Self Help Inc

Programs & Resources to Help Families & Individuals Thrive

Community Assessment Report and 2022-2023 Strategic Plan

Covering the Greater Brockton Area

and Select Communities within Bristol, Norfolk, and Plymouth Counties

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TABLE OF CONTENTS

Executive Summary and Board Authorization 3

Agency Mission, Vision and Description 4

COVID-19 Impact and Response 6

Community Assessment Report

Community Assessment Process and Methods 7

Community Profile 9

Community and County Summary 9

City of Brockton 13

City of Attleboro 14

Town of Randolph 15

Town of Stoughton 18

Community Assessment Findings 20

COVID-19 Impact Assessment 28

Community Assessment: Key Findings and Need Statements 35

Internal Assessment Report

Internal Assessment Process 36

Internal Assessment: Key Findings 37

2022-2023 Strategic Plan

Needs, Goals and Specific Objectives 42

Plan Implementation and Monitoring 48

EXECUTIVE SUMMARY AND BOARD AUTHORIZATION

This ***Community Assessment Report and 2022-2023 Strategic Plan*** (CARSP) is the result of a comprehensive community and internal needs assessment and strategic planning process which took place between Summer 2019 and Spring 2021, and was led by Self Help Inc., a Community Action Agency serving 31 cities and towns within Bristol, Norfolk and Plymouth Counties in Massachusetts.

The community assessment process involved Self Help Inc. staff and Board of Directors members along with a number of key stakeholders within the communities the agency serves, and included the collection and analysis of a wide range of quantitative and qualitative data on these communities and its residents, particularly those living with low incomes, and on the major issues and needs they face. The assessment resulted in a rich set of information about the population Self Help Inc. targets for service, and in the development of individual, family and community-level goals and strategies to meet the top needs facing these communities.

The internal assessment resulted in additional information on the strengths and challenges of the agency, and in the development of agency-level goals.

The CARSP includes several important elements designed to describe Self Help Inc., the major issues faced by the agency and the communities it serves, and the agency's plan to address those issues in the coming years. These elements include:

- ***Agency Mission, Vision and Description:*** Self Help's new Board-approved mission statement and vision, and a description of Community Action and the agency's history and current services
- ***COVID-19 Impact and Response:*** Brief description of how the agency responded to and was impacted by the COVID-19 pandemic during the course of developing the CARSP.
- ***Community Assessment Process and Methods:*** Description of the process, methods and tools used to assess the service area.
- ***Community Profile:*** Data and analysis on the communities served by Self Help Inc., including poverty data relevant to age, gender, and race/ethnicity and both qualitative and quantitative data highlighting major issues facing these communities.
- ***Community Assessment Findings:*** Summary of data and analysis resulting from the community assessment process.
- ***COVID-19 Impact Assessment:*** Specific data and analysis related to the impacts of the COVID-19 pandemic on the communities served by Self Help Inc. over the course of developing the CARSP.
- ***Community Assessment: Key Findings and Need Statements:*** Summary of the key findings of the community assessment and the identified priority needs within the service area, specified at the individual/family and community levels.
- ***Internal Assessment Process:*** Description of the process, methods and tools used to assess the agency, respond to the *Community Assessment Report* and develop the *2022-2023 Strategic Plan*.
- ***Internal Assessment: Key Findings:*** Summary of data and analysis resulting from the internal assessment process.
- ***Needs, Goals and Specific Objectives:*** The agency's plan to address the major individual/family, community and agency level needs uncovered through the community and internal assessments.
- ***Plan Implementation and Monitoring:*** Description of how the *2022-2023 Strategic Plan* will be monitored, evaluated, and implemented, and the next steps for the agency.

Board Authorization

I, Raymond Yancey, Board President, certify that the Self Help Inc. Board of Directors approved this *Community Assessment Report and 2022-2023 Strategic Plan* on May 24, 2021, and authorize Self Help Inc. to begin implementation of this plan on or before October 1, 2021.

Raymond Yancey, Board President, Self Help Inc.

AGENCY MISSION, VISION AND DESCRIPTION

OUR MISSION: To foster healthy, inclusive communities through programs and resources that empower residents to access equitable opportunity, achieve stability, and thrive*

Self Help aspires to be a recognized community leader and partner in efforts to advocate for and progress toward an end to poverty. We envision our service area as a place where people in need feel supported, respected, and empowered to access equitable services, resources, and opportunities.

**Approved by the Self Help Inc. Board of Directors on April 26, 2021*

Self Help Inc. (SHI) is a non-profit 501 (c)(3) organization founded in 1965 as a community-based, multi-service agency and part of a network of more than 1,000 Community Action Agencies serving economically disadvantaged populations in cities, towns, and counties across the nation. This network got its start in 1964 with President Lyndon Johnson's declaration of a "War on Poverty" and the signing of the Economic Opportunity Act. The services and programs provided by Community Action Agencies are made possible thanks to core Federal funding provided through the Community Services Block Grant. Agencies are able to use this core funding, which in Massachusetts is distributed and overseen by the Commonwealth's Department of Housing and Community Development, to leverage additional public and private support.

For over 55 years, SHI has worked toward its mission by providing comprehensive health and human services in severely economically depressed areas located within Bristol, Norfolk, and Plymouth Counties in Massachusetts. SHI has worked to meet the changing needs of this region through programming that addresses both emergency needs, such as food and shelter for the newly poor, the recently unemployed, and the homeless, as well as long-term needs, focusing on empowering and assisting individuals and families to enhance their economic mobility and quality of life through adequate health care, nutrition, education, employment, socialization skills, and community development initiatives.

Where We Serve

Abington
Attleboro
Avon
Bridgewater
Brockton
Canton
Dedham
E. Bridgewater
Easton
Foxboro
Franklin
Hanson
Holbrook
Mansfield
Middleboro
Needham
Norfolk
N. Attleboro
Norton
Norwood
Plainville
Randolph
Raynham
Rockland
Sharon
Stoughton
Walpole
W. Bridgewater
Westwood
Whitman
Wrentham

Self Help Inc. Current Programs

Coordinated Family and Community Engagement

The goal of the Coordinated Family and Community Engagement program is to provide families with children 0-8 with access to locally available comprehensive services and supports that engage and strengthen families, in order to promote optimal child development and bolster school readiness. The program also looks to increase parent engagement in their child's learning, reduce parental isolation, and to promote knowledge of parenting through skill development and education. The CFCE parent-child playgroups are also geared toward ensuring children are ready for Kindergarten. The CFCE program offers families free parent-child community-based playgroups, literacy groups, STEM/STEAM groups, individual referrals, parent consultation and resources, parent workshops, Ages and Stages Developmental Screenings, and home visits to help improve family functioning.

Head Start

Head Start is a comprehensive early childhood education, health, nutrition, and family services program focused primarily on pre-school children ages 2.9-5 and their families living with low incomes. Self Help Head Start provides high quality education, a USDA sponsored nutrition program, developmental/behavioral and health/dental screenings, physical health and wellness activities for children and caregivers, nutrition classes for caregivers including healthy food to take home, a child development certificate class for parents/caregivers, and home visits to help improve home environments.

ParentChild+

In January 2020 Self Help implemented ParentChild+ for the communities of Randolph and Holbrook, a national researched-based literacy program which works with parents and their two- and three-year-old children in one-on-one home and virtual visits. SHI has contracted with two trained community-based Early Learning Specialists to visit each at-risk family's home twice a week for 30 minutes to help the family learn creative ways to read and play with their child, and learn about literacy and child development, for a minimum of 23 weeks per year over a two-year cycle. Families are provided a free high-quality book or educational toy each week, receiving at least 46 new books and toys during participation. The goal of the program is to help families be their child's first and best teacher and to prepare the child for school success.

Food Assistance

Self Help operates the Attleboro Food Pantry serving the towns of Attleboro, North Attleboro, Norton, Mansfield and Plainville. During each visit families and individuals receive food for 3-4 days, or approximately 15-20 meals, and are also provided a list of other food banks and soup kitchens in the surrounding areas. Beginning in 2020, Self Help enhanced its Food Assistance programming by offering SNAP (Supplemental Nutrition Assistance Program) Application Assistance and by coordinating and providing supplemental food, as well as basic essentials such as diapers, to food pantries operated by other local providers, to help meet the increased need for food assistance resulting from the COVID-19 pandemic.

Energy Programs

Self Help's Energy Programs are designed to provide relief to households most vulnerable to high home heating costs. The Fuel Assistance program helps low-income families and individuals pay for and lower the cost of heating their home in winter. The Energy Conservation program helps stretch participants' energy dollars by providing free upgrades for insulation and weatherization, replacement of energy-inefficient appliances, as well as heating system repairs and replacements for income-eligible households.

Housing Assistance

The already critical need for affordable housing has been amplified by the COVID-19 crisis. Self Help works with local housing providers and partners to connect individuals and families with programs, services, and resources to help them access safe, affordable, permanent housing options. New in 2020 in response to increasing need impacted by COVID-19, Self Help's Rental Assistance program provides payment of rent arrears directly to participants' landlords to assist them in avoiding eviction.

Tax Assistance

Self Help's Volunteer Income Tax Assistance (VITA) program runs seasonally during the tax season and is staffed by IRS-certified volunteers providing qualified participants with free basic and advanced income tax return preparation with electronic filing. The program aims to help participants maximize their tax returns, access credits available to them, develop enhanced financial literacy, and increase their savings.

Hand-in-Hand Case Management

In 2020 Self Help began offering the Hand-in-Hand Case Management program to elders who are home-bound and experiencing social isolation. Services are provided by a case manager at the client's home, in an easily accessible community space, and/or virtually. The case manager conducts Family Strengths and Needs Assessments with participants and provides assistance that may include referrals, help with applications for additional services such as the Supplemental Nutrition Assistance Program, access to SHINE health insurance counseling services, accompanying clients to appointments, advocacy, organizational help, and socialization activities. Additionally, the case manager for this program also provides community outreach for all Self Help services and programs, to increase the organization's presence and impact in all communities we serve.

COVID-19 IMPACT AND RESPONSE

Statewide Impact

During 2020 the world faced a global pandemic, the effects of which will continue into the foreseeable future. The coronavirus crisis had sweeping impacts on Massachusetts' residents' lives. Stay-at-home orders and their impact on the economy have led to job loss and interrupted income; reduced access to food; and housing instability. They have also significantly interfered with child care and educational systems and triggered negative physical and emotional health outcomes for many. Not surprisingly the impact has been felt disproportionately along socio-demographic lines, with low-income and minority populations as well as women bearing the greatest burden. Since the start of the crisis, Massachusetts Community Action Agencies have reported increases in people seeking services for emergency food and critical items like diapers, masks and cleaning supplies, housing and homelessness prevention, fuel assistance, health and wellness, and access to public benefits. In order to meet increased needs, stabilize vulnerable residents and help move them back to economic stability, CAAs quickly expanded, adapted, or created new strategies. Many pivoted to provide longstanding services remotely. All developed new or adapted program models to keep with social distancing guidelines. All leveraged existing community partnerships or created new ones to help meet increased need. And finally, since CAAs are trusted to reach and impact the most vulnerable residents in their communities, most either established or were called on by local funders to administer coronavirus relief funds.

Impact on Self Help Operations and Services

In response to the worsening coronavirus pandemic, in March 2020 Self Help temporarily closed its physical locations and ceased all face-to-face service provision. The organization and our programs quickly pivoted to remote operations and, where possible, began providing services virtually. While some services were able to resume in-person operation with new health and safety protocols in place, others will remain virtual into the foreseeable future as the longer-term impacts of the pandemic remain uncertain.

Impact on Community Assessment

Every three years, Self Help Inc. and all of Massachusetts' 23 Community Action Agencies conduct comprehensive assessments of the most pressing needs within their respective service areas and use this information to plan strategic directions and goals for the next three years. The process resulting in this current *Community Assessment Report* began in Spring 2019 and was intended to be completed in July 2020 as part of Self Help's *2021-2023 Community Assessment Report and Strategic Plan*. When the nation shut down in March 2020 due to the worsening global coronavirus pandemic, Self Help had completed the majority of our community assessment process and had begun analyzing results and identifying the top needs within our service area. The results of this process are included in this report. However, ***much of the data collected was relevant to a pre-pandemic world. Where possible, information has been updated with newer data which incorporates the impact of COVID-19. Updates are noted. In addition, the* COVID-19 Impact Assessment *on Page 27 includes a summary of information related to the impact of COVID-19 on the most pressing needs within the state and service area, as well as any new emerging or increased needs that have resulted from the pandemic.***

Community Assessment Report

COMMUNITY ASSESSMENT PROCESS AND METHODS

Beginning in Spring 2019 and continuing throughout 2020 (following an extension of the process due to COVID-19), Self Help undertook a comprehensive assessment of the needs and resources within our communities and our agency. A joint Planning Committee made up of program staff, leadership staff, and Board of Directors members was formed to guide the process. Assessment methods are described below.

Community Needs Survey: Working with data experts from information technology consultancy SMC Partners, alongside a statewide network of strategic planning staff from all 23 Massachusetts Community Action Agencies, Self Help developed a community survey to assess the needs within our service area. The survey was available in electronic and print form and in multiple languages.

- **16,063** mobile phone numbers of current and past Self Help customers and community members were texted with the online survey link on October 29, 2019 (4,618 bounces).
- **3,717** mobile phone numbers were texted again on December 5, 2019, targeting towns where we had received little or no response (42 bounces).
- **3,000** printed surveys were distributed into the community by Planning Committee members and Board of Directors members between September 16 and December 2, 2019. Community partners* were contacted directly to explain and promote the community assessment.
- **13,707** customer and community partner* email addresses were contacted about the community assessment on October 30, November 5, and December 5, 2019 (2,027 bounces).
- All Self Help staff and Board members were informed of the community assessment through email, an agency-wide training day on October 1, 2019, and through Board, Program Manager, and Planning Committee meetings and asked to complete, distribute, and promote the community survey.
- **1,637** community needs surveys were completed by the deadline of January 15, 2020.

***Community Partners:** Self Help enlisted the support and assistance of a long list of valued community partners to promote the community assessment and gather critical input. These partners, representing both the private and public sectors, included: adult education programs, behavioral and mental health services, city/town officials and staff, childcare centers and preschools, disability services, domestic violence services, elder services, healthcare services, employment/workforce development organizations/departments, faith-based organizations, financial institutions, higher education institutions, housing programs, immigrant groups/services, libraries, municipal emergency services, neighborhood groups, public schools, senior centers, service provider collaboratives, special education services, substance use services, veterans services, YMCAs, and youth programs.

Community Partners Follow-up Questionnaire: Following analysis of community survey responses as well as secondary data sources, the Self Help Planning Committee developed a follow-up questionnaire for partners to dive deeper into the most pressing needs on community members' minds.

- **207** community partners were emailed on February 26, 2020 and asked to complete the follow-up questionnaire.
- **20** questionnaires were completed by the deadline of March 16, 2020.

Secondary Data Analysis: During Fall/Winter 2019, a set of core data elements for all Massachusetts cities and towns was developed by data experts from information technology consultancy SMC Partners, with the guidance of the statewide network of strategic planning staff from all 23 Massachusetts Community Action Agencies. The resulting dataset drew from a range of sources including but not limited to: the American Community Survey of the U.S. Census Bureau, U.S. Census, Kids Count Data Center, Massachusetts Department of Public Health, Massachusetts Department of Unemployment Assistance, MIT Living Wage Calculator, Feeding America, County Health Rankings, UDS Mapper, and the U.S. Department of Housing and Urban Development. In addition to this dataset, Self Help also analyzed additional local sources such as data from community health needs assessments and police departments.

Data elements analyzed included:

- **Population/Demographics**
- **Poverty/Income**
- **Employment**
- **Children/Youth**
- **Education**
- **Housing/Homelessness**
- **Health**
- **Transportation**
- **Crime**

Internal Assessment of Community Needs:

- **Customer satisfaction survey:** Self Help collects customer satisfaction information on an ongoing basis via surveys at each of our sites and through our website and Facebook page. Survey results helped inform our assessment.
- **Staff training day and survey:** Self Help held an all-staff training day on October 1, 2019 at which employees were introduced to the community assessment and participated in assessment/planning activities. All attendees were asked to complete a staff survey which looked at the agency's needs, strengths, and areas for improvement. **120** surveys were completed.
- **Board of Directors discussions:** Throughout the assessment, the process, progress, and results of the community assessment were standing discussion items at monthly Self Help Board of Directors meetings.

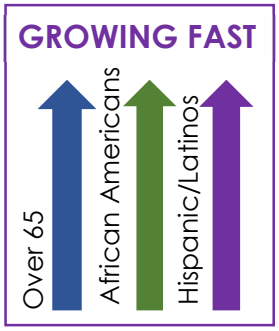
COVID-19 Impact Assessment: As previously stated, when the nation shut down in March 2020 due to the worsening global coronavirus pandemic, Self Help had completed the majority of our community assessment process via the above methods and had begun analyzing results and identifying the top needs within our service area. Between March 2020 and October 2020, in order to assess the impact of COVID-19 on preexisting needs as well as identify any new emerging or increased needs resulting from the pandemic, Self Help collected and analyzed additional primary and secondary data from a variety of sources. Examples include: requests for services received by Self Help, weekly discussions among Self Help program and leadership staff around COVID-19 impact on services and operations, Massachusetts Association for Community Action (MASSCAP) Addressing Food Insecurity Survey, MASSCAP Current Agency Activities During COVID Survey, Pioneer Institute COVID Unemployment Tracker, MassBudget COVID-19 in Massachusetts Reports, Boston Indicators COVID Community Data Lab, UMass Donohue Institute Data Dash, COVID-19 U.S. Census Data Hub, U.S. Census Household Pulse Survey, Massachusetts Department of Health Dashboard, Massachusetts Immigrant and Refugee Advocacy Coalition COVID-19 Immigrant Community Impact Survey, Massachusetts Housing Partnership Center for Housing Data, Metropolitan Area Planning Council COVID-19 Layoff Housing Assistance by Municipality, MA 2-1-1 Counts Top Service Requests, The COVID Tracking Project, CARES Engagement Network COVID-19 Tools and Resources, Department of Unemployment Assistance – Economic Research, and Coalition on Human Needs COVID-19 Tracking Hardship. ***The COVID-19 Impact Assessment can be found on Page 27.***

COMMUNITY PROFILE

Unless otherwise noted, this Community Profile includes data that was available through March 2020. Notes are provided where data has been updated since March 2020 to incorporate the impacts of the COVID-19 pandemic. Also see COVID-19 Impact Assessment on Page 27.

Self Help serves the following communities within Bristol, Norfolk, and Plymouth Counties in southeastern Massachusetts: Abington, Attleboro, Avon, Bridgewater, Brockton, Canton, Dedham, East Bridgewater, Easton, Foxboro, Franklin, Hanson, Holbrook, Mansfield, Middleboro, Needham, Norfolk, North Attleboro, Norton, Norwood, Plainville, Randolph, Raynham, Rockland, Sharon, Stoughton, Walpole, West Bridgewater, Westwood, Whitman, and Wrentham. ***The four communities within Self Help's service area in which a majority of those served by the agency reside are the city of Brockton, city of Attleboro, town of Randolph, and town of Stoughton.***

Community and County Summary



The Community and County table below shows that all counties served by Self Help saw slower growth than the state or nation, but saw ***tremendous growth among African Americans, those identifying as Hispanic/Latino, and the elderly.*** And yet, ***blacks and Hispanic/Latinos had significantly higher poverty rates and lower incomes*** than whites, increasing the need for critical services and programs throughout our service area. With huge increases among the 65-74 age group, our communities must also be prepared to meet the exponentially growing needs of seniors.

