

I-CARE, Inc.

CSBG & HS/EHS COMMUNITY ASSESSMENT

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Helpful Hints

A green box provides a definition or context for a term. Sources are provided as applicable.

An orange box provides detailed information that expounds on the data to give context. Sources are provided as applicable.

A gray box includes pertinent information and notes from the writers of this Community Assessment.

A blue box provides additional analysis from the writers of this Community Assessment.

A yellow box provides additional community resources. Links are provided as applicable.

MODULE 1: WHAT IS A COMMUNITY ASSESSMENT (CA)? HOW IS IT COMPLETED?

Introduction

A Community Assessment is a tool to make informed program decisions, to determine the types of services most needed by families and children, and to help set long- and short-term program objectives. Head Start / Early Head Start (HS/EHS) and Community Services Block Grant (CSBG) leadership staff study the most important changes in the communities and counties they serve on a regular basis. However, the Community Assessment is the formal and far-reaching process utilized to accomplish this. HS/EHS grantees must conduct a comprehensive Community Assessment every five years and update it annually, while CSBG programs are required to conduct a Community Assessment every three years.

Head Start Performance Standards

Source: <https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii/1302-11-determining-community-strengths-needs-resources>

1302.11 Determining community strengths, needs, and resources.

(b) Community-wide strategic planning and needs assessment (community assessment). (1) To design a program that meets community needs, and builds on strengths and resources, a program must conduct a community assessment at least once over the five-year grant period. The community assessment must use data that describes community strengths, needs, and resources and include, at a minimum:

(i) The number of eligible infants, toddlers, preschool-age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak, including:

(A) Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432 (6)(A);

(B) Children in foster care; and

(C) Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;

(ii) The education, health, nutrition and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;

(iii) Typical work, school, and training schedules of parents with eligible children;

(iv) Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of eligible children served;

(v) Resources that are available in the community to address the needs of eligible children and their families; and,

(vi) Strengths of the community.

(2) A program must annually review and update the community assessment to reflect any significant changes, including increased availability of publicly funded pre-kindergarten (including an assessment of how the pre-kindergarten available in the community meets the needs of the parents and children served by the program,

and whether it is offered for a full school day), rates of family and child homelessness, and significant shifts in community demographics and resources.

(3) A program must consider whether the characteristics of the community allow it to include children from diverse economic backgrounds that would be supported by other funding sources, including private pay, in addition to the program's eligible funded enrollment. A program must not enroll children from diverse economic backgrounds if it would result in a program serving less than its eligible funded enrollment.

CSBG Community Assessment Organizational Standards

Source: <https://nascsp.org/wp-content/uploads/2018/02/cna20checklist20final20may202017.pdf>

Standard 3.1	The organization conducted a community assessment and issued a report within the past three years.
Standard 3.2	As part of the community assessment, the organization collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).
Standard 3.3	The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.
Standard 3.4	The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.
Standard 3.5	The governing board formally accepts the completed community assessment.

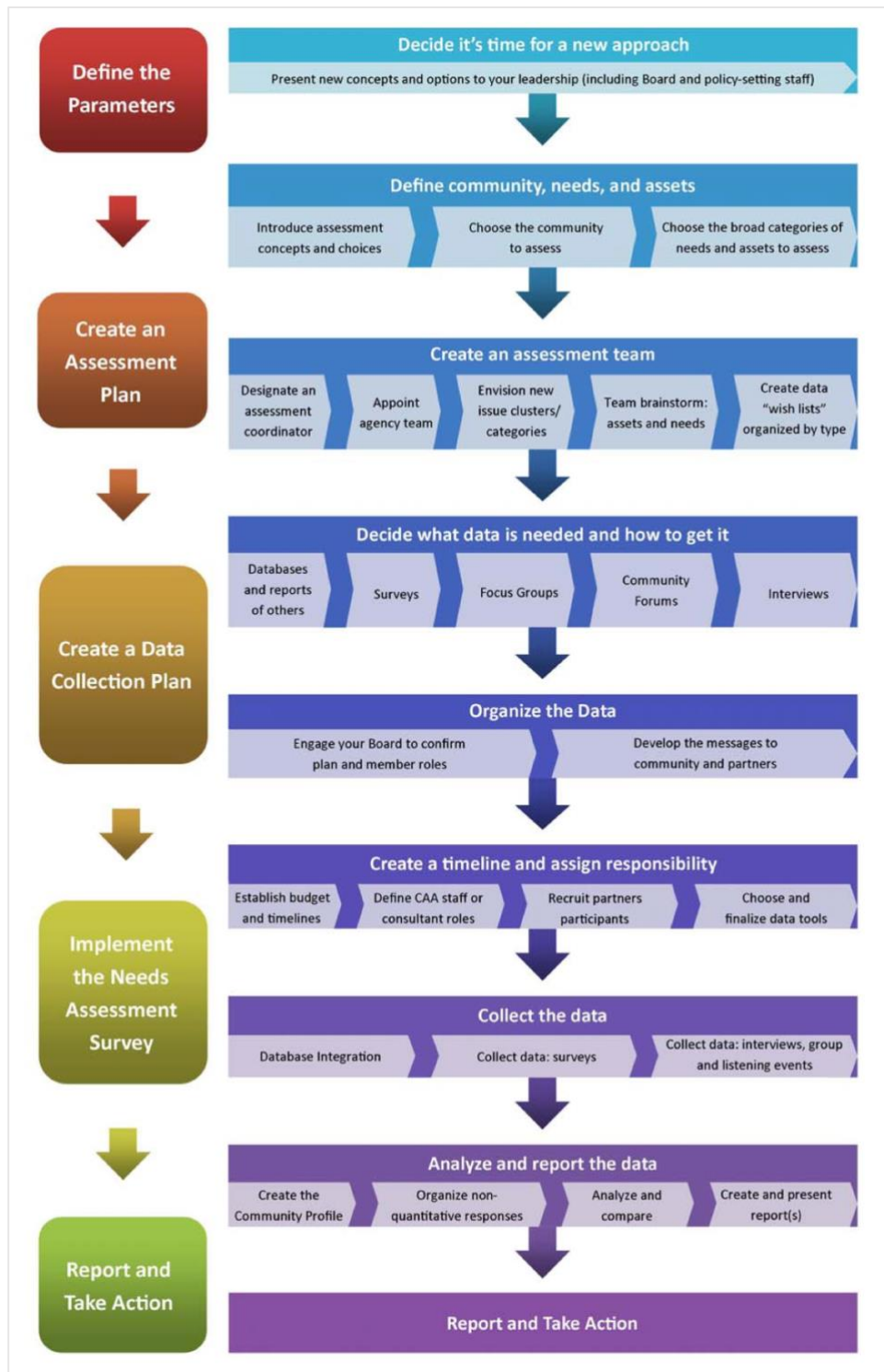
Organizational Standards Related to the Community Assessment

The following standards, while not in the community assessment category, are related to conducting a needs assessment. These standards are included in the following categories:

- Consumer Input and Involvement
- Community Engagement
- Strategic Planning

Standard 1.2	The organization analyzes information collected directly from low-income individuals as part of the community assessment.
Standard 2.2	The organization utilizes information gathered from key sectors of the community in assessing needs and resources during the community assessment process or other times. These sectors would include at minimum: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions.

The [National Association for State Community Services Programs' Community Action Guide to Comprehensive Community Needs Assessments](#) offers the following logic model for completing a Community Assessment:



Methodology: The Community Assessment Process

This Community Assessment offers detailed information about numerous topics, as well as an examination of the agency's strengths and barriers relative to delivery of services to clients. This is a comprehensive collection and analysis of key indicators to evaluate the needs and characteristics of eligible Head Start/Early Head Start children and families and Community Services Block Grant clients. This report not only meets the agency's federal requirements, but it becomes an integral part of the program's planning, implementation, and evaluation process.

Per the HS/EHS Performance Standards, every year after the comprehensive analysis, a follow-up assessment becomes the latest baseline to identify current community needs, design new plans, choose additional community partners, develop strategic collaborations, evaluate progress of past interventions, and make relevant decisions about program improvement changes expeditiously. Per the CSBG federal requirements, every three years the agency conducts a comprehensive collection and analysis of key indicators to evaluate the needs and characteristics of the community.

A consulting organization, [mano-Y-ola](#), facilitated this Community Assessment process, which focused on promoting the effective participation of agency staff members, as well as helping in the identification and organization of the best data sources to comply with Community Services Block Grant requirements and the [Head Start Performance Standards](#). Prior to the collection and [analysis](#) of the required data, the consultants and the agency director agreed to strategic priorities on data collection and analysis that are relevant to current issues and program priorities.

The Community Assessment methodology focuses on different levels of analysis. The following components of the Community Assessment represent key methods utilized to complete this report:

- *Review of most recent secondary data on indicators that have an impact on the agency and its service delivery model(s). (Below we offer a rationale and brief description for the use of Census Data: American Community Survey 5-Year Estimates.)*

The Community Assessment includes all the necessary and required topics established by the [Office of Head Start](#). It also fulfills [Community Service Block Grant](#) requirements and is "the first phase of the Results Oriented Management and Accountability (ROMA) Cycle, grounding and guiding the work to develop and implement programs and services that lift families and communities out of poverty." Data collection and analysis may include, but is not limited to, the Program Information Report (PIR) data, family partnership agreements, child/family application data, child screening and outcomes data, census data, local and state planning department reports, state department data, local interagency committee reports, data from local school districts, child care resource and referral agencies, agencies serving children with disabilities, health care providers, and social service providers.

- *Development and utilization of additional assessments, to include data observed or collected directly from firsthand experience using such methods as attitude / perception surveys, key informant interviews, community forums, and/or focus group interviews.*

The agency leadership, together with mano-Y-ola's team, identifies and employs methods to collect data from different sources and service areas. These include client and/or family needs assessment surveys, key informant surveys, and focus groups.

1. The *Client / Family Needs Survey* is administered to identify needs and strengths of clients who received services through the Community Service Block Grant, the Weatherization Assistance Program, and eligible Head Start and Early Head Start families in the service area (see [Appendix A: Client / Family Needs Survey](#)).
2. *Key Informant Survey* and *Focus Group* results generate important implications and connections to program needs and serve to generate strategic discussions in relation to program improvement based on empirical data (see [Appendix B: Key Informant Questions](#)).

This year's Community Assessment enhances the agency's existing efforts by collecting, analyzing, illustrating, and narrating in a reader-friendly format both secondary data from reliable sources and primary data from clients and community experts. This assessment is intended to be utilized digitally as a living document with live links to the most recent and relevant data available at the time of this study. The data contained herein will be instrumental in enabling agency leadership to effectively develop strategic plans and priorities based on the actual needs of the community members they serve.

Census Data: American Community Survey 5-Year Estimate. A predominant data source used for this report is the [U.S. Census Bureau's](#) 2021 American Community Survey, 5-Year Estimate:

"The American Community Survey (ACS) is an ongoing survey that provides data every year – giving communities the current information they need to plan investments and services. Information from the survey generates data that help determine how more than \$450 billion in federal and state funds are distributed each year. In order to support local governments, communities, and federal programs, data was collected on the following topics: age and sex, race and ethnicity, family and relationships, income and benefits, health insurance, education, veteran status, disabilities, where you work and how you get there, and where you live and how much you pay for some essentials."ⁱ

Table 1 is a chart describing the difference between 1-Year and 5-Year Estimates. Although the 5-Year Estimate is the "least current" data set, it is the *most reliable*, and it allows for comparison and analysis of all counties, townships, or census tracts, which are geographic levels necessary when conducting an analysis of various populations, and/or other needs and indicators for Head Start programs.

1-Year Estimates	5-Year Estimates
12 months of collected data	60 months of collected data
Data for areas with populations of 65,000+	Data for all areas
Smallest sample size	Largest sample size
Less reliable than 3-Year or 5-Year	Most reliable
Most current data	Least current data
Annually released: 2005-present	Annually released: 2009-present
Best used when	Best used when
Currency is more important than precision; Analyzing large populations	Precision is more important than currency; Analyzing very small populations; Examining tracts and other smaller geographies because 1-Year Estimates are not available

Table 1: U.S. Census Data: ACS 1-Year and 5-Year Estimate Features

NOTE: Several reports refer to the number or percentage of women who had a birth in the past 12 months. The ACS 5-Year Estimates data set used in this Community Assessment provides an average of women who had a birth in the past 12 months from 2017 to 2021.

MODULE 2: WHO DOES THIS CA BELONG TO, AND WHICH COMMUNITY(IES) DO THEY SERVE?

State of the Grantee

The State of the Grantee is a brief narrative written by the agency, about the agency and the community in which it operates; the remainder of the Community Assessment is written by mano-Y-ola LLC.



The mission of I-CARE, Inc. is to empower and assist individuals and families with low incomes to attain skills, knowledge, motivation, and opportunities to become self-sufficient and independent as well as to revitalize their communities. We envision communities in our service area that have dismantled systemic inequities, delivered equal opportunities to all people, and in which all people are thriving. We center our values on integrity, compassion, diversity, honesty, and equity.

In December 1965, I-CARE, Inc. was chartered as a non-profit corporation established to find effective solutions to basic social and economic problems related to poverty in Iredell County, North Carolina. Funding for the agency came from the Office of Economic Opportunity (OEO). Since our initial charter, I-CARE, Inc. has grown to provide services in other communities, as well, including Alexander, Catawba, and Lincoln Counties. Our primary office is located in Statesville, North Carolina (Iredell County). We serve a wide range of individuals and families who come to us for various levels of assistance and support. In 2021-22, we served 525 individuals in 496 families. Our current funding includes:

- Community Services Block Grant (Iredell and Alexander Counties)
- Duke Energy Helping Home (Iredell and Lincoln Counties)
- Extended Day Care (Iredell County)
- Head Start/Early Head Start (Iredell and Catawba Counties)
- Heating Appliance Repair & Replacement Program (Iredell and Lincoln Counties)
- NC DSS Food and Nutrition Services Employment and Training Program (Iredell County)
- USDA-Child and Adult Care Food Program (Iredell and Catawba Counties)
- Weatherization Assistance Program (Iredell and Lincoln Counties)

I-CARE is well-established in Iredell County and growing its roots in other service areas over time. We typically partner with over 120 local agencies annually to support the success of our work. We also work closely with our federal partners, including the Department of Health and Human Services (Administration for Children and Families – Office of Head Start and the Office of Community Services); the Department of Energy; and the U.S. Department of Agriculture. Our valued state partners include the North Carolina Department of Health and Human Services (Division of Child Development and Early Education and the Office of Economic Opportunity) and the Department of Environmental Quality. While our funding partners are certainly foundational to our operations, the parents, children, families, and individuals we serve are who make us successful. While their participation is paramount in their quest to fulfill their own goals and priorities, their support through volunteerism is also critical to the success of our agency. Last year, over 2,100 hours were donated to I-CARE, of which almost 1,500 were by individuals with low incomes.

We employ an informal whole-family approach to service delivery to families as needed to provide the most comprehensive mix of services that offer them the best chance for success. We are governed by an 18-member volunteer board of directors that functions under a tripartite system of governance. One-

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MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

State of the Grantee

third of our board are elected officials (or their representatives); at least one-third are citizens representing low-income areas; and the rest of the board comprises private sector representatives, including those from the faith community, business, education, social service agencies, or citizens interested in the affairs of people with low incomes. The Head Start programs are also governed by a Policy Council, of which at least 51 percent of its membership are parents of Head Start/Early Head Start children.

From the board volunteers, clients, children, and program participants to the parents, partners and our dedicated team of professionals who do this tireless work, it is our combined efforts that have enabled our success, and most importantly, the success of those to whom we provide services. The efforts of these groups of people led to our being awarded the 2017 Non-Profit of the Year from our local Chamber of Commerce.

I-CARE, Inc. Head Start and Early Head Start Centers in Iredell and Catawba Counties		
Center Name	Address	Funded Enrollment/Slots
Viewmont Head Start	21 16 th Ave. NW Hickory, NC	17 (HS)
Newton Head Start	249 East N St. Newton, NC	70 (HS)
Buffalo Shoals Head Start	532 Buffalo Shoals Rd. Statesville, NC	37 (HS)
Cloverleaf Head Start	300 James Farm Rd. Statesville, NC	17 (HS)
Mooresville HS	219 W Mills Ave. Mooresville, NC	17 (HS) 8 (EHS)
Southeast CDC	230 Adams St. Statesville, NC	37 (HS) 16 (EHS)

I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Geography

Geography

North Carolina is in the Southeastern region of the United States, bordered by South Carolina, Georgia, Tennessee, Virginia, and the Atlantic Ocean. North Carolina has a total area of 53,819 square miles, which makes it the 28th largest state. The state is divided into 100 counties, the state capital is Raleigh, and the largest city by population is Charlotte.

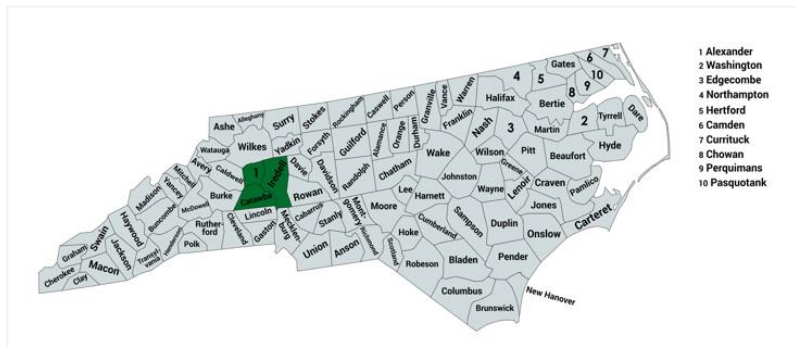


Figure 1: I-CARE Service Area Counties

I-CARE, Inc. Service Area

Geographic Characteristics

- The service area lies within both the Piedmont and Foothills regions of Western North Carolina.
- Bushy Mountains, a 45-mile mountain range, divide two of Central North Carolina's largest rivers, the Yadkin and Catawba.
- Catawba River is 220 miles long, rises in the Appalachian Mountains and drains in the Piedmont.
- Lake Norman is a man-made lake that was created by the Cowans Ford Dam and is fed by the Catawba River.

Natural Resources/Economy

- Hiddenite is the location of mines that yield emeralds, sapphires, and hiddenite, a variety of spodumene.
- Catawba County is a freight railroad transportation center.
- Catawba County is part of the "North Carolina Data Center Corridor" and is home to the Apple iCloud data center.ⁱⁱ
- Iredell County is a major hub for NASCAR racing.
- Lowe's corporate headquarters is located in Mooresville.

Weatherⁱⁱⁱ

- Average Annual rainfall – 46 inches
- Average Annual snowfall – 6 inches
- Average Annual high temperature – 69° F
- Average Annual low temperature – 47° F

I-CARE, Inc. Service Area

County	County Seat	Area	Bordering Counties	Cities / Municipalities
Alexander	Taylorsville	264 sq. mi.	Caldwell, Catawba, Iredell, Wilkes	Ellendale, Gwaltneys, Little River, Millers, Sharpes, Sugar Loaf, Taylorsville, Wittenburg
Catawba	Newton	413 sq. mi.	Alexander, Burke, Caldwell, Iredell, Lincoln	Brookford, Catawba, Claremont, Conover, Hickory, Long View, Maiden, Newton
Iredell	Statesville	597 sq. mi.	Cabarrus, Davie, Lincoln, Mecklenburg, Rowan	Davidson, Harmony, Love Valley, Mooresville, Statesville, Troutman

Table 2: I-CARE, Inc. Service Area

I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of HS/EHS Families (2022 PIR)

Characteristics of HS/EHS Families (2022 PIR)



Office of Head Start / Head Start Enterprise System

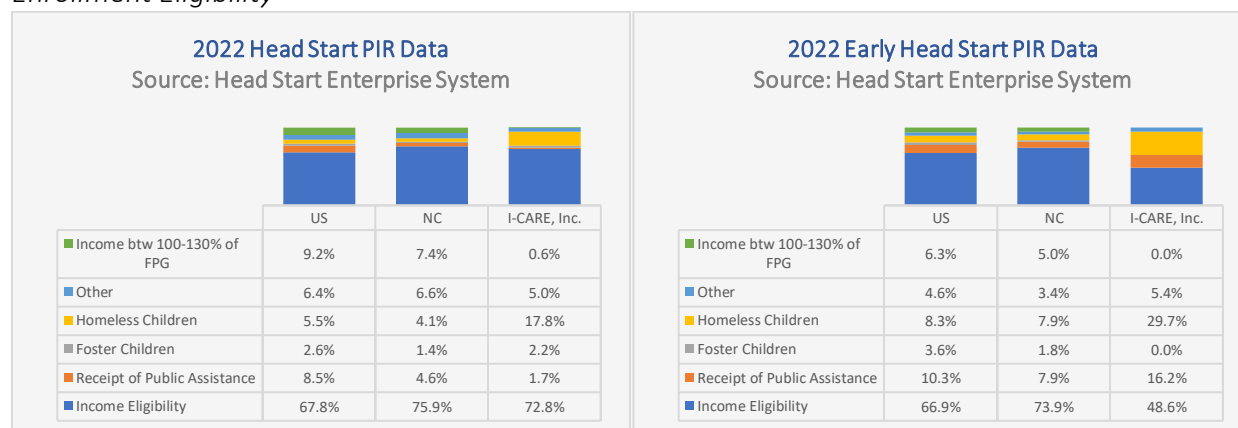
The following graphs illustrate select 2022 Program Information Report (PIR) data, comparing the I-CARE, Inc. Head Start and Early Head Start data to data for programs in North Carolina and the United States.

Note: All data was collected from the [HSES Enterprise System](#); some discrepancies are noted between the PDF reports released and the Excel Zip File Download. Data reflected in this section of the CA is collected from the 2022 Excel Zip File Download.

HEAD START	United States	North Carolina	I-CARE, Inc.
Total Funded Enrollment (2020-21)	584,069	15,259	195
Cumulative Enrollment (Total)	540,267	13,841	180

EARLY HEAD START	United States	North Carolina	I-CARE, Inc.
Total Funded Enrollment (2020-21)	188,140	5,694	40
Cumulative Enrollment (Total)	220,912	5,610	37
Cumulative Enrollment (Children)	208,731	5,494	37
Pregnant Women	12,181	116	0

Enrollment Eligibility

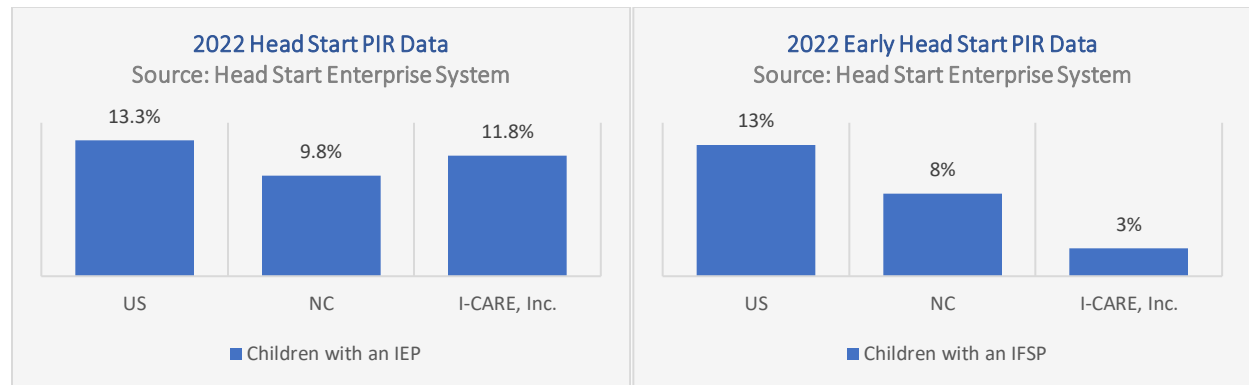


I-CARE, Inc. - 2023 Community Assessment

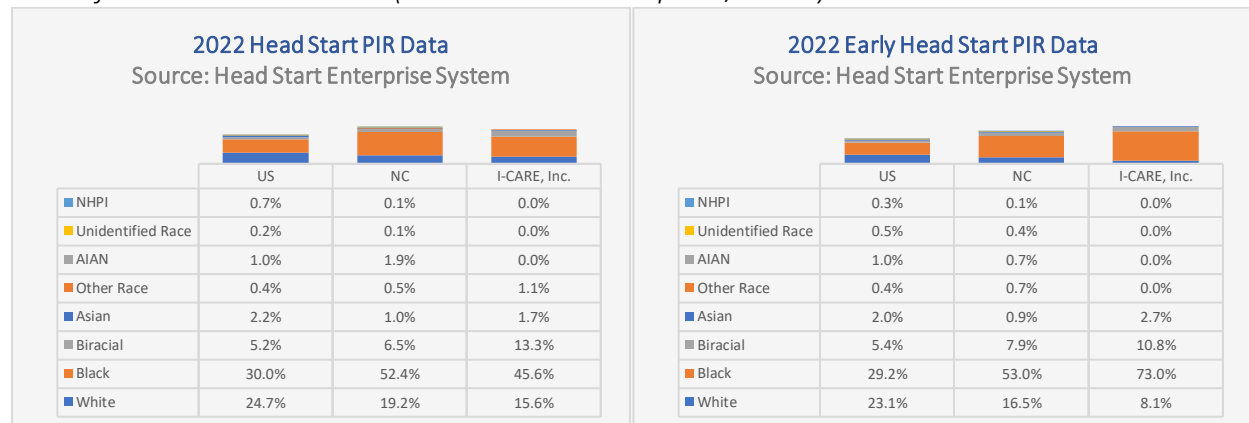
MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of HS/EHS Families (2022 PIR)

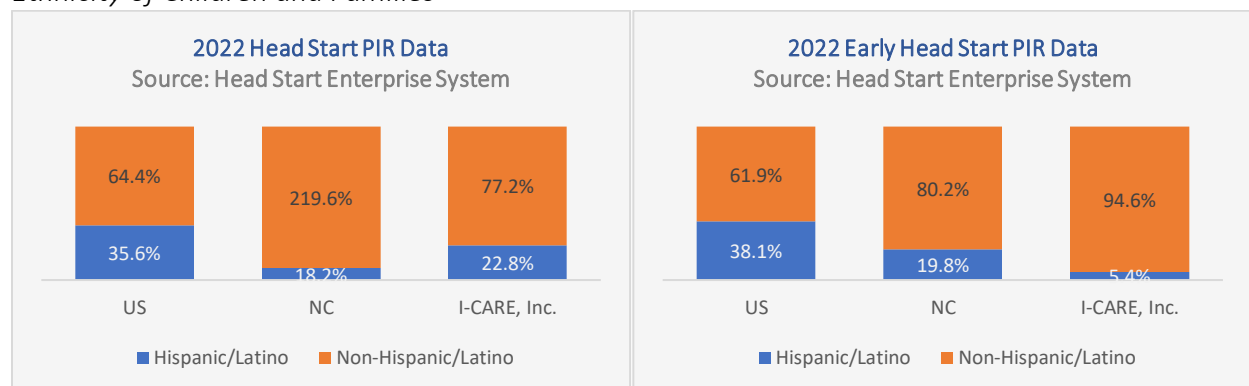
Children with Disabilities



Race of Children and Families (does not include Hispanic/Latino)



Ethnicity of Children and Families

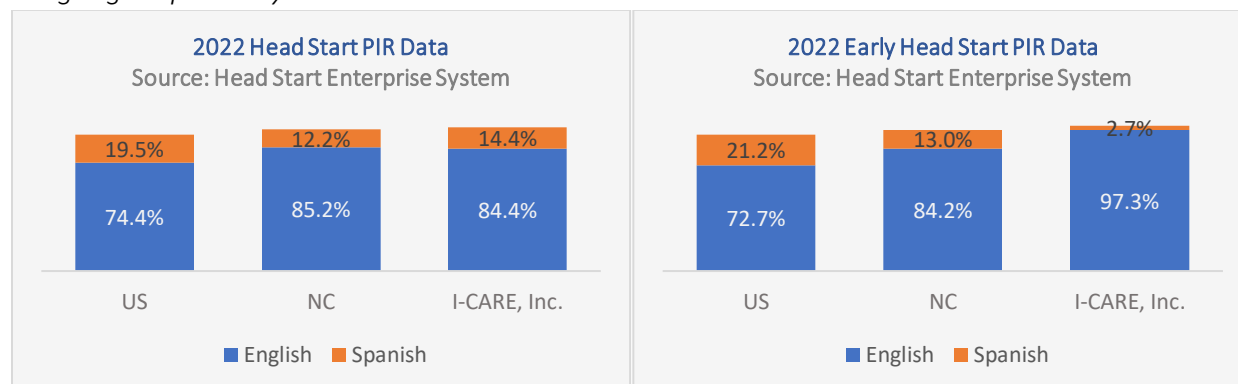


I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

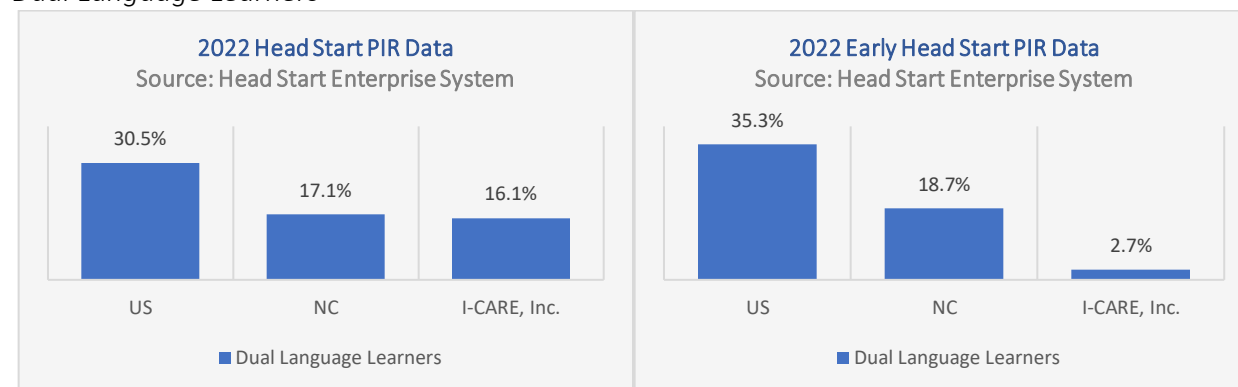
Characteristics of HS/EHS Families (2022 PIR)

Languages Spoken by Children and Families



Head Start				Early Head Start			
	US	NC	I-CARE, Inc.		US	NC	I-CARE, Inc.
English	402,225	11,791	152	English	160,515	4,724	36
Spanish	105,195	1,694	26	Spanish	46,840	728	1
C/S Am and Mex	1,082	22	0	C/S Am and Mex	392	1	0
Caribbean	3,045	24	0	Caribbean	947	14	0
Mid-Eastern / S Asian	8,426	88	1	Mid-Eastern / S Asian	3,213	50	0
E Asian	5,303	88	1	E Asian	2,098	28	0
Native N Am / Alaska Native	71	0	0	Native N Am / Alaska Native	39	1	0
Pac Island	1,945	4	0	Pac Island	246	0	0
European / Slavic	4,395	43	0	European / Slavic	2,616	15	0
African	5,570	49	0	African	2,552	23	0
American Sign Language	205	4	0	American Sign Language	92	3	0
Other	531	15	0	Other	256	9	0
Unspecified	2,274	19	0	Unspecified	1,106	14	0
Dual Language Learners	165,002	2,368	29	Dual Language Learners	73,654	1,027	1

Dual Language Learners

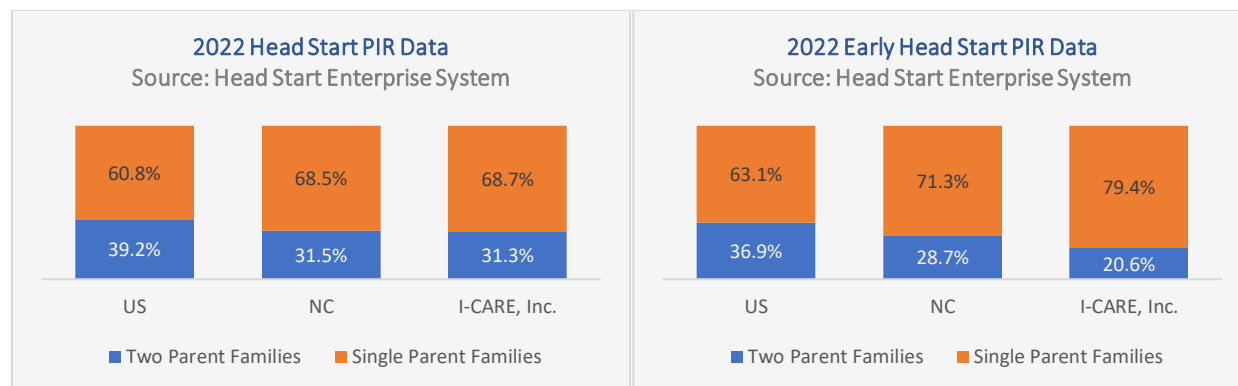


I-CARE, Inc. - 2023 Community Assessment

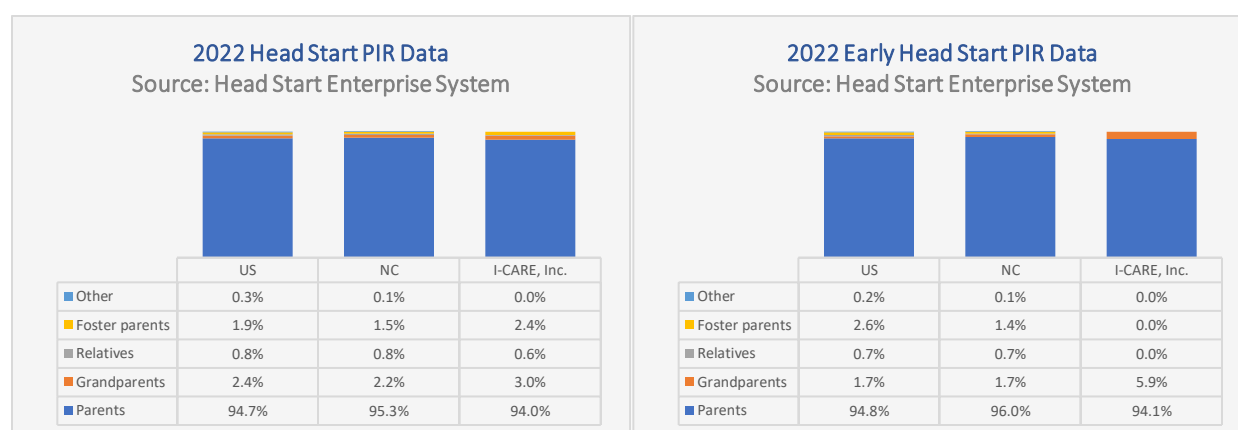
MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of HS/EHS Families (2022 PIR)

Families

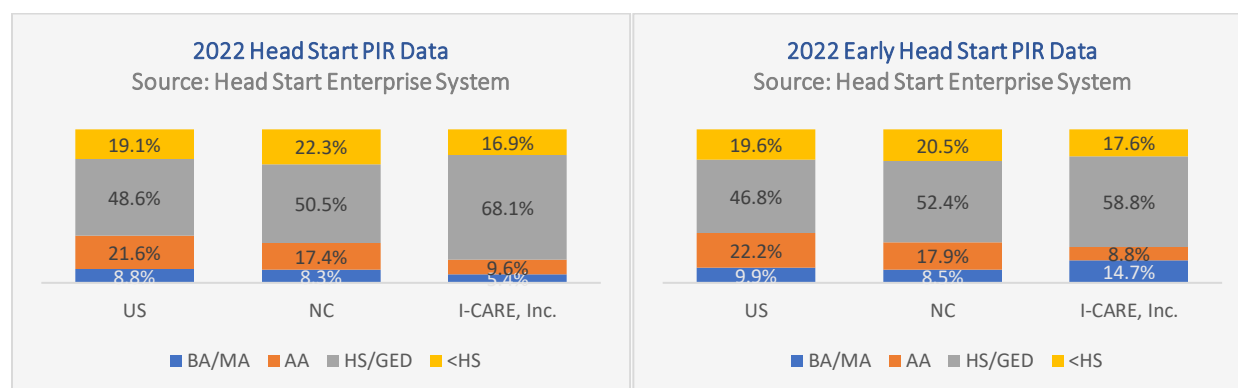


Of the total families, the number in which the parent/guardian figures are best described as:



Educational Attainment

Of the total number of families, the highest level of education obtained by the child's parent(s) / guardians(s) at enrollment:



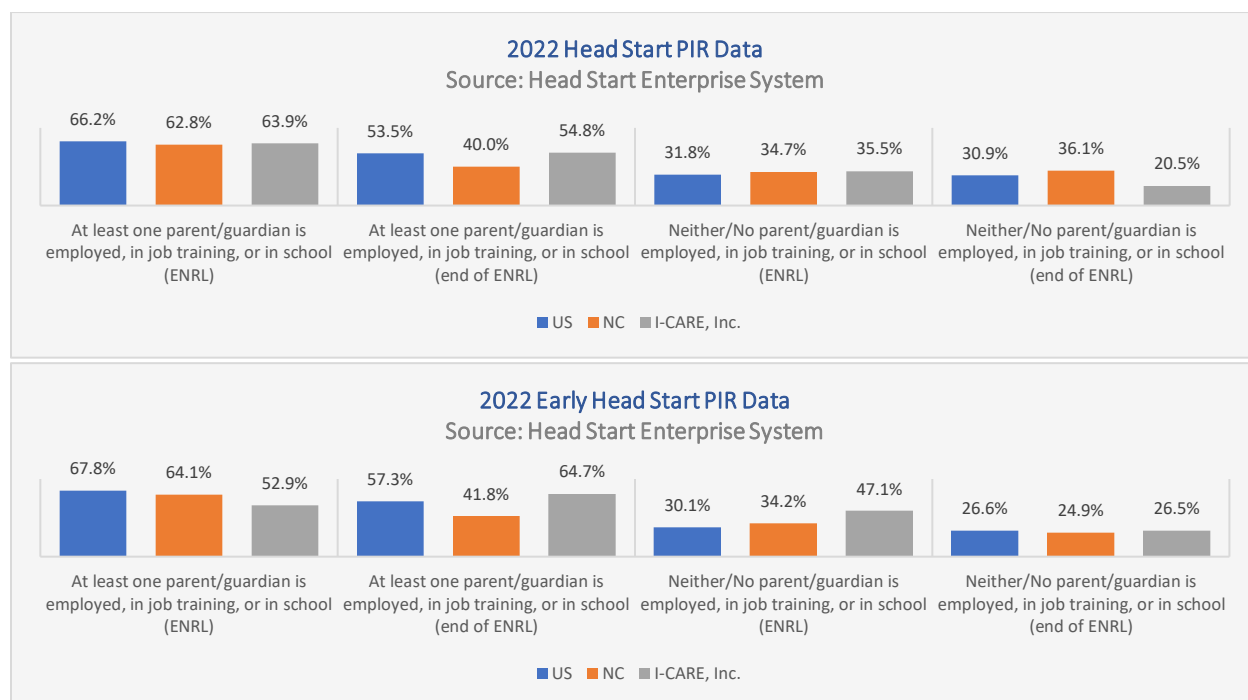
I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of HS/EHS Families (2022 PIR)

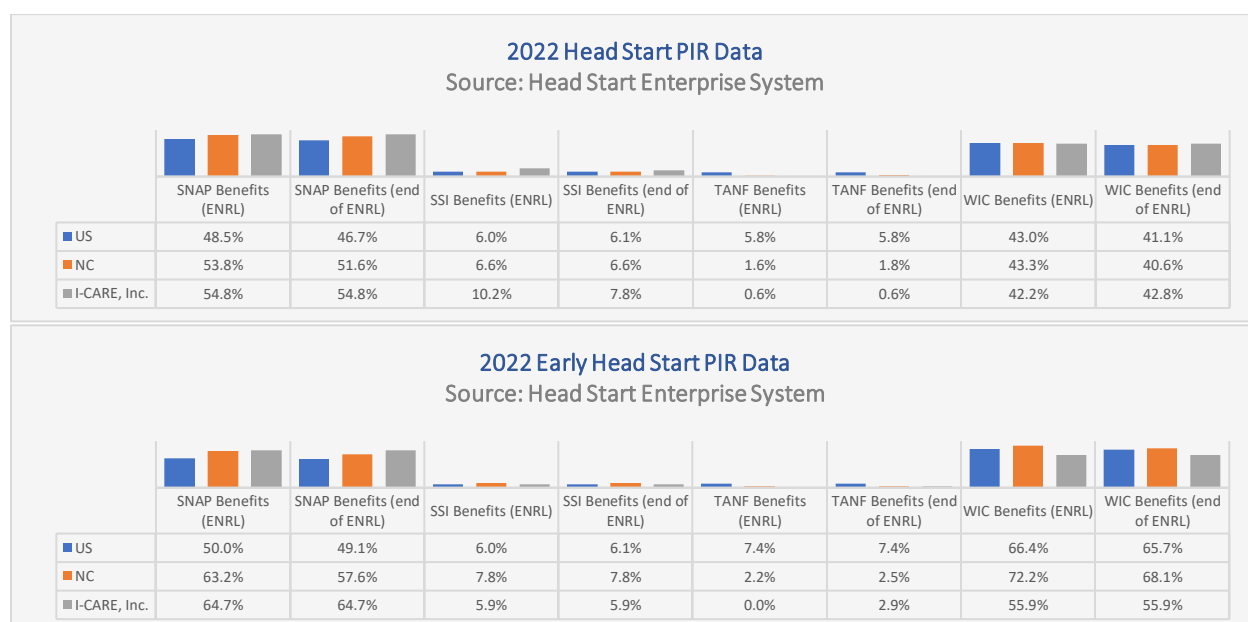
Employed, in Training, or in School

The following figures illustrate the number of families that have at least one, or neither, parent/guardian employed, in job training, or in school at enrollment (ENRL), as well as at the end of enrollment (end of ENRL).



Public Assistance

The following figures illustrate the number of families that receive federal assistance at enrollment (ENRL), as well as at the end of enrollment (end of ENRL).



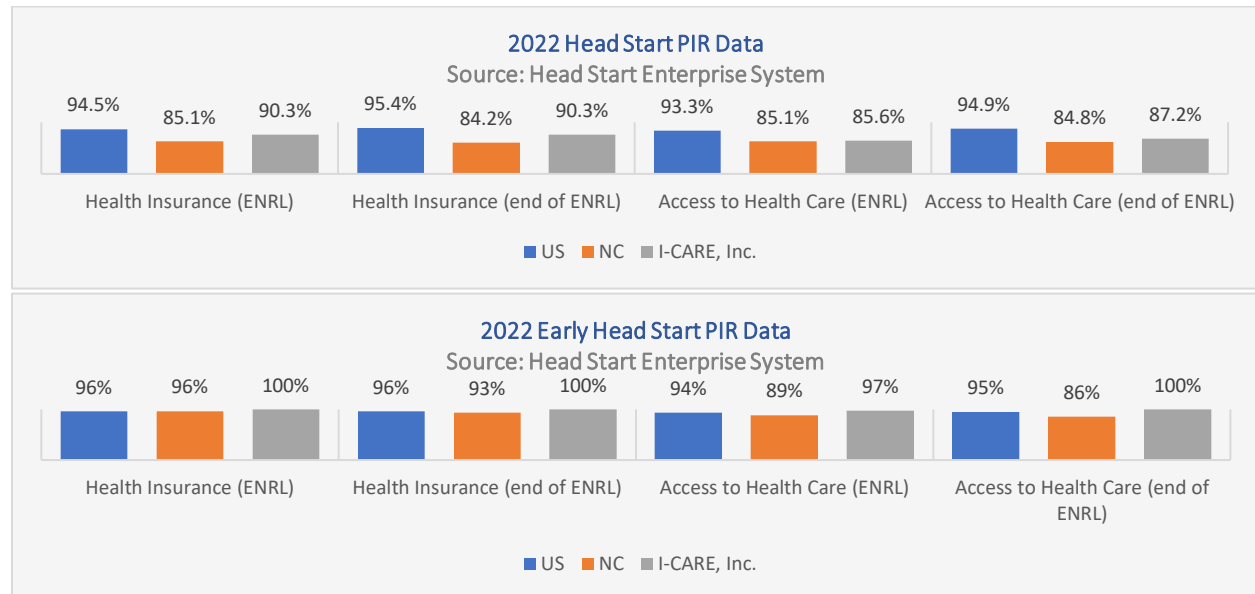
I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

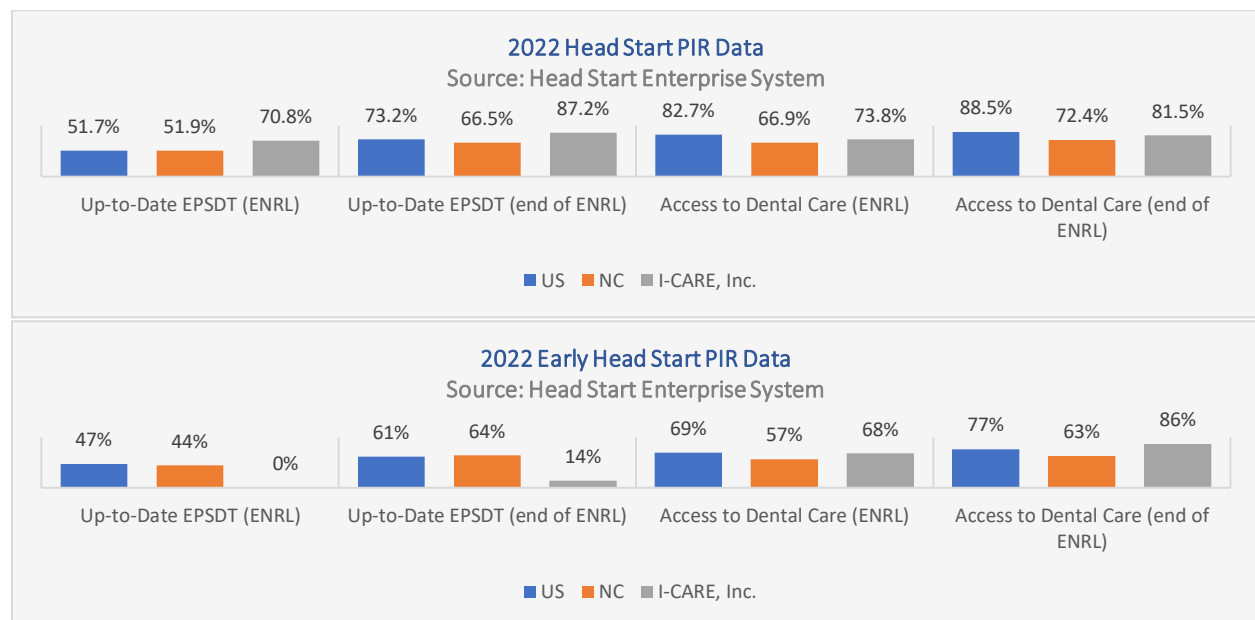
Characteristics of HS/EHS Families (2022 PIR)

Health

The following figures illustrate the number of children that have health insurance and access to health care at enrollment (ENRL), as well as at the end of enrollment (end of ENRL).



The following figures illustrate the number of children that are up to date on their Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) and those who have access to dental care at enrollment (ENRL), as well as at the end of enrollment (end of ENRL).

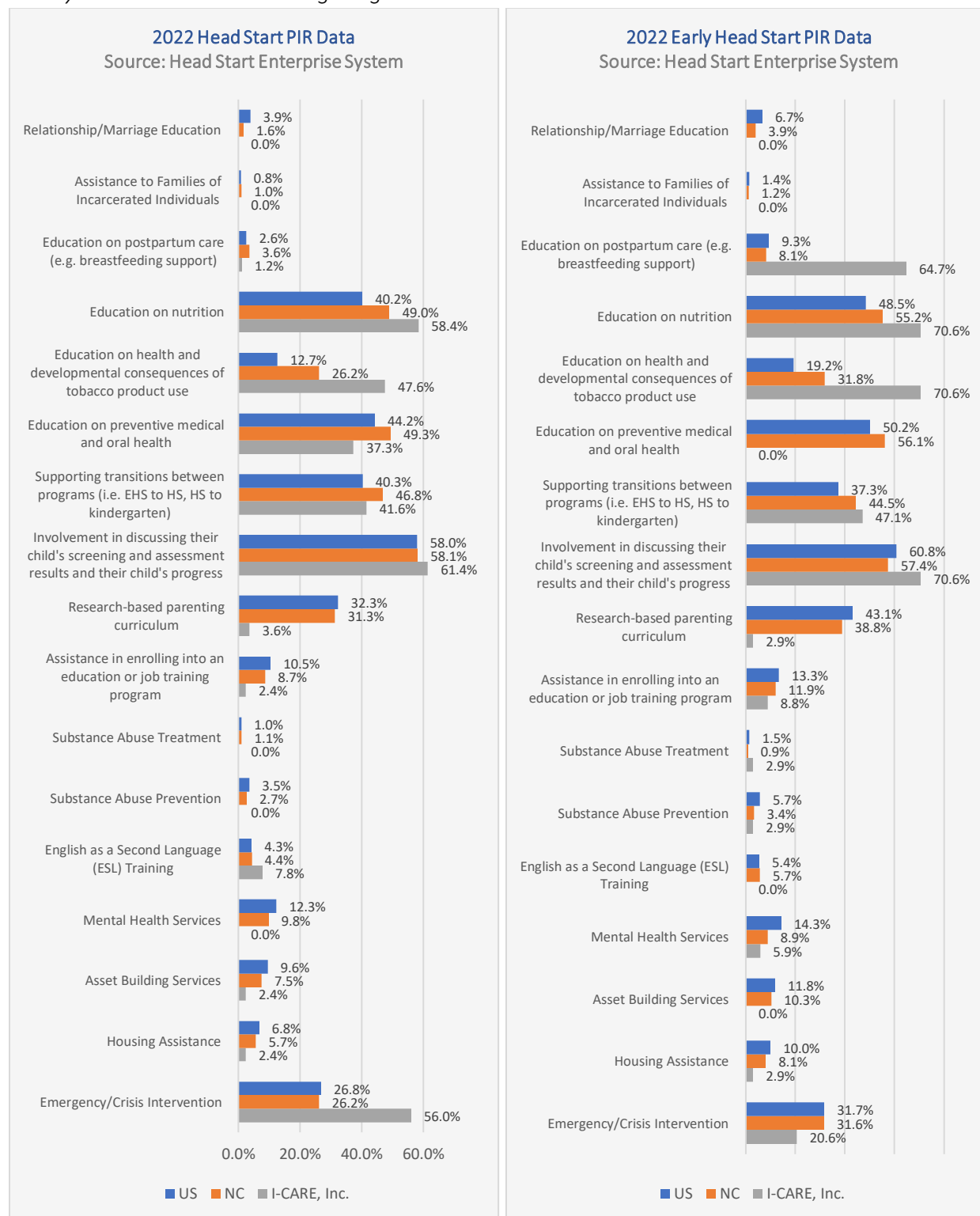


I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of HS/EHS Families (2022 PIR)

Family Services Received During Program Year

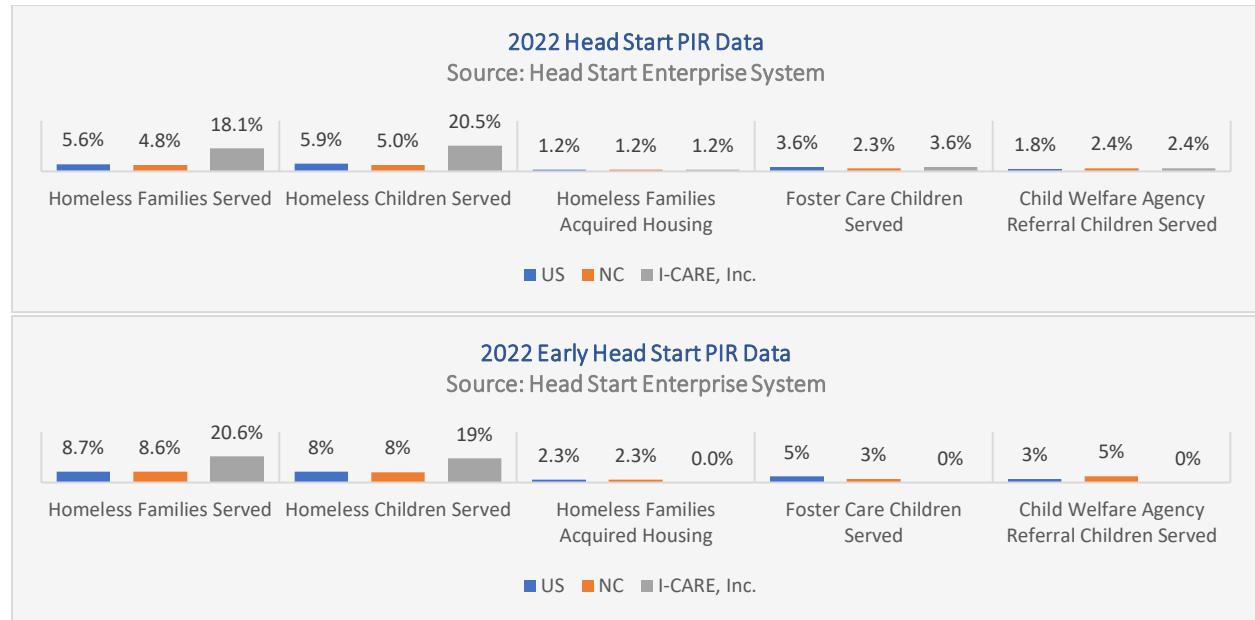


I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of HS/EHS Families (2022 PIR)

Homelessness, Foster Care, and Child Welfare Referrals



I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of CSBG Clients Served (July 2021 – February 2023)

Characteristics of CSBG Clients Served (July 2021 – February 2023)

Race/Ethnicity

I-Care, Inc. CSBG Demographic Report

2021-23, no duplicates

	Count of CSBG Self-Sufficiency Report	# Children age < 6	# in Family	Avg. Age	Avg. Initial Monies: Total Counted	Avg. Current Monies: Total Counted	Avg. Difference in Current Monies vs Initial Monies
Black or African American	120	44	289	37	\$17,855	\$22,402	\$4,547
White	36	9	77	38	\$13,026	\$21,789	\$8,764
Hispanic Native North / Central / South American	7	2	20	33	\$18,611	\$24,050	\$5,440
Native American/American Indian or Alaska Native	2	0	4	45	\$27,761	\$35,036	\$7,274
Multi-race	2	2	6	27	\$9,599	\$9,599	\$0
Asian	1	1	2	44	\$0	\$0	\$0
Grand Total	168	58	398	37	\$16,765	\$22,204	\$5,439

Gender

I-Care, Inc. CSBG Demographic Report

2021-23, no duplicates

	Count of CSBG Self-Sufficiency Report	# Children age < 6	# in Family	Avg. Age	Avg. Initial Monies: Total Counted	Avg. Current Monies: Total Counted	Avg. Difference in Current Monies vs Initial Monies
F	114	48	303	36	\$15,773	\$19,699	\$3,926
M	54	10	95	38	\$18,860	\$27,492	\$8,632
Grand Total	168	58	398	37	\$16,765	\$22,204	\$5,439

Family Type

I-Care, Inc. CSBG Demographic Report

2021-23, no duplicates

	Count of CSBG Self-Sufficiency Report	# Children age < 6	# in Family	Avg. Age	Avg. Initial Monies: Total Counted	Avg. Current Monies: Total Counted	Avg. Difference in Current Monies vs Initial Monies
Single Parent	84	42	248	34	\$17,597	\$20,959	\$3,362
Single Person	62	3	67	38	\$10,112	\$20,180	\$10,068
Two Parent	13	13	62	36	\$33,472	\$32,644	(\$829)
Two Adults - No Children	7	0	14	50	\$28,842	\$31,808	\$2,965
Other	1	0	4	29	\$39,314	\$39,314	\$0
Grandparent(s)/Multigenerational Household	1	0	3	67	\$35,124	\$32,202	(\$2,922)
Grand Total	168	58	398	37	\$16,765	\$22,204	\$5,439

Marital Status

I-Care, Inc. CSBG Demographic Report

2021-23, no duplicates

	Count of CSBG Self-Sufficiency Report	# Children age < 6	# in Family	Avg. Age	Avg. Initial Monies: Total Counted	Avg. Current Monies: Total Counted	Avg. Difference in Current Monies vs Initial Monies
Single	127	42	273	35	\$13,556	\$20,487	\$6,930
Married	19	9	71	42	\$39,777	\$37,070	(\$2,707)
Unknown	8	2	17	35	\$15,175	\$11,659	(\$3,517)
Separated	7	3	20	36	\$11,544	\$28,130	\$16,585
Divorced	6	2	14	48	\$16,961	\$16,961	\$0
Widowed	1	0	3	67	\$35,124	\$32,202	(\$2,922)
Grand Total	168	58	398	37	\$16,765	\$22,204	\$5,439

I-CARE, Inc. - 2023 Community Assessment

MODULE 2: Who does this CA belong to, and which community(ies) do they serve?

Characteristics of CSBG Clients Served (July 2021 – February 2023)

Educational Attainment

I-Care, Inc. CSBG Demographic Report

2021-23, no duplicates

	Count of CSBG Self- Sufficiency Report	# Children age < 6	# in Family	Avg. Age	Avg. Initial Monies: Total Counted	Avg. Current Monies: Total Counted	Avg. Difference in Current Moneys vs Initial Moneys
High School Graduate	82	30	189	35	\$18,162	\$21,482	\$3,320
College/Tech School Attended (non-graduate)	29	13	88	36	\$19,861	\$22,940	\$3,078
GED	21	6	43	37	\$17,159	\$23,036	\$5,878
High School (9-12) Attended (non-graduate)	15	2	29	40	\$9,288	\$25,564	\$16,276
College/Tech School Graduate	14	4	36	42	\$15,246	\$20,530	\$5,285
0-8th Grade Attended	5	3	11	40	\$5,954	\$18,072	\$12,118
Post-Secondary School Graduate	2	0	2	33	\$4,205	\$29,264	\$25,059
Grand Total	168	58	398	37	\$16,765	\$22,204	\$5,439

Employment status

I-Care, Inc. CSBG Demographic Report

2021-23, no duplicates

	Count of CSBG Self- Sufficiency Report	# Children age < 6	# in Family	Avg. Age	Avg. Initial Monies: Total Counted	Avg. Current Monies: Total Counted	Avg. Difference in Current Moneys vs Initial Moneys
Unemployed (Long-Term more than 6 months)	54	16	111	37	\$7,112	\$19,327	\$12,215
Unemployed (Short-Term 6 months or less)	38	14	93	35	\$17,740	\$20,249	\$2,509
Employed Part-Time	30	15	72	36	\$21,382	\$25,560	\$4,178
Employed Full-Time	27	10	76	37	\$33,628	\$29,378	(\$4,251)
Null	13	2	33	41	\$8,458	\$14,210	\$5,752
Unemployed (Not in Labor Force)	5	1	10	40	\$12,771	\$28,048	\$15,276
Retired	1	0	3	67	\$35,124	\$32,202	(\$2,922)
Grand Total	168	58	398	37	\$16,765	\$22,204	\$5,439

MODULE 3: WHAT ARE THE CHARACTERISTICS OF THE COMMUNITY(IES) SERVED?

Population and Demographic Data

Population Growth and Change

Based on the 2010 Census, the total population of North Carolina was 9,535,483, up 18.5 percent from 8,049,310 in 2000. Census estimates from 2020 indicate that North Carolina's population grew by an additional 9.5 percent (compared with 7.4 percent for the United States) from 2010 to 2020, reaching more than 10 million residents. The population decreased in Alexander County by 2 percent; in Catawba and Iredell Counties the populations increased by 4.1 and 17.1 percent, respectively.

Population Change (2010-2020)

Source: U.S. Census

	Total Population (2010 Census)	Total Population (2020 Census)	Percent Population Change (2010-20)
United States	308,745,538	331,449,281	7.4%
North Carolina	9,535,483	10,439,388	9.5%
Alexander County	37,198	36,444	-2.0%
Catawba County	154,358	160,610	4.1%
Iredell County	159,437	186,693	17.1%

Table 3: Population Change (2010-20)

To measure the components of population change over the 10-year period, data from the July 1, 2010, and July 1, 2020, estimates are used. Currently, only these July estimates include details of the population change with regard to natural increase (births minus deaths) and net migration (both domestic and international migration).

The 10-year population change in the United States was predominantly due to a natural increase (58.9 percent). In North Carolina it was mainly due to net migration (69.4 percent) (Figure 2, Table 4). In the I-CARE service area the 10-year population change was also mainly due to net migration.

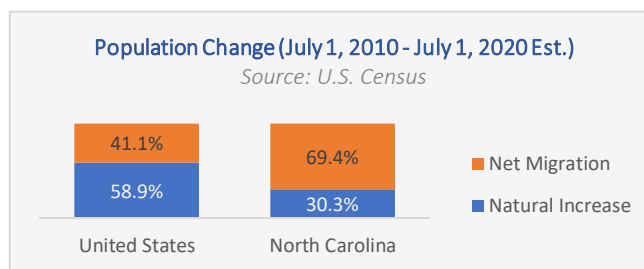


Figure 2: Population Change (2010-20)

Cumulative Estimates of the Components of Population Change (July 1, 2010 – July 1, 2020, Estimates)

Source: U.S. Census

	Population Change	Natural Increase	Total Births	Total Deaths	Net Migration	Domestic Migration	International Migration
United States	20,156,980	11,868,523	39,021,585	27,153,062	8,288,457	N/A	8,288,457
North Carolina	1,026,237	310,860	1,200,010	889,150	712,160	528,333	183,827
Iredell County	25,982	2,946	18,400	15,454	23,045	21,099	1,946
Catawba County	5,549	713	17,287	16,574	4,939	3,178	1,761
Alexander County	209	-306	3,546	3,852	536	493	43

Table 4: Cumulative Estimates of the Components of Population Change (2010-20)

Natural increase of a population is calculated by subtracting the number of deaths from the number of births in a specific time period.

Net migration is calculated by adding net domestic migration (in- and out-migration within the United States) and net international migration (in- and out-migration from a country outside of the United States, including Puerto Rico).

Inbound and Outbound Migration Flows

The following figures show the inbound and outbound flows for the I-CARE EHS/HS service area. The following data source allows for deeper analysis or exploration of the migration patterns: <https://flowsmapper.geo.census.gov>.

Alexander County

Based on 2016-20 data, net inbound migration to Alexander County was primarily from the following counties: Catawba County, North Carolina (796), Iredell County, North Carolina (239), and Snohomish County, Washington (113). Net outbound migration was predominantly to the following counties in North Carolina: Catawba County (548), Caldwell County (159), and Watauga County (142).

