



***Spokane Neighborhood Action Partners
Spokane County***

2022-2024 Community Needs Assessment

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Executive Summary

For over 56 years, Spokane Neighborhood Action Partners (SNAP) continues to address the needs of those experiencing poverty in Spokane County, Washington (WA). SNAP serves primarily the geographic area of Spokane County and the Cities within it, covering 1764 square miles. Additionally, some SNAP programs cover multiple counties. However, for this Community Needs Assessment Spokane County, which is most broadly served by SNAP, is the area evaluated.

This Community Needs Assessment aids SNAP in developing a strategic plan to guide its service delivery strategies, prioritize the resources it allocates to address the deep-rooted causes of poverty, and to communicate regarding issues of poverty with its partners and other key stakeholders for the next three years.

The aim of this Community Needs Assessment is to evaluate current need in SNAP's service area using a variety of strategies to identify the greatest needs or "key findings." SNAP's Community Needs Assessment Survey results were used to determine the findings of this assessment. Once determined the underlying causes were explored through research, and they were categorized as family, agency, or community level needs.

A mixed-method approach was used to collect data for this assessment in order to provide a comprehensive "picture" of the community needs in our service area. These methods were both qualitative and quantitative. These methods, combined with several national and state quantitative data sets, are included in the data collection methods section on pages 5-7. Collection of information using several different methods.

- Surveys
- Focus Groups
- Key Informant Interviews
- Street Outreach
- Literature Review



A Synopsis of the Key Findings

The following table contains the Key Findings identified through both quantitative and qualitative data collected. In addition, we analyzed survey data as well as county, state and national level data that guided our determination of these key findings (greatest needs) of the community. Note the BIPOC reference refers to Black, Indigenous, or Person of Color:

Greatest Area of Need / Key Findings	Type of Need	Contributing factors as indicated by percentage of survey responses (See Exhibit B)
Increase services and support for people living with chronic disease	Individual	<ul style="list-style-type: none"> 30.47% of all respondents, and 16 % identifying as BIPOC, report living with a chronic disease (diabetes, heart disease, obesity, etc.
Increase Financial Resiliency	Individual	<ul style="list-style-type: none"> 23.84 % of all respondents, and 15% identifying as BIPOC, desire to improve their credit score and/or build credit .
Increase access to Affordable Housing (both rental & home ownership)	Community	<ul style="list-style-type: none"> 20.2% of all respondents, and 20% of respondents identifying as BIPOC, desired affordable housing to rent 13.84% of all respondents, and 21% of respondents identifying as BIPOC, desired Affordable Homes to purchase.
Increase Food Security	Community	<ul style="list-style-type: none"> 8.19% of all respondents, and 36% of respondents identifying as BIPOC, express a safety concern regarding lack of food. <p>* Due to high disparity in BIPOC survey respondents, this surfaced as a Key Finding within the BIPOC population</p>

A Synopsis of Additional Findings

Greatest Area of Need / Key Findings	Type of Need	Contributing factors as indicated by percentage of survey responses and/or research data (See Exhibit B)
Increase Transportation related services	Individual	<ul style="list-style-type: none"> 18.15% of all respondents, and 22% of respondents identifying as BIPOC, sought access to gasoline vouchers. 17.49% of all respondents, and 24% of respondents identifying as BIPOC, sought affordable Auto Repairs.

Decrease Homelessness	Individual	<ul style="list-style-type: none"> • 6.2% Increase in Homelessness in State of Washington between 2019-2020 • 23% Homeless families with children living in Spokane County
Increase services to the Aging population	Individual	<ul style="list-style-type: none"> • People age 50 or older make up 35% of the population people in our region and lack vital resources. • 16.6% of all respondents, and 10% of respondents identifying as BIPOC, were 60 or older in Spokane County
Reduce Digital Divide	Community	<ul style="list-style-type: none"> • Roughly 72% of rural households in Spokane County regardless of income, have access to the Internet vs. 85.3% in Urban areas. • 15% of respondents identifying as BIPOC, access the Internet from their home.
Decrease Crime Against Person or Property	Community	<ul style="list-style-type: none"> • 14.5% of all respondents, and 28% of respondents identifying as BIPOC, stated they or someone in their household experienced crimes against person or property within the past year.

NOTE: To arrive at the BIPOC percentage quoted in the chart above and throughout this CNA, we identified the total number of BIPOC survey respondents who selected this particular need, divided by the total number of respondents to that particular question.

End of Executive Summary

Overview of Our Region

Spokane County is located in Washington state. Spokane County covers 1,764 square miles and is located along the central portion of the eastern edge of Washington state. Spokane County's estimated population is 539,339 according to the most recent United States Spokane County data, making it the fourth-most populous county in Washington state. Spokane is the second-largest city in the state after Seattle.¹ (Census.gov 2021, n.d.)

Spokane County Demographics	2018	2020 *
Total Population	499,800 individuals	539,339 Individuals
Median Age in Population	37.8	37.7
Gender	50.35% Female, 49.65% Male	50.4 % Female 49.6% Male
Largest Race Population	89.7% White	82.1% White
Median Household Income	\$53,809	\$59,904
Median Home Value	\$247,500	\$261,400
Fair Market Rent	\$867	\$1,191
Percent of Population in Poverty	13.0%	13.7%
Childhood Poverty	Not reported in 2018 CNA	27%

Source of Data for Chart above: ¹(TownCharts,2020).

Value Notes: Estimates are not comparable to other geographic levels due to methodology differences that may exist between different data sources. Some estimates presented here come from sample data, and thus have sampling errors that may render some apparent differences between geographies statistically indistinguishable. The vintage year (e.g., V2019) refers to the final year of the American Community Survey series (2010 thru 2019). Different vintage years of estimates are not comparable.

Diversity in the Region

A new report released in July 2021, by New American Economy (NAE), in partnership with the City of Spokane and the Greater Spokane Valley Chamber of Commerce, underscores the critical role that immigrants in Spokane are playing in filling the region's labor demands, starting small businesses, and supporting the local economy through their consumer spending power.² (New Americans, 2021)

The following minority populations are experiencing growth within Spokane County. Immigrants make up 5.2% of the Spokane County population in 2019.

The five largest ethnic groups in Spokane County, WA are: (1) White (Non-Hispanic) 83.9%, (2) White (Hispanic) (3.9%), (3) Two+ (Non-Hispanic) (3.7%), (4) Asian (Non-Hispanic) (2.28%), and (5) Black or African American (non-Hispanic) (2.7%). 98% of the residents in Spokane County, WA are US citizens. ³(County Health Rankings, 2021)

Poverty Snapshot of the Region

In the US, poverty:

- Is mostly due to the labor market's two greatest shortcomings.
 - Chronic job shortage
 - Too many low-wage jobs

According to HUD:

- The median income in Spokane County is \$59,904. To be considered "low-income" in Spokane, a family of four would have a household income of \$52,550 or less. For a single person living in Spokane County earning income up to \$36,800 or less is considered low-income. That means a person earning an hourly wage of \$17.69 or less would be considered low-income in Spokane County. ³(HUD Guidelines, 2021).
- At our State level, the combination all race poverty rate excluding white (other than white) is 13.84% ⁶(The KFF-Kaiser Family Foundation, 2021).
- Of the 450,067 residents of Spokane County who were born citizens of the United States, 67,816 (15.1%) had income levels below the poverty line within the past year. ⁶
- Conversely, 4,555 (17.5%) of 25,998 residents of Spokane County who were born citizens of another country other than the US reported income levels below the poverty line within the past year. ⁶
- Spokane County has one of the largest proportions of residents experiencing unwed births while living below poverty level at 25.2% of the total and is ranked #3 in the state. ²
- Percent of total county population living in poverty is 13.7%. Breakdown of Race living in poverty: White-13%, Black-22%, Native American-28%, Asian - 10%, Hawaiian/Pacific Islander - 48%, Hispanic - 21%.²

II) Snapshot of Agency

As Spokane's Community Action Agency, SNAP takes the lead in educating and empowering our low-income neighbors. Since our inception, SNAP has helped people transition from crisis to stability by caring for immediate needs, while laying the foundation for future success. Our mission is to increase the human potential of our community by providing opportunities for people in need.

