

MEMORANDUM

TO: Members of City Council

FROM: Jane S. Brautigam, City Manager
Paul J. Fetherston, Deputy City Manager
Karen Rahn, Director, Human Services
Wendy Schwartz, Human Services Planning Manager
Valerie Watson, Human Services Planner

DATE: May 28, 2013

SUBJECT: Human Services Overview

I. PURPOSE

The purpose of this study session is to provide information on the current city and community context of human services programs and investments, as background for the update to the Human Services Master Plan, beginning in mid-2013 and for the 2014 budget process.

II. QUESTIONS FOR COUNCIL:

1. Does council have any questions or feedback regarding the information presented?
2. Does council request any additional analysis on any issues?
3. Does council have feedback on policy and budget issues (page 19) to be assessed for Master Plan update?
4. Does council have feedback on how council would like to be involved in or informed of community funding allocations or process?

III. BACKGROUND

Human Services in Boulder

The Human Services Department (HS - previously the Housing and Human Services Department) was created in October 1973 by Boulder Municipal Ordinance #3949. The ordinance stated, in part, that HS was “charged with the responsibility of providing the city government with continuous evaluation of social problems and conditions within the community and with the means and capacity to respond effectively and affirmatively to such social problems and conditions.” Further, HS was to enable the city to coordinate and cooperate with appropriate federal, state and local public and private agencies, institutions and civic action groups and citizens to work toward solving social problems and improving social conditions.

When HS was created, communities throughout the nation were being challenged by the reduction and/or elimination of many federal social programs, as they are today. At that time community leaders recognized the connections between human services and the

overall quality of life and included social planning as a function of government. Many of the same social challenges exist today.

Human Services Master Plan

The 2006-2015 Housing and Human Services Master Plan (Master Plan) identifies the roles of the city, guiding principles and priorities for the city in providing human services. A summary of key elements related to the context of what HS does and why is below.

Mission: To create a healthy community by providing and supporting diverse (housing and) human services to Boulder residents in need.

This mission is accomplished through these guiding principles:

- Support basic needs to prevent people from falling into crisis;
- Support early intervention and prevention programs that forestall and alleviate more costly community impacts and lead to reduction of dependencies and increased self-reliance;
- Protect civil rights and foster social and economic diversity;
- Strengthen families;
- Support early childhood education and quality, affordable child care;
- Support positive youth behaviors;
- Support healthy, active and involved seniors; and
- Support social and civic engagement.

Priorities in the Master Plan are:

- Support individuals and families throughout the life cycle;
- Balance prevention, intervention and treatment programs;
- Provide for home, community and school-based services;
- Use strength-based approaches;
- Create and support collaborative partnerships;
- Build community capacity to support residents;
- Integrate social issues with community development; and
- Evaluate service outcomes to ensure cost-effective stewardship of public funds.

The Master Plan also identifies the roles of the city in human services:

As Leader and Partner:

- Evaluate social problems and conditions and respond to identified concerns;
- Work toward addressing social issues and improving social conditions through coordination and cooperation with other jurisdictions, organizations and residents;
- Pursue partnerships with other entities to ensure services are coordinated and effectively delivered;

- Develop and implement programs to address identified social and human services issues;
- Focus on regional planning to increase efficiency, reduce duplication and more readily identify emerging gaps and needs; and
- Share responsibility for human services with the county. The county provides human services, especially focusing on state and federal entitlement programs. The city encourages the county to provide services in Boulder which are provided by the county in rural areas.

As Funder:

- Fund most efficient, quality services, minimizing duplication;
- Make funding decisions based on competitive Request For Proposal (RFP) processes within funding priority areas identified in the Master Plan;
- Base RFP decisions on an organization's ability to deliver defined outcomes;
- Involve residents in developing funding recommendations through a partnership of staff and Boulder residents appointed for such purposes by the city manager; and
- Fund agencies based on specific, achievable goals and objectives to benefit Boulder residents.

As Services Provider:

- HS limits its role as a service provider to those situations where:
 - a) There is an expressed desire by city council and community;
 - b) There is a demonstrated need that cannot be met through other sectors; and/or
 - c) The nature of the service requires a broad community collaborative effort that is more appropriate for the city to lead.

The department has spun off direct service programs to the community as local organizations developed capacity to deliver the services. Examples of these programs include:

- Senior Adult Day Care Program to CareLink;
- Senior Nutrition Program to Meals on Wheels;
- Senior Tax Aid Program to AARP;
- Home Ownership Training Program to Boulder County;
- Early Childhood Council to a stand alone organization; and
- Prevention and Intervention Program staff to Mental Health Partners.

City of Boulder Human Services

Current community context

As identified in the Master Plan, the context for the city to provide or fund human services is primarily to address social welfare needs of residents in the community, particularly focused on those that need a social safety net or are at risk of falling into dependency on public and community services to sustain themselves e.g., low-income,

disabled, at-risk of health or safety issues, or those whose human or civil rights are threatened. This anticipates supporting the safety net for residents, which contributes to overall individual well-being and livability of the community, and to attracting business, industry, and community development activities which enhance community sustainability. Boulder has a reputation as one of the best places in the country to live and work because of the many high-quality community characteristics. Boulder is also at risk of losing economic and social diversity due to affordability issues and growing economic gaps between some sectors of the community.

People are social capital and as such, help drive productivity. The health of community social capital is of strategic interest for local governments, particularly with the public service devolution of federal and state governments. Local governments face the challenge of providing or supporting services while facing tighter fiscal limits. Current issues facing local governments are less about the value and role of municipal government in supporting human services, but more about determining the capacity to do so in an economic environment of rising costs and needs across various services local government provides; and what the strategic interests of the city are that maximize benefits to the community. Local government cannot fill all needs in the community. There are limits to the city's ability alone to affect social conditions in the community. There is increasing need to focus on stronger partnerships with other jurisdictions and community organizations and identifying common strategic interests and goals to leverage efforts.

The community landscape over the past eight years has changed significantly, largely driven by the economic downturn, beginning in 2008. Reductions in federal and state budgets have resulted in sluggish local economies and increased demands in the human services sector, placing significant pressures on local governments and nonprofits to close gaps in needs. As the current Human Services Master Plan retires, it is timely and necessary to review the city's role in providing human services, its strategic priorities, community partnerships, and aligning investments with those priorities.

Current conditions

Changes in the national, state and local economy have significant impact on quality of life of many Boulder residents. The Boulder County economy, which has experienced steady population growth, above average growth in employment and income, and below average unemployment, is improving and outpacing state and national economies, as evidenced by the following:

- The Boulder County 2011 median household income was \$65,571 compared to \$56,345 for Colorado and \$51,484 for the nation.¹
- Residential real estate activity has been improving with the number of single family homes sold increasing 18 percent between 2011 and 2012.
- City sales and use tax has increased an average of 3.3 percent per year since 2008.

¹ U.S. Census Bureau, American Community Survey, 2009-2011.

While all of these factors point to a slow but improving economy, significant concerns remain about the stability of the economy and overall picture. The gap between growth of needs for, and the cost of providing services continues to widen. Certain sub-populations in the city and county continue to experience serious and growing needs, and the demographic and economic composition of the city is changing, creating potential new needs into the future.

Gross indicators of those ongoing needs are:

- Increased demands in state and federal entitlement programs such as Colorado Works/Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP);
- Unemployment Insurance claims; and
- Increased demands to the nonprofit sector since 2008.

For working residents, costs of daily living (rent, food, child care, transportation) have outstripped increases in wages, making more households vulnerable to the need for public assistance. Impacts of the downturn resulted in more home foreclosures, higher numbers of families and individuals falling into homelessness, decreases in property values, and retirement savings devalued or wiped out. For those who have lost medical benefits, the additional burden of assuming health care costs has forced more households into foreclosure or eviction. Health care costs are cited as one of the top reasons for families falling into foreclosure and becoming homeless.²

The Boulder County Department of Housing and Human Services has seen significant increases in requests for food assistance (146 percent) and health care coverage (65 percent) over the past five years³. During this same period, there has been an increase in higher income households seeking assistance from the county. Average monthly incomes of those seeking assistance has increased approximately 17 percent.

Reports from local service providers, needs assessments and research point to several key community social issues and trends (discussed in greater detail in **Attachment A: Human Services Trends**):

- Lack of affordable and sufficient housing stock, particularly for low-income and homeless families;
- Increase in families and children in poverty and homelessness;
- Significant projected increases in the senior population and associated needs including housing, health care, daily living assistance and income maintenance;
- Shrinking middle class;
- Educational achievement gaps and lack of school readiness for low-income and Latino children;
- Need for mental health and substance abuse services;

² Robertson, C., Egelhof, R. & Hoke, M., "Get Sick, Get Out: The Medical Causes of Home Foreclosures" HEALTH MATRIX 18 : 65-105, 2008. Available at: http://works.bepress.com/christopher_robertson/2

³ Boulder County Housing and Human Services, "Proposed 2013 Budget," 2012.

- Health care access disparities among sub-populations such as low-income and Latino residents;
- Youth risk behaviors;
- Lack of employment opportunities, particularly for youth and seniors; and
- A workforce whose skills and background may be unprepared to meet future needs.

Best practice research indicates investments further upstream – before individuals and families fall into crisis – are more cost effective and lasting in the long run. While a community will not entirely eliminate the need for emergency and crisis services, focusing on prevention efforts to forestall more costly system intervention is a reasonable and sustainable approach to balance with safety net programs.

As demands and needs continue to increase, maintaining and creating a livable, safe and socially thriving community for all residents remains the challenge. This will require:

- Expanded current efforts for effective, integrated regional planning and community funding, including identifying some common community goals;
- Identifying city strategic goals and investment strategies; and
- Increased effort and resources devoted to identifying regional indicators, data collection and outcome measurement to assess ongoing success.

Regional planning efforts

HS has a long history of regional and collaborative services delivery with other governments, Boulder Valley School District (BVSD) and private entities. Expanded and intentional regional human services planning efforts have been underway for several years, including development and implementation of a countywide Human Services Strategic Plan (HSSP) and a Ten-Year Plan to Address Homelessness (Ten-Year Plan). Both efforts address the three key objectives identified above.

Collective Impact model

Collective Impact⁴ is a model of affecting change premised on the idea that large-scale social change requires broad cross-sector coordination and individual organizations to move away from isolated interventions. It challenges independent organizational action as a primary vehicle for social change. The model requires the commitment of key community stakeholders from different sectors to create common agendas for solving social problems. Fixing on a single point of the social continuum doesn't make as much impact unless all parts of the continuum improve at the same time. Evidence indicates that this broad scale approach of focusing on targeted issues for community impact has some success, such as tackling student achievement, childhood obesity and environmental cleanup.

Currently, community funders attempt to choose from among applicant agencies based on which ones can make the greatest contribution toward solving a specific social problem, and applicants emphasize how their agency produces the outcomes. Each applicant's

⁴ Kania, J. & Kramer, M., Stanford Social Innovation Review, "Collective Impact", Winter, 2011.

proposal is evaluated on its own potential to have an impact, when many organizations and programs may influence a social issue. This approach is called isolated impact, as no single organization can be solely responsible for outcomes on any significant social issue. While isolated impacts and single-agency focus clearly have significant positive impacts on the people they serve day to day, it is difficult to shift broad or ongoing community issues through this approach.

Collective Impact requires each sector of the community to understand its role in the larger community context of solving and managing social issues. Shifting from isolated impact to Collective Impact models requires a systemic approach focusing on relationships between multiple organizations and developing shared goals and objectives. It requires more time, process and resources up front to effectively implement.

Successful Collective Impact models generally have five shared conditions leading to successful alignment:

1. Common agenda;
2. Shared measurement systems;
3. Mutually reinforcing activities;
4. Continuous communication; and
5. Organization support to implement and manage.

Boulder County Human Services Strategic Plan (HSSP)

Accepted by City Council in 2008, the [HSSP](#) was the first formal attempt to develop and implement a Collective Impact-type model for human services locally. The HSSP was a broadly represented community effort to improve planning, funding coordination, and a coordinated service delivery system. The cities of Boulder and Longmont, Boulder County, United Way, nonprofits, as well as business and education representatives participated in the development of the plan. The plan identifies broad goals and strategies to accomplish the following:

1. A shared vision and principles for a human services delivery system;
2. An integrated and coordinated funding process;
3. A unified application process for all funders;
4. A plan for a unified performance measurement system;
5. A service delivery system that uses best practice and evidence-based models;
6. A safety net for the most vulnerable residents;
7. A comprehensive overview of needs and funding;
8. Maximized public benefit from all planning efforts;
9. Flexibility to meet emerging needs; and
10. A collaborative governance model.

As part of advancing these goals, government funders (Boulder, Longmont and Boulder County) have partnered on a joint, online, common grant management system (GMS) which will facilitate identifying key common community indicators, goals and outcomes. Along with each jurisdiction's funding priorities, common indicators and outcomes will also drive funding to the community. HS is the leader and project manager of the GMS effort, along with the city's IT department. Research, assessment, demonstrations and

selection of a vendor took almost one year and were completed in April 2013. The new system will be implemented this summer for 2014 fund rounds.

Ten-Year Plan to Address Homelessness

The [Ten-Year Plan](#), which is also based on a the Collective Impact model, is a blueprint for how Boulder County organizations will coordinate to prevent homelessness and create housing and supportive services to move people out of homelessness. It is focused on investing in long-term, sustainable solutions, while maintaining the social safety net.

The Plan's six goal areas emphasize:

- Prevention to forestall crisis;
- Increasing community capacity to meet short- and long-term housing needs, including rapid re-housing for those who are homeless to prevent chronic homelessness and permanent supportive housing;
- Access to mental health, substance abuse and supportive services to overcome barriers to stable living; and
- improving system coordination and efficiency.

Gaps in capital investments to address housing issues related homelessness should be more thoroughly evaluated as part of the update to the U.S. Department of Housing and Urban Development (HUD) regional Consolidated Plan, with integrated planning efforts between the Ten-Year Plan and the Consolidated Plan.

Community trends

Attachment A identifies key human services trends and issues in Boulder and Boulder County. These trends provide some context for identifying where maintaining, expanding or reducing efforts for integrated and effective regional planning and funding are, identifying city strategic goals in human services and investments, and key common community priorities for providing human services.

City investment in human services

HS has historically been funded through a variety of sources. These sources include the city's general fund, a dedicated .15 percent sales and use tax, federal, state and county grants, foundations, BVSD and private entities. The department supports an array of human services, some provided directly by the city, and others delivered by community-based organizations (CBO's) that receive grant funding through three funding processes: The Human Services Fund (HSF), Youth Opportunities Fund (YOF) and Human Relations Commission (HRC).

Community funding

In November 1992, citizens of Boulder extended a .15 percent sales and use tax for the period Jan. 1, 1993 through Dec. 31, 2012. As part of the ballot measure, tax collected was earmarked for the following:

- Forty percent for a human services fund;
- Twenty percent for a parks and recreation fund;
- Eight percent for an environment fund;

- Eight percent for a youth opportunities fund;
- Four percent for an arts and cultural fund; and
- The remainder was to be available for basic municipal services.

In addition to the dedicated .15 percent sales tax, the city added approximately \$1 million from the general fund for funding to nonprofits.

In 2009, a ballot initiative extended the .15 percent sales and use tax indefinitely to “continue general fund services such as, without limitations, police, fire, library, parks and recreation, and human services.”

Human Services Fund (HSF)

The funding level for the HSF is set each year in the budget process, from the general fund. For 2013, the funding level is \$2,084,175. The HSF is a biennial fund round, which usually starts in the spring of odd-numbered years through a Request for Proposals (RFP) for funding awards for the next two consecutive years, dependent on the city’s annual budget approvals. A committee of residents (the Technical Review Committee or TRC) with expertise in different areas, is appointed by the city manager. The TRC holds interview sessions with applicant agencies and staff provides analysis and background information for the process. Recommendations are made to the city manager for final approval. An information packet (IP) is sent to council following approvals. City Council has expressed a desire to re-examine their role in the funding process.

The six priority program areas and approximate funding percentages within the HSF, identified in the 2006-2015 Human Service Master Plan, are:

1. Area A – Early Childhood (11 percent): Focus on parenting and child development;
2. Area B – Child Care and Preschool (18 percent): Supports accessible, quality, affordable child care and pre-school programs;
3. Area C – School Age (14 percent): Supports academic success and well-being for school age children (K-12);
4. Area D – Domestic Violence and Child Abuse (5 percent): Supports services for families experiencing violence, abuse, and neglect;
5. Area E – Critical Infrastructure (50 percent): Supports safety net services including mental and physical health, emergency and transitional shelter, basic needs and self-sufficiency; and
6. Human Relations and Diversity Education (2 percent), allocated by the Human Relations Commission: Supports diversity education and civic engagement activities and events.

Rather than provide “grants” to community agencies, the city requires contracts for each funded program, containing the goals and objectives they expect to achieve for their clients. Agencies are required to report twice per year on progress toward goals. Agencies receive funding in two installments annually.

