



2018 Community Assessment

CONFEDERATED TRIBES OF GRAND RONDE

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Executive Summary

This 2018 Community Assessment presents a snapshot of the Grand Ronde Head Start service area on topics ranging from poverty to health status. The process of collecting and synthesizing this information shed light on the challenges our families cope with as well as our community's strengths and opportunities.

The community enjoys many strengths, first and foremost is the commitment the Tribe has made to early childhood development. With the support of the Tribe, we've been able to expand our services beyond the 20 Head Start and 56 Early Head Start slots included in our grants. In addition to financial support, many Tribal departments partner with our program to serve children and families, including Cultural Resources, Education, Medical and Dental.

Primary challenges our families are facing include affordable housing, child care and mental health services. Although the Tribe provides some of these services, child care for children under the age of 2 is non-existent and the wait list for low-income housing is very long. Mental health services for older children and adults is available but there are no providers qualified to work with children under the age of 6 years.

Grantee Overview

The Confederated Tribes of Grand Ronde is largely shaped by its history as a confederation of more than 20 different Tribes that were removed to a reservation in the mid 1800's, terminated in 1954 and then "restored" in 1983. The Tribe's lifeways, language and traditions were forever altered as people from throughout Oregon, SW Washington and Northern California merged onto a reservation just east of the coastal foothills of the Central Oregon Coast and 30 miles west of present day Salem, bringing with them many distinct cultural differences.

For 100 years the Tribes resided together on the reservation, adopting a common trade language, adapting to the food sources and natural environment and attempting to maintain their cultural identity. When the Federal Government terminated the Tribe's official status as a sovereign nation in 1954, people left the reservation in droves. Some through the relocation program, others simply as a means of survival. Nevertheless, for 29 years, the Tribe was largely dispersed and few traditions were carried on.

The Tribe was "restored" to Federal Recognition in 1983 and since that time there has been great effort to bring back cultural traditions and language. Today, the Tribe has more than 5,500 members, the vast majority of which reside in Oregon, mostly concentrated in Polk and Yamhill Counties. Today Grand Ronde has a population just over 2,000 people.

Head Start Services

The Tribe started offering Head Start services in 1992 as a collaboration with a local Region X grantee and later became a grantee through Region XI. Today, the Tribe operates one Early Childhood



Education Center licensed through the State of Oregon and designated as a 5-Star program through the State's Quality Rating Improvement Scale (QRIS).

We maintain 82 Center-Based Slots (20 Head Start, 16 EHS, 20 Preschool Promise (State Pre-K), 12 Language Immersion and 14 CCDF/Tribal) and 42 EHS Home-based slots. Each of these programs operates from 7:30 am- 2:00 pm each day, and wrap around services are funded through CCDF to keep our center open until 5:15 pm for working parents.

Throughout the years the program has maintained full enrollment in Head Start, Early Head Start and Preschool Promise, filling every vacancy within the allowable 30 days. We maintain a waitlist throughout the year and have no difficulty enrolling new students.

Program Year and Staffing Patterns

Our program year begins the week following Labor Day and ends on the third Thursday of August. Our center operates year-round with the exception of a 3 week summer break, one week winter break and a 1 week spring break, allowing us to meet the mandatory minimum instruction hours for both Head Start and Early Head Start. Our facility operates five classrooms; two classrooms of eight children for 2 year olds and three classrooms of 17-20 children each for 3-5 year olds. Each classroom is staffed with three full time staff: a lead teacher, an assistant and an aide. In addition, aides or floaters support classrooms to ensure staff receive their breaks. Our Home-Based program employs four Home Visitors with a caseload of 10 or 11 families each.

Geographic Boundaries

Our Early Childhood Education Center is located in Grand Ronde, OR, 30 miles west of the state capitol, Salem, Oregon and approximately 20 miles east of Lincoln City on the central coastline. The geographic boundaries encompass the unincorporated town of Grand Ronde (zip

code 97347) and the two closest cities, Willamina and Sheridan (zip codes 97396 and 97378) for Center-Based services and all of Polk and Yamhill Counties for Home-Based services.