As a community leader, we serve as local and regional advocates for the most vulnerable people living within our community. With a dedicated board of directors, staff, and volunteers, SNAP diligently searches for long-term solutions to eliminate poverty.

SNAP continues to meet client needs to help them LIVE, LEARN, THRIVE. As we have continued to navigate the situation during and post-COVID-19, we anticipate seeing an increase in client needs across the spectrum of our services. A few examples of SNAP Programs are shared below:

- Staying warm and safe will always be a priority of SNAP and programs will continue to offer energy, housing improvements and rental assistance.
- We continue to work to house people experiencing homelessness, in collaboration with other service providers to maximize efficiency.
- We work to connect clients, both disadvantaged and aging populations, with medical and health needs through CHW/Navigators and Our Resource Ride Programs.
- The Financial Services team continues to support small business owners with funding and technical assistance, and providing housing counseling for home ownership and foreclosure prevention.



III) Our Community's Strengths

SNAP, as a neighborhood organizer and Community Action Agency, approaches work from the belief that the people within our community have many capacities, abilities, strengths, and assets. We understand that if we all come together through collaborations and partnerships, we all gain greater strengths to address the concerns and challenges within our community. Furthermore, if we identify the resources that are currently in existence, and we call those resources "assets," we can turn the conversation around to seeking not "What's wrong?", not "What are the problems?", not "What are the needs?", but "What are the problem-solving resources in a neighborhood -- those are assets." ⁷ (Kretzmann 1993)

Community Assets

Agencies /Community Leaders statements of Community Assets from Key Information Interviews;

- "We all seem to work together without any territorial or funding competition."
- "We gather together to get things done by being Action-Oriented"
- "We tend to be transparent and funnel our thoughts back into the community."
- "Lots of free things to do in the community. Love having a downtown park and the revitalization of World Fair '74 site location"
- "River and Park in the middle of City Center"

In addition to the aforementioned comments, US News and Reports on June 29, 2021, released a report that provided an in-depth look at The Healthiest Communities rankings, showing how "nearly 3,000 U.S. counties and County equivalents perform in 84 metrics across 10 health and health-related categories. This ranking will show that Washington State is ranked #1 among the 25 top states in the nation." ⁸(US News and Reports, 2021)

Spokane County has a diversified economy that includes advance manufacturing, aerospace, agriculture, education, finance, insurance, life sciences, health services, and is also the largest labor market in Eastern Washington and Northern Idaho. Several large employers in our region have workforces that contribute to our economic stability: Fairchild Air Force Base (6,560 employees); Providence Health Care (6,145 employees); State of Washington (5,838

employees); MultiCare-Inland Northwest Region (3,342

employees); Spokane Public Schools (3,328 employees).⁹ (Journal of Business & Greater Spokane, Inc, 2021)

Spokane County is fortunate to have several higher education systems based within its boundaries, including Eastern Washington University, Gonzaga University, Whitworth University, and two campuses that are State-run Community Colleges. In addition, The Washington State University Elson S. Floyd College of Medicine is Washington's community-based medical school and had its first graduating class in 2021.¹⁰ (Medicine.WSU.edu, 2021) To further demonstrate Spokane County's assets from a quantitative approach we explored the 2020 Quality of Life data from off the SRHD website. "91% of the respondents rated Spokane as Good to Excellent when responding to the Question: How would you rate the quality of life in Spokane. ¹¹(Spokane Regional Health District, 2020)

NOTE: Quality of life survey questions are defined as a set of survey questions that are asked to a survey respondent to collect feedback about the general well-being and happiness or unhappiness quotient about life. ¹¹

IV) The Assessment Purpose and Process

Spokane Neighborhood Action Partners (SNAP) continues to address the needs of those experiencing poverty in Spokane County, Washington (WA), as they have done for 55 years. While SNAP's service territory does include multiple counties for a few of our programs, SNAP's primary service territory is Spokane County. For this reason, this Community Needs Assessment will evaluate the needs of Spokane County.

The National Association of State Community Action Partnership (NASCSPP) has resources such as an online Community Needs Assessment tool and guidelines for conducting a needs assessment, particularly during the COVID-19 pandemic. NASCSPP also has a data hub designed specifically for the community needs assessment process. ¹²(NASCSPP Technical Assistance Guide, 2020)

a. The Purpose of the Community Needs Assessment

The Community Needs Assessment is a component of the SNAP Community

Services Block Grant (CSBG) program. The enabling legislation, the Community Services Block Grant Act, requires, “an assurance that the State will secure from each eligible entity in the State ... a community action plan ... that includes a community needs assessment for the community served.”

This CNA is a viable tool to assist in the Agency's future strategic planning and will be disseminated to service providers, agencies, educational institutions, and other stakeholders throughout the region.

The results of the CNA support SNAP in developing an overall theory of change to guide its service delivery strategies, prioritize the resources it allocates to address the deep-rooted causes of poverty and communicate regarding issues of poverty with its partners and other key stakeholders for the next three years.

b. Methodology

The research team for this CNA included the following SNAP staff and board members:

- Cameryn Flynn, MA, Project and Grants Manager
- Lucy Lepinski, Chief Operating Officer
- Brandy Marsh, Data Program Manager*
- Dr. Vernon Loke, SNAP Board Member and Associate Dean, College of Professional Programs, Eastern Washington University
- Mistina Hartney-Dearden, BASW (EWU Intern)

*Brandy Marsh is a certified ROMA trainer on staff at SNAP and made every effort to adhere to ROMA standards in the preparation of this CNA.

The CNA evaluates current needs in SNAP's service area using a variety of strategies to identify the greatest needs or “key findings.” (Survey Template Appendix A). Once Key Findings were determined, other data sources were used to confirm and explore the underlying causes.

c. Data Collection Methods

The following sections describe each method and the relationship among the methods used during the CNA collection phase:

1. **Survey:** Survey was developed in conjunction with Vernon Loke of the SNAP Board and the EWU School of Social Work. 431 responses via hard-copy distribution and electronic format (utilizing the QuestionPro Survey

platform) were recorded.

2. **Key Informant Interviews:** Key informant interviews are qualitative in-depth interviews with people—including community leaders, professionals, or residents—who have first-hand knowledge about the community.

3. **Outreach with County Residents**

Outreach was conducted by staff and volunteers, who called multiple non-profit organizations, affordable housing organizations, community centers, and community development agencies to ask for assistance in the distribution of both hard copies of the survey, QR Codes, and survey links. Staff and volunteers also conducted two focus groups and talked directly with residents at a farmers' market. An effort to reach diverse disadvantaged populations included:

- Community Health Workers (CHW)/Resource Navigators working one-on-one with Marshallese and Hispanic to complete the survey and,
- Engaging with our translation contractor –to assist when individual requested language interpretation.
- Distributing surveys and hosting key informant interviews with agencies leaders of Black, Indigenous, (and) People of Color (BIPOC) focused services.

4. **Literature Review**

A literature review was conducted to provide a broader context of community need (Exhibit XI) and to situate the findings from the need's assessment survey. See Works Cited page at end of this report.

d. **Data Analysis Methods**

Poverty, by both demographic and geographic variables, was analyzed using the Community Commons mapping tool. This mapping tool displays where population living in poverty and population living without a high school diploma overlap.

