

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY

2024 COMMUNITY ASSESSMENT

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Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY



SECTION 1

EXECUTIVE SUMMARY

2024 COMMUNITY ASSESSMENT

Purpose

This document is designed to provide a robust and current source of strategic insights into the challenges hindering economic stability and self-sufficiency among the low-income communities in DeKalb, Gwinnett, Newton, and Rockdale counties in Georgia. It is crafted following the principles of the Results Oriented Management and Accountability (ROMA) and the Mission Aligned Data Driven (MADD) Approach to Organizational Excellence.

The findings of this research are intended to serve as a foundational tool for guiding the organization's programs and initiatives. Its goal is to position the organization as a key player in coordinating community resources to effectively address the root causes and conditions of poverty, thereby enhancing the pathways to self-reliance and improving the overall quality of life for the residents.

Methodology

In order to provide the organization with the most comprehensive assessment possible, a variety of data types were collected and analyzed during the development of this product. Below is a summary of these data types, their sources, and the process used to translate the data into meaningful information.

- **Statistical Research**
  Statistical information was gathered through online research from more than five dozen unique data sources (see Section 8) demonstrating federal, state, and local data. All data used in the study was the most recent available at the time of project development. Organizational data from the most recently completed CSBG Annual Report was integrated into quantitative research to provide statistics concerning the needs of individuals and families requesting assistance.

- **Surveys**
  Surveys were collected from various stakeholder groups to gain a well-rounded understanding of the community's needs and resources. A total of 516 surveys were gathered from board members (3), agency staff (19), volunteers (7), community members (431), and local businesses/organizations/government entities (24). An additional 32 individuals participated in the survey but did not identify their classification.

  Respondent demographics were diverse. The majority identified as Black (84.89%), followed by White (8.44%), Other (5.33%), Asian (0.89%), and American Indian (0.44%). In terms of age range, the largest group portion identified as being 65+ years (37.03%), followed by those aged 25-44 years (22.17%), 45-54 years (17.96%), 60-64 years (13.97%), and 55-59 years (8.87%). The vast majority did not consider themselves to be Hispanic (97.76%), with a small percentage identifying as Hispanic (2.24%).

  Family type among respondents varied, with the largest group being Single Individuals (48.44%), followed by Single Female Parents (25.11%), Adults with Children (10.89%), Two Adults, No Children (6.22%), Other (6.22%), Multi-Generational families (2.44%), and Single Male Parents (0.67%). A strong majority (91.08%) stated that they did not have any young children. The largest portion (92.05%) reported that they were low-income, including 2 board members, 12 staff, 5 volunteers, 421 community members, and 35 business/organization/government representatives.

- **Community Resource Data**
  Information concerning community resources was collected through web searches and feedback from staff members. This information was used, along with survey feedback from low-income residents, to identify potential gaps in service provision.

- **Data Analysis and Prioritization**

  The analysis and prioritization of resident needs and barriers to economic security were conducted using a robust, multi-faceted approach. Data analysis utilized a variety of statistical tools and processes, including artificial intelligence, to gather and interpret information. By collecting five years' worth of data whenever possible, trends were identified to determine whether problems were improving or worsening over time. Local data was compared to state and national data to pinpoint areas where local situations were particularly problematic.

  This comprehensive approach combined quantitative and qualitative data from surveys, statistical research, and the agency's database of customers served, providing a deeper understanding of the underlying causes of each identified situation. Additionally, the availability of resources was assessed by comparing both listed services and those noted by low-income residents, helping to identify critical service gaps in the community.

  The number of impacted individuals was calculated by multiplying the relevant statistics against the region's average household size, providing a more accurate representation of the population affected by each issue. Survey responses were weighted to reflect the perspectives of different stakeholder groups, with higher weights assigned to low-income residents due to their heightened vulnerability. The highest weights were given to those who had experienced the situation but could not identify adequate assistance in their time of need, emphasizing the urgency of unmet needs.

  Raw scores were derived by combining the impacted population, weighted survey responses, and the total number of individuals who experienced each issue, both unserved and served. These scores were normalized to a 0-100 scale using min-max normalization, allowing for a standardized comparison across all concerns. This method transformed the raw data into a more interpretable format, highlighting the relative severity and urgency of each issue. Higher final scores indicated greater priority, reflecting the number of people impacted, the weighted importance of survey responses, and the critical nature of unmet needs. This multi-faceted analysis and prioritization process ensure that the most critical issues, based on statistical data and stakeholder input, are identified and addressed strategically.

Conclusion

Data indicates that 222,091 of the region's 1,926,125 local residents have incomes below the nationally recognized poverty level. This represents an estimated 12.07% of all individuals living in the area. Notably, this rate is lower than both the state (13.53%) and national (12.53%) averages. Over the past five years, the community has made significant strides in combating poverty, with a remarkable decrease of 21.01%, outpacing the declines observed at both the state (-15.63%) and national (-11.35%) levels. The median income in the region stands at $74,518 annually, marking an increase of 25.55% and surpassing the rate of inflation (+16.50%). While the one-year inflation increase reached as high as 7.48% during the evaluated period (2022), it has decreased to 3.09% in 2024.

Primary Conditions of Poverty

Although poverty may impact every household and community in a different way, survey data indicates that primary conditions of poverty have the highest priority:

(1) Individuals are housing insecure (F)
(2) Individuals have poor mental health (F)
(3) Individuals are at risk of utility disconnection (F)
(4) Individuals have poor physical health (F)
(5) Individuals are food insecure (F)

Primary Causes of Poverty

The cause of the poverty problem in the region cannot be attributed to any single factor, but a complex combination of barriers that are deeply rooted in the lives of local residents and the infrastructure of the community. The most prevalent barriers preventing access to basic household needs, as identified by survey respondents, include the following:

(1) Individuals lack financial management skills (F)
(2) Individuals lack skills and qualifications for meaningful employment (F)
(3) Housing units in the community have substandard conditions (C)
(4) The community has a lack of healthcare providers (C)
(5) Individuals have poor health (F)

Primary Conditions of Poverty Explained

Individuals are housing insecure (F)
Housing insecurity is a significant issue in the region, affecting a substantial portion of the population. According to the U.S. Department of Housing and Urban Development, 206,190 families are currently housing cost burdened, meaning they spend more than 30% of their household income on rent/mortgage and utilities combined. This accounts for 30.51% of the total population, which is more than three times the number of households living in poverty (9.35%). Renters are particularly affected, with 48.49% being cost burdened compared to 20.05% of homeowners. Among these cost-burdened households, 46.02% are severely burdened, spending more than half of their income on housing costs.

The median wages for various job positions highlight the difficulty many workers face in securing affordable housing. Registered nurses, earning a median wage of $82,888, and schoolteachers, with a median wage of $64,293, still fall short of the $92,320 income needed for a 4-bedroom rental but can afford 3-bedroom and smaller units. Middle-wage jobs, such as truck drivers earning $51,979, bookkeepers at $46,238, and general laborers at $35,318, struggle to afford anything larger than a 2-bedroom rental.

The high cost of housing relative to earnings underscores a severe affordability issue, particularly for larger families. Many workers are forced to spend a disproportionate amount of their income on housing, leading to overcrowded living situations, increased reliance on public assistance, and a perpetuation of the cycle of poverty. The inability to afford housing affects workers' economic stability and can lead to negative outcomes such as poor health, lower productivity, and limited opportunities for upward mobility.

Qualitative data from residents provides further insight into the challenges of housing insecurity. Many residents expressed the difficulty of affording rent and the constant threat of eviction. One resident shared, "Rent in communities has increased so drastically that I'm not able to find somewhere affordable." Another stated, "Affordable housing is a big problem. I see quite a bit of homelessness."

In conclusion, the data clearly illustrates the challenge of affording rental housing on the median wages of many common job positions. Addressing this issue requires a multi-faceted approach, including increasing wages, expanding affordable housing options, and providing rental assistance programs. Ensuring that workers can afford safe and adequate housing is essential for their well-being and for the overall economic health of the community.

Individuals have poor mental health (F)
An estimated 213,448 local residents in the region experience frequent mental distress, defined as more than 14 days of distress each month. This rate, at 15.85%, is higher than the state average of 15%. Frequent mental distress can significantly impact an individual's well-being, affecting their ability to function in daily life, maintain employment, and engage in healthy relationships.

The prevalence of serious mental illness and suicidal thoughts has demonstrated a troubling increase over the past several years. In 2010, the rates were 2.60% for serious mental illness and 2.10% for suicidal thoughts. By 2019, these numbers had risen to 4.20% and 3.80%, respectively. In 2022, the rates further increased to 5.80% for serious mental illness and 5.00% for suicidal thoughts. This growing mental health crisis underscores the urgent need for comprehensive mental health services and preventative measures.

One of the primary causes of poor mental health in the community is the lack of health insurance. Approximately 14.13% of the community's residents lack insurance, creating significant barriers to accessing mental health services. Individuals earning less than $25,000 a year exhibit the highest uninsured rate at 24.55%, highlighting the affordability barriers faced by low-income individuals. As income levels increase, the uninsured rate declines, with those earning over $100,000 having the lowest uninsured rate at 6.65%.

Economic factors also play a crucial role in health insurance coverage. Lower-income individuals face greater challenges in obtaining coverage, leading to increased risks of health complications due to delayed or missed healthcare services. Unemployed individuals are particularly vulnerable, with an uninsured rate of 42.10%, more than twice as high as the 16.23% uninsured rate for employed individuals.

Even with insurance, co-pays can prevent a barrier. One survey respondent highlighted this issue, stating, "You may have medical insurance, but the cost is so high that when you need it, your out-of-pocket expenses still leave you in the red, so many times you don't get medical help because of the cost."

The availability of mental health professionals is another critical factor impacting mental health in the region. Mental health services are vital for diagnosing, treating, and managing mental disorders. However, deficits in mental health services limit access to care, increase wait times for services, and can lead to worsening mental health conditions. The regional average ratio of mental health professionals is 610:1, significantly higher than the national standard of 320:1 and the state average of 560:1. DeKalb County has the most favorable ratio at 260:1, suggesting better access to mental health services. In contrast, Gwinnett County has a ratio of 680:1, indicating a need for more mental health professionals. Newton County faces the most severe shortage with a ratio of 980:1, and Rockdale County has a ratio of 520:1.

Qualitative data from survey respondents highlight the severe impact of these shortages. Many residents expressed difficulties in accessing mental health. One respondent noted, "Mental health services are inadequate for all of Gwinnett County. The need is still great for adults and children/teens in mental health." Another emphasized, "Mental health is very important, especially in this day and time. If you're not in your right mind, how can you make good choices? Even simple tasks can seem more difficult when you're not in the right mind."

Residents emphasized the importance of mental health, particularly in the current social and economic climate. They highlighted the need for more mental health facilities, especially those serving seniors, and expressed concerns about the broken mental health system and the inadequacy of services. The testimonies reflect a community in dire need of more accessible and sufficient mental health support systems to ensure that all residents can achieve and maintain mental wellness. Addressing these challenges requires a multi-faceted approach, including increasing access to mental health services, improving insurance coverage, and ensuring adequate support for vulnerable populations.

Individuals are at risk of utility disconnection (F)
There are 206,109 households in the region that are unstably housed. When compared to the average household size, this equates to potentially 579,394 residents impacted. Utility disconnection is a significant concern within these households, as it directly affects their stability and well-being. The risk of utility disconnection was identified as one of the top three concerns by 362 survey respondents. Among the 633 low-income individuals who reported struggling with utility disconnection over the past year, 200 were unable to secure any assistance during their time of need.

High utility costs contribute to housing insecurity, exacerbating the already precarious living conditions of many residents. In Georgia, utility costs are more than one-quarter of the median mortgage (26.88%) and nearly one-third (30.65%) of the median rent, making them a substantial financial burden.

Qualitative data reflected the struggles that many residents shared related to high utility costs. One respondent noted, "The cost of utilities is so high you can hardly pay them." Another shared, "If the utility assistance programs are terminated, what would happen to those who need it? This is such a vital program to the community that it would be a disaster to no longer have."

The narratives shared by residents paint a vivid picture of the daily struggles faced by those at risk of utility disconnection. The combination of high utility costs and unaffordable housing creates a cycle of instability that is difficult to break. To address this issue, there is a clear need for more funding and support for utility assistance programs. These measures are essential to help residents maintain stable housing and avoid the devastating impacts of utility disconnection.

Individuals have poor physical health (F)
In the region served by the organization, an estimated 17.75% of all local adults (237,264 individuals) are noted as having poor to fair health, which is slightly better than the statewide average of 18% but higher than the best communities in the country, which average at 14%. Among these residents, many struggle with severe conditions that significantly impact their quality of life on a regular basis. The most recent data indicates that 148,040 local adults, representing 11% of the population over the age of 18, suffer from more than 14 days of physical health distress each month. This rate is consistent with the state average and slightly higher than the nation's best communities (10%).

Factors contributing to poor physical health include obesity, which affects more than 36.25% of the region’s adults (475,752 individuals). This rate is higher than the state average of 34%. Obesity not only leads to a general feeling of poor health but also increases the risk of high blood pressure, heart disease, stroke, diabetes, high cholesterol, joint problems, trouble breathing (including sleep apnea), and gallstones. The prevalence of obesity is highest among adults aged 45-64, those with lower levels of educational attainment, and individuals with incomes of less than $25,000 per year.

High blood pressure, also known as hypertension, is a major risk factor for heart disease and stroke. According to the American Heart Association, nearly one-half (46.7%) of all adults in the United States and nearly 40% of Georgia residents have been diagnosed with hypertension. The death rate associated with high blood pressure has increased by 91.2% over the past decade. Data indicates that a person’s age, income, education, employment, and social status are directly linked to the risk of high blood pressure, with higher prevalence among men, adults aged 65 and older, Black individuals, and low-income populations.

Additionally, an estimated 12.25% of all adults (168,415 individuals) in the organization's service area have been diagnosed with diabetes, a condition that can put a person's life at risk and is often associated with obesity. Type 2 diabetes, the most common form, is more prevalent among individuals with low incomes.

The qualitative data from survey respondents provide further insight into the challenges related to physical health. Many residents highlighted difficulties in accessing healthcare due to high costs and inadequate insurance coverage. Comments such as "You may have medical insurance, but the cost is so high until when you need it, your out of pocket still has you in the red" and "A lot of people can't afford health care, so they end up sick" reflect the financial barriers faced by many. The high cost of medications and healthcare services often forces individuals to forego necessary treatment, exacerbating their physical health conditions.

In conclusion, poor physical health is a major concern in the region, influenced by factors such as obesity, hypertension, diabetes, and inadequate access to healthcare. Addressing these issues requires a comprehensive approach that considers the social, economic, and environmental determinants of health. Ensuring that all residents have access to affordable healthcare and support for chronic health conditions is essential for improving the overall health and well-being of the community.

Individuals are food insecure (F)
An estimated 151,300 residents were identified as being food insecure in the region, including 54,080 children, 79,598 working-aged adults, and 17,622 senior citizens. This is primarily a result of food costs, with the cost per meal per person averaging $3.79. To put this cost into perspective, a family of four spending this amount for each household member would need to budget an estimated $1,383 per month on food, or $16,600 per year. This represents nearly one-quarter (22.28%) of the median household income and 110.08% of the minimum wage salary, forcing economically disadvantaged households to seek outside subsidies to survive.

The primary subsidy utilized by 67,865 households, or 10.04% of the population, is the Supplemental Nutrition Assistance Program (SNAP). This program provides low-income residents with a monthly allocation of funds that can be used exclusively for the purchase of food. Although SNAP subsidies are extremely beneficial for low-income families, the average benefit is $1.40 per person per meal, which is less than half of the amount needed to sustain the nutritional needs of a person. For senior citizens, the average benefit is slightly lower at $1.16 per person per meal, with an estimated 20% receiving a benefit of $0.17 per person per meal. This leaves those with the greatest income barriers in need of additional subsidies.

Survey data indicated that 281 respondents identified the lack of food as one of the top three needs in the community. Among the 198 low-income residents who participated in the surveys and stated that they had personally experienced food insecurity, 93 reported that they could not find assistance in their time of need.

Qualitative data gathered from survey responses further illustrate the severity of food insecurity in the community. Residents expressed constant worry about how to make meals with limited groceries, relying on churches and food banks to make ends meet. The high cost of food was a common theme, with many noting that they had to budget meticulously, often sacrificing nutrition. Seniors, in particular, highlighted the insufficiency of their food stamp benefits, with some receiving as little as $23 per month, forcing them to make tough choices about their diet. Many respondents noted the lack of grocery stores in close proximity and the inadequacy of food pantries, which often distribute expired or low-quality food. The increase in food prices due to inflation has exacerbated the problem, leaving many unable to afford fresh fruits and vegetables.

Residents emphasized that food insecurity leads to broader social and health issues, as people struggle to maintain a balanced diet. There is a clear need for more accessible and sufficient food assistance programs, especially for seniors and those on fixed incomes. The testimonies reflect a community in dire need of more robust support systems to ensure that all residents have access to adequate nutrition.

Primary Causes of Poverty Explained

Individuals lack financial management skills (F)
Research identified a significant need for financial management skills among residents, with 586,708 local adults exhibiting limited numeracy skills. Numeracy skills are fundamental to managing finances effectively, making this a critical area of concern for economic stability and self-sufficiency in the region.

The connection between numeracy skills and financial management is clear. Individuals with limited numeracy skills often struggle to manage their finances effectively, leading to poor financial decisions and increased economic insecurity. This highlights the urgent need for accessible financial management education and support services in the community to help residents improve their financial literacy and, consequently, their economic stability.

Survey data highlighted financial management skills as a pressing issue, with 89 respondents identifying it as one of the three greatest barriers to economic security. Among the low-income residents who participated in the surveys, 104 stated they had personally been in need of assistance with financial management skills during the past year. Alarmingly, 69% of these respondents (72 individuals) were unable to locate services to assist them when they needed it.

Numeracy deficiencies were found to be more prevalent among residents with lower educational attainment. Specifically, 69% of those who have not completed high school and 53% of those who have completed high school without earning a degree struggle with numeracy skills. In contrast, the prevalence of numeracy deficiencies drops to 34% among those who have attended college and 11% among college graduates.

Age also plays a role in numeracy skills. More than half of seniors (55%) have limited numeracy skills, followed by 40% of residents aged 55-64, 38% of residents aged 45-54, 33% of residents aged 35-44, 31% of residents aged 25-34, and 41% of those aged 16-24.

Individuals lack skills and qualifications for meaningful employment (F)
The relationship between education levels and socio-economic outcomes is evident, with disparities in employment rates, median earnings, and poverty levels highlighting the challenges faced by those with lower educational qualifications.

Data from the region underscores the importance of higher education in securing better employment and higher wages. For instance, individuals with graduate degrees enjoy an unemployment rate of only 3.38% and a median income of $77,752, with a relatively low poverty rate of 4.78%. Conversely, those with only a high school diploma face an unemployment rate of 6.13%, earn significantly less at $34,994, and have a higher poverty rate of 12.15%. The situation is more dire for individuals without a high school diploma, who not only earn the least at $28,234 but also experience the highest poverty rate at 20.10%, despite an employment rate of 4.38%. This suggests that these individuals are often employed in low-wage jobs that do not provide economic stability.

The data indicates that 64,097 of the region's adults have never attended high school, and an additional 68,884 attended high school but did not graduate. This totals 132,981 residents without a high school diploma, representing a significant portion of the community likely to face severe obstacles in the job market.

Survey data further supports the critical need for education and skills development. Among respondents, 69 identified the lack of education and skills as a leading barrier to securing personal needs. Of the 58 individuals who struggled with this barrier in the past year, 46 stated that no resources were available to assist them.

Qualitative comments reinforce these findings, with residents expressing difficulties in finding good jobs due to a lack of education and the need for more job workshops and career training opportunities. For instance, one respondent mentioned, "I have had a hard time finding a good job because of a lack of education," while another noted, "People need to be trained to be qualified for different types of jobs." These insights highlight the community's need for targeted educational programs and vocational training to bridge the gap between job requirements and the current skill levels of residents.

The literacy rate in the region also poses significant challenges. With 24.75% of the population identified as literacy deficient, approximately 372,334 individuals lack essential literacy skills. This deficiency limits job opportunities and confines individuals to lower-paying roles, exacerbating the cycle of poverty. Moreover, limited English proficiency among nearly one in ten working-age adults further impacts their earnings potential, highlighting the need for comprehensive literacy and language programs to enhance economic mobility.

In summary, addressing educational and skill deficiencies is vital for improving employment opportunities and economic stability in the community. By focusing on increasing access to higher education, vocational training, and literacy programs, policymakers can equip the workforce with the necessary skills to secure higher-paying jobs, thereby reducing poverty and enhancing the overall economic health of the region.

Housing units in the community have sub-standard conditions (C)
The housing conditions in the region present significant challenges, with nearly half (47%) of the housing stock being more than 40 years old. This aging infrastructure often requires substantial renovations to meet modern safety and energy efficiency standards, including addressing health hazards such as lead and asbestos, which were common in older constructions. The presence of serious issues like termite damage, mold and mildew, outdated plumbing, and structural problems further exacerbates the quality concerns. Additionally, the data indicates that a significant proportion of housing units, 29.82%, are classified as substandard, with at least 160,339 households living in these conditions. Among these, 53,434 households experience severe conditions, such as inadequate plumbing and lack of cooking facilities, which directly impact the residents' health and quality of life.

The disparity between rental and owner-occupied units is stark, with 51.45% of rental units identified as substandard, compared to 21.35% of owner-occupied units. Renters are more than twice as likely to live in substandard housing, highlighting a critical need for targeted housing policies and interventions to improve rental housing conditions. Issues such as inadequate plumbing and lack of cooking facilities in rental units underline the need for stricter enforcement of housing standards and support for tenants' rights to ensure safe and adequate living conditions.

Qualitative data from survey respondents supports these findings, with numerous comments highlighting the struggles residents face due to poor housing conditions. Many reported significant repair needs, high utility costs, and the inability to afford necessary home improvements. The survey also revealed that 87.56% of low-income respondents who struggled with housing quality could not find help when needed. This underscores the urgent need for increased funding and resources to

assist residents in maintaining and upgrading their homes, ensuring a safe and healthy living environment for all community members.

The community has a lack of healthcare providers (C)
Access to medical providers is a fundamental component of a robust healthcare system. Primary care physicians, dentists, and mental health professionals are crucial in maintaining the health and well-being of the population. However, the region served by the organization faces significant challenges in this area.

In the region, the ratio of 2,040 individuals per primary care physician highlights the challenge of meeting healthcare demands, particularly when compared to the national average of 1,330:1. This disparity may result in longer wait times for appointments, reduced time per patient visit, and potentially overwhelmed healthcare providers, which can all impact the quality of care received. DeKalb County has the best physician ratio at 940:1, better than both the state and national averages. In contrast, Newton County faces the most significant challenge with a ratio of 4,270:1, indicating a severe shortage of physicians. To reach the target ratio of 1,330:1, the region needs 504 additional physicians, impacting approximately 670,320 residents who are currently underserved. Dental health is integral to overall health and well-being. Poor oral health can lead to a range of problems, including tooth decay, gum disease, and more severe conditions like heart disease and diabetes. The overall dentist-to-population ratio for the region stands at 2,340:1, which is higher than the state average of 1,860:1 and the best U.S. ratio of 1,360:1. Newton County faces significant challenges with a ratio of 4,900:1, showing a severe shortage of dental care providers, which underscores the urgent need for interventions to increase dental care accessibility. To achieve the target ratio of 1,360:1, the region needs 593 additional dentists, affecting 806,480 residents who currently lack sufficient dental care.

The availability of mental health professionals is also a crucial factor. The regional average ratio of 610:1 indicates a deficit when compared to the best U.S. practice of 320:1 and the state average of 560:1. Within the region, DeKalb County stands out with the most favorable ratio at 260:1, suggesting better access to mental health services in this county. In contrast, Newton County faces the most severe shortage with a ratio of 980:1, highlighting the need for more mental health professionals. To meet the target ratio of 320:1, the region requires an additional 2,861 mental health professionals, impacting 915,520 residents who are currently underserved.

Qualitative data from survey respondents supports these findings. Many residents expressed difficulties in accessing healthcare services due to a shortage of providers. Comments highlighted the high cost of medical care, long waiting times for appointments, and the lack of specialized medical care. Additionally, many people reported not being able to afford necessary treatments and medications due to high out-of-pocket costs.

The lack of healthcare providers impacts the overall health of the community. Individuals with chronic conditions, such as diabetes and hypertension, may not receive timely and adequate care, leading to worsening health outcomes. Furthermore, the shortage of mental health professionals can result in untreated mental health issues, which can have severe consequences for individuals and the community as a whole.

Addressing these disparities requires a comprehensive approach that includes increasing the number of healthcare providers, improving access to affordable care, and enhancing the quality of healthcare services. Ensuring that residents have access to primary care physicians, dentists, and mental health professionals is essential for improving the health and well-being of the community.

In summary, the data clearly illustrates the significant challenges faced by the region in accessing healthcare services. Addressing these challenges is crucial for improving the overall health and quality of life for residents. Targeted interventions and policies are needed to increase the number of healthcare providers and improve access to affordable and high-quality healthcare services.

Individuals have poor health (F)
In the region, an estimated 237,264 adults (17.75% of the population) are reported to have poor to fair health. Among these, 148,040 individuals suffer from more than 14 days of physical health distress each month, which is slightly higher than the national best communities' rate of 10%. Furthermore, 213,448 adults (15.85% of the local population) experience frequent mental distress, highlighting a significant mental health burden within the community.

Disabilities further complicate the health landscape. The data indicates that 189,642 individuals, or 9.91% of the local population, are classified as disabled. This rate is lower than the state and national averages but still represents a considerable portion of the community. Disabilities impact various age groups differently: 19,792 school-aged children, 99,397 adults, and 69,639 seniors live with disabilities. These groups face unique challenges that affect their economic stability and quality of life. For children, disabilities can strain household finances and limit future opportunities. Adults with disabilities often encounter barriers to employment, exacerbating financial instability. Seniors face increased healthcare costs and decreased quality of life due to their disabilities.
Qualitative feedback from survey respondents underscores the real-life impact of poor health on individuals' ability to meet basic needs and maintain employment. High medical costs, even for those with insurance, prevent many from seeking necessary care. One respondent mentioned being unable to afford co-pays for essential treatments, resulting in persistent pain and decreased daily functioning. Another highlighted the inadequacy of mental health services, which leaves many with untreated conditions that hinder their employment prospects and overall stability.

Survey data supports these findings, with 75 respondents identifying poor health as a major barrier. Among 393 low-income residents who struggled with health-related issues, 276 were unable to find assistance when needed, highlighting a gap in accessible support services.

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COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY



SECTION 2

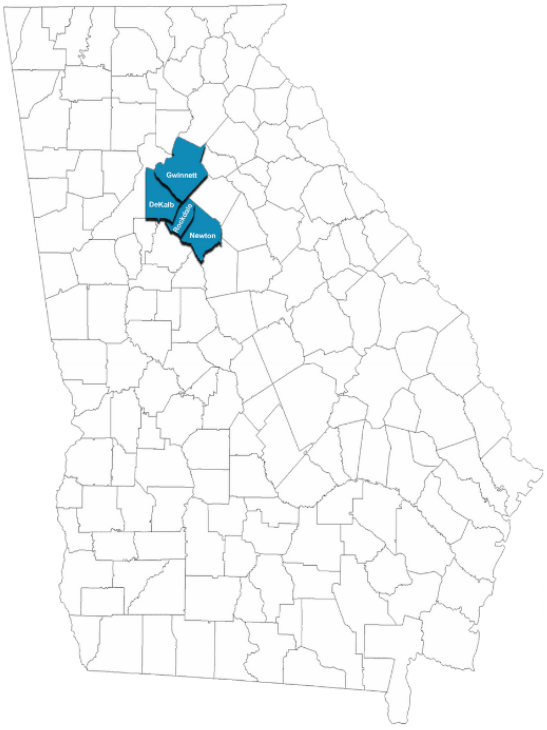
KEY FINDINGS

Key Point Summary

Prioritized Poverty Conditions

1. *Housing insecurity*
2. *Poor mental health*
3. *Risk of utility disconnection*
4. *Poor physical health*
5. *Food insecurity*

2024 Community Assessment



Prioritized Barriers

1. *Lack of financial mgmt skills*
2. *Lack of education/skills*
3. *Poor quality housing*
4. *Lack of medical providers*
5. *Poor health*

Demographics

- 2022 Population: 1,926,125 (+4.62%)
- 2022 Households: 161,492 (+6.66%)
- 2022 Births: 23,970
- 2022 Deaths: 13,223
- 2022 Inward Migration: 135,558
- 2022 Outward Migration: 131,564

Population Summary:
37 year-old, Black (40.55%) or White (36.40%), Non-Hispanic (84.89%), Females (51.69%)

Income & Poverty

- Low-Income individuals: 222,091 (-21.01%)
  - Deep Poverty: 96,512
  - 125% Poverty: 301,088
  - 200% Poverty: 550,350
- Poverty Rate: 12.07%
- Median Income: $74,518 (+25.55%)
- Inflation: +16.50%

- Cost of Living
  - 1 Adult/0 Child: $52,587
  - 1 Adult/2 Child: $103,090
  - 2 Adult/0 Child: $68,552
  - 2 Adult/2 Child: $90,428

Employment

- Labor Force: 1,022,405 (+5.11%)
- Unemployed: 53,911 (-5.97%)
- Unemployment Rate: 5.78%
- Jobs: 735,800
- Median Wage: $60,734
- Working Poor: 53,323

Highlights

- No Diploma: 132,981
- Literacy Deficient: 372,334
- Numeracy Deficient: 586,708
- Language Barriers: 206,633
- Average School Proficiency: 78 (C)
- Childcare Deficit: 58,116
- Safe Housing Deficit: 160,339
- Housing Cost Burdened HH: 206,190
- Median Rent: $16,752
- Median Mortgage: $20,136
- Median Utilities: $7,404
- Eviction Rate: 14.10%
- Homeless: 976 (+11.04%)
- Poor Health: 237,264
- Frequent Physical Distress: 148,040
- Frequent Mental Distress: 213,448
- Disabled: 189,642
- Life Expectancy: 77.03 Years
- Uninsured: 271,433 (-2.08%)
- Food Insecure: 151,300 (-46.56%)
- No Vehicle HH: 35,281 (-5.12%)



POVERTY PERSONAS



Emily Thompson

Shanae Williams, an African American single mother in DeKalb County, has two children aged 4 and 7. With a median household income of $24,941.64, Shanae works part-time as a cleaner, earning $12,000/year, supplemented by child support and government assistance. Her employment is limited due to inadequate affordable childcare options. Shanae, who has a high school diploma and vocational training in hospitality, lives in subsidized housing, relying on housing vouchers and struggling with utility bills. Despite being covered under Medicaid, accessing regular medical care is difficult due to transportation limitations. Shanae faces food insecurity, even with SNAP benefits, and relies on local food banks. Without a vehicle, she depends on public transportation, limiting her job opportunities and access to services. She has minimal family support, often feeling socially isolated while juggling work and parenting duties. She participates in community parenting classes and support groups to help manage these challenges.

The Johnson Family

The Johnson family, an African American household in Gwinnett County, consists of two parents and three children aged 5, 8, and 12. With a median household income of $49,766.62, the father works full-time in construction earning $34,000/year, while the mother works part-time in retail, earning $15,766.62/year. Despite both parents being employed, they face challenges due to long commute times, inadequate childcare, and limited skills. The family rents a single-family home, struggling with high rent and utility bills, often relying on SNAP benefits and food banks to meet their nutritional needs. Covered under Medicaid, they encounter health issues such as chronic back pain for the father and special education needs for the 8-year-old child. Owning one vehicle used by the father for work, the mother relies on unreliable public transportation, affecting her ability to work longer hours or attend job training programs. Social isolation and the stress of balancing work, childcare, and education are significant stressors, with parents attending community parenting workshops for support.





Margaret “Maggie” Smith

Margaret "Maggie" Smith, an elderly African American female in Newton County, lives alone on a fixed income with an annual household income of $14,493.26 from Social Security benefits. Retired with a high school diploma, Maggie faces financial challenges, struggling with home maintenance costs and property taxes. Covered under Medicare, she suffers from arthritis and hypertension, requiring regular medical care and prescription medications. Maggie experiences food insecurity, relying on Meals on Wheels and local food banks for nutrition. She owns an old car that frequently needs repairs, limiting her mobility due to health issues. With minimal family support, as her children live out of state and provide only occasional financial assistance, Maggie feels socially isolated and depends on community centers for social interaction and support.

2024 COMMUNITY ASSESSMENT

Demographics
As of 2022, the total population stands at approximately 1,926,125, with the majority residing in Gwinnett (957,977) and DeKalb (761,209) counties. The population has grown by 4.62% over the past five years, reflecting varying annual rates influenced by economic conditions, migration patterns, and the impacts of the COVID-19 pandemic. Migration data indicates strong internal movement within the state, particularly to DeKalb and Gwinnett counties, suggesting robust economic opportunities and attractive living conditions.

The demographic profile is diverse, with Black residents comprising 40.55% and White residents 36.80% of the population. Notably, the region has seen substantial increases in populations identifying as Asian, Multi-Racial, and American Indian, while the White population has decreased. The gender ratio shows a slight female majority (51.69%), and the median age has risen to 36.85 years, indicating an aging population. The presence of 20.44% foreign-born residents further enhances the region's cultural diversity. Household dynamics are shifting, with projections showing that by 2028, households with seniors will surpass those with children, emphasizing the need for adaptive public policies and community planning to address the evolving needs of an aging population.

Poverty Analysis
The region's poverty rate stands at 12.07%, involving 222,091 individuals, which is lower than both state (13.53%) and national (12.53%) averages. There has been a notable decrease in poverty from 2018 to 2022, with a net reduction of 21.01%. DeKalb and Newton counties have the highest poverty rates at 13.40%, while Gwinnett has the lowest at 10.10%. Among the population living in poverty, females represent a larger portion (55.24%) compared to males (44.76%). The most significant reductions in poverty have been among young children under five years old, with a 32.54% decrease, and among Hispanic communities, with a 21.11% reduction.

The research identifies several systemic issues contributing to poverty. A significant portion of the population faces economic hardship due to insufficient income to meet basic needs such as housing, food, and healthcare. Gender and racial disparities were also identified, with females, African Americans, and Hispanics experiencing higher poverty rates.

Additionally, while the cost of living has increased by 16.50%, the median income has increased at a significantly higher rate of 25.55% over the past five years, indicating some economic improvement. However, residents on fixed incomes or working minimum wage jobs would be disproportionately impacted by the rising cost of living, as their income levels may not keep pace with inflation, thereby eroding their purchasing power and financial stability.

Community feedback points to the high cost of living, stagnant wages, and inadequate assistance programs as major barriers to achieving financial stability.

Employment

The research highlights significant growth in the labor force, with a 5.11% increase over the past five years, outperforming the national trend of 2.71%. This growth was particularly notable in Newton and Rockdale counties, with increases of 10.93% and 8.49%, respectively, while the largest concentration of the labor force was in Gwinnett and DeKalb counties. The region experienced a 5.61% increase in the number of jobs since the last assessment and a 9.92% increase compared to 2018, with wages rising by 2.72% from the previous assessment and 21.62% since 2018.

Despite the challenges posed by the COVID-19 pandemic, the region showed resilience and adaptability, suggesting a robust economic foundation. The unemployment rate decreased by 15.62% over the same period, with notable improvements across most demographic groups, highlighting broad-based economic progress. However, the regional unemployment rate of 5.78% is higher than the state (5.20%) and national (5.30%) averages, indicating areas for improvement. Specific demographic groups, such as Pacific Islanders, Asians, and American Indians, experienced increased unemployment rates, highlighting potential systemic issues.

Additionally, the region faces a job deficit of 286,605, necessitating many residents to commute outside the area for work, exacerbating transportation and childcare challenges. Financial viability remains a concern, with the median wage of $60,734 insufficient to meet the living wage requirements for most household configurations. This economic precariousness is reflected in the fact that 53,323 members of the labor force earn below the poverty level, representing 5.52% of all workers and a significant portion (80.12%) of able-bodied adults living below the poverty threshold.

Adult Education & Skills Development

The research highlights the crucial link between educational attainment and socio-economic outcomes, underscoring disparities in employment rates, median earnings, and poverty levels across different educational categories. The data shows that higher education strongly correlates with lower unemployment rates and higher earnings. Higher educational attainment typically opens up more job opportunities, leading to stable, higher-paying employment and increased economic security. Conversely, those with lower education levels, particularly those without a high school diploma, often face limited job prospects and lower earning potential.

The region faces significant educational barriers, with 132,981 adults lacking a high school diploma. This group is likely to encounter severe obstacles in the job market due to their limited qualifications, resulting in lower economic security and increased vulnerability to poverty. Additionally, 24.75% of the population, or 372,334 individuals, are identified as literacy deficient, and 39.00%, totaling 586,708 individuals, are numeracy deficient. These deficiencies highlight the urgent need for comprehensive literacy and numeracy programs. Low literacy and numeracy skills hinder job performance, limit access to information and opportunities, and impair financial management, all of which are critical for economic stability.

Language barriers further exacerbate these challenges, limiting job opportunities to lower-paying, less stable positions, and hindering access to social services, educational opportunities, and healthcare. This can significantly impact an individual's quality of life and economic stability. Addressing these educational and skill deficiencies through targeted programs can enhance economic security for individuals, providing them with better job opportunities, higher earnings, and improved financial management skills. This comprehensive approach is essential for promoting broader economic stability and growth within the community.

Child/Youth Education

The research highlights the crucial role of education in alleviating long-term poverty, demonstrating that access to quality education from a young age equips children with critical skills, thus enhancing their future economic opportunities. The region is home to 354,882 school-aged children, with Gwinnett and DeKalb counties having the highest concentrations. Notably, the region has made progress in reducing child poverty, with a 17.48% decline in school-aged children living in poverty from 2018 to 2022. This indicates improvements in economic conditions and the effectiveness of poverty alleviation programs.

Despite these advancements, the region's average proficiency score for school districts stands at 78, reflecting average performance. Disparities in educational performance across different school systems highlight the need for targeted support. For instance, Newton County has an average score of 71, while Rockdale County scores 72, indicating lower performance compared to other areas. Additionally, significant barriers such as limited English proficiency and disabilities among students necessitate specialized programs and resources. Approximately 15% of the student population has limited English proficiency, and 13% are identified with disabilities. These factors require dedicated support to ensure equitable access to education and to improve academic outcomes for all students. Addressing these educational challenges is essential for fostering a more effective educational system and improving academic outcomes for all students.

Childcare/Early Education

Despite providing 67,443 secure childcare environments, there remains a substantial shortfall of 58,116 slots, resulting in a ratio of 1.86 children for every available slot. This shortfall has grown by 19.55% since the previous assessment, with the number of childcare slots decreasing by 2.82%. The lack of sufficient childcare slots hampers parents' ability to work or pursue education, thereby perpetuating cycles of poverty and affecting children's early development.

Community feedback underscores the severity of this issue, with 51 survey respondents identifying the lack of childcare as one of the top barriers to economic stability, and 56 pointing to unreasonable childcare costs. Qualitative data highlights that childcare costs are prohibitively high, with parents paying up to $600 per month for a two-year-old, and affordable options often compromising on quality. Additionally, families struggle with finding adequate care for children with special needs, and the inconsistency in staffing and operational hours since COVID-19 exacerbates the problem. The feedback suggests that addressing these barriers is crucial for supporting low-income families in achieving economic stability and accessing educational opportunities.

Transportation

In 2022, the U.S. Census Bureau identified 35,281 households without a vehicle. Nearly half of these households (17,825) included at least one member of the labor force, suggesting a substantial barrier to securing and maintaining employment. Additionally, 229,625 households had only one vehicle, with an estimated 25,306 of these having more than one working family member. This creates transportation difficulties for secondary household members seeking education, skills training, or employment. Overall, an estimated 71,691 households (10.61%) face transportation-related employment barriers, potentially affecting 201,452 local residents based on the average household size.

The data also reveals commuting patterns that further illustrate these challenges. An estimated 43.41% of all workers commute out of their county for employment, including 9,847 who travel out of state. Newton County has the highest percentage of residents commuting out of the county for work at 59.27%, followed by Rockdale County at 55.74%. DeKalb County has 47.40% of its workforce commuting out, while Gwinnett County shows the lowest at 37.29%. The average commute time in the region is 34.15 minutes, longer than both the state (28.40 minutes) and national (26.70 minutes) averages, with a 5.83% increase over the past five years. However, the number of workers working from home has increased by 158.91%, which may alleviate some transportation pressures and commute times.

Qualitative data from community feedback highlights additional transportation challenges. Personal transportation was identified as a significant barrier to economic security by 98 survey respondents. High repair costs, lack of insurance, difficulty finding trustworthy mechanics, and major vehicle issues were common concerns. Public transportation barriers were also noted, including reliability, safety, affordability, and limited routes. These issues underscore the need for improved transportation solutions and local employment opportunities to enhance economic security and quality of life for residents.

Housing

The research indicates a surplus of housing units, with 734,598 units available to accommodate 675,847 households, providing a surplus of 58,751 units. Single-family homes dominate the housing stock, comprising 484,085 units, while multi-family units, essential for affordable housing, account for 240,222 units. However, a significant concern is that nearly half (47%) of the housing stock is over 40 years old, presenting challenges in terms of maintenance, safety, and energy efficiency.

Despite the availability of housing, the quality remains a significant issue, with 219,090 units, or 29.82% of the housing stock, identified as substandard. This creates a deficit of 160,339 housing units when excluding substandard ones, highlighting that many households live in inadequate conditions. Renters are particularly affected, with 51.45% of rental units deemed substandard. The cost burden further exacerbates housing insecurity, with 206,190 families spending more than 30% of their income on housing and utilities. High eviction rates, especially in DeKalb County, where 26,500 evictions were reported, underscore the housing instability in the region. Addressing these issues requires comprehensive interventions to improve housing quality, affordability, and stability for all residents.

Health

An estimated 17.75% of adults, or 237,264 individuals, report poor to fair health. Frequent physical health distress impacts 148,040 adults, or 11% of the population, while mental distress affects 213,448 adults, or 15.85%. The region also has a notable obesity rate, with 36.25% of adults, or 475,752 individuals, being obese. These health issues are exacerbated by the high prevalence of chronic conditions such as diabetes, which affects 12.25% of adults, and sexually transmitted infections, impacting 3,765 individuals. These conditions not only diminish the quality of life but also increase healthcare costs, placing additional financial burdens on low-income households.

An estimated 9.91% of the population, or 189,642 individuals, were noted as being disabled. This includes 19,792 school-aged children and 69,639 seniors. Disabilities can limit individuals' ability to work, further exacerbating poverty and economic instability.

The region's leading causes of death, including cardiovascular diseases, cancers, and external causes such as accidents and violence, reflect broader health disparities and highlight the need for comprehensive healthcare services. Many of these can be positively impacted through lifestyle changes.

Healthcare access remains a significant barrier in the region. The physician-to-population ratio stands at 2,040:1, which is notably higher than state and national averages. Similar shortages exist for dental and mental health professionals, further hindering residents' ability to receive timely and adequate care.

There are 271,433 uninsured residents, representing 14.13% of the population. Among those insured, a significant portion relies on public coverage, with 319,253 residents on Medicaid and 245,360 on Medicare. This reliance on public insurance underscores the economic challenges faced by many residents, who may struggle to afford private insurance.

These health disparities are deeply influenced by social determinants such as poverty, education, and access to healthcare. Poverty can limit access to nutritious food, safe housing, and healthcare services, leading to poorer health outcomes. Conversely, poor health can hinder educational and employment opportunities, trapping individuals in a cycle of poverty. Addressing these social determinants is crucial for improving health outcomes and reducing poverty in the region. By focusing on comprehensive healthcare access, education, and economic stability, the region can work towards breaking the cycle of poverty and improving the overall well-being of its residents.

Nutrition

The research on nutrition reveals that 151,300 local residents are food insecure, including 54,080 children, 79,598 working-aged adults, and 17,622 seniors. This data underscores the widespread nature of food insecurity across all age groups in the community. Over the past five years, there has been a significant decrease in food insecurity among the local population, with rates dropping by 48.56%, from 15.10% in 2017 to 8.07% in 2021. Child food insecurity has also seen a reduction of 32.38%, indicating improvements in access to food and nutritional resources that positively impact community health and well-being. However, during the COVID-19 pandemic in 2020, child food insecurity saw a notable increase of 19.96%, while the overall population's food insecurity increased by only 0.07%.

Despite these improvements, the research highlights persistent challenges. Food insecurity disproportionately affects certain demographics, with individuals identifying as Black experiencing a significantly higher rate (17%) compared to White individuals (7%) and those identifying as Hispanic (12%). The average cost per meal per person in the county is $3.79, which for a family of four amounts to an estimated $1,383 per month or $16,600 per year. This expense constitutes nearly one-quarter (22.28%) of the median household income and 110.08% of the minimum wage salary, highlighting the financial strain on economically disadvantaged households.

The Supplemental Nutrition Assistance Program (SNAP) serves as a primary subsidy for 67,865 households, or 10.04% of the population, yet the average benefit of $1.40 per person per meal falls short of meeting nutritional needs. SNAP recipients are predominantly Black (63.52%), with other racial and ethnic groups also represented. Notably, the average benefit for senior citizens is even lower at $1.16 per person per meal, with an estimated 20% receiving only $0.17 per person per meal, underscoring the need for additional subsidies to support those with the greatest income barriers. Community feedback reveals the struggle of many residents to secure adequate food, with high costs, lack of access to fresh and affordable food, and insufficiency of food assistance programs being recurring themes.

Family Relationships

Domestic violence remains a pressing issue in the region. The Georgia Commission on Family Violence reported a 13% increase in crisis calls in 2023 compared to 2021, with 129,528 crisis calls received and 17,682 family violence and Ex Parte Temporary Protective Orders issued. Over the past five years, 897 individuals in Georgia lost their lives due to domestic violence, with firearms being the cause of death in 81% of these cases. This increase of 24.52% highlights the urgent need for enhanced domestic violence prevention and intervention strategies.

Parenting presents both rewards and stressors, impacting overall well-being. The region has 78,196 households (30.58%) with at least one child under 18. Birth rates have shown slight decreases, with 23,970 births in 2022. However, single-parent households, particularly those headed by women, face heightened poverty risks due to employment barriers related to childcare. There are 322,433 single-parent households in the region, with 64.24% headed by females. Unwed mother births have increased by 4.24%, despite a 1.96% decrease in total births over the past five years. Teen births have decreased by 17.13%, showing progress in public health interventions.

Custodial grandparents face unique challenges, including financial strain and health issues. The region has 13,815 custodial grandparent households, with a slight decrease of 7.49% over the past five years. However, a slight increase was observed in 2022. Foster care remains a critical concern, with 1,118 children in care in 2023, a decrease of 0.89% from 2022. Neglect, substance abuse, and inadequate housing are the primary reasons for child removal. Additionally, the community survey revealed that 58 respondents identified unsafe home environments as a primary condition of poverty, and 25 reported personal experiences with abuse or neglect, with 18 unable to find help in their time of need.

2024 COMMUNITY ASSESSMENT

Community

Social interaction is relatively high, with 77.90% of residents frequently engaging with friends and family. Urban residents (82.9%) show higher engagement rates compared to suburban (78.4%) and rural (68.7%) areas, with women slightly more inclined to engage than men. However, engagement with neighbors is lower than the national average, with only 19.7% frequently interacting compared to 26.9% nationally. This interaction is more common in rural areas and among lower-income individuals, though the overall practice of exchanging favors with neighbors remains less prevalent in Georgia.

Community involvement through volunteerism and charitable giving is notably below the national average. Georgia ranks 45th in volunteerism, with a significant decrease of 24.91% from 2019, and 46% of residents participating in charitable giving, placing the state 41st nationally. Group participation has seen some improvement, ranking 38th nationally, with higher rates among older, wealthier, and more educated demographics. Suburban areas exhibit higher participation rates than rural and urban regions. Despite these efforts, political engagement and confidence in institutions are areas of concern. Voter registration and turnout align with national averages, but other forms of political action and news consumption are lower. Confidence in public institutions, including the federal government, police, public schools, and mass media, has declined, indicating a need for enhanced community engagement and trust-building strategies.

Crime rates in the region present a significant challenge, with a regional crime rate of 13.67, slightly higher than the median rate for all Georgia counties. DeKalb County has the highest crime rate at 36.07, followed by Newton (17.35), Gwinnett (3.39), and Rockdale (0.86). This high crime rate impacts community engagement, as concerns about safety and security can undermine residents' trust in local institutions and dampen civic participation. Addressing social isolation, promoting volunteerism, and restoring confidence in public institutions are crucial steps toward building stronger, more connected communities in Georgia. Engaging diverse demographics and enhancing civic participation are essential for fostering a sense of community and improving socio-economic outcomes.

Potential Service Gaps

The community faces significant service gaps, with the most pressing issue being inadequate income, where 95.31% of individuals experiencing this problem did not receive assistance. This indicates a substantial need for financial support services and income augmentation programs to improve economic stability and reduce poverty levels. Housing insecurity follows closely, with 83.99% of affected individuals unable to access help. This includes those facing eviction, foreclosure, or unstable housing conditions, highlighting the urgent need for affordable housing and eviction prevention programs to prevent homelessness and ensure stable living conditions.

Poor quality housing is another critical gap, with 90.37% of those affected not receiving assistance. Addressing this issue through repair programs and quality standards is vital for ensuring safe and habitable living environments. Similarly, the lack of affordable housing remains a major concern, with 87.21% of individuals in need not receiving support. Expanding affordable housing options and providing financial assistance for housing costs are essential steps to mitigate this gap.

Transportation limitations, both personal and community-based, are significant barriers, with 85.16% of individuals in need not receiving assistance in both categories. Reliable transportation is crucial for accessing employment, education, and healthcare services. Improving public transportation options and supporting vehicle ownership for low-income residents can enhance mobility and access to essential services. Unemployment is also a substantial issue, with 76.55% of those affected not receiving support. Job training and placement programs, along with support for job searches and skill development, are necessary to reduce unemployment rates and improve economic opportunities for residents.

Poor mental health services are a critical gap, with 76.72% of individuals not receiving necessary support. This highlights the necessity for accessible mental health services, particularly in light of increasing mental health issues exacerbated by factors such as the COVID-19 pandemic. Financial management skills are also a significant barrier, with 75.00% of individuals not receiving help. Financial literacy programs are essential to equip residents with the knowledge and skills to manage their finances effectively, reducing debt and improving economic outcomes.

Overall, addressing these top service gaps is crucial for enhancing the economic stability, health, and overall quality of life for residents. Targeted interventions and resource allocation are necessary to meet the community's needs effectively.

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY



SECTION 3

COMPLIANCE

2024 COMMUNITY ASSESSMENT

Background

As the primary entity designated by the United States government to identify and eliminate the causes of poverty in local communities through the direct provision of services and coordination with other organizations, Community Action Agencies are held to a high standard of excellence through an accountability framework documented in the Community Service Block Grant (CSBG) that requires state funders to establish "performance goals, administrative standards, financial management requirements, and other requirements" (42 U.S.C. 9914). In order to fulfill their required oversight duties, state funding administrators are tasked with adopting, communicating, and evaluating each organization's ability to meet these basic standards on an annual basis.

Community Needs Assessment Standard Compliance

The following standards are directly associated with the development of a community assessment.

CSBG Standard 1.2: The organization analyzes information collected directly from low-income individuals as part of the community assessment.

During the assessment process, surveys were distributed online and administered directly to low-income individuals. A total of 476 individuals participated in the process that classified themselves as "low-income". This included 2 members of the governing body, 12 staff, 5 volunteers, 12 representatives of local businesses/organizations, and 422 community members.

CSBG 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.

Multiple individuals representing community-based organizations, faith-based organizations, private sector, public sector, and educational institutions were invited to participate in the project. The table below provides a summary of the final number of participants representing each group that chose to participate.

Sector Represented	Surveys
Federal Government	*1*
Local Government	*2*
Law Enforcement	*1*
Vendors	*1*
Veteran Services	*1*
Educational Institutions	*4*
Other Organizations	*13*

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CSBG Standard 3.1: The organization conducted a community assessment and issued a report within the past 3 years.

The Community Needs Assessment was completed in partnership with SA Howell, LLC. through a contractual agreement, monitored by the organization's leadership team. The assessment was finalized and approved by the Board of Directors on _____. The final report will be posted on the organization's website.

CSBG Standard 3.2: As part of the community assessment, the organization collects and includes data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area.

During the process of quantitative research, statistical data was collected that identified the impact of poverty on individuals based on gender, age, and race/ethnicity. This data can be found throughout Section 7 of the document.

CSBG Standard 3.3: The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.

Also known as statistical or numerical data, quantitative data was collected through intensive research of more than 5 dozen unique data sources in ten domains of self-sufficiency. These categories include Income, Employment, Education, Childcare, Housing, Health, Nutrition, Transportation, Community Engagement, and Family Relationships. Data includes statistics for the local communities, the entirety of the service area, Georgia, and the United States. Data sources include but are not limited to the U.S. Census Bureau, U.S. Department of Labor, National Center for Education Statistics, U.S. Department of Housing and Urban Development, National Low-Income Housing Coalition, M.I.T., U.S. Department of Agriculture, Center for Disease Control, and multiple-choice questions on locally administered surveys.

Qualitative data, often referred to as descriptive or narrative data, was collected through open ended survey questions and focus groups. This included feedback from agency staff, board members, community partners, and residents of the region served, including those with limited incomes.

Data analysis was conducted utilizing a variety of descriptive processes. This includes comparative, trend, and exploratory evaluations. Prioritization of needs was determined using a priority consensus ranking based on data obtained from surveys. Prioritization tables are provided in section 10.

The geographic area served by the organization includes the following counties:

- *DeKalb*
- *Gwinnett*
- *Newton*
- *Rockdale*

2024 COMMUNITY ASSESSMENT

CSBG Standard 3.4: The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.

A report of the key findings on the causes and conditions of poverty can be found in Section 2 of this document. Agency (A) level needs will be documented separately by the organization upon completion of the SWOT Analysis during the development of the strategic plan.

CSBG Standard 3.5: The governing board formally accepts the completed community assessment.

The finalized document was presented to the Board of Directors on _____. A formal acceptance was approved with a vote of _____%.

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

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SECTION 4

COMMUNITY ACTION

2024 COMMUNITY ASSESSMENT

In January of 1964, Lyndon B. Johnson declared unconditional war on poverty. His strategy consisted of a new cooperative relationship between local citizens, community organizations, local government officials, state legislators, and national leaders.

The flagship of this new initiative was a small program known as Urban and Rural Community Action, whose task was to stimulate a better focusing of all available local, State, private, and Federal resources upon the goal of enabling low-income families, and low-income individuals of all ages, in rural and urban areas, to attain the skills, knowledge, and motivations and secure the opportunities needed for them to become self-sufficient.

To carry out this mission, Community Action Agency (CAA) leaders were asked to develop both long-range strategies and specific, short-range plans for using resources (both allocated and leveraged). These plans were to take into account the areas of greatest need, the availability of community resources, and its own strengths and limitations.

One unique element of the Economic Opportunity Act, the law that created the Community Action Network, was a requirement to develop plans and programs with the maximum feasible participation of the residents of the areas and members of the groups served. This requirement was established to ensure that the organization's activities were responsive and relevant to the low-income citizens to whom they were addressed.

In 1967, amendments to the Economic Opportunity Act led to additional guidance from the national network by means of the document "Organizing Communities for Action." In this document, specific guidance was provided reminding Community Action Agencies that they are not to be simply a dispenser of welfare or social services to the poor, but to be a source of leadership in identifying and eliminating the causes of poverty in the local community.

In 1973, the network faced its first major battle as President Richard Nixon ordered all Community Action Agencies to close by June. The network joined together and fought a legal battle that resulted in a victory for Community Action, as well as the families and communities it serves.

Realizing that they could not simply close the program down, the Ford Administration focused their attention on reducing the impact of the network by eliminating the Office of Economic Opportunity (OEO) and, thus, the cabinet level position over-seeing the program. Administration of the program was moved to the Department of Health Education and Welfare's Community Service Administration. While the mission of the network remained "to make the entire community more responsive to the needs and interests of the poor by mobilizing resources and bringing about greater institutional sensitivity", the reduction in federal support and public opinion associated with the name change (Economic Opportunity to Community Services) was damaging.

In 1981, President Reagan proposed a $0 budget for Community Action, this time with the support of Congress. In response to this crisis, David Bradley, a former student of Sargent Shriver, stepped on the scene to negotiate a compromise that led to the creation of the Community Services Block Grant (CSBG). Through CSBG, administrative authority was shifted to the states, which were allocated 5% of program funding for administrative duties. An additional 5% was allocated for discretionary anti-poverty purposes. The remaining 90% was to be used to fund Community Action Agencies.

During the Clinton Administration, several major laws were passed to reduce and reform anti-poverty efforts in the nation. Among these was the Government Performance and Results Act (GPRA), enacted due to waste and inefficiency in Federal programs that had led to a lack of confidence of the

American people in the government. In this law, multiple new requirements were enacted to ensure accountability among organizations receiving government monies. It was this law, in part, that led to the development of the Results Oriented Management and Accountability (ROMA) system as the mandated management framework for Community Action Agencies, effective in 2001.

In 2010, the GPRA Modernization led to additional guidance focusing on the coordination of services among community partners, customer satisfaction, and data quality. It was this law that led to the development of a new performance management framework that includes Organizational Standards, State Accountability Measures, Federal Accountability Measures, and ROMA: Next Generation. While the framework does include some new regulations, it primarily holds the network accountable for returning to its roots with a focus on community level activities, an emphasis on addressing the causes of poverty, and ensuring organizations work together to truly impact the lives of customers and the community as a whole rather than simply delivering emergency services.

Today, more than 1,000 organizations across the nation join Partnership for Community Action, Inc. to fulfill the mission of this amazing network.

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

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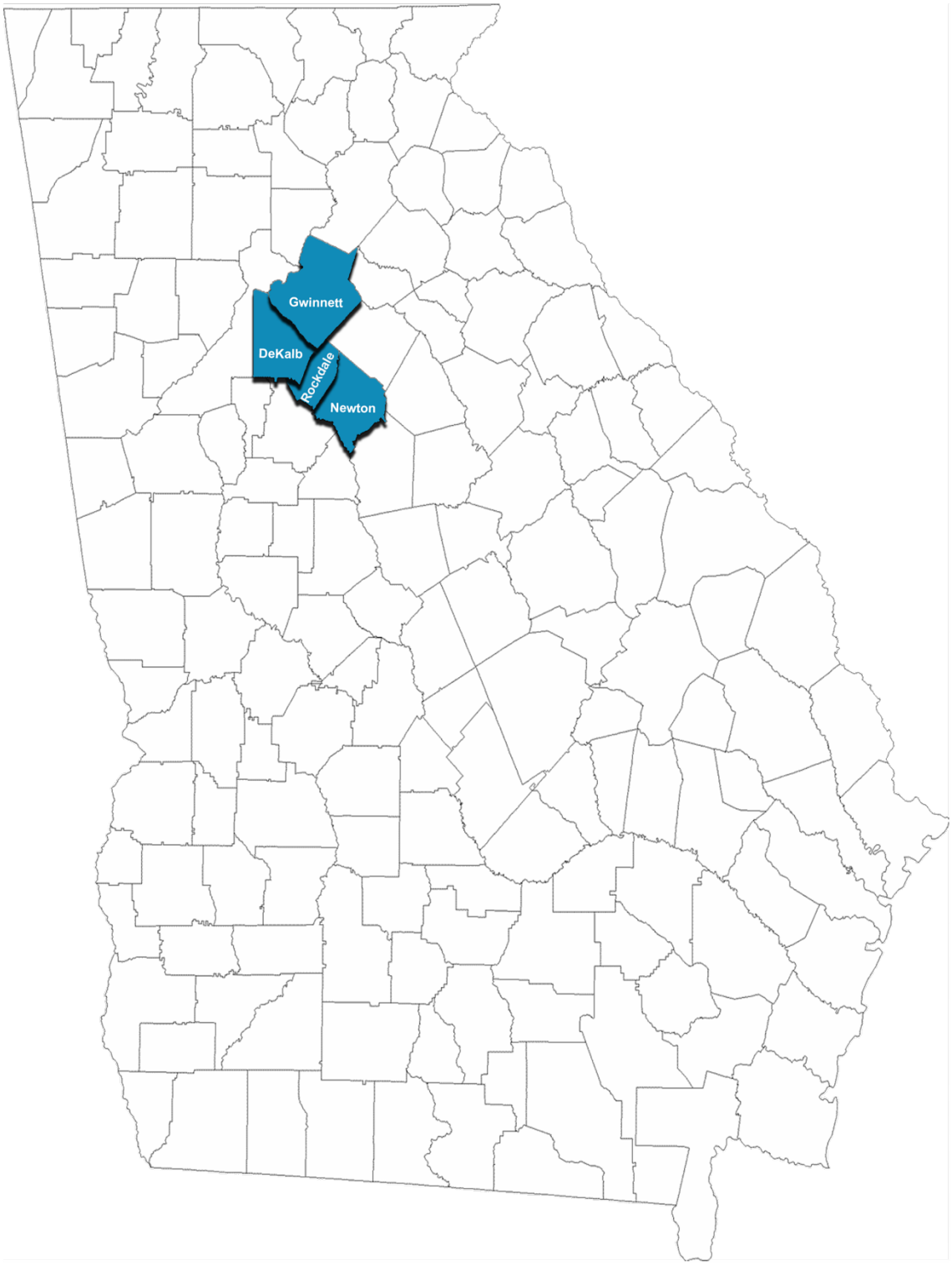


SECTION 5

THE AGENCY

Service Area

Located in the Metropolitan Atlanta area of Georgia, Partnership for Community Action, Inc. is committed to creating equal opportunities for all residents of DeKalb, Gwinnett, Newton, and Rockdale counties by prioritizing the progress of the customers over the programs provided.



Governance

Partnership for Community Action, Inc. operates under the guidance of a nine-member tri-partite board. This board comprises a balanced representation of the community, with one-third elected officials, one-third representing the interests of the business sector, and one-third voicing the perspectives and concerns of the low-income population. Their collaborative efforts lead the organization towards its vision of communities full of neighbors who can support their families, boost their education, and have meaningful impact.

Programs

Partnership for Community Action, Inc. administers a suite of robust programs underpinned by the Community Services Block Grant (CSBG) and other funding sources, all aimed at empowering economically disadvantaged individuals and families:

Emergency Assistance

For many individuals and families, economic turmoil and hardships prove to be more than they can handle. Whether it is the loss of a job, loss of income, or the everyday difficulty of meeting the high cost of living in the region, many families and individuals are without the resources necessary to maintain an acceptable standard of living. At the present time, emergency services offered by the agency include financial assistance with rent and mortgage payments, utility payments, budget counseling, and resource coordination.

Case Management Program

The organization's Case Management Program, operated by family service workers through the Community Services Block Grant and CSBG CARES, assists low-income households with the achievement of self-sufficiency through direct services and coordination with community partners

Low-Income Home Energy Assistance Program (LIHEAP)

The Low-Income Home Energy Assistance Program (LIHEAP) was designed to assist low-income families, especially senior citizens and disabled individuals, with energy supplements during cold winter months.

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY



SECTION 6

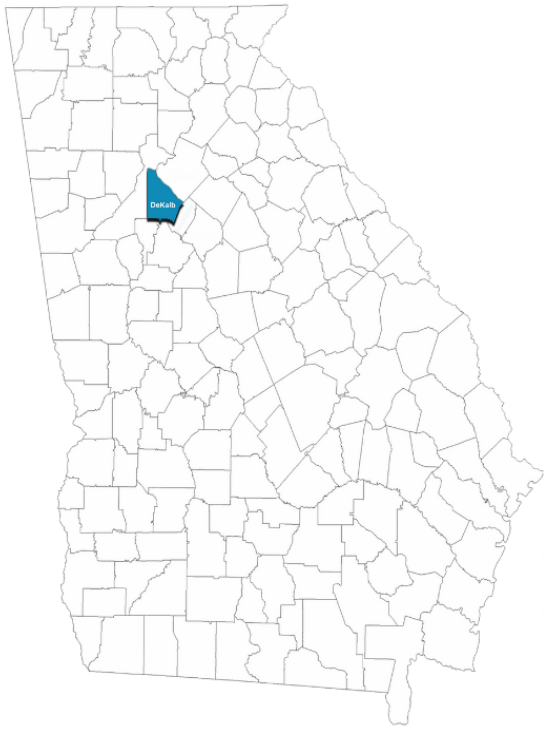
COUNTY PROFILES

DeKalb County

2024 Community Assessment

Prioritized Service Gaps

1. *Debt relief services*
2. *Home health repairs*
3. *Home insulation assistance*
4. *Mortgage/foreclosure assistance*
5. *Rental assistance*



Demographics

- 2022 Population: 761,209
- 2022 Households: 284,730
- 2022 Births: 10,074
- 2022 Deaths: 5,840
- 2022 Inward Migration: 62,937
- 2022 Outward Migration: 64,596

Population Summary:
36 year-old, Black (52.77%), Non-Hispanic (91.47%), Females (52.47%)

Income & Poverty

- Low-Income individuals: 100,326. (-19.28%)
  - Deep Poverty: 44,621
  - 125% Poverty: 129,640
  - 200% Poverty: 223,385
- Poverty Rate: 13.40%
- Median Income: $76,044 (+28.28%)
- Inflation: +16.50%

- Cost of Living
  - 1 Adult/0 Child: $52,520
  - 1 Adult/2 Child: $104,874
  - 2 Adult/0 Child: $68,578
  - 2 Adult/2 Child: $90,168

Employment

- Labor Force: 415,522 (+2.46%)
- Unemployed: 26,764
- Unemployment Rate: 6.40%
- Jobs: 303,490
- Median Wage: $73,644
- Working Poor: 22,90

Highlights

- No Diploma: 37,419
- Literacy Deficient: 145,437
- Numeracy Deficient: 236,355
- Average School Proficiency: 82 (B)
- Childcare Deficit: 24,619
- Safe Housing Deficit: 58,286
- Housing Cost Burdened HH: 206,190
- Median Rent: $17,568
- Median Mortgage: $21,876
- Median Utilities: $7,404
- Eviction Rate: 18.80%
- Homeless: 565
- Poor Health: 94,112
- Frequent Physical Distress: 58,820
- Frequent Mental Distress: 88,230
- Disabled: 86,814
- Life Expectancy: 78.90 Years
- Uninsured: 100,082
- Food Insecure: 65,790
- No Vehicle HH: 22,046

Partnership for Community Action, Inc.

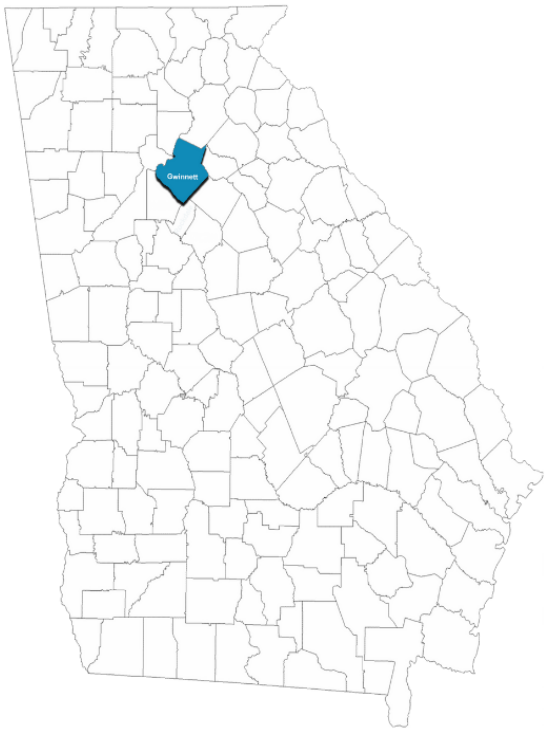
Service gaps are prioritized by feedback from low-income residents

Gwinnett County

2024 Community Assessment

Prioritized Service Gaps

1. *Home health repairs*
2. *Employment supplies*
3. *Domestic violence assistance*
4. *Re-entry assistance*
5. *Mortgage/foreclosure assistance*



Demographics

- 2022 Population: 957,977
- 2022 Households: 317,971
- 2022 Births: 11,569
- 2022 Deaths: 5,472
- 2022 Inward Migration: 53,570
- 2022 Outward Migration: 50,195

Population Summary:
36 year-old, White (39.43%) or Black (28.46%), Non-Hispanic (78.18%), Females (50.87%)

Income & Poverty

- Low-Income individuals: 96,291 (-11.40%)
  - Deep Poverty: 39,675
  - 125% Poverty: 134,960
  - 200% Poverty: 259,705
- Poverty Rate: 10.10%
- Median Income: $82,296 (+21.44%)
- Inflation: +16.50%

- Cost of Living
  - 1 Adult/0 Child: $56,056
  - 1 Adult/2 Child: $109,346
  - 2 Adult/0 Child: $72,051
  - 2 Adult/2 Child: $94,349

Employment

- Labor Force: 504,118 (+6.45%)
- Unemployed: 20,633
- Unemployment Rate: 4.10%
- Jobs: 373,493
- Median Wage: $64,549
- Working Poor: 24,223

Highlights

- No Diploma: 72,466
- Literacy Deficient: 162,083
- Numeracy Deficient: 243,124
- Average School Proficiency: 86 (B)
- Childcare Deficit: 28,203
- Safe Housing Deficit: 84,267
- Housing Cost Burdened HH: 206,190
- Median Rent: $19,128
- Median Mortgage: $22,140
- Median Utilities: $7,404
- Eviction Rate: 15.30%
- Homeless: 269
- Poor Health: 112,895
- Frequent Physical Distress: 70,559
- Frequent Mental Distress: 78,783
- Disabled: 75,231
- Life Expectancy: 79.60 Years
- Uninsured: 142,300
- Food Insecure: 68,650
- No Vehicle HH: 10,362

Partnership for Community Action, Inc.

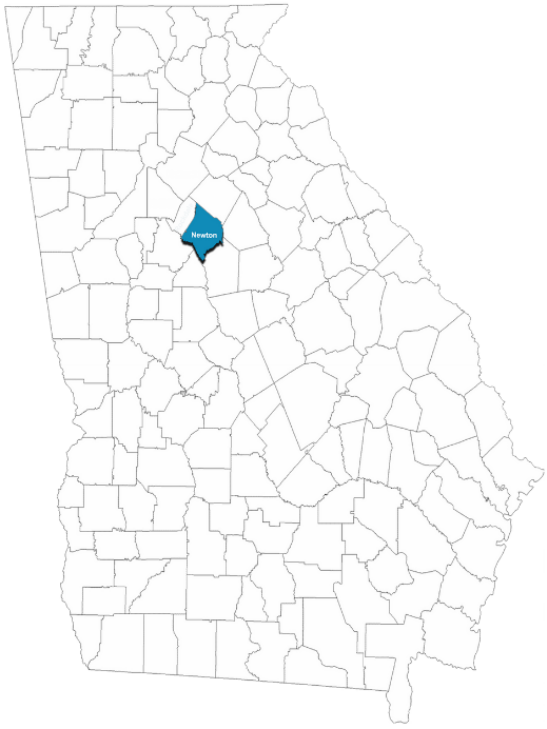
Service gaps are prioritized by feedback from low-income residents

Newton County

2024 Community Assessment

Prioritized Service Gaps

1. *Suicide prevention*
2. *Mortgage/foreclosure assistance*
3. *Debt relief services*
4. *Transportation assistance*
5. *Adult education assistance*



Demographics

- 2022 Population: 113,298
- 2022 Households: 139,906
- 2022 Births: 1,348
- 2022 Deaths: 1,088
- 2022 Inward Migration: 9,172
- 2022 Outward Migration: 7,396

Population Summary:
36 year-old, Black (46.84%) or White (44.86%), Non-Hispanic (93.69%), Females (52.68%)

Income & Poverty

- Low-Income individuals: 14,935 (-25.14%)
  - Deep Poverty: 6,793
  - 125% Poverty: 21,052
  - 200% Poverty: 35,877
- Poverty Rate: 13.40%
- Median Income: $70,732 (+32.68%)
- Inflation: +16.50%

- Cost of Living
  - 1 Adult/0 Child: $51,022
  - 1 Adult/2 Child: $95,098
  - 2 Adult/0 Child: $66,768
  - 2 Adult/2 Child: $88,504

Employment

- Labor Force: 56,590 (+10.93%)
- Unemployed: 3,732
- Unemployment Rate: 6.60%
- Jobs: 23,825
- Median Wage: $46,578
- Working Poor: 3,813

Highlights

- No Diploma: 7,553
- Literacy Deficient: 22,752
- Numeracy Deficient: 35,878
- Average School Proficiency: 63.9 (D)
- Childcare Deficit: 3,494
- Safe Housing Deficit: 9,779
- Housing Cost Burdened HH: 206,190
- Median Rent: $15,168
- Median Mortgage: $17,712
- Median Utilities: $7,404
- Eviction Rate: 24.80%
- Homeless: 45
- Poor Health: 16,029
- Frequent Physical Distress: 10,124
- Frequent Mental Distress: 14,342
- Disabled: 16,125
- Life Expectancy: 74.20 Years
- Uninsured: 15,320
- Food Insecure: 10,110
- No Vehicle HH: 1,660

Partnership for Community Action, Inc.

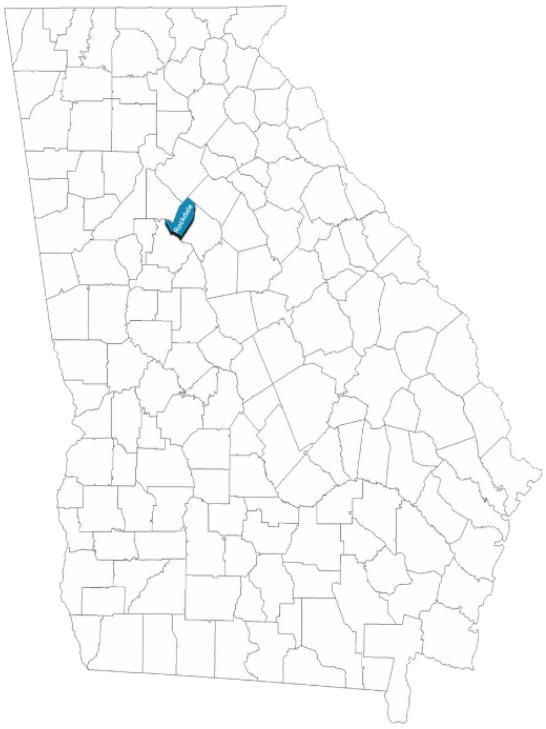
Service gaps are prioritized by feedback from low-income residents

Rockdale County

2024 Community Assessment

Prioritized Service Gaps

1. *Employment supplies*
2. *Parenting supports*
3. *Childcare subsidies*
4. *Childcare services*
5. *Adult education assistance (tie)*
6. *Substance abuse assistance (tie)*



Demographics

- 2022 Population: 93,641
- 2022 Households: 33,240
- 2022 Births: 979
- 2022 Deaths: 823
- 2022 Inward Migration: 9,879
- 2022 Outward Migration: 9,377

Population Summary:
39 year-old, Black (57.26%) , Non-Hispanic (89.55%), Females (52.48%)

Income & Poverty

- Low-Income individuals: 10,539 (-25.00%)
  - Deep Poverty: 5,423
  - 125% Poverty: 15,436
  - 200% Poverty: 31,383
- Poverty Rate: 11.40%
- Median Income: $68,999 (+20.95%)
- Inflation: +16.50%

- Cost of Living
  - 1 Adult/0 Child: $50,752
  - 1 Adult/2 Child: $103,043
  - 2 Adult/0 Child: $66,810
  - 2 Adult/2 Child: $88,691

Employment

- Labor Force: 46,175 (+8.49%)
- Unemployed: 2,782
- Unemployment Rate: 6.00%
- Jobs: 34,992
- Median Wage: $58,540
- Working Poor: 2,382

Highlights

- No Diploma: 6,543
- Literacy Deficient: 20,019
- Numeracy Deficient: 31,882
- Average School Proficiency: 69.5 (D)
- Childcare Deficit: 1,800
- Safe Housing Deficit: 8,007
- Housing Cost Burdened HH: 206,190
- Median Rent: $15,156
- Median Mortgage: $18,828
- Median Utilities: $7,404
- Eviction Rate: 22.50%
- Homeless: 97
- Poor Health: 14,229
- Frequent Physical Distress: 8,537
- Frequent Mental Distress: 12,094
- Disabled: 11,472
- Life Expectancy: 75.40 Years
- Uninsured: 13,731
- Food Insecure: 6,750
- No Vehicle HH: 1,213

Partnership for Community Action, Inc.

Service gaps are prioritized by feedback from low-income residents

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY



SECTION 7

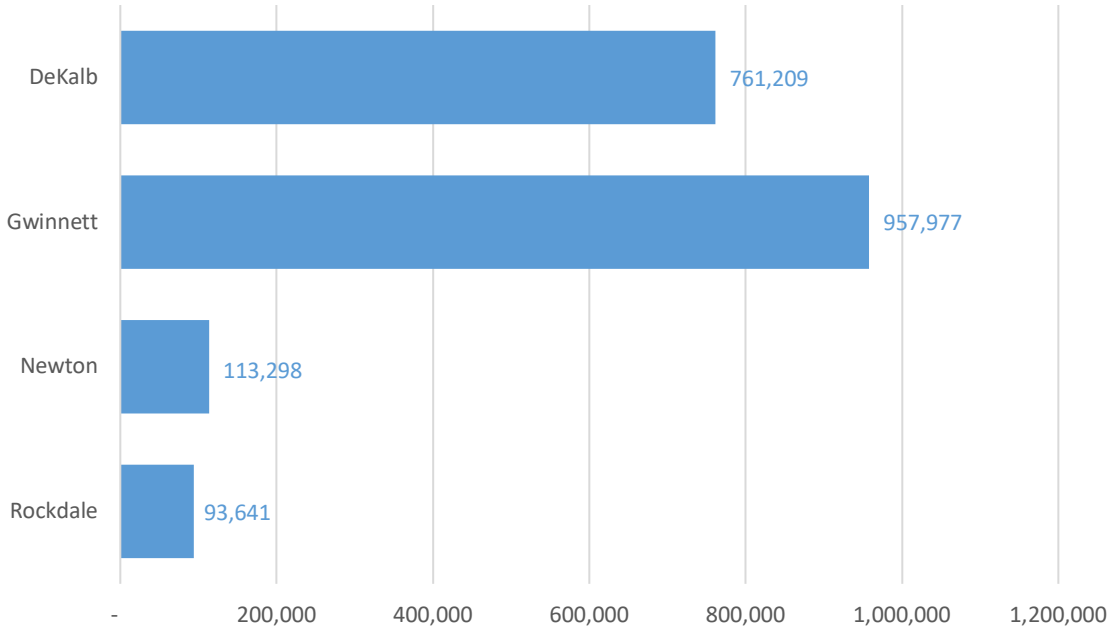
REGIONAL PROFILE

Demographics

Introduction:
Assessing the demographics of a community's residents is a fundamental step in conducting comprehensive research. These demographic insights serve as a foundation to which all other elements can be compared, and a cornerstone for understanding the multifaceted dynamics of the community. Examining population counts, trends in population change, migration patterns, and the distribution of residents by gender, age, race, and ethnicity provides critical context. This data offers a lens through which we can gain valuable insights into how poverty intersects with the broader community, helping to inform targeted strategies and policies that are sensitive to the diverse needs and circumstances of local residents.

Total Population:
The combined population of DeKalb, Gwinnett, Newton, and Rockdale counties in Georgia totals approximately 1,926,125 as of 2022. The largest portions of the population reside in Gwinnett (957,977) and DeKalb (761,209) counties. These two counties together account for the majority of the region's population, highlighting their significance as major urban and suburban centers with substantial economic activities and diverse community services. In contrast, Newton and Rockdale counties, with populations of approximately 113,298 and 93,641 respectively, are significantly smaller and likely represent more rural parts of the region. This distribution suggests a diverse range of community needs and resource allocation strategies across the counties, with the more populous areas requiring more robust infrastructure and services to support their larger communities.

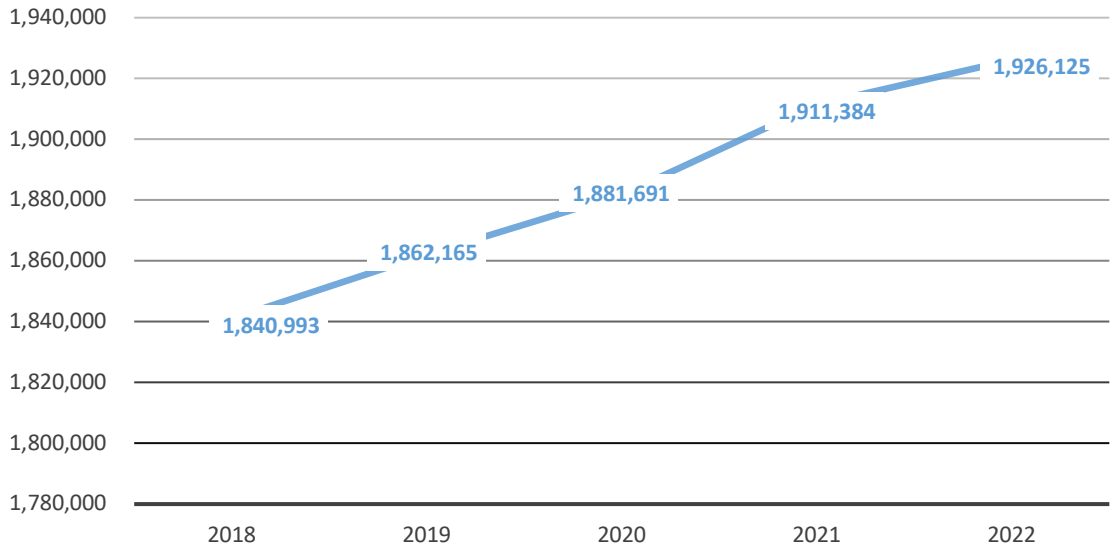
Chart 1: Regional Population by County (2022)



Source: U.S. Census Bureau APS (DP02)

Population Change:
The five-year population trend for the region encompassing DeKalb, Gwinnett, Newton, and Rockdale counties, as outlined in the chart from 2018 to 2022, reveals a total increase of 4.62%. This growth is characterized by varying annual rates, reflecting different economic and social dynamics each year.

Chart 2: Five Year Population Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP02)

In 2019, the population growth peaked at 2.21%, likely driven by favorable economic conditions and possibly enhanced by increases in housing availability or job opportunities that attracted more residents to the area. The subsequent year, 2020, saw a reduction in the growth rate to 1.05%, which could be attributed to the impacts of the COVID-19 pandemic on migration and economic activity. The growth rate increased slightly in 2021 to 1.58%, indicating a degree of recovery as restrictions may have eased and economic activities resumed. However, in 2022, the growth rate tapered to 0.77%, suggesting a stabilization or possible saturation in population growth as the region could be experiencing limits to how quickly it can absorb new residents due to factors such as housing market constraints or infrastructural capacities.

Population change serves as a crucial indicator of a community's vitality, influencing its socio-economic dynamics significantly. The observed population growth in the service area suggests a thriving economic environment that attracts new residents, potentially due to employment opportunities, affordable living conditions, and a range of community amenities. However, it is important to analyze the specific factors contributing to this growth.

This expansion can exert pressure on local resources including educational institutions, healthcare systems, and public utilities, while simultaneously stimulating economic growth through an expanded labor force and increased demand for goods and services. Such dynamics promote job creation and business expansion, impacting community planning and service provision. Specifically, a demographic shift towards a more ethnically diverse population requires the implementation of cultural competence training for service providers and adjustments in educational curricula to meet the needs of a changing demographic profile.

Conversely, a population decline poses its own set of challenges, potentially leading to economic downturns, a drain in talent, and diminished tax revenues, which in turn can affect public service delivery and funding. Such declines may reflect larger issues like outmigration due to limited opportunities, reduced birth rates, or other socio-economic challenges, emphasizing the need for comprehensive strategic planning to address these varied impacts on community health and sustainability.

Population Change Analysis:
To better understand the population change, two major factors must be evaluated: migration and natural growth.

According to the most recently published data, the region experienced total increase of 14,741 residents (+0.77%) between 2021 and 2022.

Table 1: One Year Population Change Analysis (2021-2022)

Area	*Total Change*	Births	Deaths	Moved In	Moved Out
DeKalb	+2,575	10,074	5,840	62,937	64,596
Gwinnett	+9,472	11,569	5,472	53,570	50,195
Newton	+2,036	1,348	1,088	9,172	7,396
Rockdale	+658	979	823	9,879	9,377
REGION	**+14,741**	**23,970**	**13,223**	**135,558**	**131,564**

Source: U.S. Census Bureau ACS (DP02) I Georgia Public Health

Newton County exhibited the most substantial growth at 1.83%, suggesting it might be emerging as a new focal point for residential and economic expansion within the region. This higher growth rate could be indicative of increasing attractiveness due to improved amenities, lower living costs compared to its neighbors, or targeted economic initiatives drawing residents.

Gwinnett County, while having a notable increase in actual population numbers, showed a percentage growth rate of 1.00%, making it the second-fastest-growing county in terms of percentage. This rate confirms its continued appeal, possibly driven by a mix of job opportunities, housing developments, and robust local services which consistently attract new residents.

Rockdale and DeKalb counties, with growth rates of 0.71% and 0.34% respectively, experienced more modest increases. Rockdale's growth, slightly higher than DeKalb's, could be influenced by regional development spillovers, offering a quieter yet accessible alternative to the more bustling nearby counties.

Population Migration:
Focusing on the inward migration patterns, data indicates that the largest portion (52.94%) of incoming residents to these Georgia counties came from other counties within the state. Specifically, DeKalb County saw the highest inflow from this category, receiving 33,245 residents from other counties, highlighting its strong regional draw. Following closely, Gwinnett County also saw a significant number of new residents from within the state, totaling 25,320. These figures suggest that both DeKalb and Gwinnett counties are major centers for internal migration, likely due to their robust economic opportunities, educational institutions, and community amenities that attract individuals seeking growth and stability within the state.

Table 2: One-Year Population Migration Analysis (2021-2022)

Area	Change	Another County	Another State	Another Country
DeKalb	62,937	33,245	24,277	5,415
Gwinnett	53,570	25,320	21,743	6,507
Newton	9,172	5,654	2,744	774
Rockdale	9,879	7,543	2,092	244
Totals	**135,558**	**71,762**	**50,856**	**12,940**

Source: U.S. Census Bureau ACS (DP02)

An estimated 50,856 individuals were noted as relocating to the region from other states between 2021 and 2022. This substantial migration underscores the region's ability to attract individuals seeking new opportunities, possibly due to the diverse economic landscapes and quality of life offered across these counties.

In terms of international migration, the region collectively welcomed 12,940 new residents from other countries, pointing to its growing role as a new home for global citizens. This influx not only enhances the region's cultural diversity but also contributes to the local economy and broadens the social fabric of the community. The international arrivals suggest that the region's counties are increasingly seen as attractive destinations for those looking to start anew in the United States, highlighting the importance of supportive services and inclusive community policies to integrate these new residents effectively.

Gender:
The region's current population is predominately female (995,548 individuals), with a ratio of 92 males for every 100 female residents. It should be noted that this ratio is lower than both the state (96) and national (98) averages.

