2020





# Community Needs Assessment

June - September 2020

**Board Approval: December 16, 2020** 

#### **EXECUTIVE SUMMARY**

The Human Development Commission (HDC) is pleased to share with the community, the results of its 2020 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

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Executive Director Human Development Commission

#### **HUMAN DEVELOPMENT COMMISSION**

#### 2020 COMMUNITY NEEDS ASSESSMENT: OVERVIEW

#### I. 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.

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

Health & Social Services						
Commodity Supplementa	Commodity Supplemental Foods   Temporal		Temporary Emergency Foods		Congregate Nutrition	
Adult Day Services		Elder Abuse		Home [	Delivered Meals	
Homemaking		Chore		Person	al Care	
Respite Care		Minority Outreac	h/Advocacy	Senior	Transportation	
Caregiver Training		Domestic/Sexua	Violence	Domes	tic Violence Shelter	
Housing						
Homeless Re-Housing	meless Re-Housing Utility Assistance		Weatherization		Lead Abatement	
	Civil I	Engagement & Co	ommunity Involve	ement		
Foster Grandparent Progr	ram	Retired & Senior V	olunteer Program	Community Volunteerism		
		Support	Services			
Family Court Mediation		Self-Sufficiency		Commu	ınity Services Block Grant	
	E	ducation & Cogn	itive Developme	nt		
Early Head Start - Children			Early Head Start – Parents & Caregivers			
		Repeated	d Access			
Spoonfuls of Plenty - Con	nmunity N	<i>l</i> leal	Thumbody Expre	ess – Pul	olic Transportation	

In fiscal year 2020 (October 1, 2019 through September 30, 2020), HDC served 5,175 people with reported demographics, which was characteristic of over 3,062 family households. The majority of customers were white females, with seniors age 60 and over (57.7%) as the largest age group, followed by children age 0-17 (29.8%). Nearly all of the households served (93.8%) reported incomes at or below 200% of the Federal poverty level, about one in four customers age 25 and over did not graduate from high school, and one of every two customers were disabled.

#### II. 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. Each agency's purpose it to plan, coordinate, implement, and evaluate services that support the health, education, and welfare of residents. 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.

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.

#### III. 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 accompanying description.



The Assessment Phase employs a systematic process to capture community needs as well as available resources in an effort 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 that can be 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.

#### IV. 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 agency's Facebook page. (Paper copies of the questionnaire were made available for persons without computer aptitude at HDC's administrative and field offices.)

Between June 1 and September 30, 2020, 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.).

#### V. Respondent Profile

A total of 1,030 Community Needs Assessment questionnaires were completed with Tuscola County having the largest number of respondents in the four-county service area and Lapeer County having the smallest as shown below.

Respondents	Huron County	Lapeer County	Sanilac County	Tuscola County	Other County*	No Answer	Total
Number	165	151	159	383	7	165	1,030
Percent	16.0%	14.7%	15.4%	37.2%	0.7%	16.0%	100%

#### 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.

Gender	Male	Female	Other	Total
Number	133	753	2	888*
Percent	15.0%	74.2%	0.3%	100%

<sup>\*</sup>No response (142)

Race	Caucasian	African American	American Indian	Asian/ Pac. Isle	Other Race	2+ Races	Total
Number	847	7	5	0	5	7	871*
Percent	97.4%	0.8%	0.5%	0%	0.5%	0.8%	100%

<sup>\*</sup>No response (159)

Ethnicity	Hispanic/Latino	Non-Hispanic/Non-Latino	Total
Number	20	752	772*
Percent	2.6%	97.4%	100%

<sup>\*</sup>No response (258)

#### Age and Household Type

Over half of respondents were between the ages of 18 and 59. Household types were comparatively even among family households<sup>1</sup>, and senior households<sup>2</sup>; with the lowest number of households being Non-senior households<sup>3</sup> as shown below.

