



**LYNNWOOD**  
WASHINGTON

*A great deal more*

# **2024 Human Services Needs Assessment**

Prepared by Koné Consulting for the City of Lynnwood  
July 2024

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## Executive Summary

This report is an update to the 2016-2018 Lynnwood Human Services Needs Assessment. The purpose of the report is to provide new data on the current state of human services, identify best practices from similar municipalities, determine needs and barriers to accessing human services, and recommend strategies to address the current needs. The findings in this report are based on analysis of publicly available data – including American Community Survey (ACS) data, Department of Social and Health Services (DSHS) data, reports from local human service providers, and needs assessments from similar municipalities – and original data collected through interviews with local community-based organizations and other key stakeholders.

### Lynnwood Community Profile

Key findings and demographics from the analysis of ACS data shows that Lynnwood continues to grow and become more diverse.

- 40% of residents are white and non-Hispanic
- 19% are under the age of 18
- 17% are age 65 and older
- 12% of residents over age 25 have no high school diploma
- 38% of residents speak a language other than English at home
- 80% of residents aged 65 and older who speak Spanish, Indo-European, and Asian languages at home can speak English “less than very well”

Additionally, DSHS data shows that the majority of services received were economic (84%), followed by aging and long-term support services (10%). In terms of economic services, the Basic Food program (SNAP) accounted for 77% of the economic services provided in Lynnwood. Child support services made up 35% of the economic services, while family assistance (TANF) accounted for an additional 7%. Aging and Long-term Support Services accounted for 10% of all services, making it the largest category after economic services.

### Best Practices

**Regional collaboration** was identified as a best practice through the analysis of needs assessments from similar municipalities. Many human services needs bleed over between communities, necessitating a collaborative, regional approach to addressing these problems. Similar municipalities in the region have proposed or implemented collaborative solutions to address regional human service needs. Examples include the King County Regional Homelessness Authority (KCRHA), North King County Coalition on Homelessness (NKCCH), North Urban Human Services Alliance (NUHSA), Regional Crisis Response Agency (RCR), and Human Services Funding Collaborative (HSFC).

**Person-centered approaches to housing and homelessness** are also being pursued by several municipalities in Northwestern Washington. Approaches include the City of Issaquah’s Behavioral Health and Homeless Outreach Program, the Community Court program, and the City of Bellevue’s Safe Parking Pilot program.

## Interview Findings

Several themes and subthemes emerged from interviews with local human service providers and other key stakeholders. The needs and barriers that were identified in the interviews are outlined below.

- The **cost of services** and **transportation** are barriers to accessing human services
- **Affordable housing, rental and legal assistance**, and **shelter services for people who are unhoused** are needed in the community
- The need for **food assistance and other basic needs** have been increasing in recent years
- There is a need to **improve mental and behavioral health support**
- There is a lack of **cultural support and community connection**
- There is an opportunity to improve **awareness and outreach**
- There is a need to improve **collaboration and communication** between organizations and between organizations and City staff

In addition to sharing human service priority areas in the community, interviewees also shared positive experiences and success stories. Many providers commented on positive interactions with other community-based organizations, and emphasized the importance of Lynnwood’s human services coordinator position.

## Recommendations

Three key recommendations were identified, which reflect a compilation of priorities identified by the community in interviews and the Lynnwood Human Services Commission, best practices from comparable cities, and the expertise of the consulting team. The prioritization of recommendations is based on their strength in meeting the identified needs and their feasibility to implement.

- 1. Improve awareness of services and outreach to the potentially eligible**
  - a. Manage, maintain, and promote the Lynnwood-specific resource guide
- 2. Continue to address the affordable housing and homelessness crisis**
  - a. Strengthen Lynnwood’s tenant protection laws
  - b. Increase housing program options for the unhoused and housing insecure
- 3. Strengthen regional service delivery collaboration and coordination**
  - a. Test innovative solutions regionally
  - b. Replace the embedded social worker position that served as 911 diversion
  - c. Sustain the Lynnwood human services coordinator position

## Project Overview and Methodology

The City of Lynnwood partnered with Koné Consulting to update the 2016-2018 Lynnwood Human Services Needs Assessment to reflect the current state of human services and possible impacts from the COVID-19 pandemic. This report assesses the current needs and challenges facing Lynnwood residents, identifies trends and priority areas, and recommends strategies to improve human services outcomes. These findings are based on analysis of publicly available data and original data gathered through interviews with local community-based organizations (CBOs).

## Review of Existing Data

The following data sources were reviewed to obtain a comprehensive understanding of human services, trends, and priority areas in Lynnwood and Snohomish County.

- Verdant Health Commission Community Health Needs Assessment (2022)
- Snohomish County Community Health Needs Assessment (2022)
- City of Lynnwood Community Equity Survey and Final Report (2021)
- City of Lynnwood Human Services Commission Report (2020)
- 2016-2018 Lynnwood Human Services Needs Assessment
- City of Lynnwood 2022-2026 Strategic Plan
- City of Lynnwood ACS data
- DSHS data for Lynnwood zip codes

## Review of Needs Assessments from Similar Municipalities

Extant data analysis includes a review of needs assessments from similar municipalities that were conducted within the last four years. Criteria for similar municipalities included population size, demographics, and location. The following municipalities were selected: Shoreline, Washington; Monroe/Sky Valley, Washington; Issaquah, Washington; Redmond, Washington; Bothell, Washington; and Longmont, Colorado. The consultant team analyzed and compared assessments to identify key human services issues, common themes, approaches, and best practices from cities similar to Lynnwood.

## Key Stakeholder Interviews

The consultant team interviewed local service providers to develop a comprehensive understanding of Lynnwood's human services landscape. A total of 19 virtual interviews were conducted with human service providers serving Lynnwood residents. The interviews gathered a variety of perspectives on the current state of services, identified unmet needs and barriers to accessing services, and collected insights into possible trends and priority areas.

### Community-Based Organizations Interviewed:

- YWCA
- Lynnwood Library
- Homage Senior Center
- South County Fire Department
- Community Health Center
- Latino Educational Training Institute (LETI)
- Jean Kim Foundation
- Lynnwood Food Bank
- Verdant Health Commission
- Heroes Café
- Snohomish County Housing Authority,
- Washington Kids in Transition
- Mercy Watch
- Project Girl
- Volunteers of America
- Lahai Health
- Edmonds College Food Pantry
- City of Lynnwood Council
- Development and Business Services

A lead interviewer and notetaker conducted all interviews. Interviews were semi-structured: interviewers asked pre-written questions but were given the flexibility to explore emergent topics and ask follow-up questions. Notetakers recorded detailed, written notes during each interview.

### Interview Questions:

1. Please tell us a little more about what your organization does, and your role.
2. Do you serve the entire Lynnwood geographic area? or King/Snohomish Counties? How many people do you serve that live in Lynnwood?
3. Are there specific community groups that you focus services on?
4. Have you been awarded grant funds from the City of Lynnwood in the past? If yes, what has your experience been with the process? What should the City do differently?
5. The 2016-2018 Lynnwood Needs Assessment identified the following key issues: Basic Needs (Shelter, Food, Clothing); Homelessness; Substance Abuse; Mental Health; and Support for Veterans. What do you think of these human services priorities for Lynnwood residents? Have needs shifted over time? Is there anything missing from this list?
6. As you think about your services in Lynnwood or for Lynnwood residents, are you seeing any unmet needs or a crisis? Are there any social identity groups who are unable to access services? How do you believe these gaps could be addressed or resolved?
7. Do you know the extent to which eligible people in Lynnwood are aware of the services they need? What suggestions do you have?
8. Do you know the extent to which eligible people in Lynnwood receive the services they need? What suggestions do you have?
9. We are seeking existing data about the Lynnwood community. Do you have, or are you aware of, existing reports or data sources that could help us better understand human services in Lynnwood?
10. Whom else would you recommend we interview as an important stakeholder?
11. Is there anything else you'd like us to know about the human services needs in the community?

## Data Limitations

While the findings in this report are sound because they are based on a mix of quantitative data already available in the community and qualitative data from interviews with community stakeholders, there are limitations to the conclusion that can be drawn from the data. First, the only original data gathered by the consulting team was through stakeholder interviews. Because of cost limitations, the scope of work for data collection did not include other types of community engagement like listening sessions, focus groups with people with lived experience, and/or a community survey. The Recommendations section suggests follow-up data collection activities to fill these gaps.

Second, a limited number of peer municipality assessments are available to the public, limiting the scope of the review. Many peer municipalities conducted their most recent assessments prior to the COVID-19 pandemic; these assessments' findings are not reflective of current conditions and could not be used. This exempted many cities along the expanding Light Rail Line (Tukwila, Seatac, Burien, White Center, etc.). The consulting team did, however, review and analyze six peer municipality reports as planned. Furthermore, the consulting team's experience conducting prior needs assessments in South King County were integrated into the final report and recommendations.

Finally, there are limitations to the DSHS data on program participation. First, the participation data undercounts the actual need in a community because participation rates are less than 100% of the eligible population in need. In some programs, participation rates can be as low as 50-60% because of the difficulty applying for and keeping benefits, the restrictive eligibility rules, or the availability of funding. Second, many people qualify for more than one DSHS program. In order to remove duplicate counts of service recipients, DSHS applies a hierarchy of program participation to its data. For example, if an individual is receiving food assistance benefits AND Medicaid (a common combination), they are only counted once, leading to an undercount in the program lower on the hierarchy. However, that also means the total number of participants in each subcategory, and the grand totals, are accurate and reliable counts based on data taken directly from state eligibility systems.

