



Community Needs Assessment 2023



"RESTORING HOPE BY HELPING PEOPLE AND CHANGING LIVES"

April - May 2023


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EXECUTIVE SUMMARY

The Human Development Commission (HDC) is pleased to share with the community the results of its 2023 Community Needs Assessment. As part of HDC's strategic planning process, every three years the agency conducts a community-based assessment that provides a snapshot of the community and its people. HDC customers, board members, staff, community members, stakeholders, and leaders within its service area are provided surveys in an effort to gather information on the needs of low-income or otherwise vulnerable persons. The assessment documents service gaps within the community, which helps the agency plan and set priorities for service connection, expansion, or suspension.

We appreciate all of the hard work it took by staff and the community in collecting and participating in the collection of this data. It is our hope that the data will better inform us of not only the needs of the community, but the needs of its most vulnerable citizens. We would also like to thank our community partners for their continued support and shared dedication.

HDC will continue to assess community-driven needs to conceptualize and develop programs/services that make sense for the communities we serve.

Sincerely,



Lori K. Offenbecher
Executive Director



The Pointe aux Barques Lighthouse is an active lighthouse maintained by the US Coast Guard on Lake Huron. Pointe aux Barques is a local landmark found at Port Hope within the HDC Service Area.

INTRODUCTION

Since 1965, the Human Development Commission (HDC) has been a leader in providing programs, services, and opportunities for low-income and otherwise vulnerable persons living in Huron, Lapeer, Sanilac, and Tuscola counties. Located in the “thumb” of Michigan’s mitten-shaped Lower Peninsula, HDC’s four-county service area is rural and somewhat remote, spanning 3,200 square miles.

HDC customers represent the entire lifespan – from infants and toddlers to the elderly – and service delivery mirrors the agency’s mission statement of Restoring Hope by Helping People and Changing Lives. The agency offers an extensive array of programs and services that help people achieve self-sufficiency, remain connected, and improve their life quality. As one of approximately 1,000 Community Action Agencies nationwide, HDC manages nearly 70 programs in the six focus areas of Aging Services, Community Services, Emergency Services, Food & Nutrition Services, Homeless Services, and Youth & Family Services.

PROGRAM OVERVIEW

Within the six focus areas, HDC's core programs include the following services:



OUR SERVICE POPULATION

In fiscal year 2022 (October 1, 2021 - September 30, 2022), HDC served 6,087 people with reported demographics, representing over 3,515 family households. The majority of customers were white females, with seniors aged 60 and over (48.8%) as the largest group, followed by adults aged 18-59 (29.2%). Nearly all households served (94.6%) reported incomes at or below 200% of the Federal poverty level. About one in six customers over age 25 did not graduate from high school, and over one-third (37.8%) are disabled.

NATIONAL COMMUNITY ACTION NETWORK THEORY OF CHANGE

Nationwide, there are over 1,000 high performing Community Action Agencies, State Associations, State offices, and Federal partners supported by the Community Services Block Grant (CSBG) to mobilize communities to fight poverty. Community Action allows for greater flexibility and better service integration for low-income families, as the network is mission-driven to fight poverty, empower people, and promote self-sufficiency. The following three major goals of Community Action are realized through realistic, practical approaches, which are the cornerstone of Community Action and attest to the network’s ability to understand and fight poverty at the local level. Each agency’s purpose is to plan, coordinate, implement, and evaluate services that support the health, education, and welfare of residents.

- GOAL 1: Individuals and families with low incomes are stable and achieve economic security.
- GOAL 2: Communities where people with low incomes live are healthy and offer economic opportunity.
- GOAL 3: People with low incomes are engaged and active in building opportunities in communities.

PURPOSE OF THE COMMUNITY NEEDS ASSESSMENT WITHIN THE ROMA CYCLE

As part of the data-driven Results-Oriented Management and Accountability (ROMA) cycle, every three years HDC conducts a Community Needs Assessment as part of the agency’s strategic planning process, which is then used to create the Community Services Block Grant (CSBG) application. The ROMA Cycle incorporates five phases that measure the impact of the agency’s mission “Restoring Hope by Helping People and Changing Lives” as depicted in the illustration and following description.



The Assessment Phase employs a systematic process to capture community needs as well as available resources to create a community profile of HDC's service area. From there, the community profile is analyzed during the Planning Phase to identify needs that appear to be priority. Strategies that render positive outcomes are considered and later used to design services around the identified community needs. Services are put into place during the Implementation Phase and later observed for effectiveness during the Achievement of Results Phase where data is collected analyzed and compared with benchmarks in the Evaluation Phase, bringing the cycle back around to the Assessment Phase.

THE ASSESSMENT PROVIDES A SNAPSHOT OF THE COMMUNITY AND ITS PEOPLE. IT ALSO PROVIDES DATA USEFUL FOR:

- Learning more about the community and people served by the agency.
- Gaining authentic, unbiased responses regarding needs and services.
- Becoming aware of needs that were previously unknown (or are currently unmet).
- Documenting local needs as required by government, foundation, and other funders.
- Obtaining community support for future events, projects, and services.

HDC's Community Needs Assessment gathers information on the needs of low-income or otherwise vulnerable persons living in the "thumb" area of Michigan as reported by agency customers, community stakeholders, board members, agency staff, and other supporters. The assessment also documents service gaps within the community, which helps the agency plan and set priorities for service continuation, expansion, or suspension.

The agency's 12-member tripartite governing board is an integral part of HDC's ability to fight poverty, empower people, and promote self-sufficiency. The Board combines the decision-making abilities of the private and public sector as well as low-income consumers. Involvement of low-income consumers on the Board provides an opportunity for consumer input and community engagement. This helps the agency to understand poverty at the local level, which allows for better service integration. HDC uses the input to design programs and services that make sense for the communities it serves by employing realistic, practical approaches to fighting poverty.

Finally, HDC's Board of Directors commissions five standing committees and three advisory/policy councils to oversee program operations, thereby ensuring customers receive timely information and confidential services. Each committee and advisory/council reports to the HDC Board of Directors on programs, services, and progress. Open discussion among board members allows for an exchange of ideas to help ensure service coordination and delivery.



METHOD OF DATA COLLECTION

HDC convened an internal Community Needs Assessment core team to develop a comprehensive questionnaire that would represent the majority of the CSBG program categories, including Employment, Education & Training, Living Expenses & Overall Finances, Housing, Nutrition, Emergency Services, Transportation, and Health. New for 2020, HDC also included additional questionnaires to measure the prevalence of domestic/family/older adult violence and to address barriers caused by the novel coronavirus pandemic. An online format was used as the primary method for completion of surveys to add to the visibility of the assessment by offering a web link with mobile accessibility and postings on the agency Facebook page. (Paper copies of the questionnaire were made available for persons without computer aptitude at HDC's administrative and field offices.)

Between March 1 and April 30, 2023, agency customers and community members completed questionnaires. Questionnaires were also distributed to customers served by programs with a home visiting component like Early Head Start and Senior Services or a monthly in-service component like Foster Grandparents. In addition, the HDC Board of Directors, agency staff, and other community members were encouraged to participate in the assessment process.

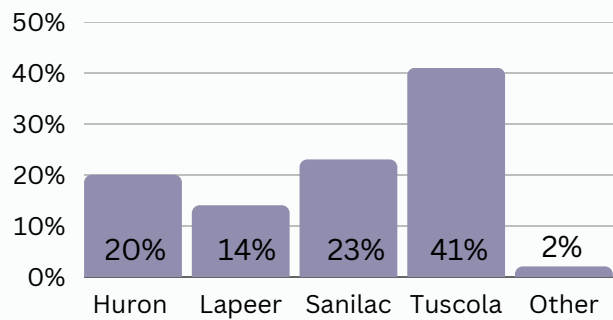
In similar fashion, HDC utilized a Community Stakeholder questionnaire, which offered insight into pressing community issues as well as HDC's standing in the four counties. HDC's administrative staff distributed questionnaires at a variety of meetings including county-based Human Service Community Collaboratives. Stakeholders include mainstream members of the provider community (e.g., Department of Health and Human Services, Behavioral Health, etc.) and other helping groups (e.g., homeless coalitions, domestic violence shelters, etc.).