Youth Opportunities Fund

The funding level for the YOF is set each year in the budget process from the General Fund. For 2013, the funding level is \$176,443. YOF annual grants are allocated by the Youth Opportunities Advisory Board (YOAB), consisting of 16 youth members from City of Boulder high schools, appointed by the city manager. Staff support YOAB in developing and managing the funding process. The priority for all YOP funding is to support programs serving low-income, immigrant, or differently-abled youth. Grants are awarded in three categories: Annual Grants (\$116,443), Group Activities (\$35,000) and Individual (\$25,000).

- Annual Grants (maximum of \$15,000) are awarded through an application and interview process by the Grants Subcommittee, with recommendations to the full YOAB followed by city manager approval. Following city manager approval, an Information Packet is sent to City Council.
- Annual grant applicants must address at least one of the following key youth issues:
 - Key issues identified in Youth Risk Behavior Survey (YRBS).
 - Promote youth voice by engaging youth in structured aspects of civic life and/or in community dialogue on social issues;
 - Provide after-school, evening, and/or summer opportunities that likely would not otherwise be available to youth;
 - Provide services such as mentoring and leadership opportunities;
 - Provide transportation to help youth access cultural, educational or recreational opportunities or employment;
 - Provide employment-related education; or
 - Support city-sponsored after-school activities.
- Group Activities Grants (maximum of \$3,000) are awarded throughout the school year as opportunities arise to support worthwhile community youth projects and activities.
- Individual grants are awarded to youth (maximum of \$200) to support an educational, cultural or recreational purpose which enhances the well-being of a young person or reduces risk behaviors. In exchange for a grant, the student provides community service at a nonprofit organization.

The HRC

The HRC awards the Diversity Education and Civic Engagement funding of the HSF. The funding level for this category in 2013 is \$22,808. The HRC provides funding to community organizations in two categories: Community Impact (CIF) and Community Events Fund (CEF).

Both funding categories are targeted to events and projects which advance diversity education and inclusion. Specifically, the CIF supports efforts that work to build trust, overcome barriers to collaborative interaction, develop grassroots leadership and engage youth. The CEF enables members of Boulder's diverse communities to celebrate activities significant to their cultures and provide the broader population with opportunities to participate in events organized by members of Boulder's diverse range of

of cultures. All activities supported by CIF and CEF must be free admission and open to the public. In addition, the HRC funded Immigrant Heritage Week, in 2012 totalling \$7,000.

Like the HSF and YOF, HRC grantees must report on outcomes and effectiveness of grant activities.

A list of organizations and programs funded through the HSF, HRC and YOF is included in **Attachment B**. **Attachment C** identifies discretionary funding provided by local funders. This chart does not include human service federal, state or local entitlement funding, which is discussed below.

Direct services provided by HS

A complete description of programs provided directly by HS is included as **Attachment D**. As identified in the Master Plan, HS limits its role as a service provider to those situations where there is an expressed desire by city council and community; where there is a demonstrated need that cannot be met through other sectors; or the nature of the service requires a broad community collaborative effort that is more appropriate for the city to lead.

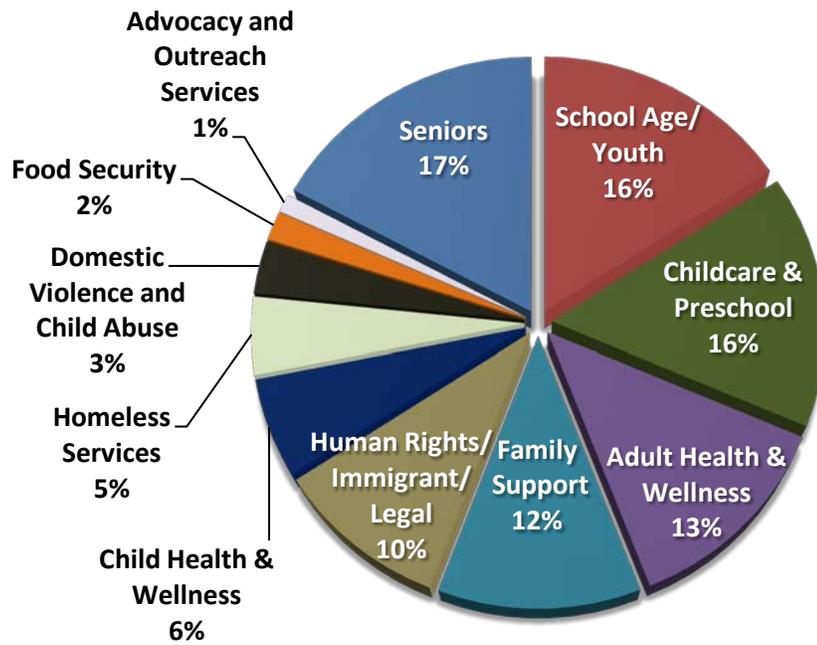
How funds are invested

Chart 14 below is categorized by programmatic area and includes both direct services provided by the department and funding to the community.

The department's largest investments are in services for seniors, and reflect costs associated with running two full-service senior centers. Seniors are a significantly growing population with potentially significant human services needs in the future.

Other large areas of investment reflect the city's current support of children, youth and families through a mix of directly operated and funded programs to support early childhood development, addressing non-academic barriers to student success, and youth development and risk-behavior reduction.

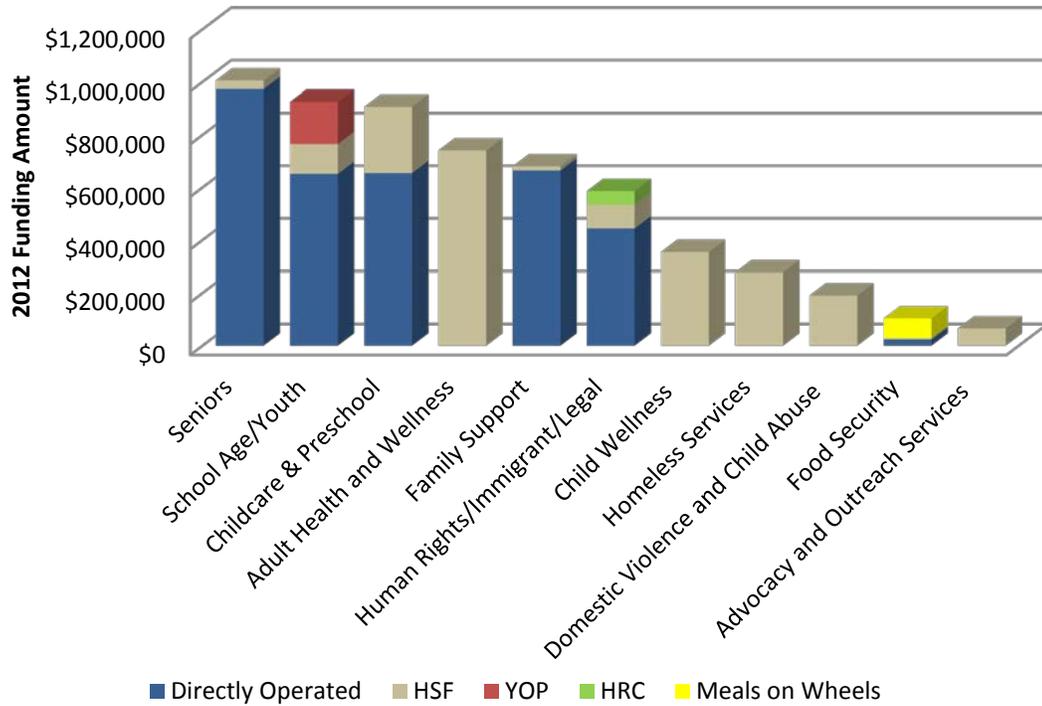
Chart 14: Where human services funding goes*



**Based on 2012 budget and includes both directly-operated programs and city contracts with CBO's. Also includes grants received from external sources, such as CDBG and BVSD.*

Chart 15 below illustrates how the funding in each programmatic area is provided to the community (directly operated and community grants).

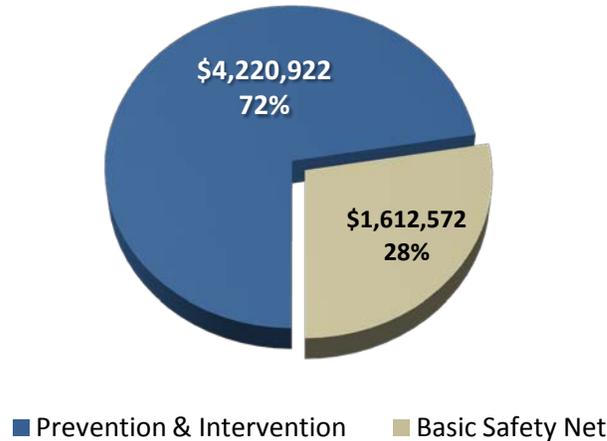
Chart 15: How City of Boulder funding reaches the community**



****Based on 2012 budget and includes both directly-operated programs and city grants to CBO's. Includes grants received from external sources, such as CDBG and BVSD. Does not include department administration or human services planning functions.**

Chart 16 below illustrates 2012 city human services prevention/intervention program funding as compared to safety net program funding:

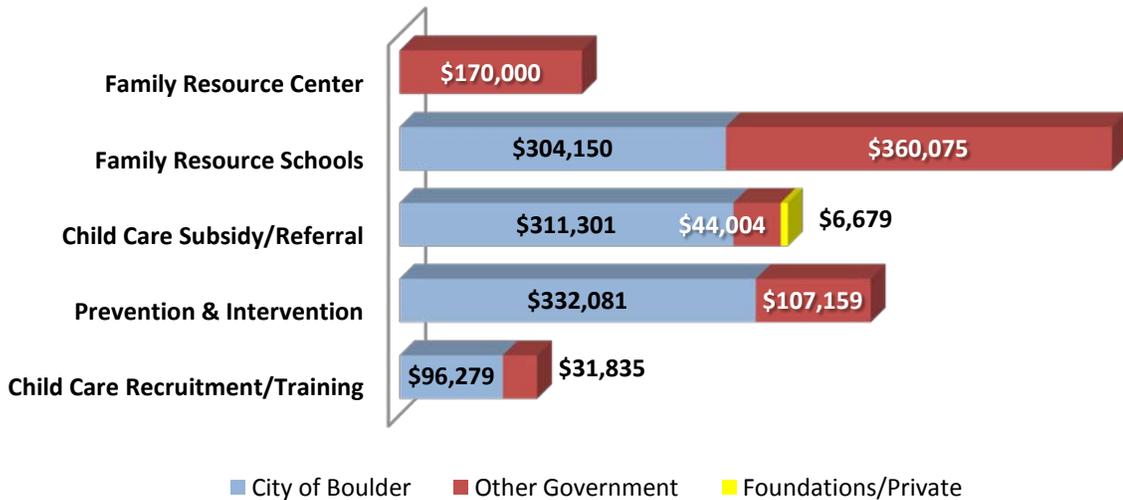
Chart 16: Prevention/intervention compared to safety net



Leveraging other funding sources for human services

The cost of some programs provided directly by HS is either partially or fully offset by resources contributed by other entities.

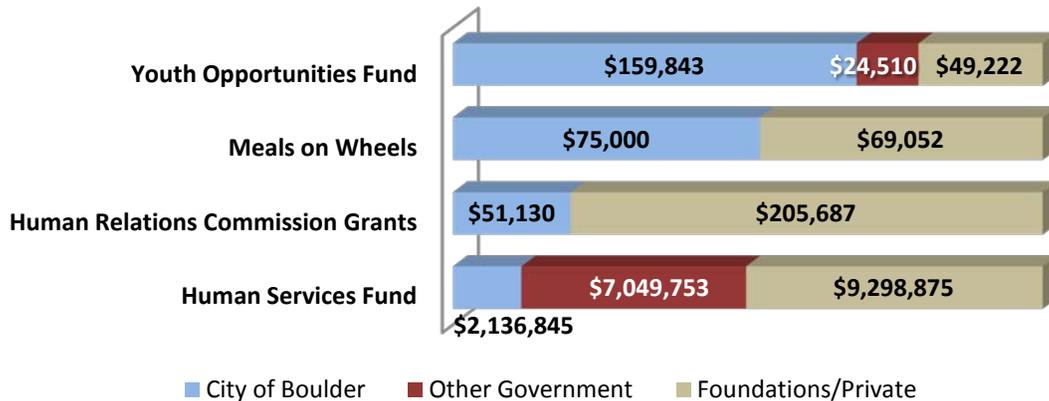
Chart 17: City-operated programs leveraging other funding sources



Information included above is from 2012 approved budget for HS, with the exception of the Family Resource Center, which is from the 2013 budget because it was not included in the 2012 budget.
 *Note: Pass through funds from Longmont are not included in the Child Care Subsidy/Referral amount.

Most City of Boulder human services grants to the community are highly leveraged by those CBO's through support from other governmental entities, foundations, and private donors. **Chart 18** below identifies other sources of funding contributed to CBO programs also supported by city Human Services Funds.

Chart 18: How community-based organizations leverage city funds*



*COB funding represents 2012 awards from Human Relations Commission, Human Services Fund and Youth Opportunities Fund grants to the community. Amounts from other funders are obtained from information provided to HS by grant applicants when they submit proposals for funding.

Boulder County Human Services investments

Boulder County also provides a range of human services directly and through community contracts. A primary role of the county is to provide administration and implementation of state human services programs, including federal and state entitlement programs. In addition, Boulder County provides a range of discretionary programs and funding countywide. **Attachment C** identifies discretionary grants made through the county commissioners' office. Discretionary funding is included in this chart as a reasonable comparison to the cities of Boulder and Longmont community funding.

Chart 19 below identifies the broad categories of programs and sources of funding for county human services programs. This chart does not include criminal or juvenile justice programs, housing programs, capital investments or the Public Health Department expenditures. The chart is intended to provide a broad overview of select county human services expenditures in the Community Services and Housing and Human Services Departments.

Chart 19: Boulder County: overview of key budget programs

Description	Local Funds \$	I/G funds \$*
Nonprofit operating	6.2M	
Mental Health Partners operating allocation	4M	
Imagine/Dedicated State Disabilities Tax		5.4M
Aging Services	380K	700K
Community Services Operating e.g., Veterans, Child Protection, Community Action Programs	771K	
Workforce Boulder County (combined local and I/G)		4M
Nonprofit capital (Worthy Cause Tax)	2.9M	
Colorado Works/ TANF		3.3M
Child Care (CCAP)		635K
Child Welfare		10.2M
Child Support and Enforcement		1.2M
Temporary Safety Net Tax (Expires 2015)	6M	
Medicaid		165M
Total	\$19.871M	\$190.435M

Source: Boulder County Housing and Human Services and Community Services.
Does not include Justice, Housing, or Public Health programs or Capital Grants.
*I/G = Intergovernmental funds.

A more extensive report on city and county programs, expenditures and partnerships is anticipated for the Master Plan update and November 2013 human services study session.

Human Services investment by peer cities

The amount of funding municipalities typically invest in human services varies. There are significant differences in what would be considered a human service expense in one locality versus another and how this funding is reflected in each city’s budget structure. In an effort to compare Boulder’s human services investment with that of other cities, the published 2012 budget documents for six peer cities were examined. Staff also surveyed peer cities and results were compiled by a consultant.

The cities of Ann Arbor, Mich.; Berkeley, Calif.; Fort Collins, Colo.; Madison, Wis.; Norman, Okla.; and Santa Cruz, Calif. were selected based on similarity to Boulder in:

- Population size;
- Population as a percentage of the county’s population;
- College students as a percentage of the city’s population;
- Area Median Income; and
- Median value of owner-occupied housing units.

In addition to Fort Collins, Arvada and Westminster were included because of their proximity along the Front Range and similar population size. **Attachment E** details peer cities' criteria comparisons for selection.

