

The State of the State For Washington Latinos

Walla Walla Poverty Assessment

An intensive study of poverty and agency in Walla Walla

Mary Allain | Hannah Holloran | Julia Stone | Charlie Weems

February 2012



**THE STATE OF THE STATE
FOR WASHINGTON LATINOS**

**WHITMAN COLLEGE
DEPARTMENT OF POLITICS**

**135 Maxey Hall
Whitman College
280 Boyer Avenue
Walla Walla, Washington 99362**

www.walatinos.org

Delivered February 2012

The findings and conclusions of this study are of the authors alone and do not necessarily reflect the opinions of Whitman College. Names and personal information of interview subjects, survey participants, and individuals in contributed databases have been altered or deleted where appropriate. All errors are solely attributable to the authors.

Please direct questions and comments to info@walatinos.org.

Contents

Introduction	4
Literature Review.....	6
<i>I. Defining poverty</i>	<i>6</i>
<i>II. Social Services</i>	<i>11</i>
<i>III. Community-Based Organizations</i>	<i>18</i>
<i>IV. Neighborhood Attachment and Satisfaction</i>	<i>21</i>
<i>IV. How Can GIS Aid Our Understanding of Poverty?.....</i>	<i>23</i>
Methods	32
Social Service Use and Access in Walla Walla: Presentation and Analysis of Primary Research ..	44
<i>I. Demographic Composition:</i>	<i>44</i>
<i>II. Income-level, Employment and Educational Attainment:</i>	<i>49</i>
<i>III. Medical Services</i>	<i>64</i>
<i>IV. Childcare Services</i>	<i>74</i>
<i>V. Housing and Utility Assistance</i>	<i>87</i>
<i>VI. Food Assistance</i>	<i>95</i>
<i>VII. Transportation:</i>	<i>102</i>
<i>VIII. Zoning in the Commitment to Community Neighborhoods</i>	<i>106</i>
<i>IX. Neighborhood Satisfaction, Attachment, and Involvement:</i>	<i>113</i>
<i>X. Summary of Findings:</i>	<i>129</i>
Conclusion	131
<i>Key Recommendations</i>	<i>132</i>
Appendix	135
<i>Section A.....</i>	<i>135</i>
<i>Section B</i>	<i>141</i>
<i>Section C.....</i>	<i>145</i>
Works Cited	149

Introduction

We all have a stake in cultivating a more open and equal society for individuals of all races and socioeconomic classes. As research on the subject of poverty advances, new evidence continues to show that everyone benefits when the causes of marginalized individuals are advanced. From both an economic and moral perspective, the cost of isolation from one's community is simply too high.

This report explores the role that neighborhood-based organizations (NBOs) should serve to best meet the needs of low-income populations in Walla Walla. We examine which human services are being used, by which demographic groups, and the extent to which individuals and families living in poverty are able to meet their basic needs. We also observe the relationship that neighborhood attachment and satisfaction has on residents' knowledge and use of services. We assessed the characteristics and needs within three neighborhoods in Walla Walla where Commitment to Community (C2C), an NBO and our community partner, is most active.

Specifically, we posed the question: What role should neighborhood organizations serve to best meet the needs of low-income populations in Walla Walla? In order to best address this, we wanted to gain a better understanding of what poverty looks like and how it is experienced in Walla Walla. We wanted to know, where is poverty concentrated in Walla Walla? Who experience poverty, and are there any demographic patterns? And, how are these different groups able to access the support or services and where do they turn for support? How does C2C fit into these networks of support?

Commitment to Community (C2C) is a community-based organization that provides the underlying infrastructure to support neighborhood residents currently living in Walla Walla. As a means to accomplish its mission of building a strong community through building strong neighborhoods, C2C starts at the ground level where residents are gradually building relationships and trust with and among neighborhood residents. Its focus is to work alongside residents in an informal, grassroots manner without an agenda other than to build a sense of ownership among neighbors and their related issues. In addition, community partnership support of C2C broadens its capacity to act as a "hub of trust" and a "point of entry" for other service providers and entities that deliver services.

We are grateful for the support of Julia Leavitt and Aubrey Hill at Commitment to Community of Walla Walla for their enduring support of this project and their function as our community partner. Commitment to Community provided the general questions and frameworks that used to analyze poverty over the following pages. Additionally, Commitment to Community facilitated much of the interview and data collection process by providing us with contacts and potential avenues for research. Overall, this project represents and extensive collaboration between our research team, Commitment to Community, and a host of individuals and organizations that Julia and Aubrey worked to connect us with.

We conducted field research using surveys, interviews and GIS analysis. We employed a cross methodological forms of field research to assess the presence of poverty in Walla Walla, the needs of the specific communities within Walla Walla, if those needs differed among Latinos and non-Latinos, and the impact C2C has had on these areas. Surveys were distributed door-to-door and completed by low-income households in each of the three neighborhoods in which C2C is active. Interviews were conducted in person in the same neighborhoods. GIS analysis was used to identify the locations of social services in the Walla Walla, and to compare census data (i.e. populations, race distribution, free and reduced lunch percentages, and YMCA membership, to name a few) to our own research. We integrated our data to get a micro and macro-level view of poverty in Walla Walla neighborhoods.

We found that there is a large low-income population in Walla Walla that is geographically focused in the Commitment to Community neighborhoods. Human services are crucial in the daily lives of low-income populations for fulfilling their basic needs. Personal relationships were key for people to navigate poverty; informality and personal connections encouraged use of formal sources of support, government organizations such as food banks, and informal sources of support, such as family members, neighbors, and friends. In Walla Walla, there is a significant difference between high school graduation rates of White and non-White survey respondents, suggesting a gap and potential barrier to educational achievement; such barriers need to be explored further.

In light of our research, we have developed several recommendations. We recommend that neighborhood-Based Organizations need to increase the amount of both formal and unstructured activities that allow neighbors to get to know each other. On a state and national level, we advise that government funding to social services be secured and augmented in response to the need for services in the areas of medical care, employment assistance, food assistance, childcare, housing and utilities support. State and local governments should also secure funding, facilitate, and support the efforts of neighborhood based organizations as a strategic component of community development policy. We also recommend that state governments continue to fund services that increase and build personal relationships between providers, staff members and those utilizing services to elicit feelings of trust and increase accessibility. Bilingual staff members at schools, hospitals and social service distribution sites, as well as neighborhood-based organizations is important for making the Spanish-speaking communities in Walla Walla feel more comfortable and increase the likelihood of accessing service. the use of and increase the number of bilingual staff members in hospitals, at schools, at social service distribution sites, and on the staff of neighborhood-based organizations.

Literature Review

I. Defining poverty

Poverty as a complex and diverse social condition

Poverty is a complex, diverse and highly situational concept that describes a particular experience or characteristic of a group of people. Prior research has been conducted debating the definition and measurement of poverty in the U.S. In his briefing on the meaning and measurement of poverty, Simon Maxwell presents a discussion of the historical evolution of debates associated with the concept of poverty. Early definitions that measure poverty strictly based on individual household income levels are problematic in that it reduces the extent to which individuals experience poverty; such definitions exclude non-monetary consequences an individual may experience including a lack of autonomy and lowered self-esteem or restricted participation in society, economically, socially, culturally or politically.¹ In the last few decades, however, there has been a proliferation of in-depth research that critically analyzes the causes and effects of poverty, expanding and complicating the concept of poverty to take into account the historical, cultural and social factors that contribute to an individual's experience with poverty. For our research, we take advantage of the revisions to the concept of poverty and frame our research with a comprehensive view of poverty. Maxwell's briefing links non-monetary characteristics and low-economic standing including characteristics such as powerlessness, social, political and economic isolation, and issues with participation and mobility. This is to describe a pervasive description of what it means to be poor. There is an overriding connection between one's economic status and one's social and political experiences.

Goode et al. offer a critique of the prevailing political ideology regarding poverty which describes impoverished individuals as helpless victims. Deconstructing the common question, "What can we, as Americans, do for the poor?" Goode et al. dissuade us from the assumption that the fate of the poor lies in the hands of the rich. When considering solutions to poverty, such rhetoric can strip agency from the individual experiencing poverty. This perspective establishes a mainstream framework that allows the poor to be openly and visibly discussed in public policy debates, yet denies them agency to speak on their own behalf or act independently.² For the past few decades, the public discourse on poverty has limited the poor's access to political, economic and moral citizenship.³ Goode et al. contend that contemporary poverty is a product of structural and ideological dynamics, rather than solely economic marginalization. They contend that it "has been shaped by three main factors: polarization at the economic level, demobilization at the political level, and market triumphalism at the ideological level".⁴ Understanding the connection between the economic structural forces is significant in understanding the limitations on social and political participation. In this way, studies of poverty and poverty assessments should consider social and political experiences. Additionally, solutions to poverty-related problems should not be strictly based on income, but must take into account social and political factors as well.

Caron et al. produce a comprehensive assessment of the roots and characteristics of poverty and related problems in a rural town in Virginia. Their conversations with social service providers reveal the problems

1 Overseas Development Institute. The Meaning and Measurement of Poverty. (Simon Maxwell: 1999)

2 Goode J., & Maskovsky J. New Poverty Studies: The Ethnography of Power, Politics and Impoverished People in the United States. (New York University Press: 2001)

3 Ibid.

4 Goode et al. 2001

associated with quantifying poverty strictly on the income status of an individual, as there are many other factors that influence economic vulnerability. Many of the individuals served by community service providers fall above their agencies' income eligibility guidelines, generally set by federal poverty guidelines, but are still considered "poor" because they are unable to meet basic needs.⁵ It is necessary to conceive of poverty through a holistic lens by considering all economic, social and political factors that could influence the to meet basic needs such as food, shelter, medicine, health care, heat, and transportation. Caron et. al. come to a consensus that poverty can be defined as a "non-voluntary condition in which individuals do not possess the agency required—or have access to requisite resources—for basic participation in society".⁶ Viewing poverty in the context of an individual's capability to participate freely and fully in social, political and economic aspects of life allows us to expand the definition of what it means to be poor beyond the traditional income-based definition. Caron et al. produce a comprehensive assessment of the roots and characteristics of poverty and related problems in a rural town in Virginia. Their conversations with social service providers reveal the problems associated with quantifying poverty strictly on the income status of an individual, as there are many other factors that influence economic vulnerability.

Employment issues and the cyclical nature of poverty

It is understood that one's employment largely determines one's economic status; scholars, service providers, policymakers and society at large generally accept the fact that unemployment can increase the risk of poverty. Another widely accepted belief is that the solution to the problems associated with poverty can be achieved through employment. However, recent research has revealed an overlooked population that is employed, yet still highly susceptible to poverty. William Quigley's discussion of low-wage employment disrupts the traditional correlation between unemployment and poverty; the common focus on unemployment largely ignores a significant portion of the marginalized population who are still poor despite being employed. Low-wage employment creates a situation of "underemployment", where low wages are largely inefficient in supporting the basic needs of individuals and their families. The director of the Atlanta Community Food Bank revealed to Quigley that there was a 30 percent increase in the number of people seeking assistance with food despite the fact that the number of welfare recipients had been reduced by half.⁷ While most "working poor" can afford a few monthly expenses, few can afford them all on their low wages.⁸ Consequentially, "many basic needs such as health care, quality child care, and decent housing were not fully met".⁹ Essentially, simply being employed doesn't necessarily mean that individuals are capable of fully supporting themselves or their families. Most services have eligibility requirements that are derived from federal poverty levels. These standards of living grossly underestimate the actual cost of living, which potentially excludes millions from assistance with acquiring basic needs.

Janet Fitchen provides a comprehensive analysis of rural poverty in the United States. Fitchen describes how underemployment is related to rural poverty: families face increased risk of poverty as a result of the interconnectedness of job insecurity, inadequate wages, and consequential problems of unreliability of housing and lack of access to health care.¹⁰

5 Caron, M. & Martin, C. Rockbridge Poverty Assessment 2008: A Community-Based Research Project. (Lexington, Virginia: 2008) 14

6 Caron, M., & Martin, C. 2008, 15

7 Quigley, W. Ending Poverty as We Know It: Guaranteeing A Right to a Job at a Living Wage. (Philadelphia: Temple University Press, 2003) 72

8 Quigley 2003, 74

9 Quigley 2003, 38

10 Fitchen, J. Poverty in Rural America: A Case Study. (Waveland Pr Inc. 1995)

Race and gender as indicators of poverty

One cannot look at poverty without acknowledging the diversity of experiences within poor populations along racial and gender lines. Race and gender are both indicators of an increased risk of poverty.¹¹ While poverty and unemployment are problems faced by all, women and racial minorities are undeniably overrepresented among the poor population.¹² Significant research suggests that these demographic groups face distinct barriers to full and adequate employment, which, as discussed above, increases the risk of poverty.

Jill Mangaliman's report on poverty in Washington State shows that communities of color, especially African American and Hispanic populations, face a lower social and economic position compared with other racial groups.¹³ Racial inequality also persists in home ownership, wealth accumulation, health, and education; these characteristics are important in one's potential risk of poverty. According to the Washington Department of Social and Health Services, people of color in Washington State are far more likely to be living in poverty than non-Hispanic Whites.¹⁴ One would assume that an increased instance of poverty would increase need for services and support in communities of color. Research affirms that communities of color disproportionately rely on government and organizational support systems for basic needs. Recipients of the State Food Assistance Program are predominantly people of color; an analysis by the Washington State Board of Health suggests that individuals enrolled in the Basic Health Program are more likely to be people of color.¹⁵ Additionally, 78% of children that receive coverage under Washington State's Apple Health for Kids insurance program are Hispanic.¹⁶

Racial and gender inequalities also exist in one's ability to find work and receive a living wage. Bergad et al. and Quigley contend that race and gender are important predictors of who is working in what fields and who is likely to be underemployed.¹⁷ The U.S. Department of Labor's final report of 2010 reveals staggering racial inequalities among rates of unemployment: the unemployment rate was 13.0% of the Latino labor force and 15.8% of the black labor force, compared with only 8.8% of the white labor force.¹⁸ Bergad et al. discuss the gender imbalance in the work force in the Hispanic community. Women participate at much lower levels than men do and are unemployed at higher rates than men.¹⁹ The fields of work in which Hispanics traditionally work, including construction or low-paying secretary work, are also jobs that experience a high turnover rate, increasing economic instability for the community.²⁰ Bergad et al.'s research attributes this phenomenon to the lack of education immigrant Hispanics receive, and the language barriers they face.²¹ The

11 Bergad & Klein, Hispanics in the United States (Cambridge University Press: 2011)
Kirby, J. Poor People, Poor Places and Access to Health Care in the United States. (Social Forces: 2008)

Lui, Meizhu, Robles, B., Leondar-Wright, B., Brewar, R. & Adamson, R. The Color of Wealth: The Story Behind the U.S. Racial Wealth Divide. (New York: The New Press, 2006),
Quigley 2003

¹² Quigley 2003

¹³ Mangaliman, J. The Color of Cuts: The Disproportionate Impact of Budget Cuts on Communities of Color in Washington State. (Seattle, WA: Washington CAN!: 2011) 4

¹⁴ Mangaliman 2011, 4; Oh 2004

¹⁵ Mangaliman 2011, 10

¹⁶ Mangaliman 2011,9

¹⁷ Bergad et al. 2010, Quigley 2003

¹⁸ U.S. Department of Labor 2011

¹⁹ Bergad et al. 2010, 179

²⁰ Bergad et al. 2010, 180

²¹ Bergad et al. 2010

incidence of “working poor” is not exclusive to the Hispanic community and in fact found at higher rates in other minority groups like black and woman workers.²²

Bergad et al. explore the gap in employment and wage earnings between Latinos and other racial and ethnic groups. Bergad et al. join Lui et al. and Mangaliman in citing lower education levels as the most significant force perpetuating this disparity.²³ Bergad et al.’s research links educational attainment, household income, with the possibility of upward social mobility. Through analysis of data from recent decades, the Hispanic population consistently has the lowest percentage and slowest growth rate of college graduates in comparison with all other racial and ethnic groups.²⁴ The low percentage of Hispanics with higher education is a definite exclusion from the primary form of wealth creation, according to Lui et al.

Lui et al. consider wealth and accumulated assets in addition to cash income in order to explain disparity in economic status among racial and ethnic lines. By analyzing various wealth indicators such as mean asset ownership, median net worth, and family income distribution, this text offers a more comprehensive foundation for understanding why minorities experience a higher rate of poverty. Lui et al. contend that wealth is achieved over generations: consequently, historical barriers such as racist government programs that have effectively barred minorities from wealth creation initiatives influence an individual’s economic status.²⁵ In the context of wealth accumulation, education allows for individuals to access living-wage jobs: without a high school diploma, GED or a vocational diploma, “one cannot access higher education nor can one obtain a living wage job with health benefits”.²⁶ The resulting lack of opportunity for marginalized racial or ethnic groups to access living-wage jobs impedes home ownership, insurance coverage, and access to basic health services. Inability to advance one’s socioeconomic status can make it very difficult for people to evade the risk of poverty.

Bergad et al. complicate racial categorization: their research describes how an individual’s experience with poverty within the Latino population is highly variable along the lines of class, geographic location, immigration status and gender. For example, of the Hispanic population, immigrants in general have lower educational attainment than the resident population.²⁷ In examining this heterogeneity within the Hispanic population, the authors highlight the importance of understanding certain barriers that immigrants uniquely face in educational attainment. Lui et al. affirms the correlation between educational attainment and poverty within the immigrant community. It is virtually impossible to amass any significant wealth without legal status, which itself perpetuates barriers to educational attainment.²⁸

Analyzing the feminization of poverty

Gender is a significant root of inequalities in employment and income, and much research has been done in past decades to develop the thesis of the feminization of poverty. Ezeala-Harrison describes the “feminization of poverty” as “the condition in which the percentage of females living in poverty relative to the composition of females in the population is disproportionately higher than that of males, and consistently so over time”.²⁹

22 Quigley 2003, 57

23 Lui et. al. 2006

24 Bergad et al. 2010

25 Lui et al. 2006, 159

26 Lui et al. 2006

27 Bergad et al. 2010

28 Lui et al. 2006

29 Ezeala-Harrison, F. Black Feminization of Poverty: Evidence from the U.S. Cross-Regional Data. (The Journal of Developing Areas: 2010) 149

Ezeala-Harrison's research reveals that black women experience relatively high poverty rates. Analysis of Current Population Surveys (CPS) reveals that socioeconomic factors exert much greater influence in Black feminization of poverty.³⁰ The discrepancy in wages and overall earnings is a significant driver of engendered poverty and is consistent with contemporary research. Although the majority of women now work, they still face major wage discrimination: for each hour worked, full-time working women earn almost 25% less than men.³¹ This discrepancy is striking when considered in the context of Lui et. al's discussion of wealth accumulation. As a result of this wage discrepancy, women are significantly disadvantaged in the long-term and lack important benefits like employer-provided pensions.

Jones et al. describe many of the hypotheses for the dramatic rise in female-headed poverty during the 1970s, which has continued in recent decades. They attribute this dramatic feminization of poverty to the "intensification of familial break-up, the dynamics of welfare, and the increasing numbers of women entering a segmented and discriminatory labor market".³² Jones et al. argues that analysis of gendered poverty must also be addressed through a geographic lens. They argue that the "spatial-economic transformations of the 1970s and beyond are of such proportions" that they have dramatically impacted "women's experiences in labor markets, and ultimately for the feminization of poverty".³³

Poverty in Walla Walla

To date, there has only been one formal study of poverty in Walla Walla. In her 2009 assessment on poverty in the Latino community of Walla Walla, Reaven showed that the percentage of unemployed Latinos in Walla Walla is significantly greater than the percentage of unemployed whites.³⁴ Reaven affirms Quigley's description that minorities are overrepresented in impoverished populations.³⁵ Her work also describes the relationship between restriction to low-wage work and poverty in Latino communities. Lack of access to living wage jobs restricts economic mobility of poor Latinos. The result is a persistent inability to earn enough to meet basic needs, let alone save enough money to advance their socioeconomic status.

Reaven reveals that the poor population is highly under-served and that there are inequalities in service use along racial lines.³⁶ Through conversations with community members and service providers, she identifies a number of barriers that explain the lack of service use within Latino communities including domestic abuse, educational obtainment, language usage, immigration issues, and lack of access to living-wage jobs and reliable transportation. Her research is consistent with the literature on racial barriers.³⁷

Reaven's interviews with the Latino population also link immigration issues to whether or not one can attain adequate, living-wage work to support one's family: she writes that "the large population of undocumented immigrants who are unable to obtain health insurance...are forced to utilize more expensive emergency care".³⁸ There is a diversity of experiences with poverty that exists within different demographic

30 Ezeala-Harrison 2010

31 Quigley 2003, 58

32 Jones P. & Kodras, J. Restructured Regions and Families: The Feminization of Poverty in the U.S. (The Annals of the Association of American Geographers: 1990) 164

33 Ibid.

34 Reaven, D. Walla Walla Poverty Assessment: How Transportation, Healthcare, Employment, and Domestic Abuse Affect Latinos and Others in Poverty. (Whitman College Politics Department: 2009)

35 Reaven 2009, Quigley 2003

36 Reaven 2009

37 Quigley 2003, Bergad et. al. 2010

38 Reaven 2009

communities in Walla Walla: Latino communities experience great inequalities to health care, exacerbated further by issues of legal status. Her discussion with community members reveal that health care and health insurance are often seen as luxury items within the Latino population and are considered to be less pressing than other basic needs such as food and rent. Her work illuminates potential barriers to receiving health care including lack of insurance, cultural barriers and level of comfort in accessing facilities.

Reaven's assessment also examines geographic characteristics of poverty in Walla Walla. Her research reveals a correlation of high concentrations of people with less education in areas of concentrated poverty, such as the Edith-Carrie neighborhood. These findings connect with the literature's discussion on the interdependent relationship between educational attainment, job mobility and poverty.³⁹ In order to address poverty in Walla Walla, it is important to consider the diversity of experiences within the poor population that impact different communities in different ways. Our research seeks to understand the variation in human and social capabilities and capacity for civic participation within low-income communities.

II. Social Services

What services are available for low-income individuals and families? What are the barriers in place that are preventing them from receiving the help they need?

The list of services and programs available for meeting the essential human services for low-income individuals and families in the United States is extensive and covers a wide range of needs. The U.S. Department of Health and Human Services includes more than 300 programs alone (www.hhs.gov). Given the considerable volume of available services, paired with the fact that these programs are constantly being updated, the ability to stay knowledgeable and current about the available resources is a significant challenge. In their study aimed at identifying barriers to receiving public benefits among low-income families with children, Wu et. al. found that "lack of knowledge of relevant programs, their benefits, and eligibility rules" was the most common barrier among benefit recipients.⁴⁰ Even service providers find it a challenge to be cognizant of all of the programs and services available for their clients. Caron et. al. discovered that "nearly all agency leaders articulated that they were not completely knowledgeable of the services other agencies were providing".⁴¹ While an exhaustive list of the social services available to low-income individuals and families would be superfluous and unnecessary, we will provide a short review of the most basic programs and services available. In order to develop a better understanding of the reasons why people have difficulty accessing these social services, it is also necessary to look beyond what services are offered and to look at the barriers that exist which are preventing people from receiving the help they need from these services. It is our hope that by identifying these barriers, we can begin to make considerations about what can be done to facilitate service access, given these impediments. The following programs have been organized into five categories based upon the services they provide. These categories include mental health services, child care, medical services, food support, and housing assistance.

39 Bergad et al. 2010, Lui et al. 2006, Reaven 2009

40 Wu, C., & Eamon, M. K. Need for and barriers to accessing public benefits among low-income families with children. (Children and Youth Service Review: 2010)

41 Caron et.al. 2008, 58

Mental Health Services

Mental health services are provided through numerous systems. Some mental health services are covered through public insurance such as Medicaid; however, private insurance and community health centers are also commonly used. The rise in community health centers grew out of the deinstitutionalization movement of the 1960s where mental health services were directed towards community settings rather than psychiatric hospitals.⁴² Children's mental health services are also provided through schools, the child welfare system, the Children's Health Insurance Program (CHIP), and the juvenile justice system.⁴³

Shortly after the failure of these programs to meet the needs of children was exposed by Jane Knitzer in *Unclaimed Children: The Failure of Public Responsibility to Children in Need of Mental Health Services* in 1982, the Child and Adolescent Service System Program was established using a system of care approach that emphasized family advocacy.⁴⁴ A system of care is a "comprehensive spectrum of mental health and other necessary services which are organized into a coordinated network to meet the multiple and challenging needs of children and adolescents with severe emotional disturbances and their families. They are complex, adaptive systems sensitive to local conditions that provide "access to and availability of services and supports across administrative and funding boundaries".⁴⁵ Considerable improvements have been made to mental health care services, particularly as developments from research have identified the key issues surrounding the state of our children's mental health and as strategies to ameliorate these problems are being fashioned and implemented. The system of care approach has been used in this respect by identifying leverage points, places of influence where system planners can intervene strategically, to develop a framework of care that is grounded in the existing values and factors important to the community.⁴⁶ While we are more knowledgeable about the causes of mental health issues and are more perceptive of indicators that mental health issues exist within the context of a community, this does not necessarily signify that the mental health needs of individuals in the United States are being met. In fact, thousands of Americans continue to suffer from mental health problems without any form of medical or counseling assistance.⁴⁷

In a follow-up report of *Unclaimed Children, Unclaimed Children Revisited*, authors Cooper et. al concluded that most states are struggling to meet the mental health needs of children. An alarmed twelve states reported that there are "no children and youth with serious mental health problems that they serve well."⁴⁸ Data from the National Survey of American Families demonstrates a similar lack of adequate service provided, reporting that only 21% of children in need of mental health services are actually receiving them, leaving 79%, or 7.5 million children in need of mental health services without them.⁴⁹ Furthermore, children from

42 Bringewatt, E. H., & Gershoff, E. T. Falling Through the Cracks: Gaps and Barriers in the Mental Health System for America's Disadvantaged Children. (Children and Youth Services Review: 2010)

43 Bringewatt et. al. 2010, 6

44 Cooper, J., Aratani, Y., Knitzer, J., Douglas-Hall, A., Masi, R., Banghart, P., & Dababnah, S. Unclaimed Children Revisited: The Status of Children's Mental Health Policy in the United States. (National Center for Children in Poverty: 2008)

Bringewatt et. al. 2010, 3

45 Stroul, B., & Friedman, R. A System of Care for Children and Youth with Severe Emotional Disturbances (Rev. ed.). (Georgetown University Child Development Center, CASSP Technical Assistance Center: 1986)

46 Hodges, S., Ferreira, K., Israel, N., & Massa, J. Strategies for System of Care Development: Making Change in Complex Systems: A framework for analysis of Case Studies of System Implementation: Holistic Approaches to Studying Community-Based Systems of Care. (University of South Florida: 2006)

47 Vetzner, S. Mental Health American Calls House Funding Bill a Severe Blow to Mental Health Services and Supports. (Mental Health America: 2011)

48 National Center for Children in Poverty (NCCP) 2008

49 Kataoka, S., Zhang, L., & Wells, K. Unmet Need for Mental Health Care Among U.S. Children: Variation by Ethnicity and Insurance Status. (American Journal of Psychiatry: 2002)

1552, Bringewatt et. al. 2010

low-income families are particularly susceptible to not receiving services.⁵⁰ Research on service utilization for mental disorders has also indicated that there exists a racial disparity among individuals in need of mental health services; racial and ethnic minorities, compared with whites, have less access to, and availability of, mental health services, are less likely to receive needed mental health services, and often receive a poorer quality of mental health care when services are provided.⁵¹

For adults seeking mental health support, Washington State offers services through the Division of Behavioral Health and Recovery (DBHR). DBHR addresses multiple issues including alcohol and substance abuse, gambling problems, depression, and suicidal thoughts. The Crisis Clinic, statewide behavioral health help line which began in July of 2011 offers 24-hour emotional support and referrals to local treatment services.⁵² Regional Support Networks also manage Washington's mental health program. There are 13 Regional Support Networks in the state, which negotiate with mental health agencies in their respective counties to provide "direct, outpatient clinic services and short-term inpatient treatment in community hospitals. Services include individual therapy, group therapy, crisis services, and medication evaluation."⁵³

Although research has made it fairly clear that the current mental health needs of individuals - particularly those of low socio-economic status and minorities - are not being met, the reasons for this are less clear. Determining the inadequacies of current programs and why participation is so low for eligible families are critical steps that need to be taken if we are to improve access to benefits and ultimately help enhance their mental health state. A presidential report issued by the Bush administration in 2003 found that "lack of coordination among service providers, fragmented services, and the unavailability of services" were all contributing factors hindering the mental health system.⁵⁴ Furthermore, the commission found that Americans do not regard mental health as having the same importance as other medical problems and thus, do not respond to poor mental health with the same urgency.⁵⁵ Failure to intervene early in childhood was another problem identified by the commission. A report by the Children's Defense Fund found similar barriers preventing access to mental health services such fragmented services and lack of providers. The report also cited parents' lack of information about available services and benefits, fear of the stigma associated with accessing care, and distrust of "the system" as additional barriers.⁵⁶

Child Care

The most widely used child care services are center-based care programs.⁵⁷ Center-based care programs are licensed facilities of care for children in groups under the supervision of a trained staff and that adhere to state regulations.⁵⁸ Early Head Start/Head Start and state funded public preschools are examples of center-based care. Other forms of child care include family childcare providers, in-home caregivers, and less formal care by friends, neighbors, and relatives. The state of Washington provides two free child care services for eligible families: Head Start, which is federally funded, and Early Childhood Education and Assistance

51 Merikangas, K., He, J., Burstein, M., Swendsen, J., Avenevoli, S., Case, B., Georgiades, K., Heaton, L., Swanson, S., & Mark Olsson, M. New Research: Service Utilization For Lifetime Mental Disorders In U.S. Adolescents: Results of The National Comorbidity Survey-Adolescent Supplement (NCS-A). (Journal of the American Academy of Child & Adolescent Psychiatry: 2011)

52 Helpline Services Provided. (2011) Retrieved from <http://helplineww.org/>

53 WA Department of Social & Health Services 2011

54 President's New Freedom Commission on Mental Health 2003

55 Ibid.

56 Children's Defense Fund (CDF) 2003, Bringewatt et. al. 2010

57 Ertas, N., & Shields, S. Child Care Subsidies and Care Arrangements of Low-income Parents. (Children and Youth Services Review: 2011)

58 Encyclopedia of Children's Health. Children's Health: Day Care. (2011)

Program (ECEAP), which is state funded.⁵⁹ Child care subsidy programs (CCSP) help low-income families pay for child care through one of three programs: Working Connections Child Care (WCCC), Seasonal Child Care, or Homeless Child Care. Unfortunately, the demand for these support programs is larger than the supply of service providers, resulting in a backlog of cases. A waiting list was established in March of 2011.⁶⁰ Child care does more than foster healthy development and socialization skills for our country's youth. Childcare centers also play a crucial role in providing people with access to information and information about formal and informal services.⁶¹ Because access to child care can lead to access of other social services, a family's ability to acquire childcare may be an especially important indicator of the extent to which a family is able to meet all of their basic needs.

Researchers have recently explored the reasons why access to child care subsidies and human services is still so limited. In a 2007 public health report from the county of Los Angeles, several barriers were identified, including inability to afford child care, lack of availability in child care centers, unsatisfactory quality of care, hours or locations not fitting needs, and language barriers, particularly among Latino parents.⁶² A 2006 report released from the Government Accountability Office found similar barriers among families with limited English proficiency, such as difficulty finding child care during nontraditional work hours, lack of transportation, and waiting lists.⁶³ To address these obstacles to accessing child care that is both affordable and of good quality, the National Association of Child Care Resource & Referral Agencies (NACCRRA) has put together a list of recommendations for the state and federal governments. They recommend the following:

- Require the Department of Health and Human Services (DHHS) to define minimally acceptable quality care for low-income children,
- Require the National Academy of Sciences (NAS) to study the true cost of child care and to offer recommendations to Congress for financing,
- Reauthorize the Child Care and Development Block Grant (CCDBG) and add requirements to improve the quality of care, and
- Provide resources to expand the availability of quality care, particularly in low-income neighborhoods where there is a shortage of licensed care.⁶⁴

To better serve families with limited English proficiency, the GAO recommends that the DHHS assist state and local agencies in "providing language assistance, recruiting providers, and distributing information for families".⁶⁵

Medical Services

Due to the recent debate on health care reform and policy, deficits in the health care system are becoming more apparent than ever before. Providers, clients, policymakers, and the uninsured are all voicing their opinions about the shortcomings of our health care system. With the passage of the Affordable Care Act by President Obama in March of 2010, changes are gradually being made to the system and will continue to be

59 Washington State Department of Early Learning. Child Care & Preschool Options. (2011)

60 Washington State Department of Social & Health Services. About Us. (2011) Retrieved from <http://www.dshs.wa.gov/>

61 Small, M., Jacobs, E. & Peeples, R. Why Organizational Ties Matter for Neighborhood Effects: Resource Access through Childcare Centers. (Social Forces: 2008)

62 County of Los Angeles Public Health 2007

63 National Association of Child Care Resource & Referral Agencies 2011

64 Ibid.

65 Ibid.

incorporated into the current plan through 2014. Laws which have already been implemented through this comprehensive health insurance reform plan focus on expanded coverage for young adults, providing free preventative care, and providing discounts for several name-brand drugs. Other reform measures included in the plan provide support for state programs. As of October 2010, states will be able to receive federal matching funds for covering some additional low-income individuals and families, making it easier for states to cover more of their residents.⁶⁶ This has profound implications for Washington State where the number of uninsured residents rose 21 percent in 2009 alone, meaning nearly 1 in 5 people between the ages of 19 and 64 do not have health insurance.⁶⁷ While a resource guide has been made to help people learn about their options, Commissioner Mike Kriedler admits its shortcomings: "I'll be candid, it's not enough. For many people there are no options".⁶⁸

Washington State has dedicated a number of programs to providing health care for its low-income residents. The largest program in Washington State is Medicaid. Medicaid provides health care coverage to approximately 1.2 million residents, two-thirds of which are children covered by Apple Health for Kids. Basic Health, a state-sponsored program, is another program that serves a large pool of residents. Basic Health offers low-cost health care coverage to low-income households through private health plans. Unfortunately, due to budget constraints, more than 160,000 are waiting for Basic Health. The waiting list has become so long, incoming applications are no longer being processed.⁶⁹ Furthermore, proposed budget cuts for the state of Washington for 2012 include the Basic Health Plan to be eliminated in its entirety.⁷⁰

The Health Care Authority in Washington State oversees several additional health care programs, including the Prescription Drug Program, Public Employees Benefits Board, Uniform Medical Plan, Washington Health Program, and Washington Wellness. There are also additional programs offered to specific populations within the state, such as employed people with disabilities under the Health Care for Workers with Disabilities Program and pregnant women under the Pregnancy Medical Program. The Alien Emergency Medical Program is another program that targets a specific population, offering emergency health care to persons who do not meet the citizenship requirements of other medical programs.⁷¹

While there are a significant number of health care programs providing service to low-income residents in Washington State, many residents are still uninsured. Barriers include budget constraints, lack of information about available programs and eligibility requirements for these programs, and waiting lists which backlog applications. Since the uninsured are more likely to go without preventative care and delay or forgo medical care, there will be serious consequences to the overall health and well-being of our state. When the uninsured do seek medical help, it is often in the emergency rooms, whose bills must be managed by the hospitals themselves. This puts further strain on the economy and prevents us from being able to allocate more funds to health care programs which are already facing deficits in funding.⁷²

Food Support

Like medical support services, assistance with accessing food comes from the federal and state levels. Many of the federal programs provide funding and grants to states and are managed by the state itself. The larger

66 Timeline of the Affordable Care Act: What's Changing and When. (U.S. Department of Health & Human Services: 2011) www.healthcare.gov

67 Kriedler, Mike. Uninsured in Washington State Jumps Nearly 21 Percent. (News Release: 2009)

68 Ibid.

69 Washington State Health Care Authority. Understanding Basic Health. (2011) Retrieved from <http://www.basicealth.hca.wa.gov/understanding.html>

70 Office of Financial Management. Governor's Proposed 2012 Supplemental Budget: Budget Highlights. (2011).

71 WA State Department of Social & Health Services 2011

72 Bostock, Tara, The Uninsured. (Families USA: 2011) Retrieved from <http://familiesusa.org/issues/uninsured/>

federally-funded programs include the Supplementary Nutrition Assistance Program (SNAP), formerly the Food Stamp Program, the National School Lunch Program (NSLP), and the Special Supplemental Nutritional Program for Women, Infants, and Children (WIC). There are several smaller programs also federally funded such as the School Breakfast Program, the Child and Adult Care Food Program, the Summer Food Service Program, and the Emergency Food Assistance Program. Billions of dollars are spent on food assistance programs; total federal expenditures for SNAP alone were \$37.5 billion in 2010. While this is a sizeable amount of money, the number of people receiving food assistance dampens its impact on low-income individuals and households struggling to make ends meet. In an average month, SNAP provides benefits to 28.4 million people, NSLP provides lunches to 31 million children each school day, and WIC serves 8.7 million clients per month.⁷³ While these numbers seem impressive, many Americans are still unable to consistently rely on a food security. In 2008, 21% households with children were considered “food insecure”. Food insecure is defined as having at some time during the year “lacked access to adequate food for active, healthy lives for one or more household members”.⁷⁴

The Washington Basic Food Program is a state-run service that is working to change this statistic by helping low-income individuals and families “obtain a more nutritious diet by supplementing their income with Basic Food benefits”.⁷⁵ Looking at programs already in place presents us with an idea of the services available to low-income individuals and families in Washington State. While this information is valuable, it does not inform us about the demographics of who is who is not benefiting from these services. Spanish-speaking households, for example, experience greater rates of food insecurity and hunger compared to non-Hispanic households as well as English-speaking Hispanic households.⁷⁶ Factors including greater economic and social disadvantage are thought to be causes of this disparity. Food insecurity has also been strongly associated to other barriers including low income, unemployment, disability, single parenthood, education level, and having three or more children.⁷⁷

So what can be done? How can we help the 257,000 households in Washington State that are food insecure? One partnership in Washington is working to overcome barriers to participation. The partnerships, comprised of organizations such as the Children’s Alliance, VOICES, and the Bill & Melinda Gates Foundation, believe that change must start at the community level. Using community-based organizations, the partnership hopes to obtain information about program participants, as well as individuals who are eligible and not receiving assistance. With this information, collaborative strategies linked to policy change and outreach can be developed that are specific to each local area.⁷⁸

Housing Assistance

Two central programs aimed at housing for low-income persons and their families exist in the United States: Housing Choice Vouchers (HCVs) and the Low-Income Housing Tax Credit (LIHTC).⁷⁹ The Housing Choice Vouchers program began in 1970 as a result of a trend in federal low-income housing policy which provides

73 Nord, M., Andrews, M., & Carlson, S. Household Food Security in the United States, 2006. (U.S. Department of Agriculture Economic Research Services: 2007) 1-2

74 Nord et. al. 2010, 7

75 Washington State Department of Social and Health Services. Medical Programs. (2012) Retrieved from <http://www.dshs.wa.gov/onlinecso/medical.shtml>

76 Gorman, K., Zearley, K. and Favasuli, S. Does Acculturation Matter?: Food Insecurity and Child Problem Behavior Among Low-Income, Working Hispanic Households. (Hispanic Journal of Behavioral Sciences: 2011)

77 Nord et. al. 2010, 10

78 Partners in Action. Washington State Nutrition & Physical Activity Plan. (Washington State Department of Health: 2011)

79 Williamson, A., Smith, M., & Strambi-Kramer, M. Housing Choice Vouchers, the Low-Income Housing Tax Credit, and the Federal Poverty Deconcentration Goal. (Urban Affairs Review: 2009)

direct subsidies to tenants.⁸⁰ 1.9 million vouchers were issued in 2008 and the HCV program continues to expand, having provided vouchers to over 2 million households this past year.⁸¹ ⁸² Because HCVs allow the household to search for housing in the private sector, recipients have flexibility in choosing housing types and locations. Advocates of HCVs anticipate that the vouchers will help disperse the high concentrations of low-income families in impoverished neighborhoods, which public housing units have historically helped perpetuate. There are limits to the extent to which vouchers are able to achieve this “dispersal goal”, however, due to shortages in available, affordable, rental housing.⁸³ The effectiveness of HCVs are also hindered by the limited resources of the U.S. Department of Housing and Urban Development (HUD) which administers the voucher program. The demand for housing assistance is so high, long waiting periods are common. Some public housing agencies have even had to close their waiting lists because they have “more families on the list than can be assisted in the near future.”⁸⁴

The other national housing assistance program, the Low-Income Housing Tax Credit (LIHTC) is also facing obstacles. Since 1986 when the program was enacted, tax credits have been responsible for producing nearly 1.5 million multifamily housing units.⁸⁵ The problem lies in the fact that the LIHTC does not create large enough subsidies to reach low-income housings without other subsidies. It has also been noted that criminal history and immigration status also have an effect on the ability of some people to receive assistance. Housing agencies will routinely deny applicants if they have a criminal history, regardless of what the history entails. Similarly, housing agencies will “incorrectly apply citizenship/immigration requirements” to the programs they manage; while there are citizenship/immigrations status requirements for Housing Choice Vouchers, there are no such requirements for Low Income Housing Tax Credits.⁸⁶

Although housing assistance programs are unable to serve all eligible households who want to participate, Washington State served 54,036 individuals during 2010.⁸⁷ Furthermore, there have been continued efforts to assist additional households through housing assistance programs. Created after a new state law, the Housing and Essential Needs program was recently enacted on November 1, 2011, and provides non-cash housing for some recipients of state-funded Medical Care Services.⁸⁸

Recognizing that current housing assistance programs are not able to provide support for all Washington state residents in need, the Washington Low Income Housing Alliance has posted online its legislative agenda for 2012 with the goal making it possible for “everyone in Washington to have the opportunity to live in a safe, healthy, affordable home.” Among the policies and funding they are advocating for are an increased investment in the Housing Trust Fund, protecting revenue to fight homelessness, enacting the fair tenant screening act by changing tenant report standards, reducing the Governor’s control over budget and policy in

80 Orlebeke, Charles J. *The Evolution of Low-Income Housing Policy: 1949–1999*. (Housing Policy Debate: 2000)

81 Donovan, Shaun. *Housing Choice Vouchers Program Guidebook*. U.S. Department of Housing & Urban Development. (2011) Retrieved from http://portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/programs/hcv/forms/guidebook

82 Hartley, David et al. *Active Living for Rural Youth*. (University of Southern Maine: 2008)

83 Williamson, T., Imbroscio, D., and Aperovitz, G. *Making a Place for Community: Local Democracy in a Global Era*. (Routledge: 2002)

84 U.S. Department of Housing & Urban Development 2011

85 National Council of State Housing Agencies 2008

86 AIDS Housing Corporation. *Housing Advocacy 101: Getting and Keeping Housing for Your Clients: PART #3 Barriers to Subsidized Housing* (2006).

87 Washington State Department of Commerce. *Homeless Management Information System*. (2010) Retrieved from <http://www.commerce.wa.gov/site/890/default.aspx>

88 WA Department of Social and Health Services 2011

the TANF program, and protecting households settled in manufactured housing by clarifying land ownership ambiguities between mobile home owners and those who own the land beneath them.⁸⁹

In sum, the social services existing in Washington State are numerous and extensively used. While the programs appear to be operating at full capacity, or above capacity to meet the needs of Washington State residents, the long waiting lists and high percentages of eligible households not receiving aid indicate that thousands of people are still not receiving the assistance they need. Those individuals and families who are receiving aid report they reliance on these programs to get by. These points draw us to the conclusion that the state and the well-being of its citizens, would strongly benefit from the expansion and increased funding of these programs. Furthermore, the barriers that residents face in receiving access to these services, such as lack of transportation and limited-English proficiency, must also be addressed, and in a more direct manner, if populations struggling to receive aid are going to be served.

III. Community-Based Organizations

What are community-based organizations? What is community building/development?

Defining “community development” is no simple task and the practices that constitute it are even less clear. There are many circulating views about what should, or should not, be considered appropriate aspects of society to address at the community level, as well as who should be making these evaluations and where funding should come from to support these evaluations. The fact that there is no single definition of community building serves as an indicator of the nature of community building. It recognizes that each community is unique and has its own specific problems and assets. Rather than bring a model to the community and try to get the community and its members to adapt to it and work under its structure, community building allows the neighborhoods to develop their own model that is catered to their specific needs. This approach to community development is not only better at recognizing the idiosyncrasies of a particular community, it also encourages participation by the members within the community and leaves members feeling empowered.⁹⁰ Even the National Community Building Network is unwilling to commit to a single definition to describe community development. Their website offers several definitions of community building. Three of them are included below:

“An ongoing process where members of a community share skills, talents, knowledge, and experiences that strengthen or develop themselves and the community” ,

“Continuous, self-renewing efforts by residents, community leaders and professionals engaged in collective action aimed at problem solving and enrichment that results in improved lives and greater equity and produces new or strengthened institutions, organizations, relationships, and new standards and expectations for life in community”

“A variety of intentional efforts to a) organize and strengthen social connections or b) build common values that promote collective goals (or both)”

⁸⁹ Washington Low Income Housing Alliance & Washington State Coalition for the Homeless 2011

⁹⁰ Diers, J. *Neighbor Power: Building Community the Seattle Way*. (University of Washington: 2004) 24-25

Williamson et al. describes community development in more specific terms: “nonprofit organizations dedicated to bringing about the revitalization of a clearly defined geographic area”.⁹¹

While each of these definitions—and dozens of others not included in this report—are different in that they choose which specific aspects of community building to emphasize, we have found several components that are present in the majority of community-based organizations. These include the following components:⁹²

- a) Having a majority of the staff and leaders consisting of local residents;
- b) Operating offices directly in the community;
- c) Identifying and prioritizing issues in conjunction with residents’ concerns;
- d) Providing solutions that allow residents to invest in their community do the work themselves;
- e) Building social capital through outreach;
- f) Conceptualizing the community as a geographic region that share similar experiences within a given area.

Component d), which involves including local residents in the process of social change, has been argued by some to be the most important element of community building.^{93 94} By including residents into the process, they feel recognized and are more willing to speak up about issues they are having, since they feel their voices will be heard. It is important to acknowledge, however, that in order to represent the needs of the community, all residents must be able and encouraged to speak.⁹⁵ Non-English speaking persons, for example, should not be silenced simply because they do not speak English. Highlighting residents through their abilities rather than by their deficits leads to feelings of pride and empowerment. When neighbors invest their own time, money, and energy to neighborhood improvement projects, they not only experience feelings of ownership towards their community, they are more likely to work towards neighborhood improvement projects in the future and significantly reduce the chance of project dissolution.⁹⁶

Another important component from the six provided above is f), which designates a community in geographic terms. Using the unit of a neighborhood to define community boundaries has several benefits. Neighborhoods represent physical and emotional terrain which is directly related to our well-being for it is in the neighborhood that we establish and preserve our identities.⁹⁷ Furthermore, individual concerns are transcended by neighborhoods because neighbors experience a common set of issues and concerns in their daily lives. These shared experiences build relationships in a web-like manner as previous relationships reinforce and spread to build new ones. A particular culture of values, norms, experiences, and meanings are developed within a neighborhood, and this bond has been considered useful among community builders in helping link low-income workers to a system of supports and services. The location of a neighborhood is also important to assess the community needs, because where it is situated (in relation to available services and

91 Williamson, A., Smith, M., & Strambi-Kramer, M. Housing Choice Vouchers, the Low-Income Housing Tax Credit, and the Federal Poverty Deconcentration Goal. (Urban Affairs Review: 2009).

92 National Community-based Organization Network 2004

DeFilippis, J., & Saegert, S. The Community Development Reader. (Routledge: 2008)

Silverman, R. Community-Based Organizations: The Intersection of Social Capital and Local Context in Contemporary Urban Society. (Wayne State University Press: 2004)

Larson-Xu 2008

93 DeFilippis et. al. 2008

94 Larson-Xu 2008

95 DeFilippis et. al. 2008, 216

96 Larson-Xu 2008, 10

97 Portney, K., & Berry, J. Neighborhoods and Social Capital. (Civil Society in the United States: 1999)

Retrieved from <http://ase.tufts.edu/polsci/faculty/portney/socialcap.pdf>, 21

programs), plays a crucial role in constraining or enabling the abilities of individuals reach their goals and aspirations.⁹⁸

Even if areas of interest in a neighborhood are agreed upon and goals are established (such as offering access to social services and obtaining more participation in the political economy), debate will likely ensue about how to address these issues. Coming to a consensus about the approach and method that will be used to improve a community is difficult and complicated, and the history of community development illustrates this. Alice O'Connor contends that although community development is a "time-honored tradition in America's response to poverty", no "coherent, comprehensive strategy" has developed.⁹⁹ Instead, O'Conner refers to the history as "disjointed" and best summarized as "a sizable collection of short-lived programs".¹⁰⁰ While this may seem to imply a lack of progress or success in community building as a movement, community organizing continues to offer an important alternate to top-down approaches to addressing basic human needs and show no sign of deteriorating.

What are the benefits of community building?

While debate continues about the role that community-based organizations should serve, there is very little argument about the potential benefits of community building. For this reason, the social movement of community-based organizations has continued to persevere despite the restraints they face from lack of funding, distribution of leadership, and governmental policy.

One of the benefits of community-based organizing in the way that needs are addressed. Rather than using "more traditional, expert-dominate, "top-down" approaches to meeting human services, health, education, housing, and other needs", community-based organizing relies on a "bottom-up" approach where change and progress are achieved by engaging the citizens affected by service delivery.¹⁰¹ In this manner, citizens are a part of key decisions and establish lasting connections capable of enduring beyond the immediate program or project at hand. Practitioners of community building, argue that community-based organizing has emerged as an alternative to well-established but often inadequate approaches towards social development. Engaging stakeholders in "civic initiatives", they contend, will lead to greater citizen trust and improve implementation methods as well as their outcomes.¹⁰² Furthermore, they believe that including citizens in improvement plans allows individuals to be seen as asset-holders rather than clients with deficits who need fixing.

In her 2008 report, Larson-Xu found that, by engaging residents in neighborhood projects such as the building of a new playground, C2C has "produced change sentiments on issues regarding empowerment, pride, relationships, and quality of life".¹⁰³ In her review of literature, Larson-Xu also found three prevailing effects of neighborhood-based organizations. First, they serve to reduce barriers to achieving economic success. NBOs provide community members with the knowledge and access to resource, mobilizing them to take action. Second, NBOs increase social capital by fostering relationships in social networks where neighbors can rely on one another and reciprocate favors.¹⁰⁴ Increasing social capital is important because it builds trust and connections that may lead to stronger support systems . Third, Larson-Xu found that NBOs

98 DeFilippis et. al. 2008, 4

99 O'Connor, A. Swimming Against the Tide: A Brief History of Federal Policy in Poor Communities. In DeFilippis, J. & Saegert, S. (Routledge, The Community Development Reader: 1999) 9

100 O'Conner 1999, 9

101 Souza Briggs, X. Community Building. In DeFilippis, J. & Saegert, S. (Ed.) (Routledge, The Community Development Reader: 2003) 36

102 Souza Briggs 2006, 38

103 Larson-Xu 2008, 3

104 Silverman 2004, 20

positively affect social indicators such as reducing the crime rate and improving educational achievement test scores.

IV. Neighborhood Attachment and Satisfaction

Neighborhoods thrive when neighborhood-based organizations are able to engage with residents on issues that they care most about. Prior research has demonstrated the best way to determine a neighborhood's propensity to participate with neighborhood-based organizations is to measure the level of attachment felt throughout the neighborhood. Below we discuss the different measure of neighborhood attachment and satisfaction, why they are important and how neighborhood-based organizations can best engage with their respective neighborhoods.

What is neighborhood attachment and how do we measure it?

"Neighborhood attachment" is a concept intended to describe how well an individual feels connected within the neighborhood they reside. Prior research has demonstrated that neighborhood attachment is affected by many different factors ranging from home ownership to perceived crime rates to the physical appearance of the space.¹⁰⁵ These factors can be categorized as either being attitudinal attachments or behavioral attachments. These two categories are used to better understand how and what actions or things are determining neighborhood attachment.¹⁰⁶

There are two sub-categories of attitudinal attachment: sentiments and evaluation. Sentiments and evaluations explain the emotional attachments people formed through memories and feelings about their neighborhood.¹⁰⁷ Sentimental attachments include memories and feelings of the physical space and the social climate of the neighborhood. Evaluative attachments are formed through a reflective process about all aspects of the neighborhood: physical space, crime and safety, social engagements, and memories. The sentiment an individual feels towards their neighborhood directly effects their sentiments on how attached they feel to the neighborhood. Austin et. al. (1990) found that attitudinal attachments are measured through the assessment of socio-economic, crime/safety and homeownership statuses. Both SES and homeownership are positively correlated to attitudinal attachments while crime had almost no influence on attachment.¹⁰⁸ The higher the SES of a given neighborhood, the better the feeling is in the neighborhood surrounding the physical appearance of the space. Similarly, when there are more homeowners in a given neighborhood, there is more investment taking place; therefore, there is better physical upkeep of said neighborhood. Crime had little impact on levels of attachment (9.5% $p > .05$)¹⁰⁹ while safety was highly correlative to neighborhood participation (154%)¹¹⁰. Feeling safe in one's neighborhood is more important than perceived crime when

105 Bolan, M. (1997). The Mobility Experience and Neighborhood Attachment. (Demography: 1997) 225-237

Oh, J. Race/Ethnicity, Home Ownership, and Neighborhood Attachment. (Race and Society: 2004)

Woldoff, R. The Effects of Local Stressors on Neighborhood Attachment. (Social Forces: 2002)

Blum et. al. 2011

Dassopoulos, A., & Monnat, S. (2011). Do Perceptions of Social Cohesion, Social Support, and Social Control Mediate the Effects of Local Community Participation on Neighborhood Satisfaction? (Environment and Behavior: 2011)

106 Woldoff 2002

107 Guest et. al. 1983

108 Austin, M., & Baba, Y. (1990). Social Determinants of Neighborhood Attachment. (Sociological Spectrum: 1990)

109 Ibid.

110 Dassopoulos 2011

evaluative attachments are formed. Because of this we used the term safety rather than perceived crime rates when crafting our survey and interview questions.

Behavioral attachments are separated into sub-categories including routine and social neighboring and formal and informal problem-solving.^{111 112} Routine and social neighboring constitutes social interactions between neighbors in either formal or informal settings. Routine neighboring is the formal meeting of neighbors at block meetings or other formal groups while social neighboring describes the informal socialization between neighbors. Sampson (1989) describes this informal socialization as the creation of “friendly ties”. Behavioral attachments can be best measured through the status of race, home ownership, and length of time lived in the neighborhood.¹¹³ While Austin et. al. (1990) found a one-dimensional correlation of race and behavioral attachment, Oh (2002) found that race impacts behavioral attachment differently for different races. He found that blacks have a negative relationship between race and neighborhood participation, satisfaction and sentiment. Further, they found that Latinos have a negative relationship with neighborhood satisfaction and sentiment, yet a positive relationship with neighborhood participation, or routine neighboring.¹¹⁴ With prior research already demonstrating differences in neighborhood attachment between races, we were able to analyze the relationship between neighborhood attachment and self-identified race/ethnicity in our research.

What is neighborhood satisfaction and how do we measure it?

An alternative measure for levels of attachment is called “neighborhood satisfaction”. Dassopoulos et. al. (2011) defines neighborhood satisfaction as “when an individual’s physical and emotional needs are fulfilled” within the neighborhood setting. They found that social cohesion was the best determinate for neighborhood satisfaction and that neighborhoods with strong levels of satisfaction also yielded higher rates of community involvement in “block meetings”.¹¹⁵ Social cohesion is the perceived amount of positive social interactions between neighbors by one individual. The more perceived positive socializing in a neighborhood increases each neighbor’s propensity to interact in a formal setting. Using Waldoff’s model of behavioral attachments, it seems that the informal social neighboring is positively correlated to increased formal routine neighboring.^{116 117}

However, neighborhood satisfaction is more than the social atmosphere of the neighborhood. Bolan (1990) found that the physical environment and the perceived crime rate are also factors when measuring levels of neighborhood satisfaction and attachment. Physical and crime environments of a neighborhood are positively affected by socio-economic status, homeownership status, and age and negatively affected by race and the length of time lived in the neighborhood.¹¹⁸ In all, physical and crime environments both positively affect neighborhood satisfaction and attachment.¹¹⁹

The focus of the social dynamics of a neighborhood and the physical and crime environments in prior research supports our research of the same aspects in neighborhoods in Walla Walla. Asking neighbors in the interviews about their perceptions of their neighborhood allows them to explain what factors are currently affecting their level of attachment to the neighborhood. Determining how an individual feels attached, or not,

111 Sampson, R. Local Friendship Ties and Community Attachment in Mass Society: A Multilevel Systemic Model. (American Sociological Review: 1988)

112 Woldoff 2002

113 Austin et. al. 1990

114 Oh 2002

115 Dassopoulos et. al 2011

116 Waldoff 2002

117 Dassopoulos 2011

118 Bolan, M. The Mobility Experience and Neighborhood Attachment. (Demography: 1997)

119 Ibid.

to their neighborhood allows for us to recognize why they engage, or do not engage, with their neighbors and neighborhood-based organizations.¹²⁰ From here, neighborhood-based organizations will be able to employ different ways to engage neighbors through mediums that are not being tapped into currently. We are focusing questions in our survey and interviews to gauge levels of social cohesion and physical and crime environments in order to assess levels of attachment in each neighborhood.

IV. How Can GIS Aid Our Understanding of Poverty?

In previous sections we have elaborated on the complex, multi-faceted definitions and causes of poverty and how neighborhood-based organizations can affect people in poverty. However, the common economic measures available are often unable to capture the inter-linked causalities that prevent individuals from escaping poverty. For example, many government agencies and community organizations concerned with poverty relief continue to view income and consumption measures as the best indicators of poverty.¹²¹ As mentioned above, income level is precisely how the United States Federal Government continues to define poverty. Such measures are attractive to many organizations because they offer the ability to provide service to a standardized portion of the population in a manner that appears to be methodologically equitable.

