

Kent County Community Action Community Needs Assessment

2023



Vision

Kent County Community Action unifies the county to eliminate poverty and build inclusive and equitable communities for individuals and families to live, work, and play.

Mission

We strive to assist Kent County individuals, families, and communities to achieve lasting economic security and move out of poverty.

Developing Communities. Expanding Opportunity. Improving Lives.

Values

- Compassion
- Advocacy
- Belonging
- Integrity
- Hope
- Collaboration

2023 KCCA Governing Board Members

- Tony Baker, County Commissioner
- Ivan Diaz, County Commissioner
- Kelsey Perdue, City Commissioner
- Stephen Wooden, County Commissioner
- Milinda Ysasi, City Commissioner

2023 KCCA Advisory Governing Board Members

- Catherine Aldridge, Consumer Sector
- James Geisen, Public Sector
- Samarhia Giffel, Public Sector
- Kendrick Heinlein, Consumer Sector
- Krashawn Martin, Public Sector
- Kim Moore, Consumer Sector
- Hattie Patterson, Consumer Sector
- Reyna Quinto, Consumer Sector
- Jean Ramos, Private Sector
- Wende Randall, Private Sector
- Christopher Smith, Public Sector
- Christina Swiney, Private Sector
- Tricia Lynn VanderHaar, Private Sector
- Daniel VanderMolen, Private Sector
- Jessica White-Hatinger, Public Sector

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Message from the Director



I am incredibly grateful and humbled to have been selected as the new director of Kent County Community Action (KCCA) in December 2022. Since then, I have immersed myself in all things Community Action. The process of creating this community needs assessment has been an incredible opportunity to learn more about KCCA and our community's needs. I look forward to collaborating with our staff and community partners to address report findings as we grow and evolve together.

KCCA's mission is to assist Kent County individuals, families, and communities to achieve lasting economic security and move out of poverty. Our vision is to unify the county to eliminate poverty and build inclusive and equitable communities for individuals and families to live, work, and play. To demonstrate our enduring commitment to residents and the broader community, KCCA embarked on a comprehensive needs assessment in 2023. This assessment will help us find ways to improve our existing services and identify where we may be able to expand programming to address unmet needs.

What the findings tell us:

- Increasing costs of housing, transportation, and basic needs are making it harder for people to get by.
- One-quarter of Kent County households are housing-cost burdened, spending 30 percent or more of their income on housing.
- There aren't enough affordable housing units available for the people who need them.
- People continue to rely on food assistance, especially since some pandemic supports have ended.

The causes of poverty and instability are complex and interrelated—housing, employment, education, race, and gender are among many factors that play a role. KCCA strives to develop a service model with each of these factors in mind, and we hope to build on the recommendations presented in this assessment to guide our work. This includes developing and strengthening relationships in our community to meet more needs and reduce inequities that hold people back. KCCA also seeks to help people beyond emergency needs so that they can find lasting stability. This can only be achieved through authentic partnership with other service providers and community organizations.

I would like to thank everyone involved in the development of this assessment and for those who shared their stories with us. I would also like to thank you for reading this report and for your interest in and commitment to improving our community's well-being.

Gustavo Perez

Gustavo Perez
Director, Kent County Community Action

Kent County Community Action 2023 Community Needs Assessment



EXECUTIVE SUMMARY

This is an overview of the process, findings, and recommendations from the 2023 Kent County Community Action Community Needs Assessment.

PURPOSE

KCCA completes a needs assessment every three years to find gaps in serving the community, identify solutions, and adjust its programs and services to meet new needs. This can help bring new resources into the community.

WHAT WE DO

KCCA works to eliminate causes and circumstances of poverty, invests in individuals and families with low incomes, and provides help with assistance services for food, utilities, housing, and transportation.

WHAT WE DID

KCCA hired Public Sector Consultants (PSC) to conduct a community needs assessment with help from the Dorothy A. Johnson Center for Philanthropy at Grand Valley State University. For the assessment, PSC:

1. Collected county, state, and national data
2. Convened an advisory committee
3. Surveyed 1,034 community members and 62 social service providers
4. Facilitated community forums and interviewed experts

WHAT WE LEARNED

Increasing costs of housing, transportation, and basic needs create challenges for low-income residents, especially People of Color.

WHAT KCCA CAN DO

Help relieve these costs through providing services and referrals to services, coordinating with community partners, and advocating for policies that support people experiencing poverty to help them become self-sufficient.

BY THE NUMBERS

MEDIAN HOUSEHOLD INCOME

for a family of four

\$72,782 SURVIVAL BUDGET¹

\$67,789 KENT COUNTY

\$55,385 GRAND RAPIDS

UNEMPLOYMENT RATES

6% in Kent County overall

10% Unemployment rate for **Black or African American people** in Kent County

14% Unemployment rate for **Black or African American people** in Grand Rapids



61,801

The number of households in Kent County that are housing-cost burdened, spending 30% or more of their annual income on housing

1 IN 3 PEOPLE

surveyed identified transportation as a top need

1 IN 3 HOUSEHOLDS

live within the ALICE or poverty thresholds, making it difficult to afford basic needs¹

85%

of Kent County residents do not have adequate broadband access at home



Education and income are connected—higher education is associated with a lower likelihood of experiencing poverty



Grand Rapids residents are uninsured at higher rates than the county and state

¹ALICE—or asset-limited, income-constrained, employed—is a term developed by the United Way to describe those who may live above the federal poverty guidelines but still struggle to afford the basic costs of living in their community. United Way calculates the survival budget using the cost of basics such as housing, food, health, transportation, and child care.

RECOMMENDATIONS

The following recommendations are based on the input from community members, service providers, the advisory committee, as well as other research.

Reduce inequity

Partner with community organizations to serve those with the highest level of need and greatest structural barriers across all phases of programs and services

Expand population served

Find ways to help more people living close to the poverty line who still are not making ends meet

Bring partners together

Grow KCCA's ability to serve people by working with service providers throughout the county

Ensure all client needs are met

Work with clients and other service providers to help people create more lasting change beyond emergency needs

SERVICE-BASED RECOMMENDATIONS



Housing

- Advocate to keep existing affordable housing and add more affordable units
- Continue to play an important part in getting more people into housing of their choice through partnerships with organizations throughout the county



Income and finances

- Identify community partnerships to strengthen support for job preparation and placement
- Continue to offer services like utility assistance and tax preparation that help people and families struggling to make ends meet



Education and employment

- Build partnerships with workforce development organizations and local community colleges to promote training opportunities for growth industries
- Consider finding new ways to support families so that more students graduate from high school



Food and nutrition

- Continue to support access to nutritious food and remain engaged with Kent County Food Policy Council



Transportation

- Consider using unrestricted funds to support car repair or maintenance for residents
- Continue advocating for expansion and improvement of current public transportation systems and consider bringing together a group focused on these efforts



Safety

- Prioritize funding projects that improve neighborhood and public safety



Health and healthcare

- Find ways to help more people navigate benefits they qualify for
- Consider supporting healthcare and prescription costs and identify where to find funding to support such efforts
- Consider participating in Kent County Health Department's Family and Children's Coordinating Council, including taking part in the health department's upcoming community health assessment

Introduction

KCCA conducted a community needs assessment (CNA) in 2022–2023, as required by the Community Services Block Grant (CSBG), that meets federal guidelines, builds a framework that can provide opportunities for interactive conversations, and creates avenues for change within Kent County and among its partners. The goals of this type of assessment are to:

- Assess service gaps and identify resources to address needs
- Determine if a particular program is needed
- Support organizational strategic planning
- Develop program priorities
- Support the need for funding
- Assist with program evaluation

For the CNA activities, KCCA hired Public Sector Consultants (PSC)—a nonpartisan research and evaluation firm based in Lansing, Michigan—to help conduct the assessment. KCCA and PSC adhered to the CSBG Organizational Standards¹ for completing this work, including:

- Collecting information directly from low-income individuals (Organizational Standard 1.2)
- Using information collected from key sectors of the community (Organizational Standard 2.2)
- Collecting current data specific to poverty as it relates to age, gender, and race (Organizational Standard 3.2)
- Analyzing quantitative and qualitative data on Kent County (Organizational Standard 3.3)
- Presenting key findings on causes and conditions of poverty in the community (Organizational Standard 3.4)
- Securing formal acceptance of the assessment from its governing board (Organizational Standard 3.5)

KCCA and community stakeholders can use the data presented in this report to inform strategic planning discussions and identify priority areas.

¹ Community Action Partnership. 2015. *Center of Excellence Developed CSBG Organizational Standards*. Washington D.C.: Community Action Partnership. Accessed April 24, 2023. <https://communityactionpartnership.com/wp-content/uploads/2018/07/OSCOE-Developed-Standards-Separated.pdf>

Process

The CNA included the following main activities:

- Convening an advisory committee that included individuals who work in human service agencies serving Kent County such as the KCCA Advisory Board, the KCCA Governing Board, and staff members
- Collecting and analyzing county, state, and national data
- Conducting a community survey for KCCA clients, providers, and the broader community
- Facilitating community forums that engaged KCCA staff, clients, and other participants
- Conducting individual interviews with key service partners and consumers
- Presenting a final report to the KCCA Advisory and Governing Boards for approval

Advisory Committee

An advisory committee was created to ensure a collaborative process in partnership with those who best understand KCCA and community needs. The advisory committee convened twice throughout the duration of the needs assessment process. The committee met once at the onset of the assessment (January 2023) to share feedback on existing services, areas for improvement, and future implementation strategies for meeting poverty-reduction goals. This meeting also introduced the community surveys and forums and initiated outreach efforts to encourage completion of surveys and participation in forums. KCCA asked committee members to support outreach efforts by identifying strategies for distributing both survey tools to intended audiences and brainstorming engagement strategies for the community forums.

The committee met again after data collection activities had closed to discuss the results. The second advisory committee meeting included an overview of findings from the county, state, and national data, as well as a report on the survey results and feedback from the community forums and interviews. The group reviewed the identified needs and underlying contributing factors of poverty and compared the results to existing services to identify gaps.

Goals of the advisory committee:

- Support the direction of the community needs assessment
- Generate conversations among community stakeholders on tackling poverty in Kent County

Roles of the advisory committee:

- Provide feedback on data collection approaches
- Identify areas of outreach for community forums and surveys
- Identify recommendations for addressing community needs
- Participate in committee meetings
- Provide feedback on the final report and recommendations

The advisory committee included members of the KCCA staff leadership, members of the Advisory Governing Board, and other service providers. The following individuals were members of the advisory committee.

- Rachel Ahee, KCCA
- Alyssa Anten, Salvation Army
- Chad Coffman, KCCA
- Sherrie Gillespie, KCCA
- Ashley Huey, KCCA
- Rachel Kunnath, KCCA
- Emily Madsen, Kent County Essential Needs Task Force
- Lisa McKinney, KCCA
- Hattie Patterson, Consumer Sector
- Gustavo Perez, KCCA
- Kimberlee Reinking, KCCA
- Christopher Smith, Western Michigan University
- Morgan Zielke, KCCA

County, State, and National Data

KCCA partnered with the Dorothy A. Johnson Center for Philanthropy (the Johnson Center)—an academic center within Grand Valley State University’s Center for Scholarly and Creative Excellence—to collect data on demographics, poverty, income, employment, health, nutrition, housing, business, transportation, and education. Data on age, gender, race, and ethnicity was aggregated.

Data was collected from external sources at the county, state, and national levels to support the findings from the community survey data on key information. The data was compiled by the Johnson Center and analyzed by the Johnson Center and PSC. Extensive amounts of quantitative data were gathered to make comparisons across Kent County, Grand Rapids, Michigan, and the United States to identify trends over time.

Data was collected from the following sources:

- U.S Census Bureau
- U.S. Census Bureau’s American Community Survey
- Feeding America
- Greater Regional Alliance of REALTORS
- National Low Income Housing Coalition
- Grand Rapids Area Coalition to End Homelessness
- United for ALICE
- MI School Data
- Kent County Community Action
- Bowen National Research
- Dorothy A. Johnson Center for Philanthropy at Grand Valley State University

Community Survey

KCCA distributed a survey to community members to better understand their needs and how to address them. The survey contained 23 questions and gathered information on the following:

- Demographic information
- Education
- Employment
- Food and nutrition
- Health and healthcare coverage
- Household information
- Income
- Individual needs
- Neighborhood safety
- Poverty
- Quality of life
- Service delivery and access
- Transportation

The survey was available in both electronic and paper formats in English and in Spanish. The survey was available from February 3, 2023, to March 21, 2023. To encourage participation, respondents had the opportunity to win a \$50 utility credit (provided by KCCA) if they completed the survey and separately entered the drawing. This ensured survey responses remained anonymous. A unique number was assigned to each respondent in each pool of eligible participants, and a random number generator was used to select one individual per week for the drawing.

KCCA and other community organizations distributed the surveys. KCCA engaged clients in person at their office buildings, during site visits, and during scheduled program events such as food distribution events. Paper surveys were collected by partner organizations across the county and distributed in food boxes by KCCA. KCCA staff entered paper survey responses into an online form, so all responses were analyzed together. The survey was also made available on the KCCA website and social media platforms. A total of 1,034 individuals completed the survey. The full community survey is available in Appendix C.



In the winter, KCCA hosts "Walk for Warmth," a fundraiser helping to keep the heat on for families in Kent County who have received a utility shutoff notice for gas, electric, and deliverable fuels like propane. It is part of a statewide effort to raise awareness and funds.

Service Provider Survey

KCCA leveraged its extensive network and partnerships to gather feedback from other service providers in the county to better understand the current landscape and how these organizations are addressing community needs. The survey contained 14 questions and gathered information on the following:

- Organization description
- Services provided
- Communities served
- Unmet needs
- Desired services
- Barriers to service access
- Upcoming community needs

The survey was available online and distributed through direct email communications by KCCA staff. It was sent to 450 community partners and service providers. The survey was available from February 3, 2023, to March 27, 2023. Survey responses were received from 62 individuals, representing 52 organizations. The full provider survey is available in Appendix D.

Community Forums and Interviews

KCCA planned and promoted two community forums, one in person on February 22, 2023, and the other virtual on March 2, 2023. The purpose of the community forums was to gain a better understanding of how community members view poverty and how it could be addressed in Kent County. KCCA promoted each event by distributing physical flyers, promoting the event on their website and social media channels, and inviting clients and partners directly. KCCA worked with PSC to develop directed questions to elicit meaningful and productive responses aimed at informing KCCA's current and future programming and resources to address these identified needs.

The in-person community forum was intended to be co-facilitated by PSC in person at the KCCA offices. However, PSC was unable to attend this session due to an ice storm and facilitated virtually instead. Three service providers attended along with four KCCA staff. The virtual session also coincided with inclement weather and was not attended by community members or service providers other than KCCA staff.

In an effort to get more feedback from community members and service providers, PSC recommended completing five one-on-one interviews with service providers and community members. Individual 30-minute interviews were conducted with three service provider organizations and two community members who have received KCCA services. KCCA recommended these individuals to provide feedback on service needs, gaps in existing services, and future challenges for Kent County. PSC conducted interviews during the first two weeks in April. Interviewers asked service provider organizations a series of questions focused on their current responsibilities, service limitations, services in which they specialize, ability to meet the needs of their community, and anticipated community needs in the coming years. Interviewers asked community members about service organizations' ability to meet their needs, services they have accessed, challenges they have faced throughout the past year, and whether the available services have helped them overcome these challenges.

Key Findings and Recommendations

Key findings and recommendations about the factors related to poverty in Kent County emerged after comparing local, state, and federal data; reviewing the community and provider survey results; and hearing from KCCA staff, a community needs assessment (CNA) advisory committee, and community forum and interview participants (Organizational Standard 3.4). Some of the recommendations are meaningful to all KCCA's programming, and some are specific to a certain type of service.

Key Findings from the Community Profile

The following community data highlights from the community profile can help KCCA ensure it sets priorities and allocates resources to serve the community's current needs.

- Most Kent County and Grand Rapids demographics (e.g., race, age, gender) did not change significantly from the previous CNA conducted in 2019.
- **Language:** Spanish is the second most common primary language in Kent County; it is the primary language of 7 percent of Kent County residents.
- **Poverty:** Poverty is more concentrated in Grand Rapids than in Kent County overall.
 - A higher percentage of Grand Rapids residents (19 percent) are living below the federal poverty level compared to those in Kent County (10 percent).
 - In Kent County, an estimated 33 percent of households live within asset-limited, income-constrained, employed (ALICE) or poverty thresholds. ALICE is a term developed by the United Way to describe those who may live above the federal poverty guidelines but still struggle to afford the basic costs of living in their community.
 - Between 2017 and 2021, the percentage of Kent County residents living below the poverty threshold decreased regardless of race or ethnicity. However, that decrease was smaller among Black or African American residents (decrease of two percentage points) than among other People of Color (Hispanic or Latino decreased eight percentage points, and two or more races decreased ten percentage points).
- **Income:** The median household income in Grand Rapids (\$55,385) and Kent County (\$67,789) is lower than the survival budget calculated for a Michigan household of two adults, one infant, and one preschooler (\$72,792).²
 - White residents, regardless of location (Grand Rapids, Kent County, or Michigan), have higher median household incomes than all other races and ethnicities.
 - The unemployment rates in Grand Rapids (6 percent) and Kent County (5 percent) are similar to Michigan (6 percent) and the United States (5 percent). However, residents who are Black or

² As a foundation of the ALICE research, the United Way calculates a survival budget for Michigan, which includes the costs of basics, such as housing, food, health, transportation, and child care.

African American are unemployed at higher rates than other races and ethnicities, 14 percent in Grand Rapids and 10 percent in Kent County.

- **Education:** Regardless of location (Grand Rapids, Kent County, or Michigan), as educational attainment increased, the percentage of residents living below the poverty line decreased.
- **Broadband access:** Residences without broadband access are concentrated in Kent County's northern and eastern townships, and people without current broadband access identified cost as the top barrier to service.
- **Health insurance:** Kent County residents have health insurance coverage at similar rates to Michigan residents within the same age group; however, Grand Rapids residents across all age groups are uninsured at higher rates.

Key Findings from the Community Survey

The community survey was broadly distributed throughout Kent County by service providers as well as through Kent County's formal communications and social media tools, and 1,034 people responded. The survey results represent the needs and perspectives of Kent County residents. These results should be used in combination with the community profile and qualitative input from discussion group and interview participants to inform decision making about policies and programs designed to serve Kent County residents.

- Respondents provided information on the types of challenges or issues they are experiencing.
 - Forty-five percent of respondents said they experienced income or financial challenges, and nearly 30 percent said they experienced challenges with utilities or home repair and maintenance, mental health, and physical health.
 - Around 20 percent were challenged by healthcare and health insurance issues, food or nutrition issues, and dental care issues.
 - Between 10 percent and 15 percent reported issues with employment, transportation, neighborhood safety, caring for an aging or disabled family member, housing, social or family support, and child care.



In 2022, KCCA distributed over 84,000 boxes of food, valued at over \$1,835,000 and weighing 1,481,053 pounds (over 740 tons).

- Respondents described the specific needs and challenges they are experiencing by area of need.
 - **Income:** A larger percentage of Hispanic or Latino respondents (61 percent) and African American or Black respondents (56 percent) than white respondents (40 percent) experienced income and finance challenges.
 - **Healthcare:** Of respondents with healthcare challenges in the previous 12 months, two-thirds (67 percent) said service costs were too high, and more than half said prescription costs were too high (54 percent).
 - **Food security:** Respondents with a food or nutrition challenge in the previous 12 months relied on food pantries (41 percent) or were unable to meet their households' food needs (39 percent).
 - **Employment:** Top reported employment-related challenges were lack of jobs (27 percent), individuals' mental or emotional health (26 percent), and limited or no transportation (24 percent). Other employment-related challenges were limited or no training or education for the available jobs (17 percent) and physical disability (17 percent).
 - **Transportation:** Top transportation challenges for survey respondents included unreliable vehicles or vehicles in need of repair (39 percent), fuel costs (32 percent), and lack of access to a vehicle (31 percent).
 - **Neighborhood safety:** Of those who reported concerns with neighborhood safety, more than half (55 percent) said that their neighborhood feels unsafe, and one-third (33 percent) each said they felt unsafe due to missing or broken infrastructure, and because there was not enough police presence in their neighborhood.
 - **Housing:** Survey respondents reviewed services and identified which ones they use compared to which ones they need. Top services identified as high need but low use were all housing related. These services included home repairs/housing rehabilitation (27 percent would benefit from, 4 percent used within the last 12 months), rental or mortgage assistance (22 percent would benefit from, 2 percent used within the last 12 months), and weatherization assistance (17 percent would benefit from, and 2 percent used within the last 12 months).
 - **Service access:** The top reported barrier to accessing services was that income is too high to qualify (45 percent).

Key Findings from the Provider Survey

The Kent County service provider survey was distributed to over 300 providers and received 62 responses from a variety of types of service providers, including housing, healthcare, food and nutrition, transportation, and education.

- Providers consistently identified housing and housing-related needs as both a top need and a top unmet need in the community.
 - The largest percentage of service providers who said their organization was unable to meet client demand were those providing housing assistance services (80 percent).

- The most requested services are housing choice vouchers or other housing assistance (41 percent), and over a third (36 percent) request rental or mortgage assistance.
- About two-thirds (64 percent) of providers indicated housing as one of the top three critical needs in the area.
- When asked to predict the community's top needs over the next three to five years, most providers identified housing (64 percent).
- Outside of housing, providers reported that nonmedical transportation assistance is one of the most requested services (39 percent).
- The other critical needs providers identified besides housing included transportation (33 percent), food (25 percent), child care (19 percent), and mental health services (17 percent).
- Providers identified the top barriers to accessing services as waitlists or service capacity limits (61 percent), lack of awareness of services (54 percent), or transportation to services (52 percent).

Key Findings from the Community Forums and Interviews

Community forum and interview participants provided more nuanced input about the community's needs than other data collection methods. The following were key findings from those conversations.

- Housing challenges were the top concern raised by forum participants and interviewees. Challenges included lack of affordable housing units, lack of housing for populations such as older adults and people with disabilities, and poor housing conditions of many renters with no way to hold landlords accountable.
- Participants reported that public transportation is perceived to be unreliable or unable to meet their needs—especially for those who need to travel outside of the “six-city” core service area of the Interurban Transit Partnership/The Rapid.³ Challenges included bus schedules being inconvenient, public transportation routes not being close enough to a person's destination, and people not qualifying for services like medical transportation. These barriers have led people to rely on their own or somebody else's vehicle, which can cause additional challenges.
- Participants also unanimously raised child care as a significant challenge in the community. Child care challenges impact many residents' ability to secure or maintain employment. Specifically, concerns were raised about affordability, lack of providers offering coverage outside of the traditional workday, and no backup care options.
- Mental health service needs were also a concern raised in these conversations. Specific concerns raised included limited insurance coverage and limited access to services.
- The service providers who participated acknowledged the importance of KCCA's application assistance for those in need of emergency services.

³ The six municipalities in the core service area include Grand Rapids, East Grand Rapids, Kentwood, Wyoming, Grandville, and Walker.

Recommendations

The following are recommendations for KCCA's consideration based on all methods of data collection. Several of the recommendations relate to all of KCCA's programming. These include ensuring equity is woven throughout KCCA programs and services, continuing to find ways to serve more and new people, convening community partners and participating in more of the existing community partnerships on issues relevant to KCCA's mission, and ensuring clients who receive KCCA services complete an in-depth needs assessment and receive services to meet all of their needs, either from KCCA or through referrals to other community providers.

Other recommendations are specific to services supporting people experiencing poverty or financial instability. Contributors to poverty and instability are complex and interrelated—housing, education, employment, race, gender, and more all play a role. This emphasizes the importance of the recommendations below, which emphasize the need for community partnerships, screening for all needs, making referrals to other providers, providing wraparound care, and providing support for ALICE households. Many of these families could easily dip into poverty with even small changes in their situation.

Reduce Inequity

Since the 2019 CNA, systemic inequities and their negative impacts have been examined more closely.

-  KCCA should ensure equity is woven throughout all phases of its programs and services. Where there are gaps in KCCA's ability to meet needs, KCCA should partner with community organizations to serve those with the highest level of need and greatest structural barriers across all phases of programs and services.

Expand Service Population

Data highlighted later in this report points to how poverty continues to impact many individuals and families in Kent County. It also reveals how many more households are living precariously close to poverty, but above the federal poverty guidelines, also known as ALICE households.

-  KCCA should continue to find ways to serve more and new people, recognizing the eligibility guidelines for many services do not meet all needs. While federal poverty guidelines or other qualifying criteria are used to determine program eligibility and are outside of KCCA's influence, KCCA can seek additional, unrestricted funding that would help meet the needs of ALICE households.

Convene Partners

Addressing poverty requires a multifaceted approach and a mixture of direct services and community initiatives. KCCA cannot accomplish everything required to eliminate poverty on its own. It also has long-standing relationships with service providers and those it serves through its current programs. As a result, KCCA is well positioned to strengthen its coordination with other service providers in the county as well as to be a convener where gaps exist.

- 👉 KCCA should identify and prioritize existing human service partnerships to join and consider convening providers and advocates on topics for which more coordination would be helpful. Some examples of specific existing partnerships or coalitions are named in the sections below.

Ensure All Client Needs Are Met

- 👉 KCCA should consider providing more robust case management and wraparound services by working with clients to obtain the resources needed to prevent future emergency financial crisis. One way to do this would be to identify and systematize more comprehensive client needs assessments.

One of the needs identified by service providers and the community is mental health care. While this is not a service KCCA provides, the agency could offer more in-depth needs assessments and, when assessing a client's (or household's) need, mental health screenings could be included and services and supports coordinated when appropriate.