The responses were analyzed using internet searches for themes and terms relating to poverty and community needs. The key informant interviews were analyzed using frequency tables, as well as cross-tabulation tables. Focus groups were analyzed by qualitative methods to ascertain themes and emergent issues that were documented by the facilitator led the groups. We further drilled

down into the raw data to identify respondents by race (Black, Indigenous, Person of Color).

e. Scope and Limitations / Constraints of this Report

This Community Needs Assessment Report seeks to provide an analysis of data collected from the above-mentioned methods. As with any research project, limitations and constraints present themselves that are largely beyond the reporters' control but could affect the study outcome. Sometimes affect the end result and conclusions that can be drawn.

Our study was conducted during COVID-19, when many of our traditional Partner Agency distribution sites were not meeting with clients in person in their offices, preventing their staff to provide the one-on-one support for the client to complete the survey. This not only affected our hard-copy distribution sites, but also limited a broader reach into the community. We had a 55% completed rate. The viewed rate was 76% and 25% were started but not completed. This completion rate was lower than planned.

V) Demographics of Spokane County

To put the demographics of Spokane County into perspective, understanding the demographics of the entire United States is beneficial.

- Nationally, the official poverty rate in 2020 was 11.4 percent, up .9 percentage points from 10.5 percent in 2019. This is the first increase in poverty after five consecutive annual declines.¹
- In 2020, there were 37.2 million people in poverty, approximately 3.3 million more than in 2019.¹

Over the past 10 years, people who identified as Hispanic, Asian, or more than one race accounted for larger shares of the population that were in poverty. Diversity is rising in almost every County in the Nation. The overall U.S. population, though, grew at the slowest rate in nearly a century.¹³ (Government Agency Census, 2020)

As of April 1, 2021, Washington state has 7,766,925 residents, with most of the growth concentrated in larger cities across the state. The Office of Financial Management states strong population growth continues in Washington, with the state adding 109,800 people over the last year, a 1.5% increase. The population of Washington is 78.5% White, 13% Hispanic, 4.4% African American and 9.6% Asian.¹⁴

(Office of Financial Mgmt. (OFM), 2020)

According to American Community Survey completed by the U.S. Census Bureau, Spokane County has a population of 539,339 persons.

- Approximately 42% of the County's population, or 222,081 persons, reside within the City of Spokane. ¹
- Spokane County residents live in urban and suburban unincorporated neighborhoods, cities of 120 to 88,000 persons, and rural areas. ¹
 - The unincorporated area of Spokane County has 126,887 persons or about 28% of the County's population. ¹
 - The remaining 30% of County residents live within the twelve cities and towns of Airway Heights, Cheney, Deer Park, Fairfield, Latah, Medical Lake, Millwood, Liberty Lake, Rockford, Spangle, Spokane Valley, and Waverly. ¹
 - Spokane County Urban County Consortium consists of the unincorporated areas and twelve cities/towns, which make up 58% of the entire County population. ¹

Of the 450,067 residents who were born as citizens of Spokane County, 67,816 (15.1%) had income levels below the poverty line within the past year. Conversely, 4,555 (17.5%) of 25,998 residents of the County who were born citizens of a country other than the US reported income levels below the poverty line within the past year.¹⁴

Washington's elderly population is the only group to show a significant long-term decline in poverty. In 1969, 23.0% of the elderly, more than one in five, lived in poverty. By 2019, following national trends, this percentage was 7.5%. The long-term decrease in poverty among persons age 65 and over is due to the expansion of Social Security and Medicare benefits and indexing those benefits to inflation. ¹⁴

SNAP believes that equity is a non-negotiable core value in achieving our mission. We have acknowledged that racism is a system of oppression that has served to marginalize and dehumanize individuals from varied racial and ethnic identities throughout U.S history and the region in which we reside. Furthermore, we know that systemic racism creates barriers for Black, Indigenous, and People of Color (BIPOC), upholds all other forms of oppression, and is an injustice to us all. We oppose and condemn all forms of oppression.¹⁵ (Washington DC: US Govt. (2019)).

Understanding Economics and Poverty

The effects of economic hardship are well-documented and clear; poverty causes negative outcomes for children, adults, and families, costs the U.S. economy over \$1 trillion annually, and affects all of us.

A Washington State without poverty and injustice would be substantially better off - well-being would soar due to improved education, health, and employment outcomes, and rates of homelessness, child neglect, addiction, and crime would decrease. Our communities would be more vibrant, healthy, and safe, with substantial economic benefits: for every \$1 spent on reducing childhood poverty, we save at least \$7 in return: ¹⁶(Dept. of Commerce, 2017)

Poverty Affects All of Us	
Consequences for the Poor	Consequences for Society
<ul style="list-style-type: none">• Reduced purchasing power• Malnutrition<ul style="list-style-type: none">– Individuals cannot afford sufficient healthy food.• Homelessness<ul style="list-style-type: none">– Poverty is a leading cause of evictions and foreclosures.• Exposure to heat or cold<ul style="list-style-type: none">– Individuals cannot pay for heat or AC, leading to utility cut-offs.• Chronic Stress<ul style="list-style-type: none">– Stress causes “dysregulation” of the immune system, resulting in a wide range of health problems and premature death.	<ul style="list-style-type: none">• We lose people we love• Employers/economy lose productive workers• Tax base loses revenue<ul style="list-style-type: none">– Schools, libraries, and other institutions supported by taxes are shortchanged...and/or-- Taxes are needlessly raised• Overall health care costs rise<ul style="list-style-type: none">– Since poor cannot pay, the rest of us pick up the extra cost– Our disposable income shrinks, curtailing what we would otherwise spend, save, or invest.

According to the Washington State Department of Commerce, “Reducing poverty and inequality is not just about the economic returns- it is also about dignity, humanity, and belonging. When Washingtonians have their foundational needs met and believe their lives are valued, they are more likely to thrive and fully contribute to their families, schools, communities, and jobs. Investments in economic stability, equity, and inclusion benefit all of us.” ¹⁶

Several items are needed when looking at the current economy and rate of poverty in the region including:

- The estimated median per capita income for Spokane County in 2019 was \$59,946, an increase of 9.8% from prior CNA year 2018. ¹⁷(Dept. of Agriculture, 2019)
- The ACS 1-year survey shows the median per capita income for City of Spokane was \$32,168 in 2019. Compared to the median Washington per capita income, Spokane's median per capita income is \$9,353 lower.¹
- The Supplemental Nutrition Assistance Program, previously known as food stamps, is designed to help guarantee low-income households and individuals access to a basic level of nutrition. ¹⁷
 - 32.5k Households received food stamps/SNAP 2015-2019; Spokane County, WA. was 32.5k.¹⁷
- Over the prior 12 months ending July 2021, the Consumer Price Index for All Urban Consumers nation-wide increased 5.4 percent. Food prices increased 3.4 percent over the last 12 months.¹⁸ (Bureau of Labor Statistics, 2021)
 - Within the food category, food at home prices rose 2.6 percent, including a 5.9-percent increase in prices for meat, poultry, fish, and eggs. Food away from home increased 4.6 percent over this period.¹⁸
- Nationally, the unemployment rate increased from 3.5% in February 2020, to 4.4% in March 2020, and then peaked at a high of 14.8% in April 2020. Since then, the unemployment rate fell to 5.8% in May 2021. In Spokane County, the unemployment rate is currently 5.2%.⁹



VI) Key Findings

Key Finding #1	Type of Need	Contributing factors
Increase services and supports for people living with a Chronic Disease	Individual	<ul style="list-style-type: none"> 30.47% of all respondents, and 16 % identifying as BIPOC, report living with a chronic disease (diabetes, heart disease, obesity, etc.

