MERCER ISLAND YOUTH AND FAMILY SERVICES

Assessment of Community Needs

September 2019





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Mercer Island Youth & Family Services Assessment of Community Needs

September 2019

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Purpose and Context

Mercer Island Youth and Family Services (MIYFS) conducted this data-driven Needs Assessment to better understand the health and human service needs of the city's residents. Currently, Mercer Island provides direct services to residents, including: individual and family counseling, school-based mental health services, court diversion and early intervention programs, senior services, emergency assistance programs, and youth development programs. In addition, the MIYFS runs and staffs the Mercer Island Thrift Shop which helps fund service provision.

The purpose of this assessment is to provide MIYFS with a baseline understanding of the current conditions across the Island, help MIYFS prioritize needs and allocate limited resources based on identified needs, and assess its role in addressing health and human service needs.

METHODS AND DATA SOURCES

This Needs Assessment was compiled between February and July of 2019. The approach uses various methods for data collection and analysis to create an understanding of the education, health, nutrition, and social service needs of the residents of Mercer Island.

Secondary Data Sources

This report uses data from the following data sources.

- Child Care Resources
- Public Health Seattle & King County (PHSKC) City Health Profiles
- Puget Sound Regional Council (PSRC)
- US Census American Community Survey (ACS) 5-year Estimates. In general, the analysis uses the 2013–2017 five-year estimates to support analysis at the city, place, and school district level.¹ The ACS collects data continuously, sending surveys each month to households and reaching about three million addresses each year. The five-year estimates are published for areas with populations of all sizes and are the most reliable and precise of the estimates (compared to one year) as well as the most comprehensive. However, they are less current than the one-year estimates.
- US Department of Housing and Urban Development (HUD). HUD releases housing data annually
 under the Comprehensive Housing Affordability Strategy program (CHAS). Data is based on ACS 5year estimates, and provides information on housing affordability, household income, and household
 composition.

It should be noted since these are estimates based on survey responses, there is always a margin of error within ACS data. When the margin of error is especially high, it is noted in the narrative.

¹ American Community Survey (ACS) 5-year estimates are the most up-to-date and accurate data products released by the US Census when it comes to demographic indicators. Because the full decennial census happens every ten years, the ACS estimates fill in the gap between each decennial census. They also cover a wider breadth of indicators which are infeasible to ask of the entire country during the decennial census but can be asked when implementing a statistically valid survey. They are released as 5-year ranges because the greater sample sizes across 5 years lowers overall error in statistically upscaling the survey responses. For example, data for the range 2013–2017 is presenting the best possible estimate for the year 2017, based on survey responses from the entire 5-year range.

- Washington Association of Sheriffs and Police Chiefs (WASPC)
- Washington Healthy Youth Survey. The Healthy Youth Survey is a statewide survey sponsored by the Department of Health, the Office of Superintendent of Public Instruction, the Department of Social and Health Services, and the Liquor and Cannabis Board in cooperation with schools throughout the state. Mercer Island has a relatively small number of students reporting on the survey, depending on the grade. This can skew results based on which students participated.
- Washington State Office of Financial Management (OFM) April 1 population estimates. OFM develops inter-census estimates of the populations of all cities and towns in the state released annually on April 1. These estimates are considered the official jurisdictional population and are used in state program administration and to allocate revenues.
- Washington State Office of Superintendent of Public Instruction (OSPI)

Peer Cities and King County

Where possible, data is included on the following peer cities.

■ Bainbridge Island	■ Issaquah	■ Redmond
■ Bellevue	■ Kirkland	■ Sammamish

These cities were vetted with MIYFS staff and chosen due to their proximity to Mercer Island, assumed similar socio-economic characteristics, geographic similarities (i.e., being an island), or size. They serve as a point of comparison for Mercer Island.

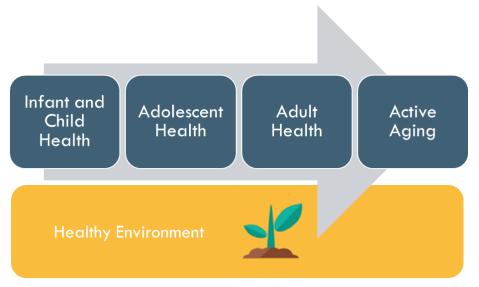
In addition to peer cities, the data compares Mercer Island to King County where possible.

MIYFS Staff Retreat

BERK staff met with providers and staff of MIYFS during their annual retreat to discuss the needs and emerging trends in the populations they serve and the community more broadly. Discussion was organized around the life cycle approach (see Exhibit 1). This approach follows the premise that health and human services build well-being throughout people's lives.

Data presented in this report are also organized by the life cycle approach.

Exhibit 1. Life Cycle Approach



Source: Frameworks Institute Talking Human Services, BERK illustration, 2017.

BERK discussed the questions below for each life cycle stage with MIYFS staff and summarized what we heard in the subsequent pages.

- What health and human service needs do you see in the community?
- How has the community changed? Has that impacted the needs?
- What are the emerging needs?
- What would be helpful to learn about the populations you serve?

Mercer Island Stakeholders

In early July 2019, two focus groups were held with service providers on Mercer Island to understand more about health and human service needs and ways that MIYFS can better partner with these providers. A list of participants is below, and themes raised during the focus groups are included throughout the report.

Mercer Island Pediatrics

- Dr. Elizabeth Evans, Pediatrician and President of Mercer Island High School PTA
- Dr. Danette Glassy, Pediatrician
- Dr. John Schreuder, Pediatrician

Mercer Island Police Department

 Art Munoz, School Resource Officer and Juvenile Detective

Mercer Island Preschool Association

Emily Ackley, President

Mercer Island School District

- Aimee Batliner-Gillette, Principal, Northwood Elementary School
- Elizabeth Daugherty, Speech language pathologist, Island Park Elementary School
- Fred Rundle, Assistant Superintendent of Learning Services

IDENTIFIED NEEDS AND MIYFS ROLE

Currently, MIYFS serves youth, families, and seniors across the island with a focus on school-based services, youth development and diversion programs, and emergency services for families and seniors. MIYFS also provides cross-community counseling to individuals of all ages. These services are in line with the identified needs.

Secondary data analysis and in-person stakeholder interviews identified several needs across the city that might benefit from continued or increased investment of resources from MIYFS, including:

- School-aged mental health services
- Comprehensive family services
- Multigenerational services

School-aged Mental Health and Comprehensive Family Services

The most pressing need, and one that MIYFS has a significant role in already, is school-aged mental health. Stakeholders indicated that school-based counselors are currently at capacity, triaging kids in crisis, and could be more proactive if they had more time. The most critical need identified is for an additional counselor in the middle school. Other needs noted included, the addition of one to two school counselors to share the load across elementary schools and the addition of a mental health counselor that could provide wraparound family services for families in crisis, dealing with parent mental health and substance abuse issues.

Stakeholders indicated that many parents need support with parenting and that ongoing education could be beneficial. MIYFS is well positioned to provide parent education and support. However, reaching those who most need support is the most challenging.

Other roles that MIYFS could play include working towards changing the norms of child achievement, which influences stress and anxiety in school-aged children. MIYFS saw moderate success with a past campaign focused on changing norms around underage drinking.

Older Adults

Though the share of older adults is staying relatively steady on Mercer Island, the share of those over 65 living alone is increasing and the share of those over 85 is higher than King County overall. Stakeholders noted that increased multigenerational services and opportunities for seniors to engage with other generations could be beneficial and that MIYFS could play a role in providing these services and connections.

Community Demographics

POPULATION

The 2018 population of Mercer Island is estimated at 24,270 people. Mercer Island's population has increased and decreased between 2000 and 2018. After a period of decline through 2005, there was a short growth period, then the population held steady at roughly 22,700 for six years, 2008-2013. Since 2013, there has been relatively steady growth.

24,500 Population 24,000 23,500 23,000 22,500 22,000 21,500 21,000 20,500 20,000 19,500 2010 2012 2005 2006 2008 2009 2007 2011

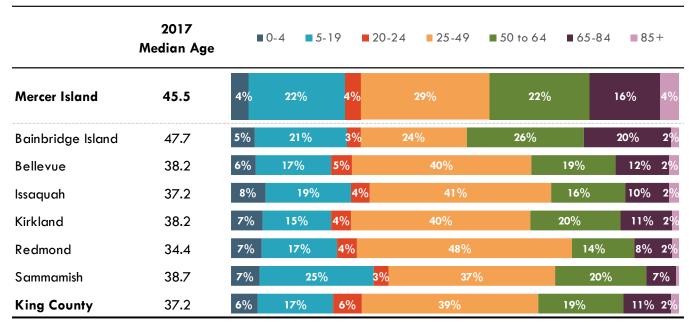
Exhibit 2. Mercer Island Population, 2000-2018

Source: WA OFM, 2018; BERK, 2019.

- Between 2010 and 2018, the average annual growth rate is 0.8%. For comparison, King County grew at a rate of 1.6% annually in that same time period.
- In the last five years, since 2013, the average annual growth rate increased to just above 1.3%.

AGE DISTRIBUTION

Exhibit 3. Age Distribution, 2017

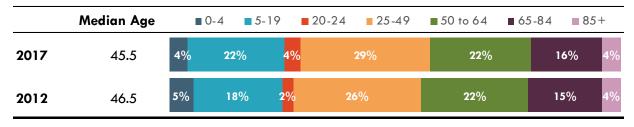


Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

- Over 40% of Mercer Island residents are over the age of 50. This is higher than many cities in the area, and roughly 10% higher than King County overall.
- Mercer Island has double the share of residents 85 or older as compared to other areas, and King County overall.

The age distribution is not rapidly changing in Mercer Island, although as shown below in Exhibit 4, some of the age groups saw increases in the past five years.

Exhibit 4. Mercer Island Age Distribution, 2012 vs 2017



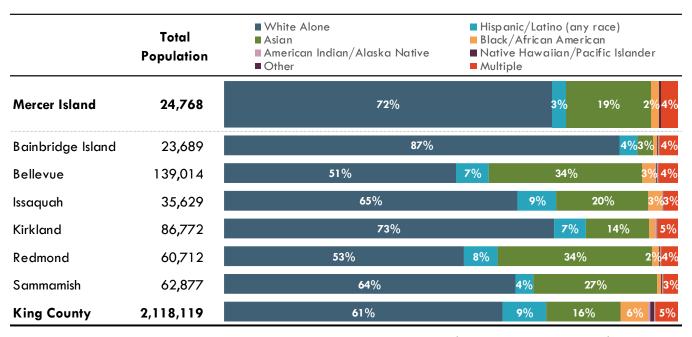
Source: US Census American Community Survey 5-yr Estimates, 2008–2017; BERK, 2019.