Early attempts at mapping poverty largely focused on these economic measures, using them as a means to compare income levels between different geographic areas.¹²² However, as the understanding of the relationship between income and different facets of poverty has become more complex, new solutions are needed to represent these concepts. This has been coupled with a growing understanding of how Geographic Information Systems (GIS) have been utilized with increasing prevalence due to their ability to portray more detailed analyses that are able to represent less standardized data.

Health and Walkable Neighborhoods

The health and walkability of a neighborhood has been determined to have physical, mental and social effects on an individual's life. With approximately one-third of American citizens qualifying as overweight or clinically obese, personal fitness is increasingly being recognized as an essential resource.¹²³ While access to affordable fitness facilities certainly plays a role in residential health, a new body of literature suggests that physical health might be linked to location and street type.¹²⁴ These studies have found negative relationships between the ease with which residents of neighborhoods can walk and the prevalence of conditions and diseases related to obesity among residents.

At first blush these findings appear intuitive: more walking leads to healthier residents with less obesity-related diseases. But not all walkable neighborhoods are equally successful at getting residents in motion. Neckerman et al. (2009) argue that affluent neighborhoods (defined as having less than twenty percent of residents living below the poverty line) experience greater benefits from increased pedestrianism than impoverished neighborhoods:

120 Dassopoulos et. al. 2011

121 e.g., Glewwe et. al. 1988; Deichmann 1999

122 Bedi, Tara, Aline Coudouel, and Kenneth Simmler. More than a Pretty Picture: Using Policy Maps to Better Design Interventions. (World Bank Press: 2007)

123 Flegal, Katherine et al. Prevalence in Obesity Among US Adults, 1999-2008. (American Medical Association: 2008)

124 Frank, L. D., Andresen, M., & Schmid, T. Obesity relationships with community design, physical activity, and time spent in cars. (American Journal of Preventive Medicine: 2004)

Residents of low-income urban neighborhoods, despite living in what are, by conventional standards, highly walkable neighborhoods, have high rates of chronic disease related to lack of physical activity.¹²⁵

Certainly, there are a wide variety of alternative causalities for poor health in impoverished neighborhoods: lack of preventive medicine due to medical costs, access to healthy food, an inability to access fitness facilities rank among the top few. An additional hindrance to finding a correlation between poverty, health issues, and neighborhood walkability is that the term “walkability” itself is difficult to objectively define. After all, the decision of whether or not one walks, bikes, or drives around one’s neighborhood is fundamentally a factor of practicality and personal preference. However, researchers have used geographic analysis to calculate what physical arrangements of neighborhoods result in better walkability.

Neckerman et al. identify five main factors that they argue contribute to the walkability of a neighborhood: population density, intersection density, proximity to public transportation, the balance of land use, and the ratio of building square footage to retail square footage.¹²⁶ Contrary to the behavior of vehicle drivers who prefer areas with low rates of traffic, increased foot traffic is a strong pro for walkable neighborhoods. While proximity of public transportation might seem to run contrary to the objective of encouraging physical activity

Secondarily, Neckerman et al. define aesthetics, safety, transportation infrastructure, and sidewalk amenities as additional characteristics of a neighborhood that could have an effect on walkability. The researchers then proceeded to compare neighborhoods of different income levels but similar levels of walkability in an attempt to isolate the significance of aesthetics, safety, transportation, and sidewalk amenities. The data collected included the density of trees over a given area, the number of narcotics arrests in the area, density of bus stops, and density of open sidewalk shops and cafés.

There were drastic differences between the secondary walkability characteristics of poor versus non-poor neighborhoods. For example, neighborhoods with a poverty rate of less than twenty percent had nearly twice the amount of trees and green spaces as poor neighborhoods with comparable levels of structural walkability. Narcotics arrests in poor areas were four times higher than geographically similar non-poor areas. Non-poor neighborhoods had a higher prevalence of businesses with an outdoor seating area. Although poor neighborhoods had a slightly higher density of bus stops, non-poor neighborhoods had nearly ten times the number of bike racks available. Most importantly, the researchers observed an average of 72 walkers per five minute period in non-poor neighborhoods, while poor neighborhoods had saw a five minute average of 55.8 walkers.¹²⁷ While the researchers do not argue that there is necessarily a causal relationship between healthy, walking communities and their aesthetics, safety, transportation, and amenities, it does find a strong correlation.

At its most essential level, the study conducted by Neckerman et al. argues that beyond mere geographic determinations of walkability (e.g. the layout of roads, sidewalks, zoning, etc.) there are also a set of neighborhood characteristics that determine whether or not one chooses to walk. Ultimately, this choice greatly influences the health of individuals within a community.

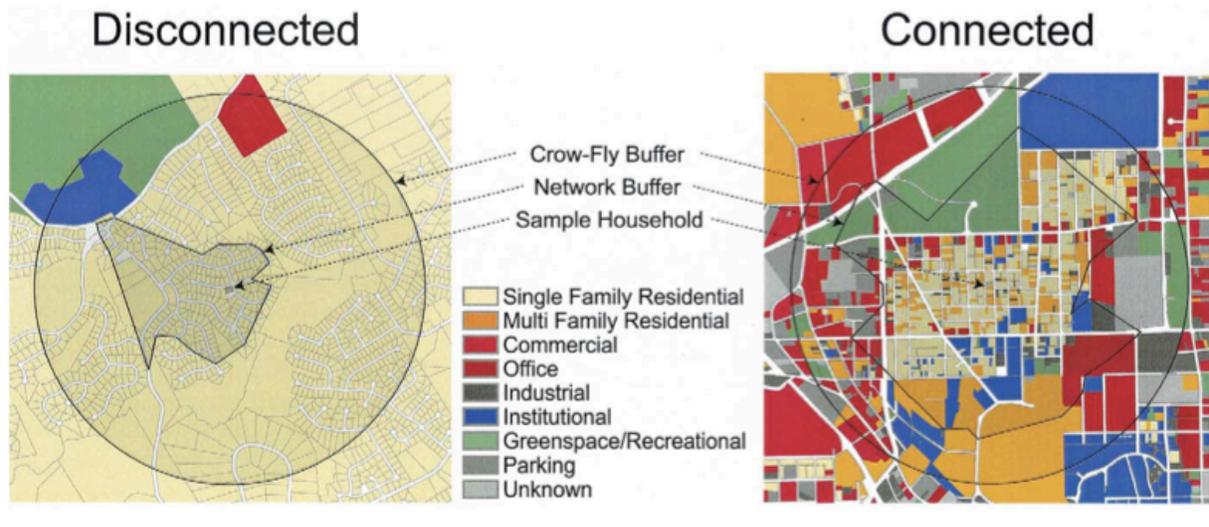
This should not downplay the importance of physical layout when determining service accessibility. The physical distance to schools, shopping, food, and work is also a key determinant of whether or not an individual can easily access what they need for a good standard of life. In another study, Frank et al.(2004, 88) find that walkable neighborhoods in Atlanta had a significantly lower probability of obesity for residents. Frank et al. examine mixed land use as an important indicator of how often individuals will walk, and

125 Neckerman, Kathryn M, et al. *Disparities in Urban Neighborhood Conditions: Evidence from GIS Measures and Field Observation in New York City*. (Journal of Public Health Policy: 2009) 4

126 Neckerman et al. 2009, 6

127 Neckerman et al. 2009, 11

subsequently how accessible basic needs are. The researchers emphasize the importance of connectedness and attachment in neighborhoods as measured by the presence of nearby offices, stores, and green space. Below is an example of a connected versus a disconnected community:



Map1: Frank et al., 2004: p. 89

The crow-fly buffer (a circle with a radius of a half-mile) indicates the threshold to which individuals are easily able to walk in order to obtain a service. Note that a connected neighborhood has multiple services within this buffer, while the disconnected neighborhood does not. Significantly, the connected neighborhood has much more dispersion of zoning, rather than large, homogeneous zones.

While there are multiple causal factors at work in relationship to obesity, connected, and disconnected neighborhoods in this example, Frank et al. find a correlation between mixed use zoning of a neighborhood, and lower rates of obesity. For example, the residents of the disconnected neighborhood above were ten percent more likely to be obese than their counterparts in a connected neighborhood.¹²⁸ An important caveat is that not all types of zoning are necessarily positive for walkability and public health. Rossi & Schlay find that in many cases, industrial zoning mixed with residential areas creates health risks and lowers property values. The effects of industrial zoning will be examined further in the section “Discriminatory Zoning”.

In the context of rural Walla Walla, both the geographic layout examined by Frank et al. and the neighborhood characteristics examined by Neckerman et al. are of great importance. Hartley et al. (2008) found that, “Rural youth are 25% more likely to be overweight or obese than urban youth.”¹²⁹ Leyden (2003) argues that the location of built structures along with the walkability of their environment is directly related to physical health, mental health, and social capital. Beyond being a public health issue, the ability to spontaneously interact with other individuals was essential to making informal connections. Or, as Leyden tells us:

Spontaneous “bumping into” neighbors, brief (seemingly trivial) conversations, or just waving hello can help to encourage a sense of trust and a sense of connection between people and the places they live.¹³⁰

128 Frank et al, 2004: p. 92

129 Hartley et al. 2008, 2

130 Leyden, Kevin M. *Social Capital and the Build Environment: The Importance of Walkable Neighborhoods*. (American Journal of Public Health: 2003) 1546

Leyden conducted a survey in Galway, Ireland by distributing questionnaires that asked which services survey recipients could easily walk to. Additional questions that asked participants to indicate how well they felt they knew their neighbors, how politically active they had been, and how much they trusted other individuals from their area were added to the survey in order to form a social capital index.

Through a cross-tabulation of survey responses, Leyden found that individuals who lived in areas where they could comfortably walk to a wide variety of services felt more connected to the members of their community. Leyden summarizes the results as follows:

... in [connected] neighborhoods, residents walk more (or at least perceive their neighborhoods to be more walkable), feel more connected to...their community, are more likely to know their neighbors...are more likely to contact elected officials to express their concerns, and are more likely to walk to work.¹³¹

Previous research indicates that these social indicators are closely tied to the physical and mental health of neighborhood residents. Kaplan (1988) for example, finds that strong social networks lower the risk of ischaemic heart disease. Kawachi & Berkman (2001) found that increased social capital decreases the likelihood of depression. In a very real way, the geographic layout of an individuals built environment has multi-faceted effects their quality of life. In the next section, we move beyond considering the benefits of mobility into how location effects participation in organizations and social capital.

Neighborhood Design and Access to Services

While the previous section was concerned with the benefits of the act of mobility in and of itself, this section considers how location and transportation can effect participation in various services. Hartley et al. (2008) study the accessibility of two rural towns in Maine to see if school location changed the ability for parents and students to be involved in extra-curricular school activities.

While the previous section was concerned with the benefits of the act of mobility in and of itself, this section considers how location and transportation can effect participation in various services. Hartley et al. (2008) study the accessibility of two rural towns in Maine to see if school location changed the ability for parents and students to be involved in extra-curricular school activities.

The Town of Houlton, Maine (population 6, 476) served as an example of a town with centralized schools: both the high school and middle school were located within one mile of the town center. In contrast, Waldoboro, Maine (population 4, 916) had a high school that was position over three miles outside of town, in addition to being on the other side of a major roadway.¹³²

Hartley et al. found that when it came to participation in after school activities, many students in Waldoboro were dependent on parents for transportation in order to take advantage of the programs. One interview participant stated, "There are some kids who are very active ... but it is always the same kids ... maybe 15-20% of the school".¹³³ One student reported being unable to participate in the her high school track and field program because her parents were unable to pick her up after work.¹³⁴ While limited public transportation did exist in these rural towns, parents frequently expressed a fear of what many interview participants termed "stranger danger". As a result, even when public transportation or bike routes were available, parents were hesitant to let their children travel on their own.

131 Leyden, 2003: p. 1549

132 Hartley et al. 2009, 229

133 Hartley et al., 2008: p. 2

134 Hartley et al. 2009: p. 228

The authors find that late-bus programs for students wishing to participate in after school activities are key to gaining broad-based student engagement. In multiple focus groups totaling eighty-four individuals, after school transportation was self-assessed to be the largest barrier confronting student participation in after school activities.

There are, however, many other elements of neighborhood and town planning that effect participation beyond the location of public schools. Similar to Hartley et al., Mason & Fredericksen (2011) consider “neighborhood viscosity” in terms of the geographic layout of a community. Basing the concept of “viscosity” off of Putnam’s (2000) concept of social capital, Mason & Federicksen define a “viscous neighborhood” in the following manner: “Neighborhood viscosity, conceptualizing the aggregate of civic community, reflects a cohesive sense of membership or shared identity grounded in physical location.”¹³⁵ The question the authors then pose is whether or not different neighborhood arrangements can be found to determine the level of neighborhood viscosity.

Mason & Federicksen identify three primary types of neighborhood design: (1) the traditional grid layout; (2) the transitional suburban layout; and (3) the contemporary low density sub-urban layout. According to the authors, each type of neighborhood layout has become prominent over a three-decade period of development. The traditional “grid” was the earliest form and is usually located close to urban centers and is distinguished by providing walking access to multiple amenities. After World War II, the style of neighborhood development turned towards winding roads with cul-de-sacs in order to provide privacy and a sense of individuality. In recent years, it has been recognized that “new-urbanist” policies of mixed zoning are often seen as desirable by residents. Mason & Federicksen as well as Bothwell et al. see “new-urbanism” as a return to the traditional neighborhood layout that was prominent before World War II.

Traditional neighborhood layouts have many of the same features (high walkability, diversity of amenities, etc.) that are valued by the new-urbanist movement. As a result, several researchers have found it useful to compare fully developed traditional neighborhoods with their transitional layout and low density sub-urban counterparts to predict the strengths and weaknesses that new urbanist projects can expect. Of specific interest to the case of Walla Walla is the body of research that relates social capital and neighborhood viscosity to the differences in layout between traditional neighborhoods and sub-urban layouts.

But how is it that simple elements of design effect the types of relationships that are had within a community? In one of the foundational works on this subject Schorr (1963) argues that at the most basic level one’s dwelling is a reflection of the self. A house and its environs provide the inhabitant with a type of self-identity that measured against others in an effort to determine who does and who does not belong.

In particular, Schorr focuses the types of individuals: highly mobile “city dwellers” and less mobile “block dwellers”. The former typically has a better ability to access the resources of a town or city. Schorr further argues that built elements of neighborhood design, such as elevated highways, can create symbolic divisions that hinder block dwellers from becoming city dwellers. Subsequent research has identified clear definitions of public-private territory, houses with windows that allow residents to put “eyes on the street”, and smaller “human-scaled” street with better neighborhood cohesion.¹³⁶

135 Mason, Susan G. and Fredericksen, Elizabeth. Fostering Neighborhood Viscosity: Does Design Matter? (Community Development Journal: 2011) 8

136 Bothwell, Stephanie E., Raymond Gindroz, and Robert E. Lang. Restoring Community through Traditional Neighborhood Design: A Case Study of Diggs Town Public Housing. (Fannie Mae Foundation: 1998)



Figure 1: Bothwell et al., 1998: p. 100

One new-urban revitalization project conducted at Diggs Town, a housing project in Norfolk, VA demonstrates the types of design techniques that can build social capital significantly. Low fences were installed around and between yards to create a sense of security and individuality among residents. While this might seem paradoxical to a development strategy aimed at increasing social capital, comfort in one's own space was seen to be a key factor in contributing to the spontaneous interactions that foster high levels of social capital. Additionally, porches were added to the houses so that residents would feel encouraged to spend time outside. Finally, paths were added to reduce wear on lawns and encourage the development of more green spaces.¹³⁷

The modifications to Diggs Town resulted in two major changes within six months of the redesign. Firstly, safety improved greatly. One father from the neighborhood commented that while before, he heard three to four gun shots a night, he now heard one only every three to four months. Safety also increased with the presence of a resident-police officer who was both an inhabitant of the neighborhood, and in charge of the local police post located in one of the units.

Secondly, the effect of identity that Schorr (1963) describes as occurring between a house and its owner drastically changed. The researchers interviewed a group of Diggs Town churchgoers who reported that before the redesign, they, "felt anxious arriving at services from an unsightly public housing project..."¹³⁸ However, after the re-design, residents took more pride in their houses and felt more self-confident about participating in outside organizations. Even at the level of aesthetics and pathway layout

Returning to the macro-scale of Mason & Friedrecksen and neighborhood design, traditional urban layouts similar to Diggs Town also provide a better environment for social interaction and bridging between residents. In a separate case-study conducted in Boise, Idaho, Mason & Friedrecksen found that traditional urban neighborhoods had a higher local election voting rate than comparable transitional or contemporary sub-urban neighborhoods. Additionally, traditional neighborhoods saw an average of 8.7 elementary school volunteers per census tract as compared to 3.67 and 3.90 in comparable transitional and contemporary sub-urban neighborhoods, respectively.

However, while the compact nature of traditional urban neighborhoods has appeared to spur civic engagement, house ownership was much lower in traditional urban neighborhoods than either transitional or contemporary sub-urban neighborhoods. Mason & Friedrecksen find this potentially troubling, as home ownership has been previously linked to higher levels of social capital. However, it appears that in the case

¹³⁷ Bothwell et al., 1998: p. 100-103

¹³⁸ Bothwell et al., 1998: p. 106

of Boise, renters living in traditional urban neighborhoods are fully capable of circumventing the obstacles that renting places around obtaining social capital.

In summary, multiple factors and neighborhood characteristics must be taken into consideration with regards to organization accessibility. While distance and layout of neighborhoods are key considerations, aesthetics also contribute to whether or not an individual will feel confident enough to participate in neighborhood organizations.

Food Access: Defining Food Deserts

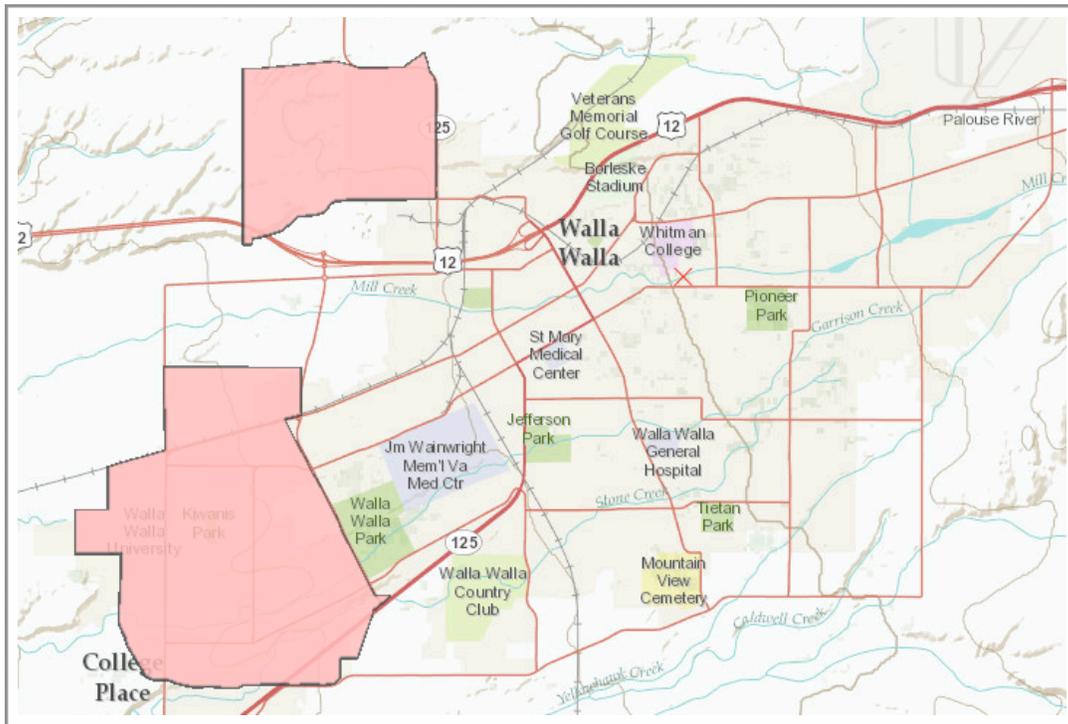
The concept of the “food desert” first appeared in the UK during the 1990s when sociologists began observing a retreat of grocery stores from urban centers to the suburbs. Since that time, the topic of food deserts has come to represent discussion of the relationship between lack of access to a grocery store, poor diet, and poor health. Food insecurity is one of the many factors of poverty. In measuring the geographic space of food deserts, we are able to geographically define areas of poverty.

In theory, the term “food desert” has multiple definitions that hinge upon the quality of food and its locations, and the proximity of those locations to residents. While individual studies might have more complex definitions, the United States Department of Agriculture Economic Research Service (USDA/ERS) has created its own definition that is designed to incorporate census data to determine the location of possible food deserts in uniform manner.

The ERS defines a community as a food desert based on two characteristics: the presence of poverty and the availability of a supermarket or large grocery store. Specifically, a community must either have a poverty rate of 20% or higher as determined by the census bureau, or income levels must be 80% below the areas median family income. In terms of geographic access, at least 500 people or one-third of the census tract’s population must reside more than one mile from a supermarket or large grocery store. In the case of designated “rural” census tracts, this distance becomes 10 miles.¹³⁹

While the ERS does not officially designate Walla Walla as a food desert, the nearby community of College Place does fall into that category. The pink areas below demonstrate the areas which fall under the ERS’ definition of a food desert:

¹³⁹ Source: About the Food Deserts Locator, <http://www.ers.usda.gov/data/fooddesert/about.html>. Accessed 12/16/2011.



Map 2: Data for Walla Walla, WA, <http://www.ers.usda.gov/data/fooddesert/fooddesert.html>. Accessed 12/16/2011.

However, the northern food-desert in this map of Walla Walla demonstrates how the ERS' method of defining a food desert is somewhat erratic: the area is the Walla Walla State Penitentiary. However, census data points to the presence of some 2373 individuals, all of which have low access to a grocery store. Clearly, this method of calculation has the ability to produce somewhat erroneous results.

Emphasis in defining a food desert is often put on the presence of large grocery stores where prices are lower. Ver Ploeg (2010) found that 86% of individuals participating in the Supplemental Nutrition Assistance Program (SNAP) redeemed their SNAP stamps at a large supermarket. Moreover, those who were able to shop at a larger supermarket purchased less canned foods than those who shopped at smaller convenience stores.

However, the causalities that link proximity of supermarkets to healthier standards of living are not well understood. As Ver Ploeg notes, "Several studies find that the proximity of fast food restaurants and supermarkets are correlated with BMI (Body-Mass Index) and Obesity ... increased consumption of ... healthy foods ... does not necessarily lead to lower BMI." The assumption inherent in the geographic study of food distribution is that the presence of a wide selection of food in close proximity to individuals will result in healthier lifestyle choices. Quite simply, access to more food does not necessarily equate to individuals making more healthy choices at the supermarket. Ver Ploeg argues that, "Understanding the market conditions that contribute to differences in access to food is critical to the design of policy interventions that may be effective in reducing access limitations."¹⁴⁰

Moving farther away from the idea that an individual's access to food is based solely upon their proximity to a large supermarket, Raja et al. found that, "The use of the metaphor 'food deserts' which conjures up the image of absence of food retail outlets, is not an adequate description of the food environments in minority

140 Ver Ploeg, Michele. *Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences*. (Economic Research Service, United States Department of Agriculture: 2009) v

neighborhoods...”¹⁴¹ In the instance of Buffalo, New York, these researchers found that while low-income minority neighborhoods often lacked large grocery stores, they did have an extensive network of smaller stores that were on average less than five minutes away from neighborhood residents.

Previous studies of food deserts often concluded for policy actions that city zoning and possible grants were needed to establish large box stores that have been traditionally viewed as capable of providing higher quality food. However, the Buffalo study conducted by Raja et al. Suggests that while larger grocery stores could be beneficial, “we suggest that it would be a mistake to overlook the existing extensive network of small grocery stores and their potential role in providing healthful, affordable, and culturally appropriate foods”.¹⁴² The authors recommend that rather than changing zoning and passively waiting for a supermarket to be created, the city could benefit from a grant program to install freezers in smaller convenience stores in order to preserve fresh produce. Additionally, the authors recommended that town policies be developed to support the introduction of local produce into existing small stores.

While the Town of Walla Walla is not officially designated as a food desert, the research examined above suggests that beyond the physical location of food distribution outlets, quality and demand for healthy food should be considered.

V. Conclusion of Literature Review:

In essence, the definition of poverty is highly contextual and the research suggests that determining who is and who is not poor should be considered on a case-by-case basis. It is important for our primary research to analyze the ability and agency individuals possess in accessing resources required to satisfy their families’ basic needs and participate in community life. Our research seeks a full comprehension of the intricacies and complexities in the experiences of impoverished individuals through consideration of the wide disparities in access to services that exist along lines of race, ethnicity, socioeconomic status, gender, marital status, language ability, education and neighborhood attachment.¹⁴³ Understanding existing and potential human and social capital of communities is essential to understanding how people experience poverty in Walla Walla.

141 Raja et al. Beyond Food Deserts: Measuring and Mapping Racial Disparities in Neighborhood Food Environments. (Journal of Planning Education and Research: 2008) 469

142 Raja et al., 2008, 480

143 Quigley 2003; Lui 2006; Kirby 2008, Oh 2002

Methods

To answer our primary research question, “What role should neighborhood organizations serve to best meet the needs of low-income populations in Walla Walla?” we conducted research using three methods: surveys, interviews, and GIS analysis. Our decision to incorporate several research methods was based upon findings from secondary research that illustrate the significant benefits of integrating quantitative and qualitative data together. Huber et al. (2009) find that by combining survey data with GIS and qualitative interviews, useful information for community-based organizations can be synthesized into policy recommendations. By including the geographical location of need and service provisions, and by identifying the key factors that influence patterns of service use and non-use through interviews and survey questions, we hope to get a wide range of perspectives on how low-income populations navigate experiences in poverty geographically and socially.

Survey

We administered a survey to Walla Walla residents that asked about their perceptions of their neighborhoods, relationships with other neighbors and their ability to meet basic needs in seven specific areas, selected based upon services most frequently used according to works referenced in our literature review. Specific areas of interest include:

- Employment services.
- Assistance with housing payments.
- Assistance with utility payments.
- Assistance with food.
- Childcare services.
- Medical services.
- Mental health and counseling services.

Previous research has indicated these areas to be common areas of need for low-income populations.¹⁴⁴ Reaven’s 2009 poverty assessment in Walla Walla provides more specific recommendations for areas of interest; her report highlights a concern for medical and mental health services among the low-income population, especially within Latino populations.

We included survey questions inquiring about neighborhood characteristics as perceived by residents because research associates physical characteristics with individuals feeling of neighborhood satisfaction and attachment.¹⁴⁵ Kirby suggests there is a link between the ability of an individual living in low-income areas to access health care services and the characteristics associated with community-level poverty.¹⁴⁶ Kirby also argues that community characteristics and available social networks influence patterns of health care use and medical insurance coverage within low-income populations.¹⁴⁷

Commitment to Community expressed interest in the availability and accessibility of employment services in the three chosen neighborhoods. Research confirms the link between income level, unemployment, underemployment with the ability of an individual to meet basic needs.¹⁴⁸ We were equally interested in

144 Caron & Martin 2008, Fitchen 1981

145 Waldoff 2005, Sampson 1988, Oh 2004, Austin et al. 1990

146 Kirby 2008

147 Kirby 2008

148 Quigley 2003

gathering a wide range of demographic data for all of Walla Walla in order to identify where, if at all, there are concentrations of unemployment and poverty. We were also interested in the demographic makeup of the neighborhoods in which C2C is active, and whether the experiences in poverty these individuals faced varied according to race, marital status and native language. Income level and federal poverty guidelines alone do not always include individuals who are facing issues related to poverty.¹⁴⁹ Previous poverty assessments, including the 2009 research in Walla Walla, suggest that factors of race, native language and income affect awareness of service availability and can act as potential barriers to service access and use.¹⁵⁰ Research shows that wide disparities in access specifically to medical care exist by race, socioeconomic status, marital status, native language and level of educational attainment.¹⁵¹ Identifying differing patterns of service use and need along these demographic lines was an important component to understanding how poverty is experienced in Walla Walla.

We administered the majority of our surveys within the three neighborhoods in which Commitment to Community is currently active: Blue Ridge, South Washington Park, and Edith and Carrie. Commitment to Community has worked for several years in South Washington Park and Edith and Carrie neighborhoods, but has only started activity in Blue Ridge this year. Respondents were chosen at random; survey distributors went door to door in several blocks in each neighborhood. However, due to limited field time, only 34 surveys were conducted using this method. Four surveys were collected at the Walla Walla YMCA during a free information session on parenting and another four surveys were collected at Super 1 Foods, a local grocery store. The rest of the surveys (43) were conducted at three different food distribution events. Two were hosted by 2nd Harvest and located at the Washington Park, and Housing Authority, and one was hosted by Blue Mountain Action Council (BMAC) and located at the Blue Mountain Action Council Food Distribution Warehouse in the South Washington Park neighborhood. All food distribution events took place in South Washington Park within a two-block radius. The food distribution event hosted by BMAC had some eligibility requirements; this event was held for those already deemed eligible for food stamps and/or receiving support through Women, Infants, and Children (WIC) program. It should be noted that because roughly half of these surveys were conducted at food distribution events, we expect a biased number of respondents seeking and receiving assistance with finding affordable food. It should also be noted that we expect the majority of those seeking to assistance from food distribution events to be low-income, a common requirement of many organizations for receiving assistance.

To protect the safety of our respondents, data collected from our surveys was kept anonymous; the names of participants were never asked or recorded. Instead, each survey was given a case number for accurate record keeping. Participants were asked politely to take part in the survey and no coercive action or force was used. Furthermore, participants were able to skip over any questions or stop the survey at any time with no consequences as a result.

We acknowledge several limitations with our survey data. In consideration of time restraint and availability of potential residential respondents, the overall number of respondents is too low to draw statistical analyses or well-substantiated generalizations about the neighborhoods or low-income population at large. Additionally, the response rate varied among each question. However, we designed and fine-tuned a valuable and relevant survey instrument for assessing the characteristics of poverty in Walla Walla. We thoroughly tested this instrument in the field using it with over 80 individuals to gain a preliminary cache of data that is suggestive of trends that exist within the general, impoverished population in this small rural city.

Survey data was entered into and analyzed in SPSS, a statistical computer program. A total of 69 variables were operationalized and used in our survey analysis. Due to the size of our sample and the level of

149 Quigley 2003

150 Quigley 2003; Kirby 2008; Reaven 2009

151 Quigley 2003; Lui 2006; Kirby 2008

measurement of our variables, there was only a small pool of questions in which we were to use interpretive statistics. Correlations between multiple variables were explored, however few proved to be statistically significant. Those that were significant and meaningful have been included in our analysis. Our primary method of analysis, however, was through descriptive statistics and frequency distributions. Looking at the rates of responses to certain questions, as well as the frequency of specific responses, we were able to draw conclusions to our initial questions about the services most widely sought out and used, common sources of use, and differences between specific demographics and neighborhoods.

Interviews

We conducted interviews with residents living in Edith and Carrie, South Washington Park, Blue Ridge and Jefferson Park as well as directors of organizations in Walla Walla. We used mixed methods for obtaining interviewees by combining typical case sampling with the snowball. Typical case sampling is identifying “select cases that are known beforehand to be useful and not to be extreme”.¹⁵² In our research, typical case sampling for interviews was done in collaboration with neighborhood organizers to help identify neighbors who both live in the neighborhoods C2C works in and are low-income. The snowball method is the method of using “group members [to] identify additional member to be included in [the] sample”.¹⁵³ This method helped us obtain interviews with neighbors and the organization directors.

Commitment to Community works with a highly diverse population in the neighborhoods. In order to be of the most use for C2C, and other organizations in Walla Walla, we conducted interviews with individuals of different ethnicities, genders, primary languages, and SES. We interviewed individuals who both spoke English and Spanish; many of the residents were bilingual. For the precise measures of the interviewees, please see Appendix B.1.

The interview question organization was divided into five different sections. To view the list of interview questions, please see Appendix B.2. The first section of questions asks individuals to describe their personal attributes. The goal of this section was to gain information about how the individual self-identifies with ethnicity, nationality, and gender. Further, we wanted to gain information about how long an individual had lived in their neighborhood. This is important in understanding how attached someone is to the duration of time physically present in the neighborhood.¹⁵⁴

The second group of questions were aimed at revealing how attached and satisfied neighbors are with their neighborhood. Prior research has shown that the more an individual is satisfied with their neighborhood, the more attachments they will form in their neighborhood.¹⁵⁵ Our survey asked preliminary questions about feelings of safety and social experiences in the neighborhoods; we used the interview to go more in depth. Through interviews we were able to dive into what it means for someone to be satisfied with their neighborhood by asking them how they felt connected or disconnected with their neighborhood. We wanted to see what attachments currently exist and what type and amount of support an individual may gain from these attachments.

The third section of questions asked interviewees to describe different times in their life that they have looked to friends, family, or human services to help them when they needed external support. We were curious about what makes an experience positive or negative, where the interviewee was having positive and negative experiences and whether those experiences were having adverse effects on their lives. We used prior

¹⁵² Henry, Gary T. *Practical Sampling*. (SAGE publications, Inc: 1990)

¹⁵³ Henry 1990, 18

¹⁵⁴ Bolan 1997

¹⁵⁵ Austin et. al. 1990, Oh 2004, Waldoff 2005

research to develop these questions with the specific focus on friendly ties in the community¹⁵⁶. We hypothesized that the more friendly ties there were in the neighborhood, the more likely a neighborhood would turn to those friends for support through rough times.

Fourthly, we ask individuals about their experiences with education and employment. The survey asked questions regarding employment status, income levels, etc. With the interview, we wanted to capture the personal experience of unemployment and the search for a job in such hard economic times. Our prior research found that educational attainment is consistently lower in immigrants from Central and South America than individuals who are native to the US.¹⁵⁷ They also connect educational attainment to employment opportunities, as mentioned in our literature review. We wanted to explore this connection of individuals in the neighborhoods of Walla Walla and see how these factors have been effecting them.

The last category of questions are important to ask neighborhood residents in order to understand what role NBOs and human services can play in supporting and working with low-income families. Giving residents the chance to advocate for their own needs allows NBOs and human service providers the chance to make changes that will directly affect the lives of the individuals they serve. Additionally, by asking the neighbors how they want their neighborhood to change for the better allows them to decide how they live, where they live, and what atmosphere they are creating as a community. It is proven that neighbors with a personal stake in the process of change are increasingly more likely to participate.¹⁵⁸ These questions were aimed to do just that: increase personal stakes in community development as well as informing NBOs and human services what neighbors want to see change.

All of these categories are integral to understanding how low-income individuals are able to navigate poverty. We use the lens of neighborhood attachment to look into what types of relationships residents have with other residents, C2C workers, and human service staff members in order to see if or how they are able to survive in poverty. We did this in order to illuminate what makes a service easy or difficult to use and what effects the services have on their lives.

As mentioned above, we conducted interviews with directors of child care programs in Walla Walla. The focus on childcare was important in two ways: child care is a proven access point for individuals into the formal service network, and to correspond with Geographical Information System (GIS) analysis for human service providers.¹⁵⁹ One interviewee, Mariela Rosas from the Children's Home Society, directly serves the population of youth at the farm labor homes. While the after school program is not available to family's in the C2C neighborhoods, I found it extremely helpful to see how the program is run in order to compare it to other organizations. The interview with Cynthia from Community Center for Youth was enriching to understand the type of programs the CCY is engaged in with resident's children in the C2C neighborhoods.

The questions we ask the service providers can be found in Appendix B.3. We wanted to know what each service does in Walla Walla currently in order to see how they are or could affect residents in the C2C neighborhoods. We ask questions about functions of the service, what the demographics of the children they serve are, and how they view collaboration. The demographics of children served is important in relating to the GIS analysis of where those children live in Walla Walla. Collaboration was an important question for directors in order to gauge interest in working with other organizations in Walla Walla.

We ask service providers what their perceived relationships are with the children and families who use their service. This is integral to understanding the value of relationships on both sides: through the lens of the

156 Austin et. al. 1990

157 Bergad et. al. 2010

158 Waldoff 2005

159 Small, M., Jacobs, E. & Peeples, R. Why Organizational Ties Matter for Neighborhood Effects: Resource Access through Childcare Centers. (Social Forces: 2008)

neighborhood resident and the service provider. We use this in our analysis to demonstrate the importance of informality. We wanted to see how organizations are already deconstructing the formal encounters into informal, personal experiences for individuals and families who use their services.

Geographic Information Systems

Geographic Information Systems (GIS) are powerful means of analysis that allow researchers to link statistical data to geographic locations and identify relevant trends. Although GIS is a relatively recent development with the advent of large-scale data tracking, a significant amount of literature has been developed regarding projects similar to ours that conduct analysis in partnership with a community organization using a variety of methods for the purpose of determining service availability. While there is no one correct way to conduct geographic analysis, this literature highlights “best practices” that work to ensure the accuracy and efficacy of analysis.

For the purpose of clarity, we divide this section of the methods section into three main sections each addressing the specific type of data that will be used during the GIS Analysis in addition to an introduction and conclusion. The sections are as follows:

- Introduction: What is GIS, and what are its capabilities?
- Background Information: Making sense of census data and more
- Collected Datasets: What we can learn from program participants
- Integrating Qualitative and Quantitative Data
- Social Responsibility: Engaging the community and understanding the limits of GIS.

Broadly speaking, our method was to use public “Background Information” to indicate where we might expect there to be a need for assistance, and then compare our collected data sets to see where community organizations are most active. Finally, our qualitative and quantitative data was integrated into maps in order to provide perspectives as to why certain geographic patterns exist.

What is GIS, and what are its capabilities?

“In its most basic form, geographic data can be described as any kind of data with a spatial reference...”¹⁶⁰ In the context of GIS, data can generally take two forms: it can be a place marker that represents a certain numerical value or it can be part of a larger object comprised of multiple points, such as a border or turn in a road. At its most essential, the GIS software is similar to a spreadsheet: it is able to store and categorize data. The key difference is that GIS combines this information with shapes (often known as “shapefiles”) and a Cartesian coordinate system to visually represent the data in the form of a map. For example, one of the most common functions of GIS software is to “geo-code” addresses – taking text input and matching it with a given location on a map to create a single or multiple information points.

Additionally, GIS software contains tools for geo-statistical analysis. These tools can be used individually for a range of simple to complex tasks; for example a business owner could take a set of customer addresses and calculate their average distance from his business. Complex geo-statistical analysis involves the construction of “models” – the combination of various tools into workflows that interrelate multiple sets of data.¹⁶¹ Some

160 Albrecht, J. Key Concepts and Techniques in GIS. (SAGE Publishing: 2007)

161 Albrecht 2007, 79

examples of complex analysis could include the prediction of traffic within certain areas of a city at certain times of day, the spread of an epidemic, and even the likely locations of criminal activity.¹⁶²

While there is a broad range of applications for geo-statistical analysis, geographic information systems can be particularly useful for community organizations seeking to understand the distribution of their participants. “Ease of visualizing and analyzing neighborhood-based spatial data makes GIS especially useful to neighborhood planners, citizens, and professionals alike...”¹⁶³ While GIS provides powerful analysis three major hurdles exist that prevent community organizations from utilizing analysis to its full potential: (1) lack of technology and skills available locally, (2) presenting GIS analysis in a democratic format where it is open to be challenged by personal experiences, and (3) the temptation to make GIS findings applicable to all participants in the organization.¹⁶⁴

In response to the first barrier, the partnership between Whitman College and Commitment to Community (C2C) is temporarily providing the technical support through the use of college-owned ArcGIS software and database tools. However, it is imperative that certain aspects of the data we collect, such as the location of service providers in map-form, continue to remain available to C2C after the research is completed. To help in this effort, certain non-private data sets were converted to Keyhole Markup Language (KML) so that they may be viewed in Google Earth and Google Maps – free and easily accessible software.

In response to the second and third barriers, community opinions in the form of interview transcripts and survey responses were integrated into a map format (see section 4 for more information on this process). Additionally, the limits and dangers of GIS are made clear in section 5. While every effort has been made to follow best practices that ensure the accurate representation of certain populations in Walla Walla, we would like to reiterate that GIS analysis inherently gives a generalized macroscopic view of the community and should not be considered a substitute for other methods of connecting with the community.

Background Information: Making sense of census data and more

The collection of public data is often useful in the process of contextualizing the participating population of a community organization.¹⁶⁵ In a study of Milwaukee community organizations using GIS, Ghose finds the following categories the most useful when assessing the well-being of a community (we have appended notes on their use in this project in the third column of the table):

<i>Neighborhood Issue</i>	<i>Spatial Data</i>	<i>Use in Project</i>
Housing	Ownership	Census Data provides relevant information on number of occupants while zoning maps indicate private residences vs. apartments.
	Zoning	Zoning data was incorporated as a partial explanation of geographic barriers and exclusion.
	Land Use	

162 Beck, C., & McCue, C. Predictive Policing: The Next Era in Policing. (The Police Chief: 2009)

163 Ghose, R. Community Participation, Spatial Knowledge Production, and GIS Use in Inner-City Revitalization. (Journal of Urban Technology: 2003)

164 Leitner, H., McMaster, R., Elwood, S. McMaster, S., & Sheppard, E. Models for Making GIS Available to Community Organizations: Dimensions of Difference and Appropriateness: NCGIA Specialist Meeting on Empowerment, Marginalization and GIS. (1998) 1-24.

165 Ghose 2003, 45

	Assessed Land/Structure Value	
	Tax Exemption Status of Land/Structure	
	Structural Information on Buildings	
	Building Code Violations	
	Raze Status	
	Vacant Lots	
	Boarded-Up Homes	
Economic Development	Employment Opportunities	
	List of Neighborhood Businesses	
	Membership in Business Associations	
	Small Business Lending Data	
	Job Training Programs	This information was captured in the survey component of this report.
Crime	Incidents listed by dates, locations, types.	Police reports specifically relevant to child neglect, mental health issues, substance abuse, and domestic disputes were used.
	Parole Data	
Property Investment	Private Mortgage Data	
	Public Lending Data	
School Data	School District Data	Demographic as well as free lunch eligibility will help establish areas with “at-risk” youth.
Client Data	Contact data about members, participants.	This data is discussed in section 3.
	Date of Participation	
	Participation Activities	

Table 1¹⁶⁶: – “Use in Project” our annotation.

Census Data

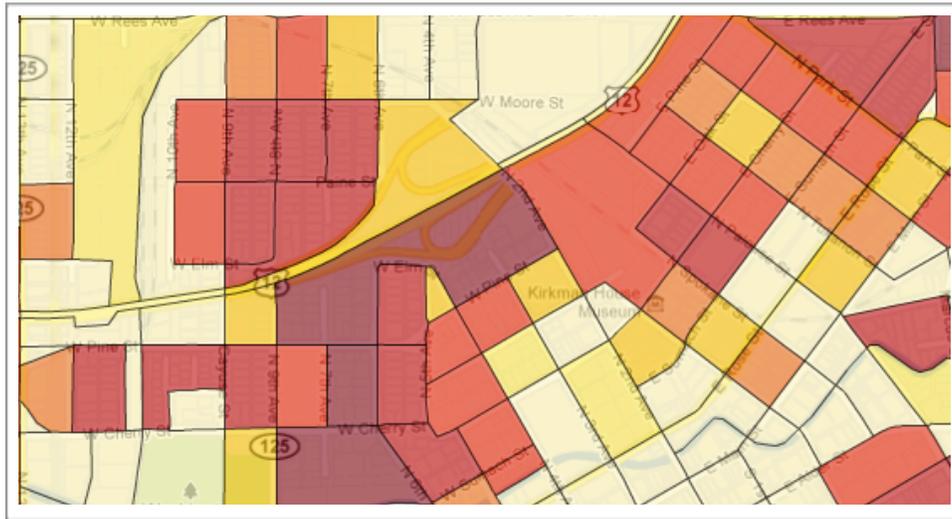
Census data is used in the creation of base “choropleth” maps that demonstrate demographic characteristics down to the level of census blocks. This base data is essential in controlling for variances in population when comparing other data sets. Additionally, presenting data in a map-based format allows for ease of use by community organizations that might not have the ability to access technical census data. For example, a higher prevalence of free lunch eligible students could also be the result of a more densely populated area.¹⁶⁷ Attention must be paid to the creation of choropleth maps and the classes within the spectrums they use. These classes (i.e. population or age ranges associated with a given color) should be evenly distributed in most cases.¹⁶⁸ Choosing unequal ranges for data in choropleth maps can ultimately cause misleading

¹⁶⁶ Ghose 2003, 46

¹⁶⁷ Monmonier, M. How to Lie with Maps. (University of Chicago Press: 1996). 146

¹⁶⁸ For instance, identifying the youngest quartile with red, the next quartile with orange, and so on as opposed to assigning the population under sixty five years of age with a single color and then differentiating for every additional year after that threshold would cause misleading perceptions of age distribution.

representations: “manipulating categories in the breaks between categories of a choropleth map can often create two distinct spatial patterns...”.¹⁶⁹



Map 3: Choropleth Population Map of Downtown Walla Walla. Colors are contained by predetermined polygons.

Furthermore, Monmonier recommends the use of simple color sets that draw from different shades within the same range of colors when creating a choropleth map. The use of widely differing colors can often confuse the view and fail to set demographic trends in full relief.¹⁷⁰

Police Reports

Police reports are often used by town governments and community organizations as a way of identifying a lack of adequate services.¹⁷¹ Although one might normally associate police departments with preventing and investigating crime, police officers respond to numerous other types of incidents that could be prevented by social service providers. Each police report records the location and the broadly defined nature of the call. In a public records request from the Walla Walla Police Department we have obtained ten categories of police call, listed here with the total number of cases reported in Walla Walla during the past decade (1999-2011):

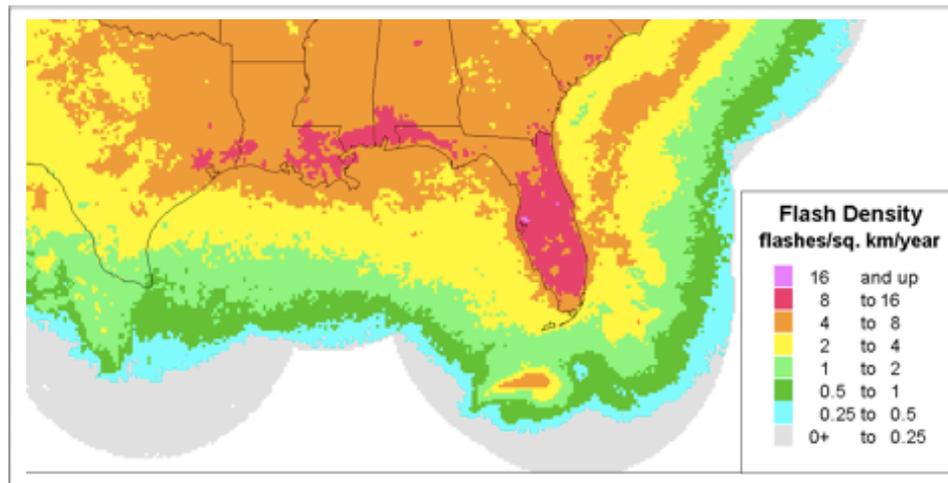
- Child abuse (454)
- Child neglect (1,181)
- Civil Problem (2,234)
- Domestic Problem (6,124)
- Domestic Violence (2,898)
- Juvenile Problem (2,857)
- Mental Problem (1,445)
- Narcotics (3,520)
- Suicide Attempt (491)
- Welfare Checks (2,817)

169 Monmonier 1996, 148

170 Monmonier 1996, 164

171 Ghose 2003, 47

Each category of police report displayed here links directly to a larger area of interest identified by C2C, such as childcare, family cohesion, and health (mental and physical). Data points such as these can be controlled for population density and then aggregated using a “density map” (shown below):



Map 4: Example Density Map of Lightning Flashes/sq. km./year.
Color ranges aggregate a point-set and blend into one another.

Zoning Map

The Walla Walla Municipal Zoning map provides invaluable information such as land purpose, housing type, and housing size. Additionally, zoning patterns in Walla Walla are distinctly connected to neighborhood boundaries as well as housing value and inclusion or exclusion within the town. Past research has shown that housing sizes and the placement of industrial zones have led to social exclusion.¹⁷² Consequently, we examine zoning regulations as potential causes for social inequality in Walla Walla.

Collected Datasets: What we can learn from program participants

The data sets provided to us by local community-based organizations can be the source of invaluable insight if interpreted correctly. Much like the police reports, this data has been geo-coded and the resulting point set is used for the creation of a density map. This information provides key data as to where these organizations membership groups come from, as opposed to where we might perceive a need for their services. Ghose (2003) suggests that such membership data is extremely useful to community organizations, especially if used as an inter-organization strategy to improve coverage. In particular, analysis of this data reveals if any geographic clustering or dividing is occurring within Walla Walla; this data can often provide evidence of geographic exclusion and inability to access services.

The datasets collected for this project include the following:

- YMCA Current Membership Database (2011)
- Community Center for Youth Participant Address Book (2011)
- Children’s Home Society Membership Database (2011)
- Blue Mountain Action Council Commodity Supplemental Food Program Participant List (2011)

172 Shlay, A., & Rossi, P. Keeping up the Neighborhood: Estimating Net Effects of Zoning. (American Sociological Review: 1991)

- Walla Walla Police Department Calls for Service by Police District (1999-2011)
- Walla Walla Police Department Calls for Service by Block (2010)
- U.S. Census Bureau Summary File 1 for Walla Walla County.

Location, demographics, and transportation availability in small towns (such as Walla Walla) often directly impacts service use or disuse.¹⁷³ However, preliminary research indicates that many residences in Commitment to Community's area of activity have a registered vehicle. Additionally, Reaven (2009) suggests that public transportation in Walla Walla remains underutilized. We hope that additional data about participation in community programs aids in forming alternative concepts of geographic related exclusion that still take into account, but are not necessarily contingent upon transportation.

Surveys

One GIS project conducted in a small Midwestern city began with phone calls to assess access to education and benefited even further from combining the responses with a geographic database: "for the purposes of interpretation it was useful to know which areas of the neighborhood were represented." In short, knowing where survey respondents live serves as a common denominator that allows for the relation of other spatial-based data.¹⁷⁴ Combining survey data with maps is often helpful on three levels: (1) because it can establish which regions have adequately responded, (2) because it can help explain responses in terms of geography, and (3) because it can help explain differences between average area statistics and individual community organizer experiences.

On the first level, census data was used as an overlay to determine if all neighborhoods had roughly similar representation within the survey per capita. While this project concluded survey collection before GIS analysis is conducted, the combination of surveys with maps will allow for future researchers to continue with survey collection in a geographically representative way. Additionally, GIS helps us understand whether representative demographics responded to the survey. In the instance of Quon-Huber et al. several wealthy developments within a neighborhood bordered clusters of impoverished houses. Using GIS, the researchers were able to recognize that a disproportionate number of wealthy residents had responded and were subsequently able to adjust their polling techniques.¹⁷⁵

On the second level, Quon-Huber et al. argue that for the use of a survey regarding community resources (e.g. parks) it is helpful to know how close residents live to the resources in question. For example, if certain individuals in a neighborhood who rank having recreational space highly as a priority for community development live farther away from the neighborhood's public park, one would be able to draw a connection between the two observations using GIS.¹⁷⁶ Ultimately, the combination of location to different public resources and responses on the community survey were used to choose interview participants to further focus perspectives on neighborhood poverty.¹⁷⁷

173 Rose, E., Wittne, K., & McCreanor, T. Transport Related Social Exclusion in New Zealand: Evidence and Challenges. (Kōtuitui: New Zealand Journal of Social Sciences Online: 2009)

174 Quon-Huber, M., Van Egeren, L., Pierce, S., and Foster-Fishman, P. GIS Applications for Community-Based Research and Action: Mapping Change in a Community-Building Initiative. (Journal of Prevention & Intervention in the Community: 2009) 12

175 Ibid.

176 Ibid.

177 Ibid.

Interviews

The integration and representation of narratives continues to be a new frontier for GIS, as it is often difficult to categorize or locate all of the concepts and abstractions.¹⁷⁸ For example, when a parent refers to childcare as a daily activity, this could include numerous locations and times that are not easily definable as a single point on a map. Often, a third dimension (vertical) is used to represent a concept such as time, while specific pieces of narrative are attached to a geographic location. Kwan and Ding (2008) use this concept to create the software 3D-VQGIS with the capability of tagging text to “nodes” that may be attached to a geographic location, but that might also be linked to other nodes that represent broad concepts, thoughts, and emotions. While they consider the ability to statistically evaluate interview transcripts important, the researchers emphasize that the ability of the mapmaker to integrate and link different sections of transcript together is also highly valuable.

Social Responsibility: Engaging the community and the limits of GIS

GIS can be incredibly beneficial to community organizations if applied correctly. However, it is important to recognize that data collection and geo-statistical analysis have had – and continue to have – disempowering effects depending upon the entity using them and the policies implemented. For example, private contractors with access to GIS often use it as a legitimizing tool to counter public opinion at town government meetings.¹⁷⁹ What Monmonier found was that GIS professionals could use maps to create an ethos of professionalism in front of town governments, while simultaneously emphasizing favorable (or obscuring unfavorable) aspects of a proposed project. In reaction to claims that geo-statistical analysis in the 1990s did not include a community voice, it became common practice to include an aspect of “community involvement” in GIS projects. “The technological, social, and political practices that compromise participatory GIS emerged from the self-conscious reflexive efforts of some GIS researchers to ... respond to its deconstruction in the critical texts of the 1990s.”¹⁸⁰ Community organizations receiving grants from private corporations and government were often encouraged to use GIS as a means for social change.¹⁸¹

Often, however, participation of community members in GIS projects is tokenized such that a few paid staff within the organization conduct the actual analysis and maintain the data collection.¹⁸² Furthermore, the creation of “experts” regarding spatial data within an organization often has tangible effects on the organization’s ability to make cohesive, democratic decisions.¹⁸³ Rather than seeing GIS as an objective practice conducted by “experts”, Elwood argues that GIS should be conceived of as a qualitative experiment in geographic education.¹⁸⁴ Rather than simply being a way of applying for further grant money, GIS is also a method of educating community members about neighborhood challenges, such as income, housing, and education, that deserve community focus. .

178 Kwan, M., & Ding, G. Geo-Narrative: Extending Geographic Information Systems for Narrative Analysis in Qualitative and Mixed-Method Research. (The Professional Geographer: Association of American Geographers: 2008) 444

179 Monmonier 1996, 78

180 Elwood, S. Critical Issues in Participatory GIS: Deconstructions, Reconstructions, and New Research Directions. (Transactions in GIS: 2006) 694

181 Elwood, S, & Leitner, H. GIS and Spatial Knowledge Production for Neighborhood Revitalization: Negotiating State Priorities and Neighborhood Visions. (Journal of Urban Affairs: 2003) 139

182 Elwood 2006

183 Leitner, et al. 1998

184 Elwood 2006, 702

While it is sometimes difficult for community organizations to translate the observation of citywide trends into policy action, GIS is often useful on the neighborhood level: “This strategy is particularly effective if the community organization seeks to challenge the city’s inaction to its neighborhood concerns.”¹⁸⁵ Combining the ability of GIS to challenge government inaction with community education about geographic issues has a strong potential to focus community attention on specific goals. As one community GIS project in Milwaukee found after surveying neighborhoods for the number of vacant lots and abandoned structures,

...the information is so easy to read from the maps. So when we were presenting the study findings to the neighborhood residents in our monthly meeting, we used the maps heavily to explain the findings. It was easier for the residents to understand the information from the maps than from the tables, because of the visual quality and the use of colors.¹⁸⁶

Rather than being reserved for town planners and organization staff, maps are often best used to spark community engagement. However, it is also important that maps not be placed above other sources of information simply because of the facility with which they can be viewed. Indeed, the objectivity that maps appear to present is the result of a complex process of defining borders and valuing certain types of data above others. Without thinking critically, we often put faith in “the mapmaker, in [his or her] technologies;... in the idea...that the unique mosaic of boundaries and symbols corresponds to real space in what we like to call, ‘the real world.’”¹⁸⁷ While empowering and accessible, maps often obscure these types of debates such as, “what were the biases of the map-maker?” or, “was the analysis conducted with the right tools and methods?” or, “should we even be trying to address these types of issues with maps?”

This GIS project had neither the time nor the resources to actively engage participants from the community, and thus lacks important perspectives. To improve this aspect of the project, we are integrating survey results and interviews into the maps that we produce. Even so, the trends and findings our methods produce must remain up for debate; they may appear to be conclusive but only tell part of the story.

185 Ghose 2003, 47

186 Ghose 2003, 55

187 Hall, S.S. Mapping the Next Millennium: How Computer-Driven Cartography is Revolutionizing the Face of Science. (Vantage Books: 1993)

Social Service Use and Access in Walla Walla: Presentation and Analysis of Primary Research

I. Demographic Composition:

Context is one of the most important intellectual resources when attempting to understand poverty and service access in Walla Walla. Throughout this section we provide information at several different levels: (1) the respondents of our survey, (2) The City of Walla Walla, (3) Walla Walla County, (4) the United States overall. These different levels of statistical analysis are in part determined by what is most useful to service providers, but also what demonstrates the findings of our research most effectively within the context of Walla Walla. The content of this section is composed of general demographic findings (race, age, marital status, and language) that situate our surveys, interviews, and maps in an appropriate frame of reference.

Demographic data specific to our topic areas (e.g. education, childcare, and health) is provided at the beginning of each relevant section. Comparative data for these sections has been sourced primarily from the 2010 U.S. Census short form and the American Community Survey 3-Year estimates from the 2010 American Community Survey for the City of Walla Walla.

While much of the Census Bureau data that is used in the section is publicly available, it is not easily viewable due to its comma-delimited layout in Summary File 1 format. Thus, part of the objective of displaying the census data here is to make it more easily accessible for the residents, community organizers, and service providers of Walla Walla.