Methodology

The Community Assessment process was informed through various workshops with The Center for Program Management and Fiscal Operations (PMFO) and meetings with our T/TA Specialist, Patty Eningowuk. The resources provided by the PMFO and available on the Early Childhood Knowledge and Learning Center website (ECKLC) helped us to outline the specific data needed to paint a complete picture of our community.

The 2017/2018 Community Assessment was completed in conjunction with an EHS Expansion Application, and therefore much of the data was collected through that process. The director collected basic demographic data (American Community Survey/Census data). Anecdotal information and data was also collected from department managers within the Tribe. We also surveyed parents of currently enrolled children, Home Based families and staff.

In addition to census data and data gleaned from the State of Oregon, our team reviewed publications from many of our community partners and service agencies, such as Marion/Polk Public Health, Yamhill Coordinated Care (YCCO), Willamina and Sheridan School Districts, Oregon Health Authority, Marion/Polk Food Share, 2-1-1, Yamhill Early Learning Hub, local school districts and many more. Further, the team reviewed our past 5 years of P.I.R. data and child/family outcomes. Publications ranged from annual reports to surveys and focus group analysis.

Data was collected for both Polk and Yamhill Counties to take into account that we border on each. In addition, all of the children that live in Grand Ronde, Willamina and Sheridan attend schools in Yamhill County, therefore, much of the child specific data would be captured in that county.

As the data was gathered, it was sorted into sections based on the sample Community Assessment report outline created by the PMFO. The Director compiled the data and assembled a team of internal stakeholders including staff, Policy Council, Tribal Council and Community Partners to analyze and synthesize the information utilizing the Community Assessment Analysis tool available on ECLKC to develop recommendations for program design and improvement. The following recommendations are the result of that convening.

Service Area Data

Our service area includes all residents of Grand Ronde and Native Americans that live within Willamina and Sheridan for Center-Based services and all of Polk and Yamhill Counties for Home-Based services. Grand Ronde, Willamina and Sheridan are all split between Polk and Yamhill counties.

Community Action Agency for Marion County serves some of Polk County and The Head Start of Yamhill County serves non-Native residents of Willamina and Sheridan.

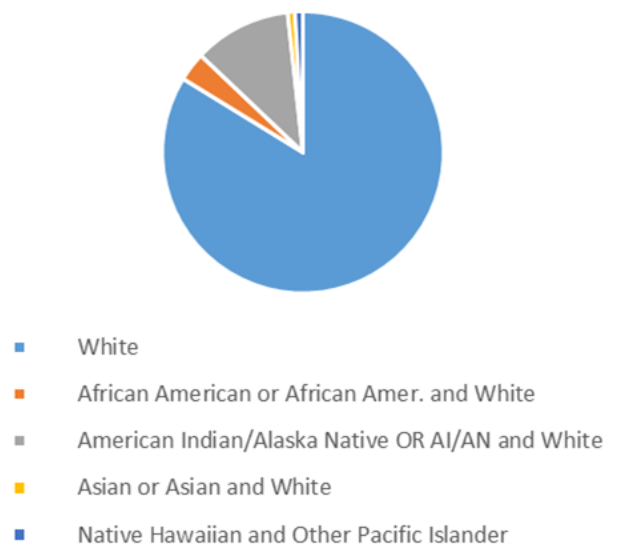
Race and Ethnicity

More than 90% of respondents reported in the American Community Survey in 2016 that they are of one race. (Source: DP05: ACS

DEMOGRAPHIC AND HOUSING ESTIMATES

2016) Of those, 70% in Grand Ronde, 97% in Sheridan and 90% in Willamina reported as White only. In Grand Ronde 31% identified as American Indian, either alone or in combination with another race and Willamina reported 12.3% while Sheridan reported only 5.9% American Indian. In Sheridan, 4.5% reported as Black only while Willamina

Race and Ethnicity



reported 1.5% and Grand Ronde reported less than 1% Black only. Sheridan also reported 10.5% Hispanic (of any race) while Grand Ronde and Willamina both reported 3.5% Hispanic. Less than 1% in each of the three communities reported as Asian only. The chart to the right represents the total population of each of the three zip codes in our service area.