- The share of children age 5-19 increased 4% since 2012, the 20-24 age group increased 2%, and the 25-49 age group increased 3%.
- The share of people ages 85 and older is not experiencing significant growth or decline relative to the rest of population.

RACE AND ETHNICITY

Exhibit 5 presents the distribution of people among the federal race categories and Hispanic ethnicity for the jurisdictions of interest. The Hispanic ethnicity percentage represents those of any race, and each race category represents residents reporting they are non-Hispanic. Mercer Island has historically been a predominantly White alone community, though that is changing. Currently, Mercer Island is just below three quarters White alone.

Exhibit 5. Race and Ethnicity, 2017



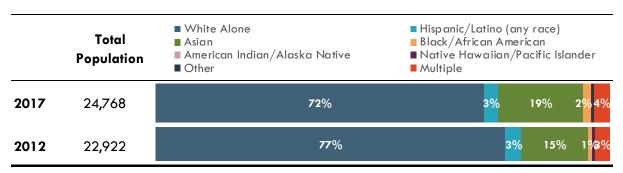
Note: All races above are non-Hispanic – e.g., White alone, Asian, American Indian/Alaska Native etc. Hispanic/Latino may be of any race.

Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

- Mercer Island is 72% White alone, followed by 19% Asian alone. This is fairly similar to the breakdown of race and ethnicity in Kirkland, which is 73% White alone and 14% Asian alone.
- Compared to the rest of the region and King County overall, Mercer Island has a relatively small share of Hispanic/Latino residents, at just 3%. King County has 9% Hispanic/Latino residents, as does Issaquah.

While Mercer Island has a large White alone population, the community is becoming more racially and ethnically diverse, as shown in Exhibit 6.

Exhibit 6. Mercer Island Race and Ethnicity, 2012 vs 2017



Note: All races above are non-Hispanic – e.g., White alone, Asian, American Indian/Alaska Native etc. Hispanic/Latino may be of any race.

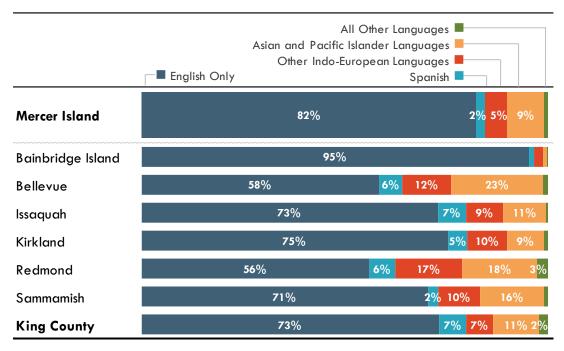
Source: US Census American Community Survey 5-yr Estimates, 2013-2017; BERK, 2019.

- Between 2012 and 2017, the White alone population decreased in share by 5%, while the Asian alone population increased by 4%.
- In this same time period, both the Black/African American alone and Multiple Race populations increased by 1%.

LANGUAGE

Language often reveals more nuance to the racial and ethnic makeup of an area. Compared to other parts of the region, Mercer Island has a high share of residents speaking only English at home, surpassed only by Bainbridge Island.

Exhibit 7. Language Spoken at Home, 2017



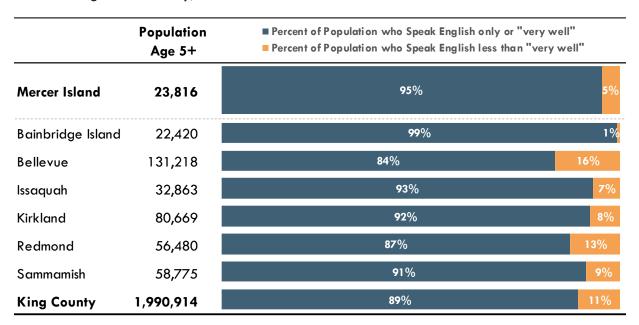
Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

- Roughly 18% of the Mercer Island population speaks a language other than English at home, with Asian and Pacific Islander languages comprising 9% of the languages spoken at home on the island, and Other Indo-European languages comprising 5%.
- Compared to other cities in the region, a smaller share of Mercer Island's population speaks a language other than English at home. In Bellevue and Redmond, over 40% of the population do not speak English at home. In King County overall, nearly 30% of the population do not speak English at home.
- Only 2% of Mercer Island residents speak Spanish at home, affirming the data in Exhibit 5 and Exhibit 6 showing a small share of Hispanic/Latino residents in Mercer Island.

Limited English Proficiency

Individuals with limited proficiency in English often have difficulty finding jobs and staying employed as many jobs require employees communicate with customers, co-workers, or suppliers in English. Lack of English proficiency may also limit interactions with public agencies or staff leading to lack of access to benefits or programs.

Exhibit 8. English Proficiency, 2017



Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

In Mercer Island, approximately 5% of the population over the age of five speak English less than "very well." This is a low share compared to the region. In Bellevue the share is 16%, in Redmond it is 13%, and in King County overall it is 11%.

Foreign Born Population

The foreign-born population includes naturalized US citizens, lawful permanent residents (immigrants), temporary migrants (such as foreign students), humanitarian migrants (such as refugees and those seeking asylum), as well as unauthorized migrants. Anyone who was not a US citizen at birth is included in the count.

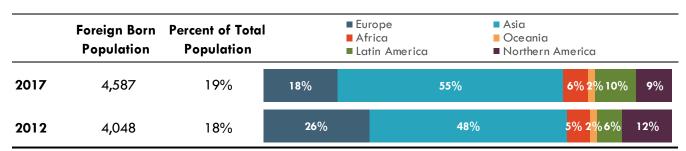
Exhibit 9. Foreign Born Population by Place of Birth, 2017

	Foreign Born Population	Percent of Total Population		■ Europe ■ Africa ■ Latin Americ		Asia Oceania Northern America
Mercer Island	4,587	19%	18%		55%	<mark>6%2%</mark> 10% 9 %
Bainbridge Island	1,732	7%	36	%	28%	3 <mark>% 3%</mark> 11% 18%
Bellevue	52,871	38%	12%		70%	<mark>3%</mark> 10% 3%
Issaquah	8,473	24%	18%		59%	1 <mark>% 2</mark> % 16% 4%
Kirkland	19,345	22%	22%		53%	<mark>3%</mark> 14% 6%
Redmond	24,315	40%	13%		67%	<mark>4%</mark> 11% 4%
Sammamish	16,475	26%	15%		70%	<mark>3%</mark> 5% <mark>6</mark> %
King County	467,938	22%	14%		55%	8%2 <mark>% 18% 4</mark> %

Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

- In Mercer Island nearly 20% of the population is foreign born, compared to 22% in King County overall.
- Of the foreign-born population, over half (55%) are from Asia, followed by 18% from Europe, 10% from Latin America, and 9% Northern America. Other than Sammamish, Mercer Island has the lowest share of foreign-born residents from Latin America of all the comparison geographies.

Exhibit 10. Mercer Island Foreign Born Population by Place of Birth, 2012 vs 2017



Source: US Census American Community Survey 5-yr Estimates, 2008–2017; BERK, 2019.

- The share of foreign-born population from Asia increased 7%, and the foreign-born population from Latin America increased 4% between 2012 and 2017.
- The percent of foreign-born residents from Europe declined 8% between 2012 and 2017.

Transitional Bilingual Instruction Program

Languages spoken by students in Transitional Bilingual Instruction Program (TBIP) can provide more nuance on recently arrived students (and their parents) at a higher geographic specificity than the Census is able to provide.

Students in TBIP meet the following criteria: the primary language of the student is not English, and the students' English skills are sufficiently lacking or absent as to delay learning.

Exhibit 11. Top 10 Languages Spoken by Transitional Bilingual Instructional Program (TBIP) Students, 2016–2017

Mercer Island School District					
Language	Count	Per	cent		
Chinese-Unspecified	60	35.1%			
Spanish	20	11.7%			
Korean	15	8.8%			
French	12	7.0%			
Russian	11	6.4%			
Japanese	7	4.1%			
Chin	4	2.3%			
Chinese-Cantonese	4	2.3%			
Chinese-Mandarin	4	2.3%			
Dutch	4	2.3%			
Other	30	17.5%			
Total TBIP Students	171				
Total District Enrollment	4,533				
Percent TBIP Students		3.8%			

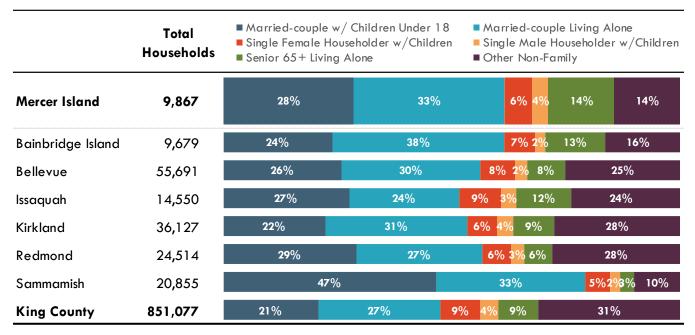
Note: Chin is a language spoken primarily in the Chin state of Myanmar/Burma. Source: OSPI, 2016–2017; BERK, 2019.

- Chinese language speaking students comprise nearly 40% of the students in the TBIP program in Mercer Island School District.
- Other languages spoken comprise 17.5% of all students in the TBIP program.

HOUSEHOLD TYPE

Over 60% of households in Mercer Island are married-couple families, which include married-couples with no children as well as those with children. Exhibit 12 shows the full breakdown of household types in Mercer Island and neighboring cities.

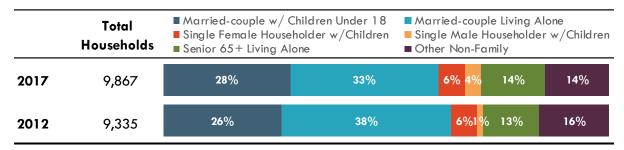
Exhibit 12. Household Type, 2017



Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

 Approximately 33% of Mercer Island households are married couples living alone, which consists of married couples who have never had children as well as those with children who have moved out.

Exhibit 13. Mercer Island Household Type, 2012 vs 2017



Source: US Census American Community Survey 5-yr Estimates, 2008–2017; BERK, 2019.