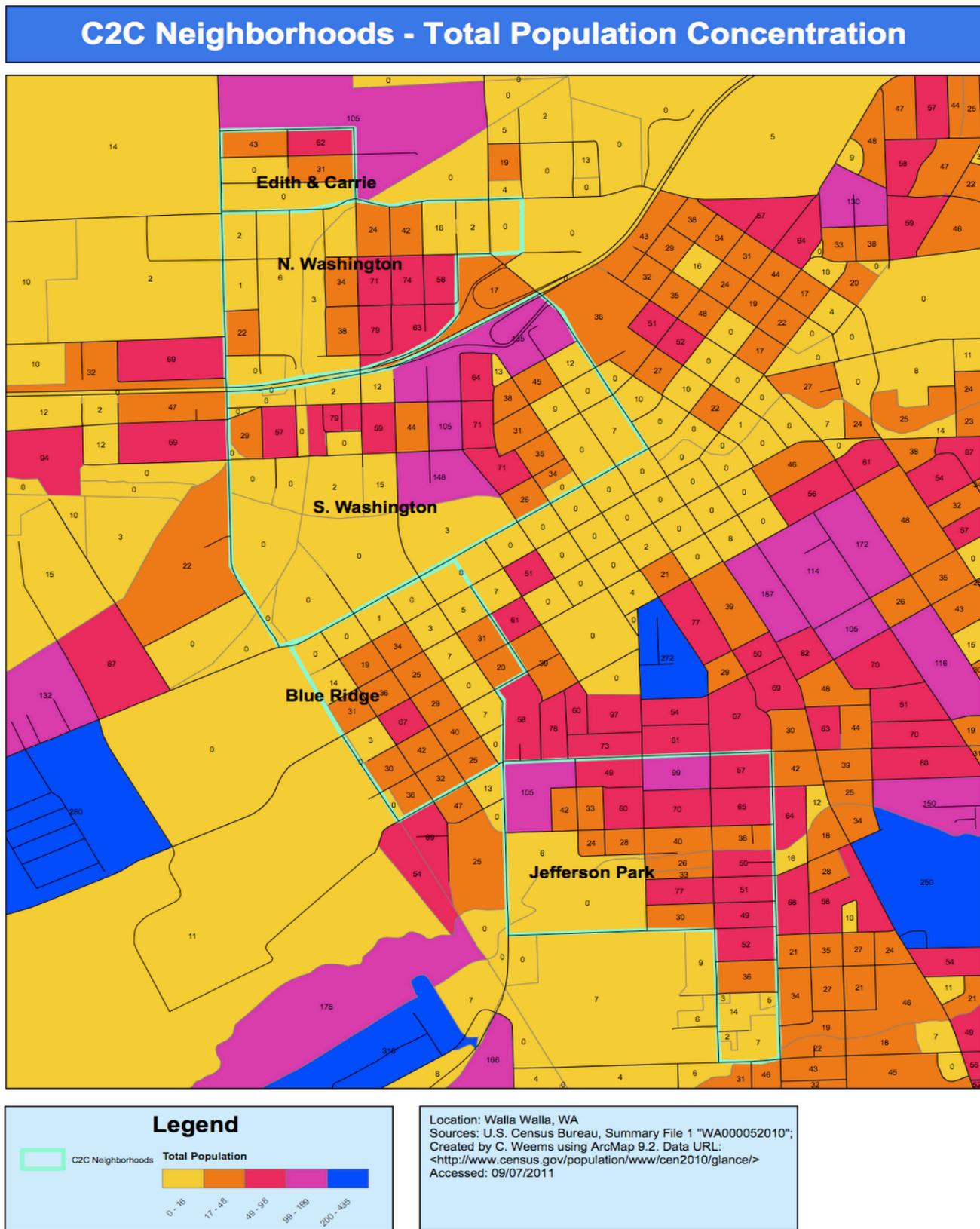
Using 2010 Census Data in Combination with GIS we are able to calculate relatively accurate population counts each C2C neighborhood. This information is important for several reasons. First, it allows us to contextualize our survey findings by demonstrating that they are a relatively small proportion of the total population. Additionally, this information is important for service providers in terms of understanding where most community members live, and what percent of the population they are reaching.

One major finding that is elaborated upon in section VIII (Zoning) is that while the City of Walla Walla has standard boundaries for each C2C neighborhood, the location of residents within the neighborhoods is not evenly distributed within the current boundaries. Additionally, the current Blue Ridge neighborhood boundaries should be expanded to include residential areas directly to the south of the current marked neighborhood.

The following table enumerates total residents within each neighborhood, including the densely populated census blocks directly to the south of Blue Ridge:

Area	Edith & Carrie	N. Washington	S. Washington	Blue Ridge	Jefferson Park
C2C Population:	241	532	1116	738	1146
C2C Total:	3,773				
City Population:	31,731				

Table 2: U.S. Census Bureau (2010)



Map 5: U.S. Census Bureau (2010). Neighborhood boundary locations: Commitment to Community.

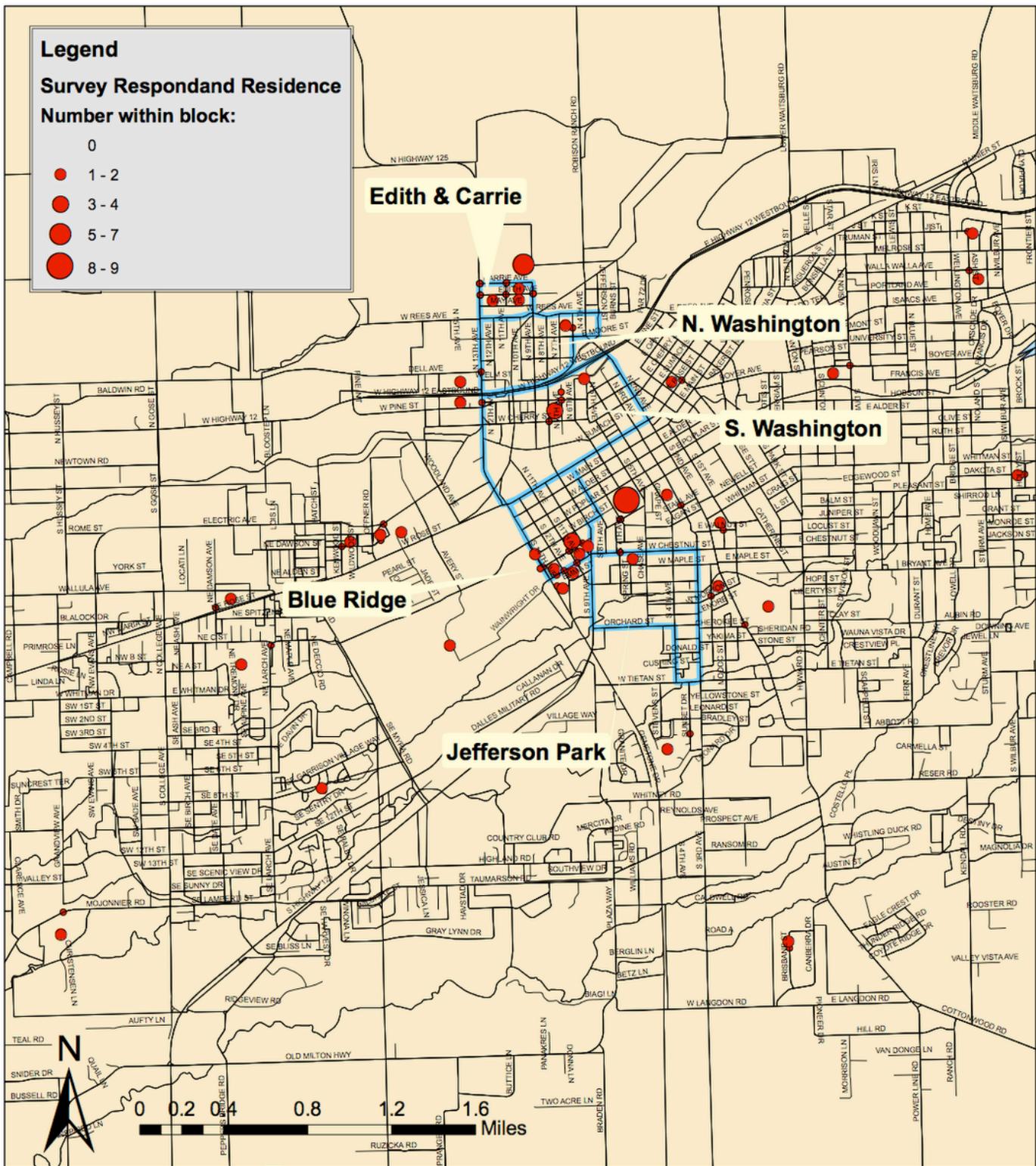
Spatial Distribution of Survey Respondent Residences:

The five neighborhoods that C2C works in contain approximately 3,773 residents, or about 12% of the Walla Walla City population. This large population demonstrates the need for further survey work, as our current survey results represent just 1% of the C2C neighborhood population. Our survey is thus best understood as a pilot project to identify key issues among the residents of Edith & Carrie, South Washington, and Blue Ridge, rather than a conclusive investigation.

A total of 86 residents responded to our survey. Half of the surveys were conducted in 3 of the neighborhoods Commitment to Community is actively working in. 13 were conducted with residents from Blue Ridge neighborhood, 13 were conducted with residents from North Washington Park and 8 were with residents from Edith and Carrie. The other 51 were conducted at food distribution events, outside of Super1 Foods and at a YMCA community meeting.

While the primary geographic areas targeted by the survey were in the neighborhoods of Edith & Carrie, South Washington Park, and Blue Ridge, respondents from a wide range of other locations were included as well. In order to determine how geographically representative the survey responses were, the residences of survey respondents were incorporated into map forma. Full addresses were geo-coded with an 89% successful match rate. However, due to omissions and inaccuracies only 58 of 86 (67%) of survey responses were able to be with a sufficient degree of accuracy to be geographically represented. The first map *Walla Walla – Residences of Survey Respondents* offers a complete view of all successfully geo-coded surveys responses, while *C2C Neighborhoods – Residences of Survey Respondents* provides a more detailed view of the neighborhoods where C2C actively works.

Walla Walla - Residences of Survey Respondents



Of the survey respondents who submitted a complete address, 89% were successfully geocoded. A combination of automated and manual address matching was used to achieve this success rate. The primary causes of the unsuccessful matching included invalid address numbers and road names that could not be located within Walla Walla.

Map 6: Residences of survey respondents.

While the survey received responses from all three C2C neighborhoods that were targeted, a significant number of residences outside of these geographic districts have been incorporated. Additionally, surveys are generally clustered within the highest population density areas of the C2C neighborhoods. The uneven distribution of survey respondents within these geographic boundaries partially reflects the uneven distribution of the overall population.

A notable exception of survey respondents aligning with uneven distribution is the case of Blue Ridge: census population data normalized by geographic area of the corresponding census block suggests that a large portion of the Blue Ridge population living between West Birch St. and W. Alder St. were not reached through our survey. Additionally, while our survey targeted the most populated area of South Washington, more information should be collected in the Western part of the neighborhood on West Pine and West Cherry Streets.

Demographic Characteristics of Survey Respondents:

Age:

Survey respondents' ages ranged from 19 to 82, with a mean age of 49.3 and median age of 48.5.

Marital Status:

The majority of residents are married (48.2%), followed by divorced (18.5%) and single (18.5%) which had the same percentage of responses. 11.1% of respondents indicated they are widows and 3.7% are living with a significant other/partner¹⁸⁸.

Language:

44.9% of respondents speak a language other than English at home. 25.8% of respondents are not very or not at all able to speak English. 24.2% of respondents are not very or not at all able to read or write in English¹⁸⁹.

Race:

45.2% of survey respondents identified as White while 39.3% of survey respondents identified as Latino. 15.5% identified as "other"¹⁹⁰. For the purposes of the survey, the "other" categories are considered "non-White". 45.2% of survey respondents were White and 54.8% were non-White.¹⁹¹

The proportion of Hispanic/Latino respondents to White respondents in survey respondents is higher than the actual demographic make-up of the city as determined by Census data. According to Census data, Walla Walla's demographic make up is 70% White, 22% Hispanic/Latino and 8% other.¹⁹²

While we recognize that Latino is not a racial category by the US Census Bureau, for the purposes of our study we chose to recognize Latino and White as separate racial categories. This is because the majority of people within the communities identify their race as either Latino or Hispanic, or White. Acknowledging that

188 N=86

189 N=86

190 N=84

191 The "other" respondents identified as Native Americans.

192 U.S. Census Bureau, "American Community Survey 3-Year Estimates" (2010): QT-PL (Tables P1, P3, P4, H1). Accessed by C. Weems through American Fact Finder on 11/25/2011: <http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_PL_QTPL&prodType=table>

there four respondents identified as other categories (“other” and “Native American”), the population predominantly identifies as either Whites or Latinos.

Whites and Latinos are the two largest racial groups present in Walla Walla, representing 70% and 22% of the total population, respectively¹⁹³. The map below demonstrates where the highest concentration of Latino residents are located, as determined by a population count within a given census block. Purple represents a Latino population of between 65-151 within the census block, while yellow represents between 0-7 Latino residents. Numbers at the center of each census block indicate the actual number of Latino resident living on that block as of April 1st, 2010. Bright blue lines demarcate the C2C neighborhoods.

While the map, *C2C Neighborhoods – Latino Residents Per Block* represents raw numbers of residents, the table below represents Latino residents as a percentage of the total population:

Demographic	Edith & Carrie	N. Washington	S. Washington	Blue Ridge	Jefferson Park
Total Population	241	532	1116	738	1146
Latino Residents	148	365	722	440	575
% Latino	61%	69%	64%	60%	50%

Table 3: U.S. Census Bureau (2010). Neighborhood boundaries defined by Commitment to Community.

This table demonstrates that despite being mostly white (excluding individuals of Hispanic/Latino origin) on the municipal level, the C2C neighborhoods in which we conducted our survey are predominantly Latino. With a combined average of 62% Latino residents in Edith & Carrie, South Washington, and Blue Ridge, receiving input from 39.3% Latino residents indicates that Latinos were slightly under-represented in the survey overall.

Commitment to Community’s area of activity running south from North 4th Ave. to South 3rd Ave. represents an area within the Walla Walla City Limits where Latinos are highly concentrated. On average, the census blocks that comprise these neighborhoods are home to between 60%-90% Latino residents. Commitment to Community’s involvement in areas that are densely populated with Latinos is important in understanding the relationship between race, poverty and the role neighborhood organizations have in trying to alleviate poverty in Walla Walla. This relationship will continuously be highlighted and described throughout this report. In addition, this finding helps to explain the high proportion of Latino representation in the survey. Surveys were largely conducted in the three neighborhoods in which Commitment to Community is involved, which have larger percentages of Hispanic/Latino residents than those of the greater city.

II. Income-level, Employment and Educational Attainment:

Poverty is greatly influenced by income-level, employment and educational attainment. Poverty is a key to understanding the difference between racial groups and their use of informal networks, formal human services and neighborhood attachment. The interview, survey and census data describe how individuals and groups of people experience poverty in Walla Walla. Survey and census data provide a broad definition of

193 Source: US Census Bureau (ibid)

poverty in Walla Walla while interviews reveal individuals experiences that can be linked to other narratives in the city.

Income and Poverty

The median household income in Walla Walla County in 2009 was \$57,300.¹⁹⁴ The Walla Walla Housing Authority has created a ranking system based on the median household income to distinguish between extremely-low, very-low, low and moderate income households. Those families that have a household income that is 30% of the county’s median household income is considered extremely low. Adjusting for the number of persons in the household, **51.2% of survey respondents are ranked as extremely low-income**, or made less than 30% of the median income. **23.3% of survey respondents were categorized as very low-income**, and **16.3% were categorized as low-income**. Less than 10% of the survey respondents were considered moderate income households. In fact, **74.5% of survey respondents were categorized as extremely to very low-income (meaning that their median household income fell below 50% of the median household income in Walla Walla County)**. 90.7% of respondents were categorized as extremely low to low-income.¹⁹⁵

83.3% of non-white survey respondents were considered to be very-low income, or were at or under 50% of the median household income. 63.7% of white respondents were at or under 50% of the median household income. No non-white respondents were at or above a moderate-level of income.

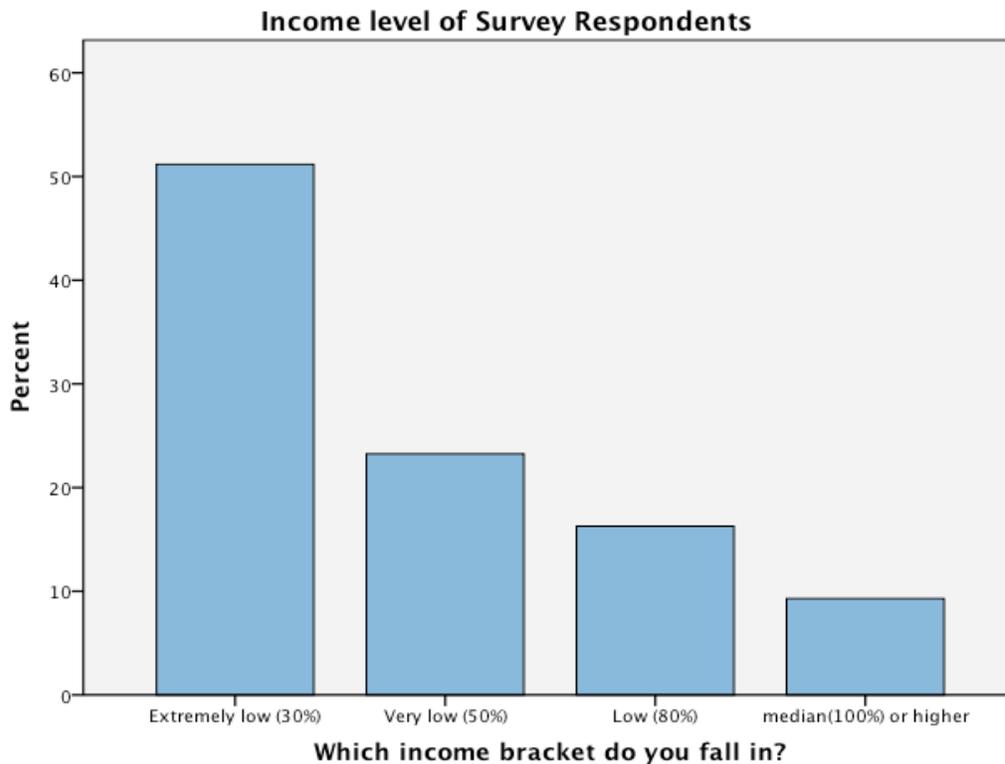


Chart 1: Income Level of Survey Respondants

194 This number was attained from the Walla Walla Housing Authority’s report on household income and the subsequent categorization scheme of “low”, “very-low”, and “extremely-low” ranking systems are taken from the Housing Authority’s ranking system.

195 N=50

In the context of national median income, Walla Walla’s median income curve is slightly below the national average, as demonstrated in the graph below. The horizontal axis represents income brackets, while the vertical axis represents the percentage of the population that falls within each income bracket as determined by Census data. Compared to national median income, Walla Walla has more jobs that offer low-medium range salaries, with less jobs offering compensation above the \$50k-\$100k per year bracket. Additionally, Walla Walla’s percentage of extremely low income individuals (those making less than \$10k a year) is 2.6% higher than the national percentage in that same income bracket. **The Graph below represents the observation that overall, Walla Walla has more individuals earning an income below the national median. Conversely, Walla Walla has comparatively fewer residents generating an income above the national median.**

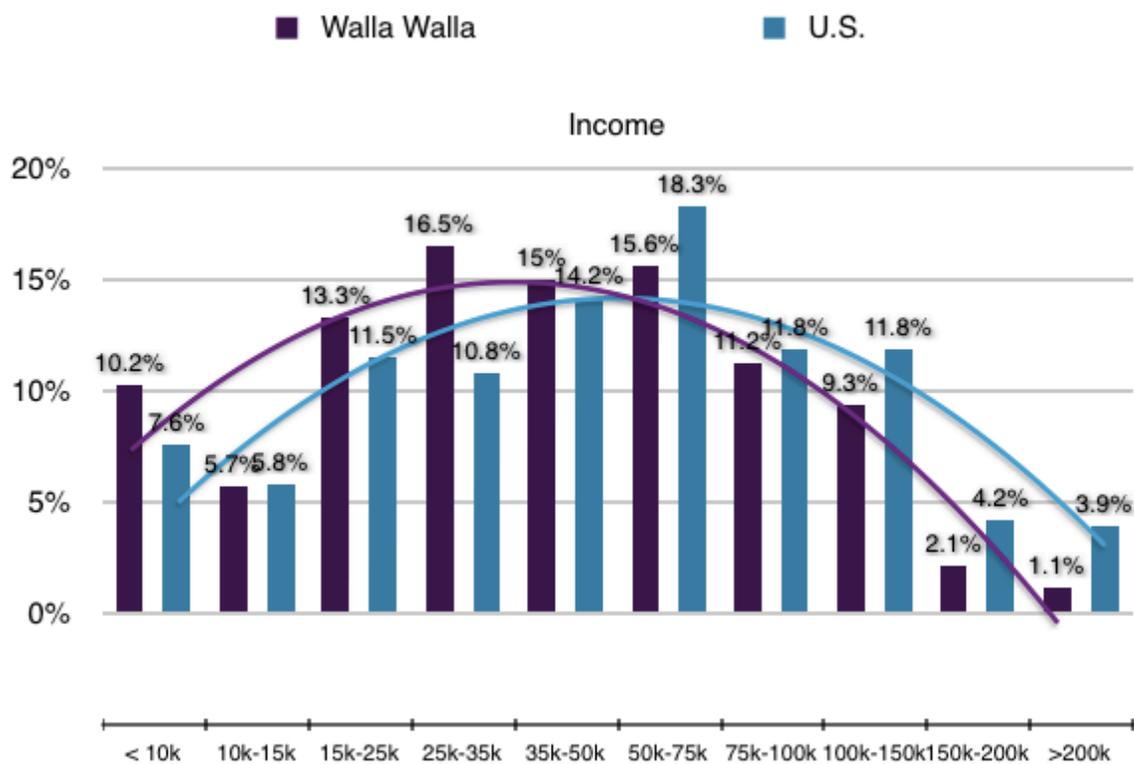


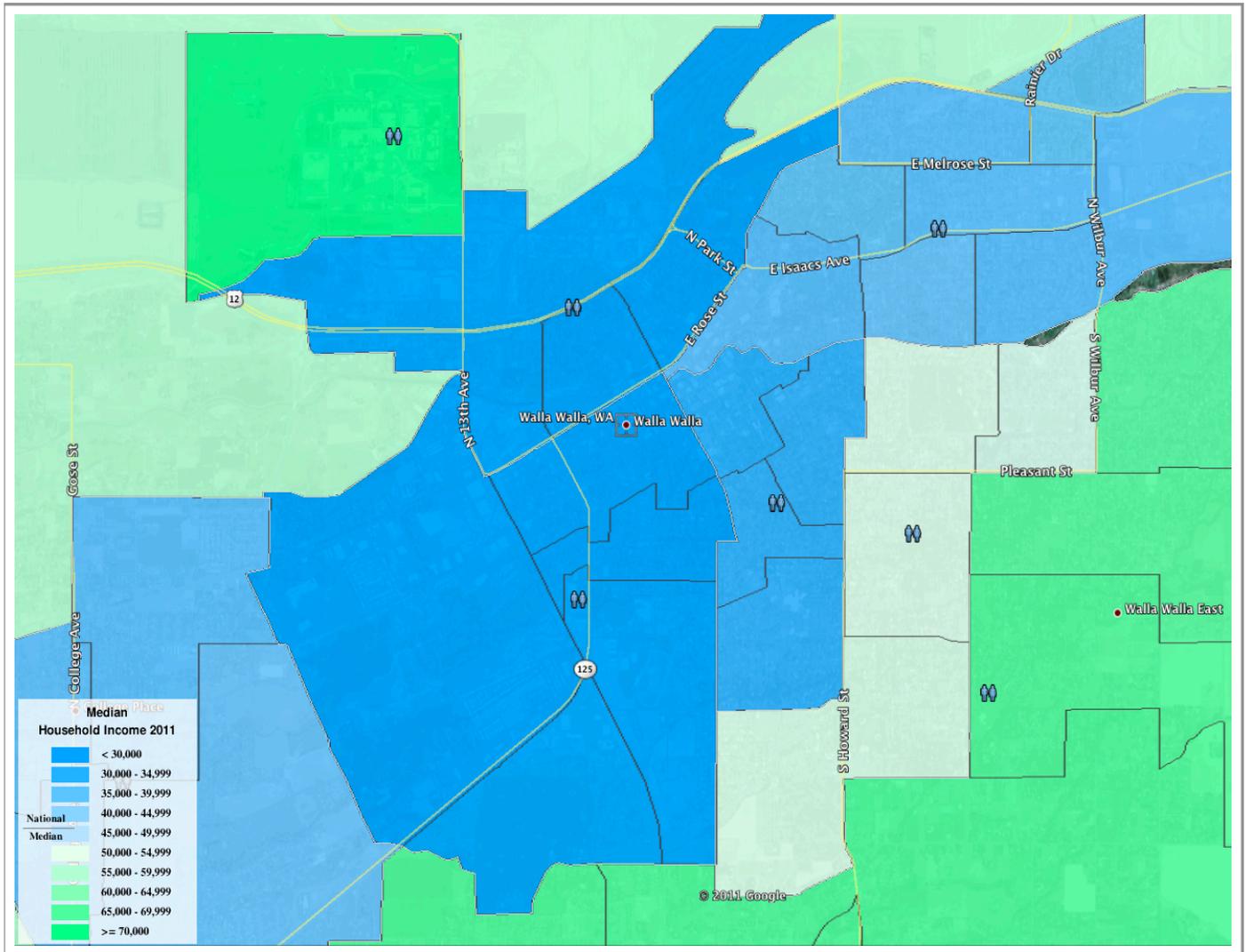
Chart 2: Walla Walla Income Curve¹⁹⁶

In addition to understanding the relative distribution of income of survey respondents, it is important to consider the geographic distribution of income levels within Walla Walla. The following maps are derived from 2010 survey data owned by the Nielsen Company, a private survey company.¹⁹⁷ The data was accessed via proxy through Google Earth Pro. Median household income has been associated with Census Tracts in order to portray the geographic component of income distribution. The maps below graphically describe where poverty occurs currently, as well as where poverty will continue to be in 5 years (from the 2010 census data).

¹⁹⁶ U.S. Census Bureau (2010): American Community Survey

¹⁹⁷ Source: Nielsen Company, Educational Attainment by Census Block (2010). Accessed by C. Weems through Google Earth Pro 10/16/2011.

Median Income 2011¹⁹⁸:

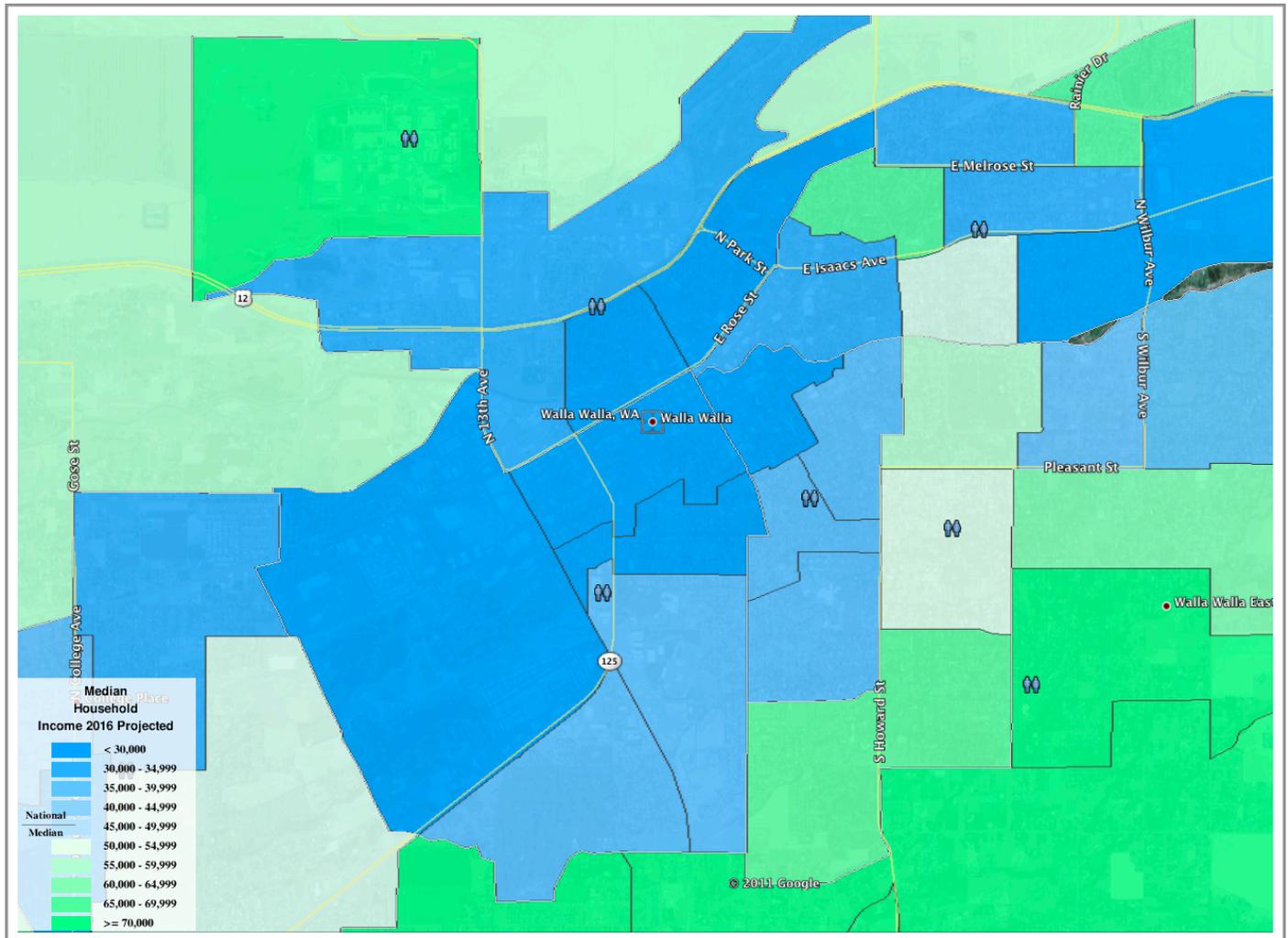


Map 7: Walla Walla Median Household Income 2011

This map portrays median income levels gathered from Census data among census blocks in Walla Walla. All of the neighborhoods in which C2C operates are located within the dark blue section of Walla Walla, indicating a median income of less than \$30,000 per year. Moving away from the city, towards the east, we can see a clear increase in income. This geographic distribution of income is also corroborated by Federal Free and Reduced Lunch eligibility in these areas.

198 Source: Nielsen Company, Educational Attainment by Census Block (2010). Accessed by C. Weems through Google Earth Pro 10/16/2011.

Projected Median Income 2016¹⁹⁹:



Map 8: Walla Walla Median Household Income 2016 Projected

Projected median income for Walla Walla over the next five years according to Census data, reveals that Edith & Carrie, N. Washington, and part of S. Washington will move up one median income bracket to between \$30k and \$35k. However, income in Blue Ridge and for the many of residents in Jefferson Park will remain below \$30k per year. Furthermore, it is encouraging that the correlation between East and West with rich and poor neighborhoods, respectively, is currently projected to become slightly more dissociated.

Both maps illustrate an income disparity between geographical locations in Walla Walla. The projected income in these areas do no change significantly from 2010 to 2015 and are varied in the direction they are projected to move. For example, Jefferson park average income is expected to increase by about \$5,000-\$10,000 while Blue Ridge will remain at the same level of income. There is an assumed negative relationship between average income and need of support; the more income a neighborhood has on average, the overall need for support and services is likely to be less. It is important for neighborhood-based organizations, like C2C, to know the projected poverty rates and likelihood of need in the neighborhoods they serve in order to direct and inform their efforts to access the people who need support the most.

199 Source: The Nielson Company via Google Earth Pro Data Sets

Educational Attainment

75.6% of survey respondents have received at least a high school diploma or the equivalent. 51.3% of respondents have received some kind of higher education other than high school. 24.4% of survey respondents have not received a high school education.

The survey reveals that there is an association between race and level of educational attainment: **Only 43.8% of non-White respondents have completed High School or received a GED, compared to 97.4% of White respondents²⁰⁰**. Over half (56.3%) of non-White respondents have not received a high school education.

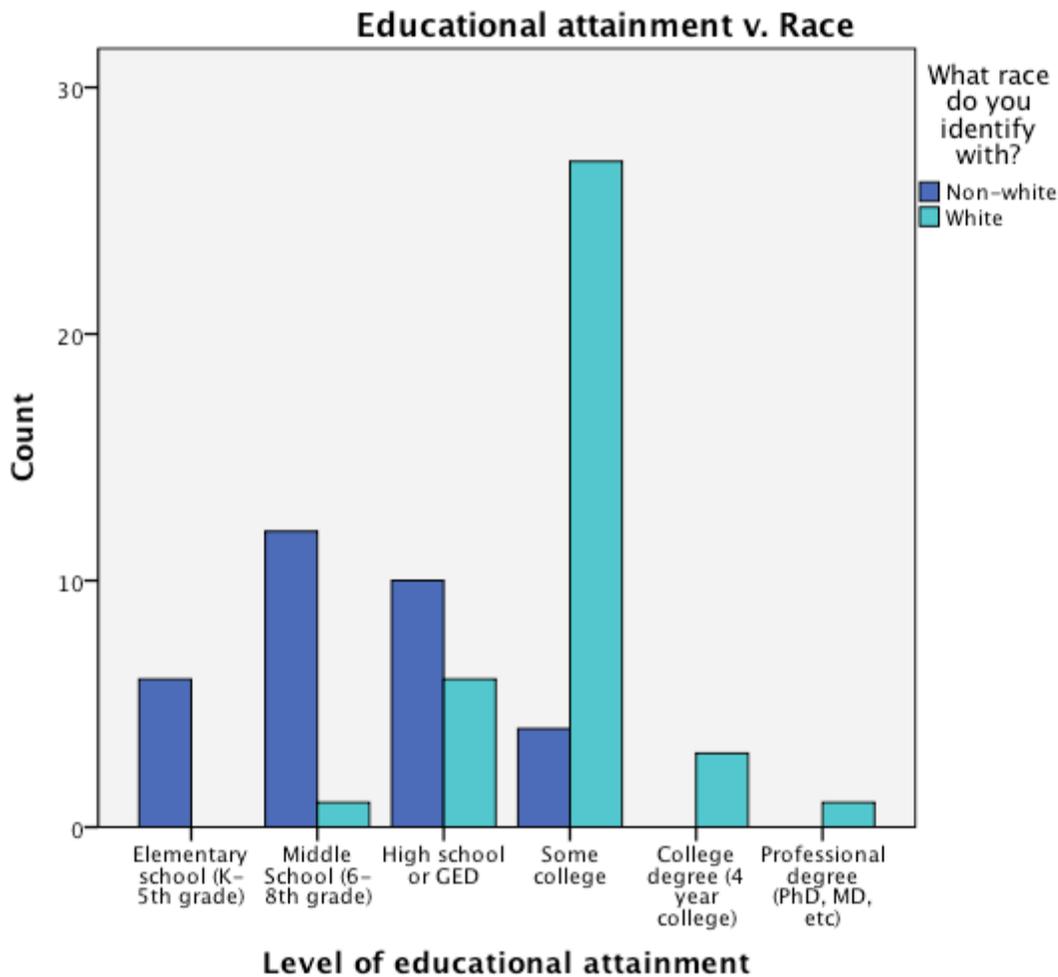


Chart 3: Educational Attainment v. Race

Figure 2. shows a statistical correlation between race and educational attainment according to survey results. White respondents are more likely to have higher levels of education as compared to non-whites.

Despite discrepancies in educational attainment, our survey revealed no strong discrepancy in income level between whites and non-whites. **77.3% of the White survey respondents with a high school education were considered low, very low or extremely low-income.** This means that their household income was at or

²⁰⁰ N = 70, Cramer's v = .728 @ .000

below 80% of the median income in Walla Walla. Only 4 White respondents were considered moderate-income; no Latino respondents fell within the moderate-income category.

This finding from the survey broadly parallels Walla Walla’s educational attainment by origin of the individual as reported by the 2010 American Community Survey. The graph below demonstrates that overall, individuals in Walla Walla who are born either in this state, are born in another state, or are naturalized citizens are far more likely to have attained at least a high school education than those who are un-naturalized immigrants from a foreign country.

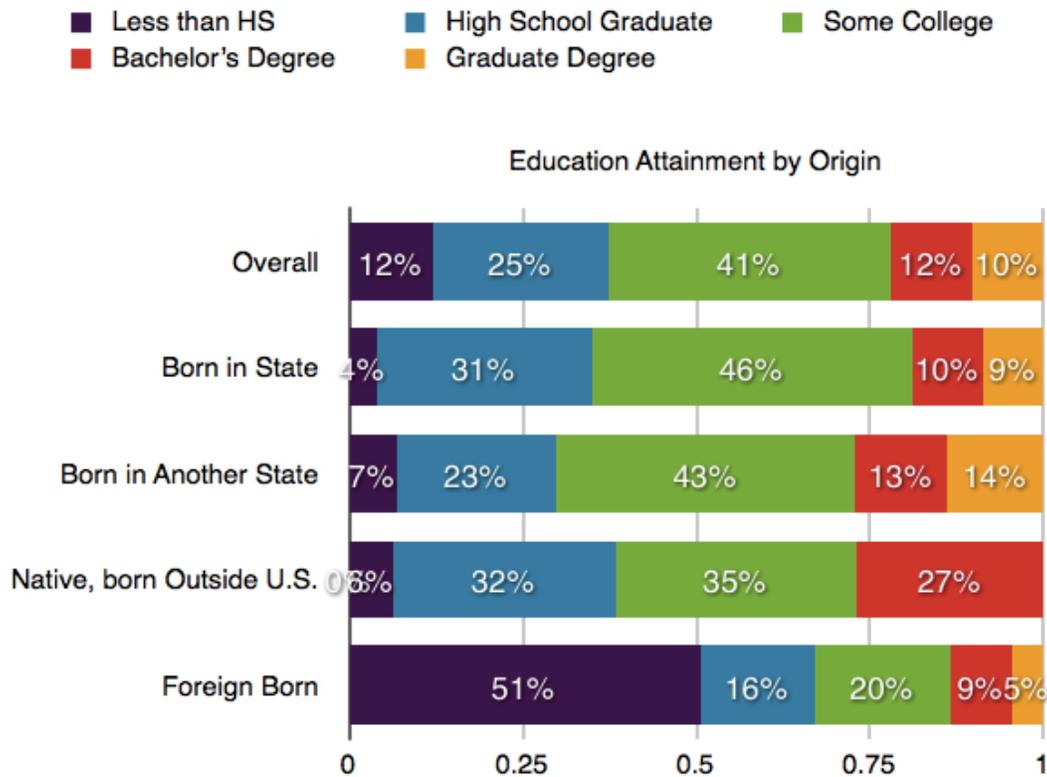


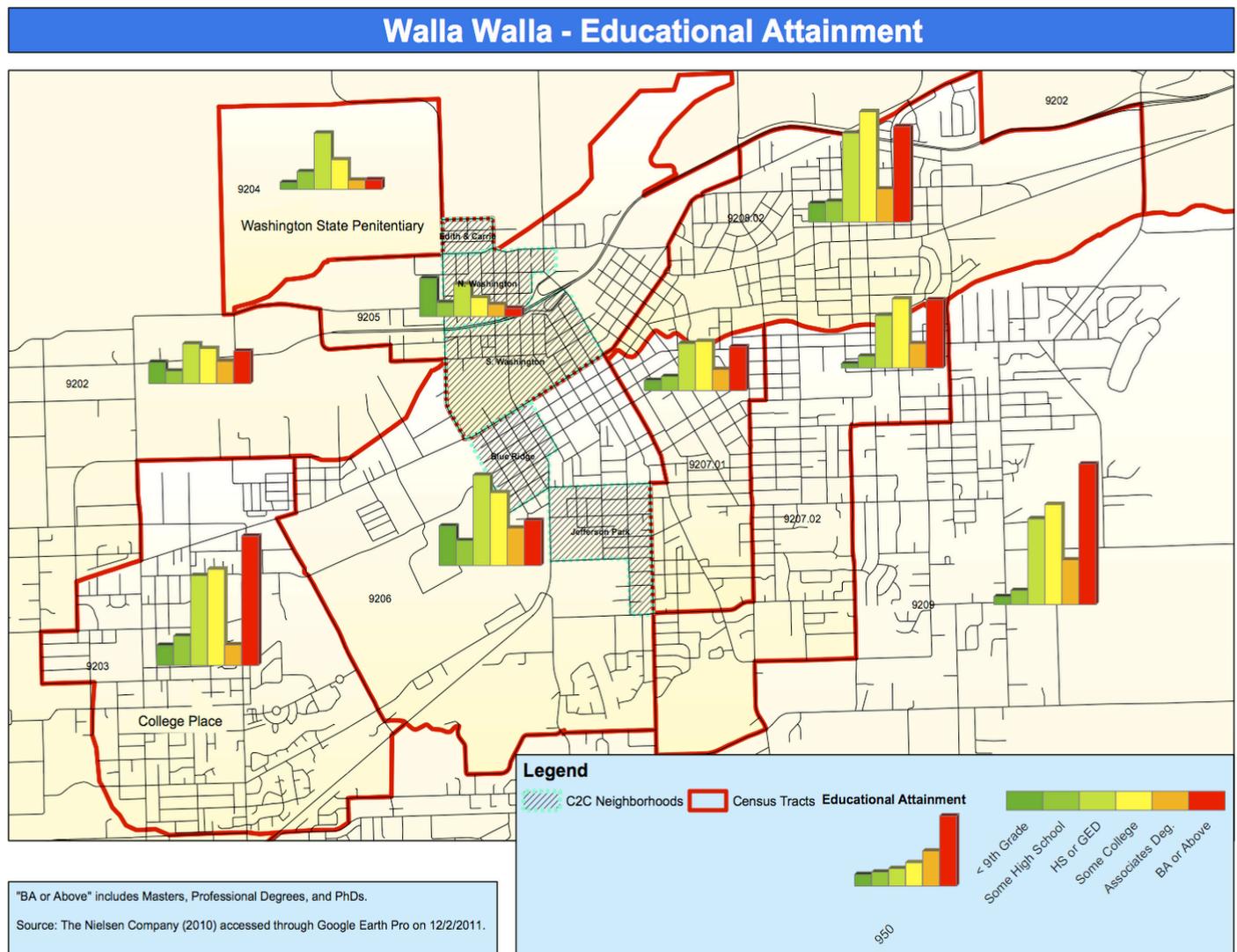
Chart 4: Walla Walla Education Attainment by Origin²⁰¹

In addition to origin having a substantial impact on educational attainment, current residence is also correlated with this basic service. The bar graphs on *Walla Walla - Educational Attainment* portray how much of the population above 25 years of age within a given census block has reached certain levels of education. The darkest green bars indicate individuals with less than 9th grade education, continuing up the spectrum until bright red, which indicates the achievement of an educational degree above a Bachelor’s degree. Advanced degrees include Masters, Professional Degree, and Doctorate recipients. Generally speaking, a census tract with higher orange and red bars indicates a more educated population. Census tracts are labeled with four digit numbers beginning with the numbers “92” (e.g. 9201).

While the extent of the census tracts goes beyond the borders of the C2C neighborhoods into other areas, the C2C neighborhoods still represent a significant percent of the census tract population. Using the census block population data from *C2C Neighborhoods – Population Concentration*, it was determined that Tract 9206,

²⁰¹ Source: U.S. Census Bureau, “American Community Survey 5-Year Estimates” (2010): B06009. Accessed by C. Weems through American Fact Finder on 11/14/2011: <http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_10_5YR_B06009&prodType=table>

which contains Blue Ridge and Jefferson Park has a total population count of 5,549 individuals. This means that C2C neighborhoods account for about 34% of the total population within Tract 9206. Edith & Carrie, North Washington, and South Washington make up 68% of the population of Tract 9205. While in both cases C2C neighborhoods make up substantial portions of the population, Edith & Carrie, North Washington, and South Washington are better represented than Blue Ridge and Jefferson Park, meaning that the levels of educational attainment within Tract 9205 more closely parallels the C2C neighborhoods than Tract 9206.



Map 9: Walla Walla Education Attainment. See Appendix for Walla Walla – Educational Attainment Data²⁰²

Both census tracts containing C2C neighborhoods have higher levels of individuals over 25 years of age without more than a 9th grade education than any other tract areas in Walla Walla. **Together, these two census tracts account for 65% of individuals with a 9th grade education or less living within Walla Walla City Limits** (Tracts 9205, 9206, 9207.01, 9207.02, 9208, 9209).

202 Source: Nielsen Company, Educational Attainment by Census Block (2010). Accessed by C. Weems through Google Earth Pro 10/16/2011.

Despite having the most individuals without an education exceeding 9th grade, the census tracts in which the C2C neighborhoods are situated have moderate levels of individuals with a high school diploma or higher, as well as individuals with some college experience. However, once past these education brackets, the number of individuals with Bachelor's Degrees or above decreases significantly. This data is largely congruent with our finding that low-income individuals in the C2C neighborhoods are likely to have some college experience, but are less likely to have attained a Bachelor's Degree.

Barriers to educational success

Prior research has shown that there is an association between educational attainment and ability to access living-wage jobs and consistent employment (Quigley 2005). Many interviewees expressed their difficulty with finishing high school. One woman expressed how it was difficult for her to finish high school because she had to work. For her, the priority was making enough money to pay bills and provide food and shelter for herself; school seemed secondary to work. However, now she realizes the advantage that finishing high school could afford her. She expresses her hopes to get a degree and feels that finishing high school would have been the "right choice"; it was easy for her to make the wrong choice to drop out of school, because "when you're young, sometimes you don't make the right choices."²⁰³ The right choice at the time was working and making a living for herself, but in hindsight she realizes how valuable an education is and could be for her.

When interviewed about educational experiences, individuals also described that another obstacle they faced to educational attainment is unexpected pregnancies and related responsibilities. 23-year old Yesi explains how she never was able to finish high school because she became pregnant and needed to work in order to make money and support her family. After dropping out of high school in San Diego, CA, she attempted to enroll in Walla Walla High School. Due to the difficulty of transferring credits, she ended up dropping out²⁰⁴. When she started to work towards a GED, she became pregnant and chose to build up capital before she had her baby than to continue with school. Yesi describes her desire to go back to school and get her GED in the interview, saying that once her little girl starts school, she will start that process again. She is disappointed in not having achieved this educational attainment, but her story evokes a theme of doing what needs to be done in order to "get by". Although finishing her GED certification is an important step in attaining living-wage work in the future, the many obstacles she has faced have forced her to make certain choices to solve immediate obstacles.

A hurdle to education attainment that is specifically applicable to immigrants and migrant workers is the transitory lifestyle they currently lead or have led in their past. Isa, a 26-year old Mexican immigrant, explains the various barriers that immigrants face in educational attainment, which tends to be as low as the statistics from the Census Bureau presented earlier which indicate that the majority of foreign born residents have less than a high school education. She explains how she did not receive any education in Mexico and received minimal education in the US. When she immigrated, she was placed in the 5th grade because of her age, despite her lack of previous education. Though the class was in Spanish, she had never learned to read or write and therefore was not able to participate in certain parts of class. The school placed her in special education classes after the first year because she was unable to learn to read and write within that time period. Isa and her family felt insulted and chose to take her out of school.²⁰⁵ The school system's inability to recognize Isa's needs has forced the family into a tough position: even though she had come here in order to

²⁰³ Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

²⁰⁴ Yesi Ramirez, interviewed by Hannah Holloran, Walla Walla, Washington, October 12, 2011

²⁰⁵ Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

get a good education, she did not want to feel embarrassed in order to do so. Isa also voices her disappointment in not having received a basic education, and the difficulty of not being able to read during her interview. She articulates her desire to get help, mainly to help her kids attain what she doesn't have: "I don't know how to read and I want to get help because I want to help my kids."²⁰⁶ In addition, Isa tells us she is frustrated that she cannot help her children with their homework.

A consistent theme within interviewee's experiences is the impact of transitory lifestyles on educational attainment. Our informant's narratives express how they faced difficulties in attaining a solid and basic education because of their transitory lifestyles. Moving from one place to another disrupts one's education, creating inconsistencies and obstacles that work against one's efforts to complete their basic education. For Yesi, attaining a consistent means to education proved to be difficult because she had to move from place to place within the United States; her schooling from one school to the next was disjointed and she had difficulty transferring credits. For Isa, immigration to the United States resulted in frustrating experiences with the school district as well. When the school did not place her in an appropriate level, she was unable to complete her education and did not gain even the basic ability to read and write. Her and her family's frustrations with the school ultimately led to her withdrawal from the system. Both Yesi and Isa experienced obstacles which prevented them from attaining a basic education, partly due to having to move from place to place throughout their childhood. There is a lack of research exploring the connection between transitory or migratory lifestyles, the experiences of our interviewees suggest that such barriers exist. For Isa and Yesi, her family's economic insecurity translated to their family's experiences with unstable housing, and multiple relocations. Having to move between different countries, states and cities presented barriers to realizing their educational goals.

Social services to improve educational success

Immigrants living in Walla Walla that have faced these barriers to education have also expressed their desire to stay in one place in order for their children to get a good education. They came to the US in order to better their and their children's education. They want their children to be able to attain more education than they were able to, and thereby make a better life for themselves. The Children's Home Society (CHS) is actively working in the farm labor homes to support this goal. CHS runs an after school homework club that connects students with mentors in order to help them with their homework and succeed in school. Mariela Rosas describes the after school homework club as being very helpful: "Having a child sitting one on one with an adult, even if that adult doesn't have the skills to be a teacher, that's the best we can provide to them... We [already] know its proof that in an average day [a student] has probably 3-4 minutes with the teacher. And they are lucky to have those minutes. Teachers don't have the time. They have overloaded populations in the classroom. They cannot sit one on one with the students. So having one adult sitting with a child for one hour a day [at the after school homework club], that's the success of this program."²⁰⁷ The potential educational attainment of these students is much higher than their parents thanks to their access to the CHS after school homework club and other educational programs and because they are settled in one place.

²⁰⁶ Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

²⁰⁷ Mariela Rosas, interviewed by Hannah Holloran, Walla Walla, Washington, November 9, 2011

***Characteristics of employment and labor force in Walla Walla:
differences in race, language ability and gender***

Less than a fifth of survey respondents are working full time. 43.4% indicated they are currently unemployed and 12.0% indicated they are working part time. Of those who are unemployed or working part time, 51.1% are seeking new or additional employment.²⁰⁸

Census data reports that in Walla Walla, 50% of the population is in the workforce, and 9% of this group are unemployed.²⁰⁹ Clearly, the survey data is not representative of Walla Walla as a whole in regards to employment. This is due in part to the sources of survey distribution: half of the surveys were conducted at food distribution events. Those most in need of food services and who qualify for such hand outs are often unemployed. Though unrepresentative of the greater population of Walla Walla, the results from this survey are important; they can be used to gain an understanding of the experiences and extent to which formal and informal support networks are utilized by the unemployed, a highly vulnerable section of the population, and of much interest to this report.

The survey revealed that of those that are unemployed, 64.3% of Latinos indicated they are not at all or not very able to write a resume, compared to 0% of Whites. 28.6% of Latinos indicated they are mostly or completely able to write a resume, compared to 100% of Whites. This is significant because resume-writing is an important component of the job-seeking process, especially for higher level positions.

Our survey results reveal a discrepancy between Whites and Latinos and their confidence in searching for job listings: of those who are unemployed, 42.8% of Latinos felt not at all or not very able to search for job listings compared to 21.4% of Whites. 57.1% of Latinos felt mostly or completely able to search for job listings compared to 71.4% of Whites. This could be influenced by the fact that a large proportion of the Latino population speaks Spanish as their first language and are not confident in their ability to speak, read or write in English: of the Latino population surveyed, over half (51.6%) felt not at all or not very confident in their ability to speak English; only 22.6% of Latino respondents felt somewhat to very comfortable in their ability to speak English. In addition, 80% of Spanish-speaking respondents who are currently looking for work do not feel confident in their English speaking ability. This has implications for the abilities and likely success of Spanish-speaking individuals in the context of job searching. Furthermore, it can be viewed as an obstacle to attaining a living-wage income: of the respondents that spoke Spanish at home, 60% were considered extremely to very low-income, meaning that their household income was 50% of the median income in Walla Walla or lower.

The chart below uses data from the American Community Survey to describe the current work force of Walla Walla. A higher percentage of Latina women are unemployed as compared to white women; of those who are part of the work force, 35% of Latina women are unemployed while only 5% of white women are unemployed. This discrepancy is true for men as well; of those who are part of the work force, 21% of Latino men are unemployed while only 4% of white males are unemployed.

208 N=83

209 Source: US Census Bureau

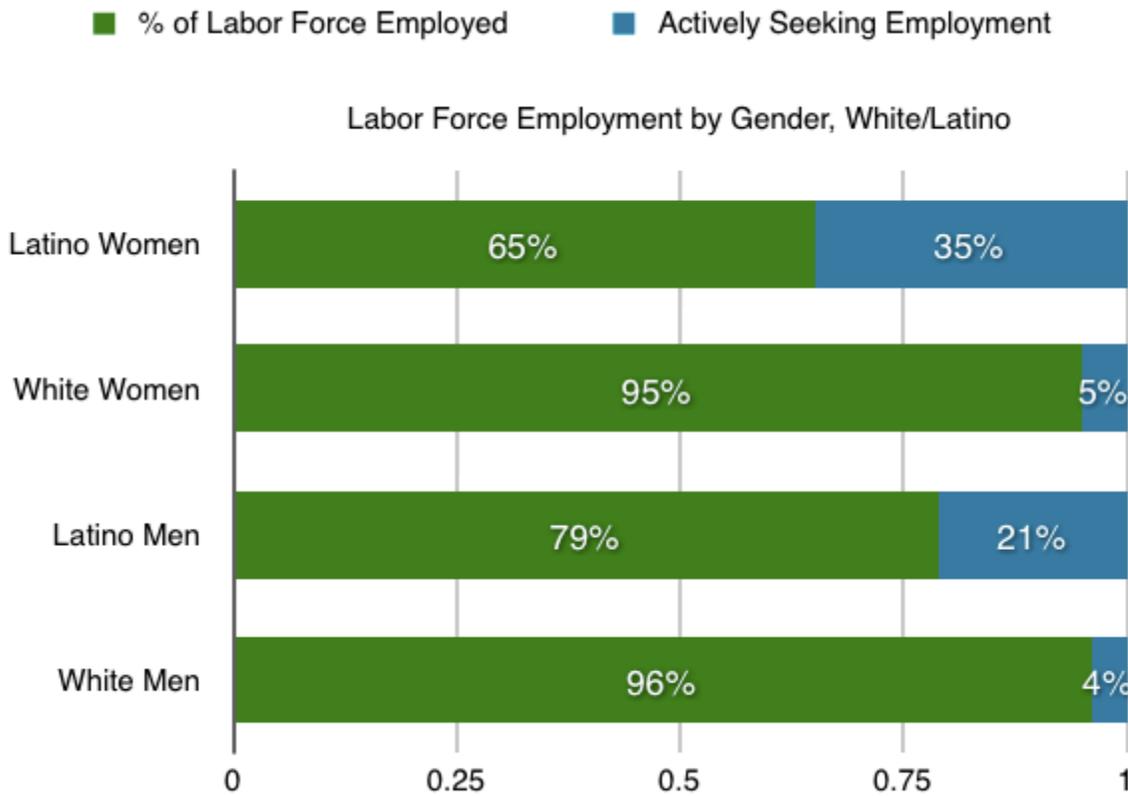


Chart 5: U.S. Census Bureau, “American Community Survey 3-Year Estimates” (2010): B23002H-I. Accessed by C. Weems through *American Fact Finder* on 11/25/2011: http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_10_3YR_B23002H&prodType=table

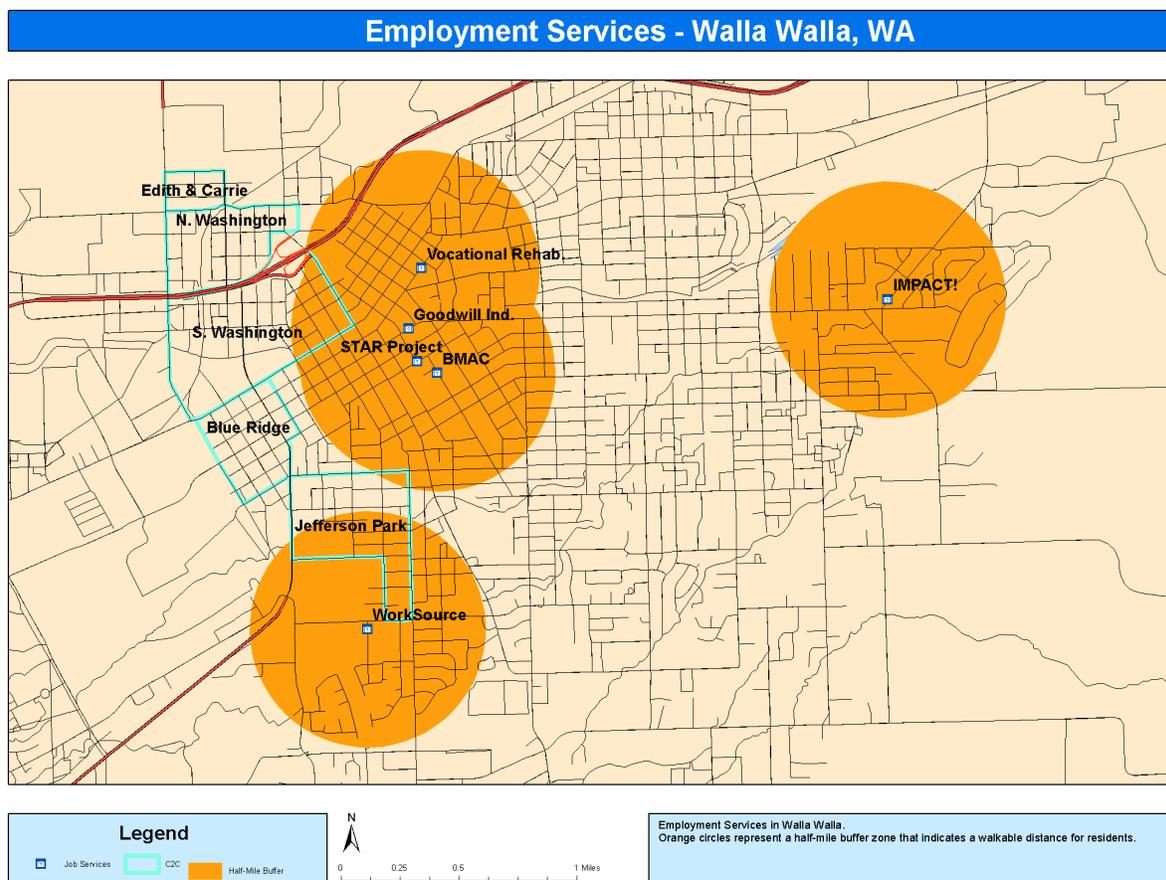
Because Latino men and women make up the majority of the unemployed population in Walla Walla, Latino men and women are most likely less able to access employment services online or find job listings. Latino men and women suffer from higher unemployment rates than white men or women in Walla Walla, and our survey results find that Latino men and women respondents felt less confident in accessing employment services or job listings.