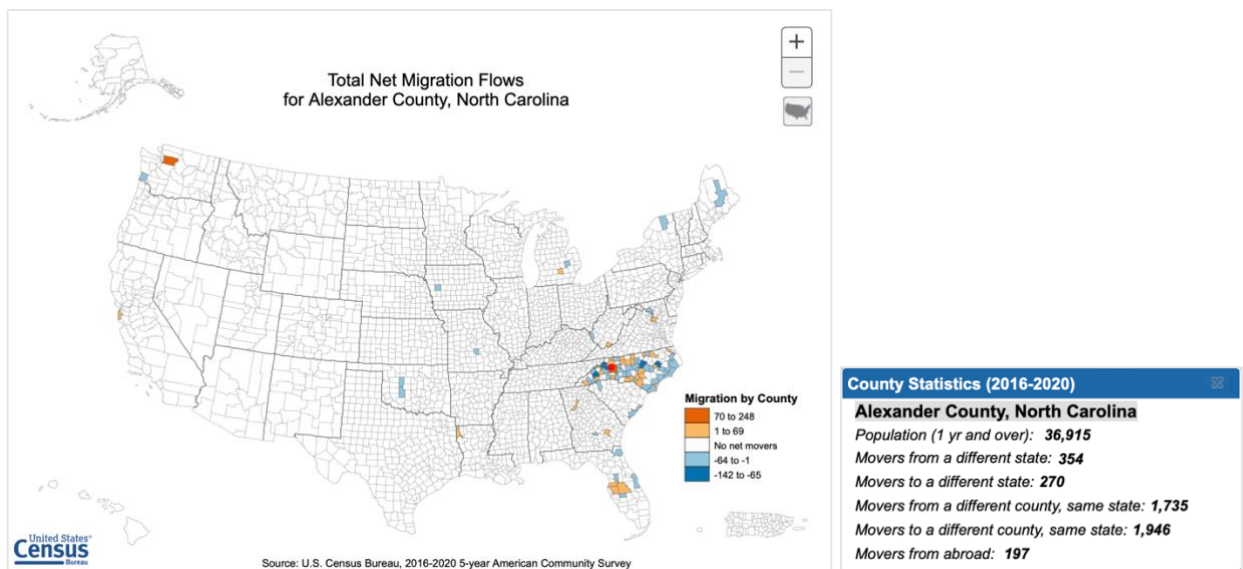


Figure 3: Net Migration Flows: Alexander County (2020 ACS 5-Year Estimates)

“**Migration and Geographic Mobility** both refer to the movement of people from one location to another. Migration typically refers to moves that cross a boundary, such as a county or state line (including Puerto Rico) and is either domestic migration (movement within the U.S.) or international migration (movement between the U.S. and other countries). Mobility includes both short and long-distance moves.”

U.S. Census Bureau, <https://www.census.gov>

Catawba County

Based on 2016-20 data, net inbound migration to Catawba County was primarily from the following counties in North Carolina: Burke County (1,040), Mecklenburg County (786), and Iredell County (616). Net outbound migration was predominantly to the following counties in North Carolina: Caldwell County (1,093), Alexander County (796), and Lincoln County (525).

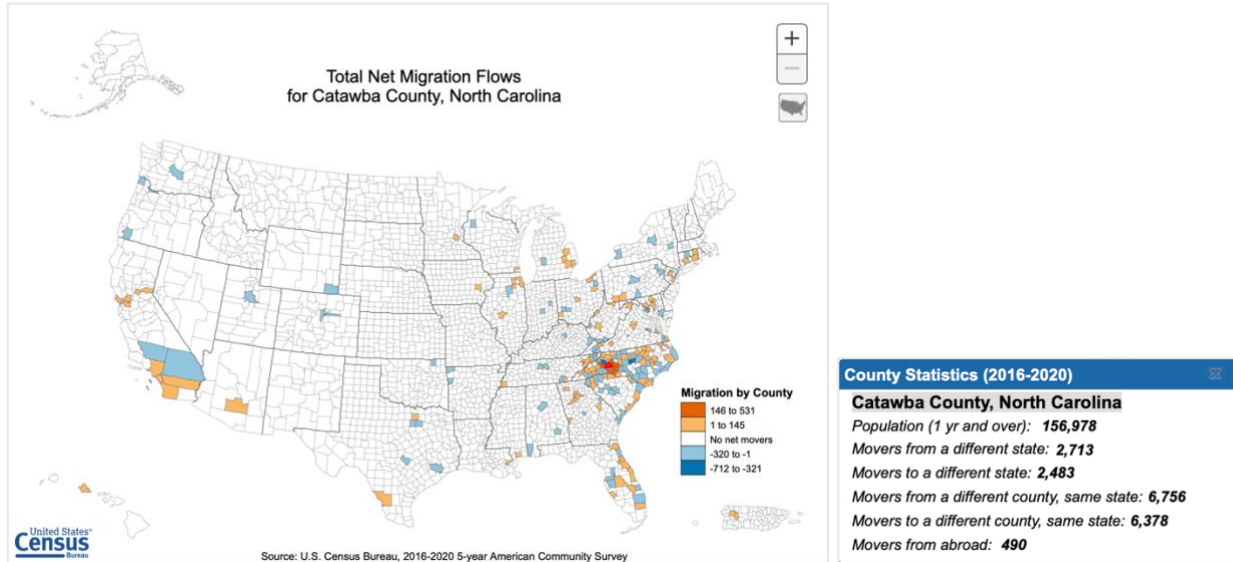


Figure 4: Net Migration Flows: Catawba County (2020 ACS 5-Year Estimates)

Iredell County

Based on 2016-20 data, net inbound migration to Iredell County was primarily from the following counties in North Carolina: Mecklenburg County (1,829), Cabarrus County (622), and Rowan County (366). Net outbound migration was predominantly to the following counties in North Carolina: Mecklenburg County (1,264), Catawba County (616), and Richland County (264).

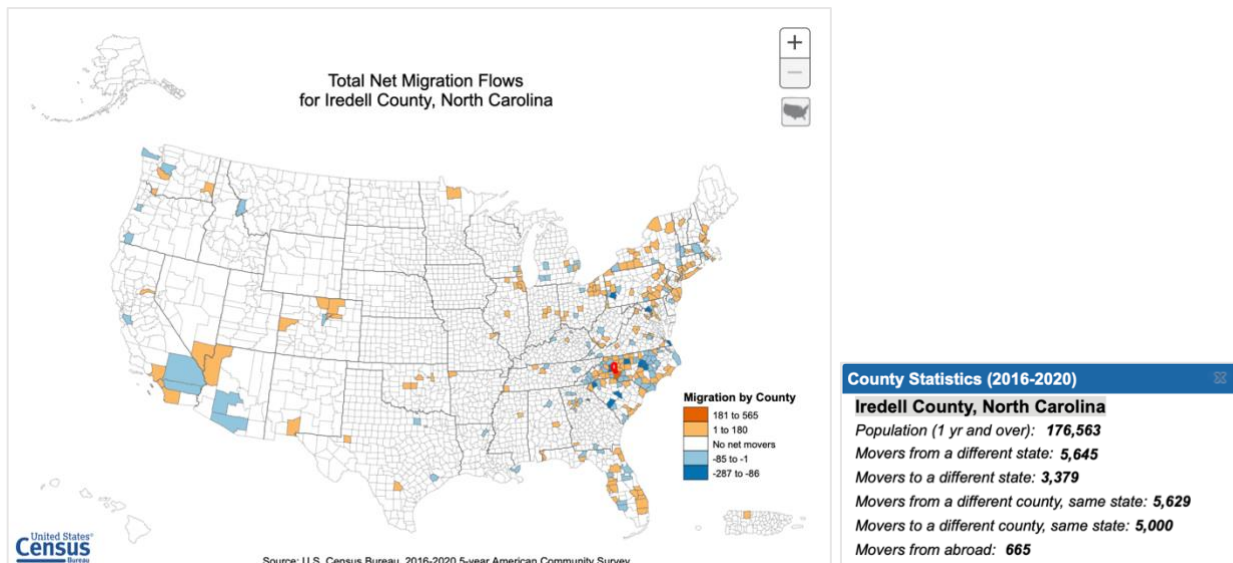


Figure 5: Net Migration Flows: Iredell County (2020 ACS 5-Year Estimates)

Population Change by Race/Ethnicity

Census data on race and ethnicity have been included as far back as the first census of 1790. “How these topics are measured, and statistics on them are collected and coded, has changed nearly every decade throughout the history of the census, reflecting social, political and economic factors.”^{iv} Similar to the 2010 census, for the 2020 Census, participants were asked to self-identify their race and ethnicity, using two separate questions. Improvements to the way the questions were asked, as well as updates to data processing and coding has “enabled a more thorough and accurate depiction of how people self-identify, yielding a more accurate portrait of how people report their Hispanic origin and race within the context of a two-question format.”^v

Although the overall population increased by 7.4 percent in the United States from 2010 to 2020, there are significant differences in the percentage increases for different races and ethnicities. For example, in the United States from 2010 to 2020, the White-only population (not combined with any other race) decreased by 8.6 percent, and the Black-only population increased by 5.6 percent. The Asian-only and multiracial (two or more) populations increased by 35.5 and 275.7 percent, respectively (Figure 6).

As previously stated, in North Carolina, Catawba, and Iredell Counties, the overall population grew by 9.5, 4.1, and 17.1 percent, respectively, and decreased by 2 percent in Alexander County. The White population in North Carolina, Alexander, and Catawba Counties decreased by 0.6, 6.1, and 5.7 percent, respectively; in Iredell County the White population increased by 8.3 percent. The Black population increased by 4.5 and 13.8 percent in North Carolina and Iredell County, respectively; in Alexander and Catawba Counties, the Black population decreased by 5.4 and 1.6 percent, correspondingly. The multiracial population increased in North Carolina, Alexander, Catawba, and Iredell Counties by 245.2, 220.8, 289.3, and 331.9 percent, respectively.

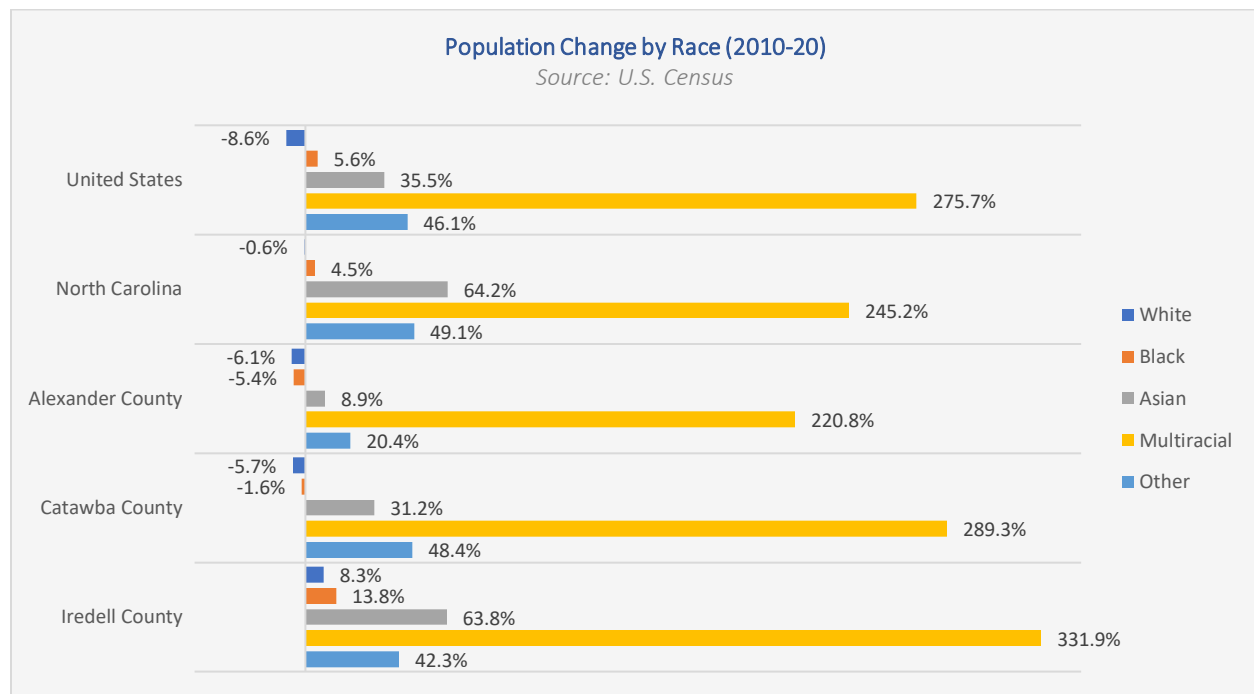


Figure 6: Population Change by Race (2010-20)

In the United States, the Hispanic/Latino population increased by 23 percent over the 10-year period, and the non-Hispanic/Latino population grew by 4.3 percent (Figure 7). In North Carolina, Alexander, Catawba, and Iredell Counties, the Hispanic/Latino population grew by 39.8, 14.7, 33.3, and 45.5 percent, respectively; the non-Hispanic/Latino population grew in North Carolina, Catawba, and Iredell Counties by 6.7, 1.3, and 15 percent, respectively; in Alexander County the non-Hispanic/Latino population decreased by 2.8 percent

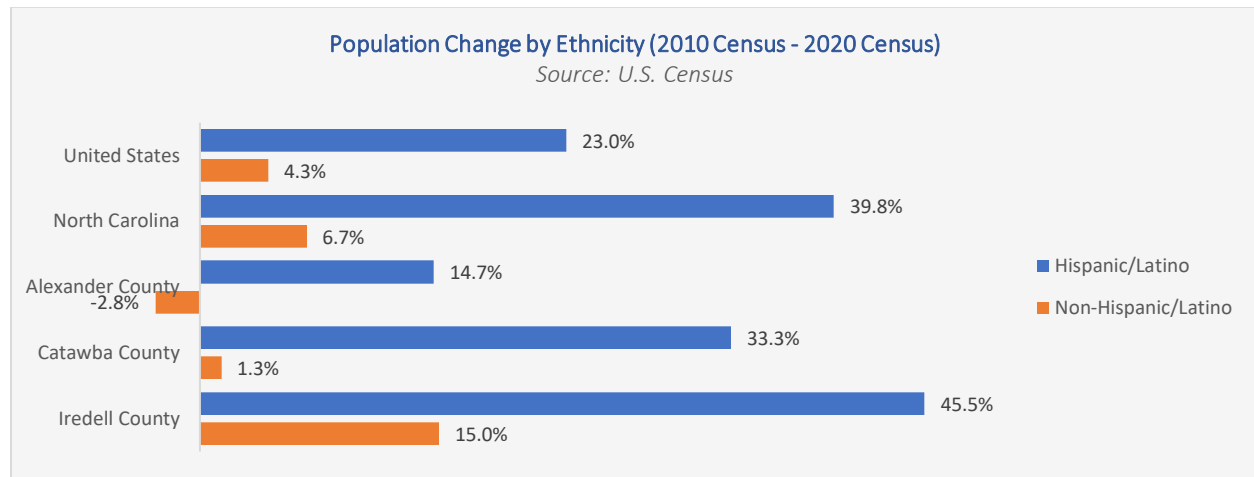


Figure 7: Population Change by Ethnicity (2010-20)

The U.S. Census Bureau considers race and ethnicity to be two separate and distinct concepts.

What is race? "The Census Bureau defines race as a person's self-identification with one or more social groups. An individual can report as White, Black or African American, Asian, American Indian and Alaska Native, Native Hawaiian and Other Pacific Islander, or some other race. Survey respondents may report multiple races."

What is ethnicity? "Ethnicity determines whether a person is of Hispanic origin or not. For this reason, ethnicity is broken out in two categories, Hispanic or Latino and Not Hispanic or Latino. Hispanics may report as any race."

U.S. Census Bureau, <https://www.census.gov>

Race and Ethnicity Definitions

White refers to a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American refers to a person having origins in any of the Black racial groups of Africa.

American Indian or Alaska Native refers to a person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

Asian refers to a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Native Hawaiian or Other Pacific Islander refers to a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Some Other Race includes all other responses not included in the White, Black, or African American, American Indian, or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander race categories described above. Respondents reporting entries such as multiracial, mixed, interracial, or a Hispanic or Latino group (for example, Mexican, Puerto Rican, Cuban, or Spanish) in response to the race question are included in this category.

Multiracial includes people identifying themselves with two or more races.

Hispanic or Latino refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race."

U.S. Census Bureau, <https://www.census.gov/>

Racial and Ethnic Characteristics

Note: The U.S. Census Bureau collects data on race and ethnicity for various products and reports. At a minimum, the Office of Management and Budget (OMB) requires five categories: White, Black/African American, American Indian or Alaskan Native (AIAN), Asian, and Native Hawaiian or Other Pacific Islander (NHPI).

Every 10 years, the Census Bureau conducts a decennial census count, which is a comprehensive count of the population. The decennial census uses seven race categories in its count, the five aforementioned categories required by the OMB as well as “Multiracial” and “Some Other Race.”

In addition to its decennial count, the Census Bureau produces an annual July 1st estimate of the population, and unlike the decennial census, this estimate only includes six race categories, excluding the “Some Other Race” category included every 10 years.

This community assessment currently uses the 2020 decennial census data to identify the race and ethnicity of the population studied, as well as the growth/change in race or ethnicity from 2010 to 2020. Please be careful not to compare race data included in this assessment to July 1st estimates. The different number of race categories greatly impacts the values. For example, according to the 2020 census, 61.6 percent of the population in the United States is White only, compared to the July 1st, 2021, estimates of 75.8 percent. The most significant difference between these two collection methods is the proportion of the population that self identifies as White, Multiracial, and Some Other Race.

United States: Calculating Race and Ethnicity

Source: U.S. Census

	July 1, 2021, Estimates	2020 Census
White	75.8%	61.6%
Black	13.6%	12.4%
Asian	6.1%	6.0%
AIAN	1.3%	1.1%
NHPI	0.3%	0.2%
Multiracial	2.9%	10.2%
Some Other Race	Not Reported	8.4%
Hispanic/Latino	18.9%	18.7%

Race

In the United States, approximately 61.6 percent of the population identifies themselves as White only, 12.4 percent as Black only, 6 percent as Asian only, 10.2 percent as multiracial, and 8.4 percent identify as another race (Figure 8 and Table 5). In North Carolina, Alexander, Catawba, and Iredell Counties, 62.2, 85.8, 74.1, and 74.7 percent of the population, respectively, identifies themselves as White. One in five North Carolinians are Black, 20.5 percent. The proportion of the population in the I-CARE service area that is Black is much lower, between 5.3 and 11.6 percent. In the I-CARE service area, between 4.6 and 7 percent of the population is multiracial, and between 2.8 and 5.9 identifies as “other.”

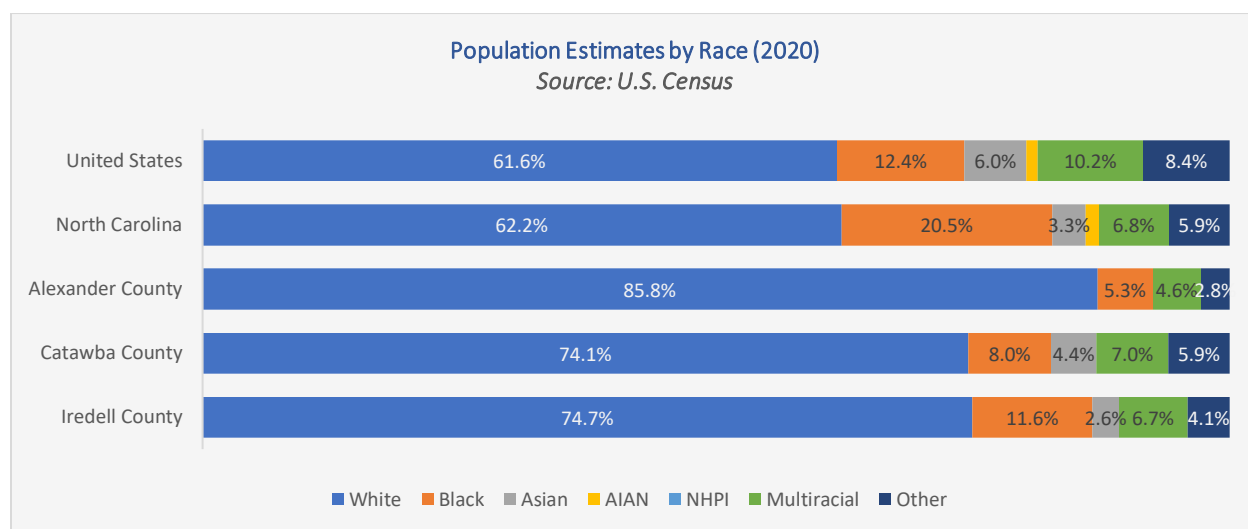


Figure 8: Population Estimates by Race (2020)

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Population Estimates by Race (2020)

Source: U.S. Census

	White	Black	Asian	AIAN	NHPI	Multiracial	Other
United States	61.6%	12.4%	6.0%	1.1%	0.2%	10.2%	8.4%
North Carolina	62.2%	20.5%	3.3%	1.2%	0.1%	6.8%	5.9%
Alexander County	85.8%	5.3%	1.1%	0.4%	0.0%	4.6%	2.8%
Catawba County	74.1%	8.0%	4.4%	0.6%	0.1%	7.0%	5.9%
Iredell County	74.7%	11.6%	2.6%	0.4%	0.0%	6.7%	4.1%

Table 5: Population Estimates by Race (2020)

Ethnicity

In the United States and North Carolina, 18.7 and 10.7 percent of the population is Hispanic/Latino, respectively. The Hispanic/Latino population in Catawba County is similar to that of the state, 10.8 percent, while the Hispanic/Latino population in Alexander and Iredell Counties is lower, at 5 and 8.5 percent, respectively (Figure 9).

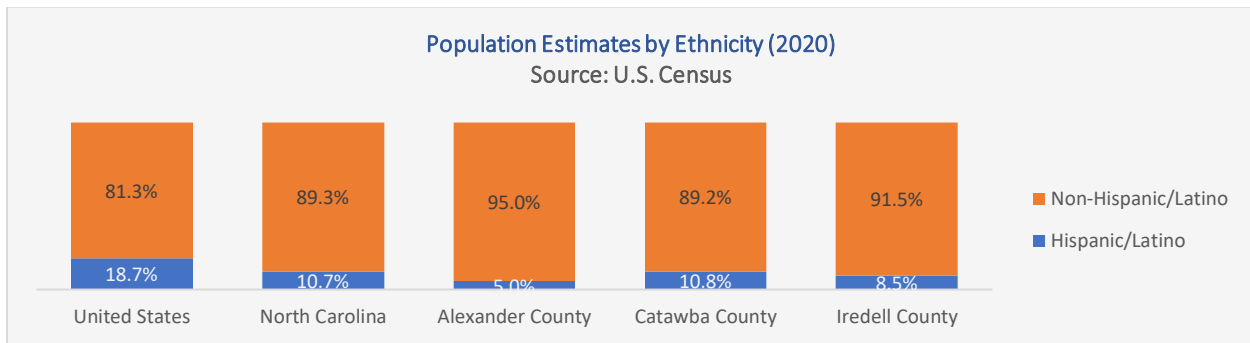


Figure 9: Population Estimates by Ethnicity (2020)

Immigrants and Refugees

By the end of 2022 (FY), the United States had admitted 25,465 refugees for resettlement (under a ceiling of 125,000).^{vi} The rate of refugee acceptance grew in 2022 compared with the United States admitting 11,411 refugees (under a ceiling of 62,500) in 2021 and admitting 11,814 refugees (under a ceiling of 18,000) in 2020.^{vii} Of note, according to the [Migration Policy Institute](#), “the original ceiling set for FY 2021 was 15,000, the lowest level on record, but was increased to 62,500 on May 3, 2021,” showing the impact changing Presidential administrations and policies have on immigration as refugee ceilings are established by “the President in consultation with Congress.”^{viii}

U.S. Annual Refugee Resettlement Ceilings and Number of Refugees Admitted

Source: Migration Policy Institute

Year	Refugees Admitted	Ceiling
FY 2022	25,465	125,000
FY 2021	11,411	62,500
FY 2020	11,814	18,000

Table 6: U.S. Annual Refugees Admitted (2020-22)

There are still uncertain changes to reform the United States immigration system based on different party leaders’ ideologies and political priorities. The tone of the Biden administration’s stances toward immigration reform is clear in this 2021 [White House Fact Sheet](#); however, how this plays out is ever-changing, with new reforms posed and legislative and court involvement.^{ix}

In January 2023, the Biden administration announced that it would be implementing “new border enforcement actions” to “impose new consequences for individuals who attempt to enter [the United States] unlawfully.”^x Of note, those who try to illegally cross into the United States without legal claim to remain but who are not subject to Title 42 “will be increasingly subject to expedited removal to their country of origin and subject to a five-year ban on reentry.”^{xi} New, legal pathways for migration are to be introduced. During Fiscal Year 2023-2024, the Biden Administration hopes to more than triple refugee admissions from refugees in the Western Hemisphere by allowing “20,000 refugees from Latin American and Caribbean countries.”^{xii}

A Venezuelan parole system will be expanded to include hopeful asylees from Nicaragua, Haiti, and Cuba, who must now “have an eligible sponsor and pass vetting and background checks, [and then] can come to the United States for a period of two years and receive work authorization.”^{xiii} From these countries, the threshold for acceptance has been placed at 30,000 people per month, with a matching 30,000 people per month from these four countries being accepted back by Mexico for those unlawfully trying to enter through the Mexico-United States border.

Other changes include more resources at the border, an online appointment system at United States points of entry, and an increased “humanitarian assistance in Mexico and Central America” of \$23 million for the vulnerable in transit between countries.^{xiv}

Currently, the Biden administration expects as many as 13,000 people to try to cross into the United States from the southern border every day once Title 42 ends.^{xv} To curb these numbers, on February 21st, 2023, a new rule was proposed where asylum seekers will be denied if they have not already sought and been denied asylum in countries they have passed through before reaching the United States’ southern border.^{xvi} “The measure, while stopping short of a total ban, imposes severe limitations on asylum for any

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nationality except Mexicans, who don't have to travel through a third country to reach the U.S.”^{xvii} Hopeful migrants must also “schedule an appointment at a U.S. border port of entry or use humanitarian programs available to certain nationalities” to be considered for asylum.^{xviii}

Immigrants make up a vital part of North Carolina's economy, with 8.02 percent of the population (833,000 people) being foreign-born as of 2020, though this is lower than the national average of 13.5 percent (44.2 million people).^{xix} In Alexander, Catawba, and Iredell Counties, the percentages are much lower. The table below shows the percentages and numbers of foreign-born residents in these counties, as well as the increase or decrease of foreign-born residents from 2019 to 2020. Of note, the foreign-born population slightly increased in Alexander and Iredell Counties from 2019 to 2020 but decreased in Catawba County.^{xx} As of 2019, North Carolina had 10,216 foreign-born residents under the age of 6, making up 1.5 percent of the population.^{xxi}

Residents Born Abroad Per County (2019-20)

Source: DataUSA

Location	# of Residents (2020)	# of Residents Born Abroad (2020)	Percentage of Residents Born Abroad (2020)	Percentage of Residents Born Abroad (2019)	Percentage Increase/Decrease
United States	327,000,000	44,200,000	13.5%	13.6%	-0.1%
North Carolina	10,400,000	833,000	8.02%	8.02%	No Change
Alexander County	37,271	1,250	3.36%	3.29%	+0.07
Catawba County	158,507	10,500	6.6%	6.81%	-0.21%
Iredell County	178,853	11,6000	6.49%	6.47%	+0.02%

Table 7: Residents Born Abroad Per County (2019-20)

Refugees also contribute to North Carolina's economy. From October 1, 2022, to February 28, 2023, 589 refugees arrived in North Carolina, with the highest numbers coming from the Democratic Republic of the Congo (156 people), Syria (76), Burma (72), El Salvador (54), Colombia (48), and Guatemala (43).^{xxii}

Language

In the United States, approximately one in four people between the ages of 5 and 17, and one in five, ages 18-plus, living in poverty, speak Spanish as their primary language (24.5 and 17.4 percent, respectively). In North Carolina, Catawba, and Iredell Counties, 21.9, 27.8, and 20.9 percent of the population in poverty between 5 and 17 years speaks Spanish, respectively, and 10.6, 14.5, and 10.2 percent of those ages 18 and older, respectively, speaks Spanish (Tables 8 & 9). Based on census estimates, in Alexander County none of the population in poverty, ages 5 to 17, speaks Spanish, and of those over the age of 18 living in poverty, 4.1 percent speak Spanish as their primary language.

Languages Spoken by Population Ages 5-17 in Poverty

Source: 2021 ACS 5-Year Estimates

	Only English	Spanish	Other Indo-European Languages	Asian & Pacific Languages	Other Languages
United States	68.6%	24.5%	1.9%	2.8%	2.2%
North Carolina	74.8%	21.9%	1.2%	0.9%	1.1%
Alexander County	97.9%	0.0%	2.1%	0.0%	0.0%
Catawba County	70.3%	27.8%	1.2%	0.7%	0.0%
Iredell County	77.2%	20.9%	0.8%	1.1%	0.0%

Table 8: Languages Spoken by Population Ages 5-17 in Poverty (2021 ACS 5-Year Estimates)

Languages Spoken by Population Ages 18+ in Poverty

Source: 2021 ACS 5-Year Estimates

	Only English	Spanish	Other Indo-European Languages	Asian & Pacific Languages	Other Languages
United States	73.2%	17.4%	3.7%	3.7%	1.9%
North Carolina	85.4%	10.6%	1.5%	1.4%	1.0%
Alexander County	94.1%	4.1%	1.7%	0.0%	0.0%
Catawba County	81.6%	14.5%	2.9%	1.1%	0.0%
Iredell County	85.8%	10.2%	0.3%	3.4%	0.3%

Table 9: Languages Spoken by Population Ages 18+ in Poverty (2021 ACS 5-Year Estimates)

Linguistic Isolation

"Increased linguistic diversity contributes to the United States' global competitiveness and our ability to integrate culturally and economically. Speaking a parent's native language other than English at home can have a positive effect on children's English literacy development, and bilingual language skills can positively affect children's educational achievement. The Census Bureau's report, however, highlights a sobering statistic: millions of residents of the United States are not proficient in the English language. A linguistically isolated household is one where no one in the home above the age of 14 speaks English only or speaks a second language and speaks English well."

National Center for Children in Poverty, <https://www.nccp.org/>

Based on U.S. census data, in the United States and North Carolina, 4.2 and 2.2 percent of all households (both natives and foreign-born), respectively, were linguistically isolated, meaning that all persons in the household, age 14 and over, had limited English proficiency (LEP). In the I-CARE service area, Catawba and Iredell Counties reported that 2.2 and 1.7 percent of all households were linguistically isolated, compared with only 0.3 percent in Alexander County.

Linguistic isolation is highest for Spanish-speaking households. In North Carolina, Catawba, and Iredell Counties, 21, 18.3, and 18 percent of Spanish-speaking households, respectively, were linguistically isolated (Table 10). In Alexander County only 3.8 percent of Spanish-speaking households were linguistically isolated.

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Limited English-Speaking Households

Source: 2021 ACS 5-Year Estimates

	All Households	Spanish	Asian and Pacific Languages	Other Indo-European Languages	Other Languages
United States	4.2%	20.0%	23.1%	14.5%	15.2%
North Carolina	2.2%	21.0%	18.5%	10.3%	13.8%
Alexander County	0.3%	3.8%	0.0%	5.7%	0.0%
Catawba County	2.2%	18.3%	22.7%	8.5%	5.6%
Iredell County	1.7%	18.0%	13.7%	12.4%	4.3%

Table 10: Linguistic Isolation (2021 ACS 5-Year Estimates)

Religion

[PRRI \(Public Religion Research Institute\)](#) “is a nonprofit, nonpartisan organization dedicated to conducting independent research at the intersection of religion, culture, and public policy.”

According to the report [The American Religious Landscape in 2020](#), “seven in 10 Americans (70 percent) identify as Christian, including more than four in 10 who identify as white Christian and more than one-quarter who identify as Christian of color. Nearly one in four Americans (23 percent) are religiously unaffiliated, and 5 percent identify with non-Christian religions” (Figure 10).^{xxiii}

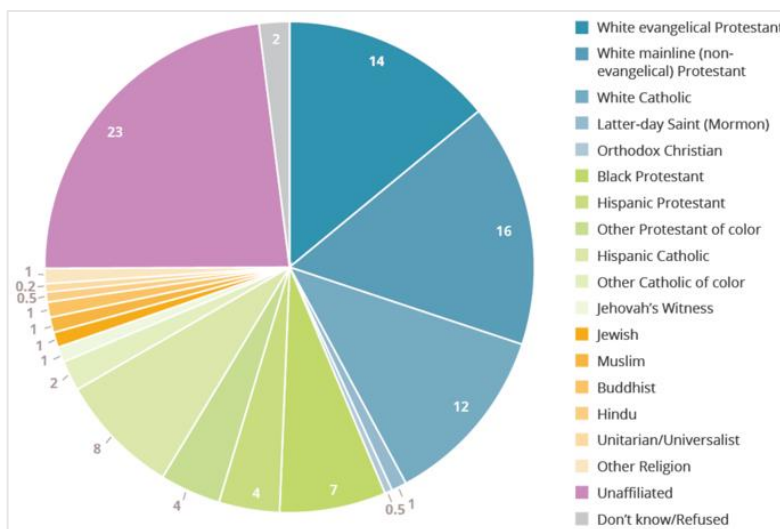


Figure 10: The American Religious Landscape (2020)

“The term ‘White’ signifies respondents who identify as White or Caucasian and do not identify as Hispanic or Latino. ‘Christian of color’ includes Christians who identify as Black, Hispanic, Asian, or Pacific Islander American, Native American, multiracial, or any other non-White race or ethnicity. ‘Religiously unaffiliated’ includes those who claim no religion in particular, atheists, agnostics, and spiritual but not religious Americans. ‘Non-Christian religious’ includes Jews, Muslims, Hindus, Buddhists, Unitarian Universalists, and adherents of any other world religion.”

Public Religion Research Institute, <https://www.prri.org>

The [American Values Atlas \(AVA\)](#) created by the PRRI is an interactive map that allows users to retrieve religious traditions by state. According to AVA, 22 percent of the respondents in North Carolina are White evangelical Protestant and unaffiliated, followed by 16 percent who identify as Black Protestant (Table 11).

Religious Traditions of North Carolina (2021)

Source: Public Religion Research Institute (PRRI)

Religious Tradition	Percent	Religious Tradition	Percent	Religious Tradition	Percent
White Evangelical Protestant	22%	Hispanic Protestant	2%	Unitarian / Universalist	1%
Unaffiliated	22%	Other Religion	2%	Orthodox Christian	N/A
Black Protestant	16%	Other Non-White Catholic	1%	Muslim	N/A
White Mainline Protestant	15%	Jehovah's Witness	1%	Buddhist	N/A
White Catholic	7%	Mormon	1%	New Age Religions	N/A
Other Non-White Protestant	5%	Jewish	1%		
Hispanic Catholic	3%	Hindu	1%		

Table 11: Religious Traditions of North Carolina (2021)

The PRRI has combined data from the American Community Survey of more than 3,000 counties with data from nearly 460,000 interviews on religiosity, resulting in county-level maps of major religious groups.

For more information on various religious identities by county, please refer to: [Concentrations of Major Religious Groups in the U.S.](#)

Sex and Age

Census data indicate that approximately 49.5 percent of the United States population is male, and 50.5 percent is female; this is not significantly different for the state of North Carolina, Catawba, and Iredell Counties (Table 12); in Alexander County 50.9 percent of the population is male.

The youngest residents, those below age 5, make up 5.9 and 5.7 percent of the population in the United States and North Carolina. In Alexander, Catawba, and Iredell Counties, 4.4, 5.5, 5.4 percent of the population, respectively, is under the age of 5. The median age in the I-CARE service area counties is higher than the state median age, approximately 41 to 44 compared with 39.

Population by Sex and Age				
Source: 2021 ACS 5-Year Estimates				
	Male	Female	Under 5	Median Age
United States	49.5%	50.5%	5.9%	38.4
North Carolina	48.9%	51.1%	5.7%	39.0
Alexander County	50.9%	49.1%	4.4%	43.7
Catawba County	49.2%	50.8%	5.5%	41.7
Iredell County	49.6%	50.4%	5.4%	40.6

Table 12: Population by Sex and Age (2021 ACS 5-Year Estimates)

Households

In the United States more than 33 million households have children under the age of 18, 27.2 percent of total households (Table 13). In North Carolina there are more than 1 million households with children under the age of 18, of which more than 41,000 are in the I-CARE service area. Iredell County reports the highest proportion of households with children under age 18, 30.5 percent.

Households with Children <18			
Source: 2021 ACS 5-Year Estimates			
	Total Households	Households with Children <18 Years	Percentage of Households with Children <18 Years
United States	124,010,992	33,731,449	27.2%
North Carolina	4,034,684	1,075,847	26.7%
Alexander County	13,496	3,597	26.7%
Catawba County	63,386	16,452	26.0%
Iredell County	70,654	21,564	30.5%

Table 13: Total Households (2021 ACS 5-Year Estimates)

"A **family** is a group of two people or more (one of whom is the householder) related by birth, marriage, or adoption and residing together; all such people (including related subfamily members) are considered as members of one family. The number of families is equal to the number of family households. However, the count of family members differs from the count of family household members because family household members include any non-relatives living in the household.

"A **family household** is a household maintained by a householder who is in a family (as defined above) and includes any unrelated people (unrelated subfamily members and/or secondary individuals) who may be residing there. The number of family households is equal to the number of families. The count of family household members differs from the count of family members, however, in that the family household members include all people living in the household, whereas family members include only the householder and his/her relatives. See the definition of family.

"A **nonfamily household** consists of a householder living alone (a one-person household) or where the householder shares the home exclusively with people to whom he/she is not related."

U.S. Census Bureau, <https://www.census.gov/>

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Of the households in North Carolina, Alexander, Catawba, and Iredell Counties, 17.8, 19.4, 16.7, and 21.5 percent, correspondingly, are married-couple families with children under the age of 18. Cohabiting couples make up approximately 2 to 3 percent of total households with children under 18.

The proportion of single female households with children under age 18 is higher than single male households with children under age 18 in all geographic locations, with the exception of Alexander County. In Alexander, Catawba, and Iredell Counties, 2.4, 4.9, and 5.3 percent of households with children under age 18 are led by single females, respectively, while 3, 1.5, and 1.2 percent are led by single males, correspondingly.

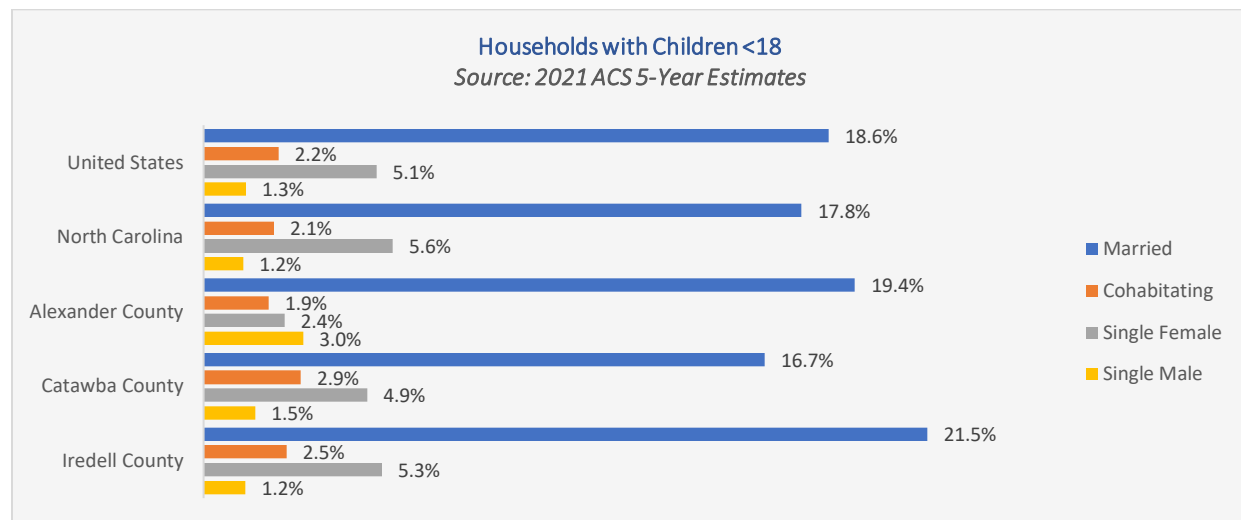


Figure 11: Households with Children < Age 18 (2021 ACS 5-Year Estimates)

Grandparents and Grandchildren

"An increasing number of children in the United States live in households headed by a grandparent. This trend is due to increasing numbers of single parent families, the high rate of divorce, teenage pregnancies, incarceration of parents, substance abuse by parents, illness, disability or death of parents, parental abuse, or neglect. In many of these homes, neither of the child's biological parents is present. In most cases, children taken care of by grandparents move in with them as infants or preschoolers and remain with them for five years or more. These grandparents are a diverse group ranging in age from their 30s to their 70s. Many grandparents are ready to simplify their lives and slow down. Giving that up and taking over the responsibilities of being a primary caregiver again can stir up many feelings including grief, anger, loss, resentment and possibly guilt. The transition can be very stressful and the emotional and financial burdens can be significant. Culture shock at having to deal with children and adolescents of a different generation can be great. Grandparent-headed households have a significantly higher poverty rate than other kinds of family units."

American Academy of Child and Adolescent Psychiatry, <https://www.aacap.org/>

In North Carolina more than 182,000 grandchildren under the age of 18 live with a grandparent householder (7.9 percent of children under age 18), of which more than 96,000 live with a grandparent that is responsible for them (Table 14). Statewide, of all grandchildren who live with a grandparent householder, 42.6 percent do not have a parent present in the home. In Alexander, Catawba, and Iredell Counties, a total of 7,467 children under age 18 live with a grandparent householder, 4.1, 10.6, and 8.1 percent of children under age 18, respectively. In Alexander, Catawba, and Iredell Counties, a corresponding 79, 49.3, and 36.6 percent grandchildren living with a grandparent householder do not have a parent present in the home.

Grandchildren <18 Living with a Grandparent Householder

Source: 2021 ACS 5-Year Estimates

	Grandchildren <18 Living with a Grandparent Householder	Percent of Children <18 Living with a Grandparent Householder	Grandparent Responsible	Parent not Present	Percent of Parents not Present
United States	5,950,690	8.0%	2,673,130	1,011,299	37.8%
North Carolina	182,273	7.9%	96,080	40,921	42.6%
Alexander County	303	4.1%	243	192	79.0%
Catawba County	3,737	10.6%	1,849	912	49.3%
Iredell County	3,427	8.1%	1,584	579	36.6%

Table 14: Grandparents Living with and Responsible for Own Grandchildren (2021 ACS 5-Year Estimates)

Of the more than 182,000 grandchildren under age 18 living with a grandparent householder in North Carolina, 39.2 percent are children under the age of 6. In Alexander, Catawba, and Iredell Counties, 27.1, 46.7, and 40 percent of grandchildren under age 18 living with a grandparent householder are under the age of 6, respectively.

Grandchildren Living with a Grandparent Householder

Source: 2021 ACS 5-Year Estimates

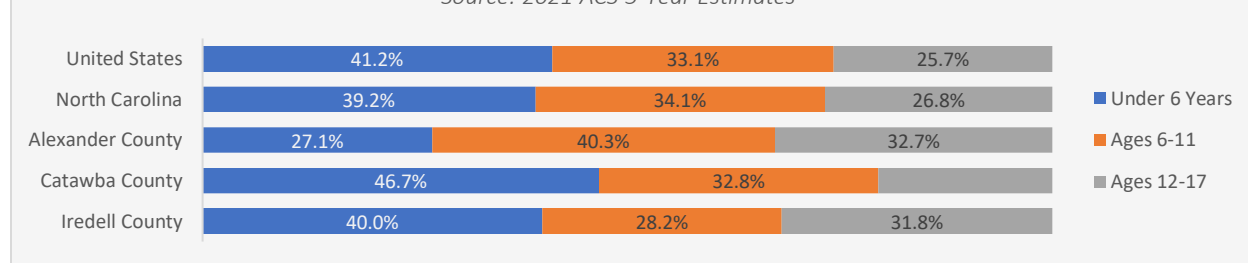


Figure 12: Grandchildren Living with Grandparent Householder (2021 ACS 5-Year Estimates)

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Veteran Population

Based on U.S. census data using 2021 ACS 5-Year Estimates, there are approximately 17.4 million veterans in the United States (6.9 percent of the total civilian population, age 18 and older). In North Carolina there are nearly 638,000 veterans, of which more than 20,000 are in Alexander, Catawba, and Iredell Counties, representing 6.2, 7.2, and 6.9 percent of the civilian population, correspondingly.

Veteran Population		
Source: 2021 ACS 5-Year Estimates		
	Number of Veterans	Percentage of Civilian Population Age 18 and Older
United States	17,431,290	6.9%
North Carolina	637,790	8.0%
Alexander County	1,792	6.2%
Catawba County	8,973	7.2%
Iredell County	9,733	6.9%

Table 15: Veteran Population (2021 ACS 5-Year Estimates)

Age Distribution of the Veteran Population

In the United States, North Carolina, and the I-CARE service area, veterans ages 65-74, make up the largest proportion of the veteran population, representing 37.7 percent in Alexander County and 28.3 percent in Catawba and Iredell Counties (Figure 13).

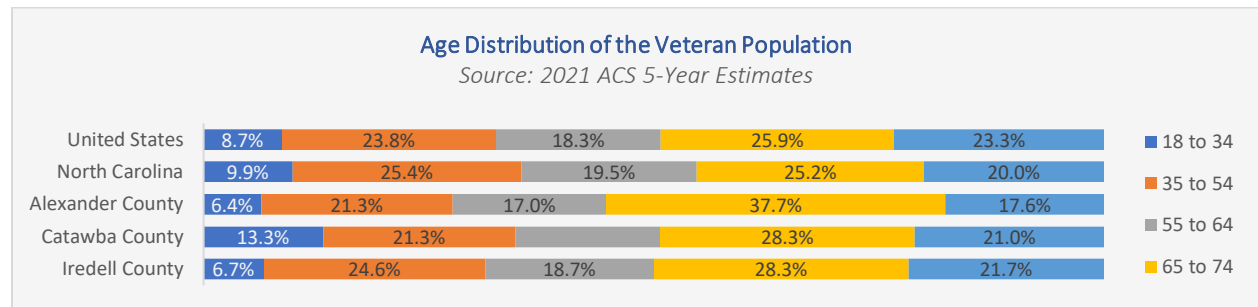


Figure 13: Age Distribution of Veterans (2021 ACS 5-Year Estimates)

Veteran Population in Poverty

In the United States and North Carolina, 6.8 and 7.2 percent of the veteran population, correspondingly, have an income below the federal poverty level. In Alexander, Catawba, and Iredell Counties, 4.5, 6.2, and 6.8 percent of the veteran population, respectively, have an income below the federal poverty level.

Veteran Population in Poverty			
Source: 2021 ACS 5-Year Estimates			
	Number of Veterans	Number of Veterans in Poverty	Percentage of Veterans in Poverty
United States	17,431,290	1,175,255	6.8%
North Carolina	637,790	45,147	7.2%
Alexander County	1,792	76	4.5%
Catawba County	8,973	552	6.2%
Iredell County	9,733	656	6.8%

Table 16: Veteran Population in Poverty (2021 ACS 5-Year Estimates)

Disability Status of Veterans in Poverty

In the United States, North Carolina, Catawba, and Iredell Counties, approximately one-third of the veteran population in poverty has a disability; in Alexander County 41.4 percent of the veteran population in poverty has a disability (Figure 14).

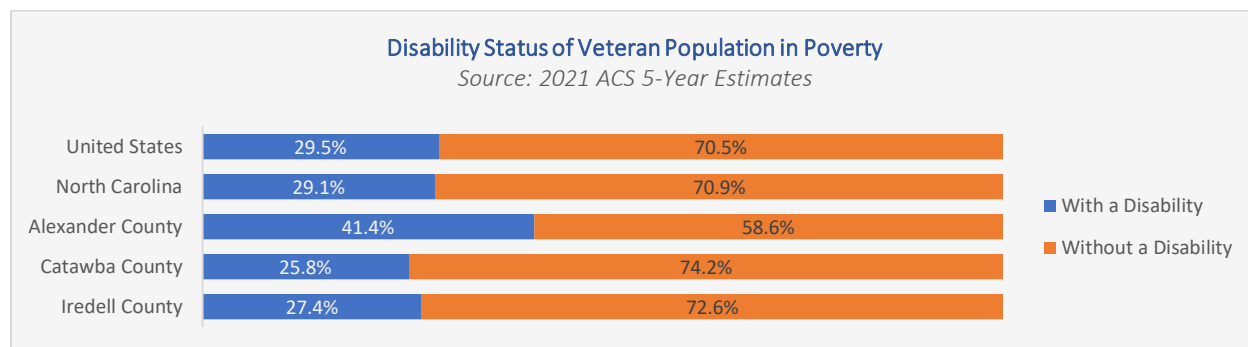


Figure 14: Disability Status of Veterans in Poverty (2021 ACS 5-Year Estimates)

Employment Status

Of the more than 17 million veterans in the United States, approximately 77 percent participate in the labor force, and 4.4 percent is unemployed (Figure 15). In North Carolina three quarters of all veterans participate in the labor force, 74.6 percent, and 3.9 percent are unemployed.

In labor force

- Currently working (civilian/armed forces)
- Unemployed: recently worked/seeking employment

Not in labor force

- Never worked/retired

U.S. Census, <https://www.census.gov/>

In Catawba and Iredell Counties, approximately four out of five veterans participate in the labor force (82.5 and 81.5 percent), compared to only 67.3 percent in Alexander County. The unemployment rates of veterans in Alexander, Catawba, and Iredell Counties are 8.2, 1.9, and 6.2 percent, respectively.

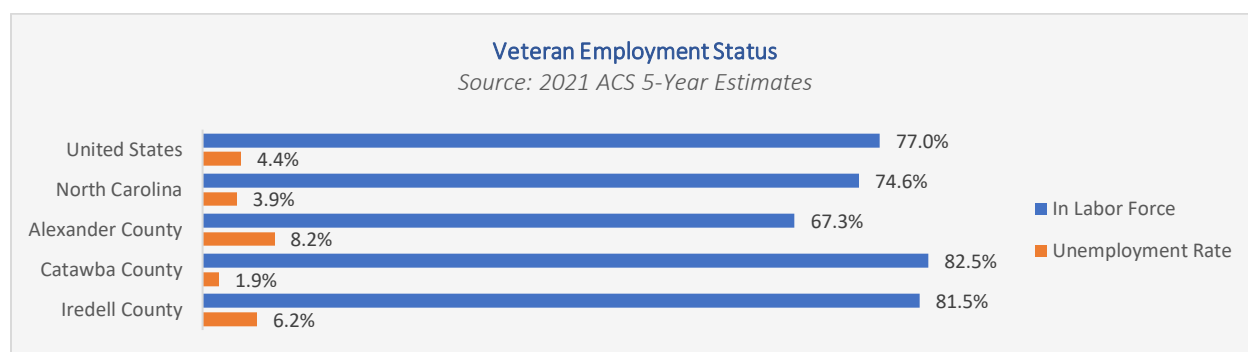


Figure 15: Veteran Employment Status (2021 ACS 5-Year Estimates)

Senior Population/Population above 65 Years

Based on U.S. census data, there are almost 53 million senior citizens (above the age of 65) in the United States, representing 16 percent of the total civilian population age 18 and older. In North Carolina there are more than 1.6 million senior citizens, of which almost 65,000 citizens are in Alexander, Catawba, and Iredell Counties. In North Carolina, Alexander, Catawba, and Iredell Counties, the senior population represents 16.3, 20.2, 17.7, and 15.8 percent of the civilian population age 18 and older, respectively.

Senior Population

Source: 2021 ACS 5-Year Estimates

	Number of Senior Citizens	Percentage of Civilian Population Age 18 and Older
United States	52,888,621	16.0%
North Carolina	1,686,235	16.3%
Alexander County	7,382	20.2%
Catawba County	28,367	17.7%
Iredell County	29,087	15.8%

Table 17: Senior Population (2021 ACS 5-Year Estimates)

Senior Population in Poverty

In the United States, North Carolina, Alexander, Catawba, and Iredell Counties, 9.6, 9.4, 11.4, 8.7, and 6.6 percent of the population above the age of 65, correspondingly, has an income below the federal poverty level.

Senior Population in Poverty

Source: 2021 ACS 5-Year Estimates

	Population Age 65+ for Whom Poverty Status is Determined	Below Poverty Level	Percentage Below Poverty Level
United States	51,705,664	4,938,116	9.6%
North Carolina	1,652,138	155,014	9.4%
Alexander County	7,224	825	11.4%
Catawba County	27,757	2,414	8.7%
Iredell County	28,749	1,900	6.6%

Table 18: Senior Population in Poverty (2021 ACS 5-Year Estimates)

Disability Status of Seniors

In the United States and North Carolina, approximately one-third of the senior citizen population has a disability, 33.4 and 33.8 percent, respectively. Within the I-CARE service area, the proportion of seniors with a disability is higher in Alexander County (37.2 percent) than Catawba and Iredell Counties (32.1 and 32.3 percent) (Figure 16).

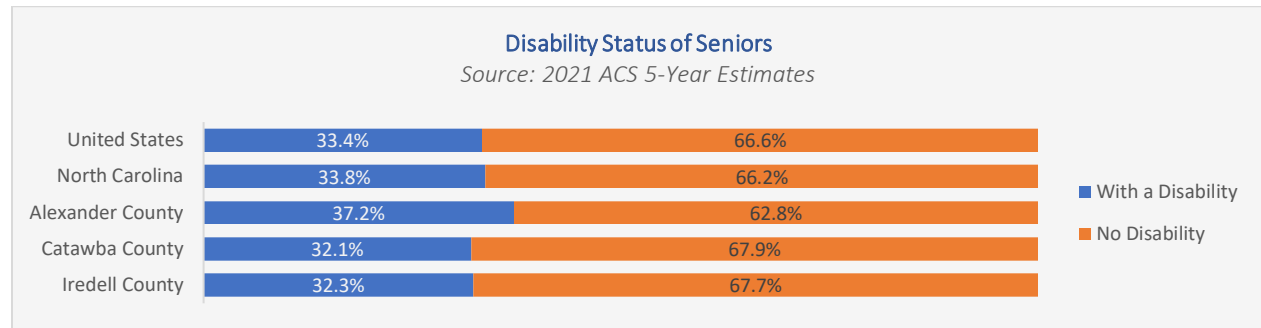


Figure 16: Disability Status of Senior Citizens (2021 ACS 5-Year Estimates)

Senior Employment Status

In the United States and North Carolina, 18.8 and 17.6 percent of the population above the age of 65, correspondingly, is in the labor force. In Alexander, Catawba, and Iredell Counties, 16, 16.8, and 19.3 percent of the population above the age of 65, respectively, is in the labor force. Unemployment rates of senior citizens in the labor force are highest in Catawba County, 1.5 percent. In North Carolina, Alexander, and Iredell Counties, senior unemployment rates are 0.6, 0.2, and 0.4 percent, respectively (Figure 17).

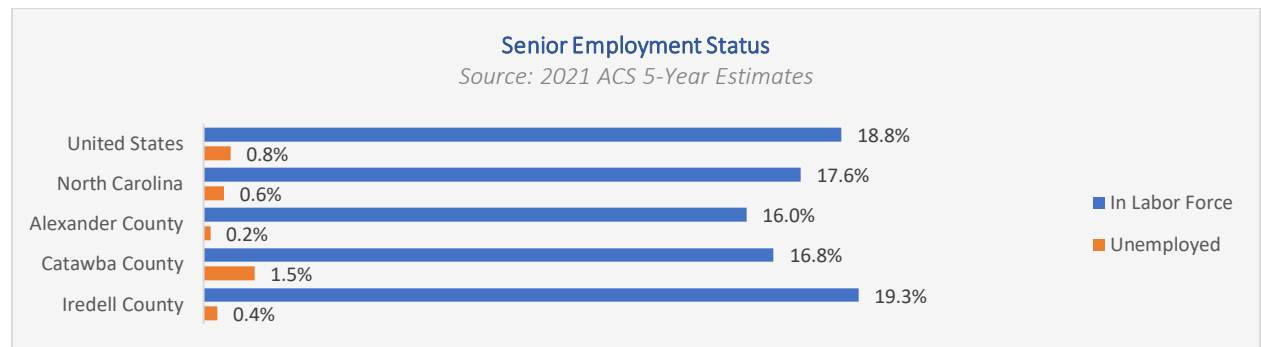


Figure 17: Senior Citizens Employment Status (2021 ACS 5-Year Estimates)

Socioeconomic Status

Education

Educational Attainment (Adults)

In the United States, North Carolina, Alexander, Catawba, and Iredell Counties, between 89 and 91 percent of the adult population over age 25, is at minimum, a high school graduate (Table 19). The percentages of the adult population with a bachelor's degree in the United States and North Carolina are 33.7 and 33 percent, respectively; in Alexander, Catawba, and Iredell Counties, the percentages are lower than the state rate, 14.9, 24, and 31.6 percent, respectively.

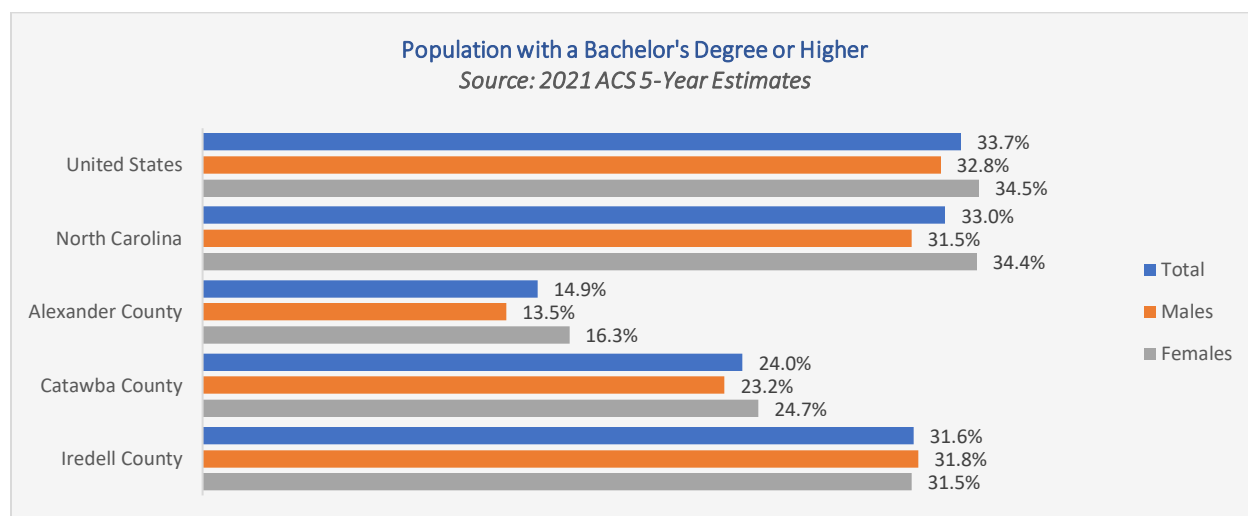
Educational Attainment of Adults Age 25+

Source: 2021 ACS 5-Year Estimates

	High School Degree+	Bachelor's Degree+
United States	88.9%	33.7%
North Carolina	89.0%	33.0%
Alexander County	85.0%	14.9%
Catawba County	86.5%	24.0%
Iredell County	91.1%	31.6%

Table 19: Educational Attainment (2021 ACS 5-Year Estimates)

In the United States, North Carolina, Alexander, and Catawba Counties, the proportion of women with a bachelor's degree is greater than their male counterparts (Figure 18). In Iredell County males marginally outpace females with a higher proportion of bachelor's degrees, 31.8 compared with 31.5 percent.

**Figure 18: Population with a BA Degree or Higher (2021 ACS 5-Year Estimates)****Educational Attainment by Race/Ethnicity**

In the United States 91.4 percent of White adults report having a high school degree or higher and 35.5 percent have a bachelor's degree or higher. Approximately four out of five Black and Asian adults have a high school degree or higher, yet less than one in four Black adults have a bachelor's degree or higher (23.3 percent) compared with more than half of Asian adults (55.6 percent).

Table 20 provides detailed data on the percentage of adults with a high school or bachelor's degree by race and ethnicity for each geographic location studied. *Note: the table is sorted in descending order by educational attainment of a bachelor's degree for the United States.*

Educational Attainment by Race/Ethnicity

Source: 2021 ACS 5-Year Estimates

	High School Graduate or Higher					Bachelor's Degree or Higher				
	United States	North Carolina	Alexander County	Catawba County	Iredell County	United States	North Carolina	Alexander County	Catawba County	Iredell County
Asian	87.6%	87.5%	90.1%	82.1%	92.5%	55.6%	61.2%	62.1%	27.9%	54.7%
White	91.4%	91.2%	85.7%	88.8%	92.3%	35.5%	36.0%	15.9%	25.8%	33.3%
Multiracial	83.1%	83.8%	91.6%	83.3%	91.4%	28.7%	30.1%	6.9%	24.1%	29.5%
Black	87.2%	87.5%	78.1%	81.4%	87.7%	23.3%	22.9%	0.0%	10.8%	18.3%
Hispanic/Latino	71.2%	63.8%	70.7%	59.0%	70.4%	18.4%	17.5%	7.4%	10.3%	18.6%
NHPI	87.0%	89.0%	-	-	100.0%	18.2%	25.0%	-	-	79.2%
AIAN	79.7%	75.5%	29.4%	51.1%	88.7%	15.5%	13.5%	0.0%	4.9%	12.0%
Other	65.0%	57.4%	81.4%	55.7%	58.9%	14.0%	13.3%	0.0%	9.5%	14.3%

- Insufficient number of sample observations

Table 20: Educational Attainment - High School Graduate or Higher (2021 ACS 5-Year Estimates)

Educational Attainment of Mothers

Based on a study conducted using data from the Early Childhood Longitudinal Study-Kindergarten Cohort, a parent's education (especially the mother's) has a notable impact on the child's future academic success.^{xxiv} In the United States, 14.1 percent of women who had a birth in the past 12 months have a graduate or professional degree (Figure 19). In North Carolina and Iredell County, 13.2 and 13.4 percent of women who had a birth in the past 12 months have a graduate or professional degree, respectively, compared with 7.1 percent in Alexander County and 10.5 percent in Catawba County.

"Mother's Education Significant to Children's Academic Success"

A mother knows best—and the amount of education she attains can predict her children's success in reading and math. In fact, that success is greater if she had her child later in life, according to a new University of Michigan study. Sandra Tang, a U-M psychology research fellow and the study's lead author, said children of mothers 19 and older usually enter kindergarten with higher levels of achievement. These students continue to excel in math and reading at higher levels through eighth grade than children of mothers 18 and younger."

University of Michigan,

<https://news.umich.edu/mothers-education-significant-to-children-s-academic-success/>

Educational Attainment of Women Who Had a Birth in the Past 12 Months

Source: 2021 ACS 5-Year Estimates

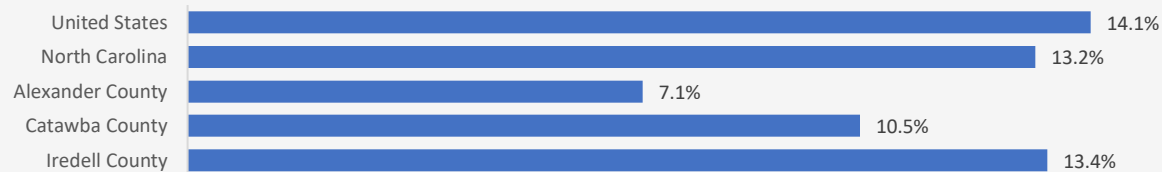


Figure 19: Educational Attainment of Women Who Had a Birth in the Past 12 Months (2021 ACS 5-Year Estimates)

I-CARE, Inc. - 2023 Community Assessment

MODULE 3: What are the characteristics of the community(ies) served?