Age	Under 18	18-59	60 and Over	Total
Number	4	569	303	876*
Percent	0.4%	65.0%	34.6%	100%

<sup>\*</sup>No response (155)

Household Type	Family Household	Non-senior Household	Senior Household	Total
Number	348	185	326	859*
Percent	40.5%	21.5%	38.0%	100%

<sup>\*</sup>No response (171)

#### Annual Household Income and Income Sources

Nearly 40% of all respondents had annual household incomes of \$25,000 or less with almost one of every four respondents surviving on less than \$15,000 annually as shown below.

Annual Income	Less than \$15,000	\$15,000 - \$24,999	\$25,000 - \$49,999	\$50,000 - \$74,999	\$75,000 – or more	Total
Number	192	155	201	136	186	870*
Percent	22.1%	17.8%	23.1%	15.6%	21.4%	100%

<sup>\*</sup>No response (67)

Wages from employment was the top source of household income, followed by (in rank order) Social Security retirement, pensions (employer, 401k, IRA, etc.), Social Security Disability and unemployment benefits.

#### VI. Stakeholder Profile

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

Respondents	Huron County	Lapeer County	Sanilac County	Tuscola County	Other County*
Number	40	42	25	22	7
Percent	29.4%	30.9%	18.4%	16.2%	5.1%

<sup>\*</sup>Other Counties (6)

<sup>&</sup>lt;sup>1</sup> Family household: At least one member of the household is a child age 17 or younger.

<sup>&</sup>lt;sup>2</sup> Senior household: At least one member of the household is an adult age 60 or older.

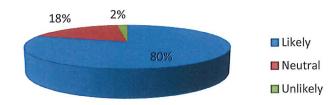
<sup>&</sup>lt;sup>3</sup> Non-Senior household: All household members are between the ages of 18 and 59 regardless of the relationship. This includes husband-wife, significant others, single adult, parent-adult child, friends, etc.

#### VII. Stakeholder Experience with Human Development Commission

#### % Professionalism & Quality of Service



#### Likelihood for Future Collaboration



#### VIII. Other Resources in the Community

No agency alone, Community Action or otherwise, can meet all of 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 table which begins below and follows on the next page, provides a snapshot of community resources available to meet identified needs.

SERVICE AREA	SERVICE AVAILABILITY		
Food & Nutrition	Congregate dining centers		
Programs	■ Emergency food pantries		
	<ul> <li>SNAP, WIC, and other sources of nutritional food products</li> </ul>		
Transportation Services	Public transit authorities		

	Senior transportation services
	Medical transportation
Housing Services	<ul> <li>Home loans (for homebuyers, homeowners, and property owners)</li> </ul>
	<ul> <li>Weatherization and other energy conservation measures</li> </ul>
	Housing counseling and credit repair
Law Enforcement	State Police posts
	Sheriff departments
	Personal protection orders (domestic violence, sexual assault, stalking)
Legal Services	Friend of the Court
	<ul> <li>Legal Services of Eastern Michigan, Lakeshore Legal Aid</li> </ul>
	Elder abuse (e.g., Citizens for Better Care)
Education	<ul> <li>Early childhood development, preschools, Early/Head Start</li> </ul>
	Public and parochial schools, technology centers
	Postsecondary colleges/universities
Medical Services	<ul><li>Hospitals, medical offices, walk-in/after-hours clinics</li></ul>
	Family planning, rehabilitation centers, pharmacies
	■ Immunization clinics
Income Assistance	Child day care funds
	Employment and training services
	Child support
Counseling Services	■ Individual/family counseling
	Behavioral services
	Substance abuse counseling/treatment
Community Services	■ Libraries
	■ Volunteer centers/opportunities
	Civic groups/organizations

2020



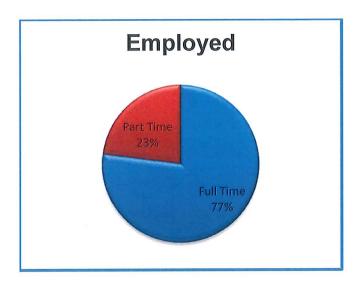


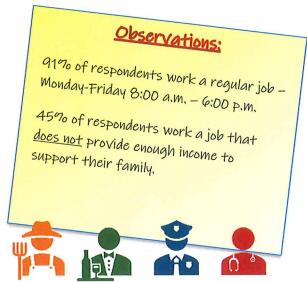
Community Needs Assessment

Questionnaire

#### **Employment**

Jobs are the primary source of income for most families. Of the respondents over half (52%) indicated they were employed; however, there is large variation between those who were employed full time (77%) and those who were employed part time (23%).





