

**Monitoring
The Human Condition
on Cape Cod – 2006**

**** Technical Paper 06-001 ****

**An Analysis of Statistically Significant
CHANGES
in The Human Condition on Cape Cod
SINCE NOVEMBER 2004**

**Barnstable County (MA)
Department of Human Services
Information Services**

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CHANGES
in The Human Condition on Cape Cod
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Based upon an initial statistical analyses of changes in responses to questions contained on the Cape Cod Community Survey questionnaire between November 2004 and November 2005.

Table of Contents

	Page
INTRODUCTION.....	7
SUMMARY.....	9
“TRENDS”	15
Positive “Trends”:	17
Dental Care Insurance.....	19
Substance Abuse.....	21
Negative “Trends”:	23
Anxiety and Stress.....	25
Disability and Chronic Illness.....	27
Discrimination.....	29
Fair-To-Poor Health Condition.....	31
Health Insurance Coverage.....	33
Human Services System Capacity.....	35
“Latch-Key” Children.....	37
Obesity/Seriously Overweight Person(s).....	39
Poor Housing Conditions.....	41
Some Child/Youth RISK Factors.....	43
APPENDIX.....	45
A. Socio-Demographic Profile Tables:	
Table A.1 Paying For or Getting Dental Insurance.....	A.1-1
Table A.2a Adult Substance Abuse.....	A.2.a-1
Table A.2.b.1 Experiencing an Alcohol/Drug Problem: ALL Cases.....	A.2.b.1-1
Table A.2.b.2 Experiencing an Alcohol/Drug Problem: Most Needy.....	A.2.b.2-1
Table A.3 Anxiety or Stress.....	A.3-1
Table A.4 Disability or Chronic Illness.....	A.4-1
Table A.5.a Discrimination (due to age, race, etc.).....	A.5.a-1
Table A.5.b Feelings of Discrimination.....	A.5.b-1
Table A.6 Someone in Fair-To-Poor Health.....	A.6-1
Table A.7 Lack of Health Insurance Coverage.....	A.7-1
Table A.8 Services Not Accepting New Patients/Clients.....	A.8-1
Table A.9 “Latch-Key” Child(ren).....	A.9-1
Table A.10 Obesity/Seriously Overweight Person(s).....	A.10-1
Table A.11 Poor Housing Conditions.....	A.11-1
Table A.12 Some Child/Youth RISK Factors.....	A.12-1
B. Definitions: <u>MAJOR</u> Problem and Household Issue Categories.....	B-1
C. Variable Name Cross-Reference.....	C-1
D. <u>MAJOR</u> Household Problem vs. Survey Item Matrix.....	D-1

INTRODUCTION

This Technical Paper documents findings from the initial analysis of those items on the Cape Cod Community Survey which showed statistically significant changes in response between the 2004 data collection and that of the most current year (2005).

This publication consists of a set of twelve separate descriptions of statistically significant changes in survey question responses over the one-year period. Each of the twelve descriptions may or may not indicate a real trend. See Important Note below.

Important Note:

In research circles it is well understood that one cannot ascertain an actual trend without at least three data points (in our case, three years worth of survey data). At present, we have but two years worth of response data from the Cape Cod Community Survey (from the year-end 2004 and year-end 2005 surveys). Thus, true trends cannot yet be determined. However, some directional information (“trends”) can be ascertained from the two years worth of data that we have collected. In this White Paper, we provide such directional information. Obviously, CAUTION must be in order when attempting to interpret what these statistically significant changes actually mean. Next year at this time, following the planned administration of the year-end 2006 survey, we will be better able to delineate true trends—i.e., changes in the human environment on Cape Cod.

Order of Presentation:

The descriptions that follow are listed strictly in alphabetical order. The order of presentation does NOT imply any greater or lesser importance of one item over any other.

Appendix Materials:

Appendix A provides a brief socio-demographic profile of households associated with each of the twelve topics in which response data indicate a significant change over the past year (November 2004 to November 2005). Each of these socio-demographic profiles provides November 2005 survey response percentages for the following survey topics:

- Annual household income
- Poverty and “working poor” status
- Receipt of public financial assistance
- Age ranges of household members,
- Number of adults in household,
- Presence of children in household
- Presence of seniors/elders in household
- Cultural/Ethnic/Racial/Linguistic minority status
- Homeownership/Renter status
- Homelessness/Group housing situation
- Retirement status
- Presence of disability or chronic illness in household
- Geographic region of household location

While not providing a complete picture of the households reporting problems in any of the twelve areas, these socio-demographic profiles do provide a general overview of households reporting the highest level of difficulty in each topic area.

Appendix B provides definitions of the MAJOR problem category variables and of the household issue category variables that form the basis for the correlation analysis shown for each topic and

Appendix C provides a cross-reference between the variable names shown in the tables in Appendix A and the actual question on the survey instrument.

Appendix D provides additional detail on how the MAJOR household problems associate with each of the twelve “trend” topic areas.