Socioeconomic Status

North Carolina Department of Education

Per the [North Carolina Department of Public Instruction](#), during the 2022-23 school year more than four out of 10 students enrolled in North Carolina schools were White, approximately one-quarter was Black, one in five was Hispanic/Latino, and 5.4 percent identified as multiracial (Table 21).^{xxv}

The student population profiles of the I-CARE service area schools were significantly different. In Alexander, Catawba, and Iredell Counties, 77.4, 61.8, and 59.7 percent of the students were White, respectively; 4.4, 5.5, and 13.8 percent, correspondingly, were Black; and 11.8, 18.2, and 16.9 percent, respectively, were Hispanic/Latino.

Public School Student Membership by Race/Ethnicity (2022-23)

Source: North Carolina Department of Public Instruction (NCDPI)

	White	Black	Asian	AIAN	NHPI	Multiracial	Hispanic / Latino	Total
North Carolina	602,933	338,097	54,847	14,712	1,972	74,946	290,626	1,378,133
Alexander County	3,417	195	71	3	4	206	519	4,415
Catawba County	9,550	845	1,131	10	9	1,092	2,811	15,448
Iredell-Statesville	12,255	2,839	645	16	20	1,272	3,469	20,516

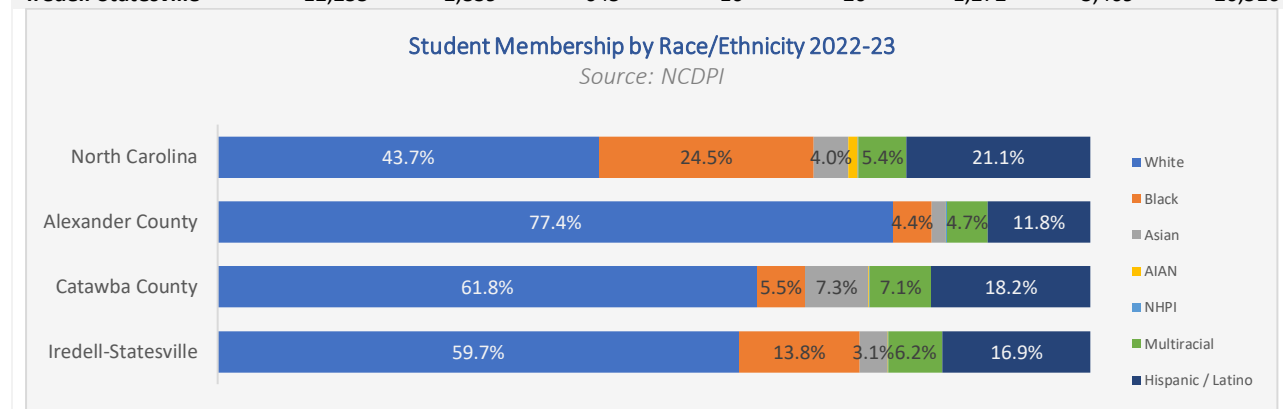


Table 21: Public School Student Membership by Race/Ethnicity (2022-23)

Graduation Rates

At the end of the 2021-22 school year in North Carolina, Alexander, Catawba, and Iredell Counties, 86.4, 83.8, 86.2, and 88.1 percent of students entering as 9th graders, respectively, graduated from high school within four years or earlier (Table 22). Table 22 illustrated the 4-year cohort graduation rates by race, ethnicity, economically disadvantaged, English learners, and disability status for each of the I-CARE service area counties.

In North Carolina graduation rates were lowest for English learners, 66.9 percent. In Alexander County graduation rates (for those indicators reported) were lowest for students who were economically disadvantaged, 67.8 percent, and lowest for students with disabilities in Catawba County and Iredell-Statesville Schools, 70.3 and 71 percent, respectively.^{xxvi}

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4-Year Cohort Graduation Rate Report (2018-19 Entering 9th Graders Graduating in 2021-22 or earlier)

Source: North Carolina Department of Public Instruction (NCDPI)

	North Carolina	Alexander County	Catawba County	Iredell-Statesville
All Students	86.4%	83.8%	86.2%	88.1%
White	89.9%	85.7%	85.9%	90.3%
Black	83.4%	*	84.9%	84.9%
Asian	>95%	*	>95%	>95%
AIAN	85.3%	*	*	*
Multiracial	83.5%	68.8%	80%	79.1%
Hispanic / Latino	80.2%	71.9%	86.6%	82%
Economically Disadvantaged	79.5%	67.8%	82%	79.4%
English Learner	66.9%	*	76.7%	75%
Students With Disabilities	71%	75.6%	70.3%	71%

* Indicates that the student population in the subgroup is too small to report the value.

Table 22: State and District Graduation Rates (202-22)

Dropout Rates

During the 2021-22 school year, high schools in North Carolina reported a dropout rate of 2.3 percent, an increase from the 1.9 percent reported the previous school year (Table 23). The dropout rates in Alexander and Iredell Counties also increased during the 2021-22 school year, to 3.1 and 2.8 percent, correspondingly; the dropout rate in Catawba County was 1.3 percent, down from 3.1 percent the prior year.^{xxvii}

Dropout Numbers and Rates (2020-21, 2021-22)

Source: North Carolina Department of Public Instruction (NCDPI)

	2020-21*		2021-22	
	Number	Rate	Number	Rate
North Carolina Public	9,147	1.9%	10,841	2.3%
Alexander County	29	2.0%	46	3.1%
Catawba County	155	3.1%	64	1.3%
Iredell-Statesville	186	2.6%	205	2.8%

*In response to the COVID-19 pandemic, starting in March of the 2019-2020 school year and continuing through the 2020-2021 school year, public school units across the state employed unprecedented methods to ensure continued student learning by utilizing various modes of instruction and student outreach. As such, caution should be taken when comparing data reported for the 2019-2020 and 2020-2021 school years to data reported for prior and subsequent years.

Table 23: Dropout Numbers and Rates (2020-21, 2021-22)

Financial Assets and Income

Median Household Income

North Carolina's median household income of \$60,516 is lower than that of the United States, which is \$69,021; the median household income is even lower for Alexander and Catawba Counties, \$55,041 and \$57,840, respectively; the median income in Iredell County is higher than the state, \$66,824 (Table 24). The per capita income in the United States is \$37,638, while the per capita incomes in North Carolina, Alexander, and Catawba Counties are lower, \$34,209, \$28,385, and \$30,972, respectively. The per capita income in Iredell County is slightly higher than the United States, \$37,667.

Household, Family, and Per Capita Income

Source: 2021 ACS 5-Year Estimates

	Median Household Income	Mean Household Income	Median Family Income	Mean Family Income	Per Capita Income
United States	\$69,021	\$97,196	\$85,028	\$114,099	\$37,638
North Carolina	\$60,516	\$84,888	\$75,815	\$101,094	\$34,209
Alexander County	\$55,041	\$74,719	\$66,375	\$86,251	\$28,385
Catawba County	\$57,840	\$76,316	\$69,391	\$89,240	\$30,972
Iredell County	\$66,824	\$94,543	\$78,692	\$109,341	\$37,667

Table 24: Household Income (2021 ACS 5-Year Estimates)

Median and mean household incomes are included to ensure that comparisons are not misleading. Using the mean household income alone, for example, will ignore extreme values if the data is not symmetrically distributed. It is a fact that more people earn low salaries than high ones because a fairly large proportion of the population works part-time, so the data will not be symmetrically distributed. Therefore, the mean is not the best "average" to use in this case when comparing income across the state.

For more information and to see a list of U.S. states by median household income visit the following: <http://worldpopulationreview.com/states/median-household-income-by-state/>.

The **mean** is the average (when one adds all of the values and then divides by the number of values).

The **median** is the middle value in a list of numbers (found after the list of numbers is sorted in order).

"**Per capita income** is a measure of the amount of money earned per person in a nation or geographic region. Per capita income can be used to determine the average per-person income for an area and to evaluate the standard of living and quality of life of the population. Per capita income for a nation is calculated by dividing the country's national income by its population."

Investopedia, <https://www.investopedia.com>

Average Salary: Private Occupational Sector

Rationale for Using Average Salary by Private Sector: The [U.S. Bureau of Labor Statistics](#) offers average salary data on the following sectors: private, the federal government, state government, local government, combined government, and total of all ownership. It is difficult to do a real “apples-to-apples” comparison of public and private sector compensation because public sector job descriptions and duties may be very different from those in the private sector, and vice versa, so, often there are no comparable positions within the other sectors.

The analyses of average wages and benefits in public and private sectors reveal that state and local government workers earn more than private-sector workers because state and local government workers are better educated and have more work experience, on average, than do private-sector workers.^{xxviii} Workers with lower skills and education levels in state and local government jobs earn less than their private-sector counterparts. The public sector jobs, in most cases, offer better job security and certainty of pension benefits, notably absent in the private sector.

It is important for CSBG programs to take a closer look, in addition to average salary data, at the education statistics (educational attainment) included in this study. Knowing the percentage of workers with a college degree, for example, is helpful because it may predict community performance and outcomes in many categories.

The following data tables and analysis of average weekly wages focuses on private industries. According to the [U.S. Bureau of Labor Statistics](#), the average weekly salary in the private sector in the United States is \$1,288, compared with \$1,167 in North Carolina (Table 25). The greatest disparities in wages are seen for the Information and Natural Resources and Mining sector, where North Carolina employees earn 25 percent less, on average, than the weekly national wage (Table 25, Figure 20). The Information sector comprises establishments engaged in the following processes: (a) producing and distributing information and cultural products, (b) providing the means to transmit or distribute these products as well as data or communications, and (c) processing data.

Average Weekly Wages: Private Occupational Sector (2022, Q2)

Source: U.S. Department of Labor, Bureau of Labor Statistics (BLS)

	Average Weekly Wage in United States	Average Weekly Wage in North Carolina	Wage Disparity Between the United States and North Carolina
10 Total, all industries	\$1,288	\$1,167	-9.4%
101 Goods-producing	\$1,412	\$1,241	-12.1%
1011 Natural resources and mining	\$1,189	\$895	-24.7%
1012 Construction	\$1,352	\$1,213	-10.3%
1013 Manufacturing	\$1,480	\$1,276	-13.8%
102 Service-providing	\$1,262	\$1,150	-8.9%
1021 Trade, transportation, and utilities	\$1,080	\$1,004	-7.0%
1022 Information	\$2,672	\$2,004	-25.0%
1023 Financial activities	\$1,934	\$1,818	-6.0%
1024 Professional and business services	\$1,715	\$1,519	-11.4%
1025 Education and health services	\$1,148	\$1,112	-3.1%
1026 Leisure and hospitality	\$574	\$485	-15.5%
1027 Other services	\$914	\$839	-8.2%

Table 25: Average Weekly Wages: Private Occupational Sector (2022, Q2)

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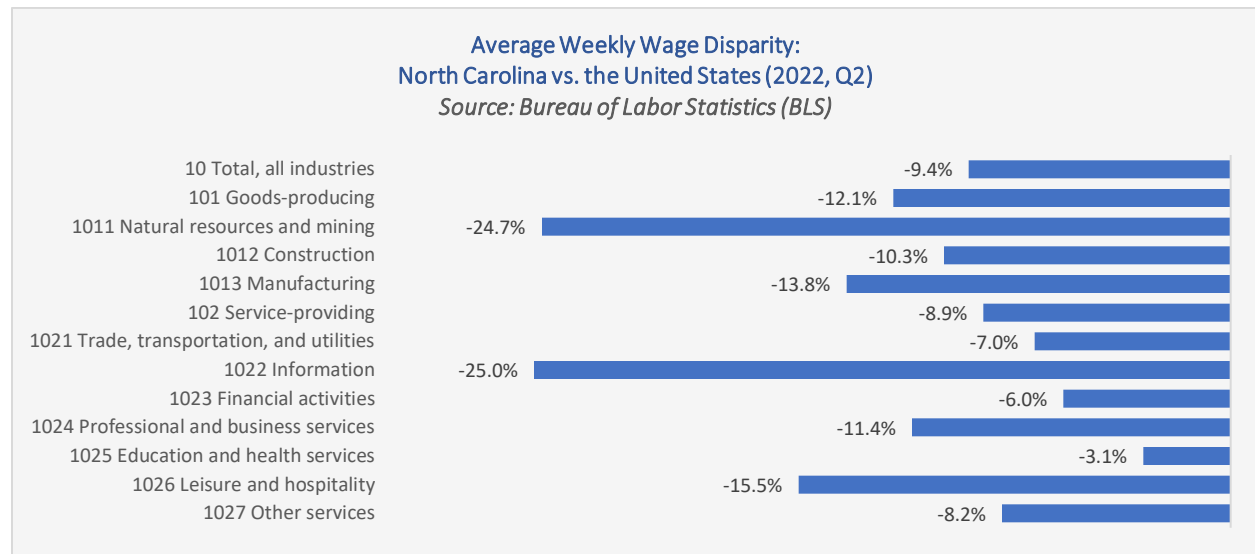


Figure 20: Average Weekly Wages: Private Occupational Sector (2022, Q2)

Table 26 provides the average weekly wages by all private occupational sectors in the United States, North Carolina, and the I-CARE service area. Most average weekly wages in the I-CARE service area counties are lower than the United States and North Carolina.^{xxix}

Average Weekly Wages: Private Occupational Sector (2022, Q2)
Source: U.S. Department of Labor, Bureau of Labor Statistics (BLS)

	United States	North Carolina	Alexander County	Catawba County	Iredell County
10 Total, all industries	\$1,288	\$1,167	\$781	\$1,008	\$1,273
101 Goods-producing	\$1,412	\$1,241	\$895	\$1,128	\$1,183
1011 Natural resources and mining	\$1,189	\$895	\$610	\$917	\$1,007
1012 Construction	\$1,352	\$1,213	\$938	\$1,134	\$1,173
1013 Manufacturing	\$1,480	\$1,276	\$898	\$1,128	\$1,194
102 Service-providing	\$1,262	\$1,150	\$629	\$944	\$1,302
1021 Trade, transportation, and utilities	\$1,080	\$1,004	\$665	\$985	\$940
1022 Information	\$2,672	\$2,004	\$846	\$1,144	\$1,296
1023 Financial activities	\$1,934	\$1,818	\$900	\$1,275	\$1,537
1024 Professional and business services	\$1,715	\$1,519	\$705	\$1,164	\$2,363
1025 Education and health services	\$1,148	\$1,112	\$754	\$1,076	\$1,018
1026 Leisure and hospitality	\$574	\$485	\$331	\$388	\$600
1027 Other services	\$914	\$839	\$716	\$744	\$752

Table 26: Average Weekly Wages: Private Occupational Sector (2022, Q2)

Note: Numbers ahead of each industry listed in the Average Weekly Wages tables and figures are Quarterly Census of Employment and Wages (QCEW) high-level industry titles.

Underemployment

Underemployment is a term used to describe where individuals are employed but not in jobs that fully utilize their skills or abilities or where they work fewer hours than they would prefer. It should be noted that the number of underemployed individuals by county cannot be quantified due to the lack of comprehensive data on this issue.

In North Carolina, underemployment is a persistent problem. The issue is especially acute in rural areas, where a mismatch between workers' skills and employers' demands compounds the need for employment opportunities. In urban areas of N.C., underemployment is often driven by many low-wage service sector jobs. These low-wage jobs may need to provide workers with a living wage or opportunities for advancement, leading to job dissatisfaction and low productivity levels. Underemployment in urban areas can also be caused by a lack of job opportunities that match workers' skills, leading to workers taking jobs that only partially utilize their potential.

Rural-urban divide underemployment is a significant issue in North Carolina, with considerable differences between rural and urban areas. For example, the North Carolina Rural Center reports that underemployment is more prevalent in rural areas than urban centers. This discrepancy is primarily attributed to the limited availability of jobs in rural regions that match the skillsets and educational backgrounds of the local workforce.^{xxx} Additionally, rural economies tend to rely heavily on specific industries, such as agriculture, forestry, and manufacturing, making workers in these areas more susceptible to economic downturns or shifts in global demand.^{xxxi}

In contrast, urban areas in North Carolina, such as Charlotte, Raleigh, and Durham, benefit from more diversified economies encompassing various industries, including finance, technology, healthcare, and education. As a result, these urban centers provide a more comprehensive range of job opportunities, enabling individuals to find work that better aligns with their skills and qualifications.^{xxxii}

However, underemployment is common in rural areas. A study by the Brookings Institution found that even in urban regions, underemployment remains a challenge, particularly for minority populations and those with lower levels of education. In addition, the study noted that many urban workers are employed in low-wage, part-time, or temporary jobs that do not provide adequate income or stability.^{xxxiii}

In conclusion, underemployment is a pervasive issue in North Carolina, with rural areas facing higher rates due to limited job opportunities and industry diversification. At the same time, urban centers offer a broader range of employment prospects, but underemployment persists, especially among minority populations and individuals with lower educational attainment.

“**Underemployment** occurs when a person does not work full time or takes a job that does not reflect their actual training and financial needs. That is, their job doesn’t use all their skills and education, or provides less than full time work. This is not the same as unemployment, which refers to people who are not currently employed at all.

Underemployment is divided into three common categories, as follows:

- Skilled workers in low-income jobs
- Skilled workers in jobs that don’t fully utilize their skills
- Part-time workers who would rather work full-time

Two types of underemployment exist: visible and invisible.

1. Visible underemployment comprises employees who work fewer hours than what is considered normal in their field or industry. They possess the skills to work in a full-time position but are unable to find regular employment. They usually work part-time jobs to make ends meet. (to search data: multiple part-time jobs?)
2. Invisible underemployment refers to people who work in jobs that don’t utilize their skills – such as a financial analyst working as a waiter in a restaurant. This type of underemployment is very difficult to measure and requires extensive research and surveys. (migrants – language barrier – i.e. surgeon working as cleaner)

In addition, a third type of underemployment exists, which is called ‘marginally attached to the labor force.’ It includes people who have looked for employment in the past year, who would like to work, and are available for work, but are ‘discouraged workers’ or those who have given up looking for employment altogether because of their prolonged inability to find work.

Underemployment also includes people with full-time employment but who live below the poverty line. They are known as the ‘working poor.’”

Corporate Finance Institute, <https://corporatefinanceinstitute.com/resources/economics/underemployment/>

Poverty

Federal Poverty Guidelines

The [U.S. Department of Health and Human Services](#) issues the Federal Poverty Guidelines in the [Federal Register](#) annually. The Poverty Guidelines for a family of four in 2023 is \$30,000. Research suggests that a family of four requires at least double that amount to make ends meet.^{xxxiv} The measurement only accounts for the family's annual income; it does not include other aspects of economic status such as housing, debt, assets, or property. The calculation used today was originally developed in the 1960s based on the amount of money spent by families on food. The poverty level was reached by multiplying that dollar amount (money spent by families on food) times three. Nowadays, families not only spend approximately one-seventh of their annual income on food, but the cost of child care, transportation, and health care have increased drastically over the past 60 years.^{xxxv}

Persons in Family/Household	Poverty guideline
1	\$14,580
2	\$19,720
3	\$24,860
4	\$30,000
5	\$35,140
6	\$40,280
7	\$45,420
8	\$50,560
For families/households with more than 8 persons, add \$5,140 for each additional person.	

Learn more about how poverty is measured by watching this [YouTube video](#) from the Institute for Research on Poverty.

ALICE: Asset Limited, Income Constrained, Employed Households

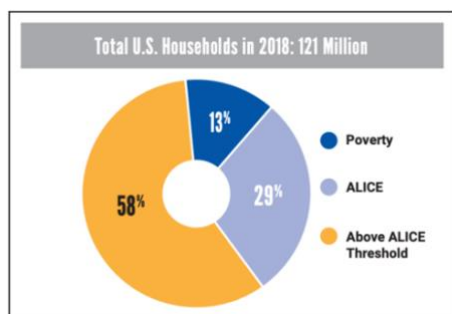


Figure 21: ALICE in the United States (2018)

[United for ALICE](#) is an organization that studies the financial hardships of households and families on a national level and has partnerships with select states to conduct similar research and work on a state and local level. ALICE is an acronym that stands for: **A**sset **L**imited, **I**ncome **C**onstrained, **E**mployed. Based on the 2020 National Overview report, using 2018 data, 42 percent of households in the United States were below the ALICE threshold, of which 13 percent were living under the federal poverty guidelines, and 29 percent of households were ALICE (Figure 21).

“ALICE, an acronym for Asset Limited, Income Constrained, Employed, is a new way of defining and understanding the struggles of households that earn above the federal poverty level, but not enough to afford a bare-bones household budget.

“For far too many families, the cost of living outpaces what they earn. These households struggle to manage even their most basic needs - housing, food, transportation, child care, health care, and necessary technology. When funds run short, cash-strapped households are forced to make impossible choices, such as deciding between quality child care or paying the rent, filling a prescription, or fixing the car. These short-term decisions have long-term consequences not only for ALICE families, but for all of us.”

United for ALICE, <https://www.unitedforalice.org/>

In North Carolina 44 percent of households were below the ALICE threshold, of which 14 percent were living under the federal poverty level, and 30 percent of households were ALICE (Table 27). “These households earned above the FPL, but not enough to afford basic household necessities.”^{xxxvi} In Alexander, Catawba, and Iredell Counties, 45, 41, and 34 percent, respectively, lived below the ALICE threshold, of which 14, 13, and 9 percent, correspondingly, were living under the federal poverty guidelines. Of the

households who lived below the ALICE threshold, 31, 28, and 25 percent of the households in Alexander, Catawba, and Iredell Counties, respectively, were ALICE.

ALICE Households (2018)

Source: United for ALICE

	North Carolina	Alexander County	Catawba County	Iredell County
Poverty	14%	14%	13%	9%
ALICE	30%	31%	28%	25%
Below ALICE	44%	45%	41%	34%

Table 27: ALICE Households (2018)

Living Wage

Dr. Amy K. Glasmeier from Massachusetts Institute of Technology (MIT) developed the [Living Wage Calculator](#) to determine an individual's ability to live within a certain standard of living. The Living Wage Calculator methodology considers real cost expenses, income, and payroll taxes to determine the minimum employment earnings necessary to meet basic family needs and maintain self-sufficiency. Based on this methodology and factors considered, families earning minimum wage in the service area are not able to survive without a safety net and government assistance.

In North Carolina the hourly living wage for a single parent with two children is \$42.04; the hourly living wage for a two-parent household (where one adult is working) with two children is \$36.37. The poverty wages for those two types of families are \$10.56 and \$12.74 per hour, respectively; the minimum wage in North Carolina is \$7.25 per hour.

The living wage for a single-parent family with two children in North Carolina is \$87,451, **more than 3.5 times the federal poverty level** for a family of three, which is \$24,860!

Table 28 provides information on annual expenses by state and county for needs including food, child care, medical, housing, and transportation. The required annual income of a single-parent family with two children, before taxes in North Carolina is \$87,451; the required annual income of a two-parent family (one working) with two children is \$75,640. The Federal Poverty Level for a family of three is \$24,860; the Federal Poverty Level for a family of four is \$30,000. Compared with the state average, the living wages for a single-parent family with two children in the counties in the I-CARE, Inc. service area are lower than the state. The same applies for a two-parent family (one adult working) with two children. The living wage for the state of North Carolina is higher than the counties in the I-CARE, Inc. service area.

Living Wage (2022)

Source: Living Wage Calculator

	North Carolina	Alexander County	Catawba County	Iredell County
Hourly Wages		1 Adult	2 Children	
Living Wage	\$42.04	\$36.63	\$38.91	\$41.55
Poverty Wage	\$10.56	\$10.56	\$10.56	\$10.56
Minimum Wage	\$7.25	\$7.25	\$7.25	\$7.25
Annual Expenses				
Food	\$7,417	\$7,417	\$7,417	\$7,417
Child Care	\$18,911	\$13,163	\$16,998	\$18,452
Medical	\$8,037	\$8,037	\$8,037	\$8,037
Housing	\$12,348	\$8,998	\$8,998	\$11,984
Transportation	\$12,709	\$12,709	\$12,709	\$11,984
Other	\$6,150	\$6,150	\$6,150	\$12,709
Required annual income before taxes	\$87,451	\$76,191	\$80,938	\$86,433

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Living Wage (2022)

Source: Living Wage Calculator

	North Carolina	Alexander County	Catawba County	Iredell County
Hourly Wages	2 Adults (1 Working) 2 Children			
Living Wage	\$36.37	\$34.37	\$34.37	\$36.15
Poverty Wage	\$12.74	\$12.74	\$12.74	\$12.74
Minimum Wage	\$7.25	\$7.25	\$7.25	\$7.25
Annual Expenses				
Food	\$9,856	\$9,856	\$9,856	\$9,856
Child Care	\$0	\$0	\$0	\$0
Medical	\$8,347	\$8,347	\$8,347	\$8,347
Housing	\$12,348	\$8,998	\$8,998	\$11,984
Transportation	\$15,012	\$15,012	\$15,012	\$15,012
Other	\$8,948	\$8,948	\$8,948	\$8,948
Required annual income before taxes	\$75,640	\$71,494	\$71,494	\$75,190

Table 28: Living Wage (2022)

Poverty in North Carolina

Per the 2021 [Small Area Income and Poverty Estimates \(SAIPE\)](#), 13.5 percent of the population in North Carolina lives in poverty (more than 1.3 million individuals), and 18.2 percent of children, ages 0-17, live in poverty (412,500 children) (Table 29). In Alexander, Catawba, and Iredell Counties, of the overall population 12.6, 13.5, and 9.5 percent live in poverty, respectively; of the children between the ages of 0 and 17, a corresponding 18.3, 17.9, and 12.8 percent live in poverty.

Poverty Estimates: All Ages and Children Ages 0-17 (2021)

Source: Small Area Income and Poverty Estimates (SAIPE)

	All Ages	Poverty Est., All Ages	Age 0-17	Poverty Est., Age 0-17
United States	41,393,176	12.8%	12,243,219	16.9%
North Carolina	1,383,626	13.5%	412,500	18.2%
Alexander County	4,443	12.6%	1,307	18.3%
Catawba County	21,477	13.5%	6,186	17.9%
Iredell County	18,028	9.5%	5,451	12.8%

Table 29: Poverty (2021)

Poverty by Race/Ethnicity

Although the overall poverty rate (for all ages) in North Carolina is 12.8 percent, the poverty rate for Black residents, who make up 20.5 percent of the population in the state, is 21.1 percent (Figure 22). Of the Hispanic/Latino population, who make up 10.7 of the state's population, 23.4 percent live in poverty.

In Alexander, Catawba, and Iredell Counties, 34.7, 24.2 and 17.7 percent of the Black population, respectively, lives in poverty. and 17.2, 29.4, and 19.6 percent of the Hispanic/Latino population, correspondingly, lives in poverty.

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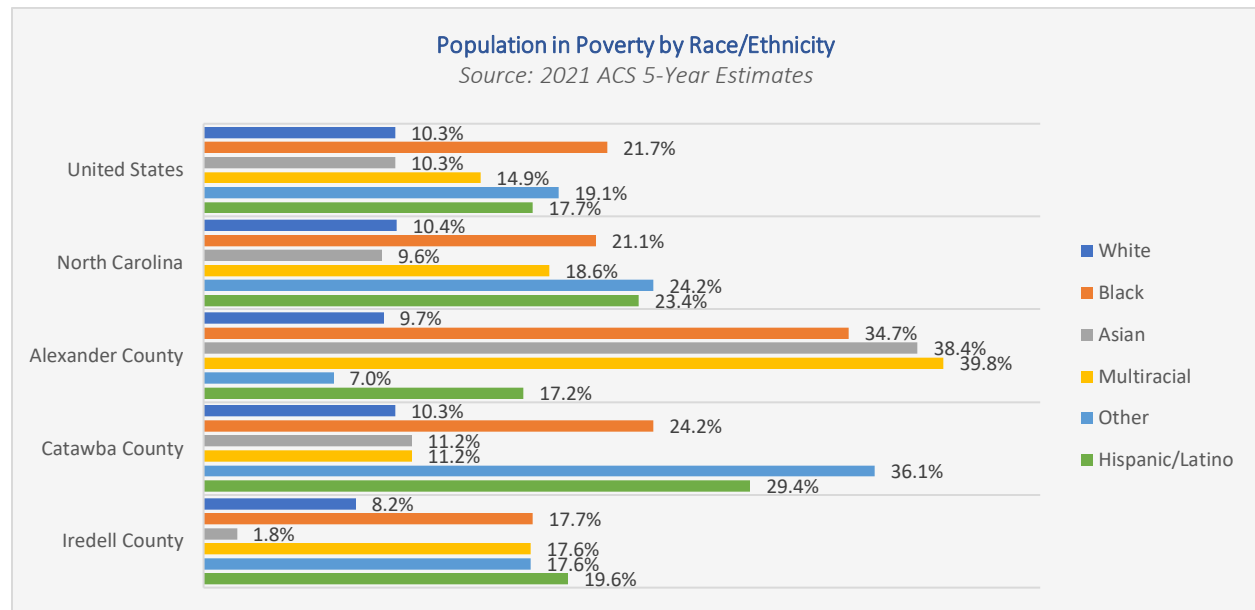


Figure 22: Poverty by Race/Ethnicity (2021 ACS 5-Year Estimates)

Poverty by Educational Attainment

Obtaining a higher level of education significantly impacts poverty rate. In North Carolina 26.7 percent of the population with less than a high school degree lives in poverty, while 4 percent of the population with a bachelor's degree or higher lives in poverty (Figure 23). In Alexander, Catawba, and Iredell Counties, 20.1, 24.6, and 20.1 percent with less than a high school degree, respectively, lives in poverty; of the population with a bachelor's degree or higher, 2.9, 3.7, and 3.6 percent, correspondingly, lives in poverty.

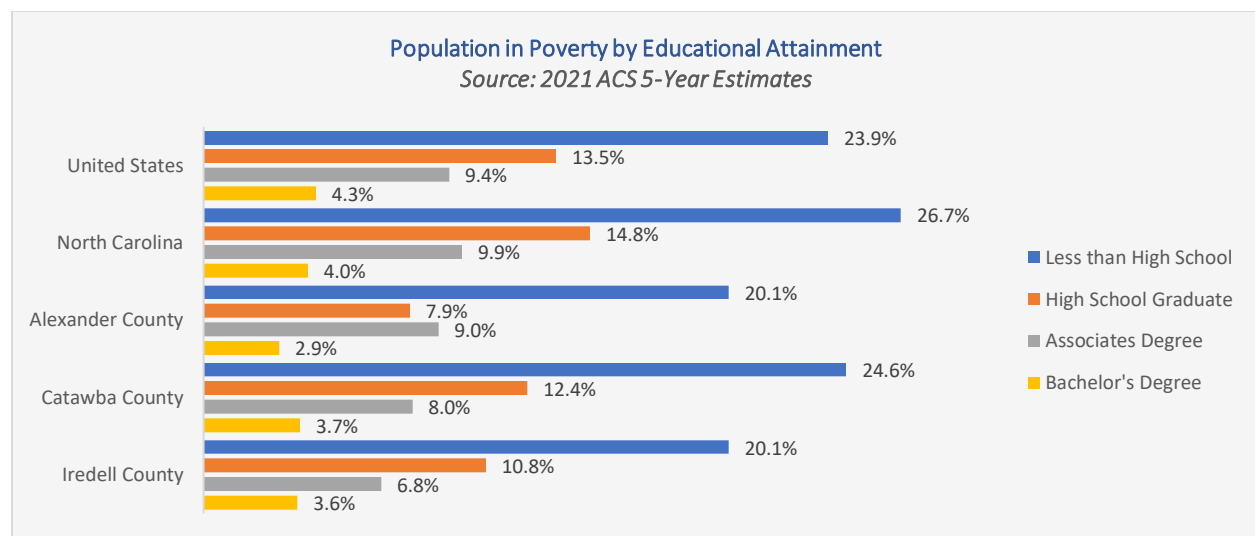


Figure 23: Poverty by Educational Attainment (2021 ACS 5-Year Estimates)

Poverty by Employment Status

Like educational attainment, a significant difference is seen in poverty rates between employed and unemployed individuals. In the United States, North Carolina, and the I-CARE service area, employed and unemployed females live in poverty at higher rates than employed and unemployed males (Figure 24).

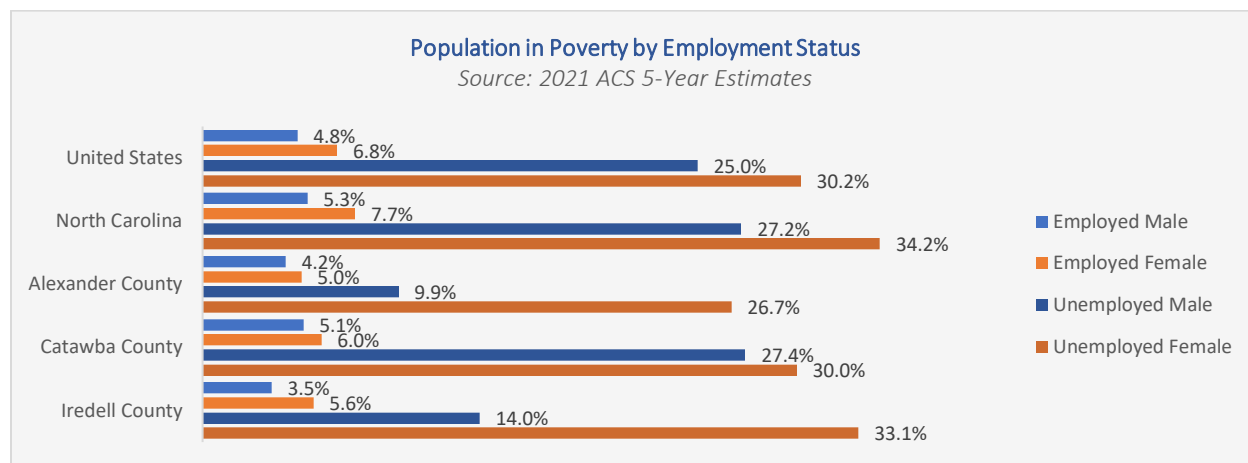


Figure 24: Population in Poverty by Employment Status (2021 ACS 5-Year Estimates)

Births to Women in Poverty

Of the nearly 4 million women between the ages 15 and 50 who had a birth in the United States in the past 12 months (2021 ACS 5-Year Estimates), more than 829,000, or 20.9 percent, were living in poverty (Table 30). In North Carolina nearly 31,000, or 25 percent of all women who had a birth, gave birth in poverty. In Alexander, Catawba, and Iredell Counties, 881 women between the ages of 15 and 50 gave birth in poverty, 34.8, 21, and 15.6 percent of total women per county, respectively.

Women 15-50 Years Who Had a Birth in the Past 12 Months in Poverty
Source: 2021 ACS 5-Year Estimates

	Total Births	Births in Poverty	Percentage of Births in Poverty
United States	3,971,395	829,324	20.9%
North Carolina	124,231	30,971	25.0%
Alexander County	282	98	34.8%
Catawba County	1,747	367	21.0%
Iredell County	2,673	416	15.6%

NOTE: Census estimates report on the number of women who gave birth in the past 12 months; the 2021 ACS 5-Year Estimates report on the average of five years from 2016 to 2021.

Table 30: Women Who Had a Birth in Poverty (2021 ACS 5-Year Estimates)

Families in Poverty

In the United States, 8.9 percent of all families, 4.5 percent of married-couple families, and 24.5 percent of families led by a single female live in poverty. In North Carolina, Alexander, Catawba, and Iredell Counties, 9.7, 8, 9, and 7.9 percent of all families, respectively, live in poverty; 4.6, 4.8, 4.8, and 3.8 percent of married-couple families, correspondingly, live in poverty, and 27, 23.6, 23.8, and 25.2 percent of single female householder families, respectively, live in poverty (Figure 25).

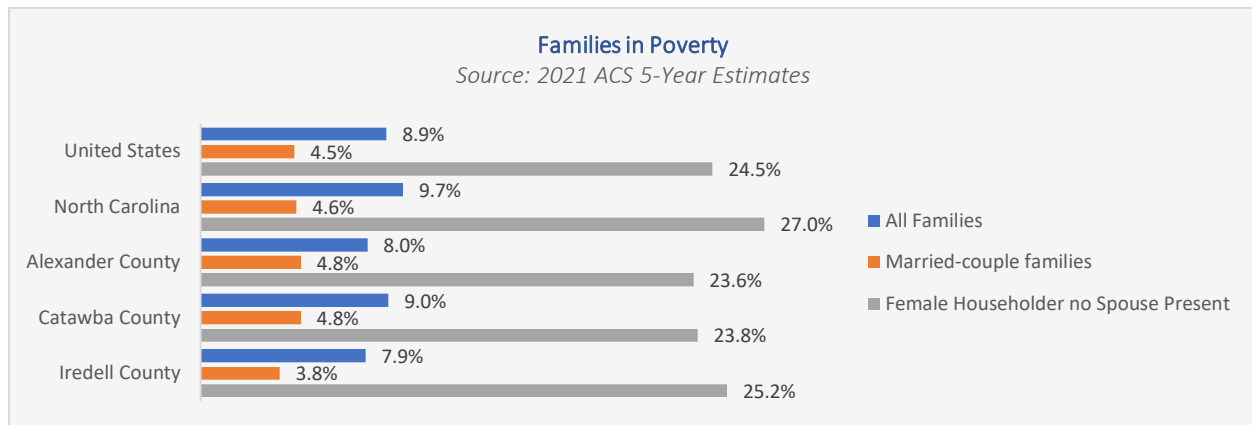


Figure 25: Families in Poverty (2021 ACS 5-Year Estimates)

Families with Children Under Age 5 in Poverty

Of families with related children under the age of 5 in the United States and North Carolina, 13.1 and 14.6 percent, respectively, live in poverty. In Alexander, Catawba, and Iredell Counties, 11.7, 16.3, and 10.4 percent of families with children under 5 years live in poverty, correspondingly (Figure 26). The poverty rates for married-couple families with children under the age of 5 in the United States and North Carolina are 4.7 and 4.9 percent, respectively. In Alexander, Catawba, and Iredell Counties, 5, 1.8, and 1.2 percent of married-couple families with children under the age of 5 live in poverty, respectively.

In the United States and North Carolina, of the families with only a female householder, no husband (or partner) present, with children under the age of 5, 37.8 and 39.8 percent, respectively, live in poverty. In Alexander, Catawba, and Iredell Counties, 72.7, 36.2, and 46.4 percent of single female parent households with children under age 5, correspondingly, live in poverty.

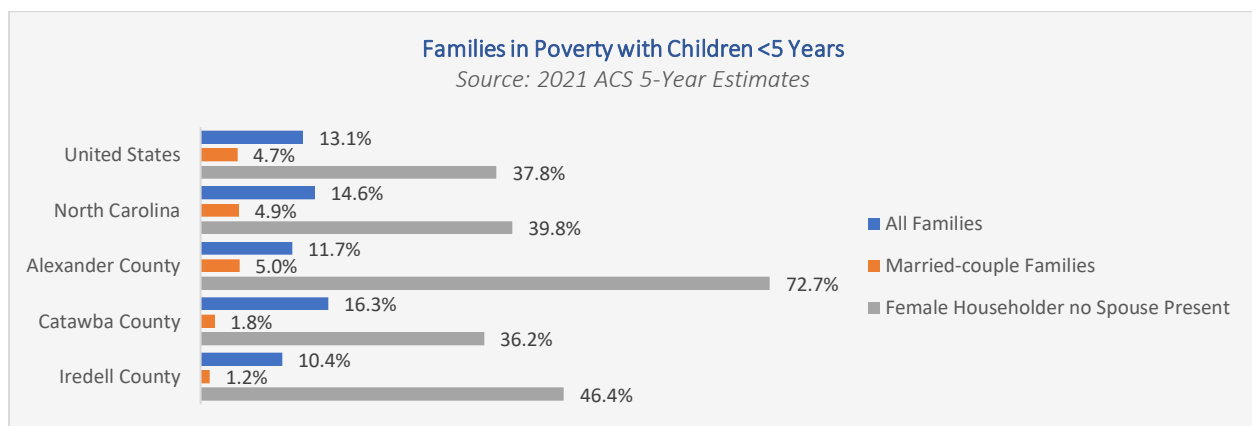


Figure 26: Families in Poverty with Children <5 Years (2021 ACS 5-Year Estimates)

Children in Poverty

Children Ages 0-5: Percentage in Poverty

In the United States there are more than 23 million children ages 0-5, of which more than 4.2 million, or 18.1 percent, live in poverty. In North Carolina, 20.7 percent of children, ages 0-5, live in poverty, a total of 148,198 children (Table 31). In Alexander, Catawba, and Iredell Counties, 20.5, 20.2, and 15.5 percent of children, ages 0-5, respectively, live in poverty, representing 4,382 children.

Children Ages 0-5 in Poverty			
Source: 2021 ACS 5-Year Estimates			
	Total Children Ages 0-5	Children Ages 0-5 in Poverty	
United States	23,353,556	4,227,649	18.1%
North Carolina	716,033	148,198	20.7%
Alexander County	1,996	409	20.5%
Catawba County	10,701	2,157	20.2%
Iredell County	11,706	1,816	15.5%

Table 31: Children Ages 0-5 in Poverty (2021 ACS 5-Year Estimates)

Racial Proportion of Children Ages 0-5 in Poverty

As previously stated, 20.5 percent of the population in North Carolina is Black; of the children, ages 0-5, living in poverty, however, 35.6 percent, or more than 52,000 children, are Black (Figure 27 & Table 32). Statewide the multiracial population makes up 6.8 percent of the total population; however, 13.3 percent of children, ages 0-5, living in poverty, are multiracial.

The discrepancy between children in poverty by race and their representation in the population is also seen in the I-CARE service area counties. For example, in Iredell County Black residents make up 11.6 percent of the total population, yet 23.9 percent of children, ages 0-5, living in poverty, are Black. In Alexander and Catawba Counties, 2.8 and 5.9 percent of the population identify as Other, yet 8.8 and 31.3 percent of children, ages 0-5, living in poverty, identify their race as Other.

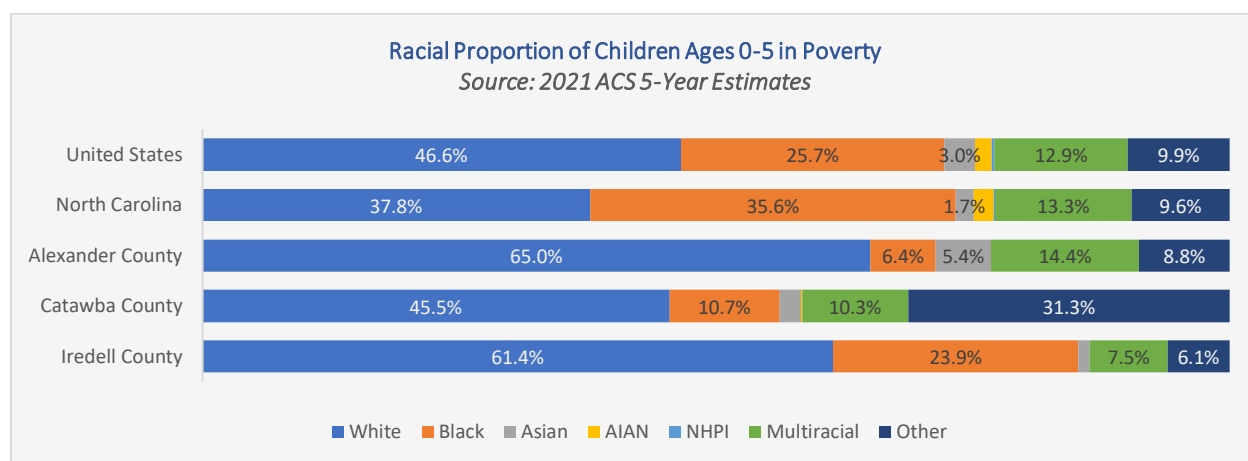


Figure 27: Racial Proportion Children Ages 0-5 in Poverty (2021 ACS 5-Year Estimates)

Children Ages 0-5 in Poverty by Race

Source: 2021 ACS 5-Year Estimates

	Total	White	Black	Asian	AIAN	NHPI	Multiracial	Other
United States	4,227,649	1,968,946	1,084,833	125,257	69,166	12,092	547,142	420,213
North Carolina	148,198	55,956	52,726	2,538	2,971	192	19,637	14,178
Alexander County	409	266	26	22	0	0	59	36
Catawba County	2,157	981	231	45	2	0	223	675
Iredell County	1,816	1,115	434	20	0	0	137	110

Table 32: Number of Children Ages 0-5 in Poverty by Race (2021 ACS 5-Year Estimates)

Ethnic Proportion of Children Ages 0-5 In Poverty

In North Carolina, as previously stated, 10.7 percent of the population is Hispanic/Latino. Of the children, ages 0 to 5, who live in poverty, 28.4 percent are Hispanic/Latino (Table 33). In Alexander, Catawba, and Iredell Counties, 5, 10.8, and 8.5 percent of the population is Hispanic/Latino, respectively; however, 8.8, 44.6, and 31.4 percent of children in poverty, correspondingly, are Hispanic/Latino.

Children Ages 0-5 in Poverty by Ethnicity

Source: 2021 ACS 5-Year Estimates

	Total	Non-Hispanic / Latino	Hispanic / Latino
United States	4,227,649	1,471,927	2,755,722
North Carolina	148,198	42,154	106,044
Alexander County	409	36	373
Catawba County	2,157	961	1,196
Iredell County	1,816	571	1,245

Ethnic Proportion of Children Ages 0-5 in Poverty

Source: 2021 ACS 5-Year Estimates

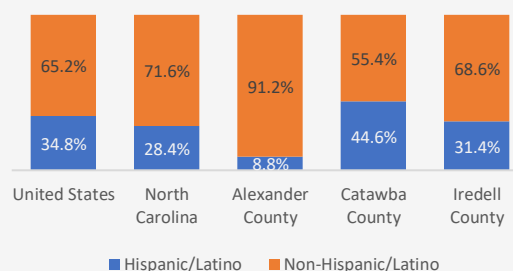


Table 33: Children Ages 0-5 in Poverty by Ethnicity (2021 ACS 5-Year Estimates)

Extreme Poverty

Extreme poverty is defined by the World Bank as an individual living on \$1.90 or less per day.^{xxxvii} The extent to which extreme poverty exists in the United States is heavily debated. In 2018 Dr. Bruce D. Meyer, Professor at the McCormick Foundation University of Chicago, found that extreme poverty is very rare to nonexistent in the United States, as existing studies and reports “fail to account for important benefits such as in-kind transfers, public assistance, and unreported earnings.”^{xxxviii}

Although the median family income in North Carolina is \$75,815, 3.7 percent of families statewide have an income of less than \$10,000 per year (Table 34). In Alexander, Catawba, and Iredell Counties, 3.2, 3.7, and 3.1 percent of families, respectively, have an income of less than \$10,000 per year. The federal poverty level for a family of four in the United States is \$30,000, approximately \$20.50 per day, per person. A family of four, living on an income of less than \$10,000, must make ends meet with approximately \$6.80 per day, per person.

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Extreme Poverty

Source: 2021 ACS 5-Year Estimates

	Total Families	Families Earning Less than \$10,000/Year	
		Number	Percent
United States	80,755,759	2,697,864	3.3%
North Carolina	2,616,198	96,857	3.7%
Alexander County	9,789	313	3.2%
Catawba County	42,654	1,583	3.7%
Iredell County	50,662	1,571	3.1%

Table 34: Extreme Poverty (2021 ACS 5-Year Estimates)

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Federal Assistance Benefits

Temporary Assistance for Needy Families (TANF)

According to the [North Carolina Department of Health and Human Services](#), as of February 2023, in North Carolina there were 18,367 Work First Cash Assistance participants, of which 83, 146, and 263 were in Alexander, Catawba, and Iredell Counties, respectively (Table 35).^{xxix} In North Carolina and Alexander County, the number of participants increased from 2022 to 2023, while it decreased in Catawba and Iredell Counties.

Work First Cash Assistance Participants (2022-23)		
<i>Source: NC Department of Health and Human Services</i>		
	February 2023	February 2022
North Carolina	18,367	18,293
Alexander County	83	79
Catawba County	146	174
Iredell County	263	294

Table 35: Work First Participants (2022-23)

Supplemental Security Income (SSI)

[Supplemental Security Income, or SSI](#), provides monthly financial payments to low-income adults who are blind, disabled, or age 65 and older. Children who are disabled or blind are also eligible to receive SSI benefits. Families receiving SSI are categorically eligible for Head Start services, providing the family an additional benefit and supportive resource. In 2021, 32,937 children under age 18 received SSI benefits in North Carolina, of which 72, 380, and 426 children were in Alexander, Catawba, and Iredell Counties, respectively (Table 36).^{xi}

Supplemental Security Income (SSI) Recipients by Age (December 2021)				
<i>Source: Social Security Administration (SSA)</i>				
	Total	Age		
		< 18	18–64	65+
United States	7,695,900	1,038,149	4,363,898	2,293,853
North Carolina	221,382	32,937	142,370	46,075
Alexander County	611	72	427	112
Catawba County	3,089	380	2,093	616
Iredell County	2,604	426	1,729	449

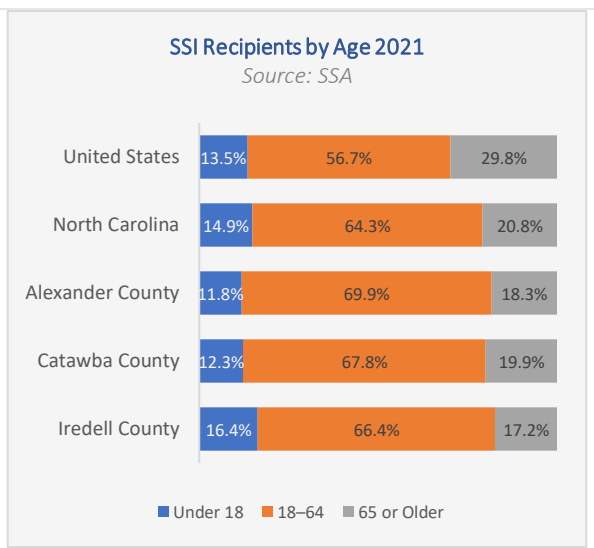
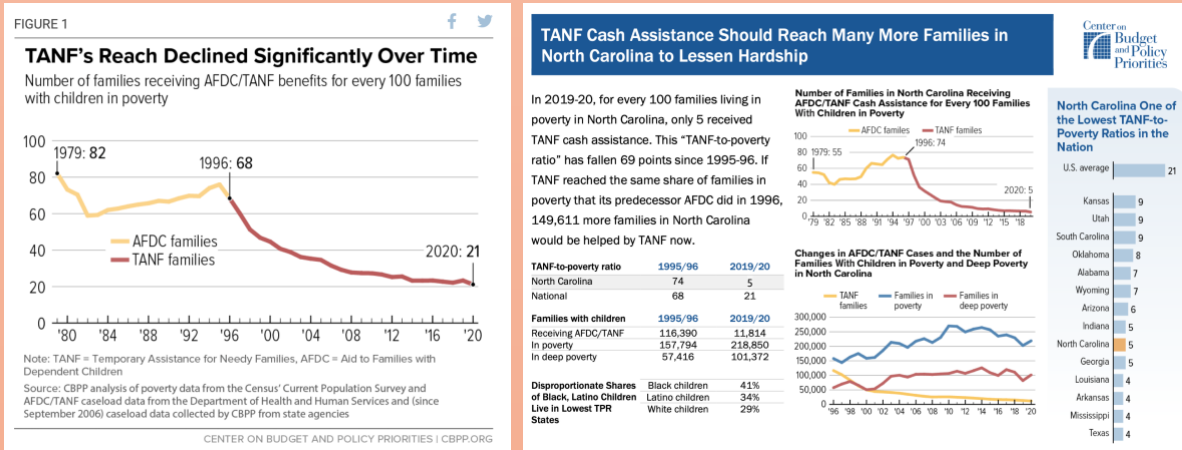


Table 36: SSI Recipients by Age (2021)

NOTE: Data regarding WIC and SNAP participation is located in the Nutrition section of this Community Assessment.

Temporary Assistance for Needy Families (TANF)

“Families experiencing poverty need access to cash assistance to help them afford their basic needs and maintain stability, particularly during the ongoing COVID-19 pandemic. Families use assistance provided by the Temporary Assistance for Needy Families (TANF) program to pay rent, for utilities, diapers, food, transportation, and other necessities. Yet too few families struggling to make ends meet can access the program, and TANF’s history of racism means that it fails to reach many families in states where Black children are likelier to live. If TANF had the same reach in 2020 as its predecessor, Aid to Families with Dependent Child (AFDC), did in 1996, 2.38 million more families nationwide would have received cash assistance. Instead, in 2020, for every 100 families in poverty nationwide, only 21 received TANF cash assistance — down from 68 families in 1996. At an economically precarious time for families, this “TANF-to-poverty ratio” (TPR) is the lowest in the program’s history.”



“Access to TANF largely depends on where a family lives. There are no federal minimum eligibility standards and states have the power to erect barriers or create pathways to TANF cash assistance. This has led to wide variation among state TPRs, which range from 71 in California and Vermont to just four in Arkansas, Louisiana, Mississippi, and Texas.”

“These geographic disparities reflect racial inequities in TANF: compared to white children, Latinx children are somewhat more likely, and Black children even more likely, to live in states with the lowest TPRs. The history of racism in cash assistance programs in the United States lives on in policies that impact access to TANF today, from strict work requirements and time limits to invasive behavioral requirements, exacerbating the barriers Black and Latinx families still face to economic stability.

“More income during early childhood can improve children’s futures, research continues to find. But TANF’s limited reach means that when families hit hard times because they have lost a job, are fleeing domestic violence, or are facing a health or mental health crisis, they may have no access to cash assistance. Blocking families from assistance to meet their basic needs often puts them on a downward spiral, making it even harder to get back on their feet, and may have long-term negative consequences for children.

“State and federal policymakers can change these trends. States should remove barriers to assistance and ease policies that cut off families who are still struggling. At the federal level, policymakers should hold states accountable for serving families experiencing poverty and provide the resources to help them do so.”

Center on Budget and Policy Priorities, <https://www.cbpp.org/research/family-income-support/tanf-reaching-few-poor-families>

Earned Income Tax Credit (EITC)

According to the IRS, “the Earned Income Tax Credit (EITC) helps low- to moderate-income workers and families get a tax break. If you qualify, you can use the credit to reduce the taxes you owe – and maybe increase your refund.”^{xli} As of December 2022, more than 31 million individuals and families received an EITC in the United States (Table 37). The average amount received was \$2,043, and the total amount received by all eligible individuals and families was approximately \$64 billion.^{xlii} In North Carolina there were approximately 1 million EITC claims with an average claim of \$2,094 per individual or family.

Earned Income Tax Credit Report (December 2022, for Calendar Year 2021)

Source: Internal Revenue Service

	Number of EITC Claims	Total EITC Amount	Average EITC Amount
United States	31 million	\$64 billion	\$2,043
North Carolina	1 million	\$2.3 billion	\$2,094

Table 37: EITC (December 2022)

The 2022 standard Federal EITC 2022 Income Limits state that a single individual with one child can receive a credit of up to \$3,733 as long as earnings do not exceed \$43,492 per year.^{xliii} A single parent with two children can receive a maximum credit of \$6,164 as long as earnings do not exceed \$49,399. The income limits to earn an EITC far exceed the federal poverty levels; the federal poverty level for a family of two is \$19,720 and \$24,860 for a family of three.

Tax Year 2022 (Current Tax Year)

Find the maximum AGI, investment income and credit amounts for tax year 2022.

Children or Relatives Claimed	Filing as Single, Head of Household, or Widowed	Filing as Married Filing Jointly
Zero	\$16,480	\$22,610
One	\$43,492	\$49,622
Two	\$49,399	\$55,529
Three	\$53,057	\$59,187

Investment income limit: \$10,300 or less

Maximum Credit Amounts

The maximum amount of credit:

- No qualifying children: \$560
- 1 qualifying child: \$3,733
- 2 qualifying children: \$6,164
- 3 or more qualifying children: \$6,935

In 2022, 28 states and the District of Columbia offer an EITC; North Carolina eliminated its state EITC in 2014.^{xliv}

Earned Income Tax Credits (EITC)

“Earned income tax credits (EITC) are a common strategy used by governments to bolster the economic security of low-income working families, especially those with children. By reducing personal income tax liability, low-income tax filers retain more of their income. The amount of a tax credit is determined mostly by income level, marital status, and number of dependent children.

Quick Facts

- EITCs are a tax benefit designed to help low- to moderate-income working people.
- The federal government, 30 states, the District of Columbia, Guam, Puerto Rico, and some municipalities have EITCs.
- The federal EITC has been in place since 1975, and Rhode Island enacted the first state EITC in 1986.
- More than 25 million eligible tax filers received almost \$63 billion in federal EITC during the 2019 tax year.
- The average EITC amount received per tax filer was \$2,476 during the 2019 tax year.
- Workers must file tax returns to receive the credit.
- An estimated 20 percent of eligible workers do not claim EITC. To improve participation rates, the IRS sponsors an annual awareness day.”

National Conference of State Legislatures, <https://www.ncsl.org/research/labor-and-employment/earned-income-tax-credits-for-working-families.aspx>

Financial Health and Well-being

Asset Poverty and Liquid Asset Poverty

According to data retrieved from the [Prosperity Now Scorecard](#), in the United States and North Carolina, 19 percent of households live in asset poverty, which means that without income these households would not be able to survive at the poverty level for three months. In Alexander, Catawba, and Iredell Counties, 20, 17, and 18 percent of households, respectively, live in asset poverty.

The liquid asset poverty rate for households in the United States is 27 percent, 30 percent in North Carolina, Catawba, and Iredell Counties, and 19 percent in Alexander County. A household that lives in liquid asset poverty means they do not have enough liquid assets (those that can be converted to cash in a short amount of time) to survive at the poverty level for three months if their income is interrupted.

Financial Assets and Income (2021)*Source: Prosperity Now Scorecard*

	United States	North Carolina	Alexander County	Catawba County	Iredell County
Asset Poverty Rate	19%	19%	20%	17%	18%
<i>Percentage of households without sufficient net worth to subsist at the poverty level for three months in the absence of income.</i>					
Liquid Asset Poverty Rate	27%	30%	19%	30%	30%
<i>Percentage of households without sufficient liquid assets to subsist at the poverty level for three months in the absence of income.</i>					

Table 38: Asset and Liquid Asset Poverty Rate (2021)*Unbanked and Underbanked*

Based on data reported by the [Prosperity Now Scorecard](#), in the United States and North Carolina, 5 and 3 percent of households, respectively, are unbanked, which indicates that no one in the household has a checking or savings account. In Alexander and Iredell Counties, 5 percent of the households are underbanked, and in Catawba County 4 percent are underbanked.

Households that are considered underbanked have access to a checking and/or saving account; however, in the past 12 months they have made use of “non-bank money orders, non-bank check-cashing services, non-bank remittances, payday loans, rent-to-own services, pawn shops or refund anticipation loans (RALs).”^{xlv} The underbanked rate for households in the United States, North Carolina and Iredell County is 14 percent, and in Alexander and Catawba Counties, the rate is 12 percent.

Financial Assets and Income (2021)*Source: Prosperity Now Scorecard*

	United States	North Carolina	Alexander County	Catawba County	Iredell County
Unbanked Rate	5%	3%	5%	4%	5%
<i>Percentage of households with neither a checking nor savings account.</i>					
Underbanked Rate	14%	14%	12%	12%	14%
<i>Percentage of households that have a checking and/or a savings account and have used non-bank money orders, non-bank check-cashing services, non-bank remittances, payday loans, rent-to-own services, pawn shops, or refund anticipation loans (RALs) in the past 12 months.^{xlvi}</i>					

Table 39: Unbanked and Underbanked Rate (2021)

What is the Scorecard?

“The Prosperity Now Scorecard is a comprehensive resource featuring data on family financial health and policy recommendations to help put all U.S. households on a path to prosperity. The Scorecard equips advocates, policymakers, and practitioners with national, state and local data to jump-start a conversation about solutions and policies that put households on stronger financial footing across five issue areas: Financial Assets & Income; Businesses & Jobs; Homeownership & Housing; Health Care and Education.

“The Scorecard assesses all states on their relative ability to provide opportunities for residents to build and retain financial stability and wealth. The state outcome rankings are a measure of financial prosperity and how that prosperity is shared and safeguarded. The Scorecard also ranks the states on racial disparities—the gaps in 26 outcome measures between White residents and residents of color—and factors this into a state’s overall performance. Prosperity Now is increasing its focus on racial economic inequality because, as the data illustrates, structural inequality in the United States means that race and ethnicity have an outsized impact on economic well-being. Black, Latino, Native American, Native Hawaiian and Pacific Islander people fare worse across all Scorecard outcomes and issues.

“The Scorecard also separately assesses states on the strength of 29 policies to expand economic opportunity. Taken together, these 29 policies provide a comprehensive view of what states can do to help residents build and protect wealth in the issue areas described above. Unlike the outcome measures, the strength of states’ policies are assessed on fixed criteria arrived at through consultation with issue experts and Prosperity Now’s own knowledge of policies that are promising, proven or effective in helping families build and protect financial stability and wealth.

“The Scorecard also offers information at the local level—city, county, congressional district, tribal area and metro areas—on up to 33 measures.”

Prosperity Now Scorecard, <https://scorecard.prosperitynow.org/>

Economic Features and Trends

United States

While in 2022, the United States weathered supply chain issues due to the Russia-Ukraine war and China's previous zero COVID-19 tolerance, not to mention continued economic waves from the COVID-19 pandemic, 2023 is expected to be a "Slowcession, where growth grinds to a near halt but a full economic downturn is narrowly avoided."^{xlvii} According to Moody's Analytics chief economist Mark Zandi, "under almost any scenario, the economy is set to have a difficult 2023," but "inflation is quickly moderating, and the economy's fundamentals are sound."^{xlviii} In the scenario of a "Slowcession," a term coined by economist Cristian deRitis, the unemployment rate would increase, but not to a staggering level. JP Morgan expects a "mild recession by the end of next year as higher interest rates slow demand for goods, services and the workers to produce them."^{xlix} However, "relatively healthy consumer and business balance sheets" should keep the economy afloat.ⁱ There is general consensus across the board. Bloomberg puts the chance of a 2023 recession at 70 percent.ⁱⁱ The United States Chamber of Commerce itself states that the "U.S. will experience a mild but short recession in the middle of 2023 caused by consumer and business spending falling because of rising interest rates," as well as the depletion of savings built by Americans during the pandemic as inflation now rises.ⁱⁱⁱ As the fear of a recession led to plummeting stocks and widespread tech layoffs in 2022, these projections, which are less severe than some had thought, may come as a relief to many Americans.