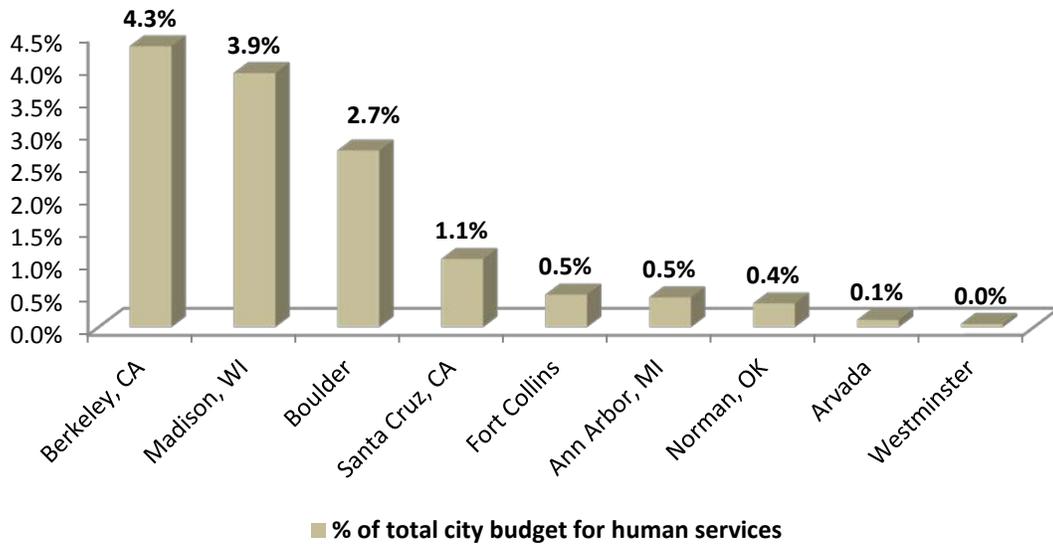
Chart 20 identifies total 2012 published city budgets. Total city budgets were used for ease of comparisons and consistency. Human services funding included programs and services specifically targeted to address resident welfare, health, well-being and safety net programs. State and county public health funding was excluded, as were recreation and library programs and capital funding. Municipal funding was included.

Chart 20: City Comparisons of human services funding

City	2012 human services funding	2012 total budget
Berkeley, CA	13,573,459*	314,100,000
Madison, WI	9,876,369	252,805,226
Boulder	6,485,030	238,960,000
Santa Cruz, CA	1,716,998	163,471,485
Fort Collins	2,239,303	447,642,428
Ann Arbor, MI	1,435,785	314,028,572
Norman, OK	668,029	183,092,179
Arvada	210,000	192,109,969
Westminster	80,000	168,200,000

**This figure may be higher, due to difficulty discerning city, county and state public health funding.*

Chart 21: Human Services investments as percentage of city budget

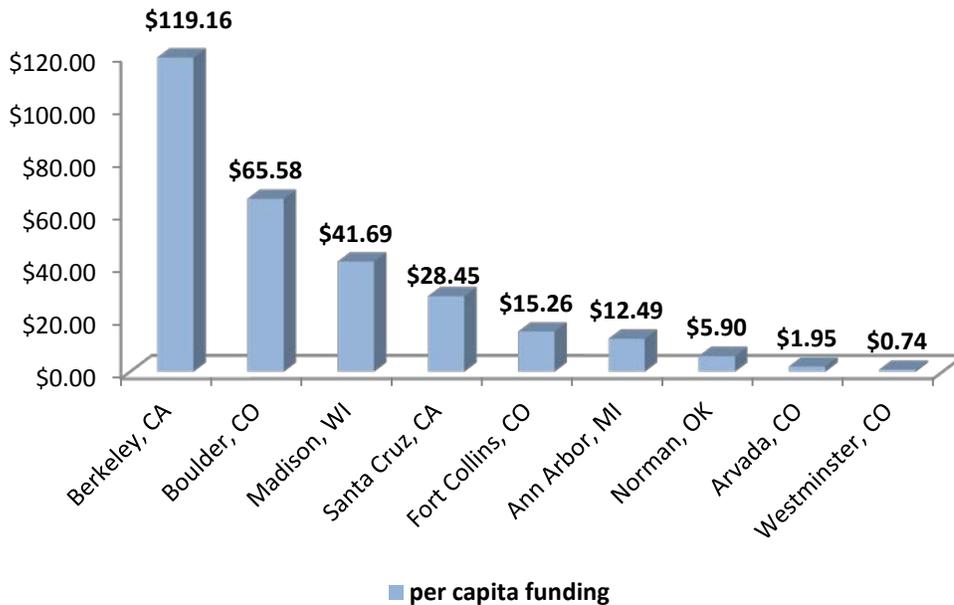


The cities of Berkeley and Madison spend more than their peers on human services because of significant municipal investments in public health. Berkeley’s general fund investment in public health was \$6.7 million in 2012, which was supplemented by funding of \$13.5 million from the state of California and smaller amounts from federal, local and foundation grants. The \$13.5 million in funding from California is excluded from this analysis.

The city of Madison budgeted \$4.5 million from its general fund for public health in 2012. The public health function in Madison is a joint venture between the city of Madison and Dane County, with shared costs totalling \$9.2 million. The city contributed 45 percent and the county 55 percent. Madison provided additional support for agency contracts and a heroin/opiates program. This analysis included Madison’s general fund expenditures for public health, but not county funding. None of the other peer cities provided direct services for public health, but many, including Boulder, funded support to community organizations for this purpose.

Another way to look at a city’s human services funding is to compare the dollars budgeted in relation to the population size. **Chart 22** illustrates per capita funding in the 2012 budget for these cities:

Chart 22: Human services investments: Per capita funding



Every peer city, except for Arvada and Westminster, has at least one senior center. Berkeley’s budget for senior services is three million, compared with Boulder’s budget of one million. Berkeley has three senior centers and allocates half a million dollars to its meals program.

Boulder’s programs for children, youth and families include funding for more direct services than peer cities. The city of Madison also funds child care assistance and training for child care providers as a city program.

Like Boulder, two peer cities also provide mediation services directly – Fort Collins and Norman. Both Norman and Madison are also similar to Boulder in having a community relations or civil rights function. All peer cities provide funding to community organizations.

Analysis of the percentage of peer cities budgets devoted to safety net services (emergency food and shelter, health, services for disabled, etc.) showed that Boulder spends a lower percentage of its human services funding on those services than Arvada, Westminster, Berkeley and Santa Cruz. For homeless services as a percentage of human services funding, Boulder is fifth after Berkeley, Madison, Santa Cruz and Norman. This analysis did not include capital funding for housing.

In assessing what specific programs to fund, most cities listed “public process/community demand” and “city council priorities” as the most important factors. In four of the peer cities, human services funding was set based on a specific amount.

IV. ISSUES

Master Plan Update

The update to the Human Services Master Plan will begin in June 2013 and is anticipated to be completed the 2nd quarter of 2014. Master planning concepts being considered include a proposed five-year planning horizon to be more flexible and nimble to meet more rapidly changing social and economic conditions, with minor updates in other years and incorporating the new city sustainability framework as it evolves. Key analyses to be completed as part of the Master Plan update process include:

- City and county funding of human services programs, investments and partnerships;
- Capital investments and alignment with priorities;
- Implementation strategies for the Collective Impact model;
- Best practice models for human services programs; and
- Community needs and impact assessment (options to identify priorities and maximize investments and outcomes).

As part of the Master Plan update, key issues regarding policy and budget which should be considered are identified below.

Policy

- Identify city strategic goals and priorities in human services.
- Identify funding strategies to align with goals.
- Expand efforts for integrated and effective regional planning and community funding with other jurisdictions.
- Assess city and county programs and funding to determine highest leverage points and to align with city priorities.

- Increase effort and resources devoted to identifying regional indicators, data collection and outcome measurement to assess ongoing success.
- Evaluate balance between prevention and early intervention investments and safety net programs for most effective overall community outcomes.
- Review funding allocations processes to align with goals and priorities of updated master plan.

Budget

- Assess how city human services investment amount is determined, e.g., percentage of overall city budget, caps, determined each budget cycle, evaluate with each Master Plan update, or other options to be identified.
- Assess city investments in human services in other city departments to determine alignment with city goals and priorities.

V. NEXT STEPS

Staff will return to council with a proposed process, benchmarks and timeline for the update to the Human Services Master Plan in the third quarter of 2013.

ATTACHMENTS:

- A: Human Services Trends
- B: City of Boulder Human Services Program Funding
- C: Countywide Human Services Funding Analysis, 2012
- D: City of Boulder Human Services Department Programs
- E: Selection Criteria for Peer Cities

Human Services Trends

City, county and federal

Population Changes

Boulder's population growth has slowed over the past decade. Projections for growth until 2030 are one percent each year. Boulder's population is aging and the number of children is trending slightly downward overall.¹

Chart 1: Age distribution under age 18, city of Boulder

Age Group	Year		% Change, 2000-2010
	2000	2010	
Under 5 years	3,888	3,955	1.7%
5 – 11	4,648	5,319	14.4%
12 – 13	2,340	1,420	-39.3%
14 – 17	3,166	2,833	-10.5%

Chart 2 below reflects changes in the population under age 18 for Boulder and surrounding cities since 2000. In addition to the decrease in children between the 2000 and 2010 censuses, Boulder experienced a nearly 13 percent decrease in the number of residents between the ages of 25 and 54, which may reflect middle- and lower-income parents with children leaving, and some baby boomers aging into older age groups. Population trends show decreasing percentages of middle- and lower-income families with children, while higher-income (more than \$125,000 annually) households increase.²

Chart 2: Population under age 18 in Boulder County cities, 2000, 2010, and 2011³

	2000	2010	% change 2000-2010	2011	% change 2000-2011
Boulder	14,042	13,527	-3.7%	13,586	-3.2%
Lafayette	6,374	6,223	-2.4%	6,397	0.4%
Longmont	19,823	22,597	14.0%	22,890	15.5%
Louisville	5,439	4,476	-17.7%	4,507	-17.1%
Superior	2,653	3,936	48.4%	3,319	25.1%

During this same period, Boulder's population over age 55 increased by 38 percent. Projections for the city of Boulder indicate a 20.5 percent increase in seniors from 2010 to 2015, at almost 22,000 or 20 percent of the city's total population beginning in 2015.

¹ U.S. Census Bureau, Census Summary Files PCT003 & QT-P2, 2000 and 2010.

² BBC Research & Consulting, "Boulder Housing Market Analysis," May 6, 2013.

³ Greenberg, S., "The Status of Children in Boulder County," 2011; Census Bureau, American Community Survey, 2009-2011 & 2007-2011.

National projections are for the 65 and over age group to represent 20 percent of the country's population by 2030.⁴

Racial/Ethnic Population Trends

There was no significant change in the racial/ethnic makeup of Boulder between 2000 and 2010. White, non-Latino residents remain a majority at roughly 88 percent of the population in both censuses. The second largest group is Latino residents, which comprised eight to nine percent of the population in both 2000 and 2010. This is different from trends for Boulder County which has experienced growth in the Latino population from 11 percent in 2000 to 13 percent in 2010.⁵

Undocumented Population

Estimates from the Pew Hispanic Center suggest that Colorado mirrors a national decline in unauthorized immigrant populations since 2007. These data indicate that the state's undocumented population declined 25 percent between 2007 and 2010, from approximately 240,000 to approximately 180,000.

The undocumented population is difficult to measure because it is “hidden.” Census surveys do not ask immigrant respondents to declare their status in the U.S. Undocumented residents are often lower-income and ineligible for state and federal social assistance programs, such as Medicaid, Colorado Works (Temporary Assistance to Needy Families - TANF) and Supplemental Nutrition Assistance (SNAP, formerly “food stamps”).

What Families Look Like in Boulder⁶

Latino households are more likely to have children, particularly young children, than white non-Latino households in Boulder. This trend has increased since 2000. (See **Chart 3** below).

In addition, approximately 20 percent of white non-Latino children and 25 percent of Latino children under 18 live in single-parent households. The majority of single parents are women and nearly half (44 percent) of these female-headed households are living under 185 percent of the Federal Poverty Level (FPL), an increase from the year 2000 when 40 percent of female-headed households were below 185 percent FPL.⁷

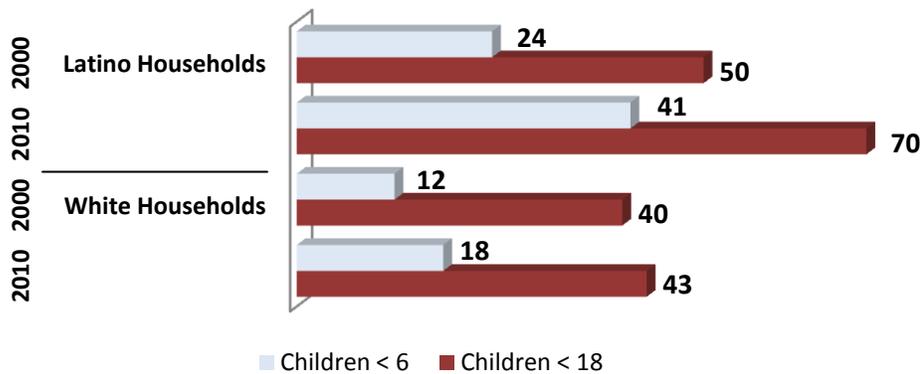
⁴ Boulder County Aging Services Division, “Age Well Boulder County,” 2010.

⁵ Greenberg, S., “What Does Diversity Look Like in the City of Boulder?” 2012; U.S. Census Bureau, Census 2000, DP-1.

⁶ Greenberg, S., “What Does Diversity Look Like in the City of Boulder?” 2012.

⁷ Greenberg, S., “What Does Diversity Look Like in the City of Boulder?” 2012.

Chart 3: Households with children, 2000 and 2010 (percentage)



Linguistic Isolation⁸

Linguistic isolation, defined as speaking a language other than English at home and speaking English less than “very well,” can limit economic, educational and civic opportunities for residents.

- Data from 2007 to 2011 indicate that almost one in five households where a language other than English was spoken had no one age 14 or over who was proficient in speaking English.
- Of non-English-speaking households in Boulder, the Spanish-speaking population was the most linguistically isolated. Close to half of those living in Spanish speaking homes were linguistically isolated and more than one quarter of Spanish-speaking homes had no one age 14 or over who spoke English proficiently.
- Children were less likely to be linguistically isolated than were adults (17 percent of those ages 5 to 17 compared to 35 percent of the 18 to 64 age group). Asian children were more linguistically isolated than children in households where other non-English languages were spoken.

Income, Poverty and Self-Sufficiency

When adjusted for inflation, median income has decreased for Boulder households overall since 2000, poverty rates and other negative economic indicators are increasing among certain populations, such as Latino residents, seniors and children.

While median incomes of white non-Latino families increased by about the same rate as median incomes of Latino families from 2000 to 2010, the 2010 median Latino family income was only 31 percent of the white non-Latino family income. Whereas the inflation-adjusted median incomes of male, full-time year-round workers increased by 32 percent over the decade, the median incomes of females increased by only four percent.⁹

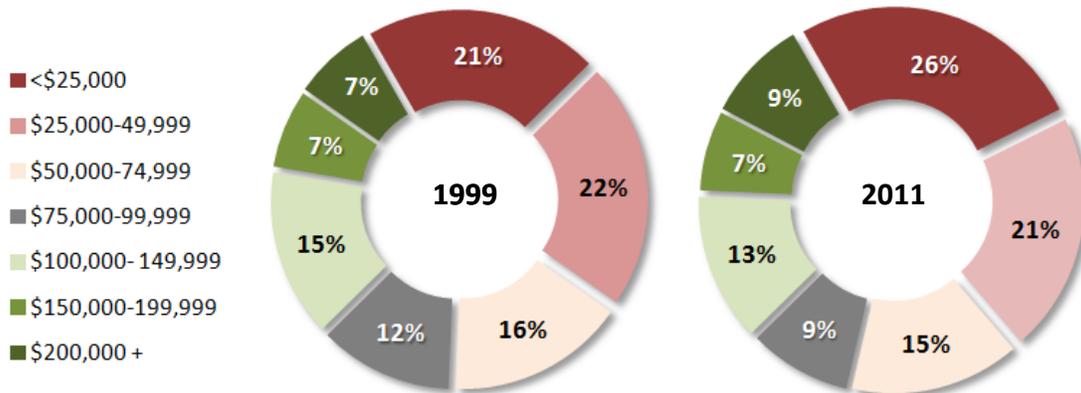
⁸ Greenberg,S., “What Does Diversity Look Like in the City of Boulder?” 2012; U.S. Census Bureau, American Community Survey, Table B16002, 2007-2011.

⁹ U.S. Census Bureau, American Community Survey, 2009-2011 Table DP03, 200 Table DP-3, QT-P33.

Consistent with national trends, income inequality has increased since 2006 and points to a decreasing middle class.¹⁰ Whereas middle income earners (with incomes of \$50,000 to \$100,000) comprised 28 percent of the city’s income earning households in 1999, this income group decreased to 24 percent in 2011. Increases were seen in the highest income earning group (incomes above \$200,000) which increased from seven percent in 1999 to nine percent in 2011, and the lowest earning group (below \$25,000) which increased from 21 to 26 percent of the population.¹¹

There is a significant difference between the incomes of Boulder’s highest- and lowest-income earners. Boulder was ranked third in the nation in 2012 for being among the metropolitan areas with the most unequal wages. Analysts attribute this inequality to Boulder’s high-paying, professional and creative jobs that require considerable education and skill.¹²

Chart 4: COB household income distribution, 1999 and 2011*



*For the purpose of comparison, incomes reported in 1999 were adjusted for inflation (2011 dollars).

