



THE PARTNERSHIP

FOR CHILDREN AND FAMILIES

Community Needs Assessment

June 2010



Acknowledgements

The Partnership for Children and Families (The Partnership) works diligently every day to improve the lives of children, families and child caregivers in North Central Washington. Partnership members form a coalition that works together to enhance, develop and implement a network of services to support residents in Chelan and Douglas Counties.

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The information presented is accurate to the best of our knowledge. Reliable sources were used to collect information and data presented. Points of view or opinions stated in this document are those of the author(s) and do not necessarily represent the official position or policies of the hiring entity, partner members, or any of their client affiliates.

The goal of this report is to inspire partner members to develop new strategies and partnerships to make our region an even stronger place to live, learn and retire.

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Introduction

Community partnerships and a focus on results are at the core of The Partnership's Community Needs Assessment. The Partnership is committed to being a leader and a partner in united efforts to strengthen our region, mobilize resources, and improve people's lives. The Partnership promotes communities that are proactive as well as responsive to the area's most pressing needs.

National trends in charitable giving and grant funding has been changing in recent years. Donors are increasingly asking for accountability and a realized return on their investment. Foundations and governmental funding sources want to see proof that their investment is making a tangible difference in the community. Limited resources, competitive fund-raising, and reductions in government funding have affected all communities. These factors combine to place a collective strain on the community to provide a stable network of services to meet the needs of its most vulnerable people. The Partnership seeks to leverage and maximize those limited resources, which in turn will result in coordinated system-wide changes with high-impact.

No one agency can do this alone. Partners and collaborators are needed to be effective and inspire community involvement on many levels. Fund-raising contributors or donors are asked to be investors in changing people's lives. Service providers must be able to demonstrate measurable results. The community as a whole must address the needs affecting our neighborhoods. Only with everyone working together can our community's most pressing issues be resolved. The Partnership is committed to being an effective partner in creating lasting, positive community change.

The model utilized in this community assessment is adapted from the Concerns Report Method, which was developed by Faucett, Suarez, Johnson, Whang-Ramos, Seekins, and Bradford (1987) and Suarez, Belacazar, and Keys (1999), "Community Needs Assessment and Action Planning" from Loyola University Chicago.

There are many excellent data rich statistical assessments and resources available within the region. A partial list of these include Chelan Douglas *Trends* website, Chelan

Douglas Child Services Association's *Community Assessment*, and Chelan Douglas Community Action Council's *Community Needs Assessment*. Many jurisdictions have Comprehensive Plans and Consolidated Plans that detail their community's relevant statistics and provide guidance for future needs. This community assessment is different in that it reached out to consumers, service providers, parents, and community leaders. This study strives to provide a snapshot of North Central Washington's current social and economic conditions, assess the community's perception of assets and concerns, and how the two-county region has changed over the last decade.

It is our hope that the results will be used by the Partnership to assess the region's current needs and impact areas for framing its community improvement efforts. A broader goal would encourage community member agencies' involvement in response to community needs. Data for the study were gathered through several methods. These include two surveys of more than 540 community members and community leaders, a series of focus group meetings and presentations to almost 1,500 participants, individual interviews, reviews of other community reports or planning documents, and an analysis of socio-economic indicator data. Those efforts combined represent hundreds of community voices. Contributions and input represent voices of people who utilize social services, voices of the professionals who devote their lives to providing services, voices of parents concerned about the future for their children and family, and voices of community members whose voluntary contributions make this community a better place.

The following pages highlight major findings from the community surveys, interviews, and input from the community meetings. The major findings and highest rated issues were organized into four categories: (1) Children & Youth, (2) Basic Needs, (3) Parental Supports, and (4) People's Health. Each of these categories has subsets that cover related and relevant community impact issues important to participants involved in this effort.

A community's conditions can impact service providers and their clients. Economics, demographics, social structures and systems, all influence the level of need within a community and the resources available to successfully address those community needs. Identifying a community's conditions can help determine service delivery approaches

most effective in addressing community needs and issues. These conditions can be utilized to inform public stakeholders of progress toward community goals and can help correlate particular program contributions, outcomes and potential value in advancing those goals.