North Carolina

Despite a Slowcession forecasted for the United States as a whole, North Carolina economic forecasters have slightly more encouraging expectations for the state. Dr. John Connaughton, Director of the North Carolina Economic Forecast, expected the changes in the economy to play out slowly, with an understanding of how the economy unfolds unclear until the end of 2023.ⁱⁱⁱⁱ Despite the recession expected to follow the Fed's increase in interest rates to combat inflation, Dr. Mark Steckbeck, Director of the Truist Business Scholars program at Campbell University, believes that North Carolina's unemployment rates will stay low, with Anthony Copeland, former North Carolina Secretary of Commerce, noting that the state's former seasons of growth may make this possible.^{lv} Of note, the State's Savings Reserve, or "rainy day fund," has nearly doubled in size, growing from 7.6 percent of the state's general fund operating budget in 2021-22, landing at 14.8 percent in 2022-23, giving more breathing room to the economy.^{lv} Moreover, \$1 billion each have been allocated to the establishment of a "Stabilization and Inflation Reserve to account for cost overruns due to inflationary forces for various state projects" and the "addition of \$1 billion to the State Emergency and Disaster Response Fund to address natural disaster emergencies and to take proactive steps to reduce the effects of future emergencies."^{lvi}

Some parts of North Carolina will fare better than others. For instance, the Raleigh and Durham areas are expected to be among the nation's economic leaders in 2023.^{lvii} However, Patrick Woodie, President and Chief Executive Officer of the North Carolina Rural Center, notes that many residents desire a slower life in connection with nature, which "has led to the first time in the state's history where the population is equally divided among urban/suburban spots and rural areas. This shows the potential for growth across the state, not just pocketed areas."^{lviii} North Carolina has also experienced an influx of new residents,

which may buoy the economy and is expected to ease the impact of a possible Slowcession.^{lix} Finally, even with an increase of new residents and expected economic cushions in North Carolina compared with the nation at-large, the North Carolina Department of Commerce notes that, “the labor market has eased slightly in recent months, but hiring conditions remain historically tight, and demographic trends suggest labor shortages may become a routine feature of life during future periods of economic growth.”^{lx} *U.S. News* ranks North Carolina #13 in terms of overall living desirability for states in the United States.^{lxi} It ranks as #7 for both Education and Fiscal Stability, #17 for Economy, and #28 for Opportunity.^{lxii}

Alexander County

The unemployment rate in Alexander County is 3.2 percent, which is lower than North Carolina’s 3.7 percent as of January 2023.^{lxiii} The North Carolina Department of Commerce has developed a Tier designation system for its 100 Counties. The “40 most distressed counties are designated as Tier 1, the next 40 as Tier 2 and the 20 least distressed as Tier 3,” with Alexander and Catawba Counties ranking in Tier 2 and Iredell County in Tier 3.^{lxiv} Alexander County’s “key industries include furniture manufacturing and plastics/rubber products,” as well as the production of wood.^{lxv} *U.S. News* ranks Alexander County’s Business Growth Rate at 5.6 percent, compared with North Carolina’s 8.9 percent, and gives the county an overall score of 46, compared to the state median of 40 and U.S. median of 47. Additional scores for Alexander County include 44/100 for the Economy, 57/100 for Community Vitality, and 66/100 for Infrastructure.^{lxvi}

The table below lists the top industries and wages in Alexander County.

Alexander County Industries and Occupations	
Source: 2021 ACS 5-Year Estimates	
Top Industries	Number of Employees
Manufacturing	4,378
Retail Trade	2,084
Health Care and Social Assistance	1,902
Top Industries by Median Earnings	Wages
Finance and Insurance	\$61,078
Wholesale Trade	\$43,824
Real Estate and Rental and Leasing	\$43,017
The Most Common Jobs by Occupation	Number of Employees
Production Occupations	3,145
Office and Administrative Support Occupations	1,628
Management Occupations	1,528
Top Occupations by Median Earnings	Wages
Life, Physical, and Social Science Occupations	\$79,224
Computer and Mathematical Occupations	\$71,944
Firefighting and Prevention, and Other Protective Service Workers Including Supervisors	\$70,625

Table 40: Alexander County Industries and Occupations (2021 ACS 5-Year Estimates)

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The table below lists the company names, employee numbers, and related industries for Alexander County's top 25 employers.^{lxvii}

Alexander County Top 25 Employers (2022, Q2)			
Source: North Carolina Department of Commerce			
Employer	Industry	Class	Employment Range
Alexander County Schools	Educational Services	Public Sector	500-999
Craftmaster Furniture	Manufacturing	Private Sector	500-999
The Mitchell Gold Co.	Manufacturing	Private Sector	500-999
Alexander County	Public Administration	Public Sector	250-499
Dept. of Public Safety	Public Administration	Public Sector	250-499
Hancock & Moore LLC	Manufacturing	Private Sector	250-499
Schneider Mills Inc.	Manufacturing	Private Sector	250-499
Wal-Mart Associates Inc.	Retail Trade	Private Sector	100-249
Huntington House Inc.	Manufacturing	Private Sector	100-249
Shurtape Technologies LLC	Manufacturing	Private Sector	100-249
Taylor King Furniture Inc.	Manufacturing	Private Sector	100-249
Brigette's Staffing Inc.	Administrative and Support and Waste Management and Remediation Services	Private Sector	100-249
Valley Nursing Center	Health Care and Social Assistance	Private Sector	100-249
Medi Home Health & Hospice of NC	Health Care and Social Assistance	Private Sector	100-249
Paladin Industries Inc.	Wholesale Trade	Private Sector	100-249
La-Z-Boy Casegoods Inc.	Manufacturing	Private Sector	100-249
Amteck LLC	Construction	Private Sector	100-249
Royale Comfort Seating Inc.	Manufacturing	Private Sector	100-249
Industrial Timber LLC	Manufacturing	Private Sector	50-99
Paragon Films Inc.	Manufacturing	Private Sector	50-99
Precision Materials LLC	Manufacturing	Private Sector	50-99
McDonalds Restaurant	Accommodation and Food Services	Private Sector	50-99
Carpenter Co.	Manufacturing	Private Sector	50-99
Food Lion	Retail Trade	Private Sector	50-99
Mays Meats Inc.	Wholesale Trade	Private Sector	50-99

Table 41: Alexander County Top 25 Employers (2022, Q2)

Catawba County

The unemployment rate in Catawba County is 3.4 percent, which is lower than North Carolina's 3.7 percent as of January 2023.^{lxviii} *U.S. News and World Report*, previously mentioned, ranked Hickory, a city in Catawba County, "as 3rd for Best Places to Live in NC, 31st for Best Places to Live in the U.S., 3rd for Best Places to Retire in the U.S., and one of the Top Ten Best Places to Live Near the Mountains in the U.S."^{lxix} To prepare their students "for viable and sustainable careers throughout their lifetime," Catawba County's K-64 (kindergarten through retirement) initiative was developed, with partnerships with schools, colleges, businesses, the county government, and more.^{lxx} This "joint educational – economic development initiative [...] aims to prepare students of all ages with the skills needed to compete in the global economy with a focus on six priority areas: 1-to-world technology (the idea that a personal electronic device allows students access to technology and the internet from any location), character development, tech-savvy educators, work-based learning, employer engagement, and career adaptability" with an aim of "aligning local talent with available jobs."^{lxxi} While *U.S. News* ranks Catawba County's Business Growth Rate at 7.1

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percent, lower than the state's 8.9 percent. Catawba County's overall score was 49; additional scores included 52/100 for the Economy, 61/100 for Community Vitality, and 70/100 for Infrastructure.^{lxxii}

The table below lists the top industries and wages in Catawba County.

Catawba County Industries and Occupations	
<i>Source: 2021 ACS 5-Year Estimates</i>	
Top Industries	Number of Employees
Manufacturing	20,900
Health Care and Social Assistance	8,572
Retail Trade	8,403
Top Industries by Median Earnings	Wages
Utilities	\$74,079
Mining, Quarrying, and Oil and Gas Extraction	\$65,403
Finance and Insurance	\$60,592
The Most Common Jobs by Occupation	Number of Employees
Production Occupations	12,106
Management Occupations	7,913
Office and Administrative Support Occupations	7,829
Top Occupations by Median Earnings	Wages
Health Diagnosing and Treating Practitioners and Other Technical Occupations	\$72,661
Computer and Mathematical Occupations	\$72,067
Management Occupations	\$66,875

Table 42: Catawba County Industries and Occupations (2021 ACS 5-Year Estimates)

The table below lists the company names, employee numbers, and related industries for Catawba County's top 25 employers.^{lxxiii}

Catawba County Top 25 Employers (2022, Q2)			
<i>Source: North Carolina Department of Commerce</i>			
Employer	Industry	Class	Employment Range
Catawba Valley Medical Center	Health Care and Social Assistance	Public Sector	1000+
Target Stores Div.	Transportation and Warehousing	Private Sector	1000+
Corning Optical Communications LLC	Manufacturing	Private Sector	1000+
Commscope	Manufacturing	Private Sector	1000+
Catawba County Schools	Educational Services	Public Sector	1000+
Human Resources Dept.	Public Administration	Public Sector	1000+
Wal-Mart Associates Inc.	Retail Trade	Private Sector	1000+
DLP Partner Frye LLC	Health Care and Social Assistance	Private Sector	1000+
GKN Driveline Newton LLC	Manufacturing	Private Sector	500-999
Pierre Foods Inc.	Manufacturing	Private Sector	500-999
Sutter Street Manufacturing Inc.	Manufacturing	Private Sector	500-999
Performance Food Group Inc.	Wholesale Trade	Private Sector	500-999
Apple Computer Inc.	Retail Trade	Private Sector	500-999
Century Furniture LLC	Manufacturing	Private Sector	500-999
Catawba Valley Community College	Educational Services	Public Sector	500-999
Bassett Furniture Industries of NC	Manufacturing	Private Sector	500-999
Sherrill Furniture Company (A Corp.)	Manufacturing	Private Sector	500-999
Shurtape Technologies LLC	Manufacturing	Private Sector	500-999
City Of Hickory	Public Administration	Public Sector	500-999
McCreary Modern Inc	Manufacturing	Private Sector	500-999
Advisor HR Professionals	Administrative and Support and Waste Management and Remediation Services	Private Sector	500-999

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Catawba County Top 25 Employers (2022, Q2)

Source: North Carolina Department of Commerce

Employer	Industry	Class	Employment Range
Prysmian Communications Cables	Manufacturing	Private Sector	500-999
Westrock Services LLC	Manufacturing	Private Sector	500-999
Lee Industries Inc.	Manufacturing	Private Sector	500-999
Food Lion	Retail Trade	Private Sector	500-999

Table 43: Catawba County Top 25 Employers (2022, Q2)

Iredell County

The unemployment rate in Iredell County is 3.5 percent, which is lower than North Carolina's 3.7 percent as of January 2023.^{lxxiv} According to the county itself, the region contains more than 1.1 million skilled workers, with 53 percent of the county's workforce made up of commuters from surrounding counties.^{lxxv} Lowe's Company Inc.'s headquarters has been in Iredell County for 20 years, and its presence continues to bring stability and growth to the Mooresville area, with Lowe's vendors drawing near and two new hotels opening near the Lowe's corporate campus in 2021.^{lxxvi} Corvid Technologies' 2018 move to the area brought another economic boost.^{lxxvii} In September 2020, Fitt USA announced that it would be moving its headquarters to Mooresville, as well, creating 144 new jobs and investing \$25.6 million to build a 120,000 square foot facility.^{lxxviii} An Iredell County company, DemandZEN, made *Inc. Magazine's* 2021 Best Workplaces, with only 428 other companies listed nationwide.^{lxxix} While *U.S. News* ranks Iredell County's Business Growth Rate at 9.3 percent, higher than the state's 8.9 percent. Iredell County's overall score was 57; additional scores included 65/100 for the Economy, 69/100 for Community Vitality, and 66/100 for Infrastructure.^{lxxx}

The table below lists the top industries and wages in Iredell County.

Iredell County Industries and Occupations

Source: 2021 ACS 5-Year Estimates

Top Industries	Number of Employees
Manufacturing	15,684
Retail Trade	13,212
Health Care and Social Assistance	11,025
Top Industries by Median Earnings	Wages
Management of Companies and Enterprises	\$108,750
Finance and Insurance	\$80,556
Utilities	\$78,839
The Most Common Jobs by Occupation	Number of Employees
Management Occupations	10,843
Sales and Related Occupations	10,746
Office and Administrative Support Occupations	9,882
Top Occupations by Median Earnings	Wages
Management Occupations	\$80,276
Architecture and Engineering Occupations	\$79,277
Computer and Mathematical Occupations	\$74,981

Table 44: Iredell County Industries and Occupations (2021 ACS 5-Year Estimates)

The table below lists the company names, employee numbers, and related industries for Iredell County's top 25 employers.^{lxxxi}

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Iredell County Top 25 Employers (2022, Q2)

Source: North Carolina Department of Commerce

Employer	Industry	Class	Employment Range
Lowe's Companies Inc.	Management of Companies and Enterprises	Private Sector	1000+
Iredell-Statesville Schools	Educational Services	Public Sector	1000+
Wal-Mart Associates Inc.	Retail Trade	Private Sector	1000+
Iredell Memorial Hospital	Health Care and Social Assistance	Public Sector	1000+
Lowes Home Centers Inc.	Retail Trade	Private Sector	1000+
Iredell County	Public Administration	Public Sector	1000+
Piedmont Health Care PA	Health Care and Social Assistance	Private Sector	500-999
Food Lion	Retail Trade	Private Sector	500-999
Mooreville Graded School	Educational Services	Public Sector	500-999
NGK Ceramics USA Inc.	Manufacturing	Private Sector	500-999
Bestco Inc.	Manufacturing	Private Sector	500-999
Kewaunee Scientific Corp.	Manufacturing	Private Sector	500-999
Town Of Mooreville	Public Administration	Public Sector	500-999
Mooreville Hospital Management LLC	Health Care and Social Assistance	Private Sector	500-999
City of Statesville	Public Administration	Public Sector	250-499
Power Home Solar LLC	Construction	Private Sector	250-499
Mitchell Community College HR Dept.	Educational Services	Public Sector	250-499
Penske Racing South Inc.	Arts, Entertainment, and Recreation	Private Sector	250-499
Pactiv LLC	Manufacturing	Private Sector	250-499
Carolina Beverage Group	Manufacturing	Private Sector	250-499
Randy Marion Chrysler Dodge Jeep RA	Retail Trade	Private Sector	250-499
Davis Regional Medical Center	Health Care and Social Assistance	Private Sector	250-499
Curo Health Services LLC	Health Care and Social Assistance	Private Sector	250-499
Badger Sportswear	Manufacturing	Private Sector	250-499
Cox Automotive Corporate Services	Wholesale Trade	Private Sector	250-499

Table 45: Iredell County Top 25 Employers (2022, Q2)

Housing and Homelessness

Housing Ownership and Characteristics

In the United States and North Carolina, approximately two-thirds of all occupied housing units are owner-occupied, 64.6 and 65.9 percent, respectively (Table 46). In Alexander, Catawba, and Iredell Counties, of the occupied housing units, 18.6, 29.6, and 28.2 percent, respectively, are renter-occupied, and 81.4, 70.4, and 71.8 percent, correspondingly, are owner-occupied.

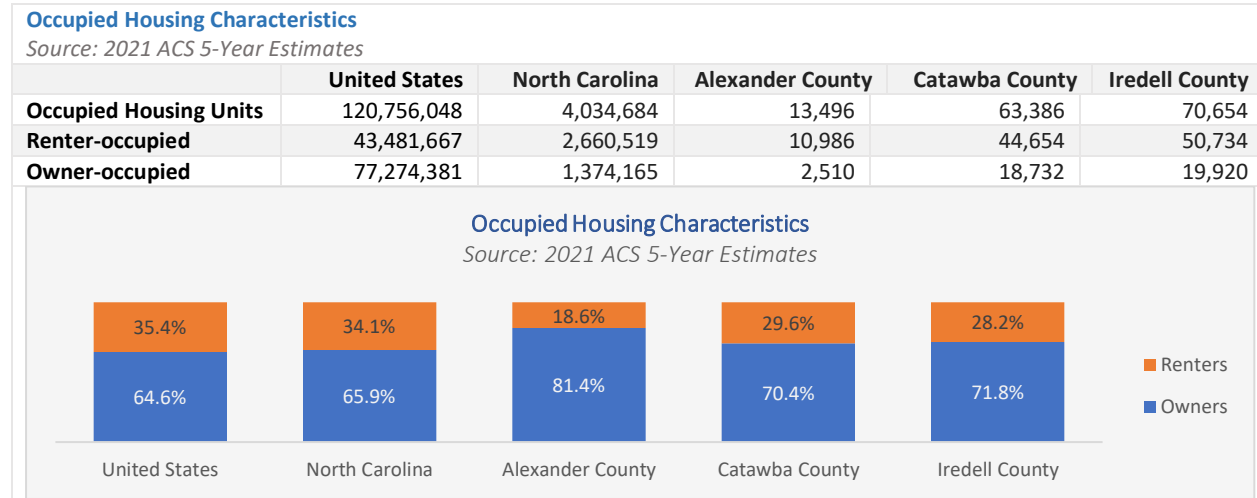


Table 46: Occupied Housing Characteristic (2021 ACS 5-Year Estimates)

House Heating Fuel

In the United States just below half of all occupied housing units are heated using gas, 47.5 percent, and 39.8 percent are heated with electricity (Table 47, Figure 28). However, in North Carolina, Alexander, Catawba, and Iredell Counties, 24.7, 3.7, 18.8, and 30.4 percent of occupied housing are heated using gas, respectively, and 64, 79.7, 73.2, and 61.4 percent use electricity, correspondingly.

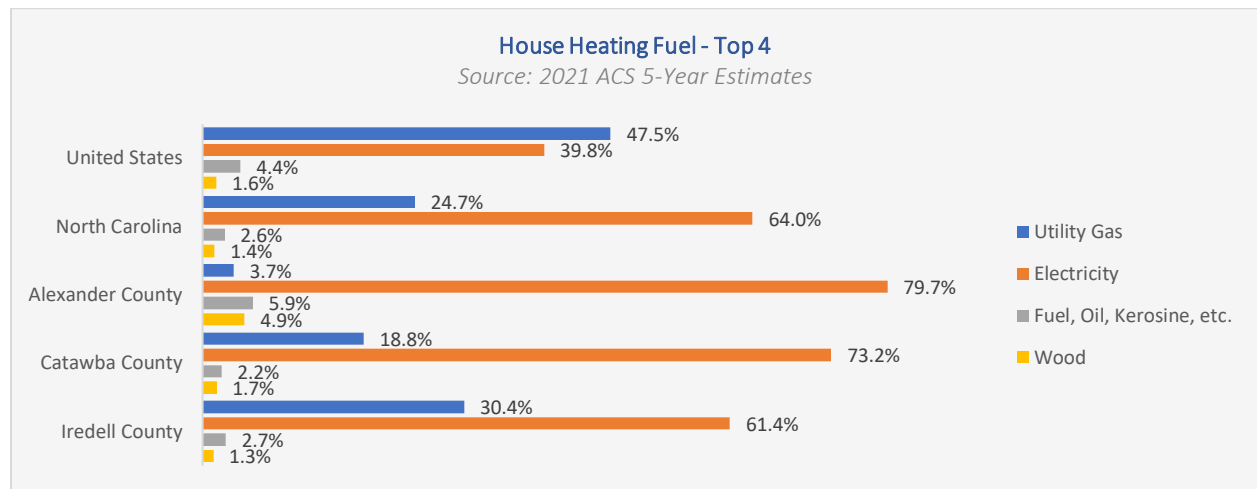


Figure 28: House Heating Fuel (2021 ACS 5-Year Estimates)

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Housing and Homelessness

House Heating Fuel

Source: 2021 ACS 5-Year Estimates

	Utility Gas	Electricity	Fuel, Oil, Kerosine, etc.	Wood	No Fuel Used	Other Fuel	Solar Energy	Coal or Coke
United States	47.5%	39.8%	4.4%	1.6%	1.2%	0.5%	0.2%	0.1%
North Carolina	24.7%	64.0%	2.6%	1.4%	0.5%	0.1%	0.1%	0.0%
Alexander County	3.7%	79.7%	5.9%	4.9%	0.8%	0.1%	0.0%	0.0%
Catawba County	18.8%	73.2%	2.2%	1.7%	0.6%	0.3%	0.1%	0.0%
Iredell County	30.4%	61.4%	2.7%	1.3%	0.5%	0.2%	0.0%	0.0%

Table 47: House Heating Fuel (2021 ACS 5-Year Estimates)

Gas and electric heating are two common home heating solutions, with the use of both presenting pros and cons. According to *Forbes*, “cost, maintenance, efficiency, lifespan and safety” are key considerations in choosing whether to use a gas or electric heater to heat one’s home. Run on natural gas or propane gas, gas heaters circulate heat indoors and expel “dangerous gases” like carbon monoxide outside. Gas heaters can heat up quickly and are generally cost-effective, but they do require buried gas lines, can produce potentially harmful gases, and have a shorter lifespan of 15-20 years. Gas heaters burn hydrocarbons, making them less clean for the environment than electric heaters. Homes heated by electricity circulate heat produced by electric coils. With an average cost of gas heater installments at \$5,500, electric heaters are cheaper to install at an average of \$3,500 as most homes already run on electricity. Electric heaters do not require extensive hookups and can last 20-30 years, yet they are slower to produce heat and can be more expensive over time, “depending on local energy costs.”

According to *The Washington Post* the use of home heating is largely split regionally with the South using more electricity due to government funding and temperate weather, the Midwest using natural gas with propane in rural areas, and the Northeast often using fuel oil. *The New York Times* recommends using heat pumps, or “two-way air conditioners,” which use “half as much energy on average” as electric heaters, to combat the climate crisis. In warm weather, heat pumps draw heat out of a room and replace it with cool air, and in cold weather, they bring outside heat inside, efficiently circulating heat without the need to create it.

Forbes, Gas Heater vs. Electric Heater: Differences, Pros and Cons. <https://www.forbes.com/home-improvement/hvac/gas-heater-vs-electric-heater/>

Washington Post, U.S. Home Heating is Fractured in Surprising Ways. <https://www.washingtonpost.com/climate-environment/interactive/2023/home-electrification-heat-pumps-gas-furnace/>

The New York Times, A Heat Pump Might Be Right for Your Home. Here’s Everything to Know. <https://www.nytimes.com/wirecutter/guides/heat-pump-buying-guide/>

Housing Facilities/Services

In North Carolina more than 11,700 homes lack plumbing facilities (0.3 percent of total homes), and more than 24,000 lack kitchen facilities (0.6 percent of total homes) (Table 48). In the I-CARE service area counties, a total of 474 homes lack plumbing facilities and 690 lack kitchen facilities. The proportion of homes lacking plumbing or kitchen facilities is lowest in Alexander County (0.1 percent of all homes) and highest in Catawba County (0.5 and 0.6 percent).

Housing Facilities/Services

Source: 2021 ACS 5-Year Estimates

	Lacking Complete Plumbing Facilities		Lacking Complete Kitchen Facilities	
	Number	Percent	Number	Percent
United States	474,563	0.4%	1,013,832	0.8%
North Carolina	11,790	0.3%	24,526	0.6%
Alexander County	17	0.1%	10	0.1%
Catawba County	319	0.5%	372	0.6%
Iredell County	138	0.2%	308	0.4%

Table 48: Housing Facilities/Services (2021 ACS 5-Year Estimates)

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Housing and Homelessness

Energy Burden

According to the [Department of Energy \(DOE\)](#), the energy burden (percentage of gross household income spent on energy) of low-income households in the United States is 8.6 percent, compared with 3 percent for non-low-income households.^{lxxxii}

Based on data collected from the DOE's [Low-Income Energy Affordability Data \(LEAD\)](#) tool, households in the United States and North Carolina, earning 0 to 100 percent of Federal Poverty Level (FPL) spend 18 percent of their income on energy (Figure 29). Households earning 100-150 percent of the FPL spend approximately 8 percent of their income on energy, and those earning 150-200 percent of the FPL spend approximately 6 percent of their income on energy. The average annual energy cost in the United States is \$1,842 and \$1,844 in North Carolina.

Households in the I-CARE service area earning less than 100 percent of the FPL spend marginally less of their income on energy, 16 percent in Alexander County, 13 percent in Catawba County, and 17 in Iredell County. The average annual energy costs in the service area counties are \$1,840 in Alexander County, \$1,415 in Catawba County, and \$1,892 in Iredell County.

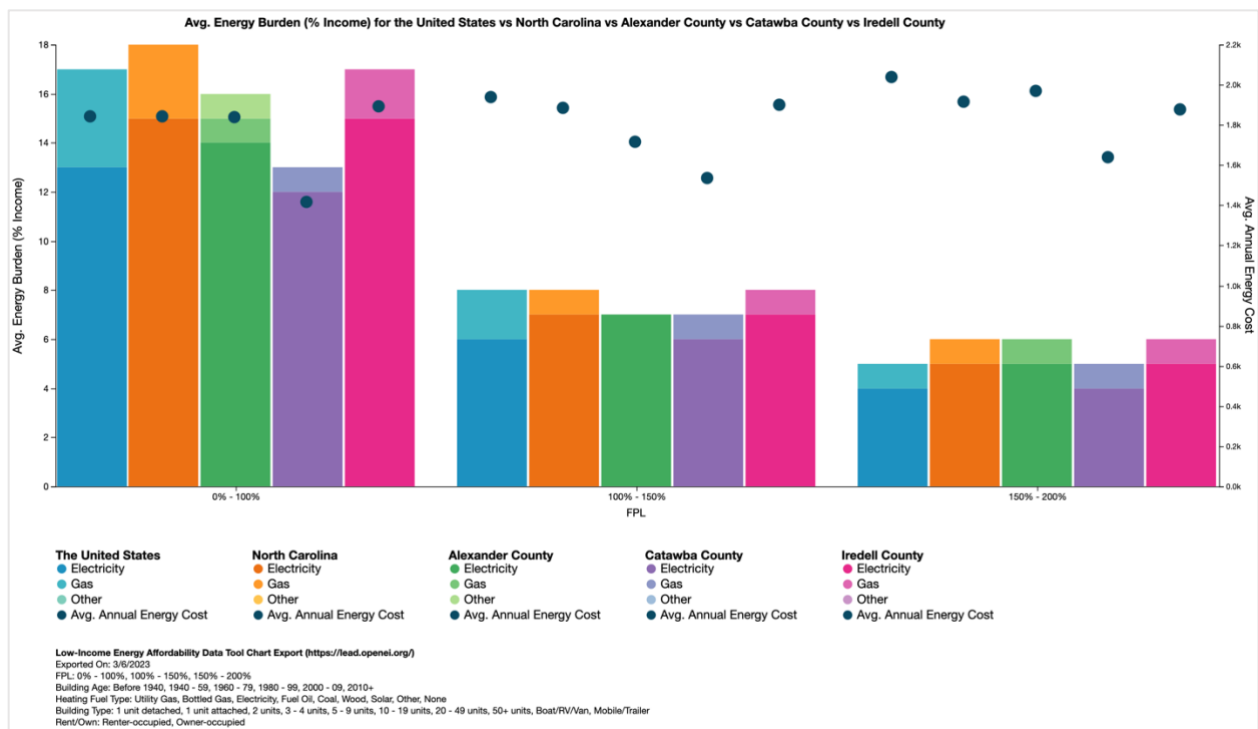


Figure 29: Average Energy Burden (2022)

Affordable Housing and Housing Shortage

Based on the [National Low-Income Housing Coalition](#) (NLIHC) April 2023 [The Gap: A Shortage of Affordable Homes](#) report (using 2020 data), there is no single state in the United States that has an adequate supply of affordable rental homes for the lowest income renters. Nationwide, only 33 affordable and available rental homes exist for every 100 extremely low-income renter households.^{lxxxiii} The lack of affordable housing creates a cost burden for both renters and homeowners. “Cost burdened” is defined as spending more than 30 percent of one’s income on housing, and “severely cost burdened” as spending more than 50 percent of one’s income on housing.

In North Carolina 86 percent of renter households with extremely low income (30 percent of the area median income, or AMI) are cost burdened, and 69 percent are severely cost burdened.^{lxxxiv} Statewide there are only 44 affordable and available rental homes per 100 households at or below extremely low income.

Cost-Burdened Households

Based on U.S. Census data, in North Carolina, Alexander, Catawba, and Iredell Counties, 18.9, 14, 16, and 17 percent of owner-occupied households (with or without a mortgage), correspondingly, are cost-burdened, indicating 30 percent or more of household income is spent on housing. For renter-occupied households in North Carolina, Alexander, Catawba, and Iredell Counties, the estimates are higher; 43.2, 29.6, 31.4, and 37.6 percent, respectively, are cost-burdened (Figure 30).

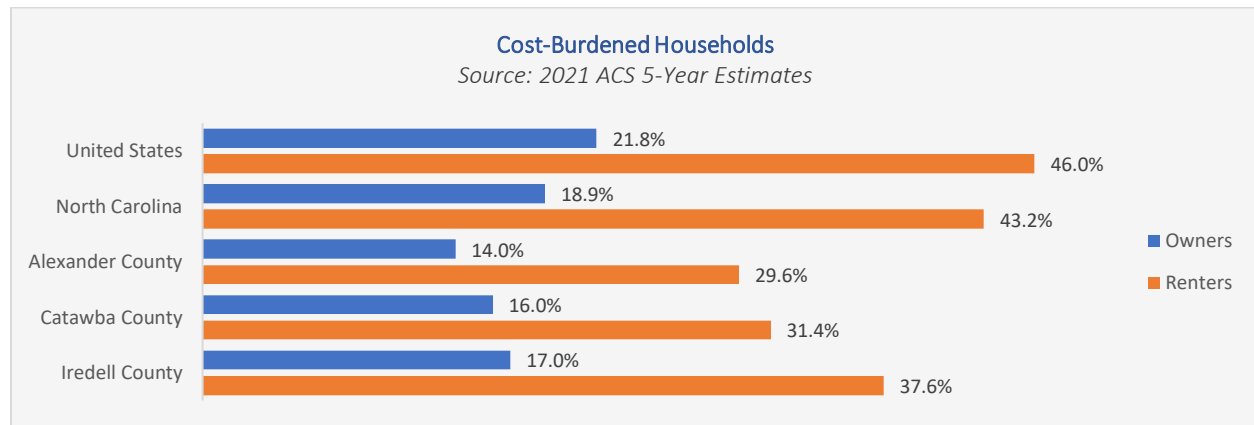


Figure 30: Cost-Burdened Households (2021 ACS 5-Year Estimates)

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Housing and Homelessness

Of owner-occupied households earning less than \$10,000 per year in the United States and North Carolina, 63.4 and 62.4, percent, correspondingly, are severely cost-burdened, meaning more than 50 percent of household income is spent on housing (Figure 31). In the I-CARE service area counties, between 53.5 and 58.2 percent of owner-occupied households earning less than \$10,000 per year are severely cost-burdened.

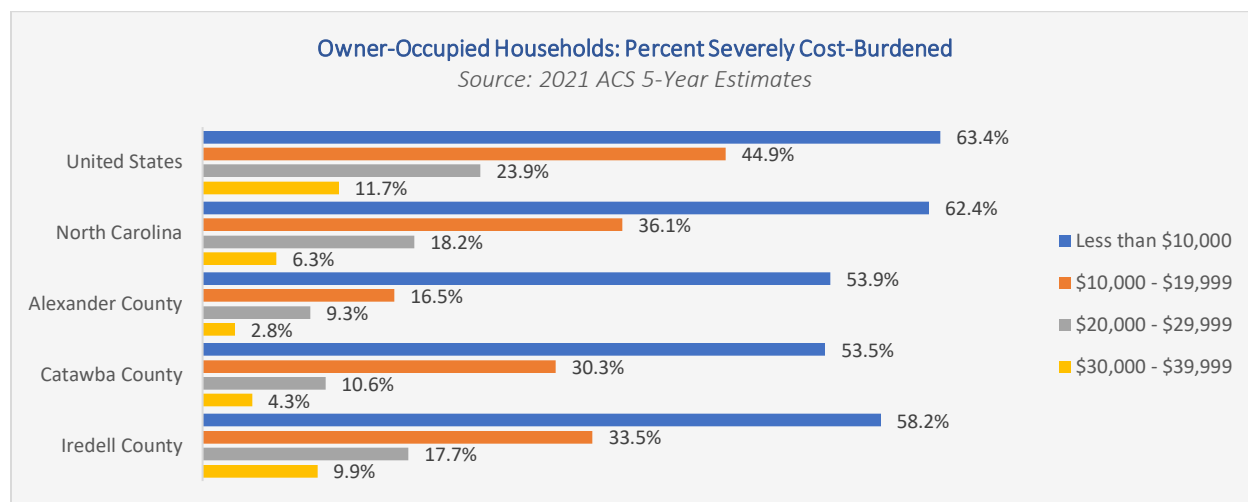


Figure 31: Owner-Occupied Households: Severely Cost-Burdened Households (2021 ACS 5-Year Estimates)

In the United States and North Carolina, the proportion of renter-occupied households earning less than \$10,000 per year who are considered severely cost-burdened (60.3 and 60.2 percent, respectively) is similar to the proportion for owner-occupied households (Figure 32). This is also true for Catawba and Iredell Counties, where 52.4 and 58.9 percent of renter-occupied households earning less than \$10,000 per year are considered severely cost-burdened. In Alexander County, however, almost four out of five renter-occupied households earning less than \$10,000 per year are considered severely cost burdened, 79.8 percent.

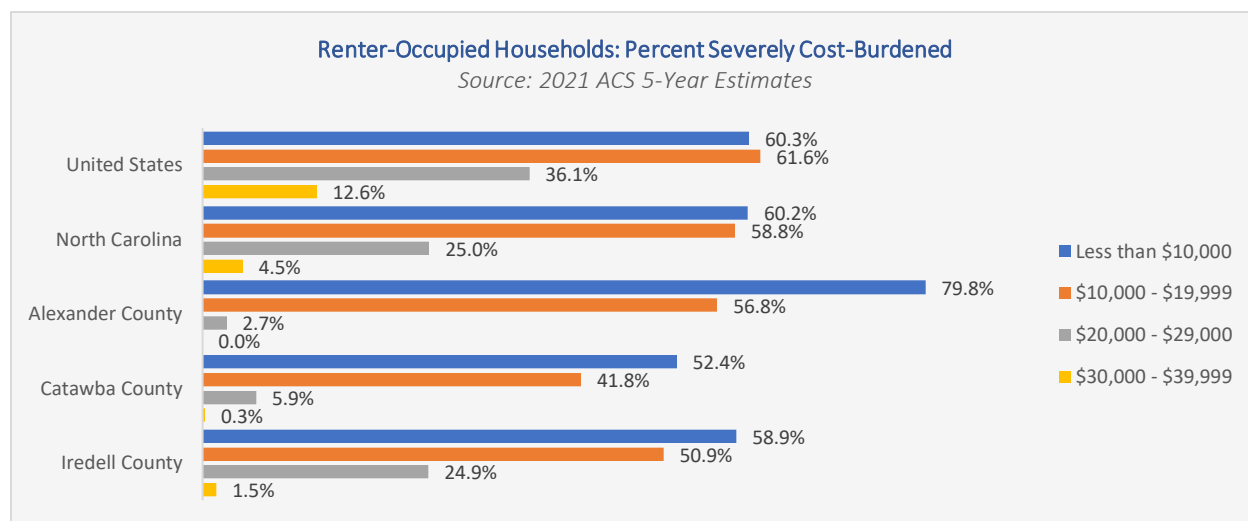


Figure 32: Renter-Occupied Households: Severely Cost-Burdened by Income (2021 ACS 5-Year Estimates)

Evictions and Foreclosures

Data on the number of evictions by state or county are difficult to obtain, for a variety of reasons. Data may not be collected or exist, or in some cases data are not accessible due to lack of standards or mandates to make data available to the public.^{lxxxv}

Based on a March 2021 article published by [Advisor Smith](#), North Carolina ranked 17th of all U.S. states with the highest percentage of renters at risk of eviction, 9.6 percent.^{lxxxvi} Statewide 16 percent of households were behind on rent payments, 1.1 percent less than the 17.1 percent of households behind on rent in the United States.

The [Eviction Lab](#) reports that in 2018 (most recent data available at the time of this study) there were approximately 176,000 eviction filings, of which 172 were in Alexander County, with 1,800 in Catawba and Iredell Counties. The rate of eviction filings per 100 renters in North Carolina was 11.7 percent; in Alexander, Catawba, and Iredell Counties, the rates were 4.5, 8.6, and 8.9 percent, respectively.

Eviction Data (2018)

Source: The Eviction Lab

	Eviction Filings			Households Threatened	
	Total	Per Day	Rate/100 Renters	Total	Rate/100 Renters
North Carolina	176,000	482	11.7%	124,000	8.3%
Alexander County	172	4.7	4.5%	147	3.8%
Catawba County	1,800	4.8	8.6%	1,400	6.7%
Iredell County	1,800	4.9	8.9%	1,400	6.8%

Note: Due to the lack of more recent data, eviction data should only be used to compare counties to one another.

Table 49: Eviction Data (2018)

As of March 16, 2023, there were more than 21,287 homes in foreclosure in North Carolina, of which there were 60 in Alexander County, 183 in Catawba County, and 238 in Iredell County.^{lxxxvii} The [North Carolina Judicial Branch](#) maintains annual records of home or business foreclosure filings. (It does not display the number of foreclosures actually granted.) During 2022 there were more than 11,600 civil cases with a home or business foreclosure filing in North Carolina, of which 392 were in the combined I-CARE service area (Table 50).

Civil Cases with A Home or Business Foreclosure Filing (2022)

Source: North Carolina Judicial Branch

County	North Carolina	Alexander County	Catawba County	Iredell County
All Months	11,674	37	164	191
January	566	3	2	7
February	901	2	14	14
March	1,081	3	9	12
April	996	2	13	15
May	1,040	3	19	14
June	1,023	1	16	21
July	912	3	14	16
August	1,141	4	12	18
September	1,055	6	14	16
October	1,039	1	20	21
November	935	4	13	18
December	985	5	18	19

Table 50: Home and Business Foreclosure Filings (2022)

Housing Mobility

“Housing mobility programs help low-income families with children use Housing Choice Vouchers to move to high-opportunity neighborhoods. These neighborhoods often have less poverty, better schools, less crime, and more resources such as grocery stores and parks, which together promote better health and life satisfaction for parents and children and improve children’s chances of succeeding in school and earning more as adults. Evidence suggests many low-income families would like to move to high-opportunity communities, but barriers — including high housing costs, discrimination, and a shortage of willing landlords — often prevent them from doing so. Mobility programs give families more choices about where they can live, which is an important complement to investing in historically disadvantaged communities to create new opportunities for residents.

“Mobility programs help families use Housing Choice Vouchers (HCVs) to access high-opportunity neighborhoods through:

- **services** such as housing search assistance, informative briefings about neighborhoods and their potential impact on children, and landlord recruitment in high-opportunity areas;
- **short-term financial assistance** to help with moving costs such as rental application fees or security deposits; and
- **administrative policies** such as basing housing subsidies on more accurate local market rents and providing families adequate time to search for housing.”

Center on Budget and Policy Priorities, <https://www.cbpp.org/research/housing/what-are-housing-mobility-programs-and-why-are-they-needed>

North Carolina Housing

- Housing Mobility Programs in the United States: <https://www.housingmobility.org/housing-mobility-programs-in-the-u-s-2022/>
- Just Shelter Community Resources: <https://justshelter.org/community-resources/>

Fair Market Rent

According to the 2021 [National Low-Income Housing Coalition](#) (NLIHC) report, 34 percent of North Carolina’s households were renters; the Fair Market Rent (FMR) for a two-bedroom home in North Carolina is \$997 per month. To be able to rent a two-bedroom home, without exceeding 30 percent of a person’s gross income as a recommended rule, a renter must earn \$39,897 annually; the median income for a renter in North Carolina is \$41,444.^{xxxviii} With a median income of \$41,444, a renter is able to afford \$1,036 for a home.

It is critical to point out that Head Start families do not earn wages typical of an average renter in the state. The NLIHC defines extremely low-income households as those with income at or below the Poverty Guidelines, or 30 percent of AMI (median family income for the area of residence), whichever is higher. For North Carolina this amount is \$24,378, which is \$482 less than the Poverty Guidelines level for a family of three (which is \$24,860). The rent that someone with “extremely low income” can afford is only \$609 per month, \$388 less than the fair market value of a two-bedroom home (Table 51).

In North Carolina, to afford the Fair Market Rent of a two-bedroom home, one must earn \$39,897; this is **\$4,557 more than the federal poverty level** for a family of five, which is \$35,140!

In Alexander, Catawba, and Iredell Counties, 20, 29, and 28 percent of total households are renters, respectively. Rent affordable by a household classified as “extremely low income” in Alexander and Catawba Counties is \$522 per month, \$202 less than the fair market value of a two-bedroom home; in Iredell County rent affordable by a household classified as “extremely low income” is \$680, \$245 less than the fair market value of a two-bedroom home. For those working a full-time job, earning minimum wage, affordable rent is not more than \$377 in North Carolina and the I-CARE service area, \$620 less than the

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fair market rental value of a two-bedroom home in North Carolina, \$347 less in Alexander and Catawba Counties, and \$548 less in Iredell County.

Rents affordable to those at median and extremely low-income levels are compared with the FMR of a two-bedroom home in Figure 33. The high cost of homeownership and rental units continue to make it difficult for low-income families to access affordable housing. **In Alexander and Catawba Counties, those earning minimum wage must work 77 hours per week to afford a two-bedroom home at the fair market rental value, and in Iredell County, 98 hours.**

Out of Reach: Fair Market Rental Values vs. Income (2021)

Source: National Low-Income Housing Coalition (NLIHC)

	North Carolina	Alexander County	Catawba County	Iredell County
% of Total Households that are Renters (2016-2020)	34%	20%	29%	28%
Two-Bedroom FMR	\$997	\$724	\$724	\$925
Income Needed to Afford 2-Bedroom FMR	\$39,897	\$28,960	\$28,960	\$37,000
Estimated Median Renter Household Income	\$41,444	\$38,979	\$41,377	\$44,223
Rent Affordable at Median Renter Household Income	\$1,036	\$974	\$1,034	\$1,106
30% of AMI	\$24,378	\$20,880	\$20,880	\$27,210
Rent Affordable at 30% of AMI	\$609	\$522	\$522	\$680
Rent Affordable with Full-Time Job Paying Minimum Wage	\$377	\$377	\$377	\$377
Work Hours Per Week at Minimum Wage Needed to Afford 2-Bedroom FMR	106	77	77	98

Table 51: Fair Market Rental Value vs. Income (2021)

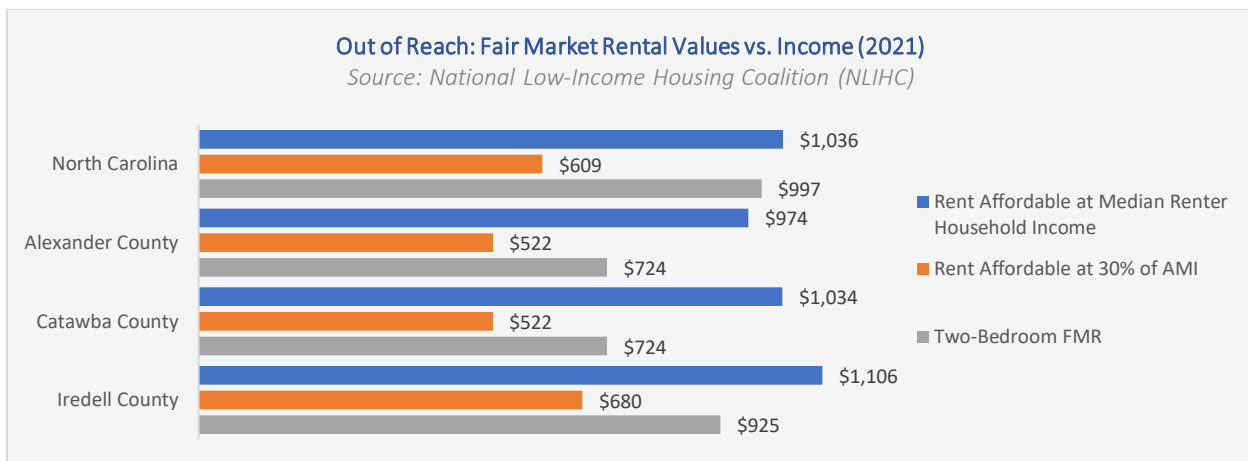


Figure 33: FMR of Two-Bedroom Home vs. Income (2021)

"Housing expenditures that exceed 30 percent of household income have historically been viewed as an indicator of a housing affordability problem. The conventional 30 percent of household income that a household can devote to housing costs before the household is said to be 'burdened' evolved from the United States National Housing Act of 1937. The 30-percent rule was considered a rule of thumb for the amount of income that a family could spend and still have enough left over for other non-discretionary spending; it made its way to owner-occupied housing too."

U.S. Census Bureau, <https://www.census.gov/>

Public Housing

Public Housing

"Public housing was established to provide decent and safe rental housing for eligible low-income families, the elderly, and persons with disabilities. Public housing comes in all sizes and types, from scattered single-family houses to high-rise apartments for elderly families. There are approximately 970,000* households living in public housing units, managed by some 3,300 Housing Agencies (HAs). The U.S. Department of Housing and Urban Development (HUD) administers Federal aid to local HAs that manage housing for low-income residents at rents they can afford. HUD furnishes technical and professional assistance in planning, developing and managing these housing units.

"Public housing is limited to low-income families and individuals. An HA determines your eligibility based on 1) annual gross income; 2) whether you qualify as elderly, a person with a disability, or as a family; and 3) U.S. citizenship or eligible immigration status. If you are eligible, the HA will check your references to make sure you and your family will be good tenants. HAs will deny admission to any applicant whose habits and practices may be expected to have a detrimental effect on other tenants or on the project's environment."

* The number of households changes daily within the Public and Indian Housing Inventory Management System (IMS-PIC).

Housing Choice Vouchers

"The housing choice voucher program is the federal government's major program for assisting very low-income families, the elderly, and the disabled to afford decent, safe, and sanitary housing in the private market. Since housing assistance is provided on behalf of the family or individual, participants are able to find their own housing, including single-family homes, townhouses, and apartments.

"Eligibility for a housing voucher is determined by the HA based on the total annual gross income and family size, is limited to U.S. citizens and specified categories of non-citizens who have eligible immigration status. In general, the family's income may not exceed 50 percent of the median income for the county or metropolitan area in which the family chooses to live. By law, an HA must provide 75 percent of its vouchers to applicants whose incomes do not exceed 30 percent of the area median income."

Moderate Rehabilitation

"The moderate rehabilitation program provides project-based rental assistance for low-income families. The program was repealed in 1991, and no new projects are authorized for development. Assistance is limited to properties previously rehabilitated pursuant to a housing assistance payments (HAP) contract between an owner and a Public Housing Agency (PHA)."

Project-Based Section 8

"Project-Based Section 8 housing is a government-funded program that provides rental housing to low-income households in privately owned and managed rental units. The subsidy stays with the building; when someone moves out, they no longer have the rental assistance. Most units' rental cost will be 30 percent of household adjusted gross income. There may be a variety of housing types available through this program, including single-family homes, townhomes, or apartments.

"To qualify, tenants must fall within the Department of Housing and Urban Development's required income limits for the program. Example of rent at 30 percent income: household with one full-time worker at \$7.25/hour might pay \$348 per month."

Section 202 Supportive Housing for the Elderly Program

"HUD provides capital advances to finance the construction, rehabilitation or acquisition with or without rehabilitation of structures that will serve as supportive housing for very low-income elderly persons, including the frail elderly, and provides rent subsidies for the projects to help make them affordable."

Section 811 Supportive Housing for Persons with Disabilities Program

"Through the Section 811 Supportive Housing for Persons with Disabilities program, HUD provides funding to develop and subsidize rental housing with the availability of supportive services for very low- and extremely low-income adults with disabilities."

U.S. Department of Housing and Urban Development, <https://www.hud.gov>

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Based on data gathered from the [Office of Public Policy Development and Research \(PD&R\), under the Department of Housing and Urban Development \(HUD\)](#), in 2021 there were a total of 128,127 housing units available in North Carolina within all HUD Programs. Of those housing units, 86 percent were occupied with more than 238,277 people. Average family expenditure for rent per month was \$304, and the average HUD expenditure per month was \$619. The average household income of those living in public housing programs in North Carolina is \$12,729. Approximately one-third, or 39 percent of householders, were female heads of household with children, and 75 percent of residents were minorities.^{lxxxix}

Table 52 provides detailed information on the number of units available in all public housing programs in North Carolina and the I-CARE, Inc. service area. Additionally, it reports on the percentage of units that are occupied, the total number of residents, average expenditures per month (by the family and HUD), household income, and the proportion of residents that are female heads of household and minorities.

Public Housing Programs (2021)

Source: Department of Housing and Urban Development (HUD)

	Subsidized Units Available	Percent Occupied	Total People	Average HUD Exp./Mo.	Average Family Exp./Mo.	Annual Household Income	Female Head of Household with Children	Minority
North Carolina								
Summary of All HUD Programs	128,127	86%	238,277	\$619	\$304	\$12,729	39%	75%
Public Housing	24,988	92%	52,126	\$678	\$283	\$12,950	47%	84%
Housing Choice Vouchers	70,437	80%	132,431	\$621	\$327	\$13,117	42%	78%
Mod Rehab	204	-5	-5	-5	-5	-5	-5	-5
Project-Based Section 8	27,744	94%	48,957	\$618	\$268	\$11,549	33%	66%
202/PRAC	3,119	97%	3,147	\$290	\$314	\$13,847	0%	51%
811/PRAC	1,602	92%	1,550	\$305	\$288	\$12,109	1%	39%
Alexander County								
Summary of All HUD Programs	70	82%	134	\$500	\$277	\$10,527	38%	34%
Housing Choice Vouchers	65	82%	130	\$511	\$272	\$10,283	41%	36%
Project-Based Section 8	5	-4	-4	-4	-4	-4	-4	-4
Catawba County								
Summary of All HUD Programs	1,830	80%	3,163	\$535	\$285	\$11,177	35%	55%
Housing Choice Vouchers	1,064	69%	1,692	\$512	\$323	\$11,898	33%	56%
Project-Based Section 8	703	96%	1,408	\$588	\$236	\$10,046	40%	57%
202/PRAC	40	98%	41	\$235	\$322	\$14,980	-1	10%
811/PRAC	22	99%	22	\$206	\$273	\$11,324	-1	41%
Iredell County								
Summary of All HUD Programs	1,734	94%	3,746	\$617	\$330	\$13,528	45%	74%
Public Housing	596	96%	1,507	\$596	\$292	\$12,951	56%	77%

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Public Housing Programs (2021)

Source: Department of Housing and Urban Development (HUD)

	Subsidized Units Available	Percent Occupied	Total People	Average HUD Exp./Mo.	Average Family Exp./Mo.	Annual Household Income	Female Head of Household with Children	Minority
Housing Choice Vouchers	722	91%	1,700	\$758	\$384	\$14,204	55%	86%
Project-Based Section 8	325	96%	449	\$461	\$290	\$12,825	18%	56%
202/PRAC	74	98%	73	\$285	\$334	\$15,240	-1	30%
811/PRAC	17	98%	17	\$201	\$303	\$12,682	-1	13%

Missing data codes: NA – Not Applicable, -1 – Missing, -4 – less than 11 reported households, -5 – less than 50 percent reporting, Table excludes data for the following housing program: S236/BMIR

Table 52: Public Housing (2021)

Homelessness

Point-in-Time Count

The Point-in-Time Count, required each year by the [U.S. Department of Housing and Urban Development](#), is conducted to assist federal and state governments in determining how to allocate funding for housing, substance abuse, and mental health programs. The 2022 count reflected that in January there were 9,382 homeless persons in North Carolina, of which 3,625 were unsheltered (38.6 percent). Of the homeless counted, 2,730 were people in families with children and 415 were unaccompanied homeless youth.^{xc}

“The [Point-in-Time \(PIT\)](#) Count is a count of sheltered and unsheltered homeless persons on a [single night in January](#). HUD requires that [Continuums of Care](#) conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night. Continuums of Care also must conduct a count of unsheltered homeless persons every other year (odd-numbered years). Each count is planned, coordinated, and carried out locally. The Housing Inventory Count (HIC) is a point-in-time inventory of provider programs within a Continuum of Care that provide beds and units dedicated to serve persons who are homeless, categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.”

HUD Exchange, <https://www.hudexchange.info/>

Homeless Youth

Of the 415 homeless unaccompanied youth under age 25 in the state of North Carolina, 76 were parenting youth with a total of 95 children. Table 53 shows the number and change of homeless youth between 2021 and 2022.^{xcii}

North Carolina Point-in-Time Count – Homeless Youth (2021-22)

Source: HUD Exchange

	2021	2022	Change
Unaccompanied Youth (Under 25)	300	415	38.3%
Parenting Youth (Under 25) *	91	76	-16.5%
Children of Parenting Youth	114	95	-16.7%

Table 53: North Carolina Homeless Youth (2021-22)

Eligibility/Qualification for HUD assistance

According to the U.S. Department of Housing and Urban Development, “The chart to the right summarizes HUD’s categories of homelessness. Category 3 is the only one that specifically mentions youth; however, youth are eligible and much more likely to qualify for assistance under the other categories.”^{xcii}

HUD Categories of Homelessness

Category 1 Literal Homelessness

Individuals and families who live in a place not meant for human habitation (including the streets or in their car), emergency shelter, transitional housing, and hotels paid for by a government or charitable organization.

Category 2 Imminent Risk of Homelessness

Individuals or families who will lose their primary nighttime residence within 14 days and has no other resources or support networks to obtain other permanent housing.

Category 3 Homeless Under Other Statutes

Unaccompanied youth under 25 years of age, or families with children and youth, who do not meet any of the other categories but are homeless under other federal statutes, have not had a lease and have moved 2 or more times in the past 60 days and are likely to remain unstable because of special needs or barriers.

Category 4 Fleeing Domestic Violence

Individuals or families who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and who lack resources and support networks to obtain other permanent housing.

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“The **McKinney-Vento** program is designed to address the problems that homeless children and youth have faced in enrolling, attending, and succeeding in school. Under this program, State Educational Agencies (SEAs) must ensure that each homeless child and youth has equal access to the same free, appropriate public education, including a public preschool education, as other children, and youth. [...] In addition, homeless students may not be separated from the mainstream school environment.”

“The McKinney-Vento Act defines ‘homeless children and youth’ as individuals who lack a fixed, regular, and adequate nighttime residence. The term includes –

- Children and youth who are:
 - sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason (sometimes referred to as *doubled-up*);
 - living in motels, hotels, trailer parks, or camping grounds due to lack of alternative adequate accommodations;
 - living in emergency or transitional shelters;
 - abandoned in hospitals; or
 - awaiting foster care placement;
- Children and youth who have a primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings;
- Children and youth who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and
- Migratory children who qualify as homeless because they are living in circumstances described above.”

National Center for Homeless Education, <https://nche.ed.gov/legislation/mckinney-vento/>

North Carolina Homeless Education Program

According to [ED Data Express](#), there were more than 22,000 homeless students during the 2020-21 schoolyear, of which there were 83 students in Alexander County, 167 students in Catawba County, and 298 students in Iredell County.^{xciii} In North Carolina, Catawba, and Iredell Counties, the number of homeless students decreased from 2019-20 to 2020-21, while in Alexander County the number of students increased.

Homeless Students (2019-20, 2020-21)

Source: ED Data Express

	2020-21	2019-20
United States	1,087,283	1,280,268
North Carolina	22,682	27,073
Alexander County	83	45
Catawba County	167	219
Iredell County	298	368

Table 54: Homeless Students (2019-21)

The figure below offers an infographic from the [Early Childhood Homelessness in the United States: 50-State Profile](#) report issued by the Administration of Children and Families in May 2021, using 2018-19 U.S. Department of Education Data. The report indicates that in North Carolina more than 32,000 children under the age of 6 were identified as homeless.

Early Childhood Homelessness State Profiles: **North Carolina** (2018-19)

Early childhood experiences with homelessness have long lasting impacts on a child's well-being. Access to educational services can help mitigate some of these negative effects.¹ Federally-funded early childhood education (ECE) programs are only able to serve a small portion of children who experience homelessness. Taking action to mitigate the impacts of early childhood homelessness is critical to ensuring all young children have the opportunity to thrive.

Early Childhood Homelessness

Children under age 6

Total population²

734,550

Estimated number
experiencing homelessness³

32,189

or

1 in 23 children

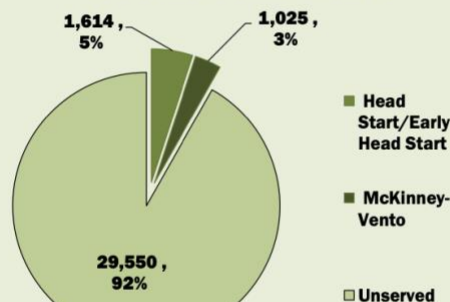


Early Childhood Education for Children Experiencing Homelessness

Children under age 6 experiencing homelessness

8% served by Head Start/Early Head Start or
McKinney-Vento funded ECE programs in 2019⁵

North Carolina



Related Factors

Families experiencing homelessness, whether chronic or episodic, often face other barriers to affordable housing. By understanding these related challenges, states can create sustainable and proactive policy solutions that better address homelessness in their communities.



27% of families
with children under 18
have a high housing
cost burden⁴



9% of children under
age six had no resident
parent in the U.S. labor
force⁴

For detailed information on indicator definitions, data sources, and methodology, please see Appendix III.

Notes:

- McCoy-Roth, M., Mackintosh, B.B., & Murphey, D. (2012). When the bough breaks: The effects of homelessness on young children. Early Childhood Highlights, p. 3. <https://www.childtrends.org/wp-content/uploads/2012/02/2012-08EffectHomelessnessChildren.pdf>
- U.S. Census Bureau, Population Division. (June 2020). SC-EST2019-AGESEX-CIV: Annual Estimates of the Civilian Population by Single Year of Age and Sex for the United States and States: April 1, 2010 to July 1, 2019. <https://www.census.gov/data/tables/time-series/demo/popest/2010s-state-detail.html>
- Calculations by authors using methodology established by Bassuk, et al. (2014) and 2019 data from U.S. Department of Education and U.S. Department of Housing and Urban Development.
- Data from the Annie E. Casey Foundation KIDS COUNT data center.
- Data from U.S. Department of Education. (2020). *Consolidated State Performance Reports, Part I* and U.S. Department of Health and Human Services, Administration for Children and Families. Retrieved July 23 2020. *Program Information Reports*. Data on children under 6 experiencing homelessness served through Federally-funded child care & home visiting programs collected for the first time in 2017. Percentages in the pie chart may not sum to 100 because of rounding.

Communication and Transportation

Access to Internet and Computer Devices

Households

In the United States there are more than 124 million households in occupied housing units of which 12.8 percent are without an internet subscription (Table 34). In North Carolina, Alexander, Catawba, and Iredell Counties, of the households in occupied housing units, 14.4, 18.6, 15.3, and 9.4 percent are without an internet subscription, respectively. Of the households in North Carolina, Alexander, Catawba, and Iredell Counties earning less than \$20,000 a year, 36.7, 42, 40.1, and 27.3 percent, respectively, do not have an internet subscription.

"Digital Divide: the economic, educational, and social inequalities between those who have computers and online access and those who do not."

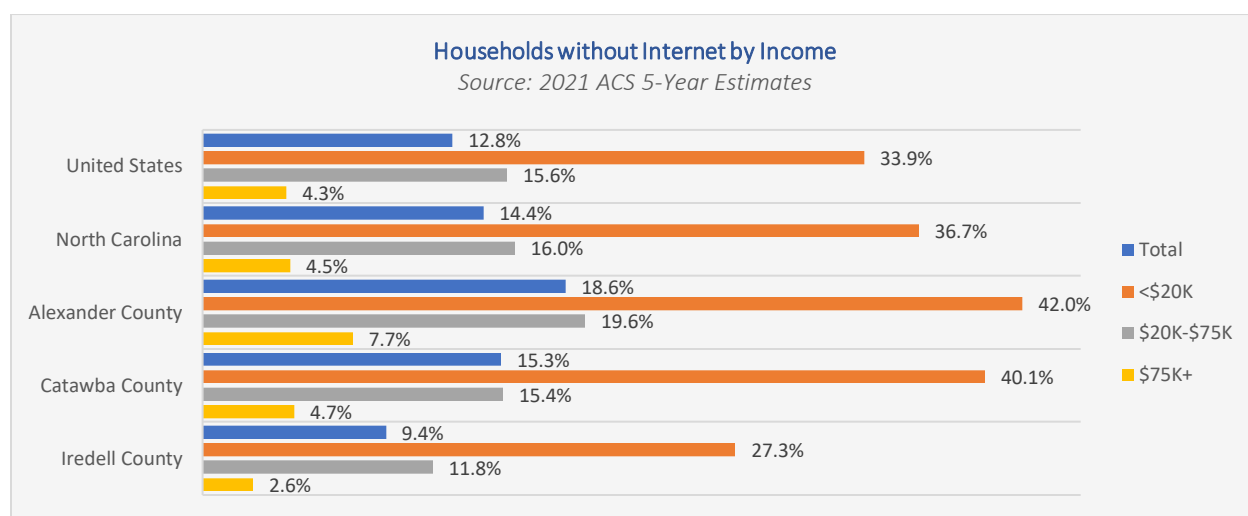


Figure 34: Households without Internet by Income (2021 ACS 5-Year Estimates)

Children Under 18

There are more than 73 million children under the age of 18 in the United States, of which 1.9 percent do not have access to a computer device at all (Table 55). In North Carolina, Alexander, Catawba, and Iredell Counties, 1.9, 1.3, 0.8, and 1.5 percent of children under age 18, respectively, lack access to a computer device.

Children under 18 without a Computer Device		
Source: 2021 ACS 5-Year Estimates		
United States		1.9%
North Carolina		1.9%
Alexander County		1.3%
Catawba County		0.8%
Iredell County		1.5%

Table 55: Children < 18 without a Computer Device (2021 ACS 5-Year Estimates)

Community Library Connection

Head Start and Early Head Start programs may find that developing partnerships with local libraries can greatly benefit the children and families they serve. Libraries provide services to clients across the spectrum of age, income, and service needs; they may offer access to computers and the internet, assistance with résumés, computer classes, and child/youth story time, among other services. According to [Gallup](#), visiting the library was the most common activity of the American public in 2019. The data collected by Gallup also shows that adults in lower income households visit libraries at higher frequencies, as libraries are “free and offer a variety of services, including Wi-Fi.”^{xciv}

Gregory Gilpin with the Brookings Institute stated that one in five Americans utilized public libraries for high-speed Wi-Fi access and, subsequently, in March 2020, when 99 percent of public libraries had to close due to COVID-19, access to those services was lost.^{xcv}

The [American Library Association](#) (ALA) publishes the [State of America’s Libraries](#) annually. This report examines libraries in the public, academic, and school sectors. In the State of America’s Libraries Report 2020, the ALA’s focus for public libraries was on wellness, health, and economic opportunity. According to the ALA:

“Libraries provide a diverse array of health literacy and awareness services for their communities. Public library collections offer materials on healthy lifestyles, cookbooks that address medical dietary needs, multimedia for physical exercise instruction, and self-help mental health materials. Some libraries take healthy lifestyle services even further by offering walking, hiking, bicycling, or running programs that take place outside the library building.... hundreds of public libraries are encouraging community members to secure health insurance coverage through information dissemination, education, and partnerships.”^{xcvi}

Since the COVID-19 vaccine became widely available and many libraries have re-opened, some libraries are hiring social workers to help provide social services to customers who may be homeless or need assistance applying for jobs or social service benefits. The ALA also envisions libraries as community partners for economic development. Per the State of America’s Libraries Report:

“Public libraries drive economic opportunity for their community members through skill development and small business support. Nearly 90 percent of public libraries offer digital literacy training programs, through which community members can learn résumé development and job searching and gain new skills to aid in career advancement.”^{xcvii}

The Institute of Museum and Library Services is an organization that supports museums and libraries through grants, research, and policy development. Through data collection, it maintains a Library Search and Compare function that allows the public to search for libraries by state, city, rural area, suburb, or town. This search also allows users to research programs provided by individual libraries, populations served and number of visitors to individual libraries.

