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2017 COMMUNITY ASSESSMENT ADDENDUM

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Community Assessment Addendum 2017

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Executive Summary – written by Carol Foster, Executive Director

This Community Assessment Addendum was conducted in collaboration with the three grantees, Educational Opportunities for Children and Families (EOCF), Educational Service District 112 (ESD) administering the Early Head Start and Early Childhood Education and Assistance Program (ECEAP) services in the same service area, as well as Innovative Services Northwest (ISNW) administering ECEAP services in Clark County. These three agencies combined resources to update last year’s community assessment addendum. Input includes all agency programs—Early Head Start, Head Start and ECEAP.

The region covered in this Community Assessment Addendum remains unchanged from 2016 and includes the recruitment and service areas of the three grantees serving the area, in addition to the rest of the Southwest Washington region. The region is comprised of six counties: Clark, Cowlitz, Pacific, Klickitat, Skamania and Wahkiakum. EOCF serves Clark and Pacific Counties, and the Woodland School District in Cowlitz County. ESD 112 serves these counties in addition to parts of Klickitat, Skamania and Wahkiakum Counties.

The three agencies reviewed data to determine whether there are any significant changes to note for this addendum. The narrative that begins on Page 7 discusses the most prevalent issues, ongoing challenges and concerns within Southwest Washington.

Major Issues, Trends and Concerns

Overall Impact of the Recession Begins to Lessen Slightly

Southwest Washington was hit hard by the economic downturn that began in 2008. The region continues to see some upturn in a few areas of the economy. A translatable indicator of poverty for our families is the number of free and reduced lunches, on the increase for both Evergreen and Vancouver School Districts. The five rural counties have free and reduced lunch application rates that are much higher than the state average of 42%, and higher rates of child poverty.

Major challenges facing local communities remain a consistent theme with lack of sustainable family wage jobs, affordable housing, homelessness, mental health issues, substance abuse and lack of transportation, particularly in the more rural areas. Many families are very limited in their ability to travel to a location farther away than their local neighborhood to receive child care and education services.

Available and affordable housing is the area with the most change since 2015 and is now an extreme challenge for our families. This factor impacts enrollment and attendance in our early learning classes. Child poverty continues to be high, specifically in the under-6-year-old population. More households are at or below poverty level, including many “new poor” who have recently fallen into and/or remain in poverty due to economic conditions and unemployment.

Feedback from parents, staff, the EOCF Parent Policy Council and Board of Directors, and community agencies consistently confirms an increase in the number of children with health issues, nutrition and mental health needs, dual language children and their families, children with disabilities and grandparents as the primary caregivers.

Child Well-being

Obesity continues to be a concern both nationally and locally. High percentages of children enrolled in Head Start, Early Head Start and ECEAP programs are overweight or obese, and this has steadily maintained or increased over the past several years, even with nutrition education and the implementation of physical activity education and intervention. Children's overall health is expected to continue to decline due to obesity. Families cannot necessarily travel to grocery stores and farmers' markets to obtain fresh fruits and vegetables, which are typically higher priced. Thus, they rely more and more on low-cost, fast food or filling, but less nutritious, food.

EOCF participates with the Clark County Food Bank in the "Growing Healthy Futures" program that includes establishing gardens at some of our early learning sites, as well as grocery shopping, cooking and nutrition activities and education for children and families.

Family Well-being

The majority of families continue to request parenting and health Education.

As of December 2016, Washington has enrolled 1,810,889 individuals in Medicaid and CHIP — a net increase of 62.04% since the first Marketplace Open Enrollment Period and related Medicaid program changes in October 2013. Washington has adopted one or more of the targeted enrollment strategies outlined in guidance CMS issued on May 17, 2013, designed to facilitate enrollment in Medicaid and CHIP. Our counties did not have the health care providers or clinic infrastructure to provide care to that many more clients with reduced reimbursement for care at Medicaid rates of pay.

- **Medical Homes Broken:** The concept of a Medical Home is still a desire and promoted; however, given the collapse of access for clients, there is a challenge creating a Medical Home in all three of our counties: Clark, Cowlitz and Pacific. Currently, Clark County has only three clinics accepting new patients, one of them is scheduling appointments as far as four months out. Pacific County has no dental providers and only one medical clinic choice, which is back-logged as well. Cowlitz County is fairing a little better; however, locations are such that families must travel up to forty miles for care.

Many clinics have suspended enrolling new clients and "capped" the number of Medicaid clients they will serve. Additionally, if families do not recertify timely, they are un-enrolled from Medicaid and must complete the initial application process again. In doing so, the clinic considers them a "new" client and blocks them from continuing care or services at their clinic. Furthermore, our largest Managed Care provider is administrated in California, is not familiar with our geographic regions and does not allow our border counties to seek care or referrals across the state line. Some of our families have primary care at different clinics for each of their children and another for themselves.

Washington's community health centers are local, nonprofit, community-owned healthcare facilities that serve low-income and medically underserved communities. SeaMar Community Health Center is in Clark County. One challenge is that they cannot turn down new clients because they are federally backed: therefore, they are scheduling appointments four to five months out for well-child care appointments. Additionally, they are an instructional clinic for interns and have a high turnover rate. PCP's are not assigned, and they do not have a phone or appointment system that is consistently functional. This makes appointment setting difficult, let alone ill care.

Families have resorted back to inappropriately using emergency departments for general illness and not getting routine well-child care or vaccinations on set schedules. Some families refuse to go to these clinics because of poor quality of care and logistical frustrations.

Affordable and Available Child Care and Preschool Services

The cost of child care in our region continues to rise. Center-based child care continues to cost more than child care in a family-based setting. In Clark County, center-based child care costs have only risen slightly. Family child care provider costs for infants have risen 3.1% in Clark County from 2015 to 2016 although preschool rates have decreased 1.6%. Center based preschool costs in Clark County have increased 1.4% since 2015—more than any other county featured in this addendum.

Southwest Washington has seen a drop in providers by about 23% and a drop in capacity of about 8-11%. In Clark County, the number of child care providers has dropped from 297 with capacity for 8,799 children in 2012, to 234 providers with capacity of 8,618 children. Data shows that family child care in particular has seen a decline in the number of providers and capacity. This is a consistent trend over the years and not unexpected. Factors can include turnover, low pay and operating costs. There is still a high demand for child care, so many families struggle to find adequate care.

Space for early learning services is very scarce given the recent legislation mandating elementary classroom size reduction and mandatory full-day kindergarten. Providers continue to explore space possibilities in the community; however, requisite remodeling to meet Head Start, Early Head Start and ECEAP performance regulations as well as leasing costs are prohibitive, given grantees' federal funding allocation.

The need for early learning services continues to increase; however, state and federal funding for these programs remains fairly flat. EOCF stakeholders continue to strategize a process for creating a diversified revenue portfolio.

Recommendations and Priorities

The following recommendations are based on the work compiled in this Community Assessment Addendum, the findings listed previously, and recent discussions among EOCF staff, management, EOCF Board of Directors, Parent Policy Council and community stakeholders.

1. Continue efforts to ensure that services to those most in need are occurring, including children in extreme poverty, children with disabilities, children in foster care, and families who are homeless. Continue to evaluate and emphasize services and activities that address these needs of eligible families. We will continue efforts to work with the medical community on behalf of our families seeking quality health care that is timely.
2. EOCF has increased the number of bilingual center staff to address the number of Dual Language Learners (DLL)/families, especially those whose primary language is Spanish. Of the 14 sites that have 50% or higher enrollment of DLL Spanish-speaking children, only three do not currently have an onsite Spanish speaking staff (79% with staff). EOCF has added staff who speak French, Arabic, and African Dialect, broadening our language options.

We will continue efforts to provide staff training opportunities for Spanish language learning, potentially looking at access to Community Education classes offered through local colleges. We will also determine whether we have any current Spanish-speaking families who are interested in assisting EOCF staff to learning Spanish.

We will continue to evaluate classrooms to address the needs of our children and families:

- To further support child and family services for Dual Language Learners (DLL):
- To provide additional training for existing staff to increase cultural and ethnic knowledge when working with DLL children.