The chronic disease indicators (CDI) are a set of surveillance indicators developed by consensus among Center for Disease and Prevention (CDC), the Council of State and Territorial Epidemiologists (CSTE), and the National Association of Chronic Disease Directors (NACDD). CDI's enable public health professionals and policymakers to retrieve uniformly defined state-level data for chronic diseases and risk factors that have a substantial impact on public health. These indicators are essential for surveillance, prioritization, and evaluation of public health interventions.¹⁹ (Department of Health and Human Services, 2020). Six in ten Americans live with at least one chronic disease, like heart disease, cancer, stroke, or diabetes. These and other chronic diseases are the leading causes of death and disability in Spokane County, and they are also a leading driver of health care costs. Data from Community CDC shows mortality rates for various chronic diseases in Spokane County. Chronic lower respiratory disease includes both asthma and chronic obstructive pulmonary disease. This includes tuberculosis (TB) and in the U.S., TB continues to affect that experiencing homelessness.¹⁹

In Washington State, 4.1% of TB cases from 2016-2020 reported having experienced homelessness within the year prior to their TB diagnosis. Certain medical conditions and health behaviors lessen the ability of the immune system to keep TB infection from progressing to TB disease. Diabetes mellitus was the most frequently reported medical risk (20.9%) among all TB disease cases diagnosed from 2016-2020.¹⁹

When reviewing the Journal of Business report, the data shows there is a huge increase of causes of death in the categories of heart disease, chronic lower respiratory disease, and diabetes when comparing to 2018 and 2019 data. Heart disease had the most significant increase showing the number of deaths per 100,000 with 206.9 deaths in 2019, as compared to 163 deaths per 100,000 in 2018.⁹

Starting in 2018, SNAP employed a community health worker and housing specialist in the Spokane Better Health through Housing (BHH) program which identified and engaged clients with highly complex health care needs. We learned from the final report that the prevalence of chronic illness far exceeded rates observed among other Better Health Together Medicaid recipients. These BHH participants were much more likely to meet federal or state disability standards and have behavioral health problems, chronic health conditions, and/or traumatic brain injuries.²⁰(Taylor Danielson, 2021)

The American Psychology Association indicates, "A larger proportion of people of color, including those who are Black, Hispanic, Asian, Pacific Islander and American Indian, are essential workers and service workers. In many cases, these jobs cannot be performed remotely, meaning individuals are more likely to be exposed to the public and to COVID-19.

"Communities of color may experience difficulty accessing health care because of a lack of insurance and distrust of the medical system, which prevents them from seeking medical attention when they need it. In many cases, even for people who are not employed in essential occupations, financial pressure may cause some individuals to continue working—even when it isn't the safest option."²¹(American Psychology Association, 2021)

In the 2021 CNA survey, 30.47% of all Survey Respondents, and 16% identifying as BIPOC, report they or someone in their households was living with a Chronic Disease (diabetes, heart disease, obesity, etc.).

Note: 49.4% of all Survey Respondents, and 19% identifying as BIPOC, stated that they or someone in their household were living with a disability.

Racism and discrimination are known contributors to chronic stress experienced by individuals within minority groups. According to the American Psychological Association (APA), discrimination related to the workplace, gender, race and ethnicity and sexual orientation have been found to be key factors in chronic stress-related health disparities among ethnic and racial minority groups. The APA notes that African Americans, Native Hawaiians and Latin Americans are significantly impacted by hypertension and diabetes related to discrimination-caused chronic stress. ²¹

Key Findings #2 – Financial Instability

Key Finding	Type of Need	Contributing factors
Increase Financial Resiliency	Family	<ul style="list-style-type: none"> 23.84 % of all respondents, and 15% identifying as BIPOC, desire to improve their credit score and/or build credit .

In 2019, Forbes found 43 million Americans (17%) are struggling with most if not all aspects of their financial lives. Meanwhile, 135 million (54%) are struggling with some aspect of their financial lives. All told, more than 70% are having some type of financial program. ²²(Forbes, 2019)

In 2020, significantly fewer jobs were posted in the private sector. The decrease was mainly due to businesses shutting down because of the impact of the COVID-19 pandemic starting in March 2020. Going forward, the decrease may be divided between temporary decreases because of COVID-19 and permanent decreases due to changing staffing patterns such as telework. Not only are jobs being created, but an increasing number of replacement workers are needed for workers who are retiring. ²³(Employment Security Department, 2021)

Of all 2021 CNA survey respondents, 40.53% and, 9% identifying as being Black, Indigenous, or Person of Color (BIPOC), reported having full-time employment.

Improve credit scores and/or build credit (23.84%)

The survey data shows 23.84% of all survey respondents, and 7% of survey respondents identified as being Black, Indigenous, or Person of Color (BIPOC), as having a desire to improve their credit scores and/or build their credit.

Within the financial industry there is a systemic consumer awareness problem, one that likely stems from a lack of proper financial education. In fact, according to several surveys administered throughout the United States, many consumers lack key personal finance and credit knowledge, including a basic awareness of how to build their credit scores. Though relatively unknown just a few decades ago, today's consumer credit marketplace is almost entirely driven by an individual's credit score.

Despite the vital importance of maintaining a good credit score, however, a surprising number of people are unaware. When Lend EDU surveyed 500 people between the ages of 17 and 37, the company found that 25% of respondents could not correctly define credit score. The nature of this credit misinformation is hardly limited to young people.²⁴(LendEdu.com, 2021)

According to a recent NerdWallet survey, a full 64% of respondents were under the impression that their credit score is posted on their credit reports, which it often is not, and 23% of respondents mistakenly believe they have only one credit score, when in reality they can have several.²⁵(Harris Poll, 2021) Our SNAP Financial Stability Core offers a remedy in a variety of financial education courses. From July 2020 through June 30, 2021, SNAP had 907 low-income individuals attend financial education courses, of which 59% demonstrated an increase in financial knowledge following completion of the course.

Another contributing factor for financial instability is also the challenge of many carrying too much debt. From our survey, 18.14% of the survey respondents responded that they were burdened with too much debt. (6% identify as BIPOC).

Household Debt-to-Income Ratio is one indicator related to household debt. At the Washington State-level, the aggregate debt-to-income ratio in 2020, was

1.54%; whereas Spokane County is slightly higher at 1.65%. A debt-to-income ratio is an indicator of overall financial health. A debt-to-income ratio is the percentage of pretax income that goes toward monthly debt payments, including the mortgage, car payments, student loans, minimum credit card payments, and child support. Lenders look most favorably on debt-to-income ratios of 36% or less. ²⁶(US Govt Federal Reserve, 2020)

Aligned with this challenge are survey results stating 12.44% of the respondents (of which 4% identify as BIPOC) could not afford household expenses such a cable/satellite/internet cost. As recent impacts of the pandemic present, there is also an increase in demand for energy and rental assistance offered by SNAP. (Exhibit B).

Understanding Financial Instability

Understanding financial instability needs to be framed with not only low-income households but also around the population called Asset Limited, Income Constrained, Employed (ALICE). ALICE represents the growing number of households in our communities that do not earn enough to afford basic necessities. ²⁷(United Way of Pacific Northwest, 2020)

With income above the Federal Poverty Level (FPL) but below a basic survival threshold — defined as the ALICE Threshold — ALICE households earn too much to qualify as “poor” but are still unable to make ends meet. They often work as cashiers, nursing assistants, office clerks, servers, laborers, and security guards. These types of jobs are vital to keeping Washington’s economy running smoothly, but they do not provide adequate wages to cover the basics of housing, child care, food, transportation, health, dental, and mental health services. ²⁶A new report provided by United Way of the Pacific Northwest, released in 2020, discusses new data and tools that explain the persistent level of hardship faced by ALICE households, revealing aspects of the Washington economy not tracked by traditional economic measures. ²⁷

The following findings highlight four critical trends that were reported in the original United Way 2018 report and also reported in SNAP’s 2018 CNA report.