The remaining 48% of respondents indicated they were unemployed. Over one-quarter (28%) of these respondents reported they were either retired or not in the labor force (e.g., students). Of the remaining unemployed respondents, only 15% were seeking employment.

#### **Customer Perception of Household Barriers:**

- 22.5% of responses indicate current jobs are low paying
- 14.8% of responses indicate lack of childcare when needed for work

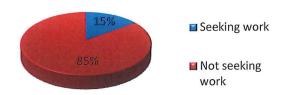
#### **Customer Perception of Community Barriers:**

- 23.3% of responses indicate current jobs are low paying
- 13.6% of responses indicate unable to find jobs in the
  area.

#### Stakeholder Perception of Community Barriers:

- 40.0% of responses indicate current jobs are low paying
- 35.0 of responses indicate employees lack the skills and/or education to obtain and keep a job

#### Unemployed

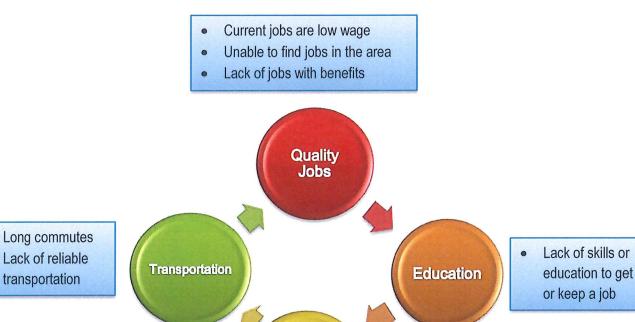


Top Community Barrier:

Current jobs are low paying

#### **Employment**

The graphic below illustrates employment, education, childcare, and transportation barriers that often prevent "thumb" area residents from becoming gainfully employed in high demand, high paying jobs.



 Lack of child care when needed for work

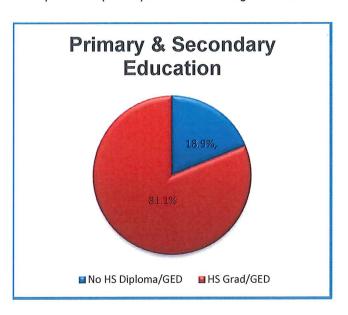
**Child Care** 

The 2019 Annual Unemployment Rate for all four "thumb" counties exceeded the national and state rates of 4.4% and 3.97%, respectively.

In fiscal year 2020, 78.2% of HDC customers had one or more sources of income while 21.8% reported having zero (0) income.

#### **Education & Training**

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. About half of respondents (27.3%) indicated their highest education level was a high school diploma/GED or less.



#### Observations:

37.0% of responses indicate there is a need for help obtaining an Associate's or Bachelor's degree.

32.9% of responses indicate there is a need for training in a specific career area or certificate program.

76.0% of respondents indicate they do not have any future educational goals & are happy with their achievements.

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. About one in three respondents (32.1%) have some college education, while 49.4% have a post-secondary technical certification or higher.

#### **Customer Perception of Household Barriers:**

- 26.0% of responses indicate cannot afford costs
- 17.0% of responses indicate lack of time

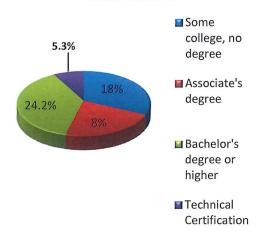
#### **Customer Perception of Community Barriers:**

- 51.0% of responses indicate cannot afford costs
- 22.0% of responses indicate no local college campus/long commute

#### Stakeholder Perception of Community Barriers:

- 41.0% of responses indicate mental health issues (including afraid to try/fear of failure)
- 30.0% of responses indicate cannot afford costs

## Postsecondary Education

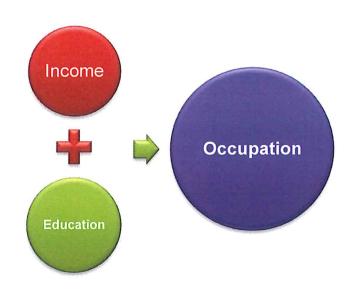




When respondents were asked to identify obstacles they felt made it difficult to pursue the skills and education needed to maintain employment, the top response described the difficulty with costs associated with obtaining further education; however, other factors were outlined as challenges such as lack of transportation, childcare and basic reading/writing skills.

