. When you need mental health care, where do you usually go? (CHECK ALL THAT APPLY)**

- Does not apply to my household
  - Compass Health
  - Sunrise Services
  - A walk-in clinic
  - A doctor's office
  - SeaMar
  - The hospital emergency room
  - A Tribal health clinic
  - Other place? (PLEASE DESCRIBE)
-

**GENERAL DEMOGRAPHIC INFORMATION**

Q32. Where do you live now (CITY AND STATE)?

CITY \_\_\_\_\_ STATE \_\_\_\_\_

Q33. Including yourself, how many persons live in your household?

\_\_\_\_\_ PERSONS (PLEASE BE SURE TO INCLUDE YOURSELF IN THIS NUMBER)

Q34. Including yourself, how many persons in your household are...?

0-5 years old \_\_\_\_ 6-17 years old \_\_\_\_ 18-59 years old \_\_\_\_ 60+ years old \_\_\_\_

Q35. How long have you lived in Skagit County? (IF LESS THAN ONE YEAR, WRITE "<1")

\_\_\_\_\_ YEARS

Q36. Your sex?

Male  Female

Q37. What is your age?

\_\_\_\_\_ YEARS OLD

Q38. Have you or anyone in your household served in the military?

Yes  No  Don't know

Q39. Does an aging parent live in your household with you?

Yes  No  Don't know

Q40. In what country were you born?

United States  Don't know  
 Other (Specify) \_\_\_\_\_

Q41. What best describes your race and ethnicity? Please select one or more of the following.

- African American or Black
- Asian
- Caucasian or White
- Hispanic or Latino
- Native American or Alaskan Native
- Native Hawaiian / Pacific Islander
- Other (Specify) \_\_\_\_\_

Q42. What language do you usually speak in your household?

- English  Don't know
- Spanish
- Mixteco, Triqui, or Zapoteco
- Russian or Ukrainian
- Other (Specify) \_\_\_\_\_

Q43. What is the highest level of education you have completed?

Don't know

- Less than high school diploma
  - High school graduate
  - GED or high school equivalency
  - Vocational or trade school
  - Some college (or still in college)
  - Two-year degree
  - Four-year degree
  - Graduate degree (MS, MA, PhD, JD, MD, etc.)
  - Other (please describe)
- 

**EMPLOYMENT AND INCOME**

This last section is about employment and income. Your answers are completely confidential.

Q44. Here is a list of common sources of household income. Which of these has been a source of income for anyone in your home during the last 12 months?

(CHECK ALL THAT APPLY)

- Wages or income from a job
  - Self-employed or family business
  - VA benefits
  - Social Security
  - SSI
  - SSD
  - Workers' compensation (L & I)
  - TANF (Welfare assistance)
  - GAU or GAX
  - Unemployment insurance
  - Child Support
  - Pension
  - Investment income
  - Other (please describe)
- 

Q45. Including yourself, how many persons in these age groups that live in your household worked for pay at any time in the last 12 months?

Persons under 16 years old \_\_\_\_\_

Persons 16 - 18 years old \_\_\_\_\_

Persons older than 18 \_\_\_\_\_

Q46. In the last 12 months, what was your estimated total MONTHLY household income from all sources?

Dollars per MONTH \$ \_\_\_\_\_  Don't know

Q47. Has getting or keeping a good job been a problem for you or anyone in your home in the last 12 months?

Yes  No  Don't know

If Yes, what are the major problems in getting or keeping a good job?  Don't know  
(CHECK ALL THAT APPLY)

- Not enough jobs available
  - Recent layoff or hours cut
  - Not the right job skills
  - Don't know how to search for a job effectively
  - No tools, clothing, or equipment for the job
  - No transportation
  - No childcare
  - Problems with credit
  - Seasonal work
  - A criminal record
  - No regular place to sleep at night
  - No telephone
  - Language barriers
  - Physical or mental disability
  - Other (please describe)
-

**Q48. Have you started a new business in the last 12 months, OR are you thinking about starting a new business this year?**

- Yes                       No ⇒ **PLEASE SKIP TO Q51**                       Don't know

**What is the nature of your business or the business you would like to start?**

---

**Q49. What are you main concerns about starting your new business? (CHECK ALL THAT APPLY)**

- Getting a business license                       Help with finding the right location  
 Money to help me start my business                       Other (*please describe*)  
 Help with tax records, set-up, etc.  
 Legal Help
- 

**Q50. What local services have you used to help you learn about starting a new business? (CHECK ALL THAT APPLY)**

- None – I didn't know where to go                       Employment Security Department  
 Friends/relatives                       Work Source  
 Small Business Resource Center at EDASC                       Other (*please describe*)  
 Bank
- 

**Q51. On a scale of 1 to 5, about how often did each of the following things happen to you during the last 12 months? Use 1 for "did not happen" and 5 for "happened frequently"**

	Did not happen					Happened frequently
	1	2	3	4	5	
Fell behind in paying rent or mortgage	1	2	3	4	5	
Pressured to pay bills by bill collectors, etc.	1	2	3	4	5	
Car, household appliances, or furniture repossessed	1	2	3	4	5	
Pawned or sold-off valuables to make ends meet	1	2	3	4	5	
Used a payday loan service	1	2	3	4	5	
Used a check cashing service	1	2	3	4	5	
Could not pay childcare bill	1	2	3	4	5	
Borrowed money from friends or family	1	2	3	4	5	
Had utilities (water, heat, or electricity) shut off	1	2	3	4	5	
Had gambling losses	1	2	3	4	5	

You answers to the next questions will help us find out which of the services listed below are the most important and hardest to get.