Some of the report recommendations pointed to both existing and new partnerships and emphasized their importance in accomplishing community-wide goals. Some felt the process would reveal too many troubling concerns and reflect our current economic crisis. Others preferred to think of this effort as a collective call to action.

Executive Summary

The North Central Washington agricultural region generally includes Chelan and Douglas Counties. Wenatchee and East Wenatchee are the two largest cities in both Counties and are separated by the Columbia River. The cities are situated at the confluence of the Wenatchee and Columbia Rivers. The two cities combined are recognized as the Wenatchee Valley. The Valley is centrally located within Washington State – Seattle is 140 miles west and Spokane is 170 miles east.

The Chelan-Douglas Municipal Statistical Area or MSA has a population of 111,000. The cities of Wenatchee and East Wenatchee house most of the population and market systems. The remainders of the populations live in neighboring communities, some located in fairly remote areas isolated from services and markets.

Before the current recession, Chelan and Douglas Counties were performing well overall in terms of important community indicators such as employment, income, economic growth, and social indicators such as health, educational attainment, and community participation. The recession has increased unemployment from our normal seasonal trends. The recession has reflected reductions in other economic and social indicators, but our region seemed to survive much better than many other areas of the State. Even in the worst of the last two years the region saw new businesses opening and others expanding. While the region's real estate market slowed, it did not experience the extreme number of foreclosures nor did it come to a complete halt. Housing developments still proceeded and home sales still occurred. The long-term prospects for the region are positive.

Respondents to the two surveys shared agreement over the importance of several community issues, including the lack of affordable medical insurance, poor access to medical and dental services without some form of insurance, the social ramifications of poverty, and the lack of local jobs. Focus group participants noted the counties' many assets, including its location, physical environment, and overall high quality of life. Many expressed frustration with jurisdictions, nonprofit organizations, and political leaders for what they perceived as often a lack of collaboration in the community. Many felt that

effective collaboration brings results that a single organization or entity would not be able to accomplish alone. Improved cost efficiencies are generally realized with collaborations. As evidenced in the emerging collaborations and partnerships in our region, our communities and throughout the country, the climate has changed to one that no longer questions the value of partnership but actively encourages it.

Combined information and input from the surveys, focus groups or forums, and interviews revealed a number of community assets that were mentioned time after time.

Those included:

- ◆ The beauty of this region
- ◆ High priority put on quality of life
- ◆ Generosity of the community in both donations and volunteerism
- ◆ An emerging trend of organizations and agencies coming together to work on issues
- ◆ Social services and their referral/collaborative nature
- ◆ Availability of and options for healthy food
- ◆ Collaboration and networks mutual support for each other
- ◆ Supportive educational institutions
- ◆ Engaged officials at all levels of government
- ◆ Dedicated social service providers

The combination of community input and research findings have acted as a guide for this endeavor. It is hoped that the results might help in directing resources, strategic planning energies, and setting programmatic priorities. This may be accomplished by developing community-wide goals, and by identifying existing and potential strategies and partnerships to fill the gaps in provision of educational, economic, health and human services.

Issues in our region do not occur in isolation. One problem can lead to other consequences in other systems including schools, justice systems, prisons and public assistance. In essence, the cost to address the initial issue is shifted to other systems or organizations that may be far more costly. Prevention services pay off whether it is in

early childhood learning, literacy, substance abuse, parent mentoring, or family safety nets.

When early childhood learning, from birth through age five, does not occur there is an early social and emotional development that does not occur, which interferes with a child's healthy development. The life long impact can have a dramatic effect on school, economic and social successes throughout the life of the child.

Budgeting classes do not work for people earning a minimum wage and struggling to provide for basic human needs. People living in poverty are constantly forced to choose between paying for rent, food, childcare, medicine, heat and other basic needs.