Institute of Museum and Library Services, <https://www.ims.gov/search-compare/>

Local public library access and services vary per state and county. The [State Library of North Carolina](#) offers a [Public Library Directory](#) that makes it possible to search for all local public libraries across the state.^{xcviii} Services include access to computers, laptops and free Wi-Fi, scanning and printing, 3D printing, and technology classes. The directory contains library type, county, city, and a link to the libraries’ websites.

Vehicle Ownership

Based on census data, of the more than 124 million households in occupied housing units in the United States, approximately 10.3 million, or 8.3 percent, do not own a vehicle (Table 56). In North Carolina and Catawba County, 5.5 and 5.1 percent of households in occupied housing do not own a vehicle, respectively. In Alexander and Iredell Counties, 3 and 3.2 percent of households in occupied housing do not own a vehicle, respectively.

Vehicle Ownership by Households			
<i>Source: 2021 ACS 5-Year Estimates</i>			
	Total	Number of Households without Access to a Vehicle	Percentage of Households without Access to a Vehicle
United States	124,010,992	10,349,174	8.3%
North Carolina	4,034,684	220,918	5.5%
Alexander County	13,496	401	3.0%
Catawba County	63,386	3,240	5.1%
Iredell County	70,654	2,260	3.2%

Table 56: Vehicle Ownership (2021 ACS 5-Year Estimates)

Public Transportation

The following is a list of public transportation resources in the United States and the I-CARE, Inc. service area:

- The search engine [US Bus Station](#) provides information about bus routes, bus stops, and bus companies per state and county.
- [The American Transportation Association](#) offers information on larger transit agencies, all transit agencies & local links (by county & city), rail, ferry, statewide, intercity, & regional.
- [Greenway Public Transportation](#) provides public transportation in Alexander, Burke, Caldwell, and Catawba Counties. In Catawba County the routes cover the cities of Conover, Hickory, and Newton Monday-Saturday, 8:45 a.m.-5:20 p.m. In Alexander County, bus service is offered in Taylorsville, Monday-Friday, 10 a.m.-5 p.m.
- [ICATS \(Iredell County Area Transportation System\)](#) provides public and human services transportation via fixed routes, ride sharing, subscription routes, and “demand-response service” trips.
- [Alexander County Social Services](#) Medicaid Transportation schedules medical appointment transportation for Medicaid recipients.
- [Catawba County Social Services](#) Medicaid Transportation provides medical appointment transportation for Medicaid recipients.
- [Iredell County Social Services](#) provides transportation to and from medical appointments for Medicaid beneficiaries.

Disabilities

Individuals with Disabilities Education Act (IDEA)

The nation's special education law is called the Individuals with Disabilities Education Act, or IDEA. IDEA defines the term "child with a disability" in order to make special education and related services available to children with disabilities in public schools and Head Start programs. That definition includes specific disability terms, which are also defined by IDEA.^{xcix} Based on data collected from the [IDEA Data Center](#), nearly 9,000 infants and toddlers, ages 0 through 2, were served by early intervention programs in North Carolina, accounting for 2.5 percent of the birth through age 2 population. In the United States, 3.2 percent of the population, ages 0 through 2, is served under IDEA, Part C programs (Table 57).^c

IDEA Part C: Early Intervention, Ages 0-2 (2020-21)

Source: Individuals with Disabilities Education Act (IDEA)

	Birth to 1 Year	1 to 2 Years	2 to 3 Years	Total Served Birth through 2 Years	Percentage of Population, ¹ Birth through 2 Years
U.S. and Outlying Areas	42,569	114,967	205,851	363,387	3.2%
North Carolina	1,115	2,844	4,976	8,935	2.5%

¹ Percentage of population = Number of infants and toddlers, birth through age 2, served under IDEA, Part C, divided by the estimated U.S. resident population, birth through age 2, multiplied by 100.

Table 57: IDEA Part C: Early Intervention, Ages 0-2 (2020-21)

As reported by the IDEA Data Center, during the 2020-21 school year, 10,239 children, ages 3 to 5, received special education assistance in North Carolina. The largest group of children received special education for developmental delay, followed by speech or language impairments (Table 58).

IDEA Part B: Assistance for All Children with Disabilities, Ages 3-5 (2020-21)

Source: Individuals with Disabilities Education Act (IDEA)

	U.S., Outlying Areas	North Carolina
All Disabilities	502,391	10,239
Developmental Delay	224,671	4,689
Speech or Language Impairments	178,375	3,200
Autism	60,966	1,802
Other health Impairments	12,485	122
Intellectual Disabilities	6,077	1
Hearing Impairments	5,682	145
Multiple Disabilities	3,966	118
Orthopedic Impairments	2,775	39
Visual Impairments	1,508	39
Traumatic Brain Injury	674	82
Specific Learning Disabilities	474	0
Emotional Disturbance	286	0
Deaf-Blindness	167	2

Table 58: IDEA Part B: Child Count, Ages 3-5 (2020-21)

"The Individuals with Disabilities Education Act (IDEA) is a law that makes a free and appropriate public education available to eligible children with disabilities throughout the nation and ensures special education and related services to those children.

"IDEA governs how states and public agencies provide early intervention, special education, and related services to more than 6.5 million eligible infants, toddlers, children, and youth with disabilities.

"Infants and toddlers, birth through age 2, with disabilities and their families receive early intervention services under IDEA Part C. Children and youth, ages 3 through 21, receive special education and related services under IDEA Part B."

Individuals with Disabilities Education Act,
<https://sites.ed.gov/idea/about-idea/>

North Carolina Department of Public Instruction

Based on data collected from the [North Carolina Department of Public Instruction](#), more than 202,000 children, ages 3 to 21, were served by the Exceptional Children Program in North Carolina schools, accounting for 13.3 percent of the total student population (calculated based on the Average Daily Membership, or ADM) (Table 59). Of the more than 202,000 students served in the Exceptional Children

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Disabilities

Program, 19,638 were children ages 3 to 5, including pre-K. In Alexander, Catawba, and Iredell County schools, a total of 71, 220, and 258 children, ages 3 to 5, with disabilities received services, correspondingly.

Exceptional Children Program (December 2022)

Source: North Carolina Department of Public Instruction (NCDPI)

	2022 ADM	Total 3-5 PK	Total 5K-21	3-21 Total	EC/ADM %
North Carolina	1,516,090	19,638	189,702	202,304	13.3%
Alexander County Schools	4,401	71	766	807	18.3%
Catawba County Schools	15,430	220	1,890	2,015	13.1%
Iredell-Statesville Schools	20,478	258	2,233	2,401	11.7%

Table 59: Exceptional Children Program (December 2022)

In North Carolina the majority of children were diagnosed with a specific learning disability, followed by other health impairment and speech/language impairment; in the I-CARE service area, the majority of children were also diagnosed with a specific learning disability, followed by speech or language impairment (Table 60).^{ci}

Children with Disabilities Served by Exceptional Children Programs (2022)

Source: North Carolina Department of Public Instruction (NCDPI)

	North Carolina	Alexander County	Catawba County	Iredell-Statesville
Grand Total	181,350	778	1,990	2,351
Specific Learning Disability	62,963	257	623	752
Other Health Impairment	30,548	137	311	391
Speech or Language Impairment	25,027	164	427	579
Autism	23,336	66	191	209
Developmental Delay	14,517	60	171	147
Intellectual Disability - Mild	9,808	42	121	119
Emotional Disability	4,293	9	55	33
Intellectual Disability - Moderate	4,035	10	39	54
Multiple Disabilities	2,710	18	17	24
Hearing Impairment	1,307	11	11	20
Traumatic Brain Injury	926	1	5	7
Intellectual Disability - Severe	711	0	9	9
Visual Impairment incl. Blindness	516	0	9	1
Orthopedic Impairment	505	3	1	5
Deafness	122	0	0	1
Deaf-Blindness	26	0	0	0

Table 60: Children with Disabilities Served by Exceptional Children Programs (2022)

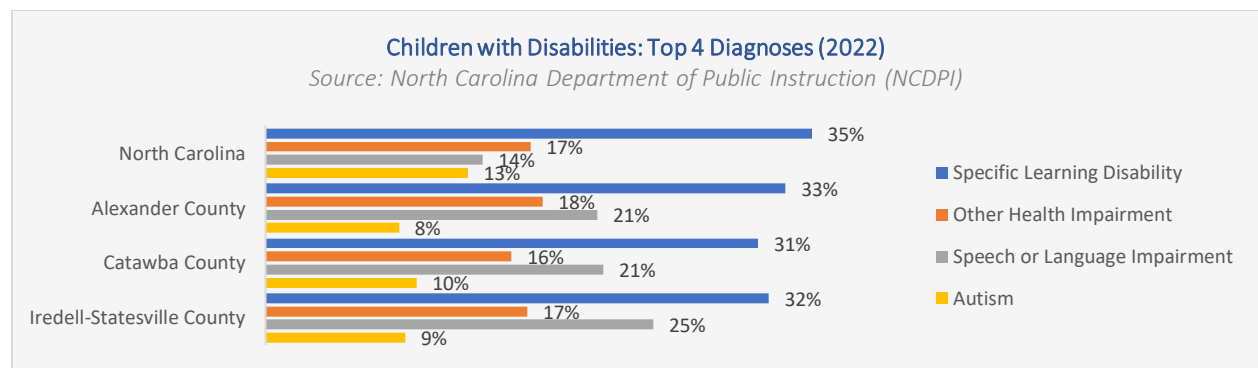


Figure 35: Children with Disabilities: Top 4 Diagnoses (2022)

Health and Wellness

WORLD HEALTH ORGANIZATION

"Many factors combined affect the health of individuals and communities. Whether a person is healthy or unhealthy is determined by his/her circumstances and environment. To a large extent, factors such as where we live, the state of our environment, genetics, our income and education level, and our relationships with friends and family all have considerable impact on health, whereas the more commonly considered factors such as access and use of health care services often have less of an impact.

The determinants of health include:

- the social and economic environment,
- the physical environment, and
- the person's individual characteristics and behaviors.

The context of people's lives determines their health, and so blaming individuals for having poor health or crediting them for good health is inappropriate. Individuals are unlikely to be able to directly control many of the determinants of health. These determinants—or things that make people healthy or not—include the above factors, and many others:

Income and social status – higher income and social status are linked to better health. The greater the gap between the richest and poorest people, the greater the differences in health.

Education – low education levels are linked with poor health, more stress and lower self-confidence.

Physical environment – safe water and clean air, healthy workplaces, safe houses, communities and roads all contribute to good health.

Employment and working conditions – people in employment are healthier, particularly those who have more control over their working conditions.

Social support networks – greater support from families, friends and communities is linked to better health.

Culture – customs and traditions, and the beliefs of the family and community all affect health.

Genetics – inheritance plays a part in determining lifespan, healthiness and the likelihood of developing certain illnesses.

Personal behavior and coping skills – balanced eating, keeping active, smoking, drinking, and how we deal with life's stresses and challenges all affect health.

Health services – access and use of services that prevent and treat disease influences health.

Gender – men and women suffer from different types of diseases at different ages."

World Health Organization, <https://www.who.int/>

Environmental Factors

Safe water and clean air are critical environmental factors that contribute to the health and well-being of a community. The [United States Environmental Protection Agency](#)'s mission is to protect health and the environment. EPA provides information and data on a wide range of environmental subjects, such as air and water quality. Through [MyEnvironment](#) information can be found on numerous environmental subjects per location.

Drinking Water Quality

The [Safe Drinking Water Act](#) requires states to report drinking water information periodically to the [United States Environmental Protection Agency](#) (EPA). Data on public water systems by state, city, town, county, or water system can be found through the [Safe Drinking Water Information System \(SDWIS\) Federal Reporting Systems](#).

Drinking Water Violations Include:

- "Failed to follow established monitoring and reporting schedules
- Failed to comply with mandated treatment techniques
- Violated any Maximum Contaminant Levels (MCLs)
- Failed to communicate required information to their customers"

U.S. Environmental Protection Agency, [Epa.gov](#)

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According to data retrieved from SDWIS, in North Carolina there are more than 29,000 public water facilities, of which 1,687 serve the population in the I-CARE, Inc. service area. As of the third quarter in 2022, it is notable that for the 772 facilities in Catawba County, which make up 2.6 percent of all facilities in North Carolina, and 804 facilities in Iredell County, which make up 2.7 percent of facilities, these counties received 4.5 percent and 3.8 percent of total violations in the state, respectively. (Table 61).^{cii}

Public Water Systems (2022)

Source: Safe Drinking Water Information System (SDWIS)

	Population Served Count		Number and Percentage of State Total					
			Facilities		Site Visits		Violations	
North Carolina	9,414,333	X	29,257	X	155,451	X	142,315	X
Alexander County	31,248	0.3%	111	0.4%	1,199	0.2%	353	0.8%
Catawba County	131,028	1.4%	772	2.6%	6,975	2.7%	3,884	4.5%
Iredell County	137,259	1.5%	804	2.7%	5,845	2.3%	3,336	3.8%

Table 61: Public Water Systems (2022)

Air Quality



In November of 2021 [ProPublica](#) conducted an analysis of how much toxic air pollution is emitted from industrial sites posing an increased risk of cancer for surrounding areas. The analysis identified 1,000 hotspots where an increased risk of cancer for communities is unacceptable to EPA. An [interactive map](#) presents the identified hotspots.

Air agencies provide additional information about the air quality in an area using a uniform reporting system and Air Quality Index (AQI).

“The AQI focuses on health effects that may be experienced within hours or days after exposure to polluted air. It uses a normalized scale from 0 to 500: the higher the AQI value, the greater the level of pollution and the greater the health concern.”^{ciii}

According to the annual summary data of 2022 by the EPA, in Alexander County there were 214 days in 2022 with an assigned air quality index value. Of those days, 91 percent were rated as “good days,” 9 percent were rated as “moderate days,” and 0 days as “unhealthy for sensitive groups.” In Catawba County there were 178 days in 2022 with an assigned air quality index value. Of those days, 80 percent were rated as “good days,” 20

Air Quality Index (AQI) Values

Numerical Value	AQI Levels of Health Concern	Meaning
0-50	Good	Air quality is considered satisfactory, and air pollution poses little or no risk.
51-100	Moderate	Air quality is acceptable; however, for some pollutants there may be a moderate health concern for a very small number of people who are unusually sensitive to air pollution.
101-150	Unhealthy for Sensitive Groups	Members of sensitive groups may experience health effects. The general public is not likely to be affected.
151-200	Unhealthy	Everyone may begin to experience health effects; members of sensitive groups may experience more serious health effects.
201-300	Very Unhealthy	Health alert: everyone may experience some serious health effects.
301-500	Hazardous	Health warnings of emergency conditions. The entire population is more likely to be affected.

United States Environmental Protection Agency, <https://www.epa.gov/outdoor-air-quality-data/air-data-basic-information>

percent were rated as “moderate days,” and 0 days as “unhealthy for sensitive groups.” There was no data for Iredell County.

For context, in Los Angeles County, California, only 11.2 percent of days with an AQI were calculated as “good days,” 62.2 percent calculated as “moderate days,” and 20.5 percent as “unhealthy for sensitive groups.”

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Health and Wellness

Health Insurance

Based on census data, 8.8 percent of the United States civilian noninstitutional population lacks health insurance.

North Carolina, Alexander, Catawba, and Iredell Counties report higher percentages of the population that lack health insurance, 10.7, 9.7, 11.7, and 9.4 percent of the population, respectively (Figure 36).

“Civilian noninstitutional population: Persons 16 years of age and older residing in the 50 states and the District of Columbia, who are not inmates of institutions (e.g., penal and mental facilities, homes for the aged), and who are not on active duty in the Armed Forces.”

U.S. Department of Labor, <https://www.dol.gov/>

In North Carolina, Alexander, Catawba, and Iredell Counties, 5.9, 3.8, 7.9, and 4.5 percent of children, ages 6 to 18, respectively, and 4.4, 5.1, 8.1, and 4.9 percent, respectively, of children under the age of 6, lack health insurance.

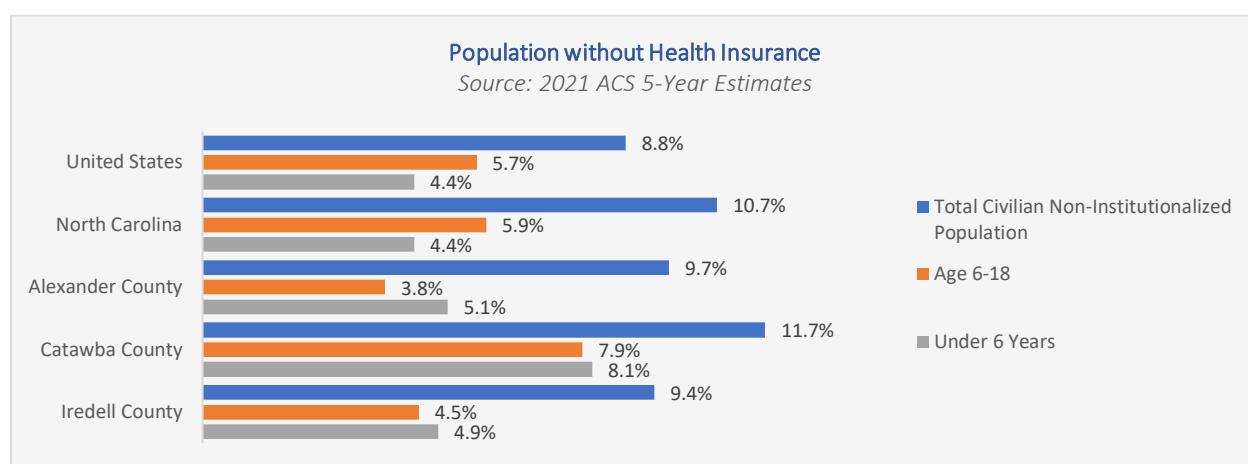


Figure 36: Health Insurance Coverage (2021 ACS 5-Year Estimates)

Medicaid Enrollment

According to the [North Carolina Department of Health and Human Services \(NC DHHS\)](#), in March 2023 there were nearly 3 million people enrolled in Medicaid, of which there were 9,886 in Alexander County, 43,698 in Catawba County, and 44,565 in Iredell County (Table 62).^{civ} The number of enrollments increased between 2021 (SFY) and 2022 (SFY) in Alexander, Catawba, and Iredell Counties by 17.6, 9.2, and 7.1 percent, respectively.

More than one-third of all Medicaid enrollments are infants and children and TANF recipients under the age of 21, combined. Table 62 provides information on the number of Medicaid enrollments by eligibility.

Medicaid Enrollment (March 2023)

Source: North Carolina Department of Health and Human Services (NCDHHS)

	North Carolina	Alexander County	Catawba County	Iredell County
Total	2,908,732	9,886	43,698	44,565
Aged	152,200	539	2,228	1,846
Blind	1,388	4	27	17
Disabled	304,458	1,001	4,471	4,293
TANF (AFDC) Under 21	519,969	1,637	6,884	7,464

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Medicaid Enrollment (March 2023)

Source: North Carolina Department of Health and Human Services (NCDHHS)

	North Carolina	Alexander County	Catawba County	Iredell County
TANF (AFDC) 21 and over	422,982	1,557	6,204	6,834
Other Child	32,165	177	713	513
Pregnant Women	35,569	136	754	705
Family Planning	438,169	1,411	5,374	6,664
Infants and Children	558,588	1,679	8,273	8,162
MCHIP	248,057	1,066	5,243	4,848
MQBQ	10,411	42	186	170
MQBB	49,731	266	896	748
MQBE	26,090	137	571	454
BCC	1,029		13	11
Refugees	1,428		1	13
Legal Aliens	45,593	21	391	392
Undocumented Aliens	260		2	4
COVID-19 Medicaid	60,645	213	1,467	1,427

Table 62: Medicaid Enrollment (March 2023)

Medicaid Enrollment Definitions, retrieved from the North Carolina Department of Health and Human Services (NCDHHS):

PROGRAM AID CATEGORIES	
Aged: Individuals over age 65 and below any NC established income threshold	Qualified Medicare Beneficiaries (MQB-Q): Individuals entitled to Medicare Parts A & B and below any NC established income threshold to help pay for Medicare premiums, deductibles, and co-insurance charges for Medicare covered services
Blind: Individuals considered legally blind based on Social Security standards and below any NC established income threshold	Specified Low Income Medicare Beneficiaries (MQB-B): Individuals entitled to free Medicare Part A and below any NC established income threshold; to help pay for Medicare Part B premiums
Disabled: Individuals considered disabled based on Social Security standards and below any NC established income threshold	Qualified Individuals (MQB-E): Individuals entitled to free Medicare Part A and below any NC established income threshold; to help pay for Medicare Part B premiums (cap limit)
TANF (AFDC) 20 and under: Individuals under age 21 and eligible for TANF TANF (AFDC) 21 and over: Individuals over age 21 and eligible for TANF	Breast and Cervical Cancer Medicaid (BCC): Women ages 21 through 64, screened and enrolled in the NC Breast & Cervical Cancer Control Program, and below any NC established income threshold
Other Child (Foster children): Individuals currently or formerly in foster care from birth through age 25	Refugees: Individuals with proper immigration status and documentation and below any NC established income threshold; covered fully by federal funding during first eight months the refugee resides in the US
Pregnant Women: Women who are pregnant and below any NC established income threshold to help pay for conditions that affect pregnancy	Documented Immigrants: Individuals living in the US with proper documentation as qualified non-citizens and below any NC established income requirements, and have completed a five-year waiting period
Family planning: Women between the ages of 19 through 55 and men between the ages of 19 through 60 for, who are not eligible below any NC established income threshold, but not meeting eligibility standards for full Medicaid coverage, are eligible for family planning exams and services, screening and treatment for sexually transmitted infections, screenings for HIV, and sterilizations	Emergency Only Services: Individuals living in the US without proper documentation who meet the NC residency requirement to help pay for emergency Medicaid services
Infants and children: Individuals from birth through age 18 and below any NC established income threshold	Health Choice (Children's Health Insurance Program (CHIP)): Children age 6 through 18 and below any NC established income threshold; service exclusions include long-term care, early and periodic screening, diagnostic and treatment, non-emergency medical transportation and full dental benefits
MCHIP (Medicaid-Children's Health Insurance Program): Children from birth through age 18 and below any NC established income threshold	

Health Professional Shortage Areas

The [Health Resources and Services Administration](#) (HRSA) provides data on health care programs that provide health care to people who are geographically isolated and economically or medically vulnerable. One of the datasets reports on Health Professional Shortage Areas, or HPSAs. The three categories measured within HPSAs are primary care, dental health care, and mental health care. To be considered a primary care HPSA, the population-to-provider ratio must be 3,500:1, a dental care HPSA has a population-to-provider ratio of 5,000:1, and a mental health care HPSA must have a population-to-psychiatrist ratio of 30,000:1. HPSA designations can be determined as follows:^{cv}

- A **geographic location** (a county or service area) with a shortage of providers for the entire population in that area,
- A **population group** within a geographic area (for example: low-income population, Medicaid-eligible population, migrant population, homeless population) with a shortage of providers,
- Or a **facility** (for example: comprehensive health center, correctional facility, federally qualified health center or other public facility) with a shortage of providers.

The I-CARE service area reports a total of 14 HPSAs, four primary care, five dental care, and five mental health care HPSAs. Alexander County has the highest number of HPSAs (6), followed by Catawba County (5) and Iredell County (3).

Of the 14 HPSAs in the I-CARE service area, five are low-income HPSAs, which indicates that the population earning less than 200 percent of the federal poverty level is underserved (Table 63).^{cvi} Iredell County is considered an HPSA for dental health, indicating that there is a shortage of dental health providers for all residents of the county. Finally, the Alexander Correctional Institution accounts for three of the HPSAs in the service area, as it reports a shortage of primary care, dental health, and mental health care providers for its inmate population.

Health Professional Shortage Areas (2020-21)

Source: Health Resources Service Administration

HPSA Discipline Class	HPSA Name	Designation Type	HPSA Population Type	HPSA Designation Last Update
Alexander County				
Primary Care	LI - Alexander County	HPSA Population	Low-Income Population HPSA	09/10/2021
Primary Care	Alexander Correctional Institution	Correctional Facility		11/22/2022
Dental Health	Alexander Correctional Institution	Correctional Facility		11/22/2022
Dental Health	LI - Alexander County	HPSA Population	Low-Income Population HPSA	09/10/2021
Mental Health	LI - Alexander County	HPSA Population	Low-Income Population HPSA	09/10/2021
Mental Health	Alexander Correctional Institution	Correctional Facility		11/22/2022
Catawba County				
Primary Care	Catawba County	HPSA Population	Other Population HPSA	08/17/2020
Dental Health	LI - Catawba County	HPSA Population	Low-Income Population HPSA	09/08/2021
Dental Health	Catawba County	HPSA Population	Other Population HPSA	09/08/2021
Mental Health	LI - Catawba County	HPSA Population	Low-Income Population HPSA	09/08/2021
Mental Health	Catawba County	HPSA Population	Other Population HPSA	09/08/2021
Iredell County				
Primary Care	Iredell County	HPSA Population	Other Population HPSA	03/30/2022
Dental Health	Iredell County	Geographic HPSA	Geographic Population	09/10/2021
Mental Health	Iredell County	HPSA Population	Other Population HPSA	03/30/2022

Table 63: Health Professional Shortage Areas (2020-21)

Mental Health

[Mental Health America](#) has created a dashboard “that geographically visualizes data from over 4 million mental health screens taken at MHAScreening.org in 2020-2022. The interactive maps are able to identify the current need for mental health resources at a pace and scale that was not possible before.”

Based on mental health screens conducted in 2022, in North Carolina there were more than 4,600 individuals who indicated experiencing severe depression, of which 156 were in the I-CARE service area counties. The rate of individuals experiencing severe depression in North Carolina and the I-CARE service area counties ranged from 37.5 to 43.9 per 100,000 individuals (Table 64 and Figure 37).

More than 4,800 individuals, statewide, expressed experiencing suicidal ideation, of which 149 were in the I-CARE service area counties. The rate of individuals per 100,000 experiencing suicidal ideation in North Carolina and the I-CARE service area counties ranged from 31.2 to 46.

In North Carolina, of those who participated in the health screens, 2,368 individuals expressed suffering from post-traumatic stress disorder, or PTSD, a rate of 22.4. In Catawba and Iredell Counties, a total of 65 individuals expressed experiencing PTSD, rates of 18.1 and 17.2 per 100,000, respectively.

More than 9,200 individuals, in North Carolina, self-identified as trauma survivors, of which 284 were in the I-CARE service area. The rates of trauma survivors in North Carolina and Alexander County were 87.5 and 84.3 per 100,000 individuals, respectively, while in Catawba County the rate was 79.7 and 69.4 in Iredell County.

Finally, in North Carolina more than 2,600 individuals indicated having psychotic-like experiences, of which 109 were in the I-CARE service area counties. The rates of individuals with psychotic-like experiences per 100,000 residents in North Carolina, Catawba, and Iredell Counties were 24.7, 26.2, and 21.7, respectively. The rate of this assessment response in Alexander County was 43.7 per 100,000 residents.

Mental Health Risk Assessment (2022)

Source: Mental Health America

	North Carolina	Alexander County	Catawba County	Iredell County
Severe Depression				
Total Number of People Scoring Severe Depression	4,632	12	69	75
# of People Scoring Severe Depression per 100,000 Population	43.9	37.5	41.7	41.6
Suicidal Ideation				
Total Reporting Frequent Suicidal Ideation	4,858	10	70	69
# Reporting Frequent Suicidal Ideation per 100K,000 Population	46.0	31.2	32.3	38.3
PTSD				
Total Scoring Positive for PTSD	2,368	*	30	31
# Scoring Positive for PTSD per 100,000 Population	22.4	*	18.1	17.2
Trauma Survivors				
Total # Identifying as Trauma Survivors	9,237	27	132	125
# Identifying as Trauma Survivors per 100,000 Population	87.5	84.3	79.7	69.4
Psychosis				
Total Scoring at Risk for Psychotic-like Experiences	2,607	14	56	39
# Scoring at Risk per 100,000 Population	24.7	43.7	26.2	21.7
* No data reported.				

Table 64: Mental Health Risk Assessment (2022)

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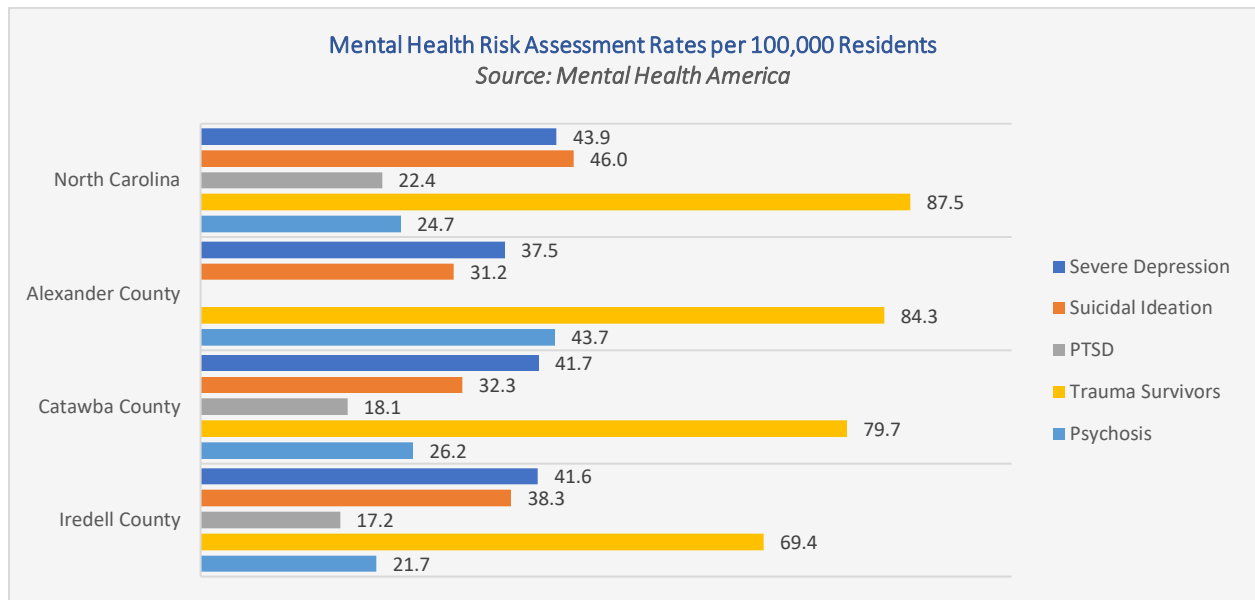


Figure 37: Mental Health Risk Assessment Rates per 100,000 Residents (2022)

Immunizations

“Vaccination is an important part of keeping children healthy and protected from potentially serious diseases like measles and whooping cough. CDC’s recommended immunization schedule helps protect children from 14 serious diseases by the time they reach 2 years old.

“Local, state, and federal health departments use surveys and other data sources such as immunization information systems (IISs) to estimate vaccination coverage (the proportion of children receiving vaccinations) and identify where additional efforts are needed to increase vaccination coverage.”

Centers for Disease Control and Prevention (CDC), <https://www.cdc.gov/>

[ChildVaxView](#), created by Centers for Disease Control and Prevention (CDC), provides national, regional, state, and selected local area vaccination coverage estimates for 2-year-old and 3-year-old children by birth year using interactive maps, trend lines, bar charts, and data tables.^{cvii}

According to Childhood Vaccination Coverage Trend Report, in North Carolina 85.2 percent of 2-year-olds born in 2019 completed the Combined 7 series, compared with 70.1 percent of the United States. For 3-year-olds, the percentage was much higher for North Carolina than the United States, at 95.6 and 76.4 percent, respectively. *(Data was not available at the county level.)* For more information on specific vaccinations administered by age, visit: [ChildVaxView](#).

Prevalent Health Problems

Asthma

The [North Carolina Disease Event Tracking and Epidemiological Collection Tool \(NC DETECT\)](#) is a collaboration between the NC Division of Public Health, the Carolina Center for Health Informatics, and the UNC Department of Emergency Medicine to monitor a number of select public health measures, including asthma. NC DETECT uses the information gathered from local emergency rooms and urgent care centers to compile data across the state to assess trends across age groups, races, and zip codes.

According to data collected from NC DETECT, in 2021 more than 5,400 children, ages 0-4, visited the emergency department (ED) in North Carolina and received an asthma diagnosis, a rate of 92.3 per 10,000 children, ages 0-4 (Table 65).

These ED visits accounted for 2.1

percent of ED visits statewide.^{cviii} In the I-CARE, Inc. service area, the number of children, ages 0-4, who visited the ED due to asthma ranged from 26 in Alexander County to 156 in Iredell County. Asthma ED visits by children, ages 0-4, ranged from 1.6 percent of ED visits in Catawba County to 4.3 percent in Alexander County.

ED Visit Trends for Asthma by Age Group 0-4 (2021)

Source: NC DETECT

	ED Visit Count	Rate per 10,000	ED Visit Percentage
North Carolina	5,437	92.3	2.1%
Alexander County	26	145.6	4.3%
Catawba County	55	66.8	1.6%
Iredell County	156	164.7	3.0%

Table 65: ED Visit Trends for Asthma (2021)

Obesity

According to [The State of Obesity: Better Policies for a Healthier America 2022](#), North Carolina has the 15th highest adult obesity rate in the nation, 36 percent.^{cix} Highest rates of obesity were seen for those ages 45-64 (41.9 percent) and among Black residents (48.8 percent). The report also includes data from 2020 among WIC participants, ages 2-4, which indicated that 14.8 percent of participants were identified as obese.

Diabetes and Hypertension

According to [The State of Obesity: Better Policies for a Healthier America 2022](#), the most common obesity-related diseases reported are diabetes and hypertension. In North Carolina 12.6 percent of the adult population had diabetes (2021) and 35.4 percent had hypertension (2021) ranking North Carolina 10th and 14th in the nation, respectively.^{cx}

Oral Health

Cavities (also known as caries or tooth decay) are one of the most common chronic diseases of childhood in the United States. Untreated cavities can cause pain and infections that may lead to problems with eating, speaking, playing, and learning. Children who have poor oral health often miss more school and receive lower grades than children who do not.^{cxii}

The National Survey of Children's Health Survey from the [Data Resource Center for Child & Adolescent Health](#) provides national and state data on a variety of health-related subjects pertinent to children and

families. According to the 2020-2021 survey, in the United States 76.8 percent of parents or guardians indicated the condition of their children's teeth was "excellent or very good," 17.3 percent rated the condition as "good," and 5.9 percent rated the condition as "fair or poor" (Table 66). North Carolina had a higher proportion of children who had an "excellent or very good" rating, at 78.6 percent, but a lower "good" rating, at 14.6 percent.

The survey also released respondents' data on children's oral health (toothaches, bleeding gums, decayed teeth, or cavities); 14.5 and 15 percent of the respondents in the United States and North Carolina, correspondingly, indicated their children had one or more oral health problems.

National Survey of Children's Health (2020-21)		
<i>Source: Data Resource Center for Child & Adolescent Health</i>		
How would you describe the condition of this child's teeth, age 1-17 years?	United States	North Carolina
Excellent or Very Good	76.8%	78.6%
Good	17.3%	14.6%
Fair or Poor	5.9%	6.8%
During the past 12 months, has this child had oral health problems such as toothaches, bleeding gums, decayed teeth, or cavities, age 1-17 years?	United States	North Carolina
One or More Oral Health Problems	14.5%	15.0%
No Oral Health Problems	85.5%	85.0%

Table 66: National Survey on Children's Health (2020-21)

According to the North Carolina Department of Health and Human Services (NC DHHS), Division of Public Health Oral Health section, North Carolina maintains [Safety Net Dental Clinics](#) throughout all 100 counties in the state to provide dental services on a sliding-fee scale to low-income patients who have no dental insurance and to those with NC Medicaid and NC Health Choice for Children. There are currently six clinics in the I-CARE, Inc. service area that provide these services: one in Alexander County, two in Catawba County, and three in Iredell County.^{cxii} NC DHHS's Oral Health section also provides a program called [Into the Mouths of Babies \(IMB\)](#). This program trains medical providers to deliver preventive oral health services to young children insured by NC Medicaid from the time of tooth eruption until the age of 3½. The services include oral evaluation and risk assessment, parent/caregiver counseling, fluoride varnish application, and referral to a dental home.

Dentist-to-Population Ratio

As per the [2022 County Health Rankings](#) (utilizing 2020 data), in North Carolina there were 6,198 dentists, of which there were nine in Alexander County, 95 in Catawba County, and 99 in Iredell County. The ratio of dentists per residents in North Carolina was 1 to 1,710. The ratio of dentists per residents in the I-CARE, Inc. service area ranged from 1 to 1,687 in Catawba County to 1 to 4,160 in Alexander County.

Dentists: Number and Ratio (2020)

Source: 2020 County Health Rankings

	Number	Ratio
North Carolina	6,198	1:1,710
Alexander County	9	1:4,160
Catawba County	95	1:1,687
Iredell County	99	1:1,876

Table 67: Dentists: Number and Ratio (2020)

Find a Dentist

[InsureKidsNow.gov](#) provides information on free- or low-cost health and dental coverage for children and teenagers through Medicaid and the Children's Health Insurance Program. To find a pediatric dentist who accepts Medicaid and CHIP, use the [Dentist Locator](#).

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Health and Wellness

Leading Causes of Death

According to data gathered from [CDC Wonder](#), the top three leading causes of death in North Carolina and the I-CARE, Inc. service area in 2021 were diseases of the heart, malignant neoplasms (cancer), and COVID-19. Table 68 illustrates the top 10 leading causes of death (sorted by state rank), as well as the death rates per 100,000 residents.

Leading Causes of Death Rates per 100,000 Residents (2021)				
Source: CDC Wonder				
	North Carolina	Alexander County	Catawba County	Iredell County
Diseases of the Heart	201.9	278.4	237.4	188.1
Malignant Neoplasm (Cancer)	191.7	267.4	234.4	178.7
COVID-19	129.0	267.4	197.3	157.3
Accidents (Unintentional Injuries)	80.9	62.8	101.4	47.9
Cerebrovascular Accidents	53.8	76.4	68.6	48.4
Chronic Lower Respiratory Diseases	44.9	114.6	69.3	57.8
Alzheimer Disease	40.4	Unreliable	39.6	42.7
Diabetes Mellitus	37.3	62.8	50.1	45.8
Nephritis, Nephrotic Syndrome, Nephrosis	21.3	54.6	32.2	25.5
Chronic Liver Disease and Cirrhosis	17.8	*	29.1	18.2
*No data available				

Table 68: Leading Causes of Death (2021)

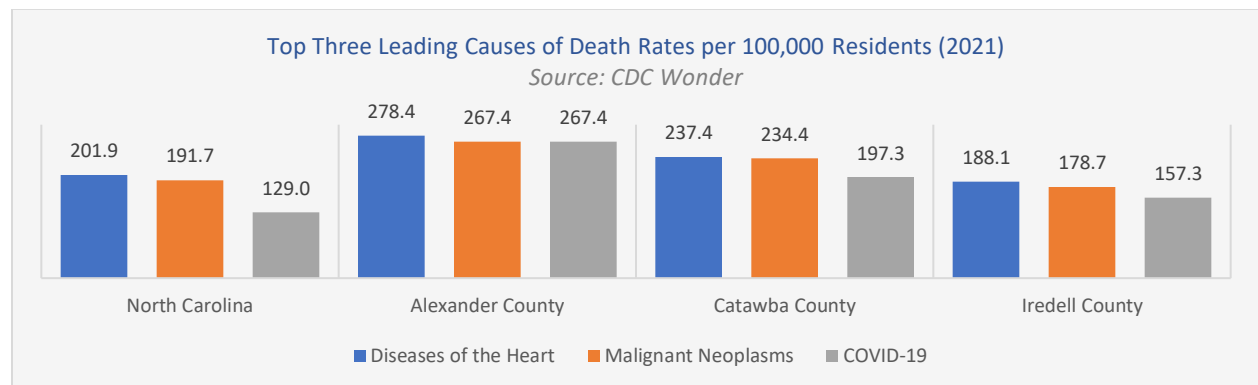


Figure 38: Leading Causes of Death

Maternal and Infant Health

Fertility/Birth Rates

According to U.S. census data, the birth rate per 1,000 women ages 15 to 50 in the United States is 51 (Figure 39). In North Carolina, Alexander, Catawba, and Iredell Counties, 51, 37, 49, and 64 women per 1,000, ages 15 to 50, respectively, gave birth in the past 12 months.

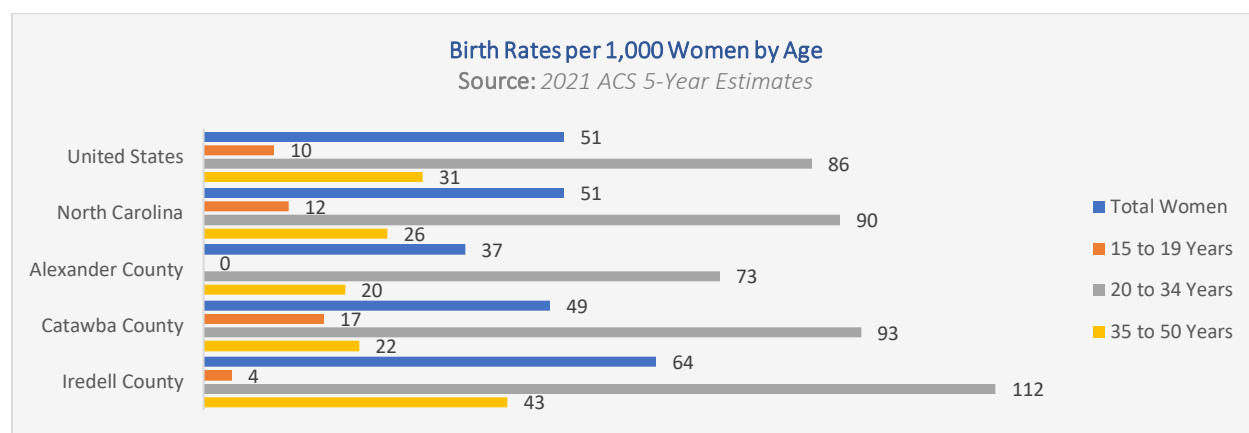


Figure 39: Birth Rates per 1,000 Women (2021 ACS 5-Year Estimates)

NOTE: Census estimates report on the number of women who gave birth in the past 12 months; the 5-Year Estimates reports on the average of five years from 2017 to 2021.

Teen Pregnancy

According to the [North Carolina State Center of Health Statistics](#), the total number of teens under the age of 18 who gave birth in the state in 2021 was 1,376, of which 39 births were in the I-CARE service area counties (Table 69).^{cxiii} For the state and the I-CARE service area counties, the proportion of births to teens under the age of 18 is approximately 1 percent of all live births.

Teen Births Under the Age of 18 (2021)		
Source: North Carolina State Center for Health Statistics (SCHS)		
	Number	Percentage
North Carolina	1,376	1.1%
Alexander County	4	1.1%
Catawba County	16	1.0%
Iredell County	19	1.0%

Table 69: Teen Births Under the Age of 18 (2021)

Prenatal Health Care

Based on data collected from the [North Carolina State Center for Health Statistics](#), in 2021, almost 4,600 pregnant women in the state did not have any prenatal care, 3.8 percent of total pregnant women (Table 70 and Figure 40). In Alexander and Iredell Counties, the percentages of women who did not have any prenatal care during their pregnancy were higher than the state, at 7.2 and 4 percent, respectively. Catawba County was lower than the state, at 2.4 percent.

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Prenatal Care Received (2021)

Source: North Carolina State Center for Health Statistics (SCHS)

	First Trimester	Second Trimester	Third Trimester	Unknown	None
North Carolina	88,948	20,538	5,352	1,066	4,597
Alexander County	299	38	18	1	15
Catawba County	1,389	181	55	8	41
Iredell County	1,396	307	83	7	140

Table 70: Prenatal Care Received (2021)

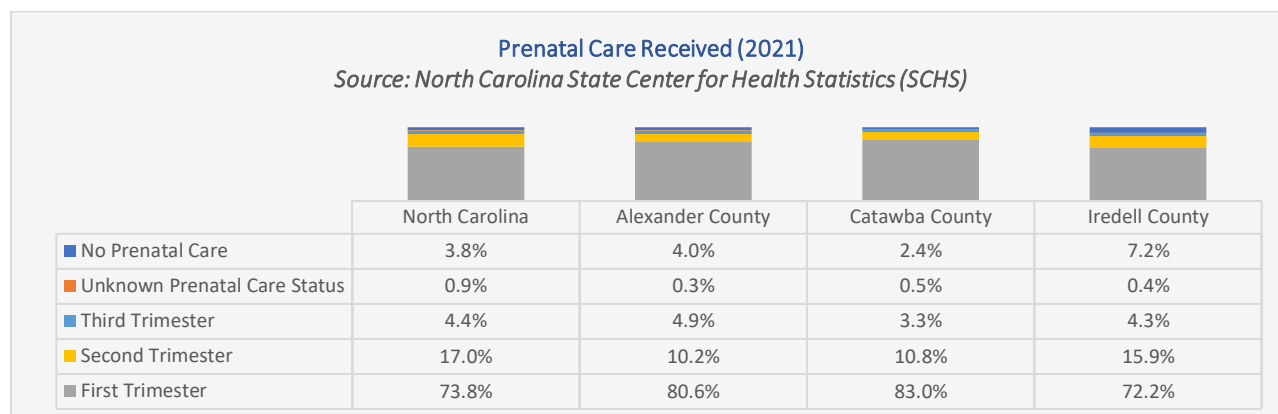


Figure 40: Prenatal Care Received (2021)

Low Birthweight Babies

Per the [North Carolina State Center for Health Statistics](#), in 2021 there were more than 120,000 live births in North Carolina, of which 9,432 were born with low birthweight (7.8 percent) and 1,973 with very low birthweight (1.6 percent).^{cxiv} In Alexander and Catawba Counties, the percentages were lower at 5.9 and 7.3, respectively. However, Iredell County had a higher percentage of low birthweight babies at 8.2 percent. Catawba (1.6) and Iredell (1.2) Counties had the same or lower percentages of very low birthweight babies than the state of North Carolina (1.6 percent); however, Alexander County had almost twice the rate of very low birthweight babies, at 3 percent.

Low Birthweight Babies (2021)

Source: North Carolina State Center for Health Statistics (SCHS)

	Live Births	Moderate Low Birthweight (1,500 – 2,499 Grams)		Very Low Birthweight (Less than 1,500 Grams)	
		Number	Percent	Number	Percent
North Carolina	120,501	9,432	7.8%	1,973	1.6%
Alexander County	371	22	5.9%	11	3.0%
Catawba County	1,674	123	7.3%	26	1.6%
Iredell County	1,933	159	8.2%	23	1.2%

Table 71: Low Birthweight Babies (2021)

Low birthweight is defined as less than 2500 grams or 5 1/2 pounds. It is also common to classify low birthweight births into **moderately low birthweight** (1500-2499 grams) and **very low birthweight** (less than 1500 grams or 3 1/3 pounds). These classifications are useful because they often correspond to clinical characteristics - increasing morbidities or illnesses with decreasing birthweight. Babies born too small are often born too soon. While the causes of low birthweight and preterm birth may be different in some cases, there is significant overlap within these populations of infants.

March of Dimes, <https://www.marchofdimes.org/peristats/Peristats.aspx>

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Infant Mortality

Based on data collected from the [North Carolina State Center for Health Statistics](#), 803 infants died in 2020 before reaching their first birthday, of which 19 were in the I-CARE, Inc. service area (Table 72).^{cxv}

Infant Mortality Number and Rate per 1,000 Infants (2020)

Source: North Carolina State Center for Health Statistics (SCHS)

	Number	Rate
North Carolina	803	6.9
Alexander County	1	2.9
Catawba County	7	4.4
Iredell County	11	5.8

Table 72: Infant Mortality (2020)

Fetal death: spontaneous intrauterine death of a fetus at any time during pregnancy

Perinatal death: death of an infant between 20 weeks gestation through 27 days after birth

Neonatal death: death of an infant less than 28 days of age

Postneonatal death: death of a newborn between 28 days and 1 year of age expressed per 1000 live births

Infant death: death of an infant under age 1

Prenatal Substance Exposure

The North Carolina Department of Health and Human Services (NC DHHS) has created [North Carolina's Opioid Action Plan](#) (NC OAP) to combat the opioid crisis. To meet the goals of the action plan, an [opioid dashboard](#) has been set up to track the progress on state, regional, and county levels.

According to data obtained from the opioid dashboard, in 2020 there were 4,471 newborns affected by substance abuse in North Carolina, a decrease of 9.1 percent from 2019 to 2020 (Table 73). Alexander and Iredell Counties experienced a decrease in newborns affected by substance abuse. Catawba County was the only county that had an increase, with the number of newborns affected by substance abuse rising 46.7 percent from 2019 to 2020.^{cxvi}

Newborns Affected by Substance Abuse (2019-20)

Source: North Carolina Department of Health and Human Services

	2019	2020	Change
North Carolina	4,919	4,471	-9.1%
Alexander County	29	19	-34.5%
Catawba County	75	110	46.7%
Iredell County	65	47	-27.7%

Table 73: Newborns Affected by Substance Abuse (2019-20)

Neonatal Abstinence Syndrome (NAS): "A group of conditions caused when a baby withdraws from certain drugs he's exposed to in the womb before birth."

March of Dimes, <https://www.marchofdimes.org>

Nutrition

The **Food and Nutrition Service (FNS)** is an agency of the United States Department of Agriculture established in 1969. FNS “works to end hunger and obesity through the administration of 15 federal nutrition assistance programs including WIC, Supplemental Nutrition Assistance Program (SNAP), and school meals.” The program’s mission is to “increase food security and reduce hunger by providing children and low-income people access to food, a healthful diet and nutrition education in a way that supports American agriculture and inspires public confidence. No American should have to go hungry.”

USDA Food and Nutrition Service, <https://www.fns.usda.gov/about-fns>

“**SNAP** provides nutrition benefits to supplement the food budget of needy families so they can purchase healthy food and move toward self-sufficiency.”

USDA Food and Nutrition Service, <https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program>

“The Special Supplemental Nutrition Program for **Women, Infants, and Children (WIC)** provides federal grants to states for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age 5 who are found to be at nutritional risk.”

USDA Food and Nutrition Service, <https://www.fns.usda.gov/wic>

“The **National School Lunch Program (NSLP)** is a federally assisted meal program operating in public and nonprofit private schools and residential child care institutions. It provides nutritionally balanced, low-cost or free lunches to children each school day. The program was established under the National School Lunch Act, signed by President Harry Truman in 1946.”

USDA Food and Nutrition Service, <https://www.fns.usda.gov/nslp>

Supplemental Nutrition Assistance Program (SNAP)

North Carolina uses the Electronic Benefit Transfer Card (EBT) system to issue SNAP benefits. During the month of January 2023, more than 831,000 cases were active in North Carolina, with a total of 1,647,871 participants (Table 74). In the I-CARE service area, there were a total of 22,768 cases with 46,794 participants.^{cxvii}

FNS Cases and Participants (2023)

Source: NC DHHS

	Cases	Participants
North Carolina	831,280	1,647,871
Alexander County	2,581	5,311
Catawba County	12,598	24,613
Iredell County	7,589	16,870
Total I-CARE Service Area	22,768	46,794

Table 74: Households Receiving Food Stamps/SNAP (2023)

Women, Infants, and Children (WIC)

The special supplemental nutrition program for [Women, Infants, and Children \(WIC\)](#) is a federal program providing support to low-income pregnant, nursing and non-nursing postpartum women and children, ages 0 to 5. The program is designed to provide supplemental foods, nutrition education, and referrals for health care services. As of December 2022, average monthly WIC participation in North Carolina reached 262,520. Approximately 56 percent of WIC recipients are children (147,769), 22 percent are women (57,147), and 22 percent are infants (57,604).^{cxviii}

National School Lunch Program

The North Carolina school system's Free and Reduced-Price Lunch Program provides meals to low-income children attending public schools. During the 2019-20 school year (most recent data available at the time of this study) 57.7 percent of students in North Carolina schools participated in the Free and Reduced-Price Lunch Program (Table 75).^{cxix} In Alexander, Catawba, and Iredell Counties, 44.1, 50, and 40.4 percent of students in the public school system, respectively, participated in the Free and Reduced-Price Lunch Program.

National School Lunch Program (2019-20)

Source: North Carolina Department of Public Instruction (NCDPI)

	Final Average Daily Membership (ADM)	Free	Reduced	Total Free/Reduced Percentage
North Carolina	1,460,703	779,818 (53.4%)	62,943 (4.3%)	57.7%
Alexander County	5,280	1,982 (37.5%)	349 (6.6%)	41.1%
Catawba County	16,025	6,782 (42.3%)	1,237 (7.7%)	50.0%
Iredell County	20,624	7,104 (34.4%)	1,232 (6.0%)	40.4%

Table 75: National School Lunch Program (2019-20)

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Nutrition

Food Insecurity

Food deprivation and its measure are often referred to as *Food Insecurity*.

Food insecurity happens when a healthy lifestyle for all members of a household is not sustainable due to inconsistent food access. Whether short- or long-term, food insecurity indicates when people cannot purchase food due to monetary restrictions.

In 2020 in the United States, more than 38 million residents lived in a household in which they did not always know where they would find their next meal. An estimated 11.7 million children under the age of 18 in the United States lived in homes that were unable to consistently access enough and nutritious foods, a rate of 16.1 percent (Figure 41).^{CXX}

In North Carolina 12 percent of the total population lived without access to enough and nutritious foods. The food insecurity rate for children was even higher, 17.1 percent, which accounted for 394,300 children (Figure 42).

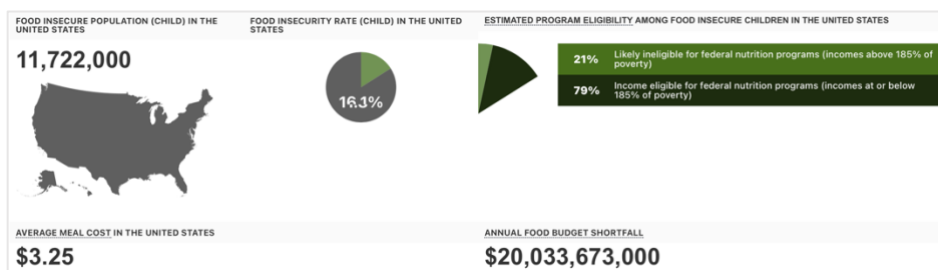


Figure 41: Food Insecurity in United States (2020)

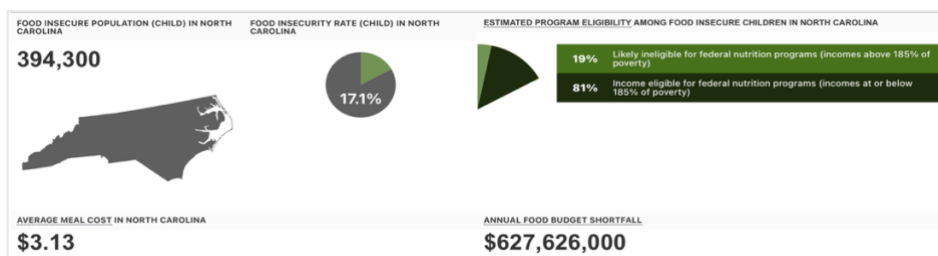


Figure 42: Food Insecurity in North Carolina (2020)

Of the 394,300 children experiencing food insecurity in North Carolina, a combined total of 13,810 were in the I-CARE service area counties. The food insecurity rate for children was higher in Alexander and Catawba Counties than the state average, 18.2 and 17.7 percent, respectively. The food insecurity rate for children in Iredell County was lower, at 15.2 percent.^{CXXi}

Food Insecurity (2020)

Source: Feeding America

	Food Insecurity Rate (Full Pop.)	Child Food Insecurity Rate	Estimated Number of Food Insecure Children
North Carolina	12.0%	17.1%	394,300
Alexander County	13.5%	18.2%	1,370
Catawba County	13.2%	17.7%	6,210
Iredell County	11.6%	15.2%	6,230

Table 76: Food Insecurity (2020)

[CLICK HERE to find your local food bank.](#)

Food Deserts

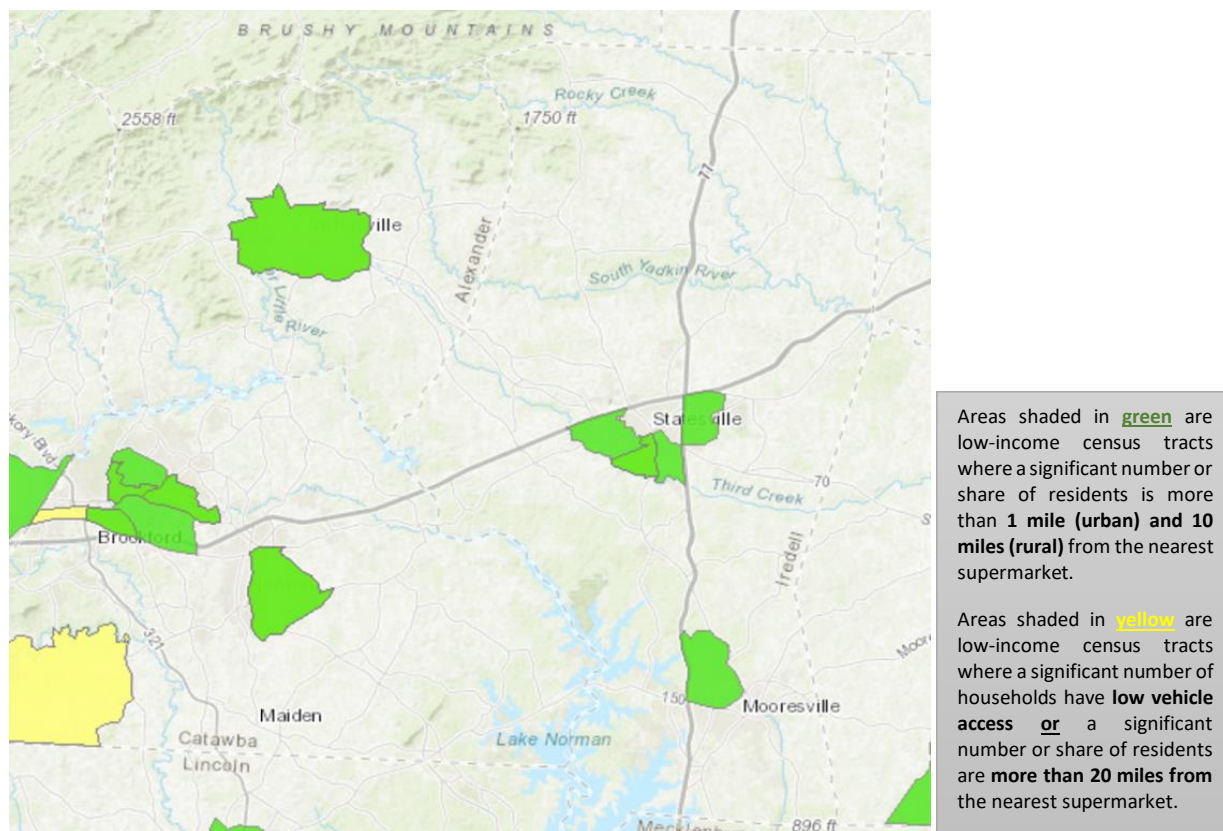
Food deserts are areas where it is difficult to access healthy food, either from cost restrictions or lack of availability. In these areas, whether urban or rural, there may be no food available for purchase, or, if they do have convenience stores or fast food, grocery stores with nutritious choices are absent.

A 1-mile marker is used in densely populated urban areas, while a 10-mile marker is used in more sparsely populated rural areas. In the United States it is estimated that 23.5 million people live in food deserts, of which 13.5 million are low-income families.^{cxix}

The USDA, Treasury, and Health and Human Services have defined a food desert as a census tract with a substantial share of residents who live in low-income areas that have low levels of access to a grocery store or healthy, affordable food retail outlet. Census tracts qualify as food deserts if they meet low-income and low-access thresholds:

1. They qualify as "**low-income communities**" based on having: a) a poverty rate of 20 percent or greater, OR b) a median family income at or below 80 percent of the area median family income; AND
2. They qualify as "**low-access communities**" based on the determination that at least 500 persons and/or at least 33 percent of the census tract's population live more than one mile from a supermarket or large grocery store (10 miles, in the case of non-metropolitan census tracts).

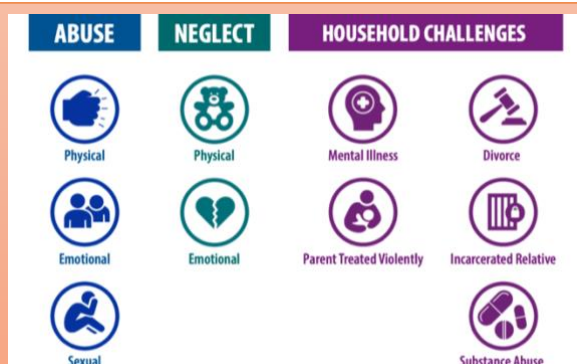
[FOOD ACCESS RESEARCH ATLAS](#) (Click on title for interactive map.)



Adverse Childhood Experiences (ACEs)

“Adverse childhood experiences, or ACEs, are preventable, potentially traumatic events that occur in childhood (0-17 years) such as neglect, experiencing or witnessing violence, and having a family member attempt or die by suicide. Also included are aspects of a child’s environment that can undermine their sense of safety, stability, and bonding, such as growing up in a household with substance use; mental health problems; or instability due to parental separation or incarceration of a parent, sibling or other member of the household.” (Figure taken from the FY2021-24 Adverse Childhood Experience Prevention Strategy, developed by the National Center for Injury Prevention and Control.)

Centers for Disease Control, <https://www.cdc.gov/>



Safety and Crime

According to the [North Carolina State Bureau of Investigation](#), in 2021 the index crime rate in North Carolina was 2,586.4 per 100,000 people. Of the total crime index in North Carolina the rate for violent and property crimes per 100,000 people was 430.2 and 2,156.1, respectively (Table 77). Compared with North Carolina, the rate of violent crime for all counties in the I-CARE service area is lower, while the property crime rate for Catawba County is higher than the state rate.

Crime Rates per 100,000 People (2021)

Source: North Carolina State Bureau of Investigation (NCSBI) - Annual Summary Report of 2019 - Uniform Crime Reporting Data

	Index Crime	Violent Crime	Property Crime
North Carolina	2,586.4	430.2	2,156.1
Alexander County	1,440.7	222.7	1,218.0
Catawba County	2,802.5	354.4	2,448.1
Iredell County	1,866.4	315.5	1,550.9

Table 77: Crime Rates per 100,000 People (2021)

In the FBI’s Uniform Crime Reporting (UCR) Program, **violent crime** is composed of four offenses: murder and nonnegligent manslaughter, rape, robbery, and aggravated assault. Violent crimes are defined in the UCR Program as those offenses that involve force or threat of force.

In the FBI’s Uniform Crime Reporting (UCR) Program, **property crime** includes the offenses of burglary, larceny-theft, motor vehicle theft, and arson. The object of the theft-type offenses is the taking of money or property, but there is no force or threat of force against the victims. The property crime category includes arson because the offense involves the destruction of property; however, arson victims may be subjected to force.

Prevalence of Drug and/or Alcohol Abuse

Based on data collected from the Centers for Disease Control and Prevention’s [CDC Wonder](#), a system for disseminating public health data and information, in 2021 there were more than 111,000 drug-induced deaths and more than 54,000 alcohol-induced deaths in the United States, with corresponding rates of 33.5 and 16.3 per 100,000 residents (Table 78).