Table 3: County Populations by Gender (2022)

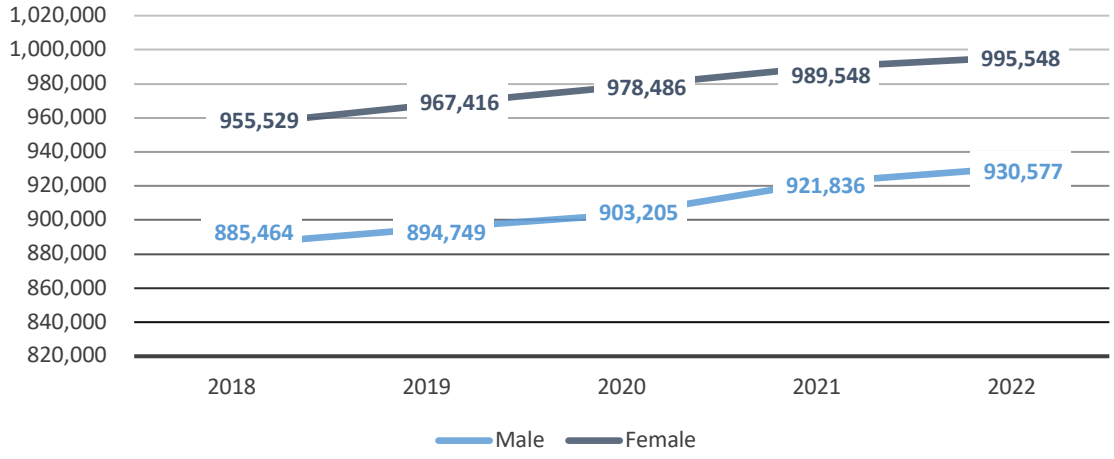
Area	*Male*	Female	Gender Ratio
DeKalb	361,801	399,408	91:100
Gwinnett	470,667	487,310	97:100
Newton	53,614	59,684	90:100
Rockdale	44,495	49,146	89:100
REGION	**930,577**	**995,548**	**92:100**
STATE	**5,244,476**	**5,477,849**	**96:100**
NATION	**164,200,298**	**166,897,295**	**98:100**

Source: U.S. Census Bureau ACS (DP05)

DeKalb County shows a gender ratio of 91:100, a slightly higher disparity as compared to the region as a whole. Gwinnett County has a slightly more balanced ratio of 97 males for every 100 females, which is the closest to parity among the counties and reflects a diverse and balanced demographic profile. Newton and Rockdale Counties show ratios of 90:100 and 89:100, respectively, indicating a similar trend to DeKalb with fewer males compared to females. This demographic characteristic could influence local policies, especially those targeting gender-specific health and social services.

Over the past five years, the number of females has increased by 4.19%, with the number of males increasing by 5.09%, as a result, the gender ratio slightly shifted from 91.28:100 to 91.88:100, or +0.66%.

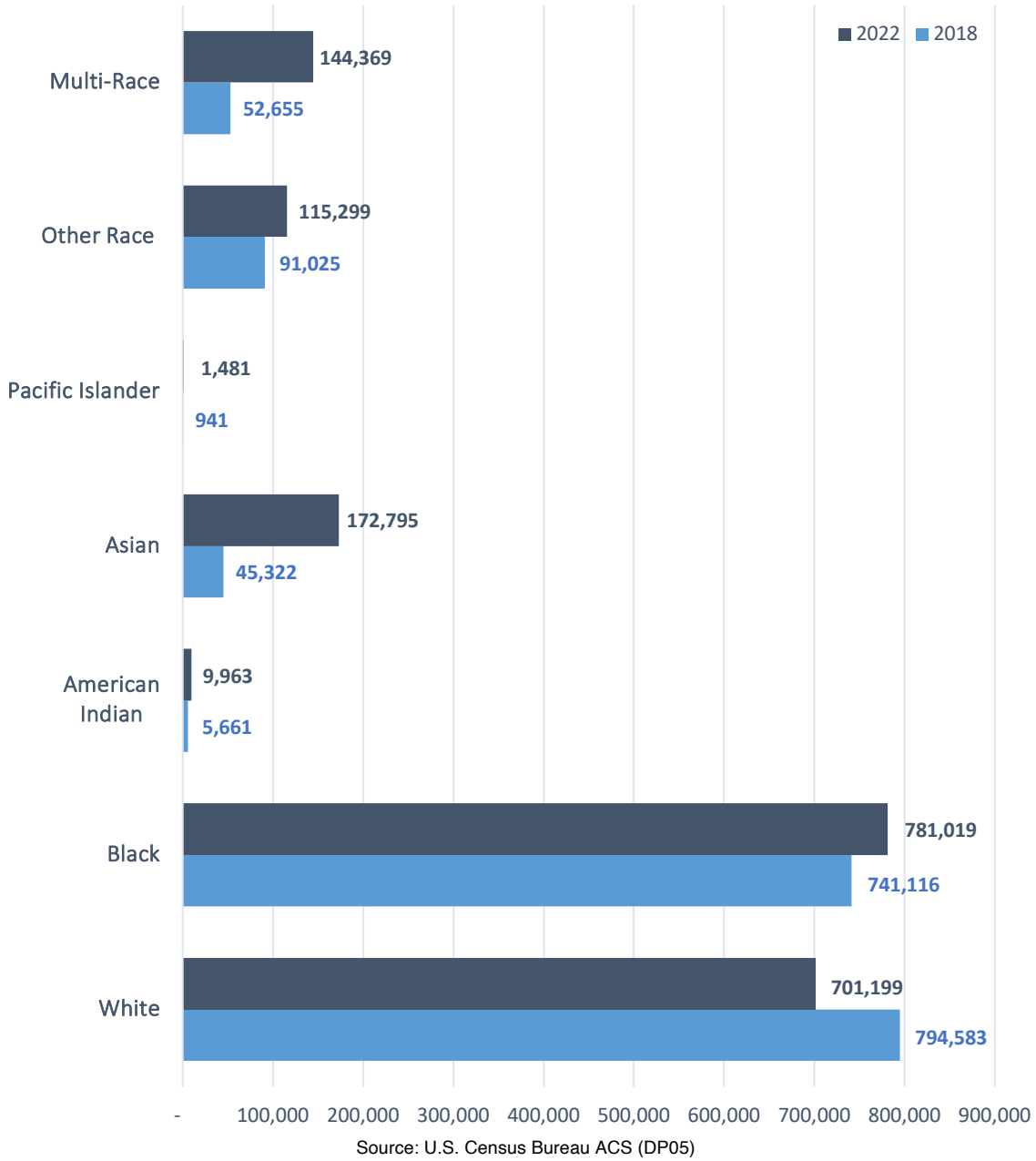
Chart 3: Gender Population Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

Race:
Race, as a social construct, is an integral aspect to consider in poverty studies due to its impact on an individual's access to resources, opportunities, and equitable treatment within societies. Historically and contemporaneously, racial groups have experienced varying degrees of systemic advantage or disadvantage, which can be reflected in differing poverty levels. Establishing a baseline of racial groups among all residents allows researchers to discern patterns and disparities in socio-economic conditions that are often closely linked with race. This baseline is critical for developing targeted interventions and policies aimed at reducing poverty and promoting community-wide economic opportunity. By understanding the racial demographics of a population, stakeholders can better identify and serve the specific needs of each racial group, ensuring that poverty alleviation efforts are both fair and effective.

Chart 4: Racial Profile (2018/2022)



Source: U.S. Census Bureau ACS (DP05)

The most predominant racial demographic in the region was individuals who identify as Black (40.55%), followed by White (36.40%), and much smaller populations of Asians (8.97%), Multi-Racial (7.50%), Other Race (5.99%), American Indian (0.52%), and Pacific Islander (0.08%).

Over the past five years, large increases were noted among those who identified as Asian (+281.26%), Multi-Racial (+174.18%), and American Indian (+75.99%), and Pacific Islander (+57.39%). Smaller increases were found among those identifying as Other Race (+26.67%) and Black/African American (+5.38%). The only racial group experiencing decreases was White (-11.75%).

Among the 6,9,963 individuals identifying as American Indian, only 454 identified with a specific tribe. Among these, 373 stated that they were Cherokee, 28 were Chippewa, 40 were Navajo, and 13 were Sioux.

Residents identifying as Asian primarily reported association with Asian Indian (42,437), Korean (30,999), Vietnamese (29,413), Chinese (25,953), Filipino (5,003), and Japanese (2,803). An estimated 36,187 associated with another, unspecified racial group.

Pacific Islanders were noted as being Chamorro (373), Native Hawaiian (143), and Samoan (78). The largest portion, 887, identified with another, unspecified sub-population.

An estimated 144,369 residents stated that they were Multi-Racial, with the largest potion being White and Some Other Race (63,470), followed by White and Black (23,830), White and Asian (12,582), Black and Some Other Race (10,736), White and American Indian (6,219), and Black and American Indian (3,328).

Table 4: Racial Profile by County (2022)

Area	*White*	Black	Am Indian	Asian	Pac Isl	Multi-Race	Other
DeKalb	242,659	401,702	5,129	47,369	561	44,443	19,346
Gwinnett	377,684	272,622	4,487	122,104	643	89,106	91,331
Newton	50,829	53,072	92	1,619	0	5,556	2,130
Rockdale	30,027	53,623	255	1,703	277	5,264	2,492
REGION	**701,199**	**781,019**	**9,963**	**172,795**	**1,481**	**144,369**	**115,299**
STATE	**5,820,019**	**3,373,948**	**37,920**	**465,487**	**7,411**	**638,881**	**378,659**
NATION	**218,123,424**	**41,288,572**	**2,786,431**	**19,112,979**	**624,863**	**29,142,780**	**20,018,544**

Source: U.S. Census Bureau ACS (DP05)

Diversity is a vital element associated with a healthy community, as it fosters a rich tapestry of ideas, perspectives, and experiences. Diverse backgrounds and viewpoints promote innovation and creativity, as people with different problem-solving skills and approaches collaborate, leading to more effective and holistic solutions. In assessing community diversity, one useful metric is the Simpson's Diversity Index, which quantifies the variety and distribution of different demographic groups within a population. This index ranges from 0 to 1, with higher values indicating greater diversity.

In our analysis, the Simpson's Diversity Index for the region's racial demographics is approximately 0.687. This value suggests a relatively high level of diversity within the community, reflecting a balanced distribution of racial groups. Comparing this index to the national level, where the Simpson's Diversity Index is approximately 0.534, highlights the region's higher level of diversity compared to the broader United States.

Ethnicity:
Ethnicity refers to the shared cultural, linguistic, or ancestral characteristics of a group of people. Unlike race, which is associated primarily with physical traits, ethnicity is tied more to social identity and is often linked with a common geographic origin, shared language, religious traditions, and historical experiences. Within the scope of this project, we will narrow our focus to the Hispanic ethnic group, a diverse collection of individuals with cultural and linguistic bonds to Spain and Latin American countries. The Hispanic identity is not defined by race but by a rich tapestry of cultural heritage, including language, traditions, and a collective history. The term Hispanic is inclusive of a vast array of cultural backgrounds and nationalities, each with distinct traditions and historical narratives.

Table 5: Hispanic Population Trend (2018/2022)

Area	2018 #	2018 %	2022 #	2022%
DeKalb	63,736	8.58%	64,968	8.53%
Gwinnett	188,608	20.90%	209,070	21.82%
Newton	5,733	5.38%	7,145	6.31%
Rockdale	9,038	10.15%	9,789	10.45%
REGION	**267,115**	**14.51%**	**290,972**	**15.11%**
State	**968,463**	**9.40%**	**1,078,457**	**10.06%**
Nation	**57,517,935**	**17.81%**	**61,755,866**	**18.65%**

Source: U.S. Census Bureau ACS (DP05)

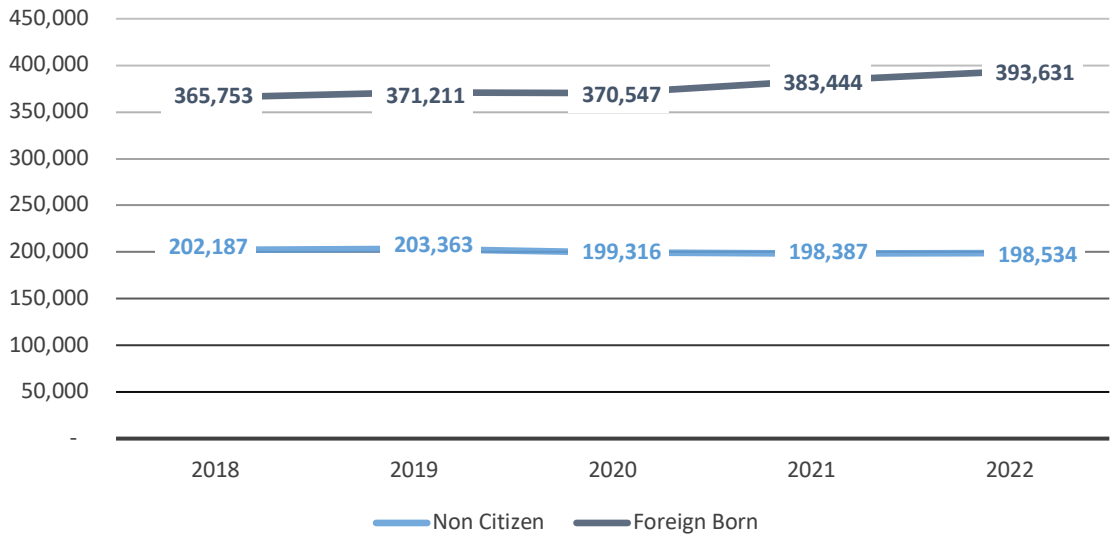
According to the United States Census Bureau, an estimated 290,972 local residents reported having a Hispanic ethnicity. This represents 15.11% of the region's total population, an increase of 4.14% from the data published five years ago. This increase was slower than the both the state (+7.02%) and national (+4.72%) trends.

Increases in this demographic throughout the community could influence various sectors, including education, healthcare, and public services, necessitating a strategic approach to ensure that these services are culturally responsive and linguistically accessible.

Among those who consider themselves Hispanic, nearly half (47.59%) reported being from Mexico, with smaller portions being Puerto Rican (7.59%), Cuban (3.11%), or associated with another, unspecified Latino country (41.71%).

Foreign-Born Residents:
Tracking data on foreign-born individuals can be crucial in poverty research due to the unique socio-economic challenges these groups may face. Foreign-born residents, including non-citizens, often encounter systemic barriers to employment, healthcare, and education, which can predispose them to higher poverty rates. Their legal status may limit access to public assistance programs and influence their ability to secure stable, well-paying jobs. Additionally, language barriers and unfamiliarity with the host country's cultural and legal systems can further complicate their integration into the economy. By examining the circumstances of these populations, researchers can better understand the full landscape of poverty, identify the specific needs of these vulnerable groups, and inform policies aimed at reducing poverty among all residents.

Chart 5: Foreign Born Resident and Citizenship Trends (2018-2022)



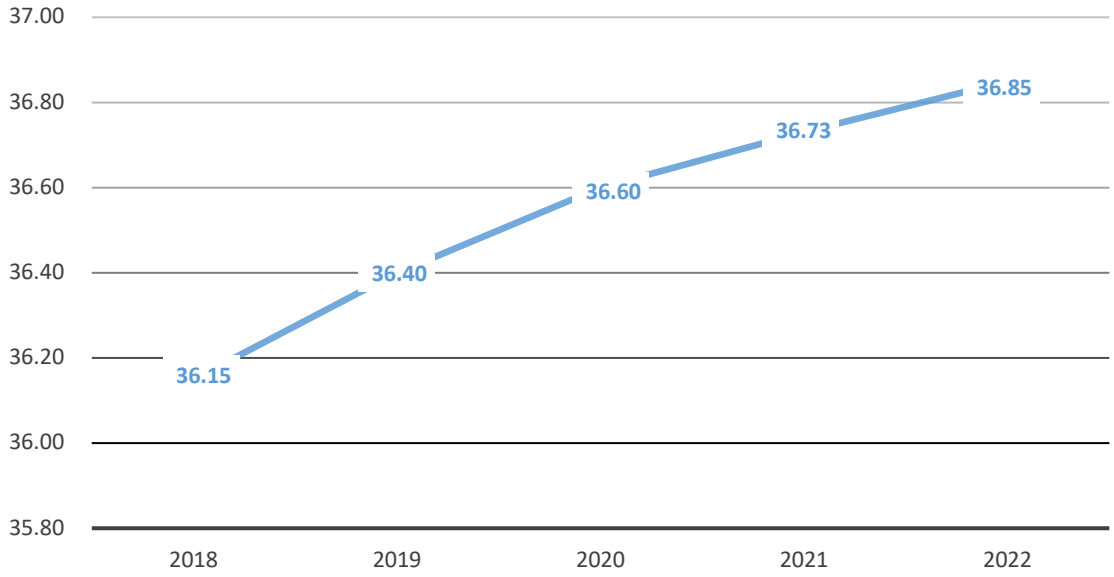
Source: U.S. Census Bureau ACS (DP02)

The most recently published data indicates that an estimated 393,631 local residents, representing 20.44% of the regional population, were born in a country outside of the United States. For comparison purposes, this is significantly higher than the state (10.44%) and national (13.68%) rates. Among the region's foreign-born population, slightly more than half (50.44%) were noted as being non-citizens.

Although the number of foreign-born residents has increased by 7.62% over the past five years, the number of non-citizens has decreased by 1.81%.

Age:
Age, as a demographic variable, plays a critical role in understanding the dynamics of a population. It can provide insights into the stage of life most residents are in, which in turn affects housing, education, employment, and healthcare needs. Median age serves as a pivotal starting point, offering a snapshot of the population's age distribution by pinpointing the exact middle of the age spectrum.

Chart 6: Regional Median Age Trend (2018-2022)



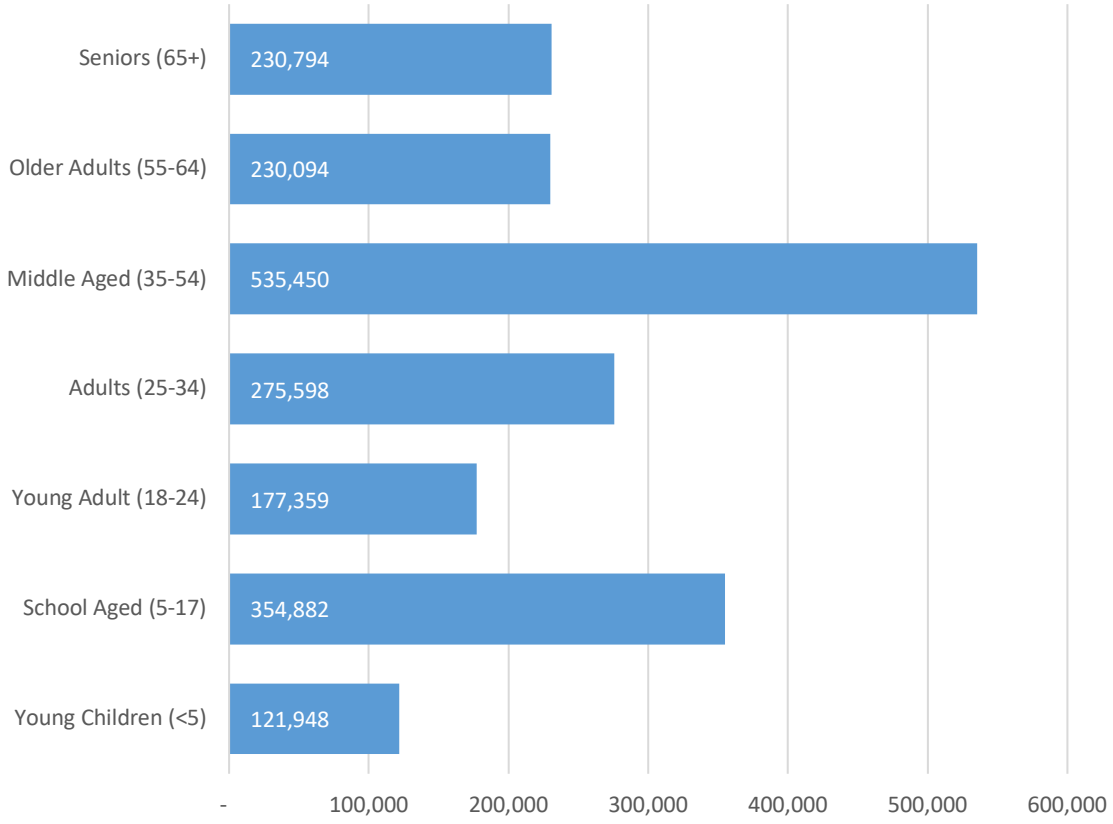
Source: U.S. Census Bureau ACS (DP05)

From 2018 to 2022, the median age in the region has increased by 1.94%, from 36.15 to 36.85 years. This incremental rise in the median age suggests a gradually aging population. Such a trend can have several potential impacts on the region:

- **Healthcare**: A rising median age could lead to increased demand for healthcare services, particularly those related to age-related conditions. Healthcare providers and policymakers may need to adjust resources to meet these demands.
- **Workforce:** An aging population might indicate a shift in the workforce, potentially leading to labor shortages in certain sectors. This could necessitate retraining programs for older workers or efforts to attract younger individuals to the region.
- **Housing:** There may be a growing need for housing options that cater to older adults, including downsizing opportunities and assisted living facilities.
- **Social Services:** As the population ages, there could be a greater need for social services that support senior living, including transportation, community engagement programs, and in-home care services.
- **Economic Impact**: The consumption patterns may shift as the population ages, affecting local economies and possibly prompting a change in the types of businesses and services that are successful in the region.

Based on the provided data, the region seems to have a reasonably balanced age demographic, with a notable concentration of individuals in the middle-age bracket. The largest segment of the population falls within the 35 to 54 age range, accounting for more than one quarter (27.80%) of the population, which may suggest a mature workforce and a stable residential community. The presence of school-aged children as the second largest group indicates a significant number of families with children, which often correlates with an active educational system and community services geared toward youth. Senior citizens and older adults together form nearly a quarter (23.93%) of the population, which points to an established elderly community, possibly indicating a need for healthcare and senior services.

Chart 7: Population by Age Group (2022)

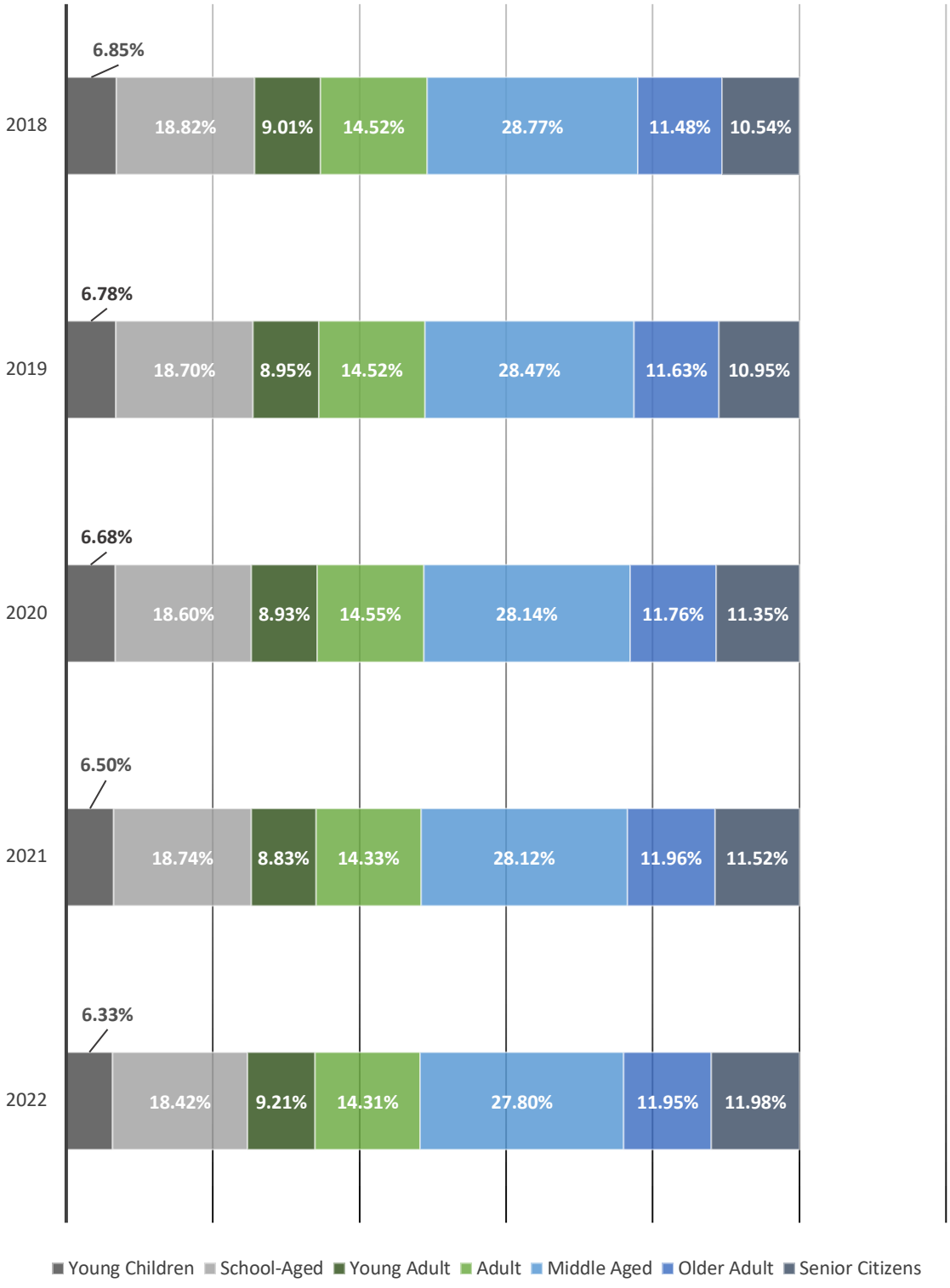


Source: U.S. Census Bureau ACS (DP05)

Overall, the age distribution points towards a diverse community, with a strong presence of working-age individuals that could be contributing to a stable local economy, alongside vibrant youth and substantial elderly populations that add to the social fabric of the region.

The age group percentage trend from 2018 to 2022 suggests the region has a population that is gradually aging, with seniors increasing and children decreasing. This data for each age group will be evaluated in more depth on the following pages.

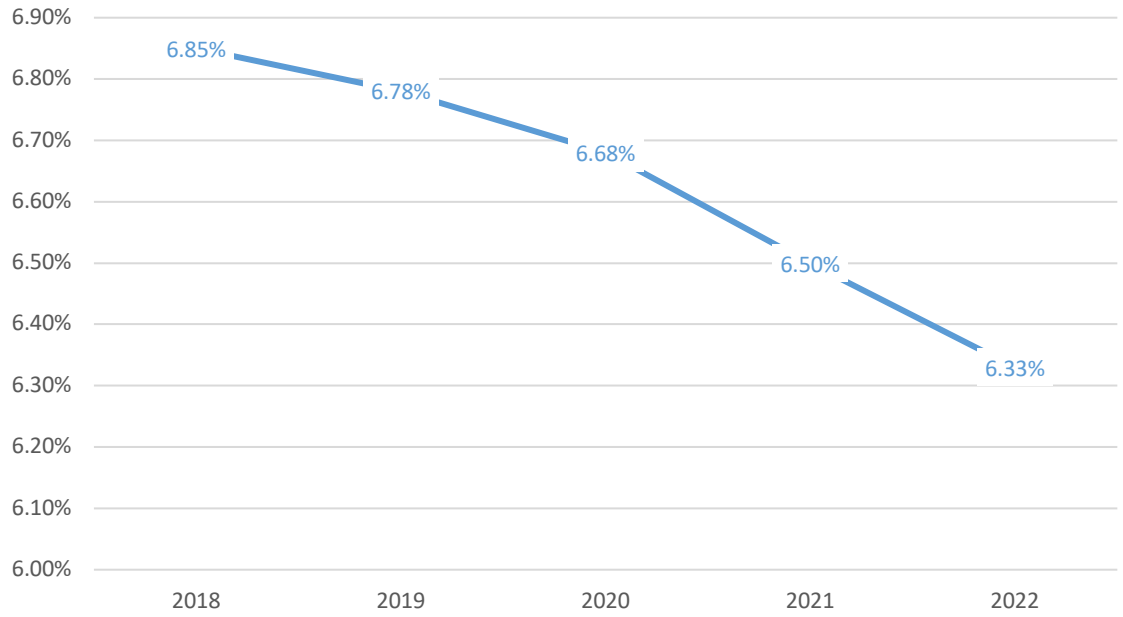
Chart 8: Age Group Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

Young Children (Age 0-4):
Between the ages of birth and four years of age, young children experience rapid cognitive, emotional, and physical development, laying the foundation for future learning and growth. This crucial stage is marked by significant milestones in language acquisition, social skills, and early education, making it a vital period for nurturing and structured learning experiences.

Chart 9: Young Children Population Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

Over the past five years, the young child population has decreased by 7.59% as a share of the total population. This rate is faster than the rates on both the state (-6.91%) and national (-6.51%) levels.

Table 6: Young Children Population Trend by County (2018/2022)

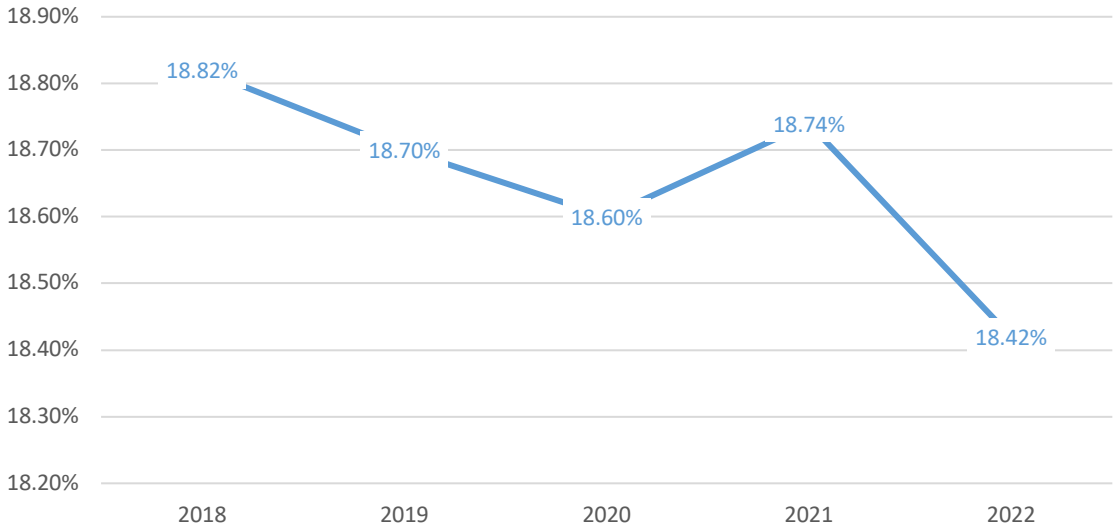
Area	2018 #	2018 %	2022 #	2022 %	Change
DeKalb	52,982	7.13%	50,323	6.61%	-7.29%
Gwinnett	61,066	6.77%	59,588	6.22%	-8.12%
Newton	6,895	6.47%	6,907	6.10%	-5.72%
Rockdale	5,245	5.89%	5,130	5.48%	-6.96%
REGION	**126,188**	**6.85%**	**121,948**	**6.33%**	**-7.59%**
STATE	**655,810**	**6.37%**	**635,299**	**5.93%**	**-6.91%**
NATION	**19,836,850**	**6.14%**	**19,004,925**	**5.74%**	**-6.51%**

Source: U.S. Census Bureau ACS (DP05)

The most significant change in the region was identified in Gwinnett County, at -8.12%. This was followed by DeKalb County (-7.29%), Rockdale (-6.96%), and Newton (-5.72%).

School-Aged Children (Age 5-17):
As children transition from early childhood into their school-age years, they enter a dynamic period of growth that encompasses educational, social, and emotional development. Between the ages of five and eighteen, children embark on a journey through primary and secondary education, where they not only acquire fundamental academic knowledge but also develop critical thinking, problem-solving skills, and a sense of identity. It's a transformative era where peer relationships, extracurricular activities, and increasing autonomy play pivotal roles in shaping their understanding of the world and their place within it. This age group's experiences in the classroom and beyond are instrumental in laying the groundwork for their future endeavors in higher education, vocational pursuits, and personal development.

Chart 10: School-Aged Children Population Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP 05)

An estimated 354,882 school-aged children reside in the region served by the organization. After a decrease of 1.17% between 2018 and 2020, the number of school-aged children as a portion of the total population increased by 0.75% in 2021, followed by a one-year decrease of 1.71% in 2022. Overall, the percentage of school-aged children as a portion of the total population decreased by 2.13% during the five-year period evaluated. This rate is slower than the state (-2.29%) and national (-1.62%) averages.

Table 7: School-Aged Children Population Trend by County (2018/2022)

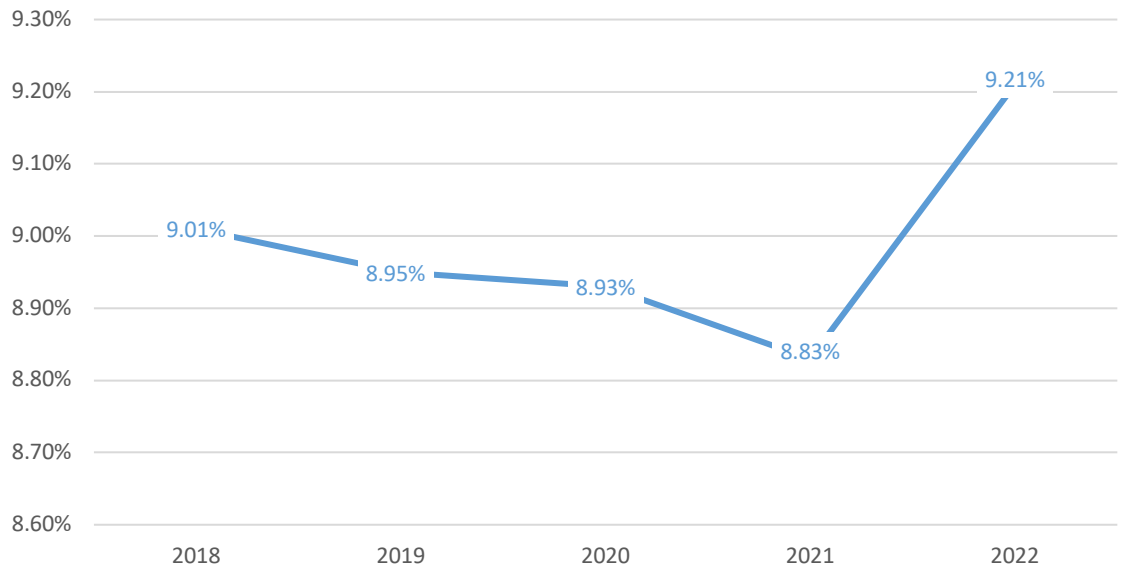
Area	2018 #	2018 %	2022 #	2022 %	Change
DeKalb	121,284	16.32%	122,689	16.12%	-1.23%
Gwinnett	186,385	20.66%	192,798	20.13%	-2.57%
Newton	21,512	20.20%	22,028	19.44%	-3.76%
Rockdale	17,318	19.46%	17,367	18.55%	-4.68%
REGION	**346,499**	**18.82%**	**354,882**	**18.42%**	**-2.13%**
STATE	**1,845,485**	**17.92%**	**1,877,246**	**17.51%**	**-2.29%**
NATION	**53,716,390**	**16.64%**	**54,208,780**	**16.37%**	**-1.62%**

Source: U.S. Census Bureau ACS (DP05)

On a county level, the greatest decrease was noted in Rockdale County (-4.68%), followed by Newton (-3.76%), Gwinnett (-2.57%), and Dekalb (-1.23%) counties.

Young Adults (Age 18-24):
The years from eighteen to twenty-four are a significant transition phase from adolescence to full-fledged adulthood. Young adults navigate complex life decisions regarding their careers, higher education, and personal relationships. During this pivotal time, they often experience newfound independence, leaving the structured environment of school for the wider arenas of university life or the workforce. It's a time characterized by exploration, self-discovery, and the initial steps towards long-term life goals. The choices made and the experiences gained in this life stage can profoundly shape their future paths and identities.

Chart 11: Young Adult Population Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

Data indicates that there are an estimated 177,359 young adults residing in the evaluated region, representing 9.21% of the total population, an increase of 2.22%. It should be noted that the increase primarily occurred in 2022 (+4.30%) after a decrease of 2.00% between 2018 and 2021.

Table 8: Young Adult Population Trend by County (2018/2022)

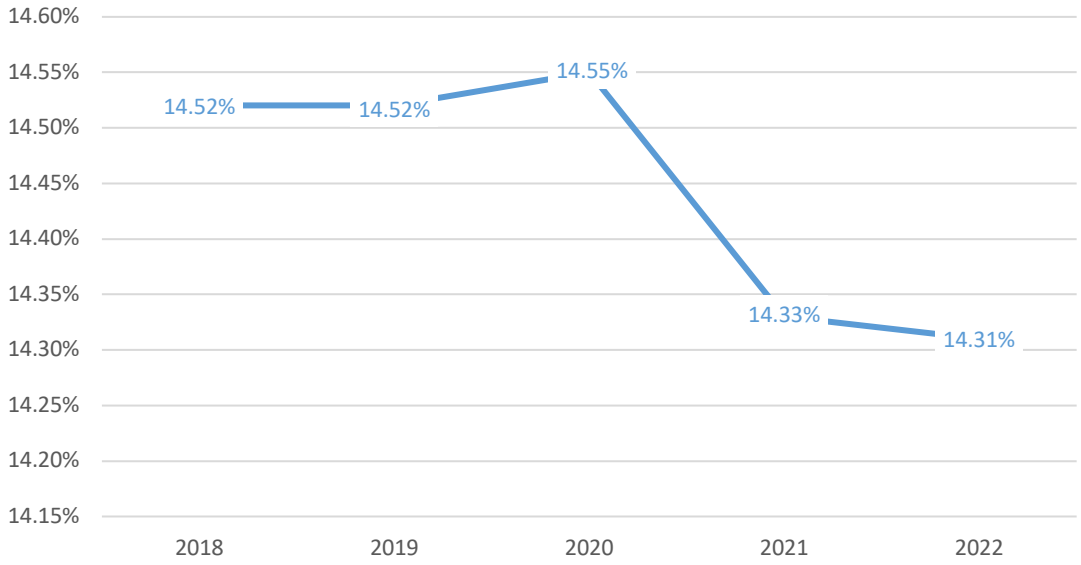
Area	2018 #	2018 %	2022 #	2022 %	Change
DeKalb	65,502	8.81%	65,629	8.62%	-2.16%
Gwinnett	82,008	9.09%	91,895	9.59%	+5.50%
Newton	10,099	9.48%	11,274	9.95%	+4.96%
Rockdale	8,310	9.33%	8,561	9.14%	-2.04%
REGION	**165,919**	**9.01%**	**177,359**	**9.21%**	**+2.22%**
STATE	**1,009,642**	**9.80%**	**1,051,160**	**9.80%**	**+/-0**
NATION	**30,903,719**	**9.57%**	**31,282,896**	**9.45%**	**-1.25%**

Source: U.S. Census Bureau ACS (DP05)

While increases were also noted in Gwinnett (+5.50%) and Newton (+4.96%) counties, decreases were observed in DeKalb (-2.16%) and Rockdale (-2.04%) counties, as well as on a national level (-1.25%). No change was observed on a state level.

Adults (Age 25-34):
This decade in life typically involves significant milestones for many individuals, such as advancing in careers, forming long-term partnerships, or starting families. Adults in this age group are often settling into their chosen career paths, looking for stability, and making strides towards financial independence. This period is also marked by a deeper understanding of personal and professional relationships, as well as the impact of their contributions to society. The focus often shifts towards building a sustainable future and laying down roots, whether through homeownership, community involvement, or starting a family.

Chart 12: Adult Population Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

The overall change in this demographic during the period evaluated was noted as being -1.45%. After a somewhat stable population count between 2018 and 2020, the number of adults in this age range decreased by 1.51% in 2021, with an additional decline of 0.14% in 2022. For comparison purposes, the state (-0.22%) and national (-0.65%) changes experienced in this population group were mild during the same period of time.

Table 9: Adult Population Trend by County (2018/2022)

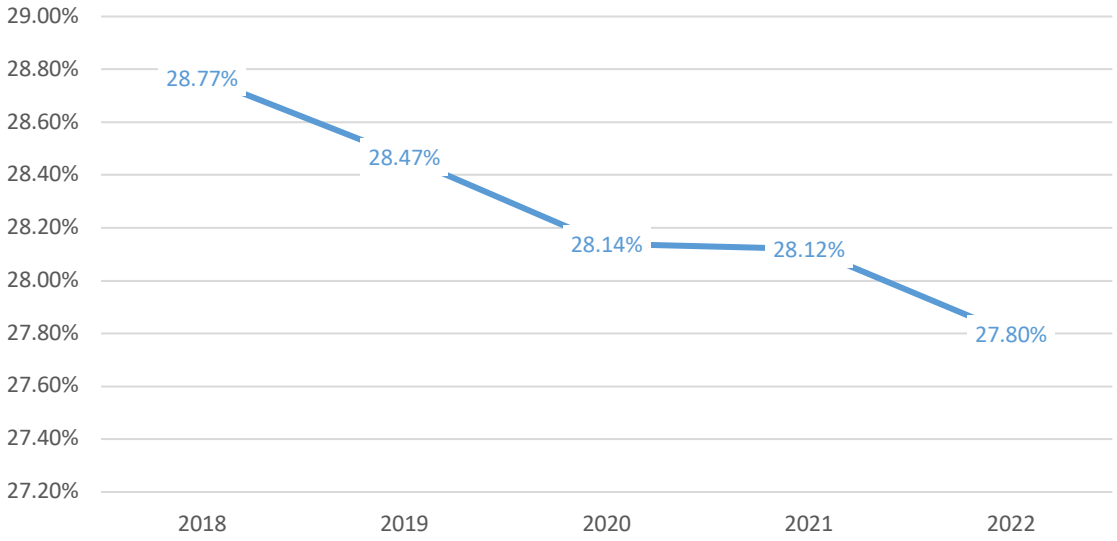
Area	2018 #	2018 %	2022 #	2022 %	Change
DeKalb	124,266	16.72%	125,600	16.50%	-1.32%
Gwinnett	120,126	13.31%	124,234	12.97%	-2.55%
Newton	12,981	12.19%	14,401	12.71%	+4.27%
Rockdale	9,917	11.14%	11,363	12.13%	-8.89%
REGION	**267,290**	**14.52%**	**275,598**	**14.31%**	**-1.45%**
STATE	**1,419,784**	**13.79%**	**1,475,136**	**13.76%**	**-0.22%**
NATION	**44,567,976**	**13.80%**	**45,388,153**	**13.71%**	**-0.65%**

Source: U.S. Census Bureau ACS (DP05)

The largest decrease in the region was found in Rockdale County (-8.89%), followed by Gwinnett (-2.55%) and DeKalb (-1.32%) counties. An increase was experienced among this population in Newton County (+4.27%).

Middle-Aged Adults (35-54):
Often considered the backbone of the workforce and family units, middle-aged adults carry substantial responsibilities in supporting younger and older generations alike. This stage is characterized by peak career development, leadership roles, and the nurturing of families. It's a time where the balance between personal aspirations and commitments to others is finely managed. Health and well-being often come to the forefront, as the effects of aging become more apparent. Community engagement, financial planning for retirement, and supporting children's education or caring for aging parents are common themes in this life stage.

Chart 13: Middle-Aged Adult Population Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

Data indicates that there are approximately 535,450 individuals in this age group throughout the region, representing more than one-quarter (27.80%) of the total population. Over the past five years, this age group has decreased by 3.37%, a faster pace than the state (-2.52%) and national (-1.82%) averages.

Table 10: Middle Aged Adult Population Trend by County (2018/2022)

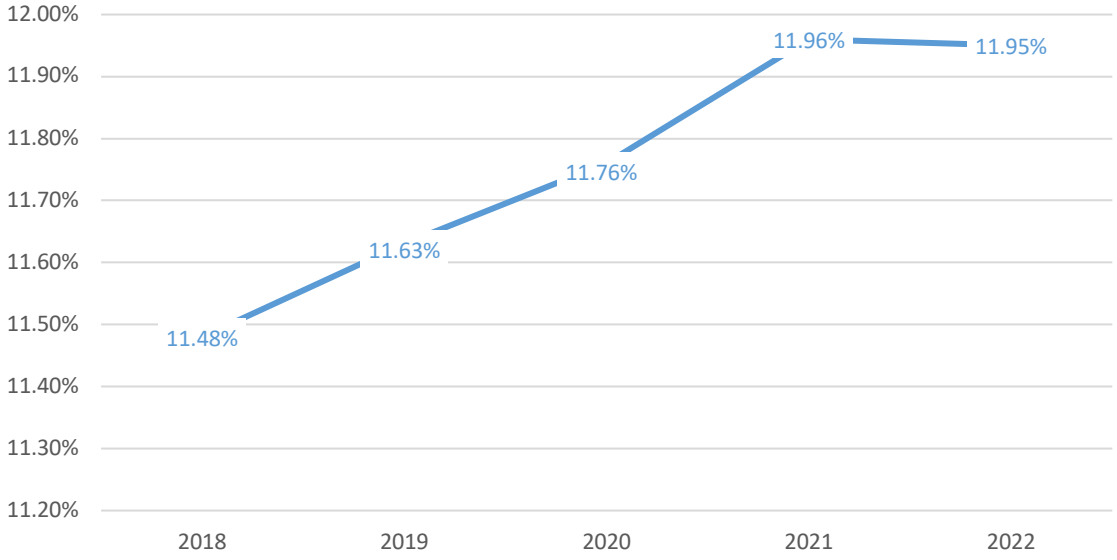
Area	2018 #	2018 %	2022 #	2022 %	Change
DeKalb	207,280	27.88%	207,175	27.22%	-2.37%
Gwinnett	268,394	29.75%	274,192	28.62%	-3.80%
Newton	29,734	27.92%	30,143	26.61%	-4.69%
Rockdale	24,297	27.30%	23,940	25.57%	-6.34%
REGION	**529,705**	**28.77%**	**535,450**	**27.80%**	**-3.37%**
STATE	**2,779,806**	**27.00%**	**2,821,598**	**26.32%**	**-2.52%**
NATION	**83,352,783**	**25.81%**	**83,897,716**	**25.34%**	**-1.82%**

Source: U.S. Census Bureau ACS (DP05)

On a county level, the largest decrease was identified in Rockdale County (-6.34%), followed by Newton (-4.69%), Gwinnett (-3.80%), and DeKalb (-2.37%).

Older Adults (55-64):
As they approach the traditional retirement age, older adults begin to contemplate life beyond the workforce. It's a phase often associated with reflection on past achievements and the anticipation of a slower-paced life, with a focus on leisure, personal interests, and family. For many, it's also a time to plan earnestly for retirement, both financially and emotionally, and to make adjustments to living arrangements that accommodate changing mobility or health concerns. Despite these changes, many continue to contribute significantly to the workforce, their families, and society, offering experience, wisdom, and mentorship.

Chart 14: Older Adult Population Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

The most recent Census data indicates that there are 230,094 older adults in the region served by the organization. After an increase of 4.18% between 2018 and 2021, the portion of the population in this age group decreased by 0.08% in 2022. Overall, the older adult population has increased by 4.09% during the period evaluated, which is faster than the increase on state (+2.75) and national (+0.55%) levels.

Table 11: Older Adult Population Trend by County (2018/2022)

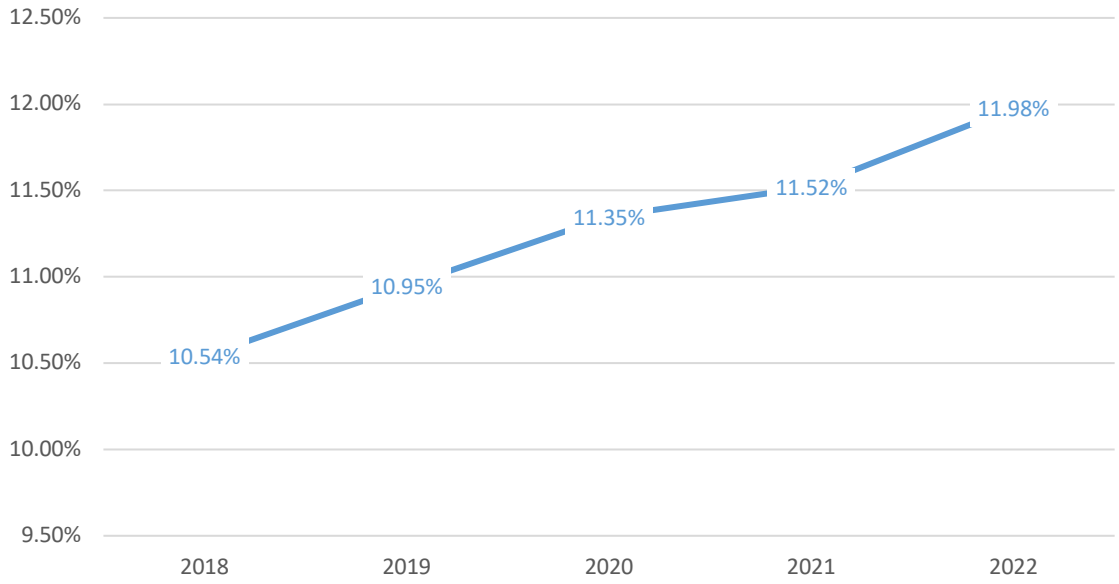
Area	*2018 #*	2018 %	2022 #	2022%	Change
DeKalb	86,302	11.61%	89,993	11.82%	+1.81%
Gwinnett	100,877	11.18%	113,358	11.83%	+5.81%
Newton	12,158	11.42%	13,593	12.00%	+5.08%
Rockdale	11,968	13.45%	13,150	14.04%	+4.39%
REGION	**211,305**	**11.48%**	**230,094**	**11.95%**	**+4.09%**
STATE	**1,234,668**	**11.99%**	**1,321,441**	**12.32%**	**+2.75%**
NATION	**41,286,731**	**12.79%**	**42,577,475**	**12.86%**	**+0.55%**

Source: U.S. Census Bureau ACS (DP05)

On a county level, the largest increase was noted in Gwinnett County (+5.81%), followed by Newton (+5.08%), Rockdale (+4.39%), and DeKalb (+1.81%) counties.

Senior Citizens (Age 65+):
Entering the senior years, individuals often experience significant lifestyle changes with retirement, changes in health status, and shifts in social dynamics. It's a period that can bring more leisure time and opportunities for travel, hobbies, and community involvement. Seniors may also face challenges such as managing health care needs, maintaining independence, and adjusting to the loss of peers and partners. This age group contributes to society through volunteerism, the transmission of knowledge and cultural values, and as active participants in the lives of their families and communities. Their well-being is influenced by the degree of their social support, economic security, and the quality of health care services they receive.

Chart 15: Senior Citizen Population Percentage Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP05)

At the regional level, there is a notable increase of +13.66% in the percentage of senior citizens relative to the total population. This is significantly faster than the changes experienced on state (+9.44%) and national (+8.39%) levels.

Table 12: Senior Citizen Population Trend by County (2018/2022)

Area	2018 #	2018 %	2022 #	2022 %	Change
DeKalb	85,571	11.51%	99,800	13.11%	+13.90%
Gwinnett	83,442	9.25%	101,912	10.64%	+15.03%
Newton	13,118	12.32%	14,952	13.20%	+7.14%
Rockdale	11,956	13.43%	14,130	15.09%	+12.36%
REGION	**194,087**	**10.54%**	**230,794**	**11.98%**	**+13.66%**
STATE	**1,352,289**	**13.13%**	**1,540,445**	**14.37%**	**+9.44%**
NATION	**49,238,581**	**15.25%**	**54,737,648**	**16.53%**	**+8.39%**

Source: U.S. Census Bureau ACS (DP05)

The largest increases were noted in Gwinnett (+15.03%), followed by DeKalb (+13.90%), Rockdale (+12.36%), and Newton (+7.14%) counties.

Households:
A household, as defined by the Census Bureau, consists of all the people who occupy a housing unit, whether they are related or not. This unit could be a house, an apartment, a mobile home, or even a group of rooms or a single room that is intended as separate living quarters.

The data from 2022 indicates that there are approximately 675,847 households within the region, an increase of 6.66% from 2018's estimate of 633,628. It should be noted that the region's rate of change is higher than the state (+6.39%) and national (+5.02%) averages.

The largest concentration of the region's households was found in Gwinnett County (47.05%), which also experienced the largest growth (+10.13%) during the evaluated period.

Table 13: Number of Households (2018/2022)

Area	2018	2022	Change #	Change %
DeKalb	277,757	284,730	+6,973	+2.51%
Gwinnett	288,724	317,971	+29,247	+10.13%
Newton	36,626	39,906	+3,280	+8.96%
Rockdale	30,521	33,240	+2,719	+8.91%
REGION	**633,628**	**675,847**	**+42,219**	**+6.66%**
STATE	**3,709,488**	**3,946,490**	**+237,002**	**+6.39%**
NATION	**119,730,128**	**125,736,353**	**+6,006,225**	**+5.02%**

Source: U.S. Census Bureau ACS (DP02)

The average household size for the region is 2.81, which is slightly larger than the state (2.65) and national (2.57) averages. Over the past five years, the household size had decreased by 2.43%, which is faster than decreases on state (-2.21%) and national (-2.28%) levels.

Table 14: Average Household Size Comparison (2018/2022)

Area	2018	2022	Change %
DeKalb	2.63	2.63	+/-0%
Gwinnett	3.11	3.00	-3.54%
Newton	2.87	2.81	-2.09%
Rockdale	2.89	2.79	-3.46%
REGION	**2.88**	**2.81**	**-2.43%**
STATE	**2.71**	**2.65**	**-2.21%**
NATION	**2.63**	**2.57**	**-2.28%**

Source: U.S. Census Bureau ACS (DP02)

The fastest decreases were identified in Gwinnett (-3.54%) and Rockdale (-3.46%) counties, followed by Newton (-2.09%). No change was documented in DeKalb County.

Household Profiles:
In the analysis of poverty, understanding household composition is critical because different household types often have varying levels of vulnerability and resource needs. It should be noted that this dataset is only available for the past four years.

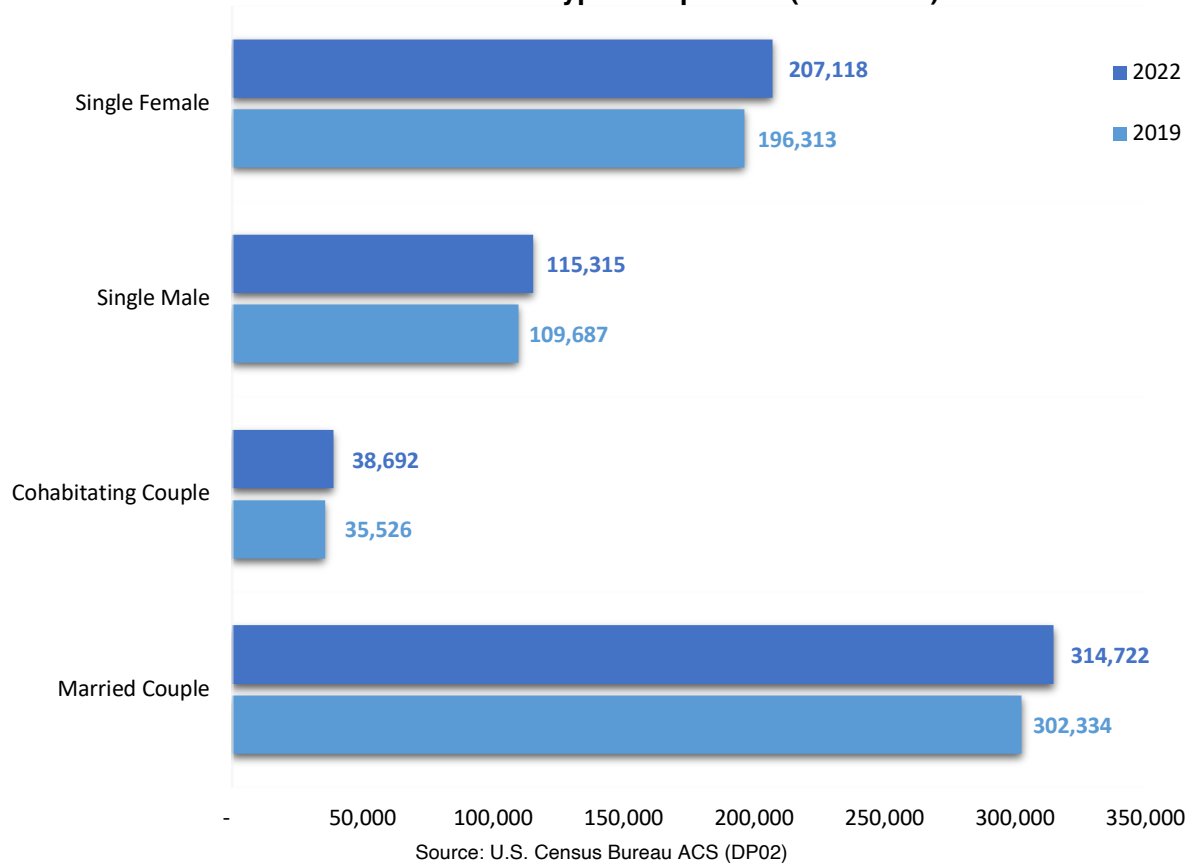
Single Female-Headed Households refer to homes where a female adult is the sole provider and decision-maker. In 2022, data indicates that 207,118 of the region's households fit this classification, an increase of 5.50% since 2019.

Single Male-Headed Households have grown to 115,315, marking an increase of 5.13% from 2019. Though they typically have lower poverty rates than single female-headed households, the growth in this segment might signal a need for targeted social programs specifically for single fathers.

Cohabitating Couple Households consist of two adults living together in a partnership without being married. This group experienced an increase of 8.91% to the current count of 38,692. This group can often share resources and may have dual incomes, which can offer more economic stability than single-adult households. However, they might not have the same legal protections or benefits as married couples.

Married Couple Households are composed of two adults legally bound by marriage. This is the largest grouping, at 314,722 households. Over the past five years, these households have increased by 4.10%.

Chart 16: Household Type Comparison (2019/2022)



Source: U.S. Census Bureau ACS (DP02)

Households with Children:
Among the various household types in the region, an estimated 235,039 were noted as including at least one child under the age of 18. This is an increase of 0.78% for the entire region, which is slower than the state (+1.13%) and national (+1.02%).

Table 15: Households with Children by County (2018/2022)

Area	2018	2022	Change #	Change %
DeKalb	84,645	80,795	-3,850	-4.55%
Gwinnett	122,999	127,809	+4,810	+3.91%
Newton	14,171	15,070	+899	+6.34%
Rockdale	11,415	11,365	-50	-0.44%
REGION	**233,230**	**235,039**	**+1,809**	**+0.78%**
STATE	**1,265,807**	**1,280,171**	**+14,364**	**+1.13%**
NATION	**37,574,321**	**37,956,469**	**+382,148**	**+1.02%**

Source: U.S. Census Bureau ACS (DP02)

While increases were observed in Newton (+6.34%) and Gwinnett (+3.91%) counties, decreases were noted in DeKalb (-4.55%) and Rockdale (-0.44%) counties.

Households with Seniors

During the same time period, the number of households containing seniors increased from 135,323 to 165,241 (+22.11%). This rate of change is faster than both the state (+15.65%) and national (+12.73%) averages.

Table 16: Households with Seniors by County (2018/2022)

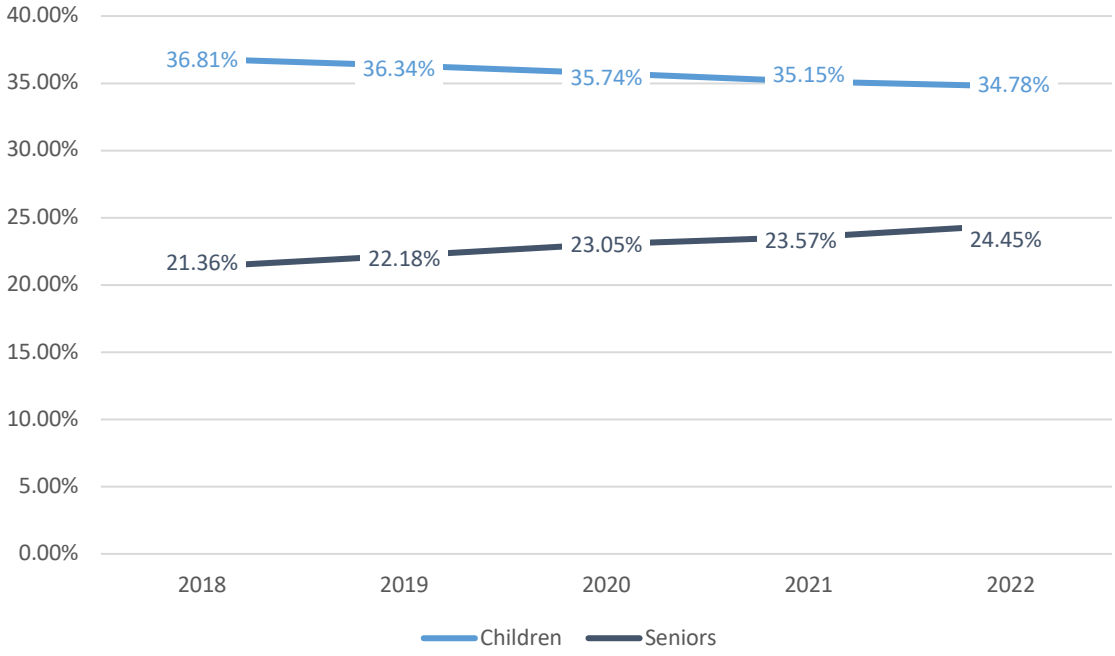
Area	2018	2022	Change #	Change %
DeKalb	61,268	72,241	+10973	+17.91%
Gwinnett	56,638	71,264	+14626	+25.82%
Newton	9,276	11,426	+2150	+23.18%
Rockdale	8,141	10,310	+2169	+26.64%
REGION	**135,323**	**165,241**	**+29918**	**+22.11%**
STATE	**951,751**	**1,100,720**	**+148,969**	**+15.65%**
NATION	**34,395,751**	**38,775,247**	**4,379,496**	**+12.73%**

Source: U.S. Census Bureau ACS (DP02)

The largest increases were observed in Rockdale (+26.64%), followed by Gwinnett (+25.82%), Newton (+23.18%), and DeKalb (17.91%) counties.

To further demonstrate the scope of the community's aging population, the chart below provides the percentages of households in the region with children as compared to those with senior citizens. Between 2018 and 2022, the gap between the number of households with children and the number of households with seniors has decreased by 33.14%.

Chart 17: HH with Seniors vs. HH with Children Trend Comparison (2018-2022)



Source: U.S. Census Bureau (DP02)

According to predictive analytics based on the trends observed from 2018 to 2022, it is projected that the percentage of households with seniors will surpass the percentage of households with children by the year 2028. This projection signifies a significant demographic shift within the community, indicating a gradual aging of the population. Factors contributing to this trend may include longer life expectancy, declining birth rates, and the aging of the baby boomer generation. As households with seniors become more prevalent, it underscores the importance of planning for the evolving needs of an aging population, including healthcare services, social support systems, and housing accommodations tailored to older adults. Community organizations and policymakers should proactively address these demographic changes to ensure the well-being and quality of life for residents across all age groups.

2024 COMMUNITY ASSESSMENT

General Observations:
The demographic composition of the region exhibits a vibrant and evolving community landscape. The total population of approximately 1,926,125 is spread across 675,847 households, maintaining an average household size of 2.81. Between 2021 and 2022, the population witnessed a net increase of 14,741. This growth was fueled both by natural increases, with births outpacing deaths by 10,747, and migratory gains, as the area saw 3,994 more individuals moving in than moving out.

The community is diverse in its demographic makeup; females make up 51.69% of the population, indicating a slight female majority. Racially, 40.55% of residents identify as Black and 36.80% as White, with a significant 89.94% of the population being non-Hispanic. The median age is relatively young at 36.85 years. The foreign-born demographic is notably substantial, representing 20.44% of the total population or 393,631 individuals, which has increased by 7.62% over the past five years. However, the proportion of non-citizens has slightly decreased by 1.81% within the same timeframe, now standing at 198,534.

A shifting trend in household dynamics is evident, with projections indicating that by 2028, households with seniors will surpass those with children. This anticipated change suggests an aging demographic that will necessitate enhanced healthcare services, senior-friendly housing options, and tailored community support systems to accommodate an older population. Such demographic shifts underline the need for strategic planning and adaptive public policies to ensure that community infrastructure and services evolve in line with these changing needs, fostering a supportive environment for all residents.

Income & Poverty

Introduction

Poverty is simply defined as a state or condition in which a person lacks sufficient financial resources to maintain a minimum standard of living. This insufficiency hinders an individual's ability to secure adequate housing, access clean water, procure healthy food, and receive necessary healthcare. Determining poverty rates involves quantifying this deficit relative to established benchmarks. For the context of this project, these rates will be assessed based on the poverty threshold set by the United States government. This monetary benchmark varies depending on family size and composition to objectively measure and compare the economic well-being of community members.

Poverty Rates

The poverty rate is a statistical measure used to assess the prevalence of poverty within a specific population or geographic area. It quantifies the proportion of individuals or households living below a certain income threshold, known as the poverty line.

During the most recently completed Census study, an estimated 222,091 members of the region's population, or 12.07% of all individuals, were identified as having incomes below 100% of the national poverty level. It should be noted that this rate is lower than both the state (13.50%) and national (12.50%) averages.

Table 17: Poverty Rates by County (2022)

Area	Poverty Count	Poverty Rate
DeKalb	100,326	13.40%
Gwinnett	96,291	10.10%
Newton	14,935	13.40%
Rockdale	10,539	11.40%
REGION	**222,091**	**12.07%**
STATE	**1,415,573**	**13.53%**
NATION	**40,521,584**	**12.53%**

Source: U.S. Census Bureau ACS (S1701)

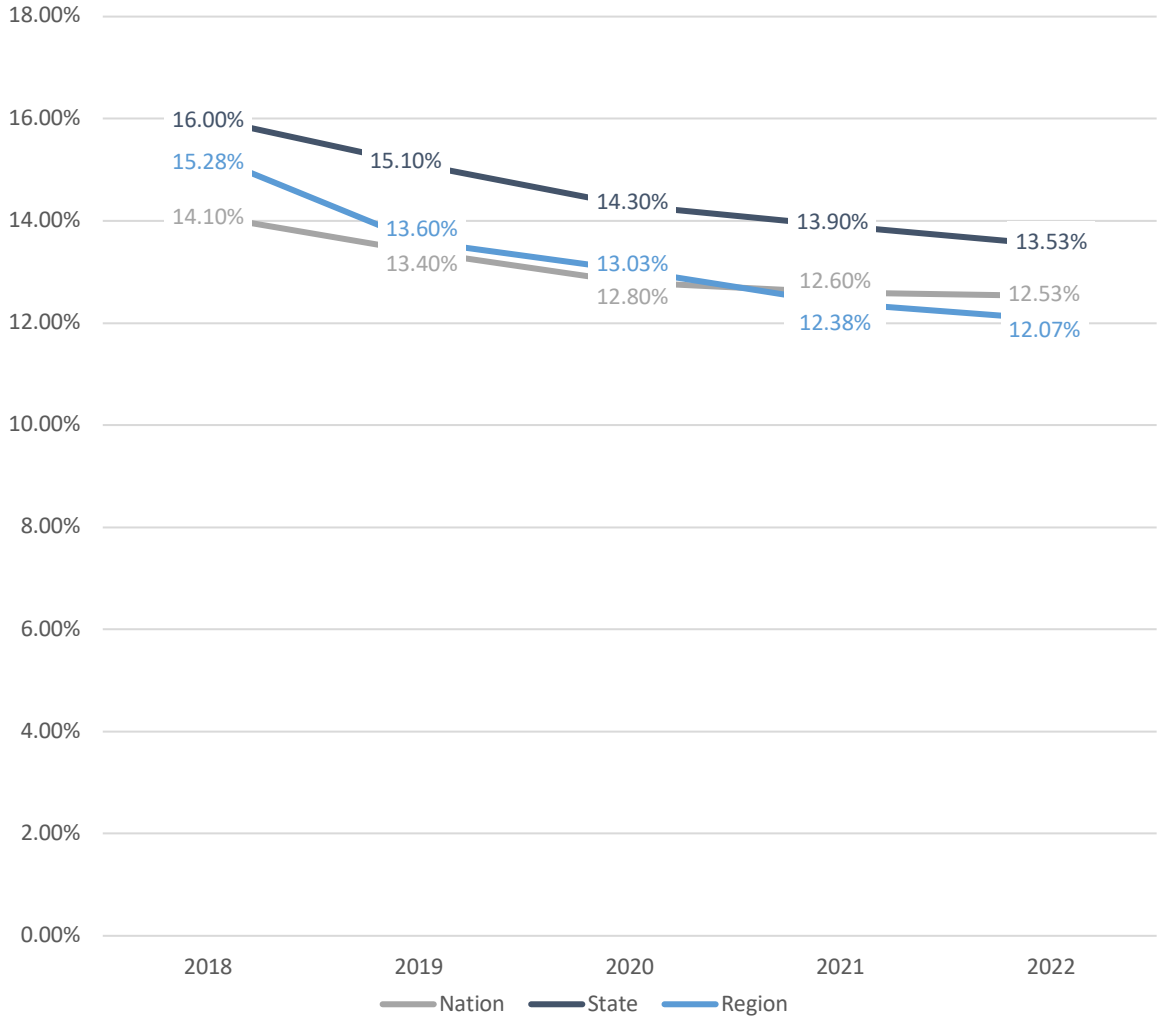
When considering the individual communities in the region, both DeKalb and Newton counties had rates of 13.40%, with slightly lower rates being experienced in Rockdale (11.40%) and Gwinnett (10.10%) counties.

Poverty Trend

Monitoring poverty trends is essential, not only for grasping the current economic challenges, but also for forecasting future conditions. Historic data on poverty can reveal patterns and trajectories, enabling predictions on whether economic circumstances for low-income populations are likely to improve or worsen. By analyzing these trends, we can proactively address potential issues, adapt strategies to emerging needs, and set in motion effective solutions aimed at reducing poverty. This foresight is critical for shaping policies and programs designed to improve economic stability and uplift those in need.

Between 2018 and 2022, the regional poverty rate experienced a net decrease of 21.01%, lowering from 15.28% to 12.07%. Not only has the region's poverty rate now lower than the national poverty rate, but the rate of improvement was also faster during the observed period.

Chart 18: Poverty Rate Trend (2018—2022)



Source: U.S. Census Bureau ACS (S1701)

When considering the specific counties in the region, the most significant improvements were found in Newton (-25.14%) and Rockdale (-25.00%) counties, followed by DeKalb (-19.28%) and Gwinnett (-11.40%) counties.

Table 18: Poverty Rate Trends by County (2018-2022)

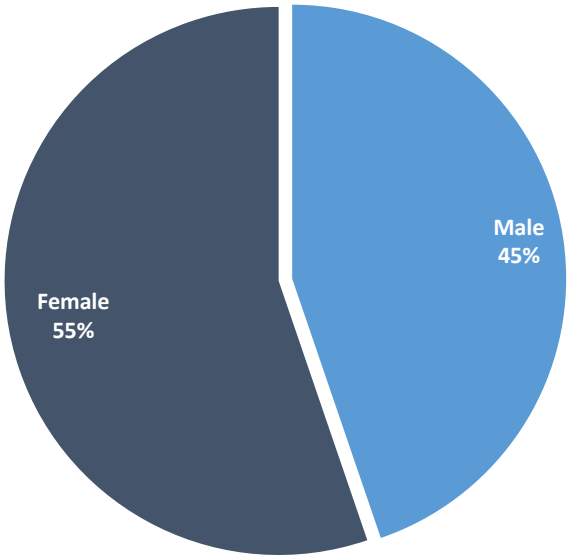
Area	2018	2019	2020	2021	2022	Change %
DeKalb	16.60%	15.10%	14.40%	13.50%	13.40%	-19.28%
Gwinnett	11.40%	10.70%	10.50%	10.50%	10.10%	-11.40%
Newton	17.90%	15.50%	15.00%	13.60%	13.40%	-25.14%
Rockdale	15.20%	13.10%	12.20%	11.90%	11.40%	-25.00%
REGION	**15.28%**	**13.60%**	**13.03%**	**12.38%**	**12.07%**	**-21.01%**
STATE	**16.00%**	**15.10%**	**14.30%**	**13.90%**	**13.53%**	**-15.44%**
NATION	**14.10%**	**13.40%**	**12.80%**	**12.60%**	**12.53%**	**-11.13%**

Source: U.S. Census Bureau ACS (S1701)

Poverty by Gender

Evaluating poverty rates by gender is essential because it sheds light on gender-specific barriers that contribute to economic disparities. This knowledge can inform the development of targeted policies and programs that address unique challenges faced by men and women, such as wage gaps, employment opportunities, access to education, and healthcare. Recognizing these nuances ensures that anti-poverty strategies are equitable and effective, promoting gender equality and empowering all individuals to achieve financial stability and self-sufficiency.

Chart 19: Percentage of Population in Poverty by Gender (2022)



Source: U.S. Census Bureau ACS (S1701)

In the area served by the organization, more than half of the individuals living in poverty (55.24%) identified as female, representing 122,692 individuals. The remaining 99,399 residents (44.76%) identified as male.

Table 19: Gender Poverty Rate Trends by County (2022)

Area	LI Male #	LI Male %	LI Female #	LI Female %
DeKalb	44,113	12.40%	56,213	14.30%
Gwinnett	44,384	9.50%	51,907	10.70%
Newton	6,646	12.60%	8,289	14.10%
Rockdale	4,256	9.70%	6,283	12.90%
REGION	**99,399**	**11.05%**	**122,692**	**13.00%**
STATE	**620,973**	**12.20%**	**794,600**	**14.80%**
NATION	**18,109,332**	**11.30%**	**22,412,252**	**13.70%**

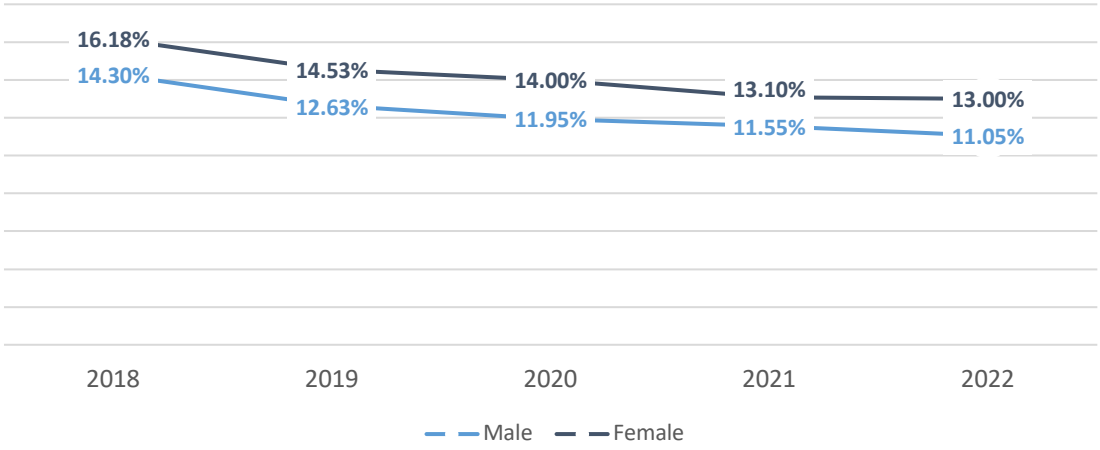
Source: U.S. Census Bureau ACS (S1701)

Not only did females account for the largest portion of the low-income population, but females also were more likely (13.00%) to live in poverty than males (11.05%). These gender disparities highlight critical areas for intervention, especially in supporting female-centric economic opportunities and addressing systemic barriers that disproportionately affect women. The data underscores the importance of tailored, community-specific strategies to combat poverty, with an emphasis on addressing the unique challenges faced by women in these communities.

Poverty Trend by Gender

The trend analysis of poverty rates by gender from 2018 to 2022 reveals significant disparities in the rate of improvement between males and females within the region. Over this period, the poverty rate for males exhibited a notable improvement of 22.73%, declining from 14.30% to 11.05%. While significant improvements were also experienced by females during the same period (-19.65%), it should be noted that the rate of improvement is lower than their male counterparts.

Chart 20: Gender Poverty Rate Trend (2018-2022)



Source: U.S. Census Bureau ACS (S1701)

In 2018, the gap between the poverty rates of males and females was 1.88 percentage points. However, by 2022, this gap had expanded to 1.95 percentage points, representing an increase of 3.72%. This widening gap underscores the disproportionate impact of poverty on females within the region, despite overall improvements in poverty rates for both genders.

Several factors could contribute to this widening gap, including disparities in employment opportunities, wages, access to education, and social support systems. Addressing these underlying factors is crucial to narrowing the gender poverty gap and promoting greater economic equity within the region. By implementing targeted interventions and policies aimed at addressing the specific needs and challenges faced by females, policymakers and stakeholders can work towards creating a more inclusive and equitable society where individuals of all genders have equal opportunities to thrive.

Poverty by Age

Understanding poverty rates by age is crucial as it highlights the distinct economic vulnerabilities experienced at different life stages. Young children in poverty may face developmental challenges, while working-age adults may struggle with employment stability. Elderly individuals may confront inadequate retirement resources, affecting their quality of life. By analyzing poverty through an age-based lens, interventions can be designed to provide age-appropriate support, such as child nutrition programs, job training for adults, and income security for seniors, ensuring that each age group receives the focused assistance they need to overcome the specific challenges of poverty they face.

The poverty data by age group highlights significant insights into the socioeconomic landscape affecting various age demographics. Notably, children under five years old are the most likely to live in poverty, with a poverty rate of 18.43% in 2022, down from 27.32% in 2018. This age group often faces higher poverty rates due to factors such as the costs associated with early childhood care, the potential lower earning power of their parents who might be early in their careers, and other socio-economic challenges that can impact young families.

Table 20: Poverty Data by Age Group Comparison (2018/2022)

Age	2018		2022		Change	
Group	Count	Rate	Count	Rate	Count	Rate
<5	29,052	27.32%	20,150	18.43%	-8,902	-32.54%
5-17	68,908	22.07%	56,864	16.48%	-12,044	-25.33%
18-34	64,985	17.23%	57,433	13.55%	-7,552	-21.36%
35-64	74,754	11.25%	67,654	9.60%	-7,100	-14.67%
65+	17,228	8.30%	19,990	8.22%	+2,762	-0.96%

Source: U.S. Census Bureau (S1701)

Analyzing the change between 2018 and 2022 across all age groups reveals varying degrees of improvement in poverty rates. The most significant reduction in poverty occurred among children under five, with a 32.54% decrease in their poverty rate, followed by children aged 5-17, who saw a 25.33% reduction. These changes indicate effective strides in addressing child poverty, potentially through enhanced social programs, childcare support measures, or economic improvements benefiting families.

For adults, those aged 18-34 experienced a 21.36% decrease in poverty rates, while the 35-64 age bracket saw a 14.67% reduction. Although positive, these changes highlight that adults in their working years continue to face economic challenges, though there is noticeable progress.

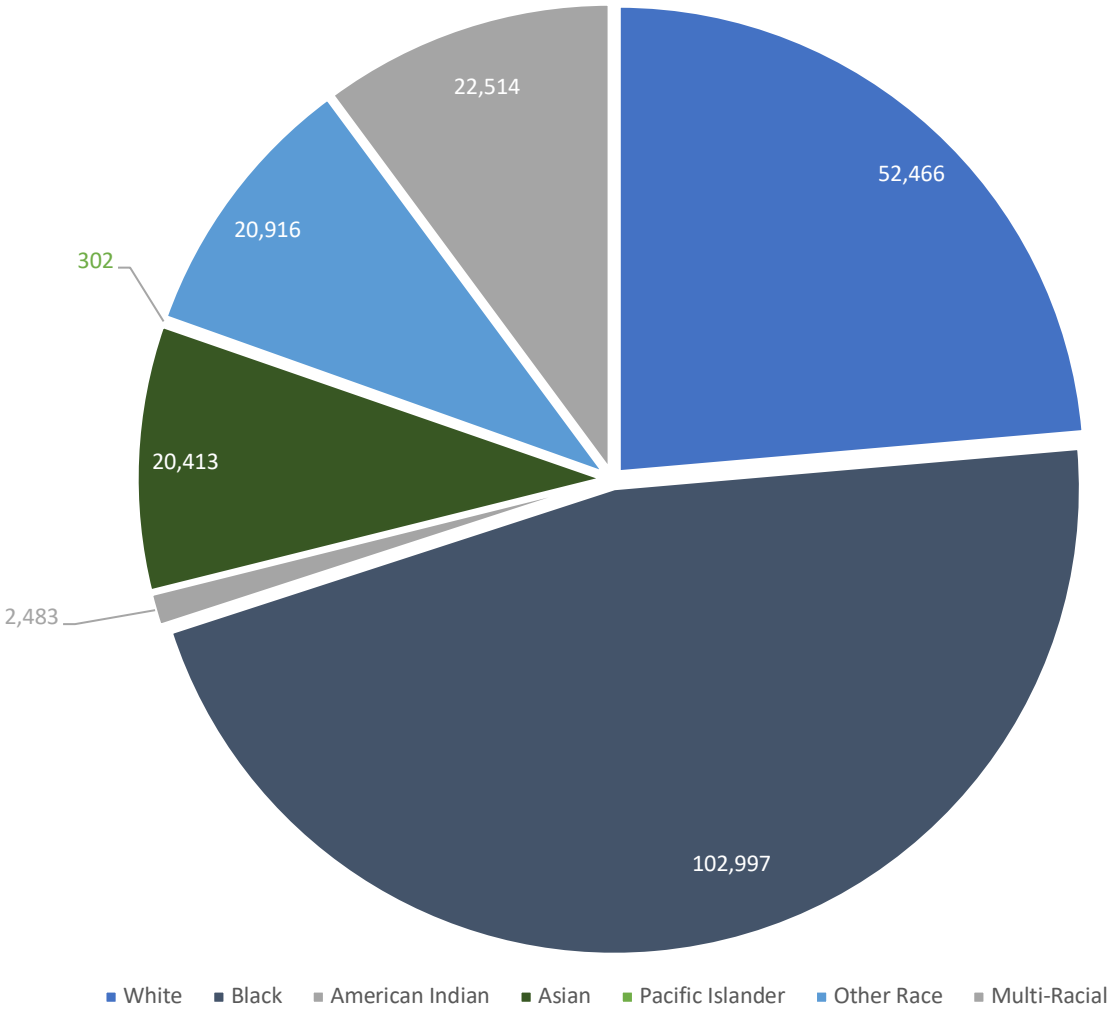
Although the poverty rate for individuals aged 65 and over decreased slightly from 8.30% in 2018 to 8.22% in 2022, the actual number of seniors living in poverty increased by 2,762 individuals. This scenario, where the rate decreases even though the number increases, can occur when the overall population of the age group grows faster than the number of new poverty cases within it. The relative financial stability of this group, despite the growth in poverty numbers, can often be attributed to sources of fixed income such as retirement savings, Social Security benefits, and Medicare, which provide a buffer against falling into poverty. However, as the demographic data suggests, as the senior population increases, community resources and policies must adapt to address the growing needs and ensure the well-being of this vulnerable segment of the population.

Poverty by Race

Analyzing poverty rates by race reveals the systemic inequalities that contribute to disparate economic conditions among different racial groups. This data can guide targeted policies and programs to address the specific barriers that minority populations often face, including discrimination, unequal access to education, and job opportunities. It helps in ensuring that efforts to alleviate poverty are equitable and effective, promoting social justice and economic inclusivity.

The poverty data indicates that Black individuals represent the largest proportion affected, accounting for 46.38% of those in poverty. This high percentage suggests that Black residents face substantial barriers such as discrimination in job markets, educational disparities, and access to housing, all of which contribute to higher poverty rates.

Chart 21: Population in Poverty by Race (2022)



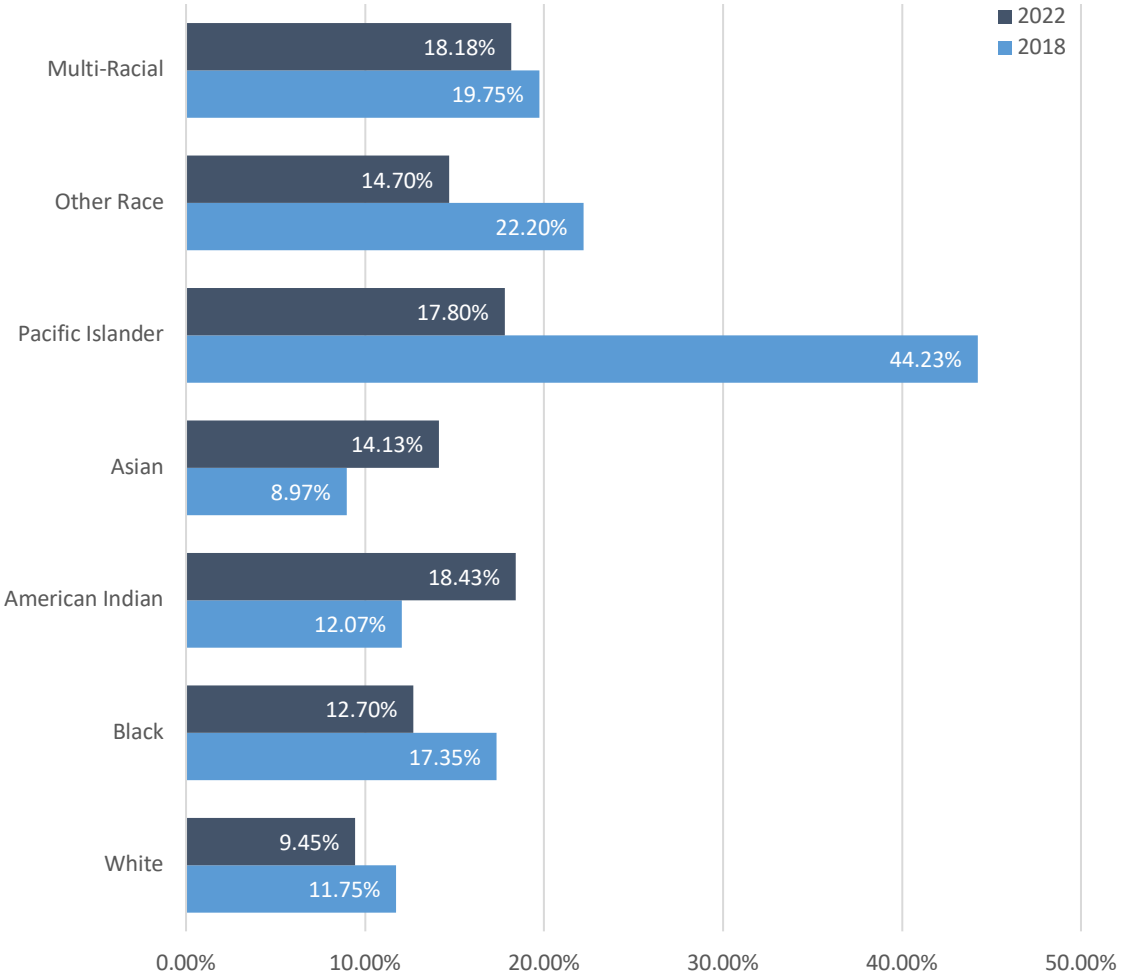
Source: U.S. Census Bureau (S1701)

White residents, making up 23.62% of those in poverty, show a relatively lower proportion, which may reflect better access to economic resources and opportunities, although they still represent a significant portion of the impoverished population. Asian and Multi-Racial communities are also a considerable proportion of those residents living in poverty, at 9.19% and 10.14% respectively, pointing to diverse challenges including possible language barriers, immigration status complications, and cultural discrimination which may hinder their economic integration and access to services.

Smaller groups such as American Indians and Pacific Islanders, making up 1.12% and 0.14% of the population in poverty respectively, although numerically smaller, often endure profound poverty due to historical marginalization and limited access to crucial resources. The category labeled 'Other Race', 9.42% of those in poverty, includes individuals who may face unique challenges due to their ambiguous racial categorization, affecting their social and economic recognition and inclusion.

This detailed examination of poverty across different racial groups underscores the importance of implementing equitable and culturally sensitive interventions. By addressing the specific needs and barriers faced by each group, community leaders and policymakers can develop more effective strategies that promote social justice and economic inclusivity, ensuring that all community members have the opportunity to improve their living standards and escape the cycle of poverty.

