

**Poverty in Whitman County, Washington**  
**A Study by the League of Women Voters of Pullman**  
**May, 2016**



## **Report Prepared By:**

Mary Collins, Chair

### ***Childcare***

George Kennedy and Judy Meuth

### ***Education and Job Training***

Janet Kendall, Paul Spencer, Libby Walker

### ***Elder Care***

B. J. Carlson, Naomi Calkins-Golter, Muriel Jordan, Lucy Linden, Suzanne Polle

### ***Food Security***

Mary Collins, Ashley Hope, George Kennedy, Ryan Lazo, Bertie Weddell

### ***Health Care***

Ginger Harstad-Glawe, Judy Stone

### ***Housing***

Martin Beuller, Mary Collins

### ***Law Enforcement and Legal Services***

Lenna Harding, Tessa Scholl, Jane Von Frank

### ***Transportation***

Karen Kiessling, Paul Spencer

### ***Information Distribution***

Mary Collins

Susan Daniels, George Kennedy, Alice Schroeder: Editing

Katie Bittinger: Study design and data access



## **Executive Summary**

Whitman County has been described as the poorest county in Washington state with a poverty level of 32.6% (American Fact Finder<sup>2</sup>, 2013). U.S. Census studies suggest this statistic is distorted by the high number of Washington State University students living in Pullman relative to the general population. Correcting for this still leaves Whitman County with a poverty level of about 16.7 %, higher than the state average of 14.1%. Paradoxically, Whitman County has some of the lowest unemployment figures and best schools in Washington state (Tweedy, 2015). Additionally, it appears that Whitman County has more citizens in need than are accessing resources available to them. This results in reduced allocations to Whitman County from state and federal resources. It is not clear that the lower use of resources results from people choosing not to use such services or if there are barriers to access. The greatest poverty in terms of absolute numbers is in Pullman; however, the smaller towns throughout Whitman County have higher relative proportions of low-income households. This is more pronounced in the northern part of the county.

### **Child Care**

Eligibility limits for the Washington state Working Connections Child Care subsidies exclude many families who are above the limits but who still cannot afford child care on their own. Working Connections eligibility procedures sometimes leave families who qualify temporarily without subsidies, and exclude parents who are full time students (unless single) but who do not work at least part time. As of 2016, state funding for Working Connections Child Care will fall below the demand by families in need. Capacities in state and federal free preschool programs, Early Childhood Education Assistance Program (ECEAP), Head Start, and Early Head Start, are designated as sufficient by the state. However, these programs are required to maintain waiting lists of children ready to move into any vacant slot, so there are always families waiting to get in. Several rural towns in Whitman County do not have adequate or any licensed child care or school district preschool capacities, causing families to travel back and forth to other towns with greater capacities in order to provide their children with child care. This situation is particularly difficult for families in poverty.

### **Education and Job Training**

Whitman County follows the nation and state in having high levels of children living in poverty as demonstrated by participation in the subsidized school meals program. Children represent about one third of the poor in Whitman County. Schools in the county receive significant state and federal resources to promote educational success for low-income students. Participating in job training and seeking employment are requirements of a number of assistance programs. Spokane Falls Community College in Pullman partners with local service providers to encourage and assist low-income students who seek higher education.

## **Elder Care**

The elderly make up about one third of low-income individuals in Whitman County. Services for low-income, elderly persons focus on health care and transportation, as well as housing and food security.

## **Food Security**

Most of the federal and state funds for food go toward programs for children. The regional system for obtaining and distributing food to low-income households is large and complex. Most food within this system is donated by food producers, distributors, and retailers. Food distribution services are present in all of the towns in Whitman County and appear to constitute important social and cultural experiences for both the volunteer providers and users of the food pantries. Food made available by these organizations is often limited in quantity and time of availability. Food from food pantries, as well as state and federal programs, is still not sufficient to meet minimum needs. Promising local efforts are addressing the availability of fresh food and promoting improved nutrition and education to enhance food self-sufficiency. Between 10% and 19% of low-income households in Whitman County report going hungry in the last year due to lack of available nutritious food (Bittinger, 2015).

## **Health Care**

Health care is the most complex and expensive system of services in Whitman County. Greater access to health insurance is improving services but placing greater burden on poorly reimbursed providers. Access to dental services is especially difficult as determined by the Health and Social Services Needs Assessment Study in Whitman County (Bittinger, 2015), as well as this current study. Low-income children and the elderly generally have easier access to health care support than do non-disabled adults whose low-wage jobs often lack benefits. The long history of difficult access to health care nationally has resulted in many low-income communities having insufficient understanding of access to and use of the health care system.

## **Housing**

Homelessness is not currently a major problem in Whitman County, although there is more homelessness than apparent. Emergency funds for immediate access to shelter are modest but appear to be adequate at this time. Of greater concern is the instability of these funds since they are completely reliant on individual and business gifts and word-of-mouth fund raising. The greatest housing needs are for transitional and long-term housing for low-income families and individuals. Family Promise, which works with homeless families with children is an especially effective effort at providing short-term (90 day) shelter as well as food, job seeking assistance, and training in family and financial skills. Low-income, long-term housing resources are inadequate and in Pullman struggle for adequacy in the student driven rental market. Efforts at low-income home ownership are promising and have some unique design and funding partnerships that facilitate construction of such housing in economically diverse neighborhoods, thereby improving the social networks of low-income families and property values within the community.

## **Law Enforcement and Legal Services**

First responders including police, fire, and ambulance services do important work assisting service organizations reaching those in need. Individuals and families needing legal services have access to public support in criminal cases and some civil cases, but lack access to resources in most non-criminal cases. In order to assure emergency communication abilities, federal programs provide free or low cost telephones to low-income households.

## **Transportation**

Public transportation is widely available in Pullman only. In addition, many services and retail opportunities are available only in Pullman or Colfax creating difficulty for those living in the areas more distance from these towns. This is especially the case for non-health care related travel. Pullman Transit as well as COAST transportation are exploring avenues for increasing transportation resources in Whitman County. Thirty percent of low income, non-Pullman households reported difficulty in accessing transportation to needed services in the past year (Bittinger, 2015).

## **Information Distribution**

The work of the large number of public and charitable efforts to serve low income households in Whitman County is hampered by the lack of a centralized, easily accessible, thorough, detailed, and up-to-date description of these services. Service providers are very good at working with other individuals and organizations in their service area, but may lack information about topics beyond their specialty. Multifaceted organizations such as the Community Action Center have the best information, but even this is incomplete. In 2015 YMCA of the Palouse took over the hosting and administration of the On-line Palouse Resource Guide, originally designed to provide health and human service agency information for both residents and service providers. Maintenance of the web site, however, has become problematic and suffers from inadequate staffing and funding.

## Table of Contents

<a href="#">Introduction and Methodology</a> .....	1
Results.....	3
Who Are Whitman County’s Poor?.....	3
What Services are Available to Those Living in Poverty?.....	6
Cash Assistance.....	6
<a href="#">Child Care</a> .....	7
Context.....	7
Need for Child Care.....	8
Child Care Capacity.....	9
Child Care Services.....	9
Child Care Costs.....	11
Publicly Funded Free and Subsidized Child Care.....	12
Head Start, Early Head Start, and Early Childhood Education and Assistance Program.....	12
Additional Federal and State Subsidies.....	14
USDA Food Subsidies.....	14
Child Care Access Means Parents in School .....	14
Special Needs Support.....	14
Provider-Offered Subsidies .....	14
Conclusions.....	15
<a href="#">Education and Job Training</a> .....	17
School Districts in Whitman County.....	17
College Bound Scholarship Program.....	18
WorkFirst.....	19
WorkSource.....	20
Boost Collaborative Washington.....	20
Rural Resources.....	21
Conclusions.....	21
<a href="#">Elder Care</a> .....	22

Context.....	22
Services for Elderly in Poverty.....	23
Circle of Caring Adult Day Care.....	24
Rural Resources Aging and Disability Resource Center.....	24
Friends of Hospice.....	25
Pullman Community Council on Aging.....	25
Conclusions.....	26
<a href="#">Food Security</a> .....	27
Context.....	27
Public Programs.....	28
Supplemental Nutrition Program for Women, Infants, and Children (WIC).....	28
Supplemental Nutrition Assistance Program (SNAP).....	29
Free and Reduced Price School Meals.....	30
Charitable Programs.....	33
Food Pantries in Whitman County.....	34
Community Garden and Gleaning Programs.....	36
Backyard Harvest.....	37
Pullman Community Action Center Food Bank Garden Program.....	37
Palouse Fresh Food Project.....	37
Regularly Organized Food Drives.....	37
Food Quality and Access to Food in Whitman County.....	37
Strengths and Weaknesses in the Food Security System in Whitman County.....	39
<a href="#">Health Care</a> .....	40
Social and Economic Determinants of Health.....	40
Shortage Areas for Primary Medical Care in Whitman County.....	40
Hospitals.....	41
Pullman Regional Hospital.....	42
Whitman Hospital and Medical Center.....	42
Public Health.....	44
Whitman County Health Care Providers.....	45

Primary care providers.....	45
Obstetrics and Gynecology.....	47
Pediatrics.....	47
Other Clinic Settings, 2014.....	48
Pullman ReadyCare.....	48
The Palouse Free Clinic.....	48
Planned Parenthood.....	48
Rural Health Clinics.....	49
Palouse Health Center.....	49
Physician Specialists.....	49
Mid-Level Practitioners.....	50
Mental Health Providers.....	50
Palouse River Counseling.....	50
WSU Psychology Clinic.....	50
Dentists.....	50
Dental Services for Children.....	51
Vision Care Providers.....	52
Pharmacies.....	53
Health Insurance.....	53
Mental Health Insurance.....	54
Medicaid.....	54
Medicare.....	56
Conclusions.....	56
<a href="#">Housing</a> .....	58
Homelessness.....	59
Housing Resources for those living in poverty in Whitman County.....	60
Emergency/short-term Housing.....	60
Alternatives to Violence of the Palouse.....	61
The Community Relief Fund.....	61
Transitional Housing.....	61
Crises Rental Assistance/Consolidated Homeless Grant.....	61

Tenant Based Rental Assistance.....	62
Family Promise of the Palouse.....	62
Long-term Housing .....	63
Section 8 Housing.....	63
Community Action Center Housing.....	64
Self Help.....	65
Habitat for Humanity.....	66
Strengths of Low Cost Housing Programs in Whitman County.....	67
Recognized needs for Low Cost Housing Programs in Whitman County.....	68
<a href="#">Law Enforcement and Legal Services</a> .....	69
Law Enforcement.....	69
Access to Courts and Legal Services.....	69
Legal Problems of Low-Income Washingtonians.....	69
Reports of Whitman County Civil Legal Needs.....	70
Policies Intended To Mitigate The Legal Disadvantages Of Poverty.....	71
Civil Legal Advice and Advocacy for Whitman County’s Poor.....	73
<a href="#">Transportation</a> .....	76
Transportation service providers in Whitman County.....	77
COAST.....	77
Special Mobility Services.....	78
Pullman Transit-Fixed Route Buses and Dial-A-Ride.....	80
Other Transportation Information.....	81
Conclusions.....	81
<a href="#">Information Distribution</a> .....	82
<a href="#">References Cited</a> .....	83
<a href="#">Appendix 1: Record of Interviews</a> .....	93
<a href="#">Appendix 2: Childcare</a> .....	99

## **Introduction and Methodology**

According to the U.S. Census, 14.8% of citizens in the U.S. live below the federal poverty level (DeNaves-Walt and Proctor, 2015). In the State of Washington this number is 13%. The number in Whitman County has been reported as 33.2% (Bishaw, 2013). At the same time, Whitman County has one of the lowest unemployment rates and some of the best educational systems in Washington State (Tweedy, 2015). This apparent paradox inspired the League of Women Voters of Pullman to conduct a two-year study of poverty in Whitman County. The goals of the study were to try to understand this paradox by learning more about who are Whitman County's poor and to learn about resources available to those living in poverty in our county.

We did our study by reading about and interviewing representatives of organizations and agencies in Whitman County that serve those living in poverty. Our study is a complement to the recently completed Health and Social Services Needs in Whitman County 2015 Community Needs Assessment that provides a systematic analysis of community members' responses to questions about their needs and uses of various services (Bittinger, 2016).

We looked at eight different service areas: childcare, education and job training, elder care, food security, health care, housing, law enforcement and legal services, and transportation. In each of these areas we attempted to describe the services available, report on the number and character of service users, and compare the attributes of these in Whitman County with the state of Washington and the U.S. generally.

We began our study by trying to identify organizations and agencies serving low-income people in Whitman County. We used our collective experiences, the Internet, and various publications to develop a list of such organizations. We then developed a set of general questions aimed at identifying information about the types of services, the scale of operations, and the size and demographic character of the communities being served. We also developed questions specific to each of the study areas. After reading as much as we could about these organizations in publicly available resources, we wrote to each explaining our goals and asking for an opportunity to interview a representative. In most cases, we found people able and willing to work with us, but in some instances time and other concerns led some to choose not to participate. A list of interviews is presented in Appendix 1.

A number of organizations that provide services to low-income families and individuals, often at significant levels, were not included in our study. These include faith-based organizations that do a great deal of work in this area, but do not always keep detailed records of expenditures and prefer not to publish details of their work in order to protect their own privacy and that of those they serve. In addition, some of the programs we studied are not set up specifically to aid those in poverty, but the nature of their work means they often help poor people. In many of these cases, it was not possible to separate data related to those living in poverty from the more general populations being served.

One of our goals was to obtain specific numbers related to costs and numbers of individuals and families served. Early on we found that getting such reliable numbers is often difficult. Different

reporting time frames and methods meant we often found summary numbers hard to obtain or contradictory. Therefore, all of the numerical information reported should be considered as an indication of scale of costs and services, not as absolutes. Similarly, we tried to use the most recent information available, but this often varies by up to several years.

## Results

### Who Are Whitman County's Poor?

The first significant finding of our report was that the 33.2% level of poverty reported for Whitman County is neither a clear nor correct representation of the economic status of our citizens. The 2012 census estimates that the population of Whitman County is 46,606 (U.S. Census, 2016). The number of students on the Pullman campus of Washington State University in the fall of 2015 was 20,043 (WSU, 2016). Because the census treats students living apart from their families in off-campus households the same as other households, and because most students do not have full-time jobs, it has been recognized that in communities with high numbers of post-secondary students relative to total population poverty figures are distorted (Bishaw, 2013).

For U.S. communities with total populations of 20,000 to 60,000 this distortion was most pronounced in Whitman County, Washington (Bishaw, 2013:18). Bishaw considered what the level of poverty would be if those households of students living off-campus, but not with family members, were removed from the equation. For Whitman County this adjusted figure is 16.7% (Bishaw, 2013:18). This changed Whitman County's ranking from being the poorest in Washington State to being the 18<sup>th</sup> poorest of 39 counties. For the city of Pullman the adjustment was from a poverty rate of 44.8% to one of 20.9%.

The Community Needs Assessment Report (Bittinger 2015) found lower rates of poverty similar to Bishaw's study. They report that about 19% of their county wide respondents were low-income households while Pullman respondents were about 20% low-income households. This study considered households with monthly incomes of less than \$2,000 to be low-income which is about the same as the current Federal Poverty level for a household of 4 people.

Throughout this study we use the lower 16.7% figure in our discussions. The 16.7% essentially excludes all WSU students, but we know anecdotally that WSU students do use some of the available services. So in reality this number is some unknown, but greater figure.

Importantly, while 16.7% is significantly less than the 33.2% initially reported it, is still higher than the state average of 14.1% and national average of 14.5% and still constitutes an apparent paradox related to the quality of life in Whitman County. Furthermore, while WSU provides some services, social service agencies in Whitman County, and particularly those in Pullman, may also be called upon to provide services to college students.

The most complete and reliable data on the demographics of those being served are from food providing program of the Council on Aging. It notes the size and age characteristics of households receiving food at the food pantries it serves. Data for households receiving Supplemental Nutrition Assistance and free or reduced prices school lunches are also informative. These data show that seniors (individuals over 55) constitute about 35%, adults 19-54 make up about 36%, and children 18 and younger make up about 30% of food pantry users. The majority of people receiving SNAP benefits live in Pullman, but Pullman has the fewest and significantly fewer SNAP participants relative to its total population than do other communities

in the county. Communities in the northern part of the county tend to have higher rates of SNAP participation than do those in the southern part of the county. The same geographic pattern is apparent in the data for Free and Reduced Price School Meals programs. Most of the communities in Whitman County fall below the State averages for users of these programs.

This information is summarized in Table 1. It should be noted that the data presented are either single day or month “snap shots” and so should be viewed as patterns rather than absolutes as counts such as these vary day-to-day or month-to-month. A further caution is that proportional values such as these can be affected by the small populations of many of the communities represented.

Table 1: Distribution by Community of Some Services For Those Living in Poverty (DSHS interview with Jane Roberts by Mary Collins and Karen Kiessling September 28, 2015; WSOPI 2015)

<b>Community</b>	<b>Population 2010 Census</b>	<b>Households Receiving Cash Assistance on 9/28/15</b>	<b>Students Receiving Free and Reduced Price School Meals May 2015</b>	<b>Households Receiving SNAP Benefits on 9/28/15</b>
<b>North part of County</b>				
Endicott	289	.6%	58.1%	12%
Farmington	146	0	N/A	6%
Garfield	597	.3%	54.5%	6%
LaCrosse	313	1%	30.6%	11%
Lamont	70	3%	N/A	17%
Malden	203	0	N/A	14%
Oakesdale	431	.2%	37.8%	6%
Rosalia	550	.3%	65.8%	10%
St. John	537	0	N/A	8%
Tekoa	778	1%	50.2%	9%
<b>South part of County</b>				
Albion	579	.5%	N/A	7%
Colfax	2805	.2%	31.1%	7%
Colton	210	0	22.6%	7%
Palouse	998	.3%	31.3%	4%
Pullman	31,359	.2%	31%	3%
Uniontown	294	0	N/A	7%
Washington State	6,724,540	1%*	45%	15%

\*Monthly average for 2011(Office of Family Assistance 2016)

## What Services are Available to those Living in Poverty?

### Cash Assistance

Cash assistance, formerly known as welfare, does not fall within any one of our study areas and so is discussed here alone. Washington's program for cash assistance program to low-income families is WorkFirst. The program distributes funds in the Temporary Assistance to Needy Families program established by congress and administered by the U. S. Department of Health and Human Services as well as Washington State Family Appropriations.

Only families with children or children in foster care are eligible for these funds. For adults, there is a lifetime limit of five years for receipt of these benefits. A formula that considers income, expenses, and other factors is used to calculate the amount of assistance available. However, the most a family of three can receive is \$521 per month. Participation in the program requires that recipients have some, or be actively preparing for and seeking, employment.

In September of 2015, there were 31,712 WorkFirst cases in the state of Washington for a per capita ratio of .4%, and 90 in Whitman County for a per capita ratio of .2%. The distribution of these cases is presented in Table 1.

Table 1. Temporary Assistance to Needy Families Cases September, 2015 (DSHS interview with Jane Roberts by Mary Collins and Karen Kiessling September 28, 2015)

<b>Community</b>	<b>Number of Cases</b>
Albion	3
Colfax	7
Endicott	2
Garfield	2
LaCrosse	4
Lamont	2
Oakesdale	1
Rosalia	2
Tekoa	8
Palouse	3
Pullman	55
Other	1
Total	90

## Child Care

### Context

It has long been documented that affordable child care is key to the economic and social stability of the vast majority of Americans, allowing adults to work and families to thrive (Glynn, 2015; Office of Management and Budget, 2015). Equally important, children who participate in high-quality child care and early childhood education, compared to those who do not, benefit in myriad ways well into adulthood. The benefits include being more likely to be ready for school and having fewer behavioral problems in school, succeeding in elementary and high school, attending college and receiving a degree, consistently holding a job, delaying of parenthood, avoiding use of public assistance, and having fewer negative interactions with the justice system. The benefits are strongest for children who come from low-income families, children of color, and learners of English as a second language (Benefits of High-Quality Child Care, 2012; Child Care Quality, 2014; Golden, 2014; High-quality child care for low-income children, 2010).

It is also a given that single working parents are under the greatest pressure to find ways of caring for their children while they work, but with the now decades-long increase in the number of households with two working parents, the pressures have increased more generally, making availability of affordable child care one of the primary concerns of and means to ensure the health and viability of contemporary, middle-class American society.

If this can be seen so clearly as a primary need for the American middle class, it is only intensified as a need for those living at or near the Federal Poverty Level (FPL). And, certainly, this is no less true of the 16.7% of Whitman County residents living at or near the federal poverty level. The clear increased need for affordable child care nationally and regionally, however, is heightened and complicated further by both increased costs and a decrease in the number of child care providers. As to costs, “Weekly nursery and preschool expenses for children 5 and younger rose almost 50 percent between 1990 and 2011, after adjusting for inflation, according to government data.... The soaring costs may even be keeping some parents out of the workforce. Some 29 percent of mothers with children under 18 didn’t work outside the home in 2012, up from 23 percent in 1999” (Child-care costs on the rise, 2015).

Simultaneously, public support for subsidizing child care and preschool is lagging. Washington is 33<sup>rd</sup> among states for access to state preschool for low-income 4-year-olds. “About 42 percent of Washington children with a family income below 110 percent of the federal poverty level - \$25,905 for a family of four – are currently served by either the state-run early childhood education program or the federally supported Head Start program. The Washington Department of Early Learning estimates more than 28,000 children are eligible for these programs but are not enrolled” (Budget writer to helm Early Learning, 2015).

The realities of increasing costs are complicated when we consider that the number of providers is decreasing. As recently as 2013, “[In Washington state], there [were] about 550 fewer

licensed providers than there were in December 2012, continuing a trend of decline over the past few years. Since 2009, the state has had a net loss of almost 1,500 child care providers. The decline has primarily been in ‘in home’ or ‘family child care’ providers, which has dropped about 23% over the last five years” (Childcare Aware of Washington Data Report, 2013).

For Whitman County, the trend in fewer providers is the same, although capacity has increased slightly: “In Whitman County, the number of child care providers has dropped from 39 with capacity for 1173 children in 2008, to 29 providers with capacity for 1276 children in June of 2015 (includes licensed child care and exempt school-age programs only)” (Child Care in Whitman County August, 2015).

### **Need for Child Care**

In order to determine more specifically the need for child care in Whitman County, we drew first on American Community Survey, U. S. Census data: of the 2,236 children under six in Whitman County (4.8% of total population), 1303 (58%) are children whose parents (including two parents and single parents—both single mother and single father—living at home) are all in the work force (American Fact Finder2, 2013).

We assume that most working parents would need to find some kind of child care, presumably most often from licensed facilities. We also assume that, in comparing the numbers of children under six (1303) needing child care to the reported capacities of child care providers (1276) in Whitman County, there is a gap of approximately 27 children under six for whom there is no space in the child care system. The number of children needing care who cannot be accommodated by licensed capacity in Whitman County is in reality much greater than 27, since the number of children ages six through 12 needing care after school and during school breaks is not accounted for in the American Fact Finder statistic above.

If we also look more specifically at the 3-4 year old preschool age group, we find the following: of the 1020 children 3y-4y in Whitman County, 51.3%, are enrolled in nursery school or preschool facilities; therefore 48.7%, are not enrolled in “any kind of school”, according to the U.S Census (American FactFinder2, 2013). It appears that approximately half of the children in this age group, for which educational programming is critically important, are not enrolled “in any kind of school.” However, some of these children could be enrolled in facilities that do not claim preschool curricular activities, but may still provide learning activities, since Washington requires all licensed providers to participate in the Early Achievers Program that demands learning activities.

Our research did not uncover statistics on children ages 0-12 years who are living in poverty in Whitman County. US Census data report that 1,419 children under age 18 in the county are living in under the federal poverty level (American Fact Finder 2015), but do not offer comparable statistics for those under age 13. Therefore, we cannot know the exact needs of families in poverty for child care and preschool.

## Child Care Capacity

The most current figures on combined part time and full time capacities and enrollments of child care providers, as reported by providers and agencies in 2015, are given in Table 1. These data include counts from providers who did not participate in the study as well as those who did. Therefore, the licensed capacity numbers are known, but the actual enrollments are estimated.

Table 1. Whitman County Licensed Child Care Centers’ and Home Care Providers’ Capacities and Enrollments.

Capacities					Enrollments <sup>1</sup>				
General Capacity Totals	1m—1y	1y—3y	3y—5y	6y—12+ y	General Enrollments Totals	1m-1y	1y—3y	3y—5y	6y—12+ y
1192	70	145	309	361	1250-1299	61	176	514	249

<sup>1</sup> Enrollments include children in full time (FT) care and part time (PT) care at various times of the day, but do not exceed licensed capacities.

Providers interviewed by the LWV reported at the time that 70 families were waiting for slots in the licensed child care facilities in the county.

## Child Care Services

Washington state licensed child care providers in Whitman County offer a range of care options for children ages one month through 12 years. Federal and state subsidized and free child care and/or preschool are offered in several forms throughout the county.

Most center and home providers are open approximately 10 hours a day, 7:30am to 5:30pm, Monday through Friday. Full time and part time care are the most common categories of care for ages 0-5 years. Some providers offer preschool for 3 to 5 years as well. A few providers are primarily schools (public and private). Several school districts operate part time preschools – Colton (for children with special needs only), Endicott/St.John, Garfield/Palouse, LaCrosse, Rosalia, and Tekoa. Oakesdale School Childhood Center offers additional child care services.

Before and after school care are generally available from both centers and home care providers. However, some providers noted that they would rather take a full time or part time child than a child needing only a few hours a day both for reasons of income and wanting to be at full capacity always.

Drop-in care during regular hours is available from most providers, if they have a vacant slot per their licensed capacity, and generally if the child is already receiving care of some type from them. After hours care is not a common offering. The WSU Children’s Center is the only child care center that offers specific after hours care. Their Evening Care program provides approximately 30 children care from 5:30 pm to 9:30 pm, Monday through Thursday. Several home providers offer occasional, ad hoc after hours care for limited periods of time, most not

exceeding one hour beyond closing time. Almost all center and home providers have strict policies regarding times when children must be picked up, including fees assessed for every minute a parent is late.