Infants and Children

The Mercer Island School District provides preschool services for children three to five through a highneeds preschool program. In addition, there are an estimated 17 other preschools on the island and about four that provide infant child care.² Both preschool and childcare costs are high and slots available are limited. MIYFS provides scholarships for families to attend preschools with their Preschool Association Scholarship Program, but the scholarships are subsidies that don't cover the full cost of the preschool. Some child care providers for children 0-5 provide their own scholarship programs, but oftentimes applications are complicated, and you must first apply to the state's Working Connections Child Care program.

POPULATION UNDER THREE

Mercer Island is interested in attracting more infant services on the Island, but the number of children 0-2 years of age would have to meet certain minimums. Exhibit 14 estimates the number of children under the age of three living on the island and suggests that the number may be lower than the 1,200 needed to attract services.

Exhibit 14. Estimated Population Under Age 3, 2017

	2017	Estimated Population Under			
	Population	#	Percent		
Mercer Island	24,768	502	2.0%		
Bainbridge Island	23,689	660	2.8%		
Bellevue	139,014	<i>4,</i> 730	3.4%		
Issaquah	35,629	1,686	4.7%		
Kirkland	86,772	3 , 797	4.4%		
Redmond	60,712	2,599	4.3%		
Sammamish	62,877	2,173	3.5%		
King County	2,118,119	<i>77,</i> 340	3.7%		

Note: These estimates are based on both current ACS 5-yr Estimates as well as the 2010 decennial census. The 2010 1-year counts were applied to the current year ACS estimates in order to get an estimate of population under 3. Source: US Census American Community Survey 5-yr Estimates, 2013–2017; US Decennial Census, 2010; BERK, 2019.

- There are estimated to be about 500 children under the age of three living on Mercer Island.
- As a percent of total population, this estimate is lower than in peer cities and in King County as a whole, which may suggest there are less young new families on the island than in other areas.

CHILDCARE

Child Care Resources administers a database of child care providers in King County and their capacity. Exhibit 15 shows the capacity by type of child care provider, as well as the total capacity, and number of children under age five. This data is provided for Mercer Island, peer cities, and King County overall to approximate child care needs on the island.

² https://mipreschoolassociation.org/preschools/

Exhibit 15. Child Care Capacity, 2018

	Child Care	Centers	Family Child Care Homes		Capacity as 9	% of Pop Under 5	
	Number of Centers	Capacity	Number of FCC Providers	Capacity	Total Capacity	Population Under 5	Percent
Mercer Island	7	687	1	9	696	952	73%
Bellevue	69	5,966	67	675	6,641	7,796	85%
Issaquah	22	1,947	13	123	2,070	2,766	75%
Kirkland	21	2,080	50	494	2,574	6,103	42%
Redmond	24	2,923	31	298	3,221	4,232	76%
Sammamish	8	1,039	16	133	1,172	4,102	29%
King County	531	41,290	1,091	10,334	51,624	127,205	41%

Note: Data available for King County, hence the omission of Bainbridge Island. Source: Child Care Resources, 2018; US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

- Mercer Island currently appears to have enough child care capacity to serve 73% of the children under the age of five. Since not all children are served by child care due to one parent staying at home or other child-care arrangements with a family member or nanny, there does not need to be a child care slot for every child under the age of five on the island.
- This capacity is higher than in other peer cities like Kirkland and Sammamish, as well as King County overall, but is less than in peer cities that are also employment centers like Bellevue, Issaquah, and Redmond. Oftentimes, parents will choose child care locations close to their place of work, rather than their home, so the higher capacity in those locations makes sense.

RACE BY AGE

As shown in Exhibit 5, Mercer Island became more diverse between 2012 and 2017. Oftentimes, diversity is more visible in younger generations. Exhibit 16 shows a breakdown of race and ethnicity by age group.

Exhibit 16. Race and Ethnicity by Age Group, 2017

	Population by Age	White	Population	Asian	Population	1	anic/Latino opulation	Black/African American Population		Multiple Race Population	
	Group	#	Percent	#	Percent	#	Percent	#	Percent	#	Percent
0-1 <i>7</i>	5,921	4,160	70%	1,192	20%	242	4%	96	2%	411	7%
18-64	13,935	10,460	75%	2,692	19%	452	3%	260	2%	445	3%
65+	4,912	3,934	80%	799	16%	38	1%	91	2%	51	1%

Note: All races above are non-Hispanic – e.g., White alone, Asian, American Indian/Alaska Native etc. Hispanic/Latino may be of any race. Any races not shown above had extremely low populations in Mercer Island. Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

The population under 18 is more diverse than the other age groups. This age group has a higher percentage of Asian, Hispanic, and Multiple Race individuals.

HOMELESS STUDENTS

Homelessness has a particularly adverse effect on young children. Children who lack a nighttime residence that is fixed, regular, and adequate are considered homeless under the McKinney-Vento Act. This includes children from families sharing housing with others due to loss of housing, economic hardship, or other similar reasons, and those living in shelters, motels, cars, or other places not designed for sleeping. Exhibit 17 presents the numbers of McKinney-Vento qualified students in the Mercer Island School District.

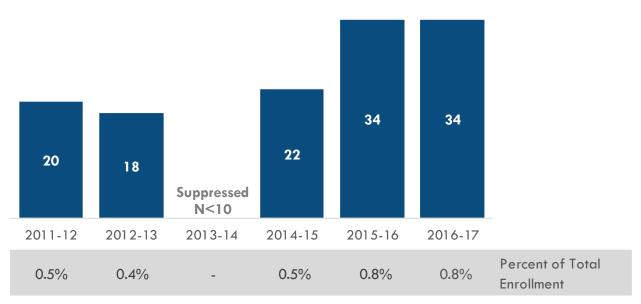


Exhibit 17. McKinney Vento Homelessness in Schools, Mercer Island School District

Note: Includes Pre-Kindergarten through 12th grade Source: OSPI, 2011–2017; BERK, 2019.

- The school district identified a larger number and percent of children as McKinney-Vento eligible in the past few school years.
- In the 2016-2017 school year, the school district identified 0.8% of students as experiencing homelessness as defined under the McKinney Vento Act.

FREE AND REDUCED PRICE LUNCH

One measure of economic hardship is Free and Reduced-price Meal (FARM) enrollment for school-aged children. Eligibility is determined by the US Department of Agriculture's Food and Nutrition Service, based on federal poverty levels.

In Washington, the FARM guidelines are used to determine eligibility for free and reduced price lunch (FRLP). Students from families making below 130% of the federal poverty level (FPL) are eligible for free lunch, and those from families making between 130-185% of the FPL are eligible for reduced-price lunch. The FPL is a measure set by the Department of Health and Human Services and is a metric that is the same for the entire country, except Alaska and Hawaii. The income threshold varies by household size. For a family of four in the 2017 school year, an annual household income of less than \$31,980

qualified for free lunch, and an income of less than \$45,510 qualified for reduced price lunch.³

There are several other ways to qualify for FRPL. Children in foster care and those receiving services under the Runaway and Homeless Youth Act are also eligible for free meals. In addition, households receiving assistance under the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) for their children, Food Distribution Program on Indian Reservations (FDPIR), or with children in Head Start Programs are eligible for free meals.

Exhibit 18 shows enrollment in FRLP for the elementary and middle schools in the Mercer Island School District, representing K-8 students.

4.6% 4.4% 4.0% 3.8% 3.6% 3.3% 3.1% 2.8% 2.6% 1.7% 1.6% 1.3% 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 4.4% 4.0% 3.1% % Free and Reduced Total 1.7% 1.6% 1.3% 2.8% 3.6% 3.8% 4.6% 3.3% 2.6% Students Eligible for FRPL 43 35 75 101 106 129 141 100 123 93 Students Enrolled in MI School District 2,820 2,941 2,972 2,625 2,621 2,671 2,643 2,812 2,907 3,041 3,001 3,059 % Free and Reduced by School Island Park Elementary 2.6% 2.7% 0.6% 3.5% 4.9% 5.1% 7.4% 6.2% 5.0% 5.3% 1.6% 1.0% Lake Ridge Elementary 0.4% 0.5% 0.5% 1.8% 2.8% 2.6% 3.0% 2.9% 2.3% 2.6% 1.0% 0.6% 5.7% Northwood Elementary 5.0%

4.3%

2.8%

5.0%

2.9%

3.4%

4.5%

4.4%

4.9%

2.8%

3.4%

4.3%

4.0%

4.2%

1.9%

4.1%

3.6%

Exhibit 18. Free and Reduced Price Lunch Participation by School, 2006–2017

Note: Mercer Island High School is not included in the OSPI data.

1.9%

2.1%

1.4%

2.6%

1.4%

Source: Office of Superintendent of Public Instruction, Child Nutrition Program Reports, 2006–2017; BERK, 2019.

3.5%

2.8%

The percent of elementary and middle school students eligible for FRPL in the Mercer Island School District increased from a low of 1.3% in 2008 to a high of 4.6% in 2013 and has varied over the last four school years with an average of 3.3%.

WHAT WE HEARD

Food Resources

West Mercer Elementary Islander Middle School

School district representatives have noticed a more acute need for food availability in the schools and attributed it to a recent increase in income diversity on the Island. In response, the elementary schools have expanded their snack pantries which are available to all students.

³ Child nutrition Programs: Income Eligibility Guidelines 2017 School Year https://www.govinfo.gov/content/pkg/FR-2017-04-10/pdf/2017-07043.pdf

Adolescents

Most of the data presented in this section comes from the Healthy Youth Survey (HYS), a statewide survey sponsored by the Department of Health, the Office of Superintendent of Public Instruction, the Department of Social and Health Services, and the State Liquor and Cannabis Board in cooperation with schools throughout the state. The survey is administered to grades 6, 8, 10, and 12. Results are available by school, school district, and statewide.

Mercer Island Public Schools worked with Dr. Suniya Luthar to conduct a high-achieving school survey in the spring of 2019. In the coming years, the district will conduct an annual survey to follow trends in risk behaviors and improvements. Through research starting in 1991, Dr. Luthar found that students from high-achieving schools have higher rates of depression, anxiety, and substance abuse than other students across the country. Dr. Luthar also found that the most important thing for adolescents in high pressure and stressful environments is strong, supportive relationships that help build resilience. Mental health, substance use, and family and community support for students are all explored in this section.