North Carolina reported 4,131 drug-induced deaths (a rate of 39.2 per 100,000 residents) of which 10 were in Alexander County, 89 were in Catawba County and 41 were in Iredell County. Statewide, there

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were 1,638 alcohol-induced deaths (a rate of 15.5 per 100,000 residents), of which 37 were in Catawba County and 24 were in Iredell County.^{cxxiii}

Drug- and Alcohol-Induced Deaths (Number and Rates per 100,000 Residents) (2021)

Source: CDC Wonder

	Total Drug-Induced		Total Alcohol-Induced	
	Number	Rate	Number	Rate
United States	111,219	33.5	54,258	16.3
North Carolina	4,131	39.2	1,638	15.5
Alexander County	10	0.0	*	*
Catawba County	89	55.0	37	22.9
Iredell County	41	21.4	24	12.5

Note: * No data reported

Table 78: Drug- and Alcohol-Induced Deaths (2021)

Opioid Epidemic

Opioid Prescriptions

According to data gathered from the [Centers for Disease Control and Prevention](#) (CDC), in North Carolina, Alexander, Catawba, and Iredell Counties, 52.8, 7.1, 104.6, and 74.4 retail opioid prescriptions were dispensed per 100 persons in 2020 respectively.

Opioid Prescriptions Key Highlights

- “The overall national opioid dispensing rate declined from 2012 to 2020, and in 2020, the dispensing rate had fallen to the lowest in the 15 years, for which we have data at 43.3 prescriptions per 100 persons (total of more than 142 million opioid prescriptions).
- However, in 2020, dispensing rates continued to remain very high in certain areas across the country.
- In 3.6 percent of U.S. counties, enough opioid prescriptions were dispensed for every person to have one.
- While the overall opioid dispensing rate in 2020 was 43.3 prescriptions per 100 people, some counties had rates that were nine times higher than that.”

Centers for Disease Control and Prevention (CDC), <https://www.cdc.gov/>

Pill Distribution

The *Washington Post* gained access to the “database maintained by the Drug Enforcement Administration that tracks the path of every single pain pill sold in the United States, by manufacturers and distributors to pharmacies in every town and city.”^{cxxiv}

According to the data retrieved from the *Washington Post* dashboard, from 2006 to 2014, more than 3.4 million prescription pain pills were supplied in North Carolina, of which more than 13, 92, and 72 million pills were supplied in Alexander, Catawba, and Iredell Counties, respectively, enough for 40, 66, and 51 pills, correspondingly, per person per year.

The following link: https://www.washingtonpost.com/graphics/2019/investigations/dea-pain-pill-database/#download-resources?itid=lk_inline_manual_6 provides access to the online dashboard.

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Child Abuse and Neglect

Based on data collected from the University of North Carolina in Chapel Hill, [Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina](#), during 2021-22, there were more than 55,000 children with investigated reports of child abuse and neglect in North Carolina, of which 193, 1,009, and 975 were in Alexander, Catawba, and Iredell Counties, respectively. Approximately half of the children with investigated reports of abuse and neglect in North Carolina, Alexander, and Catawba Counties were under the age of 5; in Iredell County 41.1 percent of children with investigated reports were under the age of 5 (Table 79).^{cxv}

Number of Children with Investigated Reports of Abuse and Neglect - Unique Number of Reports (Longitudinal Data) (July 2021 – June 2022)

Source: Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina

	Age on First Report					Age on First Report				
	0-5	6-12	13-17	DOB Unknown	Total	0-5	6-12	13-17	DOB Unknown	
North Carolina	26,806	17,754	9,855	1,084	55,499	48.3%	32.0%	17.8%	2.0%	
Alexander County	100	63	30	-	193	51.8%	32.6%	15.5%	0.0%	
Catawba County	471	294	175	69	1,009	46.7%	29.1%	17.3%	6.8%	
Iredell County	401	329	217	28	975	41.1%	33.7%	22.3%	2.9%	

Table 79: Number of Children with Investigated Reports of Abuse and Neglect (7/2021-6/2022)

Foster Care

Based on data collected from the University of North Carolina in Chapel Hill, [Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina](#), more than 16,000 children were placed into foster care between October 2021 and September 2022, of which 85, 338, and 145 children were in Alexander, Catawba, and Iredell Counties, respectively.^{cxvi} More than one-third of children in foster care in North Carolina and the I-CARE service area were between the ages of 0 and 5 (Table 80).

Annual Number of Children in Custody by Age (October 2021 – September 2022)

Source: Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina

	# of Children in Custody	Ages				Percent of Children Ages 0-5
		0-5	6-12	13-17	18+	
North Carolina	16,085	5,865	4,885	3,749	1,586	36.5%
Alexander County	85	37	28	15	5	43.5%
Catawba County	338	117	100	80	41	34.6%
Iredell County	145	64	44	29	8	44.1%

Children in Custody by Age 2022

Source: University of North Carolina in Chapel Hill, School of Social Work

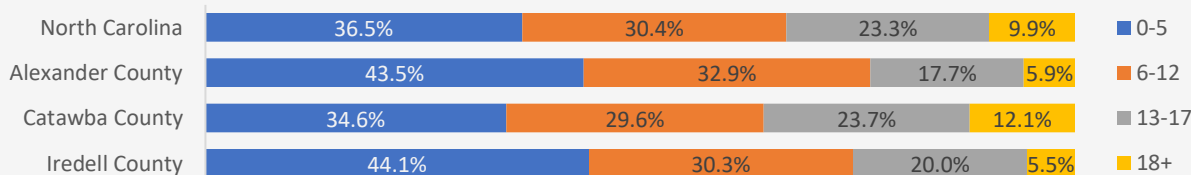


Table 80: Annual Number of Children in Custody by Age (10/2021-9/2022)

MODULE 4: WHAT OTHER ORGANIZATIONS SERVE THESE COMMUNITY(IES)?

Federal- and/or State-Funded Preschool Programs

Based on the 2021 State of Preschool report, issued by the [National Institution for Early Education Research \(NIEER\)](#), in the United States approximately 29 percent of 4-year-olds, and 5 percent of 3-year-olds were served in state-funded preschool programs in 2020-21.

From the [Executive Summary](#):

“The pandemic has highlighted and intensified longstanding problems in early childhood education (ECE). The pandemic wiped out a decade of progress increasing enrollment in state-funded preschool programs. Large enrollment losses also afflicted preschool special education and Head Start (down by one-third). Yet, even after the nation recovers from the pandemic, most children will lack access to publicly-funded preschool programs, and access to adequately funded programs that meet basic quality standards will remain even less common. Without major changes in public policies, there is no prospect for access to high-quality preschool to meaningfully improve in most of the nation any time soon.” ^{cxxvii}

Nationwide there are 63 pre-K programs in 44 states and Washington, D.C.; enrollment in state-funded pre-K programs declined in almost all states (Figure 43). During the 2020-21 school year, approximately 1.36 million children were served in pre-K programs, down from 1.64 million the year before. Of the 1.36 million children served, 1.15 million were 4-year-olds and 187,000 were 3-year-olds. Total state pre-K spending during the 2020-21 school year was more than \$9.4 billion with an average state spending of \$7,011 per child.

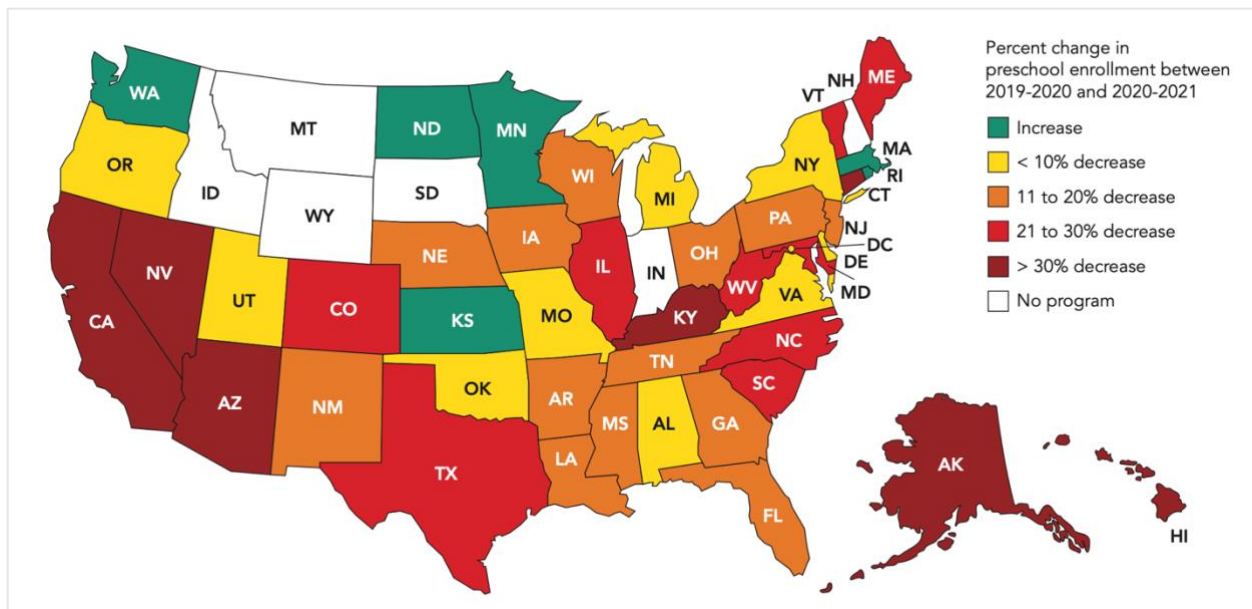


Figure 43: Pre-K Enrollment Change (2019-20 to 2020-21)

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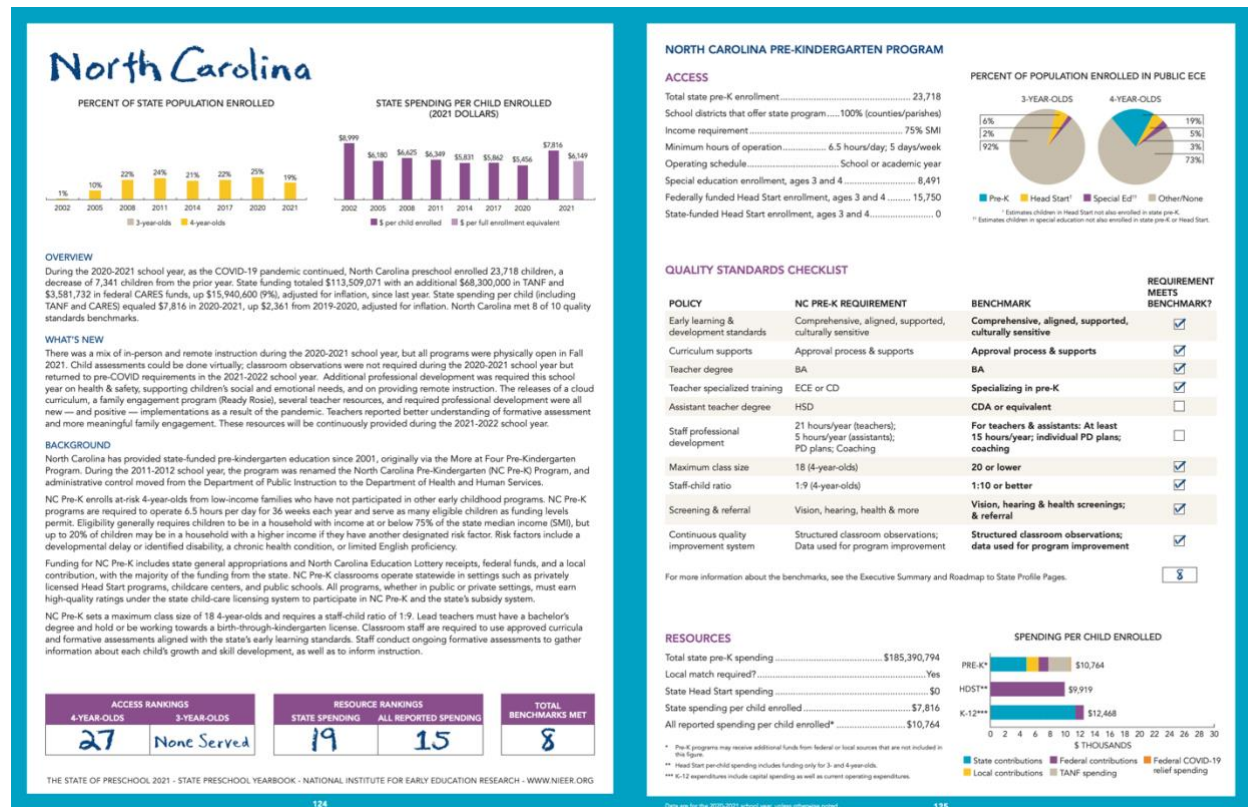
MODULE 4: What other organizations serve these community(ies)?

Federal- and/or State-Funded Preschool Programs

North Carolina Overview

North Carolina ranks 27th for access and enrollment of 4-year-olds and does not serve any 3-year-olds. During the 2020-21 school year, programs enrolled 19 percent of all 4-year-old children. The state, however, ranked 19th in state spending, with per child spending of \$7,816 and has met **eight of the current 10 quality standards benchmarks**. During the 2020-21 program year, 23,718 children were enrolled in pre-K programs, 8,491 in special education programs, and 15,750 in federally funded Head Start programs. Total state funding for the North Carolina Pre-Kindergarten Program was \$185,390,794.

Click for full size: [North Carolina State Profile](#).



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MODULE 4: What other organizations serve these community(ies)?

Federal- and/or State-Funded Preschool Programs

Access and Enrollment

Based on data collected by the [Child Care Services Association](#), as of February 2023, 176,666 children, ages 0-5, were enrolled in child care programs statewide (both centers and family child care homes), 500 of whom were in Alexander County, 2,626 in Catawba County, and 2,351 in Iredell County (Table 81). Statewide there are 1,189 North Carolina Pre-K classrooms and 500 sites providing Head Start or Early Head Start services. Combined, the I-CARE service area counties report a total of 41 pre-K classrooms and 11 sites providing Head Start or Early Head Start services. ^{cxxviii}

Child Care Slots (February 2023)				
<i>Source: Child Care Services Association</i>				
	North Carolina	Alexander County	Catawba County	Iredell County
Licensed Child Care Programs	5,512	18	94	85
Number of Children Enrolled in Licensed Child Care Centers Birth to 3	63,585	166	858	815
Number of Children Enrolled in Licensed Child Care Centers 3 to 5	108,292	334	1,731	1,466
Birth to 3-Year-Old Children Enrolled in Licensed Child Care Homes	2,707	0	16	37
3- to 5-Year-Old Children Enrolled in Licensed Child Care Homes	2,082	0	21	33
Total Children Ages Birth to 5 Enrolled in Licensed Child Care Centers and Homes	176,666	500	2,626	2,351
NC Pre-K Classrooms	1,189	4	23	14
Sites Providing HS or EHS Services	500	4	3	4

Table 81: Child Care Slots (February 2023)

Children Potentially Needing Child Care

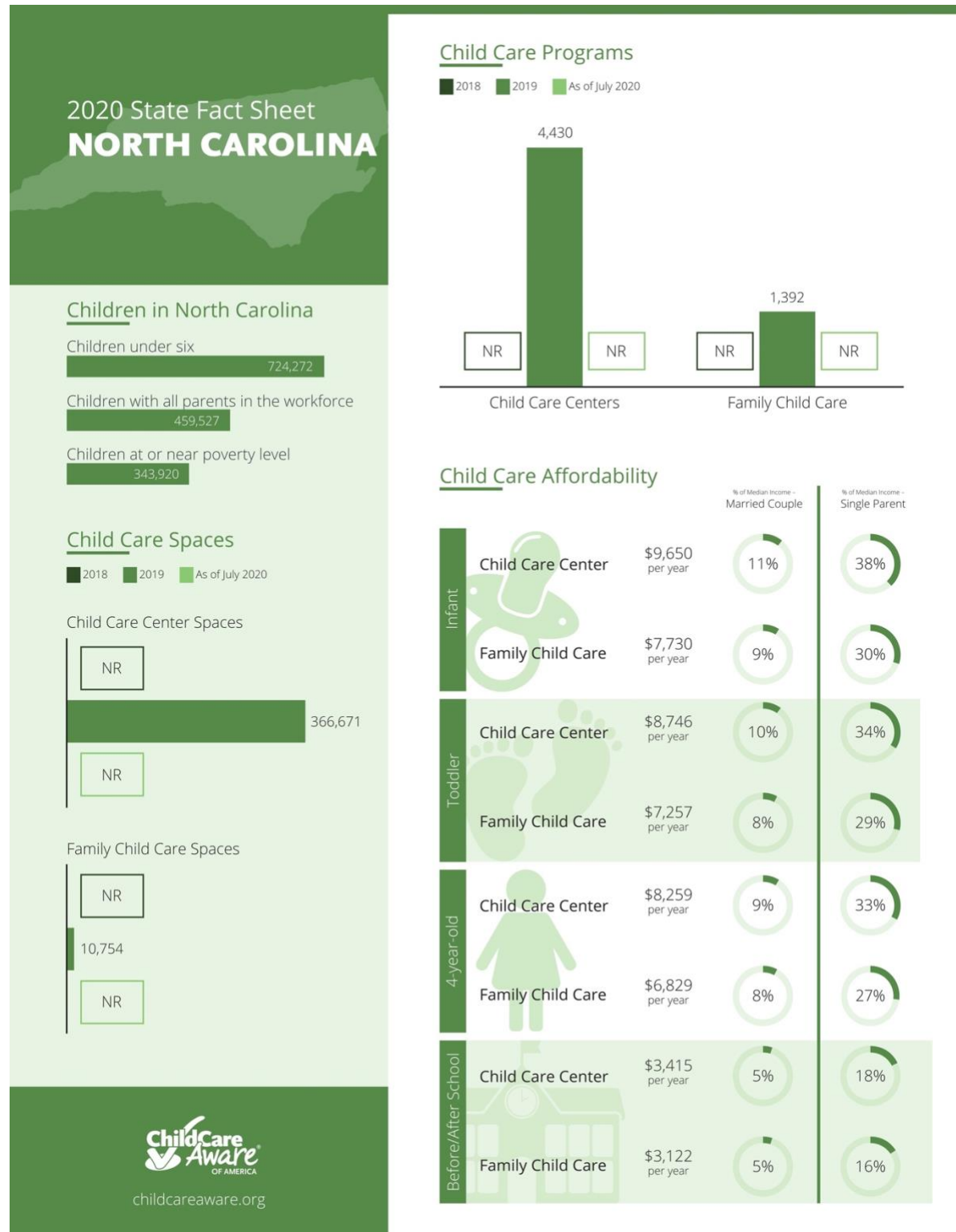
Based on census data, in North Carolina 454,879 children under the age of 6 live in single- or dual-parent households, where one or both parent(s) are in the labor force, indicating that this group potentially needs child care, representing 66.5 percent of all children under age 6 (Table 82). Of those 454,879 children, 15,801 are in the I-CARE service area counties, representing 65.9 to 71.2 percent of children under age 6.

Children Under Age 6, Parent(s) in Labor Force			
<i>Source: 2021 ACS 5-Year Estimates</i>			
	Number of Householders	Number of Children	Percentage of Children
United States	22,399,131	14,992,885	66.9%
North Carolina	684,205	454,879	66.5%
Alexander County	1,940	1,278	65.9%
Catawba County	10,038	7,148	71.2%
Iredell County	11,099	7,375	66.4%

Table 82: Children Under Age 6, Parent(s) in Labor Force (2021 ACS 5-Year Estimates)

North Carolina Licensed Child Care Programs

The data below is from the 2020 State Factsheet, which reflects 2019 calendar year data.



Cost of Child Care

Based on [Child Care Aware® of America](#), the annual cost of infant child care in North Carolina, in a center-based program, is \$11,202 (compared with public college tuition, which is \$7,389). The cost of care for an infant and a 4-year-old is \$10,644 per year. The U.S. Department of Health and Human Services recommends that child care should cost no more than 7 percent of a household's income.^{cxxix} Single parents and married couples earning North Carolina's median income pay 41 and 12 percent of their income, respectively, for center-based infant child care.^{cxxx}

"CCAoA's [Child Care Affordability Analysis](#) found that in 2021:

- The national average price of child care was around \$10,600 annually. This would comprise 10 percent of a married-couple family's average annual income and 35 percent of a single parent's income.
- The increase in child care prices slightly outpaced inflation, which was much higher than the inflation rate in prior years.
- In most states, the price of child care for two children exceeded annual housing payments by 28 percent to over 100 percent.
- Similarly, the price of child care for an infant in a center exceeded annual in-state tuition at a public university in 34 states.
- Child care for two children in a center would cost a child care workforce professional anywhere from 56 percent to over 100 percent of annual income.
- Child care was more expensive than most other household expenses such as housing and health care in all U.S. regions."

Child Care Aware, <https://www.childcareaware.org/catalyzing-growth-using-data-to-change-child-care/#ChildCareAffordability>

Child Care Assistance Program

"The Child Care and Development Block Grant Act (CCDBG) is a law that authorizes the Child Care and Development Fund (CCDF) program, which is administered by states, territories, and tribes. States use CCDF to provide financial assistance to low-income families to access child care so they can work or attend job training or educational programs. States can also use CCDF dollars to invest in improving quality through teacher workforce, supporting child care programs to achieve higher standards, and providing consumer education to help parents select child care that meets their families' needs. In short, CCDBG Act is the law and CCDF is the program."^{cxxxi}

The Center for American progress reports that due to insufficient funding, only one in nine eligible children under the age of 6 receives benefits from the CCDF program.^{cxxxii} New Mexico reports the highest participation rate, with 27.3 percent of subsidy-eligible children receiving benefits from the program, while Virginia reports the lowest participation rate at 5.7 percent. In North Carolina only 13.4 percent of eligible children receive benefits from the CCDF program.^{cxxxiii} The [Build Back Better Act](#) would greatly increase the number of families receiving child care assistance. In the United States less than 6 percent of working families currently receive a child care subsidy, supporting care for 842,547 children, of which 30,689 children are in North Carolina. With the Build Back Better Act, nationwide, 93.2 percent of working families would receive a child care subsidy, supporting care for more than 13.3 million children of which almost 406,123 are in North Carolina.^{cxxxiv}

Child Care Subsidy

Based on data collected by the [Child Care Services Association](#), North Carolina received more than \$343 million in federal and state funds, of which approximately \$595K went to Alexander County, \$3.7 million

I-CARE, Inc. - 2023 Community Assessment

MODULE 4: What other organizations serve these community(ies)?

North Carolina Licensed Child Care Programs

went to Catawba County, and \$3.9 million went to Iredell County. As of February 2023, a total of 58,404 children were served with child care subsidy dollars in the state; however, more than 5,300 children remained on the waiting list. Combined, in the I-CARE service area, 1,522 children were served with subsidy funds, and no children were reportedly on the waiting list (Table 83).^{CXXXV}

Child Care Subsidy (February 2023)

Source: Child Care Services Association

	North Carolina	Alexander County	Catawba County	Iredell County
Money Received in Federal and State Funds	\$343,730,985	\$595,880	\$3,773,652	\$3,898,249
Children Served (Ages 0-12)	58,404	146	722	654
On Waiting List (Ages 0-12)	5,384	0	0	0

Table 83: Child Care Subsidy (February 2023)

Licensed Child Care Programs and Ratings

According to the February 2023 Child Care report from the [Child Care Services Association](#), North Carolina has 5,512 licensed child care programs, of which there are 18 in Alexander County, 94 in Catawba County, and 85 in Iredell County. More than two out of three child care centers (70 percent) in North Carolina have a four- or five-star rating. In Catawba and Iredell Counties, four out of five child care centers have a four- or five-star rating (81 and 80 percent, respectively) compared with only 44 percent in Alexander County.

The market rate for child care for a 2-year-old in a four-star facility is \$867 per month in North Carolina and between \$679 and \$972 in the I-CARE service area. A single mother with one child earning \$36,624 or less per year is eligible to receive a child care subsidy. Those who are unable to receive a child care subsidy due to lack of funds spend 28 percent of their income on child care in North Carolina, and approximately 22 to 32 percent of their income in the I-CARE service area.^{CXXXVI}

Licensed Child Care Programs (February 2023)

Source: Child Care Services Association

	North Carolina	Alexander County	Catawba County	Iredell County
Licensed Child Care Programs	5,512	18	94	85
Number of Centers	4,278	18	85	69
Number of Family Child Care Homes	1,233	0	9	16
% of 4-5 Star Centers	70%	44%	81%	80%
% of 4-5 Star Family Child Care Homes	55%	0%	78%	31%
4-Star Market Rate for 2-Year-Olds	\$867	\$679	\$759	\$972
Percentage of Gross Income for Child Care	28%	22%	25%	32%

Table 84: Licensed Child Care Programs (February 2023)

For detailed data on individual child care centers by county, please visit:

<https://ncchildcare.ncdhhs.gov/County/Child-Care-Snapshot/Child-Care-Statistical-Report>

[LINK to the I-CARE Service Area Child Care Analysis Report of February 2023](#)

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Resources, Collaborative/Formal Agreements, and Partnerships

CSBG/LIHEAP External Partners and Services

Employment initiatives

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
NC Works	Local sites across the state	1-855-629-6757 https://www.ncworks.gov/vosnet/default.aspx	Finding a job, creating a resume, job fairs, education, and training	Statewide program	Yes, Formal
NC Commerce Veteran Services / Rodney Woody	403 Conover Station Southeast Conover/Taylorsville, NC 28613	828-466-5535 rodney.woody@commerce.nc.gov	Veteran Services	Alexander, Catawba	Yes, Informal
Goodwill Industries	124 Fourth Crescent Place Statesville, NC 28625	828-466-5535 https://www.goodwillnwc.org	Goodwill Industries provides career connection, abilities services, Department of Social Services WorkFirst, project re-entry assistance, environment programs, skills classes, and employability lab usage with Mitchell Community College.	Iredell	
I-CARE, Inc. Community Services Block Grant (CSBG) Program	1415 Shelton Ave. Statesville, NC 28677	704-873-5005 https://www.icare-inc.org	The I-CARE, Inc. CSBG program assists low-income families / individual adults to become self-sufficient by providing training in financial management, job readiness, educational assistance, employment assistance, and housing assistance.	Alexander, Catawba, Iredell	Yes, Formal
Centralina Workforce Development Board	9815 David Taylor Dr Charlotte/Statesville NC 28262	704-872-8141 https://centralina.org/departments-and-affiliates/workforce-development-board-department/	Workforce Development employment services	Iredell	Yes, Memorandum of Understanding (MOU)
TransTech Inc.	1261 US-70 suite A Newton, NC 28658	704-348-2717 https://trans-tech.net/cdl-truck-driving-school-newton-nc/	Vocational training	Catawba	Yes, Formal
Council on Aging-Senior Community Service Employment Program	344 East Front Street Statesville, NC 28677	704-873-5171 https://www.iredellcoa.org/scsep/	Employment Program, "Program that helps low-income, unemployed individuals 55+ find work"	Iredell	No
Alexander County Economic Development Corps	119 NC HWY 16 Taylorsville, NC 28681	828-352-7756 https://alexanderedc.org/	Economic development services	Alexander	Yes, Informal

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Princella Lewis	3000 Shangri La Dr Conover, NC 28613	828-464-1108	Will provide free haircuts to males for job interviews	Alexander	Yes, Formal
Latina Nails/ Laura Magana	562 W 24th St Newton, NC 28658	828-465-2959	Provides hair, nail, and makeup services to the community	Catawba	Yes, Formal
Xavier's Barberstyling	1120 Shelton Ave. Statesville, NC 28677	704-878-6560	Provides trim, cut, shape, and taper hair services utilizing a variety of utensils such a scissors, razors, clippers, and combs. In addition, they provide facial hair maintenance, custom shaves, and a number of grooming services.	Iredell	Yes, Formal
Division of Vocational Rehabilitation Services / Nancy Jordan	223 School Dr. Taylorsville, NC 28681	828-639-6425 https://www.ncdhhs.gov/divisions/vocational-rehabilitation-services nancy.jordan@dhhs.nc.gov	Rehabilitation services for individuals with impediments to employment and daily living.	Statewide	Yes, Informal
Western Piedmont Council of Governments	1880 2 nd Avenue NW Hickory, NC 28601	828-322-5991 https://www.wpcog.org	NC Works Career Services	Catawba	Yes, Formal

Availability of ABE/GED programs

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Catawba Valley Community College	230 Industrial Blvd Taylorsville, NC 28681	828-632-8221 https://www.cvcc.edu/	ABE Academy, Adult High School, GED, and English as a Second Language	Alexander & Catawba	Yes, MOU
Mitchell Community College	701 W. Front Street Statesville, NC 28677	704-878-3220 https://mitchellcc.edu	ABE, GED, and English as a Second Language	Iredell	Yes, MOU
Goodwill Industries	124 Fourth Crescent Place Statesville, NC 28625	828-466-5535 https://www.goodwillnwc.org	GED in partnership with Mitchell CC	Iredell	
Goodwill Industries	413 Thornburg Drive SE Conover, NC 28613	828-466-5535 https://www.goodwillnwc.org	GED in partnership with Catawba Valley CC	Catawba	

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Post-secondary educational opportunities

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Catawba Valley Community College, Sharon Cox scox@cvcc.edu	230 Industrial Blvd Taylorsville, NC 28681	828-632-8221 https://www.cvcc.edu	Secondary education	Alexander & Catawba	Yes, MOU
Mitchell Community College	701 W. Front Street Statesville, NC 28677	704-878-3220 https://mitchellcc.edu	Provides vocational/post-secondary education	Iredell	Yes, MOU
Rowan Cabarrus Community College	1333 Jake Alexander Blvd Salisbury, NC 28146	704-216-7222 https://www.rccc.edu	Vocational training		Yes, Formal
Southern College of Health Science	206 N Cannon Blvd, Kannapolis, NC 28083	704-707-3965	Vocational training		Yes, Formal
Plush Kutz Barber College	3248 20th Ave SE, Newton, NC 28658	828-994-4246 http://pkcollege.net	Barber training	Catawba	Yes, Formal
Stepping Stone Medical	218 W Broad St suite a, Statesville, NC 28677	833-372-9253 https://www.ssphebotomy.com	Healthcare training	Iredell	Yes, Formal
Lenoir Rhyne University	625 7 th Avenue NE Hickory, NC 28601	828-328-1741 https://www.lr.edu	4-year university, which offers bachelor's and graduate level degrees	Catawba	No

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Availability of before and after school care programs

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Alexander County Partnership for Children	1565 NC Hwy 90W Taylorsville, NC 28681	828-632-3799 https://alexanderchildren.org	Childcare information	Alexander	Yes, Formal
Iredell County Department of Social Services/Deb Christopher	549 Eastside Drive Statesville, NC 28625	704-873-5631 https://www.iredellcountync.gov/299/Social-Services	Provides subsidy vouchers for before and after school program, food and nutrition benefits for families, and Medicaid services for children and families; assists with child support, and provides TANF benefits	Iredell	Yes, Formal
NC Center for After School Programs	1017 Main Campus Drive Suite 2300 Raleigh, NC 27606	919-781-6833 https://ncafterschool.org	Database of afterschool programs across the state	Statewide	No
Catawba County Schools	2285 N. Anderson Avenue Newton, NC 28658	828-464-8333 https://www.catawbасchools.net/parents-students/quest	Before and after school care	Catawba	No
Catawba County Partnership for Children	738 4 th Street SW Hickory, NC 28602	828-695-6505 https://catawbakids.com/#	Childcare information	Catawba	Yes, Formal
YMCA of Northwest North Carolina	301 N Main St. Winston Salem, NC 27101	336-777-8055 https://ymcanwnc.org/children-and-teens/before-and-after-school-academy	Before and after school care	Iredell	No
Boys and Girls Club of the Piedmont	1001 Cochran Street Statesville, NC 28677	704-397-2429 http://www.piedmontbgc.org/the-after-school-program	After school program	Iredell	No
City of Statesville	1875 Simonton Rd Statesville, NC 28687	704-878-3429 https://www.statesvillenc.net/departments/recreation_parks/programs_special_events/after_school_camps	After school and summer programs, K-5 years old	Iredell	No
Iredell County Partnership for Young Children	734 Salisbury Rd Statesville, NC 28677	804-878-9961 https://www.iredellsmartstart.org/region9-looking-for-childcare	Childcare information	Iredell	Yes, Formal
YMCA of Alexander County	260 Black Oak Ridge Road Taylorsville, NC 28681	828-632-9699 https://www.ymca.org/locations/ymca-alexander-county	Before and after school care	Alexander	No
YMCA of Catawba Valley	701 1 st St. NW Hickory, NC 28601	828-324-2858 https://www.ymcav.org/programs/youth-development/afterschool-programs	After school care	Catawba	No
Winnie L. Hooper Center	221 South Sherrill Street Mooresville, NC 28115	704-663-0033	After school and summer camps	Iredell	Yes, Formal

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Tuition assistance

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Iredell Economic Development Group	500 S. Main Street Suite 449 Mooresville, NC 28115	704-663-1898 https://www.iredelledc.com/business/workforce-data/talent-pipeline/	Apprenticeship 2000: technical career opportunities to HS students and full-time employment after graduation; Crosby Scholars: nonprofit college access organization to prepare students for college and post-secondary opportunities	Iredell	No
Mitchell Community College	701 W. Front Street Statesville, NC 28677	704-878-3220 https://mitchellcc.edu/financial-aid-and-scholarships	Information on financial aid and scholarship information	Iredell	Yes, MOU
Catawba Valley Community College	230 Industrial Blvd Taylorsville, NC 28681	828-632-8221 https://www.cvcc.edu/Academic-Resources/Financial-Aid/index.cfm	Information on financial aid and scholarship information	Alexander & Catawba	Yes, MOU
Alexander County Department of Social Services	604 7 th St SW Taylorsville, NC 28681	(828)-632-1080 dss.alexandercountync.gov	Childcare assistance	Alexander	Yes, Formal
Catawba County Social Services	3030 11 th Avenue Dr. SE Hickory, NC 28602	828-695-5600 www.catawbacountync.gov/dss	Childcare assistance	Catawba	Yes, Formal
Iredell County Department of Social Services	549 Eastside Drive Statesville, NC 28625	704-873-5631 https://www.iredellcountync.gov/299/Social-Services	Social Services provides daycare subsidies, child support, adoption, foster, SNAP, Medicaid, TANF, emergency assistance, and employment services.	Iredell	Yes, Formal
College Foundation of North Carolina	P.O. Box 41966 Raleigh, NC 27629-1966	1-866-866-2362 https://www.cfnc.org	Free service of the State of NC to help students plan and pay for post-secondary education	Statewide	No

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Emergency food assistance

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Alexander County Department of Social Services	604 7 th St SW Taylorsville, NC 28681	(828)-632-1080 dss.alexandercountync.gov	Food and nutrition services	Alexander	Yes, Formal
Catawba County Social Services	3030 11 th Avenue Dr. SE Hickory, NC 28602	828-695-5600 www.catawbacountync.gov/dss	Food and nutrition services	Catawba	Yes, Formal
The Corner Table/ Summer Jenkins	122 N Main Ave Newton, NC 28658	828-464-0355 http://www.thecornertable.org	Community kitchen, bag lunches, student backpack program, summer lunch and learn, summer student food bags	Catawba	Yes, Formal
Yokefellow Ministries of Greater Statesville	1380 Shelton Ave. Statesville, NC 28677	704-872-7677 https://www.yokefellowstatesville.org	Assist with food, pharmacy, rent, utilities, clothing, household items, diapers, and wipes. Their thrift store sells a variety of donated clothing and household items that help to fund the helping center.	Iredell	Yes, Formal
Iredell Christian Ministries	752 Old Salisbury Rd. Statesville, NC 28677	704-924-6700 http://iredellcm.org	Provides food pantry, financial assistance for utility payments, rent, and prescriptions, referrals to other community agencies for additional assistance, and counseling services.	Iredell	Yes, Formal
Mooresville Christian Mission	100 Beam Dr. Mooresville, NC 28115	704-664-2357	Provides assistance with food, clothing, furniture, appliances, medicine, fuel, electricity / gas, emergency shelter, life skills, job skills, case management, and a mentoring program.	Iredell	Yes, Formal
Salvation Army	1361 Caldwell St. Statesville, NC 28677	704-872-5623 https://southernusa.salvationarmy.org/iredell/	Provides emergency assistance, youth programs, church services, outreach, summer camp, food distribution, and Christmas assistance.	Iredell	Yes, Formal
South Yadkin Baptist Association (SYBA)	3009 Amity Hill Rd. / PO Box 5249 Statesville, NC 28687	704-873-4372 ext. 2 https://sybaptist.org	Operates a Food Pantry located at 1431 W. Front St. Statesville, NC 28677 with non-perishable food items and basic hygiene needs.	Iredell	Yes, Formal
Iredell County Department of Social Services/Deb Christopher	549 Eastside Drive Statesville, NC 28625	704-873-5631 https://www.iredellcountync.gov/299/Social-Services	Social Services provides daycare subsidies, child support, adoption, foster, SNAP, Medicaid, TANF, emergency assistance, and employment services.	Iredell	Yes, Formal
The Bridge Community	54 E. Main St Taylorsville, NC 28618	828-352-9579 http://www.the-bridge-community.org/Home.html	Food pantry	Alexander & Iredell	Yes, Formal
Eastern Catawba Cooperative Christian Ministry, Inc.	P.O. Box 31 245 East N Street Newton, NC 28658	828-465-1702 https://ecccm.org/	Hunger program, case management	Catawba	No
Pantry with a Purpose	123 3 rd Street NE Hickory, NC 28603	828-322-6333 https://wrchickory.org/programs/free-pantry/	Free pantry stocked with personal hygiene and household cleaning items	Alexander & Catawba	No
Good Samaritan Food Pantry	9379 NC Hwy 127 Hickory, NC 28601	828-495-8251	Food pantry	Catawba & Alexander	No

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Resources, Collaborative/Formal Agreements, and Partnerships

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
		https://mtpisgahelca.org/ministries/good-samaritan-food-pantry			
Hiddenite Community Helpers	45 Fore Department Ct. Hiddenite, NC 28636	828-320-5269 https://www.hiddenitehelpers.org	Food pantry	Alexander	No
Hickory Soup Kitchen	PO Box 1431 Hickory, NC 28603	828-327-4828 https://hickorysoupkitchen.org	Soup kitchen	Alexander & Catawba	No

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Emergency vendor payments (fuel/energy)

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Yokefellow Ministries of Greater Statesville	1380 Shelton Ave. Statesville, NC 28677	704-872-7677 https://www.yokefellowstatesville.org	Assists with food, pharmacy, rent, utilities, clothing, household items, diapers, and wipes. Their thrift store sells a variety of donated clothing and household items that help to fund the helping center.	Iredell	Yes, Formal
I-CARE, Inc. Weatherization Assistance Program (WAP) and Heating Appliance Repair and Replacement Program (HARRP)	1415 Shelton Ave. Statesville, NC 28677	704-872-8141 https://www.icare-inc.org	The Weatherization Assistance Program (WAP) is designed to help citizens who meet federal low-income guidelines to lower their energy usage and cost. The Heating Appliance Repair and Replacement Program (HARRP) works in concert with the WAP to repair and / or replace inefficient heating and air systems in the homes of low-income families; especially the elderly, individuals with disabilities, and families with children.	Alexander, Catawba, Iredell	Yes, Formal
Iredell Christian Ministries	752 Old Salisbury Rd. Statesville, NC 28677	704-924-6700 http://iredellcm.org	Provides food pantry, financial assistance for utility payments, rent, and prescriptions, referrals to other community agencies for additional assistance, and counseling services.	Iredell	Yes, Formal
Mooreville Christian Mission	100 Beam Dr. Mooreville, NC 28115	704-664-2357	Provides assistance with food, clothing, furniture, appliances, medicine, fuel, electricity / gas, emergency shelter, life skills, job skills, case management, and a mentoring program.	Iredell	Yes, Formal
Salvation Army	1361 Caldwell St. Statesville, NC 28677	704-872-5623 https://southernusa.salvationarmy.org/iredell/	Provides emergency assistance, youth programs, church services, outreach, summer camp, food distribution, and Christmas assistance.	Iredell	Yes, Formal
Iredell County Department of Social Services/Deb Christopher	549 Eastside Drive Statesville, NC 28625	704-873-5631 https://www.iredellcountync.gov/299/Social-Services	Social Services provides daycare subsidies, child support, adoption, foster, SNAP, Medicaid, TANF, emergency assistance, and employment services.	Iredell	Yes, Formal
Trinity Reformed United Church of Christ/Rev. Peggy Stout	217 2nd Ave NE Conover, NC 28613	828-464-8226 http://www.trinitytoday.org	Provides faith-based services and assistance with utility and other bills on a limited basis	Alexander	Yes, Formal
The Bridge Community	54 E. Main St Taylorsville, NC 28618	828-352-9579 http://www.the-bridge-community.org/Home.html	Crisis center services	Alexander & Iredell	Yes, Formal
Eastern Catawba Cooperative Christian Ministry, Inc.	P.O. Box 31 245 East N Street Newton, NC 28658	828-465-1702 https://ecccm.org/	Utility assistance, rent and mortgage assistance	Catawba	No
Cooperative Christian Ministry	31 1st Avenue SE Hickory, NC 28602	828-327-0979 https://ccmhickory.org	Rent and mortgage, utility assistance, crisis financial aid	Catawba	No

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Temporary shelter

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Fifth St. Ministries	1421 Fifth St, Statesville, NC 28687	704-872-4045 https://www.fifthstreetministries.com/shelter-services/	Offers a night shelter, transitional housing, community soup kitchen, nursing clinic, and clothing closet.	Iredell	Yes, Formal
The Bridge Community	54 E Main Ave, Taylorsville, NC 28681 PO Box 663, Stony Point, NC 28678	828-352-9579 www.the-bridge-community.org	Temporary emergency shelter for homeless individuals and families during severe weather. Partners with local motels and restaurants to provide these services.	Alexander	Yes, Formal
Salvation Army Shelter of Hope	780 3rd Ave PI SE, Hickory, NC 28602	828-324-6919 828-639-1641 for the Resident Manager. Hickory Salvation Army Crisis Help Line: 828-322-2535 https://southernusa.salvationarmy.org/hickory/homeless-services-1 b.pennell@salvationarmy.org	Provides emergency housing for men, women, and children.	Catawba & Alexander	No
Family Care Center of Catawba Valley	2875 Highland Ave NE, Hickory, NC 28601	828-324-9917 www.familycare-center.org/	An emergency and residential program for homeless families with children that also provides help finding jobs, workshops, tutoring for children, and more.	Catawba	No
Hope of Mooresville	218 N. Academy Street Mooresville, NC 28115	980-447-9007 https://www.hopeofmooreville.org/ office@hopeofmooreville.org	Serving homeless women and children in Mooresville. Provides a safe, temporary shelter and support services.	Iredell	No
Mooresville Christian Mission	266 North Broad Street Mooresville, NC 28115 100 Beam Dr. Mooresville, NC 28115	704-664-2357 https://ourchristianmission.org/	Offers emergency shelter; rent expense assistance; water, gas, and electricity bill payment assistance; assistance with food, clothing, furniture, appliances, medicine, fuel, electricity / gas, life skills, job skills, case management, and a mentoring program.	Iredell	Yes, Formal

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Transitional housing

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Safe Harbor Transitional Housing: Greenleaf Transitional Housing	112 2nd Ave. SE Hickory, NC 28602	828-326-7233 https://safeharborncc.org/	Provides transitional housing, as well as shelter during the day for homeless women and children.	Catawba	No
Fifth St. Ministries	1421 Fifth St, Statesville, NC 28687	704-872-4045 https://www.fifthstreetministries.com/shelter-services/	Offers transitional housing, as well as night shelter, a community soup kitchen, nursing clinic, and clothing closet.	Iredell	Yes, Formal
Family Care Center of Catawba Valley	2875 Highland Ave NE, Hickory, NC 28601	828-324-9917 www.familycare-center.org/	An emergency and residential program for homeless families with children that also provides help finding jobs, workshops, tutoring for children, and more.	Catawba	No
Salvation Army Shelter of Hope	750 3rd Ave PI SE, Hickory, NC 28602	828-322-8061 Hickory Salvation Army Crisis Help Line: 828-322-2535 https://southernusa.salvationarmy.org/hickory/homeless-services-1	Provides transitional housing after emergency shelter. Also provides transitional housing for men who are leaving correctional facilities.	Catawba	
Sipe's Orchard Home	4431 County Home Road Conover, NC 28613	256-5056 www.sipesorchardhome.org	Provides a variety of programs that support children including a "Transitional Living Program (for homeless and at-risk youth)."	Catawba	No
Exodus Homes	122 8th Avenue Drive SW Hickory NC 28602	828-324-4870 www.exodushomes.com	"Faith based supportive housing for recovering addicts, alcoholics, and formerly incarcerated people."	Catawba	No
Oxford House	For locations: https://www.transitionhousing.org/ci/nc-statesville	919-395-8192 https://www.oxfordvacancies.com/	Clean and sober residential house for individuals in recovery.	Iredell	No
Insight Human Services	7830 Northpoint Blvd. Suite 200, Winston-Salem, NC 27106	828-217-8470 https://insightnc.org/	Provides a community-based service that includes treatment, transportation, and housing through the Begin Again Treatment Services (BATS).	Regional	Yes, Formal

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Emergency medical care

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
The Bridge Community	54 E Main Ave, Taylorsville, NC 28681 PO Box 663, Stony Point, NC 28678	828-352-9579 www.the-bridge-community.org	Free medication assistance for uninsured qualifying individuals.	Alexander	Yes, Formal
Mountain View Urgent Care	2872 S NC Hwy 127, Hickory, NC 28602 (Catawba) 60 2nd Ave SW, Taylorsville, NC 28681 (Alexander) 1366 Hwy 16 S, Newton, NC 28658 (Newton)	828-270-3604 (Taylorsville) www.urgentcareofmountainview.com/	Treats a variety of illnesses and injuries in the urgent care setting.	Catawba & Alexander	No
Catawba Valley Behavioral Health Mobile Crisis Management	327 1st Ave NW Hickory, NC 28601	888-235-4673 828-695-5900 https://www.cvbh.org/mobile-crisismanagement/	"Serves people with Medicaid or Medicare, those who are uninsured and underinsured, those who are homeless, those without documentation, and those who are incarcerated or recently incarcerated."	Catawba	No
Catawba Valley Medical Center Emergency Department	810 Fairgrove Church Road SE, Hickory NC 28602	828-326-3850 828-326-3000 https://www.catawbavalleyhealth.org/Medical-Center/Services/Emergency-Department.aspx	Provides services for medical emergencies.	Catawba	No
Frye Regional Medical Center Emergency Department	420 N. Center St Hickory, NC 28601	828-315-3190 https://www.fryemedctr.com/emergency	Provides services for medical emergencies.	Catawba	No
Lake Norman Regional Medical Center	171 Fairview Road Mooresville, NC 28117	704-660-4000 https://www.lnrmc.com/	Available for all medical needs and emergencies.	Iredell	No
Iredell Memorial Hospital	557 Brookdale Drive Statesville, NC 28625	704-873-5661 https://www.iredellhealth.org/	Available for all medical needs and emergencies.	Iredell	No
Iredell Urgent Care	653 Bluefield Rd. Suite A, Mooresville, NC 28117	704-360-6500 https://www.iredellurgentcare.com/	24-hour urgent care.	Iredell	No
Davis Regional Medical Center	218 Mocksville Rd., Statesville, NC 28625	704-873-0281 https://www.davisregional.com/	Available for all medical needs and emergencies.	Iredell	No

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Protection from domestic violence

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Family Guidance Center: First Step Domestic Violence Shelter	17 US Hwy 70 SE Hickory, NC 28602	828-322-1400 24/7 Domestic Violence Hotline: 828-228-1787 24/7 Sexual Assault Hotline: 828-302-6952 https://www.fgcservices.com/domestic-violence-services/	An emergency shelter for victims and children of domestic violence. Offers “victim support groups, therapy, case management, court advocacy/accompaniment, and a treatment group for abusers.”	Catawba	No
My Sister’s House	1421 Fifth Street Statesville, NC 28687	704-872-4045 704-872-3403 (Hotline) https://www.fifthstreetministries.com/my-sisters-house/ admin@fifthstreetministries.com	A shelter for women and children “fleeing domestic or sexual violence. Counselors and advocates work directly with individuals, providing hospital and court advocacy, peer support and case management services.” Part of 5 th Street Ministries.	Iredell	Yes, Formal
My Refuge City		449-7441 https://www.facebook.com/myrefugecity/	Provides “emergency interventions, case management, job placement, drug treatment, medical treatment, food/clothing, and others” for victims of human trafficking and sexual exploitation.	Catawba	No
Safe Alliance	601 East Fifth Street Administrative Office Suite 400 Charlotte, NC 28202	704-665-8745 http://www.safealliance.org/	Provides services such as domestic violence shelter, victim assistance court program, and sexual trauma resource center.	Iredell, Mecklenburg County, and regionwide	No
Children’s Advocacy and Protection Center of Catawba County	4360 County Home Rd, Conover, NC 28613	828-465-9296 www.catawbacountycapc.org/capc/	Provides support for child victims of sexual or severe physical abuse.	Catawba	No
Dove House Children’s Advocacy Center	2407 Simonton Rd, Statesville, NC PO Box 825, Statesville, NC 28687	704-883-9814 www.dovehousecac.org/	Serves child victims of sexual assault and their non-offending family members.	Alexander & Iredell	No

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Rent assistance

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Western Piedmont Council of Governments-Regional Housing Authority	1880 2nd Ave NW, Hickory, NC 28601	828-322-9191 www.wpcog.org/ Kim Duncan kim.duncan@wpcog.org	Section 8/HUD Housing. Provides Low Income and Section 8 housing programs.	Alexander & Catawba	Yes, Formal
Crest Knolls & Ridgeway Apartments	16 Crest Knolls St SE, Taylorsville, NC 28681	828-632-8206	Rental assistance: Rent charged on a sliding fee scale based on income.	Alexander	No
Mountainwood Apartments	100 2nd Ave NW, Taylorsville, NC 28681	828-632-9380	Rental assistance: Rent charged on a sliding fee scale based on income.	Alexander	No
Milstead Woods Apartments	15 Milstead Woods Ct, Taylorsville, NC 28681	828-632-2805	Have units set aside for renting based on a tiered income system.	Alexander	No
Salvation Army: Taylorsville Thrift Store	226 W Gate Dr, Taylorsville, NC 28681	828-632-3832 Hickory Salvation Army Crisis Help Line: 828-322-2535 www.facebook.com/SalvationArmyFamilyStore-Taylorsville-North-Carolina-1800755423485551/ https://www.salvationarmycarolinas.org/b.pennell@salvationarmy.org	Bill assistance: Help with rent and utilities.	Alexander	No
Hickory Public Housing Authority	98 3rd Avenue SE Hickory, NC 28602	328-5373 https://www.hickoryhousing.org/programs Alanda Richardson	Nu-Dimensions, Inc. offers affordable housing to families within the city of Hickory, NC. Housing Choice Voucher Program: very low-income families pay 30 percent of their income. Partners with Youth Build, which works with those ages 16-24 who unenrolled from or did not complete high school.	Catawba	Yes, Formal
West Hickory Apartments	300 17th St SW in Hickory, NC	828-328-5373 https://www.publichousing.com/details/west_hickory_apartments	Rent assistance for disabled individuals and their families.	Catawba	No
Eastern Catawba Cooperative Christian Ministry, Inc.	245 East N Street Newton, NC 28658	828-465-1702 www.ecccm.org	"Emergency help for food, clothing, utilities, fuel oil, medicine and rent financial assistance."	Catawba	No
Mooresville Housing Authority	1046 N. Main Street Mooresville, NC 28115	704-664-1659 https://www.mooresvillenc.gov/government/boards_and_commissions/mooresville_housing_authority.php mha1087@windstream.net	Offers rental properties based on income.	Iredell	Yes, Formal

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Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Salvation Army of Iredell County	1361 Caldwell Street Statesville, NC 28677	704-872-5623 https://southernusa.salvationarmy.org/north-south-carolina/	Rent and utilities emergency assistance, as well as food pantry and disaster response.	Iredell	Yes, Formal
Mooresville Christian Mission	266 North Broad Street Mooresville, NC 28115 100 Beam Dr. Mooresville, NC 28115	704-664-2357 https://ourchristianmission.org/	Offers rent expense assistance; water, gas, and electricity bill payment assistance; assistance with food, clothing, furniture, appliances, medicine, fuel, electricity / gas, emergency shelter, life skills, job skills, case management, and a mentoring program.	Iredell	Yes, Formal
Statesville Housing Authority	110 West Allison Street Statesville, NC 28677	704-872-9811 http://www.statesvillehousing.org/	Responsible for the administration of public housing, housing assistance payments, and other related programs.	Iredell	Yes, Formal
Yokefellow Ministries of Greater Statesville	1380 Shelton Ave., Statesville, NC 28677	704-872-7677 https://www.yokefellowstatesville.org/	Yokefellow Ministries of Greater Statesville Helping Center assist with food, pharmacy, rent, utilities, clothing, household items, diapers, and wipes. Their thrift store sells a variety of donated clothing and household items that help to fund the helping center.	Iredell	Yes, Formal
Iredell Christian Ministries	752 Old Salisbury Rd. Statesville, NC 28677	704-924-6700 http://iredellcm.org/	Iredell Christian Ministries provides food pantry, financial assistance for utility payments, rent, and prescriptions, referrals to other community agencies for additional assistance, and counseling services.	Iredell	Yes, Formal
Acts of Kindness Family Assistance	1505 E. Broad St. Statesville, NC 28677	704-878-2091 https://actsofkindness57.wixsite.com/mysite?fbclid=IwAR3RoEuZiumOFiW6Wlp9xa36wCUV_Ms7E35mBZtCzXPrX55QealsPH_6IQ	Acts of Kindness Family Assistance provides a safe environment for homeless individuals / families by providing discounted hotel rooms, food, hygiene supplies, bible study and celebrations during holidays and children's birthdays for residents of the hotel.	Iredell	Yes, Formal
Trinity Reformed United Church of Christ	217 2nd Ave NE, Conover, NC 28613	828-464-8226 http://www.trinitytoday.org Rev. Peggy Stout	Provides faith-based services and assistance with utility and other bills on a limited basis.	Catawba	Yes, Formal

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Resources, Collaborative/Formal Agreements, and Partnerships

Youth enrichment/support

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Boy Scouts of America (Troop 274)	279 Main Ave Dr, Taylorsville, NC	828-632-4257 www.facebook.com/pg/BoyScoutTroop274/about/?ref=page_internal	Offers a range of activities for enrolled boys.	Alexander	No
Girl Scouts - Carolinas Peaks to Piedmont	208 Union Square NW, Suite 101, Hickory, NC 28602	828-328-2444 800-672-2148 www.girlscoutsp2p.org/	"Girl Scouting offers a variety of programs for girls ages 5-17 to build character and skills for future success."	Catawba	No
Alexander County YMCA	260 Black Oak Ridge Rd, Taylorsville, NC 28681 PO Box 10, Taylorsville, NC 28681	828-632-9699 www.ymcanwnc.org/locations/alexander-county-family-ymca/	"Offers great group exercise programs and a comprehensive wellness center, as well as a wide range of youth development programs."	Alexander	No
Alexander County 4-H	376 1st Ave SW, Taylorsville, NC 28601	828-632-4451 www.alexander.ces.ncsu.edu/categories/4-h-youth-development/ www.alexander.ces.ncsu.edu/alexander-4-h-clubs-and-groups/ (List of local groups)	Focuses on livestock education (rabbits, beef, dairy, goats, sheep), community service and science.	Alexander	No
Catawba County 4-H Youth Programs	NC Cooperative Extension Service, P.O. Box 389, 1175 South Brady Avenue, Newton, NC 28658	465-8240 http://catawba.ces.ncsu.edu/ and https://4-h.org	Offers "4-H clubs, classroom programs, and summer day camps for youth ages 5-18. Primary program areas include Leadership and Lifeskill development, Science and Technology, and Healthy Living."	Catawba	Yes, Formal
Alexander County Partnership for Children (Smart Start)	1565 NC Hwy 90 W or PO Box 1661, Taylorsville NC 28681	828-632-3799 https://alexanderchildren.org/	"Provides free services for families with children birth through age five in Alexander County. Current programs include a Lending Library and Resource Room, Circle of Parents Parent Support Group, Child Passenger Safety Seat Program, Child Care Resource and Referral Program, Dolly Parton's Imagination Library, and NC Pre-K."	Alexander	Yes, Formal
Catawba County Partnership for Young Children	Early Childhood Resource Center, 738 4th Street SW, Hickory, NC 28602	828-695-6505 https://catawbakids.com Kim Lyke Holden	Assists with resources and referrals for childcare. Provides training for professional development.	Catawba	Yes, Formal
Iredell County Partnership for Young Children	Main Office Address: 734 Salisbury Rd Statesville, NC 28677 Mooresville Office Address: 249 Williamson Rd, Suite	704-878-9980 https://www.iredellsmartstart.org/	"ICPYC provides services focused on raising the quality of early care and education, supporting families, advancing child health, and expanding literacy" for children birth to age 5.	Iredell	Yes, Formal

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Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
	102, Mooresville, North Carolina 28117				
Community Schools Program of Catawba County	605 N. Ashe Ave. Newton, NC 28658	464-9355 www.yourcommunityschools.com	"Offers before-school and after-school care and summer camps in coordination with Newton Conover City Schools and Hickory Public Schools. Ages kindergarten-age 14 at most sites, and ages 3-21 at Newton-Conover locations. Preschool summer-camp available for rising kindergartners. Also provides day camps when school is closed due to inclement weather."	Catawba	No
Macaroni Kid		https://hickory.macaronikid.com	"Macaroni Kids is a website that provides up-to-date information about kid-friendly events and activities in Hickory, Lenoir, Newton-Conover, Morganton, Taylorsville and surrounding areas of western North Carolina."	Alexander & Catawba	No
Salvation Army Boys and Girls Club	750 3rd Avenue Place SE Hickory, NC 28602	322-3066 www.salvationarmycarolina.org/bgchickory/	"Provides sports activities, recreation, after-school tutoring for community youth, and more."	Catawba	No
Sipe's Orchard Home	4431 County Home Road Conover, NC 28613	256-5056 www.sipesorchardhome.org	"Provides a variety of programs that support children. NC Pre-Kindergarten Program (for 4-year-olds), Huckleberry Summer Camp and Pre-K Summer Camp (for school-aged children), and Transitional Living Program (for homeless and at-risk youth)."	Catawba	No
YMCA of Catawba Valley	701 1st Street NW, Hickory, NC 28601	324-2858 www.ymcacv.org	"Offers recreation facilities, sports programs, and child care facilities throughout Catawba County."	Catawba	No
Boys and Girls Club of The Piedmont	1001 Cochran St., Statesville, NC 28677	704-397-2429 http://www.piedmontbgc.org/	Club that "offers services in the program areas of character and leadership, education and career development, health and life skills, the arts, sports, fitness, and recreation."	Iredell	No
Iredell County Partnership for Young Children	734 Salisbury Rd, Statesville, NC 28677	704-878-9980 https://www.iredellsmartstart.org/	"Provides services geared toward, family support, early care and education, child health, and early literacy."	Iredell	Yes, Formal
Lowe's YMCA	170 Joe Knox Avenue Mooresville, NC 28117	704-716-4000 https://www.ymcacharlotte.org/	Teaches youth development, healthy living, and social responsibility.	Iredell	No
Winnie L. Hooper Center	221 South Sherrill Street, Mooresville, NC 28115	704-663-0033 https://www.mooresvillenc.gov/government/departments/parks_recreation/facilities/winnie_hooper_center.php	The Winnie L. Hooper Center provides programs such as after school, summer camps, fitness, and leisure activities for citizens. Also, they offer opportunities for citizens to reserve a room for special events.	Iredell	Yes, Formal

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Public transportation

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Greenway Public Transportation	PO Box 459, Conover, NC 28613 (Catawba County) Administrative office: 621 Liledoun Rd, Taylorsville, NC 28681 (Alexander County)	828-632-1112 464-9444 465-7634 www.mygreenway.org/	"Provides cost effective and efficient transportation services to the public."	Catawba & Alexander	No
American Cancer Society — Cancer Treatment Transportation		1-800-227-2345 https://www.cancer.org/support-programs-and-services/road-to-recovery.html	Provides rides to and from cancer-related medical appointments.	Nationwide	No
Medicaid Transportation (Catawba County Department of Social Services)	3030 11th Ave Dr SE, Hickory, NC 28602	828-695-5608 828-695-5671 https://www.catawbacountync.gov/county-services/social-services/medicaid/medicaid-transportation/ Suzanne Finlayson	Provides transportation for Medicaid recipients to and from medical appointments that are covered by Medicaid.	Catawba	Yes, Formal
Medicaid Transportation (Iredell County Department of Social Services)		704-873-5631 https://www.iredellcountync.gov/299/Social-Services	Provides transportation for Medicaid recipients to and from medical appointments that are covered by Medicaid.	Iredell	Yes, Formal
I-CATS Transit System	2611 Ebony Circle Statesville, NC 28625	704-873-9393 ext. 3779 https://www.iredellcountync.gov/413/ICATS-Transportation-Services	"A ride-sharing system that enables routes and schedules to be structured to transport multiple passengers to multiple destinations. Services are provided through deviated fixed routes, subscription routes, and demand-response service trips."	Iredell	Yes, Formal
Homeless Liaison	549 North Race Street Statesville, NC 28677	704-832-2549	"Offers services for homeless youth and their families, helps connect families to resources for transportation, food, health and more."	Iredell	No
Job Access and Reserve Commute—Iredell County Area Transportation System	2611 Ebony Circle, Statesville, NC 28627	704-873- 9393 http://www.co.iredell.nc.us/413/ICATS-Transportation-Services	Offers transportation to the public for those who are employed.	Iredell	No

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Community and state services that support Pre-K children with special needs

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Children's Neurotherapy Services	1087 13th St SE, Hickory, NC 28602	828-267-1688 www.cnsclinic.com/	"Contracts with the Children's Developmental Service Agencies (CDSA) to provide Community Based Rehabilitative Services (CBRS) as well as Occupational, Physical and Speech Therapy to children under 3 years of age."	Catawba	No
TEACCH Center (Charlotte site serves Alexander Co.)	5701 Executive Center Dr, Suite 108, Charlotte, NC 28212	704-563-4103 www.teacch.com/	Provides "services for individuals on the Autism Spectrum, includes diagnostic evaluations, individual intervention services, support groups, parent mentors, parent teaching sessions education and training such as workshops for parents, teachers, and other professionals."	TEACCH Center (Charlotte site serves Alexander Co.)	No
Autism Society of NC	5121 Kingdom Way, Suite 100, Raleigh, NC 27607	800-442-2762 256-5202 www.autismsociety-nc.org	"Provides services for NC residents with autism and related developmental disabilities."	Statewide	No
BEGINNINGS for Parents of Hearing Impaired Children	156 Wind Chime Court, Suite A, Raleigh, NC 27615	919-715-4092 800-541-4327 (NC residents only) www.ncbegin.org	"BEGINNINGS offers emotional support and technical support to families with deaf or hard of hearing children and deaf parents with hearing children and professionals serving those families."	Statewide	No
Care Coordination for Children (CC4C) (Catawba)	Catawba County Public Health, 3070 11th Avenue Drive SE, Hickory, NC 28602	695-5800 https://www.catawbacountync.gov/county-services/public-health/service-areas/care-coordination-forchildren/	Provides "help with locating a medical home for your child, help locating childcare, and information about family-oriented resources." "Children who have been diagnosed with, or are at risk for, developmental delay or disability, long-term illness, and/or social/emotional disorders may be eligible to participate in this free and voluntary program."	Catawba	No
Conover School	108 7th Street Place SW Conover, NC 28613	464-9532 https://con.newton-conover.org/	"A separate school setting for children ages 3-21 years with significant intellectual and/or developmental disabilities. Also includes Future Ready Academy (prekindergarten classrooms)."	Catawba	No
Early Learning Sensory Support for Visually Impaired & Hearing Impaired		www.ncpublicschools.org/earlylearning/sensory/	"Children, ages birth to 5 years (and their families), who are visually- and/or hearing-impaired may receive support services through these state funded programs. Services are provided in the child's natural environment, which may include their homes, child care centers, and schools. Services may include assessments, therapies, direct instruction, training and support for families, and others."	Statewide	No
Easter Seals United Cerebral Palsy of NC ECOS Hickory	5171 Glenwood Avenue, Suite 211, Raleigh, NC 27612-3266	800-662-7119 (Raleigh) 465-0344 704-881-3760 (Charlotte) www.easterseals.com	Provides services including Autism Spectrum Disorder services, employment and training services, medical rehabilitation, and more for children and adults.	Catawba, Iredell, Statewide	No

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Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
	8430 Neduck Plaza Drive Charlotte, NC 28262				
Exceptional Children's Assistance Center (ECAC)	907 Barra Row, Suites 102/103 Davidson, NC 28036	704-892-1321 800-962-6817 www.ecac-parentcenter.org	Parent training and information center offering parents of children with disabilities information, assistance, and workshops on laws, Individualized Educational Plans (IEPs), etc.	Statewide	No
Family Support Network - HOPE Network	P.O. Box 11395, Hickory, NC 28603	English: 256-5202 Spanish: 704-803-7082 Hmong: 403-1286 www.fsnncc.org	"Provides support, information, and training to assist families in promoting the education, development, and quality of life for their children of all ages and with all types of special needs."	Catawba	No
Local Interagency Coordinating Council (LICC)		267-6464 https://beeearly.nc.gov/	"Comprised of representatives from various agencies and parents of children with disabilities who work together to ensure that services for children with disabilities are efficient and family-friendly."	Catawba & Alexander	No
Public School Preschool Programs		Catawba County Schools Preschool 327-3689 Newton-Conover City Schools Preschool 464-9355 Hickory City Schools Preschool 322-5860 (ask for Early Start Program)	Provides services for children ages 3-5 with disabilities.	Catawba	No
Special Olympics of Catawba County		612-8383 446-7182 (Local Coordinator) sonccatawba@gmail.com www.sonc.net/local-programs/catawba-county/	"Provides opportunities for children and adults with intellectual disabilities to develop physical fitness, engage in athletic competition, and experience the joy of sharing and friendship through a variety of sporting events."	Catawba	No
Tadpole Lending Library		919-575-3093	"Lends and delivers low-tech assistive technology devices and toys free to families and professionals who work with individuals with special needs. Free shipping."	Statewide	No
Walkin' Roll Activities League, Inc.	P.O. Box 334, Claremont, NC 28610	228-0616 www.walkinroll.org	"Provides sports and recreation activities for children and adults with disabilities and their families."	Catawba	No
Care Coordination for Children (CC4C) (Iredell)	318 Turnersburg Highway Statesville, NC 28625	704-878-5300 https://www.iredellcountync.gov/161/Health-Department	"Care management services for children with special health care needs that require extra support. Offers medical support, health education, and information and referrals to other community resources."	Iredell	No
Abound Health	322 East Statesville Ave Mooresville NC 28115	704-664-5363 https://www.aboundhealth.com/	Serving adults and children with disabilities: respite and community service networking.	Iredell	No

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MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Autism360	2329 East WT Harris Boulevard Charlotte, NC 28213	704-529-9090 https://www.autism-360.com/	Serving adults and children with disabilities: ABA therapy.	Iredell	No
Lake Norman Special Olympics	PO Box 1455 Mooresville, NC 28115 Attention: Special Olympics/ Therapeutic Recreation	704-799-4179 https://sonc.net/	Serving age 2 - adulthood: athletic and socialization opportunities for individuals with disabilities.	Iredell	No
Lifespan	143 Iredell Avenue Mooresville, NC 28115	704-873-5646 https://www.lifespanservice.org/education	"5-star rated child care centers serving children with intellectual and developmental disabilities and typically developing children 6 weeks to 12 years."	Iredell	No
Children's Developmental Services Agency (CDSA) (Hickory)	1985 Tate Boulevard SE, 4th Floor Hickory, NC 28602	267-6464 www.beeearly.nc.gov	"Provides an in-depth evaluation of a child's medical, psychological, educational, physical, and speech/ language needs. Early intervention service coordinators assist families in locating services and therapies (such as speech, occupational, or physical) as well as other support resources."	Catawba	No
Children's Developmental Service Agency (Morganton)	145-A West Parker Rd. Morganton, NC 28655	828-433-5171	Provides screening and early intervention services to infants and toddlers and their families in compliance with Federal and State laws and regulations.	Regional (Burke County)	Yes, MOU
Iredell Statesville Schools	549 N. Race Street, Statesville, NC 28677	704-872-8931 https://www.issnc.org/	Provides special education and related services to developmentally delayed preschool children and consultation session by the aforementioned Local Education Agency (LEA) to the I-CARE, Inc.	Iredell	Yes, MOU
Mooresville Graded Schools	305 N. Main St. Mooresville, NC 28115	704-658-2530 https://www.mgsd.k12.nc.us/	Provides special education and related services to developmentally delayed preschool children and consultation session by the aforementioned Local Education Agency (LEA) to the I-CARE, Inc.	Iredell	Yes, MOU

I-CARE, Inc. - 2023 Community Assessment

MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Other

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Catawba County United Way	2760 Tate Blvd SE, Hickory, NC 28602 PO Box 2425, Hickory, NC 28603	327-6851 Access local resources by calling 2-1-1 or going to www.211nc.org . www.ccunitedway.com Kelle Love	"Maintains current resource information on human services available to the residents of Catawba County. Referrals to appropriate agencies."	Catawba	Yes, Formal
Centro Latino	St. Stephens Lutheran ELCA, 2259 12th Avenue NE, Hickory, NC	330-0477 www.centrolatinohickory.com	"A center where Hispanic/Latino families can access resources relating to child care, parent education, ESL/GED classes, employment, prenatal health care, human services, and many others."	Catawba	No
Child Day Care Unit (with Department of Social Services)		695-5721	"Provides financial assistance for child care expenses for low to moderate income families."	Catawba	No
Creation Station	Catawba County Partnership for Children, 738 4th Street SW, Hickory, NC 28602	695-6505 https://catawbakids.com	"A resource room with books, magazines, laminating machines, die cut machines, and more. Open to early childhood teachers and professionals, parents, and others."	Catawba	Yes, Formal
Early Childhood Resource Center	738 4th Street SW, Hickory, NC 28602	695-6505 www.childrensresourcecenter.org Cindy Bogart and Holly Aldrige	"Home of the Catawba County Partnership for Children, Children's Resource Center, Early Childhood Support Team, Parent Support Team/Triple P, NC Pre-Kindergarten program, Dolly Parton's Imagination Library, Creation Station, KidsREADYCatawba, Family Fair, and more."	Catawba	Yes, Formal
Family Infant Preschool Program (FIPP)	300 Enola Road, Morganton, NC 28655	433-2661 https://fipp.org/	"Provides services to children ages birth to 5 years in Alexander, Burke, Caldwell, Catawba, and McDowell counties. Early intervention services, parent education, pregnancy supports, neonatal intensive care follow-up, and more."	Regionwide	No
FamilyNET	Family Services Center 3050 11th Avenue Drive SE Hickory, NC 28602	695-6500 www.catawbacountync.gov/dss/familynet	"Family NET of Catawba County provides mental health and behavioral health services to children and adolescents. Services are provided in an office setting, schools, home, and community."	Catawba	No
International Newcomer Center	Sweetwater Early Childhood Education Center, 2110 Main Avenue SE, Hickory, NC 28602	855-9387 www.catawbaschools.net/newcomer-center	"The Newcomer Center serves all 25 schools in the Catawba County School System and assists parents with limited English proficiency to enroll their children in school, complete necessary forms, review health records, assess the child's language skills, and locate needed resources and services."	Catawba	No
KidsREADYCatawba		695-6501 www.catawbakids.com	"A collaborative group with representatives from the Partnership for Children, Children's Resource Center, all three school districts, Catawba Valley Community College,	Catawba	No

I-CARE, Inc. - 2023 Community Assessment

MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
			and local child care centers, that is focused on improving early childhood and elementary education coordination to increase 3rd grade reading proficiency in Catawba County."		
Smart Moms & Dads (a program of Council on Adolescents)	1120 Fairgrove Church Road SE, Suite 22, Hickory, NC 28602	322-4591 www.coacatawba.org	"Serves 15 pregnant and parenting students at Hickory High School and Hickory Career and Arts Magnet School and Newton-Conover High School. The goal of this program is to help young parents graduate high school and to prevent subsequent pregnancies."	Catawba	No
Women Resource Center	125 3rd St NE Hickory, NC 28601	828-322-6333 www.wrchickory.org	"Offers practical guidance for women going through major life transitions, such as job loss, separation and divorce, domestic violence, unstable housing or financial difficulties. Provides free pantry stocked with personal hygiene and household cleaning items. Provide mental health counseling for women, women financial assistance, and woman's wellness cooperative."	Catawba	No
Work First Program-Catawba County	3030 11th Ave Dr SE, Hickory, NC 28602	828-695-5621 www.catawbacountync.gov/dss	"Short term financial and medical assistance for indigent families with minor children. Program offers a broad range of employment and training services to enable the parents to find and maintain employment. For 7 grandparents and other relative caretakers who are caring for children, the program offers financial assistance and Medicaid for the child."	Catawba	No
Consumer Credit Counseling Service	17 Hwy 70 SE Hickory NC 28602	828-322-7161 www.fgcservices.com	"Confidential, professional financial counseling to resolve debt problems, budget counseling, money management, consumer education, and community educational presentation."	Catawba	No
Child Care Resource & Referral	734 Salisbury Road Statesville, NC 28677	704-878-9980 https://www.iredellcountync.gov/161/Health-Department	"Academic support from birth to preschool, childcare and development of social skills. Morning, afternoon snack, homework help, alternating enriching activities."	Iredell	No
Child Care Subsidy Program	549 Eastside Drive Statesville, NC 28625	704-873-5631 https://www.iredellcountync.gov/299/Social-Services	"Helps parents/guardians pay for ongoing childcare based on income and situation. Voucher payments to vendor." For Parent or guardian of child 0-12 yrs., or older child with special needs.	Iredell	No
Children's Home—Iredell County	134 E. Water Street Statesville, NC 28677	704-871-2289 https://chomesofiredell.com/	"Serving children ages 0-21 who are placed through social services due to neglect and abuse."	Iredell	No
Early Learning Resource Center	734 Salisbury Road Statesville, NC 28677	704-380-3873 https://www.iredellsmartstart.org/elrc	"Serving parents, families and community members caring for or working with children ages 0-5 yrs Lending library for parents, families and childcare providers of educational materials; resources; materials, supplies for games and projects."	Iredell	No

I-CARE, Inc. - 2023 Community Assessment

MODULE 4: What other organizations serve these community(ies)?

Resources, Collaborative/Formal Agreements, and Partnerships

Program Name	Address	Phone Number / Website	Services Provided	County	Existing Partnership with I-CARE (Yes/No)
Iredell Safe Seats	734 Salisbury Road Statesville, NC 28677	704-878-9980 https://www.iredellsmartstart.org/iredell-safe-seats	"Serving families or caregivers of children birth-5 year. Car care safety checks by trained tech. Offers child passenger safety education and proper child care seat installation instructions."	Iredell	No
NC Health Choice	549 Eastside Drive Statesville, NC 28625	704-873-5631 https://www.iredellcountync.gov/299/Social-Services	"Serving those meeting income and resource limits. Health insurance for uninsured children whose families do not qualify for Medicaid."	Iredell	No
Daymark Recovery Services: Caiyalynn Burrell Child Crisis Center	277 Biltmore Ave, Asheville, NC 28801	877-277-8873 http://www.daymarkrecovery.org/	"Facility-Based Crisis Service for children and adolescents, ages 6-17, provides an alternative to hospitalization for an eligible child or adolescent who has escalated behavior due to a mental health, intellectual or development disability or substance use disorder and requires treatment in a 24-hour residential facility."	Statewide	No
Partners Behavioral Health Management	1985 Tate Blvd SE, Hickory, NC 28602	1-888-235-HOPE (4673) www.partnersbhm.org	Provides mental health, substance abuse, and developmental disability referrals and assistance.	Catawba	Yes, Formal

Geographic Location of Eligible Children and Families

This map illustrates the population density of the United States by state. The color scale ranges from light yellow (low density) to dark blue (high density). States with the highest population density are California, New York, and Florida. States with the lowest population density are Montana, North Dakota, and South Dakota. Major cities like Vancouver, Montreal, Toronto, New York, Philadelphia, and Miami are marked. The Gulf of Mexico is labeled at the bottom.

State	Population
California	48,930
Washington	70,752
Oregon	43,974
Idaho	23,226
Montana	11,796
North Dakota	7,580
South Dakota	13,417
Wyoming	6,547
Nevada	41,411
Utah	32,624
Colorado	48,098
Kansas	34,646
Nebraska	21,390
Minnesota	49,494
Wisconsin	64,017
Iowa	35,765
Missouri	82,280
Illinois	155,395
Indiana	96,806
Ohio	176,750
Kentucky	78,071
West Virginia	28,686
Virginia	82,410
North Carolina	155,729
South Carolina	77,949
Georgia	168,841
Alabama	87,320
Mississippi	63,138
Louisiana	101,391
Arkansas	56,434
Oklahoma	71,819
New Mexico	42,834
Arizona	107,959
Texas	511,305
New Hampshire	7,358
Connecticut	30,886
New Jersey	87,960
Pennsylvania	151,072
New York	202,482
Florida	267,104
Michigan	144,060
Illinois	155,395
Ohio	176,750
Pennsylvania	151,072
New York	202,482
Massachusetts	12,298
Delaware	12,298
Virginia	82,410
North Carolina	155,729
South Carolina	77,949
Georgia	168,841
Alabama	87,320
Mississippi	63,138
Louisiana	101,391
Arkansas	56,434
Oklahoma	71,819
New Mexico	42,834
Arizona	107,959
Texas	511,305
California	48,930

A map of the Southeastern United States, highlighting North Carolina in dark blue. The map shows the following states: Kentucky, Virginia, North Carolina, South Carolina, Georgia, Alabama, Mississippi, Louisiana, and Florida. Major cities are marked with black dots and labeled: Louisville, Nashville, Knoxville, Memphis, Richmond, Norfolk, Atlanta, Jacksonville, Tampa, and Miami. The Gulf of Mexico is labeled in the bottom left corner. The text 'North Carolina 148,198' is displayed in white on the state of North Carolina.

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I-CARE, Inc. - 2023 Community Assessment

MODULE 5: Are we providing services in the right locations?

I-CARE Service Area

Of the more than 148,000 children, ages 0-5, living in poverty in North Carolina, 4,382 are in the I-CARE service area (Table 85). Using the [Annual Estimates of the Resident Population by Single Year of Age and Sex by the U.S. Census Bureau](#), an estimated 49 percent of children, ages 0-5, in poverty, are Early Head Start-eligible infants and toddlers (2,147). Approximately 34 percent are Head Start-eligible 3- and 4-year-old children (1,489) and approximately 17 percent are 5-year-olds (746).

Children Ages 0-5 in Poverty

Source: 2021 ACS 5-Year Estimates

	Under 6 Years	Est. 0-2	Est. 3-4	Est. 5
United States	4,227,649	2,071,548	1,437,401	718,700
North Carolina	148,198	72,617	50,387	25,194
Alexander County	409	200	139	70
Catawba County	2,157	1,057	733	367
Iredell County	1,816	890	617	309
I-CARE Service Area Total	4,382	2,147	1,489	746

Table 85: Children Ages 0-5 in Poverty (2021 ACS 5-Year Estimates)

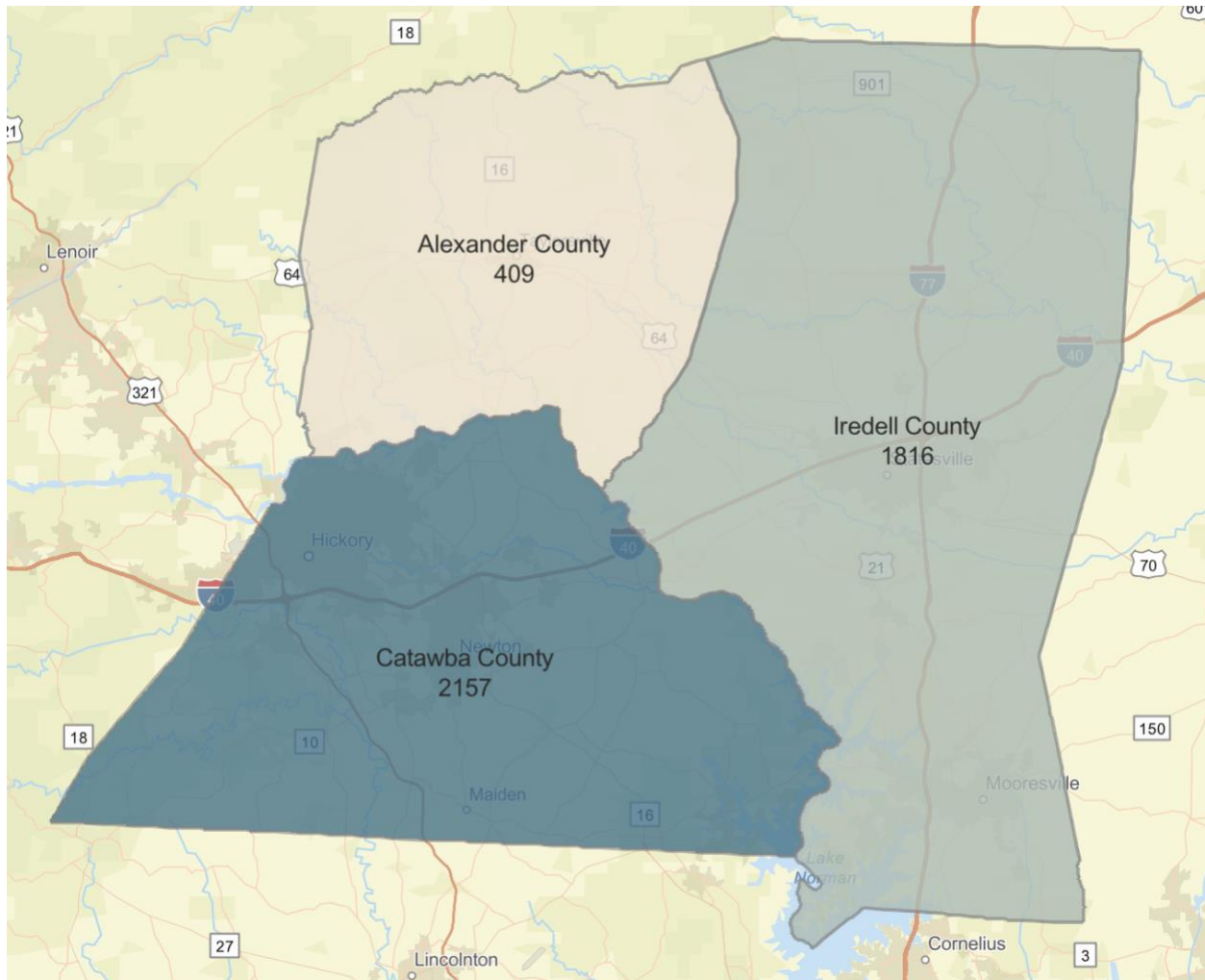


Figure 46: I-CARE Service Area: Children Ages 0-5 in Poverty (2021 ACS 5-Year Estimates)

I-CARE, Inc. - 2023 Community Assessment
MODULE 5: Are we providing services in the right locations?

Census Tracts

To better estimate the geographic location of eligible children and families, the number of children, ages 0-5, in poverty was studied by census tract. A census tract is a statistical subdivision with at least 1,200 residents, a maximum of 8,000 residents, and an average of 4,000 residents.^{cxvii}

The following figure illustrates the number of children, ages 0-5, in poverty in the I-CARE service area counties, as well as the location of all Head Start and Early Head Start centers (**black dots**) based on a March 16, 2023, center search on the [Office of Head Start's Early Childhood Learning and Knowledge Center \(ECLKC\)](#); all I-CARE Head Start and Early Head Start centers are represented by **red dots**.

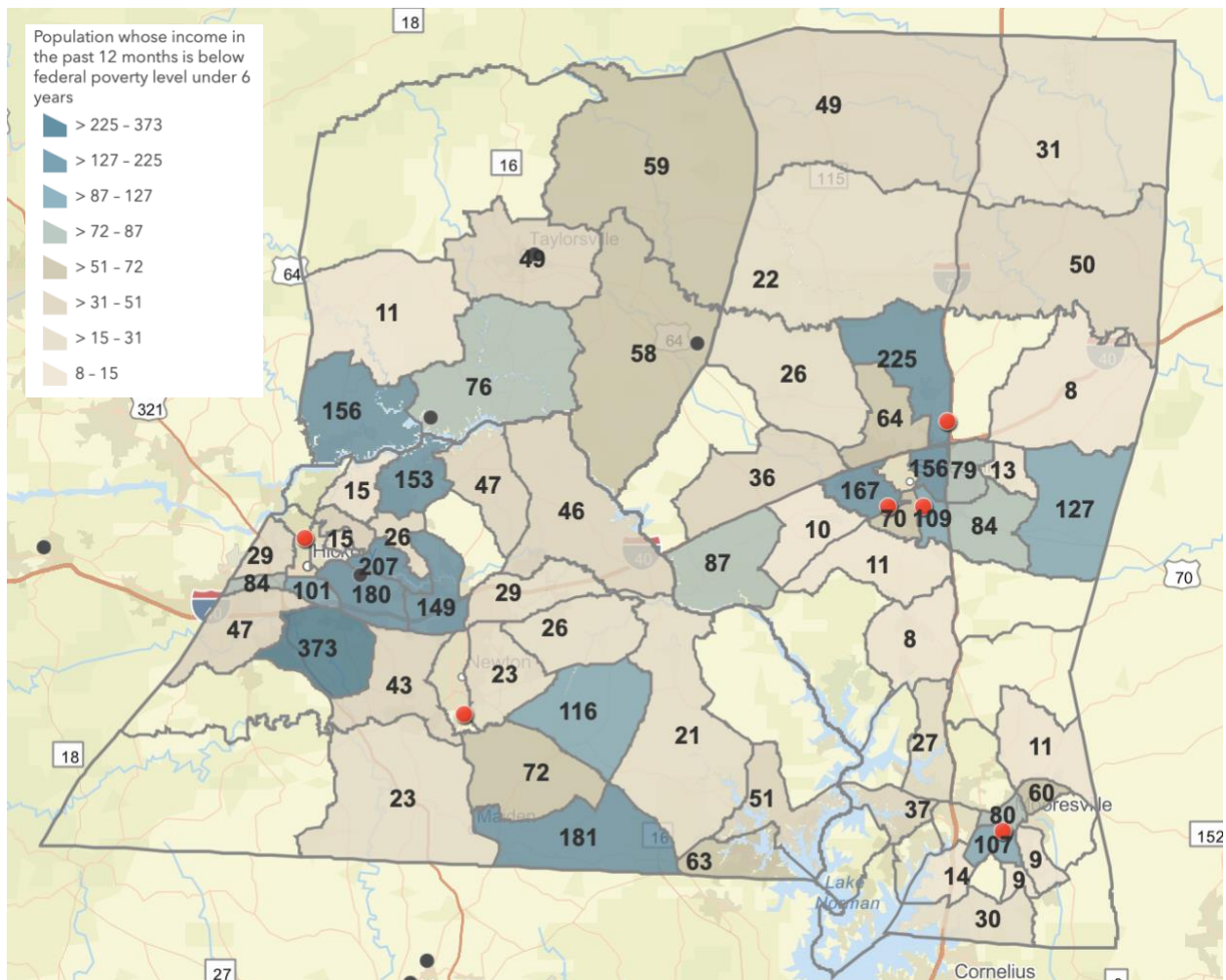


Figure 47: I-CARE Service Area: Children Ages 0-5 in Poverty by Census Tract (2021 ACS 5-Year Estimates)

Note: Numbers reported in the census tract are the total number of children, ages 0-5, in poverty. Unshaded census tracts did not report any children, ages 0-5, in poverty.

In order to navigate the map in more detail, please use the following ArcGIS link: <https://arcg.is/1G5mOC>.

I-CARE, Inc. - 2023 Community Assessment

MODULE 5: Are we providing services in the right locations?

In the I-CARE service area counties, there are a total of 87 census tracts, of which 24 reported having no children, ages 0-5, in poverty: one in Alexander County, eight in Catawba County, and 15 in Iredell County (Table 86). Census tract 111.02, located in Catawba County, reports the highest number of children, ages 0-5, in poverty, 373 children, followed by census tract 610.01 located in Iredell County, with 225 children.

Children Ages 0-5 in Poverty		
<i>Source: 2021 ACS 5-Yr Estimates</i>		
Census Tract	County	#
Census Tract 111.02	Catawba County	373
Census Tract 610.01	Iredell County	225
Census Tract 103.04	Catawba County	207
Census Tract 116.02	Catawba County	181
Census Tract 110	Catawba County	180
Census Tract 604	Iredell County	167
Census Tract 601	Iredell County	156
Census Tract 407	Alexander County	156
Census Tract 103.01	Catawba County	153
Census Tract 102.04	Catawba County	149
Census Tract 607.01	Iredell County	127
Census Tract 114.02	Catawba County	116
Census Tract 602	Iredell County	109
Census Tract 616.03	Iredell County	107
Census Tract 109	Catawba County	101
Census Tract 611.03	Iredell County	87
Census Tract 107	Catawba County	84
Census Tract 606.03	Iredell County	84
Census Tract 616.01	Iredell County	80
Census Tract 606.01	Iredell County	79
Census Tract 406	Alexander County	76
Census Tract 116.01	Catawba County	72
Census Tract 603	Iredell County	70
Census Tract 610.03	Iredell County	64
Census Tract 115.06	Catawba County	63
Census Tract 615.01	Iredell County	60
Census Tract 401	Alexander County	59
Census Tract 405	Alexander County	58
Census Tract 115.05	Catawba County	51
Census Tract 608.02	Iredell County	50
Census Tract 609.01	Iredell County	49
Census Tract 404	Alexander County	49
Census Tract 102.01	Catawba County	47
Census Tract 111.01	Catawba County	47
Census Tract 101.01	Catawba County	46
Census Tract 117.01	Catawba County	43
Census Tract 104.03	Catawba County	37
Census Tract 614.02	Iredell County	37
Census Tract 611.02	Iredell County	36

Children Ages 0-5 in Poverty		
<i>Source: 2021 ACS 5-Yr Estimates</i>		
Census Tract	County	#
Census Tract 608.01	Iredell County	31
Census Tract 614.07	Iredell County	30
Census Tract 101.02	Catawba County	29
Census Tract 106	Catawba County	29
Census Tract 612.03	Iredell County	27
Census Tract 103.03	Catawba County	26
Census Tract 114.01	Catawba County	26
Census Tract 610.02	Iredell County	26
Census Tract 113	Catawba County	23
Census Tract 117.02	Catawba County	23
Census Tract 609.02	Iredell County	22
Census Tract 115.01	Catawba County	21
Census Tract 103.02	Catawba County	15
Census Tract 104.04	Catawba County	15
Census Tract 614.04	Iredell County	14
Census Tract 606.02	Iredell County	13
Census Tract 612.01	Iredell County	11
Census Tract 613.03	Iredell County	11
Census Tract 403	Alexander County	11
Census Tract 611.04	Iredell County	10
Census Tract 615.03	Iredell County	9
Census Tract 616.04	Iredell County	9
Census Tract 607.02	Iredell County	8
Census Tract 612.02	Iredell County	8
Alexander County		
Census Tract 402=0		
Catawba County		
Census Tract 102.03, Census Tract 104.02, Census Tract 105.01, Census Tract 105.02, Census Tract 112, Census Tract 115.03, Census Tract 118.01, Census Tract 118.02 = 0		
Iredell County		
Census Tract 605, Census Tract 607.03, Census Tract 611.01, Census Tract 612.04, Census Tract 612.05, Census Tract 613.01, Census Tract 613.02, Census Tract 613.04, Census Tract 614.01, Census Tract 614.03, Census Tract 614.05, Census Tract 614.06, Census Tract 614.08, Census Tract 615.02, Census Tract 616.05 = 0		

Table 86: I-CARE Service Area: Children Ages 0-5 in Poverty by Census Tract (2021 ACS 5-Year Estimates)

MODULE 6: WHAT ARE THE RESIDENTS OF THE COMMUNITY(IES) SAYING?

Strengths and Needs of Eligible Children and Families

Parent and Client Survey Responses

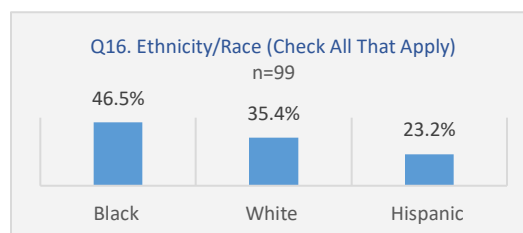
Characteristics

In order to collect primary data from I-CARE, Inc. Head Start/Early Head Start (HS/EHS) parents/guardians, CSBG and Weatherization clients, a Client Needs Survey was distributed in English and Spanish to all individuals and families enrolled at the time of the Community Assessment (see Appendix A for a copy of the survey in English).

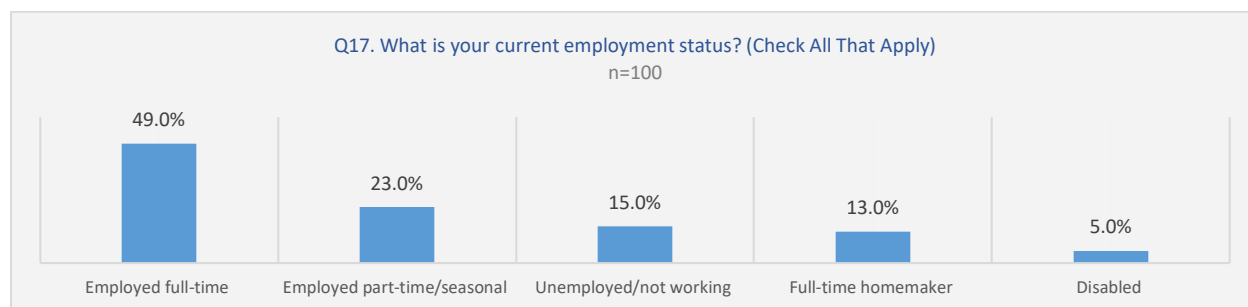
A total of 162 surveys were completed and returned. There were 131 surveys completed by HS/EHS parents/guardians, representing 72 percent of the program's actual enrollment, and 31 surveys completed by CSBG and Weatherization Clients. **HS/EHS parent/guardian data will be presented with tables and charts. The 31 surveys completed by CSBG and Weatherization clients will be presented in summary form only.**

Head Start/Early Head Start Parents and Guardians

Of those HS/EHS parents and guardians who answered this question, 46.5 percent indicated their race/ethnicity to be Black, 35.4 percent White, and 23.2 percent Hispanic. The remaining 10 percent was split among those selecting Asian/Pacific Islander, Native American, and "Other." *NOTE: Answers may exceed 100% as individuals may identify with more than one race.*

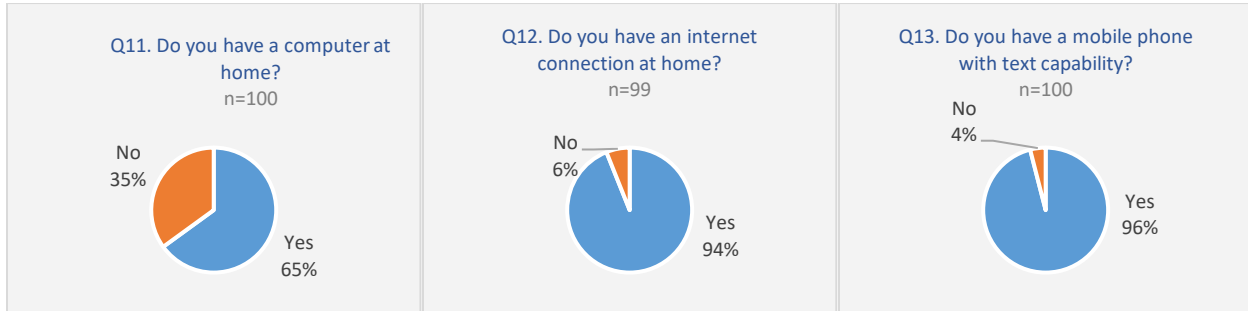


Approximately 49 percent of HS/EHS respondents were employed full-time, 23 percent were employed part-time/seasonal, 15 percent were unemployed/not working, 13 percent were full-time homemakers, and five percent were disabled.



Eighty percent indicated having a checking or savings account, **with 20 percent indicating they do not have a checking or savings account.**

More than one-third of respondents indicated not having a computer at home (35 percent); however, nine out of 10 do have an internet connection (94 percent). **Similarly, more than nine out of 10 Head Start parents or guardians do have a mobile phone with text capability, 96 percent.**



CBSG and Weatherization Clients

Of those clients who answered this question, 41.7 percent indicated their race/ethnicity to be Black, with the same percent (41.7 percent) identifying as White, and 12.5 percent as Hispanic. The remaining 8.4 percent was split among those selecting Native American and “Other.” *NOTE: Answers may exceed 100% as individuals may identify with more than one race.*

Approximately 37.5 percent of respondents were employed full-time, 29.2 percent were disabled, 16.7 percent were employed part-time/seasonal, 12.5 percent were retired, and 8.3 percent were unemployed/not working. Eighty-eight percent of survey takers who responded to this question indicated having a checking or savings account, with 12 percent indicating they do not have a checking or savings account.

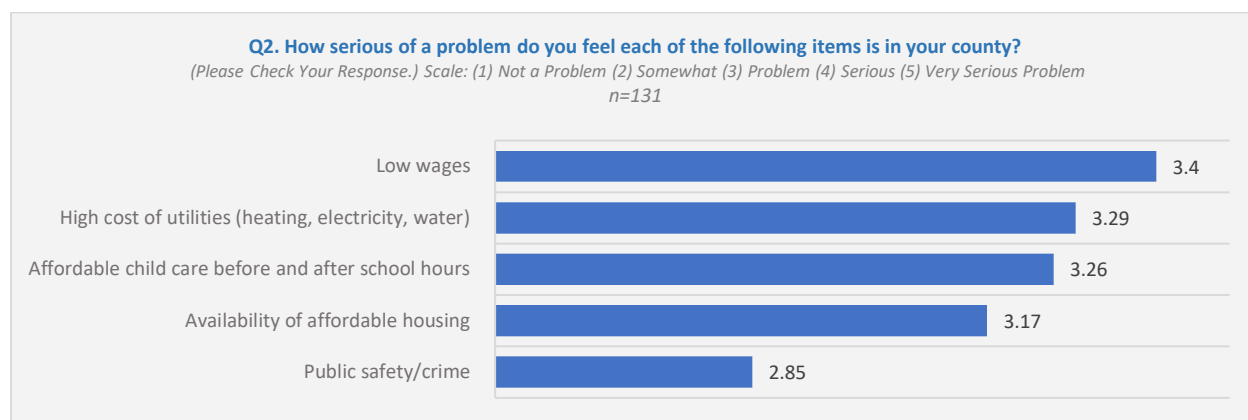
More than 5 out of 10 respondents indicated they did have a computer at home, 58 percent, and 92 percent of respondents do have an internet connection at home. Furthermore, 100 percent of the CSBG/Weatherization clients who answered this question indicated that they have a mobile phone with text capability.

Perception of Problems in the Community

Head Start/Early Head Start Parents and Guardians

HS/EHS survey takers were given a list of 22 items and asked to rate each on a scale of 1 to 5 to indicate how serious of a problem they found each item to be in their city or town. The scale provided was as follows: (1) Not a Problem (2) Somewhat (3) Problem (4) Serious Problem (5) Very Serious Problem.

According to those who responded to the survey, **low wages** and **high cost of utilities (heating, electricity, water)** were the most significant problems in their community, rating each a 3.4 and 3.29, respectively. Affordable child care before and after school hours, availability of affordable housing, and public safety/crime were among the top five issues for survey respondents.



Note: Low wages, affordable child care before and after school hours, and high cost of utilities were rated a 5 (Very Serious Problem) by 41.9, 38.5, and 38.2 percent of respondents, respectively. Addiction to opioids and incidence of drug and alcohol abuse were not among the top three issues for survey respondents; however, 24 and 23.9 percent, respectively, indicate this was a “very serious problem” for them.

How serious of a problem do you feel each of the following items is in your county?		
Scale:(1) Not a Problem (2) Somewhat (3) Problem (4) Serious Problem (5) Very Serious Problem		
	Percent Who Rated Item a 5 “Very Serious Problem”	Rating Average
Low wages	41.9%	3.4
Affordable child care before and after school hours	38.5%	3.26
High cost of utilities (heating, electricity, water)	38.2%	3.29
Availability of affordable housing	34.6%	3.17
Addiction to opioids	24.0%	2.68
Incidence of drug and alcohol abuse	23.9%	2.77
Availability and access to public transportation	23.7%	2.66
Public safety/crime	21.5%	2.85
Availability and access to mental health services	21.5%	2.53
Gang activity	20.9%	2.62
Domestic violence	17.1%	2.59
Services for children with disabilities	16.4%	2.34
Access to public assistance (WIC, Food Stamps - SNAP, TANF)	16.2%	2.45
Child abuse and neglect	15.4%	2.55
Incarceration of parents	15.0%	2.54
Availability of jobs	14.6%	2.52
Availability of recreation for families (parks, church programs, membership organizations)	12.3%	2.21

I-CARE, Inc. - 2023 Community Assessment

MODULE 6: What are the residents of the community(ies) saying?

Strengths and Needs of Eligible Children and Families

How serious of a problem do you feel each of the following items is in your county?

Scale: (1) Not a Problem (2) Somewhat (3) Problem (4) Serious Problem (5) Very Serious Problem

	Percent Who Rated Item a 5 "Very Serious Problem"	Rating Average
Quality of public education in your city or town	10.8%	2.35
Access to health care	10.0%	2.11
Child health issues (obesity, exposure to lead, asthma)	9.4%	2.33
Availability of job training	7.9%	2.2
Availability of adult education (GED, ESL, etc.)	6.9%	2.05

CBSG and Weatherization Clients

Survey takers were given a list of 22 items and asked to rate each on a scale of 1 to 5 to indicate how serious of a problem they found each item to be in their city or town. The scale provided was as follows: (1) Not a Problem (2) Somewhat (3) Problem (4) Serious Problem (5) Very Serious Problem.

According to those who responded to the survey, **availability of affordable housing** and **high cost of utilities (heating, electricity, water)** were the most significant problems in their community, rating each a 3.97 and 3.77, respectively. Low wages, addiction to opioids, and incidence of drug and alcohol abuse were among the top five issues for survey respondents.

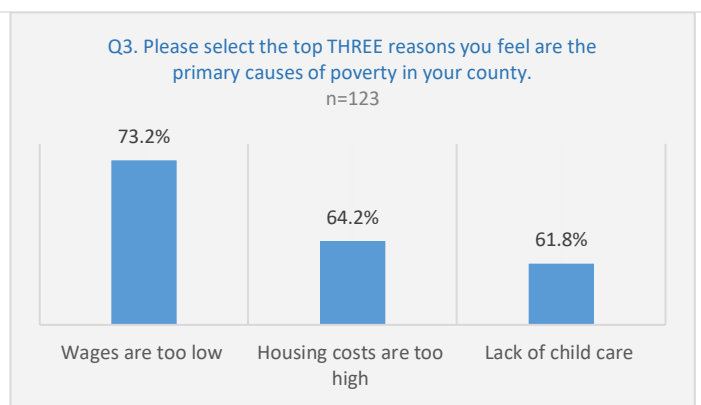
Perception of Poverty

Head Start/Early Head Start Parents and Guardians

The top three reasons for poverty in the community according to HS/EHS survey respondents were that wages are too low, housing costs are too high, and lack of child care.

Q3. Please select the top THREE reasons you feel are the primary causes of poverty in your county.

Answer Choices	Responses	
Wages are too low	73.2%	90
Housing costs are too high	64.2%	79
Lack of child care	61.8%	76
Utility costs are too high	35.8%	44
People don't want to work	33.3%	41
Health care costs are too high	32.5%	40
Lack of transportation	25.2%	31
Lack of education/training	17.9%	22
Not enough jobs	13.8%	17
Lack of job skills	13.0%	16



CBSG and Weatherization Clients

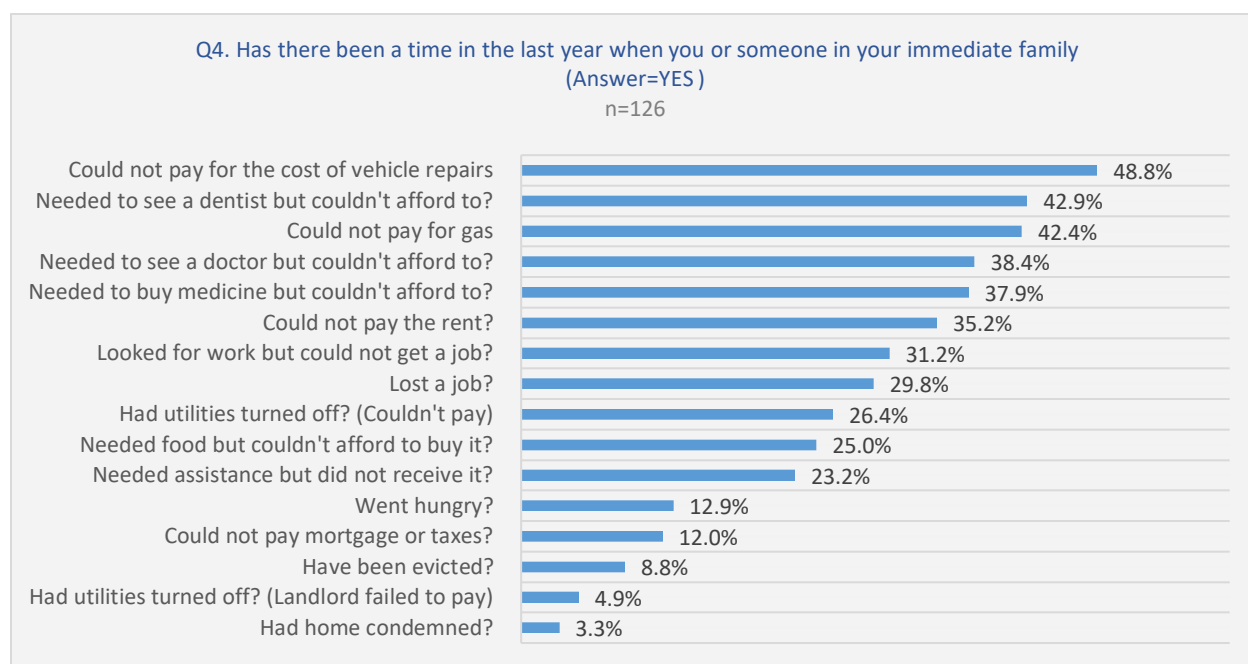
The top three reasons for poverty in the community according to those who responded were that **wages are too low, housing costs are too high, and lack of child care.**

Family Needs

Head Start/Early Head Start Parents and Guardians

Ninety-six percent of HS/EHS respondents answered the questions regarding whether they or someone in their immediate family experienced a time in the past year where they needed a particular service or experienced particular situations related to inadequate income (see chart below). Forty-nine percent indicated that they or someone in their immediate family at one point within the last year **could not pay for the cost of vehicle repairs**; 42.9 percent **needed to see a dentist but could not afford to**; 42.4 percent **could not pay for gas**; 38.4 percent **needed to see a doctor but couldn't afford to**; 37.9 percent **needed to buy medicine but could not afford to**; 35.2 percent **could not pay the rent**; 31.2 percent **looked for work but could not get a job**; and 29.8 percent **lost a job**.

Approximately 26.4 percent of respondents or someone in their immediate family **had utilities turned off (couldn't pay)**; 25 percent **needed food but couldn't afford to buy it**; 23.2 percent **needed assistance but did not receive it**. (Note: 126 families responded to Question 4 below, of which 125 responded to the question about being evicted, with 11 families indicating that they or someone in their immediate family had been affected by eviction.)



CBSG and Weatherization Clients

Ninety seven percent of survey takers responded to the question asking if they or someone in their immediate family experienced a time in the past year where they needed a particular service or experienced particular situations related to inadequate income. Eighty-seven percent indicated that they or someone in their immediate family had at one point within the last year **needed to see a dentist but could not afford to**; 76.7 percent **could not pay for the cost of vehicle repairs**; 75.9 percent **needed to buy medicine but could not afford to**; 75 percent **needed to see a doctor**

but couldn't afford to; 73.3 percent could not pay for gas; 66.7 percent could not pay the rent; 60 percent needed assistance but did not receive it; and 60 percent needed food but couldn't afford to buy it.

Approximately 46.7 percent lost a job; 41.4 percent had utilities turned off (couldn't pay), and 33.3 percent looked for work but could not get a job.

What are the 2 or 3 most important things that you believe will improve your household's quality of life?

Head Start/Early Head Start Parents and Guardians

Fifty-four percent of HS/EHS respondents answered the question "What are the 2 or 3 most important things that you believe will improve your household's quality of life?" with 172 separate answers. Thirty-six percent of responses indicated a need for higher wages/income or better jobs and financial planning; 23 percent of responses related to the need for better housing and lower utility and rental costs; 19 percent of responses related to personal/family goals; 14 percent of respondents stated they needed more affordable child care, longer child care hours and higher education in general; and 5 percent of responses indicated a need for access to lower food costs and healthier eating. The balance of answers included statements such as: better transportation, inflation going down, owning a home, a second income, increase in job training, recreational activities, more community activities for families, and work-life balance.

Broad Category		Selection of Respondent Answers
Employment/Income	36%	Higher wages More money Better financial planning Work
Housing/Utilities	23%	Affordable housing Cheaper rent Cheaper utilities Cheaper living costs
Personal/Family Goals	19%	Communication More time together Love Less stress
Education	14%	Child care Higher education Longer child care hours Affordable child care
Health Care/Lifestyle	5%	Eating healthier Lower food costs Access to food at favorable prices Being able to get more assistance through food stamps

CBSG and Weatherization Clients

Sixty-one percent of respondents answered the question "What are the 2 or 3 most important things that you believe will improve your household's quality of life?" with 49 separate answers. Twenty-nine percent of responses related to the need for better/more affordable housing and lower utility costs; 27 percent of responses indicated a need for higher wages/income, better jobs,

and more money; 18 percent of respondents stated a need for better education or child care and a desire to further their education; 14 percent of responses indicated a need for good insurance, healthier eating, and access to food stamps; and 6 percent of responses related to personal/family goals. The balance of answers included statements such as: affordable transportation, more home care for the elderly, home repair services, more time with my children, and disability assistance.

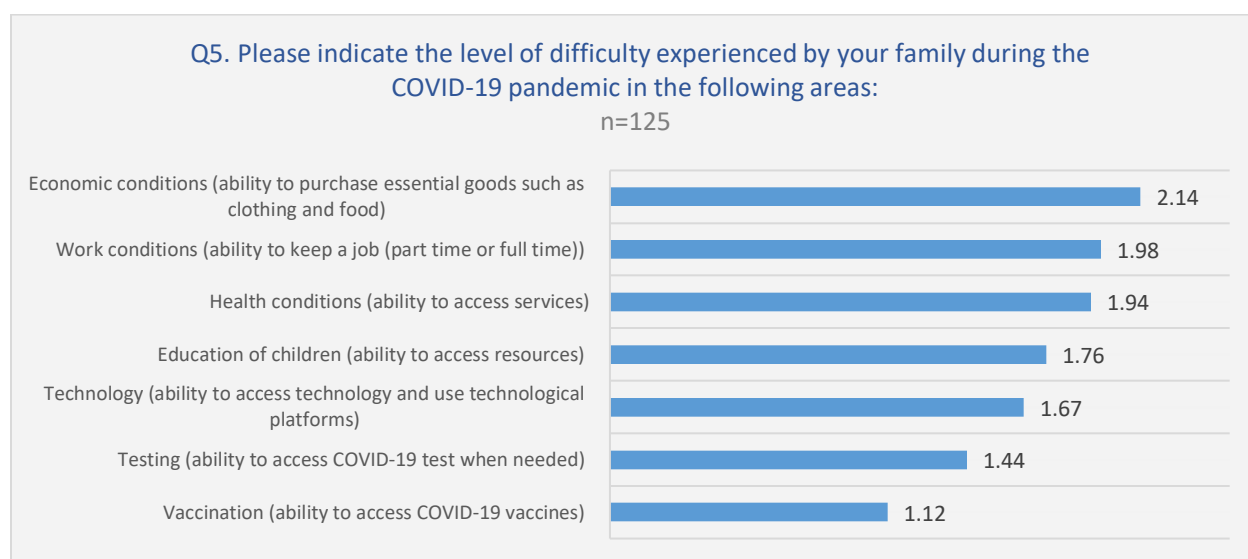
Level of Difficulty Experienced During COVID-19

Head Start/Early Head Start Parents and Guardians

HS/EHS survey takers were given a list of seven items and asked to rate the level of difficulty experienced by their family in these areas during the COVID-19 pandemic. Respondents were asked to choose between: Does Not Apply (0), Easy (1), Neutral (2), Difficult (3), or Very Difficult (4) when rating the following areas:

- Economic Conditions (ability to purchase essential goods such as clothing and food)
- Work Conditions (ability to keep a job, part-time or full-time)
- Health Conditions (ability to access services)
- Education of Children (ability to access resources)
- Technology (ability to access technology and use technological platforms)
- Testing (ability to access COVID-19 test when needed)
- Vaccination (ability to access COVID-19 vaccines)

Economic Conditions and **Work Conditions** were rated the highest level of difficulty at 2.14 and 1.98, respectively.



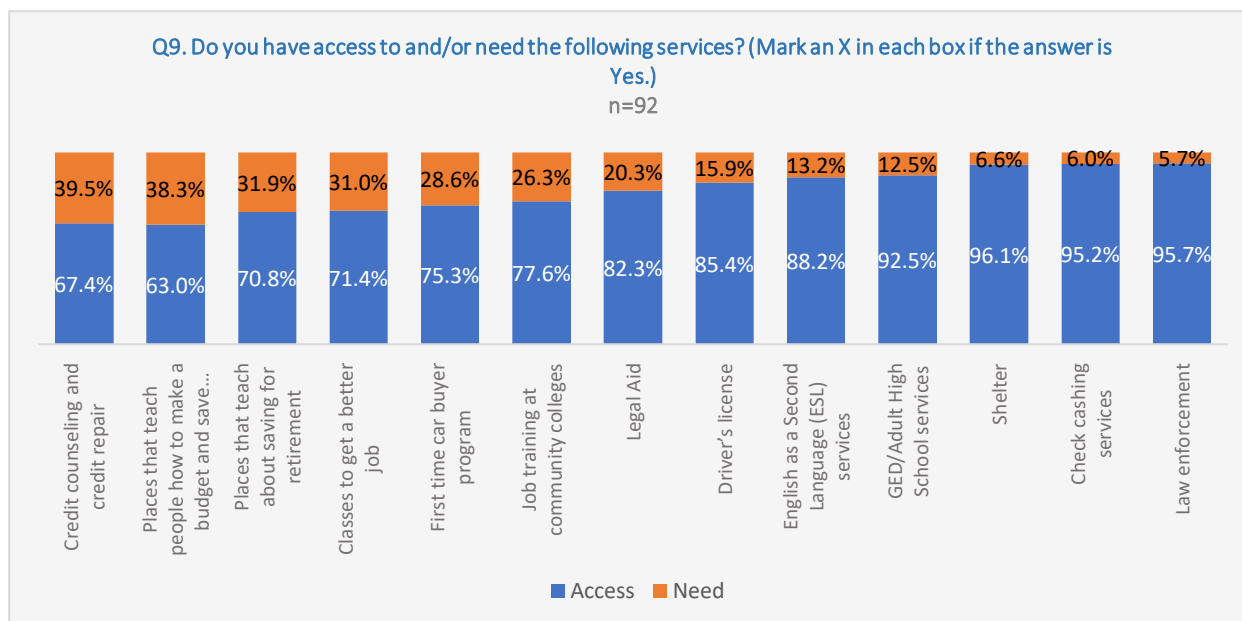
CBSG and Weatherization Clients

Economic Conditions and **Health Conditions** were rated the highest level of difficulty at 2.77 and 2.5, respectively.

Access to or Need for Services in the Community

Head Start/Early Head Start Parents and Guardians

Seventy percent of HS/EHS respondents answered the question regarding whether they had access and/or need for a particular group of services. The top three 'needs' selected by the respondents were **credit counseling and repair, places that teach people how to make a budget and save money, and places that teach about saving for retirement.**



Other Programs Used the Most. When asked which programs are used the most, survey takers indicated they use Social Services, WIC, SNAP, and Medicaid the most. Additional agencies used include Section 8, Salvation Army, ECCCM, the Health Department, local parks and libraries, and public schools.

CBSG and Weatherization Clients

Sixty-one percent of respondents answered the question regarding whether they had access and/or need for a particular group of services. The top three 'needs' selected by the respondents were a **first-time car buyer program, places that teach about saving for retirement, and places that teach people how to make a budget and save money.**

Other Programs Used the Most. When asked which programs are used the most, survey takers indicated they use Social Services the most. Additional agencies used include Catawba Valley Family Care, Salvation Army, Yokefellow, Mooresville Christian Mission, Habitat Critical Home Repair, and Supplemental Security Income.

Head Start Recommendation

Head Start/Early Head Start Parents and Guardians

HS/EHS respondents were asked how likely they were to recommend the Head Start program to other members of the community, and of the 100 responses, 96 percent stated they would recommend this program to other families with children, ages 0-5. Respondents were also asked if they currently knew families with children, ages 0-5, eligible for Head Start/Early Head Start that they could refer. Thirty-four percent of respondents answered “yes” to this question; the only suggested area of recruitment provided was Gastonia.

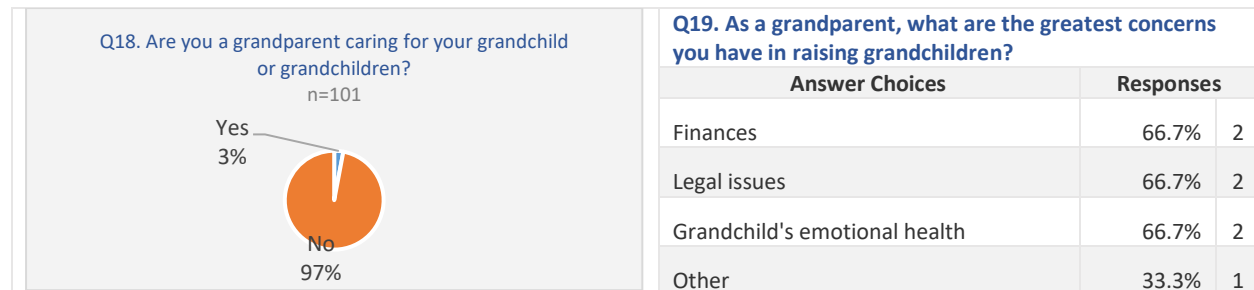
CBSG and Weatherization Clients

Respondents were asked how likely they were to recommend this program to other members of the community, and of the 22 responses, 100 percent stated they would recommend this program to other families with children, ages 0-5. Respondents were also asked if they currently knew families with children, ages 0-5, eligible for Head Start/Early Head Start that they could refer. Thirty-five percent of respondents answered “yes” to this question.

Grandparent Caregivers

Head Start/Early Head Start Parents and Guardians

The majority of HS/EHS respondents, 97 percent, indicated “no” to the question asking whether they were a grandparent caring for a grandchild or grandchildren.



Of the three respondents who answered the question regarding their greatest concerns raising grandchildren, the top three concerns were “finances,” “legal issues,” and their “grandchild’s emotional health.”

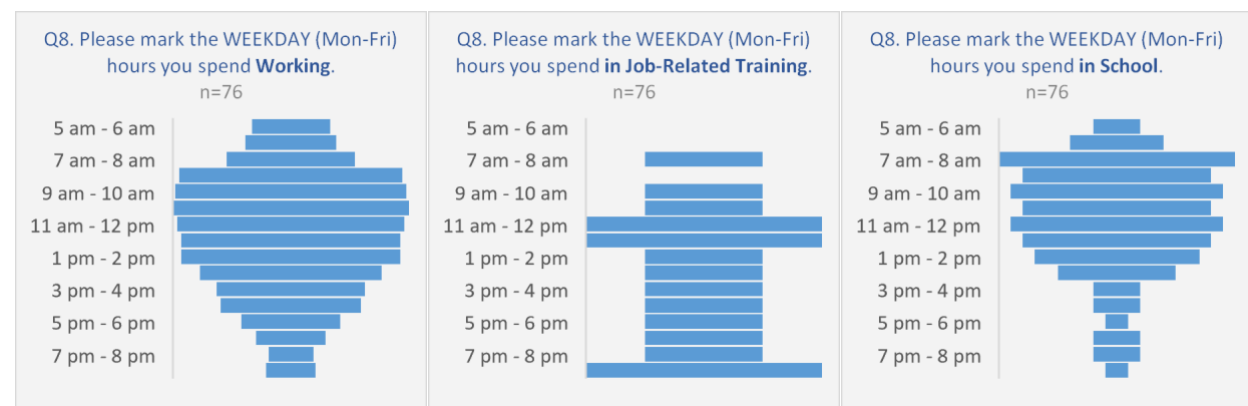
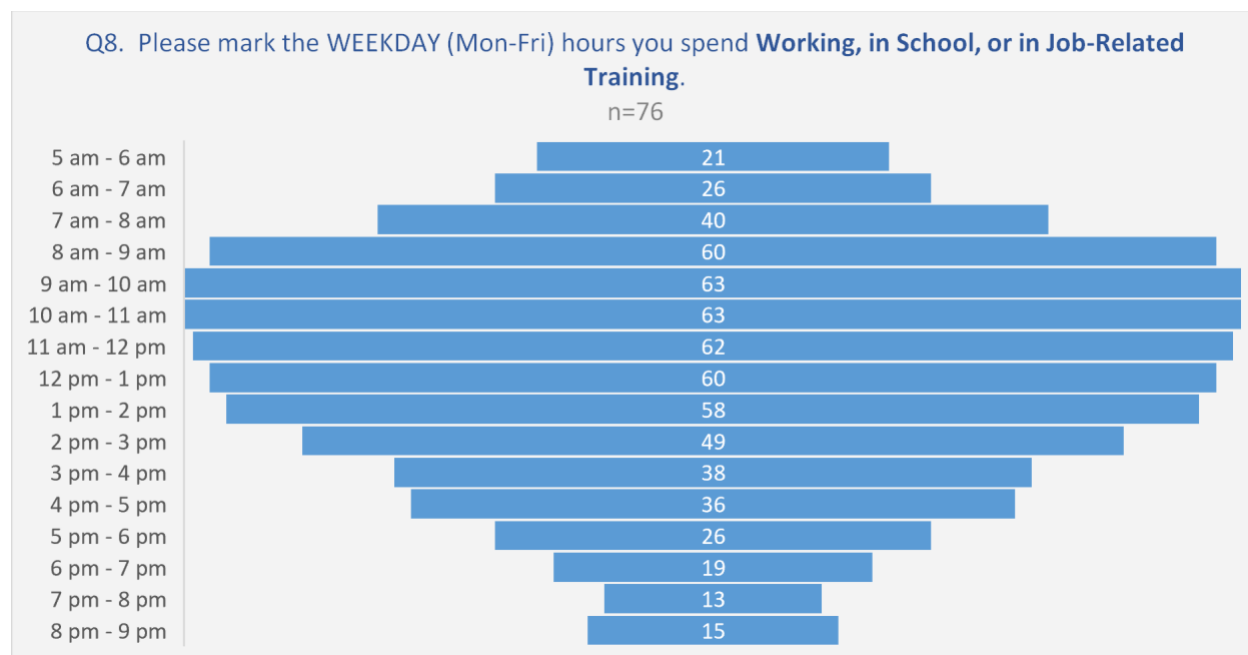
CBSG and Weatherization Clients

The majority of respondents, 83 percent, indicated “no” to the question regarding whether they were a grandparent caring for a grandchild or grandchildren. Of the four respondents who answered the question regarding their greatest concerns raising grandchildren, the top concerns were “finances,” “legal issues,” and their “grandchild’s physical/emotional health.”

HS Performance Standard: 1302.11(b)(iii): Typical work, school, and training schedules of parents with eligible children

Head Start/Early Head Start Parents and Guardians

To determine the typical work, school, and training schedules of parents with HS/EHS eligible children, parents were asked to select the hours during the week that they spend at work, school, or job-related training. Fifty-eight percent of respondents answered the question; results show that the majority of parents are working, in school, or in job-related training between the hours of 8 a.m. and 5 p.m.



CBSG and Weatherization Clients

To determine the typical work, school, and training schedules, CSBG and Weatherization clients were asked to select the hours during the week that they spend at work, school, or job-related training. Forty-two percent of respondents answered the question; results show that the majority of clients are working, in school, or in job-related training between the hours of 8 a.m. and 5 p.m.

I-CARE, Inc. - 2023 Community Assessment

MODULE 6: What are the residents of the community(ies) saying?

Strengths and Needs of Eligible Children and Families

Key Informant Response Analysis

As a strategic step to supplement secondary data findings, the I-Care, Inc. program staff identified a group of key informants and invited them to answer questions that provide additional insight into the communities and families served by the agency in their service area. The key informants, leaders, and experts who responded to the community assessment included the following:

Executive Director	Statesville Family YMCA
Financial Aid Counselor	LR
Executive Director	Catawba County United Way
Director of Workforce Development	Western Piedmont Workforce Development Board
Board member	I-CARE, Inc.
Community Liaison	New Season
Board member/Vice-Chair	I-CARE, Inc.
CEO/Founder	The Bridge Community, Inc.
Executive Director	Christian Crisis Center
Center Manager	NC Works
Permanent Supportive Housing Specialist	Vaya Health
Career Advisor, NC Works	Department of Workforce Solutions
Coordinator	WPCOG
Safe Kids Catawba County, Coordinator	Safe Kids Catawba County
Board member	I-CARE, Inc.
President	Statesville Branch NAACP 5454
Library Director	Catawba County Library
Program Director	Iredell Co Partnership for Young Children
Town Manager	Town of Taylorsville
Administrative Assistant/Assistant to VP for Student Services	I-CARE, Inc. and Mitchell Community College, Statesville Housing Authority
Executive Director	Catawba County Partnership for Children
Business owner/Elected official	N/A
Office Manager/Enrollment Manager	Alexander Center Complex
IM Administrators	Iredell County DSS
I-CARE Board Chair/ Assistant Director	Mooresville Area Christian Mission
Executive Director	United Way of Lincoln County
Director of PH Development & Promotion	Iredell County Health Department
Volunteer	United Way
Advisory board member	I-CARE Statesville
High School Counselor and I-CARE Board Member	Public Schools
Statesville City Council	City of Statesville
Major Joe Mure	Salvation Army
Teacher	Success Institute charter School
Self-employed	LM Wellness
President & CEO	Hospice and Palliative Care of Iredell County
Executive Director	United Way of Iredell County
Director	Iredell-Statesville Schools
School Psychologist	Catawba County Schools

See [Appendix C: Key Informant Responses](#) for complete answers provided in alphabetical order.