Summer care for 6- to 12-year-olds, for an average of eight weeks, is available at most centers and home providers. Some providers offer care during school breaks and holidays.

Special needs child care, depending on the age and needs of the child, is offered through school districts or non-profit contractors. School districts in Colton, Colfax, Endicott/St.John, Garfield/Palouse, Oakesdale, Rosalia, and Tekoa serve children with special needs in their preschools. Community Child Care Center contracts with Pullman School District to provide services to children with special needs through their integration into classrooms at Community Child Care Center. The Community Child Care Center operates Head Start and the Early Childhood Education and Assistance Program in the county. The Community Child Care Center reported that approximately 44% of Pullman children in Head Start and Early Childhood Education and Assistance Program receive special needs intervention services (Mary McDonald, Community Child Care Center, interviewed by George Kennedy, March 8, 2016). Several other providers reported that they had had or do have in their care children with special needs. These providers do not have specific programming for the children, but do offer as much individual attention as they can.

The non-profit Boost Collaborative provides early intervention services in Whitman County for children with developmental disabilities, developmental delays, and other developmental difficulties. Boost offers early intervention and education services to children birth to three years and their families by working with the children where they are being cared for, either in child care provider sites or in the children's homes. The provision of services has increased significantly in Whitman County over the last decade: "The number of families receiving early intervention services in Whitman County has increased by 180% from 2006 and 2014. The increase statewide during this period has been 35%" (Boost Collaborative, 2015).

Some providers offer limited transportation services. Both centers and home providers, though, rely on parents' use of their own cars, school district or Pullman Transit buses, and walking for transport of children to and from their facilities. On the other hand, a few providers supply their own transport to and from public schools and limited summer recreational activities. Community Child Care Center offers transportation in Pullman for Head Start and Early Childhood Education and Assistance Program enrollees whose families can demonstrate they have no other means of transport.

Care and/or instruction in languages other than English is rare in Whitman County child care facilities. Because staff members sometimes speak a language other than English, care in those languages is available to children in a few centers. The languages include Spanish, Hindi, Chinese, and occasionally other languages. Two centers instruct in other languages (Spanish, French). Boost Collaborative engages volunteers who are native speakers in many languages

from WSU International Programs. The volunteers act as interpreters for interactions between Boost and families from all over the world.

### **Child Care Costs**

Paying for child care without assistance is a luxury many in our society cannot afford. Ironically, child care is no luxury when all parents/guardians are or need/want to be in the workforce; child care is a necessity for the wellbeing of the family, child, and the American economy (Fact Sheet: Helping All Working Families with Young Children Afford Child Care 2015). In Whitman County, the costs of child care vary significantly depending on two important factors: location (Pullman or communities outside Pullman) and eligibility for subsidies and no-cost care. In general, regular (not subsidized) costs for a particular category of child care in Pullman are higher and have a wider range than in other communities (see Table 1A, Appendix 2). These differences reflect the number and type of providers in Pullman and the decreased cost of care for student parents at the WSU Children's Center. Costs for full time infant care at a child care center in Pullman range from \$722 to \$1,130 per month; costs for the same care in a center outside Pullman range from \$650 to \$705. When we look at average costs, the fee for full time care for a 3- to 5-year-old in a Pullman center is approximately \$820; part time care is \$512. In other Whitman County communities, the average costs for the same care in a center are \$545 for full time and \$333 for part time. A hypothetical family that needs full time care for an infant and a 3-year-old, using the lowest costs and including a sibling discount, in Pullman would pay an average of \$1,791 per month; for a family outside Pullman, the average is \$1,223.

It is important to understand that average costs at licensed home care providers are approximately two-thirds the costs of centers. However, across the county the number of children allowed by the Washington state license for home care providers is much lower than that of centers, so fewer families can take advantage of these lower costs.

Before and after school care costs are difficult to compare because some providers do not offer care both before and after school and charges are listed variably by providers. Extrapolating from the various tuition scenarios, the cost for before and after school care is approximately \$400/month in Pullman and \$250/month outside Pullman. Summer care for 6- to 12-year-olds differs by type, hours, duration, and prices from one provider to the next, differences that defy generalization of costs.

Average costs for drop-in care are similar across the county, around \$6.50 per hour. After hours care is offered by only one provider, the WSU Children's Center, at a fee of \$18 per hour. Several center and home providers charge a fee of \$5 to \$10 for every minute that passes after a child should have been picked up.

Colton, Endicott/St. John, Garfield/Palouse, LaCrosse, Rosalia, and Tekoa school districts operate part time preschool for tuition-paying students; the average monthly cost is \$121. Some districts also subsidize this cost in some years to bring tuition lower or cover it completely.

School district preschools and district contractors serve children with special needs free of cost. Boost Collaborative has been successful in garnering federal, state, and other funds to take care of the costs for the services it provides to families.

### **Publicly Funded Free and Subsidized Child Care**

Washington state and the federal government subsidize the cost of child care in Whitman County in a number of ways. Head Start, Early Head Start, USDA Free and Reduced Lunch programs, and Child Care Access Means Parents In School are federally funded. Early Childhood Education Assistance Program, Working Connections Child Care, and some benefits to WSU students are state funded. Special Needs care is supported by both federal and state dollars. Currently, two state subsidy programs are not designated for or operating in Whitman County: the Seasonal Child Care Program for agricultural working families and the Homeless Child Care program. See Table 2A, Appendix 2 for information on providers and locations for subsidized and free care.

### **Head Start, Early Head Start, and Early Childhood Education Assistance Program**

As noted earlier, only about 42% of Washington children eligible for free state or federal preschool (Early Childhood Education Assistance or Head Start) are enrolled (Budget writer to helm Early Learning, 2015). Early Childhood Education Assistance Program, Early Head Start, and Head Start programs are required to be at full capacity and to keep waiting lists that can be used to fill any vacancy as soon as it occurs. If facilities' enrollments fall below their allocated capacities, they lose allocations. Although this requirement means there are always families outside the programs and waiting to access them, Washington state designates Whitman County as "saturated," that is, having sufficient slots for government supported preschools. The state reaches this conclusion by comparing the number of first graders in the free and reduced lunch program to the number of children in Head Start and ECEAP. There are prescribed need factors that determine where a child is placed on the waiting list for Head Start/ Early Childhood Education Assistance Program including age (4 year olds are prioritized), foster status, abuse, and additional considerations.

Head Start and Early Head Start are free to families who are at 100% to 130% of the federal poverty level (FPL). However, Head Start in Whitman County in practice serves children who are at or below 100% of the FPL. In order to serve children from 100%-130% of FPL, the Head Start provider must apply for and gain pre-approval to accommodate a child from a family in that income bracket. The Early Childhood Education Assistance Program (ECEAP) serves families who are at or below 110% of the federal poverty level. The Working Connections Child Care Program provides a scaled subsidy to families with incomes up to 200% of the federal poverty level. For more information on eligibility for and nature of these programs, see descriptions and Table 3A, Appendix 2).

If we consider Head Start and ECEAP in Whitman County, we find that “in the 2014-2015 school year, we estimated 156 three- and four-year old children [were] eligible for ECEAP. These same children [were] eligible for Head Start. In addition, children between 110% and 130% of the federal poverty level [were] eligible for Head Start but over the limit for ECEAP,” but the Washington state Department of Early Learning (DEL) does not have an estimate for that number of additional children (Joyce Kilmer, Department of Early Learning, email communication to Judy Meuth, Nov. 11, 2015). Total 2015 ECEAP, Early Head Start, and Head Start capacities (number of children for whom there is a place in the programs) are shown in Table 2. All slots in the programs are filled. ECEAP capacity is 107 slots, with 50 of those in Pullman and the rest divided among rural towns in the county.

**Table 2. Early Head Start, Head Start, and Early Childhood Education and Assistance Program (ECEAP) Capacities/Enrollments in Whitman County**

	Pullman	Colfax	Endicott	Garfield	Palouse	Rosalia	Tekoa	Total
<b>ECEAP</b>	50/50	20/20	11/11	4/4	6/6	7/7	9/9	107/107
<b>Early Head Start</b>	12/12							12/12
<b>Head Start</b>	54/54							54/54
<b>Working Connections</b>								Unknown/127

Sources: LWV interviews with providers; Brenda Kane, Community Child Care Center, email communication to Judy Meuth, Dec. 21, 2015; Matt Judge, DEL, email communication to Judy Meuth, Dec. 14, 2015.

The Washington state Working Connections Child Care program provides subsidies for child care costs. Eligibility is based on income and participation in approved activities, usually work. The Washington Department of Early Learning does not have estimates on the number of families who are eligible, since it cannot know how many income-eligible households meet the work criteria. At present, statewide, Working Connections is funded for and limited to 33,000 households per month, and the current actual caseload is 29,142. “Forecasts indicate we will reach 33,000 households by August 2016. At that time a wait list will likely go into effect, with certain vulnerable populations (homeless families, teen parents, TANF families, etc.) exempt from the wait list” (Matt Judge, Department of Early Learning, email communication to Judy Meuth, Dec. 14, 2015). At present, Working Connections subsidizes child care for 127 children in Whitman County (Table 2).

Almost all child care providers interviewed for this study accept Working Connections and/or offer some other subsidy (see Provider Offered Subsidies section below). The child care subsidies are increasingly important, since in Washington, “compared to 2007, the median household income has decreased while median child care rates have increased” (Childcare Aware, 2013). Luckily, within the state, “the vast majority of providers (85%) accept at least one kind of subsidy or offer other forms of financial assistance, although some limit the number of subsidized children they accept at any given time” (Childcare Aware, 2013).

## **Additional Federal and State Subsidies**

### **USDA Food Subsidies**

USDA food subsidies are available to providers who offer a meal and two snacks per child per day. The subsidy, however, does not generally cover the provider's cost in supplying food.

### **Child Care Access Means Parents in School**

The Child Care Access Means Parents In School grant, available at three child care centers in Pullman, is a federal program of the U.S. Department of Education that assists university student parents with the cost of keeping their children enrolled in a licensed child care center.

Undergraduate and graduate students must be PELL grant eligible, enrolled in classes at a university or community college, and have children enrolled in a licensed and accredited child care center.

### **Special Needs Support**

Since special needs care rates are often higher than other child care rates, a family may need additional subsidies. If a family qualifies for Working Connections Child Care and has a child under age 19 “who has a physical, mental, emotional, or behavioral condition requiring a higher level of care,” the family may be eligible for state assistance in paying for care (Washington State Department of Early Learning, 2014).

By law, a family cannot be denied the early intervention services that Boost Collaborative provides for lack of ability to pay for them. However, funding for the services is not secure from the state or federal government. For instance, Boost Collaborative used to have state support for more parenting classes, but that support was cut after the state assessed needs across Washington and decided that Whitman County did not have as great a need as some other counties. Since Boost Collaborative is not chartered as a medical provider, it has no formal way of billing Medicaid for the services it provides to families, 60-70% of whom are eligible for Medicaid coverage.

In lieu of more stable funding, Boost Collaborative receives most of its funding via Whitman County school districts, some federal funding channeled through Washington Department of Early Learning, and other public funding from United Way and other fundraising efforts. Boost uses university interns and other volunteers for part of its staffing. So far, Boost has been able to patch together funding for all families to receive services free of charge (Sue Kreikemeier, Boost Collaborative, interviewed by George Kennedy, May 4, 2015).

### **Provider-Offered Subsidies**

The most common provider subsidy is a 10% to 20% discount in tuition for siblings of a child already paying full tuition. Four providers will directly subsidize child care cost if a family is in great need and does not qualify for other assistance. Three providers alter payment due dates to

accommodate paycheck schedules or will give leeway on due dates to families who have demonstrated they will pay their bill. School district preschools and two additional providers offer lower costs because they occupy rent-free space. One school district pays the on-site preschool costs of all children who are USDA Free and Reduced-Price lunch recipients. One provider offers a discount for automatic bank withdrawals and/or for pre-payment of tuition. Several providers offer limited transportation, either via the providers' vehicles or staff members accompanying walking children.

## **Conclusions**

Child care providers in Whitman County voiced various concerns about child care services for low income families. The concerns deal primarily with eligibility limits, subsidy levels, program rules, full capacities, and waiting lists. Our additional research also uncovered unmet needs that sometimes echoed providers' concerns. Here are the primary concerns:

- The majority of providers stated that federal and state income eligibility guidelines are unrealistic to support many families who need assistance. Many families do not qualify for subsidized care, but cannot make ends meet if they have to pay for child care completely out of pocket. In one case, a father receiving a Working Connections subsidy, his moderate promotion and raise at work made his copay obligation go from \$65/month to over \$1,000/month. Only the provider's willingness to work out a financial plan with him kept his child in child care (LWV interview communication with child care center provider to Judy Meuth and George Kennedy, April 15, 2015). Some parents struggle to pay for preschool and/or child care, especially where low-cost school district preschools are full. Many parents with school-age children cannot afford after school care, so children as young as 7 are home alone after school.
- Several providers noted that the Working Connections program requires that a parent be working (full or part time) or be actively seeking work, so student parents generally cannot qualify. The only exception made to this rule is for single parents. This condition discourages parents who would normally be considered more employable at a future time from currently going to school full time, adding time to degree and perhaps greater indebtedness. At the same time, this rule makes affordable child care more difficult or, in some cases, impossible to secure.
- Working Connections has some procedures that make things tough for poor families and service providers. For instance, the state looks at a family's income at 6-month intervals to determine eligibility and copay level, resulting in a particularly difficult situation for seasonal workers. Periods of no work or reduced hours make them eligible for Working Connections assistance, but increased work hours during the next 6-month period may make them ineligible, canceling the subsidy. When work hours decrease again, reapplication takes time, and unless the child care provider allows the family's child(ren) to stay in the facility, they will likely have to drop out. If the child is allowed to stay, the

provider has to hope the state will approve the family's reapplication so that they can pay the provider back.

- During licensing or re-accreditation periods for a child care center, military families are unable to get subsidies to use at that center because military regulations require the families to use only currently accredited child care facilities.
- All of the interviewed home providers and child care centers in Whitman County are willing to serve children with Working Connections subsidies, but two report that they must review their budgets carefully to accommodate children with subsidies, since subsidy reimbursements typically fall within only 70-75% of full tuition levels. This can lead to setting limits on the number of children accommodated with subsidies.
- In 2016, because of limited state funding, Working Connections funding will not be able to cover all eligible families.
- Since Early Childhood Education Assistance Program, Early Head Start, and Head Start programs require full capacity in funded enrollment slots, and there is greater demand for these slots than supply, waiting lists are inevitable.

## Education and Job Training

As part of the League of Women Voters Poverty Study, the Education and Training Subcommittee interviewed a number of public school district and post-secondary administrators in Whitman County. We also talked with business and nonprofit employers in the county about potential training and employment opportunities.

### School Districts in Whitman County

Committee members interviewed administrative staff at ten school districts in Whitman County that serve children in grades K-12. The very small Lamont and Steptoe Districts that work with neighboring districts were not interviewed. Table 1, below, provides a summary of some of the demographic information related to poverty (OSPI 2015). Districts range in size from 62 to more than 2600 students. All districts but one report more than 30% of students receive free/reduced meal.

**Table 1. School Districts in Whitman County, Oct. 2014**

<b>District</b>	<b>Enrollment</b>	<b>Free/Reduced Price Meals</b>	<b>Dropout</b>	<b>Towns in district</b>
Colfax	623	31.1%	12%	Colfax
Colton	166	22.6%	6%	Colton, Uniontown
Endicott	105	58.1%	N/A	St. John (High School)
Garfield **	111	54.5%	0%	Garfield
LaCrosse	76	30.6%	12%	LaCrosse
Oakesdale	107	37.8%	0%	Farmington, Oakesdale
Palouse **	187	31.3%	0%	Palouse
Pullman	2558	31%	10%	Pullman, Albion
Rosalia	200	65.8%	11%	Malden, Rosalia
St. John	166	33.5%	10.0%	St. John, Endicott
Tekoa	181	50.2%	30.0%	Tekoa

\*\*Garfield and Palouse share a high school.

One straightforward indicator of poverty in the various schools is the percentage of students who qualify for free or reduced lunch, although not all students who would be eligible complete the required paperwork, so the percentage may be higher than reported. The percentages range from a high of 50% or more in Endicott, Tekoa, and Rosalia to a low of 22% in Colton. The remaining school districts report between 30 and 48% of students who qualify for this program.

Those who do not graduate from high school are more likely to face living in poverty than those who do (Remberger, 2013). For the 2014 class cohort at the state level, the dropout rate by the end of the senior year was 12.3%. For Whitman County the rate was 3.8%, but this number is

problematic as the rates –Table 1– vary widely for the different school districts in Whitman County (Munson, 2015).

All but one district report serving homeless children, and most staff have received training in identifying and assisting students living in poverty. The number of homeless students reported varied by district, with a high of 37 in Pullman in 2012-2013 and many other districts reporting three or four (Education and Job Training Interviews, Appendix 1). Tekoa and Oakesdale share a “student support specialist” to assist homeless students and those living in poverty, while the nurse in Colfax serves this role. The counselor in Rosalia serves as the “homeless liaison.”

Gaining Early Awareness and Readiness for Undergraduate Programs is a U.S. Department of Education discretionary grant opportunity. These competitive grants are made to states on a six-year matching fund basis. Funded programs must include both an early intervention component designed to increase college attendance and success and raise the expectations of low-income students, as well as a scholarship component (USDA, 2015). Washington state has a Gaining Early Awareness and Readiness for Undergraduate Programs grant that serves all 7th through 12th graders who receive free or reduced lunch. Programming includes college campus visits, financial assistance for SAT and ACT exams, career research, and help with the senior project.. Most districts provide training for teachers and staff regarding how to identify homeless students and those living in poverty.

The U.S. Department of Education also provides funding to support schools serving low-income students through the Title 1 program. In 2014, Whitman County schools received \$768,363 in Title 1 grants. These funds are used to support teacher training and programs aimed at improving the academic achievement of low-income students.

Other school related activities receive support from the Community Action Center, private donations, Booster Clubs, and Education Foundations. These programs include helping students gain access to healthcare resources and pay for Associated Student Body activity passes, athletic equipment, and school supplies.

### **College Bound Scholarship Program**

A program important to students in poverty is the College Bound Scholarship Program that was established by the state legislature in 2007 (College Bound, 2015). The program provides financial assistance to low-income students who want to achieve the dream of a college education. This early promise of financial aid is intended to alleviate the financial barriers that prevent low-income students from considering higher education as a possibility.

Students must enroll for the scholarship program between the beginning and end of their 7th and 8th grade years. Enrollment is facilitated by the middle school, and eligibility is based on family

income. Students participating in the Free and Reduced-Price lunch program are eligible and students in foster care are automatically enrolled. When enrolling, students sign a pledge to graduate from high school – General Education Development certificates do not qualify—with at least a 2.0 grade point average and to have no felony convictions. The scholarship covers average tuition, some fees, and a small book allowance. Students participating in the College Bound Program must apply for federal student aid, and College Bound funds are provided only to those costs not covered by federal student aid.

Eighty nine percent of the eligible Washington state class of 2018 enrolled in the scholarship program. Seventy five percent of the class of 2014 who enrolled in the program graduated from high school, compared to only 62% of low-income students in the class of 2014 who did not enroll in the program. More than 200,000 students have enrolled in the program statewide since its inception.

The number of enrollees for Whitman County has ranged from less than 10% to 56% of those eligible in the past six years. Colfax and Pullman report the largest number of students applying for the scholarships. In the majority of Whitman County’s school districts, no students, or fewer than 10 students, applied for the College Bound Scholarships during the same period. There are currently 90 students from Whitman County who are enrolled in colleges or universities as College Bound Scholars (B. Ahlstrom, Assistant Director of College Bound in telephone interview with M. Collins, Jan 22, 2016).

## **WorkFirst**

WorkFirst is Washington State’s welfare reform program that provides financial assistance to families receiving cash assistance (Temporary Assistance to Needy Families). Included in the program are requirements that clients participate in education and/or work training opportunities. Community Colleges in Washington provide some of these opportunities. WorkFirst Financial Aid pays for tuition, books, and required fees for eligible students. (This aid is not the same as federal financial aid programs.) Students may attend full, half, or less than half time and may enroll in credit or non-credit classes. To be eligible for WorkFirst Aid, students must enroll in classes that are job-related or improve employment opportunities, cannot be receiving Federal Financial Aid, and must have a family income at or below 175% of the FPL.

Worker Retraining is WorkFirst program that is a Washington state cooperative initiative between the Community Colleges of Spokane and the Washington State Employment Security Department. Priority is given to dislocated workers. Services provided include employment and training assistance, counseling, career planning, financial assistance, and job placement assistance. In 2015, 15 students from Whitman County were enrolled in this program (Sally Jackson, SFCC, interviewed by Libby Walker, Sept. 23, 2015).

Basic Food Employment and Training is also a WorkFirst program. This is a partnership between Spokane Falls Community College and the Department of Social and Health Services that offers educational and workforce training opportunities to students receiving Basic Food Assistance (food stamps).

### **WorkSource**

WorkSource is Washington State's employment service under the U.S. Unemployment Service. They provide job listings, job-hunting skills and assistance, as well as skill and career assessment and guidance. In addition to these services, the Whitman County office, located within the Community Action Center in Pullman, provides job seekers computers, telephones, fax, and copy machines. They also have video viewing stations where employment related training films are available. The service prioritizes efforts for unemployment insurance claimants, veterans, WorkFirst participants, offenders, youth, disabled individuals, Service Corps participants, and migrant farm workers (WorkFirst, 2016).

### **Boost Collaborative Washington**

Boost Collaborative, also known as Palouse Industries, is a community based non-profit organization devoted to improving the lives of individuals with disabilities and their families throughout Whitman and Latah Counties. Many of these are people or families in poverty. Boost Collaborative provides education, training, and help finding and maintaining employment for disabled persons, but Palouse Industries also sometimes hires non-disabled people in need of employment (Boost, 2015).

### **Rural Resources**

Rural Resources is a private nonprofit corporation whose goal is to assist people and communities to develop the skills, resources, and services necessary to improve their general welfare. Based in Colville, it works in all of eastern Washington including Whitman County. Using funds from the U.S. Department of Labor Workforce Innovation and Opportunity Act, they provide services to eligible adults. Intensive services available include comprehensive and specialized assessments, job counseling, and the development of an individual training plan. This can include the On The Job Training program, which provides a 50% reimbursement to employers of the trainees' wages. Individual Training Accounts Programs provide financial assistance for people who need to complete a formal training program to become employed. Youths 16 through 24 are encouraged to complete their educations and can receive work experience placements. This is provided for youths with little or no work history and is designed to teach basic skills and create positive work habits.

## **Conclusions**

With notable exceptions at both the high and low ends, most of the school districts in Whitman County have participation rates for the federal Free and Reduced Price lunch program modestly lower than the state average of 45%. Most school districts also have lower rates for number of students not finishing high school than the state average of about 12%. School districts throughout the county receive substantial funding for programs aimed to increase the success of low-income students. Some of the most successful programs are the Gear Up (Gaining Early Awareness and Readiness for Undergraduate Programs) and College Bound scholarships.

Most of the public social service programs serving low-income individuals and families require or encourage participation in some sort of work-seeking or work-skill training program. The Pullman campus of Spokane Falls Community College offers low cost access to Associate of Arts degree programs and Bachelor of Arts degree preparation courses. The school works with the Department of Social and Human Services to offer courses through the Adult Basic Education, Worker Retraining, and Basic Food Employment and Training programs.

## Elder Care

### Context

An historical perspective from The National Bureau of Economic Research states that elderly poverty in the U.S. decreased dramatically during the 20th century. Between 1960 and 1995, the official poverty rate of those 65 and above fell from 35 percent to 10 percent, and research has documented similarly steep declines dating back to at least 1939. While poverty was once far more prevalent among the elderly than among other age groups, today's elderly have a poverty rate similar to that of working-age adults and much lower than that of children (NBER, 2015).

Social Security has contributed significantly to the decline in elderly poverty. Enacted in 1935, the Social Security system experienced rapid benefit growth in the post-WWII era. In fact, there is a strong association between the rise in Social Security expenditures per capita and the decline in elderly poverty (NBER, 2015).

“Caregiving in the U.S. 2009,” a study by the National Alliance for Caregiving of caregivers randomly selected for interview, found that the average care recipient’s age increased from 67 to 69, owing to an increase in the percentage of those 75 or older (from 43% to 51%) from the last study in 2004 (NAC, 2009). Two of the professionals interviewed for the Eldercare segment of this study noted dual trends: the age of those who need assistance by their organizations tends to be trending to younger age clients, even as the number of older adults needing service increases (Hollie Mooney, Circles of Caring; Annie Pillers, Friends of Hospice; both interviews by L. Linden and K. Kiessling, December 3, 2015).

Washington state and the country as a whole have comparable percentages of the total population 65 and over, whereas Whitman County has only 10% of its population in that age range. In Whitman County, there are about 4600 people over 65. About 6.7% of individuals over age 65 in Whitman County are living in poverty. In Pullman the rate is about 10.1% while for areas outside of Pullman the rate is about 5.4% (Bittinger 2015).

**Table 1. Numbers of Individuals over Age 65.**

<b>Location</b>	<b>Proportion of Population 65 Years and Older</b>	<b>Proportion of Population 65 and Older Living in Poverty</b>
U.S.	14.5%	9.4%
Washington State	14.1%	7.8%
Whitman County	10.0%	6.7%
Pullman	4.7%	5.4%
Non-Pullman	19%	10.1%

## Services for Elders in Poverty

Many of the services available to seniors living in poverty, such as housing, food security, and health care, are covered in other chapters of this report. This section will discuss services not covered by other chapters. Organizations serving the needs of elders often do not consider income as a condition for service, so our discussion often applies to all seniors, not just those living in poverty. The Pullman Community Council on Aging kept user records for Meals on Wheels and foot care (Nancy Backus, Pullman Community Council on Aging (PCCoA), interviewed by Naomi Golter and Suzanne Polle, Aug. 15, 2015). Cir said they would now keep demographic records as they recognized the value of that information from our interview questions (Hollie Mooney, Circles of Caring, December 3, 2015 and Annie Pillers, Friends of Hospice, December 3, 2015).