RESPONDENT PROFILE

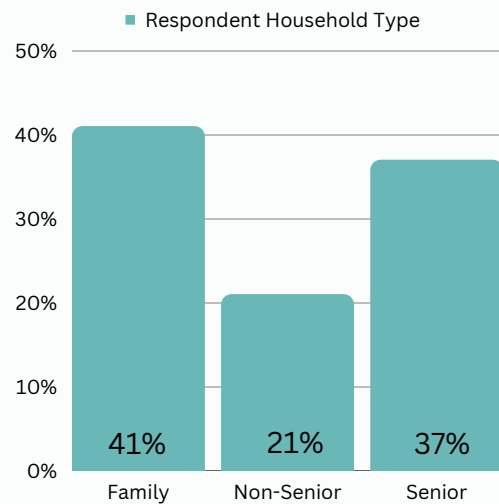
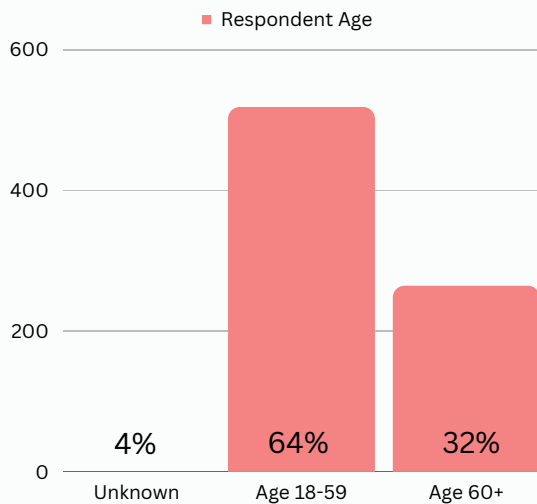
A total of 814 Community Needs Assessment questionnaires were completed with Tuscola County having the largest number of respondents in the four-county service area followed by Sanilac, Huron, and Lapeer Counties, respectively.

RESPONDENTS BY COUNTY



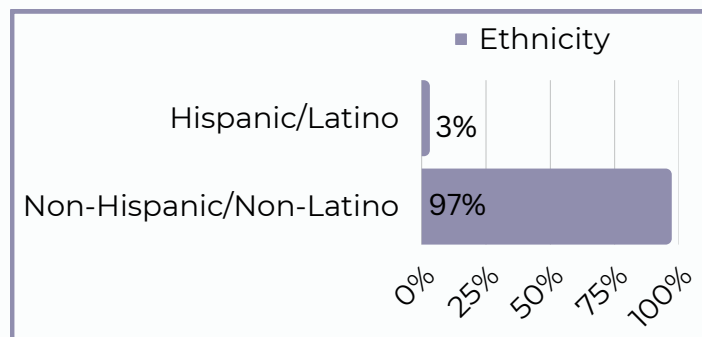
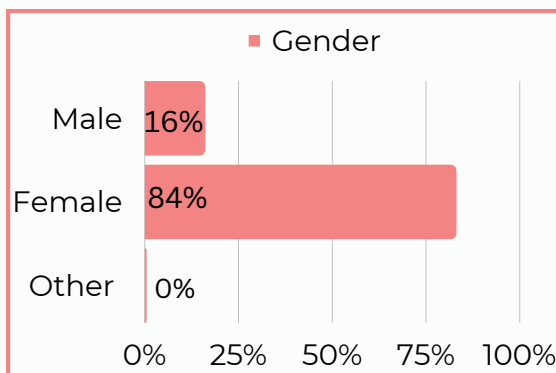
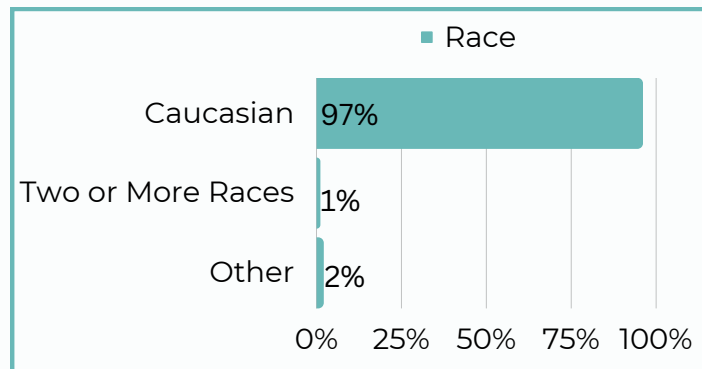
RESPONDENT AGE & HOUSEHOLD TYPE

Nearly two-thirds of respondents were between the ages of 18 and 59. Household types were comparatively even among family households and senior households; with the lowest number of households being non-senior households as shown below.



RESPONDENT GENDER, RACE AND ETHNICITY

Women were more likely to complete the Community Needs Assessment questionnaire than men. Nearly 97% of respondents reported their race as Caucasian and reported their ethnicity as Non-Hispanic/Non-Latino as shown in the following tables.

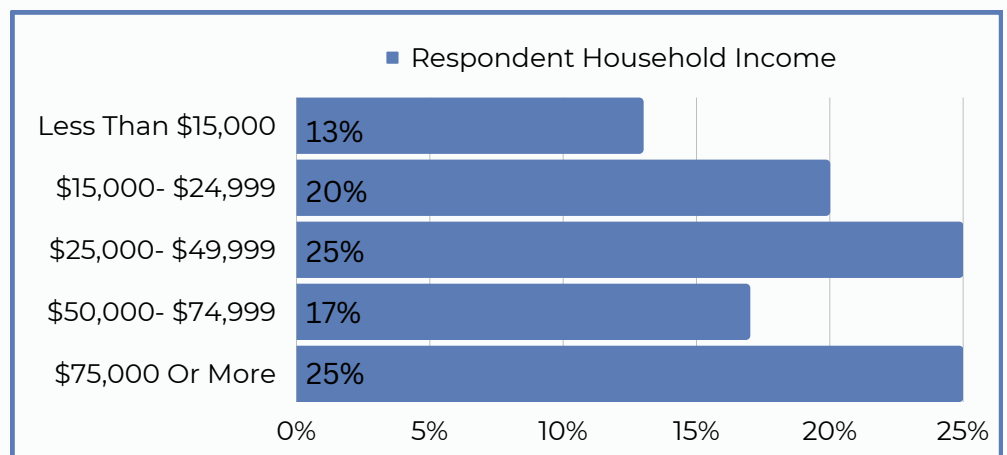


RESPONDENT HOUSEHOLD INCOME AND INCOME SOURCES

One-third of all respondents had annual household incomes of \$25,000 or less, and more than one of every five respondents survived on less than \$15,000 annually.

The top three sources of household income sources ranked as follows:

1. Wages From Employment
2. Social Security Retirement
3. Pensions (employer, 401k, IRA, etc.)

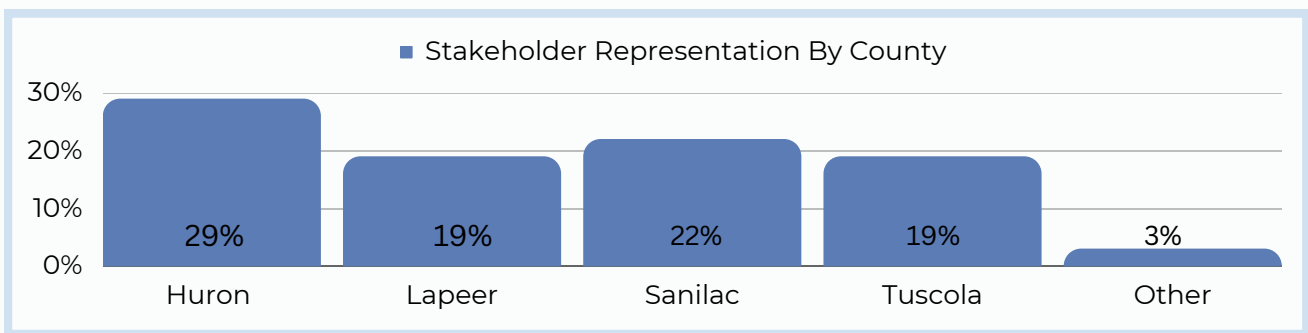




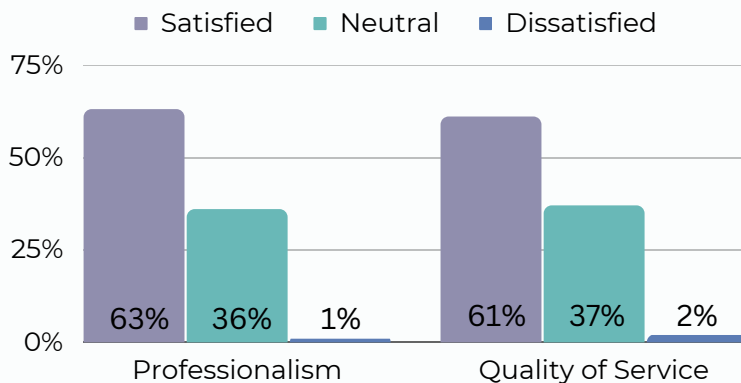
STAKEHOLDER PROFILE

A total of 136 Community Stakeholder questionnaires were completed with Huron County having the largest number of respondents in the four-county service area and Tuscola having the smallest as shown below.