1. The number of ALICE households is increasing in Washington as a result of rising costs and stagnant wages. There are more ALICE households than households in poverty, and the number of ALICE households is increasing, while the number of households in poverty is decreasing. The FPL, with its minimal and uniform national estimate of the cost of living, far underestimates the number of households that cannot afford to live and work in the modern economy.²⁷
2. The median hourly wage for the most common occupation in Washington, retail sales, was \$13.96 in 2020, barely enough to support the single-adult survival budget and not enough to support the family Survival Budget, even with two workers.²⁷
3. Financial instability often means additional costs for ALICE households. The costs of financial instability are cumulative and intensify over time. Skimping on essentials, from food to health care, leads to greater long-term problems. Failure to pay bills on time leads to fees, penalties, and low credit scores, which in turn increase interest rates, insurance rates, and costs for other financial transactions (e.g. from check-cashing fees to payday cards). Combine this with job loss particularly during the 2020-21 Pandemic, and the results are concerning.²⁷
4. Unexpected expenses can intensify these impacts. In 2020, only 61% of Washington households had set aside any money in the prior 12 months that could be used for unexpected expenses or emergencies such as illness or the loss of a job. Though this was above the national rate of 42%, it still left more than a third of Washington residents without any financial cushion. Without enough income to cover current and unexpected expenses, ALICE households cannot save for future expenses like education, retirement, or a down payment on a house.²⁷

Education Affordability

It is not surprising that 19.9% of CNA survey respondents stated they could not afford to continue their education when education affordability also contributes to financial instability. (Exhibit B: Survey results) As the team delved into education affordability, we found much written on the topic. The business of providing an education is so expensive because college is different from other things that people buy, argue Feldman and Archibald in their 2011 book, *Why Does College Cost So Much?*²⁸(Feldman & Archibald, 2011).

College, as quoted in the American Families Plan, is a service, not a product. [When] "access to high school became more widely available at the turn of the 20th

Century, it made us the best-educated and best-prepared nation in the world. Everyone knows that 13 years is not enough education for today's workforce and economy".²⁹ (United States Dept. of Treasury, 2021)

Key Findings #3 - Access to Affordable Housing (both rentals and homeownership)

Key Finding	Type of Need	Contributing factors
Increase access to Affordable Housing (both rental & purchasing)	Community	<ul style="list-style-type: none"> 20.2% of all respondents, and 20% of respondents identifying as BIPOC, desired affordable housing to rent 13.84% of all respondents, and 21% of respondents identifying as BIPOC, desired Affordable Homes to purchase.

Our current real estate system is challenging. At a conservative estimate, for example, over half a million people in the US sleep on the streets each night even though there are 5.8 million vacant units (excluding seasonal and for-sale housing) nationwide. In Spokane County, 1,309 people, which make up 1,070 households, were homeless. ³⁰(City of Spokane, Jan.2020)

One reason for this mismatch related to housing and homelessness is that housing has increasingly become a speculative commodity—an asset to gamble with for huge potential gain—rather than to meet human needs. Not only does speculation add to the housing shortage by keeping units off the market and driving up prices, but it can also implode, as it did in 2008, leading to a global economic meltdown. ³¹(Spokane County Realtors Association,2020)

Like most of the country, housing prices have skyrocketed within Spokane County. The median list price per square foot in Spokane is \$224, which is higher than the Spokane-Spokane Valley Metro average of \$209. The median housing price in Spokane is \$350,000, which is lower than the Spokane-Spokane Valley Metro median of \$380,000. ³²(Spokesman-Review, July 2021)

Spokane County's median home price soared to a record \$325,000 in February 2021 according to the Spokane Realtor's Association. The price is reflective of the 21% increase from February 2020 to February 2021. ³²

Spokane County shows it has a Renter rate of 37.6% which is the third highest

renter rate of all other counties in Eastern Washington. Apartment prices have increased 14% from 2020 to 2021. In April 2021 alone, prices increased by 5%. To accommodate forecast housing needs for the City of Spokane, around 357 housing units need to be produced per year through 2037.³³(Spokane County, 2020-2024 Consolidated Plan)

The median gross rent is \$1,146. Therefore, about 1 in 5 citizens are spending more than 35% of their income on rent. More renter households than owner households have housing instability.³³

Currently, median rents in Spokane stand at \$977 for a one-bedroom apartment and \$1,343 for a two-bedroom. This is the eighth straight month that the city has seen rent increases after a decline in November of 2020.³³

It is important to track shifts among age groups to better understand how housing needs change as community demographics shift. Spokane County projections from 2020 to 2030 estimate that the 65+ population will expand from 18% to 22% of the total population – a trend that is consistent with other communities across the country.³³

Baby Boomers, the unprecedentedly large generation of people born between 1946 and 1964, have created a bottleneck in the housing market that significantly affects younger generations' homeownership. Not only are Baby Boomers living longer than previous generations, they are also decidedly staying longer in their homes. In 2000, Baby Boomers made up 43.5% of all homeowners. The percentage dropped only 1.5%, resulting in 42% ownership in 2010. Almost ten years later, the percentage remains at 41% even though the oldest of baby boomers are approaching their mid-seventies, an age well past the average age of retirement. While this is not a new housing trend, the fact that Baby Boomers have homeownership rates of 80%, creates an unprecedented problem for the housing market and for future homeowners, especially as the housing market's inventory hits historic lows. ³⁴(Berkley Economic Review Staff, 2019)

Increasing rent is a similar trend, not only occurring in Spokane County, but also, several other cities across Washington State. Renters' incomes in the City of Spokane have also increased by nearly 21% from \$27,290 to \$32,926. However, this

trend has not kept up with the rental property costs, particularly since the COVID-19 eviction prevention moratorium has been lifted and we are now facing escalating rents.³⁵(City of Spokane, 2020b)

A key way to evaluate housing affordability issues is to quantify the housing cost burden, which is defined as households paying more than one-third of their gross income on housing. Housing cost-burden issues have not affected all households evenly - low and moderate-income households have been disproportionately affected and income level is strongly tied to cost burden. Nearly half of households (renters and homeowners) earning less than 50% of AMI were "severely cost-burdened", meaning they pay more than half of their income on housing, while at least 69% of renters earning less than 80% of AMI were "cost-burdened". Cost-burden rates in the City of Spokane are similar to Spokane County as a whole.³⁵

Cost-burden is the most prevalent issue for renter households in Spokane County. Working at minimum wage (\$13.50) in Spokane County, a person would need 1.4 full-time jobs to afford to rent a 2-bedroom unit, or would need to earn at least \$16.67 per hour for a fair market rent of \$867. The current estimated average renter's wage is \$12.95. This cost-burden then starts to impact other expense areas such as utilities, food, and transportation, resulting in higher debt-to-income ratios.³⁴ Emerging from the 2020 Pandemic - (COVID-19 SARS) the County's housing market appears to be in a phase of self-correcting to adjust for months in which an eviction moratorium was in place and many businesses had to close their doors for public safety purposes.