Services available to the elderly in Whitman County discussed in this chapter are summarized below.

**Table 2. Services to the Elderly in 2014.**

<b>Organization</b>	<b>Type of Service</b>	<b>Number of Staff</b>	<b>Number of Volunteers</b>	<b>Number of Elders Served</b>
Circle of Caring	Adult day care, lunch, some therapy	9 full-time, 5 part-time	Unknown	18-20 daily
Rural Resources Aging and Disability Resource Center	Case management. Kinship care giver support.	4 full-time	None	Unknown
Friends of Hospice	End of life care, care giver respite, task assistance, companionship.	1 full-time	20	23 individuals/50 families
Pullman Community Council on Aging	Food, elder care, foot care, chore assistance, and preparation of services directory	1 full-time, 1 part-time	200	250

## **Circles of Caring Adult Day Health**

Circles of Caring Adult Day Health is a private, non-profit 501(c) (3) agency that offers a daily program providing a safe, nurturing atmosphere for adult and elderly clients. Its mission is to provide community-based health and wellness enhancement for vulnerable adults and frail elders on the Palouse. It moved to Pullman from Moscow two years ago and serves both Whitman and some Latah County residents. Services provided are food, transportation, eldercare and healthcare, as well as nursing and medical administration, including feeding, assistance in daily living, physical therapy, restorative maintenance, and music and memory programs. Lunches are supplied by Bishop Place. Some volunteer drivers supply transportation to pick up and return clients, but most is done by staff trained to lift and move people who are less mobile. Referrals come from physicians, DSHS, and family inquiry.

Others who refer clients are hospital discharge planners for patients who cannot live alone, but who can benefit from day care. Circles of Caring provides safe, stimulating day programming for adults and elders faced with a variety of issues, and respite support and education programs for families of adults and elders faced with end-of-life issues. They employ both full time and part time employees.

Clients are required to have a physician's order to participate in Circles of Caring. They cannot demonstrate behavior that is disruptive or dangerous to others. Also, if one is formally evicted from a rental unit, he/she is permanently disqualified from participation in the program; a second report of illegal drugs in a rental will also cause disqualification. Depending on the payment source, the number of hours for an individual can be limited. Circles of Caring currently serves 30 families and has 18 to 20 clients a day at a client cost of \$20.00 an hour. Washington State Medicaid pays \$67.75 per day and Idaho Medicaid pays \$6 per hour.

Circles of Caring staff define its greatest need as more scholarships for more clients who cannot afford the cost of the program and for special tools such as the "wii" game that gives both physical and mental stimulation. The staff also noted trends and patterns showing that the age of the clients is getting younger, now ages 50 to 70, where before it was 70 to 90 years. Stroke victims are younger. Circle of Caring has not yet filled their capacity. (Circles of Caring Adult Day Health, Hollie Mooney, Exec. Director Interviewed by Lucille Linden and Karen Kiessling on December 3, 2015).

## **Rural Resources Aging and Disability Resource Center**

Rural Resources Aging and Disability Resource Center is a 501c3 agency with no religious affiliation that began case management services from the Pullman office three years ago as a Family Caregiver Support program. It serves all of Whitman County. The parent organization is Aging and Long-Term Care of Eastern Washington located in Spokane and funded by DSHS as an area agency to coordinate federal and state programs with local efforts. Funding is federal and is granted to the state under the Older Americans Act. Four full time employees provide

comprehensive case management, assessments, referrals, and a Kinship Caregiver Support Program, working with individuals and some families. They partner and collaborate with many organizations and agencies that serve the elderly and disabled (Naomi Galkins-Golter, Roberta Rutherford and Andree Marcus-Rader Interviewed by BJ Carlson and Muriel Jordan on May 11, 2015).

Rural Resources leaves it to home and community workers to determine financial eligibility. No financial qualifications are required for case management, but some services may have requirements, including Title 19, the Community Options Program, and Community First Choice programs. These are intended to provide in-home care for the elderly using a combination of federal and state funds. There are some service limits, such as financial (poverty) and function requirements (specific level of care needed) for Title 19 services. There is an age limit of 60+ for “options counseling,” unless there is a disability that requires physical care, in which case clients need to be over 18.

### **Friends of Hospice**

Friends of Hospice is a community based non-profit 501 (c) (3) with a director and an active board of directors of eight. The organization was founded in 1994, and the current director has been in place since 2013. The Friends’ mission is to ease suffering at the end of life. It works to foster the awareness of and support end-of-life care, hospice services, advance care planning, and grief support in Whitman County. It serves without regard to patient income.

The services provided by Friends of Hospice include food-nutritional supplement, transportation and gasoline vouchers, care giver respite, companionship, errand and homemaking tasks, advance care planning, massage, and bereavement support. It also has the Threshold Choir, which is a local chapter of an international group of women who sing, and Living Legacy, a project that records the life stories for people in end-of-life situations. Services are offered in individual’s homes, licensed homes, nursing homes, assisted living units, and independent units and hospitals. Those interviewed noted that patients are needing care at a younger age and that families are not living in traditional family units as much as earlier. This creates new challenges for end of life situations (Friends of Hospice, Annie Pillers, Director Interviewed by Lucille Linden and Suzanne Polle, on December 3, 2015).

### **Pullman Community Council on Aging**

The Pullman Community Council on Aging is a non-profit 501(c)(3) group of citizens and professionals working as advocates for Pullman’s senior citizens. Scott Hallett chairs the organization founded in 1973 by community citizens. Its mission is to assist Pullman seniors with programs that support not only daily needs, but also their ability to live as independently as possible. The services provided include food, eldercare, preparation of a Guide to Senior Services, the McQuarrie Foot-Care Clinics, Meals on Wheels, and Senior Chore Service.

In 2014, 300 copies of the Guide to Senior Services were printed and distributed throughout Pullman and Whitman County. This lists about 60 services to seniors available in the county and is widely distributed through libraries, agencies, banks and other places frequented by seniors.

A \$200,000 donation by Agnes McQuarrie in 2010 established a foot care clinic with financial aid to low-income users. Use of this service requires a modest co-pay that has become a significant source of income for the organization. In 2014, 120 individuals used the foot care clinic. In addition, 30 people were served through the Meals-On-Wheels program while 100 were assisted with the chore service (Nancy Backus, Pullman Community Council on Aging, interviewed by N. Golter and S. Polle, August 28, 2015).

The Council serves both individuals and families and has no means test for either. Services are limited to Pullman residents 60 and over. While there is no limit to how often services may be received, the Council tries to ensure all who want to benefit from their programs can do so, and therefore may limit some services to individuals who have not benefited previously.

### **Conclusions**

Agencies and organizations interviewed function well due to the dedicated professionals and committed volunteers who carry out the work for the population of seniors and elderly in poverty. The inter-agency cooperation and communication is excellent; each mentioned other agencies it contacts regularly. Boards of directors are active not only in providing direction, but also in hands-on assistance; for instance, the Friends of Hospice board maintains two lift chairs to lend to patients and supplies specialty nutrition supplements when needed.

General conclusions are

- Providers commented that the need for personal services to stay independent continues to grow;
- Changes in traditional family units, distance, and other family demands often take precedence over care giving;
- Services to clients age 50 to 70 have increased as compared to earlier ages of 70 to 90. Increased numbers of stroke patients at a younger age have been reported.

## **Food Security**

### **Context**

Programs that provide food to households with insufficient food differ in one important respect from some other programs that address poverty. Providing food to those who need food assistance is a temporary measure that does not directly help people move out of poverty in the way that education or training programs can. Food assistance programs do, however, contribute to the mental and physical health and development of their clients. In this way, food assistance can contribute indirectly to helping people move out of poverty.

In 1996, the World Food Summit defined food security as “when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.” The United States Department of Agriculture (USDA) reports that in 2014, 14% of households in the United States were food insecure. It further reports that 13.7 % of households in Washington State were food insecure during the same period. Feeding America, the largest hunger relief organization in the United States, reports that in 2013, 20% of Whitman County’s population suffered from food insecurity (Feeding America, 2013). If this number is adjusted to account for households comprised of students who live off-campus and not with their families, the number might be closer to 10%, significantly lower than both the state and federal averages. This lower average, however, still means that approximately 4,500 people living in Whitman County do not always have enough to eat. In Whitman County there are both public and charitable programs that aim to provide food to those in need. There is some overlap in that the commodity programs of the USDA (CSFP and TEFAP) buy foods that are then distributed to state programs and are delivered to households or as served meals by charitable organizations.

## Public Programs

**Table 1. Public Programs Addressing Food Insecurity in Whitman County, 2014.** (WSDH, 2015; USDA WIC, 2015; USDA ACS, 2015; USDA SNAP, 2015; USDA NSLP, 2015; USDA CSFP, 2015; Second Harvest, 2015).

<b>Program</b>	<b>Number of Participants in Whitman County</b>	<b>Services Provided</b>
Supplemental Nutrition Program for Women, Infants, and Children (WIC)	1,292	Item specific food vouchers
Supplemental Nutrition Assistance Program (SNAP)	3,840	Food Vouchers
Free or Reduced School Meals	1,520	Prepared meals
Commodity Supplemental Food Program (CSFP)	88	Food packages and administrative funds
Emergency Food Assistance Program (TEFAP)	1,825	Food packages and administrative funds

### Supplemental Nutrition Program for Women, Infants, and Children (WIC)

The Supplemental Nutrition Program for Women, Infants, and Children program is funded by the U.S. Department of Agriculture through grants to the Washington State Department of Health, which contracts for delivery with the Whitman County Health Department. With an annual budget of about \$200,000 and offices maintained in Colfax and Pullman, this is the largest program administered by the Whitman County Health Department. Participants are pregnant women and children under the age of 5 years. In 2014, there were 183,405 individuals (about 3% of the total population) participating in the program in Washington state and about 1,292 (about 3% of the total population) in Whitman County. About 39% of the babies born in Whitman County participated in the WIC program, lower than the state rate of 47% (WSDH, 2015). In August of 2015 there were about 750 enrolled in the program, about 600 lived in Pullman and about 25 lived in Tekoa. The rest were scattered throughout the county (Whitman County Department of Health, Troy Henderson Director, interview with Mary Collins and Karen Kiessling Aug. 3, 2015).

Eligibility for WIC is income based. Table 2 presents the income guidelines. Women may participate throughout their pregnancies and up to 6 weeks after birth, if not nursing, and until the infants' first birthday, if they do nurse. Children can participate up to their 5<sup>th</sup> birthday (USDA WIC, 10/29/15).

**Table 2: Supplemental Nutrition Program for Women, Infants, and Children Income Eligibility Guidelines.**

<b>Number of people in household*</b>	<b>Maximum annual income</b>	<b>Maximum monthly income</b>
2	\$29,471	\$2456
3	\$37,167	\$3098
4	\$44,863	\$3739
5	\$52,559	\$4380
6	\$60,255	\$5022
7	\$67,951	\$5663

\*Each unborn child counts as one member of household.

The program provides supplemental nutritious foods, nutrition education, and counseling at WIC program clinics, and screening and referrals to other health, welfare, and social services. Each participant receives \$45 per month in food vouchers. The vouchers identify the quantities, types, and sometimes brands of food that can be purchased at authorized vendors. Each state develops its own list of approved foods (WSDH, 10/29/15).

### **Supplemental Nutrition Assistance Program (SNAP)**

The Supplemental Nutritional Assistance program (SNAP) is also known as the Basic Food program and was formerly known as Food Stamps. The program is funded by federal legislation and some matching state funds. In addition to food vouchers, able-bodied adults are expected to participate in job skills training and actively searching for employment.

Eligibility is income based as described in Table 3. Income is determined after a set of deductions is applied: medical expenses not covered by insurance; legally owed child support payments; dependent care when such care is needed for work, training, or education; and some housing costs. Participants must be U.S. citizens or legal immigrants and residents of the state of Washington. Disabled individuals may also qualify. Households may have up to \$2,000 in countable assets or \$3,250, if at least one member of the household is over 60 or is disabled. Some vehicle and housing assets are not treated as countable assets.

**Table 3: Supplemental Nutrition Assistance Program Income Eligibility.**

<b>Household Size</b>	<b>Maximum Annual Income</b>	<b>Maximum Monthly Income</b>
1	\$15,301	\$1275
2	\$20,709	\$1726
3	\$26,117	\$2176
4	\$31,525	\$2627
5	\$36,933	\$3078
6	\$42,341	\$3528
7	\$47,749	\$3979
8	\$53,157	\$4430

Generally the program requires that able-bodied adults between 18 and 50, without dependents, can get benefits for only three months in a 36-month period if they do not work or participate in a job training or job search program. This requirement has been suspended for Whitman County. Children, the elderly, and disabled can have benefits for an indefinite period. Monthly allotments are provided via an electronic transfer of funds to a type of credit card (referred to as an EBT Card). Table 4 describes the benefits as of 2014, which are lower than prior years' benefits.

Most students between 18 and 49 are not eligible for SNAP benefits. However, students may be able to get SNAP benefits, if they are otherwise eligible and receive some other form of public assistance and work at least 20 hours per week. In addition, they may also receive benefits under these conditions: they have a dependent under 6 years of age, a child over the age of 5, but under 12, and do not have adequate child care to enable them to attend school, or they work a minimum of 20 hours, or take part in a state or federally financed work study program.

**Table 4: Supplemental Nutrition Assistance Program Benefits 2014.**

<b>Household Size</b>	<b>Maximum Annual Benefit</b>	<b>Maximum Monthly Benefit</b>
1	\$2,268	\$189
2	\$4,164	\$347
3	\$5,964	\$497
4	\$7,584	\$632
5	\$9,000	\$750
6	\$10,800	\$900

SNAP benefits can be used to buy only food items intended for home consumption and seeds and plants that produce food for home consumption. Alcohol, tobacco, hot food and food sold for on-premises consumption, and non-food items such as pet food, soaps and other household products, paper products, medicines and vitamins, grooming items and cosmetics cannot be purchased.

According to the 2012 American Community Survey, 15% of households in Washington state and about 9% of Whitman County households receive SNAP benefits. Table 5 presents data on those receiving SNAP benefits in September, 2015.

**Table 5: Households Receiving Supplemental Assistance Program Benefits in Whitman County September 2015.**

<b>Community</b>	<b>Number of SNAP Households</b>	<b>% of Total Community</b>
Albion	41	7%
Colfax	186	7%
Colton	15	7%
Endicott	34	12%
Farmington	8	6%
Garfield	36	6%
Lacrosse	35	11%
Lamont	12	17%
Malden	26	14%
Oakesdale	37	6%
Palouse	37	4%
Pullman	748	3%
Rosalia	52	10%
St. John	41	8%
Tekoa	71	9%
Uniontown	19	7%

## Free and Reduced Price School Meals

Washington state law requires that when federal funds are available, lunch must be served to students in grades k-4 if twenty five percent or more of the enrolled students qualify for a free or reduced-price lunch as defined by the National School Lunch Program (NSLP). Schools where more than forty percent of the students qualify for free or reduced-price lunches are required also to offer breakfast. Schools offering summer academic, enrichment, or remedial programs must offer summer lunch programs or demonstrate an adequate alternative, if fifty percent or more of the students qualify for free or reduced-price lunches (RCW 28A.235.160). The federal program is also available to schools through grade 12.

The NSLP within the U.S. Department of Education provides about 62% of the funding for school meals, snacks, and milk. State and local levies fund an additional 7%, while cash sales provide about 31%. In addition to cash reimbursements, the federal program provides access to foods the USDA buys, which vary according to quantities available and market prices. The program also establishes nutritional requirements (NSLP, 11/2/15).

Households with incomes less than or equal to 130% of the federal poverty guidelines are eligible for free meals, while those with incomes less than or equal to 185% of the federal poverty guidelines are eligible for reduced-price lunches. In Whitman County in 2012, there were a total of 4614 enrolled k-12 students. Of these, the daily average participation in the breakfast program was 676, while daily average participation in lunches was 2389. Most of the breakfast meals were free, but most of the lunches were paid (Table 6).

**Table 6: School Meals in Whitman County 2010-2011, rounded figures (WSOPI 2015)**

	<b>Average Daily Participation</b>	<b>% Free</b>	<b>% Reduced-Price</b>	<b>% Paid</b>
Breakfast	676	60%	14%	26%
Lunch	2389	35%	9%	56%

In the state of Washington, about 45% of all k-12 students were enrolled in the Free and Reduced Price Meals (FRPM) program in May, 2015. In Whitman County the average rate of participation is 35%. All of the school districts in Whitman County offer both breakfast and lunch, although some are funded through their general funds, not the FRPM program (Kids Count 2015, WSOPI 2015; telephone calls to school district offices by M. Collins 1/14/2016). The number of students who were enrolled in the FRPM program in Whitman County in May of 2015 varied greatly across the county (Table 7). Seven school districts reported numbers lower than the state average, while four reported numbers higher than the state average.

**Table 7: Free and Reduced Price Meal Program Participation in Whitman County Communities, May 2015 (WSOPI, 2015)**

<b>School District</b>	<b>Students Enrolled in Free and Reduced Price Meals Program</b>	<b>Proportion of all Students</b>
Colfax	189	31.1%
Colton	40	22.6%
Endicott	61	58.1%
Garfield	60	54.5%
LaCrosse	22	30.6%
Lamont	16	48.5%
Oakesdale	42	37.8%
Palouse	52	31.3%
Pullman	831	31%
Rosalia	127	65.8%
St. John	52	33.5%
Tekoa	101	50.2%

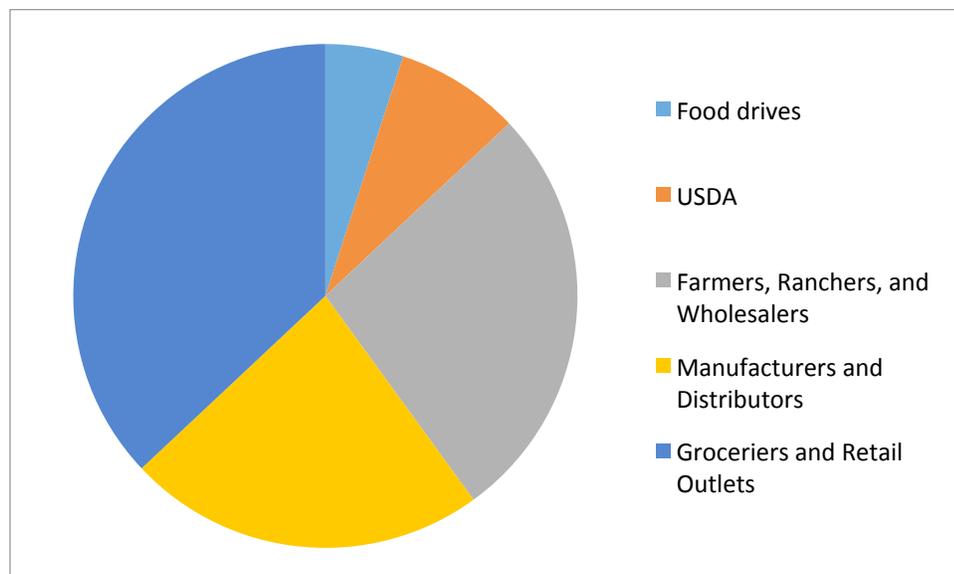
### **Charitable Programs**

Charitable programs include food banks, food pantries, community garden and gleaning programs, and regularly organized food drives. Those serving Whitman County are summarized in Tables 8 and 9. Food banks are organizations that receive foods from either public or private sources and hold them for distribution to food pantries. Food pantries distribute food directly to households. The primary food bank serving Whitman County is Second Harvest located in Spokane, Washington.

Second Harvest is a private non-profit organization serving communities in 21 counties in eastern Washington and northern Idaho. Food is collected in the following ways: 1. purchase and donations from food drives (5%) 2. the United States Department of Agriculture (8%) 3. farmers, ranchers, and wholesalers (27%) 4. manufacturers and distributors (23%) 5. grocery and other retail stores (37%). Between June, 2014 and May, 2015, Second Harvest distributed 24.7 million pounds of food through 250 food banks, meal sites, and other programs. Second Harvest averages a distribution rate of about 500,000 pounds each week. The organization maintains two

distribution centers, one in Spokane and one in the Tri-Cities, which are served by over 6000 volunteers (Second Harvest, 2015).

**Figure 1: Second Harvest Food Sources**



In Whitman County, Second Harvest delivers food once each month to the Council on Aging, which then distributes the food to local food pantries. Between 2010 and 2014, Second Harvest provided an average of 400,000 pounds of food per year to Whitman County. During the same period, they also provided an additional almost 200,000 pounds of USDA commodities per year to Whitman County.

In addition to Second Harvest, Northwest Harvest, another non-profit food bank located in Seattle, Washington, with a warehouse in Spokane, provided an average of about 26,000 pounds of food to Whitman County each year also working through the Council on Aging.

### **Food Pantries in Whitman County**

There are two food pantries in Pullman and one in most of the county’s incorporated towns, Table 8. There are other smaller pantries, such as at least one at WSU for which we could find no information and who do not participate in the Council on Aging/Second Harvest systems. The known pantries are described in Table 9. All but the food pantry at the Community Action Center in Pullman are operated only by volunteers. The Community Action Center food pantry has a small paid staff as well as volunteers. In the smaller communities most of the food comes from federal commodities or commercial growers or distributors. In Pullman and Colfax, a larger proportion of food is procured from food drives and other local sources. About 800 households are served by these food pantries each month.

All of the food pantries are open limited hours and can provide only limited quantities of food. Even those who described themselves as allowing, “as much as needed,” could offer only one or

two bags to the average household per visit. Most of the food pantries use a system where volunteers pre-pack the grocery bags, although many are moving toward a shopping model by which food pantry users select what they want. This system requires more space but results in less wasted food and more adequately meets the needs of the pantry users. When asked, food pantry personnel said they want to offer a wide variety of foods to clients, but clients tend to prefer foods that can be prepared quickly. Nearly all of the food pantries have some refrigeration and freezer space available, although it is not always at the distribution site.

**Table 8. Charitable Food Programs Serving Whitman County**

<b>Organization</b>	<b>Annual Funding</b>	<b>Funding Sources</b>	<b>Amount of Food Distributed Annually in Whitman County</b>
2 <sup>nd</sup> Harvest	\$8,979,791	Gifts, some federal grants	600,000 lbs
NW Harvest			26,000 lbs
Council on Aging	\$1,200,000*	State grants	626,000lbs**
Back Yard Harvest	\$100,000	Regional grants	10,251 lbs
CAC Food Bank Garden Program		Gifts and local grants	1360 lbs
Palouse Cares	\$35,000	90% gifts, 10% local grants	20,000 lbs.

\*Includes food, transportation, and senior services.

\*\*Includes 2<sup>nd</sup> Harvest, NW Harvest, and USDA commodities.

Each of the food pantries operates under its own organizational framework. Some are formally defined as tax-exempt, some are under the auspices of separate service organizations, and some lack any formal organization. Those who visited the food pantries noted that it appears that reliable and dedicated volunteers serve at all county food pantries, and that food pantries serve as important elements in the social character of the communities in which they are located.

**Table 9: Food Pantries in Whitman County (Food Pantry Interviews, see Appendix 1).**

<b>Food Pantry</b>	<b>Households Served Monthly</b>	<b>Days of Service per Month</b>	<b>% USDA Commodities and 2<sup>nd</sup> Harvest/NW Harvest</b>	<b>Local food drives and purchased food</b>	<b>Operating Budget</b>
Albion	31	1	75%	25%	None
Colfax	62	1	10%	90%	None
Colton/Uniontown	87	1	Unknown	Unknown	None
Endicott	48	1	Unknown	Unknown	None
Garfield	89	1	Unknown	Unknown	None
LaCrosse	43	Unknown	Unknown	Unknown	None
Malden	37	1	90%	10%	None
Oakesdale	21	1	Unknown	Unknown	None
Palouse	43	1	90%	10%	None
Pullman, CAC	176	12	6%	94%	\$20,000
Pullman, Child Welfare	50	4	0%	100%	\$10,000-\$20,000
Rosalia	32	2	Unknown	Unknown	None
St. John	30	1	100%	0%	None
Tekoa	50	1	80%	20%	None

### **Community Garden and Gleaning Programs**

Two significant food-producing programs work in Whitman County: Back Yard Harvest and the Community Garden program of the Pullman Community Action Center.

#### ***Backyard Harvest***

Backyard Harvest, a private, nonprofit organization headquartered in Moscow, serves several local counties through gleaning of fruits and vegetables in local yards and orchards, as well as from several local community garden projects. It also processes EBT cards (the SNAP food stamp program) at local farmers markets. In 2014 Backyard Harvest had a staff of about 10 part-time employees (about 150 total hours per week), 180 volunteers, and a budget of about \$100,000 serving four counties in Washington and Idaho. They gleaned 11,541 pounds of fruit

and grew 1,140 pounds of produce, of which 10,251 pounds were distributed to food pantries in Whitman County. Almost 90% of the fruit gleaned was from the WSU Tukey orchard.

### ***Pullman Community Action Center Food Bank Garden Program***

The Community Action Center Food Bank Garden program is a three-year old effort to provide fresh fruits and vegetables and food growing and nutritional information to low-income individuals. The organization has a single full time staff person and about 50 seasonal volunteers; its funding comes from gifts and local grants.

It has garden plots in Pullman at the Community Action Center, Koppel Farms, St. James Episcopal Church, Sunnyside Elementary, and Lincoln Middle School. In addition, it has hydroponic growing facilities at the Community Action Center. In 2015 it produced about 1360 pounds of fresh fruit and vegetables over 80% of the year. In addition to growing food for distribution at the Community Action Center Food Bank, the Garden Program conducts workshops at Lincoln Middle School and Sunnyside Elementary in collaboration with after school programs operated by the YMCA. These workshops include hands-on gardening and food preparation. The Garden Program also recently began monthly cooking demonstrations held during food bank distribution hours.