The Colorado Center on Law and Policy publishes the Self-Sufficiency Standard for each county in Colorado every three years. The Self-Sufficiency Standard describes how much income families of various sizes and compositions need to make ends meet without public or private assistance.¹³ The range of incomes presented in **Chart 5**, below depends on the number and ages of children in the family and whether the household has one or

¹⁰ Greenberg, S., “What Does Diversity Look Like in the City of Boulder?” 2012.

¹¹ BBC Research & Consulting, “Boulder Housing Market Analysis,” 2013.

¹² The Census Bureau provides estimates of household income inequality using the Gini index. The Gini index measures the amount of dispersion in income. Martin Prosperity Institute, “The Inequality of Cities: Differences and Determinants of Wage and Income Inequity across U.S. Metros,” 2012; The Atlantic Cities, “The Inequality of American Cities,” 2012.

¹³ The Self-Sufficiency Standard is a measure of economic security that is based on the costs of basic needs for working families: housing, child care, food, health care, transportation, and miscellaneous items, as well as the cost of taxes and the impact of tax credits.

two adults. Boulder County families with young children need incomes more than three times the federal poverty level to make ends meet.¹⁴

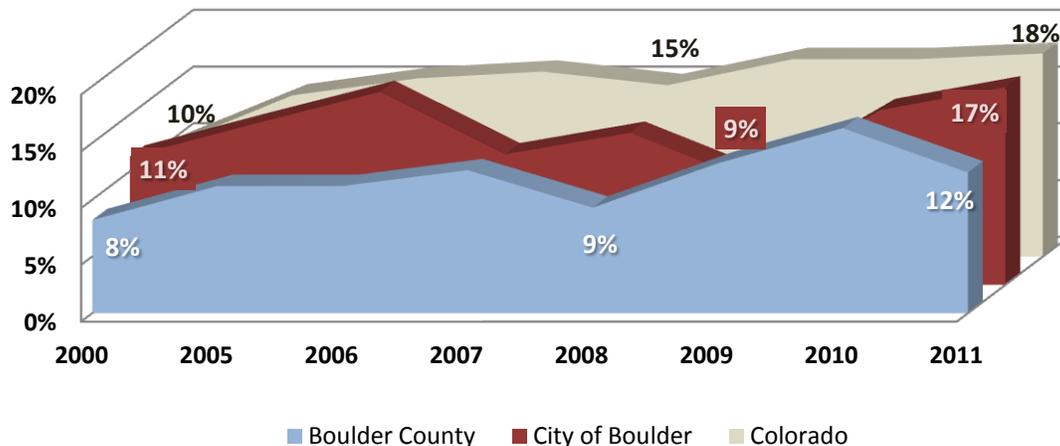
Chart 5: Self-Sufficiency Standards by household size, Boulder County, 2011

	One	Two	Three	Four
Self-Sufficiency Standards, Boulder County	\$24,527	\$32,711 - \$50,483	\$33,533 – \$70,537	\$41,801 - \$77,318
Federal Poverty Guidelines, U.S.	\$10,890	\$14,710	\$18,530	\$22,350

The percentage of City of Boulder residents living in poverty declined from 21 percent in 2000 to 16 percent in 2010.¹⁵

- The percentage of city seniors (age 75+) in poverty nearly doubled between 2000 and 2010 from seven to 13 percent.
- In Boulder County, the percentage of Latino residents in poverty rose from 19 percent in 2000 to 32 percent in 2010.
- The percentages of children in poverty are also higher than that of the general population, and reflect a steep increase since 2009, as shown below.¹⁶

Chart 6: Percentage of children under 18 in poverty



These trends have also increased the need for assistance in meeting basic needs in Boulder County.

- Between 2008 and 2012, food assistance (SNAP) increased 146 percent and the number of individuals receiving Medicaid increased 65 percent.¹⁷

¹⁴ Greenberg, S., “Poverty and Homelessness in Boulder County,” 2011; Colorado Center on Law and Policy, “The Self-Sufficiency Standard for Colorado, 2011.”; U.S. Department of Health and Human Services; accessed 4/26/13 <http://aspe.hhs.gov/poverty/13poverty.cfm>

¹⁵ Greenberg, S., “Poverty and Homelessness in Boulder County,” 2011.

¹⁶ Greenberg, S., “Poverty and Homelessness in Boulder County,” 2011; with Census Bureau update May 2013.

¹⁷ Boulder County Housing and Human Services, “Proposed 2013 Budget,” 2012.

- From 2007 to 2011, the number of children in Boulder County receiving Colorado Works (TANF, in average monthly counts), rose from 389 to 782. Even adjusting for population growth, the rate of children receiving assistance doubled, from six per 1000 in 2007, to 12 per 1000 in 2011.¹⁸

Employment

Boulder’s unemployment rate was highest among the larger cities in the county going into the 2008 economic downturn and continued to be higher until 2011 when it fell below other city and county rates, remaining lower in 2012.

Chart 7: Unemployment rate, Colorado, City of Boulder, City of Lafayette, City of Longmont¹⁹

	2007	2008	2009	2010	2011	2012
Colorado	3.8%	4.8%	8.1%	9.0%	8.6%	8.0%
Boulder County	3.3%	4.1%	6.8%	7.0%	6.4%	6.1%
City of Boulder	3.9%	4.8%	7.9%	8.1%	5.8%	5.6%
City of Lafayette	2.7%	3.3%	5.5%	5.6%	6.5%	5.8%
City of Longmont	3.5%	4.3%	7.2%	7.3%	7.7%	7.3%

- In 2011, unemployment in the state was highest among youth ages 16 to 19, whose unemployment rates are about three times higher than for the total population, followed by young adults, ages 20 to 24. Job opportunities for young people was identified as a top priority among middle and high school students surveyed recently in Boulder.²⁰
- The 2011 state unemployment rate for seniors (ages 55 to 64) is slightly less than the total rate (8.0 compared to 8.4).
- Because many more highly paid jobs in Boulder are in the advanced technology sector those in poverty who are less likely to have high school diplomas or college degrees may not meet the basic educational and skill training requirements to be considered for these positions. Furthermore, access to GED training for adults has become more difficult.

The average number of people unemployed in the city of Boulder in 2012 was 3,461, compared to an annual average of 2,433 in 2007 before the economic downturn.²¹

Housing

The challenge of available affordable housing continues to be a community issue. Families and individuals struggling with high housing costs turn to human services agencies for rental assistance, food assistance, health care, child care, and other self-sufficiency needs.

¹⁸ Greenberg, S., “The Status of Children in Boulder County,” 2012.

¹⁹ Greenberg, S., “Poverty and Homelessness in Boulder County,” 2011; Bureau of Labor Statistics; accessed 4/26/13 <http://www.bls.gov/lau>

²⁰ City of Boulder Youth Opportunities Advisory Board, “Survey on Youth Issues and Needs,” 2012.

²¹ Workforce Boulder County, 2012; Bureau of Labor Statistics, 2013.

Housing prices in Boulder are high and the current low rental vacancy rate keeps rental rates high. The limited supply of housing units and strong demand will likely keep home and rental costs high for the foreseeable future. The market provides almost no affordable rental options for households with incomes below 50 percent of the Area Median Income (AMI).^{22 23} The 2012 AMI in Boulder is \$65,700 for a one-person household or \$93,800 for a four-person household.

- In 2000, 54 percent of Boulder’s rental households had monthly housing costs at or above 30 percent of household income. In 2010, that number was 65 percent.²⁴
- Households need to earn \$39,480 annually or work 2½ full-time minimum wage jobs in order to afford a two-bedroom apartment in Boulder County.²⁵ The 2013 Fair Market Rent (FMR) for a two bedroom apartment in Boulder County is \$1,068.²⁶

The need for temporary or one-time housing assistance (generally rent payment) among families served by the Family Resource Schools (FRS) program has increased significantly since 2008.²⁷ Six families received assistance in 2008, while 77 received assistance in 2012. The Emergency Family Assistance Association (EFAA) also reports an increase in financial assistance to families, from \$364,605 in 2008 to \$691,559 in 2012, with rent and utility assistance comprising approximately three quarters of that financial assistance.²⁸

The lack of housing availability and affordability are barriers for Boulder seniors.²⁹ Nationally, a majority of older adults have unsustainable housing costs, with 59 percent of older renters and 33 percent of homeowners with mortgages spending more than 30 percent of their income on housing costs.³⁰

Council is considering housing priorities in the development of the Housing Strategy. The priorities in that plan will have impacts downstream in the human services delivery system. Family and individual self-sufficiency is significantly dependent on housing and

²² BBC Research & Consulting, “Boulder Housing Market Analysis,” 2013.

²³ The AMI is used to determine eligibility of applicants for federally and locally funded programs. It sets a maximum amount that a household may earn to be eligible for programs. Income limits are calculated for specific geographic areas based on U.S. Department of Housing and Urban Development (HUD) estimates of median family income, adjusted for household size.

²⁴ U.S. Census Bureau, American Community Survey 2011 B17002; Greenberg, S., “Poverty and Homelessness in Boulder County,” 2011.

²⁵ National Low Income Housing Coalition, “Out of Reach,” 2012.

²⁶ FMRs are estimates of gross monthly rents calculated annually by HUD for different unit sizes in different communities across the country. The FMR is the 40th percentile of local rent; this means roughly 40 percent of the area’s rental units are cheaper and 60 percent are more expensive than the fair market rent value. Gross rent includes shelter rent except all utilities except phone, cable and internet service.

²⁷ FRS is a school-based program that provides support to improve family self-sufficiency, healthy family functioning and remove barriers to educational achievement. Data provided by FRS program.

²⁸ EFAA Human Services Fund reports to City of Boulder Human Services Department, 2008-2012.

²⁹ National Research Center, “Community Assessment Survey for Older Adults (CASOA),” 2010.

³⁰ American Association of Retired Persons, reported in: National Council on Aging, “Economic Security for Seniors Fact Sheet,” 2012.

income stability.

Homelessness

Homelessness continues to be a concern in Boulder. Data on the local homeless population collected in the 2012 Point-in-Time (PIT) survey, which surveys homeless individuals on one night each year, are summarized below. PIT data provide a snapshot in time and one data set for understanding the homeless population. Data from services agencies provide another source. Improved and more comprehensive data collection to inform policies is a goal of the Metro Denver Homeless Initiative (MDHI)³¹ and locally. [City of Boulder 2012 PIT Data](#) can be found here.

Chart 8: 2012 PIT Data – City of Boulder

	Total	% of Total
Chronically homeless	102	13.6
Newly homeless	205	27.3
Total in households with children	391	52.1
Veterans	58	7.7
Unsheltered	70	9.3
Total homeless	750*	

**Note: Totals sum to more than 750 or 100 percent because individuals may fall into multiple categories.*

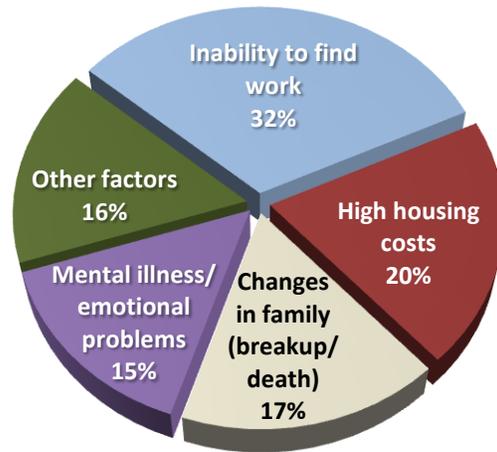
The following list highlights City of Boulder PIT data:

- The city’s homeless population decreased from 914 in 2011 to 750 in 2012 (18 percent) reflecting the first decrease since the city’s first PIT in 2006. The city saw the largest increase in the “newly homeless” population (17 percent); while the county saw the largest increase in the unsheltered population (40 percent).
- While there is a perception that the number of adults who are homeless has increased in Boulder, it has decreased steadily in recent years (from 424 in 2009 to 344 in 2012).
- Three hundred eighty-seven homeless households in Boulder have children less than 18 years of age. Half of these are single-parent families. The number of homeless in households that include children continue to be over half (52 percent) of the total number of homeless in the city.
- Boulder Valley School District (BVSD) reports a 232 percent increase in the number of students who identified themselves as homeless from 2007-08 to 2011-12 (251 students and 834 students, respectively).³²
- Forty percent of respondents in Boulder reported earning income from employment in the last month.

³¹ MDHI is a non-profit organization whose mission includes the prevention and ending of homelessness in the seven county, Metro Denver Region by facilitating, integrating and tracking cooperative, community-wide and regional systems of care for people who have become homeless, but seek to live in a stable home and maximize self-sufficiency. MDHI coordinates an annual, point-in-time count of people experiencing homelessness in the Metro Denver Region.

³² BVSD, personal communication, May, 2013.

Chart 9: Most common reasons for homelessness, 2012



Recent trends for domestic violence victims experienced by Safehouse Progressive Alliance for Nonviolence (SPAN) include:

- A 144 percent increase in the turn away rate from 2010 to 2012 due to insufficient shelter space (turned away 698 adults and children in 2012 and 286 in 2010).
- The number of older (over age 50) individuals needing emergency shelter increased 200 percent from 2007 to 2012.
- A 58 percent increase in Latino individuals needing shelter from 2010 to 2012.

In October 2012, Bridge House opened a pilot Resource Center (RC) program to provide a single point of access for the homeless to services such as treatment, employment, benefits and housing. Even though the RC is only open two days per week, 495 people were served from October 2012 through April 2013. The RC primarily serves single (86 percent), white (64 percent), homeless (88 percent) adult men (65 percent) who have been homeless one or two times (58 percent).

Although the data below, collected at the RC during the past six months, does not represent all the homeless in Boulder, it does provide some important information about those seeking assistance in our community. The most significant characteristic of this group is they are seeking program services, not simply a meal, day shelter, or other basic need.

- Most (51 percent) people seeking services are looking for work (89 percent report being unemployed).
- Forty percent report a disabling condition.
- More than a quarter reported that they have been victims of violent attacks or have experienced head trauma or a brain injury (26 percent each).
- Half reported receiving mental health treatment (either currently or in the past).
- Forty two percent reported that they had ever abused drugs or alcohol.
- Over half (56 percent) have been incarcerated in the last seven years. Of those who reported incarceration, 55 percent of offenses were misdemeanors and 45 percent were felonies.

Bridge House reports that it has received approximately 200 applications for the 10 spots in its “Ready to Work” program, which helps homeless men and women re-enter the workforce through part-time transitional employment in sanitation and landscaping enterprises.

Mental Health and Substance Use

Mental health and substance use continue to be significant community issues, at all ages and backgrounds, but particularly for young people and those with multiple risk factors.

In a 2009-10 national survey, Colorado ranked in the top fifth of states for drug and alcohol abuse, with one of the lowest rates for people accessing treatment.³³ This trend has changed little since 2005, when only Colorado and the District of Columbia were ranked in the highest quintile for needing but not receiving treatment for an alcohol or drug problem.³⁴

The Substance Abuse and Mental Health Services Administration (SAMHSA) estimates that about one in five people suffer with mental illness annually, and the prevalence of serious mental illness among adults is about three to five percent.³⁵ State funding of mental health in Colorado dropped \$11.7 million, or 8.5 percent, between 2009 and 2012, putting Colorado in the bottom third of the nation in terms of state spending. This results in more scarce mental health resources and increased burdens on local communities.³⁶ Colorado Senate Bill 266 (SB 266), signed into law May 16, 2013, will significantly increase state mental health funding. SB 266 funding is targeted more for crisis response than ongoing care, and it is uncertain how much of those resources will come to Boulder.

A 2009 study estimated that up to 8,332 adults, and up to 1,083 children and adolescents under 300 percent FPL in Boulder County with serious mental illness or substance abuse disorders may have unmet treatment needs. In the same study, Boulder County had a lower estimated “penetration” rate (estimated percent of adults needing mental health or substance use services who were served) than most other Colorado mental health service areas. This low penetration rate was largely driven by low substance use treatment rates. For mental health services, the estimated unmet need in Boulder County decreased by nine percent for youth and three percent for adults between 1999 and 2007. Penetration of mental health services increased for youth by five percent during this timeframe and decreased for adults by five percent.³⁷

³³ Substance Abuse and Mental Health Services Administration, “*State Estimates of Substance Use and Mental Disorders from the 2009-2010 National Surveys on Drug Use and Health*,” NSDUH Series H-43, HHS Publication No. (SMA) 12-4703. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

³⁴ Colorado Behavioral Health Care Council, “Addressing Colorado’s Substance Use Disorder Medicaid Benefit, Recommendations for a Community-Based Approach,” 2012.

³⁵ Mental Health Partners, personal communication, May 2013.

³⁶ The Community Foundation of Boulder County, “Boulder County TRENDS.” 2011.