Between the three counties, Norfolk saw the highest incomes and education levels, the best health outcomes, and lower unemployment. ***Bristol County showed the poorest health outcomes, with child food insecurity at 13.7%*** and higher than the state (11.7%). At 10.6% Bristol County also had the highest poverty rate of the three, though Brockton in Plymouth County exceeded that rate considerably at 15.6%. ***Opioid addiction continues to be a concern throughout our service area***, particularly in Brockton and Attleboro which saw opioid-related overdose deaths of 49 and 26 respectively.

NOT ENOUGH TO GET BY

$$$ Living wage in MA: $36.50

$ Minimum wage in MA: $12

Massachusetts generally and Self Help's service area is a very expensive place to live compared with much of the country, and sees an enormous gulf between those on top and the thousands of people struggling to make ends meet. While the federal minimum wage is $7.25 per hour, in Massachusetts it is $12.00 per hour and this still ***doesn't come anywhere close to being a living wage that will cover basic expenses in our three counties***.

Cost of housing is a major struggle for Massachusetts residents, who pay ***far more in monthly housing costs than the U.S.*** median and have higher percentages of renters paying more than 30% of their income on housing. With housing occupancy rates also significantly higher in Self Help's service area than across the state and nation, many of our most vulnerable people have nowhere to go. Those who do own homes face the inability to afford maintenance and repairs, with a ***much older housing stock in our region than nationally***.

~50% of renters pay more than 30% of income on housing

Unless otherwise noted, data included in the following chart is sourced from the 2018 American Community Survey.

Population	Brockton	Attleboro	Randolph	Stoughton	Plymouth County	Bristol County	Norfolk County	MA	U.S.
Total	95,426	44,548	33,924	28,534	518,132	564,022	705,388	6,830,193	322,903,030
Change since 2010	Up 1.7%.	Up 2.8%	Up 7.1%	Up 6.5%	Up 4.5%	Up 2.8%	Up 4.9%	5.5%	6.2%
White	39.8%	88.2%	38.1%	74.5%	82.7%	84.0%	76.6%	78.5%	72.7%
White change since 2010	Down 20.4%	Up 2.1%	Down 6.9%	Down 6.5%	Negligible	Down 3.7%	Down 2.6%	Up 1.3%	Up 4.5 %
Black	42.3%	3.3%	40.6%	14.4%	10.0%	4.4%	7.5%	7.5%	12.7%
Black change since 2010	Up 22.9%	24.6%	Up 11.3%	Up 58.8%	Up 21.4%	Up 27.5%	Up 30.7%	Up 20.9%	Up 7.7%
Hispanic/Latino	11.1%	7.2%	9%	4.2%	4.1%	8.4%	4.8%	11.6%	17.8%
Hispanic/Latino change since 2010	Up 13%	Up 31.3%	Up 60.6%	Up 107.7%	Up 34%	Up 42.4%	Up 51.7%	Up 34.9%	Up 20.5%

Population	Brockton	Attleboro	Randolph	Stoughton	Plymouth County	Bristol County	Norfolk County	MA	U.S.
Median age	35.6	40.9	41.6	43.9	43.0	40.9	40.7	39.4	37.9
Change since 2010:	Up 33.4%	Up 27.6%	Up 81.9%	Up 46.9%	Up 47.5%	Up 40.2%	Up 36.8%	Up 42.1%	Up 39.2%
-Age 65-74									
-Age 85-plus	Up 26.6%	Up 84.6%	Up 19.6%	Up 20.2%	Up 31.7%	Up 4.5%	Up 20%	Up 12.9%	Up 19.9%
Households	32,157	17,378	12,238	10,784	189,304	215,132	267,880	2,601,914	119,730,128
Households with at least one < 18	37.7%	30.8%	30.7%	27.7 %	32.6%	30.8%	31.5%	31.4%	31.4%
Households with at least one 65+	28.4%	26.9%	33.8%	32.7 %	44.0%	39.9%	41.1%	38.7%	38.7%
Income	**Brockton**	**Attleboro**	**Randolph**	**Stoughton**	**Plymouth County**	**Bristol County**	**Norfolk County**	**MA**	**U.S.**
Median per capita	$26,063	$37,018	$33,476	$37,006	$41,343	$34,226	$52,036	$41,794	$32,621
Whites	$37,600	$44,102	$39,904	$40,154	$44,754	$36,484	$55,869	$44,284	$35,911
Blacks	$31,990	$40,846	$33,942	$32,354	$23,974	$24,957	$33,503	$32,369	$29,823
Hispanic/Latino	$30,682	$29,613	$26,280	$34,514	$22,929	$15,880	$39,933	$26,363	$25,956
Female earnings	$30,471	$39,436	$35,649	$31,987	$34,921	$31,819	$41,983	$35,051	$28,269
Male earnings	$36,070	$50,780	$37,862	$47,472	$51,931	$46,092	$61,302	$49,982	$40,168
Median household	$55,140	$74,255	$73,697	$79,421	$77,378	$66,157	$99,511	$77,378	$60,293
Education	**Brockton**	**Attleboro**	**Randolph**	**Stoughton**	**Plymouth County**	**Bristol County**	**Norfolk County**	**MA**	**U.S.**
No diploma/GED	18.1%	10.5%	14.3%	9.1%	7.2%	14.3%	10.2%	9.6%	12.4%
Diploma/GED only	33.8%	28.6%	29.8%	26%	26.3%	32.0%	27.4%	24.2%	27.1
Bachelor's	12.9%	22.3%	18.5%	23.7 %	24.5%	17.7%	27.9%	23.8%	19.4%
Median earnings:	$25,992	$30,617	$34,315	$23,561	$31,047	$31,565	$31,865	$25,816	$22,609
-No diploma/GED									
-Only diploma/GED	$33,006	$36,707	$35,817	$36,569	$40,211	$36,208	$38,737	$35,540	$30,570
-Bachelor's	$53,071	$67,563	$57,965	$59,704	$65,593	$57,994	$70,787	$62,623	$53,825
Poverty	**Brockton**	**Attleboro**	**Randolph**	**Stoughton**	**Plymouth County**	**Bristol County**	**Norfolk County**	**MA**	**U.S.**
Poverty rate	15.6%	8.9%	10.8%	7.3%	5.7%	10.6%	6.6%	10.8%	14.1%
Poor/Near poor	35.1%	20%	22.2%	17%	18.2%	26.8%	14.4%	23.2%	31.9%
Children poor/near	46.5%	24%	32%	24.4%	-	-	-	28%	41.2%
Female poverty rate	17.9%	8.9%	12.3%	8%	8.9%	11.4%	7.2%	11.9%	15.3%
Male poverty rate	13%	8.9%	9.1%	6.6%	5.0%	9.8%	6.0%	9.6%	12.8%
Child poverty rate	20.9%	11.7%	19.9%	12.1%	6.4%	14.3%	6.3%	13.9%	19.5%
Under age 5 rate	22.7%	16.6%	11.9%	4.8%	3.7%	18.6%	5.4%	15.3%	21.5%
Ages 5-17 rate	20.2%	9.8%	23.1%	14.8%	9.6%	14.6%	6.7%	13.4%	18.8%
Ages 18-34 rate	14.4%	10.9%	11.9%	7.5%	8.6%	13%	8.6%	13.6%	17.2%
Ages 35-64 rate	13%	7.5%	7%	5.9%	6.3%	8.8%	5.2%	8.3%	10.9%
Ages 65+ rate	15.3%	5.8%	8.6%	5.5%	6.9%	9.8%	7.1%	9%	9.3%
White rate	10.9%	8.6%	11.7%	7.7%	6.1%	9.3%	5.4%	8.5%	11.6%
Black rate	18.6%	17%	10.6%	2.7%	24.0%	21.2%	14.1%	19.7%	24.2%
Hispanic/Latino rate	23.6%	18.8%	20.5%	24.6%	25.0%	21.5%	11.8%	26.6%	21%
Of those in poverty:	27.2%	28.1%	31.2%	31.2%	-	-	-	28.2%	32%
-Working									
-Unemployed	14.6%	14.1%	19%	7.8%	-	-	-	9.2%	9.5%
-Not in labor force	58.2%	57.8%	49.8%	61%	-	-	-	62.6%	58.5%
Receiving SNAP	29.2%	13.3%	16.2%	9.2%	10.5%	16.3%	6.3%	12%	12.2%

Employment	Brockton	Attleboro	Randolph	Stoughton	Plymouth County	Bristol County	Norfolk County	MA	U.S.
Living wage: single parent, 2 children*	$37.09/ hour	$32.42/ hour	$39.37/ hour	$39.37/ hour	$37.09/ hour	$32.42/ hour	$39.37/ hour	$36.50/ hour	-
MA minimum wage	$12.00/ hour	$12.00/ hour	$12.00/ hour	$12.00/ hour	$12.00/ hour	$12.00/ hour	$12.00/ hour	$12.00/ hour	$7.25/ hour
Labor force: August 2019**	49,613	25,894	18,926	17,054	-	-	-	3,855,804	-
Unemployment rate: August 2019**	4.0%	3.3%	3.4%	2.9%	-	-	-	2.8%	-
➡ *ONE YEAR LATER: Impact of COVID-19 on Employment*									
Labor force: August 2020**	48,994	24,800	18,424	15,885	-	-	-	3,581,300	-
Unemployment rate: August 2020**	17.3% ⬆ 13.3%	11.3% ⬆ 8%	16.1% ⬆ 12.7%	11.9% ⬆ 9%	-	-	-	11.2%	-

*Source: MIT Living Wage Calculator, Counties, https://livingwage.mit.edu
**Source: MA Labor Force and Unemployment Data, https://lmi.dua.eol.mass.gov/lmi/LaborForceAndUnemployment/TownComparison

Housing	Brockton	Attleboro	Randolph	Stoughton	Plymouth County	Bristol County	Norfolk County	MA	U.S.
Housing units	34,138	18,755	12,750	11,493	208,087	236,308	280,289	2,882,739	136,384,292
Occupancy rate	94.2%	92.7%	96%	93.8%	95.6%	91.0%	95.6%	90.3%	87.8%
Subsidized units	3%	6.4%	10.7%	11.5%	-	-	-	9.7%	-
Owner-occupied	54.3%	67.5%	68.5%	70.6%	77.2%	61.0%	67.7%	62.3%	63.8%
Renter-occupied	45.7%	32.5%	31.5%	29.4%	22.8%	39.0%	32.3%	37.7%	36.2%
Built before 1980	85%	64.5%	72.6%	73.6%	63.7%	72.1%	81.4%	71.8%	54.2%
Median monthly housing costs	$1,325	$1,410	$1,654	$1,592	-	-	-	$1,486	$1,071
Median gross rent	$1,088	$1,057	$1,331	$1,399	$1,556	$895	$1,556	$ 1,225	$1,023
>30% income spent on housing: -*Renters*	54.1%	47.3%	52.9%	56.2%	-	-	-	49.9%	50.2%

Health	Brockton	Attleboro	Randolph	Stoughton	Plymouth County	Bristol County	Norfolk County	MA	U.S.
2018 food insecurity rate*	-	-	-	-	7%	9.9%	6.2%	8.9%	-
2018 child food insecurity rate*	-	-	-	-	9.1%	13%	6.1%	10.1%	-
➡ *LOOKING AHEAD: Impact of COVID-19 on Food Insecurity*									
2020 projected food insecurity rate**	-	-	-	-	12.1% ⬆ 3%	15% ⬆ 2%	10.7% ⬆ 3.9%	-	-
2020 reporting poor/fair health***	-	-	-	-	13%	14%	12%	14%	-
2020 adults with obesity***	-	-	-	-	28%	29%	23%	25%	-
2018 opioid deaths from overdose****	35	11	10	15	-	-	-	-	-

*Source: Feeding America, Map the Meal Gap, 2018 Data, https://map.feedingamerica.org
**Source: Feeding America, The Impact of Coronavirus on Food Insecurity, https://www.feedingamericaaction.org/the-impact-of-coronavirus-on-food-insecurity/
***Source: County Health Rankings and Roadmap, https://www.countyhealthrankings.org
****Source: MA DPH Current Opioid Statistics, https://www.mass.gov/doc/opioid-related-overdose-deaths-by-citytown-february-2020/download

Homelessness

Homeless persons	Sheltered	White	Black	Hispanic/ Latino	Severe mental illness	Chronic substance abuse	Homeless families	Homeless children
***Quincy-Brockton-Weymouth-Plymouth City and County Continuum of Care Region MA-511**								
1,088	98.8%	50.6%	45.7%	17.6%	19.3%	13%	246	404
***Attleboro/Taunton/Bristol County Continuum of Care Region MA-519**								
256	86.7%	51.2%	44.9%	38%	23.4%	11.7%	47	120

*****Source: U.S. Department of Housing and Urban Development 2019 Continuum of Care Homelessness Assistance Programs – Homeless Populations and Subpopulations, MA-511 Quincy, Brockton, Weymouth, Plymouth City and County CoC Point in Time Date 1/30/2019,* https://files.hudexchange.info/reports/published/CoC_PopSub_CoC_MA-511-2019_MA_2019.pdf, and MA-519 Attleboro/Taunton/Bristol County CoC *Point in Time Date 1/30/2019,* https://files.hudexchange.info/reports/published/CoC_PopSub_CoC_MA-519-2019_MA_2019.pdf

At a Glance: 2019 Poverty Report

The Massachusetts Association for Community Action commissioned the Massachusetts Budget and Policy Center to develop a report on the causes, conditions, and solutions related to poverty across the state. Access the full report here: ***Obstacles on the Road to Opportunity: Finding a Way Forward***.

KEY TAKEAWAYS

- **In Massachusetts, income growth at the very top has outstripped growth for everyone else.**
- **Black and Latinx workers have had no wage growth.**
- **The official poverty measure is imperfect. It does not account for the costs of basic living expenses and does not account for the value of non-cash and tax benefits.**
- **Public programs cut poverty just about in half in Massachusetts and child poverty by more than half.**
- **But public benefits alone cannot completely eliminate poverty. People need good jobs with good wages that grow over time.**
- **In an equitable economy, all parents—white parents together with black and brown parents—would be able to find jobs that provide enough to keep a roof overhead, feed a family, and save for college and retirement. *Today's economy does not create that opportunity for everyone.***

City of Brockton PLYMOUTH COUNTY • POPULATION: 95,426 • 6TH IN STATE

Unless otherwise noted, data included below is sourced from the 2018 American Community Survey.

Population

SHIFTING DEMOGRAPHICS
Race: 2010-2018 change:
White: ↓ -20.4%
African American: ↑ 22.9%
Hispanic/Latino: ↑ 13%

44.78% spoke a language other than English at home

Brockton is the sixth largest city in Massachusetts and represents the largest population served by Self Help. While the Commonwealth saw a 5.5% population increase since 2010, in Brockton the increase was just 1.7%. In 2018 the population was 52.3% female and 47.7% male. Racially, Brockton has shifted dramatically since 2010, with white people making up 39.8% of the population in 2018 representing a 20.4% decrease. This is compared to a 1.3% increase statewide and a 4.5% increase nationally from 2010 to 2018. Meanwhile, the percentage of African Americans in Brockton in 2018 was 42.3, a 22.9% increase since 2010. This was similar to the Massachusetts increase of 20.9. In 2018 11.1% of Brockton residents identified as Hispanic/Latino, an increase of 13% since 2010. 2018 data shows that 44.8% of the Brockton population spoke a language other than English at home, and 43.5% were non-US Citizens.

AGING CITY, SLOW GROWTH
Population change 2010-2018:
Massachusetts: 5.5%
Brockton: 1.7%
Brockton ages 65-74: 33.4% ↑

Currently, the median age in Brockton is 35.6 (younger than for MA at 39.4 and for the U.S. at 37.9). But while Brockton is growing much more slowly than the state or country, it is also aging with the most growth amongst the elderly. The 65-74 age group increased by 33.4%, and the 85-plus group increased by 26.6%. Meanwhile, the 45-54 age group decreased by 15.1% and the 35-44 group decreased by 5.5%. Ages 15-19 decreased by 11.1%.

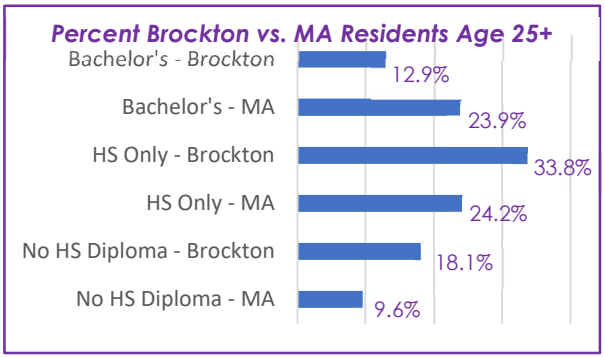
In 2018 Brockton had 32,157 households, 38.6% of which included children. Single-female family households made up 24.1% of the total. Non-family households represented 32.5% of total. Seniors, ages 65 and up, living alone made up 11.1% of households, while households that had at least one senior 65-plus represented 28.4% of the total.

Income

FALLING BEHIND
2018 per capita income:
$$$ Massachusetts: $41,794
$$ United States: $32,621
$ Brockton: $26,063

Brockton's per capita income of $26,063 in 2018 was far lower than Massachusetts' of $41,794 and lower than the U.S. of $32,621. The median household income was $55,140, also lower than Massachusetts ($77,378) and the U.S. ($60,293). The discrepancy between male and female earnings was less pronounced in Brockton than nationally ($30,471/female versus $36,070/male in Brockton, compared to $28,269/female versus $40,168/male for the U.S.). For families with children, Brockton fared almost half as well as other Massachusetts households, with a median income of $53,579 compared to the state's $101,368. African Americans in Brockton had a median income similar those statewide ($31,990 and $32,369 respectively), and slightly higher than the national median ($29,823). White Brockton residents also took in slightly more than the national median ($37,600 and $35,911 respectively), but quite a bit less than their counterparts statewide ($44,284). Still, whites out-earned African Americans by more than $5,000. African Americans at 42.3% and whites at 39.8% make up the majority of the population in Brockton. Median income for those identifying as Hispanic/Latino was lower in Brockton than for either of those groups, at $30,682.

Education



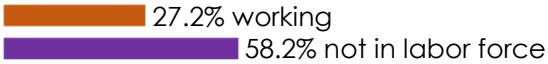
Compared with state averages and even nationally, educational attainment levels are low in Brockton. The percentage of Brockton residents 25-plus without a diploma/GED (18.1%) was almost double the state rate (9.6%), while only 12.9% earned a Bachelor's degree compared with Massachusetts' 23.8% and the nation's 19.4%. The highest percentages were found in those with only a high school diploma (33.8%) or with some college but no degree (20.7%).