SUMMARY

Positive “Trends”

☺ **PROBLEMS AFFORDING/OBTAINING DENTAL INSURANCE Appear To Be Decreasing on Cape Cod**

Over the past year, reports of problems related to being able to afford/obtain dental care insurance have declined significantly in households across Cape Cod.

☺ **SUBSTANCE ABUSE Among Cape Codders Seems To Be Decreasing**

Over the past year, reports of problems related to the abuse of alcohol and drugs have declined significantly in households across Cape Cod.

Negative “Trends”

ANXIETY AND STRESS May Be On The Rise Among Cape Cod’s Most Needy

Reports of anxiety and stress among the Cape’s most needy households have increased significantly in the past year.

DISABILITY AND CHRONIC ILLNESS May Be On The Rise Among Cape’s Most Needy Residents

Over the past year, reports of disability/chronic illness have increased significantly among the Cape’s most needy households.

DISCRIMINATION May be On The Rise on Cape Cod

Reports of two separate facets of “discrimination” have increased significantly on Cape Cod in the past year.

HEALTH CONDITIONS May Be On the Decline Among Cape Cod’s Most Needy

Over the past year, reports of having some household member being in only “*fair-to-poor health*” increased considerably among the Cape’s most needy households.

HEALTH INSURANCE COVERAGE Seems To be Declining Among Cape Cod’s Most Needy Residents

Over the past year, reports of having some household member without health insurance coverage increased considerably in the Cape’s most needy households.

HUMAN SERVICES SYSTEM CAPACITY May Not Be Keeping Pace With Cape Cod’s Population Growth?

Reports of practices, clinics, and other human services, “*not accepting new patients or clients*” have increased significantly on Cape Cod over the past year.

LATCH-KEY CHILDREN Appear To be Increasing Among Family Households

Over the past year, reports of having, “*a child (age 17 or younger) arrive home from school to a house where NO ADULT is present*” have increased significantly (skyrocketed!) in Cape Cod family households.

OBESITY Appears To Be On the Rise Among Cape Cod’s Most Needy

Over the past year, reports of having, “*seriously overweight person(s) in household*” have increased significantly (skyrocketed!) among the Cape’s most needy households.

 **POOR HOUSING CONDITIONS May Be Increasing Among The Cape's Most Needy Residents**

Over the past year, reports of their, "*housing now in need of major repair to make it truly habitable*" have increased significantly among the Cape's most needy households.

 **SOME YOUTH RISK FACTORS Appear To Be Increasing Among The Cape's Most Needy Family Households**

Over the past year, reports of three different child/youth RISK Factors have increased considerably in the Cape's most needy households.

“TRENDS”

Positive “Trends”

☺ PROBLEMS AFFORDING/OBTAINING DENTAL INSURANCE Appear To Be Decreasing on Cape Cod

Over the past year, reports of problems related to being able to afford/obtain dental care insurance have declined significantly in households across Cape Cod. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, *Monitoring The Human Condition on Cape Cod – 2006*, researchers from Barnstable County show that year-round Cape residents are reporting significantly fewer problems in this aspect of their “human environment.” The proportion of sampled households reporting problems obtaining dental care insurance has declined nearly twenty percent (18%) over one year ago. The level of *seriousness* of this problem in Cape homes still reporting trouble obtaining dental care insurance for one or more member shows a fifteen percent (15%) decrease over the past year.

BUT PROBLEMS PAYING FOR OR GETTING DENTAL CARE INSURANCE STILL EXIST: (See also, Appendix A, Table A.1)

Six-in-ten (60%) of sampled households still reporting problems obtaining dental care insurance say that in their household this is a “Major” problem.

When compared to the larger sample of Cape households, households reporting the highest levels of difficulties in obtaining dental insurance tend to: have a very low annual income (less than \$30,000), be living under 200% of poverty (51% are below), be “working poor,” have all adults under age 55, be a single parent family, be a cultural/ethnic or racial minority, have one or more disabled or chronically ill member, be “homeless” or be living in a group setting, and live in the Mid-Cape area--most especially in Hyannis. Three-in-ten (30%) of these households are receiving some form of public assistance. These households *generally* are NOT homeowners and DO NOT include persons over age 55.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with obtaining dental care insurance report a range of other problems. Top among problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (100% report this a MAJOR problem)
- MENTAL HEALTH-Related Problems (37% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- Difficulties securing adequate BASIC NEEDS are extremely highly correlated with SUBSTANCE ABUSE/EMOTIONAL issues in the household and with DISCRIMINATION.
- SUBSTANCE ABUSE/EMOTIONAL issues in the household are highly correlated with DISCRIMINATION.



