



DECEMBER 1, 2020

CAPIC'S CARSP 2021 - 2023 COMMUNITY ASSESSMENT REPORT

COMMUNITY ACTION PROGRAMS INTER-CITY, INC. (CAPIC).
100 EVERETT AVENUE, UNIT 14
Chelsea, MA 02150



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AGENCY DESCRIPTION

Community Action Programs Inter-City Inc., (CAPIC) is a private, non-profit corporation that was chartered in 1967 to identify and eradicate the root causes of poverty in Chelsea and Revere. In 1978, the Commonwealth of Massachusetts expanded CAPIC's designated area to include Winthrop. CAPIC has been designated by the State and Federal Government as a Community Action Agency. In 2019, CAPIC provided a myriad of services to 12,000 local area-wide residents annually. The mission of CAPIC is to identify and address the needs, problems, and concerns of those in poverty and to enable the individually poor to achieve and maintain self-sufficiency.

CAPIC is governed by a twenty-one member, community-based Board of Directors, comprised of representatives from public, private, and low-income sectors of Chelsea, Revere, and Winthrop. CAPIC is administered by an Executive Director, who reports to the Board of Directors. A full-time Fiscal Director, Director of Planning & Development, Human Resource Director, and IT Director work with the Executive Director to manage operational functions. Major programs are supervised by on-site Program Directors, who are responsible for day-to-day operations and report to the Executive Director. CAPIC maintains a competent administrative structure that plays a key role in executive decision-making functions.

CAPIC employs 120 persons (many of whom are local area residents) in a variety of capacities and programs, all of which strive to assist low-income residents attain self-sufficiency. CAPIC maintains a proven track record of accomplishment in helping residents achieve self-sufficiency by identifying and eliminating causes of poverty. CAPIC recognizes the importance of effective and accurate communication between its employees and the communities that we serve. CAPIC's staff is bi-lingual (primarily Spanish speaking with one Portuguese speaking staff member, and one who speaks French and Moroccan) and has the resources to work directly with individuals who have LEP while being culturally sensitive. CAPIC also utilizes a Somali consultant, as well as an Arabic consultant in the Head Start Program. In addition, CAPIC works with the Massachusetts General Hospital (MGH) as a resource for languages that are not spoken by staff or consultants.

It should be noted that CAPIC is an active member of various local and regional groups, as well as statewide associations, such as: the Massachusetts Association for Community Action (MASSCAP), MASSCAP Communications Community of Practice, MASSCAP Planner's Group, MASSCAP Human Resources Group, MASSCAP Fiscal Directors Group, Benefit Enrollment Coordination System (BECS) Working Group, the Chelsea Eviction Task Force, the Chelsea and Revere Pandemic Response Teams, and the Massachusetts Energy Director's Association (MEDA).

AGENCY PROGRAMS & SERVICES

CAPIC administers comprehensive Head Start services for local area low-income children and families, as well as After-School services for area youth; a City-Wide Summer Camp Program; a Child Development Center serving infants, toddlers, and preschoolers; a Fuel Assistance Program providing households with energy assistance from April-November; a Weatherization Program that installs energy conservation measures in households, throughout an eighteen community area, annually; a heating system maintenance and repair service; and a Responsible Payee Program that assists individuals manage Social Security Disability benefits. In addition, CAPIC operates an Emergency Assistance Program, a Domestic Violence/Crisis Intervention Program, a free IRS VITA Tax Preparation Program, the Chelsea/Revere Family Network, the City of Chelsea Inspectional Services Department Referral Program, and the Chelsea Substance Use Disorder Program, as well as the Chelsea Mobile Outreach Program.

AGENCY HISTORY

Since 1995 CAPIC has worked directly with the City of Revere, in particular the Revere Police Department to expand community-wide opportunities to increase public safety and provide services to at-risk youth. CAPIC has a solid working relationship with the Revere Police Department and has worked on numerous initiatives with the Department

Throughout fifty-four years of community service, CAPIC has made numerous contributions to the surrounding communities of Chelsea, Revere, and Winthrop. Many of these contributions have included educational services and programs for low-income residents. Among CAPIC's significant contributions and achievements are the signing of the Head Start Program as a year round program into authorization by Lyndon Johnson in 1968 (CAPIC began operating the Head Start Program on a school year calendar); comprehensive health services were secured for children enrolled in the Head Start Program in 1972; the relocation of 200 homeless families displaced by the Chelsea conflagration of 1973; the implementation of the Department of Commerce Manpower Program; the operation of the Youth Activities Program serving 1,500 youth per year with job training and GED preparation, a ten year ESL initiative that assisted hundreds of Latino residents learn English; the implementation of the Childhood Lead Paint Poisoning Prevention Program (funded by the Department of Health and Human Services), which over a three year period beginning in 1976, screened all Chelsea children for lead paint and subsequently decreased the incidence of lead poisoning from 22% to 3%. In 1975, CAPIC organized a community-based effort that led to the establishment of the Revere Health Center as well as the establishment of the MGH Chelsea Health Center. In 1980 the Head Start Program opened in newly renovated facilities serving 80 low-income children. In 1992, CAPIC purchased the principal office site for the Corporation, located at 100 Everett Avenue, Chelsea, MA. Head Start was authorized to expand the scope of the program again, bringing its total enrollment to 210 in 1994.

More recent accomplishments:

- Partnership with Chelsea Housing Authority & LARE/American Training, Inc. to provide computer training and job readiness skills to federal housing tenants
- Published "Know Where To Go" Community Resource Guides
- Chelsea Family Network expanded to include Revere

- Expanded Child Development Programs to meet infant and toddler needs
- After School Program BONES Research Project to enhance bone development in children
- Established DeLeo Scholarship Program for summer camp kids
- Selected by Chelsea Black Community to receive “Trailblazer” Award
- Established Chelsea Community Navigator Program/Chelsea Housing & Basic Support Services Program
- Formed Partnership with East Boston Neighborhood Health Center to provide free health screenings
- Partnership with MGH on the Merck Foundation: Alliance to Advance Patient-Centered Cancer Center grant
- Establishment of Chelsea Mobile Outreach Team
- 2017 -Celebrated 50 years of service to those in need
- Designated by DHCD as Balance of State Homelessness Coordinator for Chelsea, Revere and Winthrop
- 2019 - Partnership with the City of Chelsea Inspectional Services Department through a referral process to provide multi-lingual capacity and deliver direct assistance to solve problems related to homelessness, substance use disorders, employment, emergency needs, hunger, hoarding, relocation assistance, emergency heating system repair, heating assistance, energy conservation, childcare, substance use disorders, preservation of tenancies and other needs that households experience; providing City inspectors with the ability to refer an at-risk resident to social services.

COMMUNITY PROFILES – CSBG-DESIGNATED SERVICE AREAS

Chelsea – Revere- Winthrop

CAPIC utilized the SMC Partner Community Data, in particular the town-level core data set as derived from The American Community Survey 5-Year Estimates (2014-2018), as well as data from the Massachusetts Department of Elementary & Secondary Education, The Harvard Public School of Health, & the Metropolitan Area Planning Council's (MAPC), "Next Stop Revere" Master Plan.

Chelsea



The City of Chelsea, Massachusetts is located in Suffolk County directly across the Mystic River from the City of Boston. Chelsea was first settled in 1624, established itself as a town in 1739 and was incorporated as a city in 1857. The city has an estimated population of 39,852 and occupies a land area of 1.8 square miles. It is the smallest city in Massachusetts in land area, and the 26th most densely populated incorporated place in the country. A charter change in 1995 designed an efficient council-manager form of government, which has focused on improving the quality of service the city provides to its residents and businesses, while establishing financial policies that have significantly improved the city's financial condition. Chelsea is one of three (3) designated sanctuary cities in Massachusetts.

Chelsea is a diverse gateway city; nearly half of the community members are foreign-born and over two thirds are Hispanic/Latinx. At least 10% of homes are overcrowded in Chelsea; the highest rate in Massachusetts, as families are forced to double and triple up to afford local rents. A recent study conducted by the Harvard School of Public Health found that 50% of Hispanic/Latinx immigrant residents of Chelsea have lost their jobs due to COVID-19; 40% lost hours. This has been devastating to the community and any jobs that previously employed Chelsea residents will never come back. Compounding this issue, about 15,000 Chelsea residents are undocumented and not eligible for Unemployment Insurance.