Employment services in Walla Walla

Map 10 (below) highlights the locations of employment service locations in Walla Walla. The orange circles indicate a half-mile crow-fly buffer similar to that used by Frank et al 2004 to determine walkability. While all services are within an estimated ten minute driving time of the Commitment to Community Neighborhoods, few residents in the neighborhoods are close enough to access these services on foot. By cross-referencing the crow-fly buffers with population counts found in the map “Total Population Concentration” we can determine how many residents are feasibly able to access these services on foot.

In Blue Ridge, approximately 334 individuals or 30% of all residents live within the crow-fly buffer. In Jefferson Park, approximately 513 individuals or 45% of all residents live within the buffer. Edith & Carrie, North Washington, and Blue Ridge are all excluded from the buffer areas. Additionally, Edith & Carrie and North Washington are separated from these services by Highway 12. Overall, only 22% of Commitment to Community Neighborhood residents live within walking distance of an employment service.²¹⁰

We believe this finding to be significant because Frank et al 2004 found that proximity to public services such as schools and libraries was directly related to their active usage by community members. While driving to any of the locations drawn on the map above or listed below is feasible with the assistance of a vehicle, extra distance outside of the buffer area could pose a barrier to continued engagement for individuals with limited transportation resources.



Map 10: Employment Services

210 Note: Counts are approximate due to the fact that buffer zones cut across census blocks and therefore render only partial population counts.

Job Search Organizations:

Vocational Rehabilitation: provides individualized employment service, technical assistance, training to employers, and counseling to help individuals with disabilities participate fully in their communities and become employed.²¹¹

Impact: A life transitions program, IMPACT! provides multi-purpose services to individuals who have been displaced from their careers as unpaid homemakers including life skills classes, job readiness services such as resume writing workshops, referrals and partnerships, support groups, and job development and placement.²¹²

Star Project: A non-profit organization, the STAR Project, which stands for Successful Transition and Re-Entry, provides persons being released from incarceration with the tools to successfully re-integrate into society.²¹³

Goodwill Industries: provides facility-based employment-training services for individuals with disabilities in Walla Walla. Services include job-skills training at a Goodwill retail store, working side by side with retail and production employees under the supervision of Program Services training staff, and individual planning to measure progress and development leading toward attaining the skills necessary to move to community employment.²¹⁴

WorkSource: A comprehensive One Stop Career Center providing technology-supported self-service, one on one consultations and group activities, phones, free internet, resume writer access, and a full range of jobseeker and employer services.²¹⁵

This map demonstrates that several of the employment organizations and services located in Walla Walla are in close proximity to the Commitment to Community Neighborhoods.

Employment services in Walla Walla have started using the Internet as the main way to provide access to their services. In addition to their offices, employment services have an online website where individuals can access employment opportunities, upload their resume, and fill out applications for jobs and many other services. While this is helpful for individuals who can access the Internet, it ignores and more deeply entrenches unemployment for individuals who cannot access the Internet. Of the 34 unemployed survey respondents, 44.4% do not have access to the Internet and 29.4% are not very or not at all confident in their ability to access job listings. Our survey results show that employment services' use of the Internet, their primary mode of information distribution, does not reach almost half of the unemployed population in our survey pool. This is significant because the employment services' target group is the unemployed. Because of the high representation of unemployed persons in the survey, this finding is especially descriptive of the unemployed individuals access to certain resources.

Of those who are unemployed, 53.8% of Latinos surveyed felt not at all or not very able to use the Internet. 37.5% of Whites felt not at all or not very able to use the Internet. 23.1% of Latinos felt mostly or completely able to use the Internet compared to 50.0% of Whites. Our survey results reveal that the issue of limited

211 Washington State Department of Vocational Rehabilitation <http://www.dshs.wa.gov/dvr/Default.aspx>

212 Walla Walla Community College: Programs and Services <http://www.wwcc.edu/CMS/index.php?id=1008>

213 Washington Secretary of State: Charity Programs http://www.sos.wa.gov/charities/search_detail.aspx?charity_id=24535

214 Source: Goodwill Industries of the Columbia http://www.goodwillotc.org/mission_services/walla_walla/

215 Source: CareerOneStop [http://www.servicelocator.org/search/detail-info.asp?](http://www.servicelocator.org/search/detail-info.asp?Category=CenterInformation&ParentID=1900951&state=WA)

[Category=CenterInformation&ParentID=1900951&state=WA](http://www.servicelocator.org/search/detail-info.asp?Category=CenterInformation&ParentID=1900951&state=WA)

access to employment resources is not shared equally: a higher percentage of unemployed Latinos felt less confident in their ability to use the Internet than unemployed Whites.

The survey revealed that of those who are unemployed, 29.4% felt not at all or not very confident in their ability to find job listings. Broken down further, 48.2% of Latino respondents and 21.4% of White respondents felt not at all or not very confident in their ability to find job listings. Our findings reveal that there is a racial discrepancy between White and Latino populations in their confidence to search for job listings. This is an important part of the employment process, and our findings suggest that Latinos face a barrier in their lack of confidence in finding employment. This also suggests that this might be an area of need for the Latino community within the unemployed community.

Understanding the limitations of our survey, we looked at client-use data provided by the Washington State Department of Social and Health Services and found that there is a lack of utilization of state-provided and state-funded employment services (such as vocational training and assessments, job skill building class and programs, and placement support programs) among the unemployed population of Walla Walla county. The published DSHS client use data for 2010 show that 180 clients were assisted through one of the several state-funded and state-provided training programs.²¹⁶ Overall, when compared to the number of unemployed individuals that are currently part of the workforce (2664 individuals), we find that the entire unemployed community is being under served: the state-based programs served 6.76% of this population. The potential need for these services is much greater than the current use rate.

In place of these formal services, some individuals have created an informal network of employment information. A consistent theme regarding employment in the interviews was their use of informal networks to find jobs in place of formal organizations. Jessica explains, “My mom worked [at Rite Aid] so I knew everybody and the manager, and so that's how I got that job.”²¹⁷ Jessica used the relationships she had made with the individuals where her mother worked. Sometimes, employment opportunities arose because of personal friendships, as in Yesi's case: “I had already known some of the employees here [at Tony's Sub Shop] because they were friends of mine or friends of my brothers, so they kind of just put in a heads up. Then my boss... he was kind of like, "Ok, we'll give her a shot" and then after that he hired me...”²¹⁸. Both of these individuals relied on the connections of their friends and family in order to find a job. They were able to navigate the job market without having to formally seek help because their friends or family help steady jobs.

Both the survey and the interview make it clear that unemployed, low-income individuals are less likely to be able to access the Internet or find job listings. In place of formal services, these individuals turn to informal networks of their friends and family to find a job.

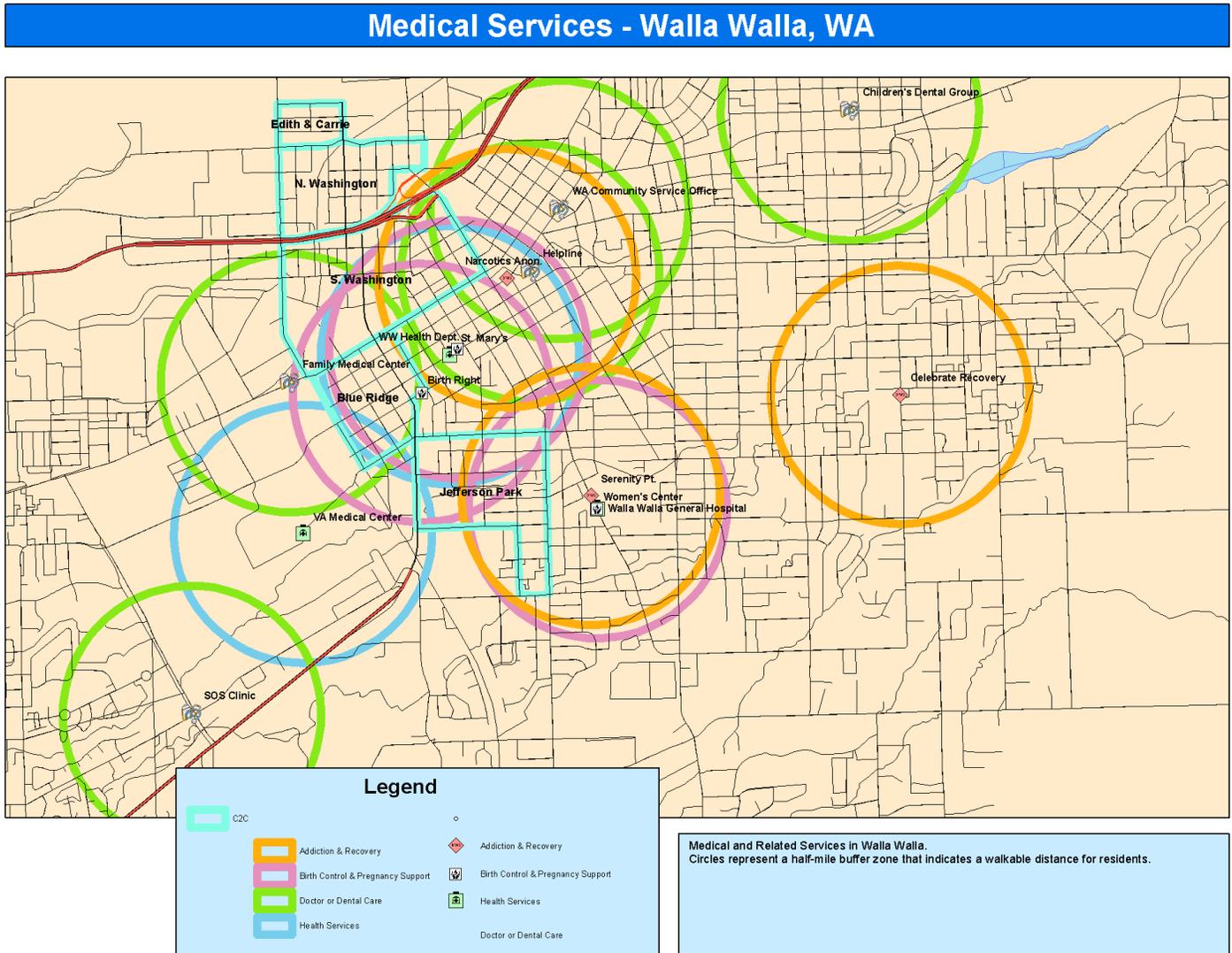
216 The programs listed as employment services in the Department of Social and Health Services client-use data are Vocational Rehabilitation Case Management, Medical and Psychological Services (in relation to employment), Placement Support, Support Services, Training, Education, and Supplies, and Vocational Assessments (Job Skills). Source = WA State DSHS (http://clientdata.rda.dshs.wa.gov/ReportServer/Pages/ReportViewer.aspx?%2fCSDBAnyYear%2fLocalClientSvc_RaceCrosstab)

217 Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

218 Yesi Ramirez, interviewed by Hannah Holloran, Walla Walla, Washington, October 12, 2011

III. Medical Services

Map 11 demonstrates that in the neighborhoods of South Washington, Blue Ridge, and Jefferson Park, nearly all residents live within walking distance of Birth Control & Pregnancy Support, Doctor and Dental Care, and Hospital Health Services. Drug addiction recovery services were within partial walking distance of several neighborhoods. Cross referencing the buffer zones with the map “Total Population Concentration” yields an approximation of how many residents are able to walk to addiction and recovery services.



Map 11: Medical Services

In the neighborhood of South Washington, 847 individuals or 76% of the population lived within walking distance of an addiction recovery service. In the neighborhood of Jefferson Park, 893 individuals or 78% of the population lived within walking distance of an addiction recovery service. However out of Edith & Carrie, North Washington, or Blue Ridge, none are within close proximity to an addiction recovery service as denoted by the buffer.

Even more striking is the finding that individuals living in Edith & Carrie as well as North Washington do not fall within any buffer for a medical service. While all of these services are readily accessible by car, the ease with which they can be accessed is likely to have an effect on how often individuals choose to take advantage of these services.

Family Medical Center: has a staff of six physicians focused on family practice and sees 150 patients per day. The practice also has staff with Spanish speaking skills for family of limited English proficiency.²¹⁹

Walla Walla Health Department: a part of the Public Health Network that works closely with state and federal agencies to provide programs and essential services at the local level, offering a variety of services including vaccinations, food service permit renewals, food establishment and water recreation facility inspections.²²⁰

Washington Community Service Office: offers a variety of health-related services including family planning services, the First Steps program, Basic Food program, and medical assistance programs such as Apple Health for Kids and Basic Health. ²²¹

Children's Dental Group: provides pediatric dentistry to children up to age 17.²²²

Helpline: a primary screening and referral agency in the Walla Walla Valley for emergency social services. It assesses the needs of individuals and families in crisis and assists them through direct services and advocacy. Direct health-related care is provided for non-narcotic prescriptions.²²³

Narcotics Anonymous: six home groups in Walla Walla provide support and treatment programs for individuals recovering from addiction. Free, open meetings occur twice-daily at the First Congregational Church.²²⁴

Celebrate Recovery: a Christian based 12 step program for addiction treatment where individuals can overcome and remain free from drug addiction, hurts, habits and hang-ups through thorough recovery of physical, mental, emotional, social, and spiritual aspects of the addict.²²⁵

Providence St. Mary Medical Center: a full-service hospital, providing multiple services including cardiac care, support groups, and surgery, and specialized care in the Family Birth Center, Community Breast Center, Regional Cancer Center, Sleep Disorders Center, and Rehabilitation Center, to name a few.²²⁶

Serenity Point: a family owned Limited Liability Company, serving those with addictions through counseling services and a 12-Step Philosophical Program.²²⁷

V.A. Medical Center: The Jonathan M. Wainwright Memorial VA Medical Center serves veterans residing in a 42,000-square-mile primary service area, with services including outpatient primary care, outpatient mental

219 Health Grades <http://www.healthgrades.com/group-directory/washington-wa/walla-walla/family-medical-center-8f67e9c6>

220 Walla Walla County <http://www.co.walla-walla.wa.us/departments/PHD/index.shtml>

221 Washington State Department of Social and Health Services <http://www.dshs.wa.gov/onlinecso/medical.shtml>

222 Children's Dental Group <http://www.superpages.com/bp/Walla-Walla-WA/Karmy-Ramsey-L2086797969.htm>

223 Helpline <http://helplineww.org/>

224 Narcotics Anonymous Meetings in Walla Walla <http://www.bluemtnarea-na.org/wallawalla.html>

225 Drug Rehab Center Hotline <http://www.drug-rehab-center-hotline.com/celebraterecovery.html>

226 Providence <http://www2.providence.org/wallawalla/services/Pages/default.aspx>

227 Serenity Point http://www.serenitypointcounseling.com/index.php?option=com_content&view=article&id=91&Itemid=173

health, specialty care, substance abuse residential rehabilitation, HUD/VASH228, and Compensated Worth Therapy (CWT) programs.²²⁹

Walla Walla General Hospital: part of Adventist Health, a faith-based, health care delivery system, Walla Walla General Hospital is a not-for-profit, 72-bed acute care facility, offering a full range of inpatient, outpatient and emergency services.²³⁰

Birth Right: an emergency pregnancy service that offers free pregnancy tests, support and encouragement to women in the community.²³¹

Women's Center: gastroenterology physicians · gynecology

Walla Walla Clinic: a multi-specialty medical clinic offering more than 40 primary care and specialty physicians, an in-house laboratory, imaging, therapeutic and diagnostic services, and the community's first Ambulatory Surgery Center.²³²

SOS Clinic: an urgent care facility that provides quality walk-in treatment for those in the Walla Walla Valley who have no health insurance.²³³

Health and access to medical services dictate an individual's ability to participate in their home, neighborhood, and work space. Exploring access to and agency within medical services will help us better understand what role medical services play in an individual's experience in poverty. The bar charts below are derived from survey data and have been supplemented with narratives from individuals. Insurance and informal networks surrounding medical services are integral in understanding the costs of medical services and how poverty and medical services play off one another.

228 The HUD-VASH program is a partnership between the Department of Housing and Urban Development (HUD) and the Department of Veterans Affairs (VA Supported Housing) to provide subsidized housing vouchers and supportive case management to eligible homeless Veterans (http://www.paloalto.va.gov/docs/HUDVASH_Brochure.pdf)

229 U.S. Department of Veteran Affairs <http://www2.va.gov/directory/guide/facility.asp?id=142>

230 Adventist Health. Welcome to Walla Walla General Hospital. (2011) Retrieved from <http://www.wwgh.com/>

231 Washington Secretary of State http://www.sos.wa.gov/charities/search_detail.aspx?charity_id=488

232 Walla Walla Clinic <http://www.wallawallaclinic.com/AboutUs.html>

233 SOS Health Services <http://www.soshealthservices.org/index.php?id=2>

Most survey respondents felt at least somewhat confident in their ability to access medical and mental health services.²³⁴ When asked if they have sought assistance from anyone or any organization in accessing medical services, 62.5% reported having sought some kind of assistance. Of those that sought help with accessing medical services, **77.8% were successful in receiving the help they needed.**

There was a statistically significant correlation between one's success in receiving assistance and one's ability to access medical services²³⁵, meaning that people who receive help or assistance in accessing both medical services are also more confident in their ability to access medical services.

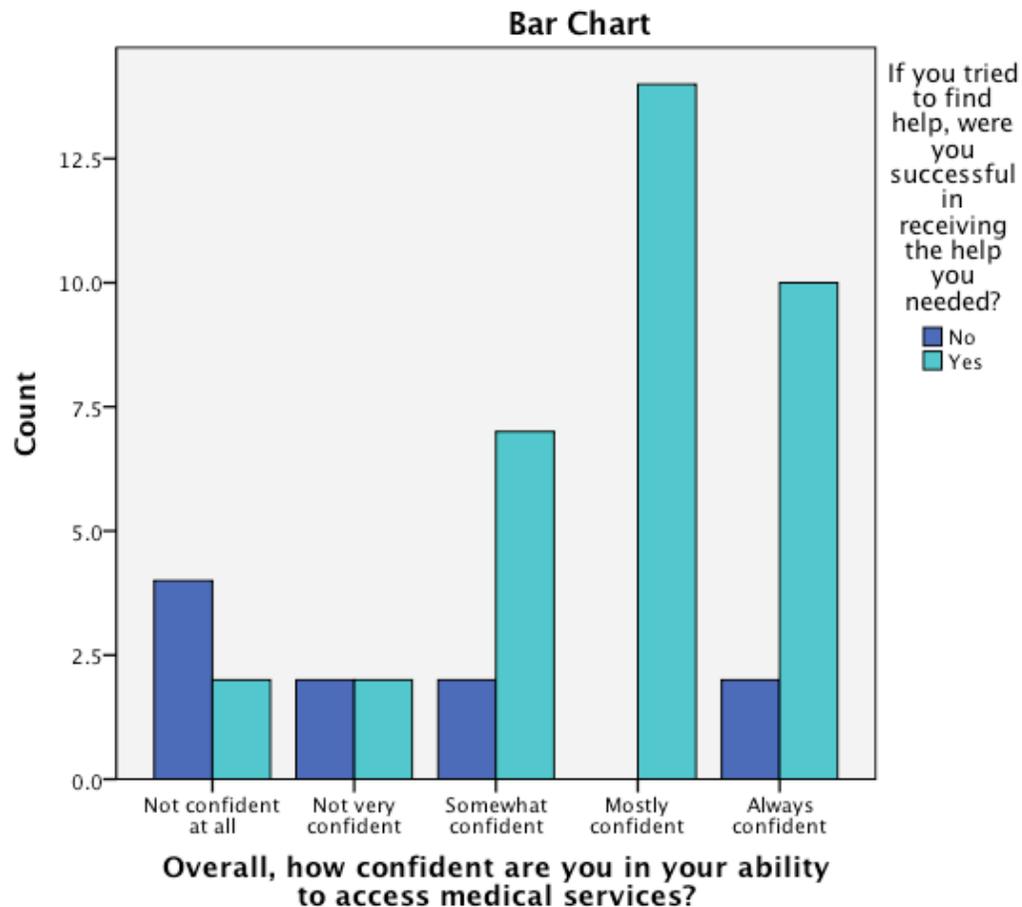


Chart 5: There is a statistical correlation between one's success in receiving assistance and confidence in accessing medical services.²³⁶

²³⁴ 80.8% of respondents felt at least somewhat confident in their ability to access medical services. 83.1% of respondents felt at least somewhat confident in their ability to access counseling or other mental health services.

²³⁵ Cramer's v = .891 @ .000

²³⁶ N= 45, Pearson Chi-Square=12.857 @ .012, Phi = .535 @ .012, Cramer's v = .535 @ .012

Of the respondents who were at least somewhat confident in their ability to access medical services, 88.6% have been successful in receiving help:

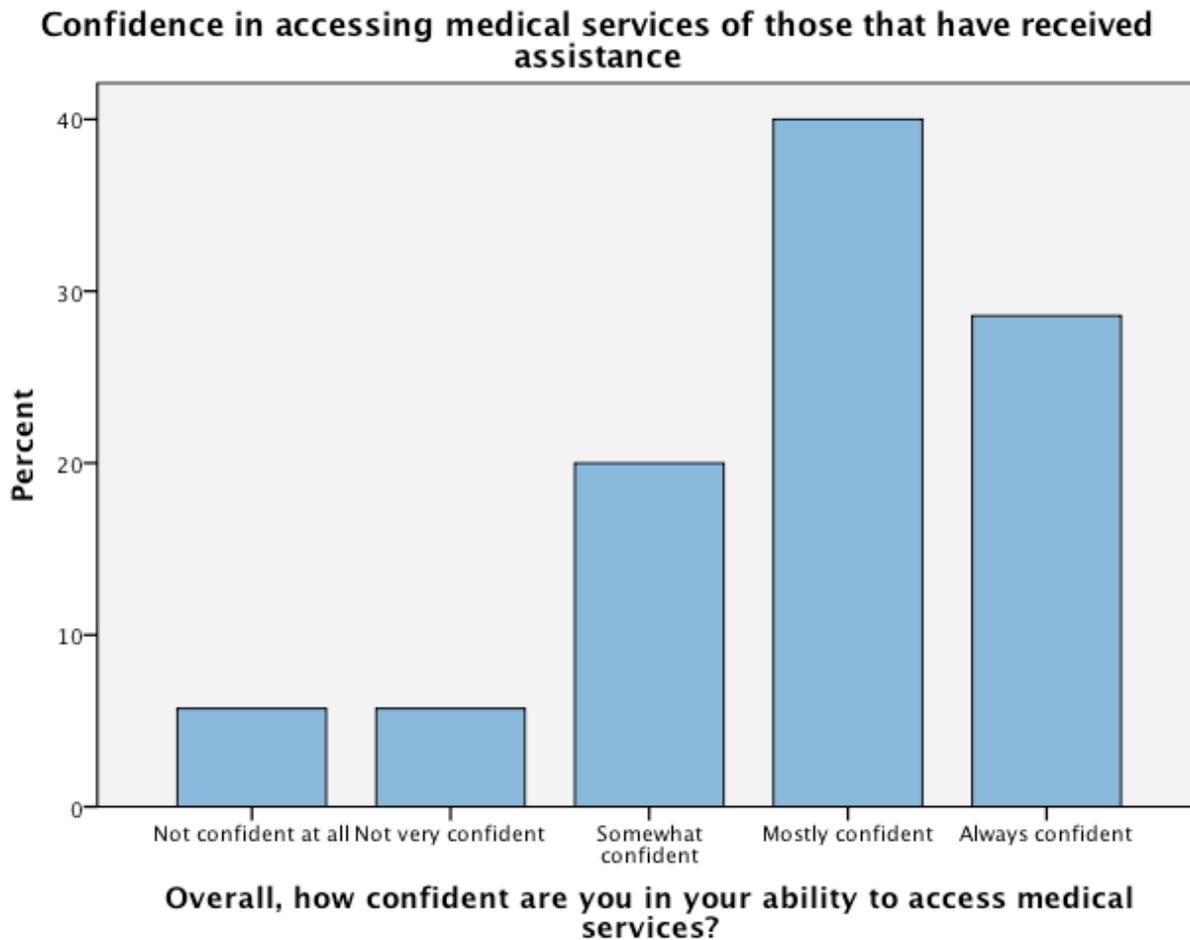


Chart 6: Confidence in accessing medical services of those that have received assistance

There is no significant discrepancy in survey results between races in one’s perceived ability to access medical services, including counseling or mental health services. Rather, Latinos and non-Latinos share similar perspectives: in general, they feel that are at least somewhat confident in their ability to access health services. There was also no significant difference between racial groups in whether or not one has sought or received assistance with accessing physical or mental health services. Both the majority of Latinos and Whites sought medical care with the help from formal organizations. In regards to language ability, moreover, there is no correlation between one’s ability to speak English and whether or not one feels confident in accessing medical services.

Use of formal assistance with medical services

Of those that received assistance with accessing medical services, formal networks such as organizations were the most common form of support. **71.4% of respondents have received assistance with medical services through a formal organization such as a government program.**

The importance of formal support services in Walla Walla is demonstrated through Yesi and her family’s experience in receiving assistance for their daughter’s medical problems. Yesi has a daughter who was born

with a murmur in her heart. With formal support through the use of extra medical coupons, Yesi is able to provide her daughter with the medical attention she needs. With proper medication, her daughter's condition improved significantly and eliminated the need for open-heart surgery. Furthermore, the medical coupons allow her daughter to see specialists in the local area, making it easier for them to keep appointments. Yesi is grateful for the support they receive, acknowledging: **“if we didn't have the extra medical coupons from the state, then we actually wouldn't be able to pay for it.”**²³⁷

Use of informal assistance with medical services: the importance of personalized care

Informal sources of medical services are utilized as well: 28.6% of survey respondents received assistance through informal support networks such as family or friends.

Other interviewees stressed the importance of informal services and home remedies. Christina's husband, Moses, talked about his grandmother, who was a mid-wife. Instead of paying for doctors, his grandmother came to deliver the family's babies. His grandmother, who knew about natural home remedies, also treated the ailments of family members. Moses seemed to appreciate the simplicity and practicality of the treatment: “if you were having problems with this, and then okay, take this” and he felt reassured in the knowledge that these remedies had been used and passed down through her family: “a lot of the kids and grand-kids were born by the hands of their grandma.”²³⁸ Another interviewee, Isa, said that she, too, relies on family medicine. For instance, when her boyfriend was sick and out of work for a week, she went to her mother for advice about what kind of home remedy to use rather than taking him to the doctor. Tesdry, another interviewee, also shared her tendency to avoid the doctor by taking care of himself at home: “I normally try to do the whole cut back on everything that could bring down my resistance as best as I can. I sleep more.”

While Christina and Tesdry may use informal support services by choice, preferring the methods of their family and focusing on preventative care, **Sandy felt forced to turn to informal support services after a having negative experiences with health care providers.** When she tried to explain her husband's condition to the medical staff at a local hospital, she felt ignored: “The hospital [was] trying to rush me off. They wanted him to go to bed and I told him, “He can't go to bed. He sleeps sitting up.’ That's all he did, he sat in the chair and slept all the time. He didn't go to bed. And they couldn't understand that. They wanted him in bed. And I told them he can't do it.”²³⁹ Jessica was also put off by the poor quality of care she received when accessing medical care. When her husband went into Providence St. Mary's, the hospital staff at St. Mary's seemed impersonal and “pushed him along like he didn't exist basically.”²⁴⁰ For Jessica, **personal care and connections with doctors are important.** She drives to Waitsburg, a small rural town located about 30 miles outside of Walla Walla, in order to meet with someone who she feels treats her “like a friend” when she goes in to see her: “She sits down with you and listens to what you have to say, asks you how it's been, how the medications are working, if we need to try something else. And she actually, you know, does research and tries to come up with solutions instead of just pushing” a patient along. The individual attention and care that Jessica's doctor provides makes the drive to Waitsburg “definitely worth the time”; this illustrates the importance of trust and feeling attended to in terms of one's satisfaction with the medical care one receives.

237 Yesi Ramirez, interviewed by Hannah Holloran, Walla Walla, Washington, October 12, 2011

238 Moses, interviewed by Hannah Holloran, November 10, 2011

239 Sandy, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

240 Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

Another interviewee expressed similar sentiments regarding the importance of personal care. Instead of going to the hospital, which felt impersonal to her, Jessica saw a woman at the family medical center who made her feel important and listened to: “She was really caring, and any questions I had she answered, and she was there for me, like if I called or anything, she would always call me back.”

Interpretation Services

When controlling for race, our survey results show that there is no association between one’s ability and one’s race (Latino or non-Latino), or between one’s confidence in accessing medical services and race. Race was not a factor in seeking and receiving help and using formal and informal networks; Latinos and non-Latinos both used informal and formal networks in similar proportions. We would expect that there would be a lower use rate of formal services by non-English speakers due to previous literature on language barriers. Yet, Spanish-speakers had comparable levels of confidence as their English-speaking counterparts. The relatively high level of confidence among Spanish-speaking individuals in their ability to access medical services could be due to the various resources available. For example, the Washington State Department of Social and Health Services provides medical interpreters for individuals who need language assistance in hospitals (Washington Health Care Authority 2011).²⁴¹ Interpreters in the Walla Walla County are able to help individuals who speak the following languages: Cambodian, Chinese, Korean Laotian, Russian, Spanish, and Vietnamese. These services are funded by the state through mandates to provide interpretive services in hospitals and health care facilities for those who qualify. Such services and ability to communicate with immigrants and non-English speakers can go a long way in making people feel comfortable with service providers. Moreover, increased comfort suggests increased confidence and use of certain services over others. This was the case for Jessica, who consistently seeks care from medical providers who she trusts and feels comfortable with, over 20 miles away.

Access to insurance: differences in employment, age, country of origin and education

Insurance coverage is a fundamental piece in medical service access and provision. Many interviewees expressed frustration with insurance and as a result faced barriers to receiving the medical care they needed. Jessica and her husband looked into insurance through her husband’s employer, but it was too expensive. She says, “until we paid \$2,000, which was...the deductible part...they didn’t pay anything. I would be paying them, and be paying my doctor bills any ways because I don’t use that much, even in a whole year.” Jessica also has experience with state medical insurance. She says, “I applied for medical through the state. My kids qualified, but we didn’t...I was just happy the kids got medical, cause their checkups and everything would be expensive without it. So it’s nice that they pay for that. Their shots and everything, and when they’re sick we don’t have to worry about that.”²⁴²

According to Census data, of the total civilian non-institutionalized population of Walla Walla, only 16% do not possess health insurance. While the rate of overall uninsured individuals is low, **the demographic of unemployed individuals has an extremely high rate of un-insured (59.5%)**. The graph below demonstrates the high rate of unemployed persons lacking health insurance. These are individuals who are actively seeking employment, rather than those who are discouraged workers or retired, and thus out of the workforce. This distinction is important because many of the individuals who have retired from the

241 Washington State Health Care Authority, Interpreter Services Customer Brochure, November 2011. Accessed by Hannah Holloran 12/8/2011. <http://hrsa.dshs.wa.gov/interpreterservices/Brochure.htm>

242 Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

workforce are eligible for Medicaid, and therefore lower the average number of uninsured for this job category.

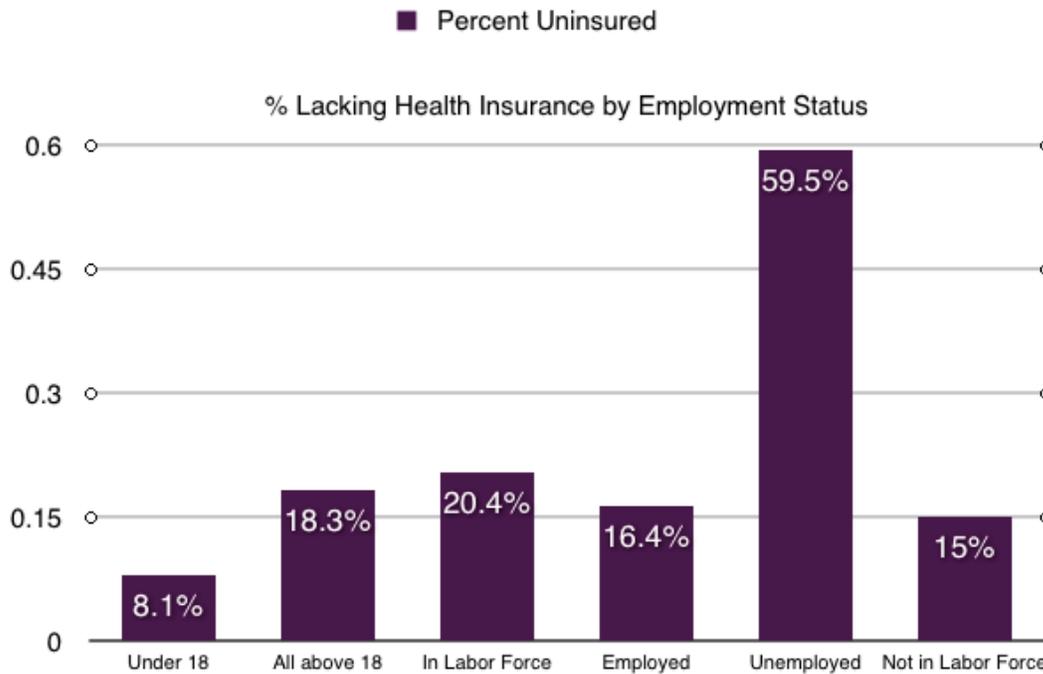


Chart 7: U.S. Census Bureau, “American Community Survey 3-Year Estimates” (2010): S2701. Accessed by C. Weems through *American Fact Finder* on 11/25/2011: http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_10_3YR_B23002H&prodType=table

Accessibility of medical coverage for kids is a consistent theme in interviews regarding medical services. Under Washington State’s Apple Health for Kids Program, all children in families below 200% of the Federal Poverty Level are provided free coverage. Families that fall slightly above that level may also be eligible for the same coverage at lower cost. While eligibility requirements often screen out many needy individuals, the wide coverage for children is vital for many families. Jessica was able to access basic, preventative care for her children, without worrying where the money would come from. In Walla Walla county, the Apple Health program covers 5,460 children. Other programs within the Washington State Department of Health and Social Services provide medical coverage in other important ways: 2,815 people are served under the Family TANF medical program; 1,677 are served under Persons with Disabilities program; still other programs provide coverage, raising the total individuals covered by public programs in Walla Walla County to 12,012. Of a total population of 59,200, the proportion that relies on state medical insurance is high: 20% receive coverage from state programs through the Department of Health and Social Services.²⁴³ It is encouraging that the percentage of the population covered by state-funded programs is comparable to the poverty level of Walla Walla county, which was 19.7% in 2009.²⁴⁴

Place of origin and citizenship status were also decisive factors in determining whether or not individuals were covered by health insurance. People in the categories of foreign born (36.4% uninsured), naturalized citizen (36.3% uninsured), and non citizen persons (36.4% uninsured) all tended to lack insurance coverage. By comparison, the rate of lacking health insurance for US-born citizens was only 13.3%. Non-native

²⁴³ Source: Washington State Department of Health and Social Services 2010

²⁴⁴ Source: US Census Bureau 2009

residents are nearly three times more likely to not possess health insurance. Washington state’s Apple Health for Kids program, is significant in its commitment to providing coverage for children of immigrant families who do not qualify for federally funded Medicaid.

Finally, education was also a decisive factor in determining the likelihood of health insurance coverage. (For discussion of the interrelation between educational attainment and race/ethnicity, see p.6) Within levels of education, the attainment of a high school degree was the most crucial factor associated with the attainment of the health insurance: **individuals with a high school degree or GED equivalent were nearly 15% more likely to acquire health insurance than their peers without a diploma.**²⁴⁵

Mental Health Services

Overall use of mental health services

The majority of survey respondents, 64%, indicated they were mostly or always confident in their ability to access counseling or other mental health services. **44.9% of survey respondents have sought assistance accessing counseling or other mental health services.** The success rate for those who have sought assistance was high; 86.1% of respondents who have sought assistance reported that they were successful in receiving the help they needed.

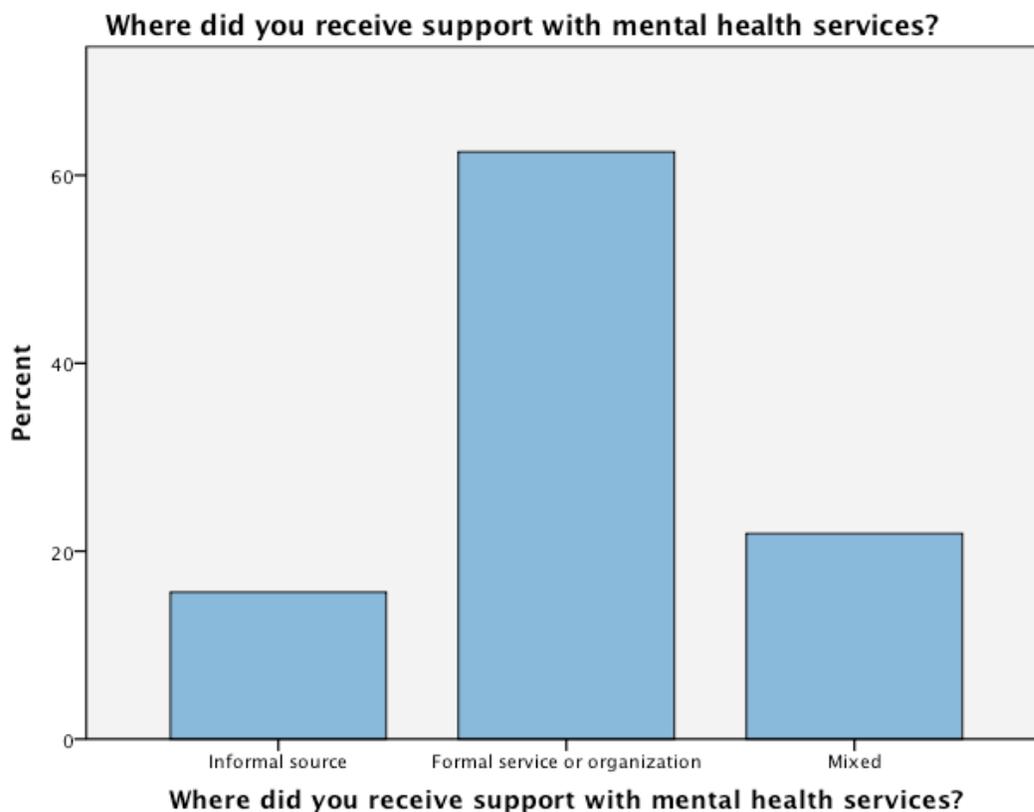


Chart 8: Responses to the question, “Where did you receive support with mental health services?”

84.4% of survey respondents who have received assistance with mental health services have done so through a formal organization or service outside of their familial or personal networks. 21.9% of respondents used both informal and formal sources for assistance with mental health services. When asked about their

245 Source: American Community Survey 2010

experiences with mental health service providers, many explain positive interactions with service providers and counselors. This supports the results of high success rate for receiving help when sought after produced in the survey.

Formal sources for mental health support

Cristina explains her positive experience with counseling she accessed for herself and her oldest daughter through Child Protective Services while she was going through a divorce. She says that “it really helped the both of us at that time because she was a teenager when Moses and I got together... They had some counseling sessions with her, and then we got together and had some sessions, and the counselor pretty much told me ‘Christina, she’s manipulating you and you need to not give in’. And that’s what I had to do... But it helped a lot, even if it was just a few counseling sessions... And [now] we’ve got a wonderful relationship.”²⁴⁶

Informal sources for mental health services

31.6% of survey respondents have received assistance with mental health services through informal support sources like family, friends or neighbors. In interviews, community members express their reliance on informal sources for mental health and emotional support. After losing her husband, Sandy talks about taking care of her mental health by depending on her personal friend: “I was married for 43 years and it was hard. It’s still hard. I still have problems with it. Thank goodness for Warren; he was a big help.”²⁴⁷ Sandy depended on her friend as a source of emotional support during hard times. Tesdry affirms the necessity for these kinds of informal support: he says, “Friends are really important for maintaining strong and sane mental health.”²⁴⁸

Mental health services are also provided informally through childcare and after school programs. Cynthia, the director at Community Center for Youth (CCY), explains how the staff also monitor children’s emotional well-being and social interactions. She describes one incidence when a girl was being bullied on Facebook and contacted a staff member about it. She says that the staff member “told her to come to CCY that night and they talked about it. They saw who the person that was bullying was, and they talked to her and brought them together and tried to work out their differences.” She explains that this kind of informal counseling is “very helpful because...we’ve had a lot of reports of kids, especially in middle schools, they’ll get in fights and it’ll just escalate into, you know, even to fist fights.” Though CCY doesn’t offer formal therapy services, she says that “just listening to someone, and just being able to talk to someone with a master’s in social work, at least they can say, ‘No, I hear you’, and ‘Oh, let’s talk about this. It’s not official therapy, but it can be therapeutic. And it can be better than someone’s neighbor who might say, ‘Yeah, you should just give that kid a hundred lashes’.”²⁴⁹

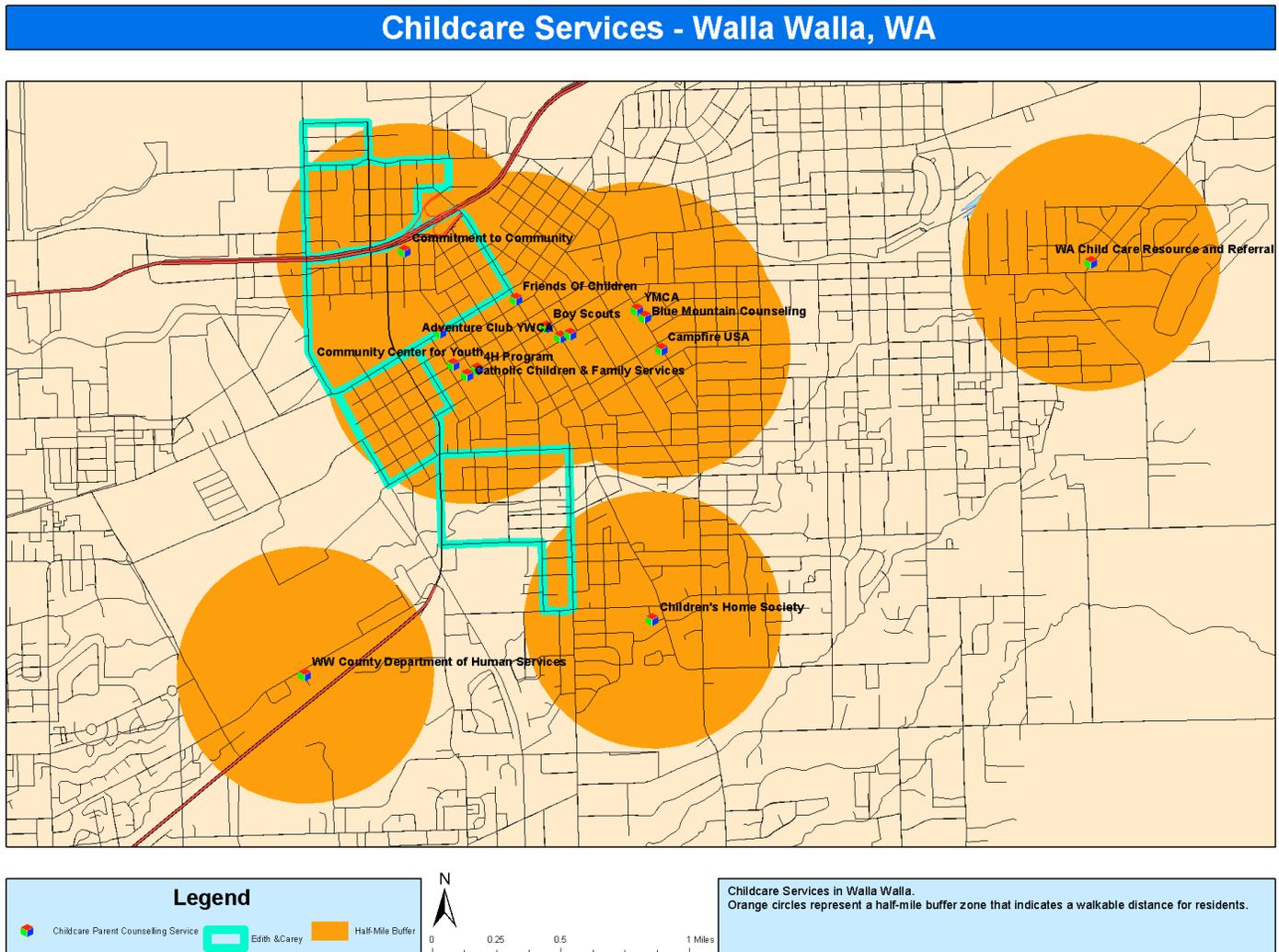
246 Christina, interviewed by Hannah Holloran, November 10, 2011

247 Sandy, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

248 Tesdry, interviewed by Hannah Holloran, Walla Walla Washington, November 19, 2011

249 Cynthia Selde, interviewed by Hannah Holloran, November 15, 2011

IV. Childcare Services



Map 12: Walla Walla Childcare Services

There are a number of center-based childcare services in Walla Walla including one located within the C2C office and another at the Children’s Home Society Early Learning Center. The map above demonstrates that overall, the majority of Commitment to Community residents are within a half-mile buffer of childcare services. There are also several organizations that provide after school programs for older children; however, many service providers emphasize the need for more childcare assistance and after school programs for older kids in Walla Walla. Many community members also express a need for after school programs as ways to keep kids away from gang involvement.

Population Distribution of Youth Residents in C2C Neighborhoods

The C2C Neighborhoods have a much higher density of youth under eighteen years of age than other regions of Walla Walla. Additionally, the ratio of youth to adults within each C2C neighborhood is much higher than otherwise found in Walla Walla. The following table was sourced from the U.S. Census Bureau Data

displayed in *C2C Neighborhoods – Total Population under 18* and serves a general summary at the neighborhood level:

Demographic	Edith & Carrie	N. Washington	S. Washington	Blue Ridge	Jefferson Park
Total Pop.	241	532	1116	738	1146
Under 18	73	190	411	250	349
% Youth	30%	36%	37%	34%	30%

Table 3: U.S. Census Bureau (2010). *C2C neighborhood population under age 18.*

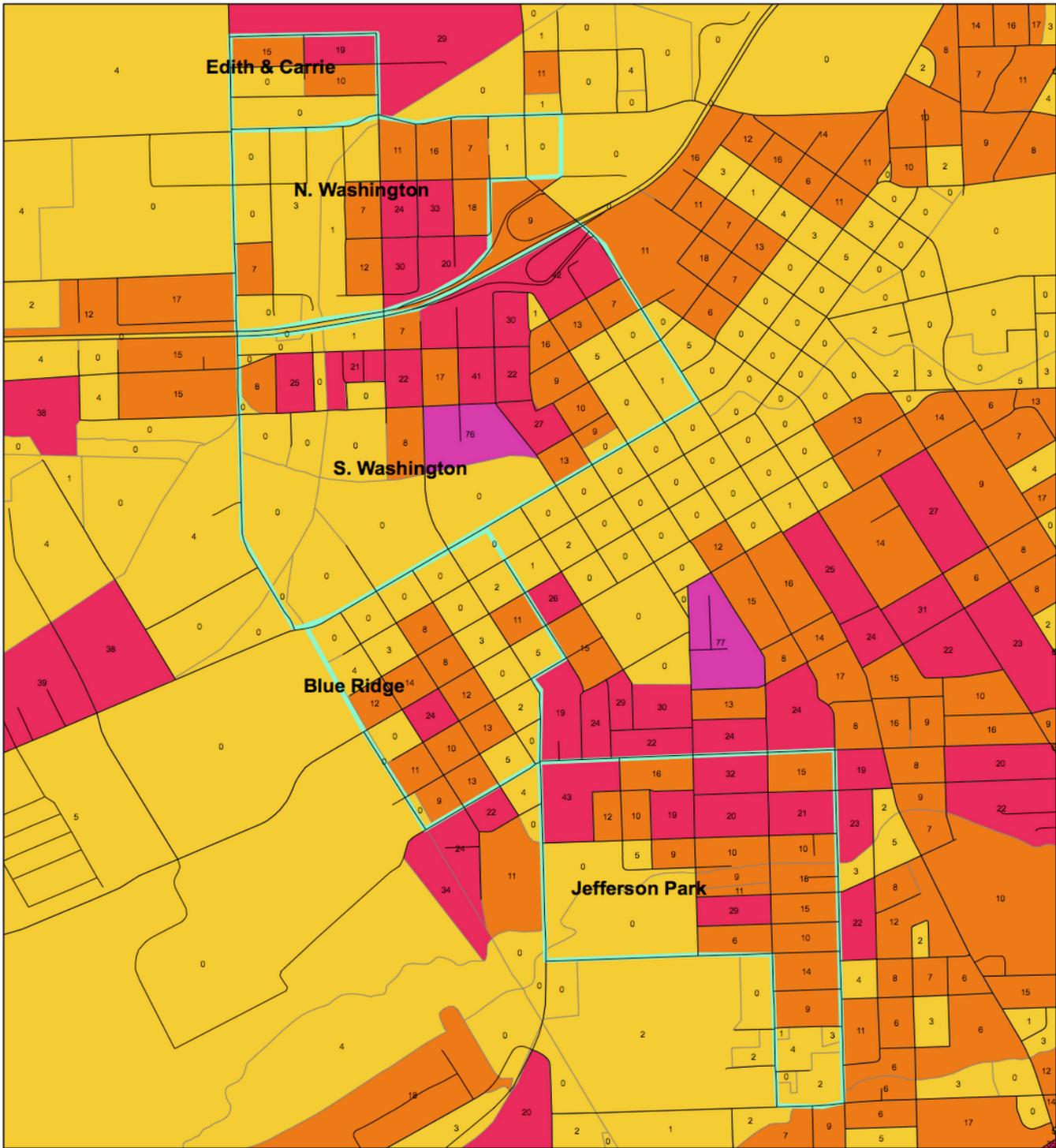
These percentages can be compared to the overall youth population of Walla Walla (6,978 individuals) in relation to the total town population (31,731 individuals).²⁵⁰ Youth under eighteen years of age are thus approximately 22% of the total Walla Walla population; significantly lower than the percentage of youth within the C2C neighborhoods. Put another way, while one out of five individuals in Walla Walla as a whole is under 18, approximately one out of three individuals in the C2C neighborhoods falls into the that same age group.

While youth are a major part of the C2C neighborhood population, there is a low population of senior citizens. Census Data indicates that within the five neighborhoods, only 103 individuals are above the age of 60 – or slightly less than 3% of the total neighborhood populations. This significant because Griggs et al (2010) argue that involvement of seniors citizens, particularly grandparents in informal kinship arrangements with grandchildren, is extremely beneficial for child development. Through the support of hobbies, help with school work, and advice during crisis Griggs et al (2010) found that active grandparents play an essential role in informal family support.

With with a large youth population in comparison to the total population, the question of whether or not families are able to find adequate childcare becomes a determinant factor in overall neighborhood quality of life.

250 U.S. Census Bureau: American Community Survey, "QT-P1: Age Groups By Sex" (2010). Accessed by C. Weems at <http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_SF1_QTP1&prodType=table> on November 25th, 2011.

C2C Neighborhoods - Total Population Under 18



Legend

C2C Neighborhoods

Number under age 18:

0 - 5	6 - 18	19 - 44	45 - 185
-------	--------	---------	----------

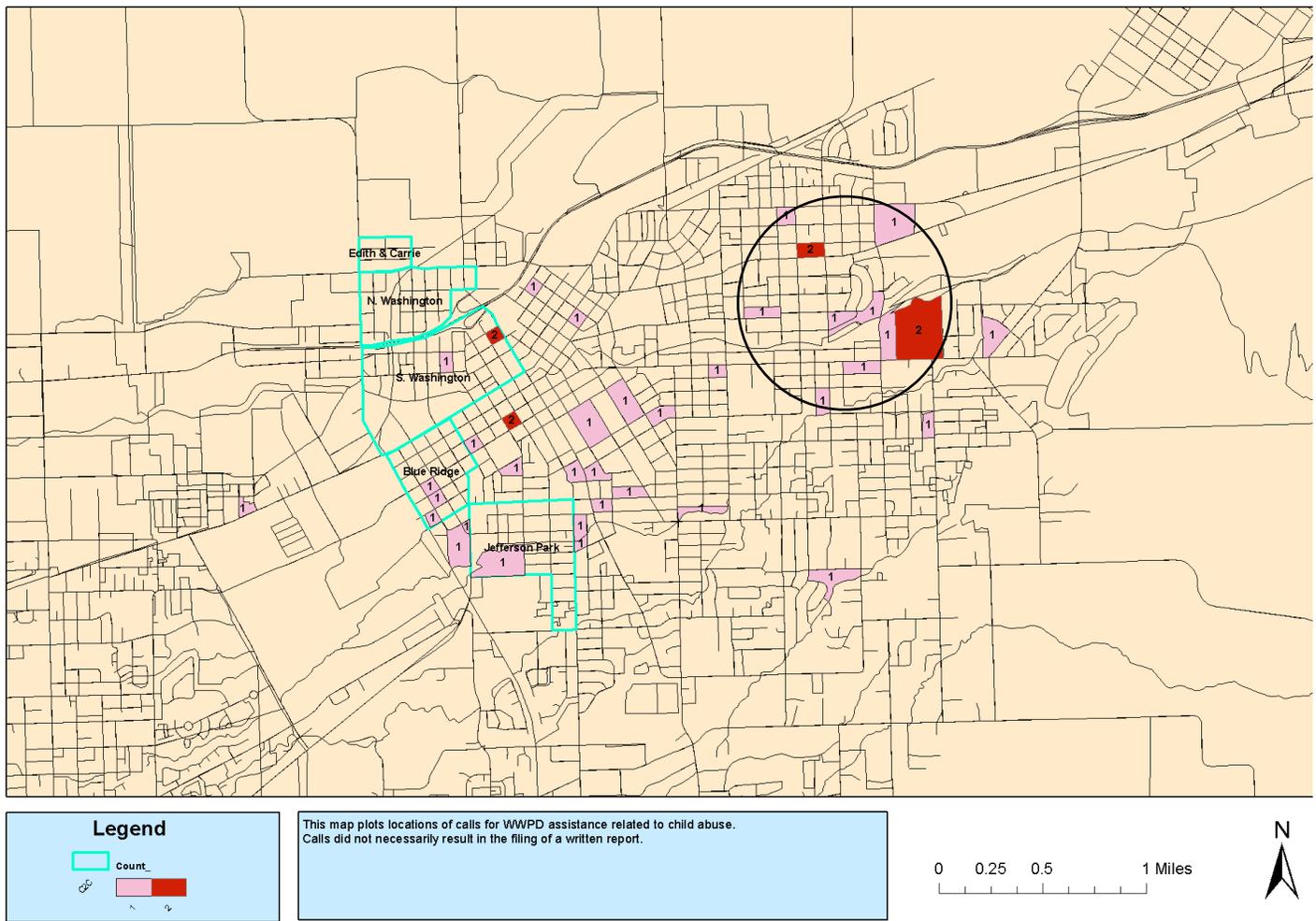
Location: Walla Walla, WA
 Sources: U.S. Census Bureau, Summary File 1 "WA000052010";
 Created by C. Weems using ArcMap 9.2. Data URL:
 <<http://www.census.gov/population/www/cen2010/glance/>>
 Accessed: 09/07/2011

Map 13: U.S. Census Bureau (2010). C2C Neighborhoods: total population under 18.

Determining Target Areas for Community Youth Organizations

Select categories of Walla Walla Police Department calls for service over the full year of 2010 were mapped as discussed on pages 36-37 of the methods section. The following are three types of report that are categorized as Juvenile Problems, Child Abuse, and Child Neglect. While police calls are not the only way of finding target areas for parent counseling and community youth organizations, they provide a detailed and standardized data set for the entire town, rather than a select neighborhood of operation.