Chart 22: Average Poverty Rates by Race (2018/2022)



Source: U.S. Census Bureau (S1701)

The analysis of poverty rates by race within the region shows a marked variation in economic vulnerability across different racial groups. American Indians experienced the highest poverty rate at 18.43%, illustrating significant economic challenges within this community. This was closely followed by individuals identifying as Multi-Racial, who faced a poverty rate of 18.18%, and Pacific Islanders, with a rate of 17.80%. Those categorized as 'Other Race' encountered a poverty rate of 14.70%, while Asians reported a poverty rate of 14.13%. Blacks experienced comparatively lower rates of poverty at 12.70%, suggesting relatively better but still challenging economic conditions. Whites had the lowest rate of poverty at 9.45%, indicating a lesser likelihood of living in poverty compared to other racial groups. These figures underline the economic disparities that exist among racial lines and highlight the need for targeted interventions to address the specific barriers contributing to these differences.

Between 2018 and 2022, the poverty rates among various racial groups witnessed diverse trends, indicating shifts in economic conditions that impacted these communities differently. The most significant improvement was observed in the Pacific Islander group, where the poverty rate drastically decreased by 59.76%, reflecting substantial progress in economic conditions for this demographic. The Black community also saw a notable decrease in poverty, with their rates dropping by 26.80%, suggesting improvements in access to resources or opportunities. Other Race

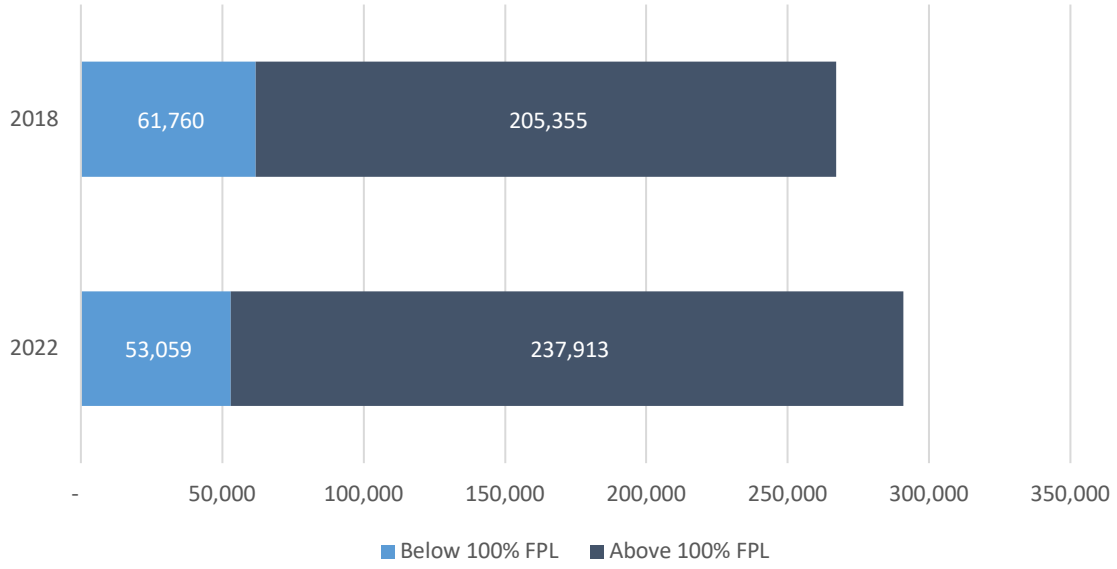
categories also experienced a significant reduction in poverty, with a decrease of 33.78% over the four years.

Conversely, the Asian and American Indian communities faced increasing poverty rates, with Asians seeing the highest increase of 57.53%, and American Indians experiencing a rise of 52.69% in their poverty rates. These increases indicate worsening conditions or emerging challenges that need targeted support and interventions. The Multi-Racial group saw a modest decrease of 7.95% in their poverty rates, showing slight improvement. Whites experienced a 19.57% decrease in poverty, which indicates a considerable reduction but also underscores the varying degrees of economic stability across different racial groups. These shifts highlight the ongoing need for policies that address both the systemic and emergent issues contributing to racial disparities in poverty.

Poverty by Ethnicity

In 2022, within the low-income Hispanic community, 53,059 individuals were living below the 100% Federal Poverty Level (FPL) out of a total population of 290,972, marking a poverty rate of 18.24%. This segment of the population often faces unique challenges including higher rates of uninsured individuals, language barriers that can complicate access to services and information, and higher instances of employment in low-wage jobs that do not offer health benefits or stable income. Studies have shown that these factors contribute significantly to the persistence of poverty within Hispanic communities, leading to disparities in health outcomes and educational achievements.

Chart 23: Low-Income Hispanic Count Comparison (2018/2022)



Source: U.S. Census Bureau (S1701)

From 2018 to 2022, the number of low-income Hispanics below the FPL decreased from 61,760 to 53,059, and the poverty rate reduced by 21.11%, from 23.12% to 18.24%. This decline suggests some improvement in socio-economic conditions, possibly due to better employment opportunities, increased access to educational programs, and community outreach initiatives aimed at integrating and supporting the Hispanic population. However, despite these gains, the high poverty rate still highlights the need for ongoing targeted support to address systemic barriers and enhance economic equity.

Poverty Benchmarks

An estimated 96,512 local residents were noted as living in deep poverty. Defined by incomes below 50% of the nationally recognized poverty level, these individuals are known to live in a state of severe economic hardship where residents struggle to afford basic necessities. Over the past five years, the number of individuals in this income category decreased by 11,264, or 10.45%.

Table 21: Poverty Benchmark Count Comparison (2018/2022)

Poverty %	2018	2022	Change
< 50%	107,776	96,512	-10.45%
50 - 100%	147,151	125,579	-14.66%
100 - 125%	87,044	78,997	-9.24%
125 - 150%	85,208	87,047	+2.16%
150 - 200%	176,648	162,215	-8.10%

Source: U.S. Census Bureau (S1701)

Data indicates that there are 222,091 local residents living in poverty at the present time, 125,579 of which (56.54%) are above 50%. Over the past five years, the number of community members in this poverty bracket has decreased by 14.66%.

Overall, there are an estimated 301,088 residents in the region that qualify for CSBG based on the traditional 125% level, with 550,350 qualifying based on the 200% level that has been utilized since the award of CARES funding.

Table 22: Poverty Benchmarks by County (2022)

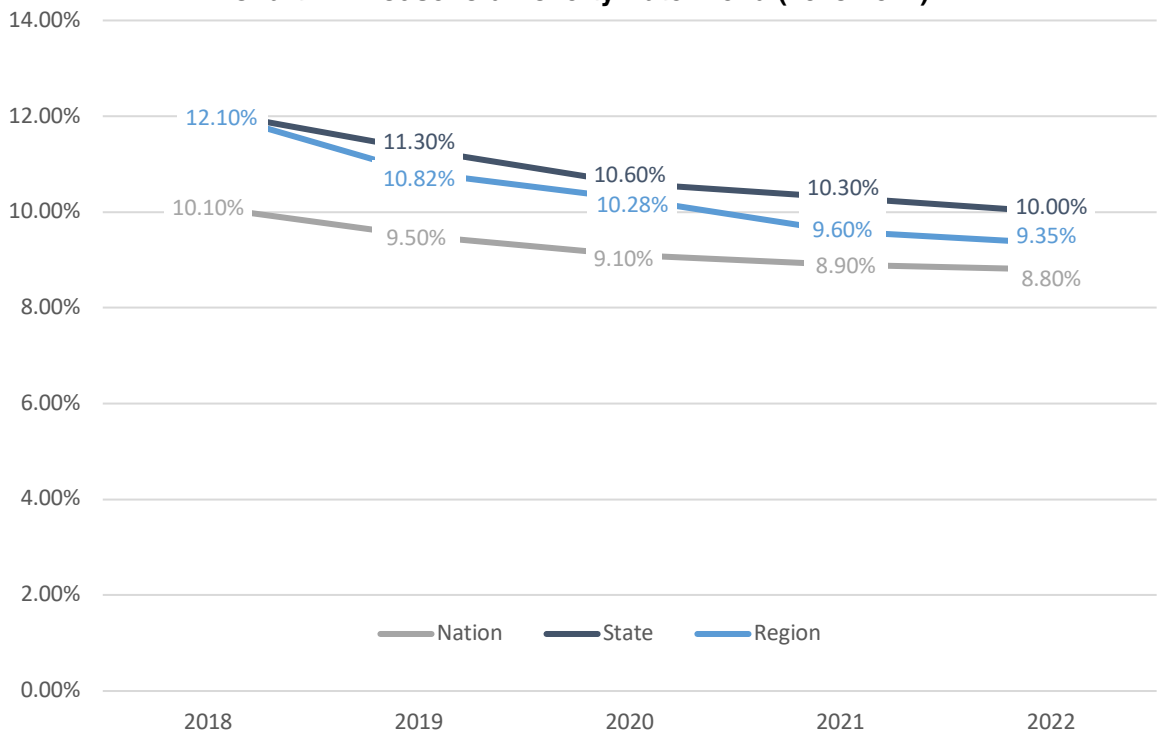
Area	>50%	>100%	>125%	>200%
DeKalb	44,621	100,326	129,640	223,385
Gwinnett	39,675	96,291	134,960	259,705
Newton	6,793	14,935	21,052	35,877
Rockdale	5,423	10,539	15,436	31,383
REGION	**96,512**	**222,091**	**301,088**	**550,350**
STATE	**658,872**	**1,415,573**	**1,866,442**	**3,284,036**
NATION	**18,860,708**	**40,521,584**	**53,120,911**	**93,118,710**

Source: U.S. Census Bureau ACS (S1701)

Households in Poverty

It is estimated that there are 63,192 households living in poverty throughout the region. This number is contextualized by the poverty rates that compare the region not only to the state but also to national averages, providing a broader perspective on the socioeconomic challenges these households face. For 2022, the poverty rate in the region stands at 9.35%, which is slightly below the state rate of 10.00%, but higher than the national rate of 8.80%.This indicates that while the region is performing better than the state average, it still has challenges compared to the national context.

Chart 24: Household Poverty Rate Trend (2018-2022)



Source: U.S. Census Bureau ACS (DP03)

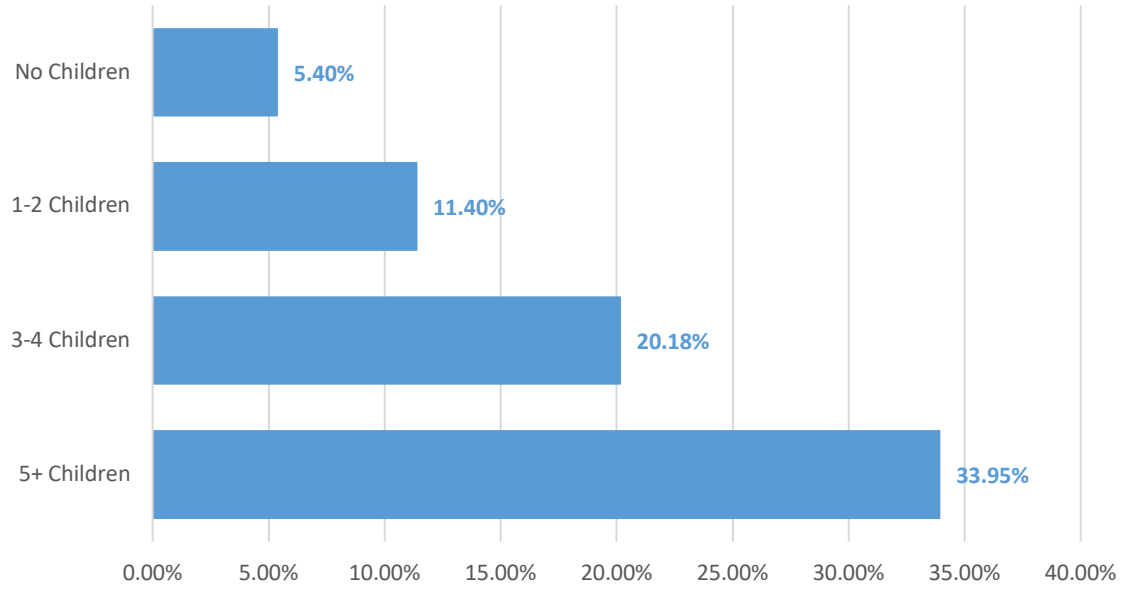
Over the past five years there has been a significant downward trend in poverty rates on all levels. Nationally, the poverty rate decreased from 10.10% to 8.80%, reflecting a decline of 12.87%. The state saw a more substantial reduction, from 12.10% to 10.00%, marking a 17.36% decrease. The region outpaced both the state and national rates in terms of improvement, with a decrease from 12.10% to 9.35%, translating to a 22.73% reduction. This trend illustrates effective socio-economic policies or improvements in employment and wages within the region, which have contributed to lifting households out of poverty.

These changes highlight the dynamic nature of economic conditions and the impact of policy measures aimed at reducing poverty. While progress has been notable, the remaining poverty rates, especially when compared nationally, suggest ongoing areas for focus to ensure continued improvement and to address the underlying factors contributing to economic hardship in the region. Such analysis is crucial for shaping future strategies to enhance the quality of life for all residents, particularly those in vulnerable economic positions.

The analysis of poverty rates among households with and without children reveals significant disparities, influenced heavily by the presence and number of children within the household. Households without children exhibit a notably lower average poverty rate of 5.40%, which contrasts sharply with the 13.32% observed in households with children. This discrepancy underscores the increased economic pressures and challenges faced by families with dependents.

The economic strain intensifies as the number of children in a household increases. For families with 1-2 children, the poverty rate stands at 11.40%, which nearly triples for those with 5 or more children, reaching 33.95%. Households with 3-4 children experience a poverty rate of 20.18%, indicating a clear correlation between the number of children and the likelihood of experiencing poverty. This pattern suggests that larger families may struggle with the compounded costs of childcare, education, healthcare, and basic necessities, stretching household finances thinner.

Chart 25: Poverty Rates by Number of Children (2022)

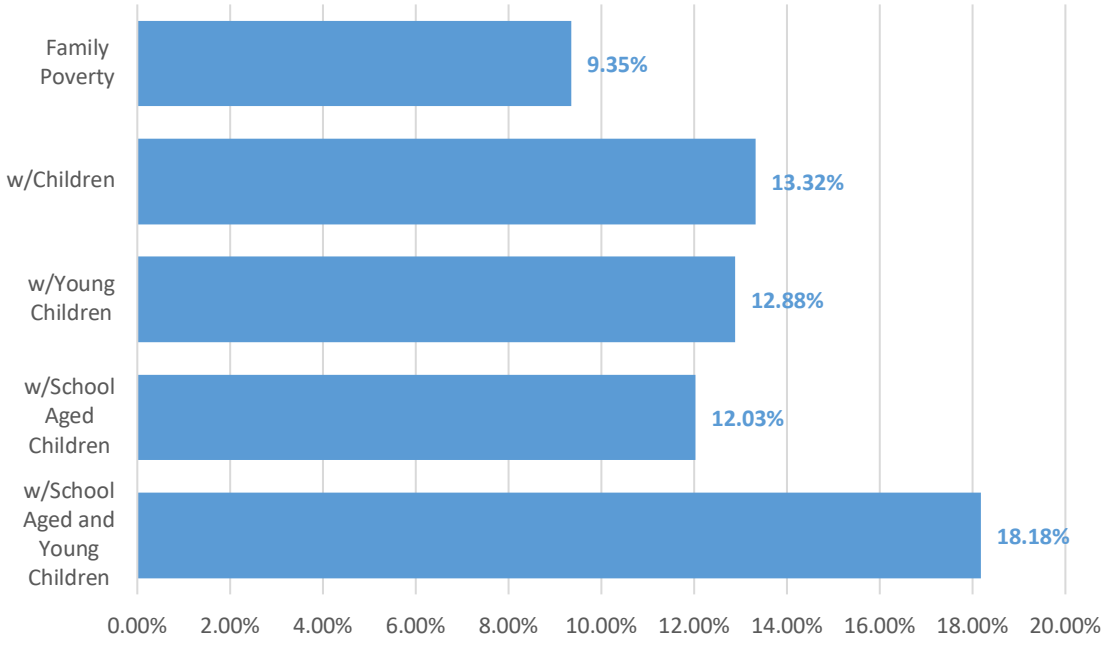


Source: U.S. Census Bureau ACS (S1702)

Although not as evident, differentiation was identified when analyzing households based on the ages of children. Households with only young children (under age five) were noted as having a poverty rate of 12.88%, while those with only school-aged children (ages 5-17) show a slightly lower rate of 12.03%. Households that include both young and school-aged children face an even higher poverty rate of 18.18%. These statistics highlight how households with younger children, who may require more care and resources, are particularly vulnerable to falling into poverty.

These trends reflect broader socio-economic issues such as the availability and cost of childcare, the impact of single or multiple caregivers' incomes, and the broader economic environment affecting families' financial stability. Addressing these disparities requires targeted social policies and support systems that provide adequate financial and social support to reduce the burden on families with children, ensuring that children's needs do not compromise their family's economic stability.

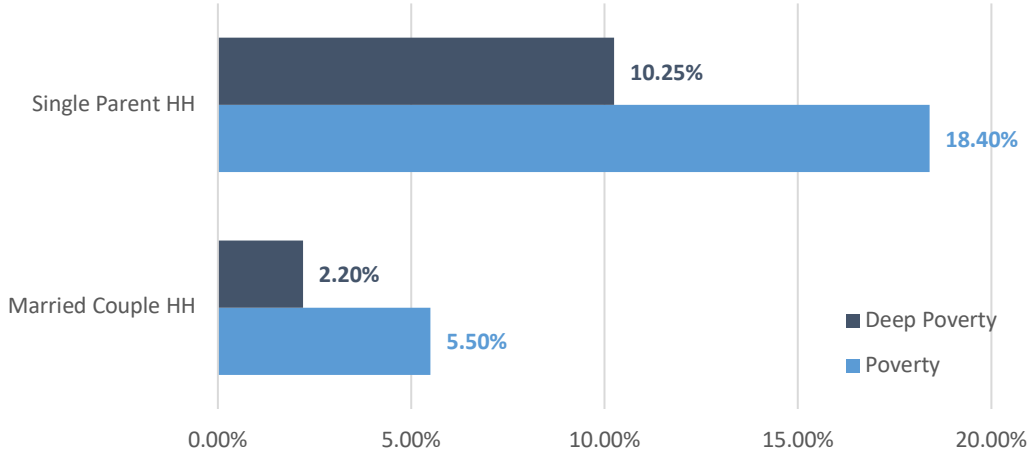
Chart 26: Poverty Rates by the Age of Children (2022)



Source: U.S. Census Bureau ACS (S1702)

Although county-level data was limited in the region, statewide data indicates that the structure of the household is also a risk factor associated with the likelihood of living in poverty. According to Census Bureau data, single-parent households were 3.35 times more likely to live in poverty and more than four times as likely to live in deep poverty than married-couple households with children.

Chart 27: State Poverty Rates by Household Types with Children (2022)



Source: U.S. Census Bureau ACS (S1702/S1703)

Given these insights, programs and policies aimed at poverty alleviation could benefit from focusing on single-parent households, providing additional resources and support systems to address their specific challenges. Enhancing access to affordable childcare, job training, and educational opportunities for single parents, as well as considering the impact of policies on household composition, could be key steps in mitigating poverty and deep poverty in this demographic.

Median Income

Median Income reflects the middle point of income distribution in a given area, as documented by the U.S. Census Bureau. Unlike the mean income, which calculates the average by adding all incomes and dividing by the number of residents, the median income identifies the income level that divides the population into two equal groups: half of the population earns above this amount, and the other half earns below. This measure is often preferred over mean income because it is less skewed by extremely high or low values and provides a more accurate representation of typical earnings.

The median income for the region is $74,518 annually. While this is an increase of 25.55% over the past five years, the amount remains significantly lower than the national average ($75,149).

Table 23: Median Income Change Comparison (2018/2022)

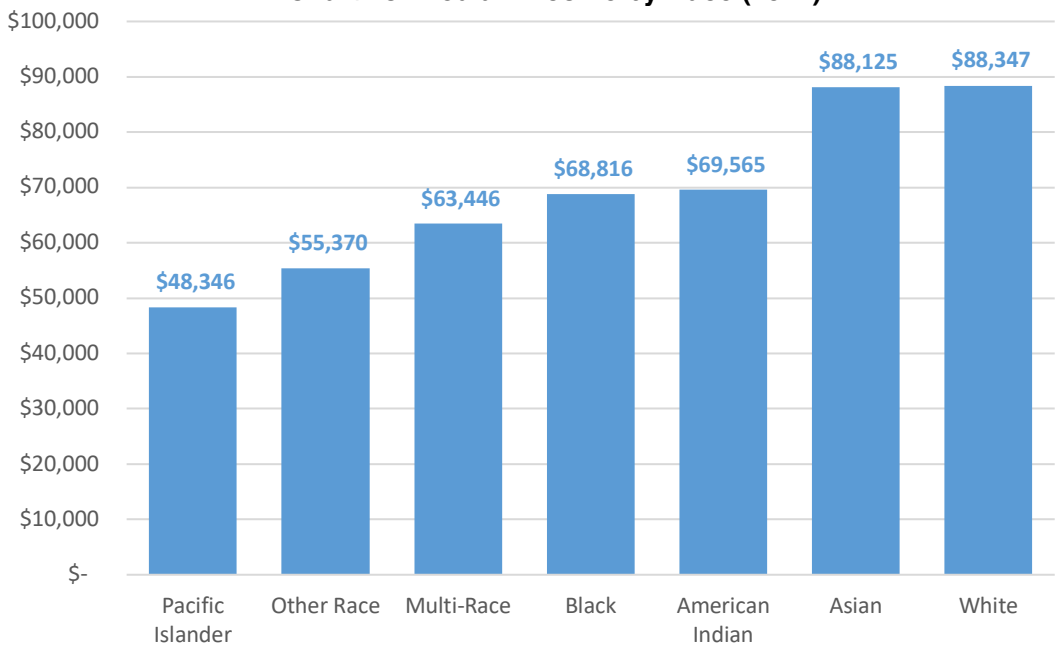
Area	2018	2022	$ Change	% Change
DeKalb	$59,280	$76,044	+$16,764	+28.28%
Gwinnett	$67,769	$82,296	+$14,527	+21.44%
Newton	$53,309	$70,732	+$17,423	+32.68%
Rockdale	$57,049	$68,999	+$11,950	+20.95%
REGION	**$59,352**	**$74,518**	**+$15,166**	**+25.55%**
STATE	**$55,679**	**$71,355**	**+$15,676**	**+28.15%**
NATION	**$60,293**	**$75,149**	**+$14,856**	**+24.64%**

Source: U.S. Census Bureau ACS (DP03)

Looking at the individual counties within the region, the highest income was found in Gwinnett County, at $82,296. The lowest income was found in Rockdale, at $68,999. Newton County experienced the largest income increase at 32.68%.

Similar to poverty rates, it should also be noted that demographics have an impact on the median income of residents. For example, households with a White head of household have an average earning of $88,347 annually, while Pacific Islanders were noted as having median incomes of only $48,346 annually.

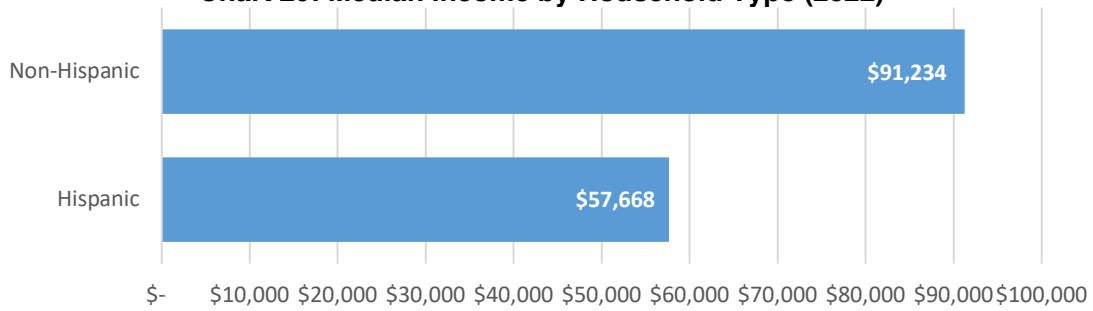
Chart 28: Median Income by Race (2022)



Source: U.S. Census Bureau ACS (S1903)

When considering the ethnicity of the householder, residents who considered themselves to be Hispanic were noted as having incomes nearly half of the amount of their non-Hispanic counterparts.

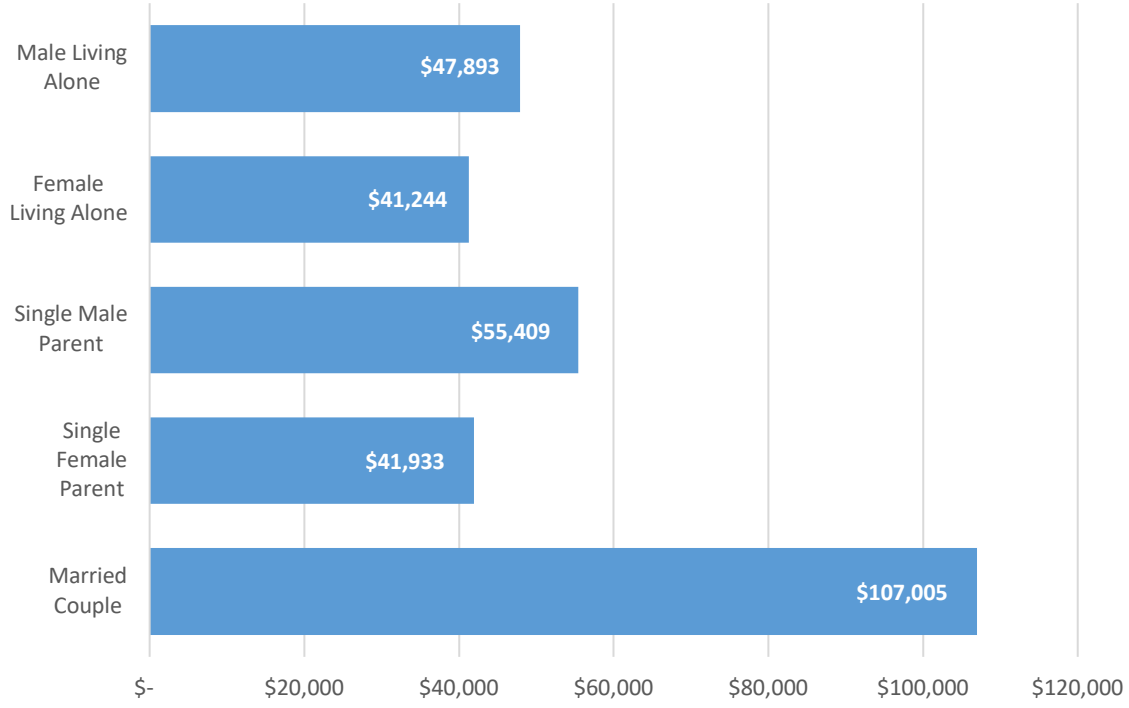
Chart 29: Median Income by Household Type (2022)



Source: U.S. Census Bureau ACS (S1903)

The household structure was also noted as a contributing factor to income amounts, with married couple households having median incomes significantly higher than homes with only one adult.

Chart 30: Median Income by Household Type (2022)



Source: U.S. Census Bureau ACS (S1903)

Living Wage Equivalent (LWE)

While the U.S. Census Bureau determines poverty status by using an official poverty measure (OPM) that compares pre-tax income against a threshold that is set at three times the cost of a minimum food diet in 1963 and adjusted for family size, a more accurate reflection of economic hardship of local residents can be found by comparing the median income to living wage amounts.

The living wage takes into account the average cost for food, childcare, medical care, housing, Transportation, and other necessary expenses within a specific community.

Table 24: Median Income vs. Living Wage (2022)

Area	Min Wage FT	Median Income	1 Adult 0 Child	1 Adult 1 Child	1 Adult 2 Child	2 Adult 0 Child	2 Adult 1 Child	2 Adult 2 Child
DeKalb	$15,080	$76,044	$52,520	$84,406	$104,874	$68,578	$80,912	$90,168
Gwinnett	$15,080	$82,296	$56,056	$88,338	$109,346	$72,051	$85,010	$94,349
Newton	$15,080	$70,732	$51,022	$78,374	$95,098	$66,768	$79,144	$88,504
Rockdale	$15,080	$68,999	$50,752	$82,306	$103,043	$66,810	$79,186	$88,691
REGION	$15,080	**$74,518**	**$52,587**	**$83,356**	**$103,090**	**$68,552**	**$81,063**	**$90,428**

Source: MIT Living Wage Calculator | Source: U.S. Census Bureau ACS (DP03)

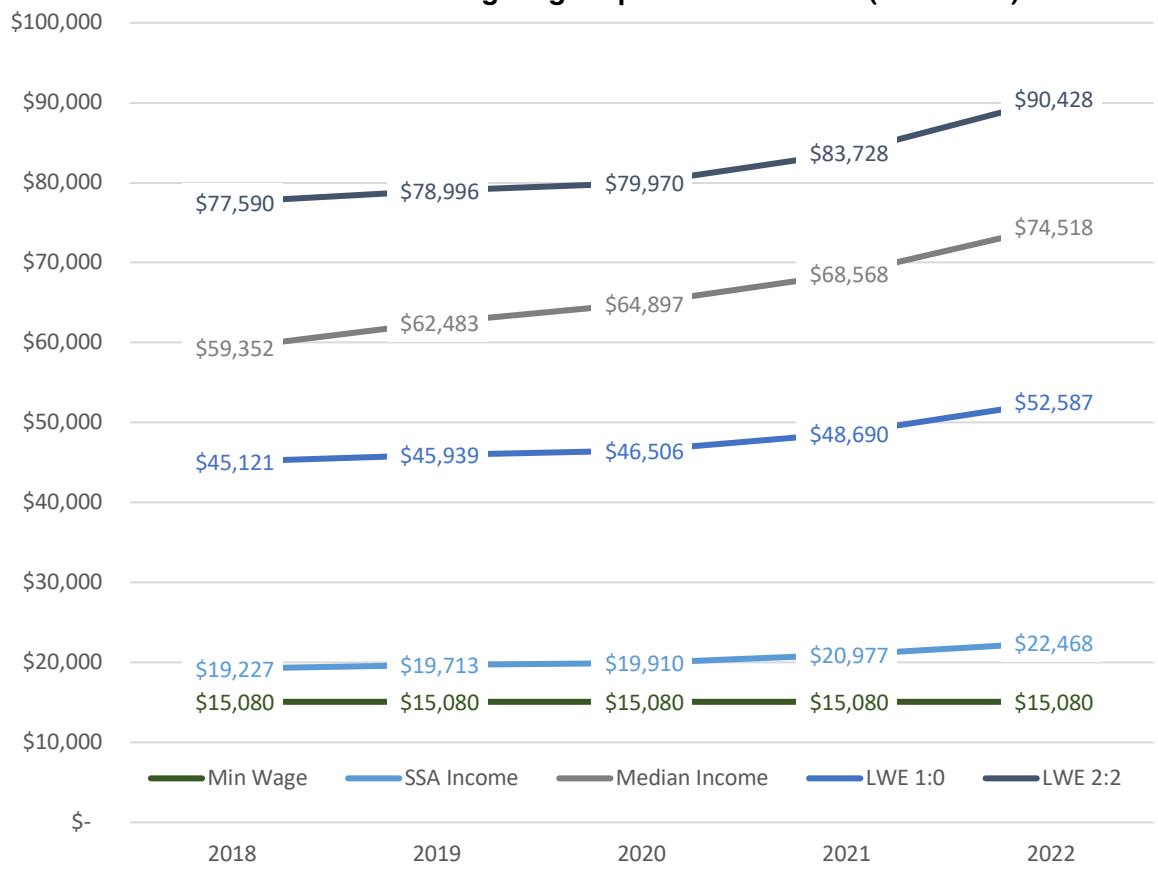
The analysis of the median income versus the living wage requirements in the region demonstrates a significant disparity, particularly for single-parent households. For a single mother with two children, the living wage required is $103,090 annually. Given the federal minimum wage of $7.25 per hour, she would need to work 273.42 hours each week to reach the living wage amount, which clearly an impossible scenario given that there are only 168 hours in a week. It should also be noted that this does not account for any other activities, including sleep, meals, or family time. For a traditional family of four, both adults would have to work 120 hours per week.

Although the median income of $74,518 is significantly higher, it remains inadequate to meet the household needs of any household with children, leading to financial difficulties for those who do not qualify for subsidies.

These financial constraints are exacerbated when considering additional necessities and unforeseen expenses such as school supplies, healthcare costs, and other emergencies. The current living wage model illustrates that many residents face economic hardships far beyond what the official poverty measures may suggest, highlighting the need for policy interventions that consider the actual costs of living and aim to raise income levels to meet these needs.

Based on data from the Bureau of Labor Statistics, the inflation rate experienced a notable rise of 16.50% over the duration under examination. This increase, while substantial, indicates a relatively slower pace compared to the median income growth, which surged by 25.55% within the same timeframe. It's crucial to note that fluctuations in the inflation rate are significant economic indicators, reflecting changes in the general price level of goods and services over time.

Chart 31: Income vs. Living Wage Equivalent Amounts (2018-2022)



Source: U.S. Census Bureau ACS (DP03)

Analyzing the provided data further, it's evident that although the cost of living for a traditional family of four remains higher than the median income, there has been a notable decrease in the financial gap between income and household expenses. Over the past five years, the average household is estimated to have a reduced gap of $2,328. For single-person households, the gap between the living wage estimate (LWE 1:0) and median income has notably increased, allowing for an increase in leftover annual cash from $14,231 to $21,931 (+54.11%). This improvement reflects a positive shift towards greater economic stability for single-person households.

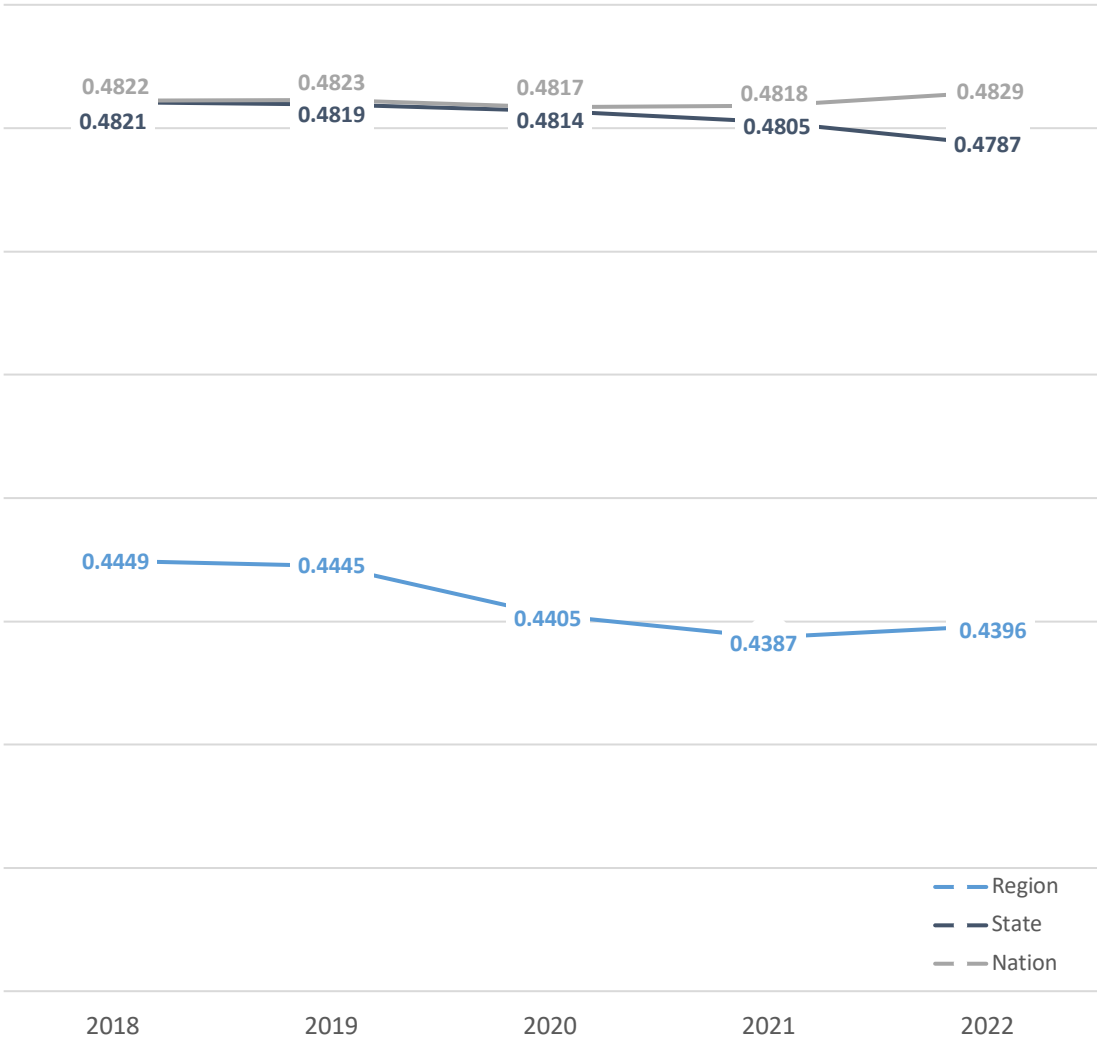
However, the inflation rate continues to be a significant concern for individuals on a fixed income, such as those receiving Social Security benefits. In 2018, the gap between the average Social Security income and the living wage estimate for a single person was $25,894. Despite the average Social Security income increasing to $22,468 in 2022, the financial gap between income and the living wage necessary to maintain a household increased to $30,119. This indicates that individuals on fixed incomes may continue to struggle financially, as the increase in Social Security benefits does not adequately keep pace with the cost-of-living adjustments required for a single person to maintain a basic standard of living.

Income Inequality

The Gini coefficient is a commonly used measure of income inequality within a population, with values ranging from 0 to 1, where 0 represents perfect equality (everyone has the same income) and 1 represents perfect inequality (one person has all the income).

Focusing on the regional data from the table, we observe a notable trend in the regional Gini coefficients over the years 2018 to 2022. The regional Gini coefficient starts at 0.4449 in 2018 and sees a slight decrease over the years, reaching 0.4396 by 2022. This suggests a modest improvement in income equality within the region, indicating that income distribution has become slightly more equal over this period.

Chart 32: Income Inequality Trend (2018-2022)



Source: U.S. Census Bureau ACS (B19083)

Comparatively, the state and national Gini coefficients show less fluctuation and remain relatively higher than the regional values throughout the same period. In 2022, the state's Gini coefficient is 0.4787 and the nation's is 0.4829, both notably higher than the region's 0.4396. This higher figure at the state and national levels suggests that the region is doing somewhat better in terms of income equality than the broader state and national levels.

These findings suggest that, overall, the region maintained a comparatively lower level of income inequality throughout the years analyzed. However, it's essential to interpret these results within the broader context of socioeconomic factors and policy interventions that may influence income distribution dynamics. Further analysis, including disaggregated data and qualitative research, would provide a more comprehensive understanding of income inequality trends within the region and inform targeted policy initiatives aimed at promoting greater economic equity and social inclusion.

Table 25: Household Income Benchmarks (2022)

Area	$25K - $50k	$15k - $25k	< $15k
DeKalb	54,548	19,427	22,085
Gwinnett	55,285	15,969	18,401
Newton	8,153	3,025	3,085
Rockdale	7,488	1,858	1,889
REGION	**125,474**	**40,279**	**45,460**

Source: U.S. Census Bureau (DP03)

Analyzing the 2022 household income distribution within the region, as reported by the U.S. Census Bureau, offers a detailed perspective on the economic disparities prevalent among its residents. The data breaks down into three income brackets, highlighting the financial conditions of various groups. Notably, 45,460 households, which represent about 7.17% of the total 633,628 households in the region, earn less than $15,000 annually. This income level is below what a full-time worker earning the federal minimum wage would typically make, suggesting that a significant number of households live on extremely limited financial resources, likely insufficient to cover basic living costs.

Further analysis shows that 40,279 households, making up about 6.36% of the total households in the region, have incomes between $15,000 and $25,000. Combined with those earning less than $15,000, this data suggests that around 13.53% of households in the region live on less than $25,000 per year. Additionally, a larger segment, representing 19.8% of all households, earns between $25,000 and $50,000 annually. While this income bracket is higher, these households may still face financial strains, especially if children live in the home.

These low to moderate income brackets are likely to face significant challenges in securing adequate housing, healthcare, and educational opportunities, which are crucial for breaking the cycle of poverty. This income data underscores the need for targeted social programs and economic policies that can address the financial instability faced by these vulnerable groups. Enhancing access to better-paying jobs, affordable housing, and comprehensive social services are essential measures to improve the economic stability and overall quality of life for these residents. Further detailed analysis, including disaggregated data and qualitative research, would enrich our understanding of the specific socioeconomic factors at play and aid in crafting effective interventions aimed at promoting greater economic equity and social inclusion within the community.

Income Types

When considering the types of income received by households in the area, it is evident that wages from employment constitute the primary source of income for a majority of the population. Approximately 90.04% of the region's households earn their income through wages, with an average amount of $98,540, which is indicative of employment being the mainstay for the economic sustenance of the region.

Table 26: Income Types (2022)

Measure	Wages	SSA	Retirement	SSI	TANF
Number	570,498	162,364	129,499	27,487	12,564
Avg. Amount	$98,540	$22,468	$30,487	$11,297	$3,490

Source: U.S. Census Bureau (DP03)

Social Security benefits are received by 25.62% of the households, signifying the importance of this program for nearly one-quarter of the population, particularly for those who are retired or disabled. The average amount received from Social Security is $22,468. Retirement income, distinct from Social Security, is received by 20.44% of households, with an average amount of $30,487, highlighting the reliance on accumulated retirement savings and pension plans for a significant portion of the elderly and retired populace.

Supplemental Security Income (SSI), which is designed to help aged, blind, and disabled people who have little or no income, is received by 4.34% of households, with an average amount of $11,297, reflecting the critical support it provides to the most vulnerable segments. Temporary Assistance for Needy Families (TANF), a form of government cash assistance, is received by 1.98% of households, with a notably lower average amount of $3,490 annually, underscoring its role as a temporary safety net for those in dire financial need.

Community Feedback
A total of 378 survey respondents identified the lack of adequate income as a primary barrier impacting the ability of residents to secure basic household needs. Among the 227 low-income residents reporting that they had personally experienced difficulty affording basic needs, 93% stated that they had been unable to find help in their time of need. An additional 104 stated that they had struggled with the ability to manage existing finances, but 69% of these being unable to find assistance.

From the qualitative data, it is clear that many residents live paycheck to paycheck, often relying on extended credit just to make ends meet. The high cost of living, coupled with stagnant wages, exacerbates this situation, leaving little room for savings or unexpected expenses. One respondent remarked, "The cost of living is a huge issue in being able to afford everyday living," highlighting the strain of rising prices on their financial stability.

Another common theme was the inadequacy of social security and other assistance programs. A senior citizen mentioned, "Services for seniors keep going higher but the Social Security checks don't," reflecting the widening gap between their fixed income and the rising cost of living.

In summary, the community feedback highlights the multifaceted challenges residents face in achieving financial stability. The high cost of living, insufficient job opportunities, and inadequate assistance programs create significant barriers, particularly for low-income and vulnerable populations. Addressing these issues requires a comprehensive approach that includes enhancing job opportunities, improving access to skills training, and increasing the availability and effectiveness of support services.

Agency Data
In Fiscal Year 2022, PCA, Inc. served 1,187 households, encompassing a total of 3,268 individuals. The demographic analysis of these clients reveals significant insights into their characteristics. The majority of the individuals served are female, comprising 63.86% of the population, while males make up 36.02%. Age-wise, the largest group falls between 24 and 44 years old, representing 26.62% of the clients. Notably, 91.86% of the individuals identify as Black or African American, while 3.95% are White, and other racial groups make up the remaining percentage. Additionally, a small portion, 1.90%, identify as Hispanic or Latin.

Educational attainment varies among the adult clients, with 28.13% having completed some post-secondary education, and 17.27% holding a 2 or 4-year college degree. A significant number of adults, 14.17%, have some high school education but no diploma. Health and disability status are also critical factors, with 12.40% of the clients having a disability, and a high percentage, 87.56%, possessing health insurance.

Family structure among the clients shows that single-parent households led by females are predominant, accounting for 57.12% of the families, followed by single-person households at 26.37%. Income levels reveal that 32.94% of the families report zero income, while 67.06% have one or more sources of income, primarily from employment, social security, and SSI. Most of the clients are renters, making up 71.10% of the households, with a significant portion, 19.21%, experiencing homelessness.

The average client profile reflects a predominantly female, Black or African American individual, aged between 24 and 44 years, with some post-secondary education. They are likely to be part of a single-parent household, possibly facing disability and reliant on health insurance. Many clients struggle with income, with a considerable number reporting zero income and relying on social security or SSI. Housing stability is a critical issue, as the majority rent their homes, and a significant number are homeless.

Despite the identified challenges, PCA achieved notable impacts, helping 90 customers attain a living-wage equivalent income and assisting 504 in eliminating a basic household need. This profile underscores the socio-economic challenges faced by the clients and highlights areas for focused interventions and support.

Income Assistance Resources

Resource Name	Contact Information	Description
Ceek to Fulfill	770-602-0543	Provides youth and young adults with education concerning financial management and opportunities to improve credit.
Consumer Credit Counseling	800-918-6709	Provides assistance with debt consolidation for individuals with poor credit.
Georgia Division of Family and Children Services	877-423-4746	Provides monthly cash assistance with an employment service component to low -income families with children under the age of 18.
Money Management International	404-260-3196	Provides credit counseling, consumer education, bankruptcy counseling and debt consolidation assistance to residents of DeKalb County.
Operation Hope	404-941-2919	Provides young people and adults in DeKalb County with financial tools and education to secure a better future.
Partnership for Community Action	404-929-2500	Provides comprehensive self-sufficiency case management services to low-income individuals.
Social Security Administration	800-772-1213	Provides a variety of financial benefits for disabled individuals.
Streetwise	678-985-9915	Provides self-sufficiency case management services to low-income residents of Gwinnett County
United Way Atlanta	404-527-7200	Provides one-on-one coaching and financial education services.
Veteran Services Organization	404-656-2300	Assists veterans with applications for financial benefits.
Wounded Warrior Project	404-974-9234	Assists veterans who incurred a physical or mental injury with applications for financial benefits

Conclusion: Strengths
The community has witnessed notable strengths in tackling poverty over the past five years, reflecting significant strides in socioeconomic improvements. The poverty rate in the region has decreased by an impressive 21.01%, surpassing the state's reduction of 15.44% and the national decrease of 11.13%. This indicates a more effective set of local policies or economic conditions that are successfully lifting more residents out of poverty compared to broader state and national trends.

Moreover, the current poverty rate in the region is lower than both the state (13.53%) and national (12.53%) rates, suggesting that the regional strategies and economic environment might be more conducive to maintaining lower levels of poverty. Significant progress is also evident within specific demographic groups: the poverty rate among Pacific Islanders has improved by 59.76%, the Black community has seen a reduction of 26.80%, and the category labeled 'Other Race' improved by 33.78%. Additionally, the poverty rate for Hispanics decreased by 21.11%.

There's also been a notable decrease in deep poverty, which dropped by 10.45%, and a reduction in the number of residents living between 50-100% of the poverty level by 14.66%.

Economically, the region has seen a substantial increase in median income, which rose by 25.55%, outpacing the inflation rate of 16.50%. This growth in median income, higher than the rate of inflation, indicates an improvement in the general economic prosperity of the region's residents, allowing more individuals and families to afford a better standard of living without falling behind economically.

In terms of income equality, the region is performing notably well with a Gini coefficient of 0.4396, which is significantly more balanced compared to the state (.4787) and national (.4829) levels. This lower Gini coefficient reflects a more equitable distribution of income among residents, suggesting that wealth is more evenly spread across the population in the region than in the broader state or national contexts.

Conclusion: Weaknesses
The community is facing several critical weaknesses in the area of poverty, as highlighted by the analysis of demographic and socioeconomic data. Notably, a significant portion of the population, 222,091 residents, lives below the poverty line, accounting for a poverty rate of 12.07%. These individuals are distributed across 63,192 households, with an average household size of 3.51, indicating a high prevalence of families affected by poverty.

One concerning trend is the gender disparity in poverty rates; females are more likely to encounter poverty at 13%, compared to males at 11.05%, with this gap widening over the past five years. Furthermore, poverty disproportionately affects younger age groups, with young children under five experiencing a poverty rate of 18.43% and school-aged children at 16.48%. The age-related decline in poverty rates underscores the heightened vulnerability of children.

Racial disparities also play a significant role, with American Indians, multi-racial individuals, and Pacific Islanders facing the highest risks of poverty, at rates of 18.43%, 18.18%, and 17.80% respectively. Additionally, the Hispanic community, which makes up a significant portion of the low-income population at 23.89%, faces a poverty rate of 18.24%, emphasizing the need for culturally tailored outreach efforts.

Deep poverty, defined as living at less than 50% of the poverty threshold, affects 96,512 residents, highlighting extreme financial hardship within the community. This level of poverty exacerbates the challenges in accessing basic necessities and services. A larger segment of the community, 301,088 residents, is eligible for Community Services Block Grant (CSBG) funds aimed at poverty alleviation, with even more, 550,350 residents, qualifying under expanded CSBG criteria.

Family composition further influences poverty levels, with households having children showing higher poverty rates than those without. The rate of poverty increases with the number of children, reaching 33.95% for households with five or more children. Single-parent households, particularly those headed by single females, are significantly more prone to poverty and deep poverty compared to married couples, illustrating the financial instability faced by these families.

Economic challenges are compounded by rising inflation, which has increased by 16.50% over the past five years, severely affecting those on fixed incomes and minimum wages. The median income of $74,518, while above the poverty line, still falls short of meeting the basic needs of households with children, particularly single-parent families.

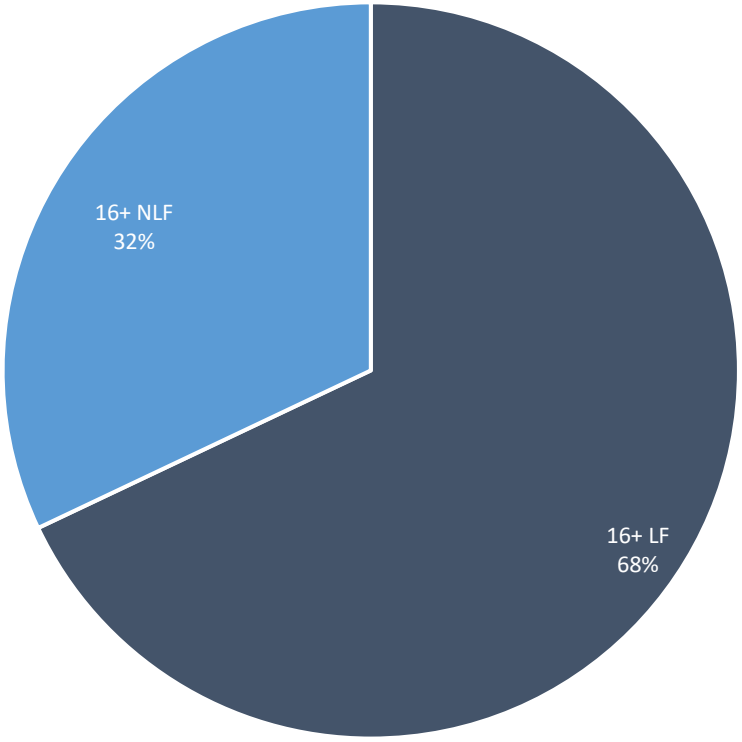
Employment & Industry

Introduction
The study of employment is a fundamental aspect of poverty research because job availability and the nature of employment directly influences economic stability. By examining employment patterns, researchers can pinpoint where job scarcity or low-wage employment may be perpetuating poverty. This evaluation can help to shed light on the structural and systemic factors affecting the labor market, guiding effective policymaking to foster job creation, skill development, and equitable economic growth, ultimately aimed at poverty alleviation.

Labor Force
Understanding the number of individuals in the labor force within a community is pivotal for gauging its economic health and workforce potential. It allows for an assessment of the active working population that contributes to the local economy and is a key indicator of labor market strength. This knowledge aids in identifying the level of unemployment, underemployment, and the need for workforce development programs. It also helps in planning for future economic development strategies, including education and training programs, which are essential for matching skills with job opportunities and promoting sustainable economic growth.

In the local service area, a total of 1,022,045 local residents were noted as being a part of the labor force. This represents 67.96% of all individuals between the ages of 16 and 64.

Chart 33: Labor Force (2022)



Source: : U.S. Census Bureau (DP03)

Over the past five years, the labor force increased by 5.11%. Although this is slightly slower than the increases on a state level (+6.19%), it is significantly faster than the national trend (+2.71%). The most notable increases in the region were found in Newton (+10.93%) and Rockdale (+8.49%) counties. The largest concentration of the region's labor force, however, was identified in Gwinnett (49.31%), followed by DeKalb (41.13%).

Table 27: Labor Force Trend by County (2018-2022)

Area	2018	2019	2020	2021	2022	Change
DeKalb	405,541	409,654	412,543	416,586	415,522	+2.46%
Gwinnett	473,566	480,632	484,801	495,584	504,118	+6.45%
Newton	51,012	52,581	53,196	55,205	56,590	+10.93%
Rockdale	42,579	43,673	44,162	45,424	46,175	+8.49%
REGION	***972,698***	***986,540***	***994,702***	***1,012,799***	***1,022,405***	***+5.11%***
STATE	***5,091,132***	***5,174,538***	***5,254,983***	***5,329,864***	***5,406,476***	***+6.19%***
NATION	***163,276,329***	***164,629,492***	***165,902,838***	***167,869,126***	***169,093,585***	***+2.71%***

Source: U.S. Census Bureau (DP03)/Bureau of Labor Statistics

This increase in the labor force is noteworthy, particularly as it occurred against the backdrop of the COVID-19 pandemic, which brought unprecedented challenges to global and local economies. The resilience shown by the local labor force suggests a strong economic foundation and adaptability in the face of adversity. It also points to the potential success of any economic policies implemented during this time, aimed at maintaining or boosting employment levels.

Also, the consistent increase in the labor force throughout the period, including the pandemic years, may imply that the region has a diverse economic base capable of weathering economic downturns. It could also suggest that the region has been successful in retaining and attracting a workforce, which is a critical factor for long-term economic sustainability. This is crucial information for stakeholders, policymakers, and investors, as it may shape decisions regarding the allocation of resources for workforce development, training programs, and economic incentives designed to attract further business investments into the region.

Considering these factors, the region appears poised for further growth and development. The employment trends offer a springboard for targeted economic strategies that can capitalize on existing strengths, address any underlying issues brought to light by the data, and foster an environment conducive to sustained economic success and poverty reduction.

Unemployment Rate

The unemployment rate is a key economic indicator that measures the percentage of people within the labor force who are actively seeking employment but currently do not have jobs. It reflects the extent to which individuals in the workforce are able to secure meaningful employment. A high unemployment rate suggests a larger portion of the labor force is experiencing joblessness, potentially leading to financial hardships.

Assessing the current unemployment rate holds significant importance because it directly impacts poverty levels within a community. Elevated unemployment rates often result in higher poverty rates as individuals without jobs may struggle to meet their basic needs due to a lack of financial resources.

Comparing local unemployment rates to state and national averages provide valuable context for understanding the economic conditions of a specific community within a broader framework. This comparison aids in determining whether a locality is performing better or worse than larger regions, influencing decisions regarding resource allocation, job development initiatives, and employment support services.

With an overall regional unemployment rate of 5.78%, the area slightly underperforms when compared to both state (5.20%) and national (5.30%) averages.

Table 28: Annual Unemployment Rate Estimates by County (2022)

Area	Labor Force	Unemployed	Rate
DeKalb	415,522	26,764	6.40%
Gwinnett	504,118	20,633	4.10%
Newton	56,590	3,732	6.60%
Rockdale	46,175	2,782	6.00%
REGION	***1,022,405***	***53,911***	***5.78%***
STATE	*5,406,476*	***280,651***	***5.20%***
NATION	*169,093,585*	***8,944,003***	***5.30%***

Source: U.S. Census Bureau (DP03)

Breaking down the data further, Gwinnett County shows a notably lower unemployment rate at 4.10%, which is encouraging as it indicates a relatively healthy job market in comparison to other areas. However, other counties like DeKalb and Newton exhibit higher rates at 6.40% and 6.60% respectively. Rockdale County's unemployment rate stands at 6.00%, placing it moderately above the national average but still reflective of challenges in job availability or workforce engagement.

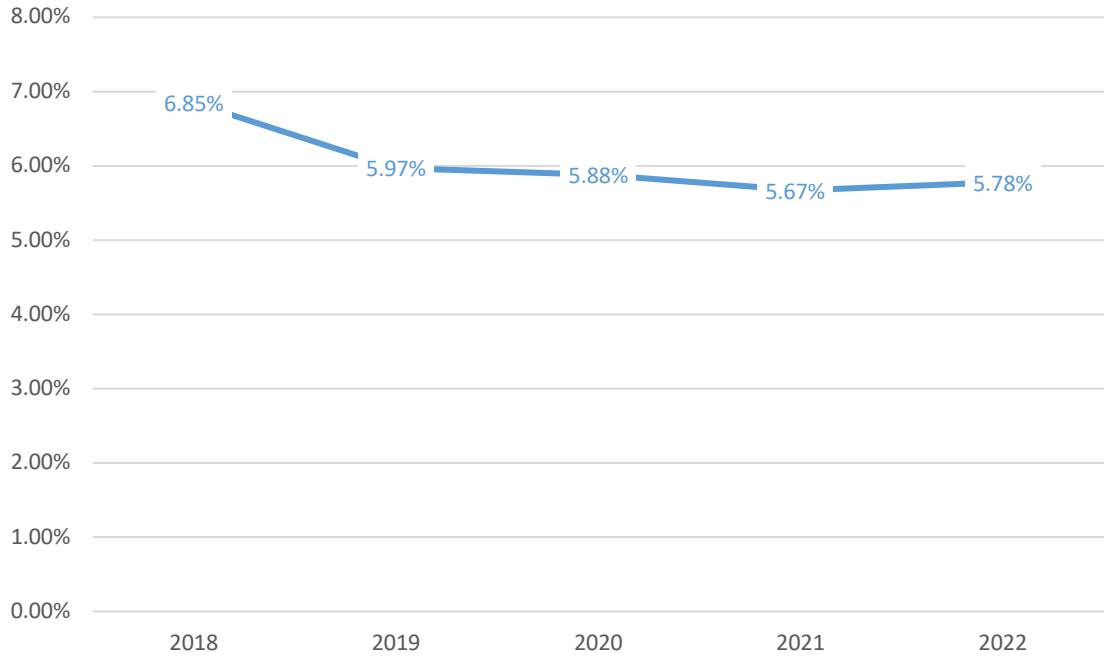
These variations across the counties suggest localized economic conditions with differing levels of job accessibility and market health. The higher unemployment rates in DeKalb, Newton, and Rockdale may indicate areas where job development initiatives could be particularly impactful. These rates could be stemming from a variety of factors including industrial decline, insufficient job creation in sectors aligned with the resident workforce's skills, or other socio-economic barriers that prevent individuals from securing employment.

The overall regional rate, combined with the varied rates across the counties, underscores the need for targeted employment programs and strategies. These should aim to bolster job creation, enhance skills training, and improve job match quality, particularly in counties with higher unemployment rates. By focusing on these areas, policymakers and community leaders can drive efforts to reduce unemployment, thereby decreasing poverty and improving economic stability across the region.

Unemployment Trend

The trend in regional unemployment rates over the past five years reflects a general improvement in economic conditions within the region, with some fluctuation observed. Starting at a higher rate of 6.85% in 2018, there was a notable decrease in unemployment to 5.97% in 2019. This significant drop could indicate economic recovery or successful job creation and retention strategies that began to take effect.

Chart 34: Regional Unemployment Trend (2018-2022)



Source: : U.S. Census Bureau (DP03)/Bureau of Labor Statistics

In 2020, the unemployment rate slightly decreased again to 5.88%, suggesting that the region maintained some of its economic stability despite the global disruptions caused by the COVID-19 pandemic. This resilience might be attributed to the region's diversified economic base or effective local government responses to economic challenges.

By 2021, the unemployment rate continued to decrease to 5.67%, reaching its lowest point in the observed period. This continued downward trend could suggest ongoing economic growth, successful implementation of employment programs, or a rebound in key industries.

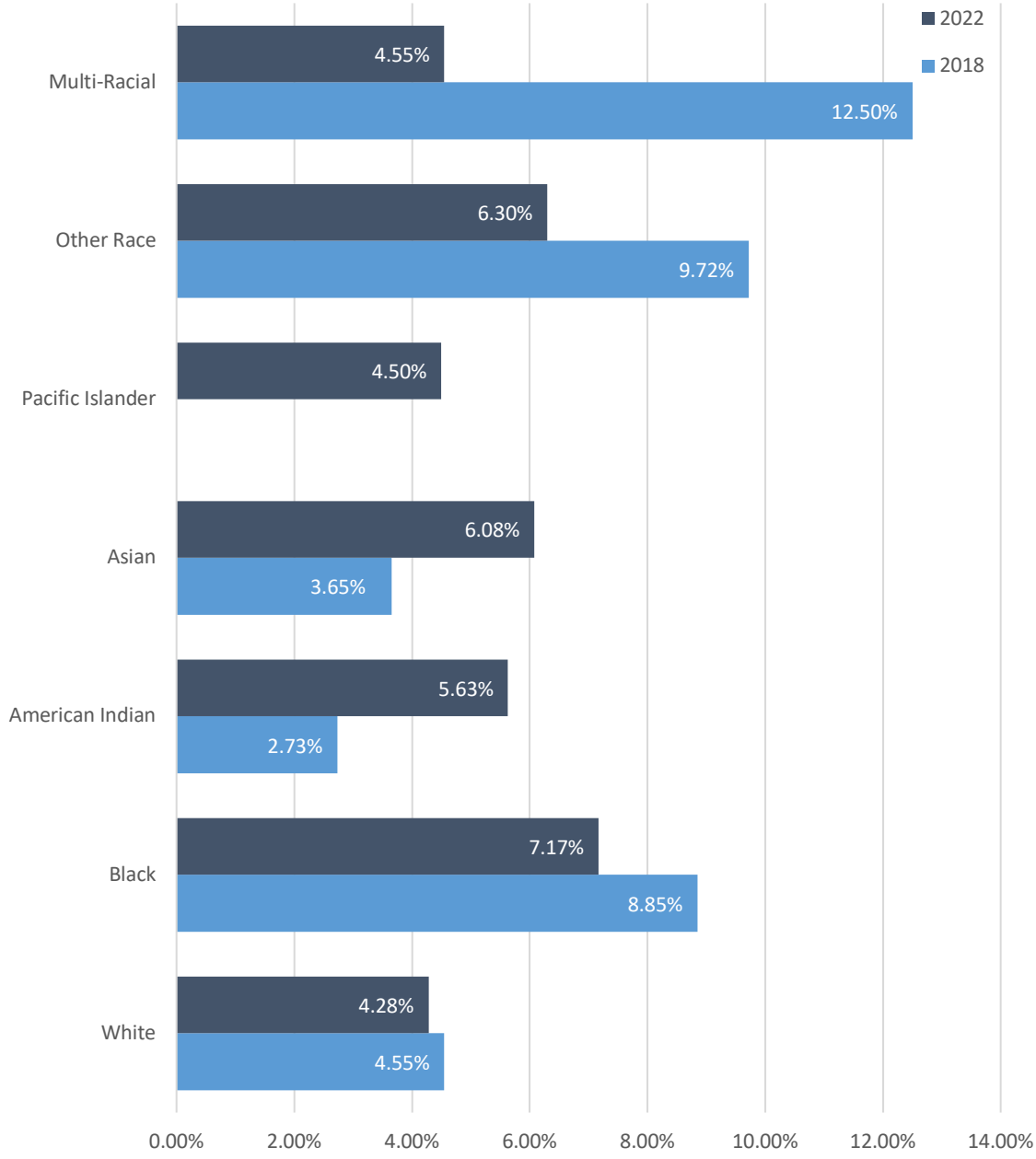
However, in 2022, there was a slight uptick in the unemployment rate to 5.78%. This increase, though modest, indicates some challenges in maintaining the previous year's gains. This could be due to a variety of factors including economic slowdowns in certain sectors, workforce displacement, or new entrants into the labor market that have not yet found employment.

Overall, the regional unemployment rate shows a net decrease of 15.62% from 2018 to 2022, demonstrating progress in reducing joblessness. This trend underscores the importance of continuous support for economic development initiatives and workforce training programs to sustain and further improve employment outcomes in the region. These efforts will be crucial in ensuring that the unemployment rate continues on a downward trajectory, contributing to enhanced economic stability and reduced poverty levels.

Unemployment Rates by Race

Comparing unemployment rates for select demographics such as age, race, ethnic groups, and gender is critical as it sheds light on the inequalities and challenges faced by different segments of the population. This knowledge can guide the development of targeted employment programs and policies that address specific barriers to workforce entry or advancement. It can also reveal systemic issues that contribute to unemployment disparities, such as access to education, discrimination, or economic shifts impacting certain industries. By examining these rates, stakeholders can work towards creating a more equitable labor market that offers equal opportunities for all community members.

Chart 35: Unemployment Rates by Race (2018-2022)



Source: U.S. Census Bureau (S2301)

The examination of unemployment rates by race in 2022 underscores significant disparities that reflect ongoing challenges and progress within the labor market. The White demographic recorded a relatively low unemployment rate of 4.28%, a slight decrease from 2018, demonstrating modest economic stability in this group. In contrast, the Black community, despite still having the highest unemployment rate at 7.17%, shows a commendable reduction from 8.85% in 2018, suggesting improvements in employment opportunities or effective community support and policies.

Interestingly, the American Indian demographic witnessed a significant rise in unemployment rate from 2.73% in 2018 to 5.63% in 2022, and the Asian community also saw their rate increase from 3.65% to 6.08% over the same period. These increases may indicate emerging economic challenges or structural shifts affecting these groups disproportionately.

The Pacific Islander group reported an unemployment rate of 4.50%, up from zero in 2018, possibly due to changes in demographic reporting or actual shifts in employment status. The Other Race category showed a notable improvement, with their unemployment rate decreasing from 9.72% to 6.30%, reflecting potential progress in economic integration and access to jobs.

The Multi-Racial group demonstrated the most significant improvement, with their unemployment rate drastically reducing from 12.50% to 4.55%. This substantial decrease might be indicative of successful interventions aimed at enhancing employment equity or perhaps broader economic improvements benefiting this particularly diverse group.

Unemployment Rates by Ethnicity

The data on regional unemployment rates by ethnicity between 2018 and 2022 reveals significant progress, particularly among Hispanic residents. Initially, in 2018, Hispanic individuals faced a higher unemployment rate of 5.22% compared to their Non-Hispanic counterparts who had an unemployment rate of 4.72%. This disparity suggested a greater challenge in securing employment for the Hispanic community, potentially due to various factors such as economic barriers, educational access, or discrimination in the labor market.

Table 29: Regional Unemployment Rates by Ethnicity (2022)

Area	2018	2022	% Change
Hispanic	5.22%	3.48%	-33.33%
Non-Hispanic	4.72%	4.45%	-5.72%

Source: U.S. Census Bureau (S2301)

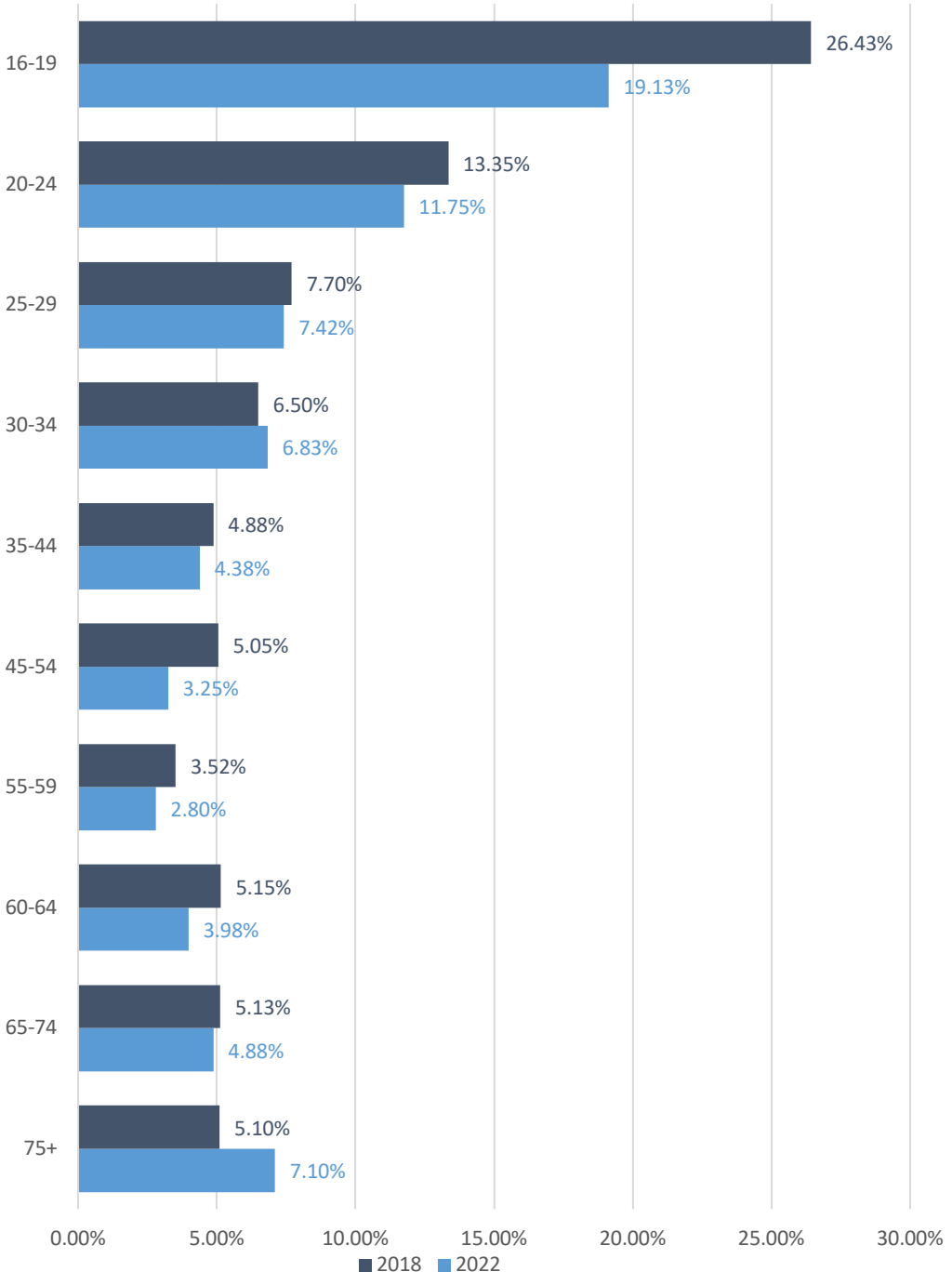
By 2022, the unemployment rate for Hispanic individuals decreased remarkably to 3.48%, marking a significant reduction of 33.33%. This improvement is not only substantial but also indicative of effective interventions and possibly a changing economic landscape that has become more inclusive and opportunistic for Hispanic individuals. Conversely, the Non-Hispanic group also saw an improvement, though less pronounced, with their unemployment rate decreasing to 4.45%, a change of -5.72%.

This shift is particularly noteworthy as it illustrates that over these five years, Hispanic residents have moved from being more likely to be unemployed compared to Non-Hispanics, to less likely. This transition might reflect targeted economic policies, community programs aimed at enhancing employment opportunities for Hispanic individuals, or broader economic growth benefiting industries where Hispanics are significantly employed.

Unemployment Rates by Age

In 2022, the youngest workers, those aged 16-19, faced the highest unemployment rate at 19.13%, though this marks a significant improvement from the 26.43% seen in 2018. This decrease could reflect better access to entry-level jobs or effective youth employment programs that have been implemented over the years.

Chart 36: Unemployment Rates by Age (2022)



Source: U.S. Census Bureau (S2301)

The 20-24 age group also shows a notable improvement, with the unemployment rate decreasing from 13.35% in 2018 to 11.75% in 2022. This group often includes recent graduates entering the workforce, suggesting that job opportunities for new entrants might be improving.

For the 25-29 and 30-34 age brackets, the rates are 7.42% and 6.83% respectively, showing slight improvements from 2018. These groups are typically establishing their careers, and the slight decreases in unemployment rates suggest moderate economic stability for these workers.

Middle-aged workers, particularly those aged 45-54, have seen a substantial improvement in employment, with the unemployment rate dropping from 5.05% in 2018 to 3.25% in 2022. This improvement could be indicative of a robust mid-career job market or the success of re-skilling programs targeting mid-career individuals.

Interestingly, the 60-64 age group's unemployment rate decreased from 5.15% to 3.98%, and the 65-74 group also improved slightly from 5.13% to 4.88%. These changes might reflect a trend of older individuals either continuing in or returning to the workforce, possibly due to economic necessity or improved health enabling longer working lives.

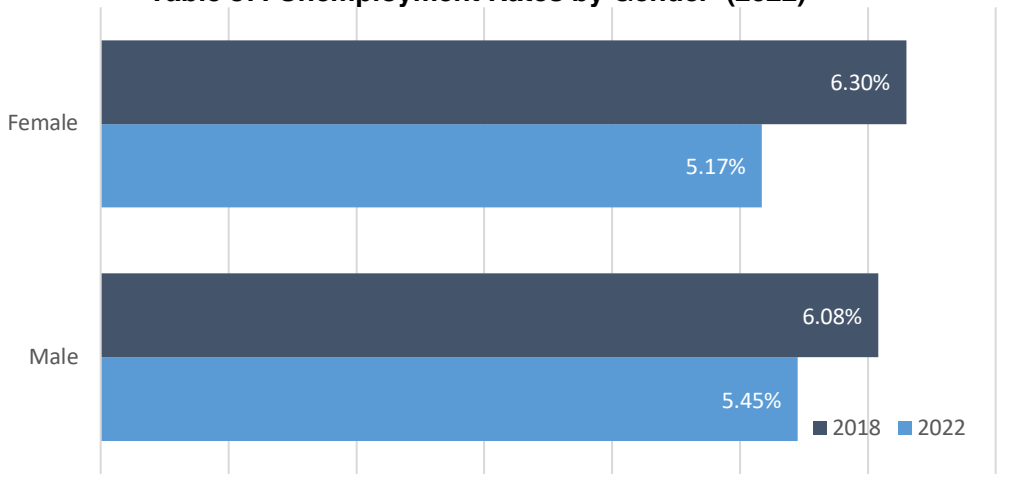
Conversely, those over 75 saw an increase in unemployment from 5.10% to 7.10%. This uptick could be due to various factors including challenges in finding suitable employment opportunities for the oldest segment of the workforce or insufficient retirement savings forcing continued employment.

Overall, the reduction in unemployment rates across most age groups from 2018 to 2022 suggests effective regional economic policies and a recovering job market. However, the significant unemployment rates, particularly among the youngest and oldest, underscore the need for ongoing targeted support to ensure these groups are not left behind in the labor market. This could include enhancing job training and education programs for young workers and creating flexible or part-time employment opportunities tailored to older workers.

Unemployment Rates by Gender

The unemployment rates by gender for 2022 compared to 2018 show significant improvements for both males and females, with each group experiencing reductions in unemployment. Males experienced a decrease of 10.36%, with females improving by 17.94%.

Table 37: Unemployment Rates by Gender (2022)



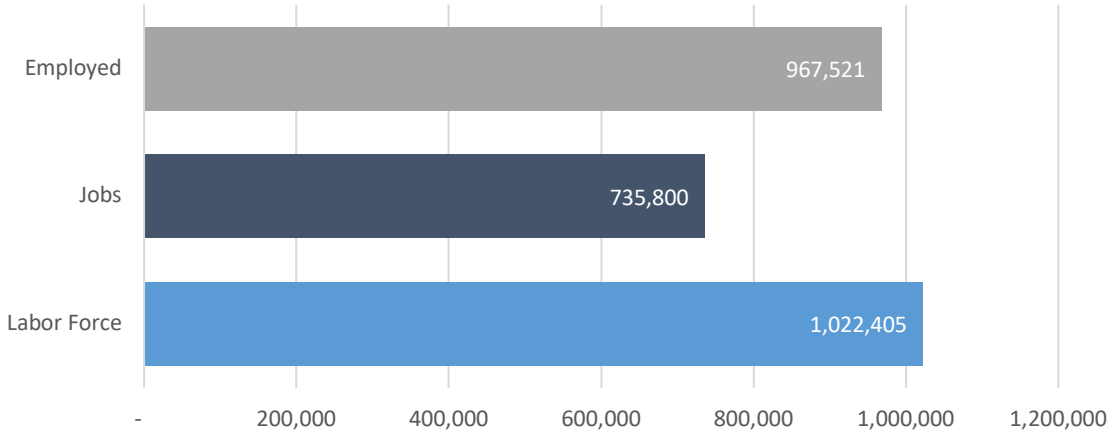
Source: U.S. Census Bureau (S2301)

This shift is particularly noteworthy as it marks a reversal in the historic trend where females typically had higher unemployment rates than males. This positive trend highlights the effectiveness of efforts to create a more inclusive and equitable labor market. It underscores the importance of maintaining and expanding these initiatives to ensure that the gains are sustained and that the labor market continues to evolve in a way that benefits all members of the community, regardless of gender.

Job Availability

Job availability is a crucial component of a healthy economy, demonstrating the capacity of a community to provide suitable employment for its local labor force. Failure to provide an adequate number of employment opportunities indicates a need for residents to travel outside of the area for employment, often increasing the impact of transportation and childcare barriers.

Chart 38: Employment Infrastructure vs Labor Force (2022)



Source: US Census Bureau (DP03) | Bureau of Labor Statistics

In analyzing the current employment situation within the region, it is evident that there is a substantial gap between the labor force and the number of jobs available. The labor force consists of 1,022,405 individuals, whereas the number of jobs available within the region is significantly lower at 735,800. This is a deficit of 286,605 jobs.

Furthermore, despite the apparent shortfall in job availability, the number of individuals employed stands at 967,521. This higher employment figure compared to the number of jobs suggests that a significant number of residents commuting to jobs outside the region, which could exacerbate issues related to commuting times and work-life balance.

The regional job deficit highlights a critical area of concern for economic planning and development. To address this imbalance, targeted efforts to stimulate job creation within the region are necessary. This could involve incentivizing businesses to set up operations locally, enhancing vocational training and education to align the local workforce's skills with the needs of industries that are expanding or emerging within the region, and improving transportation infrastructure to reduce the commuting burden on working residents.

Overall, strengthening the job market locally not only aids in reducing unemployment but also supports broader economic stability by ensuring that residents have access to suitable employment opportunities close to home. This can lead to enhanced quality of life and can help in curbing the economic drain that occurs when a substantial portion of the workforce commutes to areas outside the region for work.

Industry and Wage Study

The study of industry and wage dynamics is paramount for a comprehensive socioeconomic analysis. It offers insights beyond mere job availability, diving into whether the employment opportunities in a community adequately support its residents' economic welfare. Examining the variety of industries present and analyzing the wages they offer sheds light on the economic viability and the potential for sustainable livelihoods within the county. This nuanced understanding is critical, as it pinpoints sectors that underpin the local economy and identifies gaps where economic interventions could be most effective.

Table 30: Industry and Wage Study (2022)

Industry	Jobs	Avg. Wage
Agriculture	336	$45,006
Mining	88	$17,251
Utilities	1,864	$78,416
Construction	38,965	$71,175
Manufacturing	50,642	$69,069
Wholesale	45,491	$87,412
Retail	91,021	$38,779
Transportation	26,468	$59,787
Information	18,757	$98,605
Finance/Insurance	29,054	$82,706
Real Estate	12,398	$71,396
Professional/Technical	51,886	$78,897
Management	13,578	$80,574
Administrative/Waste	57,103	$49,309
Education	26,226	$68,263
Health/Social	90,545	$62,998
Arts/Entertainment	7,801	$26,039
Accommodation/Food	61,018	$22,906
Federal Government	14,938	$80,522
State Government	12,092	$46,709
Local Government	61,639	$57,135
Other	19,239	$45,253
Unclassified	4,651	$58,682
Total	**735,800**	**$60,734**

Source: Bureau of Labor Statistics

The Retail industry emerges as the largest employer, providing 91,021 jobs, although it offers lower average wages at $38,779. Similarly, the Health and Social Services sector plays a crucial role, employing 90,545 individuals, indicative of its foundational importance to the community's well-being. Manufacturing also stands out as a key employer with 50,642 jobs, offering a higher average wage of $69,069, which suggests better economic stability for its workers.

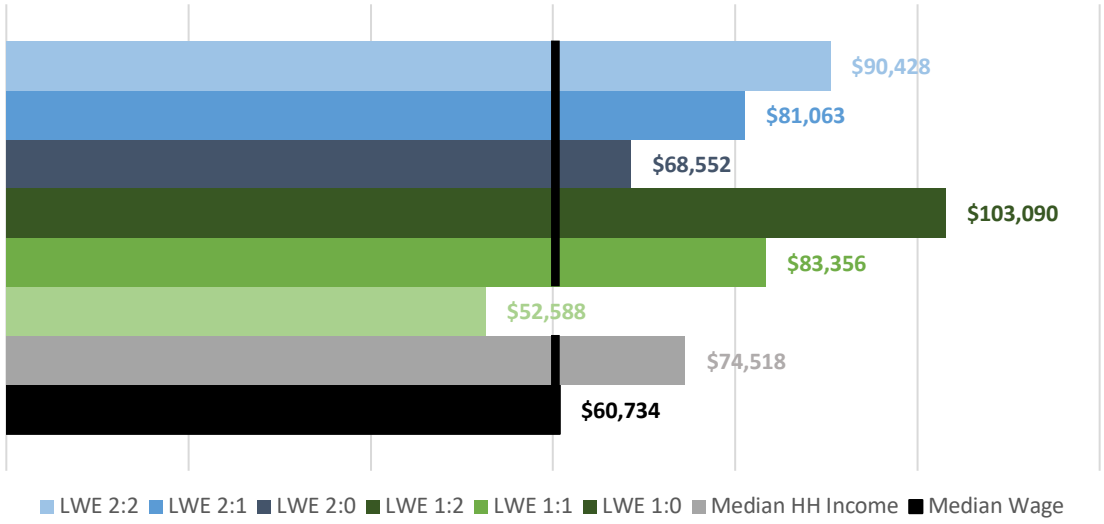
On the front of wage offerings, the Information Technology sector leads with the highest average wages at $98,605, followed by Wholesale ($87,412), Finance/Insurance ($82,706), Management ($80,574) and Federal Government ($80,522).

It should be noted that the number of jobs in the region has increased by 5.61% since the previous assessment, and by 9.92% from the 2018 report. The current wage is an increase of 2.72% from the previous community assessment, and 21.62% higher than the report generated in 2018.

Under-Employment

Under-employment is a critical yet often overlooked aspect of labor statistics. It occurs when individuals are working, yet the income they earn is insufficient to meet the cost of living in their community. Although a community's employment rates may appear robust, under-employment may signal a mismatch in the labor market, highlighting the need for economic strategies that foster job creation in line with the living wage standards and skill levels of the workforce.

Chart 39: Median Wage vs. Cost of Living (2022)



Source: US Census Bureau (S1903) , MIT Living Wage Calculator

The median wage in the region is $60,734, which falls short of meeting the cost of living for any household configuration other than a single adult without children. Even for a single adult, the median wage is barely adequate, as the living wage requirement for one adult with no children is $52,588, providing a minimal buffer above essential living costs.

This analysis underscores the challenges faced by families, particularly those with children or single-parent households, where the cost of living significantly exceeds the median wage. For instance, a single adult with two children would require a living wage of $90,428, far surpassing the median wage. Similarly, households with two adults and two children need $81,063 to meet living wage standards, indicating a substantial gap between earnings and the necessary income to support a family.

Such data is crucial as it points to the need for economic policies that not only create more jobs but ensure these jobs offer wages that align more closely with the real economic demands faced by residents. Strategies may include encouraging industries that offer higher wages, improving educational and training programs to elevate the workforce's skill level, and promoting full-time employment opportunities that can provide a living wage. Addressing under-employment is essential for fostering a truly healthy economy where fewer residents are forced to juggle multiple jobs or stretch insufficient incomes to meet basic needs, thereby enhancing the overall quality of life within the community.

As a result of the region's wages, data indicates that 53,323 members of the local labor force earn wages below the nationally recognized poverty level. This represents 5.52% of all workers and more than three-quarters (80.12%) of all able-bodied adults who are living below the poverty level.

Table 31: Working Poor by County (2022)

Area	Number of Working Poor	% of Workers	% of Low Income Labor Force
DeKalb	22,905	5.92%	76.53%
Gwinnett	24,223	5.02%	83.53%
Newton	3,813	7.25%	82.11%
Rockdale	2,382	5.50%	79.93%
REGION	**53,323**	**5.52%**	**80.12%**
STATE	**312,061**	**6.18%**	**79.95%**
NATION	**8,929,884**	**5.65%**	**78.70%**

Source: U.S. Census Bureau (S1701, S2301, C18120)

Community Feedback

Community feedback highlights significant barriers to employment, with 129 out of 516 survey respondents identifying unemployment as a leading obstacle to economic security, and 94 noting under-employment as a critical issue. The most significant barriers to securing meaningful employment include a lack of job opportunities, insufficient skills and qualifications, criminal records, lack of transportation, and lack of childcare. Among the 156 respondents who experienced unemployment in the past year, a striking 71% (111 individuals) reported that they could not find any assistance during their time of need.

Qualitative feedback from the community paints a vivid picture of these challenges. One respondent expressed concern about job losses due to AI, while another highlighted the disparity between the availability of jobs and people's willingness or ability to work. Many comments emphasized that wages are too low to afford basic living expenses like rent, food, and utilities. For instance, one person noted, "We need adequate employment that pays enough to meet the basic requirements for living," while another lamented, "Most of our community members are working in jobs that pay between $7 and $12 per hour." The sentiment that "Minimum wage is not a livable wage!" was echoed by multiple respondents.

The impact of low wages and lack of job opportunities extends beyond financial strain. Several respondents linked unemployment and underemployment to broader social issues such as homelessness and mental health struggles. One individual stated, "I think unemployment is a big cause of the homelessness problem," and another highlighted the vicious cycle of low-paying jobs: "The lack of income stems from low paying jobs that won't allow you to afford to live in a decent community or even have enough to have an emergency savings account." This feedback underscores the urgent need for job creation, skills training, and support services to help residents achieve economic stability and improve their quality of life.

Agency Data

An estimated 927 members of the labor force were served by the organization in Fiscal Year 2022, 449 of whom were employed at the time of service. Among these employed individuals, 319 were working full-time with an average wage of $21,107, 124 were working part-time earning an average wage of $10,888, and 6 were self-employed with an average wage of $15,225.

The unemployment profile reveals a total of 478 individuals who were unemployed, representing a rate of 51.56% among the agency’s able-bodied customers. The median age of the unemployed was 40.43 years. The demographics of the unemployed included 1 ex-offender, 46 homeless individuals, 428 Black individuals, 424 females, and 2 veterans. The unemployment rates among different groups showed that all offenders were unemployed (100%), while the unemployment rate for non-offenders was 51.51%. Among the homeless, the unemployment rate was 44.23%, compared to 52.75% for those who were housed. The unemployment rate for Black individuals was 50.59%, while it was 56.00% for White individuals. Notably, none of the veterans were unemployed (0%).

This data highlights the economic challenges faced by the community, with significant portions of the population struggling to secure stable and sufficient employment. The high unemployment rates among certain demographics underscore the need for targeted employment support and resources.