3. Promote and establish activities to sustain healthy behaviors for children, families and staff. Data from local sources, as well as our own child outcome aggregated data, reveals the need for more focus on physical activity and nutrition. EOCF continues collaboration with the Clark County Food Bank and the “Growing Healthy Futures” program. Families receive nutrition education, access to site-based and community gardens, coaching on effective grocery shopping and other related services and activities, resulting in positive benefits and outcomes.
4. Continue to review the aggregated data that has been compiled for all children attending Head Start, Early Head Start and ECEAP for intentional program improvements in the areas of science and math education. Continue to explore possibilities for collaborating in mutual, reciprocal teacher training with school districts.
5. Continue to enhance a) school readiness goals in alignment with the Head Start Early Learning Framework, the Washington State Early Learning Guidelines and local kindergarten program initiatives, and b) family engagement activities via implementation of the Parent, Family and Community Engagement Framework in all aspects of our early learning programs and activities with families.
6. Continue expanding partnerships with non-traditional and new potential partners to increase collaboration and services for dual language families, as well as establishing facilities and services within neighborhoods for increased accessibility for families.
7. Continue to increase and grow partnerships with training and employment programs, physicians and medical groups and potential “wrap-around one-stop-shop” services for families.
8. Continue with and grow coalition work in Southwest Washington to unify systems and efforts on behalf of the children and families we serve, including Council for the Homeless, the Children Can’t Wait initiative, Support for Early Learning & Families (SELF), Southwest Washington Early Learning Regional Coalition (SWEL), Healthy Learning Collaborative (HLC), etc.
9. Continue to explore space possibilities in the community, leveraging combined resources to move early learning sites into neighborhood schools in those areas of greatest need whenever possible.

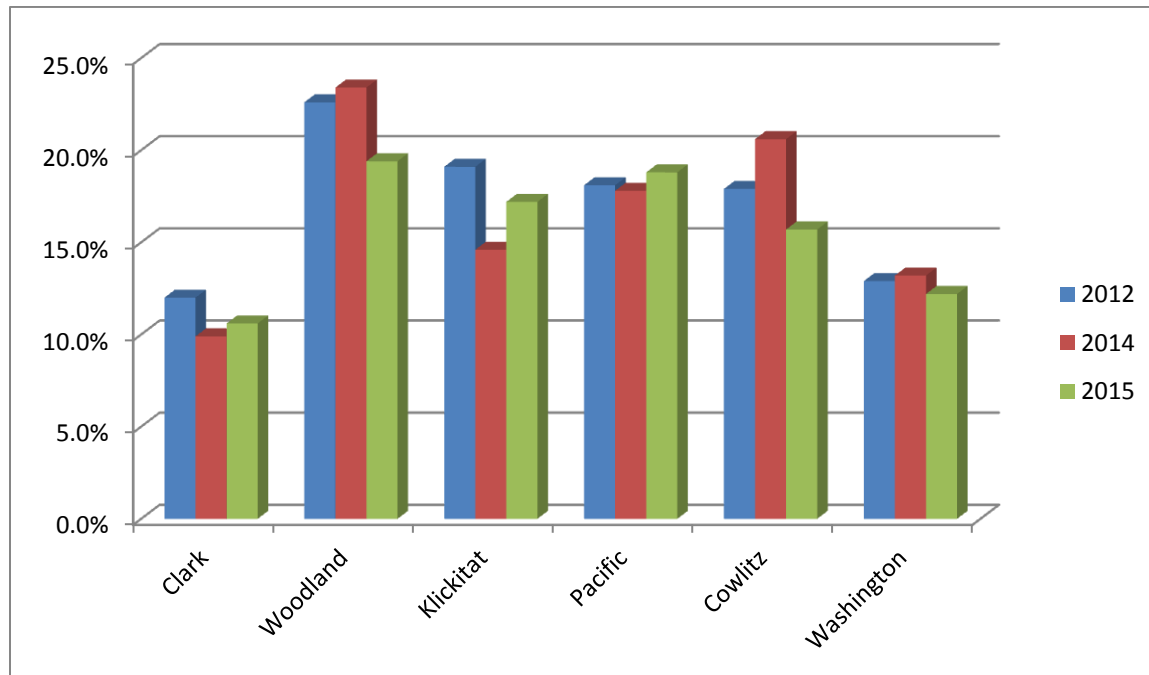
10. Increase opportunities for father/male engagement, integrating the cultural diversity of our families. Our strategy is to build strong and resilient families and parent leadership and advocacy skills, resulting in long-term family success and academic success of children.

Final Note

The comprehensive 2011-13 Community Assessment is available on the EOCF website: <http://www.eocfwa.org> for complete information and data on all aspects of Southwest Washington Communities in the counties served by EOCF, ESD 112 and Innovative Services NW.

Narrative

Poverty Rate



Location	2012 Poverty Rate	2014 Poverty Rate	2015 Poverty Rate
Clark	12.0%	9.9%	10.6%
Woodland	22.6%	23.4%	19.4%
Klickitat	19.1%	14.6%	17.2%
Pacific	18.1%	17.8%	18.8%
Cowlitz	17.9%	20.6%	15.7%
Washington	12.9%	13.2%	12.2%

Source: U.S. Census Quick Facts, 2011-2015

Key Findings: The poverty rate in Washington State has decreased between 2012 and 2015. Cowlitz County had the largest decrease in poverty rate, decreasing almost 5% between 2014 and 2015. Between 2012 and 2014 Cowlitz County had the largest increase in poverty rate. Woodland County also had a significant decrease in poverty rate between 2014 and 2015, decreasing 4%. Woodland, Klickitat, Pacific, and Cowlitz Counties all remain at a higher poverty rate than Washington State.

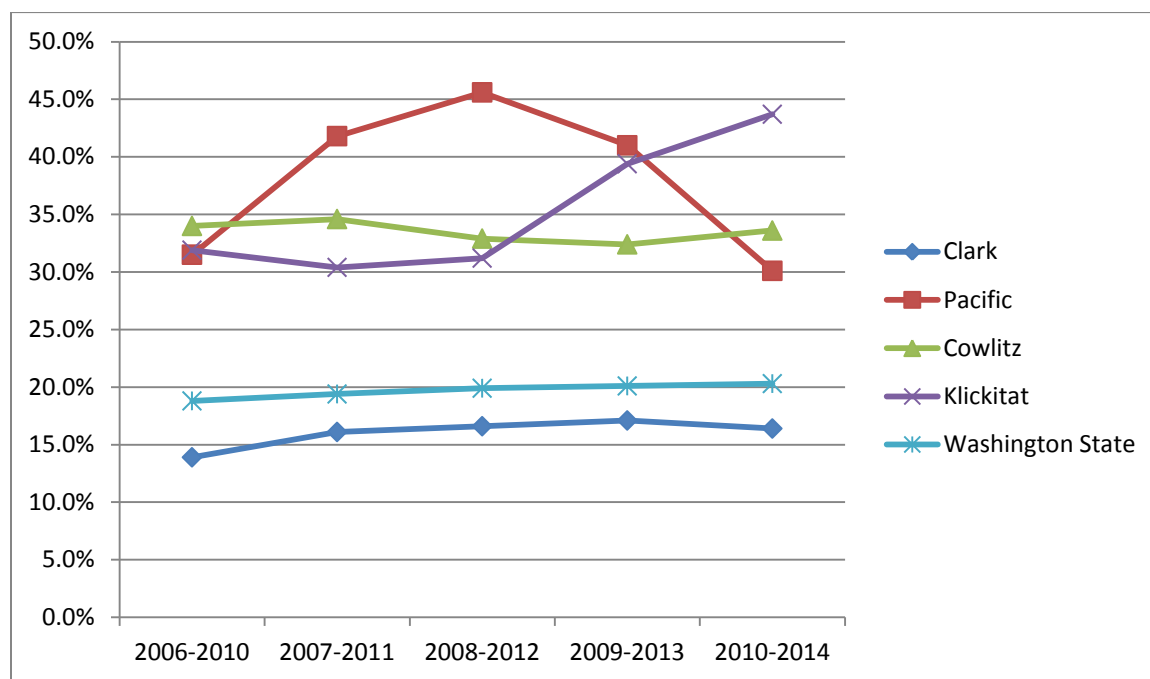
Poverty Rate for City/CDP (Census Designated Place)

Location	Salmon Creek	Battle Ground	Five Corners	Hazel Dell
2012 Poverty Rate	14.8%	12.3%	16.4%	13.5%
2014 Poverty Rate	13.6%	12.2%	13.2%	14.3%
2015 Poverty Rate	11.2%	13.4%	12.4%	14.1%

Source: U.S. Census Quick Facts, 2011-2015

Key Findings: The poverty rates in Salmon Creek, Five Corners, and Hazel Dell have all continued to decrease between 2012 and 2015. The poverty rates in Battle Ground, Five Corners, and Hazel Dell continue to be slightly higher than the state average. Salmon Creek’s poverty rate has dropped below the state average for the first time since 2012.