With more comprehensive case management services, KCCA could help people work toward permanent resolution of their crises. Many clients would benefit from more supportive intervention to help them navigate accessing services, which often have long, complicated, and confusing processes. By screening for needs beyond a person's presenting emergency, it may be possible to help address the root of a person's challenges.

Another reason to consider providing more wraparound case management services and screening for needs is that some people will lose critical benefits expanded during the COVID-19 pandemic. During the federal COVID-19 public health emergency (PHE), many programs relaxed requirements so that more people qualified and kept services during an uncertain time. Many people who have been receiving public food support or public healthcare because of these expansions will no longer be eligible, even though their income won't change. This year already, the additional COVID-19 food assistance emergency allotment ended, causing food assistance to significantly decrease for most people who qualify. Roughly 1.3 million

Michiganders received these extra benefits, an estimated \$95 more per month—about 13 percent of the state's population (MDHHS 2023). During the PHE, Medicaid paused redeterminations, the process to ensure people who receive benefits are still eligible. In June 2023, Medicaid will return to requiring redeterminations, which may cause 591,100 people in Michigan to lose Medicaid coverage over the next year (Burns et al. 2023).



KCCA volunteers and staff packed food distributions for Kent County residents in need. In 2022, KCCA distributed over 84,000 boxes of food.

Service-specific Recommendations

Housing

Housing—including affordability, availability, and quality—was raised as a top need throughout the CNA data collection methods. Coordinating with others in this space, considering ways to provide mortgage assistance, advocating for retaining existing affordable housing as well as adding more units and preventing evictions are all key elements KCCA could focus on.

-  KCCA should continue to participate in or lead councils, action teams, and other groups whose mission is to address housing insecurity. It should also continue to provide resources to partners in the community who do this work.

Kent County and the City of Grand Rapids have several programs to provide rental assistance; however, assistance for homeowners—including mortgage assistance, home repair, and rehab—is extremely limited. Better meeting this community's need could contribute to housing stabilization in the county.

-  KCCA should identify if there are more programs that can provide supports for homeowners, including mortgage assistance and home repair and rehab, and consider how unrestricted funds could be secured for this use.

According to Kent County's 2022 Housing Needs Assessment, the county needs 34,699 new housing units by 2027 (Bowen National Research 2023).

-  KCCA should advocate for the preservation of existing and additional affordable housing.

Although Michigan enacted an eviction moratorium during the COVID-19 pandemic, it ended in July 2022.

-  KCCA should continue to participate in partnerships aimed at eviction prevention and continue to provide direct services that support housing stability.

Income and Finances

A household's income and finances depend on other factors like race, sex, education, access to services (e.g., transportation and technology), and more. Additional wraparound case management could ensure people receive the public supports for which they qualify, helping them become more independent, especially as root causes of challenges like mental health struggles or limited educational opportunities are addressed.

-  KCCA should continue to offer utility assistance, tax preparation services, and other services that can relieve households struggling to make ends meet.
-  KCCA should strengthen community partnerships for more client referrals related to job preparation and placement.

Education and Employment

Community survey respondents identified that a contributing factor to unemployment is that people lack the training and skills for the jobs available.

-  KCCA should partner with workforce development organizations and local community colleges to promote training opportunities for growth industries. Many programs offer low- or no-cost training to interested individuals to meet the needs of Michigan's evolving economy.
-  KCCA should consider ways to support families through its programming to improve high school graduation rates (at a minimum in educational attainment) because it can support a person's ability to be self-sustaining.

Food and Nutrition

-  KCCA should continue to support access to nutritious food. More people may rely on additional food support, such as food distribution and food pantries, because of recent reductions to many households' food assistance allotments as well as the rising costs of food.
-  KCCA should remain engaged with the Kent County Food Policy Council, a committee of the Essential Needs Task Force.

Transportation

Workers in Kent County highly depend on personal vehicles for transportation. This is due, in part, to limited or nonexistent public transportation beyond the six cities as well as limited transportation services other than medical transportation. Because of this, people are beholden to higher transportation costs than in areas with more useful public transportation options.

-  KCCA should consider pursuing unrestricted funds to support vehicle repair or maintenance and consider joining with community partners who can help meet this need.
-  KCCA should consider convening or joining an existing group focused on transportation to help ensure transportation challenges are not a barrier for employment or for people to access housing, food, or other basic needs. It would be especially helpful to support expansion of existing services or create new services that would help people with nonmedical transportation where public transportation is not an option.

Neighborhood Safety

Kent County residents who took the community survey cited missing or broken infrastructure as a reason they feel unsafe in their neighborhood.

-  KCCA should consider prioritizing projects that improve public and neighborhood safety.

Health and Healthcare

Community survey participants who had healthcare challenges flagged costs of care and prescriptions as their top two challenges.

-  KCCA should consider if strategically supporting costs of care and prescriptions in the future would be helpful and what new funding might be needed to accomplish this. KCCA should also consider helping people navigate health insurance options and ensure they are enrolled in all the services for which they qualify, such as Medicare, Medicaid, discount programs, and others.
-  KCCA can consider participating in the Kent County Health Department's Family and Children's Coordinating Council to be more connected to providers in the community addressing social determinants of health.
-  KCCA should participate in and monitor the county health department's upcoming community health needs assessment and consider ways to integrate findings into KCCA services and screenings.

Community Profile

Sources

The following community profile highlights key insights about residents in Kent County from publicly available data. Sources include the following local, state, and federal entities.

- U.S Census Bureau
- U.S. Census Bureau’s American Community Survey
- Feeding America
- Greater Regional Alliance of REALTORS
- National Low Income Housing Coalition
- Grand Rapids Area Coalition to End Homelessness
- United for ALICE
- MI School Data
- Kent County Community Action
- Bowen National Research
- Dorothy A. Johnson Center for Philanthropy at Grand Valley State University

Topics

The profile is organized into the following categories.

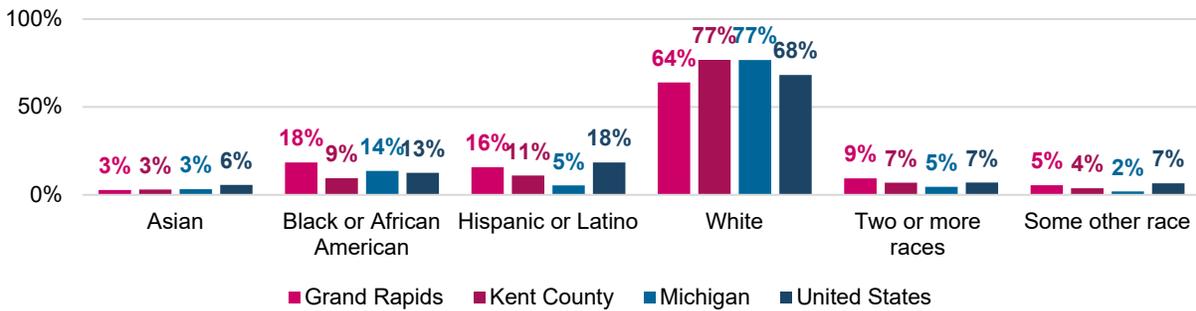
- Population overview
- Education
- Employment
- Income
 - Poverty threshold
 - Asset Limited, Income Constrained, Employed (ALICE) threshold
- Mental health
- Healthcare coverage
- Food security
- Housing
 - Housing costs
 - Homelessness
 - COVID Emergency Rental Assistance
- Transportation
- Broadband access

Population Overview

Kent County is home to an estimated 654,958 residents who live within its 21 townships, five villages, and nine cities. Kent County’s largest city—Grand Rapids—is an estimated population of 197,858. Throughout this community profile, Grand Rapids and Kent County data is compared to Michigan and the United States, with estimated populations of 10,062,512 and 329,725,481, respectively. (U.S Census Bureau 2021w).

Community members in Kent County and Grand Rapids have a similar racial breakdown as the state overall across several demographic groups. Grand Rapids has fewer white residents when compared to Kent County and Michigan but has a higher percentage of residents who are Black, Hispanic or Latino, two or more races, or some other race. Kent County has a lower percentage of Black residents than Grand Rapids and the state (Exhibit 1).

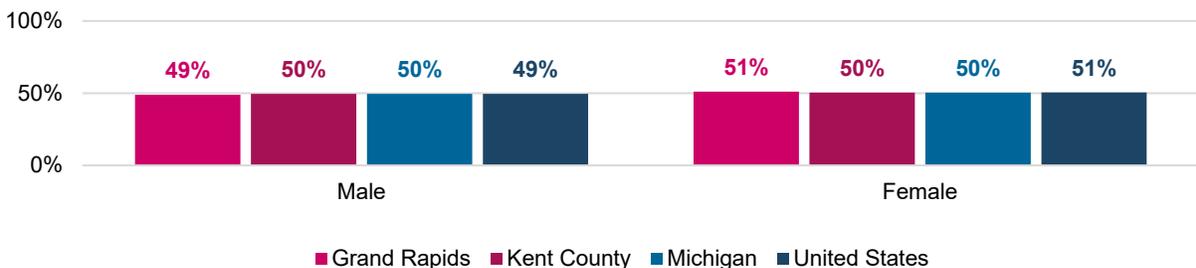
EXHIBIT 1. Race and Ethnicity by Geographic Area, 2021



Note: For purposes of this community profile, American Indian and Alaska Native and Native Hawaiian and other Pacific Islander categories are included in the “some other race” category due to small populations.
 Source: U.S. Census Bureau 2021w

The distribution of male and female residents in Kent County and Grand Rapids closely mirrors those of Michigan and the United States (Exhibit 2).

EXHIBIT 2. Sex by Geographic Area, 2021



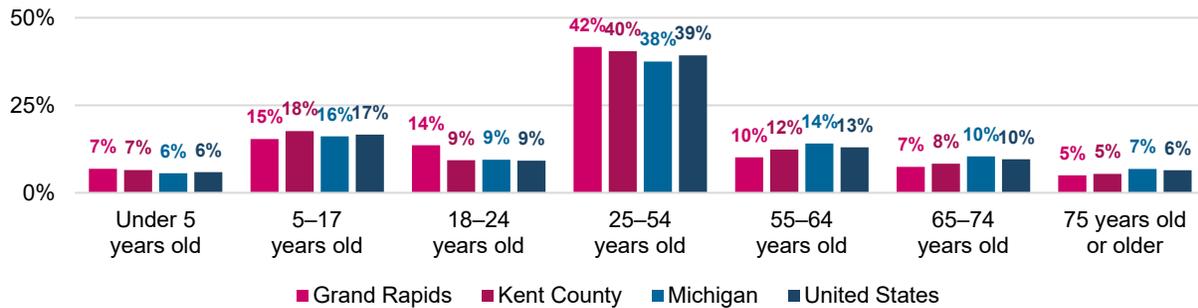
Source: U.S. Census Bureau 2021m

A slightly larger percentage of Grand Rapids and Kent County residents are between the ages of 25 and 54 years old than in the state overall. A slightly smaller percentage are over the age of 65. Additionally, there is a larger percentage of Grand Rapids residents between the ages of 18 and 24 years old than in either Kent County or Michigan (Exhibit 3).



Participants enjoyed a photo booth at a congregate meal celebrating Older Americans Day in 2022.

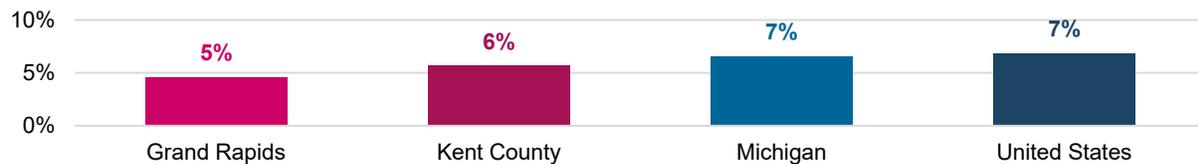
EXHIBIT 3. Age by Geographic Area, 2021



Source: U.S. Census Bureau 2021m

Compared to Kent County, the City of Grand Rapids has a lower percentage of residents who are veterans. Kent County has a lower percentage of veterans than Michigan and the United States (Exhibit 4).

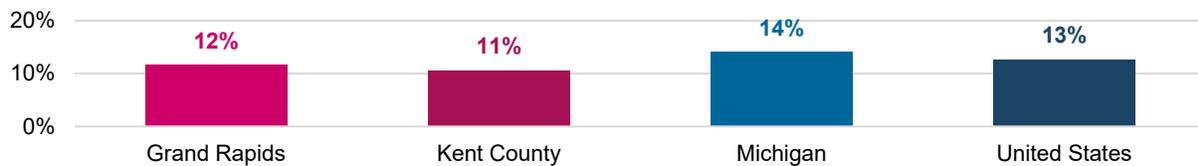
EXHIBIT 4. Percentage of Veterans by Geographic Area, 2021



Source: U.S. Census Bureau 2021aa

Kent County and Grand Rapids have a lower percentage of residents living with a disability than Michigan and the United States (Exhibit 5).

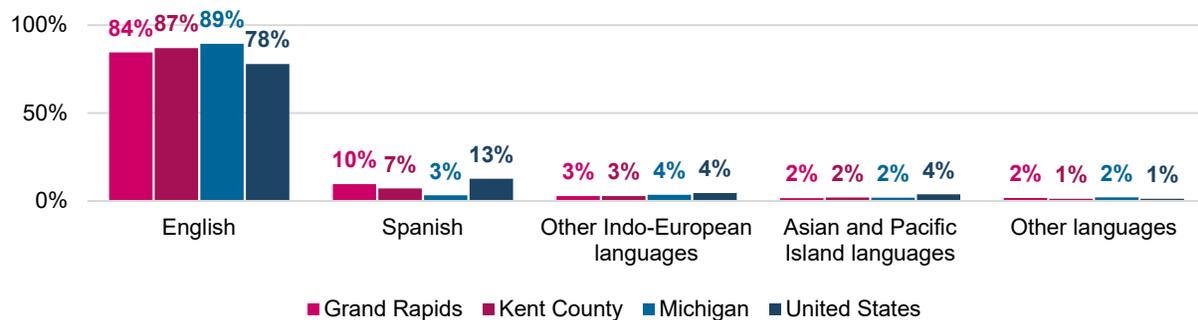
EXHIBIT 5. Percentage of People Living with a Disability by Geographic Area, 2021



Source: U.S. Census Bureau 2021n

Most Grand Rapids and Kent County residents speak English as their primary language. These percentages are similar to those of the state overall, but slightly higher than the United States (Exhibit 6).

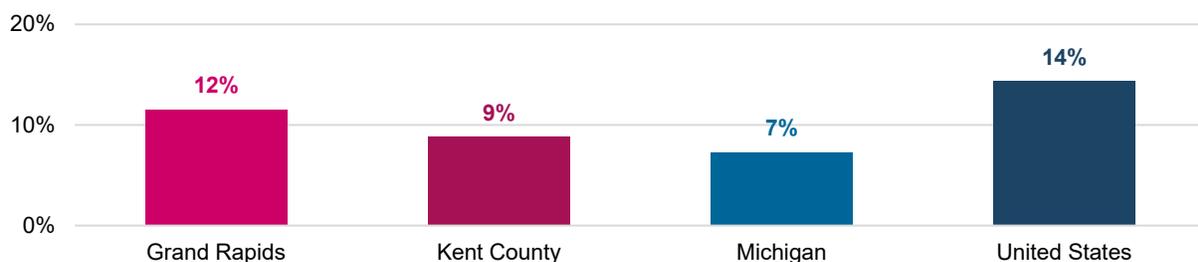
EXHIBIT 6. Primary Language by Geographic Area, 2021



Source: U.S. Census Bureau 2021q

Twelve percent of Grand Rapids residents and 9 percent of Kent County residents were born in a foreign location. This is higher than the percentage of foreign-born residents living in Michigan by two percentage points but lower than the United States by two percentage points (Exhibit 7).

EXHIBIT 7. Foreign-born Residents by Geographic Area, 2021

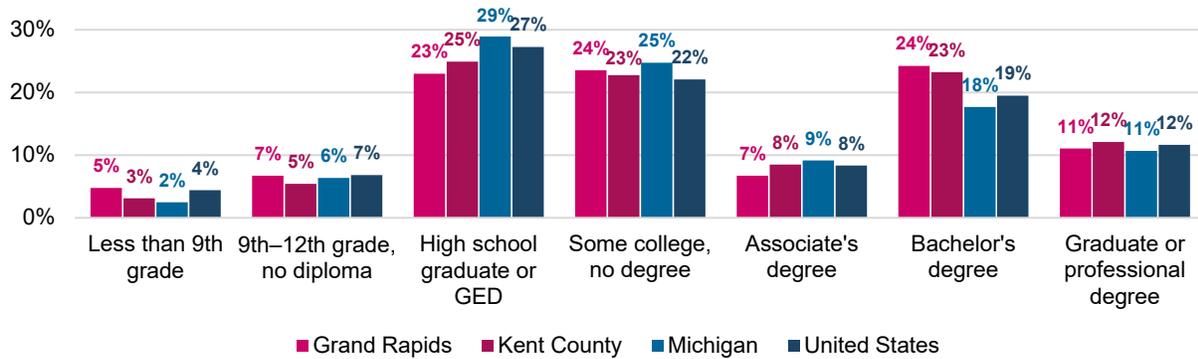


Source: U.S. Census Bureau 2021u

Education

A larger percentage of Grand Rapids and Kent County residents have a bachelor’s degree or higher than in the state overall, 35 percent compared to 29 percent. The percentage of individuals with some college or an associate’s degree is slightly higher in Michigan than in Grand Rapids and Kent County, 34 percent compared to 31 percent. The percentage without a high school diploma is highest in the City of Grand Rapids (Exhibit 8).

EXHIBIT 8. Educational Attainment by Geographic Area, 2021



Source: U.S. Census Bureau 2021o

A larger percentage of white Kent County residents have at least some college (71 percent) than those of any other race or ethnicity. This is followed by Asian and Black or African American residents at 58 percent each. In comparison, only 39 percent of Hispanic or Latino residents have at least some college education. Asian residents have the highest percentage of those with a bachelor's degree or higher at 43 percent, followed closely by white residents (Exhibit 9).

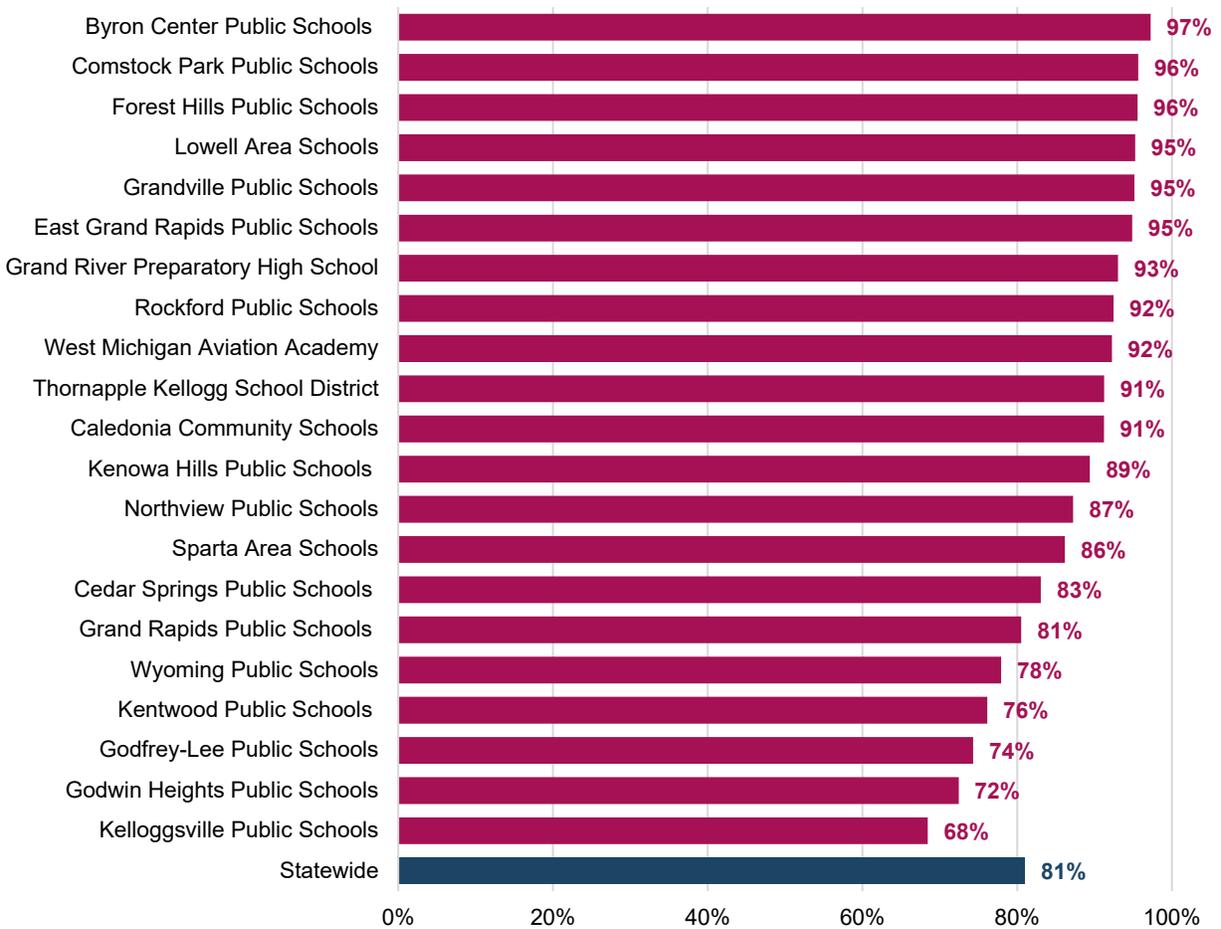
EXHIBIT 9. Educational Attainment in Grand Rapids and Kent County by Race and Ethnicity, 2021

Race or Ethnicity	Grand Rapids	Kent County	Race or Ethnicity	Grand Rapids	Kent County
Less Than High School Graduate			Some College or Associate's Degree		
Asian	19%	24%	Asian	18%	15%
Black or African American	14%	12%	Black or African American	34%	36%
Hispanic or Latino	42%	34%	Hispanic or Latino	20%	22%
White	7%	5%	White	27%	30%
Two or more races	24%	16%	Two or more races	26%	29%
High School Graduate or GED			Bachelor's Degree or Higher		
Asian	18%	17%	Asian	45%	43%
Black or African American	32%	30%	Black or African American	20%	22%
Hispanic or Latino	24%	27%	Hispanic or Latino	13%	17%
White	19%	23%	White	46%	41%
Two or more races	26%	28%	Two or more races	24%	28%

Source: U.S. Census Bureau 2021e

Data for the high school graduation rate is provided for a four-year cohort of students who graduated in 2022. More than two-thirds of Kent County school districts have an on-time graduation rate that matches or exceeds the state rate of 81 percent. This includes Grand Rapids Public Schools. Among the school districts with 100 or more students in the cohort, Byron Center Public Schools has the highest rate at 97 percent, and Kelloggsville Public Schools has the lowest at 68 percent (Exhibit 10).

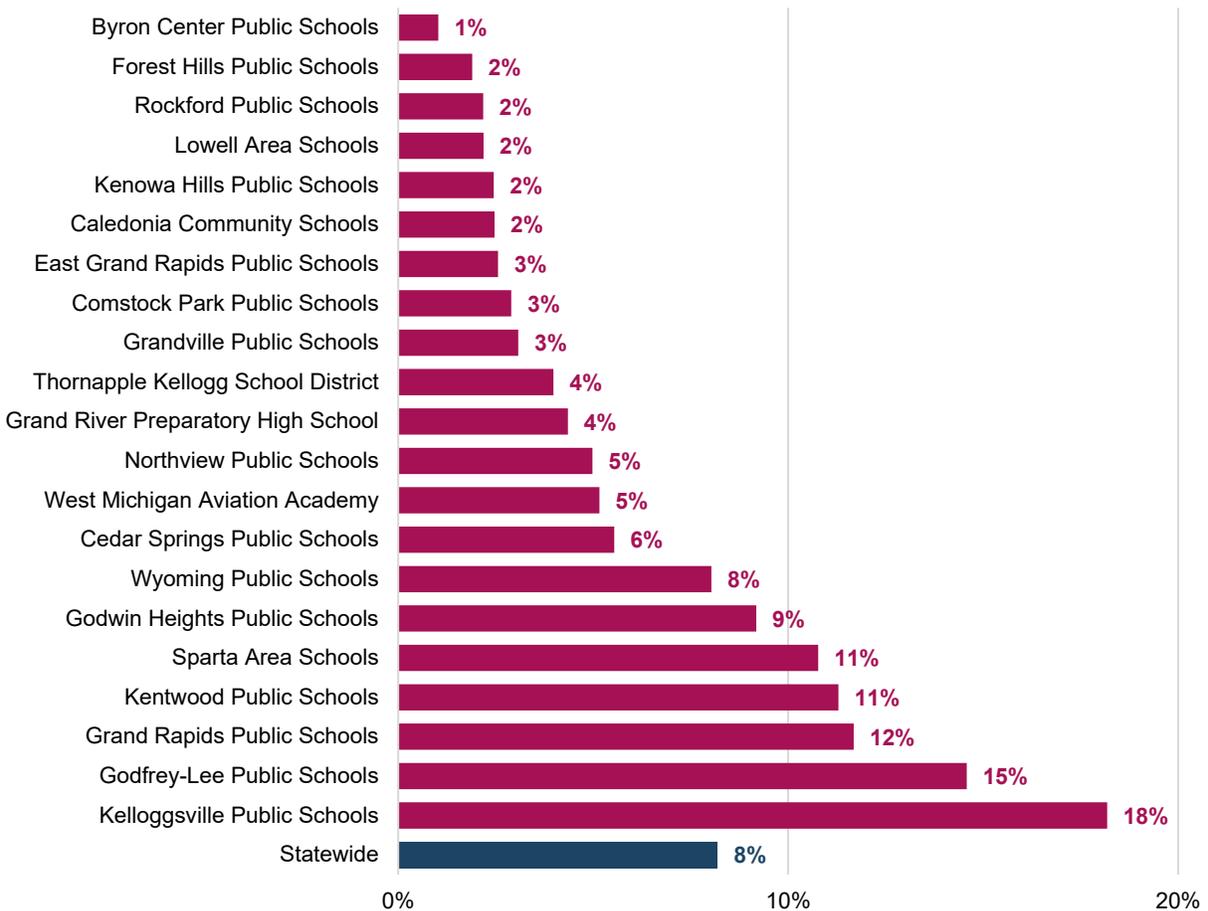
EXHIBIT 10. Graduation Rate for Kent County School Districts, 2021–2022



Note: Showing graduation rates for school districts with 100 or more students in the cohort.
 Source: MI School Data 2022

Among the school districts with at least 100 students in their cohort, 29 percent have a dropout rate higher than the state overall.⁴ Byron Center Public Schools has the lowest dropout rate at 1 percent and Kelloggsville Public Schools has the highest at 18 percent (Exhibit 11).