2024 COMMUNITY ASSESSMENT

Employment Resources

Resource Name	Contact Information	Description
AARP Foundation	https://www.aarp.org/aarp-foundation/	Provides employment placement services to senior citizens through the Senior Community Service Employment Program (SCSEP).
Bobby Dodd Institute	678-365-0071	Provides employment placement services to disabled individuals in DeKalb and Rockdale counties.
Ceek to Fulfill	770-602-0543	Provides paid and unpaid internships to young adults residing in Rockdale County
Furniture Bank of Metro Atlanta	404-355-8530	Provides temporary employment internships (with a stipend) to unemployed veterans.
Georgia Department of Labor	dol.georgia.gov	Provides unemployment insurance benefits and job search assistance to individuals who are unemployed.
Goodwill	www.goodwill.org	Provides employment services to individuals with disabilities.
New Life Church	404-381-6731	Provides job search assistance to residents of DeKalb County.
Our House	404-522-6056	Provides workshops to assist residents of DeKalb County with resumé development, interview skills, and workplace etiquette.
Partnership for Community Action	404-929-2500	Provides job placement services and referrals to unemployed individuals throughout the region.
Streetwise	678-985-9915	Provides courses that help residents of Gwinnett County learn how to write a resumé and prepare for a job interview.
Urban League of Greater Atlanta	404-659-1150	Partners with employers in various industries to bridge the gap between talent ready participants and employers that seek to provide career opportunities in both public and private sectors.
WorkSource Georgia	404-982-7985	Provides job search assistance to unemployed and under-employed residents.
Wounded Warrior Project	404-974-9234	Provides job search assistance to unemployed veterans.

Conclusion: Strengths
The employment landscape in the region demonstrates several notable strengths that reflect positively on its economic health and resilience. A significant proportion, 67.96%, of residents aged 16 to 64 are actively engaged in the labor force, showcasing a community where the majority of able-bodied individuals are employed or seeking employment. This high level of labor force participation is crucial for driving economic growth and ensuring a robust local economy.

Over the last five years, the labor force in the region has expanded by 5.11%, a rate that significantly outpaces the national growth rate of 2.71% during the same period. This growth indicates a vibrant economic environment that is capable of attracting and maintaining a substantial workforce. Additionally, the region has seen a commendable decrease in its unemployment rate by 15.62% over these five years, with notable declines across various demographic groups. This includes substantial reductions in unemployment rates among racial groups such as White, Black, Other Race, and Multi-Racial communities, with Hispanic residents experiencing a dramatic decrease of 33.33%.

Furthermore, unemployment rates have dropped across all age categories, except for those over 75 years old. Both male and female workers have benefitted from these improvements, highlighting broad-based progress in employment conditions.

The number of jobs in the region has also risen by 5.61% since the last assessment and by 9.92% compared to the 2018 report, indicating not only recovery but also expansion. Coupled with this growth in job opportunities, wages have seen an increase of 2.72% from the previous community assessment and have risen by 21.62% since 2018. These wage increases are crucial for improving the standard of living and enhancing the purchasing power of the region's residents.

These statistics collectively underline the region's successful economic strategies and its capability to provide sustainable employment opportunities to its residents. The increases in jobs and wages, alongside a lowering unemployment rate, contribute to a more prosperous community poised for continued growth and development.

Conclusion: Weaknesses
While the labor force in the region has grown by 5.11%, this growth is slower compared to the state's increase of 6.19%. Additionally, the regional unemployment rate stands at 5.78%, which is higher than both the state average of 5.20% and the national average of 5.30%.

A troubling sign is the stagnation in the improvement of the unemployment rate since 2019, with a slight uptick of 1.94% in 2022. This stagnation could be due to insufficient job creation, economic downturns in key industries, or a mismatch between the available jobs and the skills of the labor force.

Specific demographic groups such as Pacific Islanders, Asians, and American Indians have seen an increase in unemployment rates over the past five years, pointing to possible systemic issues or sector-specific downturns affecting these communities disproportionately. Furthermore, there has been a significant 39% increase in unemployment among residents aged 75 and over, which could be attributed to a range of factors including age discrimination or lack of suitable job opportunities for older adults.

The job deficit is particularly concerning, with a shortfall of 286,605 jobs compared to the local labor force. This gap necessitates that many residents commute outside the region for work, exacerbating transportation and childcare challenges and affecting work-life balance and community cohesion.

Financial viability is also a pressing issue, as evidenced by the median wage of $60,734, which does not meet the living wage requirement for most household configurations beyond a single adult with no children. The median wage barely covers the living wage for a single adult, and this economic precariousness is reflected in the fact that 53,323 members of the labor force earn below the poverty level, which is 5.52% of all workers and represents a significant portion (80.12%) of able-bodied adults living below the poverty threshold in the region.

These weaknesses highlight the need for targeted economic strategies to improve job creation that aligns with living wage standards, enhance workforce skills matching, and support sectors that are lagging behind. Addressing these issues will be crucial in fostering a more robust and equitable economic landscape that supports all residents of the region.

Skills and Qualifications

Adult Education levels

The link between educational attainment and socio-economic outcomes is starkly illustrated by disparities in employment rates, median earnings, and poverty levels across different educational categories. Understanding this relationship is crucial in addressing the underlying factors contributing to poverty and designing effective interventions.

Table 32: Educational Impact on Employment/Wages (2022)

Education Level	Unemployment Rate	Median Earnings	Poverty Rate
Graduate Degree	3.38%	$77,752	4.78%
Bachelor's Degree		$58,028	
Associate degree	5.05%	$40,834	9.60%
Some College (No Degree)			
High School Diploma/GED	6.13%	$34,994	12.15%
No High School Diploma	4.38%	$28,234	20.10%

Source: U.S. Census Bureau (S1501, S2301, S1701)

Data from the region shows that higher education correlates strongly with lower unemployment rates and higher earnings. For instance, individuals with graduate degrees face an unemployment rate of only 3.38% and earn a median income of $77,752, which is significantly higher than those with lesser educational qualifications. This group also experiences a relatively low poverty rate of 4.78%. In contrast, those with only a high school diploma have an unemployment rate of 6.13%, earn significantly less at $34,994 median income, and have a higher poverty rate of 12.15%. The disparities are even more pronounced for those without a high school diploma, who not only earn the least, at $28,234, but also suffer the highest poverty rate at 20.10%, despite having a lower unemployment rate of 4.38%. This suggests that they may be employed in low-wage jobs that do not lift them above the poverty line.

The data clearly indicates that lower educational attainment is associated with higher economic vulnerability. Those with only some college education or an associate degree find themselves in a slightly better position than those with just a high school diploma, but still face considerable challenges. For example, individuals with an associate degree earn a median income of $40,834 and see a poverty rate of 9.60%. This points to underemployment where the jobs they can secure do not offer wages that can significantly elevate their living standards.

These educational impacts on employment and poverty underscore the importance of educational policies and adult education programs in poverty alleviation strategies. By focusing on increasing access to higher education and vocational training, policymakers can equip the workforce with the skills required to secure higher-paying jobs. Furthermore, targeted support for adult education can help reduce the underemployment rate by aligning workers' skills with the demands of the modern economy.

The relationship between education, employment, and earnings highlights the need for integrated approaches that consider educational outreach as part of economic development and poverty reduction strategies. Such initiatives not only benefit individuals but also enhance the overall economic health of the community by raising the standard of living and reducing dependency on social services.

The regional data reveals that a considerable number of adults face significant educational barriers. Specifically, 64,097 adults have never attended high school, and an additional 68,884 attended high school but did not obtain a diploma. This totals 132,981 residents without a high school diploma, representing a substantial portion of the community that is likely to encounter severe obstacles in the job market due to their limited educational qualifications.

Table 33: Adult Educational Attainment Level (2022)

Area	No HS	Some HS	HS Diploma	Some College	Assoc. Degree	Bach. Degree	Grad. Degree
DeKalb	12,369	25,050	105,920	86,349	40,059	137,065	106,756
Gwinnett	37,881	34,585	138,067	106,453	57,921	154,792	83,997
Newton	2,470	5,083	24,171	18,161	6,702	9,900	6,602
Rockdale	2,377	4,166	17,761	15,117	5,560	10,631	6,971
REGION	**64,097**	**68,884**	**285,919**	**226,080**	**110,242**	**312,388**	**204,326**
STATE	**305,721**	**502,918**	**1,943,296**	**1,404,339**	**594,639**	**1,464,589**	**943,118**
NATION	**10,742,781**	**13,853,917**	**59,741,825**	**44,692,390**	**19,815,732**	**47,391,673**	**30,359,674**

Source: U.S. Census Bureau ACS (DP02)

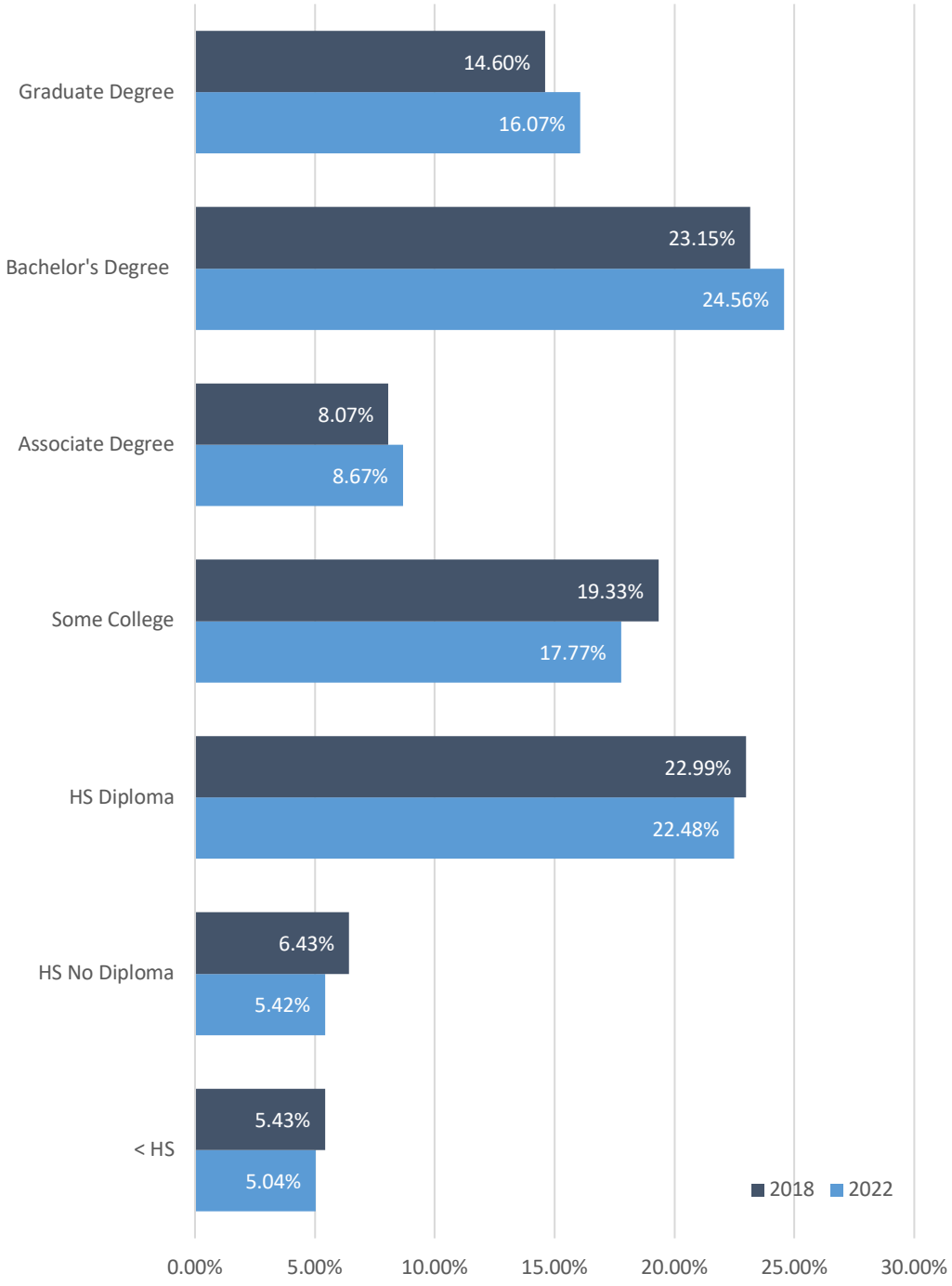
Among those who completed high school or an equivalent (285,919 residents), there is a foundational level of education that likely provides better job opportunities compared to those without any high school education. Furthermore, the region shows a strong pursuit of higher education with 226,080 residents having some college experience without earning a degree and 110,242 obtaining an associate degree. This indicates a significant number of individuals engaged in higher education, albeit many without completing a four-year degree program.

These variations in educational attainment suggest differentiated needs across the community, highlighting crucial areas for targeted educational interventions. Programs that encourage the completion of high school education, support for obtaining GEDs, and initiatives facilitating degree completion for those with some college education could be particularly impactful. Such strategies not only aim to bridge the immediate educational gaps but also enhance the long-term economic fabric of the region by improving employability and potential earnings for a larger segment of the population.

Focusing on educational advancement will address core issues associated with underemployment and poverty, and create a robust workforce equipped to meet the demands of a dynamic economy. This approach is essential for reducing disparities in unemployment and income levels across different educational backgrounds, promoting a more equitable and thriving community.

Over the past five years, the region has experienced notable shifts in educational attainment among its residents, reflecting broader social and economic trends. The data shows a general trend towards higher educational qualifications, which is crucial for enhancing individual economic opportunities and the overall economic health of the community.

Chart 40: Adult Educational Attainment Change Comparison (2018/2022)



Source: U.S. Census Bureau ACS (DP02)

The community has made notable strides in improving educational attainment among its residents. Specifically, there has been a 7.18% decrease in the number of individuals who have not attended high school at all. Furthermore, the proportion of residents who attended high school but did not graduate has seen an even more significant decline of 15.71%. These reductions indicate the effectiveness of community and educational outreach initiatives aimed at promoting the importance of formal education and ensuring more residents complete their high school education.

In addition to the improvements at the lower end of the educational spectrum, there are encouraging trends across other educational levels. The number of residents with only a high school diploma and no college education has decreased by 2.22%. Similarly, the percentage of those who have attended some college but did not obtain a degree has dropped by 8.07%. These declines suggest that more residents are pursuing higher education beyond high school, leading to better educational outcomes.

On the other hand, there have been significant increases in higher educational attainment. The community has seen a 7.43% rise in the number of individuals with an associate degree, indicating that more residents are completing two-year college programs. Additionally, the percentage of residents holding a bachelor's degree has increased by 6.09%, while those with graduate degrees have seen the most substantial growth, rising by 10.07%. These positive trends highlight a growing emphasis on advanced education and a commitment to achieving higher levels of academic success within the community.

Overall, these statistics paint a picture of a community that is making considerable progress in elevating its educational standards. The combined efforts of educational institutions, community organizations, and outreach programs are evidently yielding fruitful results, as more residents attain higher levels of education and enhance their prospects for future success.

Table 34: Educational Attainment by Age Group (2022)

Education Level	18-24	25-34	35-44	45-64	65+
Less Than High School	26,987	24,409	32,612	47,940	28,020
High School Diploma	126,448	132,088	122,322	245,324	122,507
College Degree	23,924	119,101	116,358	200,988	80,267
TOTAL POPULATION	**177,359**	**275,598**	**271,292**	**494,252**	**230,794**

Source: U.S. Census Bureau ACS (S1501)

The educational attainment data by age group for 2022 reveals interesting trends that highlight the varying educational levels across different generations in the region. This data is pivotal for understanding the demographic composition of educational qualifications, which in turn can inform targeted educational programs and policy decisions.

Among individuals aged 18-24, 15.22% lack a high school diploma, the highest percentage among all age groups, while 84.78% have at least a high school education, including those with college degrees. This age group also has the lowest percentage of college degree holders at 13.49%. This may reflect the fact that many individuals in this age range are still in the process of completing their education.

In the 25-34 age group, the percentage of individuals without a high school diploma drops to 8.86%, and 91.14% have at least a high school education. This age group has the highest percentage of college degree holders at 43.22%. This likely corresponds to a period in life when many individuals have completed higher education and are entering or advancing in their careers.

For those aged 35-44, 12.02% lack a high school diploma, and 87.98% have at least a high school education, with 42.89% holding college degrees. This age group is often in the midst of their careers, and their educational attainment reflects a strong foundation for professional growth and stability.

The 45-64 age group shows 9.70% without a high school diploma and 90.30% with at least a high school education, with 40.67% holding college degrees. Individuals in this age range are typically at the peak of their careers or preparing for retirement, and their educational levels support sustained employment and income stability.

Among individuals aged 65 and older, 12.14% lack a high school diploma, 87.86% have at least a high school education, and 34.78% hold college degrees. This generation's educational attainment may reflect historical trends and changes in access to education over time, as well as the value placed on higher education during their formative years.

These patterns indicate that younger individuals, particularly those aged 18-24, are more likely to lack a high school diploma compared to older age groups. The highest educational attainment, including college degrees, is found in the 25-34 and 35-44 age groups, while older age groups show a decline in college degree attainment. This analysis highlights the importance of addressing educational barriers to reduce poverty and improve outcomes for all age demographics.

When race is evaluated as a factor, the percentages of individuals without a high school diploma highlight the need for educational support among certain racial groups. White individuals have a low percentage of 6.60% without a high school diploma, while Black individuals have a slightly higher percentage at 7.39%. American Indians show a significantly higher percentage at 36.42%, indicating a substantial need for educational support. Similarly, Asians have 16.12% without a high school diploma, and Pacific Islanders have 19.25%. The Other Race category shows the highest percentage at 40.29%, while Multi-Racial individuals stand at 20.90%.

Table 35: Educational Attainment by Race (2022)

Race	Less Than High School	HS Diploma	College Degree	TOTAL
White	32,984	215,628	251,476	500,088
Black	37,650	301,023	170,684	509,357
American Indian	1,985	2,823	642	5,450
Asian	19,407	40,560	60,422	120,389
Pacific Islander	139	345	238	722
Other Race	25,779	29,978	8,192	63,949
Multi-Racial	15,037	31,884	25,060	71,981

Source: U.S. Census Bureau ACS (S1501)

Regarding college graduation rates, White (50.29%) and Asian (50.19%) populations have the highest percentages of college graduates. In contrast, American Indian (11.78%) and Other Race (12.81%) populations have the lowest rates, highlighting the need for focused efforts to increase college attainment within these groups. Black individuals have a college graduation rate of 33.50%, which is lower than that of White and Asian populations but higher than that of American Indian and Other Race groups. Pacific Islanders have a college graduation rate of 32.97%, while Multi-Racial individuals have a rate of 34.81%.

The data suggests that the White and Black populations have relatively low percentages of individuals without a high school diploma, with similar basic educational attainment levels. However, there is a significant difference in higher education attainment, with the Black population having a

lower percentage of college graduates compared to the White population. The American Indian and Other Race groups have the highest percentages of individuals without a high school diploma and the lowest college graduation rates, indicating a critical need for educational support and resources to improve their outcomes.

The Asian population exhibits a polarization in educational attainment, with a high percentage achieving college degrees but also a notable portion lacking a high school diploma. This suggests that while many Asians achieve high levels of education, there is still a significant segment that may need basic educational support. Pacific Islanders and Multi-Racial individuals also show varied educational outcomes, with moderate to high percentages lacking a high school diploma and lower college graduation rates.

In summary, the data highlights the need for tailored educational programs to address the specific needs of each racial group. Efforts should focus on reducing the high percentages of individuals without a high school diploma, particularly among American Indian and Other Race groups, while also improving college graduation rates. This analysis can inform policies and initiatives aimed at achieving educational equity and supporting community development.

Literacy

Literacy is a fundamental skill essential for employment and economic mobility. High literacy levels are correlated with a greater likelihood of securing quality employment, as many jobs require the ability to read, write, and understand complex information. Conversely, low literacy can limit job opportunities, confine individuals to lower-paying roles, and increase the risk of unemployment, thereby exacerbating the cycle of poverty. According to the National Center for Education Statistics (NCES), adults with lower literacy skills are more likely to report being out of the labor force, have lower median weekly earnings, and face higher rates of poverty. These statistics underscore the critical role literacy plays in an individual's capacity to engage effectively in the workforce and achieve financial independence.

Table 36: Literacy Deficient Individuals/Rate (2013-2017 Avg.)

Area	%	#
Dekalb	24.00%	145,437
Gwinnett	22.00%	162,083
Newton	26.00%	22,752
Rockdale	27.00%	20,019
REGION	24.75%	372,334

Source: National Center for Educational Statistics

The regional data on literacy deficiencies, averaged over the period from 2013 to 2017, reveals that 24.75% of the population is identified as literacy deficient. This equates to a total of 372,334 individuals who lack essential literacy skills across the region. This high percentage highlights the widespread nature of literacy challenges and underscores the urgent need for comprehensive and targeted literacy programs.

When examining individual counties, Dekalb has a literacy deficiency rate of 24.00%, affecting 145,437 individuals. Gwinnett, with a slightly lower percentage of 22.00%, still has a substantial number of literacy-deficient individuals, totaling 162,083. Newton exhibits a higher literacy deficiency rate at 26.00%, which translates to 22,752 individuals. Rockdale faces the highest literacy deficiency rate at 27.00%, with 20,019 individuals lacking essential literacy skills.

These statistics demonstrate the varying degrees of literacy challenges across different counties within the region. Dekalb and Gwinnett, despite having slightly lower percentages, still contend with large absolute numbers of individuals who need literacy support. Newton and Rockdale, with their higher percentages, indicate a more acute need for targeted literacy interventions. Addressing these deficiencies is crucial for improving employment opportunities, economic mobility, and overall quality of life for the affected populations throughout the region.

Numeracy

Numeracy is a critical skill set that encompasses the ability to count or perform simple arithmetic. It can also involve the ability of a person to access, interpret, and communicate mathematical information and ideas to meet the complex demands of various situations in adult life. According to the National Center for Educational Statistics (NCES), adults who are classified as below level 1 are not considered functionally numerate, meaning they struggle with tasks like counting, sorting, and identifying elements of simple graphs and spatial representations. This lack of numeracy skills can significantly impact a person's employability and financial management capabilities, as it affects their ability to perform tasks that are essential for many jobs and to manage household budgets effectively. It is also a factor that can contribute to an individual's likelihood of experiencing poverty, as it limits their job opportunities and ability to engage with financial and economic systems. Numeracy is integral to understanding and making informed decisions based on numerical data, which is an essential part of daily life and work in the modern world.

Table 37: Numeracy Deficient Individuals/Rate (2013-2017 Avg.)

Area	%	#
DeKalb	39.00%	236,355
Gwinnett	33.00%	243,124
Newton	41.00%	35,878
Rockdale	43.00%	31,882
REGION	**39.00%**	**586,708**

Source: National Center for Educational Statistics

The regional data on numeracy deficiencies, averaged over the period from 2013 to 2017, indicates that 39.00% of the population is identified as numeracy deficient, totaling 586,708 individuals. This high percentage highlights the extensive challenge of numeracy deficiencies and underscores the urgent need for targeted numeracy programs and interventions across the region.

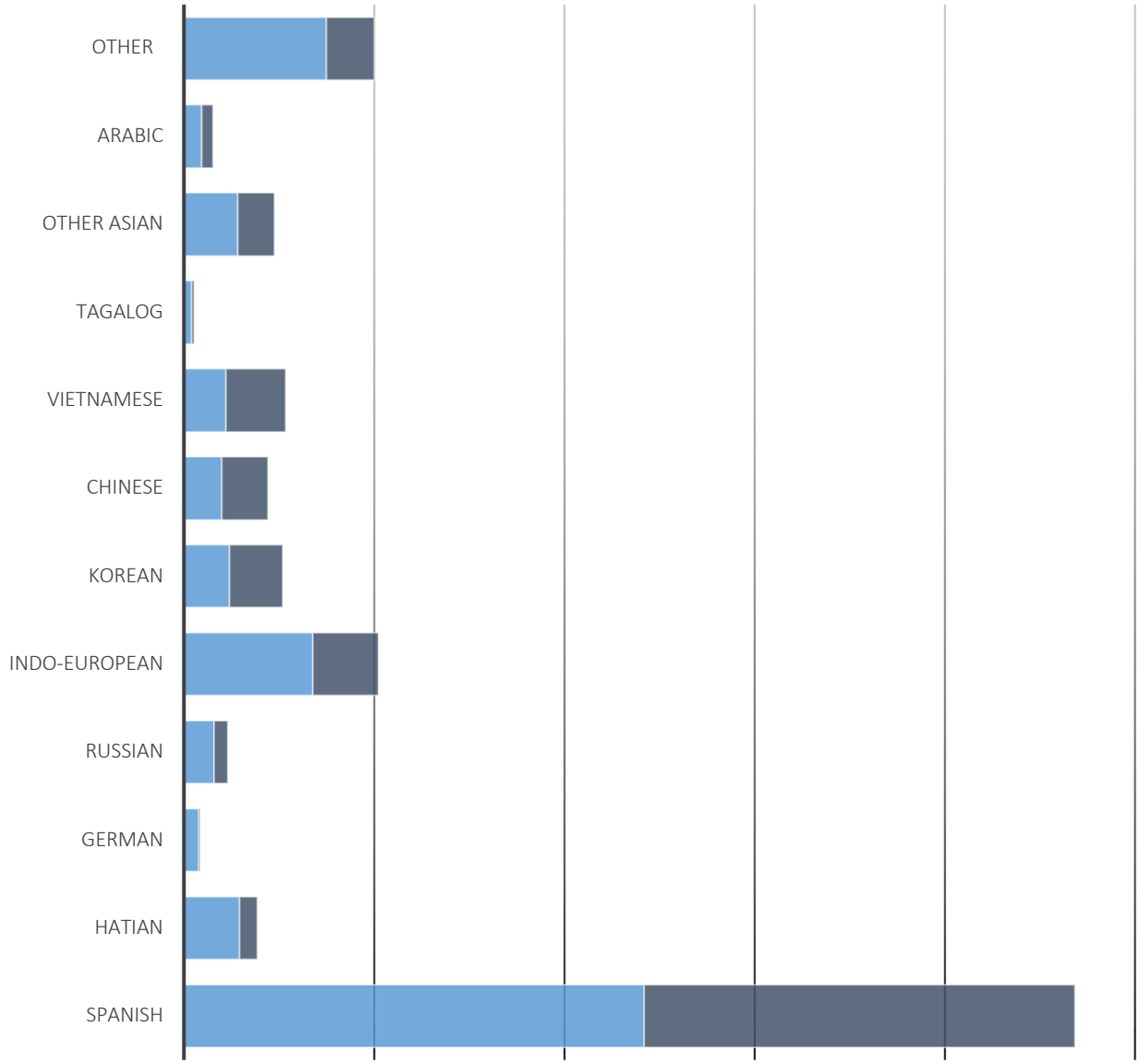
When examining individual counties, Dekalb has a numeracy deficiency rate of 39.00%, affecting 236,355 individuals. Gwinnett, with a slightly lower percentage of 33.00%, has a significant number of numeracy-deficient individuals, totaling 243,124. Newton exhibits a higher numeracy deficiency rate at 41.00%, impacting 35,878 individuals. Rockdale faces the highest numeracy deficiency rate at 43.00%, with 31,882 individuals lacking essential numeracy skills.

These statistics demonstrate the varying degrees of numeracy challenges across different counties within the region. Dekalb and Gwinnett, despite having slightly lower percentages, still contend with large absolute numbers of individuals who need numeracy support. Newton and Rockdale, with their higher percentages, indicate a more acute need for targeted numeracy interventions. Addressing these deficiencies is crucial for enhancing employment opportunities, financial management capabilities, and overall quality of life for the affected populations throughout the region.

English Proficiency

A study conducted by the U.S. Census Bureau concluded that people who speak languages other than English at home are less likely to be employed, less likely to find full-time work when employed, and even when they find full-time employment, they experience lower median earnings than those who speak English. Among those who speak another language, employment, work status, and earnings vary directly with their language proficiency. On average, workers who speak English earn significantly more than those who speak another language.

Chart 41: Resident Primary Language with Proficiency Barriers (2022)



	Spanish	Hatian	German	Russian	Indo-European	Korean	Chinese	Vietnamese	Tagalog	Other Asian	Arabic	Other
No Barriers	120,971	14,646	3,851	7,998	33,935	12,039	10,002	10,984	2,026	14,099	4,704	37,468
Potential Barriers	113,265	4,668	434	3,521	17,129	13,844	12,122	15,771	632	9,625	2,989	12,633

Source: U.S. Census Bureau (C16001)

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Recent data from the American Community Survey (ACS) indicates that nearly one in 10 working-age U.S. adults (19.2 million people aged 16 to 64) is considered limited English proficient (LEP). LEP adults earn 25 to 40 percent less than their English proficient counterparts. This earnings gap exists across all levels of educational attainment, including those with a high school diploma or a college degree. The disparity highlights the significant economic impact of English proficiency on an individual's ability to secure better-paying jobs and achieve financial stability.

In the area served by the organization, an estimated 206,633 residents were noted as having language barriers, more than half (54.81%) of which were Spanish speakers.

Investing in English language instruction is crucial for enhancing the human capital and economic mobility of the LEP workforce. Increasing funding and access to adult education programs can help bridge the gap and improve employment outcomes for this population. The ACS data remains a chief source of current information about the LEP population in the United States and continues to inform policies aimed at improving the economic integration of immigrants and other LEP individuals.

Community Feedback

Among the 516 survey respondents, 69 identified this issue as a leading barrier, and of the 58 residents who personally experienced this barrier, 46 reported being unable to find help when needed. The lack of qualifications was noted as the second leading barrier to meaningful employment, with 95 respondents highlighting it as a problem.

When asked which specific skills or qualifications posed the greatest barriers to employment, residents cited various challenges. The most significant barrier identified was a lack of literacy skills, mentioned by 37 respondents. Other notable barriers included inadequate office skills (33), technical skills (32), absence of a high school diploma (32), lack of college education (30), insufficient digital skills (29), missing required certifications (25), lack of soft skills (20), and inadequate language skills (16).

Residents also reported numerous obstacles they face when trying to improve their qualifications. Out of 73 respondents, 50 highlighted a lack of community resources, and 40 mentioned a lack of awareness of existing resources. Other barriers included insufficient transportation to available resources (33), inability to afford these resources (30), lack of childcare (23), insufficient online options (20), lack of computer/internet access (21), discrimination (17), and lack of time (11). Qualitative feedback further underscores these challenges. Many residents expressed difficulties in finding good jobs due to a lack of education and training. Comments included the need for more job workshops and career training opportunities, the necessity of having skills or a degree for better-paying jobs, and the struggle many face in qualifying for certain jobs due to inadequate skills and education.

Agency Data

In 2022, the organization served 1,139 working-aged adults between the ages of 18 and 64. The educational attainment levels of these individuals varied significantly. Among them, 160 did not complete high school, 383 completed high school without pursuing a higher degree, 50 had completed a GED, 339 attended some college, 187 had a college degree, and 19 had a graduate degree.

Residents without a high school diploma were predominantly Black (86.88%) and female (88.13%), with a median age of 40.96 years. Employment outcomes for this group were challenging, with less than half (48.75%) in the labor force and unemployed, while 35.63% were employed. The remaining 15.62% were disabled. For those employed, the median wage was $25,757.39 annually, significantly lower than the $44,879.24 earned by employed individuals with a high school diploma or GED.

Adult Education/Skills Development Resources

Resource Name	Contact Information	Description
Ceek to Fulfill	770-602-0543	Assists youth and young adults to obtain their GED/High School Diploma through training and financial support services. Provides assistance with college selection, application fees, and entrance exam fees and preparation.
Georgia Piedmont Technical College	404-297-9522	Provides high school equivalency preparation assistance, GED testing, ESL classes, and a variety of technical education courses that can promote access to living wage employment opportunities.
Goodwill	www.goodwill.org	Provides job skills education to individuals with disabilities.
Job Corps	www.jobcorps.gov	Provides o-cost education and vocational training to youth between the ages of 14 and 24.
Our House	404-522-6056	Provides soft skills training to residents of DeKalb County.
Streetwise	678-985-9915	Provides courses that educate and train clients on basic life skills.
U.S. Department of Education	1-800-USA-LEARN	Provides student financial aid to help make college education a possibility for every dedicated mind through federal grants, loans, and work study funds.
U.S. Department of Veterans Affairs (VA)	1-800-698-2411	Provides veterans with funds for skills development and post-secondary education.
Urban League of Greater Atlanta	404-659-1150	Provides GED preparation, computer training, and other skills development services.
Vocational Rehabilitation	gvs.georgia.gov	Provides job skills education to individuals with disabilities.
WorkSource DeKalb	404-982-7985	Provides job training and literacy assistance to residents of DeKalb County.

Conclusion: Strengths
The educational data highlights several positive aspects within the region. A significant number of residents have achieved higher educational qualifications, which correlates strongly with better socio-economic outcomes. For instance, individuals with graduate degrees experience the lowest unemployment rate at 3.38% and the highest median earnings at $77,752, coupled with a low poverty rate of 4.78%. Additionally, a large portion of the population has at least some college experience, with 226,080 residents having attended college without earning a degree and 110,242 holding an associate degree. This demonstrates a strong pursuit of higher education, indicating that many individuals are striving for better job opportunities and economic stability.

Among specific age groups, those aged 25-34 exhibit the highest percentage of college degree holders at 43.22%, reflecting their stage in life where many have completed higher education and are advancing in their careers. Similarly, the age groups 35-44 and 45-64 also show high educational attainment, supporting sustained employment and income stability. These trends are indicative of a community that values education and its role in improving individual and collective economic well-being.

Conclusion: Weaknesses
Despite positive trends, several areas of concern regarding educational attainment need to be addressed. A significant portion of the adult population faces educational barriers, with 132,981 residents lacking a high school diploma, which poses severe obstacles in the job market. This group is likely to encounter high unemployment rates and lower median earnings, exacerbating economic vulnerability.

Disparities in educational attainment across racial groups further highlight the need for targeted support. American Indians and individuals classified under "Other Race" show the highest percentages of those without a high school diploma, at 36.42% and 40.29% respectively, indicating a critical need for educational intervention. These groups also have the lowest college graduation rates, which limits their opportunities for higher-paying jobs and economic advancement.

Literacy and numeracy deficiencies present additional challenges. The regional data on literacy reveals that 24.75% of the population, or 372,334 individuals, are identified as literacy deficient. This high percentage underscores the urgent need for comprehensive literacy programs to improve basic reading and writing skills, which are essential for employment and economic mobility. Similarly, numeracy deficiencies affect 39.00% of the population, totaling 586,708 individuals. These individuals struggle with basic arithmetic and interpreting numerical information, which significantly impacts their employability and ability to manage personal finances.

Overall, while there are strengths in the educational landscape, addressing these weaknesses is crucial for enhancing educational equity and improving socio-economic outcomes for all community members. Focusing on reducing literacy and numeracy deficiencies, supporting educational completion, and providing targeted interventions for racial and language groups with high educational barriers can help create a more equitable and thriving community.

Child/Youth Education

Introduction

The importance of education in alleviating long-term poverty cannot be overstated. Access to quality education from a young age equips children with critical skills, increasing their future economic opportunities and potential to break the cycle of poverty that may have affected their families. The Urban Institute reports that education is a crucial element in disrupting the persistence of poverty across generations. By providing the tools for academic and personal success, society can create pathways for children to not only achieve financial stability but also contribute to the broader economic health of their communities.

School-Aged Children (Age 5-17)

There are 354,882 school-aged children in the region. Gwinnett County has the highest concentration, accounting for 54.32% of the total school-aged population with 192,798 children. DeKalb County follows with 34.57%, representing 122,689 children. Newton County has 6.21% of the school-aged population, totaling 22,028 children. Rockdale County has the smallest share, comprising 4.89% of the total with 17,367 children.

Table 38: School-Aged Children by Age Group/County (2022)

Area	5-9 Years	10-14 Years	15-17 Years	TOTAL (5-17)
DeKalb	45,659	49,756	27,274	122,689
Gwinnett	67,859	77,101	47,838	192,798
Newton	7,486	8,977	5,565	22,028
Rockdale	5,988	6,976	4,403	17,367
REGION	**126,992**	**142,810**	**85,080**	**354,882**

Source: U.S. Census Bureau (DP05)

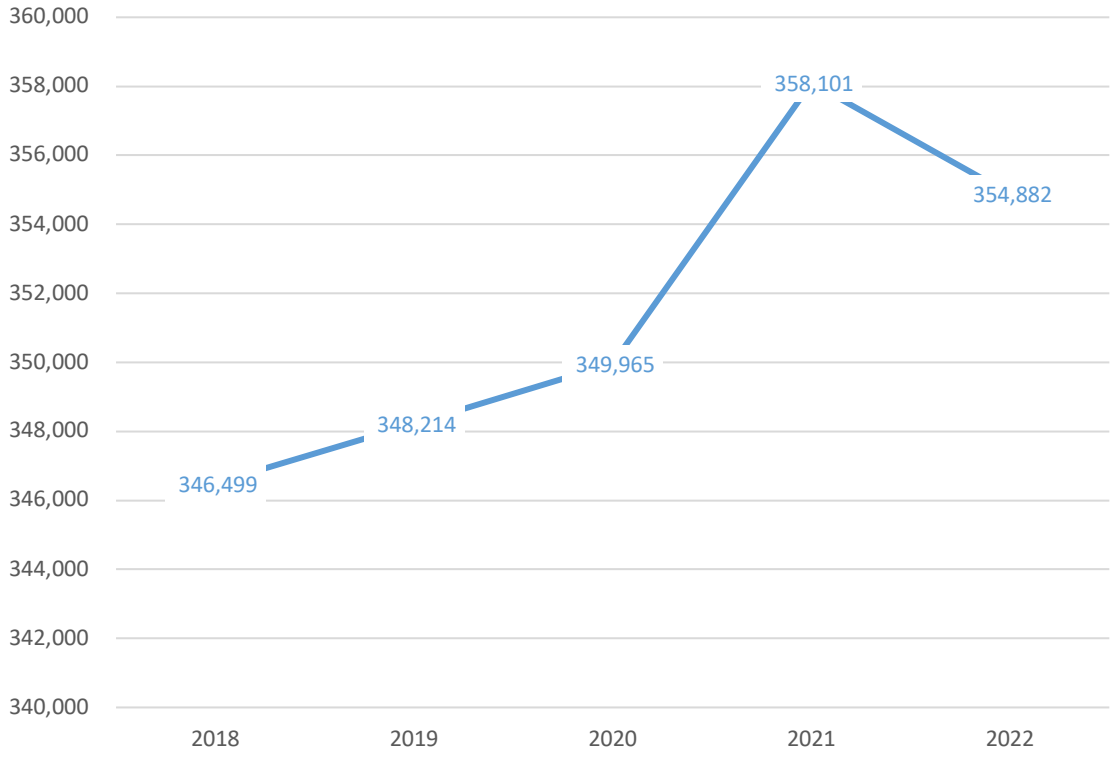
The region has a total of 126,992 children in the elementary school age group (5-9 years). This represents a significant portion of the school-aged population, indicating a strong need for robust elementary education programs. Early education is critical as it lays the foundation for future learning and development. Ensuring these young students have access to quality education and resources is essential for their academic growth and overall well-being.

In the age group corresponding primarily with middle school enrollment (10-14 years), there are 142,810 children. This group is larger than the elementary school age group, highlighting the importance of preparing adequate resources to support students as they transition from elementary to middle school. Middle school is a pivotal time for cognitive and social development, requiring focused educational strategies. Providing support during this transitional period can help students build strong academic skills and personal resilience.

The age group corresponding primarily with high school enrollment (15-17 years) consists of 85,080 children. This is the smallest of the three age groups, reflecting the typical demographic trend where the number of children decreases with age due to various factors, including graduation and early school leaving. High school education is crucial for preparing students for higher education or entry into the workforce, making it essential to address the specific educational needs of this group. Ensuring that high school students receive appropriate guidance and support can help them achieve their academic goals and set a strong foundation for their future careers.

The chart depicting the school-aged population trend from 2018 to 2022 reveals interesting fluctuations over the five-year period. In 2018, the school-aged population in the region was 346,499. This number saw a steady increase over the next two years, rising to 348,214 in 2019 and 349,965 in 2020. This gradual upward trend suggests a growing number of school-aged children in the region during these years, possibly due to demographic factors such as higher birth rates in previous years or an influx of families with children into the area.

Chart 42: School-Aged Population Trend (2018-2022)



Source: U.S. Census Bureau (DP05)

The most significant change occurred between 2020 and 2021, where the population jumped sharply to 358,101. This marked increase could be attributed to several factors, including changes in census data collection methods, improved data accuracy, or socio-economic shifts that influenced family decisions regarding residency and schooling. This peak represents the highest number of school-aged children within the five-year span, indicating a period of increased demand for educational resources and infrastructure.

However, the trend shifted in 2022, with the school-aged population decreasing to 354,882. Although this represents a decline from the 2021 peak, it still indicates a higher population compared to the earlier years of 2018-2020. The slight drop could be due to various reasons, including demographic changes such as lower birth rates, migration patterns, or even the long-term impacts of the COVID-19 pandemic affecting family structures and educational enrollment.

School-Aged Children in Poverty (Ages 5-17)

The implications of poverty on education are multifaceted. Children from impoverished backgrounds often have limited access to educational resources, such as books and technology, which are essential for learning in today's digitized world. They may also experience unstable living conditions, food insecurity, and insufficient healthcare, all of which can lead to absenteeism, concentration difficulties, and lower academic performance. Additionally, the stress of financial insecurity can take a toll on a child's mental health and well-being, further hindering their ability to learn and succeed in school.

Table 39: School-Aged Children in Poverty by County Comparison (2018/2022)

Area	2018	2022	Change
DeKalb	30,753	25,198	-18.06%
Gwinnett	29,104	25,477	-12.46%
Newton	5,350	3,547	-33.70%
Rockdale	3,701	2,642	-28.61%
REGION	**68,908**	**56,864**	**-17.48%**

Source: U.S. Census Bureau (S1701)

The regional data shows a decrease in the number of school-aged children living in poverty from 68,908 in 2018 to 56,864 in 2022, reflecting a 17.48% decline. This overall reduction indicates progress in addressing child poverty within the region, though the persistence of a significant number of children in poverty highlights the need for ongoing efforts.

Within this region, DeKalb County saw a reduction in school-aged children in poverty from 30,753 in 2018 to 25,198 in 2022, an 18.06% decrease. This suggests improvements in economic conditions or the effectiveness of poverty alleviation programs in the county.

Gwinnett County experienced a decrease from 29,104 school-aged children in poverty in 2018 to 25,477 in 2022, a reduction of 12.46%. While this is a positive change, it indicates that a considerable number of children still face poverty-related challenges, requiring continued focus and intervention.

Newton County saw the most substantial decrease, with the number of school-aged children in poverty dropping from 5,350 in 2018 to 3,547 in 2022, representing a 33.70% decline. This significant progress suggests effective interventions and improved economic conditions for families in the county.

Rockdale County also showed a notable decrease, with the number of school-aged children in poverty falling from 3,701 in 2018 to 2,642 in 2022, representing a 28.61% decline. This reduction indicates progress in addressing the economic challenges faced by families and suggests that poverty alleviation efforts are having a positive impact.

Educational Infrastructure

A strong educational infrastructure serves as the cornerstone of societal progress and individual development. It is the engine that drives economic growth, innovation, and workforce readiness, creating a skilled and adaptable labor force that can compete in a globalized world. Furthermore, education is the primary pathway to breaking the cycle of poverty, offering individuals the knowledge and skills needed to secure better job opportunities and higher incomes. Beyond its economic role, a robust educational system fosters informed and engaged citizens, strengthening democratic societies and promoting social cohesion. It also contributes to improved public health outcomes, as education correlates with healthier lifestyles and access to better healthcare.

The Georgia Department of Education assigns a proficiency score to each school system, ranging from 0 to 100, based on various educational metrics. These scores are categorized into grades, with 'A' representing exceptional performance (90-100), 'B' indicating above-average performance (80-89), 'C' denoting average performance (70-79), 'D' signaling below-average performance (60-69), and 'F' representing failing performance (0-59). It's important to note that the scores provided are for the year 2019, as data collection was disrupted by the COVID-19 pandemic.

Table 40: School District Proficiency Scores (2019)

County	School System	Score	Grade	Grad %	College/Career Ready
DeKalb	City Schools of Decatur	87.9	B	96.90%	50.50%
DeKalb	DeKalb County	75.4	C	77.20%	50.50%
Gwinnett	Buford City	88.6	B	96.20%	55.00%
Gwinnett	Gwinnett County	82.5	B	84.10%	55.00%
Newton	Newton County	63.9	D	90.70%	52.10%
Rockdale	Rockdale County	69.5	D	83.20%	55.90%
	Regional Average	**78**	**C**	**88.05%**	**53.17%**

Source: Georgia Department of Education

The regional average proficiency score for school districts is 78, which falls into the 'C' grade category, indicating average performance. The graduation rate across the region is 88.05%, with 53.17% of students being college or career ready. These averages reflect a moderate performance that suggests room for improvement to achieve higher educational outcomes.

In DeKalb County, the City Schools of Decatur scored an 87.9, receiving a 'B' grade, with a high graduation rate of 96.90% and 50.50% of students being college or career ready. This indicates above-average performance and a strong educational infrastructure within this district. In contrast, the DeKalb County school system scored 75.4, receiving a 'C' grade, with a significantly lower graduation rate of 77.20%, though the college or career readiness rate is identical at 50.50%. This disparity within the same county highlights differences in resource allocation and educational quality between school systems.

Gwinnett County's Buford City Schools scored 88.6, earning a 'B' grade, with a graduation rate of 96.20% and 55.00% of students being college or career ready, indicating a strong educational performance. Similarly, Gwinnett County schools scored 82.5, also earning a 'B' grade, but with a lower graduation rate of 84.10%, though maintaining the same college or career readiness rate of 55.00%. The consistent above-average performance in Gwinnett County suggests effective educational policies and resources.

Newton County scored 63.9, receiving a 'D' grade, with a graduation rate of 90.70% and 52.10% of students being college or career ready. This below-average performance points to significant challenges within the county's educational infrastructure that need to be addressed to improve outcomes.

Rockdale County scored 69.5, also receiving a 'D' grade, with a graduation rate of 83.20% and the highest college or career readiness rate in the region at 55.90%. Despite the high readiness rate, the overall proficiency score indicates below-average educational performance, suggesting a need for targeted improvements.

Overall, the data underscores the need for continued investment in educational infrastructure across the region to elevate performance from average or below-average levels to exceptional standards. Ensuring equitable resource distribution, enhancing teaching quality, and focusing on student outcomes can help achieve these goals and foster a more robust and effective educational system.

Student Barriers

Children often face various personal barriers that can significantly impact their educational journeys. Among these, disabilities and limited English proficiency are two key challenges that require thoughtful and strategic educational accommodations to ensure that all children have the opportunity to succeed.

Table 41: Student Barriers to Educational Success by County (2022)

Area	Total Students	Limited English	Disabled Children
DeKalb	96,271	18,243	10,876
Gwinnett	184,146	45,226	25,401
Newton	18,141	943	2,594
Rockdale	15,212	1,126	2,023
REGION	**313,770**	**65,538**	**40,894**

Source: Georgia Department of Education

Disabilities can greatly affect a child's education in multiple ways. They may require specialized instructional strategies and tools, as well as additional support services. Disabilities can range widely in severity and type, including learning disabilities, physical disabilities, and cognitive impairments, each presenting unique challenges. Children with disabilities may find it difficult to keep up with the standard curriculum and may struggle with traditional assessment methods. They often benefit from Individualized Education Programs (IEPs), which tailor the learning experience to their specific needs.

Limited English proficiency (LEP) is another barrier that can prevent children from fully accessing and benefiting from their education. LEP students may struggle with understanding instructions, participating in class, or completing assignments if the curriculum is not adapted to their language needs. These challenges can lead to gaps in learning and academic performance. Schools can support LEP students through English as a Second Language (ESL) programs, bilingual education, and culturally responsive teaching practices.

At the regional level, there are a total of 313,770 students, with 65,538 (20.89%) classified as having limited English proficiency (LEP) and 40,894 (13.04%) identified as disabled. These significant proportions underscore the necessity for targeted educational support to address these barriers.

In DeKalb County, there are 96,271 students, with 18,243 (18.95%) facing limited English proficiency and 10,876 (11.30%) identified as disabled. This indicates a considerable need for ESL programs and special education resources within the county to support these students.

Gwinnett County, with the largest student population of 184,146, has 45,226 (24.56%) LEP students and 25,401 (13.79%) disabled students. The high percentages of LEP and disabled students in Gwinnett highlight the importance of substantial resource allocation and specialized programs to ensure these students receive adequate support.

Newton County has 18,141 students, with 943 (5.20%) classified as LEP and 2,594 (14.30%) identified as disabled. Although the number of LEP students is lower compared to other counties, the relatively high percentage of disabled students indicates a strong need for special education services.

Rockdale County, with a total student population of 15,212, has 1,126 (7.40%) LEP students and 2,023 (13.30%) disabled students. Similar to Newton, the relatively high percentage of disabled students necessitates targeted support and resources.

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Community Feedback
Community feedback on child and youth education highlights a need for the integration of practical life skills into the curriculum. One respondent emphasized the importance of schools and the community providing education on money management, financial skills, and credit building. They believe that such knowledge is essential for helping individuals lead sustainable lives, avoid debt, and ensure they can meet their daily necessities.

Agency Data
In Fiscal Year 2022, the organization served a total of 1,266 school-aged children. These children were predominantly male (50.08%), African American (92.58%), and Non-Hispanic (97.79%), with a median age of 11.15 years. The majority of these children (86.41%) were enrolled in elementary school, while the remaining 13.59% were enrolled in high school.

Among these children, 31 were noted as having disabilities, with 6 defined as physical, 10 as mental, and 13 as emotional. The remaining 2 were not defined. More than half of the children (66.27%) were SNAP recipients. Five children were noted as being Spanish speakers. Additionally, 112 children were documented as being homeless, and 58 children were documented as having no insurance.

Other Child/Youth Educational Resources

Resource Name	Contact Information	Description
Africa's Children's Fund	678-381-1282	Provides mentoring services and school supplies to homeless and other low-income children in DeKalb County
Family Connection	gafcp.org	Provides tutoring and support services designed to promote school success.
Ferst Foundation	ferstreaders.org	Provides books to low-income families
Georgia Center for Opportunity	770-242-0001	Works in communities to develop opportunities that help students stay in school, graduate, and prepare for college and career services
Global Relief Center	770-335-4710	Provides low-income children with school supplies, computers, and financial assistance.
Krimson Community Foundation	770-335-2693	Provides coaching, counseling, mentoring, and prep development to young men (particularly African American) to enable them to realize their inherent potential and abilities
Safehouse Outreach, Inc	404-523-2221	Provides back packs and school supplies to low-income children.
Salvation Army of Metro Atlanta	404-486-2710	Provides assistance with school supplies to low-income households.

Conclusion: Strengths
The educational landscape in the region exhibits several key strengths. There are a total of 354,882 school-aged children, with Gwinnett County having the highest concentration at 54.32%, followed by DeKalb County at 34.57%. This robust student population necessitates substantial educational resources and infrastructure, which the region has been working to improve. For instance, significant progress has been made in reducing the number of school-aged children living in poverty, which decreased by 17.48% from 2018 to 2022.

Conclusion: Weaknesses
Despite these strengths, there are several areas that require attention to enhance educational outcomes. The regional average proficiency score for school districts is 78, categorized as a 'C' grade, indicating average performance. This average performance suggests that while there are areas of success, there is significant room for improvement to elevate educational outcomes across the board.

Disparities in educational performance across different school systems highlight the need for targeted support. For instance, the DeKalb County school system scored 75.4, receiving a 'C' grade, with a significantly lower graduation rate of 77.20% compared to the City Schools of Decatur, which scored 87.9 and received a 'B' grade. This disparity within the same county underscores differences in resource allocation and educational quality that need to be addressed.

Similarly, Newton and Rockdale counties received 'D' grades, with scores of 63.9 and 69.5, respectively. Newton County's graduation rate is 90.70%, while Rockdale County's is 83.20%. Despite Rockdale having the highest college or career readiness rate in the region at 55.90%, the overall proficiency scores indicate below-average educational performance, suggesting a need for targeted improvements. These scores are relevant as they reflect the effectiveness of the educational systems and their ability to prepare students for future academic and career success.

Additionally, significant barriers such as limited English proficiency (LEP) and disabilities among students further complicate the educational landscape. The region has 65,538 LEP students (20.89% of the total student population) and 40,894 disabled students (13.04%). LEP students may struggle with understanding instructions, participating in class, or completing assignments if the curriculum is not adapted to their language needs. Disabled students often require specialized instructional strategies and tools, as well as additional support services. These barriers necessitate specialized programs and resources to ensure that all students can fully engage with the curriculum and achieve academic success.

Addressing these educational weaknesses is crucial for fostering a more equitable and effective educational system. By focusing on improving proficiency scores, graduation rates, and providing adequate support for students facing barriers, the region can enhance educational outcomes and ensure that all students have the opportunity to succeed.

Childcare and Early Education

Introduction

Childcare plays a crucial role in shaping employment outcomes, educational achievements, and the prevalence of poverty, with a significant impact on individuals, families, and society. Accessible and affordable childcare services are closely intertwined with these pivotal aspects of human development and socio-economic well-being, as demonstrated in several studies.

First and foremost, the availability of quality childcare services profoundly influences employment, particularly for parents and predominantly mothers. Research from the Center for American Progress underscores how a lack of affordable childcare can hinder mothers' participation in the labor force. High childcare costs and the unavailability of suitable arrangements have been identified as key factors leading mothers to make career sacrifices, reduce working hours, or exit the workforce entirely. Consequently, this wage gap and the career interruptions experienced due to childcare responsibilities can have long-term implications for mothers' earnings and economic security.

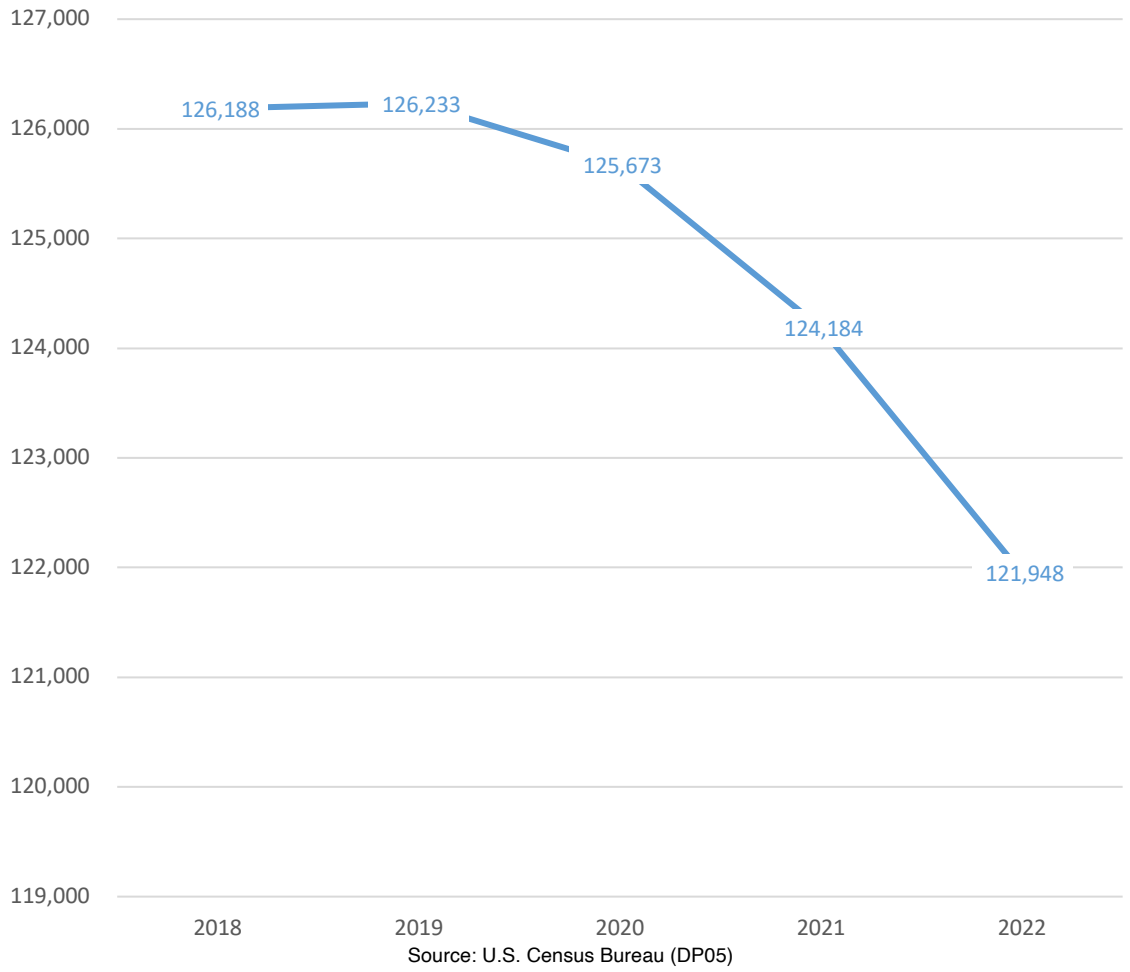
Second, the impact of childcare on educational attainment is notable, particularly for parents seeking to advance their education or job skills. CAP's research indicates that accessible and affordable childcare services enable parents to engage in educational opportunities that enhance their qualifications, leading to improved career prospects and higher earning potential. Conversely, the lack of adequate childcare options can be a significant barrier for parents aspiring to pursue further education or skill development, limiting their upward economic mobility.

Finally, the relationship between childcare and poverty is evident, with significant implications for families' economic well-being. Data from the Institute for Women's Policy Research highlights how caregiving responsibilities, including difficulties in securing affordable childcare, contribute to financial hardship for families with young children. High childcare costs can strain family budgets, potentially pushing them into poverty. Additionally, parents who are compelled to leave the workforce or reduce working hours due to childcare challenges may experience a substantial decline in their income, exacerbating the persistence of poverty among families with young children.

Pre-School Children

As of 2022, there are 121,948 young children in the region. Over the past five years, this number has declined from 126,188 in 2018, representing a decrease of approximately 3.36%. This downward trend has several significant implications.

Chart 43: Young Child Count Trend (2018-2022)



Source: U.S. Census Bureau (DP05)

The decline in the young child population could affect future school enrollments and the allocation of educational resources. Schools and early education programs may need to adjust their strategies to accommodate changing demographics, ensuring that resources are efficiently utilized to support the remaining population.

Also, understanding the reasons behind this trend is crucial for policymakers and community leaders. Addressing factors such as high childcare costs, lack of affordable housing, and economic instability can help stabilize and potentially reverse the downward trend. Ensuring that young children have access to quality childcare and early education is vital for their development and for supporting working families.

Overall, the declining young child population underscores the need for continued investment in childcare and early education to support economic stability and growth within the region.

Young Children in Poverty

Poverty has profound effects on young children's development, health, and educational outcomes. Children growing up in poverty often face numerous challenges that can hinder their ability to succeed in school and later in life. According to the National Center for Children in Poverty (NCCP), poverty can impact a child's cognitive, social, and emotional development. It can also affect their physical health due to inadequate access to nutritious food, healthcare, and safe living conditions.

Children in low-income families are more likely to experience food insecurity, which can lead to malnutrition and related health problems. They often live in environments with higher levels of stress due to economic instability, which can affect their mental health and ability to focus and learn. Additionally, children in poverty may have limited access to early childhood education programs, which are crucial for developing foundational skills necessary for academic success.

According to the American Psychological Association (APA), the chronic stress associated with living in poverty can affect children's brain development and lead to behavioral issues. This stress can impact their ability to form secure attachments, regulate emotions, and develop executive functions, which are essential for problem-solving and academic achievement.

In the region, there are 121,948 young children, with 20,150 (16.53%) identified as low-income. This rate is slightly lower than the national rate of 17.73% but higher than the state average of 20.03%.

Table 42: Young Children in Poverty (2022)

Area	Children	Low-Income	Rate
DeKalb	*50,323*	9,929	19.73%
Gwinnett	*59,588*	7,902	13.26%
Newton	*6,907*	1,121	16.23%
Rockdale	*5,130*	1,198	23.35%
REGION	***121,948***	**20,150**	**16.53%**
STATE	***635,299***	**127,255**	**20.03%**
NATION	***19,004,925***	**3,369,529**	**17.73%**

Source: U.S. Census Bureau (S1701)

Early education plays a critical role in mitigating the effects of childhood poverty and improving long-term socio-economic outcomes for disadvantaged children. Here are several ways in which early education can impact childhood poverty:

- Cognitive Development and School Readiness:
  Early education programs, such as preschool and Head Start, provide young children with a stimulating environment that promotes cognitive development and prepares them for school. Research indicates that children who attend high-quality early education programs demonstrate improved language, literacy, and math skills compared to their peers who do not attend such programs. These foundational skills are crucial for academic success and reduce the likelihood of future educational challenges .

- Social and Emotional Development:
  Early education helps children develop essential social and emotional skills, such as self-regulation, cooperation, and empathy. These skills are important for forming positive relationships with peers and teachers and for navigating the school environment effectively. Children from low-income families who participate in early education programs are better equipped to handle stress and are less likely to exhibit behavioral problems, contributing to a more positive school experience and reducing the risk of school dropout .

- Parental Employment and Economic Stability:
  Access to affordable early education allows parents, particularly mothers, to enter the workforce or pursue further education and job training. This can lead to increased family income and greater economic stability. The Center for American Progress reports that affordable childcare is a key factor in enabling parents to maintain employment and achieve economic self-sufficiency, which in turn helps lift families out of poverty .

- Long-Term Educational and Economic Outcomes:
  Children who attend quality early education programs are more likely to graduate from high school, attend college, and secure stable employment. These long-term educational and economic benefits contribute to breaking the cycle of poverty. A study by the National Institute for Early Education Research (NIEER) found that early education investments yield significant returns in the form of higher earnings and reduced reliance on public assistance in adulthood .

- Health and Well-Being:
  Early education programs often provide health screenings, nutritious meals, and opportunities for physical activity, which contribute to the overall well-being of children. Access to these resources is particularly important for children from low-income families, who may otherwise face health disparities. Improved health outcomes in early childhood can lead to better academic performance and reduced healthcare costs in the long run .

Childcare Infrastructure

Research identified a significant gap in childcare capacity across the region, underscoring the critical need for increased childcare slots to meet the existing demand. Across the region, there are 125,559 children in need of childcare, but only 67,443 slots are available, resulting in a shortfall of 58,116 slots. This shortfall indicates that there are not enough childcare facilities to meet the demand, with an overall ratio of 1.86 children for every available childcare slot, highlighting the insufficiency in childcare provision. Since the previous assessment, the number of childcare slots has decreased by 2.82% and the childcare deficit has increased by 19.55%. Further, the ratio has increased from 1.70 to 1.86.

Table 43: Childcare/Pre-School Facilities & Capacity Count by County (2022)

Area	Children	Slots	+/-	Ratio	Deserts
DeKalb	52,350	27,731	-24,619	1.88	57/141
Gwinnett	61,031	32,828	-28,203	1.85	44/113
Newton	6,892	3,398	-3,494	2.02	6/13
Rockdale	5,286	3,486	-1,800	1.52	6/15
REGION	**125,559**	**67,443**	**-58,116**	**1.86**	**113/282**

Source: Center for American Progress | National Center for Educational Statistics

According to the Center for American Progress (CAP), a childcare desert is defined as any census tract with more than 50 children under age 5 that contains either no childcare providers or so few options that there are more than three times as many children as licensed childcare slots. In the area served by the organization, 113 of the 282 census tracts (40.07%) were identified as childcare deserts.

This scarcity of childcare slots can hinder children's social, emotional, and cognitive development, delay parents' return to work or education, and ultimately perpetuate the cycles of poverty that the region is striving to break.

In DeKalb County, there are 52,350 children but only 27,731 childcare slots available, creating a shortfall of 24,619 slots. This results in a ratio of 1.88 children per slot, indicating a high demand that exceeds the current supply. Additionally, 57 out of 141 areas in DeKalb County are identified as childcare deserts, where families face significant difficulties accessing childcare services.

Gwinnett County has the highest number of children in need of childcare, totaling 61,031, but only 32,828 slots are available, leading to a shortfall of 28,203 slots. This results in a ratio of 1.85 children per slot, which, although slightly better than DeKalb County, still indicates a substantial gap in childcare provision. Furthermore, 44 out of 113 areas in Gwinnett are classified as childcare deserts, suggesting that many families struggle to find adequate childcare services.

Newton County, with 6,892 children in need of childcare, has only 3,398 slots available, creating a shortfall of 3,494 slots. This county has the highest ratio of 2.02 children per slot, indicating severe shortages. Moreover, 6 out of 13 areas in Newton are childcare deserts, further highlighting the critical need for increased childcare capacity in the county.

Rockdale County, which has 5,286 children in need of childcare, offers 3,486 slots, resulting in a shortfall of 1,800 slots. Although this is the lowest shortfall among the counties analyzed, the ratio of 1.52 children per slot still reflects a notable demand. Additionally, 6 out of 15 areas in Rockdale are identified as childcare deserts, pointing to localized issues in childcare access.

In the tables below, the N/A ratios highlight tracts where there are no childcare providers at all, further exacerbating the challenge for families living there. The presence of tracts with fewer than fifty children where the desert classification is "no" suggests that while childcare is not a concern in these areas due to the lower population of young children, for the majority of communities, the lack of accessible childcare is a significant barrier.

Table 44: DeKalb County Childcare Desert Classification and Ratio by Census Tract (2020)

Tract	Ratio (:1)	Desert
201	N/A	Yes
202	1.63	No
203	4.88	Yes
204	0.43	No
205	0.71	No
206	N/A	Yes
207	1.32	No
208.01	N/A	Yes
208.02	0.91	No
209	0.65	No
211.01	6.08	Yes
211.02	0.75	No
212.02	1.88	No
212.04	2.25	No
212.08	1.17	No
212.09	1.18	No
212.10	0.31	No
212.11	1.58	No
212.13	0.45	No
212.14	0.95	No
212.15	14.57	Yes
212.16	3.71	Yes
212.17	33.83	Yes
212.18	N/A	Yes
213.01	N/A	Yes
213.03	2.13	No
213.05	3.30	Yes
213.06	N/A	Yes
213.07	2.15	No
213.08	N/A	Yes
214.05	N/A	Yes
214.09	2.30	No
214.10	N/A	Yes
214.11	N/A	Yes
214.12	4.00	Yes
214.13	N/A	Yes
214.14	N/A	Yes
214.15	1.72	No
214.16	2.39	No
214.17	14.05	Yes
215.02	5.00	Yes
215.03	N/A	Yes
215.04	0.22	No
216.02	N/A	Yes
216.03	0.17	No
216.04	0.57	No
216.05	N/A	Yes
217.03	1.18	No
220.09	2.23	No
220.10	1.58	No
221	1.16	No
222.03	0.24	No
222.04	11.54	Yes
223.01	2.45	No
223.02	0.76	No
224.01	N/A	Yes
224.03	0.56	No
225	3.89	Yes
226	2.00	No
227	6.32	Yes
228	1.44	No
229	0.96	No
230	0.74	No
231.01	0.33	No
231.02	1.51	No
231.07	1.74	No
231.08	2.49	No
231.11	0.98	No
231.12	1.04	No
231.13	2.53	No
231.14	42.83	Yes
231.15	N/A	Yes
232.04	0.86	No
232.06	0.94	No
232.08	20.83	Yes
232.09	79.17	Yes
232.10	3.61	Yes
232.11	1.09	No
232.12	0.55	No
232.13	2.48	No
232.14	0.67	No
233.03	0.82	No
233.06	2.10	No
233.09	2.40	No
233.10	2.04	No
233.11	1.23	No
233.12	23.94	Yes
233.13	2.45	No
233.14	23.42	Yes
233.15	1.21	No
233.16	1.81	No
234.10	2.53	No
234.11	0.70	No
234.12	0.54	No
234.13	0.92	No
234.14	1.19	No

217.04	0.81	No
217.05	5.47	Yes
217.06	5.33	Yes
218.05	4.58	Yes
218.06	4.86	Yes
218.08	N/A	Yes
218.09	0.86	No
218.10	39.50	Yes
218.12	1.38	No
218.13	N/A	Yes
218.14	2.91	No
219.06	1.96	No
219.07	1.41	No
219.08	1.97	No
219.09	1.98	No
219.10	6.27	Yes
219.11	N/A	Yes
219.12	1.33	No
219.13	N/A	Yes
220.01	N/A	Yes
220.04	2.15	No
220.05	3.02	Yes
220.07	7.61	Yes

234.16	1.42	No
234.18	3.60	Yes
234.19	2.00	No
234.21	6.54	Yes
234.22	23.25	Yes
234.23	2.86	No
234.24	3.37	Yes
234.25	16.75	Yes
234.26	14.35	Yes
234.28	6.25	Yes
235.01	0.64	No
235.04	1.41	No
235.05	0.69	No
235.06	2.12	No
235.07	0.64	No
236.01	0.97	No
236.02	11.33	Yes
236.03	4.25	Yes
237	2.62	No
238.01	2.67	No
238.02	1.02	No
238.03	1.66	No

Source: Center for American Progress

Table 45: Gwinnett County Childcare Desert Classification and Ratio by Census Tract (2020)

Tract	Ratio (:1)	Desert
501.03	8.36	Yes
501.05	0.59	No
501.06	0.84	No
501.07	2.66	No
501.08	1.29	No
501.09	1.95	No
502.05	0.99	No
502.08	53.00	Yes
502.09	5.03	Yes
502.10	0.52	No
502.11	1.79	No
502.12	1.72	No
502.13	2.35	No
502.14	1.02	No
502.15	2.21	No
502.16	1.11	No
502.17	1.22	No
502.18	0.80	No
502.19	0.35	No
502.20	1.13	No
503.04	N/A	Yes
503.06	0.65	No
503.08	0.76	No
503.09	0.81	No
503.10	0.43	No
503.11	0.65	No
503.13	1.45	No
503.14	58.09	Yes
503.15	6.27	Yes

Tract	Ratio (:1)	Desert
505.11	1.37	No
505.20	0.47	No
505.21	1.38	No
505.22	2.53	No
505.23	1.30	No
505.24	52.36	Yes
505.25	3.66	Yes
505.26	0.58	No
505.27	1.41	No
505.28	0.77	No
505.29	0.57	No
505.30	2.28	No
505.31	3.97	Yes
505.32	112.50	Yes
505.33	14.09	Yes
505.34	1.09	No
505.35	0.90	No
505.36	30.58	Yes
505.37	50.10	Yes
505.38	51.17	Yes
505.39	3.67	Yes
505.40	0.75	No
505.41	N/A	Yes
505.42	4.41	Yes
505.43	2.16	No
505.44	0.94	No
505.45	48.57	Yes
505.46	3.68	Yes
505.47	2.64	No

503.17	79.00	Yes
503.18	0.99	No
503.19	5.64	Yes
503.20	N/A	Yes
503.21	0.84	No
503.22	1.84	No
504.10	2.68	No
504.15	0.36	No
504.16	0.71	No
504.17	89.67	Yes
504.18	183.67	Yes
504.19	30.70	Yes
504.21	5.04	Yes
504.22	3.86	Yes
504.23	N/A	Yes
504.24	2.73	No
504.25	2.49	No
504.26	0.51	No
504.27	72.83	Yes
504.28	0.70	No
504.29	1.82	No
504.30	1.95	No
504.31	4.91	Yes
504.32	1.04	No
504.33	36.17	Yes
504.34	150.50	Yes
504.35	0.59	No
504.36	0.81	No

505.48	1.23	No
505.49	15.21	Yes
506.05	2.04	No
506.06	4.25	Yes
506.07	3.49	Yes
506.08	1.85	No
506.09	19.82	Yes
506.10	0.96	No
507.09	68.92	Yes
507.12	0.45	No
507.13	2.32	No
507.14	6.29	Yes
507.15	2.06	No
507.18	0.33	No
507.19	1.63	No
507.20	0.76	No
507.21	1.41	No
507.22	0.52	No
507.23	24.28	Yes
507.24	0.56	No
507.25	0.48	No
507.26	1.32	No
507.27	9.12	Yes
507.28	4.30	Yes
507.29	24.17	Yes
507.30	3.39	Yes
507.31	40.24	Yes

Source: Center for American Progress

Table 46: Newton County Childcare Desert Classification and Ratio by Census Tract (2020)

Tract	Ratio (:1)	Desert
1001	98.33	Yes
1002.01	1.86	No
1002.02	28.50	Yes
1003	1.40	No
1004	0.89	No
1005.01	3.58	Yes
1005.02	1.19	No

Tract	Ratio (:1)	Desert
1006	5.94	Yes
1007	1.13	No
1008	4.59	Yes
1009.01	3.24	Yes
1009.02	2.65	No
1009.03	0.82	No

Source: Center for American Progress

Table 47: Rockdale County Childcare Desert Classification and Ratio by Census Tract (2020)

Tract	Ratio (:1)	Desert
601.01	0.44	No
601.02	10.0	Yes
602.01	N/A	Yes
602.02	0.80	No
603.04	1.31	No
603.05	3.07	Yes
603.06	1.05	No
603.07	1.38	No

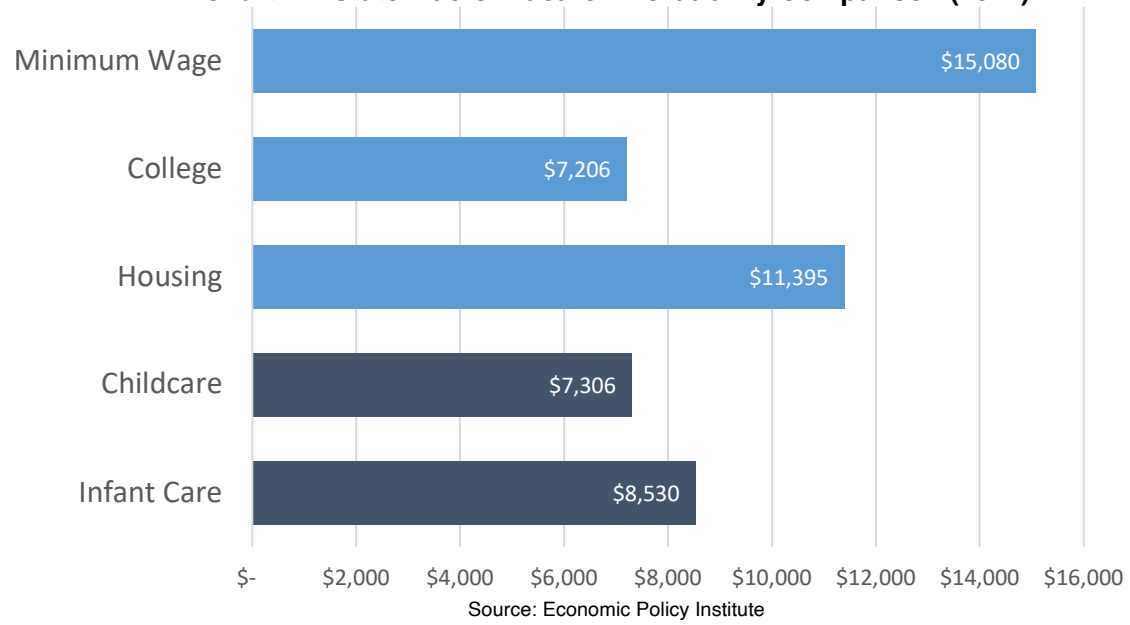
Tract	Ratio (:1)	Desert
603.08	6.49	Yes
603.09	0.87	No
604.03	0.36	No
604.04	1.46	No
604.05	4.15	Yes
604.06	0.46	No
604.07	22.50	Yes

Source: Center for American Progress

Childcare Affordability

The financial burden of childcare in Georgia is a significant economic stressor for families, particularly underscored by the comparison of childcare costs to other major expenses. The average annual cost of infant care in the state is $8,530, which breaks down to $710.83 per month. This cost is 18.40% more than the annual tuition for a four-year public college, illuminating the substantial investment required for early childcare. Georgia is just one of 33 states in which infant care is more than college.

Chart 44: Statewide Childcare Affordability Comparison (2022)



Source: Economic Policy Institute

For a family with a median income in Georgia, infant care for one child consumes a notable 15.50% of their earnings, which is more than double the 7% threshold that the U.S. Department of Health and Human Services defines as affordable. In practical terms, only 16.80% of Georgia families can comfortably afford infant care without it being a financial strain.

The economic impact deepens with the addition of a second child. The cost for two children, an infant and a 4-year-old, rises to $15,836 annually—28.00% higher than the average rent in the state. This means typical families must allocate 28.70% of their income to childcare, which is a significant portion of their financial resources.

For those earning minimum wage, the cost of childcare is even more prohibitive. A minimum wage worker would need to work from January to July, roughly 29 weeks, to cover the cost of childcare for just one infant.

Community Feedback
Community feedback regarding childcare and early education reveals significant barriers that prevent low-income residents from escaping poverty. A total of 51 survey respondents identified the lack of childcare as one of the top three barriers, while 56 pointed to unreasonable childcare costs. Among the 24 low-income residents who experienced difficulty with the lack of childcare, 17 reported that they couldn't find help when needed. Additionally, 30 out of 42 residents who struggled with childcare costs were unable to get assistance in their time of need.

The feedback highlights that the lack of affordable and accessible childcare is a significant barrier to employment and adult education or skills development. Qualitative data from community members underscores the challenges: Childcare costs are prohibitively high, reaching up to $600 per month for a two-year-old, and affordable options often compromise on quality. For example, one respondent mentioned the difficulty of finding adequate care for a nonverbal autistic child, which often necessitates more expensive centers. Other comments reflect the impact of childcare costs on financial stability and employment, with parents forced to pay additional fees for aftercare or late pickups. Furthermore, the inconsistency in staffing and reduced operational hours since COVID-19 exacerbates the issue, making it difficult for working parents to rely on childcare services.

Overall, the feedback indicates that high childcare costs and the lack of available services are critical issues that need to be addressed to support low-income families in achieving economic stability and accessing educational opportunities.

Agency Data
In Fiscal Year 2022, the organization served 295 young children. The children were primarily Non-Hispanic (99.32%), Black (92.54%), males (50.17%), with a median age of 2.58 years. Three of these children were documented as having a disability, 160 were noted as being on SNAP, and 27 were recorded as homeless. Seven children had no insurance,

Conclusion: Strengths
The community provides 67,443 secure childcare environments, which play a critical role for families where parents are engaged in work or pursuing education. This service is essential in supporting the community's workforce and educational pursuits, allowing parents to contribute to the local economy while ensuring their children are in a safe setting.

Conclusion: Weaknesses
Despite the availability of these childcare environments, significant weaknesses remain that hinder the region's ability to meet the demand for childcare services. The most glaring issue is the substantial shortfall of 58,116 childcare slots across the region, resulting in a ratio of 1.86 children for every available slot. This critical undersupply means many families struggle to find adequate childcare, which adversely affects parents' ability to work and children's early development.

Since the previous assessment, the number of childcare slots has decreased by 2.82%, and the childcare deficit has increased by 19.55%. Further, the ratio of children to available childcare slots has worsened, increasing from 1.70 to 1.86. This trend indicates a growing challenge in providing sufficient childcare services to meet the needs of the population.

DeKalb County faces a shortfall of 24,619 slots, with a ratio of 1.88 children per slot and 57 out of 141 areas identified as childcare deserts. Similarly, Gwinnett County, with the highest number of children in need, has a shortfall of 28,203 slots and 44 out of 113 areas classified as childcare deserts. These significant gaps suggest that many families in these counties lack access to necessary childcare services.

Newton and Rockdale counties, though smaller in population, also exhibit severe shortages. Newton County has the highest ratio of 2.02 children per slot, and Rockdale County has a ratio of 1.52 children per slot. Both counties have numerous areas identified as childcare deserts, further highlighting the critical need for increased childcare capacity.

The overall insufficiency of childcare slots not only hampers children's social, emotional, and cognitive development but also delays parents' return to work or education. This scarcity of childcare services can perpetuate the cycles of poverty that the region strives to break. Addressing these gaps through increased investment in childcare facilities and resources is essential to support the well-being and economic stability of families in the region.

Housing and Energy

Introduction

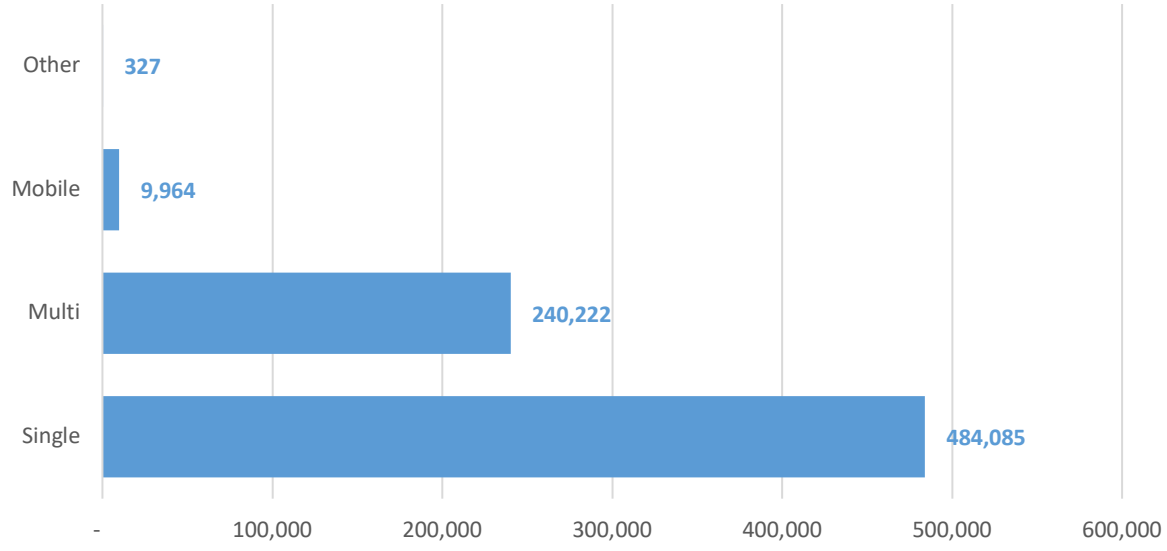
Housing and energy are fundamental pillars of a household's well-being and economic security, playing pivotal roles in determining the quality of life and overall stability of individuals and families. Adequate housing provides shelter, security, and a sense of belonging, while access to affordable energy sources is essential for maintaining a comfortable living environment. However, the relationship between poverty and these basic needs is intricate and mutually reinforcing. Poverty often leads to inadequate and unstable housing arrangements, causing individuals and families to face homelessness or live in substandard conditions.

Recognizing the profound impact of poverty on housing and energy is crucial for developing targeted interventions and policies aimed at improving the well-being of vulnerable populations, addressing disparities, and fostering economic security for all. This research explores the intricate interplay between poverty, housing, and energy, shedding light on the challenges faced by marginalized communities and proposing strategies to enhance their living conditions and economic prospects.

Housing Availability

Data indicates that there are 734,598 housing units available to accommodate the region's 675,847 households. This represents a surplus of 58,751 units. Among the homes available, single-family homes make up the largest portion with 484,085 units. This suggests a significant preference or availability of single-family living arrangements in the region.

Chart 45: Housing Infrastructure by Type (2022)



Source: U.S. Census Bureau (DP04)

Multi-family units, including apartments and condominiums, account for 240,222 units. The substantial number of multi-family units highlights their importance in providing affordable housing options, especially in urban areas where space is limited, and housing costs can be high.

Mobile homes make up 9,964 units, providing a crucial affordable housing option for some residents, despite representing a smaller fraction of the overall housing market. The category labeled "Other" includes 327 units, encompassing non-traditional housing types that do not fall into the other categories.

The predominance of single-family homes indicates a preference for this type of housing, which often provides more space and privacy. However, single-family homes generally require higher incomes and more financial stability to purchase and maintain, which can be challenging for lower-income households.

The significant number of multi-family units is crucial for accommodating a growing population and providing more affordable living options. These units offer lower-cost alternatives for families and individuals who may not be able to afford single-family homes, playing a vital role in mitigating housing insecurity.

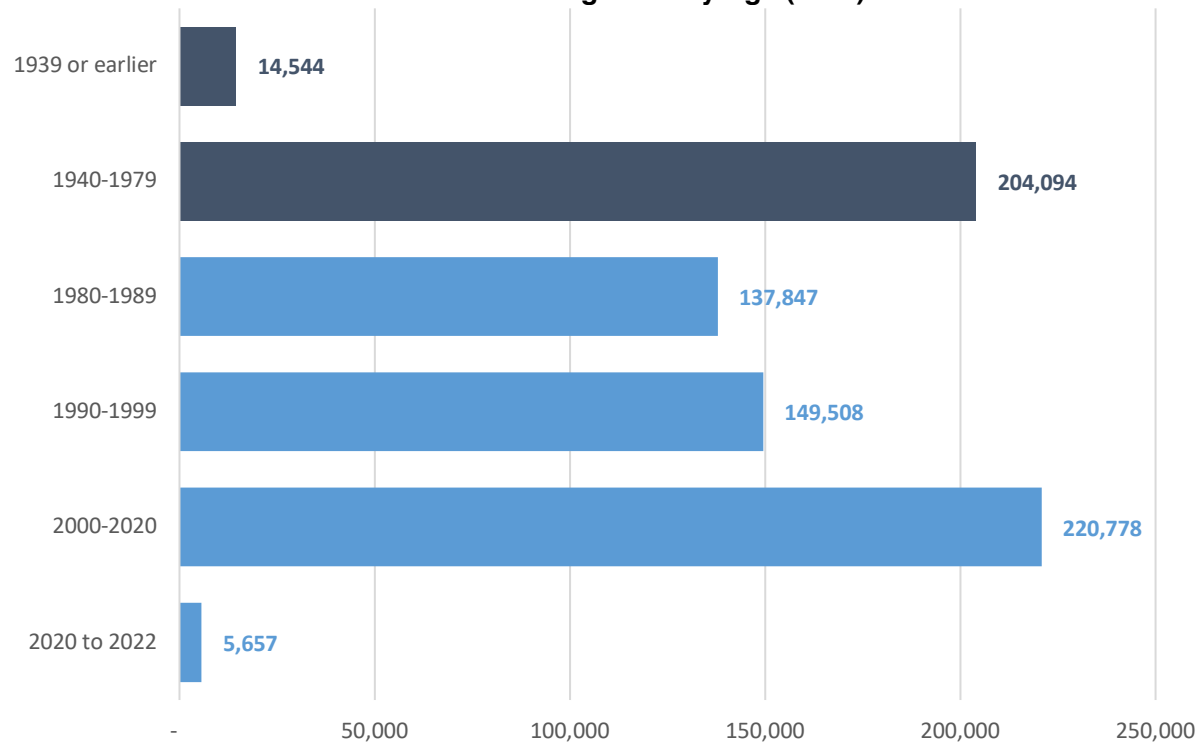
Mobile homes, though a smaller segment of the market, are essential for those seeking lower-cost housing. These units can be a viable solution for affordable living, though they may come with trade-offs in terms of quality and stability.

The "Other" category, though small, represents the diversity of housing solutions that can cater to specific needs within the community. This category may include non-traditional housing arrangements, such as shared housing, co-housing, or other innovative housing models that provide alternatives to conventional housing types.

Housing Condition

The data reveals that nearly half (47%) of the region's housing stock is more than 40 years old. This presents substantial challenges in maintaining and upgrading these homes to meet modern safety and energy efficiency standards. Older homes often require significant renovations to address issues that have developed over the decades.

Chart 46: Housing Units by Age (2022)



Source: U.S. Census Bureau (DP04)

Money crashers explains that housing age can be subjective but are generally based on a number of factors. The most important of these factors include:

- **Construction style and quality.** Prefabricated and mobile homes are generally constructed to lower quality standards than solidly built Tudors, craftsman, or colonial styles. Mass-produced houses, which tend to be newer, can have quality issues as well. However, custom-built new homes may be constructed even more solidly and durably than older homes. Ultimately construction quality comes down to the quality of the materials used and the skill of the builder.

- **Climate and Geology**. Climate, particularly humidity, temperature extremes, and storms, accelerate the aging process. Homes in the eastern half of the United States are more likely to experience problems attributable to these issues, such as roof damage and basement or foundational moisture, than homes in coastal California cities like San Francisco and Oakland. Geological factors that can accelerate the aging process include seismic activity, sinkholes, limestone geology, and high-water tables.