In January of 2010, 778 homeless were identified in our region and more than half (62%) were children or adults with children. There were 303 individuals who were unsheltered or were temporarily living with family or friends. Homeless subpopulations reports 86 are victims of domestic violence, 83 have mental health problems, 66 are physically disabled, and 39 have substance abuse problems. The 2010 homeless count of 778 indicated an increase from the previous two years, 758 for 2008 and 748 for 2009.

Gaps in access to mental health services contribute to the numbers of homeless individuals and families. It creates a challenge for the mental health providers to locate the patient in order to provide the needed counseling and management of the needed medications. Supportive housing for the mentally ill is almost non-existent in the area.

Community support systems are critical for people of all ages and backgrounds. People with physical or emotional disabilities that do not receive appropriate community supports experience social isolation, episodes of unemployment and higher rates of sexual assault. Young people without community support are more likely to act out or join a gang. Elderly people without community support are more likely to experience social isolation and depression.

Based on identifying issues presented in this report, it is hoped that key recommendations and potential partnerships can be developed that will illustrate the value and impact of collective action in improving community conditions for people of all ages.

The Most Highly Rated Issues

I. Successful Children & Youth

By age three, roughly 85% of the brain's core structure is already formed, laying the foundation for later learning and success.¹

Adverse childhood experiences can have a tremendous impact on adult health 25 years later. Researchers report that adverse childhood experiences are destructive and have effects that last a lifetime. Commonly these children grow up to become parents who continue to suffer from these difficulties. If combined with other risk factors such as poverty, lack of education, exposure to abuse, lack of parental support and limited access to healthcare, the challenges to these children are even greater.²

Frequent regular long-term mentoring relationships with caring adults can increase youth academic success and social development. Mentoring programs have the added benefit of helping support marginalized or unengaged parents to become more involved in their child's life.

A. Educational Issues

Children are born learning. Their capacity for learning can be significantly *increased or decreased* by how the child's caregivers interact with that child. Strong attachment to parents and caregivers at an early age can make all the difference in the face of challenges later in life for that person.

Unstable or low-quality childcare prohibits parents from finding and maintaining employment. It also interferes with a child's healthy development. Over the past five years, Chelan & Douglas Counties have experienced a decline in the number of childcare licensed providers. This has resulted in a net loss of 547 childcare slots since 2003.³

B. Early Childhood Learning

Early literacy activities are critical to a young child's development. During the earliest developmental years, parents and caregivers need to know how to inspire and encourage children in early learning. In order for a smooth transition into kindergarten, parents need to know how to prepare their children for school, understand what the role is of the parent, what the role is of the school and what to expect or not expect from educational institutions. Parents need to know how to advocate for their children in a fair unbiased way.

Three of every four children under age five (73%) with working mothers are regularly in childcare.⁴ Access to quality, affordable childcare is essential for working parents and the healthy development of young children.

Unstable early childcare and education for children are a result of many factors. The average income of a childcare provider in the Pacific Northwest region is \$17,950, close to the federal poverty level (\$17,600) for a parent with two children.⁵ When providers do not earn enough to meet their own financial needs, it becomes difficult to stay employed or be self-employed in the childcare industry.

Child Care Resource and Referral notes the median cost of childcare for children, preschool age and younger, is from \$444 to \$600 a month. The costs of full-time care represent a substantial cost for families. Middle-income families, earning roughly \$45,000, pay 6 to 15 percent of their household income for one child in childcare.⁶ While low-income households earning \$25,000 or less, pay an average of 22 percent of their monthly income for childcare.⁷

Low-income children enter kindergarten one-to-two years behind in language and other skills essential to school success.⁸

Newly immigrating Hispanic, Asian, and former Soviet Block children have particular challenges with respect to public school readiness. Provided with a two-year program, these children could develop the language and cultural acclimation that would insure a successful experience in public school.⁹

C. Educational Attainment

In Chelan and Douglas Counties' public schools, one in four students entering ninth grade won't graduate with their classmates in four years.¹⁰ A young person who does not graduate from high school is twice as likely to be unemployed in the future. Ninety percent (90%) of Chelan and Douglas Counties Department of Social and Health Services (DSHS) Public Assistance Recipients are High School Dropouts.¹¹