POPULATION – 39,852

Median Age: 33.2

Male: 20,344

Female: 19,508

White: 50.8%
Black/African American: 6.9%
Asian:3.2%
Two or More Races: 31%
Hispanic/Latinx: 66.9%
Median Income: \$53,280.00
Per Capita Income: \$24,338.00

Poverty-Related Data

Persons in Poverty: 18.8% **double state rate of 9.4%*
Children Under 18 in Poverty: 25.7%
Males in Poverty: 15.9%
Females in Poverty: 21.8%
Ages 5-17 Rate: 26.6%
Ages 18-34 Rate: 15.3%
Ages 35-64 Rate: 16.6%
Ages 65 +: 18.4%
White: 15.4% in poverty
Black/African American: 17.6% in poverty
Asian:21.7% in poverty
Two or More Races: 24.6% in poverty
Hispanic/Latinx: 20.1% in poverty

The Massachusetts Department of Unemployment, Economic Research Department reports that the unemployment rate in November 2020 for the City of Chelsea was 9.6%; higher than the state rate of 7.7%. This is a direct reflection on the impact of the pandemic on the City's workforce. The Massachusetts Department of Elementary and Secondary Education reports that during the 2019-2020 school year 70.6% of children enrolled in Chelsea Public Schools were economically disadvantaged; far exceeding the statewide average of 36.62%. The Department reports that English is not the first language for 83.4% of children enrolled; far exceeding the state average of 23.4%; with 87.7% of children enrolled being Hispanic (state average is 22.3%). These numbers have all increased since CAPIC's last CARSP.

Revere



Revere is situated on the Massachusetts Bay, five miles northeast of Boston. Revere was incorporated as an independent town in 1871 and later became a city in 1915. The City occupies a land area of 10 square miles. 4.1 square miles are open water and protected wetlands not suitable for development. Of the 5.9 square miles of developed land, 70% is occupied by residential dwellings. The City of Revere is in a unique location, serving as a gateway between the North Shore and Greater Boston. Revere's geographic characteristics and local businesses cemented its crucial role as a recreational and entertainment destination within the Boston Metro area. During the 19th and 20th centuries, Revere's entertainment industry centered around Revere Beach, America's first public beach, Suffolk Downs, and the Wonderland Race Track. Today, Revere's amenities such as Revere Beach, proximity to Logan Airport and transit access, have attracted new residents as well as businesses in the leisure and entertainment industries. Recently, new tech and e-commerce firms have located in Revere, such as the Amazon distribution center.

As reported in the Metropolitan Area Planning Council's (MAPC), "Next Stop Revere" Master Plan Draft, many renters and owners in Revere are cost-burdened, meaning they spend more than 30% of their income on housing; 4,300 out of 9,734 owners (44%) are cost-burdened and 5,559 out of 10,498 renters (53%) are also cost-burdened. Of the 20,485 households in Revere, 12,205 earn less than 80% of the Area Median Income and are considered low-income, representing more than half of all households in the city. Most low-income households are extremely low-income, earning only 30% of the Area Median Income.

POPULATION – 53,966

Median Age: 39.8

Male: 27,229

Female: 26,737

White: 79%

Black/African American: 5.6%

Asian: 4.7%

Two or More Races: 5.5%

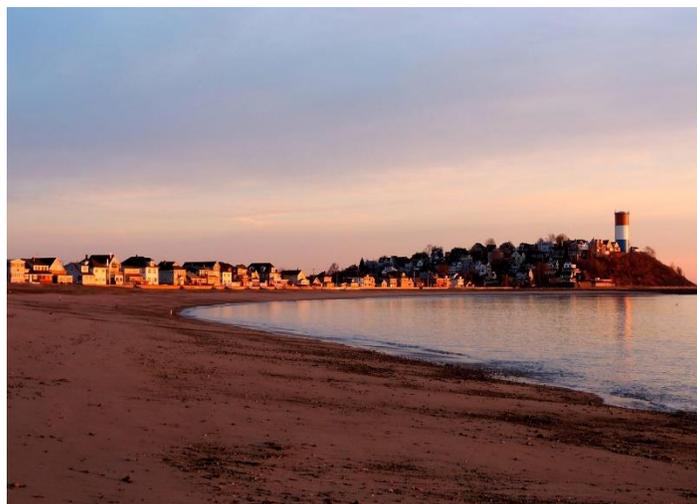
Hispanic/Latino: 32.5%
Median Income: \$55,020
Per Capita Income: \$28,383

Poverty-Related Data

Persons in Poverty: 13.1%
Children Under 18 in Poverty: 20.8%
Males in Poverty: 11.3%
Females in Poverty: 15%
Ages 5-17 Rate: 20.2%
Ages 18-34 Rate: 11.2%
Ages 35-64 Rate: 10.7%
Ages 65 +: 12.8%
White: 13.1% in poverty
Black/African American: 11.5% in poverty
Asian: 20.1% in poverty
Two or More Races: 11.8% in poverty
Hispanic/Latinx: 10.8% in poverty

The Massachusetts Department of Unemployment, Economic Research Department reports that the unemployment rate in November 2020 for the City of Revere was 10.3%; much higher than the state rate of 7.7%. This is a direct reflection on the impact of the pandemic on the City's workforce. The Massachusetts Department of Elementary and Secondary Education reports that during the 2019-2020 school year 56.1% of children enrolled in Revere Public Schools were economically disadvantaged; exceeding the state average of 36.6%. The Department also reports that English was not the first language for 68.6% of youth enrolled in Revere Public Schools; more than double the state average of 23.4; with 57.7% of children enrolled being Hispanic (state average is 22.3%). These numbers have significantly increased since CAPIC's last CARSP.

Winthrop



Winthrop is an ocean-side suburban community in Greater Boston situated at the north entrance to Boston Harbor, close to Logan International Airport. It is located on a peninsula, 1.6 square miles in area, connected to Revere by a narrow isthmus and to East Boston by a bridge over the harbor inlet to the Belle Isle Marsh Reservation. Settled in 1630, Winthrop is one of the oldest communities in the United States. It is also one of the smallest and most densely populated municipalities in Massachusetts. It is one of the four cities in Suffolk County (the others are Boston, Revere, and Chelsea), and is the southernmost part of the North Shore, with a 7-mile (11 km) shoreline that provides views of the Atlantic Ocean to the east and of the Boston skyline to the west.

POPULATION – 18,535

Median Age: 45.3

Male: 8,498

Female: 10,037

White: 93.3%

Black/African American: 2%

Asian: 6%

Two or More Races: 2.4%

Hispanic/Latino: 8.8%

Median Income: \$68,332

Per Capita Income: \$ 41,953

Poverty-Related Data

Persons in Poverty: 9.9%

Children Under 18 in Poverty: 13.1%

Males in Poverty: 8%

Females in Poverty: 11.6%

Ages 5-17 Rate: 12.8%

Ages 18-34 Rate: 4%

Ages 35-64 Rate: 11.8%

Ages 65 +: 8.2%

White: 9.6% in poverty

Black/African American: 3.5% in poverty

Asian: 13.2% in poverty

Two or More Races: 10.8% in poverty

Hispanic/Latinx: 9.3% in poverty

In 2005, the Town of Winthrop voted to change its governance from a representative town meeting adopted in 1920 to a council-manager form of government. Under Massachusetts law, as of 2006 when the new Town Charter took effect, Winthrop became a city. However, it is one of 14 cities in Massachusetts that choose to remain known as a 'town.'

The Massachusetts Department of Unemployment, Economic Research Department reports that the unemployment rate in November 2020 for the Town of Winthrop was 8.1%; higher than the state rate of 7.7%. The Massachusetts Department of Elementary and Secondary Education

reports that during the 2019-2020 school year 31.9% (increase from 2017) of children attending Winthrop public schools were economically disadvantaged; slightly below the state average of 36.6%. The Department also reports that English was not the first language for 21.7% of children enrolled, which is just below the state average of 23.4%; 16.1% of children enrolled being Hispanic (state average is 22.3%).