EXHIBIT 11. Dropout for Kent County School Districts, 2021–2022



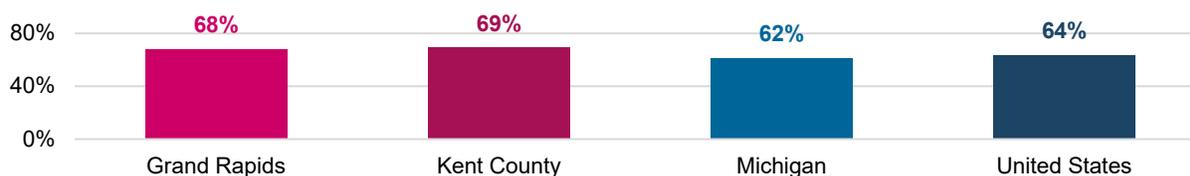
Note: Data shown is for a four-year cohort of students who graduated in 2022. Showing graduation rates for school districts with 100 or more students in the cohort.
 Source: MI School Data 2022

⁴ The graduation and dropout rates may not equal 100 percent, and the schools with the lowest graduation rates may not have the highest dropout rates. This is because graduation and dropout rates are calculated using students who enter school at ninth grade and graduate on time or permanently leave; students who are off-track continuing or those who achieve an alternative, such as a GED, are not counted in these rates (Center for Educational Performance and Information 2021, <https://www.michigan.gov/cepi/-/media/Project/Websites/cepi/MSDS/FAQs-of-Michigans-Cohort-Graduation-and-Dropout-Rates.pdf?rev=95ec76b5503c414db0b18c06d46f13de&hash=AE6D758FE6D104CB1846437B61123F26>).

Employment

More than two-thirds of Grand Rapids and Kent County residents aged 16 and older are employed, a higher percentage than the state overall (Exhibit 12).

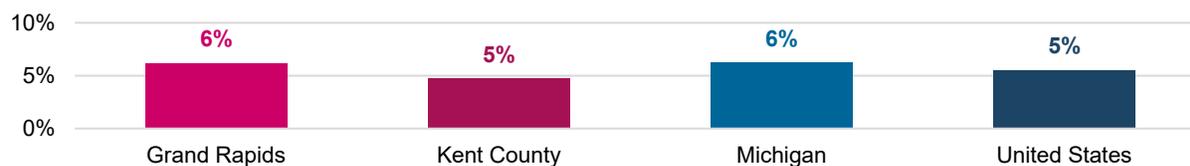
EXHIBIT 12. Percentage of Those 16 Years and Older in the Labor Force by Geography, 2021



Source: U.S. Census Bureau 2021x

At 5 percent, the unemployment rate in Kent County is slightly lower than that of Grand Rapids and Michigan (Exhibit 13).

EXHIBIT 13. Percentage of Those Unemployed by Geography, 2021



Source: U.S. Census Bureau 2021x

Across racial and ethnic groups, unemployment rates in 2021 are the highest for Black or African American residents in both Grand Rapids and Kent County. Unemployment rates for males and females are similar, though women with children under 6 years old have the highest unemployment rate in Kent County and Grand Rapids (5 percent and 9 percent, respectively) compared to men and women without children, or with children older than six (U.S. Census Bureau 2021x).

In Kent County, the unemployment rate for people with disabilities is 7 percent, compared to 10 percent among Grand Rapids residents. Additionally, unemployment rates have an inverse relationship with educational attainment in both Grand Rapids and Kent County—people with higher levels of education have lower rates of unemployment. The unemployment rate for people living below the federal poverty threshold is 21 percent in Kent County and 23 percent in Grand Rapids (Exhibit 14).

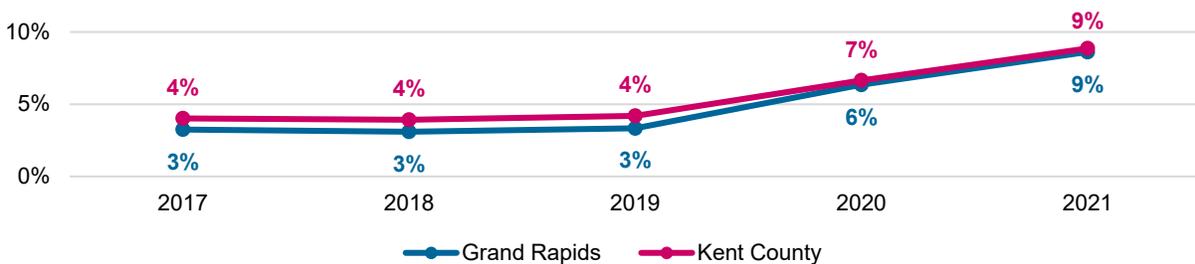
EXHIBIT 14. Unemployment Rates in Grand Rapids and Kent County by Demographic Characteristics, 2021

	Grand Rapids	Kent County
Sex		
Male	6%	4%
Female	6%	4%
Race and Ethnicity		
Asian	6%	5%
Black or African American	14%	10%
Hispanic or Latino	8%	6%
White	4%	4%
Two or more races	8%	8%
Disability Status		
With a disability	10%	7%
Poverty Status		
Below federal poverty threshold	23%	21%
Educational Attainment		
Less than high school	11%	8%
High school graduate or equivalent	7%	5%
Associate's degree or some college	7%	4%
Bachelor's degree or higher	2%	2%

Source: U.S. Census Bureau 2021x

The percentage of workers working from home has increased in Grand Rapids from 3 percent in 2017 to 9 percent in 2021. The percentage working from home in Kent County saw a similar increase from 3 percent to 9 percent (Exhibit 15).

EXHIBIT 15. Percentage of People in Grand Rapids and Kent County Working from Home Over Time, 2017–2021



Source U.S. Census Bureau 2021c

Income

The median household income in Kent County is higher than the median income in Grand Rapids—\$69,786 compared to \$55,385 (Exhibit 16).

EXHIBIT 16. Median Household Income by Geography, 2021



Source U.S. Census Bureau 2021s

Median household income is lowest for Black or African American residents in both Grand Rapids and Kent County. It is highest among white residents. Median income is also higher among householders between the ages of 25 and 64 years old than among those under 25 and those 65 and older (Exhibit 17).⁵

EXHIBIT 17. Median Household Income in Grand Rapids and Kent County by Race and Age, 2021

	Grand Rapids	Kent County
Race and Ethnicity		
Asian	\$56,866	\$73,896
Black or African American	\$36,724	\$38,704
Hispanic or Latino	\$45,434	\$55,781
White	\$63,716	\$74,862
Two or more races	\$42,527	\$48,282
Age		
Householder under 25 years	\$42,636	\$42,191
Householder 25 to 44 years	\$66,393	\$77,134
Householder 45 to 64 years	\$60,994	\$86,118
Householder 65 years and over	\$39,815	\$47,822

Source U.S. Census Bureau 2021s

⁵ Householder is a term used by the U.S. Census meaning the person in whose name the housing unit is owned or rented. If it is owned or rented jointly, it could be either person. There is one householder per household.

Poverty Threshold

Poverty is interrelated with factors related to demographics, education, employment, and health. Each year, the federal government issues federal poverty guidelines that are used to determine eligibility for a number of government assistance programs. Exhibit 18 shows the weighted average thresholds for 2021 based on family size.

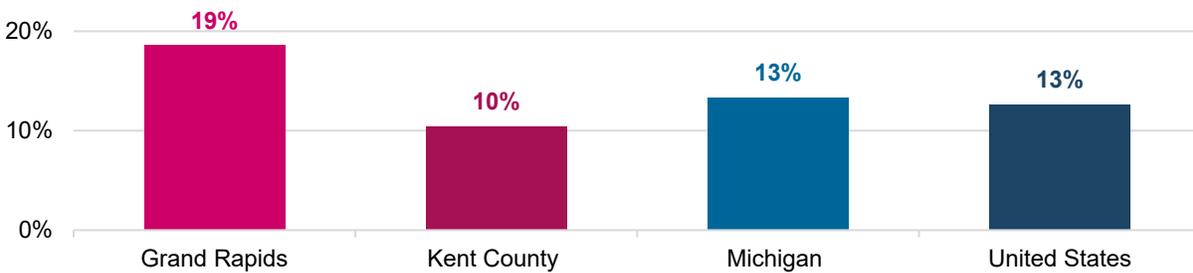
EXHIBIT 18. Federal Poverty Threshold by Family Size, 2021

Weighted Average Threshold	
One person	\$13,788
Two people	\$17,529
Three people	\$21,559
Four people	\$27,740
Five people	\$32,865
Six people	\$37,161
Seven people	\$42,156
Eight people	\$47,093
Nine or more people	\$56,325

Source: U.S. Census Bureau 2023

Ten percent of Kent County residents are living below the poverty line, which is a lower percentage than both Michigan and the United States. The percentage of Grand Rapids residents living below the poverty line is higher at 19 percent (Exhibit 19).

EXHIBIT 19. Percentage of Population Living Below the Poverty Line by Geographic Area, 2021



Source: U.S. Census Bureau 2021d

The percentage of females living below the poverty line is higher than that of males in both Grand Rapids and Kent County. A larger percentage of Grand Rapids residents live below the poverty line when compared to those of the same race or ethnicity living in Kent County. Additionally, a larger percentage of Black or African American or Hispanic or Latino residents live in poverty than those of other races. The percentage of children living below the poverty line in Kent County is higher than the percentage in any of the adult age groups.

In both Grand Rapids and Kent County, as educational attainment increased, the percentage of residents living below the poverty line decreased. For example, 18 percent of Kent County residents with less than a high school degree live below the poverty line, compared to 13 percent of those with a high school diploma or GED, 8 percent of those with some college or an associate's degree, and 4 percent of those with at least a bachelor's degree (Exhibit 20).

EXHIBIT 20. Percentage of Population Living Below the Poverty Line by Demographic, 2021

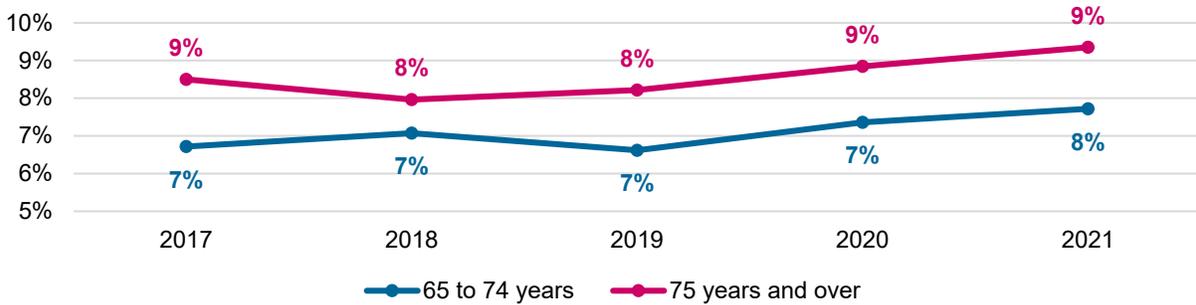
	Grand Rapids	Kent County
Sex		
Female	20%	12%
Male	17%	9%
Race and Ethnicity		
Asian	15%	6%
Black or African American	29%	26%
Hispanic or Latino	30%	21%
White	14%	8%
Two or more races	27%	18%
Age		
Under 5 years	26%	14%
5 to 17 years	25%	13%
18 to 24 years	28%	18%
25 to 54 years	14%	9%
55 to 64 years	15%	8%
65 to 74 years	12%	8%
75 years and over	16%	9%
Educational Attainment		
Less than high school	27%	18%
High school graduate or GED	23%	13%
Associate's degree or some college	13%	8%
Bachelor's degree or higher	5%	4%

Source: U.S. Census Bureau 2021d; U.S. Census Bureau 2021v

Trends Over Time

Over time, the percentage of those below the poverty line has decreased across all age groups in Kent County, with the exception of residents over age 65. As illustrated in Exhibit 21, there has been a slight increase in the percentage of these older adults living below the poverty line between 2017 and 2021. Among those aged 75 and older, the increase was less than one percentage point.

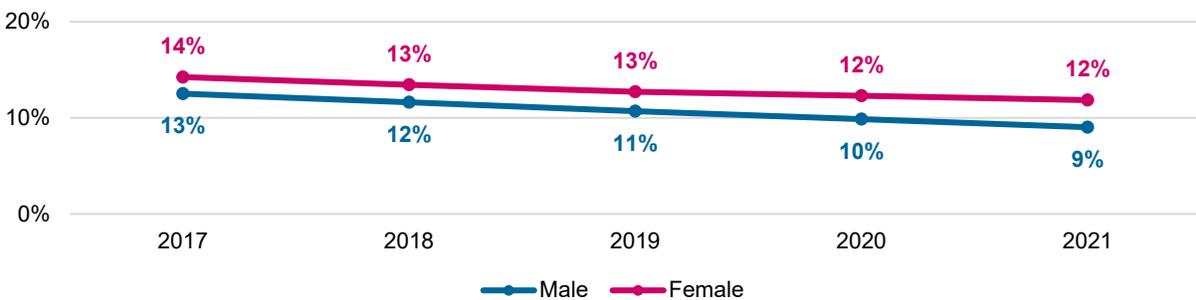
EXHIBIT 21. Percentage of Older Adults Living Below the Poverty Line in Kent County, 2017–2021



Source: U.S. Census Bureau 2021d

Between 2017 and 2021 the percentage of Kent County residents living below the poverty threshold decreased for both male and female residents. During this period, the percentage of men living below the poverty line decreased approximately one percentage point each year. The gap between the percentage of men and women living in poverty increased during this period due to smaller reductions in the percentage of women living in poverty (Exhibit 22).

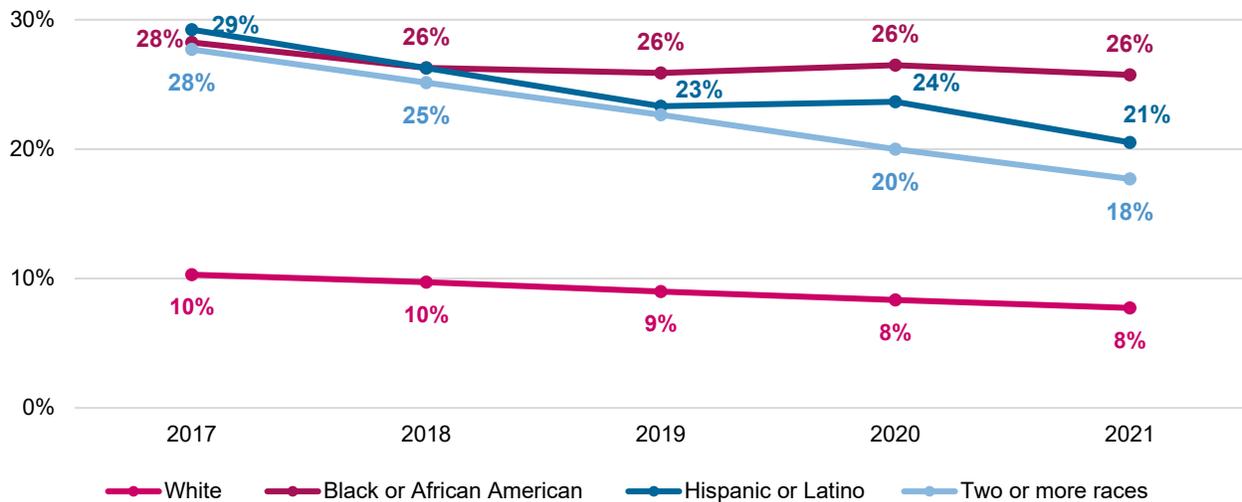
EXHIBIT 22. Percentage of Kent County Residents Living Below the Poverty Line by Sex, 2017–2021



Source: U.S. Census Bureau 2021d

The percentage of Kent County residents living below the poverty line decreased between 2017 and 2021 regardless of race or ethnicity. However, that decrease was smaller among Black or African American residents than among other People of Color. The decrease among white residents was also smaller; however, the percentage of white residents below the poverty line in all years was much lower than those of other races or ethnicities (Exhibit 23).

EXHIBIT 23. Percentage of Kent County Residents Living Below the Poverty Line Among Select Races and Ethnicities, 2017–2021

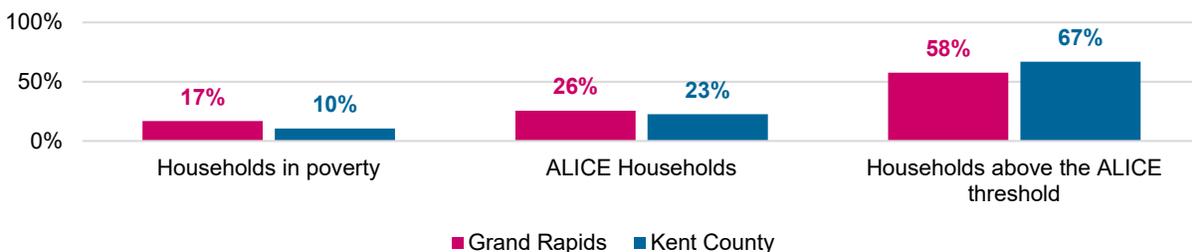


Source: U.S. Census Bureau 2021d

Asset Limited, Income Constrained, Employed

ALICE is a term developed by the United Way to describe those who may live above the federal poverty guidelines but still struggle to afford the basic costs of living in their community. Twenty-six percent of Grand Rapids households live within the ALICE threshold and 23 percent of Kent County households fall into ALICE (Exhibit 24).

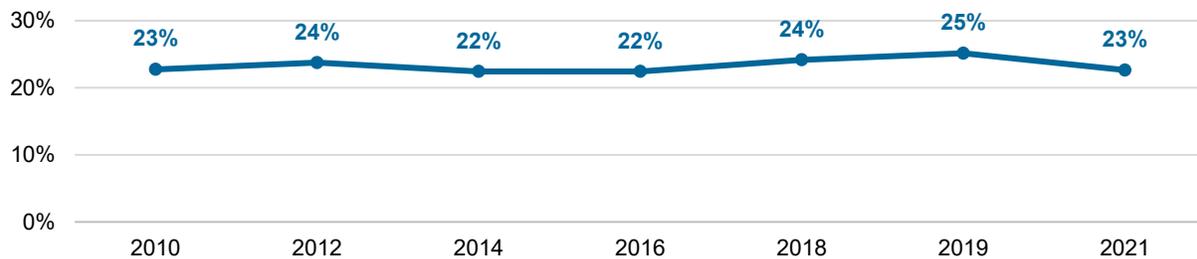
EXHIBIT 24. Percentage of ALICE Households and Households Living in Poverty in Grand Rapids and Kent County, 2021



Source: United for ALICE 2021

The percentage of Kent County residents living within the ALICE threshold has remained relatively consistent over time (Exhibit 25).

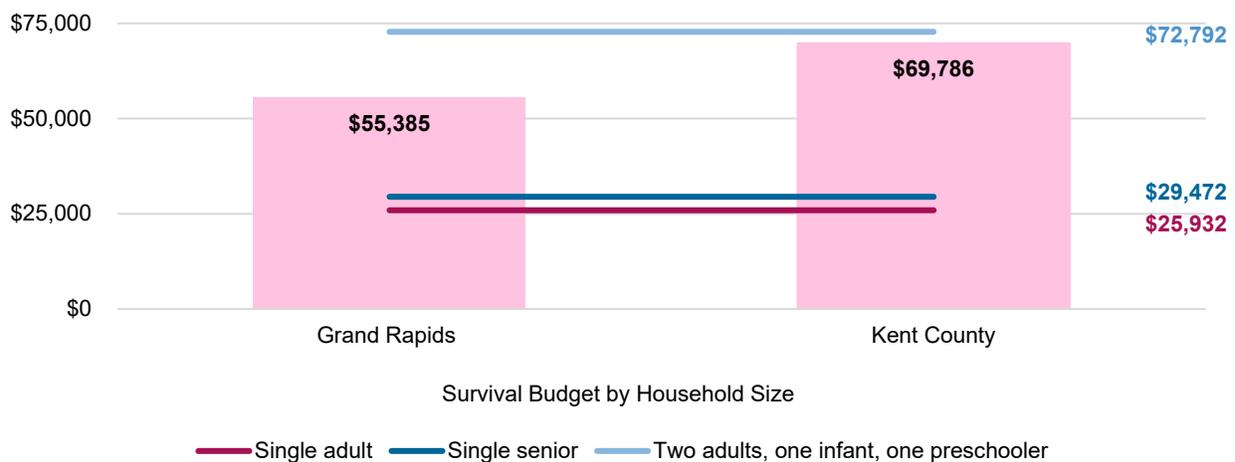
EXHIBIT 25. Percentage of ALICE Households in Kent County Over Time, 2010–2021



Source: United for ALICE 2021

As a foundation of the ALICE research, the United Way calculates a survival budget for Michigan, which includes the costs of basics such as housing, food, health, transportation, and child care. While the median household income in both Grand Rapids and Kent County is larger than the survival budget for a single adult, it is lower than the survival budget for a household of two adults, one infant, and one preschooler (Exhibit 26).

EXHIBIT 26. Median Household Income Compared to United Way's Survival Budget for Michigan by Household Size, 2021



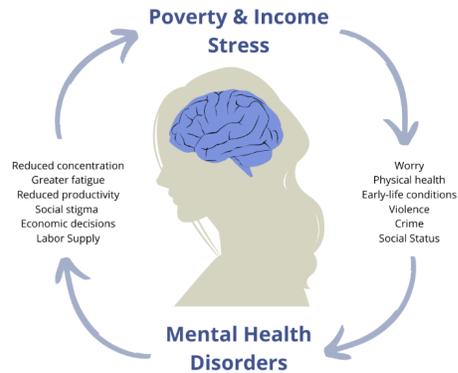
Source: U.S. Census Bureau 2021r, Michigan Association of United Ways 2023

Mental Health

People experiencing poverty may have significant life stresses that impact their mental and emotional health. Poverty and income stress may perpetuate concerns about one’s physical health and overall well-being, resulting in negative impacts on mental health. These stressors can manifest in a variety of symptoms, including reduced productivity, increased fatigue, and diminished energy levels (Exhibit 27).

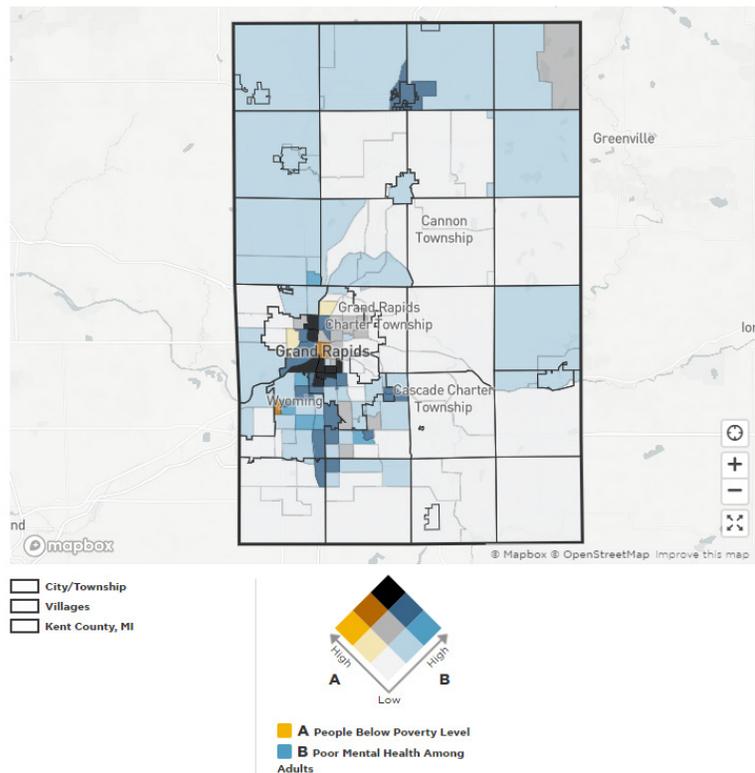
Within Kent County, Grand Rapids shows the greatest concentration of individuals living in poverty and experiencing poor mental health as measured in the Behavioral Risk Factor Surveillance System study from 2019 (BRFSS 2021). Another pocket of significant overlap of poverty and poor mental health is in the Cedar Springs area (Exhibit 28). High levels of poverty in these areas directly correlate with a higher prevalence of poor mental health among adults. Poor mental health, if untreated, can impact a person’s employment, healthcare, family systems and supports, housing, and ability to be self-sustaining (U.S. Census Bureau 2021a).