SUBSTANCE ABUSE Among Cape Codders Seems To Be Decreasing

REPORTS OF ADULT SUBSTANCE ABUSE HAVE DECLINED

Over the past year, reports of two separate problems related to the abuse of alcohol and drugs have declined significantly in households across Cape Cod—these are; “*adult substance abuse*” and “*experiencing an alcohol and/or drug problem*” in the household. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, ***Monitoring The Human Condition on Cape Cod – 2006***, researchers from Barnstable County show that year-round Cape residents are reporting significant change in this aspect of their “human environment.” The proportion of sampled households reporting adult substance abuse problems has declined up to twenty-five percent over one year ago. The level of *seriousness* of adult alcohol/-drug abuse problems in Cape homes shows a thirty percent (30%) decrease over one year ago.

BUT ADULT ALCOHOL/DRUG ABUSE STILL EXISTS: (See also, Appendix A, Table A.2.a)

More than four-in-ten (44%) of sampled households that report problematic levels of adult alcohol/-drug abuse say that in their household this is a “Major” problem.

When compared to the larger sample of Cape households, households reporting the highest levels of adult substance abuse tend to: be the “poorest of the poor” (annual income under \$15,000), be living under 200% of poverty (50% are below), be “working poor,” have all adults under age 45, be a single parent family, be a cultural/ethnic or racial minority, have one or more disabled or chronically ill member, be “homeless” or be living in a group setting, and live in the Mid-Cape area--most especially in Hyannis. Four-in-ten (41%) of these households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT retirees, NOT two-adult households, NOT located on the Upper-Cape or on the Lower/Outer-Cape, and DO NOT include persons over age 45.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with adult abuse of alcohol or drugs report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MENTAL HEALTH-Related Problems (72% report this a MAJOR problem)
- MONEY-Related Problems (52% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

Difficulties securing adequate BASIC NEEDS are highly correlated with both SUBSTANCE ABUSE/EMOTIONAL issues in the household and with CHILD BEHAVIORAL issues.

- SUBSTANCE ABUSE/EMOTIONAL issues are highly correlated with CHILD BEHAVIORAL issues.

REPORTS OF EXPERIENCING AN ALCOHOL AND/OR DRUG PROBLEM HAVE DECLINED (See also, Appendix A, Table A.2.b)

In a related analysis, Barnstable County researchers have shown that the proportion of sampled households experiencing problems with alcohol and/or drugs (among either adults or youth) has declined by more than one-third (36%) over one year ago. Further the level of *seriousness* of alcohol and/or drug problems in Cape homes still reporting such problems has seen up to a thirty-nine percent (39%) decrease over one year ago.

When compared to the larger sample of Cape households, households reporting the highest levels of alcohol and/or drug problems tend to: be the “poorest of the poor” (annual income under \$15,000), be living under 200% of poverty (47% are below), be “working poor,” have all adults under age 55, be a single parent family, be a cultural/ethnic or racial minority, have one or more disabled or chronically ill member, be “homeless” or be living in a group setting, and live in the Mid-Cape area. More than four-in-ten (43%) of these households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT retirees, NOT two-adult households, NOT located on the Upper-Cape or on the Lower/Outer-Cape, and DO NOT include persons over age 55.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with problems with alcohol and/or drug abuse report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MENTAL HEALTH-Related Problems (74% report this a MAJOR problem)
- MONEY-Related Problems (55% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- Difficulties securing adequate BASIC NEEDS are extremely highly correlated with SUBSTANCE ABUSE/EMOTIONAL issues in the household.
- Difficulties with securing adequate BASIC NEEDS are highly correlated with CHILD BEHAVIORIAL issues and with DISCRIMINATION.
- SUBSTANCE ABUSE/EMOTIONAL issues are highly correlated with CHILD BEHAVIORIAL issues and with DISCRIMINATION.
- Difficulties securing adequate CHILDCARE are highly correlated with DISCRIMINATION.

Negative “Trends”

☹ **ANXIETY AND STRESS May Be On The Rise Among Cape Cod's Most Needy Residents**

A larger proportion of the Cape's most needy households report high levels of anxiety or stress than just one year ago. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, *Monitoring The Human Condition on Cape Cod – 2006*, researchers from Barnstable County show that year-round Cape residents are reporting significant increases in this aspect of their “human environment.” While about the same percentage of sampled most needy households, report “*having a lot of anxiety or stress in the household,*” a larger proportion of these households report anxiety and stress as a more serious problem. In fact, the average level of *seriousness* has risen by fifteen percent (15%).

ANXIETY AND STRESS: (See also, Appendix A, Table A.3)

When compared to the larger sample of most needy households, households reporting high levels of stress or anxiety tend to: be the “poorest of the poor” (annual income under \$15,000), be living under 200% of poverty (60% are below), be “working poor,” have all adults under age 65, be a single parent family, be a linguistic minority, have one or more disabled or chronically ill member, and live on the Upper-Cape. Nearly one-half (49%) of these most needy households are receiving some form of public assistance. These most needy households *generally* are NOT homeowners, NOT retirees, NOT a two-adult household, NOT located on the Lower/Outer-Cape, and DO NOT include persons over age 65.