COMMUNITY PROFILES – UNDESIGNATED SERVICE AREAS
Arlington – Belmont – Cambridge – Everett – Lexington – Malden -Medford –
Melrose -Somerville – Stoneham – Waltham -Watertown -Winchester - Woburn

<u>Arlington</u>	
<u>Population</u>	45,147
<u>Median Age</u>	42.3
<u>18 and over</u>	34,612
<u>Male</u>	21,008 <i>4.8% in poverty</i>
<u>Female</u>	24,139 <i>5.9% in poverty</i>
<u>Median Income</u>	\$165,133
<u>Percent in Poverty</u>	5.4%
<u>5-17 yrs. 4%</u>	<u>35-64 yrs. 3.6%</u>
<u>18-34 yrs. 6.6%</u>	<u>65+ 10.5%</u>
<u>Ethnicity</u>	
<u>White</u>	36,371 -80.6% <i>*4.4% in poverty</i>
<u>Black/African American</u>	1,200 - 2.7% <i>*2.5% in poverty</i>
<u>Asian</u>	5,321 – 11.8% <i>*11.5% in poverty</i>
<u>Hispanic or Latino</u>	2,286 -5.1% <i>*5.9% in poverty</i>
<u>Belmont</u>	
<u>Population</u>	26,043
<u>Median Age</u>	41.5
<u>18 and over</u>	19,166
<u>Male</u>	12,058 <i>4.7% in poverty</i>
<u>Female</u>	13,985 <i>6.3% in poverty</i>
<u>Median Income</u>	\$120,208
<u>Percent in Poverty</u>	3.8%
<u>5-17 yrs. 5.4%</u>	
<u>18-34 yrs. 9%</u>	
<u>35-64 yrs. 4.3%</u>	
<u>65+ 5.5%</u>	
<u>Ethnicity</u>	
<u>White</u>	20,465 - 78.6% <i>*3.3% in poverty</i>
<u>Black/African American</u>	384 -1.5% <i>*14.6% in poverty</i>
<u>Asian</u>	4,207 -16.2% <i>*13.5% in poverty</i>
<u>Hispanic or Latino</u>	1,311 -5% <i>*8.8% in poverty</i>

Cambridge	
<u>Population</u>	<u>115,655</u>
<u>Median Age</u>	<u>30.5</u>
<u>18 and over</u>	<u>95,164</u>
<u>Male</u>	<u>57,088</u> <i>12.2% in poverty</i>
<u>Female</u>	<u>58,577</u> <i>13.6% in poverty</i>
<u>Median Income</u>	<u>\$105,371</u>
<u>Percent in Poverty</u>	<u>5.1%</u>
<u>5-17 yrs. 14.1%</u>	<u>35-64 yrs. 9.8%</u>
<u>18-34 yrs. 16.1%</u>	<u>65+ 13.1%</u>
<u>Ethnicity</u>	
<u>White</u>	<u>77,487 – 67%</u> <i>*10.3% in poverty</i>
<u>Black/African American</u>	<u>12,697 – 11%</u> <i>*24.3% in poverty</i>
<u>Asian</u>	<u>18,466 -16%</u> <i>*16.6% in poverty</i>
<u>Hispanic or Latino</u>	<u>10,672 -9.2%</u> <i>*26.4% in poverty</i>

Everett	
<u>Population</u>	<u>45,856</u>
<u>Median Age</u>	<u>30.5</u>
<u>18 and over</u>	<u>33,850</u>
<u>Male</u>	<u>22,444</u> <i>10.4% in poverty</i>
<u>Female</u>	<u>23,412</u> <i>16% in poverty</i>
<u>Median Income</u>	<u>\$60,482</u>
<u>Percent in Poverty</u>	<u>13%</u>
<u>5-17 yrs. 17%</u>	<u>35-64 yrs. 10%</u>
<u>18-34 yrs. 12.6%</u>	<u>65+ 8.4%</u>
<u>Ethnicity</u>	
<u>White</u>	<u>27,15 – 59.2%</u> <i>*13.7% in poverty</i>
<u>Black/African American</u>	<u>8,730 -19%</u> <i>*10.9% in poverty</i>
<u>Asian</u>	<u>3,161 -6.9%</u> <i>*9.9% in poverty</i>
<u>Hispanic or Latino</u>	<u>12,143 – 26.5%</u> <i>*15.5% in poverty</i>

Lexington	
<u>Population</u>	<u>33,480</u>
<u>Median Age</u>	<u>45.3</u>
<u>18 and over</u>	<u>21,165</u>
<u>Male</u>	<u>16,252</u> <i>2.8% in poverty</i>
<u>Female</u>	<u>17,228</u> <i>4.4% in poverty</i>

<u>Median Income</u>	<u>\$172,750</u>
<u>Percent in Poverty</u>	<u>2.5%</u>
<u>5-17 yrs. 2.9%</u> <u>18-34 yrs. 6.7%</u>	<u>35-64 yrs. 3.2%</u> <u>65+ 3.4%</u>
<u>Ethnicity</u>	
<u>White</u>	<u>21,889 – 65.4%</u> <i>*3.1% in poverty</i>
<u>African American</u>	<u>337 – 1%</u> <i>*2.4% in poverty</i>
<u>Asian</u>	<u>9,795 – 29.3%</u> <i>*5% in poverty</i>
<u>Hispanic or Latino</u>	<u>675 – 2%</u> <i>*2.3% in poverty</i>

<u>Malden</u>	
<u>Population</u>	<u>61,094</u>
<u>Median Age</u>	<u>35.3</u>
<u>18 and over</u>	<u>49,232</u>
<u>Male</u>	<u>29,343</u> <i>14.4% in poverty</i>
<u>Female</u>	<u>31,751</u> <i>18.2% in poverty</i>
<u>Median Income</u>	<u>\$64,178</u>
<u>Percent in Poverty</u>	<u>13.3%</u>
<u>5-17 yrs. 19.7%</u> <u>18-34 yrs. 18.9%</u>	<u>35-64 yrs. 12%</u> <u>65+ 18.1%</u>
<u>Ethnicity</u>	
<u>White</u>	<u>32,962 – 54%</u> <i>*13% in poverty</i>
<u>Black/African American</u>	<u>10,289 – 16.8%</u> <i>*21.3% in poverty</i>
<u>Asian</u>	<u>14,281 – 23.4%</u> <i>*20% in poverty</i>
<u>Hispanic or Latino</u>	<u>5,684 – 9.3%</u> <i>*28.9% in poverty</i>

<u>Medford</u>	
<u>Population</u>	<u>57,771</u>
<u>Median Age</u>	<u>35.9</u>
<u>18 and over</u>	<u>48,316</u>
<u>Male</u>	<u>27,630</u> <i>8.4% in poverty</i>
<u>Female</u>	<u>30,141</u> <i>10% in poverty</i>
<u>Median Income</u>	<u>\$76,445</u>
<u>Percent in Poverty</u>	<u>9.2%</u>
<u>5-17 yrs. 10.3%</u> <u>18-34 yrs. 13.3%</u>	<u>35-64 yrs. 6.9%</u> <u>65+ 6.5%</u>
<u>Ethnicity</u>	
<u>White</u>	<u>43,321 -75%</u> <i>*8.3% in poverty</i>
<u>Black/African American</u>	<u>5,428 – 9.4%</u> <i>*8% in poverty</i>
<u>Asian</u>	<u>6,151 -10.6%</u> <i>*16.5% in poverty</i>

<u>Hispanic or Latino</u>	<u>3,051 – 5.3% *17.4% in poverty</u>
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Melrose	
Population	28,116
Median Age	39.6
18 and over	21,675
Male	13,525 <i>3.7% in poverty</i>
Female	14,591 <i>4.5% in poverty</i>
Median Income	\$85,521
Percent in Poverty	4.1%
5-17 yrs. 5.3%	35-64 yrs. 3.4%
18-34 yrs. 3.5%	65+ 6.8%
Ethnicity	
White	24,982-88.9% <i>*3.9% in poverty</i>
Black/African American	740-2.6% <i>*12.4% in poverty</i>
Asian	1,670-5.9% <i>*5.5% in poverty</i>
Hispanic or Latino	1053-3.7% <i>*1.8% in poverty</i>
Somerville	
Population	80,434
Median Age	31.2
18 and over	68,727
Male	40,483 <i>10.6% in poverty</i>
Female	39,951 <i>13.3% in poverty</i>
Median Income	\$91,168
Percent in Poverty	11.9%
5-17 yrs. 21.2%	35-64 yrs. 7.9%
18-34 yrs. 12.8%	65+ 12.9%
Ethnicity	
White	61,130-76% <i>*10% in poverty</i>

Black/African American	5,470-6.8% <i>*28.7% in poverty</i>
Asian	7,835-9.7% <i>*16.7% in poverty</i>
Hispanic or Latino	8,667-10.8% <i>*17% in poverty</i>