Number of Eligible Children:

Table 1 below represents enrolled Grand Ronde Tribal members and Tribal descendants. Multiplying the total number of children by the average percentage of families in Polk and Yamhill Counties living in poverty (see ACS DP03 2016 in Appendix 1), we conclude that there are 26 Native children that are eligible for Early Head Start.

Table 1 Enrolled Grand Ronde Tribal Members and Descendants Age 2 and under in the EHS Service Area (Per CTGR Member Benefits database. Email dated 3/14/18).

EHS Service Area	0-1 year	1 year	2 yrs	Total	Poverty %	Inc. Eligible
Polk	16	16	24	56	24%	13
Yamhill	12	10	22	44	29%	13
	28	26	46	100		26

Unlike Early Head Start, the Head Start service area is limited to the community of Grand Ronde and the cities of Willamina or Sheridan. Based on information provided by the Tribe’s Member Benefits Department, we estimate that there are 96 Tribal children that live within this area (Table 2). Again, multiplying that total by the rate of poverty for families with children under the age of 5, we arrive at 45 Native children in the service area that are eligible for Head Start.

Table 2 Enrolled Grand Ronde Tribal Members and Descendants Ages 2-4 years in the Head Start Service area (Per CTGR Member Benefits database. Email dated 3/14/18).

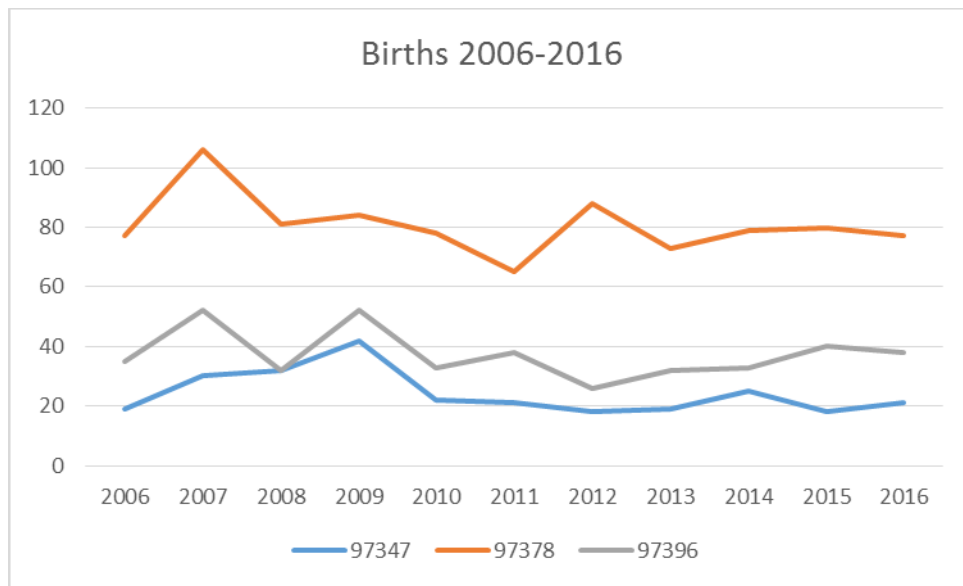
HS Service Area	2 yrs	3 yrs	4yrs	TOTAL	Poverty%	Inc. Elig.
Grand Ronde	20	20	12	52	50%	26
Willamina	10	10	10	30	52%	15
Sheridan	6	2	6	14	30%	4
	36	32	28	96		45

Pregnancy rates in Polk and Yamhill County remain pretty consistent from 2013-2017 although there has been a decrease in teen pregnancy rates. Throughout the past 5 years, approximately 2,000 births annually have been reported in both Polk and Yamhill Counties. An average of 150 births per year are attributed to women living in Grand Ronde, Willamina and Sheridan annually. Given the average poverty rate for individuals of 15.6% we estimate approximately 23 income eligible pregnant women within the three communities alone.

