

Program Year

2013-14

Early Learning and Family Services Community Needs Assessment

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Executive Summary

The 2013-14 Community Assessment reflects the most recent data available including the 2008-12 American Community Survey conducted by the US Census Bureau. Other sources include data from the Office of Financial Management, the Office of the Superintendent of Public Instruction, and Whatcom County funded reports, where appropriate. In addition, a survey of ELAFS existing participant families on services and experiences was conducted.

Key Findings

Demographic Make-up of Eligible Children & Families

- Since the last community assessment Whatcom County has continued its upward population growth. Most population is from net in-migration from other areas. The largest population growth since the 2010 Census has occurred in Point Roberts, Ferndale, and Lynden.
- Whatcom Household Median Income has regained ground to where it stood in the 1980's and 1990's, but is still lower than the high in 1999.
- Residents under 18 years of age continue to see poverty levels higher than those 65 and older.
- Racial and ethnic diversity continues to increase, with areas in Bellingham and the county seeing the greatest increases in diversity.

Other Programs Serving Head Start/ECEAP-Eligible Children

- Compared to the Pre-K and kindergarten enrollments for prior years, the data for 2013-14 reported by the Office of the Superintendent of Public Instruction (OSPI) shows a continued increase. Fourteen percent of the public school early childhood enrollment was in Pre-K during 2013-14, up from 11% of the 2009-10 enrollment.
- The population of families enrolling in public school offerings is more racially and ethnically diverse than the county at large.
- In Whatcom County the number of childcare providers has dropped from 153 to 124 providers at the end of 2013.
- The cost of childcare continues to increase. Childcare for a family with an infant and a preschool child would cost 33-38% of median income.

Young Children with Disabilities and Related Services

- The 2012 American Community Survey indicates that three of five categorical types of disabilities for children and youth ages 5-17 have increased since 2008.
- The volume of students in Whatcom County districts classified as special education has continued to increase since the 2010 Community Assessment.
- Early Support for Infants and Toddlers has seen an increase in the number of infants/toddlers in need of special services as well.

The Education, Health, Nutrition and Social Service Needs of Head Start-eligible Children and Families

- The 2008-12 American Community Survey reported that 91% of Whatcom County citizens over the age of 25 had either a high school diploma or GED. 31.9% had a Bachelor's degree or higher.
- In Whatcom County, 13 percent of the population, had no health insurance coverage compared to 14.9 percent in all of Washington; 5.9% of children under the age of 18 had no health insurance coverage compared to 8.1% of all children in Washington.
- In 2012, 8% of expectant mothers in Whatcom County did not get prenatal care until in their fifth month of the pregnancy or later; 3% waited until the last trimester (the official definition of "late" prenatal care). Statewide in 2012 the comparable percentages were 12% and 4%, respectively.
- In four of the seven local districts, free and reduced meal programs saw continued growth since in the last community needs assessment

Education, Health, Nutrition and Social Service Needs of Head Start-eligible Children & their Families as Defined by Families of Head Start-eligible Children and by Institutions / Community Resources

- One third of ELAFS Community Survey respondents had either a high school diploma or a GED. Another third had attended some college or vocational school.
- Half of all ELAFS Community Survey respondents reported that getting or keeping a good job had been a problem for someone in their household. The lack of jobs in the area was the highest reported barrier.
- Sixty-five percent of ELAFS Community Survey respondents reported that, in the past 12 months, there was a time when they needed medical, dental, mental health care, or prescriptions and did not receive it.
- Twenty-three percent said that in the past twelve months they had skipped meals because they could not get enough food, and 13% said that someone at home had gone hungry. In addition, 88% of the households reported using some form of food assistance.
- Regarding the importance of ELAFS services to their child's readiness for kindergarten and their success in school, respondents to the ELAFS Community Survey rated most frequently as extremely important physical activities (87%); Literacy curriculum (84%); and Social-emotional curriculum (84%).
- Of the activities seen most important for their child's success in school, parents most frequently rated conferences and home visits (62%), setting family goals/action steps (62%) and help accessing services (59%) as extremely important.
- Social Services perceived most frequently as having an extreme service gap are living wage jobs (27%), affordable dental (23%), help with housing (15%), and childcare (12%).

Recommendations

Plan for Growth

As Whatcom County continues its trend of upward population growth, placement and evaluation of current ELAFS site locations will become a higher priority. New or expanded locations may be needed to accommodate the growing population.

According to the Washington State Office of Financial Management, the census tracts with the largest increases in population since the 2010 Census are in Ferndale and Lynden. Though ELAFS sites do serve these populations, they are not geographically located near the high growth areas.

Plan for Diversity

As the County minority populations continue to grow, the need for bilingual teachers and cultural sensitivity training will increase. The largest minority population in Whatcom County is the Latino/Hispanic community, and according to census data, growth of this community was focused in Bellingham, Lynden, Sumas and Ferndale.

Provide Connection to Job Training Services

Half of all families that responded to the ELAFs Community Survey reported that getting or keeping a good job had been hard for someone in their household. The main barrier was the lack of jobs available, however lack of job skills and not knowing how to search for a job affectively rated highly as well.

The Opportunity Council or other social service agencies can address these barriers to employment identified by families. Getting parents involved with services or programs that may help improve their ability to search for jobs and gain needed job skills can only serve to benefit the wellbeing of the children ELAFS serves.

Introduction

With an estimated population over 205,200, and its largest population center encompassing some 82,200 inhabitants, Whatcom County has at any one time over 11,200 pre-school aged lives in need of nurturing development and support. Early Learning and Family Services (ELAFS) is the primary publicly funded social development and educational readiness programming provider for low-income families with children in this age group. The agency uses federal DHHS Head Start and Early Head Start resources, as well as those from the State of Washington’s Early Childhood Education Assistance Program (ECEAP) to meet this critical community need. It is the expectation of these primary funders that all grantees conduct periodic assessments of their communities to ensure maximum access to services and well-designed, quality programs. This document summarizes the community assessment activities and data outcomes collected on behalf of ELAFS during 2013-14.

Research Methodology

This assessment uses a variety of data collection methodologies to increase the probability that the information gathered on families and communities in Whatcom County is valid. These include:

- Local, state, and national government demographic databases and reports, including any updated data tables from the U.S. Census.
- Review of professional association and other reports and studies relevant to ELAFS service populations or the local communities that form the context for those populations.
- Review of ELAFS existing participant families’ feedback on services.
- ELAFS staff survey about programs provided to children and families.
- Data from the Whatcom Prosperity Project, sub-sample report of families with young children.

Report Format

The 2013-14 Community Needs Assessment uses the six assessment area guidelines outlined in the Head Start standards (1305.3) for its structure. In that the Washington ECEAP assessment guidelines specifically state that their assessment should “align with Head Start,” and the ECEAP specific standards generally encompass Head Start standards, this report organizes around Head Start standards, listed in Table 1.

In addition, baselines and comparison data from past assessments provide emphasis of any trends of relevance. In some important demographic or other specialized data sets, there was no new information since the prior assessment at the time of this writing. In those instances, the data from the

prior assessment is the most recent information available. These, then, are the best available findings describing the communities targeted for service by Early Learning and Family Services.

Table 1 Community Assessment Guidelines

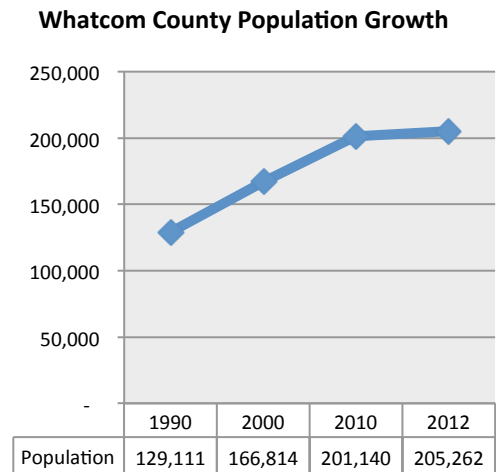
Head Start/Early Head Start	Washington ECEAP
1. Demographic make-up of Head Start eligible children and families, including their estimated number, geographic location, and racial and ethnic composition;	1. Identify the demographics and location of eligible children and their families;
2. Other child development and child care programs that are serving Head Start-eligible children, including publicly funded state and local preschool programs, and the approximate number of Head Start eligible children served by each;	2. Identify available local services and resources;
3. The estimated number of children with disabilities four years old or younger, including types of disabilities and relevant services and resources provided to these children by community agencies	3. Identify the services and program design(s) that best meet individual and community needs;
4. Data regarding the education, health, nutrition and social service needs of Head Start-eligible children and their families	4. Prioritize the comprehensive service needs of eligible children and families;
5. The education, health, nutrition and social service needs of Head Start eligible children and their families as defined by families of Head Start-eligible children and by institutions in the community that serve young children;	5. Prioritize the geographic areas where services are needed;
6. Resources in the community that could be used to address the needs of Head Start-eligible children and their families, including assessments of their availability and accessibility	6. Identify opportunities for coordination and collaboration with other community agencies;

Demographic Make-up of Eligible Children & Families

Whatcom County has continued its upward trajectory in population growth as charted over the last few years. The 2010 Census reported Whatcom County population had grown 21% since the taking of the 2000 Census, for a total population of 201,140 residents, making it one of the top ten fastest growing counties in Washington State. Based on this data, some 34,326 residents were here as of 2010 that were not here when the 2000 Census was conducted. During the same period, the state as a whole grew by just 14%.

The 2012 population estimate for Whatcom County adds another 4,122 residents, for a total of 205,262. Of those new residents, 54% migrated to Whatcom from other counties or states compared to 51% for the state as a whole. Most population growth is therefore due to net in-migration, but births to local families also contribute. The Whatcom natural growth rate or the difference between the number of deaths and the number of births during from 2010-2012 was 47%, below the state average of 55%.

Figure 1 Whatcom Population Growth



Number of Residents 0-4 years old

The Census Bureau calculates that of the 205,262 residents at mid-year 2012, 5.5% or 11,289 children were in the preschool age group. In Census 2000 data, 6.1% of the local population fell into the preschool age group.

Alternatively, the Washington Office of Financial Management’s (OFM) projected that in April 2013 Whatcom had 11,193 persons between the ages of 0-4 years, which constituted 5.4% of OFM projected Whatcom population for the period.

A consensus number from these data sources would appear to be, as of 2013, approximately 11,200 and age-eligible children for ELAFS program. Of course, other eligibility factors described in subsequent sections reduce that number as it relates to potential enrollment.

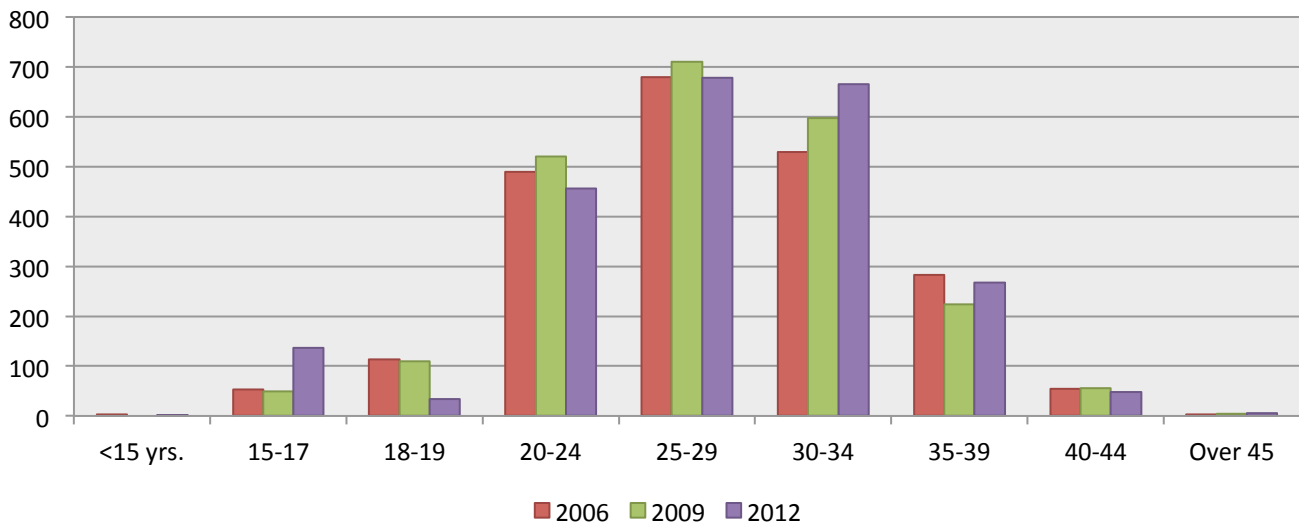
Parental Age

OFM also reported that as of April 2013, the median age in Whatcom County had reached a high of 37.22 years, which is further evidence the population gain skews older rather than younger. The general “graying” of America also contributes to that higher median age.

Since the prior needs assessment, there were not significant changes in the distribution of the county’s births across parental age brackets, as Figure 2 comparing births by age of mother in 2006, 2009 and 2012 illustrates. However, the number of births by mothers age 30-34 has continued to increase.

Not atypical of modern times, the age of fathers of most children born to county residents tended to be older than the age of the birth mothers. In 2012, 31% of recorded births were to single females; this percent has not increased since 2009.¹

Figure 2 Mothers Age²



Population Density

The Office of Financial Management, Small Area Estimate Program projected population changes for 2013 for the county’s census tracts. Table 2 captures those changes. For easier reference for the reader, see Appendix A for a map of the tracts. Though the largest population change has occurred in

¹ Center for Health Statistics, Washington State Department of Health, 09/2012.

² Ibid

Point Roberts, Census Tracts in Ferndale (11% and 8%) and Lynden (8%) have made up the largest percentage of the growth.

2010 Census Tract and Reference Location	2010 Pop.	Estimated Pop. 2013	% Change	% of Growth
1. NE of Bellingham Limits	8,998	9,286	3.20%	6%
2. N Bellingham, Marietta-Alderwood	9,737	9,823	0.88%	2%
3. NW of the Guide to Bakerview and Bennett	7,430	7,473	0.57%	1%
4. Eldridge/Cornwall Park	6,349	6,406	0.90%	1%
5.01 Sunnyland/York	5,189	5,226	0.72%	1%
5.02 Lettered Streets	2,668	2,749	3.05%	2%
6. Downtown Bellingham	1,638	1,659	1.28%	0%
7. Roosevelt	6,489	6,592	1.58%	2%
8.03 Alabama Hill	6,275	6,345	1.12%	2%
8.04 Barkley/Silver Beach	6,642	6,711	1.04%	1%
8.05 Whatcom Falls/Geneva	4,966	4,975	0.17%	0%
8.06 Sudden Valley	7,983	7,949	(0.42%)	-1%
9.01 Puget	6,638	6,719	1.23%	2%
9.02 Samish/Lake Padden	5,833	5,880	0.81%	1%
10. WWU	7,138	7,460	4.51%	7%
11. Edgemoor, Fairhaven, South Hill	6,637	6,732	1.43%	2%
12.01 Happy Valley	6,489	6,610	1.87%	3%
12.02 South/Chuckanut/Lake Samish	3,515	3,567	1.48%	1%
101. East Whatcom Region	7,895	8,081	2.35%	4%
102. Sumas/Nooksack	8,079	8,425	4.29%	7%
103.01 Lynden	6,792	6,934	2.08%	3%
103.02 Central Lynden	4,483	4,864	8.51%	8%
103.03 Eastern Lynden	5,103	5,327	4.39%	5%
104.01 North Blaine	8,049	8,226	2.20%	4%
104.03 Semiahmoo to Blaine Rd	5,130	5,264	2.61%	3%
104.04 Birch Bay/Custer	6,252	6,411	2.55%	3%
105.01 Western Ferndale	7,274	7,669	5.43%	8%
105.02 Central & East Ferndale	7,426	7,944	6.98%	11%
106. North of Smith, West of Guide Meridian to Nooksack River	6,480	6,576	1.48%	2%
107.01 North of Smith, East of Guide Meridian to Everson Goshen Rd	6,197	6,290	1.49%	2%
107.02 East of Everson Goshen Rd to Nooksack River	4,382	4,416	0.77%	1%
109. Lummi Island	964	987	2.41%	0%
11. Point Roberts	1,314	1,466	11.58%	3%
9400. Lummi Reservation	4,706	4,759	1.13%	1%

As part of Whatcom County’s update to its comprehensive plan, it retained a Seattle-based consulting firm to forecast population growth in population centers. In addition to deducing that the county will

grow by nearly 3,000 persons annually in the decades ahead, the study found that Birch Bay, Nooksack and Blaine would likely lead the way when based on a growth percentage of existing population. Bellingham will absorb some 41% of the new growth, but because of its size, a percentage-based calculation brings it in last behind the smaller urban growth areas. The following table captures the growth projections as both percentage and total persons as of 2013 and projected population in 2036. Rows in **bold** indicate where ELAFS operates a Head Start or State funded Early Childhood Education and Assistance (ECEAP) program.

Table 2 Whatcom County Population Projections for Urban Growth Areas³

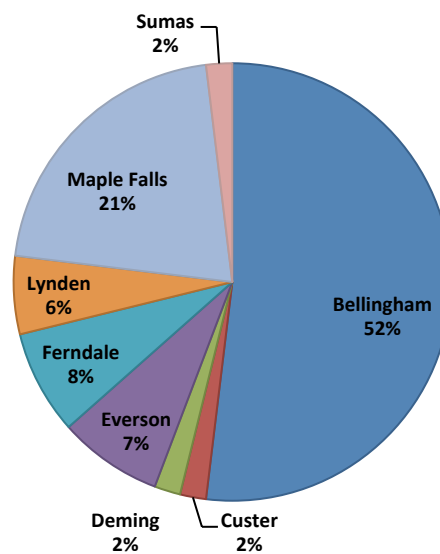
Urban Growth Area	2013 Population	2036 Population Projection	Percent Change
Bellingham	93,107	121,505	31%
Birch Bay	7,737	14,515	83%
Blaine	5,177	7,875	52%
Columbia Valley	3,204	4,549	42%
Everson	2,670	3,568	34%
Ferndale	12,778	18,180	42%
Lynden	12,879	17,942	39%
Nooksack	1,436	2,366	65%
Sumas	1,449	2,093	44%
Locations not in Urban Growth Areas	65,318	81,637	25%
Total Whatcom County	205,800	273,911	33%

ELAFS Community Survey Respondents

A survey of ELAFS families was specifically conducted for this assessment, the data gleaned from this permits us to gain important insights into the lives Early Learning and Family Services families. Fifty-three households with children enrolled in Head Start, ECEAP, or EHS programs respondent to a survey about their household needs and services used.

Eighty eight percent of the survey respondents were female and their household sizes ranged from two to nine, with an average size of four persons.

Figure 3 Distribution of ELAFS Survey Response (n=53)



³ Whatcom County Population Projections for Select Jurisdictions

Approximately half of respondents live in Bellingham (50%). Twenty three percent of survey respondents call the East Whatcom region home. About 7% live in Ferndale, and smaller proportions of respondents live in Lynden, Custer, and Sumas.

Births with Medicaid-paid Maternity Care

Between 2010 and 2012, Whatcom County recorded 6,753 births for an average 2250 births per year. Of the births that occurred in 2012, Medicaid covered 48.6%.

Assuming the rate of Medicaid covered births remained constant, and barring any significant improvement in household income or relocation, potentially some 1,093 low-income children will turn three years of age during or shortly after the ELAFS program year 2013-14. ⁴

Some non-citizen women who have resided in the U.S. for five years or more were eligible to receive Medicaid-paid maternity care. In 2012 3.3% of births were under non-citizen coverage. ⁵

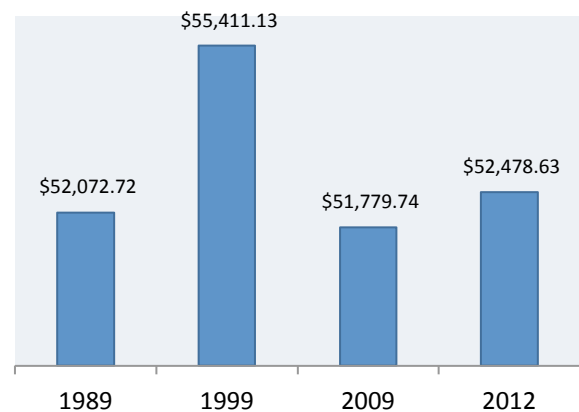
Income and Poverty Levels

When adjusted for inflation, for all families, the Whatcom 2012 median household income is comparable to where it stood at the end of the 80s and 90s. In 2012, the median household income was \$52,479. In 2009, it was \$51,779 and in 1999, it stood at \$55,411. ⁶

The Census Bureau estimated that in 2012, 16% of Whatcom County residents lived at or below the poverty level, an increase from the 14% recorded at the time of the 2010 Census.

In 2012, Whatcom ranked 31st out of 39 counties in terms of child poverty rates. Of residents under 18 years, 16.7% were below the poverty level, compared with 5.9% of people 65 years old and over. Nine percent of all families, and 44% of families with a female householder, no husband present and children under 18, had incomes below the poverty level. ⁷ Despite the potentially smaller

Figure 4 Whatcom Median Household Income



⁴ Dept. of Social and Health Services – First Steps Database

⁵ Ibid

⁶ Washington State Office of Financial Management

⁷ U.S. Census Bureau – American FactFinder

percentage of the population being pre-school aged children, young families with limited financial means are abundant.

The 2008-2012 American Community Survey 5-Year Estimates showed single female-headed households with children less than six years old most concentrated in tracts 6, 10, 101, 103.2, and 106. Relevance here would be for Bellingham the Western Washington University and Downtown neighborhoods, and Eastern Ferndale, Central Lynden and the , East Whatcom region.

Employment and income

Of ELAFS families:

- The average monthly income from all sources was \$1,650
- Thirty nine percent of respondents reported wage income. TANF, child support, and SSI were the three next largest sources of financial support for the families.
- Over half of respondents (52%) reported that getting or keeping a good job had been a problem for someone in their household. When asked to choose from a list of eleven common employment barriers, respondents were most likely to report that there are not enough jobs available (21%), the lack of childcare (20%), and that they do not have the right job skills (13%). For many respondents, lack of transportation and physical or mental disability make finding or keeping a job challenging.
- When asked about financial hardships that apply to their households, not being able to save for unexpected expenses was top on the list, affecting 38% of respondents. A little under a quarter of respondents reported medical or dental debt (23%), and about one in ten households had fines or legal fees that are hard to pay off (13%).
- These financial hardships made families vulnerable to other negative financial experiences. Twenty-nine percent of families reported pressure to pay bills by stores, creditors, or bill collectors frequently over the past twelve months. Twelve percent of respondents frequently borrowed money from friends or family, and about one in ten respondents frequently fell behind in their rent or mortgage in the same period. Forty four percent of clients had pawned or sold-off valuables to make ends meet frequently in the past twelve months.

Complementing the ELAFS Community Survey data on the struggles of families with young children to make ends meet is information from the Department of Social and Health Services' WorkFirst Program, the work readiness and employment arm of TANF.

Since the significant drop in TANF caseloads after the passage of federal welfare reform in the late 90s, local caseloads have increased in recent years. In 2012 there were 5,937 TANF cases in the county.⁸ The majority of TANF cases were located in the Bellingham area (2,358), with Ferndale (501) and Lynden (244) in second and third respectively.⁹

The families participating in WorkFirst receive services in a variety of areas, including job search, removing barriers to employment, training, and community job opportunities. In 2010, of the families in the program, 55% used the childcare subsidies available to them. The most common reasons that families did not use childcare subsidies were due to factors causing ineligibility (20%), barriers to accessing childcare services (16%), and preferring other child care (22%).¹⁰

In the last quarter of 2012, 61% of the parents who received job search services from WorkFirst ended up finding employment, 53% of parents who received job training from WorkFirst found employment, and 57% of parents who participated in community jobs found employment.¹¹

For the year 2012, the median wage of WorkFirst job seekers who received job search strategies was \$10.50.¹² For a full time worker, this wage would bring the family annual income of \$21,00, which would still not get a family of three to 125% of the 2012 federal poverty line.

Other Descriptors of Whatcom County's Population

A variety of other characteristics must be in ELAFS consciousness as it plans to reach and serve eligible Whatcom families.

Racial and Ethnic Diversity

Relative to other parts of the U.S. and even to other parts of Washington, Whatcom County's population remains primarily white. The most rapid growth in diversification has occurred in Latino subgroups and Russian/Ukrainian immigrants. Mexican-Americans constitute the solid majority of Latinos.

According to the U.S. Bureau of the Census, Population Estimates Program 2012 update, 87.9% of Whatcom residents were Caucasian, 3.1% were Native American or Alaskan Native, 4% Asian, 1.2% Black or African-American and 0.3% Hawaiian/Samoan or other Pacific Islander. Three point five percent reported being of two or more races and 8.4% of residents self-identified as Latino or Hispanic.

⁸ WA DSHS Research and Analysis Division

⁹ Ibid

¹⁰ Workfirst Client Survey Results Summary

¹¹ Ibid

¹² Ibid

Outside of Lummi Tribal lands, the Roosevelt and Downtown neighborhoods in Bellingham, the area northwest along Guide Meridian to Bakerview and Bennett, and the track that encompasses Semiahmoo to Blaine Road and Bay Road present the most diversity.

Table 3 Whatcom Race and Ethnicity by Census Tract¹³

Census Tract	2008-12 ACS Pop.	White	Black or African American	American Indian and Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some other race	Two or more races	Hispanic or Latino (of any race)
1	8,961	82.8%	0.9%	1.8%	5.5%	0.4%	0.0%	4.7%	4.0%
2	9,005	80.9%	1.3%	3.2%	3.4%	0.6%	0.0%	1.1%	9.5%
3	7,820	72.0%	1.0%	4.1%	5.4%	0.0%	0.0%	3.7%	13.9%
4	6,513	89.0%	0.0%	0.8%	2.3%	0.0%	0.5%	2.0%	5.4%
5.01	4,257	87.0%	1.6%	0.4%	0.8%	0.3%	0.0%	3.5%	6.4%
5.02	2,136	78.3%	0.2%	0.6%	3.1%	0.0%	0.0%	2.2%	15.6%
6	1,418	70.9%	3.3%	12.6%	2.6%	0.0%	0.0%	3.7%	6.8%
7	7,335	68.2%	0.6%	4.9%	8.6%	0.5%	0.0%	2.1%	15.1%
8.03	5,952	78.6%	1.0%	0.7%	10.7%	0.0%	0.0%	2.2%	6.9%
8.04	7,499	88.9%	1.5%	0.9%	3.1%	0.0%	0.0%	3.7%	1.8%
8.05	5,046	85.1%	0.3%	1.9%	1.7%	0.0%	0.4%	4.5%	6.2%
8.06	8,080	84.9%	0.5%	0.1%	1.1%	1.2%	0.0%	4.4%	7.8%
9.01	6,849	84.5%	1.0%	1.00%	2.7%	0.0%	0.0%	1.4%	9.5%
9.02	5,860	88.2%	1.8%	0.4%	4.3%	0.0%	0.0%	1.5%	3.8%
10	7,000	78.4%	1.1%	0.5%	4.4%	0.2%	0.0%	7.0%	8.3%
11	6,779	90.3%	0.4%	0.0%	2.4%	0.0%	0.5%	2.2%	4.2%
12.01	6,929	88.3%	2.6%	0.3%	4.2%	0.2%	0.2%	1.4%	3.0%
12.02	3,237	91.5%	0.8%	0.6%	2.9%	0.2%	0.3%	2.6%	1.0%
101	9,151	88.8%	0.9%	3.3%	2.4%	0.3%	0.2%	2.2%	2.0%
102	7,783	80.8%	0.0%	0.8%	1.2%	0.1%	0.0%	1.5%	15.7%
103.01	6,447	87.2%	0.3%	0.0%	0.3%	0.0%	0.0%	0.9%	11.4%
103.02	4,772	80.9%	0.7%	0.0%	0.9%	0.0%	0.0%	2.0%	15.5%
103.03	5,242	78.5%	0.7%	0.8%	5.5%	0.0%	0.0%	4.0%	10.6%
104.01	9,004	82.7%	0.3%	0.1%	5.8%	0.3%	0.0%	4.6%	6.1%
104.03	5,075	75.4%	1.2%	1.5%	12.2%	0.0%	0.0%	0.7%	8.9%
104.04	6,386	81.5%	2.1%	0.0%	4.7%	0.1%	0.0%	3.0%	8.6%
105.01	7,318	85.1%	1.8%	2.7%	3.3%	0.0%	1.2%	2.5%	3.4%
105.02	6,835	85.6%	0.5%	0.1%	2.1%	0.0%	0.0%	2.6%	9.2%
106	6,265	83.2%	0.0%	1.5%	1.2%	0.1%	0.0%	5.0%	9.0%

¹³ U.S. Census Bureau – American Community Survey

107.01	5,317	82.5%	0.4%	1.1%	0.5%	0.0%	0.0%	2.0%	13.5%
107.02	4,049	75.8%	0.0%	8.4%	1.0%	0.0%	0.0%	2.7%	12.1%
109	1,044	85.7%	0.6%	1.2%	8.3%	0.0%	0.0%	4.1%	0.0%
110	1,309	85.8%	1.4%	0.0%	8.1%	1.7%	0.0%	1.1%	1.9%
9400	4,731	38.5%	0.7%	45.0%	3.3%	0.5%	0.0%	6.6%	5.4%

Linguistic Diversity

According to the 2008-2012 American Community Survey U.S. projections, of 23,003 Whatcom persons aged 5 years or older spoke a language other than English at home. This is an increase of more than 8,500 persons since the taking of the 2000 Census. Of those that spoke a language other English, 10,206 or 44%% identified Spanish as their language. Another 7,999 persons identified “other Indo-European” languages, which is over 2000 more persons then at the time of the 2000 Census. In addition, 4,069 selected Asian and Pacific Island languages and 729 chose “other.”

Speaking a language other than English does not automatically imply that the individual or household is without the ability to communicate with English speakers. The table below summarizes the four non-English language clusters documented by the Census and divides the populations within each cluster by their self-reported proficiency in English.

Table 4 Whatcom Speakers' of Other Languages Prevalence & Proficiency with English¹⁴

Language	Total Speaks Language Other Than English	Speaks English Very Well	Speaks English Less than Very Well
Spanish	10206	58%	42%
Indo-European	7999	67%	33%
Asian and Pacific Islander	4069	59%	41%
Other	729	55%	45%

The Census Bureau defines a linguistically isolated household as one in which all members of the household 14 years old and over has some difficulty with English. According to the 2009 American Community Survey, census tracts in the north Guide Meridian area, Bellingham, Lynden and Ferndale contain the largest amounts of linguistically isolated households.

¹⁴U.S. Census Bureau – American Community Survey

Table 5 Linguistically Isolated Households in Whatcom¹⁵

Census Tract	Total	Spanish	Other Indo-European	Asian and Pacific Islander	Other
3	6.1%	46.2%	32.2%	28.6%	-
7	5.9%	44.7%	0.0%	39.1%	0.0%
103.03	4.8%	53.2%	20.0%	0.0%	0.0%
2	4.2%	0.0%	21.3%	64.8%	0.0%
105.02	4.2%	0.0%	28.2%	57.9%	35.2%

Age of Custodial Adults

Grandparents as caregivers of potential customers of ELAFS continue to grow in number within Whatcom County. According the 2008-12 American Community Survey, 1,753 Whatcom grandparents lived in households with one or more minor grandchildren present, among those grandparents, 55% were legally responsible as caregiver.

¹⁵U.S. Census Bureau – American Community Survey

Other Programs Serving Head Start/ECEAP-Eligible Children

Federal assessment criteria dictate that ELAFS examine and complement other community services aimed at the same low-income child population and their families. This section summarizes the parallel and potentially collaborative range of services around the county.

Public Schools

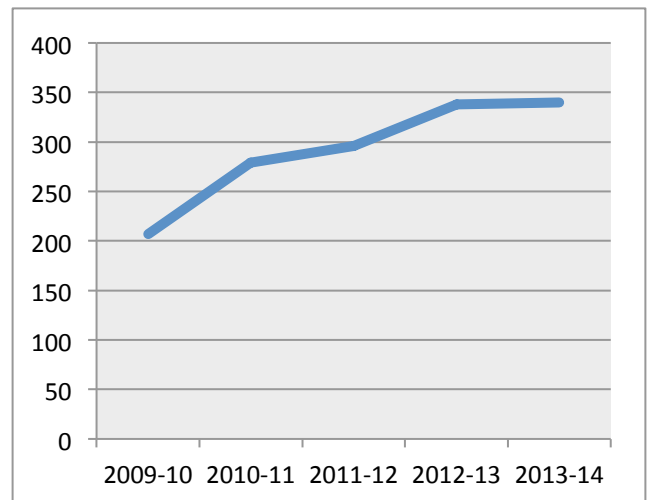
As of academic year 2012-13, the seven public school districts in the county had a cumulative enrollment of 25,026 students.¹⁶ In 2013, there were 11,193 additional children under five in Whatcom County according to WA-OFM. ELAFS has just 317 Head Start/ECEAP slots available to serve the qualifying low-income children in that total who were not being served by public schools, private care providers or other government-funded services.¹⁷

While many public school districts around the country are venturing into three and four-year old kindergarten services, the seven school districts within Whatcom County offer primarily 5-year old kindergarten (with a modestly growing trend toward full-day service). From available data, all districts provide programming for a limited number of pre-5-year olds. This often takes the form of special education services for three and four-year olds, whether through their own personnel or under contract with private providers.

Compared to the Pre-K and kindergarten enrollments for prior years, the data for 2013-14 reported by the Office of the Superintendent of Public Instruction (OSPI) shows a continued increase in the total volume of Pre-K and kindergarten enrollment; Pre-K enrollment increased across the county by 64% since 2009-10, while kindergarten enrollment increased by 9% across the districts.

These figures might be potentially relevant for ELAFS in terms of market access and saturation. Because of these shifts, 14% of the public school early childhood

Figure 5 Public School Pre-K Enrollment



¹⁶ Office of Financial Management (OFM) Whatcom County Profile

¹⁷ Child Care in Whatcom County, Child Care Aware of Northwest Washington, February 2014

enrollment was in Pre-K during 2013-14, up from 11% of the 2009-10 enrollment. It follows then that kindergarten slots constituted a smaller percentage (86%) when compared to the earlier period (89 % of the 2009-10 slots).

The families taking advantage of public school offerings continue to be more diverse. In academic year 2013-14, 67% of public school Pre-K and kindergarten families self-identified as white, compared to 72% in 2009-10. Those identifying as Black/African-American (1%), Asian (2%), Native Hawaiian/Other Pacific Islander (0%), and American Indian/Alaskan Native (8%) were comparable to the prior data as well. The percentage of Hispanic/Latino identified users of the public school services increased to 16%, which reflects generally strong birth rates and overall notable population growth in the county. Table 7 provides insight into the increasing diversification of the local early childhood population.

Table 6 Whatcom County Public School 2010 Pre-K & Kindergarten Combined Enrollment by Race/Ethnicity¹⁸

District	American Indian / Alaskan Native	Asian	Black / African American	Native Hawaiian / Other Pacific Islander	Two or more Races	White	Hispanic / Latino
Bellingham	1%	6%	0%	0%	14%	67%	12%
Blaine	2%	0%	1%	0%	4%	82%	11%
Ferndale	21%	3%	1%	0%	6%	56%	11%
Lynden	0%	2%	4%	0%	5%	76%	18%
Meridian	0%	0%	0%	0%	0%	79%	21%
Mount Baker	16%	0%	0%	0%	7%	70%	8%
Nooksack	7%	0%	0%	0%	7%	45%	41%

Although the county showed growth in Pre-K enrollment for the 2013-14 academic year, the volume of service offered for three and four-year olds does not even approach the 10% mark of the total children (without regard to income level) in that age bracket. Even with ELAFS’s 371 slots added to the mix, there remains plenty of “market.”

¹⁸ WA Office of the Superintendent of Public Instruction, “Public School Enrollment by Grade, October 2013”

Private Schools' Impact

Throughout Whatcom County, nine religiously affiliated schools, and six secular schools (e.g. Montessori or Waldorf) offer educational and social development programming for Pre-K and kindergarten aged children. Together, the 15 schools enrolled 328 Pre-K and 210 kindergarten students for the academic year 2013-14.¹⁹ Two hundred and seventy-six, or 84%, of the Pre-K students were in the religiously affiliated schools, while 76% or 161 of the kindergarten students were in those institutions.

Private and Public Child Care

Although, historically, ELAFS enrolled families have used less formal day care arrangements than might be expected and when compared to higher income households, it is important for the agency to keep a pulse on the private and non-profit childcare sector.

For low-income families, navigating that sector can be intimidating and costly. Data on local licensed group centers, licensed home-based providers and the documented slate of unlicensed and/or undeclared providers illustrates this.

- In Whatcom County the number of childcare providers has dropped from 153 with capacity for 3870 children in 2008 to 124 providers with capacity for 3,247 children at the end of 2013.²⁰
- For a family with an infant and a preschooler in full time day care, the median cost for that care runs from 36-39% of Whatcom County's median household income for 2013.²¹
- In Whatcom County, Child Care Aware of Northwest Washington helped 422 families with 619 children in need of childcare to search for matching providers 535 times. Of those children, 58% were using childcare subsidies.

For all families with working parents and a need for out-of-home care, affordability looms large. Countywide, the annual median household income in 2013 was \$51,268. The tables below indicate the annual median price of full-time care for one child by age group and type of care for that time. The median price indicates that half the providers in the area charge more and half charge less than the prices quoted. The subsequent column translates the annualized pricing into a percentage of the 2013 median household income. Many low-income families are at or below 50%, and some below 30%, of the area median income.

¹⁹ WA Office of the Superintendent of Public Instruction, "Public School Enrollment by Grade, October 2013"

²⁰ Child Care in Whatcom County, Child Care Aware of Northwest Washington, February 2014

²¹ Child Care in Whatcom County, Child Care Aware of Northwest Washington, February 2014

Table 7 Childcare Cost as percent of household income²²

Child Care Center	2013 Median Annual Cost for 1 Child	% of Med. Household Income	50% of Med. Household Income	30% of Median Household Income
Infant	\$11,184	22%	44%	73%
Toddler	\$9,048	18%	35%	59%
Preschool	\$8,316	16%	32%	54%
School Age	\$7,284	14%	28%	47%

Family Child Care	2013 Median Annual Cost for 1 Child	% of Med. Household Income	50% of Med. Household Income	30% of Median Household Income
Infant	\$9,228	18%	36%	60%
Toddler	\$9,096	18%	35%	59%
Preschool	\$7,800	15%	30%	51%
School Age	\$3,900	8%	15%	25%

The compound effect of more than one child, even though some providers offer a “volume or sibling discount” is enormous for all families, but particularly low and moderate-income households. Purchased care for an infant and a preschool child would cost a family 33-38% of median income.

²² Childcare in Whatcom County, Child Care Aware of Northwest Washington, February 2014

Young Children with Disabilities and Related Services

The 2008-12 American Community Survey estimates 1,946 individuals or 4.6% of young people in Whatcom County youth 17 years and younger had a disability. Some of those disabilities resulted from childhood or adolescent injuries. Though perhaps a statistical leap, if we apply that percentage to the 11,193 OFM quantified 0-4 year olds in the county as of April 2013, the community might expect that some 514 children in the age cohort have been or will be diagnosed with a disability during their developmental years. As ELAFS staff knows, sometimes that diagnosis does not occur until the child is in the classroom.

There is no consensus among experts for the cause(s) of increased numbers of young people with disabilities. However, some life events do have considerable evidence pointing to their proclivity to cause special needs in children, such as premature births and resultant low birth weights. Whatcom County does better than the state average in keeping low birth weight deliveries low. In 2013, 39 local births were so classified, down from 45 seven years earlier.²³

In 2012, the U.S. Department of Health and Human Services – Centers for Disease Control projected the diagnoses of autism spectrum disorder in one in every 88 U.S. births. When combined with increasing diagnoses of children with severe food and other allergies, physical and cognitive birth defects, etc., the trends of “special needs” identification in the ELAFS setting are prone to parallel increases.

The 2012 American Community Survey updated data on categorical types of disabilities for children and youth ages 5-17. The table below presents those findings and compares them to the 2008 baseline data. The age bracket captured is obviously too late for ELAFS population concerns, but they do indicate prevalence in our communities.

Table 8 Whatcom Children Ages 5-15 by Disability Type²⁴

Disability Characteristic	2008	2012	Percent Change
Hearing Difficulty	649	207	68% Decrease
Vision Difficulty	175	179	2.3% Increase

²³ WA State Dept of Health, Center for Health Statistics

²⁴ U.S. Census Bureau – American Community Survey

Cognitive Difficulty	1,237	1,322	6.8% Increase
Ambulatory Difficulty	128	197	54% Increase
Self-Care Difficulty	483	372	23% Decrease

As the data indicates, three of five categories saw an increase in the numbers since 2008 and two categories saw large decreases. The ability to meet the changing needs of children with disabilities will be integral to ELAFS’s future success.

Washington OSPI tracks data for all districts on the volume of both special needs students and those whom sought federal Medicaid reimbursements to offset the cost of providing special services. Whatcom County districts had more than 3,901 students classified as special education for academic year 2012-13. Put in perspective of the districts’ total population, the special education numbers represent the following percentages of the student bodies as of May 2013. Included are totals from the 2000-01 and 2009-10 for comparison.²⁵

Table 9 Percent of Special Education Students

School District	2000 Percent	2010 Percent	2013 Percent
Bellingham	12%	13%	14%
Blaine	10%	13%	14%
Ferndale	12%	15%	15%
Lynden	10%	12%	14%
Meridian	12%	8%	9%
Mt. Baker	14%	16%	19%
Nooksack	12%	19%	20%

More directly relevant to ELAFS’s potential supply of customers is the work that the WA Early Support for Infants and Toddlers (ESIT) program undertakes with the youngest children already identified as having a special need. Table 11 captures ESIT’s caseload from July through June of 2013 and compares

²⁵ WA OSPI District Profiles, 20012-13; OSPI Website

the data to their 2010-11 caseloads. In general, the number of infants/toddlers in need of special services appears to have increased.

Table 10 Whatcom ESIT 12 Month Data²⁶

	2010-11	2012-13
Referrals received	145	162
Range of monthly referrals	2-17	14-32
Evaluations for eligibility conducted	139	257
Children found eligible	95	128
New IFSPs	136	127
Monthly average of active IFSPs	149	166
Children transitioned out to family self-care or other providers of service	122	182

For those children without “medically fragile” conditions that would preclude them from inclusion in other programs, EHS/Head Start, WCEL and public schools are the most likely recipients of the more than 15 local children transitioned out of ESIT each month.

²⁶ Whatcom Infant/Toddler Early Intervention Project Year-End Report, 2013

The Education, Health, Nutrition and Social Service Needs of Head Start-eligible Children and Families

Numerous local and state entities collect data relevant to the education, health, nutrition, and housing and social service needs of low-income families, including those that contain young children. This section of the assessment summarizes some of those data sources, and for select communities, presents findings by the WA Office of Financial Management on how local families are faring on a standard set of risk indicators when the state's average scores for those indicators are the baseline.

Education

Although the 2008-12 American Community Survey documented that Whatcom County was generally on par with State averages in educational attainment by citizens over the age of 25, the data from the ELAFS Community Survey paints a less encouraging picture in terms of low-income parents' ability to provide for their children in a competitive market place.

- One third of respondents (30%) had either a high school diploma or a GED.
- Another third (29%) had attended some college or vocational school.
- Six percent had a 4-year degree or higher (compared to 32% of all Whatcom County adults).

When reporting on their children's educational progress, respondents reported:

- The majority reported that their children were doing well in school (88%).
- Only 5% reported that their child was having trouble in school.
- Four percent reported their child had a learning disability.
- Four percent and 2% respectively reported having a child with a developmental disability or physical disability.

An assessment of service gaps respondents perceived to be above average in importance and below average in availability, access to living wage jobs was the only education-linked item that made the cut. The parental educational attainment achievements listed above will certainly complicate achievement of the stated goal.

Health Indicators

According to 2008-12 American Community Survey, Whatcom County exhibited the following health measures:

- 13 percent of the population, or 26,480 people, had no health insurance coverage compared to 14.9 percent in all of Washington;
- The percent uninsured ranked 26th - from highest to lowest - out of Washington's 39 counties;
- 5.9% of children under the age of 18, or 2,489 children, had no health insurance coverage compared to 8.1 percent of all children in Washington (earning a rank of 25th out of 39);

The physical and mental health of both children and family members can be chronic and acute impediments to educational success and family stability. Vaccinations, access to all forms of health care, including good prenatal care, and strong wellness skills can all be important buffers against disease and injury. For Whatcom County families without employer-provided health coverage or enrollment in supportive programs such as those ELAFS operates, these items have become increasingly difficult to obtain.

- Of the 2,259 births in the county in 2012, 8% of expectant mothers did not get prenatal care until in their fifth month of the pregnancy or later; 3% waited until the last trimester (the official definition of “late” prenatal care). Statewide in 2012 the comparable percentages were 12% and 4%, respectively. Fifteen of the county’s births had no prenatal care prior to delivery, compared to 751 statewide.²⁷
- There were 10 fetal deaths in 2012; all were to women between the ages of 20 and 39 years.²⁸
- Of the 15 cases of infant mortality in Whatcom County in 2012, congenital malformations attributed to two deaths, four to sudden infant death syndrome, and two to “external causes,” four to other perinatal conditions, one to hypoxia & respiratory conditions, and two to “all other causes.”²⁹
- In 2012, maternal smoking occurred in 9% of Whatcom pregnancies.³⁰

Among common and communicable childhood/family diseases or illnesses in recent years, Whatcom had the following rates contrasted to the state figures.³¹

²⁷ WA Department of Vital Statistics

²⁸ Mortality table G2, WA State DOH Vital Statistics

²⁹ Mortality table F5, WA State DOH Vital Statistics

³⁰ WA State DOH Vital Stats, Table B4

Table 11 Rates of Common/Communicable Diseases

Disease	2008 Rate	2009 Rate	2010 Rate	2011 Rate	2012 Rate	State Rate 2012
Campylobacteriosis	22.8	29.5	36.8	42.6	37.8	22.7
E. Coli	4	4.5	5	5.4	6.9	3.5
Hepatitis A	*	*	*	*	*	0.4
Hepatitis B	0.0	0.0	*	0.0	0.0	0.5
Hepatitis C	*	*	*	4.0	9.3	0.8
HIV/AIDS	5.1	4.0	*	3.0	2.5	7.4
Measles	0.0	0.00	0.0	0.0	0.0	0.0
Meningococcal disease	0.0	*	0.0	*	*	0.4
Pertussis	27.8	17.0	12.4	33.6	163.6	72.1
Tuberculosis	2.5	*	3.0	*	*	2.7

Vaccination rates in Washington for all children outside King County ages 19 to 35-months, and low-income children as a subset, remained generally strong through 2012. Table 13 captures the WA rates and contrasts them to the national averages.³²

Table 12 Immunization Rates, WA vs. US

Immunization Regimen	WA-All	WA-Low-Inc	Nation-All	Nat. Low-Inc
4+DTaP	84%	90.6%	82.5%	78.5
3+Polio	89.2%	92.7%	92.8%	91.8%
1+MMR	84.8%	NA	90.8%	89.9%
3+Hib	91.7%	NA	93.3%	76.4%
3+Hep B	86.3%	89.2%	89.7%	89.4%

³¹ WA State Communicable Disease Report 2009

³² U.S. CDC NIS 2012 Data Table

Health of ELAFS Community Survey Respondents

- Three quarters of the survey respondents gave their general health a positive rating, including good (44%), very good (29%), or excellent (10%). The remaining said their health was fair (15%) or poor (2%).
- Almost two thirds of respondents reported receiving health care coverage from DSHS, including medical coupons and Washington State Basic Health (60%). Seven percent had a group plan through an employer or association; 16% used Medicare; no respondents had private health insurance or were on a military health plan.
- Six respondents (10%) were uninsured.
- Ninety-eight percent of survey respondents said that their children had health coverage.
- Close to half of respondents typically sought healthcare through a doctor's office (48%). Thirty two percent use SeaMar or Interfaith community health centers and thirteen percent respondents reported use of the emergency room for medical care. Less common was the use of walk-in clinics and tribal health centers (6% and 0%) respectively. Note: the percentages exceed 100% because respondents could choose more than one answer.
- When asked to list their primary sources of health information for their family's needs, 80% of families reported a doctor or health care professional, 40% cited family members, 40% the internet, 23% friends, and 12% a pharmacist. The hospital, social service agencies, and church groups were less common sources of health information.
- Sixty-five percent of respondents reported that, in the past 12 months, there was a time when they needed medical, dental, mental health care, or prescriptions and did not receive it.
- Of the 34 households that reported difficulty accessing needed medical care, the most prevalent barriers were having to many other things to go (64%) the office not being open when the person could get there (43%). Smaller proportions of respondents reported not knowing there to go for help (25%); cost (27%); the amount of time it takes to get an appointment (33%); lack of child care (30%); and being nervous or fearful of the experience (42%).