Economic impact of education is felt throughout a person's working life. A high school graduate earns approximately \$6,700 more annually than someone who did not complete high school. A college graduate earns approximately \$10.00 more per hour than a high school graduate. A student who completes college will earn, on average, one million dollars more in his or her lifetime than a student who completes only high school.¹²

D. Promoting Healthy Successful Youth

Students who are not involved in any out-of-school activities are six times more likely to drop out of school by senior year, three times more likely to be suspended in sophomore or senior year and two times more likely to be arrested by senior year.¹³

A key to promoting positive youth development is through high-quality out-of-school time opportunities. Quality out-of-school programs are essential for social success as well as academic achievement. Often the youth most in need of these programs, low-income youth, do not or cannot access these important opportunities.

Every young person needs opportunities for leadership development, community service and civic engagement. "Community Service" is an important way to help kids develop. Research findings on volunteering show that early involvement in volunteering is

associated with a life-long willingness to be engaged in community concerns. Service learning that links work in the classroom to community service helps students to be more successful and positively impact their behavior and attitudes.¹⁴

When youth have positive, regular activities with adults, they are 52 percent less likely to skip school, 33 percent less likely to use violence and 46 percent less likely to begin using drugs.¹⁵ Youth are also less likely to join a gang with positive adult interactions.

Suggested Areas of Focus - Successful Children & Youth

- Mentoring youth to promote successful children.
- Work with area pediatricians to identify behavioral concerns and to make parents aware of resources within the community.
- Increase children's readiness to achieve in school.
- Improve academic achievement through early childhood learning.
- Promote positive youth development through high-quality out-of-school time opportunities.
- Increase youth involvement to prevent child abuse and identify neglect.
- Support efforts to discuss and educate on gang-related activities and gang prevention.

II. Providing For Basic Needs

The cost of living has outpaced wage growth in our region, resulting in an increased number of employed people who are unable to make ends meet. In recent months, the increased costs of electric, gas and grocery prices have hit local families hard. For people making a livable wage, minor adjustments to their budgets have allowed their families to stay afloat. For those already struggling, these increases have resulted in catastrophic financial hardship. Some families are finding that they are forced to seek assistance where they had never before. These trends are driving even more families in search of supplemental food assistance, housing and rental assistance.

Indicators of basic needs of food and shelter can be assessed for this region in many ways. Food security can be determined by looking at food bank distributions, the number of children in public schools that receive free or reduced meals, and the number of households utilizing DSHS basic food program. Housing stability can be determined by looking at access to housing and affordability of existing housing.

A. Basic Needs – Food Security

Hunger is an escalating problem, which impacts people of all ages and ethnic origins. According to US Department of Agriculture data, during the 2004-2007 period, Washington State reduced our food insecurity level to 10.1 percent, below the national average of 11 percent. But more recent local data is very discouraging. Local food banks distribution went from 555,368 pounds in 1999 to 1,379,138 pounds in 2009, a 248 percent increase.¹⁶ More than half (54.9%) of public school students qualify for free or reduced meals.¹⁷ One in every five children is living in poverty and six percent of the elderly are living in poverty.

Female head of households experience even more financial challenges. One in four (24.8%) Chelan County female head of households with no husband present live in poverty. One in three (35.4%) Douglas County female head of households live in

poverty. For example, in order to be living in poverty a female head of household with one child would have an income of less than \$14,490.¹⁸

The largest groups of participants in the federal food stamp or basic food program are children, the elderly and people with disabilities. Yet only 65 percent of eligible families in Washington State access those benefits.¹⁹ The DSHS Basic Food Program serves 15,091 households in Chelan and Douglas Counties. The rate per 1,000 on the Basic Food Program (food stamps) has increased dramatically between 2000 and 2008. Douglas County's rate increased 28 percent going from 99 to 127. Chelan County's rate increased 36 percent going from 109 to 145.²⁰