Table 3 Birth rate in Grand Ronde, Willamina and Sheridan 2006-2016

Births in the three zip code service area:											
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
97347	19	30	32	42	22	21	18	19	25	18	21
97378	77	106	81	84	78	65	88	73	79	80	77
97396	35	52	32	52	33	38	26	32	33	40	38
TOTAL	131	188	145	178	133	124	132	124	137	138	136

Source: public.health.oregon.gov/birthdeathcertificates/vitalstatistics



Work Schedules

Work schedules for parents of age-eligible children are typically Monday-Friday, 8 am-5 pm (75% of our roster for the last three years). Few parents work a swing shift, from 4 pm -

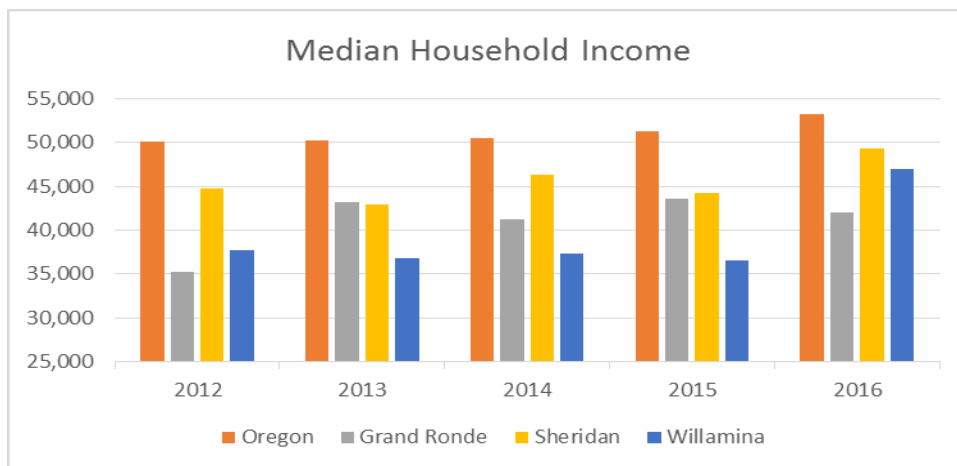
12:00 am. Many of our parents work for the Tribe and work the same hours and days as our preschool.

Poverty

The poverty rate for **individuals** in Polk and Yamhill Counties was 15.5 and 15.7% respectively (ACS: DP03 2016 Appendix 1). Grand Ronde was close to the average although this number jumps to 50% for **families** with children under the age of 5. Willamina had a rate of 52% for families with children under the age of 5 and Sheridan had the lowest rate at 30% for families with children under the age of 5. Single mother households had the highest rate of poverty, at 76% in Polk County and 73% in Yamhill County. All three communities have a lower annual median income than the State average

	Grand Ronde	Willamina	Sheridan
% Families w/children under the age of 5 in poverty	50%	52%	30%