Child Abuse - Walla Walla, Washington

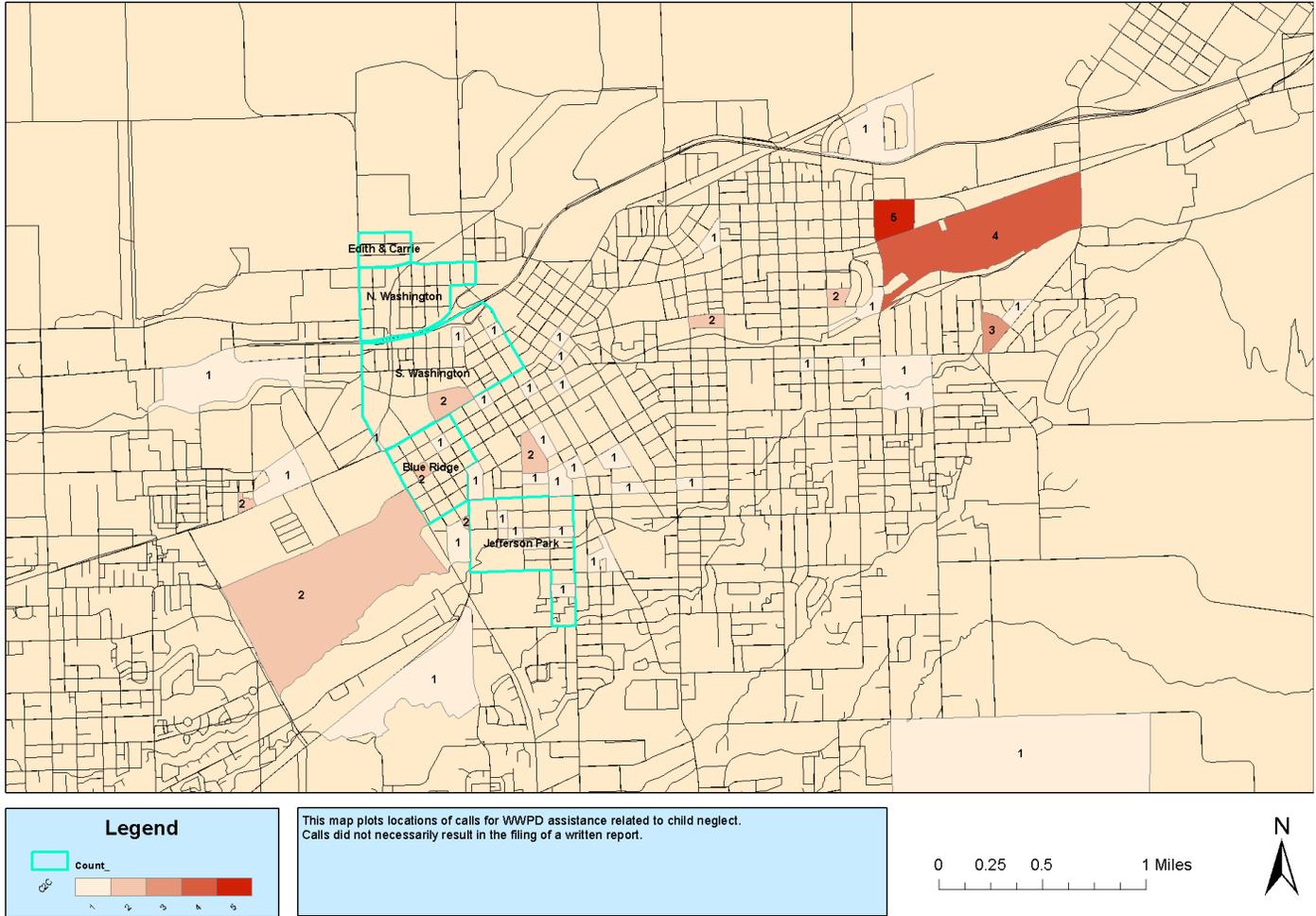


Map 14: Child Abuse in Walla Walla, Washington²⁵¹

We considered incidents of child abuse to be an important indicator for organizations that seek to give youth a place of refuge from an abusive home environment. Child abuse has been reported to the WWPD in South Washington (3 cases), Blue Ridge (3 cases), and Jefferson Park. The north-east section of Walla Walla appears to have a higher rate of abuse than surrounding areas, with 12 incidents occurring in within a half-mile radius of the intersection of Boyer Drive and Francis Ave. Whether or not these incidents are related, there is a strong possibility that increased youth involvement in community organizations in this area could help these neighborhoods.

²⁵¹ Source: Walla Walla Police Department, "Calls for Service" (2010)

Child Neglect- Walla Walla, Washington

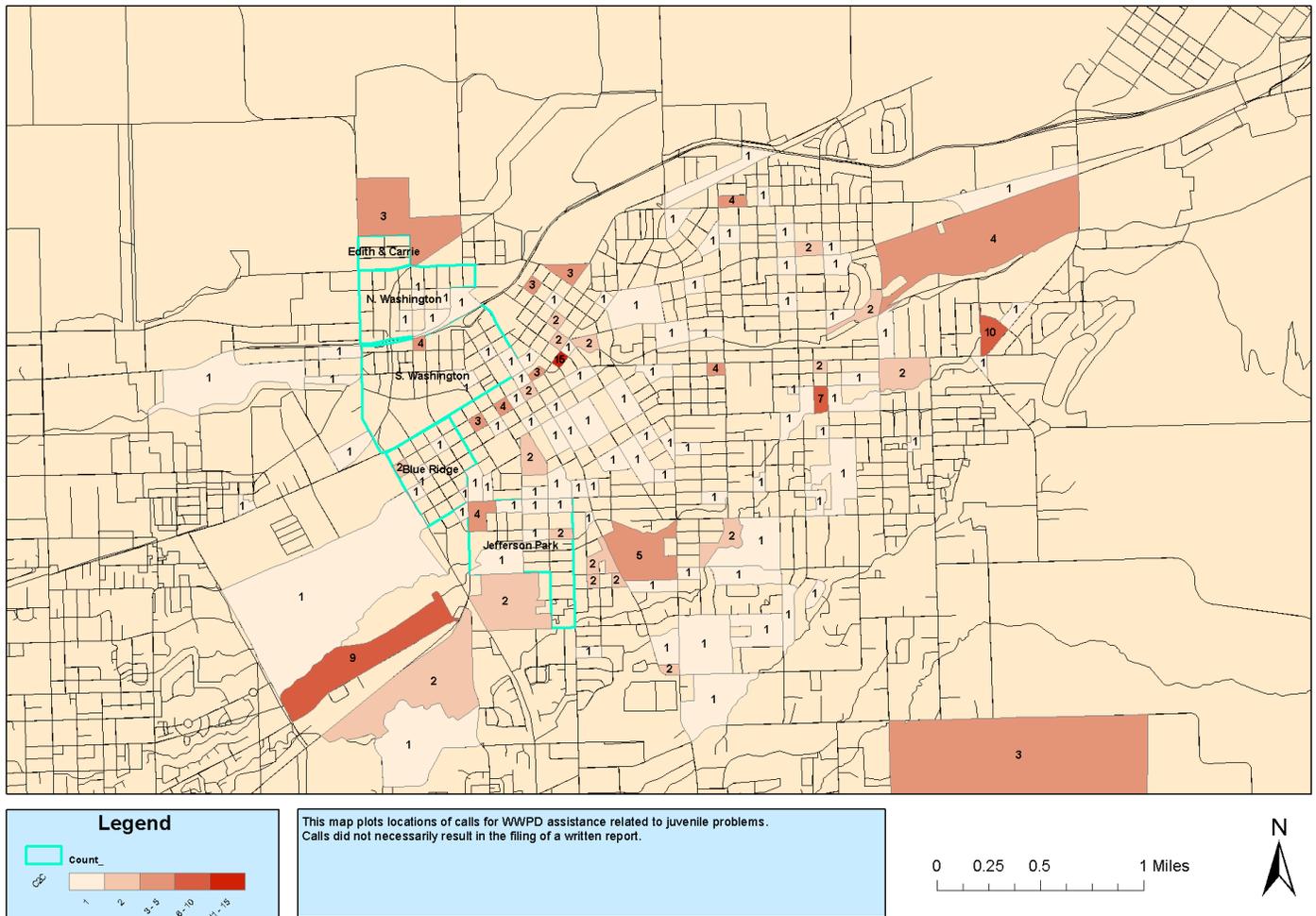


Map 15: Reports of Child Neglect – Walla Walla, Washington²⁵²

We use reports of child neglect to the Walla Walla Police Department as an indicator for lack of adequate child care. Instances of child neglect do occur in the Commitment to Community Neighborhoods: South Washington Park saw 5 incidents, Blue Ridge 3, and Jefferson Park 4. This could be due in part to the multiple childcare resources that are in relatively close proximity to the Commitment to Community Neighborhoods.

²⁵² Source: Walla Walla Police Department, “Calls for Service” (2010)

Juvenile Problem Incidents - Walla Walla, Washington



Map 16: Juvenile Problem Incidents – Walla Walla, Washington²⁵³

“Juvenile Problems” consist of incidents where an individual reported inappropriate behavior of youth to the Walla Walla Police Department. These incidents as a whole provide indicators of where a community organization dedicated to youth development could have an impact. A string of incidents that runs parallel to the south-east border of South Washington Park indicates the downtown area of Walla Walla, however numerous incidents

²⁵³ Source: Walla Walla Police Department, “Calls for Service” (2010)

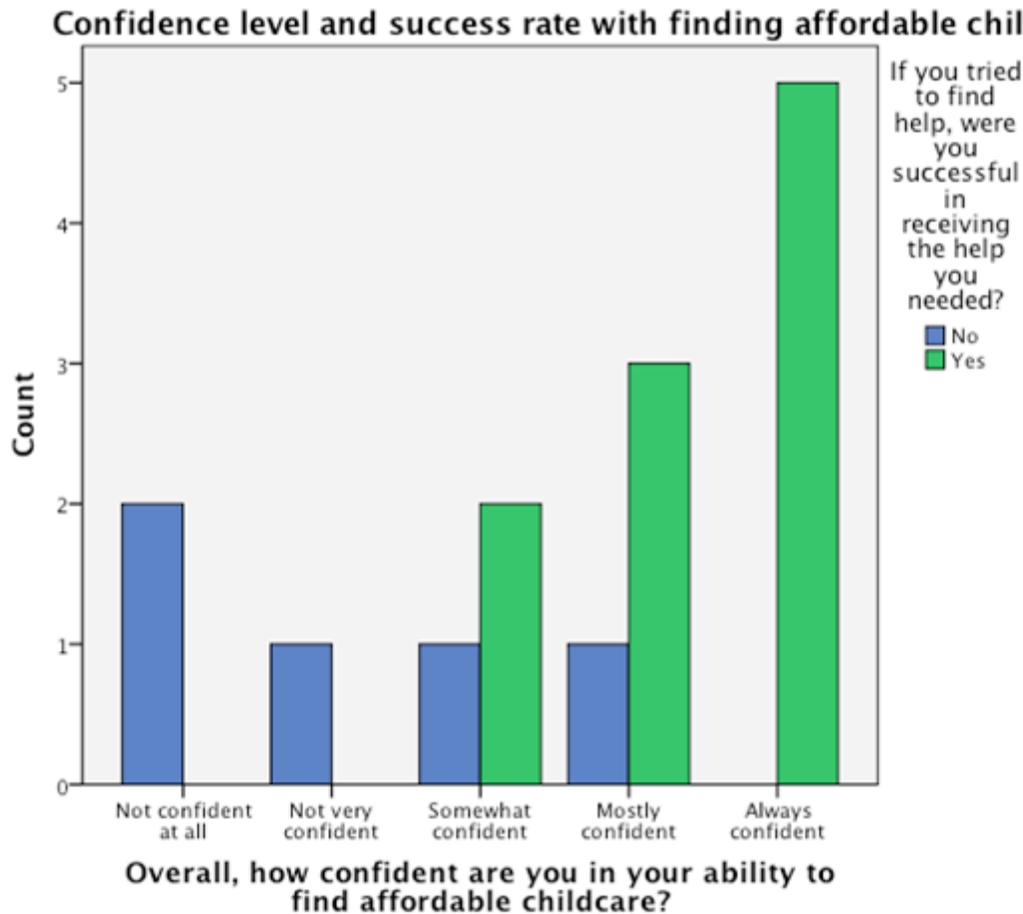


Chart 9: Childcare Confidence

Survey respondents use of childcare services

When asked, “How confident are you in your ability to find affordable childcare?”, 60% of survey respondents felt mostly to always confident. 30% of survey respondents felt somewhat confident and 10% felt not at all or not very confident. A relatively small portion of survey respondents have sought assistance to locate childcare services: only 38.7% reported having tried to find such assistance with finding childcare. The success rate is moderate; of those who have tried to find help, 68.8% were successful in receiving the help they needed. There is, however, a correlation between success in receiving assistance and confidence in ability to find childcare. On the whole, those who were successful in receiving help with childcare also felt more confident in their ability to find affordable childcare.²⁵⁴

Survey respondents reported receiving assistance from multiple sources including family, friends, and formal organizations. The most common source of assistance came from informal networks: family, friends or neighbors. 65% of respondents reported using informal networks of support. Organizations and formal services were also widely used; 50% of respondents reported receiving assistance from a formal organization. 15% of respondents have received assistance from both family and organizations, meaning they utilize both informal and formal support networks. The graph below shows the distribution of respondents use of informal and formal support networks for assistance with finding affordable childcare.

²⁵⁴ Chi-square = 8.625 @ .071, Pearson’s R = .730 @ .002

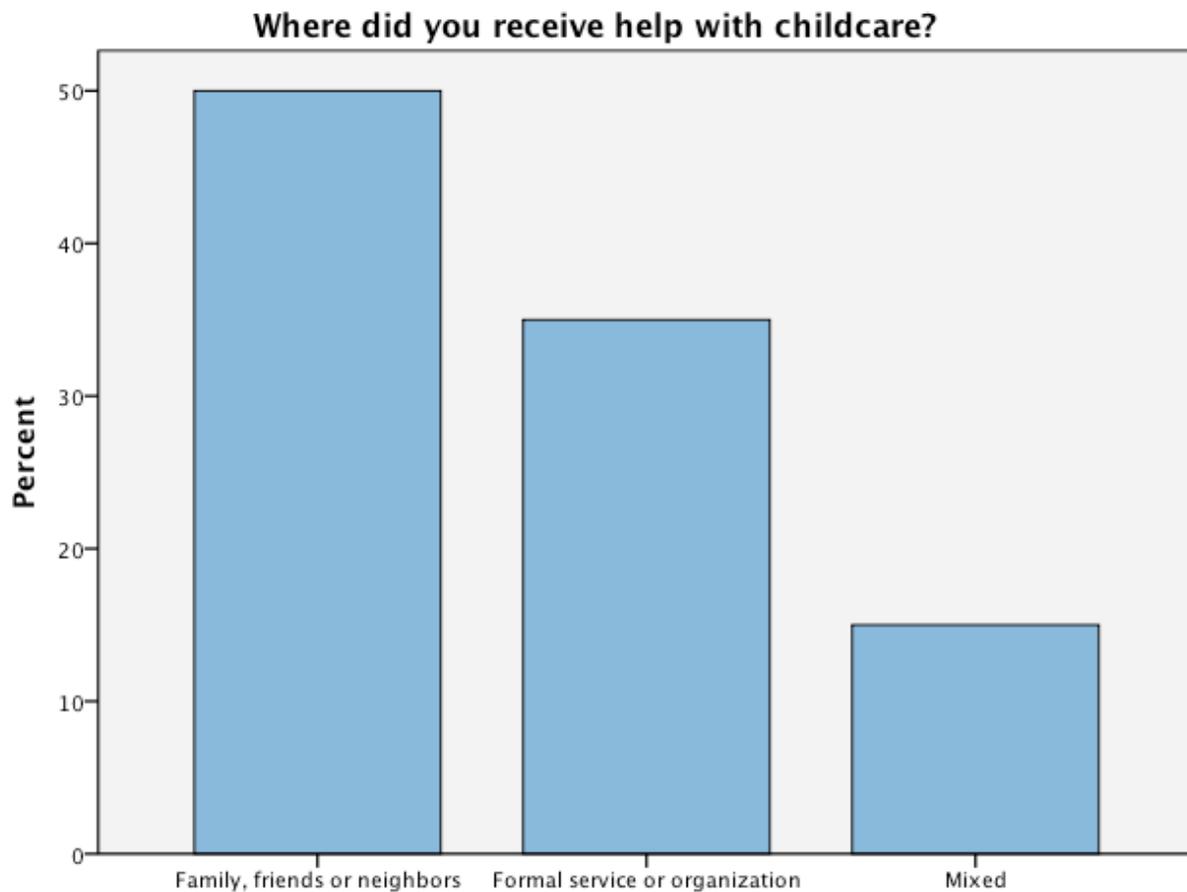


Chart 10: Where did you receive help with childcare?

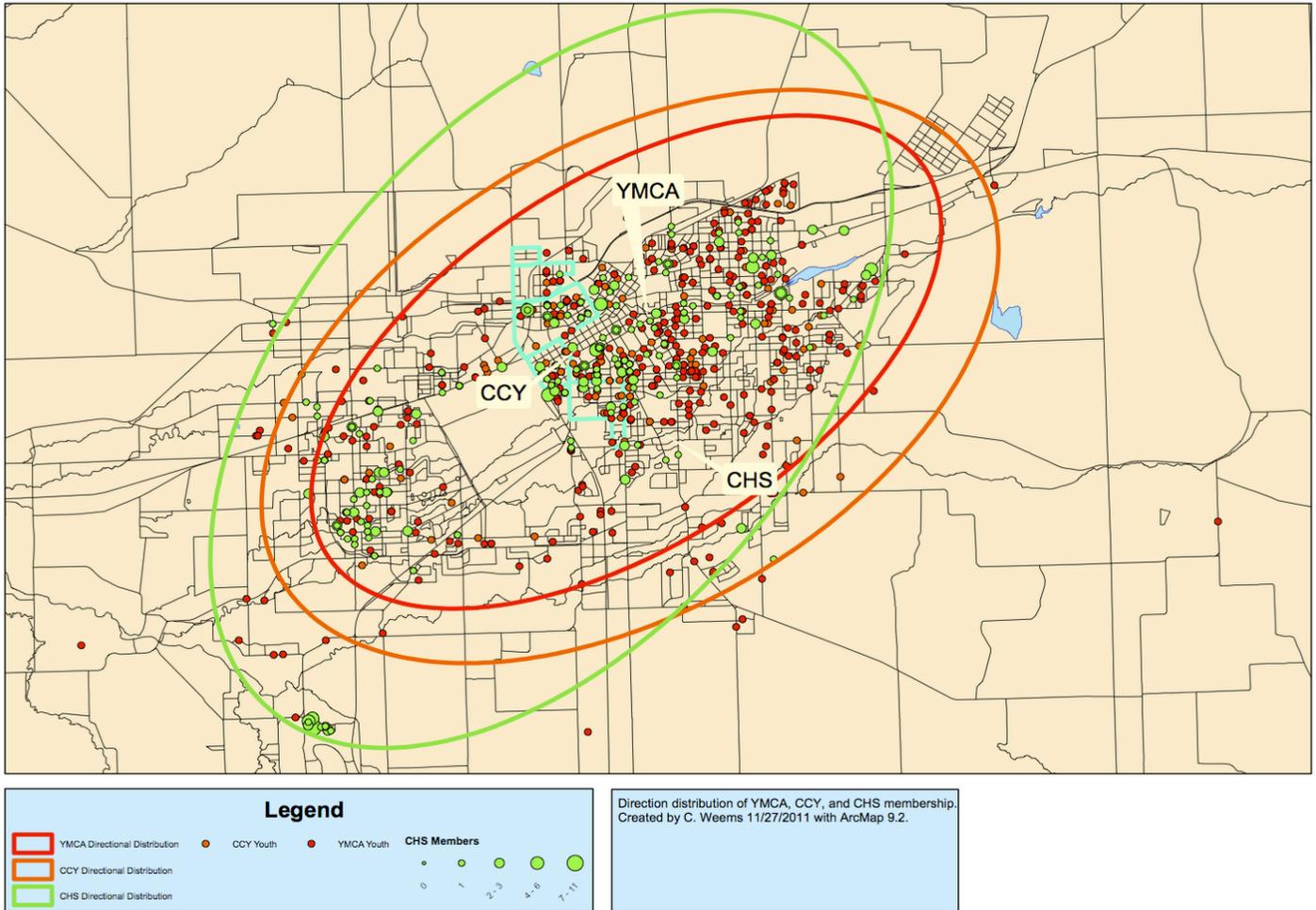
Geographic Analysis of After-School Childcare Services

After school programs offered by CCY and the YMCA are both major sources of youth activities within Walla Walla. The YMCA has a total youth membership of 431 individuals,²⁵⁵ while the CCY has a membership of 216.²⁵⁶ The geographical distribution of these organizations' members shows, furthermore, that the pivotal childcare services offered by the YMCA and CCY are, in fact, accessible to poor families and individuals living in Walla. While some overlap in membership does exist between these two organizations, a count of members within census blocks reveals that YMCA members are more highly concentrated to the south-east of the city, while CCY members are more highly concentrated in the south-central region and to the west. Overall, a greater proportion of the CCY membership is located within the neighborhoods that C2C prioritizes: Edith-Carrie, Blue Ridge, and Washington Park. However, both the YMCA and CCY have nearly equal absolute membership in all five C2C neighborhoods.

255 YMCA Membership Database 9/27/2011

256 CCY Youth Members Address Book 10/18/2011

YMCA, CCY & CHS Large Scale Membership Comparison



Map 17: YMCA, CCY & CHS Large Scale Membership Comparison²⁵⁷

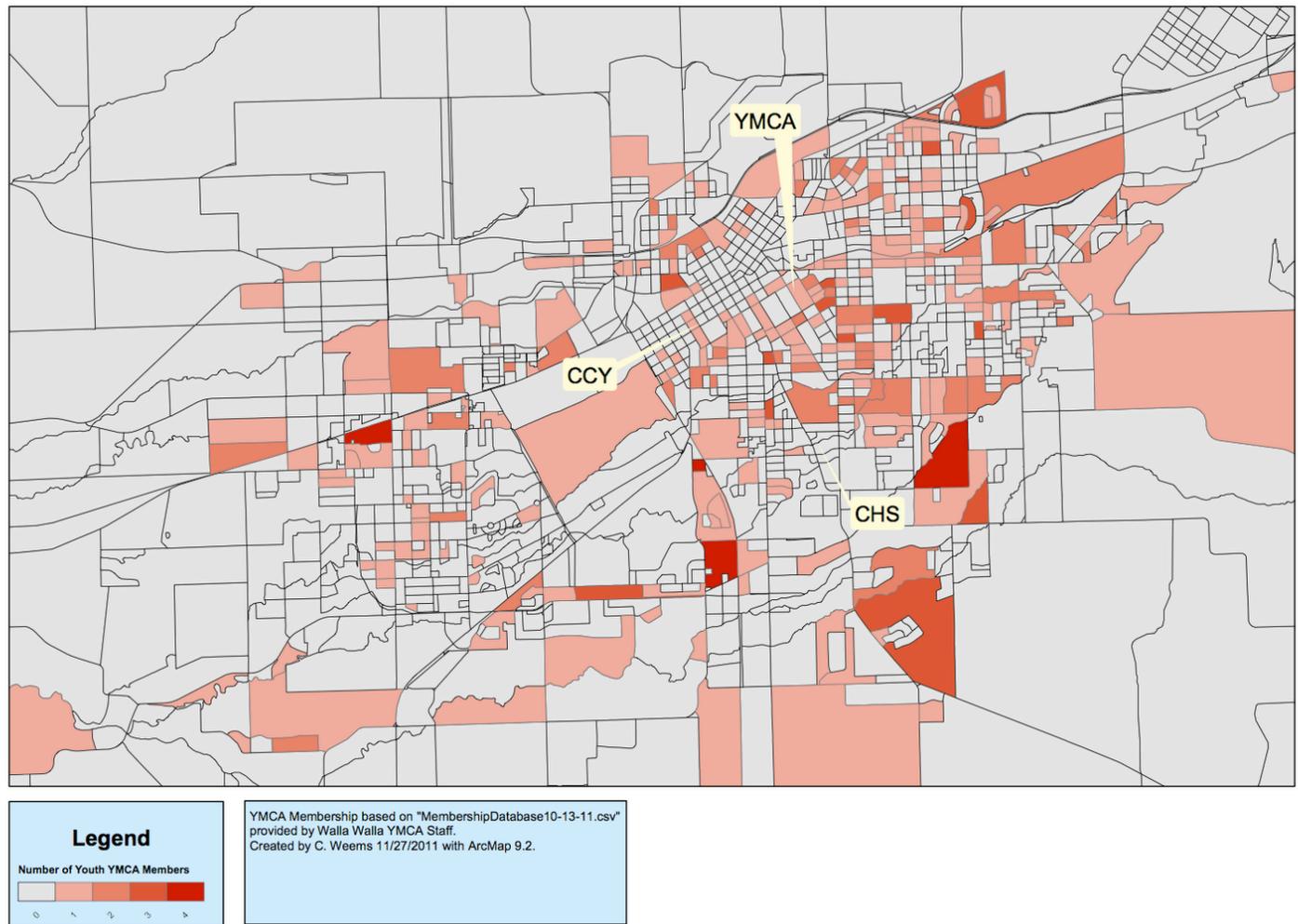
Observations:

Directional distribution analysis creates an oval shape outlining the area where 95% of members of organizations live. Distributional analysis is useful in terms of analyzing large-scale membership trends. The smallest red oval indicates the directional distribution of Youth YMCA Members, and largely follows the outline of the town. The smaller size indicates that there are fewer peripheral members in relation to the center group. While the CCY members have a similar alignment, the larger oval represents a less dense membership with a larger number of individuals living on the periphery. Finally, the CHS membership is not completely congruous with the population of Walla Walla, indicating a significant membership population outside of the general city population distribution. In this case, the farm labor homes located to the south-west of the city have a significant impact on the directional distribution of the overall group.

The following maps use a choropleth scale to identify hot-spots of membership within census blocks. The same information was then cross-referenced with the C2C neighborhoods to give a detailed view of how much these three community organizations have successfully received membership from these areas.

257 YMCA Membership Database (2011); CCY Participant Address Book (2011); CHS Membership Data by Block (2011)

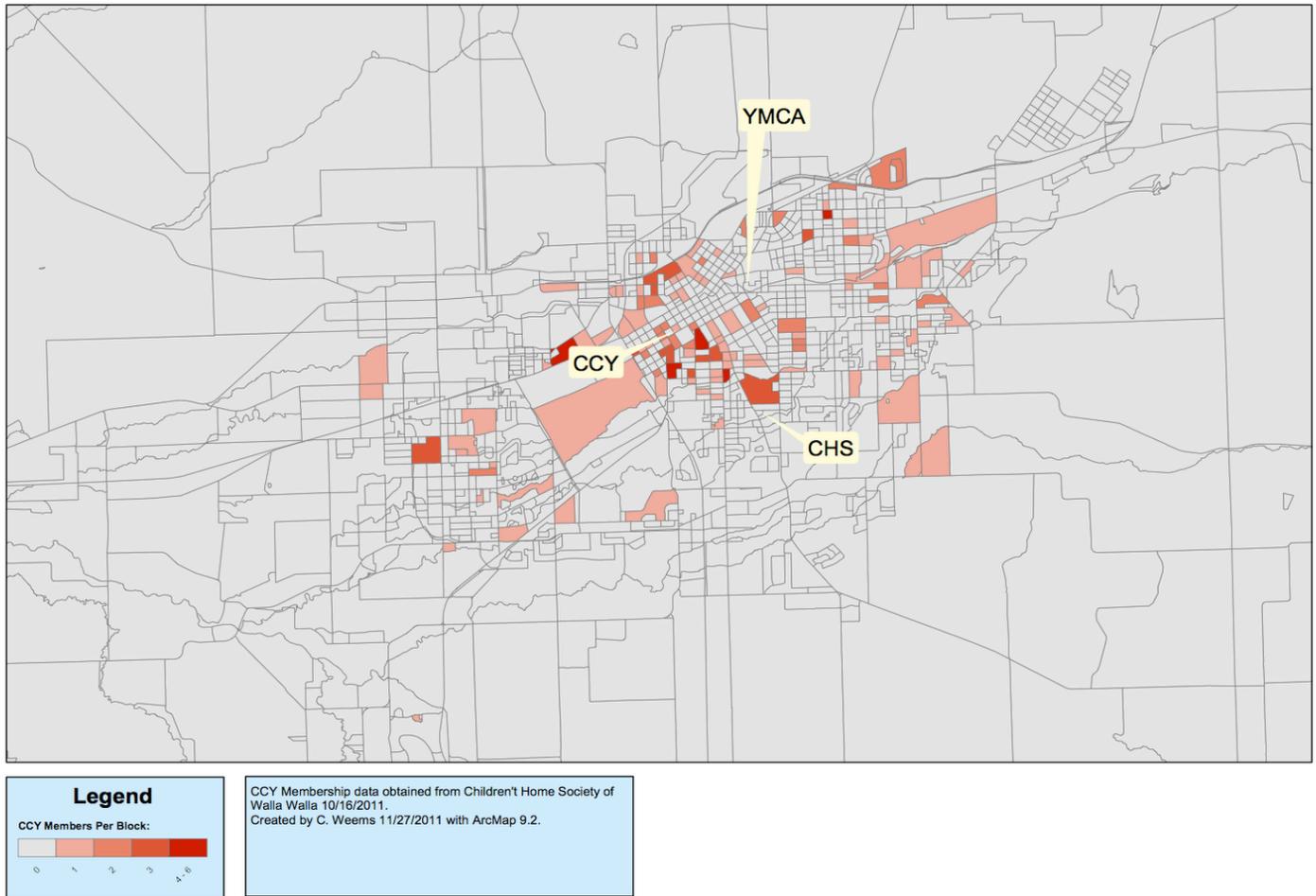
YMCA Youth Membership Hot-Spots



Map 18: YMCA Youth Membership Hot-Spots

The YMCA of Walla Walla has a strong town-wide membership that is particularly prominent in the central corridor of Walla Walla that runs to the south-east of the YMCA's location. However, Commitment to Community residents make up a relatively small proportion of the YMCA's membership. Of all active members, only 3% are residents of the Commitment to Community Neighborhoods. While the YMCA is the only organization to have membership from all neighborhoods, there is still a large possibility for further involvement of Commitment to Community residents.

CCY Membership Hot-Spots

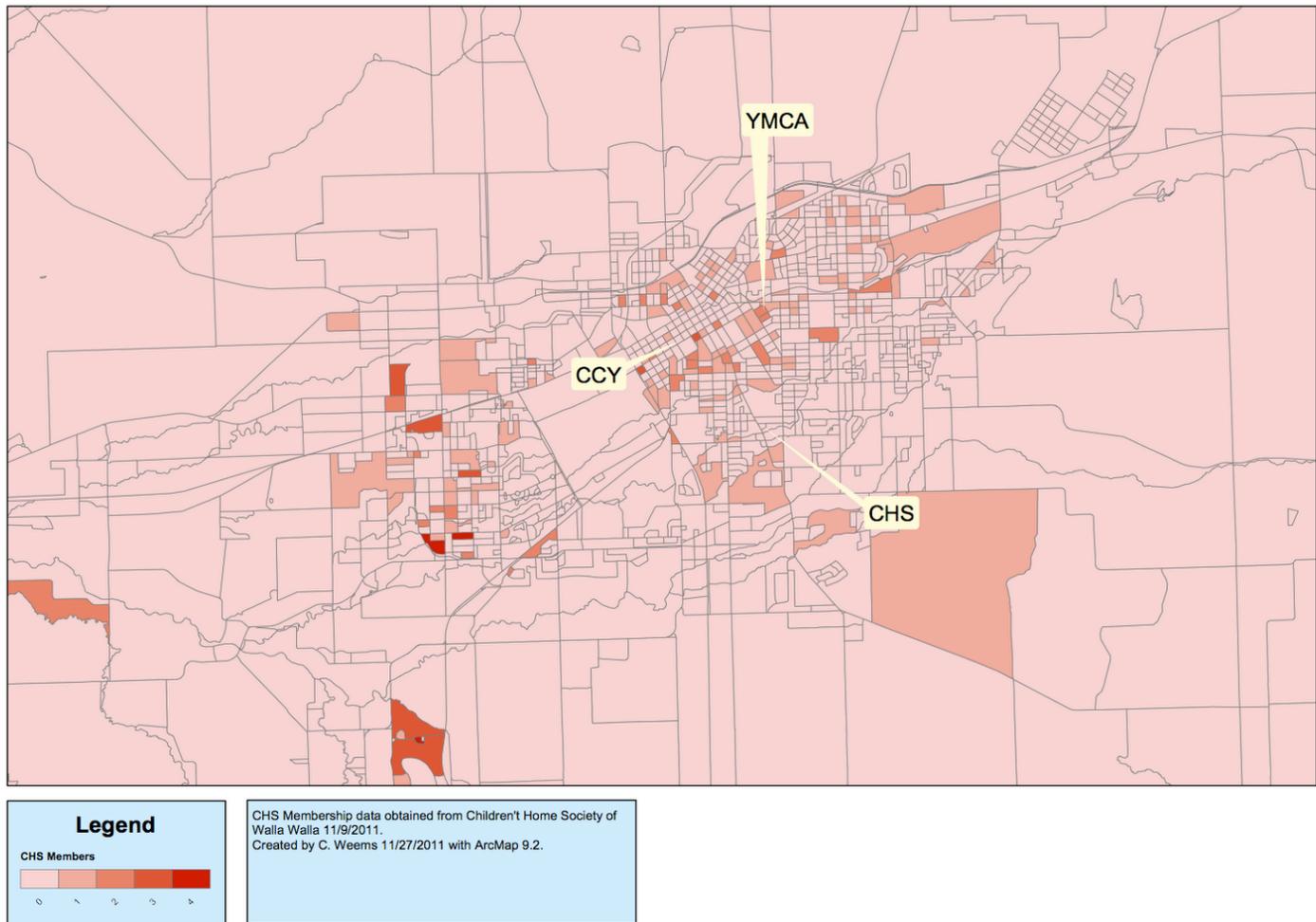


Map 19: CCY Membership Hot-Spots

Although the Community Center for Youth has a membership that is smaller than the YMCA in real terms, the proportion of youth who are residents of Commitment to Community Neighborhoods is much higher. Youth from Commitment to Community Neighborhoods make up about 24% of the Community Center for Youth's membership. However, none of the 73 youth residents of Edith & Carrie are enrolled in the CCY, suggesting the potential for further youth involvement in this area.

Additionally, the directional distribution of the CCY's membership indicates that overall, members are slightly more spread out than those of the YMCA. This could in part be due to the fact that the CCY also serves several areas in the north-east section of town, rather than having a consolidated membership in the center of Walla Walla. This involvement of the north-eastern part of the Walla Walla Community is particularly important given our findings that there are heightened rates of Juvenile Problems, Child Neglect, and Child Abuse in these areas as determined by Walla Walla Police Calls (see pp. 112-117 for further details).

CHS Membership Hot-Spots



Map 20: CHS Membership Hot-Spots

The Children’s Home Society membership pattern is strikingly different from that of the YMCA and CCY because it incorporates significant membership from both the farm labor home (located to the south-west of Walla Walla) and College Place, another city west-south-west of Wall Walla. CHS has a membership in the farm labor homes because it specifically travels to the individuals living there. Given the lack of representation of Edith & Carrie and North Washington within the CHS membership roles, a partnership in which CHS were to actively travel to these neighborhoods for community events has tremendous potential.

Members from C2C Neighborhoods

Each of these organizations has at least four of the C2C neighborhoods represented within its membership. However, some are better represented than others. The following is a table showing membership counts that have been transposed from census blocks to the C2C neighborhoods. Each column represents a neighborhood, while each row represents an organization with its membership for each neighborhood:

Organization	Edith & Carrie	North Washington	South Washington	Blue Ridge	Jefferson Park
Youth Population	73	190	411	250	349
YMCA	1	5	12	7	9
CCY	0	3	21	13	16
CHS	0	1	19	16	14

Table 4: Neighborhood Membership in Community Organizations

The total Youth YMCA membership count was 34, or about 2.7% of the entire youth population in the C2C neighborhoods. CCY membership contains approximately 4.1% of the total C2C population, and CHS has about 3.9% of that same population in its membership (though CHS draws from a larger demographic because it enrolls both children and adults in its membership database). **There is significant room for expansion within the C2C neighborhoods on the part of all three organizations, especially in light of our finding that 92% of residents in Blue Ridge are interested in participating in a community organization.**

Use of informal networks for childcare services

In addition to extensive opportunities for childcare and after school programs and assistance, **informal support systems are very important sources of childcare support**: 65% of survey respondents reported using friends or family for childcare. All community members interviewed used informal support systems for childcare; they relied on friends, family or neighbors in an informal setting. Isa, a Mexican Immigrant who lives in Blue Ridge and has a four-year-old daughter says, “I feel pretty connected because, yeah, when something happens, they are here to help each other. That’s what basically matters to me. And kids can be playing with other kids, and the parents are okay with this, so it’s hard to tell then, ‘You know, if that’s okay with you that your kids is coming to my house, I’m okay with it. Because if you’re not okay with it, then I’m not, too, because I’m not getting money for it’”²⁵⁸. Her views about this kind of informal support from neighbors reveals that such support depends on a certain amount of reciprocal trust and understanding between parents. To receive this kind of support, you must be willing to provide for others.

Our survey data reveals that both Latinos and Whites utilized formal and informal support networks for assistance with childcare. Also, there was no significant correlation between one’s ability to speak English and the type of support network (informal or formal) utilized.

Recognizing that the sample size of our survey is relatively small, we also looked at Walla Walla County census data to gain a more representative perspective on child service use in the community. Analysis of census data reveals a racial discrepancy in utilization of state-sponsored child services: 29.3% of the 9,062 clients served by the Department of Health and Social services were Hispanic. 39.7% of those served through the TANF and State Family Assistance program and 46.6% of those assisted through Working Connections Childcare were Hispanic. Hispanics only make up 19.7% of the county population; thus, there is a definite discrepancy in the proportion of Hispanics seeking and receiving assistance with childcare from the Department of Social Services.²⁵⁹

²⁵⁸ Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

²⁵⁹ Washington State Department of Health and Social Services 2010

V. Housing and Utility Assistance

Extent and source of support for housing payments

When asked “How confident do you feel in your ability to make housing payments such as rent and mortgage?” 59.5% of survey respondents felt confident most or all of the time, 24.1% felt somewhat confident, and 19% felt not very confident or not at all confident.

47.4% of survey respondents indicated they had tried to find help or assistance in making housing payments. The success rate in finding help was fairly high; 81.6% of respondents who tried to find help with housing payments found the help they needed.²⁶⁰

Confidence level and success rate for assistance with housing payments

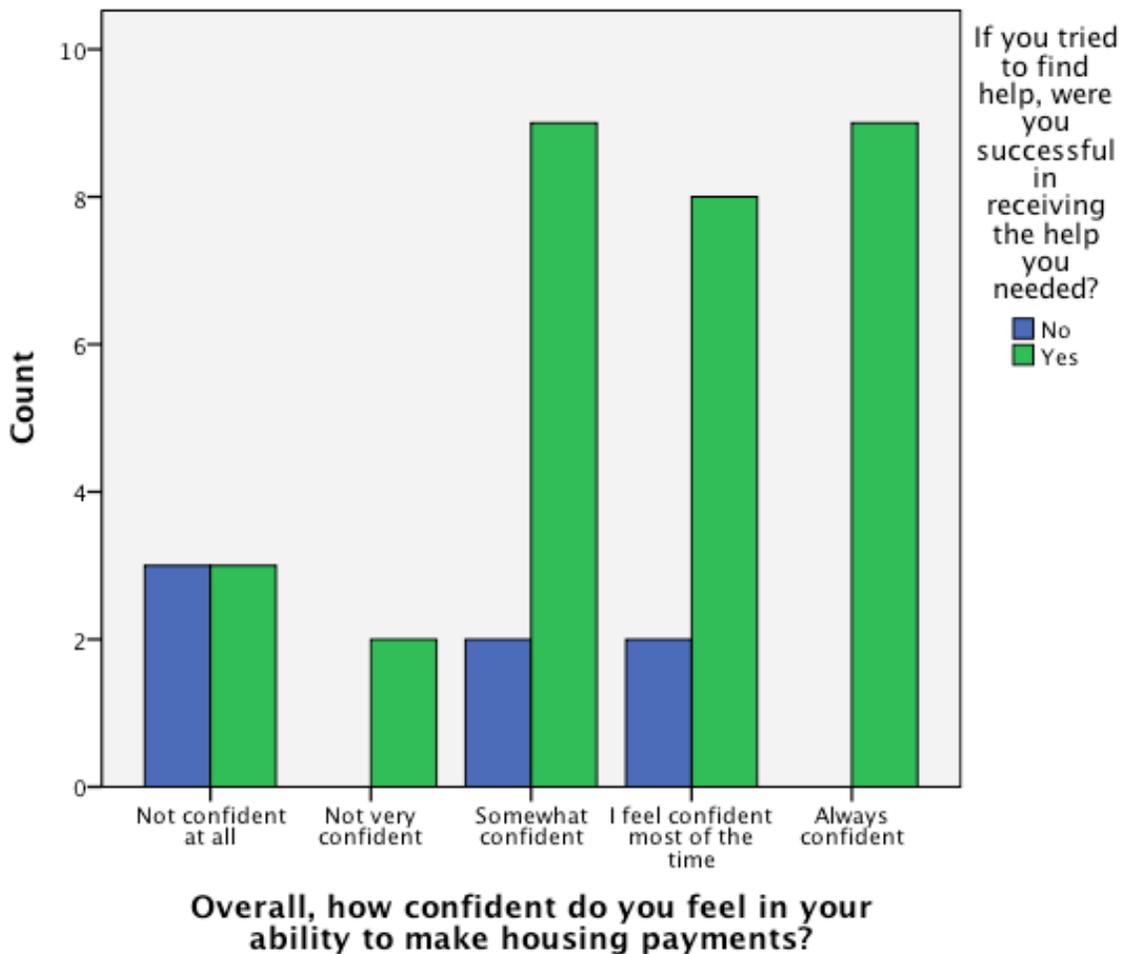


Chart 11: Confidence in ability to make housing payments

Respondents reported receiving assistance in making housing payments from multiple sources including family, friends, and formal organizations. Respondents received assistance with housing payments from multiple sources including family, friends, and formal organizations. Both formal and informal networks were accessed equally and 19% of respondents reported using a mixed support system of friends and family and formal organizations.

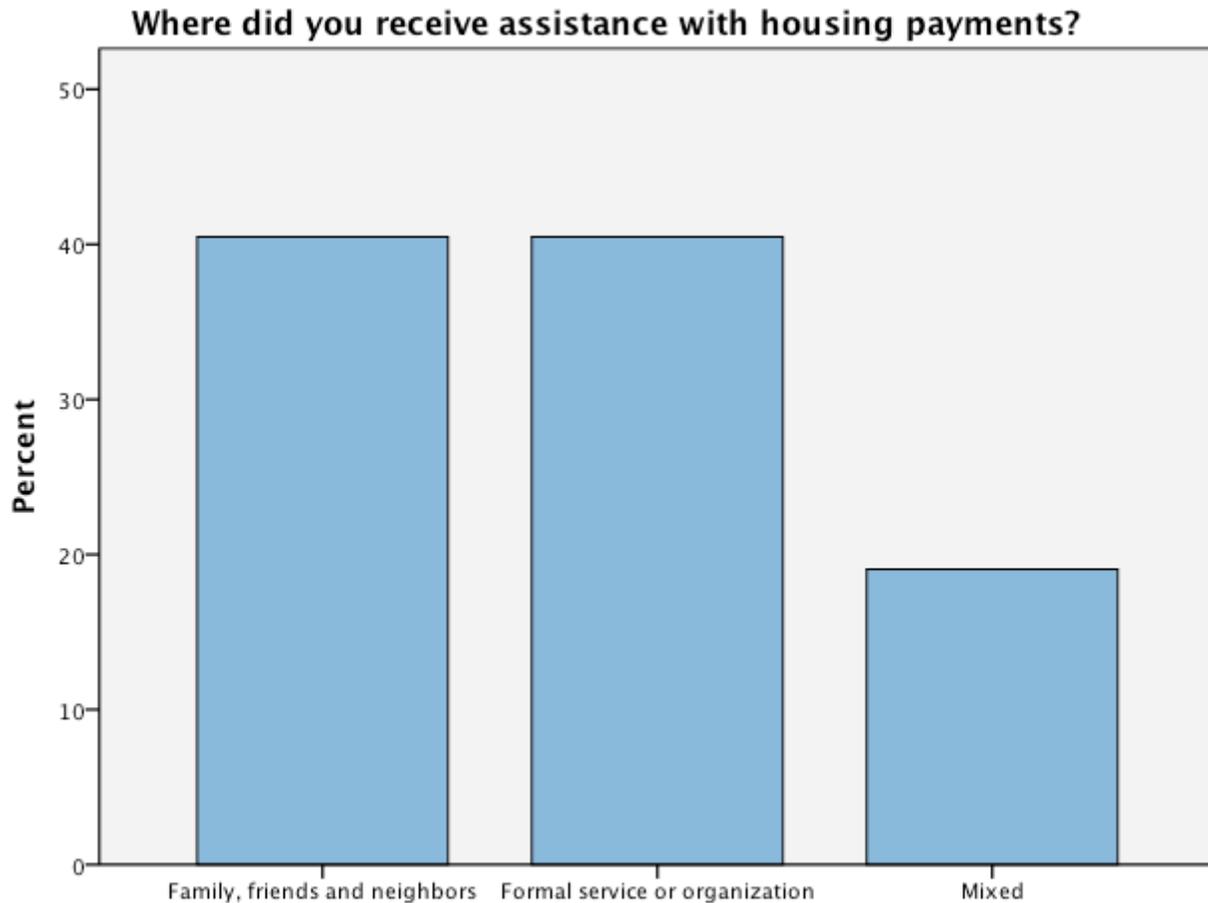


Chart 12: Where did you receive assistance with housing payments?

There was no significant correlation between one's confidence in one's ability to making housing payments and race, the ability to speak English, the type of support network (informal or formal) utilized, or even whether or not one was successful in getting support. This is contradictory to what one might expect: receiving help does not mean that respondents will feel more confident in their ability to make housing payments.

Vacant Housing

On the neighborhood-wide scale, the condition of housing has real effects on the quality of life of residents. Using GIS mapping techniques and interviews M.S.Q Huber et al. (2009) found a significant number of vacant lots was directly linked to lower neighborhood perception of quality of life and involvement. Using a similar method, we incorporated U.S. Census Bureau data that indicated how many residences within a given census block (roughly one city block in size) were vacant on April 1st, 2010 (Census Day). Block level data allows for the most precise view of which houses were vacant on Census Day.

It is important to note that not all types of vacancies counted by the U.S. Census Bureau are detrimental to neighborhood satisfaction and quality of life. For example, a well maintained house that has just been put on the market might fall under the general category of being “vacant” but would not indicate the derelict conditions of a house that had been abandoned. Fortunately, the Census Bureau collects seven sub-sets of data regarding the reason for the vacancy. Each category is unique and precludes the other, so there is no overlap between the seven. They are as follows:

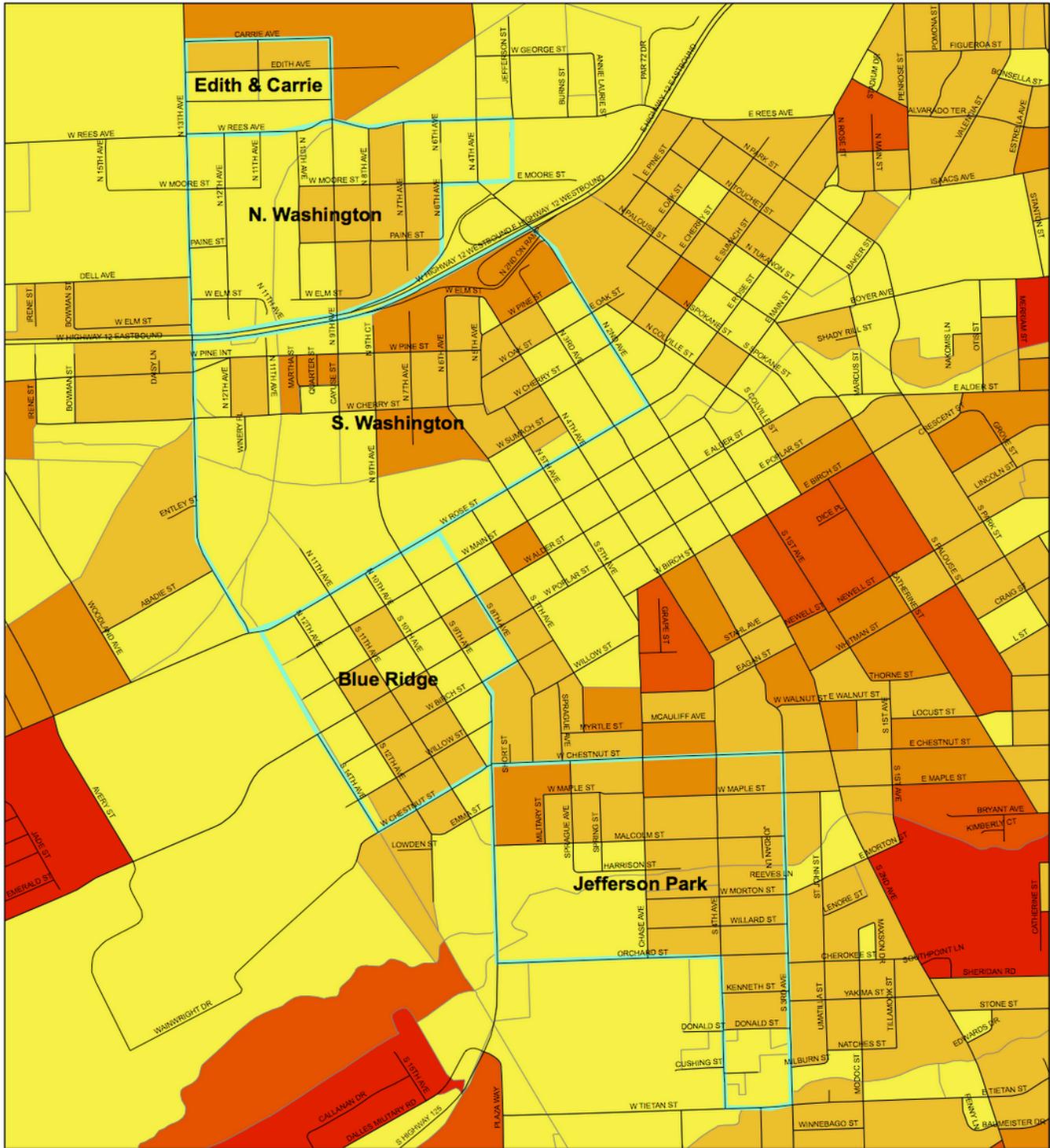
- Currently for rent (H0040002)
- Rented, not yet occupied (H0040003)
- Currently for sale (H0040004)
- Sold, not yet occupied (H0040005)
- Part-time recreational residence (H0040006)
- Seasonal housing for migrant workers (H0040007)
- “Other” Vacant (H0040008)

To begin, “Total Vacancy” (H0040001) data was used to create a map that would demonstrate general vacancy patterns in Walla Walla. This map, *C2C Neighborhoods - Total Vacant Houses* is displayed below:

Observations on C2C Neighborhoods - Total Vacant Houses

Generally, C2C Neighborhood Blocks have a slightly lower than average rate of vacancies, with most blocks falling into the 8-25 vacancies bracket. Of the neighborhoods, Jefferson Park and South Washington Park have relatively more than others, though they remain close to the mean of 8.4 vacancies per block in Walla Walla.

C2C Neighborhoods - Total Vacant Houses

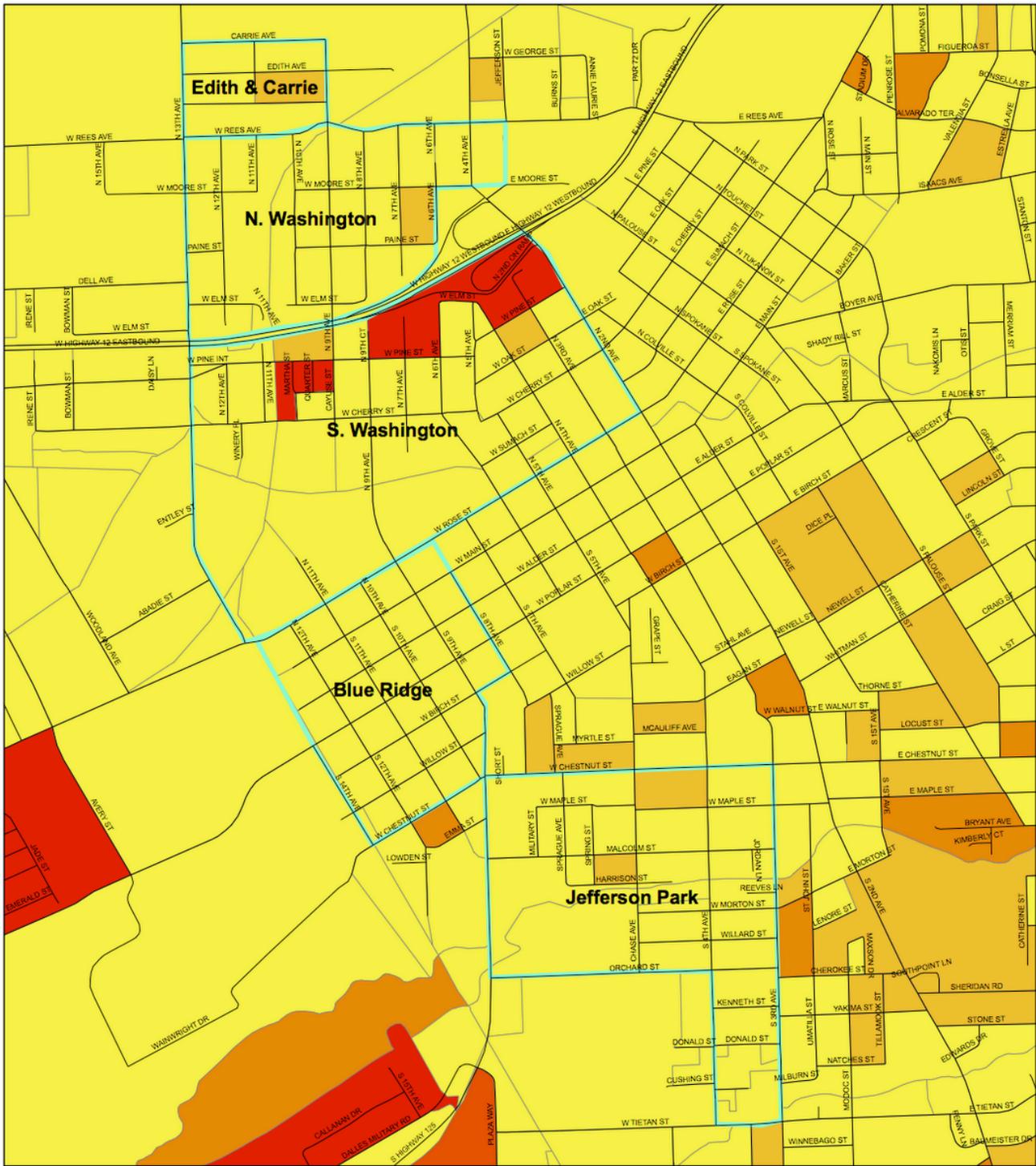


This map displays the total number of vacancies per block. A house may be listed as vacant for several reasons: (1) it is for rent, (2) it has been rented but is not yet occupied, (3) it is for sale, (4) it has been sold but not occupied, (5) it is for recreational part-time use, (6) it is designated for migrant workers, (7) it is "Other Vacant" - i.e. derelict.

Data source: U.S. Census Bureau SF1 wa00442010: H3-H5 (2010).

Map 21: Total Vacant Houses

C2C Neighborhoods - "Other" Vacant Houses



This map displays the total number of vacancies per block. A house may be listed as vacant for several reasons: (1) it is for rent, (2) it has been rented but is not yet occupied, (3) it is for sale, (4) it has been sold but not occupied, (5) it is for recreational part-time use, (6) it is designated for migrant workers, (7) it is "Other Vacant" - i.e. derelict.

Data source: U.S. Census Bureau SF1 wa00442010: H3-H5 (2010).

Map 22: "Other" Vacant Houses

While “Other” Vacant Houses are not necessary derelict, they are vacant and not in the process of changing hands through a typical real-estate process. Of all neighborhoods, South Washington has by far the most houses that are categorized as “Other” Vacant by the U.S. Census Bureau. **With a total of 15 potentially abandoned houses, South Washington has more than twice as many “Other” Vacant Households than all other C2C Neighborhoods combined.**

While Census Data may be imprecise, and the definition of “Other” Vacancy is not explicitly defined as abandoned, this data is corroborated by interviews conducted with residents of the neighborhood. Jessica recounts in Edith and Carrie, An “issue was there were people parking in this empty lot over here and just driving through and that's where kids walk through to go to the park. It's kind of scary a few times. I'm just afraid that one of these days the one kids going to get hit.”²⁶¹

This information is significant because Elwood & Leitner (2003) found that in addition to degrading the quality of life within a neighborhood, abandoned residences were often indicative of a large lack of access to affordable housing supplies or a landlord with the ability to conduct regular maintenance. Even if reclaiming abandoned housing is not an option for community organizations, preventative measures should be taken to ensure that residents are able to access the skills and supplies needed to maintain their houses at a livable standard.

Extent and source of support for utility payments

When asked, “How confident do you feel in your ability to pay monthly utility bills?” 59.8% of survey respondents felt confident most or all of the time, 22.0% felt somewhat confident, and 18.3% felt not very confident or not at all confident. 46.9% of respondents indicated they had tried to find help or assistance in paying monthly utility bills.

Confidence level and success rate for assistance with utility payments

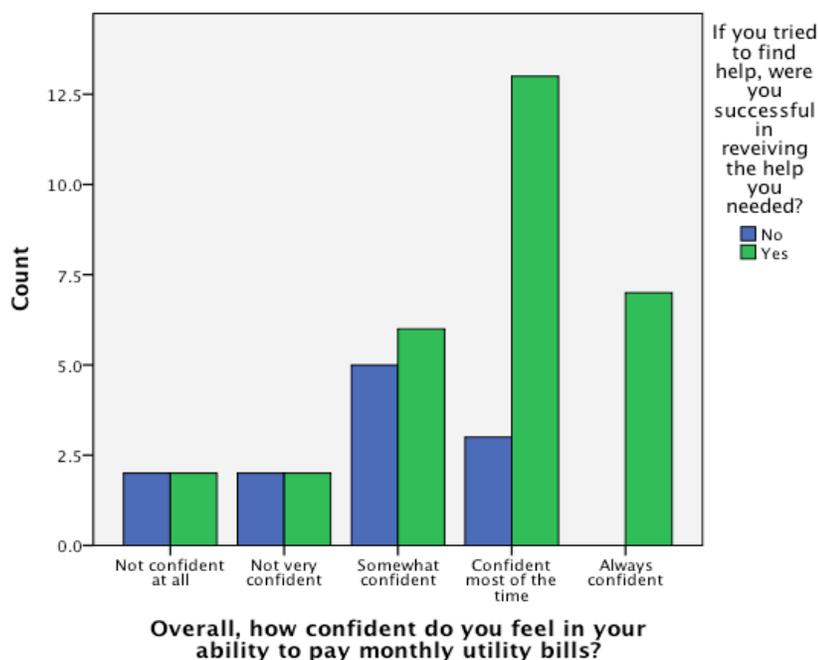


Chart 13: Confidence level and success rate for assistance with utility payments

²⁶¹Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

The success rate in finding help to pay for utilities was fairly high, though not as high as that found for housing payments. 72.1% of respondents who tried to find help found the help they needed, meaning that over a quarter of those who sought help (27.9%) were unsuccessful. The graph below shows the success rate of respondents with different levels of confidence.

As demonstrated by the graph below, formal services or organizations were the most common source of support for paying for utilities. 65.9% of respondents reported having received assistance from a formal service or organization. 51.2% of respondents have received assistance from informal networks of family, friends or neighbors. 17.1% of respondents use a mixed system of informal and formal services and support networks.

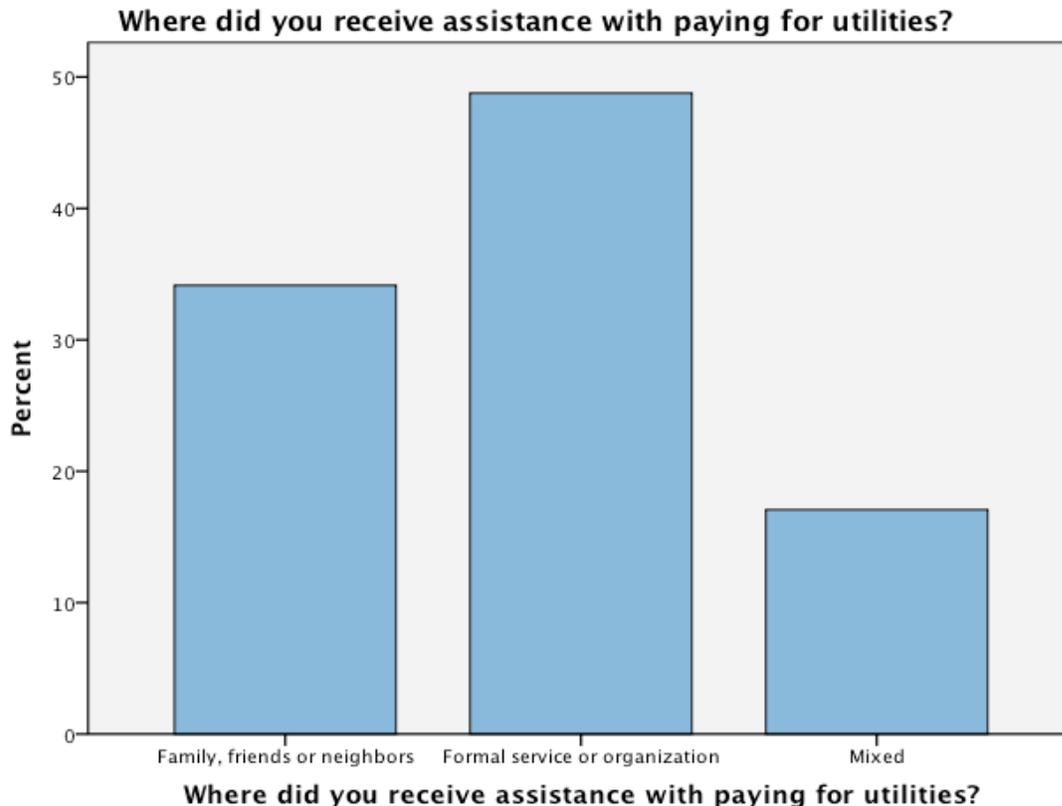


Chart 14: Where did you receive assistance with paying for utilities?

There was no significant correlation between one's confidence in one's ability to pay for utilities and race, the ability to speak English, or the type of support network (informal or formal) utilized.

There was also no significant correlation between one's confidence in one's ability to pay for utilities and one's success at finding support. Those who found assistance in paying their utility bills did not necessarily feel more confident in their ability to pay for utilities. Similarly those who did not find assistance were not necessarily less confident in their ability to pay for utilities. One explanation for this may be that residents who have the means to pay for their utilities do not seek out assistance, and are therefore confident in their ability to pay bills regardless of any help. Another explanation is that those who need help in paying for bills may receive support, but if this support is unreliable or insufficient, their confidence in their ability to pay for utilities may still be low.

The lack of correlation between confidence in local residents' ability to pay for utilities and their success in finding support is highlighted in the comments below, drawn from our interviews:

*"I was expecting my next bill, when it was going to get here. And then I receive a letter saying, 'You're next month's bill is paid, too.' And I was like, 'Who paid it? It wasn't me! Oh my gosh they [Blue Mountain Action Council] paid my bill! And plus they paid the phone bill! I need to send something to them to, you know, appreciate that.' I think it's, you know, nice for them paying whenever you need it. So, that's like, I'm pretty happy when they do that."*²⁶²

*"Um, sometimes there would be like, we can't pay the phone bill, so I let that slide. It's not a necessity. And so sometimes that's how we make up for something else. If it's a tight month, the phones get shut off for a little bit. But I really don't care about not having a phone. I need it cause the kids. So that's usually if we're pretty tight and we can't pay like a bill that's a necessity, like a water bill or a power bill or something. I just take it from the phone bill. And it works."*²⁶³

These quotes are very different in tone, yet both illuminate a lack of expectation from utility services to pay for bills on a consistent basis. Isa is surprised that Blue Mountain Action Council paid for another month of her electricity bill and her phone bill – she had only expected them to pay for one month (and was unsure if they would even provide this much help) and then had assumed that she would be on her own unless she came into BMAC again. She didn't expect any more help than what she asked for, and when that happened, she was elated. Jessica, in turn, never had any expectation at all of receiving assistance through housing or utility services. Instead of looking for help to pay for her utilities, she tried to shuffle money from one fund to the next. Her access to services is not being blocked off in any way (which we know because she tells us she accesses medical support and food support from the state); instead, she purposefully does not seek help with paying for utilities.

These women string together a common theme about the lack of reliance on assistance for utility services in Walla Walla, as well as our interviewees' skepticism that such help is available to them. Either they do not try to seek help, or they are denied when they request assistance, or they are surprised when they are able to get the help they need. These individuals' low expectations for assistance with their utility expenses find further illustration in our survey responses. Fewer people get the support they need for obtaining utilities services than for housing-payment services; 27.9% of survey respondents are unable to get the support they need for utilities services while 14% do not get the support they need for housing. At the same time, the survey found no correlation between one's ability to pay for housing or utility bills on their own and whether they were able to receive help paying for their housing or utility bills. The absence of a correlation between these variables indicates that others factors likely contribute to determining one's confidence in one's ability to pay for housing and utility bills. The lack of correlation between receiving help and one's confidence level in making payments also implies that success in receiving help is not a significant contributing factor to one's overall confidence in one's ability to pay for housing and utility bills. One reason for this may be the lack of expectations from organizations that pay for housing and utility bills. While some survey respondents and interviewees were able to access help once, their confidence to do so again may be unchanged. Another factor influencing this lack of correlation may simply be that while someone is able to get help, the help they

²⁶² Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

²⁶³ Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

receive is not necessarily significant enough to remove insecurities in one's inability to make housing or utility payments due to the portion of the bill they must still pay on their own.

VI. Food Assistance

When asked "How confident do you feel in your ability to find affordable food for your family?" 67.1% of respondents felt confident most or all of the time, 22.8% felt somewhat confident, and 10.1% felt not very confident or not at all confident. 70.0% of survey respondents indicated that they had tried to find help or assistance in finding affordable food for their family. The success rate in finding help was fairly high; 88.9% of respondents who sought assistance with food found the help they needed. The graph below shows respondents' success rate within different levels of confidence.



Chart 15: Confidence level and success rate for finding affordable food.

There was a significant correlation between one's confidence in one's ability to find affordable food for one's family and one's success in receiving assistance.²⁶⁴ Receiving help (whether formal or informal) is correlated to respondents feeling more confident in their ability to find affordable food for their family.

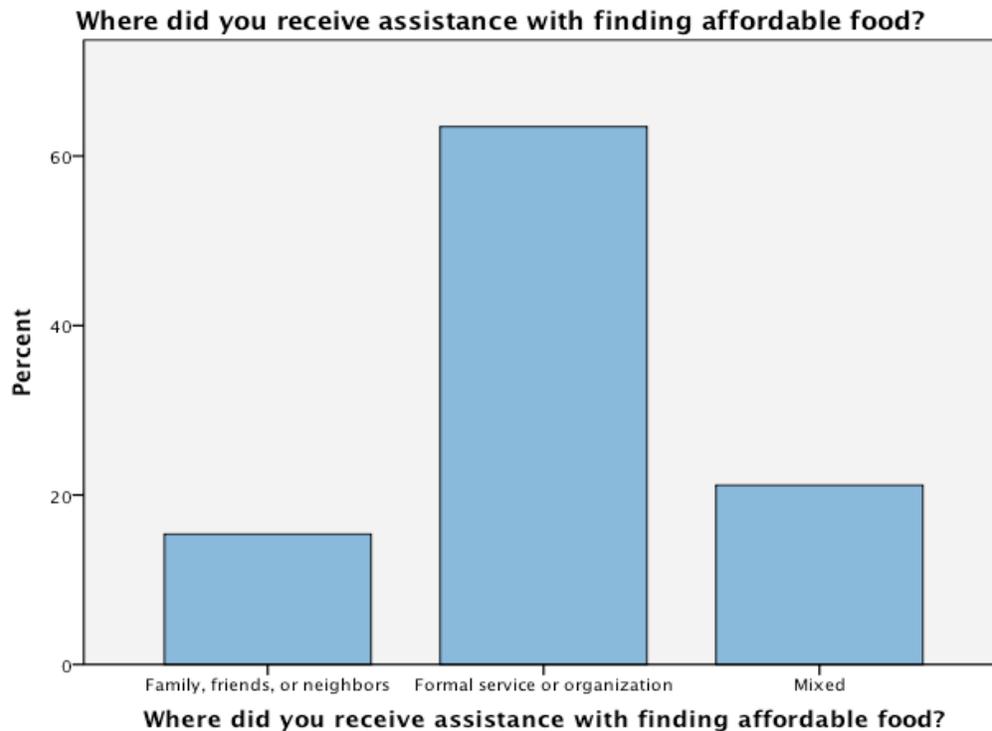


Chart 16: Where did you receive assistance with finding affordable food?

Our research reveals that formal food assistance services are vital to the low-income population of Walla Walla. While 16.5% of families and/or individuals in Walla Walla receive food stamps according to Census data²⁶⁵, **77.2% of survey respondents who received assistance found help through a formal service or organization.**²⁶⁶ According to the Washington State Department of Social and Health Services, a total of 8,112 clients were served through the Basic Food Program in 2010; of those that are on the Basic Food Program, 51.0% are under the age of 18.²⁶⁷

Our survey did not reveal any significant correlation between one's confidence in their ability to find affordable food for their family and race or ability to speak English, the type of support network (informal or formal) utilized, nor was there any relationship between race and one's success at finding support.

Sources of formal or organizational food assistance

There are many organizational food assistance programs in Walla Walla. Many churches are active in food assistance, as are several community organizations. There are six food pantries and monthly food “hand-

264 N = 53, Cramer's V= .603 @ .001

265 US Census data, accessed November 2011

266 Half of survey responses were collected at food distribution hand outs in Washington Park neighborhood. Two were hosted by Second Harvest and Blue Mountain Action Council and one was directly at the Blue Mountain Action Council food distribution warehouse. This may account for an skewed percentage of those receiving assistance from formal services with food services. However, interview data confirms the wide use of both informal and formal support sources for food assistance.

267 Washington State Department of Social and Health Services, accessed December 2011

outs” sponsored by Blue Mountain Action Council and Second Harvest. Many organizations also connect people with various food assistance programs; Helpline is instrumental in connecting people to food pantries as well as assisting them with application processes for state and or federally funded food assistance programs such as Supplemental Nutritional Support Program (SNAP), or food stamps.

Jessica, an Edith and Carrie resident, explains how she receives government assistance: **“We’re on food stamps, and we could not survive without them. So we had to apply for those. And um, recently it’s gotten kind of tough, and I’ve gone to the food give away, and those are really nice to be able to turn to when you need. Kind of get us through the month a little bit easier.”**²⁶⁸ Explaining that she isn’t “too proud” to look for help when she needs it, she expresses a sense of relief to have access to food distributions that occur monthly “if we’re a little bit short on food or something for the month”. She says, “It helps a lot, you know. It gives you something to get through. And that’s nice. I’m glad that they have that. That helps us some months.”

Isa, a 24 year old Mexican immigrant, describes her experiences utilizing formal food assistance services as positive: She describes the food bank to be very friendly, able to help, “wanting to get you as much food as you need and not making you feel dependent.”²⁶⁹

Informal sources for food assistance

Informal support systems, such as family, friends and neighbors are also widely used. Our survey reveals that 30.5% successfully received help from informal networks.

In addition to her utilization of organization and state-based food assistance, Jessica explains her additional reliance on informal networks of support. More importantly, however, is her explanation of her capacity and habit of helping others through informal ways, despite her own food insecurity. She says, **“Everybody around us is having a hard time...I help my friends when I can because there’s some of them that are worse off than us.** You know like, I’ll invite them over for dinner because they’re running low on food, or, you know, **we just all try to help each other.** If we have something that someone else needs, we just give it to them. And vice versa, you know, like if we need something, and our friends have something extra, they’ll give it to us. So we all just try to stick together. It’s the only way to get through sometimes!”²⁷⁰

The interconnectedness of informal and formal networks and services is crystallized above. The use of formal services both allows Jessica to access food for her family, but informally helps her friends and family with food when they do not have enough for themselves. It shows how important both networks are in order to support oneself while living in poverty.

Free and reduced lunch program: differences in geography and race

Most state-funded assistance programs are for families with young children. An important form of food assistance is the free or reduced lunch program in public schools. Reduced lunch is available for students who live in a household that is between 130-185% of the poverty level. For students who live in households with higher levels of poverty, free lunches are provided to them. On average, 14.7% of residents of

268 Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

269 Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

270 Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

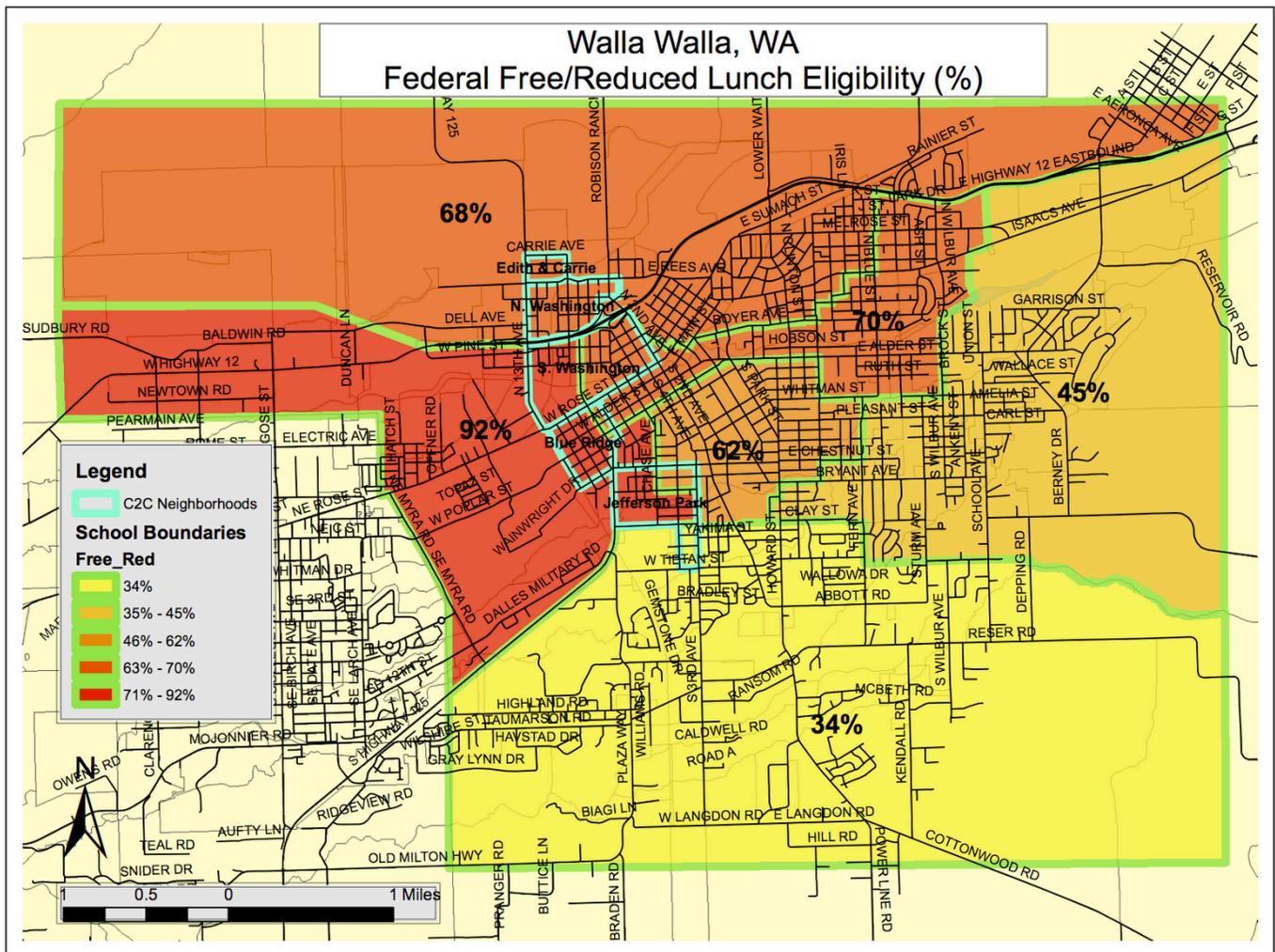
Washington State live in food insecure households.²⁷¹ Students who live in food insecure households have benefited and continue to benefit tremendously from free or reduced meals in schools.

For many children this is the only consistent and nutritional meal they receive all day. Isa explains that she provides food for her neighbor's kids during the summertime because they are under-fed and always hungry during the summer when school is out of session.²⁷² The amount of children in Walla Walla who receive free or reduced lunch is striking: **92% of children within the Blue Ridge Elementary School's boundaries qualify for free and reduced lunch.** Isa's kids also get free/reduced lunch; she wouldn't be able to afford food for her family without at least one meal paid for by the school.

Additionally, food security is an issue that directly confronts C2C's neighborhoods. The map below demonstrates that the five neighborhoods are split between multiple school districts with varying levels of Free and Reduced Lunch eligibility. For example, the southern section of Jefferson Park is in a district with 34% of students eligible, while the majority of Blue Ridge is in a 92% eligible district. Cross-referencing with the map *C2C Neighborhoods – Total Population Under 18* reveals that the majority of Jefferson Park and Blue Ridge youth are part of the Blue Ridge district. The majority of S. Washington youth fall under the Edison school boundary, while N. Washington and Edith & Carrie are completely within the Green Park district. Both of these districts have a Free and Reduced Lunch eligibility rate of 70% and 68%, respectively. With so many youth in majority eligible districts, community organizations must continue to focus on empowering families and children to incorporate adequate diets into their daily routines.

²⁷¹ United States Department of Agriculture Economic Research Service, http://www.ers.usda.gov/Briefing/FoodSecurity/stats_graphs.htm#how_many

²⁷² Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

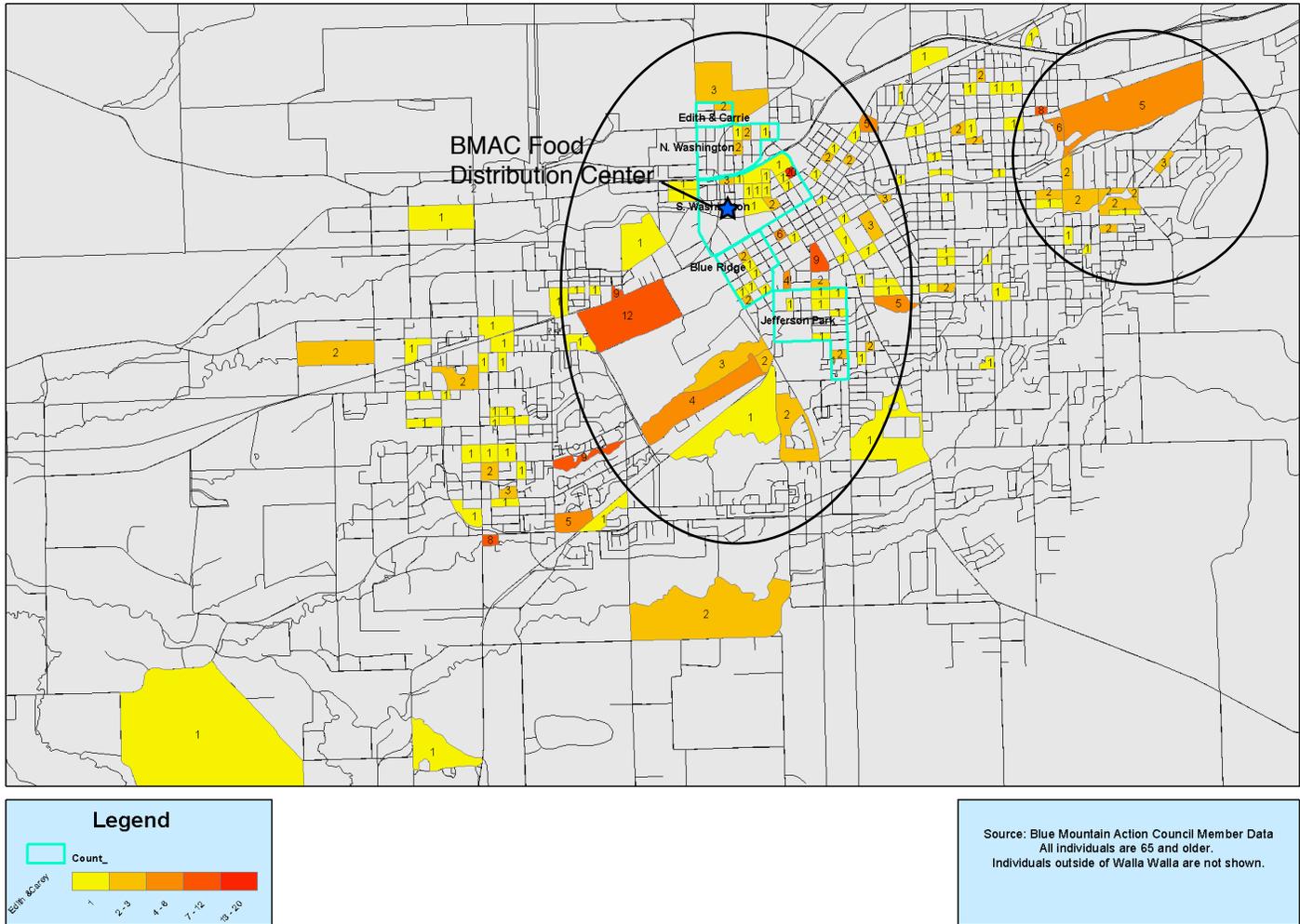


Map 23: Free and Reduced Lunch Eligibility

Moreover There are correlations between the amount of children who qualify for free or reduced lunch (which is determined by poverty level) and racial profiles of these school boundaries. **Of the children who qualify for free and reduced lunch within the Blue Ridge Elementary School boundary, 74% are Hispanic and 20% are White.**

While the previous map considered the nutrition of youth currently enrolled in public schools, the following maps looks at the enrollment of senior citizens (over age 65) in the United States Department of Agriculture Commodity Supplemental Food Program (CSFP). While similar to the Supplemental Nutrition Program for Women, Infants, and Children (WIC), CSFP is an important indicator of senior citizens' abilities access to basic food necessities. Administered by the Blue Mountain Action Council's food distribution center, the CSFP program in Walla Walla has over three hundred participants over the age of 65. The map below gives a general survey of where seniors using CSFP live in relationship to the distribution center:

Food Assisted Seniors - Walla Walla, WA



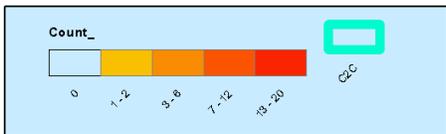
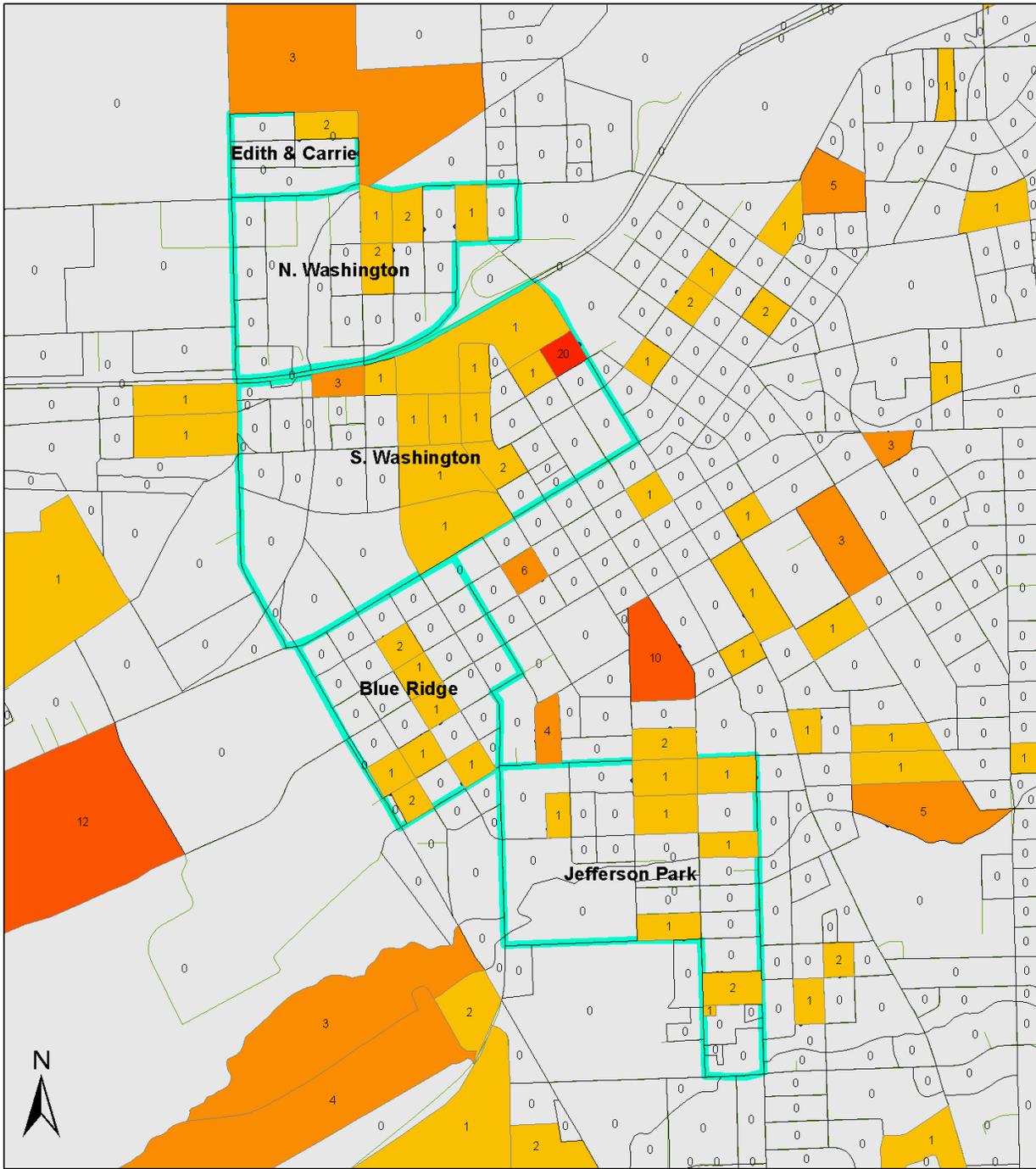
Map 24: Food Assisted Seniors²⁷³

The general distribution of CSFP participants indicates an uneven distribution throughout the city. The ovals inscribed on the map above indicate areas that represent an increased density of participants. Notably, the C2C neighborhoods are not the only locations that have a higher density of enrollment. Census blocks to the south-west of Blue Ridge and Jefferson Park also include a significant number of seniors who rely on the Food Distribution Warehouse for basic nutrition. Additionally, an area to the north-east of the C2C neighborhoods (circled above) has an elevated level of enrolment compared to surrounding areas.

A focus on the C2C neighborhoods specifically indicates that 63 seniors within the five neighborhoods are currently accessing CSFP. The most dense block, located on the north-east border of S. Washington contains 20 individuals currently reliant on CSFP.

273 Blue Mountain Action Council: CSFP Enrollment (2011)

Food Assisted Seniors - C2C Neighborhoods



<Double-click here to enter text>



Map 25: Food Assisted Seniors – C2C Neighborhoods²⁷⁴

VII. Transportation:

Residential isolation as barriers to service access

The location of individual homes in relation to the sites of human services in Walla Walla is crucial to understanding a few additional barriers that individuals face when attempting to access those services. The public transportation system in Walla Walla is not used as much as it could be used, in addition to having a high person-vehicle ratio. While this is the case, transportation, ability to physically access private or public transportation, and ability to physically access a service continues to be a problem for individuals who live in Walla Walla. One interview respondent told us, “Location's fine for me... Well, I mean, I used to live out on Stateline Road, [in a rural area several miles south of Walla Walla], but now that I live here I can walk. But I'm sure for some people that live far away they don't get that” advantage of being within walking distance of town²⁷⁵. The geographical location acts as a barrier to being able to sufficiently say that area is being served equally as other areas. Living on Stateline Road means traveling quite a distance to town and Walla Walla public transportation does not reach that far south.

Another geographical area that is markedly isolated is the Farm Labor Homes. The closest bus stop to the farm labor homes is a mile away from the beginning of the housing development. In addition to being separated from the town by the Washington State Penitentiary, residents of the farm labor homes must walk a mile before they are able to reach a public transportation site. This is a large deterrent for individuals to access this public service due to the nature of the distance.

The distance an individual must travel in order to gain access to public transportation or walk or bike to the service's site can take a toll on that individual's use of services in general. One example Isa describes is the way transportation problems have limited her ability to access the food bank or food distribution events. The food bank specifically “gives you a box full of food for a whole two weeks. It's like a lot of cans, a lot of bags, and they're heavy. So you need to have a car for that kind of stuff. If you want to pick up your food. So let's say well for me it's not hard, but for other people it might be hard because some people, you do see some people walking. Some people, you see just walking with the box to, from the food bank. And it is hard.”²⁷⁶ Isa suggests that walking home from the food bank is much too difficult for anyone to do. Something that is unclear, though, is why those who use the food bank and who do not have their own private transportation are not using the bus.

When an individual needs a ride to a certain location, the tendency is for that individual to call his or her family and friends in the Walla Walla area. Yesi talks about her family's relation to a few taxi cab services in Walla Walla and uses them to get around Walla Walla when she needs to. Additionally, Isa has offered her neighbor and friend rides to appointments, meetings, and other significant events in their lives that they need a ride to.

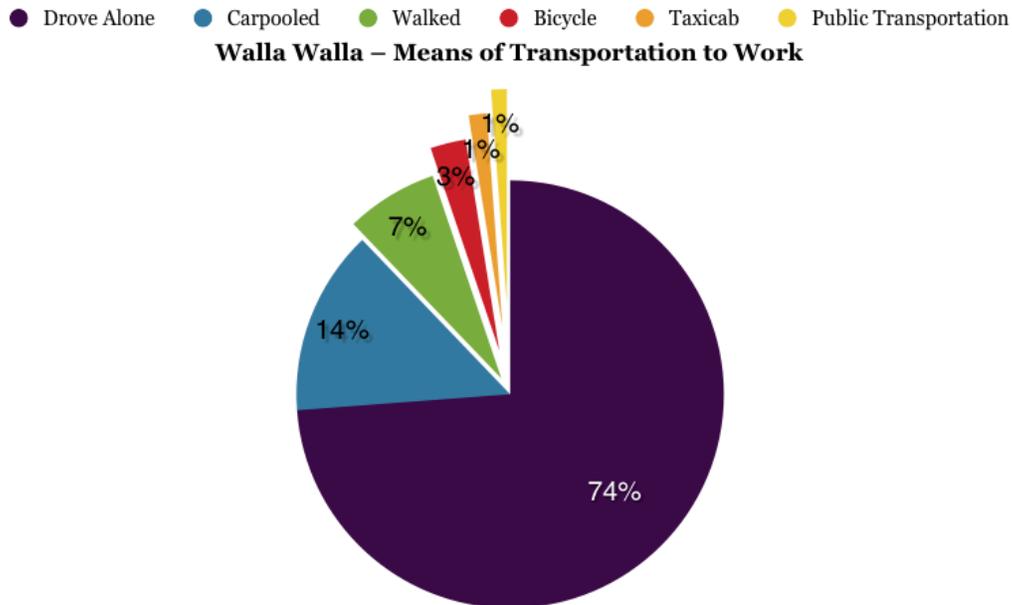
All the narratives speak to the use of informal networks for gaining transportation around the city instead of a heavy reliance on public transportation. In fact, not one person described their experience, or someone they know who has experience, with public transportation. They rely on their friends or family for rides to wherever they need to go. This suggests that informal networks for transportation are strong in these

²⁷⁵ Tesdry, interviewed by Hannah Holloran, Walla Walla Washington, November 19, 2011

²⁷⁶ Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

neighborhoods and that the lack of public transportation is not as problematic because people express that they are able to give or offer rides when needed. Still, the limited use of public transportation should not be ignored because those without strong informal networks of supportive friends and family could still be isolated without access to transportation.

This narrative analysis is corroborated by U.S. Census bureau data that indicates Walla Walla has a high level of car-pooling, in addition to a large demographic individuals who use alternative means of transportation.



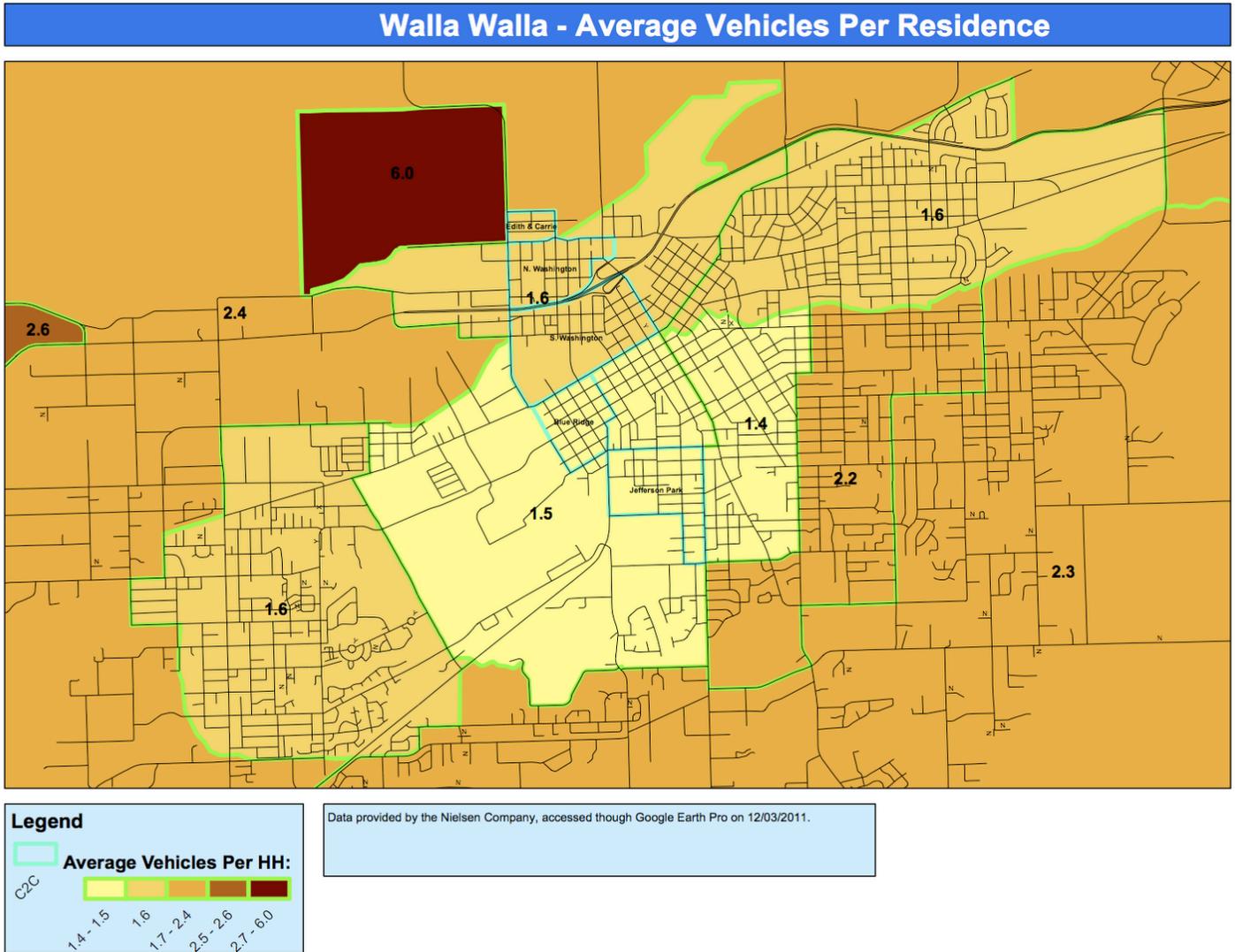
Source: U.S. Census Bureau, "American Community Survey 5-Year Estimates" (2010): B08006. Accessed by C. Weems through *American Fact Finder* on 11/25/2011: <http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_PL_QTPL&prodType=table>

Chart 17: Walla Walla – Means of Transportation to Work

One key tool for understanding issues of transportation access is the physical location of vehicles. Though the City of Walla Walla has enough cars for nine out of ten residents, vehicles are not evenly distributed across the city.²⁷⁷ The map below shows that the census tracts where the C2C neighborhoods are located have between 1.5 and 1.6 cars per household. For comparison, the the average American household possesses approximately 2.28 cars.²⁷⁸ As a cautionary statement, an indication of a value greater than one vehicle on average per household still does not necessarily indicate adequate transportation: cars are still unevenly distributed within their census tracts and furthermore the data set does not take into account recently broken vehicles. Despite these inaccuracies, it is clear that the census tracts representing the C2C communities in Walla Walla demonstrate a below national average level of vehicles per household:

²⁷⁷ Source: Nielsen Company, *Vehicle Access by Place* (2010). Accessed by C. Weems through Google Earth Pro 10/21/2011.

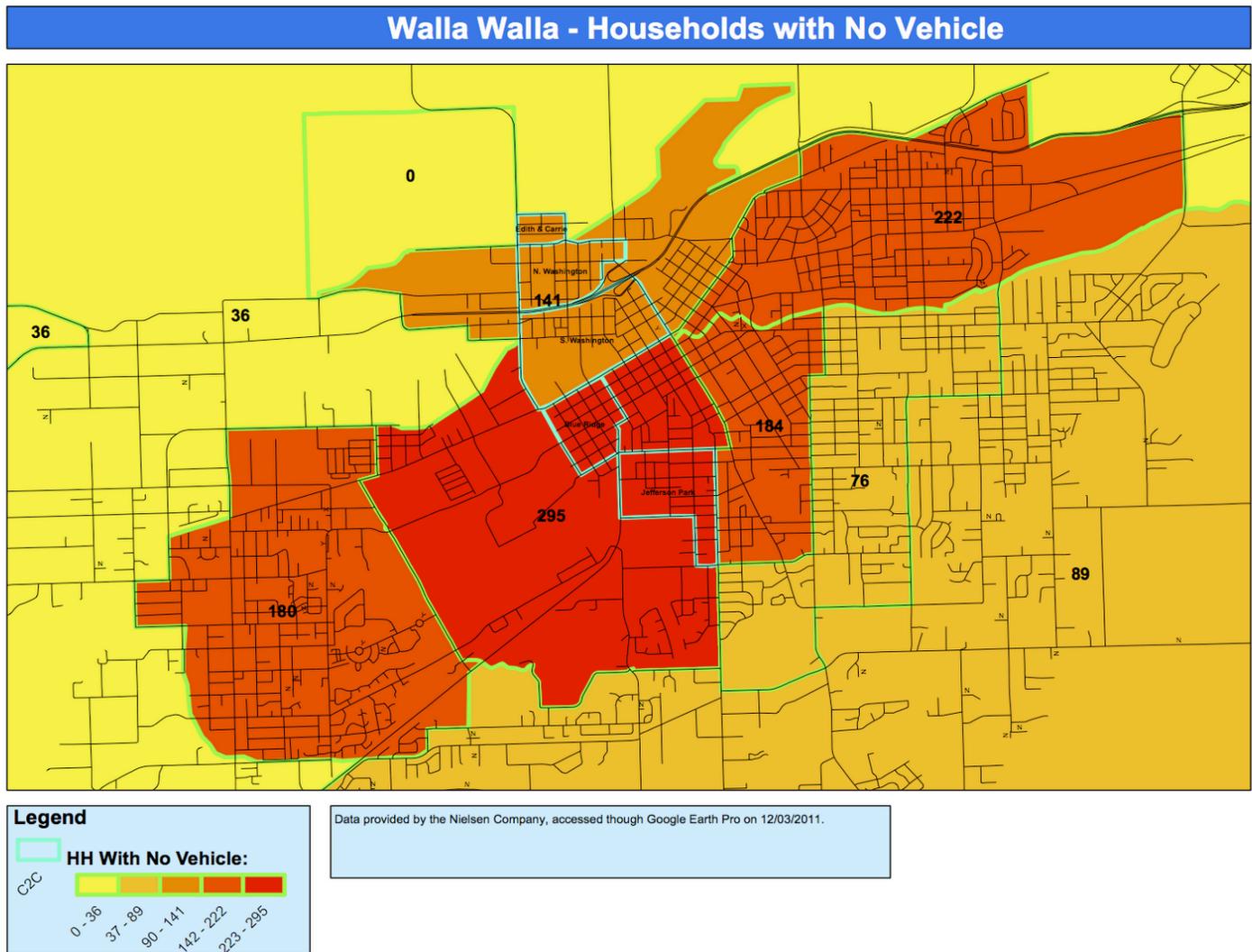
²⁷⁸ Source: Nielsen Company, *Vehicle Access by Country* (2010). Accessed by C. Weems through Google Earth Pro 10/21/2011.



Map 26: Average Vehicles Per Residence²⁷⁹

While the average number of vehicles per household provides a perspective that is normalized by population, it presents a series of statistics that can easily be misinterpreted as indicating that every house has at least one vehicle. This is not the case: the map below enumerates the number of houses with no licensed vehicles for transportation. Bold numbers situated in the middle of census tracts indicate the total number of houses that fall into the category of having no vehicles. Shades of color ranging from yellow to red indicate comparative brackets representing less houses with no vehicles and more houses with no vehicle, respectively.

²⁷⁹ Source: Nielsen Company, Vehicle Availability by Census Tract (2010). Accessed by C. Weems through Google Earth Pro 10/16/2011.



Map 27: Households with no vehicle.²⁸⁰

As with *Walla Walla – Educational Attainment*, census tract boundaries extend beyond the individual neighborhoods, our population density map demonstrates that a significant portion of the population are contained within the C2C boundaries. Edith & Carrie, North Washington and South Washington account for 68% of their census tract population, while Blue Ridge and Jefferson Park account for about 36% of their respective census track.

Transportation a foundation for access to other services. For example Arcury et al. (2006) establish correlations between access to adequate transportation and preventative care visits with a doctor. Furthermore, Caron & Martin (2008) found that there is a, “bidirectional relationship between transportation and employment...” meaning that individuals rely on transportation to both find and maintain jobs, as well as to support the economy through travel to commercial districts. This function as a support for access to other services makes transportation a service of pivotal importance in and of itself.

²⁸⁰ Source: Nielsen Company, Vehicle Availability by Census Tract (2010). Accessed by C. Weems through Google Earth Pro 10/16/2011.

VIII. Zoning in the Commitment to Community Neighborhoods

The concept of the “Neighborhood” is an essential component of Commitment to Community’s organizing strategy. Geographic areas designate where Commitment to Community works to create connections between residents, their neighbors, and other organizations. The current geographic definitions of the Commitment to Community Neighborhoods are based upon town maps originally created by the City of Walla Walla Walla Walla Department of GIS.

While the current neighborhood boundaries relied upon by C2C give a reasonable spatial approximation of its active areas, the true geographic distribution of individuals is complicated by zoning practices. Besides depreciating housing value, Rothwell & Massey (2010) suggest that density zoning and traffic routes have the potential to cause social exclusion and prevent networking between neighborhoods. Additionally, according to Maantay (2001), certain zoning types can cause health hazards or crime depending on the nature of their use. For these reasons, it is essential to examine the zoning within the C2C neighborhoods in order to ascertain whether or not they pose a challenge to the populations they border in the aforementioned ways.

The definitions of the zones incorporated into the *C2C Neighborhood Zoning Map* map are determined by Walla Walla Municipal Codes 20.50-20.100 and have been abbreviated and annotated below:

Single Family Residential (R-60/R-72):

- The high density R-60/R-72 Single-Family Residential Zones are intended to provide a greater range of housing densities than the other single-family zones.
- **Note:** these zones have been combined on the basis that they differ only in terms of minimum lot-size and not in purpose. Additionally, the majority of housing in C2C Neighborhoods is categorized as R-60, with the only instances of R-72 zoning occurring in the southern most section of Jefferson park. Due to the similarities in purpose, this merge of zoning classes was deemed permissible.

Multi-Family Residential (RM):

- The Multi-Family Residential Zone is intended to accommodate a compatible mixture of multi-family residential uses. Such areas generally serve as transition or buffer zones between major-arterials or more intensively developed commercial areas and residential districts.

Heavy Industrial Zone (IH):

- The Heavy Industrial Zone is intended primarily to provide adequate land area for **the location of a broad range of industrial activities which may be their nature create a greater degree of hazard or annoyance than would be permitted in any other zoning district.** Certain uses such as residential and retail businesses are not permitted in this Zone in order to promote a viable heavy industrial area which will not be injurious to nor hindered by incompatible uses.

Light Industrial Zone (IL-C)

- Provide for the development of areas near designated truck routes, highways and railroads in which certain types of industrial activities, which do not generate noise levels, light, odor of fumes that would constitute a nuisance or hazard, and which do not create exceptional demands upon public facilities and services may be located.
- Permit in the same areas such commercial uses as may be compatible with the light industrial activities.
- Protect such areas from other uses which may interfere with the stated purposes and efficient functioning of those purposes.

Public Reserve (PR):

- Protect and preserve certain areas of land devoted to existing and future use for civic, cultural, educational, and similar facilities

- Provide for the social needs of the community as those needs relate to public services, open space, and institutions whether publicly or privately sponsored;
- Enhance the identity and image of the community as a desirable place for human growth and development;
- Provide opportunities and facilities for the various activities and needs of a diverse and dynamic population.
- Provide and protect parks, open space, and other natural, physical assets of the community to improve the aesthetic and functional features of the community.

Commercial Zones (CC/CH):

- The Highway Commercial Zone is intended to accommodate a wide range of commercial activities which largely depend upon proximity to major streets and arterials for trade and transportation. The types of uses permissible in this zone are generally similar to the types permissible in the central commercial zone, except that additional automobile- oriented businesses and land extensive commercial activities such as automobile sales lots, greenhouses and nurseries, lumber yards, etc., are permissible.
- Note: while the Highway Commercial Zone is the most frequent commercial zoning within the C2C neighborhoods, it should be noted that the commercial zone to the West of 2nd Avenue is classified as a Central Commercial Zone and is therefore restricted to certain uses.

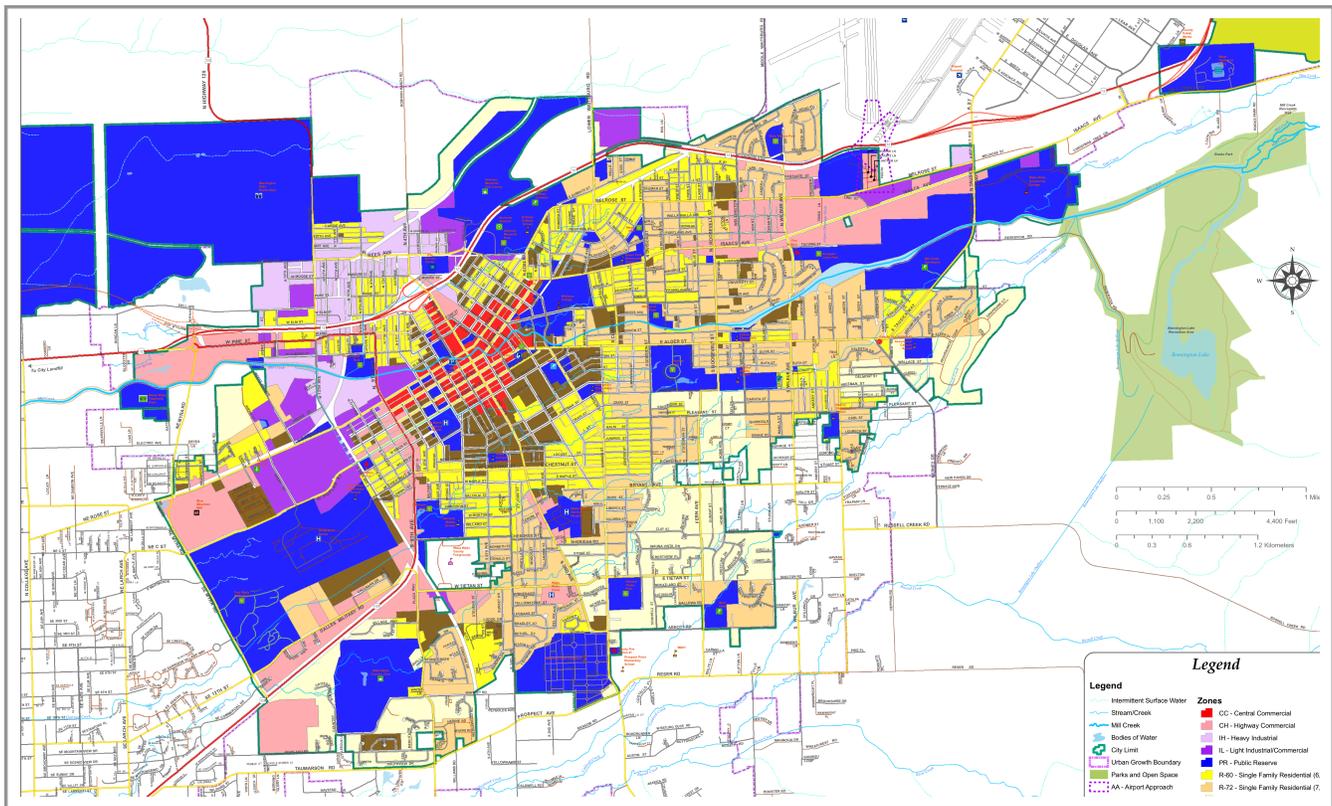
The Walla Walla Zoning Plan

This map shows the physical locations of the types of zones listed above. Heavy industrial zoning is indicated by light purple, while light industrial zoning is indicated by dark purple. Yellow indicates areas designated for residential use. **This map demonstrates that of *all* residential areas in Walla Walla, the Commitment to Community Neighborhoods and two housing blocks located on NE Rose St. are the only residential areas to be bordered by industrial zoning.** While our secondary research has shown that mixed zoning can improve the walkability of a residential area, industrial zoning must be accompanied by significant amounts of commercial and “green” zoning in order to be perceived as both safe and walkable.²⁸¹

²⁸²

²⁸¹ Frank et al. 2004

²⁸² Neckerman et al. 2009



Map 28: Walla Walla Zoning Plan²⁸³

In general, zoning corroborated by population density reveals that neighborhood residents are not in fact best represented by their current geographic boundaries. Instead, residential populations are geographically fragmented and often interwoven with industrial and commercial zoning. Geographic fragmentation makes isolation from the greater Walla Walla community a key concern. By portraying the C2C neighborhoods as abutting, their geographic segregation from each other and the town is significantly downplayed. While other residential areas in Walla Walla are often uninterrupted by industrial and business zoning for multiple blocks, the C2C neighborhoods are disrupted by their neighboring zones.

Edith and Carrie:

The current geographic definition of Edith and Carrie as a roughly rectangular shape between 13th and 9th Avenues, extending from Carrie Ave. to West Reese Ave. has some significant shortcomings but also provides several significant insights:

- It is not representative of where the population of Edith and Carrie is situated. Nealy half of Edith and Carrie as currently depicted is zoned for Heavy Industry. Additionally, a portion of the population extends beyond the current bounds on Edith Ave.
- The population of Edith and Carrie is significantly removed from other residential neighborhoods. According to Talen (2005) this could make social connections between Edith and Carrie and other neighborhoods difficult due to a lack of income diversity associated with removed low-income communities..

283 City of Walla Walla, Department of GIS (2010)

- Bordered by Heavy Industry zoning on three sides, residents of Edith and Carrie are potentially vulnerable to health and well being issues that are sometimes associated with industrial land use.

Satellite imagery²⁸⁴ demonstrates the prominence of the industrial zoning bordering Edith & Carrie. Such environments have the potential to weaken neighborhood connectedness.²⁸⁵



Figure 2: Satellite image demonstrating proximity of industrial and residential zoning in North Washington Park.

North Washington:

Multiple geographic factors have the potential to isolate the population of North Washington:

- North Washington is bordered to the west, north, and north east by industrial zoning.
- Additionally, the neighborhood is located on the opposite side of Highway 12 from the down town of Walla Walla.

Satellite imagery demonstrates large swaths of industrial land in close proximity to North Washington. Highway 12 limits pedestrian and motor traffic towards down-town Walla Walla to two entrances and exits.

284 Source: maps.google.com, Walla Walla, WA. Accessed 01/10/2012

285 Bothwell et al. 1998



Figure 3: Satellite image demonstrating proximity of industrial and residential zoning in North Washington Park.

South Washington:

- South Washington’s residential population is bordered on multiple sides by Heavy Industrial Zoning.
- While South Washington appears to border North Washington, 9th Ave. is the only way to travel between the two due to the presence of Rt. 12. Additionally, 9th Ave. does not connect directly to a residential area, but passes through commercially zoned lots first.

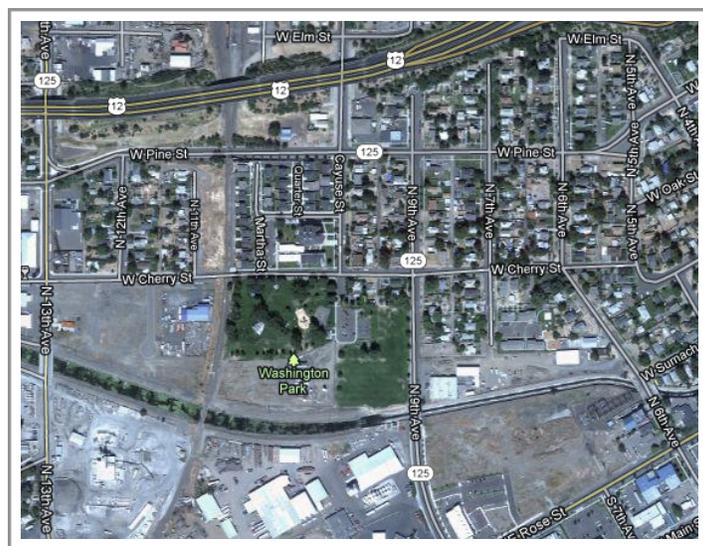


Figure 4: Satellite image demonstrating proximity of industrial and residential zoning in South Washington Park.

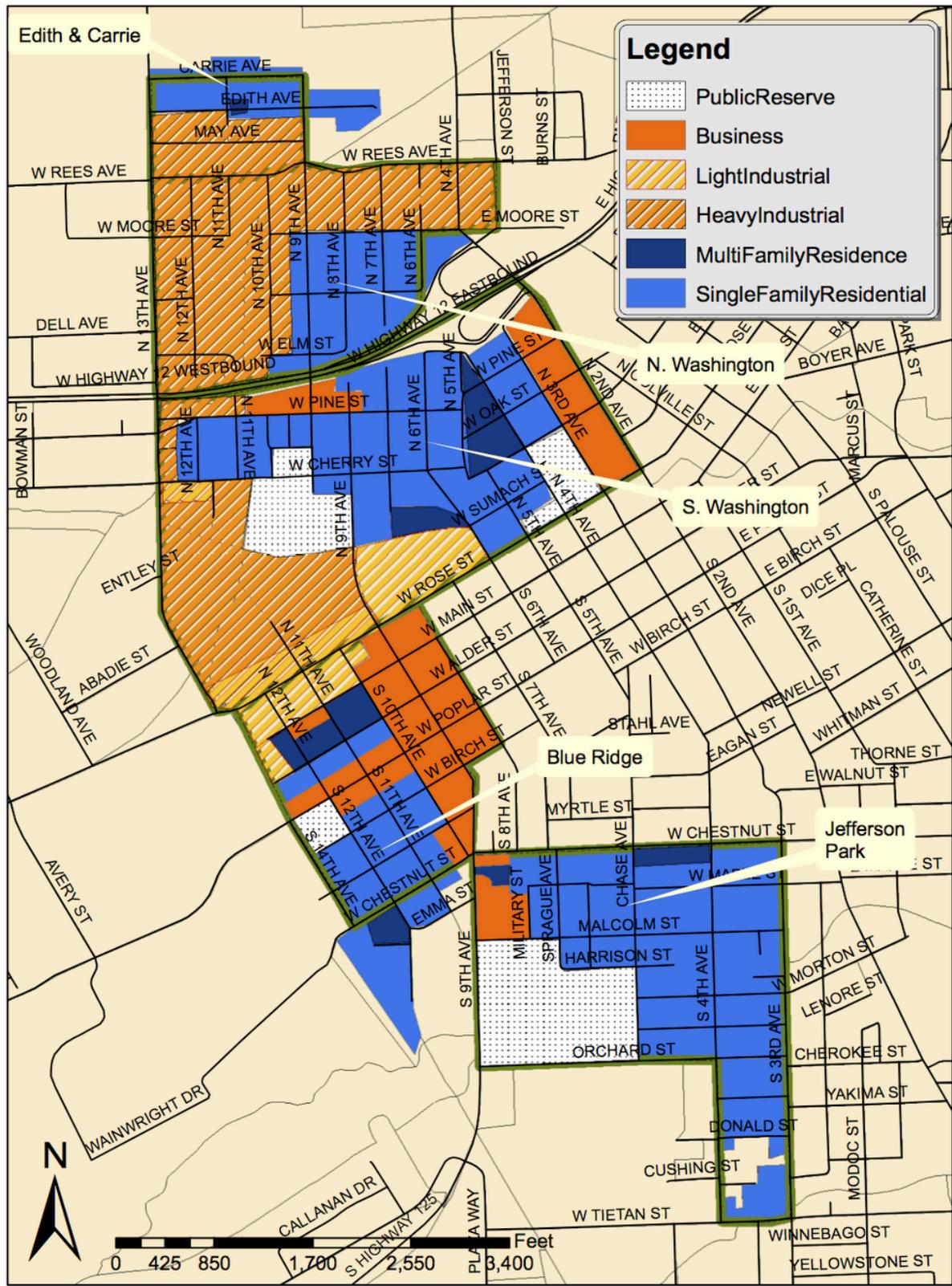
Blue Ridge:

- Blue Ridge is surrounded by commercial zones on three sides, with six blocks separated to the north-west by West Poplar Street. Additionally, blue ridge is bounded by 9th Avenue, a busy street that saw a high daily traffic count of 18,555 cars per day in 2010.²⁸⁶ Thus, while it is closer to downtown, Blue Ridge also presents symptoms of isolation that are not as prevalent in other residential areas of Walla Walla.