- **Renovations.** In some cases, antique homes are updated so dramatically that it is difficult to define their age any longer. In some cases, the only original components may be the foundation or basement and a few structural supports rising above the home's footprint. For these homes, it may not be accurate to attribute the construction to its original build date.

According to Money Crashers, even well-maintained older homes can present problems that owners of newer homes do not have to worry about. These include health hazards (asbestos, mold, etc.), serious pest problems that can lead to structural issues, and issues with utility systems (wiring, plumbing, etc.).

1. **Lead and Asbestos**
   Lead and asbestos are two hazardous materials that were used in residential applications until relatively recently. Lead is a neurotoxic metal that's particularly harmful to children. It is commonly found in exterior and interior paint made before 1978. It is also found in substantial quantities in pre-World War II plumbing systems and in smaller quantities in waterpipes installed before the mid 1980s.

   Asbestos is a naturally occurring fibrous material that causes a serious form of lung cancer and other respiratory problems. It was used in insulation and fireproofing materials until the mid-1970s. Although the EPA banned most asbestos applications by the 1980s, they never required building owners to remove existing asbestos. Accordingly, many older crawlspaces, walls, and pipes may still contain asbestos insulation.

2. **Termite Damage**
   Over time, termites can devastate the wooden components of a home, including floors, structural supports, and drywall. The problem is particularly acute in the southern half of the country, where termites are active for most or all of the year. Older homes are more likely to have termite infestations due to compromised foundations or drywall.

   Depending on the length and severity of the infestation, termite damage repairs can range from cosmetic fixes that cost a few hundred dollars to structural remediation costing $10,000 or more.

3. **Mold and Mildew Damage**
   Over time, homes exposed to excessive moisture often develop mold and mildew problems. Though particularly common in basements and bathrooms of wet-climate homes, moisture-related microorganism growth can occur anywhere. The problem is more likely to occur in older homes because moisture more readily seeps through cracked foundations and leaky pipes. However, since infestations can start inside of walls, it is possible to walk through a mold-infested home without realizing there is a problem.

   While small amounts of indoor mold growth are permissible and even expected, uncontrolled growth can exacerbate allergies and existing respiratory problems (such as asthma) in healthy children and adults. More serious infections can develop in the very young, the very old, and those with compromised immune systems.

   Also, mold eats away at its host surfaces, particularly wood, drywall, grout, and other porous or semiporous substances. Unchecked infestations can cause structural damage and render a home uninhabitable.

4. **Plumbing Problems**
   The biggest danger of an old or substandard plumbing system is the possibility of a pipe failure that floods the home or causes major water damage in the walls and floors. A serious failure can temporarily render the home uninhabitable and cost tens of thousands of dollars to clean up, though the damage is often covered by homeowners' insurance if the occupants are able to afford it. It can also lead to longer-term issues, such as mold infestations. Understanding the materials used in the construction of the home is important. While brass and copper pipes typically last 50 years or more, steel pipes can wear out after as little as 20 years. Pipes made from PEX, an increasingly common plastic material, typically last 40 to 50 years.

   Root damage is another issue attributed to many older homes, especially those in heavily vegetated neighborhoods. Over time, tree roots work their way into older drainage pipes under or outside of the home's foundation, busting through pipe joints and tapping the year-round supply of water.

5. **Foundation or Structural Problems**
   Older homes are prone to a variety of foundational and structural problems. This may include major cracks in the slab or perimeter foundation wall, corrosion, dry rot, or moisture damage in pilings or concrete foundation supports, damaged piers/support footings, and dry rot/moisture damage in above-ground studs. Signs of foundation or structural damage include doors that fail to latch, visible cracks in walls, cracked tile or concrete floors, persistently stuck windows, and floors that are uneven.

6. **Radon**
   Radon is a radioactive gas that occurs naturally in certain types of bedrock. The Environmental Protection Agency (EPA) states that radon tends to persist at higher concentrations in the Northeast, Midwest, and Intermountain West, but can occur anywhere.

   Radon enters homes through cracks in the foundation perimeter and basement walls, which are more common in older homes. The gas then circulates throughout poorly ventilated houses over time. Though it is not toxic when encountered intermittently and in small doses, radon is the leading cause of lung cancer for nonsmokers, and exposure over the generally accepted safe concentration is not recommended for a longer period.

7. **Roof Problems**
   Older homes generally have older, possibly deteriorating roofs. This presents numerous problems, including pest infestations, interior water damage, and less-effective insulation. Problems stemming from a compromised roof, particularly once interior leaks begin occurring regularly, can cost tens of thousands of dollars to fix and may not be covered by homeowners' insurance.

8. **Inefficient Windows**
   Old homes are more likely to have older, inefficient windows. The primary downside of inefficient windows is a higher electricity bill because the home's climate control system has to work harder to compensate for leaks. According to the Federal Government's Energy Star program, installing the most efficient class of windows in your entire home can reduce your electric bill by as much as $600, depending on the size of your home and where you live.

9. **Inadequate or Unsafe Electrical Systems**
   Electrical problems generally fall into two categories: convenience and safety.

   Unless electrical systems have been updated, older homes may lack sufficient numbers of electrical outlets to address the resident's electronic devices.

   More importantly, the lifespan of electrical wiring itself is limited by the lifespan of the wire's insulation. Wiring installed before 1960 lasts roughly 70 years, while newer wiring is estimated to last at least 100 years. Once the insulation deteriorates to the point that the actual wire is exposed, the risk of an electrical fire, shocks, short circuits, and localized power failures increase dramatically.

   Electrical service panels and circuit breakers are also prone to deterioration. Service panels last 60-70 years, while breakers last 30-40 years. Failing panels and breakers can cause shock, power failure, fire, and other dangers.

   It should also be noted that water damage, fire, pest infestation, and other unusual events can harm some or all of an electrical system's components, necessitating repair or replacement long before they reach their life expectancy.

10. **Failing or Inefficient Mechanicals and Appliances**
    Older homes are more likely to have old mechanical equipment, such as water heaters, furnaces, and air conditioning units, as well as older household appliances. Mechanical and appliance lifespan varies by item, brand, and workload. Equipment near the end of its useful life is more prone to failure, raising the possibility of an inconvenient or dangerous situation – such as the loss of heat in winter or an electrical fire. It should also be noted that older equipment is generally less energy efficient, resulting in high utility costs.

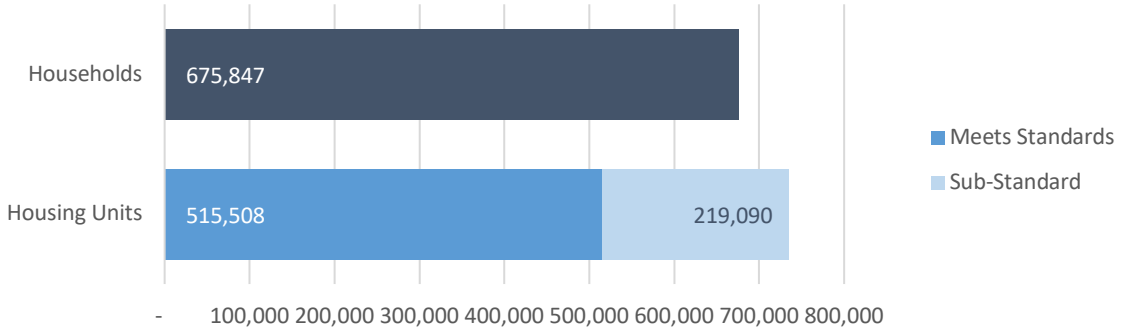
11. **Unhelpful, Unfinished, or Outdated Updates**
    While many older homes retain the charm and function of their original construction, others have experienced a host of unhelpful or anachronistic updates that detract from the homeowner's experience and potentially add to the cost of ownership.

    As long as updates are unsafe, residents can often live with outdated features. Unfortunately, the cost of repairs can often be costly. Residents should be aware of the safety concerns associated with the home and consider how it may impact young children, senior citizens, or disabled residents. Some unfinished projects also provide easy access to insects and rodents, which can impact the health of those living in the home.

12. **Substandard or Unsafe Features**
    Depending on the style, location, and history of the home, some original features may be obsolete, not up to building codes, or simply unsafe. These may include laundry chutes, servant staircases, staircases leading to nowhere, steep staircases, low ceilings, blocked off chimneys, and non-working fireplaces.

The total number of substandard housing units in the region is 219,090, which accounts for nearly one-third (29.82%) of all housing units. This significant proportion highlights a major issue in the quality of housing available to residents. When these substandard units are excluded from the available housing stock, the community would face a deficit of 160,339 housing units. This suggests that at least 160,339 households are living in substandard housing conditions, with 53,434 of these households experiencing severe conditions.

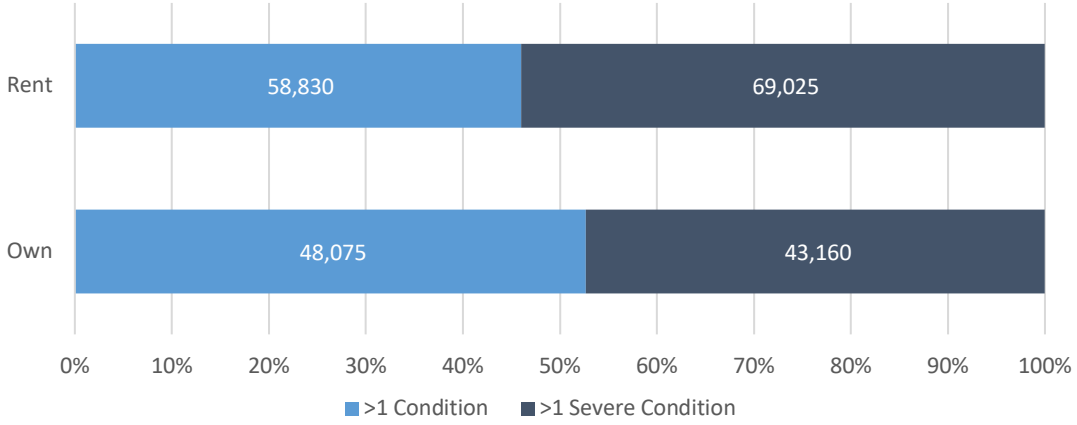
Chart 47: Regional Housing Units vs Households (2022)



Source: U.S. Census Bureau ACS (DP05)/ U.S. Department of Housing and Urban Development

The total number of rental units with substandard conditions is 127,855, which is 51.45% of all rental units. Among these, 69,025 rental units (53.99%) have more than one severe condition, indicating critical safety and habitability issues.

Chart 48: Regional Substandard Housing Count by Occupancy Type (2020)



Source: U.S. Department of Housing and Urban Development

The total number of owner-occupied units with substandard conditions is 91,235, representing 21.35% of all owned units. Of these, 43,160 units (47.31%) have more than one severe condition. This data shows that renters are more than twice as likely to live in substandard housing units compared to owners and nearly three times as likely to live in units with severe conditions.

This disparity underscores the need for targeted housing policies and interventions to address the quality of rental housing. Renters typically have less control over their living conditions and rely on landlords for maintenance and repairs. The higher prevalence of severe conditions in rental units highlights the importance of stricter enforcement of housing standards and support for tenants' rights to ensure safe and adequate housing.

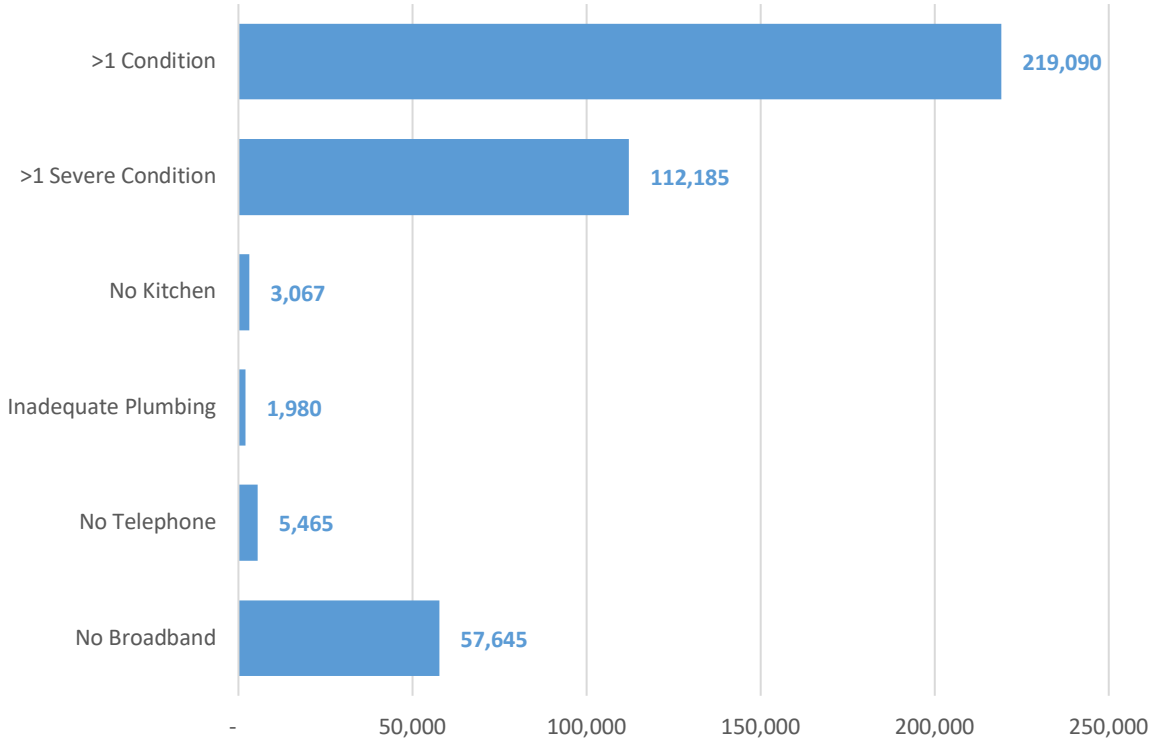
Among the conditions specifically identified as problematic, the lack of cooking facilities in an estimated 3,067 homes is a significant concern. This deficiency hampers residents' ability to prepare nutritious meals, potentially leading to a reliance on more expensive and less healthy food options, which can contribute to a range of diet-related health issues.

Additionally, inadequate plumbing in 1,980 homes is not only a basic sanitation issue but also impedes residents' ability to maintain cleanliness, which is fundamental to preventing illness. The impact extends to public health concerns, especially in densely populated areas where diseases can spread more rapidly due to poor hygiene conditions.

The absence of telephone services in about 5,465 households presents barriers to communication that are vital for emergency services, healthcare access, and employment opportunities. In our modern society, where timely communication is crucial, being without a phone can isolate individuals and limit their ability to engage fully with the community and essential services.

Furthermore, the lack of broadband internet in 57,645 households puts these residents at a significant disadvantage in numerous ways. In the current era, where education, employment, and even healthcare are increasingly conducted online, not having internet access can severely restrict educational and economic opportunities. It can hinder children's learning, adults' job searches, and the general ability to participate in a society where digital literacy is integral to success.

Table 49: Notable Housing Conditions (2022)



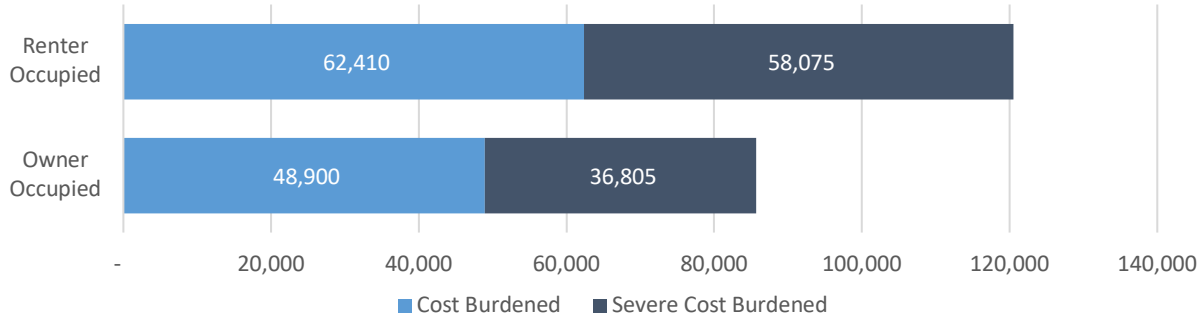
Source: U.S. Department of Housing and Urban Development | US Census Bureau (DP04)

Each of these issues can contribute to the perpetuation of poverty by limiting access to opportunities and resources that could otherwise help households improve their socio-economic standing. Addressing these gaps is vital for the community's overall health, education, and economic development.

Housing Affordability

In addition to housing availability and condition, the factor of affordability must also be taken into consideration when evaluating the housing infrastructure in a local community. According to the U.S. Department of Housing and Urban Development, an estimated 206,190 families are currently housing cost burdened. This simply means that they spend more than 30% of their household income on rent/mortgage and utilities combined. To put this number in perspective, it accounts for 30.51% of the total population, which is more than three times the number of households who are living in poverty (9.35%). This data also tells us that renters (48.49%) are more than twice as likely to be cost burdened than owners (20.05%). Among those that were cost burdened, 46.02% were classified as severe cost burdened, meaning that they spend more than 50% of their income on housing costs.

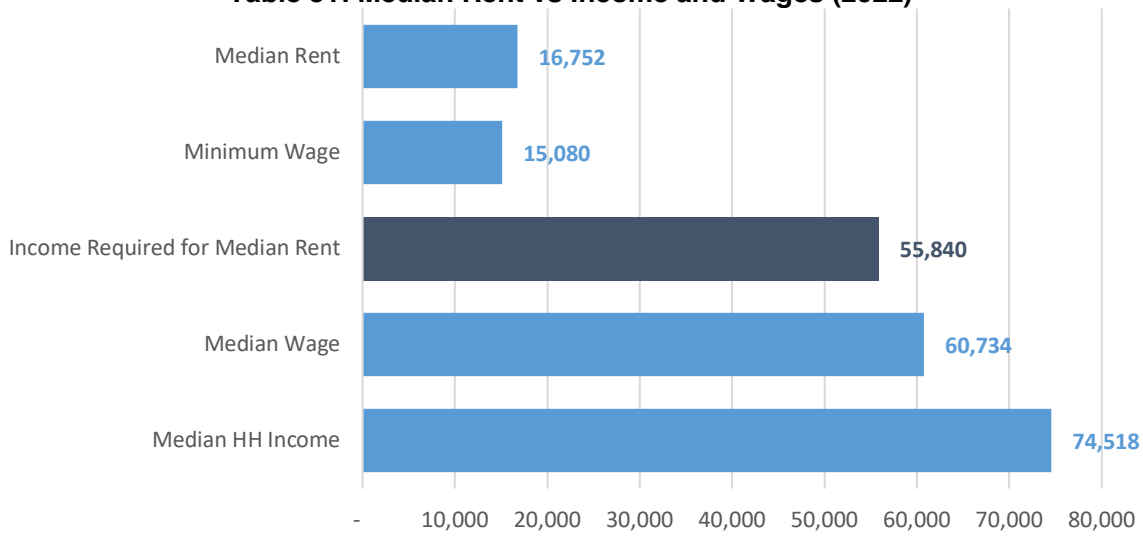
Chart 50: Cost Burdened Resident Count by Occupancy Type (2020)



Source: U.S. Department of Housing and Urban Development

Expanding on this data, the National Low-Income Housing Coalition's Out of Reach 2021 Report indicates that the average 2-bedroom Fair Market Rent (FMR) for residents in Georgia is $1,287 per month, or $15,444 annually. In the region evaluated for this project, housing costs were noted as being slightly less affordable at $1,396 per month, or $16,752 annually. This accounts for 111% of the amount that would be earned by a full-time minimum wage job. In fact, affording rent in this range would require a salary of approximately $55,840 annually, or $26.85 per hour. This translates to an unsustainable requirement of working around 148 hours per week at the minimum wage, highlighting the disconnect between wages and living costs.

Table 51: Median Rent vs Income and Wages (2022)



Source: U.S. Department of Housing and Urban Development I US Census Bureau (DP04)

When considering larger family units, the financial burden becomes more pronounced. A 4-bedroom unit at the regional average FMR costs $2,308 monthly, necessitating an annual income of $92,320. This indicates that larger families in the region may face significant affordability issues unless they have income well above the minimum wage. It should be noted that this amount is also higher than the median wage ($60,734) and median household income ($74,518).

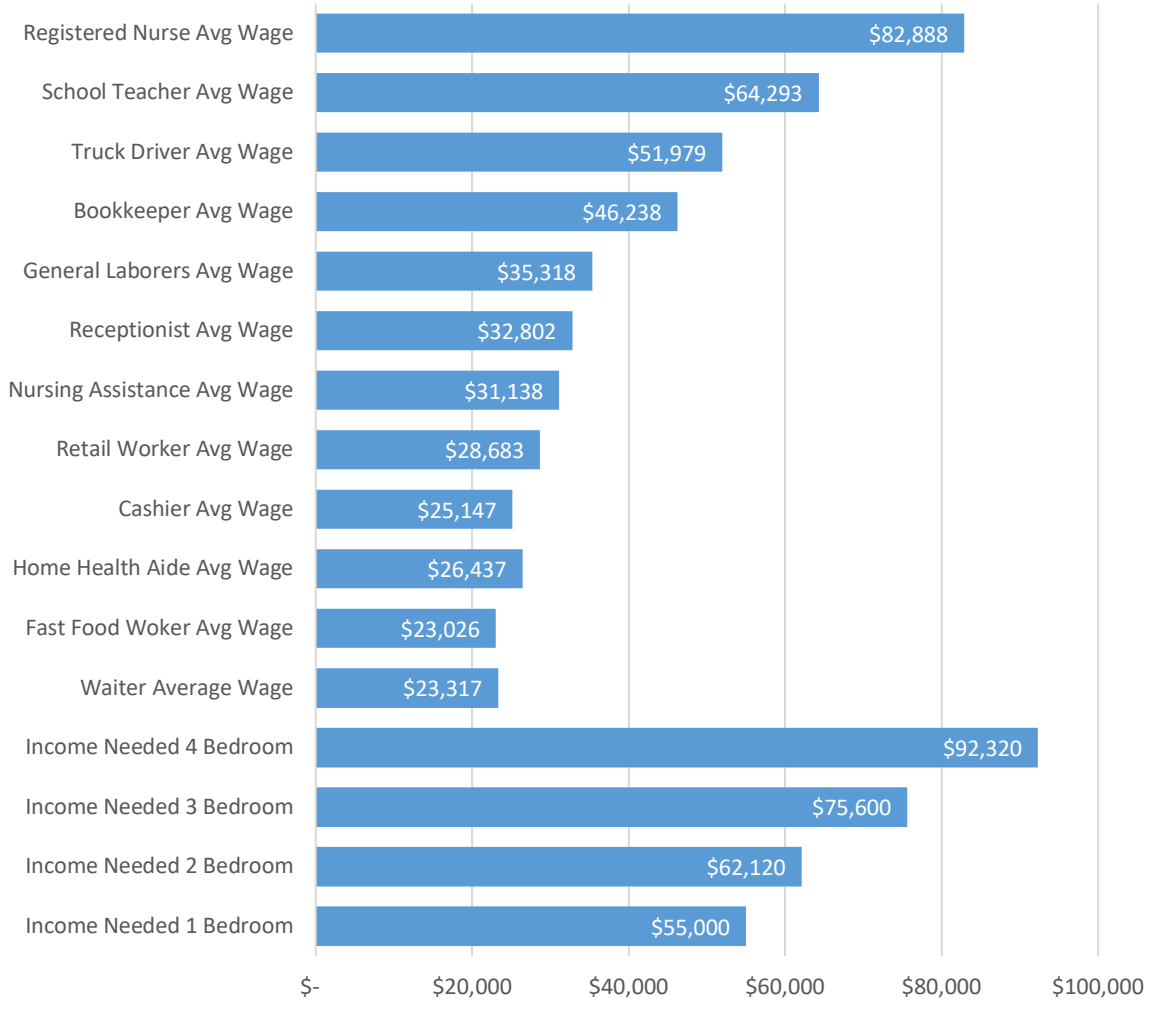
Table 48: Median Rent Cost by Unit Size and County (2022)

Area	1 Bdrm	2 Bdrm	3 Bdrm	4 Bdrm	Median
DeKalb	$1,375	$1,553	$1,890	$2,308	$1,464
Gwinnett	$1,375	$1,553	$1,890	$2,308	$1,594
Newton	$1,375	$1,553	$1,890	$2,308	$1,264
Rockdale	$1,375	$1,553	$1,890	$2,308	$1,263
REGION	**$1,375**	**$1,553**	**$1,890**	**$2,308**	**$1,396**

Source: National Low Income Housing Coalition I US Census Bureau (DP04)

The comparison between the median wages of various job positions and the income required to afford different sizes of rental housing underscores the difficulty many workers encounter in securing affordable housing.

Chart 52: Position Specific Median Wage vs Housing Wage (2022)



Source: US Census Bureau (DP04)

Registered nurses, earning a median wage of $82,888, and school teachers, with a median wage of $64,293, are among the higher earners. Despite their relatively better wages, they still fall short of the $92,320 income needed for a 4-bedroom rental. However, these wages are sufficient to comfortably afford 3-bedroom and smaller units. Middle-wage jobs, such as truck drivers earning $51,979, bookkeepers at $46,238, and general laborers at $35,318, face significant challenges in affording anything larger than a 2-bedroom rental. For instance, the required income for a 3-bedroom rental is $75,600, which is well beyond what these jobs pay.

The situation is even more dire for low-wage workers, such as nursing assistants earning $31,138, retail workers at $28,683, cashiers at $25,147, home health aides at $26,437, fast food workers at $23,026, and waiters at $23,317. Their earnings fall far below the income needed for a 2-bedroom rental ($62,120) or even a 1-bedroom rental ($55,000), making it extremely difficult for them to afford adequate housing without additional employment or assistance.

The high cost of housing relative to earnings highlights a severe affordability issue, particularly for larger families. For many workers, the income needed for a 4-bedroom rental ($92,320) and a 3-bedroom rental ($75,600) is unattainable. This gap forces many to spend a disproportionate amount of their income on housing, leading to overcrowded living situations, increased reliance on public assistance, and a perpetuation of the cycle of poverty. The inability to afford housing affects workers' economic stability and can lead to negative outcomes such as poor health, lower productivity, and limited opportunities for upward mobility.

In conclusion, the data clearly illustrates the challenge of affording rental housing on the median wages of many common job positions. Addressing this issue requires a multi-faceted approach, including increasing wages, expanding affordable housing options, and providing rental assistance programs. Ensuring that workers can afford safe and adequate housing is essential for their well-being and for the overall economic health of the community.

While the number of individual units associated with each affordable housing are no longer published, data indicates that there are 133 affordable housing providers in the region.

DeKalb County Affordable Housing (80)

Facility Name	Programs	City
3100 Stone Mountain St	Public Housing	Lithonia
Abbington Perimeter	Undisclosed	Decatur
Ahepa One Apartments	Section 202	Decatur
Alexander at Stonecrest	FHA Mortgage Insurance, LIHTC	Lithonia
Alice Williams Tower II	Section 202	Lithonia
Allegre Point Senior Residences	HOME, Section 202	Decatur
Allen Wilson Terrace	Public Housing, RAD	Decatur
Allen Wilson Terrace, Phase I	Public Housing, RAD, LIHTC	Decatur
Antioch Manor Estates	HOME, LIHTC 40/60, LIHTC, PBV	Stone Mountain
Antioch Vilas and Gardens	LIHTC, HOME, PBV	Stone Mountain
Brittany Place Apartments	LIHTC	Decatur
Candler Crossing	LIHTC	Decatur
Candler Forest	HOME, LIHTC 40/60, LIHTC, PBV	Decatur
Casa Rio Apartments - (Chdo Units)	HOME	Decatur
Cedar Creek West Apartments	LIHTC	Decatur
Chamblee Senior Residences	HOME, LIHTC, PBV	Chamblee
Chapel Run Apartments	LIHTC	Decatur
Clairmont Oaks	Section 236, Section 8 PBRA	Decatur
Clarkston Station (Wyncrest Apartments)	LIHTC	Clarkston
Columbia Senior Residences at Decatur East	HOME, LIHTC, PBV	Decatur
Columbia Senior Residences at Forrest Hills	HOME, LIHTC, PBV	Decatur
Columbia Village	Public Housing	Decatur
Columbia Village Townhomes	LIHTC	Decatur
Columns at East Hill	LIHTC	Decatur
Community Housing, Inc	Section 811	Decatur
Creekside Vista	LIHTC	Decatur
Decatur Christian Towers	Section 236/202 Elderly, Section 8 PBRA, FHA Mortgage Insurance	Decatur
Dekalb Mr Homes II	Section 811	Lithonia
Dekalb Mr Homes, Inc	Section 811	Lithonia
Delano Place	LIHTC	Decatur
Eagles Nest	LIHTC	Decatur
Elderly Housing Initiative	HOME	Stone Mountain
Forest at Columbia	LIHTC	Decatur
Granite Crossing	LIHTC 40/60	Lithonia
Greens at Stonecreek	LIHTC	Lithonia
Gwinnett Station	LIHTC	Tucker
Harper Grove	LIHTC	Lithonia
Hearthside Tucker	LIHTC	Tucker
Hidden Colony Apartments	LIHTC	Doraville
Hidden Meadows Townhomes	LIHTC	Stone Mountain
Hills at Fairington	LIHTC, PBV	Lithonia
Lake Point Fka the Park at Hairston	LIHTC 40/60, LIHTC	Stone Mountain
Lakes at Indian Creek	LIHTC	Clarkston
Lane Manor	Section 202	Lithonia
Longwood Vista Apartments	LIHTC 40/60 , LIHTC	Doraville
Magnolia Circle Apartments	LIHTC, FHA Mortgage Insurance	Decatur
Manor at Indian Creek Phase I	Section 811 PRA, LIHTCH 40/60	Stone Mountain

Manor at Indian Creek Phase II	Section 811 PRA, PBV	Stone Mountain
Mills Creek Crossing	PBV, LIHTC, HOME	Scottdale
Morningside Apartments	LIHTC	Doraville
Mountain Crest Apartments	LIHTC	Stone Mountain
Northlake Senior	LIHTC 40/60	Tucker
Oak Forest Apartments	FHA Mortgage Insurance, Section 8 PBRA, LIHTC	Scottdale
Oakview Walk	LIHTC 40/60	Decatur
Oliver House - a W II	Public Housing, LIHTC, RAD	Decatur
Orchard Walk Apartments	FHA Mortgage Insurance, LIHTC	Decatur
Panola Gardens Senior Housing	LIHTC	Lithonia
Park Trace Apartments	FHA Mortgage Insurance, Section 8 PBRA, LIHTC 40/60	Decatur
Phoenix Station	Undisclosed	Decatur
Pleasantdale Crossing	FHA Mortgage Insurance, Section 8 PBRA	Doraville
Reservation at Hairston Lake	FHA Mortgage Insurance, Section 8 PBRA, LIHTC 40/60	Stone Mountain
Robins Landing	LIHTC	Decatur
Senior Residences at Mercy Park	HOME, LIHTC 40/60	Chamblee
Shepherd Center	Section 811	Decatur
Sterling at Candler Village	LIHTC 40/60, FHA Mortgage Insurance, HOME	Decatur
Stride Senior Residences	Undisclosed	Decatur
The Retreat at Madison Place	LIHTC	Decatur
The Retreat at Mills Creek	PBV, LIHTC	Scottdale
The Terraces at Parkview	HOME, PBV, LIHTC	Lithonia
Thornberry Apartments	LIHTC	Decatur
Tobie Grant Manor	Public Housing	Scottdale
Travis House	Section 811	Stone Mountain
Trinity Walk Apartments	Section 8 PBRA, LIHTC	Decatur
Tuscany Village	FHA Mortgage Insurance, LIHTC	Clarkston
Veranda at Assembly	Undisclosed	Doraville
Villas of Friendly Heights	FHA Mortgage Insurance, LIHTC	Decatur
Wesley Club Apartments	LIHTC 40/60, LIHTC	Decatur
Whispering Pines Apartments	FHA Mortgage Insurance, LIHTC 40/60, LIHTC	Decatur
White Oak Ave Villas	LIHTC	Decatur
Woodside Village Apartments	LIHTC 40/60, LIHTC	Clarkston

Source: Affordable Housing Online

Gwinnett County Affordable Housing (32)

Facility Name	Programs	City
25 Garner St	Public Housing	Norcross
Alexander Mill	LIHTC	Lawrenceville
Annandale Apartments, Inc	Legacy 202 RA (Elderly/Disabled)	Suwanee
Applewood II	Section 202	Lawrenceville
Applewood III	Legacy 202 RA (Elderly/Disabled), Section 202	Lawrenceville
Bradford Gwinnett Townhomes	HOME, Section 8 PBRA, LIHTC 40/60, LIHTC, FHA Mortgage Insurance	Norcross
Breckenridge Creste Apartments	LIHTC	Duluth
Evermore Senior Village	LIHTC 40/60	Snellville
Glenn Edge Apartments	Public Housing, RAD	Lawrenceville
Groves of Lawrenceville	LIHTC	Lawrenceville
Gwinnett Christian Terrace	Legacy 202 RA (Elderly/Disabled), FHA Mortgage Insurance	Lilburn
Gwinnett County Residential Services, Inc	Section 811	Snellville
Heartside Sugarloaf Apartments (62+)	FHA Mortgage Insurance, LIHTC	Lawrenceville
Herrington Mill Apartments	LIHTC	Lawrenceville
Lawrenceville Handicapped Housing	Section 811	Lilburn
Magnolia Pointe	LIHTC	Duluth
Magnolia Village Apartments (Lawrenceville)	LIHTC	Lawrenceville
Mainstreet Breckinridge	Undisclosed	Duluth
MainStreet on the Green (62+)	LIHTC 40/60, LIHTC	Buford
North Glen Apartments	LIHTC	Norcross
Oaks at New Hope	LIHTC	Lawrenceville
Palisades Club Apartments	LIHTC	Duluth
Plantation Ridge	LIHTC	Sugar Hill
Rainbow Heights	Section 202	Snellville
Redland Creek Villas	LIHTC 40/60	Lawrenceville
Rolling Acres	Public Housing	Buford
Sussex Court Residential Services, Inc	Section 811	Snellville
Sweetwater Terraces (55+ Senior Community)	LIHTC	Duluth
The Reserve at Ivy Creek	FHA Mortgage Insurance, LIHTC	Buford
The Square at Lawrenceville	LIHTC	Lawrenceville
Windridge Apts C/the Morrow Co	Section 515	Buford
Wisteria Place of Hamilton Mill		Buford

Source: Affordable Housing Online

Newton County Affordable Housing (14)

Facility Name	Programs	City
5106 Alcovy Rd NE	Undisclosed	Covington
7111 Fowler Ct NE	Public Housing	Covington
Arbor Lake - Magnolia Arbor	LIHTC	Covington
Covington Square	Legacy 202 RA (Elderly/Disabled)	Covington
Harristown Park	LIHTC	Covington
Heritage Park Apartments	LIHTC	Covington
Magnolia Heights Apartments	FHA Mortgage Insurance, LIHTC	Covington
Meadors Strong St Rehab	LIHTC	Covington
Meadowbrook Apartments	LIHTC	Covington
Orchard Cove	LIHTC	Covington
South Walton Villas	Section 515	Social Circle
Village at Walkers Bend	LIHTC	Covington
Walton Court	Public Housing	Social Circle
Wellington Ridge Apartments	FHA Mortgage Insurance, LIHTC	Covington

Source: Affordable Housing Online

Rockdale County Affordable Housing (7)

Facility Name	Programs	City
Brandon Glen	LIHTC	Conyers
Salem Glen Apartments Phase 1	LIHTC	Conyers
Salem Glen Apartments Phase Two	LIHTC	Conyers
Scattered Sites (Steele St)	Public Housing	Conyers
Scattered Sites (Summer Cir)	Public Housing	Conyers
Tall Oaks Duplexes & Apts		Conyers
Towne Pointe Lexington Village	FHA Mortgage Insurance, Section 8 PBRA, LIHTC	Conyers

Source: Affordable Housing Online

HOME Investment Partnership (HOME)

In projects with five or more HOME-assisted units, at least 20% of the units must be occupied by families earning 50% or less of the area median income (AMI). All other HOME-assisted units must be occupied by families earning 80% or less of the AMI, but in practice most are reserved for families earning 60% or less of the AMI.

Low-Income Housing Tax Credit (LIHTC)

Since the property has received funding in part through the Low-Income Housing Tax Credit program, a certain number of units are set aside for lower income households. Households must earn either less than 50% or 60% of the area median income (AMI), depending on the set-aside option chosen by the property owner to qualify for the units. Rents in these units are capped at a maximum of 30% of the set-aside area median income (adjusted for unit size). Some rental units in the property may not be subject to LIHTC and therefore have higher rents and no maximum household income requirements.

Public Housing

Since the property is owned and managed by a Public Housing Authority, all of the rents at the property are based off of tenant incomes. Tenants will make a monthly contribution toward the rent equal to 30% of their adjusted income. A housing authority may establish a minimum rent of up to $50.

Section 8 Project-Based Rental Assistance

Since the property has a Project-Based Section 8 contract with HUD, some or all of the rents at this community are based on tenant incomes. Tenants leasing units participating in the Section 8 Project-Based Rental Assistance program typically contribute less than 30% of their adjusted income towards rental costs.

Section 202 (Supportive Housing for the Elderly)

Since the property was built or renovated using funding from HUD's Section 202 Supportive Housing for the Elderly program, residency is usually restricted to households earning 50% of the Area Median Income (AMI) or less with at least one member aged 62 years or older. Tenants pay rent based on household income. This rent is usually the highest of the following three amounts: either 30% adjusted monthly income, or 10% unadjusted monthly income, or, if receiving welfare assistance, the housing costs portion of this assistance.

Section 515 Rural Rental Housing

This property has received funding in part through the Section 515 Rural Rental Housing (Section 515) program. Very low-, low-, and moderate-income families, elderly persons, and persons with disabilities are eligible to live at this property. Persons or families living in substandard housing have priority for tenancy.

Section 521 Rural Rental Assistance Program

The Section 521 Rural Rental Assistance program is part of the U.S. Department of Agriculture's initiatives to help very low-income families, the elderly, and persons with disabilities afford rent in rural areas. It is applicable in properties financed by Section 515 Rural Rental or Section 514/516 Farm Labor Housing programs. The assistance covers the gap between 30% of a tenant's income and the monthly rental rate, ensuring that housing remains affordable. For more detailed information, you can visit the Housing Assistance Council's overview of the program at ruralhome.org.

Section 538 Rural Rental Housing

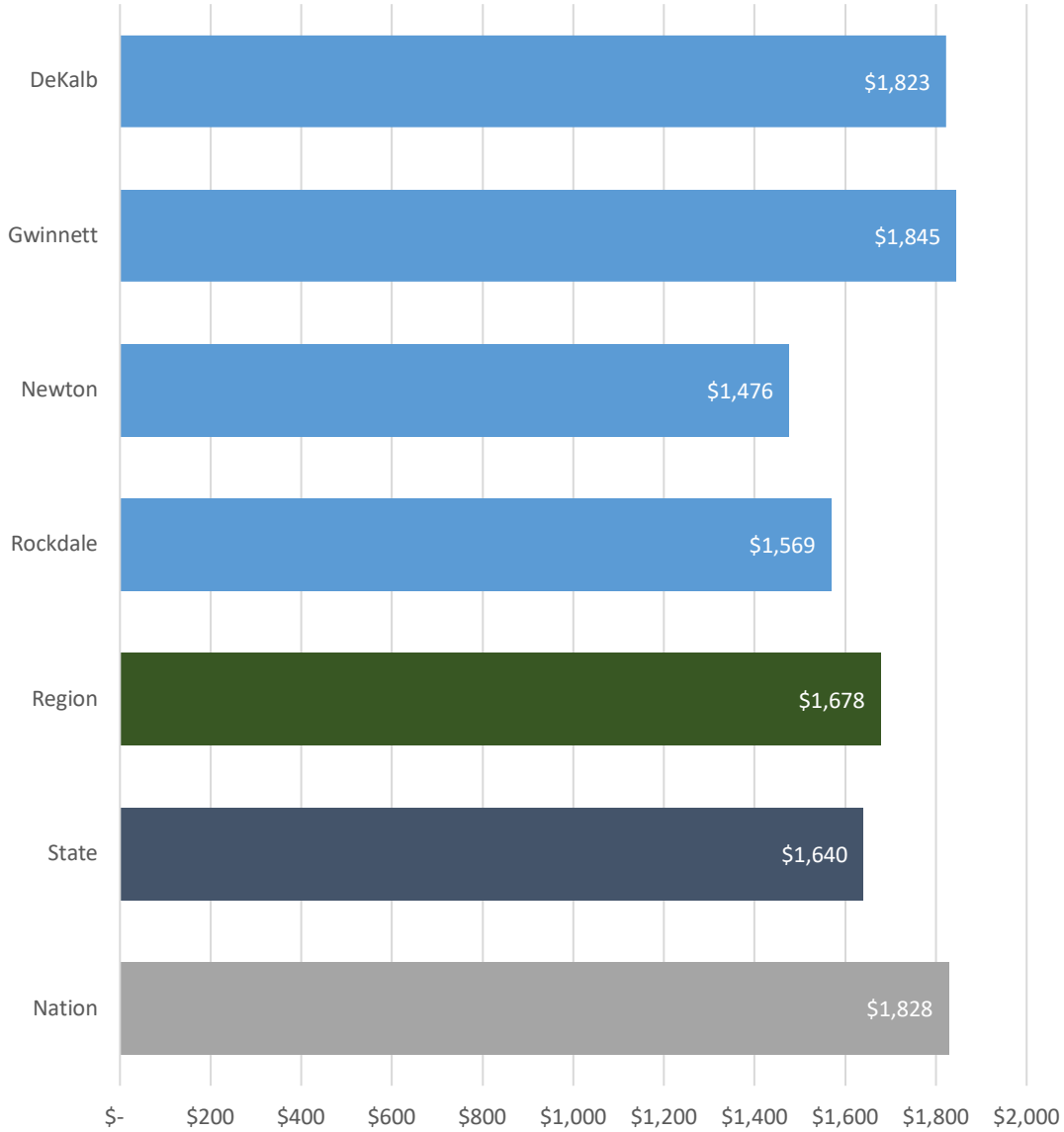
The Section 538 Guaranteed Rural Rental Housing Program (GRRHP) is designed to support the development of affordable rental housing for low- and moderate-income individuals and families in eligible rural areas. It offers loan guarantees to private lenders for loans made to eligible borrowers, which can include state and local governmental entities, nonprofit organizations, for-profit organizations, and federally recognized tribes. These loans can finance the construction, improvement, and purchase of multi-family rental housing. Rent is capped based on income levels relative to the area median income, and complexes must have at least five units.

Section 811 Rural Rental Housing

The Section 811 Supportive Housing for Persons with Disabilities program provides funding to develop rental housing with supportive services for very low- and extremely low-income adults with disabilities. This can include the development of group homes, independent living complexes, and other housing models that provide coordinated support. The goal is to allow individuals to live as independently as possible while receiving the services they need.

For individuals who own their homes, the financial landscape of home ownership in the region presents its own set of economic challenges. The median monthly mortgage cost in the region stands at $1,678, is comparable to the state ($1,640), but notably lower than the national average (1,828).

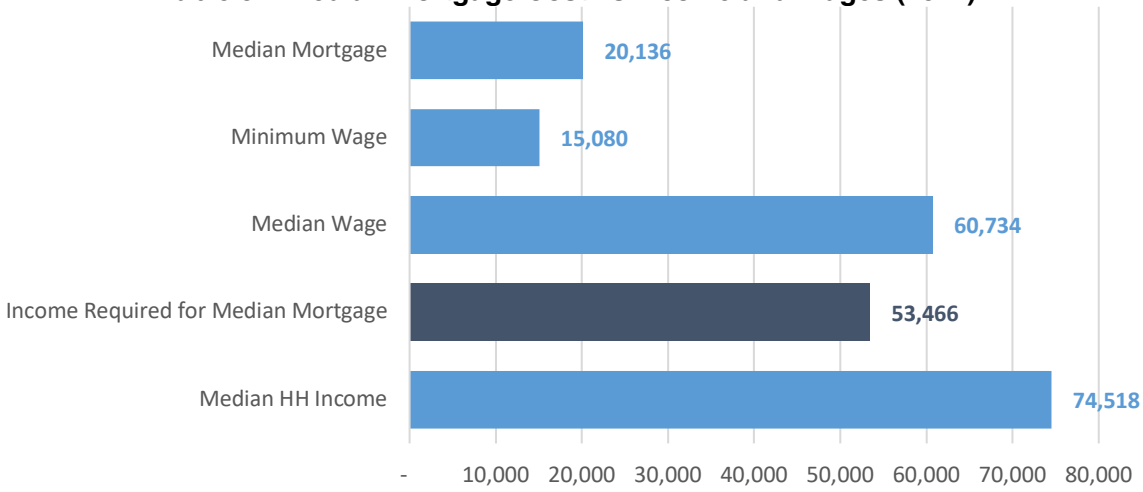
Chart 53: Median Mortgage Amounts by County (2022)



Source: US Census Bureau (DP04)

Comparing the median mortgage amount of $20,136 annually to the minimum wage, it is evident that low wage workers are not financially equipped for home ownership. In fact, the region's median wage of $60,734 is only $7,268 more than the income required for the median mortgage, meaning that a large portion of the community would struggle significantly with the cost of home ownership.

Table 54: Median Mortgage Cost vs Income and Wages (2022)



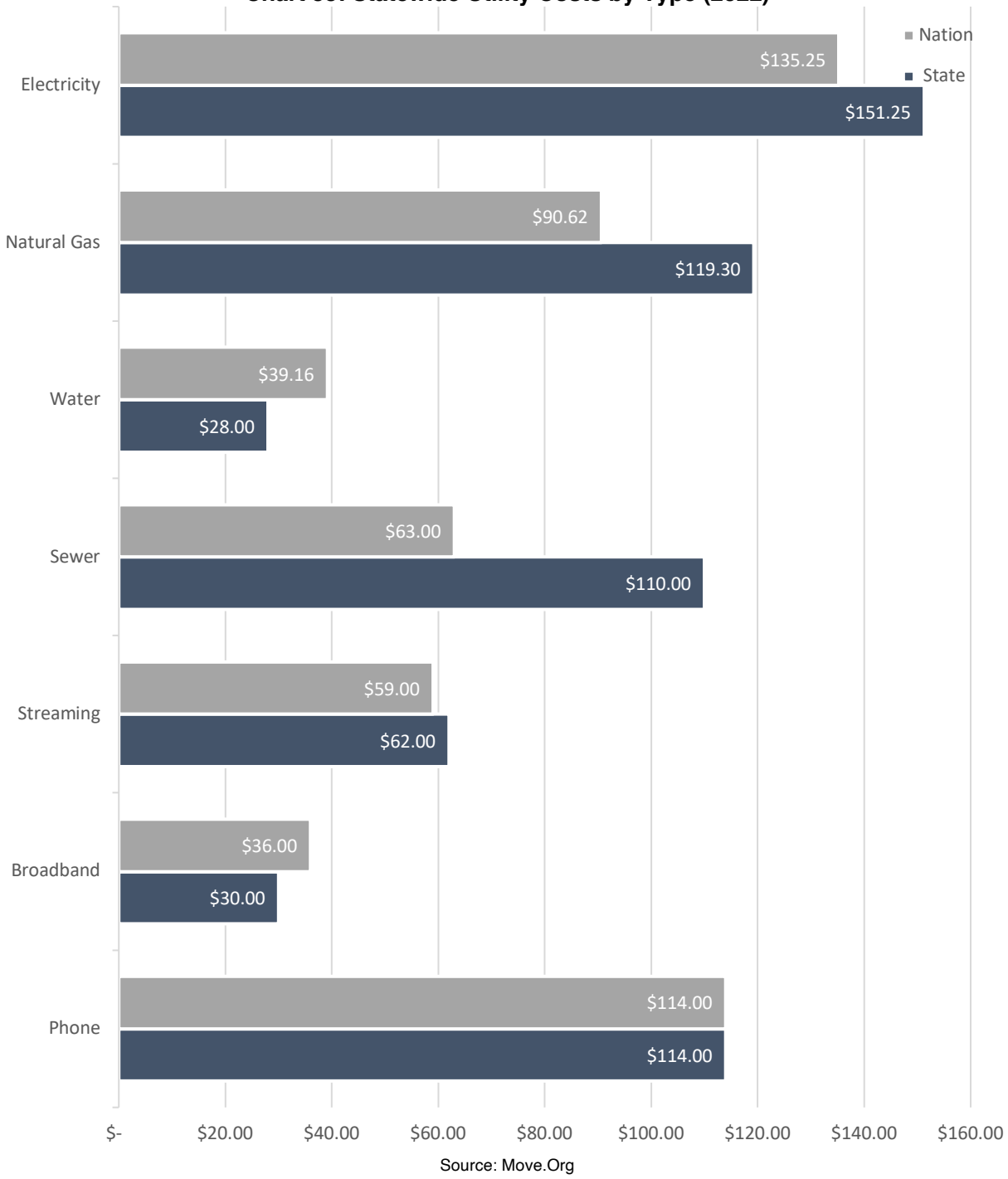
Source: US Census Bureau (DP03, DP04), Bureau of Labor Services

In addition to rent and mortgage amounts, the average cost of utility bills is a significant factor in a household's financial stability. In Georgia, residents face the fourth highest utility bills in the nation, averaging $7,404 annually — $936 more than the national average. This includes costs for essential services such as electricity, natural gas, water, and sewer, alongside modern necessities like broadband and streaming services. While some utilities like water and broadband are slightly less expensive in Georgia compared to national averages, the costs for electricity, sewer, natural gas, and streaming are notably higher, often outweighing the lower expenses and contributing to the overall higher utility bills in the state.

Electricity is essential for lighting homes, powering appliances, and providing heating and cooling, among other uses. In Georgia, the average monthly cost is $151.25, while the national average is $135.25. Annually, this amounts to $1,815 in Georgia and $1,623 nationally. When compared to the annual minimum wage of $15,080, Georgia's electricity costs consume about 12.03%, while nationally, it's approximately 10.76%. In terms of the median income, it represents around 3.66% in Georgia and 3.27% nationally. To decrease these costs, homeowners can improve insulation, install energy efficient appliance and LED lighting, turn off lights and appliances when not in use, and utilize smart thermostats to optimize energy use. Electric costs can also be impacted through programs such as Weatherization, that insulate homes and reduce heating costs.

Natural gas is primarily used for heating and cooking. In Georgia, residents pay on average $119.30 per month, higher than the national average of $90.62. This equates to $1,431.60 annually in Georgia, versus $1,087.44 across the nation. This utility accounts for 9.49% of the annual minimum wage in Georgia and 7.21% nationally. With respect to the median income, it's about 2.89% in Georgia and 2.19% nationally. Regular maintenance of gas appliances and weatherization of homes are effective ways to reduce natural gas expenses.

Chart 55: Statewide Utility Costs by Type (2022)



Source: Move.Org

Water is indispensable for drinking, cooking, cleaning, and sanitation. Georgians pay a lower monthly average for water at $28.00, compared to the national average of $39.16. Annually, this is $336 in Georgia and $470.52 nationally. When calculated against the minimum wage, it's approximately 2.23% in Georgia and 3.12% nationally. Against the median income, the percentages are 0.68% and 0.95% respectively. Conserving water by fixing leaks and installing low-flow fixtures can help reduce these costs.

Sewer services are crucial for public health and sanitation. The monthly average in Georgia is $110, significantly higher than the national average of $63.00. This results in a yearly cost of $1,320 in Georgia and $756 nationally. For a minimum wage earner, sewer costs represent 8.75% of annual income in Georgia and 5.01% nationally. In terms of median income, these figures are 2.66% and 1.52%, respectively. Reducing water usage overall also decreases sewer costs.

Broadband is critical for work, education, and maintaining personal connections. Georgians pay an average of $30 per month, which is lower than the national average of $36. The annual cost in Georgia is $360, compared to $432 nationally. As a percentage of the minimum wage, it's 2.39% in Georgia and 2.86% nationally, and regarding the median income, it's 0.73% in Georgia and 0.87% nationally. Households can lower broadband costs by choosing plans that align with their actual usage and needs.

Streaming services provide entertainment and access to a wide range of media. In Georgia, the cost is $62 monthly, just above the national average of $59. On an annual basis, Georgians spend $744 on streaming services versus the national average of $708. This expense accounts for 4.93% of the annual minimum wage in Georgia and 4.69% nationally, and 1.50% and 1.43% of the median income respectively. To reduce streaming costs, families can share plans or select fewer services.

Phone services are vital for communication and emergency purposes. Both in Georgia and nationally, the monthly average cost is $114. This amounts to an annual expense of $1,368, taking up 9.07% of the annual minimum wage and 2.76% of the median income both in Georgia and across the nation. To manage phone expenses, consumers can consider family plans or prepaid services that may offer better rates for their specific usage patterns.

As Georgia households navigate the complexities of balancing utility costs, which are among the highest in the nation, the importance of efficient resource management becomes increasingly evident. Mindful utility use not only ensures the provision of essential services but also fortifies the household against financial strain, laying the groundwork for long-term residential stability.

Evictions

The most significant impact of housing insecurity is the loss of housing. Eviction filings represent the initiation of legal proceedings by landlords to remove tenants, which can occur for a variety of reasons including non-payment of rent or breach of rental agreement terms. The filing rate, expressed as a percentage, is the proportion of rental households against which such actions are initiated. An eviction count, on the other hand, signifies the actual number of evictions carried out, which might be lower than the filings due to resolutions or dismissals. The eviction rate reflects the percentage of these filings that result in the tenant being legally compelled to leave their residence.

Table 49: Eviction Filings (2018)

Area	Filing Count	Eviction Count	Filing Rate	Eviction Rate
DeKalb	37,300	26,500	26.40%	18.80%
Gwinnett	20,900	15,900	20.00%	15.30%
Newton	3,400	2,700	31.80%	24.80%
Rockdale	3,300	2,400	30.80%	22.50%
STATE	**284,000**	**212,000**	**18.80%**	**14.10%**

Source: Eviction Lab

In DeKalb County, there were 37,300 eviction filings, resulting in 26,500 actual evictions. This represents a filing rate of 26.40% and an eviction rate of 18.80%. Gwinnett County had 20,900 eviction filings with 15,900 resulting in evictions, reflecting a filing rate of 20.00% and an eviction rate of 15.30%. Newton County saw 3,400 eviction filings, leading to 2,700 evictions, with the highest filing rate of 31.80% and an eviction rate of 24.80%. Rockdale County had 3,300 filings, resulting in 2,400 evictions, with a filing rate of 30.80% and an eviction rate of 22.50%.

The high filing and eviction rates, when compared to the statewide data, indicate significant housing instability, with a substantial proportion of rental households facing eviction proceedings. These high rates suggest that many households are struggling to meet rental payments or adhere to lease terms, leading to legal actions by landlords. The disparity between the filing rate and the actual eviction rate indicates that while many filings are initiated, not all result in tenants being removed from their homes, potentially due to legal defenses, payment plans, or dismissals.

The data highlights the urgent need for interventions to address housing insecurity, such as rental assistance programs, legal aid for tenants, and policies aimed at preventing evictions. Ensuring stable housing is critical for the well-being and economic stability of residents, and reducing the prevalence of evictions is a key component of these efforts.

Foreclosures

Foreclosure rates in the United States have seen a significant rise in 2022 compared to the previous year, with predictions indicating a continued increase into 2023. Current data indicates that there is a 36% year-over-year increase, with one in every 4,425 housing units experiencing foreclosure filings for that month. Notably, states with the highest foreclosure rates included New Jersey, Maryland, and Nevada.

While county-level data is limited, Georgia's foreclosure landscape shows a concerning trend with foreclosures increasing by 148.1% from the first half of 2021 to the same period in 2022. With 5,731 homes in foreclosure, the state has a rate of one in every 770 homes, placing it ninth in the nation for foreclosures. This rate suggests a considerable portion of Georgia's homeowners are at risk, indicating broader economic or financial challenges within the state. The rising foreclosure rates could have significant implications for the state's housing market and overall economic health, potentially leading to more available homes but also pointing to potential financial distress among homeowners.

Table 50: State Foreclosure Rates (2022)

State	Foreclosure Rate	Homes in Foreclosure	Homes with a Mortgage	Median Home Value
Illinois	1:385	14,086	62.8%	$202,100
New Jersey	1:410	9,177	66.0%	$343,500
Ohio	1:475	11,028	62.4%	$151,400
Delaware	1:497	903	64.7%	$258,300
South Carolina	1:513	4,568	57.7%	$170,100
Florida	1:560	17,624	56.7%	$232,000
Nevada	1:567	2,259	67.5%	$290,200
Indiana	1:606	4,822	65.2%	$148,900
GEORGIA	**1:770**	**5,731**	**64.5%**	**$190,200**
Michigan	1:773	5,913	59.6%	$162,600
Connecticut	1:773	1,979	67.4%	$279,700
Oklahoma	1:824	2,120	54.5%	$142,400
Maryland	1:863	2,934	72.5%	$325,400
California	1:881	16,340	69.5%	$538,500
Iowa	1:899	1,571	60.4%	$153,900
Alabama	1:925	2,475	55.7%	$149,600
North Carolina	1:958	4,917	62.5%	$182,100
Arizona	1:961	3,207	63.3%	$242,000
Texas	1:1,005	11,527	56.8%	$187,200
Pennsylvania	1:1,038	5,531	59.9%	$187,500

Source: TGV News

The challenges for those navigating the foreclosure process are multifaceted. It involves complicated legal proceedings and can be difficult to halt or reverse once it begins. For families going through this process, the impact is profound, extending beyond the loss of their home to include long-term credit damage, potential deficiency judgments, and the psychological stress associated with housing instability. The data underscores the importance of proactive interventions and support systems to assist homeowners in maintaining their housing security.

Homelessness

The ultimate consequence of a housing cost burden is the loss of housing. Not only does homelessness impact the quality of a person's life, but a lack of housing can impact health and the ability to secure meaningful employment.

In the most recently published Point-In-Time (PIT) Count a total of 976 homeless individuals were identified in the local service area. While 485 of these individuals were residing in an emergency shelter, the majority (50.31%) were unsheltered.

Table 51: Homeless Count by County (2022)

Area	Unsheltered	Sheltered	Total
DeKalb	402	163	565
Gwinnett	38	231	269
Newton	20	25	45
Rockdale	31	66	97
REGION	**491**	**485**	**976**

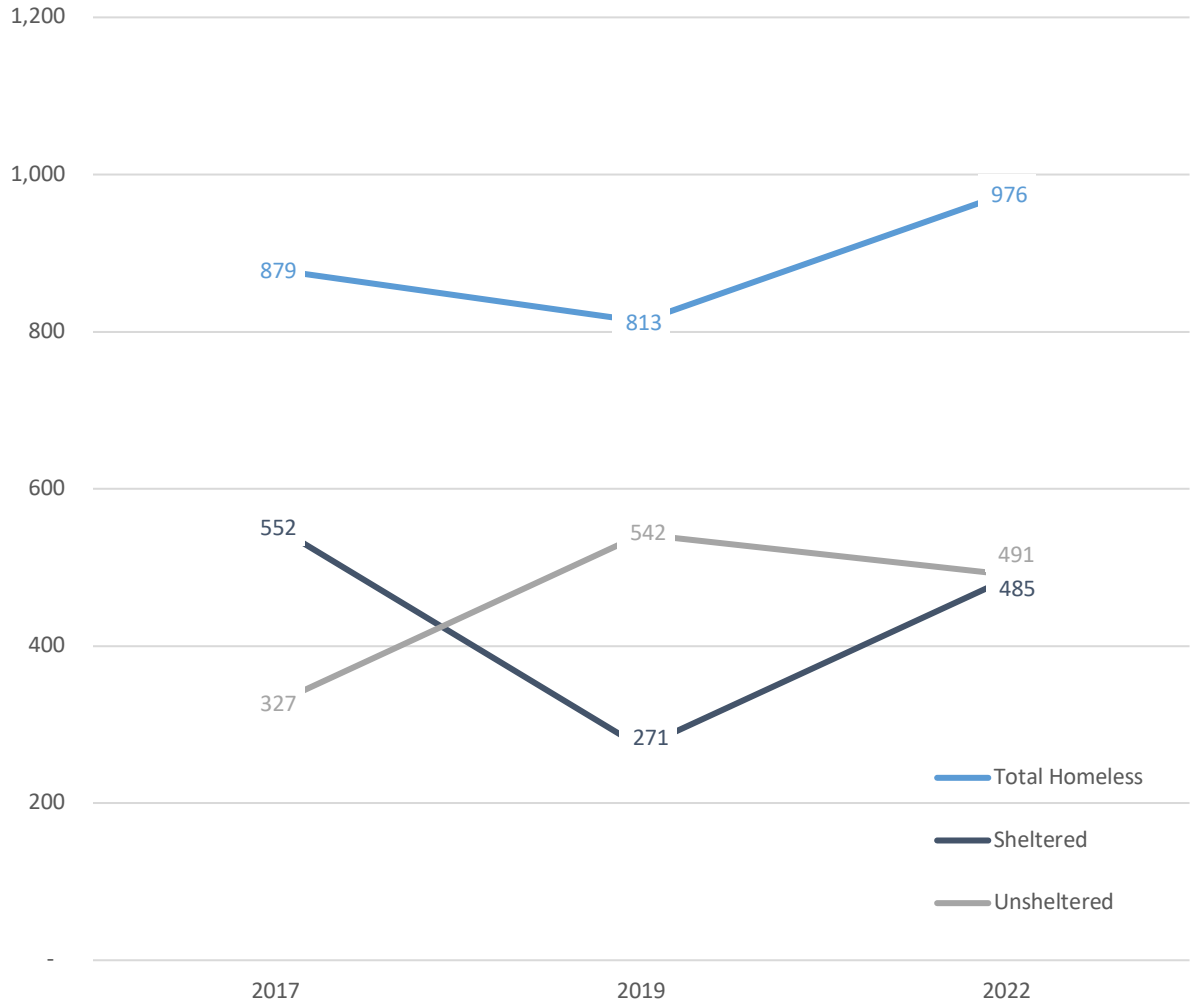
Source: Georgia Department of Community Affairs

Although county-level demographic data was not available, the 2022 statewide report shows that a majority of the homeless population are adults over the age of 24, predominantly male, and primarily non-Hispanic/Latino. A significant portion of the unsheltered population is facing serious mental illness, with a notable increase in chronic homelessness over recent years. These trends underscore the need for targeted support services addressing mental health, substance use disorders, and tailored assistance for veterans and individuals with HIV/AIDS. The data demonstrates the growing challenge of addressing chronic homelessness, emphasizing the importance of comprehensive strategies to mitigate this trend.

Among the homeless individuals residing in shelters, data indicates that 31% are adult survivors of domestic violence. Substance use disorder and serious mental illness are also prevalent challenges, indicating a need for integrated support services within shelters. Notably, the majority of the sheltered population are over the age of 24, yet a significant percentage are minors, highlighting the broad age range homelessness affects.

According to the Georgia Department of Community Affairs, homelessness in the region has increased by 11.04% since 2017. Although the number of sheltered residents decreased significantly in 2019 (-50.91%), the number rebounded by 78.97% between 2019 and 2022. In contrast, the number of unsheltered residents increased by 65.75% in 2019 but has since experienced a reduction of 9.41%.

Table 56: Regional Homeless Trend (2017-2022)



Source: Georgia Department of Community Affairs

Statewide data also reveals that the balance of the homeless population is shifting toward unsheltered individuals, which could be a consequence of the pandemic's long-term effects. The demographics indicate a majority of the unsheltered individuals are white males over 24 and non-Hispanic/Latino, while the sheltered population is predominantly Black or African American females over 24. The rising trend in chronic homelessness and domestic violence survivors indicates the urgent need for preventive measures and robust support networks to address this worrying trend.

Community Feedback
Community feedback regarding housing highlights significant barriers to economic security and basic living conditions. Among the 516 survey respondents, 108 identified housing insecurity as one of the most critical conditions of poverty. Supporting this, 365 low-income residents reported experiencing housing insecurity in the past year, with 291 unable to find help. Qualitative feedback emphasizes the struggles with high rent, inadequate housing conditions, and the need for more funding to support those struggling with rent and mortgage payments. For instance, one respondent noted, "The cost of rent and mortgage payments are going up. People are having to make a choice about what to pay for."

The risk of utility loss was identified as a critical issue by 281 respondents. Among the low-income residents surveyed, 353 experienced the risk of utility loss, with 137 unable to find help in their time of need, 63 of which were disconnected. This concern is echoed in the qualitative feedback, with many respondents highlighting the high cost of utilities and the difficulty in keeping up with payments. One resident mentioned, "The cost of utilities is so high you can hardly pay them." While energy assistance was appreciated, residents noted that current amounts are not adequate based on recent price increases.

Poor housing quality was noted as a leading barrier by 68 respondents. Specific housing conditions reported include rodent/insect infestations (41), mold (38), sagging/leaking roofs (23), inadequate insulation (23), foundational issues (21), inadequate heating units (19), broken windows/doors (13), missing siding (12), openings in walls/floors/ceilings (12), exposed wiring (12), lead-based paint (8), and asbestos (7). Among those experiencing poor quality housing, 193 reported issues, with 169 unable to find help. Qualitative data supports these findings, with respondents discussing issues like, "My house needs so many repairs inside and outside. My shower isn't working in my bathroom, and I don't have a refrigerator to keep my food cold."

The lack of affordable housing was identified as a significant barrier by 313 respondents. This issue was experienced by 159 low-income residents, with 133 unable to find help. The community feedback underscores the need for more affordable housing options. One respondent noted, "Affordable housing is a big problem. I see quite a bit of homelessness." Another mentioned, "Rent in communities has increased so drastically that I'm not able to find somewhere affordable."

Agency Data
In 2022, the organization served households with a diverse range of living situations. Among these households, 88 were homeowners. Of these homeowners, 82 lived in houses, 2 in mobile homes, and 1 in a multi-family dwelling.

The majority of the households served (845) were renters. Among these, 1 household lived in a house, 2 in mobile homes, 346 in single-family dwellings, 490 in multi-family dwellings, 5 in rooms or dorms, and 1 in an unspecified type of residence.

Additionally, 247 households were identified as being homeless. Among these, 12 were unsheltered, 217 lived in temporary housing, and 18 lived with a relative. The average household size among the homeless was 2.60, and the average household income was $31,741.57.

2024 COMMUNITY ASSESSMENT

Housing Resources

Resource Name	Contact Information	Description
A Place to Stay		Provides assistance to residents of DeKalb County with temporary shelter, rent/mortgage payments, and utility payments.
Action Ministries	404-881-1991	Provides homeless services focused on long-term stability.
Africa's Children's Fund	678-381-1282	Provides rapid re-housing, rent, and utility assistance to families and people living with AIDS in Dekalb County.
Ashley HomeStore	ashleyangels.org	Provides a twin mattress, bed frame, bedding, and pillow to children who are living in poverty or transitioning out of homelessness.
Asian American Resource Center	770-270-0663	Provides rapid re-housing assistance to low-income families with children in Gwinnett County who are homeless, as defined by the United States Department of Housing and Urban Development.
Atlanta Mission	404-588-4000	Provides emergency shelter assistance to homeless men, women, and children.
Caring Works, Inc	404-371-1230	Provides emergency, transitional, and supportive housing to homeless men and men facing homelessness.
Community Concerns	844-281-7226	Provides emergency shelter and transitional housing assistance to single women with substance abuse problems.
Conyers Housing Authority	770-483-9301	Provides subsidized housing to low-income households in Rockdale County.
Decatur Area Emergency Assistance Ministry (DEAM)	404-373-2300	Provides emergency utility assistance payments to residents of DeKalb County.
Decatur Cooperative Ministry	404-377-5365	Provides homeless veterans residing in DeKalb County with assistance locating and establishing permanent housing through the Supportive Services for Veterans Families (SSVF) program. Provides homeless prevention assistance to low-income seniors, veterans, and households who are at imminent risk of housing loss. Provides emergency shelter assistance to homeless women with children.
Family Promise	678-376-8950; 770-609-5407	Provides emergency shelter in host churches/synagogues along with support services in an effort to assist homeless families with children with the establishment of permanent housing.
Furniture Bank of Metro Atlanta	404-355-8530	Provides free furniture to individuals moving out of homelessness, living with HIV/AIDS, or fleeing domestic violence.
Gateway Center	404-215-6600	Provides residential housing and support services to homeless men.
Habitat for Humanity	1-800-422-4828	Helps families build and improve places to call home in partnership with members of the local community.
Heritage Hills Baptist Church	770-922-2027	Provides emergency financial assistance with rent and utilities to low-income households residing in DeKalb County.
Holy Trinity Episcopal Church	404-377-2622	Provides emergency financial assistance with utilities to low-income households residing in Rockdale County.
HOPE Atlanta	404-817-7070	Provides assistance with housing search/placement, rent payments to individuals who are homeless or at imminent risk of homelessness.
Hosea Helps	404-755-3353	Provides temporary shelter services and emergency assistance with rent and utilities to residents of DeKalb County.
Housing Authority of the City of Decatur	404-270-2100	Provides low-income, elderly, and disabled residents of Decatur with decent, safe, and sanitary housing through the Section 8 Program.
Housing Authority of DeKalb County	404-270-2500	Provides decent and safe rental housing for eligible low-income families, the elderly, and persons with disabilities residing in DeKalb County through the Section 8 Program, veterans housing assistance, resident support services, and multiple family tax exempt bonds.
Impact! Group	1-800-420-2420	Provides traditional housing and support services to homeless families in Gwinnett County.
Initiative for Affordable Housing	404-299-9979	Provides traditional housing and support services to homeless families in Dekalb County
Jerusalem House/Status:Home	404-350-1633	Provides permanent housing for low-income and homeless families affected by HIV/AIDS.
Love, Peace, and Joy Help Ministry (LPJHM)	404-288-3777	Provides emergency assistance with rent/mortgage and utilities to individuals and families facing a financial crisis.
Metro Fair Housing Services	4014-524-0000	Provides counseling and advocacy to prevent housing discrimination.
Net Works Cooperative Ministry, Inc.	770-939-6454	Provides financial assistance with housing and utilities to neighbors within the Northlake-Embry HIlls-Tucker area of DeKalb County.
Operation Homefront	210-659-7756	Provides rent-free transitional housing to wounded veterans and assists military families in need with home repairs.
Our House	404-522-6056	Provides emergency shelter assistance to homeless families in DeKalb County.
Partnership for Community Action	404-929-2500	Provides emergency housing and utility assistance to low-income households experiencing a loss of income and/or unexpected expense. Provides heating/cooling subsidies to low-income households through the Low-Income Home Energy Assistance Program.

Phoenix Pass	770-760-1020	Provides temporary residential housing to women and children experiencing homelessness in Rockdale County.
Project Community Connection, Inc (PCCI)	404-215-9991	Develops and implements solutions to permanently rehouse homeless residents of DeKalb County experiencing homelessness into appropriate, affordable homes as efficiently as possible, often within 30 days.
P.U.S.H. Nonprofit Organization	678-476-3712	Provides emergency housing and utility assistance to low-income residents of DeKalb County.
Resource Center for Community Action	770-760-1346	Provides emergency assistance with rent, mortgage, and utility payments to residents of Rockdale County.
Rockdale Emergency Relief Fund	770-922-0165	Provides emergency housing and utility assistance to low-income families and individuals in Rockdale County.
St. Vincent De Paul Society	678-892-6163	Provides emergency housing and utility assistance to low-income.
Q LInk Wireless	855-754-6543	Provides low-income families and households with discounted and free landline phone services.
Quest Community Development Organization	678-705-5318	Provides temporary housing and supportive services to chronically homeless men.
The Quilt, Inc.	404-297-8321	Provides a safe, secure, and stable hosing program to residents of Dekalb County.
SafeLink Wireless	1-800-SafeLink	Provides discounted mobile telephone rates for low-income households.
Salvation Army of Metro Atlanta Command	404-486-2710	Provides assistance with rent, utilities, and home furnishings to individuals and families facing a financial crisis.
Urban league of Greater Atlanta	404-659-1150	Provides HUD approved homeownership counseling.
U.S. Department of Veteran Affairs	va.gov	Assists service-connected disabled veterans with assistance purchasing homes that can accommodate disabilities.
Veterans Aging in Place	770-722-0069	Partners with local volunteers to renovate veteran homes.
Veteran Center Incorporated	678-792-8387	Provides housing assistance to homeless, disabled, and disadvantaged veterans.

Conclusion: Strengths
The region demonstrates a strong surplus of housing units, with 734,598 units available to accommodate 675,847 households. This surplus of 58,751 units indicates that there is, in general, an ample supply of housing to meet the community's needs. Single-family homes, which are often preferred for their space and privacy, make up the majority of available units, with 484,085 homes. Additionally, there is a substantial number of multi-family units (240,222), which provide crucial affordable housing options, particularly in urban areas where space is limited. Mobile homes, while a smaller segment of the market, also contribute to the diversity of affordable housing options available to residents.

Conclusion: Weaknesses
Despite the availability of housing, the quality and affordability of many homes remain significant concerns. The total number of substandard housing units in the region is 219,090, accounting for nearly one-third (29.82%) of all housing units. This highlights a major issue in the quality of housing available to residents. When these substandard units are excluded from the available housing stock, the community faces a deficit of 160,339 housing units, suggesting that at least 160,339 households are living in substandard conditions. Of these, 53,434 households experience severe conditions.

Renters are particularly affected by substandard housing conditions, with 127,855 rental units identified as substandard, representing 51.45% of all rental units. Moreover, 69,025 of these rental units (53.99%) have more than one severe condition, indicating critical safety and habitability issues. In contrast, owner-occupied units with substandard conditions total 91,235, representing 21.35% of all owned units, with 43,160 units (47.31%) having more than one severe condition. Renters are thus more than twice as likely to live in substandard housing units compared to owners and nearly three times as likely to live in units with severe conditions.

The age of the housing stock also presents challenges, with nearly half (47%) of the region’s housing units being more than 40 years old. Older homes often require significant renovations to meet modern safety and energy efficiency standards, which can be financially burdensome for homeowners. These homes are also more likely to contain health hazards such as lead and asbestos, and face structural issues due to outdated construction materials and methods.

Housing costs, including utilities, pose another significant barrier to housing stability, with an estimated 206,190 families being hosing cost burdened. This simply means that they spend more than one-third of their income on housing and utility costs alone. With a median rent cost of $16,752 (or $24,156 with utilities) and an average mortgage cost of $20,136 (or 27,540 with utilities), it is extremely difficult for residents on fixed incomes or earning low wages to maintain housing.

The result of housing insecurity is loss of the home. The region's eviction filing and eviction rates indicate significant housing instability, with many households struggling to meet rental payments or adhere to lease terms. For example, DeKalb County had 37,300 eviction filings, resulting in 26,500 actual evictions, reflecting an eviction rate of 18.80%. Such high rates of eviction underscore the need for interventions to address housing insecurity and provide support to vulnerable populations.

Health & Well-Being

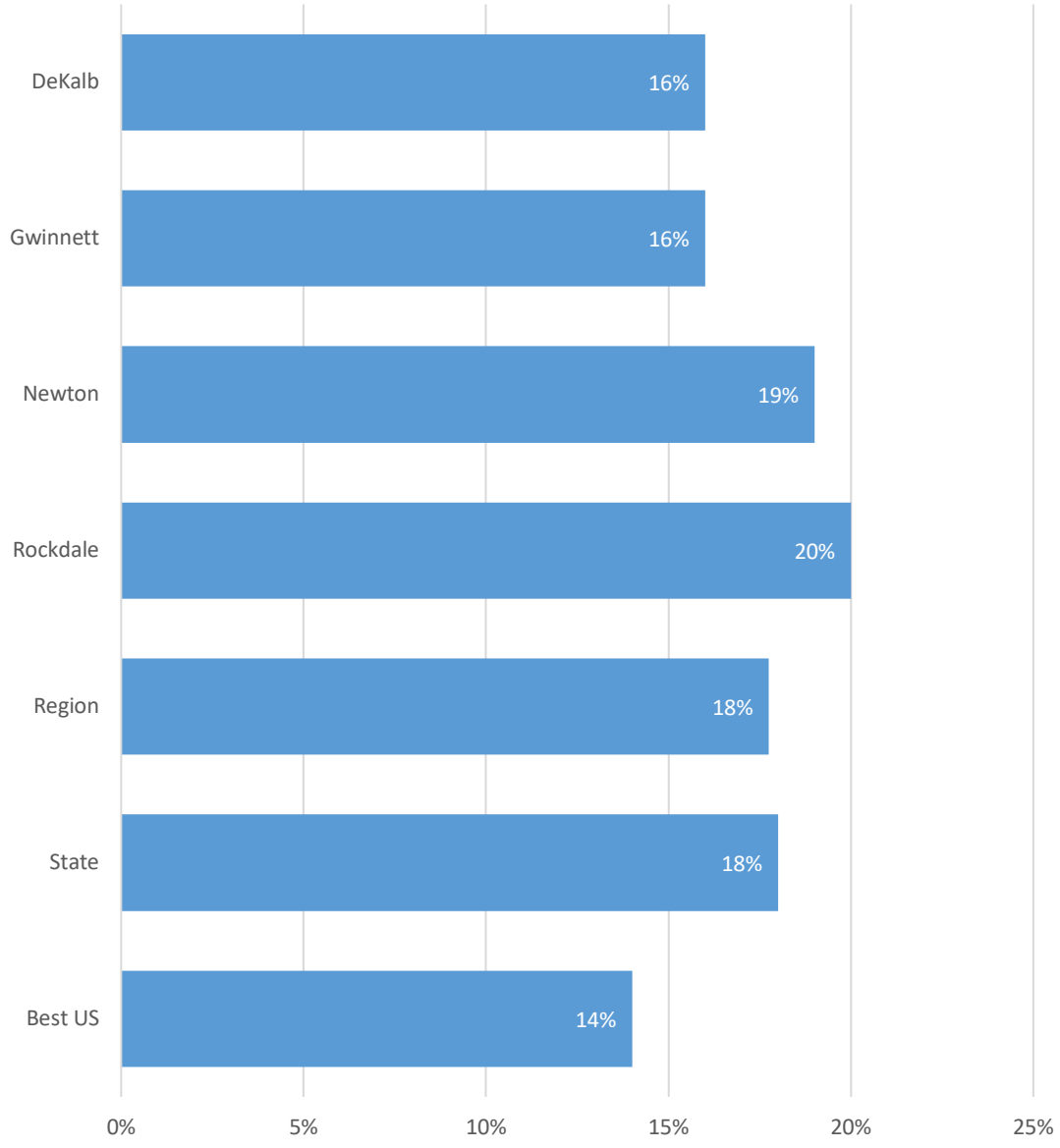
Introduction

Access to healthcare and overall well-being are critical components in the fight against poverty. Good health is a fundamental building block for economic stability and prosperity, enabling individuals to work, learn, and engage fully in their communities. Unfortunately, poverty often exacerbates health issues and can lead to inadequate housing, food insecurity, and limited access to preventative care—all factors that contribute to poorer health outcomes.

General Health

In the region served by the organization an estimated 17.75% of all local adults (237,264 individuals) were noted having poor to fair health. In comparison, the statewide average is 18%, with the best communities in the country averaging at 14%.

Chart 57: Percentage of Adults with Poor Health (2024)

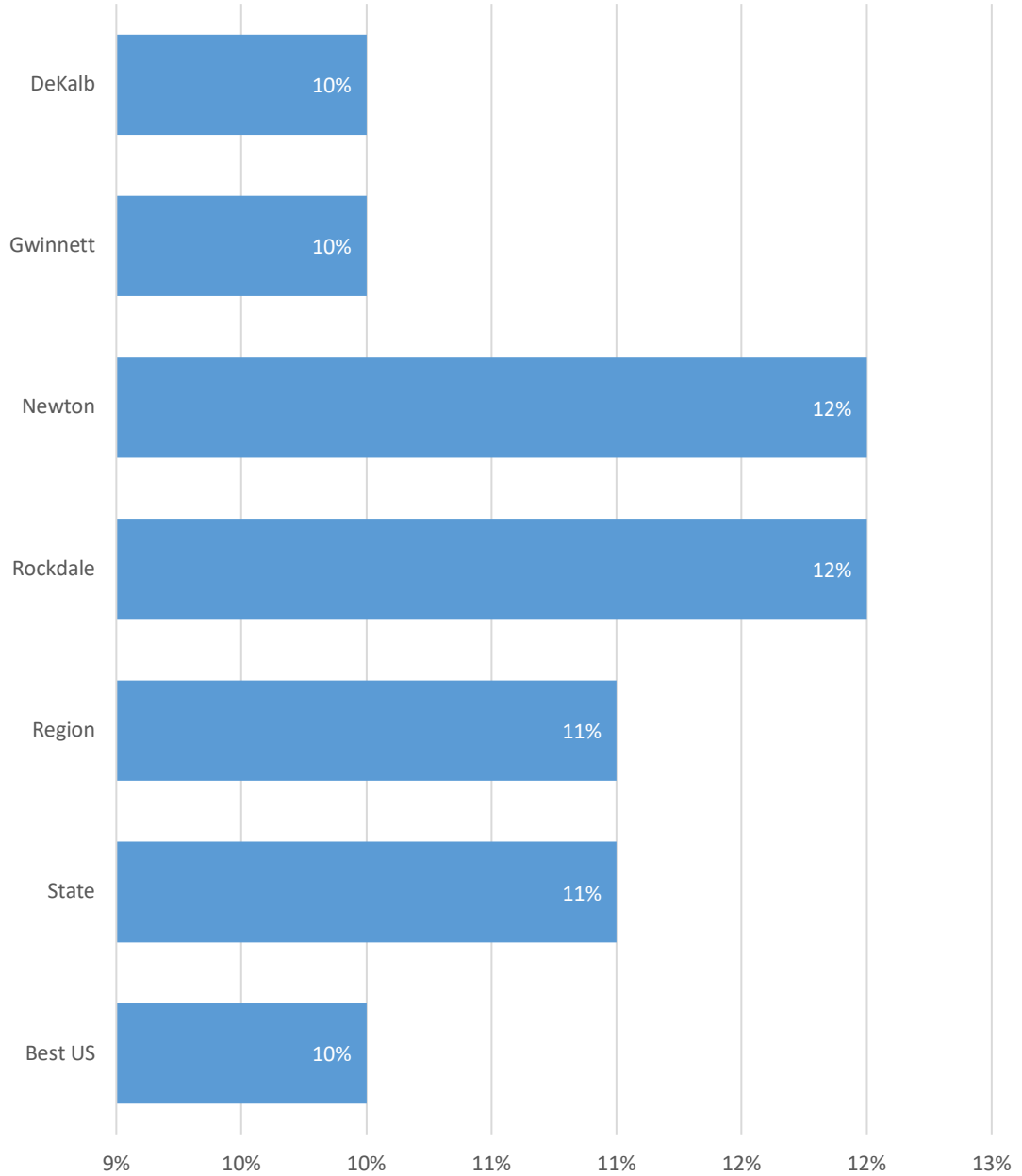


Source: County Health Rankings (CDC BRFSS)

Among the residents with poor health, many struggle with severe conditions that impact their quality of life on a regular basis. The most recently published data indicates that 148,040 local adults, representing 11% of the population over the age of 18, suffer from more than 14 days of physical health distress each month. This is equal to the state average and slightly higher than the nation's best communities (10%).

Frequent physical health distress is a significant indicator of overall health and quality of life. The chart below highlights the percentage of adults experiencing frequent physical distress across various counties within the region. Newton and Rockdale counties have the highest rates at 12%, followed by the region overall and the state at 11%. DeKalb and Gwinnett counties report the lowest rates at 10%, which aligns with the best-performing U.S. communities.

Chart 58: Percentage of Adults with Frequent Physical Health Distress (2024)



Source: County Health Rankings (CDC BRFSS)

This data underscores the importance of addressing chronic health conditions and providing adequate healthcare resources. Poor physical health days are influenced by various factors, including access to healthcare, socioeconomic status, and lifestyle choices. By examining these health outcomes, policymakers and health professionals can better understand and mitigate the challenges faced by different communities, leading to improved health policies and interventions.

It's crucial to recognize that health-related quality of life (HRQoL) not only affects individuals' day-to-day experiences but also has broader implications for community well-being and economic stability. Measures such as these are essential for capturing the nuances of public health and guiding efforts to enhance the overall quality of life for residents."

When considering the factors that promote poor physical health, obesity is one of the greatest influencing factors. While the term simply implies that a person has too much body fat, a diagnosis of obesity is actually based on a Body Mass Index calculation of 30 or higher. With more than 36.25% of the region's adults (475,752 individuals) suffering from obesity, it ranks as a tremendous health concern in the county. It should be noted that this rate is higher than the state average of 34%.

Not only does obesity in itself lead to a general feeling of poor health, but it also increases the risk of high blood pressure, heart disease, stroke, diabetes, high cholesterol, joint problems, trouble breathing (including sleep apnea), and gallstones.

Obesity is a complex condition that can impact anyone. Contributing factors to obesity include social and physical environments, genetics, medical history, and behaviors such as poor diet and physical inactivity. Childhood maltreatment has also been identified as a risk factor for obesity. The prevalence of obesity is highest among adults ages 45-64, those with lower levels of educational attainment, and with incomes of less than $25,000 per year.

Table 52: Major Health Conditions (2024)

Area	Obesity	Diabetes	STI Infections
DeKalb	194,105	70,584	5,006
Gwinnett	218,733	77,615	3,531
Newton	33,745	10,967	639
Rockdale	29,169	9,249	588
REGION	**475,752**	**168,415**	**3,765**
STATE	**2,791,325**	**903,076**	**51,648**
NATION	**87,680,522**	**25,788,389**	**1,277,815**

Source: County Health Rankings (CDC BRFSS, NCHHSTP)

High Blood pressure, also known as Hypertension, is a major risk factor for heart disease and stroke. Although county-level data was not available, the American Heart Association reports that nearly one-half (46.7%) of all adults in the United States and nearly 40% of Georgia residents have been diagnosed with Hypertension. The most recent report states that the death rate associated with high blood pressure has increased by 91.2% over the past decade. Data indicates that a person's age, income, education, employment, and social status are directly linked to the risk of high blood pressure. Populations with higher prevalence of hypertension include men (as compared to women), adults ages 65 and older, individuals identifying as Black (likely associated with socio-economic stress factors), and low-income individuals.

An estimated 12.25% of all adults (168,415 individuals) in the organization's service area have been diagnosed with Diabetes. This disease occurs when a person's blood glucose (blood sugar) is too high. Blood glucose is a person's main source of energy and is generated by food. This disease can not only put a person's life at risk, but it is also often associated with fatigue, decreased ability to heal, reduced sex drive, erectile disfunction, urinary tract infections, yeast infections, and dry skin. Of the three types of Diabetes, Type 2, is directly associated with obesity and is more common among individuals with low incomes.

With an estimated 3,765 adults impacted, sexually transmitted infections are not a prominent concern in the county, however, it is important to monitor these conditions closely on an ongoing basis as they can often spread quickly when left unchecked, impacting the economic well-being of infected persons and, in some cases, the health of community members they come in contact with.

Mental Health

Mental health is the level of psychological well-being that allows a person to maintain an appropriate functioning of their emotional and behavioral abilities. Mentalhealth.org, a service of the U.S. Department of Health and Human Services, reports that mental health is important at every stage of life, from childhood and adolescence through adulthood, as it impacts how a person thinks, feels, acts, handles stress, relates to others, and makes informed decisions. The 2019 report states that there are many factors that contribute to mental health problems, including biological factors (brain chemistry), life experiences (trauma and/or abuse), and family history of mental health problems.

The mental health of Georgia's residents emerges as a critical concern with implications for the state's overall well-being and prosperity. The Center for Behavioral Health Statistics and Quality's report on Georgia highlights that over 36.6% of adults over the age of 18 accessed mental health services in 2019.

Among the state's adults, data indicates that 5.8% suffer from severe mental illness, with 5.0% having serious thoughts of suicide. In 2019, only 4.2% suffered from severe mental illness, with 3.8% seriously considering suicide. These increases (38.1% and 31.58, respectively) underscore a growing mental health crisis that warrants urgent attention.