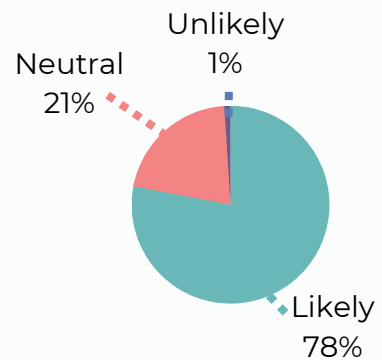
STAKEHOLDER REPRESENTATION BY COUNTY



HDC PROFESSIONALISM & QUALITY OF SERVICE RATINGS BY PERCENTAGE



LIKELIHOOD OF FUTURE COLLABORATION



Other Resources in the Community

No agency alone, Community Action or otherwise, can meet the complex, multiple needs of low-income persons. Establishing relationships with other helping agencies, allows HDC to connect customers with valuable community resources in an effort to fill the gaps in services. Some of the same helping agencies which include health care systems, human service organizations, and schools, represent the primary industries for otherwise largely farming communities of Huron, Lapeer, Sanilac, and Tuscola counties. HDC's staff are exceedingly knowledgeable about intra- and interagency services available to meet customers' needs. The ability to establish linkages with other community resources is critical for moving, individuals and families out of poverty. The following table provides a snapshot of community resources available to meet identified needs.

FOOD & NUTRITION PROGRAMS	<ul style="list-style-type: none">• Congregate Dining Centers• Emergency food pantries• SNAP, WIC, and other sources of nutritional food products
TRANSPORTATION SERVICES	<ul style="list-style-type: none">• Public Transit Authorities• Senior Transportation Services• Medical Transportation Services
HOUSING SERVICES	<ul style="list-style-type: none">• Home loans (for homebuyers, homeowners, and property owners)• Weatherization and other energy conservation measures• Housing counseling and credit repair
LAW ENFORCEMENT	<ul style="list-style-type: none">• State Police posts• Sheriff Departments• Personal Protection Orders (domestic violence, sexual assault, stalking)



LAW ENFORCEMENT	<ul style="list-style-type: none">• State Police posts• Sheriff departments• Personal protection orders (domestic violence, sexual assault, stalking)
LEGAL SERVICES	<ul style="list-style-type: none">• Friend of the Court• Legal Services of Eastern Michigan, Lakeshore Legal Aid• Elder abuse (e.g., Citizens for Better Care)
EDUCATION	<ul style="list-style-type: none">• Early childhood development, preschools, Early/Head Start• Public and parochial schools, technology centers• Postsecondary colleges/universities
MEDICAL SERVICES	<ul style="list-style-type: none">• Hospitals, medical offices, walk-in/after-hours clinics• Family planning, rehabilitation centers, pharmacies• Immunization clinics
INCOME ASSISTANCE	<ul style="list-style-type: none">• Child day care funds• Employment and training services• Child support
COUNSELING SERVICES	<ul style="list-style-type: none">• Individual/family counseling• Behavioral services• Substance abuse counseling/treatment
COMMUNITY SERVICES	<ul style="list-style-type: none">• Libraries• Volunteer centers/opportunities• Civic groups/organizations





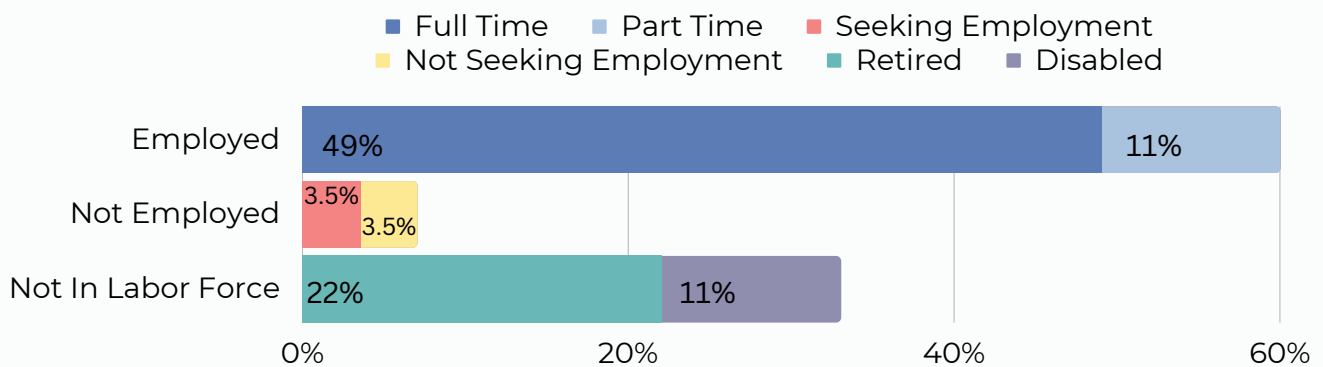
COMMUNITY NEEDS ASSESSMENT FINDINGS



Employment

Jobs ranked as the primary source of income for most families. Well over half (60%) of all respondents indicated they were employed, with a large majority of them having full time jobs (82%). Nearly two of every ten employed respondents worked part-time jobs. One-third (33%) of our respondent population indicated they were not in the labor force; largely represented by those who were retired or disabled.

The remaining 7% of respondents were not employed; they yielded a 50/50 split between those seeking/not seeking employment. Many individuals not seeking employment represented family households with children in the home and/or households experiencing disabilities.



**91% OF EMPLOYED RESPONDENTS WORK
WEEKDAYS DURING REGULAR DAYTIME HOURS**

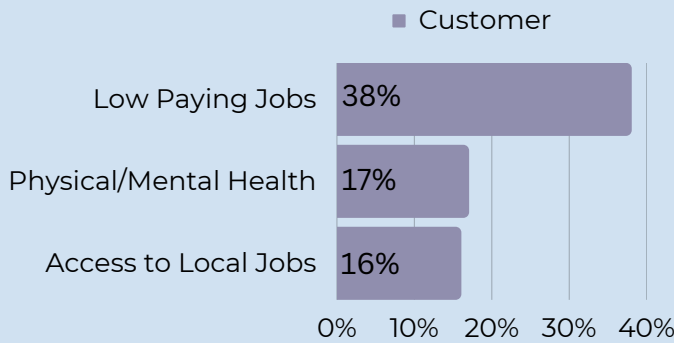
**46% OF EMPLOYED RESPONDENTS WORK A JOB
THAT DOES NOT PROVIDE ENOUGH INCOME TO SUPPORT THEIR FAMILY.**



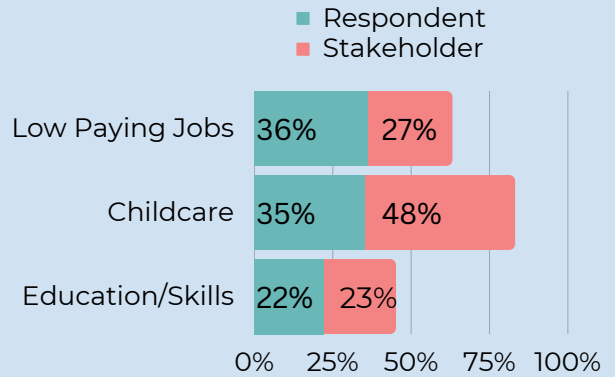
EMPLOYMENT BARRIERS

The graphics below illustrate the highest-ranking barriers as observed through the lens of household and community needs, respectively. Childcare emerged as the top barrier, followed by low paying jobs, education and skills most often preventing “thumb” area residents from becoming gainfully employed in high demand, high paying jobs.