Associated Problems and Issues: (Apparent “Linkages”)

Most needy Cape Cod households that seem to be struggling the most with high levels of anxiety or stress report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (63% report this a MAJOR problem)
- HOUSING-Related Problems (38% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- Difficulties securing adequate BASIC NEEDS are highly correlated with DISCRIMINATION.
- Difficulties securing adequate BASIC NEEDS are moderately correlated with securing adequate CHILDCARE.

DISABILITY AND CHRONIC ILLNESS May Be On The Rise Among The Cape's Most Needy Residents

Over the past year, reports of the incidence of disability/chronic illness have increased significantly among the Cape's most needy households. Persons living in our most needy households seem to be sicker than previously reported. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, *Monitoring The Human Condition on Cape Cod – 2006*, researchers from Barnstable County show that Cape residents are reporting significantly more problems in this aspect of their "human environment." The proportion of our most needy households reporting one or more member with a disability and/or a chronic illness has increased by nearly two-thirds (63%) over one year ago.

DISABILITY AND CHRONIC ILLNESS: (See also, Appendix A, Table A.4)

When compared to the larger sample of most needy Cape households, households reporting the highest levels of disability and/or chronic illness tend to: be the "poorest of the poor" (annual income under \$15,000), be living under 200% of poverty (60% are below), be "working poor," have all adults under age 65, be a racial minority, be "homeless" or be living in a group setting, and live in the Mid-Cape area--most especially in Hyannis. Two-thirds (66%) of these most needy households are receiving some form of public assistance. These most needy households are *generally* NOT homeowners, NOT retirees, NOT two-adult households, NOT located on the Upper-Cape, and DO NOT include persons over age 65.

Associated Problems and Issues: (Apparent "Linkages")

Cape households that seem to be struggling the most with, "*disability and/or chronic illness*" report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MENTAL HEALTH-Related Problems (68% report this a MAJOR problem)
- MONEY-Related Problems (64% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- Difficulties securing adequate BASIC NEEDS are highly correlated with DISCRIMINATION.
- Difficulties securing adequate CHILDCARE are highly correlated with DISCRIMINATION.

DISCRIMINATION May Be On The Rise on Cape Cod

Two separate facets of “discrimination” may be on the rise on Cape Cod—these being, reports of discrimination relating to “*race, age, language, sexual identity/ orientation, etc.*” and Cape residents reporting “*feelings of discrimination.*” These perceptions influence a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, ***Monitoring The Human Condition on Cape Cod – 2006***, researchers from Barnstable County show that year-round residents are reporting significant increases in two key aspects of their “human environment,” as follows:

1. DISCRIMINATION RELATED TO RACE, AGE, LANGUAGE, SEXUAL IDENTITY/ORIENTATION

(See also, Appendix A, Table A.5.a)

Reports of discrimination relating to “*race, age, language, sexual identity/ orientation, etc.*” have risen significantly from last year. Many of the households surveyed have reported problems with these forms of discrimination. Instances of discrimination are highest among the Cape’s most needy residents, where in one year, the percentage of households reporting these types of discrimination rose from 10% to 23%. Overall, across a fairly representative sample of Cape Cod households, one-in-fourteen households surveyed (7%) reports such problems—that measure is up from less than 5% just one year ago. Also, the degree of *seriousness* of these types of discrimination has increased, with at least one-third more respondents reporting these problems as “Major” than did similar respondents one year ago.

When compared to the larger sample of most needy households, households reporting high incidences of discrimination due to, “*race, age, language, sexual identity/ orientation, etc.*” tend to: have a very low annual income (less than \$30,000), be living under 200% of poverty (76% are below), be “working poor,” have all adults under age 55, be a single parent family, be a cultural/ethnic or racial minority, be “homeless” or be living in a group setting, have one or more disabled or chronically ill member, and live in the Mid-Cape—most especially in Hyannis. More than four-in-ten (42%) of these most needy households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT childless, NOT retirees, NOT one adult living alone, NOT a two-adult household, NOT located on the Upper-Cape or on the Lower/Outer-Cape and DO NOT include persons over age 55.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with discrimination due to, “*race, age, language, sexual identity/ orientation, etc.*” report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (84% report this a MAJOR problem)
- MENTAL HEALTH-Related Problems (75% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- Difficulties securing adequate CHILDCARE are extremely highly correlated with CHILD BEHAVIORAL issues in the household and with DISCRIMINATION.

2. “FEELINGS OF DISCRIMINATION” AS A BARRIER TO OBTAINING NEEDED HELPING SERVICES

(See also, Appendix A, Table A.5.b)

Reports of Cape Cod residents having “*feelings of discrimination*” which create a real or imagined barrier to their obtaining needed on-Cape healthcare or other human services have risen significantly from last year, particularly among our most needy residents. Of the many Cape Cod households where someone made an attempt to obtain help for an identified healthcare or other human service need, nearly one-quarter of respondents (23%) report household members feeling some sort of discrimination as a barrier to receiving the needed service(s)—a rise of 6 full percentage points in just one year. The highest levels of such feelings of discrimination are being reported by the Cape’s most needy residents. Further, the degree of *seriousness* of this barrier (“*feelings of discrimination*”) has increased, with more respondents reporting that in their household this barrier is “Very Serious” or “So Serious Did NOT Get Help,” than did similar respondents one year ago.