Child Poverty Rate Birth-5



Location	2006-2010	2007-2011	2008-2012	2009-2013	2010-2014
Clark	13.9%	16.1%	16.6%	17.1%	16.4%
Pacific	31.5%	41.8%	45.6%	41.0%	30.1%
Cowlitz	34.0%	34.6%	32.9%	32.4%	33.6%
Klickitat	31.9%	30.4%	31.2%	39.4%	43.7%
Washington	18.8%	19.4%	19.9%	20.1%	20.3%

Source: Washington Kids Count Data Center, 2014

Key Findings: Childhood poverty in Clark County remains consistently lower than the state average. Pacific, Cowlitz, and Klickitat Counties have a significantly and consistently higher rate of poverty than the state average.

Children Under 6 in Extreme Poverty (5-year Average)

Location	Data Type	2006 - 2010	2007 - 2011	2008 - 2012	2009 - 2013	2010 - 2014
Clark	Number	2,403	2,621	2,475	2,451	1,963
	Percent	7.0%	7.6%	7.1%	7.2%	5.8%
Cowlitz	Number	1,050	1,129	1,141	1,188	1,107
	Percent	13.3%	14.2%	14.7%	15.3%	15.0%
Klickitat	Number	126	187	172	246	352
	Percent	*9.4%	*13.8%	*12.9%	*19.7%	*27.9%
Pacific	Number	104	190	170	151	149
	Percent	*9.1%	*16.2%	*14.7%	*13.1%	*13.2%

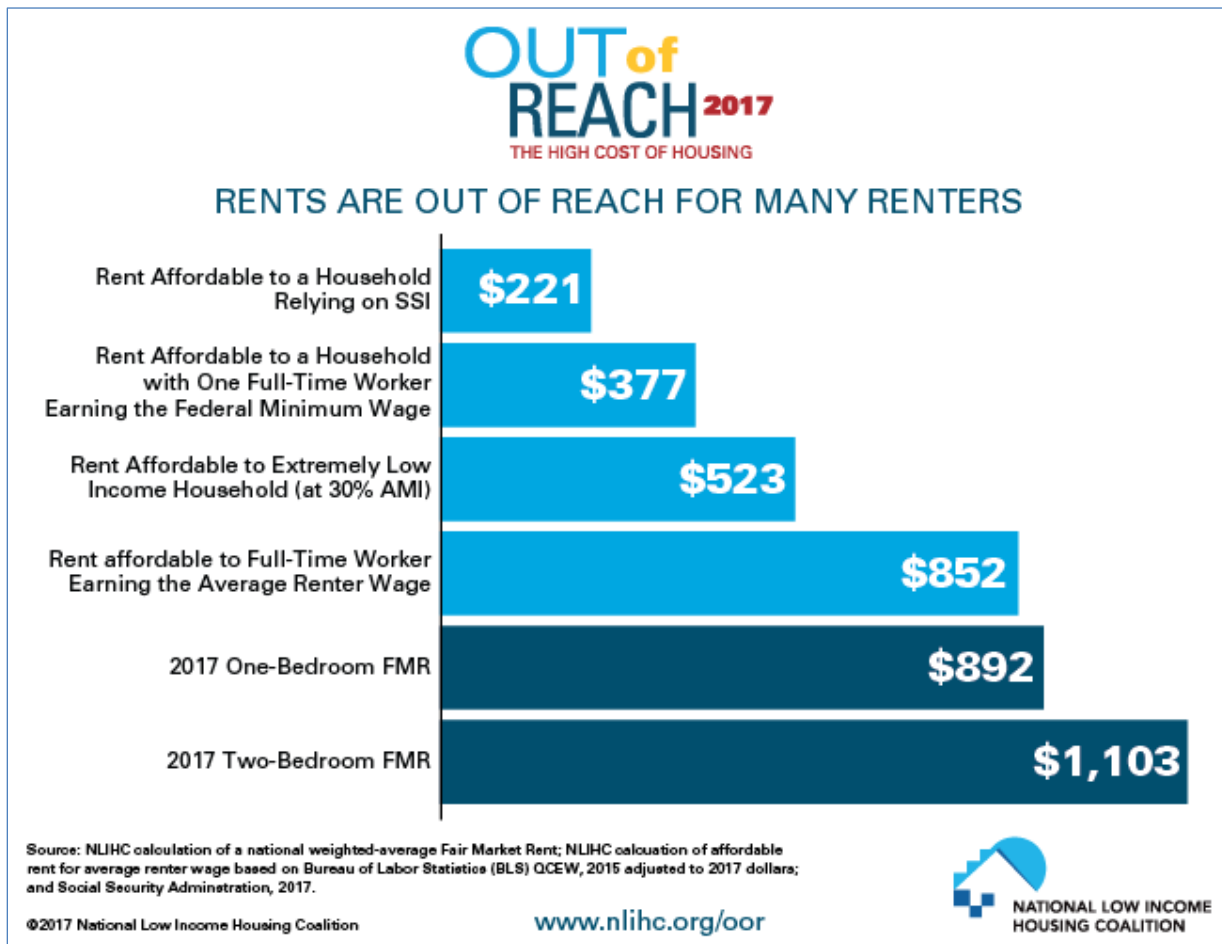
Source: *Washington Kids Count Data Center, 2014*

Location	Data Type	2006 - 2010	2007 - 2011	2008 - 2012	2009 - 2013	2010 - 2014
Washington	Number	40,224	40,824	43,347	45,593	45,643
	Percent	8.0%	8.0%	8.5%	8.8%	8.8%

Source: *Washington Kids Count Data Center, 2014*

Key Findings: The percentage of children in extreme poverty in Clark County has remained slightly below the state average continually from 2006-2014, with the 2010-2014 averages having the largest difference. The percentage and estimated percentages of children in extreme poverty in Cowlitz, Klickitat, and Pacific Counties have remained well above the state average. With the exception of Clark County, the percentages of children in extreme poverty in the other counties continue to increase from 2006-2014, along with state percentages.

Housing



Clark County

The Census Bureau's recent American Community Survey showed more than half of Clark County's approximately 58,500 renters are cost-burdened by housing. What's more, rental listing service ApartmentList.com reported in August 2015 that Vancouver's rents are growing faster than anywhere else in the nation. An average two-bedroom apartment in Vancouver rented for \$1,050 in August, the website reports, 15.4% more than last year.

Historical data from Clark County shows this problem has been ongoing—and disproportionately affecting the area's most vulnerable residents—for years.

The U.S. Department of Housing and Urban Development, or HUD, recommends that only 30% of a family's household income go toward housing. For a family of four, the median household income in the greater Portland-Vancouver metro area from 2008 to 2012 was \$70,786. That family, therefore, should spend no more than about \$1,770 a month on rent and utilities.

Housing data from that same time period shows that of the 21,680 local families making less than half the median income, about 84.1% were spending more than a third of their money on housing. A little more than half were doling out 50% of their income for rent.

The problem is only getting worse. Income growth is not keeping pace with rising rent. Rents have gone up 12.5% in the last five years, according to Clark County statistics. The median family income, according to HUD, only increased 3.8%.

Renters with a household income less than 30% of the median income:	11,640
Rental units affordable to households with incomes less than 30% of the area median income:	2,700
Renters with a household income more than 30%, up to 50% of the median income:	10,040
Rental units affordable to households with incomes between 30 and 50% of the area median income:	9,090

Early in fall 2015, the Vancouver City Council approved new policies to protect renters, and thousands of multifamily units are slated to be opened over the next two years. But those are only the first steps toward solving a wide-reaching problem. In recent months, dozens of low-income renters have been kicked out of their homes. Meanwhile, hundreds of families are on waiting lists for affordable apartments and Section 8 vouchers, which are given to the poorest renters to offset their housing costs.