#### Observation:

Stakeholder responses for Employment indicated employees lack the skills and/or education to obtain and keep a job.



In 2018-19, the 4-Year **rate** of <u>high school graduation</u> and <u>dropout</u>
were **higher** in all four "thumb" counties
than the state of Michigan average.

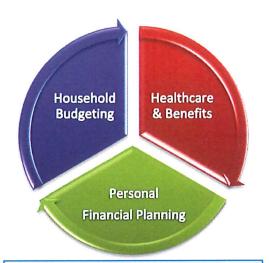
#### **Living Expenses & Overall Finances**

Income management is the ability people have to meet their current living expenses. When respondents were asked whether or not they were able to meet current expenses, 83% indicated they were able while 17% reported they were not able.

Respondents identified the following activities as household barriers of income management:

#### Household Budgeting includes:

- √ Having too much debt
- ✓ Poor credit
- ✓ Not enough income
- ✓ Factoring in medical expenses



Benefits & Entitlements include:

✓ Applying for Social Security, Unemployment, DHHS, etc.

#### Personal Financial Planning includes:

- ✓ Opening a bank account
- ✓ Lack of setting financial goals
- ✓ Lack of planning for emergencies
- ✓ Planning for retirement

#### **Customer Perception of Household Barriers:**

The majority of customer responses (67.4%) indicated *Household Budgeting* is the greatest household barrier, particularly factoring in medical expenses. Additionally, approximately 24.5% of responses indicated respondents needed help with *Personal Financial Planning*.

Income management is a problem in my community because:

#1 Customer & Stakeholder Response:

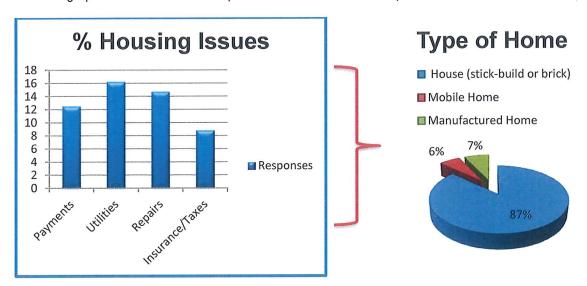
Income not sufficient to support household expenses

In fiscal year 2020, 93.8% of households served by HDC, lived at or below the Federal poverty threshold.

#### Housing

Safe, decent, and affordable housing is important for maintaining family stability. Of the respondents, 61.9% own homes, while 34.8% rent. Only a small percentage of respondents were homeless (3.4%) at the time of the Community Assessment. Both homeowner and renter respondents overwhelmingly (94.0%, combined average) believed their home was safe and decent; likewise, 78.9% believed their home was affordable. Similarly, less than ten percent of respondents believed their home was not safe/decent while just over 16% believed their house was not affordable.

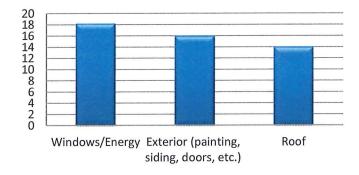
The graph below illustrates the top three household barriers respondents encountered over the past year:



#### % Most Needed Repairs

#### Observation:

Respondents were asked to identify any repairs needed in their homes. The majority of responses identify energy efficiency measures (e.g., windows, insulation, etc.), followed by exterior, & roofing issues.