### **Regularly Organized Food Drives**

Palouse Cares is a non-profit organization serving the Palouse region including Whitman County. It has done multiple community, door-to-door food drives and fund raising auctions in Pullman and Moscow in December of each of the last 10 years. In 2014, it collected 40,819 pounds of food and \$34,000. These gifts were shared with service organizations as well as food pantries in Whitman and Latah counties (Rick Minard email correspondence with Mary Collins January 4, 2016).

### **Palouse Fresh Foods Project**

The Palouse Fresh Foods Project is within the Center for Civic Engagement at Washington State University. It is a collaborative effort between Americorps Avista and a consortium of Washington institutions of Higher Education. The program provides interns to Whitman County service organizations, delivers after school youth programs in gardening and composting, and is hosting a series of workshops at the Pullman Koppel Farms community Gardens (WSUCCE 2016).

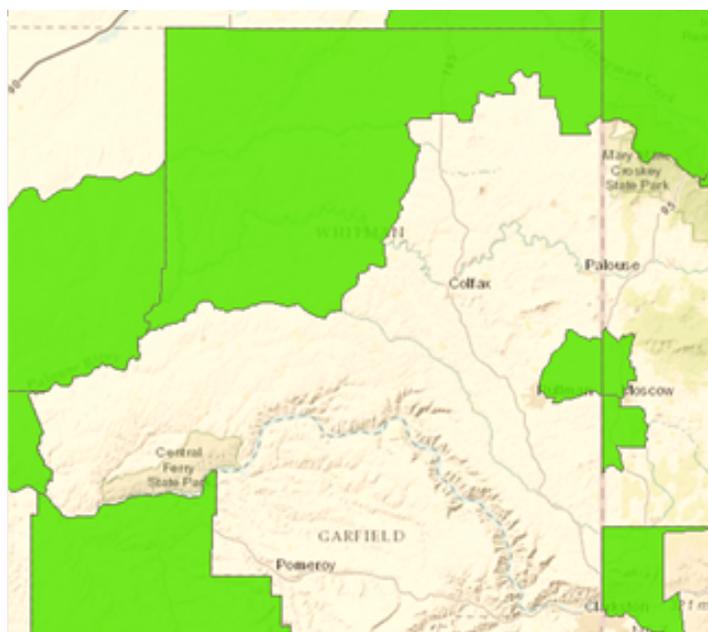
### **Food Quality and Access to Food in Whitman County**

Access to affordable, good quality foods is essential to food security. The Food, Conservation, and Energy Act of 2008 (H.R. 2419) uses the term “food desert” to designate an area in the U.S. with “limited access to affordable and nutritious food, particularly such an area composed of predominantly lower-income neighborhoods and communities.” Thus, the designation of an area as a food desert considers both access to nutritious food and income.

According to the USDA Economic Research Service Food Access Research Atlas, areas in the northern and northwestern parts of Whitman County (Figure 2, below) have both low incomes and low access to food (USDA, ERS, 2014, updated 2015). This part of the county contains no towns with populations greater than 1,000. This entire area contains only one grocery store (Tekoa Market). Although Figure 2 does not provide information on vehicle ownership and people in sparsely populated areas are often accustomed to driving to metropolitan areas to obtain goods and services, “the cost and effort required to access healthful food may also contribute to food insecurity, if a household has to spend scarce budget and time resources traveling to a store that sells healthful food. The lack of full-service stores in some neighborhoods may also make participation in the USDA Supplemental Nutrition Assistance Program (SNAP) less attractive if it is more difficult to redeem benefits” (Ver Ploeg et al., 2012:1).

Furthermore, if only one store is accessible, consumers are not able to choose between businesses differing in price, quality, and variety of foods (Ver Ploeg et al., 2012). Low access is defined as distance from a supermarket >10 miles in a rural area or >1 mile in an urban area (USDA, ERS, 2014). In addition, the area of eastern Washington encompassing WSU in Pullman is designated by the Economic Research Service as low income/low access to food (Figure 2). This may be misleading, however, because Pullman has an excellent transportation system that provides access to the town’s four supermarkets. In this situation, not having a car might make food shopping less convenient, but it would not preclude access to food stores or reduce consumer choice among stores.

**Figure 2. Areas in Whitman County with low income and low access to food (USDA Food Atlas 2016).**



## **Strengths and Weaknesses in the Food Security System in Whitman County**

Strengths include a citizenry that donates generously from its resources and time. There are significant, long-standing programs in even the most remote parts of the county. These efforts often represent a strong thread of social involvement, commitment, and caring within the communities served. Importantly, when we visited during food distribution hours, we often found both the servers and recipients enjoying the social engagement.

The central role of the Council on Aging in the distribution of foods from the regional food banks and federal commodities is important in the efficient provisioning of food pantries, and its collaboration with other food collection and production projects is important. Continuing and increasing the centralization of food collection efforts, while maintaining community autonomy in the distribution work, is essential.

Local efforts to provide fresh and healthy foods are also a growing strength of the food security systems. In addition to the programs described above, the Palouse Fresh Foods Project of the WSU Center for Civic Engagement is effectively working to connect student volunteers with community programs and has developed an informational system to aid in the efficiency of fresh food donations.

It might be possible to increase the long-term impact of food assistance programs by providing information about preparation of nutritious, inexpensive, and appealing food. Some of the most promising work is the educational efforts of the Pullman Community Action Center Gardening Program. The workshops and demonstrations it is developing for youth and food pantry users are informative and fun and have the potential to increase significantly the independence and improve the nutritional status of food insecure individuals.

The greatest weakness of the existing systems is that all of the good work being done still does not provide enough food to households to make people food secure. Among those most in need, a household of four people, which must include children, might expect about \$600 in SNAP benefits, free school lunches and maybe breakfasts, and perhaps two bags of food from a food pantry each month. The USDA estimates a national average cost of about \$850 per month to feed a family of four on a low-cost plan (USDA Center for Nutrition Policy and Promotion, 12/8/15). An immediate need is to explore the possibility of summer lunch programs. School districts, whose rate of free or reduced price lunches is at least 50%, can apply for summer lunch grants from the US Department of Agriculture. Opportunities for summer lunch programs for school districts where the rates for Free or Reduce Price Program participation ranges from 22.6% to 48.5% should be explored.

## Healthcare

### Social and Economic Determinants of Health

According to the Washington State Department of Health,

Social and economic conditions are major determinants of health. Income, wealth, education, employment, neighborhood conditions and social policies interact in complex ways to affect our biology, health-related behaviors, environmental exposures, and availability and use of medical services. Health impacts associated with lower socioeconomic position can begin before birth and build up throughout life. Despite national efforts to eliminate health disparities, including those related to low socio-economic position, by 2010, neither Washington nor the nation achieved this goal. In fact, disparities grew for many measures of socio-economic position and health (WSDH Social and Economic Determinants of Health, 2013).

Unmet medical care issues in Whitman County are summarized in Table 1.

**Table 1: Healthcare Utilization and Access in Whitman County, 2011-2013**(WSDH Behavioral Risk Factor Surveillance System (BRFSS), 2011-2013).

<i>Unmet Needs Risk Factors for adults at least 18 years of age</i>			
No primary care provider	No health care visit in past year	Delayed or unmet care in past year due to cost	No dental visit in past year
21%	42%	10%	39%
<i>Lack of Prevention Screenings*</i>			
No mammogram in past 2 years (Women > 40)	No pap smear in past 3 years (Women > 18)	No colonoscopy in past 10 years (Adults > 50)	No flu shot in past 1 year (all ages)
27%	28%	23%	62%

\*In 2011 the ACA required Medicare and all qualified commercial health plans to cover routine preventive services.

### Shortage Areas for Primary Medical Care in Whitman County

The Washington State Department of Health and the Federal Health Resources and Services Administration survey primary health care providers on a three-year rotational schedule. The responses and other factors identify geographical areas and population groups that have critical shortages of health care providers to supply primary medical, dental, or mental health care. These are called Health Professional Shortage Areas and indicate poor access to and utilization of basic healthcare services. Several state and federal programs use these designations to

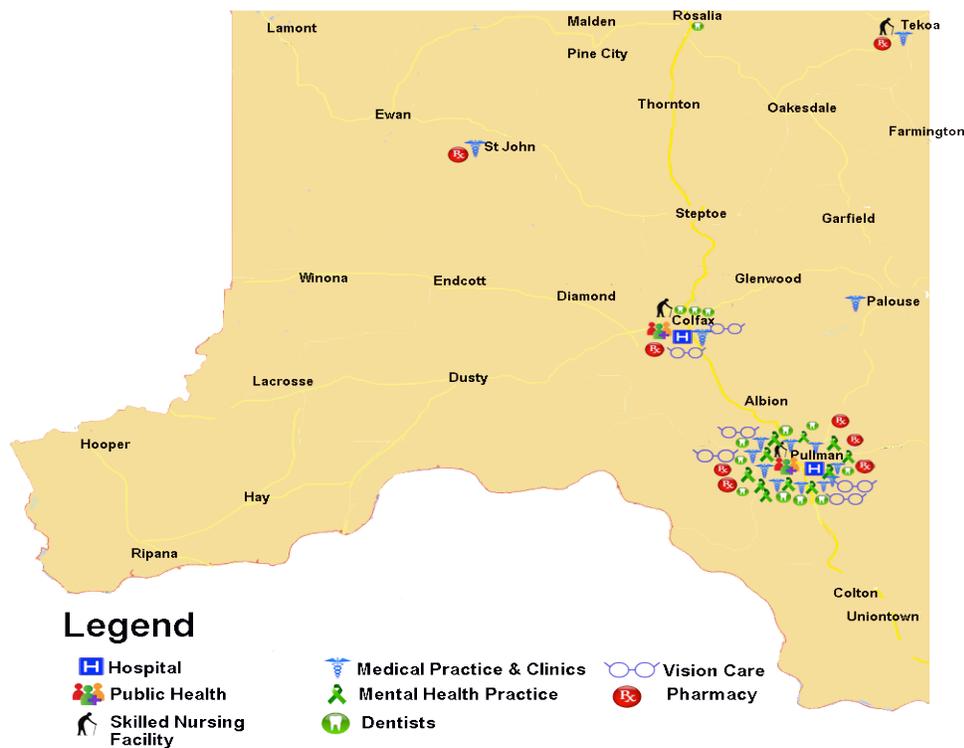
determine eligibility for payment enhancements and workforce programs. The major criteria for these designations are provider to population counts, poverty rates in towns, and travel times. Whitman County has been assigned designated Shortage Areas for the following:

- **Primary Medical Care** in the geographic areas of Garfield, Tekoa, Oakesdale, Rosalia plus Rock Lake and Lacrosse; and for the population group of low-income people living in Colfax, Palouse, Uniontown, and Pullman.
- **Primary Dental Care** for the population group of low-income/homeless in the entire county.
- **Mental Health Care** for all residents in the county (WSDH HPSA, 2015).

The following map visualizes the geographic shortage areas.

Figure 3.

### Map: Healthcare Facilities in Whitman County



### Hospitals

There are two hospitals in Whitman County: Pullman Regional Hospital (PRH) in Pullman and Whitman Hospital and Medical Center (WHMC) in Colfax. Both are designated Critical Access Hospitals by the Federal Office of Rural Health Policy for the purpose of ensuring that Medicare

enrollees have access to healthcare services in rural areas, especially hospital care. They receive enhanced Medicare reimbursement (WSDH CAH, 2015).

### ***Pullman Regional Hospital***

Pullman Regional Hospital (PRH) works to “ensure a strong, robust healthcare system for the region” (Adams, 2013, 2014). The hospital’s record-setting growth, after opening the new facility in 2004, led to increased commitments to providing a range of services to the Pullman community. However, decreases in reimbursements from government and private insurance companies illustrate the need for increased community financial support. A Maintenance & Operations levy was approved in February 2014, and the hospital’s Foundation has achieved some success in fund raising (Adams, 2013, 2014). The difference between an average billing and what Medicaid (\$0.52 on the dollar), Medicare, or commercial insurance (\$0.70/dollar) pays PRH cannot be charged to the patient. Even if reimbursed 100% of what is “allowable” by insurances, it would account for only 50% of the hospital’s actual costs. As a small, rural hospital, PRH cannot benefit from bulk discounts. Instead, it must find innovative ways to deal with inadequate reimbursements, while at the same time keeping a small volume service, such as the Intensive Care Unit, vital (Eylar, 2015).

An average sampling of similar hospitals indicates PRH’s charges range from 102-260% lower than the statewide average. A typical inpatient will pay \$7000/day and \$19,500 per admission (Eylar, 2015). The hospital partners with CarePayment, a healthcare finance company—not a collection agency or credit card company—that commits to helping people manage their medical expenses by providing a financing option to pay off their balances in manageable monthly payments, over a maximum of 25 months, with no interest. Following implementation of the Affordable Care Act (Table 2), PRH attributes its 60% decrease in spending charity dollars to the 2014 Medicaid Expansion in Washington (Febus, 2015). The hospital authorizes charity dollars by having the patient prove insurance denials on an application.

**Table 2. Whitman Hospital and Medical Center and Pullman Regional Hospital: % of Receivables by Insurance Type, Bad Debt, and Charity Costs, 2013/2014 (WA State Auditor’s Office, WHMC, 2015; Febus, 2015).**

	Medicaid	Medicare	Private Insurance & Self Pay	Bad Debts	Charity
Whitman	2013-7% 2014-3%	2013-30% 2014-31%	2013-30% 2014-31%	2013-\$ 482,171 2014-\$ 616,953	2013-\$ 312,228 2014-\$ 70,143
Pullman	2013-6% 2014-15%	2013-32% 2014-35%	2013-62% 2014-50%	2013-\$ 1,514,000 (1.8% of patient revenue) 2014-\$ 1,656,000 (1.8% of patient revenue) 2015-\$ 1,422,310 (1.5% of patient revenue)	2013-\$ 1,390,000 (1.5% of patient revenue) 2014-\$ 382,000 (0.42% of patient revenue) 2015-\$ 342,579 (0.33% of patient revenue)

PRH has recognized an increase in poverty by identifying more patients with no place to go upon discharge, a lack of adequate subsidized housing, and too few home health services. To address these problems in part, PRH will occasionally use its status as a Critical Access Hospital to allow patients otherwise ready for discharge to be kept in “swing beds” designated for either acute or skilled nursing facility-level care. Another indicator of increased poverty is an increase in Emergency Department visits for people who have insurance, but either don’t have a primary care provider or one who accepts Medicaid. Before the Affordable Care Act, there was an average of 16 visits per day; today the average is 24 visits per day (Eylar, J., PRH, interviewed by Judy Stone and Karen Kiessling, July 16, 2015).

Part of PRH’s mission is “providing leadership for integrated health and healing activities in order to create a self-sustaining, self-directed, inclusive model of healthcare for the region” (Adams, 2013, 2014). The hospital board and the district’s commissioners are proactive in establishing and maintaining community outreach programs meant to increase access and use of health and social services needed by low-income, elderly, and people who need help

coordinating the many arms of healthcare services. Working toward that goal, several programs were put in place over the past few years.

An Interagency Care Coordination group was established in 2012, with representatives from Pullman Regional Hospital's social work and nursing departments, skilled nursing facilities, assisted living centers, adult family homes, Circles of Caring, Rural Resources, and Home Health and Hospice. The group's goals include establishing seamless interagency transitions and holding interagency care plan meetings about patients in order to have people in the right level of care at the right time, while balancing medical necessity, social needs, and payment abilities. Pullman Fire and Emergency Medical Services recently joined the group to discuss providing after-hours transportation between Pullman Regional Hospital and a residential facility for Pullman residents who do not meet medical necessity for transport (Adams, 2013, 2014).

PRH has developed a Social Work Extenders program that mentors, as a proactive move, WSU senior Human Development students to visit clients regularly at subsidized independent-living sites, the Free Clinic, and Pullman Family Medicine. In 2014, the hospital contracted with the Washington State Health Care Authority to provide a state social work-based program, called Health Homes, for people with Medicare/Medicaid. Home visits are made to aging and disabled persons with chronic, multi-morbid conditions (i.e. multiple diseases/health problems) who have poor access to services for many reasons and often live in our outlying towns (Adams, 2013, 2014).

Also in 2014, the Whitman County Health Network was organized. Members include representatives from medical practices, the Department of Public Health, both hospitals, WSU, the Community Action Center, the Pullman and Colfax School Districts, long-term care facilities, and mental health providers. The Network's priorities are to reduce duplication and fill in gaps in services; assess opportunities for appropriate regional alliances related to health services, social services, and public secondary education services; integrate medical care with social determinants of health; and explore the role of "medical equity" in plans and programs as it relates to access to services (Adams, 2013, 2014).

### ***Whitman Hospital and Medical Center***

Whitman Hospital and Medical Center declined to participate in interviews. All data come from its website and one financial report (WHMC, 2015).

### **Public Health**

The Whitman County Department of Public Health has two offices, one in Pullman and one in Colfax. Public Health services mandated by Washington Administrative Code include communicable diseases, tuberculosis, and sexually transmitted disease control, prevention, and treatment services (WAC 246, 2015). The Health Department's current Washington State

Consolidated Contracts through the Washington Department of Health for 2015-2017 (WSDH Consolidated Contracts, 2015) are for Women, Infant, and Children Nutrition, Maternal & Child Health, and Immunizations & Child Profile, which is a record keeping and tracking system for childhood immunizations. Over the last two years, the number of Public Health programs, most of which were directed towards low-income people. During our interview, the director voiced some concerns, including not enough eligible people signing up for Medicaid in small towns. “The few people coming to the Health Department for immunes or TB tests are doing so because of being used to the easy access rather than being low income”. The director would like to develop educational programs for the newly insured (Henderson, T., WCDH, interviewed by Mary Collins and Karen Kiessling, 8/3/2015).

### **Whitman County Health Care Providers**

#### ***Primary care providers***

Primary care providers are medical doctors or doctors of osteopathy who serve as an initial point of contact for patients. They comprise practices in Family Medicine, OB/GYN, Pediatrics, Geriatrics, and Internal Medicine. WSU doctors were not included in this study with the exception of those affiliated with its public Mental Health Clinic in the Psychology Department.

There are 39 primary care providers who practice out of 14 sites including single and multi-physician practices, the Palouse Free Clinic, and the walk-in ReadyCare clinic, Table 3 (WSDH PCP, 2013). This is 1 per 1,200 citizens of Whitman County. The national average of patients seen by a primary care provider is 19 per day; in the state of Washington it is 14 per day (Bernstein 2014; Skillman et. al., 2012), and in Whitman County it ranges from 5 to 20 per day in our three family medicine group practices. All of these practices are accepting new patients. The percentage of their clients using private, Medicare or Medicaid insurance, and payment options for the uninsured are presented in Table 4.

**Table 3. Primary Care Providers in Whitman County, 2015**

	<b>Family Practice</b>	<b>Internal Medicine</b>	<b>OB/GYN</b>	<b>Pediatrics</b>	<b>Total</b>
Pullman	13	8	5	7	33
Colfax	5	1	0	0	6
Total	18	9	5	7	39

**Table 4. Family Practice/Internal Medicine Groups, 2014**

Practice	Private insurance	Medicaid	Medicare	Uninsured	Payment plans for uninsured	Discounts for cash at time of service
<i>Palouse Medical - Pullman</i> Family Practice plus Internal Medicine.	62%	9-10%	28-29%	<1%	90 day	20%
<i>Pullman Family Medicine- Pullman</i> Family Practice.	64.5%	25.5% (currently no new)	10%	.9%	6 month, 1/2 at visit.	25%
<i>Whitman Medical Group- Colfax, Tekoa, St. John.</i> Family Practice plus Internal Medicine.	58%	22-25%	17%	2-3%	120 days	10%

Palouse Medical also owns and runs the ReadyCare walk-in clinic. Forty percent of their main practice is over 65, leading to higher numbers of Medicare and lower numbers of Medicaid clients. Although Pullman Family Medicine is not accepting new Medicaid clients right now, it will review this decision in early 2016. The policy at Whitman Medical Group is to see everyone who needs care so it works with each uninsured client to set up an individualized payment plan that works for him/her. These three Primary Practice groups have identified many issues related to poverty in our county:

**Access and utilization issues** Sometimes diagnostic testing, choices of medications, and other treatments have to be modified to accommodate what patients’ insurance will cover: people may self-pay instead of using their insurance when they have high deductibles and co-pays; lack of a support system can hinder transportation to appointments—many use COAST; clients may opt not to see the first choice referral made by their primary care provider, if they have to travel to Spokane to do so; and it may be difficult or impossible to access mental health, addiction, dental, nutritional, and/or home health needs locally.

**Non-compliance issues** These are seen in prescriptions not getting filled or refilled, patients not coming back for follow-up visits, and a high rate of “no-shows.” Drug samples are rarely given out because providers believe they lead to higher drug pricing.

**Other, more general issues** Most practices don't ask a patient’s poverty status or use the FPL to make service decisions; they supply a hardship application only if the patient brings it up. The

poor are easily lost in the healthcare system, especially if multiple providers and agencies are involved and this lack of oversight contributes to the abuse of medical facilities and services, to learned helplessness, and to presenting for care with late-stage illnesses.

Possible solutions for some of the needs these providers see related to poverty are education in financial planning and parenting support. Most providers feel burdened by the poverty they see, but don't meet to discuss possible solutions outside of their own practice. Reimbursement rates have dropped, so providers have to see more patients to be able to cover expenses. Having another family medicine practice might help, but not if Medicaid reimbursements don't increase and/or additional providers don't accept Medicaid. Prescription relief is needed to subsidize necessary medications for low-income patients, and funding for more caseworkers to help them access services (Broeckel, J., Whitman Medical Group, interviewed by Stone/Collins, Nov. 3, 2015), (Hatley, S., Pullman Family Medicine, interviewed by Glawe/Daniels, June 17, 2015), (Kwate, T. and Nunamaker, D., Palouse Medical, interviewed by Glawe/Daniels, Sept. 9, 2015).

### ***Obstetrics and Gynecology***

Moscow-Pullman OB/GYN is the sole OB/GYN practice in Whitman County, and yet it is taking new clients and believes it accepts everyone who chooses to see either an obstetrician or gynecologist for her care. An average wait to be seen as a new patient is three to four weeks, depending on the provider. All five providers are committed to no caps on the number of Medicaid patients they will see.

Medicaid accounts for 35-40% of its billings, an increase from 25% (which is typical for a family medicine doctor) of a few years ago. Uninsured clients receive a 25% discount if they pay at the time of their visit. Payment plans can reach 180 days, and the practice is in the process of developing a "hardship application" for those who cannot fit into either of those services (Orr, L., Moscow-Pullman OB/GYN, interviewed by Stone, Dec. 1, 2015).

### ***Pediatrics***

Palouse Pediatrics, the only pediatric practice in Whitman County, is owned by Pullman Regional Hospital and was recently designated a Rural Health Clinic. It is accepting new patients, with the usual wait time to get an appointment for either a new or established patient being about three weeks. Palouse Pediatrics accepts Medicaid, accounting for 30% of their billings; uninsured clients account for 5%. A 20% discount is given for paying in full at the visit; six-month payment plans are available; and charity care can be requested (Port, K., Palouse Pediatrics, interviewed by Stone, Dec. 1, 2015).

### ***Other Clinic Settings, 2014***

#### **Pullman ReadyCare**

Pullman ReadyCare, part of the Palouse Medical Corporation, offers acute and minor care for walk-in patients seven days a week. About half of its clients are people 18-29 who do not have primary care providers.

#### **The Palouse Free Clinic**

The Palouse Free Clinic was established in April, 2014 as a non-profit with the commitment to providing free access to primary medical care for acute and chronic conditions in under-served populations in the Palouse area. The all-volunteer staff includes doctors, physical therapists, mental health providers, first-year University of Washington Medical School students at the University of Idaho and Washington State University through the WWAMI program, pre-nursing students, administrative staff, social work interns, medical nutritionists, and pharmacists. Staff try to connect people they see with a primary care provider and would like to have more of them in the area. Services provided include non-invasive procedures, medical supplies when possible, and prescription and over-the-counter medications. If they don't have needed medications on hand, Sid's Pharmacy will assist in providing them. The prescription of narcotics is against Clinic policy. In 2014 they opened for 39 evenings (Tuesdays, 6-8 pm) over nine months, saw 131 new patients, and 95 follow-up visits. 72% of the clients seen were ages 22–50.

During 2014, the Palouse Free Clinic administered exit questionnaires. To the question of “If this Free Clinic wasn't here, where would you have gone for healthcare?”, 23% said a local provider, emergency department, ReadyCare, or Student Health, and 18% said nowhere. In the previous 12 months, 33% had been to an emergency department, and when asked the last time they received medical care of any kind, the answers ranged from “a couple of days” to “don't remember” to “2005.” The average monthly household income was computed to be \$1,581 with 64% being unemployed (Hall, S., Palouse Free Clinic, interviewed by Glawe/Kiessling, June 8, 2015).

#### **Planned Parenthood**

Planned Parenthood is a non-profit, 501(3)(c) with state and national affiliations. An advanced registered nurse practitioner provides a sought-after, safe, non-judgmental setting for women's and men's health care that includes birth control; free condoms; pregnancy testing; sexually transmitted disease testing and treatment; HIV testing; lesbian, gay, bisexual, and transgender services; and abortion referrals. Approximately one-third of its budget goes toward free or low-cost care; 79% of its clients have Medicaid or are Uninsured; 70% are below the FPL, and 94% qualify for assistance. Planned Parenthood believes access to birth control and education are the two most effective ways to get out of poverty (Name of person interviewed withheld by request, Planned Parenthood, interviewed by Glawe/Kiessling, May 22, 2015).

### **Rural Health Clinics**

Whitman County has two Rural Health Clinics, a designation given by the Centers for Medicare and Medicaid Services to address an inadequate supply of physicians serving Medicare beneficiaries in rural areas, and to increase the utilization of nurse practitioners and physician assistants in these areas (a mid-level practitioner is required to be in the clinic 50% of the time). Rural Health Clinics are paid an all-inclusive, annually contracted rate per visit, regardless of the care given, for primary health and qualified preventive health services and are eligible for enhanced Medicare and Medicaid reimbursement.