To reflect the zoning gaps between each neighborhood, we have created a supplementary map that is centered more on populations rather than on geographic areas. This map is supplemental rather than a replacement due to the fact that adjoining territories have the appearance of unity (Monmonier 1996). The purpose of this map is neither to reinforce the idea that the C2C neighborhoods are isolated, nor to create smaller areas for C2C to focus on as an organization. Instead, its intent is merely to demonstrate where potential challenges to inclusion exist. Areas in blue indicate the residential areas within the Commitment to Community Neighborhoods, while Orange and Red indicate industrial and business zoning.

286 MPSI Knowledge Support Systems Company: U.S. Daily Traffic Counts (2010). Accessed by C. Weems on 11/25/2011 through Google Earth Pro: www.mpsisolutions.com

C2C Neighborhood Zoning

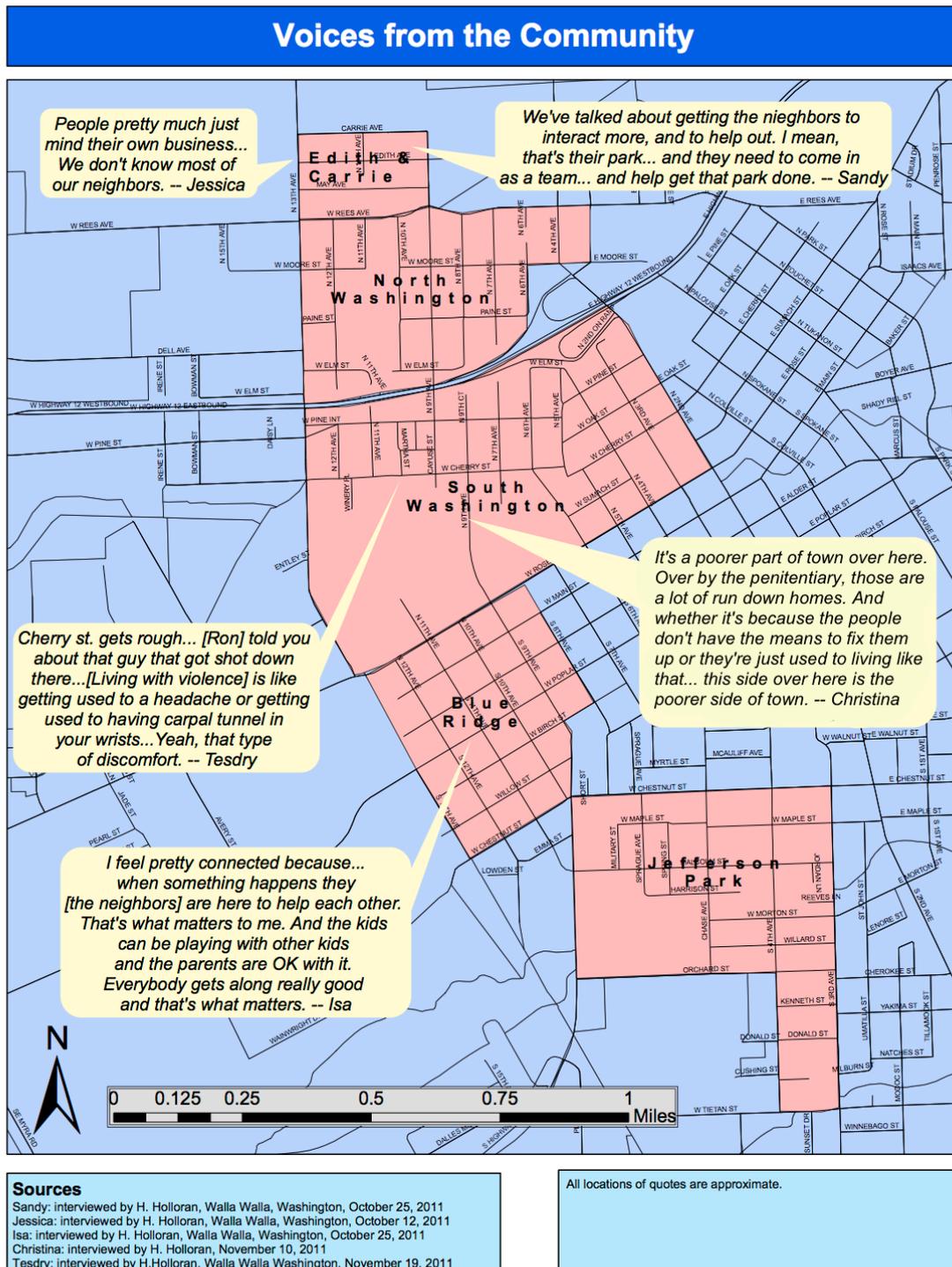


Map 29: C2C Neighborhood Zoning²⁸⁷

287 City of Walla Walla, Department of GIS (2010)

IX. Neighborhood Satisfaction, Attachment, and Involvement:

Neighborhood satisfaction and attachment are key factors when determining levels of neighborhood participation with neighborhood-based organizations. Our survey and interviews explored different factors effecting satisfaction and attachment in the Commitment to Community neighborhoods. The factors we focused on were physical and crime environments and social atmosphere of the neighborhoods. Map 30, “Community Voices” illuminates the differences in sentiments of these neighborhoods.



Map 30: Voices From the Community

Neighborhood Attachment and Involvement

Prior research affirms that an increase in satisfaction with ones neighborhoods will increase positive social attachments (Dassopoulos 2011). Neighborhood attachment increases ones ability to access individual people (informal networks) or human services (formal networks) they need support from. Informal networks are groups of individuals who know and interact with each other on an informal basis, or Waldoﬀ’s definition of social neighboring and informal problem-solving (Waldoﬀ 2002). Formal networks are established groups of people and organizations and is similar to Waldoﬀ’s definition of routine neighboring and formal problem-solving (Waldoﬀ 2002). It is important for individuals to feel both satisfied with and attached to their neighborhoods in order for them to be able to access the informal and formal networks around them. Our survey measured these characteristics by asking “Do you know your neighbors?” and “Do you feel safe in your neighborhood?”, “Do you like living in this area?”, and “How interested are you in participating in local organizations or groups in your community?” The interview asked respondents to explain how and why they felt connected or not to their neighborhood.

When asked, “Do you like living in your neighborhood?”, 80.2% of survey respondents said that they liked living in their perspective neighborhood. This suggests that the people surveyed from neighborhoods in which C2C is actively working are generally satisfied in their neighborhood.

Prior Research links high neighborhood satisfaction with neighborhood attachment, as we have discussed above. In particular, research suggests a link between neighborhood attachment and whether or not neighbors know each other and interact with one another. When asked, “Do you know your neighbors?” 66.7% of survey respondents responded yes, they know their neighbors.

In addition, those interviewed explained that they feel connected to their neighborhood because they are familiar with their neighbors and feel comfortable interacting with them and sharing public spaces. Having friends and feeling close with the people in their neighborhood is important for a lot of people to feel connected to a particular local-geographic area. When these connections do not exist, the people we interviewed felt that something important was lacking: Tesdry, for instance, talks about not having friends in the neighborhood, and how he feels disconnected as a result.²⁸⁸

Our survey revealed that residents within the three neighborhoods (South Washington Park, Blue Ridge and Edith and Carrie) overall have strong interest in being involved in their neighborhood. **71.8% of respondents are somewhat or very interested in participating in local organizations of groups in their community.** When looking at racial differences, **interest in community involvement was higher in Latino respondent population than the white survey population; 80% of Latino respondents were somewhat to very interested in participating in local organizations or groups in their community compared to 60.6% of white respondents.**

It is interesting to note that while interest in community involvement is high, only 53.0% of survey respondents felt that their residence was near an important social group, such as a church organization. This suggests that residents may be traveling outside of their immediate neighborhood or surroundings to be involved with community organizations or other social activities.

²⁸⁸ Tesdry, interviewed by Hannah Holloran, Walla Walla Washington, November 19, 2011

Physical, crime environment and neighborhood attachment

When asked whether or not they felt safe in their neighborhood, 74.7% of respondents reported that they felt safe. Research has shown that physical environment largely influences whether or not one feels attached to their neighborhood, which can either encourage or discourage personal involvement in the community (Austin 1990). Anecdotes from individuals interviewed in all three neighborhoods confirm the relationship between one's feeling of attachment to their community and one's environmental surroundings:

“I like Walla Walla because for my daughters, [Washington Park], is good. Not too much crime, no drugs, and pretty close to where I work. Our little neighborhood here, because we live on this dead end, our kids can just go out and ride bikes. I mean we're always outside with them anyways, but it's just so nice that we don't have to worry about the crime.”²⁸⁹

The concept of public spaces emerges from the interviews as important to many of the respondents in their feelings of neighborhood connections and comfort in a neighborhood. Many people discuss their involvement with park construction and upkeep as positive experiences that have brought them closer to their neighbors. There is even a greater desire for more park involvement in certain areas (especially Edith and Carrie) as a way for residents to keep the park clean and to improve their relationships with their neighbors.

The importance of these different approaches to feeling attached to one's neighborhood are emphasized by Woldoff (2002). Individuals can be and are attached to their neighborhood in many different ways; what is important is their opportunity to have personal interactions with other neighbors, which can increase access to support networks and human services. The more an individual feels comfortable in, forms attachments within, and participates with neighbors in the neighborhood community, the more likely that individual is to be able to access help when the need arises (Woldoff 2002). These are the connections that form the informal networks based on friendship that link people to services. And, from our research findings, it is clear that these networks can facilitate people's access to many different social services.

Differences between Commitment to Community neighborhoods

Commitment to Community's office is located in the South Washington Park neighborhood. There are three neighborhood organizers working for Community to Community, each assigned to one neighborhood: South Washington Park, Blue Ridge and Edith and Carrie. Although the amount of survey respondents from each neighborhood is too low to draw any generalizations about the neighborhood as a whole, analyzing responses about neighborhood satisfaction and attachment from those interviewed helps give insight onto current attitudes about neighborhoods and community involvement. Acknowledging that respondent pools were low, we can still see that there are differences in neighborhood satisfaction and attachment between the different neighborhoods, especially in South Washington Park. Below, we provide important statistics from each of the neighborhoods.²⁹⁰

Blue Ridge:

76.9% of survey respondents from Blue Ridge felt safe in their neighborhood. 76.9% felt they knew their neighbors. Neighborhood satisfaction and interest in community involvement among the survey respondents

²⁸⁹ Moses, interviewed by Hannah Holloran, November 10, 2011

²⁹⁰ The respondent pool for South Washington Park is 13; the respondent pool for Blue Ridge is 13; the respondent pool for Edith and Carrie is 8. The small number of respondents in each neighborhood limits the possibility of drawing conclusions for each neighborhood, but the results are still meaningful in gauging some of the current attitudes and practices regarding service use in Walla Walla.

from Blue Ridge was high; 76.9% also reported that they liked living in their neighborhood and **91.6% of were interested in participating in local organizations or groups in their community**. This is positive for Commitment to Community's plans to develop a presence and engage neighbors in organizational activities.

Neighbors in Blue Ridge seem to have already established informal networks amongst themselves: "I feel pretty connected because when something happens, [my neighbors] are here to help each other. That's what basically matters to me. And kids can be playing with other kids, and the parents are ok with it... Everybody gets along really good and that's what matters."²⁹¹ Commitment to Community has been able to tap into this preexisting network and hopes to continue strengthening ties between neighbors through community improvement project, such as park restoration and playground construction.

Isa tells us that she does not know much about Commitment to Community except for the little that Lupe has helped her with so far - getting a calendar for opportunities to volunteer with seniors. She characterizes her lack of knowledge about C2C as a place for her to learn how to access many different things she may not have been able to before: "It's hard to work with... disabled kids. I was telling Lupe I want to start... helping seniors because I like to work with seniors, too. So, she was [telling] me they were going to be doing some stuff this week. I'm going to call them and see what I can do to help them because I would like to work with seniors." She also later states that, "Right now I don't need [help], but maybe later on if I need it, I can ask [Lupe]."²⁹² Both quotes support our survey results, which indicate a large percentage of individuals in Blue Ridge are interested in participating in local organizations. Neighborhoods that already have strong indicators of neighborhood satisfaction and attachment are more likely to participate in local organizations or groups.

Edith and Carrie:

75% of survey respondents felt safe in their neighborhood. Only half of survey respondents from Edith and Carrie felt that they knew their neighbors. Similar to Blue Ridge, 75% of respondents from Edith and Carrie were interested in participating in local organizations or groups in your community. Still, **neighborhood satisfaction was high; 87.5% of respondents reported that they liked living in their neighborhood**.

While survey results demonstrate high numbers of satisfaction, the narratives tell a different, more complex story about neighborhood satisfaction in Edith and Carrie:

"We've talked and talked about getting the neighbors to interact more, and to help out. I mean, that's their park. That isn't our park. That's everybody's park! And they need to come in as a team, or... and help get that park done. It's not finished yet.... They just need to help out with the park. Their kids use it, and if they want their kids to have a nice place to play, then I think they should give up an hour or two to help out. It don't have to be all day long, just an hour or two would be nice. It started out that way and it's just like, it just kind of went away."²⁹³

"The neighbors need to know the neighbors... what's going on, and watch the other neighbors with all the stuff that's going on."²⁹⁴

291 Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

292 Isa Diaz, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

293 Sandy, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

294 Sandy, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

“People pretty much just mind their own business... We don't know most of our neighbors. We know a few of them. My in-laws live across the street so, we know them and a few others, and that's pretty much it! We don't really try to meet them.”²⁹⁵

“There's some people that cause friction, but the rest of us just try to stay out of it. Our neighbors party a lot. And some people just have different lifestyles. We have little kids. My husband works all the time; I'm a stay at home mom. That's our life. And other people, you know, other people, it's just different for them. And that's fine! But sometimes that interrupts our life. Like when they party late at night. So that's kind of an issue that we have to handle sometimes.”²⁹⁶

Jessica's lack of acquaintanceship with her neighbors is telling of the 50% divide between residents of Edith and Carrie who do and do not know their neighbors. This is an important aspect of neighborhood attachment: routine and social neighboring (Waldoff 2002). Strong satisfaction or attachment are lacking in the Edith and Carrie neighborhood, as is demonstrated in the statistics calculating how well individuals know their neighbors and the narratives above. Disconnected neighbors are more difficult to engage in community events, such as working in the park together, because satisfaction and attachment is so low.

South Washington Park:

61.5% of survey respondents from Washington Park reported that they like living in their neighborhood. **Respondents from South Washington Park feel less safe in their neighborhood than those from Blue Ridge**; only 53.8% of respondents felt safe in their neighborhood. Only 53.8% of respondents felt like they knew their neighbors as well. **Interest in community involvement among the respondents from South Washington Park was much lower**; only 61.8% were somewhat to very interested in participating in local organizations or groups in their community. These findings are interesting, considering Commitment to Community has its strongest presence in South Washington Park, and their office/childcare center is located within two blocks of all respondents here.

While Commitment to Community's office is in South Washington Park, and much of their activity is centered here, our research shows that much work can be done in this neighborhood to increase the level of satisfaction and attachment among South Washington Park resident:

Survey respondents from South Washington Park felt least safe in their neighborhood compared to responses from residents of Edith and Carrie and Blue Ridge. The extent to which South Washington Park respondents felt that they knew their neighbors and their level of interest in participating in neighborhood organizations were also significantly lower than the other neighborhoods.

Half of survey respondents from Washington Park know of a person or service that could help improve their employment-related skills, such as searching for job listings, speaking, reading or writing English or resume-construction.²⁹⁷

South Washington Park resident's children refer to their neighborhood as a “ghetto”. When asked why the parents thought their children called Washington Park a ghetto, Christina told us, “Because it's a poorer part

295 Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

296 Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011

297 The respondent pool for South Washington Park is 13; the respondent pool for Blue Ridge is 13; the respondent pool for Edith and Carrie is 8. The small number of respondents in each neighborhood limits the possibility of drawing conclusions for each neighborhood, but the results are still meaningful in gauging some of the current attitudes and practices regarding service use in Walla Walla.

of town over here. And especially a lot of the homes and stuff over by the penitentiary, those are a lot of run down homes... Whether it be people don't have the means to fix them up or they're just used to living like that... This side over here is the poorer side of town."²⁹⁸

In combination with feelings of a lack of safety as evidenced by survey responses and narratives from interviewees, it is clear that South Washington Park also has physical stresses that trigger detachment from formal services: "Cherry St... gets rough. Like [Ron] told you about the other guy that got shot down there... [Living with violence] is like getting used to having a headache of getting used to having carpal tunnel in your wrists... Yeah, that type of discomfort."²⁹⁹

The physical stresses neighbors face creates the challenge to foster a positive neighborhood environment in South Washington Park when such negative physical stresses are so visible. Austin (1990) discusses the affects crime and neighborhood environment has on an individual's attachment to their neighborhood. While positive aspects are being introduced to the neighborhood, there are more pressing negative stresses that are affecting one's ability to attach to one's neighborhood.

Police report data supports the analysis that violence is more prevalent within the Northern C2C neighborhoods of Edith & Carrie, North Washington and South Washington. Below, a sectional map of police zones has been used to depict the total number of calls for service between 1999-2001, giving a broad base for data analysis. The total number of calls per police district were enumerated and then divided by total population of the district to get the average calls made per individual during this 11.5 year period.

The results show that on average, 12.26 calls were made to the Walla Walla Police Department over the 11.5 year period; slightly more than one call per person per year. This rate is nearly double that of other police districts to the north-east of the C2C neighborhoods.

Detachment from the neighborhoods

There is a general tendency for neighbors to create distance between them and people they see as being problematic in their neighborhood or other neighborhoods.

"What I'd like to see some changes would just be all the slum lords... Make them move, make them more responsible for cleaning up and getting houses looking good. The slumlords where they just collect the money and they don't care what it looks like... They just care about the money and they don't make any, they don't fix anything. Because I know there's a lot of those, especially on that side of town [in Edith and Carrie]."³⁰⁰

"I like Carrie. I don't care for Edith. Um, but Carrie, it's changed since the last time I'd seen it. And I visit cause my sister lived here, and I didn't like what was going on then, and I don't like what's going on now, cause of Edith. I mean, we got a drug house right back there, and that's bad. Uh, the cleaned up Carrie. I just wish they'd clean up Edith. Then it'd be a good neighborhood."³⁰¹

298 Christina, interviewed by Hannah Holloran, November 10, 2011

299 Tesdry, interviewed by Hannah Holloran, Walla Walla Washington, November 19, 2011

300 Christina, interviewed by Hannah Holloran, November 10, 2011

301 Sandy, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011

The separation between oneself and another group of people within one's neighborhoods creates a divide between individuals within those community's - breaks down routine and social neighboring (Waldoff 2002) - and breaks down the attachments formed within that community. Distancing oneself from the negative attributes of a neighborhood or city seems important in order to understand oneself within that community. If the person talking is not part of a gang, user of drugs or violence and do not identify their home as part of a ghetto, it is easy to point to the individuals who are bringing around those negative physical stresses.

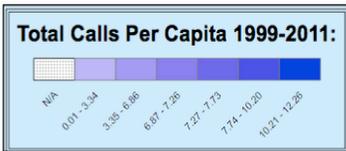
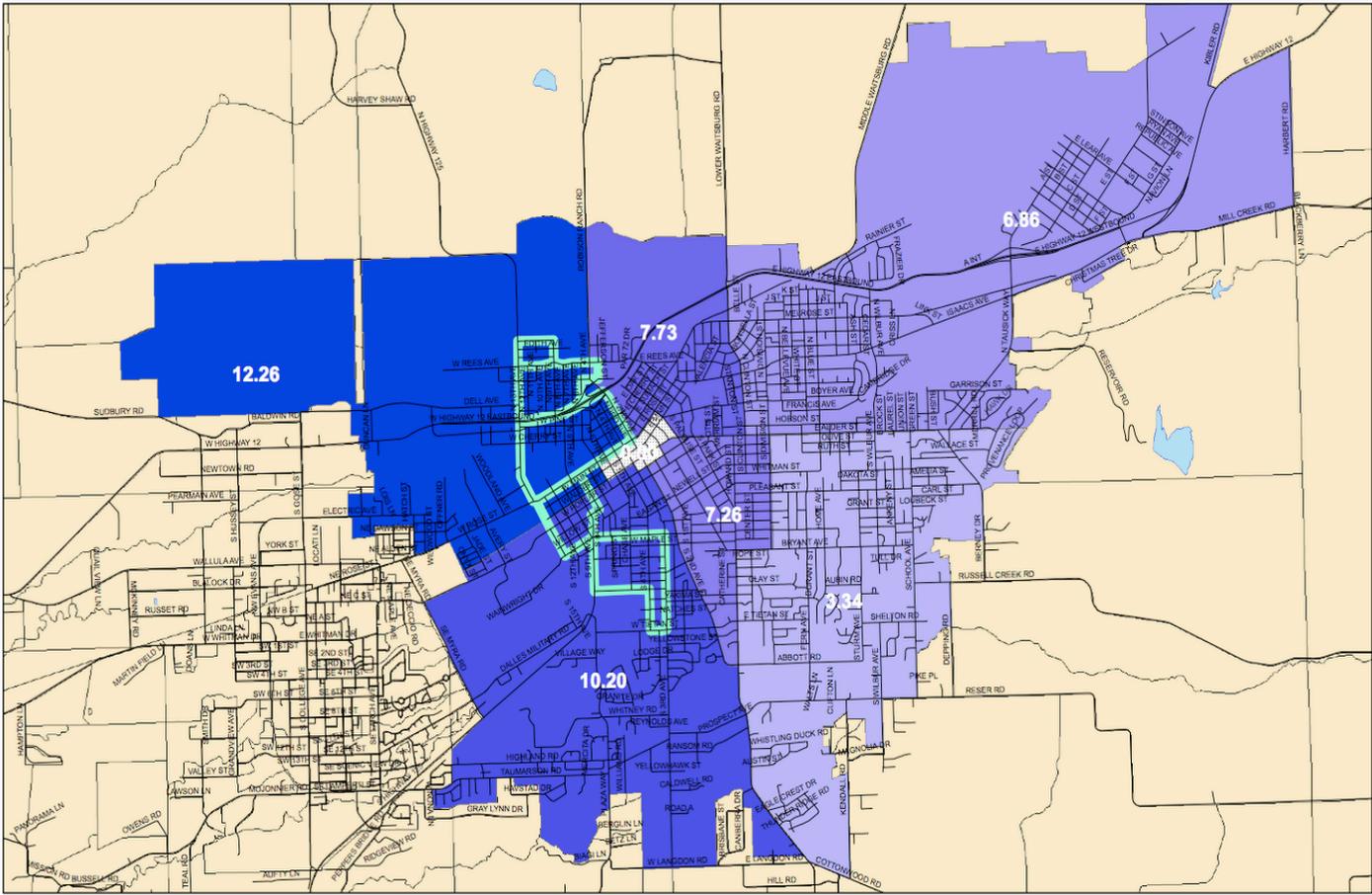
While detachment is prevalent in neighborhoods currently, specifically in Edith and Carrie, North Washington Park and South Washington Park, it is clear that conditions could be improved. Overall, neighbors want to get to know their neighbors, interact more with their neighbors, and hold fun neighborhood gatherings.³⁰² Neighbors want to work together to make their neighborhood better, create a better environment and form social attachments; the barrier of crime, violence and negative physical stresses in the environment need to be lifted before these new attachments can be formed.

Police Reports as Indicators of Focus Areas

Maps 31-33 depict the locations of various incidents reported to a dispatcher at the Walla Walla Police Department. The maps generally demonstrate a trend towards elevated incident levels in two north-south bands in Walla Walla. The first aligns with the Commitment to Community Neighborhoods, while the second aligns with a series of census blocks near North Wilbur Avenue and Isaacs Avenue.

³⁰² Christina, interviewed by Hannah Holloran, November 10, 2011, Sandy, interviewed by Hannah Holloran, Walla Walla, Washington, October 25, 2011, Jessica Palmer, interviewed by Hannah Holloran, Walla Walla, Washington, October 18, 2011, and Tesdry, interviewed by Hannah Holloran, Walla Walla Washington, November 19, 2011

WWPD - Total Calls For Service Per Capita (1999-2011)



This map was created using categorized calls for service to the Walla Walla Police Department compiled between 1999-2011. This information gives a broad perspective on where certain types of social problems are most common in Walla Walla. However, this data does not explain underlying causes or circumstances related to the number of police calls and should not be taken as a reflection or stereotype of the residents of these police districts.

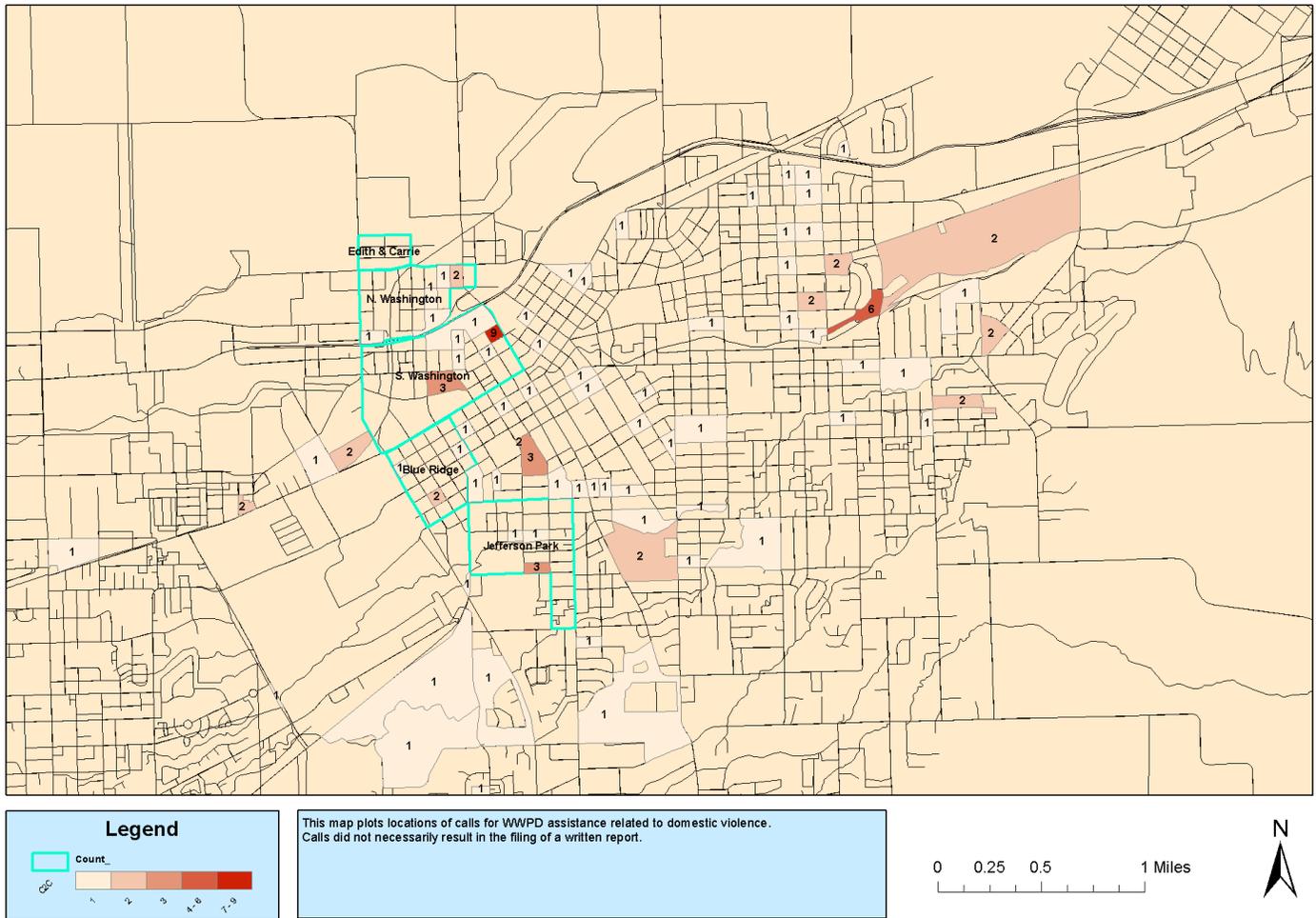
Note: Downtown Walla Walla (District 10) has been left blank on this map due to a lack of residents.

Map 31: WWPD Total Calls for Service Per Capita (1999-2011)³⁰³

Map 31 demonstrates how many calls were made to the Walla Walla Police Department per resident over the past twelve years. For example, residents of Edith & Carrie, and both Washington Park neighborhoods placed an average of 12.26 calls per person over that twelve year period of time, while a resident of the lowest scoring neighborhood would have called only an average of 3.34 times over the same period of time.

303 Walla Walla Police Department, Calls for Service 1999-2011. Obtained October 28th, 2011.

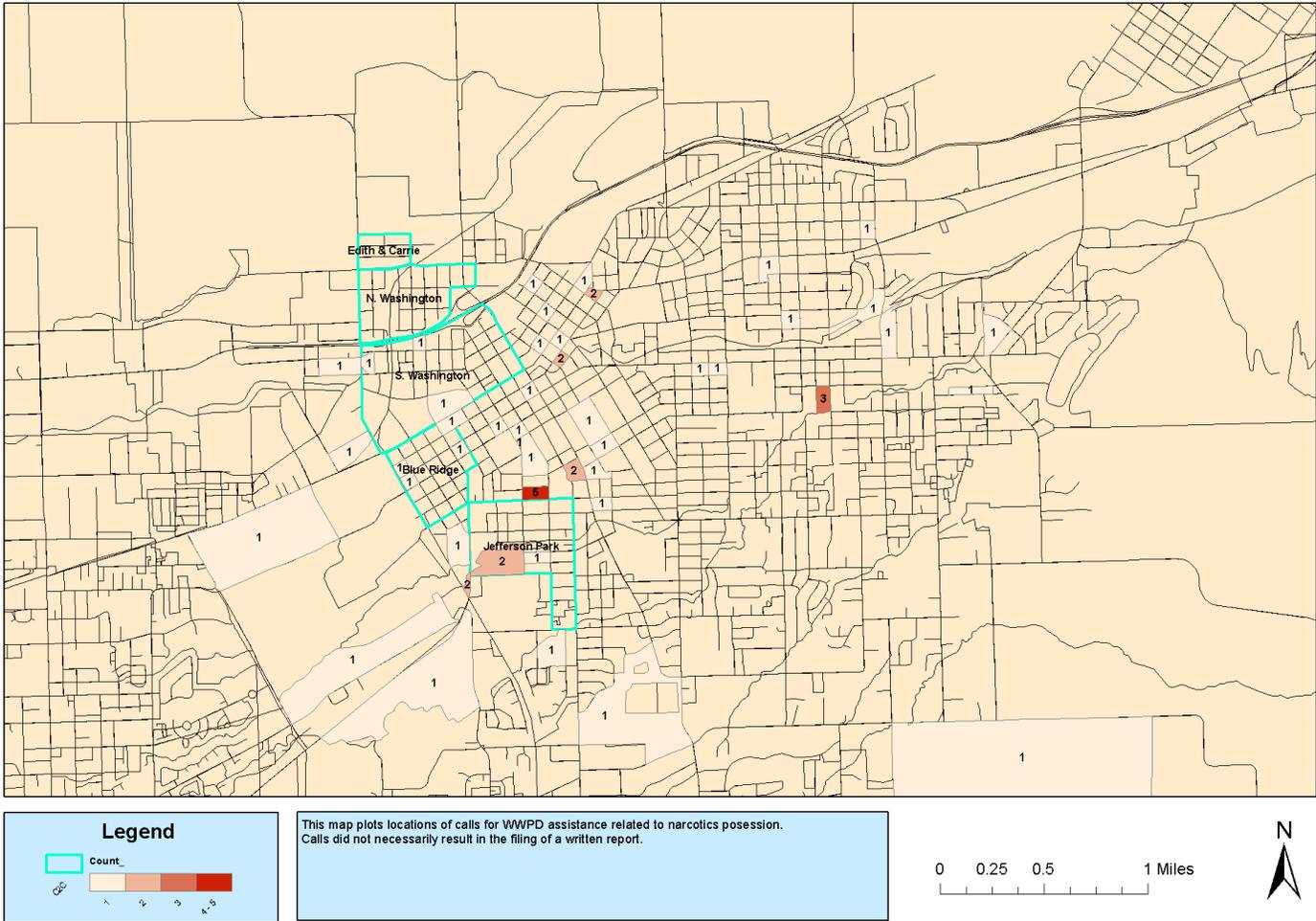
Domestic Violence - Walla Walla, Washington



Map 32: Incidences of Domestic Violence

Domestic violence occurred most frequently in the neighborhood of South Washington (16 incidents), while Edith & Carrie had none. However, incidents were present in other neighborhoods. North Washington had six incidents, Blue Ridge 3, and Jefferson Park 5. Domestic violence could be an indicator of insufficient family support systems. Opportunities may exist within specific blocks to organize counselling and awareness sessions for community members.

Narcotics Incidents - Walla Walla, Washington

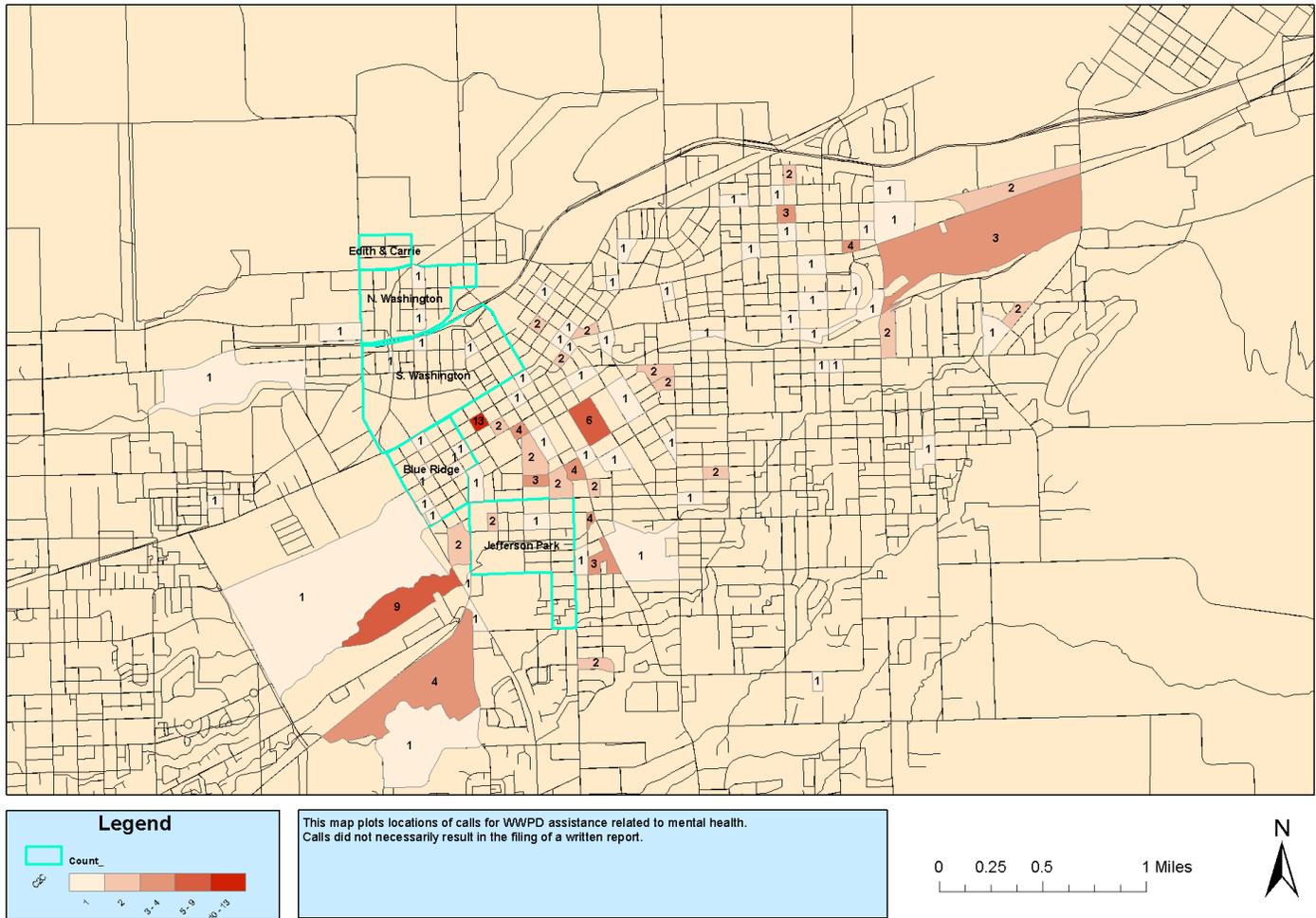


Map 33: Narcotics Incidents – Walla Walla, Washington³⁰⁴

Previous studies have used narcotics arrests as a general measure of safety within a neighborhood. Additionally, the presence of narcotics in a neighborhood can be detrimental to the well being of families and children. While each C2C neighborhood has had between 0-3 narcotics arrests in the past two years, rates of arrest are high in areas surrounding the neighborhoods. In particular, the blocks to the north of Jefferson Park demonstrate elevated levels of drug-related police incidents. Additionally, the neighborhood to the north-east of South Washington Park has an elevated level of drug-related police incidents compared to other areas. These areas present opportunities for community organizations to advocate against drug use and possibly connect individuals with rehabilitation programs.

304 Source: Walla Walla Police Department, "Calls for Service" (2010)

Mental Health Calls - Walla Walla, Washington

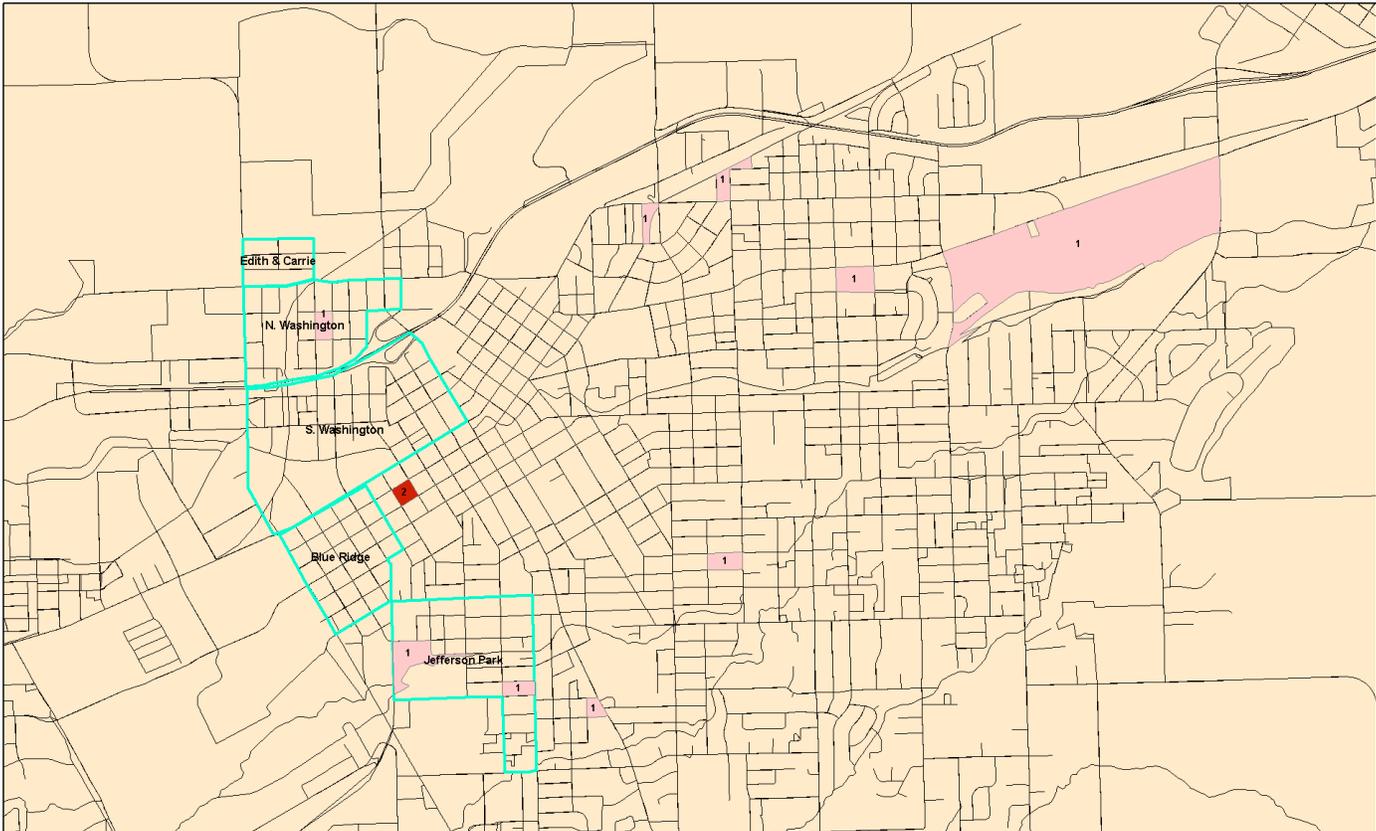


Map 34: Mental Health Incidents

Calls for police support for mental health related issues were relatively low for the Commitment to Community Neighborhoods, however areas in immediate proximity demonstrate elevated levels of calls. In particular, the area to the north of Jefferson park contains multiple blocks with repeated calls for service. Additionally, the area to the North-East of Walla Walla that borders North Wilbur ave appears to have an elevated level of incidents.

A total of 160 mental health related calls were received in 2010. This means that the incidence rate of mental health calls to the Walla Walla Police Department per person for all of Walla Walla was roughly 0.00504239. Using this per capita average in combination with the Commitment to Community Neighborhood populations we can estimate an average for each neighborhood: Edith & Carrie (1), N. Washington (3), S. Washington (6), Blue Ridge (4), Jefferson Park (6). While all neighborhoods except Blue Ridge made below average mental health calls per capita, this finding should not be taken as an immediate indicator of a barrier to mental health services. Calls to the police department are typically a last resort in the mental health support system, therefore a strong network of services might be helping to reduce calls. However, Edith & Carrie and N. Washington are both below average in terms of calls, and geographically removed from medical services. Mental health services may be in need in these neighborhoods.

Incidences of Suicide, Walla Walla, Washington



Legend	
Count	Edith & Casey
1	
2	

This map plots locations of calls for WWPD assistance related to a suicide or suicide attempt. All cases represented on this map resulted in a written police report.

Map 35: Incidences of Suicide – Walla Walla, Washington 305

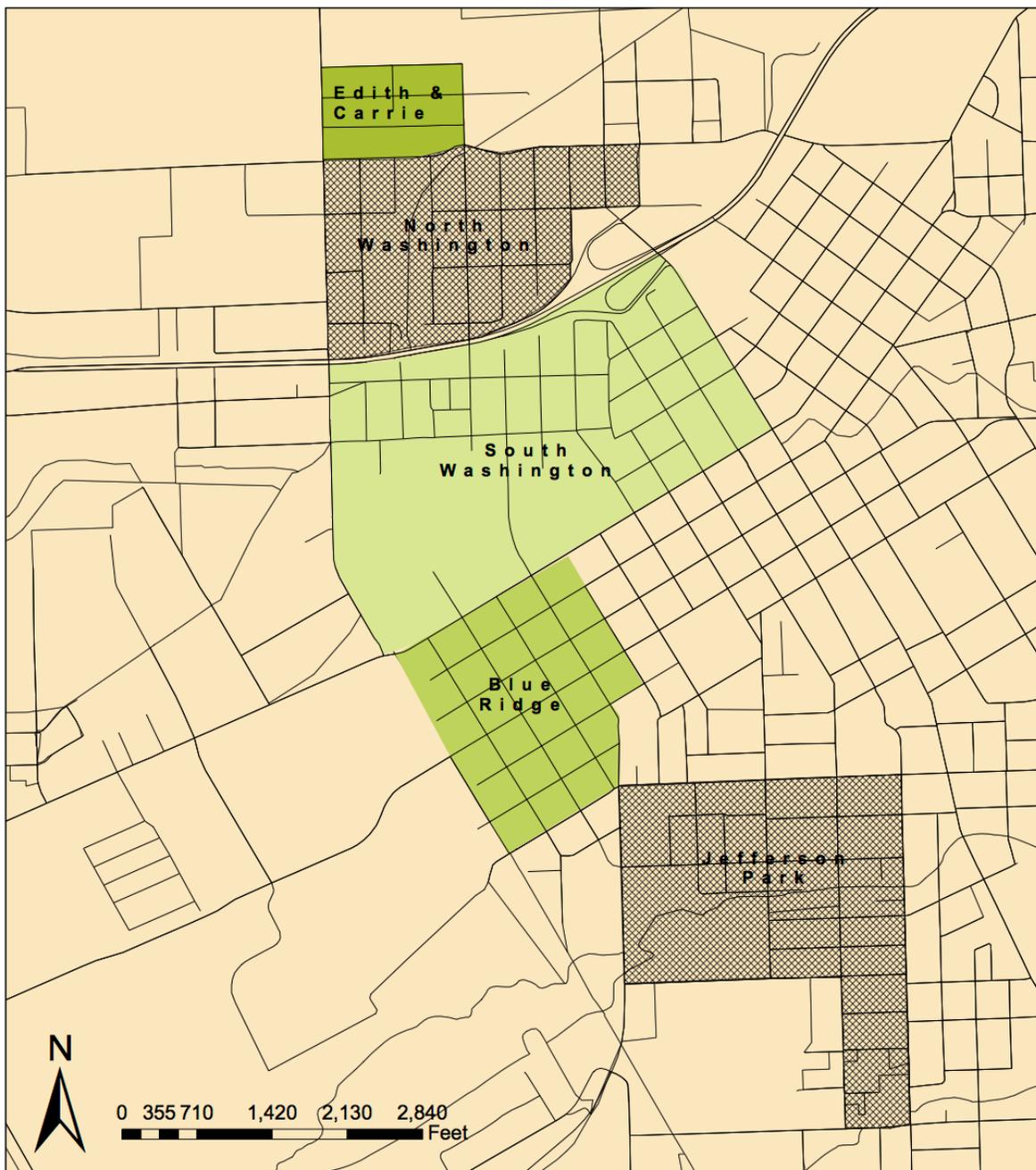
Suicide attempts are few and far between in Walla Walla, however they illustrate a concrete need for mental health services. Three suicide attempts were reported within the C2C Neighborhoods; two in Jefferson Park and one in North Washington Park. An additional three incidents have occurred within one-quarter of a mile from the neighborhood boundaries; two to the north-east of Blue Ridge and one to the east of Jefferson Park. With a total of eleven suicide attempts reported to the Walla Walla Police Department, six are either in or very close to C2C’s area of operation.

Geographic Representation of Survey Results

In order to facilitate an understanding of the geographic context of our survey findings, we have represented four significant areas of inquiry in map form: neighborhood satisfaction, whether or not people know their neighbors, safety, and interest in participating in community groups or organizations.

305 Source: Walla Walla Police Department, “Calls for Service” (2010)

C2C Neighborhoods - Neighborhood Satisfaction

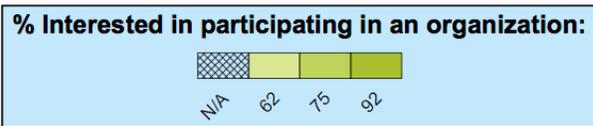
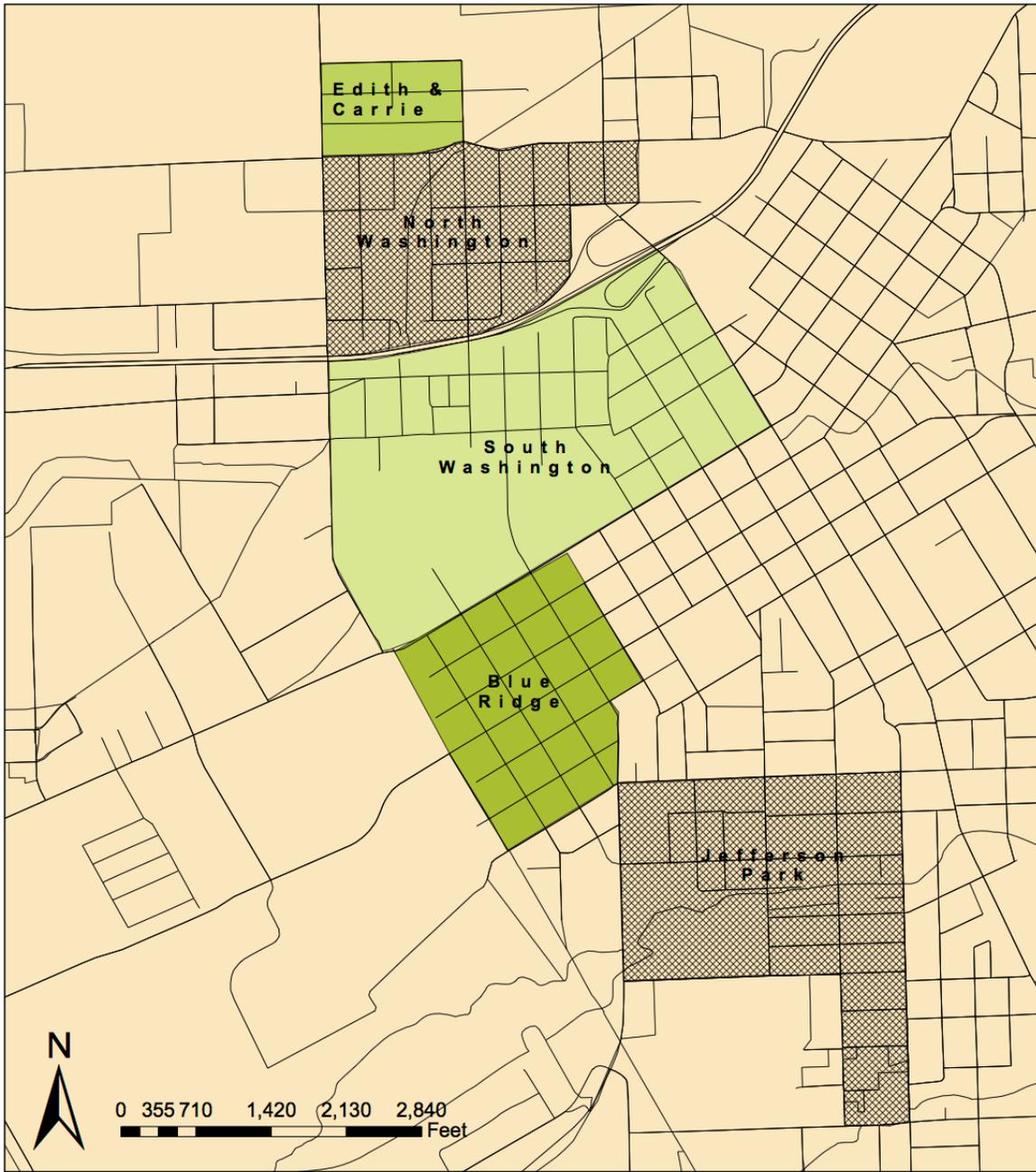


This map is composed of survey data submitted by 25 residents from the neighborhoods of Edith & Carrie, South Washington Park, and Blue Ridge.

Map 36: C2C Neighborhoods – Neighborhood Satisfaction

The map above shows the distribution of responses to the survey question, “Do you like living in your neighborhood?” There were high percentages of people that reported that they liked their neighborhood in Edith and Carrie and Blue Ridge neighborhoods, while residents of South Washington Park generally has a lower rate of people that like living in their neighborhood.

C2C Neighborhoods - Interest in Organizations

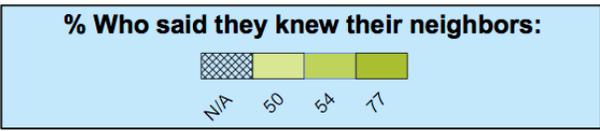
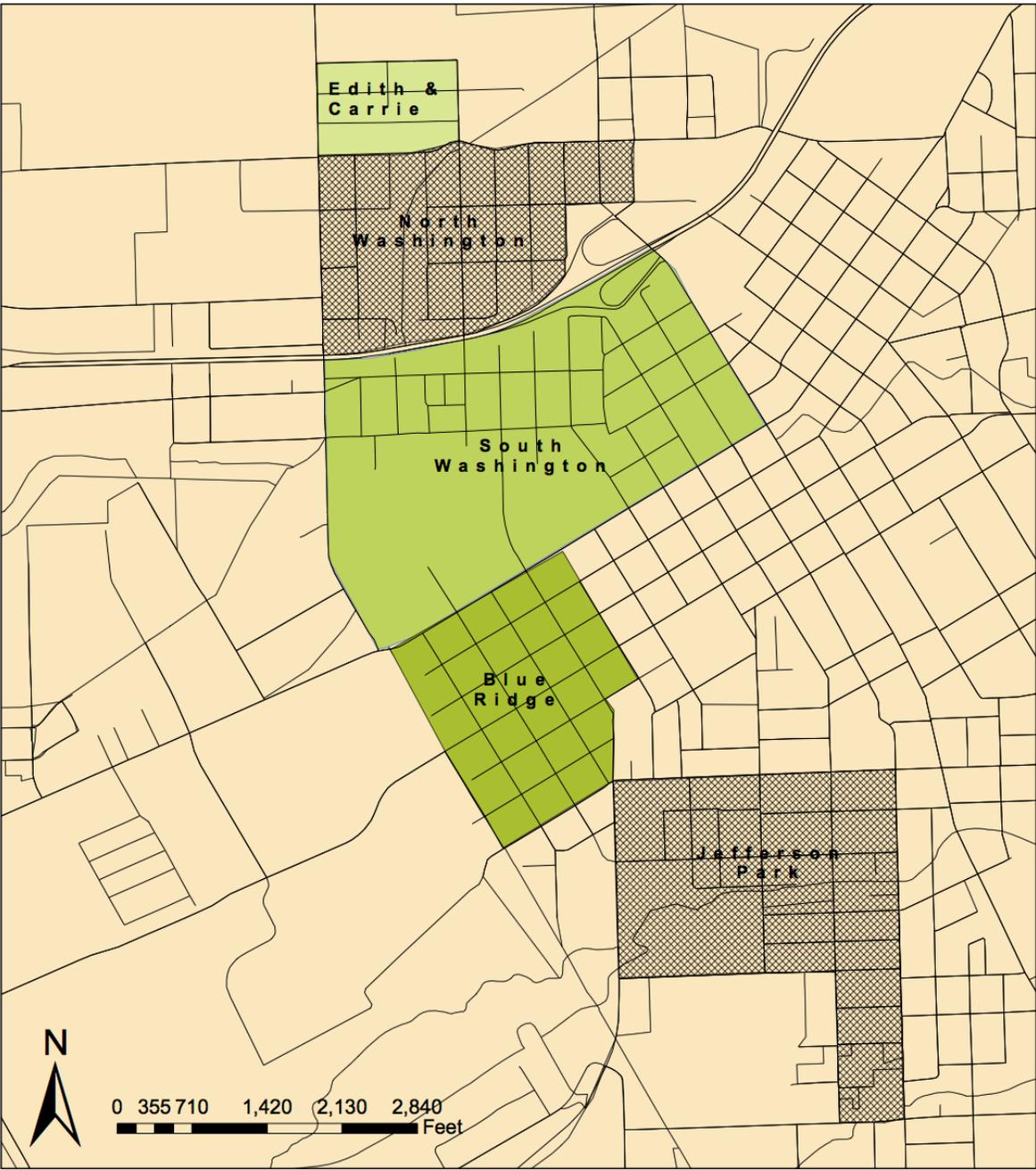


This map is composed of survey data submitted by 25 residents from the neighborhoods of Edith & Carrie, South Washington Park, and Blue Ridge.

Map 37: C2C Neighborhoods – Interest in Organizations

This map above shows the distribution of responses to the survey question, “How interested are you in participating in local organizations or groups in your community?” Interest in participation was high among all three neighborhoods survey; the highest of which was found in the Blue Ridge neighborhood with 92%.