Table 4 Median Household Income

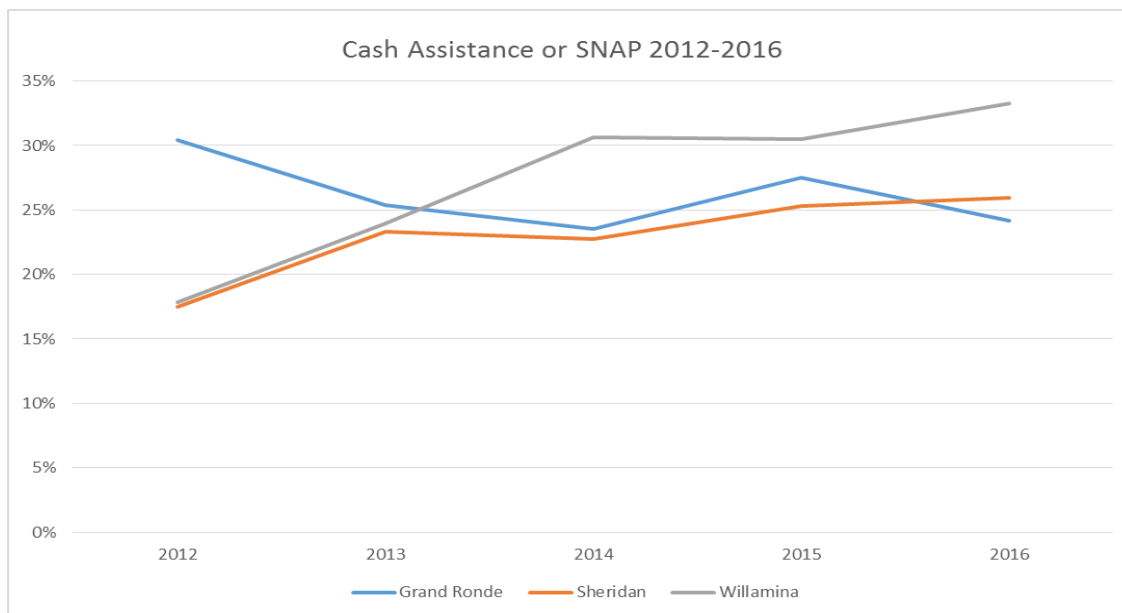


Source: ACS Report DP03 for years 2012-2016

TANF and SNAP

Approximately 4.4% of the population in Polk and Yamhill Counties received cash assistance/TANF, although residents in Grand Ronde, Willamina and Sheridan utilized this service at a slightly higher rate ranging between 5% - 8%. All three communities access SNAP benefits at a rate higher than the county as a whole, ranging from 20% in Grand Ronde to 33% of the residents in Willamina, compared to 19% for both counties. (See ACS Report DP03, 2016 Appendix 1). Over the past 5 years, Willamina has seen a steady increase in public assistance utilization and Grand Ronde has seen a slight decrease. Our PIR data (see Appendix 2) over the past 7 years indicate that SNAP utilization among the families we serve has been consistently on the rise while TANF utilization appears to be slowly declining. Table 5 (Source: Report B19058 for years 2012-2016) represents residents in the service area that receive either TANF *or* SNAP. The rates in Sheridan and Willamina are continuously rising, although Sheridan at a much slower pace, while the rate in Grand Ronde seems to bounce up and down.

Table 5 Cash Assistance or SNAP in Service Area



Children with Special Needs:

Historically, our program has had a challenge reaching 10% enrollment of children with special needs and often requested a waiver (see Appendix 2: PIR DATA HS/EHS Family Trends). During the 2016-2017 school year however, we made 11 referrals for evaluations to our local LEA (Willamette Education Service District). Of those, 5 children were placed on IFSP's, 3 for Communication Disorder and 2 for Developmental Delay. The same agency reported that they served 7 children in 2016 in the school district in which we belong. This school year, (2017-2018), we have again surpassed the 10% required enrollment with 15 total children on IFSP's (this includes children enrolled in our non-Head Start preschool slots, total of 12%). Each year the identified special needs have been the same, developmental delay and communication disorder. One child received services for Autism Spectrum Disorder in 2015 and another for Vision Impairment in 2016. Children with confirmed or suspected special needs are, and will continue to be prioritized for selection.

Homelessness:

Over the past two school years we have enrolled approximately 10% homeless children. In 2015, Polk County counted only 2 people under the age of 18 that were homeless and in Yamhill County the count was 169. The Willamina School District (in which the majority of our students transition into) reported 16 students enrolled in their Homeless Education Program that same year. (Source: Oregon Department of Education). A report by the Mid-Valley Community Action Agency for Marion and Polk Counties indicated that the majority of homeless people in Polk County (46%) had been homeless for one to five years and 33% indicated they had been homeless for less than one year. Our PIR data indicate a sharp increase in homelessness during the 2016-2017 school year that held steady during the 2017-2018 school year (see Appendix 2).

Children in Foster Care

In 2016, the Tribe's Children and Family Services Division received 312 reports of suspected child abuse and neglect, up substantially from previous years. Of those, 85 were referred to investigation and 18 of those were founded reports. According to the Department Manager, the most common reasons for reporting relate to drug and alcohol use. In addition, the Manager believes that most cases referred to their office stem from inappropriate parenting/supervision, lack of resources-financial needs, unhealthy partner relationships (domestic violence) and many cases related to drug and alcohol use. The Child and Family Services office also identified an increase in reports of inappropriate relationships between teen girls and adult men. Although the number of reports have increased, the number of out-of-home placements have decreased due to greater emphasis on prevention services for families at risk.