Educational attainment makes a big impact on earning potential. The median income for those who did not graduate high school was $25,992 in Brockton. Income jumped to $33,006 for high school graduates and all the way to $53,071 for those with Bachelor's degrees. Of the total population of those living with incomes at or below the Federal Poverty Level, 36.8% had a high school diploma or equivalent, 34.1% did not graduate high school, and 22.9% had some college, whereas only 6.1% had Bachelor's degrees or higher.

Poverty

POVERTY: STORY OF LOW WAGE WORK

Brockton residents living in poverty:



Only 14.6% unemployed

Of the total Brockton population, 15.6% of people were living in poverty in 2018, compared to the Massachusetts rate of 10.8% and the national rate of 14.1%. It is important to note that the Federal Poverty Level is dramatically lower than what is considered a "living wage" in Massachusetts. Those living at the Federal Poverty Level will have an even lower quality of life in a state with a much higher than average cost of living. Those below 200% of the Federal Poverty Level still struggle to make ends meet in the Commonwealth, and this near-poverty group makes up 35.1% of the Brockton population.

In 2018, many of those living at the poverty level in Brockton were actually working (27.2%) and just 14.6% were unemployed. The largest group of those living in poverty in Brockton (58.2%) were not considered to be in the labor force (retired persons, students, those taking care of children or other family members, and others who are neither working nor seeking work). The percentage of African Americans living in poverty at 18.6% was higher than that for whites at 10.9%, and 23.6% of those identifying as Hispanic/Latino were below the poverty level.

Almost half of Brockton children are living in or near poverty

Women fared worse than men, with 17.9% of all females in Brockton living in poverty compared to 13% of males. Single-female households made up 65.2% of families living below the poverty line. The city saw alarming rates for children under five (22.7%) and 5-17 (20.2%), higher than national rates and much higher than those across Massachusetts. Brockton rates decreased a bit to around 14% for ages 18-34 and 35-64. Rates began to climb again for those 65+ (15.3%), higher than nationally (9.3%) and statewide (9%).

Many households with young children are clearly struggling, and child care also came up as a top need in Self Help's 2019 Community Needs Assessment. This is also reflected in 2013-2017 Kids Count data showing that fewer than half (just 49.2%) of Brockton three and four-year-olds were enrolled in preschool (compared to 59% statewide).

Many households in Brockton rely on non-wage income to scrape by. Of the total Brockton households, while 78.4% were receiving earned income, 29.2% received SNAP/Food Stamps. Among households with children under 18, almost 38% received SNAP benefits compared to a much lower state percentage of 18%.

Employment

NOT ENOUGH TO GET BY

$$$ Living wage in Brockton for a single parent with two kids: $37.09

$ MA minimum wage: $12

Between August 2019 and August 2020, Brockton's unemployment rate rose by13.8% to 17.8%

In August 2019, Brockton had 49,613 people in the labor force and an unemployment rate of 4%, compared to the Massachusetts rate of 2.8%. Fast forward one year to August 2020, in the midst of the COVID-19 global pandemic, and Brockton's rate shot up to 17.8%, well over the state's 11.2%. (*Source: Mass.gov Labor Force and Unemployment Data, Town Comparison, https://lmi.dua.eol.mass.gov/lmi/LaborForceAndUnemployment/TownComparison.*)

But being employed does not mean that people are able to actually able to afford their living expenses. While the minimum wage in Massachusetts is $12 per hour, in Plymouth County a single parent with two children would need to make $37.09 per hour to get by and cover their expenses. They would need an annual income of $77,144, while Brockton workers annually earned a median of just $32,269 in 2018. (*Source: MIT Living Wage Calculator, Counties, Plymouth County, https://livingwage.mit.edu/counties/25023*).

Lack of adequate public transportation also affects people's ability to work and has been noted as a need in Brockton in past and current Community Needs Assessments. Despite Brockton being Massachusetts' sixth largest city, in 2018 there were 65 communities in the state with higher percentages of workers (ages 16 and up) who commuted by public transportation (compared to just 7% in Brockton).

Housing

FALLING INTO DISREPAIR
Homes built before 1980:

85%

Like many communities, housing is a major need impacting Brockton. This came up as the top need in SHI's Community Needs Assessment, with challenges including lack of adequate supply, affordability, and condition of housing units. Many Community Needs Survey respondents commented that they are unable to afford repairs on their homes. With 85% of Brockton's total 34,138 housing units built prior to 1980, and 38.1% prior to 1940, units falling into disrepair is a concern. The city's units are roughly evenly split between owner- and renter-occupied. While many seniors living on fixed incomes own their homes, our Community Needs Assessment shows that they are struggling to pay increasing taxes and maintenance costs. The median value of owner-occupied units in Brockton meanwhile is significantly lower than for all of Massachusetts, at $245,300 and $366,800 respectively. While Brockton has much higher poverty than the state generally, median monthly housing costs aren't very different ($1,325 for Brockton, $1,486 for MA) and are higher than the U.S. ($1,071). Among homeowners with mortgages, 38% spend at least 30% of income on housing, as do more than half of renters (54%). Subsidized housing in Brockton made up 13% of the total (across Massachusetts it was 9.7%).

More than half of Brockton renters spend at least 30% of their income on housing

Crime

Crime in Brockton continues to be a major concern, with the fourth highest number (917 incidents) and rate (9.6 per 1,000 people) of violent crime in the state in 2017 (most recent data available). After Boston, Brockton had the second highest incidence of rape (93 cases) in the state. The city also had the second highest rate of vehicle theft (4 out of 1,000). (*Source: US Department of Justice, FBI: 2017 Crime in the United States, Table 8, Massachusetts, Offenses Known to Law Enforcement, by City, 2017.*)

RANK IN STATE
#2: Rape: 93 cases
#2: Vehicle theft: 4 / 1,000 residents
#4: Violent crime: 9.6 / 1,000 residents

Health

The *2019-2021 South Shore Community Health Needs Assessment* shows Brockton as being generally in poorer health than Massachusetts overall, with significantly higher rates of obesity, disability, heart disease mortality, cancer mortality, and hospitalizations for mental disorders and opioid use. (*Source: 2019-2021 South Shore Community Health Needs Assessment, https://www.southshorehealth.org/media/2395/download?disposition=inline.*) Opioid addiction continues to impact Brockton as in many other parts of the state and country. State data from 2017 (most recent reliable available; source: MA DPH Current Opioid Statistics, https://www.mass.gov/doc/opioid-related-overdose-deaths-by-citytown-february-2020/download) shows Brockton ranked sixth highest in MA with 49 opioid deaths. The Substance Use Officer of the Brockton Police Department reported to Self Help that during 2019 the city saw 581 opioid overdoses with 30 known fatalities. Of the overdoses, 169 were homeless. There were 49 attempted suicides by overdose. The Brockton Police Department used Narcan to save 79 individuals from overdose death. Note that overdose deaths are expected to increase based on state medical examiner findings.

SICK CITY
Brockton had much higher rates than Massachusetts of: • Disability • Obesity • Cancer deaths • Heart disease deaths • Hospitalizations for mental disorders and opioid use • **COVID-19**

City of Attleboro BRISTOL COUNTY • POPULATION: 44,548

Unless otherwise noted, data included below is sourced from the 2018 American Community Survey.

Population

Attleboro's population in 2018 was 44,548, up 2.8% since 2010 and growing faster than Brockton (1.7%) but slower than Massachusetts (5.5%). The population was 51.1% female and 48.9% male. Attleboro had 17,378 households, of which 66.7% were families. Those with at least one child under 18 made up 30.8% of the total, and 26.9% had at least one person 65-and-up. Already an older-than-average city with a median age of 40.9 (for the U.S. it is 37.9), all age groups younger than 44 have declined since 2010 except for the 10-14 group. The most rapid decline was among those of peak working age, down 48% for those 25-34 and 13% for 35-44. On the other hand, all groups older than 55 saw significant increases. Most striking is the percent change among the 60-64 (61.7%) and 85-and-up groups (84.6%).

AGING CITY, SLOW GROWTH

Population change 2010-2018:

Massachusetts: 5.5%

Attleboro: 2.8%

Attleboro by Age:

25-34: ↓ -48% 35-44: ↓ -13%

60-64: ↑ 61.7% 85+: ↑ 84.6%

SHIFTING DEMOGRAPHICS

Race: 2010-2018 change:

African American: ↑ 24.6%

Hispanic/Latino: ↑ 31.3%

Whites still make up the majority population at 88.2%

While Attleboro is majority white (88.2%), that group only saw in increase of 2.1% while the relatively small African American population (only 3.3%) saw a large jump of 24.6% growth since 2010. Though there is a slightly larger Asian population (4.6%), that number is declining. The greatest shift was seen among those reporting as Hispanic/Latino, representing 7.2% of the total population – a leap of 31.3%. Those whose households speak a language other than English made up 14.4% of the total.

Income

Attleboro residents overall earned similarly to MA, but the fastest growing group lagged way behind.

$$$ Massachusetts: $41,794

$$ Attleboro overall: $37,018

$ Hispanic/Latino: $29,613

Attleboro's per capita income of $37,018 was between Massachusetts ($41,794) and the U.S. ($32,621) and significantly higher than Brockton ($26,063). The median household income was $74,255, lower than Massachusetts ($77,378) and higher than the U.S. ($60,293). Males earned a median of $50,780, much higher than females at $39,436. Whites out-earned African Americans by $3,256 and those identifying as Hispanic/Latino by $14,489 (note that some individuals may have identified as both white and Hispanic/Latino). Median income for families with children ($99,920) compared similarly to Massachusetts overall ($101,368) and much higher than Brockton ($53,579).

Education

Of Attleboro residents 25 years and older, 10.5% did not graduate high school (compared to 9.6% statewide) while 28.6% earned a diploma or GED. Those with Bachelor's degrees made up 22.3% (similar Massachusetts and much higher than Brockton). The median income for those who did not graduate high school was $30,617 in Attleboro, higher than the U.S., Massachusetts, and Brockton. Those with a high school diploma or GED earned $36,707, and those with Bachelor's degrees jumped to $67,563 (for both Brockton and the U.S. it was around $53,000).

Poverty

POVERTY: STORY OF LOW WAGE WORK

Attleboro residents living in poverty:

28.1% are working

57.8% are not in the labor force

Only 14.1% are unemployed

People living below the federal poverty level made up 8.9% of Attleboro residents, lower than in Massachusetts (10.8%) and significantly lower than in Brockton (15.6%) and nationwide (14.1%). Only 2.2% of Attleboro families were in poverty. However, a much larger 20% of residents were below 200% of federal poverty, or near poor. Poverty was roughly equally distributed between females and males. The poverty rate was highest for children under 5 at 16.6% and then steadily decreased to just 5.8% for those 65+. Rates compared favorably across age groups to national rates and were comparable to Massachusetts rates. The rate for African Americans (17%) was far higher than for whites (8.6). It was highest for those identifying as Hispanic/Latino at 18.8%.

Like in other communities, many of those in poverty in Attleboro were working in 2018 (28.1%) and just 14.1% were unemployed. The largest group (57.8%) was not in the labor force (retirees, students, caretakers, and others neither working nor seeking work). Yet while 80.1% of households had earned income coming in, many found non-wage income critical to get by. Of the total Attleboro households, 13.3% received SNAP/Food Stamps.

Employment

EARNING TO LIVE

$$$ Necessary annual income in Attleboro for a single parent with two kids: $67,427

$ Median income for Attleboro workers: $43,584

Attleboro unemployment rate: 3.3% in 2019 11.3% in 2020

In August 2019, Attleboro had 25,894 people in the labor force and an unemployment rate of 3.3%, compared to the Massachusetts rate of 2.8%. A year later, the COVID-19 pandemic brought the city's rate to 11.3%, on par with the state's 11.2%. (*Source: Mass.gov Labor Force and Unemployment Data, Town Comparison,* https://lmi.dua.eol.mass.gov/lmi/LaborForceAndUnemployment/TownComparison.) In Bristol County, a single parent with two children would need to make $32.42 per hour and $67,429 annually to cover expenses, much higher than the state's minimum wage of $12 per hour. Attleboro workers earned a median of $43,584. (*Source: MIT Living Wage Calculator, Counties, Bristol County,* https://livingwage.mit.edu/counties/25005).

Housing

There were 18,755 total housing units in Attleboro in 2018, of which 64.5% were built before 1980 and 25% before 1940. The occupancy rate was 92.7%, with owners making up 67.5% and renters 32.5%. Subsidized housing made up 6.4% (across Massachusetts it was 9.7%). The median monthly housing costs was $1,410, very similar to the amount for Massachusetts ($1,486). Among homeowners with mortgages, 28.6% spent at least 30% of their income on housing; almost half of renters (47.3%) did the same.

Town of Randolph NORFOLK COUNTY • POPULATION: 33,924

Unless otherwise noted, data included below is sourced from the 2018 American Community Survey.

Population

GROWING FASTER

Population change 2010-2018:

Massachusetts: 5.5%

Randolph: 7.1%

Randolph by Age:

20-24: ↑ 50.7% 25-34: ↑ 23.7%

60-64: ↑ 54.4% 65-74: ↑ 81.9%

Speaking of growth…

Hispanic/Latino increase: ↑ 60.6%

Randolph's population was 33,924, up 7.1% since 2010 and growing faster than Massachusetts and neighboring communities. The population was 38.1% white, down 6.9%, and had more African Americans (40.6%), a group that grew by 11.3%. Asians made up 12.1% of the population but saw little growth. Those identifying as Hispanic/Latino, 9% of the total, increased greatly by 60.6%. Randolph's median age of 41.6 is older than for the state (39.4) and U.S. (37.9). Like in Brockton and Attleboro, most younger age groups saw slow growth or decline, while unlike the other communities the 20-24 group had a big jump (50.7%). Older groups increased significantly, the 60-64 by 54.4% and 65-74 by 81.9%. Randolph had 12,238 households, of which 30.7% had children. A language other than English was spoken in 40% of homes.

Income

FALLING BEHIND

2018 per capita income:

$$$ Massachusetts: $41,794

$$ Randolph: $33,476

Randolph's per capita income of $33,476 was far lower than the state's (41,794) and similar to the U.S. ($32,621). For households it was $73,697, lower than Massachusetts ($77,378) but much higher than the U.S. ($60,293). Females earned $35,649 compared to males at $37,862. Median income for whites was $39,904, compared to $33,942 for African Americans, $41,567 for Asians, and just $26,280 for Hispanic/Latinos.

Education

Of Randolph residents 25 years and older, 14.3% lacked high school diplomas/GEDs, much higher the statewide rate (9.6%). There was also a lower rate of those with Bachelor's degrees (18.5%) compared with Massachusetts' 23.8% and the nation's 19.4%. Those with only a high school diploma/GED made up the 29.8%. Median incomes for those without and with only diplomas/GEDs were similar ($34,315 and $35,817 respectively) and were much lower than for Bachelor's degree holders ($57,965).

Poverty

Poverty was much higher for females, and highest for kids

Randolph's poverty rate matched the state's at 10.8%. The rate was higher for females (12.3%) than males (9.1%). Those identifying as Hispanic/Latino had a rate of 20.5%. While very young children (under five) were doing better at 11.9% than their counterparts across the country and the state, those 5-17 had a rate jumping to 23.1% - well over the state average. Older residents fared better with rates of 7% for ages 35-64 and 8.6% for 65+. Whites' rate of 11.7% dropped to 9.1 without including Hispanic/Latinos. The African American rate was 10.6%. Among those living in poverty, 31.2% were employed in 2018, 19% were unemployed, and 49.8% were not in the labor force. Those with earned income made up 80.7% of all households in Randolph. With a living wage out of reach for many, non-wage income is also critical; 16.2% of households received SNAP/Food Stamps.

Employment

NOT ENOUGH TO GET BY

$$$ Living wage in Randolph for a single parent with two kids: $39.37

$ MA minimum wage: $12

In August 2019, Randolph had 18,926 people in the labor force and an unemployment rate of 3.4%, compared to the Massachusetts rate of 2.8%. The COVID-19 pandemic had a major impact on Randolph, and by August 2020 the rate had skyrocketed to 16.1%, well over the state's 11.2%.

COVID-19 led to a 16.1% unemployment rate in Randolph in August 2020

(*Source: Mass.gov Labor Force and Unemployment Data, Town Comparison, https://lmi.dua.eol.mass.gov/lmi/LaborForceAndUnemployment/TownComparison.*)

To afford living expenses, a single parent with two children would need to make $39.37 per hour, or $81,890 annually. Randolph workers earned a median of $36,634 in 2018. (*Source: MIT Living Wage Calculator, Counties, Norfolk County, https://livingwage.mit.edu/counties/25021*).

Housing

In 2018 Randolph had 12,750 housing units, 96% of which were occupied. Units built prior to 1980 made up 72.6%. More were owner-occupied (68.5%) than rented (31.5%). Subsidized housing made up 10.7% (across Massachusetts it is 9.7%). Median monthly housing costs were $1,654. For owners with mortgages, that jumped to $2,126. The median rent was $1,331. Of homeowners with mortgage, 42% paid more than 30% of their income on housing; among renters it was even higher at 52.4%.

Town of Stoughton NORFOLK COUNTY • POPULATION: 28,534

Unless otherwise noted, data included below is sourced from the 2018 American Community Survey.

Population

GROWING OLDER

Stoughton's median age: 43.9 – higher than Brockton's, Attleboro's, and Randolph's

Population growth by age group since 2010:

65-74: ↑ 56.9% 85-plus: ↑ 20.2%

The Town of Stoughton had a population of 28,534 in 2018, up 6.5% since 2010. Whites made up 74.5% (down 6.5%), 4.2 % identified as Hispanic/Latino, and African Americans made up 14.4% and showed a large increase of 58.8% since 2010. The town had 10,784 households, of which 27.7% had at least one child under 18 and 32.7% had a least one person 65 or older. Of the four most-served communities in Self Help's service area, Stoughton had the highest median age at 43.9 and continued to see a great deal of growth within the oldest groups, with those aged 65 to 74 up 46.9% since 2010 and those 85 and older up 20.2%.

Income

Stoughton's per capita income of $37,006 was lower than for the state ($41,794), while the median household income of $79,421 slightly exceeded Massachusetts' ($77,378). Females earned $31,987, lower than males at $47,472. Median income for white people was $40,154, compared to $32,352 for African Americans, and $34,514 for those identifying as Hispanic/Latino.

Education

The rate of Stoughton residents 25 years and older without high school diplomas/GEDs (9.1%) was similar to the statewide rate (9.6%) and lower than the other primary communities served by Self Help. The town had nearly the same rate of those with Bachelor's degrees (23.7%) as the state (23.8%). Those with only a diploma/GED made up 26%. Median income for those who didn't finish high school was $23,561, jumping to $36,569 for those with diplomas/GEDs, and to $59,704 for Bachelor's holders.

Poverty

Stoughton's poverty rate of 7.3% was lower than for Massachusetts (10.8%). The rate was higher among females (8%) than males (6%). Stoughton saw the lowest rates among the very young and the elderly at 4.8% and 5.5% respectively – both considerably lower than the same groups across the nation and the state. The 35-64 group wasn't far behind at 5.9%. The highest rate was among children ages 5-17 (14.8%), followed by those 18-34 (7.5%). While the rate among white people was 7.7%, nearly a quarter of those identifying as Hispanic/Latino (24.6%) were living in poverty. African Americans meanwhile enjoyed a much lower rate at 2.7%, unique compared with nearby communities.