More than one third (36.5%) of the population in Chelan and Douglas Counties accessed services through DSHS. This translates to 39,245 people who accessed services in the two Counties. These services amounted to an average per client cost of \$3,265, which totaled over \$128 million dollars.²¹

B. Basic Needs – Housing Stability

Children and families need a safe stable place to call home in order to succeed in school, work and life. As new uses develop for scarce land supply, low-income housing diminishes and high-income housing increases. HUD defines housing as affordable if it consumes no more than 30 percent of a household's income. In 2008, 42 percent of renters in the Chelan-Douglas MSA paid 30 percent or more of their income in rent compared to Washington State at 48 percent. Also in 2008, 15 percent of renters in the Chelan-Douglas MSA paid 50 percent or more of their income in rent compared to Washington State at 21 percent. The National Low Income Housing Coalition ranks the most unaffordable rental housing markets. Washington State ranked ninth, while Oregon ranked third.

Federal housing assistance helps only a fraction of the people who are eligible. The Housing Authority reports 398 on their Section 8 wait list with a total of 943 on their total wait lists. Severe housing cost burdens create a multitude of hardships for families

including over-crowding and doubling up with friends and families.²² Long-term stable housing is vital in the academic success of children in school and in a parents' ability to hold down a job.²³

C. Basic Needs – Housing Crisis and Homelessness

For people in housing crisis there are many emergency resources but still there are gaps to serve all segments of the population. There are six emergency shelters and 13 food banks serving Chelan and Douglas Counties' communities. Many churches also provide food assistance. Prepared meals are provided at three locations within the Wenatchee area. There is an extreme shortage of shelter access for families with male children age 12 or older. No shelter currently exists for youth without parents. Supportive housing for persons with mental illness is almost non-existent in this area.²⁴

Suggested Areas of Focus of Basic Needs

- Ensure a strong network of basic human services.
- Address the cause of food insecurity.
- Ensure families utilizing food assistance services also get referrals to other assistance to increase and maintain long-term financial stability and security.
- Meet the emergency and transitional need for food, shelter, housing, safety and clothing.
- Support returning veterans and their families.
- Promote job training, micro-enterprise development and advancement opportunities for unemployed, under-employed and low-income workers.

III. Strengthening Parental Supports

“Every dollar invested in quality early care and education saves taxpayers up to \$13.00.”

Art Rolnick & Rob Grunewald (2005), Federal Reserve Bank of Minneapolis

A. Parenting Classes

The need for parenting classes can be seen in the number of local youth indicating risky behaviors. A 2008 survey of 12th graders indicated the following:

- Said “there was no one or weren’t sure if there was an adult they could turn to for help if feeling sad or hopeless” – One in Four or 28.2%
- In a gang in the last 12 months - 6%
- Injured by boy-or-girlfriend in last 12 months - 10.9% ²⁵

When this assessment’s survey responses were separated out by ethnicity (Hispanic respondents), most of the category ratings were similar. The only exception to this trend was the issue of “non-parents raising children”. This issue was the second highest rated issue with Hispanic survey respondents and the second lowest rated issue with the non-Hispanic survey respondents. This indicates how strong the family values are among Hispanic households.

Another theme we heard from all ethnic groups was that there is an apparent lack of ethnic tolerance within Chelan and Douglas Counties’ communities. It was mentioned many times that there have been civil rights offenses. We heard often, “sadly prejudice is alive and well here”.

B. Prevention of Child Abuse & Neglect

DSHS Child Protection Program accepted referrals of 966 children in 2009. The rate per 1,000 of abused or neglected children has increased dramatically between 2000 and 2008. Douglas County's rate increased seven percent going from 21 to 23 per 1,000. Chelan County's increased 11 percent going from 35 to 39 per 1,000.²⁶