Andy Silver, director of the Council for the Homeless, said, “You’re sort of in that danger zone where a medical bill or a car problem can pose an insurmountable financial challenge. Any negative event and you’re going to lose that apartment.”

The crisis is also driven by the lack of apartments in Clark County. The rental home vacancy rate locally is 2.4%. The national average is 6.8%, according to the Census Bureau.

“That means families, including the homeless, who would otherwise be eligible for low-income housing, can’t find a place to live simply because the space is not available”, Silver said. “It’s totally crippled our ability to help people who are homeless. A lack of government policy and adequate planning for affordable housing has also contributed to the problem.”

“We haven’t really had people locally thinking in a sophisticated manner about how we build the right sort of mix of housing,” Silver said. “We don’t have affordability targets. We just aren’t up to where we need to be.”

Spurred by the task force’s recommendations, the city voted in September 2015 to adopt three ordinances to protect renters. Once the ordinances take effect late next month, renters will receive more advance notice if evicted without cause or if their rent is increasing by more than 10%. Landlords can also no longer discriminate against families based on their income sources, protecting families who receive Section 8 vouchers for rent.

There are also more than 3,300 new multifamily units in the works within Vancouver, according to the city. Those range from affordable homes for the chronically homeless, such as the highly anticipated Lincoln Place Apartments, to pricey condominiums.

In unincorporated Clark County, there are 1,015 housing units in the works. More apartments may ease some of the pressure on increasing rent prices.

“It’s definitely an unusual housing market right now with the inventory that low,” said Scott Bailey, regional labor economist with Washington’s Employment Security Department. “Inventory is really, really low right now throughout the metro area and in a lot of metro areas around the country, and that’s pushing prices up.”

Source: The Columbian, September 27, 2015

Cowlitz County

Cowlitz County has a population of 102,410. There are 40,244 households in the county with an average household size of 2.47 persons. 34.21% of households in Cowlitz County are renters.

The median gross income for households in Cowlitz County is \$46,571 a year, or \$3,881 a month. The median rent for the county is \$758 a month.

15.7% of the population lives in poverty (16,708). Per the table below there are currently a total of 978 low income apartments and 385 rent assisted apartments in the county. 55.15% of all renters are overburdened. Households who pay more than 30% of their gross income are considered to be Rent Overburdened. In Cowlitz County, a household making less than \$2,527 a month would be considered overburdened when renting an apartment at or above the median rent.

Cowlitz County, WA Affordable Housing Snapshot

Total Affordable Apartment Properties	18
Total Low Income Apartments	978
Total Rent Assisted Apartments	385
Percentage of Housing Units Occupied By Renters	34.21%
Average Renter Household Size	2.36
Total Population	102,410
Housing Units	40,244
Average Household Size	2.47
Median Household Income	\$46,571 ±\$1,366
Median Rent	\$758 ±\$17
Percentage of Renters Overburdened	55.15% ± 3.04pp

Source: <https://affordablehousingonline.com/housing-search/Washington/Cowlitz-County#guide>

Klickitat County

Klickitat County has a population of 20,318. There are 8,327 households in the county with an average household size of 2.34 persons. 29.57% of households in Klickitat County are renters.

The median gross income for households in Klickitat County is \$46,368 a year, or \$3,864 a month. The median rent for the county is \$791 a month.

15.6% of the population lives in poverty (3,169). Per the table below there are currently a total of 305 low income apartments and 198 rent assisted apartments in the county. 44.72% of all renters are overburdened.

Households who pay more than 30% of their gross income are considered to be Rent Overburdened. In Klickitat County, a household making less than \$2,637 a month would be considered overburdened when renting an apartment at or above the median rent. 44.72% of households who rent are overburdened in Klickitat County.

Klickitat County, WA Affordable Housing Snapshot

Total Affordable Apartment Properties	7
Total Low Income Apartments	305
Total Rent Assisted Apartments	198
Percentage of Housing Units Occupied By Renters	29.57%
Average Renter Household Size	2.36
Total Population	20,318
Housing Units	8,327
Average Household Size	2.34
Median Household Income	\$46,368 ±\$3,815
Median Rent	\$791 ±\$67
Percentage of Renters Overburdened	44.72% ± 7.03pp

Source: Employment Security Department, Klickitat County Profile

Pacific County

Pacific County has a population of 21,249. 19.2% of the population lives in poverty (4,080). There are three low income housing apartment complexes which contain 34 subsidized apartments for rent in Long Beach, for example. Additional units range in distance of 12-26 miles from Long Beach.

Sources for Housing section: National Low Income Housing Coalition, The Columbian, Employment Security Department, WA, and Affordable Housing Online.

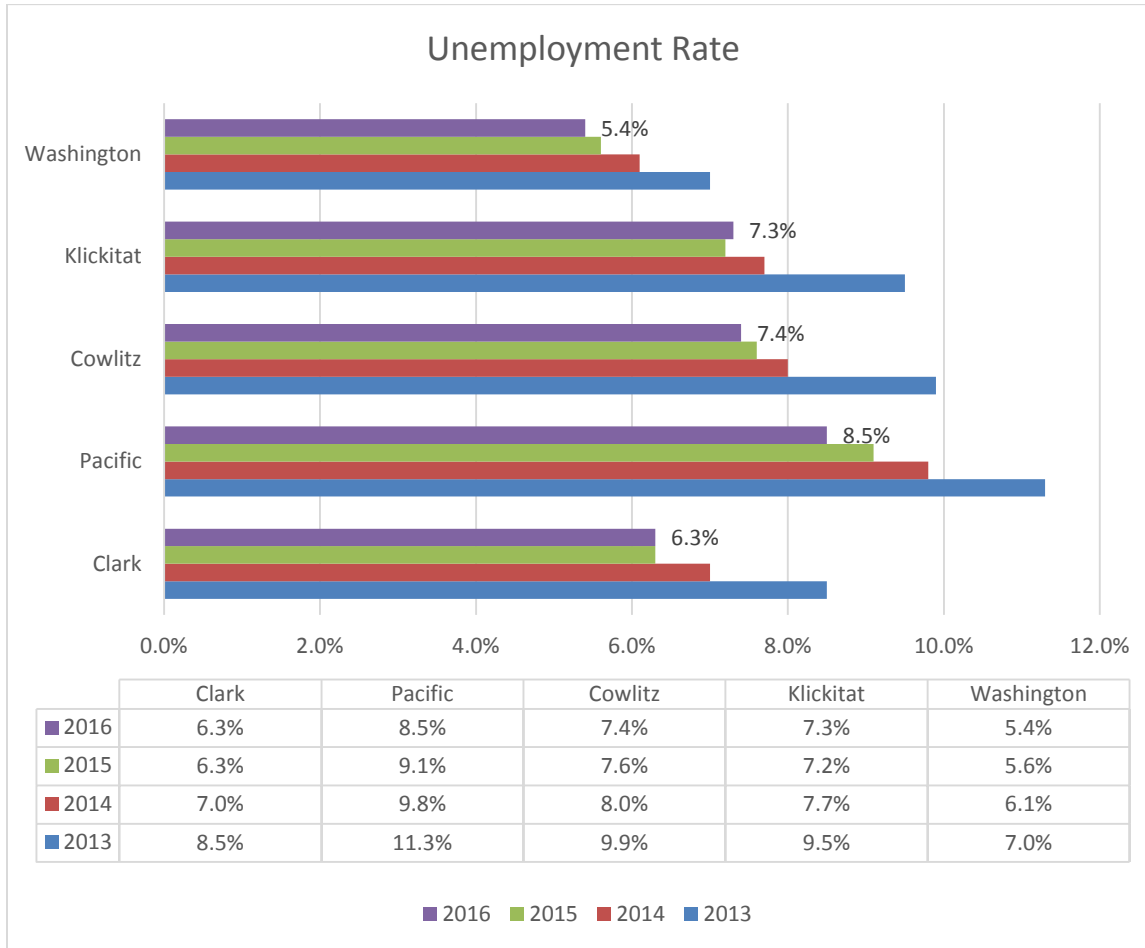
Homelessness

Homeless Count Location 2016 (2015 totals)	Total Homeless (Sheltered and Unsheltered) Households with only Minors	Chronically Homeless Individuals (Emergency Shelter, Safe Haven and Unsheltered)
Clark	369 (362)	55 (81)
Cowlitz	137 (150)	70 (59)
Klickitat	32 (33)	0 (2)
Pacific	8 (41)	16 (27)
Washington	6944 (6895)	2397 (2250)

Sources: Washington State Point in Time Count of Homeless Persons January 2016 and Washington State Point in Time Count of Homeless Persons - January 2015 & 2013

Key Findings: At the Point in Time Count of Homeless Persons in January 2016, the state of Washington identified 6,944 homeless individuals with minor children, 49 more than were identified in 2015. The total of the four counties represents approximately 7.86% of the state’s total homeless with only minors, down slightly from 2015. Pacific County had a significant drop between measures in January 2015 and 2016. At this time there were a total of 141 individuals who were identified as chronically homeless within Clark, Cowlitz, Klickitat, and Pacific counties, 28 less than were identified in 2015.