According to the 2017 Child Welfare Data Book, published by the Department of Human Services in February 2018, county-wide data indicates that in 2017, there were 165 founded reports in Polk County and 106 children placed in foster care. In Yamhill County, there were 146 founded cases and 102 children placed in foster care. In both counties, the greatest concern was neglect, followed by threat of harm. In 47% of the founded cases, alcohol and/or drugs were a contributing factor. Five percent of the children in foster care in the State of Oregon are Native American, indicating an over representation when compared to the State's population (1.2% Native American). Statewide, the number of children entering foster care in 2017 increased by 6.7 percent from the 2016 level.

This year we served three children that are placed in foster care and 5 children in kinship care with grandparents. According to PIR data, the number of children in foster care we serve has remained fairly consistent over the past 7 years (see Appendix 2).

Identified Needs

Employment

According to the ACS 5 year estimates in 2016, the unemployment rate in each of the three communities was higher than both the national and state averages, with Grand Ronde holding the lowest rate at 4.6%, Willamina at 7.4% and Sheridan at 5.3%.

As of March 2018, the State's unemployment rate was at an all-time low of 4.1%. Polk County had an unemployment rate of 4.4% and Yamhill County holding at 3.6%.

The service industry accounts for a good share of jobs in our area followed by health care and then government sector jobs in education and social assistance. Spirit Mountain Casino, owned by the Tribe, is the largest employer in Polk County. Other notable employers in the area are the Tribal Government and the Federal Correctional Institution in Sheridan.

As mentioned above, Grand Ronde, Willamina and Sheridan each have a lower than average household median income.

Our PIR data over the past seven years indicate that unemployment among the families that we serve is declining, from 48% during the 2012-2013 school year to 30% during the 2016-2017 school year (see Appendix 2).

Housing

According to the ACS DP04 2012-2016 5 Year Estimates, 70% of families throughout Grand Ronde and Sheridan have lived in their current home for 8 years or more and 58% of families in Willamina have lived in their homes for 8 years or more. Forty-two percent of families are paying 35% or more of their income on housing. In Grand Ronde, where Tribal Housing subsidizes rent, 28% of families pay less than 15% of their income on rent. The Tribe has 72 low-income family housing units, 36 market rate units and a low-income apartment complex with 20 units in Grand Ronde.

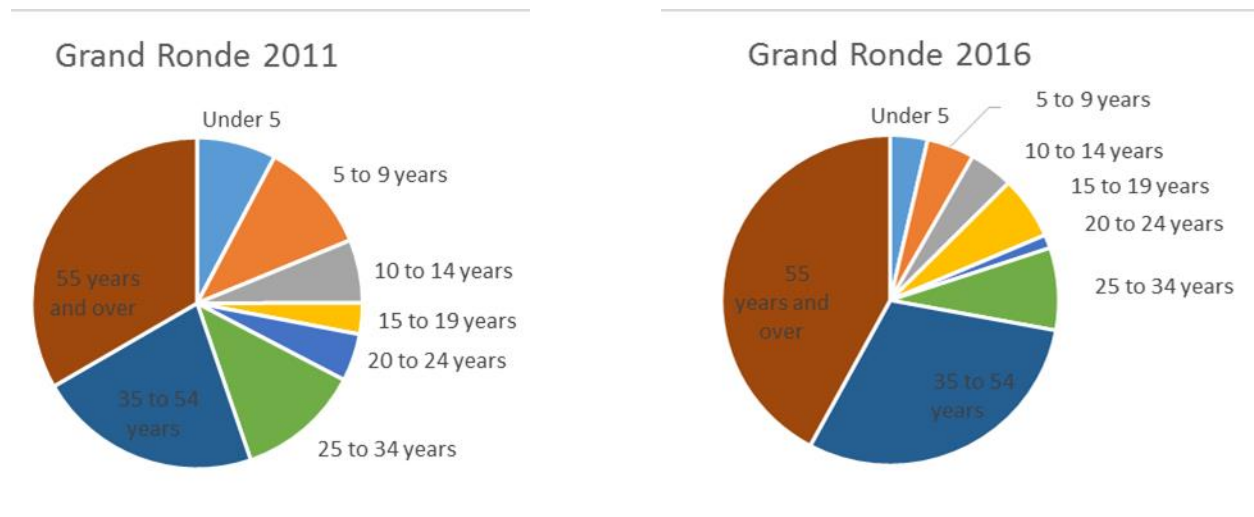
Homes in Willamina and Sheridan are generally older, with most built prior to 1970. Grand Ronde's homes are generally newer due to the expansion of Tribal Housing, with most units built after 1990. Homes in Grand Ronde were more likely to provide the necessary plumbing and kitchen facilities with less than 1% (4 units) lacking a proper kitchen and no homes lacked proper plumbing. In Willamina, 3.5% (39 units) lacked complete plumbing and 2% (24 units) lacked a proper kitchen. In Sheridan, no units lacked complete plumbing but 144 units (6%) lacked a proper kitchen (this may be attributed to the prison population in Sheridan).