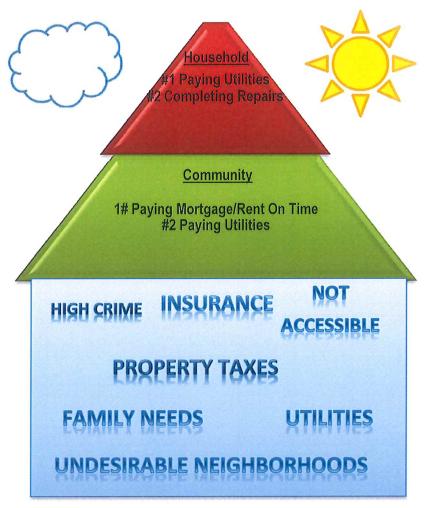
**22%** of respondents indicate they

cannot afford to make repairs.

#### Housing

Respondents were asked their opinion about why housing is a problem in their communities; being able to pay mortgage notes/rents on time and affording utilities were the most common answers provided. Lack of safe, decent and desirable housing and lack of funds or ability to make repairs and/or maintain a home rounded out the top housing issues.

There are many challenges to owning or renting a home. The illustration below identifies various points of consideration when buying or renting a safe, decent, affordable home.



#### **Stakeholder Perception of Community Barriers:**

- #1 Accessing Affordable Rentals
- #2 Paying Mortgage/Rent on Time

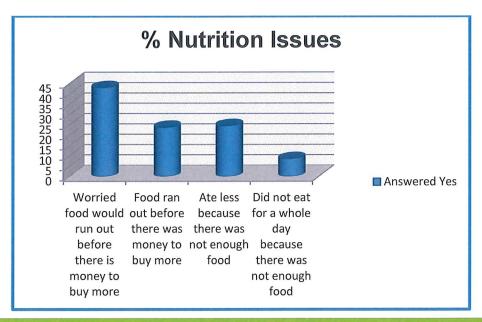
#### Did you know...

- In Michigan, the 2020 Fair Warket Rent (FWR) for a 2-bedroom apartment was \$773. To afford this level of rent and utilities, without paying more than 30% of income on housing, a family must earn \$3,019 monthly (\$36,227 annually).
- In the "thumb" area, FMRs for a 2-bedroom apartment ranged from \$713 for Huron, Sanilac, and Tuscola Counties to \$977 for Lapeer County.
- The hourly wage necessary to afford a 2-bedroom apartment at the 2020 FMR rate is:
  - o Michigan \$17.42
  - Huron/Sanilac/Tuscola -\$13.71
  - o Lapeer \$18.79

In fiscal year 2020, 46.7% of HDC's customers **owned** their home, 24.5% of customers **rented**, and 4.7% were **homeless** or in temporary housing.

#### **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.



#### Most common food assistance program accessed:

- → Food Pantries
- → SNAP (Supplemental Nutrition Assistance Program through DHHS)
- Free/Reduced Lunch Program (through USDA administered at schools)

#### **Customer Perception of Household Barriers:**

- 48.8% of responses indicated not enough income to purchase food
- 21.0% of responses indicated lack of food pantries/farm markets/grocery stores

#### **Customer Perception of Community Barriers:**

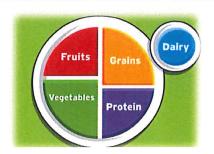
- 43.5% of responses indicate not enough income to purchase food
- 29.2% of responses indicate lack of meal preparation skills

#### Stakeholder Perception of Community Barriers:

- 36.4% of responses indicate lack of meal preparation skills
- 35.0% of responses indicate not enough income to purchase food

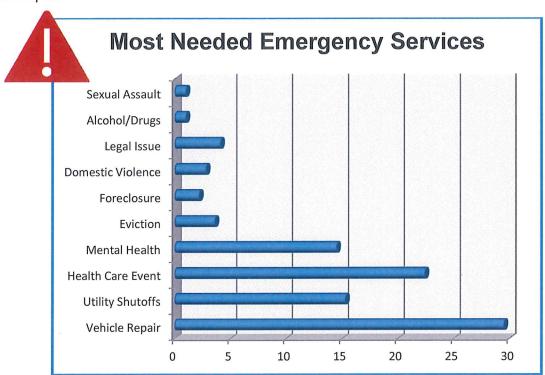
#### **Top Community Barriers:**

Inadequate income to purchase food & lack of meal preparation skills



#### **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.



#### **Customer Perception of Household Barriers:**

- 14.4% of responses indicate do not know where to get helpnot enough help available
- 12.0% of responses indicate costs too much for help (co-pay, etc.)