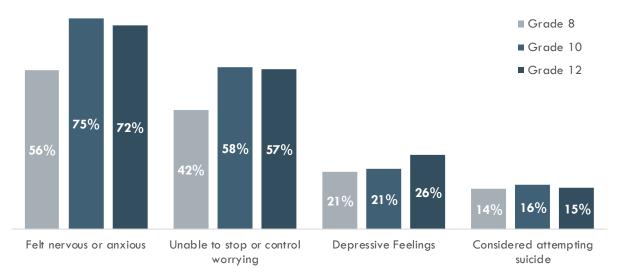
SCHOOL-AGED MENTAL HEALTH AND SUBSTANCE ABUSE

Many factors lead to anxiety, depression, and suicidal thoughts, including pressure to perform well in school, fixation on weight and appearance, and bullying. Untreated anxiety and depression can lead to substance abuse and even suicide. Currently, suicide is the second leading cause of death for Washington teens aged 15 through 19. Professional care for depression and anxiety, treatable mental health conditions, helps most people.

The Healthy Youth Survey asks students in grades 8, 10, and 12 the following questions about anxiety, depressive feelings, and suicide. The results are presented in Exhibit 19.

- In the last two weeks, have you ever been bothered by feeling nervous, anxious, or on edge?
- In the last two weeks, have you ever been not able to stop or control worrying?
- In the last twelve months, were you ever so sad or hopeless that you stopped doing usual activities?
- In the last twelve months, have you seriously considered attempting suicide?

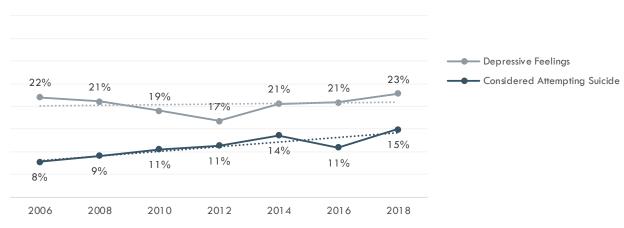
Exhibit 19. Mental Health of Mercer Island Students, 2018



Source: Mercer Island Healthy Youth Survey, 2018; BERK, 2019.

- The number of students experiencing anxiety or feelings of worry increases between middle and high school.
- Almost three-quarters of students in high school (Grades 10 and 12) are experiencing anxiety, while over half are unable to control worrying.
- Over a quarter of students in Grade 12 are likely to experience feelings of depression, more than those in Grade 8 or 10.
- A similar proportion of students are considering suicide in Grades 8, 10, and 12.

Exhibit 20. Average Rates of Depressive Feelings and Suicide Consideration Across Grades 8, 10, and 12 (2006–2018)



Source: Mercer Island Healthy Youth Survey, 2006–2018; BERK, 2019.

 Although the average rate of depressive feelings across students in Grades 8, 10, and 12 has not changed much over the last twelve years, the average rate of students who have considered suicide has increased. According to Healthy Youth Survey fact sheets, parents are the primary influence over a student's decision to use alcohol, tobacco, or other drugs. Many studies have shown that the developing brain of students are more vulnerable to the effects of alcohol and other drugs, like marijuana. Brain development is understood to continue through the mid-20s.

The survey also asks students if they had a glass, can, or bottle of alcohol in the last 30 days, as well as if they had more than five drinks in a row over the last two weeks. The percent of students who used any alcohol over the last 30 days or drank more than five drinks in a row over the last two weeks (binge drinking) are shown by grade in Exhibit 21.

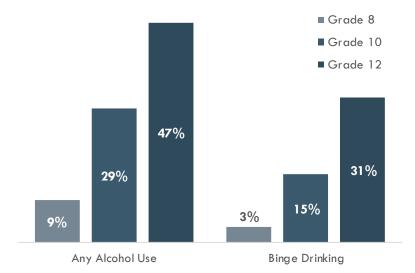


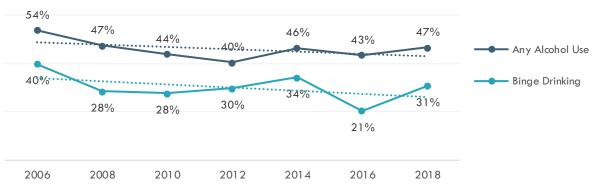
Exhibit 21. Alcohol Use and Binge Drinking by Mercer Island Students, 2018

Source: Mercer Island Healthy Youth Survey, 2018; BERK, 2019.

- Alcohol use is more common than e-cigarette, marijuana, or prescription drug use among all grades on Mercer Island (see Exhibit 23).
- Over a quarter of 10th graders have used alcohol in the last thirty days, and nearly a half of students have had alcohol by the time they are in Grade 12.
- Of the students that drink alcohol in Grades 10 and 12, half or more are binge drinking or drinking more than five drinks in a row.

MIYFS established the Mercer Island Communities that Care (CTC) project in 2005 to address underage alcohol and other drug use. The project was initially funded with a prevention grant from Public Health Seattle and King County (PHSKC) for the years 2005–2007 and was later supplemented with a Drug Free Communities grant awarded in 2007 from the Substance Abuse and Mental Health Services Administration and the Office of National Drug Control Policy. Since then, MIYFS has successfully reduced the rate of alcohol use and binge drinking among 12th graders, as shown in the HYS results in Exhibit 22.

Exhibit 22. Alcohol Use and Binge Drinking by Mercer Island 12th Graders, 2006–2018

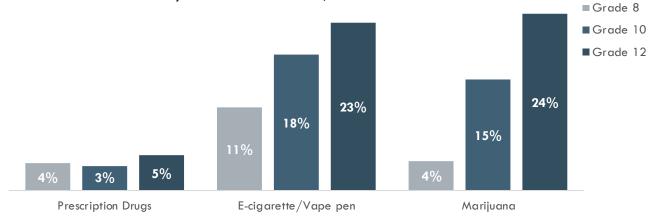


Source: Mercer Island Healthy Youth Survey, 2006-2018; BERK, 2019.

- Grade 12 alcohol use has seen an annual average decline over the last 12 years, despite a couple years of increased alcohol use between 2014 and 2016.
- Grade 12 binge drinking has also seen an annual average decline over the last 12 years after a slight increase between 2010 and 2014.

The HYS asks students if they have used prescription drugs without a prescription, e-cigarettes or vape pens, or marijuana in the last 30 days. The percent of students in each grade reporting use is shown in Exhibit 23.

Exhibit 23. Substance Use by Mercer Island Students, 2018



Source: Mercer Island Healthy Youth Survey, 2018; BERK 2019.

- Prescription drug use without a prescription is low in each grade, with a slight increase in Grade 12.
- E-cigarette and vape pen use is more common in Grade 8 than marijuana use, but in Grades 10 and 12 use of both is similar.
- By Grade 12, almost a quarter of students have used marijuana in the last 30 days.

WHAT WE HEARD

Mental Health in School-aged Children

Interviews with school district representatives, city police, and pediatricians on Mercer Island indicate that mental health is a key issue that has increased in prevalence and incidence both among adolescents and children of younger ages. Anxiety, stress, depression, cutting, and suicidal ideation are frequently seen in middle and elementary school children and in parents.

Interviewees attributed the observed rise in mental health need to anxiety around pressure to succeed, a feeling that children will not be as successful as their parents, and a decrease in stigma around mental health, driving an increase for more mental health services. School representatives also noted that mental health issues are complex, can be comorbid with learning or other disabilities and are often intertwined with family issues – both parental stress and more serious issues requiring police or state intervention through Child Protective Services.

The rise in need is compounded by a lack of providers in the area across the whole mental health continuum – counselors, therapists, psychologists, and psychiatrists.

Providers noted that in addition to a need for capacity and additional providers, family counseling, family stabilization services, comprehensive wraparound services, crisis intervention, and parent education could be effective in treating the issues they see.

There was general agreement that Mercer Island Youth and Family Services could be helpful in providing additional school mental health counselors, especially at the middle school, where the number of counselors per capita decreases dramatically (compared to the elementary schools) at a vulnerable time for students. Parental education and awareness was another area where MIYFS could be successful in leveraging resources.

FAMILY AND COMMUNITY SUPPORT

Family and community support can help youth be more resilient to mental health challenges and are likely to prevent substance abuse. Two protective factors are students' comfort with discussing problems with parents and having adults they can talk to about something important. The percent of students that feel comfortable asking a parent for help with a personal problem or identified adults in their neighborhood or community they could talk to about something important are shown in Exhibit 24.

■ Grade 6 ■ Grade 8 94% 90% 90% 89% **87**% **87**% 86% Grade 10 ■ Grade 12 Data not reported for Grade 6 Family support Community support

Exhibit 24. Family and Community Support Perceptions of Mercer Island Students, 2018

Source: Mercer Island Healthy Youth Survey, 2018; BERK, 2019.

Students on Mercer Island are less comfortable talking to their parents or adults in their neighborhood about personal problems as they get older. In Grade 8, 90% of students are comfortable doing this, while that share drops to around 86-87% by Grade 12.

VICTIMS OF CHILD ABUSE AND NEGLECT

Child Protective Services (CPS), a division of the Washington State Department of Children, Youth, and Families, investigates reports of child abuse or neglect. Child abuse or neglect can include physical abuse, emotional abuse (including exposure to domestic violence), neglect, or sexual abuse. Doctors, nurses, school teachers, social service counselors, psychologists, day care providers, juvenile probation officers, or state employees are required by law to report suspected child abuse or neglect to CPS. Reports of child abuse or neglect may also come from other individuals who believe in good faith that a child is being abused or neglected.

Exhibit 25 shows the number and rate per 1,000 of children living in Mercer Island, age birth to 17, that were identified as victims in reports to CPS that were accepted for further action.

10.6 8.7 7.9 7.7 7.3 6.4 5.9 6.1 5.6 5.7 4.2 3.8 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 4.2 5.9 5.7 3.8 7.7 6.4 7.9 7.3 6.1 5.6 8.7 10.6 Rate per 1,000 33 41 34 31 32 21 42 35 23 44 49 61 Accepted Victims 5,590 5,631 5,604 5,589 5,591 5,544 5,487 5,458 5,543 5,582 5,642 5,769 Persons, birth to 17

Exhibit 25. Victims of Child Abuse and Neglect in Accepted Referrals, Rate per 1,000, 2006-2017

Note: Accepted referrals are reports of child abuse or neglect that meet a sufficiency screen and sent for further action. The number of "accepted victims" can include multiple children identified in a single referral or the same child counted more than once if they are reported as a victim more than once during the year. The children are considered to be residents of Mercer Island based on their residence at the time of the referral.