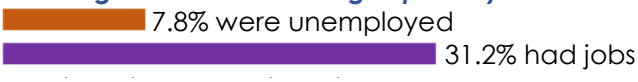
Of those in poverty, 31.2% were employed in 2018, 61% were not in the labor force, and only 7.8% were unemployed. Those receiving Food Stamps/SNAP made up 9.2% of the population.

Stoughton unemployment rate: Just 2.9% in 2019 11.9% in 2020

Employment

EMPLOYED AND STILL STRUGGLING

Of Stoughton residents living in poverty in 2018:



In August 2019, Stoughton had 17,054 people in the labor force and an unemployment rate of 2.9%, comparable to the Massachusetts rate of 2.8%. By August 2020 the rate had risen to 11.9%, just above the state's 11.2%. (*Source: Mass.gov Labor Force and Unemployment Data, Town Comparison, https://lmi.dua.eol.mass.gov/lmi/LaborForceAndUnemployment/TownComparison.*) To afford living expenses, a single parent with two children in Stoughton would need to make $39.37 per hour or $81,744 annually. However, the median per capita income in Stoughton was $37,006 in 2018. (*Source: MIT Living Wage Calculator, Counties, https://livingwage.mit.edu*).

Housing

Stoughton had 11,493 housing units in 2018, 93.8% of which were occupied. Units built prior to 1980 made up 73.6%. More were owner-occupied (70.6%) than rented (29.4%). Subsidized housing made up 11.5% (across Massachusetts it is 9.7%). Median monthly housing costs were $1,592. The median rent was $1,399 and 56.2% of renters paid more than 30% of their income on housing.

More than half of Stoughton renters spend at least 30% of their income on housing

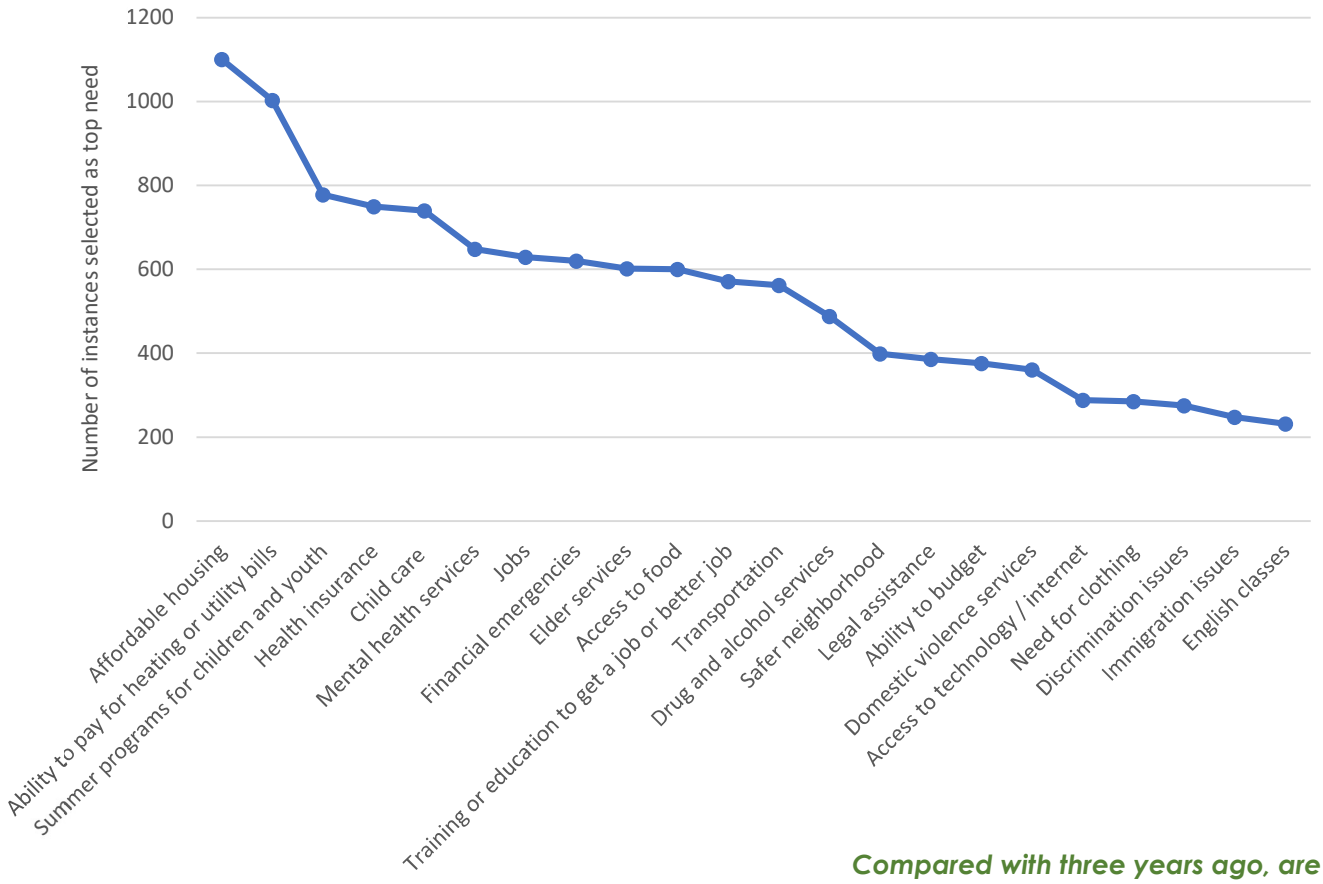
COMMUNITY ASSESSMENT FINDINGS

**Also see Community Profile, Page 8, for key findings of secondary data analysis, as well as Covid-19 Impact Assessment, Page 27.*

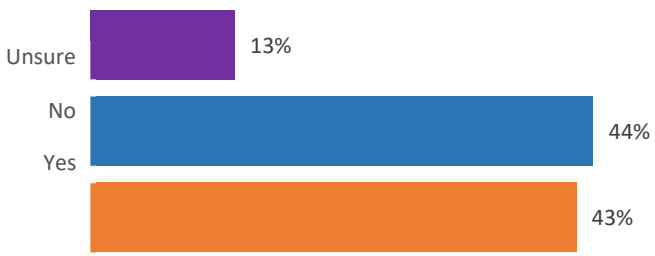
Community Needs Survey Results

OVERALL RESULTS • **Survey viewed: 2,493 times** • **Surveys completed: 1,677**

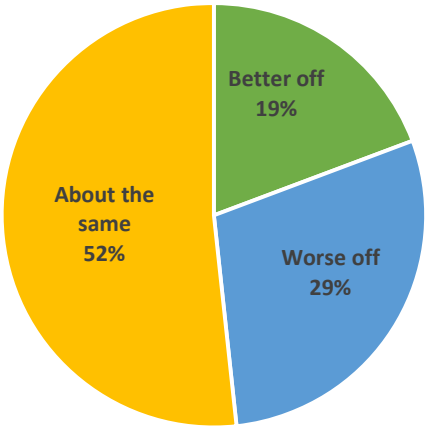
What do you think are the TOP needs impacting people in your community?



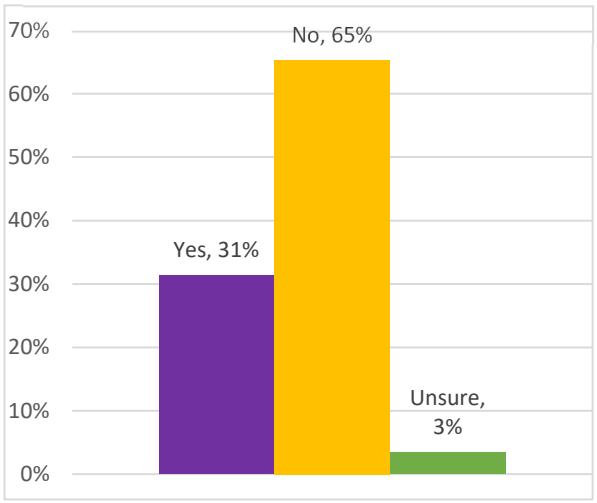
Are you able to pay your bills on time each month?



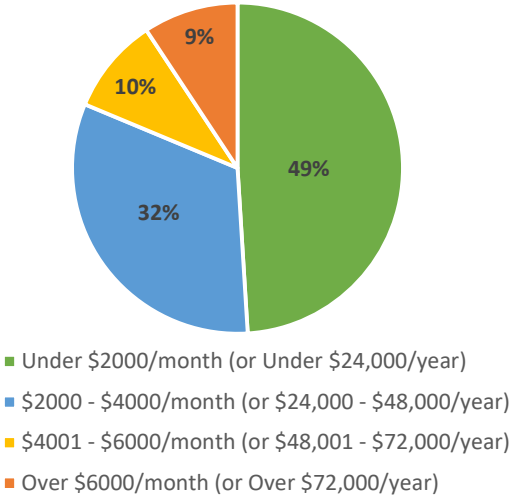
Compared with three years ago, are you and your family better off, worse off, or about the same?



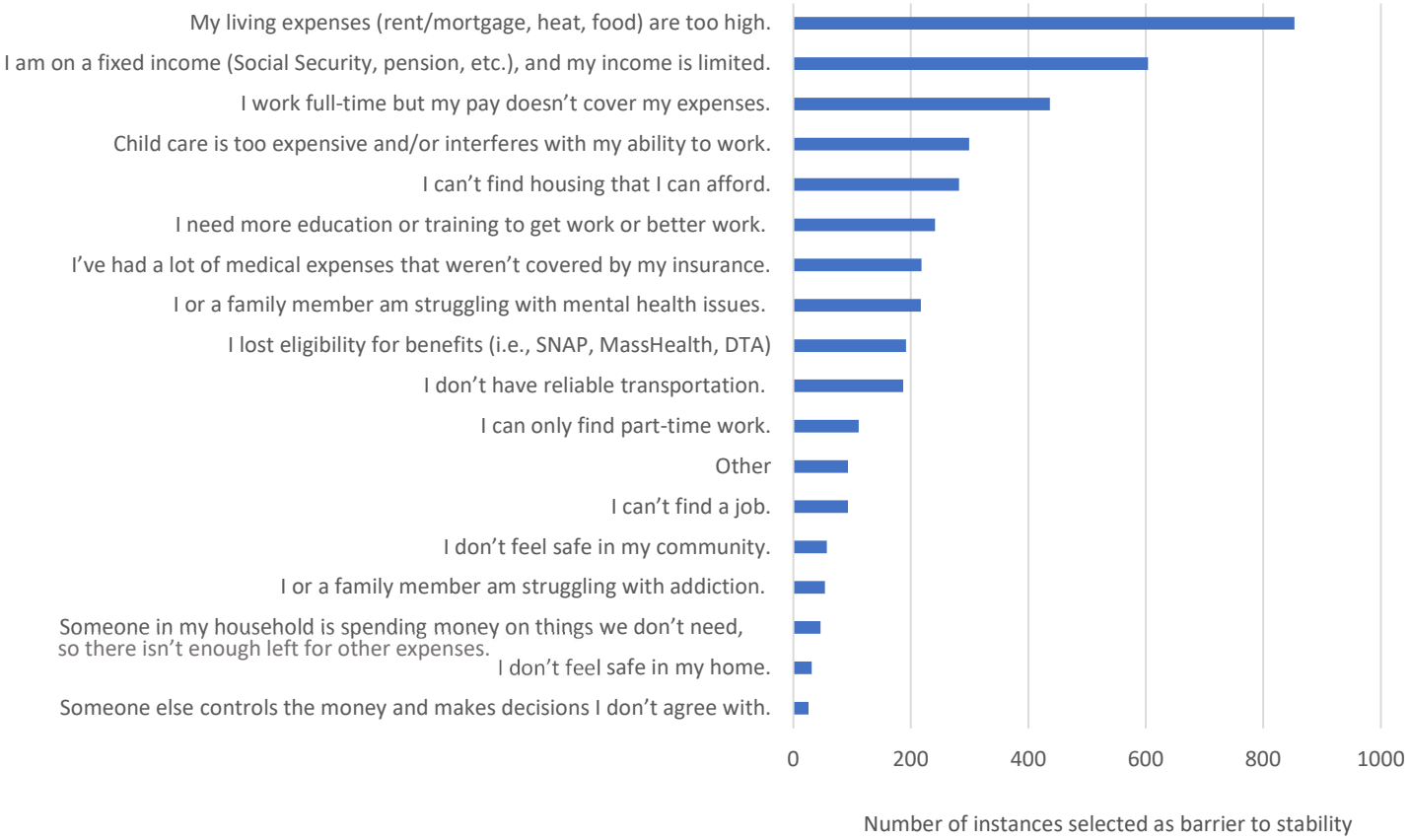
Do you currently have at least $500 set aside for emergencies?



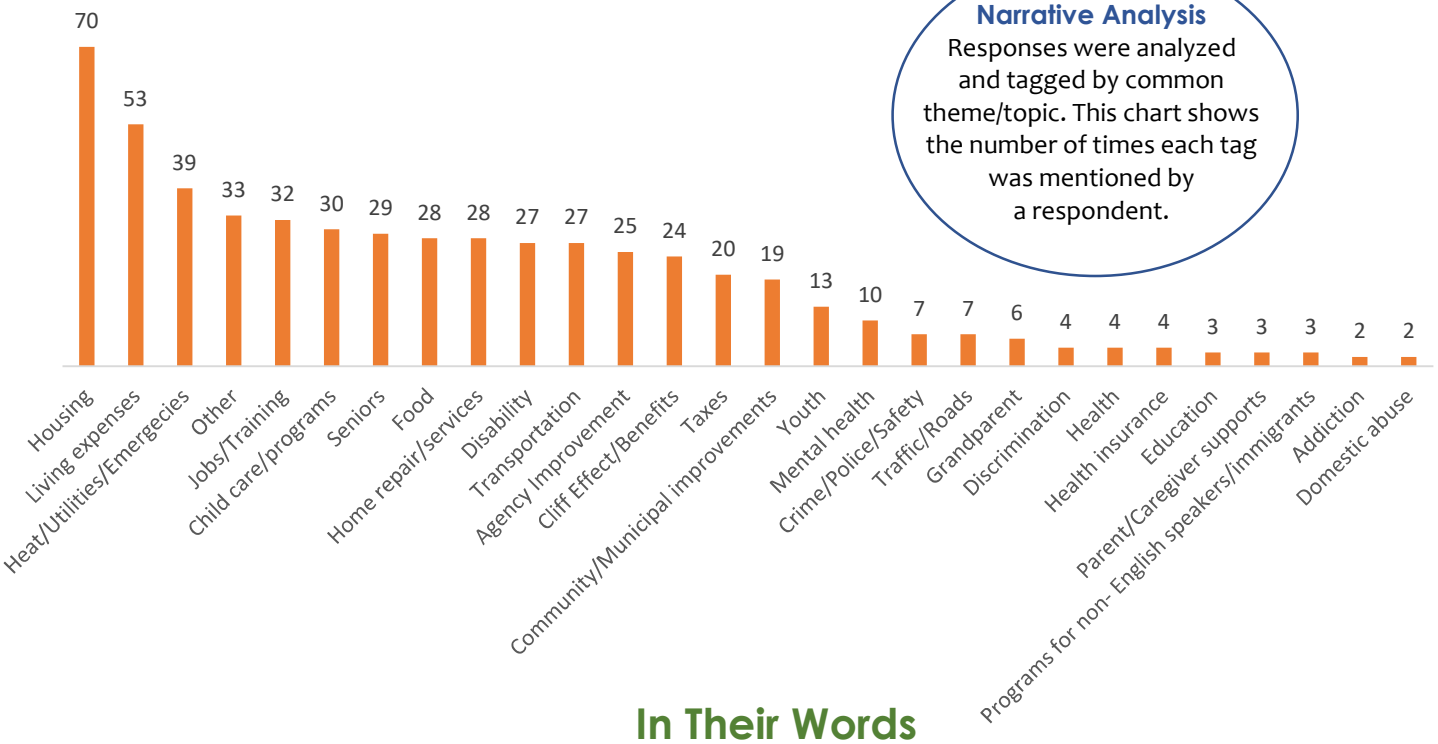
What is your household's monthly income before taxes?



What keeps you or your family from feeling more financially stable?



If there is anything else you would like to share about your needs or the community in which you live, please write down your thoughts.



Narrative Analysis
Responses were analyzed and tagged by common theme/topic. This chart shows the number of times each tag was mentioned by a respondent.

In Their Words

CLIFF EFFECT

"Even if I could work full time, it would mean my rent would go up and my benefits would go down. There's never a chance to save money to get out of the system."

UNDERSTANDING THE CLIFF EFFECT

What if getting a raise or new job means you and your family are **WORSE OFF** than before? That's exactly what happens with the cliff effect, when earning just a little more income can mean the sudden loss of critical public benefits and subsidies, such as childcare, housing, and food. With wages not keeping up with living expenses, these days, earned income

JUST ISN'T ENOUGH

for so many families to get by, let alone get ahead.

"**HOUSING** is so expensive. It impacts the ability to pay other bills and buy food. Even money for gas is tight to get to doctor appointments. It's a monthly struggle to always be broke. Just the bare essentials are costing more than I have!"

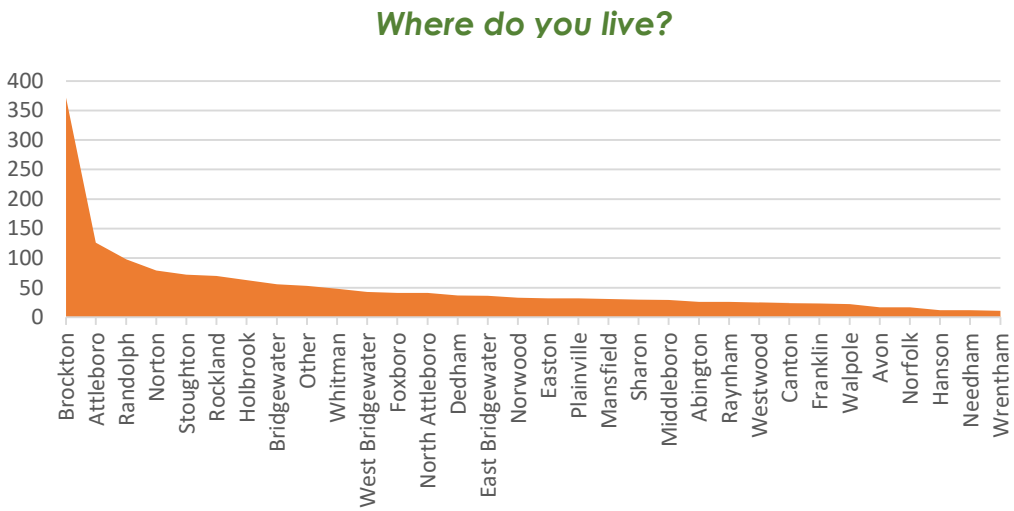
"I work two jobs but **CHILDCARE** is expensive and finding time to study for a better job is not possible with the responsibilities of caring for two kids and working two jobs."