³⁷ Western Interstate Commission for Higher Education Mental Health Program, for the Office of Behavioral Health and Housing, Colorado Department of Human Services, “Colorado Population in Need –

According to the 2012 Boulder County TRENDS report, one in ten county residents said that there were eight or more days in the past month when their mental health was not good. This rate was nearly double for residents with annual incomes under \$25,000. Between 2008 and 2010, the percentage of adults in Boulder County reporting eight or more days of poor mental health in the past month increased slightly from 10.3 percent to 11 percent.³⁸

Between 2009 and 2011, the age-adjusted death rate due to suicide in Boulder County increased 16 percent (16.5 deaths per 100,000 population to 19.2 deaths per 100,000 population). An estimated eight to 25 attempted suicides occur for every suicide death.³⁹

One in four senior citizens in the U.S. experiences some mental health disorder including depression, anxiety disorders, and dementia. This number is expected to double to 15 million by 2030.⁴⁰ In 2010, 38 percent of local senior respondents reported feeling depressed as at least a minor problem.⁴¹

The following are mental health and substance use indicator highlights from the 2012 Youth Risk Behavior Survey (YRBS)⁴² for BVSD. The YRBS is administered bi-annually to middle and high school students in BVSD and St. Vrain Valley School Districts (SVVSD).

- More than one in four students (28 percent) had, in the past 30 days, participated in binge drinking (five or more drinks within a couple of hours). These percentages have stayed roughly the same overall since 2005, but increased among Hispanic students (from 22 percent in 2005 to 31 percent in 2011) and female students (from 23 percent in 2005 to 28 percent in 2011).
- The rate of binge drinking among Boulder’s youth is higher than the state average, which has decreased steadily since 2005, as shown below.

2009,” November, 2009. This study notes that not all treatment is captured. Therefore, unmet need may be overestimated and penetration may be underestimated.

³⁸ [Boulder County, Community Dashboard](#), accessed May 9, 2013.

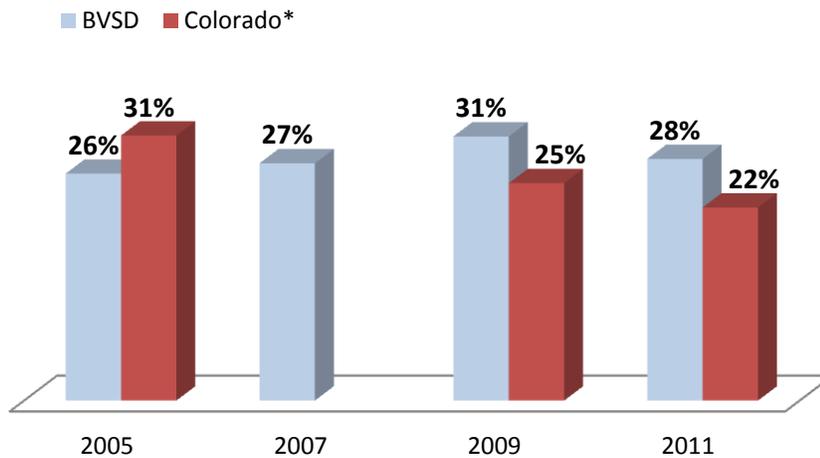
³⁹ [Boulder County, Community Dashboard](#), accessed May 9, 2013.

⁴⁰ Bartels, et al. ”Substance Abuse and Mental Health Among Older Adults: The State of the Knowledge and Future Directions,” 2005.

⁴¹ Boulder County Aging Services Division, “Age Well Boulder County,” 2010.

⁴² BVSD, SVVSD, Boulder County Public Health, Healthy Youth Alliance of Boulder County, “Boulder County, Colorado – High School 2011 Youth Risk Behavior Survey,” 2012.

Chart 10: Binge drinking among youth 2005-2011



*Colorado data not available for 2007

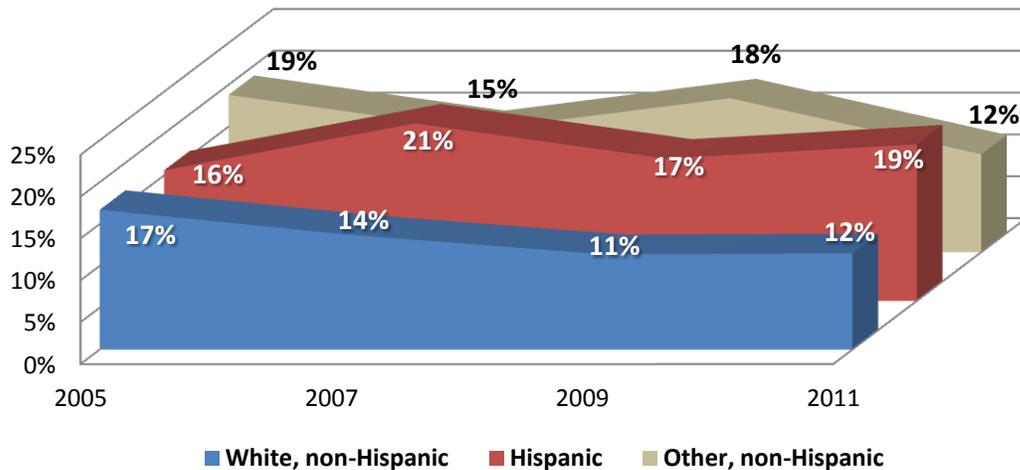
- More than one in five BVSD students (21 percent) had intentionally injured themselves; a rate that has not changed significantly since 2003.⁴³ For Hispanic students, this rate is higher (26 percent) and has increased from 18 percent in 2005. For Lesbian Bisexual Gay and Questioning (LBGQ)⁴⁴ students, rates are significantly higher and climbing, rising from 55 percent in 2005 to 61 percent in 2011. Hospitalizations due to intentional self-harm accounted for 31 percent of all injury hospitalizations among youth ages 15 to 19 in Boulder County, compared to 12 percent in 2000.⁴⁵
- More than one in seven students (13 percent) had seriously considered suicide, a decrease overall from 17 percent in 2005. Exceptions to this trend are Hispanic students, whose rates have increased from 16 to 19 percent since 2005. Although the rate of LBGQ youth that seriously consider suicide has gone down slightly since 2005, it is still high at 44 percent.
- Between 2009 and 2011, 40 percent of all Boulder County deaths among teens age 15 to 19 were caused by suicide, compared to one quarter between 2001 and 2008.

⁴³ Greenberg, S., “The Status of Children in Boulder County,” 2012.

⁴⁴ YRBS LBGQ data presented is combined data from BVSD and SVVSD due to small individual District sample sizes.

⁴⁵ Greenberg, S., “The Status of Children in Boulder County,” 2012.

Chart 11: Youth Risk Behavior Survey: Seriously considered suicide



- In YOAB’s 2012 survey, roughly one quarter of middle school and high school students described suicidal or depressed youth as an issue that needs “lots more attention.” This is consistent with a 1993 survey that reported that more accessible mental health services were needed.

Health Care

- In 2007-2008, 91 percent of white, non-Hispanic residents of Boulder County had health insurance, compared with 52 percent for Latino residents.⁴⁶ Although health care reform will significantly increase access to coverage, undocumented residents will not be covered. Documented residents with low incomes, but not poor enough to qualify for expanded Medicaid, will be eligible for subsidies to partially cover the cost of insurance through Connect for Health Colorado! (the newly named Colorado Health Benefit Exchange).
- Approximately 26 percent of children in Boulder County who are eligible for Medicaid or Colorado’s Child Health Plan Plus (CHP+) were not enrolled in those programs, compared to approximately 19 percent statewide who were eligible but not enrolled.⁴⁷
- Overall rates of health care coverage and access for children in Boulder County are very high. However, there is a significant disparity in health insurance between white non-Hispanic children (96 percent) and Hispanic children (75 percent).⁴⁸
- Physical health is also of concern to older Americans. Nationally, 91 percent of older adults have at least one chronic health condition; 73 percent have at least

⁴⁶ The Community Foundation of Boulder County, “Boulder County TRENDS,” 2011.

⁴⁷ Greenberg, S., “The Status of Children in Boulder County,” 2012.

⁴⁸ Greenberg, S., “The Status of Children in Boulder County,” 2012.

two.⁴⁹ In Boulder County, half of senior survey respondents reported that their physical health had presented at least a minor problem in the past year.⁵⁰

Early Childhood

Child Care Affordability and Quality

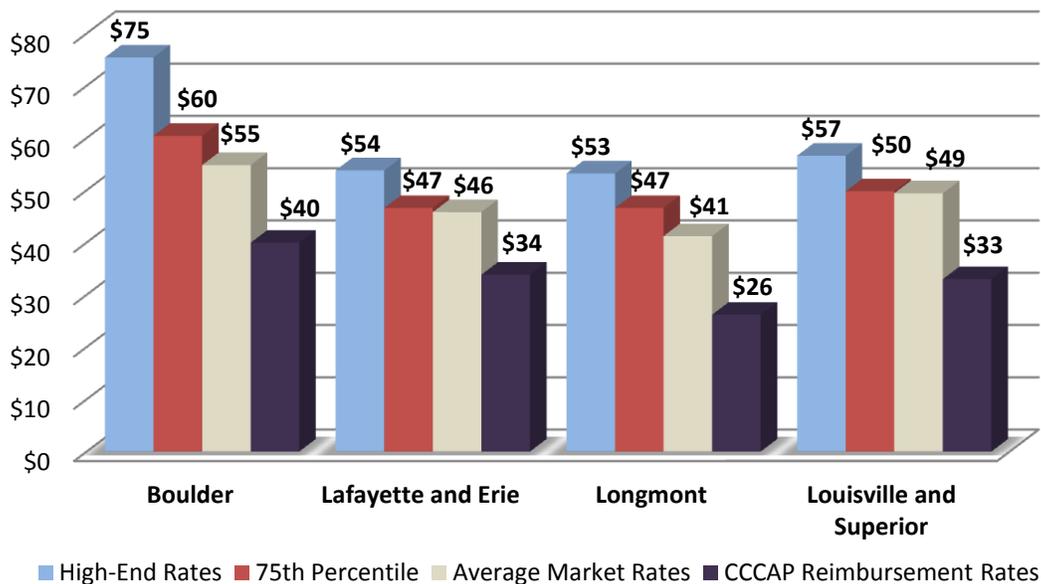
Finding affordable child care for working and low-income families continues to be a challenge, particularly for infant and toddler care. Factors behind this problem are:

1. The low child care provider reimbursement rates for the Colorado Child Care Assistance Program (CCCAP), the state program providing childcare subsidies for families under 225 percent of the FPL.
2. Limited supply of infant and toddler care, largely due to costs of the care and lower staff-child ratios.

Since 2008, CCCAP rates have remained the same, while market rates for care in Boulder have risen 11 percent for children under age two, and 17 percent for children aged two to five.⁵¹ This market rate gap reduces the number of CCCAP children providers are willing to take, and limits access of lower-income families to child care in Boulder.

Expanded preschool and kindergarten programs provided by BVSD have increased options for parents of older children, but supply for infant and toddler care has remained relatively flat since 2004.

Chart 12: Center full-day rate, two- to five-year-olds



⁴⁹ State of Aging and Health in America: www.cdc.gov/aging

⁵⁰ Boulder County, “Community Assessment Survey for Older Adults” (CASOA), 2010.

⁵¹ City of Boulder, Child Care Subsidy and Referral Program, “Child Care Cost Survey for Boulder County,” 2012.

Approximately 34 percent of children under age six in Boulder live under 200 percent FPL, although not all these families are seeking child care. Approximately five percent of the city's child care capacity is used by CCCAP children.

Many child care workers enter the field with little or no training. Due to the entry-level wages of child care workers, it is difficult to attract and retain college-educated, mature, stable people. In Boulder County, average wages are \$14.69 per hour for early childhood teachers and \$9.96 per hour for child care aides. Studies have shown that compensation for child care workers has a strong relationship to program quality. In Boulder County, only 5.2 percent of licensed centers and 1.5 percent of child care homes are accredited.⁵² This percentage has remained about the same since 2008. The accreditation process is prohibitively expensive for most child care centers and homes, which results in missed opportunities for quality improvement.

School Readiness

The 2010 Boulder County Early Childhood Framework, developed by a broad cross section of community stakeholders and mirroring state and federal priorities, identifies four key community goals for school readiness:

1. Children's readiness for school, including social, emotional and cognitive readiness;
2. School's readiness for children, and ability to provide appropriate developmental learning environment;
3. Ready family, including access to programs that support a child's healthy development and parental engagement; and
4. Ready community, which recognizes the importance of early childhood well-being as foundational to lifelong success.

[The Framework identifies strategies and indicators](#) for the development and implementation of early childhood programs to meet these goals.

A significant number of Boulder County children (up to 30 percent) arrive at kindergarten each year unprepared for classroom learning for a variety of reasons, including social/emotional and health issues and lack of appropriate educational readiness skills. These gaps often persist throughout a child's K-12 career, contributing to high school achievement and graduation rate gaps.⁵³ This is particularly true for low-income children and Latino children.

As many as 12,010 at-risk four-year-olds in Colorado in 2011-12 had no preschool available to them either through the Colorado Preschool Program (CPP) or Head Start. In addition at least 8,000 eligible children did not receive preschool education due to insufficient program funding.⁵⁴

⁵² Greenberg, S., "The Status of Children in Boulder County," 2012.

⁵³ The Early Childhood Council of Boulder County, "Framework for a Comprehensive Early Childhood System for Boulder County," 2008.

⁵⁴ This number is considered to be an underestimate. Colorado Department of Education, "Colorado Preschool Program 2013 Legislative Report," 2013.

Childhood Obesity and Active Living

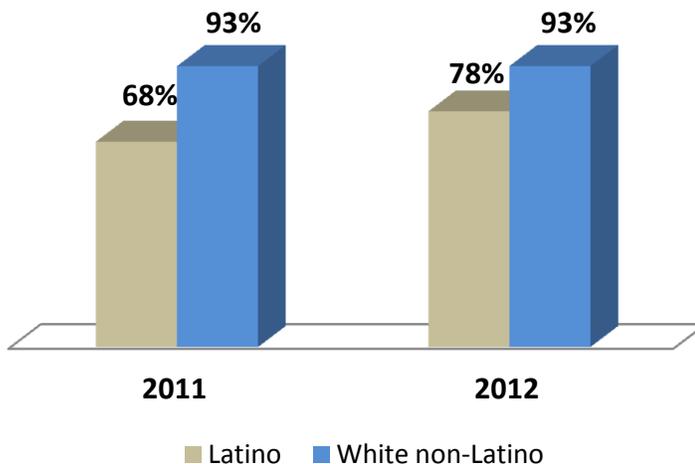
In 2011, nearly 29 percent of Boulder County’s Women, Infants and Children (WIC)-enrolled children aged two to five were overweight or obese, compared with the statewide rate of 24 percent. The county’s rates have consistently been higher than statewide rates since 2006.⁵⁵ Failure to learn good eating and health habits is a key factor contributing to lack of school readiness, achievement and lifelong health issues.

Achievement Gap

Education, employment, and income differences between Boulder’s Latino and white non-Latino adult populations are all factors that continue the educational achievement gap and limit opportunities for improving Latino households’ economic situations.

In 2012, 78 percent of BVSD Latino students graduated on time in four years, up substantially from 68 percent the year before.⁵⁶ Though this trend is improving, there is still a significant gap between the Latino graduation rate and that of white non-Latino students, which was 93 percent in both 2011 and 2012.⁵⁷

Chart 13: BVSD on-time graduation rates



In 2008-10, 98 percent of white non-Latino Boulder residents were high school graduates, compared to 56 percent of Latino residents. Seventy three percent of white non-Latino residents had a Bachelor’s degree or higher, compared to 26 percent of Latino residents.

⁵⁵ Greenberg, S., “The Status of Children in Boulder County,” 2012.

⁵⁶ Beginning in the 2010 school year, the Colorado Department of Education changed the method used to calculate graduation rates. Graduation rates for more recent years are not comparable to rates from 2010 and prior years.

⁵⁷ Colorado Department of Education, www.cde.state.co.us/cdereval/gradcurrent.htm, accessed May 14, 2013.

Seniors

Collectively, this generation of older adults has had, and will have, a significant impact on the communities in which they live. Key issues for this demographic include housing (see housing section above), aging in place, financial stability, employment, mental and physical health (see sections above), and caregiver responsibilities, chiefly grandparents raising grandchildren.

Aging in Place

Older adults across the U.S. have expressed a strong preference for remaining in their homes in the community. This growing national focus is reflected locally. According to a 2010 survey of older adults in Boulder County, 84 percent of adults age 50 and over, and 95 percent of those over 75 wish to remain in their homes as they age.⁵⁸ “Age-friendly cities” which include compact, walkable, mixed-use communities with a range of housing and transportation options are desired as older adults wish to remain active physically and in community life.⁵⁹

In the city of Boulder in 2010, those age 75 and older were the most likely of all age groups to live alone, nearly 60 percent. This finding may be cause for concern, especially when coupled with the fact that more than half of the elderly had at least one disability.⁶⁰

Financial Stability

Social Security, the sole source of income for nearly 25 percent of Colorado seniors, is not sufficient to meet their average expenses in any of the state’s counties. Average social security payments are, however, high enough to disqualify Colorado seniors from participating in critical public assistance programs.⁶¹ One third of older Boulder County residents reported that having enough money to meet daily expenses was at least a minor problem.⁶²

Employment

Some older adults work to stay active and engaged in their communities, but many do so to address financial responsibilities. The number of workers age 55 and older is projected to grow 47 percent by 2016, more than five times faster than the growth expected for the workforce overall.⁶³ Employers may need to redefine policies, such as flexible work schedules, telecommuting, and phased retirement, in order to maximize the potential of an aging workforce. Older employees will need to continue to expand their skills and knowledge-base.⁶⁴

⁵⁸ Boulder County Aging Services Division, “Age Well Boulder County,” 2010.