Washington state licenses advanced registered nurse practitioners to practice independently, allowing the Palouse Health Center in Palouse to be owned and run by Sandra Schorzman, ARNP. The second Rural Health Clinic, Palouse Pediatrics in Pullman, owned by Pullman Regional Hospital, was certified in February, 2015.

### **Palouse Health Center**

Schorzman says a few of the many poverty issues affecting health include a lack of assurance in dealing with illness, poor coping skills, excessive use of emergency departments, and poor nutrition. Non-compliance is also an issue, but is aided by insurance companies who notify providers when tracking of their subscribers indicates they are not filling prescriptions or keeping up with preventive screenings. This clinic sees about 20 patients a day, including walk-ins, and accepts all insurances. Like other providers, the small number of homeless clients this practice sees is transient. Thirty one percent of the practice uses Medicaid, 19% Medicare, and 11% is uninsured. Palouse Health Center buys medications to give to patients who can't afford to pay for them. Its sliding fee scale can go as low as 0% of a bill (Griffin, W., Palouse Health Center, interviewed by Stone/Collins, Sept. 16, 2015).

### **Physician Specialists**

Although many physician specialists come from Spokane on a routine monthly schedule to see patients at Whitman Hospital and Medical Center and Pullman Regional Hospital clinics, recruiting and retaining specialists to live and practice in Whitman County has been a challenge. Many local specialists do not accept Medicaid, which requires referrals to Spokane physicians (Griffin, W., Palouse Health Center, interviewed by Stone/Collins, Sept. 16, 2015). When there are only one or two providers of a certain specialty, they have to be on-call 24/7, including weekends, leading to an undesirable quality of life and burnout. The two Whitman County hospitals and Gritman Hospital in Moscow now participate in two joint ventures to recruit, co-own and/or subsidize specific specialties in an effort to stabilize local access to these services. Palouse Surgeons, LLC is a joint venture of Gritman Medical Center, Pullman Regional Hospital and Whitman Hospital and Medical Center that currently supports four general surgeons. Palouse Specialties, P.S. is also jointly owned by the three hospitals. Currently they support urology and ear, nose, and throat specialties. Psychiatry and behavioral health is seen as a critical gap.

### **Mid-Level Practitioners**

Fifteen advanced registered nurse practitioners and physicians' assistants are employed by physicians' offices and provide additional access to healthcare for Whitman County citizens.

### ***Mental Health Providers***

Washington State ranks 48 out of 50 states in the need for and access to mental health care (Mental Health America, 2015). There are 12 mental health practices in Whitman County employing a total of 41 practitioners: Palouse Psychiatry & Behavioral Health, WSU Psychology Clinic, Palouse Recovery Center, Palouse River Counseling, and 8 others in private practice. The 41 providers include one psychiatrist; 21 social workers, counselors, and advanced registered nurse practitioners; 15 psychologists; and four chemical dependency counselors.

**Palouse River Counseling** has the Whitman County contract as a non-profit, 501(3) (c) to provide mental health services, including a 24 hour/365 day crisis intervention to low-income citizens. Palouse River Counseling has 25 providers who see most patients once a week, and its day treatment center, Harvest House, is open five days a week. They have 3 individuals who provide chemical dependency services. Along with taking Medicaid, Palouse River Counseling offers a sliding fee scale based on the availability of United Way funds. The agency works closely with the Whitman County's Community Action Center, Community Service Officer, Department of Public Health, schools, hospitals, nursing homes, and jails (Allenger, R., Palouse River Counseling, interviewed by Glawe, October, 2014).

**The WSU Psychology Clinic** has a sliding fee system for its clients, who come from a wide geographic area (Sharpless, B., WSU Psychology Clinic interviewed by Glawe, March 15, 2015).

### ***Dentists***

There are 13 dentists in Whitman County none of whom accept Medicaid, except for the four who participate in the Access to Baby and Child Dentistry (ABCD) program mentioned below. Therefore, low-income persons must travel out of the county to receive dental services available at the Clarkston or Spokane Community Health Association of Spokane (CHAS) Clinics. Although the Community Health Association of Spokane clinics treat anyone and use sliding fee scales, there is normally a three- month wait for an appointment.

One dental practice interviewed has a wait to get an appointment of five weeks for a new patient, four weeks for an established patient, and an emergency visit can take up to three days. The practice does accept uninsured patients and gives a 5% discount for paying at the time of the visit. When discussing poverty issues, it was noted that restorative dental care becomes more expensive and complicated over time due to the difficulty obtaining care and to avoidance of dealing with dental problems. Local dentists do not meet to discuss ways to make dental care

available for people living in poverty (Dustin, R., Pullman Dental Care, email interview by Stone, Oct. 20, 2015).

### **Dental Services for Children**

There are two dental programs that serve children in low-income families in Whitman County. Use of these is shown in Table 5 below. One of the programs is the SmileMobile operated by the Washington Dental Service Foundation (WDSF SM, 2015), serving children ages 0-17 and pregnant women having Medicaid. They also bill private dental insurance and offer a sliding fee scale for the uninsured, which is usually \$5/visit. In 2015 they increased their visits to our county to twice a year and served a total of 172 children. The Whitman County Department of Health coordinates the SmileMobile's visits and advertises heavily within the Women Infants and Children nutrition program. Letters are sent to all families through the schools and referrals come from local dentists and Family Promise. The van sits in a donated parking lot Monday through Friday with assessments being done on Mondays and Tuesdays and cleaning and simple restorations carried out on Wednesday, Thursday, and Friday. Any follow-up needed is referred to Spokane ABCD (see below) pediatric dentists. The staff says the most common dental issues for kids living in poverty are poor brushing habits and poor nutrition (Maxwell, A. WCDH, interviewed by Judy Stone, September 3, 2015).

The second program, Access to Baby and Child Dentistry program, is managed by the Washington Dental Service Foundation (WDSF ABCD, 2015) and attempts to provide comprehensive and continuous dental service for children birth through five years who are on Medicaid. The goal is to have all children seen by their first birthday for preventive care, screening, treatment, and education of the parents. Annual services include three fluoride treatments, two exams, and two parent education sessions plus all necessary dental procedures, with referrals made when necessary to ABCD pediatric specialists in Spokane. Clients enroll from a choice of four currently participating dentists (two in Colfax, two in Pullman) who receive enhanced reimbursement. Each dentist sets his/her own limits of about 20-25 ABCD clients/month from their own towns.

Three of the providers also keep these children in their practices until the ages of 15-17. All agree that prevention is vital because many parents don't realize that the health of "baby teeth" is critical to future healthy teeth. Emphasis is placed on early brushing and preventing "bottle rot" gum disease. The Washington 2010 Smile Survey shows the rate of untreated decay among low-income preschoolers was cut in half over the last five years (WSSS 2011). The Whitman County Health Department stopped managing this program in July, 2015 due to non-covered costs to the Whitman County Department of Health. The state is currently seeking a non-profit in Whitman County to take over management of the program. The goal of the program is to serve 55% of those eligible. For Whitman County the rate of service in 2012 was 38.1% while in 2014 it was

31.7%. The decrease in use of this program is attributed to poor access to too few participating dentists (O’Meara-Wyman, 2015).

**Table 5. Use of the Dental Programs for Low income Children in Whitman County (WHCA, 2015)**

	Eligible 2012	Users 2012	Eligible 2014	Users 2014	Users 2015
ABCD	1,468	559	1525	483	
SmileMobile					172

***Vision Care Providers***

Whitman County has six optometry practices, employing eight optometrists in Pullman, and one practice with an office in Colfax as well. The effects of living in poverty, which optometrists have noted, are delayed treatment leading to longer treatment or recurrences and learned helplessness. Only one ophthalmologist practices in Whitman County; he travels to Colfax every Tuesday from the Spokane Rockwood Clinic that owns the practice, plus one to two Mondays per month for surgeries at Whitman Hospital. The clinic accepts Medicaid and Medicare, which is 70% of the practice, because he primarily treats eye diseases of the elderly. For the uninsured, the clinic offers sliding fees and payment plans, financial assistance through Project Access in Spokane, and some treatments pro bono. The practice is accepting new clients but does not serve children under 12.

Poverty-related issues cited by this practice include non-compliance with regularly filling and using expensive glaucoma eye drops; lack of transportation limiting follow-up care; adults with Medicaid not scheduling routine eye exams, which are covered for all ages, because Medicaid doesn’t cover eye glasses (Haymore, J., and Van Tine, S., Rockwood Inland Eye Center, interviewed by Stone, Aug. 31, 2015).

**Summary of the Number and Ratio of all Health Care Providers to Population**

**Table 6. Provider to Population Ratios, 2014**

Provider Type	Number of Providers*	Ratio of Practitioners to Population	Comment
Mental Health	41	1 : 1,266	ratio has worsened since 2012
Primary Care Physicians	39	1 : 1,200	
Physician Specialists	14	1 : 3,345	ratio has improved since 2012
Dentists	13	1 : 3,602	ratio has improved since 2012
Vision care	8	1 : 5,853	

\*Not all of these providers practice full time.

## ***Pharmacies***

Whitman County has eight pharmacies; five in Pullman, one each in Colfax, St. John, and Tekoa. Some of the means pharmacists use to help their low-income clients include

- giving prescriptions out in affordable increments;
- using Washington state discount coupons;
- referring to three Medication Cost Assistance programs in Washington that, although they have no physical presence in Whitman County, do provide medications:
  - RxAssistPatient assistance programs (rxassist.org) – Individual pharmaceutical companies that provide free medications for low-income persons;
  - Rx Outreach Assistance Program (rxoutreach.org) – A licensed mail order pharmacy that provides affordable prescription medications for low-income persons;
  - Washington Prescription Drug Program (hca.wa.gov) - A legislated drug discount program with free enrollment and no age or income restrictions. Helps with those who are uninsured or have high insurance plan deductibles;
- contacting the prescriber when insurance doesn't cover the drug or there is a less expensive alternative like a generic, which often saves up to 60%;
- contacting the client or provider if a prescription isn't picked up;
- referring patients to the Palouse Free Clinic, Pullman Regional Hospital Emergency Department, Community Health Association of Spokane, Council on Aging, Senior Centers, Department of Social and Health Services;
- advising patients to go online to compare prices and calling local pharmacies on the client's behalf.

It is unlawful for a pharmacy to give out free samples (Emerson, C., Safeway Pharmacy, interviewed by Glawe, Aug. 10, 2015).

## **Health Insurance**

Although health insurance has made healthcare more affordable for people who are employed by companies that provide it, or for those who can afford it themselves, the numbers of uninsured—and therefore largely untreated medically—have been very high. The Affordable Care Act (ACA), passed in 2010, seeks to make health insurance available to all Americans. Washington State University students are required to have health insurance, although WSU stopped offering its own student insurance in 2014. Students are now required to find their own plans using the WA Healthplanfinder or to use their parents' insurance. Created by the Washington Health Benefit Exchange, the Washington Healthplanfinder is an easily accessible, online marketplace for individuals, families, and small businesses in Washington State to compare and enroll in good health insurance plans, sometimes with cost savings (WAHBE, 2015).

Whitman County saw a decrease in those uninsured from 16.4% in 2008 to 14.7% in 2010, primarily due to federal health care reform allowing college students to remain covered by their

parents’ insurance policies until age 26. But by late 2011 the County’s uninsured rate increased to 15.5 %: “Key factors in this increase, we believe, include stagnant incomes, continued high unemployment, and health care costs that continue to outpace inflation” (Kreidler, 2011). The Affordable Care Act dropped the uninsured rate to 12% by 2013 and 9% in 2014.

But an additional important point to note is that

The uninsured numbers do not include an additional category of people: those who have a health insurance policy, but who struggle with high medical expenses nonetheless, such as high deductibles, drug costs, and co-pays. In addition, a secondary cause amplified the problem. Employers, facing economic pressures of their own, are increasingly moving health insurance costs to employees. According to the federal Medical Expenditure Panel Survey, for example, families’ share of premiums among private employers rose 13 percent in Washington State from 2008 to 2010. Their deductibles rose 40 percent and co-pays rose 15 percent (Kreidler, 2011).

The types of medical insurance and the rates of coverage in Whitman County are presented in Table 7.

**Table 7. Healthcare Insurance Coverage in Whitman County, 2014**

(WSDH BRFS, 2011-2013; ACS, 2014; HealthGrove 2016)

	All ages	0-17 years	18-64 years	>65 years
Health Insurance	91%	97.1%	88.8%	99.4%
Dental Insurance	86%	Unknown	66%	Unknown
Medicare	N/A	N/A	N/A	99%
Medicaid	21.5%	6%	10%	Unknown

**Mental Health Insurance**

Although all health plans must include mental health coverage, most insurance companies now restrict coverage for mental health treatment. In 2015, 3.9% of adults in the U.S. have a mental illness and are uninsured (ACS 2014). The rates for the State of Washington and Whitman County are not known.

**Medicaid**

The Department of Health and Human Services reported that beginning in January, 2014, states like Washington that adopted new Medicaid eligibility levels so that childless adults earning up to 138% of the federal poverty level (\$15,654) would be eligible, saw a marked drop in uninsured patient admissions (30%), reducing charity care and bad debt write-offs and increasing Whitman County’s enrollments by 2785 (DSHS Medicaid, 2013-14).

Medicaid covered services for adults include

- medical care, emergency care & ambulance fees;
- maternity care through pregnancy, labor and delivery, and 60 days postpartum; infants born to women receiving Medicaid are automatically covered until the child's first birthday; nearly four in 10 births in Whitman County and Washington State were to women with Medicaid as their primary source of insurance during 2006 to 2010 (WCDH, 2012);
- mental health, chemical/alcohol dependence services;
- all dental care for >21 years (resumed in January, 2014);
- vision-refraction exams every 24 months – but frames, lenses, and contacts are not covered;
- prescription meds;
- transportation to and from medical appointments, when necessary;
- interpreters.

And for children up to 20 years:

- all necessary dental exams, prevention, screenings, treatments, and surgeries;
- vision care every 24 months, including frames, lenses, and contacts (DSHS Medical Assistance, 2014).

### **Medicaid Reimbursements**

One of the significant challenges low-income people face in finding affordable primary care physicians is the low reimbursement rate prospective physicians receive for their services: “Low Medicaid reimbursement rates are frequently cited as the main reason that physicians are reluctant to provide care for Medicaid patients” (Patterson et al., 2014). Medicaid typically pays 61% of what Medicare pays for the same outpatient physician services, and Medicare typically pays 80% of what commercial health insurers pay (Coleman, 2015).

As a part of improving this disparity, the Affordable Care Act increased primary care providers' payments to equal Medicare reimbursement rates in Washington for 2013 and 2014.

Approximately one-third of primary care physicians in smaller practices indicated an increased willingness to accept new and current clients as a result of this increase (Patterson et al., 2014). However, when the Kaiser Commission on Medicaid and the Uninsured did their Annual Medicaid Budget Survey, which asked states about their plans to extend the primary care rate increase beyond December 31, 2014, Washington was one of 24 states that responded it did not plan to do so (Snyder, 2014).

Drawing on other research done by the Urban Institute in 2014, Washington state primary care doctors saw their chances for increased rates of reimbursement beyond 2014 were less certain, “Washington state doctors could see their reimbursement rates for primary care drop by 36 percent next year according to a new study by the Urban Institute” (Zuckerman, 2014). And making that reduction more specific, MaryAnne Lindeblad, state Medicaid director with the WA Health Care Authority, said. “But it amounts to a 28 percent cut in fees for primary care for children — and a 70 percent drop in reimbursement rates for doctors who care for adults under

Medicaid” (Lindeblad, 2014). Lindeblad also pointed out that, “Governor Jay Inslee’s proposed state budget includes funding to replace the Medicaid cuts, but there’s no guarantee legislators will approve it” (Lindeblad, 2014).

Surveyed Washington providers said they will restrict access to patients with Medicaid if the payment increase is discontinued in 2015 by doing one of the following:

- not accepting new clients having Medicaid --- > 1/3 of respondents;
- limiting the number of new Medicaid clients accepted --- about 1/3 of respondents;
- reducing or totally stop seeing current clients having Medicaid --- about 1/5 of respondents (Patterson et al., 2014).

## **Medicare**

Medicare is the federal health insurance program for people 65 or older, certain younger people with disabilities, and people with end-stage renal disease. The different parts of Medicare help cover specific services:

Medicare Part A is hospital insurance that is automatic at age 65 with no premium. It covers inpatient hospital stays, 100 days of post-hospital care in a skilled nursing facility, hospice care, and some home health care;

Medicare Part B is medical insurance and requires a premium to cover outpatient care; annual wellness exams; ambulance; durable medical equipment; mental health in and out-patient; limited prescription drugs; screenings for cervical & vaginal, breast and colorectal cancers, glaucoma and diabetic retinopathy; immunizations for flu, hepatitis B, and pneumonia.

It does not cover:

- routine hearing exams or hearing aids;
- dental procedures like cleanings, fillings, tooth extractions, or dentures;
- eyeglasses or contact lenses, with the exception of one pair of corrective lenses following cataract surgery that implants an intraocular lens.

Medicare Part D is prescription drug coverage that is added to other Medicare plans. These plans are offered by insurance companies approved by Medicare.

## **Conclusions**

Roadblocks to accessing adequate health care by those living in poverty in Whitman County:

- No public bus service operates outside Pullman for those with no car or gas money;
- Only three primary care providers have offices outside of Pullman/Colfax;
- Many healthcare providers of medicine, dental and mental health care don’t accept Medicaid;
- Some people are ineligible for Medicaid or not able to pay for high deductibles and copays on some plans;
- Some face the choice between health care (e.g., diagnostic testing, treatments, surgeries, medications, or seeing specialists in Spokane or dentists in Clarkston) and the need to pay rent and/or buy food and clothing;

- Medicaid covers dental for all ages, but no dentists will accept it, and although it covers eye exams for all ages, it will not pay for glasses for adults;
- Medicare doesn't pay for the typical services needed by the elderly – routine hearing exams or hearing aids; dental procedures like cleanings, fillings, tooth extractions, or dentures; routine eye exams or eyeglasses;
- There are fewer public health programs available to low-income citizens of Whitman County than there were in the recent past;
- Low Medicare and Medicaid reimbursement rates have led to providers not accepting Medicaid and/or Medicare.
- All healthcare providers are struggling with ongoing cuts to insurance reimbursements and fees frozen by some insurance panels;
- The state continues to recognize significant shortages to the availability of medical, dental, and mental health care in outlying towns as well as in Pullman.
- Along with a 9% uninsured rate, 21% of our residents >18 do not have a primary care provider, 42% haven't seen a doctor, and 39% have not seen a dentist in the past year.

Data from the Palouse Free Clinic are the clearest indicators of the needs and limited access to health care suffered by Whitman County residents living in poverty. Depression and anxiety top the list of presented conditions, followed by asthma, hypertension, migraines, and diabetes. Among the highest needs clients have are dental, vision, mental health, substance abuse, nutrition, and hearing services. The Palouse Free Clinic has identified many issues of getting adequate health care including lack of transportation, lack of child care, inability to miss work, embarrassment about seeking care for fear of being judged by others, not entirely trusting the care they are receiving, limited finances, poor access to local specialty care, poor continuum of care, and non-compliance.

Positive changes are taking place. Several agencies stand out in finding innovative means to reach out to people living on low incomes (e.g., Pullman Regional Hospital, Palouse Free Clinic, Palouse Health Center). There are also some progressive efforts to develop programs to fill in the cracks that people living with both poverty and complex illnesses fall through so they can effectively utilize the healthcare system, develop independence, and receive the coordinated care required from multiple providers and agencies (e.g., Social Work Extenders, Health Homes, Interagency Care Coordination, and Whitman County Health Network).

## HOUSING

There are 19,323 housing units available for the 44,776 citizens of Whitman County. The information in Table 1 indicates that in all but Pullman most are owner occupied. In all but Pullman, Palouse, and Colton the vacancy rates are higher than the state average of 9.7%. The majority of the housing in the County is owner occupied and generally mirrors the state ratios of owner occupied housing to rental units, except in Pullman where renter occupied units are more than twice the number of owner occupied units.

**Table 1: Housing Characteristics for Whitman County based on 2010 Census (WSDOC 2015).**

Community	Number of Dwellings	Vacancy Rate	Owner Occupied	Median House Value	Rentals	Median Rent	Number Subsidized
Albion	302	10%	61%		29%		
Colfax	1405	12%	56%		32%		
Colton	167	2%	86%		13%		
Endicott	165	15%	68%		18%		
Farmington	65	17%	68%		15%		
Garfield	311	10%	63%		26%		
LaCrosse	181	15%	65%		20%		
Lamont	40	17%	63%		20%		
Malden	118	24%	61%		15%		
Oakesdale	196	15%	67%		17%		
Palouse	474	9%	70%		42%		
Pullman	11,966	8%	27%		66%		
Rosalia	270	15%	63%		21%		
St. John	304	14%	65%		21%		
Tekoa	360	15%	59%		26%		
Uniontown	149	13%	72%		15%		
Rural	2850						
County total	19,323		36%*	\$182,300	55%*	\$697	3%*
Non-Pullman			69%*		31%*		
State	2,928,300	9.7%	62%	\$250,800	38%	\$989	5%

\*Does not include rural

The median value for houses in Whitman County is \$182,300. The median rent in Whitman County is \$697 per month. Although statistics could not be located, it is assumed that these values are somewhat higher in Pullman than in the county as a whole. Statewide, the median house value is \$250,800; the median rent is \$989 (ACS, 2015).

The importance of the differences in housing costs is affected by the differences in median household incomes between Whitman County and the state as a whole. The American Community Survey 5-year estimate for median household income in Washington state is \$59,478, while for Whitman County it is \$36,257. Thus, the median household income for Whitman County is 29% less than that for the state as a whole. As home ownership costs are about 30% lower in Whitman County than in the state generally, and rent is 27% less, it would seem that housing costs as a proportion of household income in Whitman County are more or less the same as housing costs for the state as a whole. However, the rates for subsidized housing relative to numbers of low-income renters are very different. There are 559,670 low-income renter households reported for the state of Washington. In addition, there are 134,393 subsidized housing units available, which means that 24% of the state's low-income renters could be accommodated by subsidized housing. In Whitman County, however, there are 6955 reported low-income households and 439 subsidized rental units for a potential accommodation rate of only 6%.

A report of the Washington State Department of Commerce Affordable Housing Advisory Board in January of 2015 states that 36% of Washington households have housing costs greater than 50% of the household income. They also report that the affordable housing gap is shrinking, but only very slowly. This is especially problematic because according to their projections, Washington state will continue to have an economic and job growth rate higher than the national average, but most of this growth will be in low-income, service-related jobs. According to their projections, these factors are most pronounced in urban areas but will have a statewide impact (WADOC, 2015).

### **Homelessness**

Homelessness as a distinct category of need is hard to measure. In accordance with federal law, the Washington State Department of Commerce does an annual "Point in Time" count of homeless individuals and families. The results of work coordinated by the Community Action Center in Whitman County for the January 29, 2015 "Point in Time" count are presented in Table 4.

Table 4: Results of 2015 Point In Time Survey of Homelessness

<b>Number of Homeless individuals*</b>	<b>Washington state</b>	<b>Whitman County</b>
Sheltered	12,297	74
Unsheltered	7,121	0
Minors in Sheltered Households	6,098	60
Minors in Unsheltered Households	795	0
Sheltered households of minors only	120	0
Unsheltered households of minors only	59	0
Chronically homeless	2,250	0

\*Does not include those staying with friends or relatives.

This information shows that statewide about half of all homeless households include children, while in Whitman County nearly all of the homeless households include children. The information also suggests that lack of any form of shelter or chronic homelessness is not a major problem in Whitman County.

### **Housing Resources for those living in poverty in Whitman County**

For the purposes of this study, housing resources were grouped into three categories: emergency/short-term, transitional, and long-term. Emergency/short-term resources are intended to include those that can be accessed within a single day, and are of only a few days duration. Transitional programs may require an enrollment process and have a finite duration. Long-term programs require an enrollment process and have an indefinite to permanent duration.

### **Emergency/short-term Housing**

There are no homeless shelters in Whitman County. Emergency/short-term programs available to those in Whitman County include Alternatives to Violence of the Palouse and the Community Relief Fund. This information is summarized in Table 5 and described below.

**Table 5: Emergency/short-term Housing Direct Services 2014 (ATV 2014, CAC 2015).**

<b>Emergency/Short Term Housing</b>	<b>Resources</b>	<b>Community Served in Whitman Co.</b>
ATV of the Palouse	\$425,000	31 individuals sheltered
Community Relief Fund	\$3218	53 nights

### ***Alternatives to Violence of the Palouse***

Alternatives to Violence of the Palouse (ATVP) is a non-profit organization that provides emergency shelter to men, women, and families who are escaping family and sexual violence. Serving both Whitman and Latah counties, ATVP is funded 80% by grants and 20% by gifts. Many, but not all, of those sheltered are living in poverty. Though shelter is available for a maximum of 90 days, in 2014 the average stay was 27 days. About half of the people sheltered are children; the other half, predominately women. In 2014, a total of 62 individuals were sheltered, about half of whom were sheltered in Whitman County. Of these, about half were children, 45% were adult females, and 5% were adult males. In addition to shelter, ATVP offers advocacy, legal assistance, peer support groups, sexual assault and abuse therapy, and emergency transportation, food, and clothing (Interview with Christine Wall Director of Alternatives to Violence by Mary Collins March 5, 2015; ATV 2014). In 2014, 433 individuals in both Whitman and Latah counties used one or more of these services.

### ***The Community Relief Fund***

The Community Relief Fund, administered by the Community Action Center, has existed for two years and is funded by area churches, businesses, the United Way, and individuals. In addition to issuing motel vouchers on its own, it provides housing vouchers to the Pullman Police Department for distribution. Vouchers will fund a maximum of two nights' lodging. In 2014 a total of 53 nights of lodging were provided. Of these, 20% went to families, 40% to single males, and 40% to single females (CAC 2015).