EXHIBIT 27. Poverty and Income



Source: Kent County n.d.

EXHIBIT 28. Where Poverty and Mental Health Overlap in Kent County

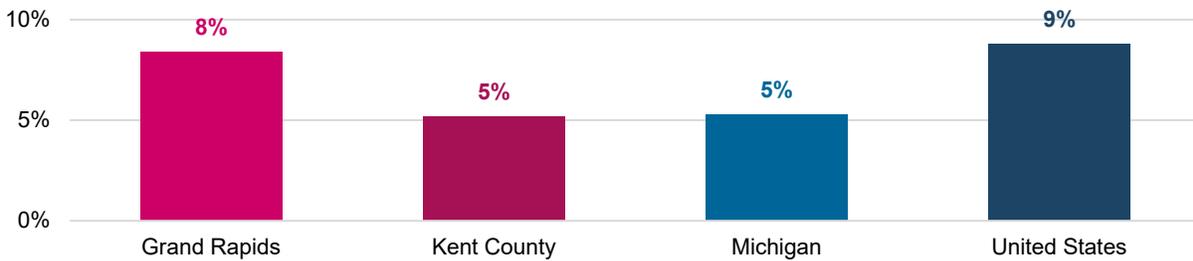


Source: Kent County n.d.

Healthcare Coverage

Healthcare coverage plays a significant role in the health of the overall community by making healthcare more accessible to those who have coverage. The percentage of residents without healthcare coverage is slightly higher in Grand Rapids than it is in Kent County and the state overall but slightly lower than the nation (Exhibit 29).

EXHIBIT 29. Percentage of Uninsured Residents by Geographic Area, 2021



Source: U.S. Census Bureau 2021y

A larger percentage of male residents in both Grand Rapids and Kent County are uninsured compared to female residents. Residents in Kent County are uninsured at a similar rate as other Michigan residents within the same age group. Grand Rapids residents across all age groups are uninsured at higher rates than Michigan and Kent County residents within the same age group. Among race and ethnic groups, those who are Hispanic or Latino and Asian have the highest percentage of uninsured individuals, with a 12-percentage-point difference between Hispanic or Latino residents and white residents in Grand Rapids. The percentage uninsured is higher in Grand Rapids than in Kent County, regardless of race or ethnicity. Residents between the ages of 19 and 64 years have the highest percentage of uninsured in both Grand Rapids and Kent County when compared to all other ages (Exhibit 30). Those with a lower educational attainment have a higher percentage of uninsured, and those who are unemployed have a higher percentage uninsured than those who are employed.

EXHIBIT 30. Percentage of Uninsured Residents by Demographic, 2021

	Grand Rapids	Kent County
Sex		
Female	7%	4%
Male	10%	6%
Race and Ethnicity		
Asian	12%	5%
Black or African American	8%	7%
Hispanic or Latino	19%	14%
White	7%	4%
Two or more races	12%	8%

	Grand Rapids	Kent County
Age		
Under 6 years	5%	3%
6 to 18 years	5%	3%
19 to 25 years	11%	9%
26 to 54 years	12%	8%
55 to 64 years	9%	5%
65 to 74 years	1%	<1%
75 years and older	2%	<1%
Educational Attainment		
Less than high school	23%	15%
High school graduate or GED	12%	8%
Associate's degree or some college	8%	5%
Bachelor's degree or higher	5%	3%
Employment Status		
Employed	10%	6%
Unemployed	20%	17%
Poverty Status		
Below 100 percent of the poverty threshold	13%	10%
Below 138 percent of the poverty threshold	12%	9%
138 to 399 percent of the poverty threshold	9%	6%
At or above 400 percent of the poverty threshold	5%	3%

Source: U.S. Census Bureau 2021y

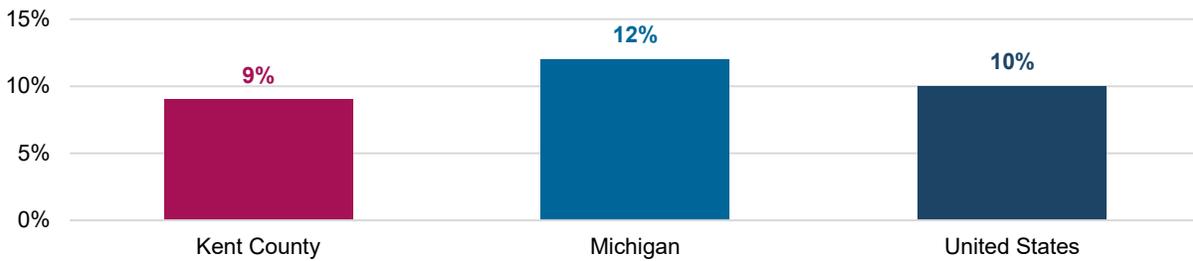
Food Security

Access to food also influences health outcomes; lack of food can negatively impact both physical and mental health. The U.S. Department of Agriculture defines food insecurity as a lack of consistent access to enough food for every person in a household to live an active, healthy life. Nine percent of Kent County residents are food insecure (Exhibit 31). This is down from 11 percent each year since 2017 (Exhibit 32).



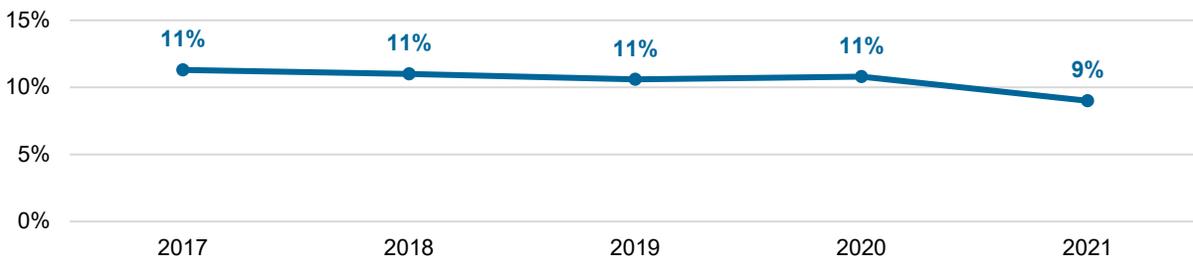
During the COVID-19 pandemic, KCCA held some congregate meals outside to help feed older adults and combat isolation from social distancing.

EXHIBIT 31. Percentage of Food-insecure Residents by Geographic Area, 2021



Note: Data for Grand Rapids was not available.
Source: Feeding America 2021

EXHIBIT 32. Percentage of Food-insecure Residents in Kent County Over Time, 2017–2021

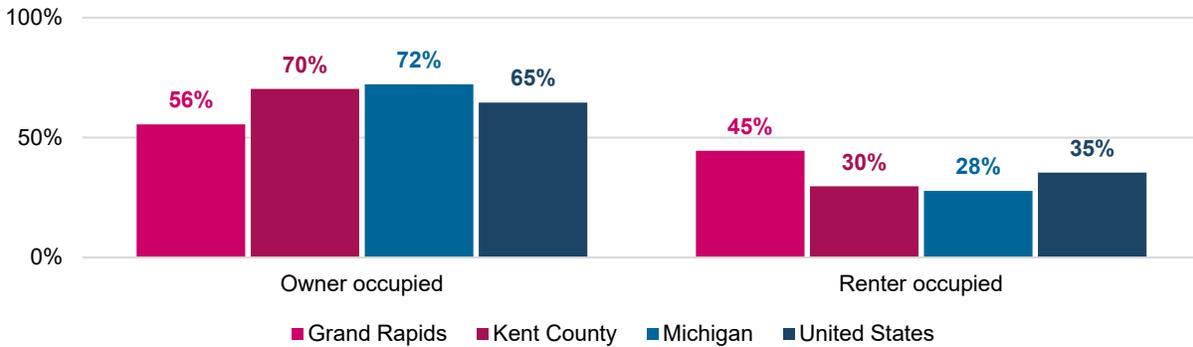


Note: Data for Grand Rapids was not available.
Source: Feeding America 2021

Housing

Grand Rapids has a larger percentage of rentals (45 percent) compared to Kent County, Michigan, or the United States (Exhibit 33). Considering all of the housing units in Grand Rapids, 56 percent are owner occupied and 45 percent are rentals. Kent County has a larger percentage of owner-occupied housing units, with 70 percent owner occupied and 30 percent rental units.

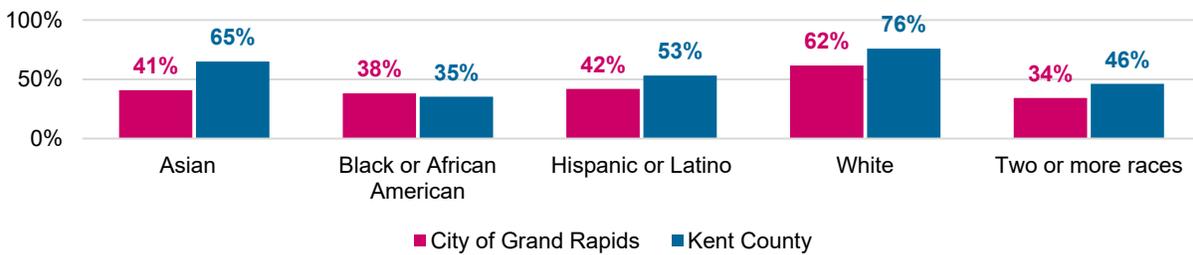
EXHIBIT 33. Housing Tenure by Geography, 2021



Source: U.S. Census Bureau 2021f

When considering all homeowners in Grand Rapids and Kent County by race and ethnicity, the percentage of white homeowners is higher than that of another race or ethnicity in both Grand Rapids and Kent County (Exhibit 34).

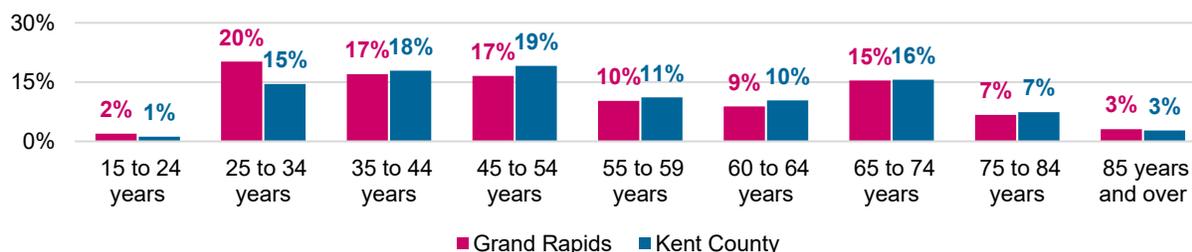
EXHIBIT 34. Homeowners in Grand Rapids and Kent County by Race and Ethnicity, 2021



Source: U.S. Census Bureau 2021k; U.S. Census Bureau 2021h; U.S. Census Bureau 2021g; U.S. Census Bureau 2021j; U.S. Census Bureau 2021i

Over half (54 percent) of the owner-occupied housing in Grand Rapids is owned by people between the ages of 25 and 54 years old; nearly half (48 percent) of Kent County homeowners fall within that age range (Exhibit 35).

EXHIBIT 35. Owner-occupied Housing in Grand Rapids and Kent County by Age, 2021



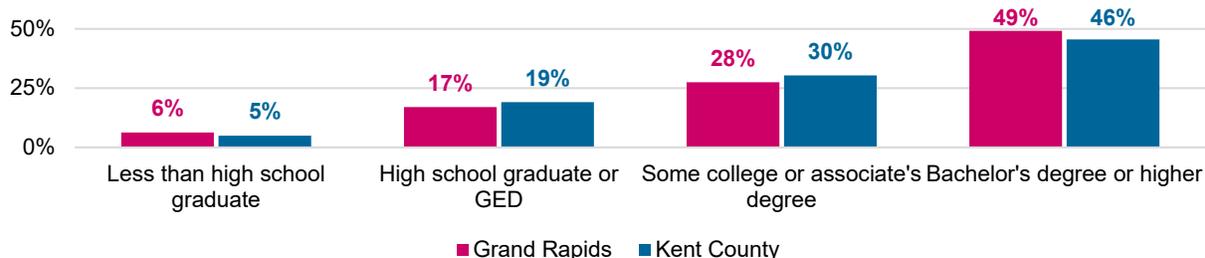
Source: U.S. Census Bureau 2021z

Only 6 percent of the owner-occupied homes in Grand Rapids are owned by someone with an education attainment of less than a high school diploma, whereas 49 percent is owned by those who have earned a bachelor's degree or higher (Exhibit 36). The percentages are similar for Kent County.



In Wyoming, Kent County provided funding assistance to construct 12 new townhomes with HUD HOME Investment Partnership funds.

EXHIBIT 36. Owner-occupied Housing in Grand Rapids and Kent County by Educational Attainment, 2021

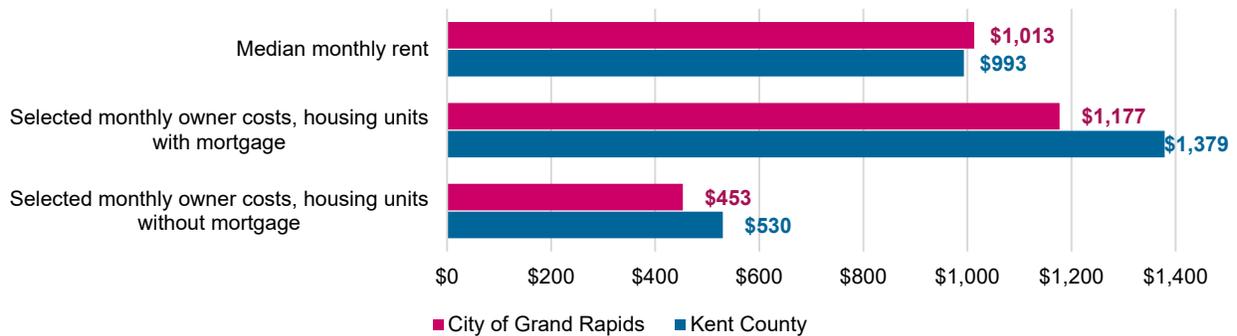


Source: U.S. Census Bureau 2021i

Housing Costs

The median monthly cost of rent in Grand Rapids is slightly higher than the cost of rent in Kent County. Monthly costs for homeowners with a mortgage are higher than monthly rental costs (Exhibit 37). While rental costs are slightly higher in Grand Rapids than in Kent County, monthly housing costs of mortgage holders is around \$200 higher in Kent County than in Grand Rapids.

EXHIBIT 37. Median Monthly Cost of Housing, 2021



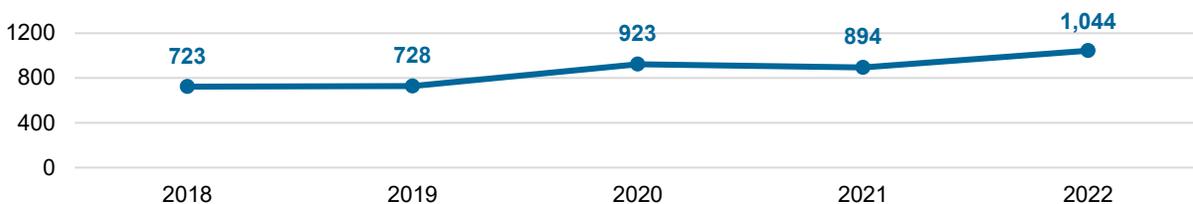
Note: According to the U.S. Census Bureau, selected monthly owner costs are the sum of payments for mortgages, deeds of trust, contracts to purchase, or similar debts on the property (including payments for the first mortgage, second mortgages, home equity loans, and other junior mortgages); real estate taxes; fire, hazard, and flood insurance on the property; utilities (electricity, gas, and water and sewer); and fuels (oil, coal, kerosene, wood, etc.). It also includes, where appropriate, the monthly condominium fee for condominiums and mobile home costs (personal property taxes, site rent, registration fees, and license fees).

Source: U.S. Census Bureau 2021t

Homelessness

According to a point-in-time (PIT) count, of those experiencing homelessness in the Grand Rapids, Wyoming, and Kent County area, the number of people experiencing homelessness in 2022 was 1,044, a 44 percent increase from 723 individuals in 2018 (Exhibit 38).⁶

EXHIBIT 38. Shelter Status of Individuals Experiencing Homelessness, PIT Data, 2022



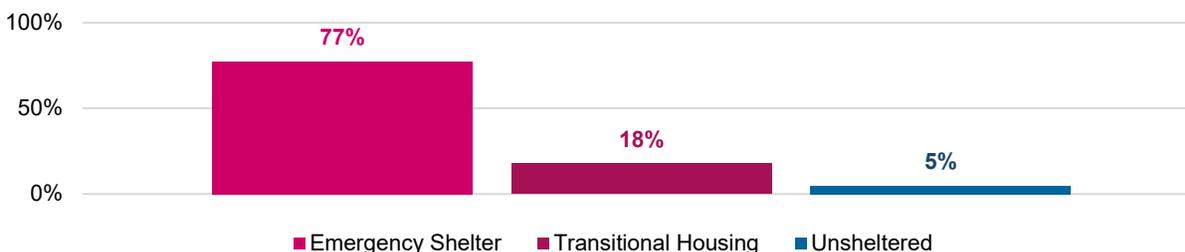
Note: Due to the COVID-19 pandemic, the number of individuals experiencing homelessness may be undercounted.

Source: Grand Rapids Area Coalition to End Homelessness 2022

⁶ The PIT count, measured on a single night in January, includes sheltered and unsheltered people experiencing homelessness. It includes people who are in shelter or transitional housing or who are seen during street counts. A number of variables affect PIT counts and they exclude people who are staying temporarily with family or friends, or who were staying in motels. It also can be impacted by weather.

Of those experiencing homelessness at that PIT in 2022, 77 percent were sheltered in an emergency shelter, 18 percent were sheltered in transitional housing, and 5 percent were unsheltered (Exhibit 39).

EXHIBIT 39. Shelter Status of Individuals Experiencing Homelessness, PIT Data, 2022



Source: Grand Rapids Area Coalition to End Homelessness 2022

Nearly two-thirds of people (63 percent) experiencing homelessness in Kent County in 2022 were male and nearly half were Black or African American. In 2022, there was an increase across the number of households experiencing homelessness, households returning to homelessness after living in a permanent location, and the length of time spent homeless (Grand Rapids Area Coalition to End Homelessness 2022).

The Grand Rapids Area Coalition to End Homelessness is the area's Continuum of Care (CoC), which is a local planning body that coordinates housing and services funding for families and individuals experiencing homelessness. As of the completion of this report, the CoC had PIT counts available and the most recent annual count was from 2020. Due to changes to how the CoC reports on these numbers, the annual counts going forward will not include the same information as they did in the past. For these reasons only the PIT counts are included here.

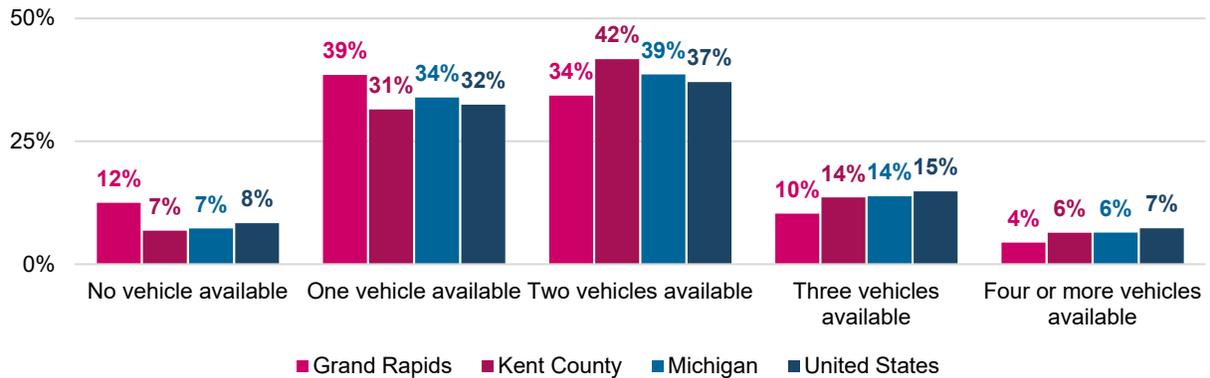
COVID Emergency Rental Assistance

The Michigan State Housing Development Authority (MSHDA) administered COVID Emergency Rental Assistance payments to renters who met the income criteria and were at risk of experiencing homelessness or housing instability due to being past due on rent (MSDHA 2023). MSHDA received 18,483 applications for assistance in Kent County from March 15, 2021, to October 14, 2022. As of April 2023, almost \$52 million in rent and utility assistance has been issued to 16,476 people in the county. (MSHDA 2021).

Transportation

A larger percentage of Grand Rapids households do not have access to a vehicle compared to Kent County households, 12 percent compared to 7 percent (Exhibit 40).

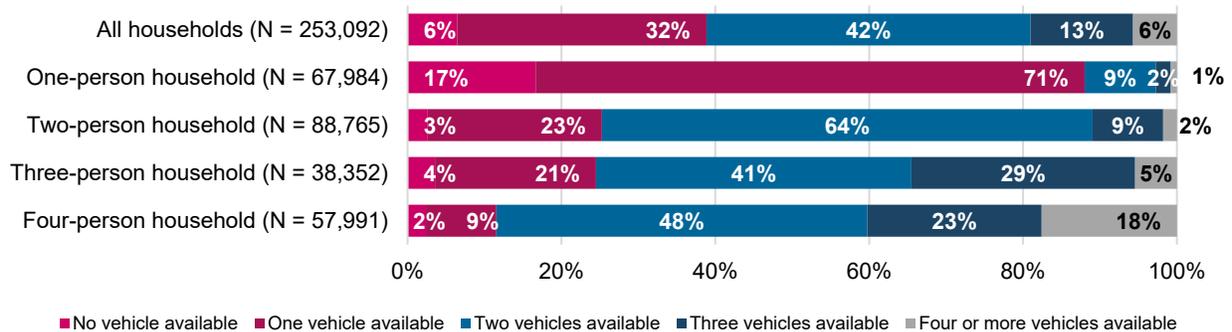
EXHIBIT 40. Number of Available Vehicles per Household by Geography, 2021



Source: U.S. Census Bureau 2021p

In Kent County, one-person households are the most likely to lack access to any vehicle, with 17 percent having no vehicle available (Exhibit 41).

EXHIBIT 41. Number of Available Vehicles in Kent County by Household Size, 2021



Source: U.S. Census Bureau 2021p

The *2020 Kent County Community Health Needs Assessment* also identifies transportation as a need across the county. Findings indicate that county residents living in a non-walkable area identified transportation as a barrier. Residents who live outside of the Grand Rapids area and do not have a personal vehicle have very limited transportation options. These challenges most notably affect African American populations (5.6 percent), who are more likely to use public transportation to commute than Hispanic or Latino populations (3.4 percent) or non-Hispanic white populations (1.1 percent) (Brummel n.d.).

The Rapid, the primary public transportation system for the Grand Rapids metro area, published the *Kent County Coordinated Public Transit—Human Services Transportation Plan* in 2022. The plan highlights The Rapid service areas as those within the six cities in southwest Kent County: East Grand Rapids, Grand Rapids, Grandville, Kentwood, Walker, and Wyoming. The Rapid identifies the key transit service and coordination challenges as:

- Limited service area, specifically for those living outside the urbanized areas of the county
- Strict eligibility requirements for transit service programs that are also limited, rationed, and difficult for the public to understand
- Major employment clusters, recreational areas, and residential regions within the county are not serviced by the system
- High need to link lower income populations with lower health outcomes to better food options through public transit services
- A growing number of aging adults who have specific transportation needs that are not currently being addressed
- Service capacity limitations, specifically the number of drivers available and days/hours service is available
- Need for technology advancement to better coordinate with community organizations also focused on providing transportation solutions in the county
- Improved information outreach and awareness (The Rapid 2022)

The Grand Valley Metropolitan Council also developed a long-range multimodal metropolitan transportation plan (MTP) for Kent and Ottawa Counties. The plan indicates that in addition to the services provided by The Rapid, several agencies across the region also support specialized transportation needs specifically for older adults and those with disabilities. Similar to the findings in the *Human Services*

Transportation Plan, the MTP identifies the need for public transit service expansion outside urbanized areas and improving accessibility. The MTP also notes the need for expanding the current size and capacity of The Rapid fleet to meet those needs (Grand Valley Metro Council 2020).

Transit will continue to become increasingly important as the region grows and grapples with more roadway congestion and the consequential impacts, such as poorer air quality, that congestion brings.

Broadband Access

The Merit Network conducted a survey on broadband access in Kent County. Key findings indicate that only 15 percent of respondents have broadband access at a level that meets modern household needs.⁷ Respondents identified the highest areas of need as those located in the northern and eastern townships of the county. Those who did not have internet access at home cited cost as a major limiting factor. In addition, 40 percent of respondents indicated that they are not able to get high-speed internet at their location. Also, 6 percent of respondents said they are reliant on their cell phones for internet access.

Lack of or limited broadband access can directly affect county residents' ability to support the education, employment, and healthcare needs of their households. Results of the survey indicate the need for enhanced broadband infrastructure to improve residents' quality of life and equitable access (Merit Network, Inc. 2023).

⁷ Modern household needs refers to the industry expert suggestion that household internet speeds reach 100 Mbps/20 Mbps, indicating speeds fast enough to support activities such as video conferencing, schoolwork, telemedicine applications, video streaming, etc.