Employment



Source: Bureau of Labor Statistics, Local Area Unemployment Statistics

Key Findings: The unemployment rate for Washington State went down .2% from 2015 to 2016. Clark County stayed the same. Cowlitz went down .2%. Pacific County had the biggest decrease of .6%. Klickitat however went up .1%. All of our counties remain with a higher unemployment rate than the state average.

Median Household Income

Location	2012	2013	2014	2015
Clark	\$56,054	\$57,674	\$61,711	\$64,759
Cowlitz	\$42,752	\$44,058	\$39,635	\$38,217
Klickitat	\$44,825	\$44,274	\$48,086	\$49,806
Pacific	\$38,018	\$39,204	\$40,449	\$41,881
Washington	\$56,444	\$57,554	\$60,153	\$62,108

Source: Washington Kids Count and Bureau of Economic Analysis

Key Findings: Median household income for Clark County continues to be the only county that is slightly higher than the state average. All other counties are below the state average. Clark, Klickitat and Pacific County all saw an increase over the past year. However, Cowlitz County continued to see a decline.

Median Household Income for Families with Children

Location	2012	2013	2014	2015
Clark	\$63,158	\$65,711		
Cowlitz	\$55,608	\$60,955		
Klickitat	N.A.	N.A.		
Pacific	N.A.	N.A.		
Washington	\$65,700	\$66,500	\$69,300	\$72,500

Source: Washington Kids Count (no new information by county)

Key Findings: No new County Data. The state's median household income for families with children continues to go up slightly each year.

Child Care

Clark County - Monthly Cost of Child Care 2016

Family Child Care

County	Child Age	Median Monthly Cost	Change from 2015
Clark	Infant	\$737	+3.1% (\$715.00)
	Toddler	\$650	No change
	Preschool	\$639	-1.6% (\$650.00)
	School Age	\$477	+10.2% (\$433.00)

Child Care - Center-Based

County	Child Age	Median Monthly Cost	Change from 2015
Clark	Infant	\$1062	No change
	Toddler	\$893	-0.8% (\$901.00)
	Preschool	\$780	+1.4% (\$769.00)
	School Age	\$553	+2% (\$542.00)

Cowlitz County - Monthly Cost of Child Care 2016

Family Child Care

County	Child Age	Median Monthly Cost	Change from 2015
Cowlitz	Infant	\$650	No change
	Toddler	\$628	No change
	Preschool	\$563	No change
	School Age	\$542	No change

Child Care – Center-Based

County	Child Age	Median Monthly Cost	Change from 2015
Cowlitz	Infant	\$802	No change
	Toddler	\$693	No change
	Preschool	\$628	No change
	School Age	\$576	No change

Pacific County - Monthly Cost of Child Care 2016

Family Child Care

County	Child Age	Median Monthly Cost	Change from 2015
Pacific	Infant	\$618	+1.8% (\$607)
	Toddler	\$542	No change
	Preschool	\$520	-4.1% (\$542)
	School Age	\$520	+20.1% (\$433)

Child Care – Center-Based

County	Child Age	Median Monthly Cost	Change from 2015
Pacific	Infant	\$585	-0.5% (\$618)
	Toddler	\$607	+3.8% (\$585)
	Preschool	\$520	-4.1% (\$542)
	School Age	\$520	-4.1% (\$542)

Klickitat County - Monthly Cost of Child Care 2016

Family Child Care

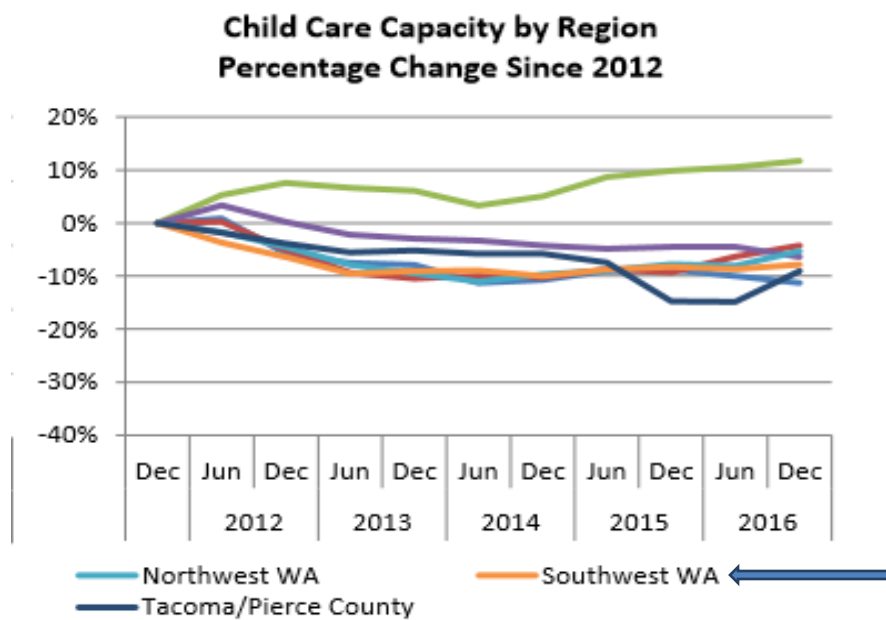
County	Child Age	Median Monthly Cost	Change from 2015
Klickitat	Infant	\$650	No change
	Toddler	\$618	No change
	Preschool	\$585	No change
	School Age	\$563	No change

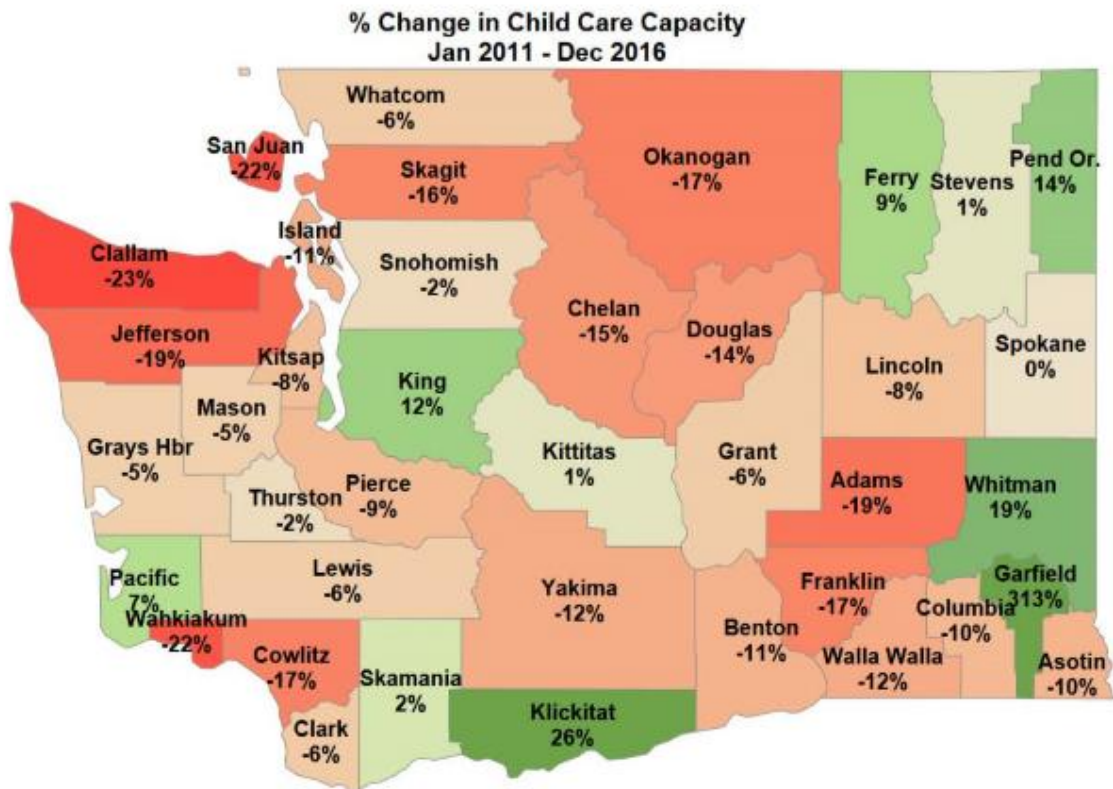
Child Care – Center-Based

County	Child Age	Median Monthly Cost	Change from 2015
Klickitat	Infant	N/A	N/A
	Toddler	N/A	N/A
	Preschool	N/A	N/A
	School Age	N/A	N/A

