## SECTION 3

## **Human and Social Wellness**

#### INTRODUCTION

The objective of the human and social wellness assessment is to identify priority social and health needs and opportunities to reduce barriers to services. We first discuss social determinants of health and the populations most susceptible to poor health in Tacoma. Then, we discuss the unique wellness and health challenges faced by the two most vulnerable populations in Tacoma, senior citizens and children.

#### GUIDING DOCUMENTS

#### **TACOMA 2025**

Human and social wellness is addressed in two objectives:

## Objective 1: Health and Safety

**Community Priorities** 

- 1A. Improve neighborhood safety. Tacoma residents want to feel safe. This means that the rate of crime falls and people feel secure in their neighborhoods.
- 1C. Improve overall health. Tacoma residents value an integrated system of wellness programs and health care as a means of supporting community health and wellbeing.

#### **Accountability Measures**

- Increase residents' feeling of safety.
- Improve self-reported health status among residents.

#### Objective 2: Human and Social Needs

**Community Priorities** 

2B. Improve services to youth and vulnerable populations. Tacoma cherishes its youth and other vulnerable residents; providing services to them is a priority.

#### **Accountability Measures**

Decrease unmet need for mental health services.

#### 2015-19 CITY OF TACOMA HUMAN SERVICES STRATEGIC PLAN

Childhood Risk and Crime is addressed in the Tacoma Human Services Strategic Plan, Priority 2: Prepare Children and Youth for Success. The objective to ensure children and youth receive the support they need to be successful in school and to be prepared for self-sufficiency and success in life, is supported by goals that address individuals who experience Adverse Childhood Experiences (Childhood Risk) and those susceptible to gang involvement (Gang Prevention and Intervention).

- Children, Youth, and Family Development: Parents/caregivers have the skills to provide quality environments for children and/or have the skills to recognize, intervene in, and reduce the effects of negative childhood experiences and trauma.
- Gang Prevention and Intervention: Gang prevention, intervention and/or suppression services are available in Tacoma neighbor-hoods that are disproportionately impacted by gang crime.

Early drug use is addressed in the Tacoma Human Services Strategic Plan, Priority 4: Enhance Mental Health/Substance Use Disorder Services.

#### **Programs Targeted to Help Youth**

- Increase support for Tacoma Public Schools' elementary students struggling with mental health and/or substance use disorders.
- Expand prevention and early intervention for youth struggling with mental health and/or substance use disorders.
- Support innovative programming designed to strengthen the family unit where youth are identified to have a mental health and/or substance use disorder.

#### **Community-based Care**

- Programs focus on addressing the unmet needs of at risk/vulnerable populations struggling with mental health and/or substance use disorders.
- Meet the needs of Tacoma citizens struggling with co-occurring disorders (mental illness and substance use) and/or dually diagnosed (co-occurring intellectual and developmental disabilities (IDD) and a mental illness).

# **Findings**

#### SOCIAL DETERMINANTS OF HEALTH

The Tacoma - Pierce County Health Department recently published a health-equity assessment to determine whether there are racial and neighborhood disparities in health (Tacoma - Pierce County Health Department, February 2016). The analysis supports other studies that demonstrate social, economic, and environmental factors make the largest contributions to whether or not a person is likely to be healthy.

- In Pierce County, people living in communities with more than 20% poverty are 16 times as likely to die before the age 75 compared to people living in communities with less than 10% poverty.
- Access to economic means and self-sufficiency is a primary concern among community health partners.
- Access to health care is a concern for many Pierce County residents. In 2011, 20.1% of Pierce County adults reported there was a time in the past year when they could not afford to see a doctor.
- Access to health insurance is one limiting factor, though many with health insurance still face cost barriers to quality health care due to co-pays, deductibles, and lack of coverage for certain services.
- Long-term disparities in opportunity and structural racism create significant disparities in health outcomes for communities of color. In Pierce County, communities with a higher percentage of people of color (20% or more) are significantly less likely to live to 77 years than communities with a lower percentage of people of color (10% or less nonwhite).

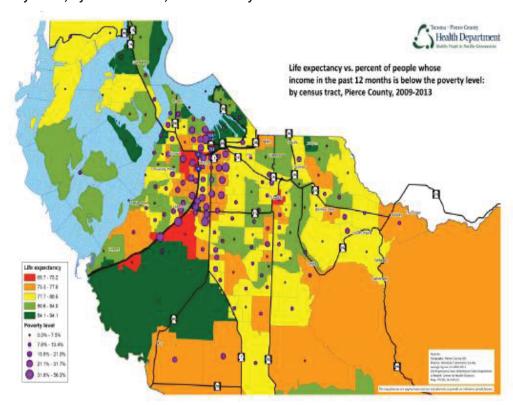


Exhibit 63 Life expectancy vs. Percent of People Whose income in the past 12 months is below the Poverty Level, by Census Tract, Pierce County

Source: Tacoma - Pierce County Health Department, 2009-2013. Graphic reproduced from (Tacoma - Pierce County Health Department, February 2016).

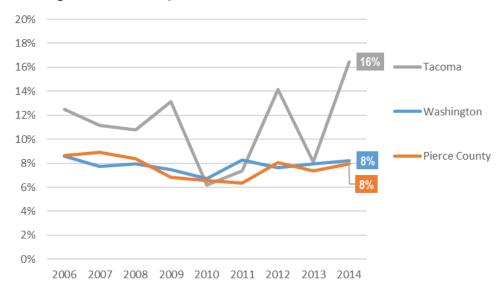
#### Seniors

While Tacoma's children are more likely to be living in poverty than Tacoma's seniors, seniors in Tacoma are twice as likely to live under the poverty line than their peers across the County and State.

Tacoma has more than 25,000 older adults aged 65 and older, of which about 16.5 % live in poverty (more than 4,000 individuals). Older adults living poverty are at a higher risk for homelessness, poor access to health care, and poor mental health. National trends in the aging population indicate future growth in seniors living in poverty with poor health. Food bank utilization among seniors has been increasing over the past 5 years in Tacoma, indicating increased economic hardship for some seniors.

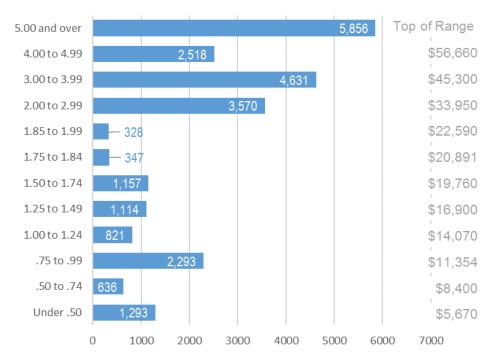
- A greater percentage of seniors live under the poverty line in Tacoma than the State and County rate.
- An increase in older adults living in poverty is expected through 2031 due to the aging boomer generation coupled with less financial security.

Exhibit 64 Ratio to Federal Poverty Threshold, Less than 1, Ages 65 and older, Washington, Pierce County, and Tacoma



Source: US Census American Community Survey, 2006-14; BERK, 2016.

Exhibit 65 Ratio to Federal Poverty Threshold, Ages 65 and older not living in group quarters, Tacoma



Source: US Census American Community Survey, 2014; BERK, 2016.

Exhibit 65 presents the number of individuals ages 65 and older by the ratio of income to the federal poverty line. The federal poverty line is equivalent to 1.00, or approximately \$14,070 for a single person over the age of 65. Approximate 2,000 seniors have below 75% of the poverty line, approximately \$8,400. These seniors are likely challenged to meet their basic needs.

#### **FOOD SECURITY**

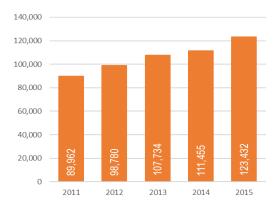
Access to nutrition is a challenge to older adults living in poverty. A first indicator of difficulty in meeting one's basic needs is use of emergency food services such as foodbanks.

- Visits to Tacoma food banks and meal sites by residents 55 years and older has increased by 16% since 2011 (EFoodNet, 2016), while visits among younger clients have slightly declined or remained fairly consistent during the same time period.
- More seniors have been visiting sites located in the greater Pierce County as well, with a large year over year increase in senior use of foodbanks.

Exhibit 66 Visits to Tacoma food banks/meal sites, Clients 55 years and older



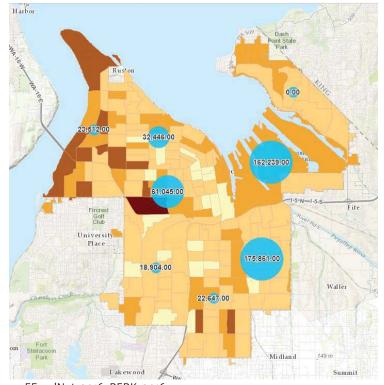
**Exhibit 67 Visits to Pierce County food** banks/meal sites, Clients 55 years and older



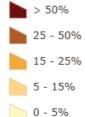
Source: EfoodNet, 2011-15. BERK, 2016.

Source: EfoodNet, 2011-15. BERK, 2016.

Exhibit 68 Concentration of Seniors and Visits to food banks/meal sites by Clients 55 years and older



Percent Population 65 Years Old and Over



Source: EFoodNet, 2016. BERK, 2016.