**Q52. On a scale of 1 to 5, how important is this service to your household now? Use 1 for “not important” and 5 for “extremely important”**

PLEASE CIRCLE ONE NUMBER FOR EACH SERVICE

	Not Important			Extremely Important	
	1	2	3	4	5
Housing help (help finding way to afford rent or mortgage)	1	2	3	4	5
Childcare	1	2	3	4	5
Basic Education/English (ESL)/GED	1	2	3	4	5
Legal help	1	2	3	4	5
Food (help getting enough food)	1	2	3	4	5
Help with how to buy and cook good food	1	2	3	4	5
Transportation that meets my needs	1	2	3	4	5
Affordable medical care	1	2	3	4	5
Affordable dental care	1	2	3	4	5
Living wage jobs	1	2	3	4	5
Help with heating & electric bills	1	2	3	4	5
Mental health services or family counseling	1	2	3	4	5
Domestic violence shelter and/or counseling services	1	2	3	4	5
Drug/alcohol treatment & counseling	1	2	3	4	5
Help with basic living skills (such as budgeting, etc.)	1	2	3	4	5

**Q53. On a scale of 1 to 5, how easy is it for your household to locate and receive these services?**

**Use 1 for “very hard to get” and 5 for “very easy to get”.**

**PLEASE CIRCLE ONE NUMBER FOR EACH SERVICE**

	Very hard to get					Very easy to get	
Housing help (help finding way to afford rent or mortgage)	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Childcare	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Basic Education/English (ESL)/GED	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Legal help	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Food (help getting enough food)	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Help with how to buy and cook good food	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Transportation that meets my needs	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Affordable medical care	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Affordable dental care	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Living wage jobs	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Help with heating & electric bills	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Mental health services or family counseling	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Domestic violence shelter and/or counseling services	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Drug/alcohol treatment & counseling	1	2	3	4	5	OR	<input type="checkbox"/> Don't know
Help with basic living skills (such as budgeting, etc.)	1	2	3	4	5	OR	<input type="checkbox"/> Don't know

**Thank you for your participation. Your answers are very helpful.**

**If you have any questions, please contact Karen Parnell, Skagit County Community Action Agency  
in Mount Vernon at (360) 416-7585 Ext. 151**

## **Appendix B: Survey Agency and Program Sites**

<b>Collection Sites for 2009 LINA Surveys</b>	
	<b>Respondents</b>
<b>Anacortes Housing Authority</b>	5
<b>Anacortes 100 Food Bank</b>	23
<b>Anacortes Senior Center</b>	10
<b>Anacortes Salvation Army</b>	19
<b>Catholic Community Services - Immigration Program</b>	2
<b>Channel Cove - residential community (LC)</b>	4
<b>Child Protective Services - DSHS (MV)</b>	0
<b>Citi-Point Food Bank</b>	14
<b>Community Crossroads Church - Early Learning Center</b>	6
<b>Community Services Office – Mount Vernon</b>	73
<b>East County Family Resource Center</b>	17
<b>Friendship House</b>	12
<b>Helping Hands Food Bank</b>	20
<b>Island Hospital Prenatal Care Center/Anacortes WIC</b>	10
<b>Lyman Food Bank</b>	10
<b>Mount Vernon Senior Center</b>	8
<b>Northwest WA Homeless Veteran's Services - DSHS</b>	2
<b>Northwest Workforce Council/WorkSource</b>	44
<b>OIC</b>	6
<b>Peer Connection Center</b>	16
<b>Resurrection Ministry</b>	1
<b>SeaMar Community Health Center</b>	51
<b>SCCAA</b>	
Basic Food Outreach	2
Energy Assistance Program	39
Fam. Dev. Center & Transitional Housing residents	21
Literacy Program	9
MSS Program	34
Lobby & WIC Program	75
WorkFirst	10
<b>SCCAA - Outreach Programs</b>	
Mobile Food Express	9
Volunteer Chore Program	10
<b>Skagit County Department of Health</b>	15
<b>Skagit County – Office of Assigned Counsel</b>	12
<b>Skagit Domestic Violence &amp; Assault Services</b>	0
<b>Skagit Housing Authority</b>	30
<b>Skagit-Islands Head Start</b>	4
<b>SPARC</b>	0
<b>Swinomish Tribal Center</b>	19
<b>Tierra Nueva</b>	1
<b>United General Hospital</b>	2
<b>Upper Skagit Tribal Center</b>	15
<b>Washington AmeriCorps members</b>	3
<b>Washington State Migrant Council</b>	0
<b>YMCA – Early Learning Center</b>	0
<b>Unaccounted location</b>	7
<b>Total (Number is larger than final reported count due to duplicates)</b>	<b>670</b>

Research and Reporting by **cornerstone**  
STRATEGIES

Funding for the low-income needs assessment was made possible by:

