Bellevue Human Services NEEDS UPDATE 2017-2018



ACKNOWLEDGEMENTS

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Special thanks to all of the human services agencies that provided photos for this document.

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Overview



OVERVIEW

The Bellevue Human Services Needs Update for 2017-2018

The City of Bellevue publishes the Human Services Needs Update at the beginning of each two-year human services funding cycle. Since 1989, this report has offered a summary of trends within Bellevue, East King County, the Puget Sound region, Washington State and the nation. Through this report, we hope to provide a broad vision and context for understanding human service needs, and for inspiring actions that will ameliorate barriers to achieving a high quality of life for all Bellevue residents.

Methodology

Some of the multiple sources of information that support the conclusions of the Needs Update include:

- A phone/online survey of 484 Bellevue residents (123 by phone, 361 online).
- All outreach materials (letters and emails) contained information in four additional languages: Chinese, Russian, Korean, and Spanish.
- A written survey of about 30 consumers of human services in Bellevue translated into five languages in addition to English.
- Online surveys completed by 39 human services providers.
- Key informant interviews with 7 administrators or community representatives, including providers or member of groups such as older adults, immigrants and refugees, people with disabilities, lowincome consumers of human services, and health care professionals.
- Meetings with City of Bellevue staff, such as Neighborhood Outreach, Police, Fire, Civic Services and Development Services.

- Over 30 Community Conversations with over 200 Bellevue residents and providers of human services.
- Reports, studies and online databases covering a wide range of service areas and issues and offering a broad national, statewide, and regional perspective.

Bellevue: Community Profile

- In 2017, Bellevue's population was estimated to be 140,700, making Bellevue the fifth largest city in Washington. This is compared to a population of 109,569 in 2000, and 86,874 in 1990.
- Average household size has continued to increase since 2000 after a decreasing trend. In 1970 there was an average of 3.4 persons per household, dropping to 2.4 in 1990, and 2.37 in 2000 then increased to 2.41 in 2010. In 2016, Bellevue's average household size is estimated to be 2.49.
- Over the decades the proportion of people who are under 20 and ages 20 to 44 has declined, while the proportion of 45 to 65 year old and 65 and older has increased. In 2016, about 41% of Bellevue residents were ages 18 to 44 and another 26% were 45 to 64 years old.
- Bellevue's continues to become a more diverse community. For the first time in 2015, non-Hispanic whites no longer represented the majority of Bellevue residents. Since 1990, the proportion of People of Color in Bellevue has more than tripled growing from 15% in 1990, to 28% in 2000 to 41% in 2010 and more recently to just over 50% in 2016.
- In 2016, about 37% of Bellevue's residents were born in a foreign country up from 33% in 2010, 25% in 2000 and 13% in 1990. Over 70% of Bellevue's foreign-born population were born in Asia, followed by 11% from Europe, and 10% from Latin American. India and China were the country from which most of the foreign-born population were born. A little over a third

were recent immigrants to the United States, having entered the country in 2010 or later. About 42% of Bellevue residents (age 5 and over) spoke a language other than English at home in 2016, up from 27% in 2000 and 14% in 1990.

- In 2016, Bellevue's median household • income was estimated to be 113,877 up from \$99,892 in 2015. Between 2015, and 2016, the percentage of households in Bellevue with incomes between \$15,000 and \$24.00 and between \$50.000 and \$75,000 dropped 2% and 4.7% respectively and the percentage of household with income between \$100,000 and \$149,00 rose 4.8%. Since the decreases and increases in the households were not from non-adjacent brackets they did not likely represent many households improving their economic situation. Instead, it is more likely that lower income household moved out of Bellevue and higher income households moved in.
- As the economy recovered and cost of housing rose, poverty rate in Bellevue declined. About 5.9% of people living in Bellevue were in poverty in 2016, down from a high of 9.1% in 2013. Poverty rate were higher for families with children under five years old (15.7%) and for families with a female head of household with children under 18 years old (18.9). The poverty rate was also slightly higher for older adults 65 years and over at 6.5%

Quality of Life in Bellevue

Nearly all (95%) of respondents to the phone/ online survey said that the quality of life in their community was "excellent" or "good". Respondents were asked to rate each of 32 problem areas as a major, moderate, minor or not a problem in their community. The majority of respondents to the 2017 phone/online survey (54%) rated at least five of the twenty-four community problem issues as a major or moderate problem in their community. This is similar to the results in 2015 when 53% rated it as such. Twelve issues received a "major" or "moderate" rating from at least three out of ten (30%) respondents including:

Lack of affordable housing (77%)

- Lack of affordable medical insurance (45%)
- Lack of affordable child care (44%)
- Having jobs that do not pay for the basics (44%)
- Lack of affordable medical care (42%)
- Groups of residents who perceive more problems in the community included women, residents who are 55 and older, residents that have lived in Bellevue 10 years or longer, white (non-Hispanic) residents, and residents who have not recently immigrated her.

Accessing Services

- In 2017, the majority (71%) of those taking the phone/online survey believe that people in the community have adequate access to services.
- The 7% who indicated that there was inadequate access to human services most frequently mentioned the following areas: affordable housing, transportation, health/ dental care/insurance, housing services, and counseling/mental health, lack of information, shelter for the homeless, access to food, recreational services, and drug/ alcohol addiction.

Connectedness in Bellevue Communities

A number of City efforts contribute to the high quality of life that Bellevue residents enjoy. Some of these include:

- Neighborhood Outreach Program works with neighborhood leaders and residents to build up the health, livability and community connections, such as Mini-City Hall, Neighborhood Liaisons and Neighborhood Forums;
- Bellevue's Affordable Housing Strategy was approved in June 2017. The strategy includes the following components: help

people stay in affordable housing, create a variety of housing choices, create more affordable housing, unlock housing supply by making it easier to build, and prioritize state, county, and local funding for affordable housing.

- Downtown Livability Initiative is a targeted review of regulations that guides development and land use activity. An Advisory Committee recommended 25 code changes on topics such as public open spaces and desirable amenities;
- Diversity Focus Group is comprised of concerned and involved community members that are committed to improving the relationship between the Bellevue Police Department and Bellevue's diverse community.

Special Focus Area

Homelessness System, Services and Needs in King County, Bellevue, and East King County

- Homelessness continues to be a crisis in King County and the number of unsheltered people have steadily and visibly increased on the Eastside. In 2015-16, over 1,200 men, women, and children received temporary shelter.
- All Home (formerly The Committee to End Homelessness) is leading and effort, along with over 500 stakeholders, to make homelessness in King County rare, brief, one-time, and to eliminate racial disparities. The response systems include prevention, diversion, emergency shelter, transitional housing, permanent supportive housing, and permanent housing with supportive services.
- The number of homeless students in Bellevue continues to rise and the increase is not explained by growth in the district population. The number of students reported

to be experiencing homeless in Bellevue School District was 228 students in 2013-14 and 257 students in 2016-17.

East King County partners with local non-• profits to provide a wide range of services to homeless individuals in our community, with specialized services for single women, single men, families with children, and youth and young adults. Outreach programs reach out to people experiencing homelessness to build trust, provide resources, and help them navigate the system. Day and Drop in Centers provide access to showers, meals, case management, and resources. Winter Shelters, Safe Parking, and Emergency Shelters provide a temporary shelter along with case management services to connect them with longer term housing resources and assist them in overcoming barriers. Longer term housing offered in our community includes transitional housing, permanent housing with supports and permanent supportive housing. These programs serve households with higher levels of barriers and provide more intensive and deeper levels of support service.

Implications and Gaps

- While efforts are currently underway for a dedicated location(s) for the Eastside Winter Shelter(s), this will take several years to implement and, in the interim, finding suitable sites for the shelters will continue to be a challenge. Shelter space during nonwinter months is also needed.
- Employment opportunities that pay living wages for people experiencing homelessness as well as to keep them from becoming homeless is needed.
- The affordable housing supply is far short of the need. Increased diligence is needed to bring funding and to find appropriate sites on which to build housing that people exiting homelessness can afford.
- Two of the many reasons people become homeless are mental illness and substance

abuse disorders. Funding for services, both in-patient and outpatient, is inadequate to meet the need. Through advocacy in the State Legislature more funding should be prioritized.

- Safe parking facilities for people residing in their vehicles are needed, especially for single men and for those living in recreational vehicles.
- Community education and awareness is critical to align all partners to action in ending homelessness. Engaging new sectors, such as the business community and service clubs, is needed; the strong commitment of congregations countywide could be a model for engaging this new community.
- More outreach especially in the evening hours and more flexible funding for people experiencing homelessness would be an important addition to the array of services currently available.

Heroin & Prescription Opioid Use in King County and Bellevue

- King County, like many places across the country, is seeing sharp increases in the use and abuse of heroin and prescription opiates. In 2016, there were 332 drug-caused deaths in King County and 219 of them were from heroin and prescription opioid overdose. Despite the need, the region suffers from the lack of services and treatment beds to address substance abuse. The number of people seeking treatment for opioids treatment has outpaced those seeking help for alcohol treatment.
- On March 1, 2016, King County Executive Dow Constantine announced the formation of a heroin and prescription opiate addiction task force. The Task Force included 50 stakeholders, including University of Washington Alcohol and Drug Abuse Institute, behavioral service providers, hospitals, human service agencies, the recovery community, criminal justice

partners, first responders, including City of Bellevue Fire Department Deputy Chief of Operations, Andy Adolfson, and others.

- The Task Force was charged with developing • both short and long-term strategies to prevent opioid use disorder, prevent overdoses, and improve access to treatment and other supportive services for individuals experiencing opioid use disorder. The Task Force met over a six-month period to review the following areas. 1) Current local, state and federal initiates and activities related to prevention, treatment and health services for individuals experiencing opioid use disorder. 2) Promising strategies being developed and implemented in other communities. 3) Evidence-based practice in the areas of prevention, treatment and health services. The Task Force strived to avoid redundancy with other related activities and to leverage existing partnerships and activities where appropriate. Also, they applied an equity and social justice lens to the work.
- To confront the region's growing heroin and opioid epidemic, the Heroin and Prescription Opiate Addiction Task Force recommends a comprehensive strategy that focuses on prevention, increasing access to treatment on demand and reducing the number of fatal overdoses. Primary Prevention recommendations: 1) Raise awareness and knowledge of the possible adverse effects of opioid use, including overdose and opioid use disorder. 2) Promote safe storage and disposal of medication. 3) Leverage and augment existing screening practices in schools and health care settings to prevent and identify opioid use disorder. Treatment Expansion and Enhancement recommendations: 1) Create access to buprenorphine in low-barrier modalities of substance use disorder treatment services. 2) Develop treatment on demand for all modalities of substance use disorder. treatment services. 3) Alleviate barriers places upon opioid treatment programs, including the number of clients served and siting on

clinic. User Health and Overdose Prevention recommendations: 1) Expand distribution of naloxone in King County 2) Establish, on a pilot program basis, at least two Community Health Engagement Locations (CHEL sites) where supervised consumption occurs for adults with substance use disorders in the Seattle and King County region.

- In response to the recommendations, efforts have been occurring under each of the recommendations throughout King County in East King County, and in Bellevue. Some of the significant responses within Bellevue and East King County have been increased educations through panels and community conversations, medication drop boxes and pharmacy take back locations, health clinic at one middle school and SBIRT (Screening, brief intervention and referral to treatment) being developed for middle schools, increase of prescription of buprenorphine, continuing funding for treatment facilities, and Narcan being carried by fire, police, and the medic unit.
- Even with the significant amount of work and effort that have occurred, services providers and professionals in this area express a need for more focus in each area of the Task Force recommendations. In additions, King County has seen an increase in the use of the opioid Fentanyl, which is 50 times stronger than heroin.

Implications and Gaps

- The Heroin and Prescription Opioid Task Force created a plan and made progress to address this crisis, but this problem will take years to address. Efforts need to be continued and adjusted for the new challenge of Fentanyl.
- Community education and awareness on the adverse effects of opioid use as well as promoting safe storage and disposal of medication is critical. Approach must engage the critical partners, include physicians, pharmacist, parents, and schools,

for both education and screening, and the entire community.

- Our community needs to provide on-demand treatment for substance abuse treatment and both mental health. The is often a long wait for treatment and when a bed become available it is over 100 miles away. Funding for both in-patient and outpatient mental health and substance abuse treatment is inadequate to meet the need. Advocacy in the State Legislature for more funding should be prioritized.
- Increased access to buprenorphine prescriptions for treatment. Expand the distribution of naloxone to substance users, police, and other in our community to reduce overdose deaths.

Community Goals and Specific Populations Goal #1: Food to Eat and a Roof Over Head

- The percentage of students receiving free and reduced-cost lunch can also help measure community food security. According to Bellevue School District, the total percentage of students qualifying for free and reduced-price lunch assistance has remained steady at 18.8% as of October 2016.
- Local emergency financial assistance providers, like the Salvation Army, Catholic Community Services, Solid Ground and Hopelink, reported that they provided services to 1,320 people in Bellevue in 2016, largely through one-time rental assistance to avoid eviction or foreclosure. They also aided with utility bills, car repairs, prescription drug costs and food vouchers.
- About 31% of Bellevue households are cost burdened, paying more than 30% of their household income for housing. This indicates a cost of housing that is not in proportion

with what people earn, significantly impacting people's ability to maintain a stable housing situation.

- Over 9,100 Bellevue households (17%) have low and very low income. There are only 3,095 units in Bellevue (6% of Bellevue's housing supply) that are affordable to these households.
- In 2017, the One Night Count of homeless found 284 unsheltered individuals in East King County (including portions of Bellevue, Kirkland and Redmond). Compared to the 245 individuals counted in 2016, this represents a 15% increase.

Gaps Include

- Emergency financial assistance for basic needs, such as rent, food, mortgage or utilities assistance.
- Year-round emergency shelter for homeless individuals and families, with expanded nightly shelter during the winter months.
- Affordable housing for low and moderateincome individuals and families, including those leaving homeless shelters or housing programs.

Implications for Action

- The lack of affordable housing continues to be perceived by residents as the top community problem in Bellevue. Housing prices continue to rise and this trend is likely to continue in the future.
- Rising housing prices means single family homes in Bellevue have in most cases become out of reach for households earning the median wage. Little relief is found in the rental market as rental rates are also continuing to increase.
- There continues to be a significant need for housing affordable for moderate-income households (also termed workforce housing) on the Eastside as well as housing for lowincome (30% of median income or below).
 While efforts are currently underway for

a dedicated location(s) for the Eastside Winter Shelter(s), this will take several years to implement and, in the interim, finding suitable sites for the shelters will continue to be a challenge.

- The impact of the system changes occurring through ALL HOME (formerly the King County Committee to End Homelessness) on the Eastside are still unknown. With coordinated entry systems now required by the federal government for all populations (families, single adults, and youth/young adults), it is possible that Bellevue and Eastside residents will no longer be served by Eastside programs. In addition, the results of rapid re-housing and diversion programs have yet to be determined whether they are successful in East King County in preventing people from becoming homeless.
- The need for food assistance has not decreased significantly since the recession ended and will likely continue in the future.

Goal #2: Supportive Relationships within Families, Neighborhoods and Communities

Key Trends

Social support for individuals and families is especially important during hard economic times. Adults with children under age 18 were asked in a survey in 2011 how often they have someone to turn to for day to day emotional help with childrearing. In East King County, 79% said they had support in parenting all or most of the time. People of color, foreign born or household with incomes under \$50,000 reported getting less emotional support. Single parents may also have more need for support. In the 2017 Bellevue phone/online survey, 16% of respondents reported that stress, anxiety and depression was a major or moderate problem in their households, about the same as in 2013 and 2015.

- Research has shown how important quality early learning is for young children to succeed in school and in life. Programs that support parents, such as Healthy Start and Parent Child Home Program, both evidence based home visiting programs, and groups for family, friends and neighbors who are watching young children in their homes while their parents work, are important resources, especially for some families who are new to this country and culture.
- Best Start for Kids Levy passed in November 2015, which will raise approximately 392.3 million to improve outcomes for all children and youth in King County. Its primary focus is to improve the health and well-being of children, youth, families, and community.
 BSK funds myriad of service strategies, commencing with prenatal support, sustaining strategic gains through children, teens, and young adult development and reinforces system changes that lead to safe and healthy communities.
- The Wrap-Around Services Program, a collaboration of the Bellevue School District, the City of Bellevue and United Way of King County, is designed to provide eleven objectives for students, their families and the surrounding school community. Wrap-Around Services partner with numerous local agencies and organization to bolster academic achievement and family involvement in schools.
- Eastside Pathways is a community-wide partnership of more than 60 public, private, and nonprofit organizations, including City of Bellevue and both Bellevue and Lake Washington School Districts, supported by a backbone organization that is transforming the way our community works together to make a positive impact in the lives of children and youth. Eastside Pathways use the collective impact framework to engage organizations and work collaboratively to align efforts to address the systemic barriers that hold back some of our children. Families,

providers, schools, and cities unite around common goals, measurements, and strategies to maximize every child's opportunity for success in school and life.

- There are many indications that requests for information about resources continue to be in high demand in the county and in Bellevue. In 2016, the number of calls for assistance in King County increased significantly to 151,841 calls and 78,747 answered and logged at the Crisis Clinic, the designated Washington Information Network agency for 2-1-1, the Community Information Line. 56% of the calls were for basic needs and 25% for financial assistance. During the first six months of 2017, staff at the City of Bellevue's Crossroads Shopping Center Mini City Hall received 27,724 contacts from consumers requesting resource information, with about 56% related to human service needs. This is on pace to meet or exceed 2016 with 50,871 contacts.
- Statewide client demand for low-cost legal • services has increased and that trend is reflected locally. Eastside Legal Assistance Program reports they have seen a significant increase in requests for legal services. More people are seeking help with evictions and foreclosures, family law (including domestic violence), and credit card and debt issues. There is a shortage of volunteer attorneys to help clients beyond a forty-five minute, free consultation. Another service in high demand is help with immigration issues. The King County Bar Association reports the same trends, adding that many of their clients face barriers such as language, mental health, disability, and financial.

Gaps Include

• Support for parents and caregivers who want to assist in their children's development, from birth through college or career, particularly people new to this culture and language, including parenting education and home visiting programs.

- Support for caregivers of frail older adults and people with disabilities.
- Adequate funding for the 2-1-1 Community Information Line to maintain services especially in the face of increasing community needs and information in other languages than English to meet the demands of a growing diverse population.
- Low-cost legal services.

Implications for Action

- All families need support, regardless of socioeconomic status. However, some Bellevue families may continue to need additional social support to raise their children, care for aging and/or disabled loved ones, or a combination of the three if they have limited resources. Family, friends and neighbors will be even more important to help because funding is often limited for many formal services, such as chore services and after school care, or some families may not meet eligibility criteria.
- The need for information provided in languages other than English continues to grow as the Puget Sound Region and East King County becomes more diverse. Human service providers, local government and businesses need to work together to meet this community need by providing resources in a variety of languages.
- Many residents still do not have easy access to computers and instead rely on the phone. Multi-modal forms of getting information out to the community is critical. The Crisis Clinic's King County 2-1-1 is one way to fill this critical information gap. However, sustainable funding for its operation needs to continue as funding cuts results in fewer staff to answer calls. Another way to improve access is partnering with non-profit agencies, cities and faith communities to include information about resources through "low tech" ways such as printed media, multiethnic radio stations, public TV access,

DVD's, and neighbors sharing information with neighbors.

 Low-cost or free civil legal services are a growing need for many residents. A major gap for services exists for direct representation, especially for survivors of domestic violence, immigration issues, landlord-tenant issues and credit counseling.

Goal #3: A Safe Haven from All Forms of Violence and Abuse

- Only a small percentage of survivors of personal violence access formal services, according to national and local data. Survivors who do not speak English, have limited economic means, who are elderly or who have a disability are even less likely or able to seek support services. Local providers continue to report an increase in the number of limited-English speaking clients. The Bellevue Police Department's Domestic Violence Victim Advocate averaged a caseload of 18 cases a month in 2016, which is a reduction from 22 cases per month in 2014.
- The number of reported domestic violence offenses statewide increased 5.7% between 2014 and 2016, from 49,360 to 52,159. Domestic violence offenses made up 50% of all crimes against persons in 2016. In Bellevue, the number of reports of domestic violence to the Bellevue Police department has remained relatively flat with the expectation in 2013. Long term effects of sexual assault and rape include mental health issues, substance abuse and suicide. Harborview Crisis Response Center and King County Sexual Assault Resource Center provide a wide range of services to survivors of sexual assault, including counseling, legal advocacy and referrals to other services. Community education about the identification and prevention of sexual assault is an important component of their work.

- National studies show that 3-4 million children ages 3-17 are at risk of exposure to domestic violence each year. Research indicates that children who witness domestic violence show more anxiety, low selfesteem, depression, anger and temperament problems than children who do not witness violence in the home.
- Providers of services for survivors of both sexual assault and family violence also report that more clients are in need of basic needs when they seek help. Safe housing is one such need; national statistics indicate that domestic violence is the number one cause of homelessness for women. There are a limited number of shelter beds in all parts of the County, but LifeWire (previously known as the Eastside Domestic Violence Program) is the only agency in East King County offering a confidential shelter. Overall, for every family they have the capacity to serve in emergency housing, 26 are turned away, which is a 37% increase from 2015.
- Legal assistance and mental health counseling remain the primary needs for survivors of domestic violence. Helping survivors legally pursue and obtain protection orders, custody, child support and other financial needs, gives them the physical safety and financial security that enable them to leave the abuser. Providers report that many survivors are experiencing Post Traumatic Stress Order (PTSD) and suicidal ideation as a result of their abuse.
- National experts believe that older adult abuse, which includes physical and sexual abuse, neglect and exploitation, is greatly underreported; it is estimated that for every case reported, about five go unreported.
 Financial exploitation is the most frequently reported category of adult abuse in
 Washington State. In 2016, Bellevue
 Police received 35 reports of older adult abuse annually, a significant declined from 2012 with 81 cases. It is thought that a contributing factor in lower reports is the

reluctance for family member to report crimes committed and of victims reluctant to press charges against family members who may be the perpetrator.

Gaps Include (for both survivors of family violence and sexual assault)

- Low-cost legal services including victim advocacy.
- Transitional, subsidized, and affordable permanent housing.
- Low-cost mental health counseling including counseling for children affected by domestic violence.
- Culturally and linguistically appropriate services.
- Accessible community education about sexual assault and family violence.

Implications for Action

- Survivors of sexual abuse often have multiple needs including treatment for substance abuse, parental support and childcare, legal aid, counseling and transitional and permanent housing. These services should not be created in a "silo" but rather developed so that they can assist survivors of domestic violence and child abuse seamlessly.
- Sexual assault continues to be a public safety issue; in order for the community offenders to hold accountable, services must exist for those victimized.
- It is critical to support community education about sexual assault, rape and child sexual abuse, as decreased staff levels at many agencies may complicate finding and getting help. This education can also be copresented with topics related to other forms of family violence.
- Consent workshops for youth are rising in popularity among sexual assault prevention experts. Informing youth as to what sexual consent is, how to develop boundaries, and the legal definitions of assault can help

them to make more informed choices as young adults.

- Several ongoing areas of concern in this service area that should still be monitored include Internet safety, on-line victimization of vulnerable youth, the potential needs of partners of returning veterans, or of women who are veterans, and exploited children and adults who are used for sex trafficking.
- There is a strong connection between early, untreated child sexual abuse and homelessness and trafficking. Upwards of 40% of youth who are homeless experience sexual assault prior to becoming homeless. It is important that conversations about homelessness and trafficking include the issue of sexual assault.

Goal #4: Health Care to be as Physically and Mentally Fit as Possible

Key Trends

- Health care reform under the Affordable Care Act (ACA) beginning in 2010 provides the uninsured adult population aged 19-64 opportunities to enroll in expanded Medicaid or through the Washington Health Plan Exchange, depending on their incomes. As of March 2017, more than 428,000 King County residents are enrolled in Medicaid programs, including 150,000 in Medicaid expansion.
- Children will continue to be eligible for the State Apple Health for Kids Program; those up to 200% of the federal poverty level will get insurance at no cost; those between 200-300% will be eligible for low-cost insurance. Children from undocumented households will also be covered.
- In 2015, 9% of all Bellevue residents are uninsured. 13% of adults age 18-64 in Bellevue were uninsured, compared to 15% across the country.
- Lack of health insurance was related to household poverty, education, race/ethnicity

and education. Low-income and individuals of color were more likely to be uninsured. For example, in King County, African American infant mortality rates are 7 per 100,000 compared to 3.4 for Whites. Low economic status and high rates of mental health problems are also linked.

- The Affordable Care Act does not require dental care for adults. 36% of phone/ on-line survey respondents cited lack of affordable dental care as a major or moderate community problem; up from 32% in 2015. About 90% of consumer survey respondents reported that not being able to pay for dentist bills was a major or moderate problem in their household.
- Substance abuse, particularly use of heroin, is on the rise in Washington State and King County. Providers of services to both youth and adults in East King County report this trend, as well as more multi-problem clients who have both addictions and mental health problems.
- Frequent Mental Distress (FMD) was much more common in low-income respondents.
 26% of those with household income below \$15,000 per year experienced FMD, almost four times higher than the rate of people in households earning \$50,000. 7% of Bellevue adults experience frequent mental distress (compared to 10% countywide). Low economic status are high rates of mental health problems are closely linked.
- The Crisis Clinic 24-Hour Crisis Line responded to nearly 9,000 calls from Bellevue residents in 2016.

Gaps Include

• Accessible and low-cost health care and treatment services for under-insured or uninsured people, especially dental care and mental health services. This gap has been addressed for a large portion of the population due to Health Care Reform, but not for undocumented adults.

- Affordable prescription drugs, hearing aids, and eye care for low-income people, since insurance often does not adequately cover these costs.
- Health services and resources provided in culturally appropriate and linguistically competent ways.
- Support for children, youth and adults who are experiencing frequent mental distress due to lack of income, social isolation, or Adverse Childhood Experiences.

Implications for Action

- Under the health care plans made available after the Affordable Care Act, many vulnerable people now have coverage who were uninsured before ACA. However, coverage does not automatically translate into positive health outcomes. Help-seeking behaviors, a lack of understanding of how to navigate health care settings, attitudes toward prevention, traditional beliefs regarding science, and even the need for patients to build trust in the medical profession, are just a few of the phenomena that can impact health outcomes even after one is insured. This presents a challenge both for health care systems to pivot such that they can affect attitudes and beliefs among the newly insured, as well as for the newly insured to adopt new beliefs and behaviors.
- Community education around co-occurring disorders and self-medication is still needed, both to combat the stigma around mental illness, but also to address the often-artificial perception that mental illness and addiction do not impact each other. Substance abuse among adults and youth continues to affect individuals and families, and the rise in heroin use has been particularly startling. Continued community education about the risks, and better understanding about the causes, need to be part of the community dialogue to address this increase. Fundamentally, however, the stigma attached to substance abuse must be met with education for

community members who may not understand or grasp that the social fabric of the Eastside is just as vulnerable to substance abuse as any other part of the county.

Goal #5: Education and Job Skills to Lead an Independent Life

- Bellevue residents are well educated for today's economy. 66% of Bellevue residents hold a bachelor's degree or higher. However, even though Washington State's unemployment rate in June 2017 was 4.5%, a significant reduction compared to 8.3% in 2011; data shows that recovery has been uneven. Some residents despite their higher education levels are still struggling to pay for all their basic needs.
- While Washington State's minimum wage in 2015 at \$11/hour is the highest in the country, it is not a living wage. An adult making the minimum wage and supporting two children is under the federal poverty level (FPL), \$20,160 for a family of three in 2017. It is estimated that for a single adult with a school aged child and a toddler, a living wage for King County is \$37.28 an hour (\$78,741 annually).
- Childcare availability, affordability and quality continue to be a concern for many working parents/caregivers, especially for lower-wage workers. Childcare in East King County is more expensive than in other parts of the County, and can cost on average \$30,876 a year for an infant and a pre-school child. Childcare cost can exceed the cost of housing and college tuition, especially if using rates for full time care for an infant at a childcare center
- Access to employment and training programs are critical in order to assist unemployed residents in increasing their skills to find higher paying jobs or to transition to jobs that are currently available in the marketplace.

Local colleges, community-based agencies and government programs provide Englishas-a-Second-Language classes, job skills and training classes, and job placement services in Bellevue. Many of these organizations report a bigger demand especially for increased skills to get higher paying jobs and more difficulty finding jobs for people with limited English language skills.

Bellevue residents increasingly report that • finding public transportation is a problem, which includes getting to work as well as accessing human services and social support. 39% of 2017 Bellevue phone/online survey respondents rated "inadequate public transportation" as a major or moderate problem in their community; this has been a top household problem in Bellevue surveys in 2009, 2011, 2013 and 2015. In the 2017 provider's survey, 70% of respondents reported that their clients needed, but could not find, help with transportation. This was the highest rated barrier identified in the provider survey. Other identified gaps in public transportation are ineffective transportation for potential employment, lack of late night bus routes, and money for tickets. In 2015, King County Metro rolled out the Orca LIFT reduced fare program allowing people with low-incomes to purchase a card and load funds on it for use.

Gaps Include

- Jobs that pay a living wage with benefits.
- Affordable, quality childcare for low-income families.
- Affordable and accessible job training opportunities teaching "new economy" job skills and ESL classes.
- Affordable and accessible transportation options especially for public transportation.

Implications for Action

• The decrease in middle-income job opportunities makes it harder for people at lower incomes to access better jobs. There are more low-wage job opportunities, but along with these come financial instability, dependence on public supports that are dwindling due to budget cuts and less of a chance to obtain additional training to increase skills to find a better job. A living wage for a family living in Bellevue is higher than in other parts of King County.

- Bellevue residents have a high level of education, however, there are not many vacancies in some of the growing sectors like hospitality that pay a living wage. It will be critical to attract business and industry that pay living wages.
- Barriers to employment such as lack of affordable and quality childcare, limited English speaking skills, the absence of coordinated transportation and lack of training and education opportunities to secure higher wage jobs are key issues to be addressed to help people improve their economic conditions and the quality of their lives.

Specific Populations Older Adults

- By 2030, more than one of every five Washingtonians will be an older adult.
 People age 65 and older represent 14% of Bellevue's population. People 65-74 years of age comprise the largest portion of this population (51.3%), followed by those 75-84 years of age (33.1%) and those 85 years of age and older (15.6%). This last age cohort is the fastest growing segment.
- People are living longer, with life expectancy in King County at 77.8 years of age. An AARP study found that most older adults will one day need Long Term Care Services and Supports (LTSS) but about one third of people turning age 65 will have costs that exceed their ability to pay and will need to turn to Medicaid to help pay for LTSS. Many adults say they wish to retire and live at home, and some will likely use

a diverse range of services to maintain their independence, including adult day programs, home modifications and assistive technologies. Fewer people live in nursing homes which are the most expensive option, costing over \$114,000 a year in Washington State; resulting in the overall number of beds, residents and occupancy rate have declined or remained static in the last ten years. The result is increasing demand for inhome services and assisted living residences.

- There are an estimated 600,000 family caregivers in Washington State who provide over 610 million hours of care annually, valued at over \$5.4 billion. Caregiving can take a toll on the emotional, physical and economic health of the care giver. A recent survey found that the total wage, social security, and private pension losses due to caregiving on average were \$303,880. Another study found that the longer a caregiver has been providing care, the more likely they report fair or poor health (23%).
- The population of the people with dementia is increasing, with an estimated 110,000 people in Washington State with Alzheimer's disease or related dementia. Washington DSHS estimates that between 2010 and 2040, there will be a 181% increase in the number of Washington residents aged 65 and older with Alzheimer's Dementia. The estimated cost of caring for a person with Alzheimer's in the last 5 years of their life is \$287,038.
- The cultural diversity of Bellevue's population as a whole is also apparent amongst its older adult residents though it is a smaller proportion than children. Asian residents who are 65 and older are about 16% of the population in Bellevue. This is the next highest after White, which is 78%. Hispanics make up 9% and Blacks 2% of the population 65 and older. Over 23% of older adult Bellevue residents speak a language other than English at home, and 16.1% speak English less than "very well".

- Older Bellevue residents, people 65 years • and older, are less likely to have a vehicle (8%) than Bellevue adults 35-64 years old (4%). Making the decision to stop driving either for health or financial reasons can have an impact on the older adult's ability to meet their basic needs, such as doctor visits, shopping, and recreation. In response to the growing need for better transportation options for older adults, people with disabilities and low-income people on the Eastside, a group of government and nonprofit agencies created the Eastside Easy Rider Collaborative, and are working to improve access to public transportation and other transit options.
- The need for affordable housing for the growing older adult population in King
 County continues to surpass the supply. It is estimated that more than 900 additional units of affordable senior housing units are needed per year until 2025 when the percentage of people older than 65 years of age will be 23% of the population.
 Reports indicate an increasing in older adults represented among those who are homeless in shelters or living in their cars. In Bellevue, there are only 400 affordable (below market) rental units for low-income older adults, a slight increase from 2015.

Gaps Include

- Low-cost dental, eye care and hearing aids for low-income older adults.
- Job training and job placement for those who need to or want to work after retirement.
- Access to accessible transportation options.
- Support for family caregivers, including grandparents raising grandchildren.
- Mental health services that are specifically designed to address aging issues.
- Affordable and accessible housing with services, including long term care services and supports.

Implications for Action

- The rising cost of living strongly impacts many older adults living on fixed incomes. More older adults will likely delay their retirement and work beyond the traditional retirement age of 65, primarily because they can't afford to retire. More support for older adults to find employment may be needed, as well as training opportunities to gain skills in computers and using social media for job searching. Programs such as volunteer transportation and information and referral hubs, are critically needed to help bridge the gap.
- The demand for services for older adults from other countries newly settled here or long-time residents will likely continue to increase. These services include English and citizenship classes, culturally sensitive healthcare, and activities that will encourage them to share their talents and abilities to feel more included in their new culture.
- Coordinated transportation for older adults in the community is likely to become a major focus. Modes of transportation other than single-occupancy vehicles such as shuttles and buses will be increasingly important. Many older adults will give up owning their own vehicles and will need ways to get around to their jobs, to medical appointments, and to other activities essential to daily life.
- Providing support for family caregivers is critical. This is a wise economic investment given the enormous cost-savings to the Medicare, Medicaid and long-term care systems in addition to the positive impact on the disabled and older adult's quality of life. Providing information and resources such as affordable respite care, support groups for caregivers, and classes on planning for their disabled loved ones when they can no longer care for them can help provide some immediate resources to address their stress.
- Housing options for older adults is needed to address the huge shortfall of affordable

housing that is evident now, and will peak by 2025. Creative options are important to consider. These could include more lowincome housing development for older adults, home sharing programs, Universal Design and zoning for Accessory Dwelling Units.

- Using technology to help improve the quality of life applies now more than ever for older adults. From Looping for those who are hard of hearing to assistive devices to help those with mobility issues, technology can become an integral part of the menu of resources from which older adults can select to help them lead rich, full lives.
- Dental, hearing and vision services, which are not covered by Medicare, will continue to be more in demand from older adults, and put increased pressure on communitybased agencies to provide. Access to mental health counseling remains a critical gap for older adults; a system-wide expansion of service capacity for older adult behavioral health services, from prevention to in-patient treatment is needed.
- Planning is needed to making communities more livable for people of all ages, often referred to as "age-friendly". This includes increasing opportunities for social engagement, healthy lifestyles and civic participation.

People with Disabilities

- In the US, it is estimated that 1 in 5 adults have some type of disability. Older adults have the largest share of people with one or more disability with about one third of older adults having one or more disabilities.
- Affordable housing is a significant challenge for people with disabilities who seek an independent living arrangement. With the 2017 maximum federal monthly payment of \$735 per month, which is less than fair market rent for a one bedroom apartment in Seattle-Bellevue metropolitan area

(\$1544). In Washington State, the majority of people with developmental disabilities (97%) live in the community, most with their families. For those who can't live independently, supported living services that offer instruction and support to persons who live in their own homes in the community are available. Of the 10,414 living in King County outside of Seattle, the vast majority live in their parent's homes (9,772). However, more subsidized housing options for people with developmental disabilities are needed as parents age and their adult children look for more independent living.

- The 2014-2017 King County Plan for Developmental Disabilities Services identified the need for culturally competent services and outreach for the increasing number of people from diverse ethnic and cultural communities and with limited English language skills. KCDDD conducted several methods to obtain community feedback and the reoccurring themes were that language and cultural barriers prevent many families from understanding what services they might be eligible for or accessing services in King County.
- Services for children birth to three with developmental delays or disabilities are underfunded at a time when more children are being identified with these needs. In 2016, 287 children aged birth to three living in the Bellevue school district were receiving services compared to 214 in 2014. Early identification and intervention has shown to be effective; King County data indicates that in 2016, 37% of the children who exited Early Intervention services countywide did not need special education services.
- Transition services for youth with intellectual/developmental disabilities leaving high school increases their success in the community, including finding and retaining employment. Local non-profits working with the Bellevue School District have

provided such transition programs with good outcomes, and have begun working with students even earlier that high school to help them and their families understand the system and access services. However, more such services will be needed in the future.

Even though the unemployment rate in the State is dropping, it is still challenging for people with intellectual/ developmental disabilities to find jobs.
Despite this challenge, AtWork!, a local supported employment agency, was able to work with employers to create jobs for this population and have increased job placements to over 70 per year. In the last seven years, 220 businesses have hired, for the first time, a person with a disability supported by AtWork!

Gaps Include

- Limited housing opportunities for people with disabilities who prefer to live independently.
- Respite care for aging parents whose adult children with disabilities still live at home.
- Services for caregivers of children with disabilities, including childcare, recreational and after-school programs and caregivers of adults with disabilities, including respite.
- Culturally and linguistically appropriate programs and outreach to families with children with disabilities who come from diverse cultural and for whom English is not their first language.
- Coordinated, accessible transportation options for people with disabilities.
- Funds for early identification of children with disabilities.
- Lack of available paid and volunteer positions for people with intellectual/ developmental disabilities.

Implications for Action

- Funding for services to people with all types • of disabilities continues to lag behind the growth of this population in the state, in King County, and in Bellevue. The result is that there are wait lists for certain services such as housing and family support. And for those programs in which waiting lists are not allowed, agencies are strapped to find additional resources to fill the funding gap. This trend is predicted to continue over the next several years due in part to the higher life expectancy of the aging population with developmental disabilities, the increase of referrals of children with disabilities, and the continued development of medical procedures that now save the lives of those who in the past may not have survived trauma or complications at birth.
- Lack of affordable housing is as much of a problem for people with disabilities as it is for the rest of the population, if not greater. The need is growing faster than housing stock is produced. It is especially critical for people with disabilities to find housing in familiar neighborhood settings, near support systems and convenient amenities, in order to maintain their independence to whatever extent they are able. Another growing need is for more paid and volunteer positions for people with I/DD.
- Early intervention services for children birth to three with disabilities are underfunded. Early intervention saves costs later; for some children whose special needs are identified when they are older, critical time is lost. All sectors of the community-medical, business, education, public and non-profit could increase their efforts to promote early screening and make it easier for parents and caregivers to find help.
- There continues to be a lack of programs for families with children with special needs that do not speak English as their first language. Especially when dealing with issues of disabilities, which can be viewed differently

by various cultures, it is critical that more multilingual, multicultural providers are available to work with families.

- Childcare for children with special needs continues to be in very short supply in the community, as are programs appropriate for children age 12 and older. Community-based organizations already providing such services to typically developing children could, with training and support, help to fill this gap.
- Inclusion of people with all disabilities in all communities needs to be a priority. People with disabilities who experience inclusion early in their lives are more likely to live in and actively contribute to their community as adults.

Refugees and Immigrants

- In 2015, Washington ranked 11th in the U.S., resettling 2,625 refugee arrivals, representing about 3.75% of total new refugee arrivals to the U.S. In 2016, King County resettled 4,537 refugee arrivals. The biggest group are from Afghanistan, Iraq, Somalia, Ukraine, and Iran. The largest group of immigrants in Bellevue are Hispanic/ Latino, Asians including Chinese, Korean, and people from East Indian countries.
- As of 2016, 95 languages and dialects were spoken by Bellevue School District students. The top two languages are Spanish and Mandarin Chinese, with over 1,200 speakers each. Local organizations and colleges offer courses for English Language Learners to help adult refugees and immigrants learn English specially to increase their access to jobs. Agencies report that language barriers are the biggest issue for newcomers from other countries to find work.
- Bellevue's population continues to grow and diversify. In 2015, Census reported that 49.996% of Bellevue residents indicated as a single race, white, making Bellevue a majority non-white population for the first item in

its history. Specifically, Bellevue's Asian and Hispanic/Latino populations have been the fastest growing populations.

- In 2014, the City of Bellevue and its Council adopted a Diversity Advantage Plan. The plan's goal was to research and adopt best practices and engage the community to unlock the positive power of diversity in Bellevue. In 2016, they formed the Bellevue Diversity Advisory Network (BDAN), made up of a diverse group of 21 member who provide counsel to the city on how to better reach, serve, communicate, and collaborate with Bellevue's diverse community.
- The City, in addition to local coalitions, has been working on ways to make information about resources more available to non-English speaking residents. Resource guides and websites in multiple languages and bilingual staff answering phone information lines all aid non-English speakers in identifying and accessing much needed resources. In addition, City of Bellevue and its Council adopted the Diversity Advantage initiative. The initiative was developed to research and apply best practices for organizations and engage the community to learn from them on how to unlock the positive power of diversity in Bellevue. Bellevue implemented some of the recommendations by sponsoring forums on personal safety and immigration rights and developed a training for resident form other cultures on the value of volunteering and how to access volunteer opportunities.
- The need for free or low-cost legal assistance for immigration and family law issues provided in languages other than English continue to grow. Eastside Legal Assistance Program (ELAP) has a clinic that deals with immigration law issues and the multilingual clinic that for any civil legal issue through the use of Ethnic Bridge Language line staff and volunteer attorneys. ELAP reported that between November 2016 and May 2017, they met with over 1,000 East

King County residents on immigration issues. There are increasing reports of intimidation, harassment, mistreatment and fear due to immigration status.

 Access to health care, including mental health and dental care, has become increasingly difficult for many adult immigrants, even those who qualify for Medicaid or other insurance through private companies. For instance, some cannot afford the co-pays or deductibles for their insurance, or their plan does not cover what they need. In addition, mental health services are becoming less accessible, especially for minority communities, at a time when people are reporting a higher rate of stress and anxiety.

Gaps Include

- Free and low-cost legal assistance for immigration and family law issues provided in languages other than English.
- Information about resources in languages other than English.
- Low-cost health and dental care for immigrants who do not have health insurance.
- Support for refugee and immigrant parents with children of all ages.
- ESL and job training programs for non-English speaking residents.

Implications for Action

- The need for more culturally and linguistically responsive human services staff grows each year. Throughout the community, there is a need for information to be available in languages other than English, such as that provided through the Cultural Navigator program, and other culturally and linguistically specific non-profit organizations.
- There is a lack of culturally appropriate mental health counseling and medical care for recent immigrants or refugees. Use of mental health care can be unfamiliar and unacceptable in some cultures. Providing

culturally responsive care which takes into account diverse backgrounds is essential.

- Requests for English-as-a-Second-Language and citizenship classes at all levels for adults are increasing significantly, a result of larger numbers of refugees and immigrants living in Bellevue as well as a greater demand for better language skills to secure better paying jobs as the cost of living rises. More opportunities for people to learn English, especially those that offer childcare and evening classes, are needed.
- Many parents for whom English is not their first language may need assistance helping their children in school. This can include having more bilingual staff, materials for parents translated in their native languages, and events to educate parents about the school system and culture in the U.S.
 Opportunities to practice English in social situations would also help in developing language skills.
- More opportunities are needed for people to have cultural events and activities to increase awareness in the community about the richness of these cultures and engage new Americans in meaningful dialogue. There are more ways yet untapped to utilize the strengths and assets that the many immigrant and refugee groups have brought here with them, to enrich and strengthen the whole community. This is especially important for the spouses and parents of workers in the high technological industry that reside here from other countries to provide social support and decrease their isolation.
- In a time of potential implementation of significant changes to federal immigration laws it is critical that the community help immigrants and refugees feel welcome and safe, whether it is applying for services, seeking employment, or taking their children to school or to participate in activities.

School-Aged Children and Youth

- The Bellevue School District continues to be among the highest ranked school districts in the nation. In May 2016, 20,177 students were enrolled in Bellevue School District. Approximate 1,733 Bellevue households have students that attend school in the Issaquah School District.
- The student body in the Bellevue School District (BSD) is becoming more diverse.
 In 2016, 38% of students were White, compared to 71.4% in 1996, 38% were Asian, 12% Hispanic, 8% were black and 9% were two or more races. In additional to growing racial and ethnic diversity, there are now 95 first languages spoken at the district.
- The Bellevue School District created a Department of Equity. The department operates with the belief that, "An equitable and excellent school district is one which all students achieve high levels of academic success, regardless of any student's race, ethnicity, culture, country of origin, religion, gender, special needs, sexual orientation, neighborhood, income of parents, or mother tongue. In an equitable and excellent school district, there are no persistent patterns of differences in the academic achievement or treatment of students grouped by race, ethnicity, culture, special needs, and country of origin, religion, gender, sexual orientation, and neighborhood, income of parents or mother tongue. Equity and excellence occur when each and every student is served effectively to achieve high levels."
- Suicide is the second leading cause of death among Washington youth ages 15-24 and the third leading cause of death nationally. According to the National Center for Health Statistics, Washington has the 21st highest overall suicide rate in the nation. According to the 2016 Healthy Youth Survey for

Bellevue School district, 15% of 8th graders, 17% of 10th graders and 16% of 12th graders had contemplated suicide in the last 12 months. Further, the mental health of school-aged children and youth is a major concern expressed by teachers and school based counselors. Bellevue mental health providers report challenges in meeting all of the need for mental health and substance abuse treatment. Youth Eastside Services reported an increase over the past five years in the number of young people coming into their office with higher acuity than before: more substance abuse, anxiety, suicide ideations and depression.

Housing for homeless youth continues to be a need throughout King County. The Bellevue School District reports 257 students were eligible to receive services funded by the federal McKinney-Vento Act because they were homeless. In addition, providers who work with homeless youth report the majority have experienced significant trauma due to physical or sexual abuse, and/or have aged out of the foster care system or have run away from dangerous situations. As a coping mechanism, many of these youth abuse substances and can develop serious addictions. In January 2017, the HUD awarded the Seattle-King County Continuum of Care \$5.4 million for Youth Homelessness Demonstration Program. These funds will support a wide range of housing programs to help prevent youth homelessness.

Gaps Include

- Prevention, early detection and treatment of youth mental health problems, including depression, suicide ideation and anxiety as well as substance abuse.
- Supportive services and programs for all diverse youth include those with disabilities, from other cultures and ethnicities, and Lesbian, Gay, Bisexual, Transgender and Questioning youth.

- Emergency shelter and transitional living programs for homeless youth, including older youth up to age 24.
- Mentor programs, quality after-school programs and other opportunities for positive interaction with adults in the community.

Implications for Action

- Access to supports for school-aged children and youth to ensure their health and wellbeing is critical to ensure that they are prepared for success in whatever they do in life. Though the unemployment rate is down, many families still struggle to provide the basics for their children. Lack of resources can put children and youth at risk for poor outcomes, and eventually take an economic toll on the community. Efforts such as Eastside Pathways provide an important framework by which to "mobilize the community to support every child, step by step, from cradle to career".
- With the growing diversity in Bellevue, there is a need for more culturally sensitive programs and activities for school-aged children and youth and their families who may be coping with adjusting to a new country and culture or to gender-based differences. Involving the families is needed to ensure school success.
- As families experience the lingering effects of the economic downturn, many children are still internalizing this stress, exhibiting problems in school, increased substance abuse, anxiety, suicide ideation and depression, as evidenced by comments from school staff, parents and mental health professionals. Evidence based and promising prevention oriented services, including those that promote health, such as recreation activities and mentoring, are needed to help avoid more serious problems later.
- There is a gap in the "safety net" for homeless youth and young adults, up to age 24. More housing with services and outreach

to this at-risk population is needed to help them move on to productive lives. Some have "aged out" of the foster care system; others are employed or going to school, but lack family or community support.

Veterans

Key Trends

- In 2016, there were approximately 112,556 veterans live in King County, about 10.6% decrease from 2010. About 100,834 are men and 11,722 are women. This decline is thought to be due to the large number of veterans aged 65 and older and less recruitment. Overall, the number of women in the military has increased, as has the proportion of veterans who are persons of color. It is estimated that almost 26,000 veterans live in East King County, 22% of the total in the county. In Bellevue, it is estimated that 6,649 people are veterans, a decrease from 2014.
- Consistent with national trends, the number of older veterans is increasing in the state and county. 74,000 veterans, living in King County are over the age of 55 with 30,700 between 55 and 64. In contrast, 9,200 veterans 18-34 years old making up 7.6% compared to 7.8% in 2013.
- Homelessness and lack of affordable housing are significant issues for many vets and their families, both nationally and locally. In the 2017 One Night Count of homeless people in King County about 11% (1,329) identified as veterans, 693 were unsheltered while 636 were sheltered in shelter or transitional housing.
- While vets from all periods of service have experienced a range of mental health issues from the trauma experienced in combat, Post Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI) have emerged as two signature injuries of the Iraq and Afghanistan wars. PTSD is a severe reaction to war that includes hyper-alertness,

nightmares and depression. It may be triggered by reminders of combat, such as fireworks or television scenes of violence. National data indicates that nearly 20% of vets returning from the war in Iraq and Afghanistan reported a mental health issue such as PTSD or major depression. In King County, it is estimated that between 19,500 to 28,000 veterans from all war eras could be affected, and that as many as half of them will not seek treatment.

- Nationally, 20 veteran's commit suicides each day according to the VA estimate in 2014. Despite efforts by the Veterans Administration (VA) to increase access by veterans to mental health services and supports, suicides continue to increase. Local agencies also report an increase in veterans who struggle with substance abuse as well as mental health issues.
- The King County Veterans and Human Services Levy Service was extended due to popular vote, and added services for seniors as an added focus. The Vets Levy programs provide a variety of services addressing the needs of veterans and their families, including affordable housing with support services, veteran and training programs, counseling and consultations for PTSD, Traumatic Brain Injury, Military Sexual Trauma, and Military Family Counseling. In 2016, 1,146 people in Bellevue received services.

Gaps Include

- Employment services including job training, education and assistance with re-entry into the job market.
- Mental health services including substance abuse treatment tailored to meet the needs of returning veterans with specific disorders, such as PTSD and physical issues such as TBI; support services for their spouses and children.

- Affordable housing especially for homeless veterans and transportation for veterans to be able to access health and human services.
- Support services for woman veterans who have been sexually traumatized as well as general health care services specific to their needs.
- Supportive services for families of veterans to help with their transition to civilian life.
- Coordination of services including better ways of getting out information about eligibility about vets benefits and other services for vets and their families.
- Services for aging veterans (long term care) and their caregivers.

Implications for Action

- As a result of a focused countywide effort over the past ten years, human service agencies have begun to better track veterans' usage of their services with improved intake processes. This needs to continue and further be refined so data is available to show the real needs of veterans, especially among the population of homeless veterans who are very challenging to track. In addition, ongoing training for community providers on Veterans Culture and Veterans services are needed to create a more seamless system with "no wrong door" to meet veterans' needs, especially for those veterans who are not eligible for VA services due to their less than honorable discharge status. The Veterans and Human Services Levy funding provides many of these trainings through the Veterans Training Support Center which can be accessed at http://veteranstrainingsupportcenter.org/
- Ongoing partnerships between federal, state, and county programs for veterans and human service agencies are needed to ensure that veterans are aware of the benefits to which they are entitled, get help in accessing these benefits when they are eligible, and are assisted in a coordinated, seamless manner.

 In addition to awareness of benefits, city governments could create internships for veterans and help link them to professional networks and businesses to encourage them to hire veterans, and have veterans more access to living wage jobs. Cities could also assist veterans' transition to civilian life by helping them learn about services and resources in East King County.

Bellevue Adult Misdemeanant Probation

- The adult offender population impacts all levels of government and communities in multiple ways. There is no organized advocacy working to sustain the public's attention on the needs of this unique population. Identifying this diverse group as a special population with specific needs is a first step in formulating a collaborative plan to work along the entire human services continuum to collectively work toward the shared goal of reducing recidivism.
- Defendants who are guilty of misdemeanor offenses committed in Bellevue are supervised by Bellevue Probation. Typical offenses include: driving under the influence, domestic violence assault, theft, possession of stolen property, driving with a suspended license and various felonies amended to misdemeanors.
- Bellevue Probation is part of the larger regional criminal justice system that deals with adult misdemeanor offenses. Other system components include Bellevue Police, Bellevue Prosecutor, King County District Court and King County and regional jail providers. Probation represents the ideal place along the continuum where real, meaningful interventions can occur to effectively change the lives of the defendants.
- Bellevue provides adult misdemeanant probation services for approximately 1,000 individuals per year with an average daily

population of about 500 supervision cases and 300 administrative cases.

- In April 2012, the Washington State Institute • for Public Policy (WSIPP) completed a study' on "Return on Investment: Evidence-Based Options to Improve Statewide Outcomes". In that study, supervision with Risk, Need and Responsivity (RNR) Principles showed \$18,386 in crime victim savings, \$5,817 in tax payer savings or a combined net benefit of \$20,660 per offender. This same study also showed cognitive-behavioral therapies provided a 6.9% reduction or a combined net benefit of \$9.283 and Intensive Probation Supervision coupled with treatment related programs showed a net benefit of \$7,295 per offender.
- Some of the issues that the Bellevue adult probation misdemeanant offenders experienced in early life (Adverse Childhood Experiences, or ACEs) have contributed to their interaction with the criminal justice system. Mental health issues are increasingly common in the offender population.
- Bellevue Probation adheres to a best • practices mandate to assist individuals in meeting the conditions set by the court. Some examples of intervention strategies utilized include: using an empirically validated assessment tool; License Support Program helping an individual who has lost driving privileges; co-location of a Sound Mental Health forensic staff to aid with mental health services; Stipulated Order of Continuance Program to divert first time domestic violence offenders to probation; the Electronic Home Detention Program providing a cost effective alternative to jail; Work Crew to provide community service.
- Implementing a collective impact approach to services is a key element and vision to support and treat adult misdemeanor offenders. The City of Bellevue supports many human services organizations that provide general services but none targeted for the criminal offender. Bellevue Probation staff meets

regularly with criminal justice partners, service providers and the Probation Advisory Board on issues to address and progress made but does not always result in a common agenda. To affect a meaningful reduction in recidivism requires elevating the needs of this special population to develop additional, effective and collaborative interventions.

Gaps Include

- Funding for entry level programs for domestic violence, mental health, anger management and chemical dependency treatment.
- Lack of appropriate evaluations.
- Cognitive restructuring programs.
- Parenting programs.
- Educational/vocational programs and job searches.
- Re-licensing assistance.
- Funds for basic needs like housing.
- Interpreters to address the increasing linguistic diversity in Bellevue.
- Collective impact interventions to develop effective and collaborative interventions.

Implications for Action

- While Bellevue Probation has incorporated many best practices into its program, resources are limited and access for these and other human services is an ongoing issue. Regularly, offenders have a demonstrated need for one or more services (for example, substance abuse treatment, housing, transportation) but find they have just enough income to be ineligible for public funding yet unable to pay for these services and still meet their family's basic needs.
- Increased access to subsidized health and human services are key to preventing recidivism and increasing the offenders' chance of successful re-entry into society.
- With the growing ethnic diversity in Bellevue, it is not unexpected that the

offender population is also becoming more diverse. Staff report that about 10% of their clients use English as a second language. The need for interpreters is increasing.

• Funding for entry level programs is lacking for domestic violence, mental health and chemical dependency treatments.

Methodology



METHODOLOGY

Engaging the Community: Input on Health and Human Services Needs

To obtain a comprehensive picture of human services needs and issues in Bellevue, a blend of quantitative and qualitative data was collected. Staff met or talked with a diverse group of stake holders who live, provide services and/or work in the City. Data used in the report comes from a number of surveys -the phone/online, consumer, Next Door and provider; Community Conversations; key informant interviews; and extensive review of reports and websites. Care was taken to include, whenever possible, those groups or individuals that might be underrepresented in more traditional data gathering methods.

This section outlines the many ways community engagement was accomplished and describes the organization of the report.

Public Meetings with City Council and the Human Services Commission:

CITY COUNCIL STUDY SESSION	APRIL 10, 2017
Human Services Commission public meetings	February 23, 2017 May 16, 2017 June 6, 2017 Oct. 3, 2017 Nov. 21, 2017

Bellevue Residents Phone and Web-based Survey:

Between February 13 and March 20, 2017 Northwest Research Group conducted a survey of 484 Bellevue residents: 123 by phone, (51 landline, 67 cell phone and 5 call-in); 361 online, (264 via mailed letters and 82 via email invitation). This represents a statistically valid sample

to project to the entire population at a 95% confidence level (Error Rate: \pm 4.4%). This year, the sampling and data collection methodology again used addresses (address-based sampling, ABS) rather than listed phone numbers. It included a web-based option and a phone option, similar to 2011, 2013 and 2015. In 2017, the ABS methodology was enhanced with the introduction of email addresses to increase response rates and reduce survey costs. This multi-modal approach compensates for the increase of cell phone-only and primarily cell phone households (previously unaccounted for in strictly address-based sampling). Estimates today are that as many as 46% of all households in King County no longer have a landline phone and rely on a cell phone or other mobile device to make and receive calls. An additional 17 percent of households have both landline and cell phone numbers but rely primarily on their cell phones.¹ For more information about the methodology of the phone/online survey, please see Appendix D.

Centris Marketing Intelligence describes a few of the advantages of using address-based sampling in this way: "Given the evolving problems associated with telephone surveys on the one hand, and the exorbitant cost of on-site enumeration of housing units in area probability sampling applications on the other, many researchers are considering the use of [USPS databases] for sampling purposes. Moreover, the growing problem of nonresponse-which is not unique to any individual mode of survey administration-suggests that more innovative approaches will be necessary to improve survey participation. These are among the reasons why multi-mode methods for data collection are gaining increasing popularity among survey and market researchers. It is in this context that address-based sample designs provide a convenient framework for an effective administration of surveys that employ multi-mode alternatives for data collection."2

Similar to past years, phone survey respondents were offered the option of answering the survey in languages other than English through the use of a Telephone Language Line. All outreach materials (letters and emails) contained information in four additional languages: Chinese, Russian, Korean, and Spanish. The information gave a brief introduction to the study and then provided a toll-free number to call where they could take the survey over the phone. The toll-free number was directed to the City's new Language Line Service. The Language Line employees were instructed to call a dedicated phone number to reach a specially trained survey interviewer. The survey was then offered over the phone via the Language Line relay service. Although these efforts were taken, all completed surveys were done so in English and none of the invited residents called the language line.

However, 36% of phone/online surveys were completed in English by a person who speaks a native language other than English at home similar to 2015 and 53% (compared to 44% in 2015) of the households that participated in the survey spoke a language other than English at home. In all, participants in the survey spoke 29 languages other than English at home compared to 23 in 2015. For more information about languages of households completing the survey, please see Appendix B.

Cell phone usage is higher and there is lower penetration of landline telephones in non-Caucasian households.³ It seems possible that either individuals were fluent enough for online completion or a household member spoke English well enough to help complete the survey.

All respondents rated a series of 24 potential community problem areas and 22 household problem areas as 'major,' 'moderate,' 'minor,' or 'no problem.' The average survey time was just under 15 minutes. In both areas, most key measures were retained from previous years, but several questions were dropped or revised to provide higher quality data, and a few new questions were added to address current issues. For example, in 2011 and 2013, the survey asked a series of questions designed to measure the effects of the recession on Bellevue households. In 2015, the recession had ended so the questions were revised and focused on employment issues. The questions asked in 2017 were also related to employment:

- Employment status
- Do you have more than one job?
- (If has more than one job) If you only had one job, could you afford your mortgage or rent?
- (If currently employed) Were you unemployed any time during the past two years?

In 2017 a new question was added to gauge residents overall well-being. In addition, respondents answered questions about accessibility to and quality of human services, and demographics.

Consumer Survey: Unlike the phone and online survey, this survey specifically targeted Bellevue residents receiving human services. This survey was distributed between March and August 2017 and completed by about 30 participants in Englishas-a-Second-Language classes at Hopelink, City of Bellevue community centers, and the Crossroads Shopping Center Mini-City Hall. Surveys were available in English, Spanish, Russian, Vietnamese, Korean and Chinese; however, though some people completed the survey in English, 85% of the

I ANGUAGES SPOKEN BY

CONSUMER SURVEY RESPONDENTS		
Primary Language	Number of	
Spoken at Home	respondents	
English	4	
Mandarin	5	
Farsi	1	
Spanish	4	
Cantonese	7	
Russian	2	
Other	8	

respondents indicated that the primary language spoken at their homes was not English. This further increased the diversity of the group completing this survey. Over half of these respondents earned less than \$20,000 a year and 30% were unemployed.

Respondents were asked to rate the degree to which 30 household issues were or were not a problem, as well as service accessibility. Due to the nonrandom nature and small sample size, these results are not statistically valid. However, they can be used anecdotally to demonstrate general themes about human services needs within groups underrepresented in the phone/online survey.

Community Conversations: Bellevue residents or service providers participated in 31 informal focus groups for the Needs Update, called Community Conversations. Different races and ethnicities were included among the participants, mirroring the large diverse population in Bellevue. Over 200 individuals were contacted in this manner. See Appendix E for a detailed listing of these groups and dates they were conducted.

Other Surveys

Provider Surveys: Thirty nine health and human services providers that serve Bellevue residents completed an online survey summarizing service trends, utilization rates, gaps, and barriers. This represents a 54% return rate.

Next Door Survey: Over 300 Bellevue residents completed an online survey on the City's Next Door blog during the month of June. Respondents were asked to rate the 24 problems in the community, the top ten issues mirrored what phone/online survey respondents selected including lack of affordable housing, people not having jobs that do not pay enough for the basics of food, shelter and clothing, inadequate public transportation, lack of affordable medical insurance, homelessness and lack of affordable childcare. Of the 17 household problems, Next Door respondents rated inadequate public transportation as the top problem followed by having a lot of anxiety, stress and depression which interferes with your daily life, not being able to find work that supports yourself or your family, and finding it difficult to budget money that's available. The majority of people who completed this survey lived in the Lake Hills neighborhood and owned their homes. Twenty percent of respondents of the whole sample were non-Caucasian, and 38% either spoke a language other than English in their homes, or had someone in their households who did.

Key Informant Interviews: Seven individuals were interviewed either in person or on the phone between March and September 2017. Key informant interviews provide insights into the needs and issues experienced by a particular population when other information is not available. Interviewees included service providers to or members of groups such as:

- Older Adults
- Immigrants and Refugees
- People with disabilities
- Low-income consumers of human services
- Health care professionals

A complete list of who was interviewed can be found in Appendix F of this report.

Input from Faith Communities on the

Eastside: Faith communities provide a variety of basic need services that are rarely formally counted as community resources. Three Eastside faith communities completed interviews and described which human services their members most often request and what their organization could or could not provide. The interviewees were also asked how the Human Services Commission could do more to help faith communities.

Other Sources of Information

Reports, Studies and Websites: Many public and private organizations produce in-depth reports focusing on specific topic areas including housing, unemployment, older adults, youth, or public health. These reports offer a broad national, statewide, or regional perspective useful for trend comparison. Examples of those referenced in this report include:

- Healthy Youth Survey
- Seattle/King County Aging and Disability Services, Area Plan on Aging 2015-2018
- King County Status of Veterans and Veterans Services in King County 2017
- All Home (formerly known as the Committee to End Homelessness) Strategic Plan
- Public Health Seattle and King County Health Indicators
- Communities Count Social and Health Indicators across King County
- AARP Public Policy Review
- Washington Association of Sheriffs and Police Chiefs 2016 Annual Report

Data Limitations: The data in the Needs Update came from reliable sources. However, as in all reports, care must be taken in interpreting the data because of the presence of certain variables over which the researcher have no control. For example, changes in public awareness of certain community-level problems like domestic violence or homelessness can affect the public perception of their prevalence. A highly publicized case of youth violence can lead to increased reports for a short period of time, which then may drop off to previous levels. Typically, observing a trend over a period of several years better indicates the extent of the problem. Whenever possible, trends observed over at least three years are included. Other issues affecting data quality or quantity:

- Inability to obtain unduplicated counts of certain populations (e.g. the homeless, who are difficult to track because of their mobility);
- Under-reporting of certain topics given their personal nature, such as income or problems like ethnic or racial discrimination and domestic violence;
- Lack of data for a smaller geographic area like Bellevue, so estimates must be protected from a larger area like the county or based on national prevalence;
- Lack of access to underrepresented groups, such as those who are disabled, those who speak languages other than English, or the frail elderly; and
- Changes in data collection and reportage methods.

Endnotes

- National Health Statistics Reports December 18,2013, "% Distribution of Household Telephone Status for Adults Aged 18 and Over," http://www. cdc.gov/nchs/data/nhsr/nhsr070.pdf
- 2. White Paper, Address-based Sampling, Centris Marketing Intelligence, December, 2008.
- American Association for Public Opinion Research. (N.D.). "Coverage and sampling for RDD Cell Phone Surveys. Available at: http://aapor. org/AM/Template.cfm?Section=Cell_Phone_ Task_Force&Template=/CM/ContentDisplay. cfm&ContentID=2740

Bellevue: A Community Profile



COMMUNITY PROFILE

Overview

Bellevue City Council's vision is,

"We welcome the world. Our diversity is our strength. We embrace the future while respecting our past."¹

This requires us to understand and anticipate the diverse and changing needs of our population. An understanding of who we are and how we are changing enables us to plan the physical development of the city, including space for housing, commercial activity and schools, and investments in fire and police stations, public gathering places, parks, roads, and utilities to meet the needs of everyone in the community, now and in the future.

An understanding of who we are and how we are changing also enables us to ensure programs and services are relevant and accessible to today's community, including assistance with basic needs, social support services, safety, healthcare and training.

This chapter begins by taking a look at Bellevue's development over the decades, highlighting drivers of demographic change and noting where trends are likely to take us in the future. Each section begins with a description of the regional and local economy during the time period. Both in its size and composition, the economy is one of the key drivers of demographic change. Different types of industries and occupations require different skills and education, which drive wages, earnings and income levels.

The rate and concentration of job growth fuels demand for housing. How a community plans to accommodate growth affects householdsz, age and income distributions, as well as the rate of demographic change and transformation in later years.

Understanding where the city of Bellevue has come from, how it has changed over

the decades and where it is today, will help us understand who we are and how we are changing to better anticipate the diverse and changing needs of our community.

Prior to 1940 Coal, Timber then Farming

Most of Bellevue's first peoples, the Salish Indians, had been moved to reservations by the time the first European settlers came to the Bellevue area in the 1860s with the discovery of coal in the Newcastle and Coal Creek areas.² Logging began in the 1880s and gained momentum in 1903 with the opening of the Hewitt-Lea Mill at the north end of Mercer Slough. However, in 1916 when the Lake Washington Ship Canal and Montlake Cut lowered the level of Lake Washington by nine feet, Mercer Slough turned into a boggy swamp and the mill was closed soon after.

Farming, began after the trees were logged and stumps removed. Sakutaro Takami, one of the early Japanese pioneers to Bellevue, planted the first strawberry fields in the vicinity of today's intersection of 102nd Avenue NE and NE 15th Street in 1904.³ The Japanese community in Bellevue grew to 55 families, who were farming 472 acres by the 1940s.

Telephones, electricity, schools, churches, stores, businesses, newspapers, cars and a garage to service them all made their way to Bellevue during the 1900s and 1910s. The population in the greater Bellevue area grew from 400 in 1900 to 1,500 in 1920.

Two businesses worth noting that opened during the 1910s were Eugene Sherman's Dirigo Compass Factory and William Schupp's American Pacific Whaling Company. Dirigo Compass operated in Bellevue until 2014, making it the longest running business in Bellevue. It is still well known for its high quality compasses though the company moved north to Bellingham, Washington and Canada. The Whaling Fleet came to an end when the United States declared war on Japan in 1941. The whaling season was canceled, the Navy took possession of the docks at Meydenbauer Bay, and the military co-opted the whaling boats for the war effort.⁴

During the 1920s and 1930s, a fire department, library, golf course, Japanese Language School, Japanese Youth Club, Women's Club, Development Club, high school, and Grower's Association all formed along with a burgeoning business community. Roads were constructed increasing access to the north and south as well as the wooden East Channel Bridge connecting the east shore of Lake Washington at Enatai west to Mercer Island.

1940s WWII and a Floating Bridge

World War II boosted the economy with increased demand for ships and planes. At the same time, government construction of bridges and highways made farm land on the eastside accessible and ripe for development. With the opening of the Lacey V. Murrow Floating Bridge across Lake Washington in 1940, convenient access between Bellevue and Seattle was created, and Bellevue's population grew with workers going to the Lake Washington Shipyards in Houghton (today, Kirkland) and to Boeing in Seattle and Renton. In 1941, the U.S. Navy selected the small town of Renton as the manufacturing facility of the XPBB-1(Model 344) Sea Rangers.⁵

However, on May 20, 1942, Bellevue's 55 Japanese families were ordered out of their homes and sent to internment camps by Federal Executive Order 9066. The loss of Bellevue's Japanese residents led to the demise of farming in the area and subsequently left land open for development.

While housing development along the shores of Lake Washington and Lake Sammamish dates back to the early 1900s, it wasn't until after the completion of the Lacey V. Murrow Floating Bridge and the tragic internment of Japanese Americans in 1942 that the first housing subdivisions began to appear in Bellevue, primarily in West Bellevue north of I-90. The Vuecrest neighborhood was developed in 1947 west of Downtown and north of NE 8th Street, and was called one the first modern subdivisions of the area.

The business community also took root in the second half of the decade with Bellevue Square opening in 1946 and the Bellevue Chamber of Commerce forming in 1947. One of the first illustrations of the strong tie between arts and the local economy occurred when Carl Pefly, owner of the Crabtree Restaurant, organized the community's first Arts and Crafts fair in 1947 drawing over 30,000 visitors.⁶ The annual fair continues to this day. Proceeds from the three-day event help support the Bellevue Art Museum.

Early residents invested and took pride in the area's schools and parks making Bellevue a desirable place to live and start a family, and well over 20,000 new households moved into Bellevue during the housing boom that followed during the 1950s and 1960s.

1950s and 1960s Homogeneity En Masse **Jobs and Occupations**

After WWII through the 1960s, regional job growth, led by the Boeing Company, attracted people from around the nation and overseas, primarily from Europe. Skilled engineers and machinists were needed to build the company's new military aircraft and passenger jet airplanes.

In addition, local businesses opened in Bellevue offering employment opportunities in other job sectors including retail, education, business services, manufacturing, health services, and construction. First Mutual Bank opened in 1953, followed by Puget Sound Power and Light (now Puget Sound Energy) moving its headquarters to Bellevue in 1956, and Safeway building its distribution center in Midlakes (now BelRed)

1940s

1940	Lacey V. Murrow Floating Bridge opens
1941	Renton selected by U.S. Navy to house the manufacturing facility of the XPBB-1 (Model 344) Sea Ranger
1941/42	Pearl Harbor is bombed; United States enters the war and over 300 local Japanese Americans are sent to internment camps
1944	Marguerite Groves begins King County Library
1945	World War II ends
1946	Bellevue Square opens
1947	Bellevue Chamber of Commerce forms
1947	First Arts and Crafts fair in Bellevue is organized by Carl Pefly
1947	John L. Scott opens and markets homes in Bellevue's Vuecrest neighborhood

in 1958. Overlake Hospital opened in 1960, Crossroads Shopping Center in 1961, Coca Cola Bottling Plant and the 13-story Business Center Building, now housing Paccar, in 1967. Housing development, along with voter approved bonds for schools, sewer and water systems, also made construction and education jobs plentiful in the city. By 1970, there were an estimated 21,000 jobs in Bellevue.

The mix of jobs available in Bellevue and in the surrounding area attracted people with varying levels of education. In 1970, about 37 percent of Bellevue's population 25 years and over had a Bachelor's degree or higher.⁷

Housing & Population Growth

Bellevue's housing boom began in earnest in the 1950s and 1960s, coinciding with the baby boom generation who were born between 1946 and 1964. Over the course of 20 years, much of the housing and transportation framework of the city, as we know it today, was constructed. After incorporating in 1953, the City of Bellevue quintupled in size annexing nearly 19 square miles, and its population grew by a factor of 10, going from 5,950 people in 1953 to over 61,196 in 1970 (Figure 1).

With the passage of the Federal Highway Act of 1956, US Route 10 was widened to four lanes and renumbered to Interstate 90. This was followed by Primary State Highway 2A being renumbered to State Route 405 and then to Interstate 405 in 1971. In 1963, the first Evergreen Point Floating Bridge was constructed, solidifying the connection between the Eastside and Seattle.

Thousands of acres of farmland were rapidly transformed into acres upon acres of housing, predominantly single-family housing for sale. The communities of Enatai, Bellecrest, most of Northwest Bellevue, Northup Heights, the top of Woodridge, Lake Hills, Sherwood Forest, Eastgate, Hilltop and Lake Heights were all built during the 1950s and later annexed into the city. These communities were followed by Cherry Crest, Trails End, Crofton, Bretton Wood, Lake Crest, Spiritridge, Cougar Hills, Somerset, Newport Hills and others in the 1960s.

Structure Type and Lot Size

Based on housing that exists today, over 90 percent of homes built in the 1950s were singlefamily structures. Construction of single-family homes also predominated in the early 1960s. However starting in 1967, the construction of multi-family buildings in Bellevue took off, such that by the end of the decade, multi-family units comprised 40 percent of all units constructed in the 1960s. In 1968 alone, over 2,300 multi-family units were constructed, an annual figure that has not been surpassed to this day.

Several small apartment buildings constructed in the 1940s and 1950s exist primarily south of Downtown, while apartment and condominium complexes built in the 1960s, are spread further to the east and south to Newport Hills. It is likely multi-family structures built during this time period housed some of Bellevue's smaller, less wealthy households. Their presence indicates a demand for a diversity of housing to accommodate people of different ages and households of different types, sizes and incomes.

The size of the lots that single-family homes were built on during the 1950s and 1960s also reflects the economic diversity of households coming to live in Bellevue during that period. Homes built in the Pikes Peak, Trails End, Diamond Ranch and Hilltop neighborhoods are often found on lots close to or over an acre in size, while homes built in Lake Hills, Surrey Downs and Newport Hills are on lots less than a quarter of an acre in size.

Homes in Lake Hills, one of the largest residential developments of the 1950s, were described as, "homes facing one another across streets with no curbs, lights, or sidewalks; inexpensively built on inexpensive land meeting the acute postwar need for middle income housing."⁸

Other lot sizes fall somewhere in between. Homes in Springhills, Killarney Circle and Lake Heights are on lots between 15 and 20 thousand square feet, and many homes in Lake Crest, Brookwood and Vuecrest are on lots between 10 and 15 thousand square feet.

Having housing at a variety of price points, allowed households in a variety of income brackets to move into Bellevue - the engineers, doctors and store owners and the machinists, teachers and bottling plant workers.

Households

The Census Bureau defines a "household" as "all the people who occupy a housing unit as their usual place of residence." Over the past decade Bellevue has seen some significant changes in household composition and size.

Often a strong correlation exists between new housing and the household type and age distribution of its inhabitants. Young couples with young children or young couples who are about to have children are more likely to move into new single-family housing than older couples with or without children or single persons, provided it is near an employment center and not part of a retirement community. When a lot of new housing is built over a short period of time, the population in a community can be relatively homogeneous in terms of age and comprised primarily of two age cohorts - children and young workforce adults, versus the usual four age cohorts of children, young workforce adults, older workforce adults and older adults. This was true in Bellevue during the 1950s and 1960s.

Though some variety in housing was constructed in the 1950s and 1960s, households moving into Bellevue's new neighborhoods were predominantly young white families with children. In 1970, 57 percent of Bellevue's households were married couples with children and the city's average household size was 3.4 persons per household.⁹

Age

Exactly one year after United States servicemen returned home from World War II a sharp spike in births occurred. From 1946 to 1964 the baby boom generation was born, and Bellevue's age distribution reflected it. In 1970, 44 percent of Bellevue's population was under the age of 20, and a full 80 percent was under the age of 45 compared to 17 percent who were between 45 and 64 years of age and three percent who were 65 years and older (Figure 3).

The Bellevue School District entered the 1950s with four elementary schools, one junior high and one senior high school. By 1969, there were 24 elementary schools, seven junior highs and four high schools.¹⁰ During the 1960s, enrollment in Bellevue School District nearly doubled reaching its all time high of 24,282 in 1969.

Service providers also responded to the needs of Bellevue's largest demographic when, in 1968, Youth Eastside Services opened to cater to the needs of Eastside youth.

The rapid flip of farmland to housing in the 1950s and 1960s, drawing in a largely homogeneous population in terms of age set the city up for future waves of transformation in later years.

Race and Ethnicity

People moving into Bellevue in the 1950s and 1960s were predominantly White. The Japanese farming community who once called Bellevue home had been forced to leave with the internment of Japanese in 1942, and few returned as several communities that developed in the 1950s and 1960s had discriminatory covenants, preventing people of color and Jews from moving into parts of Bellevue.¹¹ It wasn't until 1968, when the U.S. Congress passed the Fair Housing Act, prohibiting discrimination in the sale, rental and financing of dwellings based on race, color, religion, sex or national origin, that discriminatory covenants were made illegal.¹² In 1970, about five percent of Bellevue's population were foreign born and 98 percent of Bellevue's residents were White.

1970s and 1980s Growth, Aging and a Hint of Color **Jobs**

The "soaring '60s" in which the booming Puget Sound economy "lived up to every promise and then some," took a nose dive in 1969 when Boeing cut its workforce from a high of over a 100,000 in 1968 to 80,000 in 1969 and then to 32,500 by late 1971.¹³ At the same time, baby boomers began entering the workforce swelling the availability of labor.

Despite the depths to which the Puget Sound economy fell, the amount of commercial space in Downtown Bellevue nearly doubled growing from two million square feet in 1970 to 3.9 million square feet in 1980. The number of jobs downtown also climbed from 5,372 to 10,609, and citywide, jobs doubled by the end of the decade to reach an estimated 42,000 by 1980.

Other commercial buildings constructed in the 1970s included Bellefield Office Park, Factoria Mall, Eastgate Plaza, Safeway Bakery and many other buildings in BelRed.

1950s & 1960s

1953	The City of Bellevue incorporates with a population of 5,950
1955	Voters approve bonds to build schools, water system and parks
1956	Highway 2A the two lane precursor to 1-405 opens
1956	Puget Sound Power & Light moves headquarters to Downtown Bellevue
1958	Safeway builds distribution center in Midlakes
1959	Bellevue's first traffic light is installed at Main Street and Bellevue Way
1960	Overlake Hospital opens
1961	Crossroads Shopping Center opens
1963	Evergreen Point Floating Bridge opens
1966	Bellevue Community College opens
1967	Pacific Coca Cola Bottling Company begins building a plant in Midlakes
1967	13-Story Business Center Building opens
1967	Bellevue Philharmonic Orchestra founded
1968	Fair Housing Act passed by U.S. Congress
1968	Youth Eastside Services opens
1969	Bellevue annexes Lake Hills and Sammamish

Over 200 businesses opened in Bellevue during the 1970s including Burger Master in 1970, Mutual Materials, Sterling Realty, Paccar, HD Fowler, Quadrant Corporation, and Nordstrom in 1971, Bayliss Architects and the Humane Society in 1972, GLY Construction in 1975, the Samena Club in 1976, and Foushee and Associates, Uwajimaya and Microsoft in 1978,¹⁴ with 13 employees.¹⁵

1970s

10703	
Population	61,196
Median Age	25
Percent Under 20	44%
Percent 65 and over	3%
Married Couples with Children	57%
Percent People of Color	2%
Percent Foriegn born	5%
Percent with Bachelor's degree or higher	37%

The Bellevue Downtown Development Board (later Bellevue Downtown Association, or BDA) also formed in 1974, "to strengthen the economic and cultural vitality of Downtown Bellevue."16 Working with the BDA, the City of Bellevue launched a series of planning studies focusing on the future of Downtown Bellevue, which resulted in Council adoption of the CBD Subarea Plan in 1979. The Plan set forth a new vision for Downtown, one with an urban as opposed to suburban development character. The Plan and zoning code that followed permitted a mix of uses and provided new requirements for building heights, setbacks, site coverage and parking ratios, laying a strong foundation for future Downtown development.

Development began in the early 1980s with Bellevue Square remodeling from a one level open air shopping center into a multi-level enclosed mall with capacity to hold about 200 stores. Citywide, nearly 500 new businesses were issued Bellevue licenses in the 1980s. Notable businesses included David Evans and Associates, Wellspring Family Services, Scan Design Furniture, Puget Sound Security Patrol, Pacific Recreation, MA Mortenson Company and the Boeing Company. Boeing constructed office buildings on the former Bellevue Airfield near I-90. Also, with a growing number of employees, Microsoft moved its offices to a larger building along Northup Way north of SR-520 before moving to Redmond in 1986.

Commercial square footage doubled in the Downtown growing from 3.9 million square feet in 1980 to 8.0 million square feet in 1990, and the number of downtown workers climbed from 10,609 in 1980 to 22,257 workers in 1990. By 1990, the number of jobs in Bellevue citywide had climbed to 89,910, and for the first time the number of workers in Bellevue outnumbered the number of residents.

Educational Attainment

Education attainment levels rose gradually across the nation and in Bellevue as younger (and more educated) cohorts replaced older, less educated cohorts in the adult population. This was especially true for young women who were achieving higher levels of education than female cohorts had in the past. About 44 percent of Bellevue's population 25 years and over had a Bachelor's degree or higher in 1990, up from 41 percent in 1980, and up from 37 percent in 1970.

Household Incomes and Poverty

In 1990, Bellevue's median household income was estimated to be about \$76,759 in 2015 dollars, and there was a fairly even distribution of household income illustrating the growing economic diversity of Bellevue's households.

About 5.6 percent of Bellevue's population was in poverty in 1990 up from 4.7 percent in 1980, and it was estimated that 2.6 percent of the labor force was unemployed.¹⁷ In 1972, the non-profit Employment Opportunities Center was founded.¹⁸

Housing

The number of housing units constructed during the 1970s and 1980s matched or exceeded the number of units constructed during the 1950s and 1960s. However, 58 percent of units constructed were in multi-family structures compared to 28 percent during the 1950s and 1960s, and they occupied just about a fifth of the land area.

Structure Type and Size

Construction of new single-family homes slowed during the 1970s with the slowdown in the economy and with much of the easily developed land in Bellevue already built upon. Construction of multi-family housing units, in contrast, increased and reached its peak in the 1970s. Over 7,100 multi-family units were constructed during the 1970s compared to 5,300 single-family units, representing 58 percent of all units constructed.

In the 1980s, construction of multi-family units continued to out pace single-family construction comprising again 58 percent of all new housing unit construction. The overall number of housing units constructed in the 1980s declined however, dropping from about 12,400 in the 1970s to 9,100 in the 1980s. New single family units constructed dropped from 5,275 to 3,793 and new multi-family units dropped from 7,163 to 5,321.

Multi-family Housing

Multi-family structures built in the 1970s and 1980s were primarily built around the edges of Downtown, Factoria Mall, Crossroads Shopping Center and along 148th Street, I-90 and I-405.

Condominium units gained ground in the 1970s, though apartments still comprised 53 percent of multi-family units constructed. However, during the 1980s, condominiums pulled ahead and comprised 54 percent of multifamily units constructed, providing more home ownership opportunities for low to moderate income households.

Many of the multi-family units constructed during the 1970s and 1980s were relatively large in size making housing in Bellevue accessible to lowmoderate income families. About 71 percent of the units built in the 1970s and 1980s had two or more bedrooms, another quarter had one bedroom, and about four percent were studios. With increased construction of multi-family units, more housing options were made available to a diversity of household types, sizes, and incomes.

Single-family Housing

Single-family housing development gradually filled in parts of the city that were hilly and not as easy to develop, such as areas in the southeast near Cougar Mountain. Single-family development occurred in the neighborhoods of Somerset, Foresthill, Westwood Highlands, Eaglesmere, Horizon Heights, Whispering Glen/Collingswood, and Horizon Crest in the 1970s followed by Forest Park, Forest Glen, Forest Ridge, Vuemont and Sky Mountain in the 1980s.

Single-family development also occurred in the southwest, in Delmar Woods, Newport Park and Newport Shores in the 1970s followed by Pembrook Meadow in the 1980s.

In the central part of the city, parts of Woodridge filled in during the 1970s and parts of the Sunset Community in the 1980s. In the north, Lakewood Park, Compton Green and Bellemead developed in the 1970s followed by Compton Trails, Shadow Wood, North Creek and Yarrow Bay Village in the 1980s.

About 30 percent of single-family units had three bedrooms in the 1970s and 1980s, 50 percent had four bedrooms and about 17 percent had five or more bedrooms. Given the age and size of these homes, young married couples with children were often their first occupants, and the neighborhoods they inhabited tended to be homogeneous in terms of age and income.

Housing Value

As mentioned earlier, in 1990 the number of jobs in Bellevue was higher than the number of residents. The rapid growth in employment during the 1980s resulted in a job to household ratio of 2.4 jobs per every household by 1990. Since about 1.4 workers exist per household, Bellevue's job to household ratio was unbalanced. Other primarily residential cities around Bellevue helped reduce the imbalance, yet wherever a high job to household ratio exists, demand for housing within a city is likely high and finding housing that is affordable to every income level is going to be a challenge.

1970s & 1980s

1	972	The non-profit Employment Opportunities Center is founded.
1	972	Ground is broken for Eastgate Plaza
1	973	The City of Bellevue's Public Utilities Department is formed with the merger of Water Districts 68, 97 and 99
1	973	Downtown Development Board incorporates
1	975	The Bellevue Arts Museum opens
1	978	Microsoft moves back to PNW and open office in Downtown Bellevue
1	979	Central Business District Subarea Plan is adopted
1	979	Factoria Mall opens
1	980	Ground breaking for new Bellevue Square Mall
1	980	Andrea Beatty is Bellevue's first woman City Manager
1	980	Public Safety bond passed
1	980	Land donated for Bellevue Botanical Garden
1	983	Downtown building boom
1	984	BSD sells Downtown Park site to City
1	987	Pacific Regent housing older adults opens in Downtown
1	989	School enrollment down to 14,000

Housing affordability challenges can create pressure for housing development in areas farther away resulting in issues associated with sprawl including longer travel times, increased transportation costs and increased traffic as well as loss of farmland, loss of wildlife habitat and increased infrastructure costs. Responding to these pressures, the State of Washington adopted

1990s

S

10003	
Population	86,872
Median Age	35.4
Percent Under 20	24%
Percent 65 and over	10%
Married Couples with Children	23%
Percent People of Color	15%
Percent with Bachelor's degree or higher	44%
Percent in Poverty	5.6%
	P

the Growth Management Act in 1990 requiring fast growing cities and counties to manage growth to protect "the environment, sustainable economic development, and the health, safety, and high quality of life enjoyed by residents of this state."¹⁹

Households

As mentioned earlier, a strong correlation often exists between new housing and the household type and age distribution of its inhabitants. This correlation can remain strong even as housing and households age, as was the case in Bellevue during the 1970s and 1980s. As Bellevue aged, so did its households. Many families that moved into new homes to raise a family during the 1950s and 1960s did not move away during the 1970s or 1980s. Some are still here today. In 2014, it was estimated that a little over 1,200 households who moved into their home prior to 1970 were still living in their homes, representing about four percent of Bellevue's home owners in 2014.

The young married couples with children of 1970 became older married couples with children away at college or in the workforce in the 1980s and 1990s, and the proportion of married couples with children in Bellevue dropped from 57 percent in 1970 to 29 percent in 1980 and then to 23 percent in 1990. Moving in the opposite direction, the percent of married couples without children climbed from 25 to 31 and then to 32 percent of households by 1990. The share of single person households also increased to comprise 26 percent of Bellevue's households, surpassing married couples with children as the second most common type of household in 1990.

Bellevue's two plus person non-family households climbed into fourth place in 1990 comprising nine percent of Bellevue households, followed by single parent households at six percent and other family households at five percent.

Bellevue's average household size had fallen to 2.41 persons per household in 1990, down from 2.6 in 1980 and 3.4 in 1970.

Population Growth

Bellevue's population grew by 12,700 in the 1970s and by nearly 13,000 in the 1980s. However, 28 percent of the growth in the 1980s, or nearly 3,600 people, came from annexation. By 1990, Bellevue's population was 86,872.

Age

As baby boomers grew up and became adults, Bellevue's age distribution diversified. Even as Bellevue's population increased, enrollment in the Bellevue School District declined steadily from its high of 24,282 in 1969 to a low around 14,000 by 1989 when enrollment leveled off hovering between 14,000 and 16,000 students for a little over a decade. Reflecting this trend, the percentage of Bellevue's population under the age of 20 dropped from 44 percent in 1970 to 30 percent in 1980, and then to 24 percent in 1990, where it has largely remained since.

As children aged, so did their parents and the number and proportion of older adults (ages 65+) living in Bellevue increased, going from three percent of the population in 1970 to six percent in 1980, and then to 10 percent in 1990. The building of Pacific Regent in Downtown Bellevue in 1987 reflected the growing need for housing catering to older adults. Bellevue's median age was 35.4 in 1990 up from 25 in 1970.

Race and Ethnicity

With the passing of the Fair Housing Act in 1968, discriminatory covenants were outlawed and Bellevue began to diversify in terms of race and ethnicity, but still remained largely White. In 1980, nine percent of Bellevue's population were foreign born up from five percent in 1970, and People of Color grew to represent six percent of Bellevue's population, up from two percent in 1970. By 1990, 13 percent of Bellevue's population were foreign born and People of Color represented 15 percent of the population.

Bellevue's Asian population was the largest non-white racial group in Bellevue in 1990 representing ten percent of the population. Chinese and Japanese residents comprised the largest Asian populations, followed by Korean, Asian Indian, Vietnamese and Filipino populations.

Hispanics or Latinos and Blacks or African Americans each represented over two percent of Bellevue's population in 1990, up from less than one percent in 1970.

1990s and 2000s

New Generations: Industries, Families and Immigrants

Jobs

An unanticipated shift in industry began in the 1990s, that continues to this day. Personal desktop computers became common place in the 1990s and with them words like Windows, Word, Excel and Access took on new meanings. However, this new industry caught some economists unawares. For instance, in 1987, Douglas E. Booth, a faculty member in the Department of Economics at Marquette University, wrote the following about the Washington State economy:

While modest employment gains can be expected in the aircraft industry in the near future, the prospect for future expansion in other high growth industries does not appear to be substantial enough to keep the Washington State economy growing at a more rapid rate than the national economy for many more years. Washington's rate of new business formation is relatively low by national standards, suggesting that new growth leading industries based on new business are unlikely to emerge in the near future. The state appears to be approaching the end of the rapid growth phase of a long wave.

To his credit though Booth noted,

...growth prospects in the computer software industry are excellent with sales rising at an 18 percent annual rate. Much of this sales growth will be captured by the leading three firms in the industry, including Microsoft of Redmond, Washington...

Yet, he went on to write...

...the Washington State economy is not likely to see a permanent upward shift in new business formations relative to the economy as a whole until it falls on hard times, and ... new business formations are not likely to be a major stimulus to regional economic growth in the near future. The future course of the regional economy will thus depend to a large extent on what happens to businesses that are already well established... This is a clear sign that the Washington State economy is approaching the end of the rapid growth phase of its current long wave of economic development.²⁰

Although Microsoft moved its headquarters to Redmond in 1986, related companies opened in Bellevue making the city a hub for tech industries in the 1990s. Microstar Laboratories, Cisco Systems and Datalink Corporation all opened selling computer networking equipment, data acquisition and computer peripherals; S&P Global, CWA Connect and Gravity Square opened offering information consulting services; and Valve, one of Bellevue's first gaming companies, was launched in 1996 with an office in Bellevue Place.

Growth in industrial sectors was uneven nationally as well as in Bellevue as industries shifted toward professional services and away from manufacturing. The number of companies offering business services grew in the 1990s as well including, banks, law offices, insurance and accounting firms. Engineering and construction firms also increased, as did wholesalers and major retailers such as Home Depot and Trader Joe's.

Within Downtown Bellevue, commercial space grew to 10.6 million square feet, and the number of jobs increased to 32,600.²¹ Citywide, the number of jobs grew 42 percent over the decade reaching 127,416 by the year 2000.

The region's economy started off in 2000 at the top of an economic cycle and ended the decade near the bottom of the following cycle making it appear that job growth had stopped. In reality, job growth continued its upward trend, but after rebounding from the dot-com bust in the early 2000s, the region, as well as the nation, was hit hard by the Great Recession.

With the dot-com bust in the early 2000s, jobs fell by 12 percent within Downtown and eight percent citywide and vacancy rates in the Downtown rose to 26 percent by 2002.²² It wasn't until 2005, that jobs began to increase, but a full recovery did not occur until 2006 within Downtown and until 2007 citywide.

The recovery did not last long however, as the Great Recession hit at the end of 2008. Job wise Bellevue fared relatively well, mainly due to an influx of Microsoft jobs into Eastgate in 2007 and into Downtown in 2009.

Bellevue was fortunate to have Microsoft nearby. Both they and their spin off company Expedia, added jobs to the city during the 2000s along with other firms in the service sector, helping the city weather the storm. Yet, not every industry weathered it well. As Bellevue's sector distribution shifted further towards technology, other sectors shed jobs or grew more slowly. For instance, the Construction, Manufacturing, Retail and Wholesale Trade/Transportation/Utilities (WTU) sectors all lost jobs over the decade, and jobs within the Finance, Insurance and Real Estate (FIRE) sector remained relatively flat. Many Bellevue residents who lost their jobs also lost their homes during the foreclosure crisis that followed. Despite the downturns in the economic cycles, new commercial office buildings were constructed and later expanded in Factoria at Newport Corporate Center, and in Eastgate at Advanta, turning those areas into major employment centers.

T-Mobile moved to Factoria in 1998, when it was known as Western Wireless. Today it is the city's second largest employer behind Microsoft. Expedia spun off from Microsoft in 1999 located first in Eastgate, then moved its headquarters to a new tower in Downtown in 2007. By 2010, commercial square footage in Downtown had expanded to 15.3 million square feet and jobs had rebounded to just over 40,000.

Citywide, the number of jobs in 2010 was estimated to be just under 128,000, not much of a change since 2000. Yet, the industrial distribution of jobs within the city changed with declines in Construction, Manufacturing, Retail, and WTU and gains in Services. This change shifted Bellevue's economy further towards the tech sector, strengthening the city's status as a hub for technology businesses.

Yet it came at a cost. People lost their jobs and their homes and were forced to leave the city. Longitudinal data on specific individuals is difficult to acquire, but as shown in the following sections, shifts occurred in Bellevue's population that indicate there was likely more displacement than retraining of workers to meet the demands of Bellevue's changing economy.

Occupations

A significant shift in the occupations of Bellevue's residents began to occur in the 1990s with growth in Bellevue's tech sector. The percentage of residents employed in management, business, science, and arts (MBSA) occupations grew from 40 percent in 1990 to 53 percent in 2000, and then to 60 percent in 2010.

As MBSA occupations increased, the percentage of residents employed in sales and office occupations declined from a high of 38 percent in 1990 to 26 percent in 2000 and then to 19 percent in 2010. Workers in service occupations increased moderately going from nine percent in 1990 to 10 percent in 2000 and then to 11 percent in 2010.

It should be noted that service occupations do not correspond directly to Service sector industries. Service occupations include healthcare support, fire fighting, police, food preparation and serving, building and grounds cleaning and maintenance and personal care service occupations. In comparison, the Service industry sector is more complex including professional, scientific, and management service industries along with administrative and waste management industries and arts, entertainment, recreation, accommodation and food service industries.

Educational Attainment

With a shift toward more MBSA occupations, higher educational attainment levels were needed to fill these growing jobs resulting in a shift in the educational attainment distribution of Bellevue's population. Highly educated workers from around the nation and the world began moving to Bellevue in the 1990s, raising the percentage of residents 25 and over with a Bachelor's degree or higher from 46 percent in 1990 to 54 percent in 2000, and then to 62 percent in 2010. Part of this increase was due to an increase in the percentage of residents with a graduate or professional degree, which went from 14 to 19, to 22 percent.

During the same time periods, the percentage of Bellevue residents 25 and over with an educational attainment level between 9th grade and some college or an Associate's degree declined from 53 percent in 1990 to 44 percent in 2000, and then to 35 percent in 2010. Nationally, this category peaked in 2010 at 57.4 percent of the population 25 and over. Educational attainment levels in Bellevue exceeded those in King County as a whole, and those in King County in turn exceeded levels in Washington State and the U.S..

Despite the decline in the proportion of residents with lower educational attainment levels, the number of residents with an educational attainment level between 9th grade and some college or an Associates degree increased between 1990 and 2000 going from about 31,500 to 34,150. The number decreased slightly by 2010 to 33,950, but the estimate of people with less than a 9th grade education increased going from 1,660 to 2,500. These trends mirror the growth in jobs at either end of the economic spectrum and relative stagnation in the middle.

Of note, for the first time in 1996, more young women ages 25 to 29 in the United States had a bachelor's degree than young men. However, men still dominated science, technology, engineering and math degrees.

Earnings, Income and Poverty

With strong demand for tech products and services and subsequent strong demand for highly educated tech workers, median earnings as well as median household income rose in Bellevue during the 1990s and 2000s. Median household income rose from \$76,759 in 1990 to \$84,200 in 2000 and then to \$87,499 in 2010, all in 2015 dollars.

Despite rises in median income, poverty rates also rose with the downturns in the economy during the 2000s, and the gap between the rich and the poor widened. The percentage of people in poverty rose from 5.6 percent in 1990 to 5.7 percent in 2000 and then to 6.7 percent in 2010.

Housing Growth

The pace of housing construction continued to decline in the 1990s, yet picked up slightly in the 2000s, but only in the form of multifamily housing. The number of homes that were constructed in the 1990s was 22 percent lower than the number of homes constructed in the 1980s. Construction of single-family homes dropped by 37 percent while construction of multi-family homes dropped by 12 percent. In the 2000s, single family construction continued to decline, but multi-family construction increased.

Structure Type and Size

Starting in the 1990s and increasing in the 2000s, numerous tear downs and rebuilds of single-family

housing occurred primarily in West and Northwest Bellevue. Single-family housing construction on new lots also occurred during the 1990s and 2000s, primarily in the Cougar Mountain/ Lakemont neighborhood area in the southeast portion of the city. The overall number of new single-family houses constructed during the 1990s and 2000s declined by more than half falling from about 9,100 in the 1970s and 1980s to 4,300 units during the 1990s and 2000s.

The share of new housing units that were in single-family construction also continued to decline, representing about a third of housing units constructed in the 1990s and about a quarter of units constructed in the 2000s. In other words, twice as many multi-family homes were constructed in the 1990s than were single-family homes, and three times as many during the 2000s.

After reaching a peak in the 1970s, construction of multi-family housing units began a gradual decline until the 2000s, when production picked up again, primarily in condominiums.

Most multi-family development that occurred in the 1990s was located on large parcels outside of Downtown. About 700 units were constructed on five lots in Lakemont. Nearly 1,000 units were constructed on 10 lots in central Bellevue, and another 600 units were constructed on seven lots in northern Bellevue.

Construction of multi-family housing in Downtown that began in the 1990s accelerated in the 2000s, such that by 2010, 7,151 residential units existed in Downtown up from 192 units in 1990.

Housing Value

Housing values in Bellevue increased in the 1990s and again in the 2000s. However, during the 2000s, prices were inflated by shoddy housing loans, which eventually burst the bubble sending hundreds of Bellevue homes into foreclosure.

Households

Although Bellevue's household distribution did not change much between 1990 and 2010, a reversal

in trends began. After climbing for three decades, married couples without children peaked in 1990 representing 32 percent of Bellevue's households, and then gradually began to decline to 31 percent in 2000 and to 30 percent in 2010.

Single person households continued its upward climb in the 1990s to represent 28 percent of Bellevue's households by 2000 up from 26 percent in 1990. However, during the 2000s its share leveled off and remained flat at 28 percent in 2010.

The percentage of households who were married couples with children continued albeit slowly to decline in the 1990s going from 22.8 percent to 22.2 percent of Bellevue's households in 2000. However in the 2000s, the proportion began to increase, climbing to 23.4 percent in 2010. After three decades of declining, this reversal indicated the start of a new cycle or wave of transformation, where households of older adults were beginning to be replaced by households of young families with children.

Population Growth

During the 1990s, Bellevue's population increased by nearly 23,000, going from 86,874 to 109,827. However, 48 percent of that growth or nearly 11,000 was from annexation.

During the 2000s Bellevue's population grew another 12,500 to reach 122,363 by 2010. Twenty-two percent of this growth was due to annexation, and the rest was due to infill and redevelopment. Excluding annexations, Bellevue's population grew by 11.4 percent, slightly faster than King County's at 11.2 percent, but slower than Washington State's increase of 14.1 percent.

With all of its new multi-family buildings, Downtown Bellevue was the fastest growing neighborhood from 2000 to 2010 increasing by over 175 percent.

The population in Crossroads, Factoria, and West Bellevue also grew relatively fast between 2000 and 2010 despite these being locations where little to no housing was added. As mentioned earlier, the correlation between housing age and the household type and age distribution of its inhabitants weakens gradually as housing ages and communities begin to diversify. However, occasionally the initial homogeneity of households results in future waves of transformation as large numbers of households turnover and a new generation of young families move in.

An unanticipated second wave of transformation began to occur in Bellevue during the 2000s. Population grew in areas where no housing growth occurred. Instead, many small single-family homes built in the 1940s, '50s and '60s, that were occupied by one or two older adults, were torn down and replaced by larger homes occupied by married couples with children. Also, in areas with multi-family development a similar transformation occurred. Shifts in the composition of households resulted in population growth without an equivalent increase in housing units. Schools within these areas were caught unawares by the unanticipated growth in the number of children.

Other areas with housing constructed more recently, including Somerset, Sammamish, and Northeast Bellevue all experienced slight declines in population as their populations aged and either children moved out or spouses passed away.

As Bellevue's neighborhoods have aged, growth from natural increase (births minus deaths) has slowed and more growth has come from in-migration, much of which has come from overseas. Between 1990 and 2000 the foreign born population comprised about 67 percent of Bellevue's growth, and between 2000 and 2010 the foreign born population represented 107 percent of Bellevue's growth, as the native born population shrank in size. This pattern is similar to many other metropolitan areas across the country. Governing magazine found that 37 growing metro areas would have lost population had it not been for new residents from abroad.

1990s & 2000s

1992	Downtown height cap raised to 450 feet
1993	First televised City Council meeting airs
1993	New Bellevue Regional Library opens on 110th and Meydenbauer Convention Center opens on NE 6th
1993	City's first Diversity Action Plan is adopted
1993	Conrad Lee becomes Bellevue's first non-white City Council member
1993	A Regional Coalition for Housing (ARCH) founded
1994	Police Precinct opens in Factoria Mall and Mini-City Hall opens in Crossroads Shopping Center
1995	City activates its electronic online bulletin board
1995	Bellevue Pacific Office Tower opens
2001	Bellevue Arts Museum opens in its new building
2001	City buys land on waterfront from William Schupp's grandson, Bill Lagen, for public park
2002	Expanded 12 bay Bellevue Transit Center opens
2002	Residents approve \$324 million in school bonds
2006	New City Hall building opens downtown
2008	\$40.5 million Park levy passes
2009	BelRed Subarea Plan adopted
2009	Microsoft leases three new towers in Downtown, becoming Bellevue's largest employer

2010s

Population	122,363
Median Age	38.5
Percent 65 and over	13.9%
Married Couples with Children	23%
Percent People of Color	40.8%
Percent Foriegn Born	33%
Percent with Bachelor's degree or higher	61%
Percent in Poverty	7.2%

Place of Birth

As Boeing did in the 1950s and 1960s, tech industries in the 1990s and 2000s brought highly educated workers from around the nation and the world to Bellevue. This time however, many of those workers were from Asia instead of Europe.

All of Bellevue's population growth from 2000 to 2010 was from in-migration and all of that from overseas. As a result, the number of foreign-born residents in Bellevue increased by 52 percent over the decade years leading to major increases in Bellevue's cultural diversity.

The percentage of Bellevue residents who were born in a foreign country climbed from 13 percent in 1990, to 25 percent in 2000, and then to 33 in 2010. In other words, in 2010, one in three people living in Bellevue had been born in a foreign country.

About two thirds of Bellevue's foreign born population in 2010 were born in Asia, primarily in China and India. Another 16 percent were born in Europe, 11 percent were born in Latin America, four percent were born in North America i.e. Canada, and the remaining three percent were born in Africa.

Language Spoken at Home

The number of people who spoke a language other than English at home grew significantly during the 1990s and 2000s, mirroring the increase in Bellevue's foreign born population. The percentage of residents five and over who spoke a language other than English at home rose from 14 percent in 1990 to 27 percent in 2000, and then to 38 in 2010. In 2010, 84 different languages were spoken at home by children enrolled in Bellevue School District.

Race and Ethnicity

The growth in Bellevue's foreign born population significantly changed the composition of Bellevue's racial/ethnic distribution. The percentage of Bellevue residents who were people of color rose from 15.0 percent in 1990 to 28.2 in 2000, and then to 40.8 in 2010. Asians comprised the largest non-white racial group climbing from 9.8 percent of the population in 1990 to 17.4 in 2000 and then to 27.5 in 2010.

Age

The most notable change in Bellevue's age distribution in the 1990s and 2000s was the decline in the proportion of the young workforce population between 20 and 44 years of age. This cohort has represented the largest share of Bellevue's population since 1980, but it peaked in 1990 at 42 percent. It then lost ground in the 1990s dropping to 38 percent of the population, and during the 2000s, it continued a slow decline to 36 percent of the population in 2010.

The reason for the decline in the proportion of young workforce adults was due to increasing proportions of 45 to 64 year olds and older adults 65 years and older.

The proportion of 45 to 64 year olds continued to grow in the 1990s and 2000s, climbing gradually from 24 percent of the population in 1990 to 25 percent in 2000, and then to 26 percent in 2010.

The proportion of older adults, 65 years and over, grew somewhat rapidly during the 1990s and then

more slowly during the 2000s. In 2000, older adults represented 13 percent of Bellevue's population up from 10 percent in 1990, and in 2010, they represented 14 percent of the population.

The proportion of the population under 20 years of age has remained relatively stable since 1990. During the 1990s, the population under 20 grew slightly slower than the overall population resulting in it comprising 23 percent of the population in 2000 down from 24 percent in 1990. During the 2000s, the population under 20 grew at the same rate as the overall population, and it continued to represent 23 percent of Bellevue's population in 2010.

One notable change in age occurred in Downtown during the 2000s, where the median age dropped from 57.3 in 2000 to 34.1 in 2010 reflecting the influx of young workforce adults into Downtown during the 2000s.

2010 to 2016 and beyond Challenging Concentrations Economic Prosperity

Jobs

New office towers appeared in Downtown starting in 2015 with the construction of Nine Two Nine Tower, followed by the 415 Office building and Lincoln Square Expansion. Technology firms such as Salesforce.com, Amazon, and other smaller businesses moved in including WeWork Workspace offering co-working space to new startup businesses. Large Chinese technology firms have also recently set up shop in Bellevue including, Huawei (Chinese telecommunications giant), Tencent (China's most valuable company, owner of WeChat, China's predominant social media application) and Baidu (known as the Google of China).

Since 2010, the economy has been recovering from the Great Recession, but the recovery has been uneven. Job growth has been plentiful in some sectors and non-existent in others. For instance, between 2010 and 2016, the overall number of jobs in Bellevue increased by 14 percent, with Information Technology and Tourism sectors seeing the largest gains growing by 4,400 and 3,700 jobs respectively.

Other sectors experienced moderate growth, including Health, Beauty and Fitness, Retail, Construction and Development and Educational Services, while others barely grew, including Business Services and Real Estate. In contrast the Transportation and Logistics, and Aerospace sectors lost jobs.

Differences might be explained by disruptions and shifts toward technological solutions. CBRE wrote in their 2017 Outlook, "All of the real estate sectors we review in this outlook for 2017 are in the process of reinventing themselves to accommodate technology-driven changes in business operations."²³

Projections

Based on regional forecasts and allocations, the number of jobs in Bellevue is projected to reach nearly 193,000 by 2035. However, job growth may be unpredictable and inconsistent across sectors. Jobs within the technology sector will likely continue to grow and with those jobs a host of new jobs will be created in other industries. However, automation technology including artificial intelligence and robotics is coming, and along with its potential to increase productivity and economic growth, it has the potential to cause a major shift in occupations that could "match or even exceed the scale of historical shifts out of agriculture and manufacturing."

McKinsey Global Institute's mid-point projection is that automation will displace 23 percent of United States workers by 2030, and most of these will be in middle-skill jobs. They state, going forward automation may prove to be more disruptive than in recent decades in two ways. One, displacement of workers could be faster, and two, a higher percentage of the workforce could be affected. As discussed earlier, Bellevue has already begun experiencing this shift with its economy moving more towards the tech sector, but much more displacement could occur within the region.

They suggest that in many countries this will require an initiative "on the scale of the Marshall Plan involving sustained investment, new training models, programs to ease worker transitions, income support, and collaboration between the public and private sectors." Here in the United States, state and local governments could also consider ways in which they too could increase job opportunities during the transition period through greater investments in infrastructure.²⁴

Potential Implications

- Automation technologies have tremendous implications. Their adoption will lead to changes in many facets of society including economic productivity, occupations, education and skill requirements as well as access to goods and services, jobs, healthcare, etc.
- As automation increases, higher demand for education and training will be generated. The City should find effective ways to encourage the expansion of workforce training programs for displaced workers.
- At the same time the City should find effective ways to increase investments in infrastructure and clean technology as a means of generating good paying jobs for middle-skill workers.
- Support for continued growth in tourism, retail, and healthcare, beauty and fitness industries would also increase the diversification and number of overall jobs within the city.
- Other economic development efforts could focus on business development and marketization of previously unpaid domestic work including cooking, cleaning and childcare.

- Mechanisms to encourage and/or develop affordable housing that meets the needs of all Bellevue workers will be required to maintain a diversified economy and dynamic community.
- In addition to increased needs for workforce training and affordable housing, increased humans services will be needed to meet basic needs and maintain mental health to ease worker transitions.

Occupations

The percentage of workers in MBSA occupations nationwide has been increasing steadily over the past six years, yet this shift has been gradual, going from 35.9 percent of the employed population in 2010 to 37.6 percent in 2016, an increase of about 1.7 percent. In contrast, the percentage of Bellevue's employed population who are in MBSA occupations has increased 6.3 percent, going from about 60.5 percent in 2010 to about 66.8 percent in 2016. This rapid change indicates that displacement of workers has likely already begun to happen in Bellevue and could continue if training and investment in job creation are not increased.

Educational Attainment

In 2016, 66.2 percent of Bellevue's population 25 and older had a Bachelor's degree or higher up from 59 percent in 2010.

While high concentrations of well educated residents attract companies with good paying jobs, large concentrations can result in housing affordability challenges, which can lead to places becoming less accessible to a diversity of people, and ultimately becoming less desirable.

A community can work to raise the educational attainment level of all people in the region by having a diversity of residents mirroring the county or region's educational attainment distribution. This would result in a more sustainable and/or resilient economy and community.

Neighborhood Patterns

In 2011-2015, in all but three of Bellevue's census tracts, 50 percent or more of the residents 25 years and over had a Bachelor's degree or higher. Over a third of Bellevue's census tracts, had 60 percent or more of their residents 25 years and over with Bachelor's degrees. In northeast Bridle Trails, southern Somerset and northern Downtown, 78, 74 and 71 percent of residents had Bachelor's degrees respectively. In contrast, in east Crossroads, Lake Hills, and Factoria/Eastgate, less than 50 percent of residents had Bachelor's degrees or higher.

Projections

It is likely Bellevue will continue to have higher percentages of its residents with high levels of educational attainment as education levels rise nationally, as jobs in the tech increase, as housing becomes less affordable and as young people who are more highly educated replace older adults who have lower levels of educational attainment.

Potential Implications

If households concentrate by income, educational opportunities for lower income communities may decline. Regional coordination would be needed to ensure equitable funding of education across the region and state.

Earnings

In 2016, median earnings for Bellevue's full-time employed population was \$86,784, up from \$71,537 in 2010. However, earnings varied greatly by occupation, educational attainment and by age.

Trends

Recovery from the Great Recession has been uneven with the highest earning occupations having the highest percent increases resulting in further polarization between the rich and poor.

Median earnings for all occupations in Bellevue experienced a 21 percent increase between 2010 and 2016. However, median earnings for people working in MBSA occupations increased by 24 percent while median earnings for people working in service occupations increased by two percent.

What makes this difference more stark is that it is a percentage and not a dollar amount. Had the percent increase in earnings for all occupations been the same, the gap between rich and poor would still have increased because of the difference in base dollar amounts. For example, had MBSA worker earnings increased by 21 percent, the increase would have been \$17,507. Comparatively, a 21 percent increase in service worker earnings would have been \$7,993, less than half the increase of MBSA workers. As it turns out, median earnings for MBSA workers increased by \$19,449 and median earnings for service workers increased by \$738, less than 1/25th of the increase MBSA workers received.

Variations — Earnings by Educational Attainment and by Occupation

Median earnings varied by educational attainment and by occupation. Earnings were highest for those with high educational attainment levels (Figure 33), and those employed in service occupations had much lower earnings than those employed in management, business, science and arts occupations.

Median earnings for residents 25 and over who had less than a high school diploma were \$30,815 in 2016 compared to \$101,019 for those with a graduate or professional degree.

Median earnings for residents employed in service occupations was \$38,238 compared to \$101,590 for those employed in management, business, science and arts occupations (Figure 34).

Household Income

In looking at recent changes, between 2015 and 2016, the percentage of households in Bellevue with incomes between \$15,000 and \$24,000 and between \$50,000 and \$75,000 dropped 2.0 percent and 4.7 percent respectively, while the percentage of households with incomes between \$100,000 and \$149,000 rose 4.8 percent.

Had these decreases and increase been in adjacent income brackets, one might think that households in the lower income bracket previously saw gains in income and moved into the higher bracket. However, since the decreases and increase in were not from non-adjacent brackets, they likely did not represent households improving their economic situation. Instead, it is more likely that lower income households moved out of Bellevue and higher income households moved in.

Variations - Income by Age

As people age out of the workforce and retire, their household income usually decreases. Also, when a spouse dies, household income drops further. Older adults therefore tend to have lower household incomes than younger age cohorts.

In 2011-2015, about 42 percent of Bellevue's households headed by someone 65 and over had incomes less than \$50,000 versus 18 percent of households headed by someone 25 to 44. In addition, about 29 percent of Bellevue's older adults had incomes over \$100,000 versus 51 percent of Bellevue's young adults.

Median Household Income

In 2016, Bellevue's median household income was estimated to be \$113,877 up from \$99,892 in 2015 and \$95,904 in 2014 each adjusted for inflation. These increases reflected increases in median earnings and shifts in household income distribution.

Poverty

As the economy recovered and cost of housing rose, poverty rates in Bellevue declined. About 5.9 percent of people living in Bellevue were in poverty in 2016, down from a high of 9.1 percent in 2013. However, the poverty rate in 2016 exceeded the low rate of 4.9 percent in 2009 before the recession took effect.

Poverty rates were higher for families with children under five years old (15.7 percent) and for families with a female householder, no husband present with children under 18 years of age (18.9 percent). The poverty rate was also slightly higher for older adults 65 years and over at 6.5 percent.

Neighborhood Patterns

Poverty rates were highest around Crossroads, west Lake Hills, and Bellevue College ranging from about 13.7 to 23 percent. Rates of poverty were lower further south and north and outwards toward the shores of Lake Washington and Lake Sammamish. Poverty rates for children were highest in west Lake Hills, Crossroads and Downtown, all of which were over 30 percent.

Trends

Bellevue has an increasing concentration of high income households. One such unintended consequence could be a shortage of low wage labor. When service employees cannot afford to live in an area and must travel long distances to go to work, restaurants and retail stores may have a hard time staffing their establishments. Retail and Service sector respondents to Bellevue's 2017 Business Survey stated that finding talent was increasingly difficult due to Bellevue's lack of housing affordable to their employees. Yet having healthy local economies with retail stores and restaurants creates desirable places to live, attracting talent and business.

Finding ways to keep one's economy dynamic, requires finding ways of maintaining a diversity of housing that is affordable to households along the full spectrum of household income. With housing diversity, a diversity of workers are available to supply goods and services that make the city a dynamic and attractive place to live.

Housing and Population Housing

In 2017, 61,128 housing units existed in Bellevue up from 55,551 in 2010. Of those new units, 2,149 were from annexations that occurred in 2012, the last major annexations that will take place in Bellevue. About 96 percent of housing growth since 2010 was in the form of multi-family housing.

About 68 percent of multi-family units constructed since 2010 were located Downtown. Another 22 percent were located in BelRed. Other developments occurred in West Bellevue, Crossroads, Lake Hills, Wilburton and Northwest Bellevue.

Projections

Growth in our economy will continue to generate growth in our population and increase demand for housing. Much of Bellevue's household growth will likely be in the form of high income households, however not exclusively. As demand for healthcare, education, retail and restaurant workers increases, a growing number of moderate to low income households will be looking for housing opportunities close to where they work.

Housing Value

One of Bellevue's ongoing challenges has been ensuring people from all income levels have an equal opportunity to benefit from Bellevue's high quality of life. Bellevue provides jobs for people at different income levels, but not all of those people can afford to live within the community and thereby benefit from the amenities they help to provide. For example, Bellevue is known to be a safe community with high quality schools, yet police officers and teachers often cannot find affordable housing within the city.

Projections

As the city's economy grows, there will be greater demand for housing within the City. If supply does not keep pace with demand, prices will rise putting housing out of reach for many of Bellevue's low to moderate income workers. This in turn will create pressure for sprawl and for racial/economic segregation leading to inequitable access to quality schooling, jobs, health and safety.

Potential Implications

 The increasing concentration of high income households in Bellevue could reduce the amount of housing affordable to low and moderate income households leading to a shortage of low-wage labor. Finding ways to house workers at all income levels could strengthen the economy by supporting the mix of workers needed to make cities dynamic places to live and work.

- As households sort by income, low to moderate income households' opportunities for upward mobility could decline. Looking for ways to alleviate housing cost burden for low income households living in areas of high opportunity is likely more effective than boosting opportunities in areas with high concentrations of low income households.
- As low to moderate income households move farther away, traffic congestion will increase in the region.
- In addition to providing housing support and training to help workers develop skills in line with tomorrow's industries, communities must find ways to establish systems of support and inclusivity to make everyone feel welcome in the community.

Households Household Size

In 2016 Bellevue's average household size was estimated to be about 2.49 persons per household continuing its upward trend since 2000.

As stated earlier, in 1970 Bellevue had a relatively large average household size of 3.4. As children grew up and moved away, household sizes became smaller reaching a low of 2.37 in 2000. Then during the 2000s, as many long-time residents began to retire and move away, a new influx of young families with children moved in and Bellevue's average household size began to increase again.

This trend was also made evident by enrollment trends in Bellevue School District, which after declining steadily from 1969 to 1990, remained stable for about 13 years, and then in 2003, began to increase again for the first time in 34 years. In 2017, enrollment was up to 20,262.

Variations - Household Size by Structure Type and by Age

In 2016, the average size of households living in multi-family structures was 2.08 compared to 2.73 for households living in single-family structures. Also, the older the householder the higher the proportion of one person households. In 2015, about 45 percent of households with householders 75 years and above were one person households compared to 33 percent for householders ages 55 to 74 and 23 percent for householders ages 15 to 54. Other factors affecting household size include changes in household composition, which are discussed in the next section.

Projections

Despite recent reversals in household size trends with household sizes increasing over the past decade, Bellevue's average household size is projected to decline in the future with a greater proportion of people living in multi-family units and a greater proportion of people being 65 years of age and over. The rate of change however, is uncertain. If families with children begin to replace older adults in single-family homes, average household sizes in single-family homes may increase counteracting the increase in the proportion of multi-family units.

Much will also depend on the type of multi-family units constructed. In the 1970s and 1980s, 70 percent of units constructed had two bedrooms, compared to 27 percent since 2010. If multifamily unit sizes increase, household sizes may not decline as rapidly. But the trend has not been in that direction.

Also, the cost of housing influences household size. When cost of housing is high, the proportion of single person households decreases as people look for ways to spread the cost of housing over two or more incomes versus one.

Household Composition

For the first time since 1980, married couples with children became the second largest type of households at 26 percent. The proportion of married couples with children has been increasing steadily since 2000, but this was the first time it surpassed the share of single person households since 1980. Also, the share of married couples without children increased in 2016 representing a reversal in trends. Though married couples without children have comprised the largest share of Bellevue's households since 1980, their share has been declining since 1990. The increase to 32 percent puts them back at 1990 levels.

Much smaller in size than the big three household types are single-parent households, other family households and two plus person non-family households. These households either maintained their share or decreased slightly from 2010 to 2016. Within Bellevue's single-parent households, single-parent mothers were about three times as common as single-parent fathers.

Two plus person non-family households comprised approximately seven percent of all Bellevue households in 2016, and "other family" households (those with related family members but not a married couple and not parents with their own children) made up about five percent of Bellevue households.

Regional Comparisons

Bellevue and Kirkland had higher proportions of married couples with and without children than the nation, state, county and other large King County cities in 2016, while Seattle had the highest proportions of single person households and two plus person non-family households.

Just over five percent of Bellevue households in 2016 were single-parent households, compared to nine percent in the nation and about eight percent in Washington State.

In 2016, Bellevue had a lower percentage of households with children (32 percent) than Kent (35 percent), yet its share of households with children was higher than the share in the nation (28 percent), Washington State (28 percent) and other large cities in the state. Bellevue's percentage of households with children was notably higher than Seattle's (18 percent).

Neighborhood Patterns

Generally as one moves east and south across the city, the average household size increases. The highest average household sizes in 2011-2015 were in the Somerset and Cougar Mountain/ Lakemont neighborhood areas with averages as high as 3.13, 2.89 and 2.75. Northeast Bellevue and West Lake Sammamish also had relatively high averages of 2.84, 2.81, 2.73 and 2.69.

The lowest average household sizes were in Downtown (1.56 and 1.77), Surrey Downs (1.95), northeast Bridle Trails (2.2), and Wilburton (2.22). Other areas had average household sizes ranging from 2.33 to 2.71 persons per household.

Potential Implications

- More housing units will be needed as jobs increase and demand for housing grows.
- A greater variety of housing types and sizes will be needed to meet the changing needs of Bellevue's increasingly diverse households.
- Small studio apartments or accessory dwelling units could accommodate the growing young workforce and older adult populations, but their level of amenities may differ.
- To meet the demand for housing in Bellevue and prevent further housing cost escalation, larger multi-family units with the ability for ownership will be needed for families with children.

Population

As of April 1, 2017, Bellevue's population was 140,700, making Bellevue the fifth largest city in the state of Washington just behind the cities of Seattle, Spokane, Tacoma and Vancouver. Bellevue's population comprised just under two percent of the state's total and just under seven percent of King County's population.

Population Density

Covering an area of approximately 33.5 square miles, Bellevue has a gross population density of about 4,200 people per square mile, making it the 18th densest city in the state of Washington. Seattle, in comparison is the state's densest city with approximately 8,500 people per square mile. Other large cities with densities higher than Bellevue's include Burien, Kirkland, Shoreline, Renton and Federal Way.

Potential for Population Growth

In 2016, about 30 percent of all owner occupied housing in Bellevue were owned by householders 65 years and over, and about 50 percent were owned by householders 55 years and older (Figure 3). With this much housing owned by older adults, there is potential for population growth in areas where there is no potential for housing growth. This type of growth is more likely to happen in desirable places where demand for housing is high.

As the older adult population moves away and household type and age distributions shift, two other shifts will likely occur - a shift in race/ ethnicity and a shift in household income.

Projections

Since incorporation in 1953, Bellevue's population has grown at an average annual rate of 5.1 percent a year. However, much of that growth was due to annexations especially annexations that took place during the 1950s and 1960s. Over the past four decades and into this current decade, annexations have represented about 25 percent of Bellevue's population growth on average, and Bellevue's population has grown around 1.8 percent per year. However in the future, the rate of population growth is projected to slow to less than one percent per year with Bellevue's population projected to reach 160,400 by 2035 (Figure 2).

Potential Implications

- Greater demands on local and regional transportation infrastructure could degrade convenient access by automobile and thereby create demand for more efficient modes and technologies.
- Increases in the growing number of children and older adults will create greater

demands on schools and health and human service providers.

- Increased population in new centers, such as BelRed will create new demand for City services such as safety protection, recreation and community programs.
- Pressures on open space and degradation of habitat quality from development and redevelopment could continue. However, as redevelopment occurs in areas such as BelRed, there may be opportunities for restoring habitat and enhancing open space.
- Pressures on housing may escalate prices worsening affordability and thereby reducing equitable access to opportunity.
- A greater variety of housing types may enable a broader range of ages and households to live in Bellevue.
- As population densities increase, a variety of opportunities will be available such as more convenient access to a greater variety of shops and services and more frequent public transportation service.

Cultural Diversity Place of Birth

With its strong economy and high of quality of life, Bellevue has always been a city that attracts people. Over the decades, Bellevue's population has steadily become more culturally diverse as people from around Washington, the nation and the world have moved here.

In 2016, about 37 percent of Bellevue's residents were born in a foreign country, about 31 percent were born in a different U.S. state and about 30 percent were born in Washington State. Over 70 percent of Bellevue's foreign born population were born in Asia, followed by 11 percent from Europe, and 10 percent from Latin America. India and China were the countries in which most of Bellevue's foreign born population were born. A little over a third of Bellevue's foreign-born residents were recent immigrants to the United States, having entered the country in 2010 or later.

Trends and Comparisons

About 37 percent of Bellevue residents were foreign-born in 2016 up from 33 percent in 2010, 25 percent in 2000 and 13 percent in 1990. In comparison, 23 percent of King County residents and 14 percent of Washington state residents were foreign-born in 2016.

Neighborhood Patterns

Crossroads, northeast Bridle Trails and north Downtown had the highest concentrations of foreign born residents in 2011-2015 with foreign born residents comprising 53 percent or more of their populations. About a third of residents living in the central parts of the city were foreign born and about 20 percent of populations living in the remaining areas were comprised of foreign born residents.

Language spoken at home

About 42 percent of Bellevue residents age 5 and over spoke a language other than English at home in 2016, up from 38 percent in 2010, 27 percent in 2000 and 14 percent in 1990.

This was the highest percentage in the state for cities with 65,000 in population or more (Figure 18). Bellevue school district also reported that 95 other first languages were being spoken by children enrolled in the district during the 2016-2017 school year. The top ten languages spoken at home other than English in Bellevue in 2015 are shown in Table 2.

Of those residents who speak a language other than English at home, about 40 percent report that they speak English less than "very well." This represents nearly 17 percent of all Bellevue residents age 5 and over (Table 3). About 8.5 percent of Bellevue's households were limited English speaking households in 2015. A "limited English speaking household" is one in which no member 14 years old and over speaks English "very well." These households are likely to have the most difficulty with basic day-to-day communications in that no adult member of the household speaks English very well.

Neighborhood Patterns

In 2011-2015, all census tracts throughout Bellevue had at least 21 percent of their population over five who spoke a language other than English at home. Neighborhoods with over 50 percent of their populations speaking a language other than English at home were Crossroads, northeast Bridle Trails and north Downtown.

Central areas of the city including Surrey Downs, Wilburton, west Lake Hills, Eastgate/Factoria and Somerset all had over 40 percent of their residents 5 and over who spoke a language other than English at home.

Chinese speakers were located throughout the city, but the highest concentrations existed in the Somerset and Cougar Mountain/ Lakemont neighborhoods.

Spanish speakers were primarily concentrated in Crossroads, west Lake Hills and Eastgate south of I-90.

The highest concentrations of Korean speakers were in south Lake Hills near Bellevue College, Somerset and Cougar Mountain/Lakemont and Eastgate/Factoria.

High concentrations of Russian speakers were located in Woodridge, Northeast Bellevue, north Downtown and Crossroads.

Hindi speakers were primarily concentrated in northeast Bridle Trails, Crossroads and Downtown.

Race and Ethnicity

For the first time in 2015, non-Hispanic whites no longer represented the majority of Bellevue residents. Instead, a plurality of races/ethnicities existed. Since 1990, the proportion of People of Color in Bellevue has more than tripled going from 15 percent in 1990, to 28 percent in 2000, to 41 percent in 2010, and most recently to just over 50 percent in 2016.³ Bellevue's increase in people of color mirrors national trends where the proportion of people of color has increased from 24 percent to 39 percent during the same period. It also brings Bellevue more in line with the western region of the United States, which has had higher proportions of people of color over the decades.

Growth in Bellevue's Asian population has climbed significantly in the past 25 years, increasing from about 8,500 in 1990 to just over 50,000 in 2016, an increase of 489 percent. Bellevue's Chinese and Asian Indian populations have grown the fastest, whereas Bellevue's Korean and Japanese populations have stayed relatively stable.

The proportions of Hispanics and people of two or more races have also increased in Bellevue since 1990, while the proportion of Blacks and African Americans has remained relatively stable.

Variations

Bellevue's population 65 and over was 78 percent white in 2011-2015, while Bellevue's young adult population, ages 18 to 44, was 40 percent white. As the population ages, it will become more diverse as young (more diverse) adults replace older adults. However, the rate of change could increase if older adults choose to move away sooner.

Regional and National Comparisons

Compared to the United States, Washington State, King County and Seattle, Bellevue is more racially/ethnically diverse. However, Bellevue ranks 5th out of the state's 11 largest cities for having the highest percentage of people of color. Neighboring large cities to the south have higher percentages of people of color including Federal Way, Kent and Renton.

What is notable about Bellevue racially, is its high percentage of Asian residents. Bellevue ranked 14th out of 319 large cities in the nation for having one of the highest percentages of Asian residents in 2015.

A key difference between the racial make up of the Central Puget Sound region (including Bellevue) and the nation as a whole was that the nation had higher percentages of African Americans and Hispanics or Latinos than the Central Puget Sound region. Conversely, this region had higher percentages of Asians and people of two or more races.

Neighborhood Patterns

In eight of Bellevue's 28 census tracts, there were a plurality of races and ethnicities in 2011-2015 (Figure 16). In another eight, people of color comprised over 40 percent of the population. Another nine tracts had 30 percent or more, and in the three remaining tracts, people of color comprised 25 percent or more of the population.

Bellevue's Asian populations were dispersed throughout the city, though higher concentrations (37% or more) existed along a central spine of the city from northeast Bridle Trails south to Crossroads, Lake Hills, Somerset and Cougar Mountain/Lakemont, and then west to north Downtown.

Bellevue's Hispanic and Latino populations tended to be more highly concentrated in the neighborhood areas of Eastgate/Factoria, Crossroads and West Lake Hills, which had shares of 16 percent or more.

Potential Implications

- Increasing cultural diversity will require more cultural understanding and intentional inclusiveness by both public officials and residents.
- New residents may be unfamiliar with local government systems and be distrustful of government in general. This could hamper government's ability to work constructively toward community solutions. Patience, tolerance, understanding and openness to new ideas will be needed when working with new residents regarding community challenges. Additional efforts will be needed to involve new residents early and often in citywide initiatives.
- The high number of non-English speakers who report that they do not speak English very well will have implications for the way the City, businesses, schools and other agencies provide information about goods and services to ensure they are accessible to Bellevue's diverse population.

• Certain neighborhoods with higher concentrations of language diversity may need equitable services or facilities such as multi-lingual street signs or bus schedules to ensure residents are able to find their way to goods and services.

Age Diversity

As baby boomers turn 65, the older adult cohort is projected to comprise a much larger proportion of the state population, climbing from 15 percent in 2017 to 22 percent in 2040. Will that be the case in Bellevue, or will many of Bellevue's older adults choose to sell their homes and move away, slowing their rate of increase, while increasing the rate at which Bellevue diversifies racially, and increasing the rate at which Bellevue homogenizes economically? Or will older adults who choose to sell their homes, be able to find other affordable housing options within the city?

Housing size, efficiencies of scale and development incentives helped produce more housing affordable to moderate and low-income households, yet costs of new development keep much of this housing out of reach for many low income households.

Over the decades, as the baby boomers have aged, the proportions of people who are under 20 and ages 20 to 44 have declined, while the proportions of 45 to 64 year olds and 65 and older have increased. This has resulted in a steady diversification or evening out of the different age cohorts within the city.

In 2016, about 41 percent of Bellevue residents were ages 18 to 44 and another 26 percent were 45 to 64. These two age cohorts of the combined workforce age population made up the large majority of Bellevue residents. ³

Variations — Age by Gender and by Race

Age varied by demographic characteristics such as gender and race/ethnicity. For instance, in addition to increasing the concentration of high income households, growth in tech sector jobs has also led to an increased concentration of young men. Females represented a scant 18.3 percent of Bellevue's employed population in computer, engineering and science occupations in 2016, and Bellevue's population between the ages of 18 and 35 was 55 percent male. In contrast, females comprised 56 percent of Bellevue's older adult population, 65 years and over.

In terms of race/ethnicity, the median age of Bellevue's white population was 45.6 in 2015 compared to 28.4 for Bellevue's Hispanic population and 17.5 for Bellevue's multi-racial population.

Age distributions by race/ethnicity and race/ ethnicity distributions by age illustrate the multiple layers of diversity in Bellevue. Every racial/ethnic group has some children and some older adults. However, certain racial groups have a greater diversity of ages within them. For example, about 20 percent of whites are older adults versus five percent of Hispanics, and about 45 percent of people of two or more races are under the age of 18 compared to 13 percent of whites.

Every age cohort has people of different races and ethnicities. However, certain age groups have a greater diversity of races/ ethnicities within them. For example, about 60 percent of children are people of color versus 22 percent of older adults, and about 12 percent of children are of two or more races compared to one percent of older adults.

Children

The percentage of Bellevue's population under 20 years of age declined sharply from 1970 to 1990 going from 44 percent of the population in 1970 to 30 percent in 1980 and then to 24 percent in 1990. The share has remained relatively stable over the past two decades, though it dropped slightly to about 22 percent of the population in 2016.

Older Adults

The percentage of Bellevue's population who are older adults, 65 years and older, has increased over the decades going from 10.4 percent in 1990 to 13.4 percent in 2000, to 15.2 percent in 2016.

2010s

Affordable Care Act enacted and signed into law
Seattle Children's Bellevue Clinic and Surgery Center opens
East Link Memorandum of Understanding signed by City of Bellevue and Sound Transit
Spring District Master Plan approved
City annexes Eastgate, Horizon Crest, Tamara Hills and Hilltop
New South Kirkland Park-and-Ride garage opens followed by Velocity, affordable TOD apartments
Diversity Advantage Plan adopted
Multi-Family Tax Exemption for afforadable housing adopted
Housing Affordability Strategy adopted
Wilburton Trestle \$10M in joint funding committed
Downtown Park Circle Completion and Inspiration Playground opened and Meydenbauer Bay Park Phase 1 launched
Global Innovation Exchange (GIX) welcomed first two cohorts of graduate students
Lincoln Square Expansion completed
Downtown Livability and Eastgate land use codes adopted

By 2040, the older adult population in Washington State is forecast to reach 1,867,400, representing 21 percent of the state's total population. The sharp spike in the growth of the 65-and-older population in 2011 corresponds to a similarly sharp spike in births 65 years ago in 1946, exactly one year after American servicemen returned

2016s

Population (2017)	140,700
Median Age	39.1
Percent 65 and over	15.2%
Married Couples with Children	26%
Percent People of Color	50.5%
Percent Foriegn Born	37%
Percent with Bachelor's degree or higher	66%
Percent in Poverty	5.9%

home from World War II. These children of 1946 turned 65 in 2011, leading the baby boomer generation into retirement age.

Neighborhood Patterns

Somerset and Factoria/Eastgate had the highest proportions of children in 2011-2015 with 25 percent or more. Whereas Downtown and northeast Bridle Trails had less than 17 percent children.

North Downtown, Northeast Bellevue, Somerset and West Lake Sammamish had some of the highest concentrations of older adults in 2011-2015, with 17 percent or more. Whereas parts of Crossroads, Cougar Mountain/Lakemont and the northeast part of Bridle Trails had some of the lowest concentrations, with less than ten percent.

The older workforce population was more concentrated in the neighborhood areas south of I-90 and in Woodridge, Northeast Bellevue and West Lake Sammamish.

One of the biggest changes since 2000 in terms of age distribution occurred in Downtown where historically older adults comprised the largest share of the population (54% in 1990 and 43 percent in 2000), but in 2011-2015, the young workforce population comprised over 57 percent of the population and older adults comprised less than 15 percent.

Regional and National Comparisons

Bellevue currently has roughly the same age distribution as Washington State and the nation, yet is differs markedly from Seattle where children and older adult cohorts are much smaller. In the future as Bellevue urbanizes, will the city maintain similarities with the state and nation or will it become more similar to Seattle?

Projections

It is somewhat surprising how close Bellevue's age distribution is to the national distribution. If tech jobs continue to grow it is likely that Bellevue will maintain a larger proportion of young adults than the nation. Because the baby boomers are moving out of the older workforce cohort and into the older adult cohort, it is very likely the percentage of older workforce adults in Bellevue will decline as the percentage of older adults increases. However, the rate of growth in older adults may not be as rapid in Bellevue as in the nation due to the high demand for housing in Bellevue, especially ownership housing with three or more bedrooms, nearly a third of which are owned by older adults. Instead, Bellevue may see an increase in the percentage of children as young families with children take the place of older adults.

Potential Implications

- The aging of the baby boomers has tremendous implications for Bellevue and other communities. Their preferences, needs, and political clout will lead to changes in many facets of society including programs and services, transportation, housing, and community resources.
- As the share of older adults increases, demand for a greater variety of housing options may be generated. The City should find effective ways to encourage the building of multi-family structures with affordable units for older adults.
- At the same time the City should find effective ways to encourage the building of multi-family units attractive to larger households such as families with children, not

as temporary places to live, but as permanent dwellings in which to raise a family.

- Some of Bellevue's denser neighborhoods such as the Downtown and Crossroads may need more recreation and transportation facilities and services for a diversity of ages including youth and older adults.
- There will likely be increased demand for respite care and senior day care, and more generous workplace leave policies for those caring for aging parents, often in addition to being employed and caring for their own children.
- Schools should be prepared for growth in the number of children in neighborhoods experiencing greater turnover in housing and/or where a high percentage of housing is currently owned by older adults.

The American Community Survey Notes about the Data Source

The U.S. Census Bureau's American Community Survey (ACS) replaced the decennial census long form for gathering detailed information about population and household characteristics essential for federal programs. The major benefit of the ACS over the decennial long form is its timeliness. ACS estimates are released annually instead of only once every 10 years.

One of the major differences is that ACS estimates do not offer a "snap shot" view of characteristics for a specific date, but instead provide average characteristics over a period of time (one year or five years). For instance, the 1-year 2016 ACS estimates used in this report describe the average characteristics of Bellevue's population over the 12 month period from January 2016 to December 2016, whereas the 5-year 2011-2015 ACS describe the average characteristics for the City of Bellevue over the 60 month period from January 2011 through December 2015. Like the long form, ACS estimates are not intended to count the population, but instead they draw from a sample population to provide information on a community's population and household characteristics. Because they are estimates and not counts, they are subject to sampling error, the degree of which the Census Bureau represents through margins of error based on a 90 percent confidence interval. Annually, the ACS surveys about 1 in 40 households, resulting in a relatively small sample size. Therefore annual estimates have relatively large margins of error and are available only for geographies with population sizes of at least 65,000.

Five-year ACS estimates use data that have been aggregated over five years, which reduces the margins of error and increases the number of geographies reported on. For example, annual estimates are only available for the eleven largest cities in Washington State, and 5-year estimates are available for every city as well as for Census Tracts and Census Block Groups.

The 5-year ACS estimates enable us to look at neighborhood trends and patterns. However, it is important to note that ACS and decennial census estimates on similar subjects may not always be comparable due to differences in residence rules, universes and/or reference periods.

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Job Trends and Projections

Job Estimates to 2015 and Projections to 2035

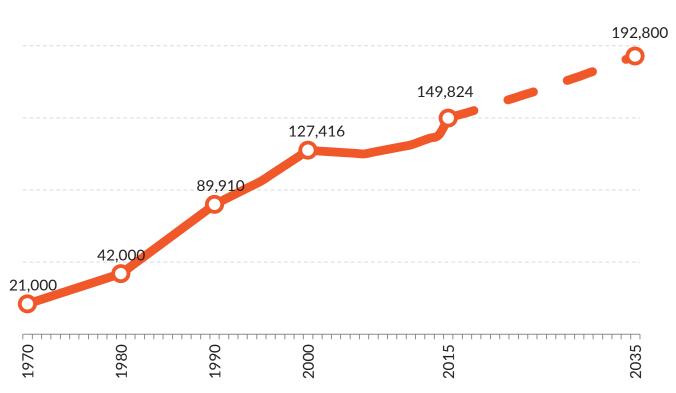
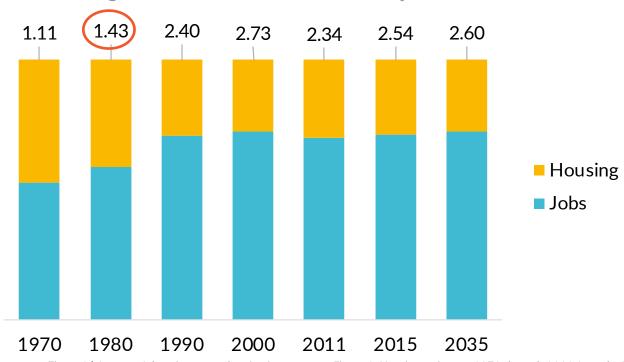


Figure 1 | Sources: 1970 through 1990 estimates and 2015 through 2035 projections from the City of Bellevue Department of Planning and Community Development; 2000 through 2015 estimates from the Puget Sound Regional Council.



Job to Housing Ratio Estimates to 2015 and Projections to 2035

Figure 2 | Sources: Job estimates and projections same as Figure 1. Housing estimates 1970 through 2010 from the U.S. Census Bureau's decennial censuses, 2015 estimate from Washington State's Office of Financial Management, 2035 projection from the City of Bellevue Department of Planning and Community Development.

Jobs by Industry Sector / Cluster

Major Industry Sector Distribution, 2015

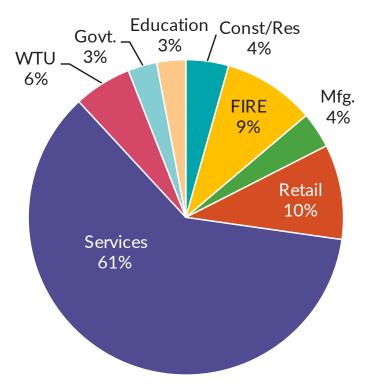


Figure 3 | Source: Puget Sound Regional Council 2015 estimates of total employment.

Percent Change in Jobs by Sector: 2000 to 2015

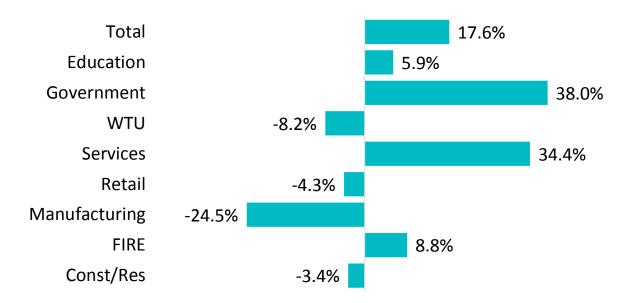


Figure 4 | Sources: City of Bellevue, Department of Planning and Community Development's calculation based on Puget Sound Regional Council's estimates of total employment in 2000 and 2015.

Jobs by Industry Sector / Cluster

Bellevue's Major Industry Clusters by Size, Employment Change and Concentration

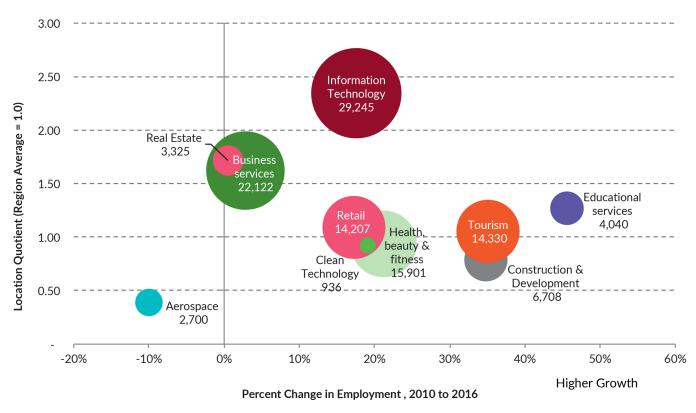
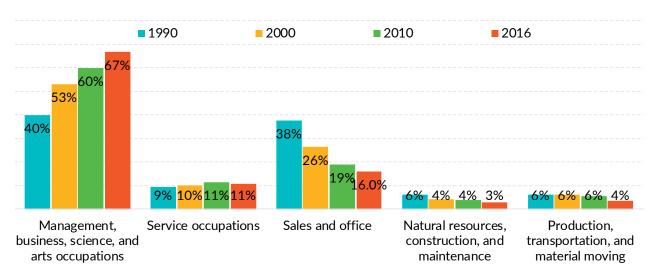


Figure 5 | Sources: City of Bellevue, Department of Planning and Community Development's calculation based on Puget Sound Regional Council's and City of Bellevue's estimates of total employment in 2010 and 2016.

Occupation



Occupation Distribution Trends: 1990 to 2016

Figure 6 | Sources: U.S. Census Bureau, 1990 and 2000 censuses and 2010 and 2016 American Community Surveys.

Occupation

Occupation Distribution Comparisons in 2016

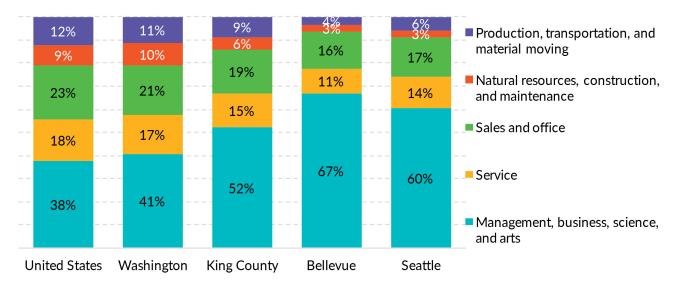


Figure 7 | Source: U.S. Census Bureau, 2016 American Community Survey.

Occupation Distribution By Race in 2011-2015

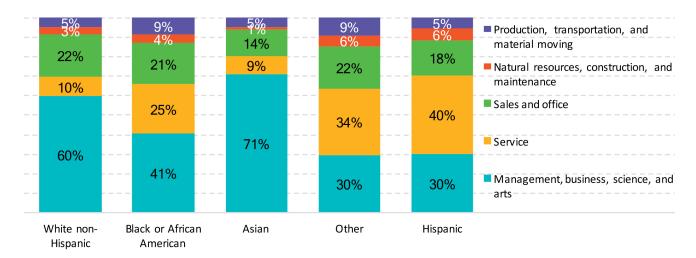
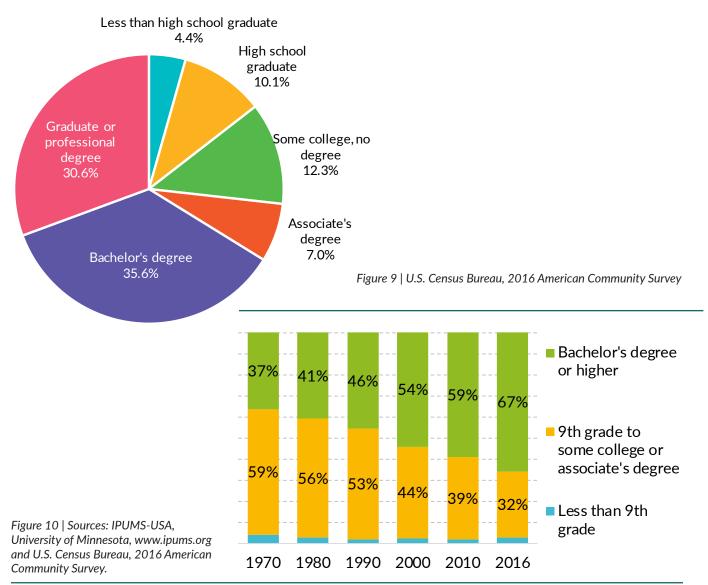


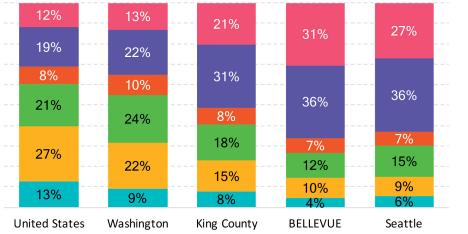
Figure 8 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Educational Attainment

Educational Attainment Distribution Trends 1970 to 2016



Educational Attainment Distribution Comparisons



Graduate or professional degree

- Bachelor's degree
- Associate's degree
- Some college, no degree
- High school graduate
- Less than high school graduate

Figure 11 | Source: U.S. Census Bureau, 2016 American Community Survey.

Educational Attainment

Comparison of Educational Attainment Shifts between 2000 and 2016 in the United States, Washington, King County and Bellevue

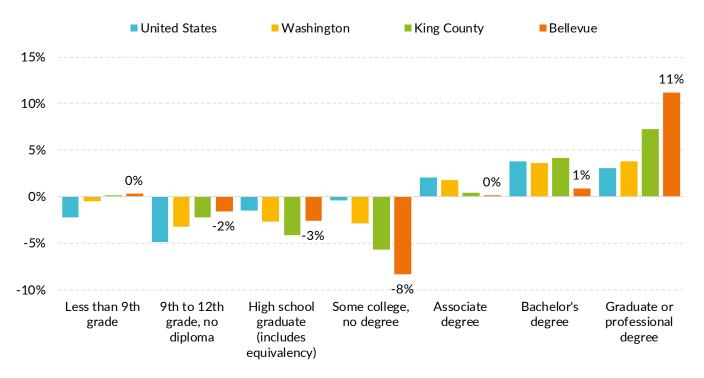
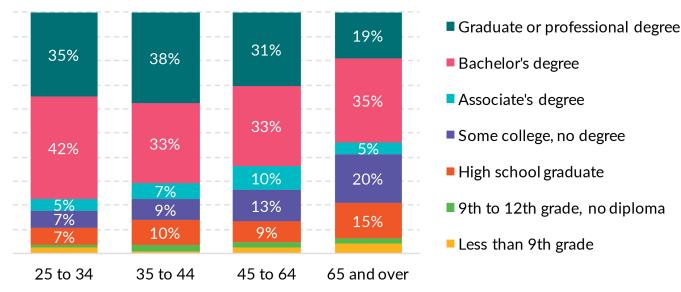


Figure 12 | Source: City of Bellevue, Department of Planning and Community Development's calculation based on U.S. Census Bureau, 2000 census and 2016 American Community Survey.



Educational Attainment Distribution by Age 2016

Figure 13 | Source: U.S. Census Bureau, 2016 American Community Survey.

Educational Attainment

Educational Attainment Distribution by Race 2011-2015

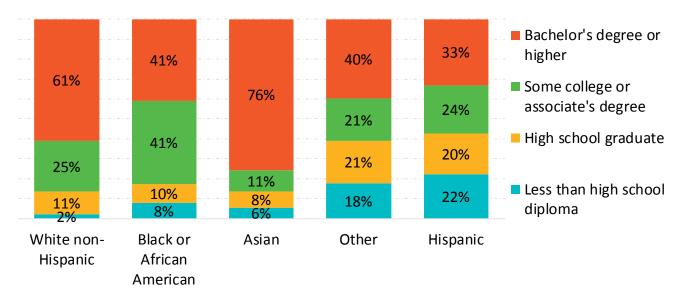


Figure 14 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Field of Degree by Gender 2011-2015

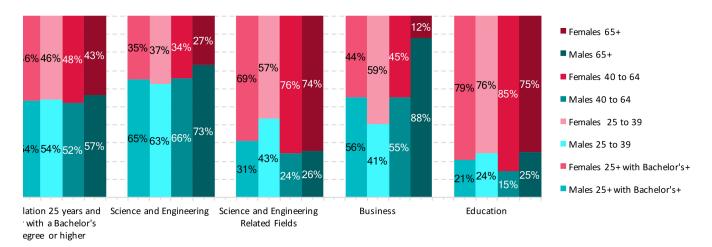


Figure 15 | Source: U.S. Census Bureau, 2011-2015 American Community Survey

Earnings

Median Earnings of Full Time Workers by Occupation Comparisons 2011-2015

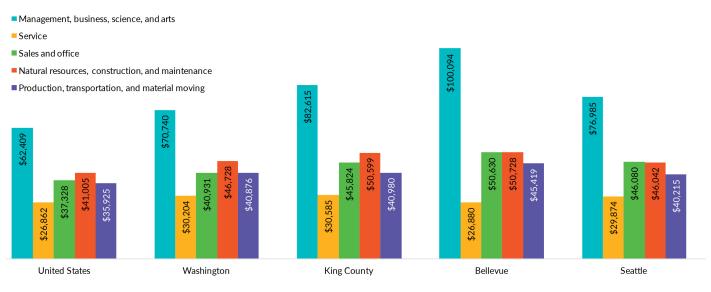


Figure 16 | Source: U.S. Census Bureau, 2011-2015 American Community Survey

Percent Change in Median Earnings by Occupation 2010 to 2016

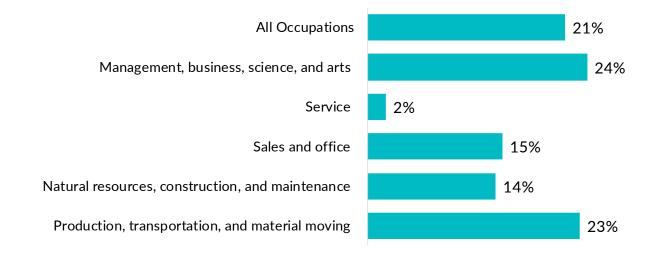


Figure 17 | Source: City of Bellevue, Department of Planning and Community Development's calculation based on U.S. Census Bureau, 2010 and 2016 American Community Survey.

Earnings

Change in Median Earnings by Occupation 2010 to 2016

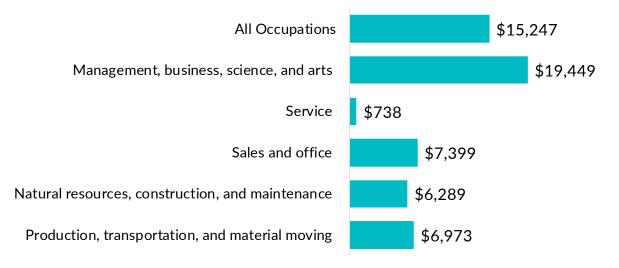


Figure 18 | Source: City of Bellevue, Department of Planning and Community Development's calculation based on U.S. Census Bureau, 2010 and 2016 American Community Survey

Income and Poverty

Household Income Distribution in 2016

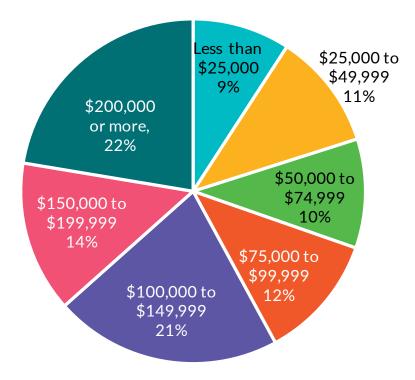
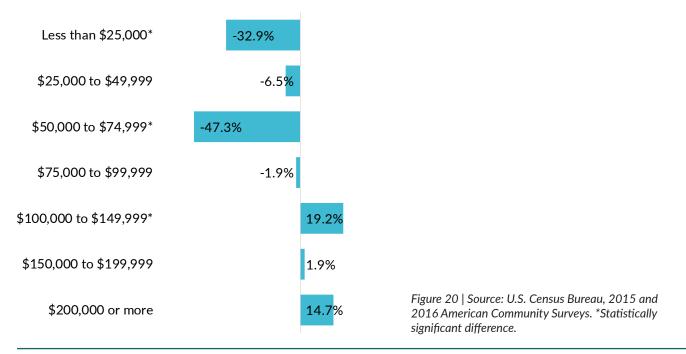


Figure 19 | Source: U.S. Census Bureau, 2016 American Community Survey.

Income and Poverty

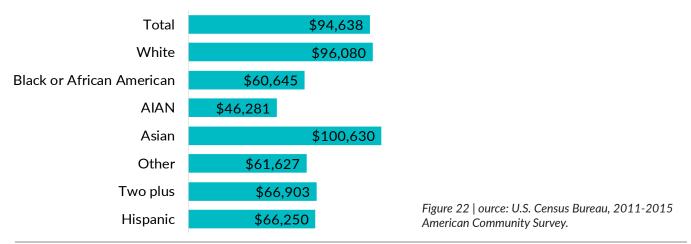
Household Income Distribution Percent Change beween 2015 and 2016



Median Household Income by Age in 2016



Median Household Income by Race in 2011-2015



Human Services | Bellevue, Washington

Income and Poverty

Household Income Distribution by Age

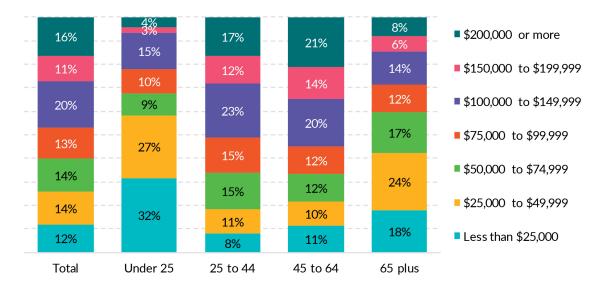


Figure 23 | Source: U.S. Census Bureau, 2011-2015 American Community Survey

Household Income Distribution by Race/Ethnicity 2011-2015

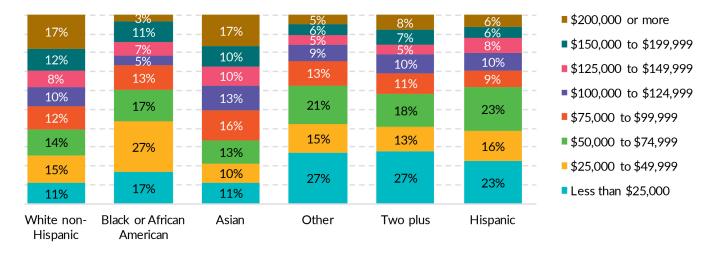
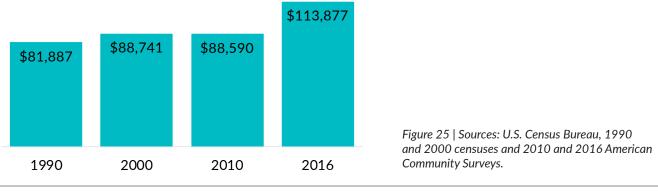


Figure 24 | Source: U.S. Census Bureau, 2011-2015 American Community Survey

Median Household Income Trends 1990 to 2016 (in 2016 dollars)



Income and Poverty

Household Income to Poverty Ratio Distribution Trends 2006 to 2016

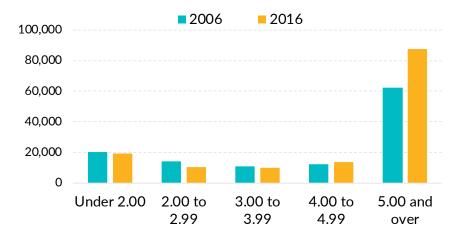


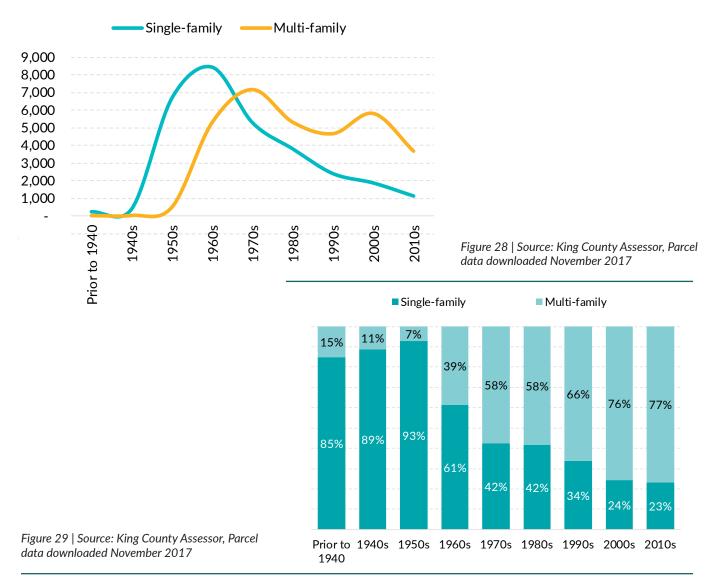
Figure 26 | Sources: U.S. Census Bureau, 2006 and 2016 American Community Surveys.

88,160 Bridle Trails briliwest 123,000 96,268 Bellevue BelRed 107,479 Northeast Grossroads 96,975 Bellevue 78,155 78, 46, 04,013 Downtown 87,236 119 719 89,479 Wilburton Hills Median Household Income 97,674 76,500 72,383 2,283 West 12,269 - 51,341 -West Lake Woodifidge Ballavua 51,342 - 70,875 Sammamish 110, 70,876 - 91,932 71,269 568 Eastgate 93,3 91,933 - 126,146 Factoria 68,042 126,147 - 199,542 **Neighborhood Areas** 102,616 Newport Somerset **Bellevue City Limits** 126,0 Cougar Mountain// 83,712 Source: U.S. Census Bureau, 2011-2015 American Community Survey. Lakemont Note: Estimates contain margins of error. Differences shown on map may not be statistically significant.

Median Household Income by Census Tract and Neighborhood Area

Figure 27 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Housing Housing Construction by Structure Type Trends



Multi-family Tenure Trends

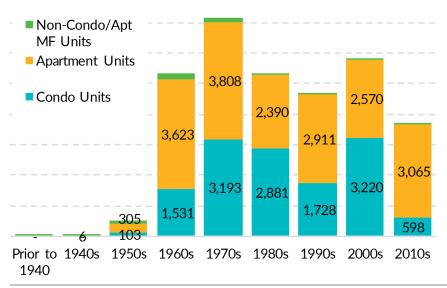


Figure 30 | Source: King County Assessor, Parcel data downloaded November 2017

Housing

Single-family Ownership Housing by Age of Householder in 2016

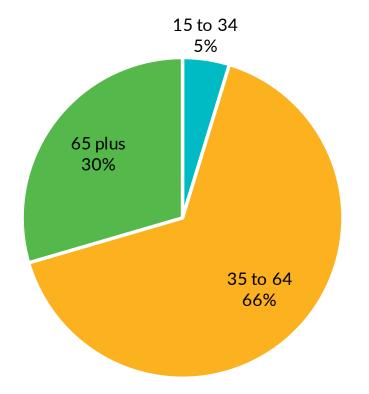
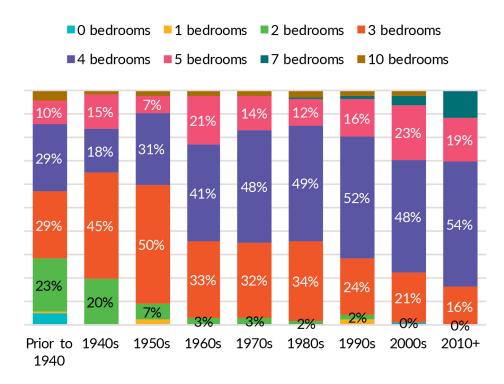


Figure 31 | Source: U.S. Census Bureau, 2016 American Community Survey



Single-family Size Trends

Figure 32 | Source: U.S. Census Bureau, 2011-2015 American Community Survey for Public Use Microdata for PUMA 05210.

Housing

Multi-family Size Trends

O bedrooms 1 bedrooms 2 bedrooms ■ 3 bedrooms ■ 4 bedrooms ■ 10 bedrooms 1% 0% 1% 1% 0% 0% 0% 10% 0% 11% 12% 14% 16% 32% 19% 38% 68% 41% 63% 51% 60% 49% 41% 31% 34% 26% 32% 22% 12% 20% 15% 13% 13% 5% 6% 6% 2% 0% 1990s Prior to 1940s 1950s 1960s 1970s 1980s 2000s 2010+ 1940 Figure 33 | Source: U.S. Census Bureau, 2011-2015 American Community Survey for Public Use Microdata for PUMA 05210.

Percentage of Households Spending 30 percent of more of their Income on Housing by Household Income and Tenure in 2016

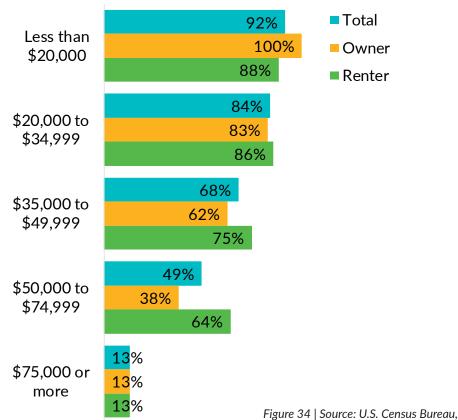


Figure 34 | Source: U.S. Census Bureau, 2016 American Community Survey.

Housing

Households by Monthly Housing Costs, Tenure and Mortgage Status

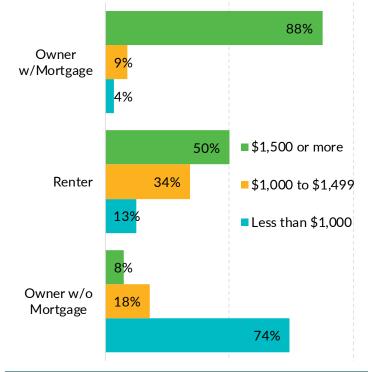


Figure 35 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Percentage of Households Spending 50 Percent or More on Housing in 2011-2015

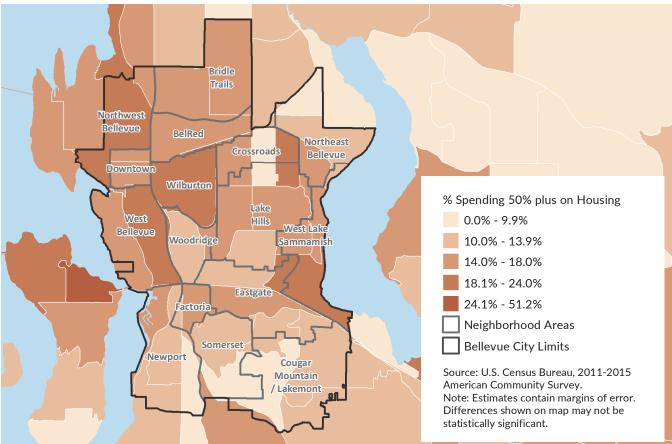


Figure 36 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Household Types

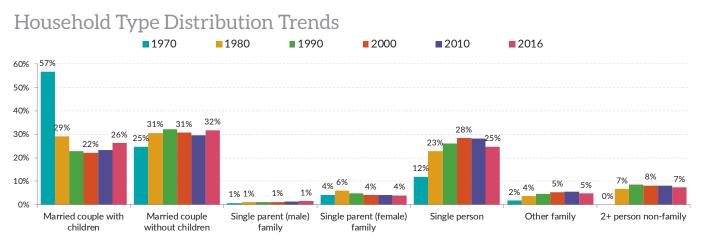


Figure 37 | Source: IPUMS-USA, University of Minnesota, www.ipums.org and U.S. Census Bureau, 2016 American Community Survey.

Household Type Distribution Comparisons

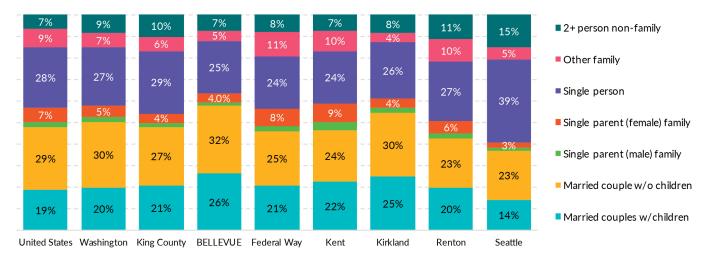


Figure 38 | Source: U.S. Census Bureau, 2016 American Community Survey.

Household Types

Household Type Distribution by Age in 2011-2015

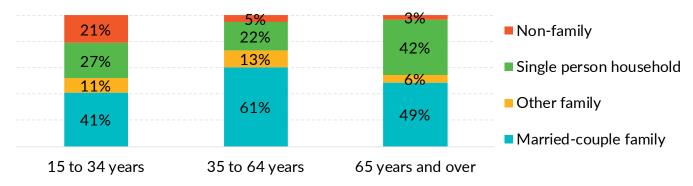


Figure 39 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Household Type Distribution by Race in 2011-2015

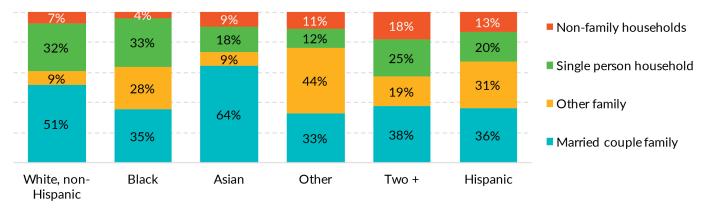


Figure 40 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Household Size - Persons Per Household

Household Size Trends

1970	3	.4
1980	2.6	
1990	2.41	
2000	2.37	
2010	2.41	
2016	2.49	

Figure 41 | Source: IPUMS-USA, University of Minnesota, www.ipums.org and U.S. Census Bureau, 2016 American Community Survey.

Household Size and Occupancy by Structure Type in 2011-2015

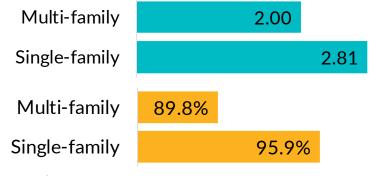


Figure 42 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Household Size Comparisons in 2016

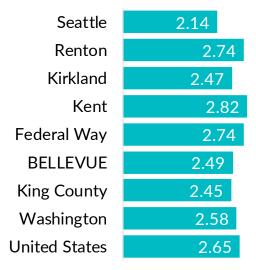


Figure 43 | Source: U.S. Census Bureau, 2016 American Community Survey.

Household Size - Persons Per Household

Household Size by Age

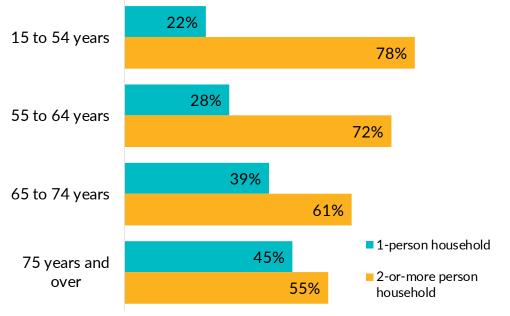


Figure 44 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Average Household Size by Census Tract / Neighborhood Area

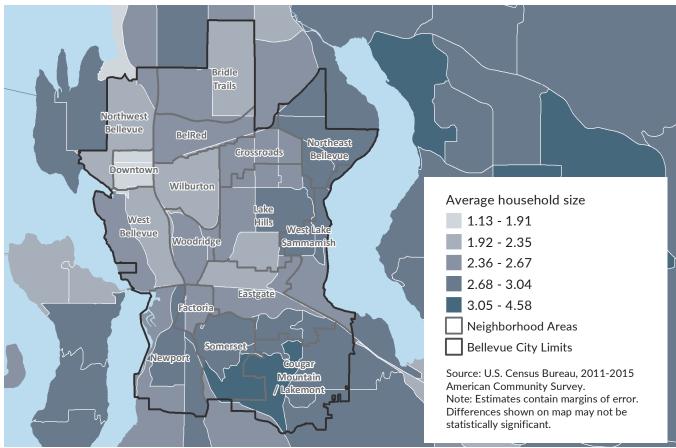


Figure 45 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Population

Growth from natural increase and in-migration Growth from annexation Population _ _ **City Forecast** -60,000 180,000 160,400 160,000 ---50,000 140,700 140,000 122,363 Population Growth per Decade 40,000 120,000 **Total Population** 100,000 86,872 78% 30,000 80,000 21% 61,196 20,000 60,000 48% 40,000 2% 28% 22% 10,000 10% 20,000 5,950 0 0 1970s 1950s 1960s 2010s 1980s 1990s 2000s 2020s 2035

Population Trends and Projections with Annexations

Figure 46 | Source: City of Bellevue Department of Planning and Community Development and Washington State Office of Financial Management.

Population

Population Trends by Place of Birth: Native and Foreign Born

Total Population

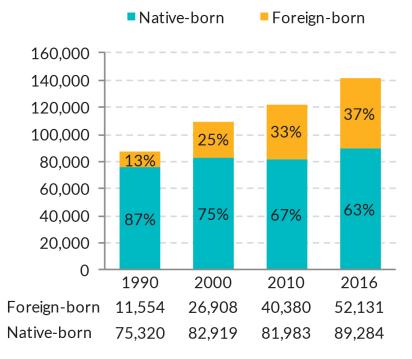
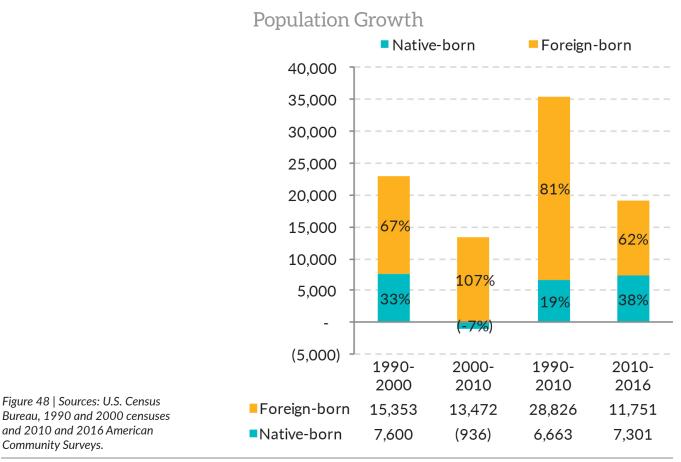


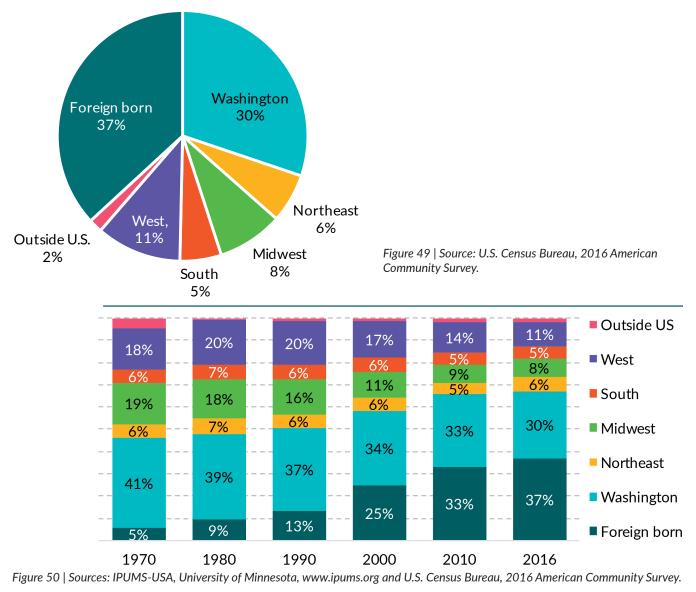
Figure 47 | Sources: U.S. Census Bureau, 1990 and 2000 censuses and 2010 and 2016 American Community Surveys.



Human Services | Bellevue, Washington

Place of Birth

Place of Birth Trends 1970 to 2016





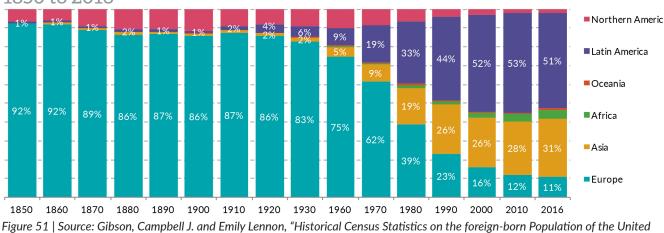
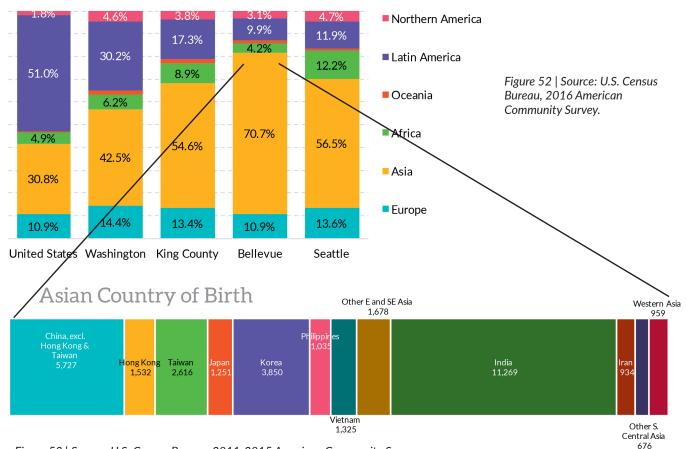


Figure 51 | Source: Gibson, Campbell J. and Emily Lennon, "Historical Census Statistics on the foreign-born Population of the United States: 1850-1990" Population Division, U.S. Census Bureau, February 1999, Population Division Working Paper No. 29 www.census. gov/population/www/documentation/twps0029/twps0029.html

Place of Birth



World Region of Birth Comparisons in 2016

Figure 53 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Language Spoken at Home

Percent of Bellevue Residents Age 5 and Over who Spoke a Language Other than English at Home Trends 1990 to 2016

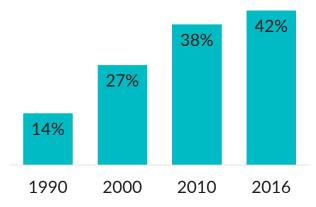


Figure 54 | Sources: U.S. Census Bureau, 1990 and 2000 censuses and 2010 and 2016 American Community Surveys.

Percent who Spoke a Foreign Language Comparisons

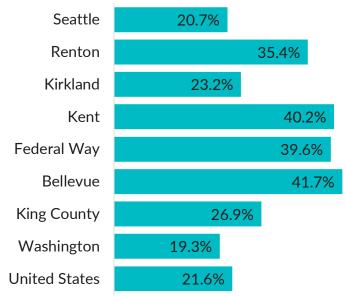


Figure 55 | Source: U.S. Census Bureau, 2016 American Community Surve

Language Spoken at Home

Top Languages Spoken at Home Other than English and Ability to Speak English

LANGUAGE	BELLEVUE CITYWIDE		SPEAK ENGLISH LESS THAN "VERY WELL"	
(Languages recommended for translation materials in orange)	Estimate	Percent of Pop 5 and Over	Estimate	Percent speaking specific lang.
Chinese	11,983	9%	5,945	50%
Spanish or Spanish Creole	7,121	6%	3,451	48%
Other Asian languages	5,204	4%	1,329	26%
Korean	4,260	3%	2,180	51%
Hindi	3,818	3%	838	22%
Russian	2,900	2%	1,305	45%
Japanese	1,862	1%	795	43%
Other Indic languages	1,618	1%	567	35%
Vietnamese	1,431	1%	776	54%
French (incl. Patois, Cajun)	1,340	1%	122	9%
Other Indo-European languages	1,001	1%	379	38%
Tagalog	879	1%	335	38%
Persian	831	1%	414	50%

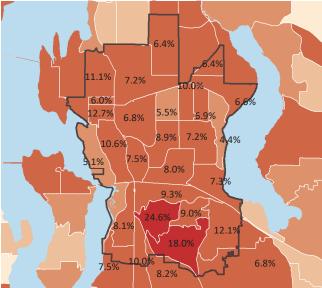
Figure 56 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Trends in the percentage of Bellevue's population 5 and over who speak a language other than English at home and their ability to speak English

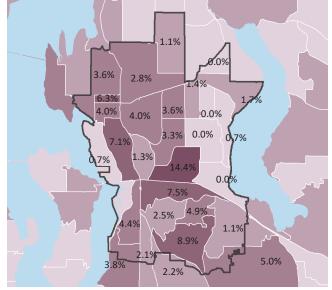
	1990	2000	2010	2016
Percent of population 5 and over that speak a language other than English at home		27%	37.9%	41.7%
Percent of population 5 and over that speak English less than "very well"		6%	14.8%	16.7%
Percent of households that are limited English speaking households (no member over 14 speaks English "very well")		6.8%	8.2%	10.3%

Figure 57 | Sources: U.S. Census Bureau, 1990 and 2000 censuses and 2010 and 2016 American Community Surveys.

Chinese Speaking People



Korean Speaking People



Japanese Speaking People

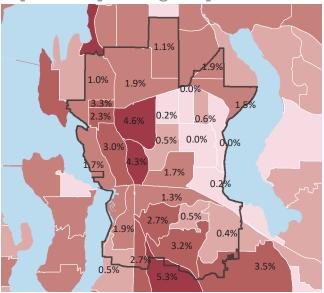
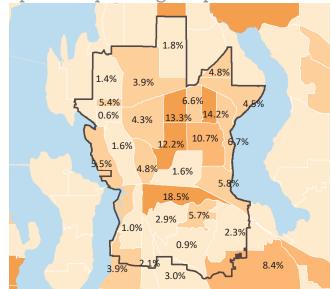
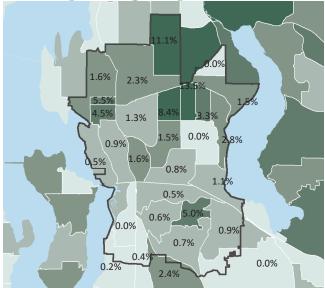


Figure 58-63 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

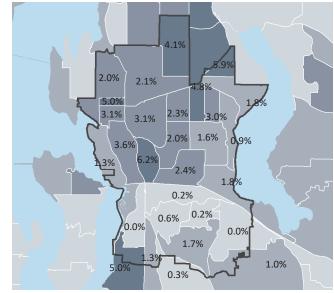
Spanish Speaking People



Hindi Speaking People



Russian Speaking People



Needs Update | 2017-2018

Race and Ethnicity

Race and Ethnicity Distribution Trends

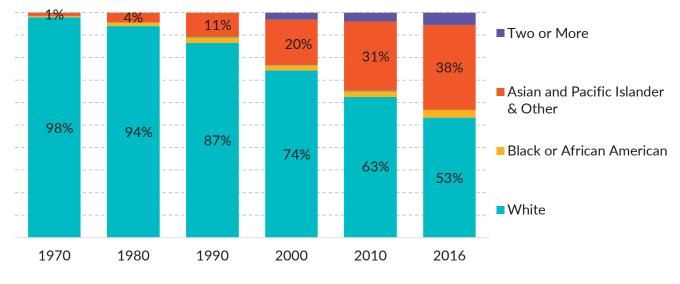


Figure 64 | Sources: IPUMS-USA, University of Minnesota, www.ipums.org and U.S. Census Bureau, 2016 American Community Survey.

Race and Ethnicity Distribution by Geography

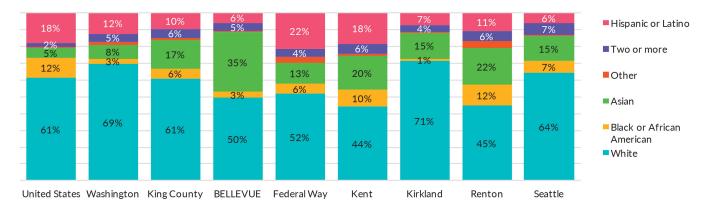


Figure 65 | Source: U.S. Census Bureau, 2016 American Community Survey.

Race and Ethnicity

Percent People of Color by Census Tract and Neighborhood Area

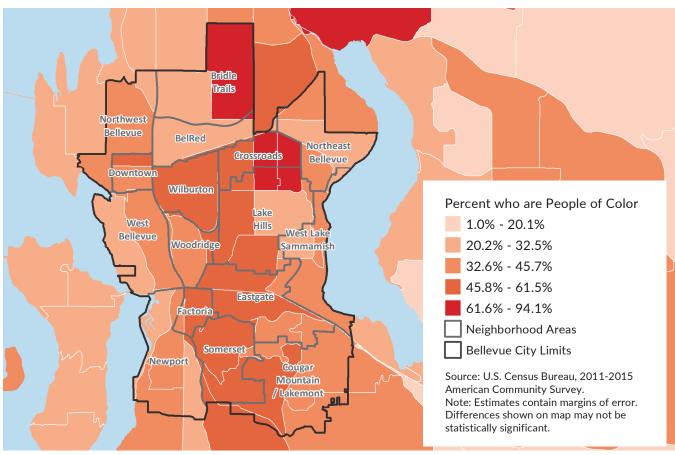
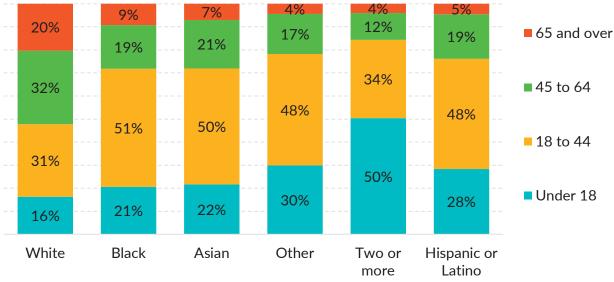


Figure 66 | Source: U.S. Census Bureau, 2011-2015 American Community Survey..

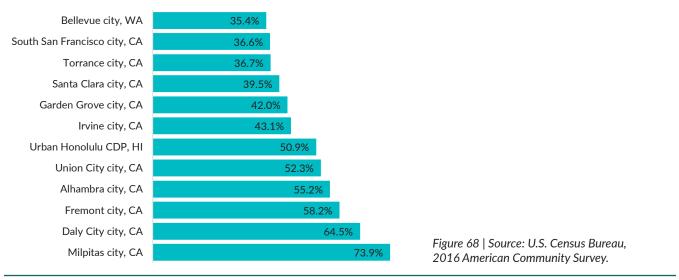


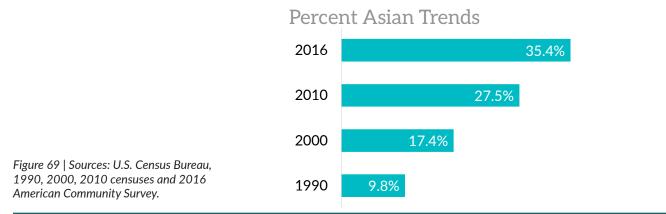
Race and Ethnicity by Age

Figure 67 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Race and Ethnicity

Percent Asian Comparisons





Growth in Bellevue's Most Numerous Asian Populations 1990 to 2016

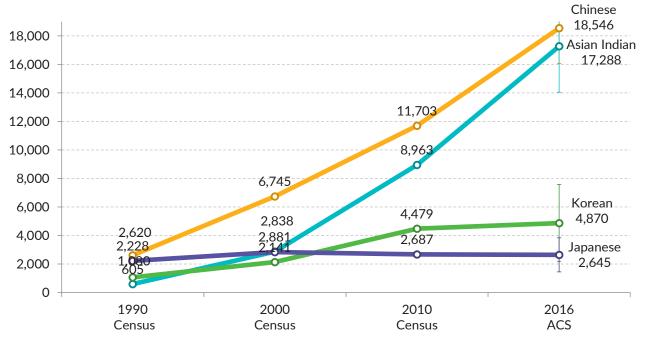


Figure 70 | Sources: U.S. Census Bureau, 1990, 2000, 2010 censuses and 2016 American Community Survey.

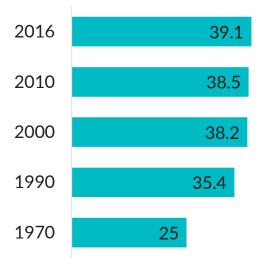
Human Services | Bellevue, Washington

Age

1970 1980 1990 2000 2010 2016 44% .<mark>1%</mark>42% 38%<mark>36%</mark>36% 36% 26%26% 24%25 24%23%23%22% 17% 3%14% 10% Under 20 20 to 44 years 45 to 64 years 65 and older

Age Distribution Trends

Figure 71 | Source: IPUMS-USA, University of Minnesota, www.ipums.org and U.S. Census Bureau, 2016 American Community Survey.



Median Age Trends

Figure 72 | Source: IPUMS-USA, University of Minnesota, www.ipums.org and U.S. Census Bureau, 2016 American Community Survey.



Age Distribution by Geography

Figure 73 | Source: U.S. Census Bureau, 2016 American Community Survey.

Age Age by Gender - Population Pyramid

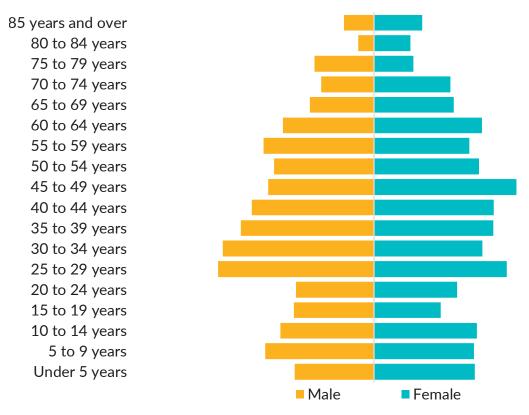


Figure 74 | Source: U.S. Census Bureau, 2016 American Community Survey.

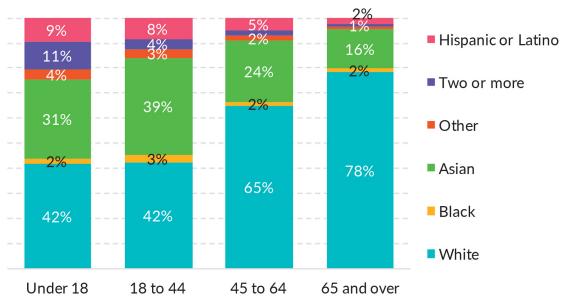
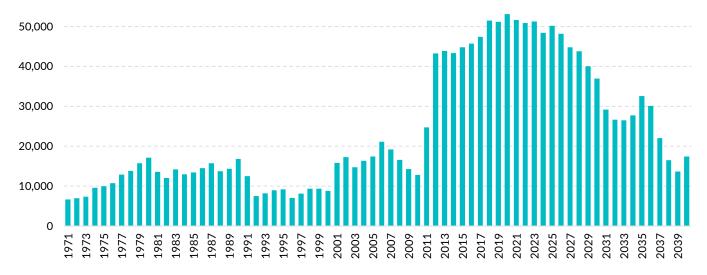


Figure 75 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Age



Projections of Older Adult Population Annual Increase

Figure 76 | Source: Washington State Office of Financial Management, Forecasting and Research Division, State Population Forecast 2010-2040, November 16, 2016.

Children by Census Tract/Neighborhood Area

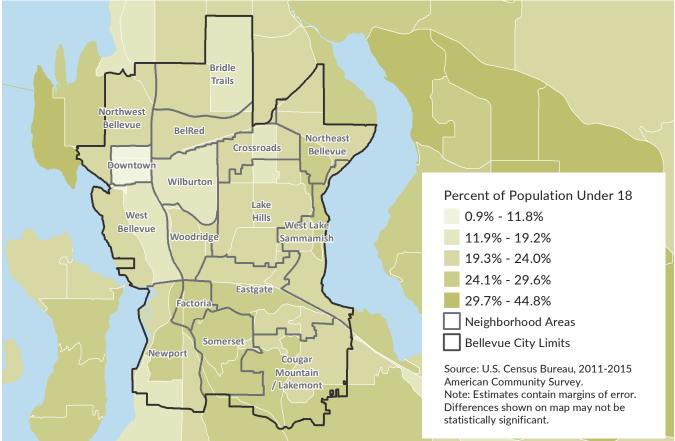


Figure 77 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Older Adults 65 and older by Census Tract/Neighborhood Area

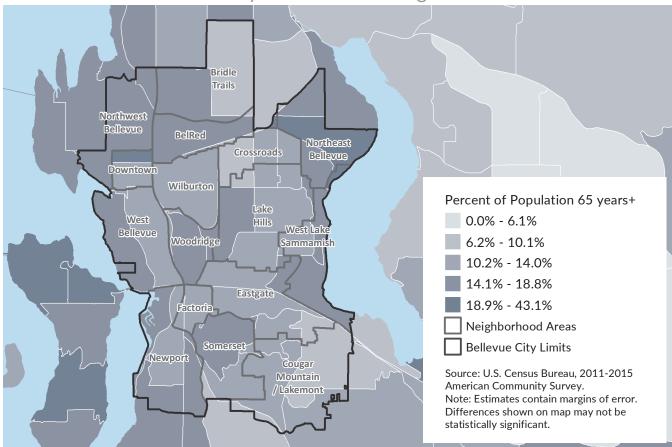


Figure 78 | Source: U.S. Census Bureau, 2011-2015 American Community Survey.

Well-Being and Quality of Life in Bellevue





WELL-BEING AND QUALITY OF LIFE IN BELLEVUE

What conditions need to be present in a community so that everyone can reach their full potential and be able to fully contribute, "give back" to the community? This year residents who participated in the phone/online survey rated their satisfaction with living in Bellevue and also this year were asked a question rating their wellbeing. In many of the Community Conversations, participants commented about the high quality of their lives here. Other departments in the city such as Planning and Community Development through its Neighborhood Outreach Program, the Finance Department, through its Performance Measures and Budget surveys, and Parks and Community Services Department also ask residents their opinions about Bellevue's livability and its health as a city. Uniformly residents give the City high marks.

This section of the Needs Update:

 summarizes key findings from the phone/ online survey and qualitative information from other sources indicating how residents perceive Bellevue's quality of life and their overall well being

- describes other efforts in the city that seek to increase the city's livability during a time of enormous growth and increasing diversity
- details what community issues are of most concern to residents.

Residents' Feelings of Overall Well-Being

A new question was introduced in 2017 to get an overall picture of residents' feelings of well- being. The question text was: "Individual well-being includes your physical and mental or emotional health, your financial stability, and your social relationships. Well-being also includes having access to support systems to help with employment, education, community, and transportation. Keeping all of this in mind, how would you rate your overall well-being compared to one year ago? Use a scale from 0 to 10 where "0" means your well-being is "significantly worse than it was one year ago" and "10" means your well-being is "significantly better than it was one year ago".



Most residents (53%) stated that their overall well-being is roughly the same as it was one year ago and 43 percent stated that their well-being is either somewhat (24%) or significantly (20%) better than it was one year ago.

Percentages are generally similar across all demographic groups.

Understanding the Link Between the Need for Human Services and the Concept of Well-Being

The Frameworks Institute has conducted research on what resonates with people when making the case for the need for human services. Their research indicates that emphasizing the importance to society of supporting overall health and well-being for all, using the value of human potential, is more effective than describing those who need human services as vulnerable and struggling. Using the metaphor of constructing a house, they explain how well-being is built like a structure is built: every building needs a strong foundation and certain materials; building well-being requires community resources, social relationships and opportunities to thrive.¹ They also found that many people understand wellbeing as an individual attribute or attainment focusing on financial success and independence, and believe those who are not doing well do not have the motivation and will power to improve their lives. This notion makes it difficult for many to see that the environment and human systems also play a part in individual behaviors. Using the logic that the more you help people the more dependent they become, people may fail to see how support from the community and systems change can create a better community in which all members can thrive.²

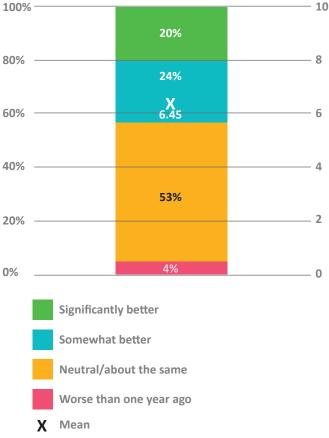


Figure 2: Overall Well-Being Compared to the Previous Year Source: 2017 Phone/Online Survey

Perception of the Quality of Life in Bellevue

- Using a scale of 0 (very poor) to 10 (excellent), residents gave an average rating of 8.33 to describe the livability in Bellevue. This is slightly lower than the 2015 rating, but is not statistically significant. The percentage of residents who gave a scale rating of 9 or 10 was 47% this year, compared to 49% in 2015. Satisfaction was rated good (7 or 8) by 47% of residents in 2013 the same as 2015. This gave an overall satisfaction of 93%, the same as reported in 2015 (96%) and 2013 (96%).
- There were no significant differences in average ratings based on resident characteristics such as age, gender, income or household type.
- Surveys conducted by the City for other purposes also found similar results. For

example, in the 2016 Budget Survey, the majority of respondents (96%) said the quality of life in the city is good to excellent. In the 2017 Performance Survey, 95% of respondents said the quality of life meets or exceeds their expectations, and 94% rated their neighborhood as either an "excellent" or "good" place to live.

 In the 2016 Parks Plan survey, virtually all Bellevue residents have a positive view of the quality of life in the City (95%). In fact, ratings are fairly evenly divided between those that say that quality of life is "excellent" and those that give it a "good" rating. Nearly all Bellevue residents (95%) believe that parks and recreation opportunities in Bellevue positively affect the overall quality of life here: 65% say that these opportunities "greatly enhance" it.

Community Assets

Similar to other years, Bellevue residents identified some of the community's assets in written comments on the consumer surveys and in the Community Conversations. These assets include:

- Diversity, especially in the Crossroads area
- Clean city, including streets and parks
- Safety, low crime rate
- Good social services
- Very good schools
- Community Centers
- Green environment
- Great place for families

Connectedness in Bellevue Communities

It is no surprise that Bellevue has won many awards for its excellence. For example, the National League of Cities issued Bellevue its Cultural Diversity Award in 2015 for adopting a plan to support its growing diversity. Livability. com ranked Bellevue number 14 in its Top 100 Best Places to Live, and 24/7 Wall Street in 2014 ranked Bellevue second among America's 50 best cities in which to live. The City of Bellevue has a number of ongoing efforts to ensure that its residents have a voice in what they need in their communities in order to keep the quality of life as high as it is now. Some of these efforts are described below.

The City's Neighborhood Outreach Program

Bellevue has 16 distinct neighborhood areas with unique histories, character and neighborhood amenities. Neighborhood Outreach works with neighborhood leaders and residents to build up the health, livability and community connections that make Bellevue such a great place to live. The City of Bellevue prioritizes strengthening the quality of life in our neighborhoods through our Neighborhood Outreach programming and services. A few examples include:

Neighborhood Liaisons: Sometimes it helps to have a connection with someone who knows the City, the neighborhoods and the community resources that are available. Neighborhood liaisons are assigned to each of the 16 unique neighborhood areas and provide assistance for resident questions, connection to available resources and support to help strengthen neighborhood associations and improve City responsiveness to neighborhood concerns.

Mini-City Hall: Since 1997, the Crossroads Mini City Hall (MCH) has become an information and service hub for east Bellevue residents. Located in the Crossroads Shopping Center, MCH is open six days a week with team of staff and volunteers who speak 10 languages, including Spanish, Chinese, Russian, Korean and Arabic. MCH provides information about city programs and services and partners with many non-profit organizations and public agencies to bring needed services to Bellevue residents in the areas of human services, employment, health care, interpretation and civic engagement.

In addition to providing information about City programs and services, MCH partners with non-

profits and public agencies. These partnerships bring needed services to Bellevue residents in the areas of human services, employment, health care, etc.

Building Community: The NeighborLink Program, which began in 2009, was designed to bring neighbors together in a spirit of community, service and celebration, encouraging and supporting neighborhood efforts that build healthy, lasting connections. Neighbors who know one another, are involved in their community and the city at large, and make a difference to improve the quality of life and safety for all of their residents. The NeighborLink Program provides support for neighborhood gatherings, including promotional banners, Mariner tickets, road closures and coordination with Bellevue Fire, Emergency Preparedness, and Bellevue Police for neighborhood safety.

Bellevue's Cultural Conversations is a

partnership between a diverse group of women in the community and the City of Bellevue. It was initiated by women who had a desire to get better connected with their community and who wanted to enhance their knowledge and understanding of different cultural practices and world views. The group meets approximately every six weeks from September to May.

Neighborhood Improvements: The

Neighborhood Match program partners with neighborhoods on enhancement projects such as entry signs, landscaping and art projects. Neighborhood Match provides matching grants up to \$10,000 for smallscale neighborhood improvements. Neighbors provide in-kind donations, cash, professional services, building materials, and volunteer labor. The Neighborhood Enhancement Program provides citywide investment for modest-sized community-driven neighborhood improvement projects. For the past 20 years, the Neighborhood Enhancement program has funded hundreds of local improvement projects in Bellevue neighborhoods that have beautified the city and enhanced its livability.

Neighborhood Forums: Throughout the year, Neighborhood Outreach provides workshops and forums to deepen our understanding and community conversation on the major issues that impact our lives. Each forum provides avenues to learn more and action steps that we can take to strengthen the health and vitality of our neighborhoods. Neighborhood Outreach also hosts semi-annual Neighborhood Leadership Gatherings to respond to emerging neighborhood concerns and identify neighborhood priorities.

Bellevue Essentials: This nine-week leadership class provides an overview of the inner workings of city government. Interactive classes cover Bellevue history, diversity, parks, neighborhoods, planning, finances, utilities, transportation and more. This onramp for emerging leaders helps develop leaders for broader public service and will provide knowledge, skills and community connections that are helpful for effective civic engagement.

Neighborhood Mediation: Need some help with a conflict? The Bellevue Mediation Program may be able to help you. Many people who work or live in the City of Bellevue call us to help them resolve their conflicts through a continuum of free and confidential services. Help can be provided with conflicts involving: Neighbors, Elders, Parents and Teens, Businesses and consumers, Groups and organizations, Foreclosure, Landlords and Tenants.

Downtown Livability Initiative

The Downtown Livability initiative is a targeted review of regulations that guide development and land use activity within Downtown Bellevue. As the City readies itself for upcoming development cycles, this will be the most extensive Code update since the adoption of the original Downtown Land Use Code in 1981. Begun in late 2012, the project included a 15-person Advisory Committee (a mix of City board and commission members and community representatives) to develop recommendations relating to topics such as building height and form, desired public amenities, pedestrian circulation, public open space, parking, and allowed uses. The objectives are to: better achieve the vision for Downtown Bellevue as a vibrant. mixed-use center: enhance the pedestrian experience; improve the area as a residential setting; enhance identity and character; and integrate elements from the companion transportation plan update and East Link design work. Downtown Bellevue is becoming an exciting place to work, shop, visit, or call home. It is also very important to the entire City from a growth and development perspective. The Planning Commission held its last meeting on the Downtown Livability Initiative on May 24, 2017. The Planning Commission's land use code amendment package has been transmitted to City Council for their review.

Diversity Advantage Plan: Bellevue Welcomes the World. Our Diversity is Our Strength

The City of Bellevue recognizes our diversity as an asset; it provides our economy with a competitive advantage, enriches our culture, enhances our arts, broadens our educational experience and provides new leadership and perspective to help our community thrive. The city reflects an attractive and interesting mix of cultures and backgrounds which has profoundly shaped Bellevue's identity, bringing both opportunities and new gifts, to our diverse community.

Bellevue's Diversity Advantage Plan was formally adopted by City Council in 2014. The plan developed as a result of two years of gathering input through four open community forums, discussions with community leaders, a review of similar efforts in surrounding municipalities, and research on best practices informed the plan. Some of the work accomplished in 2016-17 includes:

Building capacity through opportunity and shared leadership:

- Volunteer Bridge Pilot Program: participants from 16 countries took a four week course to learn about volunteerism in the U.S., what opportunities exist, and how they can get involved;
- Bellevue Diversity Advisory Network: BDAN is a community network that provides support and advice on ways to improve the city's ability to communicate, collaborate and better serve Bellevue's diverse communities.
- Diversity Liaisons is a cross-departmental team that serve as departmental resources in advancing the diversity initiative. They identify and develop programing and citywide events ensuring city staff are engaged and informed on issues related to diversity, equity and inclusion.

Development & Training: Cultural Competence Foundational Trainings is required for all city staff and to date, 40% of full time staff have undergone training. Other trainings include implicit bias awareness and departmental visioning workshops on historical and institutional inequities. 33 city staff also attended a two-day training on Courageous Conversations on Race. Two trainings were sponsored for human services providers who serve Bellevue/East King County residents.

Community partnerships and events: The

city continues to foster working relationships with organizations like Leadership Eastside and the Eastside Refugee and Immigrant Coalition. Notable community-partnered events include Welcoming Week activities, Martin Luther King Celebration, Bellevue College Power of One and LBGTQ Conference.

City-wide initiatives:

• The Talent Hiring Initiative, a partnership with Human Resources, enhances equitable city processes in its recruitment, hiring and retention practices. This initiative includes the Supported Employment program, which provides employment opportunities for individuals living with a disability to work with a job coach and obtain employment with the city.

• The Procurement Diversity Inclusion program, a partnership with Finance, ensures inclusion and opportunity for small business enterprises (SBE) and Women and Minority business enterprises (MWBE) in city procurement and contracting.

Communication: Language Access

The city's linguistic diversity and efforts to provide exceptional customer service required a variety of translation and interpretation tools and resources that are accessible for all staff to assist all customers. The city also installed hearing loop systems in Council chambers, Council conference room, and the Bellevue Youth Theatre. Additional plans for expansion to other facilities are underway.

Public Safety: Police and Fire have enhanced outreach to vulnerable populations. For emergency services, the Fire department has conducted extensive outreach and workshops called Community Emergency Response Team (CERT) program. BPD has developed community advisory boards for Latino/a, Black/African American, Asian Pacific Islander, Muslim, LGBTQIA, and interfaith communities. Both departments have also bolstered recruiting efforts to diverse populations to better match the communities they serve.

Economic Development: Various projects have been completed including signage in Chinese for Global Innovation Exchange (GIX), development of Startup425 for small business development services, and expansion of these workshops.

Perception of Safety in Neighborhoods and Downtown

According to the 2015 Bellevue Police Department Annual Report, keeping with the trend of previous years, responses shifted from "very safe" to simply "safe"-significantly for walking downtown during the day and walking alone in general. Very few respondents report feeling "unsafe" when walking alone in Bellevue during daylight hours. In the 2015 City Performance Measures Survey Report, Cougar Mountain/Lakemont, Downtown and Northwest Bellevue neighborhoods are rated as the safest in general. Cougar Mountain/ Lakemont is also rated as the safest neighborhood after dark. In 2015, 78% of survey respondents rated "walking alone in the downtown business area after dark" as very safe down from 86% in 2014. In the same survey, in 2015, eight out of ten (88%) of residents who had contact with the police reported a positive experience with half saying the contact was excellent. This was similar to 2014 results.

Perception of Community Problem Areas in Bellevue

In the phone/online survey, respondents rated 24 potential problem areas as to whether they felt these were problems for individuals and families in the community. When interpreting

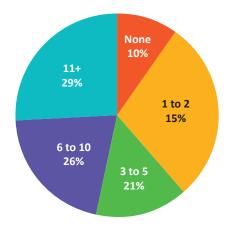


Figure 3: Number of Major/Moderate Problems Perceived in the Community in 2017 Source: 2017 Phone/Online Survey

these ratings it is important to note that these reflect people's perceptions and not necessarily actual prevalence of problems. A variety of factors (e.g. local or national media attention, positive or negative personal experiences) may affect respondents' ratings. Additionally, the term "your community" was not defined in the survey, and how respondents' interpretation of this phrase likely varied.

As shown in Figure 3, the majority of phone/ online survey respondents in 2017 (54%) rated at least 5 of the 24 problems mentioned as moderate or major in the community. This is similar to 2015 results when 53% rated 5 or more moderate or major problems in the community. Twenty nine percent of respondents felt there were more than 11 moderate or major problems in their community the same as in 2015. Overall, respondents identified an average of 7.5 issues as major or moderate problems for their community. This is similar to 2015 (8.1) and significantly lower than the 2011 average of 10.0 major/moderate problems when the postrecession economy was still recovering.

For 23 out of 24 potential problems, the majority (50% or more) indicate that the issue is either not a problem at all, or only a minor problem in their community. The only exception to this is lack of affordable housing—77 percent say that this is a major (46%) or moderate (31%) problem that gathered the most major/moderate ratings. This is a significant increase when compared to the 68 percent received in 2015. Since 1999, lack of affordable housing has been ranked as the top problem within the first tier. Violence in the community gathered the lowest share of major/ moderate ratings (15%) though this increased significantly compared to 2015 (10%).

Analysis of this year's results parallels analysis performed in previous years. The percentages of major/moderate problem ratings were divided into three levels of severity. Problems assigned to the Top Tier level were those that gathered at least 30 percent of all residents' major/moderate ratings, Second Tier problems achieved 20 percent up to 30 percent of major/moderate problem ratings and Third Tier were those that gathered less than a 20 percent share of these ratings.

This year twelve issues were Top Tier problems:

- Lack of affordable housing—77% Total (46% Major / 31% Moderate)
- Lack of affordable medical insurance—45% Total (16% Major / 29% Moderate)
- Lack of affordable child care—44% Total (16% Major / 27% Moderate)
- Having jobs that do not pay enough for the basics—44% Total (13% Major / 31% Moderate)
- Lack of affordable medical care—42% Total (14% Major / 28% Moderate)
- Inadequate public transportation—39% Total (15% Major / 24% Moderate)
- Lack of affordable dental care—36% Total (9% Major / 27% Moderate)
- Homelessness—34% Total (12% Major / 23% Moderate)
- Drug abuse—33% Total (10% Major / 23% Moderate)
- Lack of affordable legal services—30% Total (7% Major / 23% Moderate)
- Lack of money for basic services—30% Total (7% Major / 23% Moderate)
- Mental illness or emotional problems—30% Total (8% Major / 21% Moderate)

Seven problems have placed in the Top Tier of problems in every survey since 2003. Six of the seven relate to the **affordability of living in Bellevue**: lack of affordable housing, lack of affordable medical insurance, lack of affordable child care, having jobs that do not pay enough for the basics, lack of affordable medical care, and lack of affordable dental care.

Of the 24 items considered in the survey, only two items had decreases of five points or more in the combined percentage of percentage of major/ moderate problem ratings from the 2013 survey.

- Unemployment-down 7 percentage points from 2015 (20% from 27%)— significant decrease
- People not speaking or understanding English well enough to function in society– down 5 percentage points from 2015 (21% from 26%)

Nine of the 24 items considered in the survey had increases of five percentage points or more in the combined percentage of major/moderate problem ratings from the 2013 survey.

- Lack of affordable medical insurance-up 10 percentage points from 2015 (45% from 35%)—significant increase
- Lack of affordable housing-up 9 percentage points from 2015 (77% from 68%) significant increase
- Lack of affordable medical care-up 7 percentage points from 2015 (42% from 35%)—significant increase
- Lack of money for basic services-up 7 percentage points from 2015 (30% from 23%)—significant increase
- Racial or ethnic discrimination-up 7 percentage points from 2015 (24% from 17%)-significant increase
- *Drug abuse*-up 7 percentage points from 2015 (33% from 26%)
- Lack of affordable legal services-up 5 percentage points from 2015 (30% from 25%)
- Lack of services for elderly persons-up 5 percentage points from 2015 (29% from 24%)
- Violence in the communityup 5 percentage points from 2015 (15% from 10%)

Historically, two other top tier community problems, *lack of affordable medical insurance and* lack of affordable medical care, have had as many as half or more of respondents rating them as major/ moderate problems. However that trend began to change in 2013 and continued in 2015: lack of affordable insurance was rated as a major/moderate community problem by 41% of respondents in 2013 and dropped to 35% in 2015. However, in 2017. ratings for those two problem areas increased. One can speculate that this increase may be due to the fact that medical premiums and deductibles have increased for some people who purchase insurance through the State Health Care Exchange if they don't have health insurance through an employer. With pending changes to federal health care laws, this will be an important trend to monitor over the next two years.

(Note: A detailed table of community problem areas listed in descending order by rating and a trend chart showing ratings since 2005 is included in Appendix A.)

Perception of Community Members' Accessibility to Services

As shown in Figure 5, the vast majority (71%), of the 2017 phone/online survey respondents, believes that people in their community have adequate access to services. This is comparable to 2015 findings.

Percentage of Respondents Rating 'Lack of Affordable Housing' a Moderate or Major Problem

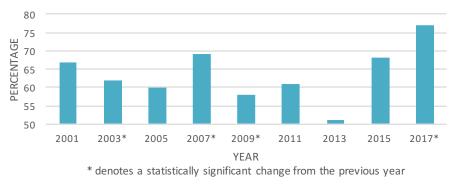


Figure 4: Percentage of Respondents Rating Lack of Affordable Housing a Moderate/Major Problem | Source: 2017 Phone/Online Survey

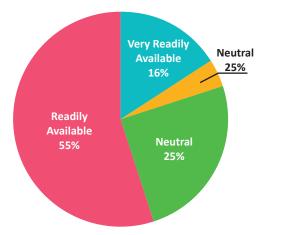


Figure 5: Availability of Human Services Needs in Bellevue | Source: 2017 Phone/Online Survey

The 7% of respondents indicating there is inadequate access were asked what services they believe people have difficulty accessing. The top mentions are listed below:

- Affordable housing 21 comments
- Transportation-17 comments
- Health/dental care/insurance-15 comments
- Housing services-13 comments
- Counseling/mental health-12 comments
- Lack of information-9 comments
- Shelter for the homeless-9 comments
- Access to food-7 comments
- Recreational services-6 comments
- Drug/alcohol addiction-5 comments

Groups of Residents That Tend to Perceive More Problems in the Community

Overall, residents identified an average of 7.5 issues as major or moderate problems for their community. This similar to the 2015 average of 8.1 major/moderate problems.

Analysis of 2017 results found segments of residents who differed significantly from others

in the average number of community issues that they rated as major or moderate problems. The segments can be described in the following ways:

- **By Gender** Females rated an average of 9.0 community issues as major or moderate problems, significantly more than males (5.9 problems).
- **By Age** The older the residents, the more problems they rated as major or moderate problems.
 - Residents age 55 and older rated anaverage of 9.3 potential problems as major or moderate problems in their community, significantly more than residents age 18 to 34 (5.4 major/ moder ate problems) or those age 35 to 54 (7.5).
- Length of time living in Bellevue Residents who have lived in Bellevue for 10 or more years have a significantly higher number of issues rated as major or moderate (8.9) when compared to those living in Bellevue for less than 10 years (6.0).
- Race Residents who are white alone (non-Hispanic) indicated an average of 8.1 major/ moderate problems in their community, whereas non-white residents or those of mixed race indicated an average of 6.5 major/moderate problems.
- Primary language spoken at home Residents who primarily speak English at home indicated an average of 8.0 major/ moderate problems in their community compared to 6.0 major/moderate problems for those who speak a language other than English at home.
- **By immigration Status** Residents who have immigrated in the past 10 years indicated significantly fewer community problems than otherresidents—5.7 vs. 7.9 major/moderate problems, respectively.

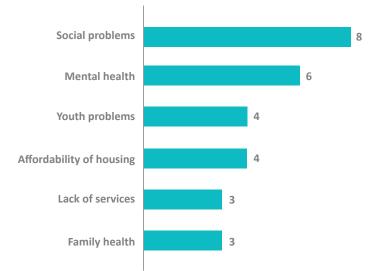


Figure 6: List of Other Unaddressed Human Services Issues

Other Problem Areas Perceived to Exist in the Community

Since 2001, an increasing number of respondents reported that there were no other problems in the community than those listed in the survey. In 2001, 73% reported that there were no other problems, and in 2003, 2005, 2007 and 2009 roughly 80% stated this. When asked this same question in 2011, only 52% said there were no other problems, and 32% stated that they "didn't know." In 2013, 84% answered either "no" (35%) or they said they were "unsure" (49%). This trend continued in 2015 as well: 86% answered either "no" (77%) or "unsure": (8%). In 2017, 90% of respondents answered either "no" (88%) or unsure (2%) to this question. Table 6 provides counts for the number of mentions each category of unaddressed human service issues.

Implications

 As data from the phone/online survey indicates, problems with affordability of living in Bellevue continues to be the top issue, probably driven in part to increasing rent and mortgage costs.

- The availability of adequate public transit continues to be a key problem in the community. Most of the top tier community problems are also household problems related to the cost of living-unaffordability of housing, childcare, dental insurance, medical care/insurance combined with the lack of jobs that pay enough for the basics. In other words, costs are going up while wages continue to stagnate.
- Interestingly, though there are a number of household and community problems listed by residents in the survey, most residents (53%) report on the question related to well-being that this is the same for them as last year and 44% stated that their well-being has improved. It is difficult to speculate why this occurred but perhaps the other amenities and advantages that are present in Bellevue mitigate the fact that the cost of living is a challenge.

"None of us can build a house alone. And we all know the challenges that come with owning a house, especially after a storm. People can be hit by storms, too, like graduating from college and looking for a job at the beginning of a recession. At some points in your life, you or someone you know will need human services for the sake of their well-being."

> — Ilsa Flanagan, Reframing Initiative, National Human Services Assembly

Endnotes

- 1. National Human Services Assembly, 2016.
- 2. "Handed to Them on a Plate", Frameworks Institute, 2013.

Special Focus Areas: Homelessness and Heroin & Prescription Opioids





Homelessness System, Services and Needs in King County, Bellevue and East King County

Homelessness Response:

- Emergency & Winter Shelters
- Day & Drop-in Centers
- Outreach
- Permanent Supportive & Supportive Housing

All Home goals are to make homelessness rare, eliminate racial disparities, make it a brief and one-time occurance.

873 homeless students in EKG or 12% of the total number of homeless students in King County

Over 1,200 men, women and children received temporary shelter in EKC

SPECIAL FOCUS AREA: HOMELESSNESS SYSTEM, SERVICES AND NEEDS IN KING COUNTY, BELLEVUE AND EAST KING COUNTY

Homelessness continues to be a crisis in King County. So much so that in November 2015, County Executive Dow Constantine declared homelessness a state of emergency.¹ Over the past several years, the number of unsheltered people have steadily and visibly increased on the Eastside as well, a sub-region that many King County residents would be surprised to find single adults, children and families and youth living on the streets, in vehicles

and in shelters. In 2015-16, over 1,200 men, women and children received temporary shelter and other services from a variety of agencies in East King County located throughout the major cities. For

example, during the winter of 2016-2017, the men's winter shelter in Bellevue served a total of 429 unduplicated men, the shelter for women served 192 women and the winter shelter for families served 137 adults and 182 children all increases compared to previous years.²

This Special Focus Area of the 2017-2018 Human Services Needs Update provides:

- Root causes of homelessness
- Bellevue's approach to addressing homelessness
- Preventing homelessness
- An overview of All Home, the lead organization in Seattle and King County in coordinating the work to respond to homelessness and its root causes

- Data trends
- Services currently available for people experiencing homelessness
- Implications/Gaps

Root Causes of Homelessness

Though studies support that the main root cause of homelessness is poverty, there are also several recent trends that contribute to people becoming homeless.

Affordable rental housing, is in short supply with often a long waiting list, often years, for public housing units. Another trend is the lack of living wage jobs. It is estimated that between 10% and 20% of the population experiencing homelessness is employed but minimum wage jobs don't pay for the cost of an apartment, particularly in the Seattle and East King County area. While King County is economically vibrant and experiencing growth, income inequality and the ability of families living in poverty to maintain housing stability is strained. The recession which began in December 2007 and ended in June 2009 also significantly reduced federal funding for affordable housing and homeless programs.³ Other issues that contribute to a person becoming homeless include:

- Catastrophic medical events resulting in large bills combined with limited or no health insurance
- Mental illness that often decreases employment options and ability to take care of one's self
- Substance Use Disorder, especially relevant due to the recent Heroin and Opioid Crisis
- Domestic Violence
- Traumatic Brain injury or PTSD experienced by returning veterans
- Foster children who "age out" of the child welfare system and at age 18 have no family or other supports to help them transition into adulthood
- LGBTQ youth whose parents who are not supportive of their gender choices⁴

Another lens by which to look at the what causes homelessness is providing what is needed to ensure that all residents have equal access to opportunity including:

- Good Health (physical and mental)
- Housing
- Education
- Employment
- Transportation
- Social Connections

Bellevue's approach to addressing homelessness

Working together with other eastside jurisdictions and agencies, our community provides a wide network of services to support individuals experiencing homelessness. The City of Bellevue has undertaken a comprehensive approach toward homelessness and is guided by a commitment to compassion and pragmatism, with the focus on preventing individuals from becoming homeless, transitioning individuals out of homelessness while maintaining our commitment to enforce current codes. This approach requires a high level of coordination between services, facilities, policies and enforcement.

In partnership with local community providers, the system of response to homelessness in Bellevue falls broadly into these categories:

- Services to prevent homelessness basic needs provision, emergency financial assistance, counseling and treatment programs, medical care, employment opportunities, affordable housing;
- Services for individuals experiencing homelessness –mental health resources, job retraining programs, housing assistance, and addiction treatment and counseling; life coaching, etc.;
- Facilities for individuals experiencing homeless – includes day centers, shelters, and other facilities where homeless individuals can not only sleep, but keep belongings, meet with case managers, and focus on addressing underlying issues that may have contributed to their situation; and
- Enforcement response to behaviors and activities that don't comply with existing city rules and regulations. This would include police and code enforcement response to unauthorized encampments on private or city-owned property, as well as any criminal activity.

Prevention: What are best practices?

Research indicates that some of the best practices to prevent homelessness include the following components:

- Jobs that pay a livable wage, and job training and education that helps workers move up the wage and job ladder;
- Economic development to create a wider range of opportunities for living wage jobs, including those that do not require advanced college degrees;

- Preservation and creation of more affordable housing that takes into account family income as rents and other basic needs increase;
- Affordable, quality childcare so that parents can work knowing that their children are well taken care of;
- Access to assistance that already exists such tax credits and utilizes rebates for lowincome people that frees up more of their limited income for housing;
- Access to transportation to maintain employment and needed services;
- Elimination of racial disparities by promoting equity and social justice in funding and program design;
- Healthcare that provides for both mental and physical health services;
- Access to emergency assistance for times of crisis, such as financial help to prevent eviction, legal aid for those who have had past criminal histories.⁵

All Home (formerly The Committee to End Homelessness)

History

- In 2005 the Committee to End Homelessness was formed in King County, and adopted a 10-Year Plan to End Homelessness (2005-2015). These plans were promoted by the Federal Government and eventually required by Washington State. King County's plan focused on preventing homelessness, coordinating countywide, building political will, securing 9,500 units of housing, providing culturally competent services, and measuring progress.
- The plan set an aspirational goal for the community. Over the past decade, the community responded with unprecedented partnerships and results. Nearly 40,000 people exited homelessness for stable housing, and 85 percent stabilized in that

housing for at least two years. More than 5,700 units of housing were secured, and Seattle/King County now has the third most housing for the homeless in the nation.⁶

- Innovative public/private partnerships were developed, including the Campaign to End Chronic Homelessness, Landlord Liaison Project, Family Homelessness Initiative, and the Homeless Youth and Young Adult Initiative. Funding has increased through state and local levies, businesses, faith communities, nonprofits, local governments, and people experiencing homelessness came together to address the crisis of homelessness.
- In July 2015, King County, the cities of Seattle and Bellevue, Sound Cities Association, and United Way all endorsed a new 4-year homelessness

strategic plan.⁷ The effort, renamed **All** Home, includes more than 500 stakeholders-people experiencing homelessness, nonprofits, businesses, faith leaders, and residents. Their goals are to make homelessness in King County rare, to eliminate racial disparities, and, if one becomes homeless, to make it a brief and one-time

OCCURRENCE ONLY.⁸ The plan fulfills federal and state requirements that local jurisdictions must have a community plan for addressing homelessness. All Home is the U.S. Department of Housing and Urban Development designated Continuum of Care for the Seattle/King County area, and King County receives State Consolidated Homeless Grant funding from Washington State. The governance structure for All Home includes a Coordinating Board, Funders Alignment Committee, Consumer Advisory Council, System Performance Committee and Coordinated Entry Policy Committee. In addition, there are three affinity groups composed of providers and funders that focus on three population groups: Families, Youth and Young Adults, and Single Adults and Veterans. Each has its own Strategic Plan that corresponds to the overarching All Home Strategic Plan.⁹

All Home Homeless Response System for King County

All Home's vision of a homeless response system focuses on the principles of Housing First and Racial Equity. Housing First is a homeless system orientation designed to return people experiencing homelessness to housing as quickly as possible without a housing readiness test or other conditions to entering housing. Racial Equity is a core component of the system because people of color are disproportionally represented among the numbers of people experiencing homelessness.

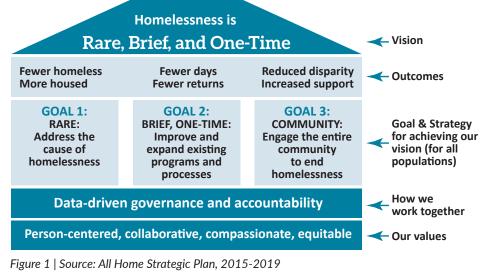
The response system has the following components:

• Core component of All Home is **Coordinated Entry for All (CEA)**. CEA is the access point for which people who are experiencing homelessness are assessed for and connected to homeless housing resources. The purpose of a coordinated entry system is to ensure that all people have a fair and equal access and are quickly identified, assessed for and connected to housing or homeless assistance based on their strengths and needs. A common assessment tool, the Housing Triage Assessment, is used; participants' vulnerability scores place them in "bands" that determine if they are eligible for services including housing. Higher scores indicate the person is more vulnerable and is more likely to be placed in permanent supportive housing.

- Reducing the number of people who experience homelessness by targeting
 Prevention resources: Homeless prevention strategies assist households in resolving a housing crisis that would otherwise result in homelessness.
- Reducing the number of people who need emergency shelter by utilizing
 Diversion strategies: Diversion services target households that are requesting entry into shelter or housing and have not yet accessed homeless services.
 Diversion services assist households to identify immediate, alternative housing arrangements and, if necessary connect them with services and financial assistance to help them obtain or return to housing.
- Providing immediate safety and a pathway to housing through Emergency Shelter: Emergency shelters offer temporary housing to people living outside or in

their vehicles to ensure their safety as well as allow them an opportunity to connect with needed, available resources, such as mental health counseling, and be assessed for





2017					
	UNSHELTERED		SHELTERED		
Region	%	n	%	n	
East County	5%	284	6%	347	
North County	1%	53	2%	148	
Northeast County	2%	119	1%	47	
Seattle	70%	3,857	76%	4,665	
Southwest County	20%	1,102	15%	915	
Southeast County	1%	70	1%	36	
TOTAL	100%	5,485	100%	6,158	

Figure 2 | Source: Seattle-King County Count Us in Report 2017

permanent supportive housing.

- Transitional Housing is a time-limited intervention to provide assistance to households experiencing homelessness who need more intensive and deeper levels of support service to attain permanent housing. Emphasis is still placed on rapid exit to permanent housing, but lengths of stay are flexible and tailored to the unique needs of each household.
- Increasing the number of people who rapidly exit homelessness into permanent housing. Permanent Supportive Housing provides non-time limited housing for individuals with a disability or conditions that created multiple and serious ongoing barriers to housing stability. Tenant are offered flexible, long-term array of comprehensive service, mostly onsite, to maintain housing. Permanent Housing with Supports is non-time limited affordable housing for households experiencing homelessness with high to medium levels of service need. Tenant holds a rental agreement, with individualized services offered to support the household to maintain housing stability.
- Increasing the number of people who exit to permanent housing by maximizing Rapid Re-Housing: Rapid Re-Housing is an intervention designed to help individuals and families to quickly exit homelessness and return to permanent housing. Rapid re-housing assistance is offered without

preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are tailored to the unique needs of the household. These can include help paying for housing with a subsidy and/or helping someone find employment to have more income to pay for housing.

Services Available for People Experiencing Homelessness Data Trends

Count Us In (One Night Count)

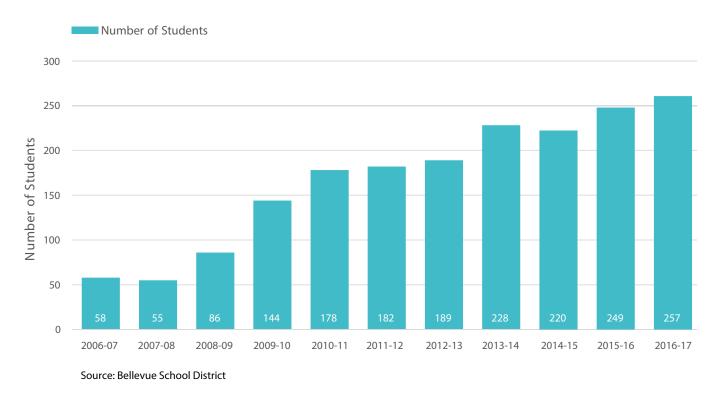
Since 1980, the Seattle/King County Coalition on Homelessness had been the lead agency in conducting a point in time count in January of people experiencing homelessness in Seattle/King County to provide a snapshot of the problem and track trends over time. These findings must be included in the annual Continuum of Care funding application to the U.S. Department of Housing and Urban Development (HUD). In 2017 All Home, the lead agency for the Seattle/King County Continuum of Care, worked with Applied Survey Research implementing new data collection methods. The methodology was changed to include several elements that would improve the quality of the data, such as counting all census tracks instead of already known locations, and including a samplebased qualitative survey including shelter and service locations. The count conducted in January 2017 found a total of 11,643; 47% (5,485) were sleeping unsheltered on the street, in cars or RVs, tents or in abandoned buildings and 53% (6,158) were sheltered in emergency shelters and transitional housing as Figure 2 shows.

 In 2016 the One Night Count found 245 unsheltered individuals in urban East King County (including portions of Bellevue, Kirkland and Redmond). Compared to the 134 individuals counted in 2015, this represents a 45% increase.¹⁰ Due to the significant changes in count methodology, the data from previous years' counts is not comparable to 2017 numbers although at 284 unsheltered individuals, in all of East King County, the number has more than doubled.

Homeless Students in the State, County, Sub-Region and Bellevue School District

- The McKinney-Vento Act is federal legislation, in effect since 1987, that ensures the rights and protections of children and youth experiencing homelessness. The purpose of the Act is to ensure that homeless children and youth are enrolled in and succeed in school. The McKinney-Vento Act defines homeless children and youth as "individuals who lack a fixed, regular and adequate nighttime residence."¹¹
- During the 2015-2016 school year there were 39,671 students experiencing homelessness in Washington State. Between the 2008-2009 and 2015-2016 school years, Washington State experienced a 90% increase in the number of enrolled homeless students reported by school districts.¹²

BSD Students Receiving McKinney-Vento Services by School Year, 2006-07 to 2016-17



Source: Bellevue School District

In 2015-2016, the number of homeless students in East King County was 873, or 12% of the total number of homeless students in King County as

compiled by the Washington State Office of Superintendent of Public Instruction (OSPI).¹³

As shown in Figure 3 the number of homeless students continues to grow in the Bellevue School District. This increase was not explained by growth in the district population, since both the total number of students experiencing homelessness and the rate per 1,000 students increased. In the 2013-14 school year, 228 students (12.6 per 1,000 students) received McKinney-Vento services. In the 2016-2017 school year the Bellevue School District reported 257 students experiencing homelessness. Of these 257 students, 89 were living in emergency shelters or transitional housing, 138 were living in "doubled up" housing situations (for economic reasons and cannot afford a place of their own), 19 students were living unsheltered in a car or tent, and 11 were living in a hotel/motel.¹⁴

Services for People Experiencing Homelessness

Emergency and Winter Shelters

 "Emergency Shelter," according to a federal definition, means "any facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for the homeless in general or for specific populations of the homeless." There is an extensive network of emergency shelter facilities in Seattle/King County, but demand far exceeds availability.

- Congregations for the Homeless
 (CFH) operates a year-round emergency shelter program with comprehensive case management for single homeless men. This is the only Eastside shelter for single adult men, capped at 35 beds per night. The shelter rotates each month between different congregations, primarily in Bellevue.¹⁵
- **The Sophia Way** operates a six-month intensive shelter program for 21 single women per night, offering case management to help clients overcome barriers to independence.¹⁶
- Hopelink Hopelink operates 19 units of apartment style shelter for families with children partnered with comprehensive, trauma informed case management. Avondale Park (8 units) is located in Redmond and Kenmore Place (11 units) is located in Kenmore. This is the only year around shelter for families with children in East King County.¹⁷
- LifeWire provides a confidential shelter for individuals and families experiencing domestic violence. The shelter is located in apartments that are in scattered sites around East King County. Residents live there and receive support from case managers, mental health and substance use disorder counselors and legal advocates who can assist them with any legal issues that arise due to the domestic violence.
- Friends of Youth operates two Eastside shelters for runaway and homeless youth and young adults and youth in crisis.
 Youth Haven in Kirkland is licensed staffed residential home for up to 12 youth, ages 11-17. In addition, The Landing is an overnight shelter for 20 young adults age 18-24 in Redmond open seven nights a week, the only emergency shelter for young adults on the Eastside. The young people who access The Landing are too old for traditional youth services, yet too young for adult shelters. Case managers help the

find resources including transitional living programs, food and clothing, pregnancy support, employment, medical care, education, and counseling.¹⁸

- Tent City 4 consists of homeless adults • who form temporary encampments to live together as a self-managed community. Tent City 4 sets up on land owned by faith communities for several months before moving to another location. Since first arriving on the Eastside in Spring 2004, the camp has maintained a consistent presence on the Eastside, locating in Bellevue, Bothell, Issaguah, Kirkland, Mercer Island, Redmond, Woodinville, and unincorporated King County. The resident population of Tent City 4 fluctuates based upon the time of year and the location; however, they consistently have 60-70 individuals.¹⁹ In November 2012, Camp Unity Eastside was established as a new nonprofit temporary encampment organization. Its residents were previously affiliated with Tent City 4.
- Safe parking programs for people living in • vehicles are operated at several locations on the eastside, serving different populations. A vehicle camp for adult women and anyone with children is located at Lake Washington United Methodist Church in Kirkland, and in 2017, they were serving an average of 40 people a night. Two programs in Redmond, one at Overlake Christian Church, with 15 spots, and one at St Jude's Parish, with 6 spots, serve adult men and women. The Savior Lutheran in Issaquah has a program with 6 spots for women or families with children. There is also a program started at Newport Presbyterian in Bellevue by referral only through REACH Center of Hope. None of these programs can accommodate RVs, trailers or campers. The programs have differing requirements, amenities, and length of stay.²⁰
- A Severe Weather Shelter (SWS) was initiated in 2008 by the City of Bellevue after a homeless man died from exposure

in downtown Bellevue. After two years, the weather-activated Severe Weather Shelter evolved into the nightly Eastside Winter Shelter (EWS). There are currently three Eastside Winter Shelters, one for men. one for women, and one for families with children, with a capacity of 100 per night for men and approximately 50 for women and 50 for families with children. This exceeds the previous year-round shelter capacity of 35 men and 21 women per night. During the winter of 2016-17, a total of 429 were housed in the men's shelter. 192 were housed in the women's shelter, and 319 families in that shelter.²¹ Due to additional funding from faith communities, the family shelter was able to stay open throughout 2017 and did not have to close in the spring, as did the single adults' shelters.

- The Eastside Winter Shelter for men • began through the City of Bellevue's leadership, in the winters of 2013-2014 and 2014-2015. It was located in property leased by the City from Sound Transit in the Bel-Red area (Spring District). With a significantly larger space, the number of homeless men served more than doubled from the winters of 2012-2013 and 2011-2012 when the shelter was located at St. Peter's United Methodist Church in Bellevue. In 2015-2016, the men's EWS was moved to Lincoln Center, a property owned by the City of Bellevue, and is being renovated to serve as such for the next several years. In 2016-2017 429 men were provided shelter and services, averaging about 81/night. The capacity at the remodeled shelter will be about 100 beds similar to the space owned by Sound Transit.
- Future shelters: Bellevue is working with the cities of Redmond and Kirkland, in collaboration with the Eastside Human Services Forum and the two winter shelter providers, Catholic Community Services and The Sophia Way, to help site the two winter shelters for the next few years until permanent shelters are developed and

operational. A Regional Coalition for Housing (ARCH) has committed \$700,000 in capital funding for a permanent shelter space for men and siting efforts are underway in Bellevue. The City of Kirkland is taking the lead on siting the permanent winter shelter for single women and families with children. In 2017 the Salt House congregation in Kirkland agreed to dedicate a new building that would be built on their property to be used year round for a day and night shelter for single women and families. Plans for this project are in process.²²

Day and Drop-In Centers

Day and Drop-In Centers for people experiencing homelessness are critical resources to keep people safe and provide food and respite. Another important function of day centers is for people working in the centers to establish relationships with users of the centers. These relationships are helpful in allowing them to trust and seek help for mental health and other issues.

- New Bethlehem Day Center for families opened in mid-November 2016 in Kirkland at the Salt Box Church. It is open Sunday through Friday from 2-8 pm. It is a program of Catholic Communities services, with the idea for the project initiated by Holy Family Church and Saint Louise Church. Families and children receive snacks and dinner, and have access to showers, social services, laundry facilities and computers. From November 2016 when it first opened to April 2017 it served about 36 individuals a day, with about 239 unduplicated clients.
- Congregations for the Homeless operates a day center for single men experiencing homelessness. It is open at the Lincoln Center in Bellevue from Sunday through Thursday from 8 am-3 pm. It offers resource referrals, meals, access to computers, case management and showers. Between December 2016 to March 2017, 117 men used the day center, an average of about 37 men/day.

- Sophia Way Day Center in Bellevue sees
 35-45 women per day Monday through
 Sunday from 8 am to 3 pm. Besides breakfast,
 lunch, showers and access to computers, each
 day providers from various agencies have
 office hours, to find employment, sign up for
 healthcare and other benefits, and counseling.
- Friends of Youth operates a drop-in center for youth and young adults at the Together Center in Redmond. Open 6 days a week, hours are varied. Services provided include case management, connections to resources and basic needs such as food and clothing.

Outreach

Outreach programs are vital for reaching out to people who are experiencing homelessnessgoing where they are and developing relationships and trust that has often been lost due to traumatic experiences and systems that failed to meet their needs. Through outreach people experiencing homelessness can get referrals to services and resources including how to find shelters or other supports they need. This is especially important for people experiencing homelessness who are resistant to accepting services, such as substance abuse addiction treatment or mental health counseling. Developing an ongoing relationship with the person refusing services is recognized as a longterm but can often lead to successful outcomes.²³

The following organizations in East King County provide outreach services and work with one another to provide comprehensive coverage to the community:

Congregations for the Homeless. Outreach services are currently provided to men, women and families in Bellevue, Issaquah, and Kirkland. Outreach Case Managers, who respond to concerns regarding homelessness in these communities, serve as an important point of connection between cities, agencies, and the surrounding area. The CFH Outreach Program also works to increase the understanding of homelessness on the Eastside. Flexible funds provided through the United Way of King County provide outreach workers the capacity to help people experiencing homelessness fix their car, renew their identification card, or pay for a deposit on a room which can help them get out of the cycle of homelessness.

City of Redmond. Through the Redmond Police Department, the Homeless Outreach Specialist works with people who are experiencing homelessness to connect them with resources. In addition the Outreach Specialist operates the Next Steps Resource Center at the Redmond Public Library weekly for two hours so people know where to come to him for help.

Sophia Way. The Outreach Worker for Sophia Way also works with the winter shelter guests and provides services to women on the street who are homeless, many times in crisis. She can direct the women that she works with to shelter services and also has access to flexible funds to meet immediate needs.

Friends of Youth. Friends of Youth's Outreach Team provides street outreach, case management and wraparound services to homeless youth age 16-24 in East and North King County. The Team seeks out youth where they are likely to gather, arriving in a van equipped with basic needs including food, clothing, hygiene and first aid supplies. The van can also be used to transport youth to shelters, health clinics and job interviews.

Transitional, Permanent Supportive and Supportive Housing

In Bellevue and East King County, there are a number of non-profit organizations that are funded by King County, local cities and other sources to provide these kinds of housing including Imagine Housing, Low-Income Housing Institute, Lifewire, YWCA, Hopelink, Attain Housing, Sophia Way and Congregations for the Homeless. However there continues to be more demand than available units.

Implications and Gaps

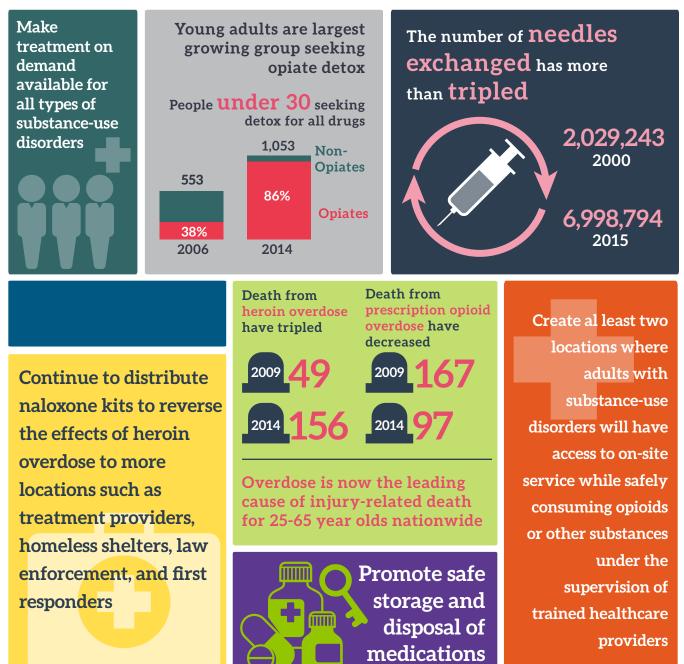
- While efforts are currently underway for a dedicated location(s) for the Eastside Winter Shelter(s), this will take several years to implement and, in the interim, finding suitable sites for the shelters will continue to be a challenge. Shelter space during nonwinter months is also needed.
- Employment opportunities that pay living wages for people experiencing homelessness as well as to keep them from becoming homeless are needed.
- The affordable housing supply is far short of the need. Increased diligence is needed to bring funding and to find appropriate sites on which to build housing that people exiting homelessness can afford.
- Two of the many reasons people become homeless are mental illness and substance abuse disorders. Funding for services, both in-patient and outpatient, is inadequate to meet the need. Through advocacy in the State Legislature more funding should be prioritized.
- Safe parking facilities for people residing in their vehicles are needed, especially for single men and for those living in recreational vehicles.
- Community education and awareness is critical to align all partners to action in ending homelessness. Engaging new sectors, such as the business community and service clubs, is needed; the strong commitment of congregations countywide could be a model for engaging these new communities.
- More outreach especially expanded to be available during the evening hours, more flexible funding and more access to transportion for people experiencing homelessness would be an important addition to the array of services currently available.

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Heroin & Prescription Opioid Use in King County and Bellevue



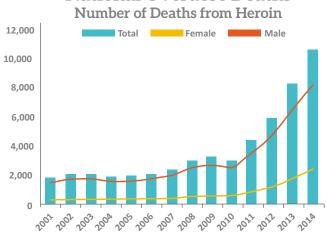
HEROIN & PRESCRIPTION OPIOID USE IN KING COUNTY AND BELLEVUE

Why it is Important

King County, like many places across the country, is seeing sharp increases in the use and abuse of heroin and prescription opiates. In 2016, there were 332 drug-caused deaths in King County and 219 of them were from heroin and prescription opioid overdose. Teens ages 14-15 represent the peak time of initiation into opioid misuse, and many users report that they began with prescription type opioids before moving on to heroin. Despite the need, the region suffers from the lack of services and treatment beds to address substance abuse. In King County, there are only sixteen detoxification beds and treatment options are limited. The number of people seeking treatment for opioids treatment has outpaced those seeking help for alcohol treatment. On March 1, 2016, King County Executive Dow Constantine announced the formation of a heroin and prescription opiate addiction task force.

This Focus Area will summarize the extent of the issue in King County and how it is affecting Bellevue/East King County. Most of the information within this chapter has been obtained from the King County Heroin and Opioid Task Force Report released in September 2016.

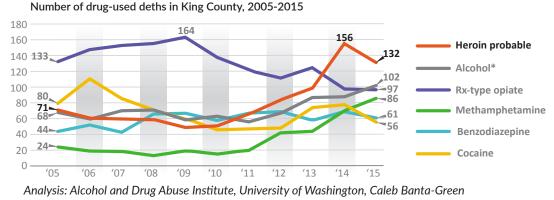
National Overdose Deaths



Source: National Center for Health Statistics, CDC Wireless

A decade of drug deaths

Death from heroin fell by 15 percent in King County last year, but they're part of a lasting and worrisome trend, health officials say.



Source: King County Medical Examiner

King County Heroin and Prescription Opioid Addiction Task Force

To confront the problem, King County Executive Dow Constantine, Seattle Mayor Ed Murray, Renton Mayor Denis Law, and Auburn Mayor Nancy Backus announced the formation of the **Heroin and Prescription Opiate Addiction Task Force**. The Task Force was co-chaired by the King County Department of Community and Human Services and Seattle & King County Public Health. The Task force included 50 stakeholders, including University of Washington Alcohol and Drug Abuse Institute, behavioral service providers, hospitals, human service agencies, the recovery community, criminal justice partners, first responders, including City of Bellevue Fire Department Deputy Chief of Operations, Andy Adolfson, and others.

The Task Force was charged with developing both short and long-term strategies to prevent opioid use disorder, prevent overdoses, and improve access to treatment and other supportive services for individuals experiencing opioid use disorder.

The Task Force met over a six-month period to review:

- Current local, state and federal initiates and activities related to prevention, treatment and health services for individuals experiencing opioid use disorder
- Promising strategies being developed and implemented in other communities
- Evidence-based practice in the areas of prevention, treatment and health services.

The Task Force strived to avoid redundancy with other related activities and to leverage existing partnerships and activities where appropriate. Also, they applied an equity and social justice lens to the work. To be successful, heroin and opioid addiction holistically, compassionately, and through a public health lens. As King County Prosecuting Attorney Satterberg wrote in a letter to the Board of Health dated January 19, 2017, "I want you to know that in this drug crisis, unlike the response to crack cocaine in the 80's and 90's, that I believe that the criminal justice system should not take a primary role, and that instead we should follow the lead of public health professionals."

Task Force Recommendations & Community Response

To confront the region's growing heroin and opioid epidemic, the Heroin and Prescription Opiate Addiction Task Force recommends a comprehensive strategy that focuses on prevention, increasing access to treatment on demand and reducing the number of fatal overdoses.

Primary Prevention:

- 1. Raise awareness and knowledge of the possible adverse effects of opioid use, including overdose and opioid use disorder.
- a. **Physicians:** Write fewer prescriptions, shorter term prescription, and educate patients on the potential for overdose and addiction
- b. Pharmacists: Educate patients on the potential for overdose and addiction, plus include educational material with prescriptions

c. **Public:** General education efforts to raise the awareness level of opioid addiction and overdose

King County's Response

- → Awareness and education forums
- → Mental Illness and Drug Dependency (MIDD sales tax) funding for prevention education -physicians, pharmacists, health care providers, and the public

Bellevue/Eastside's Response

- → Eastside Human Services Forum held an education forum in June 2017. Caleb Banta-Green and Brad Finegood, Co-Chairs of the Heroin and Prescription Opiate Addiction Task Force, provided information about current trends and a variety of recommendations from the Task Force.
- → Bellevue Human Services Commission hosted two panels. The first panel presented on the Trends on Heroin and Prescription Opiate Addiction In Bellevue in February 2017. The panel included Andy Adolfson, Battalion Chief and EMS Division Commander for the Bellevue Fire Department who also who served as Bellevue's representative on King County's Heroin and Prescription Opiate Addiction Task Force: Captain Marcia Harnden with the Bellevue Police Department; and Probation Division staffers. Janet Dole and Brandon Moore. A follow-up panel was held in May 2017, which included Brad Finegood, King County Behavioral Health and Recovery; Andrea Frost, Youth Eastside Services; Stephanie Benson, Healthpoint; Ken Schlegel, Therapeutic Health Services; and Arden James, Sound Mental Health.

- → King County Public Libraries Bellevue Downtown Library and Kirkland Library held a community meetings in March 2017. Bellevue held a community conversation on Heroin and Prescription Opiate Addiction Task Force Report and Recommendations. Kirkland held a community conversation on Making Treatment Work in the Real World for Real People.
- → The City of Bellevue is evaluating what steps they can take to assist in the execution of the recommendations given by the Task Force as well as any other steps they can take to reduce the impact of opioids on the community.

2. Promote safe storage and disposal of medication

- a. Encourage patients to keep medications in secure locations
- b. Encourage patients to dispose of medications once need is gone
- c. Large scale takeback programs

King County's Response

- \rightarrow 100 drop-box locations
- → These drop boxes are amongst the first in the nation where Controlled Substances, like opioids, can be disposed of without Law Enforcement oversight
- → Mail-back envelopes
- → Funded by pharmaceutical companies

Bellevue/Eastside's Response

- → Participating in the programs listed above
- → Secure drop-box in Police lobby of Bellevue City Hall
- \rightarrow 7 pharmacy take-back locations

3. Leverage and augment existing screening practices in schools and health care settings to prevent and identify opioid use disorder.

- a. Leverage existing screening practices in schools and health care settings to prevent and identify opioid use
- b. Early identification equals a better chance to get them off of drugs.

King County's Response

- → Screening, brief intervention and referral to treatment (SBIRT)
- → Screening tools for early identification of drug and alcohol problems
- → The Best Start for Kids (BSK) Levy funding SBIRT in middle school

Bellevue/Eastside's Response

- → Bellevue School District (BSK) is developing SBIRT plan for middle schools
- → BSK is funding a health clinic at Highland Middle School
- → Eastside Pathways Mental Health and Wellness Collaborative

Treatment Expansion and Enhancement:

4. Create access to buprenorphine in lowbarrier modalities of substance use disorder treatment services.

- a. Treatment on demand
- b. Buprenorphine is accessible; not restricted to limited sites like methadone
- c. Encourage physicians to write buprenorphine prescriptions
- d. Encourage the prescribing of this drug at medical clinics, emergency departments, behavioral health clinics and other sites that see substance abusers.

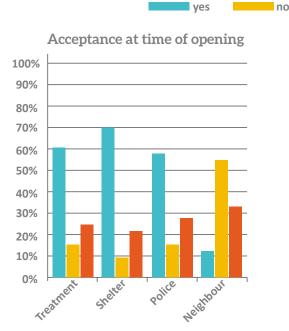
King County's Response

- → 100 public and private health care providers that have received training and can prescribe buprenorphine
- → \$500,000 in MIDD funding will be used to expand access

Bellevue/Eastside's Response

→ 16 public and private health care providers in Bellevue can prescribe buprenorphine

CHELs–European Experience





5. Develop treatment on demand for all modalities of substance use disorder treatment services.

- a. Tailor the treatment to the patient.
- b. Recognize concurrent issues.

King County's Response

 \rightarrow Valley Cities is opening two facilities that will offer inpatient care to people in need of substance use detoxification and treatment, and recovery services. Recovery Place Seattle - Beacon Hill is scheduled to open in Fall 2017. Upon opening, the facility will offer 16 beds for acute medical detoxification and will expand to a total of 32 beds when fully operational. There will also be 42 beds for intensive inpatient substance use treatment, open in summer 2018. Recovery Place Kent will provide 16 beds for secure inpatient evaluation and treatment, and another 16 beds in a secure detoxification unit.

Bellevue's Response

 \rightarrow Bellevue funds the following programs:

Bellevue funds the following programs:				
Youth Eastside Services	Mental health counceling and substance abuse treatment to children and youth ages 6-22	\$168,747		
Therapeutic Health Services	 Outpatient drug & alcohol treatment Medication Assisted Therapy (metadone) 	\$105,509		
Sound Mental Health	School and community based services for children, youth and adults with mental health and substance abuse issues	\$38,500		
Friends of Youth Provides substance abuse treatment services to youth, young adults and their families		\$88,960		
HealthPoint Provides medication assisted therapy		\$60,272		

6. Alleviate barriers places upon opioid treatment programs, including the number of clients served and siting on clinic.

- a. Allow larger capacities at facilities that have been limited
- b. Work with communities to accept these facilities and view them as a medical clinic

King County's Response

→ International Community Health Services (ICHS) – affordable health care services for underserved populations

Bellevue/Eastside's Response

- → HealthPoint Affordable health care services for low-income populations
- → Therapeutic Health Services Outpatient drug & alcohol treatment, including medication-assistance treatment

User Health and Overdose Prevention:

7. Expand distribution of naloxone in King County

- a. Make naloxone more available to substance users and their social circle
- Evaluate the effectiveness of naloxone programs in relationship to police and BLS EMS

King County's Response

- → State legislation authorized pharmacies to supply a nasal form of Narcan without a prescription
- → Narcan carried on Medic Unit for many years; now carried by all fire response units
- → MIDD funding is being used to expand distribution of Narcan

Bellevue/Eastside's Response

→ Narcan carried on Medic Unit for many years; now carried by all fire response units

- → Police Department narcotics officers are trained and will be carrying Narcan nasal spray, also carried by King County Sheriff Deputies.
- 8. Establish, on a pilot program basis, at least two Community Health Engagement Locations (CHEL sites) where supervised consumption occurs for adults with substance use disorders in the Seattle and King County region.
 - a. One sites should be located inside Seattle and one site outside of Seattle.
 - b. Supervised Consumption
 - c. Resources for safe use
 - d. Services available Counseling and Rehab

King County's Response

→ Location of CHEL has not yet been determined. City of Seattle proposed setting aside \$2 million dollars for a CHEL site. Throughout King County, several cities have banned the sites, including Federal Way, Auburn, & Bellevue.

Bellevue/Eastside's Response

→ On October 16, Bellevue City Council voted unanimously to approve a permanent prohibition on safe-injection sites. The council determined that the safe-injection sites violate the city's land-use code.

9. On-going Task Force Work on Evolving Problem

Over the past year the Seattle/King County area (including the Eastside) has seen an increase in the use of the opioid fentanyl. Fentanyl has similar effects to heroin; however, it is about 50 times stronger. Cities like New York, Chicago, Pittsburgh, Philadelphia, and Cleveland have seen dramatic escalations in fentanyl overdoses however one of the worse hit cities is Vancouver B.C., a three-hour drive north of here with a porous US/Canadian border. Fentanyl deaths have outpaced heroin deaths at a lightning speed over the last 3 to 5 years. A kilo of fentanyl can kill 333,000 people as it only takes about 3mg to kill an adult size male. Task Force Members and other community members are dedicated to finding new, innovative approaching to address the problem of heroin, prescription opioids, and fentanyl crisis.

Sources for Additional Information

This Focus Area is a summary of King County Heroin and Opioid Task Force Report and updates on efforts of the steps being taken in our community. The entire report can be found at <u>http://www.kingcounty.gov/depts/community-</u> <u>human-services/mental-health-substance-</u> <u>abuse/task-forces/heroin-opiates-task-force.aspx</u>

Other useful resourcesWashington State:

Report: 2016 Drug Use Trends in King County, Washington: <u>http://adai.uw.edu/pubs/</u> pdf/2016drugusetrends.pdf

Office of the Attorney General Opioid Epidemic: http://www.atg.wa.gov/opioid-epidemic

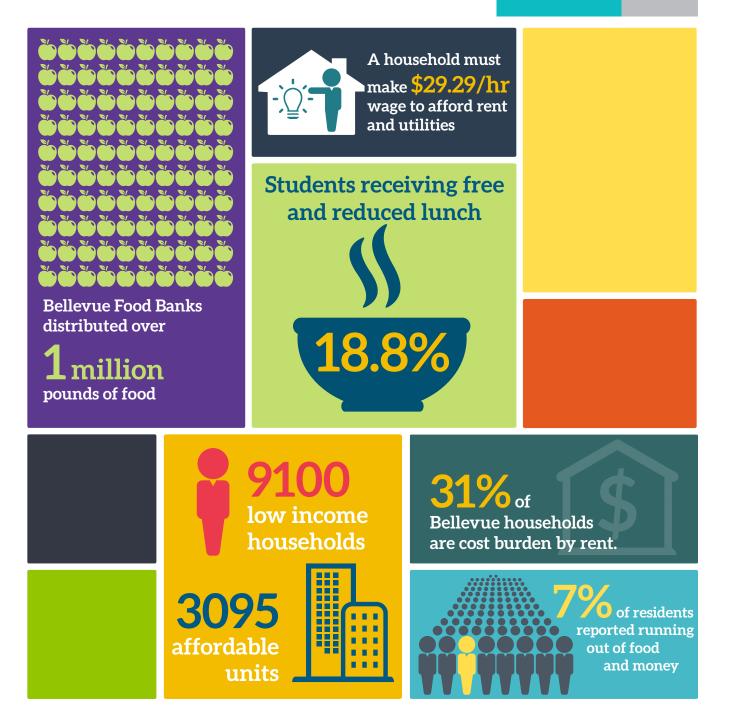
Opioid Overdose Prevention Partnership: <u>http://</u> www.kingcounty.gov/depts/community-humanservices/housing/services/homeless-housing/ opioid-overdose-prevention.aspx

Opioid Medication & Pain: What You Need to Know: <u>http://wahealthalliance.org/wp-</u> <u>content/uploads.php?link-year=2016&link-</u> <u>month=12&link=Opioid-Medication-Pain-Fact-</u> <u>Sheet.pdf</u>

Goal Areas



Food to Eat and Roof Overhead



GOAL #1: FOOD TO EAT AND ROOF OVERHEAD

Why is this Goal Area Important?

Basic needs like food, shelter and clothing are critical for people to thrive and grow, and vital for a healthy community. This is particularly true for children since in 2015, more than 1 in 6 U.S. children (18 percent) lived in households that were food-insecure at some point during the year, and 0.7 percent experienced the most severe level of need, where food intake is reduced and regular eating patterns are disrupted. Inadequate food intake in children is associated with a number of serious health, behavioral, and cognitive deficits. Food insecurity can result in lower diet quality and less variety, both of which can contribute to being overweight, and unpredictable availability of food can lead to overeating.¹

Adults, too, tend to perform better in the workplace if they have a healthy diet. According to the Centers for Disease Control and Prevention (CDC), approximately one-third of American adults are obese. Increasing obesity rates lead to greater incidences of diabetes and heart disease, as well as increased costs in the workplace due to decreased productivity.² Many in Bellevue continue to struggle to meet basic needs. Vulnerable populations such as children, older adults, ethnic minorities, and lowincome households are disproportionately affected by food security, despite the extensive private and public food safety net in the United States. Food-insecure and low-income people are subject to the same often challenging influences as other Americans in trying to consume a healthful diet and maintain a healthful weight, but those who are food-insecure or low-income also face unique challenges in adopting and maintaining healthful behaviors. Examples include limited resources and lack of access to healthy, affordable foods and fewer opportunities for physical activity.³

What's Working?

- In 2016, there were 8,896 Bellevue residents who received Basic Food (Washington's food stamp program), a reduction of 11.8% since 2014 when the number of residents receiving Basic Food was 10,090. This decrease could mean that fewer people need this assistance due to lack of income.⁴ Bridge To Basics is a WithinReach program that also collaborates with United Way of King County. They work with Hopelink on the Eastside to connect clients with other services such as Basic Food/food stamps, utility assistance, free tax preparation, free or low-cost children's health insurance, child care for working parents, job training resources, and free and low cost banking services.⁵
- Local emergency financial assistance providers, like the Salvation Army, Catholic Community Services, Solid Ground and Hopelink, reported that they provided services 1,355 people in Bellevue in 2016, largely through one-time rental or mortgage assistance to avoid eviction or foreclosure. They also aided with utility bills, car repairs, prescription drug costs and food vouchers.⁶
- In 2016, Hopelink's Bellevue Center food bank distributed almost 800,000 pounds of food to low-income individuals in their service area. Among the clients who received food at the Food Bank were 3,822 Bellevue individuals (1,742 families) who had a total of over 38,000 visits to the food bank (average of 11 food bank visits per individual).⁷ Renewal Food Bank distributed 231,000 pounds of food in Bellevue to more than 37,000 people in 2016. They help about

300 families every week.⁸ **Bellevue Food Banks distributed over 1 million pounds of food.**

- In June 2017, Bellevue City Council • approved an Affordable Housing Strategy for bringing more affordable housing to Bellevue. The Affordable Housing Strategy represents a culmination of more than a year of research, analysis, review and input from a technical advisory group, stakeholders and the public. The Strategy is a set of actions that, when fully implemented, could create up to 2,500 affordable homes in Bellevue over the next 10 years and provide new or expanded assistance for residents struggling to remain in Bellevue. The Strategy also includes a monitoring program to measure overall progress and effectiveness of individual actions.9
- The Regional Affordable Housing Task Force kicked off in July 2017. The King County Council initiated Task Force of elected representatives work with an advisory panel of nonprofit agencies and private partners to identify collective tools and actions that can be taken at the regional level to create more affordable options where needed and preserve affordable housing where it exists today. Actions could include a recommended plan for new partnerships, local strategies, regulatory reform, and funding approaches.¹⁰
- The Bellevue School District serves free breakfast and lunch to students participating in their Elementary School Summer Program at Lake Hills Elementary.¹¹
- Bellevue Nourishing Network aims to fill the existing gaps that leave people hungry by weaving together the efforts, stories, and ideas of individual and organizational networks; employ the skills, tools and resources to sustain community-driven problem solving and network weaving over time. An example is Backpack Meals for

Kids which since 2012 has been working to eliminate weekend hunger. They started in two schools, providing weekend meals for 20-30 students weekly. In 2017, they served 22 schools and provided 29,500 meals in the 2015-2016 school year. Each weekend in the 2016-2017 school year, Backpack Meals for Kids provided 320 children with a meal packet for the weekend.¹²

Food Security and Hunger Prevalence

- The definition of food insecurity is the limited or uncertain availability of nutritionally adequate and safe foods, or limited or uncertain ability to acquire acceptable foods in a socially acceptable way.¹³
- Food security means access by all people at all times to enough food for an active, healthy life. According to the U.S. Department of Agriculture, the prevalence of food insecurity in Washington State is 12.9% of households, and 4.8% of households classified as very low food insecure. This compares to the national average of 13.7% for food insecurity and 5.4% for very low food insecure.¹⁴

Seven percent (7%) of Bellevue residents reported running out of food and money for a period of time in the past year.¹⁵

The percentage of students receiving free and reduced-cost lunch can also help measure community food security. In the 2016-2017 school year, 33% of King County students (94,838 individuals) qualified for free or reduced-price school meals. Compared to the 2013-2014 school year, this represents a 4% decrease in the number (from 99,114) and 3% decrease in percentage of qualifying students.¹⁶

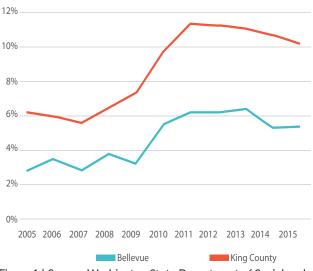
- According to Bellevue School District, the total percentage of students qualifying for free and reduced price lunch assistance has remained steady at 18.8% as of October 2016 (2015: 19%).¹⁷
- There are 9 schools in the district where at least 30% of their students are eligible for free or reduced-price lunches, and 12 schools reported that at least 20% of their students qualified.¹⁸

Service Trends Food Banks, Food Stamps and Meal Programs

- In Washington State, about one in seven people (12.9 percent) are considered "food insecure"—which means they do not have reliable access to a sufficient amount of affordable, nutritious food. Food insecurity can have a devastating effect on a person's health and wellbeing—particularly seniors, children and younger adults. People experiencing food insecurity often have to decide between basic needs, such as healthcare, or nutritionally adequate foods for their family.
- Hopelink's food assistance programs provide emergency and supplemental food to help end food insecurity for thousands in our community. Hopelink provided a total of 2,161,134 meals, with 14,541 clients receiving food assistance.¹⁹
- In 2016, Renewal Food Bank fed more than 37,000 people.²⁰
- Emergency Feeding Program of Seattle and King County (EFP) provides emergency food bags through 240 distribution partners (faith groups, schools, etc.). There are bags for specific dietary needs, such as for people with diabetes, and for ethnic groups such as

Latino/Hispanic and African. These partners give out our packed bags to people in need with no wait times or restrictions.²¹ EFP bags are not intended as an ongoing source of supplemental nutrition, but rather as an emergency response to hunger crises.

- Basic Food includes the federal Supplemental Nutrition Assistance Program (SNAP), previously known as "food stamps," and the state-funded Food Assistance Program for legal immigrants (FAP). FAP is for individuals who are legal immigrants and meet all the eligibility requirements for SNAP except citizenship or alien status.²²
- The number of Washington residents receiving food stamps has decreased by 13% in the last two years. In 2014, 1.5 million people received food assistance, compared to 1.3 million in 2016.²³



Percent of Households on Basic Food



- The number of Bellevue residents participating in the Basic Food Program has fluctuated over the years. In 2014, the number of Bellevue residents was 10,072, decreasing to 8,896 in 2016, or 11.6%.²⁴
- The Salvation Army operates a community meal program every night of the week in the Crossroads neighborhood. The program is highly community volunteer driven and supported. They serve on average 60 people

per night, but 95 servings on average. Since moving back into their new facility, allowing easier access to the neighborhood, they have seen an increase in families attending. In addition, they offer emergency financial assistance, bread, food bags, child and youth items, hygiene items and more through their Social Service office throughout the week. They have seen an increased need in the amount of financial services needed and continue to have clients come in throughout the day to receive the other services.²⁵

Emergency Financial Assistance

- Emergency financial assistance continues to be a need for low- to moderate-income Bellevue residents and is considered an important strategy on the continuum of services to prevent homelessness.
- In 2016, the City's Utility Discount Program provided utility discounts and rebates for 1,135 low-income seniors and disabled residents who receive water, sewer and drainage services from the City of Bellevue. In 2016, the Utility Tax Rebate Program provided refunds of utility taxes to 1,148 low-income residents.²⁶ This represents about a 6% decrease in the numbers served in these programs in 2014. Utilities staff are planning an increased outreach effort to ensure that all who are eligible know about the program and have easy access to apply.
- Hopelink's Emergency Financial Assistance program helps keep families from falling through the cracks into chronic homelessness, providing one month's rent so that a family is able to stay in their home. Eviction prevention assistance also protects a family's rental history, keeps them from incurring the costs of eviction and, most importantly, ensures the stability of knowing they have a place to live. Hopelink also provides limited financial support for such things as prescriptions or utility bills not

covered by traditional heating assistance programs. In 2016, Hopelink helped 1,801 clients through emergency financial assistance, and \$489,672 was distributed to mitigate crisis and prevent eviction.²⁷

- Ensuring that seniors, people with disabilities and others living in poverty are able to stay warm in their homes, Hopelink administers two programs that assist low-income renters and homeowners with their winter heating and energy bills. These are the federally funded Low Income Home Energy Assistance Program (LIHEAP), and the Puget Sound Energy (PSE) HELP Program, funded by Puget Sound Energy. Hopelink helped 10,609 clients and distributed 2,797,781 in heating assistance in 2016. The average energy assistance provided per household was \$608.²⁸
- The King County Housing Stability Project (KCHSP), operated by Solid Ground, makes one-time loans and/or grants to homeowners and tenants in danger of losing their housing due to short-term financial difficulties. This program also provides loans or grants to homeless families and individuals who need assistance moving to permanent housing, and limited assistance for other types of moves. In 2016, this program served 27 Bellevue households with a total of \$40.721 for residents in need of movein or eviction prevention assistance. Staff note that each year they can serve fewer residents with the amount allotted due to rising rents and higher housing costs.²⁹

Affordable Permanent Housing

Housing is defined as affordable if its occupants pay no more than 30% of their income for rent and utilities or for mortgage, taxes, and insurance. According to the U.S. Department of Housing & Urban Development (HUD), households who pay more than 30% of their income for housing are considered cost-burdened. Households who pay more than 50% of their income for housing are considered severely cost burdened, and may have trouble affording basic necessities such as food, clothing, transportation, and medical care.

Prevalence

- It is increasingly difficult for people living and working in Bellevue to find housing in Bellevue that is affordable. The City of Bellevue published a Housing Needs Assessment update as the initial step of the City's Affordable Housing Strategy to develop clarity on Bellevue's current situation with respect to housing demand, supply, and cost. The Needs Assessment describes the current status of housing affordability in the City and the trends that are exacerbating the problem. Research for the City's Comprehensive Plan Update, including broad community engagement, identified affordable housing as a critical need for Bellevue. In June 2017. Bellevue City Council approved an Affordable Housing Strategy for bringing more affordable housing to Bellevue.
- The key findings of the 2016 Housing Needs Assessment were as follows:
 - Over 9,100 Bellevue households (17%), or about 22,000 people, have low and very low incomes (i.e. household incomes less than 50% of area median income). There are only 3,095 units in Bellevue (6% of Bellevue's housing supply) affordable to people in these households.
 - Production of subsidized affordable housing units has slowed. The annual rate of creating affordable units has been significantly less in the last decade than it was in the 1990s.

Sixteen percent of all renters and almost one third (31%) of all Bellevue households spend more than 30% of their income on housing (i.e. cost burdened).

- Almost one third of senior renters spend more than 50% of their income on housing (i.e. severely cost burdened).
- Rents are continuing to climb, and in 2017, average over \$2,000 in parts of Bellevue, a historically high level relative to median income. Affordable rents for low and very low income house holds would be between about \$450 and \$1,000.
- High home prices in Bellevue are making it hard to keep ownership costs at 30% of income. Median sales price for a single family home in Bellevue in May 2017 was more than \$1 million. This would require an annual household income of over \$220,000 to be affordable.
- The impacts of the lack of affordable housing problem also extend to business, according to Bellevue's 2015 Survey of **Businesses**. Respondents to the survey across all geographies and employment sectors consistently rated Bellevue low on affordable housing options for employees. Businesses identified lack of workforce housing as a primary challenge for Bellevue. Forty-one percent (41%) of all respondents state that they have had difficulty finding trained and/or qualified staff over the past 12 months. Retail and tourism indicate having the most difficult time. Half of retail businesses and 60 percent of tourism businesses report having difficulty finding trained and qualified staffing.³⁰

- Our region is the most expensive in the country for increasing housing costs, being at or near the top for more than a year. In April 2017 the median single family home sales price across King County was \$625,000, more than double the price at the bottom of the market in early 2012. The Eastside reached an all-time high of \$880,000, up 20% in the last year, the biggest jump since 2013. Fewer people are putting their home on the market because they don't want to turn around and have to buy at inflated prices, unless they're moving away or downsizing. At the same time, brokers say buyers are "over-confident" that they can sit on their houses and sell later because prices keep going up. Across Bellevue, the median home sales price topped the \$1 million mark.³¹
- Almost one third (31%) of all Bellevue households spend more than 30% of their income on housing. This includes 14% of households that spend more than 50% of their income on housing. Paying between 30-50% of income on housing is defined as cost burdened and paying more than 50% of income towards housing is defined as severely cost burdened. While 14% of all

households are considered to be severely cost burdened, 63% of very low income and 53% of low income households pay more than 50% of income towards housing.

 In terms of renter households, the overall share of severely cost burdened households is higher at 16%. Over half (51%) of senior renters spend more than 30%

of their income on housing. This includes almost one third (32%) of senior renters that spend more than 50% of their income on housing.³²

Service Trends Provision of Affordable Housing

- Bellevue is working towards a housing supply that will meet the needs of all economic segments of the community, as established in coordination with the King County Growth Management Planning Council and adopted in the Countywide Planning Policies. The Countywide need for housing by percentage of Area Median Income (AMI) is: 16% of housing supply affordable at 50%-80% of AMI; 12% of housing supply affordable at 30%-50% of AMI; and 12% of housing supply affordable at 30% AMI.³³
- Since the Countywide Planning Policies were adopted in 1993 and through 2016, Bellevue has added approximately 3,500 units of new or preserved affordable and Section 8 housing. This includes market-rate units in Bellevue with and without regulatory incentives and units with direct subsidies from Bellevue through A Regional Coalition for Housing-ARCH.³⁴
- The City supports affordable housing largely through the regional consortium ARCH.

"Some families just fall short to be eligible for affordable housing. Sometimes just a percent or two. Even two people working full time still cannot pay for rent."

> — YES Staff, Best Starts for Kids Family and Youth Homelessness Prevention Program

The effectiveness of leveraging Bellevue's housing dollars, with other local, state, and federal funding, measured high in 2015 – more than 8 times the one to five (1:5) performance target. Like other Eastside cities, however, Bellevue

struggles to provide enough affordable housing to meet the need of Bellevue's residents and workforce.

- In June 2015, the Bellevue City Council adopted the city's multi-family tax exemption (MFTE) for projects in certain areas. Seattle and other cities have similar MFTE programs under which developers agree to set aside a certain percentage of units for low- and moderate-income people. Under Bellevue's MFTE program, developers will be exempt for 12 years from paying property taxes on the units they build in downtown, the Bel-Red area, Eastgate, Crossroads Village and the Wilburton commercial district. To get the tax break, developers have to make a fifth of the units in their projects affordable. Half of the affordable units would be set aside for people who make \$40,320 a year or less and the other half set aside for those who bring in around \$47,000 a year or less. As of July 2017, no Bellevue multifamily development has taken advantage of this exemption. The city is reviewing the program's eligibility and affordability requirements.³⁵
- It is a Council priority to encourage a variety of affordable housing opportunities for all economic segments of the community. The City's Economic Development Plan also supports this priority.³⁶ In 2014 Bellevue adopted the updated Comprehensive Plan Housing Element, establishing the city's housing policy direction. An Affordable Housing Strategy to implement the city's housing policy was initiated in December 2015 and approved in June 2017.
- The Affordable Housing Strategy represents more than a year of research, analysis, review and input from a technical advisory group, stakeholders and the public. The Strategy is a set of actions that, when fully implemented, could create up to 2,500 affordable homes in Bellevue over the next 10 years and provide new or expanded assistance for residents struggling to remain in Bellevue. Phase 1 actions that are now being implemented include: update of the city's multifamily tax exemption (MFTE) program; creating an

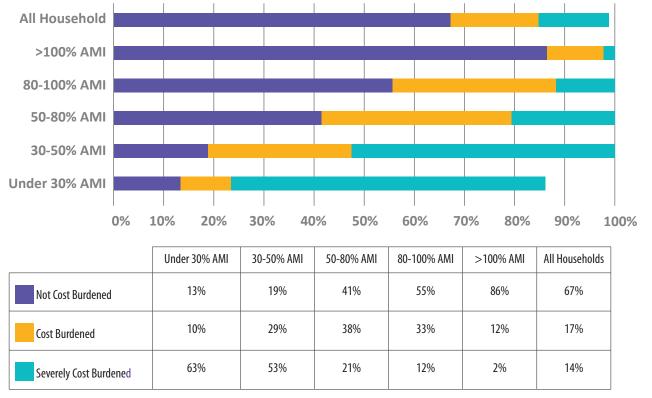


Figure 2 | Notes: Under 30% AMI does not total 100 because of unavailable data. Source: CHAS data based on U.S. Census Bureau data.

AFFORDABLE HOUSING UNITS CREATED IN BELLEVUE, 1996-2016									
Target Population	Direct Assistance	Regulatory Incentives	Market	Total					
Low-income (50% of median)	929 units		8 units	937 units					
Moderate-income (80% median)	512 units	406 units	1,239 units	2,157 units					
Total Units	1,441 units	406 units	1,247 units	3,094 units					

Figure 3 | Source: A Regional Coalition for Housing (ARCH) 2017

inventory of surplus public land, faith based owned land, and non-profit owned land for potential affordable housing; voluntary density incentives for affordable units in Eastgate and Downtown; working with Sound Transit and other public agencies to develop affordable housing in proximity to transit hubs; and partnering with nonprofits and housing agencies to fund the preservation of existing, affordable multifamily housing. The Strategy also includes a monitoring program to measure overall progress and effectiveness of individual actions.

In 2015 and 2016, Bellevue helped towards creating 63 family rental units in Bellevue that will start construction in 2017. Additionally, 2016 Bellevue funding went towards predevelopment funding of an over 200 unit mixed income Transit Oriented Development in the Overlake Village District of Redmond on the border with Bellevue. This project, which is also supported with in-lieu fees from Redmond, will be applying for additional funding in the 2017 round.

The scale, readiness, and available sources leveraged by Bellevue funds has changed over the past several years resulting in multiyear funding commitments to particular projects. Also recently funded (2014) were a 50 bed Year round Homeless Shelter which has not yet moved into entitlement and the Regional Equitable Development Initiative (a revolving fund to acquire development opportunities within emerging Transit Oriented Development areas). The counts in Figure 3 do not include the units that will be created with these investments.³⁷

Housing Choice Voucher Availability (Section 8 Vouchers)

 King County Housing Authority (KCHA) administers the federal Section 8 Housing Choice Voucher rental assistance program. Section 8 vouchers help people with low incomes rent homes on the private market. With a voucher, people pay at least 28%, but not more than 40% (in the first year), of their

AVERAGE RENTS IN KING COUNTY AND EAST KING COUNTY (\$) 2011-2017										
	March 2011	March 2012	March 2013	March 2014	March 2015	March 2016	March 2017			
East King County	\$1,222	\$1,288	\$1,362	\$1,474	\$1,577	\$1,716	\$1,832			
King County	\$1,049	\$1,098	\$1,173	\$1,270	\$1,371	\$1,493	\$1,617			
Difference	173	190	189	204	206	223	215			

Figure 5 | Source; Dupre + Scott. (March 2017). The Apartment Vacancy Report.

household income for rent and utilities. KCHA pays the difference between their portion of the rent and the amount their landlord requests. If they qualify for a voucher, they can use it to rent from any landlord in King County willing to take part in the program. In some cases vouchers may also be used to rent in incorporated Seattle or Renton, or outside of the county.

- KCHA is not accepting applications for Section 8 Housing Choice Vouchers. For 2 weeks in April 2017, the King County Housing Authority opened-up its voucher waiting list and received a total of 19,462 applications. Twenty percent of the households reported "no income," up from 12 percent just two years ago, and 60 percent said they currently were homeless, up from 47 percent in 2015. More than 700 of the applications were received from veterans, 400 of whom said they are homeless.³⁸ In May 2017, KCHA held a random lottery drawing to select 3,500 households from the 19,462 applications received. These households were added to a new voucher waiting list.³⁹ This compares to 2015 when more than 22,600 households applied for just 2,500 spots when KCHA opened its waiting list.
- The Seattle Housing Authority (SHA), which serves only Seattle, last accepted Section 8 applications in February 2017 and it is anticipated to take several years before SHA issues vouchers to those on the 2017 lottery waitlist and opens another lottery.⁴⁰ This waiting list has a preference for households that are 30% or less of Area Median Income and 3,500 applicants were placed on the waiting list by random lottery, after sorting preferences.⁴¹
- Bellevue has approximately 870 older adults, disabled, and families with children benefiting from Section 8 Housing Choice vouchers, which provides over \$11.2 million annually to local landlords through federal

Section 8 subsidies. The average income of a family receiving a Housing Choice Voucher is \$13,600.

 KCHA provides 1,837 housing units in Bellevue in 15 multifamily properties and 8 single family homes. This includes 509 federally subsidized units for very low-income households in Bellevue. The Housing Authority also provides 1,497 affordable workforce housing units in Bellevue financed with tax credits and/or tax-exempt bonds. These housing units do not receive operating subsidies from HUD.⁴² Most of the KCHA properties in Bellevue are existing apartments acquired by KCHA to preserve their affordability.

Rental Housing Market King County

- From the perspective of tenants, the rental market is increasingly difficult: over the past fifteen years, rents have gone up, down, and flattened out, resulting in an increase of just 4.1% compounded annually, excluding the distortion caused by new construction. When adjusted for new construction, rents really increased 3.3% a year. By comparison, real estate taxes and utilities increased 4.8% compounded annually over the same period. There is a significant and unsustainable disconnect between these cost increases and rental costs for an apartment. In addition, only 12% of properties surveyed offer concessions, averaging \$899 over the lease term. This compares to two years ago when concessions averaged \$744 and three years ago when they were just \$580.43
- Average rents across the region are up about 1.1 percent from last quarter and up 8.3 percent from a year ago. Those increases, only slightly smaller than the surges seen in recent years, put Greater Seattle among the most extreme markets in the country for rent hikes. Rents here have grown about six times faster than the national average over

the last year, according to Zillow. Rents are highest in downtown Seattle (\$2,173), West Bellevue (\$2,125) and Issaquah and Mercer Island (above \$1,900). Rents are hovering at or just below \$1,800 in several Seattle neighborhoods, including Ballard, Green Lake/Wallingford, Queen Anne and First Hill, as well as in Kirkland and Redmond.⁴⁴

Bellevue

Apartment rents have been climbing steadily, with average rents in East Bellevue over \$1,600/month and West Bellevue at over \$2,100/month. Throughout Bellevue, family size units with at least 2 bedrooms exceed \$1,600/month and studio units exceed \$1,100/month. Vacancy rates were 3.3% in both East and West Bellevue (March 2017). Vacancy rates below 5% indicate that new construction is insufficient to meet demand. Until recently, increases in rent have generally been consistent with increases in median income, and the average market rent in Bellevue has been affordable to moderate income households earning 80% of Area Median Income (AMI). This is no longer true. Since 2011, average rents throughout the City have become unaffordable to moderate

income renters. For example, as shown in Figure 5 renters at 80% AMI can afford between \$1,509 and about \$1,665 for family size units with at least 2 bedrooms.⁴⁵

• Figure 7 shows a breakdown of apartment rents in Bellevue between March 2013 and March 2017 and compares them to the entire county. Rent in West Bellevue for a two-bedroom/one-bath apartment increased significantly (45%) between 2013 and 2017, which was still lower than the increase in King County rent for a two-bedroom/onebath apartment (59%).

Decreasing Vacancy Rates

Vacancy rates are often used as an indicator of future rent prices. If vacancy rates are low, rent prices tend to increase due to scarcity of available units; if vacancy rates are high, rent prices decrease as owners attempt to fill unoccupied units. The market vacancy rate is 3.4% in the Puget Sound region, down slightly from 3.5% in the fall of 2016 and higher than the 3.3% level from a year ago. The rate of rent growth has slowed a little; rents rose 2.6% in the region since September 2016 and are 8.5% higher than a year ago. New construction costs more and

typically gets a rent premium of more than 40%. With so much new construction, this rent distortion is becoming significant. Excluding new units that opened in the past year, rents in the region rose 7.2%.

• Between March 2013 and March 2017, vacancy rates stayed the same on the Eastside (3.5%) while they increased in East Bellevue (from 2.3% to 3.3%) and in West Bellevue (from 3.1% to 3.3%) as rent increased. Vacancy rates in Factoria increased from 4% to 5.7% during the same time period.⁴⁶

Rents increased 8.3 percent in King County fromm a year ago, similar to spring increases seen in the last several years.

Rents soar again in King County





	STUDIO (1 PERSON)	1 BEDROOM (2 PEOPLE)	2 BEDROOM (3 PEOPLE)	3 BEDROOM (4 PEOPLE)				
Very Low Income 30% AMI								
Household Income	\$20,200	\$23,050	\$25,950	\$28,800				
Max. Affordable Rent	\$540	\$576	\$648	\$760				
Low Income 50% AMI								
Household Income	\$33,600	\$38,400	\$43,200	\$48,000				
Max. Affordable Rent	\$840	\$960	\$1,080	\$1,200				
Moderate Income 80% AMI								
Household Income	\$50,400	\$57,600	\$64,800	\$72,000				
Max. Affordable Rent	\$1,344	\$1,536	\$1,728	\$1,920				
Note: Maximum affordable rents include a utility allowance								

Note: Maximum affordable rents include a utility allowance.

Source: U.S. HUD Income Limits, 2017 using King County 4 person household family income of \$96,000

Figure 6

	RENTS IN BELLEVUE (\$)											
	Studio			1 Bedroom			2 Bedroom (1 bath)			3 Bedroom (2 bath)		
Area	March 2013	March 2015	March 2017	March 2013	March 2015	March 2017	March 2013	March 2015	March 2017	March 2013	March 2015	March 2017
Bellevue – East	836	943	1,126	1,077	1,229	1,472	1,074	1,397	1,652	1,632	1,961	2,403
Bellevue - West	1,129	1,241	1,477	1,505	1,,684	1,913	1,509	1,945	2,196	2,548	2,579	2,968
Bellevue – Factoria	694	1,170	1,435	930	1,268	1,562	1,150	1,510	1,721	1,700	1,937	2,494
King County	958	1,133	1,302	950	1,266	1,511	977	1,294	1,557	1,474	1,674	1,993

Figure 7 | Source: Dupre + Scott. (March 2017). The Apartment Vacancy Report.

Income Needed to Afford Rent

- The minimum wage in Washington increased to \$11 an hour starting on January 1, 2017. The new minimum wage, a result of the passage of Initiative 1433, applies to all jobs, including those in agriculture. Workers under 16 years old can be paid 85% of the adult minimum wage, or \$9.35 per hour, in 2017. In addition to minimum wage, the initiative addresses paid sick leave.⁴⁷
- Seattle, Tacoma, and the City of SeaTac have higher minimum wage rates for 2017. For employers in those areas, the local minimum wage rate will apply as long as it is higher than the state minimum.⁴⁸
- The City of Seattle approved a \$15 per hour minimum wage in June 2014, making Seattle the first major city in the United States to take such an action to address income inequality. Seattle's Minimum Wage Ordinance went into effect on April 1, 2015. The Minimum Wage Ordinance sets wages for the City of Seattle and will gradually increase to \$15.00/hour.⁴⁹
- In Washington, the Fair Market Rent (FMR) for a two-bedroom apartment is \$1,203. In order to afford this level of rent and utilities, without paying more than 30% of income on housing, a household must earn \$4,010 monthly or \$48,119 annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into an hourly housing wage of \$23.13. In the Seattle-Bellevue area, that estimated figure is \$29.29.50

Compared to other cities in Washington and cities across the country, the cost of living index in Bellevue is 171, which is 48% higher than the Washington average and 71% higher than that for the entire country. The index is comprised of the following criteria: cost of retail goods and services (33%), groceries (13%), health care (5%), housing (30%), cost of public/private transportation (9%) and utilities (10%). Everyday goods and services, along with housing, account for 63% of the total cost of living index.⁵¹

"More people are calling for services as they are unable to keep up with landlords" frequent rental increases."

- Provider Survey

Affordable Home Ownership

- The median price of King County singlefamily homes reached \$560,000 in May 2017, nearly double the prices during the housing bust 5 years ago.⁵²
- The median sales price for single family homes in Bellevue for May 2017 was around \$1 million Sales prices have appreciated 46% over the last 5 years in Bellevue.⁵³
- It is increasingly difficult for moderate-income households and first-time homebuyers to purchase a home, particularly in East King County. In response, federal, state, and local governments; non-profit organizations;

"I love living in Bellevue but it is so expensive to live here."

- Promotores Community Event

lenders; and private developers have developed a number of strategies to assist low and moderate-income homebuyers. Local homeownership assistance programs use several different strategies: 1) provide cash in the form of down payment loans or lower interest rates to help buyers afford home costs; 2) lower construction costs by smaller lot or unit sizes, by offering developers waivers from regulations, or by using surplus land; and 3) lower purchase costs through development subsidies and sweat equity from buyers and volunteers.

 A Regional Coalition for Housing (ARCH) funds a program called ARCH East King County Down Payment Assistance that helps homebuyers with the down payment of their home. This program also receives funding from King County and the Washington State Housing Finance Commission. Down

payment assistance helps close the affordability gap for homebuyers in East King County, providing assistance that can be used to help purchase homes on the open market or pricerestricted homes through various local

through various local land use incentive programs. The program requires homebuyers to take a homebuyer education class and receive financial counseling. It provides funds as deferred loans, to be paid with interest, and recycles funds through loan repayment, maintaining long-term value of the loan program. ARCH East King County Down Payment Assistance has been in existence since late 2005 and has already helped 70 first time, incomequalified homebuyer households achieve homeownership.⁵⁴

Homelessness – Please see Special Focus Area: Homelessness.

Legislative and Policy Changes Affecting Basic Needs and Housing Issues

- The federal Community Development Block Grant (CDBG) budget remained flat in 2015, 2016 and 2017 at \$3.06 billion. However, Bellevue's CDBG entitlement amount increased 11.7% between 2015 and 2017 due to the funding formula used by the U.S. Department of Housing and Urban Development (HUD). Bellevue's entitlement amount for 2017 is \$685,152.⁵⁵
- In 2017 the Washington State Legislature did not pass a capital budget so there were no funds added to the Housing Trust Fund for 2017. The Governor signed Senate Bill 5254 which extends the document recording fee for four more years to fund

"Affordable housing is incredibly limited in our community, which often forces families to move away from their support system and employment."

- Provider Survey

housing and shelter for people experiencing homelessness.⁵⁶ The State budget also included partial funding for an annual report that tracks performance measures for the federal nutrition programs managed by several State agencies, including the Department of

Health, and expanded nutrition assistance for older adults for home delivered meals program by 25%, supporting an additional 3,000 clients statewide.⁵⁷

Community Perceptions

 This was the tenth consecutive phone/ online survey in which lack of affordable housing (as a community problem) received the greatest percentage of major and combined major/moderate ratings, at 77%, a statistically significant increase over 2015. The percentage of respondents rating homelessness as a major or moderate problem changed from 30% in 2015 to 34% in 2017, although this change was not statistically significant.

- In the phone/online survey, results confirm that meeting basic needs continues to be a concern for Bellevue residents. Forty-four percent (44%) of respondents rated the issue of people having jobs that do not pay enough for the basics of food, shelter, and clothing as a major or moderate community problem.
- In the 2017 survey, 22% of respondents rated hunger as a major or moderate problem in Bellevue; 20% rated it a major or moderate problem in 2015, but this difference is not statistically significant.
- In regard to Bellevue residents' ratings of major or moderate problems in their households, 22% of respondents could not find affordable child care, 13% rated lacked enough money to pay for housing, 10% struggled to pay dental bills, and 11% had difficulty paying for doctor bills.
- Nurses in the Bellevue School District stated they encounter families "living on the edges" in Redmond in some schools as there is no affordable housing in Bellevue. Some families double up, sometimes up to 3 families in an apartment to be able to afford housing in Bellevue.
- Staff at the Family Connections Centers in the Bellevue School District identified the need for more food bags for the weekends, snacks available at school, and more fresh food for low-income students. Some resources are available, but there is still a need.
- Staff from Bellevue's Crossroads Mini City Hall sees a need for emergency food bags so people don't have to go to the food bank if they lack transportation. Another option would be to have a "pantry" at more sites in the community so people in need of food could select items rather than getting a prefilled bag that may not fit their dietary needs or be too heavy to carry on the bus.

• In the Next Door survey 78% of respondents rated *lack of affordable housing* most pressing community problem. As a household problem, *not having enough money to pay for housing* was in the top ten.

Implications for Action

- The lack of affordable housing continues to be perceived by residents as the top community problem in Bellevue. Housing prices continue to rise, and this trend is likely to continue in the future resulting in more people having to commute to work instead of living close to their jobs.
- Increased reports about incidents of discrimination other than racial, including religious and sexual orientation, have pointed to the need for more community education and conversation about differences, tolerance and acceptance.
- Rising housing prices means single family homes in Bellevue have in most cases become out of reach for households earning the median wage. The rental market is also unaffordable for many residents as rental rates are also continuing to increase faster than incomes.
- There continues to be a significant need for housing affordable for moderateincome households (also termed workforce housing) on the Eastside as well as housing for low-income (30% of median income or below). The need for food assistance has not decreased significantly since the recession ended and will likely continue in the future. More people are using funds in their budget designated for food to help pay rent and utilities.
- The high cost of living is repeatedly identified by Bellevue residents as a top issue, primarily the cost of housing. This is true across many socioeconomic segments of the population.

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Supportive Relationships within Families, Neighborhoods, and Communities





Mini City Hall 27,724 requests human service resources

Best Starts for Kids \$392.3 million focusing on prevention and early intervention for youth in KC



Family connection centers are located in 6 elementary, 2 middle, and 2 high schools in Bellevue



16% reported having a lot of stress, anxiety or depression that interferes with daily life.

GOAL #2: SUPPORTIVE RELATIONSHIPS WITHIN FAMILIES, NEIGHBORHOODS, AND COMMUNITIES

Why is This Goal Area Important?

Social support helps to give people the emotional and practical resources they need to feel cared for, valued and secure. The term social support refers to the physical and emotional comfort that we receive from family, friends and others. These human connections often are looked to when formal support agencies cannot assist. Studies show that social support is an important factor in predicting health and wellbeing no matter what age, from young children through older adults. Service areas in this support network include social support for individuals, families and adults, legal assistance, and information and referral.

What's Working?

Eastside Pathways was started by community volunteers in 2011 who believe that it is unacceptable for any child in Bellevue to fail to graduate from high school. Initial conversations brought overwhelming support from the Bellevue School District, Bellevue Schools Foundation, City of Bellevue, Bellevue College, a number of community groups, private citizens and non-profit organizations. Eastside Pathways is based on a "collective impact" model, a systemic approach that focuses on relationships between organizations and progress towards shared objectives. Some of the current projects include sponsoring school campaigns that encourage attendance,

improving opportunities for students in 4th grade through age 26, and focusing on early learning, birth through kindergarten, ensuring that all kids enter school ready to learn. In all the activities, supporting and involving parents and family members is a major focus.

- The Wrap-Around Services Program, a collaboration of the Bellevue School District, City of Bellevue, and United Way of King County, began in 2005 at Lake Hills Elementary School. The program is designed to provide eleven objectives for students, their families and the surrounding school community. To date Wrap-Around Services has partnered with numerous local agencies and organizations with great success: it has bolstered academic achievement and family involvement in schools and enhanced neighborhood vitality through community celebrations and local business collaboration.
- The Together Center works collaboratively to ensure people find the help they need. It is a sustainable one-stop model that allows people to find services, improving accessibility and connecting face-to-face with 20 essential agencies under one roof including medical, dental, child care, and mental health. Another feature is that the Together Center can also provide space on a weekly or monthly basis for providers, such as Cultural Navigators, as needed. Located in Redmond, it is a resource for all of East King County.

Service Trends

Support for Individuals, Families, and Adults Raising Children.

- Support for older adults is even more critical as the population ages, and more families live long distances apart. Many older adults will be "aging in place" and will require inhome care, most likely from family, friends and neighbors, in addition to paid providers. Programs that keep older adults active in the community are important opportunities for decreasing isolation. Examples of Eastside programs that engage older adults include Hopelink's "Travel Ambassador" program, which helps people learn about travel options, including taking the bus, Bellevue Network on Aging which advocates for elder-friendly communities and services, and Bellevue School District's elementary school tutor and mentoring programs. (Note: For more information about this topic, please see the Older Adults section in this report.)
- Adults with children under age 18 were • asked in a 2011 survey how often they have someone to turn to for day-to-day emotional help with childrearing. In East King County, 79% of respondents stated that they had this support in parenting all or most of the time. The highest percentage was in Seattle, where 89% of respondents said they have this support. The percentage was 82% in King County as a whole; parents who were people of color, foreign born or had incomes under \$50,000 reported getting less emotional support.¹
- In the 2017 Bellevue phone/ • online survey, having a lot of stress, anxiety or depression that interferes with your daily life was rated as a major or moderate household problem by 16% of

2013 and 2015. It was the third highest rated problem.

- Respondents to the 2017 Next Door Survey rated having a lot of stress, anxiety, or depression which interfere with your daily life as the second highest household problem.
- Jubilee REACH Center, a family support center sponsored by the First Presbyterian Church of Bellevue in the Lake Hills neighborhood, provides numerous programs that support individuals and families. These include before and after-school programs, medical and vision clinics. on-site school programs called Club Jubilee, mentoring, youth activities such as community service projects, and English-as-a-Second-Language classes with childcare. This center also provides community meal programs, some with an international focus, and a dental van for low-income children and adults.²
- Located in 6 elementary, 2 • middle and 2 high schools in the **Bellevue School District, Family Connections Centers** facilitate

improved access to human services between home, school, and community. Staff refer families to local agencies for clothing and food, as well as counseling, housing, employment, emergency financial assistance and health care. Many schools have students from refugee and immigrant families, as well as many families eligible for the free and reduced price lunch program.³

Single parents may need more support. Whether mothers or fathers, they often have special needs because they may be the sole providers of their children's needs. Nearly 11% of all households in Bellevue are composed of single-parent households.⁴ Families with a female householder, no husband present, and related children under age 18 had the highest tpoverty rates of families in Bellevue at 30.7%.⁵

respondents, about the same as 2011,

Support for Early Learning to Promote School Readiness

- In 2003, more than 120 agencies, organizations and individuals from across King County helped to develop An Early Childhood and School Readiness Action Agenda, which aims to improve school readiness for children birth to five years. It is part of SOAR, a collaborative focused on helping kids succeed from birth-24. Brain science and research concludes that children begin learning from birth, so the earlier a child has opportunities to develop socially, cognitively, and emotionally, the better he or she will do in school and life. One collaboration is the King County Early Learning Coalition that brings together early learning stakeholders to oversee SOAR's early learning activities. This coalition is one of ten in Washington State as part of the Department of Early Learning.⁶
- Eastside Pathways School Readiness
 Collaborative was formed to expend family and early learning opportunities in currently new underserved communities.
 Some of its activiites include hosting parent engagement opportunities and fostering collaborations among group members.⁷
- Home Visiting Programs have been shown to increase parent-child bonding and result in children gaining the social emotional and other skills that improve school readiness. The Parent Child Home Program is a voluntary home visiting program funded through a special initiative by United Way of King County throughout the county. There are two sites in East King County, one at Kindering Center and one at Encompass in North Bend. The services and information handouts are provided in the family's home language. 90% of families served by Kindering's Parent Child Program are under the Federal Poverty Level and half make

less than \$15,000 a year.⁸ At Encompass, in 2016-2017, 36 families were served, with 64% of them Spanish speaking households. A major challenge for this program is their large service area, requiring home visitors to coordinate visits to minimize extensive driving. Both programs are seeing increases in positive parent-child interaction, positive social interaction and participation by the child during the home visit.⁹

- Healthy Start is a voluntary home visiting program that uses the Parents as Teachers model to support healthy child development, enhance parenting skills, improve the quality of parent-child interactions and promote school readiness activities for at-risk families. This program results in increased parenting skills, low rates of involvement with child welfare, and parents meeting goals of being more independent, by going to work or school. In 2017 Healthy Start served 56 Bellevue individuals in 27 families: 61% identified as Hispanic/Latino; 30% had less than a high school diploma or no GED and less than 1% were homeless.¹⁰
- Eastside Baby Corner (EBC) supplies food banks, schools and other organizations with basic infant and child supplies like formula, cribs, diapers, and clothing. In 2015, they reported providing 859,676 diapers, 4,253 cans of formula, and 1,374 car seats to the community.¹¹
- Family, friends and neighbors (FFNs) provide care for an estimated 60,000 children in King County. For 28,000 of those children, FFNs are the primary source of care when parents are working or attending school.¹² Child Care Resources sponsors the Family, Friend and Neighbor Project, whose goal is to provide a comprehensive, community-based network of supports and resources for family, friend and neighbor caregivers and the children in their care. One activity is an informal play group called Play and Learn where children birth to five and their caregivers can interact. The Kaleidoscope

Play and Learn Model was designated in 2013 as a promising practice by the Evidence Based Practice Institute at the University of Washington. There are 8 such groups in East King County and two in Bellevue one of which is conducted in Mandarin and English, and one conducted in Spanish and English.¹³

Increased Resources for School-Aged Kids

 In 2015 King County Executive Dow Constantine proposed "Best Starts for Kids", a six year levy that would raise approximately \$58 million in the first year and a cumulative \$392.3 million to improve outcomes for all children and youth in King County focusing on prevention and early intervention.

These are the most effective and least expensive compared to the cost of treating serious problems such as mental illness and

substance abuse. Voters passed the Levy in November 2015 in King County. The split for the funds allocation

"Parenting classes are needed for different language groups in the school district." — Family Connections Centers Community Conversations

bucket of funding, the BSK Kids Health Survey was conducted. This survey was recognized with the National Equity Award. There was a high priority on capturing data from traditionally underrepresented groups which meant providing the survey in 6 different languages and the option of bilingual, bicultural phone interviews as well as paper and online surveys. Over 6,000 people participated, and the data is now available in an interactive format. This data will be used to better information future funding and programming for BSK, which will create more resources for school-aged kids. More information on the data findings is discussed in School-Aged Children & Youth section.14

Work/Family Supports

- Work and family support needs in the United States are increasing as more families work longer hours, and have more responsibilities in caring for their children, as well as for medically fragile, older family members; these caregivers are commonly called the "sandwich generation."
 - A 2013 Pew Research Center report found that in the U.S., mothers are the primary or sole income earners in 40% of households with children, compared to 1960 when only 11% were sole income earners.¹⁵ As of November 2016, however, 69% of children live in a two parent household in the US. Single mother led is now the second most common household

type at 23%. Sixty six percent of fathers and 62% of mothers work outside of the home.¹⁶

• According to the Employee Benefits Survey Report in Washington State published in 2013, from 2006 to 2013, there were across-the-board increases in the percent of employers that offered paid leave to employees with the exception of vacation leave offered to full-time employees as

includes 50% for children under age 5, 35% for children and youth age 5-24, 9% for Communities of Opportunity, a project in South King County, and 6% for evaluation, data collection and improving the delivery of services and programs for children and youth. As of 2017, the BSK core team has been hired and many of the grants have been allocated. Under the data collection "Renters need to help to know their rights as tenants. Renters are afraid to ask for repairs because they think the landlord will tell them to move out"

— Faith Community Conversation

shown in Figure 1. This reverses a trend in which employers offering some paid leave was decreasing.¹⁷ Especially hopeful is the news that more companies are providing some kind of sick leave benefits; without sick leave, many workers must choose between working when they, their children or an elderly parent is ill, using vacation days (if available), or risk losing pay or their jobs. This concern was mentioned again by human services providers who work with single parents. They expressed the need for childcare when their children are sick. However, there is still a gap for part-time workers for all paid leave, with a much smaller percentage receiving benefits when compared to those who work full time.

Need for Low-Cost Legal Assistance

Access to justice is an American value, but many low-income people are left out due to inability to pay for civil legal aid. Civil legal aid, legal assistance for those who cannot afford it, is also seen as an anti-poverty tool, allowing access to rights and benefits and advocating for laws and policies that promote fairness regardless of socioeconomic status. Nationally, there is an estimated 1 million low-income Americans in need of legal aid, but due to lack of resources, only 50% will be able to receive adequate assistance. Eighty six percent of the civil legal problems faced by low-income Americans in 2016 alone received either no legal assistance or inadequate assistance. These statistics represent the "justice gap", which is the difference between the number of people in need of legal civil aid and the current resources available. The justice gap continues to grow.¹⁸

YEAR	FIRMS THA TO FU		RED PAID	FIRMS THAT OFFERED PAID LEAVE TO PART-TIME EMPLOYEES				
	Undesignated	Sick Leave	Vacation	Holiday	Undesignated	Sick leave	Vacation	Holiday
2006	23.4%	46.1%	74.2%	71.0%	9.1%	17.6%	26.4%	28.9%
2007	20.3%	44.0%	73.1%	68.3%	7.4%	14.1%	23.05%	25.8%
2008	20.5%	41.7%	69.6%	66.0%	8.1%	15.5%	24.4%	27.0%
2009	22.5%	41.2%	64.2%	62.3%	8.6%	14.3%	22.8%	24.8%
2010	21.5	44.1%	67.9%	66.2%	8.2%	15.3%	22.2%	25.7%
2011	21.8%	44.9%	67.5%	65.3%	8.7%	15.5%	23.1%	24.3%
2012	63.5%	26.6%	44.2%	65.1%	24.8%	10.0%	15.4%	22.1%
2013	30.9%	49.1%	69.9%	90.1%	15.1%	23.55	28.7%	32.2%
Percent change from 2006 to 2013	7.5%	3.0%	-4.3%	19.1%	6.0%	5.9%	2.3%	3.3%

Figure 1 | Numbers are not directly comparable because the universe of employers surveyed changes from year to year.

- At the request of the Washington State Office of Civil Legal Aid, (OCLA), the State Supreme Court established a committee to oversee a comprehensive update of the 2003 Civil Legal Needs Study. The updated study released in June 2015 found that, consistent with the 2003 study, more than 70% of low-income households had a civil legal problem within the past 12 months but more than three guarters of them did not seek help or were not able to obtain legal help for these problems. Also, consistent with 2003, large percentages of low-income people did not get help because they did not understand the problems they faced had a legal dimension. There was also a change in what problems were experienced by lowincome Washingtonians. In 2003, the top problems were housing, family relations and employment; in 2015 the highest percentage of problems were in the areas of health care, consumer-finance (credit and debt collection) and employment. One positive finding was that while in 2003, 12% were able to get legal help, in 2014, 24% got legal help with one or more problems.¹⁹
- The Northwest Justice Project (NJP) provides a statewide law firm with 13 regional and 2 satellite offices to address

domestic violence, vulnerable populations,

homeowners facing foreclosures an online

help for other legal issues. In 2016, NJP

the civil legal needs of low-income people in Washington with some paid staff and a number of volunteer attorneys. NJP maintains the statewide legal hotline, CLEAR, and a number of specialized units including ones to help veterans, victims of

"Make sure all people/agencies serving others know of all of the resources in the community."

> — Bellevue Diversity Advisory NetworkCommunity Conversation

Finding Help: Information and Referral

 During the first six months of 2017, staff at the City of Bellevue's Mini City Hall (MCH) at Crossroads Shopping Center received 27,724 requests from customers for resource information, with 56% related to human service needs. In 2016, the MCH received 50,871 requests, with 54.5% related to human service needs. Due to the recession, staff began to see a steady increase in human service contacts, beginning in late 2008 and early 2009; the percentage has remained steady since them

percentage has remained steady since then. The most frequent human service requests during the past 6 months are centered on access to healthcare as well as uncertainty and fear about the future with existing healthcare. There is also a new trend since the federal election of people contacting MCH staff with concerns about travel and discrimination, ranging from uneasiness to fear centered on the travel ban and

> feeling less safe and welcome in their community. Families are seeking support and advice about next steps with these two issues and also are reporting incidents of discrimination and bullying and

asking for guidance with these issues. As in past years, affordable housing, mental health counseling referrals, job development and referrals for help with long term unemployment are the most frequent human service requests. While the total number of

•

clients have not increased since 2016, staff see a trend in spending more time with each customer as more agencies and organizations don't have the capacity to respond especially to those with limited English, mental health issues and those with healthcare questions and concerns about the future. Staff also report that some people who come in for help with a job search tell them that though the recession has been "officially" over for several years, they are still struggling with making ends meet with lower wage jobs with less hours and benefits. Customers also relate that the economy seems only to be better for the high tech, younger job seekers but actually is providing less opportunities for those left behind. This increases the stress and hopelessness that they feel about their lives improving. Volunteer interpreters and city staff offer help in Chinese, (Mandarin and Cantonese), Korean, Spanish, Russian, Ukrainian, Arabic, Hindi, Bengali and Urdu. Cultural Navigators assist customers several days a week in Spanish and Russian. Efforts to create written materials about city activities and services in languages other than English have been developing city wide and websites in different languages have been updated and improved with the launch of the city's new website. Staff have access to the dual receiver language line which provides an over-the-phone interpreter in over 100 languages at MCH and throughout the city at community centers. The MCH continues to refer newcomers to programs and events that help connect them to their new community. The city's Cultural Conversations program continues to grow in numbers and popularity since its inception in 2009 as a way to fight the isolation of moving from a persons homeland. Supporting and creating opportunities for community connection is a priority as more people from all over the world come to live in Bellevue.²¹

- During the 2003 Washington State
 legislative session, lawmakers passed a bill making the three digit dialing code "2-1-1" the official state number for information about health and human services, including access after a natural or other disaster.
 Washington Information Network (WIN 2-1-1) is a one-stop approach that streamlines access to social service agencies and resources. In the first quarter of 2017, the centers received 81,998 calls, leading to 129,024 referrals. The top unmet needs are emergency shelter and rent/mortgage assistance.²²
- Crisis Clinic is the designated agency in King County for 2-1-1. It provides services Monday -Friday from 8 am to 6 pm. In 2016, the number of calls for assistance countywide increased substantially with 151,841 in 2016 compared to 136,736 in 2015. Inadequate funding continues to impact staffing, and they were not able to answer all of the incoming calls. Of the calls answered and logged, there were 78,747 in 2016 compared to 99,121 in 2015.²³
- As Figure 2 shows, the percentage of calls from Bellevue residents for basic needs greatly increased although the total numbers of calls decreased in 2016. The number of calls answered and logged decreased overall as well. In 2016, calls for permanent housing totaled 328 compared to 440 in 2014. It represents 25% of the calls for basic needs, which was very similar in 2014. Within the basic need calls, calls for emergency shelter or motel vouchers represented 35% or 454 calls. In 2014, these calls represented 40% of the basic need calls.
- Calls for Domestic Violence Shelter remained similar with 6% or 76 calls in 2016 compared to 7% or 127 calls in 2014. In 2016, the percentage of callers identifying as homeless remained very similar with 24% or 552 callers compared to 23% or 806 callers. The top unmet needs for Bellevue callers are for emergency shelter, permanent housing and

rent assistance. In 2016, 85% of Bellevue King County 2-1-1 callers who disclosed their incomes lived below the poverty level. Among the Bellevue callers to the Crisis Line (the line for emergency crisis assistance), 77% lived below the poverty level.²⁴

Information and Referral

- In virtually all Community Conversations, participants frequently mentioned difficulties finding human services resources. These participants included human service clients, consumers, providers and especially English Language Learners.
- In the 2017 phone/online survey, 4% of respondents said that people in Bellevue do not have enough access to human services, slightly lower than 2015.
- The Muslim Community Resource Center (MCRC) provides culturally appropriate food and connections to community resources to the growing Muslim community in East King County. Their vision is to form and continue to have partnerships with existing agencies and have MCRC be the resource of last resort.

REQUESTS FROM BELLEVUE RESIDENTS FOR BASIC NEEDS RESOURCES FROM THE COMMUNITY INFORMATION LINE Number of Percentage Percentage **Financial Assistance** Total Calls Calls of Total of Total (includes Rent. Utilities. Received Received Calls for Calls for Year **Checking/Savings Acct and** for All for Basic Basic Financial Credit Counseling/Debt Mgmt.) Services Needs Needs Assistance 1996 642 2,390 26.8% _ -1997 26.2% 613 2,333 _ _ 1998 629 1,998 31.4% _ _ 1999 581 2.018 29.4% _ 2000 414 1.899 24.04% 2001 308 2,265 13.6% _ _ 2002 394 2,119 18% _ _ 2003 511 2,102 30% -_ 2004 555 2.587 21% --2005 543 23% 2.428 2006 552 465 3,156 18% 15% 2007 956 754 3,306 29% 23% 2008 954 780 3,390 28% 23% 2009 3.470 25% 31% 857 1,089 2010 893 1,101 3,360 27% 33% 2011 941 2,434 26% 39% 637 34% 2012 1,555 1,012 3.384 30% 2014 1,825 892 3,535 52% 25% 2016 1,298 585 2,317 56% 25%

Figure 2 | Source: Crisis Clinic, Community Information Line 2-1-1, July 2017

Staff from the Wrap-Around Services
 Program observed that a number of the
 parents they work with at the schools lack
 access to and knowledge of how to use
 technology for applying for jobs and signing
 their children up for programs at school. This
 makes it critically important that information
 be available in multiple formats.

Legal Services

- In the 2017 phone/online survey, lack of affordable legal services was rated as a major or moderate household problem by 8% of respondents, slightly lower than the 2009, 2011 and 2013 ratings. (This problem peaked in rating in the 2003 survey, when over 12% of respondents rated it a major or moderate problem.) As a community problem in 2017, it received a combined major and moderate rating by 30% of respondents, significantly higher than 2015.
- Participants in key informant interviews with Cultural Navigators in East King County mentioned that some of the clients seek help for civil legal issues such as landlord tenant disputes or immigration issues but the waiting time for an appointment is long or the amount of time they get is insufficient to deal with the problem completely.
- In the NextDoor Survey, about 10% of respondents rated *not being able to afford legal help* a major or moderate community problem.

Community Perceptions

- Twenty-three percent of the 2017 phone/ online survey respondents identified lack of parenting skills as a major or moderate community problem, about the same as 2015. Since 1995, this issue has been decreasingly identified as a community problem.
- Bellevue School District Family Connections Center staff and King County Library staff from the downtown Bellevue Library both identified the need for low cost legal assistance and referrals for

issues including child support, landlord-tenant, and family violence.

- Phone/online survey respondents who found help were asked to identify which organizations or persons provided assistance. Help was most often attributed to a family member, friend or neighbor (54%), health care provider (48%) or social service agency (26%).
- Some Bellevue employees, including those working in the Fire Department and Code Enforcement, noted that sometimes they encounter residents in the community that are isolated and not only need health care or help with their repair needs, but they also are isolated without family or friends who can offer support.
- In the 2017 consumer survey, about 44% of respondents rated not having community or individual support as a parent/caregiver of children as a major or moderate household problem.
- Lack of transportation, which is related to social support in that it can create isolation and lack of access to needed services, was hands down the most frequent mention as a gap with all populations and in all service areas. In the phone/online survey, "inadequate public transportation" has increased as a major/moderate community problem since 2003; in 2017 39% of respondents identified it as a problem, the fourth highest rating. As a household program in the same survey, this issue was identified by 21% of the respondents and was the second highest rated problem.

Implications for Action

 All families need support, regardless of socioeconomic status. However, some Bellevue families may continue to need additional social support to raise their children, care for aging and or disabled loved ones, or a combination of the three if they have limited resources. Family, friends and neighbors will be even more important to help because funding is often limited for many formal services, such as chore services and after school care, or some families may not meet eligibility criteria.

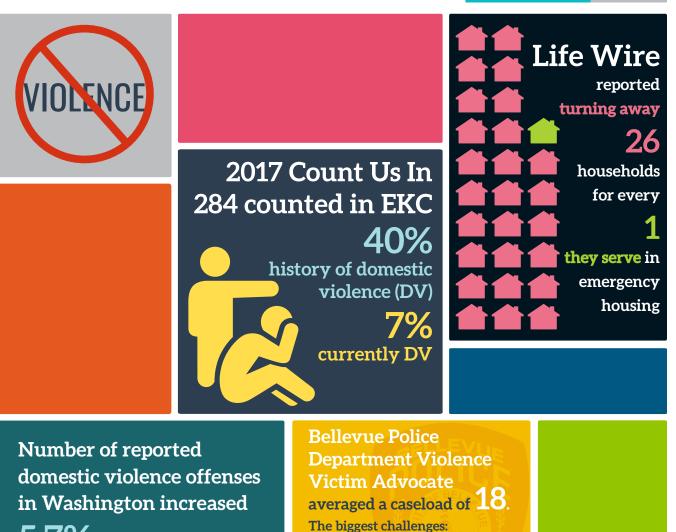
- The need for information provided in languages other than English continues to grow as the Puget Sound Region and East King County becomes more diverse. Human service providers, local government and businesses need to work together to meet this community need by providing resources in a variety of languages.
- Many residents still do not have easy access • to computers and instead rely on the phone. Multi-modal forms of getting information out to the community is critical. The Crisis Clinic's King County 2-1-1 is one way to fill this critical information gap. However, sustainable funding for its operation needs to continue as funding cuts results in fewer staff to answer calls. Another way to improve access is partnering with non-profit agencies, cities and faith communities to include information about resources through "low tech" ways such as printed media, multiethnic radio stations, public TV access, DVD's, and neighbors sharing information with neighbors.
- Low-cost or free civil legal services continue to be a need for many residents. A major gap for services exists for direct representation, especially for survivors of domestic violence, immigration issues, landlord-tenant issues and credit counseling.

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A Safe Haven From all Forms of Violence and Abuse



5.7% between 2014 & 2016

Lack of shelterAffordable housing

- Access to free/reduced full legal services
- Financial Resources
- Increase in non-English speaking clients

GOAL #3: A SAFE HAVEN FROM ALL FORMS OF VIOLENCE AND ABUSE

Why is this Goal Area Important? All forms of personal violence, including domestic violence, sexual assault, and child abuse and neglect, are unacceptable in any of our communities.

During times of stress, people can be more vulnerable, and may need more support to handle situations without violence. Early intervention with individuals and families is critical to prevent additional physical and mental health issues. Counseling, legal, and financial assistance are just a few of the supports needed to help survivors of abuse heal. But equally important are efforts to educate the community on what strategies are effective to prevent violence from occurring in the first place.

What's Working?

- The Harborview Center for Sexual Assault and Traumatic Stress (HCSATS) offers telephone consultations, crisis response, advocacy, therapy, and sexual abuse evaluations. Many services are free of charge or can be paid for by Medicaid or Crime Victim's Compensation. HCSATS also provides community education and workshops for providers to build skills and develop strategies to prevent sexual assault.
- LifeWire offers emergency shelter, transitional housing, rental assistance, and other types of housing assistance. They also offer advocacy-based counseling, the Help Line, support groups, legal advocacy, and a variety of children's services. Most clients who come into the program do so through the Crisis Line.¹

King County Sexual Assault Resource Center (KCSRC) provides services for sexual assault victims and their families. including trauma-focused therapy, legal advocacy, parent support and 24 hour crisis intervention services. In 2013. KCSARC launched Project 360, in partnership with Youthcare and Friends of Youth, a unique approach to providing trauma-focused services to homeless vouth who have been victims of sexual assault. The program includes specialized trauma work, case management, legal advocacy, prevention education, community response teams, and youthled prevention activities. Project 360 has seen great results, including youth in the program having an 83% symptom reduction, 93% of youth increasing their ability to function successfully in daily life and having 82% achieving increased stability through case management.²

Domestic Violence

Domestic violence (DV), more broadly intimate partner violence³, profoundly affects the lives of survivors as well as the entire community. Domestic violence incidents involve family or household members; traditionally, the term has referred to altercations between spouses and former spouses, but legally, it includes roommates with or without a romantic relationship, and parents or children. Individuals may be of the same gender. The financial and human costs of domestic violence are staggering, and can negatively impact generations to come. For example, in a 2009 study of women enrolled at Group Health Cooperative (now Kaiser Permanente) in Seattle, healthcare costs were 42% higher for those who reported ongoing domestic violence compared to women who did not report domestic violence. Among women who reported violence within the last 5 years but not ongoing violence, costs were 24% higher.⁴

Prevalence

- According to the Center for Disease Control, Intimate Partner Violence (IPV) is a significant public health problem. The National Intimate Partner Violence Survey (NIPVS) indicates that over 7 million men and women in the U.S. experience physical violence each year by a current or former intimate partner.⁵
- The number of reported domestic violence offenses statewide increased 5.7% between 2014 and 2016, from 49,360 to 52,159.
 Domestic violence offenses made up 50% of all crimes against persons in 2016.⁶
- On just one day in Washington, 1,413 domestic violence survivors were in emergency shelter and transitional housing, and 732 requests from survivors were turned down because programs did not have the resources to provide services; 87% of unmet requests were related to housing.⁷
- It is extremely difficult to determine the exact annual number of domestic violence victims. Statewide, there were more than 52,000 domestic violence related incidents. In 2016, the Bellevue Police Department recorded 453 domestic violence offenses.⁸

Bellevue Police Reports of Domestic Violence

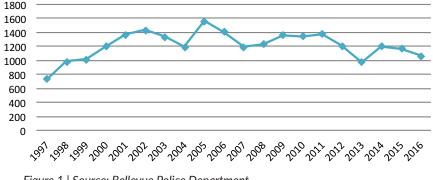


Figure 1 | Source: Bellevue Police Department

• As Figure 1 indicates, the number of reports of domestic violence to the Bellevue Police Department has remained relatively flat since 2007 with the exception of a drop in assaults in 2013. These numbers reflect calls in which domestic violence was indicated, but were not necessarily assaults.⁹

"The Bellevue Police Department will be relentless in its effort to rid our community of those who would take advantage of others for personal profit. I commend the hard work of our investigators and Federal partners in this joint effort,"

- Bellevue Police Chief Steve Mylett (on Human Trafficking Operation).
- The Bellevue Police Department (BPD) works closely with and relies heavily on LifeWire's services. In all cases of domestic violence where the police are involved, an advocate works with the person identified as the victim, explaining the complicated justice system, providing them with information on No Contact and Protection Orders, and planning for safety. The advocate accompanies the victim to court, works closely with the city attorney's office, and is in weekly contact with the prosecutor's office. The BPD Domestic Violence Victim

Advocate averaged a caseload of 22 cases per month in 2014. The average caseload in 2016 was 18.

The biggest challenges are lack of shelter, affordable housing, access to free/ reduced fee legal services, and financial resources, as well as an increase in non-English speaking clients.¹⁰

Service Trends

Accessing Services

- On the Eastside, LifeWire is the only provider of comprehensive services to survivors of domestic violence and their families. Several other agencies also assist survivors and may offer specialized services. These agencies include Eastside Legal Assistance Program, Refugee Women's Alliance, Jewish Family Service, Eastern European Counseling Center, CHAYA and Consejo. Additionally, Youth Eastside Services and Asian Counseling and Referral Service work with teens on dating violence.¹¹
- The King County Department of Community and Human Services Domestic Violence Program provides King County General Funds/Children and Family funding support to organizations that provide direct services to survivors of domestic violence and their children. Services include community advocacy, education, direct survivor services, shelter and outreach.¹²

Housing

- Housing is a major concern for survivors and their families. According to the National Coalition Against Domestic Violence, DV is the leading cause of homelessness for
 - women. In 2017, the Count Us In report (formerly One Night Count) found 11,643 people experiencing homelessness in King County; 284 were counted in East King County. Forty percent (40%) of respondents reported a history of domestic violence or partner abuse, with 7% reporting that they were currently experiencing domestic violence.¹³

- LifeWire is the only non-church affiliated provider on the Eastside offering confidential shelters. Through its Homelessness Services, LifeWire offers emergency shelter for families in lethal domestic violence situations through ten apartment units. It also offers emergency motel/hotel vouchers when needed and available. In addition, LifeWire provides transitional housing, delivering lengthier housing for up to ten families healing from both domestic violence and chemical dependency. LifeWire's Housing Stability Services provide rental assistance to families. It also provides flexible financial assistance and support services focused on obtaining/maintaining housing and homelessness prevention efforts. Ninety percent of Housing Stability participants remained in permanent housing after six months. One hundred percent of the families in LifeWire's housing programs are homeless or experiencing housing instability due to domestic violence.¹⁴
- LifeWire reports that their service levels are reflective of their capacity, not client demand. LifeWire has to turn away

26 households for every 1 they serve in emergency housing;

however, many of these families are served in their housing stability programs thereby reducing the turn away rate to 10-1. In 2016 337 families were served in their housing program, with over 50,000 bed nights, an additional 100 families received flexible funds at an average expenditure of \$770 per family to stabilize housing helping them to avoid homelessness.¹⁵

DV Crisis Line and Advocacy Services

LifeWire provides a 24-hour Helpline which is a gateway to all LifeWire services, including advocacy-based counseling, adult support groups and safety planning. There were 11,050 Helpline calls in 2016, an increase from 9,781 in 2014. Other advocacy services include resource and referral and education for survivors, family and friends, legal advocacy counseling, and education and coordination with the criminal justice system. In 2016, 961 Advocacy clients were served.¹⁶

Legal Assistance and Mental Health Counseling

- Legal assistance remains a primary need for survivors of domestic violence. Eastside Legal Assistance Program (ELAP) provides pro bono legal services for low-income families and individuals residing in East/Northeast King County. Through its Domestic Violence Legal Fund Project (DVLP), it also provides free emergency representation to low-income domestic violence victims residing anywhere in King County.¹⁷
- A 2013 economic study found that while shelter, hotlines, and counseling had no significant impact on the likelihood of abuse, the availability of legal services decreased the likelihood that women would be abused. Helping survivors legally pursue and obtain protection orders, custody, child support and other financial needs, gives them the physical safety and financial security that enable them to leave the abuser.¹⁸
- Included in the full range of services needed for survivors is mental health counseling. Providers report that many survivors are experiencing Post Traumatic Stress Disorder (PTSD) and suicidal ideation as a result of their abuse. There is a lack of counselors who have worked specifically with this population, and inadequate funding to cover services. Due to funding from the Mental Illness and Drug Dependency (MIDD) sales tax that passed in King County in 2009, mental health counselors were hired for each of the three regional domestic violence service providers, including LifeWire. At LifeWire, this full-time counselor works with survivors and their children on-site, which increases access to early intervention, prevents more severe mental health issues later, and increases coordination between programs.¹⁹
- Another issue for many survivors is substance abuse, which often affects both the perpetrator and the survivor. Drugs and alcohol are often used as a control issue by the perpetrator. Therapeutic Health Services provides on-site chemical dependency treatment to LifeWire clients at their transitional shelter, "My Friend's Place."²⁰

Calendar Year	Total # of APS Intakes received	Physical Abuse	Sexual Abuse	Mental Abuse	Neglect	Self Neglect	Exploitation of Person	Financial Exploitation	Abandonment
2000	7391	1258	260	1274	1867	1803	557	1831	68
	(89%)							(91%)	
2005	13973	2168	383	2214	2975	3107	885	3512	49
	(8%)							(29%)	
2010	15059	1489	372	2769	3081	4397	867	4565	46
	(45%)							(66%)	
2013	21896	2076	501	4312	4428	6328	1515	7599	86

Figure 2 | Source: State of Washington, Adult Protective Services, ADSA Reporting System

Services for Children Who Witness or are Victims of Abuse

Nationally studies show that 3-4 million children ages 3-17 are at risk of exposure to domestic violence each year. Research indicates that children who witness domestic violence show more anxiety, low self-esteem, depression, anger and temperament problems than children who do not witness violence in the home. These disturbances, also referred to as Adverse Childhood Experiences, can impede healthy development, cause school difficulties and physical health problems, and continue to be a problem into adulthood.²¹ LifeWire has ongoing support groups for children while their mothers are in their support groups; these groups address selfesteem, conflict resolution, and safety. A group called "Voices" was started for teens affected by domestic violence in their families. This group addresses dating/friend/family relationships and empowerment. They also have a full time youth advocate to work with teens who have experienced dating violence.²²

Older and Vulnerable Adult Abuse

• Although domestic violence, sexual assault, and stalking affect victims in all age groups, older individuals who are survivors face additional challenges in accessing services needed to enhance their safety. Appropriate interventions may be compromised by misconceptions that older persons are not victims of these types of crimes, that domestic violence does not occur or lessens in later life, or that the abuse is an expression of stress associated with caring for an aging individual. Age or disability may increase the isolation of these victims and their dependence on abusers for care or housing. Also, these cases may go unnoticed because medical and other professionals may perceive a victim's injuries as arising from aging,

illness, or disability instead of recognizing that the injuries may be attributed to violence in the home.²³

- No one knows exactly how many older Americans are being abused, but according to best estimates, the prevalence of abuse is approximately 10%. Only one in 25 cases of elder abuse is ever reported.²⁴
- In Washington State, Adult Protective Services (APS) reported a steady increase in allegations of overall intakes. As shown in Figure 2, there was an 89% increase in the number of APS intakes received over the five year period covering 2000-2005, an 8% increase between 2005 and 2010, and a 45% between 2010 and 2013. The most significant increase in reports for these time periods were in the area of financial exploitation.
- In King County, there were 4,344 reports of all types of abuse and neglect to APS in 2013, resulting in 3,568 investigations. This represents a 41% increase from the 3,076 reports received in 2009 and a 22% increase from the 2,909 investigations in 2009.²⁵ In King County, the Elder Abuse Council brings together members of the community from different jurisdictions and disciplines, such as law enforcement, prosecuting attorneys, DSHS Adult Protective Services, agencies such as KCSARC, and non-profits such as Disability Rights Washington and the Alzheimer's Association. The Council's mission is to improve the systemic response to elder and vulnerable adults in King County.²⁶
- The Bellevue Police Department is a member of the Elder Abuse Council. In Bellevue all cases of suspected elder abuse are assigned a detective to review and/or investigate as needed. Some are handled at the patrol level during normal calls for service and then referred to Adult Protective Services (APS). BPD works with APS to find resources for the older adult if no crime has occurred or

if the potential crime that is alleged will not be prosecuted due to the mental capacities of the participants. In 2015, there were 27 APS cases and in 2016, 35 cases in Belelvue. There is fluctuation in reports from year to year typical of cases of abuse. Some years, such as in 2012, there were 81 referrals. It is thought that a contributing factor in lower reporting is the reluctance of family members to report crimes committed by their older adult family members and of victims reluctant to press charges against family members who may be the perpetrators.²⁷

Refugees and Immigrants

In 2016, LifeWire staff reported that a majority of participants were racial minorities, reflecting the overall demographic of Bellevue.²⁸ Consejo, a Seattle-based Latino agency, began providing a DV advocate in 2004 on the Eastside to help address additional needs. In 2009, Refugee Women's Alliance began a survivors' support group in Bellevue to serve Eastern European immigrant and refugee women who speak Russian, Romanian and Ukrainian. Eastern European Counseling Services works with people from the Ukraine, former Soviet Union and other eastern European countries.²⁹

Need for Affordable Treatment Programs for Offenders

First-time domestic violence offenders are typically required to complete an intensive counseling program. These programs, all geared toward achieving victim safety, hold DV offenders accountable for abusive behavior while teaching healthy behavioral alternatives. Washington State certifies for-profit and non-profit substance abuse treatment agencies to provide courtordered domestic violence perpetrator treatment programs for low to medium risk offenders. For all the programs noted above, Probation staff help offenders locate programs and resources. Many defendants face barriers in paying for these services. Neither Domestic Violence Batterers' Treatment or Domestic Violence Moral Recogniton Therapy is covered by insurance benefits whereas Substance Use Disorder and Mental Health may be. Some agencies offer sliding scales for low income clients. There is a need for scholarships for those who cannot afford the cost of the programs. Defendants may receive sanctions from the Court, such as incarceration if they fail to attend or comply with their orders.³⁰

Community Perceptions

- Over the past 18 years, phone/online survey results indicate that Bellevue residents feel domestic violence is not a significant community or household problem. The number of respondents rating it as a moderate or major community problem was at its highest in 1995 at 33%. In 2017, only 17% rated domestic violence as a moderate or major community problem.
- In conversations with several faith community representatives, they commented on the increase of members of their congregations seeking them out for resources and support related to domestic violence.

Implications for Action

- The high cost of housing in Bellevue creates a serious challenge for survivors who want to remain in the community to maintain their jobs and support systems. More shelter beds as well as more permanent housing options with services are needed for DV survivors.
- Next to housing, one of the largest gaps in services for survivors is for legal representation for child custody, protection orders, immigration, and financial issues.
 When these services are unavailable, it becomes much harder for survivors to maintain their safety, return to employment, and become self-sufficient.
- Service trends and demographic changes in Bellevue indicate that the need for culturally responsive and linguistically appropriate

services for survivors continues to grow. Appropriate services are needed to keep up with the demand.

- Children and youth who witness domestic violence are at risk of internalizing the abuse. Data suggests that child abuse occurs in approximately 70% of families experiencing domestic violence. Holistic programs including prevention and earlier interventions are needed to break the cycle of abuse for future generations. Also, for children and youth who have witnessed abuse, programs that include support groups and individual counseling need to be available to address the resulting trauma.
- Services for older adult survivors of family violence need to be available to target the particular issues experienced by this population which often include financial exploitation, neglect and sexual abuse.
- Community awareness and engagement efforts ensure that the issue of domestic violence gains public visibility. Coordinated strategies should not only include better programs and access to services, but also ideas to prevent neglect and create positive norms.

Child Abuse and Neglect

Child abuse is the physical, psychological or sexual mistreatment, or physical neglect of children by their parents or guardians. Neglect is the most common form of child abuse, but rates are hard to establish because neglect is often unreported.

Prevalence

Nationally, an estimated 683,000 children were victims of child abuse or neglect in 2015, similar to the number in 2013. An estimated 1,585 children died due to child abuse or neglect in 2015 according to the National Child Abuse and Neglect Database, a very slight increase from 2011. In 2015, there were 85,096 reports of abuse or neglect in Washington State; of these, 37,501 received a response from Child Protective Services (CPS). This represents an 8% increase compared to 2011. In mid-2015, the State implemented an alternate intervention program, Family Assessment Response (FAR) that will offer an alternative investigation process in the case of less severe allegations of abuse and neglect.³¹ In 2016, CPS had 27,288 clients; 1,230 were from Bellevue.³²

Service Trends Risk Factors

- Child maltreatment causes stress that can disrupt early brain development. Extreme stress can harm the development of the nervous and immune systems. As a result, children who are abused or neglected are at higher risk for health problems as adults, including alcoholism, depression, drug abuse, eating disorders, obesity, sexual promiscuity, smoking, suicide, and certain chronic diseases. It is estimated that the lifetime financial costs of just one year of confirmed cases of child maltreatment is approximately \$124 billion.³³
- A study of abused and neglected children found that they had lower grades, more suspensions and grade repetitions, and were more likely to drop out of school than their peers, independent of the effects of poverty.³⁴ Additionally, abused and neglected children are arrested 4.8 times more often for juvenile crimes and are twice as likely to be arrested as adults.³⁵
- Returning service members who are experiencing Post Traumatic Stress Disorder (PTSD) and combat-related stress may also be at increased risk for abusing a child.³⁶

Best Practices

• Kindering Center provides parenting classes for families who are experiencing problems with childrearing, as well as services for children with disabilities, medically fragile or abused children up to age three. The CHERISH program provides support for foster or kinship caregivers who are caring for children under age 3 involved in the child welfare system. Kindering Center also provides a Parent Child Home Program (PCHP) an evidence based home visiting program focused on supporting low-income immigrant and refugee families with children 2-4 years old.³⁷

- Healthy Start, using the evidence based Parents as Teachers model, provides home visiting and support groups to young families (under age 24) with children birth to three years old. High quality home visiting programs increase the odds that children from at risk families will enter kindergarten ready to learn, and prevent child abuse and neglect by increasing parenting skills, parent-child attachment, and knowledge of child development.³⁸
- KCSARC provides Parent Child Interaction Training (PCIT) in English and Spanish to parents whose child was sexually assaulted or referred by CPS. KCSARC developed a specialized Parenting Enhancement Program (PEP) to assist parents "parent" their sexually abused child. The program provides 10 modules, which can be tailored to fit the unique needs of the family. PEP is provided in English and Spanish.³⁹

Community Perceptions

Few of the participants in community outreach conducted in 2017 (Community Conversations, key informant interviews, or surveys) mentioned child abuse and neglect as a community or household concern. This is not unusual with the sensitive nature of the issue.

Implications for Action

• Poverty can be a contributing factor in child neglect. Parents and caregivers experiencing economic hardship have challenges in providing the basics for their children. The same can be true for child abuse, due to stress from lack of resources or war-related traumatic injuries. With the challenges that many families are experiencing in day to day life, it is even more important to offer basic needs assistance to families with children, and provide outlets for stress and other issues to help prevent child abuse and neglect.

- Similar to children experiencing family violence, abused or neglected children also can bring those issues into the next generation when they act as they have been treated. These children need therapeutic care and opportunities to build trust and self-esteem to succeed in school and life.
- Programs that promote protective factors (like home visiting, which uses caring adults as role models and mentors to help nurture parenting skills), lessen the risk of child maltreatment. This program need to continue and expand

Sexual Assault, Rape and Child Sexual Abuse

Sexual assault and rape occurs in all communities and among all socio-economic groups. The majority of sexual assault victims are under age 30. With child sexual abuse (rape or assault), 66% of victims are between ages 12 and 17, and about 34% are under age 12.⁴⁰

Prevalence

- On average, there are 321,500 victims (age 12 and older) of rape and sexual assault every year in the United States.⁴¹ Most rapes and sexual assaults (2 out of 3) are not reported to police.⁴²
- In 2016, there were 2,223 rapes reported, resulting in 476 arrests in Washington State.⁴³ In the Office of Crime Victims study in Washington State, 85% of victims did not report their assault to law enforcement.⁴⁴
- Over the past 12 years, Bellevue Police Department's annual rape reports have generally remained between 20 and 30. However, there have been some spikes:

there were 38 in 2004, 42 in 2006, and 33 in 2008. There was a 60% decrease in reported rapes from 2009 to 2010, dropping from 25 to 10. The number of reported rapes rose again in 2011 to 23, and has leveled off in 2015 and 2015 to 25 and 15 respectively.⁴⁵

Over the past 7 years, there has been fluctuations in the number of accepted intakes for child sexual abuse in Bellevue zip codes. Accepted intakes include: 24 hour (emergent intake in which the child has to be seen within a 24 -hour timeframe by CPS) and 72-hour (a child has to be seen within a 3-day time frame). Both are intakes that are screened in for an investigation/response. In Bellevue zip codes in 2015, there were a total of 16 accepted intakes for child sexual abuse, and a similar number in 2016, with a total of 15. In prior years, there have been as many as 53 accepted intakes (2011).⁴⁶

Service Trends Long-term effects

- Adults abused as children who receive no treatment experience psychological distress many years after the abuse. These traumatic childhood experiences, also called Adverse Childhood Experiences or ACES, become significant risk factors for serious dysfunction later in life (substance abuse, depression, suicide, parenting problems). Without intervention or help for the child, normal psychological development can be negatively affected.⁴⁷
- Additionally, adults who have been sexually assaulted or raped also suffer many negative health consequences. They are 3 times more likely to suffer from depression, 6 times more likely to suffer from post-traumatic stress disorder, and 13 times more likely to abuse alcohol.⁴⁸

Needs for Services

- Many agencies are encountering increased service requests from refugees and immigrants. In 2017, KCSARC reports seeing an increase in Latina victims, now 21% of the agency's service population. KCSARC also reports that fear related to immigration status is a barrier to many individuals seeking services.⁴⁹ KCSARC, in partnership with Northwest Justice Project, provides advocacy, case management and civil legal assistance to low-income Latino sexual assault victims and their families, including helping with visas, child support and protection orders through the "Abriendo Puertas (Opening Doors) program.⁵⁰ KCSARC's Dando Voz Program, where all services to victims and their families are provided in Spanish, provides comprehensive sexual assault program for Spanish speaking victims and their families in the area. The program includes legal, medical and general advocacy, trauma focused therapy and specialized psycho educational programming to help parents support their sexually abused child.⁵¹
- Harborview Children's Response Center (CRC), which is a program of Services for Sexual Assault and Traumatic Stress (HCSATS), had provided advocacy and counseling for child and youth victims of sexual assault as well as community-based prevention initiatives since 1985. They also provided services to children impacted by other forms of trauma and victimization (e.g. physical abuse, homicide domestic violence, internet crime).⁵² In late September 2013, CRC was integrated in HCSATS and KCSARC for an expanded partnership in East King County. As a result of this change, HCSATS began serving adults for the first time on the Eastside. In 2014, the program reported serving 15 unduplicated adult Bellevue residents with ongoing counseling services. For adults and children combined,

the program served 56 Bellevue residents, a number expected to increase as more adults seek services on the Eastside.⁵³

- Similar to 2015, people receiving services at KCSARC report the major barriers to accessing services in the community are transportation, language, and cost of services.⁵⁴
- Sexual assault can lead to significant • mental health problems, and downstream consequences - such as substance abuse or involvement in the juvenile justice or criminal justice system - are more costly to address. In 2016, funding from the Mental Illness and Drug Dependency sales tax in King County continues to provide resources for community sexual assault programs to hire staff and fill this gap. In East King County, KCSARC and CRC each added counselors to increase on-site access for survivors. Using "best practice" interventions for children and adults. this coordinated effort is seen as a much needed systems-change approach.55
- Asian Counseling and Referral Service staff facilitates a Teen Peer Advocate Program that offers a peer-to-peer support group of young women in order to discuss healthy relationships and the prevention of dating violence.⁵⁶

Emerging Issues Women in the Military

Military Sexual Trauma (MST), sexual assault and harassment that occurs in military settings, is identified more frequently by the increasing number of women now serving in the military. Studies indicate that around 23% to 33% of female veterans report experiencing MST. 2-3% of male veterans are estimated to have experienced MST. Research shows that rates of MST are higher during war than peacetime. (Note: For more information about this issue, see the Veterans section in this report.)⁵⁷

Human Trafficking

- Human Trafficking is defined as the inducement of a personal sexual act, labor or service through force, fraud or coercion. To illustrate how vastly under-reported this crime is, in 2016, only 18 cases were reported by law enforcement agencies in the entire state.⁵⁸ The International Labour Organization estimates that there are nearly 21 million victims of human trafficking globally; 68% are trapped in forced labor, 26% are children, and 55% are women and children. Victims are coerced to prostitute or to work without pay and often subjected to physical and psychological dangers, such as severe beatings, rape, drug addiction and other forms of violence.⁵⁹ (Note: For more information about human trafficking, see the School-Aged Children and Youth and Refugees & Immigrant sections of this report).
- On June 6, 2017 a Cultural Conversation sponsored by the City of Bellevue focused on human trafficking, hearing stories from places as far as Nepal and as close as Bellevue about women and children who had been exploited. Resources were provided and tips on warning signs of this issue were discussed.
- In August 2017, the Bellevue Police Department in partnership with the FBI, King County Sheriff's Office, Renton, Redmond, Seattle and Tukwila Police Departments worked jointly to investigate a criminal ring making thousands of dollars through human sex trafficking. All those involved were charged with crimes related to prostitution.⁶⁰
- Washington Anti-Trafficking Response Network, WARN, is a coalition of organizations that provide direct services to victims of human trafficking, such as legal assistance and immigration advocacy and intensive case management. They also convene a statewide advisory committee that hosts quarter session to inform the community on anti-trafficking efforts in Western Washington and how service

providers, law enforcement and other groups collaborate to improve response to human trafficking.⁶¹

 In October 2016, Escape Center, East King County's only anti-sex trafficking facility, opened its doors. The organization offers both trauma therapy as well as opportunities for survivors to develop work skills.⁶²

Community Perceptions

Neither the phone/online nor consumer surveys have questions related to sexual assault or rape, nor was the issue mentioned in any of the Community Conversations. This is not uncommon due to the sensitivity of the issue.

Implications for Action

- Survivors of sexual abuse often have multiple needs including treatment for substance abuse, parental support and childcare, legal aid, counseling and transitional and permanent housing. These services should not be created in a "silo" but rather developed so that they can assist survivors of domestic violence and child abuse seamlessly.
- Sexual assault continues to be a public safety issue; in order for the community offenders to hold accountable, services must exist for those victimized.
- It is critical to support community education about sexual assault, rape and child sexual abuse, as decreased staff levels at many agencies may complicate finding and getting help. This education can also be copresented with topics related to other forms of family violence.
- Consent workshops for youth are rising in popularity among sexual assault prevention experts. Informing youth as to what sexual consent is, how to develop boundaries, and the legal definitions of assault can help them to make more informed choices as young adults.

- Several ongoing areas of concern in this service area that should still be monitored include Internet safety, on-line victimization of vulnerable youth, the potential needs of partners of returning veterans, women who are veterans, and exploited children and adults who are used for sex trafficking.
- There is a strong connection between early, untreated child sexual abuse and homelessness and trafficking. More than 40% of youth who are homeless experience sexual assault prior to becoming homeless. It is important that conversations about homelessness and trafficking include the issue of sexual assault.

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Health Care to be as Physically and Mentally Fit as Possible

91% of Bellevue residents have health insurance

In BSD 8.4 out of every 100 deaths

are attributed to drugs and alcohol related cause

of Bellevue residents did not have a dental checkup last year 332 drug use deaths in KC 66% related to opioid related overdoses

In EKC 8% of adults reported 14 or more days with poor mental health over the preceding 30 days 1000 children in Bellevue don't have health insurance

GOAL #4: HEALTH CARE TO BE AS PHYSICALLY AND MENTALLY FIT AS POSSIBLE

Why is this Goal Area Important?

Bellevue's economic health and well-being depends on the physical and mental health of its residents. Over the years, health care's rising cost, language barriers, transportation issues, and cultural competency have been obstacles for some residents to obtain the quality of health care they need. Since the passage of the Patient Protection and Affordable Health Care Act (also known as the Affordable Care Act or ACA) in 2010, some of the barriers to accessing health insurance are being addressed for much of the population of uninsured adults 19-64 years old.

What's Working?

- The King County Mental Illness and Drug Dependency (MIDD) Sales Tax revenue continues to fund a number of mental health and substance abuse programs countywide, increasing services to vulnerable populations. It has shown excellent outcomes which are generating savings by diverting patients from more expensive alternatives such as incarceration, use of hospital emergency departments, and in-patient hospitalizations. In East King County, one program funded is HERO House, a club house model of employment and support for people with chronic mental illness.
- With the passage of the ACA (and specifically the Medicaid waiver) approximately 93% of the state's population has health insurance coverage.¹

Snapshot of Health Indicators

Public Health Seattle/King County and the Washington State Department of Health track a number of indicators that help to identify a community's general health. Health risk factors are behaviors and characteristics that make people more likely to develop disease. Awareness of these risk factors may enable people to make healthy choices about their activities, habits, and diets. Some risk factors, like hypertension and high cholesterol, are also chronic conditions that should be monitored by a healthcare provider, and if treated, may be able to be prevented or reversed. There are nine of the most common health indicators with comparison data at the city, county and state level. Overall, Bellevue rates lower on the majority of the indicators compared to King County and Washington State, as shown in Figure 1.

For information regarding specific terms (e.g. prevalence), please see Appendix E.

Medical Care and Coverage

Until the passage of the ACA, there were primarily two public programs that provided health insurance coverage services to eligible individuals in Washington State: Medicaid (federal and state), and Basic Health (state). Together, these programs (in addition to smaller programs like Apple Health for Kids) helped ensure that many low-income individuals received care. Medicare, the federal healthcare program for adults age 65 and older, is not limited to people with low incomes. For a basic overview of these programs, please see Appendix E. Beginning

Health Risk Factors	Bellevue	King County	Washington State
High blood cholesterol	33	34.9	38.1
High blood pressure	26	26.3	30.2
Excessive alcohol consumption	17	21.5	18.8
Obese*	16	22	27.5
No physical activity	16	16.2	19.7
Current smoker	10	13.6	16.5
Have asthma	6	8.7	9.7
Have diabetes	5	7	8.8
Had coronary heart disease or heart attack	3	2.9	3.7

Figure 1. Health Risk Factors (2010-2014 Averages) shown in percent | Source: Public Health/Seattle&King County City Health Profile, March 2016 | *indicates a statistically significant difference

in October 2013, uninsured adults (age 19-64) whose incomes were too high in the past to qualify for Medicaid had the opportunity to enroll in the program due to the expanded income guidelines (up to 138% of the federal poverty level) or to enroll in a subsidized health plan by accessing the new online marketplace, Washington Healthplanfinder. However, because undocumented immigrants are not eligible for any health insurance under the ACA,² there remains a great need for health care for this population.

On March 12, 2014, the Washington State • Legislature passed legislation that changes the way Medicaid-funded health services will be purchased and delivered in the state. The legislation calls for the integrated purchasing of behavioral health (mental health and substance use disorder) services through a single managed care contract by April 1, 2016 and for the full integration of physical health and behavioral health by January 1, 2020. As an initial step in this process, the state legislation called for aligned purchasing to happen in regional services areas across the state- King County is designated as one of these regions. This change will provide integrated, whole person care that improves outcomes and lowers costs.

"People are worried about what changes to health care would mean for them. Will they still be covered? People on expanded Medicaid are especially concerned."

- Bellevue Mini-City Hall

Key Informant Interview

Prevalence

 Insurance: As of March 2017, more than 1.9 million Washingtonians are enrolled in Medicaid programs, including 613,000 in Medicaid expansion. This compares with fewer than 1.2 million people enrolled in Medicaid in 2012. About 428,000 King County residents are enrolled in Medicaid programs, including 150,000 in Medicaid expansion.³

No Insurance: Of the entire population of Bellevue, less than 9% were uninsured in 2015.4

According to Public Health-Seattle King County, 13% of adults age 18-64 in Bellevue were uninsured, compared with 15% across the county.⁵

Individuals with no health insurance in Bellevue (2015)

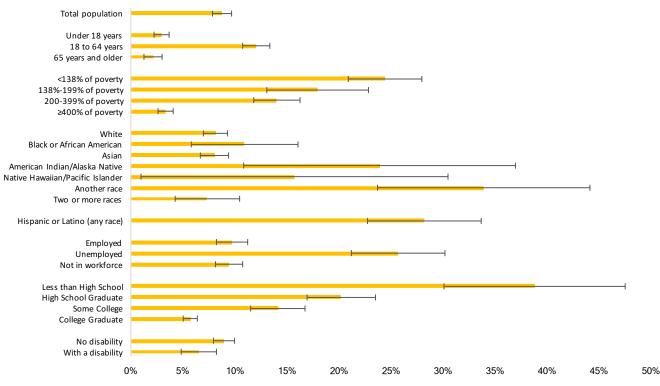


Figure 2. Individuals with no health insurance. Obtained via ACS.

• Nearly 1,000 children in Bellevue do not have health insurance.⁴ Under the

State's Apple Health for Kids Program, children whose families earn up to 200% of the federal poverty level (FPL) will continue to get health insurance at no cost. Children in households with incomes between 200% and 300% of FPL will remain eligible for low-cost health insurance; children in families with incomes up to 400% of FPL may be eligible for subsidies through the Washington Healthplanfinder.

Disparities in Health, Care and Coverage

- Lack of health insurance was related to household poverty, education, race/ethnicity and education in Bellevue. As Figure 2 shows, individuals with incomes under 200% of FPL were more likely to be uninsured.⁷
- Significant racial disparities exist with regard to certain health outcomes and indicators. African-American infant mortality rates in

King County are 7 per 1,000 compared to 3.4 per 1,000 for Whites.⁸ As another example, the life expectancy at birth for American Indian/Alaska Natives in King County is almost five years less than Whites, and almost 10 years less than Asians.⁹

"People who are not exactly retirement age but needing to leave their job for some reason are scared to lose access to healthcare."

- Bellevue Mini-City Hall Staff

 Frequent Mental Distress (FMD) was much more common in low-income respondents. Twenty-six percent of those with household incomes below \$15,000 per year experienced FMD, almost four times higher than the rate of people in households earning \$50,000 or more per year. Seven percent of Bellevue adults experience frequent mental distress (compared to 10% countywide). Low economic status and high rates of mental health problems are closely linked.¹⁰

- For many, language barriers create major access problems. According to the City's demographer, the number of people who speak a language other than English at home has grown to nearly 50,000 in 2011-2013, or 40 percent of the population. In the 2016-2017 school year, Bellevue School district counted 95 different languages being spoken at home by their students.¹¹
- Limited English proficient individuals are at greater risk for experiencing medically adverse events (e.g., surgical infections, line infections, etc.) and medical errors due to language barriers.¹² Research has shown that "individuals with limited English proficiency are more likely to experience difficulty accessing medical care, compared to their English-proficient counterparts".¹³

Service Trends Access to Care

• When people are uninsured, they typically use the emergency department (ED) of a local hospital for healthcare, which is extremely expensive. Many patients cannot pay these bills, so they apply for what is called "charity care" from the hospital, which may pay for a portion of their bills (from 20% to 100%). Washington State is one of only a few states with a law governing charity care. The law was enacted in 1990 with the support of Washington's hospitals. Other states with charity care laws have usually developed mechanisms to fund the care provided. In Washington, however, there is no charity care pool to reimburse hospitals for their costs and hospitals must find ways to cover their expenses, often through philanthropy, but these costs are otherwise categorized as uncompensated

care. Between 2013 and 2014, the total cost of uncompensated care dropped from \$2.35 billion to \$1.20 billion, a decline attributed to the substantial reduction of the uninsured in the state.¹⁴

 Another indicator of lack of access to healthcare is unmet medical needs, that is, the need was not met due to cost. Between 2010 and 2014, 10% of East King County residents reported they could not take care of their medical needs due to cost, compared to 17% of South Region and 11% of North Region. In Bellevue, 11% of residents overall reported not being able to take care of their medical needs due to cost. In King County, the percentage was 14% and in Washington State, 15%.¹⁵

Care for Bellevue Residents

HealthPoint serves low-income adults, children and youth, many of who are homeless or in transitional housing. In 2016, HealthPoint provided medical care to more than 1.400 Bellevue residents. HealthPoint's medical and dental facilities in Redmond and Bothell annually serve more than 18,800 clients. Since the expansion of Medicaid and other insurance coverage in 2014 under the Affordable Care Act, HealthPoint reports a drop in uninsured patients – decreasing from 31% in 2014 to 16% in 2016. While health care reform has helped thousands of people access health care coverage, there are still thousands of Eastside families and individuals who remain uninsured. For example, undocumented immigrants are ineligible for Medicaid and aren't allowed to buy insurance on the state's health insurance exchange. Immigrants who are here less than five-years are not eligible for Medicaid or other public assistance. Low-income households with income above 138% federal poverty level (FPL, the income limit to qualify for Medicaid) but still lower than 200% FPL often cannot afford the coverage offered through the state's

insurance exchange. While the exchange offers cost-sharing and tax credits to lower the cost of insurance, the costs of premiums, co-pays and co-insurance are still unaffordable for many families.¹⁶

- The Eastgate Public Health Center also provides services for children, youth and families, many of them Bellevue residents. Programs and services include Child and Family Health, Dental, immunizations, family planning, and a teen walk-in clinic for homeless youth and young adults. Eastgate offers free or low-cost care. If payment is requested, fees are based on income and family size; staff also assist clients with insurance applications and accepts the health plans available on the Exchange, Medicaid, and Medicare. In 2016, Eastgate served 1,739 clients in Family Support Services (including Maternity Support Services, Infant Case Management, and Children with Special Health Care Needs) as well as 2,641 clients served by the Women Infant and Children Program (WIC).¹⁷
- International Community Health Services (ICHS) is a Federally Qualified Health Center (FQHC) that provides health services, including dental and behavioral health, to underserved populations in King County. Their services are open to all races and ethnicities, but they have cultural and linguistic expertise in the Asian, Native Hawaiian and the Pacific Islander communities. In 2014 ICHS opened a clinic in the Crossroads neighborhood in Bellevue that includes dental services. In 2015-2016, ICHS served approximately 2,500 unduplicated Bellevue clients.¹⁸
- SeaMar Community Health Centers is an FQHC that provides medical, dental and behavioral health services that are open to all races and ethnicities, but they have cultural and linguistic expertise in the Latino community. In the Bellevue clinic, the focus is medical and behavioral health. Clients are typically at or below 200% of the FPL.

In 2015-2016, SeaMar served about 4,000 Bellevue residents.¹⁹

Community Perceptions

- Affordability of medical care and medical insurance was a significant community and household concern for phone/online survey respondents. Forty-five percent of survey respondents rated *lack of affordable medical insurance* as a major/moderate community problem, a statistically significant increase from 2015 (35%). Forty-two percent of survey respondents rated *lack of affordable medical care* as a major/moderate community problem, also a statistically significant increase from 2015 (35%).
- In the phone/online survey, not being able to pay for medical insurance was a problem for 12% of households. Not being able to pay for doctor bills was a problem for 11% of households.
- Respondents with incomes of less than \$75,000 are more likely to rate not being able to pay for medical insurances as a major/ moderate problem in their household compared to those with incomes of \$75,000 or greater. Respondents who were most likely to rate not being able to pay for doctor bills as a major/moderate household problem also fell into this income category.
- Medical/billing issues was the top issue for which residents sought help (45%), but only 15% reported finding the needed help.
- Among consumers of human services who responded to a survey in 2017, 78% rated not being able to pay for doctor bills as a major/moderate problem. Many respondents (55%) rated not being able to pay for or get medical insurance as a major/moderate problem for their household. Both ratings were higher than the 2013 consumer survey.
- 28% of human services providers stated in an online survey that their clients report health care as one of the services they need but for which they cannot find a resource.

- Staff from the City's Neighborhood Outreach Program has been hearing from residents about concerns over potential changes in health care and whether or not they will still have the same coverage or any coverage at all. Recent immigrants are especially concerned, as they may not qualify for Medicare and need to buy insurance on the private market.
- Lack of health care for many students at Bellevue College (BC) is a reason they drop out of classes or do poorly academically, according to BC faculty and staff participating in a focus group on needs of students. Sometimes students must make the choice between paying for school or taking care of a medical issue.

Dental Care Prevalence

 On average from 2010-2014, East King County residents were more likely to have had a dental checkup in the last year than those living in South King County or Seattle; 29% countywide did not have a dental checkup in the last year, compared to 22% of

East King County residents.

In Bellevue, 22% did not have a checkup in the last year.²⁰

 Poor oral health of children has been linked to diabetes, heart disease, and other longterm health problems. East King County school-age youth were more likely to have a dental checkup in the last year than those living in South King County or Seattle; 16% countywide did not have a dental checkup in the last year, compared to 12% of East King County youth.²¹

Service Trends Accessing Care

Even if a family is informed about the importance of preventive dental care, accessing such services can be very difficult for low-income families. The Affordable Care Act does not require dental care for adults, though plans can be found for children in the Washington Health Plan Finder.

Dental Services in Bellevue for Low-Income People

 The Eastgate Public Health Center runs a dental clinic for low-income people served through WIC (Women, Infants and Children, a federal nutrition program for pregnant women and children) which served nearly 2,600 women and children and homeless youth in 2016.²² Medical Teams International

"Dental needs for young children and for their parents are high. Even if they receive state support, the number of providers who will accept these subsidies are very low"

- Provider Survey

provides a dental van once a month at Jubilee REACH at no cost to adults who are low-income and have no dental insurance. To receive this service, the adults must have been enrolled in

Jubilee REACH programs and have a child attending the Bellevue School District.

 Low-income Bellevue children can receive dental services from four private clinics participating in the Access to Baby and Child Dentistry (ABCD) program and Eastgate Public Health.²³ In addition, ABCD provides dental services to children ages birth through five who are on Medicaid. Low-income households can also be served through other clinics such as International Community Health Services, HealthPoint, and SeaMar Community Health Center. HealthPoint, a community health center serving East King County residents, identifies dental services as a growing need, especially for children and the uninsured. HealthPoint's dental center in Redmond has seen a decreased percentage of uninsured patients since the Affordable Care Act took effect in January 2014: however. the uninsured rate in East King County remains high. The percentage of uninsured patients seen at HealthPoint's Redmond location is almost twice as high as it is at their North and South King County locations. More than half of the patients served at HealthPoint's Redmond dental center (54%) live below 100% of the federal poverty level (\$24,600 for a family of four) and 96% are low-income households living on less than 200% of the federal poverty level.²⁴

Community Perceptions

- Thirty-six percent of phone/online survey respondents cited *lack of affordable dental care* as a major or moderate community problem; up from 32% in 2015. Despite steadily decreasing over the years, the *inability to pay dental bills* still remains a Top Tier problem for Bellevue households, with 10% reporting it to be a moderate or major problem. Respondents with annual incomes below \$75,000 were more likely to report this being an issue than those with incomes over that amount (23% vs 6%).
- About 90% of consumer survey respondents reported that *not being able to pay for dentist bills* was a major or moderate problem in their households.
- In the provider survey, 40% of respondents reported that dental care is one of the services that their clients report they need but cannot find a resource in the community.
- Providers note that even with the presence of community health centers on the Eastside, sometimes copays can be unaffordable for some clients. Even with support (e.g., ABCD program) there are few

providers on the Eastside who will accept these subsidies.

• Nurses in the Bellevue School District identified a need for healthcare for the parents of their students. Low cost dental services and eyeglasses are also hard to find for low-income adults.

Prescription Drugs, Hearing Aids and Eye Care

- Medicaid and Medicare provide prescription • drug coverage, though with some limitations. For example, Medicare Part D, which began in 2006, requires that members enroll separately in a program for prescription drugs. In 2007, the standard benefit included an initial \$265 deductible. After meeting the deductible the beneficiaries paid 25% of the cost of covered Part D prescription drugs, up to an initial coverage limit of \$2,400. Once the initial coverage limit was reached, beneficiaries were subject to another deductible, known as the "Donut Hole," or "Coverage Gap," in which they paid the full costs of drugs. However, beginning in 2014, the ACA provided coverage for this gap by discounting covered brand name drugs and other benefits.
- According to the National Institute on Deafness and Other Communication Disorders, about 15% of American adults (37.5 million) aged 18 and over report some trouble hearing. About 13% of people aged 12 and older has hearing loss in both ears.²⁵ Hearing aids for people with hearing loss are not covered under Medicare²⁶ or Medicaid²⁷, and are not covered through the Affordable Care Act.²⁸
- Another gap for people with low-incomes is coverage for prescription eye glasses. Medicaid covers some eye surgeries and vision screenings, but not glasses. Medicare enrollees can purchase a Medigap policy that may cover eye glasses but this is not covered in the general policy. The ACA

does not provide vision coverage, though qualified health plans should include pediatric vision services.²⁹

Substance Abuse Prevalence

 Heroin & Opioid use and related deaths have increased significantly across Washington in the past decade, especially among people younger than 30.³⁰ In 2016, there were 219-heroin & opioid related deaths in King County, Demand for heroin and prescription opiate addiction treatment has outpaced supply; treatment admissions for heroin were up 101% between 2010 and 2014, but leaving more than 150 people on treatment waitlists each day.³¹ Overall

drug use deaths hit a record of 332 in King County last year, with two thirds related to opioid

related overdoses.³² On March 1 2016 King County Executive Dow Constantine announced the formation of an Opioid and Prescription Drug Task Force for King County. A member of the Bellevue Fire Department was appointed to this group. A report released in September 2016 recommended three main areas for action to address the problem: prevention(e.g., safe storage of prescription drugs in the home);treatment expansion and enhancement (e.g. alleviate barriers placed on opiate treatment programs); and user health and overdose prevention (e.g., expand distribution of naloxone in King County).³³ For additional information, see Heroin & Prescription Opioid chapter.

• Other trends in King County substance abuse include a decrease in the presence of Spice and "bath salts" detected in law enforcement evidence. The largest numbers of calls to the Recovery Help Line most frequently reported drug is heroin, methamphetamines, and prescription pain pills.³⁴

In the Bellevue School District area, 8.45 out of every 100 deaths are attributed to drug or alcohol

related causes. This is lower than 12.36 statewide rate; 13.39 for Seattle; 12.55 for Snoqualmie Valley; 10.14 for Issaquah; and 9.61 for Lake Washington. Similarly, the number of adults receiving statefunded alcohol or drug treatment is lower in Bellevue (3.36 per 1,000 adults) compared to the rest of the State (12.95 per 1,000 adults).³⁵

- During the time period 2011-2015, Bellevue had a lower smoking rate (10%) for adults compared to 13% countywide, although this difference was not statistically significantly.³⁶ Bellevue has slightly lower rates of binge drinking (14%) as compared to the county (20%) for the 2010-2014 period. Among adults in King County, men and people ages 18-24 are more likely to binge drink.³⁷
- The rates of East King County teens who have smoked cigarettes in the past 30 days (8%) are slightly lower than Washington State rate (9%).³⁸ The rate of teens who have engaged in binge drinking (defined as 5 or more drinks) in the last 14 days in East King County (13%) is the same as the Seattle rate and higher than the rate in both North and South King County (12% each).³⁹
- East King County is below the rest of the county and the state in teen rates for current marijuana use for students in grades 8, 10, and 12. 15% of East King County teens used marijuana or hashish in the preceding 30 days, versus 17% countywide (21% in Seattle).⁴⁰

Service Trends Client Profile

Therapeutic Health Services (THS) provides chemical dependency and mental health services. The agency reports that "there are an estimated 208,000 people across King County who need treatment for substance abuse disorders, but only about 52,000 are receiving treatment. This represents a 25% treatment gap.⁴¹

Access to Treatment

 The King County Substance Abuse Prevention and Treatment Annual Report (2014) indicates that 8,184 adult and 1,994 youth outpatient admissions in 2014. There were 3,174 detoxification center admissions. For adults, the largest proportion of those admissions (48%) were related to alcohol. For youth, the largest proportion was for marijuana (77%).⁴²

"There is a need for a hoarding support group on the Eastside. There is also a need for resources for the hoarders loved ones who want help."

- Bellevue Code Enforcement Staff

 Staff from the City of Bellevue Probation Division report that the most frequently needed services for their clients are courtordered chemical dependency assessments and treatment, urinalysis assessments and domestic violence perpetrator programs.
 Many of their clients do not qualify by income for ADATSA services though they cannot afford the cost of the services. Mental health assessment and counseling are also difficult to find as well due to eligibility for assistance and cost of services. In addition to Probation services, staff stated that their clients have many needs related to transportation, ranging from a need for bus tickets to attend probation meetings or court hearings to regaining their licenses after suspensions for Driving Under the Influence (DUI) with a "License Support Program". Another need is for employment for ex-offenders.

Community Perceptions

33% of 2017 phone/online survey respondents reported drug problems and 21% reported alcohol problems as major/moderate problem areas in the community.

Mental Health Prevalence

- About 20% of adults in the US experience mental illness each year. About 4% of all adults experiences a serious mental illness annually. About a fifth of youth age 13 to 18 experiences a serious mental disorder.⁴³
- 8% of East King County adults had 14 or more days with poor mental health over the preceding

30 days (2010-14 average). This is in contrast to 9% and 11% in North and South King County, respectively, and 10% countywide.⁴⁴ Twenty-one percent of adults countywide report that they have no social support, compared to 17% in East King County (2008-2012 average).⁴⁵ About 20% of East King County teens report having no adult to talk to about something important, compared to 26% countywide.⁴⁶

- There were 12.4 suicides per 100,000 deaths in King County (2010-14 average). This is compared to 11 suicides per 100,000 in East King County and 10.2 in Bellevue.⁴⁷
- In Washington's 9th Congressional District, there are more than 40,000 veterans,⁴⁸ about 7,000 of whom live in Bellevue.⁴⁹
- Research suggests that between 10% and 18% of veterans of Operation Enduring

Freedom and Operation Iraqi Freedom may have post-traumatic stress disorder (PTSD). Between 3% and 25% may develop depression. According to the US Veterans Administration (VA), through 2009 there were one million veterans who returned from operations in Iraq and Afghanistan.

Of those, about 220,000 sought VA services and were diagnosed with mental illness.⁵⁰

Service Trends

- Youth Eastside Services report a higher demand than usual for mental illness services for youth. They are seeing a trend with youth presenting with cooccurring mental health and substance abuse issues.
 (Note: For more information about this topic, see School Age Children and Youth in this report.)⁵¹
- National Alliance for Mental Illness (NAMI), • Eastside affiliate, provides support groups and classes for consumers and their families. They provide community education through monthly forums, middle and high school presentations, and a presentation called "In Our Own Voice" presented at colleges, health clinics, and to first responders, to dispel the stigma and discrimination of mental illness. Signature classes such as Family to Family help provide problem solving and coping skills, information on medications, review of various diagnoses, basics about the brain, a go to crisis file and finding resources for recovery to sustain continual advocacy and support. In East King County, staff reports that the Family to Family classes (12 weeks with each class at 2.5 hrs. long) consistently has an average of 30+ people on the wait list. Last year, it was more than 100 and was 121 as of mid-July, 2017. They have

"Mental Health treatment and substance abuse counseling is costly and can be difficult to find quality providers with openings and willingness to work with our high needs populations. Also finding providers with language capacity and cultural awareness to skillfully provide these services for refugee and immigrant youth is scarce."

- Provider Survey

increased the number of classes they offer each year to meet the need. This year they started an Essential-Self Care workshop by Dr. Brenda Butterfield, with nearly 30 participants and 30+ more on our the waitlist for the next one. NAMI Eastside also started WRAP (Wellness Recovery Action

Plan) this year, a self-designed prevention and wellness process that anyone can use to get well, stav well and make their life the way they want it to be. WRAP was developed by Mary Ellen Copeland, and has been studied extensively in rigorous research projects and is listed in

the National Registry of Evidence-based Programs and Practices. It is a 8 week course each class 2.5 hours long.⁵²

- Crisis Clinic provides a 24-Hour Crisis Line. In 2015, the 24-Hour Crisis Line responded to nearly 9,000 calls from Bellevue residents.⁵³
- In 2015, the King County Regional Support Network provided crisis stabilization services to 2,732 people. In 2013, this figure was 2,124. The County attributes this increase to the launch and expansion of their mobile crisis team and crisis diversion facility.⁵⁴

Access to Publicly Funded Mental Health Care

 In 2016, King County extended its onetenth of one percent Mental Illness and Drug Dependency (MIDD) sales tax that supports a wide array of services for people living with mental health and substance disorder

services through 2025. King County's MIDD is organized into five overarching strategy areas: prevention and early intervention, crisis diversion, recovery and reentry, systems improvement, and therapeutic courts responding to the behavioral health continuum of care. Services are provided county wide, and range from outpatient behavioral health treatment to substance disorder treatment services to those in the King County jail to behavioral health services for survivors of domestic violence and sexual assault. Between October 1, 2015 and September 30, 2016, a total of 6,620 East King County residents (or 16% of individuals served countywide) received at least one MIDD-funded service. MIDD strategies serving the most Eastside residents were: Youth Suicide Prevention Trainings (4,577 served), Older Adults in Primary Care (702 served), Mental Health Treatment (268 served), Children's Crisis Outreach (240 served), Collaborative School-Based Care (119 served), and Domestic Violence Mental Health Services (103 served).55

The King County RSN provided mental health services to nearly 54,000 people in 2015, a 20% increase over 2013. Of the 46,000 clients served through outpatient care, about 28% were children; over 59% were adults; and 21% were older adults. About 22% presented with co-occurring disorders and 8% were homeless.⁵⁶

Community Perceptions

- 30% of phone/online survey respondents rated *mental illness or emotional problems* as a major/moderate community problem in 2017; this was not a statistically significant difference from 2015.
- Of those survey respondents who sought help for their problems, 43% were seeking help for mental health counseling. Helpseekers were less likely to receive help from a mental health therapist than a family member or friend or neighbor (40% vs. 54%).

Of the respondents who indicated that they or someone in their household had sought help, 92% could not find help for mental health counseling.

- Nearly 20% of consumer survey respondents said that *having a lot of anxiety*, *stress or depression which interferes with your daily life* was a major/moderate problem in their household, approximately the same as in 2015.
- 32% of providers responding to a question in an online survey reported that mental health care was a service that families needed but could not get.
- Youth service providers like Friends of Youth and Youth Eastside Services note that they are seeing increasing numbers of youth with co-occurring disorders. In addition, more youth are attempting suicide and engaging in self-harm, such as cutting.⁵⁷
- There is a need for more specially trained caregivers for people with psychiatric needs and transportation to access services for mental health appointments, according to Bellevue Fire Cares outreach workers.
- Mental Health providers in the Eastside High Needs Utilizers group recommended that a crisis response team and a sobering center be available in East King County to end the current situation in which people who need these services must be taken to Seattle.
- In the NextDoor Survey, 22% of respondents rated having a lot of anxiety, stress and depression that interfers with your daily life as a top household problem, the second highest rating.

Implications for Action

 Under the health care plans made available after the Affordable Care Act, many vulnerable people now have coverage who were uninsured before ACA. However, coverage does not automatically translate into positive health outcomes. Helpseeking behaviors, a lack of understanding of how to navigate health care settings, attitudes toward prevention, attitudes and beliefs regarding science, and the need for patients to build trust in the medical profession, are just a few of the phenomena that can impact health outcomes even after one is insured. This presents a challenge both for health care systems to pivot such that they can affect attitudes and beliefs among the newly insured, as well as for the newly insured to adopt new beliefs and behaviors.

- With uncertainty about potential changes to the ACA in 2017, it will be important to closely monitor how these changes may affect Bellevue residents.
- Community education around co-occurring • disorders and self-medication is still needed. both to combat the stigma around mental illness, but also to address the often artificial perception that mental illness and addiction do not impact each other. Substance abuse among adults and youth continues to affect individuals and families, and the rise in heroin use has been particularly startling. Continued community education about the risks, and better understanding about the causes, need to be part of the community dialogue to address this increase. With the growing problem of opioid addiction plaguing King County, it would be prudent to develop a regional approach to addressing some of the recommendations of the King County Heroin and Prescription Opioid Task Force some of which are very actionable.
- Though the number of people who currently have insurance due to health care reform has grown tremendously in the State,
 County and Bellevue, there are still pockets of the population, such as some immigrant groups and those who cannot afford high copays and premiums who do not. These health care disparities can be addressed by providing additional support through community health care clinics that will treat those without health insurance.

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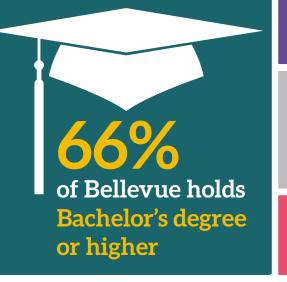
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Education and Job Skills to Help Individuals Reach Their Full Potential





Job growth continues to outpace population growth in Bellevue

Childcare in EKC for an infant and pre-schooler in full-time care cost

\$30,876/year

GOAL #5: EDUCATION AND JOB SKILLS TO HELP INDIVIDUALS REACH THEIR FULL POTENTIAL

Why is this Goal Area Important?

Education, job skills and childcare, in addition to the economic climate, contribute to a person's ability to find employment. Although Washington has one of the nation's highest minimum wages and unemployment is low, Bellevue residents need to have substantial wages in order to be self-sufficient. To obtain living wage jobs, workers must possess significant education or job skills. Limited opportunities for advanced education as well as the fewer number of positions available in King County offering living wages present barriers for many individuals and families in East King County to make ends meet. Affordable, quality childcare is also important so that families can work and as many consumers and providers have told us, reliable public transportation is another key component in people being able to access and retain employment.

What's Working?

- East King County participants in the Washington State WorkFirst program surpassed state averages in median job search placement wages, earnings progression, job retention and exits to employment. For example, over 50% of East King County Work First clients exited to employment compared to 47% state-wide.¹
- During the 2017 State Legislative session, a paid Family Leave bill was passed which allows workers paid time off for the birth of a child or for a serious medical condition of

the worker or the worker's family member. Eligible workers will get 12 weeks of either leave beginning in 2020 or 16 weeks for a combination of both. This bill closes the loop begun by the 2007 State Legislature that passed a family leave program but did not include a way to fund it.²

 In the November 8, 2016 election, voters in Washington State overwhelmingly approved a ballot initiative to help working families. The passage of Initiative 1433 means more than 730,000 Washingtonians will get a raise in the next four years. Minimum wage workers 18 and older will earn \$11 an hour starting in 2017, \$11.50 in 2018, \$12 in 2019, and \$13.50 in 2020. They will also receive paid sick leave beginning 2018.³

Prevalence Educational Attainment, Age, Race and Gender Effects on Income

• King County is one of the most highly educated communities in the country: 46.1% of county residents hold a Bachelor's degree

or higher. **In Bellevue**, as Figure 1 shows, the percentage of adults age 25 and older in 2015 who had earned a Bachelor's degree or above was 66%, an increase from 37% in

1970. Only 2% of Bellevue adults (over

25) have less than a high school diploma, the lowest percentage in the state.⁴

- Higher levels of education typically results in higher pay benefits and lower unemployment rate for persons age 25 and over. Figure 2 shows national unemployment rates compared to median weekly earnings by education attained.⁵
- A similar picture is true for Bellevue residents in terms of median earnings being higher for those who have more education as shown in Figure 3 and Figure 4.
- Data shows that the "wage gap" between men and women is significant. Families depend on women's wages more than ever, but women working full time, year round are typically paid less than full-time, yearround male workers in every state. Nationally, women working full time, year round typically make only 78.3 cents for every dollar a man makes and the size of the disparity varies by state. Additionally, women represent about two-thirds of workers who make minimum wage in the U.S. In 2015, Washington State ranked 25th in the wage gap in the U.S.: for every dollar a male earned, a woman earned 79 cents. The gap was the smallest in New York and the largest in Wyoming.⁶ Overall lower earnings coupled with care giving responsibilities puts women, especially single women with children, at greater risk for poverty than men; for a single woman with

Educational Attainment Trends in Bellevue: 1970 to 2015

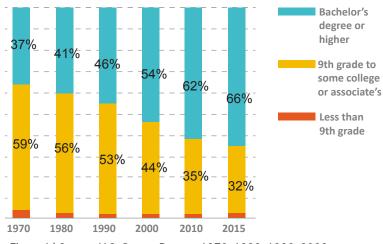
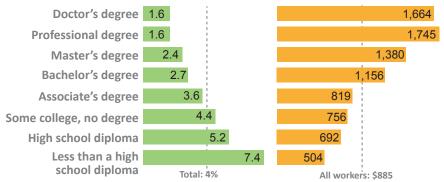


Figure 1 | Source: U.S. Census Bureau, 1970, 1980, 1990, 2000, 2010 Census and 2015 American Community Survey

Unemployment rates and earnings by education attained, 2016

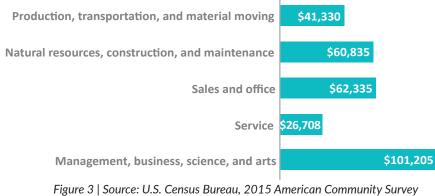
Unemployment rate (%) Median usual weekly earnings (\$)



Note: Data are for persons age 25 and over. Earnings are for full-time wage and salary workers.

Figure 2 | Source: Current Population Survey, U.S. Department of Labor, U.S. Bureau of Labor Statistics April 2016

Media Earnings of Bellevue Residents by Occupation, 2015



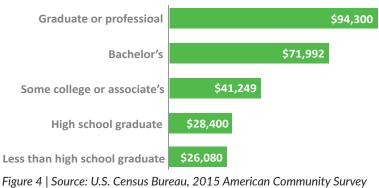
children the poverty rate statewide as well as in Bellevue is higher than for two parent families with children.

The aging of the population has enormous implications for the workforce. More older adults are delaying retirement or returning to the workforce because they need employment to make ends meet. According to an analysis by the Pew Research Center, more older Americans - those ages 65 and older - are working than at any time since the turn of the century, and today's older workers are spending more time on the job than did their peers in previous years. In May 2016, 18.8% of people 65 years and older were employed nationwide compared to 12.8% in May, 2000. Older adults are more likely to be in management, legal and community/ social services occupations than the overall workforces and less likely to be in computer and mathematical, food preparation and construction related occupations when compared to the general population.⁷

Economic Well-Being in Washington State and King County

• The unemployment rate in Washington State in June 2017 was 4.5%, lower than in June 2015 (5.3%), and much lower than in 2011 during the recession when it peaked at 8.3%. The rate is now close to what it was pre-recession. (2007, 4.64%).

Media Earnings by Educational Attainment Level, 2015



During the recession, the unemployment rate in the Seattle-Bellevue-Everett Metropolitan Division also increased, from 3.9% in 2007 to 8.3% in 2011. In 2012, the unemployment rate began to decrease to 5.6%, and in June 2017, the rate dropped even further to 3.4%.⁸

- Despite the lower unemployment rate and a robust economic recovery, national data indicates that many people are still struggling to make enough to pay for all their basic needs. Economists observe that wage growth is the slowest that has been recorded for three years. The U.S. Department of Labor showed a 2.5% wage growth in July 2017 but some economists believe that it should be closer to 3.5% at this stage of an economic recovery. Reasons for this slower growth include fewer number of people who are prime working age- 25-64- who are not looking for a job but might if wages were higher, and more young, inexperienced workers in the labor force who earn less than the older workers who are leaving jobs to retire.⁹
- In 2015, 591,000 (37%) of children
 statewide lived in households earning less
 than the basic needs threshold, 200% of the
 federal poverty level (in 2015, \$48,500 for
 a family of four). The percentage is higher
 for children of color: 62% of Latino and 60%
 of Black children live in poverty. Children
 living in poverty are more likely to lack health
 insurance, have lower scores in reading in
 third grade, and are less likely to graduate

from high school in four years. Again, children of color are over-represented in these outcomes.¹⁰ In 2011, an analysis by the Washington Budget and Policy Center showed that a lifetime of restricted opportunity meant a loss of \$240 million in wages for the current working population of blacks, Hispanics and Native Americans in Washington State. As the state, and Bellevue, becomes more diverse, this data has even more impact. Those earnings could have been used to start a business, buy a home, or send a child to college, all actions that contribute to the vitality and health of a community.¹¹

Unemployment Assistance Provides Support

- Unemployment insurance is a federal/ state benefit most often implemented by states as a tax on employers. It is calculated using a percentage of an individual's past year's earnings rather than financial need. Therefore, individuals who worked lowpaying jobs before unemployment often fall deeper into financial hardship while unemployed. Some workers, many of them who earn low wages, are not covered under unemployment insurance so they do not have any "back-up" salary when they lose their jobs.¹²
- In King County, initial unemployment insurance claims are steadily decreasing.
 In June 2016 there were 13,674 claims; in June 2017, these claims dropped to 12,800.
 Statewide initial unemployment claims also decreased.¹³
- Studies show that people on unemployment benefits spend their money on the basics, with nearly 70% going to food, housing and transportation. As a result of having unemployment insurance, the amount of money an unemployed household spends on food decreases 7%, but would decline a total of 22% without benefits. In 2007, unemployed Washington households spent two thirds of their income on food, housing and transportation.¹⁴ With the rising cost of living in all these areas, the percentage spent is now likely higher.

Recent and Future Job Market

 In June 2017, there were 57,009 job vacancies statewide compared to 53,403 in June 2016, a 7% increase. Most job vacancies are found in the Seattle-King County Work Force Development Area (23.3%). In June 2017 Seattle –King County, there were 15,938 vacancies but 35,832 job seekers, resulting in a 33.8% gap. The jobs that had the largest number of vacancies were for jobs that require advanced training including computer-related such as software developers, registered nurses and marketing managers.¹⁵

 Job growth continues to outpace population growth in Bellevue.
 About 1.3 to 1.4 jobs are generated by household, which indicates a greater demand for housing, leading to higher house values.

Between 1995 and 2015, the number of jobs grew at an annual growth rate of 1.8%. Information technology is Bellevue's biggest job cluster, with the largest growth in the number of jobs between 2009 and 2015 making Bellevue a regional hub for IT. Business services is the second highest job cluster, followed by health, beauty and fitness and tourism which witnessed job growth over the last six years.¹⁶

Minimum Wage vs. Living Wage

- Washington State's minimum wage in 2017 is \$11.00, one of the highest in the country. However, an adult making the minimum wage working full time and supporting two children is under the federal poverty level (FPL), \$20,160 for a family of three.
- A "living wage" is often defined as the minimum income needed to purchase basic necessities without help from public assistance. Living wage calculations often include the cost of housing, food, transportation, health care, taxes, childcare and household, clothing and personal items. One way to determine a living wage, developed by the Center for

Women's Welfare at the University of Washington, calculates a Self-Sufficiency Wage, or the amount of money a certain family type would have to earn in order to live without public

"Families are having more challenges in making ends meet. Wages not keeping up with rising rental costs."

- Provider survey

55%. For example, in 2007, only 16.7% of respondents reported unemployment as a major/moderate community problem. In 2017, *unemployment* was considered a major/ moderate problem by 20% of respondents, a

supports or assistance.¹⁷ The web-based King County Self-Sufficiency Calculator computes self-sufficiency wages for different family types anywhere in the county. The numbers in Figure 5 from the Self-Sufficiency Standard have been calculated for Bellevue residents but costs would be similar for all of East King County. The calculation has adjusted higher housing and childcare rates.

 Using the calculations from Figure 5, in Bellevue, the lowest calculated living wage for a single adult is \$4.69 more than the current minimum wage and a living wage for a single adult with two children is \$15.30 more.

Community Perceptions

- In the 2017 phone/online survey, 8 of the 11 top-tier community problems had some connection to jobs that do not pay enough and issues of affordability. The same theme was seen in household problems: lack of jobs that pay enough to cover necessities like food and shelter remain a major household concern. Forty-four percent of 2017 phone/online survey respondents rated people having jobs that do not pay enough for the basics of food, shelter and clothing as a major/moderate problem in their community. This is similar to the rating in 2015 and higher than the rating in 2013. This problem area ranks fourth amongst all the community problem areas.
- Ratings of *unemployment* as a community problem continued to significantly increase every year since 2003, peaking in 2011 at

significant decrease compared to 2015 when it was 27%, moving from the first tier to the second tier of community problems.

- At the household level, 15% of respondents in 2017 ranked not being able to find work that supports yourself or your family as a major/ moderate problem, about the same as 2011, 2013 and 2015.
- In 2017 the phone/online survey asked a series of questions about employment issues rather than on the effects of the recession as had been done in previous surveys. Sixty-five percent of respondents (2 out of 3) were employed, either employed full-time 54% and 4% part-time with only 9% unemployed. Of the residents who were employed, 11% have more than one job. Nearly half (44%) of those who have more than one job said they could not afford to live in Bellevue if they only had one job.
- Staff at the King County Library in Bellevue continue to offer programs that provide assistance to job seekers, including drop in employment assistance, and having librarians with laptops at the Crossroads Mini-City Hall help teach people how to apply for jobs on-line. Hopelink offers similar employment assistance at Mini-City Hall as well.
- Two specific populations that staff at Bellevue College identified as having challenges in job search are students who are immigrants and post-prison students. For immigrants the challenge is finding work with limited English skills so they can continue to pay for their college costs. For students with a prison record, they are not

2017 LIVING WAGE BELLEVUE, WA			
Family Type	Self sufficiency standard Bellevue, WA		
Single edult	\$15.69/hr		
Single adult	\$33,135.23/yr		
Single adult with a	\$26.30/hr		
school-aged child (6-8 years)	\$55,547.62/yr		
Single adult with a	\$37.28/hr		
school-aged child and a toddler (12-24 months)	\$78,741.93/yr		
Two adults (both	\$19.65/hr/adult		
working) with a school-aged child and a toddler	\$83,010.56/yr		
Two adults	\$39.30/hr		
(one working) with a school-aged child and a toddler	\$83,010.56/yr		

Figure 5 | The Self Sufficiency Calculator for Washington State

eligible for financial aid and have challenges getting jobs and have an especially hard time finding housing due to their record as well. Overall, lack of funds for transportation, even with low-income bus passes, and lack of late-hour bus service for both students and custodial staff at the college is also an ongoing problem.

- Participants in several community conversations brought up the need for more access to computers for job search and applying for jobs, as well as for more universal, free or low cost access to the internet. Even though some agencies and the libraries offer some access to the internet, access is time limited and can be problematic. One key informant working in the immigrant community stated that even though many more people have "smart phones' with internet access, it is very difficult to complete a job application on a small electronic device.
- Results from the Latino Community Survey conducted in 2016 in East King County by

Promotores, outreach workers based on the community health worker model, found that about 16% of the 170 respondents identified economic security as something that is missing for them in the community.

• In the Next Door Survey the third highest household problem identified was (not being able to find work to support you and your family.) The second highest community problem was (people having jobs that don't pay for the basics of food, shelter and clothing.)

Specific Populations

Note: See *People with Disabilities*, *Older Adults*, *Youth and Immigrants and Refugees* sections for more information on education and job skills within these populations.

Childcare Childcare Availability

- In most parts of the State the number of child care providers and the total capacity for children in care has stabilized after a declining trend that began in 2013. As of December 2016, there were 5,542 licensed childcare homes and centers statewide, with 165.404 slots, about the same as 2015: 28% of them are center-based and 63% are family childcare. In King County, there were 1,902 providers with 62,133 slots in 2016 compared to 1,946 providers with 61,101 slots in 2015.18 Child Care Resources, the resource and referral agency in King County, reported that in June 2017 in their database for East King County there were 506 child care centers and child care homes, compared to 491 in 2015. This represents 21,647 slots; 16,864 in child care centers and 2,384 in family child care homes. The remainder of the slots are in exempt school age programs (1,009) and school age programs (1,390).19
- For many families their first choice for childcare is extended family (referred to as family, friend & neighbor care), especially

for infants and toddlers. As children grow, and parents seek out child care, families may experience barriers including cost, transportation, and cultural or system navigation. Nearly 21% of children ages 0-5 are cared for by a family member, friend, or neighbor (FFN) as their primary care arrangement. In King County, this would be about 60,000 children; for 28,000 of those children, they are the primary source of care while parents are working or attending school.²⁰ Families more likely to have FFN childcare arrangements include those who are low or moderate-income, Latino, African American, refugees and immigrants, and those with a child with special needs. Given the growing number of refugees and immigrants with young children settling in Bellevue, it is likely that many of these families use FFN care.

 Issues such as language and culture, location and transportation, hours of operation, quality concerns and cost all affect childcare availability for a family. About 23% of providers in King County offer what is called "non-standard" hours such as childcare after 6:30 pm, overnight and/or during weekends. This accommodation has increased over the past several years as more parents working night shifts and weekends usually have a very difficult time finding licensed childcare.

Childcare Affordability

• The cost of childcare and the change of rates over the past year vary greatly around

the State. Childcare for an East King County family with an infant and pre-schooler in full-time care can cost on average \$30,876/year as

shown in Figure 6. Childcare costs in East King County are the highest in the County. Currently, in East King County the average cost of care is \$16,560/year for an infant, 21% of the Seattle-Bellevue 2015 median household income.²¹ According to a survey of childcare providers in King County, childcare costs can exceed the cost of housing or college tuition, especially if using rates for full time care for an infant at a child care center.²²

 The State's childcare subsidy program Working Connections Child Care (WCCC) serves low-income families earning up to 200% of the federal poverty level that are working or participating in a DSHS approved training activity. For some families that qualify for subsidies they may still have a substantial co-pay: a single mother earning \$38,000 a year would pay \$554 per month for two children in childcare, about 17.5% of her annual income. For parents who do not qualify for subsidies and earn the median

" Biggest issue is childcare, especially afterschool for one day a week when there is early release. Many parents don't qualify for scholarships from any of the groups (school, state, non-profit) so there is a huge gap."

$-\ensuremath{\operatorname{Key}}$ informant interview

income, childcare costs for an infant could consume between 15% and 52% of the family budget.²³

 Many childcare centers and homes accept only a few families using WCCC subsidies because the reimbursement rates are lower than market rate; this can present a financial hardship for providers. In August 2016 the State's Quality Rating and Improvement System, Early Achievers, became mandatory for providers that accept WCCC subsidies. Some providers chose not to enroll in Early Achievers, but the impact on the availability of slots for these subsidies was smaller than expected. As of June 2017, of the 506 childcare centers and

Slots	Center	Family Child Care	School Age Only (licensed)	School Age Only (exempt)	Total
East	16864	2384	1390	1099	21647
Cost	st		Child Care Centers		ild Care
Infant (u	Infant (under 12 mos)		\$1,855.02		5.90
Toddler (Toddler (12 mos-2.5 yrs)		\$1,550.97		1.49
Prescho	Preschool (2.5-5 yrs)		299.88	\$1,104	4.67

\$955.00 (FT)

Additional funds were allocated for technical assistance and training for providers to participate in the Early Achievers program, and organizations like Child Care Aware, a program of Child Care Resources, provides required training and get help from a Technical Assistance

School age (full day K and up) Figure 6 | Source: Child Care Resources

family childcare homes in East King County, 134 (26%) report accepting WCCC subsidies, fewer than 2 years ago.²⁴

Childcare Quality

High quality childcare has been shown to help children get ready for success in school and in life but childcare quality varies considerably around the state. Research shows that the quality of early education has a direct impact on future success: when children impacted by early education disparities enter kindergarten, they can fall up to two years behind their peers.²⁵ In 2011, the State Department of Early Learning (DEL) rolled out Early Achievers, the state's Quality Rating and Improvement System that offers training, awards, scholarships, coaching and consultation to early learning providers in childcare centers. This began as a voluntary, no-cost program that will help providers improve the quality of their care. In Washington State almost 3,607 providers have joined since July 2012. In King County, there are 1,170 child care centers, family child care, and Head Start and State Pre-School sites enrolled in Early Achievers with an estimated 23,854 children in those programs.²⁶ During the 2015 State Legislative session, the program became part of the Early Start Act, and on August 1, 2016, Early Achievers became mandatory.

Specialist. When the program is ready for rating, the University of Washington provides an on-site evaluation.

\$733.33 (F)

Though the quality needed for children in childcare is highly influenced by childcare staff, childcare staff receives fairly low wages for their work. In Washington, a teacher in a childcare center makes between \$24,450-\$29,450/year while a kindergarten teacher earns on average \$58,180-\$73,470.27 The lack of competitive wages makes it difficult to recruit and retain educated childcare workers. In 2012 the turnover rate for teaching assistants and teachers in King County was 38% and 18% respectively, far greater than the turnover rate found among elementary school teachers. High turnover rates have two negative impacts: they cost the employer additional costs to recruit, hire and train new workers, which is especially significant for child care providers that operate on slim margins. Another impact is the effect on the child, as studies have shown that high turnover discourages the development and maintenance of consistent relationships between children and their caregivers.²⁸

Community Perceptions

 People's perception of affordable and quality childcare as a community problem increased significantly from 2009 to 2011. In 2013 only 14% of phone/online survey respondents said that *lack of quality childcare* was a major/moderate community problem compared to 20% in 2011, and 30% rated *lack of affordable childcare* compared to 39% in 2011. In 2015 in the phone/online survey only the respondents who indicated that they had children in the household under age 18 were asked questions about childcare, so previous results are not comparable. Of those who were asked the questions about childcare, 40% rated this issue as a major/ moderate problem in the community. In 2017, which does provide comparability, 44% rated affordable childcare as a top community problem, ranking 4th highest.

 In the past, fewer phone/online survey respondents ranked not being able to find affordable or quality childcare as a household problem than as a community problem. The rankings for affordable and quality childcare in 2013 were 8% and 5% respectively, about the same as 2011. However, in 2015 when only respondents with children under age 18 were asked the childcare questions, 21% rated it as a major/moderate problem making affordable childcare the top ranked household problems. In 2017, affordable childcare again ranked as the top household problem with 22% of respondents rating it as such.

Transportation

- The percentage of Bellevue residents commuting to work by means other than driving alone has steadily increased from 26% in 2000 to 33% in 2008-2010 to 35% in 2011-2013. An increasing percentage of residents took public transportation to get to work. In 2011-2013, about 13% of residents used public transportation to get to work, up from only 7% in 2000.²⁹
- As Figure 7 shows, workers in households, with incomes below poverty or between 100-149% of the poverty level had the highest proportions of people using public transportation with about 21 and 19 percent respectively. However, public transportation is not inexpensive, especially if the trip includes transfers or a family with multiple members. In 2013, the King County Council approved a motion to establish an Advisory Council to study and recommend potential new fare options to assist in meeting the mobility needs of low-income persons. Previously there was only a discounted fare option for seniors and people with disabilities but none based on income. One of the two groups that would benefit from such a discounted fare is the working poor who struggle to pay for the basics,

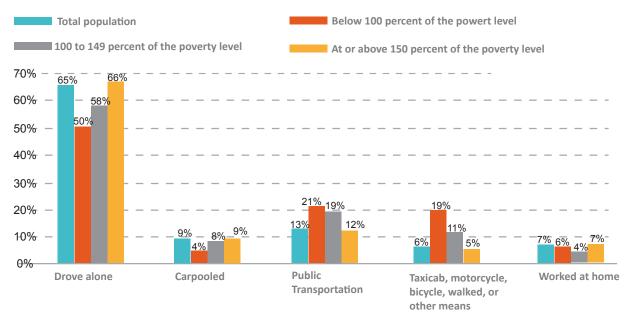


Figure 7 Bellevue Residents' Mode of Travel by Federal Poverty Level | Source: U.S. Census Bureau, 2011-2013 American Community Survey

including transportation. The other group is people with no income and/or experience homelessness. The recommendation of the Advisory Council was that such a fare be established, as funding allowed; another strong recommendation was that eligibility for this fare would be at 200% of the federal poverty level to include more people who earn low-wages. In March 2015 the Orca LIFT reduced fare program was rolled out allowing people with a minimum of documentation to apply, purchase a card, then load funds on it for use on King County Metro and Kitsap County buses, Sound Transit Link Light Rail and the Seattle Street Car and King County Water Taxi.³⁰

Community Perceptions

- More than one-third (39%) of 2017 phone/ online survey respondents rated inadequate public transportation as a moderate or major community problem, similar to 2015, 2013, 2011 and 2009 responses. It was the sixth highest rated community problem in 2017.
- In the last four phone/online surveys (2009, 2011, 2013, and 2015), Bellevue residents cited inadequate public transportation as the highest rated household problem. In 2017 it was rated by 21% of respondents as the second highest major or moderate household problem.
- In the 2017 provider survey, 70% of respondents reported that their clients needed, but could not find, help with transportation. This was the highest rated barrier identified.
- Both consumers and providers of human services identified lack of bus tickets and services cuts as major gaps. The discount bus tickets that non-profit agencies purchase from King County Metro are the only way many low-income or no-income residents can get to appointments or to work. Residents of the Congregations for the Homeless men's shelter mentioned

missed job opportunities because a bus route to a potential job did not have schedules that worked for their new jobs. Bellevue College staff identified these gaps: lack of money for tickets, lack of late night bus routes and inefficient transportation for job seeking and then for employment. This also affects Bellevue College custodial staff as well as students.

• In the Next Door survey *inadequate public transportation* was rated the top household problem and the second highest community problem.

Service Trends WorkFirst Participation By Bellevue-area Residents

WorkFirst is Washington State's temporary cash assistance program to help low-income families stabilize their lives. Participants must be working or actively seeking a job and assistance is limited to 60 months in a person's lifetime. The program provides training and education for low-income parents working at least 20 hours per week. In April, 2017 there were 27,128 WorkFirst cases in the State, almost 10% less than one year ago; the number has seen fluctuations of increases and decreases due to policy and program changes over the years that affected client eligibility. In July 2017, 427 low-income parents in the King Eastside Local Planning Area which includes Bellevue were enrolled in WorkFirst a 13.9% decrease compared to a year ago. The median wage earned by King Eastside WorkFirst clients is \$12.95/hour, slighter higher than the statewide median wage for all WorkFirst clients of \$12.22.³¹

Available Supports and Training for Employment

• The Women's Center for Career Connections at Bellevue College (BC) helps people enrolled in WorkFirst, immigrants, homemakers, veterans and others to find living-wage jobs and obtain job training through career transition courses, career pathway planning, job placement and networking connections. Staff report forming a number of collaborations: with employers to provide internships and part-time, seasonal, and full-time jobs; partnerships with STEM associations and funders to provide support to clients interested in STEM careers; collaborations with veterans groups and military bases to promote and leverage services; connections to human service agencies in the area to help clients meet their basic living needs while pursuing job search or career transition; partnership with WorkSource to leverage services.

 The Preparing for Work program at Bellevue College (BC) helps meet the refugee/ immigrant community's need for job and English skills training. Three classes are offered: Preparing for Work, On the Job Communication and Working in English. BC served 1,450 immigrant and refugee students in FY 2015-2016 and 1,319 in FY 2016-

2017. English language learners focus on skills to choose a career pathway, find and keep a job. Staff reports about an important

"There is a need for more opportunities for job advancement. People tell me that when their rents go up, they have to get another job to pay for the increase."

- Key informant interview

change to the ESL program because of a new federal law called the Workforce Innovation and Opportunity Act or WIOA. Under this new law, ESL programs can help students to improve their English skills for academic or job readiness goals. The new law excludes students who want to learn English for life and survival skills or to be active community participants. The implications of WIOA is a gap in services being created for the refugees and immigrants who do not want to improve their English for an academic or job readiness goal.³²

- Washington's Employment Security
 Department's WorkSource Centers
 around the state provide onsite resources
 for employers and workers. Unemployed
 workers can file for unemployment
 insurance, get information about
 education and training, and a number of
 other resources to assist in job search
 and skills development. WorkSource
 provides information about program and
 service eligibility that participants may
 not know about.³³
- HERO House, a clubhouse model for people with chronic mental illness, provides a supported employment program for its members. Supported employment is a key component for people to rebuild their lives. In 2015 HERO House was able to add additional staff to assist members with supported employment opportunities and a program generalist to increase the membership overall of the program. HERO House has extensive partnerships with local

employers who provide jobs for members.³⁴

• Hopelink's workforce development program provides employment support and adult basic education to low-income individuals in East King County. With the low unemployment rate, people tend to think that anyone who wants a job can get a job. But Hopelink's programs

continue to receive people who do want a job, but can't get a job due to multiple obstacles to employment, such as no GED or high school diploma, minimal skills, poor work history, lack of an education, low English language skill, inadequate childcare, unreliable transportation, criminal record, and health concerns.³⁵

• The YWCA provides housing, employment and training at The Family Village in Redmond in which a number of former Bellevue residents live. Some of the trends

reported by staff include that though there is an increase in job placement at both ends of the spectrum (high wages requiring technical expertise and low wage jobs in growing sectors like retail and health care), more of their clients are "stuck" in low wage jobs, needing sometimes two or three jobs in order to pay the bills. Job retention rates are improving due to more stable jobs. Clients who have been unemployed long term are still having the most problems finding jobs, though there is some improvement there, too. Lastly, lack of affordable housing and transportation are two of the greatest barriers to people finding jobs and getting to jobs.³⁶

Childcare Supports and Services

Child Care Resources

 (CCR) provides assistance
 to Bellevue families
 in accessing quality
 childcare. In 2015
 they helped more than
 15,000 families in need
 of childcare to search
 for matching providers.³⁷
 They report that changes
 in subsidy eligibility means

that fewer families can receive state funding and, as a result, request other locally funded scholarship programs. As of August 1, 2017, there were 7 families on the waiting list for CCR's Bellevue residents' scholarship program.³⁸

 There is a growing need in King County for programs specifically providing childcare to homeless families. Child Care Resources case managers help families secure stable, quality childcare so they can find housing, look for work, and go to domestic violence related meetings, court or medical appointments. This provides children in crisis a safe and stimulating environment with routines, structure and opportunities to thrive. In 2016, the program averaged 19 family intakes per month which was fewer than in previous years due to changes in federal funding. In July 2017, the Washington Department of Early Learning shifted the distribution of child care subsidy for homeless families from Child Care Resources to DSHS Working Connections Childcare; this may mean that some vulnerable families will no long be eligible and lose CCR's fullservice approach.³⁹

 Child Care Resources also supports a network of Kaleidoscope Play and Learn groups, play groups specifically designed to provide culturally appropriate support for Family, Friends, and Neighbor caregivers and parents. More than 50 groups meet weekly around the county, holding sessions in multiple languages led by

"We are seeing more and more families struggling to make ends meet, pay rent and put food on their tables each and every day."

— Provider survey

trained facilitators; participants receive information about child development and community resources. In 2016 Play and Learn groups reached over 4,000 King County children

and informal caregivers; more than 60% spoke a language other than English at home. It also gives young children cared for by FFNs a chance to develop socialization and early literacy skills which will increase their readiness for school. Two Kaleidoscope Play and Learn groups are currently meeting in Bellevue, one conducted in Chinese and English at the Newport Way Library and one conducted in Spanish and English at the Lake Hills Library.⁴⁰

• Child Care Resources provides training and technical assistance to childcare providers for quality improvement. Staff reports that with the Department of Early Learning

licensing changes, more providers are seeking help from CCR for training and oneon-one in-person support and translation/ interpretation services.⁴¹

- In Bellevue, Bellevue College (BC) provides a Head Start program with 27 slots which are blended with the other child care slots to provide the same rich environment for all students, regardless of socioeconomic status, for a total enrollment of 140-160 in the Early Learning Center. Most are BC families but there are also BC staff and faculty families as well as the families of Costco employees. These families receive priority enrollment and are charged on a sliding fee scale. Most quarters, about 25% of families have childcare subsidized from DSHS through the Working Connections Childcare Program. In 2016-2017, 33% of students qualified for free meals with the federal Child and Adult Care Food Program. Some of the challenges staff see for their families is lack of transportation, lack of access to alternate care when their child is sick and they need to miss school, more children with special needs, and difficulty with maintaining DSHS funding.⁴²
- Bellevue School District (BSD) had 151 Head Start slots but in June 2016 was notified by Puget Sound Educational Service District (PSESD) that they would no longer be allocated to BSD due to cuts in federal funding and greater need in other parts of King County as determined by PSESD assessments. BSD staff reached out to the Bellevue Schools Foundation and they, with the BSD School Board, Eastside Pathways, the City of Bellevue and many community members, were able to fund raise for funds to increase childcare slots for low-income families whose children were in those Head Start classrooms. BSD staff advocated with the State Department of Early Learning to perform a new Saturation Study which determines level of need; that study placed BSD in Expansion Priority Group 4 out of

8 which is higher than many areas that received the additional Head Start slots that were lost.⁴³

Bellevue SD has 149 Early Childhood • Education and Assistance Program (ECEAP) slots for the 2017-2018 school year. In addition. 39 preschoolers receive tuitionassistance through district, Bellevue Schools Foundation, City of Bellevue and state funds. Eighty-five elementary school age children receive tuition-assistance to attend the district's before/after and summer FLP programs. Approximately 2000 spaces are available in the district's preschool and school age programs combined. Based upon the 2015-2016 DEL ECEAP and Head Start Saturation study, there are an estimated 342 3 and 4 year olds eligible for ECEAP, and the number of unserved, eligible students are 225. With the additional 59 ECEAP slots awarded to the district, this leaves 58 eligible and likely to attend students without access to comprehensive preschool services and programs. Staff reports that demand for their programs is outpacing the supply with school facilities close to capacity. They are seeing an increase in children whose families are homeless, from other countries, and who need tuition assistance. About 21% of the early learning and extended learning program participants receive some form of assistance, more than the 19% of students who qualify for free and reduced price lunch. As of April 2017, there were 224 children on the waitlist for childcare for the 2017-2018 school year. The City of Bellevue scholarships to families are guickly allocated even before the school year begins.44

Implications for Action

• The decrease in middle-income job opportunities makes it harder for people at lower incomes to access better jobs. There are more low-wage job opportunities, but along with these come financial instability, dependence on public supports that are dwindling due to budget cuts and less of a chance to obtain additional training to increase skills to find a better job. A living wage for a family living in Bellevue is higher than in other parts of King County.

- Bellevue residents have a high level of education, however, there are not many vacancies in some of the growing sectors like hospitality that pay a living wage. It will be critical to attract business and industry that pay living wages.
- Barriers to employment such as lack of affordable and quality childcare, limited English speaking skills, the absence of coordinated transportation and lack of training and education opportunities to secure higher wage jobs are key issues to be addressed to help people improve their economic conditions and the quality of their lives.

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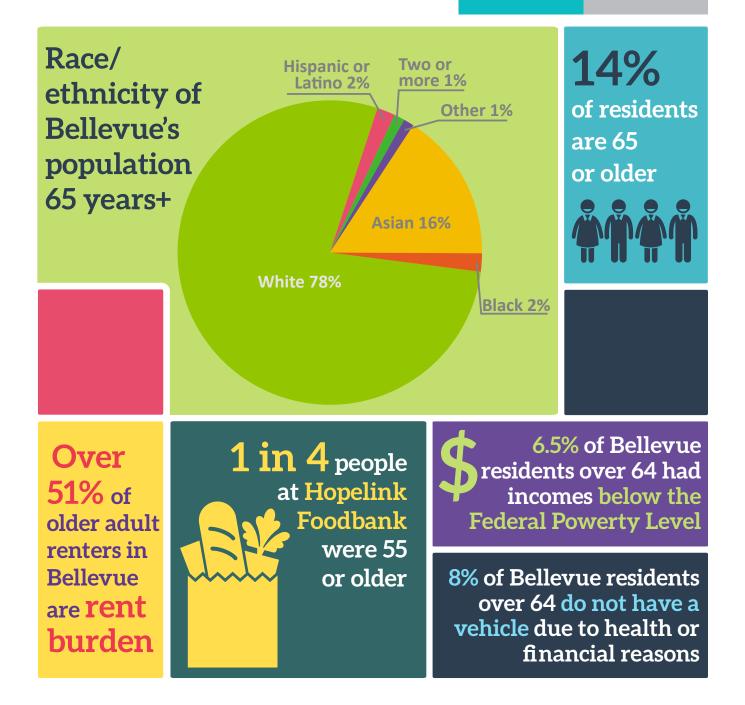
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Specific Populations



Older Adults



OLDER ADULTS

The aging of a large segment of the population profoundly impacts and shapes the type of services and supports that will be needed in our communities, not only in Bellevue, but throughout the county, state, and nation. By 2030, 73 million-or one in five- people in America will be 65 or older.¹ In Washington State, by 2040, the population of 65 and older is forecast to reach 1,867,400 representing 21% of the state's total population.² Older adults have diverse abilities, backgrounds, incomes and needs. However, some common themes emerge when they are asked what they need to "age in place" with dignity and grace. For some older adults the cost of living especially long-term care and housing is presenting challenges for making ends meet.

What's Working?

- In November 2017 the Veterans and Human Services Levy was renewed for another six years, and now includes older adults as a new population that will receive funds from this property tax. The new name reflects this: Veterans, Seniors and Human Services Levy. Services to prevent seniors from falling into poverty by expanding housing programs, food programs such as meals on wheels, and those services delivered at senior centers in King County are among those upon which funding will be focused.
- Bellevue Network on Aging, a volunteer advisory board formed in 2006 consisting of older adults and professionals working with older adults in the community, examines issues to ensure a successful aging community. The Network has subcommittees addressing the most important issues for older adults in the community through advocacy, research and education. In 2017 some of the Network's work plan items included assisting with Community Conversations for the Needs Update,

continuing their advocacy for changes to the federal Medicare Outpatient Observation Notice, updating information about housing for older adults on the ARCH website, participating in a number of outreach events to provide information to older adults in the community, and in collaboration with the Kirkland Senior Advisory Council, educating policymakers in Olympia through legislative forums and sending emails and letters on key issues such as elder abuse and fraud.

Eastside Neighbors Network is a "virtual village" starting up in Bellevue: a member-driven, grassroots, non-profit community organization that brings neighbors together to help one another thrive as they progress through life's Third Act. Such villages are a new model for "aging in place" and can provide assistance with referrals to services, using technology, and offer social, cultural and wellness programs. Villages can delay or prevent unwanted relocation and promote more intergenerational interaction. http:// eastsideneighbors.clubexpress.com/

Prevalence

- In 2010, approximately 12.3% of Washington State's population was 65 years or older. The fastest growing group among older adults in the state compared to 2000 data are those 85 years and older, with an increase of almost 40%. In 2016, it was estimated that there were about 1,078,624 persons ages 65 and older, representing 14.8% of the state's total population.³
- According to the 2015 American Community Survey, 18.3%, around 368,000 of King County residents, are 60 years or older. By 2040, this group will make up 25% of the total population.⁴ There are 82,332 adults over age 60 in East Urban King County and 6,161 in East Rural. The East Urban sub-

region experienced a 28% growth in adults 60+ from 2000 to 2013, second to South Urban King County that grew 32%.⁵

In Bellevue, 14% of residents are 65 years of age or older. Within the

group of older adults the largest percentage are 65-74 years of age (51.3%) followed by the 75-84 year age group (33.1%), then 85 years and over (15.6%). The number of people age 85 and older increased 67% over the last decade. In Bellevue neighborhoods, Somerset, Newport Hills and Northwest Bellevue had the highest percentages of older adults (18.4%, 17.3% and 17.0%) in 2010 while Sammamish, East Lake Hills and Crossroads had the largest number.⁶

Service Trends Need for Long-Term Care Services and Supports (LTSS)

- People are living longer; over the last decade, average life expectancy in King County climbed about 4 years to an average of 77.8 years of age, although life expectancy if sorted by different races differs with Whites averaging 81.4 years in contrast to Blacks averaging 71.1 years.⁷ As a result, people are more likely to need some type of long term care services and supports (LTSS) during their lifetimes and for many it will be a challenge to stretch retirement income and savings to pay these costs. A report on the need for affordable housing for older adults references a 2007 statewide survey of people aged 50-65 in which 77% of respondents said they intend to stay at home for retirement.⁸
- Medicaid Long Term Services and Supports assist low-income seniors and adults with disabilities with services they typically cannot access with Medicare or private health insurance. This includes home care,

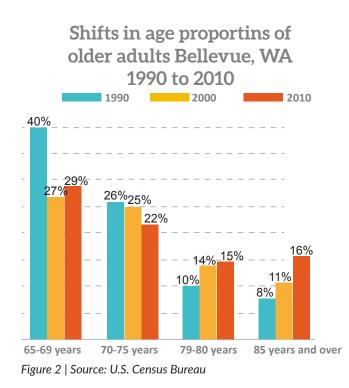
nursing care, assisted living, meals, nursing homes and other services. As of May 2017 65,000 Washingtonians receive these supports, and the number is expected to grow to 90,000 by 2028. Proposed cuts to Medicaid on the federal level could mean that there will be fewer care options available to those needing Medicaid, estimated to be 16,000 individuals or an 18% reduction.⁹

June 2017

Overall	Ages 55+
+222,000 jobs in June	35.5 million
total nonfarm payroll employment	number employed ages 55+
4.4 percent unemployment rate	3.2 percent unemployment rate
7.0 million	1.2 million
number of employed persons	number of employed persons
62.8 percent	40.1 percent
labor force participation rate	labor force participation rate
19.3 percent long-term unemployed ages 16-54	36.4 percent long-term unemployed ages 55+

Source: Bureau of Labor Statistics | Arrows denote directional change from prior month.

Figure 1. Population Growth in the Elderly Population by Age Group | Source: Washington State Office of Financial Management, 2014 State Forecast



- An AARP Public Policy report found that most older adults will one day need LTSS and the options for meeting this need include family caregivers, private long-term care insurance, out-of-pocket spending and Medicaid. But the report concludes that about one third of people turning age 65 will have costs that exceed their ability to pay and will need to turn to Medicaid to help pay for LTSS.¹⁰ The diverse range of services includes in-home care, adult day programs, home modifications and assistive technologies. Because nursing homes are the most expensive option, with the median price of a semi-private room in Seattle-Tacoma-Bellevue costing \$114,679¹¹, the overall number of beds, residents and occupancy rate have all declined or remained static in the last ten years. The result is increasing demand for in-home services or assisted living residences, especially for those not Medicaid eligible.
- The need for home and community based long-term care can double or even triple the expenses of older adults. In 2016 the median cost of in-home Homemaker Services in the Seattle-Tacoma-Bellevue area is \$59,442 annually, and for a Home Health Aide,

61,776 annually for those not eligible for any public funding. 12

- In Bellevue, the number of beds in statelicensed assisted living facilities has remained about the same over the past two years despite growing need. In 2017 there are 126 licensed adult family homes in Bellevue, compared to 127 in 2015 and 2 nursing facilities, also the same as in 2015. Seventy percent of adult family homes accept Medicaid, which helps to pay the cost for low-income older adults.¹³ These facilities are one of the options for frail elderly and disabled adults to remain in the community when living at home alone or with relatives is not possible due to mobility issues or cognitive difficulties such as Alzheimer's disease or other forms of dementia. As the number of "older elderly" residents (those 75+) continues to grow rapidly, these housing options may be in more demand.
- Elder and Adult Day Services (EADS) provides adult day health (ADH) services and respite care for frail elderly and adults with disabilities ages 18-100+ in Bellevue and at other sites in the Puget Sound area.
- Catholic Community Services Volunteer (Chore) Services program reports the demand for volunteer chore services continues to remain high, especially transportation to medical appointments. In addition the requests for help with overgrown yards has increased. People calling with transportation requests are reporting that they have called multiple organizations, and are having difficulty getting their ride request fulfilled. Volunteer Services is working to increase the number of volunteer drivers in their driving pool in order to meet the growing demand.¹⁴
- Overlake Medical Center offers coordinated, comprehensive care for seniors through an innovative approach to primary healthcare with a Senior Health Clinic located in Bellevue. The clinic staff emphasize prevention and wellness, and are specially

trained to meet the health and psychosocial needs of seniors. The comprehensive team is comprised of: geriatric physicians; clinical pharmacists providing oversight of prescription medicines and supplements in the elderly; anticoagulation clinic services; nurses with vast experience in taking care of elderly populations and nutritionists and physical, occupational and speech therapists located a short distance from the centers. Open to anyone 65 and older, the clinic accepts a variety of major insurances and most supplemental insurances. In addition to primary care services Overlake offers a number of free classes for older adults on topics including balance, nutrition, medications, dementia, diabetes, stroke and weight loss.¹⁵

More Support for Family Caregivers

 It is estimated that 43.5 million adults in the U.S. provided care to children or adults with some form of limitations in performing daily activities, related either to mobility issues or to forms of dementia, such as Alzheimer's disease. The estimated prevalence of someone caring for an adult

is 16.6% or 39.8 million Americans. Caregivers are predominately female (60%); they are, on average, 48 years of age, and about 85% provide care for a relative. Forty nine percent take care of a parent or parent-inthat live with a parent or relative. In some cases these caregivers are in their 70's and 80's and are experiencing additional stress as they deal with their own aging issues and also the challenges of their family member with I/DD. Additional supports are needed for this population of caregivers.¹⁷ (Note: for more information about this issue, see the People with Disabilities section in this report.)
A study by the National Alliance on Caregiving (NAC) and Evercare Healthcare

and being cared for by their families. In King

County, there are 120 clients over age 40

- Caregiving (NAC) and Evercare Healthcare calculated that the unpaid services family caregivers provide in the U.S. have an estimated economic value of \$375 billion annually; family caregivers help delay or prevent the use of costly nursing homes by caring for adults with serious illnesses, disabilities or chronic conditions.¹⁸ In Washington State, there are more than 600,000 family caregivers, providing over 611,900,000 hours of care annually, valued at over \$5.4 billion.¹⁹
- Caregiving can take a toll on the emotional, physical and economic health of the caregiver. A recent survey found that the total wage, social security, and private pension losses

"To be a Kinship Caregiver you need resources and emotional support."

— Bellevue Kinship Caregiver Support Group due to caregiving could range from \$283,716 (for men) to \$324,044 (for women), an average of \$303,880. When this average is multiplied by the 9.7 million people over age 50 caring for their parents, the amount lost is nearly \$3 trillion.²⁰ Another study

law. One in ten care for a spouse.¹⁶

 According to data from the State of Washington Department of Social and Health Services, there is an increasing trend of people with intellectual and developmental disabilities (I/DD) living longer, many of whom are still living with found that the longer a caregiver has been providing care, the more likely she or he is to report fair or poor health (23%), and 3 in 10 caregivers consider their caregiving situation to be stressful.²¹

• A new model of providing support under one roof to improve access to family caregivers

as well as consumers are Community Living Connections Aging and Disability Resource Networks (CLC-ADRNs) funded through Seattle-King County Aging and Disability Services. There are "hubs" created to cover East, South and Seattle/North King County. Crisis Clinic/2-1-1 is the central access point. These hubs began operations in fall 2015.²²

Increased Racial and Ethnic Diversity

and older was 13%. Whites.

77%, African American 4%.

Multi-Racial 2%.

Pacific Islanders

Americans 1%.

In all, there are

76,731 foreign

born elders in

King County. In King County

12% of the

60 and older

speak English "less than well".²³

As indicated in

Figure 3, data from the 2010-

2015 American

Survey reveals

Community

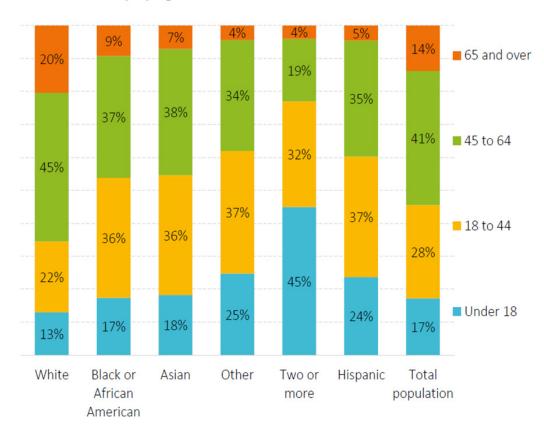
that age

population aged

0.3%. and Native

• People of color will make up an increasing proportion of the older adult population as Americans reach retirement age. This trend is expected to continue in the foreseeable future. In King County in 1990, persons of color represented less than 10% of the county's 60+ population but this increased to 23% in 2009-2013, a 4% increase since 2011. According to the 2011-2013 ACS, in King County the percentage of Asians 60 distribution in Bellevue is different for different racial and ethnic groups. Among the 65 year and older population of Bellevue, the largest racial groups are White (20%), Black (9%), Asian (7%), and Hispanic (5%). Over 23% of Bellevue residents age 65 and over speak a language other than English at home, and 16.1% speak English less than "very well". The effects of a diverse older adult population in Bellevue continue to have an impact on service needs and delivery and will increase in coming years.²⁴

- According to the 2015 American Community Survey, Asian residents age 65 and older living in Bellevue comprise 16% of this age group. This is the next largest racial group represented after Caucasian (78%). Hispanics make up 9% and Blacks 2% of the population, as shown in Figure 4.²⁵
- Two growing ethnic/cultural groups are immigrants from India and from Muslim



Race/ethnicity by age in Bellevue, 2011-2015

Figure 3. Bellevue Total Population Distribution by Age/Race/Ethnicity Source: U.S. Census Bureau, 2010-2014 American Community Survey

Race/ethnicity of Bellevue's population 65 years plus, 2015

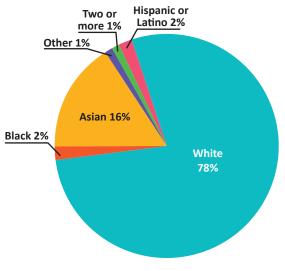


Figure 4 | Race/Ethnicity of Bellevue's Population 65 years and older | Source: U.S. Census Bureau, 2015 American Community Survey

countries, many of them older adults who have come here to visit or live with their adult children. Members of these groups report similar needs for health care, transportation, access to cultural events and information about services in their native languages.²⁶

Economic Status and Employment

• In Washington State, a 2011 study determined that elders cannot meet their basic living expenses if they live at the federal poverty level or the level of the average Social Security benefit. This is true for elders statewide, whether they rent or own a home. As shown in Figure 5 the Elder Economic Security Standard Index for King County indicates that in 2010, at minimum, a person aged 65 or older renting a one bedroom apartment would need an income of about \$23,256 annually; however, an average Social Security annual benefit is \$15,417. Without other savings or assets, this person could not make ends meet without other supports such as rent subsidies or assistance in covering

supplemental health care costs.²⁷ Given the rising costs of housing and other basic needs since the study was done, the income needed would most likely be even higher now.

- According to AARP, in the U. S. about 50% of older adults rely on Social Security for about half of their income, and about a quarter depend on it for at least 90% of their income. In Washington State, about 19% of older adults rely on Social Security for 90% of their income.²⁸ Many retirees depend on slight cost of living (COLA) adjustments annually to help them pay their bills. The purpose of the COLA is to ensure that the purchasing power of Social Security and Supplemental Security Income (SSI) benefits is not eroded by inflation. It is based on the percentage increase in the Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W) from the third guarter of the last year a COLA was determined to the third guarter of the current year. If there is no increase, there can be no COLA. In October 2015 the Social Security Administration announced that 65 million recipients would not see a cost of living increase in 2016 because a measure of consumer prices fell 0.6% in the 12 months ending in September as a result of lower gasoline prices. In 2017, there was a slight increase, 0.03%.29
- In 2011 only 10% of all private sector • establishments provided defined benefit plans covering 18% of private industry employees. Defined benefit retirement plans, which pay out a specified amount at retirement and offer more security than defined contribution plans that are more sensitive to the volatile stock market. In 1988, nearly 57% of wage and salary workers had defined benefit plans; by 2006, only 31% had defined benefits. However, 78% of federal, state and local employees still have defined benefit plans.³⁰ This, in addition to the downturn in the housing market, higher health care costs and the higher cost of living,

means more older adults could face poverty, even if they delay retirement and try to remain in the workforce longer.

- Given the current economic conditions and the increase in defined-contribution plans replacing traditional retirement plans, the percentage of people aged 55+ in the workforce is increasing. This group's labor force participation increased markedly in recent years; in 2007, the official beginning of the Great Recession, labor force participation by this age group was 38.9% and grew to 40.1% in June 2017. The unemployment rate for those 55+ is less in this time period than for the overall workforce (Figure 6).³¹
- In June 2017, there were approximately 7.4 million people in the U.S. ages 55 and

over who were working part-time (fewer than 35 hours/week) compared with 27.8 million who were working full-time. The number of people working part-time more than doubled, from 3.4 million in 1986 to 7.4 million in 2017. Of those about 3.5 million were ages 65 and older. The increased number of older workers in parttime jobs reflects the overall growth in the older worker population. Working part-time gives financial rewards, flexibility and social interaction. One guarter of those working part-time do so because of caregiving responsibilities; 19% cite economic reasons such as not being able to get a full-time job. Many of the jobs are in lower wager occupations, but employers are creating some high wage part-time jobs to attract high skill older workers.³² Older workers

MONTHLY EXPENSES FOR SELECTED HOUSEHOLD TYPES						
	Elder Person (age 65+)			Elder Couple (both age 65+)		
Expenses Monthly and Yearly Totals	Owner w/o Mortgage	Renter, One Bedroom	Owner w/ Mortgage	Owner w/o Mortgage	Renter, One Bedroom	Owner w/ Mortgage
Housing (inc. utilities, taxes & insurance)	\$600	\$876	\$1,617	\$600	\$876	\$1,617
Food	\$232	\$232	\$232	\$425	\$425	\$425
Transportation	\$197	\$197	\$197	\$309	\$309	\$309
Health Care (Good Health)	\$356	\$356	\$356	\$712	\$712	\$712
Miscellaneous	\$277	\$277	\$277	\$409	\$409	\$409
Elder Index per Month	\$1,662	\$1,938	\$2,679	\$2,455	\$2,731	\$3,472
Elder Index per Year	\$19,944	\$23,256	\$32,148	\$29,460	\$32,772	\$41,664

THE FLDER ECONOMIC SECURITY STANDARD INDEX FOR KING COUNTY 2010

Annual Comparison Amounts	Elder Person	Elder Couple
Federal Poverty Guideline 2010 (DHHS)	\$10,830	\$14,570
SSI Payment Maximum 2010	\$8,088	\$12,132
Average County Social Security Benefit 2010	\$15,417	\$25,085

Figure 5 | Source: The Elder Economic Security Standard Index for Washington, 2011.

especially those 65 and over typically face a longer search for a new job than younger workers - 42.1 weeks compared with 21.6 weeks for those 25-34 years old who were unemployed in June 2017. Older job seekers are disproportionally represented amongst the long term unemployed. For example in June 2017 adults aged 55 and over were 36.4% of the long term unemployed compared to 19.3% of the long-term unemployed ages 16-54. This can have far reaching consequences for people 65 and older: in addition to impacts on their current budgets, it can result in older adults taking early, reduced Social Security benefits, depleting their retirement accounts sooner, and may leave them unprepared for a long retirement.33

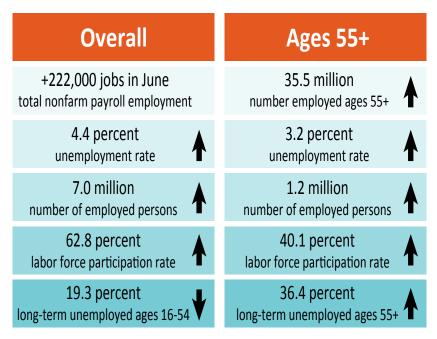
In King County, 43% of men and 38% of women age 55 and older were employed (full and part time) in 2011-2015. In Bellevue, 40% of men and 35% of women are 55 and older were employed in 2011-2015.³⁴

About 6.5% of older adults in Bellevue age 65 and over had incomes below the Federal

Poverty Level in 2011-2015.³⁵ Although this percentage is relatively low compared to the U.S. (10%) and King County (9.0%), it still impacts a significant segment population and increases the need for human services for this group. Further, there are significant disparities in poverty rates among ethnic groups in King County; according to data from the 2009-2013 ACS, 18% of African American older adults 60+ live in poverty, 17% of Asians, 17% of Hispanics and only 7% of Caucasians.³⁶

One indicator of low-income status is eligibility for the City's Utility Tax Rebate and Rate Reduction Programs. The number of older adults and people with disabilities (counted together, as some older adults also have disabilities) that take advantage of these programs had been increasing steadily since 1991 for the Utilities Rate Relief

Program and 1997 when the Tax Rebate Program began. In 2016, the rate seems to be slowing slightly, as there were 1,135 participants in the Utility Rate Relief Program and 1,148 participants in the Tax Rebate Program, compared to 1,174 and 1,203 respectively in 2015. City Staff are planning on outreach effort to enroll more who are eligible.³⁷



June 2017

Source: Bureau of Labor Statistics | Arrows denote directional change from prior month. *Figure 6*

"There is a pride that comes with never having had to ask for help. Older adults are embarrassed to ask for help. They don't even know the right questions to ask."

> - Bellevue College Community Conversation

In 2016 roughly 1 in 4 people that utilized the Bellevue Hopelink Center Food Bank were ages 55

and over, similar to percentages in prior years, Hopelink has had a slight increase in the actual number of Bellevue residents that are 55 years and older who receive services from Hopelink's Food Programs. As shown in Figure 7, in 2016, the number of people age 55 and over that utilized the food bank was 901, making up 24% of the total population served. In 2015 the number of older adults using the food bank was 882, or 24% of the total served. In 2014, the number of older adults using the food bank was 852, 23% of the total clients served. The largest numbers of food bank clients who are age 55 and over are born in Eastern European nations such as Russia, accounting for 42% of the older adults using the food bank. U.S. born older adults accounted for 26% in 2014. The number of Bellevue clients with Limited English Proficiency (LEP) who need an interpreter has continued to be similar to 2015 and 2016 at nearly 60%.³⁸

• The total number of clients and meals served at Sound Generations Meals on Wheels program (MOW) has been steadily increasing over the years, indicating that while funding has remained relatively flat the need for home-delivered meals is continuing to grow. Between 2014-2015 the program saw a 9% increase in clients served, and a 4.6% increase in the total meals delivered. However, due to funding issues, the program had to throttle back significantly in 2016. A waiting list had to be implemented, resulting in fewer clients and meals served. With the reduced staffing, MOW is still projected to deliver 18,000 more meals for 2017-2018 than funding is allocated for.³⁹

"Loneliness is an issue for older adults. Sometimes the only time they get out of their pajamas is to go to the doctor or to see a friend at a coffee shop, if they can get there."

— Key Informant Interview

Health Care and Health Promotion

Increasing physical activity, improving nutrition, reducing alcohol consumption, utilizing health screenings, having regular mammograms, and immunizations- all can help to prevent and/or manage chronic conditions and reduce disabilities as people age. As noted in the 2016-2019 Area Plan on Aging, low-cost, high quality, comprehensive evidence based health promotion programs for older adults at local community locations support and/or improve health. This approach also fits into one of the Area Plan goals of delaying Medicaid-funded long-term care supports and services by encouraging health promotion and disease prevention, including reducing the incidence of falls and increasing awareness about Alzheimer's disease and dementia.⁴⁰ There are many efforts countywide dedicated to

help older adults live longer, healthier lives. For example, the Healthy Aging Partnership, a coalition of agencies working on healthy aging issues, sponsors a website, an information phone line through Sound Generations, and trainings on health and fitness throughout the county. Programs are offered through the City of Bellevue Parks & Community Services Department, such as physical activity classes, fall prevention, nutrition, health screenings, and health workshops. **Overlake Hospital Medical Center** sponsors a program called "Walk for Life" that meets three times a week at Bellevue Square; the goal is to provide a safe, low-impact way to exercise and meet new friends. Evergreen Hospital Medical Center also sponsors health classes for older adults.

Medicare is a health insurance program for people aged 65 and older, and some people under age 65 with certain disabilities. One ongoing issue is the low Medicare reimbursement rates that continue to limit the number of older adults some doctors will serve. Dental care is not covered under Medicare. so some low-and moderate-income older adults postpone routine care until problems occur. Lack of dental care can result in a number of other health issues, including tooth loss, gum disease and mouth cancers. A recent study found that nearly 23% of older adults 65-74 years old have severe gum disease.⁴¹ Other services that older adults report being unaffordable is eye care and hearing aids because only limited services are covered by Medicare.

For more information about this issue, please see Goal #4 in this report.

PARTICIPATION IN HOPELINK FOOD PROGRAMS BY OLDER ADULTS (55 YEARS OR OLDER) WHO ARE BELLEVUE RESIDENTS BY LIMITED ENGLISH PROFICIENCY AND COUNTRY OF ORIGIN

Age 55 and Over				
	Number of Residents		Percent	
FY2012	7:	54	22%	
FY2013	74	47	25%	
CY2014	852		23%	
CY2015	882		24%	
CY2016	901		24%	
Country of Origin				
Eastern Europe			US Born	
FY2012	337	45%	128	17%
FY2013	362	48%	136	18%
CY2014	361	42%	202	24%
CY2015	373	42%	224	25%
CY2016	378 42%		234	26%
Limited English Proficiency (LEP)				

6 7, 7			
	Number of Residents	Percent	
FY2012	471	62%	
FY2013	480	64%	
CY2014	524	61%	
CY2015	533	60%	
CY2016	526	58%	

FY - Fiscal years listed began July 1st and end June 30th of the listed year (2013 consists of July 1st 2012-June 30th, 2013)CY - Calendar years listed began Jan 1st and end Dec 31st of the listed year (2014 consists of Jan 1, 2014 - Dec 31, 2014)Due to reporting changes, calendar year demographics were available. As these are still 12-month periods, they are reasonable to make a comparison. Figure 7 | Source Hopelink, September 2017

> New health care reform laws have significant impact on chronic care management and long term care services and supports provided through Seattle King County Aging and Disability Services. Two areas outlined in the updated ADS Area Plan under service integration and systems coordination are continuing to work with community partners to help support person-centered planning and help

Age Distribution of People with a Disability, United States and Bellevue, 2010-2014

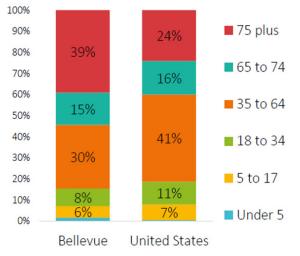


Figure 8 | Source: 2010-2014 American Community Survey

integrate services and supports, and actively participate in the King County Accountable Communities of Health initiative.⁴²

With the current age wave, the population of people with dementia is increasing, but services and supports are not keeping up. It is estimated that in Washington State, and estimated 110,000 have Alzheimer's disease or related dementia. The Washington Department of Social and Health Services estimates that between 2010 and 2040. there will be a 181% increase in the number of Washington residents aged 65 and older with Alzheimer's Dementia. It is estimated that the cost of caring for a person with Alzheimer's in the last 5 years of their life is \$287,038.43 In 2014 Governor Inslee signed Senate Bill 6124 which provided legislative authorization to develop a State Plan to Address Alzheimer's Disease and Other Dementias for Washington State. In November and December 2014 the Working Group solicited input from the public and over 2,250 people responded. Amongst the findings, five critical issues were identified by respondents: increase home care supports, provide family caregiver education and support, provide

financial help with care costs, increase residential services, and continue to support research on prevention. The entire report and findings was submitted to the Governor and Legislature in January 2016. An Advisory Group was formed to work on the goals and strategies from this plan that meets regularly.⁴⁴

Disability Issues

- Although the average life span is increasing many older adults' quality of life is affected by disability or activity limitations. Of older adults in King County age 60 and older, 78% have chronic health conditions; 38% have a disability. Data shows that, not surprisingly, disabilities increase with poverty. In King County, for example, 51% of people age 60 and older who live in poverty have physical disabilities.⁴⁵ In Bellevue, estimates from the 2010-2014 ACS also demonstrate the likelihood that having a disability increases with age, as shown in Figure 8.46 The impact of an increased number of older adults with disabilities, including mental illness, is already being noted by human service providers, and will likely increase as does that population.
- According to the National Center for Health Statistics nearly 50 million (17%) Americans have some degree of hearing loss. Estimates are that 18% of American adults 45-64 years old, 30% of adults 65-74 years old, and 47% of adults 75 years old or older have some kind of hearing loss. This issue will become even more prevalent with the oncoming age wave. A technology to assist people who are hard of hearing is called "Looping". Looping is a loop that circles the walls within a room and is connected to the sound system which in turns is amplified in a person's hearing aid by flipping the t-switch. This technology greatly improves the ability of a person with hearing loss to hear in large spaces such as auditoriums or meeting rooms. Looping has been used extensively in Europe for years but is only now becoming widely known in the U.S.⁴⁷ In 2016, the City of

Bellevue began the process of adding looping technology to a number of its public meeting spaces including the City Council Chamber and Conference Room.

- Another type of disability that increases • with age is vision loss. Though a smaller percentage of Bellevue residents 65 and older (5%) experience this type of disability compared to ambulatory (20%) it still impacts an individual's ability to work, care for themselves, and get to the places they need to go such as appointments or social events. People who have Multiple Sclerosis which can be diagnosed in any aged adults often can experience several different forms of vision impairment; vision issues are often the first symptoms people with this disease experience, like double vision. Creating signage, websites and walking spaces that take into account people with low or no vision is an important agefriendly accommodation.48
- According to a report by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), the number of older adults with mental illnesses is expected to double in the next 30 years. Mental illnesses have a significant impact on the health and functioning of older people and are associated with increased health care use and higher costs. One outcome of severe depression is suicide. Even though older adults only represent about 13% of the population in the U.S., they account for 18% of all suicide deaths. Older adults are at risk of developing both depression and alcohol dependence for perhaps the first time in their lives.⁴⁹ In King County over a five-year period 20% of suicides were committed by people over age 60 who made up 15% of the population during that period.⁵⁰
- Certain groups of older adults are more at risk for mental illness than others. These include widows or widowers, older men, white males 85 years and older, those who experience strokes, dementia, or other chronic conditions,

and people living alone.⁵¹ In Bellevue, 2011-2015 ACS data revealed increased numbers of older adults in some of these risk categories; for example, 42% of adults aged 65+ live in single-person households, compared to 22% of single-person households under 35-64 years of age.⁵²

- A recent study found that due to the population size and high substance abuse rate of baby boomers, the number of adults 50 and older with substance abuse disorder is expected to double from 2.8 million to 5.7 million in 2020. Recommendations include increasing resources for prevention and treatment.⁵³
- In King County, Geriatric Crisis Services are provided through the Geriatric Regional Assessment Team (GRAT) located at Evergreen Healthcare, which consists of geriatric mental health specialists, chemical dependency professionals, social workers, a nurse, an on-call occupational therapist and a psychiatrist. GRAT works collaboratively to provide in-home mental, substance abuse, medical, psychosocial and functional assessments for people age 60 and older that meet the criteria for eligibility. It also provides up to 6 sessions of in-home therapy for depressed and overburdened caregivers.⁵⁴ Another resource is the IMPACT model in which a mental health professional is co-located in a primary care setting to develop and administer treatment for depression and PEARLS, a series of in-home sessions with a social worker also targeting depression. Both of these are funded through the King County Mental Illness and Drug Dependency sales tax.⁵⁵
- Research shows that a person's age and disability may increase the incidence of abuse including neglect and financial exploitation. There has been recently more focus on Elder Justice coordination regarding Elder Abuse nationally, statewide and in King County. The King County Prosecuting Attorney's office coordinates a

grant awarded in 2012 to provide additional advocacy and case management to victims and to provide training to providers and first responders to know how to identify elder abuse. There is also a multi-disciplinary countywide Elder Abuse Council that meets monthly to coordinate efforts to address elder abuse. Seattle King County Aging and Disability Services also provides funding for an Elder Abuse Survivor Advocate who served 81 older adults in 2014.⁵⁶

For more information about this topic, please see Goal #3 in this report.

Transportation

- According to Transportation for America, an advocacy coalition, by 2015 more than 15.5 million Americans 65 and older will live in communities where public transportation service is poor to non-existent. At the same time, older adults use of public transportation increased by 40% between 2001-2009. A recent survey found that 20% of older adults 65 and older don't drive. Since being mobile is the key to independence, and many older adults are giving up their cars due to economics or disabilities, there is a major effort underway nationwide to find alternative ways for older adults to get around in face of the lack of other options.57
- Households headed by an older adult in Bellevue are less likely to have a vehicle than are households headed by people 35 to 64 years old. About 8% of people 65 and older stated they did not have a

Vehicle, compared to about 4% of people 35 to 64 years old. However, young adults 15 to 34 years old were even less likely to have a vehicle with 1% stating they did not

have access to a vehicle.⁵⁸ Making the

decision to stop driving either for health or financial reasons can have an impact on the number of older adults who need other forms of transportation in order to meet their basic needs such as doctor visits, shopping, and for recreation.

- In response to the growing need for better • transportation options for older adults on the Eastside, representatives from Hopelink, Sound Transit, United Way of King County, King County Metro, Seattle/King County Aging and Disability Services, the City of Bellevue Human Services, and Bellevue Network on Aging created a coalition in 2006 to improve access. The Eastside Easy Rider Collaborative (EERC) has identified creative and cost effective ways to assist older adults to improve their quality of life through increased mobility. In 2017 the group again helped secure funding from the Federal Transit Administration through Puget Sound Regional Council to continue the position of a Mobility Coordinator that is administered through Hopelink. Each year, more partners from throughout rural and urban East King County have become new members, including Sno-Valley Transportation and King County Veterans Advisory Board. Other activities relevant to older adults include developing a "cookbook" on how to add benches to areas to promote walking and using fixed route transportation, and sponsoring "ORCA to Go" events at East King County community centers to provide access to ORCA passes.
- In King County, Americans with Disability Act (ADA) paratransit services are provided by Metro's Access Transportation. Access Transportation provides public transit for people with disabilities who are unable to ride a bus or travel to a bus stop due

to limitations of a disability. The service is comparable to bus service: a shared ride service that operates during the same days and hours as bus service in the area. Just like for the general public, transit is not always the best transportation choice for people with disabilities. Alternatives that meet the needs of seniors and people with disabilities. such as volunteers who use their own cars, vans to bring people from their homes to fixed route bus stops, creating shuttle routes or helping people learn how to ride fixed bus routes, is critical. In 2016 King County Metro launched a review of Access services to improve the customer experience. For example, it will adjust drop off times to no more than 30 minutes from the start of an appointment time by the end of 2017 and create a new online scheduling for customers outside of business hours.59

- In 2016 Sound Generations' Volunteer • Transportation Program, which uses volunteers drivers to transport King County seniors to their medical appointments, provided 352,974 miles and 25,506 one way trips. In the city of Bellevue, volunteers drove 115 Bellevue senior residents (unduplicated count) 22,072 miles and provided 1,728 one-way trips. These figures are consistent with previous years. However, staff continue to turn away eligible clients from our program because we simply do not have sufficient volunteer drivers to meet service demand. Volunteer recruitment is a high priority for the program, but recruitment continues to be more challenging than in the past for a variety of reasons, including traffic congestion, tolls on the 520 Bridge and people working longer as they still recover from the recession.⁶⁰
- In King County, 26% of residents 65 and older report using public transportation to get to and from their neighborhoods, slightly higher than residents compared to the same group nationally.⁶¹

Need for Affordable and Accessible Housing

- In a recent report commissioned by a collaboration of five public agencies, including housing authorities, King County and the City of Seattle, the need for affordable housing for the growing "tidal wave" of older adults was found to greatly surpass the supply. It is estimated that more than 900 additional units per year will be needed in King County until 2025, at which time the percentage of people age 65 and older will double to 23% of the population.⁶²
- Housing affordability is defined as paying 30% or less of one's income for housing. According to estimates from the 2011-

2013 ACS, over 51% of older adult renters living in Bellevue paid 30% or more of their income for

housing compared to 31% of overall households. In contrast, about a third of older adult homeowners paid 30% or more of their incomes on housing. This has increased since 2012.⁶³ New in King County as a whole, the proportion of renters who pay more than 30% of their income on housing grew 5.5% from 2008 to 2010 (58% to 63%); for King County owners, the increase was less, at 2% (32% to 34%).⁶⁴

- Reports are increasing of more older adults represented among those who are homeless in shelters or living in their cars, although it is difficult to determine an exact number. Staff from the Crisis Clinic of King County found that almost 11% of the 75,880 calls they received in 2016 were from older adults in search of basic human services including financial assistance, housing, home maintenance or repair, food and transportation. These 2016 numbers are a slight increase from 2014.⁶⁵
- The Sophia Way is a day center, shelter and housing program for single homeless

women serving East King County. The shelter is located at St. Luke's Lutheran Church and operates from 6:45 pm to 7:45 am. The Sophia Way provides overnight shelter and aids clients in seeking housing through case management designed to journey with women on their path from homelessness to stable independent living. Life Skills, a Companion Program, Financial and Educational Coaching, access to dental care and a wide variety of programming are offered to women. In 2016 at the Eastside Emergency Winter Shelter, 43% (58) of the 135 women served were aged 50 or older. In 2016 at Sophia's Place, 48% (30) of the 63 women served in the shelter were aged 50 or older, and at the Day Center, 34% (103) of the 302 women served were aged 50 or older.⁶⁶ At the Congregations for the Homeless men's year round shelter on the Eastside in 2016, 25 of 127 men served (20%) were aged 55 or older. In the Eastside Winter Shelter in 2016, of the 513 men serviced, 74 of them were aged 55 or older (14%) In the men's day center, opened in December 2016. 184 men were served and 26 of them (14%) were 55 or older. Of the 92 men in the housing program 31 or 34% were 55 or older.⁶⁷ The New Bethlehem is a day center for families with minor children serving East King County. The day center is located at Salt House Church and operates Sunday to Friday 2pm to 8pm. The day center opened in November 2016. Services provided at the day center include an afternoon snack and warm dinner, restrooms. showers, laundry facilities and access to computers and social services. In 2016, 6% of the individuals served in the family day center were aged 50 or older.⁶⁸

 Reverse mortgages are becoming popular among older adults who are cash poor but have substantial equity in their homes. Homeowners 62 years and older can apply for a FHA backed mortgage and receive a lump sum, periodic payments, or

a line of credit to use for living expenses. Homeowners must still pay property taxes and insurance, however. Nationally, the number of reverse mortgages grew from 157 in 1990 to 112,000 in 2008. The number fell in 2010 to 72,746, which some analysts attribute to lower home values. This number decreased again in 2012 to 54,591 as a result of the financial crisis. Due to an increasing number of foreclosures on homes with reverse mortgages, new federal legislation in October 2013 placed limits on the amount that can be taken out and the amount of equity that they will retain. In 2015 rules were further tightened to reduce the number of defaults: in 2012 one out of ten outstanding loans were in technical default. These new rules could make it more difficult for homeowners who want a reverse loan to meet the criteria.⁶⁹

- In Bellevue, there is some affordable housing below market rate that is available to individuals and families that meet income guidelines. For example, a household cannot have an income greater than \$38,400 (50% of the median income for King County in 2017 as determined by the federal government) to be eligible for a one-bedroom unit. The subsidized cost of the unit in this case would be \$960/month. In Bellevue, there are only 400 affordable (below market) rental units specifically for low-income older adults, slightly more than the number available two years ago.⁷⁰
- Universal Design (UD) is the design of products and environments to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. This philosophy is beginning to impact the way new housing units are designed and built to enable older adults the maximum mobility in their homes, as well as people with disabilities and families with young children. Housing using universal design elements, such as grab bars and low kitchen counters, can assist older adults in

staying in their homes longer, without having to move if they develop mobility challenges. The Northwest Universal Design Coalition advocates for these elements to be included in public planning such as streetscapes, sidewalks, transit and walking trails.

The need for help with the costs of minor • and major home repairs was identified by a number of older adults in the phone/online survey in 2017. The City of Bellevue Major Home Repair Program serves between 35-40 low and moderate income households annually and the Minor Home Repair Program, provided by Sound Generations, provides about 35 households with smaller repairs annually. In both programs, over 80% of clients are age 65 or older. Staff from the City of Bellevue Fire Department also can install grab bars and help older adults assess their homes for potential hazards that would cause them to trip and fall. The trend toward older adults "aging in place" particularly during the economic downturn has made it critical that low-cost options for health and safety repairs are available. This type of assistance increases the well-being of older adult homeowners, and also maintains the high quality appearance of Bellevue neighborhoods.

Lesbian, Gay, Bisexual and Transgender Older Adults

As the older adult population becomes more diverse, the number of older adults who identify as lesbian, gay, bisexual, transgender and questioning (LGBTQ) is also expected to grow, according to the 2016-2019 Area Plan on Aging published by the City of Seattle for Seattle and King County. This plan estimates that 2.4 million (2.4%) of adults in the U.S. age 50 and over identify as LGBTQ; in King County, it is estimated that about 2% identify as LGBTQ, and this is expected to double in the coming decades. Some of the issues encountered by this population include the need for expanded resources

such as more opportunities for social support as many LGBTQ older adults do not have children who can help with their care as they age and discrimination due to their gender identities. Older adults in the LGBTQ community also voiced the need for more training for providers who work with older adults on working with LGBTQ older adults and better access to service and supports.⁷¹

 At a recent forum held in Seattle for the LGBTQ older adult community, some of the suggestions were to increase the availability of LGBTQ older adult affordable housing, having more LGBTQ staff in the health care, social work and long term services fields so they can understand the unique LGBTQ issues, and better and more available resources for the LGBTQ community.⁷²

Grandparents Raising Grandchildren

- The 2000 Census was the first to ask about grandparents responsible for raising grandchildren. The main reasons cited for grandparents taking on this role are substance abuse by parents, incarceration, abuse, and teen pregnancy. Nationally, in 2010 6.6 million children under 18 are living in grandparent-headed households, a 46% increase compared to 2000.⁷³ In Washington State, 35,761 individuals are the primary caregivers raising their grandchildren living with them with neither parent present.74 In King County, about 7,354 individuals and in Bellevue, 120 individuals identified themselves as parenting grandchildren during 2010-2012.⁷⁵ If this trend continues, there may be increased need for resources - including financial, legal and social support - for these older adults.
- Since 2001, Seattle/King County Aging and Disability Services have provided funding through the Federal Older Americans Act to agencies throughout the county to provide what is called "Kinship Care Support" for

grandparents. In addition, the State biennial budget in 2011 began to provide additional discretionary funds to several Kinship Care groups in the East and South King County. These funds provide many services such as counseling and scholarships for camp and activities that many grandparents cannot afford for their grandchildren. In 2004, Senior Services began the Kinship Navigator Program at several sites to provide linkages for families with community resources, to help them establish stability to keep the children out of foster care. Catholic Community Services now sponsors these King County Kinship Care Collaboration. Encompass, a non-profit human service agency located in the Snoqualmie Valley, provides one such program that serves 30 families in East King County annually including some Bellevue residents. They offer quarterly outings and 1-1 support, consultation, and home or office visits. Some of the frequently requested services are for their grandchildren, such as beds, clothing, school supplies and funds for classes. Sound Mental Health also sponsors a support group held at their Bellevue Office. Families attending this group identified scholarships for classes and sports, legal assistance for custody issues, counseling for children, and respite care as top needs.

Community Perceptions

- City of Bellevue Code Enforcement officers report that they see more older adults who need help maintaining their homes, with a particular problem occurring with hoarding issues.
- In the 2017 Human Services phone/online survey, respondents who were older adults had lower number of problems in their households compared to respondents under age 34. However, the older the respondent, the more community problems they rated as major or moderate. For example, residents age 55 and older rated an average of 9.3 potential

problems as major or moderate in their community, significantly more than residents age 18-34 (5.4) or 35-54 (7.5).

- Members of several faith communities in Bellevue who were interviewed observed that older adults are more frequently asking for resources for affordable housing, affordable in-home care, transportation to appointments and companionship.
- People receiving technology help at Senior Net of Puget Sound identified the need for affordable internet services so low-income older adults could be connected to their families and look for services which now are frequently online. Another need is general lack of information about resources.
- Key informants from the Chinese and East Indian communities in Bellevue said that older adults in those communities often experience isolation and depression as they adjust to this new culture, and need more opportunities to be active and socialize in the community. Some are here to care for their grandchildren while their sons and daughters work. Many lack the time or transportation to access conversational English classes.
- A recurring theme throughout the community engagement activities with older adults is lack of transportation options. Increasingly older adults rely on public transportation or volunteer driver programs to get to needed appointments, going to the grocery store, or participate in social events to decrease isolation. Also mentioned was the lack of sidewalks and hills that make it difficult for those who want to take fixed route buses to get to the bus stops, and benches there to sit on while they wait.
- Staff from Bellevue College report that the biggest challenges they find in working with older adults who are students are helping them find services like housing for which they can qualify. Staff are seeing a new population of older adults (55+/pre-

retirement) with Master's degrees and/ or PhDs being laid off and having to find new jobs. Without recent experience in the job market, this is a challenge.

 Older adults from the Asian Senior Concerns group as well as those at the Senior Net program voiced a need for a list of reliable and trusted contractors to provide home repairs. "Some older adults become disabled before they think they will and need accessibility earlier."

- Key Informant Interview

up phone calls and in-home visits to assess the situation and provide resources. The program oversight is provided by a person

> with a Masters of Social Work degree who works with Masters of Social Work interns to provide the services. Of the 84 people who received services in 2014, 89% were over age 50. After intervention by a

- Members of the Bellevue Network on Aging identified a number of issues that they believe should be addressed for older adults in Bellevue. These include: improving transportation options for those who can no longer drive or are temporarily disabled, support for people with memory loss and their caregivers, affordable housing, affordable long term care options to allow people to stay in their homes, and safeguards for older adults related to elder abuse including scams and financial abuse.
- Another issue identified was the gap that many older adults who are not yet 65 years old experience in finding healthcare as they are not eligible for Medicare yet. This also occurs for some transportation programs that require this same age standard.
- For years staff from the Bellevue Fire Department identified the need for a central point of contact within the city to help coordinate their response to the growing needs of residents, many of whom are older adults, who frequently called 9-1-1 for assistance. Staff encountered isolated older adults, many with mental or physical disabilities, who were only marginally able to care for themselves or their homes without help. In response to that need, in 2012 the Department created "Bellevue Fire Cares" which provides an online system for fire and police to refer residents, who receive follow

Cares worker, there was a 76% decrease in subsequent calls for 9-1-1 from those individuals. Needs identified by these interns that pertain to older adults include better transportation options for those who do not meet Medicaid guidelines to get to medical appointments, transportation for events at community centers to address social isolation, and more services for older adults who have mental health issues and help for their families.

Implications for Action

- The rising cost of living strongly impacts many older adults living on fixed incomes. More older adults will likely delay their retirement and work beyond the traditional retirement age of 65, primarily because they can't afford to retire. More support for older adults to find employment may be needed, as well as training opportunities to gain skills in computers and using social media for job searching. Programs such as volunteer transportation and information and referral hubs, are critically needed to help bridge the gap.
- The demand for services for older adults from other countries newly settled here or long-time residents will likely continue to increase. These services include English and citizenship classes, culturally sensitive healthcare, and activities that will encourage

them to share their talents and abilities to feel more included in their new culture.

- Coordinated transportation for older adults in the community is likely to become a major focus. Modes of transportation other than single-occupancy vehicles such as shuttles and buses will be increasingly important. Many older adults will give up owning their own vehicles and will need ways to get around to their jobs, to medical appointments, and to other activities essential to daily life.
- Providing support for family caregivers is critical. This is a wise economic investment given the enormous cost-savings to the Medicare, Medicaid and long-term care systems in addition to the positive impact on the disabled and older adult's quality of life. Providing information and resources such as affordable respite care, support groups for caregivers, and classes on planning for their disabled loved ones when they can no longer care for them can help provide some immediate resources to address their stress.
- Housing options for older adults is needed to address the huge shortfall of affordable housing that is evident now, and will peak by 2025. Creative options are important to consider. These could include more lowincome housing development for older adults, home sharing programs, Universal Design and zoning for Accessory Dwelling Units.
- Using technology to help improve the quality of life applies now more than ever for older adults. From Looping for those who are hard of hearing to assistive devices to help those with mobility issues, technology can become an integral part of the menu of resources from which older adults can select to help them lead rich, full lives.
- Dental, hearing and vision services, which are not covered by Medicare, will continue to be more in demand from older adults, and put increased pressure on communitybased agencies to provide. Access to mental

health counseling remains a critical gap for older adults; a system-wide expansion of service capacity for older adult behavioral health services, from prevention to in-patient treatment is needed.

• Planning is needed to making communities more livable for people of all ages, often referred to as "age-friendly". This includes increasing opportunities for social engagement, healthy lifestyles and civic participation.

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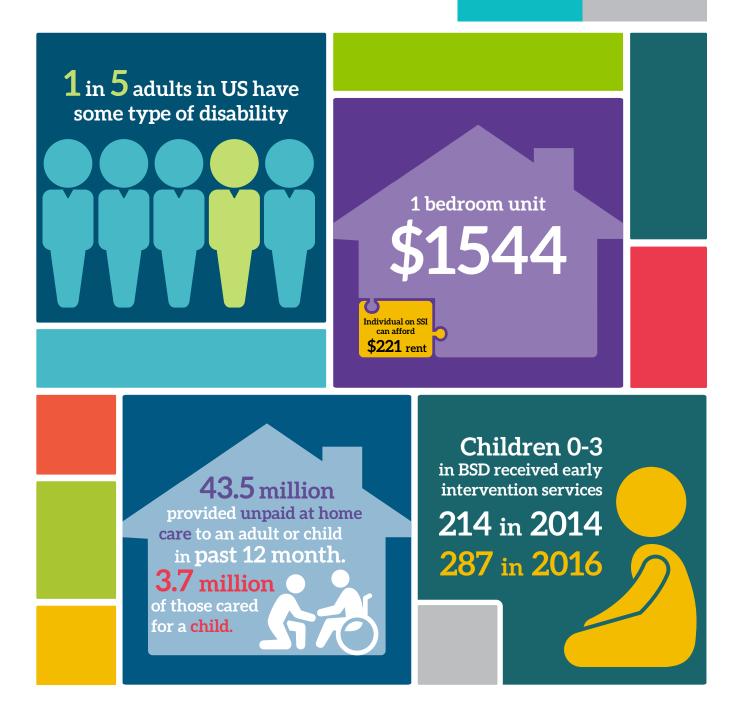
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People with Disabilities



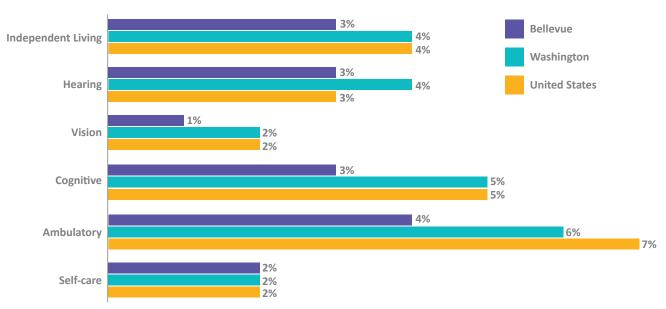
PEOPLE WITH DISABILITIES

The Americans with Disabilities Act (ADA) was signed into law on July 26, 1990 and in 2015 celebrated its 25th anniversary. The ADA insures the civil rights of people with disabilities and establishes a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities. The City of Bellevue has consistently and diligently worked to make all its programs, services and facilities accessible to people with disabilities. For over 30 years, the city has provided adaptive recreation programs as well as other accommodations and access to general recreation, and has other examples such as an evaluation of sidewalks and curb ramps throughout the city using innovative techniques. In developing the Diversity Advantage Plan in 2014, the City is responding to the changing demographics with the goal of equity, access and inclusion for all.

Note: This chapter will deal primarily with issues related to developmental and physical disabilities. For more information on mental illness, please see *Goal 4: Health Care to Be as Physically and* Mentally Fit as Possible. For more information about Older Adults or Veterans, please see these sections under Specific Populations.

What's Working?

AtWork! is a non-profit agency that provides employment and community inclusion services for people with intellectual and developmental disabilities. AtWork! successfully transformed from a provider of sheltered workshop and facilitybased services to integrated community employment and inclusion and is now recognized as a national leader in that movement. Today, AtWork! is serving more people than ever (52 new people in the first half of fiscal year 2017, more than any other full previous year). Since AtWork! began its transformation in 2006, they served 410 new people with disabilities and developed over 350 jobs; people with disabilities have earned nearly \$9 million at an average hourly wage of \$12.48.



Disability by Type 2010-2015

Figure 1 | Source: U.S. Census Bureau, 2010-2014 American Community Survey

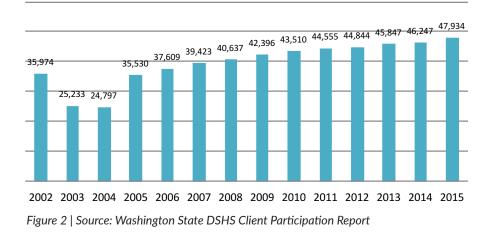
- Kindering Center, a neuro-developmental center for children birth to five in Bellevue, provides a support group for siblings of children with special needs, called Sibshops. These are fun, action packed workshops in which siblings are encouraged to share their challenges and celebrate the joys with brothers and sisters in similar situations. The workshops are held at their Bellevue and Bothell locations monthly.¹
- As a result of the City of Bellevue's Diversity Advantage Plan, a new Supported Employment Program was implemented in 2016. This program provides opportunities for individuals with disabilities, assisting with job placements at the City that range from filing to stocking supply rooms.

Prevalence Adults

 It is estimated that 1 in 5 adults or 53 million adults in the U.S. has some type of disability.² With

medical advances helping more people survive longer with disabilities than in the past, there is a greater need for communities to provide a network of supports. A top priority among many people with disabilities, and those who help care for them, continues to be improving community-based services, including access to information about services, affordable housing, after-school programs, respite care, employment support, and accessible transportation to facilitate their inclusion in all activities of daily life.

- Developmental disabilities are severe physical and/or mental impairments that occur before adulthood, are permanent and limit an individual's ability to function. Washington State's current definition includes epilepsy, autism, cerebral palsy and intellectual disability. The prevalence rate of developmental disabilities, as defined in federal law, has been estimated to be 1.2% of the non-institutionalized U.S. population. Based on this rate, the estimate of King County residents who have development disabilities is 24,533.³
- Older adults have the largest share of people with one or more disabilities. About one third of older adults have one or more disabilities compared to five percent of people ages 18 to 64 and 3% of children.⁴



Developmental Disabilities Client Trend

IN DSHS/DDD AS OF JULY 1, 2017 BY AGE GROUP				
Age Group	No. og Individuals Enrolled in DSHS/DDD, Region 4			
0-2	232	27.7		
3-5	106	12.4		
6-9	50	5.9		
10-13	35	4.1		
14-17	44	5.2		
18-20	32	3.8		
21-61	332	39.0		
62-79	2.3	3.92		
80+	1	0.1		
Total	852	100.0		

BELLEVUE RESIDENTS ENROLLED

Figure 3

Service Trends People with Developmental Disabilities

- The Washington State Department of Social and Health Services Division of Developmental Disabilities' (DDD) most recent client participation report indicates that there were 47,934 persons in the state who were enrolled in their services at the end of June 2015, about 5% more than the 45,847 enrolled in 2013.⁵
- Enrollment has also increased over the last few years for services offered by the King County Division of Developmental Disabilities (KCDDD). In the last five fiscal years, total annual enrollment has grown from 2,543 to 3,419 children served, representing a growth rate of 34 percent. Despite this growth in numbers of children served with Early Intervention (EI) services in King County, the percentage of infants and toddlers who receive EI services has remained fairly flat. Analysis of King County birth data by race and ethnicity indicates that some communities are more underserved than others.⁶⁶

As shown in Figure 3, as of July 2017, there were 852 people with developmental disabilities in Bellevue enrolled in the State program through the Department of Social and Health Services and the Developmental Disabilities Administration (DSHS/DDA) in King County. DSHS/DDA authorizes services for a subset of the enrolled population. Across King County, there were 12,532 residents as of July 2017 who were authorized for services.⁷

Support Services with and without Waiver Plans

 The State DDD replaced its Medicaid Home and Community-Based Services (HCBS) and Community Alternatives Program (CAP) Waiver with five waivers. Waivers are agreements between the State and the Federal agency responsible for Medicaid. The State receives Federal matching funds for services provided under the waiver plan. There are four waivers - Basic Plus, Core, Children's Intensive In-Home and Community Protection that were renewed effective June 2015. Also approved was the Community First Choice Program.

BELLEVUE RESIDENTS ENROLLED IN DSHS/ DDD AS OF JULY 1, 2017 BY AGE GROUP

Age Group	Paid Service Caseload	Clients Enrolled on HCBS Waiver	No-Paid Services Caseload	Total
0-2	178	0	54	232
3-5	99	9	7	106
6-9	36	23	14	50
10-13	27	20	8	35
14-17	33	30	11	44
18-20	27	20	5	32
21-61	277	239	55	332
62-80	15	12	5	20
81+	1	1	0	1
Total	693	354	159	852

Source: DSHS Case Management System

Figure 4

Each of the waivers provides an array of services tailored to the specific populations they serve. However, the capacity of the waiver program is limited based upon State funding.⁸ As a result, there are many more clients who are eligible and want to participate in the waiver programs than there are available slots. This is shown in Figure 4, in which the number of clients not on waiver plan, especially for those 0-20 years old, is less than those on a waiver plan.

 Services for clients who have waivers include Adult Residential Care, Emergency Assistance, Employment Services, Personal Care, Respite Care and a long list of other opportunities. Services for clients without waivers include some of the same programs, such as Respite and Employment Services, but access depends on eligibility and funding availability.

Residential Habilitation Centers (RHC)

- Since the 1960s, there has been a decrease in the number of people with all disabilities living in institutions and an increase in the number living in the community. The civil rights movement was a motivator for people with disabilities to seek jobs, housing and activities in their own communities instead of institutions. The Americans with Disabilities Act was signed into law in 1990, eliminating discrimination in housing, employment, transportation, and public accommodation, and celebrated its 25th anniversary in 2015. More recently, the U.S. Supreme Court ruled in Olmstead v. L.C. that states must place people with disabilities in community settings when appropriate.
- Statewide, the number of persons with developmental disabilities living in residential habilitation centers (RHCs) and nursing homes, which are facilities which provide intensive nursing care and skill development for those who are severely disabled, has

decreased dramatically. As of July 2013, there were about 1,000 individuals in one of these 4 facilities in the State, compared to 4,145 at their peak in 1967. The average annual cost per client living in RHCs is \$174,407 compared to \$20,351 per client annually to receive personal care services in the family's home or community residential facilities.⁹

Residential Services

• In Washington State, the majority of people with developmental disabilities (97%) live in the community, most with their

families. The remaining 3% either live in their own homes receiving nonfacility supported living services or in licensed group care, such as adult family or nursing homes. For those who can't live independently, supported living services offer instruction and support to persons who live in their own homes in the community. Supports may vary from a few hours per month up to 24 hours per day of one-to-one support. Clients pay for their own rent, food and other personal expenses. Adult family homes (AFH) (licensed facilities for six residents or more) are available as an intermediate level of care. Nursing homes support people who need the assistance of 24-hour nursing staff. In 2017, there were 129 AFH licensed by the State in Bellevue.¹⁰ Some of these facilities also serve frail elderly people and individuals with other disabilities, such as those related to head injuries, strokes or chronic diseases.

• Of the 13,731 DDD clients living in King County as of August 2017, 3,317 live in the City of Seattle with 10,414 living outside of the city; 924 live in Bellevue. The vast majority of the 10,414 clients who live outside of the City of Seattle live in their parents homes: 9,772. The remainder receive residential services in a variety of settings such as Supported Living (992), Adult Family Homes (528) and Group Home (110). "Residential services" are comprehensive housing support services provided in community based housing by agencies that contract with the Washington State DSHS/DDD.¹¹

Adults with Intellectual and Developmental Disabilities (I/DD) Living with Aging Parents

- Many providers believe there is a crisis emerging regarding the increased support needs of aging people with I/DD who live at home with older adult parents. As of July 1,2017, 1,112 (8.9%) individuals enrolled in DSHS/DDA Region 4 are age 55 and above. Of these clients, 122 clients live with a parent or relatives. As of July 1, 2017, 2,445 (19.5%) individuals enrolled in DSHS/ DDA Region 4 are age 40 and above. Of these clients, 465 clients live with a parent or relative.¹² Families who are caring for this population are aging, and need assistance with transition planning, including legal, financial and residential information.
- AtWork! staff report that some of their clients have received services from this agency from several years to over 30 years. As they age, many are developing additional disabling conditions and seeing increased impact from their disabilities. Individuals with Down Syndrome are living longer and developing early onset dementia. This results in decreased independence and increased reliance on staff and other supports to maintain employment and community living. AtWork!'s Community Inclusion program provides individualized supports so that people can access community activities and avoid the effects of isolation. Many older adults with disabilities are living with elderly parents who are struggling to

maintain their own level of independence and continue to care for their adult child with disabilities. There is a growing need for supportive and affordable housing for both the individual with disabilities and their parents. In addition, younger adults with more complex disabilities such as autism and their families are finding it difficult to obtain the services they need: services that help them successfully work and access their communities when they aren't working; and affordable housing and residential support services that enable them to live as integrated and independently as possible outside of their parents' home. Services are segmented and the options are often limited by lack of resources and funding. Medicaid funds 50% or more of community-based services for people with disabilities living and working in their communities. Potential Medicaid cuts and changes will have a significant impact on the quality of life of all people with disabilities and put additional stress on other systems.¹³

Affordable Housing for Independent Living

 Finding affordable housing in the community is challenging for many people, but those with disabilities who seek an independent living arrangement, such as an apartment, have additional barriers. There were roughly 8.2 million individuals receiving federal Supplemental Security Income (SSI) because they are elderly, blind or disabled and have few economic resources.¹⁴ With the maximum federal monthly payment of

\$735/month in 2017, an SSI recipient could only afford \$221/month rent (30% of income). There is not one county in the U.S. where even a modest efficiency apartment is affordable for someone receiving

SSI. The Fair Market rent for a one bedroom apartment in the Seattle-Bellevue Metropolitan

area is \$1,544/month, more than the entire check.¹⁵ For individuals who rely solely on their SSI check for income, or even who receive supported employment services that pay higher wages, market rate housing is not an option.

In 2003, KCDDD created the Housing • Innovations for Persons with Developmental Disabilities (HIPDD) funding program to expand the affordable housing options that are available for persons with developmental disabilities in King County. To date, the program has funded over 40 housing units, with the goal of providing ongoing funding for housing projects. HIPDD assists nonprofit housing developers with capital funding in Seattle and King County that reserves the lowest income units in new affordable, multi-family housing for their clients, and also come with an additional operating subsidy, like Section 8, to ensure that units are affordable.¹⁶ In 2016, on the Eastside, there were 274 units set aside for disabled persons in 21 multi-family projects funded through A Regional Coalition for Housing (ARCH). Eight of these are specifically for persons with Developmental Disabilities. In addition, a total of 163 beds in 23 facilities for Special Needs or Disabled populations funded in part by ARCH. Of these, 13 facilities with 69 beds are designated for people with developmental disabilities. These include group homes in Redmond, Issaguah, Kenmore, Bothell and Bellevue as well as condos in Bellevue and apartments in Bellevue and Redmond. There was no change from 2015 numbers. however one new project received predevelopment funding in 2016 which will likely include an additional 8 units for people with developmental disability.¹⁷¹⁷

Employment: Division of Vocational Rehabilitation Services

The State Division of Vocational Rehabilitation (DVR) is the primary funder of services for people with disabilities to obtain and keep employment. DVR eliminated its waiting list for services effective February 11, 2008. At its peak, the waiting list had over 14,000 individuals. In 2010, DVR received 12,500 applications with 10,964 determined eligible; in 2015, there were 9,450 new applications, with 8,616 determined eligible. The decrease in applications is attributed to steps taken in the past few years to increase coordination between DVR and the Department of Social and Health Services (DSHS) which had a practice of mandatory referrals of its clients in the Aged, Blind, and Disabled

Types of Disabilities of Customers Successfully Employed

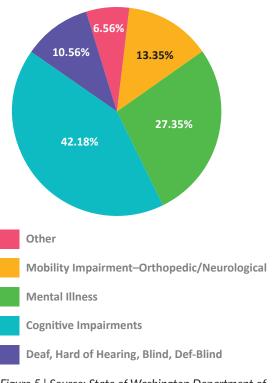


Figure 5 | Source: State of Washington Department of Vocational Rehabilitation August, 2017

Program to DVR. This practice began in 2009 and was discontinued in 2012. DVR staff is doing additional outreach to return referrals back to the 2009 levels of 10,000 to 11,000 referrals/year. In 2013, DVR reported 8,667 total rehabilitations, at an average cost of \$6,775 per client, an 11% increase in cost compared to 2010.1¹⁸

- Bellevue clients represent 2.2% of the open DVR cases in Washington State as of August 30, 2015, slightly less than 2 years ago.
 Between October 2015 and September 2016, 281 applications for services were received at the Bellevue DVR office. Bellevue DVR clients had a somewhat higher rate of rehabilitation compared to the State (59.6% vs. 59.0%). Average hourly wages for Bellevue clients when they are placed in jobs are \$12.75, somewhat higher than the State average of \$12.57.¹⁹
- Though the unemployment rate after the recession has decreased, it still can be challenging for people with disabilities to find jobs. In a competitive environment, job developers need to be more creative to find work for their clients. Figure 5 shows the percentage of clients statewide within each disability category who were successfully employed in 2017 through DVR. These percentages remain relatively unchanged from two years ago.²⁰

Employment: King County DDD Contracts

 KCDDD funds long-term employment services for adults with developmental disabilities (ages 21 and over) who are enrolled with the Division Employment Vendors in the community, to provide ongoing support, job coaching, and job placement services as needed. In 2013, 2,166 individuals were served in all employment programs funded by KCDDD; there was a significant increase in the number of adults who received individual employment programs from 2010-2012 due to a change in state policy which eliminated the Person to Person service category and moved those individuals to an appropriate employment category.²¹

AtWork! empowers people with disabilities to find and keep jobs that match their talents and interests. These "dream jobs" transform the lives of people with disabilities because they earn money and are working to escape poverty; they have an opportunity to contribute, demonstrate their value to a business, and be included in community life. Their customized and supported employment programs include volunteering, work trials, and one-on-one job coaching; as each person establishes vocational goals and builds a resume that demonstrates skills needed by employers. AtWork! works with businesses to identify job opportunities that take advantage of an individual with disabilities' unique talents while meeting a critical business need. More and more businesses are employing people with significant disabilities. Their placements have increased to over 70 per year, with a total of over 350 for the last ten years. In the last 7 years, 220 businesses have hired, for the first time, a person with a disability supported by AtWork!.22

Transition Programs for High School Graduates with Intellectual/ Developmental Disabilities

 If high school students with disabilities do not have appropriate work experience and transition services while still in high school, they are often unsuccessful at finding employment. In King County, an estimated 150-180 students with I/DD graduate each year. To address this need, KCDDD, in collaboration with a series of partners, provides the King County School to Work

Project, (S2W) a program that helps young adults ages 20-21 with developmental disabilities transition from high school to the community, hopefully to a job. The percentage of students who are enrolled in this program ranged from 60% to 77% between 2010 and 2013. Based on the data collected, KCDDD is anticipating major changes in the demographics for transition students graduating from high school in the future. For example, in 2013, about 60% of the students in the S2W program were White, but a significant portion of students who are not White with ID who are school age now will be graduating in the next few years and KCDDD projects that S2W will be serving a much more diverse population.²³

AtWork! provides School to Work Transition • services to students in local school districts through KCDDD and the Division of Vocational Rehabilitation. Working with high school staff, AtWork! professional and certified Employment Consultants serve the needs of individual students through community work experience, job trials, resume development, job search, job placement and on-the-job coaching while in school and after graduation. AtWork! is the "embedded provider" for the Bellevue School District. Staff reports that schools are asking them to work with younger students to help them and their families understand the system and access services. It is a growing need as families can have a significant disruption when school ends and the student does not have a job or services. In 2017, the program served 20 Bellevue residents.²⁴ Another organization, Alliance for People with disAbilities, has a Youth Transition Program that focuses on preparing students age 14-24 for work, school or volunteer opportunities. The program is currently rebuilding its program outreaching to youth, parents and school districts.²⁵

Increasing Cultural Diversity

- The 2014-2017 King County Plan for **Developmental Disabilities Services** identified a need for culturally competent services and outreach for the increasing number of people from diverse ethnic and cultural communities and with limited English language skills, including families of children and adults with I/DD. In preparing for the 2014-2017 plan, KCDDD conducted a series of web-based surveys, focus groups, community meetings and individual interviews to determine how to address this need. A recurrent theme was that language and cultural barriers prevent many families from understanding what services they might be eligible for or accessing services in King County. For some cultures, early intervention services may be a new concept and these families may not understand B-3 services as a positive opportunity. In King County, 18.09% of clients enrolled for DDD services speak a primary language other than English. In East King County, less than a third of the population enrolled in DDD services speaks English as a second language.²⁶ According to the 2011-2015 ACS, King County as a whole has about 21% of its population age 5 and older who are foreign born and 27% speak a language other than English at home.²⁷
- In Bellevue, some providers of services for people with disabilities describe a growing trend of diversity among their participants. Kindering Center reports an increasing number of diverse families and has added more bilingual staff, is using more interpreters, and has several classes in Spanish and one in Russian.²⁸

• The SOAR Promotores Program works with KCDDD countywide to provide bilingual and bicultural outreach to families, links them with bilingual bicultural communities and conducts developmental screenings with families. The Arc of King County and Open Doors for Multicultural Families also conduct multicultural outreach to families with young children.²⁹

Need for Additional Recreational Opportunities

The City of Bellevue Department of Parks and Community Services provides specialized recreation opportunities for those living with disabilities as well as inclusion support to participate in general recreation. The majority of specialized programs occur at the Highland Community Center and several programs are based at the Northwest Arts Center, Tennis Center and the Aquatics Center. The Bellevue Youth Theater, Kelsey Creek Farms, and the Crossroads Community Center experience a high number of participants living with intellectual and physical disabilities. In 2016, 350 individuals participated in 128 different programs at the Highland Community Center, which is one of the highest drop-off and pick-up sites for the Metro Access ride service. There has been an increase of kids living with disabilities participating in general recreation programs. Primarily in the summer day camps although they have seen a slight increase year round. A Recreation Inclusion Coordinator is in place to assist with accommodations or adaptations to reinforce successful experiences in general recreation programs. Bellevue has a financial agreement with Mercer Island to provide specialized services to their residents. Highland Center staff report that children living with autism attending summer camps have higher needs than in previous years. As a result of more children with severe autism and the need for more care, a higher child to staff ratio is needed. Other specialized recreation programs in Bellevue are offered by Special Olympics of Washington, Special Care and Outdoorsforall.³⁰

Transportation Gaps

- The demand for transportation for special needs populations, defined as older adults, people with disabilities, youth and people with low-incomes, is growing steadily. The King County Mobility Coalition (KCMC) is a group addressing this need. After new legislation was passed in 2005 by the Federal Transit Administration, called Safe Accountable, Flexible, Efficient, Transportation Equity Act: A Legacy for Users, (SAFETEA-LU), this group was formalized as the King County Coordinated Special Needs Transportation Steering Committee. KCMC works with the Puget Sound Regional Council to update the Regional Coordinated Human Services Plan. In 2014 KCMC drafted a Special Needs Transportation Assessment that outlined resources and gaps in the system of transportation for disadvantaged populations in King County. In 2015, it developed its 2015-2020 Action Plan which has a number of initiatives focusing on key areas of need including access to healthcare, access to work and school, and suburban and rural access.³¹
- King County Metro's Access program fills some of the need for door-to-door service for eligible people with disabilities, but continues to have gaps for many customers. In 2011, the King County Accessible Services Advisory Committee and the King County Transit Advisory Committee were merged and became the Transit Advisory Commission. This body advises Metro and King County on issues related to transit service in the county, including matters of concern to the elderly and persons with disabilities. Some of the topics addressed include safety, better transit access for specific populations such as people who are blind, and customer service issues.³² In 2016, the Access program was funded to evaluate its services. Some changes, such as scheduling drop off times no more than 30 minutes from appontment time have already been implemented.

Prevalence Children

The Center for Disease Control and Prevention reports that in the United States, 13% of children 3-17 years old have a developmental or behavioral disability such as autism, intellectual disability, and Attention-Deficit/Hyperactivity Disorder. In addition, many children have delays in language or other areas, which also impact school readiness. However, few of these children are identified as having a problem before starting school, by which time significant delays may have already occurred and opportunities for treatment have been missed.³³

Service Trends Need for More Funding for Early Intervention Services

All children age birth to three who have • disabilities are guaranteed early intervention services under a federal regulation called the Individuals with Disabilities Education Act (IDEA) Part C. King County Developmental Disabilities Division is the Local Lead Agency that contracts to provide these services to children and families. As of July 2014, 3,419 children age birth to three were served in King County Early Intervention (EI) Services. As Figure 6 shows, this number has grown significantly since 2010. The percent of the birth-to-three population served as of a day in time count has remained fairly flat from 1.9% in 2010 to 2.1% in 2013; the current state target for services level is 2.5% of the

birth-to-three population of King County. This means that King County would need to serve 269 additional children for the day in time calculation to reach the state target of 2.5% of births in 2013. Though there are challenges in making comparisons about who are underserved by race or ethnicity, several ethnic groups were more underserved than others: children who were identified as Black/African American, Asian, and Native Hawaiian/Pacific Islander. Within the growing number of children served, there is also an increasing diversity of languages spoken; Spanish is the more frequently spoken home language other than English, followed by Chinese, Vietnamese, Somali, Russian, Arabic and Hindi.³⁴

In 2016, 287 children aged birth to three living in the Bellevue School District were receiving services compared to 214 in 2014.

In 2016, of the 2,101 children who exited El services countywide, 780 (37%) no longer qualified for special intervention services. High quality early intervention services can change a child's developmental trajectory and improve outcomes for children, families, and communities.³⁵ Since 2008 DSHS/DDD funding for this entitlement service has been capped so even though there has been a substantial increase in the number of children served, there has been no increase in state funding.

Year	Total Number of Children	Increase in Number of Children	% Increase Over Previous Year
July 2009-June 2010	2,543		
July 2010-June 2011	2,956	413	16%
July 2011-June 2012	3,134	178	6%
July 2012-June 2013	3,277	143	5%
July 2013-June 2014	3,419	142	4%

Figure 6 | Source: King County Department of Community and Human Services, Plan for Early Intervention Services, 2014-2017

• Kindering Center, one of two Eastside providers of early intervention services, reports that their monthly enrollment of infants and toddlers with disabilities or delays continues to increase for a very intense, customized set of services.³⁶

More Support and Information for Caregivers

• According to the King County Early Intervention Service Plan, the early intervention system and referral process is confusing for many individuals, and many families of infants and toddlers with developmental disabilities are not

> "There are pockets of people living in Bellevue who are disabled or caring for their disabled relatives and the caregivers need support."

> > Bellevue Neighborhood
> > Outreach Program Staff

accessing quality information to help with their decision-making. Families also may not be interacting with community and health care providers who know about early intervention services or how to make referrals. To address this need, KCDDD Early Intervention Services Plan outlines a number of strategies, including providing more training and partnerships with providers, physicians, clinics, childcare staff; strengthening partnerships with systems that provide universal screening; and improving public awareness and reducing negative connotations of disabilities.³⁷

• As more people with disabilities choose to live at home, respite care for their caregivers is a growing need. A study conducted in 2015 found that an estimated

43.5 million adults in the U.S. report that they have provided unpaid care to an adult or a child in the past twelve months: of those about 3.7 million cared for

a child, roughly 1.6%.³⁸ Many families are not eligible for public funds to pay for respite care, and cannot afford to pay privately for it. Due to State cuts, fewer hours of respite care are being funded.

Community Perceptions

- In the 2017 phone/online survey, 24% of respondents indicated that *lack of services for people with disabilities* was a major or moderate problem in the community. In 2017, 14% of respondents stated that *not finding programs for someone with a disability* was a major/moderate household problem and 14% stated that *not being able to find affordable care for a person with a disability* was a major/moderate problem, up from 9% and 8% in 2015, respectively.
- Families at the Special Needs Resource Fair held at Highland Community Center saw gaps in training for childcare staff and babysitters on how to work with special needs children, and the availability of sports and special needs afterschool and summer programs.
- Providers on a recent panel who work with adults with disabilities identified lack of affordable housing, employment and transportation as major issues for their clients. Parents of the adults with disabilities say there is an increased need for supported housing options when they can no longer be the primary caregivers.
- In the NextDoor Survey 28% of respondents stated the lack of services for people with disabilities was a major or moderate problem.

Implications for Action

- Funding for services to people with all types of disabilities continues to lag behind the growth of this population in the State, in King County, and in Bellevue. The result is that there are wait lists for certain services such as housing and family support. And for those programs in which waiting lists are not allowed, agencies are strapped to find additional resources to fill the funding gap. This trend is predicted to continue over the next several years due in part to the higher life expectancy of the aging population with developmental disabilities, the increase of referrals of children with disabilities, and the continued development of medical procedures that now save the lives of those who in the past may not have survived trauma or complications at birth.
- Lack of affordable housing is as much of a problem for people with disabilities as it is for the rest of the population, if not greater. The need is growing faster than housing stock is produced. It is especially critical for people with disabilities to find housing in familiar neighborhood settings, near support systems and convenient amenities in order to maintain their independence to whatever extent they are able. Another growing need is for more paid and volunteer positions for people with Intellectual and Developmental Disabilities.
- Early intervention services for children birth to three with disabilities are underfunded. Early intervention saves costs later; for some children whose special needs are identified when they are older, critical time is lost. All sectors of the community-medical, business, education, public and non-profit could increase their efforts to promote early screening and make it easier for parents and caregivers to find help.

- There continues to be a lack of programs for families with children with special needs that do not speak English as their first language. Especially when dealing with issues of disabilities, which can be viewed differently by various cultures, it is critical that more multilingual, multicultural providers are available to work with families.
- Childcare for children with special needs continues to be in very short supply in the community, as are programs appropriate for children age 12 and older. Community-based organizations already providing such services to typically developing children could, with training and support, help to fill this gap.
- Inclusion of people with all disabilities in all communities needs to be a priority. People with disabilities who experience inclusion early in their lives are more likely to live in and actively contribute to their community as adults.
- People with disabilities have challenges in finding employment. Community support of jobs for people with disabilities is much needed.

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Refugees and Immigrants



REFUGEES AND IMMIGRANTS

The City of Bellevue's population continues to grow and diversify. In 1990, the U.S. Census reported 86.5% of Bellevue residents identified as a single race, White.¹ In 2015 this percentage declined to 49.996%, making Bellevue a majority non-White population city for the first time in its history.² Specifically, Bellevue's Asian and Hispanic/Latino populations have been the fastest growing populations. The latest American Community Survey (ACS) indicates that Asians account for 31% and Hispanic/Latinos account for 6% of the population.³ Many of the minority residents in Bellevue, are from diverse groups that consist of immigrants and refugees.

What's Working?

- The Muslim Community Resource Center (MCRC) is a non-profit service organization led by a group of community volunteers founded in 2011. MCRC provides support throughout King County, but has a significant presence in East King County. MCRC provides a common platform for Muslim community services engagement and partners with like-minded faith based organizations (Muslim and non-Muslim), city and local services, and providers to service community needs. The focus is to connect those in need to relevant resources and service providers in community.⁴
- The India Association of Western Washington (IAWW) is a non-profit, secular, volunteer run organization founded in 1983 whose mission is, "To provide a common identity to the Indian community and facilitate cultural, social and educational services and opportunities for cultural integration from young to old of the community; as well as to foster those activities that enhance mutual understanding and appreciation between the Indo-American community."⁵

- Bellevue's Neighborhood Outreach Program sponsors a bi-monthly group for women at Crossroads Community Center called Cultural Conversations. This networking and discussion group began in response to requests from women from diverse cultural backgrounds who wanted to be more connected in their community. Some of the discussion topics at the Cultural Conversations during the 2016/2017 season included Multi-Racial Identity, Culture and Perception; Becoming and Belonging; Welcoming America; and Can We Really Go Back Home Again.
- The Bellevue Diversity Advisory Network (BDAN) is made up of a diverse group of twenty-one members who provide counsel to the city on how to better reach, serve, communicate and collaborate with Bellevue's diverse community. Formed in October 2016, BDAN acts in an advisory capacity to the City of Bellevue and meets monthly, with members appointed by the City Manager. BDAN has the following duties:
 - Collect community feedback to help assess city services from a cultural competency lens
 - Engage in cross cultural dialogue focused on diversity issues
 - Provide feedback and insight on issues relevant to communities in Bellevue
 - Support mobilization and coordination to diversity-related national and local events warranting a city response

Prevalence

Specific Race and Ethnicity Characteristics in Bellevue

The City of Bellevue Department of Planning and Community Development provided the following analysis from the 2010 Census and 2011-2015 ACS, the most recent data available:

 Since 1990, the proportion of Non-White people in Bellevue has more than quadrupled from about 15 % of the population in 1990 to 28% in 2000, and finally, 49.99% in

2015. Bellevue's Asians and Hispanics are the fastest growing racial and ethnic groups in the city. The population for both these groups tripled between 1990 and 2015.

- Bellevue's Asian population is a substantial portion of the overall City population (34%), the highest percentage of any city in the State. While Chinese residents make up the largest portion of Bellevue's Asian population (44%), Asian Indians have had the fastest rate of growth since 1990, increasing in population by over 2,400% (36.8% of Asian population).
- In 2015, Hispanics or Latinos comprised 8.7% of Bellevue's population, up from 5% in 2000. Crossroads and West Lake Hills had the highest proportion of Hispanics with almost 15% each. The largest group of Hispanic/Latino residents is from Mexico (67%).
- The Black or African American population in Bellevue has remained level at 2% since 1990. According to the 2015 ACS, Black or African Americans still make up only 2.2% of the Bellevue population.

According to the 2011-2015 ACS, about 42% of Bellevue residents spoke a language other than English

at home. This is a higher percentage than King County (26%), Seattle (22%), and Washington State (19%). About 21% of Bellevue's non-English speakers speak an Asian or Pacific Island language, 12.3% speak an Indo-European language, and 5.6% Spanish). Other languages include Korean, Hindi and Russian.

• According to the 2015 ACS, 39% of Bellevue's population was foreignborn, up from 13% in 1990. This is

higher than Seattle (17.5%), King County (21.7%), Washington state (13.7%), and the United States as a whole (13.5). Tukwila and SeaTac were the only cities in King County with higher percentages.

In 2009-2013, about 16% of Bellevue's households had no one over the age of 14 who spoke English "very well". This is an increase from about 6% in 2000. These households are considered linguistically isolated. Crossroads and West Lake Hills have the highest percentages of linguistically isolated households.

Definition of Refugee

Refugees are people who, based on a wellfounded fear of being persecuted for reasons of race, religion, nationality, political opinion, or membership in a particular social group, leave their native country and apply to another country for residency. A refugee is granted legal status and protection before entry into the U.S. In some cases, the President can allow some countries to process refugees in their country of origin. In 2014, nationals of Cuba, the republics of the former Soviet Union and Iraq were processed in this manner.⁶

World and National Refugee Trends

- According to the United Nations High Commission on Refugees (UNHCR), at the end of 2016 there were some 56.5 million forcibly displaced people worldwide.⁷ This total includes 17.2 million refugees, 2.7 million asylum seekers, and 36.6 million people uprooted within their own countries. Turkey was the largest refugee-hosting country worldwide, with 2.87 million refugees. Turkey was followed by Lebanon (1.01 million), Pakistan (1.35 million), the Islamic Republic of Iran (979,435), Uganda (940,815), and Ethiopia (802,896) in 2016.⁸
- At the beginning of each fiscal year, the President works with Congress to establish the number of refugees who may be admitted in the coming year, with a quota from each of the regions of the world. Figure 1 indicates the shortfall between

Year	Ceiling	Number of Refugees Admitted
2002	70,000	27,029
2003	70,000	28,422
2004	70,000	52,868
2005	70,000	53,813
2006	70,000	41,150
2007	70,000	48,218
2008	80,000	60,108
2009	80,000	74,602
2010	80,000	73,293
2011	80,000	56,424
2012	76,000	58,238
2013	70,000	69,926
2014	70,000	69,987
2015	70,000	69,933
2016	85,000	84,994

Figure 1. U.S. Annual Refugee Resettlement Ceilings and Number of Refugees Admitted, 1980-Present. | Source: Migration Policy Institute how many refugees were authorized for admission compared to how many were actually admitted. As depicted in the Figure 1, numbers of refugees being legally admitted in the U.S. have fluctuated over the past fifteen years, reaching an all-time low of 27,029 in FY 2002, subsequent to the 9/11 attack. Between 2002 and 2007 refugee admissions ceilings were set at 70,000/year, yet much lower numbers were actually admitted. In federal fiscal year 2008, the refugee admissions ceiling was increased to 80,000, due to the expected resettlement of Iragi, Bhutanese, and Iranian refugees in the Near East/South Asia region. The ceiling was reduced to 76,000 for 2012, and was further reduced to 70,000 for the years 2013 through 2015. The ceiling was raised to 85,000 in 2016 to address the worsening refugee crisis, including additional Syrian refugees. In 2015, 4.2 million Syrians fled their country due to violence and persecution.9

The annual average number of refugee • arrivals declined from approximately 100,000 during the 1990s to 50,000 during the 2000 to 2006 period. This decline is partly due to changes in security procedures after 9/11 and admission requirements resulting from the USA Patriot Act of 2001 and the Real ID Act of 2005. Following this decline, the total number of refugees admitted to the United States increased by 25% from 48,218 in 2007 to 60,104 in 2008, and 74,602 in 2009. In 2010, there was a decrease of 1.8% from 2009. to 73,293. In 2012 there was a further decrease of 20% to 58,238. In 2012, the leading countries of nationality for refugee admissions were Bhutan (26%), Burma (24%), and Irag (21%). Approximately 71% of refugees were from these 3 countries. Other leading countries include Somalia (8%), Cuba (3%), Iran (3%), Democratic Republic of Congo (3%), and Eritrea (2%). The last three years for which data is available have had a steady number

of refugee admissions (2013 had 69,926 admissions, 2014 had 69,287 admissions, and 2015 had 69,933 refugees admitted. Over one-third of all refugee arrivals in 2015 (35.1%) came from the Near East/South Asia (a region that includes Iraq, Iran, Bhutan, and Afghanistan); another third (32.1%) came from Africa, and one-quarter (26.4%) came from East Asia (a region that includes China, Vietnam, and Indonesia).¹⁰

Definition of Immigrant and Asylee

• Immigrants are people who have petitioned to enter the United States to become lawful permanent residents from countries that have not been designated by the U.S. as having refugee eligibility. Immigrants have chosen for a variety of reasons to leave their homes to go to another country. By comparison, refugees are those who are forced to leave the country of their nationality due to persecution or a well-founded fear of persecution for reasons of race, religion, nationality, membership of

Number Screened (top 6 countries)

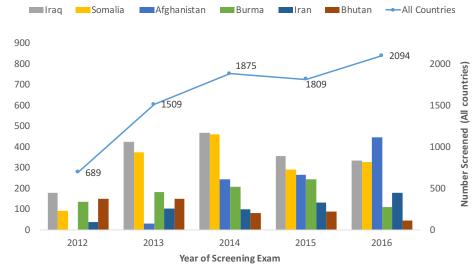
Service, under the Department of Homeland Security, implements immigration policy passed by Congress, including establishing quotas by country for the number of new immigrants allowed to settle in the U.S. annually as well as rules regarding their treatment and benefits. Unlike refugees, immigrants are not entitled to medical and cash benefits for up to eight months after their arrival in the United States.¹² In 2015 there were 1,051,031 immigrants that obtained legal permanent resident status in the U.S., a 6.1% increase compared to 2013.¹³

The Personal Responsibility Work
 Opportunities Reconciliation Act (PRWORA)
 passed by Congress in 1996 reformed the
 federal welfare system. It also drastically
 reduced or eliminated entitlements such
 as Social Security and food stamps for all
 immigrants who entered the country after
 August 22, 1996. The ongoing cuts of benefits
 on both the state and federal level has
 continued to deeply impact human services
 agencies as they struggle to find other sources
 of funding to serve immigrants.¹⁴

a particular social group, or political opinion. Asylees are foreign nationals currently residing in the U.S. who have the same fear of persecution and death as refugees if they return to their country of origin. Different application processes and rules apply to those who are seeking asylum in the U.S.¹¹

 The Bureau of Citizenship and Immigrant Services (BCIS), formerly the U.S. Immigration and Naturalization

King County Immigration Trends: Refugee Helth Screening reports 1993-2012



*includes individuals eligible for refugee benefits (e.g., asylees, parolees, special immigrant visa holders)

Figure 2. Source: Public Health – Seattle & King County (Note: This is the latest report, King County has changed its methods in how to extract immigration trends, however, the trends are consistent for 2013-2014 in which are discussed in the following). "Families and our children live in fear of deportation. Children have been harassed at school."

- Provider Survey

Washington State and King County Trends

- Exact figures on the total population of both immigrants and refugees are generally unavailable, since most sources do not account for the high levels of internal migration. The 2015 ACS estimates that 937,571 of Washington State residents are foreign-born, with 82.2% speaking a language other than English at home.¹⁵ Both refugee and immigrant numbers are probably higher as language barriers, cultural considerations, and other factors make both groups more difficult to quantify than U.S.born citizens. In 2015, Washington ranked eleventh in the U.S., resettling 2,625 refugee arrivals, representing about 3.75% of total new refugee arrivals to the U.S. in 2015.¹⁶
- During 2016, Voluntary Agencies (VOLAGS) in Washington State resettled 4,537 refugees. Of that, approximately 2,101 settled in King County. The leading refugee groups in King County in 2016 were Afghanistan (448), Iraq (332), Somalia (331), Ukraine (244), and Iran (180). The growing demand for services puts a strain on existing community resources to meet basic needs including housing, employment, and health care.¹⁷
- For those refugees arriving directly in King County, Public Health-Seattle & King County provides figures based on initial health screenings required of all refugees. As Figure 2 shows, data from 1995 through 2008 indicate a declining trend of arrivals,

particularly during 2002 and 2003, when totals were barely over 1,000, less than half compared to the mid-1990s. In 2003, the largest group of refugees continued to be from the former Soviet Union and Eastern Europe, with 795 arrivals.

- The next largest group came from Africa, primarily from Somalia. The last were arrivals from the Near East/South Asia, which includes Burma, Afghanistan, Iran and Iraq. In 2004, the total number of refugees screened increased to 1,264. The most dramatic individual increase in 2004 is the number of refugees from African countries, with 510 arrivals, just slightly less than the traditional leaders, those from the former Soviet Union and Eastern Europe who had 619. Between 2003 and 2004, the number of refugees from Africa resettling in King County increased by 210%.
- In 2005, there were 1,538 people screened, with the largest number from the former Soviet Union, and in 2006, 1,383. In 2007 and 2008, there was a slight decrease overall, with 1,159 and 1,194, respectively. In 2007, the largest groups were from the former Soviet Union, Somalia, and Burma. In 2008, 196 Bhutanese refugees were resettled here coming from camps in Nepal. The other large groups were from the former Soviet Union, and Burma. In 2009, 1,526 refugees were screened, in 2010, 1,894, the largest increase since 1998, in King County. The largest group was from Iraq (452) followed by people from Burma.
- In 2012 the numbers went up again to 2,608, with the largest group of refugees coming from Bhutan and Burma.¹⁸ Further, the trends continue to increase for 2015-2016 with refugees mostly coming from Afghanistan (444), Iraq (333), Somalia (327), and Ukraine (249). In 2015 there were 1822 refugee arrivals and in 2016 there were 2094 arrivals. King County. King County now typically resettles approximately 50% of all refugee arrivals to Washington State, and all those

settling in King County come to the Public Health Center in Seattle for basic health screening and immunization updates, within 90 days of their arrival in the USA.¹⁹

Refugee and Immigrant Groups in Bellevue

- In Bellevue, anecdotal information from providers' surveys and key informant interviews indicate that the largest groups of refugees encountered for human services are Asian. The largest group of immigrants in Bellevue using services tends to be Hispanic/ Latino, primarily from Mexico, followed by Chinese, Koreans and people from East Indian countries. Providers also note they are serving more people from East Asian countries.
- Jewish Family Service (JFS) reports that refugees arriving to King County in the next year will be primarily from Afghanistan and Ukraine. JFS plans to resettle 300 refugees in the next year, with most residing initially in South King County.²⁰

Service Trends

Need for English Language Learners (ELL) Classes for Children and Adults

- As of 2016, there were 95 first languages spoken by Bellevue School District (BSD) students. The top two languages are Spanish and Mandarin Chinese with over 1,200 speakers each, followed by Korean, Russian, Telugu, Cantonese and Japanese.²¹
- Many children of refugees and immigrants are not enrolled in the schools' English Language Learners programs because they are bilingual, so the number of children from families whose first language is not English is probably much higher than the ELL enrollment numbers indicate. 13.7% of Bellevue School District students speak

a language other than English (either the "home" language or "first language"). A student might be considered "bilingual" but still might be in ELL, depending on his/her level of English proficiency-as determined by ELL screening assessments.²²

- Hopelink's programs provide needed help and advocacy support to many low-income immigrants and refugees. About one-third (34%) of Hopelink clients report being an immigrant or refugee; and about one-fifth (22%) report limited English Language proficiency. To address language barriers, adult clients may be referred to Hopelink's English for Work (EFW) program. The EFW program teaches English language learners how to search for jobs and speak about their skills and experience. Students gain skills that are important for success at work including technology skills, communication skills, teamwork, stress management, and time management. Classes include one-on-one advising and online learning. In 2016, almost 200 clients were served. A total of 32 different languages spoken by EFW clients, with the most common being: Chinese (20%), Spanish (16%), Korean (9%), and then Mandarin, Farsi, and Russian (7%).²³
- Jewish Family Service continues to provide vocational ESL classes, employment and immigration services to the Eastside refugee and immigrant community. Our ESL classes continue to be in-demand. In this strong economy, clients are returning to JFS to get support to advance to higher paying positions. Also, JFS has seen an increase in asylum seekers moving to the Eastside and in need of services.²⁴
- Jubilee REACH, a family center in the Lake Hills neighborhood, offers free ESL classes and Talk Time with child care provided, alleviating one barrier frequently mentioned by parents. 333 students attended the ESL classes in 2016, a 66% increase compared to 2013. They also offer a number of

programs that are welcoming to people new to this culture, such as International Luncheons, and the Golden Age Social Club for Chinese elders.²⁵

Bellevue College offers the Basic and Transitional Studies (previously known as Developmental Education) Department to provide students with high-quality basic and pre-college Math and English literacy education for academic, personal, family, work and community engagement while cultivating leadership potential within collaborative student, staff, and faculty learning communities. The program includes ESL, Integrated Basic Education and Skills Training (I-BEST) and Preparing for Work. These focus on assisting immigrants and refugees with English as their second language. Within the developmental education, immigrants and refugees have the opportunity to help improve their English literacy skills, earn a GED (highschool equivalency) and seek support in their personal and professional goals.²⁶

Other Language-Related Needs

 Public Health Seattle-King County (PHSCK) clinics provided language interpretation for 29,521 visits in 2016. This is down from 39,019 visits in 2014. At the Eastgate Public

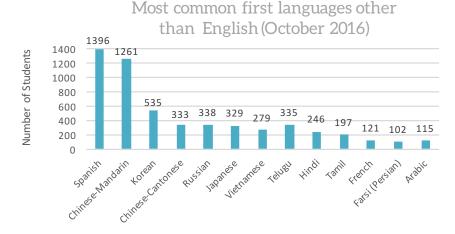


Figure 3. | Source: Bellevue School District, 2016.

Health Clinic, where many Bellevue residents go for services, 7,624 interpreted visits were provided in 2016. The largest percentage of interpreted visits were in Spanish (94%) as Figure 4 indicates.²⁷

2016 Interpreted Visits by Language at Eastgate Public Health

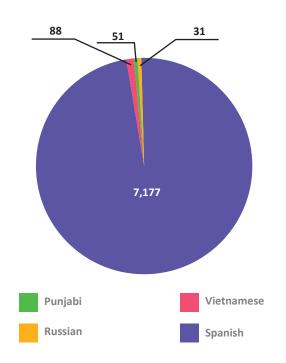


Figure 4. | Source: Public Health-Seattle & King County, 2016.

 In 2013, the Migration Policy Institute reported there were 25.1 million US residents, or 8% of the total US population ages 5 and older, who were Limited English

Proficient (LEP). LEP refers to anyone above the age of 5 who reported speaking English less than "very well," as classified by the U.S. Census Bureau. Between 1990 and 2013, the LEP population grew 80% from nearly 14 million to 25.1 million. About 1/2 of the nation's 41.3 million immigrants ages 5 and older are LEP. In King County, about ten percent of the population five years and over, or 201,300 residents, spoke English less

than "very well" during 2011-2015. For King County's foreign born population five and over, this percentage was much higher at about 42 percent or 180,000 residents. Spanish and Chinese were the leading languages spoken at home by people who speak English less than "very well" in King County during that time period.²⁸ In 2015, about 42% of Bellevue's population spoke a language other than English at home, up from 38% in 2010. Chinese and Spanish are the top two languages spoken at home other than English followed by Korean, Hindi and Russian. Bellevue School District reported having 95 languages spoken by children enrolled during the 2016-2017 school year.

Need for Information about Resources

- The City of Bellevue makes an effort to ensure access to city services and facilities to residents learning English. Web pages focused on recreational opportunities, construction permits and economic development, jobs and community resources have been manually translated into Spanish, Chinese, Vietnamese, Russian and Korean. The city also has a telephone line with interpreters who speak more than 150 languages and dialects who can translate for customers speaking with city staff. The Bellevue Fire Department has created multiple outreach videos and public service announcements in Spanish, Russian and English, which appear on Bellevue Television and are presented at selected public events. In addition, educational posters that illustrate how to prepare for several hazards and emergencies are available on the city's Emergency Management website in 15 languages. Annual water reports are also available in Spanish, Korean and Vietnamese. Lastly, Bellevue has multiple police officers and firefighters who are multilingual.²⁹
- In 2014, the City of Bellevue and its Council adopted the Diversity Advantage Initiative.

The initiative was developed to research and apply best practices for organizations and engage the community to learn from them on how to unlock the positive power of diversity in Bellevue. Further, the diversity initiative embraces the notion of, "Bellevue welcomes the world. Our diversity is our strength." The purpose of the initiative is for the City of Bellevue to enact and uphold equitable policies and practices, train and hire culturally competent staff and provide programs that are responsive and accessible to all. Some of the recommendations that have been implemented include helping the community learn about resources, sponsoring forums on personal safety and immigration rights, and developing a training for residents from other cultures on the value of volunteering and how to access volunteer opportunities.

The Eastside Cultural Navigator Program • uses bilingual/bicultural staff stationed at several key sites around East King County, including Mini-City Hall and the Together Center in Redmond, to be liaisons and advocates. They help refugee and immigrant populations better navigate complex systems, such as healthcare and publicly funded social services, to better utilize existing resources. Chinese Information and Service Center is the lead agency for this program which began in December 2006, with staff available who speak Spanish, Mandarin and Cantonese, and Russian. They serve many low-income residents of the city who have difficulty accessing other services because of language and cultural barriers. Some of the ways Navigators assist include helping a new resident register their child for school, sign up for energy assistance, or find housing resources. However, increasingly, the Navigators are helping immigrants with questions and resources related to legal services: they have found that there is much misinformation about immigration laws and the American system of law enforcement

in the community. This is creating fear and stress for many families and can prevent them from seeking services that they need.³⁰

In 2016, the Crisis Clinic Community Information Line saw a decrease in foreign language calls from East King County. Of 6,623 calls from East King County, 279 foreign language calls were received compared to 534 in 2014. Of the 279 calls, 197 were received from people needing assistance in a language other than English; 77 were handled by a Spanish Language Specialist, 1 from 711 Relay, 1 from TTY and 3 from Video Relay.³¹

Employment

• Even as the economy continues to grow gradually, refugee and immigrant communities continue to be one of the hardest hit, according to feedback obtained from a number of Community Conversations and key informant interviews. People who

> "Outreach is a hard thing to do to get immigrants engaged. The interest is there but they don't know about opportunities and transportation is a barrier."

> > - Key Informant Interview

do not speak English as their first language are still competing with the native born unemployed workforce even though jobs are more available.

 The goal of the Washington State Office of Refugee and Immigrant Assistance (ORIA) which began in 1975 to help refugees successfully resettle here, is to promote economic self-sufficiency as quickly as possible. It provides funds to non-profit agencies and community colleges for English Language Learner instruction, employment services and job placement. Jewish Family Service is one agency that provides these services in East King County as does Bellevue College.³²

"There are employment challenges for people with accents."

- Community Conversation

- The Preparing for Work program at Bellevue College (BC) helps meet the refugee/ immigrant community's need for job and English skills training. Three classes are offered: Preparing for Work, On the Job Communication and Working in English. BC served 1,450 immigrant and refugee students in FY 2015-2016 and 1,319 in FY 2016-2017. English language learners focus on skills to choose a career pathway, find and keep a job.
- In 2016 ReWA helped 543 refugee and immigrant families with training and job placement assistance to find employment with livable wages and benefits.³³

Culturally Specific Nutrition

Refugee Women's Alliance provides outreach to English Language Learners who may be eligible for the Basic Food Plan, formerly known as food stamps. Staff provides information in Russian/Ukrainian, Somali and Spanish to people who did not know they could receive this State benefit.³⁴ The Emergency Feeding Program offers several culturally-sensitive food bags designed specifically for Latino, Asian and East African families. They report they are seeing more undocumented immigrants who express fears about their immigration status.³⁵ In 2015, 417,696 meals were provided and 15.665 clients served. 57% of which were non-Caucasian.36

- In 2016, 45% of the 3,822 Bellevue residents • served in Hopelink's Food Programs were immigrants or refugees representing 100 countries and 59 different languages. In addition, about one-third (1170 individuals; 31%) of the Bellevue residents served reported Limited English Proficiency (LEP). Hopelink continues to have Spanish (37%) and Russian (32%) as the main languages spoken among LEP clients in Bellevue. Chinese (7%), Farsi (5%) and Vietnamese (4%) are the next most common languages spoken among individuals that report limited English proficiency. This percentage of immigrants and refugees, and limited English proficiency has not significantly changed in the last five years and Hopelink continues to support culturally appropriate services. Bellevue continues to have a greater percentage of Immigrant/Refugee and LEP clients than the overall Hopelink food program (45% v 35% I/R; 31% v 23% LEP).37
- The Muslim Community Resource Center • (MCRC) provides services to Muslims and non-Muslims throughout King County. The focus of MCRC is to connect those in need with relevant resources and service providers in the community. MCRC also provides direct services through volunteers, such as hot meals, and partners with other organizations to direct people in need to appropriate services. In 2016, MCRC began a partnership with the Together Center in Redmond which services all East King County. MCRC has office hours one day a week in the Advocate Office at the Center to provide resources and support.³⁸

Culturally Specific Child Care and Family Friend and Neighbor Care

• Child Care Resources (CCR) reported that as of July, 2017, of the 503 childcare providers in East King County, there was a large number that provided bilingual care, with

some offering more than one language other than English spoken. In all, there were 500 (duplicated) that reported as such. Among child care providers listing one language in addition to or other than English, the largest groups were: Spanish, Chinese, Hindi, Russian, French, American Sign Language, Farsi/Persian, Japanese, Arabic and Other (a combination of East African Languages, Fijian, Romanian, Hebrew). CCR also has a Child Care Careers Program which helps refugee and immigrant women develop skills to work in the field of early childhood development. Even with this increase in multi-language offerings, there is still a gap for such services for parents who want their children to be cared for by people from their own cultures.³⁹

 Many families from diverse cultures prefer to have their children cared for by families, friends, or neighbors rather than in centers. Child Care Resources also supports a network of Kaleidoscope Play and Learn groups, drop-in play groups specifically designed to provide culturally appropriate support to FFN caregivers and parents. More than 50 groups meet weekly throughout King County, holding sessions in multiple languages led

"I am very grateful for the help and support for the immigrant grants and new courses. Thank you so much for your concern for others."

- Consumer Survey

by trained facilitators; participants receive information about child development and community resources. In 2016 Kaleidoscope Play and Learn groups reached over 4,000 King County children and their informal caregivers; and over 60% spoke a language other than English at home. Kaleidoscope Play and Learn also gives young children cared for by family, friends, and neighbors a chance to develop socialization and early literacy skills which will increase their readiness for school. Two Kaleidoscope Play and Learn groups are currently meeting in Bellevue, one conducted in Chinese and English at the Newport Way Library and one conducted in Spanish and English at the Lake Hills Library.⁴⁰

 An Early Childhood longitudinal study revealed that disparities based on factors such as race and income do have a measurable effect on child outcomes as early as nine months of age. Infants and toddlers from racial/ethnic minority groups, whose home language was not English, and/or who had mothers with low maternal education scored lower on cognitive and positive behavior ratings. One of the implications suggested from this study was to start supporting and encouraging families early, and to increase the quality of early care in both home based and center based settings.⁴¹

Issues for School-Aged Children and Youth from Diverse Communities

In Community Conversations and interviews with leaders in diverse communities in Bellevue, it was frequently mentioned that young adults and teens from these communities are faced with identity problems, caught between two or more cultures. They may live in traditional homes, but do not always identify with their parents and cultural traditions.

For more information, see the School-Aged Children and Youth section in this report.

Legal Issues

The need for free or low-cost legal assistance for immigration and family law issues provided in languages other than English continues to grow. Eastside Legal Assistance Program (ELAP) reports an increased demand for services in languages other than English. ELAP has two specialized clinics for this population—the immigration clinic that deals with immigration law issues, and the multilingual clinic that provides assistance on any civil legal issue through the use of Ethnic Bridge. Language line staff and volunteer attorneys are able to access interpreters in a broad range of languages, thereby expanding the ability to serve more clients.

ELAP also provides Spanish intake screening interpreters. Staff report that between November 2016 and May 2017 they met with over 1,000 East King County residents on immigration

ISSUES, including forums and clinics. There are increasing reports of intimidation, harassment and mistreatment. The main barriers that their clients report are fear due to their immigration status, lack of transportation, and not being eligible for services.⁴² The Washington Supreme Court's Task Force on Civil Equal Justice Funding in a June 2015 Washington State Civil Legal Needs Study (CLNS) notes that of their respondents, 29.3% of immigration-related problems experienced issues related to their immigration status itself, 20.7% involved denial of housing, employment, credit, health or other services due to their immigration status, 13.0% involved immigration-related on-thejob harassment.⁴³

Human Trafficking

- Human Trafficking, which includes labor and sex trafficking, is a modern-day form of slavery. Approximately 600,000 to 800,000 victims annually are trafficked across international borders and include women, men and children. Some victims are native born U.S. citizens. Victims are coerced to prostitute or to work without pay and often subjected to physical and psychological dangers, such as severe beatings, rape, drug addiction and other forms of violence.⁴⁴
- In Washington State, which is one of the top human trafficking destinations in the

U.S. due to the easily accessed public ports and proximity to Asia, the Washington Anti-Trafficking Response Network (WARN) provides a 24-hour urgent response hotline, and access to safe housing and immigration advocacy and legal assistance.⁴⁵

For more information, see Goal #3: A Safe Haven from All Forms of Violence and Abuse

Health and Mental Health Services

• Disparities exist and continue to broaden the divide between many minorities and Whites in King County. According to Communities Count, Social and Health

> "Immigration concerns are on the rise and legal advice is not affordable to the college students."

> > - Community Conversation

Indicators across King County, in East King County there was a significant increase in the average frequent mental distress score in 2013, as measured by asking people four questions on a survey about how often they have experienced certain symptoms of stress. The frequent mental distress score for King County was 11% compared to Washington State's 12%. The last report from King County indicates that the stress score for native born residents was 8.5 on a scale of 5 (low) to 20 (high), while foreign born residents reported average stress levels of 9.2. The survey countywide showed that some of the groups who experienced higher stress levels overall include: people of color, people whose primary language is not English, people with incomes less than \$50,000, people with less than a college degree, and people age 18-24.46

- The diversity of HealthPoint's patient population continues to increase. In 2016, HealthPoint provided care in more than 55 languages and was the healthcare home for 58% of King County's newly resettled refugee families. Sixteen percent of HealthPoint patients remain uninsured. HealthPoint continues to collaborate with Hopelink, Bastyr University, Northwest University, UW Bothell, and Bellevue College's Nursing Program by providing shadowing opportunities for students interested in primary medical, dental, or mental health care in a community health center setting.⁴⁷
- Mental health services are becoming less accessible to many consumers, but especially those in minority communities at a time when more people are reporting more stress and anxiety. One of the pressing needs for Asian Counseling and Referral Services (ACRS) is the demand for higher intensity and mental health services due to more high risk youth needing mental health care and more undocumented Latino youth. ACRS provides bilingual and bicultural mental health services.⁴⁸
- International Community Health Services (ICHS) is a Federally Qualified Health Center (FQHC) that provides health services, including dental and behavioral health, to underserved populations in King County. Their services are open to all races and ethnicities, but they particularly serve the Asian. Native Hawaiian and the Pacific Islander communities. ICHS opened a clinic in the Crossroads neighborhood in Bellevue in 2014. They have staff that speak Cantonese, Mandarin, Vietnamese, Korean, Somali, Russian and Spanish. One of their mission goals is to hire bilingual and bi-cultural staff to reflect the communities. they serve. They have reported since the expansion to Bellevue an increase Latino populations compared to their other clinics.⁴⁹
- Staff from Eastern European Counseling

Center report their clients have increased and present with cultural barriers, domestic violence, financial difficulties, immigration and legal problems.⁵⁰

"While there are people feeling unsafe and unwelcome there is a balancing swell of people wanting to help and wanting to welcome others."

— Key Informant Interview

 Participants in a number of community conversations and key informant interviews identified problems in access to healthcare for many immigrants, even those who qualify for Medicaid or other insurance through private companies. For example, some cannot afford the co-pays or deductibles for their insurance, or their plan does not cover what they need. Another issue that was mentioned is a concern that potential new health care changes will present barriers to those needing insurance, such as older adults from other countries who are here to visit for long periods with their families may no longer be eligible.

Parent Support

- CISC offers Cultural Navigator Services to families in five languages to help with accessing appropriate services and navigating systems. CISC also has parent education classes to help parents raise bicultural children. Classes emphasize communication across the generations to promote understanding within the family.
- Local agencies and organizations are addressing the need for families who want additional assistance and support when parenting in this culture. CISC provides Play and Learn Groups. Kindering Center provides support groups and parenting

classes for parents who speak Spanish. Kindering also has a home visiting program, the Parent Child/Home Program, that is funded by the United Way of King County. The program provides services to primarily Latino families. In addition, through collaborations with local providers, the Healthy Start program offers home visiting, parent education and support to young, first-time parents with children prenatal through age three; because over half of the young parents in this program are Latino, a number of staff speaks Spanish.

• The King County Library System (KCLS) in Bellevue provides a literacy and school readiness Fiestas program for Latino families and children up to age five. The program is conducted in Spanish and goes for 6 weeks.

Community Perceptions

- Members of the Bellevue Diversity Advisory Network (BDAN) identified the need for services such as legal aid regarding immigrant and tenant rights, services for older adults, many who come to live with their adult children and are isolated due to language, and having outreach workers hired from the community who know it well to provide information about resources.
- In a number of the community conversations, concerns were expressed about more need for legal services related to immigration rights for all immigrants, including those who are undocumented.
- In the 2017 phone/online survey, although racial and ethnic discrimination did not rise to the level of a top-tier community or household problem, both saw substantial and statistically significant increases compared to 2015. As a community level

problem, it increased from 17% to 24% and as a household level problem, it

24%0 and as a household level problem, it nearly doubled, from 4% to 7%. (Figure 5)

- Staff from Bellevue College brought up the need for more resources for practicing English for the students who are in their ESL classes and need additional support. There is a federal funding requirement that students in community colleges must make a certain amount of progress after three quarters, and sometimes they cannot make that progress without more practice.
- Eastside Pathways brought the Promotores project to Bellevue to address the need for authentically engaging the local Hispanic community. In a survey of 170 Latino residents conducted in 2017, respondents rated "community and culture" as the greatest need for their families to thrive; "information and communication" was the next highest rated.
- Over half of the providers who completed an online survey reported increased concerns by their participants about changes to immigration rules; some participants are fearful about applying for and accepting services that they need as they believe that doing so will put them at risk for deportation.

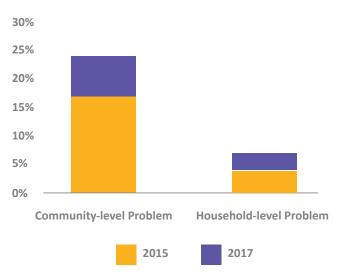


Figure 5: Percentage of Respondents to the Phone/Online Survey who reported racial/ethnic discrimination as a household and a community level problem | Source: City of Bellevue Human Services Needs Update Survey, 2015 and 2017

 In the consumer survey, which was predominately completed by refugee or immigrant residents of Bellevue, the top household problem was not being able to find work that supports themselves and their families (48%). The next highest rated problem was not being able to pay for dental bills (45%); third was not having enough money to pay for housing (28%).
 Almost 18% of those surveyed stated that experiencing racial or ethnic discrimination was a major or moderate problem.

Implications for Action

- The need for more culturally and linguistically responsive human services staff grows each year. Throughout the community, there is a need for information to be available in languages other than English, such as that provided through the Cultural Navigator program, and other culturally and linguistically specific non-profit organizations.
- There is a lack of culturally appropriate mental health counseling and medical care for recent immigrants or refugees. Use of mental health care can be unfamiliar and unacceptable in some cultures. Providing culturally responsive care which takes into account diverse backgrounds is essential.
- Requests for English-as-a-Second-Language and citizenship classes at all levels for adults are increasing significantly, a result of larger numbers of refugees and immigrants living in Bellevue as well as a greater demand for better language skills to secure better paying jobs as the cost of living rises. More opportunities for people to learn English, especially those that offer childcare and evening classes, are needed.
- Many parents for whom English is not their first language may need assistance helping their children in school. This can include having more bilingual staff, materials for parents translated in their native languages, and events to educate parents about the school system and culture in the U.S.

Opportunities to practice English in social situations would also help in developing language skills.

- More opportunities are needed for people to have cultural events and activities to increase awareness in the community about the richness of these cultures and engage new Americans in meaningful dialogue. There are more ways yet untapped to utilize the strengths and assets that the many immigrant and refugee groups have brought here with them, to enrich and strengthen the whole community. This is especially important for the spouses and parents of workers in the high technological industry that reside here from other countries to provide social support and decrease their isolation.
- In a time of potential implementation of significant changes to federal immigration laws it is critical that the community help immigrants and refugees feel welcome and safe, whether it is applying for services, seeking employment, or taking their children to school or to participate in activities.

Endnotes

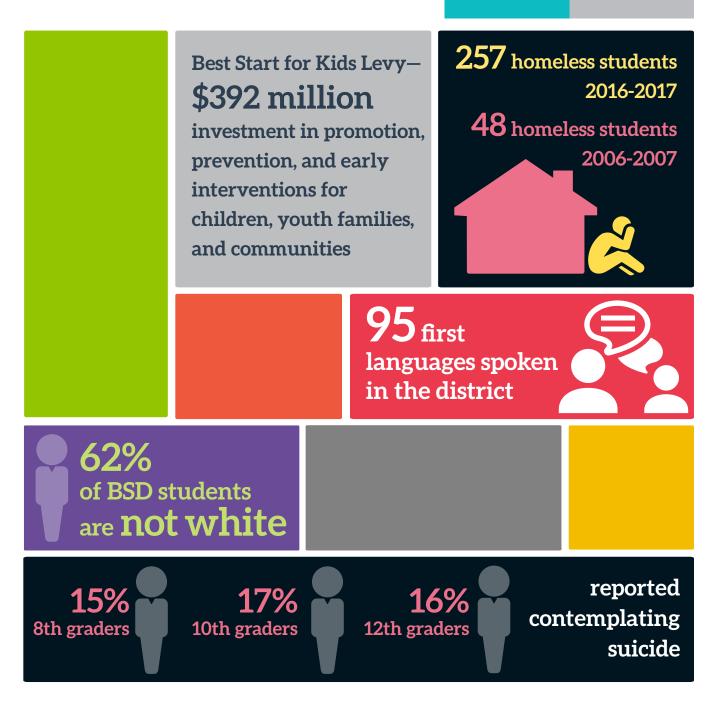
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School-Aged Children and Adults



SCHOOL-AGED CHILDREN AND YOUTH

In 2015, King County adopted the Youth Action Plan (YAP) to set countywide priorities for serving young people. The YAP is intended to guide and inform the County's annual investment of more than \$75 million in services and programs to ensure that all of King County's young people thrive.¹ In addition, in 2016 King County voters

approved the Best Start for Kids levy, a six-year, \$392 million investment in promotion, prevention and early intervention for children, youth,

families and communities.^{2,3} Bellevue values these priorities. Responding to the needs of and creating a strong foundation for healthy growth and development for all youth, especially those for whom there is limited access to resources they need to succeed, can improve the overall health of the community. This is critical as the economy continues to improve: research shows that children living in low-income families experience more negative life outcomes, such as poor health, impaired cognitive development, and lost economic potential.⁴

What's Working?

- Friends of Youth, along with Auburn Youth Resources and YouthCare run the Safe Place program supporting teens in crisis. Safe Place locations provide immediate help and safety for youth ages 11-17, connecting them with resources or emergency shelter.
- Eastside Pathways, a Bellevue based nonprofit, is a community-wide partnership committed to the idea that collective action is needed to provide every child with a chance for success in school and in life. Some of the core indicators that will be tracked include academic and work success, in alignment with

Bellevue School District's (BSD) Instructional Initiatives, as well as those that help children get a healthy start, such as immunizations and quality childcare programs.

- Bellevue Youth Court, a year-round program in partnership with King County Superior Court and the King County Prosecutors Office, was created by the Youth Link Board. In 2015-2017, Bellevue Youth Court worked with 141 youths involved in the King County Juvenile Justice System; 74 cases were heard in Bellevue Youth Court, and 416 youth and 142 adults were trained and volunteered in the program.⁵
- The Best Start for Kids (BSK) Levy provided funds for a Children, Youth and Family Homelessness Prevention Program in 2016. Flexible funds are given to families to prevent them from entering the homeless system, such as rent to prevent eviction and first and last month's rent to move into housing. One grant was awarded to Youth Eastside Services for families in East King County. Another BSK program funded in Bellevue is the School-Based Health Center at Highland Middle School through International Community Health Services beginning in fall 2017.⁶

Prevalence Demographics

Youth age 18 and younger composed about 20% of Bellevue's population in 2015. Bellevue had a smaller proportion of school-age youth than did the nation (23%), state (22%) and county (21%), but a larger proportion than Seattle (15%).⁷

Education

- As of May 2016, BSD's enrollment was 20,177.⁸ In addition, approximately 1,733 Bellevue households have students that attend school in the Issaquah School District in 2016-2017 which had a total enrollment of 20,040 students as of July.⁹
- Funding for Head Start and the State • Early Childhood Education and Assistance Program (ECEAP) in King County is insufficient to meet the need for quality early learning for children from families with incomes at or below 100% of the federal poverty level. In 2016 all 151 Head Start preschool slots in Bellevue were surprisingly eliminated, and the district cannot apply to replace those slots for 5 years. Funding was ultimately raised to replace slots for the 2016-2017 school year, but this was only a one-year solution.¹⁰ Bellevue SD has 149 ECEAP slots for the 2017-2018 school year. In addition, 39 preschoolers receive tuitionassistance through district, Bellevue Schools Foundation, City of Bellevue and state funds. 85 elementary school age children receive tuition-assistance to attend the district's before/after and summer ELP programs. Approximately 2000 spaces are available in the district's preschool and school age programs combined. Based upon the 2015-2016 Department of Early Learning ECEAP and Head Start Saturation study, there are an estimated 342 three and four year olds eligible for ECEAP, and the number of unserved, eligible students are 225. With the additional 59 ECEAP slots awarded to the district, this leaves 58 eligible and likely to attend students without access to comprehensive preschool services and programs.¹¹
- Research shows that school dropouts have a tougher time finding employment and earn significantly less than those students who finish high school and go on to at least some college. Other studies indicate that high

school dropouts are three and one-half times more likely than high school graduates to be arrested, and over eight times more likely to be in jail or in prison. Across the country, 68% of state prison inmates do not receive a high school diploma.¹²

In 2016, BSD's 5-year adjusted graduation rate was 94.9, slightly higher than Lake Washington (93.4) and substantially higher than Seattle (81.1) school districts. Graduation rates substantially differ based on race and ethnicity. In BSD, the 5-year adjusted graduation rate for White students was 95.2, compared with 88.9 for Black students and 90.6 for Hispanic/Latino students.¹³

Racial and Ethnic Diversity

- Only 42% of youth age 18 and younger in Bellevue identify as white, compared to 78% of people 65 and over.¹⁴
- BSD has become increasingly diverse over the past 20 years.

The percentage of Hispanic students (of any race) in BSD has steadily climbed over the years, growing from 5.3% in 1996-1997 to 12% in 2015-2016. Over that same period,

the percentage of White students has declined, shrinking from 71.4% in 1996 to just over 38% in 2015-

2016.¹⁵ See Figure 1. In addition, the Issaquah Schools Foundation, which matches mentors with elementary students, has seen a shift in several elementary schools to minority/majority schools.¹⁶

In addition to growing racial and ethnic diversity, there are now 95 first languages spoken in

the district. 35% percent of students speak a first language other than English. The top two languages are Spanish and Mandarin Chinese with over 1,200 speakers each, followed by Korean, Russian, Telugu, Cantonese, and Japanese.¹⁷

- In 2016-2017, 14% of BSD students are English Language Learners (ELLs).¹⁸
- Some students who are Bellevue residents attend schools in the Issaquah School District: specifically Sunset and Cougar Ridge Elementary Schools and Issaquah Middle School. There are 280 Bellevue students attending Issaquah schools who are English Language Learners; of the 23 languages spoken by Bellevue students, the top languages are Chinese, both Mandarin and Cantonese (125), Korean (51), Japanese (26), and Russian (15).¹⁹

BSD Enrollment by Ethnic Group, 2016

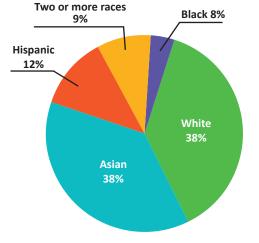


Figure 1. Source: Eastside Pathways (2016)

Children and Youth Living in Poverty

Bellevue's youth poverty rate (under age 18) in 2015 was 8.7%, compared with 13.7% countywide. For children age 5 or under, the poverty rate slightly decreases to 8.7% in Bellevue but increases to 14.6% across the county.²⁰ Certain areas within Bellevue have historically had much higher rates of children in poverty than others. For instance, Lake Hills, Crossroads, and Downtown have the highest percentages of children living

in poverty in the city with upwards of 30 percent in some census tracts.²¹ See Figure 2.

- As Figure 3 shows, students of color are disproportionately represented in the free and reduced price lunch program.
- BSD reports a large increase in students eligible to receive services funded by the federal McKinney-Vento Act because they are homeless. In 2006-2007 school year, 48 qualified; for the 2016-2017 school years, that number was 257.

In the Issaquah School District, in 2010-2011, 135 students were enrolled; in 2016-2017 that number was 128.²²

Health and Mental Health Issues

In 2011-2015, the rate of births per 1,000 women ages 15 through 19 living within BSD was estimated to be about 0.00 births per 1.000 women, which was much lower than the overall birth rate for women ages 15 through 19 living in King County of 13 births per 1,000 women.²³ One of the reasons this age group is tracked is because it is at the highest risk for poor birth outcomes, such as low birth weight and prematurity which puts the infant at risk for infant death, blindness and deafness. Children born to single teenage mothers are more likely to drop out of school, give birth out of wedlock, and become dependent on welfare, compared to children with older parents.²⁴

"Access to mental health services is needed. Kids are very stressed."

— Youth Link Board Member

Human Services | Bellevue, Washington

- Lack of exercise and being overweight are risk factors for serious illnesses such as heart disease. hypertension and diabetes, and contribute to premature death. Factors contributing to the increasing rates of overweight children include fewer opportunities for physical activities, media and marketing, and increased time in sedentary activities, such as watching television or using computers.²⁵ In 2016, 24% of 8th graders, 19% of 10th graders, and 20% of 12th graders across King County were overweight or obese.²⁶
- The Healthy Youth Survey • also provides information about substance use by youth. In 2016 in King County, 34% of 12th graders and 18% of 10th graders reported having drunk a glass, can or bottle of alcohol in the past 30 days. 37% of BSD 12th grade students and 16% of 10th grade students reported as such.²⁷ 25% of King County 12th graders and 14% of 10th graders reported smoking marijuana in the past 30 days. In BSD, 22% of 12th graders and 9% of 10th graders reported as such.²⁸
- Youth Eastside Services (YES) staff report an increase over the past five years in the number of young people coming into their offices with higher acuity than before: more substance abuse, anxiety, suicide ideation and depression.²⁹

% OF SCHOOL ENROLLMENT QUALIFYING FOR FREE/ **REDUCED LUNCH** Elementary Middle High Bennett, Cherry Crest, Clyde Hill, 0-10% Medina, Puesta International International del SOI, Somerset, Spiritridge, Jing Mei Eastgate, Enatai, Chinook, Big Bellevue, 11-20% Newport Heights, Picture, Tyee, Big Picture, Woodridge Tillicum Newport 21-30% Odle Interlake 31-40% Phantom Lake Sammamish Ardmore, Sherwood 41-50% Highland Forest, Stevenson 51-70% Lake HIIIs BSD (2016-2017)

Figure 2. Source: Eastside Pathways (2017)

BSD Free/Reduced Lunch Enrollment by Ethnicity

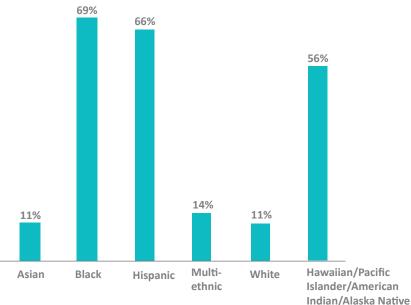


Figure 3. | Source: BSD, 2016-2017.

• The Healthy Youth Survey 2016 showed that 15% of 8th graders, 19% of 10th graders, and 18% of 12th graders in King County

had contemplated suicide in the last 12 months. In BSD, 15% of 8th graders, 17% of 10th graders and 16% of 12th graders reported as such.³⁰

Youth Arrests and Violence

- There were 17,264 juvenile arrests in Washington State, an arrest rate of 24.5 per 1,000 youth age 10- 17 in 2013. This is the lowest juvenile arrest rate reported since prior to 1982. This is a 64 percent decrease from the 2000 rate, and approximately a 1.4 percent decrease from 2012 to 2013. Females accounted for 30.7 percent of all 2013 juvenile arrests. Ten years ago, females accounted for 28.9 of total juvenile arrests. The arrest rates for boys and girls has remained relatively the same since 2009. The percentage of juvenile arrests by race shows an increase of 10.7 percent in the overall percentage of total arrests for minority youth from 2012 to 2013.³¹
- Washington State data collected on youth in the juvenile justice system reveals that minority youth are disproportionately represented as they progress through the juvenile justice system. For example, while in 2013 Washington State's population of minority youth 10-17 years old made up 33.6% of the total youth population, they composed 56.8% of youth held in Juvenile Rehabilitation Administration facilities.³²
- In Bellevue in 2016, 150 juveniles were arrested.³³
- In 2016, while 84% of King County eighth graders feel safe at school, 27% of students report being bullied at school, the highest of all grades.³⁴ In Puget Sound Educational Service District (of which Bellevue is a part), 91% of sixth graders and 87% of twelfth graders felt safe at school, both similar to 2014.³⁵
- In 2016, 5% of King County 12th graders report having been a member of a gang in the past 12 months. Only 3% of BSD 12th graders reported as such.³⁶ Gang activity in Bellevue has declined greatly. In 2008, there was 11 gang related cases. In 2014-2016 there was no gang related cases. The Bellevue officers that do community outreach based out of Crossroads Police Substation report that agencies that have youth after-school and summer programs such as YES, Boys and Girls Clubs Teen Centers, YWCA, Jubilee REACH and Salvation Army are one of the reasons that there is not more gang activity in a growing city like Bellevue. Programs that work with youth from low-income families who may be "latch-key" kids because their families work several jobs to make ends meet are especially critical to help provide experiences such as mentoring, sports, school homework support and positive role models. Such programs give youth, especially those in middle school where often early gang involvement begins, alternatives that can be life changing. In BSD, they have added 2 additional School Resource Officers (SRO) for a total of 8 officers for the district. In the 2 middle schools. 4 officers are stationed there and the other 4 officers are stationed at the 4 high schools to provide support to youth in a more positive setting, and also redirect youth who need help in a more positive direction. BPD has one gang detective assigned to the Special Operations Group that works with the SROs and neighborhood station officers to identify crime related to gang activity and give them priority.³⁷

Service Trends Support for Youth in the Community

- The VIBES (Volunteers in Bellevue's Education System) program works in all Bellevue schools to provide one-on-one mentoring and tutoring to students. They provide mentoring and tutoring in several areas, including after school learning, dual language programs, and elementary school robotics.³⁸
- The Wrap-Around Services Program, a collaborative partnership between the City of Bellevue, and BSD provides a number of activities for school-aged children and youth including before and after school programs and anti-bullying programs at two elementary and one middle school. In addition to youth focused goals, program staff help parents connect with resources, as well as build good relationships with the school and the community.³⁹
- Youth Eastside Services' (YES) SUCCESS Mentoring Program recruits mentors to encourage youth to develop the skills and qualities they need to be successful in life, help them build self-esteem and provide them with continual support and guidance.⁴⁰ Research shows that mentoring can decrease involvement in high-risk behavior. Many of the YES clients come from singleparent, female headed households, so a positive male role model who is a mentor is especially important.
- Bellevue Boys & Girls Club provides a *Project Learn* after school program. The program is designed to increase academic performance in reading, writing, and homework.⁴¹
- Teen Closet provides gently used and new clothing for homeless and low-income teens on the Eastside, to raise self-esteem and keep youth in school. Organized by a Youth Link action team, youth set up and pick up clothes from a primary sponsor, Plato's Closet. Distribution is in various

locations, but the primary one is the Ground Zero "The Club" site with the Boys and Girls Club of Bellevue.⁴²

- Jubilee REACH, a family support center in the Lake Hills neighborhood, offers an extensive array of services for children and their families. Some services that specifically address the needs of school-aged children and youth include KidREACH tutoring, a music and recording studio, art club and studio, one-on-one GED teaching, as well as summer camps and after-school activities.⁴³
- Eastside Pathways' partners, along with BSD, have united to close the gap in reading ability among all children in Bellevue. Their first area of focus is the critical time from birth through third grade, which research has shown is crucial to life success. They have a goal of 100% of children reading at grade level by 2016 and beyond (the rate is 76% currently). They address this gap with strategies in school readiness, school attendance, and summer and extended learning.⁴⁴
- BSD created a Department of Equity which operates with the belief that, "An equitable and excellent school district is one which all students achieve high levels of academic success, regardless of any student's race, ethnicity, culture, country of origin, religion, gender, special needs, sexual orientation, neighborhood, income of parents, or native language. In an equitable and excellent school district, there are no persistent patterns of differences in the academic achievement or treatment of students grouped by race, ethnicity, culture, special needs, country of origin, religion, gender, sexual orientation, neighborhood, income of parents or mother tongue. Equity and excellence occur when each and every student is served effectively to achieve high levels." The areas in which the department has goals include teaching and learning, student and family supports, and leadership and equity in the workplace.45

"High school students need to take care of younger siblings after school and on weekends. Daycare is needed especially on weekends or else teens stay home babysitting and can't work or do anything else."

- Family Connections Center Staff

Youth Eastside Services provides several programs for Latino youth and families. Safe Youth is a program to help Latino youth avoid violence, gangs and involvement with the criminal justice system through culturally sensitive mentoring and using violence prevention strategies. Latino H.E.A.T. is a student leadership, community service and cultural empowerment group. Mamas Unidas offers workshops, support, community information, resource sharing and involvement to empower Latino mothers to be leaders and mentors in the community.⁴⁶

Health and Mental Health Issues

YES has a variety of Early Intervention Programs for individuals, families or groups in all three departments – Youth and Family Counseling, Substance Abuse and Education & Prevention. They see clients with a wide range of problems including those who have experienced trauma and abuse, and also many people with such challenges as: family communication, parenting skills, peer and social problems, or needing skills to cope with anxiety, depression and anger. Common issues youth are presenting with include: anxiety, depression, suicidal ideation, self-injuring behavior, anger management problems, academic challenges, social problems and bullying, divorce, behavior problems, family conflict, parents with addiction issues, and exposure to domestic/ family violence.⁴⁷

- YES has seen an increase in youth with both substance abuse and mental health issuesco-occurring disorders. The issues related to substance abuse include an increase in client deaths due to overdose, lack of beds available when a youth is ready for treatment, no medication assisted treatment for youth funded by Medicaid, and lack of detox facilities for youth.⁴⁸
- Bullying has been defined as physical or • psychological aggression that is intended to harm or disturb, occurs repeatedly, and has a powerful person or group attacking a less powerful one. In 2002, Washington State passed an Anti-Bullying Law that requires schools have a policy in place, notify staff and students of the policy, and that the State Superintendent of Public Instruction must establish policies, training and resources.⁴⁹ The academic consequences of bullying are severe, as are the mental and physical well-being of targeted students and bystanders. School-wide anti-bullying projects, involving parents and nonteaching staff along with teachers and student leaders have been shown to reduce harassment by as much as fifty percent.⁵⁰ 25% of sixth graders in Washington State reported in the 2016 HYS that they'd been bullied in the past 30 days. By twelfth grade, this rate had dropped to 16%.⁵¹
- The Crisis Clinic's Teen Link provides a youth-answered help line open evenings to respond to calls from youth on a wide variety of topics. Teen Link is a teen peer-to-peer support line that offers support through anonymous and confidential telephone call and on-line chat. In the first two quarters of 2017, Teen Link handled 1,879 calls. Teen Link also offers suicide prevention training in junior, middle and high schools, and

youth serving organizations. In the first two quarters of 2017, Teen Link presented in 19 different schools and reached 4,683 teens.⁵²

In 2016 Eastside Pathways created a new collaborative, Mental Health and Well-Being, bringing together over 20 members to support prevention and intervention for all Eastside children and youth by connecting resources and services. One of its goals is to help create a more coordinated system in which children and youth experiencing mental health issues and their families can more easily get the help they need.⁵³

Refugee and Immigrant Youth

Disparities in student academic achievement, called the "achievement gap", mean that students of color and students in poverty have fewer opportunities to access academic programs and supports, and therefore have less success in school. For example, eighth grade math test scores in Washington clearly show that Asian and White students consistently do better than Black, American Indian, and Hispanic students. To address this issue, in 2008, the Washington State Achievement Gap Oversight and Accountability Committee was created, developing recommendations and providing training and community education. The 2017 recommendations included decreasing the disproportionate number of students of color in disciplinary actions, enhance school cultural competence, enhance English Language Learner programs, and invest in recruitment and retention of educators of color.⁵⁴ (Note: for more information about this issue, see Refugee and Immigrant section of this report.)

Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth

B-GLAD, sponsored by Youth Eastside Services (YES), is a drop-in support group open to kids ages 13 to 19 who may identify themselves as lesbian, gay, bisexual or transgender or who may be questioning their sexuality. Co-facilitated by trained professionals, B-GLAD is a safe environment for youth to meet their peers, share common concerns, ask questions, and receive information and support in a professional setting that encourages responsible decision-making.⁵⁵

Emergency Shelter, Transitional and Long-Term Permanent Housing Options for Homeless Youth

- In 2016-2017, BSD reported 257 homeless students.⁵⁶
- Friends of Youth (FOY) provides a shelter for young adults age 18-24 years old in Redmond seven days a week. FOY staff provides case management and work to engage participants in services such as housing, employment, education and mental health.

For more information about this topic, see Focus Area in this report.

• The Homeless Youth and Young Adult (YYA) Initiative is King County's community-wide response to prevent and end homelessness among young people. The Initiative is led by All Home, formerly called the King County Committee to End Homelessness, advised by agency and government leaders, supported by private philanthropy and the public sector, and grounded in the voices and input of homeless and formerly homeless young people.⁵⁷

- King County's identified strategies to address youth homelessness include (1) making homelessness rare and brief, (2) making homelessness one-time, (3) supporting YYA of color, (4) supporting LGBTQ YYA and (5) improving access to housing and matching housing with YYA needs.⁵⁸
- For the second consecutive year, 824 homeless or unstably housed young people ages 12 to 25 were identified during Count Us In—All Home's annual youth-specific point-in-time (PIT) count. This number includes 131 young people who were unsheltered at the time of the count on January 27, 2017 compared to 133 last year. The fact that the total number of homeless or unstably housed young people did not increase during the past year, a time of great challenges related to homelessness in our community, is notable.⁵⁹
- In January 2017 the U.S. Department of Housing and Urban Development (HUD) awarded the Seattle-King County Continuum of Care \$5.4 million for the Youth Homelessness Demonstration Program. These funds will support a wide range of housing programs to help prevent youth homelessness. An extensive planning process is underway to identify key programs though a joint decision making body from the Children's Administration, All Home, and a Youth Advisory Board.⁶⁰

Youth Violence

Asian Counseling and Referral Service

 (ACRS) provide a youth prevention and early
 intervention program, as well as a skills group
 for young women. The Teen Peer Advocate
 Program (TPAP) trains and recruits girls from
 Interlake and Sammamish High Schools
 to educate their peers and the broader
 community on teen dating violence, sexual
 assault prevention and community resources.

This program addresses the need for a culturally relevant program for Asian Pacific American young women but all races are welcome to join.⁶¹

- Human trafficking, which includes labor and sex trafficking, is a modern-day form of slavery. Approximately 600,000 to 800,000 victims annually are trafficked across international borders and include women. men and children. Children and youth under the age of eighteen can be part of forced sex trafficking which subjects them to physical and psychological abuse, such as severe beatings, rape, drug addiction and other forms of violence.⁶² In Washington State, one of the top human trafficking destinations in the U.S., the Washington Anti-Trafficking Response Network (WARN) provides a 24-hour urgent response hotline, access to safe housing and immigration advocacy and legal assistance.⁶³
- The Bellevue Police Department is represented on the FBI sponsored Children' Exploitation Task Force (CETF) with two full-time VICE Detectives and their Supervisor. CETF is tasked with locating and recovering juvenile victims of commercial sex exploitation. This task involves networking with Federal, State, and local law enforcement agencies in an effort to provide comprehensive intervention to the victims they locate and recover. The involvement of non-governmental organizations is vital to this process in providing tools and services that there is no funding for. These may include but is not limited to: hotel vouchers for short-term stays, clothing items such as sandals, sweatshirts and pants, undergarments and small duffle bags; travel sized-toiletries; gift cards for items such as gas, food and the telephones and/ or minutes to load their phones.⁶⁴

Community Perceptions

- Slightly more people (23%) in the 2017 phone/online survey ranked "lack of services for children and youth/teens" as a major/ moderate community problem compared to 20% in 2015.
- Members of the Bellevue Youth Link Board identified the need for increasing the awareness in the community of all substance abuse including use of marijuana and vaping not just heroin use because it has being called an epidemic.
- Grandparents raising their grandchildren who participate in a Kinship Support Group identified the need for more respite hours, more assistance with legal issues such as custody, and better access to mental health counseling, low cost after-school care and scholarships for day camp and parks activities.
- Participants on a panel on LGBTQ issues and trends identified the need for more groups and mentors for LGBTQ youth and young adults to help support them in dealing with bullying and other discrimination. There is also a need for more access to mental health services since risk for suicide is four times greater for LGBTQ youth than their straight peers.
- In the Next Door survey, 20% of respondents rated lack of services for children and youth a major or moderate problem in the community.

Implications for Action

• Access to supports for school-aged children and youth to ensure their health and wellbeing is critical so that they are prepared for success in whatever they do in life. Though the unemployment rate is down, many families still struggle to provide the basics for their children. Lack of resources can put children and youth at risk for poor outcomes, and eventually take an economic toll on the community. Efforts such as Eastside Pathways provide an important framework by which to "mobilize the community to support every child, step by step, from cradle to career".⁶⁵

- With the growing diversity in Bellevue, there is a need for more culturally responsive programs and activities for school-aged children and youth and their families who may be coping with adjusting to a new country and culture or to gender-based or physical differences. Involving the families is needed to ensure school success.
- Many children are showing signs of significant stress: problems in school, substance abuse, anxiety, suicide ideation and depression, as evidenced by comments from school staff, parents and mental health professionals. Evidence based and promising prevention oriented services, including those that promote health, and focus on traumainformed care including physical activities and mentoring, are needed to help avoid more serious problems later.
- There continues to be a gap in the "safety net" for homeless youth and young adults up to age 24. More housing with services and outreach to this population is needed to help them move on to successful lives. Some have "aged out" of the foster care system; others are employed or going to school, but lack family or community support.

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Veterans

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20 veterans commit suicide each day according to the VA estimates in 2014

The number of veterans in KC is steady declining (10.6%) overall since 2010

Over 60% of KC vets are 55 or older, serving in Vietnam Era or earlier

From 2017 Count Us In count 1,329 indentified as Veterans, from those 52% unsheltered 48% sheltered

Number of KC veterans below 200% FPL grew from 5786/2010 to 8200/2015 43% increase

VETERANS

Veterans are men and women who have served in one of the five branches of the military-Army, Navy, Marines, Coast Guard and Air Force, and also includes "citizen soldiers", those serving in the State National Guard or as part of the Services Reserve Components. Increasingly more attention has been paid to veterans due to the high visibility of recent wars in Afghanistan and Iraq although veterans from the Gulf War, Vietnam, and Korea also have a strong presence in the Puget Sound Region. As in past conflicts, many veterans who are returning to their homes and communities are bringing with them physical, emotional and psychological scars. Many of these issues extend beyond the capacity of the services that formally designated veterans' agencies, such as the federal Veterans Administration (VA), Washington State Department of Veterans Affairs (WDVA) or the King County Veterans Program (KCVP), are able to provide. Another key issue is employment, with more help needed for the many veterans who are leaving the military. Increasingly, these veterans' organizations are forging effective partnerships with community-based human services agencies to provide outreach and other needed resources.

What's Working?

 In 2005 voters in King County passed a Veterans and Human Services Levy which is collected through a property tax of .05% per \$1,000 of assessed valuation. These funds are split equally between services for veterans, military members and their

families and human services for vulnerable populations. In 2011, the Levy was renewed by 69% of voters for another six years, 2012-2017, which generated about \$18 million annually. In November 2017 the

Levy was again extended due to a popular vote, and added services for seniors as an additional focus, raising the rate to .10 per \$1,000 of assessed valuation. In 2016 1,146 people in Bellevue zip codes received services. The Vets Levy programs provide a variety of services addressing the needs of veterans and their families, including support services for housing through Eastside Interfaith Social Concerns Council, veteran employment and training at Bellevue College, Post- Traumatic Stress Disorder (PTSD) Counseling and the addition of Military Family Counseling in two Bellevue locations. The Levy also provided funding to the Low Income Housing Institute's August Wilson Place that opened May 26, 2015, providing 57 new units of housing in downtown Bellevue. In addition, the Levy provided funds to Imagine Housing Andrew's Glen, a housing complex in Bellevue contributing 40 units of housing-20 new units for vets transitioning out of homelessness, 10 for supportive housing and 10 for individuals and families needing reduced rent. The WDVA and the KCVP continue to partner to co-fund some programs with State and Levy monies, such as the expansion of counseling and consultation for PTSD, Traumatic Brain Injury (TBI), Military Family Counseling and Military Sexual Trauma (MST).¹

• Bellevue College (BC) supports veterans and their families through a number of

programs. Staff from the Veteran's Office, Financial Aid, assists veterans in activating their benefits under the GI Bills to attend school. There are services at the Veteran's Program and Project

"The best vet service providers are vets themselves."

- Community Conversation, King County Veterans Consortium participant Succeed that help vets and their families find employment, explore career options and network with vets on campus to assist them with job readiness, job placement and transition services for vets separating from the military. BC staff also makes referrals to resources, such as counseling and housing.

- The King County Veterans Consortium convenes over 20 Veterans service agencies as well as legislative aides, county representatives and veterans themselves monthly to discuss veteran services and network. Members of the group advocate for improved services and funding for services to veterans and their families.
- Hopelink's service Vets-Go (www.vets-go. com) is an online tool built to make finding transportation to healthcare, employment, education and community services easier for Veterans, former service members, and active duty military personnel. Vets-Go has been integrated into Hopelink's tool FindARide (www.findaride.org) to expand this service to all King, Pierce, and Snohomish County residents. Now, Veterans and non-Veterans alike can find their best trip.

Prevalence

- According to the U.S. Department of Veterans Affairs (VA) there are currently over 567,799 veterans in the U.S. military in Washington State. This includes 511,736 men and 56,063 women.²
- The total number of veterans in King County has been declining for over a decade; since 2010 there has been a 10.6% decrease. In 2016 there are approximately 112,556 veterans in King County, 100,834 males, 11,722 female. More than 74,000

vets are over the age of 55 (60%) and over 9,200 are 34 years of age and younger. The

overall decline in male veterans is based on the large number of veterans age 65 and over and less recruitment as the US shifted from the draft to an all-volunteer military. However, the size of the veterans population can change rapidly based on federal policies and world events.³

 According to the 2011-2015 American Community Survey (ACS) five year estimates, in Bellevue, 6,649 people are veterans (6,014 male, 635 female). This is slightly

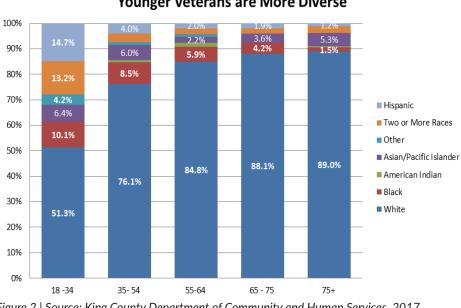
Iess than the 2013 ACS data. In **2015**, **almost one-third (32%) served in Vietnam and 13% served in World**

War II. The largest age group represented is those 55-75+ years (74% compared to 72% in 2013), with those 18-34 years old the smallest (7.6% compared to 7.8% in 2013).⁴

- The 2010-2014 ACS found that over 70% of all veterans live outside of Seattle. The highest percentage live in South King County (42.4%) About 26,000 veterans live in East King County, 22% of the total in the County. This is about the same as was estimated by the ACS in 2007. Data from the Veterans Health Administration-Puget Sound Health Care Services System shown in in Figure 1 indicate that almost half of their enrollees in King County live in South King County. These enrollees are predominantly low-income and disabled.⁵
- The proportion of veterans who are persons of color has increased reflecting a gradual shift to a more diverse military; as shown in Figure 2,49% of King County veterans under age 35 are people of color compared to only 10% of veterans who are 75 years and older.⁶

LOCATION OF VETERANS IN KING COUNTY									
Veterans Receiving VA Disability Compensation			2015 Enrollees VA Health System		Total Veterans King County				
Region									
East Total	2,614	19.8%	4,827	16.9%	25,900	21.8%			
North Total	928	7%	1,930	6.8%	9,731	8.2%			
Seattle Total	3,346	25.3%	8,315	29.1%	32,748	27.6%			
South Total	6,332	47.9%	13,771	47.2%	50,330	42.4%			
Grand Total	13,210		28,411		118,710				
Source: Veterans Administration Benefits Distributions (2015)			Source: Veterans Administration Puget Sound Health Care System (2015)		Source: 2010-2014 ACS Estimate				

Figure 1 | Source: King County Department of Community and Human Services, 2017



Younger Veterans are More Diverse

Figure 2 | Source: King County Department of Community and Human Services, 2017

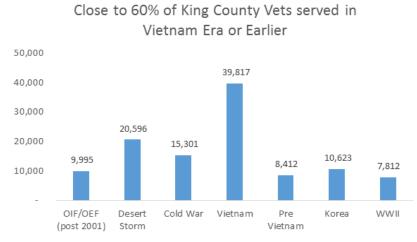


Figure 3 | Source: King County Veterans and Human Services Community Engagement Report

In addition to being more diverse, younger vets may be more isolated. Only 8% of men in King County between the ages of 35-54 is a veteran, and only 2.7% of men between 18 and 34 is a veteran; yet one in 3 men in King County between the age of 65 and 74 is a veteran (36.4%) or is likely to know a veteran.⁷

Service Trends

Aging Veterans

- Over the next twenty years, the number of veterans over age 65 in Washington State will remain stable, but there will be a sharp rise (35%) in veterans ages 85 and over. The U.S. Department of Defense estimates the number of vets in this age group in Washington State to be 33,000. There will likely be increased demands for long-term care, including hospice and Alzheimer's care, supportive housing, mental health and substance abuse treatment. The effects of this rapidly growing population are reflected in the fill levels of Washington Veterans' Homes, which have experienced occupancy rates between 95-100% for the last 10 years. These Homes report that 95% of their residents are medically indigent. In July 2014 federal funding for another State Veterans Home in Walla Walla was secured, with the opening for residents in 2017.8
- In 2014 in King County, the majority, about one-third (35%) of veterans living here were from the Vietnam War era, and 16% were from the Second World War and Korea war eras.⁹ As these veterans age, a significant number are presenting service-related illness and disabilities that combine in complex ways with health considerations that accompany the aging process generally.¹⁰

Income Status and Financial Needs

• According to the National Center for Veterans Analysis and Statistics, veterans

overall have lower rates of poverty than nonveterans but veteran poverty is on the rise. Poverty rate for veterans between the ages of 18 and 34 are higher than all other age groups. Veteran poverty is clustered in states located in the Southeast and Northwest United States.¹¹

- The WDVA projects there will be more veteran households in Washington State with annual incomes below \$20,000. They estimate that the number of veterans aged 65 and over with annual incomes of under \$20,000 will rise from 39,000 in 2000 to more than 45,000 in 2015. Many aging vets will be dependent upon care in the Veterans' Homes, or else potentially face homelessness. King, Pierce, Snohomish and Skagit County have the smallest percentage of low-income vets compared to those living in rural areas in Eastern Washington.¹²
- Another significant issue for many veterans is financial insecurity. Between 2010-2015 the number of King County veterans below 200% of the Federal Poverty Level (FPL) stayed about the same even though total veterans' population dropped by 10% as shown in Figure 4. The number of veterans below the poverty level grew from 5,786 to 8,299, a 43% increase.¹³
- While there was a dramatic increase countywide in veterans calling the Crisis Clinic 2-1-1 Community Information Line for assistance between 2008 and 2014, there was a decrease between 2014 and 2016.
 Staff believes that the need is still great but due to a shortage of staff there were fewer calls answered. In June 2017 more staff were hired to address the need. The number of actual requests is higher from veterans living in South King County and Seattle, as shown

REGION OF KING COUNTY 2016 VETERAN KING COUNTY 2-1-1 REQUESTS (TOTAL OF ALL KING COUNTY KC CALLS= ?)									
Region	Total Veterans	% of Requests by Region	Growth from 2014 (2 years)	Spouse/Partner of Vet/Act Military	% of Requests by Region				
East Total	289	9.58%		52	9.58%				
North Total	197	6.53%		18	9.58%				
Seattle Total	1131	37.50%		100	9.58%				
South Total	1399	446.39%		230	57.50%				
Total 2-1-1 Requests	3016			400					

Figure 5 | Source: Crisis Clinic 7/13/17

in Figure 4. The share from East King County was 6.5% in 2008, 9.3% in 2010, 10.4% in 2012, and stayed about the same, 9.23%, in 2014 and in 2016 at 9.58%.¹⁴ Another onestop call center for veterans was funded by the King County Veterans Levy and operated by the Washington State Department of Veterans Affairs. This hotline (1-877-904-VETS) provides a follow-up phone call within two weeks. In 2015 881 vets were served connecting 874 to veteran-specific services. The hotline can also be accessed by providers needing services for veterans.

The King County Veterans Program (KCVP), funded since the 1950s by State tax revenues for veterans, provides low-income vets with general health and human services, such as emergency financial assistance (rent, food, and utilities), referrals to services for mental illness and substance abuse. as well as referrals to federal benefits for which they are eligible. Additional funds provided by the Vets and Human Services Levy enabled KCVP to expand to serve National Guard and Reserves members who were not eligible for other military services. KCVP has also made more services available especially needed by low-income vets, including case management, short term financial assistance and life skills. In 2015, 2,532 veterans and family members were served by the expanded services including more outreach made possible with Veterans

and Human Services Levy funds. More than 900 of these individuals were homeless when they contacted KCVP. Veterans had increased employment and job skills training opportunities because staff was placed at partnering shelters, transitional housing facilities and Seattle-King County WorkSource sites.¹⁵

Housing and Homelessness

 In January 2016 communities across America identified 39,471 homeless veterans during point in time counts. This represents a substantial decrease (56%) in the number of homeless vets counted in 2010. Homeless vets tend to be male (91%) single (98%)

Number of Veterans by Income Status 2010-2015

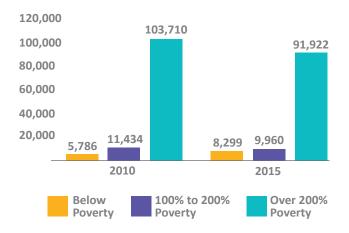


Figure 4 | Source: King County Veterans and Human Services Community Engagement Report

live in a city (76%) and have a mental or physical disability (54%). As troops return from operations in Afghanistan and Iraq the face of veteran homelessness has changed, increasingly younger, female and heads of households. In June 2014 the White House announced the Mayors Challenge to End Veteran Homelessness, with pledges from hundreds of mayors, 9 governors and 172 county and city officials.¹⁶ King County government participated in this initiative.

 Of those counted during the 2017 Count Us In point in time count in Seattle/King County (formerly the One Night Count) an estimated 1,329 individuals (11% of the total count population) identified as veterans. Over half of these veterans were unsheltered (693) while 48% (636) were sheltered

on the night of the count. The methodology for the count this year was changed from previous years so the numbers from past years are not comparable. In addition, an inperson representative survey of unsheltered and sheltered individuals was conducted by peer surveyors in the weeks following the general street count. Compared to other Count Us In survey respondents, veterans reported notably higher rates of living with post-traumatic stress disorder and physical disabilities, low rates of substance abuse and slightly lower rates of involvement with the criminal justice system.¹⁷

 In November 2009, the VA introduced its Five-Year Plan to End Homelessness Among Veterans. WDVA initiated a workgroup in 2010 including staff from King County, local housing service providers and others to coordinate with the VA Plan. All Home, formerly the King County Committee to End Homelessness, and United Way's

Campaign to End Chronic Homelessness are coordinating their strategies with the federal and state initiatives focusing on ending veteran homelessness in five years. In 2011 the plan was completed and many of its recommendations were included in the Veterans and Human Services Levv Strategy on ending homelessness. In the All Home 2016 Strategic Plan, veteran homelessness issues are addressed under the single adult focus area, including supporting opportunities to increase income and identifying individuals at imminent risk of homelessness and preventing that occurrence. In 2015 Levy funds provided for homeless street outreach program and two other programs served homeless veterans and family members. One of the programs, Enhanced Outreach to Women Veterans of Color. served 462 veterans.¹⁸

- Permanent housing with services for homeless veterans is a major need. Funding from the King County Veterans and Human Services Levy has greatly increased the number of permanent housing units with supportive services. Since 2006 levyfunded housing projects opened countywide an additional 2,056 units of affordable housing; 660 were created during the current levy period. Many of these sites had units dedicated specifically for veterans and their families.¹⁹
- Another challenge for finding housing for all residents is high rents, especially in East King County. Even though King County receives specialized Housing Choice Vouchers to help subsidize rent for low-income veterans, many cannot find a place they can afford.²⁰

Employment

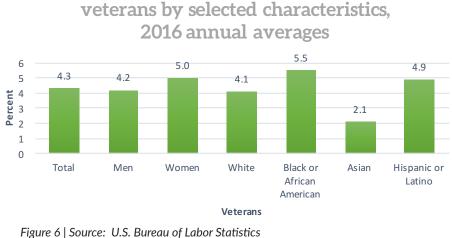
 Nationally the unemployment rate for all veterans was 4.3% in 2016 similar to the overall national unemployment rate of 4.7%. Women veterans have higher unemployment rates in general with the rate of 5.0%. This represents a declining trend. In Washington State, 3.8% of veterans were unemployed in 2016.²¹ As Figure 6 shows, veterans of color also have higher rates of unemployment.

- In King County, the local unemployment rate is 5.9% (about 3,000 veterans) for veterans based on the 2011-2015 ACS, similar to the non-veteran population which is 6.2%.²²
- A number of resources focused on employment training and education for veterans are located throughout King County. WorkSource offices in North King County, Redmond, Renton and Seattle offer specialized services. Bellevue College has a Veterans Conservation Corps (Vet Corps) member on-site to help them navigate systems needed to adjust from military to college life. Vet Corps members also assist with training and job placement opportunities. Community Employment Services enrolled and served 382 homeless individuals in 2015. many of whom were veterans.²³ In 2015 the Washington State Legislature created a YesVets Hiring Campaign to encourage employers to hire vets. The goal is to create partnerships with public and private organizations to help vets transition into civilian employment in Washington.²⁴

Women Serving in the Military

- According to the VA, nationally women • make up about 9.4% of the military force or about two million; by 2043 women are expected to make up 16.3% of all living veterans. The mean age of woman veterans nationally is 50 years of age, compared to 63 years of age for men. A higher percentage of women veterans are in the 35-64 years old. Historically women have served to some extent in all wars beginning with the Revolutionary War but the Gulf War was the beginning of more large-scale participation. As of 2015, there were an estimated 700,000 women serving in the military post 9/11 only.²⁵ In January 2013 it was announced that women would be able to serve in combat units; prior to that time, women could not serve in certain areas of the military such as Special Operations and Infantry. Beginning in January 2017 combat roles are available to women in all the military branches.²⁶
- There are over 11,700 women veterans living in King County, up from 8,000 in 2008. Younger women have increased their proportion of veterans in their age group-now representing close to one fourth of veterans younger than 35 as shown in Figure 7.²⁷

With the increasing numbers of women serving in the military, there is a trend toward more reports of sexual assault, ranging from unwanted sexual contact and harassment to rape. These are referred to as "military sexual trauma" or MST. Post-Traumatic Stress Disorder (PTSD) is often a result of MST. About 1 in 4 women and 1 in 10 men seen for VA healthcare report a history of MST when screened by a VA provider. There are significant numbers



Unemployment rates of military

e o i source. O.s. dureau of Lador Statistics

of men and women who have experienced MST; over 40% of the veterans seen at the VA who disclose MST are men.²⁸ A report released by the Department of Defense in 2016 stated that the number of service members estimated to have experienced MST went from 26,000 in 2012 to 20,300 in 2014, to 14,900 in 2016. During each time frame the percentage of those who reported increased considerably. The report concluded that the Department's efforts to eliminate sexual assault, such as providing a hotline, policies that prevent retaliation, and more training for providers to identify MST are helping to increase reporting and decrease prevalence but that these efforts must be maintained.²⁹ In King County when national prevalence rates are applied as many as 7,900 men and women veterans are potentially affected by MST. The 2012-2017 Service Improvement Plan for the King County Veterans and Human Services Levy is focusing on women veterans who have experienced MST as a high priority population for outreach and engagement services. In 2015, the PTSD program funded by the Vets and Human Services Levy provided 13 trainings to providers to increase their understanding of MST; after the training almost half said they had referred a MST provider to benefits.³⁰

• In 2013 King County created a Task Force of staff, stakeholders and local providers of

services for survivors of MST. One outcome of the Task Force is the development of two curricula for treating veterans with MST. One is for providers who provide MST services in a setting specifically for veterans and staffed by former veterans, and the other is designed for service providers in a non-veteran specific setting. Both curricula are not just targeting women veterans but male veterans because, as stated earlier, men also experience MST.³¹

- Many women who served in the military report that they do not consider themselves veterans because they did not serve in combat. Data from the National Survey of Women Veterans conducted in 2010 found that 31% of respondents did not think they were eligible for VA health care, 21% did not know how to apply, and 20% said that the closest VA clinic was too far from their homes.³² Interviews and surveys of women veterans reveal their perception that there is a significant gap in delivery of services for them.³³
- Health care services for women veterans
 have been historically co-delivered in the
 same facilities with veterans who are men,
 without consideration of the unique needs
 of women. As a result there have been until
 recently fewer women veterans using VA
 healthcare services. In the same survey
 cited above, more than 30% of the 3,012
 women veterans were dissatisfied with the
 responsiveness of the VA healthcare system,

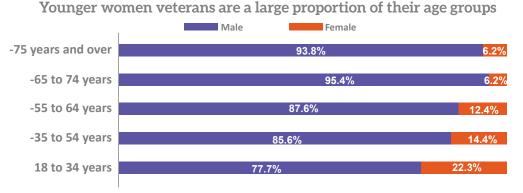


Figure 7 | Source: King County Department of Community and Human Services, 2017

and approximately one-fourth said they were dissatisfied with the competence of VA healthcare providers.³⁴ A new model of "one stop" health care for women vets with multi-disciplinary teams, both male and female, was mandated by the VA in 2009. Mental health counseling, primary care and pharmacy access are included in the clinics. Maternity services are contracted out. There is a VA Valor Clinic using this model located in Bellevue. The VA in Seattle has separate entrances for male and female veterans.

• Another area of need cited in a report by the VA Veterans Women's Task Force is for access to childcare so women veterans can take care of their healthcare needs or attend school and job training.

Health, Mental Health and Substance Abuse Issues

- The emotional effects of serving in combat have been evident for veterans throughout history, but beginning with the Vietnam War, there has been more national awareness of the extent of the trauma on the veteran and his/her family. For example, data shows that nearly 20% of veterans returning from the Iraq and Afghanistan conflicts reported a mental health issue such as PTSD or major depression. The impact of multiple deployments such as those military serving in Iraq and Afghanistan is anticipated to significantly increase the rate of PTSD rates in future studies. PTSD and Traumatic Brain Injury (TBI) have emerged as two signature injuries of the Iraq and Afghanistan wars. PTSD is a severe reaction to war that includes hyper-alertness, nightmares and depression. It may be triggered by reminders of combat, such as fireworks or television scenes of violence. TBIs are head injuries from combustive explosions which may result in concussions that may at first seem mild, but can lead to symptoms up to three months after the event. TBIs can also be a contributing cause of PTSD.35
- The VA estimates up to 30% of Vietnam veterans, 2% of Operations Iraqi Freedom and Enduring Freedom veterans and 10% of Gulf War veterans experience PTSD.³⁶ In King County, estimates that there are between

19,500 and 28,000 veterans who have PTSD from all war eras, and as many as half of them will not seek treatment from the VA or community organizations without assistance to overcoming reluctance or institutional barriers. Untreated PTSD contributes to other issues such high rates of chemical dependency, other behavioral and mental issues, divorce, homelessness and criminal justice system involvement.³⁷ In 2015 the PTSD program in King County provided confidential counseling services free of charge to 250 vets and their family members.³⁸

 Nationally, 20 veteran commit suicides each day, according to VA estimates in 2014; 6 of the 20 were

users of VA services. This is down somewhat from 2013 estimates of 22 veterans each day. Sixty five percent of all vets in 2014 who committed suicide were men over age 50. In 2007, the VA developed a plan to increase veterans' access to mental health services by hiring additional mental health professionals and establishing a toll-free hotline. Risk for suicide is 2.4 times higher for female veterans than for females within the civilian population.³⁹

Improved body armor for soldiers has • resulted in higher survivor rates in the current conflicts compared to other wars. Now for every one death, seven service members are wounded compared to Vietnam and Korea when fewer than three people were wounded for each fatality. Approximately 48,000 individuals have been wounded in Iraq and Afghanistan. The result is that the ongoing service needs of these permanently disabled vets, many of whom are amputees, for example, to control chronic pain, afford prosthetic limbs or to find appropriate employment or housing, could be extensive, but is currently not fully understood.⁴⁰

Studies show that there is a strong • relationship between PTSD and Substance Use Disorder (SUD) in both men and women and those in military and civilian populations. In the wars in Iraq and Afghanistan, about 1 in 10 returning soldiers seen in VA clinics have a problem with alcohol or other drugs. If someone has both PTSD and SUD, it is likely that he or she also has other health problems (such as physical pain), relationship problems (with family and/or friends), or problems in functioning (like keeping a job or staying in school). Using drugs and/or alcohol can make PTSD symptoms worse. Treatment options include individual and group therapy, medications and psychological treatments.⁴¹

Needs of Families of Active Military or Veterans

- 2010 ACS data indicates that over half (61%) of King County veterans and active duty military are married. These spouses and dependents potentially need support as they cope with the issues that their family member in the military faces, such as PTSD or physical disabilities, as well as, during deployment, loss of income and changing family dynamics.⁴²
- Strategies funded through the Veterans and Human Services Levy has increased awareness of the needs of families and dependents of soldiers and veterans. Some of the needs being focused on include helping the caregivers of aging or disabled veterans with respite, providing mental health counseling to all family members of vets experiencing PTSD, family counseling, phone resources through an information and referral service, case management to help families find emergency and other types of housing, and training and employment services through the Career Connections Program at WorkSource offices and community colleges. In the 2012-2017 King County Veterans and Human Services Levy Service Improvement Plan, additional funds are allocated for veterans' families.43

- While many military children are healthy and resilient, studies show that some groups are more vulnerable: young children, some boys, and children with pre-existing health and mental health problems. Others include those who do not have the support of living in military communities and those who come from single parent or dual military families.
- Other needs of military families identified in the Bellevue providers surveys include housing, substance abuse treatment, adult day health, long term care, transportation, PTSD treatment and medical and mental health services for caregivers of veterans with disabilities.
- Military service has unique psychological, social, and environmental factors that may contribute to elevated risk of IPV among active duty service members and veterans. Multiple deployments, family separation and reintegration, demanding workloads at home and while on duty, histories of head trauma, mental illness, and substance abuse can contribute to partner conflict and elevated risk of IPV among active duty service members, veterans, and their intimate partners.⁴⁴

Transition from Military to Civilian Life

- A survey conducted by the Washington Post and the Kaiser Family Foundation in 2014 found that 60% of the veterans participating thought that the military was doing a poor or fair job in addressing the problems faced by veterans and 50% said that the military is lagging behind in helping them transition to civilian life which has been difficult for 50% who have left the service.⁴⁵
- Some of the challenges that vets may face in this transition include joining or creating a community after having other vets to relate to 24/7, looking for a job, including writing a resume as some vets entered the service out of high school and do not have that

"What has not been is explored is that the various generations of Veterans who don't think, work or operate the same. We have veterans from the Greatest Generation (served in WW II, Korea and Vietnam), the Baby Boomers (served in Vietnam) and subsequently Generation X and the Millennials who have served in the Gulf and Middle East areas."

Past Chair, King County Veteran's
 Program Advisory Board, Past Chair, King
 County Veterans Levy Oversight Board

experience, finding services such as a doctor, adjusting to a different pace of life and providing the basics of food and housing for themselves and their families.⁴⁶

Veterans and the Legal System

The Bureau of Justice Statistics estimates that 10% of inmates in the nation's jail and prisons report having served in the military. King County statistics suggest that veterans make up about 2-3 % of the inmate population at any given time. In May 2014 in response to a motion by the King County Council, a report was prepared on incarcerated veterans in the Department of Adult and Juvenile Detention jail facilities. Some of the recommendations included that a dedicated veteran housing unit be piloted to provide veteran specific services and programs to incarcerated veterans in King County jail facilities and that all criminal justice partners receive training on the impact of incarceration on benefits and potential alternatives to incarceration that allow veterans to maintain their VA benefits. Training for Jail Health Services release planning staff

and partners on military culture and trauma informed care was also recommended.⁴⁷

King County has implemented several programs that acknowledge the fact that some veterans return from combat to civilian life and face civil legal barriers to a stable life, or may become involved with the criminal justice system. Seattle Veterans Court (established in 2011) and King County Regional Veterans Courts (established in 2012) provide an opportunity for veterans to choose treatment for substance abuse or receive other resources as an alternative to incarceration. The Vets and Human Services Levy provides a Court Liaison who screens veterans for these courts, and helps follow them through the process. The Veterans Legal Assistance Program provides homeless and low-income veterans with legal assistance for civil legal issues, such as reinstatement of driver's licenses and eviction prevention. The Veterans Incarcerated Program (VIP) screens vets who were incarcerated and provides short-term case management. Seventy percent of the 242 vets who were served in 2015 followed through with referrals to treatment or educational programs.⁴⁸

Community Perceptions

- In a 2017 survey completed by human services providers serving Bellevue residents, 46% of the respondents stated that they ask clients at intake about their veteran status, lower than the number in 2015.
- The most critical needs for veterans mentioned by providers in the 2017 provider survey include mental health services and housing.
- In 2016, King County staff from the Veterans and Human Services Levy hosted 16 community conversations, 15 focus groups and three rural convenings, and circulated two online surveys. One theme that veterans expressed was that though there are currently over 180 programs serving vets in King County, there are barriers cause

by fragmented service systems and lack of trained Veteran Services officers.

• At a Community Conversation with veterans at the King County Veterans Consortium

"Get all service providers informed about all vets services in Bellevue so that no vet is told "I don't know when they ask a provider about vets services."

— King County Veterans Consortium

Muster it was noted that that in East King County there are several barriers identified by veterans including fewer entry level positions for employment, fewer bus lines that make it hard to navigate, and a higher cost of living which makes it more difficult to find affordable housing, including landlords who are unwilling to accept housing vouchers.⁴⁹

 An issue identified by Bellevue College staff related to veterans who are students there is the gap between what the GI bill pays for and the real needs of veterans. For example, a vet's benefits may pay for books but not for a bus pass or food. Staff also stated that there are unique challenges in getting vets to use services due to pride.

Implications for Action

 As a result of a focused countywide effort over the past ten years, human service agencies have begun to better track veterans' usage of their services with improved intake processes. This needs to continue and further be refined so data is available to show the real needs of veterans, especially among the population of homeless veterans who are very challenging to track. In addition, ongoing training for community providers on Veterans Culture and Veterans services are needed to create a more seamless system with "no wrong door" to meet veterans' needs, especially for those veterans who are not eligible for VA services due to their less than honorable discharge status. The Veterans and Human Services Levy funding provides many of these trainings through the Veterans Training Support Center which can be accessed at http://veteranstrainingsupportcenter.org/

- Ongoing partnerships between federal, state, and county programs for veterans and human service agencies are needed to ensure that veterans are aware of the benefits to which they are entitled, get help in accessing these benefits when they are eligible, and are assisted in a coordinated, seamless manner.
- In addition to awareness of benefits, city governments could create internships for veterans and help link them to professional networks and businesses to encourage them to hire veterans, and have veterans more access to living wage jobs. Cities could also assist veterans' transition to civilian life by helping them learn about services and resources in East King County.

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Bellevue Adult Misdemeanant Probation

Community corrections reducing future criminal activities by 10%-30%

Approximately 80% of KC inmates have alcohol/drug issues

Probation services about

per year

1000 individuals

Many experienced traumatic experiences in early life (Adverse Childhood Experiences) that contributed to substance abuse, depression, and inmate partner violence

Bellevue Probation Programs

- Gateway Program
- License Support Program
- Thinking of Change
- Alive at 25 and Defensive Driving
- Theft/Consumer Awareness
- Domestic Violence Moral Recognition Therapy
- The Electric Home Detention
- Work Crew

BELLEVUE ADULT MISDEMEANANT PROBATION

The Adult offender population impacts all levels of government and communities in multiple ways. It is a group that can attract attention on a case by case basis associated with some tragic event but quickly disappears after the story runs its course. There is no organized advocacy working to sustain the public's attention on the needs of this unique population. The term "offender" can have a strong negative connotation and a stigma of its own that has an effect on many levels. In a memo sent November 1, 2016, by then Washington State Acting Corrections Secretary Dick Morgan, the term "offender" would be replaced in policies and programs with the term "individuals," "students" or "patients." Yet, how each individual became a criminal justice statistic, and further marginalized, often originated in a chaotic or violent family environment, chronic homelessness, unemployment, poor education, substance abuse, mental health issues, physical disabilities, cultural isolation or many of these combined. Identifying this diverse group as a special population with specific needs is a first step in formulating a collaborative plan along the entire human services continuum to collectively work toward the shared goal of reducing recidivism.

Defendants who are guilty of misdemeanor offenses committed in Bellevue are supervised by Bellevue Probation. Probation staff monitors offender compliance with the conditions imposed by the court's sentencing order, and provide targeted assessment and intervention strategies to assist them in doing so. Probationers are offered the opportunity to remain in the community while addressing their needs and paying back the community in any number of ways. Offenses typical to misdemeanor probation include:

- Driving Under the Influence (DUI)
- Domestic Violence Assault, Stalking, Violation of Protection Orders

- Theft
- Possession of Stolen Property
- Possession of Controlled Substances and Paraphernalia
- Minor in Possession of Alcohol
- Driving While License Suspended
- Various felonies amended to misdemeanors

Through collaboration with various community, social and human service agencies and partners who provide treatment and counseling services, probation strives to provide appropriate interventions to enhance offender's competencies and reduce future re-offending. Referrals may include any of the following:

- Appropriate evaluations
- Substance abuse treatment
- Domestic violence treatment
- Mental health services
- Counseling
- Anger management
- Cognitive restructuring programs
- Educational/vocational opportunities
- Parenting programs
- Re-licensing assistance
- Job searches

How Did They Get Here

There are four levels of court in Washington State: 1) the Supreme Court, 2) Court of Appeals, 3) Superior Court, and 4) Courts of Limited Jurisdiction which includes District and Municipal Courts. Felony criminal cases (rape, arson, murder) are filed in Superior Court and are punishable by more than a year's confinement in a state prison. Lesser crimes, filed in District & Municipal Courts, are called misdemeanors and gross misdemeanors (DUI, Assault IV including Domestic Violence, Theft) and are punishable by as much as 365 days confinement in a city or county jail.

The individual convicted in Bellevue District Court is now a misdemeanant or offender. He or she may have had prior convictions in the same or other courts, may also be a felon, may have a criminal history several pages long or may be a first time offender. This individual may also be employed, financially secure, have a close family unit and many community supports. They could be a neighbor, your mechanic, your parent, or your child. More commonly, this individual may alternately be unemployed, disabled, lack either a valid driver's license or a means of transportation, addicted to drugs or alcohol, mentally ill, homeless and/or struggling with cultural barriers while trying to support themselves and a family and, now, abide by the court's order.

Structure of the Bellevue Adult Misdemeanant Probation Program

Bellevue Probation is one part of the larger regional criminal justice system that deals with adult misdemeanor offenders.

The larger system, as shown in Figure 1, includes Bellevue Police, Bellevue Prosecutor, Bellevue Probation, King County District Court, and King County jail and/or regional jail providers. Bellevue Probation routinely interacts and coordinates directly with each part of the Justice System in addition to the Human Services network that provides intervention, prevention and victim services. Probation represents the ideal place along the continuum where real, meaningful interventions can occur to effectively change the lives of these individuals, to interrupt the cycle of continued criminal behavior and make the most use of increasingly limited funds.

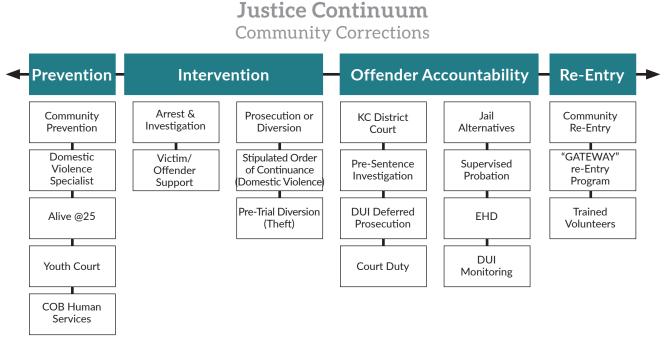


Figure1

Prevalence

All Bellevue misdemeanor offenders are sentenced in **Bellevue District Court** for crimes committed in Bellevue. In 2016 Bellevue provided adult misdemeanant probation services to approximately 1,000 individuals with an

average monthly population of approximately 300 supervision cases and 600 administrative cases.

Legislative changes in Washington State can impact the number and type of cases through time such as de-criminalization of possessing marijuana. Drug related cases collectively have increased across all offense types. Obvious are the DUI offenders however less visible in statistics are offenders supporting their drug use by theft behavior, as well as substance use as offense factors in domestic violence cases.

The number of offenders alone represents a considerable expense to the City and its citizens in criminal justice costs but the combined ripple effects are considerably higher. Not all misdemeanants are placed on probation, but they all create victims. There are many more Bellevue residents impacted each year as a direct consequence of the crime (health, financial), as a family member of the offender (reduced income, added expenses, disruption of family unit), as a consumer (increased health care, insurance and goods costs) or member of the community (loss of productivity). The emotional costs are even greater to both the victims of crime, their families and to the public at large with a reduced sense of safety and security.

What other single population has an equal cost, total combined impact, potential for re-occurrence and yet lack of targeted resources to reduce future expense? Targeting resources to positively impact this population provides opportunity to impact whole families in the community, and the community (itself) or as a whole.

What Sets Them Apart

Some of the issues that the Bellevue adult probation misdemeanant offender experience in early life are contributing factors in his/her interaction with the criminal justice system. For example, childhood abuse, neglect, and exposure to other traumatic stressors called adverse childhood experiences (ACE) have been identified through extensive research to have significant short- and long-term outcomes on adults. These childhood exposures are related to a multitude of health and social problems, including alcohol and substance abuse, intimate partner violence, depression and suicide attempts.¹

Mental health issues are increasingly common in the offender population. A recent Stateline article in August 2016 noted that the nation needs an additional 123,300 psychiatric hospital beds. According to the article "This crisis is drawing particular scrutiny in Washington State, where two court rulings - one in the state Supreme Court in 2014 and the other in federal court last year - determined that it is illegal for the state to warehouse mentally ill patients and prisoners in emergency rooms, jails and regular hospitals." Mental health services are underfunded at every level resulting in the Department of Corrections now maintaining the largest psychiatric facility in Snohomish County and the second largest in the state (Monroe Correctional Complex). The most severely affected (schizophrenia, psychosis) meet the narrow criteria for limited community resources while those who have less severe debilitating disorders (PTSD, personality disorders) more often do not and continue to use the coping mechanisms they have developed until coming to the attention of the court. This same population is those most likely to be frequent utilizers of local jails with numerous re-arrests. According to Ron Honberg, a senior policy adviser at the National Alliance on Mental Illness, "Fewer beds and no more community services is a lethal combination."

Estimates of the number of jail inmates with alcohol/drug issues vary but are consistently high. The US Department of Justice estimates as much as 85%, while a King County Community Crisis Alternatives study placed the number at 80% for those housed in city jails throughout King County. Given these

numbers rely, in part, on accurate self-reporting, to some degree, they are still conservative. This population is particularly diverse as it includes those who have continued to use alcohol or illegal drugs for years, those who may have only just become aware their use is creating other problems and those who may have turned to substance abuse to cope with other underlying, co-occurring, mental health issues. Chemical dependency treatment is available in the community but is expensive. Offenders are often unable to meet eligibility requirements for public assistance and/or are simply unable to absorb the added expense.

Many of the services that are needed by the offender population are similar to those needed within the general population. There is much more at stake, however, when a court order mandates compliance within a specific time frame or risk going to jail. The added anxiety and uncertainty may well aggravate the underlying issues that brought them to the court in the first place. Paradoxically, the criminal behavior can also provide an opportunity for a comprehensive assessment and effective intervention. Access to those needed services, however, has not been designated as a priority for this at-risk population. A court mandate does not move you to the head of the line for existing, limited resources or direct you to a dedicated resource. Criminal offenders may even find that their offense renders them ineligible for the services they need.

What's Working National

"Hawaii's Opportunity Probation with Enforcement" (HOPE) is a model "swift and certain" approach that has benefitted other jurisdictions as well. Hallmarks of the program are a return to court within 72 hours for even the smallest violations (positive Urine Analysis (UA), missed appointments) and a guaranteed sanction - typically a few days in jail for each initial violation, escalating with any subsequent violations. The logistics to operate HOPE required the collaboration of the public defenders and prosecutors, to recommend/agree to the HOPE alternative; the Judge to impose sentence, address violations and issue bench warrants; court staff to schedule violators for immediate reviews; police to locate offenders and arrest on warrants; and vigilant probation staff; to monitor full compliance, collect UA samples, and write reports on short notice. Community involvement was also a component in setting up the treatment alternatives and intake processes. Collectively, the unified approach of the HOPE program staff maximizes the efficiencies of all departments, reduces costs and provides the desired reduction in recidivism and jail costs.²

Following a one year pilot program, completed in 2012, Senate Bill 6204 was enacted in Washington State to convert the Department of Corrections to this promising approach.

State of Washington

While emerging research continues to show incarceration alone does not reduce crime³, there are programs that work. In April, 2012, the Washington State Institute for Public Policy (WSIPP) completed a study on "Return on Investment: Evidence-Based Options to Improve Statewide Outcomes". In that study, supervision with Risk, Need and Responsivity (RNR) Principles showed \$18,386 in crime victim savings, \$5,817 in tax payer savings or a combined net benefit

of \$20,660 per offender. This same study also showed cognitive-behavioral therapies provided a 6.9% reduction or a combined net benefit of \$9,283 and Intensive Probation Supervision coupled with treatment related programs showed a net benefit of \$7,295 per offender⁴.

 In July 2011, the Department of Social and Health Services (DSHS) studied "Re-Entry of Criminal Offenders Following Release from Prison". It found that offenders who found permanent housing on release had a 19% reduction in subsequent arrests and higher rates of employment.⁵ In December 2012, WSIPP completed a study of Chemical Dependency Treatment for Offenders and found that either inpatient or intensive outpatient treatment, delivered in the community, provided a net financial benefit of \$2,489 per offender. Outpatient treatment resulted in net savings of \$5,154 per offender, due to lower costs.⁶

Bellevue Probation

Bellevue probation adheres to a best-practices mandate to assist individuals in meeting the conditions set by the court. The larger goal is also to identify personal barriers and provide resources and referrals to change attitudes and behaviors and improve the quality of life which in turn reduces recidivism and the high costs associated with criminal prosecution and incarceration. The perceptions that providing assistance to offenders is being "soft" on crime or that all offenders need to be locked away are not only misguided but financially unsustainable. Those beliefs also perpetuate a myopic view of criminal offenders that again underscores the needs this population has for recognition as a marginalized group who, with a little help, can become productive neighbors and friends. The following are examples of Bellevue Probation's intervention strategies:

• Using an empirically validated assessment tool, Bellevue Probation conducts intake interviews with all court referrals and, using RNR principles, assigns a risk level (1, 2 or 3) and either refers for additional services or enrolls in one or more of the probation programs.

- Gateway Program can be short or longterm and occurs concurrently with probation supervision. Overseen by the Probation Programs Coordinator, Gateway volunteers assess those referred for specific needs and walks the individual through the process to access those services in the community.
- License Support Program helps an individual who has lost their driving privilege regain that right and avoid the continuation of Driving While License Suspended (DWLS) charges while aiding in reduction of court time and costs.
- **Thinking for a Change** is a cognitive behavioral program that has been shown to reduce recidivism by teaching social, problem solving and cognitive self-change skills.
- Alive at 25 and Defensive Driving courses are offered for both young drivers and adults of all ages to improve their driving skills including how alcohol and drugs affect driving behaviors, and identifying hazards in distracted driving. The program assists the participant to comply with court conditions and/or reduce insurance premiums.
- Defensive Driving Course (DDC4) allows participants to acquire the basic knowledge/ techniques for recognizing potential hazards and avoiding collisions and violations. This course will motivate drivers to change their behind-the-wheel behaviors and attitudes. Participants will learn coping techniques for dealing with speeding, distracted driving, impaired driving, hazardous traffic conditions and more.
- Theft / Consumer Awareness allows participants to examine how values and attitudes impact behavior: acceptance of responsibility for actions that led to the participant's arrest or incident that led to their attendance in the class, understanding of the consequences of future illegal behavior,

assistance to identify the importance of making better future decisions, development of a personal commitment plan to avoid future theft-related problems and/or arrest.

- Domestic Violence Moral Reconation Therapy (DV MRT) is an evidence-based program that can help perpetrators be accountable for their actions, understand why they have acted violently and confront those tendencies in current situations. The programs are founded on a cognitive behavioral programming developed by Correctional Counseling called Moral Reconation Therapy[™] (MRT). The MRTbased domestic violence materials are tailored specifically for batterers, or the perpetrators of domestic violence.
- The Stipulated Order of Continuance Program (SOC) was created as a way to intervene on a domestic violence in the community, while focusing on prevention of future violence through education and counseling. The SOC allows prosecutors to divert first time offenders directly to probation and compliance with a set of conditions that can result in a dismissed charge.
- The Electronic Home Detention (EHD) program provides cost-effective alternatives to jail, allowing offenders to either serve a sentence or for pre-trial supervision by electronically monitoring the offender's location and in many cases abstinence from alcohol. Bellevue EHD has an average daily population of approximately 20 individuals. The community benefits from saving the costs of incarceration and holding the offender accountable by remaining in their home and continuing work to support their families, continuing treatment and continuing their education programs.
- Bellevue **Work Crew** is another jail alternative. The court may refer those with shorter jail sentences or those performing community services in lieu of fines/fees to

a supervised crew doing manual labor at selected sites within the Bellevue City limits. Completed projects benefit the community and provide positive "pride of ownership" experiences for offenders who contribute their efforts.

 Probation is served by an Advisory Board made up of representatives from education, the clergy, mental health/substance abuse, a Bellevue Councilmember, police, District Court Judge, Prosecuting and defense attorneys, citizens, a Parks representative and the probation manager. This board provides a forum for the regular exchange of information between probation and the Bellevue community.

Many of these programs are made available to Bellevue offenders not court ordered to report to probation and most are offered at reduced or no fee. Collectively, they are evidence based, best practices that have proven to be sound fiscal policy as well by reducing recidivism, saving additional incarceration expenses and helping individuals to become more productive members of their community.

Despite these efforts there are still gaps that leave many with difficult choices. They may have already made several of these; pay for food or medicine, risk driving without a license or get fired, remain in a violent or drug-using home or become homeless. Many have simply adapted to living with the consequences of poor choices and, due to their underlying issues and problems, lack the insight to see how they are related.

Implications for Action

While Bellevue Probation has incorporated many best practices into its program, resources are limited and access for these and other human services is an ongoing issue. Regularly, offenders have a demonstrated need for one or more services (for example, substance abuse treatment, housing, transportation) but find they have just enough income to be ineligible for public funding yet unable to pay for these services and still meet their family's basic needs. Increased access to subsidized health and human services are key to preventing recidivism and increasing the offenders' chance of successful re-entry into society. Additionally, with the growing ethnic diversity in Bellevue, it is not unexpected that the offender population is also becoming more diverse. Staff report that about 10% of their clients use English as a second language. The need for interpreters is increasing.

Funding for entry level programs is lacking for domestic violence, mental health and chemical dependency treatments.

Collective Impact

Implementing a collective impact approach to services is a key element and vision to support and treat adult misdemeanor offenders. The City of Bellevue supports many organizations providing human services for those in need. Mental health, chemical dependency, advocacy groups, shelters and youth at risk all receive funding but there are none targeted for the criminal offender. Many individuals remain "compliant" with their mental health treatment plans and abstinent in the use of alcohol or other drugs while continuing to commit crimes. Melding both the probation focus on criminogenic needs and criminal thinking patterns with the service providers' focus on substance or mental health issues is the kind of collaborative programming that could be developed.

The HOPE program described in the What's Working section is an example of a community's shared vision and accountability to support attainment of desired outcomes. Bellevue Probation meets regularly with criminal justice partners, service providers, the Probation Advisory Board and others on issues to address and progress made, it does not always result in a common agenda. Bellevue has made a commitment to provide a probation department capable of utilizing best practices to effect a meaningful reduction in recidivism but elevating the needs of this special population is required to develop additional, effective and collaborative interventions. Two publications support the benefit of using a collective impact approach:

 2016- Why Incarceration Is Not the Best Way to Keep Communities Safe. More and more people incarcerated in prison are releasing out into our communities and being placed on probation. In 2014, an estimated 3.8 million adults were on probation. According to the National Institute

of Corrections, **Community corrections** have been shown to be effective in reducing future criminal activity

by 10 to 30%. Researchers have demonstrated that community corrections can greatly reduce the risk of recidivism, especially when strategies based on evidence and risk/need/responsivity principals are being utilized. The more communities invest in effective treatment, social services and community supervision, the greater their financial return of investment.

2. March 2015- THRIVES by Center for Disease Control- Global Technical Package to Prevent Violence Against Children.

"The public health consequences of violence are pervasive, enduring, and costly. Though violence against children is often hidden, its consequences eventually

surface (Anda 2010). Strong evidence confirms that childhood violence increases the risks of injury, HIV, mental health problems, delayed cognitive development, reproductive health problems, involvement in sex trafficking, and non-communicable diseases

(NCD's). NCD's can cause damage to the nervous, endocrine, circulatory, musculoskeletal, reproductive, respiratory, and immune systems. In fact, exposure to childhood violence leads to graded increases in the four NCD's—cardiovascular disease, cancer, chronic lung disease, and diabetes that accounted for 60% of the 53 million deaths globally in 2010 (Anderson 2008, Baral 2012, Benjet 2010, Devries 2011, Dietz 1999, Dube 2001, Fisher) Given the high prevalence of violence against children and its vast consequences, the associated economic impact is substantial (Patel 2012). In the United states, for example, the total lifetime economic burden associated with child maltreatment—only one type of violence against children—was \$124 billion in 2008 (Fang 2012).

"Violence is preventable; Much progress has been made in understanding how to prevent violence (Liverpool Johns Moores University 2013, Rosenberg 2006, WHO 2014, UNICEF 2014). It has become clear that various forms of violence are inter-related, as they share many risk and protective factors. consequences, and effective approaches to prevention. Safe, stable, and nurturing relationships and environments are essential to reduce the various types of violence and to enable children to reach their full potential (Fluke 2012). By promoting relationships and environments that help children grow up to be healthy and productive citizens, they in turn can build stronger and safer families and communities for their children (CDC 2014). There is strong reason to believe the rapidly expanding evidence on violence prevention combined with and increasing capacity countries have to implement and scale up effective prevention programs and practices can reduce violence toward children across the world (CARE 2012). Violence can be prevented if governments, their citizens and the global community start now, act wisely, and work together (Leadership Council of the Sustainable Development Solutions Network 2013, Mercy 2015, WHO 2008). "

Is there any better place to start? Reduced violence in the home not only protects the most vulnerable victims but also increases the likelihood these children won't become adult offenders themselves.

Endnotes

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- Drake, E. (2012) Chemical Dependency Treatment for Offenders: A Review of the Evidence and Benefit-Cost Findings (Document No. 12-12-1201). Olympia: Washington State Institute for Public Policy.

2016 – Why Incarcerated Is Not the Best Way to Keep Communities Safe by National Institute of Corrections.

March 2015- THRIVES by Center for Disease Control-Global Technical Package to Prevent Violence Against Children.

Seattle Times Article October 2013- Mental health in Prisons: "It's a crime".

Appendices



APPENDIX A

Phone and Online Survey Results

Ratings for Problem Ar	eas in the Community	Not / Minor	Moderate	Major	Don't Know
	Lack of affordable housing	22%	31%	46%	1%
	Lack of affordable medical insurance	52%	29%	16%	3%
	Having jobs that do not pay enough for the basics of food, shelter, and clothing	53%	31%	13%	3%
	Lack of affordable child care	51%	27%	16%	5%
Top Tier	Lack of affordable medical care	56%	28%	14%	2%
Problems (30%+	Inadequate public transportation	60%	24%	15%	1%
Major/Moderate)	Lack of affordable dental care	61%	27%	9%	3%
	Homelessness	65%	23%	12%	1%
	Drug abuse	64%	23%	10%	3%
	Lack of money for basic services	66%	23%	7%	3%
	Lack of affordable legal services	63%	23%	7%	7%
	Mental illness or emotional problems	67%	21%	8%	3%
	Lack of services for elderly persons	66%	21%	8%	5%
	Crime in the community	73%	21%	7%	0%
	Lack of services for people with disabilities	70%	20%	5%	5%
	Racial or ethnic discrimination	74%	19%	5%	2%
Second Tier	Lack of parenting skills	72%	20%	3%	5%
Problems (20% up to <30%	Lack of services for children and teens	72%	18%	5%	5%
Major/Moderate)	Hunger	76%	18%	4%	2%
	Alcoholism	73%	18%	3%	6%
	People not speaking or understanding English well enough to function in society	79%	17%	4%	0%
	Unemployment	79%	15%	5%	1%
	Domestic violence	77%	15%	2%	5%
Third Tier	Violence in the community	84%	12%	2%	2%
Problems (< 20% Major/ Moderate)	Lack of affordable housing	22%	31%	46%	1%

Q2 For anything that you feel is a problem, please tell me if it is a minor, moderate or major problem.

Base=all respondents

Ratings for Problem Areas in the Communitty

Ratings for Problem Areas in the Communitty		2005	2007	2009	2011	2013	2015	2017	Change from 2015
	Lack of affordable housing	60%	69%	58%	61%	51%	68%	77%	9% +
	Lack of affordable medical insurance	53%	52%	48%	55%	41%	35%	45%	10% +
	Having jobs that do not pay enough for the basics of food, shelter, and clothing	40%	39%	34%	40%	35%	40%	44%	
Top Tier	Lack of affordable child care	33%	32%	25%	39%	30%	40%	44%	
Problems	Lack of affordable medical care	43%	47%	41%	51%	40%	35%	42%	7% +
(30% +	Inadequate public transportation	29%	33%	33%	38%	35%	38%	39%	
Major/ Moderate)	Lack of affordable dental care	33%	40%	34%	41%	34%	32%	36%	
Moderatej	Homelessness	14%	16%	15%	22%	28%	30%	34%	
	Drug abuse	26%	28%	25%	30%	24%	26%	33%	7%
	Lack of money for basic services	21%	25%	22%	31%	21%	23%	30%	7% +
	Lack of affordable legal services	24%	23%	24%	27%	20%	25%	30%	5%
	Mental illness or emotional problems	18%	19%	19%	27%	19%	27%	30%	
	Lack of services for elderly persons	20%	21%	18%	24%	15%	24%	29%	5%
	Crime in the community*	18%	19%	18%	25%	30%	26%	27%	
	Lack of services for people with disabilities	20%	19%	17%	24%	15%	21%	24%	
Second	Racial or ethnic discrimination	16%	16%	13%	17%	16%	17%	24%	7% +
Tier	Lack of parenting skills	28%	26%	27%	33%	23%	22%	23%	
Problems (20% up to	Lack of services for children and teens	21%	19%	19%	23%	17%	20%	23%	
<30% Major/ Moderate)	Hunger	16%	16%	18%	22%	21%	20%	22%	
,	Alcoholism	20%	21%	17%	23%	18%	19%	21%	
	People not speaking or understanding English well enough to function in society	34%	34%	31%	34%	31%	26%	21%	-5%
	Unemployment	30%	17%	44%	55%	35%	27%	20%	-7% -
Third Tier	Domestic violence	20%	21%	17%	22%	17%	19%	18%	
Problems (< 20% Major/ Moderate)	Violence in the community	18%	19%	18%	13%	16%	10%	15%	5%

Q2 For anything that you feel is a problem, please tell me if it is a minor, moderate or major problem.

Base=all respondents

*Crime in the Community and Violence in the Community were one question prior to 2011

A bold number followed by a + or - in the Change from 2015 column indicates a statistically significant difference when compared to 2015 data

Ratings for Problems	Experienced by the household	Not / Minor	Moderate	Major	Don't Know
	Not being able to find affordable child care	78%	11%	11%	0%
	Not having enough money to pay for housing	87%	7%	6%	0%
	Inadequate public transportation (household)	79%	14%	6%	0%
	Having a lot of anxiety, stress or depression which interferes with your daily life	84%	10%	6%	0%
	Not being able to find work that supports yourself or family	85%	9%	6%	0%
	Not able to pay for dental bills	90%	5%	5%	0%
Top Tier Problems	Finding it difficult to budget the money that's available	87%	8%	5%	0%
(10%+ Major/	Not being able to pay for medical insurance	88%	7%	5%	0%
Moderate)	Not being able to pay for the doctor bills	89%	7%	4%	0%
	Not being able to find affordable care for someone with a disability	86%	10%	4%	0%
	Not being able to find programs for someone with a disability	90%	8%	2%	0%
	Children or teens with emotional or behavior problems	87%	10%	2%	0%
	Not being able to find home health care or day care for an elderly person	90%	8%	2%	0%
	Living in housing that needs major repairs which you cannot afford	90%	6%	3%	0%
	Experiencing racial or ethnic discrimination	93%	4%	3%	0%
Second Tier	Not being able to pay for mental health counseling	91%	5%	3%	0%
Problems	Not being able to pay the utility bills	93%	4%	3%	0%
(5% up to < 10%)	Not being able to afford legal help	91%	5%	3%	0%
Major/Moderate)	Not having access to mental health counseling	93%	3%	3%	1%
	Not having enough money for food	95%	3%	3%	0%
	Not able to pay for prescriptions	93%	5%	3%	0%
	Not being able to get medical insurance	93%	5%	2%	0%

H1 For each one, please indicate if it is has been a major problem, moderate, minor problem, or not a problem at all for you or anyone in your household over the past several years.

Base=all respondents for most; respondents with children for those relating to childcare; respondents with non-English speakers for those relating to English; respondents with elderly/disabled people in their home for those relating to elderly/disabled

Ratings for Prol	blem Areas in the Community	2005	2007	2009	2011	2013	2015	2017	Change from
	Not being able to find affordable								2015
	child care	7%	9%	5%	7%	8%	21%	22%	
	Inadequate public transportation	11%	14%	18%	20%	22%	19%	21%	
	Having a lot of anxiety, stress or depression which interferes with your daily life	15%	16%	16%	20%	15%	17%	16%	
	Not being able to find work that supports yourself or family	15%	12%	11%	20%	17%	13%	15%	
	Not being able to find affordable care for someone with a disability	7%	9%	6%	4%	7%	8%	14%	6%
Top Tier	Not having enough money to pay for housing	10%	10%	11%	12%	12%	13%	13%	
Problems (10%+ Major/	Children or teens with emotional or behavior problems	7%	7%	7%	7%	7%	10%	12%	
Moderate)	Finding it difficult to budget the money that's available	12%	14%	16%	19%	19%	14%	12%	
	Not being able to pay for medical insurance		16%	16%	15%	15%	8%	12%	4%
	Not being able to pay for the doctor bills	15%	13%	14%	12%	14%	10%	11%	
	Not being able to find programs for someone with a disability	7%	9%	6%	5%	7%	8%	10%	
	Not able to pay for dental bills	15%	13%	14%	13%	14%	12%	10%	
	Not being able to find home health care or day care for an elderly person	5%	7%	6%	7%	6%	5%	10%	5%
	Living in housing that needs major repairs which you cannot afford	7%	7%	9%	11%	10%	6%	9%	3%
	Not being able to pay for mental health counseling	8%	8%	6%	9%	7%	7%	9%	
	Not being able to afford legal help	9%	10%	10%	11%	10%	8%	8%	
Second Tier	Experiencing racial or ethnic discrimination	5%	4%	7%	5%	7%	4%	7%	3%+
Problems	Not able to pay for prescriptions	15%	13%	14%	9%	10%	6%	7%	
(5% up to <10% Major/ Moderate)	Not being able to get medical insurance	17%	16%	16%	13%	13%	7%	7%	
	Not being able to pay the utility bills	7%	7%	6%	7%	10%	7%	7%	
	Not having access to mental health counseling	8%	8%	6%	9%	7%	7%	6%	
	Not having enough money for food	4%	7%	6%	7%	10%	6%	5%	

H1 For each one, please indicate if it is has been a major problem, moderate, minor problem, or not a problem at all for you or anyone in your household over the past several years.

*Speak and Read English fluently were one question prior to 2015

+Not enough money for food and Clothing were one question prior to $2015\,$

A bold number followed by a + or - in the Change from 2015 column indicates a statistically significant difference when compared to 2015 data

APPENDIX B

Weighting—Unweighted and Weighted Data Compared to Bellevue Population	2017 Human Needs Assessment (unweighted)	2017 Human Needs Assessment (weighted)	Bellevue Population*
Gender			
Male	51%	49%	51%
Female	49%	51%	49%
Age**			
18-34	23%	28%	31%
35-54	40%	38%	37%
55 Plus	37%	34%	32%
Household Size			
Single Adult	28%	26%	27%
Two or More Adults	72%	74%	73%
Children in Household			
None	70%	67%	69%
One or More	30%	33%	31%
Dwelling Type			
Single-Family	53%	55%	50%
Multi-Family	47%	45%	50%
Home Ownership			
Own	63%	62%	52%
Rent	36%	36%	42%
Income			
Less than \$25,000	5%	7%	12%
\$25,000-\$50,000	10%	9%	14%
\$50,000-\$75,000	11%	9%	14%
\$75,000 or Greater	74%	75%	60%
Race/Ethnicity (multiple responses)			
White Alone (Not Hispanic)	60%	61%	55%
Asian (with any other race)	28%	25%	34%
African American (with any other race)	3%	3%	3%
Other	4%	4%	5%
% Hispanic	3%	2%	7%
Years Lived in Bellevue			
0-3	29%	26%	
4-9	21%	16%	n.a.
10 or More	50%	58%	
Mean	15.3 yrs	15.4 yrs	
Language Spoken at Home			
English Only	54%	54%	60%
Other than English	46%	46%	40%

*Source for population figures: All data are 2011-2015 American Community Survey five-year estimates. **Note: Age was imputed for respondents who refused their age. Unless otherwise noted, all reported statistics are based on weighted base sizes. For reference, the table below provides both weighted and unweighted base sizes for each subgroup of respondents shown in this report.

Weighted Versus Unweig	ghted Base Sizes			
All Respondent	By Neighborhood			
2011 (n = 409)	Bel-Red (n = 2, nw = 2)			
2013 (n = 624)	Bridle Trails (n = 44, nw = 48)			
2015 (n = 423)	Cougar Mountain / Lakemont (n = 32, nw = 36)			
2017 (n = 484)	Crossroads (n = 31, nw = 35)			
	Downtown (n = 75, nw = 66)			
Groups of Respondents	Eastgate (n = 17, nw = 20)			
Those Who Feel There are Unmet Needs in Bellevue	Factoria (n = 8, nw = 7)			
2017 (n = 54, nw weighted = 49)	Lake Hills(n = 61, nw = 58) Newport (n = 30, nw = 33)			
Respondents Who Rate the Availability of Help Low (<4) 2017 (n = 36, nw weighted = 33)				
Households with Children	Northeast Bellevue (n = 37, nw = 42)			
2017 (n = 146, nw weighted = 159)	Northwest Bellevue (n = 40, nw = 40)			
Speak Language Other than English	West Lake Sammamish (n = 15, nw = 19)			
2017 (n = 225, nw weighted = 223)	Somerset (n = 29, nw = 27)			
Experienced 1 or More Household Problems 2017 (n = 233, nw weighted = 224)	West Bellevue (n = 23, nw = 22)			
Someone in Household Looked for Help in Past 2 Years	Wilburton (n = 15, nw = 14)			
2017 (n = 87, nw weighted = 87)	Woodridge (n = 16, nw = 16)			
Respondents who Found the Help they Needed				
YES (n = 29, nw weighted = 31) FOR SOME PROBLEMS (n = 43, nw weighted = 41)				

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Count of Households with Non-English Speakers - Unweighted data - N's shown

	Su	rvey Contact	Method	
	Landline	Cell Phone	Online	Total
Participant speaks a language other than English	7	28	143	178
Someone else in the household speaks a language other than English	9	23	89	121
Household where anyone speaks a language other than English (note, that this does not equal the sum of the above two rows as it is possible for both the participant and a second person to speak more than one language)	12	34	179	225
No one in the household speaks a language other than English (English only household)	44	33	182	259

Count of Languages Spoken in Household – Unweighted data – N's shown

	Survey Contact Method				
	Landline	Cell Phone	Web	Total	
English	9	18	105	391	
Afrikaans	3	1	33	37	
Aleut	1	4	17	22	
Arabic	1	3	17	21	
Armenian	1	5	15	21	
Bulgarian	0	2	14	16	
Cambodian	0	0	15	15	
Chinese	0	1	8	9	
Cantonese	0	0	9	9	
Farsi	0	0	8	8	
Filipino	1	2	5	8	
French	0	0	7	7	
German	0	1	6	7	
Hebrew	0	0	6	6	
Hindi	0	0	5	5	
Indian	0	2	3	5	
Italian	1	1	3	5	
Japanese	0	1	3	4	
Kannada	1	0	3	4	
Korean	0	1	3	4	
Lao	0	1	2	3	
Mandarin	0	1	1	2	
Norwegian	0	0	2	2	
Polish	0	1	1	2	
Other (please describe)	0	2	6	8	

APPENDIX C

Phone/online changes from 2015 to 2017

In 2017, the questionnaire was shortened to reduce respondent burden and reduce telephone costs. The revisions were primarily focused on three areas: reduction in the number of items asked regarding problems perceived to exist in the community, problems experienced by households, and the Community Support section.

	Problems Perceived to Exist in the Community
Q2_14	Illiteracy: [IF NECESSARY that is, people not reading or writing well enough to function in society.]
Q2_19	Shortage of recreational facilities
Q2_20	Shortage of recreational programs
Q2_26	Teens dropping out of school
Q2_28	Effects of gang activities
Q2_30	Poor quality public education [IF NEEDED: K - 12th grade]
Q2_34	Lack of quality childcare
Q2_35	People not knowing how to manage their personal finances.
	Questions asked only of households with non-English speakers
H1_3	Not having enough money for clothing
H1_15	Not being able to afford recreational activities
H1_24	Not being able to afford higher education
H1_44	Not having enough individual support as a parent or caregiver to children
H1_45	Not having enough community support as a parent or caregiver to children
H1_50	Not being able to speak English fluently
H1_51	Not being able to read English fluently
H1_64	Not being able to find respite care or other types of support in caring for an elderly person or a person with disabilities. [IF NEEDED: Respite care would include giving a caregiver a break by having someone else take care of the elderly person or the person with disabilities for a while.]
Con	nmunity Support (to what degree you feel your community supports the needs of each of the following population groups.)
D1_1	Young children under 5 years of age?
D1_2	Children 5 to 9 years old
D1_3	Preteens 10 to 14 years old
D1_4	Teens 15 to 17 years old
D1_5	Older Adults (Seniors)
D1_6	Individuals of diverse racial or ethnic backgrounds
D1_7	Individuals with disabilities
D1_8	Individuals with diverse sexual orientations
D1_9	Low-income individuals
D1_10	Low-income families

APPENDIX D

Address-Based Sampling

In the past, a random-digit dialing (RDD) telephone survey was used. Strict quotas were used to ensure representation of men and women, different age groups, and residents of multi-family versus single-family dwelling types was roughly proportionate to their actual incidence in the population. While RDD telephone survey research continues to be used widely, it has come under increased scrutiny due to the proliferation of cell phones as well as declining response rates. This has called into question the representativeness of surveys conducted using traditional RDD samples. Estimates today are that as many as 46 percent of all households in King County no longer have a landline telephone and rely strictly on a cell phone or other mobile device to make and receive calls. An additional 17 percent of households have both landline and cell phone numbers but rely primarily on their cell phones.

To address the high incidence of cell phone–only households or households whose members primarily use cell phones, a major methodological change to address-based sampling (ABS) was implemented beginning with the 2011 Human Needs Assessment. In 2017 the ABS methodology was enhanced with the introduction of e-mail addresses to increase response rates and reduce survey costs.

The sample frame was composed of a list of all addresses in Bellevue—as defined by census block groups including those indicating that post office boxes are the only way they get mail. This list was then matched against a comprehensive database to determine if the household had a matching landline or cell phone number. Additionally, e-mail addresses were appended where possible.

- a. If no matching phone number was found, the household was sent a letter signed by the city manager asking them to complete the survey online or by calling a toll-free number.
- b. If an e-mail address was found, the household was sent an e-mail inviting them to complete the survey online or by calling a toll-free number. Non-responders were contacted by phone.
- c. If a matching phone number was found, the household was called and asked to complete the survey by phone.
- d. In order to obtain a representative sample of multi-family households the ABS sample was appended with a dwelling-type indicator (single vs. multi-family home) and addresses marked as multi-family were over-sampled during the mailing of the invitations.

Distribution of Landline versus Cell Phone Households

		Unwei	ghted			Population			
	Cell Sample	Landline Sample	Mailed Sample	Total Sample	Cell Sample	Landline Sample	Mailed Sample	Total Sample	Estimate (King County)³
Only have a cell	44%	13%	68%	47%	56%	8%	72%	47%	46%
Primarily use a cell	25%	13%	17%	18%	22%	11%	16%	19%	17%
Use landline and cell	22%	48%	10%	24%	17%	51%	8%	23%	21%
Primarily landline	8%	21%	3%	10%	5%	22%	2%	8%	10%
Only have a landline	1%	6%	1%	2%	0%	8%	1%	2%	5%

Additionally, as the table below indicates, residents without landline numbers (those invited to take the survey online) are demographically different from those contacted via telephone.

Respondent Demographics by Phone versus Web Sample (unweighted)

Gender					House	hold Type				Age	
	Cell Sample	Landline Sample	Mailed Sample		Cell Sample	Landline Sample	Mailed Sample		Cell Sample	Landline Sample	Mailed Sample
Male	60%	45%	50%	Single Family	73%	77%	37%	18 to 34	18%	1%	31%
Female	40%	55%	50%	Multi- Family	27%	22%	62%	35 to 54	45%	20%	46%
								55+	37%	79%	23%

The passage below from Centris Marketing Intelligence sums up a few of the key advantages of using address-based sampling.

Recent advances in database technologies along with improvements in coverage of household addresses have provided a promising alternative for surveys that require representative samples of households. Obviously, each household has an address and virtually all households receive mail from the U.S. Postal Service (USPS)... Given the evolving problems associated with telephone surveys on the one hand, and the exorbitant cost of on-site enumeration of housing units in area probability sampling applications on the other, many researchers are considering the use of [USPS databases] for sampling purposes. Moreover, the growing problem of non-response—which is not unique to any individual mode of survey administration—suggests that more innovative approaches will be necessary to improve survey participation. These are among the reasons why multi-mode methods for data collection are gaining increasing popularity among survey and market researchers. It is in this context that address-based sample designs provide a convenient framework for an effective administration of surveys that employ multi-mode alternatives for data collection.

APPENDIX E

		018 Needs Update nity Conversations
Goal Area	Issue/Population	Group/Date
Supportive	Children birth-5	
Relationships	Families and children	Kinship Care Support Group 3/20/17
Education and Job Skills to Lead an Independent Life	Adults and children	 Bellevue College Faculty and Staff 5/30/17 Panel at Human Services Commission: Early Learning/Child Care 4/4/17
Food to Eat and a Roof Overhead	All ages	 City of Bellevue Neighborhood Outreach Staff Meeting 4/18/17 City of Bellevue Community Centers Staff Meeting 5/15/17 Congregations for the Homeless Men's Rotating Shelter 5/15/17 Sophia Way Day Center 3/22/17 Bellevue Downtown Library Staff Meeting 5/2/17 City of Bellevue Code Compliance Staff Meeting 5/3/17 City of Bellevue Parks Rangers Staff Meeting 6/6/17
	Adults	 Bellevue Fire Cares 1/17/17 High Utilizers Group 3/8/17
	Children and Youth	Bellevue School District Nurses 9/28/16
	Veterans	King County Veterans Consortium 5/11/17
	Refugees and Immigrants	 India Association of Western WA 3/16/17 Promotores Event 4/29/17
	Diversity	Bellevue Diversity Advisory Network 4/25/17
	Diversity Refugees and Immigrants	Bellevue School District Asian Pacific Islander Committee
	Refugees and Immigrants	Cultural Navigators 4/25/17
	LGBTQ	Panel of Providers at Human Services Commission 3/7/17
	Youth	Youth Link Board Meeting 5/10/17
Specific Populations	Children and Youth	Bellevue School District Family Connections and McKinney Vento Staff 5/15/17 Odle Middle School
	Older Adults	 Eastside Neighbors (Village) 4/21/17 Bellevue Network on Aging Meeting on the Vets and Human Services Levy Renewal 3/2/17 Asian Senior Concerns Foundation 5/6/17 Evergreen Court Resident Council 5/3/17 North Bellevue Community Center Tech Group for Older Adults 4/25/17
	People with Disabilities	 Resource Fair Highland Community Center 4/29/17 HERO House 3/9/17 Panel at Human Services Commission: Providers of Agencies that Serve People with Disabilities and the City of Bellevue Supported Employment Team 6/20/17

APPENDIX F

Key Informant Interviews 2017-2018

Area of focus	Contact	Date
Older Adults	Phyllis Smilen Bellevue Network on Aging Member	1/19/17
Older Adults	Desiree Leigh Bellevue Network on Aging Member	2/15/17
Refugees and Immigrants in Bellevue School District	Chhoun Mey Melissa King	3/22/17
Basic Needs/Refugees and Immigrants	Edi Flores Youth Eastside Services	4/18/17
Basic Needs	Barb Tuininga City of Bellevue Mini-City Hall	5/24/17
School Aged Children and Youth	Jeannie Anderson City of Bellevue Wrap Around Services Program	6/5/17
School Aged Children and Youth	Cecilia Vasquez-Martinez City of Bellevue Wrap Around Services Program	6/8/17

Faith Community Interviews

Congregation	Contact	Date
Bellevue Presbyterian	Tom Brewer	5/15/17
St. Madeleine Sophie Catholic Church	Ann LaBeck	5/24/17
St. Margaret's Episcopal Church	Christina Jullard	5/25/17

APPENDIX G

Health Care Glossary Publicly Funded Programs Overview

- **Medicare:** Individuals qualify for Medicare benefits if they are 65 years old, collecting Social Security (SS) payments, eligible for SS, or worked a Medicare eligible job.
- **Medicaid:** Medicaid provides medical coverage for people with disabilities, low-income elderly and children and their caretakers and as a result of the Affordable Care Act, adults who have incomes up to 138% of the federal poverty level (\$23,050 for a family of four in 2013).
- Washington Apple Health: In the past, the state's Basic Health Plan covered low-income individuals (200% of the federal poverty level). Beginning in October 2013 people who are uninsured age 19-64 whose incomes are too high to qualify for Medicaid have the opportunity to enroll in Medicaid (called "Washington Apple Health") due to expanded income guidelines of up to 138% of the federal poverty level, compared to 100% of the federal poverty level. Individuals may also enroll in a subsidized health plan by accessing the new online marketplace, Washington Healthplanfinder (http://wahealthplanfinder.org).
- Apple Health for Kids: Free for children in families below 200 percent of the Federal Poverty Level. Families above that level may be eligible for the same coverage at low cost: \$20 a month per child for families below 250 percent of poverty and \$30 a month per child for families below 300 percent of poverty. (The premiums max out at two per family, so no family would pay more than \$60 a month in premiums.) Apple Health for Kids is available to both citizens and non-citizens who are 18 or younger. During the 2013 State Legislative session, an earlier decision to charge non-citizen families a higher premium to enroll their children in this program was reversed, so now the premiums are the same for citizen or non-citizen families.

Basic Definitions

- **Infant Mortality:** The infant mortality rate is measured for a given year as the number of infants who died in the first year of life per 1,000 live births.
- **Overweight/Obese:** Defined as having a Body-Mass Index (25) of greater than 25. The BMI is calculated using this formula: (Weight in Pounds/(Height in inches x Height in inches)) x 703.
- Prevalence: the number of persons currently with the condition.
- Incidence: the number of persons newly diagnosed with the condition.
- **Rolling Averages:** For populations of small size, small changes in the number of events will cause the rate to fluctuate substantially from year to year. To help stabilize the rate and observe the time trend of an event, rates are sometimes aggregated into "rolled" averages, such as in three or five year intervals.
- **Rate:** Rates in this report are usually expressed as the number of events per 1,000 population per year, unless otherwise specified.

APPENDIX H

2015 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family/household	Poverty guideline
1	\$11,770
2	\$15,930
3	\$20,090
4	\$24,250
5	\$28,410
6	\$32,570
7	\$36,730
8	\$40,890
For families/households with more than 8 persons, add \$4,160 for each additional person	

2016 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family/household	Poverty guideline
1	\$11,880
2	\$16,020
3	\$20,160
4	\$24,300
5	\$28,440
6	\$32,580
7	\$36,730
8	\$40,890
For families/households with more than 8 persons, add \$4,160 for each additional person	

2017 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family/household	Poverty guideline
1	\$12,060
2	\$16,240
3	\$20,420
4	\$24,600
5	\$28,780
6	\$32,960
7	\$37,140
8	\$41,320
For families/households with more than 8 persons, add \$4,160 for each additional person	

SOURCE: Federal Register: The Daily Journal of the United States Government



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