Issues Affecting Economic Self-Sufficiency

After reviewing the answers provided by key informants, we can summarize and categorize the top nine priority issues affecting economic self-sufficiency in their communities during the next four years. These nine categories provide a clear overview of the critical concerns in communities regarding economic self-sufficiency over the next four years.

1. Education and Training:
 - Access to education
 - Support for individuals with an incarceration history
 - Limited educational opportunities at community colleges
 - Skill trade training
 - Qualified educators in early childhood and school systems
 - Teaching financial literacy and economic stability in schools
2. Employment and Wages:
 - Access to well-paying jobs
 - Employment/career opportunities
 - Wages not keeping up with inflation
 - Skills mismatched between individuals' capabilities and desired careers
3. Housing:
 - Affordable and attainable housing
 - Housing stability
 - Homelessness and lack of shelters
 - Housing for those with mental health issues
 - Rental rates and fluctuating interest rates
4. Child Care:
 - Access to affordable, quality child care
 - Availability of child care services
 - Child care options for single working mothers
5. Transportation:
 - Public transportation
 - Affordable transportation options
 - Lack of transport in rural areas
6. Basic Needs and Resources:
 - Access to affordable groceries and food
 - Utility assistance
 - Access to resources within the community
 - Food disparities and insecurity
 - Price stabilization of goods and services
 - Inflation and rising consumer goods prices
7. Technology and Infrastructure:
 - Broadband and internet access
 - Cell phone affordability and access for seniors and homeless
8. Health and Social Issues:
 - Substance abuse
 - Health effects of violence
 - Racism impacting social determinants of health
 - Absent parents in families
9. Climate Change and Environment:
 - Impact of climate change on energy costs and food sources
 - Farming and local food production

Priority Issues Impacting Adult Education

According to key informants, the top priority issues impacting adult education during the next four years in their cities or counties:

1. Access and Affordability:
 - Availability and accessibility of courses and programs
 - Access for individuals with criminal backgrounds
 - Financial assistance for education
 - High cost of education
 - Funding at the student and government level
2. Work-Life Balance:
 - Balancing work, school, and family responsibilities
 - Scheduling flexibility
 - Child care availability and affordability
 - Online course offerings
3. Vocational Training and Employment:
 - Aligning curriculum with local employer needs
 - Employer partnerships for job placement and training
 - Vocational training and apprenticeships
 - Paid apprenticeships and stipends for child care
4. Support for Vulnerable Populations:
 - Education for formerly incarcerated individuals, homeless, and those with substance abuse issues
 - Mental health support
 - Resources for low-income families
 - Senior citizens' ability to keep up with technology
5. Digital and Financial Literacy:
 - Digital literacy and access to technology
 - Financial literacy and management
 - Access to public internet and computers
6. Transportation:
 - Affordable public transportation
 - Lack of transportation for education access
7. Education Policy and Infrastructure:
 - Standardized testing
 - Teacher salaries
 - Charter schools and voucher programs
 - Common core
 - Disciplinary policies
8. Community Awareness and Engagement:
 - Communication of available resources and training
 - Awareness of educational opportunities
 - Local programs to enhance resumes
 - Diversified high school programs for career exploration
9. Challenges with Online Learning:
 - Limited internet access and connectivity
 - Inadequate working knowledge of online learning formats

Number One Priority Issue/Concern

Here is a summary of the key informant responses to the question, “What is the number one priority issue or concern for the city and county leaders during the next four years?” organized into categories and prioritized by the frequency of mention. As perceived by the informants, the number one priority issue appears to be housing and affordability, followed by economic concerns and social issues.

1. Housing and Affordability (14 mentions):

- Affordable housing
- Safe and decent housing
- Housing for homeless
- Low-cost housing
- Housing stock

2. Economic Concerns (12 mentions):

- Economic growth and sustainability
- Job opportunities and filling job vacancies
- Skilled laborers
- Wages and compensation
- Taxation and finance
- Small business initiatives

3. Social Issues (8 mentions):

- Mental health resources and services
- Homelessness and poverty
- Substance use and addiction support
- Support for single-parent families
- Early childhood education and support

4. Infrastructure and Transportation (6 mentions):

- Balancing growth with infrastructure needs
- Roadways and public transportation
- Connecting rural areas to urban centers

5. Education and Training (5 mentions):

- Vocational and trade education
- Workforce development
- Support for early educators

6. Health (4 mentions):

- Accessible and affordable health care
- Insurance for the poor
- Addressing environmental contamination

7. Diversity, Equity, and Inclusion (3 mentions):

- Employment opportunities for those with criminal backgrounds
- Creating policies promoting diversity, equity, and inclusion

8. Safety and Environment (2 mentions):

- Balancing growth with environmental impacts
- School and community safety

9. Government and Leadership Concerns (1 mention):

- Staying in office

Top Strengths of I-CARE Communities

Based on the key informant responses, the top strengths of I-CARE cities and communities are summarized and prioritized into the following categories:

1. Collaboration and Partnerships:

- Strong cooperation between agencies, community organizations, and local government
- Willingness to help and support each other
- Active involvement of civic groups, churches, and the business community

2. Education and Resources:

- The good school system, early college, and reputable community college
- High graduation rates and a focus on early childhood education
- Strong community services and agencies offering various resources (e.g., food pantries, backpack food ministries)

3. Economic Growth and Opportunities:

- Employment opportunities and a growing economy
- Location advantages with proximity to major interstates and metro areas
- Sound fiscal management and low tax rates

4. Community Engagement and Quality of Life:

- Friendly and caring community with a sense of togetherness
- Safe, clean, and slower-paced environment
- Access to outdoor recreational facilities, parks, walking trails, and diverse social activities

Top Priorities for Recovery from COVID-19

A summary, categorization, and prioritization of the top priorities for your community's recovery from COVID-19 based on key informants are:

1. Housing and Financial Stability:
 - Affordable housing and addressing the housing crisis
 - Financial literacy and assistance with debt from utility vendors and landlords
 - Equitable housing and addressing the public housing shortage
2. Health and Mental Health:
 - Access to health care and addressing health care costs
 - Mental health support and resources for both adults and children
 - Continuing education about COVID-19 and promoting preventive measures
3. Employment and Economic Recovery:
 - Increasing employment opportunities, including for ex-convicts and young adults
 - Supporting small businesses and promoting economic growth
 - Career awareness and employability skills for K-12 students
4. Education and Child Care:
 - Addressing child care teacher shortages and increasing infant/toddler child care slots
 - Improving the early childhood educator pipeline
 - Ensuring access to high-quality early childhood programs and providing necessary support services
5. Community Support and Well-being:
 - Addressing food security and supporting those in need
 - Mental health resources to address depression, anxiety, and potential issues stemming from abuse during the lockdown
 - Encouraging collaboration, patience, and understanding among community members

These priorities encompass a range of concerns related to housing, health, employment, education, and overall community well-being in the context of recovering from the COVID-19 pandemic.

Success in Addressing Causes and Conditions of Poverty

The key informants have identified a variety of agencies, organizations, and leaders that have successfully addressed the causes and conditions of poverty in the county. The responses can be categorized into the following groups:

1. Government and Community Organizations:
 - Department of Social Services (DSS)
 - Western Piedmont Council of Governments
 - NC Works
 - Iredell County Partnership
 - Iredell County Commissioners
 - County Commissioners
 - Health First Center at CVMC
 - Council on Adolescents
 - I-CARE, Inc.
 - Fifth Street Shelter
 - Feed NC
 - Hesed House
 - Iredell Christian Ministries
 - Greater Hickory Cooperative Christian Ministries
 - The Soup Kitchen of Hickory
 - Centro Latino of Hickory
2. Educational Institutions:
 - Mitchell Community College
 - Iredell Statesville Schools
 - School systems
3. Nonprofit Organizations:
 - United Way
 - I-CARE, Inc.
 - ECCCM (Eastern Catawba Cooperative Christian Ministry)
 - Christian Crisis Center
 - Mooresville Christian Mission
 - Salvation Army
 - Safe Harbor
 - Exodus
4. Churches and Faith-Based Organizations:
 - Various churches and pastors
 - The Bridge Community
5. Law Enforcement Agencies:
 - Statesville Police Department
 - Iredell County Sheriff's Department
6. Social Services:
 - Social Security
 - Earned Tax Income
 - Child Tax Income

The agencies and organizations that were mentioned the most frequently and had a significant impact on addressing poverty include:

1. I-CARE, Inc.
2. Department of Social Services (DSS)
3. United Way
4. ECCCM (Eastern Catawba Cooperative Christian Ministry)
5. Mitchell Community College
6. Mooresville Christian Mission
7. Iredell Statesville Schools

These organizations have been successful due to their focus on education, skills development, economic opportunities, community partnerships, and the dedication of their leaders and staff.

Employment and Training Services

According to the study's key informants, the county's employment and training services status varies. The unemployment rate has generally decreased, and job opportunities have increased, but challenges remain, such as the need for more skilled workers, transportation, and affordable housing. In addition, several agencies and educational institutions offer training services, but these services might not be fully utilized or accessible to everyone. Categories and Prioritization:

1. Employment

- Low unemployment rate (2.9-3%)
- Job opportunities available
- Challenges: transportation, affordable housing, skilled workers, drug testing

2. Training Services

- Community colleges (e.g., Mitchell College, CVCC-Alexander) offering technical skills training
- Agencies: I-CARE, Goodwill, NC Works, ESC Job Link
- Online training options (e.g., through the library)
- Apprenticeships and vocational training programs
- Challenges: limited accessibility, lack of awareness, the stigma around trade careers

3. Areas for Improvement

- Enhancing virtual access to training services
- Better communication and promotion of training services
- Expanding training services to meet industry needs
- Breaking the stigma around trade careers
- Addressing transportation and affordable housing issues

Overall, while employment and training services are available in the county, there is room for improvement in accessibility, awareness, and addressing challenges like transportation and affordable housing.

Advice for I-CARE Leadership

The key informants offered various advice on community partnerships and involvement that could benefit I-CARE, Inc.'s leadership. Their suggestions can be categorized into the following priorities:

1. Strengthening Partnerships and Collaboration:
 - Build effective community partnerships and engage leaders
 - Avoid duplication of efforts by cooperating
 - Collaborate with other non-profits in the area
 - Join 211 and NC Care 360 to maximize resources
 - Increase networking and community visibility
2. Enhancing Education and Training:
 - Create a Self-Sufficiency Advisory Board for a strategic plan
 - Develop more student internship programs
 - Offer classes for a second language, business administration, and trade schools
 - Teach people to manage their own businesses and offer marketing workshops
 - Implement self-sufficiency classes in high schools
3. Addressing Community Needs and Gaps in Services:
 - Help with home renovations, windows, doors, and HVAC
 - Address the homeless population suffering from trauma, substance abuse, and mental illness
 - Increase Head Start slots and locations for pre-K education
 - Improve communication through more community meetings
4. Fostering Connections with Local Organizations and Institutions:
 - Partner with schools, local law enforcement, and Safe Kids in Catawba County
 - Work with local and county governments for job opportunities
 - Organize a meeting with all agencies to learn about resources in the county

Overall, the key informants emphasized the need for I-CARE, Inc. to strengthen partnerships, enhance education and training, address community needs and gaps in services, and foster connections with local organizations and institutions.

Focus Groups

To validate and support the secondary data findings, the study included focus groups that attempted to identify causes and conditions of poverty, rank the residents' needs based on their situations, and identify needs on which the agency could focus in the five-year plans. mano-Y-ola's team formulated open-ended questions to facilitate a dialogue with I-CARE clients, Head Start parents, and county leaders during four facilitated focus group sessions. The focus group questions introduced a variety of poverty themes to participants. Each interaction with a focus group allowed participants to provide as much or as little feedback as desired. The open dialogue allowed participants to provide personal insights and experiences that reflect essential realities.

The following is a list of general guiding questions and themes used during the three focus group sessions:

1. What are some of the main reasons for poverty in the community that you live in?
2. What priority or priorities will affect families' economic self-sufficiency in your county in the next four years?
3. How do people earn money?
4. What are the leaders and service providers in the county doing to address poverty?

This section includes a comprehensive summary of the responses from those who participated in the four focus group sessions. mano-y-ola's team facilitated the focus group sessions, took written notes, video-recorded sessions, and transcribed participants' comments. Statements from participants are aggregated to help maintain confidentiality. In addition, ideas offered repeatedly in response to different questions were captured to identify themes. The quotes are precise if participants' quotations were included to describe each theme and category. Focus group interviews were conducted on the following dates:

- February 16, 2023: I-CARE Parents' Focus Group
- February 23, 2023: I-CARE Community Leaders Focus Group
- February 27, 2023: I-CARE Clients #1 Focus Group (Iredell, NC)
- March 1, 2023: I-CARE Clients #2 Focus Group

The following is a research analysis of the four Focus Groups Interviews conducted with parents, clients, and leadership from I-CARE Inc. counties.

Main Reasons for Poverty in the Community

Based on the responses from the focus group participants, the main reasons for poverty in their communities include:

1. Lack of resources: Participants mentioned a lack of stability, education, knowledge, and self-esteem as contributing factors to poverty.
2. Housing and essential needs: Young people in the community face challenges with housing and providing for their basic needs, which impacts their ability to focus on education or job training.
3. Inadequate transportation: Limited and inflexible transportation options create barriers to accessing job opportunities and other resources.
4. Crime and incarceration: Crime-infested areas and the challenges faced by people with a criminal record make it difficult for them to secure stable employment.
5. Limited access to education and job training: Many young people drop out of school because their basic needs need to be met at home. They may need to be aware of resources or programs that could help them gain skills and access job opportunities.
6. High cost of childcare: The high cost of childcare creates barriers for parents to return to work, limiting their ability to provide for their families.
7. Lack of access to capital: Participants mentioned difficulties in accessing capital to start businesses, further limiting economic opportunities.
8. Unemployment and underemployment: Job loss, being overqualified or underqualified for available jobs, and living paycheck to paycheck all contribute to poverty.
9. Low community morale and lack of unity: A general sense of disconnection and low morale within the community hinders collective efforts to address poverty.
10. High cost of living: Rising living expenses make it difficult for individuals and families to save money and break the cycle of poverty.
11. Limited access to specialized resources: Participants mentioned the need for more tailored resources to meet the unique needs of individuals and families.
12. Stagnant wages: Despite increasing living costs, participants reported that their salaries have not kept up, making it challenging to escape poverty.

Addressing these issues through targeted interventions, increased awareness of available resources, and fostering a sense of community to work together is essential to alleviate poverty.

Top Priority and Challenges

Based on the responses provided by the clients, learners, and parents from the I-CARE Inc. agency, the following are the top priorities and challenges faced by families in their pursuit of economic self-sufficiency:

1. Multiple jobs and work-life balance: Many individuals work two or three jobs to support their families, making it challenging to balance work, family life, and personal development.
2. Access to affordable extracurricular activities: High costs associated with activities like Boy Scouts can be prohibitive for impoverished families.
3. Impact of the pandemic: The pandemic has exacerbated poverty, leaving many families in survival mode with limited access to resources.
4. Lack of awareness and access to resources: Many people need to be made aware of the available resources or how to access them, making it difficult to plan and make informed decisions.
5. Transportation challenges: Families often share a single car, making it difficult to coordinate work schedules. Inadequate public transportation options and limited routes further exacerbate this issue. Lack of mass transportation, even within city limits, hinders access to job interviews, doctor appointments, and grocery stores.
6. Barriers to employment: Individuals with a criminal background have limited job opportunities, making it difficult to achieve self-sufficiency.
7. Need for better communication: Many people need to be made aware of the resources available to them, and there is a need for more information about programs and assistance opportunities.
8. Inadequate infrastructure: Many areas need sidewalks or bike lanes, making it difficult for people to walk safely.
9. Limited availability and affordability of ride-sharing services: Uber and Lyft are limited in the region and can be too expensive to be viable alternatives for many families.

Addressing these challenges can help families achieve economic self-sufficiency and improve their overall quality of life.

Earnings

Based on the participants' answers, people in the community earn money through various means. Here is a summary analysis of the responses:

1. Traditional employment: Many people work in factories and various industries, although challenges like transportation and distance to work persist. Some also transition to gig economy jobs like Uber Eats or DoorDash, or work as Amazon contract drivers.
2. Self-employment and entrepreneurship: People have turned to sell crafts, second-hand items, homemade food, and baked goods to generate income. Others have started businesses and leveraged social media platforms like Twitter and YouTube for promotion.
3. Remote work: Due to the pandemic, some people have opted for work-from-home jobs to ensure a more stable income and maintain personal safety.
4. Informal work and side hustles: Community members are involved in various everyday jobs, such as selling clothes, baked goods, homemade products, and offering services like childcare.
5. Skills and education: Obtaining a GED, high school diploma, or college degree is crucial for employment opportunities. However, building a portfolio of work experience and soft skills is also essential.
6. Challenges faced by the community: Many people face obstacles in achieving economic self-sufficiency, such as transportation issues, lack of childcare, and limited access to resources. The pandemic has also affected mental health and employment prospects for many individuals.
7. Demographics and geography: The community has various income levels and backgrounds. Some people live in rural areas, while others reside in more urban settings, leading to different economic opportunities and challenges.

Efforts and Effectiveness of Leaders and Service Providers

Based on the provided responses, participants have mixed opinions on the efforts and effectiveness of leaders and service providers in their communities to address poverty.

Positive feedback includes appreciation for the I-CARE organization, which has assisted many with job-related needs, education, and essential resources. For example, participants mentioned I-CARE's help with job searching, resume building, and providing uniforms for work, as well as facilitating continuing education through programs like Mitchell Community College.

However, there are also concerns about inadequate support from other service providers, such as Social Services, which is often backed up and slow to assist. Participants feel that more information about available resources and programs is needed, as many people need to be aware of the help they can access.

There is a general sentiment that more needs to be done to support the younger generation, with suggestions for creating more youth-oriented spaces and activities. Participants also mention the need for better access to childcare and affordable after-school care.

Gentrification is seen as another issue affecting the community, with wealthier individuals moving in and driving up the cost of living for the existing population. The participants recognize that community involvement is essential but feel that limited time, money, and energy make it difficult to contribute to community initiatives.

In summary, while some community organizations like I-CARE are making a positive impact, participants feel that more needs to be done to address poverty comprehensively. They call for better access to information about available resources, improvements in social services, support for the younger generation, and increased community involvement.

CONSULTANT OBSERVATIONS AND CONCLUSIONS

Alexander, Catawba, and Iredell Counties in the Foothills region of North Carolina share similarities but differ economically. Although all three counties report a lower unemployment rate than the state rate, as reported in the Economic Features and Trends section of this study, only Iredell County has a higher Business Growth rate when compared to the state. Catawba County emphasizes education and economic development, and together with Alexander County is ranked in the 2nd of three tiers withing the North Carolina Tier Designation of most and least distressed counties. Iredell County, ranking in the least distressed group, boasts significant economic growth and the highest Healthiest Communities Overall score among the three counties, driven by the presence of large companies and investments. In short, Iredell County demonstrates the most economic growth and opportunity in the I-CARE Inc. service area.

Economic Features and Trends Summary				
	Unemployment Rate (Jan 2023)	Business Growth Rate	Healthiest Communities Overall Score (U.S. News and World Report)	North Carolina Tier Designation (Tier 1 = most distressed, Tier 3 = least distressed)
North Carolina	3.7	8.9	40 (state median)	N/A
Alexander County	3.2	5.6	46	Tier 2
Catawba County	3.4	7.1	49	Tier 2
Iredell County	3.5	9.3	57	Tier 3

The analysis of the Community Assessment secondary data reveals several key trends and needs affecting the counties in the I-CARE Inc. service area, which includes Alexander, Catawba, and Iredell Counties:

1. Family Structure: A significant proportion of grandchildren living with a grandparent householder do not have a parent present, indicating a potential need for support services for such families.
2. Education: The percentages of the adult population with a bachelor's degree in these counties are lower than the state and national rates, suggesting a need to improve educational opportunities and outcomes in the region.
3. Poverty and Racial Disparities: Poverty rates are higher among Black and Hispanic/Latino populations in these counties compared to the overall population. The discrepancy between children in poverty by race and their representation in the population further highlights these disparities.
4. Female-headed Households: A considerable percentage of single female-parent households with children under age five live in poverty in these counties, indicating the need for targeted support services for this vulnerable group.
5. Housing Affordability: The high cost of homeownership and rental units make it difficult for low-income families to access affordable housing, with a significant proportion of renter-occupied households earning less than \$10,000 per year considered severely cost-burdened. This issue is especially severe in Alexander County.
6. Basic Needs and Employment: Results from a survey of early childhood program recipients reveal unmet needs related to vehicle repairs, dental and medical care, gas, medicine, rent, and employment. These unmet needs suggest potential gaps in the availability or accessibility of support services and employment opportunities in the region.

The secondary data indicates that the I-CARE Inc. service area faces significant educational challenges, poverty, racial disparities, housing affordability, and basic needs. Addressing these needs and trends may require targeted interventions and support services to improve the well-being of vulnerable populations in Alexander, Catawba, and Iredell Counties.

Based on primary and qualitative data analysis, the I-CARE Inc. community faces numerous challenges and conditions contributing to poverty. The leading causes of poverty identified by the community assessment and participants include a lack of resources, housing instability, crime and incarceration, limited access to education and job training, high childcare costs, inadequate access to capital, unemployment and underemployment, poor transportation options, low community morale, high cost of living, limited access to specialized resources, and stagnant wages.

Additionally, families face specific challenges in their pursuit of economic self-sufficiency, such as balancing multiple jobs, accessing affordable extracurricular activities, the impact of the pandemic, lack of awareness of and access to resources, transportation challenges, barriers to employment, poor communication, inadequate infrastructure, and limited availability and affordability of ride-sharing services.

The community earns money through various means, including traditional employment, self-employment, remote work, informal work, and side hustles. Education and skills acquisition are essential, but demographic and geographical factors also play a role in the opportunities available.

While I-CARE Inc. has positively impacted the community, more must be done to address poverty comprehensively. Participants call for increased access to information about resources, improvements in social services, better support for the younger generation, and more community involvement. By addressing these challenges, the community can work together to alleviate poverty and help families achieve economic self-sufficiency, ultimately improving their overall quality of life. The I-CARE Inc. leadership and board can utilize the data findings and conclusions to identify the 5-year Strategic Plan priorities, incorporating short, medium, and long-term outcome expectations to effectively address the pressing needs and challenges faced by the communities they serve.

The following is a broad list of causes and conditions of poverty in the I-CARE Inc. Service Area:

List of Poverty Causes:

1. Lack of resources
2. Housing and essential needs
3. Crime and incarceration
4. Limited access to education and job training
5. High cost of childcare
6. Lack of access to capital
7. Unemployment and underemployment
8. Inadequate transportation
9. Low community morale and lack of unity
10. High cost of living
11. Limited access to specialized resources
12. Stagnant wages

List of Poverty Conditions:

1. Multiple jobs and work-life balance
2. Access to affordable extracurricular activities
3. Impact of the pandemic
4. Lack of awareness and access to resources
5. Transportation challenges
6. Barriers to employment
7. Need for better communication
8. Inadequate infrastructure
9. Limited availability and affordability of ride-sharing services

Finally, we offer a list of needs by level: community, family, and agency. These issues and needs impact the community, not just I-CARE clients, but also future and potential recipients. Families have identified these needs and concerns or expressed that they lack them in their own lives. The data findings also identified areas where the agency needs more resources or capacity to respond to the identified need.

The following is a list of critical needs and levels of needs, expressed and identified during our research:

Identified Need: Transportation Challenges

- A. Community Level: Our community has limited access to affordable and reliable public transportation.
- B. Family Level: Due to transportation challenges, individuals and families struggle to access work, school, and essential services.
- C. Agency Level: I-CARE Inc. needs more resources and partnerships to address and mitigate transportation barriers for our clients effectively.

Identified Need: Multiple Jobs and Work-Life Balance

- A. Community Level: Many community members are working multiple jobs, making it difficult to maintain a healthy work-life balance.
- B. Family Level: Individuals and families struggle to spend quality time together and manage personal responsibilities due to the demands of multiple jobs.
- C. Agency Level: I-CARE Inc. cannot provide adequate support and resources to help clients manage multiple jobs and maintain a healthy work-life balance.

Identified Need: Access to Affordable Extracurricular Activities

- A. Community Level: There is a need for more affordable extracurricular activities for children and youth in our community.
- B. Family Level: Due to financial constraints, families struggle to provide their children with enriching and engaging extracurricular activities.
- C. Agency Level: I-CARE Inc. cannot offer affordable extracurricular activities to all children and youth from low-income families.

Identified Need: Lack of Awareness and Access to Resources

- A. Community Level: There needs to be more information dissemination about available resources and support services in our community.
- B. Family Level: Families need to be made aware of or able to access the resources and support services they need to improve their quality of life.
- C. Agency Level: I-CARE Inc. faces challenges in effectively promoting and facilitating access to all available resources and support services for their clients.

Identified Need: Limited Availability and Affordability of Housing

- A. Community Level: There is a shortage of affordable and accessible housing options in our community.
- B. Family Level: Families struggle to find and maintain stable, affordable housing, which impacts their overall well-being.
- C. Agency Level: I-CARE lacks the resources and partnerships to address and alleviate residents' housing challenges in their counties.

Identified Need: Employment

- A. Community Level: There needs to be better-paying jobs in our rural communities.
- B. Family level: Individuals with limited access to transportation need better-paying jobs.
- C. Agency Level: I-CARE Inc. needs more resources to provide appropriate job training alternatives to help low-income individuals in rural areas secure available jobs.

APPENDICES

Appendix A: Parent Community Needs Survey

Appendix B: Key Informant Questions

Appendix C: Key Informant Responses

I-CARE, Inc. - 2023 Community Assessment

Appendices

(6) Besides Head Start/Early Head Start, list the top 2 service agencies that you or your neighbors use the most:

_____ / _____

(7) What are the 2 or 3 most important things that you believe will improve your household's quality of life?

_____ / _____

8. During the week, what hours do you/are you in? (Mark with an X):				9. Do you have access to and/or need the following services? (Mark with an X in each box if the answer is yes)	Access	Need
	Work	School	Job-Related Training			
5 - 6 am				Check cashing services		
6 - 7 am				Classes to get a better job		
7 - 8 am				Credit counseling and credit repair		
8 - 9 am				Driver's license		
9 - 10 am				English as a Second Language (ESL) services		
10 - 11 am				GED/Adult High School services		
11 - 12 pm				Job training at community colleges		
12 - 1 pm				Legal Aid		
1 - 2 pm				Places that teach about saving for retirement		
2 - 3 pm				Places that teach people how to make a budget and save money		
3 - 4 pm				Shelter		
4 - 5 pm				First time car buyer program		
5 - 6 pm				Law enforcement		
6 - 7 pm					Yes	No
7 - 8 pm				10. Do you have a bank/credit union account (checking or savings)?		
8 - 9 pm				11. Do you have a computer at home?		
Other:				12. Do you have an Internet connection at home?		
				13. Do you have a mobile phone with text capability?		

14. Would you recommend this program to other families with children ages 0-5? (Please circle)	Yes / No
--	----------

15. Do you currently know families with children ages 0-5 eligible for HS/EHS that you would recommend? <i>If yes, please let us know where those families live and where the program should recruit:</i>	Yes / No
--	----------

16. Ethnicity/Race: (Check all that apply)	
<input type="checkbox"/>	Asian/Pacific Islander
<input type="checkbox"/>	Black
<input type="checkbox"/>	Native American
<input type="checkbox"/>	White
<input type="checkbox"/>	Hispanic
<input type="checkbox"/>	Other

17. What is your current employment status? (Check all that apply)	
<input type="checkbox"/>	Employed full time
<input type="checkbox"/>	Unemployed/not working
<input type="checkbox"/>	Employed part time/seasonal
<input type="checkbox"/>	Disabled
<input type="checkbox"/>	Retired
<input type="checkbox"/>	Full-time homemaker
<input type="checkbox"/>	In job training/school
<input type="checkbox"/>	Other:

18. Are you a grandparent caring for your grandchild or grandchildren? (Please circle)	Yes / No
--	----------

19. If yes, as a grandparent, what are the greatest concerns you have in raising grandchildren?	
<input type="checkbox"/>	Finances
<input type="checkbox"/>	Legal issues
<input type="checkbox"/>	Your physical health
<input type="checkbox"/>	Emotional support for yourself
<input type="checkbox"/>	Grandchild's physical health
<input type="checkbox"/>	Grandchild's emotional health
<input type="checkbox"/>	Other:

20. County of Residency:

Thank you for completing this survey!

Appendix B: Key Informant Questions

Key informants from the following areas/subject matter expertise are needed: education, health and nutrition, mental health, child care, social services, transportation, communication, housing, and disability services.

Key Informant Interview Questionnaire

As a leader and expert in your county and state, we value your input and feedback to the following open-ended questions. Your answers are confidential and will be added to the answers of other key informants. Our objective is to study and use your input in order to design a more relevant plan that assist low-income families. This survey will take you between 20-30 minutes to complete. Thank you for taking time to share your knowledge with us!

1. What do you see as the top priority issues affecting early childhood development (0-4 years old children) during the next four years in your city and/or community?
2. What do you see as the top priority issues impacting education for adults during the next four years in your city and/or community?
3. What do you perceive to be the number one priority issue or concern for the city and/or community leaders during the next four years (i.e., environmental, economic, health, social, and others)? Please explain.
4. In your opinion, what are the top two to three strengths of your city and/or community?
5. What top priorities do you feel the community must address to recover from COVID-19?
6. What is the status (reputation) of early childhood education and services in your city and/or community? Please explain.
7. Please offer any additional advice regarding community partnership and involvement that could be beneficial to the Head Start Leadership in your city and/or community.
8. Please indicate your current position/title.
9. Please indicate your agency name.

Appendix C: Key Informant Responses

The following includes complete answers provided by key informants, in alphabetical order:

1. What do you see as the top priority issues affecting economic self-sufficiency during the next four years in your community?

- *Access and education*
- *Access to education, childcare options, supports for individuals that have been incarcerated, and support for small business owners.*
- *affordable housing*
- *Affordable housing availability. Transportation.*
- *Affordable housing, childcare and groceries.*
- *Affordable/attainable housing*
- *Broadband/Internet efforts, still setting up availability/efficiency in areas, other areas residents do not have internet connections.*
- *Cell Phones for seniors and homeless/Affordable Care Service for Cell phones*
- *Climate change and its influence in the increases in energy cost and decrease in food sources.*
- *Continued education of available resources and detailed case management*
- *Difficulties getting necessary support to be sustainable.*
- *Economic Strains*
- *Education is a must for our youth and getting skill trade training. Public transportation! Affordable housing!*
- *Educational opportunities are very limited at our local community college due to low enrollment.*
- *Employment*
- *Employment/Career Opportunities*
- *Enough high-quality early childhood services so that all children have access to the services they need and deserve.*
- *Farming, learning about how we grow up, farming, producing our own foods.*
- *Food costs and utility assistance*
- *Food disparities*
- *Health effects of various kinds of violence*
- *Higher paying jobs, affordable housing and more housing, childcare*
- *Homelessness*
- *Housing and mental health*
- *Housing for the homeless is a major concern. Need a homeless shelter that is involved in Coordinated Entry so that homeless people can get on the coordinated entry list for housing options, such as Rapid Rehousing, Emergency Housing Vouchers and Permanent Supportive Housing.*
- *Housing stability and resources to train client in financial stability.*
- *I see rental rates & fluctuating interest rates as a top priority affecting economic self-sufficiency during the next four years.*
- *Improved safety*

- *Increasing inequality, with many not being included in the growth process. A skills mismatch between skills a person has and the career they want to have. Lack of jobs paying a wage that leads to self-sufficiency.*
- *Inflation/rising prices of consumer goods.*
- *Lack of transportation for jobs in the more rural area effect self-sufficiency*
- *Long-term self-sufficiency might be unstable.*
- *Over the next four years I think the top issues affecting economic self-sufficiency in our community will be 1) access to jobs paying living wages, 2) affordable housing, 3) affordable quality childcare and 4) affordable transportation options.*
- *Probably the top priority would be four key economic concepts—scarcity, supply and demand, costs and benefits, and incentives.*
- *Providing some type of price stabilization of goods and services. Inflation is real and continues to rise. Several citizens have to make sacrifices and tough decisions regarding their purchases. I'm not sure if I have any answers.... maybe provide education on grants, credits and programs that can help and partner with struggling citizens. Very tough issue that faces the community.*
- *Qualified educators in the early childhood field as well as the school system. Limited child care due to low compensations and benefits, centers that aren't equipped with quality teachers having to close down classrooms, which leads to not being able to serve children which then may lead to centers/child care facilities having to close down. The lack of child care means that children are being put in illegal child care settings which leads to more abuse and neglect.*
- *Racism in many areas.... that impact the social determinants of health.*
- *Resources and how to get those resources within the community.*
- *Substance abuse, job skills, homeless and absent parents in the family.*
- *Teaching financial Literacy, financial awareness, and economic stability in the school systems*
- *The ability to find and secure housing that is safe and affordable.*
- *the inequity of inflation vs. income*
- *The issue of adequate safe and affordable housing, as well as quality childcare for single working mothers, remains a top priority. Many single mothers cannot afford to work, because they lose Medicaid and food benefits, and yet, their salaries are rarely adequate to cover the cost of safe housing, and health insurance, and to also put food on the table for their households.*
- *There are a lack of resources with funding located directly in our community and county itself.*
- *Transportation*
- *Transportation and child care*
- *transportation, affordable childcare, employment opportunities that provide a living wage.*
- *Transportation, Affordable Housing, Living Wages, and Child Care availability.*
- *Unaffordable housing and low wages. individuals in our community being well below the Federal poverty level.*
- *Unstable housing, employment/employability, hunger, education, transportation.*
- *Wages*
- *Well-paying jobs*

2. What do you see as the top priority issues impacting education for adults during the next four years in your city and/or county?

- *Ability for potential students (with a criminal background) to gain acceptance into a program.*
- *Access to classes that will help them immediately and pay a living wage.*
- *Access to resources that will empower the hopeless.*
- *Accessing educational opportunities for adults who have been incarcerated and/or have or have had drug and alcohol dependencies as well as adults who have been homeless, seems almost impossible. They do not always have access to online formats consistently (limited internet services), and/or they do not have adequate financing to pay for classes, and/or most of these adults do not have the ability to access online formats due to their limited working knowledge of 21st-century learning skills involving computers and online formats.*
- *Accessing resources that help with health benefits, healthy food, and safe living.*
- *Alignment of curriculum at the community college level with the needs of local employers. Accessibility of higher level ed courses as well. They have to be accessible outside of the working hours window.*
- *Availability and accessibility. As mentioned above, inflation forces individuals to choose between goods/services or take on debt.*
- *Awareness*
- *Balancing work and school and the draw to work now that wages are high.*
- *Budgeting and financial management*
- *Charter schools and voucher programs.*
- *Childcare*
- *Childcare*
- *CNA*
- *Common Core.*
- *Communication of availability and awareness of training, ongoing effective literacy program set up.*
- *Course/Program Availability*
- *Crime and safety*
- *Customer service*
- *Digital literacy, basic transferable skills allowing a person to be able to use different devices, software applications, etc.*
- *Disciplinary policies.*
- *Educational opportunities are very limited at our local community college due to low enrollment. Adults cannot go back to school because they cannot afford it, they cannot find child care to support their children while they go to class and limited online educational opportunities.*
- *Employer partnerships for job placement and training*
- *Enough high-quality child-care options so that parents can go to school/work.*
- *Failure to offer more online classes and classes that are conducive to the working population.*
- *Financial assistance for adults pursuing GEDs, high school diplomas and community college training.*

- *Financial support, academic and career success and wraparound supports that include not only making student services available online, and flexible course delivery, but also coaching and family wellness.*
- *Funding*
- *Funding at the student level.*
- *Government funding for education.*
- *I feel like a major issue is the lack of vocational training at a community college or lower level. We have solid choices for a 4-year undergraduate and graduate degree with many options. We lack said vocational training and apprenticeships.*
- *I see financial literacy as a top priority issue in my city.*
- *Inability of senior citizens to keep up with technology, such as pay apps, and pay by phone.*
- *inflation, the inability to attend school full-time because of financial responsibilities.*
- *Lack of affordable public transportation*
- *Lack of knowledge or apathy pertaining to attaining a GED or furthering one's education, apathy or lack of transportation to seek education. Needs to be more accessible facilities within the community to at least pursue a GED and scholarships to pay for individuals who can't afford to pursue the GED.*
- *Limited access to public internet and computers. The local library is overwhelmed already and there just is not enough locations that would allow for individuals to pursue online education opportunities.*
- *Local programs like dental assistant, dental hygiene, digital marketing, project management or other that will enhance a resume for individuals to secure a position.*
- *Low-income families finding it hard or almost impossible to obtain higher education. Children that come from low-income homes getting the resources (tutoring, support from family members) to consider going on to higher education beyond high school.*
- *Mental health support including substance use.*
- *More diversified programs in high schools encouraging students to get a good look at job fields, even hands on job shadowing. Not all students are college bound but let them explore what's available.*
- *One is taking that first step and learning what education can get. Finding out what you are interested in. Then finding the time for school and childcare.*
- *Over the next four years, I think the top priority issues impacting adult education will be very similar to the issues impacting overall economic self-sufficiency: 1) access to affordable training for jobs paying livable wages, 2) affordable transportation options in the community and 3) affordable access to quality childcare to enable adults to attend classes. Utilizing online options more and better may provide some help.*
- *Partnerships to provide paid apprenticeships and stipends to assist with childcare.*
- *Regular traditional literacy in English and financial literacy.*
- *Scheduling*
- *School safety.*
- *Standardized testing.*
- *Teacher salaries.*
- *Technology in education.*
- *The cost. Education will be a higher demand for it.*

- *The costs of education and scheduling time for additional education. Costs of Education has skyrocketed like all goods and services. Community College and local educational programs could be the key to help our communities. Online learning is a solution to assist with some of the scheduling conflicts with adults (i.e. family time and having to work multiple jobs). The challenges can be overcome however they are not easy.*
- *The county resources and programs:*
- *The high cost of education*
- *The opportunity to explore apprenticeships and job training programs have limited opportunities for young people.*
- *The top priority issues impacting education would be the following:*
- *Truck driving*
- *With the internet being sporadic/Local News (Charter and Spectrum) for the Alexander County people use to be able to stream and see local information in county, people are not aware of latest service and event.*

3. What do you perceive to be the number one priority issue or concern for the city and/or county leaders during the next four years? (i.e., environmental, economic, health, social, and others) Please explain.

- *A growing number of more people. this area has become a safe place for people to raise their families and also retire, so the area is growing more and more each day. I do see more togetherness instead of being against each other. Helping one another.*
- *Affordable housing. We are the MSA with the oldest housing stock plus the recent housing buying spree has pushed more landlords to sell and made rents higher.*
- *Aging infrastructure, housing*
- *All of the above, health concerns and economic/availability/doctors are moving out of Alexander County, no hospital, and no housing for homeless, increase in homeless currently and couch surfing, this will increaser unless address.*
- *Balancing growth, cost of living, and environmental impacts and needs.*
- *Creating affordable housing opportunities in our communities, Fighting for higher wages our constituents, Helping individual get great health care.*
- *Creating more equity related to employment opportunities, where those with some level of criminal background can be employable.*
- *Creating policies related to diversity, equity, and Inclusion.*
- *Economic - to grow the tax base.*
- *Economic and health.*
- *Economic development and taxation, finance, and budget are probably most tied for the most highly prioritized issue for local government officials in executive/legislative.*
- *Economic issues are, the cost of living is increasing, but wages are not comparable for the future. We are still paying people the same wages we paid for certain positions 20 years ago.*
- *Economic opportunities*

- *Economic opportunities/housing/outpatient treatment for ex-cons and recovering addicts and those experiencing homeless.*
- *Economic, as per capita income in Statesville in 2021 was \$26,988. At this rate many cannot afford current housing costs. Also, 15.5% of individuals under age 65 do not have health insurance.*
- *Employment equity and small business initiatives promoting diversity and inclusivity.*
- *Filling job vacancies*
- *Filling jobs with skilled laborers.*
- *Growth has exploded in the county over the last couple of years. Infrastructure has not kept pace with this growth. Roadways, transportation, and schools are a major issue. Availability of health care such as public hospitals and affordable care.*
- *Health and social issues. Many elected officials as well as many governments employees still refuse to acknowledge the illicit drug use and the homeless in our community.*
- *Homelessness and affordable housing, poverty*
- *Housing*
- *Housing and mental health*
- *Housing. This issue is at the cusp of crisis and is trending worse.*
- *It is hard to pinpoint one priority issue for the next four years. Certainly economic sustainability for citizens and their families is a main priority. There are additional issues of addressing environmental contamination such as coal ash and other pollution in areas of the county. It is also important for the community to try to make progress towards being a community that focuses on equitable economic growth for the long-term well-being of the community.*
- *Low-cost housing*
- *Make mental health accessible and affordable.*
- *Need for increase mental health resources in the community, schools and medical facilities.*
- *Safe affordable housing and child care for single-parent families*
- *Schooling opportunities for students, teens, and adults, who wish to learn a trade and not attend a 4-year liberal arts education.*
- *Social impacts from the Covid pandemic and the opioid epidemic. There are so many people struggling with mental health issues and substance use. There are also too many children in foster care or being raised by their aging grandparents.*
- *Social*
- *Staying in office*
- *Suitable, affordable, decent housing*
- *Supporting our early educator workforce - encouraging more to enter the field of early childhood education, and providing a living wage and benefits for those who do that important work.*
- *The economy and how it affects one livelihood!*
- *The economy needs to grow, more industry is needed in Alexander County but then more housing is crucial as well. It's a great place to live, great schools and sports. More county water and sewer available to more places.*

- *To create an environment where citizens want to work and live. We need to help all citizens and have a mindset that our communities can thrive. We have so many challenges and right now I feel the economic challenge is a struggle for so many people.*
- *Transportation issues.*
- *Transportation to jobs. We need more schools being built meaning more bonds or possibly raising taxes. Insurance for the poor! Affordable Housing and getting homeless housed and working.*
- *Transportation-better ways for persons to commute from the more rural areas.*
- *Transportation, infrastructure, and housing. Transportation is necessary to connect people, places, and possibilities. Safe, decent, and affordable housing is crucial to the welfare of families, communities, and businesses.*
- *Wages and compensation for the early childhood educators. The workforce needs to get behind our early childhood workforce and support them by investing in our teachers. Equitable healthcare - costs are too high and the quality of care has worsened. Behavioral issues with children beginning at the age of 3 due have also worsened and educators do not have the skillset to deal with these issues. Educators need support and tools. There also needs to be support systems in place to ensure that these children are getting the love and support they need in their home environments as well. Very limited behavioral/mental health services for children.*

4. In your opinion, what are the top two to three strengths of your city and/or community?

- *A good, reputable community college*
- *Agencies who collaborate and support one another even though there are a lack of resources for the families and children we work with. There are resources for backpack food ministries within our school district.*
- *Agencies with strong missions*
- *Awareness of available programs. We have had great success in sharing available programs with parents, for example. (Our issue is having waiting lists for needed services.)*
- *Collaboration is exceptional - business community, school systems, nonprofit sector, faith community, etc.*
- *Collaboration, willingness to help, leadership.*
- *Community organizations willing to help those in need.*
- *Community partners who work well together*
- *CVCC-Alexander Complex*
- *Dedication and loyalty of life long residents*
- *Early College*
- *Economic growth*
- *Education, Inclusion*
- *Employment opportunities*
- *Ethnic diversity*
- *Everyone has the "want to" help others.*

- *For the most part people making decisions live here and care about our community. Strong economic growth based on our location and availability of land/workforce. Networking and connection of local agencies and institutions.*
- *Good local government*
- *Good people*
- *Good resources*
- *Good school system*
- *Good schools, great communities, great employers offering family sustaining careers.*
- *Great location and quality jobs a growing economy*
- *I-CARE, Inc, Statesville Housing Authority, Mitchell Community College.*
- *It's a caring community.*
- *Location and proximity of I-40 and I-77 and the general aviation airport expansion*
- *Location at crossroad of two interstates and recent growth*
Location to Charlotte and Asheville, restaurants, and social activities (arts, entertainment venues), and job opportunities
- *Location- on top of two interstates and within 50 miles of a major metro area.*
- *Lots of consumer options with a small-town feel, pending growth, engaged community.*
- *Low tax rate*
- *Lower taxes than the 9 surrounding counties. Before Covid we were the 4th richest county. We have two major highways!*
- *Open Dialogue*
- *Our top strength is that our community works together to achieve goals that serve the community. Municipalities work well with the county to make things happen and county agencies like United Way, ECCCM, Salvation Army are well connected and also work well together.*
- *Outdoor walking trails and a variety of parks and recreation*
- *Partnership and collaboration.*
- *Partnerships between agencies.*
- *Passion- some leaders are better than others, however I feel we have passionate leaders that do care about our community whether we agree with them or not in other beliefs.*
- *Proximity to 2 major interstates to access other parts of the state.*
- *Safe, slower paced, and clean*
- *Schools, civic groups, churches, a sense of community.*
- *Small town with many low skill job opportunities (factory work)*
- *Some strengths are 53% of Statesvillians own their home and over 87% graduate from high school.*
- *Sound fiscal management.*
- *Strong community services/agencies*
- *Strong public safety, easy access to medical assistance and diversity.*
- *The ability to discuss what we see is available, but getting everyone to agree is a concern. We put funding into prisons but won't fund teacher assistants to help in the class for students that need interaction and hands on support.*

- *The people in this community are its greatest strength. Its location at the crossroads of 2 major highways is also a strength that has not been pursued for some reason.*
- *The resources that are provided for families in the community.*
- *Universal understanding of the importance of education (including early childhood) in our community. Folks "get it" and there is a lot of support.*
- *Very friendly community.*
- *We have food pantries; we are able to meet this need.*
- *Working more together. supporting each other, and talking about the issues, instead of fighting against each other.*

5. What top priorities do you feel the community must address to recover from COVID-19?

- *Address opportunities for young adults*
- *Affordable housing and income/poverty & financial resources*
- *All aspects of housing were impacted by Covid and that issue must be addressed.*
- *Career awareness amongst K-12 population and equipping them with the necessary employability skills.*
- *Child Care teacher shortage and available centers with open slots*
- *Continue to prevent transmission through testing, vaccinations, and the use of PPE.*
- *Continued education about the disease.*
- *Debts created from the moratorium by utility vendors and Landlord. People are still playing catchup from not understanding how the process works.*
- *Diversity*
- *Education and healthcare must be the top priority for covid relief. Working parents can't afford to go to the doctors for check-ups.*
- *Employment Opportunities*
- *Encourage hand washing and work places allowing sick leave so as not to spread sickness hats*
- *Equitable Housing*
- *Financial Literacy*
- *Financial stability, housing crisis, workforce development*
- *Food security and affordable housing*
- *Getting more children into high quality early childhood programs and providing transportation to opportunities.*
- *Health education, and misinformation*
- *Healthcare costs, child care shortages, children need appropriate services such as speech due to lack of socialization, behavioral/mental support for adults and children. There is also limited public housing available.*
- *Housing*
- *How to build small business back up. Supporting them and not forgetting about them. Being patient with one another.*
- *Improving early childhood educator pipeline.*
- *Increasing infant/toddler child care slots.*

- *Keep things open and running!*
- *Level of immunity within the community*
- *Look at boosting economic activity and assessing whether projects provoke employment benefits and stimulus and if they will sustain in the event of a re-imposition of local quarantine measures.*
- *Mental health and access to health care. We closed a major hospital.*
- *Mental Health resources*
- *Mental health resources to address depression and anxiety.*
- *Mental health support.*
- *More jobs, addressing the opportunity for ex-cons who have truly been re-habilitated the ability to seek and gain employment, eradicate absentee landlords from*
- *Potential mental health issues stemming from abuse during lockdown (primarily kids)*
- *Return to work issues.*
- *Statesville needs to continue to grow to keep students here.*
- *Teacher hiring! Training new workers on what the incoming industry needs. Homelessness and mental health. Reentry from prison. Not to say there is none we just need better communication. Meet people where they are.*
- *The devastating effect the disruption Covid 19 had in our student's academic experiences.*
- *The disparities in education as it relates to low-income households.*
- *The economic and mental health impacts of Covid are, in my opinion, lasting. I think the community needs to acknowledge the value of and support mental health initiatives. I also think it has been hard for many people to rebound to a post-Covid economy. While it appears there are job, wages need to be high enough to be able to provide a decent standard of living.*
- *To stop blaming everything on Covid-19.*
- *Transportation*
- *Underprivileged areas of the city, better low-cost healthcare, free COVID testing sites, safe and accessible places for young people to relax and study, more stable and frequent public transportation other than ICATS! Local chain grocery stores in low-income neighborhoods.*
- *Unemployment*
- *Wages*
- *We must move forward from COVID-19 and progress as a community. There are many lessons to be learned from 2020/2021 which I believe we can do to get better. The main concern I have is the year or so of education where kids are behind. Remote learning was a struggle for so many and many kids continue to catch up. The reality is that they haven't caught up. So many challenges in addition to COVID catch up within our educational field, however I feel our community must address education.*
- *We need to help children catch back up from all the time spent in online school or out of school completely. We need to make sure we keep people getting vaccinated, so we don't have more breakouts of Covid. We need to address mental health issues brought on by the Covid experience.*
- *Which the pandemic continues but to recover from the COVID governments and emergency services should be focusing on immediate needs: boosting capacity in hospitals, addressing hunger, and protecting firms and families from eviction and bankruptcy. The majority of the financial institutions, pay companies to provide goods and services to essential workers.*

- *Why aren't jobs getting filled and people not coming back to work?*

6. What agencies, organizations, and leaders in your county have had the most success in addressing the causes and conditions of poverty? Why?

- *Earned Tax Income*
- *Child Tax Income*
- *Social Security*
- *The Pastors and churches, The Police and Sheriff's Offices. Social Services. They can see more than others see. The Pastor and churches can pray and also assist in areas in the community, be Help build up in our faith, with is a call to all those who Love the Lord.*
- *United Way, ECCCM, Partnership for Children and both soup kitchens. Focusing on equity-based needs and understanding of poverty.*
- *The Western Piedmont Council of Governments, The Department of Social Services, Cooperative Christian Ministries, Yokefellow, Salvation Army, just to name a few.*
- *I-CARE, Inc - programming tailored to meet clients' needs*
- *Fostering a whole family approach*
- *Christian Mission*
- *County commissioners. They are attempting to bring new industry and jobs to the area.*
- *I know there are agencies and organizations in the community such as I-Care, Inc, the NCDHHS and the Mooresville Christian Mission that address the conditions of poverty. I am not sure about the success of organizations other than I-Care in addressing the causes of poverty. I believe that I-Care is successful in this regard because it focuses on education, skills and assisting with economic opportunities (jobs) that allow people to become more self-sufficient in sustainable ways.*
- *The Bridge Community bridging the gap between person and resources, in the community on the ground daily.*
- *Christian Crisis Center, daily at their location services include funding, resources, food for individuals, with a caring heart.*
- *Larry Yoder Alexander County Commissioner and Marty Pennell, Alexander County Commissioner have worked with The Bridge Community to provide funding and open communication to address concerns in Alexander County through the Board.*
- *That's hard to say. More is talked about than is actually done. There are many in poverty, for various reasons. It's hard to generalize, some are not educated, some have had hardships of sickness and disability, some are from broken homes or even homeless.*
- *Many are willing help like DSS, the Christian Crisis Center and churches, but real change comes from affordable training programs for adults who in need, and more jobs.*
- *Greater Hickory Cooperative Christian Ministries, The Soup Kitchen of Hickory, Centro Latino of Hickory*
- *Unfamiliar with all of the agencies.*
- *Department of labor is funding scholarships to help individuals grow financially. The education system has not decreased the bloated cost of an education for low-income people. This is the divide*

that keeps people from growing. It's possible to learn many things, but if you don't have a piece of paper that says you learned it from the university of the affluent, you are not going to be successful.

- *Safe Harbor, Exodus*
- *Safe Kids*
- *Health First Center at CVMC*
- *Council on Adolescents*
- *I-CARE and United Way*
- *Fifth Street Shelter, Churches, Red Cross*
- *I am not really sure. I know that social services does so much with addressing the conditions of poverty. I would guess that NC Works helps people get connected to training and employment opportunities. I think organizations like ECCCM, Goodwill Industries, Shelters that provide housing and training most help address the conditions of poverty. I think they have had the most success because their leaders or mission is directly related to helping those in poverty and the people have a passion for the work and have earned the DSS-funding.*
- *Iredell County Partnership - Referral/Resource Specialist, NC Pre-K, & diaper pantry*
- *I-CARE - early head start and head start classrooms, weatherization services and family services.*
- *Iredell Co Health Dept - WIC, SNAP, Dental clinic, and health clinic*
- *Statesville Housing*
- *Local foodbanks, DSS, cafe 957 and church groups*
- *I-CARE, Inc, the Statesville Housing Authority, Mitchell Community College, Statesville P.D, Iredell County*
- *Sheriff's department. These agencies have superior leadership at the helm with stellar staff. They understand and know the needs of the areas they serve and have systems in place to see that those needs are met within a timely manner.*
- *Catawba County United Way has helped bridge a lot of different nonprofit partners in looking at solutions and determining how to collectively meet identified needs around poverty.*
- *The school systems have been incredible supporters of early childhood services, connecting families in need to available pre-k programming.*
- *SHA primarily*
- *I-CARE*
- *Alexander County Commissioners, they are very focus on Alexander County.*
- *Feed NC, Iredell COAST have done a great job in meeting food needs. Iredell United Way continues to be an advocate for our county.*
- *I-CARE*
- *Mooresville Area Christian Mission*
- *Salvation Army*
- *Health Reach Clinic*
- *NC Works*
- *FEEDNC*
- *Mooresville Town leadership*
- *Christian Ministries, DUMC, United Way, Churches, Hesed House, DSS, NC Works*

- *I would say the school system since they create the capacity for individuals to be employed or to enter into and advanced education system.*
- *Department of Social Services definitely has information and services related to the causes and conditions; however, many of them are not preventive.*
- *I think embedding self-sufficiency in the school system throughout each year... maybe starting in early middle school may create the expectation that self-sufficiency is something that needs to be achieved.*
- *I look at several if not all agencies associated with the United Way and see wonderful efforts addressing conditions of poverty. I feel churches continue to help their communities and provide a place to assist their congregations in any way possible. Leaders of the county have done work to get COVID funds and other government programs flowing within the community whether that work is direct or through partnerships.*
- *I-CARE*
- *Iredell Statesville Schools*
- *Dept of Social Services provides support to families that need rental assistance and vehicle repair.*
- *Energy United help families with assistance to pay bills and repair vehicles.*
- *School system helped with education and food insecurities. Counseling*
- *United Way and partners*
- *I-CARE, Iredell Christian Ministries, Employment security Commission*
- *Mitchell college*
- *I think I-CARE does a great job of helping the community in this area. I also know that Goodwill has a great training facility in Statesville and Mitchell Community College does a wonderful job working with industries in the area to connect potential students with organizations.*
- *Economic development has expanded the number of available employment options paying a decent wage providing more competition for employees and raising wages. Mitchell, Goodwill, I-CARE have helped link some new folks to these opportunities, all services underutilized for the scale that they could operate at in our county.*
- *School systems should have the most success. We have students for 13 years. Legislative officials have to properly fund k-12 and pay teachers better.*
- *Besides I-CARE and Mooresville Christian Mission, I do not know of any other agencies and/or organizations that have had an impact when addressing the causes and conditions of poverty through job training and educational opportunities. I know that Fifth Street Ministries has provided some respite care and food for those in the community who are currently homeless.*

7. What is the status of employment and training services in your county?

- *59% of individuals between ages 25 and 64 are employed.*
- *Better training will lead to better jobs. We have to present our education options to a greater audience.*
- *Don't have statistics but would venture to say there is.*
- *Employment is comparatively and relatively high and training services are available for certain industries.*

- *Employment strong, training is not utilized by many in our community who could benefit.*
- *ESC job Link*
- *Fairly decent*
- *FEEDNC*
- *Few are available locally.*
- *FNS E&T Coordinator who partners with I-CARE and Community College who serve FNS unemployed and underemployed population.*
- *Goodwill*
- *I do not know the overall status generally.*
- *I do not know the statistics off the top of my head, but I do know our unemployment rate has dropped in the last year.*
- *I wish I knew more about this area. I know the community college has a workforce program and partnerships with the local business community. However I can't speak on this topic pass the community college program.*
- *I'm not sure if we have employment training in this county.*
- *I-CARE CSBG*
- *In the four counties we serve, we continue to strengthen our workforce partnerships with K-12, community colleges, local universities, vocational rehab., chambers, EDCs, and behavioral health to help where we can, in upgrading the skills of the workforce and better understand the needs of employers, students and jobseekers.*
- *Iredell County has many agencies that assist with employability training such as I-CARE and the Employment Security Commission*
- *Limited accessibility*
- *Limited career paths*
- *Little to none that I know of. I do know Goodwill has a job training program.*
- *Livable wages are higher than what entry-level positions mostly offer.*
- *Low unemployment rate, College had a RIF due to low enrollment.*
- *Many available jobs: challenges around transportation to jobs and not enough highly skilled employees to fill open positions.*
- *Many employment opportunities but lack of trained applicants. The lack of affordable housing exacerbates this issue.*
- *Mitchell College*
- *NC Works*
- *Not really sure about training services except for I-CARE. Would like to hear more of what they've accomplished in our County and would like to hear what vocational rehab has done for our folks. I usually see folks when they've been laid off of jobs or have short hours at work. I do see more folks working now though than a couple of years ago.*
- *There are a few training services available in the County. Making these services virtually available would likely enhance access.*
- *There are some, but not enough.*

- *There are very few employment training programs that I am aware of. There are some virtual and in person job fairs due to no permeant location/funding to facilitate on a regular basis. Would like to see communication with the public in general be more intentional when they are in Alexander County.*
- *There is a lot of hiring. There is a lot of people who can't pass drug testing. Mitchell Community college has job training to reflect the needs of incoming needs. CATS addresses many needs before kid's graduation.*
- *There is Goodwill, I-CARE, and several temp agencies.*
- *Training, apprenticeships, and training is gaining momentum, but it is still not meeting the needs of industry. We have to break the stigma that many young people have about careers in the trade industry.*
- *Training, job fairs, and other options available for those*
- *Truly seeking employment.*
- *Unemployment is below 3%, training is available via several agencies. We just need to make those commuting outside of Iredell for jobs are aware of the great jobs in their back yard (Iredell County).*
- *Unknown*
- *Very Good*
- *Very good*
- *We are currently at 2.9% unemployment - there are several Academies at the community college to teach technical skills including early childhood teacher, furniture, and manufacturing. NC Works provides scholarships for training. The Library offers free online training for plumbing, electrician, HVAC installation and repair and solar panel installation.*
- *We have CVCC-Alexander to provide training in welding, and industrial maintenances, and furniture. Employment is very low.*
- *Working full time. The colleges and continuing education in local areas.*

8. Please offer any additional advice regarding community partnership and involvement that could be beneficial to the I-CARE, Inc. leadership in your city and/or community.

- *Always provide to build effective community partnerships and connect with leaders as a partner and organizations to promote engagement. Define and prioritize goals. Build new partner relationships and strengthen long-standing ones.*
- *Appreciate what I-CARE does, but it does not cover my entire service area.*
- *At the Y, we would love to see what programs/support would benefit I-CARE and the Y*
- *Avoid duplication of efforts by cooperating*
- *Coming together, working together.*
- *Continue to seek economic grants that aid indigent households with utilities, rent, food, etc.*
- *Create a Self-Sufficiency Advisory Board made up of various agencies to create a strategic plan (across agencies) to address this with the youth, who will eventually be the working adults.*
- *Create more student internship programs, where students feel comfortable with working environments, so they gravitate towards being employed during or after graduation.*
- *Direct community engagement*

- *Help with home renovations windows doors and HVAC.*
- *I-CARE, Inc. has supported Alexander County in helping our friends and neighbors in need. We hope to see more funding available with I-CARE to continue the work needed here.*
- *I do not have additional advice at this time.*
- *I do not have any advice at this time.*
- *I would love for I-CARE to have more job training.*
- *I-CARE is truly a beacon of hope to the communities it serves. The ED and his staff are constantly training and seeking new funding options to serve current communities and better even more lives on a daily basis.*
- *Increased community involvement to ensure the mission of the organization is known and shared.*
- *Join 211 and NC Care 360 in order for our community to collaborate and maximize our resources in an effective manner.*
- *Keep up the good work that you are doing!*
- *Lots of room for additional leadership in housing initiatives. Solid area for I-CARE to grow towards if it is able to muster resources in this arena.*
- *Many non-profits in the area provide services that bring them into people's homes (Meals on Wheels, Healthcare, etc.). Finding a way to better connect the organizations when a need is present in a way that protects the individual could be impactful. Many aren't aware of all the services available and when healthcare is involved there is another level of complexity due to HIPAA laws.*
- *Maybe work with the school system (high school) to include self-sufficiency series of classes. Maybe make this a requirement before graduation.*
- *More visibility in the community.*
- *Networking*
- *Offer classes for a second language, like Spanish for service jobs for young adults, offer classes in business administration again for young adults, offer trade school, scholarships for young adults.*
- *Outreach to local law enforcement about substance abuse treatment.*
- *Safe Kids Catawba County offers resources to families and organizations free of charge.*
- *Teach people to manage their own businesses and program. Offer free marketing workshops, and advertising training. Teach people to seek their own successes.*
- *The county and city need more community meetings and communication.*
- *The homeless population suffering with unresolved trauma, substance abuse and mental illness remains as crippling problem that is not well understood by the community at large.*
- *There is an interagency council that meets to discuss shared efforts and better understand different perspectives on issues.*
- *We are incredibly disappointed with the decrease in Catawba County's Head Start slots, down from 166 (in 4 different locations) back in 2010, to only 72 slots projected (in only 1 location) in 2023. This is devastating to our community, especially children who deserve high quality pre-k experiences starting at the age of 3. Our NCPK program is full, with a waiting list, and can't serve 3-year-olds. We also have a big geographic gap in services, with only having Head Start in the city of Newton. All other communities will be unserved by Head Start. That is incredibly unfair to the children who live in the rest of the county.*

- *We are very proud to be partners with I-CARE. Sheldon Moore is great, very professional, and knowledgeable about his organization.*
- *We have a very blessed and wonderful staff at I-CARE. The work is truly mission and purposeful work, yet very critical to the community. The leadership at I-CARE is top-notch and we are blessed to have executives in our community.*
- *We need more collaboration across the board and sharing of resources across the board.*
- *Would like to see a meeting, bringing all of the agencies together to get to know agencies and resources in the County.*
- *Would like to see partnerships with local and county governments for job opportunities within the city/county offices. Have pathways to careers not just a job.*

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