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Appendix A. Community Survey Summary

Kent County Community Action

Community Survey Needs Assessment Survey Results

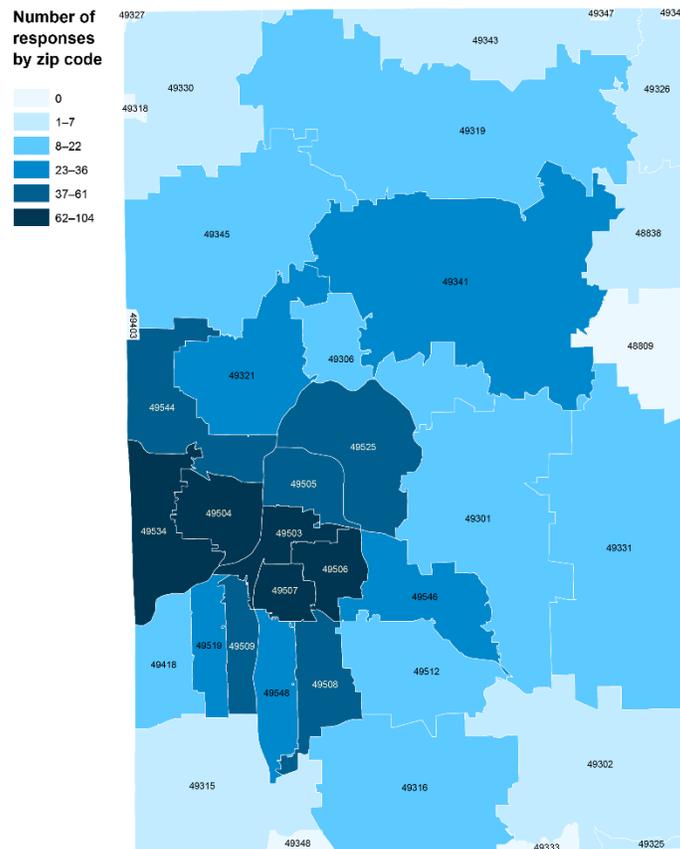
April 2023

Respondent Demographics

Zip Code

Researchers received responses from people living in 31 different zip codes within Kent County. The number of responses ranges from one each in zip codes 49325 and 49501 to 104 respondents from zip code 49534. The largest number of responses came from those living within the City of Grand Rapids, followed by those living in Walker, Wyoming, Kentwood, and Northview (Exhibit A1).

EXHIBIT A1. Number of Responses by Zip Code

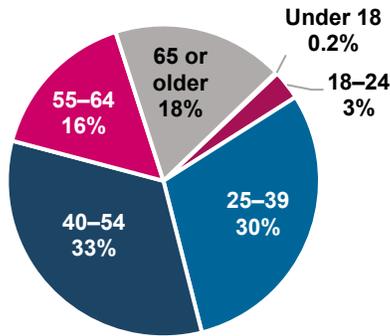


N = 1,034

Age and Gender

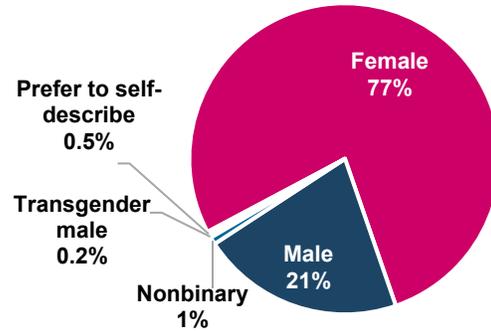
One-third of respondents were between the ages of 40 and 54 years old, nearly one-third were 25 to 39 years old, and one-third were 55 or older (Exhibit A2). More than three-quarters of respondents were female (Exhibit A3).

EXHIBIT A2. Percentage by Age



N = 1,055
 Note: Percentages may not total 100 percent due to rounding.

EXHIBIT A3. Percentage by Gender

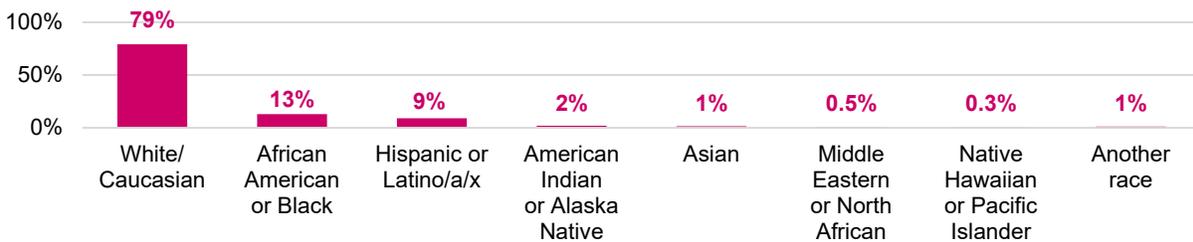


N = 1,048
 Note: Percentages may not total 100 percent due to rounding.

Race and Ethnicity

Nearly 80 percent of respondents were white/Caucasian, 13 percent were African American or Black, and 9 percent were Hispanic or Latino/a/x (Exhibit A4).

EXHIBIT A4. Percentage by Race and Ethnicity

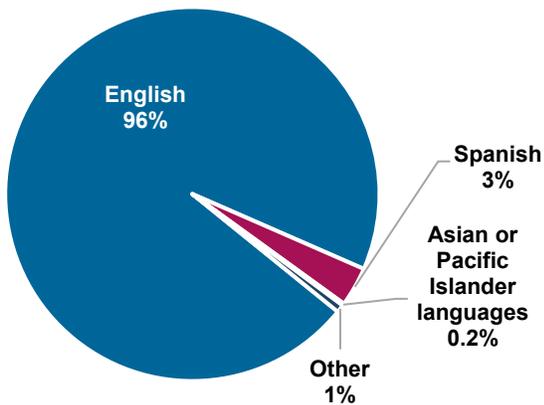


N = 1,046
 Note: Percentages total more than 100 because more than one response could be selected.

Primary Language and Education

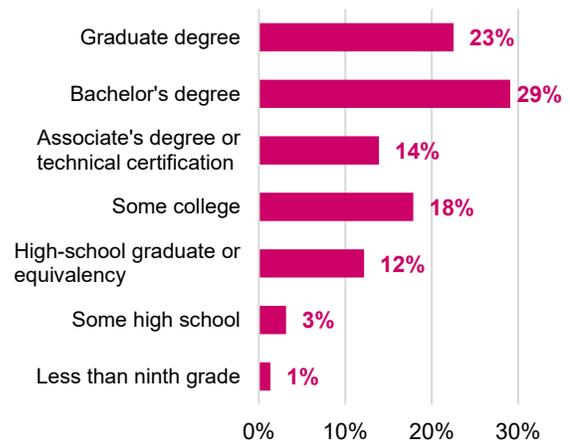
Nearly all respondents (96 percent) reported primarily speaking English in their household, with 3 percent saying their primary household language is Spanish (Exhibit A5). More than half of respondents have a bachelor's degree or higher, and 14 percent have an associate's degree or technical certification. Another 18 percent had a least some college education (Exhibit A6).

EXHIBIT A5. Percentage by Primary Language Used in Household



N = 1,053
 Note: Percentages may not total 100 percent due to rounding.

EXHIBIT A6. Percentage by Highest Level of School Completed

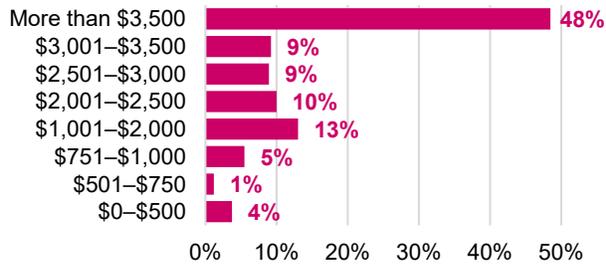


N = 1,052

Income

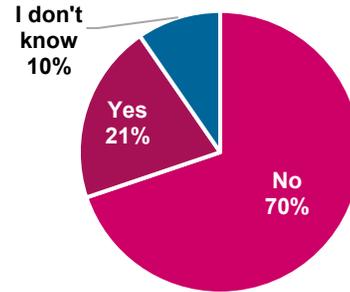
Nearly half (48 percent) of respondents had a pretax monthly income of more than \$3,500, while 10 percent had a monthly income of \$1,000 or less (Exhibit A7). More than 20 percent see themselves as experiencing poverty (Exhibit A8).

EXHIBIT A7. Percentage by Pretax Monthly Household Income



N = 1,021
 Note: Percentages may not total 100 percent due to rounding.

EXHIBIT A8. Percentage Who See Themselves as Experiencing Poverty



N = 1,050
 Note: Percentages may not total 100 percent due to rounding.

Number of Household Members

The reported number of adults in a survey respondent's household ranged from zero to nine, with an average of two adults per household. The number of children reported per household ranged from zero to ten, with an average of 1.2 (Exhibit A9). Households averaged less than one person with disabilities and less than one veteran per household.

EXHIBIT A9. Number of Household Members

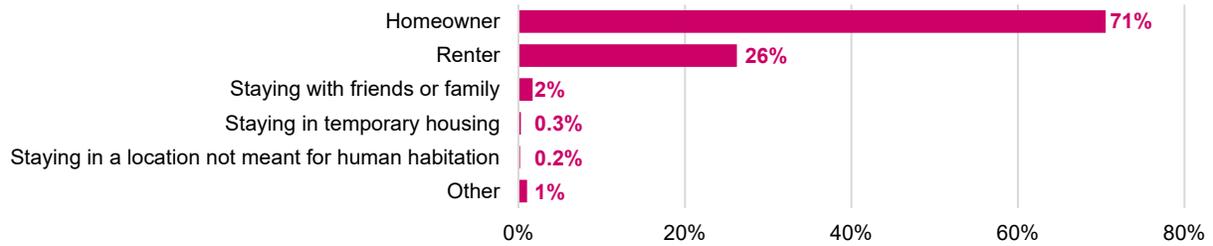
	Number of Respondents	Range	Average	Median
Adults	997	0–9	2.0	2.0
Children	784	0–10	1.2	1.0
People with disabilities	638	0–4	0.4	0.0
Veterans	582	0–1	0.1	0.0

Note: Any responses of more than ten adults or children in a household were removed from the analysis as outliers.

Housing and Employment

Nearly three-quarters of respondents were homeowners and just over one-quarter were renters (Exhibit A10). Over half (57 percent) of respondents were employed full time, 18 percent were retired, and 12 percent were employed part time (Exhibit A11).

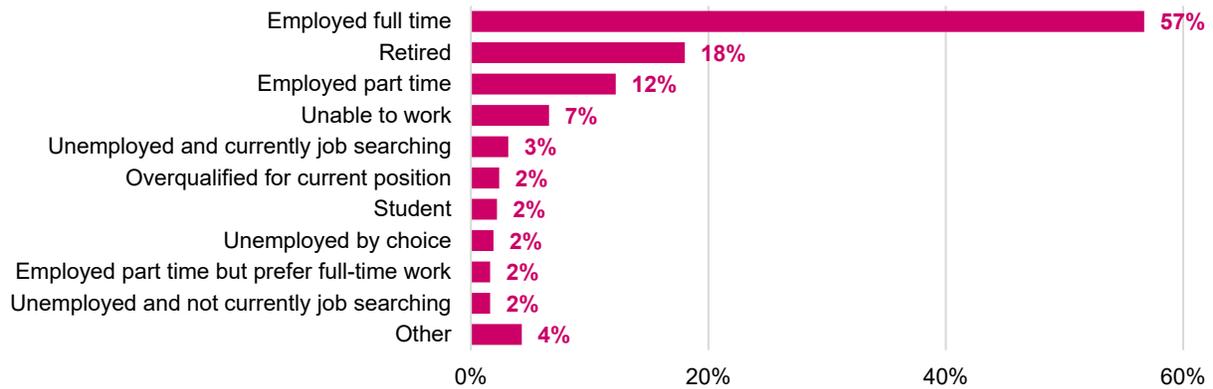
EXHIBIT A10. Percentage by Housing Situation



N = 1,052

Note: Percentages total more than 100 percent due to rounding.

EXHIBIT A11. Percentage by Employment Status



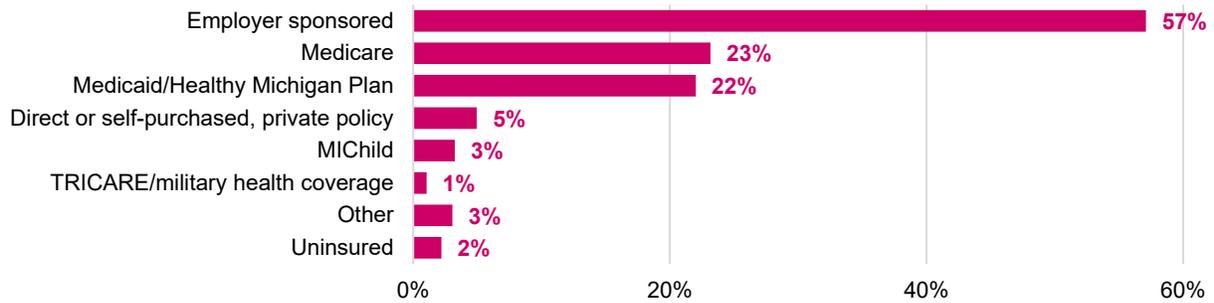
N = 1,049

Note: Percentages total more than 100 because more than one response could be chosen. "Other" included business owner, self-employed, disabled, stay-at-home parent/caregiver, homemaker.

Healthcare Coverage

More than half (57 percent) of respondents had healthcare insurance through their employers, 23 percent had Medicare, and 22 percent had Medicaid/Healthy Michigan Plan (Exhibit A12).

EXHIBIT A12. Percentage by Type of Healthcare Coverage



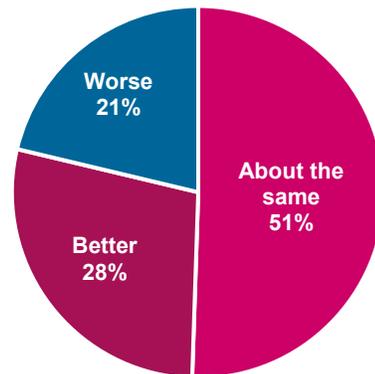
N = 1,049

Note: Percentages total more than 100 because more than one response could be chosen. "Other" included coverage through a spouse or parent and retirement insurance.

Quality of Life

More than half (51 percent) of respondents said that their quality of life was about the same as it was 12 months ago, 28 percent said it was better, and 21 percent said their quality of life had worsened since a year ago (Exhibit A13).

EXHIBIT A13. Change in Quality of Life

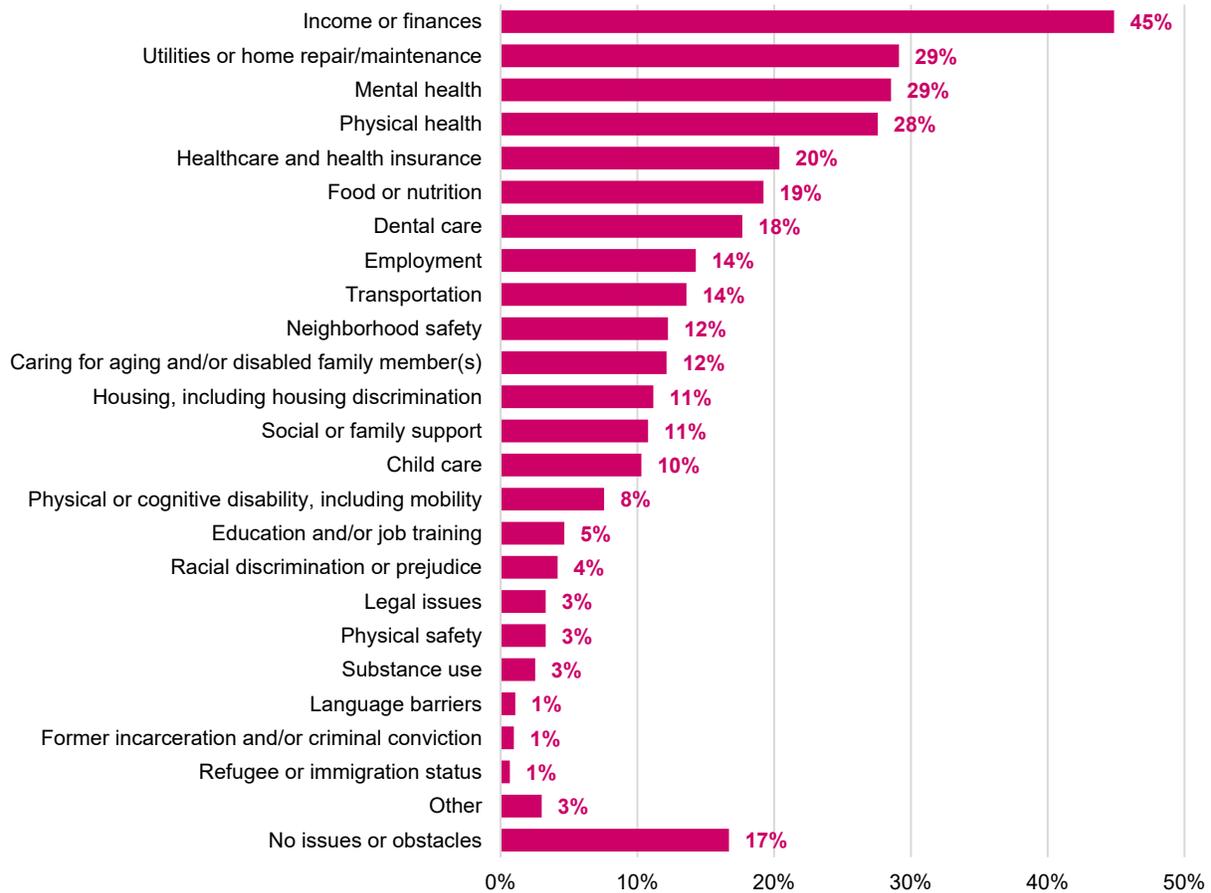


N = 1,053

Challenges

While 17 percent of respondents said their household did not experience any issues or obstacles in the last 12 months, many did face challenges. For example, 45 percent of respondents said they experienced income or financial challenges, and nearly 30 percent each said they experienced challenges with utilities or home repair and maintenance, mental health, and physical health (Exhibit A14). Around 20 percent each were challenged by healthcare and health insurance issues, food or nutrition issues, and dental care issues. Between 10 percent and 15 percent had issues with employment, transportation, neighborhood safety, caring for an aging or disabled family member(s), housing, social or family support, and child care.

EXHIBIT A14. Percentage Who Had Challenges by Issue

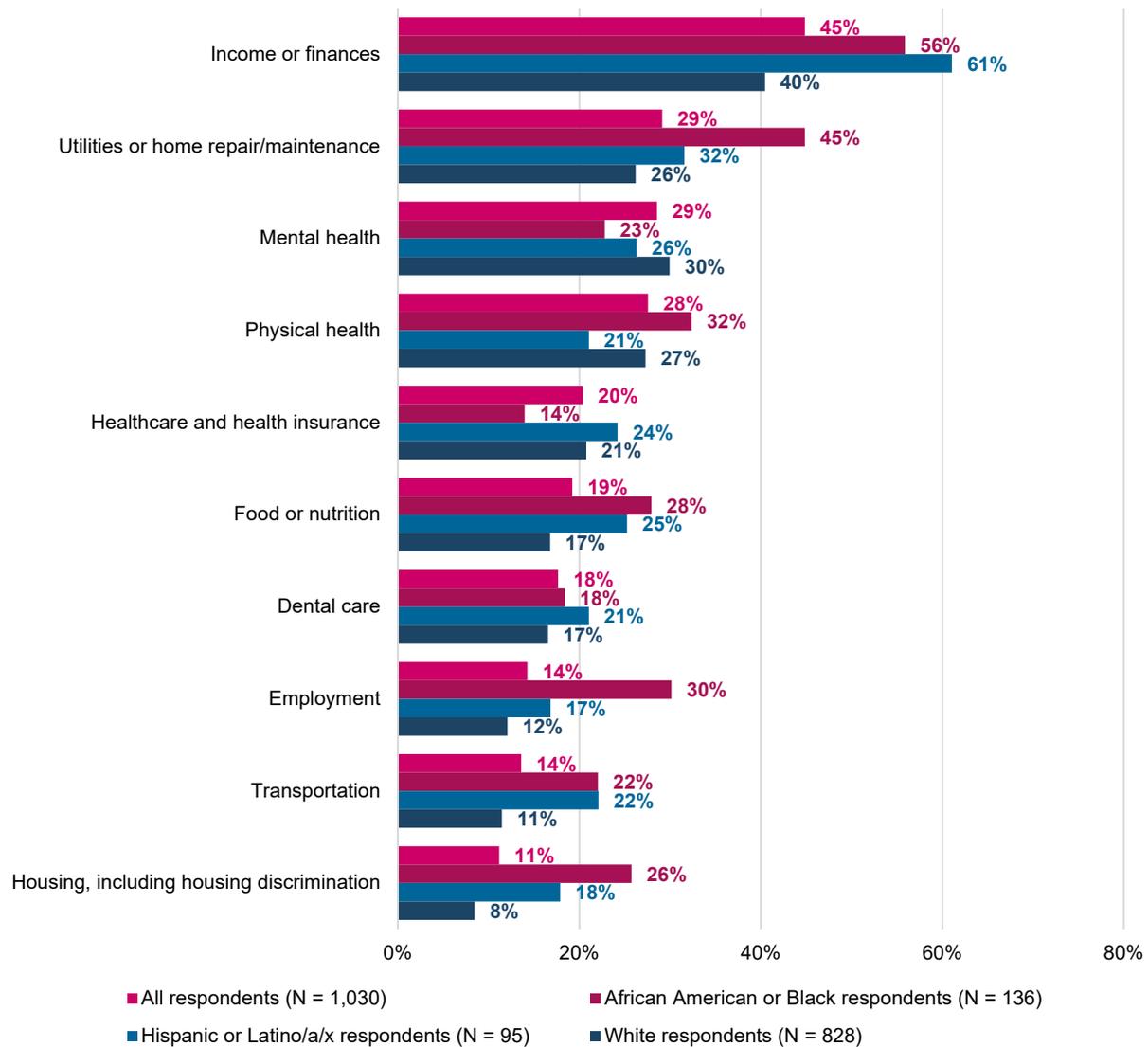


N = 1,030

Note: Percentages total more than 100 because more than one response could be chosen.

As illustrated by Exhibit A15, the top challenge of income or finances was experienced by a larger percentage of Hispanic or Latino/a/x respondents (61 percent) and African American or Black respondents (56 percent) than white respondent (40 percent). The same is true for those experiencing utilities or home repair or maintenance challenges. White respondents had the largest percentage experiencing mental health challenges (30 percent). Employment and housing challenges were much more common among African American or Black respondents than those of other races or ethnicities.

EXHIBIT A15. Percentage Who Had Challenges by Issue and Race and Ethnicity

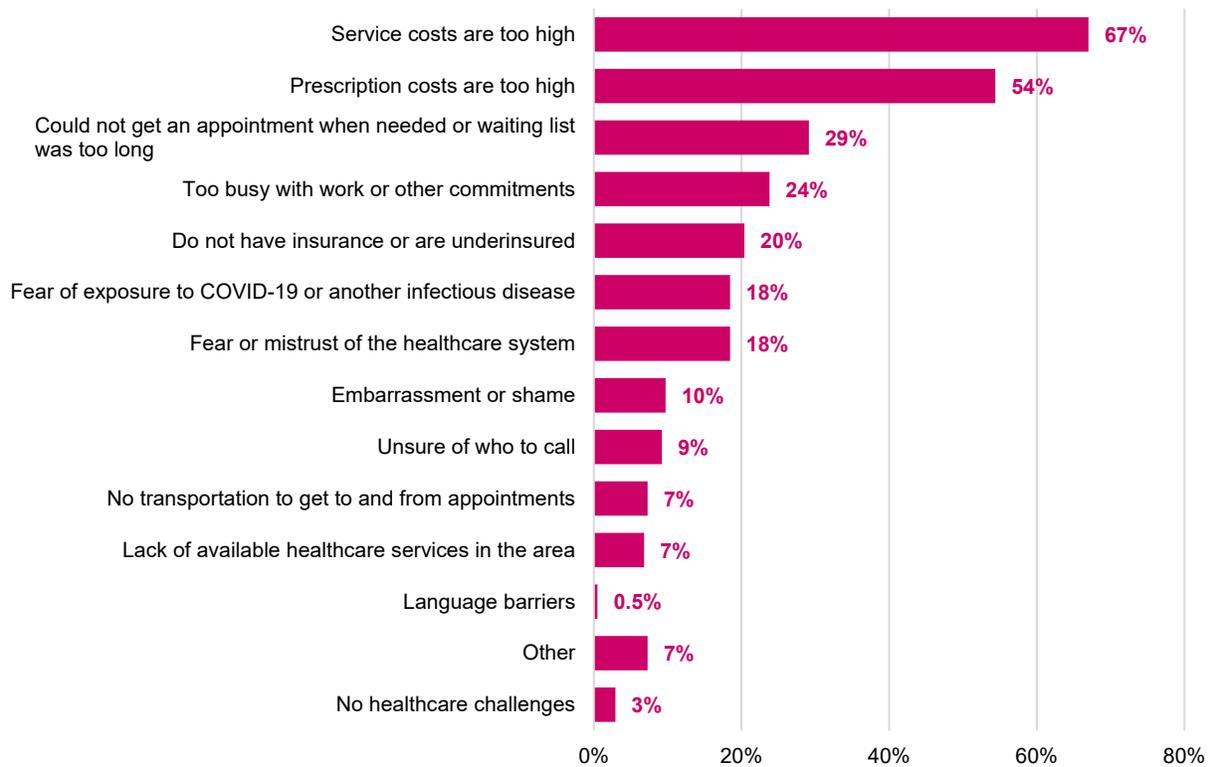


N varied by race and ethnicity.