Source: Washington State Department of Social & Health Services, Mercer Island Community Risk Profile, 2017; BERK, 2019.

- Mercer Island saw an increase in the rate of accepted CPS referrals over the last four years, from 4.2 per 1,000 children to 10.6 per 1,000 children. Nominally, this increase was from 23 referrals in 2014 to 61 in 2017.
- Anecdotally, the Mercer Island Police Department estimates there will be an increased number of Child Protective Service calls in 2019 over previous years.

TECHNOLOGY

Recent studies explored links between adolescent well-being and technology and/or social media use. These studies found correlation, but not causation, between mental well-being and technology use. Mental well-being of adolescents using technology can be affected by disrupted sleep patterns and negatively affected social interactions, interpersonal empathy, and personal identity. Parents on Mercer Island are increasingly looking to MIYFS for help, citing difficulties controlling social media or technology use by their children and negative effects of its use.

The Healthy Youth Survey asks students the following questions about screen time and online bullying.

- On an average school day, how many hours do you play video or computer games, or use a computer for something that is not school work? (Count time spent on things such as Xbox, PlayStation, tablet or smartphone, social media).
- In the past 30 days, how often have you been bullied by someone using social media, a phone, or video games?

The percent of students that spent more than one hour on screen time or who have experienced any bullying are presented in Exhibit 26.

52%

66%

67%

70%

Data not reported for Grade 6

Grade 10

Grade 12

Online Bullying

Exhibit 26. Screen Time (More than 1 Hour) and Online Bullying for Mercer Island Students, 2018

Source: Mercer Island Healthy Youth Survey, 2018; BERK, 2019.

- Screen time increases by grade, with almost half of students reporting they spend more than an hour on non-academic screen time in Grade 8 and almost three quarters of students reporting more than an hour of non-academic screen time by Grade 12.
- Online bullying increases from Grade 8 to Grade 10 but tapers off again by Grade 12.

Young Adults

Most children from affluent communities leave the area after high school to attend college, and either can't afford to move back after college or live with their parents as young adults entering the workforce to save money. Recently several high-profile alumni deaths from suicide and overdose have occurred. Because of this, an increased number of parents are calling MIYFS looking for services for their young adult children.

POPULATION

Exhibit 27. Population Age 20-24, 2017

	2017	Рори	lation 20-24
	Population	#	Percent
Mercer Island	24,768	904	3.6%
Bainbridge Island	23,689	722	3.0%
Bellevue	139,014	6,626	4.8%
Issaquah	35,629	1,433	4.0%
Kirkland	86,772	3,846	4.4%
Redmond	60,712	2,664	4.4%
Sammamish	62,877	2,030	3.2%
King County	2,118,119	132,420	6.3%

Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

- The share of young adults on Mercer Island is slightly lower than most other eastside communities, except Sammamish, making up 3.6% of the population.
- Both Bainbridge Island and Sammamish have fewer young adults, aged 20-24, with 3.0% and 3.2% respectively.

UNEMPLOYMENT

Young adults needing help looking for employment has become a more common request for MIYFS. Exhibit 28 shows the unemployment rate for the population aged 20-24 over the last seven years. One caveat is that the ACS data shows 5-year averages, so many years contain overlapping estimates. For example, the 2017 estimate includes data all the way back to 2013.

2017 Unemployment Rate for 20.0% Population Age 20-24 18.0% 16.0% Issaquah, 15.6% 14.0% Mercer Island, 11.7% 12.0% ■ Bainbridge Island, 11.2% 10.0% 8.0% Redmond, 5.2% 6.0% Sammamish, 4.7% ■ Kirkland, 3.4% 4.0% Bellevue, 2.6% 2.0% King County, 0.8% 0.0% 2010 2011 2012 2013 2014 2015 2016 2017

Exhibit 28. Unemployment Rates, Population Age 20-24, 2010–2017

Note: As the above are statistically scaled estimates based on survey responses, the smaller the geography, or the higher the granularity of the data, the larger the margin of error. For cities like Mercer Island and Bainbridge Island, there is a high margin of error which should be considered when interpreting this data.

Source: US Census American Community Survey 5-yr Estimates, 2008–2017; BERK, 2019.

- Comparing 2012 to 2017, unemployment among 20 to 24-year old young adults on Mercer Island has increased from almost 7% to almost 12%.
- Mercer Island's unemployment rate for 20 to 24-year old young adults is higher than most peer cities, except Issaquah.

SUICIDE

The Centers for Disease Control published a study in the *Journal of Abnormal* Psychology in 2018 based on data from 400,000 young adults aged 18 to 25 from 2008 to 2017. The results show that the percentage of young adults experiencing psychological distress, such as suicidal thoughts or other suicide-related outcomes increased 47% from 2008 to 2017. Young adults reporting symptoms associated with major depression increased 63%. At a national level, there is more data pointing to increased mental health issues among America's young people.

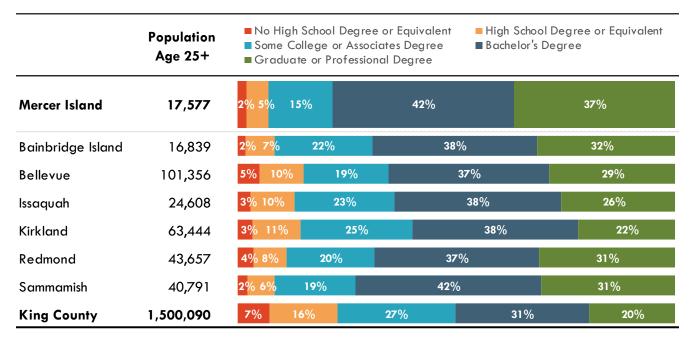
Adult Health

ECONOMIC INDICATORS

Parent educational attainment, particularly the mother's, is positively linked with a child's educational experience, attainment, and achievement. Parents with higher levels of education are more likely to raise children who are prepared to enter school and are more likely to reach higher levels of educational attainment.⁴

Exhibit 29 shows the highest educational attainment for adults aged 25 and older for Mercer Island and the comparison geographies.

Exhibit 29. Adult Educational Attainment, 2017



Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

Of the geographies considered, Mercer Island has the higher percent of adults 25 or older with graduate or professional degrees, at 37%. This is quite high, compared to just 20% for King County overall, and closer to 30% for many of the neighboring cities.

⁴ Aud, S., Fox, M. A., & Kewal-Ramani, A. (2010). Status and Trends in the Education. National Center for Education Statistics.

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MEDIAN HOUSEHOLD INCOME

Median incomes are growing in King County; between 2010 and 2017, the King County median household income increased from \$77,387 to \$83,571.⁵ However, sector booms in select industries, such as technology, have likely raised median incomes without lifting the incomes of middle- and low-income groups.

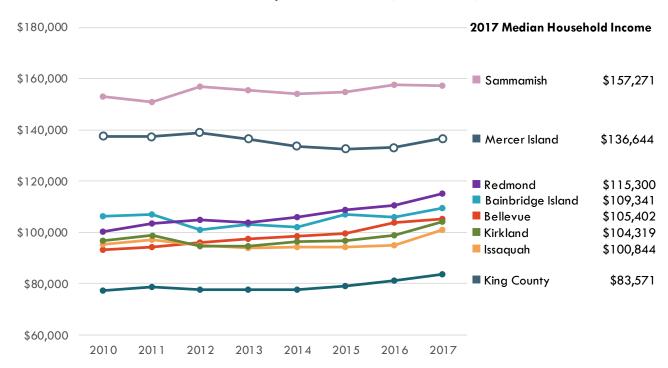


Exhibit 30. Median Household Income, Adjusted for Inflation (2017 Dollars), 2010–2017

Source: US Census American Community Survey 5-yr Estimates, 2006–2017; BERK, 2019.

- The median household income in Mercer Island is relatively high compared to King County averages and is higher than most eastside communities and Bainbridge Island.
- Among the peer cities, Sammamish is the only city that has a higher median income, with a median income about \$20,000 higher than Mercer Island.

⁵ Census Median Income in the Past 12 months 2010 (2006–2010 ACS 5-year estimates) and 2017 (2013–2017 ACS 5-year estimates). Values are adjusted for inflation and presented in 2017 dollars.

POVERTY

Even affluent communities can have individuals experiencing poverty, as is the case on Mercer Island. The Census Bureau defines the federal poverty level (FPL) by size of family. The census defined poverty in 2017, the year of data displayed, is an annual income of less than \$12,488 for an individual and less than \$25,094 for a family of four. The percent of the Mercer Island population meeting this poverty threshold is shown in Exhibit 31.

Exhibit 31. Population in Poverty, 2017

	2017	Populat	tion in Poverty
	Population	#	Percent
Mercer Island	24,618	1,068	4.3%
Bainbridge Island	23,529	1,125	4.8%
Bellevue	138,601	10,218	7.4%
Issaquah	35,350	2 , 541	7.2%
Kirkland	85 , 772	5 , 560	6.5%
Redmond	60,426	3,620	6.0%
Sammamish	62,786	1,538	2.4%
King County	2,089,582	212,509	10.2%

Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

- 4.3% of the population on Mercer Island is considered to be in poverty, with annual incomes meeting the census defined poverty thresholds.
- The share of the population in poverty on Mercer Island is lower than most eastside communities, except Sammamish and is lower than the King County average.

The FPL is primarily used as a measure to qualify for federal subsidy programs. However, the income amounts at 100% of FPL understate what it may take to meet basic needs in a high cost region. Dr. Diana Pearce developed the Self-Sufficiency Standard over 20 years ago as an alternate measure to better communicate the adequate income needed to meet basic needs around the country. The Standard is based on the costs of basic needs for working families: housing, child care, food, health care, transportation, and miscellaneous items, as well as the cost of taxes and impact of tax credits.

As an example, Exhibit 32 shows the monthly income needed to cover monthly expenses for a family of four living in Mercer Island with two children, one in preschool and one in elementary school, and a 75-year-old senior living alone. The income needed to cover basic needs for a family of four (\$83,778) is more than three times the federal poverty level of \$25,094.