### **Transitional Housing**

Transitional housing is intended to last for more than a few weeks, but not more than a couple of years. In all transitional housing programs, public and private, caseworkers have considerable involvement with clients, including regular meetings and personal contracts that establish individual goals and measures of accountability. In addition, caseworkers are able to draw from the multiple types of resources provided by state and federal programs to accommodate the specific needs of individuals and households. Participants in a program administered by the Community Action Center also work with a case manager who facilitates training and other learning opportunities, such as job-seeking skills, parenting, and money management skills. Providing information related to money management is a relatively new area of concern for all programs and has come about as a result of high levels of indebtedness, including student loans many clients carry.

### ***Crisis Rental Assistance/Consolidated Homeless Grant***

This program is funded by the state of Washington and administered by the Community Action Center in Pullman. Funding includes document-recording fees associated with all real estate transactions that are mandated by the Washington State 2006 Homelessness Housing and Assistance Act. The Act directs that 66% of the fees collected in a county be returned to the

county, while 34% is remitted to the State Home Security Fund for homeless housing. In 2013, the state collected \$192,696 in these fees in Whitman County. Funds available for transitional housing support include not only payments to landlords for housing, but also administrative costs. The program is aimed at eviction prevention and provides rental assistance for up to 24 months at no cost to the recipient. Participants must have household incomes no greater than 30% of the area median income, if there are no children in the household, or no more than 50% of the area median income if the household includes children. In 2013 193 households representing 401 individuals were served in Whitman County (WSDOC, 2014).

### ***Tenant Based Rental Assistance***

This is a federally funded program of the U.S. Department of Housing and Urban Development (HUD), administered by the Community Action Center in Pullman, which assists very low-income households with rent, deposit, and utility costs for up to 24 months. Assistance levels are established that reduce a household's rent payment to no more than 30% of the household income. These funds can be used alone or with other subsidies, but if other subsidies are used, these funds are reduced to maintain the 30% of household income limit. To qualify households must earn no more than 50% of the area median income. In 2013, 66 households, representing 140 individuals, were served by this program in Whitman County (TBRA 2013).

### ***Family Promise of the Palouse***

Family Promise of the Palouse (FPP) is an affiliate of the national organization, Family Promise. It is a private, not for profit organization that is funded through grants and gifts and works with 11 local churches, five of which are in Pullman. The churches and their members provide overnight shelter, meals, and companionship for families. They have a day facility in Moscow that provides individual storage space for families' possessions, a common activity area, and an outdoor play area. Some transportation is provided, as well as other support services. Families may be sheltered for up to 90 days. In 2014, FPP sheltered 17 families; of these 8 were two-parent households, 5 were single-mother, and 4 were single-father.

**Table 6: Most Recent Year Available Data for Transitional Housing (WSDOC, 2014; LWV interview L. Rhinehart)**

<b>Transitional Housing Programs</b>	<b>Types of Resources</b>	<b>Source of Funds</b>	<b>Resources for Whitman County</b>	<b>Income Qualification</b>	<b>Participant Costs</b>	<b>Community Served in Whitman County</b>
Crises Rental Assistance/ Consolidated Homeless Grant	Up to 24 months of rent	Document recording fees and State funds	\$807,446	30-50% of area median income	None	401 individuals/ 193 households
Tenant Based Rental Assistance	Up to 24 months of rent & utilities	US Dept. of Housing and Urban Development	\$170,000	Up to 50% of area median income	Up to 30% of household income	140 individuals/ 66 households
Family Promise of the Palouse	UP to 90 days of shelter	Grants and gifts	\$123,000 Latah and Whitman County	At or below federal poverty level	None	17 families

## **Long-term Housing**

### ***Section 8 Housing***

The primary program for low-income housing is the Section 8 program funded by the U.S. Department of Housing and Urban Development (HUD) and administered by the Spokane Housing Authority (SHA) and the Community Action Center (CAC) in Pullman. This program provides rental assistance for as long as a recipient qualifies and follows program guidelines. Individuals or households are approved for the process based on income and a ‘point’ system that gives priority status for applicants with physical or mental disabilities, the elderly, children < 18, or people with a terminal illness. The program offers direct payments to landlords according to HUD and SHA values that reflect local housing costs: a 1-bedroom voucher can be worth no more than \$600, a 2-bedroom, \$725 dollars, and a 3-bedroom, \$996. Furthermore, the program limits rentals according to family size: 1-2 people can qualify for a 1-bedroom unit, 3-4 people, a 2-bedroom unit, and 5-6 people, a 3-bedroom unit. The program does not pay for security deposits or the last month’s rent in advance. If utilities and garbage are to be paid by the

program, they must be included in the rent. If utilities are not included, there are utility assistance programs available.

The Section 8 process requires that participants apply for and be granted a voucher, participate in a 2-hour orientation, and then have 90 days to find a rental unit. Once a participant has identified a unit and secured the landlord's willingness to participate in the Section 8 program, the unit is inspected to assure it meets basic health and safety standards. The participant then must sign a 1-year lease and the landlord registers for direct payment. After the first year, it is possible to move to a month-to-month rental plan. Participants are responsible for reporting changes in income or household make-up. Failure to do so can result in termination from the program. Short-term changes in income, such as inheritances, bonuses, gifts, etc. do not automatically disqualify participants from the program. These must be reported, but depending on the amount and how the funds are used, they may not affect the rental assistance. For instance, if a participant receives a gift of a few hundred dollars and applies the money to needed car repairs or debt retirement, a caseworker can exclude the special income from the base income qualification.

In the area governed by the Spokane Housing Authority, there is no term limit for participation in the Section 8 Housing program. There is, however, according to the program administrator at the CAC, relatively frequent turn over with 10-20 participants giving up their vouchers monthly. Reasons include such things as moving out of the area and changes in income or household members but no systematic record of reasons for leaving the program are maintained. There is a waiting list for vouchers with an average 6-month waiting period. Additionally, of those approved for vouchers, about half fail to complete the process of securing a rental (Interview with L. Corsetti, Community Action Center by M. Collins and M. Beuhler 2014).

One of the program strengths is that it requires participants to assume the responsibility of finding a rental and staying in good standing with the landlord. The 50% failure rate for completing or maintaining good standing in the program is the result of a number of factors beyond the scope of this study. One factor within our area of interest, however, is that some landlords and rental agencies choose not to participate in the program, though their reasons for not participating are currently unclear.

### ***Community Action Center Housing***

The Community Action Center owns and operates housing for low-income and elderly individuals. The apartments are located in Tekoa, Palouse, and Pullman. Those in Tekoa, Palouse, and Kenwood Square in Pullman are subsidized Project-based HUD Section 8 housing. The Palouse and Kenwood Square rentals are for low-income elderly whose income cannot exceed between 50% and 80% of the area median income. Kenwood Square is also available to disabled individuals over 18 years old. The Tekoa facility is for families or disabled individuals whose income cannot exceed 50% of the area median income.

The Maple Street Apartments in Pullman are available to households whose incomes cannot exceed 50% of the area median income. Tomason Place rentals are available to households whose incomes cannot exceed between 30% and 60% of the area mean income. Tomason Place is part of the Internal Revenue Service’s (IRS) Low-Income Housing Tax Credit Program. It assists with the development of low-income rentals through dollar-for-dollar tax credits to private developers for between 30% and 70% of the total project development costs. Rents are calculated according to household income such that, for example, those with incomes at 30% of the area median pay \$303 per month for a 2-bedroom unit, while those earning 60% of the area median income pay \$720. Additional income percentile/number of bedroom rates apply. The Bellevue Duplexes in Pullman are conventional market housing that welcomes Section 8 tenants.

Table 7: Community Action Center Rental Properties (CAC rental brochures 2015)

	<b>Location</b>	<b>Number of Units</b>	<b>Community Served</b>
Bellevue Duplexes	Pullman	27	Available to anyone
Maple St. Apts.	Pullman	2	Low income
Tomason Place	Pullman	26	Low income
Palouse Cove	Palouse	11	Head of household must be at least 62 years of age and low income.
Kenwood Square	Pullman	39	Head of household must be at least 62 years of age or disabled and low income.
Wheatland Apts.	Tekoa	8	Low income

***Self Help***

The Community Action Center also administers a program through their Homeowner Resource Center, “Self Help”, that works to help families become homeowners. The program is made possible by the US Department of Agriculture Rural Development 502 Guaranteed Mortgage program. The homes are constructed by the Community Action Center and professional contractors, and are then sold to qualifying families. Eight homes have been constructed to date and four more are planned. The program requires that participant families be low-income and first-time homeowners. They must demonstrate that they have a good credit rating and a stable income. The CAC lends the amount of the down payment, while the remainder of the mortgage is held by a banking firm that participates in the USDA program. Participants must contribute 100 hours of labor applied toward interior painting and landscaping. Currently house prices are

kept below \$190,000. The interest rate on the 15- or 30-year mortgage is set by the USDA-approved lender (USDA 2015). To date 12 homes have been built by this program.

### ***Palouse Habitat for Humanity***

Palouse Habitat for Humanity (PHH), which operates under the guidelines of Habitat for Humanity International, works to complete one new house per year in the Palouse. It has also recently begun a program that helps with home maintenance for those living in poverty. The organization is faith based, but does not proselytize or require any religious affiliation of its participants. The program is funded by grants and gifts including an annual gift from Thrivent Financial for 50% of the home construction cost. In addition, the organization operates a store that accepts used or surplus construction materials and sells them to the general public. The costs of the houses built to date have been between \$64,000 and \$107,000 in cash and as many as 6000 hours of volunteer construction and associated work.

Habitat for Humanity works with partners who have lived or worked in Whitman County for at least a year and who demonstrate “need, ability to pay, and ability to partner” (PHH, 2015). Habitat provides no interest loans as well as volunteer assistance for home construction. Awardees must contribute \$1000 as a down payment. They also must contribute 300 hours of labor for a single-parent household and 500 hours for a two-parent household. Loans are structured so that monthly payments do not exceed \$500. Homeowners carry two mortgages with Habitat for Humanity. The first is for the actual cash cost of the construction of their house. The second is for the difference between the actual cash invested in construction and the appraised value of the house. Of the 14 houses in Whitman County and Latah County constructed to date, 7 are still under mortgage to the original builder/partner, one has had the mortgage paid in full, and 6 have been sold. In addition to home construction, Habitat for Humanity of the Palouse started a program of home maintenance in 2012. This program also uses volunteer as well as paid professional labor as well as homeowner “sweat equity” to help with modest home maintenance projects.

Following is a summary of long-term housing resources available in Whitman County:

**Table 8: Long-term Housing Resources Other Than CAC Owned Facilities.**

<b>Long-term Housing Program</b>	<b>Types of Resources</b>	<b>Location</b>	<b>Quantity of Resources for Whitman County</b>	<b>Income Qualification</b>	<b>Participant Costs</b>
Section 8	Housing vouchers	Whitman County	300 vouchers Fixed value based on family size	At or below 30% - 60% of area median income and “point” system.	Rent in excess of voucher payment standards.
Self-Help	Home ownership loan assistance	Colfax 4 Uniontown 4 Palouse 4	12 houses completed	First time home buyer. Income below or equal to 65-100% of area median income.  Demonstrated good credit and stable income.	1.5% of purchase price as cash earned money and closing costs. Bank mortgage, Down payment loan, 50 hours labor per adult.
Habitat for Humanity	Home ownership loans and construction assistance	Albion 1 Uniontown 2 Colfax 1 Pullman 2 Palouse 2	7 houses in Whitman County.  1 house annually*	At or below 30-60% of area median income.	\$1000 down payment and 300-500 volunteer hours.

\*Habitat for Humanity of the Palouse serves both Whitman and Latah Counties. To date about half of the houses they have built are in each county.

## **Strengths of Low Cost Housing Programs in Whitman County**

### **Community integration**

The Community Action Center housing located in Pullman is scattered across the community with units on College Hill and Pioneer Hill as well as other areas. The Community Action Center Self Help and Habitat for Humanity Houses are similarly spread throughout the county and throughout the towns they are located in so that there do not appear to be pockets of low-income housing. Dispersal of low-income housing has been recognized as a significant factor in strengthening communities and expanding opportunities for those living in poverty to improve their circumstances (Chetty et al., 2015). Design and construction classes at WSU taught by Professor Bob Kircak bring students into the building and design process of the Habitat for

Humanity houses. This effort has led to improved architectural appeal and community integration of their houses. Special efforts directed at home ownership have also been spread throughout the county, with more homes being constructed outside than inside Pullman. This also contributes toward integration of low-income housing and is an economic boon to a number of the small towns in the county.

### **Interagency collaboration**

All of the organizations working to provide affordable housing in Whitman County are familiar with one another's work and collaborate when possible. The Community Action Center takes a lead role in working with the various federally funded programs.

### **Recognized needs for Low Cost Housing Programs in Whitman County**

#### **Funding stabilization**

Stabilization of the relatively new Community Relief Fund, the only real resource for addressing immediate needs of the homeless, is needed. The fund is currently supported mostly by churches, a few businesses, and individuals. The current annual expenditures of this fund are modest, less than \$7000. It is unclear if this is adequate since numbers of individuals turned away for lack of funding are not kept.

#### **Physical resources**

There are too few low cost one-bedroom rentals. A number of landlords are unwilling to participate in the Section 8 housing program. It is not clear if this has grown out of bad experiences with tenants or with the program administration. Better understanding of this situation could help improve landlord and service provider collaboration and increased willingness to participate in the Section 8 housing program.

#### **Data collection/management**

A weakness in the current system is that it is difficult to get information on how many households are not being served by current housing programs. Other than the Section 8 program, which maintains a waiting list, there are no consistent records of how many people are denied service and the reasons for denial. The Community Action Center is implementing a new information keeping system that will track numbers of those who do not get housing, as well as those who do. This should help provide a better understanding of how we are meeting low-income housing demand.

## **Law Enforcement and Legal Services**

### **Law Enforcement**

Law enforcement and other first responders, such as fire and ambulance, do not tailor their services according to the economic status of individuals they serve. However, they are often the initial point of contact between those living in poverty and services available to them. The Pullman Police and Fire Departments work with the Community Action Center to make housing and transportation vouchers available in emergency situations when the Community Action Center is closed. Also, a Colfax Traveler's Fund is supported by Colfax churches and private donors and administered by Sheriff's deputy chaplain Ron McMurray that serves the county outside of Pullman (Interview with Whitman County Sheriff's Office by L. Harding and K. Barron. June, 2015).

Ambulance services for people covered by Medicare and Medicaid are paid only 30% of the amount billed. By law, the service providers are forbidden to charge these patients the difference. For patients who aren't covered, a payment plan can be set up, but unpaid bills can go into collections. Pullman bills between \$800,000 and a \$1 million a year for ambulance service but collects only 70-80%. This leaves the city of Pullman having to cover the difference between costs and receipts.

With the goal of providing emergency services to low-income households, the federal government, through the Federal Communications Commission's Lifeline program, in collaboration with communications companies, offers free or very low-cost telephone phone (cell or land line) or emergency life line services to low-income individuals. The program is funded by Universal Services fees paid by all cell phone users. The program allows only one phone per household, and service allowances range from 250 to 350 minutes, including some with up to 1000 free texts per month. The program is currently developing a plan for providing broadband Internet services (fcc.gov, 2015). Individuals work with communications companies to access the service, but we were unable to identify the number of households using this program.

### **Access to Courts and Legal Services**

It is likely that impoverished residents of Whitman County experience a greater number of legal problems than the general population. It is also likely that despite constitutional, statutory, and regulatory provisions intended to assure that justice is accessible to all and administered impartially, people living in poverty face more impediments in resolving their problems within the legal system and in obtaining advice and assistance to assert their rights.

### **Legal Problems of Low-Income Washingtonians**

Earlier this year, the Washington State Office of Civil Legal Aid published results of a statewide study in which the Washington State University Social and Economic Sciences Research Center (SESRC) surveyed a sample of 3125 households with incomes up to 200% of the federal poverty level. Survey questions described 138 specific legal situations and asked if anyone in the

household had experienced them in the prior 12 months. More than 70% of those who answered said they had faced at least one of the problems described, and among those, the average number of problems reported was 9.3. The greatest numbers of problems reported in the statewide survey concerned health care, employment, and consumer finance (WSU SESRC, 2015).

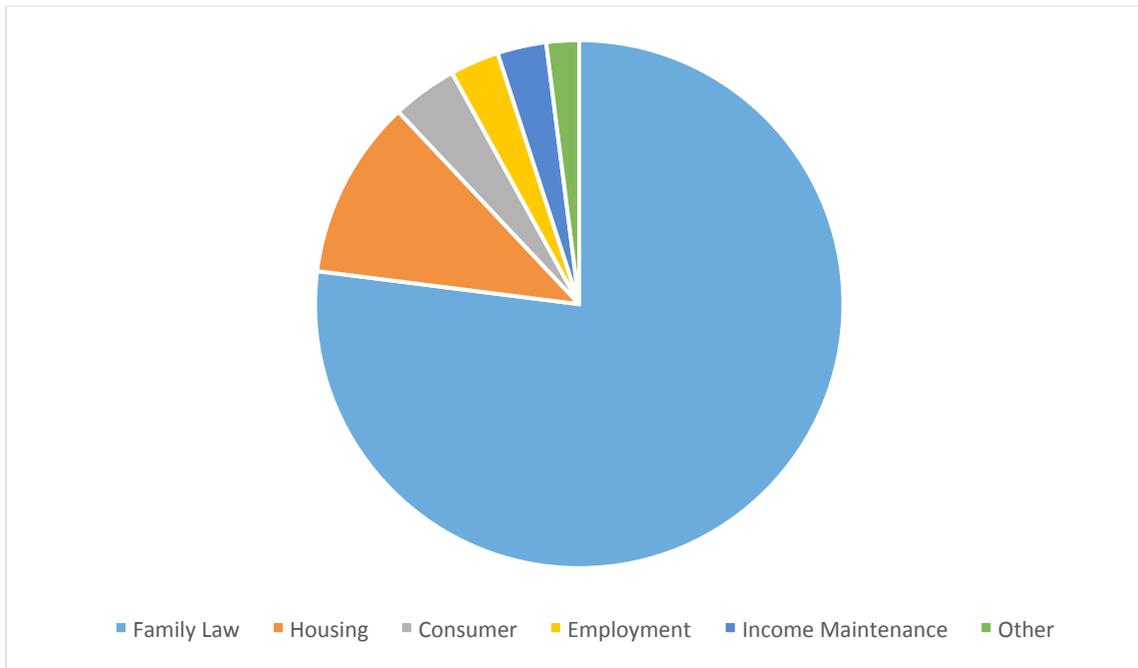
Most respondents reported limited confidence in the civil justice system, and 65% of those who reported at least one legal problem did not seek legal help. Among those who had sought legal assistance, 61% felt they had obtained some degree of resolution of their problem (WSU SESRC, 2015).

### **Reports of Whitman County Civil Legal Needs**

Locally, respondents to the Whitman County Community Needs Assessment rated the need for legal services as ninth of the top 10 community social service needs, and as fourth among social service needs for their own households. Low-income and non-Pullman residents ranked the community's need for legal services less highly than did respondents as a whole, and low-income and student respondents ranked their own households' need for legal services less highly than did respondents as a whole (Bittinger 2015).

The most detailed information available about the civil legal needs of low-income Whitman County residents comes from records kept by the Community Action Center for cases handled by Whitman County Legal Services from September 2, 2010 through August 6, 2014. During that period, there were 296 requests for legal services from people who were over 65 or whose incomes were not more than 200% of the federal poverty level. The Community Action Center referred 289 of these cases, of which 288 involved a person under age 65, to local attorneys who agreed to represent the parties pro bono. Records for 176 of the referred cases describe the area of substantive law involved; these areas, and the relative proportions of callers who requested help in them, are shown in Figure 4. These data indicate a sizeable majority of the cases involved family law issues. Ten percent of Whitman County Legal Services clients during this period reported having been victims of domestic violence (CAC, 2014).

Figure 4. Whitman County Legal Services Cases 9/2/2010-8/6/2014



## Policies Intended To Mitigate the Legal Disadvantages Of Poverty

### A. Provisions For Criminal Defendants

Probably the best-known example of a policy intended to make the legal process fairer by reducing disparities in resources between the parties is the constitutional right of indigent criminal defendants, announced by the United States Supreme Court in the 1963 case of Gideon v. Wainwright, to have attorneys paid for at public expense. The Revised Code of Washington (RCW), Section 10.101, provides that defendants are deemed to be indigent and entitled to representation by a Public Defender if they meet any one of the following criteria:

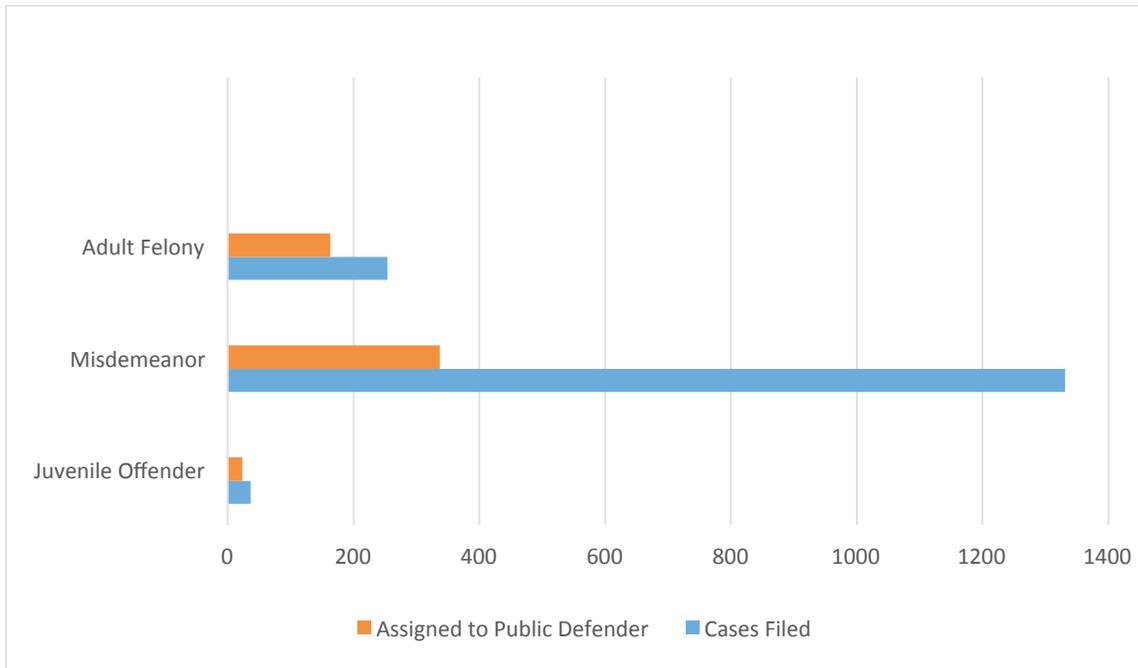
- after-tax income not more than 125% of the federal poverty level;
- receipt of any of a number of public assistance benefits such as TANF, Medicaid, SSI, food stamps or the like;
- insufficient available funds to pay any amount to retain counsel.

Others who have sufficient funds to pay a portion of the cost of counsel, but not enough to pay the full cost, can be appointed counsel if they sign a promissory note to repay the county for the portion they are deemed able to pay.

In 2013, the most recent year for which full statistics were available, Whitman County spent \$315,000 on public defense, under 4 contracts with local attorneys. The chart below shows the

proportions of various classes of criminal cases assigned to Public Defenders that year (WSOPD 2015).

Figure 5. Whitman County Criminal Cases 2013



Criminal defendants who are convicted can be required to reimburse the county for the costs of their public defense, as well as fines, restitution to crime victims, court costs, costs of incarceration and others. Any obligation to pay money is likely to be more onerous for a poor person than for one with more resources. RCW 10.01.160, which authorizes courts to impose costs, explicitly provides that a court shall not order a defendant to pay costs unless the defendant is or will be able to pay them, and that in determining the amount and method of payment of costs the court shall take account of the financial resources of the defendant and the nature of the burden that payment of costs will impose. However, there are some costs that cannot be waived, and all costs that are imposed accrue interest at the rate of 12% per annum until they are paid.

#### B. Provisions for Low-Income Parties In Civil Cases

In Lassiter v. Department of Social Services, the U.S. Supreme Court held in 1981 that the Constitution does not provide indigent litigants in civil cases with a right to counsel paid for at public expense. Subsequently, both federal and state cases have found a right to counsel in certain civil proceedings such as guardianships, civil commitment, and child dependency actions, and in Whitman County and throughout Washington, public defenders are appointed and represent indigent clients in such cases.

Advocates for low-income people believe that meeting the civil legal needs of this population will require courts to recognize or legislatures to enact a right to counsel in civil cases. In 2006 the American Bar Association adopted a resolution urging “federal, state, and territorial governments to provide legal counsel as a matter of right at public expense to low income persons in those categories of adversarial proceedings where basic human needs are at stake, such as those involving shelter, sustenance, safety, health, or child custody, as determined by each jurisdiction” (ABA, 2006), and in 2010 it developed a model statute it encourages states to adopt to create such a right (ABA, 2010). The Northwest Justice Project, Washington’s largest civil legal aid program, has taken an active role in advocating such a right to counsel, but has not yet convinced either the legislature to enact, or the Washington Supreme Court to recognize, such a policy.

Although it has not yet found that indigent civil litigants have a right to be represented by attorneys at public expense, the Washington Supreme Court has promulgated and applied court rules intended to remove or reduce barriers to their use of the courts. General Rule (GR) 34 requires courts to waive fees for litigants who meet any of the following criteria:

- after-tax income not more than 125% of the federal poverty level;
- receipt of any of a number of means-tested public assistance benefits such as TANF, Medicaid, SSI, food stamps, etc.;
- income over 125% of federal poverty level, but basic living expenses that make him or her unable to pay the court fees sought to be waived;
- other compelling reasons as found by the court;
- representation by a Qualified Legal Services Provider (QLSP) that has screened the party and found him or her eligible for services.