⁵⁹ International City/County Management Association, “Active Living for Older Adults: Management Strategies for Healthy and Livable Communities,” 2003.

⁶⁰ Greenberg, S., “What Does Diversity Look Like in the City of Boulder?” 2012.

⁶¹ Colorado Center on Law & Policy, “Elders Living on the Edge: When Basic Needs Exceed Income in Colorado,” 2011.

⁶² Boulder County Aging Services Division, “Age Well Boulder County,” 2010.

⁶³ Colorado Center on Law & Policy, American Community Survey Brief, “Labor Force Participation and Work Status of People 65 Years and Older,” 2013.

⁶⁴ Colorado Center on Law & Policy, “Elders Living on the Edge: When Basic Needs Exceed Income in Colorado,” 2011.

About 16 percent of Boulder County older adults work part-time and another 17 percent work full time.⁶⁵ Although the rate of unemployment among mature workers is lower than for younger populations, older workers who do become unemployed spend more time searching for work.

Grandparents Raising Grandchildren

According to a 2010 analysis of Census Bureau data, one child in ten in the U.S. lives with a grandparent. About 40 percent of those children are also being raised primarily by that grandparent, a slowly increasing trend which rose sharply with the economic downturn of 2007-2008.⁶⁶

Multigenerational families – households consisting of three or more generations of relatives – may be more likely to reside in areas of recent immigration, housing shortages or high housing costs such as in Boulder. In 2000, there were 3.9 million multigenerational households; that number increased to 5.1 million in 2010.⁶⁷

Philanthropic Giving

According to 2011 and 2013 reports from the Community Foundation Serving Boulder County:

- Philanthropic giving by individuals to nonprofit organizations is up significantly in Boulder County since 2007.⁶⁸
- Boulder County residents' contributions since 2001 total just over \$1.2 billion and have typically averaged over \$200 million each year.
- Donors are most likely to support basic needs services (62 percent) and health and human services (56 percent).
- Just over 40 percent of those who donate to charitable organizations in Boulder County typically give over \$500 annually and the average gift in 2012 was \$2,232 (up from about \$700 in 2006).
- A sample of eleven health and human services nonprofit organizations in Boulder County have seen:
 - Private contributions more than double (from about \$10 million in 2001 to about \$28 million in 2011);
 - Government support gradually increase from 2001 to 2009 and a pattern of these revenues holding at 2009 levels.

⁶⁵ Boulder County, "Community Assessment Survey for Older Adults" (CASOA), 2010.

⁶⁶ Taylor, et al., Pew Research Center, "Since the Start of the Great Recession, More Children Raised by Grandparents," 2010.

⁶⁷ U.S. Census Bureau, Census 2000 Briefs, C2KBR/01-8 (September 2001); U.S. Census Bureau, "Census 2010 Summary File," 2010.

⁶⁸ The Community Foundation, Boulder County, "Culture of Giving Report," 2013; The Community Foundation, Boulder County, "2011 Survey Report," 2011.

Federal Trends

Health Care Reform

The Patient Protection and Affordable Care Act (ACA) was signed into law by President Obama on Mar. 23, 2010. Some of the potential impacts in Colorado include:⁶⁹

- Health coverage for approximately 500,000 currently uninsured Coloradans through expansion of the Medicaid program to individuals with incomes at 133 percent or less of the FPL, and the development of Health Benefit Exchanges (Connect for Health Colorado!). Subsidies for premiums and cost-sharing are available to those with incomes between 100-400 percent of FPL who purchase coverage through Connect for Health Colorado!
- Undocumented immigrants do not have access to expanded coverage options.
- Potential reduction in the cost of family health insurance premiums by \$1,510 - \$2,160 through coverage of more people and reform of the insurance market to increase competition and administrative savings.
- Additional funding for some or all of the 123 community health centers throughout the state.
- An increase in Medicaid payments for primary care services provided by primary care doctors to 100 percent of the Medicare payment rates for 2013 and 2014.

Improved access to primary care is a significant focus area for the ACA. According to Boulder County Housing and Human Services there are approximately 50,000 uninsured people in Boulder County. ACA will expand coverage through Medicaid or Connect for Health Colorado! for 35,000 – 40,000 of those individuals.

Expanded coverage through ACA also means that more individuals will have coverage for mental health and substance use services. Mental health and substance use are covered under Medicaid in Colorado and will be required as part of the “essential benefits” mandated for health plans participating in Connect for Health Colorado! The benefits will have to be provided on a level at parity with general medical and surgical coverage.⁷⁰ However, it is still uncertain how robust benefits will actually be as part of policies through the exchange, and how affordable coverage through the exchange will be.

Sequestration

Impacts of sequestration in Boulder and statewide are expected in a wide variety of programs that receive federal funds. Collectively, these impacts are likely to result in a slowed local economy with increased unemployment and greater need for assistance in meeting basic needs including food, clothing and shelter.

- Sequestration cuts have resulted in Boulder Housing Partners freezing 50 Housing Choice Vouchers. Fifty low-income households that would have entered the

⁶⁹ Meinhold, L., State of Colorado, “Implementing Health Care Reform: A Roadmap for Colorado,” December, 2010.

⁷⁰ Beronio, K., et al., “ASPE Issue Brief: Affordable Care Act Expands Mental Health and Substance Use Disorder Benefits and Federal Parity Protections for 62 Million Americans,” U.S. Department of Health and Human Services, Office of Assistant Secretary for Planning and Evaluation, February, 2013.

- program as others transitioned out will be frozen.⁷¹ Statewide, an estimated 1,500 families will not receive Housing Choice Vouchers in 2013.⁷²
- Thousands of Coloradans receiving unemployment benefits could be getting smaller checks because of the “sequester” budget cuts. Starting the first week of May 2013, the federal funds that support the long-term unemployed were cut 18 percent. About 350 people in Colorado have been affected already. More than 20,000 Coloradans collect the federal benefits and could see their checks shrink if they don’t find work soon.
 - Impacts in BVSD and SVVSD may include reduced special education, English as a Second Language and Title I programs for low-income, low-achieving students, beginning in the 2013-14 school year.⁷³ Approximately 11,500 Colorado low-income children may be impacted by cuts to K-12 programs that focus on improving the academic achievement of low performing students (Title I).⁷⁴
 - Statewide, the estimated sequestration caseload cut for the SNAP WIC benefits⁷⁵ is estimated to be 7,100 families.⁷⁶
 - Approximately 1,000 children in Colorado are expected to be impacted by cuts to Head Start and child care programs.⁷⁷
 - Colorado’s aerospace industry is expected to experience the third largest number of job losses (over 2,000 state-wide) in the nation, behind Texas and California.⁷⁸ Local impacts to date have been hiring freezes and slowdowns of research projects but some analysts are expecting layoffs in the next year.

⁷¹ Boulder Housing Partners, www.boulderhousing.org accessed April 26, 2013.

⁷² Center on Budget and Policy Priorities, “Estimated Cuts in Federal Housing Assistance and Community Development Programs Due to Sequestration, 2013,” Updated March 5, 2013.

⁷³ SVVSD staff, 2013.

⁷⁴ U.S. Department of Education, “Effects of Sequestration on K-12 Education for Disadvantaged (Title I), Unpublished Tables,” accessed April, 2013.

⁷⁵ WIC provides grants for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women and to infants and children up to age five who are found to be at nutritional risk.

⁷⁶ National WIC Association, “Impact of Sequestration on WIC,” January, 2013.

⁷⁷ Coalition on Human Needs, “Estimated Sequestration Cuts to Head Start and Child Care,” April, 2013.

⁷⁸ Aerospace Industries Association, “The Economic Impact of Sequestration on Civil Space Programs,” 2012.

2012 City of Boulder Human Services Program Funding

Agency and Program	Total Funding
Prevention/Early Intervention Programs in black	Basic Safety Net Programs in blue
2012 HSF - Child Care/Preschools	
Boulder Day Nursery Association (Early Learning Programs)	\$ 62,000
Children's House Preschool (First Chance Scholarship)	\$ 22,050
Family Learning Center (Early Childhood)	\$ 56,989
New Horizons Cooperative Preschool (Bilingual Education)	\$ 42,000
YWCA of Boulder County (Children's Alley)	\$ 68,750
Total Child Care and Preschools - HSF	\$ 251,789
2012 HS Directly Operated - Child Care/Preschools	
Childcare Recruitment & Training	\$ 128,114
Childcare Subsidy & Referral	\$ 526,559
Total Child Care and Preschools - City Direct	\$ 654,673
Grand Total Childcare & Preschool	\$ 906,462
2012 HSF - School Age/Youth	
Boulder Valley School District (Boulder High Adelante!)	\$ 43,432
Boulder Valley School District (Casey Middle Community Learning Center)	\$ 22,000
Boulder Valley School District Teen Parent Program	\$ 25,000
Family Learning Center (Ignite Your Potential)	\$ 11,762
Medicine Horse Program (Youth Programs)	\$ 11,280
Total HSF School Age/Youth	\$ 113,474
2012 HS Directly Operated - School Age/Youth	
Prevention & Intervention (contract)	\$ 439,240
Youth Opportunity Program	\$ 191,656
Total School Age/Youth - City Direct	\$ 630,896
2012 HS Youth Opportunities Fund- School Age/Youth	
Big City Mountaineers, Inc	\$ 7,500
Boulder High School	\$ 9,010
Boulder Judo Training Center	\$ 7,375
Boulder Museum of Contemporary Art	\$ 9,221
Boulder Pride	\$ 12,688
Boulder Valley Women's Health Center (SHAPE)	\$ 14,298
Boulder Youth Body Alliance (Peer Education Program)	\$ 8,281
Cal-Wood Education Center	\$ 3,750
Casey Middle School (Art & Writing Summer Camp, Visiting Poetry Instructor, Islamic Art)	\$ 9,580
Centennial Middle School (A Healthier State of Mind)	\$ 1,100
Colie's Closet (suicide prevention)	\$ 2,380
Diamond Baseball of Boulder	\$ 3,000
Eco Arts Connections	\$ 4,060
Frequent Flyers Productions	\$ 1,500
Greater Boulder Youth Orchestra	\$ 3,000
Growing Gardens	\$ 7,237

Agency and Program	Total Funding
I Have A Dream Foundation	\$ 4,000
Mental Health Partners	\$ 5,000
New Vista High School (Natural Highs, Ceramics)	\$ 5,550
Openarts	\$ 2,250
Parlando School for the Arts	\$ 3,294
Partners of Boulder County, Inc	\$ 15,225
Wildland Restoration Volunteers	\$ 5,320
YMCA Boulder	\$ 7,725
YWCA of Boulder County	\$ 7,500
Individual Grants - Youth Opportunities Program	\$ 20,700
Total Youth Opportunities Fund - School Age/Youth	\$ 180,543
Grand Total School Age/Youth	\$ 924,913

2012 HSF - Family Support	
Intercambio (El grupo de familias)	\$ 11,000
Parenting Place (Family Strengthening)	\$ 5,000
Total HSF Family Support	\$ 16,000
2012 HS Directly Operated - Family Support	
Family Resource Schools <i>(Both P&I, BSN)</i>	\$ 664,225
Total Family Support - City Direct	\$ 664,225
Grand Total Family Support	\$ 680,225

2012 HSF - Child Wellness	
Boulder County Public Health Department (GENESIS)	\$ 100,000
Dental Aid, Inc. (Preschool)	\$ 4,500
Dental Aid, Inc. (Children and Youth)	\$ 25,000
Mental Health Partners (Circulo de la vida)	\$ 62,645
Mental Health Partners (Community Infant Program)	\$ 62,982
Mental Health Partners (Boulder Children, Adolescents and Family Services)	\$ 99,213
Total Child Wellness	\$ 354,340

2012 HSF - Domestic Violence and Child Abuse	
Blue Sky Bridge (Child and Family Advocacy Program)	\$ 25,000
Boulder County Legal Services (Victims of DV)	\$ 18,000
Mental Health Partners (Moving to End Sexual Assault)	\$ 28,426
SPAN (Domestic Violence Victim Services)	\$ 60,000
SPAN (Outreach Counseling, Community Education)	\$ 38,070
SPAN (Violence Prevention Intervention)	\$ 8,505
St. Vrain Family Center (SAFE Services)	\$ 7,216
Voices for Children (Court Appointed Special Advocates)	\$ 5,000
Total Domestic Violence and Child Abuse	\$ 190,217

2012 HSF - Food Security	
Community Food Share (Food Procurement and Distribution)	\$ 5,000
Total Food Security	\$ 5,000
2012 Directly Operated - Food Security	
Meals on Wheels (contract)	\$ 75,000
Food Tax Rebate Program	\$ 23,286
Total Food security - City Direct	\$ 98,286
Grand Total Food Security	\$ 103,286

Agency and Program	Total Funding
2012 HSF - Advocacy and Outreach Services (Critical Infrastructure)	
Center for People with Disabilities (Advocacy)	\$ 5,000
Center For People With Disabilities (Home Care)	\$ 22,000
Center For People With Disabilities (Independent Living)	\$ 18,000
Collaborative Community, The (FOCUS Offender Re-entry Mentor Program)	\$ 5,000
Community Action Development Corp (Circles Campaign)	\$ 5,000
Veterans Helping Veterans Now (Outreach and Support)	\$ 10,000
Total Advocacy and Outreach Services	\$ 65,000
2012 HSF - Adult Health and Wellness (Critical Infrastructure)	
Boulder County AIDS Project (HIV Care Services)	\$ 30,000
Clinica Family Health Services (Healthcare for Low-Income)	\$ 350,000
Dental Aid, Inc. (Adult)	\$ 70,406
Mental Health Partners (Adult Emergency Psychiatric Services)	\$ 180,388
Women's Health (Family Planning and Gynecology)	\$ 110,000
Total Adult Health and Wellness	\$ 740,794
2012 HSF - Human Rights/Legal/Immigrant (Critical Infrastructure)	
Boulder County Legal Services (Low-Inc Residents)	\$ 18,497
Centro Amistad, El	\$ 17,638
Immigrant Legal Center of Boulder County	\$ 25,000
Intercambio Uniting Communities	\$ 30,000
Total HSF Human Rights/Legal/Immigrant	\$ 91,135
2012 HS Directly Operated - Human Rights/Legal/Immigrant	
Community Relations	\$ 121,621
Office of Human Rights	\$ 114,254
Human Relations Commission - Community Event Fund	\$ 18,456
Human Relations Commission - Community Impact Fund	\$ 25,718
Human Relations Commission - Immigrant Heritage Week	\$ 6,956
Community Mediation	\$ 207,892
Total Human Rights/Legal/Immigrant - City Direct	\$ 494,897
Grand Total - Human Rights/Immigrant/Legal	\$ 586,032
2012 HSF - Homeless Services (Critical Infrastructure)	
Attention Homes, Inc. (Adolescent Residential Care, Runaway/Homeless Youth)	\$ 30,000
Boulder Outreach for the Homeless Overflow (Emergency Warming Centers)	\$ 20,000
Boulder Shelter for the Homeless (Boulder County Cares)	\$ 15,000
Boulder Shelter for the Homeless (Housing First)	\$ 12,000
Boulder Shelter for the Homeless (Transitional Housing)	\$ 8,000
Boulder Shelter for the Homeless (Winter and Transition Program)	\$ 62,294
Bridge House (Basic Needs)	\$ 17,257
Emergency Family Assistance Assoc. (Basic Needs)	\$ 53,750
Emergency Family Assistance Assoc. (Shelter)	\$ 53,750
Guidepost r Recuperative Care (Medical Respite)	\$ 5,000
Total Homeless Services	\$ 277,051

Agency and Program	Total Funding
2012 HSF - Seniors (Critical Infrastructure)	
CareConnect (Safety Net Services)	\$ 32,045
City of Boulder Senior Services (Senior Resources)	\$ 22,013
Total HSF Seniors	\$ 54,058
2012 HS Directly Operated - Seniors	
Senior Centers	\$ 429,008
Senior Resources	\$ 271,305
Seniors Health & Wellness	\$ 100,532
Seniors Social Programs	\$ 150,270
Total Seniors - City Direct	\$ 951,115
Grand Total Seniors	\$ 1,005,173
2012 HS Directly Operated - Human Services Fund	
Human Services Fund Program	\$ 48,831
Overall Totals	\$ 5,882,324