Key Findings: Klickitat and Cowlitz County both showed no change from last year’s median rates for child care, both center-based and family care. In Pacific County, significant changes were in center-based care facilities. Here, decreases around 4% are seen for all ages, except toddler-aged children. Family care facilities in Pacific County had the largest increase in care for school-aged children, but a decrease in toddlers. Clark County continues to have the highest median costs for both center-based and family care facilities. However, Clark County had minimal changes in costs from the previous year. The largest increase was for school-aged in family care. The minimum wage in Washington went up on January 1st, 2017, so next year’s rates may show more significant changes.

Child Care Capacity





Source: <http://wa.childcareaware.org/about-us/data/cca-of-wa-2016-child-care-data-report>

Key Findings: According to Child Care Aware of Washington, the Southwest Washington region has seen a drop in providers by about 23% and a drop in capacity of about 8-11%. Data shows that family child care facilities in particular have seen a decline in number of providers and capacity. This is a consistent trend over the years and not unexpected. Factors can include turnover, low pay and operating costs. There is still a high demand for child care, so many families struggle to find adequate care.

In Clark County, the number of child care providers has dropped from 297 with capacity for 8,799 children in 2012, to 234 providers with capacity of 8,618 children. Pacific County has stayed consistent with providers. While Klickitat shows a 26% increase in providers, this is actually only representative of one additional provider to the area. Cowlitz County has shown the largest drop in providers. The number of child care providers has dropped from 73 with capacity for 2,252 children in 2012, to 47 providers with capacity of 1,955 children. (<http://wa.childcareaware.org/about-us/data/2017-county-data-reports-1/>).

Early Start Act - Early Achievers

Early Achievers is Washington State’s quality rating and improvement system for child care. Early Achievers provides outreach, technical assistance, training and coaching to facilities that join Early Achievers. The Southwest Region has a program, Educational Service District 112 in Vancouver.

With the passage of the Early Start Act, Early Achievers became mandatory in 2016 for providers who received some sort of state subsidy for paying for child care. Working Connections Child Care is the state’s largest program for low income, working parents. Statewide, there are 3,998 child care providers participating in Early Achievers.

County	% of Enrolled Providers in Early Achievers
Clark	62%- 159 total participants
Cowlitz	70%- 38 total participants
Klickitat	60%- 10 total participants
Pacific	73%- 12 total participants

Health

Changes/Updates

Affordable Care Act (ACA).

In March 2010, the ACA was signed into law. The majority of the ACA’s provisions became effective on or before January 1, 2014 expanding Medicaid coverage to low-income adults with household incomes up to 38% higher than the federal poverty limit. While more citizens have health care, for Clark County, this brought an increase of 16,000 additional Medicaid clients.

As of December 2016, Washington has enrolled 1,810,889 individuals in Medicaid and CHIP — a net increase of 62.04% since the first Marketplace Open Enrollment Period and related Medicaid program changes in October 2013. Washington has adopted one or more of the targeted enrollment strategies outlined in guidance CMS issued on May 17, 2013, designed to facilitate enrollment in Medicaid and CHIP. Our counties did not have the health care providers or clinic infrastructure to provide care to that many more clients with reduced reimbursement for care at Medicaid rates of pay.

- ***Medical Homes Broken:*** The concept of Medical Home is still a desire and promoted; however, given the collapse of access for clients, there is a challenge creating a Medical Home in all three of our counties: Clark, Cowlitz and Pacific. Currently, Clark County has only three clinics accepting new patients. One of them is scheduling appointments as far as four months out. Pacific County has no dental providers and only one medical clinic choice, which is backlogged as well. Cowlitz County is fairing a little better; however, locations are such that families must travel up to forty miles for care.

Many clinics have suspended enrolling new clients and “capped” the number of Medicaid clients they will serve. Additionally, if families do not recertify timely, they are un-enrolled from Medicaid and must complete the initial application process again. In doing so, the clinic considers them a “new” client and blocks them from continuing care or services at their clinic. Furthermore, our largest Managed Care provider is administrated in California, is not familiar with our geographic regions and does not allow our border counties to seek care or referrals across the state line. Some of our families have primary care at different clinics for each of their children and another for themselves.

Washington’s community health centers are local, nonprofit, community-owned healthcare facilities that serve low-income and medically underserved communities. The only one we have access to is in Clark County and that is the SeaMar Community Health Centers. One challenge is that they cannot turn down new clients because they are federally backed: therefore, they are scheduling appointments four to five months out for well-child care appointments. Additionally, they are an instructional clinic for interns and have a high turnover rate. PCP’s are not assigned, and they do not have a phone or appointment system that is consistently functional. This makes appointment setting difficult, let alone ill care. Families have resorted back to inappropriately using emergency departments for general illness and not getting routine well-child care or vaccinations on set schedules. Some families refuse to go to these clinics because of poor quality of care and logistical frustrations.

Health Determinants/Barriers

Social and Economic Position (SEP). The social and economic determinants of health have gotten more challenging. Low-income families and Medicaid clients continue to face barriers to optimum health, as well as to appropriate healthcare. Common barriers to care and coverage include low health literacy, lack of knowledge of how to apply for and obtain coverage, unable to select managed care or a clinic/provider who will take new clients, over use of emergency departments, low family income, education level, language barriers, lack of permanent housing, frequent moves, lifestyle choices in reaction to stress, legal issues and limited transportation options.

Limited English Proficiency. Language barriers compromise access to consistent high quality care. The application process and managed care system is only available in English. Many times, our ESL families are unable to successfully select managed care, clinics or make appointments. They have also resorted to emergency care. Language barriers can lead to misunderstanding of diagnosis, treatment, self-care choices and follow-up care plans; inappropriate use of medications; lack of informed consent for procedures; longer hospital stays; and poor patient satisfaction. We have had some of our families with children in need of specialty care with no follow-up from the diagnosing physician and after care treatment plans are only provided in English. With the current political climate, many of our ESL families are afraid to apply or reapply for medical coverage for fear of sharing personal information possibly triggering deportation.

Early Childhood and Intergenerational Factors. Growing up in poverty or with other early life stressors might not cause immediate health consequences, but it can significantly affect an individual’s future health. In an effort to educate and bring awareness to Adverse Childhood Experiences (ACE’s), how those ultimately affect an individual’s health and how we can work with families to increase protective factors and resilience, our community has collaborated with an ACE’s Community Committee.

Continued Intervention

Comprehensive, center-based programs, such as Head Start and Early Childhood Education and Assistance Program, for children ages three through five in low-income families help prevent delays in cognitive development and increase readiness to learn. Our holistic approach that includes health services such as well-child care, immunizations, oral care, hearing and vision screenings, as well as developmental screenings, help teach the parents the link between health and school readiness. Identifying and addressing concerns and treatment needs early means that children who may have been challenged regarding their developmental potential are now healthy, learning and have improved learning outcomes. These programs also help parents provide stability and stimulation to children and strengthen their ability to meet developmental needs at home.

Food & Nutrition

Location	Infants Born Served by WIC %	Women, Infants, and Children Served	WIC Referrals
Clark	43%	16,531	153,573
Cowlitz	59%	5,799	32,813
Klickitat	47%	1,002	2,989
Pacific	63%	823	4,022
Washington	43%	293,914	1,490,204

Sources: *Washington State Department of Health*

Key Findings: WIC participation is greater than the state rate in all counties except Clark, which is the same as the state average. The total number of women, infants, and children served represents approximately 13% of the state participation rate.