## Lynnwood Community Profile

### Key Demographics

- **40%** of residents are white and non-Hispanic
- **19%** are under the age of 18
- **17%** are age 65 and older
- **12%** of residents over age 25 have no high school diploma
- **38%** of residents speak a language other than English at home
- **80%** of residents aged 65 and older who speak Spanish, Indo-European, and Asian languages at home can speak English "less than very well"

## Age

The median age of Lynnwood residents is roughly 39 years old, only somewhat older than the state median age of 38.

- 19% are under the age of 18
- 17% are age 65 and older

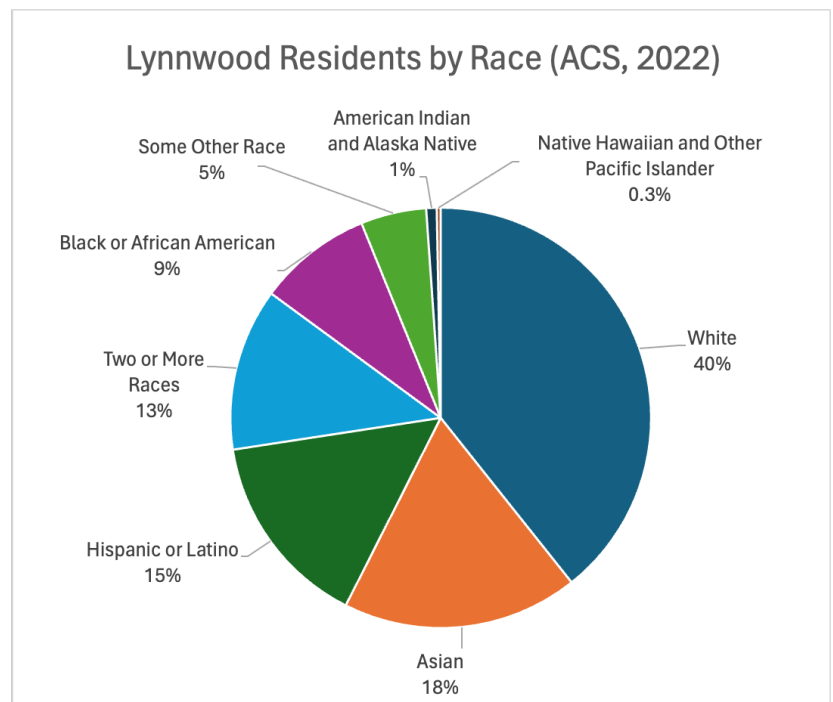
## Gender

- 51% Female
  - 61% of residents over 65 are female
- 49% male

## Race

Lynnwood is racially and ethnically diverse, with some racial minority groups being roughly double that of the state averages. For example, 8.7% of Lynnwood's population is Black or African American, compared to 4% in Washington state, and 18% is Asian, compared to 9.8% statewide. The two groups underrepresented in Lynnwood compared to the rest of the state are American Indian and Alaska Native, and Native Hawaiian.

- The largest racial group in the population is white individuals, comprising 55% of the total population. However, 15% of this group are Hispanic or Latino, making the non-Hispanic white population effectively 40%.
- The next largest racial group is Asian, accounting for 18% of the population. Within the Asian group, the largest sub-population is categorized as 'other Asian,' followed by Korean, Filipino, Vietnamese, and Asian Indian.
- The category “Two or more races” is the fourth largest and the majority are “white and some other race” and “white and Asian”.



## Language

Among Lynnwood residents, 38% speak a language other than English at home. These languages include Asian and Pacific Island languages (13.8%), Spanish (10.6%), other Indo-European languages (8%), and



other unspecified languages (5.8%). While most languages have a fairly even age distribution, ACS data suggests that speakers of Asian and Pacific Island languages are likely to be older residents. Given the small population of Native Hawaiians and other Pacific Islanders and the higher population of Asian residents in Lynnwood, these are most likely Asian languages. About 80% of adults aged 65 and older who speak Spanish, Indo-European, and Asian languages at home can speak English “less than very well,” indicating a need for translation services when working with the older adult population.

## Education

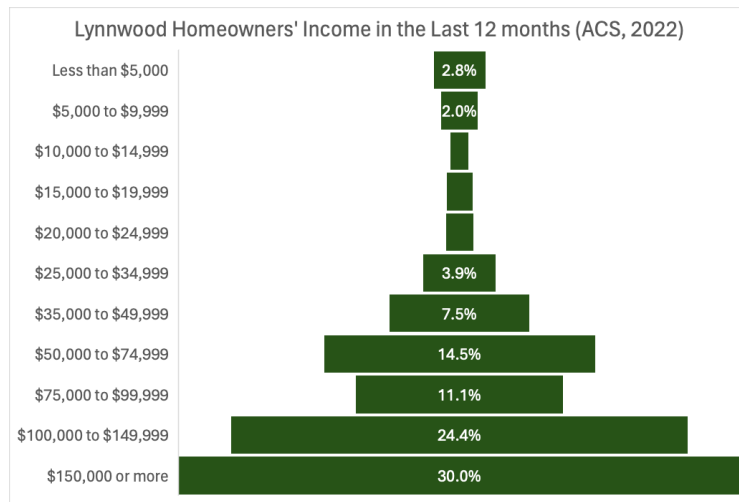
Residents of Lynnwood tend to be less educated than the Washington state average: 12% of residents over 25 have no high school diploma, compared to 7.8% across the state. Additionally, individuals without a high school diploma are more likely to be in poverty (31%) in Lynnwood compared to the state average (20%). About 32% of adults in Lynnwood are enrolled in college or graduate school.

Most K-12 aged children in Lynnwood are enrolled in school, with enrollment percentages in the upper 90s. However, only 40% of children aged 3 to 4 are enrolled in preschool, and nearly 70% of these children attend private preschools. This suggests that lower-income families may face challenges with accessing affordable childcare options for toddlers.

## Income

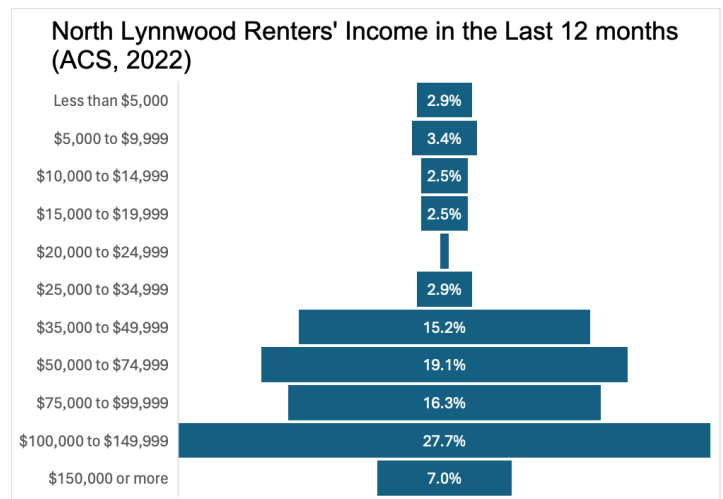
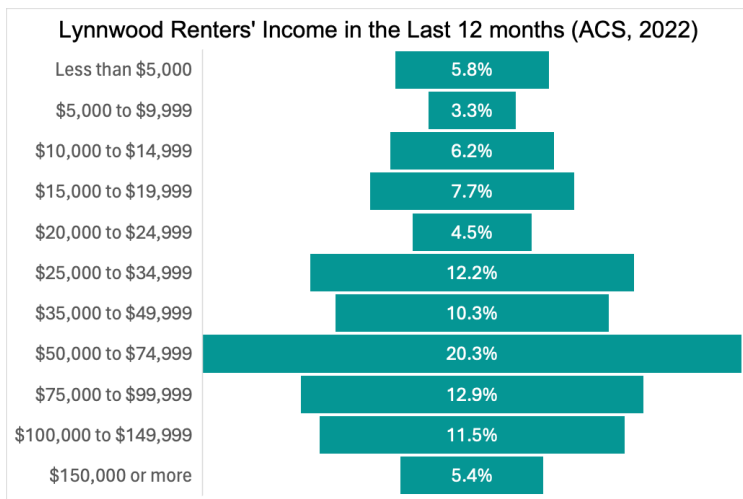
	Lynnwood median income	North Lynnwood median income	Edmonds median income	Mountlake Terrace median income	Washington State median income
<b>Families</b>	\$93,216	\$102,843	\$142,174	\$109,827	\$109,192
Married-couple families	\$110,475	\$115,271	\$158,008	\$115,744	\$124,257
Non-family households	\$41,822	\$73,246	\$59,940	\$68,466	\$57,299
<b>All Households</b>	<b>\$72,241</b>	<b>\$89,944</b>	<b>\$110,057</b>	<b>\$96,104</b>	<b>\$91,306</b>

In most respects, Lynnwood and Northern Lynnwood share demographic profiles in all areas except income. The median household income is roughly \$72,000 for Lynnwood and \$90,000 for North Lynnwood. Much of this difference comes from a significant disparity between married and unmarried households in Lynnwood. The median income for non-family households in Lynnwood is significantly lower than the surrounding area and state as a whole. The Census Bureau defines “nonfamily households” as households where an individual is living alone or with unrelated individuals (such as roommates). These income disparities highlight the economic challenges faced by non-family households in Lynnwood compared to their counterparts in North Lynnwood and the broader region.