When compared to the larger sample of Cape Cod households, households reporting a high prevalence of “*feelings of discrimination*” tend to: be the “poorest of the poor” (annual income under \$15,000), be living under 200% of poverty (73% are below), be “working poor,” have all adults under age 55, be a single parent family, be a cultural/ethnic, linguistic, or racial minority, have children, and live in the Mid-Cape—most especially in Hyannis. Four-in-ten (41%) of these households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT retirees, NOT one adult living alone, NOT a two-adult household, NOT located on the Upper-Cape or on the Lower/-Outer-Cape and DO NOT include persons over age 55.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with, “*feelings of discrimination*” report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (76% report this a MAJOR problem)
- HOUSING-Related Problems (52% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- SUBSTANCE ABUSE/EMOTIONAL issues are extremely highly correlated with DISCRIMINATION.
- Difficulties securing adequate BASIC NEEDS are highly correlated with CHILD BEHAVIORAL issues in the household and with DISCRIMINATION.
- SUBSTANCE ABUSE/EMOTIONAL issues are highly correlated with CHILD BEHAVIORAL issues in the household.
- Difficulties securing adequate CHILDCARE are highly correlated with CHILD BEHAVIORAL issues in the household.

FAIR-TO-POOR HEALTH CONDITIONS May be On the Decline Among Cape Cod's Most Needy Residents

Over the past year, reports of having some household member being in only “*fair-to-poor health*” increased considerably in the Cape’s most needy households. Persons living in our most needy households seem to be less likely to be in at least “good” health than just one year ago. This is a trend uncovered by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, *Monitoring The Human Condition on Cape Cod – 2006*, researchers from Barnstable County indicate that year-round Cape residents living in our most needy households are reporting considerably more problems in this aspect of their “human environment.” Due to limited sample sizes, County researchers are not able to definitely prove (or disprove) that this increase in most needy households having someone in only fair-to-poor health is statistically significant. However, this indicator is definitely pointing in a NEGATIVE direction.

BEING IN ONLY “FAIR-TO-POOR” HEALTH: (See also, Appendix A, Table A.6)

When compared to the larger sample of most needy Cape households, households reporting one or more member(s) in only “fair-to-poor” health condition tend to: be the “poorest of the poor” (annual income under \$15,000), be living under 200% of poverty (68% are below), be “working poor,” be one adult living alone, be “homeless” or be living in a group setting, or be living in Senior Housing or an Assisted Living unit, and live in the Mid-Cape area—most especially in Hyannis. Almost two-thirds (63%) of these most needy households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT two-adult households, and are NOT located on the Upper-Cape.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with one or more member in only “*fair-to-poor*” health condition report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (83% report this as MAJOR problem)
- MENTAL HEALTH-Related Problems (49% report this as MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- Difficulties securing adequate BASIC NEEDS are highly correlated with DISCRIMINATION.
- SUBSTANCE ABUSE/EMOTIONAL issues are highly correlated with CHILD BEHAVIORIAL issues in the household.
- Difficulties securing adequate CHILDCARE are highly correlated with DISCRIMINATION.



HEALTH INSURANCE COVERAGE Seems To Be Declining Among Cape Cod's Most Needy Residents

Over the past year, reports of having some household member without health insurance increased considerably among the Cape's most needy households. Persons living in our most needy households seem to be less likely to have health insurance coverage than just one year ago. This is a "trend" uncovered by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, ***Monitoring The Human Condition on Cape Cod – 2006***, researchers from Barnstable County indicate that Cape residents living in our most needy households are reporting considerably more problems in this aspect of their "human environment." Due to limited sample sizes, County researchers are not able to definitely prove (or disprove) that this increase in most needy households having someone who lacks health insurance is statistically significant. However, this indicator is definitely pointing in a NEGATIVE direction.

LACK OF HEALTH INSURANCE COVERAGE: (See also, Appendix A, Table A.7)

When compared to the larger sample of most needy Cape households, households reporting one or more member(s) without health insurance coverage tend to: be low-to-medium income (have an annual income between \$15,000 and \$45,000, but with some up to \$100,000), be "working poor," have most adults under age 65, have children, be a cultural/ethnic or linguistic minority, be "homeless" or be living in a group setting, and live in the Mid-Cape area--most especially in Hyannis. Over one-quarter (28%) of these most needy households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT retirees, NOT two-adult households, NOT located on the Upper-Cape or on the Lower/-Outer-Cape, and DO NOT include persons over age 65.

Associated Problems and Issues: (Apparent "Linkages")

Cape households that seem to be struggling the most with one or more household member lacking health Insurance coverage report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (83% report this as MAJOR problem)
- MENTAL HEALTH-Related Problems (49% report this as MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- SUBSTANCE ABUSE/EMOTIONAL issues in the household are moderately correlated with CHILD BEHAVIORIAL issues.
- Difficulties securing adequate BASIC NEEDS are moderately correlated with difficulties securing adequate CHILDCARE.