COUNTYWIDE HUMAN SERVICES FUNDING ANALYSIS, 2012

Analysis of 2012 Discretionary Operating Funding to Nonprofit Agencies for Human Services in Boulder County

Agency	Boulder Co. Awards	City of Boulder Awards <1>	City of Longmont Awards	City of Lafayette Awards	City of Louisville Awards	Foothills United Way Awards<2>	Community Foundation Awards <3>
Human Services Operating Awards							
1 Acorn School		\$ 900					
2 Agape Family Services (Warming Center)			\$ 15,750				
3 Aging Services Foundation of Boulder County							\$ 2,350
4 Alternatives For Youth	\$ 66,950		\$ 26,000			\$ 9,393	\$ 26,000
5 Alzheimer's Association							\$ 12,500
6 American Red Cross						\$ 7,066	\$ 17,250
7 Association for Community Living					\$ 500		\$ 9,500
8 ATL Foundation							
9 Attention Inc. (Shelter and Services)	\$ 45,320	\$ 30,000				\$ 32,835	\$ 7,500
10 Audio Information Network	\$ 20,000		\$ 1,000	\$ 1,200			\$ 500
11 Bal Swan Children's Center						\$ 11,887	\$ 10,000
12 Big Brothers Big Sisters of Colorado, Inc.	\$ 9,500						\$ 26,000
13 Big City Mountaineers		\$ 7,500					
14 Blue Sky Bridge (Child and Family Advocacy Program)	\$ 32,960	\$ 25,000	\$ 15,000			\$ 8,313	\$ 22,667
15 Boulder Asian Pacific Alliance		\$ 1,600					
16 Boulder Community Housing Corporation					\$ 1,500		\$ 8,500
17 Boulder County AIDS Project (BCAP)	\$ 61,800	\$ 30,000	\$ 10,000			\$ 16,625	\$ 24,500
18 Boulder County Community Engagement Program (PERL)							\$ 18,000
19 Boulder County Housing Authority (Casa de la Esperanza)							\$ 7,750
20 Boulder County Housing Authority (Homeownership Counseling)			\$ 39,400				
21 Boulder County Legal Services	\$ 51,500	\$ 36,497	\$ 25,000				
22 Boulder County Public Health Department (GENISIS)		\$ 100,000					
23 Boulder Day Nursery Association	\$ 37,080	\$ 62,000				\$ 35,162	\$ 28,000
24 Boulder Housing Coalition	\$ 15,000						
25 Boulder Jewish Festival		\$ 1,600					
26 Boulder Judo Training Center		\$ 7,375					
27 Boulder Latino Families		\$ 2,500					
28 Boulder Museum of Contemporary Art		\$ 4,800					
29 Boulder Outreach for Homeless Overflow (Emergency Shelter)		\$ 20,000					\$ 6,700
30 Boulder Parks and Recreation Foundation (Youth Services)							\$ 5,000
31 Boulder Pride		\$ 14,288					
32 Boulder Shelter for the Homeless (BSH, Agency - Operating)	\$ 195,100						\$ 4,000
33 BSH (Shelter & Transition Program)		\$ 62,294	\$ 40,000			\$ 26,600	\$ 29,500
34 BSH (Housing First)		\$ 12,000	\$ 10,000				
35 BSH (Transitional Housing)		\$ 8,000				\$ 4,156	
36 BSH (Boulder County Cares)		\$ 15,000				\$ 1,247	
37 Boulder Valley School District (BHS -After School Program)		\$ 43,432					
38 BVSD (BHS - Si, Se Puedel)		\$ 7,701					
39 BVSD (BHS - Don't Drink and Drive Assembly)		\$ 1,309					
40 BVSD (Casey Community Learning Center)		\$ 22,000					
41 BVSD (Casey - Art & Writing Camps, Visiting P)		\$ 9,580					
42 BVSD (Centennial - A Healthier State of Mind)		\$ 1,100					
43 BVSD (New Vista - Natural Highs, Ceramics)		\$ 5,550					
44 BVSD (Teen Parents Program)		\$ 25,000					
45 Boulder Valley Women's Health Center	\$ 202,250	\$ 110,000				\$ 27,431	\$ 33,750
46 Boulder Valley Women's Health Center (Sexual Health)		\$ 14,298					
47 Boulder Youth Body Alliance		\$ 8,281					\$ 4,500
48 BoulderReads!	\$ 7,622						
49 Bridge House	\$ 20,000	\$ 22,617					\$ 6,000
50 Bright Colorado							\$ 10,000
51 Cal-Wood Education Center		\$ 3,750					
52 CareConnect (Recruitment & Outreach)	\$ 72,100		\$ 7,000			\$ 17,041	\$ 1,300
53 CareConnect (Safety Net)		\$ 32,045					
54 Center for People with Disabilities (Agency - Operating)	\$ 190,550						\$ 5,975
55 CPWD (Home Care)		\$ 22,000				\$ 35,744	\$ 750
56 CPWD (Independent Living Program)		\$ 18,000	\$ 10,000				
57 CPWD (Advocacy Services)		\$ 5,000					
58 Children's House Preschool		\$ 22,050					\$ 17,500
59 Circle of Care Elder Enrichment Program	\$ 26,000						\$ 3,000
60 Clinica Family Health Services	\$ 618,800	\$ 350,000		\$ 2,200	\$ 5,000	\$ 91,438	\$ 7,000
61 Colie's Closet (Suicide Prevention)		\$ 2,380					
62 Communikey (Invisible Inc.)		\$ 2,000					
63 Community Action Development Corporation (Circles Campaign)		\$ 12,858	\$ 40,000				\$ 3,000
64 Community Cycles		\$ 1,600					
65 Community Food Share	\$ 74,160	\$ 5,000	\$ 30,000		\$ 2,500	\$ 12,718	\$ 5,750
66 Community Shares of Colorado							\$ 5,000
67 The Collaborative Community (FOCUS Offender Reentry Program)	\$ 25,750	\$ 5,000					\$ 4,000
68 Colorado Anti-Violence Program							\$ 13,000
69 Colorado Legal Services						\$ 4,156	\$ 27,000
70 Colorado Nonprofit Association							\$ 3,000
71 Colorado Participation Project							\$ 12,000
72 Colorado Statewide Parent Coalition (Early Childhood Initiative)							\$ 17,500
73 Colorado Therapeutic Riding Center						\$ 5,819	
74 County Kids First						\$ 6,318	
75 DART							\$ 3,500
76 Defense Awareness Response Training							\$ 1,500
77 Dental Aid	\$ 185,000	\$ 99,906	\$ 12,000		\$ 1,000	\$ 12,469	\$ 21,250
78 Diamond Baseball of Boulder		\$ 3,000					
79 Early Childhood Council of Boulder County	\$ 60,000						\$ 5,000
80 Easter Seals Colorado							\$ 3,250
81 Eco Arts Connections		\$ 4,060					
82 Ed & Ruth Lehman YMCA			\$ 15,000			\$ 14,131	\$ 33,250
83 El Centro Amistad	\$ 42,436	\$ 17,638					
84 El Comité de Longmont	\$ 75,190		\$ 15,000				\$ 9,250
85 Emergency Family Assistance Association (agency - operating)	\$ 125,000						
86 EFAA (Basic Needs)		\$ 53,750				\$ 32,419	\$ 4,500
87 EFAA - Shelter Program (Emergency Shelter/Trans. Housing)		\$ 53,750					
88 Family Learning Center	\$ 41,375	\$ 68,751				\$ 6,983	\$ 30,000
89 Flatirons Habitat for Humanity				\$ 2,200			
90 Foothills United Way (Personal Investmt Enterprise Program, PIE)			\$ 20,000			\$ 99,350	\$ 5,500
91 Foothills United Way (Volunteer Connection Programs)	\$ 60,000						
92 Frequent Flyers Productions		\$ 1,500					
93 Front Range Center for Assault Prevention							\$ 2,500
94 GLBT (Gay Lesbian Bisexual Transgender) Resource Center							\$ 19,000

COUNTYWIDE HUMAN SERVICES FUNDING ANALYSIS, 2012

Analysis of 2012 Discretionary Operating Funding to Nonprofit Agencies for Human Services in Boulder County

Agency	Boulder Co. Awards	City of Boulder Awards <1>	City of Longmont Awards	City of Lafayette Awards	City of Louisville Awards	Foothills United Way Awards<2>	Community Foundation Awards <3>
95 Good News Center							\$ 1,500
96 Greater Boulder Youth Orchestra		\$ 3,000					
97 Growing Gardens of Boulder County	\$ 20,000	\$ 7,237					\$ 23,040
98 Guidepost r (Recuperative Care)		\$ 5,000					
99 Habitat for Humanity of the St. Vrain Valley							\$ 2,000
100 Harmony Foundation							\$ 5,000
101 Homeless Outreach Providing Encouragement, Longmont	\$ 5,150		\$ 10,000				\$ 10,000
102 Hospice Care of Boulder and Broomfield	\$ 25,750				\$ 1,500		\$ 14,772
103 I Have A Dream Foundation of Boulder County	\$ 11,040	\$ 9,500	\$ 30,000			\$ 24,938	\$ 4,750
104 Imagine!				\$ 1,500			\$ 9,000
105 Immigrant Legal Center	\$ 52,000	\$ 28,000	\$ 12,000	\$ 2,200			\$ 25,500
106 Impact on Education					\$ 1,000		\$ 2,250
107 Inn Between of Longmont	\$ 75,000		\$ 25,000			\$ 9,975	\$ 14,000
108 Intercambio De Comunidades	\$ 61,800	\$ 41,000	\$ 11,000	\$ 1,500		\$ 12,469	\$ 27,000
109 Junior Achievement							\$ 1,750
110 Latino Taskforce of Boulder County		\$ 5,000					
111 Life Choices Pregnancy Center							\$ 500
112 Longmont Children's Council			\$ 41,000				
113 Longmont Childcare Certificate Program			\$ 238,481				
114 Longmont Community Justice Partnership	\$ 20,600						
115 Longmont Ending Violence Initiative (LEVI)							\$ 2,300
116 Lyons Golden Gang	\$ 7,725					\$ 1,663	
117 Meals on Wheels, Boulder	\$ 15,450					\$ 10,806	\$ 23,000
118 Meals on Wheels, East County	\$ 10,300			\$ 2,600	\$ 2,000		
119 Meals on Wheels, Longmont	\$ 15,540		\$ 36,000			\$ 12,469	\$ 4,500
120 Medicine Horse Program	\$ 8,240	\$ 11,280					\$ 2,220
121 Mental Health Partners	1,802,978	\$ 438,654	\$ 111,641			\$ 46,883	\$ 3,500
122 Mile High Community Loan Fund							\$ 24,000
123 Mother House							\$ 1,500
124 Mountain States Children's Home							\$ 3,500
125 Nederland Area Seniors							\$ 6,500
126 New Era Colorado							\$ 10,000
127 New Horizons Cooperative Preschool		\$ 42,000					\$ 13,000
128 Openarts		\$ 2,250					
129 OUT Boulder	\$ 20,000	\$ 1,600					\$ 23,500
130 Outreach United Resource Center (Child Care - Aspen Cntr)	\$ 80,000					\$ 8,313	\$ 5,155
131 OUR Center (Agency - Operating)	\$ 160,000						
132 OUR Center (Basic Needs)			\$ 59,932			\$ 16,625	\$ 19,250
133 Over the Rainbow						\$ 6,484	\$ 1,750
134 Parenting Place	\$ 59,740	\$ 5,000				\$ 9,643	\$ 31,550
135 Parlando School for the Arts		\$ 3,294					
136 Partners Mentoring Youth of Boulder County							\$ 4,500
137 Partners of Boulder County, Inc.		\$ 15,225					
138 Parent Engagement Network							\$ 1,750
139 Parents, Family and Friends of Lesbians and Gays of Boulder							\$ 4,000
140 Plan De Salud Del Valle			\$ 20,000				
141 Planned Parenthood of the Rocky Mountains							\$ 2,000
142 Postoley Dance Ensemble		\$ 1,600					
143 Project YES (Youth Envisioning Social Change)	\$ 30,000			\$ 2,000		\$ 16,791	
144 Reading to End Racism of Boulder							\$ 1,000
145 Rocky Mountain Legal Center				\$ 2,200			
146 Safehouse Progressive Alliance for Nonviolence (Agency - Op.)	\$ 154,500			\$ 2,200	\$ 1,500		
147 SPAN (SPAN, Domestic Violence Victim Services)		\$ 60,000				\$ 46,134	\$ 1,000
148 SPAN (Outreach Counseling & Community Education)		\$ 39,670					
149 SPAN (Violence Prevention Ed. Program for Children & Youth)		\$ 8,505					
150 Safe Shelter of St. Vrain Valley	\$ 100,940		\$ 84,000			\$ 22,444	\$ 9,770
151 Salud Family Health Center	\$ 257,500					\$ 24,938	\$ 18,000
152 Second Wind Fund							\$ 8,500
153 Sister Carmen Community Center	\$ 65,000			\$ 2,200	\$ 2,500	\$ 9,144	\$ 34,500
154 St. Benedict Health and Healing Ministry				\$ 2,200			\$ 3,500
155 St. Vrain Family Center	\$ 70,994	\$ 7,216	\$ 3,500			\$ 10,723	\$ 4,100
156 St. Vrain Valley MESA (Projects in High Need Schools)							\$ 8,400
157 Teaching Peace							\$ 1,500
158 TEENS, Inc.	\$ 32,445					\$ 12,552	\$ 9,500
159 Thistle Community Housing	\$ 87,550						\$ 800
160 Tiny Tim Center			\$ 25,000			\$ 25,436	\$ 25,374
161 United Methodist Church (Food Bank)					\$ 1,000		
162 University of Colorado - Boulder (Diversity & Inclusion Summit)		\$ 2,500					
163 Veterans Helping Veterans Now		\$ 10,000	\$ 20,000				\$ 14,200
164 Via	\$ 293,550		\$ 163,500	\$ 4,400		\$ 29,426	\$ 24,750
165 Village Arts Coalition		\$ 4,912					
166 Voices for Children (CASA)	\$ 31,930	\$ 5,000	\$ 15,000	\$ 2,200			\$ 1,500
167 Wellness Initiative							\$ 9,000
168 Wild Plum Center, Longmont	\$ 61,800						
169 Wildland Restoration Volunteers		\$ 5,320					
170 A Woman's Work							\$ 3,750
171 YMCA of Boulder		\$ 7,725				\$ 22,111	
172 YWCA of Boulder County	\$ 159,650	\$ 78,250				\$ 31,338	\$ 11,450
173 Totals	\$ 6,158,615	\$ 2,344,098	\$ 1,237,204	\$ 30,800	\$ 20,000	\$ 930,606	\$ 1,103,873
Human Services Operating Awards Summary							
174 Per capita human services expenditure, 2012 <4>	\$ 22.21	\$ 28.80	\$ 14.08	\$ 1.24	\$ 1.07	\$ 3.36	\$ 3.98
175 Rank, countywide	2	1	3	6	7	5	4
176 Per capita expenditure countywide	\$42.63						
Population Estimates							
177 Total Estimated Population, 2012 <5>	300,823	99,069	87,850	24,453	18,376	300,823	300,823
178 Total Estimated Adjusted Population, 2012 <6>	283,146	81,392	87,850	24,453	18,376	283,146	283,146

<1> COB funds from: Human Services Fund, Youth Opportunities Program, HRC Community Events and Community Impact Fund.
 <2> 2010 allocations.
 <3> Combined Funds allocated by Community Foundation of Boulder County (2011), Community Foundation of Longmont (2012), Community Foundation of Denver (2012).
 <4> Calculated based on adjusted population.
 <5> Populations provided by respective city staff.
 <6> Population adjusted to remove the University of Colorado students who live on campus (27,972 people) who have been found not to be typical users of community services.

Human Services Programs Provided Directly by HS

To support a healthy, socially thriving and inclusive community, the City of Boulder Human Services (HS) Department supports an array of services guided by the 2006-2015 Master Plan. Some services are provided directly by HS, and others are delivered by community-based organizations that receive grant funding. The following programs are provided directly by the city.

CHILD CARE AND PRESCHOOLS

Program Name: Child Care Subsidy and Referral Program

Description: Assists Boulder families with finding appropriate affordable childcare in a limited market and provides low-income working families with subsidy assistance to pay for care.

Subsidy Program

The primary source of financial assistance for child care is the Colorado Child Care Assistance Program (CCCAP), available to families under 225 percent of the Federal Poverty Level (FPL) and administered by Boulder County. CCCAP reimbursement rates to childcare providers are lower than the average market rates in Boulder, giving CCCAP families fewer affordable options. City of Boulder child care subsidies help Boulder families bridge this gap. The city offers two primary types of subsidies to address these problems. “Gap” subsidies pay child care providers the difference between the CCCAP reimbursement rates and the average daily market rate for child care. “Cliff” subsidies are for families with incomes up to 300 percent FPL who do not qualify for CCCAP assistance. Client demographics are 61 percent single-parent households, 58 percent Latino, 81 percent below 150 percent of the FPL, and 46 percent monolingual Spanish speaking.