Respondent Perception of Household Barriers

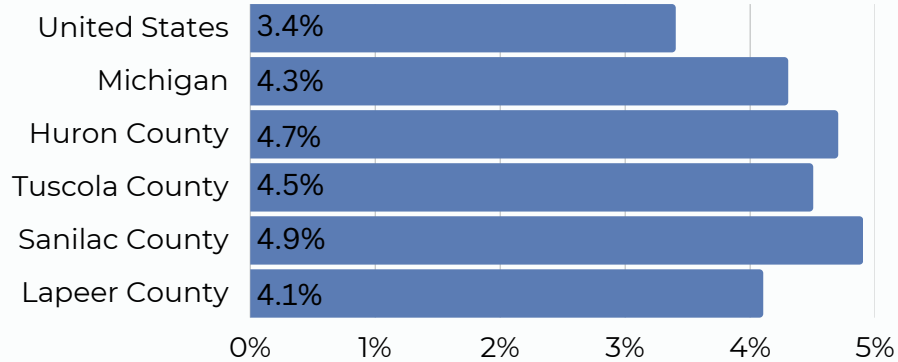


Respondent & Stakeholder Perceptions of Community Barriers

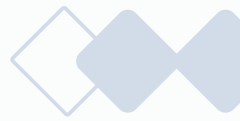


TOP COMMUNITY BARRIERS TO EMPLOYMENT:
#1 STAKEHOLDER RESPONSE: CHILDCARE (48%)
#1 RESPONDENT CONCERN: LOW PAYING JOBS (36%)

2023 Unemployment Rates



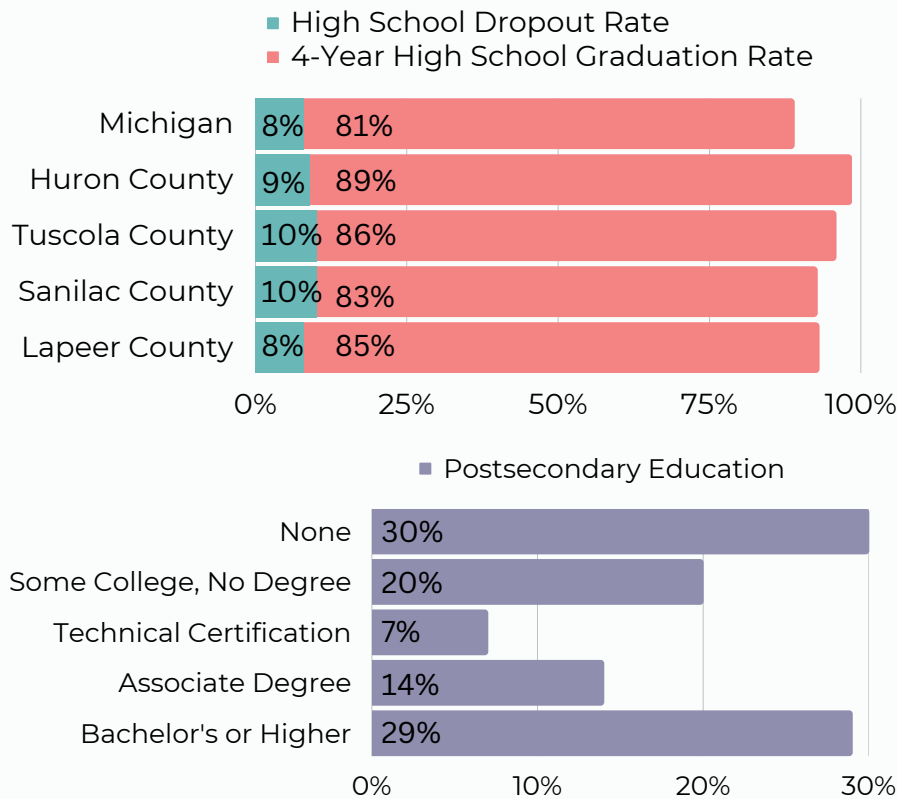
IN FISCAL YEAR 2022, 74% OF HDC CUSTOMERS HAD ONE OR MORE SOURCES OF INCOME WHILE 26% REPORTED HAVING ZERO INCOME.



EDUCATION AND TRAINING

LEVELS OF EDUCATION

One in five respondents (20%) have some college education and an additional 50% have achieved postsecondary technical certification or higher. One in four respondents (25%) indicated their highest education level was a high school diploma/GED, while 5% of respondents did not graduate from high school.



Primary education is usually from kindergarten to eighth grade and provides structured education with a goal of establishing basic literacy and numeracy skills as well as introducing foundations in science and social studies.

Secondary education for grades nine-to-twelve features more comprehensive curricula which prepares students for college, vocational training, and/or entry into the workforce.

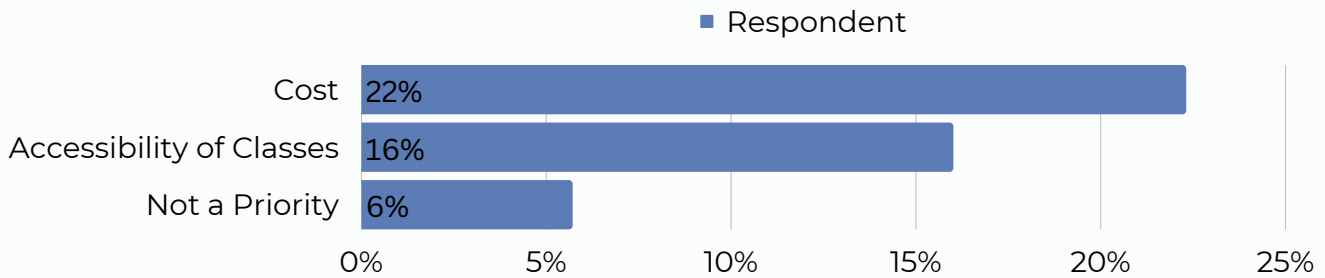
Postsecondary education refers to any instruction beyond high school where students acquire advanced knowledge and skills, which are generally taught at a college or university.

EDUCATIONAL BARRIERS

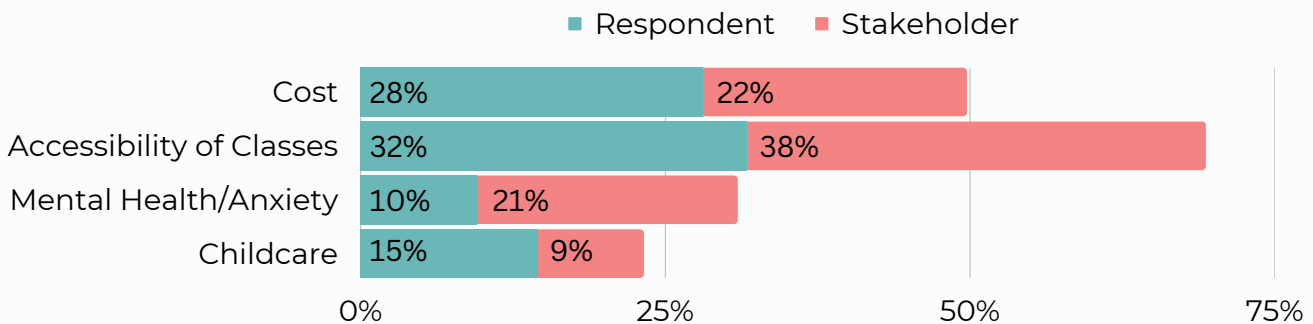
When respondents were asked to identify obstacles making it difficult to pursue the skills and education needed to maintain employment, the top response described difficulty with the accessibility of classes to obtain further education. Difficulty locating and/or affording GED programs, lack of local college facilities, long commutes, transportation, and limited access to computers for online learning all served as contributing factors. The top barrier of accessibility was closely followed by cost, while mental health and childcare issues surfaced as a new post-pandemic trend.

Perception of Barriers to Postsecondary Education

Respondent Perception of Household Barriers:



Respondent & Stakeholder Perception of Community Barriers:



28% OF RESPONDENTS HAVE GOALS TO FURTHER THEIR EDUCATION.



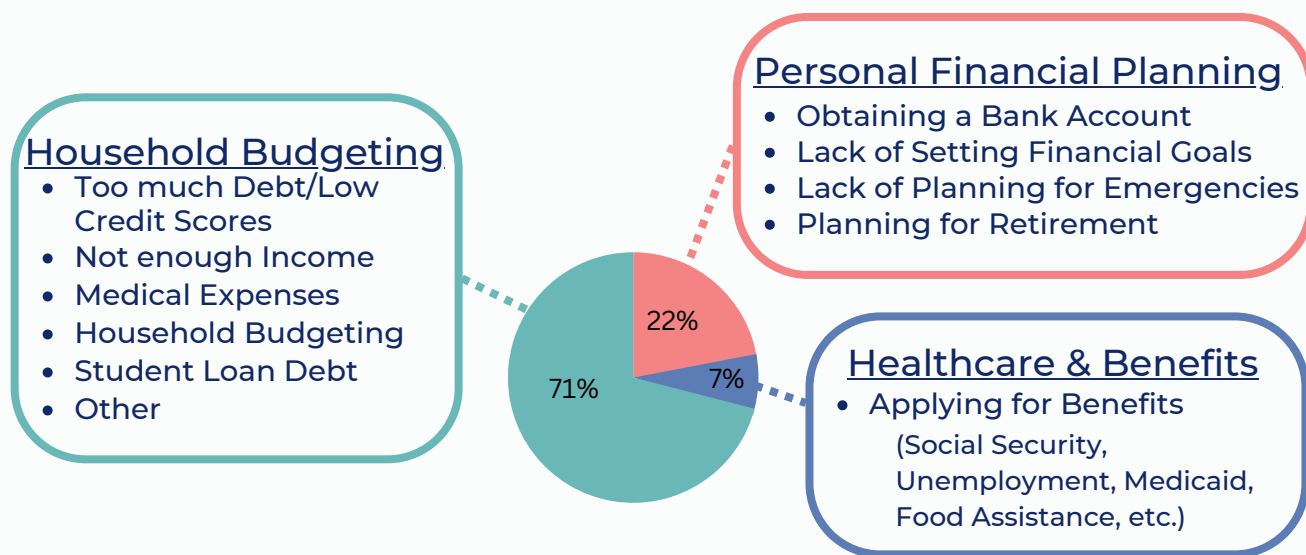
LIVING EXPENSES & OVERALL FINANCES

Income management is the ability of people to meet their current living expenses. When respondents were asked whether they were usually able to meet current expenses, 82% indicated they were able while 18% were not able. Respondents identified the following activities as barriers of income management as depicted below.