Note: Percentages total more than 100 because more than one response could be chosen. Respondents for each race or ethnicity may include those who selected more than one race or ethnicity.

Healthcare and Health Insurance

Of the 20 percent of respondents who said that healthcare access or coverage had been an issue for them, two-thirds said that service costs were too high and more than half said prescription costs were too high (Exhibit A16). Nearly 30 percent said they could not get an appointment when needed or the waiting list was too long, nearly one-quarter said they were too busy with other commitments, and 20 percent said they did not have insurance or were underinsured. Nearly 20 percent each said they had a fear of exposure to an infectious disease and a fear or mistrust of the healthcare system.

EXHIBIT A16. Percentage Who Had Healthcare or Health Insurance-related Challenges

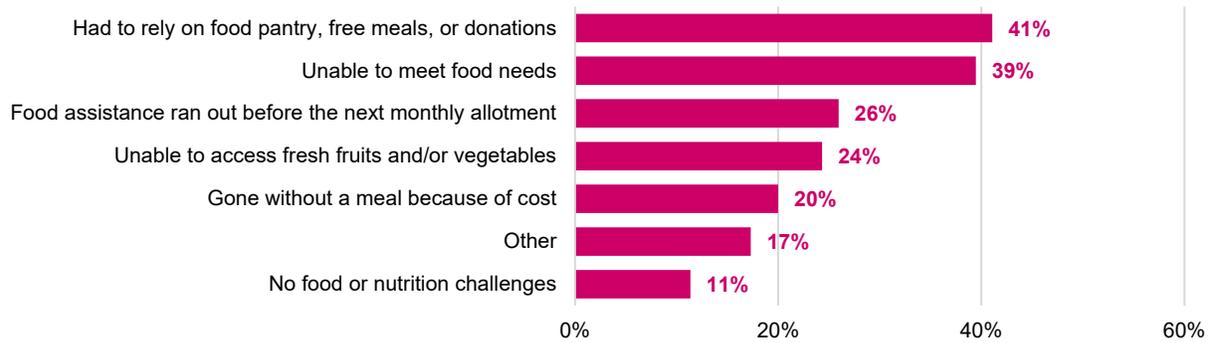
N = 206

Note: Percentages total more than 100 because more than one response could be chosen. "Other" responses included high-deductible insurance plans, lack of coverage for needed medical treatment, instability caused by switch from Medicare/Medicaid to Medicaid Advantage, and cancellation of Medicaid due to income limits.

Food or Nutrition

Of respondents who said food or nutrition had been a challenge in the last 12 months, 41 percent said they had to rely on a food pantry, free meals, or donations to feed themselves or others in their household, and 39 percent said they had been unable to meet their and their household's food needs (Exhibit A17). Around one-quarter each had food assistance run out before the next monthly allotment and were unable to access fresh fruits and/or vegetables. Additionally, 20 percent said they or someone in their household had gone without a meal because of cost.

EXHIBIT A17. Percentage Who Had Food- or Nutrition-related Challenges



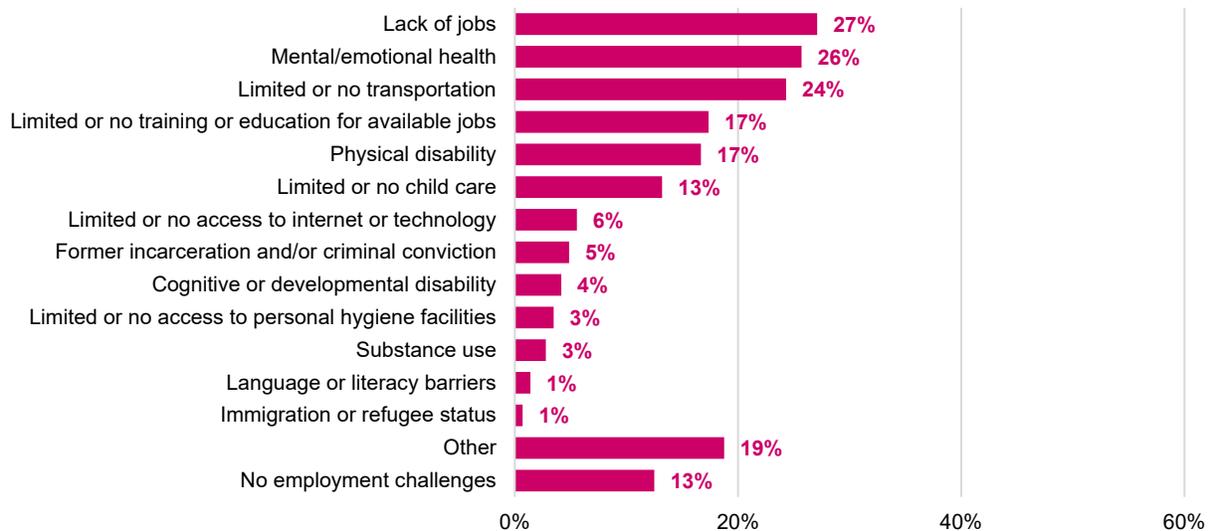
N = 185

Note: Percentages total more than 100 because more than one response could be chosen. Most “other” responses were that food prices are too high.

Employment

Of those who experienced employment challenges, around one-quarter each said there was a lack of jobs, they had mental or emotional health challenges, or had limited or no access to transportation (Exhibit A18). Nearly 20 percent said they had limited or no training or education for available jobs or a physical disability had caused employment challenges. Additionally, 13 percent said that limited or no child care caused difficulty with employment.

EXHIBIT A18. Percentage Who Had Employment-related Challenges



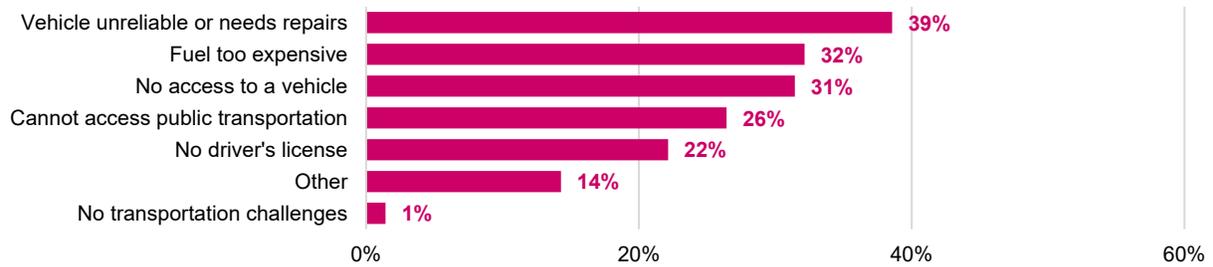
N = 144

Note: Percentages total more than 100 because more than one response could be chosen. “Other” responses included low wages, physical health, discrimination, housing, lack of skills, and inability to find or keep a job.

Transportation

Of those with transportation challenges in the last 12 months, 39 percent said their vehicle was unreliable or in need of repairs, 32 percent said fuel was too expensive, and 31 percent said they did not have access to a vehicle (Exhibit A19). Additionally, 26 percent said they could not access public transportation when or where they needed it, and 22 percent said they did not have a driver's license.

EXHIBIT A19. Percentage Who Had Transportation-related Challenges



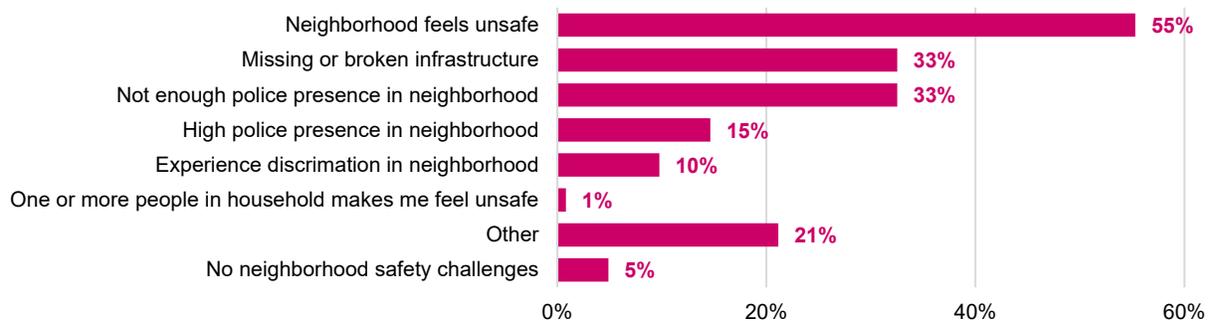
N = 140

Note: Percentages total more than 100 because more than one response could be chosen. "Other" responses included cost of vehicle and vehicle insurance is too high, no public transportation or unreliable public transportation to medical appointments, and time spent for vehicle repairs.

Neighborhood Safety

Of those who expressed that they had issues with neighborhood safety, over half (55 percent) said that their neighborhood feels unsafe, and one-third each said they felt unsafe due to missing or broken infrastructure (such as roads, utility lines, and streetlights) or because there was not enough police presence in their neighborhood (Exhibit A20). Alternatively, 15 percent said they felt unsafe due to a high police presence in their neighborhood.

EXHIBIT A20. Percentage Who Had Neighborhood Safety-related Challenges



N = 123

Note: Percentages total more than 100 because more than one response could be chosen. "Other" responses included car break-ins and theft, home break-ins, and frequent gun shots.

Exhibit A21 shows the number of respondents who said they had any of the listed neighborhood safety challenges by zip code. Caution should be used in drawing conclusions from this data due to the small number of respondents in some areas.

EXHIBIT A21. Number Who Had Neighborhood Safety Challenges by Zip Code

Zip Code	Number of Respondents by Zip Code	Number of Respondents with Any Neighborhood Safety–related Challenges	Percentage of Respondents Within Zip Code with Any Safety–related Challenges
48838	2	0	0%
49301	13	0	0%
49302	2	1	50%
49306	16	0	0%
49315	7	0	0%
49316	12	1	8%
49319	19	1	5%
49321	36	4	11%
49325	1	0	0%
49326	2	0	0%
49330	6	0	0%
49331	14	0	0%
49341	28	0	0%
49343	6	0	0%
49345	10	1	10%
49418	22	1	5%
49501	1	0	0%
49503	97	14	14%
49504	81	11	14%
49505	61	5	8%
49506	85	15	18%
49507	94	17	18%
49508	56	4	7%
49509	45	6	13%
49512	16	3	19%
49519	32	5	16%
49525	54	5	9%
49534	104	8	8%

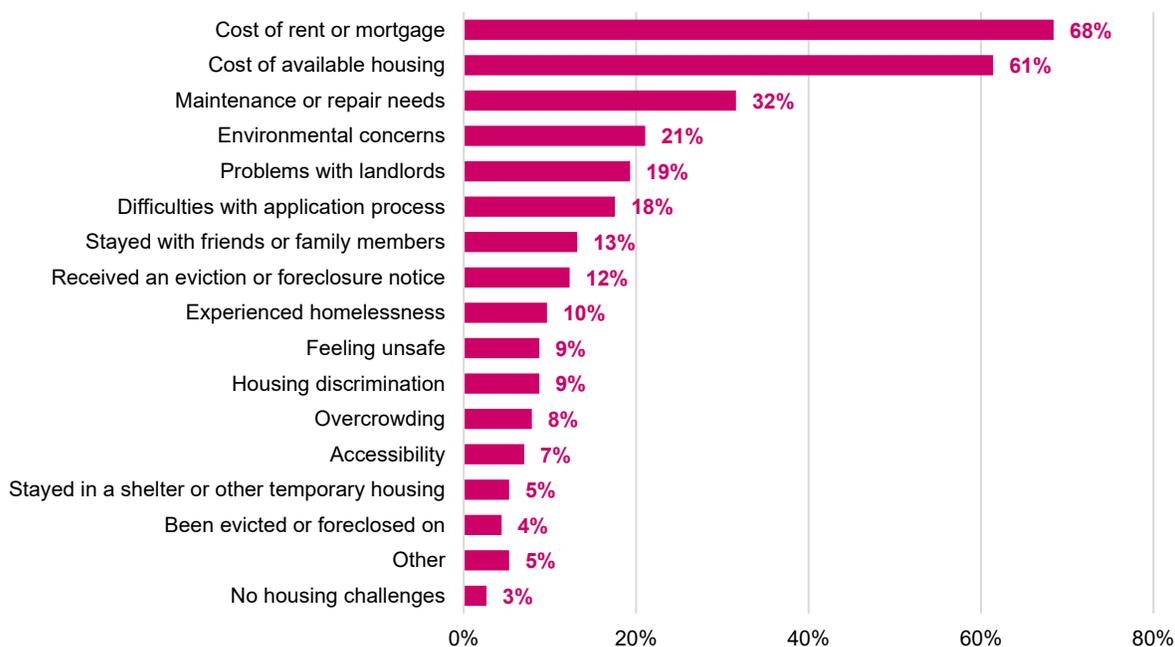
Zip Code	Number of Respondents by Zip Code	Number of Respondents with Any Neighborhood Safety-related Challenges	Percentage of Respondents Within Zip Code with Any Safety-related Challenges
49544	54	4	7%
49546	31	2	6%
49548	27	6	22%

N = 114

Housing

Of respondents who had housing challenges, 68 percent said they had challenges with the cost of rent or their mortgage, and 61 percent said the cost of available housing is an issue (Exhibit A22). Nearly one-third said they had maintenance or repair needs, and 21 percent had environmental concerns related to housing. Nearly 20 percent each had problems with landlords or difficulty with the application process. Additionally, 13 percent had stayed with friends or family members, 12 percent had received an eviction or foreclosure notices, and 10 percent had experienced homelessness.

EXHIBIT A22. Percentage Who Had Housing-related Challenges



N = 114

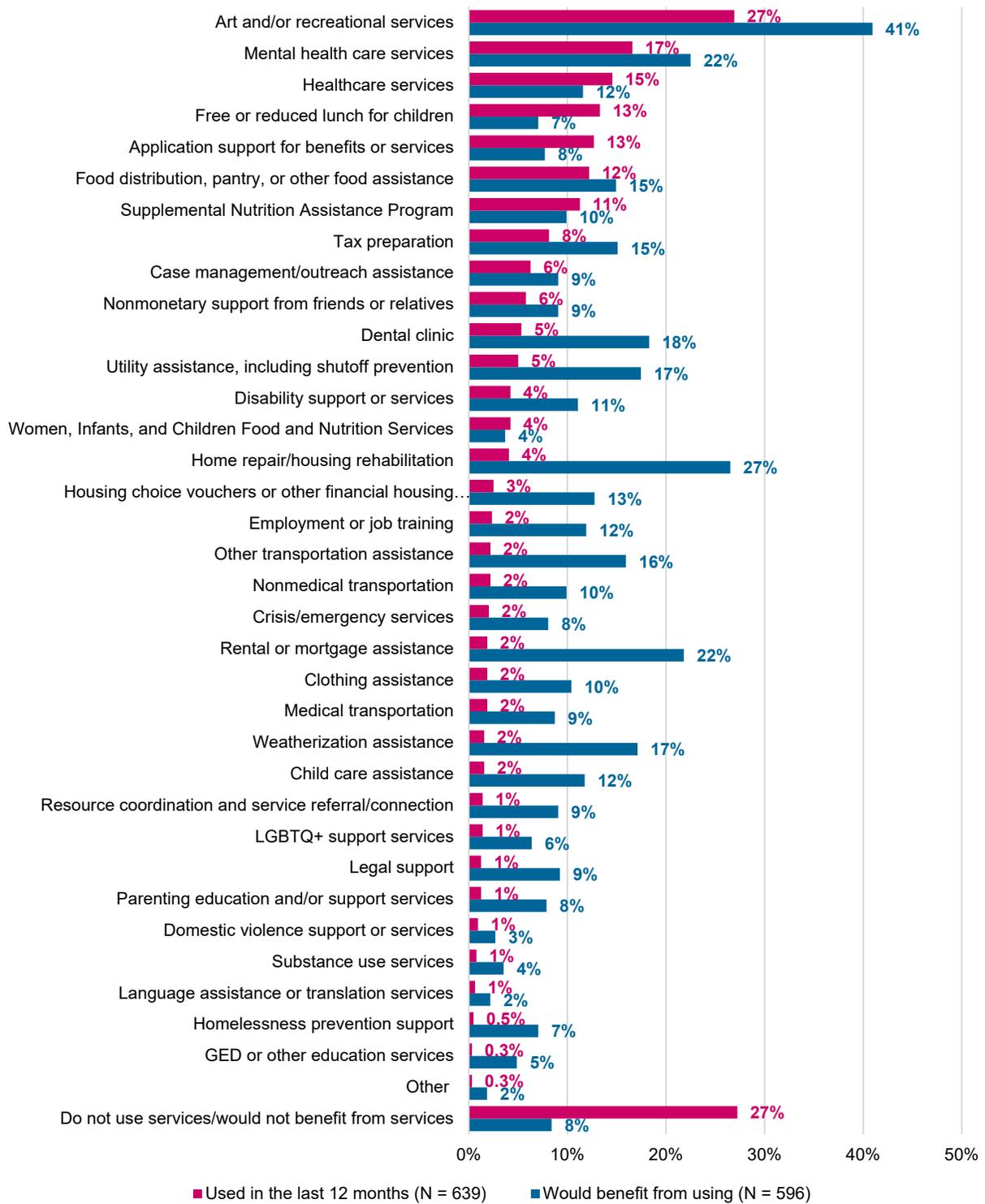
Note: Percentages total more than 100 because more than one response could be chosen. "Other" responses included high cost of living, high cost of home insurance and home repairs, and high cost of utilities.

Services

Survey participants were given a list of 34 support services and were asked to check whether they had used the service in the last 12 months and if they or their family would benefit from receiving the service. The support service used by the largest percentage of respondents was art and/or recreational services, used by 27 percent of respondents (Exhibit A23). This was also the service that the most respondents (41 percent) said they would benefit from receiving. Similarly, 17 percent of respondents received mental health services and 22 percent said they would benefit from those services.

Many of the services that were only being used by a small percentage of respondents had a relatively large percentage of respondents who said they would benefit from receiving them. For example, while only 4 percent of respondents said they received home repair or housing rehabilitation services, 27 percent said they would benefit from those services. Likewise, only 2 percent of respondents had received rental or mortgage assistance, but 22 percent said they would benefit.

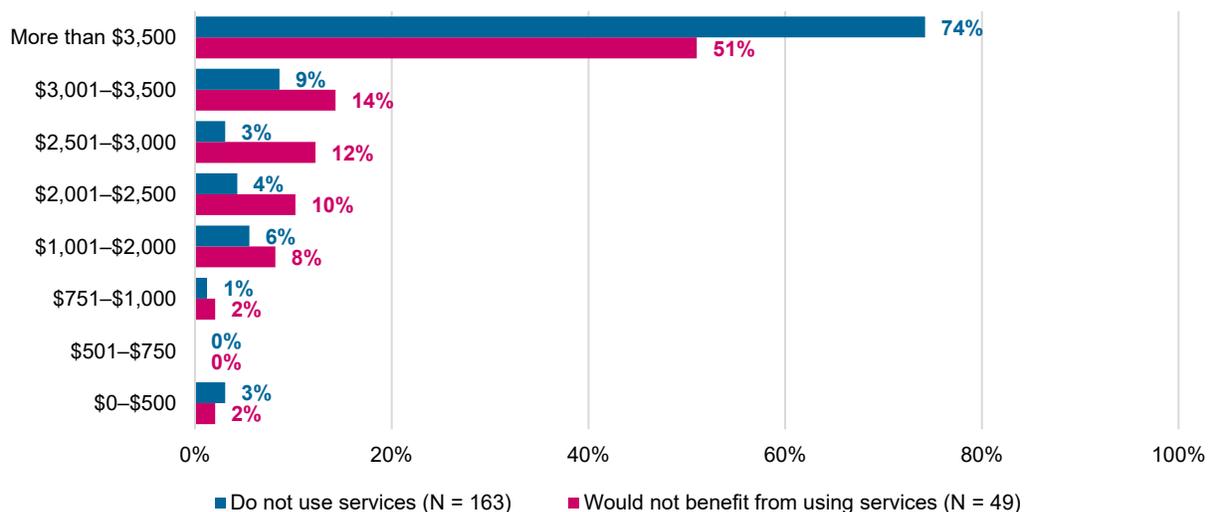
EXHIBIT A23. Percentage Who Used and Would Benefit from Using a Support Service



N varied by response.
 Note: Percentages total more than 100 because more than one response could be chosen.

Nearly three-quarters of those who said they do not use any services and over half of those who said that would not benefit from using services have a household pretax monthly income of more than \$3,500 (Exhibit A24).

EXHIBIT A24. Percentage Who Do Not Use and Would Not Benefit from Using a Support Service by Income



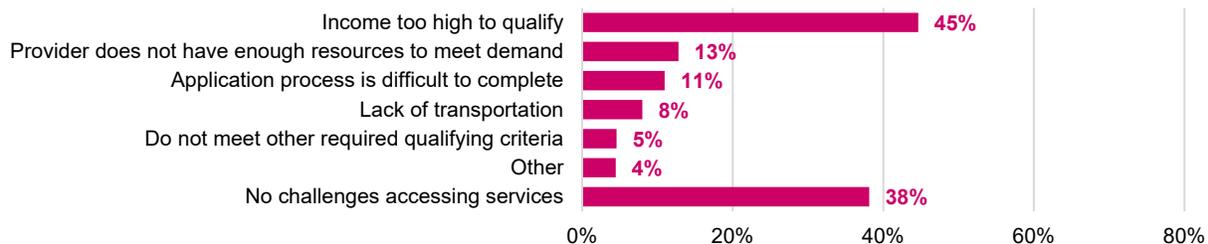
N varied by response.

Note: Percentages total more than 100 because more than one response could be chosen.

Service Access Challenges

While 38 percent of respondents said they had not had challenges accessing services, 45 percent said they could not access services because their income is too high to qualify (Exhibit A25). Additionally, 13 percent said the service provider does not have enough funding or staffing to meet the demand for services, and 11 percent said the application process is difficult to complete.

EXHIBIT A25. Percentage Who Had Challenges Accessing Services



N = 876

Note: Percentages total more than 100 because more than one response could be chosen.

Appendix B. Provider Survey Summary

Kent County Community Action

Provider Community Needs Assessment Survey Results

April 2023

Survey Respondents

Public Sector Consultants received 62 survey responses, most of which included the name of the organization the respondent represented. The names of these organization are in Exhibit B1.

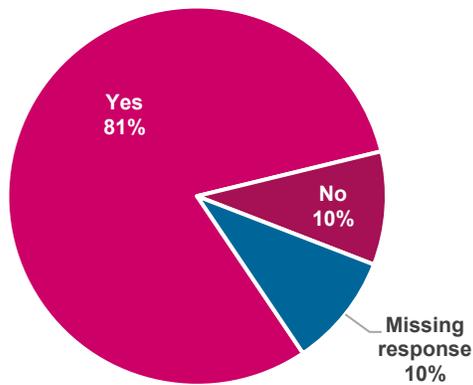
EXHIBIT B1. Represented Organizations

- Area Agency on Aging of Western Michigan
- Bates Place Neighbors
- Boys & Girls Clubs of Grand Rapids
- City of Walker
- Community Food Club
- Court Appointed Special Advocates of Kent County
- Coventry Woods Apartments
- CSNIP
- Dwelling Place
- Fair Housing Center of West Michigan
- Family Promise of Grand Rapids
- Flat River Outreach Ministries
- Fuller Avenue Christian Reformed Church
- Gaylord House Apartments
- Gilda's Club Grand Rapids
- Godwin Heights Public Schools
- Goodwill Industries of Greater Grand Rapids
- Grand Rapids Community College
- Grand Rapids Housing Commission
- Grandville Avenue Arts & Humanities
- Grattan Township
- Guiding Light
- Health Net of West Michigan
- HealthBar
- Helping Our Adolescents Prosper (HOAP)
- Home Repair Services of Kent County
- Interurban Transit Partnership—The Rapid
- Kent District Library
- Kent Intermediate School District Adult Education
- Kent School Services Network
- Lake Michigan Academy
- Lowell Area Chamber of Commerce
- Matthew's House Ministry
- Meals on Wheels of Western Michigan—Senior Pantry
- Michigan Department of Health and Human Services
- Michigan Family Resources/Head Start for Kent County
- New City Kids, Inc.
- Noorthoek Academy
- Northview Senior Citizens
- Northwest Food Pantry
- Oakfield Township
- Puertas Abiertas
- Reliance Community Care Partners
- Rockford Freshman Center
- Tamarisk Apartments
- The Other Way Ministries
- The Salvation Army
- United Church Outreach Ministry
- University of Michigan Health-West
- Village of Kent City
- Volunteers In Service
- Well House

Note: Two responses each were received from staff at the Michigan Department of Health and Human Services and the Grand Rapids Housing Commission; eight respondents did not provide their organization name.

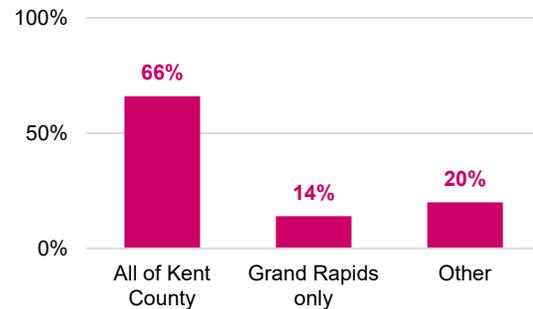
More than 80 percent of respondents said their organization provides direct services to clients in Kent County (Exhibit B2). Among those providing direct services, about two-thirds served all of Kent County, and 14 percent served only the City of Grand Rapids (Exhibit B3). More than two-thirds (68 percent) represented nonprofit organizations, 23 percent worked for government agencies, and 13 percent were from faith-based agencies (Exhibit B4).