HUMAN SERVICES SYSTEM CAPACITY May Not Be Keeping Pace With Cape Cod's Population Growth

We hear it time and time again—"I can't find a doctor, dentist, or therapist when I need one." "Professional practitioners are in short supply here on the Cape." "I had to go all the way up to Boston to find a specialist for my problem." These types of comments usually follow receipt of a message saying that the requested professional, clinic, or human service organization is, "*not accepting new patients or clients*." Reports of practices, clinics, and other human services, "*not accepting new patients or clients*" seem to be on the increase here on the Cape. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, *Monitoring The Human Condition on Cape Cod – 2006*, researchers from Barnstable County show that year-round Cape residents are reporting significant increases in this aspect of their "human environment."

IS THE CAPE'S HUMAN SERVICES CAPACITY KEEPING PACE? (See also, Appendix A, Table A.8) During the past year, reports of services, "*not accepting new patients or clients*" being a barrier to folks obtaining needed on-Cape healthcare or other human services have increased significantly to where today, nearly one-half of all households (47%) that encountered any barrier(s) to accessing services cite services, "*not accepting new patients or clients*" as a serious impediment to obtaining needed services. This percentage is up from 40% of similar households just one year ago. A much higher percentage of the Cape's most needy households report encountering such barriers when trying to get needed help than does the overall resident population.

When compared to the larger sample of Cape Cod households, households reporting services, "*not accepting new patients or clients*" tend to: be the "poorest of the poor" (annual income under \$15,000), OR have an annual income between \$45,000 and \$100,000, be living under 200% of poverty (42% are below), be "working poor," have all adults under age 55, be a single parent family, be a cultural/-ethnic or racial minority, have children, and live on the Upper-Cape. Nearly three-in-ten (29%) of these households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT retirees, NOT one adult living alone, NOT located on the Lower/Outer-Cape, and DO NOT include persons over age 55.

Associated Problems and Issues: (Apparent "Linkages")

Cape households that seem to be struggling the most with on-Cape services, "*not accepting new patients or clients*" report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (61% report this a MAJOR problem)
- HOUSING-Related Problems (33% report this a MAJOR problem)
- MENTAL HEALTH-Related Problems (32% report this as MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- Difficulties securing adequate BASIC NEEDS are highly correlated with DISCRIMINATION and with difficulties securing adequate CHILDCARE.
- SUBSTANCE ABUSE/EMOTIONAL issues in the household are highly correlated with DISCRIMINATION.
- Difficulties securing adequate BASIC NEEDS are moderately correlated with SUBSTANCE ABUSE/EMOTIONAL issues in the household.
- SUBSTANCE ABUSE/EMOTIONAL issues in the household are moderately correlated with CHILD BEHAVIORAL issues.

☹ LATCH-KEY CHILDREN Appear To Be Increasing Among Cape Cod's Family Households

Over the past year, reports of having, “a child (age 17 or younger) arrive home from school to a house where NO ADULT is present” have increased significantly (sky rocketed!) in the Cape’s family households. Cape Cod young people seem to be much more likely to come home to a house where there is no adult supervision than previously reported. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, *Monitoring The Human Condition on Cape Cod – 2006*, researchers from Barnstable County show that year-round Cape residents are reporting significantly more problems in this aspect of their “human environment.” The proportion of family households reporting one or more child returning home after school to a house without adult supervision has increased by at least 50% over one year ago, and especially so among our most needy households.

“LATCH-KEY” CHILD(REN):

ALL Family Households Reporting “Latch-Key” Child(ren) (See also, Appendix A, Table A.9)

When compared to the larger sample of Cape Cod family households, those reporting “latch-key” young people/persons generally tend to: have a moderately high annual income (between \$30,000 and \$100,000), have ALL adults ages 45-54, have three or more children, be homeowners, and reside on the Upper-Cape, and especially in Falmouth and Mashpee. These family households are *generally* NOT renters, NOT located in the Mid-Cape or on the Lower/Outer-Cape and especially NOT in Hyannis, and DO NOT include persons over age 55.

Most Needy Family Households Reporting “Latch-Key” Child(ren) (See also, Appendix A, Table A.9)

The most needy Cape Cod family households reporting a lack of adult after-school supervision for their children (having “latch-key” children) tend to: be living under 200% of poverty (57% are below), be “working poor,” be a single parent household, be a linguistic or racial minority, and reside on the Upper-Cape, and most especially in Mashpee. Well over one-quarter (28%) of these most needy family households are receiving some form of public assistance. These most needy family households are *generally* NOT two-adult households, NOT located in the Mid-Cape or on the Lower/-Outer-Cape and especially NOT in Hyannis, and DO NOT include persons over age 55.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that are most likely to have “latch-key” young people report a range of other issues and problems. Top among the problems reported by these Cape family households are the following: (See Appendix B for definitions of MAJOR Problem categories)

[Percentages Notation: ALL family households % – Most Needy family households %]

- MONEY-Related Problems (33% - 67% report this a MAJOR problem)
- MENTAL HEALTH-Related Problems (23% - 67% report this a MAJOR problem)
- HOUSING-Related Problems (18% - 51% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- CHILD BEHAVIORAL issues in the household are highly correlated with SUBSTANCE ABUSE ISSUES and moderately correlated with difficulties securing adequate BASIC NEEDS.
- Difficulties securing adequate CHILDCARE are highly correlated with difficulties securing adequate BASIC NEEDS and with SUBSTANCE ABUSE issues.