Stoneham	
Population	22,144
Median Age	43.6
18 and over	17,934
Male	10,815 <i>5.8% in poverty</i>
Female	11,329 <i>4.9% in poverty</i>
Median Income	\$94,835
Percent in Poverty	5.3%
5-17 yrs. 4.2%	35-64 yrs. 6%
18-34 yrs. 2.8%	65+ 7.4%
Ethnicity	
White	20,402 - 92.9% <i>*5.1% in poverty</i>
Black/African American	602-2.7% <i>*1.4% in poverty</i>
Asian	727 - 3.3% <i>*13.3% in poverty</i>
Hispanic or Latino	828 - 3.7% <i>*8.4% in poverty</i>

Waltham	
Population	62,979
Median Age	33.9
18 and over	53,911
Male	31,034 <i>10% in poverty</i>
Female	31,945 <i>11.8% in poverty</i>
Median Income	\$85,677
Percent in Poverty	10.9%
5-17 yrs. 10.3%	35-64 yrs. 6.1%
18-34 yrs. 16.5%	65+ 9.4%

Ethnicity	
White	45,555-72.3% <i>*7.6% in poverty</i>
Black/African American	4,842-7.7% <i>*11.5% in poverty</i>
Asian	7,150-11.4% <i>*23.3% in poverty</i>
Hispanic or Latino	8,495-13.5% <i>*23.3% in poverty</i>

Watertown	
Population	35,103
Median Age	38.9
18 and over	28,327
Male	16,028 <i>7.2 in poverty</i>
Female	18,855 <i>8.5% in poverty</i>
Median Income	\$97,929
Percent in Poverty	7.9%
5-17 yrs. 10.9%	35-64 yrs. 5.6%
18-34 yrs. 9.6%	65+ 8.8%
Ethnicity	
White	29,357 - 83.6% <i>*8.3% in poverty</i>
Black/African American	712 - 2% <i>*4.2% in poverty</i>
Asian	2,980 - 8.5% <i>*6.7% in poverty</i>
Hispanic or Latino:	3,398 - 9.7% <i>*21.2% in poverty</i>

Winchester	
Population	22,677
Median Age	42.9
18 and over	15,773
Male	11,098 <i>2.3% in poverty</i>
Female	11,579 <i>2.6% in poverty</i>
Median Income	\$159,356

Percent in Poverty	2.5%
5-17 yrs. 1.1%	35-64 yrs. 1.7%
18-34 yrs. 6.2%	65+ 4.5%
Ethnicity	
White	29,357 - 83.6% <i>*1.8% in poverty</i>
Black/African American	712 - 2% <i>*10.4% in poverty</i>
Asian	2,980 - 8.5% <i>*5.5% in poverty</i>
Hispanic or Latino:	484 - 2.1% <i>*.8% in poverty</i>

Woburn	
Population	39,104
Median Age	42.9
18 and over	15,775
Male	7,413 <i>4.4% in poverty</i>
Female	8,360 <i>7.3% in poverty</i>
Median Income	\$88,745
Percent in Poverty	5.8%
5-17 yrs. 5.9%	35-64 yrs. 4.2%
18-24 yrs. 6.6%	65+ 7.1%
Ethnicity	
White	32,167 - 79.8% <i>*4.4% in poverty</i>
Black/African American	2,874 - 7.1% <i>*18% in poverty</i>
Asian	3,196 - 7.9% <i>*1.2% in poverty</i>
Hispanic or Latino:	1,957 - 4.9% <i>*17.4% in poverty</i>

Community Action Programs Inter-City, Inc. (CAPIC) delivers anti-poverty services to low-income residents of Chelsea, Revere & Winthrop. Since its inception, the agency has initiated numerous anti-poverty strategies that have resulted in restoring self-sufficiency for thousands of

area residents. The goal has always been and continues to be to assist low-income individuals and families break free from their dependence on public assistance, achieve self-sufficiency, and improve their quality of life. CAPIC serves a diverse and multi-cultural population. The vast majority of CAPIC clients are low-income and in need of numerous financial and support services.

In addition to Chelsea, Revere, and Winthrop, CAPIC also delivers energy-related services to various cities and towns through sub-contractual agreements. CAPIC's Weatherization Program (DOE and Utility funded) serves: Chelsea, Revere, Winthrop, Arlington, Belmont, Cambridge, Everett, Lexington, Malden, Medford, Melrose, Somerville, Stoneham, Waltham, Watertown, Winchester, and Woburn. CAPIC's HEARTWAP program serves: Chelsea, Revere, Winthrop, Everett, Malden, Medford, Melrose, Stoneham, Winchester, Woburn, while National Grid electric assessments are performed in Revere, Winthrop, Everett, Malden, and Medford; and Ever Source electric assessments in Chelsea, Cambridge, and Somerville. CAPIC's Responsible Payee Program also serves these additional communities.

COMMUNITY NEEDS ASSESSMENT SURVEY – DISTRIBUTION & COLLECTION SUMMARY

CAPIC conducted an extensive Community Needs Assessment in preparation for the FY'21-'23 three-year Community Assessment Report & Strategic Plan (CARSP). The process relied on both primary and secondary data to determine need as well as community priority areas, strengths, and weaknesses. A set of common network-wide community needs survey questions were developed with support from a MASSCAP consultant. CAPIC utilized the network-wide survey questions for the FY'21-'23 CARSP. CAPIC also utilized common core data sets collected and prepared by the consultant in combination with other data sources. CAPIC's Director of Planning, Development, & Operations was part of the process (active participant in the MASSCAP Planners Group) to determine the final set of survey questions.

CAPIC's Community Needs Assessment reflects Chelsea, Revere & Winthrop, which constitutes CAPIC's designated CSBG service area. It highlights the needs, problems, and concerns of those individuals and families living in poverty in Chelsea, Revere, and Winthrop which is the Agency's geographic area. The survey captured individual, family, and community needs; these findings were highlighted by each category. This provided staff and Board members the ability to prioritize needs and identify resources for each group.

When conducting an extensive community needs assessment it is extremely important to gather as much data as possible from as many sources as possible. This allows you to get a complete understanding of the needs, problems, and concerns of the individuals and families who are living in that community, while at the same time see the strengths and weaknesses of a community. Data that is gathered provides the Agency with the knowledge to identify the needs of the community, prioritize these needs, and develop measurable outcomes that can be achieved.

CAPIC also gathered information from other key sectors of the community, such as the private sector and public sector. The analysis and inclusion of this data has enhanced the Agency's ability to make sound decisions about what we as an Agency need to do to provide

comprehensive services that meet the needs of our clients and the community, while at the same time align with our mission statement. These surveys captured individual, family, and community needs and provided staff and Board members the ability to prioritize needs and identify resources for each group.

Due to COVID-19, CAPIC was not able to conduct focus groups as planned or conduct in person interviews. However, CAPIC is an active participant/member of various community-based task forces, groups, and coalitions, such as the Massachusetts Energy Director's Association (MEDA), the Revere CARES Substance Abuse Coalition, the Revere DTA Advisory Board, Winnisimmet Regional Opioid Collaborative (WROC), the Healthy Chelsea Coalition, CASA Divert (Chelsea Domestic Violence High Risk Team), Chelsea Domestic Violence Task Force, the Women's Encouraging Empowerment Advisory Board, the Winthrop Quality of Life Team, the Chelsea Substance Use Disorders Leadership Team, Chelsea Hunger Network, and Balance of State –Continuum of Care, and the Chelsea HUB – a team of community & local government agencies who meet weekly to address specific situations re: clients facing elevated risk levels. CAPIC is also an active member of the Chelsea Downtown Task Force. This involvement has provided information and community needs related data to the Agency; especially during COVID-19 as Chelsea and Revere were two of the hardest hit communities in the Commonwealth. This information was utilized while completing the Community Needs Assessment Report.

Approximately 2,000 bi-lingual (English and Spanish) surveys were sent out to the communities CAPIC serves (Chelsea, Revere & Winthrop), representing a large random population and reasonable representation of the Agency's client base as well as the residents of each community (giving the agency a 95% confidence level in data collected). The Needs Assessment was also available on-line through the agency's website, and was also distributed by CAPIC staff and Program Managers to distribute to clients. In addition, staff who live in CAPIC's service area were also asked to complete the survey. CAPIC also partnered with the Winthrop Senior Center and the Chelsea Housing Authority to distribute and collect surveys to local residents, complete survey, as were other residents of each of the communities. CAPIC's Energy Outreach Coordinator also assisted with the distribution of surveys to local residents. In addition, staff who live in CAPIC's service area were also asked to complete the survey, as were other residents of each of the communities (a total of 18 surveys were returned by non-clients). A total of 201 completed surveys were returned to the Agency.