A major housing gap in Spokane County is the lack of assistance for families who cannot afford available housing resources. The local public housing authority, Spokane Housing Authority (SHA), converted 125 public housing units to project-based vouchers as part of their Rental Assistance Demonstration (RAD) conversion. They currently administer 5,314 vouchers, which are made up of Housing Choice vouchers (both tenant-based and project-based), as well as Housing and Urban Development-Veterans Administration Supportive Housing (HUD VASH) vouchers mainstream single room occupancy units. 737 of the total vouchers are divided

amongst counties outside of Spokane County.³⁶(Spokane Housing Authority, 2021)

Spokane Housing Authority also owns and manages 826 units of affordable housing that were either financed with Bonds or Low-Income Housing Tax Credits (LIHTC) and are located throughout Spokane County. Demand for assistance is far greater than these resources, resulting in long waitlists for assistance. As a result of the most recent open application period in 2016, over 4,500 applicants were placed on the Housing Choice Voucher waiting list, and as of April 1, 2020, 950 remain on the list, as well as 7,500 on the project-based waiting list.³⁷(Spokane Association of REALTORS, 2021)

Practices such as 'redlining' and restrictive covenants on property, continued by policies such as exclusionary zoning, have had long-lasting impacts on neighborhoods and homeownership for African American communities and other communities of color. These inequalities are reproduced across generations, leading to continued patterns of inequality today.³⁸(Understanding Housing Displacement Spokane County, 2021)

Key Findings #4 – Food Security

Key Finding	Type of Need	Contributing factors
Increase Food Security	Community	<ul style="list-style-type: none"> 8.19% of all respondents, and 36% of respondents identifying as BIPOC, express a safety concern regarding lack of food. <p>* Due to high disparity in BIPOC survey respondents, this surfaced as a Key Finding within the BIPOC population</p>

Increase Food Security

Food insecurity occurs when people run out of food, eat less, skip meals, go hungry, or when they subsist on a nutrient-poor diet because they cannot afford to buy food. From June 2020 to January 2021, over 6,250,000 pounds of food was distributed by or for over 100 community partner organizations throughout Spokane County, representing over a 60% increase in total food distribution by 2nd Harvest Food Bank from 2019 – 2020. Washington residents continue to experience a dramatically higher level of food insecurity — from 10% before the COVID-19 pandemic to 27%, according to the latest University of Washington and

Washington State University research on food insecurity and food assistance in the state.³⁹(Spokane County Press Release, 2021)

Some 18 million adults — 9% of all adults in the country — reported that their household sometimes or often didn't have enough to eat in the last seven days, according to Household Pulse Survey data collected August 18-30, 2021. When asked why, 79% said they "couldn't afford to buy more food," rather than (or in addition to) non-financial factors such as lack of transportation or safety concerns due to the pandemic. ⁴⁰(Center on Budget & Policy Priorities, 2021).

As shared in an interview with Natalie Tauzin of the Spokane Regional Health District (SRHD):

"Food insecurity can be deemed long term or temporary and throughout our research we found it to be influenced by a number of factors including income, employment, race/ethnicity, and disability. The risk for food insecurity increases when money to buy food is limited or not available." ⁴¹ (Fig Tree, in press 02-2021)

As reported in Feeding America Report, 2020:

- "Communities of color, especially Black communities, experience hunger, poverty, and unemployment at much higher rates than white people. This is because of long-standing racial injustice that leads to barriers in education, employment, housing, and more.
- People living with a disability and chronic conditions are more likely to experience hunger and lower incomes. Living with a disability or chronic condition may lead to higher medical costs, preventing people from working regularly, or making grocery shopping more difficult. And people living with disabilities face increased discrimination in employments." ⁴² (Feed America Annual Report 2020)

SNAP 2021 CNA-Survey results indicated 8.19% (36% identify as BIPOC) expressed a safety concern about lack of food being available within the past year.

VII) Other Findings

Increase of Transportation

Lack of transportation can also be a major barrier to access to medical care, housing, and other services for many, particularly for those who are disabled, and the aging population.⁴³(Spokane County Community Services, 2020).

The need for increased services running from the rural areas of the county to the urban regions continues to be a challenge. The need also increases for drivers aged 75 and older, as reported by Spokane Cares, "Drivers in the 75+ age group are involved in more crashes than middle-age drivers." ⁴⁴(Spokane CARES, 2020)

Decrease Homelessness

Spokane's 2019 Point-in-Time Count showed there were 1,309 homeless individuals counted, including 192 children (15%) and 106 young adults ages 18–24 (8%).

- Family homelessness has been decreasing steadily since it peaked in 2011 according to the Point-in-Time Count.²⁷
- 23% of the homeless people identified were in households with children. 94% of them were staying in an emergency shelter or transitional housing.²⁷

Increase services and Supports for Aging Population

Today, 35% of people in our region (Spokane County) are age 50 or older, 16.6% are 60 or older, of which 10% identify as being BIPOC, yet most families and communities do not have the resources to provide vital care to our aging population, especially in rural areas and tribal communities. We are fortunate to have Aging and Long-Term Care of Eastern Washington (ALTCEW) available in our County. They are our designated area agency focused on aging, covering Spokane, Ferry, Pend Oreille, Stevens, and Whitman Counties.⁴³(ALTCEW Consolidated Plan, 2021)

ALTCEW's Consolidated Plan identified the need to address high costs of living, the need for "aging friendly" communities (housing on one level plus access to amenities), walkable communities (sidewalks clear of snow), and safe and accessible transportation.⁴⁵

Decrease in Digital Divide

The term “digital divide” refers to the gap between people at different socio-economic levels regarding their opportunities to access Information and Communication Technologies (ICTs) and to their use of the Internet.⁴⁶(National Digital Inclusion Alliance, 2021)

Rural Americans, communities of color, individuals with disabilities, senior citizens, and many others often find it impossible to gain internet access, devices to use the internet, or basic digital literacy training.⁴⁶

The term “Digital Inclusion” refers to the steps needed to ensure that all people, including the most disadvantaged, can access and use Information and Communication Technologies (ICTs).⁴⁶

The term “Digital Equity” is when all people have access to any and all information technology needed to fully participate in our society, democracy, and economy. Digital Equity is required for full civic and cultural participation, employment, lifelong learning, and access to essential services.⁴⁶

Based on nation averages of Internet connection, Washington is ranked 16th most connected state in the U.S. Although some areas are much less connected than others particularly rural areas. Recently, the reported average statewide speed for Washington was 60 Mbps.⁴⁶

SNAP 2021 CNA Survey results indicate that 74.69% of respondents stated they accessed the Internet regularly at home. Only 11% of the BIPOC population identified as having Internet at home. For reliable cell / phone service, 93.68% affirmed access, while only 17% of the BIPOC respondents could affirm access.

VIII) COVID-19 Impacts on the Economy and Social Systems

"Even if you have weathered the pandemic in relative safety and comfort, your life's vulnerabilities and the world's fault lines have been exposed. And if you entered the pandemic on the bottom of Americas hierarchy of dignity and opportunity, COVID-19 has greatly amplified your all-too-familiar experience of constant adversity and injustice." ⁴⁷(Bobby Milstein, 2020)

Foremost on peoples' minds in 2020 and 2021 is the pandemic. The COVID-19 crisis's long-term effects have and will continue to impact the economy and social systems. A Human Rights Watch analysis of public-use microdata from the Census Bureau Household Pulse Survey shows that the pandemic's economic fallout has had a devastating and disproportionate impact on the rights of low-income people who were already struggling. As the world becomes increasingly interconnected, so do the risks we face.

The COVID-19 pandemic has not stopped at national borders. It has affected people regardless of nationality, level of education, income, or gender. But the same has not been true for its consequences, which have hit the most vulnerable the hardest.

The spread of COVID-19 has sent shockwaves across the globe. The public health crisis, unprecedented in our lifetime, has caused severe human suffering and loss of life. The exponential rise of infected patients and the dramatic consequences of serious cases of the disease have overwhelmed hospitals and health professionals and put significant strain on the health sector.⁴⁸(OECD, 2020)

As governments have grappled with how to prevent the spread of the disease, which included closing down entire economic sectors and imposing widespread restrictions on mobility, the crisis is expected to burden societies for years to come. According to the Organization for Organization Economic and Development's (OECD) latest economic outlook, even the most optimistic scenarios predict a brutal recession. Global economic activity is expected to continue to fall with average unemployment climbing to 3-4% over the next few years.⁴⁸

The social and economic impact of the pandemic and related measures are unprecedented. The impacts are felt throughout every age and cross over into several areas of high concern – including housing, employment, education, and

both physical and mental health. Throughout the pandemic, Spokane has seen increased homicides, suicides, heroin overdoses, domestic violence incidents, and road rage, auto accidents, and auto-related deaths.⁴⁸

The COVID-19 pandemic has revealed deep-seated inequities in health care for communities of color and amplifies social and economic factors that contribute to poor health outcomes. Recent news reports indicate that the pandemic disproportionately impacts communities of color, compounding longstanding racial disparities.⁴⁸

Another interesting impact is the stock market performance during the pandemic show the fundamental trends have accelerated, propelling some companies forward at record speed while for others headwinds have turned into hurricanes.⁴⁹(Kellogg Foundation, 2021).