LIVING EXPENSES

"Prices for items and services, utilities and taxes, have increased and continue to rise to higher rates than we can undertake. There is no governmental leadership or representation for us anymore. What ever is to be done?"

"The **COST OF HEAT** in the wintertime keeps getting higher, the amount of assistance you receive towards your heating cost is insufficient, alongside your other utilities that you have to pay."

RESULTS BY COMMUNITY • Surveys: Brockton 372 • Attleboro 126 • Randolph 98 • Stoughton 72

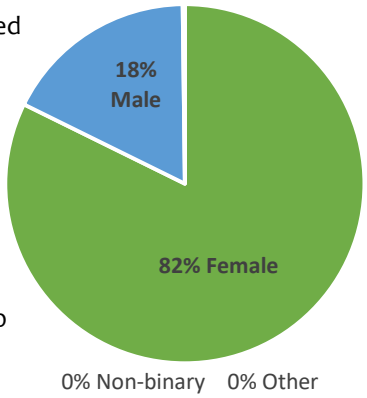


Affordable housing was the top need for the four highlighted communities. Jobs, childcare, heat/utilities and after-school/summer youth programs were most often selected by three of the four. In Attleboro, which had the highest percentage of 65-plus respondents, food, elder services, and health insurance also ranked. All four most often selected living expenses as a barrier to stability, with the next highest being on a fixed income and full-time work not covering expenses. Three included housing. In Brockton and Randolph the need for education and training was also a focus, in Attleboro it was mental health issues, childcare in Randolph, and in Stoughton more respondents focused on losing their eligibility for public benefits. More Attleboro respondents felt they were worse off or the same as three years ago, though they had the lowest rate of inability to pay bills on time. Setting aside $500 for emergencies was a problem for more than 80% of respondents in all communities except Randolph, which saw a rate of about 65%. There were more females than males responding for all communities, though the ratio of males was higher in Attleboro, which was also the least racially diverse. Randolph and Stoughton had much higher percentages of those identifying as Hispanic/Latino.

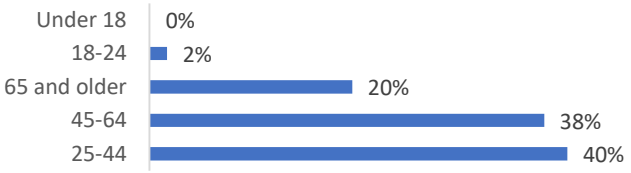
	Brockton	Attleboro	Randolph	Stoughton
Needs impacting people in your community: Top 5	1. Affordable housing 2. Affordable heat/utilities 3. Jobs 4. After-school/summer youth programs 5. Childcare	1. Affordable housing 2. Elder services 3. Food 4. Jobs 5. Health insurance	1. Affordable housing 2. Affordable heat/utilities 3. After-school/summer youth programs 4. Childcare 5. Jobs	1. /2. (*tie*) Affordable housing 2. /1. (*tie*) Affordable heat/utilities 3. After-school/summer youth programs 4. Childcare 5. Health insurance
Worse off or same as 3 years ago	78.45% of respondents	88.7% of respondents	83.5% of respondents	76.39% of respondents
Unable to pay bills on time or unsure	70.61% of respondents	62.9% of respondents	68.04% of respondents	63.89% of respondents
Don't have $500 set aside for emergencies or unsure	81.92% of respondents	84.56% of respondents	64.95% of respondents	83.34% of respondents
What keeps your family from feeling more financially stable: Top 5	1. Living expenses 2. Work full-time but can't afford expenses 3. On fixed income 4. Need education/ training for a job/better job 5. Can't find housing I can afford	1. Living expenses 2. On fixed income 3. /4. (*tie*) Work full-time but can't afford expenses 4. /3. (*tie*) Can't find housing I can afford 5. Struggling with mental health issues	1. Living expenses 2. On fixed income 3. Work full-time but can't afford expenses 4. Need education/ training for a job/better job 5. Childcare is too expensive	1. Living expenses 2. Work full-time but can't afford expenses 3. On fixed income 4. Can't find housing I can afford 5. I lost eligibility for public benefits
Age: 65+	12.99%	26.27%	16.3%	18.31%
Female/Male	84.59% / 14.85%	78.15% / 21.01%	82.29% / 17.71%	83.1% / 16.9%
White	36.36%	78.99%	34.04%	62.86%
Black	45.17%	6.72%	39.36%	22.86%
Hispanic/Latino	11.17%	5.13%	17.39%	18.31%

• BY GENDER • Surveys: Female 1,298 • Male 276

While most communities within Self Help's service area had slightly higher percentages of females than males, the ratio of females responding to our community survey was far higher. Only 0.19% of respondents identified as an other gender. Females and males both selected housing most often as a top need in their community, and heat/utilities second. For females, after-school and summer youth programs and childcare were also on their minds, while males focused more on health insurance and elder services. Both groups included living expenses, being on an insufficient fixed income, full-time work not covering their expenses, and inability to find affordable housing as top barriers to stability. Females also focused on childcare while males cited medical expenses. The male focus on medical/health needs and elder services may be explained by that group having a higher rate of those aged 65-plus. A greater percentage of females than males feel they are worse off than three years ago, unable to pay bills on time, and unable to set aside $500 for emergencies. Less racial/ethnic diversity was seen among males.



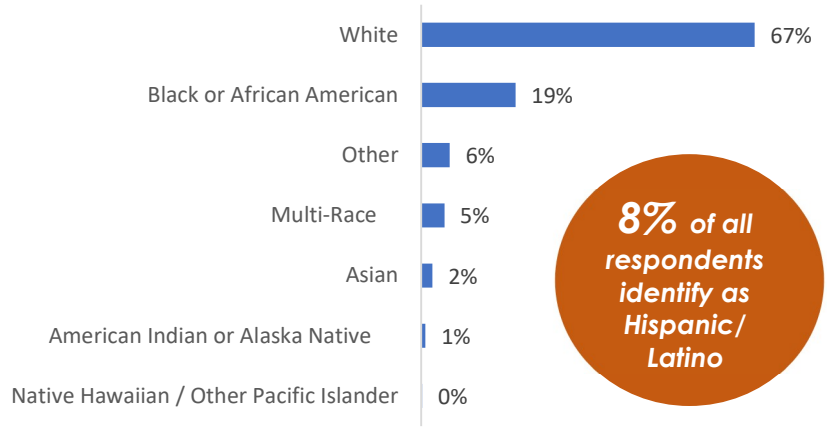
• BY AGE • Surveys: <65 1,261 • >65 308



Those 65-plus and those under 65 most often selected housing, heat/utilities, health insurance, and after-school/summer youth programs as top needs in their community. Unsurprisingly, the younger group also focused on childcare and the older on elder services. For barriers to their own stability, both groups most often selected living expenses, being on insufficient fixed incomes, and inability to afford housing. The younger group also focused on full-time work not covering expenses and childcare, while the older group selected medical expenses and transportation. A greater percentage of the older group feel they are worse off than three years ago, however that group fared better than the younger in terms of being able to pay bills and set aside emergency funds. Both groups had higher percentages of females, but the male ratio was higher among those 65-plus. The older group had much less racial/ethnic diversity.

	Female	Male	Age: Under 65	Age: 65-Plus
Needs impacting people in your community: Top 5	1. Affordable housing 2. Affordable heat/utilities 3. After-school/summer youth programs 4. Childcare 5. Health insurance	1. Affordable housing 2. Affordable heat/utilities 3. Health insurance 4. Elder services 5. Childcare	1. Affordable housing 2. Affordable heat/utilities 3. After-school/summer youth programs 4. Childcare 5. Health insurance	1. Affordable heat/utilities 2. Elder services 3. Affordable housing 4. Health insurance 5. After-school/summer youth programs
Worse off or same as 3 years ago	81.62% of respondents	78.15% of respondents	79.18% of respondents	88.63% of respondents
Unable to pay bills on time or unsure	58.68% of respondents	50.55% of respondents	61.44% of respondents	36% of respondents
Don't have $500 set aside for emergencies	70.3% of respondents	60.81% of respondents	73.31% of respondents	48.67% of respondents
What keeps your family from feeling more financially stable: Top 5	1. Living expenses 2. On fixed income 3. Work full-time but still can't afford expenses 4. Childcare is too expensive 5. Can't find housing I can afford	1. Living expenses 2. On fixed income 3. Work full-time but still can't afford expenses 4. Can't find housing I can afford 5. Medical expenses not covered by insurance	1. Living expenses 2. Work full-time but still can't afford expenses 3. On fixed income 4. Childcare is too expensive 5. Can't find housing I can afford	1. On fixed income 2. Living expenses 3. Medical expenses not covered by insurance 4. Can't find housing I can afford 5. Don't have reliable transportation
Age: 65+	16.94%	32.22%	-	-
Female/Male	-	-	85.24% / 14.52%	71.57% / 28.43%
White	65.81%	73.72%	62.31%	87.58%
Black	20.25%	13.05%	21.57%	7.84%
Hispanic/Latino	8.51%	7.09%	9.93%	1.37%

• BY RACE/ETHNICITY • Surveys: White 1,050 • African American 298 • Hispanic/Latino 129



A higher percentage of white people completed the survey than African Americans or Hispanic/Latinos, though the ratios were roughly reflective of overall demographics across the service area. All groups most often selected affordable housing and heat/utilities as top needs impacting the community, and also included after-school/summer youth programs and childcare. Whites also focused on health insurance, African Americans on jobs, and Hispanic/Latinos on job training/education. For barriers to their own stability, all groups most often selected living expenses, full-time work not covering expenses, and being on a fixed income. Whites and African Americans also focused on inability to afford housing, whites and Hispanic/Latinos on childcare, and African Americans and Hispanic/Latinos on the need for job training/education. Among whites there was a higher percentage who felt worse off or the same as three years ago, but for Hispanics/Latinos there was a much higher rate of those unable to pay bills on time; the rate was even higher for African Americans. Hispanic/Latinos fared the worst in terms of emergency funds, followed by African Americans. The white group had a much higher rate of respondents aged 65-plus.

	White	Black	Hispanic/Latino
Needs impacting people in your community: Top 5	1. Affordable housing 2. Affordable heat/utilities 3. Health insurance 4. After-school/summer youth programs 5. Childcare	1. Affordable housing 2. Affordable heat/utilities 3. After-school/summer youth programs 4. Jobs 5. Childcare	1. Affordable housing 2. Affordable heat/utilities 3. Childcare 4. After-school/summer youth programs 5. Training/Education to get a job/better job
Worse off or same compared with 3 years ago	82.1% of respondents	78.23% of respondents	74.2% of respondents
Unable to pay bills on time or unsure	49.09% of respondents	77.62% of respondents	69.6% of respondents
Don't have $500 set aside for emergencies or unsure	63.86% of respondents	79.73% of respondents	83.74% of respondents
What keeps your family from feeling more financially stable: Top 5	1. Living expenses 2. On fixed income 3. Work full-time but still can't afford expenses 4. Can't find housing I can afford 5. Childcare is too expensive	1. Living expenses 2. Work full-time but still can't afford expenses 3. On fixed income 4. Need education/ training for a job/better job 5. Can't find housing I can afford	1. Living expenses 2. Work full-time but still can't afford expenses 3. On fixed income 4. Childcare is too expensive 5. Need education/ training for a job/better job
Age: 65+	25.65%	8.19%	3.15%
Female/Male	80.63% / 19.27% (0.10% other)	87.54% / 12.46%	85.04% / 14.96%

Community Strengths and Partnerships

While the communities Self Help serves face difficult challenges, they are also bolstered by the individual and collective strength of hundreds of community partners working to identify and address needs, as well as the input and engagement of residents. Self Help Inc. works with over 300 community partners, ranging from non-profit, to faith based, local government, coalitions and more. Each partner has their own unique perspective and focus on community needs and services. Self Help is also part of several coalitions and working groups, including MassHire, Brockton Housing Authority, Community Services of Greater Brockton, Attleboro Area Self Sufficiently Coalition, Greater Plymouth Council of Human Service Agencies, and THRIVE in Randolph, to name just a few. Each group meets on an ongoing basis to discuss the changing needs of our communities, gaps in resources and services, and available resources which can be secured or leveraged to help meet needs and fill gaps. Self Help also works with our bordering Community Action Agencies to help clients access additional services not offered by Self Help. We continually work to identify new partners within our communities to support and collaborate to help meet the needs of our most vulnerable residents. The Greater Brockton area has a wealth of varied services and programs available to residents. We work diligently to inform our residents of what resources are available, and continually assist them with identifying and connecting to the resources they may need.

COMMUNITY PARTNERS QUESTIONAIRE

As a follow-up to the Community Needs Survey, questionnaires were completed by 20 community partners representing a range of sectors, organizations, and areas of expertise. These included community and family resource centers, schools, early childhood programs, WIC (Women, Infants and Children) programs, DTA (Department of Transitional Assistance) offices, Visiting Nurse Associations, social workers, workforce development, housing authorities, councils on aging, interfaith collaboratives, literacy centers, health centers, and directors of Self Help's own programs.

Systemic Challenges

***50%** talked about the need for living-wage jobs. **35%** noted the cost of housing.*

Q: ***As a network, we are talking about the misperceptions about people living in poverty and with limited income, and the systemic challenges connected to moving out of poverty. What are you seeing as those challenges?***

A: Half of respondents (50%) talked about the need for jobs that provide a living wage and training to access those jobs, noting that many people in poverty are working but still can't cover their basic needs. An additional five (25%) discussed the cliff effect and the systemic issues that make it difficult for people to come off of public benefits. The high cost of housing was noted by 35%, cost of childcare as a barrier to employment by 25%, and lack of adequate transportation as a barrier to employment by 20%. Also mentioned were cost of food, need for more education and support, mental health issues, financial literacy, language barriers, and the stigmatization of poverty.

Housing

***55%** believe the public sector should be responsible for fixing the housing crisis. **70%** said the public sector should address the cost of living.*

Q: ***Self Help Inc.'s 2019 Community Needs Survey identified affordable housing as a top need. How do you see this impacting people in your community?***

A: Respondents most frequently talked about the need for more affordable housing development in their communities (45% of respondents), and for existing units to be more affordable for low-to-mid-income people (35%). Also noted by multiple respondents were homelessness (20%), poor housing conditions and safety (10%), crowding (10%), and absentee landlords (10%).

Q: ***How do you feel needs related to housing can or should be addressed? By whom?***

A: The most frequent solution mentioned was improving and/or expanding existing housing programs by providing greater awareness, accessibility, and funding (35% of respondents). Of those, one specifically focused on improving access for non-English speakers. Many respondents felt that the issue should be primarily addressed by government, with 35% placing responsibility with local/city government and 20% calling out State and/or Federal. New public/private partnerships (for example between cities and developers) to rehabilitate old housing stock and develop innovative new housing options (such as tiny houses) was discussed by 15%. Rent control was mentioned twice (10%).

Living Expenses

Q: ***Inability to afford basic living expenses, such as heat, also came up as a top need. How do you see this impacting people in your community?***

A: The greatest impact (noted by 40%) observed by our partners is in people being faced with having to choose between basic essentials like heat, food, housing, and health, and then falling behind in other bills. 30% see the impact through increased individuals seeking services such as Fuel Assistance and through the help these programs provide. Safety issues such as using unsafe space heaters to heat homes, and decreasing public funds for programs such as Fuel Assistance were both noted by 10% of respondents.

Q: ***How do you feel needs related to affording basic living expenses can or should be addressed? By whom?***

A: A majority of respondents (70%) feel that the public sector, local, State, and Federal government, should take responsibility for this issue. 20% discussed improving and/or expanding existing services by providing greater awareness, accessibility, and funding; of those, one specifically focused on improving access for non-English speakers. 20% noted the need for better collaboration between providers, the public sector, and the private sector. Also mentioned were increasing the minimum wage to a living wage and providing financial literacy.

Employment Barriers and Cliff Effect

60% ***mentioned the cliff effect as a major barrier for those with low incomes.***

Q: ***In our Needs Survey, people talked about barriers to getting a job or better job, as well as how often making just a little more income results in people losing critical benefits/services that help them stay afloat. This is known as the "cliff effect." How do you see needs related to employment, employment barriers and/or the "cliff effect" impacting your community?***

A: The cliff effect was noted by 60% of respondents as a major barrier. 25% talked about seeing people being disincentivized to seek better jobs. 25% noted seeing people lose critical services. 15% suggested that transitional support is needed to help people overcome this barrier and move forward. Others talked about the need for health care/insurance reform (15%) and job training (10%). Transportation and the CORI system were also mentioned as employment barriers.

Q: ***How do you feel needs related to employment, employment barriers, and/or the "cliff effect" can or should be addressed? By whom?***

A: Of the 20 respondents, 20% placed responsibility for addressing these issues on State and/or Federal government. Providing transitional support/benefits to help people move forward over the "cliff" was mentioned by 15%, as was reforming public assistance guidelines/policies, and increased access to job training and education. More public/private partnerships were noted by 10%, and CORI reform was also mentioned.

Mental Health and Substance Use

30% ***said we need more mental health and substance use services and providers.***

Q: ***Our Community Needs Survey and other data shows that mental health and substance use are having an impact on our communities. How do you see this impact?***

A: All respondents confirmed that they see impacts resulting from mental health and substance abuse. 30% talked about a need for more services and providers. 10% noted the impacts on the children of those struggling with mental health and/or substance use. 10% mentioned the connection between these issues and homelessness.

Q: ***How do you feel needs related to mental health and substance use can or should be addressed? By whom?***

A: More support, services, and providers are needed to address these issues, according to 30% of respondents. 20% called on local government to help, 15% talked about the need for more outreach and education, and 10% mentioned the need to make treatment and support options free or affordable.