CAPIC's Director of Planning, Development, & Operations oversees the collection, analysis, organization, and reporting of data. Such information plays a critical role in the identification of needs, the establishment of priorities, as well as the development and implementation of activities/programs to meet those needs at a community level and at an Agency level. It also provides information that is used to measure organizational improvement with an aim to enhance client/customer experience.

The surveys were registered into a computer program by CAPIC Administrative staff with oversight from the Director of Planning, Development, & Operations as well as the IT Director. Once computed, the data was presented to the Director of Planning, Development, & Operations for review and then shared with the Executive Director and the Board of Directors in a concise format. The information gathered was analyzed with secondary data, such as US Census information, Massachusetts Department of Education data, MGH health reports, WIC data,

MGH Community Health Needs Assessment, COVID-19- related data sources and reports, Massachusetts Executive Office of Labor and Workforce Development, Project Bread, and the Massachusetts Department of Public Health data. CAPIC also gathered information from various community sectors in all three communities, such as local government, faith-based, law enforcement, education, etc.

CAPIC is committed to providing comprehensive support services and resources to low-income individuals and families who need to improve their quality of life. CAPIC values our clients and their feedback. In order to evaluate their satisfaction with the services and resources that the Agency is providing, CAPIC implemented a Client Satisfaction Survey. This survey was revised in 2019 to be more user friendly. The Director of Planning, Development, & Operations worked with CAPIC's Management Team to review and revise the survey. Surveys are completed from an individual who receives a service or resource from CAPIC. The survey is available in English and Spanish, and is distributed to clients by caseworkers/staff at the time of intake. All survey information will be highlighted in the Key Findings: Community Assessment section.

INTERNAL NEEDS ASSESSMENT DISTRIBUTION & COLLECTION

CAPIC's Internal Needs Assessment is distributed to all staff members. The intent of the Internal Needs Assessment/Employee Survey is to provide employees with an opportunity to share their opinions and views regarding their experience as a CAPIC employee as well as their direct work with clients. This input is extremely helpful because of the employee's experience in dealing with at-risk, low-income clients and the chronic problems facing them and their families. The employee's perspective captures what some clients themselves cannot recognize as a barrier. The Planning and Evaluation Committee/Management Team utilizes this information to both improve employee satisfaction and job performance as well as improve service delivery to ultimately improve the lives of those served by the agency, promoting the quality of life for individuals and families agency-wide.

- The Internal Assessment was completed by 40 (33.3%) employees a decrease from 57% in FY'17. This is due to COVID-19 and the vast majority of employees working remotely since April 2020. Also, it should be noted that 14 CAPIC staff members were infected with the coronavirus. This does not take in to account the staff who had family members impacted by COVID. In previous strategic planning processes, the Director of Planning, Development, & Operations had the ability to meet with programs and employees in person and in turn get a higher response rate.
- The Internal Needs Survey tool was updated since the previous CARSP/Community Needs Assessment process and was transcribed into Survey Monkey to make it easier for employees to complete online, especially with more staff working remotely due to COVID. The link for the survey was distributed via email by the Director of Planning, Development, & Operations to all CAPIC employees. The intent of the Internal Needs Assessment/Employee Survey is to provide employees with an opportunity to share their opinions and views regarding their experience as a CAPIC employee. The survey gives employees a platform in which to increase their engagement and provide another way for them to inform management as to how they perceive their work environment.

- The survey tool asked questions ranging from satisfaction with employment at CAPIC to identification of chronic client problems. Results were then collected and analyzed by the Director of Planning, Development, & Operations and shared with the Executive Director, Director of Human Resources, as well as the Management Team. Results are extremely beneficial in analyzing current agency strengths and weaknesses. On-going analysis of this assessment tool will aid in the development of policies, strategies and service delivery methods throughout the Agency.



KEY FINDINGS: COMMUNITY ASSESSMENT

SURVEY DEMOGRAPHICS – 201 RESPONDENTS

Of the 201 Community Needs Assessment Survey respondents 53% were Hispanic. This is an increase from 36% in FY’17. The majority of respondents were between the ages of 25-44 (42%), with 35% between the ages of 45-65. In addition, 66.87% were female (consistent with 66.5% in FY’17) and 33.13% of respondents were male (consistent with 33.4% in FY’17). The race breakdown of respondents is as follows: 71.5% white, 7.76% Black, 7.76% Multi-Race, 3.45% Asian, 3.45% American Indian or Alaskan Native, and 6.03% other. 56.1% of respondents were Chelsea residents, 27.4% Revere residents, and 13.5% Winthrop residents.

The survey also captured income-related data; 69% of respondents’ monthly income before taxes was under \$2,000 a month (under \$24,000 annually); 19.72% was \$2,000 - \$4,000 a month (\$24,000 - \$48,000 annually); 7.04% was \$4,001 - \$6,000 a month (\$48,012-\$72,000 annually). Based on this information it is clear to that the vast majority of respondents are low-income and living below the poverty level. Furthermore, 41.4% indicated that they are not able to pay their bills on time each month; with 11% being unsure if they are able to do so; 69% do not have \$500 set aside for an emergency.

Community Needs Assessment – Results & Findings

GREATEST BARRIER	CAPIC RESPONDENTS
Affordable Housing*	70.1%
Ability to Pay Heating/Utility Bills	49.1%
Access to Food*	48.5%
Jobs	45.6%

*Denotes the same barrier (not same order) as indicated by respondents three years ago.

1.Affordable Housing

Individual or Family Level & Community Level (due to COVID) Need Statement: Affordable housing opportunities throughout the local area; the absence of safe, affordable housing stock, resulting in homeless crisis, overcrowding, and increase in hotel/motel population as well as an emotional crisis for low-income at-risk individuals and families.

Affordable housing was the top need identified in the Community Needs Assessment survey conducted by CAPIC in early 2020; 70.1% of respondents indicated this was the biggest need facing their community. Housing has been a critical problem for many years, and it continues to challenge CAPIC and its clients (*individual, family & community need*). The face of homelessness continues to change and the problem is more difficult to address with the lack of rental assistance funds, lack of affordable housing, overcrowded living situations, looming evictions, increase in food costs, and the continuous rise of fair market rents. 56% of survey respondents indicated that their living expenses (rent/mortgage, heat, and food) are too high with 41.4% not able to pay their bills on time each month. Housing instability is a direct result of high rents and has resulted in multiple households doubling and tripling up in order to be able to afford an apartment.

The chart below depicts the 2020 fair market rents for Chelsea, Revere, and Winthrop as reported by HUD. All rents reflect an increase since the previous Community Needs Assessment was conducted. The vast majority of CAPIC clients are not able to afford these rents.

2020 Fair Market Rents

Unit Size	Monthly Rent
Efficiency	\$1,715
One -Bedroom	\$1,900
Two-Bedroom	\$2,311
Three-Bedroom	\$2,880

Per the US Census there is a shortage of available units in CAPIC’s service area; 95.8% of housing units are occupied in Chelsea; 94.3% in Revere, and 93.6% in Winthrop. Preliminary results (released December 2020) from the “Chelsea Eats Survey Project conducted by the Harvard Kennedy School/Rappaport Institute indicates that 68.2% of respondents are concerned that they do not have enough income to pay rent or mortgage; 37% were not confident that they could pay their next month’s rent or mortgage. Additionally, Continuum of Care/Balance of State (CAPIC is an active member) reports that there are 1,119 total homeless households in the Balance of State areas; 806 are in emergency shelter, 155 in transitional housing and 158 are unsheltered.

During 2019, the City of Revere partnered with the Metropolitan Area Planning Council to conduct a city visioning and master planning process called “Next Stop Revere”. In this process more than 70 percent of residents listed affordable housing as a top priority. The “report” states that on average, housing costs reach to 28.65% of the median income, with low-income individuals on average spending 115.65% of their income on housing in Revere.

In 2019 MGH conducted the Community Health Needs Assessment (CHNA). CAPIC was an active participant in this process with membership in working groups and the steering committee; reviewing data and survey tools. The report notes, that this was the first CHNA ever in which housing (safe, affordable, and stable) and economic issues rose to the top of the priority needs list. The report goes on to state: “Unaffordable housing increases risk of eviction and gentrification. According to the ACS 2012-2016 data, 37% of all households in Massachusetts—renter and owner—were cost burdened (meaning they pay 30-50% of their monthly income on housing). In North Suffolk, residents in Chelsea (41%), Revere (51%) and Winthrop (47%) indicated they are cost burdened.” The CHNA also discussed evictions and the disparities in fears of eviction. “Compared to 11% of non-Hispanic/Latino survey respondents, 23% of Hispanic-Latino survey respondents fear they will be evicted or foreclosed due to lack of rent or mortgage payment. Survey respondents in Revere (44%), Chelsea (30%), and Winthrop (23%) expressed fear of homelessness in the next year.”

The MA Department of Elementary and Secondary Education estimates that in the 2017-2018 school year, there were 463 homeless youth in Chelsea (including those doubled up with others), 191 in Revere, and 14 homeless youth in Winthrop.” It should also be noted that in 2018, CAPIC worked closely with the Revere Public Schools to identify homeless youth. CAPIC worked with a total of sixteen (16) youth (ages 16-24); all of whom were homeless (couch surfing) due to substance use/alcohol-related issues. CAPIC provided these youth with clothing, food, comprehensive intake, referral to legal services, as well as substance use support, counseling, etc. One of the biggest barriers is lack of funding to enhance services that are directed at this specific population of homeless youth who are 16-24. Also, lack of shelters and transitional housing for youth in Chelsea and Revere as well as appropriate housing options for youth are lacking in CAPIC’s service area. Prior to COVID-19, CAPIC conducted a Homelessness Survey; 38.3% of respondents are not able to pay their rent or mortgage each month, 47% fear that they might get evicted due to no-payment of rent, and 8% report being homeless over the past two years.

The available housing stock in the tri-community area is modest, average of 3.3% as opposed to an average 10% national figure, making finding available safe housing difficult, let alone securing safe, *affordable* housing for people on fixed incomes paying far more than 50% of income on housing expense. Nationally, an average of 67% of US citizens own their home, a much higher rate than the 38.9% of Chelsea residents who are homeowners. (Per US Census data)

COVID-19 Impact

****It should be noted that CAPIC conducted and completed its Community Needs Assessment survey prior to the COVID-19 pandemic.***

The COVID-19 pandemic has had a severe impact on CAPIC’s service area; Chelsea and Revere are two of the hardest hit cities in the Commonwealth of Massachusetts and continue to see increases in positive cases. This has had devastating effects in both communities. Since mid-March, CAPIC has seen an alarming increase in calls for rent/mortgage assistance as well as food and basic necessities. CAPIC’s request for rental assistance has quadrupled since the pandemic hit in March; with a waiting list of those who are need of help to avoid displacement.

Chelsea is in the throes of the most serious housing crisis the city has seen in decades. Revere is close behind. This housing crisis had been building as Boston-area rents skyrocketed in the past few years; however, the COVID-19 pandemic exacerbated the crisis and brought a sense of despair to a community already struggling and burdened by a myriad of issues.

- In July 2020, the Boston Foundation reported that the City of Chelsea had both the Commonwealth’s highest rate of overcrowded housing and by far the highest rate of COVID-19 infections “much more than in cities such as Somerville and Cambridge which have similarly dense populations but far less crowding in housing.”
- Due to the pandemic, individuals and families are unexpectedly out of work, without an income, and having to make difficult decisions between rent, food, basic necessities, utilities, etc. Many of these individuals and families are immigrant families and were living pay-check-to-pay-check before the pandemic and experiencing financial hardships. The current situation has only exacerbated these issues for at-risk individuals and families. Prior to the pandemic, the crisis of housing affordability heavily impacted Chelsea and Revere, the impact of COVID has worsened the housing crisis.
- High rates of asthma in these communities combined with the fact that many service-sector employees live in crowded or multigenerational homes, conditions in which the virus flourishes, has proved devastating. There are a high number of “essential” workers in these communities so many families have continued to be exposed to the virus even as members of the same household faced layoffs.
- A Boston Globe article from August 19, 2020, highlighted housing crisis concerns in Revere “At the same time, other parts of Revere, away from the beach, are wrestling with an economic crisis brought on by the virus. Unemployment tops 27 percent in Revere, where many residents work in hotels, restaurants, and other industries devastated by COVID-19. Worries about a wave of evictions — when the state’s moratorium on them eventually ends — loom large. Many are concerned about the sort of rapid turnover that has pushed working-class immigrants out of neighboring East Boston.”
- Due to the outbreak of the coronavirus, residents of Chelsea are facing critical economic hardship. In October 2020, the City of Chelsea, in collaboration with community partners, funded a bi-lingual housing legal clinic to assist residents with a variety of housing issues ranging from landlord mediation to legal representation and services for eviction proceedings. Revere and Chelsea have also established rental assistance programs for residents facing eviction. CAPIC is also a member of the Chelsea and Revere Pandemic Response Teams.

2. Ability to Pay Heating or Utility Bills

Individual or Family Level Need Statement: The escalating cost of heat and utilities coupled with the absence of energy conservation measures in low-income homes place many low-income households in financial crisis and possible ill-health.

The second top need identified in the Community Needs Assessment survey was the inability to pay heating and utility bills – 49.1% of respondents indicated that this is their greatest concern (*individual & family need*). In addition, 41.4% of needs assessment respondents indicated that

they are not able to pay their bills on time each month. This can also be interpreted as a lack of income. In the needs assessment conducted in FY'17, 41% of respondents indicated that lack of income was their greatest problem.

In FY'20, CAPIC provided 2,105 households with emergency utility payments. Many vulnerable households facing high energy costs are forced to make household budget trade-offs that jeopardizes health, including choosing heat over food or health care. CAPIC anticipates fuel assistance numbers to increase over the next three years as more individuals and families are unemployed and many have seen a decrease in hours and benefits. It should also be noted that undocumented individuals are not eligible for fuel assistance benefits due to federal regulations. This has directly impacted CAPIC's energy assistance programs as many individuals and families in the service area are undocumented. There is a lack of energy-related resources for these individuals and families.

CAPIC is aware that the vast majority of their clients are living below the poverty level and struggle to cover monthly bills, rent/mortgage, and provide food and basic necessities for themselves and their families. 26.8% of Needs Assessment survey respondents indicated that they work full-time but their pay doesn't cover their expenses and 31% are living on a fixed income (pension, Social Security benefits, etc.).

COVID-19 Impact

The pandemic has brought on an economic crisis in Chelsea, Revere, and Winthrop. Many residents work in hotels, restaurants, and other industries devastated by COVID-19. Many of the local areas hospitality jobs are gone, and most won't be coming back. The latest figures show Revere now has the second highest unemployment rate of any city in the state. Its jobless rate of 25.6 percent puts it behind only Lawrence.

- Many local (especially in Chelsea) residents are ineligible for government assistance like unemployment and federal stimulus checks and, consequently, families need urgent help as they face health and financial hardship. *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.*
- Lack of public benefits—two-thirds of the Chelsea population is Latinx, and some residents have an undocumented immigration status; while undocumented workers may contribute to social security, they do not receive public benefits, such as stimulus checks – *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.* It should also be noted that undocumented individuals are not eligible for fuel assistance benefits due to federal regulations.

3. Access to Food

Individual or Family Level & Community Level (due to COVID) Need Statement: Increase access to food and basic needs for at-risk individuals and families.

The majority of CAPIC clients live between 75% and 100% of the poverty level. In the Community Needs Assessment, 48.5% of survey respondents indicated “access to food” as the top need impacting people in their community. 56% of survey respondents indicated that their living expenses (rent/mortgage, heat, and food) are too high. The Harvard Kennedy Rappaport

Institute “Chelsea Eats Survey Project” preliminary report notes that 50% of respondents replied that it’s “true/sometimes true” *that their children were not eating enough because we couldn’t afford enough food.* 70.2% of survey respondents stated that “during the last seven days that they or someone from their household got free groceries or a free meal.” Furthermore, 69.45 stated that they don’t have enough income for food. It is clear that food insecurity has escalated in recent years and continues to be a critical need in Chelsea, Revere, and Winthrop.

According to the 2019 WIC Needs Assessment, only 50.3% of eligible individuals in Winthrop received benefits; 58.9% in Revere; and 67.7% in Chelsea. Hunger and food insecurity negatively impact health and are associated with a higher risk of chronic health problems. MGH reports that this is a significant issue in Chelsea, where one in eight residents struggles with food insecurity. Food insecurity has greatly impacted all aspects of CAPIC programming and direct services. All programs have clients who are in need of assistance with food and basic necessities. CAPIC is dedicated to understanding the factors that contribute to hunger and how it impacts all aspects of one’s life.