**Office of Superintendent of Public Instruction National School Lunch Program
Public Schools Free and Reduced Enrollment October 30, 2016**

County/District Number	County	Public Schools	October 30, 2016 Enrollment			% of Free and Reduc
			Free	Reduced	Total	
06-037	Clark County	Vancouver School District	8,876	1,725	23,098	46%
06-098	Clark County	Hockinson School District	191	99	1,861	16%
06-101	Clark County	La Center School District	267	85	1,578	22%
06-103	Clark County	Green Mountain School District	42	23	157	41%
06-112	Clark County	Washougal School District	885	171	3,265	32%
06-114	Clark County	Evergreen School District - Clark	8,907	2,243	26,000	43%
06-117	Clark County	Camas School District	732	194	7,020	13%
06-119	Clark County	Battle Ground School District	2,649	984	13,055	28%
06-122	Clark County	Ridgefield School District	594	179	3,039	25%
		Clark County Total	23,143	5,703	79,073	36%
08-122	Cowlitz County	Longview School District	3,381	418	6,781	56%
08-130	Cowlitz County	Toutle Lake School District	171	66	657	36%
08-401	Cowlitz County	Castle Rock School District	505	87	1,246	48%
08-402	Cowlitz County	Kalama School District	279	31	989	31%
08-404	Cowlitz County	Woodland School District	803	164	2,308	42%
08-458	Cowlitz County	Kelso School District	2,301	426	5,013	54%
		Cowlitz County Total	7,440	1,192	16,994	51%
20-094	Klickitat County	Wishram School District	92	0	92	100%
20-215	Klickitat County	Centerville School District	24	8	85	38%
20-401	Klickitat County	Glenwood School District	28	1	77	38%
20-402	Klickitat County	Klickitat School District	48	0	73	66%
20-404	Klickitat County	Goldendale School District	431	75	939	54%
20-405	Klickitat County	White Salmon Valley School District	433	126	1,287	43%
20-406	Klickitat County	Lyle School District	133	29	243	67%
		Klickitat County Total	1,189	239	2,796	51%
25-101	Pacific County	Ocean Beach School District	526	90	1,038	59%
25-116	Pacific County	Raymond School District	559	0	673	83%
25-118	Pacific County	South Bend School District	414	0	554	75%
25-155	Pacific County	Naselle-Grays River Valley School District	145	32	335	53%
25-160	Pacific County	Willapa Valley School District	141	40	387	47%
25-200	Pacific County	North River School District	40	0	61	66%
		Pacific County Total	1,825	162	3,048	65%

Sources: <http://www.k12.wa.us/ChildNutrition/Reports.aspx>

Disabilities

Ages 0-2 Special Needs by Type Information – 2016

Types of Disability	Clark	Cowlitz	Klickitat	Pacific	Washington State
Asthma	1	0	0	0	13
Autism	7	0	1	0	254
Cerebral Palsy	6	2	0	0	68
Congenital Anomaly	0	6	1	0	170
Deaf	2	1	0	0	41
Developmental Delay	1	2	3	2	654
Down Syndrome	22	4	0	0	372
Epilepsy	2	3	0	0	4
Failure to Thrive	4	3	1	2	123
Fetal Alcohol Syndrome	1	0	0	0	11
Hearing Loss	12	3	1	1	370
Metabolic Disorder	1	0	0	0	3
Microcephaly	2	1	0	0	37
Neurological Impairment	0	3	0	0	39
No Diagnosis	274	212	46	21	8,702
Orthopedically Impaired	0	4	0	0	26
Other	62	27	7	7	2,008
Other Respiratory Disease	0	1	0	0	23
Prematurity	22	15	5	1	879
Severe Injury	0	0	0	0	11
Skin Disease		1	0	0	4
Spina Bifida	2	1	0	0	34
Thyroid Disorder	0	1	0	0	6
Visual Impairment	5	0	0	0	87
Totals	426	290	65	34	13,939

Source: Department of Early Learning 2016

Key Findings: The number of children with disabilities/special needs in the state of Washington has decreased slightly from 2015 to 2016. Developmental delay, Down syndrome, hearing loss and autism continue to reflect the highest percentages. The category of 'no diagnosis' has declined slightly overall county-wide, but increased by 1,068 state-wide. Children with an 'other' category of disability have slightly decreased for both the counties and state. Total disabilities from each county represent approximately 5.85% of the number of children reflected in the state data.

Special Needs by Type for Children Ages 3-5 Information – 2016

Types of Disability	Clark	Cowlitz	Klickitat	Pacific	Washington State
Autism	48	8	1	0	1,239
Communication Disordered	327	72	30	32	4,493
Deaf/Blind	0	0	0	0	1
Deaf/Hearing Impaired	13	1	1	0	169
Developmental Delayed	529	180	28	15	9,053
Emotionally/Behaviorally Disabled	0	0	0	1	13
Health Impaired	26	3	3	0	632
Intellectual Disabilities	1	1	0	0	23
Multiple Disabilities	9	1	1	0	124
Orthopedically Impaired	8	0	0	0	80
Specific Learning Disabilities	0	2	0	0	8
Traumatic Brain Injury	0	0	0	0	15
Visually Impaired	4	1	0	0	47
Totals	965	269	64	48	15,897

Source: Office of Superintendent of Public Instruction, Special Education 2016

Key Findings: The state of Washington saw an increase of 536 children with disabilities/special needs from 2015 to 2016. That is a 3.37% increase since last year's report. Developmental delay, speech and autism categories remain high for the four counties and the state. In 2016, approximately 56.9% of children being served by the state experience developmental delay disorder, 28.3% experience communication disorder, and 7.79% experience autism indicating a slight decrease from 2015.

Mental Health

Behavioral Rehabilitation Services, Youths Birth-17 (2014)

Location	Number of Clients Served	Use Rate
Clark	60	<1%
Cowlitz	10	<1%
Klickitat	<10	---
Pacific	<10	---
Washington	996	<1%

Key Findings: Behavioral rehabilitation services for youths have continued to be relatively low at less than 1% in all counties.

Mental Health Services Youths Birth-17 (2014)

Location	Number of Clients Served	Use Rate
Clark	3,346	3%
Cowlitz	1,442	6%
Klickitat	132	3%
Pacific	236	7%
Washington	45,414	3%

Source: WASHINGTON STATE DSHS Client Services Youth (Ages 0-17) STATE FISCAL YEAR 2014

Key Findings: Mental health services for youth are highest per Use Rate in Pacific County. All other counties are at the state average or higher.

Substance Abuse and Addiction

With the legalization of marijuana, youth and families are less likely to note marijuana as a drug, but marijuana use has remained stable over the past decade. Though teens cannot legally purchase recreational marijuana, the presence of retail stores changed the landscape; however, use rates for teens has held steady from 2014 to 2016. The use of heroin by youth is rising. Their addiction with heroin typically begins with unsupervised prescription pain medication. Ten years ago it was rare to see youth that would inject drugs. Since the rise of opiate addiction IV it is gaining popularity in youth drug using populations. Misuse of prescription drugs remained stable as well between 2014 and 2016 as does the perceived risk by teens, per the 2016 Washington State Healthy Use Survey.

However, substance abuse rates remained mostly stable from 2014 to 2016. While general stability between 2014 and 2016 is encouraging, the results also suggest a need to further support prevention efforts to build on past successes and address areas of continued concern, such as driving under the influence of health disparities.

Alcohol and Substance Abuse - Youths 0-17	Number of Clients Served	Percentage
Clark	480	0.4%
Pacific	44	1.2%
Woodland	4	0.3%
Cowlitz	209	0.8%

Source: Department of Behavior and Health Resources, within DSHS 2012

ACEs-Adverse Childhood Experiences: Drinking and illicit drug use in Washington State is included in ACEs higher risky health behavior scores. Substance abuse is included in the category of household dysfunction in this assessment process. From the Foundation for Healthy Generations (2015) greater than six (6) adults are nine times more likely to experience life dissatisfaction and 4.6 times more likely to suffer chronic disease and engage in risky behaviors.