#### **Customer Perception of Community Barriers:**

- 19.7% of responses indicate do not know where to get helpnot enough help available
- 13.0% of responses indicate lack of health or prescription insurance

#### Stakeholder Perception of Community Barriers:

- 27.0% of responses indicate mental health resources
- 25.0% of responses indicate do not know where to get helpnot enough help available

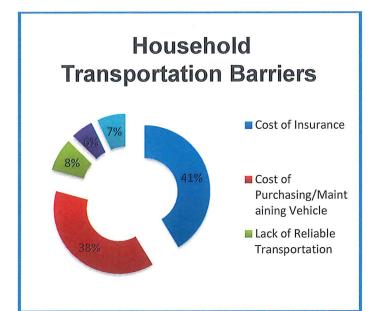
## Top Community Barrier:



Do not know where to get help/not enough help available

#### **Transportation**

Access to reliable transportation is key to finding opportunity. Most respondents (91.1%) indicated they had access to reliable transportation.



## Customer Perception of Community Barriers:

About 1 in 3 responses (34.1%) indicate the cost of purchasing and maintaining a Vehicle as a top barrier

The cost of insurance was noted as the second largest barrier (33.1%)

Thumb Area Transit

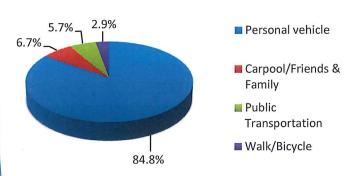
Greater Lapeer Transportation Authority
Sanilac Transportation Corporation
Caro Thumbody Express

#### Stakeholder Perception of Community Barriers:

33% of responses indicate the cost of purchasing and maintaining a vehicle is the top barrier

21% of responses indicate the cost of insurance as the second largest barrier

#### **Types of Transportation**

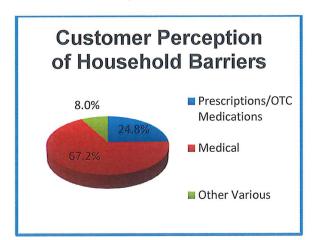


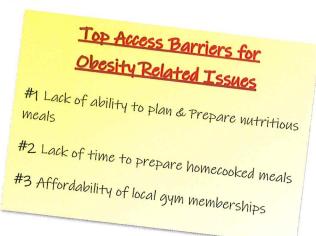
The Human Development Commission's **four-county** service area spans **3,265 square miles**.

#### 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 94.0% indicated they have health insurance; 80% indicated their health insurance is affordable.





## Stakeholder Perception of Community Barriers:

55% of responses indicate there is a of lack alcohol/drug treatment resources

35% of responses indicate there is a lack of mental health services and resources to pay for them

## Customer Perception of Community Barriers

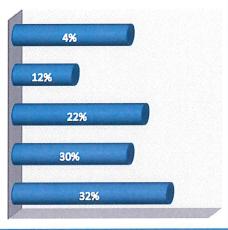
Lack of Doctors that Accept Medicaid

Prescriptions/OTC Medications

Lack of mental health services and resources to pay for them

Alcohol/Drug Treatment Services

Lack of dentists that accept Medicaid



In Michigan's "thumb," the **number** of <u>primary care physicians</u> and <u>dentists</u>

per person **is less** than the **state average** and **national benchmark**.

Of those who reported, 98.9% of HDC customers indicated they had health insurance in fiscal year 2020.

# 2020 Luman evelopment ommission Community Action Agency



# COVID-19 Questionnaire

\*Responses are a snapshot in time of an ongoing pandemic.