- SUBSTANCE ABUSE issues are highly correlated with difficulties securing adequate BASIC NEEDS.
- DISCRIMINATION is highly correlated with difficulties securing adequate BASIC NEEDS and CHILDCARE, plus DISCRIMINATION is moderately correlated with SUBSTANCE ABUSE issues in the household.

OBESITY Appears To On The Rise Among Cape Cod's Most Needy Residents

Over the past year, reports of having, “seriously overweight person(s) in household” have increased significantly (sky rocketed!) among the Cape’s most needy households. Our most needy households seem to be much more likely to have obese member(s) than previously reported. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, *Monitoring The Human Condition on Cape Cod – 2006*, researchers from Barnstable County show that year-round Cape residents are reporting significantly more problems in this aspect of their “human environment.” The proportion of our most needy households reporting one or more “seriously overweight” persons (self-reported) has increased multi-fold over one year ago.

OBESITY: (See also, Appendix A, Table A.10)

When compared to the larger sample of Cape households, most needy households reporting “seriously overweight” member(s) tend to: be have a very low annual income (less than \$30,000), be living under 200% of poverty (69% are below), be “working poor,” have all adults under age 45, be a single parent household—but with relatively few children, be a cultural, linguistic, or racial minority, be “homeless” or be living in a group setting, and live in the Mid-Cape area--most especially in Hyannis. Well over one-half (57%) of these most needy households are receiving some form of public assistance. These households are *generally* NOT homeowners, NOT two-adult households, NOT located on the Upper-Cape or on the Lower/Outer-Cape, and DO NOT include persons over age 45.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with “seriously overweight” member(s) report a range of other problems. Top among the problems reported by these Cape households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (81% report this a MAJOR problem)
- MENTAL HEALTH-Related Problems (70% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- CHILD BEHAVIORAL issues in the household are highly correlated with difficulties securing adequate CHILDCARE.

POOR HOUSING CONDITIONS May be Increasing Among Cape Cod's Most Needy Residents

Over the past year, reports of their, "*housing now in need of major repair to make it truly habitable*" have increased significantly among the Cape's most needy households. Cape Cod's most needy households seem to be much more likely to be living in housing that requires "major repair" than previously reported. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, ***Monitoring The Human Condition on Cape Cod – 2006***, researchers from Barnstable County show that significantly more year-round Cape residents are reporting problems in this aspect of their "human environment." The proportion of the Cape's most needy households reporting that their housing is, "*now in need of major repair to make it truly habitable*" has nearly doubled (+80%) over one year ago.

Most Needy Family Households Requiring "Major Housing Repairs" (See also, Appendix A, Table A.11)

When compared to the larger sample of the Cape's most needy households, the most needy households reporting that their housing is, "*now in need of major repair to make it truly habitable*" tend to: have an extremely low annual income (one-third are under \$15,000 and two-thirds are under \$30,000), be living under 200% of poverty (54% are below), be "working poor," have three or more children, be a cultural, ethnic, or racial minority, be a renter, and reside on the Upper-Cape or in Hyannis. One-third (33%) of these most needy family households are receiving some form of public assistance. These most needy family households are *generally* NOT homeowners, NOT located on the Lower/-Outer-Cape, and DO NOT include persons over age 65.

Associated Problems and Issues: (Apparent "Linkages")

The most needy households that seem to be struggling the most with substandard quality housing report a range of other problems. Top among the problems reported by these most needy households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (82% report this a MAJOR problem)
- MENTAL HEALTH-Related Problems (64% report this a MAJOR problem)
- HOUSING-Related Problems (50% report this a MAJOR problem)
- FOOD/NUTRITION-Related Problems (36% report this a MAJOR problem)

Among the households in question, several reported issues are correlated (statistically significant positive relationships are indicated) as follows: (See Appendix B for definitions of issue categories)

- CHILD BEHAVIORAL issues in the household are highly correlated with SUBSTANCE ABUSE issues and with difficulties securing adequate BASIC NEEDS and CHILDCARE.
- DISCRIMINATION is highly correlated with difficulties securing adequate BASIC NEEDS.