Respondent Perception of Household Barriers:

The majority of customer responses (68%) indicated *Household Budgeting* as the greatest household barrier, particularly having too much debt and poor credit. Additionally, approximately one-fourth (25%) of responses indicated help was needed with *Personal Financial Planning*.

Respondent & Stakeholder Perception of Community Barriers:



**MOST PRESSING FINANCE ISSUE AFFECTING PEOPLE IN THE COMMUNITY:
#1 RESPONDENT & STAKEHOLDER RESPONSE:
INCOME IS NOT SUFFICIENT TO SUPPORT HOUSEHOLD EXPENSES.**

Housing

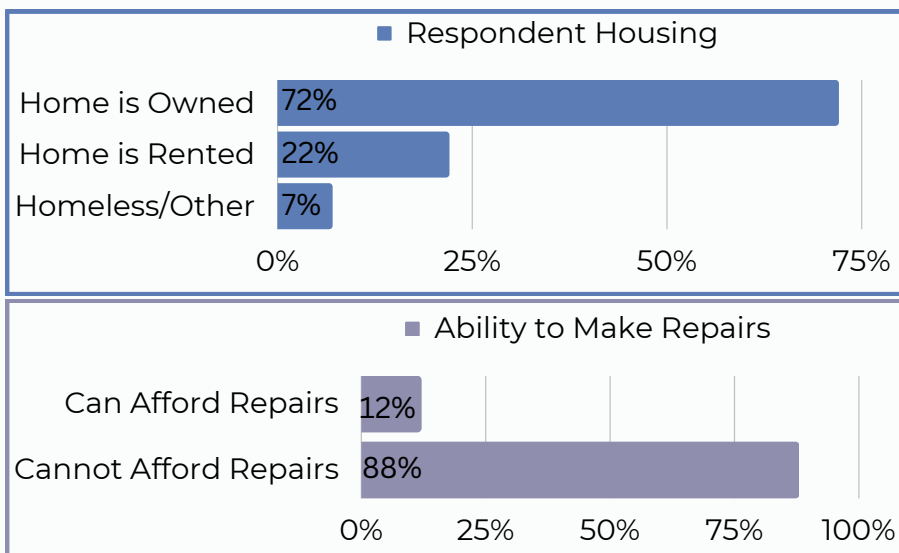
Safe, decent, and affordable housing is important for maintaining family stability. Of the respondents, 72% own homes, while 22% rent. Only a small percentage of respondents were homeless (1.7%) at the time of the Community Assessment. Both homeowner and renter respondents overwhelmingly (95%, combined average) believed their home was safe and decent; likewise, 83% believed their home was affordable. Similarly, ten percent of respondents believed their home was not safe/decent while 17% believed their house was not affordable.

TOP COMMUNITY BARRIERS TO HOUSING:

#1 STAKEHOLDER RESPONSE: ACCESSING AFFORDABLE RENTALS (60%)

#1 RESPONDENT CONCERN: PAYING MORTGAGE/RENT ON TIME (34%)

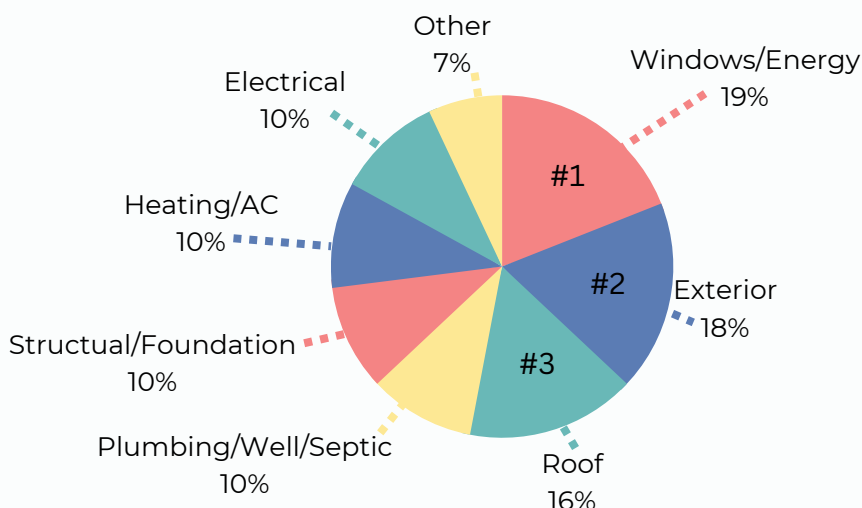
Housing Overview



DID YOU KNOW?

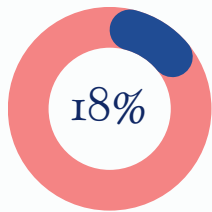
- In Michigan, the 2022 Fair Market Rent (FMR) for a 2-bedroom apartment was \$993. To afford this level of rent and utilities, without paying more than 30% of income on housing, a family must earn \$3,310 monthly (\$39,731 annually).
 - In the “thumb” area, FMRs for a 2-bedroom apartment ranged from \$757 for Huron, Sanilac, and Tuscola Counties to \$1,084 for Lapeer County.
 - The hourly wage necessary to afford a 2-bedroom apartment at the 2022 FMR rate is:
 - Michigan avg: \$19.10
 - Huron/Sanilac/Tuscola: \$14.56
 - Lapeer: \$20.85
- www.ushousingdata.com

Most Needed Home Repairs



Nutrition

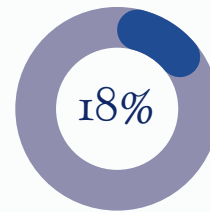
The ongoing availability of food, otherwise known as “food security” is essential for maintaining health. This is especially true for vulnerable populations like children and the elderly. A common consequence of poverty is malnutrition where diets are often high in carbohydrates and low in protein, fruits, and vegetables.



Worried food would run out before there is money to buy more



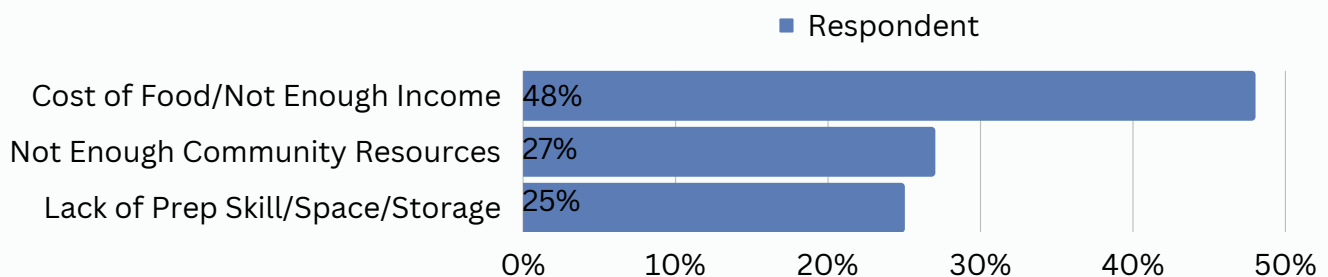
Food ran out before there was money to buy more



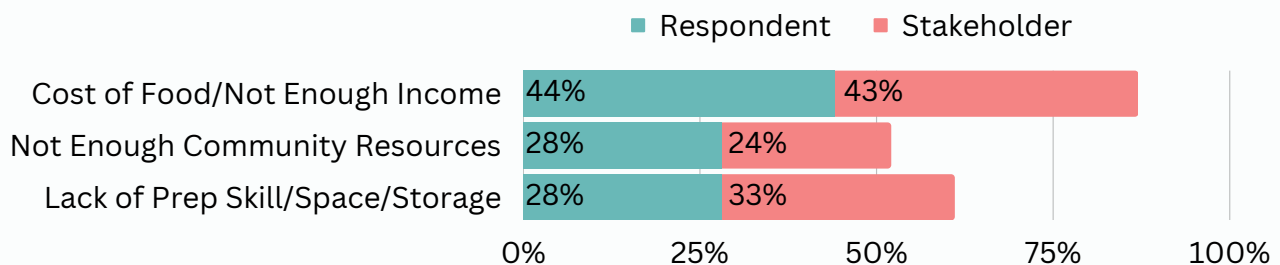
Ate less because there was not enough food