The other area where we see an income discrepancy is between homeowners and renters in Lynnwood. Fifty-percent of renters earn less than \$50,000 annually compared to 20% of homeowners, however we do not see as much of a discrepancy among renters in North Lynnwood where the data looks closer to that of homeowners.

Taken together, the income data suggests that single renters in Lynnwood are a group with particular economic needs. Those living without family members are also at a higher risk for being isolated, which limits outreach to this group.



## Lynnwood DSHS Data

For this report, city-level data on services was obtained directly from the Department of Social and Health Services (DSHS). In 2023, roughly 9,400 residents received some type of assistance, meaning roughly 1 in 4 Lynnwood residents received some type of assistance. The majority of services received were economic (84%), followed by aging and long-term support services (10%).

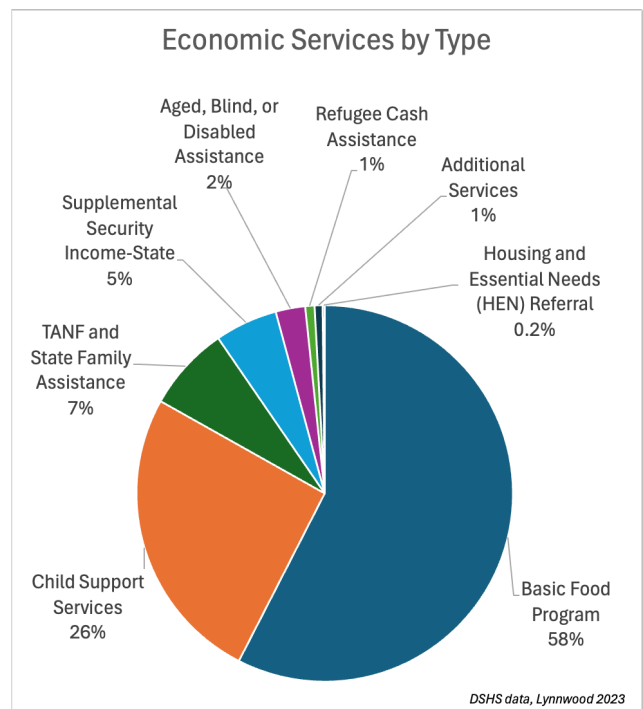
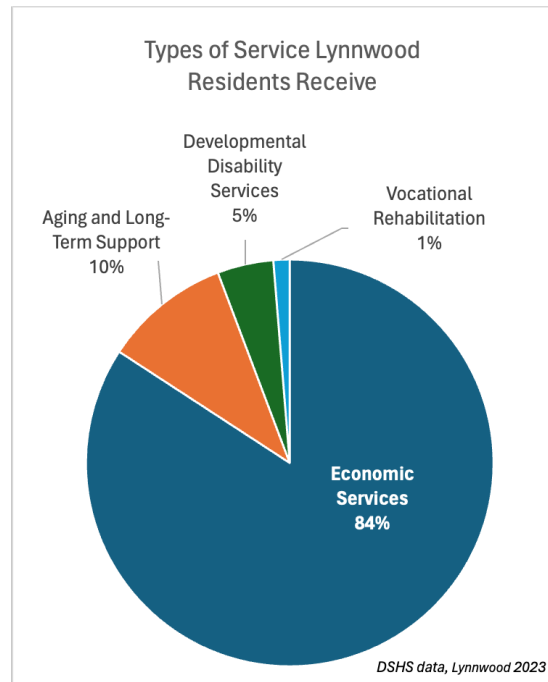
### Economic Services Breakdown

- Within the economic services category, the largest share was from the Basic Food program (SNAP), accounting for 77% of the economic services provided. This indicates a significant reliance on food assistance programs.
- Child support services made up 35% of the economic services, while family assistance (TANF) accounted for an additional 7%.

### Aging and Long-Term Support Services Breakdown

- Aging and long-term support services accounted for 10% of all services, making it the largest category after economic services.
- The largest sub-category was comprehensive assessments and case management, which constituted 33% of all aging and long-term support services. This was followed by additional services at 24% and in-home services at 20%.

The data provided by DSHS is unduplicated, meaning that participants are not counted multiple times if they are enrolled in multiple programs. This approach ensures that the numbers presented are conservative estimates, reflecting the minimum number of unique individuals receiving services.



## Data Collection Results

### Common Themes and Best Practices from Similar Municipalities

Common themes, approaches, and best practices were identified through the review of needs assessments from similar municipalities. The results are summarized below.

#### Common Themes

**Demographics are shifting** in Western Washington. All the municipalities in this review have experienced **significant population growth** over the past decade. Population growth has **increased diversity** throughout the region, leading to greater proportions of residents being foreign born and speaking languages other than English.

**Housing affordability** is a priority need across all municipalities in this review. Communities in Washington State and the U.S. are struggling with rising housing costs, which have increased 36% since 2020<sup>1</sup>. In four of the six communities, at least 30% of the community is cost burdened, paying more than 30% of their income on housing (Shoreline did not provide this data, but noted an ‘extreme’ cost burden). In two communities (Shoreline and Monroe / Sky Valley), community members cited the size and quality of housing as a significant housing issue, highlighting this as an area for further investigation.

**Behavioral and mental health care** is also a priority need in all municipalities. Community members express that the COVID-19 pandemic exacerbated mental and behavioral health issues, and have created a high demand for treatment. Intersecting issues of social isolation, digital disconnectedness, and racism/discrimination further exacerbate this issue. Despite the high level of need, all communities are facing barriers to providing this care. Mental and behavioral health care remain cost prohibitive for uninsured residents and Medicare/Medicaid beneficiaries, and increased demand burdens an already limited supply of behavioral health professionals. In addition to this, there are few community resources and programs that address mental and behavioral health needs.

**Homelessness** is linked to the issue of housing, with affordability and lack of stable housing driving the issue. However, the assessments in this survey had comparably little data on the specific needs of the homeless community. Municipalities did provide data on gaps in homeless services and barriers to receiving services. In many communities, there are few local resources for shelter and other basic needs for the unhoused. Furthermore, inadequate transportation prevents unhoused community members from accessing these services in neighboring communities.

**Awareness of services** was a major barrier in all municipalities. Community members lack knowledge about human services in key areas such as:

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<sup>1</sup> <https://fred.stlouisfed.org/series/CPIHOSNS#0>

- What services are available and how they can help
- Where to access these services and how to access them
- Eligibility for these services

In addition to awareness barriers, community members experienced **administrative burdens**. These include lengthy or complicated applications, lack of guidance during the process of applying to or receiving services, frequent eligibility certifications and other activities that require additional effort of service recipients. These administrative burdens either discourage or directly prevent potential clients from seeking or receiving services.

**Language inclusion and cultural responsiveness** created barriers to the increasingly diverse communities throughout Washington state. Community members indicate that this issue primarily impacted outreach and awareness related to services, though there was little data about the availability of services in languages other than English and its impact on communities. Community members did note a lack of culturally responsive services, particularly in regard to behavioral and mental health services.

## Best Practices

**Regional Collaboration** is a priority for communities across Northwestern Washington, with many recognizing the need to establish partnerships with neighboring municipalities and regional service providers. Many high priority issues bleed over between communities, necessitating a collaborative, regional response. For example, when housing costs increase in one community, residents move to neighboring communities in search of more affordable housing. In turn, the increased demand from new residents drives up housing prices in this community, residents move to another community to find more affordable housing, and the cycle continues. In a similar vein, when one community does not have the resources to meet the needs of the unhoused, these residents travel to other communities to seek services. An influx of new clients places strain on these services, there are service shortages and long wait times, and unhoused residents seek services in other communities, where the cycle repeats.

Municipalities across the region must work together to meet these needs and stop the cycle. A number of communities have proposed or implemented collaborative solutions to these problems. The City of Redmond's Human Services Needs Assessment finds that service providers in the City actively seek out partnerships with regional organizations, particularly for securing physical space to provide services and virtual service programming. The City of Shoreline also recognizes this need and has developed partnerships with regional service providers including the King County Regional Homelessness Authority (KCRHA), North King County Coalition on Homelessness, North Urban Human Services Alliance, and Human Services Funding Collaborative.

The City of Issaquah has developed partnerships with regional organizations to increase service capacity in the City. Regional service providers travel to Issaquah and set up temporary, pop-up service centers. This approach, when coordinated with other municipalities in the region, can act as a stop-gap measure when municipalities face increasing demand for services. The cities of Bothell, Kirkland, Kenmore, Lake Forest Park, and Shoreline have launched a [Regional Crisis Response Agency \(RCR\)](#). The RCR works with municipal emergency services (law enforcement, fire, and EMS) to respond to mental and behavioral health crises. The RCR’s mental health professionals use a person-centered approach of de-escalation, resource referral, and follow up for individuals experiencing mental and behavioral health crises. The RCR is supplemented by a new, regional behavioral health crisis response center located in Kirkland.

**Person-centered approaches to housing and homelessness** are being pursued by multiple municipalities in Northwestern Washington. The City of Issaquah established a Behavioral Health and Homeless Outreach Program in collaboration with the Police Department. The program provides unhoused community members with resources including shelters, housing, rental assistance, mental healthcare and substance use disorder treatment, among others. Since its launch, the program has made 1177 service connections and permanently housed 38 residents. In addition to this, the City has established a Community Court to provide alternatives to the traditional criminal justice system. The Court connects low-level offenders to human services in an effort to reduce recidivism and provide alternatives to incarceration. This is similar to the “Homeless Court” approach [recommended by the American Bar Association \(ABA\)](#). Homeless Courts connect unhoused defendants to human services, employ progressive plea bargaining, and alternative sentences to address crime without further marginalizing unhoused community members. Over 45 communities have established homeless courts, and the ABA provides technical assistance to communities seeking to establish their own homeless court system.

The City of Bellevue is implementing a Safe Parking Pilot Program to serve unhoused individuals living out of their vehicles. The program establishes a safe parking lot for individuals to park their vehicles, live, and sleep in. Safe Parking Pilot clients will have access to a day center with wireless internet, kitchen, laundry, and bathroom facilities as well as case management services for assistance finding long term housing. The program is run by a local human service provider, 4 Tomorrow, which developed the program’s code of conduct and safety plan, and provides staffing. Families living in vehicles are given first priority, and clients are barred from using drugs or alcohol on Safe Parking premises.

**The full comparison report can be found in Appendix A.**

## Interview Findings: Lynnwood’s Human Services Needs

Throughout the interviews with key stakeholders, common topics included barriers to accessing services, trends and priority areas, and potential solutions to address unmet needs in the community. Several themes and subthemes emerged from these conversations. The section below synthesizes the results of the thematic analysis.

## Barriers to access

Throughout the interviews, many providers noted barriers Lynnwood residents face when accessing human services. The majority of access barriers fell under two categories: transportation and cost.

### Transportation

- Many providers cited transportation as a significant barrier to accessing services, especially for people with disabilities and older adults.
- Providers noted that access to reliable public transportation is critical, especially for residents who don't own or cannot drive a car. However, public transportation options for low-income residents are lacking in Lynnwood. Providers called for improvements to the current public transportation infrastructure so residents are able to easily access services, such as healthcare appointments. There is also a need for more infrastructure and funding for shuttle services that can transport community members to local human services programs, such as the food bank or the senior center.
- The Zip shuttle ride was noted as a helpful transportation service that is available to Lynnwood residents, especially for older adults. However, there are a limited number of vans available and limited routes. Providers noted that it would be helpful to expand the reach of this program.
- Not all services are accessible along bus routes. Additionally, providers noted that the process of obtaining a free bus pass is difficult and time consuming, involving multiple pages of paperwork to determine eligibility.

### Cost

- Cost is a significant barrier to obtaining certain types of basic needs in Lynnwood, including healthcare and housing.
- There is a lack of providers who accept AppleHealth (Medicaid) and uninsured patients. For providers who are in network, there are often extremely long waiting lists to get in for an appointment.
- Cost and long waiting times leads to people putting off healthcare appointments and risking developing more serious complications.

## Affordable housing, rental and legal assistance, and shelter services for people who are unhoused

A major theme across all interviews was the need for more affordable housing options, more rapid rehousing programs for people who are unhoused, and access to local shelters. Providers also noted the need for rental assistance and tenant protections. In particular, multigenerational and multifamily households in Lynnwood are struggling with recent increases in housing costs. There are also many residents who are on a fixed income and are facing significant increases in rent. Providers also noted that growth associated with the new Light Rail station may price out some families.

A few providers mentioned that there are two new affordable housing options being developed by Housing Hope in South Snohomish County. One 52-unit complex, Madrona Highlands, is opening in late 2024 in Edmonds. A second complex, Scriber Place, is being developed in collaboration with the Edmonds School District to serve some of the students and their families who are unhoused, with an estimated opening date of September 2025.

In addition to the need for affordable housing, providers mentioned the need for a safe shelter available year-round in Lynnwood. Service providers for unhoused residents noted that they have to refer people to shelters outside of Lynnwood (Everett or Monroe), and that there are no year-round, universally accessible shelter services.

There are currently limited options for overnight shelters in Lynnwood. A winter emergency shelter is available, but only in sub-32-degree temperatures. The YWCA Pathways for Women in Lynnwood, which is a 13-unit complex that offers a 45-day emergency shelter for single adult women and mothers with children, is the only women's shelter in South Snohomish County. Long waitlists and eligibility rules limit its accessibility, particularly for men; the closest men's shelter is located in Everett.<sup>2</sup> Additionally, 6 pallet shelters in Lynnwood closed indefinitely at the end of May 2024, further reducing shelter options for unhoused residents.

### Food assistance and other basic needs

Many providers noted a recent increase in need for food assistance. From 2019 to 2023, the Lynnwood Food Bank saw a 251.1% increase in individuals served, and a 171.3% increase in households served.<sup>3</sup> Similarly, there has also been a notable increase in food insecurity across all of Snohomish County. The 2022 Snohomish County Community Health Needs Assessment reported that the County's food insecurity rate surpassed the Washington State rate in 2020.<sup>4</sup> Clothing, showers, hygiene products, diapers, and baby formula were among the other basic needs mentioned throughout the interviews.

### Mental health and behavioral health support

The need for improved support for mental and behavioral health emerged as a key theme throughout the interview process. Providers mentioned that co-occurring mental health and substance use disorders have been exacerbated by the COVID-19 pandemic. Community resources are limited, and programs are struggling to keep up with the increase in demand for treatment options. The waiting list for mental health counseling, for example, is long and remains cost prohibitive for Medicaid and uninsured patients. Providers noted that wait times for mental health appointments are even longer for youth and non-English speaking clients. Additionally, providers mentioned that the limited availability of parks and green

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<sup>2</sup> [211 Washington - Overnight Shelters in Lynnwood.](#)

<sup>3</sup> [Lynnwood Food Bank, 2024](#)

<sup>4</sup> Snohomish County Community Health Needs Assessment, 2022



spaces in the City may have detrimental effects on mental health and social connectedness within the community.

Providers also identified drug use and opioid overdoses as increasing concerns in the community. This finding matches county-level data: the Verdant Community Health Needs Assessment reported that drug-overdose levels in Snohomish County increased 74% between 2020 – 2021, which has placed increased demand on an already limited substance disorder treatment workforce.<sup>5</sup> The prominence and consistency of this theme in interviews strongly indicates a critical need for increased mental and behavioral health funding and capacity in Lynnwood.

## Cultural support and community connection

Another theme that emerged through the interviews is the need for cultural support and to build social connectedness within the community. In terms of cultural support, providers mentioned a need for increased capacity among local health care providers in providing language appropriate and culturally competent care. Providers suggested a few solutions to build community connection, including cross-cultural events, promoting cultural diversity, and improving access to cultural foods.

Providers also noted that residents are feeling increasingly isolated since the COVID-19 pandemic. Providers observed that residents are disconnected socially, and that there is a lack of community identity in Lynnwood because of its nature as a commuter city. These feelings of disconnection are furthered by limited awareness of community events and human service resources.

## Awareness and outreach

Providers reported that there is a need to improve awareness and outreach regarding human services in the community. Residents often have limited awareness of local services they are eligible for and do not know where to go to learn more about available resources.

When asked for suggestions on how to improve awareness and community outreach, many providers' responses were centered around trust and relationship building in the community. Providers also noted several specific methods they have found to be effective in reaching community members, outlined below:

- Social media posts, flyers, and in-person community events. Providers mentioned that Facebook posts and WhatsApp messaging is a popular and effective way to reach residents, especially for the immigrant and refugee community.
- Word of mouth and referrals from trusted providers.
- Advertisements at places of worship, schools, workplace.
- Outreach materials available in different languages.

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<sup>5</sup> Verdant Health Commission, Community Health Needs Assessment, 2022

- Hiring a care navigator to assist in connecting individuals to human resources in the community. Having a 211 navigator on campus, for example, helps to connect students with additional resources in the community.

## Collaboration and communication

Stakeholders mentioned a need for improved collaboration and communication – both between agencies, and between agencies and City staff:

- There is a need for improved interorganizational communication and collaboration among local community-based organizations. Many service providers do not feel well-connected or well-informed in regards to what resources other organizations are offering.
- There is also a need for improved cross-collaboration efforts between the City of Lynnwood and local community partners. Many providers noted that there is a lack of communication from the City about funding opportunities, resources, and human services initiatives.

## High need populations in Lynnwood

Providers were asked to identify social identity groups who experience significant barriers to accessing human services in the community. The groups that were identified are listed below.

- Immigrants and refugees
- Black, Indigenous, and People of Color (BIPOC)
- Unhoused individuals
- People with disabilities
- Older adults
- Youth

## Things that are working well

In addition to sharing trends and human service priority areas in the community, interviewees also shared positive experiences and things that have been working well at the City level. These responses are summarized below.

- Many providers noted the progress that has been made in responding to the priorities outlined in the 2016-2018 Human Services Needs Assessment.
- Many providers commented on positive interactions with other community-based organizations.
- Many providers emphasized the importance of having a human services coordinator at the City.
- Many providers expressed appreciation for seeking their feedback for this report and for the opportunity to share their insights on the City's human services needs.

## Findings from Extant Data Review

A comprehensive review of existing data and reports was conducted to identify current trends and priority areas at the County and State level. This included a review of needs assessments from other

agencies with findings that are applicable to Lynnwood, including the Snohomish County Community Health Needs Assessment (2022) and Verdant Health Commission Community Health Needs Assessment (2022). A review of recent initiatives, such as the City of Lynnwood's 2021 Community Equity Survey, was also completed to develop background knowledge on needs in the community.

The Snohomish County Community Health Assessment (2022) and Verdant Health Community Health Needs Assessment (2022) identified the following health needs in Snohomish County:

- Mental health support and the need for social connection
- Substance use disorder treatment and support
- Housing and health care affordability and quality of care
- Food assistance
- Transportation
- Addressing disparities and focusing on diverse and equitable community outreach methods

The Snohomish County assessment in particular highlighted the need for healthcare that is both affordable and culturally competent. The report also highlighted the need for more coordination and communication between service providers and local government.

The key themes from the extant data review support the findings from key stakeholder interviews regarding human services priority areas and needs. There are similar needs between the City of Lynnwood and Snohomish County regarding mental and behavioral health treatment, improved access to transportation, culturally competent care and outreach, and coordination between service providers and local government.

There were a few findings that were specific to the City of Lynnwood that were not identified at the County or regional level. First, stakeholders in our Lynnwood interviews identified the **new light rail station** as having a high impact on Lynnwood's human services moving forward. Potential impacts, such as changes to housing affordability in response to the new station, were highlighted by multiple providers. Additionally, while the need for affordable housing and services for unhoused residents was highlighted at the County-level, the lack of a **local shelter** that is **accessible year-round** in Lynnwood is a unique challenge the City faces.

## Recommendations

The following recommendations are a compilation of priorities identified by the community in interviews and the Lynnwood Human Services Commission, and best practices from comparable cities and the expertise of the consulting team. The challenges identified in this report are significant, and any city's ability to meet these challenges is limited by funding, staff time, and resources. Fortunately, the City of Lynnwood is not alone in its efforts to address the needs of vulnerable community members. Cities are a part of a network of community-based and government organizations – including county, state, and

federal – and faith-based organizations and private philanthropy. The strength in the system comes from, in part, the diversity of the entities involved. However, the system is also complex and loosely coordinated with multiple entry points to access services. One of the most powerful roles a city can play is in coordination, collaboration, and system access for its residents. The prioritization of recommendations in this section is based on their strength in meeting current needs, and how feasible they are to implement.

## Current Challenges in Human Services Funding

Although the need for human services grew during the COVID-19 pandemic and related shutdown, new sources of federal funding were made available to help with the increased demand. The American Rescue Plan Act (ARPA) allocated \$350 million in State and Local Fiscal Recovery Funds (SLFRF) to state, territorial, local, and tribal governments across the U.S. to address the impact of the pandemic. SLFRF funds were allowed to fund pandemic-related expenditures, premium pay for key personnel, infrastructure investments, and general government services impacted by pandemic-related lost government revenue. ARPA funds are nearly depleted and will no longer be available after 2024. This sudden shrinkage in funding is impacting most health and human services agencies simultaneously. As a result, some long-standing and seemingly stable community-based organizations have recently shuttered programs or their entire operation. While the need for services hasn't ended, a recent source of additional funding has, and some human services organizations are scrambling to find ways to fill the funding gap.

Another challenge is the state legal limit on the ability of cities to increase revenues. Washington passed a 1% levy lid on property taxes that limits increases in taxes by individual taxing districts to one percent annually. According to the Department of Revenue example, if a city levies their highest lawful levy of \$1 million in property taxes, it can only levy \$1.01 million the next year, plus any tax revenues generated by new construction, improvements to property, state assessed utility value increases, and wind turbines, solar, biomass, and geothermal facilities added to the tax rolls in the past year. This means, even if Lynnwood commits to building higher-density affordable housing, any additional property taxes raised by those housing units will be used to lower the taxes on the existing property owners instead of increasing revenues (above the allowed 1%).

Finally, because the City of Lynnwood has not (yet) reached a population of 50,000 or more people, the City cannot directly apply for and receive federal Community Development Block Grant (CDBG) funding to pay for human services investments. The Washington Department of Commerce sets aside a portion of Washington's federal CDBG funds to grant directly to smaller cities who can't receive funds on their own. However, Lynnwood has participated in a Consortium program to receive CDBG funds since 1975 and under the HOME Investment Partnership (HOME) program since 1992. Snohomish County is the lead agency and grant recipient for the Consortium. For CDBG funds, the Consortium consists of Snohomish County and all the cities and towns within the County, except the cities of

Everett, Marysville, and the King County area of Bothell, which is 18 cities/towns in total. Snohomish County regrants CDBG funding to those 18 cities/towns.

These funding restrictions should not discourage the City from investing in human services, but it does create a need for dedicated City staff resources to track, apply for, and manage external grant funding in order to fund City programming beyond what can be supported by City general funds.

## Summary of Recommendations

4. Improve awareness of services and outreach to the potentially eligible
  - a. Manage, maintain, and promote Lynnwood’s resource guide
5. Continue to address the affordable housing and homelessness crisis
  - a. Strengthen Lynnwood’s tenant protection laws
  - b. Increase housing program options for the unhoused and housing insecure
6. Strengthen regional service delivery collaboration and coordination
  - a. Test innovative solutions regionally
  - b. Replace the embedded social worker position that served as 911 diversion
  - c. Sustain the Lynnwood human services coordinator position

## Improve Awareness of Services and Outreach to the Potentially Eligible

Another theme from the interviews conducted was the difficulty people encountered finding the services they need. This is an issue in other comparable cities, too. One suggestion multiple interviewees made was to manage, maintain, and promote an enhanced resource guide specific to Lynnwood and updated regularly (at least monthly). The recommendation is for the resource guide to be available in two formats: an online guide that can be easily updated on a regular basis, and a printable version that can be handed out at in-person outreach events. The guide should be available in multiple languages and ADA-compliant. An even more enhanced version could include a “live operator” option for people who don’t use the internet or don’t read. Although the resources should be filterable by Lynnwood, many of the service organizations serve a larger area of the region, so this recommendation could be pursued in collaboration with other South Snohomish County cities, like Mountlake Terrace, Brier, Bothell, Edmonds, and Mukilteo.

## Continue to Address the Affordable Housing and Homelessness Crisis

### Strengthen Lynnwood’s tenant protection laws

Several cities in the surrounding area are using the flexibility in state law to pass tenant protection provisions. Examples of laws allowed in the state that other jurisdictions are adopting include the notice of rent increases. The minimum notice required under state law is 60 days. Other neighboring municipalities have passed codes requiring longer notices – typically 120 days. The purpose is to give the

renter more time to look for new housing in the relatively competitive rental housing market. Another set of codes related to restrictions on fees, including caps on move-in fees, security deposits, and late fees, is also recommended. Installment payments of fees are allowed under state law. Neighboring municipalities have typically passed codes that cap the fees. Finally, municipalities are focused on passing provisions that protect manufactured/mobile homeowners from unreasonable increases or losses of the lease on the land their home is located on.

### Increase housing program options for the unhoused and housing insecure

There are increasing needs for housing programs that either prevent people from losing their housing, or help to shelter and rehouse the unhoused. The interviewees identified increasing low-barrier emergency shelter services, including a year-round extreme weather shelter and a shelter for men as critical needs in the community. Another priority item is to create a regional stabilization center for rapid rehousing and transitional housing for the unhoused. Finally, there is also a need in the region to build more permanent supportive housing for people with disabilities and behavioral health needs.

### Strengthen Regional Service Delivery Collaboration and Coordination

There are similar shifts in demographics – like population growth and increased diversity – affecting cities throughout the South Snohomish County region. Neighboring cities have identified similar needs in their recent human services needs assessments. Those needs include: the housing affordability crisis and homelessness; lack of behavioral health services; lack of awareness of services; and language inclusion and cultural competency. These are all problems that could benefit from regional solutions because of either their size, scope, and scale or the permeability of the boundaries of the cities in the area.

Also, there are nearby models of greater collaboration in North King County that could be used to set up a more formal South Snohomish County regional collaboration. Examples include the King County Regional Homelessness Authority (KCRHA), North King County Coalition on Homelessness (NKCCH), North Urban Human Services Alliance (NUHSA), Regional Crisis Response Agency (RCR), and Human Services Funding Collaborative (HSFC). If Lynnwood were to lead the way in hosting the start-up of a formal regional network of human services providers and government agencies, it would provide a more solid foundation to pursue some of the City's more ambitious goals. This recommendation is actionable in the short-term, and it would require relevantly modest resources, including time for City staff to manage the coordination effort and potentially seek funding.

### Test Innovative Solutions Regionally

If a regional approach to economic security and poverty reduction were established, that broader coalition might be in a position to pursue more innovative solutions, like the universal basic income (UBI) pilots that several cities have implemented recently (See Appendix B). UBI, commonly defined as the unconditional, recurring cash payment provided to every citizen by the government, regardless of employment, socioeconomic status, disability, or family structure, embodies the principle that every

individual should have a guaranteed minimum income to meet basic needs, alleviate poverty, and attain financial autonomy and security. The administrative requirements and overhead costs of a solution like a UBI pilot would be best borne by multiple jurisdictions over a larger geographic area. These types of programs would also require considerable and sustained funding to be effective. However, unconditional cash payments in pilots like the one in Stockton, California reduced income fluctuations, increased full-time employment, and decreased feelings of anxiety and depression. Recipients predominantly spent the money on basic needs, with positive ripple effects observed in alleviating financial strain across networks and enabling more time for relationships.