Table 53: Georgia Residents Reporting Mental Health Concerns by Age Group (2022)

Ages	Rcvd Services	Serious Mental Illness	Major Depressive Ep.	Suicidal Thoughts
12-17	No Data	No Data	17.4%	12.3%
18+	No Data	5.8%	8.2%	5.0%

Source: Center for Behavioral Health Statistics and Quality – Georgia Behavioral Health Barometer (Volume 7)

For adolescents aged 12-17, the situation is similarly concerning. Although specific data for received services and serious mental illness is not available, 17.4% report experiencing major depressive episodes, an increase of 41.3% from 2019). This highlights the significant mental health challenges faced by young people in Georgia, indicating a critical need for enhanced mental health services and preventive measures. The data reflects a broader trend of increasing mental health concerns across all age groups, exacerbated by factors such as economic stress, social isolation, and the lingering impacts of the COVID-19 pandemic.

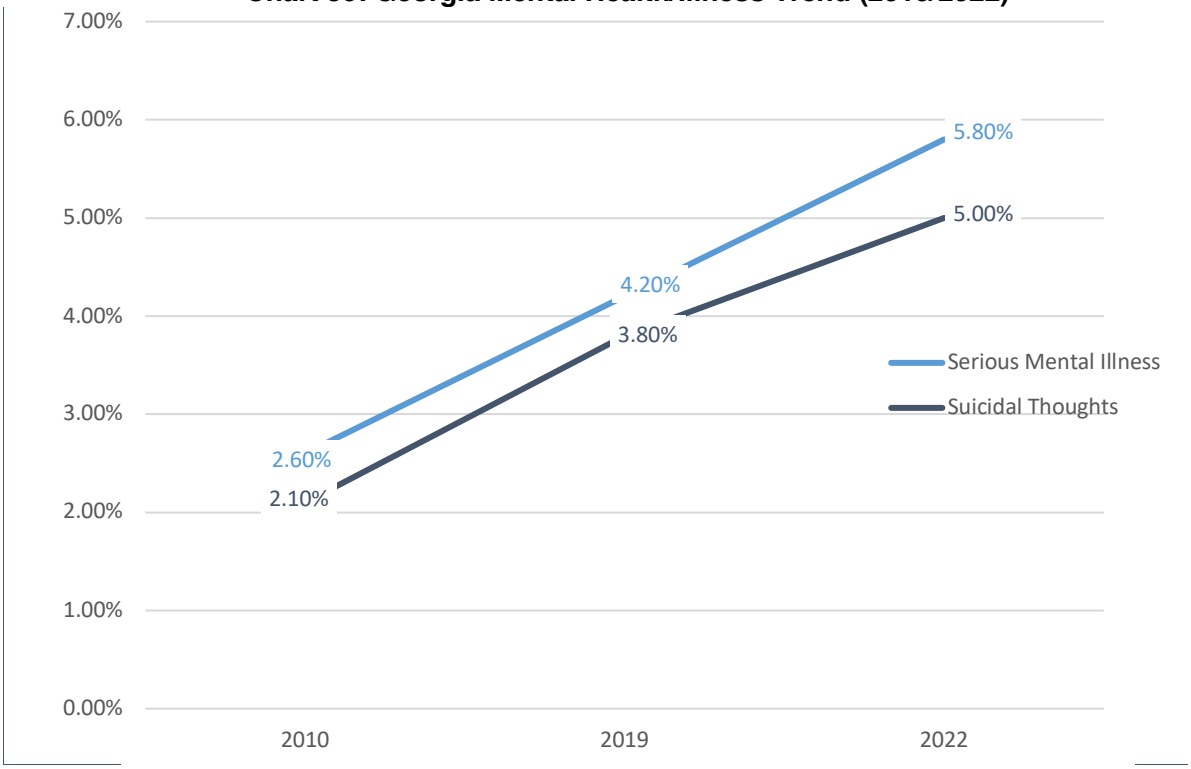
A major depressive episode is characterized by a persistent state of sadness or hopelessness and is often accompanied by significant changes in weight, sleep, or interest in activities. This high prevalence of depressive episodes among youth is a stark reminder of the vulnerability of this age group and the potential long-term impacts on their development and quality of life.

It is essential to acknowledge that mental health issues do not exist in a vacuum; they are intricately linked with socio-economic determinants such as poverty, education, and healthcare accessibility. Therefore, the community should consider an integrative strategy that addresses the multifaceted nature of mental health. Such a strategy should aim not only to provide immediate mental health interventions but also to tackle the root causes that predispose individuals to mental health challenges.

Comparatively, Georgia's statistics resonate with the regional and national trends, suggesting that the mental health issues observed are reflective of a broader national concern. The alignment in prevalence rates across different regions advocates for shared learning and possibly the implementation of successful intervention strategies across state lines.

The chart below shows a troubling trend where the prevalence of serious mental illness and suicidal thoughts have increased from 2010 to 2022. In 2010, the rates were 2.60% for serious mental illness and 2.10% for suicidal thoughts. By 2019, these numbers had risen to 4.20% and 3.80% respectively. In 2022, the rates further increased to 5.80% for serious mental illness and 5.00% for suicidal thoughts. This data underscores the growing mental health crisis in Georgia and highlights the urgent need for comprehensive mental health services and preventative measures.

Chart 59: Georgia Mental Health/Illness Trend (2019/2022)



Source: Center for Behavioral Health Statistics and Quality – Georgia Behavioral Health Barometer (Volume 6 & 7)

Within the organization's service area, data indicates that 213,448 adults (15.85%) suffer from frequent (more than 14 days per month) mental distress. This rate is higher than the state average of 15%.

Table 54: Adults with Frequent Mental Distress (2024)

Area	Number	Percent
DeKalb	88230	15%
Gwinnett	98783	14%
Newton	14342	17%
Rockdale	12094	17%
REGION	**213,448**	**15.75%**
STATE	**1,231,467**	**15%**

Source: County Health Rankings (CDC BRFSS, NCHHSTP)

Frequent mental distress, characterized by extended periods of stress, depression, and emotional problems, can severely impact an individual's ability to function and contribute to their community. The higher rates in the region's counties suggest a greater need for mental health resources and interventions tailored to these communities' specific needs. The data underscores the importance of considering local nuances when planning health services and allocating resources.

It should also be noted that according to the Mental Health National Outcome Measures (NOMS) Report for calendar year 2019, the 143,475 Georgia residents accessing mental health care were predominately female (50.90%) as compared to male (49.00%), White (48.90%) and Black (43.10%), between the ages of 25 to 44 (40.40%) and 45 to 64 (34.60%), with smaller populations being ages 21 to 24 (6.60%), 13 to 17 (5.40%), birth to 12 (4.20%), 65 to 74 (4.10%), 18 to 20 (3.90%), an 75 or older (0.70%).The majority (51.40%) were not in the labor force, with 32.4% being unemployed and 16.10% actively working.

These individuals predominately lived in private residences (85.00%), with smaller portions living in residential care facilities (8.20%), homeless shelters (5.00%), jail (0.40%), foster homes (0.30%), and residential treatment facilities (0.10%).

Significantly more than half (63.20%) of the residents served paid though non-Medicaid sources, with 29.50% using Medicaid, and 7.30% using a combination of Medicaid and other insurance types.

Disability Status

Data indicates that an estimated 9.91% of the local population, or 189,642 individuals, were classified as disabled in 2022. This rate is notably lower than the state (12.70%) and national (12.90%) averages.

Table 55: Disabled Individuals by Age Group and County (2022)

Area	Young Children	School-Aged Children	Adults	Seniors	TOTAL	Percent
DeKalb	159	9,317	45,299	32,039	86,814	11.49%
Gwinnett	311	7,950	39,518	27,452	75,231	7.89%
Newton	174	1,609	8,838	5,504	16,125	14.35%
Rockdale	170	916	5,742	4,644	11,472	12.36%
REGION	**814**	**19,792**	**99,397**	**69,639**	**189,642**	**9.91%**

Source: U.S. Census Bureau (DP02, S1810)

For adults, a disability status significantly impacts their quality of life and economic security. Disabled adults often face barriers to securing meaningful employment, which exacerbates financial instability. This demographic is likely to have dependents, meaning their inability to work can affect the economic well-being of the entire family. According to the U.S. Census Bureau, 99,397 adults in the region are disabled, and with the average household size being 2.81, this potentially impacts up to 279,306 individuals. This underscores the broader economic implications of adult disabilities on entire households and communities.

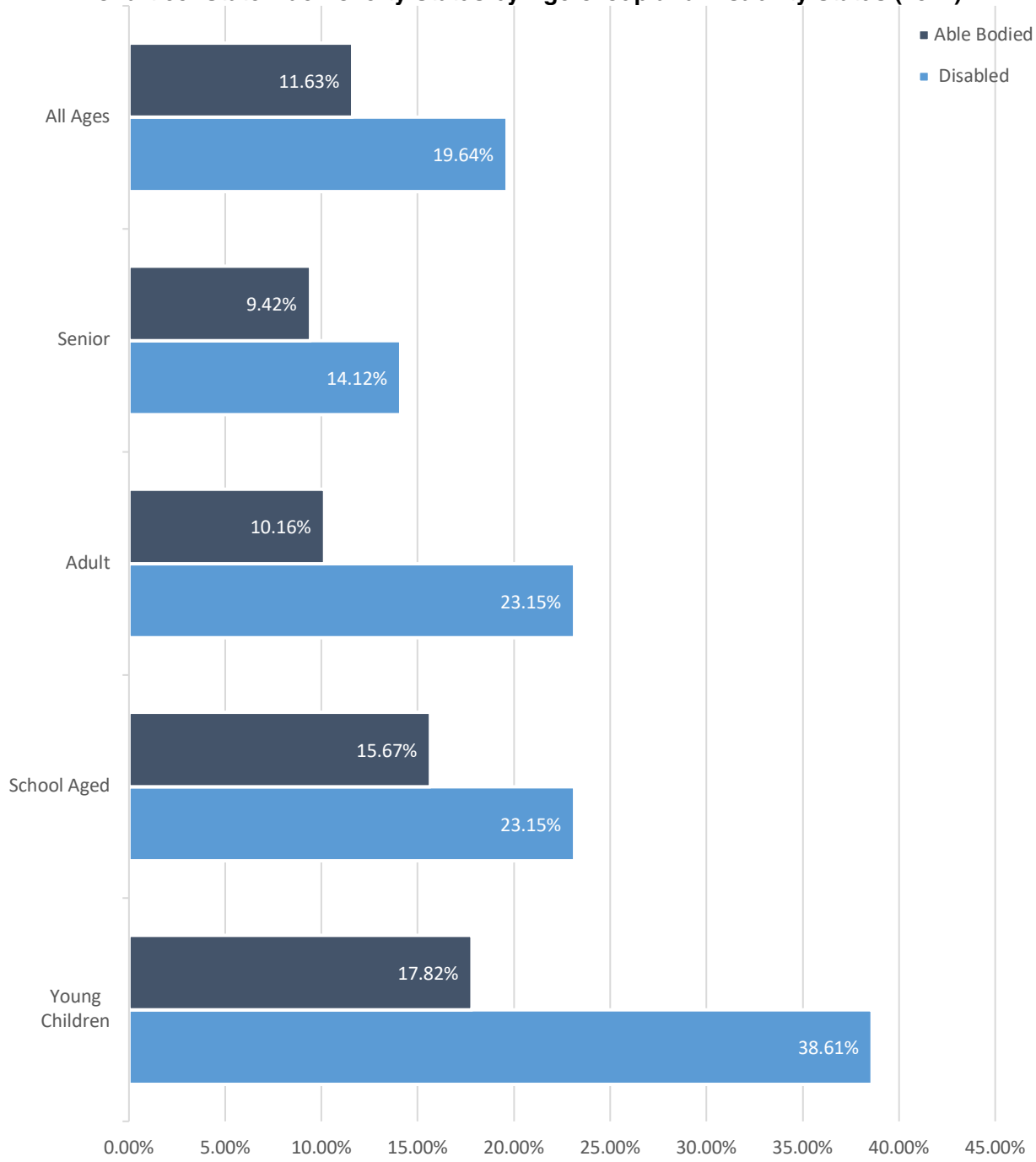
For children, disabilities can severely impact the financial stability of their households. Families with disabled children often face increased medical and caregiving costs, which can strain their finances. Furthermore, the need for specialized care might prevent an adult family member from maintaining full-time employment, thereby reducing the household's income. Additionally, disabled children may encounter educational challenges, potentially affecting their future economic opportunities. The census data indicates that 19,792 school-aged children and 814 young children are living with disabilities in the region, highlighting the need for supportive services to mitigate these challenges.

For seniors, disabilities typically lead to a decreased quality of life and increased medical expenses. The limitations imposed by disabilities can result in higher healthcare costs and the need for long-term care, which can be financially burdensome. In the region, 69,639 seniors are reported to have disabilities, further emphasizing the need for accessible healthcare and support services to manage their conditions effectively.

Newton County has the highest disability rate in the region, at 14.35%. This is followed by Rockdale County, with a rate of 12.36%, and DeKalb County, at 11.49%. The only county with a disability rate below the regional average is Gwinnett, at 7.89%. These variations highlight the differing levels of need for support services across the region. The higher rates in Newton and Rockdale counties suggest a significant portion of their populations may face greater challenges in accessing employment and educational opportunities and may also require more substantial healthcare and social services to improve their quality of life. In contrast, Gwinnett County's lower rate indicates comparatively fewer residents with disabilities, but it remains crucial to ensure adequate resources are available for those who are disabled.

Expanding on the provided data, it is evident that individuals with disabilities face a heightened risk of living in poverty compared to their able-bodied counterparts. Statewide, 19.64% of disabled individuals live in poverty, nearly double the rate of able-bodied individuals at 11.63%. This disparity is particularly pronounced among young children, where 38.61% of disabled children live in poverty compared to 17.82% of able-bodied children. Among adults, 23.15% of disabled individuals live in poverty, in contrast to 10.16% of able-bodied adults. Similarly, 14.12% of disabled seniors are in poverty compared to 9.42% of able-bodied seniors.

Chart 60: Statewide Poverty Status by Age Group and Disability Status (2022)

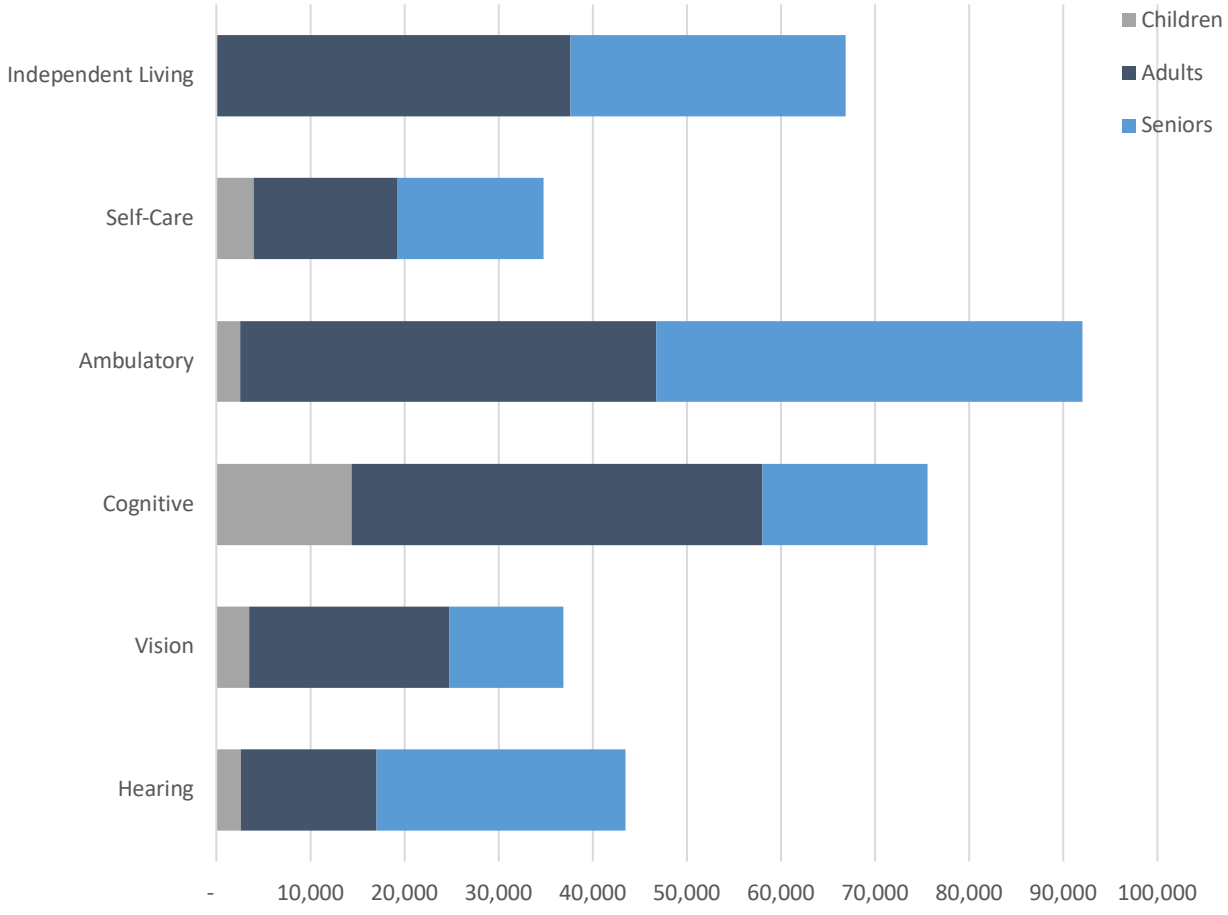


Source: US Census Bureau (B18130)

The correlation between disability and poverty underscores the compounded challenges faced by disabled individuals, including barriers to employment, higher healthcare costs, and limited access to support services. These factors contribute to the economic vulnerability of disabled residents, necessitating targeted interventions to improve their living conditions and reduce poverty rates. Addressing these disparities requires comprehensive policies that enhance access to healthcare, education, and employment opportunities for disabled individuals, while also providing robust social support systems to mitigate the financial burdens associated with disabilities.

The data presented offers a comprehensive view of the prevalence and impact of various types of disabilities within the community. Among the disabled population, the most common type of disability is ambulatory, affecting 48.53% of the total disabled population, or 92,030 individuals. This type of disability, which involves serious difficulty walking or climbing stairs, is particularly prevalent among seniors, with 45,270 affected individuals, followed closely by adults, with 44,223 individuals impacted.

Chart 61: Disability Counts by Type (2022)



	Hearing	Vision	Cognitive	Ambulatory	Self-Care	Independent Living
Children	2,636	3,503	14,377	2,537	3,972	-
Adults	14,365	21,253	43,640	44,223	15,292	37,615
Seniors	26,458	12,141	17,575	45,270	15,489	29,291

Source: US Census Bureau (S1810)

Cognitive disabilities, which include serious difficulty concentrating, remembering, or making decisions, are the second most common, affecting 39.86% of the disabled population. This translates to 75,592 individuals, with the highest number found among adults (43,640), followed by children (14,377) and seniors (17,575). These disabilities can significantly hinder daily functioning and employment opportunities, requiring tailored support and interventions.

Independent living difficulties affect 35.28% of the disabled population, equating to 66,906 individuals. This category includes serious difficulties doing errands alone such as visiting a doctor's office or shopping and is particularly challenging for adults and seniors. There are 37,615 adults and 29,291 seniors affected, highlighting the need for community and support services to assist these individuals in maintaining their independence.

Hearing impairments are reported by 22.92% of the disabled population, or 43,459 individuals. This type of disability is most common among seniors, with 26,458 individuals affected, followed by adults (14,365) and children (2,636). Hearing impairments can impact communication and social interaction, necessitating accessible resources and accommodations.

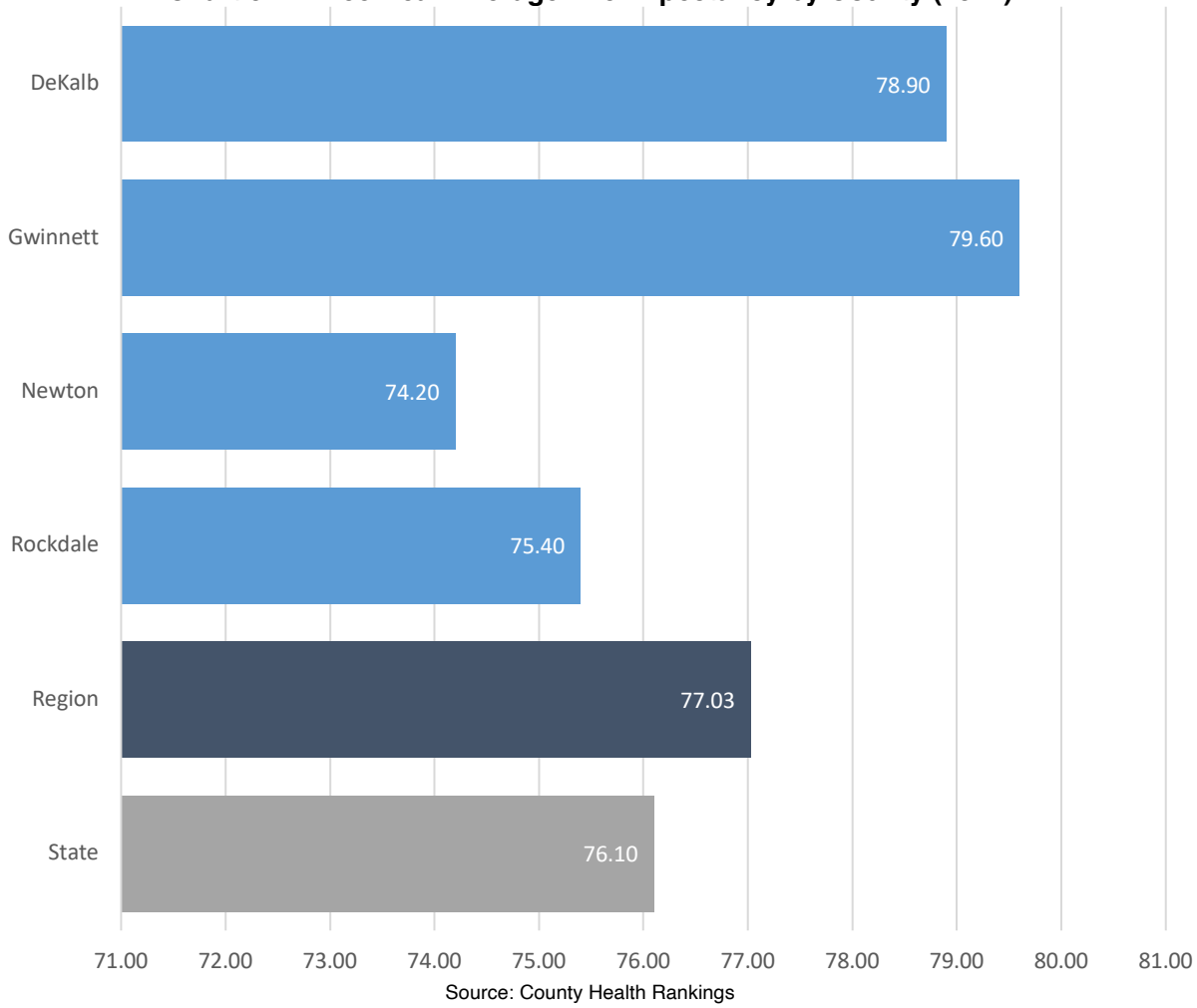
Vision impairments affect 19.46% of the disabled population, or 36,897 individuals, with the highest prevalence among adults (21,253), followed by children (3,503) and seniors (12,141). Vision impairments can limit mobility and access to information, underlining the importance of providing assistive technologies and services.

Self-care difficulties, which involve serious difficulties bathing or dressing, are reported by 18.33% of the disabled population, affecting 34,753 individuals. This type of disability is particularly common among seniors (15,489) and adults (15,292), indicating a need for personal care services and support to maintain personal hygiene and daily routines.

Life Expectancy

One significant consequence of poor health is a reduced life expectancy, as seen in the regional data. The average life expectancy in the region is 77.03 years, which is slightly higher than the state average of 76.10 years.

Chart 62: Three-Year Average Life Expectancy by County (2024)



Source: County Health Rankings

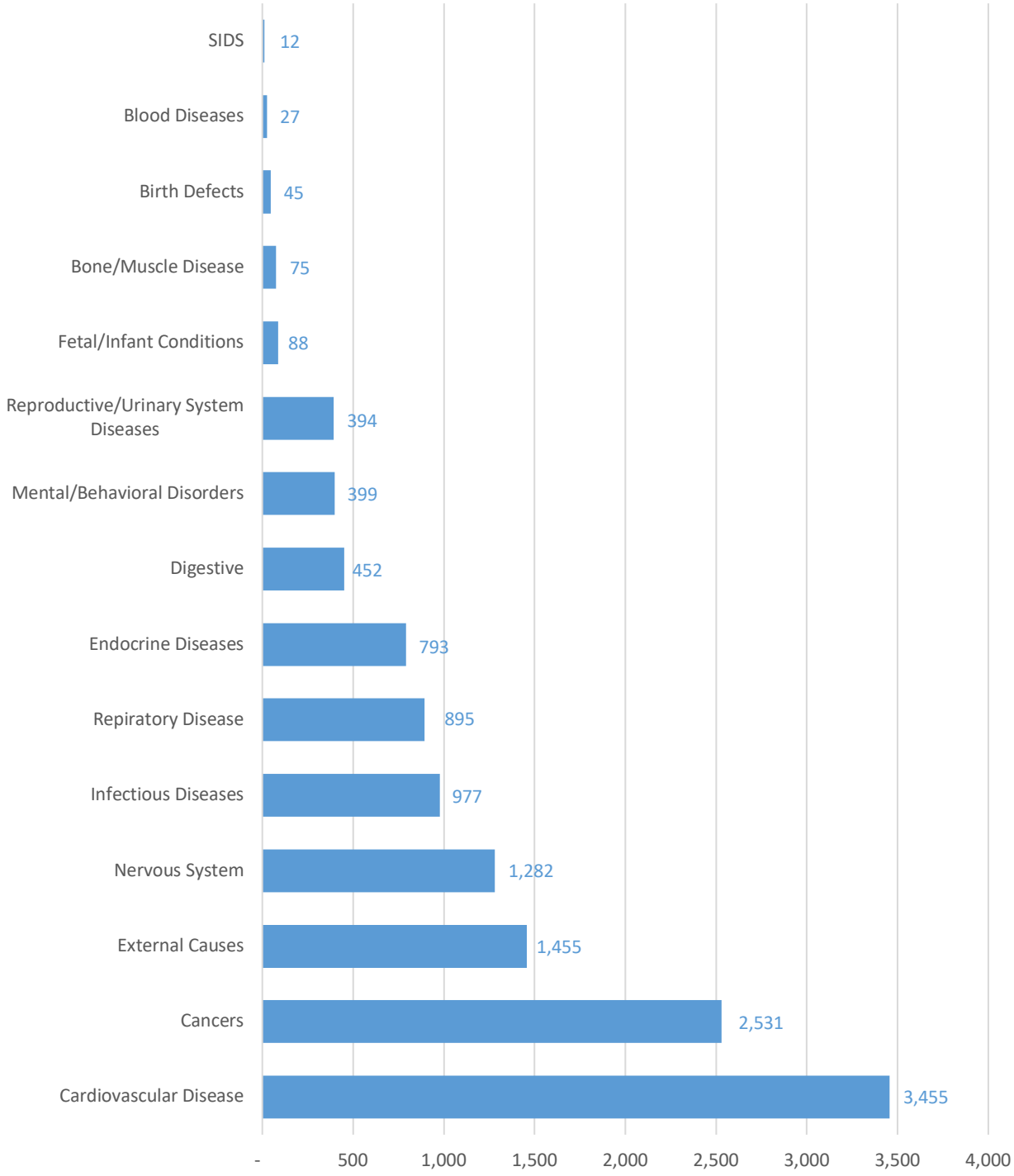
When examining the counties within the region, Gwinnett County has the highest life expectancy at 79.60 years, followed by DeKalb County at 78.90 years. Both of these counties exceed the state average and are above the regional average. Rockdale County has a life expectancy of 75.40 years, which is below the regional and state averages but still above Newton County, which has the lowest life expectancy in the region at 74.20 years. These discrepancies highlight the varying health outcomes across different areas, suggesting that localized health interventions may be necessary to address specific community needs.

The differences in life expectancy can be attributed to various factors, including access to healthcare, socioeconomic conditions, and lifestyle choices. For instance, counties with higher life expectancies like Gwinnett and DeKalb might have better healthcare infrastructure, higher income levels, and healthier lifestyle practices compared to counties with lower life expectancies such as Newton and Rockdale. Addressing these disparities requires a comprehensive approach that considers all determinants of health, from medical care to social and economic policies.

Causes of Death

In the analysis of mortality data within the region, it is evident that many of the leading causes of death are potentially avoidable with modifications in lifestyle and preventive health strategies." The number of deaths increased by 17.03% over the past few years, with the highest rates in 2020 (13,383) and 2021 (14,468), correlating with the COVID-19 Pandemic.

Chart 63: Leading Causes of Death (2022)



Source: Georgia Department of Public Health

In 2022, major cardiovascular diseases were the foremost cause of mortality, accounting for 3,455 deaths. This category, which includes a range of conditions related to the heart and circulatory system, is a significant public health concern. The high incidence of these diseases indicates a critical need for public health interventions aimed at prevention, early detection, and management.

- High blood pressure, or hypertension, stands out as a common yet serious condition that can lead to further cardiovascular issues if left unmanaged. As a silent disease, it often manifests with no symptoms but leads to detrimental effects on the heart and blood vessels over time, making regular monitoring essential for early intervention.

- Rheumatic fever and subsequent heart diseases, typically resulting from untreated streptococcal infections, can cause lasting damage to the heart valves. This is particularly concerning for children, as the long-term effects can severely impact their quality of life. These conditions necessitate the need for adequate treatment of initial infections and monitoring for potential heart complications.

- Hypertensive heart disease, which results from high blood pressure affecting the heart muscle, can progress to heart failure if not properly treated. This condition exemplifies the importance of managing blood pressure to prevent the heart from becoming weakened or enlarged.

- Obstructive heart diseases, including ischemic heart diseases and heart attacks, are caused by blockages that impede the blood supply to the heart muscle. These blockages are often due to a buildup of plaque in the arteries, which can be influenced by diet, lifestyle, and genetics. Interventions to reduce risk factors, such as cholesterol and obesity, are crucial.

- Stroke, characterized by the sudden loss of brain function due to a disturbance in blood supply, continues to be a leading cause of death and disability. The critical nature of stroke treatment underscores the need for rapid and accessible emergency care.

- Arteriosclerosis, the hardening of the arteries, can narrow the blood vessels and decrease blood flow, potentially leading to heart attacks and strokes. Lifestyle modifications and medications are pivotal in managing this condition.

- Aortic aneurysm and dissection involve the aorta, the body's main artery. These conditions can be immediately life-threatening, highlighting the importance of surveillance in individuals at risk.

- The broader category of other heart and circulatory system diseases includes a variety of conditions that affect the heart's functionality and the vascular system's integrity. These diseases collectively contribute to the high cardiovascular mortality rate and call for a wide-ranging approach to cardiovascular health that includes education, lifestyle modifications, and improved healthcare access.

The causes of heart disease are often a combination of genetic predisposition and modifiable lifestyle factors. High blood pressure, elevated cholesterol levels, obesity, diabetes, and tobacco use are significant risk factors. Lifestyle modifications such as adopting a heart-healthy diet rich in fruits, vegetables, and whole grains, engaging in regular physical activity, quitting smoking, and maintaining a healthy weight can play a crucial role in prevention. Additionally, medical interventions including medications to manage blood pressure and cholesterol, as well as measures to control blood sugar in diabetes, are critical in managing the risks associated with heart disease.

Cancer remained a major health challenge in 2022, with 2,531 deaths recorded across various types. The diversity of cancers reflects the complexity of the disease and the range of tissues and organs that can be affected.

- Lung cancer was the leading cause of cancer mortality, with 416 deaths. As a disease often associated with smoking, it serves as a stark reminder of the dangers of tobacco use and the benefits of smoking cessation programs.

- Colon cancer, the second leading cause of cancer death with 259 fatalities, arises from the large intestine's lining. The high incidence of colon cancer underscores the critical role of screening procedures like colonoscopies for early intervention.

- Breast cancer claimed 255 lives. As one of the most common cancers among women, it reinforces the value of regular mammograms and awareness of breast health.

- Pancreatic cancer, with 191 deaths, is known for its aggressive nature and poor prognosis, making research into early detection methods a high priority.

- Prostate cancer also accounted for 153 deaths, and while it is typically a slow-growing cancer, its prevalence among men makes it a significant area of focus for screenings like PSA tests.

- Liver cancer, resulting in 118 deaths, involves malignant tumors in the liver and is often related to chronic liver diseases, such as cirrhosis or hepatitis.

- Leukemia, with 79 deaths, involves the uncontrolled proliferation of white blood cells and is a focus of intense research into genetic and environmental risk factors.

- Brain cancer, resulting in 75 deaths, can have a devastating impact on function and highlights the need for advancements in neuro-oncology.

- Bladder cancer led to 62 deaths and is notable for its potential to recur, meaning that patients often require ongoing surveillance.

- Kidney cancer, with 62 deaths, occurs in the kidneys' cells, and ongoing research into its causes is crucial to develop better prevention strategies.

- Stomach cancer, with 62 deaths, is a malignant tumor in the stomach lining. Its treatment and prognosis often depend on the stage at which it is diagnosed, underscoring the need for attention to digestive health symptoms that may otherwise be overlooked.

- Throat cancer, responsible for 56 deaths, refers to malignant tumors in the esophagus. These cancers are particularly concerning due to their impact on essential functions like swallowing and are strongly linked to smoking and alcohol consumption.

- Ovarian cancer, resulting in 54 deaths, is particularly challenging to detect early, which is why ongoing research into symptoms and risk factors is essential.

- Oral cancers, with 45 deaths, involve abnormal tissue growth in the mouth, affecting areas like the pharynx and tongue. This type of cancer highlights the importance of early detection, often through dental visits, and is associated with risk factors like tobacco use and HPV infection.

- Skin cancer accounted for 24 deaths, with malignant melanoma being the most dangerous form. Public health efforts emphasize the importance of skin protection and regular skin examinations to catch any changes early.

- Cervical cancer, with 21 deaths, and uterine cancer, with 27 deaths, affect the female reproductive organs and are areas where regular gynecological screenings can have a significant impact on outcomes.

- Lymph cancer, including Hodgkin's disease, had 7 deaths. Despite being rare, it is a reminder of the critical nature of the lymphatic system and the body's immune response.

External causes were responsible for 1,455 deaths, drawing attention to the critical role of safety and preventative measures in public health.

- Motor Vehicle Crashes, including accidents involving pedestrians and bicyclists, were a significant external cause of death. Preventative strategies include promoting vehicle safety through design and technology, enforcing traffic laws, improving road conditions, and advocating for pedestrian and cyclist safety measures. Public campaigns focused on safe driving behaviors, such as avoiding distracted or impaired driving, are also crucial.

- Falls, particularly among the elderly, are a leading cause of accidental injury. Prevention can be achieved through community-based fall prevention programs, the design of safer environments, and education on personal safety practices, especially for older adults.

- Accidental Shootings, often involving the mishandling of firearms, highlight the importance of firearm safety education, secure gun storage practices, and the implementation of safety features on firearms themselves.

- Drowning deaths emphasize the need for water safety education, the presence of lifeguards, and the use of personal flotation devices. Programs that teach swimming and water survival skills are essential, especially for children.

- Fire & Smoke Exposure fatalities underscore the necessity of smoke detectors in homes, public education on fire safety practices, and the importance of fire-resistant materials in construction.

- Poisoning, which includes accidental poisoning by drugs and alcohol, calls for robust public education on the dangers of substances, proper medication storage and disposal, and the availability of treatment for substance misuse.

- Suffocation incidents can be mitigated through the use of proper safety equipment, regulations on food and toy sizes for children, and education on safe sleeping practices for infants.

- All Other Unintentional Injury categories cover a wide range of incidents, with prevention focusing on addressing the specific risks associated with each type of exposure.

- Suicide prevention requires a multifaceted approach, including access to mental health care, community support systems, and national hotlines. Efforts to control access to lethal means among individuals at risk are also part of comprehensive suicide prevention strategies.

- Homicide, often involving firearms, reflects broader societal issues that can be addressed through violence prevention programs, conflict resolution education, and community policing efforts.

- Legal Intervention-related deaths, although less common, point to the need for ongoing training and community engagement in law enforcement to minimize these occurrences.

Overall, the deaths from external causes represent a diverse array of preventable incidents. Effective prevention strategies often involve cross-sector collaboration, public policy, education, and community engagement to create environments where safety is prioritized, and risks are minimized.

Diseases of the nervous system were responsible for 1,282 deaths, reflecting the profound impact of neurological disorders on the community.

- Alzheimer's Disease was a prominent cause within this category, a severe neurological disorder that is characterized by progressive dementia and atrophy of the cerebral cortex. Alzheimer's leads to the gradual loss of cognitive functions, including memory and reasoning, and ultimately the ability to perform simple tasks. While there is currently no cure for Alzheimer's, prevention strategies focus on maintaining a healthy lifestyle, which may include engaging in physical and mental activities, eating a balanced diet, and managing cardiovascular health to possibly delay the onset of symptoms.

- Parkinson's Disease is another progressive neurological condition, marked by symptoms such as muscle tremor, slowed movement, facial paralysis, and changes in gait and posture. Although the exact cause of Parkinson's is unknown, risk reduction may be associated with regular exercise, a balanced diet rich in antioxidants, and potentially caffeine consumption, according to some studies. Research into the disease's pathophysiology is ongoing to better understand potential preventative measures and treatments.

- The category of All Other Diseases of the Nervous System includes various conditions, with a notable portion attributed to senile degeneration of the brain, which is not classified elsewhere. These conditions often involve the progressive loss of neuronal function or structure, leading to various degrees of disability. Preventative health measures for these diseases are complex and not fully understood but may include maintaining social connections, mental stimulation, and management of overall health to preserve neurological function.

The impact of nervous system diseases on individuals and families is significant, often requiring long-term care and support services. This underscores the importance of healthcare systems and community services that can provide comprehensive care and support for those affected by these debilitating conditions. Additionally, ongoing research into the causes, mechanisms, and potential preventive strategies for nervous system diseases remains a high priority in the medical and scientific community.

Infectious diseases were responsible for 977 deaths, underscoring their persistent threat to public health despite advances in medical science.

- Blood Poisoning, or Septicemia, accounted for a significant number of these fatalities. Septicemia occurs when a bacterial infection enters the bloodstream, leading to widespread inflammation, potentially rapid organ failure, and death. Prevention of septicemia involves rigorous infection control practices in hospitals and medical facilities, including proper sterilization of medical equipment, hand hygiene, and rapid treatment of infections before they become severe.

- HIV/AIDS continued to impact the population, although advancements in antiretroviral therapy have transformed it into a manageable chronic condition for many. Preventative measures for HIV/AIDS include safe sex practices, needle exchange programs, and the use of pre-exposure prophylaxis (PrEP) in high-risk populations. These strategies, coupled with public education about the virus and access to regular testing, remain the cornerstone of reducing the incidence of new infections.

- Tuberculosis (TB), particularly affecting the lungs, contributed to the death toll. TB is a highly communicable disease that requires long-term treatment with antibiotics. Prevention focuses on early detection through skin testing and treating latent infections before they become active, as well as improving ventilation in living spaces to reduce transmission.

- Meningitis, an inflammation of the membranes surrounding the brain and spinal cord, usually bacterial in origin, can lead to severe complications and death if not treated promptly. Vaccinations against meningitis are highly effective and are recommended for certain age groups and populations at risk.

- COVID-19, identified through laboratory testing, was a significant infectious disease cause of death. The prevention of COVID-19 is multifaceted, involving vaccinations, mask-wearing in high-risk settings, social distancing, and good hygiene practices. Timely testing and isolation of affected individuals are also key in controlling outbreaks.

The mortality associated with infectious diseases emphasizes the importance of sustained public health efforts in vaccination, education, and infrastructure to prevent and treat these diseases effectively. These measures not only save lives but also prevent the spread of infections, thereby protecting the health of the community at large.

Respiratory diseases accounted for 895 deaths, signifying their substantial impact on public health. The spectrum of conditions causing these deaths ranges from acute infections to chronic obstructive pulmonary disorders, each presenting its unique challenges in both treatment and prevention.

- Influenza, commonly known as the flu, contributed to these statistics and is marked by symptoms such as respiratory inflammation, fever, and muscle pain. The flu can often be prevented by annual vaccinations, which are critical in reducing the spread and severity of the disease. Public health campaigns that encourage vaccination can significantly mitigate the impact of seasonal flu outbreaks.

- Pneumonia was a leading cause of respiratory disease deaths. As an infection that inflames the air sacs in one or both lungs, it can be caused by a variety of pathogens, including viruses and bacteria. Vaccinations, especially for the elderly and other high-risk groups, along with prompt treatment of respiratory infections, are vital preventive measures.

- Bronchitis, particularly chronic bronchitis, is an inflammation of the lining of the bronchial tubes. Preventive strategies for bronchitis include avoiding smoking, reducing exposure to pollutants, and managing existing respiratory conditions with appropriate medical care.

- Emphysema, a type of chronic obstructive pulmonary disease (COPD), is characterized by damage to the air sacs in the lungs, leading to difficulty breathing. Smoking is the most significant risk factor for developing emphysema, and smoking cessation is the most effective preventive measure. Additionally, occupational safety measures can prevent exposure to industrial pollutants that may contribute to the condition.

- Asthma is a chronic condition that narrows and inflames the airways, causing wheezing, shortness of breath, and coughing. While not always preventable, the management of asthma includes avoiding triggers, such as allergens and irritants, and using prescribed medications to control symptoms and prevent attacks.

- The category of other chronic lower respiratory diseases, predominantly chronic obstructive pulmonary disease (COPD), reflects conditions where airflow is obstructed. Preventive lifestyle changes include smoking cessation, avoidance of secondhand smoke, maintaining good indoor air quality, and regular exercise to strengthen respiratory muscles.

Along with these prominent causes of death, several other categories contributed to the community's mortality rate to a lesser degree:

Endocrine Diseases: These include disorders like diabetes, thyroid conditions, and adrenal issues, which are often related to hormonal imbalances and can be managed with lifestyle changes and medication.

Digestive System Diseases: Fatalities here may involve conditions such as chronic liver diseases, including cirrhosis and hepatitis, or gastrointestinal diseases like pancreatitis or peptic ulcers, highlighting the need for dietary management and alcohol moderation.

Reproductive/Urinary System Diseases: These deaths could be due to chronic kidney disease or complications from reproductive health issues, underscoring the importance of regular health screenings.

Mental/Behavioral Disorders: Conditions such as severe depression, schizophrenia, or substance abuse disorders fall into this category, necessitating a focus on mental health services and support.

Bone/Muscle Diseases: Such diseases often include chronic conditions like osteoporosis or rheumatoid arthritis, which can lead to complications that increase the risk of mortality.

Fetal/Infant Conditions: Infant mortality can result from congenital anomalies, preterm birth, and low birth weight, among others, indicating a need for improved prenatal and postnatal care.

Birth Defects: These are structural abnormalities present at birth that can significantly impact an infant's survival and quality of life, pointing to the necessity of genetic screening and early interventions.

Blood Diseases: This category covers conditions like anemia or clotting disorders, which can sometimes lead to life-threatening complications.

SIDS: Sudden Infant Death Syndrome remains a cause for infant mortality, with research ongoing to understand and prevent these tragedies.

Each of these causes of death, while less prevalent than the leading categories, represents specific challenges and opportunities for public health intervention. By addressing each with tailored strategies, such as promoting health education, improving access to healthcare, and supporting medical research, the community can work towards reducing the overall mortality rate and enhancing the quality of life for its members.

Examining the data from 2018 to 2022, we see variations across different age groups. For infants under one year, the number of deaths fluctuated slightly, peaking at 191 in 2019 and decreasing to 153 by 2022. Children aged 1-4 years experienced a decrease in deaths from 30 in 2018 to 17 in 2020, followed by a return to 30 in 2022. This pattern suggests that while some progress may have been made in reducing child mortality, it remains inconsistent.

Table 56: Regional Deaths by Age Trend (2022)

Age Group	2018	2019	2020	2021	2022
<1 Year	157	191	129	125	153
1-4 Years	30	25	17	27	30
5-17 Years	59	78	57	89	91
18-24 Years	173	171	197	220	233
25-44 Years	742	754	956	1,215	1,092
45-64 Years	2,462	2,483	3,036	3,325	2,787
65-74 Years	2,287	2,354	2,808	3,065	2,710
75+ Years	5,061	5,000	6,183	6,402	6,127

Source: U.S. Census Bureau (DP02, S1810)

For school-aged children (5-17 years), the number of deaths increased significantly, from 59 in 2018 to 91 in 2022, indicating a concerning trend that might warrant further investigation into the underlying causes. Young adults aged 18-24 years also saw a rise in deaths, from 173 in 2018 to 233 in 2022, reflecting potential risks associated with this age group.

The most notable increase was observed among adults aged 25-44 years, where deaths rose from 742 in 2018 to a peak of 1,215 in 2021, before slightly decreasing to 1,092 in 2022. This trend may be influenced by a range of factors, including lifestyle-related health issues and the impact of the pandemic. For middle-aged adults (45-64 years), deaths increased from 2,462 in 2018 to 3,325 in 2021, before decreasing to 2,787 in 2022, again reflecting the pandemic's impact.

Elderly populations, particularly those aged 75 years and older, experienced a steady increase in deaths, from 5,061 in 2018 to 6,127 in 2022. This age group is most vulnerable to severe health conditions, including those exacerbated by COVID-19, which likely contributed to the rising mortality rates. The data underscores the need for targeted health interventions and preventive measures to address the specific health risks faced by different age groups in the region.

The consistent increase in deaths across most age groups highlights the critical importance of improving public health strategies, increasing access to healthcare, and promoting healthy lifestyles to mitigate preventable deaths and enhance the overall well-being of the population.

Behavioral Risks

Data indicates that many of the county's health concerns, including the causes of death, can be greatly impacted by behavioral change.

Table 57: Common Behavioral Risks (2024)

Area	Smoking	Excessive Drinking	Insufficient Sleep	Physically Inactive
DeKalb	*13%*	15%	40%	23%
Gwinnett	*13%*	14%	35%	23%
Newton	*18%*	16%	41%	28%
Rockdale	*17%*	14%	44%	28%
REGION	***15%***	**15%**	**40%**	**26%**
STATE	***16%***	**17%**	**36%**	**23%**
NATION	***15%***	**18%**	**33%**	**23%**

Source: County Health Rankings

One behavior that heightens the risk of poor health and premature death is the use of tobacco, alcohol, and other drugs. Although socially accepted, the most commonly abused substance in the county is tobacco. Throughout the service area, an estimated 195,472 adults (15.25%) smoke tobacco. According to the CDC, smoking can contribute to health conditions that impact a person's quality of life and is directly associated with many of the leading causes of death (Heart Disease, Stroke, Respiratory Disease, Diabetes, Cancer).

National statistics indicate that people with low incomes are more likely to smoke and generally smoke more heavily than individuals in higher income brackets. Unfortunately, due to the lack of access to healthcare, low-income individuals are also much less likely to receive a diagnosis of major health conditions until the late stages of the illness. This results in a higher cost of treatment which, in addition to the average cost of $2,160 per year (or $180 per month) to maintain the habit, can severely impact the household's economic security.

The cost of smoking itself is not the only contributing factor associated with poverty. Data indicates that smokers are 7.5% less likely to obtain a job within a year than non-smokers, even when other factors are eliminated, and earn an average of 6.8% less. Employers attribute this to the loss of productivity among smokers, resulting in an additional average annual cost of more than $3,000 per employee using the substance.

Moreover, smoking significantly increases healthcare costs for smokers due to the need for treatments related to smoking-induced health issues. These can include respiratory treatments, surgeries for lung cancer or COPD, and cardiovascular interventions like angioplasty or coronary artery bypass surgery. For individuals who smoke, higher insurance premiums are another financial strain, as health and life insurance providers often charge smokers up to 50% more for premiums due to the increased health risks associated with smoking.

Furthermore, the social and psychological costs associated with smoking can also impact an individual's quality of life and economic stability. Smoking is often associated with stress and mental health issues, which can create a vicious cycle of dependence and financial strain. Efforts to quit smoking can be hindered by a lack of resources and support, particularly among low-income populations. Smoking cessation programs, though effective, often require significant time and financial investment, which can be prohibitive for those already struggling economically.

An estimated 210,471 individuals, or 14.75% of the region's adult population, are estimated to regularly drink alcohol excessively. As alcohol consumption impacts problem solving skills, judgement, concentration, reaction times, and coordination, excessive use can cause and/or increase risks associated with physical, mental, economic, and social health.

While the cost of supporting an alcohol addiction can be a contributing factor to poverty on its own, studies indicate that employers are hesitant to hire excessive drinkers, as they are more likely to be involved in accidents, tend to be more aggressive, are more likely to be absent, and produce lower quality work at a lower quantity than those who do not consume alcohol. Those who do secure employment often find themselves in low-paying jobs.

Healthcare costs are also a concern for drinkers, as illness and injury are more likely to occur. Long-term risks include Heart Disease, Hypertension, Liver Disease, Cancer, multiple mental health issues, poisoning, violence, and vehicle accidents.

According to the National Institute of Health (NIH), drug use can have a wide range of health consequences. The impact of the drug, however, can differ drastically based on the specific substance that is used, the method of use, the dosage, existing health conditions, and other factors. Short-term impacts may include a loss of appetite, changes in sleep patterns, increased/decreased heart rate and blood pressure, mood changes, heart attack, stroke, psychosis, overdose, and death. Unfortunately, the user may experience one or more of these side effects after only a single use.

Extended exposure can lead to Heart Disease, Lung Disease, Cancer, HIV/AIDS, Hepatitis, multiple types of mental illness and, while addiction is not experienced by all users, it is a major risk associated with long-term use, which changes the way brain circuits work. This can interfere with how a person experiences normal pleasures in life, such as food and sex, their ability to control stress levels, basic decision making, their ability to learn and remember, etc. These changes make it much more difficult to stop using the substance, even when they are aware of the negative impact on their lives, and they want to quit.

Table 58: Self-Reported Substance Abuse Rates (2022)

Ages	Marijuana	Cocaine	Heroin	Meth	Opioid	Rx Pain Med
12-17	10.28%	0.13%	No Data	0.13%	1.78%	1.77%
18+	18.41%	1.61%	0.44%	0.88%	3.40%	3.15%

Source: Center for Behavioral Health Statistics and Quality

Marijuana emerges as the primary drug of choice across both age groups in Georgia, with 18.41% of adults and 8.83% of individuals aged 12-17 reporting use. Its prevalent use can have varied health effects, including potential impacts on cognitive development in adolescents, mental health issues such as anxiety and depression, and in some cases, it may affect lung health due to smoke inhalation. The use of marijuana often intersects with socioeconomic factors, with some evidence indicating higher usage rates in lower-income neighborhoods. Note that rate for teenagers has increased by 16.42% since the 2019 report.

Prescription drug misuse, particularly opioids, is the second most reported category for adults in Georgia at 3.78% and also significant for those 12-17 years at 1.60%. Misuse of these drugs can lead to addiction, overdose, and chronic health problems, including neurological and gastrointestinal issues. The opioid crisis has particularly affected impoverished areas where healthcare and addiction support services may be less accessible. Note that the rates have decreased by 16.67% among adults and increased by 10.63% since the 2019 report.

Cocaine use is reported by 1.77% of adults, reflecting its presence as a substance of abuse. Cocaine can lead to serious health issues, including heart attacks, stroke, and mental health disorders. Its use is often higher in urban settings and can be associated with both poverty and affluence, impacting a wide range of demographic groups. This is a decrease of 9.04% from the 2019 report.

Meth use, although less prevalent than marijuana and prescription drugs, is reported by 0.88% of adults. Methamphetamine is highly addictive and can cause severe dental decay, skin sores, and increased risk for infectious diseases. It's often associated with lower socioeconomic status due to its relatively low cost and high availability. Methamphetamine use is also linked to significant strain on healthcare resources, particularly in rural and underserved communities. Over the past three years, the rate has increased by 3.53%.

Heroin use in Georgia is the least reported among the substances listed for adults at 0.44%, an increase of 22.22% from the past three years. This substance carries a high risk of overdose and infectious diseases like HIV and hepatitis. Heroin use is often tied to prior prescription opioid misuse, reflecting the broader opioid epidemic. It can affect all socioeconomic groups; however, the impacts and recovery options might differ significantly, with some racial groups facing more barriers to accessing treatment than others.

Each of these substances has complex social determinants and a range of health implications. Addressing their use requires a multifaceted approach that includes public health interventions, accessible treatment programs, and policies that consider the socioeconomic and racial disparities related to substance use and healthcare.

When looking specifically at the impact of these substances in the workplace, Quest Diagnostics, the world's leading provider of diagnostic information services, recently reported that positive drug tests experienced a consistent rate of 4.6% for two consecutive years, matching the rate of 2021. The report details positivity rates across different workforce categories, with the general U.S. workforce showing a higher positivity rate (5.7% in 2022) compared to the federally mandated, safety-sensitive workforce (2.4% in 2022). The report also breaks down positivity rates by the reason for testing, indicating the highest rates in the 'for cause' category, especially in the general workforce (38.6% in 2022).

Marijuana continues to be the leading substance identified in urine drug tests, with a noticeable increase in positivity rates over recent years, now at 0.98% for safety-sensitive workers and 4.3% for the general workforce in 2022. Amphetamine and methamphetamine use also shows an increase, especially in the general U.S. workforce, with rates reaching 1.5% in 2022. Cocaine and oxycodone positivity rates remain relatively stable, with a slight increase or stabilization in the general workforce. The report underscores the ongoing challenges of addressing substance use within varied work environments.

A publication by Robert Kaestner at the National Bureau of Economic Research also explains that there is a connection between drug use and poverty. While drug use has negative impacts on physical and cognitive abilities, resulting in lower productivity, the greater connection is related to the determinants of poverty: education, human capital investments, marriage, and fertility. Interestingly, data also indicates that drug use is encouraged by reduced education levels, poor returns on human capital, and lack of meaningful relationships. Thus, areas with limited economic opportunity generally have higher usage rates and more affordable drugs.

A secondary behavioral concern in the region, contributing to the predominate obesity epidemic experienced by more than one-third (36.25%) of the adult population, is physical inactivity. County Health Rankings reports that 341,113 individuals (25.50%) report a lack of physical activity on a regular basis. The CDC reports that these individuals are at an increased risk of Heart Disease, Type 2 Diabetes, multiple cancers (endometrial, breast, and colon), Hypertension, high cholesterol, Stroke, Liver Disease, Gallbladder Disease, Sleep Apnea, Osteoarthritis, and gynecological problems (abnormal periods, infertility, etc.).

Ensuring children are physically active is extremely important to promote development of strong bones and muscles. The CDC also documents an association between physical activity in children and cognition (i.e., academic performance, and memory) performance. Some studies also indicate that regular exercise reduces the likelihood of depression.

The CDC reports that one-third of all U.S. adults are sleep deprived. Local statistics confirm the issue, finding that 40.00% of the region's citizens (548,128) are not receiving the amount of rest necessary for proper functioning of the body. Not only does a lack of sleep contribute to vehicle accidents and mistakes at work that lead to injury, but studies also indicate that there are direct links between sleep and conditions such as Type 2 Diabetes, Heart Disease, and depression.

Provider Access

Access to medical providers is a fundamental component of a robust healthcare system. Primary care physicians are often the frontline in healthcare, providing essential services such as routine check-ups, health-risk assessments, vaccination, screening tests, and counseling on maintaining a healthy lifestyle. They are also pivotal in managing chronic illnesses and coordinating care with specialists.

Table 59: Medical Providers to Population Ratio (2024)

Area	Physicians	Dentists	Mental Health Professionals
Dekalb	940:1	1,610:1	260:1
Gwinnett	1,520:1	1,530:1	680:1
Newton	4,270:1	4,900:1	980:1
Rockdale	1,430:1	1,320:1	520:1
REGION	**2,040:1**	**2,340:1**	**610:1**
STATE	**1,520:1**	**1,860:1**	**560:1**
BEST US	**1,330:1**	**1,360:1**	**320:1**

Source: County Health Rankings

In Georgia, the current ratio of 1,520 individuals per primary care physician suggests a challenge in meeting the healthcare demands of the population, particularly when compared to the national average of 1,330:1. This disparity may result in longer wait times for appointments, reduced time per patient visit, and potentially overwhelmed healthcare providers, which can all impact the quality of care received. In some states, benchmarks are established to ensure residents have better access to healthcare. For instance, Arizona mandates that its medical facilities maintain a provider-to-patient ratio of no more than 1,200:1.

When evaluating specific counties within the region, various disparities are evident. DeKalb County has the best physician ratio at 940:1, which is better than the state average and even the national best. Rockdale County also performs better than the state average with a ratio of 1,430:1. Gwinnet County has the same ratio as the state (1520:1) yet is slightly higher than the national average. In contrast, Newton County faces the most significant challenge with a ratio of 4,270:1, which is substantially higher than both the state and national averages, indicating a severe shortage of physicians.

Dental health is integral to overall health and well-being. Poor oral health can lead to a range of problems, including tooth decay, gum disease, and more severe conditions like heart disease and diabetes. Regular dental check-ups are essential for early detection and prevention of oral health issues, helping to maintain good health and prevent more severe conditions. For low-income residents, access to dental care is often limited due to financial constraints, lack of insurance, and fewer available providers in certain areas. This lack of access can result in untreated dental problems, which can lead to chronic pain, infections, and complications that affect overall health and quality of life.

The overall dentist-to-population ratio for the region stands at 2,340:1, which is higher than the state average of 1,860:1 and the best U.S. ratio of 1,360:1. This regional figure indicates a general shortage of dental care providers, necessitating targeted efforts to improve access.

DeKalb County has the most favorable dentist-to-population ratio at 1,610:1. This is better than the state average but still falls short of the best U.S. ratio, indicating there is room for improvement. Gwinnett County follows with a ratio of 1,530:1, which aligns with the state average but highlights a need for additional dental care providers to meet the population's needs. Newton County faces significant challenges with a ratio of 4,900:1, showing a severe shortage of dental care providers. This ratio is considerably higher than both the state and national averages, underscoring the urgent need for interventions to increase dental care accessibility in this county. Rockdale County performs relatively well with a ratio of 1,320:1, surpassing both state and national benchmarks, indicating stronger access to dental care in this area.

The availability of mental health professionals is a barometer of a region's capacity to address the psychological well-being of its population. Mental health services are vital for the diagnosis, treatment, and management of mental disorders and for providing support to those experiencing acute or chronic stress, anxiety, depression, and other mental health issues. Deficits in mental health services can have profound implications for community health. It limits access to care, increases wait times for services, and can leave many without the support they need, potentially leading to worsening mental health conditions and a greater likelihood of crises.

Evaluating the mental health professional ratio, it is clear that significant disparities exist across different counties within the region. The regional average ratio of 610:1 indicates a deficit when compared to the best U.S. practice of 320:1 and even the state average of 560:1. Within the region, DeKalb County stands out with the most favorable ratio at 260:1, which is significantly better than both the state and national averages, suggesting better access to mental health services in this county. Gwinnett County has a ratio of 680:1, indicating a need for more mental health professionals, as it exceeds both the state and regional averages. Newton County faces the most severe shortage with a ratio of 980:1, nearly three times worse than the best U.S. practice and significantly higher than the state and regional averages. Rockdale County has a ratio of 520:1, which, while better than the regional average, still indicates a need for improved access.

There are 142 health centers located throughout the region, with an estimated 1,616 hospital beds.

DeKalb County Medical Facilities

Facility Name	Category	Sub-Category	Hospital Beds
A.G. Rhodes Home Wesley Woods	Skilled Nursing Facilities/Nursing Facility (Distinct Part)	Title 18/19	N/A
BMA Dekalb Gwinnett	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
BMA Of Tucker	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Briarwood Health Center by Harborview	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Budd Terrace At Wesley Woods	Skilled Nursing Facility	Title 18 Only	N/A
CC&D Services	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Chapel Woods Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Children's Healthcare of Atlanta	Hospital	Transplant Hospitals	319
Children's Healthcare of Atlanta at Egleston	Hospital	Transplant Hospitals	330
Clifton Office- Southside Medical Center Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
CPACS At Dekalb	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Decatur Center For Nursing and Healing LLC	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Decatur Dialysis Center	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Dialysis Of Lithonia	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
East Dekalb Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
East Lake Arbor	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Eastlake Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Emory Dialysis at Candler	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Emory Dialysis at North Decatur	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Emory Long Term Acute Care	Hospital	Long Term	56
Emory Rehabilitation Hospital	Hospital	Rehabilitation	56
Emory University Hospital (Decatur)	Hospital	Transplant Hospitals	405
Emory University Hospital (Hillandale)	Hospital	Short Term	90
FMC Dialysis Services of Decatur	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
FMC Dialysis Services Snapfinger	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
FMCNA South Dekalb/Rockdale	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Fountainview Ctr For Alzheimer	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Fresenius Kidney Care Candler Road	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Fresenius Medical Care Stone Mountain	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Fresenius Medical Care Stonecrest	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Georgia Dialysis for Adolescents and Pediatrics	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Georgia Regional Atlanta LTC	Nursing Facility	Title 19 Only	N/A
Georgia Regional Hospital Atlanta	Hospital	Psychiatric	114
Glenwood Health Center by Harborview	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Gresham Office-Southside Medical Center Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
McAfee Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A

Medcura Health, Inc (44406)	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Medcura Health, Inc (44407)	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Medcura Health, Inc (44408)	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Medcura Health, Inc. (44409)	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Mercy At Chamblee	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Meridian Education Resource Group Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Meridian Education Resource Group, Inc.	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Mountain Park Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Northlake Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Oakhurst Medical Center Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Oakhurst Medical Center, Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Oakhurst Medical Centers, Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Oakhurst Medical Centers, Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Oakhurst Medical Centers, Inc.	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Oakhurst Medical Centers, Inc.	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Panola Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Peachford Behavioral Health System of Atlanta	Hospital	Psychiatric	246
Pruitthealth - Brookhaven	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Pruitthealth – Decatur	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Pruitthealth - Virginia Park	Skilled Nursing Facilities/Nursing Facility (Distinct Part)	Title 18/19	N/A
Recovery Consultants of Atlanta, Inc.	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Renal Care Group Lithonia	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Rockbridge Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Rosemont At Stone Mountain	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Sandy Springs Center for Nursing and Healing LLC	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Snapfinger Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Traditions Health and Rehabilitation	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Tucker Operating Company LLC	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Turner Hill Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Us Renal Care Dekalb Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Veritas Dialysis, Inc	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Whitefoord, Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
TOTAL			**1,616**

Gwinnett County Medical Facilities

Facility Name	Category	Sub-Category	Hospital Beds
BMA Of Snellville	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Buford Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Cambridge Post-Acute Care Center	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Center For Pan Asian Community Services, Inc.	Federally Qualified Health Center	Federally Qualified Health Center	N/A
CPACS Cosmo Dental	Federally Qualified Health Center	Federally Qualified Health Center	N/A
D Scott Hudgens Center for Skilled Nursing, The	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Delmar Gardens of Gwinnett	Skilled Nursing Facilities/Nursing Facility (Distinct Part)	Title 18/19	N/A
Dialysis Care Center Gwinnett, LLC	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Duluth Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Duluth Dialysis Center	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Emory Rehabilitation Outpatient Center- Norcross	Outpatient Physical Therapy/Speech Pathology	Opt Or Speech Pathology	N/A
Fmcna Duluth/Lawrenceville	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Four Corners Primary Care Centers	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Four Corners Primary Care Centers at Vph	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Fresenius Kidney Care Central Lawrenceville	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Fresenius Kidney Care Dacula	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Fresenius Kidney Care Lilburn	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Fresenius Medical Care Berkeley Lake	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Fresenius Medical Care Gwinnett Home	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Gwinnett Dialysis Center	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Home Dialysis Services Norcross, LLC	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Legacy Healthcare Services, Inc	Outpatient Physical Therapy/Speech Pathology	Opt Or Speech Pathology	N/A
Life Care Center of Gwinnett	Skilled Nursing Facilities/Nursing Facility (Distinct Part)	Title 18/19	N/A
Life Care Ctr of Lawrenceville	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
LifeLink of Georgia	Organ Procurement Organization	Organ Procurement	N/A
Lilburn Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
MedLink Georgia Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Mesun Health And Rehabilitation Center	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Nephron-Norcross Dialysis Center	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
North Gwinnett Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Northside Hospital Duluth	Hospital	Short Term	101
Northside Hospital Gwinnett	Hospital	Short Term	493
Parkside Post-Acute and Rehabilitation	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Patriot Mobile Imaging	Portable X-Rays Supplier	X-Ray	N/A
Pcti, Inc	Portable X-Rays Supplier	X-Ray	N/A
Pebblebrook Health Center at Park Springs	Skilled Nursing Facility	Title 18 Only	N/A
Physiotherapy Associates	Outpatient Physical Therapy/Speech Pathology	Opt Or Speech Pathology	N/A
Piedmont Eastside Medical Center	Hospital	Short Term	287

Potter House Family & Children Treatment Ctr	Community Mental Health Center	Community Mental Health Center	N/A
PRI X Ray LLC	Portable X-Rays Supplier	X-Ray	N/A
Pruitthealth – Lanier	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Pruitthealth – Lilburn	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Salude - The Art Of Recovery	Skilled Nursing Facility	Title 18 Only	N/A
Snellville Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Snellville Dialysis Center	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Sos Laurel Grove	Outpatient Physical Therapy/Speech Pathology	Opt Or Speech Pathology	N/A
South Atlanta Office-Southside Medical Center Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Southside Medical Center Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Southside Medical Center, Inc	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Southside Medical Center-Norcross Clinic	Federally Qualified Health Center	Federally Qualified Health Center	N/A
Sugar Hill Dialysis Center	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Sugarloaf Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Summitridge Center- Psychiatry & Addictive Med	Hospital	Psychiatric	96
Tribble Mill Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Us Renal Care Snellville Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
TOTAL			**977**

Newton County Medical Facilities

Facility Name	Category	Sub-Category	Hospital Beds
FMCNA Newton	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
NCG Piedmont Dialysis Center, LLC	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Newton County Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
Piedmont Newton Hospital	Hospital	Short Term	94
Pruitthealth - Covington	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
Riverside Health Care Center	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	N/A
US Renal Care Covington Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	N/A
TOTAL			**94**

Rockdale County Medical Facilities

Facility Name	Category	Sub-Category	Hospital Beds
Atlanta Quality Care Solutions, LLC	Community Mental Health Center	Community Mental Health Center	
Conyers Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	
Covington Mill Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	
Cowan Lake Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	
Emory Rehabilitation Outpatient Center- Conyers	Outpatient Physical Therapy/Speech Pathology	Opt Or Speech Pathology	
FMCNA Conyers	End Stage Renal Disease Facility	End Stage Renal Disease	
Fresenius Medical Care Honey Creek	End Stage Renal Disease Facility	End Stage Renal Disease	
Oakhurst Medical Centers, Inc	Federally Qualified Health Center	Federally Qualified Health Center	

Piedmont Rockdale Hospital	Hospital	Short Term	141
Rockdale Healthcare Center	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	
Therapeutic Solutions, Inc.	Outpatient Physical Therapy/Speech Pathology	Opt Or Speech Pathology	
US Renal Care Conyers Dialysis	End Stage Renal Disease Facility	End Stage Renal Disease	
Westbury Center Of Conyers for Nursing and Healing	Skilled Nursing Facilities/Nursing Facility (Dually Certified)	Title 18/19	
TOTAL			**141**

Ambulatory Surgical Center:
These are modern health care facilities focused on providing same-day surgical care, including diagnostic and preventive procedures that do not require an overnight hospital stay.

End Stage Renal Disease Facility:
This type of facility provides life-sustaining dialysis treatment to patients suffering from severe kidney failure, also known as end-stage renal disease.

Federally Qualified Health Center:
These are community-based healthcare providers that receive funds from the HRSA Health Center Program to provide primary care services in underserved areas. They offer sliding fee scales for individuals with limited financial means.

Home Health Agency:
Organizations under this category provide in-home medical services for individuals recovering from an illness or injury, or those needing special medical care at home.

Hospice:
A service that provides palliative care for the terminally ill and support to their families, focusing on quality of life rather than curative treatment.

Hospital:
A complex healthcare institution that provides patient treatment with specialized medical and nursing staff and medical equipment.

Intermediate Care Facility:
This facility caters to individuals who require a level of care between hospital acute care and lower levels of residential care, often for individuals with developmental disabilities.

Outpatient Physical Therapy/Speech Pathology:
These centers offer therapeutic and rehabilitation services for individuals recovering from physical injuries or dealing with speech and language disorders.

Rural Health Clinic:
A clinic located in a rural, medically underserved area that provides primary care services; it may also offer additional services such as on-site lab and x-ray services.

Skilled Nursing Facilities/Nursing Facility:
Facilities that provide a high level of medical care provided by licensed nurses, including both short-term rehabilitative services and long-term care for chronic conditions or disabilities.

Insurance Coverage

Health insurance coverage is an essential determinant of healthcare access, influencing both the affordability and the timeliness of care received. As of 2022, the uninsured rate in the region stood at 14.13%, an improvement of 2.08% from the 14.43% documented in 2018.

Table 60: Uninsured Population (2018/2022)

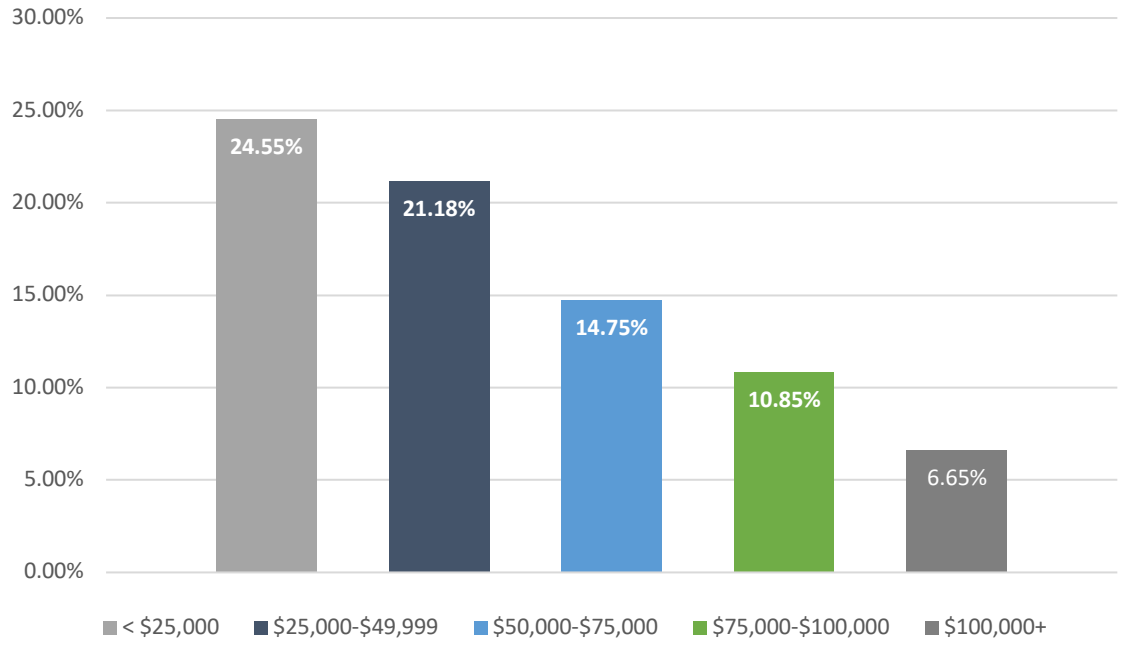
Area	2018 Count	2018 Rate	2022 Count	2022 Rate	Rate +/-
DeKalb	109,283	14.80%	100,082	13.20%	-10.81%
Gwinnett	152,773	17.00%	142,300	14.90%	-12.35%
Newton	12,962	12.30%	15,320	13.60%	+10.57%
Rockdale	12,015	13.60%	13,731	14.80%	+8.82%
REGION	**287,033**	**14.43%**	**271,433**	**14.13%**	**-2.08%**
STATE	**1,389,541**	**13.70%**	**1,361,380**	**14.80%**	**+8.03%**
NATION	**29,752,767**	**9.36%**	**28,315,092**	**10.50%**	**+12.18%**

Source: U.S. Census Bureau (S2703)

The highest rate in the region was identified in Gwinnett County (14.90%). This was followed by Rockdale (14.80%), Newton (13.60%), and DeKalb (13.20%).

The uninsured rates by income level present a telling gradient that underscores the correlation between economic status and health insurance coverage. Individuals earning less than $25,000 a year exhibit the highest uninsured rate at 24.55%, which is significantly higher than any other income bracket. This high percentage points to the affordability barrier that low-income individuals face in securing health insurance, which is a fundamental component of accessing healthcare services.

Chart 64: Uninsured Rates by Income Level (2022)



Source: U.S. Census Bureau (S2701)

As income levels increase, there is a notable decline in the uninsured rate, with those earning between $25,000 and $49,999 showing a rate of 21.18%, a reduction of 13.73%. The trend continues downward for middle-income earners in the $50,000 to $75,000 range, who have an uninsured rate of 14.75%, or 30.36% lower than the previous category.

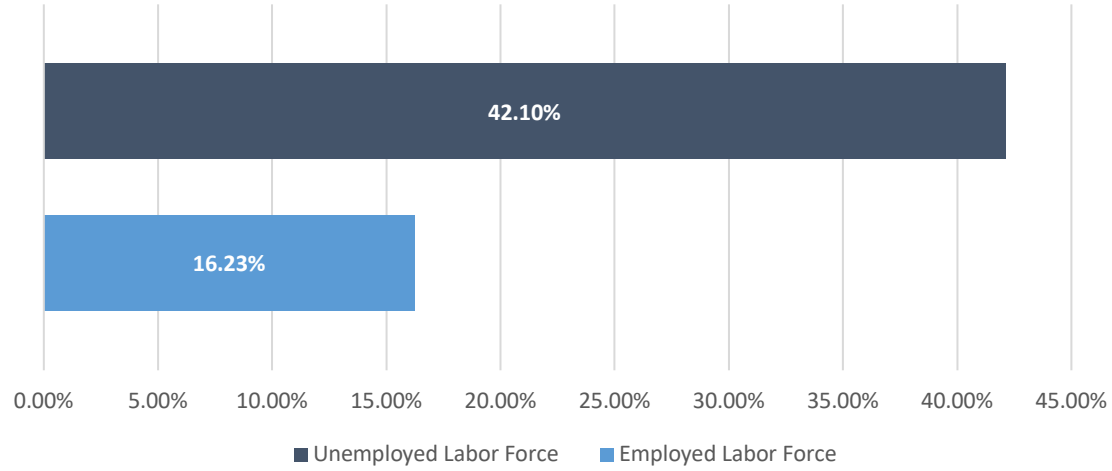
For residents with incomes between $75,000 and $100,000, the rate (10.85%) is 26.44% lower than for those in the previous category and 55.80% lower than for individuals with incomes below $25,000.

The lowest uninsured rate is found among those earning over $100,000, at 6.65%, an improvement of 38.71% from the $75,000 to $100,000 category and 72.91% lower than for those with incomes under $25,000.

This data suggests that economic factors play a crucial role in health insurance coverage, with lower-income individuals facing greater challenges in obtaining coverage. These challenges may result in increased risks of health complications due to delayed or missed healthcare services. The data underscores the need for policies that address the insurance coverage gap, particularly for lower-income populations, to ensure equitable access to healthcare services and improve overall public health outcomes.

Employment status was identified as a contributing factor associated with the lack of insurance. While the 16.23% uninsured rate for employed individuals was noted as being somewhat high, the rate for unemployed members of the labor force was 42.10%. This indicates that individuals who are unemployed are more than twice as likely to be uninsured than those who are working.

Chart 65: Uninsured Rates by Employment Status (2022)



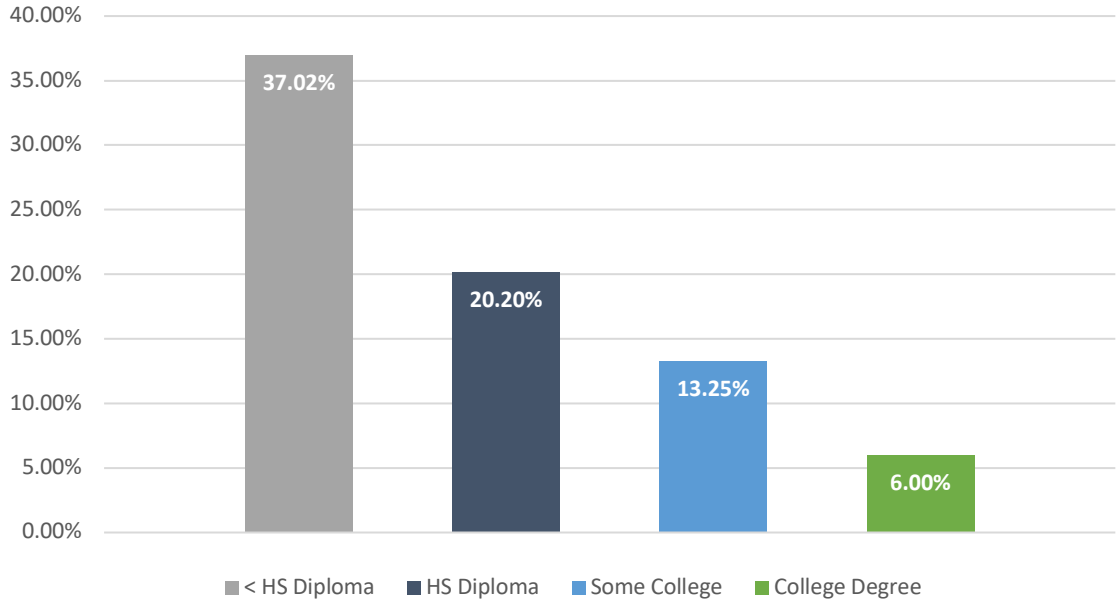
Source: U.S. Census Bureau (S2701)

Unemployment often results in the loss of employer-sponsored health insurance and the lack of financial means to afford private insurance or out-of-pocket medical costs. Even with programs like COBRA or the Affordable Care Act marketplaces intended to help bridge this gap, the cost can be prohibitive without an income.

The significantly higher uninsured rate among the unemployed labor force is concerning because it suggests that individuals who are already facing the economic hardship of unemployment are also the most vulnerable to the health and financial risks associated with being uninsured. This situation may lead to a cycle of health disparities where the unemployed, who may need medical care the most due to stress and other factors associated with job loss, are the least able to access it.

Data suggests that adult education levels are also, to some degree, associated with insurance coverage. Those with less than a high school diploma have the highest uninsured rate at 37.02%, which suggests that a lack of formal education may correlate with reduced access to jobs that offer health insurance or the financial resources to afford private insurance.

Chart 66: Uninsured Rates by Education Level (2022)



Source: U.S. Census Bureau (S2701)

Individuals who have completed high school experience a decrease in the uninsured rate to 20.20%. A further reduction is observed among those with some college education, dropping to 13.25%. This trend continues, showing that as educational levels increase, the likelihood of being uninsured decreases, culminating in the lowest uninsured rate of 6.00% among those with a college degree. This suggests that higher education is associated with better employment opportunities, potentially offering employer-sponsored health insurance or higher incomes that make health insurance more affordable.

In the region, children under 6 years have an uninsured rate of 6.38%, which is higher than the national average of 4.20%, indicating a more concerning condition in the region for this age group than on a national level. The rate for school-aged children is higher than for young children, at 9.13%. It should be noted that this is also higher than the national average for this age group at 5.70%. Overall, there were 9,703 young children and 33,975 school-aged children identified in the region served by the organization.

Table 61: Uninsured Rates by Age Group and Disability Status (2022)

Area	<6 Years	6-18 Years	19-64 Years	65+ Years	Disabled
REGION	**6.38%**	**9.13%**	**19.65%**	**1.25%**	**8.70%**
STATE	6.10%	8.00%	19.30%	0.90%	10.20%
NATION	4.20%	5.70%	13.20%	0.80%	5.90%

Source: U.S. Census Bureau (S2701)

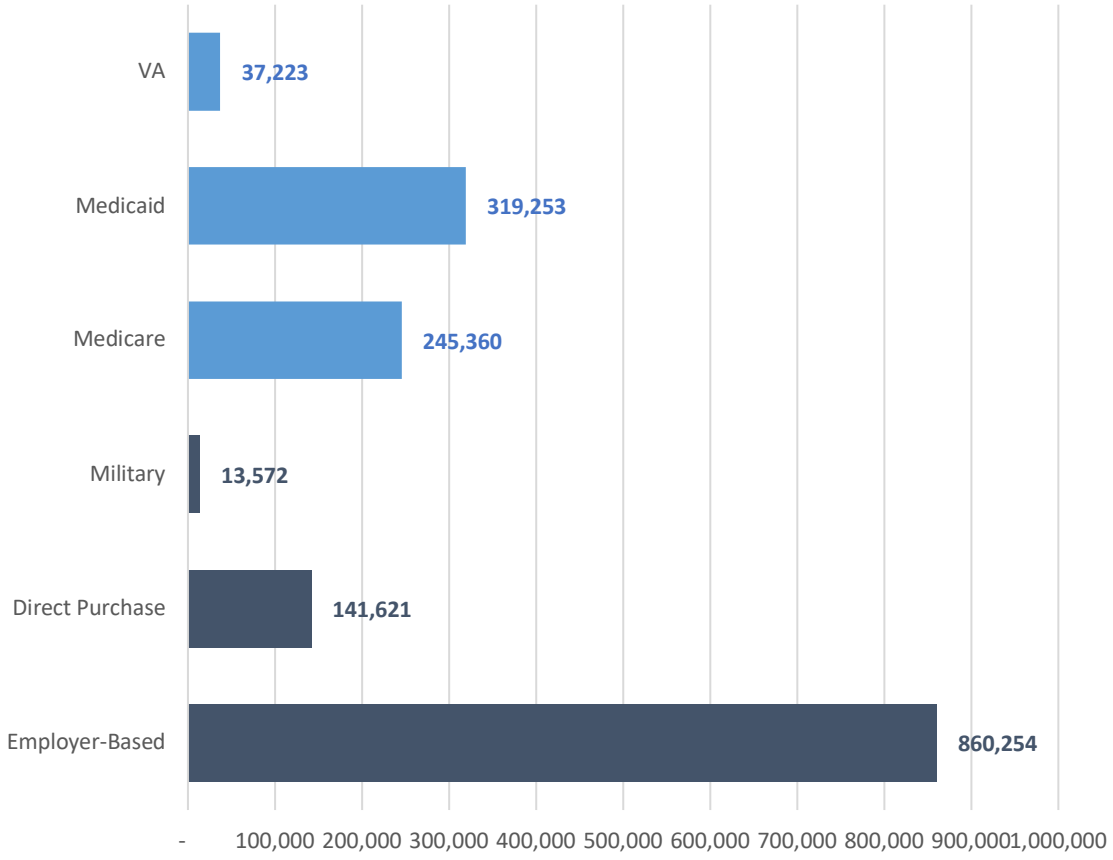
For the working-age group of 19-64 years, the region's uninsured rate jumps to 19.65%, which is not only higher than the national average of 13.20% but indicates that nearly one-in-five adults lack insurance in the region. This is representative of 224,088 individuals.

Senior citizens experienced a relatively low rate of 1.25%, representing 3,667 local residents. It should be noted that this rate is higher than both the state (0.90) and national (0.80%) averages.

Finally, the disabled population in the region faces an uninsured rate of 8.70%, higher than the national average of 5.90%. This indicates that despite programs designed to assist individuals with disabilities, there remains a gap in coverage that needs to be addressed to ensure they have access to the necessary medical care. This rate represents a total of 18,435 individuals who, despite a potentially higher demand for medical care, may be limited in their ability to access it.

In the local region, public health insurance programs cover a significant portion of the insured individuals, with 539,869 people receiving benefits. These programs cater to various segments of the population based on eligibility criteria, which often include income levels, age, and specific needs such as disabilities or veteran status. Among recipients, 31.61% were noted as being below the poverty threshold of 138%.

Chart 67: Population Receiving Insurance by Type (2022)



Source: U.S. Census Bureau (S2701, S2703)

Medicare, a federal program, provides healthcare coverage primarily to individuals aged 65 and over, with 245,360 local beneficiaries. It also extends to younger people with disabilities and certain conditions. In the local region, 3,190 individuals under 19, an estimated 29,231 aged 19 to 64, and 212,939 seniors are covered under Medicare.

Medicaid and other means-tested public coverage support those in financial need across all age groups, with the largest segment being under 19, including 319,253 individuals locally. This program supports 197,530 children, 89,648 adults, and 32,075 seniors in the region.

VA health care coverage, designed for military veterans, covers 37,223 individuals, including veterans across different age groups, with 549 children, 23,728 adults, and 12,946 seniors.

Private health insurance is a form of health coverage provided through various plans, often organized by employers or purchased directly by individuals. In 2022, within the local region, private insurance covered 1,264,502 individuals.

Employer-based health insurance is the most common form of private insurance, covering 860,254 individuals locally, extending across all age groups, offering benefits through workplaces. Direct-purchase insurance, chosen by individuals in the market, covered 141,621 people, while Tricare, for military personnel and their families, served 13,572 individuals.

The majority (86.51%) of those with private health insurance were above the 138% poverty threshold, signifying a correlation between higher income levels and private insurance coverage. Employer-based plans were particularly prevalent among full-time, year-round workers aged 19 to 64. Private insurance alone, without public coverage, was the norm for 1,061,625 local residents.

Understanding these insurance sources is vital as they reflect the community's economic diversity and access to healthcare services. Each source has distinct eligibility requirements, coverage benefits, and limitations, shaping the healthcare landscape of the region.

Community Feedback

Poor physical health is a significant concern in the community, identified by 108 respondents as a critical resident need. Among the low-income residents polled, 111 reported experiencing poor physical health, with 75 of them unable to get help in their time of need. This situation severely impacts their ability to work and maintain a stable life. One resident noted, "You may have medical insurance, but the cost is so high… many times you don't get medical help because of the cost."

Poor mental health is another pressing issue, identified by 147 respondents as a critical need. Among the low-income residents polled, 282 reported experiencing poor mental health, with 201 unable to get help when needed. One resident shared, "Mental illness is rising, and people are not getting the help they need because of the high costs and insufficient services." Another stated, "Mental health is very important, especially in this day and time. If you're not in your right mind, how can you make good choices? Even simple tasks can seem more difficult." These statements highlight the pervasive nature of mental health issues and the inadequate support systems available.

Poor health, both physical and mental, significantly impacts the ability of residents to secure basic needs. Among the surveyed low-income residents, 393 reported that poor health prevented them from accessing other needs, with 276 unable to get help. One resident emphasized, "People are not focusing on their mental and physical health because they are in survival mode." Another stated, "I can't work outside of my home because my physical health is poor."

Addictions are another barrier, noted by 41 respondents as impacting their ability to secure basic needs. Among those surveyed, 10 residents struggled with addictions, with 7 unable to find help. One respondent highlighted the community's drug issues, stating, "People in poor neighborhoods have drug issues." The challenge of overcoming addictions without adequate support further exacerbates the difficulties faced by these individuals. Leading addictions impacting economic security were identified as drugs (39), alcohol (32), gambling (19), tobacco (11), internet/video games (10), food (7), work (5), shopping (5), pornography (4), and sex (1).

Inadequate access to health services is a significant barrier, identified by 39 respondents. Specific barriers contributing to inadequate health access include a lack of insurance (30), insurance plans that don't meet needs (23), high medical costs (17), insufficient mental health services (16), long wait times for appointments (11), cultural or language barriers (9), lack of specialized care (8), shortage of providers (7), inaccessibility for disabled residents (7), and discrimination (1). One resident shared, "The mental health system is broken. We have subpar health services. Sometimes 911 takes hours, if they show up at all." Another noted, "Mental health services are also inadequate for all of Gwinnett County. Viewpoint Health only takes people without coverage or Medicaid only, not Medicare." These comments underscore the systemic issues in healthcare accessibility and the urgent need for comprehensive solutions.