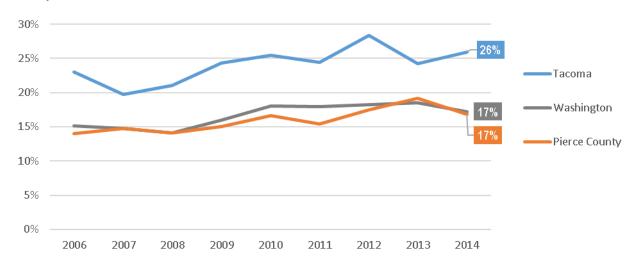
#### CHILDHOOD POVERTY

Children in Tacoma are more impoverished than older age groups within Tacoma as well as their peers across the County and State. A greater portion of Tacoma students report drug use than their peers statewide in the Health Youth Survey. Safety risks that are unique to children include experiencing Adverse Childhood Experiences (ACEs), being victim to commercial sexual exploitation, and security at school.

Childhood poverty is the greatest single risk factor to children, impacting everything from physical health, environmental quality, economic opportunity, and emotional and social health.

Childhood poverty has trended higher in Tacoma than Pierce County and Washington State since 2006.

Exhibit 69 Ratio to Federal Poverty Threshold, Less than 1, Under 17 years old, Washington, Pierce County, and Tacoma



Source: US Census American Community Survey, 2006-14; BERK, 2016.

Approximately 11,491 children in Tacoma are living in poverty, representing 1 in 4 children (ages 0 -17). Childhood poverty increased from 24% in 2013 to 26% in 2014. Childhood poverty is consistently higher than adult or senior poverty (see Exhibit 25). See Section 1 for discussion of childhood poverty in Tacoma.

#### Early Drug Use

Early drug use represents multiple dimensions of risk to youth. Exposure to alcohol and drugs interferes with memory, positive emotional and social development, and is associated with low school performance and academic disengagement. Early drug use is also an indicator of vulnerability to gang activity.

Tacoma youth report higher rates of marijuana use than similar aged children across Washington.

See discussion in **Section 1** for patterns of early drug use.

#### SAFETY AND SECURITY

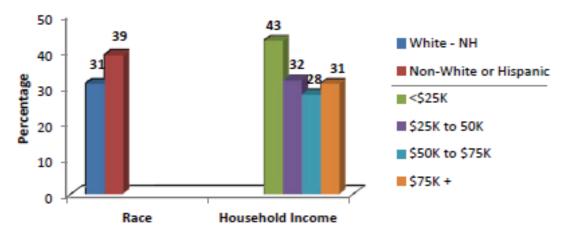
Traumatic experiences in childhood negatively impact health and well-being into adulthood. Communities with higher ACE scores are more likely to experience poor health outcomes. Communities of color and lowincome communities suffer from more ACEs.

Living in poverty is a risk factor for increased exposure to trauma in childhood. A greater percentage of youth 17 years and under live under the poverty line in Tacoma than the State and County rate.

#### **Exhibit 70 Prevalence of ACEs, Pierce County Adults**

Chart excerpted from Youth Health in Pierce County Equity Health Assessment

#### Percentage of people with ACE score of at least 3



Source: Tacoma-Pierce County Health Department, 2011-2013. Graphic excerpted from (Tacoma - Pierce County Health Department, February 2016)

## Excepted from "Fairness Across Places? Your Health in Pierce County, 2015 Health Equity Assessment" by Tacoma-Pierce County Health Department

Kaiser Permanente and the Centers for Disease Control and Prevention (CDC) interviewed more than 17,000 people between 1995 and 1997 to study the effects of childhood trauma on long-term health outcome. They defined an adverse childhood experience (ACE) as a traumatic experience in a person's life occurring before the age of 18 that the person recalls as an adult.

- Physical abuse.
- Witnessing a mother being abused.
- A family member addicted to alcohol or another substance.
- Losing a parent to separation, divorce, or other reason.
- Verbal abuse.

- Sexual abuse.
- A family member who is in prison.
- Physical neglect.
- A family member who is depressed or diagnosed with mental illness.
- Emotional neglect.

The Kaiser Permanente study found that adults with higher ACE scores have an increase in risk taking behavior and health problems. People who have an ACE score of four are seven times more likely to be alcoholic, and 12 times more likely to commit suicide. In addition to these issues, studies have shown that exposure to multiple risk factors is associated with higher rates of tobacco use, illicit drug use, sexually transmitted diseases, obesity, diabetes, heart disease, stroke, lung disease, gastrointestinal disorders, and cancer. People with an ACE score of six or more are at risk of their lifespan shortened by 20 years.