### Replace the embedded social worker position

For several years, the City of Lynnwood has supported a social worker position to embed in the police department to divert non-emergency 911 calls from more expensive emergency services, and to assist first responders with calls involving people in crisis. The position was created through a contract with Compass Health in Everett. Unfortunately, due to funding restrictions and other priorities, that program has ended along with the Lynnwood position. On an interim basis the Snohomish County Outreach Team (SCOUT) is filling the gap, but one position is serving a broader region and is unable to focus on just Lynnwood, leading to gaps in service. Other communities, like the City of Edmonds, have recognized the importance of 911 diversion programs and have replaced their embedded social workers with grant funding. 911 diversion programs are a best practice from other cities in the region, including RCR and the City of Issaquah outreach program.

### Sustain the Human Services Coordinator Position

One of the strongest themes from the interviews was strong support and appreciation for the Lynnwood Human Services Coordinator position that was recently established. Interviewees noted an improvement in the level of communication, problem-solving, and service access since the position was filled by the current incumbent. The position has already served and could even enhance the City's important role as the point of contact for coordination and collaboration with other cities, the county and state, and community-based organizations. Another important role the human services coordinator position has is to support capacity building, including enhancing the City's ability to draw down existing grant funding and seek new funding sources. The coordinator position will also serve as an important point of contact for managing the City's human services plan and making sure the City is accountable for the strategies and goals in the plan. Finally, a human services coordinator in other cities plays a key role in a city's disaster/emergency response plan and system. Interviewees strongly recommend the City continue to fund the Human Services Coordinator position.

### Other Human Service Needs

While the top three priorities based on feedback and research were increased collaboration, improved access, and affordable housing and homelessness service, other human service needs were also identified and important to continue to support. They include: programs that prevent food insecurity and hunger,

such as food banks and Meals on Wheels; community-based mental and behavioral health services; accessible and affordable transportation to access services; and childcare options for low-income families.



# Appendix A: Community Needs Assessment Comparison and Best Practices Report

## Comparable Cities in the Assessment

### Shoreline, WA

Shoreline, Washington is a city of just over 60,000 residents located in Northern King County. Located just nine miles north of Seattle, over 90% of residents are employed outside of the city. On average, Shoreline residents have a lower mean income, are older, and have a higher incidence of disability compared to King County. Over a quarter of residents speak a language other than English, and the population has seen significant increases in Black, Asian, and multiracial residents.

The City of Shoreline recently adopted its 2024 Human Services Strategic Plan, with the bulk of community engagement taking place in 2023. Community engagement was achieved through key informant interviews with service providers and aligned public service systems, interviews with peer jurisdictions (such as Bothell, Issaquah, and Redmond), a focus group with City staff, and collaboration with service providers to collect input directly from clients.

The strategic plan identifies housing and homelessness, medical and behavioral healthcare, and nutrition assistance as the city's highest priority human services needs. Housing affordability is a problem for a large number of residents, who face a high housing cost burden. Families especially struggle to find housing large enough to accommodate all their family members. The plan highlights the need for more rental assistance and eviction protection and shelter and services for unhoused residents. Residents also expressed concern that a recent light rail addition will raise housing prices. The City's existing behavioral health resources are overwhelmed by increased demand, which has created a shortage of care and equity issues. The majority of existing service providers are at capacity with residents who have private insurance, whereas the uninsured and Medicare/Medicaid recipients struggle to find providers that have capacity and are affordable.

The strategic plan also identified several barriers to existing services that exacerbate these issues. Service provider clients cited limited information on programs as a major barrier, with many unaware of what services are available, where to access them, and how to navigate the service system. This was especially true for non-English speaking residents and immigrants, who described a lack of linguistically inclusive and culturally competent resources and outreach. Clients also cited administrative processes as an additional barrier to accessing services. Many are unable to access services due to eligibility requirements, long wait times, and complex application processes.

## Monroe / Sky Valley, WA

Sky Valley is a collection of predominantly rural communities in South Snohomish County that includes Monroe, Sultan, Gold Bar, Index, and the City of Snohomish. The Sky Valley region has a population of 58,000, which is growing at a faster rate than Snohomish County and Washington State. The region's median income (\$81,000/year) is higher than the state average, but lower than Snohomish County (\$86,000/year). The region is less diverse, with only 18% of the population being BIPOC compared to the 25-28% in the county, state, and the US. Approximately 9.8% of residents have limited English proficiency.

The City of Monroe (the most populous community in Sky Valley) commissioned a regional human services needs assessment in 2021. The assessment covers the entirety of the Sky Valley region, including communities outside Monroe. Consultants hired by the City conducted both primary and secondary research on the region's human services needs. Primary research took the form of 45 key informant interviews, 5 focus groups, and resident and provider surveys.

Interviewees, focus group participants, and survey respondents all pointed to housing as a priority need in the region. Thirty-two percent of Sky Valley residents are housing cost burdened<sup>6</sup>. Community members expressed a need for housing that is affordable, stable, and safe, with different segments of the community identifying different key need areas. Participants from the Hispanic/Latino community faced barriers to affordability, including large down payments and hidden fees. These community members also cited poor quality housing and landlords that take advantage of their migrant status as additional issues. Seniors were primarily concerned with the affordability of housing options later in life, with many fearing that they will be unable to downsize or find affordable assisted living options when the time comes. Unhoused community members also identified housing as their highest priority need, specifically citing a lack of stable housing as a barrier to employment.

Other high priority needs include medical and behavioral health and transportation needs. Survey respondents cited physical health as their most used and most needed human service. Interviewees stated that they frequently travel outside of the Sky Valley region to seek care due to lack of resources in the region. Survey participants identified behavioral health as the number one human services gap and barrier. There are few resources for the uninsured and Medicare/Medicaid beneficiaries, and residents frequently travel to Everett or Kirkland for care. There is a particular lack of integrated homelessness, mental health, and substance abuse services, with all providers exiting the region in 2020. Homeless, disabled, senior, and parent participants in focus groups identified transportation as both a high priority need and gap in service. Transportation costs pose a high burden on these residents, and public transportation is often unavailable, unreliable, and slow. These gaps often lead to missed doctor's appointments, school, job interviews and other disruptions.

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<sup>6</sup> Housing cost burdened is defined as spending more than 30% of household income on rent and utilities

## Longmont, CO

Longmont is a municipality located in Northeastern Boulder County, Colorado. The municipality has a population of approximately 95,000 and saw significant population growth (11%) throughout the 2010s, including a growing population of older adults. Longmont is less diverse than the US as a whole, with only 17% of the population being BIPOC. Twenty-five percent of the population speaks a language other than English in the home.

The municipality of Longmont conducted a human services needs assessment in 2020. Data was collected using secondary sources as well as primary research. Primary research included a resident survey, stakeholder interviews, and thirteen focus groups. Given the timing of the assessment, the COVID-19 pandemic did have an impact on data collection. The resident survey closed right before the municipality issued a shelter-in-place order, and may not reflect all of residents post-COVID needs. Interviews and focus groups were conducted in mid-2020 and reflect human services needs that emerged due to the pandemic.

Longmont residents identified housing, physical and behavioral health, economic vulnerability, and the digital divide as key human services needs and gaps. Residents described a growing challenge in finding affordable housing, with many low-income households struggling to pay their rent or mortgage. Fifty-three percent of renters and 40% of homeowners in Longmont are cost burdened, and 13% of survey respondents stated that they needed help paying their rent or mortgage in the past year. Community members also identified a lack of services for homeless residents, with gaps in case management and shelter services (particularly for unhoused families). Community members identified a significant increase in behavioral health needs due to the COVID-19 pandemic, with 3,700 residents identified as having serious mental health needs. Behavioral health services are inaccessible, with residents citing hours and distance as major barriers. Cost is an additional barrier, with 13% of residents needing assistance paying for behavioral health services and 14% needing assistance paying for medical health services.

Community members also had significant needs related to economic self-sufficiency and basic needs. Many residents live paycheck-to-paycheck and rely on payday loans to pay for basic needs. Twenty-one percent of residents went without food in the past year due to cost, and 17% of residents stated they needed help paying for food. The assessment also identified a digital divide between residents, with low-income residents disproportionately lacking internet access, devices, and digital literacy. This intersects with other human services needs, as residents without internet access have less information about programs and services available in Longmont.

## Issaquah, WA

Issaquah is located in the Seattle metropolitan area of King County. The city has a population of 40,060 and has seen significant population growth over the past decade. The city has a poverty rate of 7.8%, which is equal to King County's overall poverty rate. Issaquah is fairly diverse, with a large Asian

population (23.2% of residents) and a sizable Hispanic/Latino population (9% of residents). Thirty-percent of residents speak a language other than English, and 26% are foreign-born.

The City of Issaquah developed a Human Services Strategic Plan in 2022. This plan collected data on the city's human services needs through several community engagement activities, including 51 interviews with community partners, 13 interviews with residents experiencing homelessness, twenty-five interviews with non-English speaking residents, eleven focus groups with residents, a community survey, and six workshops with community members, service providers, and city staff.