Exhibit 32. Self Sufficiency Standard Calculator Examples for Mercer Island

EXAMPLE 1. Monthly Income – 4-person household: 2 adults, 2 child	dren
Monthly wages at \$19.83/hr per adult working 40 hours per week	\$6,982
Annual Self-Sufficiency Wage	\$83,778
Monthly Expenses	
Housing	\$1,966
Child Care	\$1,939
Food	\$893
Transportation	\$234
Health Care	\$469
Miscellaneous	\$550
Taxes	\$1 , 197
Subtotal of Monthly Expenses	\$7,248
Tax Credits	
Earned Income Tax Credit (EITC)	\$0
Child and Dependent Care Credit (CDCC)	\$100
Child Tax Credit (CTC)	\$167
Monthly Tax Credit Subtotal	\$267
Total Monthly Expenses	\$6,982

EXAMPLE 2. Monthly Income — 1-person household: 75-year old adu	lt .
Monthly wages at \$15.93/hr per adult working 40 hours per week	\$2,804
Annual Self-Sufficiency Wage	\$33,647
Monthly Expenses	
Housing	\$1 , 590
Child Care	\$0
Food	\$284
Transportation	\$11 <i>7</i>
Health Care	\$115
Miscellaneous	\$211
Taxes	\$487
Subtotal of Monthly Expenses	\$2,804
Tax Credits	
Earned Income Tax Credit (EITC)	\$0
Child and Dependent Care Credit (CDCC)	\$0
Child Tax Credit (CTC)	\$0
Monthly Tax Credit Subtotal	\$0
Total Monthly Expenses	\$2,804

Source: The Self Sufficiency Calculator for Washington State. Available online at: www.thecalculator.org

EMPLOYMENT

The US economy has recovered from the Great Recession and the unemployment rate has declined in King County over the past five years (Exhibit 33). Because the Bureau of Labor Statistics only provides unemployment rate information at the county level and not at the city level, the unemployment rate data shown in Exhibit 33 is provided by ACS as a five-year estimate of unemployment experienced by those ages 20 to 64 years of age. Because of the nature of the five-year estimates, there are overlapping years shown. For example, the 2017 estimate includes information about unemployment from 2013.

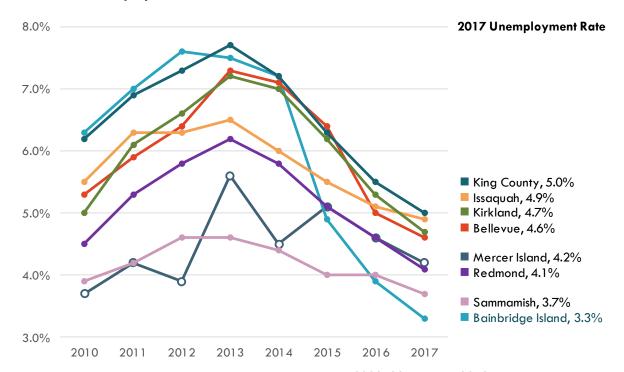
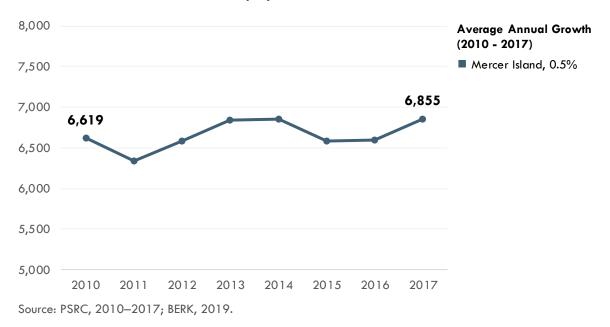


Exhibit 33. Unemployment Rates, 2010-2017

Source: US Census American Community Survey 5-yr Estimates, 2008–2017; BERK, 2019.

- Unemployment rates have declined since 2013.
- Mercer Island's unemployment rate is similar to many peer cities, with 4.2% of those aged 20 to 64 estimated as unemployed and seeking work, and lower than King County's average of 5.0%
- Bainbridge Island, Sammamish, and Redmond are the only peers with lower unemployment rates.

Exhibit 34. Mercer Island Covered Employment, 2010–2017



Puget Sound Regional Council's estimate of covered employment for Mercer Island is steady over the last eight years, with an average annual growth of 0.5% between 2010 and 2017.

BASIC NEEDS

Housing Affordability

Mercer Island has historically high home prices compared to the region. Zillow's home price index for Mercer Island, a median current market valuation for the city, shows strong growth in home prices over the last five years and forecasts continued growth into 2020, as shown below in Exhibit 35.

Exhibit 35. Mercer Island Home Value Index, 2012-2020



- Zillow estimates that the median home value in Mercer Island as of January 2019 was nearly \$1.6 million, up from just under \$900,000 in January of 2014, five years ago.
- Estimated home values have increased 7.3% in the last year, and Zillow forecasts growth to continue at a rate of 4.1% over the next year.

Housing Stock

The breakdown of housing unit types provides insight into the makeup of affordable housing within the community. Exhibit 36 shows this breakdown for Mercer Island for 2010 through 2018.

2018 10,473 2017 10,443 2016 10,223 2015 10,185 ■ Single Family 2014 10,096 Duplexes 2013 9,929 Multi-family (3 or 4 Units) 2012 9,926 ■ Multi-family (5+ Units) 2011 9,933 2010 9,930 0 2,000 4,000 6,000 000,8 10,000 12,000 **Housing Units**

Exhibit 36. Mercer Island Housing Units by Type, 2010-2018

Source: OFM, 2018; BERK, 2019.

- The majority of housing units in Mercer Island are single family homes (71% in 2018), with multifamily (5+ units) comprising just over one quarter of all housing units. Nearly all multi-family units are located on the north end of the island, near I-90.
- In 2018, there were only 14 duplexes and 23 three to four-unit multi-family housing options on Mercer Island.

Stable Housing

The following section draws heavily on data from the US Department of Housing and Urban Development (HUD) Consolidated Housing Affordability Strategy (CHAS) dataset. This dataset is based on US Census ACS five-year estimates and presents a more detailed depiction of various household attributes than available in the ACS data.

Of note, the CHAS data lags behind census data products by a few years, and the most recent year of data available is based on 2011–2015 ACS five-year estimates. This period includes the last bit of the downturn in the housing market and rise in unemployment during and following the last economic recession. Housing costs have increased during the past few years, a fact that should be considered when interpreting cost burden data from HUD.

Housing Tenure

Exhibit 37 shows housing tenure for Mercer Island, peer cities, and all of King County. As shown below, nearly three quarters of Mercer Island households are owner households, with only Bainbridge Island and Sammamish showing higher shares of owner households relative to total households.

Exhibit 37. Housing Tenure, 2015

	All Households	Owner Households	;		Renter Households
Mercer Island	9,585	6,895	72%	28%	2,690
Bainbridge Island	9,475	<i>7</i> ,185	76 %	24%	2,290
Bellevue	54,215	30,290	56%	44%	23,925
Issaquah	14,015	8,520	61%	39%	5,495
Kirkland	35,365	22,575	64%	36%	12,790
Redmond	23,390	12,040	51%	49%	11,350
Sammamish	16,200	14,110	87%	13%	2,090
King County	819,650	470,630	57%	43%	349,020

Source: US Department of Housing and Urban Development, CHAS data, 2011-2015; BERK, 2019.

- 72% of all households in Mercer Island are owners (6,895 households), and 28% are renters (2,690 households). This is higher than many eastside cities, although notably, both Bainbridge Island and Sammanish have higher shares of owner households relative to all households.
- Mercer Island has far higher rates of owner households compared to King County, which is comprised
 of just 57% owner households.

Tenure by Income Level

HUD calculates area median income (AMI) for King County. AMI is defined as the midpoint of a region's income distribution – half of families in a region earn more than the median and half earn less.

In 2015, the latest year the CHAS dataset covers, AMI was \$89,600 for a four-person household. The data in this section is presented relative to HUD AMI. This section groups households based on income categories relative to the county AMI, rather than the Federal Poverty Level. Note that HUD accounts for household size when grouping households into income categories. Conversations with HUD indicate users of this data often use the Very Low-Income category – Under 30% of AMI – interchangeably with the Federal Poverty Level.

HUD Income Levels:

Extremely Low-Income: Under 30% of AMI

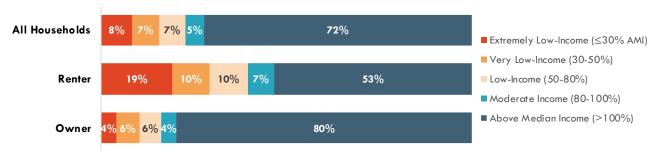
Very Low-Income: 30-50% of AMILow Income: 50-80% of AMI

Moderate Income: 80-100% of AMI

Above Median Income: Over 100% of AMI

Exhibit 38 and Exhibit 39 below summarize housing tenure by income level in Mercer Island and all of King County. Consistent with the data above in Exhibit 37, which shows the high number of owner households in Mercer Island, 72% of all households in Mercer Island have an income above AMI (\$89,600). Compare this to all of King County, where just 53% of all households have income above AMI.

Exhibit 38. Tenure by Income Level - Mercer Island, 2015



Source: US Department of Housing and Urban Development, CHAS data, 2011-2015; BERK, 2019.

Exhibit 39. Tenure by Income Level - King County, 2015



Source: US Department of Housing and Urban Development, CHAS data, 2011-2015; BERK, 2019.

- A higher share of all households in Mercer Island have income above AMI (72%) as compared to King County (53%).
- In Mercer Island, 80% of owner households have income above AMI, whereas only 4% of owner households in Mercer Island have income <30% AMI, or below the FPL.

Household Composition by Income Level

Exhibit 40 shows the household income breakdown by household type, as well as descriptions for the HUD designated household types (household types are mutually exclusive). This data shows high numbers of elderly non-family households living in Mercer Island. Many people in this group are retired, living on a fixed income, and may or may not have additional retirement savings to help cover housing costs. Households of this type and in the lower income categories would also be households likely in need of public/private assistance of some variety.

Exhibit 40. Household Type by Income Level - Mercer Island, 2015

Household Type	Extremely Low-Income (≤30% AMI)	Very Low-Income (30-50% AMI)	Low-Income (50-80% AMI)	Moderate Income (80-100% AMI)	Above Median Income (>100% AMI)	All
Elderly Family	125	175	144	80	1,380	1,904
Elderly Living Alone	300	225	190	85	565	1,365
Large Family	20	0	20	60	605	705
Small Family	125	125	235	130	3,655	4,270
Other	240	150	105	110	730	1,335
Total	810	675	694	465	6,935	9,579

	Household Type Description
Elderly Family	2 persons, either or both age 62 or over
Elderly Living Alone	Age 62+, living alone
Large Family	Families with 5 or more members
Small Family	Families with 2-4 members (excluding elderly families)
Other	Non-family, non-elderly households

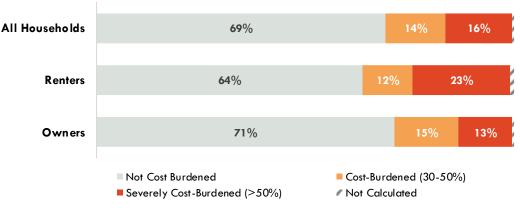
Source: US Department of Housing and Urban Development, CHAS data, 2011-2015; BERK, 2019.