Opportunities

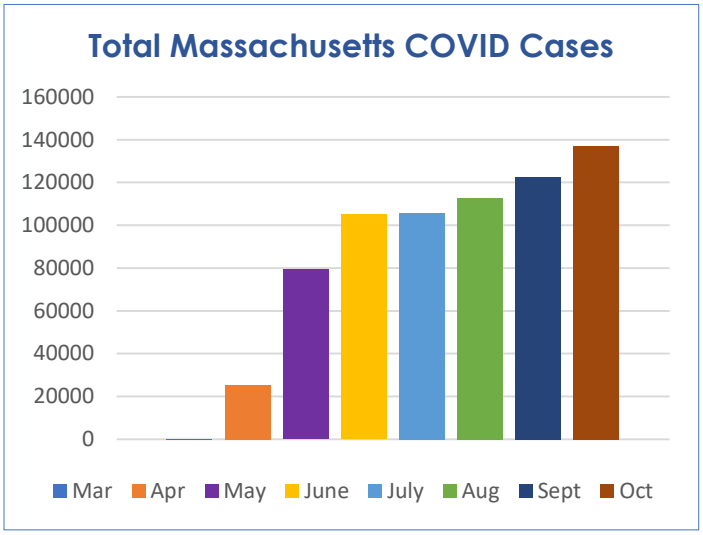
25% ***talked about more communication and partnership between providers.***

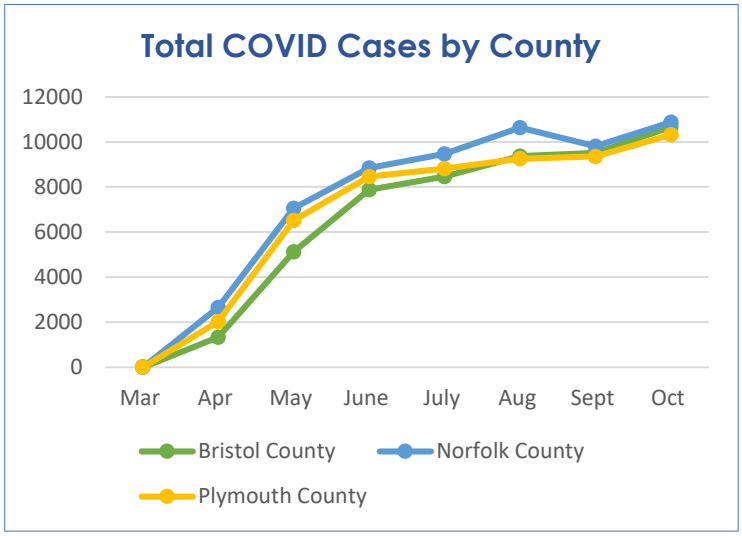
Q: ***What do you see as key opportunities (partnerships, initiatives, gaps that need filling, specific legislation, etc.) that would allow us to work better together to serve people who are struggling and lift up our communities?***

A: A quarter of respondents talked about better partnership, collaboration, and communication between service providers. The need for more government support was noted by 15%, and 10% mentioned program reform, greater consumer involvement, and better outreach respectively. Other opportunities discussed were more whole-family services, better service integration and online access to services/resources, and community-wide meetings.

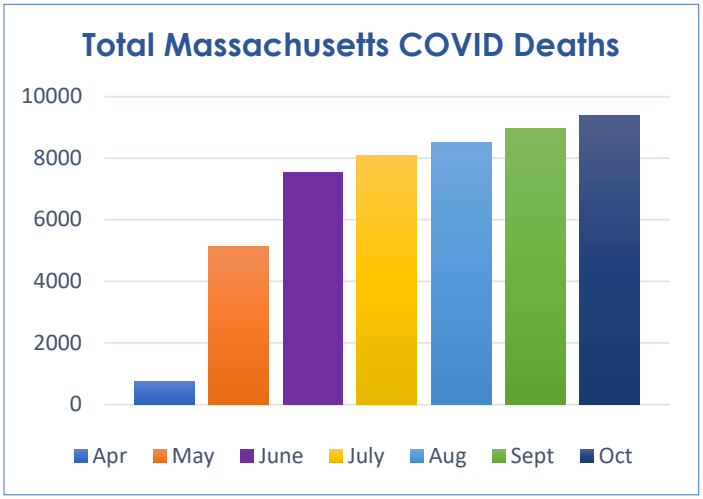
COVID-19 IMPACT ASSESSMENT

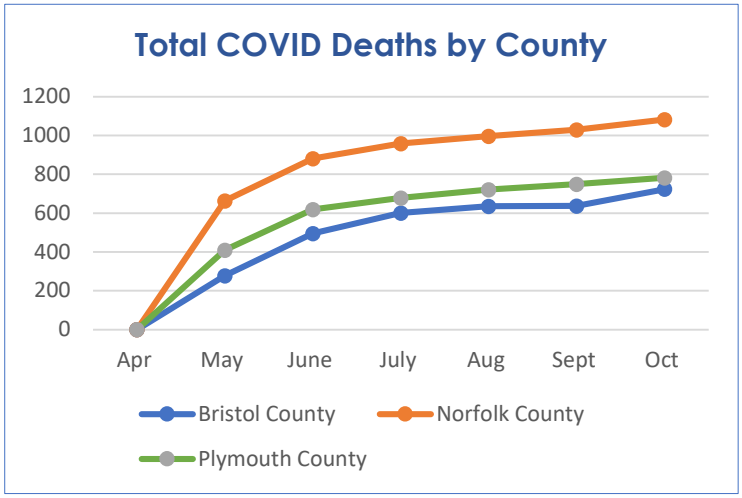
**Please see COVID-19 Impact and Response on Page 5. The following COVID Impact Statement was initially completed in October, 2020 and covers the impact of the coronavirus pandemic from onset in Winter 2019/2020 through October 12, 2020. Any future updates to this information will be noted in subsequent report releases.*





Total COVID Cases March-October, 2020								
	3/12/20	4/12/20	5/12/20	6/12/20	7/12/20	8/10/20	9/12/20	10/12/20
Massachusetts	108	25,475	79,332	105,059	105,629	112,673	122,637	136,933
Bristol County	0	1327	5,125	7,872	8,460	9,371	9,504	10,670
Norfolk County	0	2649	7,046	8,842	9,462	10,639	9,809	10,880
Plymouth County	0	2024	6,507	8,462	8,811	9,258	9,354	10,324





Total COVID Deaths March-October, 2020								
	3/12/20	4/12/20	5/12/20	6/12/20	7/12/20	8/10/20	9/12/20	10/12/20
Massachusetts	108	756	5,141	7,538	8,110	8,519	8,987	9,401
Bristol County	0	0	278	496	601	635	637	724
Norfolk County	0	0	663	882	958	997	1,030	1,083
Plymouth County	0	0	409	619	679	722	749	783

Source: Massachusetts Department of Public Health, Archive of COVID-19 Cases in Massachusetts, https://www.mass.gov/info-details/archive-of-covid-19-cases-in-massachusetts#august-2020-

COVID-19 in Massachusetts: A Timeline

March 10:	Governor Baker declares a state of emergency
March 13:	Gatherings of more than 250 people prohibited
March 15:	Gatherings of more than 25 people prohibited
March 15:	K-12 schools closed until April 6
March 18:	Child care programs closed
March 23:	Gatherings of more than 10 people prohibited; Governor's order ensures continued operation of essential services and closes certain workplaces
March 25:	Closure of K-12 schools extended until May 4
March 27:	Coronavirus Aid, Relief, and Economic Security (CARES) Act passed by Congress and signed into law, giving Community Action Agencies and other organizations more resources to respond to the crisis
April 2:	Access to and use of state beaches limited
April 21:	Closure of K-12 schools extended until June 29
April 9:	Governor's order authorizes nursing practice by nursing school graduates and students
April 20:	Act signed into law placing moratorium on evictions and foreclosures until August 18
May 1:	Face-coverings required in public places where social distancing is not possible and at all times on public transit and in retail settings
May 18:	Governor's order implements phased reopening of workplaces and imposes workplace safety measures; reopening of Phase I enterprises authorized
June 6:	Reopening of Phase II enterprises authorized
June 26:	Reopening of child care programs authorized
July 2:	Reopening of Phase III enterprises authorized; limit on gatherings raised to 25 people for indoors and 100 for outdoors
July 21:	Eviction and foreclosure moratorium extended until October 17
July 24:	Mandatory 14-day quarantine requirement instituted for travelers arriving in Massachusetts
August 7:	Limit on outdoor gatherings reduced from 100 to 50
Sept 29:	Indoor gathering limit remains at 25; outdoor gatherings at private residences limited to 50 people; outdoor gatherings at event venues and in public settings limited to 100 in lower risk communities and 50 in higher risk communities

COVID-19 Community Snapshots: October 7, 2020

	Total Cases	Cases in Last 14 Days	Average Daily Incidence Rate per 100,000 (Last 14 days)
Brockton	4,884	122	8.9
Attleboro	887	68	10.5
Randolph	1,083	41	8.6
Stoughton	687	27	7.0

On the Rise

Brockton, Attleboro, Randolph, and Stoughton all saw a greater increase in cases from September 20 to October 3 than in the previous 14 days

Brockton

#4 = Rank in MA for highest total cases per 100K people since pandemic start, as of October 12

Source: Massachusetts Department of Public Health, Count and Rate of Confirmed COVID-19 Cases and Tests Performed in MA by City/Town, January 1, 2020 – October 7, 2020, https://www.mass.gov/doc/weekly-covid-19-public-health-report-october-7-2020/download

Communities of Color Are Being Hit Harder

Massachusetts COVID Cases by Race/Ethnicity as of October 13, 2020		
	% of Population	% of Total Cases
Black/African American Alone	7%	13%
Hispanic/Latino	12%	32%
White Alone	73%	43%

Source: The COVID Tracking Project, Racial Data Dashboard, October 13, 2020, https://covidtracking.com/race/dashboard

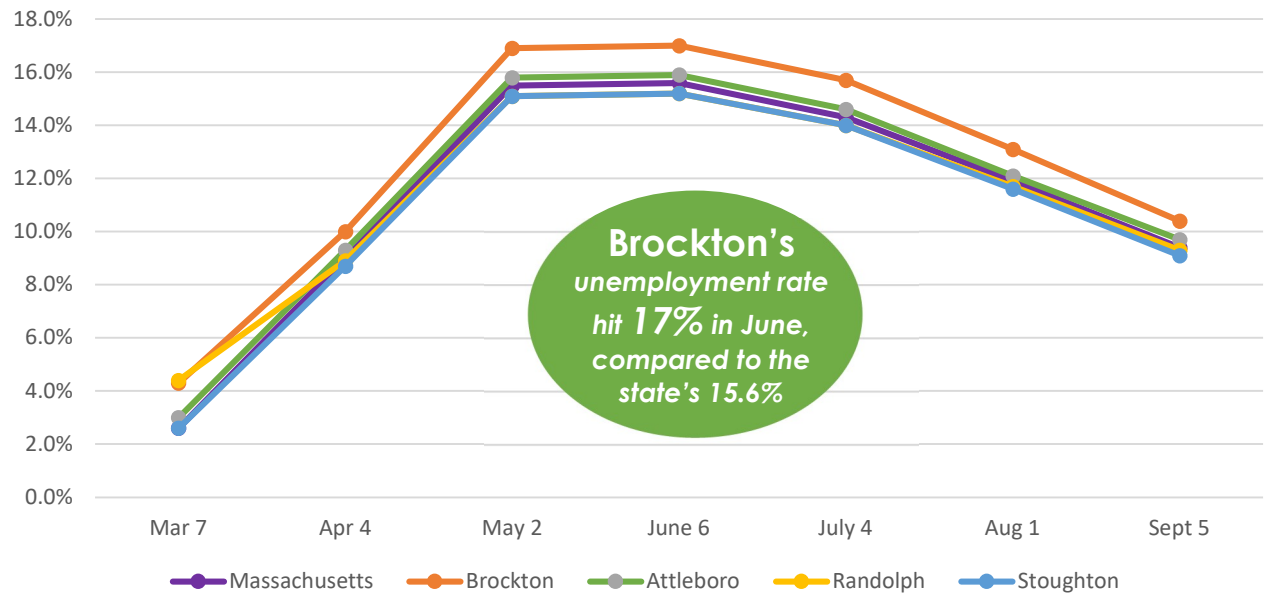
Nationwide
Black people are dying at 2.3 times the rate of white people.

Locally

"Brockton and Randolph, with large Black communities, have the state's highest rates of COVID-19 cases."
~ UMASS Donohue Institute, Donohue Data Dash: Linking COVID-19 cases with race, housing and socioeconomic status in Massachusetts spotlights inequalities, May 2020

Jobs are Unstable

Unemployment Rate Community/State Comparison by Month



Unemployment Rates - State, County, Community - March-September, 2020							
	3/7/20	4/4/20	5/2/20	6/6/20	7/4/20	8/1/20	9/5/20
Massachusetts	2.6%	9.0%	15.5%	15.6%	14.3%	11.9%	9.4%
Bristol County	3.1%	8.9%	15.2%	15.3%	14.1%	11.7%	9.3%
Norfolk County	2.3%	8.3%	14.2%	14.3%	13.2%	10.9%	8.6%
Plymouth County	2.6%	8.9%	15.3%	15.4%	14.1%	11.7%	9.3%
Brockton	4.3%	10.0%	16.9%	17.0%	15.7%	13.1%	10.4%
Attleboro	3.0%	9.3%	15.8%	15.9%	14.6%	12.1%	9.7%
Randolph	4.4%	8.9%	15.1%	15.2%	14.0%	11.7%	9.3%
Stoughton	2.6%	8.7%	15.1%	15.2%	14.0%	11.6%	9.1%

Source: Pioneer Institute Public Policy Research, COVID Unemployment Tracker, https://pioneerinstitute.org/news/where-in-massachusetts-is-being-hit-hardest-by-unemployment-due-to-covid-19/

Nationally

Women Are Sacrificing

"Four times as many women as men dropped out of the workforce in September. Of the workers who left, 865.000 (80%) were women, including 324,000 Latinx and 58,000 Black women."
~ Coalition on Human Needs, COVID-19 Watch: Tracking Hardship, October 9, 2020

Anxiety Mounts, People Fear Loss of Income and Housing

U.S. Census Household Pulse Survey: Massachusetts, September 16 - 28, 2020		
Survey Response	**Total**	**% of Responding**
Self or household member experienced loss of employment income since March 13	2,468,388	46.7%
Somewhat or very difficult to pay for usual household expenses	1,452,096	28%
Somewhat or very likely to leave this home due to eviction in next two months	75,249	40%
Somewhat or very likely to leave this home due to foreclosure in next two months	35,445	22.5%
Sometimes or often not enough to eat in the last 7 days	366,985	7.8%
Frequency of feeling ***nervous, anxious, or on edge*** over last 7 days	2,922,892	67.2%
Source: U.S. Census Bureau, Week 15 Household Pulse Survey: September 16 – September 28, https://www.census.gov/data/tables/2020/demo/hhp/hhp15.html		

***40%** of reporting MA renters feared eviction in the next two months*

Mental Health Worsens

"During late June, 40% of U.S. adults reported Struggling with mental health or substance use. Younger adults, racial/ethnic minorities, essential workers, and unpaid adult caregivers reported having experienced disproportionately worse mental health outcomes, increased substance use, and elevated suicidal ideation."

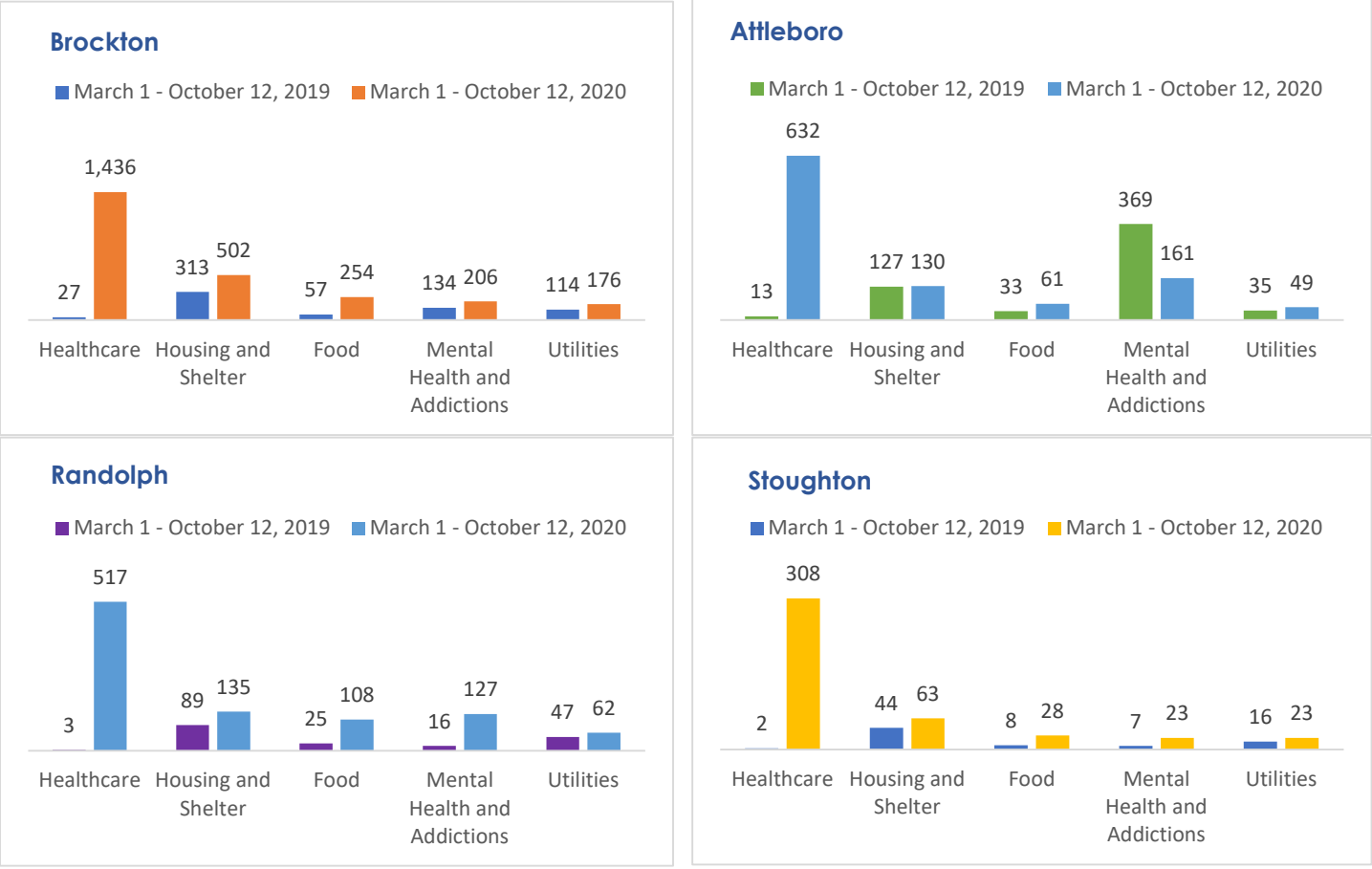
~ Centers for Disease Control and Prevention, Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic - United States, June 24–30, 2020, Published August 14, 2020

Worried and Wondering Where to Turn

Brockton Interfaith Community COVID-19 Community Needs Assessment Findings		
Who Responded?		
1,018 surveys were returned from the Greater Brockton area between April 8, 2020 and June 30, 2020. A majority of respondents (69%) were female. Nearly half (45%) of all respondents self-identified as Black or African American and 36% as Cape Verdean. Approximately half (48%) reported household incomes of less than $20,000.		
What are Respondents Worried About? *(Most Commonly Selected Concerns)*	**Total**	**% of Responding**
Not enough food	727	71%
Not being able to pay rent/mortgage	417	41%
My health and/or love ones' health	250	25%
Loss of income	237	23%
Only 20% of respondents were sure they knew of any support services		
Source: Brockton Interfaith Community COVID-19 Community Needs Assessment Findings, April-June 2020, Final Report		

More of Our Community Members Seek Help

MA 2-1-1 Counts: Top Service Requests Comparison



Source: MA 2-1-1 Counts, https://ma.211counts.org

But More Assistance is Still Needed

Housing Crisis Worsens

"Virtually no community in Massachusetts will be exempt from significant need for housing assistance when the CARES Act supplements and the eviction moratorium are history."