EXHIBIT B2. Percentage of Respondents Providing Direct Services



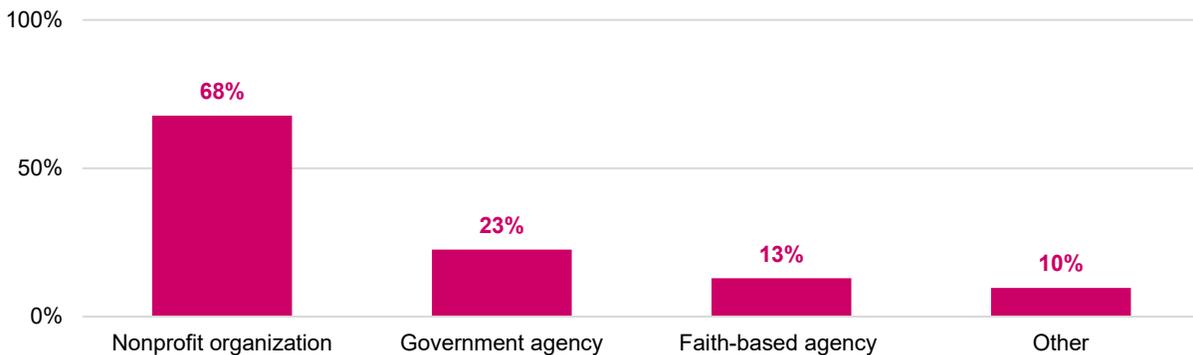
N = 62
 Note: Percentages total more than 100 due to rounding.

EXHIBIT B3. Kent County Communities Served



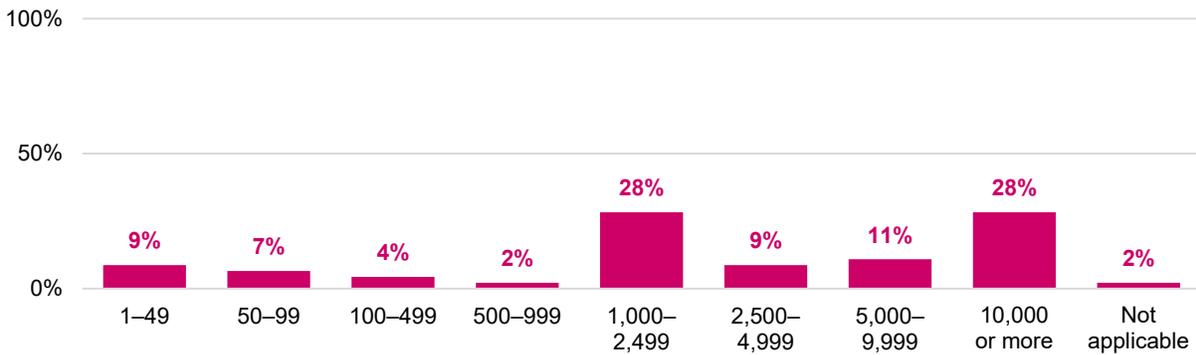
N = 50
 Note: "Other" responses included: the Belknap Lookout Neighborhood, Lowell Area School District, Northwest Grand Rapids, six Kent County cities, 45 partner schools across Kent County, and all who come to us.

EXHIBIT B4. Organization Type

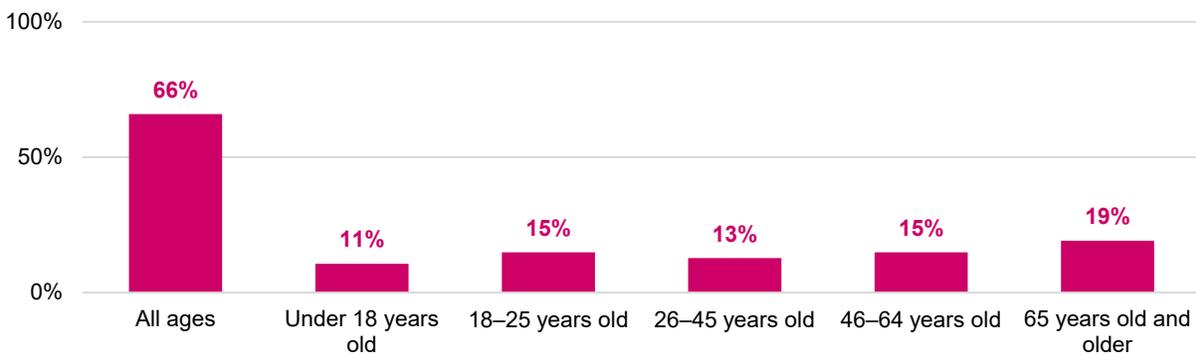


N = 62
 Note: Percentages total more than 100 because more than one response could be chosen; "other" responses included "school," a for-profit healthcare service provider, and two subsidized housing complexes.

More than one-quarter (28 percent) of respondents represented organizations that serve 1,000–2,499 people annually, and the same percentage worked for organizations that serve 10,000 or more people in a year (Exhibit B5). Around 10 percent each represented organizations that serve 2,500–4,999 people and 5,000–9,999 people. Approximately two-thirds worked for organizations that served all ages, 19 percent served those over 65 years old, and 11 percent served those under the age of 18 (Exhibit B6).

EXHIBIT B5. Number of Individuals Served Annually

N = 46

EXHIBIT B6. Age of Population Served

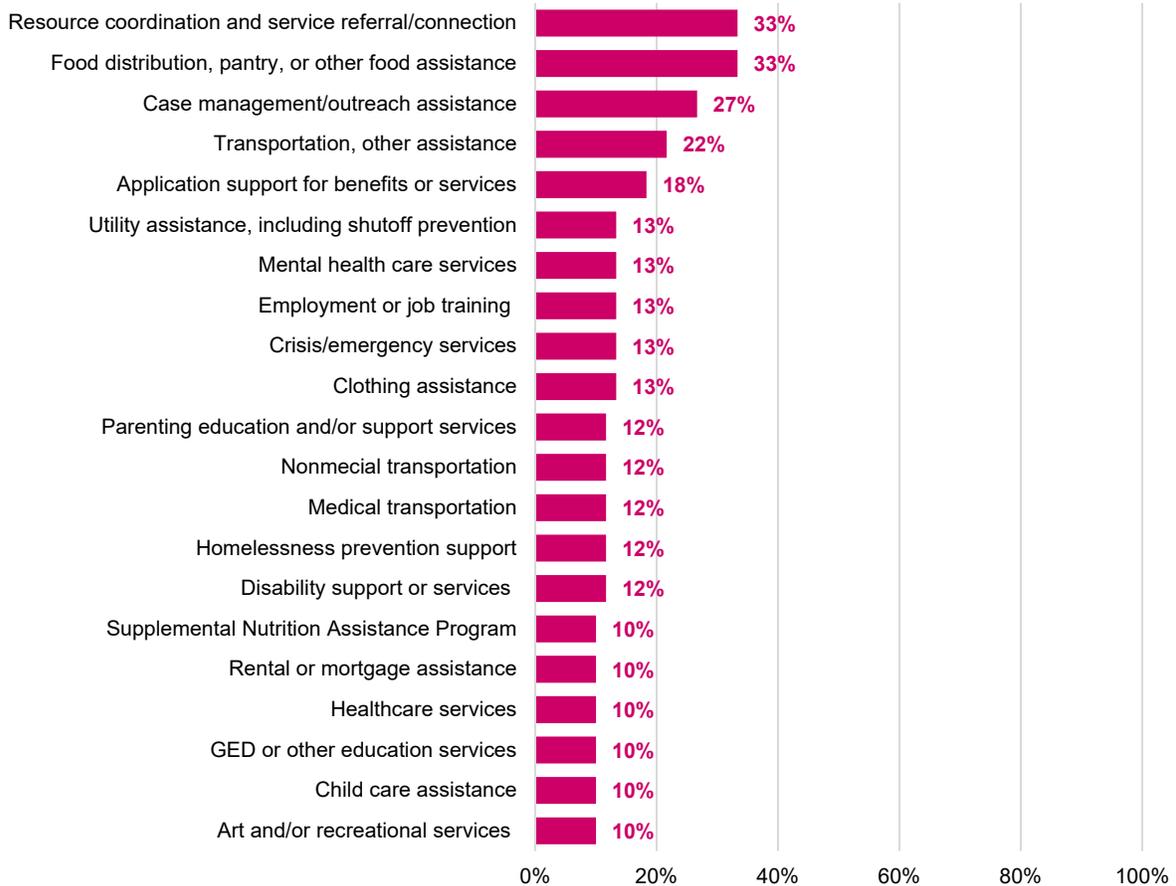
N = 47

Note: Percentages total more than 100 because more than one response could be chosen.

Services

One-third of respondents represented organizations that provided resource coordination and referral services and one-third represented organizations that provided food distribution, pantry, or other food assistance services (Exhibit B7). More than one-quarter offered case management or outreach assistance, and 18 percent offered application support for benefits and services. Nearly one-quarter (22 percent) offered transportation assistance, along with 12 percent each providing medical or nonmedical transportation.

EXHIBIT B7. Types of Services Provided⁸



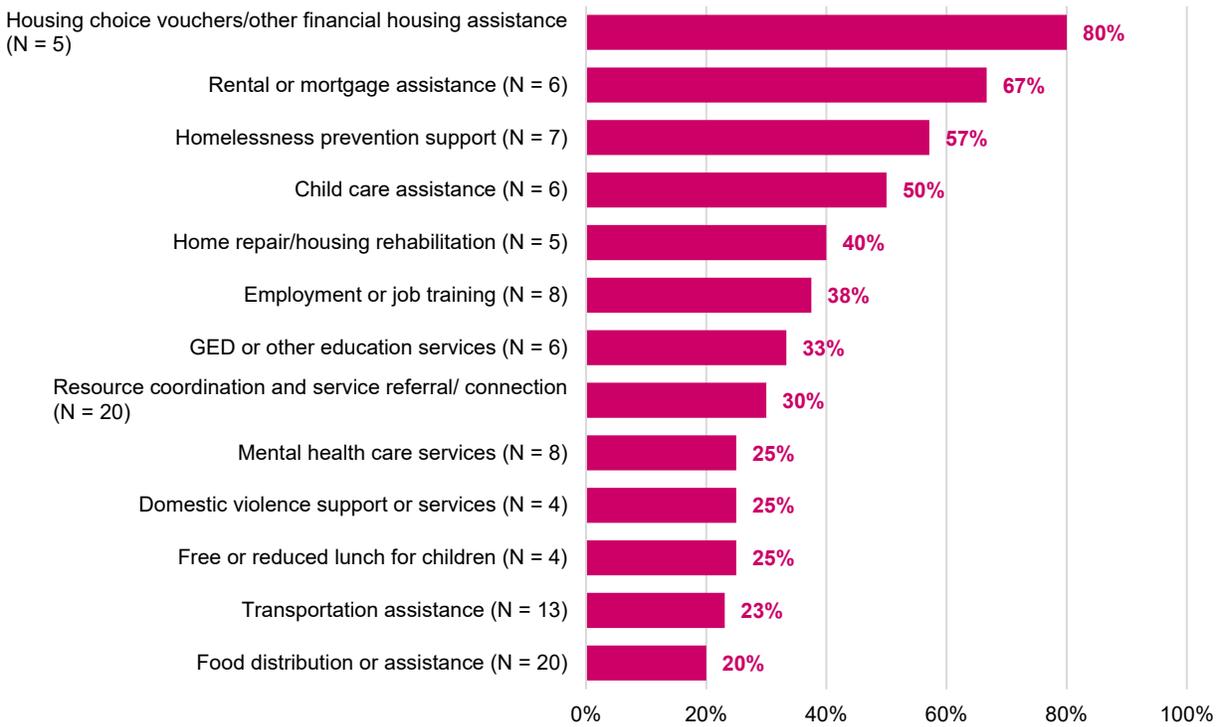
N = 60

Note: Percentage providing service totals more than 100 because more than one service could be chosen.

The largest percentage of respondents who said their organization was unable to meet client demand were among those providing housing assistance services. Of the five respondents providing housing choice vouchers or other financial housing assistance, 80 percent said their organizations were unable to meet client demand, as did 67 percent of those providing rental or mortgage assistance, and 57 percent of those providing homelessness prevention support (Exhibit B8). Additionally, 50 percent of those providing child care assistance said their organization was unable to meet demand, along with 40 percent providing home repair or housing rehabilitation services, 38 percent providing employment or job training services, and 33 percent providing GED or other education services.

⁸ The full list of services provided by respondents' organizations is in Exhibit 14.

EXHIBIT B8. Percentage Unable to Meet Client Demand, by Service Type⁹

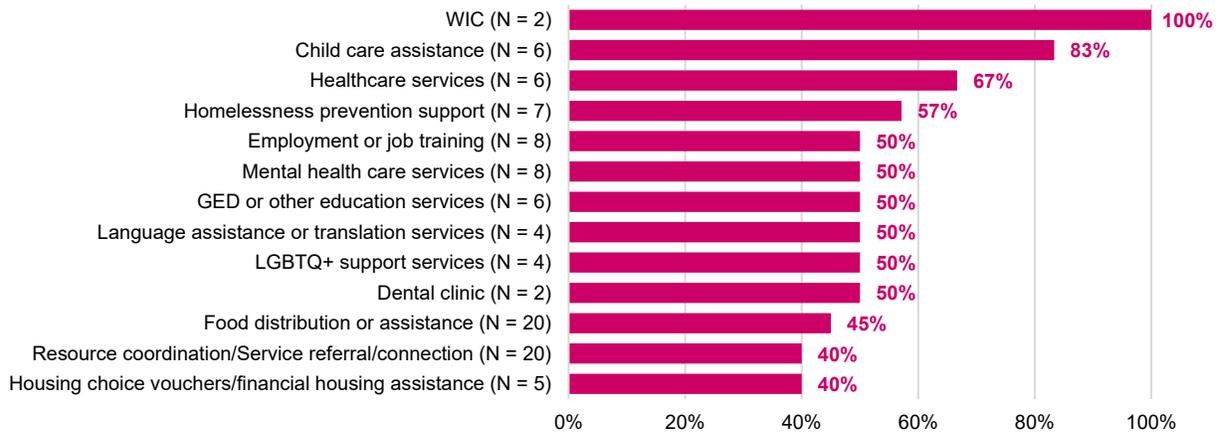


N varied by service type.

Areas where a large percentage of respondents said they could serve more people included WIC (100 percent), child care assistance (83 percent), healthcare services (67 percent), and homelessness prevention support (57 percent). Additionally, half of respondents providing employment or job training service, mental health care services, GED or other education services, language assistance or translation services, LGBTQ+ support services, or dental services said their organization could serve more people (Exhibit B9).

⁹ The full analysis of service areas within respondents' organizations that are unable to meet client demands is in Exhibit 14.

EXHIBIT B9. Percentage Who Could Serve More People, by Service Type



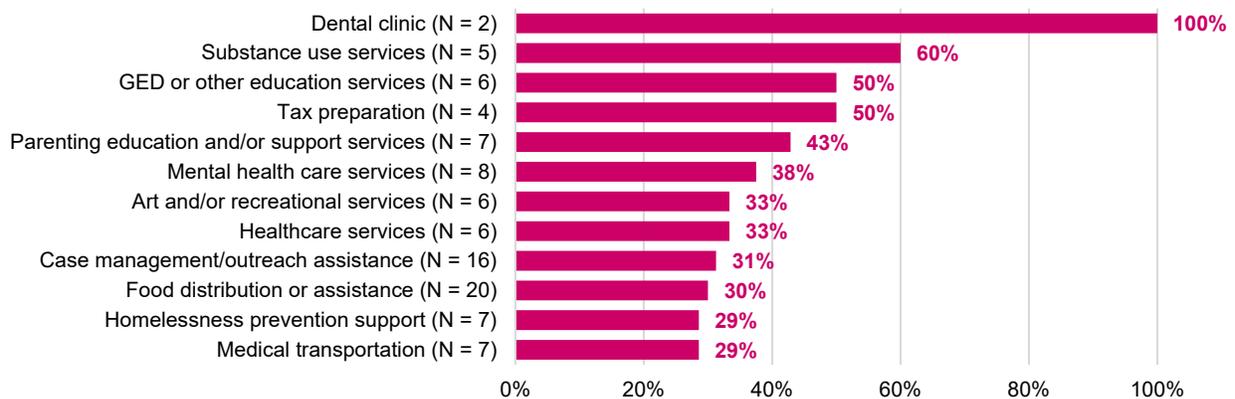
N varied by service type.¹⁰

Note: In some cases, respondents said they were unable to meet client demand *and* were able to serve more people if needed. This may be due to misinterpretation of the survey question regarding the ability to serve more people if needed.

Service Duplication

Services that a large percentage of providers felt were being duplicated by another agency for the same population and service area included dental clinic services (100 percent), substance use services (60 percent), GED or other education services (50 percent), and tax preparation services (50 percent) (Exhibit B10).

EXHIBIT B10. Percentage Providing Services Duplicated by Other Agencies, by Service Type



N varied by service type.¹¹

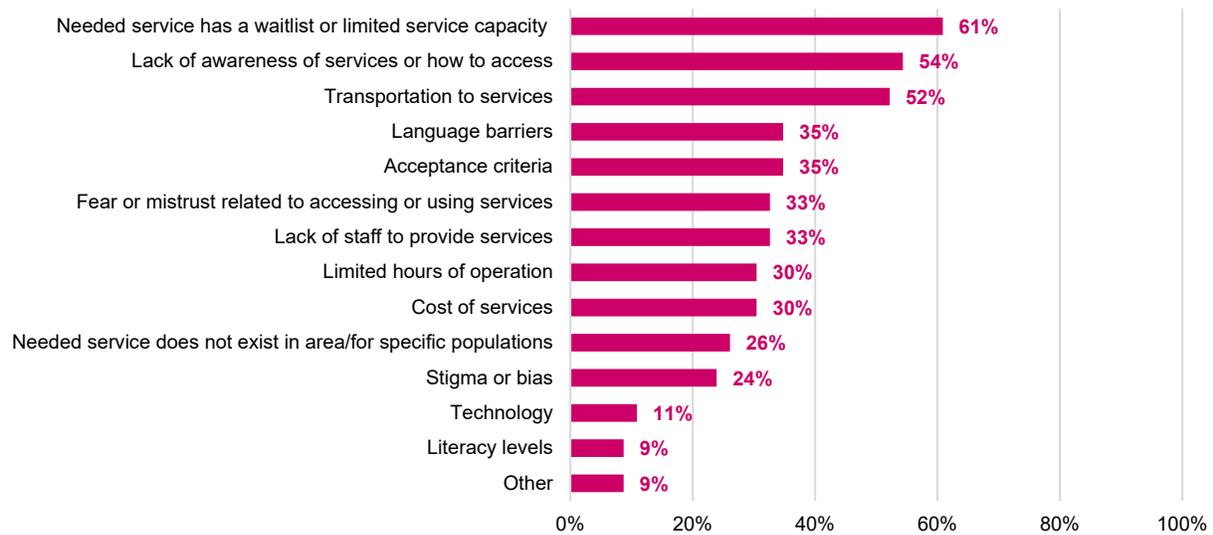
¹⁰ Full analysis of service areas within respondents' organizations that could serve more people if needed is in Exhibit 14.

¹¹ Full analysis of service areas within an agency that are being duplicated by another agency is in Exhibit 14.

Service Access Barriers

Nearly two-thirds of respondents said that one of the main barriers to accessing services is that the service has a waitlist or limited service capacity (Exhibit B11). More than half each said a main barrier was lack of awareness of services or how to access them or lack of transportation to services. More than one-third said language barriers or acceptance criteria were main service barriers, and one-third each said fear or mistrust related to accessing services or lack of staff to provide services were main barriers.

EXHIBIT B11. Main Service Access Barriers

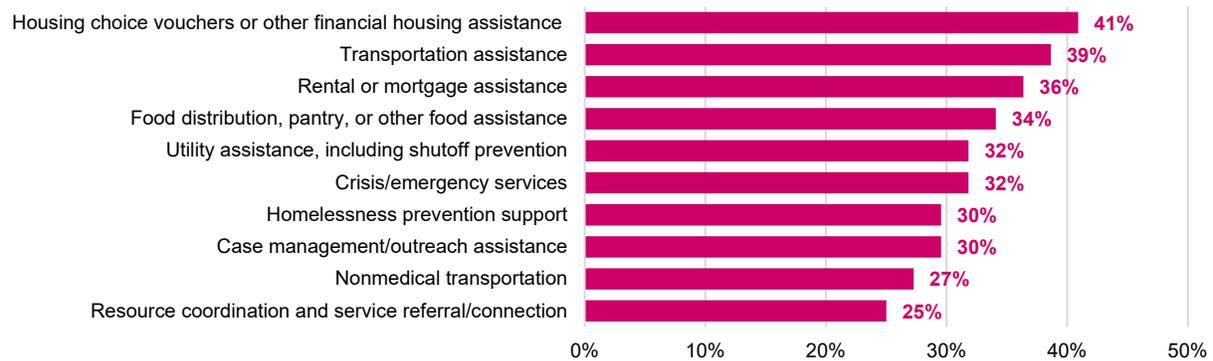


N = 46

Note: Percentages total more than 100 because more than one response could be chosen; "other" responses were: child care; knowing what the organization offers; not having enough volunteers; and services may not meet the need directly, be culturally competent, or be sustainable solutions.

The service most requested by the respondents' clients was housing choice vouchers or other financial housing assistance, with 41 percent of respondents saying their clients requested these services. The next most requested services were other transportation assistance (39 percent), rental or mortgage assistance (36 percent), and food distribution, pantry, or other food assistance, including senior meals (34 percent) (Exhibit B12).

EXHIBIT B12. Most Requested Services¹²



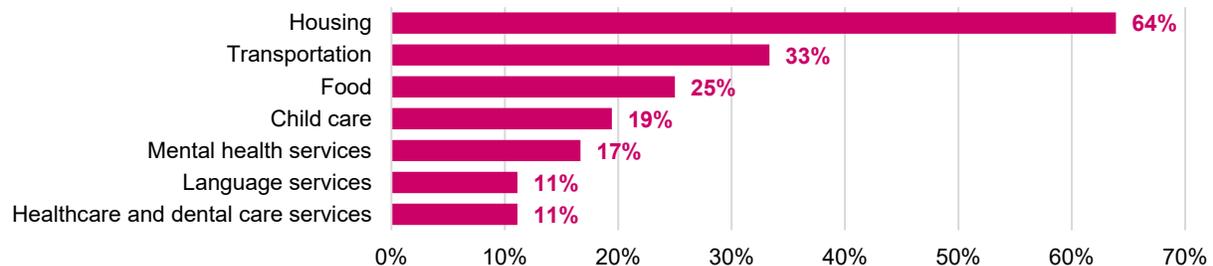
N = 44

Note: Percentages total more than 100 because more than one response could be chosen.

Community Needs

In response to an open-ended question that asked respondents to describe the top three critical needs in the community that are not being addressed or not addressed to the level needed, two-thirds included housing in their top three, one-third included transportation, and one-quarter said one of the three top needs was food (Exhibit B13). Other top critical needs mentioned by more than 10 percent of respondents were child care, mental health, language, and healthcare and dental services.

EXHIBIT B13. Top Three Critical Needs



N = 36

Note: Percentages total more than 100 because respondents each listed up to three needs.

In response to another open-ended question regarding community needs, most respondents said that housing was the community need that would be the biggest issue in the next three to five years. Additionally, respondents mentioned mental health services, healthcare, food, and transportation needs, as well as needs related to workforce, employment, financial stability, and the increasing cost of living.

¹² The full analysis of most requested services is in Exhibit 15.

Other issues named by at least one respondent included equitable education, public safety, child care, racism, utility costs, and polarizing politics.

Some reasons why they believed those will be the biggest issues and suggestions on how to address those issues included:

—

Affordable housing, mental health/healthcare, and cost of living/inflation. Unfortunately, these issues will also contribute to the increase of violence and other crime rates. Addressing these needs will take a multitude of things, this survey being one of them to gain insight regarding the major needs of our community, determining what services are already in place, measuring their impact/outcomes, and most importantly the attention and effort from the leaders who have the power to implement new and or additional services to develop and execute a plan of action to bring forth the change we want to see within our community.

—

Food and medical security—reinstating the Medicaid waiver program and reduced FAP [Food Assistance Program] after COVID ER allocations (COVID is not over and people are still getting sick, dying, or getting LTC [long-term COVID] due to multiple cases over the past two years) is going to really set back people who have proven they cannot take care of themselves or their family—see all the folks in shelters or experiencing homelessness unsheltered. We really need to stand as a state (even as a county) and say enough is enough—let people have their stamps, let folks get on Medicaid—we should really make sure every citizen has an equal footing on food and insurance.

—

Access to food, transportation, and too many programmatic restrictions—more mobile food sites closer to people's homes, more transportation resources that are quick and convenient (uber/Lyft), advocacy on changing the poverty guideline to be more realistic/not taking into account costs across different economies and the cost of living.

—

Affordable Housing/Homelessness, Mental Health, and Racism. These can be addressed by working collectively on the CHNA/CHIP [community health needs assessment/community health implementation plan].

Food accessibility—people without transportation have trouble getting to pantries or getting food delivered. It would be helpful if pantries could be delivered.