COVID-19 Impact

Since mid-March, CAPIC has seen an alarming increase in calls for food and basic necessities. CAPIC’s request for assistance with food has quadrupled since the pandemic hit in March. Due to the pandemic, many individuals and families are unexpectedly out of work, without an income, and having to make difficult decisions between rent, food, basic necessities, utilities, etc. Many of these individuals and families are immigrant families and were living pay-check-to-pay-check before the pandemic and experiencing financial hardships. The current situation has only exacerbated these issues for at-risk individuals and families.

- Massachusetts has experienced the largest relative increase of food-insecure individuals in the nation due to COVID-19. And the highest increase of food-insecure children at 102%, according to analysis by Feeding America.
- Food insecurity was already an issue that existed pre-pandemic, it is now even more dire and urgent than ever before. *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.*
- Calls to food assistance hotlines have also risen during the pandemic. Project Bread, a Massachusetts statewide anti-hunger organization that connects people to reliable sources of food, while advocating for policies that make food more accessible so that no one goes hungry, coordinates a hotline for people struggling with food insecurity. Data from the FoodSource Hotline show that calls from around the state increased more than five times comparing July and August 2019 to the same period in 2020. The implementation of the state’s Pandemic EBT program prompted a large share of the new calls. There was also an increase in calls about SNAP (including SNAP pre-screens, application assistance and help with recertification). *Project Bread and Boston Indicators Report*
- One of the many challenges that the Town of Winthrop has faced in the wake of COVID-19 is an increase in food insecurity. More residents are relying on the local food pantry for weekly food and this has put a strain on local resources.
- CAPIC has partnered with the Chelsea Public Schools to provide free breakfast, lunch, and a snack for children enrolled in CAPIC’s After School Program – once a part-time

program for children/youth during out of school hours, this program is now full day; providing remote learning to all children/youth who are enrolled so that parents/guardians can work.

4.Jobs

Individual or Family Level Need Statement: To advance economic opportunities for low-income residents who lack sufficient income and the education/job skills to increase their income and quality of life.

Many low-income individuals are unemployed and in need of employment skills, training, career counseling, and career awareness services. In the FY’20 Community Needs Assessment 45.6% of respondents indicated that “jobs” was the top need impacting the local community. 11.5% of Needs Assessment survey respondents indicated that they can’t find a job; 13.4% can only find part-time work. In addition, 32.1% of respondents reported that they need job training/education or training. Issues around obtaining and retaining income can include: barriers to employment, education, stable housing, health, social/emotional health, transportation, and safety issues etc. 23.1% of respondents stated that childcare is too expensive and/or interferes with their ability to work.

As previously mentioned, the FY’20 Community Needs Assessment, 69% of respondent’s indicated that their monthly income before taxes is under \$2,000 a month, which is under \$24,000 annually. 19.7% of respondents indicated that their monthly income before taxes is \$2,000 - \$4,000 a month (\$24,000 - \$48,000 annually). The vast majority of CAPIC clients are earning minimum wage, resulting in an extremely vulnerable population who is in need of numerous financial support services and resources. CAPIC fully understands the increasing challenges for working families to meet their most basic needs and the importance of helping individuals gain the right education and skills that will allow them to earn income sufficient to make ends meet. A family’s basic needs include: housing and utilities, food, transportation, health care, personal and household items such as clothing, and for families with young children, child care. Education and employment skills will allow them to earn income sufficient to make ends meet.

The MA Department of Education reports the following enrollment data for the 2019-2020 school year: Chelsea Public Schools – 70.6% of children enrolled are economically disadvantaged; Revere Public Schools – 56.1% of children enrolled are economically disadvantaged; and Winthrop Public Schools – 31.9% of children enrolled are economically disadvantaged. It is important to note that the state average is 36.6%.

Employment & Poverty - Related Data

Unemployment Rate	Chelsea	Revere	Winthrop	State
Persons unemployed *November 2020	7.8%	8.3%	6.5%	6.2%

* Massachusetts Dept. of Unemployment Assistance

Poverty Level	Chelsea	Revere	Winthrop
Persons in Poverty	19%	13.1%	9.9%
People in poverty or near poverty	43%	34.8%	21.2%

* Based on US Census- denotes 2014-2018 5-Year Estimate data.

The 2019 MGH Community Health Needs Assessment/North Suffolk Community Survey, 23% of all respondents selected poverty as a top health concern. Participants suggested more and better employment and educational opportunities are needed to support higher incomes and cultivate a more financially stable community.

COVID-19 Impact

The pandemic has brought on an economic crisis in Chelsea, Revere, and Winthrop. Many residents work service jobs in the food and hospitality industries; during the pandemic many of these jobs disappeared, leaving people unemployed without a social safety net. The economic, social, and health impacts of the COVID-19 pandemic were immediate and dire for the many individuals and families who live one paycheck away from serious financial hardship. COVID-19 has magnified the challenges within these communities that have long struggled with unstable and unaffordable housing, food insecurity, low wages, lack of English proficiency, and high rates of uninsured.

A Washington Post article on immigrant communities battling the coronavirus shared a quote by Roy Avellaneda, President of the Chelsea City Council and a local business owner: “The people who live here are people who can’t afford to take a month off work. People who need that check because they don’t have savings; people who either go to work or they don’t eat,” noting that the thousands of undocumented people in the city do not receive unemployment compensation. “All of the assistance that was being offered on the federal level for stimulus checks was not going to happen here, was not going to our crowd.” This sums up the reality for residents of Chelsea, Revere, and Winthrop during this unprecedented time.

- “While rates of unemployment were already high, they skyrocketed as a result of the pandemic.” The unemployment rate in Chelsea is now 24%, which is one of the highest unemployment rates in the country, if not the highest,” says Ronald Fishman, community coordinator at the Healthy Chelsea Coalition.’ *MGH Report: Impact of COVID-19 on Underserved Communities: Chelsea and Revere.*
- Many residents are at risk due to their work; working in essential sectors (food establishments) and engaged with high levels of public interaction, such as healthcare and personal services.

- Many residents work in hotels, restaurants, and other industries devastated by COVID-19. Many of the local areas hospitality jobs are gone, and most won't be coming back. The latest figures show Revere now has the second highest unemployment rate of any city in the state. Its jobless rate of 25.6 percent puts it behind only Lawrence.
- “By mid-March, layoffs caused by the pandemic had exacerbated deep-seated economic insecurity among Chelsea’s residents, 20 percent of whom live in poverty, according to the U.S. Census. Those who suddenly could not work — because they were sick or had been laid off — faced hunger and destitution. Those who could fill essential roles worried about catching the virus and infecting their family members.” Washington Post Article

OTHER NOTABLE NEEDS ASSESSMENT FINDINGS

- 38.6% of respondents indicated mental health services as a top priority (*individual & family need*)
- 31.5% of respondents indicated drug and alcohol services as a top priority (*community need*)
- 29.25 of respondents indicated immigration issues as a priority. (*individual & community need*)
- 18% of respondents don't have reliable transportation (*individual need*) – this is a slight decrease from the FY'17 Needs Assessment in which 28.3% indicated that transportation was a problem. This decrease could be a result of the MBTA Silver Line being extended into Chelsea in 2018. Also, the emergence of Uber and other ride share options have provided residents with better access to transportation.
- 68.7% of respondents don't have at least \$500 set aside for emergencies (*individual and family need*)
- At-risk, street-involved individuals took part in the Needs Assessment through CAPIC's Substance Use Disorders/Mobile Outreach Program; giving a voice to a population that rarely has its needs documented.
- 98.5% of clients were satisfied with the assistance they received from CAPIC (CAPIC Client Satisfaction Survey)

STAKEHOLDER SURVEY FEEDBACK

CAPIC asked community stakeholders to take part in the FY'20 Community Needs Assessment process to better determine what problems and priorities face the individuals and families that we/they serve. The survey also asked stakeholders to list what they see as the strengths and weaknesses of the community in which they represent. Individuals from health care organizations, faith-based organizations, local government, school committees, public schools, local human service agencies and organizations are among those who completed surveys. Below is a synopsis of the Stakeholder Survey responses.

Stakeholder list by sector: *Health Care:* MGH Chelsea and Healthy Chelsea; *Community & Faith-Based:* Those Who Can for Those in Need (Winthrop), Chelsea Eviction Task Force, & Light of Christ Chelsea; *Private & Public Sector:* Revere Police Department & Chelsea Inspectional Services Department; *Education:* Chelsea School Committee & Chelsea Public Schools

Below is a synopsis of the Stakeholder Survey responses.