These community engagement activities identified four primary human services needs: physical and behavioral health, housing and homelessness, cultural competency and language inclusion, and community resources. Interview and focus group participants reported high levels of mental distress in the community, with low income (< \$15,000/year) and Black residents reporting higher levels of distress. The strategic plan identified several barriers to behavioral health services, including workforce shortages, difficulties navigating the system, and a lack of culturally competent care. There is only one mental health service provider in Issaquah that accepts Medicaid, and this provider only offers services for youth (up to age 24). There are no behavioral health services for low-income adults. Residents face similar issues accessing medical health care, as well as high cost barriers and a lack of preventative care.

Community members also identified housing affordability and homelessness as major needs. One third of the Issaquah community is housing cost-burdened, and many residents fear that rising housing costs will push them out of the area. These concerns are elevated for seniors, as there are few resources to help aging community members stay in their homes comfortably, safely, and independently. Issaquah also has few services for individuals experiencing homelessness: there are no services besides daily meals and a local food and clothing bank, many unhoused residents have to travel outside the community to seek services. Even then, these individuals cite lack of transportation, lack of identification, and feeling unsafe as major barriers to receiving services.

The strategic plan identifies service barriers facing Issaquah residents. Awareness and outreach is an issue, with 20% of survey respondents overall being unaware of services, including 30% of Spanish and Chinese speakers. Families in Issaquah believe there are too few childcare resources available, and that rising inflation has made the cost of raising a family prohibitive. The cancellation of bus routes has made it very difficult for seniors and the unhoused to access services due to lack of transportation. In engagement forums, community members also expressed the need for a community center that serves as a one-stop-shop for human services needs to assist with navigating and applying for assistance.

## Redmond, WA

Redmond is part of the Seattle metropolitan area in King County. The City has a population of 73,000 and has seen significant population growth in recent years. Redmond is a very affluent community, with a median income of \$132,188, which is significantly higher than the County, State, and U.S. as a whole.

Redmond is an increasingly diverse community, with almost 50% of community members identifying as non-white. In addition to this, 45% of community members speak a language other than English.

The City of Redmond commissioned its Human Services Needs Assessment in 2022. Consultants hired by the city conducted both primary and secondary research on the city's human services needs. Primary research included one-on-one and group interviews with service providers throughout the city, focus groups with community members, and a community survey. The strategic plan highlights two separate, and disparate communities in Redmond: one is the affluent community that is traditionally associated with the City's booming tech industry, and the second is a disadvantaged community living at the margins. This second group struggles to make ends meet and has critical human services needs.

Survey respondents identified affordable childcare, mental health counseling, and rent or utility assistance as the highest priority human services needs. Twenty-nine percent of renters in Redmond are cost burdened. When asked how Redmond could be made a better place to live, an overwhelming majority of respondents pointed to housing affordability and homelessness as a top priority for improving the community. Overall affordability was the second highest priority for the future of Redmond, after Diversity, Equity, Inclusion, and Belonging. Community members identified both an increased need for behavioral health services and barriers to receiving these services. Providers being booked or overwhelmed, affordability, and the administrative burdens of receiving care were identified as primary barriers.

Community awareness is an additional barrier to service in Redmond. Forty-five percent of survey respondents stated that they did not know where to go for human services, with a larger proportion of non-English speakers not knowing where to go for services. Service providers identified several internal barriers and gaps to functioning including limited staff and low wages, institutional burnout, diminished empathy and belonging in the community, and limited and restricted grant funding.

## Bothell, WA

Bothell is a community of 48,000 residents in the Seattle Metropolitan area, split between King and Snohomish counties. Bothell is an affluent community with a median income of \$116,578, 9.6% higher than King County. Sixty-five percent of Bothell residents identify as white, 18% as Asian, 10% as one or more races, 2% as Black or African American, and 1% as American Indian or Alaskan Native. Koné Consulting is currently conducting a human services needs assessment for the City of Bothell, WA. The Koné team is still in the process of data collection, the following is a preliminary analysis of themes from its assessment.

Survey respondents identified food insecurity, utility payments or help with bills, and access to mental healthcare or therapy as high priority human services needs. When asked to suggest improvements to the City's human services, responses mentioning housing and homelessness were the most frequent. This aligns with other data about Bothell's housing, which shows that 1 in 5 residents are housing cost

burdened. Awareness and outreach are an issue in the community. The majority of respondents (66%) stated that they did not know where to go to receive human services. When asked how they would like to receive information about human services, residents preferred mailed and emailed newsletters and social media.

Service providers shared similar themes in interviews. They expressed that many Bothell residents are unaware of the services that are available to them and unsure of where to seek them out. They suggested a centralized one-stop shop for human services as a solution, as well as additional community outreach through newsletters and flyers. Service providers also reported a need for improved coordination and collaboration between service providers to increase awareness and improve service delivery at the local level. They also identified a need for greater regional collaboration, particularly on housing and substance abuse issues.

## Common Themes

**Demographics are shifting** in Western Washington. All the municipalities in this review have experienced **significant population growth** over the past decade. Population growth has **increased diversity** throughout the region, leading to greater proportions of residents being foreign born and speaking languages other than English.

**Housing affordability** is a priority need across all municipalities in this review. Communities in Washington State and the U.S. are struggling with rising housing costs, which have increased 36% since 2020<sup>7</sup>. In four of the six communities, at least 30% of the community is cost burdened, paying more than 30% of their income on housing (Shoreline did not provide this data, but noted an ‘extreme’ cost burden). In two communities (Shoreline and Monroe / Sky Valley), community members cited the size and quality of housing as a significant housing issue, highlighting this as an area for further investigation.

**Behavioral and mental health care** is also a priority need in all municipalities. Community members express that the COVID-19 pandemic exacerbated mental and behavioral health issues, and have created a high demand for treatment. Intersecting issues of social isolation, digital disconnectedness, and racism/discrimination further exacerbate this issue. Despite the high level of need, all communities are facing barriers to providing this care. Mental and behavioral health care remain cost prohibitive for uninsured residents and Medicare/Medicaid beneficiaries, and increased demand burdens an already limited supply of behavioral health professionals. In addition to this, there are few community resources and programs that address mental and behavioral health needs.

**Homelessness** is linked to the issue of housing, with affordability and lack of stable housing driving the issue. However, the assessments in this survey had comparably little data on the specific needs of the homeless community. Municipalities did provide data on gaps in homeless services and barriers to

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<sup>7</sup> <https://fred.stlouisfed.org/series/CPIHOSNS#0>

receiving services. In many communities, there are few local resources for shelter and other basic needs for the unhoused. Furthermore, inadequate transportation prevents unhoused community members from accessing these services in neighboring communities.

**Awareness of services** was a major barrier in all municipalities. Community members lack knowledge about human services in key areas such as:

- What services are available and how they can help
- Where to access these services and how to access them
- Eligibility for these services

In addition to awareness barriers, community members experienced **administrative burdens**. These include lengthy or complicated applications, lack of guidance during the process of applying to or receiving services, frequent eligibility certifications and other activities that require additional effort of service recipients. These administrative burdens either discourage or directly prevent potential clients from seeking or receiving services.

**Language inclusion and cultural responsiveness** created barriers to the increasingly diverse communities throughout Washington state. Community members indicate that this issue primarily impacted outreach and awareness related to services, though there was little data about the availability of services in languages other than English and its impact on communities. Community members did note a lack of culturally responsive services, particularly in regard to behavioral and mental health services.

## Appendix B: Universal Basic Income (UBI) Pilots

### Introduction

Universal Basic Income (UBI) has gained significant traction in recent years across public and political spheres for its proposal to provide unrestricted cash payments to all members of society at regular intervals. UBI, commonly defined as the unconditional, recurring cash payment provided to every citizen by the government, regardless of employment, socioeconomic status, disability, or family structure, embodies the principle that every individual should have a guaranteed minimum income to meet basic needs, alleviate poverty, and attain financial autonomy and security.<sup>8,9</sup> Debates surrounding UBI span financing, administrative feasibility, and its impact on existing welfare systems. In the United States, UBI discussions have gained prominence, fueled by concerns over automation, economic inequality, and the aftermath of the COVID-19 pandemic.<sup>10,11</sup> Despite challenges, pilot programs and initiatives are being experimented to gather empirical evidence on the effectiveness and sustainability of UBI in addressing societal challenges and improving economic security.

### History

The contemporary discourse surrounding UBI has historical underpinnings among philosophers, economists, civil rights activists, and feminists. In the late 18th and 19th centuries, visionaries like Thomas Paine and Joseph Charlier advocated for the distribution of wealth to all members of society, drawing attention to the collective ownership of resources. Paine proposed a lump sum to all members of society at adulthood, while Charlier suggested a “territorial dividend”.<sup>12</sup> Throughout the 20<sup>th</sup> century when social injustice was given greater emphasis into the concept, James Meade entered the ideology of “social dividend” into the UBI framework. Social justice advocates such as Martin Luther King Jr. and the Black Panther Party furthered the concept of a “social dividend” to combat poverty and inequality. Feminist movements, notably the Wages for Housework movement, also contributed to discussions on income separate from traditional labor models. In the 21<sup>st</sup> century, the resurgence of UBI discourse has been influenced by globalization, technological advancements like artificial intelligence, and growing concerns about income inequality.<sup>13</sup> Case studies from Alaska and California (Stockholm) offer valuable insights into UBI's practical implementation and potential variants.