## Responses Regarding Barriers Caused by COVID-19

#### FOOD

## Household Barrier

56% indicated they having difficulty accessing food at grocery stores

### Community Barrier

33% indicated there is difficulty accessing to food at grocery stores

## HOUSING/EXPENSES

#### Household Barrier

42% indicated they were unable to afford utilities

#### Community Barrier

33% indicated there is difficulty affording utilities

### EDUCATION

#### Household Barrier

43% indicated their work schedules made it difficult to homeschool

#### Community Barrier

42% indicated there is inadequate internet for online school

## SANITIZERS/PPE

#### Household Barrier

40% indicated they are having difficulty accessing household cleaning

#### Community Barrier

35% indicated there is difficulty accessing soaps/sanitizers

## Healthcare

## Household Barrier

43% indicated they were afraid to access routine medical care

## Community Barrier

30% indicated there is fear about accessing routine medical care

## TECHNOLOGY

#### Household Barrier

68% have inadequate internet access

#### Community Barrier

52% of responses indicate inadequate internet access is a problem

2020

## uman evelopment ommission



Community Safety Assessment of Domestic Violence, Family Violence, and/or Older Adult Victimization

#### IX. 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.

New for HDC's 2020 Community Needs Assessment, the Community Safety Assessment of Domestic Violence, Family Violence, and/or Older Adult Victimization was developed to measure the prevalence of these abuses in the four-county service area. The numbers are staggering. Of the 1,030 completed surveys for the full Community Needs Assessment, respondents who indicated they have or know someone that has experienced intimate partner violence, child abuse/neglect, and/or older adult abuse are shown below.

	Domestic/Intimate Partner Violence	Family Violence/Child Abuse/Neglect	Older Adult Victimization/Elder Abuse
Answered Yes	541	469	299
Percent	52.5%	45.5%	29.0%

As a result, the following three pages illustrate what we have learned.

#### **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.

#### 1 in 4 women experience Domestic Violence in their lifetime.





# Perceptions of Needed Legal System Changes Increased accountability for offenders in court Increased accountability for offenders by law enforcement More effective prosecution Increased law enforcement training on identifying and responding to DV Increased accountability for offenders on probation

Were respondents aware that services do not require a shelter stay?



Do respondents believe that domestic violence affects children?

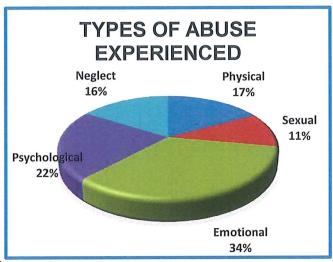


#### **Family Violence**

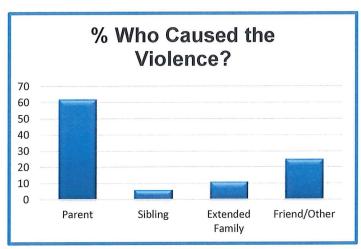
While domestic violence more often refers to violence between married or dating couples, domestic violence can also involve violence against children, parents, or the elderly. It takes a number of forms, including physical, verbal, emotional, financial, sexual abuse, and/or neglect. Family violence means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

1 in 7 children in the U.S. has experienced child abuse and/or neglect in the past year.

46% of respondents indicate affected children received medical attention.







#### How can you help?

Make time to talk... Create safety plans with your child... Validate their feelings...

Encourage children to talk...

#### Effects of Violence on Children:

39% of those who responded received information

#### How to Talk to Children About Violence:

30% Feel Comfortable

96% of respondents for this survey indicate they feel capable of protecting their children from future harm.

#### **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.

FACT:

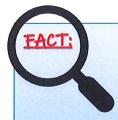
Elder abuse is underreported.

The New York State Elder
Abuse Prevalence Study
found that for every case
known to programs and
agencies, 24 were unknown.

#### Observation:

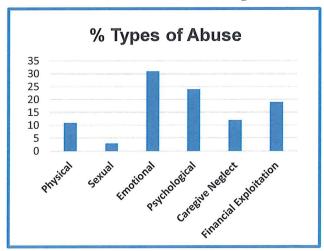
Only about 8% of 800 respondents have experienced or know someone that has experienced older adult abuse.

of the community.



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.



Hiding in Plain Sight

#### Someone...

- 1 isolated you from your friends and/or family
- 2 took things that belong to you (including money) without your permission
- 3 forced you to do things you didn't want to do
- 4 prevented you from getting food, clothes, medications, medical care, etc.