Agency Data

In 2022, the organization served 196 individuals who were disabled. These individuals were predominantly non-Hispanic (98.47%), Black (90.82%), and female (69.90%) with a median age of 43.08 years. Employment among disabled individuals was notably low, with only 4 working full-time and 8 working part-time. The average household income for disabled individuals was $14,493.26, highlighting significant economic challenges within this group.

Additionally, the organization served 554 customers who had no insurance in 2022. Among those with insurance, 20 had direct pay insurance, 179 had employer-based insurance, 207 were covered by Medicaid, 100 had Medicare, 295 had state insurance, and 16 were covered by veteran insurance. An additional 35 individuals received an unspecified type of insurance.

2024 COMMUNITY ASSESSMENT

Health Resources

Resource Name	Contact Information	Description
Chris Kids, Inc	404-564-3458	Helps to strengthen individuals and families by increasing the ability to manage life stressors and mental health concerns, build coping skills, improve communication, and enhance the ability to function.
Clifton Springs Health Center	404-244-2200	Provides childhood immunizations, back to school hearing/vision screenings, adult immunizations, pregnancy testing, prenatal case management, STI care, and other health services based on a sliding scale to resident of DeKalb County.
Decatur Area Emergency Assistance Ministry	404-373-2300	Provides basic health and hygiene items to low-income households in DeKalb County.
DeKalb Community Service Board/Claratel Behavioral Health	404-892-4646	Provides assistance with achieving and maintaining recovery from substance related psychiatric disorders.
First Baptist Church of Decatur	404-373-1653	Provides used clothing to low-income residents of Dekalb County.
Foundation of the American Academy of Ophthalmology	aao.org/foundation	Provides medical and glaucoma eye exams to low-income seniors at no cost.
FODAC	770-491-9014	Provides hundreds of items and parts including wheelchairs, standers, strollers, corner chairs, gait trainers, shower supports, toilet supports, therapy aids, specialized mattresses, canes, bathing aids, walkers, Hoyer lifts, and hospital beds to disabled adults and children in need.
Four Corners Primary Care Center	770-806-2928	Provides primary and preventative health services to the medically underserved regardless of ability to pay, race, religion, or other barriers.
Georgia Department of Community Health	404-656-4507	Provides low-income children caretakers, aged, blind, and disabled individuals with access to medical care through a series of Medicaid Programs
Georgia Department of Public Health	404-657-2700	Provides education and preventative care services to members of the local community.
Good Pill Pharmacy	888-987-5187	A nonprofit pharmacy that charges a flat fee for medications and delivers directly to the customer's home.
Good Samaritan Health Center	404-523-6571	Provides affordable primary health care, dental care, and counseling to residents of Gwinnett County.
Growing Discoveries Outreach Ministries	404-662-7477	Provides traditional housing and support services to men with addictions
Grant Park Clinic	404-627-4259	A nonprofit Christian ministry that provides medical services based on a sliding scale.
Gwinnett Community Clinic	770-995-3300	Provides a variety of free medical services to low-income and underserved populations residing in Gwinnett County.
Hebron Community Health Center	770-277-4675	Provides dental care to low-income and underserved populations residing in the Suwanee area.
Helping Hands Outreach Clinic	678-607-0759	Provides primary care and preventative health services to residents of Rockdale County regardless of their ability to pay.
Hope Clinic	770-685-1300	Provides high quality medical care to residents of Gwinnett County with l limited or no access to healthcare, regardless of ability to pay.
Kool Smiles	877-200-2064	Provides first-rate dental services to communities that are overlooked or are otherwise underserved.
Lion's Club	www.lionsclubs.org	Provides eye exams and glasses at no cost to low-income individuals in need.
Mercy Heart	678-374-5134	Provides free medical and dental care to low-income residents of Rockdale County.
National Alliance on Mental Illness	www.nami.org	Provides support, education, and advocacy services to individuals with mental illness through support, education, and advocacy services.
New Beginning Full Gospel Baptist Church	404-508-1400	Provides clothing to low-income residents of DeKalb County.
New Eyes for the Needy	973-376-4903	Provides new basic prescription eyeglasses for children and adults in financial need who cannot afford glasses on their own.
New Joshua's Circle of Hope for Mental Wellness and Recovery, LLC	770-491-1335	Offers behavioral/mental health services at a free or reduced rate to individuals in need.
North DeKalb Health Center	404-294-3700	Provides basic health care services to residents of DeKalb County using a sliding scale.
Mercy Care	678-843-8600	Provides primary care, behavioral health care, dental care, health screenings, vision care, and health education to low-income residents of Decatur.

Oakhurst Medical Centers	404-298-8998	Provides affordable, accessible, quality primary care services to ethnically diverse patients and their families. Patients are also eligible for medication at deeply discounted rates at contracted pharmacy locations.
Operation Homefront	210-659-7756	Provides emergency assistance with vision care to military families in need.
Positive Health Impact Centers	404-589-9040; 770-962-8396	Provides HIV comprehensive specialty care through clinical care, mental health counseling, addiction treatment, support programs in medical case management, patient navigators, transportation, housing and prevention testing.
Resource Center for Community Action	770-760-1346	Provides emergency assistance with medications to residents of Rockdale County
Rockdale House	770-483-3984; 770-483-0213	Provides in-house substance abuse recovery services for residents of Rockdale County.
St. Vincent De Paul Society	678-892-6163	Provides emergency medication and clothing assistance to low-income families in need.
Streetwise	678-985-9915	Provides emergency assistance with clothing and personal items to low-income families in need.
The Parker Lee Project	469-441-1485	Helps families of children with medical needs to obtain the supplies, equipment, education, and support they need.
Truth's Community Clinic	770-277-4675	Provides non-emergency medical, pharmaceutical, dental, and spiritual care services to low-income residents of Gwinnett County at no cost.
Physician's Care Clinic	404-501-7940	Provides comprehensive health care services, health education and management, pharmaceuticals, and health maintenance supplies to low-income individuals without insurance who do not qualify for Medicare or Medicaid.
Positive Growth, Inc.	404-569-3742	Provides a number of counseling services designed to assist individuals with overcoming mental, emotional, or behavioral health concerns.
The Quilt, Inc	404-297-8321	Provides effective drug and alcohol treatment services for men, women, and children through a comprehensive 12-step recovery and education program.
RX Hope	rxhope.com	Provides free or low-cost prescriptions to low-income residents.
Sarah's Closet	770-593-3282	Provides "gently used" clothing to low-income residents of DeKalb County.
United Craftsmen Children's Shoe Drive, Inc	404-218-5402	Provides shoes to children in need at Christmas
U.S. Department of Veteran Affairs (VA)	Va.gov	Provides veterans an opportunity to purchase dental insurance through Delta Dental and MetLife at a reduced rate.
Victory Church	770-849-9400	Provides clothing to low-income residents of DeKalb County.
Wheelchair Foundation	877-378-3839	Provides wheelchairs to disabled individuals who are financially disadvantaged.

Conclusion: Strengths
The majority of the population has good health, with 82.25% of adults reporting satisfactory health conditions, and 90.09% of residents (all ages) being able-bodied, indicating a strong potential workforce. Additionally, the primary causes of death in the area can often be mitigated through lifestyle changes such as diet and exercise, suggesting opportunities for health improvement through preventive measures. The life expectancy in DeKalb (78.90 years) and Gwinnett (79.60 years) counties surpasses both the regional average (77.03 years) and the state average (76.10 years). Moreover, after a notable increase in deaths during the COVID-19 pandemic (+21.82%), the number of deaths began to decrease in 2022, reflecting a recovery trend. The uninsured rate for the region stands at 14.13%, which is lower than the state average of 14.80% and represents a decrease of 2.08% over the past five years. This is in contrast to the state and national averages, which experienced increases of 8.03% and 12.18%, respectively.

Conclusion: Weaknesses
Despite these strengths, there are significant health challenges in the region. A substantial number of adults, 237,264 (17.75%), report poor health, with 148,040 adults experiencing more than 14 days of health distress per month (11%). Obesity is prevalent among 475,752 adults, contributing to a range of health issues including high blood pressure, heart disease, stroke, diabetes, and respiratory problems. Obesity is particularly high among adults aged 45-64, those with lower educational attainment, and individuals earning less than $25,000 per year. Additionally, 213,448 adults experience more than 14 days of mental distress each month, highlighting a growing mental health crisis.

The mental health of Georgia's residents is a critical concern, with data indicating that 36.6% of adults accessed mental health services in 2019. Among adults, 5.8% suffer from severe mental illness, and 5.0% have serious thoughts of suicide, reflecting significant increases from 2019. The prevalence of major depressive episodes among adolescents aged 12-17 has also risen sharply, indicating a critical need for enhanced mental health services and preventive measures. Mental health issues are intertwined with socio-economic factors such as poverty, education, and healthcare accessibility, necessitating an integrative strategy for effective intervention.

Additionally, 9.91% of the region's residents are disabled, impacting various age groups and contributing to financial instability and decreased quality of life. For adults, disabilities hinder employment opportunities and exacerbate economic challenges. For children, disabilities strain household finances and limit educational opportunities. For seniors, disabilities increase medical expenses and reduce quality of life. This demographic disparity underscores the need for comprehensive support services.

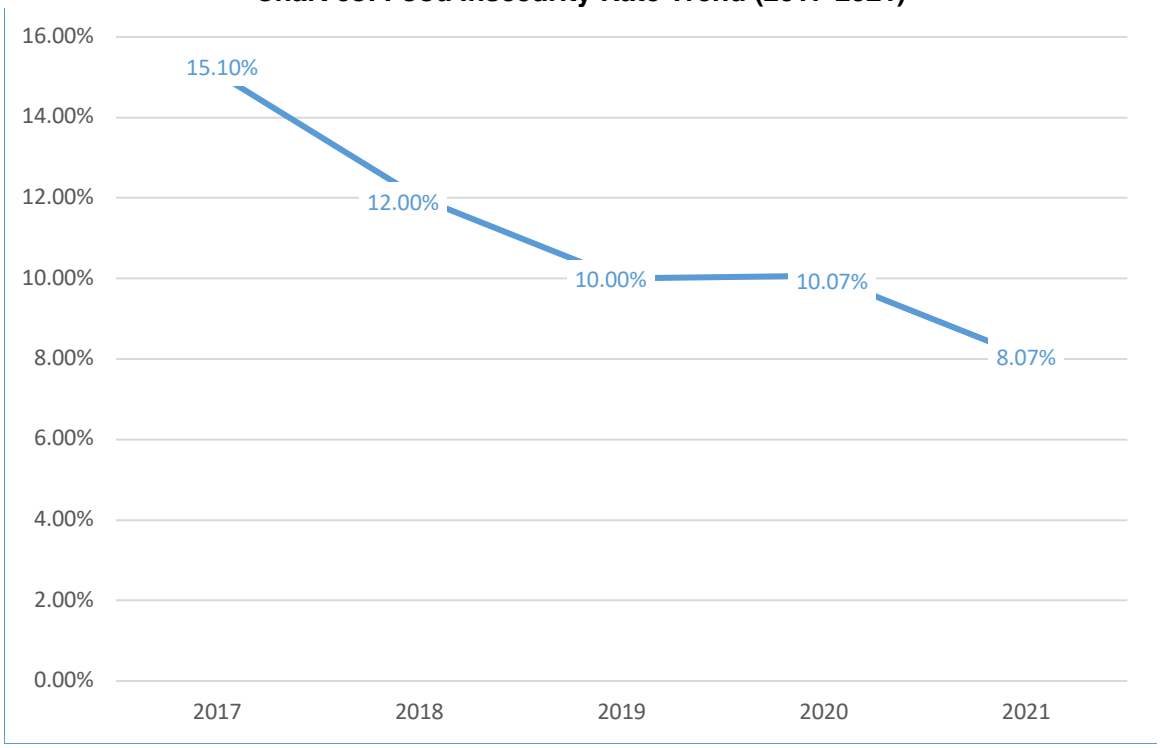
Life expectancy in Newton (74.20 years) and Rockdale (75.40 years) counties is lower than the regional and state averages. Also, the ratio of residents to healthcare providers is also concerning, with 2,040 residents per physician, 2,340 residents per dentist, and 610 residents per mental health professional, all of which are higher than national standards. Finally, there are 271,433 uninsured residents in the region, representing 14.13% of the population, which is higher than the national average of 10.50%.

Nutrition

Food Insecurity

Food insecurity, defined as a household's inability to provide adequate nutritional foods for every member to lead an active, healthy life, is intimately connected with health outcomes. Studies have consistently shown that individuals and families grappling with food insecurity are disproportionately affected by various health conditions, including Type 2 Diabetes, high blood pressure, heart disease, and obesity. Furthermore, the consequences extend beyond physical health, with psychological and behavioral health issues also prevalent among family members in food-insecure households. At present, it is estimated that 151,300 local residents are food insecure.

Chart 68: Food Insecurity Rate Trend (2017-2021)



Source: Feeding America

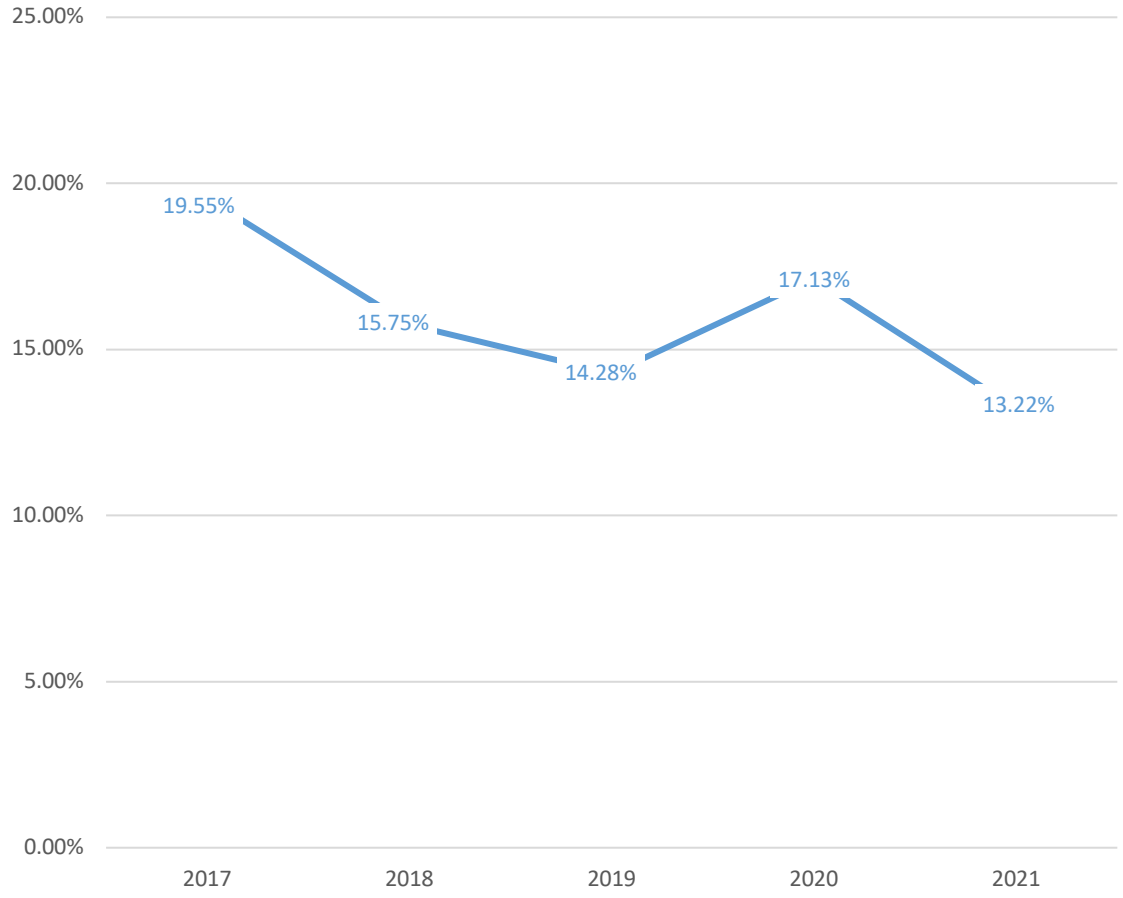
Data indicates that the region experienced a significant decrease in the food insecurity rate over the past five years, dropping from 15.10% in 2017 to 8.07% in 2021, representing an overall decrease of 46.56%. This trend indicates considerable progress in addressing food insecurity within the community. The most substantial decline is observed between 2020 and 2021, where the rate fell from 10.07% to 8.07%. This period coincides with the COVID-19 pandemic, which had complex effects on food security. While the pandemic initially exacerbated food insecurity due to economic disruptions, various relief efforts, including increased food assistance programs and community support, likely contributed to the observed decrease in 2021.

It should be noted that individuals identifying as Black were noted as experiencing a significantly higher food insecurity rate (17%) than those identifying as White (7%). An estimated 12% of those identifying as Hispanic were found to be experiencing food insecurity.

Child Food Insecurity

For children, food insecurity can be even more damaging. Not only can a lack of nutrition lead to health concerns such as asthma and anemia, but it can also impact their future education through developmental delays (language, motor skills, etc.). Feeding America reports that food insecure children are more likely to fail a grade in school, and often have behavioral problems that lead to difficulty in social interactions with others.

Chart 69: Child Food Insecurity Trend (2017-2021)



Source: Feeding America

Current reports indicate there are 54,080 children facing food insecurity within the region. Analyzing the child food insecurity trend from 2017 to 2021, we observe a decrease of 32.38% overall. The rate dropped from 19.55% in 2017 to 13.22% in 2021. This trend, however, shows some fluctuations, with an increase to 17.13% in 2020, likely influenced by the COVID-19 pandemic, which disrupted access to school meals and other food programs. This increase highlights the vulnerability of children to economic and social disruptions and underscores the importance of sustained efforts to ensure food security for this demographic.

Senior Food Insecurity

Another vulnerable population that should be considered when looking at the possibility of food insecurity is senior citizens. According to national statistics, nearly 1 in every 4 seniors in America faces the threat of hunger and/or malnutrition. This applies to those who aren't sure where their next meal is coming from as well as those who do not have access to healthy food options. The issue is so severe that the AARP reports that seniors face healthcare costs of more than $130 billion each year due to medical issues stemming from hunger.

Although limited data is available for this age group, Feeding America reports that 8.00% of Georgia seniors were food insecure in 2021. This means that Georgia is ranked in the top 10 in the number of food insecure seniors in the nation.

According to research, food insecure seniors are 233% more likely to suffer from depression, 90% more likely to experience asthma, 57% more likely to experience congestive heart failure, 32% more likely to experience limitations in activity, and 19% more likely to experience high blood pressure.

Estimated Food Insecurity Counts (All Ages)

Overall, it is estimated that among the 151,300 food insecure residents,17,622 are senior citizens, 54,080 are children, and 79,598 are adults.

Table 62: Food Insecurity Estimates by Age (2021)

Area	Children	Adults	Senior	Total
DeKalb	26,630	31,513	7,647	65,790
Gwinnett	19,750	41,166	7,734	68,650
Newton	4,100	4,847	1,163	10,110
Rockdale	3,600	2,072	1,078	6,750
REGION	**54,080**	**79,598**	**17,622**	**151,300**

Source: Feeding America

Food Affordability

The average cost per meal per person in the region is $3.79. To put this cost into perspective, an average family of four spending this amount for each household member would need to budget an estimated of $1,383 per month on food, or $16,600 per year. This is nearly one-quarter (22.28%) of the median household income and 110.08% of the minimum wage salary.

At these rates, economically disadvantaged households are forced to seek outside subsidies in order to survive. The primary subsidy, utilized by 67,865 households, or 10.04% of the population, is the Supplemental Nutrition Assistance Program (SNAP). Formerly known as Food Stamps, this program provides low-income residents with a monthly allocation of funds that can be used exclusively for the purchase of food. It should be noted that the number of SNAP recipients has decreased by 9.95%, over the past five years.

Table 63: SNAP Recipient Households (2022)

Area	SNAP Recipients	SNAP Recipients%
DeKalb	35,883	12.60%
Gwinnett	22,583	7.10%
Newton	5,587	14.00%
Rockdale	3,812	11.47%
REGION	**67,865**	**10.04%**

Source: U.S. Census Bureau (S2201)

Of the households receiving SNAP benefits, 65.37% have at least one worker in the home, 58.00% have at least one child in the home, 41.49% have at least one disabled household member, and 64.16% have at least one senior citizen in the home. Nearly one-third of the households served (32.73%) were single-parent homes, with 20.04% being traditional families headed by married adults. The median income for all recipients was determined to be $43,497 annually.

SNAP recipients in the community were noted as being predominately Black (63.52%), followed by smaller portions identifying as White (18.18%), Multi-Racial (6.44%), Asian (6.27%), Other Race (4.86%), American Indian (0.65%), and Pacific Islander (0.08%). Only 12.18% were found to have a Hispanic ethnicity.

Although SNAP subsidies are extremely beneficial for low-income families, the average benefit is $1.40 per person per meal. This is less than half of the amount needed to sustain the nutritional needs of a person. For senior citizens the average benefit is slightly lower at $1.16 per person per meal, with an estimated 20% having a benefit of $0.17 per person per meal. This leaves those with the greatest income barriers with a need for additional subsidies.

Community Feedback

Based on the survey responses, food insecurity emerges as a significant concern in the community, identified by 296 survey respondents as a primary condition of poverty. Among the low-income residents polled, 198 reported struggling with food insecurity, with 93 of them unable to get help when needed. One resident expressed their constant worry about food, stating, "I am constantly worrying about how many meals I can make out of what little groceries I can afford." Another resident noted, "Sometimes I don't have enough money for food, so my church gives me food each month." These statements highlight the ongoing struggle many residents face in securing sufficient food for themselves and their families.

The high cost of food exacerbates the issue of food insecurity. Many respondents highlighted how food prices have become unaffordable, making it difficult to purchase adequate groceries. One resident mentioned, "The cost of food is so high, you can hardly afford it," while another stated, "Increases in food prices are decreasing how much food you can afford to buy."

A lack of access to fresh and affordable food is another critical issue identified by the community. Many respondents reported insufficient income to buy fresh fruits and vegetables and a lack of nearby grocery stores. One resident stated, "People have insufficient income to afford fresh fruit and vegetables," while another mentioned, "We have a lack of grocery stores in close proximity to our homes." This lack of access to nutritious food contributes to poor health outcomes and ongoing food insecurity.

The insufficiency and inaccessibility of food assistance programs further compound the problem of food insecurity. Many residents reported that existing food assistance programs are either inadequate or difficult to access. One resident shared, "Food assistance is scarce and hard to get," while another noted, "Some of the food pantries give out food that is expired and spoiled." Additionally, the logistical challenges of accessing food programs, such as inconvenient times and locations, further limit their effectiveness. One respondent mentioned, "Food banks and assistance programs aren't always convenient (time or location)."

Certain populations, particularly seniors and those on fixed incomes, are disproportionately affected by food insecurity. One senior commented, "I am a 69-year-old senior on a fixed income and can only get $23 a month EBT/Food stamps assistance!" This minimal assistance is insufficient to meet their nutritional needs. Another resident highlighted the disparities in assistance, stating, "Some senior citizens or disabled people only receive a small amount of food stamps. So, they have to use their monthly income to buy food for their household." These comments underscore the need for targeted interventions to support the most vulnerable community members in securing adequate nutrition.

Agency Data

Among the households requesting assistance in 2022, the average spending on food was $2,297 per year for an average household size of 2.75. These households had an average household budget of $24,941.64 and an average income of $38,169.89. The data highlights the significant portion of household budgets dedicated to food expenses, which is a critical factor in financial planning and stability.

Two households regularly used emergency food banks without subsidies like SNAP or WIC, spending an average of $100 per month on food, totaling $1,200 annually. These households had an average size of 1 and an annual income of $5,484, with food expenses accounting for 21.88% of their income. This high percentage underscores the severe financial strain these households face in meeting their basic needs.

A total of 411 households were self-provided, spending an average of $271.22 on food per week, which amounts to $3,254.64 annually. These households had an average size of 2.38 and an annual income of $17,126, with food expenses representing 19.00% of their income. This data indicates that even self-provided households allocate a significant portion of their limited income to food.

Additionally, 768 households received food supplements, spending an average of $150.54 per month on food, totaling $1,806.48 annually. These households had an average size of 2.96 and an annual income of $49,766.62, with food expenses comprising 3.63% of their income. The lower percentage of income spent on food among supplemented households highlights the positive impact of food assistance programs in alleviating financial pressure.

Food and Nutrition Resources

Resource Name	Contact Information	Description
Action Ministries	404-881-1991	Provides emergency food and prepared meals to low-income residents of Rockdale County.
Bread of Life Food Ministries	770-513-1007	Provides emergency food allocations to low-income residents of Gwinnett County.
CarePointe	678-802-7233	Provides emergency food allocations to low-income residents.
Decatur Area Emergency Assistance Ministry	404-373-2300	Provides emergency food to low-income households in DeKalb County.
Feeding Children Everywhere/U.S. Hunger	888-891-6447	Delivers delicious meal kits and popular grocery items to low-income households in need.
Georgia Division of Family and Children Services	404-657-3459	Provides monthly subsidies to low-income residents through the SNAP program.
Georgia Department of Public Health	404-657-2700	Provides food subsidies to infants (ages birth-5), pregnant women, breastfeeding mothers (up to 1 year), and postpartum women (up to 6 months) living in low-income families.
Hosea Helps	404-755-3353	Provides emergency assistance with food and fresh produce to low-income families in DeKalb County.
Meals on Wheels	404-351-3889	Provides home delivered meals to senior citizens struggling with poverty, food insecurity, and food isolation.
Mom's Meals	877-508-6667	Provides home delivered meals to the elderly, disabled, and individuals in poor health who are eligible for economic assistance through Medicaid Waiver or other government funded programs.
New Life Community Ministries	404-381-6731	Provides hot meals to low-income residents of DeKalb County.
Operation Homefront	210-659-7756	Provides emergency food assistance to military families in need.
P.U.S.H. Nonprofit Organization	678-476-3712	Provides emergency food assistance to low-income residents of DeKalb County.
Resource Center for Community Action	770-760-1346	Provides emergency assistance with food to residents of Rockdale County.
Rockdale Emergency Relief Fund	770-922-0165	Provides emergency food assistance to low-income families and individuals in Rockdale County.
Saint Vincent De Paul Society	678-892-6163	Provides emergency food assistance to low-income families in need.
Salvation Army of Metro Atlanta	404-486-2710	Provides emergency food allocations to low-income households.
Sarah's Closet	770-593-3282	Provides fresh and whole foods to low-income residents of DeKalb County.
Streetwise	678-985-9915	Provides emergency food assistance to low-income families in need.
Veteran Center Incorporated	678-792-8387	Provides emergency food assistance to homeless, disabled, and disadvantaged veterans.
Victory Church	770-849-9400	Provides emergency food assistance to low-income residents of DeKalb County. Provides hot in-home meals to homebound individuals.

Conclusion: Strengths
One notable strength in nutrition is the significant decrease in food insecurity among the local population, which has dropped by 48.56%. Similarly, child food insecurity has seen a reduction of 32.38%. These reductions indicate improvements in access to food and nutritional resources, positively impacting community health and well-being.

Conclusion: Weaknesses
Despite the overall improvement, food insecurity remains a significant issue, affecting 151,300 local residents. Notably, individuals identifying as Black experience a significantly higher food insecurity rate (17%) compared to White individuals (7%). An estimated 12% of those identifying as Hispanic also face food insecurity. Among the food insecure are 54,080 children, 79,598 working-aged adults, and 17,622 seniors, indicating that this problem spans all age groups.

Child food insecurity was particularly impacted by the COVID pandemic, increasing by 19.96% in 2020, while the total population's food insecurity increased by only 0.07% during the same period.

The average cost per meal per person in the county is $3.79, which for a family of four amounts to an estimated $1,383 per month or $16,600 per year. This expense constitutes nearly one-quarter (22.28%) of the median household income and 110.08% of the minimum wage salary, highlighting the financial strain on economically disadvantaged households.

The Supplemental Nutrition Assistance Program (SNAP) is a primary subsidy utilized by 67,865 households, or 10.04% of the population. SNAP recipients in the community are predominantly Black (63.52%), with smaller portions identifying as White (18.18%), Multi-Racial (6.44%), Asian (6.27%), Other Race (4.86%), American Indian (0.65%), and Pacific Islander (0.08%). Only 12.18% of recipients are of Hispanic ethnicity. While SNAP subsidies are beneficial, the average benefit is $1.40 per person per meal, which is less than half the amount needed to meet nutritional needs. For senior citizens, the average benefit is slightly lower at $1.16 per person per meal, with an estimated 20% receiving only $0.17 per person per meal. This underscores the need for additional subsidies to support those with the greatest income barriers.

Transportation

Transportation Availability

While transportation can be a major barrier to self-sufficiency by limiting access to employment and education, it can also impact a person's quality of life by preventing them from securing healthcare, food, and other life necessities. An article in the New York Times titled "Transportation Emerges as Crucial to Escaping Poverty" reports that the impact of transportation on social mobility is stronger than many other factors, such as crime, elementary-school test scores, or the percentage of two-parent families in a community.

The article, based on studies conducted by Harvard University and New York's Rudin Center of Transportation, emphasized the strong link between the availability of public transportation systems and income. Researchers compared neighborhoods by accessibility to mass transit and the number of jobs within an hour's commute. Residents of the areas least served by mass transit relied on personal vehicles. Those with some, but insufficient, access to transportation had the highest unemployment rates and the lowest incomes.

In 2022, the U.S. Census Bureau identified 35,281 households in the service area without a vehicle. Although 17,456 of those without a vehicle (49.48%) do not contain a member of the labor force, these households could struggle to obtain basic needs. For the remaining 17,825, the lack of transportation impacts their ability to secure/maintain employment.

Table 64: Number of Vehicles per Household (2022)

Area	0	1	2	3	4+
DeKalb	22,046	114,908	103,134	32,062	12,580
Gwinnett	10,362	93,014	131,621	55,334	27,640
Newton	1,660	10,113	15,724	8,580	3,829
Rockdale	1,213	11,590	11,812	5,491	3,134
REGION	**35,281**	**229,625**	**262,291**	**101,467**	**47,183**

Source: U.S. Census Bureau (B08203)

An additional 229,625 households were identified as having only one vehicle in the home. Among these, an estimated 25,306 had more than one family member working in the home. While these households would have access to basic necessities unless the condition of the vehicle produced a barrier of some type, secondary household members may face difficulties improving education/skills and securing employment due to a lack of transportation. Overall, an estimated 54,235 households have more workers than vehicles in the home and 71,691 total households (10.61%) have a transportation employment barrier of some type. Based on the average household size of 2.81, an estimated 201,452 local residents may be impacted overall.

The data indicates a 5.12% decrease in households lacking a vehicle over the past five years, with households with at least one vehicle increasing by 7.40%. Further, the portion of the population without a vehicle has decreased by 10.22%, from 5.87% to 5.27% during the evaluated period.

Chart 70: Vehicle Ownership Trend (2018-2022)

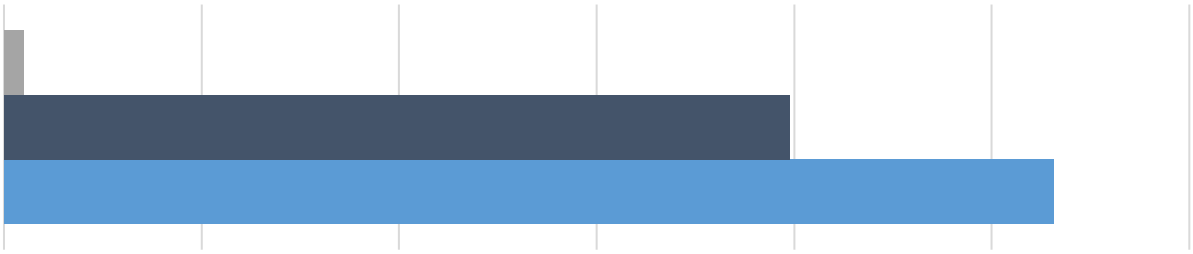


Source: U.S. Census Bureau (B08203)

Commutes

Commuting patterns significantly influence the daily lives of residents, particularly those with restricted access to transportation or living in poverty. For such individuals, the distance between home and work can represent not just a physical journey but a barrier to employment opportunities, potentially limiting their access to higher-paying jobs that are often located farther away. This can perpetuate the cycle of poverty by confining job seekers to a smaller pool of local, possibly lower-wage employment options. Moreover, lengthy commutes can lead to increased expenses, time away from family, and stress, further impacting the quality of life and work-life balance.

Chart 71: Worker Commutes (2022)



	Region
Out of State	9,847
Out of County (Same State)	397,640
In County	531,146

Source: U.S. Census Bureau (B08007)

In the service area, an estimated 407,487 members of the labor force (43.41%) travel outside of their county of residence for employment, with 9,847 of these having to travel out of state for work. The remaining 188,440 residents work in their county of residence. Over the past five years, the portion of the labor force traveling outside of their county for work has decreased by 6.86%.

Table 65: Worker Commutes by County (2022)

Area	Total Workers	In County	Out of County	Out of State
DeKalb	378,641	199,246	176,357	3,038
Gwinnett	464,985	291,701	168,212	5,072
Newton	52,493	21,378	30,188	927
Rockdale	42,514	18,821	22,883	810
REGION	**938,633**	**531,146**	**397,640**	**9,847**

Source: U.S. Census Bureau (B08203)

Newton County has the highest percentage of residents commuting out of their community for work at 59.27%. This indicates a significant reliance on jobs outside the county, reflecting limited local employment opportunities. Such high out-commuting rates suggest a need for economic development strategies to create more job opportunities within the county, thereby reducing the necessity for residents to seek employment elsewhere.

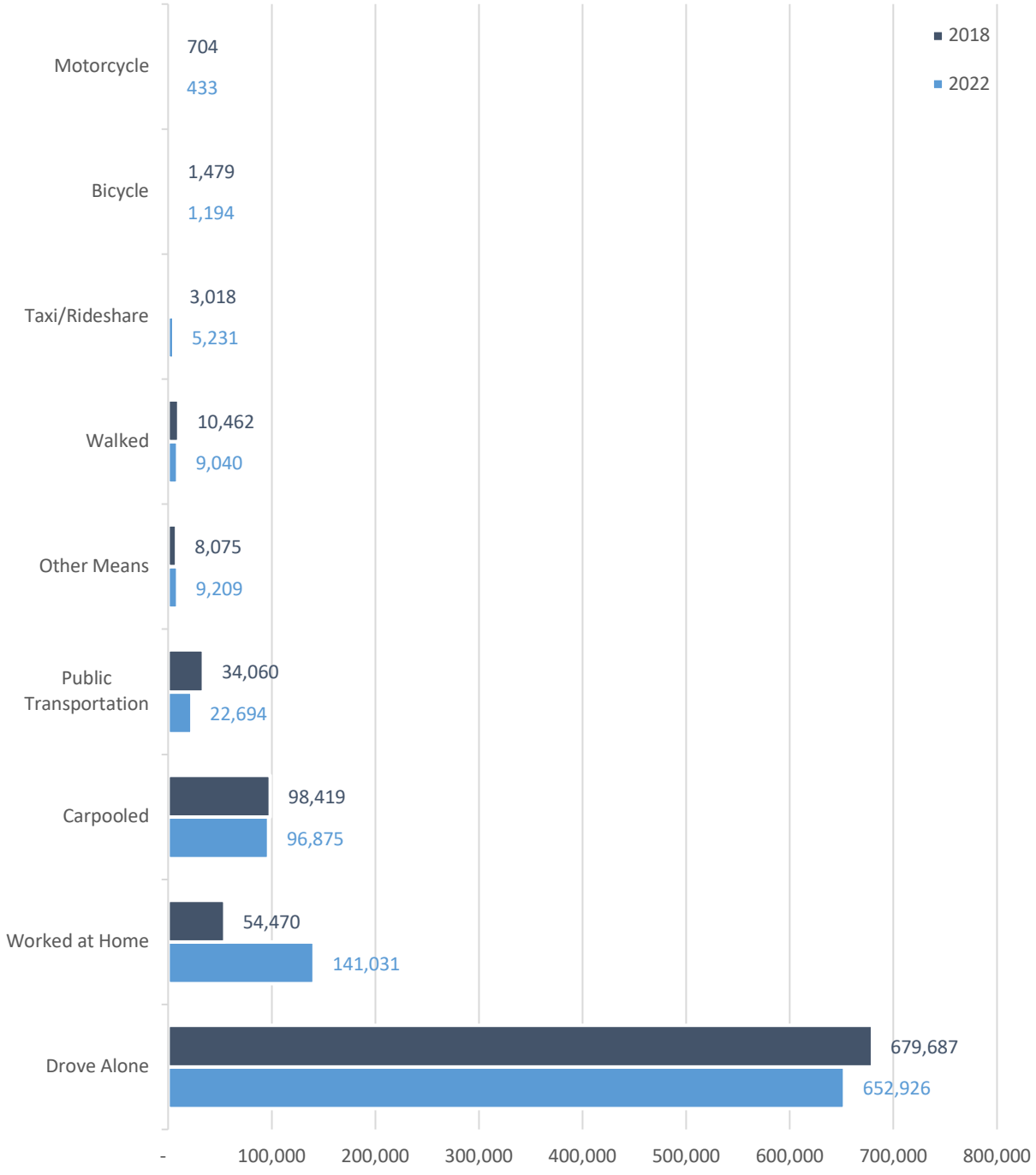
Rockdale County follows with 55.74% of its workforce commuting out of the community. This high percentage points to a substantial portion of the population dependent on employment opportunities beyond county lines. Enhancing local job markets could improve the quality of life by minimizing travel times and associated costs for these workers.

DeKalb County has 47.40% of its workforce commuting out of the community, indicating a relatively balanced distribution between in-county and out-of-community employment. While this suggests better local job availability compared to Newton and Rockdale, there is still a significant portion of the workforce that needs to travel outside for work.

Gwinnett County shows the lowest percentage of out-of-community commuters at 37.29%, which indicates a higher rate of local employment opportunities. This comparatively lower commute rate suggests more robust local job markets, reducing the need for residents to seek employment outside the county.

In 2022, the predominant method of commuting in the region was driving alone, with 652,926 individuals using this mode of transportation. A total of 141,031 residents report that they are working from home, an increase of 158.91% over the past five years, which is more than likely associated with the COVID-19 Pandemic. This category now represents 11% of the labor force, up from 5.51% in 2018. There has been a slight decrease (-1.50%) in carpooling workers, now representing 15.03% of the labor force compared to 6.12% five years ago.

Chart 72: Commute Method (2018/2022)



Source: U.S. Census Bureau (B08301)

In 2022, the average commute time in the region was recorded at 34.15 minutes. This is longer than both the state (28.40) and national (26.70) averages and demonstrates an increase of 5.83% as compared to no change on the state level and an increase of only 0.38% on a national level.

Table66: Average Commute Times by County (2018/2022)

Area	2018	2022	% Change
DeKalb	32.20	31.30	-2.80%
Gwinnett	34.00	33.30	-2.06%
Newton	32.30	37.10	+14.86%
Rockdale	30.60	34.90	+14.05%
REGION	**32.27**	**34.15**	**+5.83%**
STATE	**28.40**	**28.40**	**No Change**
NATION	**26.60**	**26.70**	**+0.38%**

Source: U.S. Census Bureau ACS (DP03)

The longest average commute was identified in Newton County, at 37.10 minutes, which was also the location of the largest commute increase (+14.86%). Commute times decreased in DeKalb (-2.80%) and Gwinnett (-2.06%).

Community Feedback

Personal transportation was identified as a significant barrier to economic security by 98 survey respondents. Among the low-income residents polled, 134 stated that they had struggled with transportation barriers, with 109 unable to secure assistance when needed. The condition of cars and the affordability of vehicles, repairs, insurance, and taxes are major concerns. High repair costs were cited by 249 respondents, while 203 stated that many lack insurance due to the cost. Additionally, 168 respondents reported difficulty finding a trustworthy mechanic, and 155 indicated that major issues with vehicles were common. One resident commented, "My car is 18 years old. I'm afraid it will stop working or need repairs," highlighting the anxiety faced by many due to vehicle reliability issues. Another resident noted, "Repairs are expensive and labor costs are unaffordable. The cost for new tires and brakes are expensive," further emphasizing the financial strain associated with maintaining personal transportation. Many residents struggle with the cost of car maintenance, insurance, and registration fees. One resident mentioned, "Car insurance has increased by so much, and the repairs I need on my car are a financial strain and stress. I had to drive around for five months with horrible brakes, and I don't like risking my family's safety." Another resident expressed frustration over the high cost of insurance, stating, "Personal transportation is cost prohibitive. The cost of used vehicles has skyrocketed since the pandemic and public transportation is unreliable."

Community transportation was identified as a barrier to economic security by 44 survey respondents. Concerns associated with public transportation include reliability, safety, affordability, and limited routes. Among those who discussed the adequacy of community transportation, 24 stated that no public transportation was available in their community, 19 reported limited routes, and 18 cited inadequate hours of operation. Additionally, 16 respondents mentioned the unreliability of the service, 12 noted high costs, and 12 expressed concerns about poorly maintained vehicles and safety issues. One resident highlighted the safety and reliability issues, stating, "MARTA is the most affordable source for me, but they are not dependable regarding pickup times." The lack of reliable transportation options makes it difficult for residents to secure and maintain employment, as one respondent noted, "There is a strain on maintaining employment due to transportation. If you don't have a car, then you just won't be employed in Gwinnett county." The difficulty in accessing transportation also impacts high school students, with one respondent mentioning, "High school children can't even work because there is no public transportation." The consistent theme of high repair costs and unreliable service providers was echoed by multiple residents, including one who mentioned, "MARTA bus routes have been cut. If I was to ride MARTA, I would have to walk a mile and a half to the train station. I fear that train station because I was once assaulted there and spent 10 days in the hospital."

Agency Data

Among the customers served by the organization in 2022, 770 owned a vehicle, 216 relied on others for transportation, 184 used public transportation, and 6 walked. There was no available data for the remaining 13 customers. Additionally, 101 customers reported experiencing transportation limitations of some type.

Transportation Resources

Resource Name	Contact Information	Description
Alterman JETS Program	770-677-9339	Provides transportation service for older adults and individuals with intellectual/developmental disabilities in DeKalb County for a moderate fee.
DeKalb County Transportation Voucher Program	770-322-2950	Provides vouchers designed to assist senior citizens in DeKalb County access public transportation services.
Gwinnett County Transit	770-822-5010	Provides public transportation services to residents of Gwinnett County for a fee. Seniors and individuals with disabilities may qualify for reduced rates.
iCare	404-377-2273	Provides free transportation service to medical appointments for senior citizens in DeKalb County.
Logisticare	888-224-7981	Provides non-emergency transportation services to medical appointments.
MARTA	www.itsmarta.com; 404-848-5000	Provides public transportation services to residents of DeKalb County for a fee. Seniors and individuals with disabilities may qualify for reduced rates.

Conclusion: Strengths
The region boasts several strengths in transportation. A significant majority of households (94.78%) have at least one vehicle, reflecting good accessibility to personal transportation. Over the past five years, there has been a 5.12% decrease in households lacking a vehicle and a 7.40% increase in those with at least one vehicle. This indicates an improving trend in vehicle ownership. Additionally, the number of workers working from home has seen a remarkable increase of 158.91%, which may alleviate some transportation pressures and commute times.

Conclusion: Weaknesses
Despite these strengths, there are notable weaknesses in the region's transportation infrastructure. In 2022, the U.S. Census Bureau identified 35,281 households without a vehicle, with nearly half of these (17,825) containing at least one member of the labor force. This lack of transportation poses significant challenges for securing and maintaining employment, as well as accessing basic needs. Furthermore, 229,625 households have only one vehicle, with an estimated 25,306 having more than one working family member. This situation creates a transportation barrier for secondary household members seeking education, skills training, or employment.

Overall, an estimated 71,691 households (10.61%) face transportation-related employment barriers, potentially affecting 201,452 local residents based on the average household size of 2.81. Additionally, 43.41% of all workers commute out of their county for employment, indicating a reliance on jobs outside their immediate community.

Specifically, Newton County has the highest percentage of residents commuting out of the county for work at 59.27%, followed by Rockdale County at 55.74%. DeKalb County has 47.40% of its workforce commuting out, while Gwinnett County shows the lowest at 37.29%.

The average commute time in the region is 34.15 minutes, longer than both the state (28.40 minutes) and national (26.70 minutes) averages, with a 5.83% increase over the past five years. This prolonged commute time can contribute to higher transportation costs and increased stress for workers, emphasizing the need for improved transportation solutions and local employment opportunities.

Family Relationships

In 2017, the National Institute of Health reported that family relationships play a central role in the shaping of an individual's well-being. Family members are linked in important ways through each stage of life, and these relationships are an important source of social connection and social influence. The quality of these relationships can influence well-being through psychosocial, behavioral, and physiological pathways. Further, the article explains that negative relationships can produce stress, which undermines the health and well-being by impairment of immune function, impacting cardiovascular health, and increasing the risk of depression.

Domestic Violence

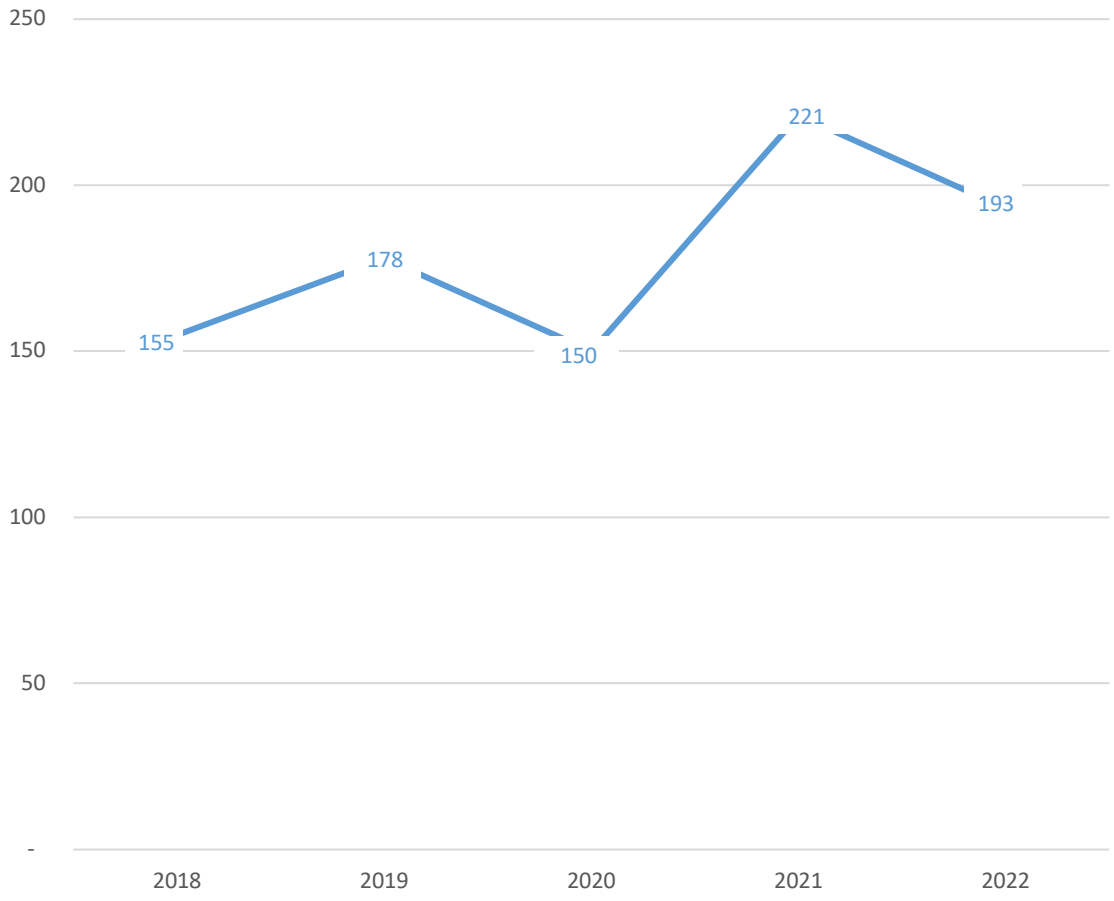
The study concludes that romantic relationships are one of the most important types of relationships, defining life context and impacting well-being throughout adulthood. A happy relationship is generally associated with increased mental and physical health due to strong social support, enhanced self-esteem, improved health behaviors, and a better ability to cope with stress. Individuals in relationships full of conflict, however, are more likely to report depressive symptoms and poor health. In fact, a number of studies suggest that the negative aspects of poor relationships have a stronger impact on well-being than the positive aspects of good relationships.

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A 2023 study conducted by the Georgia Commission on Family Violence found that there were 129,528 crisis calls to Georgia's certified family violence and sexual assault agencies, a 13% increase from 2021 crisis calls. Further, there were 17,682 family violence and Ex Parte Temporary Protective Orders (TPOs) issued during this year.

The report continued to explain that 897 Georgia citizens lost their lives due to domestic violence in the past five years. While the data indicates that the number of deaths fluctuates, the overall trend shows an increase of 24.52% during this time. Firearms were the cause of death in 81% of these cases.

Chart 73: Georgia Domestic Violence Deaths (2018-2022)



Source: Georgia Commission on Family Violence

Parenting

Even in the strongest of relationships, couples who have children often struggle to provide a healthy environment that meets a child's need for emotional, social, cultural, educational, and relational security. The National Institute of Health specifically addressed the complexities of parent-child relationships, finding that parenthood generates rewards and stressors, both of which have important implications for well-being. While parenthood can increase social integration, it also has the potential of producing stress and diminishing well-being. In the service area, a total of 78,196 households (30.58%) have at least one child under the age of 18 living in the home.

Births

The Georgia Department of Public Health documented a total of 23,970 births in 2022. Based on five-year averages, it is estimated that 23,830 women are pregnant during any given year.

Table 67: Annual Births (2018-2022)

Area	2018	2019	2020	2021	2022	Average
DeKalb	10,850	10,374	10,158	9,950	10,074	10,281
Gwinnett	11,298	11,470	10,904	11,120	11,569	11,272
Newton	1,356	1,370	1,282	1,256	1,348	1,322
Rockdale	945	955	956	938	979	955
REGION	**24,449**	**24,169**	**23,300**	**23,264**	**23,970**	**23,830**

Source: Georgia Department of Public Health

Single Parent Households

For single parents, especially those without a strong external support system, the emotional and financial stress can be overwhelming. According to the U.S. Census Bureau, there are an estimated 322,433 single parents in the local service area, a strong majority of which (64.24%) are headed by a female householder.

Table 68: Single Parent Households (2022)

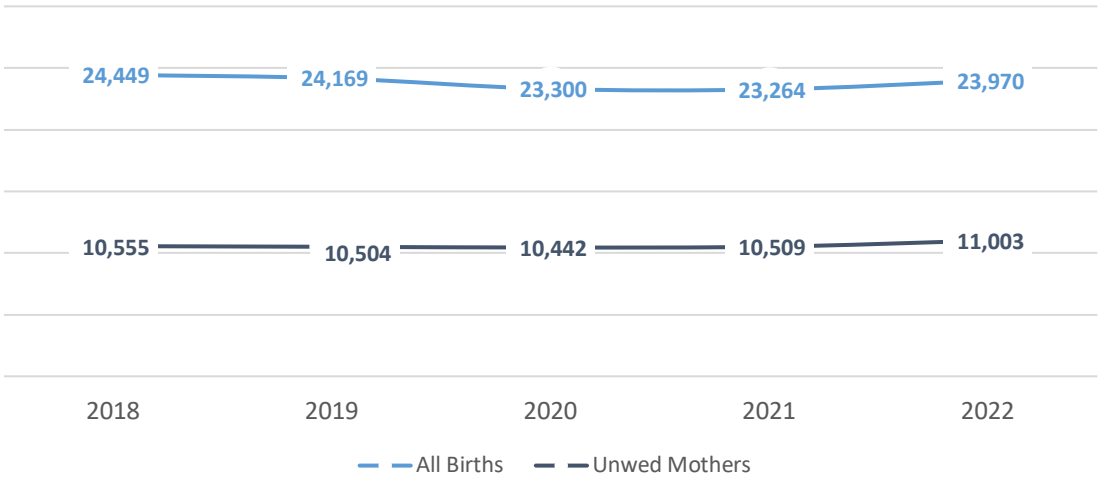
Area	Male Householder	Female Householder	Total
DeKalb	57,514	103,984	161,498
Gwinnett	47,218	79,218	126,436
Newton	5,672	12,223	17,895
Rockdale	4,911	11,693	16,604
REGION	**115,315**	**207,118**	**322,433**

Source: U.S. Census Bureau (DP02)

These households have a heightened poverty risk due to employment barriers that are generally associated with childcare. Although single parent households can be caused by a variety of circumstances (divorce, death of a spouse, etc.), it should be noted that unwed mothers account for nearly half (45.90%) of all births in the county. These households are generally much more likely to have no prenatal care than married couple parents and are significantly more likely to use Medicaid to pay for birthing than married couple parents.

While the number of total births has decreased by 1.96% over the past five years, unwed mother births have increased by 4.24%.

Chart 74: Trend of Total Births and Unwed Mother Births (2018-2022)

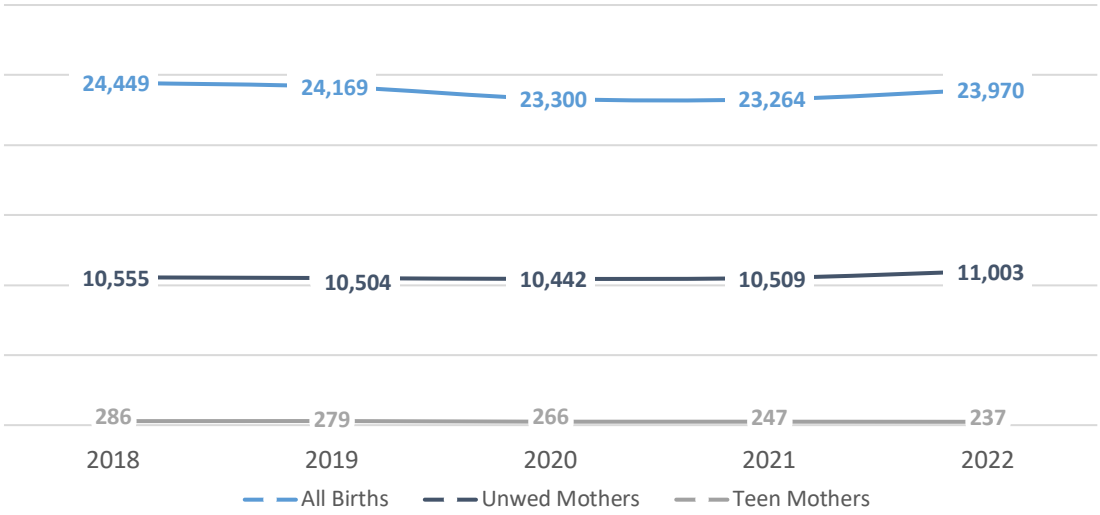


Source: Georgia Department of Public Health

Teenage Mother Births

While it is often assumed that a large number of single parent births are associated with teenage mothers, data indicates that this is not necessarily the case in the area served by the organization. According to state records, an estimated 2.71% of unwed mother births in the community are to adolescents. Although accounting for a small number of births each year (0.99%), research indicates that these children have a heightened risk of health complications (low-birth rate, anemia, high blood pressure, infant mortality, and cephalopelvic disproportion) and long-term academic deficiencies. Further, young mothers are more likely to suffer from mental health issues such as depression, substance abuse, and Post-Traumatic Stress Disorder (PTSD). These families are also more likely to be impoverished and reside in communities that are socially and economically disadvantaged. Over the past five years, the number of teen births has decreased by 17.13%.

Chart 75: Teenage Birth Trend as compared to Unwed Mother and Total Births (2017-2021)

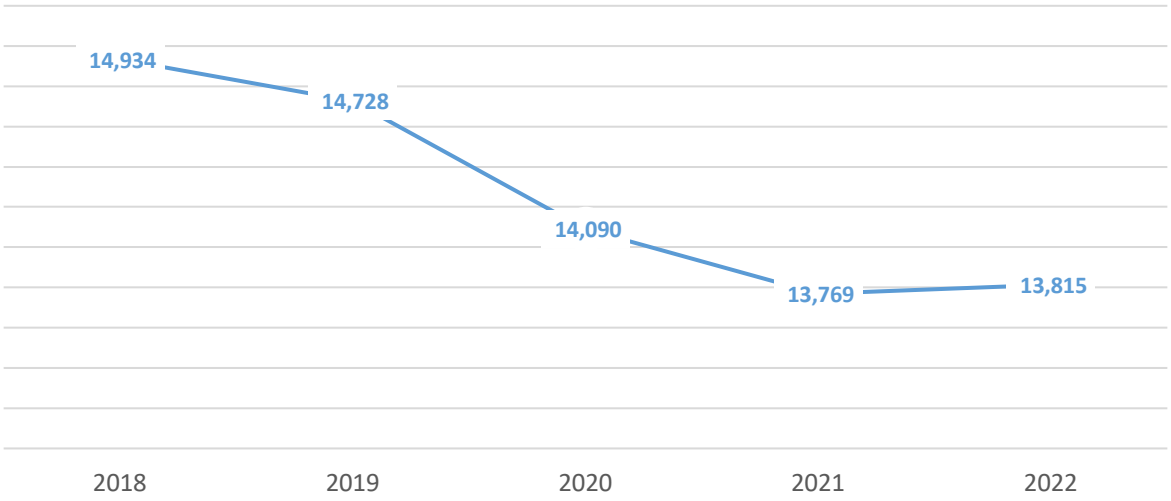


Source: Georgia Department of Public Health

Custodial Grandparents

Grandparents who take on the primary caregiving role often face unique challenges, including financial strain, as they may be living on fixed incomes or retirement savings. Furthermore, they may encounter health issues related to aging and experience increased stress from managing the demands of raising children later in life. This situation can also affect the children involved, as they may require additional support to cope with the absence of their parents and adjust to living with older caregivers. In the service area, data indicates that 13,815 grandparents are solely responsible for raising children. Over the past five years, the number of custodial grandparents has decreased by 7.49%. It should be noted that a slight increase (+0.33%) occurred in 2022.

Chart 76: Custodial Grandparent Trend (2018-2022)



Source: US Census Bureau (DP02)

Foster Children

For some children, the lack of nurturing relationships leads to an advanced level of instability due to removal from their home. Although in the best interest of the child, the removal from a home can be devastating and confusing. Once in foster care, data indicates that 54% of all children are in placement for more than 12 months. The longer the child is in placement, the more likely they will be moved from one home to another, placing them at risk of multiple negative social and emotional outcomes due to disrupted relationships with siblings and other relatives, friends, classmates, teachers, coaches, and religious leaders. Studies have proven that these early experiences can impact a child's brain development and lead to stress disorders that will continue into adulthood.

In 2023, data suggests that a total of 468 children were removed from their homes into foster care. Overall, 1,118 children were in care during 2023, a reduction of 0.89% from the 1,128 documented in 2022.

Table 69: Foster Children Counts by County (2023)

Area	2022 In Care	2023 In Care	2023 Removals
DeKalb	585	629	285
Gwinnett	408	341	119
Newton	80	82	35
Rockdale	55	66	29
REGION	**1,128**	**1,118**	**468**

Source: Fostering Court Improvements

The largest portion of the children removed from their homes were entered into the foster care system due to neglect (183). This was followed by caretaker substance abuse (96), inadequate housing (61), abandonment (58), child behavior (56), physical abuse (46), caretaker inability to cope (40), caretaker incarceration (36), and sexual abuse (11).

Table 70: Regional Reasons for Removal (2023)

Reason	Count
Caretaker Substance Abuse	96
Neglect	183
Inadequate Housing	61
Caretaker Inability to Cope	40
Physical Abuse	46
Caretaker Incarceration	36
Child Behavior	56
Abandonment	58
Sexual Abuse	11

Source: Fostering Court Improvements

Community Feedback

Among the 516 survey respondents, 58 stated that unsafe home environments, characterized by abuse and neglect, were primary conditions of poverty, with 21 identifying it as a barrier to economic security. Among the low-income residents polled, 25 stated that they had personally experienced abuse or neglect, with 18 reporting that no help was available in their time of need. These statistics underscore the severity of abuse and neglect within the community and highlight the significant impact on economic stability and personal well-being.

Supporting these quantitative findings, qualitative data reveals the deep challenges faced by individuals in unsafe home environments. One resident noted, "We have people that are having to live with others, even though they are being mistreated. They can't do anything about it if they want to keep a roof over their head." This comment highlights the difficult choices individuals must make between enduring abuse and maintaining basic shelter. Elderly abuse is another concern, as one respondent observed, "Elderly abuse can be seen when there are no caring relatives. It is hard to help in this situation unless you witness the abuse." This reflects the hidden nature of abuse and the challenges in providing timely assistance. Additionally, many abused individuals are not in a healthy mental state and are often unsure of where to turn for help. One respondent stated, "Many abused people are not in a healthy mental state and do not know what to do or where to turn for help."

Another significant issue raised in the qualitative data is the plight of children in abusive households. One respondent noted, "Children of abusive parents are at the mercy of the police and court system to assist them but are so often kept in that unsafe home. Abused people, both young and old need an advocate for them." This highlights the need for stronger advocacy and support systems to protect vulnerable children.

The lack of assistance for seniors is also a recurring theme, with one senior mentioning, "I'm a senior and live alone. My children (I have 2 sons) have their hands full caring for their families. They help with transportation when they can, but rarely are able to help financially." This comment underscores the isolation and financial struggles faced by seniors, further complicating their living situations and overall well-being.

Agency Data

Among the customers served in 2022, 685 were single female parent households, representing 57.81% of the total households. There were 18 single male parent households, making up 1.51% of the total. Additionally, 37 households consisted of adults without children, while 320 were single-person households. Traditional two-parent families accounted for 82 households, and 36 households contained multiple generations. Six households were classified as other types.

Seven customers were identified as displaced homemakers, which refers to individuals who have been primarily dependent on the income of another family member and can no longer rely on that income due to separation, divorce, or death. Additionally, one foster child was identified among the served households.

2024 COMMUNITY ASSESSMENT

Family Resources

Resource Name	Contact Information	Description
Academy for Family Empowerment, Inc.	770-918-8003	Provides counseling and support services to promote healthy family relationships.
Advocates for Children	770-387-1143	Provides residential housing, advocacy, counseling, and other support services to children who have been abused, neglected, or sexually assaulted.
A Beacon of Hope	404-937-3995	Provides abortion alternative counseling and parenting support to residents of DeKalb County.
Beverly Cunningham Outreach Program, Inc	404-862-5197	Provides counseling services to victims and survivors of domestic violence.
Caminar Latino	1-800-334-2833; 855-226-4627	Provides support and reflection groups, court accompaniment, assistance with temporary protective orders, access to shelters, legal services and counseling, DCS-referred/court mandated women's group, crisis intervention, and advocacy for LatinX women facing domestic violence.
CASA	404-874-2888	Provides advocacy services for children who have experienced abuse or neglect.
Children's Medical Services	888-457-4769	Coordinates specialty care services or children with chronic medical conditions.
Families First	404-853-2800	Provides counseling, education, and support to expectant mothers, new parents, foster children, and families in crisis living in DeKalb County.
Foster Care Support Foundation	770-641-9591	Provides free clothing, infant equipment, and developmental toys to children in foster care through a partnership with the Georgia Division of Family and Children Services.
Georgia Division of Family and Children Services	404-657-3459	Provides protection from child and elder abuse through the foster care program.
Haven of Light	404-594-2836	Provides protection from domestic violence to residents in Rockdale County.
International Women's House	770-413-5557	Provides a safe haven and supportive services for immigrant and refugee women and children who are victims of domestic violence and abuse.
Positive Growth, Inc.	404-569-3742	Provides traditional housing and elf-sufficiency assistance to young adults transitioning out of the foster care system.
The Potter's House	404-588-4000	Provides various therapeutic services to assist victims of domestic violence, sexual assault, and other forms of family trauma.
Project Renewal	770-860-1666	Provides protection from domestic violence to residents in Rockdale County.
The Refuge Center	770-922-5939	Provides information and support designed to assist with decisions concerning abortion, adoption parenting, ultrasounds, and post-abortion healing.
Women's Resource Center to End Domestic Violence	404-688-9436	Provides secure and confidential temporary housing for women and children who are victims of domestic violence.

Conclusion: Strengths
The Georgia Department of Public Health documented a total of 23,970 births in 2022. Based on five-year averages, it is estimated that 23,830 women are pregnant during any given year. This consistent birth rate provides a stable demographic foundation for community planning and development. Additionally, teen births have decreased by 17.13% over the past five years, reflecting successful public health interventions and education programs aimed at reducing teenage pregnancies. Furthermore, custodial grandparent households have decreased by 7.49%, indicating potential improvements in family stability and support systems for children. Notably, the number of children in foster care decreased by 0.89% between 2022 and 2023, suggesting a positive trend in family preservation and child welfare efforts.

Conclusion: Weaknesses
Despite these strengths, significant challenges remain. The report highlights that 897 Georgia citizens lost their lives due to domestic violence in the past five years. While the data indicates fluctuations, the overall trend shows a troubling increase of 24.52% during this period, with firearms being the cause of death in 81% of these cases. This alarming statistic underscores the urgent need for enhanced domestic violence prevention and intervention strategies.

Over the past five years, the number of births in the region has decreased by 1.96%, which may impact the region's demographic structure and future workforce. Additionally, unwed mother births have increased by 4.24% over the same period.

Furthermore, there are 13,815 custodial grandparent households in the region, which, while decreasing, still represents a significant number of families where grandparents are primary caregivers, often indicating underlying family instability.

The presence of 1,118 children in foster care as of 2023 is another critical concern. Children were primarily removed from their homes due to neglect (31.17%), followed by caretaker substance abuse (16.35%), inadequate housing (10.39%), abandonment (9.88%), child behavior issues (9.54%), physical abuse (7.84%), caretaker inability to cope (6.82%), and sexual abuse (1.87%). These statistics highlight the multifaceted nature of family-related challenges in the region, necessitating comprehensive support services to address the root causes of family disruption and ensure the well-being of all children.

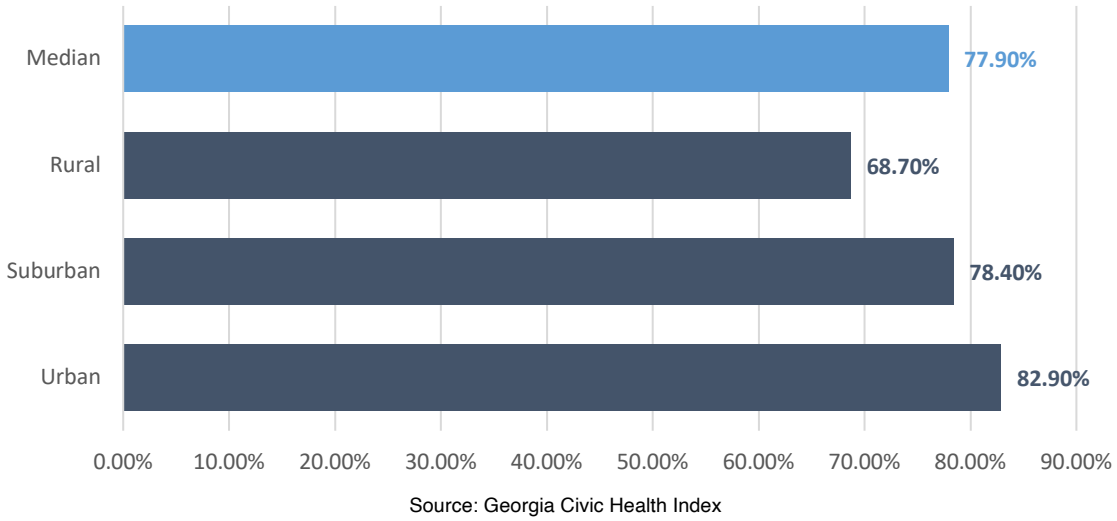
Community Engagement

The National Conference on Citizenship conducted a study on civic health in Georgia during 2023, building on the foundation set by earlier editions in 2013 and 2019. This report dives into the dynamics of how Georgians engage within their communities and political spheres, revealing changes in civic participation patterns and how these vary by demographics and geography. It benchmarks Georgia's civic engagement against other states and national averages, serving as a catalyst for discussions and actions aimed at enhancing civic life. The report covers social connectedness, community involvement, political action, and confidence in institutions, underscoring the importance of civic participation for societal and community welfare.

Social Connectedness

Engagement with friends and family is a key indicator of social connectedness. In Georgia, a high percentage of individuals (77.90%) frequently spend time with their social circles, suggesting strong personal relationships. This pattern of interaction plays a vital role in fostering community bonds and individual well-being. Urban residents, with an 82.9% engagement rate, tend to interact more than their suburban (78.4%) and rural (68.7%) counterparts. Females were also slightly more inclined to spend time with family and friends (79.80%) than males (75.80%).

Chart 77: Georgian's Spending Time with Family and Friends (2023)

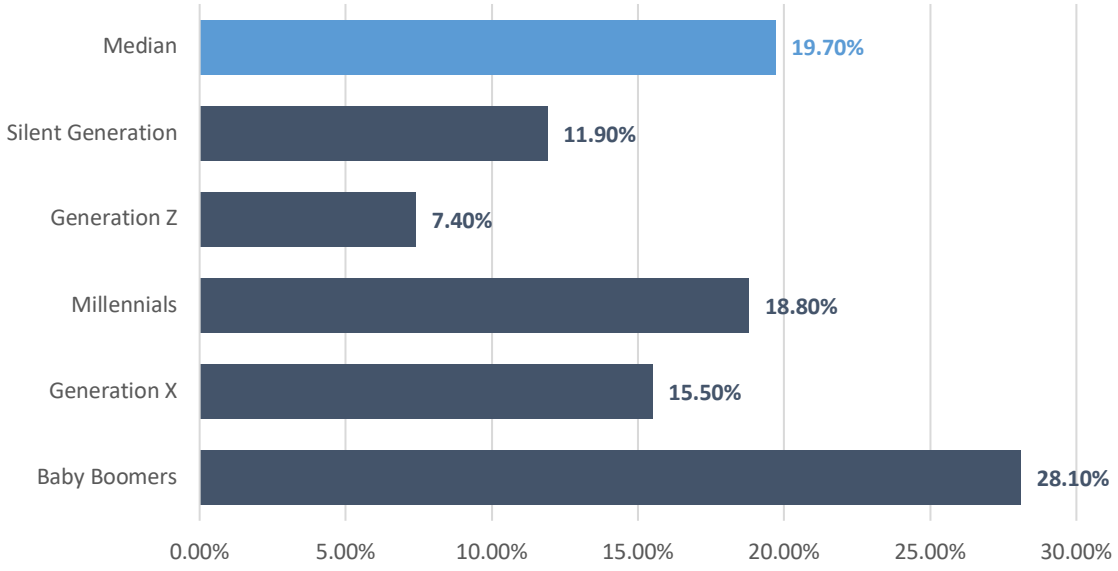


Source: Georgia Civic Health Index

Income levels were also noted as a factor, with 72.80% of individuals and families with incomes below $35,000 reporting frequent time with family and friends as opposed to 82.1% of those with incomes greater than $75,000.

In Georgia, social engagement with neighbors is lower than the national average, with 19.7% interacting frequently compared to 26.9% nationally. The older generations report more neighborly interaction, particularly those born between 1931-1945, with 29.6% engaging with neighbors. This rate declines across younger generations. Geographically, rural residents (20.2%) interact more with neighbors than urban (16.4%) and suburban (18.1%) counterparts. Lower-income individuals tend to have slightly more neighborly engagement than those with higher incomes.

Chart 78: Georgia Neighborly Interactions by Age Group (2023)



Source: Georgia Civic Health Index

Georgia residents were noted as being less likely to discuss political, societal, or local issues with neighbors than they are with family and friends. Only 6.2% of the Georgian's report frequent engaging with neighbors in this way, compared to 31.60% who discuss these issues with family and friends.

The practice of exchanging favors with neighbors was noted as being less common, with only 7.7% reporting they often do so. This is slightly lower than the 10% seen nationally. The older, Silent Generation is more inclined to help out neighbors (13.80%) than Baby Boomers (12.00%), Generation X (6.80%), Generation Z (4.6%), and Millennials (4.3%). Exchanging favors was also more common among those in rural areas (12.70%) than those in urban (8.00%) and suburban (5.50%) communities.

An estimated 14.50% of all residents were noted as working with neighbors to improve the community, which is lower than the national average of 18.00%. Education levels were noted as being a factor for this indicator, with nearly one-quarter (24.30%) of college graduates reporting engagement of this type as compared to 15.90% of those who attend some college and 8.90% of those who have a high school diploma, but without any college education.

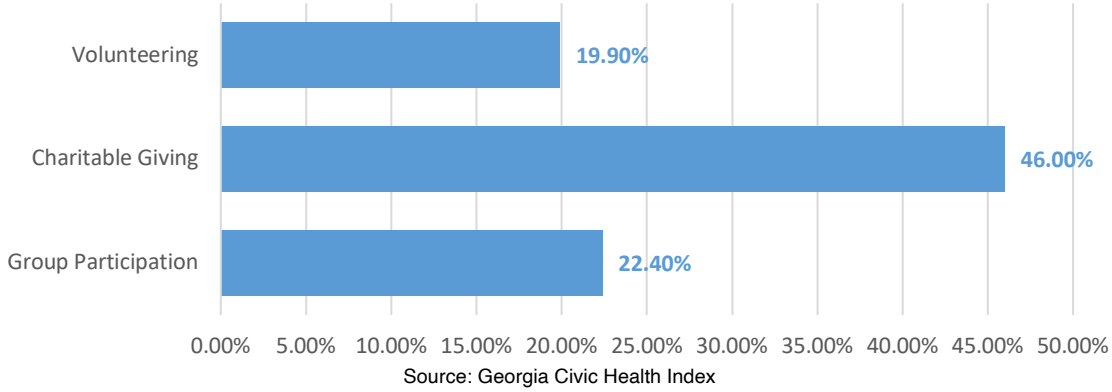
Community Involvement

Community involvement refers to the efforts of local residents to contribute to the welfare and progress of their communities through volunteerism, charitable giving, and group participation. Georgia's engagement levels fall below the national average, highlighting an opportunity for innovative strategies to motivate and enable residents to actively shape their communities into more connected and dynamic environments.

The data suggests that Georgia ranks 45th in the nation for volunteerism, a decrease from the previous report when the state ranked 44th. Only 19.90% of the state's residents report involvement in volunteer activities, a 24.91% decrease from the 26.5% documented in the 2019.

Volunteerism was noted as varying across demographics. Generation X leads with 27.1% participation, outpacing Millennials and Generation Z, who volunteer at rates of 19.7% and 18.3%, respectively. Women are more active volunteers at 22.3%, compared to 17.2% of men. By race, 21.9% of White citizens volunteer, slightly more than the 17% of those identifying as Black/African American. Geographically, suburban residents volunteer the most at 22.1%. This reflects a shift from 2017, where urban volunteerism was higher.

Chart 79: Georgia Community Involvement (2023)



Source: Georgia Civic Health Index

Charitable giving in Georgia, encompassing financial support to various organizations and causes, increased slightly from 45% in the previous report to 46% in 2023. Despite the improvement, Georgia is ranked 41st nationally in this area. Notably, the state has a marginally higher rate of political donations than the national average. Contributions are more prevalent among the Silent generation and higher-income, more educated demographics, with females donating slightly more than males.

Older generations, particularly the Silent Generation, demonstrates a higher propensity for donating, with 58.2% contributing to charitable or religious organizations, in contrast to just 18.2% of Generation Z. Gender differences are also evident, with 48.7% of females donating compared to 43% of males. Finally, 49.9% of White residents donate, a higher rate than the 36.7% of those identifying as Black/African American.

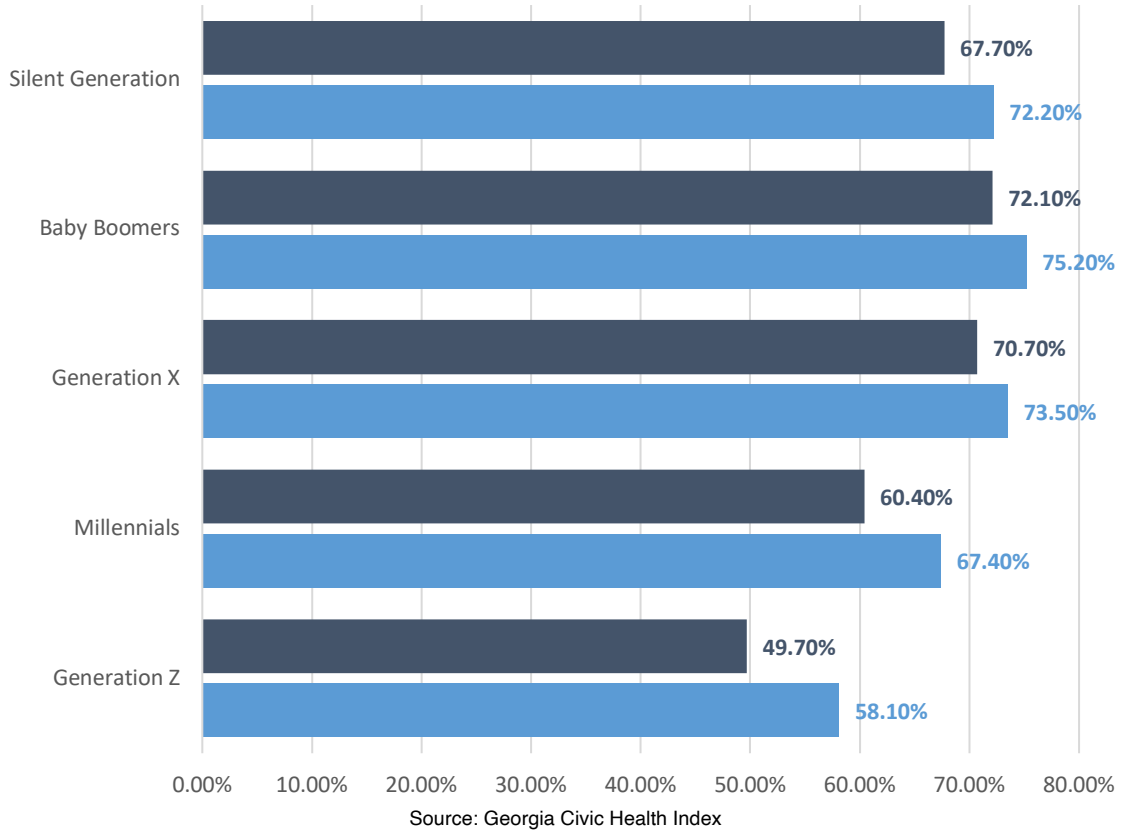
Group participation in Georgia stands at 22.4%, ranking 38th nationally and showing improvement from 49th in 2017. Participation trends upwards with increases in age, income, and education. Women are slightly more likely to be involved in groups than men, 23% versus 21.6%. Also, there's a notable difference in participation based on race and location, with 25.9% of White, non-Hispanic residents involved in groups compared to 15.2% of Black, non-Hispanic residents, and suburban areas showing higher participation rates than rural and urban areas.

Political Action

Georgia's political action, including voter registration and turnout, has aligned with national averages this year, marking an improvement. However, Georgians show lower engagement in consuming political news and using consumer power for political or societal reasons. Political engagement correlates positively with higher education and income levels. There's notable variation in political activities among different generations and urbanization levels, with mid-life generations showing the most engagement.

The recent report revealed significant progress in Georgia's voter engagement, with registration at 70.7%, up from 62% in 2010, and a 66.1% voting rate. These figures align closely with national averages and mark an improvement in state rankings for both voter registration and turnout. Voter engagement correlates with higher income and education levels. Notably, older generations exhibit higher turnout rates, with variances across demographics indicating diverse participation patterns.

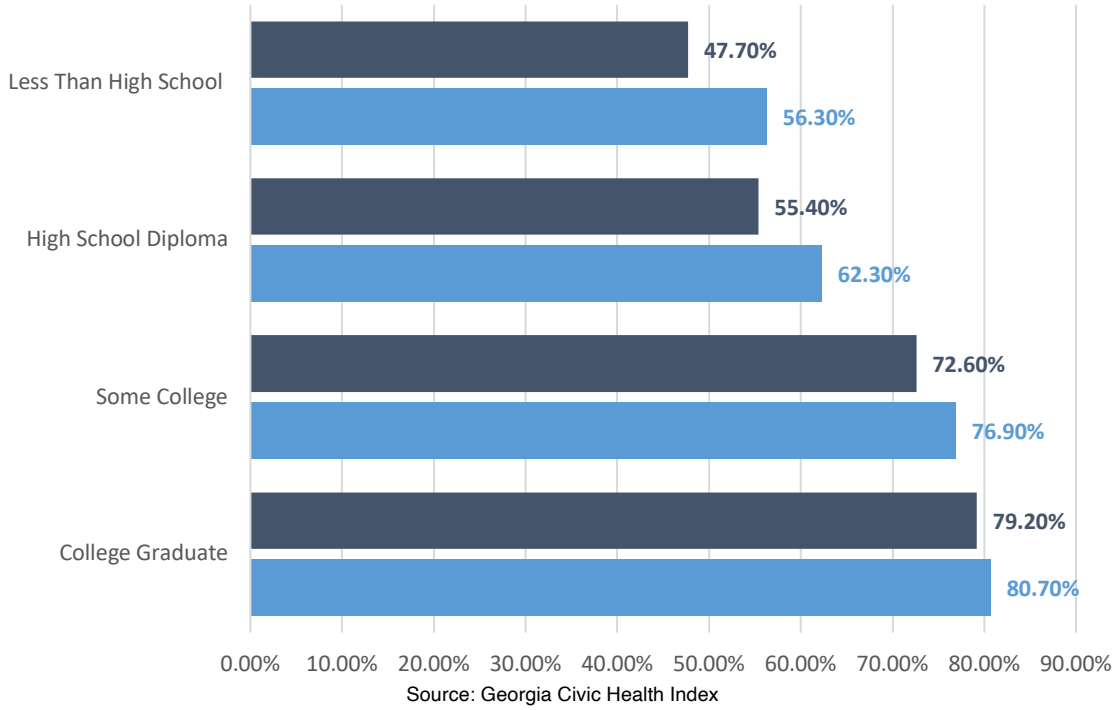
Chart 80: Georgia Voting by Age Group (2023)



Source: Georgia Civic Health Index

Education levels were also noted as a factor, with college graduates being much more likely to register (80.70%) and vote (79.20%) than those with lower levels of educational attainment.

Chart 81: Georgia Voting by Age Group (2023)



Source: Georgia Civic Health Index

An estimated 8.2% of residents attend public meetings, aligning with the national average. Engagement in contacting public officials rose to 9.6% in the latest report, improving Georgia's rank from 49th to 35th nationally. Trends show higher participation among those with more education and income. The state faces challenges in digital access, affecting communication with officials. Demographic trends reveal variations in engagement, with higher rates among older generations, men contacting officials more than women, and suburban residents being more active than their urban and rural counterparts.

Data indicates that more than half (54.3%) of the state's residents participate in local elections. Voting in local elections correlates with age, education, income, and urbanization. Baby Boomers exhibit the highest participation rate (61.7%), while Generation Z shows the lowest (30.1%). Similarly, individuals with higher education levels and incomes are more likely to vote locally, with 74% of those holding a bachelor's degree or higher participating compared to 42.9% of high school diploma holders. Additionally, those earning $75,000 or more have a higher local election turnout (64.8%) compared to those earning less than $35,000 (40.9%). Notably, rural residents demonstrate lower participation rates (51%) compared to their urban (69.5%) and suburban (57.4%) counterparts.

In recent years, Georgia's engagement in sharing political, societal, or local views online or on social media has mirrored or fallen below the national average. Only 5.4% of Georgians frequently engage in this manner, compared to 6.2% nationally, ranking Georgia 35th in this indicator. Similarly, Georgia lags behind the national average in frequently reading, watching, or listening to news about political, societal, or local issues, with only 60% engaging in this activity compared to the national rate of 67.6%. This places Georgia 51st in the nation for this indicator. Engagement in these activities tends to increase with age, income, and education levels.

Among generational groups, Generation Z is more likely to post and share political information frequently (7.8%) compared to Millennials (4.1%) and Generation X (3.9%). However, Baby Boomers (6.4%) and the Silent Generation (5%) exhibit higher rates of frequent online posting compared to some younger generations. Education level also plays a role, with those holding a bachelor's degree (5.7%) more likely to post frequently than those with a high school diploma (3.2%). Additionally, urban residents (6%) are more likely to post frequently than suburban (4.8%) or rural residents (4.6%).

In terms of consuming news about political, societal, or local issues, suburban residents are more active than urban or rural residents, with white residents (65.5%) more likely to engage in this manner compared to black residents (51.1%). These trends suggest variations in online engagement based on demographic factors such as age, education, race, and urbanization.

In Georgia, there is a slightly lower rate of engaging in political actions such as buying or boycotting a product or service compared to the national average. Approximately 14.4% of Georgians report participating in this form of political action, ranking the state 42nd nationally, while the national average stands at 17.1%. The likelihood of buying or boycotting a product or service tends to increase with income and education levels. For instance, 8.2% of residents with a high school education engage in this activity, whereas 24.5% of residents with a bachelor's degree or higher do so.

There are notable differences based on race, with white Georgians (16.4%) being more likely to participate in buying or boycotting compared to black Georgians (10.4%). Geographically, urban residents are the most likely to engage in this form of political action, with 15.8% reported participation, while rural Georgians are the least likely, at 8.5%.

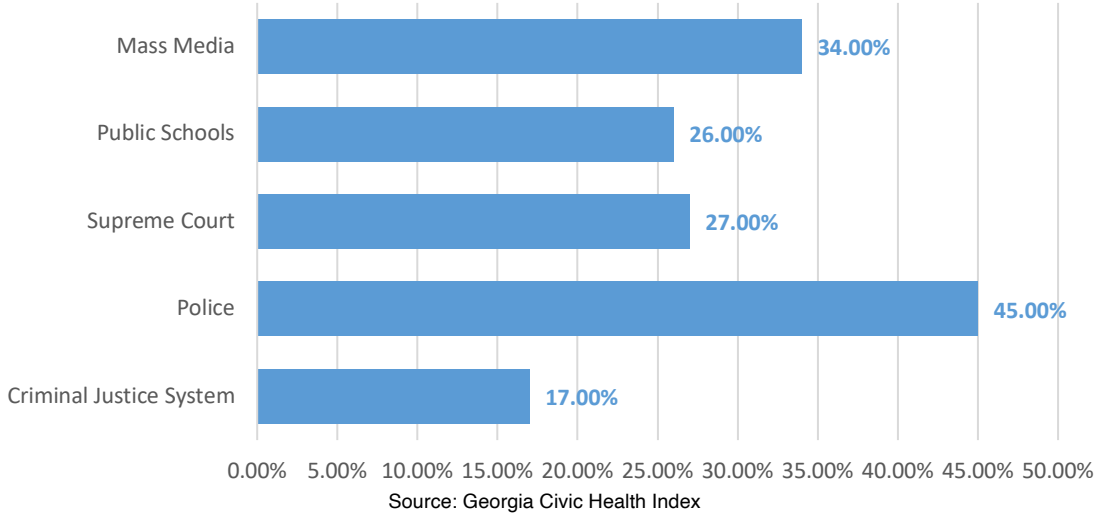
These patterns may be influenced by factors such as age and education, with younger and more educated individuals potentially being more inclined to participate. Additionally, access to information and resources in rural areas and among lower-income populations may play a role in their lower rates of engagement in buying or boycotting as a political action.

Confidence in Institutions

Over the past two decades, public trust in institutions has been on a decline, reaching an all-time low in 2023. Particularly, confidence in the federal government has seen a significant dip, with all three branches—presidency, Congress, and the U.S. Supreme Court—reaching record lows. Despite modest improvements in 2023, none of these institutions experienced substantial shifts. Furthermore, trust in other key institutions, including big business, large technology, police, and public schools, either tied or dipped below their previous record lows in 2023.