SOME YOUTH RISK FACTORS Appear To Be Increasing Among The Cape's Most Needy Family Households

Over the past year, reports of three child/youth RISK Factors have increased considerably among the Cape's most needy family households. These RISK Factors are, having a child (age 17 or younger) who: "*Acts disrespectfully toward others (adults, friends, peers, etc.)*," "*Hangs with kids known to use drugs or drink alcohol*," or "*Verbally abuses members of his/ her household*." Further, in most needy family households these three child/youth RISK Factors are strongly correlated with the phenomenon of young people arriving, "*home from school to a house where NO ADULT is present*." Cape Cod young people who come home to a house where there is no adult supervision are reported to be much more likely to act disrespectfully toward others, to associate with substance abusing peers, and to verbally abuse members of their own household. This is a finding by researchers examining responses to the newly-released Cape Cod Community Survey. In their report entitled, ***Monitoring The Human Condition on Cape Cod – 2006***, researchers from Barnstable County show that our most needy year-round Cape families are reporting considerably more problems in these areas of child/youth behavior. Due to limited sample sizes, County researchers are not able to definitely prove (or disprove) that this increase in most needy households reporting increases in child/youth RISK Factors is statistically significant. However, this indicator is definitely pointing in a NEGATIVE direction.

The Cape's most needy family households that report the RISK Factors of having a child (age 17 or younger) who: "*Acts disrespectfully toward others (adults, friends, peers, etc.)*," "*Hangs with kids known to use drugs or drink alcohol*," or "*Verbally abuses members of his/ her household*" actually represent two quite distinct socio-demographic groups, as follows:

- Those not necessarily having "latch-key" young people, and
- Those with "latch-key" young people.

These two groups of the Cape's most needy family households are briefly profiled below.

Most Needy Family Households Reporting Some Increases in Child/Youth Risk Factors

(See also, Appendix A, Table A.12)

ALL most needy Cape Cod family households reporting one or more of these three child/youth RISK Factors tend to: have a very low-to-moderate annual income (56% are below \$30,000), be living under 200% of poverty (74% are below), be "working poor," have ALL adults under age 55, be single-parent families, have three or more children, be renters, and reside in the Mid-Cape, and especially in Hyannis. The average age of the youngest child in these households is eight and one-half years (8 years-6 months) and the average age of the oldest child is nearly thirteen (12 years and 8 months). Nearly one-half (45%) of these most needy family households are receiving some form of public assistance. These most needy family households are generally NOT two-adult households, NOT homeowners, NOT residing in the Upper-Cape or on the Lower/Outer-Cape, and DO NOT include persons over age 65.

Most Needy Family Households With "Latch-Key" Child(ren) Reporting Some Increases in Child/Youth Risk Factors (See also, Appendix A, Table A.12)

The most needy Cape Cod family households with "Latch-Key" child(ren) reporting one or more of these three child/youth RISK Factors tend to: have moderate to high annual incomes, be living under 200% of poverty (61% are below), be "working poor," be a single parent household, have ALL adults ages 45-54, be a linguistic or racial minority, and reside on the Upper-Cape, and most especially in Mashpee. The average age of the youngest child in these households is about ten and one-half years (10 years-7 months) and the average age of the oldest child is about fifteen and one-half (15 years and 7 months). Well over one-quarter (27%) of these most needy family house-

holds are receiving some form of public assistance. These most needy family households are *generally* NOT two-adult households, NOT renters, NOT residing in the Mid-Cape and especially NOT in Hyannis, and DO NOT include persons over age 65.

Data Analyst's Observations on These Two Distinct Most Needy Household Groups:

The two groups of most needy households profiled above must be considered separately. Their primary commonality is the sharing of increases in any of these three child/youth risk factors. They differ on at least four key parameters--annual income, home ownership, geographic location, and the average ages of their young people. An inspection of these data indicates that homeowner parents on the Upper-Cape with older youth feel able to “trust” their young people to be at home without adult supervision after school hours. Conversely, renters who are parents of children 2 – 3 years younger than the former group and who reside in the Mid-Cape area (many live in Hyannis) seem more reluctant to leave their young people without adult supervision after school hours.

Associated Problems and Issues: (Apparent “Linkages”)

Cape households that seem to be struggling the most with any of these three child/youth RISK Factors and that report having “latch-key” young people report a range of other problems. Top among the problems reported by these most needy Cape family households are the following: (See Appendix B for definitions of MAJOR Problem categories)

- MONEY-Related Problems (74% report this a MAJOR problem)
- MENTAL HEALTH-Related Problems (67% report this a MAJOR problem)
- HOUSING-Related Problems (54% report this a MAJOR problem)
- HUNGER/NUTRITION-Related Problems (47% report this a MAJOR problem)
- VIOLENCE-Related Problems (47% report this a MAJOR problem)

Among the most needy family households struggling the most with any of these three child/youth RISK Factors and that report having “latch-key” young people, two reported issues are correlated (a statistically significant positive relationship is indicated) as follows: (See Appendix B for definitions of issue categories)

- CHILD BEHAVIORAL issues in the household are highly correlated with difficulties securing adequate CHILDCARE.

APPENDIX