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<sup>8</sup> Juliana Uhuru Bidanure, "The Political Theory of Universal Basic Income," *Annual Review of Political Science* 22, 2019: 481-501, doi:10.1146/annurev-polisci-050317-070954.

<sup>9</sup> Stanford Basic Income Lab. "What is UBI?" Accessed June 7, 2024. <https://basicincome.stanford.edu/about/what-is-ubi/>.

<sup>10</sup> Adam Ruben, "What Does the Debate on Automation Mean for Basic Income?," *Economic Security Project*, March 24, 2017, <https://economicsecurityproject.org/debate-automation-basic-income/>.

<sup>11</sup> D. Nettle, E. Johnson, M. Johnson, & R. Saxe, "Why has the COVID-19 pandemic increased support for Universal Basic Income?," *Humanities and Social Sciences Communications*, vol. 8, no. 79, 2021, doi:10.1057/s41599-021-00889-7.

<sup>12</sup> Bidanure 2019, op. cit.

<sup>13</sup> Karl Widerquist, "The Deep and Enduring History of Universal Basic Income," *The MIT Press Reader*, April 30, 2018, Accessed June 8, 2024, <https://thereader.mitpress.mit.edu/the-deep-and-enduring-history-of-universal-basic-income/>.



## Alaska<sup>14,15</sup>

During the 1970s, Alaska faced challenges related to the rapid depletion of revenue from its oil production boom and concerns about overreliance on oil income during economic downturns. In response, voters established the Alaska Permanent Fund with the goals of diversifying revenue sources, preserving current income for future generations, and limiting government spending. Managed by the Alaska Permanent Fund Corporation, the fund has grown significantly, reaching a value of \$64.9 billion as of June 2018. Since 1982, a portion of the fund's returns has been distributed to Alaska residents as the Alaska Permanent Fund Dividend, constituting approximately 10 percent of the average returns over the previous five years. Despite fluctuations, dividends typically exceed \$1,000 annually per resident, with payments made to both adults and children each October. Eligibility criteria include residency of at least 12 months, with exceptions for incarcerated individuals and inclusion of permanent resident non-citizens. A 2017 survey highlighted the importance of dividends to Alaskans, with 40 percent indicating a significant impact on their lives. However, most respondents (55 percent) reported no effect on work incentives, indicating the broad-based nature of dividend distribution among Alaskan residents.

## Stockholm, California<sup>16</sup>

A high-profile universal basic income (UBI) experiment conducted in Stockton, California, provided randomly selected residents with \$500 per month for two years without any conditions. The initiative, known as the Stockton Economic Empowerment Demonstration (SEED), was launched in 2019 by then-Mayor Michael Tubbs and funded by various donors. A study of the program's first year revealed significant improvements in participants' job prospects, financial stability, and overall well-being. Full-time employment increased among recipients, and their financial, physical, and emotional health showed improvement. Despite concerns that UBI might discourage work, proponents argue that it enhances financial stability, allowing individuals to work better and smarter while also enabling them to spend time with family and participate in their communities. The study showed that unconditional cash reduced income fluctuations, increased full-time employment, and decreased feelings of anxiety and depression. Recipients predominantly spent the money on basic needs, with positive ripple effects observed in alleviating financial strain across networks and enabling more time for relationships.

## Other Emerging Experiments

Building on the success of the Stockton pilot, Mayor Tubbs spearheaded the creation of the Mayor's for Guaranteed Income (MGI), a coalition of mayors advocating for guaranteed income implementation

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<sup>14</sup> Damon Jones and Ioana Marinescu, "The Labor Market Impacts of Universal and Permanent Cash Transfers: Evidence from the Alaska Permanent Fund," National Bureau of Economic Research Working Paper Series, Working Paper No. 24312, February 2018, doi: 10.3386/w24312, Revision Date: January 2020.

<sup>15</sup> The Alaska Department of Revenue, Permanent Fund Dividend Division, "About Us," Accessed June 8, 2024, <https://pfd.alaska.gov/Division-Info/about-us>.

<sup>16</sup> Treisman, Rachel. "California Program Giving \$500 No-Strings-Attached Stipends Pays Off, Study Finds." NPR. March 4, 2021. Accessed June 8, 2024. <https://www.npr.org/2021/03/04/973653719/california-program-giving-500-no-strings-attached-stipends-pays-off-study-finds>.

nationwide. This network has facilitated the funding of pilot projects in several cities and counties, often in collaboration with local governments, non-profit organizations, and grassroots initiatives. See Table I. For instance, *YALift!*, targeting 18-24-year-olds in specific Louisville towns, is administered collaboratively by the Louisville Metro Government, Metro United Way, Russell: A Place of Promise, and MGI. Additionally, grants from the American Rescue Plan Act (ARPA) have supported pilot programs like *Alexandria Recurring Income for Success and Equity (ARISE)*, providing City of Alexandria residents with a monthly \$500 transfer for 24 months.<sup>17</sup>[\[10\]](#)

Beyond funding, guaranteed income pilots have also showcased successful public-private partnerships, such as the *Madison Forward Fund* in collaboration with the City of Madison, Total Administrative Services Corporation (TASC), the Institute for Research on Poverty at the University of Wisconsin–Madison, and the Center for Guaranteed Income Research at the University of Pennsylvania. Similarly, the *UpLift – The Central Iowa Basic Income Pilot*, offering \$500 monthly payments to eligible residents, operates under The Harkin Institute at Drake University's coordination, backed by a public-private partnership of 11 funding organizations committed to leveraging research for poverty reduction policies and community investment decisions. These examples highlight the collaborative efforts driving the implementation and evaluation of guaranteed income initiatives across various regions.

## Conclusion

Universal Basic Income (UBI) remains a focal point of exploration through pilot programs, academic research, and policy deliberations across the United States, underscoring its pertinence to contemporary socioeconomic concerns. These initiatives, driven by the core objectives of ameliorating inequality and alleviating poverty, exhibit diverse degrees of universality and are tailored to specific communities. For instance, programs such as the *Columbia Life Improvement Monetary Boost (CLIMB)* targets single fathers, while the *Ithaca Guaranteed Income (IGI)* assists unpaid caregivers of children, elderly, or disabled adults. Additionally, initiatives like *St. Paul's Springboard for the Arts* caters to artists, and *Durham's Guaranteed Income Pilot or Excel* supports parolees.<sup>18</sup> See Table I. Despite variations in approach and scope, UBI remains a focal point for addressing national-level social and economic challenges, drawing sustained interest and scrutiny from policymakers, politicians, and scholars alike.

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<sup>17</sup> Stanford Basic Income Lab. "The Guaranteed Income Pilots Dashboard?" Updated March 29, 2024. Accessed June 7, 2024. <https://basicincome.stanford.edu/about/what-is-ubi/>.

<sup>18</sup> Stanford Basic Income Lab, op. cit.

Table I: Examples of Guaranteed Income Pilots across the United States<sup>19</sup>

Pilot	Location	Duration	Eligibility	Participants	Amount	Frequency
Young Adult Louisville Income for Transformation (YALift!)	Louisville, KY	1 year	18-24 years old and residing in the following neighborhoods: California, Russell, and Smoketown.	150 individuals	\$500	Monthly
Alexandria Recurring Income for Success and Equity (ARISE)	Alexandria, VA	2 years	City of Alexandria resident, 18 years or older, at or below 50% of the Area Median Income.	170 individuals	\$500	Monthly
Madison Fund Forward (MFF)	Madison, WI	1 year	Madison residents 18 and older with a household income less than 200% of the Federal Poverty Line, and with a child under 18 years old living at home.	155 individuals	\$500	Monthly

<sup>19</sup> Stanford Basic Income Lab. "The Guaranteed Income Pilots Dashboard?", op.cit.

Pilot	Location	Duration	Eligibility	Participants	Amount	Frequency
UpLift – The Central Iowa Basic Income Pilot	Polk, Dallas, and Warren counties, IA	2 years	Live in Polk, Dallas, or Warren County, 18+ years of age, live with at least one dependent up to the age of 25 years, household income at or below 60% of the area median income.	110 individuals	\$500	Monthly
Columbia Life Improvement Monetary Boost (CLIMB)	Columbia, SC	1 year	Fathers residing in Columbia and currently or recently enrolled in a program with the Midland Fathers Coalition	100 individuals	\$500	Monthly
Ithaca Guaranteed Income (IGI)	Ithaca, NY	1 year	Primary unpaid caregivers to children and aging or disabled adults that reside in Ithaca and have an income at or below 80% Area Median Income.	110 individuals	\$450	Monthly

Pilot	Location	Duration	Eligibility	Participants	Amount	Frequency
St. Paul's Springboard for the Arts	Frogtown and Rondo neighborhoods of Saint Paul and in Otter Tail County, MN	1.5 years	Artists in targeted neighborhoods who received support from Coronavirus Personal Emergency Relief Fund	75 individuals	\$500	Monthly
Excel	Durham, NC	1 year	Released from prison (NC State prison, a prison in another state, or federal prison) within the last 60 months (5 yrs) prior to application, returning to a Durham address (City or County), and with an income below 60% 2021 Durham-Chapel Hill AMI.	109 individuals	\$600	Monthly