As indicated above in Service Area Description, homelessness is on the rise among the families we serve. Emergency/Shelter housing is non-existent and many homeless families are resorting to camping in the woods. There are two RV parks in the area that some of our families rent space from to live in a camper or RV. Some of these families are on waiting lists for Tribal Housing, but non-Tribal families and families that utilize medical marijuana cannot access Tribal Housing. In addition, some families that are able to meet the criteria for Section 8 housing are unable to find landlords in our area willing to rent to them, in some cases losing their voucher or moving out of the area in order to find a place to rent. Common barriers include poor rental history/lack of references, bad credit and criminal history.

Data shows that the vast majority of phone calls to 2-1-1 for social service referrals are for housing assistance (See Appendix 5).

Reviewing census data between 2011-2016, it appears that younger families may be moving out of the area because fewer families in Grand Ronde and Sheridan have children under the age of 10. We know that the birth rate has remained steady, yet the percentage of children under 10 has been shrinking. See Table 6.

Table 6 Age Distribution in Grand Ronde 2011 & 2016



Source: ACS DP05 for years 2011-2016

Education

According to the 2012-2016 ACS S1501 Report, 88% of the adult population in Willamina and Sheridan held at least a high school diploma or equivalent (see Appendix 3). In Grand Ronde, that rate was lower at 85%. Accounting for only Native American residents, the percentage ranged anywhere from 75% (Sheridan) to 96% (Willamina). High School graduation rates in Willamina and Sheridan fall below the statewide average at 77% and 70% respectively. Our PIR data indicates that 20% of our parents had no high school diploma or equivalent during the 2016-2017 school year, although this number appears to bounce up and down every year, ranging from 2% in 2014 to 20% in 2016 (See Appendix 2).

On the other end of the spectrum however, kids are entering school in Willamina ready to learn at a rate higher than students elsewhere in the county and higher than the statewide average. Oregon Department of Education reports show that kindergarten students in Willamina consistently scored higher in Approaches to Learning, Early Literacy and Early Math skills.

The Tribe provides numerous scholarships and other financial support for Tribal members seeking to further their education. This is an area that appears to be underutilized by our families.

Some of our parents engage in GED training through the Tribe but very few are engaged in post-secondary education.

Domestic Violence

According to data received from the Tribe's Domestic Violence Prevention office, in 2016, the number of phone calls to the Tribe's Domestic Violence hotline doubled from 86 to 174. Seventy-nine clients were served, 96% of them women. Eighty-six percent sought help for domestic violence, 15% were the victim of sexual assault and 5% were victims of stalking. Domestic violence has been cited by the Tribe and the State as a contributing factor to out-of-home foster care placements. This year alone, our HS/EHS program has served three parents that were the victim of domestic violence.

Childcare

Childcare resources in our area are nearly non-existent. There are no licensed child care providers in Grand Ronde. Willamina and Sheridan have only one childcare/preschool each. Our facility serves 16 two year olds but there are no facilities in the region for children younger than two. These children are often cared for by friends and relatives. Although we do not yet have the data, it is suspected that these children are not usually with one consistent care giver all week, rather, a patchwork of different friends and relatives cover the work week.