TOP COMMUNITY BARRIERS TO NUTRITION: COST OF FOOD/NOT ENOUGH INCOME

Respondent Perception of Household Barriers:



Respondent & Stakeholder Perception of Community Barriers:

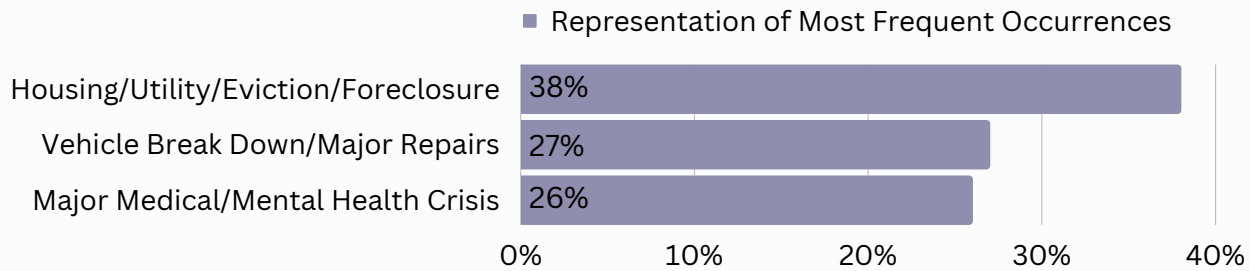


OVER HALF (55%) OF RESPONDENTS REPORTED UTILIZING SUPPLEMENTAL FOOD ASSISTANCE THROUGH DHHS, HDC, FOOD PANTRIES, ETC.

Emergency Services

Emergency needs are basic necessities that require help. Respondents were asked to identify their top three emergency needs; then, they were asked whether or not they were able to receive help. Of the most common needs listed, respondents identified vehicle repair, major medical events, and utility shut-offs as their top three needs as shown below.

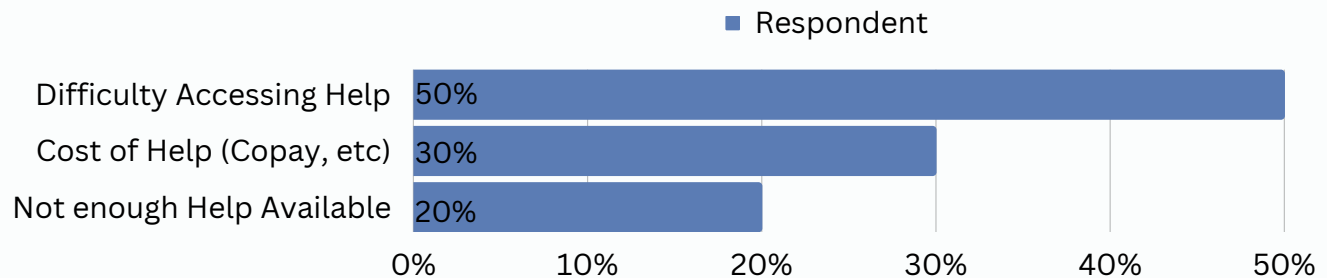
Most Needed Emergency Services



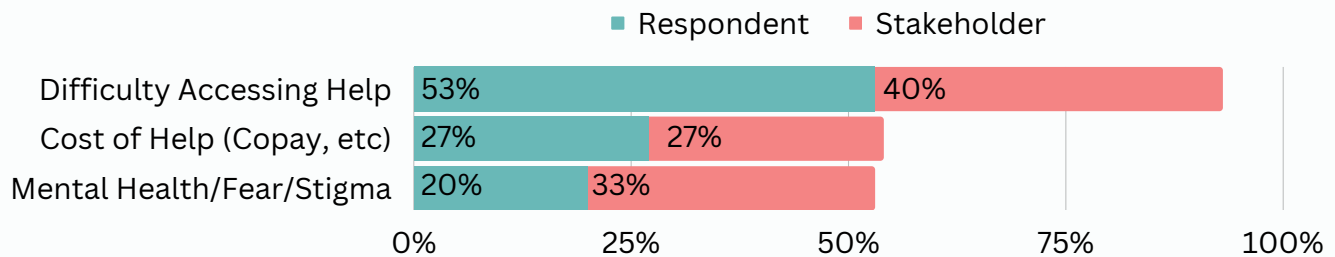
TOP COMMUNITY BARRIER TO EMERGENCY SERVICES: DIFFICULTY ACCESSING HELP

Top Barriers to Emergency Services

Respondent Perception of Household Barriers



Respondent & Stakeholder Perception of Community Barriers

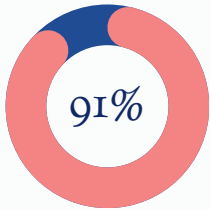


41% OF ALL RESPONDENTS INDICATED THEY WERE HELPED IN A TIME OF EMERGENT NEED.

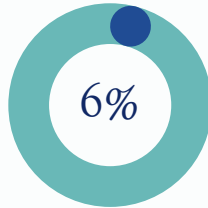
Transportation

THE HUMAN DEVELOPMENT COMMISSION'S
FOUR-COUNTY SERVICE AREA SPANS 3,265 SQUARE MILES

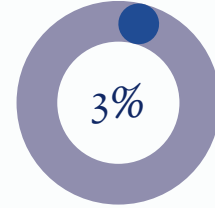
Access to reliable transportation is key to finding opportunity. Most respondents (91%) indicated they had access to reliable transportation, although the vast majority struggled to afford it.



Respondents have a personal vehicle to rely on



Respondents rely on carpool, friends and family

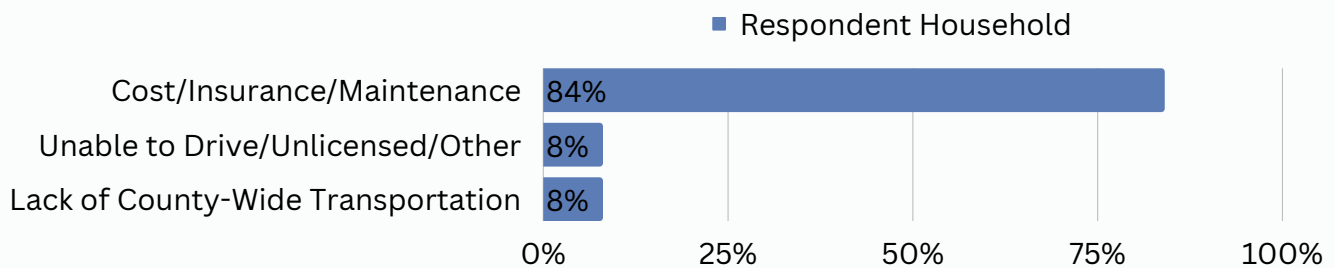


Respondents rely on public transportation services, walk or ride a bicycle

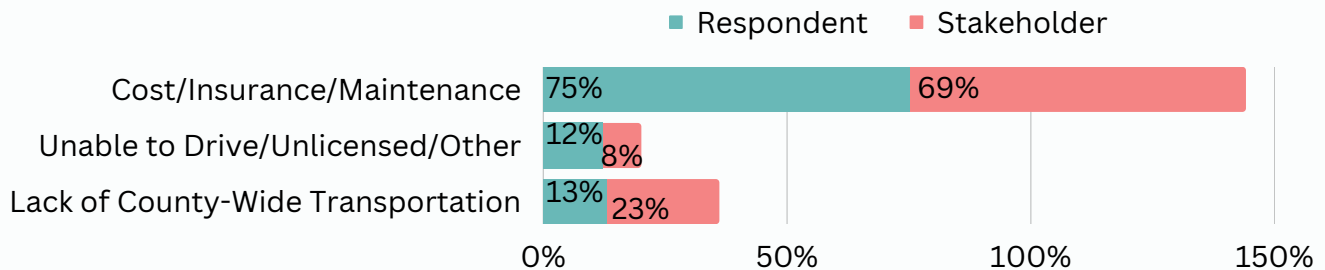
THUMB AREA TRANSIT
GREATER LAPEER TRANSPORTATION AUTHORITY
SANILAC TRANSPORTATION CORPORATION
CARO THUMBODY EXPRESS