According to Gallup data, Americans' confidence in public and private institutions declined significantly in 2022, with no improvements observed in 2023. Confidence in Congress dropped from 12% in 2021 to 7% in 2022, showing only a slight improvement to 8% in 2023. Similarly, confidence in the U.S. Supreme Court and the presidency experienced significant declines from 2021 to 2022 but rebounded slightly in 2023.

Chart 82: Georgia Confidence in Institutions (2023)



Source: Georgia Civic Health Index

Polling by the Pew Research Center highlights public dissatisfaction with the U.S. government's handling of taxpayer money and its responsiveness to the needs of ordinary Americans and specific demographic groups. The majority of Americans feel that the government does too little for middle- and lower-income individuals, children, retired people, people with disabilities, and rural residents. Conversely, most believe that the federal government does too much for higher-income individuals. Despite widespread dissatisfaction with the federal government, trust in state and local governments remains relatively higher. Gallup data show that Americans are much more trusting of their state and local governments compared to any branch of the federal government. This trend is consistent with perceptions of how things are going at the state and local levels, where satisfaction levels are significantly higher than those at the national level.

Pew data also reveal skepticism among Americans regarding political candidates' motivations for seeking office, with a majority believing that many candidates run for office to serve their own interests rather than the community's. These trends underscore the challenges faced in rebuilding public trust in institutions and restoring confidence in the political process.

From 2021 to 2022, confidence in the criminal justice system dropped by six percentage points, from 20% to 14%, with a slight rebound to 17% in 2023. Similarly, confidence in the police experienced an eight-point decline over the same period, falling from 51% in 2021 to 43% in 2023. This represents an all-time low in confidence in the police since Gallup began measuring it.

The U.S. Supreme Court also saw a significant decline in public confidence, with only 25% of Americans expressing "a great deal" or "quite a lot" of confidence in 2022, the lowest percentage on record. While there was a slight improvement to 27% in 2023, this is down from 36% in 2021 and a high of 56% in 1988. Additionally, a growing number of Americans, 45% in 2022, believe the Supreme Court has too much power, compared to 25% in 2020.

The data further reveal notable disparities in opinion about the U.S. Supreme Court across political, racial, and age groups. The partisan gap in favorable views of the Supreme Court is at its widest point in 35 years of polling, with only 38% of black Americans holding a favorable view compared to 52% of Hispanics, 49% of whites, and 46% of Asians. Moreover, older adults are more likely than younger adults to have favorable views of the Supreme Court, with approximately six in 10 Americans aged 50 and older viewing the court favorably, compared to 44% of those aged 30 to 49 and 32% of adults under 30. These disparities underscore the deepening divisions in public perception of key institutions and highlight the challenges in restoring public trust and confidence.

Confidence in public schools experienced a significant decline in recent years, particularly following a double-digit increase during the COVID-19 pandemic. After reaching a peak of 41% in 2020, confidence dipped to 28% in 2022 and further decreased to tie an all-time low of 26% in 2023. This represents a notable decrease of 15 percentage points from 2020 and six percentage points from 2021. Historically, the highest level of confidence in public schools was recorded in 1975 at 62%, while the lowest level was observed in 2014.

The data also reveal a stark partisan divide regarding confidence in public schools. In 2023, only 9% of Republicans expressed "a great deal" or "quite a lot" of confidence in public schools, compared to 43% of Democrats. This disparity underscores the polarization surrounding perceptions of public education and highlights the challenges in fostering widespread trust and support for educational institutions.

Confidence in mass media, including newspapers, television, and radio, experienced a decline in recent years, with just 34% of Americans expressing "a great deal" or "a fair amount" of confidence in their reporting of the news in 2022. Additionally, more than one-third of Americans (38%) reported having no confidence in the media that year. This trend highlights a significant level of skepticism and mistrust among the public regarding the accuracy and fairness of media reporting.

The data also reveal a substantial partisan gap concerning confidence in mass media. In 2022, while 70% of Democrats reported having high levels of confidence in mass media, only 14% of Republicans expressed the same sentiment. Furthermore, a majority of Republicans indicated that they had no trust at all in the media for the third consecutive year. This polarization underscores the challenges in fostering trust and credibility across different political ideologies.

When examined by medium, confidence in newspapers and TV news saw declines, with only 16% of Americans expressing confidence in newspapers and 11% in TV news in 2022. While there was a slight rebound in confidence for TV news in 2023 (14%), it remained below the levels reported in 2021. These percentages represent all-time lows for both institutions, highlighting a broader trend of declining confidence in traditional media sources. Despite historical peaks of confidence in newspapers (51% in 1979) and TV news (46% in 1993), the recent data indicate a notable erosion of trust in these mediums over time.

Veterans

Although not included in the Civic Health Index Report, there can be no greater form of civic engagement than participation in military services. According to the U.S. Census Bureau, an estimated 88,172 veterans reside in the service area. This accounts for 6.08% of all adults in the county. Among the veterans living in the county, 54.10% participated in the Gulf Wars, 26.97% participated in Vietnam, 3.12% participated in the Korean Conflict, and 0.97% participated in World War II.

Table 71: Veteran Counts by Age Group (2022)

Area	18-34	35-54	55-64	65-74	75+	Total
DeKalb	3,081	9,894	8,918	7,281	5,552	34,726
Gwinnett	3,918	12,591	8,818	8,133	6,316	39,776
Newton	610	2,156	1,609	1,572	1,228	7,175
Rockdale	374	2,152	1,542	1,502	925	6,495
REGION	**7,983**	**26,793**	**20,887**	**18,488**	**14,021**	**88,172**

Source: U.S. Census Bureau ACS (S2101)

The region's veterans were primarily male (85.02%), Black (51.23%), non-Hispanics (95.57%) between the ages of 35 and 54 (30.39%) and 55 to 64 (23.69%).

Crime Rates

Crime rates are a critical aspect intertwined with poverty, reflecting the complex interplay between socioeconomic factors and community well-being. High crime rates often coincide with areas experiencing economic hardship, exacerbating the challenges faced by individuals and families living in poverty. This correlation arises from various underlying factors, including limited access to educational and employment opportunities, inadequate social services, and strained community resources. Also, crime can perpetuate a cycle of poverty by hindering economic development, deterring investment, and eroding social cohesion.

Beyond its direct impact on individuals and families, crime rates also significantly influence community engagement. Heightened concerns about safety and security can undermine residents' trust in local institutions, dampen civic participation, and impede efforts to foster a sense of belonging and collective responsibility within neighborhoods. Therefore, understanding and addressing this barrier is an essential component of comprehensive strategies aimed at alleviating poverty and promoting thriving, inclusive communities.

According to the most recent Georgia Bureau of Investigation (GBI) Crime Index Report, there is one crime index offence occurring every 2 minutes and 35 seconds in the state. When broken down by category, the report highlights the prevalence of both violent and non-violent crimes, with a violent crime occurring approximately every 14 minutes and 19 seconds, while a non-violent crime occurs roughly every 3 minutes and 10 seconds. The report further dives into specific types of crimes, such as murder, robbery, rape, aggravated assault, burglary, motor vehicle theft, arson, and human trafficking, providing insights into the frequency of each offense.

For instance, murder incidents are reported at a rate of approximately one every 10 hours and 37 minutes, while robberies occur approximately every 2 hours and 4 minutes. Similarly, aggravated assault incidents happen at a rate of about one every 18 minutes and 48 seconds, highlighting the prevalence of violent crimes in the state. On the other hand, property crimes like burglary, larceny-theft, motor vehicle theft, and arson also contribute significantly to the overall crime index, occurring at various intervals throughout the day.

The data further breaks down the reported crimes by type and provides the percentage of total crimes represented by each category, along with the rate per 100,000 residents. For example, murder accounts for 0.41% of total crimes, with a rate of 8.2 per 100,000 residents. Rape, robbery, aggravated assault, burglary, larceny-theft, motor vehicle theft, arson, and human trafficking are also analyzed in a similar manner, offering a comprehensive overview of the crime landscape in Georgia. Overall, the data underscores the importance of addressing crime rates to ensure public safety and enhance community well-being.

The crime rate is a statistical measure that represents the number of reported crimes per 100,000 population within a specified area over a given period, typically a year. A higher crime rate suggests a greater risk of criminal incidents occurring, which can negatively impact residents' safety and overall well-being. Conversely, a lower crime rate indicates a safer environment with fewer reported criminal offenses.

The regional crime rate of 13.67. This is slightly higher than the median rate of 13.03 for all Georgia counties, suggesting the region is somewhat less safe than other areas in the state. The highest crime rate in the DeKalb County, at 36.07. This is followed by 17.35 in Newton, 3.39 in Gwinnett, and 0.86 in Rockdale.

Table 72: Crime Rates and Index Crimes (2022)

Area	Crime Rate	Index Crimes
DeKalb	36.07	27,732
Gwinnett	3.39	3,248
Newton	17.35	1,987
Rockdale	0.86	79
REGION	**13.67**	**33,046**

Source: GBI Crime Index Report

Index crimes, often referred to as "Part I" crimes, are a collection of eight specific crimes that the Federal Bureau of Investigation (FBI) has designated for inclusion in its Uniform Crime Reporting (UCR) Program to serve as an indicator of the overall crime rate in the United States. These crimes are divided into two categories: violent crimes and property crimes. A total of 33,046 index crimes were committed in the region during 2022, the largest single concentration (27,732) being in DeKalb County.

Table 73: Violent Index Crimes by Type and County (2022)

Area	Murder	Rape	Robbery	Assault
DeKalb	151	325	1,021	3,907
Gwinnett	3	96	64	267
Newton	6	47	25	380
Rockdale	6	17	2	37
REGION	**166**	**485**	**1,112**	**4,591**

Source: GBI Crime Index Report

Violent crimes, a serious category of offenses within the index crimes, are characterized by the use of force or the threat of force. These offenses not only threaten the safety of individuals but also the stability of communities. The impact of such crimes can be seen in the statistical data collected across various regions, which emphasizes the prevalence and distribution of these criminal acts.

Murder and non-negligent manslaughter, the most severe of violent crimes due to the irreversible act of taking a life, have been reported a total of 166 times in the region. A strong majority of these (90.96%) occurred in DeKalb County.

Rape, an invasive crime that severely impacts the lives of survivors, had 485 reported instances. The largest number of these occurred in Dekalb (325), with 96 occurring in Gwinnett.

Robbery, an offense combining theft with the element of fear or force, was reported 1,112 times across the region. Once again, DeKalb County recorded the highest number of such offenses at 1,021.

Assault, representing attacks intended to cause serious bodily harm, stands out as the most frequently reported violent crime, with a regional total of 4,591 instances. This was primarily in DeKalb County (3,907).

Table 74Tech2: Property Index Crimes by Type and County (2022)

Area	Burglary	Larceny	Motor Theft	Arson
DeKalb	2,634	15,978	3,576	107
Gwinnett	285	2,292	222	8
Newton	221	1,074	224	9
Rockdale	12	3	2	0
REGION	**3,152**	**19,347**	**4,024**	**124**

Source: GBI Crime Index Report

Property crimes represent a category of offenses that primarily involve the unlawful appropriation of property belonging to another, typically without force or threat against the victim. These crimes, which are integral to the index crimes tracked for statistical purposes, consist of four main types:

Burglary is the unlawful entry into a structure, such as a home or business, with the intent to commit a theft or felony. This crime is considered a severe violation due to the breach of privacy and the sanctity of personal or commercial premises. In the area served by the organization, a total of 3,152 offenses occurred in 2022, the largest concentration being in DeKalb County (2,634).

Larceny-Theft is characterized by the illegal taking of property from another person without direct confrontation or the use of force. This category is quite broad and includes various forms of theft, such as shoplifting, stealing from a building, and bicycle thefts, but excludes person-to-person crimes like pickpocketing or purse snatching. In the region, a total of 19,347 instances of larceny-theft were reported. DeKalb County had a notably high number of larceny-theft cases at 15,978.

Motor Vehicle Theft entails the unauthorized taking or attempted taking of a motor vehicle, such as cars, motorcycles, and trucks. The impact of these thefts is significant due to the value of vehicles and their role in personal and commercial activities. The regional data shows a total of 4,024 motor vehicle thefts, with DeKalb County experiencing 3,576 instances, indicating that this type of property crime is a considerable concern in that area.

Arson involves the intentional setting of fire to structures, vehicles, or other personal property, potentially motivated by reasons ranging from vandalism to insurance fraud. This crime is particularly dangerous due to the risk it poses to human life and property. The region reported a total of 124 arson cases, with DeKalb County reporting 107 instances, which is the highest among the counties listed.

Community Feedback

When asked about the primary barriers low-income residents face when trying to escape poverty, 83 survey respondents cited a lack of social support. Among the low-income residents polled, 107 stated they had experienced barriers due to a lack of social support, and 87 of these individuals could not find any help. This lack of social support creates an environment where residents feel isolated and unable to rely on community networks for assistance. Some residents explained that they don't seek social support because of increasing crime rates. One stated, "People don't feel safe inside or leaving home because of the increase of crime, especially against the elderly." Another added, "Crime is getting worse."

Discrimination was identified as a barrier by 56 survey respondents. This issue permeates various aspects of life for low-income residents, impacting their ability to secure jobs, housing, and other essential needs. One respondent shared, "It's still so much discrimination for it to be 2024. Discrimination contributes to a lot of the situations at hand and for the lack of resources in some cases." This comment underscores the ongoing struggle against systemic biases that hinder economic and social mobility. The qualitative data also reveals personal experiences of discrimination, which exacerbate the difficulties faced by these individuals in escaping poverty.

Criminal records were identified as a barrier by 57 respondents. Among the low-income residents polled, 27 stated they had personally experienced barriers associated with criminal records, and 22 of these individuals could not find any help. The challenges faced by individuals with criminal records are significant, as one resident explained, "I've come to realize that one of the reasons the system doesn't always work as smoothly as it should, is because of wrongful arrests." This highlights the issues within the criminal justice system that leave individuals struggling to clear their names and return to productive lives. Another resident noted, "Newton County penal system for adults and juveniles is designed to oppress us. When you serve your time and are released, you're still in jail. Paying probation when you're a felon doesn't make sense." These comments reflect the systemic barriers that continue to impact individuals long after they have served their sentences, contributing to ongoing economic and social challenges.

Agency Data

Among the customers served in 2022, 17 were identified as veterans. These individuals were predominantly non-Hispanic (94.12%), Black (94.12%), and males (52.94%), with a median age of 45.12 years.

A total of 151 individuals were documented as registered voters. Voter registration is an important indicator of community engagement and civic participation, which are crucial for advocating for policy changes and resources that can help alleviate poverty. Engaged citizens are more likely to vote for leaders and policies that address economic disparities, thereby contributing to broader efforts to combat poverty within their communities.

Only one individual was documented as an ex-offender. This is relevant because individuals with criminal records often face significant barriers to employment, housing, and social services, which can perpetuate cycles of poverty and limit their ability to reintegrate successfully into society. Understanding the challenges faced by ex-offenders helps in developing targeted support and resources to assist their transition and reduce recidivism.

Community Engagement Resources

Resource Name	Contact Information	Description
Boy Scouts of America	www.scouting.org	Prepares boys to make ethical and moral choices through training in responsible citizenship, character development, and participation in a wide range of outdoor activities, educational programs, and career-oriented programs that promote community engagement.
Boys and Girls Club	Bgca.org	Provides youth recreational activities to support community engagement.
County Parks and Recreation Departments	See local county website	Provides recreational facilities and activities that promote community engagement.
Girl Scouts of the USA	www.girlscouts.org	Prepares girls to empower themselves and promotes compassion, courage, confidence, character, leadership, entrepreneurship, and active citizenship through activities involving camping, community service, learning first aid, and earning badges by acquiring practical skills.
Habitat for Humanity	habitat.org	Provides volunteer opportunities that promote social interaction while improving the housing infrastructure of the local community.
Kiwanis Club	www.kiwanis.org	Promotes social interaction and involvement in meeting community needs.
Senior Centers		Provides community engagement opportunities to senior citizens at local center in each county. For those who are homebound, home-based services (i.e. Meals on Wheels) provide well-checks and socialization.
YMCA	ymcaatlanta.com	Provides youth recreational activities to support community engagement.

Conclusion: Strengths
Nearly half (46%) of all Georgia residents engage in charitable giving, showcasing a spirit of generosity and altruism within the community. This percentage reflects an increase from the 45% reported in 2019, indicating a growing commitment to supporting charitable causes and initiatives. Furthermore, 24% of all Georgia residents report participating in groups, marking an improvement from the state's previous rank and highlighting increased community engagement and involvement.

The state boasts a commendable voter participation rate of 70%, an increase from the 62% documented in 2010. This significant participation in the electoral process underscores the community's dedication to shaping its collective future through informed decision-making and advocacy. Additionally, with 77.09% of all Georgia residents spending time with family and friends, the community values social connections and relationships, promoting a sense of belonging and interconnectedness among its members.

According to the U.S. Census Bureau, an estimated 88,172 veterans reside in the service area, accounting for 6.08% of all adults in the county. The majority of these veterans (54.10%) participated in the Gulf Wars, 26.97% served in Vietnam, 3.12% in the Korean Conflict, and 0.97% in World War II. The veterans are predominantly male (85.02%), Black (51.23%), and non-Hispanic (95.57%). They are mostly between the ages of 35 and 54 (30.39%) and 55 to 64 (23.69%). The distribution across the counties shows Gwinnett with the highest number of veterans at 39,776, followed by DeKalb with 34,726, Newton with 7,175, and Rockdale with 6,495.

Conclusion: Weaknesses
Despite its strengths, the community also faces certain challenges that impact social cohesion and community engagement. The decline in volunteerism from 24.91% in 2019 to 19.90% is a concerning trend earning a rank as 45th in the nation. This underscores the need for renewed efforts to encourage and support volunteer initiatives within the community.

Additionally, the relatively low percentage (14.50%) of Georgia residents working with neighbors to improve the community, compared to the national average of 18%, suggests a potential lack of grassroots community involvement and collaboration. Similarly, the lower rates of exchanging favors (7.7%) and social engagement with neighbors (19.7%) further highlight challenges in fostering strong interpersonal connections and collective action at the local level.

The regional crime rate of 13.67 is higher than the median rate for all Georgia counties (13.03), suggesting that the region is somewhat less safe. DeKalb County, in particular, has the highest crime rate at 36.07, significantly above the regional and state averages. High crime rates can undermine residents' trust in local institutions, dampen civic participation, and impede efforts to foster a sense of belonging and collective responsibility within neighborhoods. This can hinder the community's overall well-being and economic development. Crime can perpetuate a cycle of poverty by deterring investment, hindering economic development, and eroding social cohesion. Addressing crime rates is essential for promoting public safety, community well-being, and economic growth.

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY



SECTION 8

DATA SOURCES

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Survey Data

Question 1: How would you classify yourself? – 416 Responses

Board Member	3
Staff Member	19
Volunteer	7
Community Member	431
Business/Organization/Government	24

Question 2: Which sector do you represent on the governing body? (Board only) – 3 Responses

Community Members	2
Government	1
Local Businesses/Organizations	0

Question 3: Which option best classifies your role in the organization? (Staff only) – 18 Responses

Executive/Administrative Team	1
Finance	2
Human Resources	1
Public Relations	1
Program Management	2
Program Staff	9
Other	2

Question 4: Which community/communities do you reside in and/or serve? – 493 Responses

DeKalb	329
Gwinnett	100
Newton	54
Rockdale	48

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Question 5: What is the name of your organization? (Stakeholders Only) – 21 Responses

- 1st Place Hotels and Properties
- Allegre Point Senior Residences
- Amani Women Center
- Atlanta VA
- DisABILITY Kink
- East Lake Foundation
- Georgia Piedmont Technical College
- Lane Manor
- Mercy Housing
- Newton County Sheriff's Office
- Open Doors
- Promise Project
- Psalm 23 Project, Inc.
- Refugee Family Assistance Program
- Resilient Women
- Rockdale County Public Schools

Question 6: Which of the following best describes your organization? (Stakeholders Only) – 23 Reponses

Federal Government	1
Local Government	2
Law Enforcement	1
Landlord	1
Veteran Services	1
Educational Institution	4
Veteran Services	3
Other Community Organization	13

Question 7: What type of services do you provide? (Stakeholders Only) – 23 Reponses

Case Management	5
Income Management Assistance	2
Employment Assistance	5
Adult Education Assistance	5
Adult Skills Development Assistance	8
Child/Youth Education Assistance	2
Emergency Housing/Utility Payments	3
Homeless/Transitional Housing	5
Housing Development	3

Physical Health Services	2
Mental/Emotional Health Svc	3
Behavioral Health Services	3
Domestic Violence Assistance	1
Food Assistance	4
Resource Coordination	7
Application Assistance	5
Parent Supports	3
Other	6

Question 8: Do you consider yourself to be low-income?– 502 Respondents

Classification	Yes	No
Board Member	2	1
Staff Member	12	7
Volunteer	5	1
Community Member	421	7
Business/Organization/Government	35	11
TOTAL	**475**	**27**

2024 COMMUNITY ASSESSMENT

Question 9: What is your age range?– 451 Respondents

18-24 years	0	0.00%
25-44 years	100	22.17%
45-54 years	81	17.96%
55-59 years	40	8.87%
60-64 years	63	13.97%
65+ years	167	37.03%

Question 10: Do you consider yourself to be Hispanic? – 447 Responses

Yes	10	2.24%
No	437	97.76%

Question 11: What is your race?– 450 Responses

Black	382	84.89%
White	38	8.44%
Asian	4	0.89%
American Indian	2	0.44%
Other	24	5.33%

Question 12: What is your family type? – 450 Responses

Single Individuals	218	48.44%
Adults with Children	49	10.89%
Two Adults, No Children	28	6.22%
Single Parent (Female)	113	25.11%
Single Parent (Male)	3	0.67%
Multi-Generational	11	2.44%
Other	28	6.22%

Question 13: Do you have any pre-school aged children? – 471 Responses

Yes	42	8.92%
No	429	91.08%

Question 14: Are you familiar with Partnership for Community Action? – 449 Responses

Yes	439	97.77%
No	10	2.23%

Question 15: Do you consider yourself to be a partner with North Georgia Community Action? (Stakeholders Only) – 24 Responses

Yes	19	79.17%
No	5	20.83%

Question 16: Have you ever been assisted by North Georgia Community Action? – 478 Responses

Classification	Yes	No
Board Member	1	2
Staff Member	11	8
Volunteer	6	1
Businesses/Organizations/Government	10	14
Community Members	401	24
TOTAL	**429**	**49**

Question 17: Please select any services that you have received from the organization over the past twelve months? (Customers Only) – 419 Responses

Emergency Housing Payments	38
Utility Payments	362
Case Management Assistance	7
Adult Education Payments	2
Transportation Payments	2
Housing Counseling	1
Referrals	6
Transportation Assistance	1

Question 18: From your perspective, what are the most critical conditions of poverty in your community? – 495 Responses

Food Insecurity	296
Housing Insecurity	345
Homelessness	236
Risk of Utility Loss	281
Poor Physical Health	108

Poor Mental Health	147
Unsafe Home Environments	58
Inadequate Clothing	31
None/Unknown	31

Question 19: From your perspective, which of the following situations impacts the ability of local residents to meet these basic needs? – 500 Responses

Inadequate Income	378
Lack of Financial Management Skills	92
Unemployment	129
Under-Employment	94
Lack of Affordable Housing	313
Poor Quality Housing	68
Poor Health	78
Lack of Personal Transportation	98
Lack of Community Transportation	44

Lack of Childcare	51
Unreasonable Childcare Cost	56
Discrimination	62
Criminal Records	59
Addictions	41
Domestic Abuse	21
Lack of Social Support	83
Inadequate Health Service Access	39
Lack of Skills/Qualifications	69

2024 COMMUNITY ASSESSMENT

Question 20: From your perspective, which of the following barriers have the GREATEST impact on a person's ability to secure meaningful employment in your local community? – 179 Responses

A lack of job opportunities	104	Insufficient networking opportunities	44
Discrimination	51	Criminal records	75
A lack of qualifications	95	Addictions	25
A lack of transportation	68	Poor health	23
A lack of childcare	68	Lack of ambition	1

Question 21: Which skills and/or qualifications do you feel present the biggest barrier to employment for individuals in your community? – 75 Responses

Inadequate literacy skills	37	No high school diploma	32
Inadequate language skills	16	No college education	30
Inadequate office skills	33	Inadequate soft skills	20
Inadequate technical skills	32	Lack of required certifications	25
Lack of digital skills	29	Lack of ambition	1

Question 22: Which, if any, of the following barriers do adults encounter when trying to improve their qualifications for local jobs? – 73 Responses

Lack of resources in the community	50	Lack of transportation to resources	33
Lack of resource awareness	40	Lack of childcare to utilize resources	23
Inability to afford available resources	30	Lack of time to use resources	11
Lack of online learning options	20	Lack of computer/internet access	21
Discrimination	17		

Question 23: Which, if any, of the following health and safety concerns have you seen in the homes in your community? - 65 Responses

Rodent or insect infestation	41	Inadequate heating units	19
Sagging/leaking roof	23	Foundation issues	21
Inadequate insulation	23	Mold	38
Missing siding	12	Asbestos	7
Broken windows/doors	13	Lead-based paint	8
Openings in walls/floors/ceilings	12	Exposed wiring	12

Question 24: What aspects of community transportation are inadequate in your area? - 44 Responses

No public transportation available	24	Poorly maintained vehicles	12
Limited routes	19	Safety concerns	12
Limited hours of operation	18	Unreliable service	16
High cost	12		

Question 25: Which types of addictions have the greatest impact on the ability of residents to secure basic needs? - 41 Responses

Alcohol	32	Gambling	19
Drugs	39	Food	7
Tobacco	11	Internet/Video Games	10
Pornography	4	Shopping	5
Work	5	Sex	1

Question 26: What barriers most contributed to inadequate health service access? – 38 Responses

A lack of insurance	30	High cost of medical care	17
Inadequate insurance	23	Long waiting times for appointments	11
A shortage of providers	7	Lack of specialized medical care	8
Insufficient mental health services	16	Inaccessibility for disabled residents	7
Culture or language barriers	9	Discrimination	1

Question 27: Based on your work and/or school schedule, what would be the ideal time for dropping your children off for childcare? (Low-Income with Children Only) – 35 Responses

2:00 am	1
5:00 am	1
6:00 am	5
7:00 am	12
8:00 am	12
9:00 am	1
6:00 pm	1
7:00 pm	2

Question 28: Based on your work and/or school schedule, what would be the ideal time for picking up your children from childcare? (Low-Income with Children Only) – 35 Responses

2:00 am	1
4:00 am	2
6:00 am	1
7:00 am	2
10:00 am	1
1:00 pm	1
3:00 pm	2
4:00 pm	5
5:00 pm	4
6:00 pm	12
7:00 pm	4

Question 29: Which of the following situations below are relevant to personal transportation used by low-income residents? - 444 Responses

The majority are in good conditions	39
Many have minor issues	162
Many have major issues	155
Most lack modern safety features	86

Frequent breakdowns	120
High repair costs	249
Lack of trustworthy mechanic	168
Many lack insurance due to the cost	203

Question 30: Which of the following situations have you personally struggled with over the past twelve months? (Low-Income Only) – 448 Respondents

Situation	Assistance Unavailable	Assistance Received
I had needed assistance with job search	111	45
I needed assistance with uniforms/tools for work	41	11
I needed help developing a budget	72	32
I lacked the education/skills needed to get a job in my community	46	12
I needed assistance paying off loans/debt	213	14
I needed assistance with my rent payment	152	39
I was evicted from my home	59	21
I needed assistance with my mortgage payment	66	11
I experienced a foreclosure on my home	14	3
I was homeless	49	19
I had to relocate due to the cost of my housing	67	15
I needed assistance with my utility bill	137	216
My utility service was disconnected	63	47
I needed assistance getting medical care for a family member	75	36
I felt socially isolated	87	20
I needed assistance with depression	95	57
I seriously considered suicide	19	4
I needed assistance applying for SSI, TANF, or another benefit	67	34
I experienced abuse/neglect	18	7
I needed assistance improving the health/safety of my home	73	9
I needed assistance improving the insulation of my home	96	15
I had personal transportation limitations	109	25
I struggled with food insecurity	93	105
I was unable to locate childcare	17	7
I was unable to afford childcare	30	12
I needed assistance with my parenting skills	23	8
I needed assistance with criminal record limitations	22	5
I needed assistance with an addiction	7	3

Income and Poverty Comments:

- *Most people that I see who seem to be in need of support, ride the trains daily to sleep. Some even relieve themselves on the trains because there is no bathroom or place for them to make it to in enough time. Possibly even places that won't let them use their public bathroom.*
- *Services for seniors keep going higher but the Social Security checks don't.*
- *The cost of living is a huge issue in being able to afford an everyday living.*
- *The community is comprised of people suffering from poverty, homelessness, or unemployment and single parent housing make it hard to meet the rising costs. The stress associated with trying to get help and the delivery of service is crucial and scary.*
- *There are not enough resources to help people in need.*
- *People are living paycheck to paycheck. People are living on extended credit just to make it. People are using credit cards to get by, and this will only make the situation even worse.*
- *Food and housing are expensive, and housing is hard to find.*
- *In our country you are better off being overseas if you need help. More money is being shipped for aid then being given to those in need. We need help and all of the areas of concern are in desperate need of funding.*
- *Dekalb is very mixed community. Though there are some families doing financially great, there are those suffering in the areas of housing, homelessness, food desserts, and access to mental health resources.*
- *Due to the economy's inflation, we are heading into a recession. The cost of utilizing up, along with food, gas, and housing, rent being extremely high many are becoming homeless.*
- *It is extremely difficult to obtain the help that is offered. It's like dying of thirst while chained to a wall with a bottle of water a foot out of reach. It is as if the government and assistance programs are saying, "here's your bottle of water we're providing it for you. However, you have to find your way out of the chains in order to get it."*
- *The minority communities are always last to get the right type of assistance. In other words, minorities don't always have individuals that are concerned enough about getting involved with the proper agencies at the right time so that they could get the information out to the minority groups especially Seniors.*
- *Income is not keeping up with the rising costs.*
- *The high cost of food, rent, and housing is a concern for most people.*
- *My most essential need is food, shelter and maintaining utilities. Shelter and utilities are set, not much is left for food and EBT only gives $23 a month. I choose carefully what I use it for. Everything is so costly, especially if you're not able to get outside the neighborhood to shop.*
- *My most essential need is food, shelter and maintaining utilities. Shelter and utilities are set, not much is left for food and EBT only gives $23 a month. I choose carefully what I use it for. Everything is so costly, especially if you're not able to get outside the neighborhood to shop.*
- *Food and housing have gone up tremendously, leaving families unable to survive.*
- *The price of everything is increasing.*
- *We've god inflation with no increase in income, which keeps us all on the brink of homelessness and struggling to pay bills.*
- *The job you have it is hard to take days off to go to the doctor because you need those days of income for Bills as well if you can't pay your insurance, you don't have health care, so it is hard to even admit to yourself you are sick. With so much stress it takes a toll on you mentally and chips at your sanity and you start to wonder if those around you are helping the way you need it and questioning their integrity.*
- *It is very hard to get the help you need.*
- *People are really struggling to pay their rent or mortgage and utility bills and keep food in their homes because things are increasingly high so in order to provide for their families*

other things have to be sacrificed and risk getting turned off some even risk homelessness to be able to afford food for the houses

- *The cost of living is unaffordable in my community.*
- *The cost of living is going up, but jobs are not paying much.*
- *I live on Social Security and it's hard to keep up with rising prices, so it's good to have help from places like this.*
- *Many people are living paycheck to paycheck. They have to decide between getting medications or food. The price of housing is going up and people can't afford the place they live at. They end up staying in the cars or on the street.*
- *The economy has become very distressed. Many people are suffering right now, this is a very crucial and difficult time for many people. My mother and I try to give back to the community in many ways and we have found that the amount of people who are homeless in ga due to job loss, gentrification, unable to keep up with high rent prices, not receiving enough funds from their jobs in order to pay every bill in the household. It is a difficult time for many people right now and it is causing unsafe environments for children and families.*
- *Most people are living paycheck to paycheck not able to make ends meet in their household. Some people are struggle with whether to pay bills or buy food for their families because by law they don't qualify for food for government assistance with food stamps. But they are not making enough to sustain adequate living cost and buy food.*
- *Those that need help aren't getting it, especially people like me who have income like 1200 dollars a month, with a mortgage, car note, food bill, etc.*
- *Everything in the community is going up but our income isn't which now we have to choose to pay the bill or buy food for my family.*
- *I don't believe there's many agencies throughout Gwinnett county to assist clients with food, utilities and mental health care, in comparison to other metro Atlanta counties.*
- *rental properties have skyrocketed along with food prices and utilities. senior citizens with little savings depend on SS and the assistance of others that are already struggling to make ends meet.*
- *I am a single Mom and it's easy to get evicted if I fall short on money cause my child is constantly in the hospital due to his many medical conditions. It's just hard sometimes*
- *The economy has certainly taken a nosedive in the past few years. The Covid pandemic has left many people struggling. Most of our elderly were already struggling with food insecurity, transportation, loneliness. Having retired from the hotel/motel industry, I'm aware of the homeless and housing insecurity. It takes more than 1 source of income per person to keep your head above water, so to say. The average social security income leaves many people living way below the poverty line.*
- *The cost of living is becoming too high.*
- *The cost of living is ridiculous! Causing anxiety and depression. Single parents who are also the sole provider are suffering.*
- *In the Newton County area there is a scarce amount of resources and opportunities to gain knowledge of the actual resources that are offered. We are building to provide the resources that are not offered or unknown. With the very high cost of living, it is very hard for families to survive without struggling. Our community is also not aware of how crucial our mental health is, and we are also working to bring awareness.*
- *I think the cost-of-living and affordable housing has gone up and a client's income does not meet the demand of the increase in the cost living.*
- *The rising cost of living is causing hardships.*
- *Everything is just so expensive.*
- *I see many of my neighbors struggling.*

- *Women with children get food stamps, free housing, they are priority for anything basically which in turn has a lot of them not even trying to get jobs or do better. It's extremely too easy just because a female has kids when I feel like the assistance agencies should be somewhat harder on some of these people and at the same time, they'll be learning how to pay bills and provide for the kids instead of strictly living off the government.*
- *People are just trying to live from one day to another as well as they can however they can.*
- *Seniors can't afford these rising prices.*
- *Due to inflation, everyone is struggling.*
- *I broke both ankles on job, left me with no income at all. Work compensation denied me. Applied for Snap they give you a time and date of them calling you and they don't, now it put in as you didn't apply to them. In which the numbers on the paper is wrong. Unemployment denied me, work for that company for 5 years haven't call off of work not one day but this how you get treated.*
- *We have a large number of residents on SSI only which isn't adequate for food, healthcare and paying utilities. And they don't speak English and have only about a third-grade education,*
- *I'm about to have my lights cut off, I'm behind in my rent, we barely have food with only 291.00 in food stamps, my father check covers the bills, but it is not enough through the month. I have no insurance and in need of a lot of medical assistance.*
- *We are struggling on the whole to pay our bills and tax paying citizens cannot get help.*
- *People with little to no income cannot afford to pay the high cost of living.*
- *The price of everything is so high that people can't afford food or housing. They are having to move back with their parents.*
- *Most seniors are living on fixed incomes that aren't increasing with the prices of food, housing, and utilities.*
- *We don't make enough income to meet our needs.*
- *The cost of everything is going up. You think you have everything figure out and the next you are getting a notice some is going up*
- *Lots of people have low to no income.*
- *Low-income families struggle daily to sustain, a stable home environment, employment, childcare, high housing costs, and being able to keep the heat and electricity on.*
- *Prices are going up and single parents are working hard to keep a roof over their head. Not being financially stable can be stressful mentally and physically*
- *People with multiple children simply don't make enough to pay all the bills and handle all the children's needs, reflecting the median income for the area as opposed to the cost of living. From my personal experiences and interactions with other working adults, this seems to be the consensus.*
- *Black people are disproportionately underserved*
- *Had a stroke and aneurysm due to stress because I cannot pay my bills, I don't know what to do with this point I've done all I can*
- *I have a total of 4 school age children which their friends' parents are having the same issue. One check away from been homeless and hungry, with no transportation. My community has not recovered from the Pandemic and then inflation. Everyone is trying to survive, and the low-income community has taken the hardest hit. With the help of Community Partners, it has saved my home and families around me. This is a small help for sure a big problem. I ask God for his help and gaudiness in this hard time.*
- *It breaks my heart to have people come our offices to plead for food, housing and mental health. And oftentimes, having to tell then we are currently out of funding- either from exhausted funds or program ended. Way too many people approach me to say they are in dire need of housing, for and medical help due to mental health issues.*

- *With the current state of the economy, there is a lot of us out here suffering.*
- *These are some of the issues that need to be addressed because people are facing this every day and at the point people are looking for help they really needs the help affordable housing healthcare jobs that are guaranteed hours of transportation everything but the cost of living is so high everything is so high people cannot afford it or people are working two or three jobs just to try to make it way and still can't afford it so it need to be some type of solution for people to go to and get some help at any time when it comes to a hardship in their in their household*
- *All I can say is I am Blessed not to feel any of the injustices I have encountered with others. There is a need for affordable housing that a good paying job could help serve. We're all familiar with how Blacks and other minorities are treated in the past and presently. The better jobs are secured by mostly White folk. They may be last to come but certainly, first to get served. This needs to change, pronto!*
- *With everything going up and income staying the same, help for the elderly is non-existent!!!*
- *Prices are rising higher than incomes. I'm on Social Security, and the COLA INCREASE WAS TOTALLY INADEQUATE TO MEET INCREASING PRICES.*
- *Some people don't have the money to move to a better place to live so they have to stay in these unkept places with these slumlords that no one hold them accountable for letting their paying tenants live in these horrible conditions.*
- *I've noticed many people are more concerned with new phones, fancy cars, self-pampering, and tv, cable or streaming services, than with supporting themselves.*
- *Many people are struggling because they are in debt and don't have money to pay their debt*
- *Anyone with low income cannot afford anything beyond basic needs, any of these choices hinder the ability to pay bills in basic needs.*
- *Black communities are often left out of the planning, implementing and renovations in our neighborhoods. Job training is ignored when communities are built to live, work and play in, are designed. It's gentrification. Move those people out, that can't afford to live in communities. And where do they go? To the streets, vacant homes, committing crimes to go to jail, cars and etc.*
- *People need more resources.*
- *I am unable to work due to my health and I only receive 966 a month I have three girls and which all of them are still in school two are grown but still in college that lives in the house with me and can barely help me pay any bills I don't know what to do*
- *I just wished Senior Citizens could get more help financially. My little pension barely pays my bills. No one will hire older people. I know I could have done some work at one time, but now I can't since I had a car wreck and almost died. I'm still here but after a broken right leg and fractured cervicals under the brain stem, I can't do what I use to. I, like a lot of Senior Citizens, just need extra financial help.*
- *There needs to be more programs in Gwinnett Co to assist its citizens especially single parent households with home repairs, utility assistance and transportation maintenance. I also believe mental health needs to a focal point for our youth not just adults.*
- *Please know that there are many people like me suffering in silence. It's hard to ask for help when you are unsure that you will receive it. The act of asking in doubt becomes more painful than suffering in silence. WE have to do a better job of making people feel worthy of help. Create a climate of healthy help seekers. Congratulate people for getting help. Normalize need and assistance for needs. Thank you.*
- *The state of GA as a WHOLE needs to do better. The minimum wage needs to be raised. There needs to be some type of legislation that caps the amount of rental increase that landlords can charge at renewals. There needs to be better access to emergency funding when needed. There needs to be legislation that addresses the current housing crisis, and*

the absolutely RIDICULOUS rental rates that EVERYONE is experiencing. The fact that a two-person household with a combined income of 75-100k/year does not allow for ppl to live comfortably needs to be addressed.

- *With then continuous high cost of affordable housing, high car insurance, gas and food it is almost if not impossible for anyone to have a decent life with basic needs. Especially rent and gas and high cost of car insurance as well as food. Without these basic needs no wander mental health is on the rise.*

Employment Comments:

- *I can't get a job because people are getting let go due to AI.*
- *It is said that there are jobs available, but there are many who seem to not care to work for whatever reason.*
- *Wages are too low to afford rent.*
- *Prices continue to increase, but wages are not.*
- *We need adequate employment that pays enough to meet the basic requirements for living.*
- *People are losing their jobs.*
- *The wages paid aren't enough to cover rent, much less food and utilities.*
- *Most of our community members are working in jobs that pay between $7 and $12 per hour.*
- *No jobs in the area are paying cost of living or giving raises. It takes almost four people working to make it through.*
- There is no help for the working poor.
- I think unemployment is a big cause of the homelessness problem.
- The wages received in Georgia are not conducive to maintaining a household.
- The jobs in the community don't pay a living wage.
- Everything around us is increasing, but our salaries are remaining the same.
- Jobs are not able to keep up with the economic demands which in turn makes it hard for cost of living.
- Minimum wage is not a livable wage!
- The jobs aren't hiring or pay low wages.
- Age Discrimination for seniors is a real issue for seniors. Experience is under appreciated these days.
- People have to have employment to be stable.
- All applications are being reviewed by AI and you do not have someone to communicate with from HR to check applications status when applying on-line which is the way it is today.
- Everything has increased except the pay checks. You have to work a full-time job and a part time job to get by.
- When one has no job, they cannot afford housing or food. I do believe that discrimination, in Race, Gender & Age, happens a lot of the time.
- The majority of the people in our area are not getting paid the correct amount to live in today's economy.
- Everything is expensive and jobs are not paying enough, so people cannot afford anything.
- I need a higher paying job.
- Jobs don't pay well enough.
- Jobs don't pay enough.
- The lack of income stems from low paying jobs that won't allow you to afford to live in a decent community or even have enough to have an emergency savings account. This creates the inability to save for emergencies for family issues, proper healthcare, college tuition or to maintain unexpected expenses.
- In my case I was working and making a decent amount for money until my work declined in patients. A lot had to do with Covid.

- feel that if we had more jobs that paid $15 an hour and above as a starting pay, we would see less of poverty as we see now. In other words, minimum wage should start at $15.00 an hour or more. The cost of living is very high.
- When I am interviewed for a position in my degree field most of the time they only interview me to say that they interviewed someone who was black that is all and I end up not getting the position even though I paid for someone to take care of my children in order for me to go to the interview as well as pay for gas to get to the interview and try my best in the interview there's always a barrier
- I just think that if many of these employers offer better paying jobs, people will be able to sustain better however, the cost-of-living increased does not match the wages.

Adult Education/Skills Comments:

- *I have had a hard time finding a good job because of a lack of education.*
- *People need to be trained to be qualified for different types of jobs.*
- *People don't have the opportunity to get the education and skills needed for work.*
- *In order to get a better paying job, you have to have the skills or a degree.*
- *I think a lot of people struggle to qualify for certain jobs.*
- *There needs to be more job workshops and career training opportunities available.*

Child Education/Skills Comments:

- *If the schools and the community provided adequate real-life skills on money management, financial skills and credit building and awareness; it would give individuals a better chance of how to survive and live a sustainable life without going into debt or go without daily necessities.*

Housing Comments:

- *The organization needs to find more funding for help for people that are suffering from rent and mortgage prices.*
- *The community lacks affordable housing for individuals that desire to live in a safe neighborhood with access to thriving schools and jobs.*
- *In my community, I see a lot of homeless people with disabilities. Maybe some are due to mental health, high rent prices, and just the inflation overall.*
- *The homelessness pandemic is increasing due to the cost of living increasing without the increase in wages.*
- *The high cost of rent is a program that seriously needs to be addressed. People are barely holding on these days.*
- *The City of Atlanta has a housing rehab program, but it requires home insurance, which most people needing help don't have. It also put a real estate company in charge of administering the program, rather than a non-profit. Maybe PCA could offer to replace one of the real-estate companies? Habitat For Humanity administers the program in one district. I have buckets in my attic to catch the rainwater!*
- *We need apartments we can afford. I'm on disability and my monthly payments are not enough to pay rent.*
- *I came really close to being evicted I had received the dispossessory Letter on the door I answered and we were going to court 03/26/2024 but one of the members from my church told me to advise the judge that the church was willing to pay the balance and the landlord would not take it, but do not let court be the first time she hears this so call her and when I called she was a different person and she accepted the money I had scrapped up and borrowed from family. The Church never gave me anything but a word but Oh how I thank*

God for the word Because I could not find another place to live, I cannot afford 3x the rent My account does not show that.

- *Rent in communities has increased so drastically that I'm not able to find somewhere affordable.*
- *Affordable housing is a big problem. I see quite a bit of homelessness.*
- *In this current economic environment, people of all ages are becoming homeless, behind on their mortgage and behind on utilities bill. This is becoming an epidemic In America!*
- *I am a single parent of 2 teens and with inflation with my rent, I just don't know if I will be able to continue to afford to live where I am, and I constant stress trying to provide my kids with stability.*
- *My house needs so many repairs inside and outside. My shower isn't working in my bathroom, and I don't have a refrigerator to keep my food cold.*
- *There are so many homeless in the community and garbage, trash, begging for money among other things. You really don't feel safe, and it takes away from the community, because they are sleeping at bus stops, on the sidewalks, in the bushes, and in empty buildings.*
- *If the utility assistance programs are terminated, what would happen to those who need it? I understand that PCA can't do all things for everybody, but this is such a vital program to the community that it would be a disaster to no longer have.*
- *The cost of utilities is so high you can hardly pay them. My utility assistance never pays but for one or one and a half bills.*
- *I had to file bankruptcy to keep my home, but the payments combined with property tax increases, homeowners' insurance, and high utility bills is still a financial struggle.*
- *There are a lot of homeless people because the rent on most places is so high until they can't afford it.*
- *Seniors who desire to remain in their homes need help with minor repairs, outside painting and plumbing without having to put up their homes for a loan which adds to the issue of income*
- *People don't have enough money to pay for utilities, housing maintenance, and rent.*
- *This is my second year in Covington and my rent increased by $100. The rent goes up $100 per year, sucking up my SSI. I have no other family to help or move in with. Moving costs are hefty. All rents seem to be high, and I won't live where people are shooting up the neighborhood.*
- *Utility costs are very high.*
- *The housing and rental market is so high that low-income families can't afford the rent or find good and adequate housing.*
- *It's difficult to obtain proper housing for disabled and elderly people who are on a fixed income. Especially with renting homes or apts. Inflation hasn't stopped and rent goes up regardless of residency tenure.*
- *I've been at my community for 12 years. The first six I was healthy and working. The last 6 I've been disabled (double amputee) and on dialysis. I'm on SSI and can barely afford rent without the assistance of my elderly disabled mother's SSI. And no one cares in the leasing and rental organizations as long as they're getting paid.*
- *I know what it's like to be homeless. I was homeless for 5 and a half months living in my car. I know what it is like to be without food. I would pray for someone to just give me $5.00. But I have to say the Lord Jesus Christ was always there to sustain me. I also know what it's like to skimp on your air and heat in order to be able to pay your utility bill.*
- *I am a single 52-year-old women who is on SSDI income. My housing situation is very unstable right now because my landlord goes up every year on my housing and it's almost*

taken my whole check each month. The housing market is very high and unfordable to move so I have been forced to stay in these conditions.

- *I have a major water leak outside my home that I have been trying to get my landlord to repair since February 2024. My water bill is $ 4,952.00 as of 04/01/2024 due to this problem and I am at risk of my water getting turned off. I have not been able to move into a better place because of the high cost to move and I don't have deposit money to help me move. This is not happening just to me but many of other people throughout DEKALB county and it is causing a high rate of homelessness.*
- *The cost of rent and mortgage payments are going up. People are having to make a choice about what to pay for.*
- *It is hard to find affordable housing and being single, paying utility bills is hard as well. Thankfully there is help with at least one utility payment.*
- *Too many seniors have been waiting over five years for help with home repairs.*
- *Rent is so high that the average income can barely afford to pay if and provide shelter. So, families then have to decide whether to pay rent or pay utilities. Then you try to get help, but funding runs out because everyone needs it.*
- *It is hard keeping up with the high cost of utilities.*
- *Rent is ridiculous and mortgages are high.*
- *Many people are just sleeping where they can.*
- *Seniors on fixed incomes fall short on utility bills. The prices are going up, but their income doesn't.*
- *We have loads of homeless people living on the streets.*
- *The prices of homes have increased dramatically. The management companies have doubled or tripled the rental prices, and the application fees are too much.*
- *Homeless is very high in my county.*
- *The raising cost of utilities and housing is the biggest threat right now. I know at least 7 families in my subdivision that are at risk of being homeless.*
- *Owning and renting are much too costly. A house is for provision of stability. Not growing equity and foreclosure.*
- *One of the greatest issues overlooked today is the housing crisis whom politicians don't even recognize as a crisis. Rent is sky high and going higher at every signing of a new lease. Boggles my mind that politicians running for office don't come up with a solid plan to address this crisis. If so, the idiots would win by a landslide.*
- *If you are homeless, you can't get a job.*
- *It's so many homeless people around the area now because you cannot afford the rent now because of the inflation. Everything has gone up you have to choose to rather to eat, pay rent or utilities because we are not making enough money to all because the skyrocket pieces.*
- *The high cost of housing whether renting or buying is out of my income bracket.*
- *Housing costs are out of control!*
- *No matter where you live there's always an issue with quality housing for those down on their luck. Additionally, housing costs in many areas are just astronomical, and many people just can't afford to pay for quality. During the coldest months of the year the news always show the homeless in a freezing or very cold situation. Heat is needed and is a very need when the temperatures drop.*
- *It takes a lot of effort to become un-homeless because finding resources is almost impossible.*
- *Housing insecurity is high due to slum landlords raising rents on the poor and seniors.*
- *Housing is extremely expensive.*
- *There is no place to house the homeless.*

- *There has been an increase in utility costs.*
- *Due to a leak my water bill is $7,000. I can't pay it and I can't live without water.*
- *There are too many homeless people walking around and people on the street talking to themselves.*
- *The cost of housing just keeps increasing.*
- *It starts with shelter. Housing insecurity permeates through all aspects of being. People need to feel safe and at peace in their homes. Any interruption has ripple effects. Second is mental health. Mental health is protected by housing security.*
- *The price of rent is beyond belief.*
- *The cost of housing is beyond what many people can pay.*
- *Home security is becoming a problem most Apts are pricing people out of the market.*
- *Housing is continuing to go up, forcing me to room with another family.*
- *We need more affordable housing in Rockdale County.*
- *I wish you would increase the utility allocation per couple and don't just treat them as a single person.*
- *If we had more affordable housing, I think things would be better*
- *Affordable housing is limited, and emergency rent assistance is needed.*
- *With the influx of people moving here people have been displaced and can't afford to live locally when they have been living here all their lives. All the new builds that are being built here are so far out of reach for the average person that nobody can afford to live here anymore. That's why we have so much homelessness here.*
- *We need more affordable housing for seniors.*
- *Rent is high, so it takes the majority of your income.*
- *Rent is going up so much that people can't afford to live anymore.*
- *I see a log of homeless people walking around.*
- *The cost of my rent doubled. A single family cannot afford to live. This leaves some living in abuse or neglect that they have tried years to get out of.*
- *Every income-based home is full and on a waiting list. I feel there is no hope anymore.*
- *Homelessness is on the rise due to high rent.*
- *Rent has increased so much and qualifications for renting have gone up even higher. Applicants must prove they make 3 times the amount of rent to even be considered for an apartment. Application fees are $50 and higher for each adult person residing in the unit.*
- *Some renter homes are unsafe, run down, and need lots of repairs to meet codes.*
- *The housing cost is so high.*
- *I have a lack of finances to take care of basic needs, such as food and shelter. This has had a profound effect on my mental health.*
  We need more networking to let people where to go to prevent utility loss.
- *Families with severe health conditions should be able to keep their utilities on especially heating and cooling systems. Those that need their electricity to run a device that can save their lives.*
- *Rent is unaffordable.*
- *There is no affordable housing, and the price of utilities is increasing.*
- *There are many seniors who can't afford to live independently due to a lack of affordable housing.*
- *Housing costs are too high for seniors.*
- *Homeless people are out in the rain and cold.*
- *Housing prices went up so much that people can't afford it anymore.*
- *Rent is extremely high when compared to the wages paid.*
- *Housing is becoming so high that people can't afford to house their families.*
- *Some people are having to share housing against their will because of the cost.*

- *In Decatur, the housing market is way too high. The utilities are also high.*
- *Many houses in my area are older and are in need of repair, including mine.*
- *Homelessness is a growing issue in the community, which leads to poor physical health and food insecurities.*
- *More rental assistance programs are needed.*
- *Housing in this county is limited and the homes, rental is so expensive for lower income people.*
- *This year the utilities were very high in cost.*
- *There's lots of people that's homeless like myself and could use some assistance with rent and utilities.*
- *Utility payments assistance amounts could be increased. Utilities in Gwinnett are astronomical. Please include water utility.*
- *Jobs are unstable making is almost impossible to keep up with the rising cost of utilities.*
- *Housing has gone up its ridiculous for anyone to pay that's why some people are homeless because can't afford all the necessities to keep the household running.*
- *People are afraid to use their utilities for fear of it being cut off.*
- *The state of property in the community highly contributes to the mental health of families, especially the children in most homes. The loss of utilities brings on added stress, burdens and creates trauma.*
- *There are 2 and 3 families living in some households just to make ends meet.*
- *Quite a few elderly people can't afford to make full or partial payments on their utilities.*
- *Because of homelessness there is a sense of hopelessness that causes victims to just give up and no longer try to improve themselves.*
- *Housing is very expensive, and it takes over half your income to pay, leaving nothing to pay other bills.*
- *I live in a 55 and older residence I'm on a fix income. This I suppose to be a government subsidized building, yet the rent has gone up in 3 years from 900 dollars to 1,200 and next year it will be 1,328. Where are all the seniors on fix income are going to end up?*
- *I have seen several people in the community sleeping on the streets.*
- *Housing insecurity and homelessness are some of our highest areas of need. However, it's discovered that more frequently, the cause of this is due to high housing costs that are unattainable for low-income individuals. We also see that poor credit negatively impacts our program participants' ability to secure housing. With homelessness, we see an array of causes here – from mental health, no support system, insufficient income, etc.*
- *The housing crisis on the rise and affordable housing is a must.*
- *Rent is more than your income; you are required to earn at least 2.5 times the monthly rent. The place you stay may be a high crime area.*
- *Due to the rising cost of rent in the greater Atlanta area more students are faced with housing insecurities. I have worked in adult education for 11 years at GPTC. I have never experienced this number of our students that are facing homelessness or actually living in the woods and in their cars.*
- *Due to the economy, rent increases are displacing more families. Housing is becoming unaffordable and no longer sustainable. Next to the higher cost for utilities, families are struggling to survive.*
- *There needs to be more rental/utility assistance for those who qualify on a more regular basis.*
- *Homelessness is a HUGE problem in the Metropolitan area.*
- *There has been a surge of residents in the area who have had huge electrical bills and water bills. More funds are definitely needed in these areas.*

- *I am 64 and my rent (apartment) increases every year. I am on a fixed income and the rent takes my entire SSI funds which effects the other necessities of survival. So, I feel I will have more housing issues in the next few years.*
- *Many residents face the threat of homelessness and have housing insecurity due to the expensive cost of rent and the low living wages. Many residents are forced to stay in unsafe homes because they cannot afford to move out on their own to escape their situation.*
- *Homeless has increased and I see it everywhere. It isn't just in the city, but the suburbs as well.*
- *A large percentage of our clients request rental and emergency housing assistance.*
- *Many people are sleeping on the floor without a bed set.*
- *I see lots of roof leaks and cracks in walls and ceilings.*
- *True Affordable Housing is the major issue, especially any elder person on their fixed income. This will be my third and final year at 284Covington crossings due to ever increasing rent. It's supposed to be affordable. For who? This is one major reason the homeless population continually grows. I will end my life before I end up in the street. Just being honest.*
- *I am on SSDI, so it has been very hard to find affordable housing due to lack of income. .*
- *We don't have enough adequate living and affordable housing.*
- *The cheap housing comes with high crime and sometimes we have no choice but to live there due to being low income.*
- *A lot of affordable places are usually run by slumlords Georgia's housing laws favor the landlord not the tenant even with a housing voucher and inspections things are just patched up and glazed over My Son and I lived in places full of mold that were half repaired that had roach infestations I'm in high crime area right now but Thank GOD for the first time We don't have roaches and no visible mold or mold smells I Thank GOD for that.*
- *If it is possible, an allowance should be provided for applicants who are 75 years and older for the maintenance of their homes.*
- *Housing has gone way up.*
- *Decent housing costs too much. One must have a 600-credit score in order to rent a residence and it's rare for people to accept housing vouchers. Deposits are outrageous and what is affordable, is in bad neighborhoods, run down, or unacceptable by any means.*
- *Housing in the poor areas are cold, people are sick from mold and roof leaks.*
- *You have to show three times the income to qualify for housing.*
- *There needs to be more affordable housing for low-income people*
- *Section 8 too hard to get. So many of us older folks ate having to go back to work with disabilities to pay ever increasing rents. No one seems to be stopping corporations from the greed. This will be the 2nd time I'm forced to move because I won't be able to afford rent and I still can't live life, get my car fixed, proper medical care.*

Childcare Comments:

- *Childcare is ridiculous. It is $600 per month for a two-year-old.*
- *I can't afford childcare due to the cost.*
- *I don't have any children in daycare but for women I know. They can't afford childcare. So sad*
- *I can't leave work in time to pick up my child, hence, I have to put him in aftercare at an additional cost.*
- *The cost of childcare is a problem, and if they are cheap the care is compromised. I have a level 3 nonverbal autistic son, so I have to be careful where he goes, often leading me to the more expensive centers.*
- *My daughter doesn't have childcare, so she has to take the children everywhere.*

- *Childcare is too expensive. I have been on the list for Head Start over a year.*
- *Many facilities in our area have unprofessional staff and unclean buildings.*
- *The cost of childcare is unreasonable.*
- *Since COVID, centers open later and close earlier than they used to. Staff retention is horrible, so children don't have consistent faces in the classroom.*
- *With a work schedule of 11am to 8pm, the daycare is closed.*
- *The cost of childcare makes affording children difficult.*
- *The cost for after-hours care is an additional cost.*
- *If you are late, you have to pay late fees.*
- *Trying to get help through the government is difficult because you get denied if you have no income, and it is hard to look for a job and make sure your children are picked up in time.*
- *Constantly being called out of work making it difficult to keep a job because of child with disabilities.*

Health Comments:

- *Being alone and disabled is a real never-ending problem in every regard, especially when poor.*
- *You may have medical insurance, but the cost is so high until when you need it, your out of pocket still has you in the red, therefore many times you don't get medical help because of the cost.*
- *The community has gotten to be so closed in due to COV19 and other issues. This has caused people to lack in exercise and going out to give the body what it needs to thrive.*
- *I can't work outside of my home because my physical health is poor.*
- *I have Medicare advantage and need proper care for chronic pain in several places in my body, but I can't afford the co-pay for MRI requested, chiropractor visits, so I live with the pain and unable to have my health issues resolved. Every one of my check offs will only get worse, and forget about dental health, way too costly.*
- *We need more help with mental health and depression.*
- *Many people are developing mental health issues but can't find the proper help.*
- *Medications aren't always covered by your insurance so you can't pay for them, or if you do you only take it a few days a week instead of every day to make them last longer. The out-of-pocket costs are too high.*
- *Mental illness is rising.*
- *If your mental and physical health is not right, you can't work.*
- *Some elderly are not able to afford to keep up their homes due to poor health.*
- *A lot of people can't afford health care, so they end up sick. That is why people are not getting seen for Mental Health, and don't have the money.*
- *People are not focusing on their mental and physical health because they are in survival mode.*
- *Mental health is very important, especially in this day and time. If you're not in your right mind, how can you make good choices even simple task can be seem more difficult when you're not in the right mind.*
- *We need some mental health facilities that serve only seniors.*
- *It is sad to see the homeless on the streets in distress, sleeping outside in various types of weather.*
- *The mental health system is broken.*
- *We have subpar health services. Sometimes 911 takes hours, if they show up at all.*
- *Mental health services are also inadequate for all of Gwinnett County. Viewpoint Health only takes people without coverage or Medicaid only, not Medicare. It took me being in an IOP hospital program to get help for my mental health, then they helped me find outpatient care.*

But my current therapist only accepts my Medicare Advantage plan, not my secondary Medicaid. I have to pay a copay, and that's a bit of a hardship for me. The need is still great for adults and children/teens in mental health.

- *The places are limited to where a person can go to routine mental health issues and never published.*
- *I am unable to get needed medical help.*
- *Mental Health is a serious thing, people are at the point they don't know which way to turn and when they're always being told no or there's nothing we can do to help from different places, it makes your mind continue to worry and just keeping thinking what else can I do to get myself back on track or move forward.*
- *The authorities are not equipped to adequately handle those with mental needs. They are often shot, or man handled so bad the outcome of death is inevitable.*
- *Mental programs are causing homeless and insecurities.*
- *There's a lot of mental health concerns now and people don't have access to healthcare because they don't have insurance. If you don't have insurance, there's no free mental health programs.*
- *Mental health service appears to be severely underfunded so those who need it so badly are humiliated, looked down on and have very poor support.*
- *Inadequate health insurance is a major problem for people on SSI, as the funds are not enough to cover all medical co-payments and insurance premiums.*
- *People in poor neighborhoods have drug issues.*
- *Most folks can't afford insurance and including if, you can most times the services they render are costly and including prescriptions, most insurance doesn't cover everything that is needed, X-rays, MRI, and etc.*

Nutrition Comments:

- *I am constantly worrying about how many meals I can make out of what little groceries I can afford.*
- *Sometimes I don't have enough money for food, so my church gives me food each month.*
- *The cost of food is so high, you can hardly afford it.*
- *Being age 62, I am now in the senior EBT program, which was reduced to $23 per month.*
- *I have seen many people who are asking for food and when the county give away food there are so many people waiting to get it.*
- *People have insufficient income to afford fresh fruit and vegetables.*
- *We have a lack of grocery stores in close proximity to our homes.*
- *Food is so expensive. I have three kids and since I started working, they have reduced my food stamps by 75%. I have to go to food banks to survive.*
- *Increases in food prices are decreasing how much food you can afford to buy.*
- *We have food insecurities, but we don't qualify for food stamps.*
- *I struggle with the cost of food. I am retired and living on a fixed income.*
- *Food is expensive.*
- *The high price of food is creating problems for many. Food banks and assistance programs aren't always convenient (time or location).*
- *People line up weekly to get help with free food.*
- *When people get a cost-of-living raise, their food stamps go down. Food prices have raised also.*
- *I think a monthly food allowance would benefit seniors especially. I mean everybody has to eat and I keep trimming my grocery list every month. to cook a meal once a day costs at least $20 a day and I do eat leftovers and only 1 meal a day, but even at $10 a day that comes to $300 a month....I'm pretty sure there's a lot of seniors going hungry*

- *Many of us can't afford groceries.*
- *There are a lot of people who are hungry.*
- *There are minimal services to assist in providing food supplements to seniors. Benefit amounts are too low, and not the same for females vs. males.*
- *Groceries are extremely high. Most income goes towards that.*
- *I am a 69-year-old senior on a fixed income and can only get $23 a month EBT/Food stamps assistance!*
- *Some senior citizens, or disabled people only receive a small amount of food stamps. So, they have to use their monthly income to buy food for their household*
- *Food assistance is scarce and hard to get.*
- *I am a senior and I see many in my age group struggling with groceries.*
- *Some of the food pantries give out food that is expired and spoiled.*
- *There aren't enough food giveaways for the homeless and their pets.*
- *Some of the food giveaways only let people's use their food giveaways if you are in the zip code what a sad way to help everyone.*
- *The food banks give too much boxed macaroni and not enough vegetables and fruit.*
- *Grocery prices are awful and there is no help with food stamps when you are on Social Security.*
- *The increasing price of food is extreme.*
- *I live in the country where everyone has land and plant and grow gardens to supplement food. Last year, my tomatoes, squash, and cucumbers fed my neighbors and me very well. But at my age, it is getting more difficult to handle all the work of a garden. Had a heart attack a few months ago and other health issues due to an accidental fall. All my neighbors work hard to make life more comfortable for themselves. No slackers around me. We all are appreciative of what we have and are given. Using it wisely!*
- *Groceries are so expensive. We are eating random things that don't really make a meal or eating things that should be thrown out. I give the kids the fresher foods and eat what is left over.*
- *Food prices are killing me even with food stamps I can't feed myself for a month*
- *If it wasn't so hard for people to get help with food employment it would be better*
- *Food prices are going so high that people can't eat properly.*
- *So many members of our community are waiting on SNAP benefits that never arrived and are hungry. When you are hungry, you can't think straight to even fill out paperwork.*
- *We need more food banks.*
- *The price of food is too high for those of us making less than $16 per hour.*
- *My church just had a produce box giveaway on Thursday and gave 130 boxes to neighbors near the church within 1 ½ hours.*
- *Food is so expensive now it's hard to get enough groceries to last more than a week.*
- *I often run out of food.*
- *The cost of food due to inflation with the state of Georgia making it ridiculously hard for people to receive food stamps equals food insecurity.*
- *People are hungry. Food Stamps are slow.*
- *It is a blessing that some churches still give out food every week.*
- *SNAP benefits have become reduced, and a person has to make a decision how to eat.*
- *Food prices are soaring.*
- *I have two grandkids that eat a great deal, and we sometimes run out of food.*
- *When organizations in the community have food giveaways the lines are extremely long, indicating there is a lot of food insecurity in our area.*

- *The choice of food may not always be fresh or of good quality and if it is then it's probably not affordable. Fresh fruits and vegetables are not affordable and if you do not qualify for WIC then you take the cheaper options...sugars, starches, processed food.*
- *Food is extremely expensive and not enough funds given for SNAP.*
- *I still have struggles with buying groceries.*
- *I believe everyone should be eligible for food stamps. The U.S. has plenty of resources to help people struggling with food in other countries, but we don't help our own people. There are organizations that help with food, but it seems like America could do more.*
- *I can't understand for the life of me why a senior citizen over 65 on a fixed income can only receive $23 a month in food stamps.*
  When able body adults without dependents get around $200 or more a month for the next 3 years. I don't understand why a senior who's worked is only available to get $23. Nobody can live off for $23 a month. This needs to be addressed It is a crying shame that we have worked all our lives, and this is to treatment we get.

Transportation Comments:

- *We need public transportation in Rockdale.*
- *Transportation could play a major part in health and help for older citizens.*
- *I see people having to talk to and from Wal-Mart all the time.*
- *My car is 18 years old. I'm afraid it will stop working or need repairs.*
- *People need transportation so they can get to work.*
- *There is no transportation in this community.*
- *Rockdale does not have a bus line at all.*
- *Marta mobility doesn't service these seniors Appointments on the weekends, We have wheelchairs people, Marta Expect us to walk 1/2 of mile for Marta Mobility to get a Ride.*
- *When you are low-income without transportation it is hard to survive.*
- *There is a strain on maintaining employment due to transportation. If you don't have a car then you just won't be employed in Gwinnett county. High school children can't even work because there is no public transportation. Extremely low-income homes can't secure employment because of transportation issues. There are jobs but being able to get to work is next to impossible.*
- *We need transportation in our area we are not within the required distance for MARTA mobility, so our residents depend on family, uber or Lyft and some neighbors and that's at a cost...*
- *There is no public transportation in my area, and taking an Uber or Lyft isn't affordable for many.*
- *I do not drive and have never had a car.*
- *My car has a major oil leak, and I can't afford to get it fixed.*
- *I used to be on a bus line, but now we are not.*
- *Car insurance has increased by so much, and the repairs I need on my car are a financial strain and stress. I had to drive around for five months with horrible breaks, and I don't like risking my family's safety.*
- *I don't have the money to get a new or used car.*
- *Many seniors on low incomes are driving older model vehicles in bad shape.*
- *Folks don't have extra money to keep their cars up due to inflation.*
- *Because I have trouble breathing, I cannot walk to the bus stop half a mile away, and because my income is very limited, I cannot afford an Uber or taxi. Getting a ride is impossible due to the work schedules of my friends and family.*
- *Repairs are expensive and labor costs are unaffordable. The cost for new tires and brakes are expensive.*

- *I have a 2016 car, my engine light is on, and I took to O'Reilly and one code isn't so bad but the other I know is expensive and there's a probability that I don't need a new part, but I know the mechanics will not only charge me 100.00 just to read the codes, I've tried to save some money, but it takes so long. So, I've been driving my car with engine light on, only driving short distances in my community praying that my car doesn't die or I'm not ruining it.*
- *It is difficult to get help with getting major repairs as the insurance rates keeps going up in GA and there are not any agencies to help with costly car repairs.*
- *Being a person with a reputation disability and low income. It's extremely difficult to find a reliable company to take me back and forth to my dialysis appointments and doctor's appointments reliably. At this point you are at the mercy of the individuals who work for the company and the company itself. So many companies are unsafe, understand, poor management leadership skills, and incompetent and reliability and consistency. Consistency is key because with a good consistent business and workers if by chance something does happen that was unplanned or an act of God then it would be understood. But inadequate service is the consistency then you expect them not to do their job accordingly.*
- *I had my car since 2013 it was a 2012. It was a good car. Since I moved to GA, I have not been able to find a reliable mechanic. I have been taken advantage of several times.*
- *I can only afford an older model vehicle; this leads to more repair costs.*
- *People cannot afford the higher cost of insurance.*
- *Many people do not have their own transportation and have to rely on public transportation.*
- *I have purchased three lemon cars. I'm 67 years old and had to walk 3 miles daily to and from the bus stop for a few months because I didn't have a car.*
- *I don't have a ride.*
- *With low-income, it is hard to get your car repaired when it breaks down.*
- *MARTA is the most affordable source for me, but they are not dependable regarding pickup times. They will bump you with adding trips that make you late for your appointment.*
- *If mechanics/repair places would provide free rides back to residence or work (within a reasonable distance), it would allow people to leave their car for repair work. It is inconvenient to have to wait three or four hours while work is being done.*
- *One time I took the bus. I had to wait for the bus, then ride a few miles to transfer, and then wait close to 30 minutes for the next bus before riding less than 2 miles to where I got off. It was time consuming, but I had no one to pick me*
- *A person needs to be employed to get the transportation problems fixed.*
- *MARTA bus routes have been cut. If I was to ride MARTA, I would have to walk a mile and a half to the train station. I fear that train station because I was once assaulted there and spent 10 days in the hospital.*
- *I do not have a car.*
- *It is hard to find a trustworthy mechanic, and car repairs can be expensive.*
- *An affordable, dependable, and low maintenance cost vehicle will definitely reduce the stress in maintaining our transportation needs.*
- *People don't have the money the need to maintain a car.*
- *Lots of us just can't afford to buy a vehicle anymore.*
- *The rising cost of auto insurance makes it hard.*
- *I use public transportation and the service is good.*
- *I have an old Nissan Sentra the insurance is high not to mention never had an accident. Can't really afford it bit I need to get to work .I have to keep it up because I can't afford a new one because I have to struggle to keep a roof over my head.*
- *People don't have a car. That is the reason they don't have transportation.*

- *Low-income people are forced to pay higher insurance rates because they use your credit as a factor to rate you for insurance and it is a cycle and discriminatory. It keeps you paying higher costs, making your living unaffordable. It is a type of systemic oppression and racism.*
- *The cost of insurance, gas, auto repairs, and annual tag renewals are difficult.*
- *Even if you have transportation finding someone to take care of it for you is very expensive*
- *The cost to have an automobile repaired is unaffordable to many and most cars are older models and sometimes the community auto repair shops take advantage of this.*
- *It costs too much to drive a car.*
- *The prevalence of uninsured motor vehicles in this city is out of control. This affects all who live here, because our area's insurance rates have skyrocketed over most of the U.S., making it even MORE unaffordable! Repair costs are outlandish as repair parts and labor are affordable to many. Driving a 30 yr. old vehicle, myself, I dread a breakdown!*
- *I can't afford a newer car and the cost of insurance.*
- *Having an older model vehicle the constant repairs, costs along with finding a trustworthy mechanic is extremely stressful at your most vulnerable financially.*
- *We just don't have the money for all the high repairs and can't trust the mechanic to do the right thing.*
- *The newer cars are much more expensive to maintain upkeep. I'm blessed with a son that's mechanically inclined and services my car when needed. I'm seriously concerned for the future gasoline prices, especially for the majority of people that couldn't afford electric vehicles.*
- *Vehicle repairs are costly and often take people's food money in order to repair their vehicle.*
- *I have need and oils changes and breaks for a while now but can't afford it.*
- *Cost of repairs and insurance keep going up*
- *Most households are run by Single Parents already struggling so car repairs at to that burden. I don't have that problem My Son and I are approved for Marta Mobility and We use Medicaid transportation also, so We have reliable transport to go where We want but that's not the case for All.*
- *Maintenance can get expensive*
- *Need a senior only transportation service*
- *I think too many insurance plans are very high, even for drivers who are not high risk.*
- *It is hard to find a trustworthy mechanic.*
- *Upkeep is expensive.*
- *Personal transportation is cost prohibitive. The cost of used vehicles has skyrocketed since the pandemic and public transportation is unreliable.*
- *I personally do not have a vehicle anymore due to not being able to afford to have mine fixed. The motor blew before I could save enough to have it repaired.*
  One of my daughters lost a job because of unreliable vehicle. Due to not being able to keep car in running condition which caused her to not being able take it into work.
  Another daughter driving w no insurance due to it costing $600+ a month for just liability. Gets caught, goes to jail, loses job, loses house
  and is homeless still over a year later.
- *View Response*
- *Because of low wages and high rent, there are no funds leftover to purchase cars, pay insurance, or pay for maintenance. Insurance rates have risen significantly, mechanics charge $50 and up for a simple oil change. Everything is about more and more money! Increasing wages for those who do all the work to keep the communities operating, are often ignored! Community members are in need to reasonable training, to try to help them obtain higher paying jobs!*
- *I need transportation to get to the grocery store.*

- *Car maintenance is expensive, and lack of funds or personal finance hinders a person from taking proper care of their personal car which is used mainly for transportation to work.*
- *Low income not enough to cover high cost of vehicle and insurance*
- *Looking at the stats most have their license suspended because of no insurance, tickets or child support.*
- *Car insurance is ridiculously high.*
- *The financial cost a getting, buying and repairs for a car*
- *You can't afford a car in Georgia anymore, and MARTA doesn't run adequately. They don't have enough workers to supply busses on time in areas where people may work.*
- *Trustworthy mechanics are rare.*
- *I have been in accidents with people who are not insured in my area over the years. I see older cars still being driven, sometimes with cracked windshields or other issues. Even some ride share drivers have cracked windshields or brake issues I have ridden with. My car is 15 years old itself. I try my best to keep it maintained but have needed help from my church for that at times.*
- *There is a lack of sufficient funds to cover auto maintenance, insurance, and upkeep. You need a job with decent income and benefits that will help offset the maintenance of your automobile.*
- *I can't afford a car and I have a job at Emory hospital and can't get there.*
- *High repair costs lead to financial strain - to keep up on timely bill payments*
- *People who work certain shifts needs reliable transportation*
- *Sometimes you just don't have the funds to get it fixed so you do what you can to get by*
- *There are so many, especially low-income households that can't afford a car let alone any form of personal transportation.*
- *I don't have enough income to support a personal transportation option.*
- *Auto maintenance is expensive*
- *Most of our community members are not able to purchase vehicles that are in good working order. Older models are more affordable.*
- *They need more public transportation.*
- *There should be more options for commutable, public transportation.*
- *Some of the transportation options run late quite often and seniors do not get to their doctor appointments on time.*
- *Some just can't afford transportation*
- *The cost of gas is high and makes it difficult for people to fill their tanks. Some families have poor credit which impacts their ability to get reasonable interest rates. This makes the costs of transportation higher. Although costs are going up, salaries are not.*
- *gas and car insurance are too high*
- *Monthly car payments are unaffordable, and insurance has increased even if the customer hasn't filed a claim.*
- *Many low-income residents do not have cars.*
- *Several family's unforeseen circumstances are related to unreliable transportation or out of pocket auto expenses. Some clients have asked if we assist with the costs to repair vehicles.*
- *Yes, my truck needed transmission fluid flush, oil change.*
- *Unreliable transportation is prevalent in job loss.*

Family Comments:

- *We have people that are having to live with others, even though they are being mistreated. They can't do anything about it if they want to keep a roof over their head.*
- *Elderly abuse can be seen when there are no caring relatives. It is hard to help in this situation unless you witness the abuse.*

- *Many abused people are not in a healthy mental state and do not know what to do or where to turn for help.*
- *Children of abusive parents are at the mercy of the police and court system to assist them but are so often kept in that unsafe home. Abused people, both young and old need an advocate for them.*
- *I'm a senior and live alone. My children (I have 2 sons) have their hands full caring for their families. They help with transportation when they can, but rarely are able to help financially*

Community Comments:

- *People don't feel safe inside or leaving home because of the increase of crime, especially against the elderly.*
- *Crime is getting worse.*
- *I have lived in Gwinnett since 1984 and I have never seen crime like it is now.*
- *The crime rate in DeKalb is getting worse and the efforts of law enforcement are low. Overall, the eastside of Atlanta is going downhill.*
- *I've come to realize that one of the reasons the system doesn't always work as smoothly as it should, is because of wrongful arrests. It's incredibly disheartening when hardworking individuals, who are already contributing to society, get caught up in this mess. And what's worse, they often end up being charged with serious offenses without any real evidence to support it. The consequences are really tough on them. They find themselves stuck in a never-ending cycle, unable to return to their jobs because their charges need to be cleared. Can you imagine the frustration and helplessness they must feel? It's not just a matter of days or weeks; sometimes it takes over a year just to get a court date to clear their names and records.*
- *I've had problems getting in trouble with the law.*
- *I feel that anyone with a criminal record regardless of what it is should be treated fairly. Everyone makes mistakes and it take others longer to understand.*
- *Newton County penal system for adults and juvenile is designed to oppress us. When you serve your time and released, you're still in jail .Paying probation when you're a felon doesn't make sense. Especially when a felon charge equals no job. This increase crime, drug addiction and mental health issues. Your case can be pending and that means no job. Nothing is affordable without a job. There's a program for juveniles is designed school pipeline to jail.*
- *It's still so much Discrimination for it to be 2024. Discrimination contributes to a lot of the situations at hand and for the lack of resources in some cases.*

Partnership for Community Action, Inc.

COMMUNITY ASSESSMENT

2024 REPORT ON POVERTY



SECTION 9

ANALYTICS

2024 COMMUNITY ASSESSMENT

Leading Barriers

Region	#	Barrier	Impacted	LI Survey	Other Survey	Experienced	Unserved	Raw Score	Normalized Score
MOE	1	Individuals lack financial management skills	1,648,650	69	20	104	72	824,630	100.00
2.33%	2	Individuals lack skills & qualifications for employment	1,046,258	58	11	58	46	523,332	63.46
	3	Housing units in the community have substandard conditions	765,792	55	11	193	169	383,358	46.49
Confidence	4	The community has a lack of healthcare providers	670,320	33	3	0	-	335,211	40.65
95%	5	Individuals have poor health	666,712	69	6	393	276	334,190	40.52
	6	Individuals have a lack of income to meet basic needs	624,076	315	43	227	213	312,979	37.95
	7	Individuals have unhealthy addictions	591,424	33	5	10	7	295,781	35.87
	8	The community has a lack of affordable housing units	579,394	264	35	159	133	290,415	35.21
	9	The price of childcare in the community is not reasonable	293,546	44	11	42	30	146,923	17.81
	10	Individuals lack reliable transportation	201,452	77	27	134	109	101,105	12.26

Leading Resident Needs

Region	#	Barrier	Impacted	LI Survey	Other Survey	Experienced	Unserved	Raw Score	Normalized Score
MOE	1	Individuals are housing insecure	615,642	283	45	365	291	308,961	37.46
2.33%	2	Individuals have poor mental health	599,788	115	24	282	201	300,602	36.45
	3	Individuals are at risk of utility disconnection	579,394	233	30	663	200	291,156	35.30
Confidence	4	Individuals have poor physical health	415,992	91	12	111	75	208,343	25.26
95%	5	Individuals are food insecure	151,300	246	35	198	93	76,380	9.26
	6	Individuals live in unsafe home environments	65,370	43	8	25	18	32,800	3.97
	7	Individuals are homeless	976	184	34	68	49	908	0.11

Prioritization Process:

To ensure the accuracy and relevance of our research on poverty in the region served by the Partnership for Community Action, we employed a systematic prioritization process for the survey data collected. This process involved several steps. First, we documented the number of individuals impacted by various poverty-related situations. For situations affecting entire households, the household count was multiplied by the average household size for the region to obtain a more accurate impact assessment. The number of impacted individuals was then multiplied by 0.5 to emphasize the importance of survey data. Surveys from low-income residents were given additional weight by multiplying the responses by 1.5 to highlight their specific experiences and needs. All other survey responses were multiplied by 0.5 to ensure the focus remained on the low-income population while still considering other perspectives. Additionally, low-income residents reporting unmet needs were given a weight of 2 to emphasize the service gaps. Raw scores were calculated by summing the weighted numbers, and these scores were normalized on a scale of 0-100 based on the minimum and maximum values to facilitate comparison.

To evaluate the reliability of our survey data, we calculated the margin of error and confidence level. Our survey included responses from 516 individuals, with 475 identifying as low-income. The proportion of low-income respondents (p) was approximately 0.9207. For a 95% confidence level, the Z-score used was 1.96. The margin of error (E) was calculated to be approximately 0.0233. Therefore, the confidence interval (CI) was determined to be between 0.8974 and 0.9440. This means that with a 95% confidence level, we can assert that the true proportion of low-income individuals in the population falls between 89.74% and 94.40%. The margin of error of ±2.33% indicates the range within which the true value lies, reflecting the precision of our survey results.

The prioritization process and the calculations of the margin of error and confidence level underscore the robustness of our research methodology. By systematically weighting survey responses and emphasizing the experiences of low-income residents, we ensured that our findings accurately represent the challenges faced by the community. The calculated margin of error and confidence level further validate the reliability of our survey data, providing a solid foundation for addressing the identified service gaps and informing policy decisions.

Qualitative Analysis:

Financial Management Skills
Many residents shared their challenges with managing finances due to limited financial literacy. Common themes included difficulty in budgeting, managing debt, and understanding financial products. For example, one resident mentioned, "I often find myself short on cash before the end of the month because I don't know how to budget my expenses properly."

Limited financial management skills lead to increased financial instability and vulnerability. Residents with poor financial literacy are more likely to fall into debt, face difficulties in saving for emergencies, and struggle with day-to-day financial decisions. This exacerbates their economic insecurity and limits their ability to achieve self-sufficiency.

Healthcare Access
Access to healthcare remains a significant concern, with many residents reporting difficulties in obtaining necessary medical care. Issues such as high co-pays, long wait times, and a shortage of healthcare providers were frequently mentioned. One resident noted, "Even with insurance, I can't afford the co-pays for mental health counseling, so I often skip appointments.

Limited access to healthcare leads to untreated medical conditions, which can escalate into severe health problems. Residents are forced to make tough choices between healthcare and other essential needs, negatively impacting their overall well-being. This lack of access also affects mental health, with untreated mental health issues contributing to broader social and economic challenges.

Housing Conditions
Many residents living in substandard housing expressed their struggles with inadequate living conditions. Common issues included mold, pest infestations, and structural problems. A resident shared, "My apartment has mold, and my landlord won't fix it. I worry about my children's health every day."

Substandard housing conditions pose serious health risks and reduce the quality of life for residents. Poor housing exacerbates health problems, including respiratory issues and allergies, and contributes to mental stress and anxiety. Addressing these conditions is crucial for improving residents' health and ensuring a safe living environment.

Educational Attainment
Residents highlighted the importance of education in securing better job opportunities and improving their socio-economic status. However, many reported barriers such as the high cost of education and the need for more job training programs. One resident mentioned, "I have had a hard time finding a good job because of a lack of education."

Low educational attainment limits job prospects and earning potential, trapping residents in low-paying jobs that do not provide economic stability. By improving access to education and vocational training, residents can enhance their skills, increase their employability, and achieve greater financial independence.

Mental Health
Mental health issues are prevalent, with many residents reporting frequent mental distress. Barriers to accessing mental health services include high costs and a shortage of mental health professionals. One resident emphasized, "Mental health services are inadequate for all of Gwinnett County. The need is still great for adults and children/teens in mental health."

Untreated mental health issues can have severe consequences, including reduced productivity, strained relationships, and increased risk of substance abuse. Improving access to mental health services is essential for addressing these issues and supporting the overall well-being of the community.

Food Insecurity
Food insecurity remains a significant issue, with residents struggling to afford nutritious meals. Many rely on food banks and assistance programs to make ends meet. A resident shared, "I worry every day about how to make meals with the limited groceries I have."

Food insecurity affects residents' physical health and increases stress and anxiety. It also has long-term implications for children's development and academic performance. Enhancing food assistance programs and improving access to affordable, nutritious food are critical steps in addressing this issue.

Conclusion
The qualitative analysis of community data reveals deep-rooted challenges that residents face daily. Financial instability, inadequate healthcare access, substandard housing, limited educational opportunities, mental health issues, and food insecurity are interconnected problems that require comprehensive and coordinated interventions. By addressing these issues through targeted programs and policies, the community can make significant strides in improving the quality of life for all residents and fostering long-term economic stability and growth.

Actionable Recommendations

Financial Literacy
To address limited numeracy skills and financial management capabilities among residents, the agency should consider provision of financial literacy workshops, focusing on essential topics such as budgeting, debt management, and understanding financial products. These workshops can be enhanced through partnerships with local financial institutions, which can provide expert-led sessions and free financial counseling. Additionally, developing tutoring programs for adults, possibly using volunteer experts from the community, will further help residents improve their financial literacy.

Healthcare Access
With a high physician-to-resident ratio indicating limited access to healthcare services, the agency may wish to consider establishment of mobile health clinics to provide basic healthcare services in underserved areas. These clinics can be set up in collaboration with local healthcare providers. Expanding telehealth services is also critical, allowing residents in areas with a shortage of providers to access healthcare remotely. Partnering with healthcare organizations to offer these services at reduced costs and organizing health fairs and free medical screening events will further improve healthcare access.

Housing Conditions
The high percentage of substandard housing units necessitates an increase in funding and grants to support housing renovation and improvement programs, focusing on the areas with the most need. Recruiting volunteers for housing repair projects and partnering with local businesses for materials and support can enhance these efforts. Additionally, providing educational workshops for tenants on their rights and responsibilities and how to report and handle substandard housing conditions will empower residents to advocate for better living conditions.

Educational Attainment
To address the higher percentage of residents without a high school diploma, the agency could collaborate with local schools to provide tutoring and educational support programs for students at risk of dropping out. Establishing scholarships and financial aid for residents pursuing their high school diploma or GED, funded by local businesses and community donations, will further support educational attainment. Developing and promoting vocational training programs in collaboration with community colleges and technical schools will also provide alternative pathways for residents to improve their job prospects.

Mental Health Services
Given the severe shortage of mental health professionals and services, the agency could recruit volunteer mental health professionals to provide counseling and support. Partnering with local mental health organizations to offer services and support groups at reduced or no cost will also help address this issue. Launching community awareness campaigns to reduce stigma around mental health and encourage residents to seek help is another crucial step in improving mental health services.

Food Insecurity
To combat high food insecurity rates, the agency could increase support for existing food assistance programs and seek partnerships with local food banks and grocery stores. Promoting and supporting the development of community gardens will provide fresh produce for residents, while nutrition education programs will teach residents how to make healthy, budget-friendly food choices.

Conclusion

By implementing these recommendations and leveraging community partnerships, the agency can effectively address critical needs and enhance the quality of life for residents within the constraints of limited resources. Prioritizing healthcare access through mobile clinics, telehealth services, and community health initiatives; improving housing conditions through renovation programs and tenant education; expanding mental health services through volunteer recruitment and partnerships; enhancing educational attainment through school collaborations and vocational training; and reducing food insecurity through expanded assistance programs and community gardens will ensure the community's well-being and economic stability.

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