C. Adult Literacy For Foreign Born

Surveys administered to Hispanics in our area rated literacy as their single highest priority. The Hispanics surveyed also appeared to be very happy with the programs offered in our area to promote literacy such as English as a Second Language classes. The National Center for Education Statistics reports that there are three types of basic literacy skills; *prose literacy* (i.e., to search, comprehend, and use information from continuous texts, such as paragraphs from stories); *document literacy* (i.e., to search, comprehend, and use information from non continuous texts in various formats, such as bills or prescription labels); and *quantitative literacy* (i.e., to identify and perform computations, either alone or sequentially, using numbers embedded in printed materials). The most basic of those is *prose literacy*. Fifteen percent (15%) of Chelan County adult residents and 16 percent of Douglas County adult residents lack *basic prose literacy* skills. This equates to 7,700 adults aged 20 and older in Chelan County and 4,200 adults in Douglas County that are illiterate.²⁷

Suggested Areas of Focus For Parental Supports

- Promote programs to help children succeed in all elements of their lives.
- Provide opportunities for child – parent attachments.
- Provide services for children that involve the entire family.
- Promote collaborations between various ethnic groups and domestic violence providers.

- Strengthen Family Support and Parenting Classes that focus on individual and family strengths and capacities.
- Provide culturally specific services to a variety of cultures and language groups.

IV. Strengthening Environments for People's Health

Uninsured people who get sick have three options – hospital emergency room, community healthcare clinic, or forego getting the care they need.

A. Health & Dental Care

Most of the uninsured populations are represented among low-income households. Rising health care costs have made it increasingly expensive for employers to provide coverage, which has shown an emerging impact in mid-income households.²⁸ The inability to pay for medical bills from a health crisis episode is the second leading cause of personal bankruptcy, second only to job loss.²⁹

Our region's ethnic representation plays a role in health care. Sixty two percent (62%) of Latino adults have no health insurance compared to 20 percent of their Caucasian counterparts.³⁰

The estimated number of uninsured in Washington State has shown significant increases since 2000.³¹ According to Washington's Community Health Center System, the number of uninsured patients at Washington community health centers increased by 46 percent between 2000 and 2008. In 2006, the Washington State health care system wasted \$355 million in avoidable Emergency Room hospital visits. These non-emergent visits could have been treated more cost effectively at a physician's office or at a Community Health Center.³² In Chelan and Douglas Counties, 22.8 percent of the population was uninsured in 2008.

The cost of health insurance has reduced or eliminated coverage for many low-wage earners. The aging "baby boomers" and chronic disease care has contributed to a crisis in health care and service providers. The need for services grows as the population ages.

The Columbia Valley Community Health Center (CVCH) serves the Chelan Douglas County region on a sliding fee schedule. CVCH provides medical services to all ages and

dental care to children. A public health nurse in our region compared our area's adult dental care access to that of a third world country.

B. Behavioral Health & Mental Health Care

Youth with emotional and behavioral disorders more frequently experience academic failure, poor social adjustment, and involvement with the criminal justice system.³³ The Surgeon General reports that 20 percent of children aged 9 to 17 experience signs and symptoms of a mental disorder, with 5 to 9 percent experiencing a serious emotional disturbance.³⁴

CVCH previously provided mental health care but lost the Regional Support Network contract for the mental health component of services in mid-2010 to Recovery Innovations, Inc. This contract revision created a gap for providing mental health services to non-Medicaid eligible individuals.

*In any given year, one in five Americans has a mental health disorder, although more than 85 percent do not seek treatment.*³⁵

C. Substance Addiction Disorders

One in ten adult household residents in Chelan and Douglas Counties need substance abuse treatment. In 2003, 13.6 percent of the adults living at or below 200 percent of the federal poverty level needed substance abuse treatment, compared to 10.8 percent in 1993-94. The need for treatment has increased among Hispanics, going from 7.7 percent in 1994 to 12.6 percent in 2003. Only one out of four (26.2%) adults that are eligible for State-funded treatment actually receives treatment. About half of those receiving chemical dependency services have co-occurring mental health problems.³⁶

For every \$1 spent on substance abuse prevention and treatment, \$5 to \$7 is saved in related costs to health care, emergency room, law enforcement, and criminal justice systems.³⁷

D. Elderly Care & Support

As “baby boomers” age and retire, the need for support and access to services will increase. Washington State’s population aged 60 and older is projected to increase by 75 percent by the year 2025.³⁸ The main source of unpaid assistance to elderly living at home is from family, friends or neighbors. More than half of these caregivers are employed full time with the majority of them women.³⁹ Federal funds and State Medicaid have traditionally provided for seniors. Since 2000, those funds have been reduced and many elder-care field staff positions, or case managers, have been eliminated. Without those safety net first contact responders, who often are the seniors’ only social interactions, seniors suffer isolation, depression and undetected illnesses. Those case managers were often the first line of defense against abuse, neglect or ill health.