The effects will be felt for a long time into the future, particularly those with the challenges of:

- i. Job loss, and the impact on the economy and education
- ii. Behavioral Health-related issues including Aggressive Driving & Crime against Person /Property (including Domestic Violence and Child Abuse)
- iii. Suicide rates
- iv. Substance Abuse /alcohol / other

In research from Washington State Department of Health Dashboard (October 18, 2021) the following are statistics related to Covid-19 for the Washington State and Spokane County: ⁵⁰(DOH,2021)

Unfortunately, the COVID-19 data released throughout the United States and specifically Spokane County illustrate how existing health inequities and discrimination can lead to communities with fewer resources bearing the brunt of a global health crisis. In Spokane County, Pacific Islanders, Hispanics and Blacks are experiencing significantly higher rates of cases, deaths and hospitalizations associated with COVID- 19 than whites, as seen in the table below.⁴⁹(Spokane Regional Health District, COVID- 19, 2021)

	Washington State Data	Spokane County
Confirmed Cases	614,932	63,367
Probable Cases	80,084	5,842
Total Cases	695,016	69,209
Hospitalizations	38,482	4,235
Deaths	8,234	956
% of Deaths (deaths/total cases)	1.2%	1.4%

COVID-19 CASES Count and Percent of Total		
American Indian/Alaska Native	891	1.2%
Asian	925	1.2%
Black	1489	2.0%
Hispanic	2545	3.4%
Native Hawaiian/ Pacific Islander	1060	1.4%
Other / unknown	30573	40.3%
White	38318	50.6%

*Note: Additional information on all statistics are available upon request from SNAP's Project Office. Request at feedback@snapwa.org.

IX) EXHIBITS

Exhibit A – Community Needs Assessment Survey (Using QuestionPro Platform)

Exhibit B – Survey Results Raw Data

Exhibit C – Key Information, Focus Group, and 1-on-1 Interview Themes

Exhibit D - Hard copy survey distribution sites

Exhibit E – List of Agencies participating in Key Informant Interviews

Spokane Neighborhood Action Partners (SNAP)
Community Needs Assessment Survey



Thank you for completing the attached survey.
This survey will give voice to the needs of your household.

Would you prefer to complete it on your phone or computer?

Visit us at <https://cna21.questionpro.com>

or

Scan the QR code below with your smartphone to take our digital survey



If you would like to know more about SNAP services, please visit our website at www.snapwa.org or call us at 456-SNAP.

Do you know someone else that might be willing to fill out this survey?

We want their input! *

Please refer friends to the same hyperlink above or take a paper copy to them

All surveys are to be completed by June 30th, 2021

*Please have friends fill out the survey through the hyperlink above OR return the hard copy to the agency from which you received this paper copy OR call 456-SNAP for drop-off locations.

Spokane Neighborhood Action Partners (SNAP)
2021 Community Needs Assessment Survey

This survey is not an application for services. The information you provide will not be used to determine services for you or your household.

Your answers will give voice to the overall needs of our community.

Your answers to this survey will remain confidential.

If you are interested in receiving SNAP services, you may visit our website:

www.snapwa.org or call our main line: 509-456-SNAP

1) How do you identify yourself?

- Female
- Male
- Non-binary
- Prefer to Self-describe: _____
- Choose not to disclose

2) Age

- 17 or younger
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65 or older
- Choose not to disclose

3) Which category or categories best describes your race?

- Black or African American
- Native Hawaiian or Pacific Islander
- American Indian or Alaskan Native
- Asian
- Mixed Race
- White
- Other

4) Are you of Hispanic, Latinx, or of Spanish origin?

- Yes
- No

- 5) Are you or someone in your household living with a disability?
- Yes
 - No
- 6) Including yourself, how many people live in your household? _____
- 7) Including yourself, how many people under age of 18 are living in your household? _____
- 8) Total Monthly Income Per Household
- Under \$2,000
 - \$2,000 / \$3,999
 - \$4,000 / \$5,999
 - \$6,000 / \$7,999
 - \$8,000 / \$8,999
 - \$9,000 / \$9,999
 - \$10,000 / \$11,999
 - \$12,000 / \$14,999
 - Above 15,000
- 9) What is your current housing situation?
- Own home/mortgage
 - Renting
 - Staying with Friends/Family
 - Homeless
 - Other (Please specify) _____
- 10) How many years have you lived within Spokane County?
- 0-12 months
 - 1 - 3 years
 - 3-5 years
 - More than 5 years
- 11) What is the highest level of education completed by you (or someone in your household?)
- Some High school, no degree
 - High school degree or equivalent
 - Some college, no degree
 - Associates degree or technical school/certificate
 - Bachelor's degree
 - Master's degree or higher

12) What is your sexual orientation?

- Asexual
- Bisexual
- Homosexual
- Straight (Heterosexual)
- Lesbian
- Pansexual
- Queer
- Prefer to Self-Describe -----
- Choose not to disclose

13) What is your current employment status? (select all that apply)

- Full-time employed
- Part-time employed
- Seasonal work
- Self-employed
- Unemployed -student
- Unemployed -SSI/disability
- Unemployed -cannot find a job
- Unemployed by choice
- Retired
- Other (Please specify) -----
- None of the above

14) If unemployed – are you looking for work?:

- Yes
- No

15) What Employment-related needs do you and/or someone in household have? (check all that apply)

- In need of more job training / education
- Cannot find a job because there are not enough jobs
- Cannot find a job that pays enough to support my family
- In need of Employment Search skills (e.g. Resume building, Cover letters, etc.)
- Other (Please specify) -----
- None of the above

16) What Education needs do you and/or someone in household have? (Check all that apply)

- Cannot afford to continue my education
- Need to know more about starting or expanding a business
- Need to know more about eating healthier
- Need to understand our rights as a renter
- Needs to understand our rights as a homeowner
- Need to learn basic home repairs
- Other (Please specify) _____
- None of the above

17) What Housing needs do you and/or someone in your household have? (select all that apply)

- Affordable housing to rent
- Unable to qualify for rental housing
- Unable to find suitable housing due to discrimination
- Affordable homes to purchase
- Difficulty finding structurally-sound and safe housing
- Finding shelter beds
- Not being able to afford housing-related expenses
- Other (Please specify) _____
- None of the above

18) Do you or someone in your household have other housing-related needs? (Check all that apply)

- Not being able to afford housing-related expenses
- Furniture or household goods
- Finding affordable and reputable home repair services
- Disability access or modifications
- Other medical related accommodations
- Mortgage or Rent assistance
- A Pet friendly environment
- Utility assistance
- Other (Please specify) _____
- None of the above

19) Do you /or someone in the household have any of the following transportation-related needs?
(Check all that apply)

- Rides to medical-related appts or food sources
- Bus tickets
- Purchase a car
- Obtain a Driver's License
- Gasoline vouchers
- Insurance coverage for vehicle
- Auto repairs
- Vehicle registration and/or inspection fees/driver license fees
- Transportation for someone with a disability
- Other (Please specify) -----
- None of the above

20) What Financial needs do you and/or someone in household have? (select all that apply)

- Improve our credit score and/or build my credit
- Have too much debt
- Cannot afford the cost of cable/satellite/internet
- Cannot afford current medical bills
- Cannot afford childcare
- Cannot access banking systems
- Cannot afford to continue my education
- Other (Please specify) -----
- None of the above