Recently the Supreme Court has held that GR 34 requires courts to waive all fees, and not just initial filing fees, for eligible litigants (*Jafar v. Webb*, 2013).

Of the 708 civil cases filed in Whitman County Superior Court in 2013, 62 requested and 55 were granted GR 34 fee waivers. In 2014, when 692 cases were filed, fee waivers were granted for 48 of the 55 plaintiffs who requested them and denied to 7 (Telephone conversation between Jill Whelchel, Whitman County Clerk, and Jane Von Frank, November 2015).

### **Civil Legal Advice and Advocacy for Whitman County’s Poor**

There are currently no civil legal aid programs headquartered in Whitman County. If low-income county residents appear in court in civil matters, they are either representing themselves

or private attorneys represent them. As of September, 2015, 83 active members of the Washington State Bar Association maintained offices in Whitman County or in Moscow, Idaho. Of those, about half are in practices where they represent a broad range of clients in civil matters, as opposed to working as counsel for a government entity or business or working as a legal educator.

The nature of the attorney-client relationship, and the duty of confidentiality it imposes, make it difficult to quantify the amount of service that private attorneys have long provided in Whitman County and that they continue to provide to low-income clients. It is certain that many attorneys have done much, and will do more, for clients who are in poverty. It is also evident that many low-income people in Whitman County find it difficult or impossible to find a lawyer who will represent them in the civil matter for which they need help, at a price they can afford. The difficulty is not so much that private attorneys are unwilling to provide pro bono services, as it is that not enough attorneys are willing and available to provide reduced-rate or free services in certain substantive legal areas in which potential clients seek help. For example, although a large majority of legal services requests to the Community Action Center between 2010 through 2015 were for help with family law or domestic relations issues, among a roster of more than 20 attorneys who were willing to provide pro bono legal services to indigent clients, only 2 or 3 accepted family law cases (Interview with Melissa Johnson, Community Action Center coordinator for Whitman County Legal Services, by Jane Von Frank, August 2014).

For several years the Northwest Justice Project, the Community Action Center in Pullman, and the Whitman County Bar Association coordinated in a system that attempted to match poor Whitman County residents with private attorneys to represent them in civil matters. The Northwest Justice Center operates a toll-free statewide telephone hotline, the Coordinated Legal Education, Advice, and Referral hotline (CLEAR). When calls came in from Whitman County, the Northwest Justice Center referred them to the Community Action Center. The Community Action Center had a coordinator who talked with the caller, obtained information, kept records and contacted a member of the Whitman County Bar Association who had expressed interest in providing pro bono services for CAC referrals. If the attorney was interested in taking the case, CAC gave the caller the attorney's name, the caller contacted the attorney, and if the caller and attorney agreed, the attorney represented the caller in the matter.

In the summer of 2015, the Community Action Center discontinued its participation in the program. Since that time the Northwest Justice Center has not been forwarding calls that come in from Whitman County. The Whitman County Bar Association is working with the Spokane County Bar Association to develop a program under which the Spokane Bar Association's legal aid program will perform essentially the same intake and facilitator functions that the Community Action Center performed before the summer of 2015. As of December 2015, it is reported that the Legal Foundation of Washington has identified funds that it will make available as a grant to the Northwest Justice Project in Spokane for a part-time coordinator who will

handle calls from Whitman County and refer them to the Spokane Bar Association-Whitman County Bar Association panel of volunteer attorneys.

## TRANSPORTATION

Whitman County has a population of 47,250 residents living on 2,600 square miles of land. It averages 20.7 persons per square mile as compared with 101.2 per mile for the state. Whitman County consists of 16 incorporated towns with Pullman, population 32,110, having the vast majority of residents. The second largest town is Colfax, the county seat, with less than one tenth the population of Pullman, at 2780.

The populations in the remaining incorporated towns have long distances to travel for food variety, work, and numerous services. Using the distance to a supermarket as an arbitrary measure, the scale of travel to services is illustrated in Table 1. Fixed route public transportation services are available only inside the city limits of Pullman. People without the use of a car and those living within Pullman who need to travel outside of the city limits have serious unmet transportation needs.

Table 1. Distance to Nearest Supermarkets from Towns in Whitman County. (WSOFM, 2015).

<b>Town</b>	<b>Population</b>	<b>Nearest Supermarket (Pullman, Colfax, or Spokane)</b>
Albion	555	9 miles
Colfax	2,790	1 supermarket
Colton	420	14 miles
Endicott	296	20 miles
Farmington	150	35 miles
Garfield	595	25 miles
LaCrosse	320	29 miles
Lamont	80	45 miles
Malden	200	31 miles
Oakesdale	430	36 miles
Palouse	1,030	15 miles
Pullman	32,110	3 supermarkets
Rosalia	560	27 miles
St. John	510	24 miles
Tekoa	785	43 miles
Uniontown	335	17 miles

## Transportation service providers in Whitman County

The transportation services available in Whitman County are summarized in Table 2 and described below.

Table 2. Transportation Services in Whitman County

Name	Type of Service	One-way Fares	Number of passenger trips	Number of Vehicles
COAST Council on Aging and Human Services	Demand response	Donation accepted	12,654 (2014)	11 vans with wheel chair access 4 minibuses with electronic lifts 10 volunteer drivers
Pullman Transit Fixed Route Buses	Fixed route	\$.50 regular \$.30 seniors, disabled youth passes available	1,472,626 (2012)	19 buses
Pullman Transit Dial-A- Ride	Demand response for seniors (65+) and disabled	\$.40 \$3.00 to Pullman Airport	18,653 (2012)	5 vans

### COAST

COAST provides transportation to citizens in four Washington counties: Asotin, Garfield, Whitman, and southern Spokane. It also serves five counties in Idaho: Clearwater, Idaho, Latah, Lewis, and Nez Perce County. COAST services include vans and paid drivers as well as volunteer drivers who use their own vehicles and receive mileage reimbursement and liability insurance coverage. Rides are free to those who arrange for that ride at least one day in advance, and if resources are available to complete the trip. This agency is under the direction of the Council on Aging and Human Services, based in Colfax, and is funded by federal and state grants, along with client and public donations. None of its programs is aimed specifically at persons in poverty but all may use them. COAST asks for date of birth; it, therefore, knows the ridership is largely elderly. COAST has handicapped accessible vans and can provide transportation for those with disabilities.

COAST is currently deciding how to raise its visibility in the county and how to increase the number of volunteer drivers it has throughout the county, particularly in both Pullman and Colfax. Currently COAST has one volunteer in Pullman, and one in Colfax, and a significant need for more. Volunteer drivers drive at their own convenience rather than regularly scheduled times. COAST hopes to advertise for volunteer drivers through the churches in the county. While COAST provides a vital service for special transportation, including non-emergency medical transportation, it is not a service one might use to go daily to and from work.

Craig VanTine, Director of Transportation, Council on Aging and Human Services stated, “Many people offer rides to neighbors who no longer drive. If those drivers volunteered with COAST, they could provide that help, get their gas paid for, have liability insurance provided to them, and drive as much or as little as they wished. We just need to get that message out to folks” (Interview with Craig VanTine by K. Kiessing, 2015). Volunteer drivers must prove ownership of their vehicle, insurance for it, a clean driving record, and undergo a background check and a short orientation on record keeping for fuel reimbursement.

COAST attempted to start a vanpool route from Rosalia to Pullman. This failed because the major employers, the City of Pullman, WSU, and Schweitzer Engineering Laboratories, have different shift times, and it was a challenge to identify enough individuals with compatible schedules who might use the service. COAST was able to encourage some ridesharing.

In September 2009, through a vote by the county commissioners, the Whitman County Unincorporated Area Transit District was created specifically for the purposes of providing vanpool services, with COAST to be the contracted operator of the system. COAST is designated on paper as the vanpool program provider, but operating funding has been unavailable and the effort remains dormant. (WSHSTP , 2015).

### **Special Mobility Services**

Special Mobility Services is based in Spokane with a subsidiary service, Transportation Solutions, in Walla Walla. They hold the “broker” contract for allocating transportation of non-emergency medical transportation in ten counties in Washington. Those counties are Adams, Asotin, Ferry, Garfield, Grant, Lincoln, Pend Oreille, Stevens, Spokane and Whitman. Services are restricted to those who are certified by the Department of Social and Health Services for necessary medical transportation to appointments for treatment. Three hundred vouchers were allocated for this fiscal year, but it is unknown how many have been used.

All clients of Transportation Solutions are Medicaid patients, so the Special Mobility Services is affiliated with the Washington Health Care Authority. They are a 501 (c) (3) non-profit organization, not affiliated with any religious organization, and work in Whitman County with

COAST in Colfax and Transportation Solutions of Walla Walla. Both Special Mobility Services and Transportation Solutions handle disabled clients with special transportation challenges. Approximately 8400 rides are provided each year in Whitman County. All clients are eligible for non-emergency medical transportation services.

One challenge in providing Medicaid transportation in rural areas is that Medicaid does not pay for “deadhead” miles, which means miles driven by the service provider without passengers to pick-up clients. In some cases, it can easily be 90 deadhead miles to take someone from a remote region to Spokane. However, COAST has been able to recover the cost for deadheading miles by raising its Medicaid contract price (WSHSTP 2015).

The Special Mobility Services Director, Rusty Koontz, states that “unmet needs in Whitman County will be identified by a Human Services Transportation Plan” (2015). Washington State Department of Transportation worked with its partners across the state to develop a statewide Human Service Transportation Plan to coordinate the needs, interests, and visions of Washington’s 14 regional transportation-planning organizations:

The plan highlights service gaps and challenges, investigates best practices from around the state and beyond and recommends strategies to improve access to transportation throughout the state. The emphasis is on delivering transportation service to people with special needs, those who are unable to transport themselves due to physical or mental limitations, income or age (WSHSTP, 2015).

The major avenue for assessing unmet needs for transportation is the Regional Transit Planning Organization, funded and regulated by the Washington State Department of Transportation for the southeast corner of Washington serving four counties: Asotin, Garfield, Columbia, and Whitman. The “Palouse Regional Transportation Planning Organization was formed in 1993 as a result of the Growth Management Act to ensure local and regional coordination of transportation plans”(RTPO, 2015). Whitman County has opted out of the Growth Management Act but remains involved in this consortium for planning purposes. This is a voluntary association of local governments within a county or contiguous counties. Members include cities, counties, the state Department of Transportation, tribes, ports, transportation service providers, private employers, and others. Planning covers all modes of transportation: water, highways, air travel, public transit, and ports. This website lists the Wheatland Express as running a shuttle between Washington State University and the University of Idaho campuses. That shuttle service ceased operation at the end of 2011, which raises questions about the accuracy of the other data on this site (RTPO, 2015).

## **Pullman Transit-Fixed Route Buses and Dial-A-Ride**

The Pullman Public Transportation System is composed of a fixed route bus service and a Dial-A-Ride van service. The van service is restricted to seniors 65 and over and those with disabilities. Both of the services began in March of 1979. Neither of these is directed at low-income clients, but prices for service appear to be low enough that riders with limited income could utilize them.

There are 33 full time drivers who are trained to drive either fixed route buses or Dial-A-Ride vans. Three vans are on the road providing door-to-door service from 6:30 am to midnight, but riders must make a reservation in advance. In 2014, Dial-A-Ride provided 19,366 one-way rides inside the city limits of Pullman. In 2013, Pullman Transit provided 1,400,710 fixed route bus rides inside the city limits. This is a heavily used and highly valued transit system, and is the envy of many rural communities.

Pullman Transit is pursuing the possibility of expanding its service area outside the city limits. An important step in that effort is underway. Pullman Transit has received a grant to conduct a feasibility study to expand service to outlying areas and improve coordination with other stakeholders as a part of the 2015 Technical Assistance Program (TAP). This is a pilot program to provide direct technical assistance to rural transportation programs in the area of building system capacity to respond to community needs. Pullman Transit was one of five systems awarded a TAP grant in the entire nation (Wagner, 2015).

Robin Phillips, National Rural Transit Assistance Program's Executive Director commented, "The problems faced by these agencies are repeated across the country in other programs and states. The desire is to find solutions that can be repeated in other settings to provide public transportation to enrich the lives of families, provide social mobility and job security to all groups in the region involved" (Phillips, 2015). This grant is promising for the Whitman County region because it improves the possibility that the Pullman Transit System may be able to expand beyond the city limits to serve the county. The grant specifically will fund a consulting firm who will survey the area transit needs in Whitman County. The data gathered will be the basis for transportation planning in the future and will be vital for grant writing to address future needs.

Connectivity is essential to a countywide system. Being able to bring persons to a central point for transfer to services is a possibility. The study may also examine the possibility of resurrecting the shuttle service between Washington State University and the University of Idaho campuses. Connectivity there would be to transfer at the state line, if there were a Moscow Transit service to do that. One problem is that Whitman County does not have any transit authority or enabling legislation in place. Leaving the city limits puts one in the county where agreements would also be required. Transit personnel stated that stakeholders would be involved in commenting on the draft plan and that the League of Women Voters of Pullman would be included in this group of

stakeholders (Michael Wagner, Wayne Thompson and Chris Mitchell interviewed by Karen Kiessling 21 July, 2015). This survey and draft plan appears to be the most promising possibility for expanding services to those most needing it.

Current fees for service on Dial-A-Ride are 40 cents per one-way trip; the charge to the airport is \$3.00. Fixed route bus service costs 50 cents per ride; for those over 65 it is 30 cents. Point-to-point transfers are free. Leaving the bus for a period requires an additional payment to re-enter. All Washington State University students, faculty, and staff ride free of charge on presentation of a WSU identification card. All middle school and high school students who live more than one mile from the school ride free, and the Pullman School District distributes bus pass cards to those who meet this criterion.

### **Other Transportation Information**

Greyhound Bus Line will provide free bus tickets to runaways voluntarily returning home and missing or exploited children as verified by courts or police (Greyhound, 2015).

The Pullman Community Relief Fund, administered by the Community Action Center and created by the Poverty Awareness Taskforce, provides emergency funds for gasoline and travel needs on a one-time basis. Approximately 1/3 of its budget was spent on travel costs for persons needing assistance. In 2014, this included 14 one-way tickets to areas beyond Whitman County, 200 Pullman bus tokens, and three fuel vouchers for a total cost of \$2452.

### **Conclusions**

For much of Whitman County, it is clear that a person without a car does not have access to large grocery stores and vendors of other necessary household supplies.

Affordable transportation was identified as one of the top needs for residents outside of Pullman in the Health and Social Services Needs in Whitman County 2015 Community Needs Assessment General Report (Bittinger, 2015).

The creation of the Whitman County Unincorporated Area Transit District in 2009 was an effort to provide vanpool services to the area. Its implementation would be a vital source of support for those working to climb out of poverty in Whitman County.

Creating a plan, with Pullman Transit as the hub, which would look at providing transportation for the region by utilizing the public transit services that exist in several towns, COAST, counties that are involved, and other entities would be the greatest potential good for all stakeholders. This is especially true for low-income persons whose critical need for transportation is now unmet.

## Information Distribution

Our study shows something of the size and complexity of public and charitable services available to low-income households in Whitman County. We learned that individuals and organizations working in these services, as well as individuals and groups with special interest in such services, try to keep abreast of offerings by others and have good formal and informal information sharing networks (e.g., Poverty Awareness Task Force). There is, however, a lack of an easily accessed and up-to-date centralized directory of information about all of the resources available to low-income households. Providers of one type of service are not often well informed about services in other topic areas. The system is difficult to navigate for those who are seeking resources, and for those offering services resulting in gaps in care and inefficiencies in utilization.

For many years there has been available for the Palouse region a number of hard copy directories that were widely utilized by both individuals seeking services and service providers. For example, Neill Public Library maintained the People Helper, and the Young Children and Families collaborative published the widely used Palouse Resource Guide. In 2008, realizing the need for a more easily maintained directory Project Access converted the Palouse Resource Guide into a self-sustaining on-line resource with the support of a grant from the federal Human Resources and Services Administration. At the conclusion of the grant, the Palouse Alliance for Healthy Individuals, Families, and Communities was asked to locate an agency to host and maintain the guide. In 2013, the YMCA of the Palouse agreed to take over management of the website, although there were no resources to support on-going maintenance. The YMCA rebuilt much of the site to improve ease of use. The original model, which the YMCA is continuing to use, funds the work by asking entities listed on the site to pay annual subscriptions based the amount of information on the site. The Palouse Resource Guide appears as a link on the YMCA of the Palouse website (<http://www.palouseymca.org>). The searchable site is currently operative, but the number of resources presented and the information about each is very limited. As of January 2016, only 15 agencies or organizations are participating in the guide. The intent is to list entities with few financial resources, such as local food pantries, at no cost, but at this time they are not listed on the site. The work to maintain site information is done by student interns. The technological component of this effort is in good condition, but without expanded resources the effort is unable to be effective and may deteriorate with time (Interview by Mary Collins with Christine Oakley, Palouse Alliance for Healthy Individuals, Families, and Communities, and Colleen Hinman and Kayla Iverson, YMCA of the Palouse, January 26, 2016).

## REFERENCES CITED

### ABA

2006 American Bar Association, Resolution 112A (urging right to counsel in cases involving basic human needs) (Aug. 2006).

2010 American Bar Association, Resolution 104 (Model Access Act) (Aug. 2010).

### ACS

2014. American Community Survey Selected Economic Characteristics, Health Insurance Coverage. Available at:

[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_14\\_5YR\\_DP03&src=pt](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_DP03&src=pt). Accessed Dec. 21, 2015

2015 Available at <http://www.census.gov/programs-surveys/acs/>. Accessed 2/15/2016.

### Adams, S.

2013, 2014. Pullman Regional Hospital 2013 and 2014 Annual Performance, Assessment, and Improvement Reports. Available at <http://www.pullmanregional.org/sites/default/files/2013-PRH-Annual-PI-Report.pdf>. Accessed Dec. 16, 2015

### American Fact Finder

2015 Poverty Status in the Past 12 Months. Available at

[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_14\\_5YR\\_S1701&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S1701&prodType=table). Accessed Dec. 19, 2015.

### American Fact Finder2

2013 American FactFinder2.census.gov/faces/nav/jsf/pages/index.xhtml), U.S. Census, est. 2009-2013.

### ATV

2014 Alternatives to Violence. Available at <http://atvp.org/>. Accessed 2/15/2016

Benefits of High-Quality Child Care Persist 30 Years Later,

2012 <http://research.vtc.vt.edu/news/2012/jan/19/benefits-high-quality-child-care-persist-30-years/>.

### Bernstein, L.

2014. How many patients should your doctor see each day? The Washington Post. Available at <https://www.washingtonpost.com/news/to-your-health/wp/2014/05/22/how-many-patients-should-your-doctor-see-each-day>. Accessed Dec. 27, 2015.

Bishaw, Alemayehu

2013 U. S. CENSUS BUREAU, SOCIAL, ECONOMIC & HOUSING STATISTICS DIVISION, POVERTY STATISTICS BRANCH. Examining the Effect of Off-Campus College Students on Poverty Rates SEHSD 2013-17

Bittinger, Katherine

2015 Health and Social Services Needs in Whitman County 2015 Community Needs Assessment Results – General Report. Community Action Center, Pullman.

Boost

2015 Fast Facts about Boost Collaborative Children and Family Support Services.

2015 Palouse Industries. Available at <http://boostcollaborativewa.org/index.html>. Accessed 2/13/2016.

Budget writer to helm Early Learning, *Moscow-Pullman Daily News*, Sep. 1, 2015, p. 3A.

Chetty et al.

2015 The Impacts of Neighborhoods on Intergenerational Mobility Childhood Exposure Effects and County-Level Estimates. Available at [http://www.equality-of-opportunity.org/images/nbhds\\_exec\\_summary.pdf](http://www.equality-of-opportunity.org/images/nbhds_exec_summary.pdf). Accessed 2/15/2016.

Childcare Aware of Washington Data Report 2013, <http://wa.childcareaware.org/about-us/data/2013-data-folder/2013-annual-data-report>.

Child-care costs on the rise, *The Week*, Aug. 28, 2015, p. 33.

Child Care Quality, <http://www.childcareservices.org/fs/finding/child-care-quality/>.

Child Care in Whitman County August 2015, <http://www.childcarenet.org/about-us/data/2015-data/whitman>.

College Bound

2015 Available at <http://www.wsac.wa.gov/college-bound> Accessed 10/12/2015.

CAC

2014 Community Action Center, Reports of cases referred to Whitman County Legal Services from September 2010 through August, 2014.

2015 Available at <http://www.cacwhitman.com/>. Accessed 2/15/2016.

## CMS RHC

2015. Rural Health Fact Sheet. Available at <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/RuralHlthClinfctsht.pdf>. Accessed Dec. 17, 2015.

## Coleman, K.

2015. Health Pocket. Medicaid Acceptance by Healthcare Providers Drops to 1-out-of-3. Available at <https://www.healthpocket.com/healthcare-research/infostat/medicaid-acceptance-doctors-health-care-providers-2015#.VnsCafkrLGI>. Accessed Dec. 23, 2015.

## Community Child Care Center

2013 Annual Report 2012-2013. Pullman, WA.

## DeNaves-Walt, Carmen and Bernadette D. Proctor

2015 Current Population Reports U.S. Department of Commerce Economics and Statistics Administration U.S. CENSUS BUREAU. Income and Poverty in the United States: 2014, U.S. Government Printing Office, Washington, DC

DSHS Medical Assistance, 2014. Economic Security Administration, Medical Assistance Briefing Book. Available at [https://www.dshs.wa.gov/sites/default/files/ESA/briefing-manual/2014medical\\_assistance.pdf](https://www.dshs.wa.gov/sites/default/files/ESA/briefing-manual/2014medical_assistance.pdf). Accessed Dec. 20, 2015.

DSHS Medicaid, 2013-14. Medicaid Services-Enrollment Data, Whitman County July 2013-June 2014. Available at <http://clientdata.rda.dshs.wa.gov/> Accessed July, 2015

## Fact Sheet

2015, Helping All Working Families with Young Children Afford Child Care, Jan. 21 Available at <https://www.whitehouse.gov/the-press-office/2015/01/21/fact-sheet-helping-all-working-families-young-children-afford-child-care>. Accessed 2/15/2016.

## Fcc.gov

2015 Available at <http://www.freegovernmentcellphones.net/states/washington-government-cell-phone-providers>. Accessed 2/13/2016

Febus, S. 2015. PRH Financial Report for month ending Oct. 31, 2015. Accessed 12/02/2015.

## Feeding America

2013 Available at <http://www.feedingamerica.org/>. Accessed 2/15/2016.

## Glynn, S. J.

2015 The Importance of Preschool and Child Care for Working Mothers, Center for American Progress. Available at

<https://www.americanprogress.org/issues/education/report/2013/05/08/62519/the-importance-of-preschool-and-child-care-for-working-mothers/>. Accessed Dec. 16, 2015.

Golden, Olivia

2015 Celebrating Head Start at 50: How Lessons from Head Start Can Inform an Agenda for America's Poor Children, CLASP, <http://www.clasp.org/whats-next>.

Greyhound

2015. Available at [www.greyhound.com](http://www.greyhound.com) Accessed December 2015.

HealthGrove

2016 <http://medicare-usage.healthgrove.com/> . Accessed April 19, 2016.

HHS ACA, 2010. Key Features of the Affordable Care Act by Year. Available at <http://www.hhs.gov/healthcare/facts-and-features/key-features-of-aca-by-year/index.html>. Accessed Dec. 21, 2015.

Jafar v. Webb, 177 Wn. 2d 520, 303 P. 2d 1042 (2013).

Kids Count

2015 Kids Count Data Center. Data tables available at <http://datacenter.kidscount.org>

Kreidler, M 2011. Washington State Office of the Insurance Commissioner. State of the uninsured Health coverage in Washington state. Costs, trends and projections 2008 to 2014. Available at [www.insurance.wa.gov](http://www.insurance.wa.gov). Accessed Dec. 23, 2015.

Lindeblad, M. 2014. As Enrollment soars, Medicaid fee cuts may threaten access in Washington state. Seattle Times. Dec. 30, 2014. Available at <http://www.seattletimes.com/seattle-news/as-enrollment-soars-medicaid-fee-cuts-may-threaten-access-in-washington-state>. Accessed Dec. 22, 2015.

Medicare, 2015. The Official US Government Site for Medicare. Available at <https://www.medicare.gov/what-medicare-covers/index.html>. Accessed Dec. 22, 2015

MHA, 2015. Mental Health America, formerly the National Mental Health Association, Parity or Disparity: The State of Mental Health in America. Available at <http://www.mentalhealthamerica.net/sites/default/files/Parity%20or%20Disparity%202015%20Report.pdf>. Accessed Dec. 22, 2015.

NAC

2009 National Alliance of Caregivers Available at [http://www.caregiving.org/data/Caregiving\\_in\\_the\\_US\\_2009\\_full\\_report.pdf](http://www.caregiving.org/data/Caregiving_in_the_US_2009_full_report.pdf). Accessed Dec. 30, 2015.

NBER

2015 Available at <http://www.nber.org/bah/summer04/w10466.html>. Accessed 12/31/2015.

OFM

2016 <http://www.ofm.wa.gov/trends/social/fig201.asp>. Accessed 4/20/2016

Office of Family Assistance

2016 <http://www.acf.hhs.gov/programs/ofa/resource/2011-recipient-tan> Accessed 4/21/2016

Office of Management and Budget

2015 FACT SHEET: Middle Class Economics: The President's Fiscal Year 2016 Budget. Available at <https://www.whitehouse.gov/blog/2015/02/02/fact-sheet-middle-class-economics-president-s-fiscal-year-2016-budget>. Accessed Dec. 16, 2015.