Suggested Areas of Focus of People’s Health

- Promote and support community-based health services.
- Support community-based mental health services, which are more effective and less expensive than institutional care.
- Help elderly access services that provide protection from isolation, depression, abuse, financial exploitation and neglect.
- Assist elderly individuals to become independent and maintain their independence.

V. Preventative Care Pays Off

- Operate flexible program models that account for differences in individual consumers.
- Address an array of needs and provide links to appropriate services.
- Demonstrate collaboration and efficiency among service providers, which are driven by the consumers and what they know about their own needs.
- Offer intensive services that produce long-term change.
- Create mentoring programs to support families, youth and elderly.
- Help assist adults and families recovering from abuse, criminal justice, and financial instability through mirroring or mentoring programs.
- Establish strong networks for Basic Human Services including housing, shelter, food, subsistence benefits, elderly connections, care and services.

Community Needs Assessment 2010 End Notes

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³⁵ Department of Health and Human Services. “Surgeon General’s Report on Mental Health.” 1999 [Cited January 28, 2007]

³⁶ Washington State Department of Social and Health Services, Research and Data Analysis, County Reports July 2010

³⁷ Governor’s Council on Alcohol & Drug Abuse Programs, Office of Mental Health and Addiction Services. “The Domino Effect: A Business Plan for Re-building Substance Abuse Prevention, Treatment & Recovery.” 2006

³⁸ Washington State Office of Financial Management. “Projections of the State Population by Age, Gender and Ethnicity/Race: 2000 to 2030.” 2008

³⁹ Washington State Department of Social and Health Services, Aging & Disability Services Administration. “Informal/Family Caregiver Fact Sheet.” 2010

COMMUNITY SURVEY RESULTS

*Importance	ISSUES
3.46	Illiteracy
3.44	Parenting Skills
3.44	Child Abuse/Neglect
3.39	Elderly Care & Services
3.38	Homelessness
3.36	High School Drop-outs
3.36	Early Childhood Learning (age 0-5)
3.36	Mental Health
3.33	Gangs
3.33	Alcoholism / Drug Abuse
3.30	Poverty
3.29	Youth Development Outside of School
3.26	Hunger (food assistance required)
3.24	Domestic Violence
3.24	Support for the Elderly
3.21	"Non-Parents" Raising Children
3.20	School Readiness / Underachievement

**4.0 – Very Important, 3.0 Somewhat Important, 2.0 Not at All Important*

All of the above issues received a rating between “Somewhat Important” and “Very Important”. All the above are serious issues that face our community according to the survey respondents.

*Satisfaction	ISSUES
2.93	Hunger (food assistance required)
2.91	Illiteracy
2.89	Early Childhood Learning (age 0-5)
2.73	Parenting Skills
2.73	Homelessness
2.67	School Readiness / Underachievement
2.66	Youth Development Outside of School
2.63	Domestic Violence
2.63	Support for the Elderly
2.61	"Non-Parents" Raising Children
2.61	Child Abuse/Neglect
2.59	High School Drop-outs
2.56	Mental Health
2.55	Alcoholism / Drug Abuse
2.45	Poverty
2.44	Elderly Care & Services
2.43	Gangs

**4.0 - Very Satisfied, 3.0 - Somewhat Satisfied, 2.0 – Not at All Satisfied*

In general none of the surveyed issues received higher than “Somewhat Satisfied” rating. Three of the issues - Poverty, Elderly Care and Services and Gangs received a rating closer to “Not At All Satisfied” than “Somewhat Satisfied”.