- Just under half of Mercer Island's 9,579 households are in the small family category, which excludes any households with seniors age 62 or older.
- Over one third of Mercer Island households have a senior age 62 or older (34%).

Housing Cost Burden

HUD deems housing to be affordable if a household spends no more than 30% of their gross income on housing costs (rent plus basic utilities or gross monthly owner costs). Households are considered to be cost-burdened if they pay more than 30% of their income towards housing costs. Households paying more than 50% of their income towards housing costs are considered severely cost-burdened, leaving that much less income for other daily living expenses. Exhibit 41 through Exhibit 43 present cost burden data for Mercer Island.

Exhibit 41. Housing Cost Burden by Tenure - Mercer Island, 2015

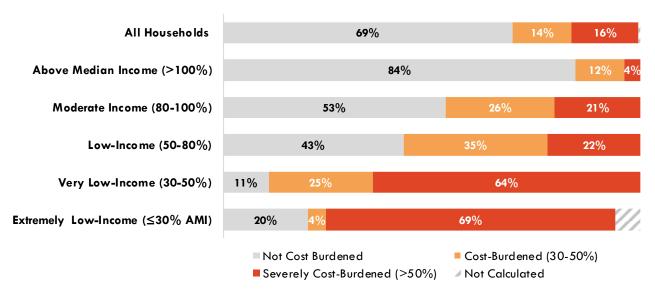


Source: US Department of Housing and Urban Development, CHAS data, 2011-2015; BERK, 2019.

Nearly one third of all households are cost-burdened or severely cost-burdened. HUD does not
calculate cost-burden for households with no income or negative income.

Renter households experience cost burden at slightly higher rates than owner households, with 36% of renter households being cost-burdened or severely cost-burdened. This gap is lower than in many other cities and is indicative of the relatively high rates of affluence among both renter and owner households in Mercer Island.

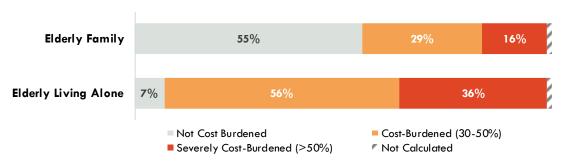
Exhibit 42. Housing Cost Burden by Income Level – Mercer Island, 2015



Source: US Department of Housing and Urban Development, CHAS data, 2011-2015; BERK, 2019.

- Among Extremely Low-Income renter households, over 73% of households are cost-burdened or severely cost-burdened, with nearly 70% severely cost-burdened.
- Among Very Low-Income households, only 11% of households are not cost-burdened, with 64% severely cost-burdened.
- Of households with income above AMI, 16% experience a housing burden.

Exhibit 43. Housing Cost Burden of Elderly Population Age 62 or Above - Mercer Island, 2015



Source: US Department of Housing and Urban Development, CHAS data, 2011-2015; BERK, 2019.

- Nearly all households comprised of a senior age 62 or older living alone are cost-burdened (56%) or severely cost-burdened (36%).
- Family households with a senior family member age 62 or older are far less likely to be costburdened as compared to seniors living alone.

Affordable Housing

King County Housing Authority owns one subsidized housing development on Mercer Island, Island Crest. The development has 30, one to two-bedroom units and is open to families, seniors over the age of 55, and individuals with disabilities. Subsidized housing typically allows residents to pay no more than 30% of their income towards rent and utilities. There is currently a waiting list at Island Crest:

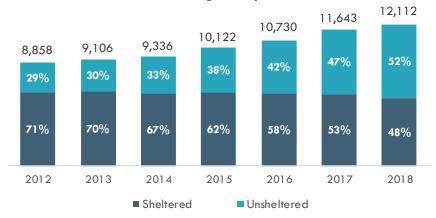
- 135 households are waiting for one-bedroom units (there are 16 one-bedroom units available in the development)
- 44 households are waiting for two-bedroom units (there are 14 two-bedroom units available in the development)

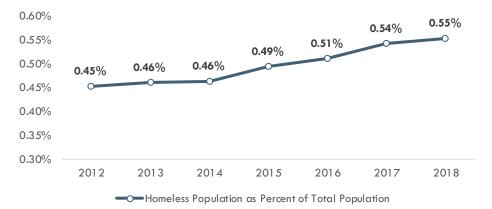
In addition to Island Crest, the Ellsworth House is a 59-unit project-based rental assistance (Section 8) development that provides another low-income rental option on Mercer Island. This property has a project-based Section 8 contract with HUD, and most rents are based on tenant income, with tenants paying up to 30% of their adjusted income towards rent, and a minimum contribution of \$25. To be eligible to live at Ellsworth House you can make up to 80% of the Area Median Income (AMI) -80% of AMI for an individual is \$56,200 and 80% AMI for a family of four is \$80,250.

Homelessness

While there is no reliable homelessness data specific to Mercer Island, we know homelessness in the region is growing. All Home, the Seattle/King County Continuum of Care, conducts an annual point-in-time (PIT) homeless count. The PIT offers a snapshot of the number of people experiencing homelessness in emergency shelters, transitional housing, those sleeping outside and in other places not meant for human habitation. Even with the assistance of homeless providers and advocates, as a non-intrusive, visual enumeration of homeless individuals that occurs on one night, the PIT likely undercounts homeless individuals.

Exhibit 44. Homeless Individuals in King County, 2012–2018





Source: Washington State Department of Commerce & Continuum of Care, 2012-2018; BERK, 2018.

As shown above, homelessness is on the rise, and specifically, unsheltered homelessness. Exhibit 45 attempts to highlight regions of interest to the Mercer Island area. The communities included in the East County region are shown in the sidebar at right.

Exhibit 45. Homeless Point in Time Count by Region, 2017–2018

	Unsheltered		
	2017	2018	
East County	319	393	
All County	5 , 485	6,320	

Source: Washington State Department of Commerce & Continuum of Care, 2012–2018; BERK, 2018.

Homelessness in the East County is also on the rise.

EAST COUNTY COMMUNITIES

- Beaux Arts Village
- Bellevue
- Clyde Hill
- Hunts Point
- Issaquah
- Kirkland
- Medina
- Mercer Island
- Newcastle
- Redmond
- Sammamish
- Yarrow Point

DOMESTIC VIOLENCE

Domestic violence is abusive behavior used by one partner in a relationship to gain or maintain power and control over another partner. It can include physical assault, sexual abuse, and stalking. The Bureau of Justice estimated that every year over one million women and almost 835,000 men are physically assaulted by an intimate partner.

Domestic violence is intimately linked to housing and homeless, and the fear of becoming homeless is a primary reason why domestic violence survivors stay with their abusers. Research shows that the need for and the financial means to maintain safe housing are two of the most pressing needs among women who are leaving or who have left abusive partners.

In addition, economic abuse is a common tactic use by abusers to gain power and control in a relationship; it may include tactics to limit the partner's access to assets or to hide information and accessibility to family finances. Financial abuse is a powerful method of keeping a survivor trapped in an abusive relationship, and research shows that financial abuse occurs in 98% of abusive relationships.

Domestic violence offenses are typically recorded as an aspect of another offense, such as assault or violation of a protective order. For example, 77.3% of violations of no contact/protection orders were domestic violence related statewide in 2017. Domestic violence offenses for Mercer Island are shown in Exhibit 46.

40 Average Annual Growth 35 (2010 - 2017)Mercer Island, 4.7% 30 25 20 15 10 5 0 2013 2014 2015 2016 2017

Exhibit 46. Domestic Violence Offenses on Mercer Island, 2013–2017

Source: WASPC Crime in Washington Reports 2013–2017; BERK, 2019.

Reported domestic violence offenses on Mercer Island ranged from 16 to 30 over the last five years.

VETERANS

Veterans face unique challenges, and often mental health services are essential. Exhibit 47 shows the veteran population living on Mercer Island and in peer communities, as well as what share of veterans are in poverty or have a disability. Exhibit 48 shows the veteran population by date joined. This can help better understand the likely age groups of veterans on Mercer Island.

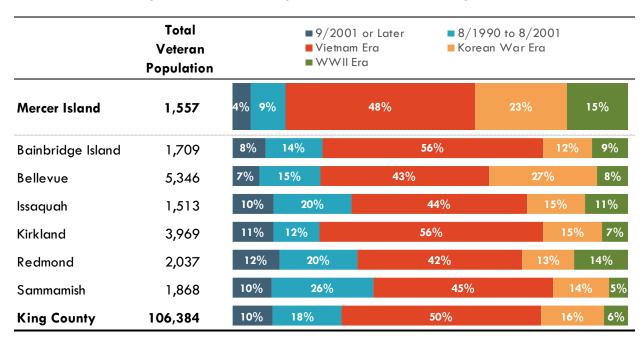
Exhibit 47. Veteran Population Breakdown, Including Veterans in Poverty or with Disabilities, 2017

	Civilian	Veteran Population		Veterans Below Poverty Level		Veterans With Disabilities	
	Population 18+	Count	% of Civilian Population	Count	% of Veteran Population	Count	% of Veteran Population
Mercer Island	18,847	1 , 557	8%	32	2%	486	31%
Bainbridge Island	1 7, 851	1,709	10%	76	4%	362	21%
Bellevue	110,075	5,346	5%	163	3%	1,423	27%
Issaquah	26,481	1,513	6%	96	6%	383	25%
Kirkland	68,980	3,969	6%	91	2%	880	22%
Redmond	47,105	2,037	4%	74	4%	507	25%
Sammamish	43,947	1,868	4%	23	1%	320	17%
King County	1,676,877	106,384	6%	<i>7</i> ,131	7%	26,609	25%

Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

Approximately 8% of the population on Mercer Island are veterans, this percentage is higher than other eastside communities (4-6%) and King County on the whole (6%), but is lower than Bainbridge Island (10%).