~ Metropolitan Area Planning Council, June 15, 2020

Estimated Housing Assistance Need After CARES Act Benefits End (Monthly), Based on May 2nd Unemployment Claims

	Total Housing Assistance Need	Unemployment Claims	Number of Households Needing Assistance
Brockton	$2,299,343	9,586	2,050
Attleboro	$799,684	4,137	901
Randolph	$941,615	3,546	790
Stoughton	$635,347	2,696	564

Source: Metropolitan Area Planning Council, Estimated Housing Assistance Need After CARES Act Benefits End (Monthly) Based on May 2nd Unemployment, https://www.mapc.org/planning101/covid-19-layoff-housing-assistance-now-by-municipality/

Immigrants at Greater Risk

"About 55,000 undocumented workers — almost half of Massachusetts' employed undocumented workers — are at high risk of losing their jobs or losing income because of the COVID-19 crisis."
~ Massachusetts Budget and Policy Center, June 5, 2020

Community Survey: The Impact of COVID-19 on Immigrants in Massachusetts	
Survey Response *433 respondents across MA including 149 households with undocumented members*	**% of Total Responding**
Reported at least one job loss in their household	76.4%
Among households with undocumented residents, did not get unemployment	82%
Behind on rent and worried about losing housing	27.7%
"Immigrant families face the same distress as all working-class Americans, but it is exacerbated by their exclusion from crucial safety-net programs and stimulus payments, and for the undocumented, by limited work opportunities and pervasive fear."	
Source: Massachusetts Immigrant and Refugee Advocacy Coalition, Community Survey: The Impact of COVID-19 on Immigrants in Massachusetts, https://www.miracoalition.org/resources/covid19/community-survey-the-impact-of-covid-19-on-immigrants-in-mass/	

Community Action and COVID

Massachusetts Community Action Survey: Current Agency Activities During COVID-19

Report by the Massachusetts Association for Community Action, June 2020
18 of the state's total 23 Community Action Agencies responded to the survey between May 18 and June 1, 2020.

Overview

The COVID-19 pandemic has impacted the services offered by Community Action Agencies in a number of ways, in many cases prompting agencies to expand or add new services to meet increasing and shifting needs, while in other cases programs or services were decreased or ceased due to the limitations of remote operation and reduced capacity.

Food Access

Half of agencies responding operate food pantries/banks, and two-thirds provide food delivery services. 100%, reported seeing an increased need for food services since the start of the pandemic, and 78% have expanded or added new food access services while 28% have decreased or ceased these services.

Housing and Shelter

89% provide housing assistance, and 100% of those reported seeing an increased need for services, with 72% of all respondents reporting they have expanded or added new housing and shelter services during the pandemic.

Access to Critical Supplies

94%, have seen an increased need for critical supplies such as diapers, masks, and cleaning supplies, and more than half have expanded or added these services.

Self Help ***reported seeing increased need for food assistance, housing and shelter services, critical supplies, children/youth education services, home heating assistance, and tax assistance.***

Health and Wellness

64% have seen an increased need for health and wellness services, including mental/behavioral health services, with half of all respondents reporting that they have expanded or added new services during the pandemic.

Education and Employment

78% have pivoted to provide remote learning opportunities for children/youth, while half have done the same for adult education. While 44% reported that they expanded or added new services during the pandemic, 28% had to decrease or cease these services. This is similar to the 30% who reported decreasing or ceasing employment services, though as agencies assess reopening and face the huge increase in unemployment, we anticipate these services will increase.

Energy Programs

While 76% reported that they have been able to operate Fuel Assistance remotely, half had to temporarily decrease or cease their weatherization and energy conservation programs.

Tax Assistance

With the pandemic hitting in the midst of tax season, there was a statewide effort to move all 21 CAA tax assistance sites toward being able to complete tax returns remotely. At the time of the survey, 57% reported that they were offering remote services while 43% reported that they had temporarily decreased or ceased tax assistance.

Access to Public Benefits and Services

Many of our agencies help connect people with critical public benefits, and 64% reported seeing an increased need for these services, while 43% reported that they have expanded or added new services.

Linkages and Partnerships

To meet the needs in their communities, our agencies work with hundreds of partners. Since the pandemic began, 89% reported that they have developed new partnerships or collaborations, 83% reported that existing partnerships have been strengthened, and more than half reported that they have both received and provided increased referrals.

Source: Massachusetts Association for Community Action, Current Agency Activities During COVID-19, May 18-June 1, 2020

73.9% **Of Massachusetts Community Action Agencies – *including Self Help* – began offering NEW food access services in response to COVID-19.**

Source: Massachusetts Association for Community Action, Addressing Food Insecurity CAA Survey, April 24, 2020

Reported that COVID-19 caused additional demands on existing programs and services. **95.6%**

COMMUNITY NEEDS ASSESSMENT: KEY FINDINGS SUMMARY

As the data in this report highlights, the communities served by Self Help are up against a number of critical challenges. ***Prior to the global COVID-19 pandemic, many of our neighbors already faced an inability to pay for housing and basic living expenses*** like heat, childcare, and healthcare. Despite working full-time, many residents still could not afford to get by without assistance, and others feared that ***by making just a little bit more income, they would lose critical benefits keeping their families afloat.***

Those who'd spent a lifetime working and looked forward to retiring struggled as well, and as we see our communities aging and huge increases among the elderly, ***we will face the challenge of making sure our seniors are properly cared for.***

We also saw tremendous growth in Black and Hispanic/Latino residents in the primary cities and towns we serve, yet like the rest of the nation, we are all becoming more aware of how ***systemic racial disparities put these community members at much greater disadvantage and risk*** than their white neighbors.

Some of our communities, particularly within Brockton, were hit much harder than most of the state by the opioid epidemic and see ***poor mental health and substance use impacting far too many families.***

All of these challenges existed prior to March 2020. Many have been compounded exponentially since our country, state, and local communities began to feel the full brunt of the pandemic. ***Now, we also see widespread job loss and families struggling to put food on the table, while also fearing for their health and mourning the loss of loved ones.***

Looking ahead, we see uncertainty and barriers to wellness and progress that can feel paralyzing. Yet we also see community members and community partners ***coming together like never before,*** and the local response to help our most severely impacted neighbors has been incredibly inspiring.

Need Statements
Housing • Individuals and families need financial assistance and support to maintain safe, affordable housing and avoid eviction/foreclosure and housing insecurity. • Our communities need more affordable housing options.
Living Wage Jobs • Individuals need living wage jobs to afford living expenses. • Our communities need more available employment opportunities offering a living wage.
Living Expenses • Individuals and families need financial assistance and support to be able to afford basic living expenses like food and heat/utilities.
Childcare • Individuals and families need affordable childcare to enable caregivers to work. • Our communities need more affordable, accessible childcare options.
Health and Wellness • Individuals and families need access to affordable, accessible health care, including services and support for mental health, substance use disorders, and COVID-19. • Our communities need increased health care services to meet increasing demand.
Community and Systems Change • Our communities need safety net program reform to address the "cliff effect" and enable people to pursue their full potential. • Our communities need greater racial equity and support for minority and historically disenfranchised populations, as we continue to see tremendous growth amongst Black and Hispanic community members. • Our communities need expanded senior support services to accommodate major growth within the elderly population.

Internal Assessment Report

INTERNAL ASSESSMENT PROCESS

To further understand and refine the most pressing needs and available resources within the service area, as identified and articulated in the *Community Assessment Report*, and to identify the agency's current capacity and gaps in capacity to address those needs, ***Self Help Inc. embarked on an intensive internal assessment and strategic planning process from Fall 2020 through Spring 2021.***

Primary Assessment Processes and Tools:

- Regular meetings of the joint Board and staff Strategic Planning Committee
- Updates and facilitated discussions at monthly Self Help Inc. Board of Directors meetings
- Collecting and analyzing feedback from community providers and partners through a questionnaire
- Collecting and analyzing customer satisfaction survey data from the past three years
- Reviewing and analyzing agency-wide and program-specific outcomes from each of the last three years, and against the goals and strategies of the *2018-2021 Community Assessment Report and Strategic Plan*
- Sharing the results of the Community Assessment Report and engaging in discussion around capacity and gaps in capacity to meet identified top needs, via a virtual public event held March 25, 2021 and advertised to community partners and providers, Self Help Inc. customers, low-income community members, and the general public
- Collecting and analyzing feedback from Self Help Inc. Board of Directors members via a survey conducted in March 2021
- Collecting and analyzing feedback from Self Help Inc. employees via surveys conducted in October 2019 and again in April 2021
- In the April 2021 survey, new questions were asked related to the agency's response and employees' perceptions around COVID-19 and the national discussion around racial inequity
- Separate facilitated SWOT analysis exercises with Planning Committee members, staff, and with the Board of Directors, identifying the agency's perceived strengths, weaknesses, opportunities, and threats
- Separate facilitated visioning exercises with Planning Committee members, staff, and with the Board of Directors, identifying where participants would like to see the agency headed as we look to the future
- Mission review and exercise conducted separately with Planning Committee members, leadership staff, and the Board of Directors, with Board approval of a new proposed mission statement on April 26, 2021 (see *Agency Mission, Vision and Description* on Page 4)
- Revisiting and analyzing relevant agency-level data collected through the *Community Assessment Report*
- Review of the past three years of performance against the Center of Excellence National Organizational Standards for Community Services Block Grant recipient agencies
- Separate facilitated discussions with Planning Committee members, leadership staff, and the Board of Directors, around the following assessment questions:
    - *What is our agency's overall financial health?*
    - *How visible are we/what are we known for in the community?*
    - *What has been our approach around diversity, equity, and inclusion within our agency, our services, and our community presence?*
    - *Do all our programs address priority needs? If not, why do we continue them?*
    - *Are all of our programs running well/achieving results?*
    - *Do we recruit/retain high quality staff? If not, why?*
    - *How engaged is our Board in the development, planning, implementation and evaluation of the agency's programs and activities?*
    - *Are our staff and Board adequately trained?*
    - *What are the greatest challenges our agency faces?*
    - *How well have we worked with other groups, providers, and partners in the community to address issues related to poverty?*

- Prioritization activity to further refine the list of identified top individual, family, community, and agency level needs and specify where the agency will focus capacity and impact over the coming three years, conducted separately with Planning Committee members and the Board of Directors
- Development of individual, family, community, and agency level strategic goals and specific objectives linked to priority needs, through discussion via Planning Committee, leadership team, and Board of Directors meetings

INTERNAL ASSESSMENT: KEY FINDINGS

Agency Capacity to Meet Top Needs

Board members and Planning Committee members reviewed the top needs summarized in the *Community Assessment Report* (see Page 35, *Community Needs Assessment: Key Findings Summary*) and participated in a prioritization exercise to identify the three-to-five ***priority needs which the agency is most likely to have or develop the capacity to effectively impact***. These need categories are:

- ***Housing***
- ***Basic living expenses***
- ***Childcare***
- ***Health and wellness***
- ***Seniors***

Committee and Board members discussed the other top need categories which were highlighted within the *Community Assessment Report*: the ***need for living wage jobs***, and the ***need for community and systems change*** with regards to addressing racial inequity as well as social service program reform and the "cliff effect."

The outcome of these discussions was the determination that these are community, regional, state, and national level issues which are not currently within the agency's capacity to effectively directly address. However, in the coming years Self Help Inc. will focus attention on identifying and strengthening partnerships in these areas and on continuing to build internal agency capacity to play an increasing role in addressing these critical needs. Some of the near-term steps to be taken toward this goal are outlined in the *Agency Goals and Specific Objectives* chart on Page 47.

For more information, see *Needs, Goals and Specific Objectives* on Page 42.

Staff, Board, Partner and Customer Survey Results

Staff:

Staff members were surveyed in both October 2019 (120 employees responding) and again in April 2021 (120 employees responding) and were asked to rank 29 different indicator statements on the scale: strongly agree, agree, neutral/unsure, disagree, or strongly disagree. Indicator statements covered topics such as ***understanding of mission, goals, and job requirements; communication across programs and agency-wide; and satisfaction with regard to overall employment, Self Help Inc. facilities/resources, administrative operations, and management/leadership.***

The initial October 2019 staff survey showed that the agency was doing well or somewhat well against 21 indicators, and not doing well (25% or more staff responding disagree/strongly disagree) against eight indicators. Areas for improvement included communication, staff recognition/support, and administrative operations. Areas of strength included understanding the agency's mission, program/department goals, job expectations, and strong community partnerships.

When re-surveyed in April 2021, results showed significant improvement. A total of 17 different indicators improved by at least five percentage points. Only two indicators had 25% or more staff responding disagree/strongly disagree; these were ***communication and staff support***, both of which proved enormously challenging over the course of the COVID-19 pandemic, resultant building closures, and transition to remote operations. Notable rating jumps included staff perception of the ***agency's reputation, treatment of clients with dignity and respect, agency innovation, and effectiveness of administrative functions.***

2021 Staff Survey

96% of staff fully understand their role at Self Help Inc., 95% are familiar with their program's goals and objectives, and 95% know the agency's mission.

Still needs work: Communication and staff support

In both surveys, staff were also asked for narrative responses around the agency's areas for improvement, as well as areas in which staff which to see more training and professional development opportunities. The ***need to improve both internal and external communication*** came up most frequently in both surveys, with a desire for more frequent pay increases a close second. Both surveys showed that several staff, primarily within the Head Start program, request additional ***training around serving clients and children with special needs including mental and behavioral challenges***. While training around communication was noted second most frequently in October 2019, in April 2021 it had fallen behind two ***new identified training needs: around diversity, equity, and including, as well as around computer/technology skills.*** Following a year of national discussion around racial inequity and injustice, as well as a move to virtual operations during the COVID-19 pandemic, these emergent needs came as no surprise and will be a focus of agency training efforts moving forward.

Staff Training Needs

Communication, handling challenging behaviors, tech skills in a remote world, and diversity, equity, and inclusion

The April 2021 survey also included new questions related to both the agency's handling of COVID-19 pandemic, as well as related to addressing racial inequity. Asked if Self Help Inc. should play a role in the community in addressing structural racism, 83% responded yes while 15% were unsure. The survey also identified a need to ***look more closely at the agency's policies and practices and whether they are effective in addressing structural racism for the agency and communities we serve.***

Board:

Self Help Inc. Board of Directors members were surveyed in March 2021 around topics such as ***understanding of the agency's mission, programs, goals, and the role of Board members; effectiveness of administration; effectiveness of programs; agency partnerships and reputation; internal and external communication; and effectiveness in addressing identified needs*** within the *2018-2021 Community Assessment Report and Strategic Plan*. Feedback from Board members was overall very positive with very little negative feedback. All respondents strongly agreed or agreed that ***the agency has a strong reputation and partnerships in the community***. Over 90% agreed that ***agency administration is effective*** and that they have a ***strong understanding of Self Help Inc.'s mission, policies and processes, and of their roles and responsibilities as Board members.***

While there was no negative feedback around service provision/programming or on program management or administrative staff, the number of neutral/unsure responses shows a ***need for more awareness around programs and operations***. Likewise, a high number of neutral/unsure responses also suggests that the agency can work toward ***improvement around Board orientation, communication, and information sharing***, including through more regular program outcome and strategic goal progress reports.

2021 Board Survey

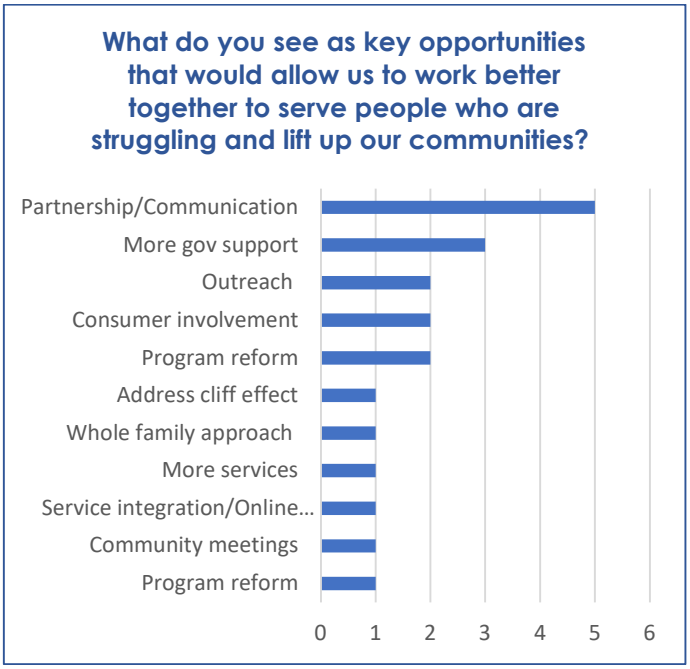
100% of Board members feel Self Help Inc. has a strong reputation and partnerships in the community.

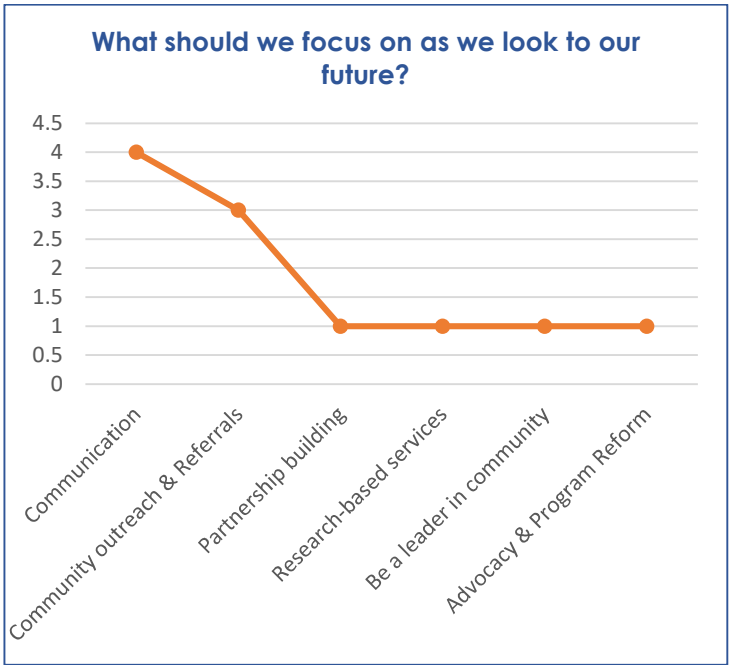
Still needs work: Communication and information-sharing

Community Partners:

Community partners were asked to complete a questionnaire as a follow-up to the Community Needs Survey. Questionnaires were completed by ***20 community partners representing a range of sectors, organizations, and areas of expertise***. These included community and family resource centers, schools, early childhood programs, WIC (Women, Infants and Children) programs, DTA (Department of Transitional Assistance) offices, Visiting Nurse Associations, social workers, workforce development, housing authorities, councils on aging, interfaith collaboratives, literacy centers, health centers, and directors of Self Help programs.

Responses related to needs within Self Help's service area were reported on Page 26 of the *Community Assessment Report*. The below charts display results of questions relevant to the agency's internal assessment process.





Customers:

Customer satisfaction surveys are regularly collected from those receiving services and support through Self Help Inc. These surveys are analyzed and results reported to the Board of Directors every six months. As part of the internal assessment, Self Help reviewed ***survey data from 359 customers served between 2019-2021***. Results are displayed below.