Top three most significant issues facing your community:

Unemployment/underemployment, food insecurity, housing, health disparities, English language skills, education deficiency, & undocumented status of many residents,

- COVID-19 related issues – evictions, lack of jobs, and food insecurity
- CAPIC’s Executive Director & Dir. Planning, Development, & Operations are active members of the Chelsea Eviction Task Force that meets weekly. The goal of the task force is to coordinate communications and direct services related to emergency housing, legal services, and eviction prevention as a result of COVID-19. This group has identified emergency rental assistance and emergency shelter availability as two critical gaps in Chelsea (and Revere) and is working on drafting a housing resource guide.

COMMUNITY STRENGTHS

- Active inter-agency communication and collaboration to tackle the diversity of the community
- Community coming together to help those most vulnerable
- Collaboration between community-based agencies
- Diversity
- Close proximity to Boston
- Good public transportation system
- Plentiful workforce

COMMUNITY WEAKNESSES

- Poverty
- Lack of assistance for rental needs and utility emergencies
- Aging housing stock
- High number of undocumented residents without government resources/under constant threat of ICE
- Lack of shelters for homeless
- High pollution
- Dense population (COVID-19)
- Unbalanced gentrification



KEY FINDINGS: INTERNAL ASSESSMENT

CAPIC conducted an extensive Community Needs Assessment in preparation for the FY'21-'23 CARSP. This included an Internal Needs Assessment that was distributed to all CAPIC employees. The Assessment was completed by 40 (33.3%) employees a decrease from 57% in FY'17. This is due in part to COVID-19 and the vast majority of employees working remotely since April 2020. Also, it should be noted that 14 CAPIC staff members were infected with the coronavirus. This does not take into account the staff who had family members impacted by COVID. In previous strategic planning processes, the Director of Planning, Development, & Operations had the ability to meet with programs and employees in person and in turn get a higher response rate.

The Internal Needs Survey tool was updated since the previous CARSP/Community Needs Assessment process and was transcribed into Survey Monkey to make it easier for employees to complete online, especially with more staff working remotely due to COVID. The link for the survey was distributed via email by the Director of Planning, Development, & Operations to all CAPIC employees. The intent of the Internal Needs Assessment/Employee Survey is to provide employees with an opportunity to share their opinions and views regarding their experience as a CAPIC employee. The survey gives employees a platform in which to increase their engagement and provide another way for them to inform management as to how they perceive their work environment.

CAPIC understands the importance of letting employees know that their voice is being heard and that it can make a difference within the Agency. The Planning and Evaluation Committee/Management Team utilizes this information to both improve employee satisfaction and job performance as well as improve service delivery to ultimately improve the lives of those served by the agency, promoting self-sufficiency agency-wide.

The survey tool asked forty-two (42) questions ranging from satisfaction with employment at CAPIC to identification of chronic community-based problems. Surveys could be completed anonymously if desired, however, employees were given the option to note which program they work in at the Agency. Results were then collected and analyzed by the Director of Planning, Development, & Operations and shared with the Board of Directors as well as the Executive Director, Director of Human Resources, and the Management Team. Results are extremely beneficial in analyzing current agency strengths and weaknesses. On-going analysis of this assessment tool will aid in the development of policies, strategies and service delivery methods throughout the Agency. CAPIC's Management Team will continue to discuss these results and use them to further evaluate and improve the work environment for all employees.

FY’21-’23 INTERNAL NEEDS ASSESSMENT RESULTS

Employees identified the following as the prominent barriers facing CAPIC clients.

Top Need	2ND Top Need	3RD Top Need
Housing	Food	Heat/Energy Assistance
(same as 3 years ago)	(was perceived as 3 rd biggest need 3 years ago)	

Employees also indicated that the following services are not being provided in the communities that we serve:

- **Housing (access to affordable housing & rental assistance) **this was noted by employees 3 years ago as well***
- **Adequate medical/health services for immigrants**
- **Employment – lack of access to job opportunities**
- **Financial guidance**
-

A scan of the internal and external environment is an important part of the strategic planning process. Environmental factors internal to the Agency can be classified as strengths and weaknesses. The Internal Needs Assessment continues to be a valuable tool in CAPIC’s self-analysis as an agency. Results/feedback includes both agency strengths and weaknesses.

STRENGTHS

- 100% of CAPIC respondents said they know and understand CAPIC’s Mission (increase from 90% 3 years ago)
- 96% believe CAPIC is fulfilling its mission (increase from 89% 3 years ago)
- 95.2% believe they have seen an improvement in CAPIC’s delivery of service since their date of hire (increase from 78% 3 years ago)
- 95% report having a positive relationship with management (Executive Director, Human Resources, Fiscal, and Planning, Development, & Operations)
- 48% of employees have relationships with other community-based organizations that covers many different areas of expertise and support
- Dedication of staff and colleagues cited most often in narrative as agency’s greatest strength.

WEAKNESSES

- 40% of employees indicated that compensation/wage practices are not fair within their program. This was primarily within early education programs and in relation to low wages for teachers.
- Internal communications across all programs – more consistent messaging
- Lack of funding for client emergencies, such as housing, shelters, etc.

CAPIC will work to overcome cited weaknesses, using this as an opportunity to promote better service delivery and employee relations. Increased communication has been a focus over recent

years and will continue to be over the next three years. CAPIC is dedicated to identifying and securing alternative funding sources to meet the needs of the local residents, as well as increase programming to address gaps in services and resources for local individuals and families.

COVID-19 Impact

It should be noted that CAPIC also conducted a COVID-19 Employee Survey to better understand employees' thoughts and concerns surrounding the COVID-19 pandemic and CAPIC's efforts to provide a safe environment for all employees. CAPIC's Head Start Program conducted its own survey before re-opening the program and bringing staff back to classrooms, etc.

- In response to the COVID-19 pandemic, CAPIC had to make numerous adjustments to operations in order to continue to provide at-risk individuals and families with critical resources and services during this challenging time. For the first time in the Agency's fifty-three years of operation, all locations and offices were closed to the general public. The majority of CAPIC programs and offices are located in Chelsea and Revere. Chelsea is the hardest hit community in the Commonwealth. Revere is the seventh hardest hit with positive COVID tests. In order to adhere to guidance from local elected officials, the Governor of Massachusetts, the Center for Disease Control (CDC), and the Department of Early Education and Care (EEC), all staff worked remotely; working diligently to transition from in person meetings and engagement with clients to virtual engagement and provision of resources.
- All CAPIC meetings were shifted from in person to ZOOM meetings (including Board of Director's meetings); remote technology capabilities were enhanced for staff so that remote work could take place in an efficient manner and communication with clients could continue while offices were closed/closed to the public. Also, in response to the pandemic, CAPIC's Management Team meetings went from monthly in person meetings to weekly Zoom meetings. This has provided a forum for administrative staff (Executive Director, Human Resource Director, Director Planning, Development, & Operations, IT Director, & the Finance Director) and Program Directors to discuss the impact of COVID on overall agency operations as well as employees and their families, direct services for clients, and the communities the agency serves.

Board Self-Evaluation Survey

CAPIC is governed by a twenty-one member community-based Board of Directors that represents the public, private, and low-income sectors of Chelsea, Revere, and Winthrop. CAPIC utilized a Board Self-Evaluation Survey tool, to determine the Board's knowledge of its role, knowledge of the agency (programs, services, mission), and its judiciary responsibilities. This information is an important piece of the overall analysis of the agency and its strengths and weaknesses. The Director of Planning, Development, & Operations developed the Board survey tool.

The Board Self-Evaluation Survey Tool was comprised of a total of 22 questions. Board members were asked to anonymously (if desired) fill out the survey and return it to the Executive Director. The survey reflected members involvement with the agency, their relationship with the

Executive Director and other board members, participation in meetings and the decision making process for the agency, and members satisfaction of being on the board. It should be noted that CAPIC Board members have been engaged in all aspects of the Agency's response to COVID-19. The following are findings of the survey.

STRENGTHS

- 100% of board members find their experience serving on the board to be a satisfying and rewarding experience
- 100% of board members understand and support CAPIC's mission
- 100% respect the confidentiality of the Board's Executive Sessions
- 100% of board members are knowledgeable of CAPIC's programs and services
- 100% report that they have a good working relationship with the Executive Director and other board members
- 100% report that they understand CAPIC's financial statements