According to the 2020 Cowlitz Community Report Card (2016) the ACEs research shows that while the average life span of a child born today is 80 years, a child who has six (6) or more adverse childhood experiences on average will find their life span reduced to 60 years. Drugs and/or alcohol problems are noted as intergenerational ACE transmissions. In Pacific County 27 percent of adults experience three (3) or more ACES (reference Adverse Childhood Experiences).

Impact on Children Served: For the program year 2016-2017, EOCF data shows that out of three (3) families that requested assistance with substance abuse prevention, two (2) families have been provided with substance abuse assistance. Five (5) families requested treatment information and eleven (11) families received substance abuse treatment. Four (4) referrals were given to EOCF families for tobacco use (based on current PIR information). ESD 112 is showing that they are currently serving 15.7 percent of ECEAP families experiencing substance abuse. State average for ECEAP is eight (8) percent.

Available Services for Chemical Dependency

County	Inpatient	Outpatient
Clark	2 (one of which serves youth)	21 (6 serve youth and adults; 1 serves youth only)
Cowlitz	2 (only serving adults)	9 (3 serve youth and 3 serving correctional)
Pacific	2 (only serving adults)	7 (1 serves Native Americans, 1 serves youth corrections and 1 serves youth services)

Source: Directory of Certified Services in Washington State 9/2014

Treatment Admissions - Heroin 2010				Opioid Trends 2002-2013	
County	1999 Count	2010 Count	2010 rate per 100,000	Publicly funded treatment admissions 2002-4/2011-13 /Inc. % (annual rate per 100,000)	Deaths attributed to any opiate 2002-4 / 2011-13/ increase % (annual rate per 100,000)
Cowlitz	119	336	329.5	117.3/250.1/113%	10.3/17.9/73.9%
Clark	113	714	165.3	48.5/167.8/246%	5/7.9/57.9%
Pacific/Wahkiakum	10	31	122.4		
Pacific Only				62.7/289.8/362.1%	Nothing noted

Clark County

According to the 2015 Community Health Assessment regarding drug related deaths (2010) indicators show a worsening trend of males slightly higher (per 100,000). Community themes and strength assessment shows that mental health and substance abuse treatment are noted as an identified problem.

Cowlitz County

Referring to the 2020 Cowlitz Community Report Card (2016):

The Cowlitz Family Health Center and the Drug Abuse Prevention Center announced early in 2015 that they were merging primary care and treatment for drug and alcohol addiction and these integrated approaches are incorporated with the Lower Columbia Mental Health and the Cowlitz Tribe. This 2020 report card also shows that continued increases of alcohol and drug related mortality rates have risen steadily from 2001-2013 at 36.7 to 47.5 (per 100,000) compared to the state numbers 22.3-28.2 during that same time frame.

County	6 th Grade Tried marijuana/ binge drinking	8 th Grade Tried marijuana/ binge drinking	10 th Grade Tried marijuana/ binge drinking	12th Grade Tried marijuana/ binge drinking
Clark	1% / 3%	8% / 5%	19% / 12%	27% / 20%
Cowlitz	1% / 3%	9% / 10%	18% / 23%	26% / 34%
Pacific	2% / 2%	7% / 2%	23% / 13%	28% / 20%
Statewide	% / 2%	7% / 5%	18% / 11%	27% / 19%

Source: Healthy Youth Survey information:

<http://www.doh.wa.gov/DataandStatisticalReports/DataSystems/HealthyYouthSurvey>

The Washington State Healthy Youth Survey (HYS) is administered in schools statewide every two years to collect data from students about their alcohol and other drug use, and other behaviors that impact their health, safety and success. This data is analyzed and used to track trends and prioritize prevention resources. The 2012 HYS data show that:

- More than 115,000 students ages 12-17 use alcohol regularly.
- Nearly one in five 12th graders (19%) said they have been drunk or high at school.

- About one in five students rode in a car with a driver who had been drinking.
- Marijuana use among 10th graders (19%) and 12th graders (27%) is almost double the percentage who smoke cigarettes.
- Over 100,000 students (12-17 year olds) seriously considered suicide in the past year (about one in every six students).

The good news is that prevention programs are helping youth make healthy choices and encouraging parents to support these choices: From 2010 to 2012, 11,000 fewer youth in Washington drank alcohol.

- Since 1998, drinking among 8th and 10th graders has dropped by half, and use among 6th graders has dropped from 14% to 2.5%.
- More students report that their parents talk with them about the risks of using alcohol and other drugs.

While these results are very promising, there is much more work to be done. The need for prevention programs is also identified through Risk and Protection Profiles for Washington communities, developed by the DSHS Division of Research and Data Analysis.

Source: *Washington State Healthy Youth Survey:* <https://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/substance-abuse-prevention-and-mental-health-promotion>

Transportation

In January 2017, C-TRAN launched the region's first bus rapid transit system, The Vine. The Vine uses larger buses, level boarding platforms and other features in order to:

- Reduce travel time
- Improve reliability; and
- Control costs

The Vine costs less to operate than the service it replaced. The Vine saves riders up to 10 minutes on each trip and the service frequency increases to 10 minutes per trip in the peak hours compared to 15 minutes on the old Route 4.

The Vine connects downtown Vancouver with the Vancouver Mall to the east, serving Clark College and Fourth Plain Boulevard businesses along the way. It also provides a unique identity with 34 stations that will offer passengers a safe, secure and reliable transit experience, all while improving the visual and economic climate of the corridor by supporting not only transit riders, but our community as well. The Vine was constructed with existing local, state and federal funds; which means no tax increase was needed to fund it.

Other than the Vine, there are no significant changes in transportation this year.

Source: (<http://www.thevine.c-tran.com>)

Languages/Cultural Characteristics

Clark County

Clark County's Racial/Ethnic Demographics for 2014 were:

- White*: 81%
- Hispanic: 7.6%
- Asian*: 4.1%
- Two or more races*: 3.3%
- Black*: 1.9%
- American Indian/Alaska Native*: 0.7%
- Pacific Islander*: 0.6%

*Race groups are non-Hispanic.

Language Spoken at Home: In 2015, 85.6% of residents over age five spoke English at home. Fourteen percent spoke a language other than English at home. Forty-one percent of the people who spoke a language other than English at home speak English *less than* "very well" (24,151). The languages spoken were:

- Indo-European: 5.2%
- Spanish: 5.4%
- Asian/Pacific Islander: 3.4%
- Other: .3%

Cowlitz County

Cowlitz County's Racial/Ethnic Demographics for 2015 were :

- White*: 85.8%
- Hispanic: 7.8%
- Asian*: .14%
- Two or more races*: 2.9%
- Black*: .6%
- American Indian/Alaska Native*: 1.3%
- Pacific Islander*: 0.6%

*Race groups are non-Hispanic.

Language Spoken at Home: In 2014 ninety-three percent speak English. The most common non-English language is:

- Spanish: 4.6%
- Indo-European: 1%
- Asian/Pacific Islander: 1.1%

Klickitat County

Klickitat County's Racial/Ethnic Demographics for 2014 were:

- White: 83.8%
- Hispanic: 10.7%
- American Indian, Alaskan Native: 2.1%
- Asian, Native Hawaiian, Other Pacific Islander: .6%
- Two or more races: 2.4%
- Hispanic or Latino, any race: 10.7%

Language Spoken at Home: In 2015 the number of residents over age five who spoke English was 89.6%.

Other non-English languages:

- Spanish: 6.9%
- Indo-European: 1.2%
- Asian/Pacific Islander: .9%
- Other: .2%

Pacific County

Pacific County's Racial/Ethnic Demographics for 2015 were:

- White Non-Hispanic alone (84.6%)
- Hispanic or Latino (8.0%)
- Two or more races (2.9%)
- American Indian and Alaska Native alone (2.0%)
- Asian alone (2.0%)

Language Spoken at Home: In 2015 English was spoken by 89.6% of residents over age five.

- Spanish: 7.5%
- Asian-Pacific Islander: 1.8%
- Indo-European: .7%
- Other: .4%

Source: Census Bureau, 2015 ACS 5-year Estimate

Final Note

The comprehensive 2011-13 Community Assessment is available on the EOCF website: <http://www.eocfwa.org> for complete information and data on all aspects of Southwest Washington Communities in the counties served by EOCF, ESD 112 and Innovative Services NW.

Collaborative work on the 2018-2020 Comprehensive Community Assessment is scheduled to begin in the fall of 2017.