Affordable housing will be the biggest issue that Kent County will be facing in the next five years. This market is not sustainable. We need to address affordable housing, beginning with emergency services by bringing in new shelter units for families with children. The City of Grand Rapids and neighboring communities need to look at policy opportunities to create rental/ownership housing for those living below 100 percent AMI [area median income].

Available housing at all levels, especially for low-moderate income families. Kent County is becoming a more and more popular place to live and raise a family, but existing families are being priced out of town. Need to build more housing.

Affordable housing—continued housing price increases along with a growing local population of younger professionals unable to afford a home.

Affordable housing—very little in the Lowell area is available, most county resources are focused on more populated areas and Lowell is not eligible for rural resources; funding is the most critical piece.

Expansion of Grand Valley [State University] taking up housing stock. Grand Valley needs to build more dorms or invest money into building housing stock to remediate its effects on the community.

Sustainable employment/income with living wages—folks should not have to work three jobs just to pay rent and take care of their family—real jobs with sensible hours with quality insurance through employers should help ease families' burdens.

Workforce participation rate—employers are going to struggle to find workers. Individuals need to remove some of the barriers keeping them out of the workforce, child care, health, housing etc. And employers need to be more flexible on how and when people can work.

Lack of direct care staff and availability of healthcare professionals. Increase wages, training and education, exposure to the field, and target specific populations to fill this need.

Talent—Need to attract younger and middle-aged talent to maintain and improve upon business growth and success.

Medical and nonmedical transportation—It's a problem for all ages, but especially non-seniors and single moms with small children. The cost and the logistics make it unrealistic to expect single moms to take their small children on the bus to various appointments, especially during winter months. It can be difficult for non-seniors to afford transportation when it's not subsidized.

Additional Survey Results

The following tables show the full survey results for one or more survey questions. The question(s) for which the data are presented is listed above the table.

- Which of the following best describes the type of services you provide?
- What service areas within your organization are unable to meet client demand?
- What service areas within your organization could serve more people if needed?
- Do you think any of the services that you agency provides are being duplicated by another agency for the same population and service area?

EXHIBIT B14. Service Provision

Service Provided	Number Providing Service	Percentage Providing Service	Percentage Unable to Meet Demand	Percentage Able to Serve More People	Percentage of Services Duplicated
Resource coordination and service referral/connection	20	33%	30%	40%	25%
Food distribution, pantry, or other food assistance, including senior meals	20	33%	20%	45%	30%
Case management/outreach assistance	16	27%	13%	38%	31%
Transportation, other assistance	13	22%	23%	8%	8%
Application support for benefits or services	11	18%	9%	27%	0%
Employment or job training	8	13%	38%	50%	25%
Mental health care services	8	13%	25%	50%	38%
Crisis/emergency services	8	13%	13%	13%	13%
Utility assistance, including shutoff prevention	8	13%	13%	25%	25%
Clothing assistance	8	13%	0%	38%	13%
Homelessness prevention support	7	12%	57%	57%	29%
Disability support or services	7	12%	14%	29%	14%
Transportation, medical	7	12%	14%	29%	29%
Transportation, nonmedical	7	12%	14%	29%	14%
Parenting education and/or support services	7	12%	14%	29%	43%
Rental or mortgage assistance	6	10%	67%	17%	17%
Child care assistance	6	10%	50%	83%	17%
GED or other education services	6	10%	33%	50%	50%

Service Provided	Number Providing Service	Percentage Providing Service	Percentage Unable to Meet Demand	Percentage Able to Serve More People	Percentage of Services Duplicated
Art and/or recreational services	6	10%	17%	17%	33%
Healthcare services	6	10%	17%	67%	33%
Supplemental Nutrition Assistance Program	6	10%	0%	33%	0%
Housing choice vouchers or other financial housing assistance	5	8%	80%	40%	20%
Home repair/housing rehabilitation	5	8%	40%	20%	0%
Substance use services	5	8%	0%	20%	60%
Domestic violence support or services	4	7%	25%	25%	25%
Free or reduced lunch for children	4	7%	25%	0%	25%
Language assistance or translation services	4	7%	0%	50%	0%
LGBTQ+ support services	4	7%	0%	50%	25%
Tax preparation	4	7%	0%	25%	50%
Dental clinic	2	3%	0%	50%	100%
Weatherization assistance	2	3%	0%	0%	0%
Women, Infants, and Children Food and Nutrition Service (WIC)	2	3%	0%	100%	0%
Legal support	0	0%	0%	0%	0%
Other ¹³	14	23%	21%	43%	14%
Our organization does not provide services	5	8%	0%	0%	0%

Note: Total number providing any service is 60; percentage providing service totals more than 100 because more than one service could be chosen; percentages unable to meet client demand, able to provide more services, and providing duplicative services are out of the number providing that service. In some cases, respondents said they were unable to meet client demand *and* were able to serve more people if needed. Cases where those who stated they were unable to meet demand and those who stated they were able to serve more people total more than 100 percent have been highlighted.

¹³ “Other” responses were: advocacy for children who are wards of the court because of abuse or neglect; community development; community resources and events; financial education, nutrition classes, exercise classes, and gardening programs; friendly visitor, mother’s helper, and yard work; housing services; literacy resources and Teach Access; low-cost veterinary care; out-of-school-time youth programming; social and emotional support for people affected by cancer or grief; and youth development: after school programming and workforce readiness.

- Which services are most requested by your clients?

EXHIBIT B15. Most Requested Services

Service Type	Number of Respondents	Percentage of Respondents
Housing choice vouchers or other financial housing assistance	18	41%
Transportation assistance (e.g., bus passes, vehicle repair assistance)	17	39%
Rental or mortgage assistance	16	36%
Food distribution, pantry, or other food assistance, including senior meals	15	34%
Utility assistance, including shutoff prevention	14	32%
Crisis/emergency services	14	32%
Homelessness prevention support	13	30%
Case management/outreach assistance	13	30%
Nonmedical transportation	12	27%
Resource coordination and service referral/connection	11	25%
Mental health care services	10	23%
Application support for benefits or services (e.g., applying for Medicaid)	10	23%
Disability support or services	8	18%
Healthcare services	8	18%
Transportation, medical	8	18%
Employment or job training	7	16%
Home repair/housing rehabilitation	7	16%
Child care assistance	7	16%
Supplemental Nutrition Assistance Program (SNAP, food assistance)	6	14%
Tax preparation	6	14%
Art and/or recreational services	6	14%
Clothing assistance	5	11%
Substance use services	5	11%
Dental clinic	4	9%
Domestic violence support or services	4	9%
GED or other education services	4	9%
Language assistance or translation services	4	9%
LGBTQ+ support services	4	9%
Parenting education and/or support services	4	9%
Legal support	3	7%

Service Type	Number of Respondents	Percentage of Respondents
Weatherization assistance	2	5%
Women, Infants, and Children Food and Nutrition Service (WIC)	2	5%
Free or reduced lunch for children	0	0%
Other ¹⁴	6	14%

N = 44

Note: Percentages total more than 100 because more than one response could be chosen.

¹⁴ “Other” responses were: advocacy for children who have experienced abuse and neglect; basic financial education; fair housing services related to investigation of housing discrimination and education and outreach related to fair housing; increased service hours and expanded outreach; low-cost veterinary care; and making referrals for other senior programming.

Appendix C. Community Survey

Kent County Community Action Community Needs Assessment

Introduction

Welcome to the Kent County Community Action's (KCCA's) Community Needs Assessment survey! As an organization, we are dedicated to serving our community. If you live in Kent County, we want to hear from you! The responses to this survey will help us better understand the community's needs and how to address them.

Your participation in the survey is voluntary, and your answers are confidential. No identifying information, such as your name or contact information, is required to complete the survey. However, you will be invited to enter a drawing for a \$50 utility credit after completing the survey. If you choose to provide your contact information for the drawing, this information will be collected at the end of the survey on a separate page to keep your responses anonymous.

Thank you for your participation!

Instructions

Please respond to each question to the best of your ability. Note that some questions require one answer, while for others, you may choose multiple responses. The survey will take about **ten minutes**.

Demographic Information

1. What is your zip code? Please write clearly _____
2. What is your age? Select one.
 - Under 18 years of age
 - 18–24
 - 25–39
 - 40–54
 - 55–64
 - 65 or older
3. Which of the following best represents your race and ethnicity? Select all that apply.
 - African American or Black
 - American Indian or Alaska Native
 - Asian
 - Middle Eastern or North African
 - Native Hawaiian or Pacific Islander
 - White/Caucasian
 - Hispanic or Latino/a/x
 - Another race, please describe: _____

4. What is your gender identity? Select one.

- Female
- Male
- Transgender female
- Transgender male
- Nonbinary
- Prefer to self-describe: _____

5. What is the highest level of school you completed? Select one.

- Less than ninth grade
- Some high school
- High school graduate or equivalency (includes GED)
- Some college
- Associate's degree or technical certification
- Bachelor's degree
- Graduate degree

6. What is the primary language used in your household? Select one.

- English
- Spanish
- Asian or Pacific Islander languages
- Indo-European languages
- Other, please describe: _____

7. Please provide the following household information. If none, enter "0."

- Number of adults (18 or older), including yourself _____
- Number of children(17 or younger) _____
- Number of people who have a disability _____
- Number of people who have veteran status _____

8. What is your household's pretax monthly income? Select one.

- \$0-\$500
- \$501-\$750
- \$751-\$1,000
- \$1,001-\$2,000
- \$2,001-\$2,500
- \$2,501-\$3,000
- \$3,001-\$3,500
- More than \$3,500

9. What is your current housing situation? Select one.

- Homeowner
- Renter
- Staying with friends or family
- Staying in temporary housing (e.g., shelter)
- Staying in a location not meant for human habitation (e.g., tent, vehicle, unsheltered)
- Other, please describe: _____

10. Which of the following best describes your current employment status? Select all that apply.

- Employed full time
- Employed part time
- Employed part time, but would prefer full-time work
- Overqualified for current position
- Unemployed and currently job searching
- Other, please describe: _____
- Unemployed and not currently job searching
- Unemployed by choice
- Unable to work
- Retired
- Student

11. What healthcare coverage do you have? Select all that apply.

- Medicare
- Medicaid/Healthy Michigan Plan
- MICHild (17 or younger)
- TRICARE/military health coverage
- Employer sponsored
- Direct or self-purchased, private policy
- Uninsured
- Other, please describe: _____

Individual Needs Assessment

12. Overall, is your quality of life better or worse than it was 12 months ago?

- Better
- Worse
- About the same

13. Do you see yourself as a person experiencing poverty?

- Yes
- No
- I don't know

14. Which of the following issues have been a challenge for you or a member of your household in the last 12 months? Select all that apply.

- Income or finances
- Employment
- Education and/or job training
- Housing, including housing discrimination
- Healthcare and health insurance, including prescription medication
- Physical health (e.g., chronic illness)
- Transportation
- Food or nutrition
- Utilities or home repair/maintenance
- Caring for aging and/or disabled family member(s)
- Child care
- Other (please describe): _____
- I have not had any issues or obstacles
- Former incarceration and/or criminal conviction
- Dental care
- Language barriers
- Legal issues
- Mental health
- Physical or cognitive disability, including mobility
- Physical safety
- Neighborhood safety
- Racial discrimination or prejudice
- Refugee or immigration status
- Social or family support
- Substance use

15. If employment has been an issue for you, which of the following challenges have you experienced in the last 12 months? Select all that apply.

- Lack of jobs
- Limited or no transportation
- Limited or no training or education for available jobs
- Former incarceration and/or criminal conviction
- Limited or no child care
- Limited or no access to internet or technology
- Limited or no access to personal hygiene facilities (e.g., shower, laundry)
- Mental/emotional health
- Substance use
- Physical disability
- Cognitive or developmental disability
- Language or literacy barriers
- Immigration or refugee status
- Other, please describe: _____
- I do not have employment challenges

16. If housing has been an issue for you, which of the following challenges have you experienced in the last 12 months? Select all that apply.

- Cost of available housing
- Cost of rent or mortgage
- Received an eviction or foreclosure notice
- Been evicted or foreclosed on
- Difficulties with the application process (e.g., requirements, application fee)
- Experienced homelessness
- Stayed with friends or family members
- Stayed in a shelter or other temporary housing
- Other, please describe: _____
- I do not have housing challenges
- Problems with landlords
- Overcrowding (e.g., multiple families in a single unit)
- Accessibility (e.g., wheelchair accessible, difficulty with stairs)
- Environmental concerns (e.g., lead, mold, pests)
- Maintenance or repair needs
- Feeling unsafe
- Housing discrimination

17. If healthcare access or coverage have been an issue for you, which of the following challenges have you experienced in the last 12 months? Select all that apply.

- Service costs are too high
- Prescription costs are too high
- Fear of exposure to COVID-19 or another infectious disease
- No transportation to get to and from appointments
- Lack of available healthcare services in the area
- Could not get an appointment when needed or waiting list was too long
- Other, please describe: _____
- I do not have healthcare challenges
- Too busy with work or other commitments
- Language barriers
- Do not have insurance or are underinsured
- Fear or mistrust of the healthcare system
- Unsure of who to call
- Embarrassment or shame

18. If transportation has been an issue for you, which of the following have you experienced in the last 12 months? Select all that apply.

- I do not have a current driver's license
- I do not have access to a vehicle
- My vehicle is unreliable or needs repairs
- I cannot access public transportation when or where I need it
- Fuel is too expensive
- Other, please describe: _____
- I do not have transportation challenges

19. If food or nutrition have been an issue for you, which of the following needs or challenges have you experienced in the last 12 months? Select all that apply.

- I have been unable to meet my and my household's food needs
- I have had to rely on a food pantry, free meals, or donations to feed myself/my household
- I have or someone in my household has gone without a meal because of cost
- My or my family's food assistance ran out before the next monthly allotment
- I have been unable to access fresh fruits and/or vegetables
- Other, please describe: _____
- I do not have any food or nutrition challenges

20. If neighborhood safety has been an issue for you, which of the following challenges have you experienced in the last 12 months? Select all that apply.

- My neighborhood feels unsafe (e.g., high crime rate)
- There is a high police presence in my neighborhood
- There is not enough police presence in my neighborhood (e.g., delayed police response)
- I have experienced discrimination in my neighborhood (e.g., from my landlord, neighbors)
- One or more of the people I live with makes me feel unsafe
- Infrastructure (e.g., roads, utility lines, streetlights) is missing or broken
- Other, please describe: _____
- I do not have any neighborhood safety challenges

Service Delivery

21. Which of the following support services have you used in the last 12 months and which would you or your family benefit from receiving? Select all that apply.

	Current Use	Would Benefit from Using
Art and/or recreational services	<input type="checkbox"/>	<input type="checkbox"/>
Application support for benefits or services (e.g., applying for Medicaid)	<input type="checkbox"/>	<input type="checkbox"/>
Case management/outreach assistance	<input type="checkbox"/>	<input type="checkbox"/>
Child care assistance	<input type="checkbox"/>	<input type="checkbox"/>
Clothing assistance	<input type="checkbox"/>	<input type="checkbox"/>
Crisis/emergency services	<input type="checkbox"/>	<input type="checkbox"/>
Dental clinic	<input type="checkbox"/>	<input type="checkbox"/>
Disability support or services	<input type="checkbox"/>	<input type="checkbox"/>
Domestic violence support or services	<input type="checkbox"/>	<input type="checkbox"/>
Employment or job training	<input type="checkbox"/>	<input type="checkbox"/>
Food distribution, pantry, or other food assistance, including senior meals	<input type="checkbox"/>	<input type="checkbox"/>
Free or reduced lunch for children	<input type="checkbox"/>	<input type="checkbox"/>
GED or other education services	<input type="checkbox"/>	<input type="checkbox"/>
Healthcare services	<input type="checkbox"/>	<input type="checkbox"/>
Home repair/housing rehabilitation	<input type="checkbox"/>	<input type="checkbox"/>
Homelessness prevention support	<input type="checkbox"/>	<input type="checkbox"/>
Housing choice vouchers or other financial housing assistance	<input type="checkbox"/>	<input type="checkbox"/>
Language assistance or translation services	<input type="checkbox"/>	<input type="checkbox"/>
Legal support	<input type="checkbox"/>	<input type="checkbox"/>
LGBTQ+ support services	<input type="checkbox"/>	<input type="checkbox"/>
Mental health care services	<input type="checkbox"/>	<input type="checkbox"/>
Transportation, medical	<input type="checkbox"/>	<input type="checkbox"/>
Transportation, nonmedical	<input type="checkbox"/>	<input type="checkbox"/>
Transportation, other assistance (e.g., bus passes, vehicle repair)	<input type="checkbox"/>	<input type="checkbox"/>
Nonmonetary support from friends or relatives (e.g., food, child care, transportation)	<input type="checkbox"/>	<input type="checkbox"/>
Parenting education and/or support services	<input type="checkbox"/>	<input type="checkbox"/>
Rental or mortgage assistance	<input type="checkbox"/>	<input type="checkbox"/>
Resource coordination and service referral/connection	<input type="checkbox"/>	<input type="checkbox"/>
Substance use services	<input type="checkbox"/>	<input type="checkbox"/>

	Current Use	Would Benefit from Using
Supplemental Nutrition Assistance Program (SNAP, food assistance)	<input type="checkbox"/>	<input type="checkbox"/>
Tax preparation	<input type="checkbox"/>	<input type="checkbox"/>
Utility assistance, including shutoff prevention	<input type="checkbox"/>	<input type="checkbox"/>
Weatherization assistance	<input type="checkbox"/>	<input type="checkbox"/>
Women, Infants, and Children Food and Nutrition Service (WIC)	<input type="checkbox"/>	<input type="checkbox"/>
Other, please describe: _____	<input type="checkbox"/>	<input type="checkbox"/>
I do not need any of these services	<input type="checkbox"/>	<input type="checkbox"/>

22. What challenges have you experienced when accessing community services? Select all that apply.

- Income too high to qualify
- Lack of transportation
- Application process is difficult to complete (e.g., don't have the right documents, application is confusing)
- The service provider does not have enough funding or staffing to meet the demand for services (i.e., there are waitlists)
- Do not meet other required qualifying criteria. Please describe: _____
- Other, please describe: _____
- I have not had challenges accessing services

23. What actions can KCCA take to eliminate poverty in Kent County?

Appendix D. Provider Survey

Provider Survey

Kent County Community Action Community Needs Assessment

January 2023

Introduction

Thank you for participating in this provider survey as part of the Kent County Community Action's (KCCA's) Community Needs Assessment. This provider survey should be completed by one individual at your organization. If you are not the right person to complete this survey, please share it with the appropriate person. The information gathered will help us better understand the current provider landscape in Kent County and how we are addressing the community's needs. We appreciate your knowledge and expertise as a provider and value your feedback.

Your participation in the survey is voluntary and your answers are confidential. Please respond to each question to the best of your ability. The survey will take about **ten minutes** to complete. If you have any questions about the survey, please reach out to Melissa Jimison at mjimison@publicsectorconsultants.com.

Questions

1. Name of organization: _____
2. How would you describe your organization? Select all that apply.
 - A nonprofit organization
 - Government agency
 - Faith-based agency
 - Other, please describe: _____
3. Which of the following best describes the type of services you provide? Select all that apply.

<input type="checkbox"/> Art and/or recreational services	<input type="checkbox"/> Dental clinic
<input type="checkbox"/> Application support for benefits or services (e.g., applying for Medicaid)	<input type="checkbox"/> Disability support or services
<input type="checkbox"/> Case management/outreach assistance	<input type="checkbox"/> Domestic violence support or services
<input type="checkbox"/> Child care assistance	<input type="checkbox"/> Employment or job training
<input type="checkbox"/> Clothing assistance	<input type="checkbox"/> Food distribution, pantry, or other food assistance, including senior meals
<input type="checkbox"/> Crisis/emergency services	<input type="checkbox"/> Free or reduced lunch for children

- | | |
|---|--|
| <input type="checkbox"/> GED or other education services | <input type="checkbox"/> Parenting education and/or support services |
| <input type="checkbox"/> Healthcare services | <input type="checkbox"/> Rental or mortgage assistance |
| <input type="checkbox"/> Home repair/housing rehabilitation | <input type="checkbox"/> Resource coordination and service referral/connection |
| <input type="checkbox"/> Homelessness prevention support | <input type="checkbox"/> Substance use services |
| <input type="checkbox"/> Housing choice vouchers or other financial housing assistance | <input type="checkbox"/> Supplemental Nutrition Assistance Program (SNAP, food assistance) |
| <input type="checkbox"/> Language assistance or translation services | <input type="checkbox"/> Tax preparation |
| <input type="checkbox"/> Legal support | <input type="checkbox"/> Utility assistance, including shutoff prevention |
| <input type="checkbox"/> LGBTQ+ support services | <input type="checkbox"/> Weatherization assistance |
| <input type="checkbox"/> Mental health care services | <input type="checkbox"/> Women, Infants, and Children Food and Nutrition Service (WIC) |
| <input type="checkbox"/> Transportation, medical | |
| <input type="checkbox"/> Transportation, nonmedical | |
| <input type="checkbox"/> Transportation, other assistance (e.g., bus passes, vehicle repair assistance) | |
| <input type="checkbox"/> Other, please describe: _____ | |
| <input type="checkbox"/> Our organization does not provide services [Skip to Q12] | |

4. Do you provide direct services to clients in Kent County?

- Yes
- No [Skip to Q12]

5. Which Kent County communities do you serve?

- | | |
|--|---|
| <input type="radio"/> All of Kent County | <input type="radio"/> Northeast Kent County |
| <input type="radio"/> Grand Rapids only | <input type="radio"/> Northwest Kent County |
| | <input type="radio"/> Southeast Kent County |
| | <input type="radio"/> Southwest Kent County |
| | <input type="radio"/> Other, please describe: _____ |

6. What is the age range of the population you serve? Select all that apply.

- Under 18 years old
- 18–25 years old
- 26–45 years old
- 46–64 years old
- 65 years old and older

7. Approximately how many individuals does your organization serve annually?

- 1–49
- 50–99
- 100–499
- 500–999
- 1,000–2,499
- 2,500–4,999
- 5,000–9,999
- 10,000 or more
- Not applicable

8. What service areas within your organization are unable to meet client demand (e.g., has a waitlist and/or denies access to services because of capacity)? Select all that apply. [Show list of services based on Q3 selections]

9. What service areas within your organization could serve more people if needed? Select all that apply. [Show list of services based on Q3 selections]

10. What services are most requested by your clients?

- | | |
|--|---|
| <input type="checkbox"/> Art and/or recreational services | <input type="checkbox"/> Language assistance or translation services |
| <input type="checkbox"/> Application support for benefits or services (e.g., applying for Medicaid) | <input type="checkbox"/> Legal support |
| <input type="checkbox"/> Case management/outreach assistance | <input type="checkbox"/> LGBTQ+ support services |
| <input type="checkbox"/> Child care assistance | <input type="checkbox"/> Mental health care services |
| <input type="checkbox"/> Clothing assistance | <input type="checkbox"/> Transportation, medical |
| <input type="checkbox"/> Crisis/emergency services | <input type="checkbox"/> Transportation, nonmedical |
| <input type="checkbox"/> Dental clinic | <input type="checkbox"/> Transportation, other assistance (e.g., bus passes, vehicle repair assistance) |
| <input type="checkbox"/> Disability support or services | <input type="checkbox"/> Parenting education and/or support services |
| <input type="checkbox"/> Domestic violence support or services | <input type="checkbox"/> Rental or mortgage assistance |
| <input type="checkbox"/> Employment or job training | <input type="checkbox"/> Resource coordination and service referral/connection |
| <input type="checkbox"/> Food distribution, pantry, or other food assistance, including senior meals | <input type="checkbox"/> Substance use services |
| <input type="checkbox"/> Free or reduced lunch for children | <input type="checkbox"/> Supplemental Nutrition Assistance Program (SNAP, food assistance) |
| <input type="checkbox"/> GED or other education services | <input type="checkbox"/> Tax preparation |
| <input type="checkbox"/> Healthcare services | <input type="checkbox"/> Utility assistance, including shutoff prevention |
| <input type="checkbox"/> Home repair/housing rehabilitation | <input type="checkbox"/> Weatherization assistance |
| <input type="checkbox"/> Homelessness prevention support | <input type="checkbox"/> Women, Infants, and Children Food and Nutrition Service (WIC) |
| <input type="checkbox"/> Housing choice vouchers or other financial housing assistance | |
| <input type="checkbox"/> Other, please describe: _____ | |

11. Do you think any of the services that your agency provides are being duplicated by another agency for the same population and service area? Select all services you think may be provided elsewhere. [Show list of services based on Q3 selections]
12. What are the main barriers to accessing services, generally?
- a. Needed service does not exist in area or for specific populations
 - b. Needed service has a waitlist or limited service capacity (e.g., not enough funding to meet demand)
 - c. Lack of awareness of services or how to access
 - d. Transportation to services
 - e. Cost of services
 - f. Acceptance criteria (e.g., geography, income limits, household size)
 - g. Limited hours of operation
 - h. Lack of staff to provide services
 - i. Language barriers
 - j. Literacy levels
 - k. Technology (e.g., service not offered virtually)
 - l. Stigma or bias
 - m. Fear or mistrust related to accessing or using services
 - n. Other, please describe: _____
13. List or describe the top three critical needs in the community that are not being addressed or not addressed to the level needed. [open ended]
14. What community needs do you expect will be the biggest issues in the next three to five years, why, and how can these be addressed? [open ended]

End of Survey

Thank you for completing our provider survey! If you would like to submit your name and contact information to be added to the KCCA listserv, please click on the following link. Remember, your name and contact information are submitted separately from your survey responses, so they will remain anonymous.



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