Top Transportation Barriers

Respondent Perception of Household Barriers



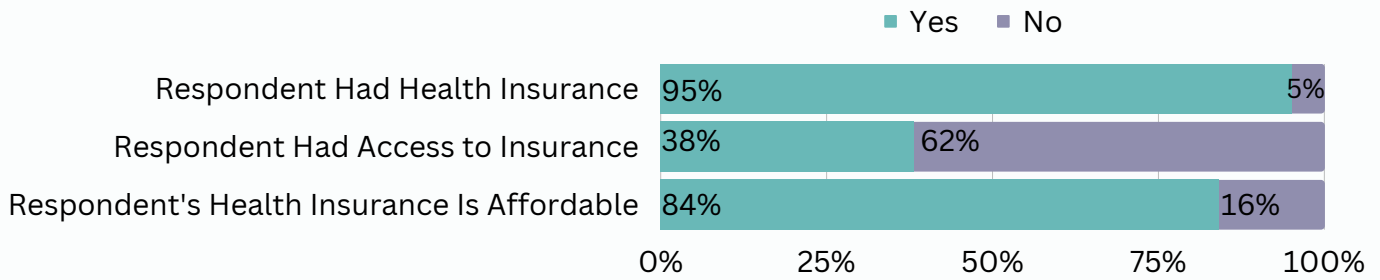
Respondent & Stakeholder Perception of Community Barriers



Health

“Health is a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity.” ~World Health Organization

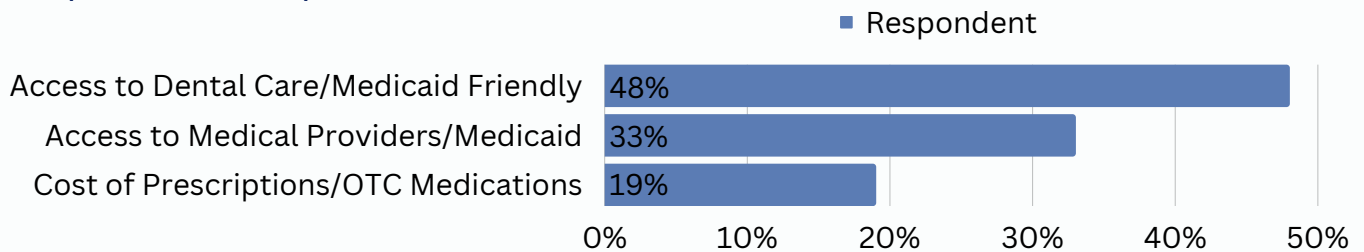
Good health is necessary for maintaining productive, independent lifestyles. The majority of respondents (95%) indicated they had health insurance, although 16% did not find it affordable.



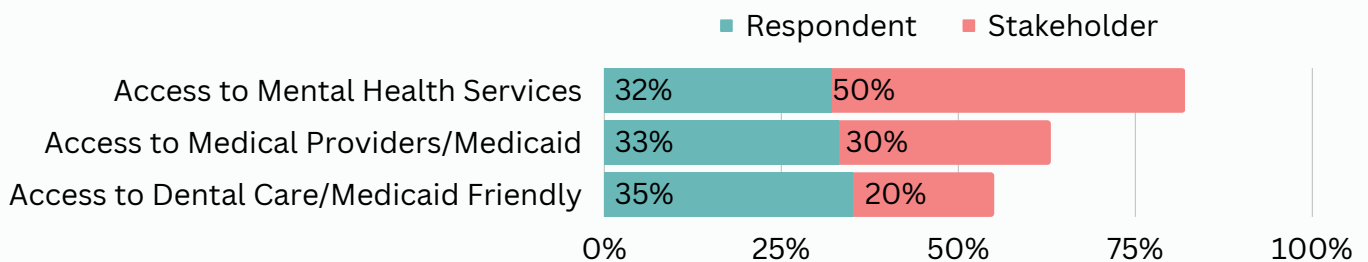
DID YOU KNOW?
 IN MICHIGAN'S "THUMB," THE COMBINED COUNTY AVERAGE FOR BOTH PRIMARY CARE PHYSICIANS AND DENTISTS PER PERSON IS HALF THAT OF THE STATE AND NATIONAL BENCHMARK.

Top Healthcare Access Barriers

Respondent Perception of Household Barriers



Respondent & Stakeholder Perception of Community Barriers



BARRIERS TO MENTAL HEALTH AND DENTAL SERVICES EMERGED AS TOP CONCERNS OF STAKEHOLDERS AND RESPONDENTS, RESPECTIVELY.



COMMUNITY SAFETY ASSESSMENT OF DOMESTIC VIOLENCE, FAMILY VIOLENCE, AND/OR OLDER ADULT VICTIMIZATION

Introduction

Since 1986, HDC has provided domestic violence intervention programs, including shelter, through its Thumb Area Assault Crisis Center (ACC). The center is a 24/7/365 emergency shelter that is the State of Michigan designated provider of domestic/sexual violence services for the counties of Huron, Sanilac, and Tuscola. Located in the City of Caro, ACC opened its doors as the area's first shelter for women experiencing domestic violence and/or sexual assault. Today, ACC is one of HDC's most rewarding programs that supports residential and non-residential survivors of DV/SA and their dependent children by offering a variety of services.

In 2017, HDC expanded the agency's victim services to include elder abuse for the counties of Huron, Lapeer, Sanilac, and Tuscola. Since the agency had administered domestic/sexual violence services for over 30 years and aging services since 1970's, it was time to acknowledge the need for older adult victim services in the rural services area. HDC developed the Elder Advocacy Program to be responsive of the unique needs of older adults and help to stabilize their lives after victimization. Elder Advocacy services focus on crisis intervention, criminal justice advocacy, and self-sufficiency for older adult victims of physical/sexual/emotional abuse, neglect, and/or financial exploitation.

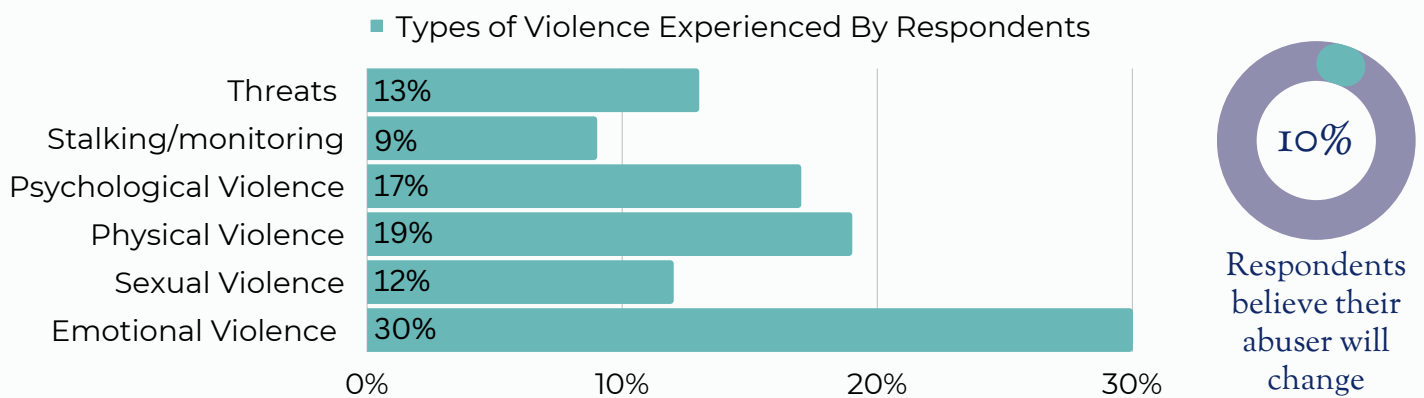
Family violence leads to tough, uncomfortable conversations between family, community members, community stakeholders, and actual victims. These conversations need to happen in an effort to stop the violence. It is not uncommon for a victim to feel trapped or hopeless and unsupported or believed from everything their abuser has convinced them to believe.

357 RESPONDENTS INDICATED THEY HAVE EXPERIENCED ABUSE.

Domestic Violence

Domestic Violence is a pattern of behaviors in any relationship that is used by one partner to gain or maintain control over another intimate partner. These behaviors can include physical, sexual, emotional, psychological, financial abuse, threats, dating violence, stalking, and/or cyber stalking.

NEARLY ONE-FOURTH (23%) OF OUR RESPONDENTS HAVE EXPERIENCED DOMESTIC VIOLENCE AT THE HAND OF AN INTIMATE PARTNER. ON AVERAGE, EACH SURVIVOR HAS EXPERIENCED THREE DIFFERENT TYPES AS LISTED BELOW.