Referral Program

Children, Youth and Families (CYF) is part of the Qualistar¹ Early Learning network of 17 Child Care Resource and Referral (CCR&R) agencies throughout Colorado and is the designated CCR&R serving Boulder County. The program provides referrals to licensed child care homes, preschools and centers, and publishes consumer information on community resources for children and families. Families can search an online database containing information on licensed child care options in Boulder County or receive direct assistance. The program is funded by the City of Boulder, City of Longmont, Boulder County, Foothills United Way and Qualistar, which allows service to be offered county-wide, providing administrative and coordination efficiencies.

¹ Qualistar Colorado is an organization funded by the State of Colorado, Department of Human Services, Division of Early Care and Education, to support child care resource and referral activities and other activities related to developing and assessing quality child care programs.

Program Name: Child Care Recruitment and Training Program

Description: Implemented in 1987, the Child Care Recruitment and Training (R&T) Program provides services to maintain or increase child care capacity and to improve quality of care. Quality early care and education is important for school readiness and achievement, particularly among low-income children. The R&T Program coordinates and implements training required by the State of Colorado for child care licensure, provides technical assistance to agencies and providers, assists new providers with the licensing process and coordinates child care quality improvement trainings.

YOUTH

Program Name: Prevention and Intervention Program

Description: The Prevention and Intervention Program (PIP) is a multi-jurisdiction partnership started in 1989 to provide school-based intervention, prevention and counseling services in middle and high schools. The program is a partnership with Boulder Valley School District, St. Vrain Valley School District, the City of Longmont, Boulder County Public Health, and Mental Health Partners (MHP). The PIP in the City of Boulder is available to all students in the following schools: Boulder, Fairview, New Vista, and Arapahoe Campus high schools; Casey, Centennial, Manhattan and Southern Hills middle schools. The goal of PIP is to promote positive cognitive, emotional and physical health for students. Intervention specialists offer services designed to reduce risk factors and increase resiliency, including:

- Short-term counseling with students and families;
- Referrals to appropriate services in the community and follow-up;
- Crisis intervention and school/community-wide crisis response (suicide and homicide assessments);
- Facilitation of peer support groups on many issues for youth and families;
- Peer leadership and diversity activities; and
- Coordination of school/community-wide events such as anti-bullying programs.

Program Name: Youth Opportunities Program (YOP)

Description: YOP was created following the passage of the City of Boulder's .15 percent General Sales and Use Tax in 1994. The program was established on the premise that youth were an underserved population, with specific emphasis placed on supporting youth who face significant barriers to success or those with limited access to services.

The program is comprised of three funding programs plus the Youth Opportunities Advisory Board (YOAB). One of YOAB's primary functions is to advise the city on issues related to youth and promote civic engagement. YOAB is represented by 16 diverse city high school students. By serving on the board, youth develop leadership and civic engagement skills. YOAB members and YOP staff provide technical assistance to public and private entities and recognize outstanding youth volunteers in the community.

YOAB also allocates funding to the community for youth services and projects. Grant funds are allocated in three categories to help youth access cultural, educational and recreational opportunities: Annual Grants of up to \$15,000 to organizations, Group Activities grants of up to \$3,000 for short-term projects, and grants of up to \$200 to

individual youth. Youth recipients receive grant funding in exchange for community service. The priority for all YOP funding is to support programs serving low-income, immigrant, or differently-abled youth. Annual grant applicants must address at least one key youth issue:

- Key issues identified in Youth Risk Behavior Survey (YRBS). For example: mental health, substance use, harassment, and health disparities based on sexual orientation or ethnicity;
- Promote youth voice by engaging youth in structured aspects of civic life and/or in community dialogue on social issues;
- Provide after-school, evening, and/or summer opportunities that likely would not otherwise be available to youth;
- Provide services such as mentoring and leadership opportunities;
- Provide transportation to help youth access cultural, educational or recreational opportunities or employment;
- Provide employment-related education; and
- Support city-sponsored after-school activities.

In exchange for benefitting from YOP funding, local middle and high school students provide community service of approximately 5,500 hours per year. The financial equivalent of that amount at the 2012 minimum wage rate of \$7.64 an hour is more than \$42,000. Additionally, YOAB members contribute more than 360 hours of volunteer work annually.

FAMILY SUPPORT

Program Name: Family Resource Schools (FRS)

Description: The FRS Program was developed in 1991 in response to an identified community need for stronger family support systems to assist children in overcoming barriers to school achievement. In partnership with BVSD, the FRS program serves school families at Columbine, Creekside, Crest View, University Hill and Whittier elementary schools. Schools are selected for FRS participation based on the number of students enrolled in the Free and Reduced Lunch (FRL) program and the number of English language learners.

Family Outreach Coordinators work with families to help them become more self-reliant in key areas that affect family stability including parenting, health, nutrition, financial management, education, emotional well-being and community involvement. Examples of services include parenting classes, homelessness prevention, child care and transportation assistance, medical plan enrollment, counseling, after-school classes and activities, and attendance improvement support.

Client Demographics: 68 percent extremely low; 18 percent very low and low; 6 percent moderate; and 8 percent 100 percent AMI or above.

Program Name: Family Resource Center

Description: The Boulder Family Resource Center (FRC), established in 2012, is a collaborative pilot program of HS and Boulder County's Department of Housing and

Human Services (BCDHHS). The FRC is funded entirely by BCDHHS through the Temporary Safety Net Tax and is based on the Family Resource Schools model. The goal of the FRC is to provide a human services delivery model which moves from short-term, crises-focused services to more prevention-based services which develop family strengths and resiliency. The program is designed to build long-term relationships with families to develop goals and plans which will prevent crises and improve family functioning. Services are provided by a family outreach coordinator and a mental health therapist.

The FRC is located at Manhattan Middle School and serves all members of the community. FRC services are available to all City of Boulder families with children between birth and 18 years of age. Because the FRC is operational year-round it also serves FRS families during the summer. FRC targets services to families of students enrolled in the Free or Reduced Lunch Program in city schools. Services offered include:

- Parent Education – budgeting, parenting, parent involvement/support of student education success, family health education, and computer training;
- Basic Needs – rent, transportation, utilities, clothing, school supplies, vision, dental and medical, onsite enrollment in public assistance programs, referrals to community partners for services;
- Mental Health Counseling – for the entire family including one-on-one and group services, behavioral health risk prevention education; and
- Community engagement – parent leadership training, community activities.

Client Demographics: 76 percent extremely low income; 18 percent very low or low; 3 percent median; 3 percent 100 percent AMI; 56 percent Hispanic; 34 percent Caucasian; 4 percent Asian; 3 percent Native American; 2 percent African American.

SENIORS

Program Name: Senior Services Programs

Description: HS operates two multi-purpose senior centers, which provide a central location for Boulder seniors to meet peers and prevent social isolation, build skills to improve independence, and receive assistance with a variety of issues ranging from health to financial management. The public can rent rooms at the senior centers and numerous clubs meet there, such as NARFE (National Active and Retired Federal Employees Association), Boulder Optimist Clubs, Flatirons Mineral Club, and Rotary. The senior centers are also a location for programs discussed below, including health and wellness programs, meals, social programs, and senior resources consultations. Total visitation at the West Center in 2012 was 61,571; at the East Center, the total was 55,099.

Senior Resources

The Seniors Resources Program offers community members age 60 and up, or their caregivers, support and information to understand and access community services. This includes bilingual case management and referral for community services, basic-needs financial applications assistance; family caregiver support, respite assistance, and education. In 2012, Senior Resources assisted more than 950 senior clients and 140 family caregivers with individual consultation and resource referrals.

Seniors Health and Wellness

Boulder senior centers offer wellness classes for older adults promoting physical, emotional, and mental health; preventive health screenings including hearing and vision loss, depression, skin cancer and Alzheimer's disease; classes on brain fitness and chronic health conditions, adapted fitness classes, fall prevention and evidence-based classes in partnership with Boulder County Area Agency on Aging (BCAAA), such as Stanford University's Chronic Disease Self-Management Program. Many classes and screenings are free to the public, including the Silver Sneakers Fitness Program, which is a benefit in many Medicare supplemental health insurance policies. Other programs have small fees. A reduced rate program, based on income, is also available.

Seniors Social Programs

Senior Services offers a range of programs to promote social engagement and self-sufficiency, including:

- Educational classes and seminars for seniors in technology, life skills, arts/hobbies and aging issues;
- Recreational day trips in partnership with City of Lafayette to locations such as the Denver Botanic Gardens and Colorado Symphony. Boulder also jointly owns a bus with the City of Lafayette to provide transportation for the day trips;
- Overnight travel via a private vendor to locations such as the Canadian Rockies, and Colorado Ghost Towns.

Some social programs are free, others are part of the Encore program, in which participants pay an annual membership fee of \$20, and receive free or discounted classes and trips with their membership.

City resources were leveraged in 2012 by 50 volunteers contributing 2,854 hours valued at \$62,874 (per the Independent Sector, which calculates values for volunteer time).

FOOD SECURITY

Program Name: Food Tax Rebate Program

Since passage of a voter initiative in 1967, Boulder has operated a sales tax rebate program to help compensate lower-income residents for sales tax paid on food items. To qualify for a rebate, an applicant must have been a resident of Boulder for the prior calendar year, meet the income guidelines, complete an Immigration Status Affidavit as required by state law, and be either:

- a) A family with at least one child under 18 living at home;
- b) A senior over 62 years of age for the entire year; or
- c) A disabled individual.

In 2012:

- 166 rebates were issued to families;
- 549 rebates were issued to seniors; and
- 158 rebates were issued to persons with disabilities.

Qualified applications increased in all three categories from 2011, most notably with a 15.5 percent increase in senior applicants, comprising the largest category of qualified applicants.

Program Name: Meals on Wheels (MOW)

Description: The city funds and houses (at West Boulder Senior Center) Meals on Wheels of Boulder. Last year MOW provided an estimated 1200 congregate hot meals at the center and prepared 67,464 home-delivered meals to 665 unduplicated clients, primarily seniors, the homebound and the disabled.

HUMAN RIGHTS, IMMIGRANT AND LEGAL SERVICES

Program Name: Community Relations and Office of Human Rights (CROHR)

Description: CROHR enforces two city ordinances, both of which have been models for similar laws in municipalities around the country and in some other countries.

- Human Rights Ordinance (HRO) – Passed into law by city council in 1971, this law protects against illegal discrimination in the areas of housing, employment and public accommodation. In the past five years, CROHR staff have received, investigated and reached a determination on an average of 237 discrimination cases per year since 2006.
- Failure to Pay Wages Ordinance (FTPW) – Approved by city council in 2007, this law defines any failure to pay wages owed to employees within the city limits of Boulder as illegal. Wages recovered in FTPW cases have ranged from \$50 to \$6,000.

CROHR staffs both the Human Relations Commission (HRC) and the Immigrant Advisory Committee (IAC). The former is an advisory body to city council, the latter to the city manager. Both are models recognized by other municipalities and the HRC was cited by the Department of Justice Community Services Program as an example of effective approaches to community relations.

Human Relations Commission (HRC) - The HRC comprises five council-appointed members who work to advance diversity education, inclusion, civic engagement and recommend policy to address social issues. The HRC serves as a quasi-judicial body for resolution of Human Rights Ordinance cases. The HRC also administers two community funds:

- Community Event Fund (CEF), to support community-based events that encourage education, respect and appreciation for communities in Boulder. All events supported by the fund must be free and open to the public. Grants range in size from \$200 to \$1,600 and have supported activities such as Boulder Jewish Festival, Pridefest, and Cinco de Mayo.
- Community Impact Fund (CIF), to support community-initiated activities that raise awareness on emerging civil rights issues and neighborhood problems. Grants range in size from \$500 to \$5,000. Examples of CIF projects include Boulder Circles Campaign, CU Diversity and Inclusion Summit, 2012 Homeless Persons Memorial, Latino Community Assessment.

Immigrant Advisory Committee (IAC) - The IAC serves to encourage immigrant

involvement in city government and to advise the city on issues affecting the immigrant community. It comprises up to seven members, appointed by the city manager and meets quarterly. In 2010, the National League of Cities included Boulder in its report “Municipal Innovations in Immigrant Integrations: 20 Cities, 20 Good Practices,” highlighting the unique approach of the IAC to immigrant integration.

The IAC provided approximately 66 hours of volunteer time valued at more than \$1,400.

Each year, the CROHR coordinates Boulder’s Annual MLK Day Celebration. The event is planned by community organizations, the City of Boulder and University of Colorado at Boulder.

Program Name: Community Mediation Service (CMS)

Description: CMS provides restorative justice (RJ), low-cost mediation, and resource and referral services to Boulder residents. CMS relies heavily on volunteers who are trained in RJ and/or mediation to provide high-quality conflict resolution services to the public. RJ cases are typically referred to CMS by the municipal court. These cases involve offenders who have been charged with such municipal crimes as disrupting quiet enjoyment, brawling, or being a minor in possession of alcohol. Municipal prosecutors and probation officers determine if offenders are taking adequate responsibility for their conduct, and if they are, the offender is offered a choice of taking their case to trial or going through the RJ process, which costs \$125.

CMS provides mediation services relating to several types of conflicts, the most common are those relating to residential landlord/tenant and neighbor issues. CMS serves as a residential landlord/tenant information line, fielding more than a thousand inquiries annually from the public. Other types of conflict addressed by CMS include parent/teen, senior, wage theft, and discrimination under the Human Rights Ordinance. The cost of mediation is \$25 per party. This fee can be waived in cases of financial hardship.

CMS volunteer mediators include attorneys, students, Spanish speakers, substance abuse counselors, teachers and retirees. Mediators are required to have forty hours of professional interest-based mediation training and RJ facilitators must complete a two-day training. Private sector mediators in Colorado typically charge \$120-\$350 hourly. Using a conservative valuation of \$200 per hour for volunteer time, the total value of volunteer time represents from \$47,800 to \$89,600 annually.

Selection Criteria for Peer Cities

Cities	2011 Population (1)	City Population as % of County Population (1)	College Student % of Population (2)	2012 Median Area Income (4-person household) (3)	Median Sales Price (000s) (4)	Median Value, Owner-Occupied Units (000s) (5)
Boulder	98,889	32.9%	29.9%	\$93,800	\$383.7	\$501,800
Peer cities (matched criteria in at least three categories**)						
Ann Arbor, MI	114,925	33.0%	36.1%	\$87,400	not available	\$229.2
Berkeley, CA	113,905	7.4%	31.3%	\$96,700	\$543.8	\$677.7
Ft. Collins	146,762	48.1%	22.0%	\$77,700	not available	\$238.6
Madison, WI	236,901	47.7%	20.9%	\$82,900	\$210.6	\$213.9
Norman, OK	113,273	43.3%	21.0%	\$61,500	not available	\$147.7
Santa Cruz, CA	60,342	22.8%	29.3%	\$87,000	not available	\$647.0
Local cities included because of proximity						
Arvada	107,541	10.9%	6.0%	\$79,300*	\$252.4*	\$236.0
Westminster	107,967	10.9%	7.2%	\$79,300*	\$252.4*	\$227.0
Considered, but low criteria match						
Lakewood	144,406	26.8%	7.2%	\$79,300*	\$252.4*	\$235.8
Eugene, OR	156,929	44.4%	18.8%	\$59,200	not available	\$236.6
Provo, UT	115,321	21.8%	35.9%	\$67,100	not available	\$196.3
Santa Barbara, CA	89,045	20.9%	11.3%	\$73,300	not available	\$812.8
Tempe, AZ	164,268	4.2%	23.5%	\$66,400	\$147.6	\$184.5

* Located in Denver-Aurora Metropolitan Statistical Area. Median Family Income and Median Housing Price are for Denver-Aurora MSA.

** **Bold face data indicate qualifying criteria:** +/- 25% of Boulder's value on each indicator, except for city population as % of county population, where +/- 30% was used.

- Sources:
- (1) U.S. Census Bureau, Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2011.
 - (2) U.S. Census Bureau, American Community Survey, 2009 to 2011 Three-Year Estimates, Table B14001 and Table DP05. College student population includes both undergraduate and graduate/professional school.
 - (3) Fannie Mae, Area Median Income Search; State of California Business, Transportation, and Housing Agency, Department of Housing and Community Development, Division of Housing Policy Development, State Income Limits for 2012, Memo dated February 1, 2012.
 - (4) National Association of REALTORS®, Median Sales Price of Existing Single-Family Homes for Metropolitan Areas, 2012 (preliminary).
 - (5) U.S. Census Bureau, American Community Survey, 2011 One-Year Estimates, Table DP04. Value for Santa Cruz, CA is based on 2009 to 2011 3-Year Estimate.