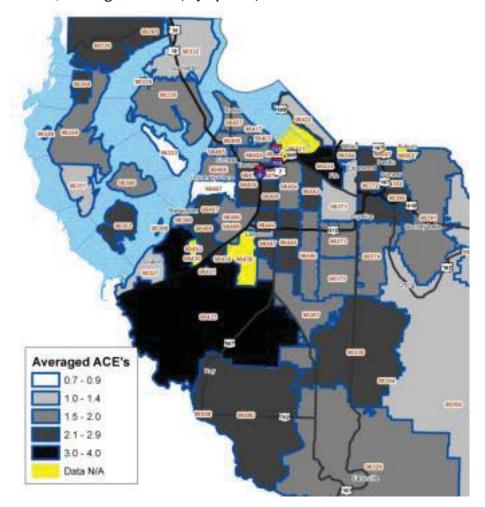


Exhibit 71 Average ACE score, by zip code, Tacoma Area

Source: Tacoma-Pierce County Health Department, 2016.

## PERSONAL SAFETY

Tacoma students are less likely to report feeling safe at school than their peers in Washington State. When students do not feel safe, it compromises learning, teaching, and healthy development.

- 34% of sixth grade students report they were bullied at school in the past month, higher than the statewide rate of 30.9%. The rate decreases with advancement to upper grades, which is consistent with state patterns.
- Students who report they do not feel safe at school peaks in 8<sup>th</sup> grade at 23%. Lower rates in 10<sup>th</sup> grade and 12<sup>th</sup> grade may be explained by attrition from school rather than a change in student experience.
  - Not feeling safe at school hinders academic engagement and school participation. In both 8<sup>th</sup> and 10<sup>th</sup> grades, 11% of students report missing school because they did not feel safe. The state wide rate is 8.5%.

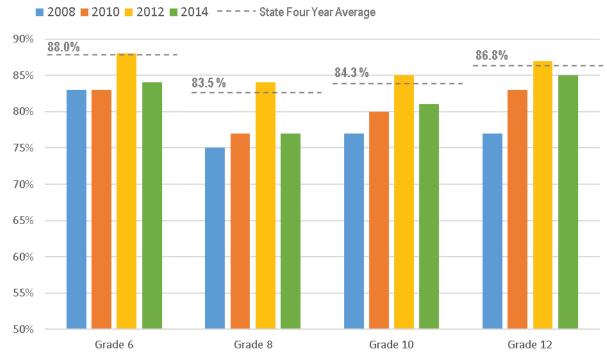


Exhibit 72 Percent of Tacoma Students who Report they Feel Safe at School

Source: Department of Health, Tacoma School District, 2008-2014. BERK, 2016.

#### **Commercially Exploited Children**

Commercial sexual exploitation occurs when individuals buy, trade, or sell sexual acts with children. According to a report published in 2012 by the Center for Children and Youth Justice, the greatest number of commercially sexually exploited children in the State are concentrated in large metropolitan areas, including Tacoma, Seattle and Everett.

Risk factors for sexual exploitation of children are:

- A history of emotional, physical, or sexual abuse
- Parental alcohol and substance abuse
- Exposure to domestic violence
- School-related problems, such as truancy and learning disabilities

- **History of exploitation** in the community or family
- Lack of supervision, care, and basic necessities like food, clothing, and shelter
- Sexual abuse is a particularly common characteristic among female victims
- History of welfare agency involvement, including child protective services (CPS) investigation and foster care placement

Youth who experience sexual abuse are 28x more likely to be arrested for prostitution at some point in their life than children who did not.

#### **CRIME**

Between 2014-2016, the majority of crimes committed in the City of Tacoma were property related, including burglary, breaking and entering, destruction/damage/vandalism of property, theft from a motor vehicle, or shoplifting.

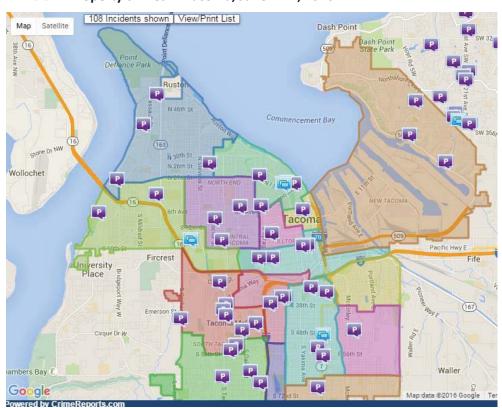
Since 2014, the monthly average of property crime has increased by 13% and incidents of personal crime, fraud, and violations (including weapon law violations and violations of no contact/protection order) have decreased.

Exhibit 73 Monthly average of crime incidents in the City of Tacoma, By type of crime

Type of crime	2014	2015	2016
Property	1088	1170	1238
Personal	173	161	152
Fraud	85	80	62
Violation	19	19	16
Drug	11	9	12

Source: City of Tacoma, 2014-2016. BERK, 2016.

Exhibit 74 Property crimes in Tacoma, June 1-14, 2016



Source: City of Tacoma, Crime Reports, 2016.