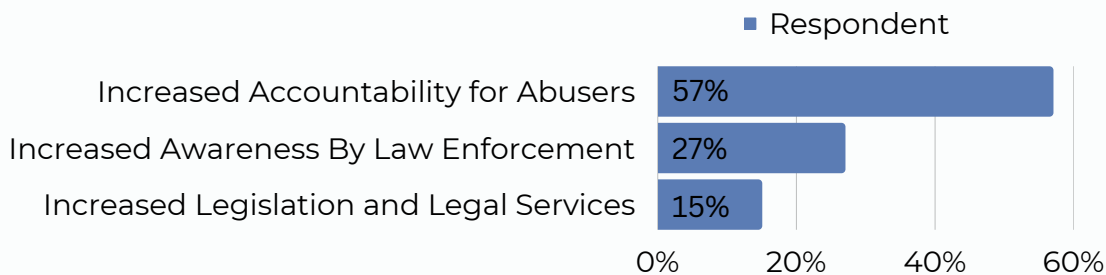


WHY DON'T THEY LEAVE?

Leaving is the most dangerous time for victims; many abusers escalate violence upon separation. Respondents indicated their greatest barriers to leaving abusive situations as follows:

- #1 - Housing/living arrangement (21%)
- #2 - Finances (19%)
- #3 - Children (17%)

Perception of Needed Legal System Changes



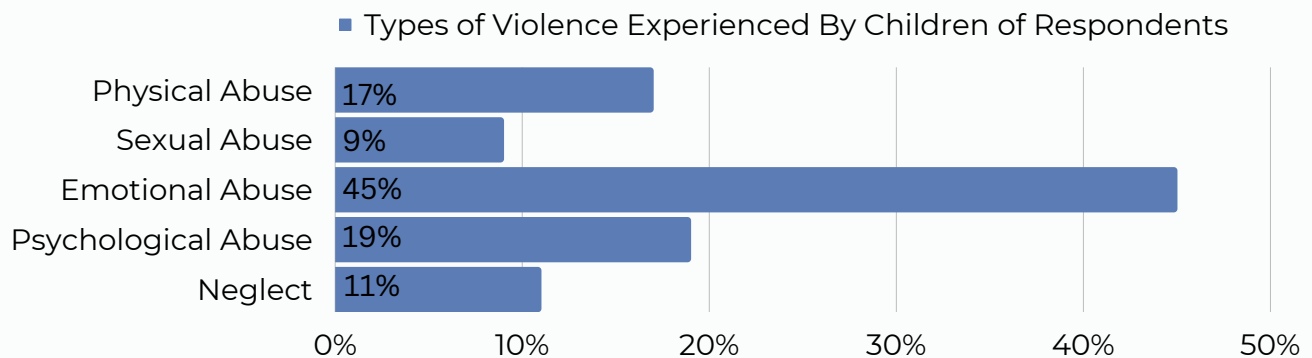
1 IN 4
WOMEN
EXPERIENCE
DOMESTIC
VIOLENCE IN
THEIR
LIFETIME.



Family Violence

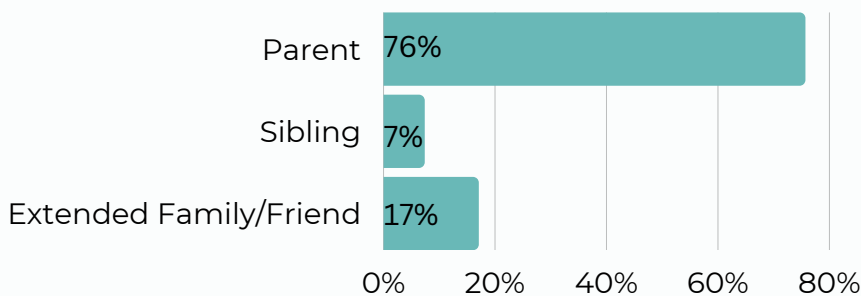
While domestic violence more often refers to violence between married or dating couples, domestic violence can also involve violence against children, parents, or the elderly. It takes a number of forms, including physical, verbal, emotional, financial, sexual abuse, and/or neglect. Family violence means violent, threatening, or other behaviors by a person that causes a member of the family to be fearful.

AT LEAST 1 IN 7 CHILDREN IN THE U.S. HAS EXPERIENCED CHILD ABUSE IN THE PAST YEAR.



14% OF RESPONDENTS INDICATED THEIR CHILD HAS EXPERIENCED ABUSE.

Who Caused the Violence?



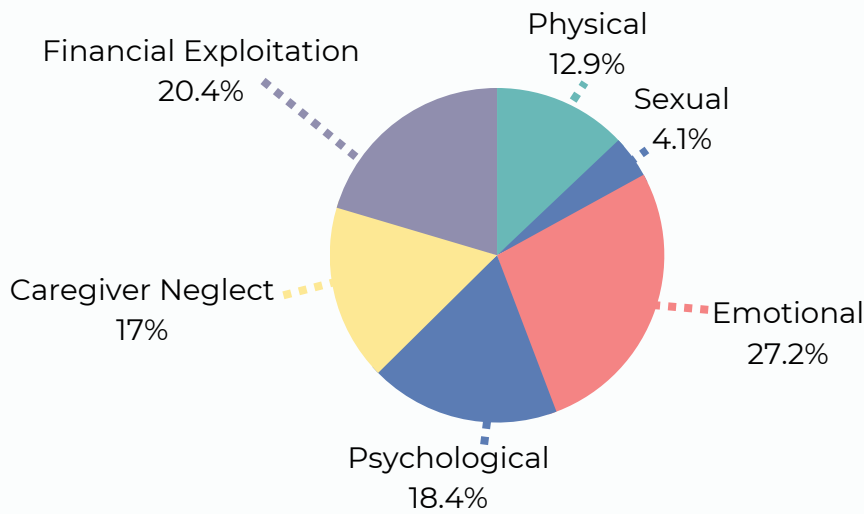
HOW CAN YOU HELP?

- Make time to talk
- create safety plans with your child
- validate your child's feelings
- encourage children to talk

70% OF CHILDREN DO NOT FEEL COMFORTABLE TALKING ABOUT VIOLENCE.

Elder Abuse

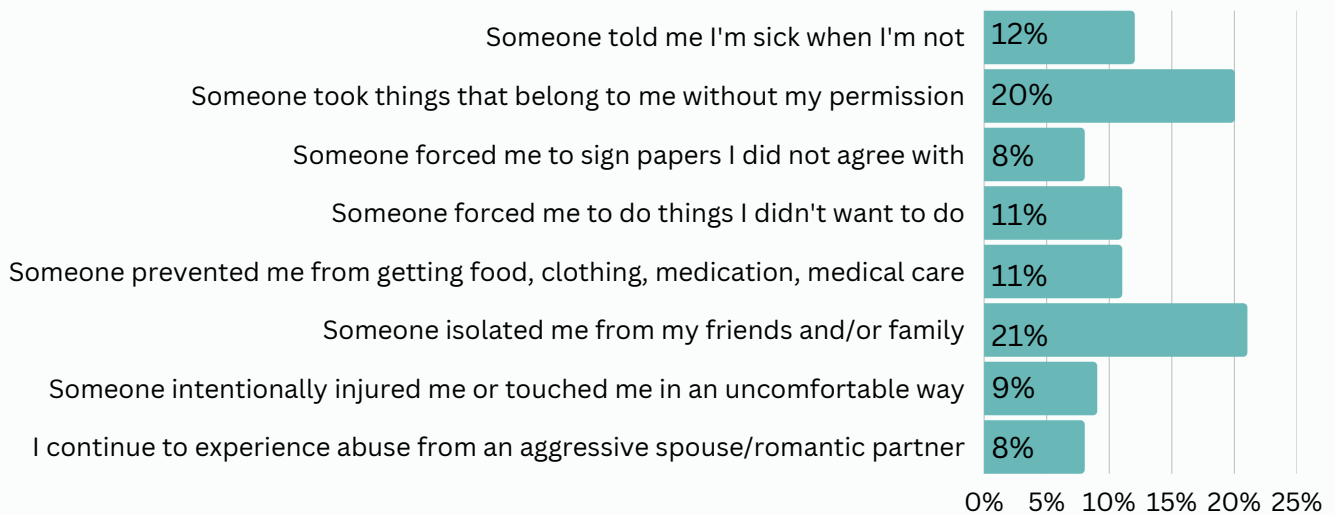
According to the Centers for Disease Control and Prevention, elder abuse is an intentional act, or failure to act, by a caregiver or another person in a relationship involving an expectation of trust that causes or creates a risk of harm to an older adult. For this survey, an older adult was defined as someone age 55 and over.



Elder Abuse is Underreported. The New York State Elder Abuse Prevalence Study found for every case known to programs and agencies, twenty-four were unknown.

ELDER ABUSE INCREASES RISK FOR PREMATURE DEATH

Elders who experienced abuse, even modest abuse, had a 300% higher risk of death when compared to those who had not been abused or neglected. Elder Adult Respondents who have experienced abuse reported the following:





We are grateful for the trust our clients and stakeholders place in us and our commitment to treat their information with the utmost care. We share this information in the spirit of teamwork and appreciation for your partnership in serving our community.

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