Access to Nutritious Food

Often, households under financial strain must choose between food, especially nutritious foods, and other expensive items such as housing, transportation costs, debt relief and medical bills. For many

families, community resources, such as those from private and government food programs, school meals and gleaning or gardening, augment their resources.

As cases in point, respondents to the ELAFS Community Survey drew a picture of some of the elements of local food insecurity. Twenty-three percent said that in the past twelve months they had skipped meals because they could not get enough food, and 13% said that someone at home had gone hungry. In addition, 88% of the households reported using some form of food assistance:

- 75% utilized food stamps;
- 57% receive assistance for Women, Infants, and Children (WIC);
- 36% use food banks;
- 28% participate in reduced price school meals; and
- Smaller proportions of respondents receive assistance from churches, SeaMar vouchers, soup kitchens, and senior center meals.

Schools play an important role in food access. Since the late 90s, usage of free and reduced lunch programs have seen a generally consistent upward rate of utilization. In four of the seven local districts, free and reduced meal programs saw continued growth between the 2009-10 figures reported in the last ELAFS assessment and the figures captured by OSPI for academic year 2012-13. District usage percentages are below:

Table 13 Whatcom School District usage of free and reduced meal program³³

District	2009-10	2012-13
Bellingham	38.3%	37.9
Blaine	36.7%	45.6%
Ferndale	47.6%	49.5%
Lynden	35.6%	35.6%
Meridian	28.5%	25.4%
Mount Baker	51.6%	55.1%
Nooksack Valley	55.2%	53.6%

³³ WA Office of the Superintendent of Public Instruction, 2013 State Report Card

The Women, Infants and Children nutrition program or WIC is a vital service to pregnant and postpartum low-income women and their children. In 2012, Whatcom County WIC served 5,185 infants and children under five and 2,238 pregnant, breastfeeding and postpartum women. While 62.8% of the WIC families served had someone working, 63.3% of them were living in poverty. In 2012, WIC served 49.1% of infants born statewide; WIC served 46.1% of Whatcom County infants born that same year.³⁴

Without exception, all Whatcom County food banks have seen increases in demand for food, including the need for formula and prepared baby food.³⁵ In Bellingham alone:

- 15% of all families in the Bellingham city limits use the food bank at least once a year
- 50% of food bank recipients are children or senior citizens
- 60% of food bank families skip or cut the size of meals on a weekly basis

Every month Bellingham Food Bank receives more than 11,000 visits and responds by handing out more than 225,000 pounds of food.³⁶

Transportation

Depending on where families live, transportation issues can complicate obtaining nutritious food, getting to work or school, and accessing other important services. Seventy-eight percent of respondents experienced some type transportation problems in the past 12 months.

- 40% were unable to afford car repairs;
- 34% were unable to afford gas;
- 21% did not have car insurance;
- 21% had no access to a car at all; and
- 9% did not have a license or it was suspended.

Twenty-three percent of respondents said that someone in their household regularly uses the bus. For the 40 respondents who reported what keeps them from using the bus, the most common reason was that they prefer to use a car (53%). Other frequently reported barriers to bus use include inconvenient bus times and days (30%), not living near a bus stop (19%), or the bus service not going where they

³⁴ WIC Annual Report – Whatcom County WIC Facts: 2012

³⁵ Interview with Michael Cohen, Executive Director, Bellingham Food Bank

³⁶ Bellingham Food Bank Website

respondent needs to go (11%). Physical or mental disability and the cost of bus fare each affected a small proportion of respondents.

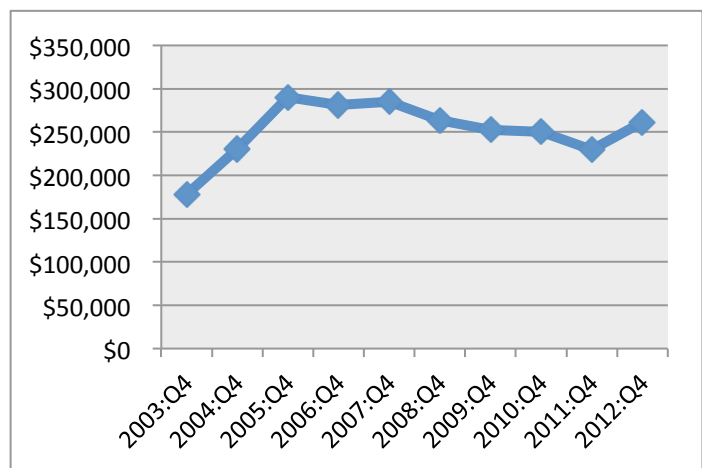
Housing Findings

For many ELAFS families, housing costs are severely impeding the meeting of household needs and dreams. According to the Washington Center for Real Estate Research, the median cost to purchase a home in Whatcom County in Q4 2012 was \$261,300. Compared to 2011 prices, in 2012 the median price increased by 13.6%. Though there are signs of economic recovery, it is still difficult for low-income families to qualify for a loan in general, but especially since the 2007-08 national mortgage crisis further restricted access to credit.

The lack of buying power forces many families to rent homes or apartments, which means they neither receive tax advantages available to home buyers, nor do they build equity from payments. Although Whatcom County is below the state average for vacancy rates and rents, families have no control over rising rent prices. This housing instability affects everyone in the family.

For many young families, the dream of purchasing a home remains elusive.

Figure 6 Whatcom County Median House Price



- According to the 2008-2012 American Community Survey, 54.3% of Whatcom renters paid 30% or more of their incomes for rent during that period.
- According to the National Low Income Housing Coalition’s “Out of Reach, 2010” report, a minimum wage worker in Whatcom would need to work more than 76 hours per week to afford a two-bedroom apartment and 49 hours a week to rent a studio apartment at the local fair market rents.
- “Out of Reach, 2013” also reports the median income of a renter household in Whatcom County is \$31,721 while the annual income needed to afford a two-bedroom apartment is \$36,080. The median renter income is just 45% of the overall median Whatcom income.