OSPI

2015 Office of the Superintendent of Public Instruction. Available at <http://www.k12.wa.us/>. Accessed 2/13/2016.

2015 Report Card. Available at

<http://reportcard.ospi.k12.wa.us/summary.aspx?groupLevel=District&schoolId=1&reportLevel=State&year=2014-15>. Accessed 11/2/15

Palouse YMCA

2015 Available at <http://www.palouseymca.org/>. Accessed 2/15/2016.

Patterson DG, Andrilla CHA, Skillman SM, Hanscom J. 2014. *The impact of Medicaid primary care payment increases in Washington state*. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington. Dec., 2014. Available at <https://depts.washington.edu/fammed/chws/publications/the-impact-of-medicaid-primary-care-payment-increases-in-washington-state>. Accessed Dec. 22, 2015.

PHH

2015 Palouse Habitat for Humanity Available at <http://palousehabitat.org/>. Accessed 2/15/2016

Phillips, Robin

2015 Press Release, National Rural Transit Assistance Program, July 2015.

PRH, 2015. Pullman Regional Hospital website. Available at <http://www.pullmanregional.org>. Accessed Dec. 16, 2015.

Remberger, Russell W. PhD

2013 Poverty and High School Dropouts: The Impact of Family and Community Poverty on High School Dropouts. Graduation and Dropout Statistics Annual Report April 2015 Assessment and Student Information Robin G. Munson, Ph.D., Assistant Superintendent. Available at <http://www.apa.org/pi/ses/resources/indicator/2013/05/poverty-dropouts.aspx>. Accessed 2/13/2016

## RTPO

2014. Human Services Transportation Coordination Plan for the Palouse (RTPO) Regional Transportation Planning Organization, Final Report, November 2014, p.3 – 7. Available at [www.wsdot.wa.gov/plan](http://www.wsdot.wa.gov/plan). Accessed December 2015.

2015 (Palouse Regional Transportation Planning Organization 2015). Clarkston, WA 99403, Available at <http://www.seweda.org/>. Accessed December 2015.

## RWJF,

2012. 2015 County Health Rankings, Washington. Available at <http://www.countyhealthrankings.org/app/washington/2015/rankings/whitman/county/outcomes/overall/snapshot>. Accessed Dec. 20, 2015.

## Second Harvest

2015 Accountability Report. Available at <http://www.2-harvest.org/accountability/>. Accessed 2/15/2016

## Skillman, S., Fordyce, M., Yen, W., Mouny, T.

2012 Washington State Primary Care Provider Survey, 2011-2012: Summary of Findings August 2012. University of Washington School of Medicine Department of Family Medicine. Available at [http://depts.washington.edu/uwrhrc/uploads/OFM\\_Report\\_Skillman.pdf](http://depts.washington.edu/uwrhrc/uploads/OFM_Report_Skillman.pdf). Accessed Dec. 29, 2015.

## Snyder, L., Paradise, J., Rudowitz, R.

2014, The ACA Primary Care Increase: State Plans for SFY 2015, Oct 28, 2014. Available at <http://kff.org/medicaid/perspective/the-aca-primary-care-increase-state-plans-for-sfy-2015>. Accessed Dec. 23, 2015.

## Society for Research in Child Development

2010 "High-quality child care for low-income children: Long-term benefits." ScienceDaily. 15 September 2010. [www.sciencedaily.com/releases/2010/09/100915080433.htm](http://www.sciencedaily.com/releases/2010/09/100915080433.htm).

## TBRA

2013 Program Guidelines. Available at <http://www.commerce.wa.gov/Programs/housing/Homeless/Pages/TenantBasedRentalAssistance.aspx>. Accessed 2/15/2016

## Tweedy, Douglas

2015 Whitman County Profile. Employment Security Department Washington State. Available at <https://esd.wa.gov/labormarketinfo/county-profiles/whitman>. Accessed 2/10/2016

## U.S. Census

2016 Whitman County Washington Quick Facts. Available at <http://quickfacts.census.gov/qfd/states/53/53075.html>. Accessed 2/10/2016.

#### USDA CNPP

2015 Center for Nutrition Policy and Promotion. Available at <http://www.cnpp.usda.gov/>. Accessed 12/8/15

#### USDA, CSFP

2015 Commodity Supplemental Food Program. Available at <http://www.fns.usda.gov/csfp/commodity-supplemental-food-program-csfp>. Accessed 2/15/2016.

#### USDA ERS

2015 Available at <http://ers.usda.gov/>. Accessed 2/15/2016.

#### USDA Food Atlas

2016 <http://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas.aspx> . Accessed 4/18/2016.

#### USDA, NSLP

2015 <http://www.fns.usda.gov/nslp/national-school-lunch-program-nslp>. Accessed 10/29/2015

#### USDA, SNAP

2015 Available at <http://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program-snap>. Accessed 2/15/2016

#### USDA WIC

2015 Supplemental Program for Women, Infants, and Children. Available at <http://www.fns.usda.gov/wic/women-infants-and-children-wic>. Accessed 10/29/15

Ver Ploeg ,M., Breneman, V., Dutko, P. Williams, R. Snyder, S. Dicken, and Kaufman, P. 2012. Access to Affordable and Nutritious Food: Updated Estimates of Distance to Supermarkets Using 2010 Data. Economic Research Service Report No. 143. Available at <http://www.ers.usda.gov/media/956784/err143.pdf>. Accessed Dec. 10, 2015.

WAC 246-100, 2015. Public Health Mandated Services. Available at <http://apps.leg.wa.gov/wac/default.aspx?cite=246>. Accessed Dec. 17, 2015.

WAHBE, 2015. Washington Health Benefit Exchange powering Washington Healthplanfinder. Available at <https://www.wahbexchange.org/> Accessed Dec. 22, 2015.

#### WA State Auditor's Office

2015 WHMC Financial Statements Audit Report, Whitman Hospital and Medical Center, for the period January 1, 2013 through December 31, 2014, Published August 27, 2015. Accessed Nov. 12, 2015.

#### WSDOC

2014 Homelessness in Washington State Report 2014. Available at <http://www.commerce.wa.gov/Programs/housing/Homeless/Pages/default.aspx>. Accessed 2/15/2016.

2015 Housing Needs Assessment Available at <http://www.commerce.wa.gov/commissions/AffordableHousingAdvisoryBoard/Affordable-Housing-Needs-Study/Pages/default.aspx>. Accessed 2/15/2016.

Washington State Department of Early Learning

2007 Child Care Subsidies: A Booklet for Licensed and Certified Child Care Providers. Available at <http://ccrr.wsu.edu/media/78921/22-877.pdf>. Accessed 2/13/2016.

2016 Currently there is no wait list for Working Connections Available at <http://www.del.wa.gov/care/help/wait.aspx>. Accessed 2/13/2016.

2016 State Child Care Assistance and Subsidy Information. Available at <http://www.del.wa.gov/publications/subsidy/>. Accessed 2/13/2016

WSDH

2011-13, BRFSS Whitman County Chronic Disease Profile, Health Risk Indicators, Preventive Care. Available at <http://www.doh.wa.gov/portals/1/Documents/Pubs/345-271-ChronicDiseaseProfileWhitman.pdf> Accessed July, 2015

2011 *Whitman County Health Indicators: Indicator Definitions and Measurement Criteria, 2011*. Available at <http://www.doh.wa.gov/Portals/1/Documents/1200/LPHI-TechNotes.pdf>. Accessed Dec. 16, 2015.

2012 Maternal and Child Health Assessment Report. Available at <http://www.whitmancounty.org/pdf.aspx?pdfid=301> Accessed Sept., 2014.

2013. Primary Care Provider Survey, Health care access data, Whitman County. Available at <http://www.doh.wa.gov/Portals/1/Documents/Pubs/689059.pdf> Accessed July 2015.

2013 *Social and Economic Determinants of Health*, updated 05/14/2013. Available at [www.doh.wa.gov/Portals/1/Documents/5500/Context-SED2013.pdf](http://www.doh.wa.gov/Portals/1/Documents/5500/Context-SED2013.pdf). Accessed Dec. 16, 2015.

2015 CAH Rural Health/Critical Access Hospitals. Available at <http://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/RuralHealth/HealthcareFacilityResources/CriticalAccessHospitals>. Accessed July, 2015.

2015 Consolidated Contracts, 2015 – 17. Available at <http://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/Funding/ConsolidatedContracts>. Accessed Dec. 17, 2015.

2015 HPSA Rural Health/Data and Other Resources/Health Professional Shortage Areas. Available at <http://www.doh.wa.gov/hsqa/ocrh>. Accessed Dec. 16, 2015.

WA Health Care Authority ABCD,

2015. ABCD Utilization in Whitman County. Available at [http://www.hca.wa.gov/medicaid/dentalproviders/pages/dental\\_data.aspx](http://www.hca.wa.gov/medicaid/dentalproviders/pages/dental_data.aspx). Accessed Dec. 17, 2015

Washington State Department of Social and Health Services

2016 The Child Care Subsidy Programs, Available at <http://www.dshs.wa.gov/onlinecso/wccc.shtml>. Accessed 2/13/2016.

WSOFM

2015. Office of Financial Management>Population Division. Available at <http://www.ofm.wa.gov>> population. Accessed Dec 2015.

Washington State Office of Public Defense.

2014 Status Report on Public Defense in Washington State. April 2015, p. 47.

WDSF

2015 ABCD Access to Baby and Child Dentistry. Available at <http://abcd-dental.org/>. Accessed Dec. 17, 2015.

2015 SM SmileMobile. Available at

<https://www.deltadentalwa.com/guest/public/aboutus/wds-foundation/smilemobile.aspx>. Accessed Dec. 17, 2015.

WHMC

2015. Whitman Hospital and Medical Center website. Available at [www.whitmanhospital.com](http://www.whitmanhospital.com). Accessed Dec. 16, 2015.

WorkFirst

2016 Available at <http://www.workfirst.wa.gov/> . Accessed 1/19/16.

WSHSTP

2015 Washington Statewide Human Services Transportation Plan/Transpogroup. Available at [www.wsdot.wa.gov/st](http://www.wsdot.wa.gov/st). Accessed December, 2015.

Transit Development Plan 2013 – 2018 and 2012 Annual Report. City of Pullman/Pullman Transit. Date of Public Hearing: October 15, 2013. Available at [www.pullman-wa.gov/transit](http://www.pullman-wa.gov/transit) .

WSU

2016 Quick Facts. Available at <https://wsu.edu/about/facts/>. Accessed 2/10/2016.

WSUCCE

2016 Center for Civic Engagement. Available at <http://cce.wsu.edu/programs/palouse-food-project/>. Accessed 3/8/2016.

WSUSESRC

2015 Washington State University Social & Economic Sciences Research Center. Washington State Supreme Court Civil Legal Needs Study Update. June 2015.

Zuckerman, S., 2014. As Enrollment soars, Medicaid fee cuts may threaten access in Washington state. Seattle Times. Dec. 30, 2014. Available at <http://www.seattletimes.com/seattle-news/as-enrollment-soars-medicaid-fee-cuts-may-threaten-access-in-washington-state>. Accessed Dec. 22, 2015.

## Appendix 1: Record of Interviews

<b>LWV Poverty Study Record of Interviews</b>				
	<b>Contact individual</b>	<b>Address</b>	<b>Interviewers</b>	<b>Date</b>
<b>FOOD SECURITY</b>				
Albion Food Pantry	Starr Cathey	310 F St Albion, WA 99102	Mary Collins/George Kennedy	3/26/2015
Colfax Food Pantry	Paige Collins	S 213 Main St Colfax WA 99111	George Kennedy/Bertie Weddell	4/2/2015
Colton-Uniontown Food Pantry	Debbie Niehenke	203 S Montgomery St., Uniontown WA 99179	Mary Collins	Mailed response
Endicott Food Pantry	David Gilman/Jenny Meyer	101 Banta St., Endicott, WA 99125	Mary Collins	Mailed response
Garfield Food Pantry	Penny Martinez	211 East Main Garfield, WA	Mary Collins	Telephone 6/15/2015
Malden Food Pantry	Herb Bacon	11 Ash St, Malden, WA 99149	Mary Collins/Ryan Lazo	6/9/2015
Palouse Food Pantry	Charlotte Snekvik	230 E Main, Palouse, WA 99161	Mary Collins/Bertie Weddell	4/21/2015
CAC Community Food Bank	Jeff Tietjen	350 Fairmont Road Pullman, WA 99163	George Kennedy	3/14/2015
Pullman Child Welfare	Annette Syms, Debbie Thompson	108 NW Stadium Way Pullman, WA 99163	Ryan Lazo/Bertie Weddell	3/24/2015
			Ryan Lazo/Bertie Weddell	3/24/2015
St. John Food Pantry	Joan Corder	5 West Broadway St. John, WA 99171		
Tekoa Food Pantry	Fran Sauer	419 N Washington St, Tekoa, WA 99033	Bertie Weddell/George Kennedy	6/8/2015
Council on Aging and Human Services/meals on wheels	Paige Collins	210 S Main Colfax, WA 99111	Mary Collins/Suzanne Poole	7/10/2015
SNAP (DSHS)	Jane Roberts	418 South Main Colfax, WA 99111	Mary Collins/Karen Kiessling	9/28/2015
WIC/Whitman Cty Public Health	Troy Henderson	310 N Main Colfax, WA 99111	Mary Collins/Karen Kiessling	8/23/2015
Backyard Harvest	Chris Cummings	PO Box 9783 Moscow, ID 83843	Mary Collins	9/25/2015
Community Gardens/CAC	Joseph Astorino		Mary Collins	1/6/2016
Palouse Fresh Foods Project/WSU CCE	Ryan Lazo/Ashley Hope		Mary Collins	9/4/2015
Palouse Cares	Rick Minard		Mary Collins	email response 1/4/16
<b>HOUSING</b>				

Poverty Awareness Taskforce/ Community Relief Fund	Jeff Tietjen	350 SE Fairmont Pullman, WA 99163	Mary Collins/Martin Beuhler	6/30/2015
CAC Crises Rental Assistance	Ann Smith	350 SE Fairmont Pullman, WA 99163	Mary Collins/Martin Beuhler	4/29/2015
Family Promise of the Palouse	Lindsey Rinehart/Katti Carlson	PO Box 9389 Moscow, ID 83843	Mary Collins/Martin Beuhler	2/26/2015
Alternatives to Violence of the Palouse	Christine Wall		Mary Collins	3/5/2015
Tenant Based Rental Assistance (TBRA)	Jeff Tietjen	350 SE Fairmont Pullman, WA 99163	Mary Collins/Martin Beuhler	6/30/2015
Temporary Housing Operating and Rent (THOR)	Jeff Tietjen	350 SE Fairmont Pullman, WA 99163	Mary Collins/Martin Beuhler	6/30/2015
CAC Rental properties	Shannon Gaines	350 SE Fairmont Pullman, WA 99163	Mary Collins/Martin Beuhler	4/29/2015
CAC Self Help	Ann Smith	350 SE Fairmont Pullman, WA 99163	Mary Collins/Martin Beuhler	4/29/2015
Palouse Habitat for Humanity	Jennifer Wallace	PO Box 3054 Moscow, ID 83843	Mary Collins	6/2/2015
Section 8 Rental Opportunity Program (ROP)	Liz Corfetti	350 SE Fairmont Pullman, WA 99163	Mary Collins/Martin Beuhler	1/29/2015
<b>LEGAL SERVICES/LAW ENFORCEMENT</b>				
Steve Martonick		207 E Main Pullman WA		
Pullman Police Dept	Chris Tennant	260 SE Kamiaken Pullman, WA 99163	Lenna Harding/JaneVonFrank	2/4/2015
WSU Police Dept	Hansen	PO Box 647300 Pullman WA 99164	Lenna Harding/Karen Kiessling	3/26/2015
Whitman Cty Sheriff	Ron Rockness	411 N Mill St. Colfax, WA 99111	Lenna Harding/Karen Baron	
Pullman Fire Dept	Mike Heston	620 S. Grand Pullman, WA 99163	Lenna Harding/Judy Stone	3/10/2015
Chapliancy Fund	Ron McMurray		Lenna Harding	email 6/13/15
Fire District 12	Lester Erwin	410 SW Walnut Pullman, WA 99163		
Pullman Regional Hospital Social Services	Katie Druffel	835 SW Bishop Blvd, Pullman, WA 99163	Lenna Harding/Karen Kiesling	8/14/15
Alternatives to Violence of the Palouse	Gene Siple		Tessa Schull	
Whitman Hospital	Kathleen Haley			
<b>CHILDCARE</b>				
Boost Collaborative	Sue Kreikemeier	115 NW State St. Suite 105 Pullman, WA 99163	George Kennedy/Judy Meuth	5/4/2015
Pullman Christian Child Care	Cassi Fitzgerald	345 SW Kimball Pullman, WA 99163	George Kennedy/Judy Meuth	5/26/2015

Montessori School of Pullman	Beverley Wolff	115 NW State St Pullman, WA 99163	George Kennedy/Judy Meuth	5/6/2015
YMCA at WSU, Franklin, and Sunnyside	Colleen Hinman, (asst Lisa Lopez)	5 NE Spring St. Pullman, WA 99163	George Kennedy/Judy Meuth	4/24/2015
Community Child Care Ctr Greyhound Way	Mary McDonald	530 Greyhound Way Pullman, WA 99163	George Kennedy/Judy Meuth	3/11/2015
Community Child Care Ctr St James	Mary McDonald	1410 Stadium Way Pullman, WA 99163	George Kennedy/Judy Meuth	3/11/2015
Parveens Playhouse Child Care Ctr	Prveen Kazimee	425 S Grand Ave Pullman, WA	George Kennedy/Judy Meuth	6/10/2015
Sunnyside Preschool and Child Care Ctr	April Mangiantini	110 SW Wawawai Rd Pullman, WA 99163	George Kennedy/Judy Meuth	4/10/15
WSU Childcare	Rose Jackson	1425 Olympia Ave Pullman, WA 99164	George Kennedy/Judy Meuth	6/1/2015
Building Blocks Childcare Center	Jackie Eveland		George Kennedy/Judy Meuth	6/4/2015
Foot Prints Child Care Ctr	Community Childcare	214 S Whitman Rosalia, WA 99170	George Kennedy/Judy Meuth	5/28/2015
Oakesdale School Childhood Ctr	Community Childcare	210 W Pearl St Oakesdale, WA 99158	George Kennedy/Judy Meuth	5/13/2015
Seedlings Child Care Ctr	Community Childcare	201 W Union Garfield, WA 99130	George Kennedy/Judy Meuth	7/10/2015
Community Child Care Ctr	Community Childcare	1207 N Morton Colfax, WA 99111	George Kennedy/Judy Meuth	3/11/2015
Heather Gouge				6/15/2015
Angela Keeton		455 NW Irvng Pullman, WA 99163		8/13/2015
Jenny's Play House				6/29/2015
Endicott School District Preschool	Tara Huntley			
Garfield School District Preschool	Luanne Deerkop			
St. John School District Preschool	Amy Watt			
Palouse School District Preschool	Brittany Sawyer			
Rosalia School District Preschool	Marita Bothman			
Tekoa School District Preschool	Kayla Burtchett			
Comunity Childcare	Brenda Kane		Judy Meuth	email 12/21/2015
Department of Early Learning	Matt Judge		Judy Meuth	email 12/14/2015
<b>ELDERCARE</b>				
Council on Aging and Human Services\COAST, Sr. Nutrition		PO Box 107 Colfax, WA 99111	Mary Collins/Suzanne Polle	7/10/2015

Rural Resources\COPES/MPC/Kinship/Info and Assistanr/General Case Mgt./Caregiver support	Naomi Calkins-Golter	1615 NE Eastgate Suite G 4EA Pullman	BJ Carlson and Muriel Jordan	5/11/15
	Roberta Rutherford	1615 NE Eastgate Suite G 4EA Pullman		
	Andree Marcus-Rader	1615 NE Eastgate Suite G 4EA Pullman		
	Melissa Johnson	1615 NE Eastgate Suite G 4EA Pullman		
Friends of Hospice	Annie Pillers		Lucy Linden and Suzanne Polle	12/3/2015
Home Health				
Pullman Council on Aging/Meals on Wheels/chore service/guide to Sr. services	Scott Fowler/Nancy Backes	PO Box 1123 Pullman, WA 99163	Naomi Golter and Suzanne Polle	8/28/15
Circles of Caring Adult Day Health	Hollie Mooney 588 Bishop Blvd. Suite D Pullman		Lucy Linden/Karen Kiessling	12/3/15
<b>EDUCATION/WORK TRAINING OPPORTUNITIES</b>				
BOOST/Palouse Industries	Eric Hoyle	NE 1235 Professional Mall Blvd Pullman, WA		
SFCC	Sally Jackson			
SFCC	Dyan Bledsoe			
WA Student Achievement Council/College Bound	Beth Ahlstrom	917 Lakeridge Way SW Olympia, WA 98502	Mary Collins	email and telephone 12/15,1/16
Rural Resources	Morgan Smith			
Colfax School District		1207 Morton St. Colfax, WA 99111	Janet Kendall/Elizabeth Walker	2015
Colton School District	Nathan Smith	706 Union St. Colton, WA 99113	Paul Spencer	email 10/29/2015
LaCrosse School District		111 Hill Ave LaCrosse, WA 99143	Elizabeth Walker	telephone 10/2015
Oakesdale School District	Jake Dingman	PO Box 228 Oakesdale, WA 99158	Paul Spencer	email 6/26/2015
Palouse School District		600 E Alder Palouse, WA 99161	Elizabeth Walker/Paul Spencer	6/23/2015
Palouse School District	Tim Coles		Elizabeth Walker/Paul Spencer	6/23/2015
Pullman School District	Paul Sturm	240 SE Dexter Pullman, WA 99163	Elizabeth Walker/Paul Spencer	2/10/2015

Pullman School District	Bob Maxwell	240 SE Dexter Pullman, WA 99163	Elizabeth Walker/Paul Spencer	2/10/2015
Rosalia School District		916 Josephine Rosalia, WA 99170	Elizabeth Walker/Paul Spencer	2/10/2015
St. John-Endicott School District			Paul Spencer	email 8/19/2015
Tekoa School District	Connie Kliewer	PO Box 869 Tekoa, WA 99033	Paul Spencer/Susan Daniels	7/2/2015
Pullman HS	Joe Thornton	510 Greyhound Way Pullman, WA 99163	Libby Walker/Paul Spencer	2/10/2015
Pullman HS	Kelly Glaze		Libby Walker/Paul Spencer	2/10/2015
<b>TRANSPORTATION</b>				
Dial-A-Ride/Pullman Transit	Michael Wagner	775 NW Guy Pullman, WA 99163	Paul Spencer/Karen Kiessling	
COAST	Suzanna Seigneur	PO Box 107 Colfax, WA 99111	Paul Spencer/Karen Kiessling	5/12/2015
Special Mobility Services	Rick Koontz	3102 E Trent Ave Spokane, WA 99202	Paul Spencer/Karen Kiessling	
<b>HEALTHCARE</b>				
ABCD Program (Access to Baby & Child Dentistry)	Adrienne Maxwell, Dietician	WCHD, 1250 ProMall Blvd., Ste 203, Pullman	Judy Stone	9/3/2015
Moscow-Pullman OB/GYN	Lori Orr, Off. Mgr.	1205 SE Pro Mall Blvd, #102	Judy Stone	12/1/2015
Palouse Medical	Theresa Kwate and Dena Nunamaker	825 SE Bishop Blvd, Ste. 200	Ginger/Daniels	9/9/2015
Palouse Free Clinic	Sharon Hall, Executive Director	835 SE Bishop Blvd, Ste 140	Ginger Glawe/Karen Kiessling	6/8/2015
Palouse Health Center	Suzanne Schorzman, ARNP	235 E. Main, Palouse, 99161	Judy Stone/Mary Collins	9/16/2015
Palouse Pediatrics	Karly Port, Off. Mgr.	1205 SE Pro Mall Blvd, #104	Judy Stone	21/1/2015
Pullman Ready Care	Theresa Kwate and Dena Nunamaker	825 Bishop Blvd, Ste 200	Ginger Glawe	9/9/2015
Palouse River Counseling	Ronda Allenger, MH Dir.	340 NE Maple	Ginger Glawe	Oct-14
Planned Parenthood	Director of Community Outreach - name withheld	1525 SE King Drive	Ginger Glawe/Karen Kiessling	5/22/2015
Pullman Dental Care	Rylee Dustin, Off.Mgr.	1205 SE ProMall Blvd, Ste 202	Judy Stone	10/20/2015
Pullman Family Medicine	Shannon Hatley, RN	915 NE Valley Rd.	Ginger Glawe/Susan Daniels	6/17/2015
Pullman Fire Dept., EMS	Mike Heston, Chief	620 S. Grand Ave	Stone/Harding	3/9/2015
Pullman Regional Hospital	Jeannie Eylar, CCO and Steve Febus,	835 SE Bishop Blvd	Judy Stone/Karen Kiessling	7/16/2015

	CFO			
Rockwood Inland Eye Center (ophth)	Dr. Haymore and Stephanie Vantine	1170 W. Fairview, Colfax, 99111	Judy Stone	8/31/2015
Rolling Hills Eyecare	Paulette Lowery	1045 N. Grand Ave, Ste E	Judy Stone	9/28/2015
Safeway Pharmacy	Carlene Emerson, Pharmacist	430 SE Bishop Blvd.	Ginger Glawe	8/10/2015
Shopko Optometry	Tanya Reid, OD	1450 S. Grand Ave	Ginger Glawe/Susan Daniels	8/29/2015
SmileMobile	Adrienne Maxwell, Dietician	WCHD, 1250 ProMall Blvd., Ste 203, Pullman	Judy Stone	9/3/2015
Whitman County Department of Public Health	Troy Henderson, Director	310 N. Main, Colfax, 99111	Mary Collins/Karen Kiessling	8/3/2015
Whitman Medical Group	Jen Broeckel, Off. Mgr.	1210 W. Fairview, Colfax, 99111	Judy Stone/Mary Collins	11/3/2015
WSU Psychology Clinic	Brian Sharpless, Ph.D., Dir.		Ginger Glawe	3/5/2015
Others				
Christine Oakley	Palouse Alliance		Mary Collins	1/26/2016
Kayla Iverson	YMCA		Mary Collins	1/26/2016
Colleen Hinman	YMCA		Mary Collins	1/26/2016