C2C Neighborhoods – Attachment

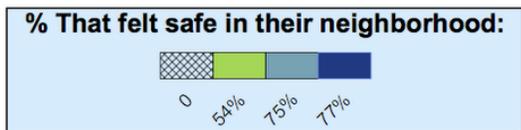
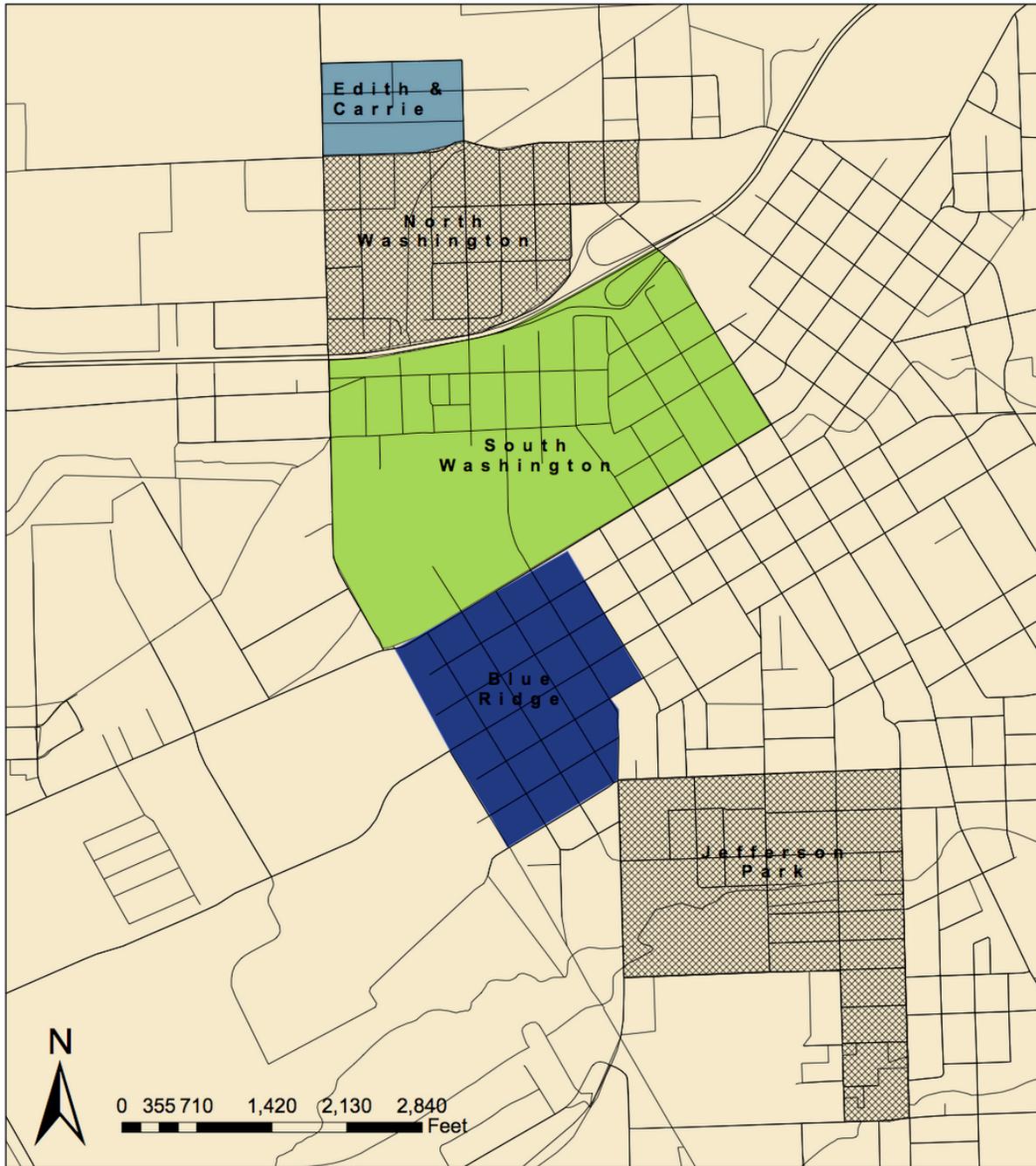


This map is composed of survey data submitted by 25 residents from the neighborhoods of Edith & Carrie, South Washington Park, and Blue Ridge.

Map 38: C2C Neighborhoods

The map above shows the distribution of responses to the survey question, “Do you know your neighbors?” The highest concentration of respondents that felt they knew their neighbors was in Blue Ridge, followed by South Washington and Edith and Carrie, respectively.

C2C Neighborhoods - % Who Felt Safe



This map is composed of our survey data submitted by 24 residents from the neighborhoods of Edith & Carrie (11 participants), N. Washington Park (8 participants) and Edith & Carrie (5 participants).

Map 39: C2C Neighborhoods – % Who Felt Safe

The map above displays responses to the survey question, “Do you feel safe in your neighborhood?” The highest concentration of respondents that felt safe was in Blue Ridge, followed by Edith and Carrie and South Washington, respectively.

X. Summary of Findings:

Our comprehensive assessment of the needs and extent of service use found several interesting findings. A very high proportion of residents in the Walla Walla neighborhoods observed are subsisting on a very low income. With over 10.2% of the population of Walla Walla living on less than \$10,000 a year in income, poverty should be a key concern of neighborhood organizations. However, low income is not a problem limited only to the lowest income bracket: overall, Walla Walla has more jobs below the national median salary than above. Additionally, there is a key geographic component to Walla Walla's income distribution: low income neighborhoods are largely distributed to the north-west of town while more affluent neighborhoods are located in the south-east. Though income projections for 2016 expect the census tracts between affluent and low income areas to see income increases, Edith & Carrie, South Washington, and Blue Ridge are expected to remain in the lowest income bracket in Walla Walla (a median household income of less than \$30,000).

The C2C neighborhoods are distinctly situated within commercial, heavy, and light industrial zoning. Compared with other residential areas in Walla Walla, these neighborhoods are fractured by interspersed non-residential areas in addition to a major highway. While traditional section maps depict the C2C neighborhoods as abutting, the residential areas in which C2C is active are in fact separated by these swaths of non-residential zoning. This should be a primary concern for C2C, because industrial zoning both presents not only direct problems to health and safety within a neighborhood, but also because non-residential areas can have the effect of geographically segregating a population. Moreover, separation from Walla Walla at large could have the effect of compounding access to a broad services through a lack of transportation and inability to access informal networks.

Our survey results found a significant racial disparity among Whites and non-Whites in terms of their educational attainment. Less than half of non-White respondents have completed high school compared to 97.4% of White respondents. The transitory lifestyle and necessity to address immediate needs of impoverished populations are two factors that emerge as barriers to higher educational attainment among non-whites. The low levels of education achieved by non-Whites, however, does not seem to have an impact on employment status; a finding which we believe to be related to the high proportion of low-paying jobs in Walla Walla. There is a discrepancy, however, between race and one's confidence in performing job-related skills. Non-whites felt significantly less confident in their ability to construct a resume, search for job listings, and use the Internet compared to Whites. This has strong implications for the large population of residents living in poverty who are struggling to make ends meet on their low-paying jobs and seeking upward mobility; a lack of competency in job searching skills in combination with a low availability of higher paying jobs makes achieving this goal difficult.

The degree to which neighbor's form attachments to their neighborhoods depends on two main outside forces: neighborhood-based organizations and physical stresses. Prior research supports the claim that outside physical stresses have a negative impact on neighborhood attachment.³⁰⁶ Commitment to Community actively works in neighborhoods that have these kinds of negative stresses. The organization seeks to combat those stresses with positive routine and social neighboring and problem-solving. We found this was the case in Edith and Carrie and South Washington Park. Commitment to Community has been working hard with the individuals and families in these neighborhoods to better their satisfaction with and attachment to their

306 Austin 1990
Waldoff 2002

respective neighborhoods. Activities that bring people together and work towards cleaning up the physical space of the neighborhood decrease the amount of stress that neighborhood faces.

Despite C2C's work in the neighborhoods, there are traces of detachment. References to ghettos, gangs, drugs, violence, and partying have strong negative impacts on individuals and family's desire to form attachments. These attachments are not limited to their neighbors, but in fact span the rest of the neighborhoods in Walla Walla. Many individuals in the interviews create a factor of otherness for people within their neighborhood or in other neighborhoods. This "otherness" can act as an obstacle to C2C in the organization's efforts to expand the basis of positive support in the neighborhoods. However, the individuals who create an "otherness" about their neighbors and members of other neighborhoods also express a desire to break down those walls. The suggestion for neighborhood-wide, unstructured, social activities was mentioned multiple times by various residents. Our research shows that there is a need for and potential to increase and improve intra-neighborhood relations. While negative physical stresses are competing with the positive work Commitment to Community has done so far, there is a potential for breaking down those physical stresses through increased activity within the neighborhoods. Further evidence for positive potential exists in the wide range of and extensive utilization of informal support systems within the neighborhoods.

Our research shows that among the low-income population in vulnerable neighborhoods in Walla Walla, there is widespread utilization and reliance on both informal and formal support networks to meet basic needs. Overall, most people rely on formal services when they report that they have received assistance with meeting basic needs. Informal networks were also widely used, sometimes in addition to, or as a way to access, more formalized sources of support. In some cases, individuals seek out informal support networks that consist of friends, family or neighbors for assistance prior to looking to a formal service provider or organization. At other times, especially when individuals have had positive experiences with formal service providers in the past or when their informal networks are unable to provide them with the help they need, they seek out more traditional forms of assistance from formal service providers or organizations.

Informal and formal networks and services are not isolated from each other; in fact they often overlap. Low-income individuals often use formal services in informal ways. For example, while people may report that they received assistance informally from friends or family, we learned that this assistance may have originally come from formal services, such as food stamps or food state cash assistance programs. Formal services are vital to the ways people are able to informally support one another because they are often enabling informal networks to exist. Formal forms of assistance, then, do not just benefit the immediate individual; rather, they have a farther reaching impact than measured by the number of people who come through their door, since they enable individuals to support their own friends and family.

While there is a certain extent of distrust and misunderstanding between some of the neighbors, our research suggests that the majority of people are open to both accessing and giving support to friends and family in times of need. This is a positive finding for neighborhood-organizations, like C2C, in their potential to tap into and build upon informal support networks that already exist in the neighborhoods surveyed. This suggests potential for transforming neighborhoods into "hubs" of support, which people can both contribute to and rely on in times of need. Such foundations for community-centered support systems fall directly in line with the goals of C2C to build strong neighborhoods.

Our research suggests the importance of personal relationships for individuals using both formal and informal support systems. Individuals expressed that they felt more comfortable using services, such as medical facilities, when they felt that they had a strong personal connection or established relationship with

the service provider. Similarly, individuals' confidence in having a consistent informal source of support with childcare was closely associated with their feelings of mutual and reciprocal trust with their neighbors. It is important for service providers to establish personal connections and foster trusting relationships with their clients to decrease feelings of formality. When individuals approach support in more informal, comfortable terms and feel a level of personal connection with service providers and specific figures in organizations, the likelihood of them seeking and receiving support increases. Commitment to Community functions on an "informal" basis, meaning that they communicate with people in the community on a personal basis; in this way, most people are unfamiliar that the neighborhood organizers (Julia, Frederico, Lupe and Yesenia) are connected to a greater organization (Commitment to Community) and are unfamiliar that the organization exists at all. Rather, the personal relationships between the organizer and the neighbors create an intimate connection and feeling of trust, which increases their comfort with seeking assistance and likelihood of receiving the help they need. While informal networks are important, the availability and widespread of formal services should not be undermined: a key function of Commitment to Community is that they are not simply another friend, family member, or other component of an individual's informal support system; rather they are connected to formal service providers and have the ability to put individuals in need in contact with with more formalized programs and assistance. In this way, they act as a crucial bridge that links informal and formal networks, and utilizes the best features of each to create a more complete and holistic system of support.

Conclusion

Our research confirms that poverty is a complex problem that touches the lives of many families and individuals within our community in Walla Walla. We found that there is a large low-income population in Walla Walla that is geographically concentrated in the three neighborhoods in which Commitment to Community is most active. Both government and organizational supported human services in addition to less formal family and friend support are crucial to the livelihoods of low-income population; we found that the majority of families in these neighborhoods seek support in some way in the areas of accessing medical care, finding affordable childcare, paying for housing and utility bills, and finding food. Personal relationships were key for increasing the accessibility of all forms of support, both formal and informal. The service providers that operated most informally and developed personal connections with beneficiaries proved to be the most successful, widely used, and received the most favorable feedback from service-users.

In the neighborhoods that our research targets, we found that there is an almost even divide between White and Latino families. While the overall population of Walla Walla is largely White, it is important for C2C to know the background of those they work with. Of those surveyed, almost half of respondents spoke Spanish at home. It is important to know how the backgrounds of these different groups of people affect their daily experiences and interactions with survey providers; for example, it is important to acknowledge the striking gap between high school graduation rates of White and non-Whites. Such barriers need to be explored further, especially in the context of the current job market and emphasis of many employers on hiring individuals with college degrees. Additionally, there is a large group within the neighborhoods in which C2C is active that do not feel comfortable speaking, reading, or writing in English. This factor limits the individuals' chances of finding living-wage work, necessary to support their families. Increasing outreach of

English language learning programs to these communities should be a priority of local and state government agencies and local community organizations.

Despite striking gaps along racial lines in educational attainment, overall we found that many families of Walla Walla experience poverty in similar ways. We consider that the way one experiences and navigates poverty, then, is shaped more by their geographic and residential location, rather than their demographic group. In this way, we hope that neighborhood organizations can reinforce solidarity between families in a given neighborhood by helping neighbors get to know and understand each other better. In this way, neighbors can foster local, informal networks of friendship and support.

Assessing how well neighborhood-based organizations are able to work alongside neighbors in need is important in creating a support system for families in need. Our research illuminates how individuals are able to navigate poverty. This information will allow C2C and other neighborhood-based organizations to understand the relationship between formal human service networks and informal support networks, how to navigate those networks, and what impacts they have on the neighborhood as a whole. Organizations in Walla Walla will be able to target specific geographic locations to focus on membership recruitment and creating more “access points” in impoverished neighborhoods. On the state level, our research highlights the importance of human services currently in place. The removal of any human service will be detrimental to those utilizing the service, their families, and the entirety of the informal network.

Key Recommendations

In light of our research, we have developed several recommendations. Much of our research contributes to the intense and localized work of Commitment to Community, but can be applied in similar towns by other neighborhood-based organizations. Outreach to marginalized communities is an important action for both community-based organizations and service providers to take. We found that the most effective services, according to those at food distribution sites, were those that developed personal relationships with service-beneficiaries. For example, those at the food-distribution events had learned about the event from a trusted agency employee that they knew personally. Commitment to Community’s strategy of “walking the neighborhood”, and connecting with individuals on a personal level is vital to building both formal and informal support networks.

- Commitment to Community and other organizations within Walla Walla should increase their on-the-ground efforts and relationship-building with neighbors in each neighborhood. Increased face-to-face interaction will increase the trust neighbors feel towards the organization and will increase the feeling of community reliance in each neighborhood.
- More formal support services and agencies should work with neighborhood organizations like C2C or conduct other forms of community outreach.
- Commitment to Community and other neighborhood organizations should consider expanding their outreach to blocks north of Jefferson Park, as well as blocks near the intersection North Wilbur Avenue and East Isaacs Avenue.
- Service providers should build personal relationships between their staff members and those utilizing their services to elicit feelings of trust.
- Commitment to Community should consider expanding its outreach from the five current neighborhoods to include neighborhood blocks south and west of 4th Ave.

- Community-based organizations in Walla Walla should consider outreach to neighborhoods in north-east Walla Walla and to the Farm Labor Homes.
- Commitment to Community and other community-based organizations should consider collaborating in the production and realization of neighborhood events. Unstructured activities and community gatherings also can be a way for neighbors to realize their shared experiences.
- Community-Organizations should model the informal modes of communication Commitment to Community uses in working with their neighborhood populations.
- Our research has important local, state and national policy implications, as well. Our research shows that while although many Walla Walla residents rely on informal networks of support, social services funded by government agencies and programs are widely used and contribute to low-income families' confidence in meeting their basic needs.
- Local government needs to increase funding for community-based organizations, such as Commitment to Community, in order to foster agency, neighborhood pride, and informal networks.
- Local government service agencies and organizations need to have non-digital forms of communication with the Walla Walla general population.
- Local government needs to realize the important of an education later on in life and therefore need to increase funding for Walla Walla Public Schools.
- We strongly suggest that policymakers should prioritize government funding to services, especially in the areas of medical care and insurance coverage, employment services, food assistance programs and housing and utility support.
- State legislators need to increase funding levels for public schools across the state.
- State legislators need to maintain current levels of funding for the Basic Health Plan in Washington State.
- State legislators need to maintain current levels of funding for medical interpreter services in Washington State. The large population of non-English speakers in Walla Walla emphasizes the importance of and need for bilingual staff and translation services in public places like hospitals, schools, and service distribution sites. Securing funding and support of these programs will elicit feelings of trust and increase use among the individuals that express need but do not feel comfortable in using formal services.
- The State of Washington needs to minimize the amount of requirements individuals have to fill out in order to obtain physical and mental medical care, food assistance, and housing and utility assistance.
- The State of Washington needs to fund community-based organizations, especially in rural areas.
- The federal government needs to approve and distribute affordable health care for everyone in the country.
- Our findings are provisional in nature; therefore we suggest that further research that is more detailed and in depth of each service category is needed.
- This research report should be expanded upon to include more houses located in the Commitment to Community neighborhoods.
- This research report should be expanded upon to include more in depth research of each service category presented throughout the paper.

- More research needs to be done in the areas of medical and mental health service access and use; interviews suggest wide reliance on emergency services in place of preventative care. Areas of mental health awareness in communities would be valuable as well.
- Similar research should be conducted in the Farm Labor Homes to identify levels of poverty and human service use.

Poverty is undoubtedly a very complex issue; one that cannot be solved quickly or through any one simple solution. However, by addressing smaller issues one at a time in specific steps, such as the measures recommended above, we have the potential to dramatically improve the quality of life for poor individuals and families in Walla Walla. Taken together, we believe these recommendations will serve as a guide for effective growth and progress in the community. By reinforcing and introducing congenial relationships between individuals within the community, however, it is our belief that Walla Walla will continue in the right path towards continued social cohesion and will be poised to diminish the area's poverty problem, despite this period of economic uncertainty and budget cuts. This report has played an informative role and will hopefully lead to the formation of new policies that can improve the economic security of poor individuals in Washington State. It is also our hope that this report will light the way for more open discourse about poverty issues. Nevertheless, more academic research is needed to fully understand the scope and magnitude of the poverty problem.

Appendix

Section A

Section 1. Residence and Neighborhood

1. How long have you lived in this area? (Please circle)

- less than 6 months
- 6 months to a year
- 1-3 years
- More than 3 years

2. How many times have you changed residence in the last year?

3. If you have changed residence in the last year, which of the following best describes why? (Mark one)

Cost of rent	
Trouble with the landlord	
Trouble with neighbors	
I wanted to move to a different neighborhood	
Other reason (please specify below)	

4. In your opinion, which of the following statements about your current living situation do you believe to be true? (Mark all that apply)

It is affordable	
It is located near my work	
It is located near schools	
It is located near child care	
It is located near supermarkets	
It is located near medical services	
It is located near my church or other important social group.	
It is located near parks or other public areas	
I like living in this area	
I know my neighbors	
I feel safe in my neighborhood	

Section 2. Employment Services

5. What is your current level of employment? (Circle one)

Full time	Part time	Unemployed	Retired
-----------	-----------	------------	---------

6. Are you currently seeking new or additional employment? (Circle: YES or NO)

7. Considering the earnings from your current employment situation, how able are you to meet the basic needs of your family? (Circle one)

Never able	Occasionally able	About half the time able	Usually able	Always able
------------	-------------------	--------------------------	--------------	-------------

8. Do you have access to the Internet when you need it? (Circle: YES or NO)

9. How comfortable are you with using the Internet? (Circle one)

Not at all comfortable	Not very comfortable	Somewhat comfortable	Mostly comfortable	Completely comfortable
------------------------	----------------------	----------------------	--------------------	------------------------

10. How confident are you in your ability to do each of the following skills related to employment?

	Not at all able	Not very able	Somewhat able	Mostly able	Completely able
Search for job listings					
Speak English					
Read or write English					
Construct a resume					

11. Do you know of anyone or any service that could help you improve these skills? (Circle YES or NO)

12. Are the people or services that could help you improve these skills accessible? (Circle one)

Don't know	Not accessible	Not very accessible	Somewhat accessible	Usually accessible	Completely accessible
------------	----------------	---------------------	---------------------	--------------------	-----------------------

Section 3. Family Support Services

13. Overall, how confident do you feel in your ability to make housing payments such as rent, mortgage, etc? (Circle one)

Not at all confident	Not very confident	Somewhat confident	Mostly confident	Always confident
----------------------	--------------------	--------------------	------------------	------------------

14. Have you tried to find help or assistance to make housing payments?

Yes	
No	

15. If you tried to find help, were you successful in receiving the help you needed?

Yes	
No	
N/A	

16. If you tried to find help, where did you receive assistance? (Check all that apply)

Family members	
Friends or neighbors	
An organization	
Other source	
Prefer not to answer	

17. Overall, how confident are you with your ability pay your **monthly utility bills**?

Not at all confident	Not very confident	Somewhat confident	Mostly confident	Always confident
----------------------	--------------------	--------------------	------------------	------------------

18. Have you tried to find help or assistance to pay monthly utility bills?

Yes	
No	

19. If you tried to find help, were you successful in receiving the help you needed?

Yes	
No	
N/A	

20. If you tried to find help, where did you receive assistance? (Check all that apply)

Family members	
Friends or neighbors	
An organization	
Other source	
Prefer not to answer	

21. Overall, how confident are you in your ability to **find affordable food for your family**?

Not at all confident	Not very confident	Somewhat confident	Mostly confident	Always confident
----------------------	--------------------	--------------------	------------------	------------------

22. Have you ever tried to find assistance with finding affordable food?

Yes	
No	

receiving the help you needed?

Yes	
No	
N/A	

23. If you tried to find help, were you successful in

24. If you tried to find help, where did you receive this assistance? (Check all that apply)

Family members	
Friends or neighbors	
An organization	
Other source	
Prefer not to answer	

If you have kids living with you that cannot be left alone, please answer questions 25-28 about childcare. Otherwise, skip to question 29.

25. Overall, how confident are you in your ability to **find affordable childcare or afterschool programs**? (Circle one)

Not at all confident	Not very confident	Somewhat confident	Mostly confident	Always confident
----------------------	--------------------	--------------------	------------------	------------------

26. Have you ever tried to find assistance in finding affordable childcare?

Yes	
No	

the help you needed?

Yes	
No	
N/A	

27. If you tried to find help, were you successful in receiving

28. *If you tried to find help, where did you receive this assistance?*

Family members	
Friends or neighbors	
An organization	
Other source	
Prefer not to answer	

29. *Overall, how confident are you in your ability to access **medical services**? (Circle one)*

Not at all confident	Not very confident	Somewhat confident	Mostly confident	Always confident
----------------------	--------------------	--------------------	------------------	------------------

30. *Have you ever tried to find help or assistance in accessing medical services?*

Yes	
No	

the help you needed?

Yes	
No	
N/A	

31. *If you tried to find help, were you successful in receiving*

32. *If you tried to find help, where did you receive this assistance? (Check all that apply)*

Family members	
Friends or neighbors	
An organization	
Other source	
Prefer not to answer	

33. *Overall, how confident are you in your ability in **accessing counseling services or other mental health services**?*

Not at all confident	Not very confident	Somewhat confident	Mostly confident	Always confident
----------------------	--------------------	--------------------	------------------	------------------

34. *Have you ever tried to find help with accessing this kind of service?*

Yes	
No	

the help you needed?

Yes	
No	
N/A	

35. *If you tried to find help, were you successful in receiving*

36. *If you tried to find help, where did you receive this assistance? (Check all that apply)*

Family members	
Friends or neighbors	
An organization	
Other source	
Prefer not to answer	

37. How interested are you in participating in local organizations or groups in your community? Some examples are church, a sports team, Commitment to Community. (Circle one)

Not at all interested	A little interested	Somewhat interested	Very interested
-----------------------	---------------------	---------------------	-----------------

38. How would you like to receive information about organizations or groups that provide assistance for health, counseling, childcare, food, or housing? (Check all that apply)

In person	
Telephone call	
Newspaper	
Letter mail or newsletter	
E-mail	
Internet web site	

Section 5. General Information

1. What is your marital status?

Married	
Single, not married	
Living with significant other/partner	
Divorced	
Widowed	

2. How old are you?

3. How many people are currently living in your household?

Children (under 18)	
Adults	

4. Do you provide financial support for anyone outside your household? (Circle: YES or NO)

5. Which of the following races or ethnicities do you identify with? (Check all that apply)

Latino	
African American	
Asian/Pacific Islander	
Caucasian	
Native American	
Other	
Prefer not to answer	

6. What language do you primarily speak at home? (Circle one: **English** **Spanish** **Other**)

7. What is the highest level of education you have **completed**?

Elementary (K – 5 grade)	
Middle School (6-8 grade)	
High School or GED	
Some college	
Bachelor’s degree (4 year college)	
Professional degree (PhD, MD, etc)	

8. *What was your total household income for last year?*

9. *What is your address? (This information will not be distributed to anyone and is only being used only for neighborhood comparisons in our research study.)*

Street: _____.

City/State/Zip: _____.

Section B

All interviews were recorded using an audio recording device, uploaded to Express Scribe, and were turned into transcripts. The transcripts were used in the production of data presentation and analysis.

- A) Interview with Yesi Ramirez, a Jefferson Park neighborhood resident, was conducted on October 12, 2011. She was accompanied by her daughter for half of the interview. The interview had a total duration of 44 minutes. The language used was English. The interview was conducted at Tony's Sub Shop in a worker's room.
- B) Interview with Jessica Palmer, an Edith and Carrie neighborhood resident, was conducted on October 18, 2011. The total duration of the interview was 57 minutes and the language used was English. Her name has been changed to comply with confidentiality requests. This interview was conducted in Jessica's home.
- C) Interview with Sandy, and Edith and Carrie neighborhood resident, was conducted on October 25, 2011. The total duration of the interview was 65 minutes and was conducted in English. This interview was conducted in Sandy's home.
- D) Interview with Isa Diaz, a Blue Ridge neighborhood resident, was conducted on October 25, 2011. The total duration of the interview was 129 minutes and was conducted in English. Also present during this interview was her neighbor's child because she was babysitting. This interview was conducted at Isa's home.
- E) Interview with Mariela Rosas from the Children's Homes Society was conducted on November 9, 2011. The duration of the interview was 72 minutes and was conducted in English. This interview was conducted in a counseling room at the site of Children's Home Society.
- F) Interview with Christina, a South Washington Park neighborhood resident, was conducted on November 10, 2011. The total duration of the interview was 58 minutes and was conducted in English. This interview was conducted alongside the interview for Moses. Also present were their two children and Federico, a Commitment to Community neighborhood organizer. This interview was conducted at Christina and Moses' home.
- G) Interview with Moses, a South Washington Park neighborhood resident, was conducted on November 10, 2011. The total duration of the interview was 58 minutes and was conducted in English. As stated above, this interview conducted alongside Christina's interview. Also present were their two children and Federico, a Commitment to Community neighborhood organizer. This interview was conducted at Christina and Moses' home.
- H) Interview with María, a South Washington Park resident, was conducted on November 12, 2011. The total duration of the interview was 59 minutes and was conducted in Spanish. Also present during the interview was Federico, a community organizer for C2C. This interview was done in María's home.
- I) Interview with Cynthia Selde, Programs and Operations Coordinator at Community Center for Youth, was conducted on November 15, 2011. The total duration of the interview was 71 minutes and was conducted in English. Julia Leavitt, the director for C2C was present for about the first third of the interview and then had other obligations and left. This interview was conducted at the site for CCY.
- J) Interview with Ron Harris, a South Washington Park resident, was conducted on November 17, 2011. The total duration of the interview was 67 minutes and was conducted in English. This interview was conducted at Ron's home.
- K) Interview with Tesdry, a South Washington Park resident, was conducted on November 19, 2011. The total duration of the interview was 55 minutes and was conducted in English. This interview was conducted at Ron's home.

Below is the list of questions I asked neighborhood residents:

Interview Questions for Neighborhood Residents

1. First, I'd like to know where you're from, why you came to Walla Walla, and how long you've been living here. Can you please tell me about those things?
 - a. How long have you lived in Walla Walla? How long has your family lived in Walla Walla?
 - b. Tell me about why you came to Walla Walla. What do you like about Walla Walla? What didn't you like?
 - c. What makes you stay?
 - d. What nationality do you identify with?
 - e. How does your nationality influence your work space and your home space?
2. How do you and your family feel connected, or not, to the neighborhood and greater Walla Walla community?
 - a. Which organizations do you belong to?
 - b. How do you connect with people outside of those organizations?
 - c. Could you describe how you met this group?
 - d. What kind of support you offer each other?
 - e. How, if ever, have you asked for help from these groups?
3. We all have times in our lives when we need help from friends, family members or agencies in the community. Could you please describe a time when you had needs like this?
 - a. What was that like for you?
 - b. Who did you go to for help?
 - c. Did you go to any of the people or groups you were telling me about before for help?
 - d. How did they react?
 - e. OR: Why didn't you do to them? How did you resolve the problem?
4. Sometimes we don't or can't ask our friends and family for help when we need it. Could you describe a time when you reached out for help from human service providers and you felt positive about your experience?
 - a. What was it about the interaction that made you feel positive?
 - b. What did the service do to make you feel this way?
 - c. How did this experience affect you afterwards?
 - d. How were they able or unable to help you?
 - e. Was there anything about the location that played a role in this experience?
5. Now, can you please describe a time when you reached out for help from human service providers but you felt negative about your experience?
 - a. What about the interaction made you feel badly?
 - b. What did the service do to make you feel this way?
 - c. How did this experience affect you afterwards?
 - d. How were they able or unable to help you?
 - e. Was there anything about the location that played a role in this experience?
6. Now I would like to talk with you about physical and mental health services. Could you please describe a positive experience you had with a physical or mental health provider (hospital, doctor, dentist, etc.)?
 - a. What made you feel positively about the experience?
 - b. Why do you think they reacted in this way?
 - c. How did this experience affect you afterwards?
 - d. How were they able or unable to help you?
 - e. Was there anything about the location that played a role in this experience?
7. Could you please describe a negative experience with physical or mental health provider?
 - a. What made you feel negatively about the experience?
 - b. Why do you think they reacted in this way?
 - c. How did your experience affect you afterwards?
 - d. How were they able or unable to help you?
 - e. Was there anything about the location that played a role in this experience?
 - f. Are there other ways you treat yourself or your family when you are feeling unwell?
8. Now I'd like to switch topics. Can you tell me about your experiences with school and work? Where did you go to school growing up?
 - a. How many years? What did you like best about school? What didn't you like?
 - b. Tell me about the kinds of work you do now. How did you find your job(s)?
 - c. What do you like about it? What don't you like about it?

- d. What do you do when you need to find a job?
 - i. Who do you talk to?
 - ii. Where do you go?
 - iii. Why do you talk to these people?
 - e. What skills do you have that enable you to get a job?
 - f. What skills would you like to have in order to increase your job opportunities?
 - g. If you are:
 - i. Employed, how does your employment status affect your home life?
 - ii. Unemployed, how does not having a job affect your home life?
 - h. If you don't and aren't looking for work, can you tell me how you feel like you contribute important things for your family or community?
9. I would like to start wrapping up by talking about Commitment to Community (C2C). C2C is trying to connect people with each other and services so you are able to get support during those times you've talked about. Can you tell me about what, if anything, you know about C2C and what it does?
- a. Can you tell me a time that C2C worked with you or someone you knew to get the support their family needed?
 - b. In what ways was it helpful to work with C2C?
 - c. In what ways was it not so helpful?
 - d. If you were sitting across the table from the workers of C2C, what would you suggest them to do in your neighborhood? Greater Walla Walla?
10. For our final question I'd like to ask a broad question. In general, how helpful do you think C2C and/or human services are in Walla Walla?
- a. Why do you think this is true?
 - b. Would you change anything about services?
 - i. How so?
 - ii. OR: Why not?
 - c. How helpful are the locations of C2C and services?

Below is the list of questions I asked service providers:

Interview Questions for Service Providers

1. First I'd like to start out by asking you about (their organization). What does your organization do in general? What are its main functions within Walla Walla?
 - a. How do you function?
 - b. How do you perceive your work impacting the neighborhood and Walla Walla communities?
 - c. What other organizations do you work with in Walla Walla?
2. Next I'd like to talk a bit more about the organizations you have worked with or currently work with in Walla Walla. Can you tell me about a specific partnership your organization has had?
 - a. In what ways were you able to collaborate efficiently, or not? What were the impacts?
 - b. What were the main goals of the collaboration between the two organizations?
 - c. How were those goals realized, or not?
 - d. Why do you think those goals were realized or not?
3. Have you ever had a time when you or your organization wanted or needed to collaborate with another organization?
 - a. What were the goals of your initiative?
 - b. How did you carry out those wants or needs of collaboration?

- c. Who did you contact? Who did you end of working with?
- d. How receptive were those organizations you reached out to?
4. I would like to move towards to talking specifically about Commitment to Community. Can you explain what you know about C2C and what it does?
 - a. Have you ever worked with C2C?
 - i. If yes, how so? What have you worked on together?
 - ii. If no, why not?
 - b. Do you see your organization working with C2C?
 - i. If yes, how so?
 - ii. If no, why not?
 - c. Why have you, or haven't you, worked with C2C?
 - d. If you could sit across from the table from C2C, would you suggest any changes for them in order to increase collaboration between the two organizations? What would those be?
5. Now I'd like to switch the focus of the conversation. How does your organization or service help individuals in the neighborhoods and Walla Walla?
 - a. What programs does your organization/service offer for individuals?
 - b. With what frequency do individuals access your organization and its programs and/or services?
 - c. How do you increase participation by community members with your organization?
 - d. Do you do any outreach to the community? If so, how?
 - e. How effective is/are your outreach program(s)?
6. I'm sure your organization interacts with many different individuals in the Walla Walla community. I would like to know more about those individuals. Who are the people who are accessing the organization?
 - a. Where do they live?
 - b. What are common characteristics among individuals using your service?
 - c. What are characteristics of diversity among individuals using your service?
 - d. How did they hear about your organization?
7. How connected do you feel to the individuals who interact with and use your organizations programs/services?
 - a. How do you perceive the individuals connectivity to the organization?
 - b. What are ways, if any, you or your organization increase connectivity to individuals?
 - c. If this is implemented, why do you think this is important?
8. Personal connections sometimes have an effect on individuals when they choose who to talk to in times of need. How do you perceive frequency of use of the organization you work for by community members?
 - a. How often do individuals interact with the organization?

- b. How regularly do individuals interact with the organization?
 - c. Why do you think individuals come back to use your service or programs over others?
 - d. Or if people don't do this, why do you think individuals do not come back to your organization?
9. To wrap things up I'd like to ask you about how you perceive your organization working within the neighborhood communities and the greater Walla Walla community. In general, how helpful do you think your organization is for individuals and families?
- a. What are characteristics of your organization that makes you helpful?
 - b. What are your measures of helpfulness?
 - c. How, if at all, do you perceive your organization to not be helpful?
 - d. What are the effects on individuals and families?
 - e. How would you change your organizations in order to increase your ability to help more people or better help those you already work with?

Section C

Census Tract	< 9th Grade	Some High School	HS or GED	Some College	Associate Degree	Bachelor's or Above
9200	407	361	1055	1223	413	561
9201	130	190	875	1080	512	678
9202	287	169	537	471	302	437
9203	273	398	1214	1299	279	1746
9204	94	238	756	402	124	130
9205	516	191	438	254	166	113
9206	536	338	1220	987	509	609
9209	108	191	1156	1351	601	1896
9207.02	58	162	710	935	331	923
9207.01	137	190	634	662	284	592
9208.02	254	281	1201	1491	447	1291

List of Maps and Sources:

Standard Number	Title	Source
1	Connected and Disconnected Neighborhoods	"Frank et al., 2004: p. 89
2	Economic Research Service: Food Deserts in Walla Walla	Data for Walla Walla, WA, http://www.ers.usda.gov/data/fooddesert/fooddesert.html . Accessed 12/16/2011.

3	Choropleth Map of Downtown Walla Walla Population	U.S. Census Bureau
4	Example Density Map	
5	C2C Neighborhoods – Total Population Concentration	Total population taken from SF1 wa000032010 and mapped onto TIGER/Line Census Blocks 2010.
6	C2C Neighborhoods – Residences of Survey Respondents	Quantity measure of survey respondents using wwstreets.shp as a geocode reference.
7	Median Income 2010	Data attained from the Nielsen Corporation via Google Earth Pro.
8	Projected Median Income 2016	Data attained from the Nielsen Corporation via Google Earth Pro.
9	Walla Walla – Educational Attainment	Data attained from the Nielsen Corporation via Google Earth Pro, transferred to Shapefile format and represented in quantity graphs.
10	Walla Walla Employment Services	Geocode of C2C document "Where Do I Go for Help?" with added half-mile buffer.
11	Walla Walla Medical Services	Geocode of C2C document "Where Do I Go for Help?" with added half-mile buffer.
12	Walla Walla Childcare Service	Geocode of C2C document "Where Do I Go for Help?" with added half-mile buffer.
13	C2C Neighborhoods – Total population under 18	Total population taken from SF1 wa000052010 and mapped onto TIGER/Line Census Blocks 2010.
14	Child Abuse in Walla Walla, WA	Walla Walla Police Department Calls for Service by Block (2010)
15	Child Neglect – Walla Walla, WA	Walla Walla Police Department Calls for Service by Block (2010)
16	Juvenile Problem Incidents – Walla Walla, WA	Walla Walla Police Department Calls for Service by Block (2010)
17	Walla Walla, WA CCY Membership Comparison	Data obtained from CCY and geocoded using wwstreet.shp as a reference.

18	Walla Walla, WA Youth (<18 Years) YMCA Members	Data obtained from YMCA and geocoded using wwstreet.shp as a reference.
19	CCY Membership Hot Spots	Data obtained from CCY and geocoded using wwstreet.shp as a reference.
20	CHS Membership Hot Spots	Data obtained from CHS and geocoded using wwstreet.shp as a reference.
21	C2C Neighborhoods – Total Vacant Houses	Total population taken from SF1 wa000432010 and mapped onto TIGER/Line Census Blocks 2010.
22	C2C Neighborhoods – "Other" Vacant Houses	Total population taken from SF1 wa000432010 and mapped onto TIGER/Line Census Blocks 2010.
23	Walla Walla, WA Federal Free/ Reduced Lunch Eligibility	Obtained from Walla Walla County School District through Whitman College Department of Environmental Studies.
24	Food Assisted Seniors – Walla Walla, WA	CSFP enrollment data provided by Blue Mountain Action Council.
25	Food Assisted Seniors – Commitment to Community Neighborhoods	CSFP enrollment data provided by Blue Mountain Action Council.
26	Walla Walla – Average Vehicles Per Residence	Data attained from the Nielsen Corporation via Google Earth Pro.
27	Walla Walla – Households with No Vehicle	Data attained from the Nielsen Corporation via Google Earth Pro.
28	Walla Walla Zoning Map	Source obtained from Walla Walla City Department of GIS, our edits.
29	C2C Zoning Map	Source obtained from Walla Walla City Department of GIS, our edits.
30	Voices From the Community	Locations of all quotes approximate.
31	WWPD – Total Calls for Service Per Capita (1999-2011)	Data obtained from Walla Walla Police Department
32	Incidences of Domestic Violence – Walla Walla, WA	Data obtained from Walla Walla Police Department

33	Narcotics Incidents – Walla Walla, WA	Data obtained from Walla Walla Police Department
34	Mental Health Calls – Walla Walla, WA	Data obtained from Walla Walla Police Department
35	Incidences of Suicide – Walla Walla, WA	Data obtained from Walla Walla Police Department
36	C2C Neighborhoods – Neighborhood Satisfaction	Results of our survey transferred to choropleth map.
37	C2C Neighborhoods – Connectedness	Results of our survey transferred to choropleth map.
38	C2C Neighborhoods % who felt Safe	Results of our survey transferred to choropleth map.
39	Interest in participating in a community organization.	Results of our survey transferred to choropleth map.

Works Cited

- Adventist Health. (2011). Welcome to Walla Walla General Hospital. Retrieved from <http://www.wwgh.com/>
- AIDS Housing Corporation. (2006). Housing Advocacy 101: Getting and Keeping Housing for Your Clients: PART #3: Barriers to Subsidized Housing. Retrieved from http://www.vpi.org/TAP/resource_library/housing_advocacy/3.pdf
- Albrecht, J. (2007). Key Concepts and Techniques in GIS. London: Sage Publishing.
- Austin, M., & Baba, Y. (1990). Social Determinants of Neighborhood Attachment. *Sociological Spectrum*, 10(1), 59-78.
- Beck, C., & McCue, C. (2009). "Predictive Policing: The Next Era in Policing." *The Police Chief*, 76(11).
- Bedi, Tara, Aline Coudouel, and Kenneth Simmler. More than a Pretty Picture: Using Policy Maps to Better Design Interventions. Washington, D.C.: World Bank Press, 2007.
- Blue Mountain Area. (2011). Narcotics Anonymous Meetings in Walla Walla. Retrieved from <http://www.bluemtnarea-na.org/wallawalla.html>
- Bolan, M. (1997). The Mobility Experience and Neighborhood Attachment. *Demography*, 34(2), 225-237.
- Bostock, Tara (Ed.). (2011). The Uninsured. *Families USA*. Retrieved from <http://familiesusa.org/issues/uninsured/>
- Bothwell, Stephanie E., Raymond Gindroz, and Robert E. Lang. "Restoring Community through Traditional Neighborhood Design: A Case Study of Diggs Town Public Housing." *Housing Policy Debate* (Fannie Mae Foundation) 9, no. 1 (1998): 89-114.
- Bringewatt, E. H., & Gershoff, E. T. (2010). Falling Through the Cracks: Gaps and Barriers in the Mental Health System for America's Disadvantaged Children. *Children and Youth Services Review*, 32, 1291-1299.
- Career OneStop. (2011). *WorkSource Walla Walla*. Retrieved from <http://www.servicelocator.org/search/detail-info.asp?Category=CenterInformation&ParentID=1900951&state=WA>
- Caron, M., & Martin, C. (2008). Rockbridge Poverty Assessment 2008: A Community-Based Research Project. Lexington, Virginia: Shepherd Poverty Program at Washington and Lee University.
- Cooper, J., Aratani, Y., Knitzer, J., Douglas-Hall, A., Masi, R., Bhanghart, P., & Dababnah, S. (2008). Unclaimed Children Revisited: The Status of Children's Mental Health Policy in the United States. *National Center for Children in Poverty*. Retrieved from http://www.nccp.org/publications/pub_853.html
- Dassopoulos, A., & Monnat, S. (2011). Do Perceptions of Social Cohesion, Social Support, and Social Control Mediate the Effects of Local Community Participation on Neighborhood Satisfaction? *Environment and Behavior*, 43(4), 546-565.
- DeFilippis, J., & Saegert, S. (2008). *The Community Development Reader*. New York: Routledge.
- Diers, J. (2004). Neighbor Power: Building Community the Seattle Way. Seattle: University of Washington Press.
- Donovan, Shaun. (2011). Housing Choice Vouchers Program Guidebook. U.S. Department of Housing & Urban Development. Retrieved from http://portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/programs/hcv/forms/guidebook
- Drug Rehab Center Hotline. (2011). *Celebrate Recovery*. Retrieved from <http://www.drug-rehab-center-hotline.com/celebraterecovery.html>
- Elwood, S, & Leitner, H. (2003). GIS and Spatial Knowledge Production for Neighborhood Revitalization: Negotiating State Priorities and Neighborhood Visions. *Journal of Urban Affairs*, 25 (2), 139-157.
- Elwood, S. (2006a). Critical Issues in Participatory GIS: Deconstructions, Reconstructions, and New Research Directions. *Transactions in GIS*, 10(5), 693-708.
- Elwood, S. (2006b). Negotiating Knowledge Production: The Everyday Inclusions, Exclusions, and Contradictions of Participatory GIS Research. *The Professional Geographer*, 58(2), 197-208.
- Encyclopedia of Children's Health (2001). Children's Health: Day Care. Retrieved from <http://www.healthofchildren.com/D/Day-Care.html>
- Ertas, N., & Shields, S. (2011). Child Care Subsidies and Care Arrangements of Low-income Parents. *Children and Youth Services Review*, 16 (4).
- Ezeala-Harrison, F. (2010). Black Feminization of Poverty: Evidence from the U.S. Cross-Regional Data." *The Journal of Developing Areas*, 44(1), 149-166.
- Fitchen, J. (1995). Poverty in Rural America: A Case Study. Waveland Pr Inc.
- Flegal, Katherine et al. (2008) Prevalence in Obesity Among US Adults, 1999-2008. *American Medical Association*, January 20, 2010 – Vol 303, No. 3. 235-241.

- Frank, L. D., Andresen, M., & Schmid, T. (2004). Obesity relationships with community design, physical activity, and time spent in cars. *American Journal of Preventive Medicine*, 27(2), 87-96.
- Ghose, R. (2003). Community Participation, Spatial Knowledge Production, and GIS Use in Inner-City Revitalization. *Journal of Urban Technology*, 10(1), 39-60.
- Gidlow, C., Cochrane, T., Davey, R., Smith, G., & Fairburn, J. (2010). Relative Importance of Physical and Social Aspects of Perceived Neighborhood Environment For Self-reported Health. *Preventative Medicine*, 51(2), 157-163.
- Goode J., & Maskovsky J. (2001). *New Poverty Studies: The Ethnography of Power, Politics and Impoverished People in the United States*. New York: New York University Press.
- Goodwill Industries of the Columbia. (2011). *Walla Walla Mission Services*. Retrieved from http://www.goodwillotc.org/mission_services/walla_walla/
- Gorman, K., Zearley, K. and Favasuli, S. (2011). Does Acculturation Matter?: Food Insecurity and Child Problem Behavior Among Low-Income, Working Hispanic Households. *Hispanic Journal of Behavioral Sciences*, 20 (10), 1-18.
- Hall, S.S. (1993). *Mapping the Next Millennium: How Computer-Driven Cartography is Revolutionizing the Face of Science*. New York: Vantage Books.
- Hartley, David et al. *Active Living for Rural Youth*. Policy Brief, Muskie School of Public Service, University of Southern Maine, 2008: Maine Rural Health Research Center.
- Health Grades (2011). *Family Medical Center*. Retrieved from <http://www.healthgrades.com/group-directory/washington-wa/walla-walla/family-medical-center-8f67e9c6>
- Helpline. (2011). *Services Provided*. Retrieved from <http://helplineww.org/>
- Henry, Gary T. (1990). *Practical Sampling*. California: SAGE publications, Inc.
- Hodges, S., Ferreira, K., Israel, N., & Massa, J. (2006). *Strategies for System of Care Development: Making Change in Complex Systems: A framework for analysis of Case Studies of System Implementation: Holistic Approaches to Studying Community-Based Systems of Care*. Tampa, FL: University of South Florida, Research and Training Center for Children's Mental Health.
- Jones P. & Kodras, J. (1990). Restructured Regions and Families: The Feminization of Poverty in the U.S. *The Annals of the Association of American Geographers*, 80(2), 163-183.
- Jung, J., & Elwood, S. (2010). Extending the Qualitative Capabilities of GIS: Computer-Aided Qualitative GIS. *Transactions in GIS*, 4(1), 63-87.
- Kaplan, GA (1998). Social Contacts and Ischaemic Heart Disease. *Ann Clin Res*;20:131-136.
- Kataoka, S., Zhang, L., & Wells, K. (2002). Unmet Need for Mental Health Care Among U.S. Children: Variation by Ethnicity and Insurance Status. *American Journal of Psychiatry*, 159, 1548-1555.
- Kawachi, Ichiro, Lisa F. Berkman, Graham A. Colditz, and Yvonne L. Michael. "Living Arrangements, Social Integration, and Change in Functional Health Status." *American Journal of Epidemiology* (Johns Hopkins University School of Public Health) 153, no. 2 (2001): 123-131.
- Kirby, J. (2008). Poor People, Poor Places and Access to Health Care in the United States. *Social Forces*. 87(1), 325-355.
- Kling, J., Liebman, J., & Katz, L. (2007). Experimental Analysis of Neighborhood Effects. *Econometrica*. 75(1), 83-119.
- Kriedler, Mike. (2009). Uninsured in Washington State Jumps Nearly 21 Percent. News Release. Retrieved from www.insurance.wa.gov
- Kwan, M., & Ding, G. (2008). Geo-Narrative: Extending Geographic Information Systems for Narrative Analysis in Qualitative and Mixed-Method Research. *The Professional Geographer: Association of American Geographers*, 68(4), 443-465.
- Laird B., & Klein, H. (2010). Occupational Structures, Employment, and Unemployment. In Bergad & Klein (Ed.), *Hispanics in the United States*, (276-319). Cambridge University Press.
- Leitner, H., McMaster, R., Elwood, S. McMaster, S., & Sheppard, E. (1998). *Models for Making GIS Available to Community Organizations: Dimensions of Difference and Appropriateness: NCGIA Specialist Meeting on Empowerment, Marginalization and GIS*. Santa Barbara, 1-24.
- Leyden, Kevin M. "Social Capital and the Build Environment: The Importance of Walkable Neighborhoods." *American Journal of Public Health* 93, no. 9 (September 2003): 1546-1551.
- Lui, Meizhu, Robles, B., Leondar-Wright, B., Brewar, R. & Adamson, R. (2006). *The Color of Wealth: The Story Behind the U.S. Racial Wealth Divide*. New York: The New Press.
- Mangaliman, J. (2011). *The Color of Cuts: The Disproportionate Impact of Budget Cuts on Communities of Color in Washington State*. Seattle, WA: Washington CAN!

Walla Walla Poverty Assessment 2012

Maantay, J. (2001). Zoning, equity, and public health. *American Journal of Public Health*, 91(7), 1033–1041.

Merikangas, K., He, J., Burstein, M., Swendsen, J., Avenevoli, S., Case, B., Georgiades, K., Heaton, L., Swanson, S., & Mark Olfson, M. (2010). New Research: Service Utilization For Lifetime Mental Disorders In U.S. Adolescents: Results of The National Comorbidity Survey–Adolescent Supplement (NCS-A). *Journal of the American Academy of Child & Adolescent Psychiatry*, 50, 32-45.

Mason, Susan G. and Fredericksen, Elizabeth. "Fostering Neighborhood Viscosity: Does Design Matter?" *Community Development Journal* 46.1 (2011): 7-26.

Monmonier, M. (1996). *How to Lie with Maps*. Chicago: University of Chicago Press.

National Council of State Housing Agencies (2008). *Housing Credit*. National Council of State Housing Agencies Resource Center. Retrieved from <http://www.ncsha.org/resource/2011-housing-credit-fact-sheet>

Neckerman, Kathryn M, et al. "Disparities in Urban Neighborhood Conditions: Evidence from GIS Measures and Field Observation in New York City." *Journal of Public Health Policy* (Palgrave Macmillan) 30 (2009): S264-S285.

Nord, M., Andrews, M., & Carlson, S. (2007). Household Food Security in the United States, 2006. Washington, DC: U.S. Department of Agriculture Economic Research Services.

O'Connor, A. (1999). Swimming Against the Tide: A Brief History of Federal Policy in Poor Communities. In DeFilippis, J. & Saegert, S. (Ed.) *The Community Development Reader* (p.9). New York: Routledge.

Office of Financial Management. (2011). Governor's Proposed 2012 Supplemental Budget: Budget Highlights. Retrieved from <http://www.ofm.wa.gov/budget12/highlights/default.asp>

Oh, J. (2004). Race/Ethnicity, Home Ownership, and Neighborhood Attachment. *Race and Society*. 7(2) 67-77.

Orlebeke, Charles J. (2000). The Evolution of Low-Income Housing Policy: 1949–1999. *Housing Policy Debate*, 11(2), 489-520.

Overseas Development Institute. (1999). *The Meaning and Measurement of Poverty*. London: Simon Maxwell.

Partners in Action. (2011). Washington State Nutrition & Physical Activity Plan. *Washington State Department of Health*. Retrieved from http://depts.washington.edu/waaction/plan/nut2/rec_a.html

Portney, K., & Berry, J. (1999). Neighborhoods and Social Capital. *Civil Society in the United States*.

Retrieved from <http://ase.tufts.edu/polsci/faculty/portney/socialcap.pdf>

Providence. (2011). Health & Services: Walla Walla: Our Services. Retrieved from <http://www2.providence.org/wallawalla/services/Pages/default.aspx>

Putnam, Robert (2000). "Thinking about Social Change in America." In *Bowling Alone: The Collapse and Revival of American Community*, by Robert Putnam, 15-28. New York, NY: Simon & Schuster.

Quigley, W. (2003). *Ending Poverty as We Know It: Guaranteeing A Right to a Job at a Living Wage*. Philadelphia: Temple University Press.

Quon-Huber, M., Van Egeren, L., Pierce, S., and Foster-Fishman, P. (2009). GIS Applications for Community-Based Research and Action: Mapping Change in a Community-Building Initiative. *Journal of Prevention & Intervention in the Community*, 37: 5-20.

Raja et al. (2008). Beyond Food Deserts: Measuring and Mapping Racial Disparities in Neighborhood Food Environments. *Journal of Planning Education and Research*; 27: 469-482.

Reaven, D. (2009). Walla Walla Poverty Assessment: How Transportation, Healthcare, Employment, and Domestic Abuse Affect Latinos and Others in Poverty. Whitman College Politics Department: Walla Walla.

Rose, E., Wittne, K., & McCreanor, T. (2009). Transport Related Social Exclusion in New Zealand: Evidence and Challenges. *Kōtuitui: New Zealand Journal of Social Sciences Online*. 4, 191-203.

Rothwell, J. T. and Massey, D. S. (2010), Density Zoning and Class Segregation in U.S. Metropolitan Areas. *Social Science Quarterly*, 91: 1123–1143. doi: 10.1111/j.1540-6237.2010.00724.x

Sampson, R. (1988). Local Friendship Ties and Community Attachment in Mass Society: A Multilevel Systemic Model. *American Sociological Review*. 53(5), 766-779.

Serenity Point Counseling Services (2011). *About Us*. Retrieved from http://www.serenitypointcounseling.com/index.php?option=com_content&view=article&id=91&Itemid=173

[Shlay, A., & Rossi, P. \(1981\). Keeping up the Neighborhood: Estimating Net Effects of Zoning. American Sociological Review. 46\(6\), 703-719.](#)

Silverman, R. (2004). Community-Based Organizations: The Intersection of Social Capital and Local Context in Contemporary Urban Society. Detroit: Wayne State University Press.

Small, M., Jacobs, E. & Peeples, R. (2008). Why Organizational Ties Matter for Neighborhood Effects:

- Resource Access through Childcare Centers. *Social Forces*, 87(1), 387-414.
- Smith, R. (1985). Activism and Social Status as Determinants of Neighborhood Identity. *The Professional Geographer*. 37(4), 421-432.
- SOS Health Services. (2011). *Medical Services*. Retrieved from <http://www.soshealthservices.org/index.php?id=2>
- Souza Briggs, X. (2003). Community Building. In DeFilippis, J. & Saegert, S. (Ed.) *The Community Development Reader* (p.36-38). New York: Routledge.
- Stroul, B., & Friedman, R. (1986). A System of Care for Children and Youth with Severe Emotional Disturbances (Rev ed.). Washington, DC: Georgetown University Child Development Center, CASSP Technical Assistance Center.
- Superpages.com. (2011). Children's Dental Group – Steven Karmy DDS. Retrieved from <http://www.superpages.com/bp/Walla-Walla-WA/Karmy-Ramsey-L2086797969.htm>
- Thane, B. (2007). Washington State Farmworker Housing Trust Survey. Seattle, WA: Washington State Farmworkers Housing Trust.
- U.S. Department of Human & Health Services. (2011). Retrieved from www.hhs.gov
- U.S. Department of Health & Human Services. (2011). Timeline of the Affordable Care Act: What's Changing and When. Retrieved from <http://www.healthcare.gov/law/timeline/index.html>
- U.S. Department of Veteran Affairs. (2011). Jonathan M. Wainwright Memorial VA Medical Center. Retrieved from <http://www2.va.gov/directory/guide/facility.asp?id=142>
- Vetzner, S. (2011). Mental Health American Calls House Funding Bill a Severe Blow to Mental Health Services and Supports. Alexandria, VA: Mental Health America. Retrieved from <http://www.mentalhealthamerica.net/index.cfm?objectid=CFF2FBB0-1372-4D20-C8A14C9F1C439EAE>
- Ver Ploeg, Michele (2009). Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences. Economic Research Service, United States Department of Agriculture.
- Walla Walla Clinic. (2011). *About Us*. Retrieved from <http://www.wallawallaclinic.com/AboutUs.html>
- Walla Walla Community College. (2011). *Programs and Services*. Retrieved from <http://www.wvcc.edu/CMS/index.php?id=1008>
- Walla Walla County. (2011). *Health Department Home Page*. Retrieved from <http://www.co.walla-walla.wa.us/departments/PHD/index.shtml>
- Washington Secretary of State. (2011). Charitable Solicitations Program: Charity Profile Report. Retrieved from http://www.sos.wa.gov/charities/search_detail.aspx?charity_id=24535
- Washington State Department of Commerce. (2010). Homeless Management Information System. Retrieved from <http://www.commerce.wa.gov/site/890/default.aspx>
- Washington State Department of Early Learning. (2011) Child Care & Preschool Options. Retrieved from <http://www.del.wa.gov/care/Default.aspx>
- Washington State Department of Social & Health Services. (2011). About Us. Retrieved from <http://www.dshs.wa.gov/>
- Washington State Department of Social and Health Services. (2012). *Medical Programs*. Retrieved from <http://www.dshs.wa.gov/onlinecso/medical.shtml>
- Washington State Department of Vocational Rehabilitation. (2011). *Welcome to DVR*. Retrieved from <http://www.dshs.wa.gov/dvr/Default.aspx>
- Washington State Health Care Authority. (2011). Understanding Basic Health. Retrieved from <http://www.basicealth.hca.wa.gov/understanding.html>
- Weber, Mark. (2003). President's New Freedom Commission on Mental Health. Retrieved from <http://govinfo.library.unt.edu/mentalhealthcommission/press/july03press.htm>
- Williamson, A., Smith, M., & Strambi-Kramer, M. (2009). Housing Choice Vouchers, the Low-Income Housing Tax Credit, and the Federal Poverty Deconcentration Goal. *Urban Affairs Review*, 45 (1), 119-132.
- Williamson, T., Imbroscio, D., and Aperovitz, G. (2002). *Making a Place for Community: Local Democracy in a Global Era*. New York: Routledge.
- Woldoff, R. (2002). The Effects of Local Stressors on Neighborhood Attachment. *Social Forces*. 81(1) 87-116.
- Wu, C., & Eamon, M. K. (2010). Need for and barriers to accessing public benefits among low-income families with children. *Children and Youth Service Review*, 32, 58-66.

The State of the State for Washington Latinos
www.walatinos.org