21) What Mental Health needs you and/or someone in household have? (select all that apply)

- Lack or limited coverage for mental health services
- Lack of affordable mental health care services within the community
- Lack of access to mental health care services within the community
- Lack of prescription coverage
- Other (Please specify) -----
- None of the above

22) What Physical Health care needs do you and/or someone in household have? (select all that apply)

- Living with a Chronic Disease (diabetes, heart disease, obesity, etc.)
- Lack of affordable health care services within the community
- Lack of health insurance
- Lack of dental insurance
- Limited access to dental care services
- Limited options for affordable, nutritious, and/or culturally-relevant food resources
- Other (Please specify) _____
- None of the above

23) What kind of child care, elder care, and/or dependent care support do you or someone in your household need? (Check all that apply)

- Care for child(ren) in household with special needs
- Care for adult(s) in the household with special needs
- Childcare Centers more conveniently located to home or work
- Increase options for Before/after school care
- Access to a childcare that will take a child who is/are sick
- Evening / weekend hours due to work shift schedule
- Other (Please specify) _____
- None of the above

24) What Safety issues have you and/or someone in household experienced within the past year? (check all that apply)

- Abandoned houses / buildings in my neighborhood
- No enough street lighting in neighborhood
- Crime to self or property
- Child abuse and/or neglect
- Adult abuse and/or neglect
- Senior abuse or disabled neglect
- Little to no emergency response when contacting authorities
- Lack of food
- Substance abuse and addiction
- Child safety seats
- Other (Please specify) _____
- None of the above

25) Do you have reliable phone/cell access?

Yes

No

26) Do you have access to the Internet?

Yes

No

27) Where do you usually use the internet? (Choose the one you use most often)

At home

At work

At the library

At a friend's home

At a family member's home

Other (Please specify) -----

28) What programs, services, and/or resources would you like SNAP to consider providing to the community?

29) Comments/Suggestions:

Thank you for completing this survey.

Exhibit B – Survey Raw Data

Survey results: (2021) CNA (Updated 8/12/21)

- 431 Respondents, females responded more frequently at 74%
- 75% identified as white; 8.98% were identified as mixed-race, and 5.91 were Black or African American.
- 72% identified as being heterosexual with 8% choosing not to disclose.
- Housing situation:
 - Own home/ mortgage – 31.29%
 - Renting 57.41%
 - The remaining were living with friends, homeless or in shelters/sober/ PSH housing
- 49.8% identified as being or having a person in the household living with a disability.

Education Status:

- 75% of survey takers had some college education or higher. (10% with a master's degree)
- However, 20% are on SSI and 8% are unemployed and cannot find work.

Employed Status:

- 64%, if identified as being unemployed (and not retired) are not looking for work * COVID-19 unemployment benefits extension still in place at the time of the survey.

BEGIN NEEDS ANALYSIS

- Education Needs:
 - 36.33% stated no needs
 - Cannot afford to continue my education(19.93%)
 - Need to know more about starting and expanding a business 9.17%
 - Need to learn basic home repairs skills 11.29%
- Employment Needs:
 - 53.83% stated no needs
 - Needs more training or education (13.38%)
 - Cannot find a job that pays enough to support my family (13.83%)
 - Other 8.84% (which included a variety of answers including business ownership skills, child and dependent care, jobs suited for disabilities)
- Housing needs:
 - 24.63% stated no needs
 - Affordable housing to rent (22%)
 - Not being able to afford housing-related expenses(14.6%)
 - Affordable Homes to purchase (13.96%)

- Otherhousing-related needs:
 - 20.62% stated no needs
 - Utility Assistance (16.65%)
 - Not being able to afford housing-related expenses (16.55%)
 - Mortgage or Rent Assistance (15.74%)
- Transportation-related needs:
 - Gasoline Vouchers (18.15%)
 - Auto Repairs (17.49%)
 - Insurance (11.88%)
- Financial Needs:
 - None of the above (21.29%) Important to note numerous responses in other included cannot afford continuing his/her/they education
 - Improve our credit score and/or build my credit (23.84%)
 - Have too much debt (18.14%)
 - Cannot afford cable/satellite/internet (12.44%)
- Mental Health concerns:
 - 56.59% None of the above
 - Lack or limited coverage for Mental Health Services (13.37%)
 - Lack of access to mental health services within the community (11.98%)
 - Lack of affordable mental health care services within the community (8.78%)
- Physical Health concerns:
 - Living with a Chronic Disease (diabetes, heart disease, obesity, etc.) (29.4%)
 - Lack of dental insurance (18.4%)
 - Limited options to obtain dental care services (12.8%)
- Childcare/Dependent care –
 - 61.86%% stated this was not a problem
 - Increase options for Before/after school care 8.8%
 - Evening/weekend hours due to work shift schedule 6.2%
- Safety issues:
 - 38.5% stated this was not a concern
 - 15.59% stated Crime to person or property within the past year.
 - The rest of the categories hovered around 8% not enough lighting in the neighborhood, food challenges, substance abuse, and addiction.
- 95% had a reliable cell phone
- 93% had reliable internet.
- 74% have internet-primarily at home.

Exhibit C

Key Information, Focus Group, and 1-on-1 Interview Themes

Issues	FOCUS Group 1	Focus Group 2	Personal Interviews	Key Informant
Affordable Housing market diminishing	5	2	20	10
Housing Assistance that is easy to access and does not have time barriers	1	2	1	4
Rental Assistance access streamlined	1			1
mortgage Assistance	2			1
Lots of housing/rentals/resources, do credit check/back ground checks. I understand why, but that also leads to homelessness.	1			5
Services for homeless are slowed - not keeping up with the need	4	1	20	4
Finding resources becoming more difficult	2			1
Supportive housing models need to be increased	1		1	2
Affordable Senior Housing limited -	1	1	3	5
Lighting in alleys	1			1
Crime against persons / property	1	4	3	8
Gun violence	1		1	2
Traffic issues not only congestion, but those not abiding laws	1	2	1	3
Trafficking / sexual and labor	1			1
Gang activity			2	2
paving in alleys	1			
Zombie housing / vacant homeless living in the houses	1	1	2	4
Domestic Violence prevalence	1	1	2	10
Dental health is needed	4	2	2	1
Limited dentists taking Medicaid	5	1	5	6
Dentures and extensive oral health are not covered by Medicaid and senior oral health is even worse.	2	1	1	1
Medicare does not cover oral health.	1	1	2	
Food related challenges	1	1	10	10
Distribution of healthy nutrition food			1	1
Culturally relevant food sources	1	1	1	1
Keep low barrier food bank processes that came about during COVID 19	1			2

Exhibit D

Hard copy survey distribution sites

Name of Agency/Organization

Airway Heights Library

ALTCEW (Aging and Long-Term Care of Eastern Washington)

Catholic Charities of Eastern Washington

Cheney Library

Clair View Senior Housing

Community-Minded Enterprises / Recovery Café

Medical Lake Library

Moran Prairie Library

North Spokane Library

SMS / Mobility Management

Spokane Valley Library

Spokane Valley Partners

The Resource Center

The Zone Project

Unify Community Health (Medical)

Unify Community Health (Dental)

West Central Community Center

Work Source

Exhibit E – Key Informant Interviews

Agency Name

ALTCEW

The CARES Team (2 individuals)

Carl Maxey Center

Catholic Charities of Spokane

City of Spokane

Clair View Senior Housing

Communities in Schools

Community Minded-Enterprises

Deer Park City Council

Spokane Emergency Services

Frontier Behavioral Health

Hispanic Business Coalition

Marshallese Community

Shadle Park Presbyterian Church / Food Coalition Specialty

Mobility Services Management Program Spokane

Housing Ventures

Spokane Regional Health District / Community Health Worker Network

The Resource Center

The Zone Project

West Central Community Center

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