Exhibit 48. Veteran Population Breakdown by Date Veteran Joined Military, 2017



Source: US Census American Community Survey 5-yr Estimates, 2013–2017; BERK, 2019.

 Approximately 86% of veterans on Mercer Island joined the military during the Vietnam War or earlier.

Active Aging

Active aging is the process of optimizing opportunities for health, participation, and security to improve the quality of life as people age. This process allows people to continue to participate in society as they age, and involves many aspects of wellness including physical, social, spiritual, vocational, emotional, environmental, and intellectual. As Mercer Island seniors age in their community, it is important they have opportunities to engage with their neighborhood and to access resources that can help them maintain autonomy and independence. The ability to connect to places and other people is an important element of wellbeing for older adults. Access to amenities and social networks can reduce social isolation and improve their ability to remain independent and age in place.

The Aging and Disability Services (ADS) 2016–2019 Area Plan for Seattle-King County surveyed adults between 60 and 74 about their needs and found the top three needs were housing, health and wellness, and transportation. Housing is discussed earlier in the report and transportation is below. Health and wellness is a broad category which can encompass everything from nutrition and exercise to fall prevention, chronic disease management, socialization, and many others. Even when programming is available in a community, costs, cultural and language competency, and transportation can all be barriers to participation.

The Mercer Island Community & Event Center has a wide variety of programming for adults of all ages, including day trips to activities such as arts events or birding in other parts of the region. There is also a senior social program specifically for adults with physical, memory, hearing, or vision limitations, and several programs for those with Parkinson's Disease, in addition to other older adult specific programs.

POPULATION

Exhibit 49. Change in Population Age 65+, 2012 vs 2017

	2012	Popul	ation 65+	2017	Popul	ation 65+	CACD
	Population	#	Percent	Population	#	Percent	CAGR
Mercer Island	22,922	4,699	20.5%	24,768	4,912	19.8%	0.9%
Bainbridge Island	22,933	3,944	17.2%	23,689	5,046	21.3%	5.0%
Bellevue	122,873	16,834	13.7%	139,014	19,630	14.1%	3.1%
Issaquah	30,473	4,053	13.3%	35,629	4,303	12.1%	1.2%
Kirkland	49,090	4,958	10.1%	86,772	11,282	13.0%	17.9%
Redmond	54,389	5,385	9.9%	60,712	6,139	10.1%	2.7%
Sammamish	46,405	2,506	5.4%	62,877	4,694	7.5%	13.4%
King County	1,940,777	213,485	11.0%	2,118,119	263,820	12.5%	4.3%

Note: CAGR is compound annual growth rate.

Source: US Census American Community Survey 5-yr Estimates, 2008-2017; BERK, 2019.

- The population age 65 and older on Mercer Island is about one fifth of the total population. This is similar to the 65+ population on Bainbridge (21.3% in 2017) and higher than in other peer cities (7.5–14.1%) and King County on the whole (12.5%).
- Population age 65 and older represents a smaller share of the total population in peer communities, but peer communities have seen a larger average annual increase in the number of residents age 65 and older than Mercer Island between 2012 and 2017.

Exhibit 50. Change in Population Age 85+, 2012 vs 2017

	2012	Popul	ation 85+	2017	Popul	ation 85+	CAGR
	Population	#	Percent	Population	#	Percent	CAGR
Mercer Island	22,922	963	4.2%	24,768	1,013	4.1%	1.0%
Bainbridge Island	22,933	642	2.8%	23,689	425	1.8%	-7.9%
Bellevue	122,873	2,703	2.2%	139,014	3,126	2.2%	2.9%
Issaquah	30,473	975	3.2%	35,629	846	2.4%	-2.8%
Kirkland	49,090	736	1.5%	86,772	1,365	1.6%	13.1%
Redmond	54,389	1,033	1.9%	60,712	997	1.6%	-0.7%
Sammamish	46,405	186	0.4%	62,877	423	0.7%	17.9%
King County	1 , 940 , 777	32,993	1.7%	2,118,119	37,105	1.8%	2.4%

Note: CAGR is compound annual growth rate.

Source: US Census American Community Survey 5-yr Estimates, 2008–2017; BERK, 2019.

- The population age 85 and older on Mercer Island remained relatively steady from 2012 to 2017, representing about 4.1% of the population in 2017.
- The population age 85 and older on Mercer Island (4.1%) is larger than in other peer communities (0.7-2.4%) and King County overall (1.8%).
- While population age 85 and older in Issaquah, Redmond, and Bainbridge Island decreased between 2012 and 2017, Mercer Island saw a small increase, an average annual rate of 1.0%.
- Both Kirkland and Sammamish saw large increases in their 85+ population when compared to Mercer Island.

HEALTH

Below is a broad overview of health indicators across Mercer Island. In all cases, Mercer Island fares better than King County as a whole. Data reported from Public Health Seattle & King County (PHSKC) is reported by Health Reporting Area (HRA). The Mercer Island HRA also includes the point cities of Clyde Hill, Hunts Point, Medina and Yarrow Point.

Exhibit 51. Chronic Disease Prevalence, 2011–2015

	Mercer Island/ Point Cities	King County
High blood cholesterol	32%	43%
Hypertension	25%	26%
Fair or poor health (adults)	7%	12%
Asthma (adults)	7%	9%
Diabetes prevalence (adults)	5%	7%
Heart attack prevalence	4%	4%
Chronic respiratory disease (adults)	3%	4%
Heart Disease Prevalence	3%	3%
Stroke prevalence	1%	2%

Source: PHSKC, 2011-2015; BERK, 2019.

- Almost a third of Mercer Island and the Point City residents have high blood cholesterol, but this
 incidence is lower than King County overall.
- A quarter of Mercer Island and Point City residents are estimated to have hypertension, almost the same as the prevalence of hypertension countywide (26%).

Exhibit 52. Nutrition and General Health Indicators, 2011–2015

	Mercer Island/ Point Cities	King County
Physical activity recommendation not met (adults)	72%	77%
Flu vaccination: not-vaccinated (adults 18-64)	48%	63%
Flu vaccination: not vaccinated (adults 65+)	22%	37%
Eating less than one fruit daily	24%	35%
Overweight but not obese (adults)	31%	34%
Dental checkup: none in last year (adults)	10%	30%
Pneumonia vaccination: not vaccinated (adults 65+)	17%	26%
Obese (adults)	14%	22%
Eating less than one vegetable daily	5%	17%
Sedentariness (adults)	9%	16%

Source: PHSKC, 2011-2015; BERK, 2019.

- Mercer Island and the Point Cities fare well on general health indicators compared to King County.
- Almost three-quarters of Mercer Island and Point city residents are not meeting physical activity recommendations for adults (72%).
- Almost half of adults aged 18-64 from Mercer Island and the Point Cities do not get vaccinated for the flu (48%).
- Almost half (45%) of adults from Mercer Island and the Point Cities are overweight or obese (31% plus 14%).

Exhibit 53. Substance Use and Firearm Risk Factors, 2011–2015

	Mercer Island/ Point Cities	King County
Firearms Stored in Home	19%	23%
Binge drinking (adults)	13%	20%
Current cigarette smoker (adults)	3%	13%
Marijuana use (adults)	7%	12%

Source: PHSKC, 2011-2015; BERK, 2019.

There is a low incidence of current smokers and marijuana use on Mercer Island and in the Point Cities, compared to King County overall.

Exhibit 54. Mental Health Risk Factors, 2011–2015

	Mercer Island/ Point Cities	King County
Frequent mental distress (adults)	8%	10%
Serious psychological distress (adults)	<suppressed></suppressed>	4%

Source: PHSKC, 2011-2015; BERK, 2019.

 Approximately 8% of adults from Mercer Island and the Point Cities experience frequent mental distress.

Exhibit 55. Leading Causes of Death, 2011–2015

	Mercer Island/ Point Cities	King County
	Rate per 100k	Rate per 100k
Cancer deaths	112.6	142.7
Diabetes-related deaths	27.7	58.1
Alzheimer's disease deaths	29.0	44.4
Breast cancer deaths (females)	21.9	19.6
Diabetes deaths	8.5	18.0
Colorectal cancer deaths	5.5	12.0
Suicide	7.7	11. <i>7</i>
Firearms-related deaths	0.0	<i>7</i> .0
Motor vehicle deaths	2.6	6.0
Homicide	<suppressed></suppressed>	2.8

Source: PHSKC, 2011-2015; BERK, 2019.

The leading cause of death for individuals in Mercer Island and the Point Cities is cancer, followed by Alzheimer's disease and diabetes-related deaths. The rates for each of these causes is lower than King County overall.

Conclusion

Currently, MIYFS serves youth, families, and seniors across the island with a focus on school-based services, youth development and diversion programs, and emergency services for families and seniors. MIYFS also provides cross-community counseling to individuals of all ages. These services are in line with the identified needs. MIYFS is funded by two primary sources: Mercer Island Thrift Shop Revenues and MIYFS Foundation fundraising. These sources together with contracts, service fees, and some limited or one-time funding make up the operating budget. With the 2020 elimination of Youth and Family Services from the City's General Fund, reliance on the two primary sources has the potential for fluctuations in revenues, and ultimately, services.

Secondary data analysis and in-person stakeholder interviews identified several needs across the city that might benefit from continued or increased investment of resources from MIYFS should the fluctuation be positive. These include:

- School Aged Mental Health Services/Youth Well-being (staffing and programmatic resources) increase capacity for mental health promotion, create parenting groups and parent norms, and continue work with Dr. Luthar/2019 HAAS school survey findings, recommendations, and next steps.
 - An additional middle school counselor is a priority.
- High Intensity/Multiple Systems Mental Health Support & Case Management (Wraparound) target increased services to high need families in which one parent is dealing with substance use or mental health issues as they work to raise their children.
- Income Eligible/Emergency & Family Assistance Supports provide funding for hearing aid or denture/dental costs, educational or employment training, one-time annual support for rent, utility, emergency childcare, increase sibling eligibility for preschool funds, move-in or moving costs to income eligible clients.
- Senior Services/Geriatric Community Outreach & Organizer explore new areas for senior citizen programming and assist in strengthening existing programs.

If fluctuations were negative and reductions were needed, MIYFS would likely implement one or more of the following actions and reevaluate needs if further cuts were needed:

- Eliminate mental health counselor(s) in the elementary schools
- Reduce services to seniors (1.0 FTE to .5), refer mental health service request to outpatient counseling (nonspecialized and subject to wait list)