Customer Satisfaction: 359 Surveys Between 2019-2021	
Customer Satisfaction Indicator	**% Responding Positively**
Overall experience met or exceeded expectations	95%
Timely service provided	95%
Would recommend Self Help Inc./service to others	91%
Information provided on other SHI programs	91%
Professional/Courteous staff	89%
Satisfied with experience	86%
Site accessible and easy to find	83%

Organizational Standards of Excellence

The National CSBG Organizational Standards were established in 2015, as a part of an enhanced system for accountability and performance management across the CSBG Network. These standards work together to characterize an effective and healthy organization, with the capacity to provide high-quality services to low-income families and communities. As a whole, the standards reflect many of the requirements of the CSBG Act, applicable Federal laws and regulations, good management practices, and the values of Community Action. *~ Community Action Partnership*

During Self Help Inc.'s most recent assessments conducted by the Massachusetts Department of Housing and Community Development, the agency was found to be compliance with meeting ***100% of the total 58 National Community Services Block Grant Organizational Standards of Excellence in 2019, and with 57 of 58 Standards in 2020***. The Standards assess the agency's performance within the following categories***: 1) Consumer Input and Involvement, 2) Community Engagement, 3) Community Assessment, 4) Organizational Leadership, 5) Board Governance, 6) Strategic Planning, 7) Human Resources Management, 8) Financial Operations and Oversight, and 9) Data and Analysis.***

Additional Measures of Agency Effectiveness and Health

Internal assessment data was collected and discussions were facilitated with the Planning Committee, leadership team, and Board of Directors around additional specific measures of agency health and effectiveness. Below is a summary of findings.

- ***Financial health:*** A review of the agency's finances showed Self Help Inc. to be in a heathy financial position overall. Financial reports are provided to the Board of Directors monthly. Availability of new funding, including Federal CARES (Coronavirus Aid, Relief, and Economic Security Act) funds and a Massachusetts State Budget line item for Community Action, will help the agency to achieve its goals in the coming year. Additional resource development through fundraising, grantsmanship, and partnership building is an area for improvement.
- ***Visibility and reputation:*** While Self Help was generally found to have a strong reputation and partnerships within our service area, and successful efforts have been made over the past two years to boost our marketing and media presence, communication and outreach continue to be areas for improvement. Specifically, a need was identified for a stronger physical presence within the communities we serve, and for additional staff capacity to communicate with existing and potential customers and partners.
- ***Approach to diversity, equity, and inclusion:*** Self Help Inc. is an equal opportunity employer and enjoys diversity within its staff. However, the diversity within our service area and amongst our front line staff is not well reflected amongst agency leadership. Training and capacity devoted to diversity, equity, and inclusion efforts within the agency are areas for improvement.
- ***Program performance and impact on priority needs:*** All current Self Help Inc. programs and services were reviewed and found to address priority needs as identified in the *Community Assessment Report*, and to be effective at making progress toward established goals. Areas for improvement include communication and data collection, management and reporting.
- ***Succession planning:*** The agency has a Board-approved succession plan in place which addresses short- and long-term vacancies of senior leadership. A need was identified for a more robust succession and emergency operations plan which includes other critical positions including program directors. In addition, a need was identified to build internal bench strength and help staff develop professionally by establishing a more formal training plan and increasing the capacity of the Human Resources function.
- ***Staff recruitment and retention:*** The agency's ability to recruit and retain high-quality staff was found to be inconsistent across programs and positions, with recruitment and retention proving effective among management positions, but with higher turnover among front-line staff.
- ***Board engagement:*** With new members joining and senior leadership staff placing additional focus on effectively communicating with members, Board of Directors engagement has improved over the past year. Going forward, efforts will be made to increase Board engagement by facilitating more frequent and robust discussions around program-specific and agency-wide activities and outcomes.
- ***Staff and board training:*** Staff and Board training was a decreased focus during the course of the COVID-19 pandemic and remote operations. Going forward, the agency will work to increase capacity within the Human Resource function and to develop a more formal training plan, in partnership with the Massachusetts Community Action Association (MASSCAP) Training Center.
- ***Partnerships and collaborations:*** Self Help Inc. enjoys partnerships and collaborations with a long list of community partners and providers. However, staff capacity to develop and build community partnerships is limited. A need was identified for additional staffing support around community outreach.

Visioning

Self Help Inc. Planning Committee, leadership team, and Board of Directors members worked together to envision where we would like to see the agency go and what we would like to accomplish in the future. Responses are summarized below.

In five years, what will the "success" of Self Help Inc. look like?

- Self Help Inc. is well known and people are referred to us for help
- Performing at a high level organizationally and meeting or exceeding goals and requirements
- Financially stable with more flexible and unrestricted funding
- Additional staff capacity
- Staff feel challenged, rewarded, and are performing at a high level
- Programs and services have expanded to reach more people
- Services are integrated and clients are helped more holistically
- People in need feel supported and that they have equitable access to opportunities
- More people have better skills, education, living-wage jobs and living conditions
- The agency and service area have more resources and programming to address housing and homelessness
- Self Help Inc. is a partner in all major community initiatives
- Communities and all stakeholders are working together to support common goals and needs

2022-2023 Strategic Plan

NEEDS, GOALS AND SPECIFIC OBJECTIVES

HOUSING

- **NEED:** Individuals and families need financial assistance and support to maintain safe, affordable housing and avoid eviction/foreclosure and housing insecurity.
- **GOAL:** Self Help Inc. will provide financial assistance and support to help individuals and families maintain safe, affordable housing.

Specific Objectives

Year 1

- Establish the Rental Assistance Program, providing emergency financial assistance to prevent eviction
- Work to develop and strengthen partnerships with area housing services providers
- Hire Outreach Coordinator to help connect individuals and families to integrated services to address interconnected needs, including those related to housing

Year 2

- Continue objectives of Year 1
- Seek resources to continue and expand Rental Assistance Program

How Do We Get There?

Linkages/Partnerships: Develop and strengthen partnerships with housing funders, providers and stakeholders, including but not limited to: Neighborworks Housing Solutions, Brockton Housing Authority, Attleboro Housing Authority, Massachusetts Department of Housing and Community Development, Father Bill's.

Funding Strategies: Funding sources may include but not be limited to: Federal Community Services Block Grant funds, Federal CARES (Coronavirus Aid, Relief, and Economic Security Act) funds, Massachusetts State Budget line item for Community Action, and FEMA (Federal Emergency Management Agency) funds. With the hiring of a new Outreach Coordinator, additional capacity will be available in the Planning and Development Department for additional resource development.

Delivery Systems: Objectives will be met via Self Help Inc.'s Rental Assistance Program, partnerships with and referrals to housing providers and stakeholders, participation on regional housing boards/groups/committees, and through the coordinated efforts of the senior leadership team, Planning and Development Department, and Outreach Coordinator.

Gaps/Barriers: Funding, staff capacity, continuity/sustainability of funding, cost of housing, funding streams historically going to other providers, need for stronger partnerships with housing providers and other Community Action Agencies.

LIVING EXPENSES

- **NEED:** Individuals and families need financial assistance and support to be able to afford basic living expenses like food and heat/utilities.
- **GOAL:** Self Help Inc. will provide financial assistance and support to help individuals and families afford basic living expenses like food and heat/utilities.

Specific Objectives

Year 1

- Operate the Attleboro Food Pantry
- Strengthen partnerships with other area food providers
- Provide food assistance through the Head Start program
- Operate the Fuel Assistance and Energy Conservation programs to help households save on home heating and utilities costs
- Serve as a VITA (Volunteer Income Tax Assistance) site and help participants access tax credits and refunds
- Provide assistance with SNAP (Supplemental Nutrition Assistance Program) applications

Year 2

- Continue objectives of Year 1

How Do We Get There?

Linkages/Partnerships: Develop and strengthen partnerships with funders, providers and stakeholders, in particular those supporting food security, energy affordability, and financial literacy and tax assistance, including but not limited to: U.S. Department of Agriculture, Fair Foods, Boston Food Bank, local churches, Stop & Shop, Attleboro School System, Attleboro Library, Attleboro Rotary Club, local Chambers of Commerce, Randolph Food Bank, Brockton food pantries, Trader Joe's, Department of Transitional Assistance, 3M Corporation, Federal Low-Income Home Energy Assistance Program, U.S. Department of Energy Weatherization Program, FEMA, local Councils on Aging, National Grid, Eversource, local municipal utilities, Barr Foundation, Massachusetts Association for Community Action, IRS, and Massachusetts Department of Revenue.

Funding Strategies: Funding sources may include but not be limited to: donations from partners listed above, U.S. Department of Agriculture, American Reinvestment and Recovery Act, Federal Community Services Block Grant, Federal Low-Income Home Energy Assistance Program, FEMA, Attorney General's Office, National Grid, Eversource, U.S. Department of Energy Weatherization Assistance Program, HEARTWAP Program, Barr Foundation, Massachusetts Association for Community Action, IRS, and volunteer hours provided in-kind via local Councils of Aging and other individuals and groups.

Delivery Systems: Objectives will be met via Self Help Inc.'s Attleboro Food Pantry, Head Start program, Fuel Assistance program, Energy Conservation program, VITA program, and through additional efforts of the leadership team.

Gaps/Barriers: High cost of living in service area (especially housing and food), low stock and high prices on materials and appliances (Energy Conservation program), unavailability of contractors (Energy Conservation program), staff capacity to conduct outreach about programs/services, historical underfunding of VITA program.

CHILDCARE

- **NEED:** Families need affordable childcare and support services to enable caregivers to work.
- **GOAL:** Self Help Inc. will provide families with affordable childcare and support services enabling caregivers to work.

Specific Objectives

Year 1

- Operate the Head Start program, providing early education and care to area children
- Operate the ParentChild+ program, providing support services to families and children
- Provide caregiver employment supports through Head Start

Year 2

- Continue objectives of Year 1
- Seek to expand Head Start Norton site to offer full-day and summer programming to better enable caregivers to work

How Do We Get There?

Linkages/Partnerships: Develop and strengthen partnerships with childcare funders, providers and stakeholders including but not limited to: Federal Office of Head Start, Massachusetts Head Start Association, local school districts, local Early Education and Care system, Mass 211, Associates for Human Services, ParentChild+ National Center.

Funding Strategies: Funding sources may include but not be limited to: Federal Office of Head Start, Head Start State Supplemental Grant, Massachusetts Department of Early Education and Care, Early Education and Care voucher program, ParentChild+. In addition, Self Help Inc. and the Head Start program will explore how to best engage with national efforts toward universal pre-K.

Delivery Systems: Objectives will be met via Self Help Inc.'s Head Start and ParentChild+ programs.

Gaps/Barriers: Affordability of other area childcare programs, ongoing impacts of COVID-19 on childcare provision including temporary and permanent closures of some local childcare providers and camps, transportation, need for more affordable and available after-school and summer programming, insufficient pay for early education staff, extended waits for childcare vouchers, childcare voucher reimbursement too low, decreasing area capacity for voucher slots as fewer private care providers accept vouchers.

HEALTH AND WELLNESS

- **NEED:** Individuals and families need access to affordable, accessible health care, including services and support for mental health, substance use disorders, and COVID-19.
- **GOAL:** Self Help Inc. will provide referrals and support to help individuals and families access affordable, accessible health care, including services and support for mental health, substance use disorders, and COVID-19.

Specific Objectives

Year 1

- Operate Head Start program, employing a full-time behavioral health manager, two licensed social workers, and 18 family advocates to help children and families address issues related to health, mental health and substance use
- Operate the Coordinated Family and Community Engagement (CFCE) program, providing information and referrals around mental health support as well as offering parent training around child mental health and wellness
- Through the CFCE program, partner with the Town of Stoughton on a new grant-funded project to assist families impacted by trauma and substance use
- Operate the Hand-in-Hand Case Management program, providing seniors with SHINE health insurance counseling services, MassHealth application assistance, and referrals related to health and mental health
- Develop and strengthen partnerships with area health and mental health providers
- Hire Outreach Coordinator to help connect individuals and families to integrated services to address interconnected needs, including those related to health, mental health and substance use

Year 2

- Continue objectives of Year 1

How Do We Get There?

Linkages/Partnerships: Develop and strengthen partnerships with health-related funders, providers and stakeholders including but not limited to: New Hope Inc., South Bay Community Services, early intervention programs, local mental health providers, local Boards of Health, EEC Mental Health grantees, Town of Stoughton, BAMSI (Brockton Area Multi-Services Inc.), Community Counseling of Bristol County, Brockton Neighborhood Health Center, Brockton Hospital, Family Center at Community Connections of Brockton, 3M Corporation.

Funding Strategies: Funding sources may include but not be limited to: Federal Office of Head Start, Head Start State Supplemental Grant, Federal CARES (Coronavirus Aid, Relief, and Economic Security Act) funds, Massachusetts State Budget line item for Community Action, CFCE program, Massachusetts Department of Early Education and Care, Brockton Redevelopment Authority, 3M Corporation.

Delivery Systems: Objectives will be met via Self Help Inc.'s Head Start, CFCE and Hand-in-Hand programs, and through the coordinated efforts of the leadership team and Outreach Coordinator.

Gaps/Barriers: Need for additional awareness and familiarity of available health providers and resources, need to develop more direct partnerships beyond referrals, securing trainers to provide additional health-related training to staff, ongoing impacts of COVID-19 on health-related services (for example, Head Start dental and health exams discontinued during pandemic), COVID-19-related or worsened mental health issues as well as increased difficulty in identifying health issues in customers and community members.

SENIORS

- **NEED:** Our communities need expanded senior support services to accommodate major growth within the elderly population.
- **GOAL:** Self Help Inc. will work to expand senior support services in the community to help accommodate major growth within the elderly population.

Specific Objectives

Year 1

- Operate and expand the Hand-in-Hand Case Management program, connecting seniors with integrated services, supports and referrals
- Develop and strengthen partnerships with area senior service providers, including the Councils on Aging
- Seek funding and support to assist seniors with home maintenance and repair
- Partner with sister Community Action Agency, Citizens for Citizens Inc., on senior jobs initiative to hire seniors in Self Help Inc. programs

Year 2

- Continue objectives of Year 1

How Do We Get There?

Linkages/Partnerships: Develop and strengthen partnerships with funders, providers and stakeholders around senior support services, including but not limited to: local Councils on Aging, Old Colony Elder Services, Bristol Elder Services, Fallon Community Health, Brockton Redevelopment Authority, U.S. Department of Housing and Development, Brockton Hospital, Brockton Neighborhood Health Center, Citizens for Citizens Inc.

Funding Strategies: Funding sources may include but not be limited to: Fallon Community Health, Brockton Redevelopment Authority, U.S. Department of Housing and Development, National Grid, Eversource, Federal CARES (Coronavirus Aid, Relief, and Economic Security Act) funds.

Delivery Systems: Objectives will be met via Self Help Inc.'s Hand-in-Hand program, and through the coordinated efforts of the leadership team and Outreach Coordinator.

Gaps/Barriers: Challenge of expanding services and funding on pace with growth of senior population, difficulty for seniors in accessing services especially during COVID-19 pandemic, difficulty for seniors in accessing web-based services, lack of funding for senior home maintenance and repairs.

AGENCY GOALS AND SPECIFIC OBJECTIVES

AGENCY GOALS:

- Increase staff capacity
- Increase community presence
- Improve internal and external communications
- Integrate services and improve referral system
- Develop and strengthen partnerships, especially around key need areas including housing and workforce development
- Enhance succession planning and emergency preparedness
- Increase resource development
- Increase focus and engagement around diversity, equity, and inclusion

Specific Objectives

- Hire Community Outreach position to increase capacity around internal and external communications, community presence, service integration and referrals
- Hire additional Human Resources support to increase focus on internal communication; diversity, equity and inclusion (DEI); and staff training including on topics such as DEI, mental health, customer service and communication
- Engage in regular ongoing discussions with major community providers/partners
- Strengthen partnership with MassHire and the Brockton Career Center around workforce development
- Explore engaging with the Massachusetts Department of Transitional Assistance SNAP Path to Work program
- Enhance succession plan to include all key positions, with emergency/short-term and long-term vacancy planning
- Planning and Development staff to increase focus on resource development, including grantwriting and fundraising
- Agency representative(s) to participate in regular MASSCAP Statewide DEI Roundtable meetings

How Do We Get There?

Linkages/Partnerships: Develop and strengthen partnerships with funders, providers and stakeholders including but not limited to: area service providers, training providers and consultants especially around DEI and communications, MASSCAP Training Center, MassHire, Brockton Career Center, Massachusetts Department of Transitional Assistance Path to Work program, NeighborWorks, Family Center at Community Connections of Brockton, individual donors, foundations, Philanthropy Massachusetts.

Funding Strategies: Funding sources may include but not be limited to: Federal Community Services Block Grant funds, Federal CARES (Coronavirus Aid, Relief, and Economic Security Act) funds, Massachusetts State Budget line item for Community Action. With the hiring of a new Outreach Coordinator, additional capacity will be available in the Planning and Development Department for additional resource development.

Delivery Systems: Objectives will be met through the coordinated efforts of the leadership team, senior management, Planning and Development Department, Human Resources Department, Board of Directors and Outreach Coordinator.

Gaps/Barriers: Funding, organizational capacity, limited staff time, availability of effective trainers and consultants.

PLAN IMPLEMENTATION AND MONITORING

Self Help Inc.'s progress toward the goals and objectives included in this *2022-2023 Strategic Plan* will be monitored by the agency's Chief Executive Officer, through reports provided by the Planning and Development Department in partnership with program directors. Progress will be regularly reported to the Board of Directors. Decisions to adjust goals and activities will be made in coordination between the leadership team and program directors, and where applicable, the Board of Directors.

To monitor progress, set annual goals, report on specific outcomes, and comply with funder requirements, Self Help Inc. will complete and submit to the Massachusetts Department of Housing and Community Development an annual Community Action Plan, a semi-annual progress report on the Community Action Plan to report outcomes between October 1 and March 31 of each year, and a final progress report to report outcomes for the full fiscal year (October 1 through September 30). Program directors will be responsible for tracking and reporting on outcomes relevant to their respective programs and services, and for providing regular updates to the Planning and Development Department and leadership team.

The following questions will be used to monitor and evaluate the implementation of the *Strategic Plan*:

- Will the goals be achieved according to the timelines specified in the *Strategic Plan*? If not, why?
- Should the deadlines for completion be changed? Understand why and the impact.
- Do personnel have adequate resources (funding, equipment, facilities, training, etc.) to achieve the goals?
- Are the goals and objectives still realistic?
- Should activities be changed to put more focus on achieving the goals?
- What can be learned from the monitoring and evaluation of the plan?

Next Steps

The mission of Self Help Inc. is to foster healthy, inclusive communities through programs and resources that empower residents to access equitable opportunity, achieve stability, and thrive. Self Help aspires to be a recognized community leader and partner in efforts to advocate for and progress toward an end to poverty. We envision our service area as a place where people in need feel supported, respected, and empowered to access equitable services, resources, and opportunities.

In the coming months and years, we will continue to work toward this mission and vision as we have since 1965, as well as in new ways to combat challenges never before seen in our lifetimes and to improve systems that impede progress.

The results of the *Community Assessment Report* will be made publicly available in Summer/Fall 2021. Self Help Inc. will begin implementation of the *2022-2023 Strategic Plan* on October 1, 2021.

Self Help wishes to acknowledge the many individuals and organizations that contributed to this report.

~ May 24, 2021