Table 14 Vacancy Rate and Average Rent Comparison³⁷

Location	2006		2010		2013	
	Vacancy Rate	Average Rent	Vacancy Rate	Average Rent	Vacancy Rate	Average Rent
Whatcom	2.5%	\$679	3.5%	\$733	1.2%	822
Statewide	4.7%	\$783	6.1%	\$899	3.9%	1,052

³⁷ Washington Center for Real Estate Research, Washington Apartment Survey 2013

Education, Health, Nutrition and Social Service Needs of Head Start-eligible Children & their Families as Defined by Families of Head Start-eligible Children and by Institutions / Community Resources

Physical/Mental Health & Nutrition as defined by Institutions

Special needs professionals point to the Maternal and Child Health Data Report on children with special health care needs (CSHCN) that highlighted several areas of concern for Washington children, including:

- Between 14 and 18% of Washington State’s children had special health care need in 2005-2007, which is similar to the U.S. rate.
- On other indicators, WA compares to national averages in ways that are meaningful for ELAFS services, and as captured in the table below:

National Performance Measures, 2005/06 NS-CSHCN	WA	US
1. CSHCN whose families are partners in decision making at all levels, and who are satisfied with the services they receive	56% (±4)	57% (±1)
2. CSHCN who receive coordinated, ongoing, comprehensive care within a medical home	48% (±4)	47% (±1)
3. CSHCN whose families have adequate private and/or public insurance to pay for the services they need	65% (±4)	62% (±1)
4. CSHCN who are screened early and continuously for special health care needs	69% (±4)	64% (±1)
5. CSHCN whose services are organized in ways that families can use them easily	85% (±3)	89% (±1)
6. Youth with special health care needs who receive the services necessary to make appropriate transitions to adult health care, work, and independence	47% (±6)	41% (±1)

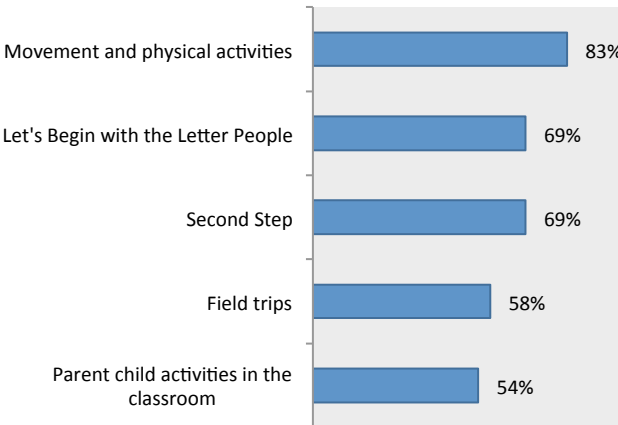
- The Centers for Disease Control reported that the percentage of children aged 6–11 years in the United States who were obese increased from 7% in 1980 to nearly 18% in 2012. The percentage of adolescents aged 12–19 years who were obese increased from 5% to nearly 21% over the same period.
- In Washington, about 25 percent of children (ages 2-4 years old and receiving WIC services) were overweight or obese in 2012 and about 23 percent of 10th graders in Washington’s public schools were overweight or obese.
- Asthma affects one in nine Americans, and children in urban areas with higher levels of airborne pollutants have even higher rates. Of the Americans affected by asthma, 9.3% are under the age of 18.³⁸

Both the increase in disability designations and the increasing number of children with attachment or affective disorders might be relevant to the wave of autism spectrum diagnoses. The Center for Disease Control’s Autism Information Center estimates that 11 children per 1,000 have some form of autism. No one really knows if the rate of autism has increased or rather that people are better educated in identifying signs. The definition of autism has also changed which may skew perceptions. What is relevant to this report is the fact that some forms of autism can be diagnosed as early as 18 months, however many children are not diagnosed until at least three years old and often later. This is a crucial piece because so much more treatment can begin with an early diagnosis. Estimates suggest that \$35 billion is spent annually treating people with autism. This does not take into account the impact on families, teachers and anyone else who is in close relationship with someone who suffers from autism.

Parent Perceptions of ELAFS Educational Curriculum

Respondents to the ELAFS Community Survey answered questions regarding the importance of ELAFS services to their child’s readiness for kindergarten and their success in school. The experiences rated most frequently as extremely important to their child’s readiness for kindergarten were physical activities (87%); Literacy curriculum (84%); and Social-emotional curriculum (84%). Though still seen as important, Field Trips (62%) and

Figure 7 Extremely Important to Kindergarten Readiness

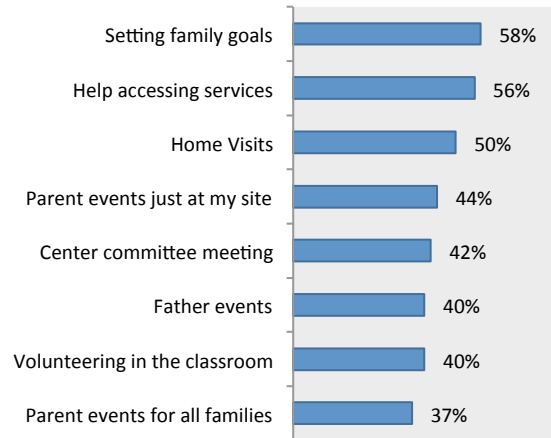


³⁸ CDC FastStats - Asthma

Parent-Child Classroom Activities (69%) did not rank as high.

Of the activities seen most important for their child’s success in school, parents most frequently rated conferences and home visits (62%), setting family goals/action steps (62%) and help accessing services (59%) as extremely important. Ranked least frequently as extremely important were center committee meetings (44%) and volunteering in the preschool (44%).

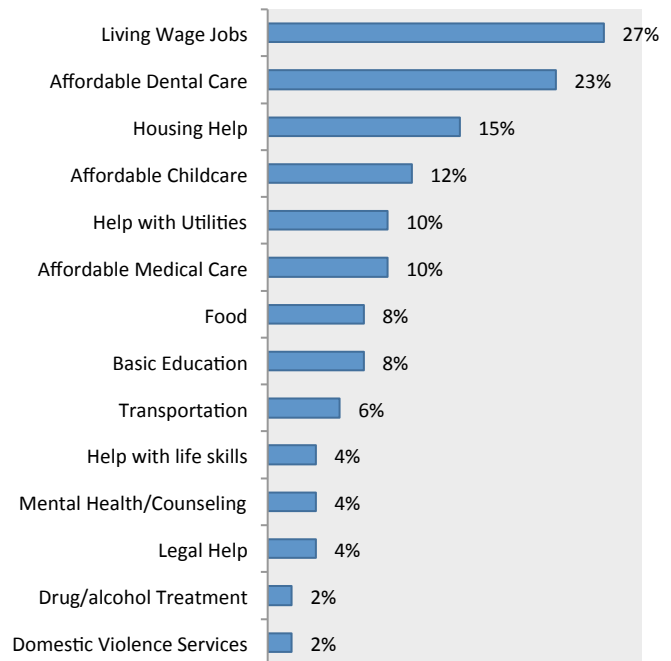
Figure 8 Extremely Important to Child's Success in School



Needed Community Resources

Survey respondents rated both the importance and the availability of 14 categories of services to their own household.³⁹ From an individual household’s perspective, if a social or health service is both “extremely important” to their household and “very hard to get,” there is a perceived extreme service gap for that particular service. Figure 6 presents the proportion of survey respondents who perceive an extreme service gap for each of the 14 services.

Figure 9 Perceived Extreme Service Gap



Services perceived most frequently as having an extreme service gap are living wage jobs (27%), affordable dental (23%), help with housing (15%), and childcare (12%). In addition, many survey respondents perceived as extremely important and very hard to get, help with utilities such as heating and electric bills, basic education, and transportation.

Though services such as drug and alcohol treatment and domestic violence shelter and counseling received low ratings in the service

³⁹ The importance scale ranged from 1, for “not important” to 5, for “extremely important”; the availability scale ranged from 1, for “very hard to get” to 5, for “very easy to get.”

gap analysis, it does not mean that these services are not important to survey respondents. For example, 11% said domestic violence services were extremely important and 5% said that substance abuse treatment was extremely important. However, these same respondents did not rate these services as very hard to get.

SUMMARY

Early Learning and Family Services has a long history of quality services to families. Feedback from customers, peer agencies and government institutions continues to support that assessment.

At the same time, like so much of the rest of the human service field, there appears to be a growing fatigue of trying to do more with less, especially in face of the increasing complexity of some child/family needs. Growth in diversity multiplies the expectations of even “core” program elements and that can seem overwhelming.

According to the Whatcom Prosperity Report, services perceived most frequently as having an extreme service gap by ELAFS families are living wage jobs, affordable dental care, and, housing help. While ELAFS does not directly provide these services, the lack of them certainly affects the families they serve and the children who may not be receiving the attention they need. Staff is well aware of these needs and addresses them with the intention of working as proactively as possible with families.

These challenges will require added collaboration and some innovative thinking. The challenge for the agency in the years ahead will be maintenance of effort with increasingly complex family systems and having the resources and energy to innovate to meet diverse community’s emerging needs in ways that are effective, sustainable and well documented.

We believe ELAFS, with support from rich community resources, is up to the task.