One area of concern is the lack of after-school care for children in the 2 year old classrooms. We currently offer after-care until 5:15 for twenty 3-5 year olds but we cannot add 2 year olds without opening up a second classroom for their age group and hiring two additional staff.

Previous attempts to identify and support in-home child care providers have proven unsuccessful (see Community Assessment, 2014).

Health

Many health factors were reviewed and the primary theme throughout came down to lifestyle choices, including nutrition and lack of exercise. According to the Oregon Health

Authority, only 16% of residents in Yamhill County get the CDC recommended exercise and 28% of residents in Polk County (see Appendix 4). The rate of obesity in Polk and Yamhill Counties is higher than the state average at 32% and 30% respectively, compared to 27% throughout the state. Our own PIR data indicates that approximately 15% of our students are obese, remaining steady throughout the past 5 years (see Appendix 2). High cholesterol is worse in Yamhill County at 44% and Polk County is at 33.5%. Only 22% of people in each county consume the recommended amount of fruits and vegetables each day. One marker in which the two counties fared better than the state average is smoking. Only 13.5% of Polk County residents and 16.6% of Yamhill County residents smoke, compared to 17% of Oregonians.

Closer to home, the Grand Ronde Health Clinic reports that the top 5 reasons for visits by children ages birth to five are: upper respiratory infection, ear infection, pink eye, bronchitis and dermatitis/impetigo. They attribute many health concerns to parents smoking in the home, lack of nutrition, not hand washing and inadequate immunizations.

The top 5 reasons for visits by adults include hypertension, diabetes, hyperlipidemia, depression/anxiety and sinusitis. Factors attributing to these health concerns include lack of exercise, smoking, obesity, poor nutrition and stress/trauma. For all age groups, the clinic's administration cited transportation, lack of trust and trauma/stress as barriers to accessing medical care.

ACS data in 2016 indicate that 8.5% of the population in Polk County and 9% of the population in Yamhill County did not have health insurance of any kind (see Appendix 1). For children under the age of 18, that number goes down to 4% and 3%, respectively.

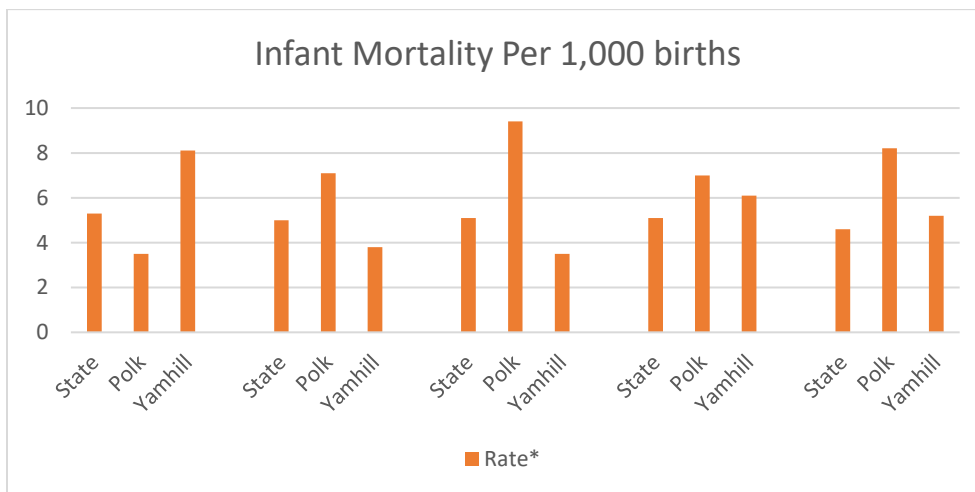
Our PIR data indicates that approximately 6% of the children enrolled suffer from asthma. This number is slightly down, but we are finding that the kids who rely on inhalers need them much more frequently than in the past.

Maternal Health and Infant Mortality

In 2017, 94% of women in Polk and Yamhill Counties received adequate prenatal care according to the Oregon Health Authority. In 2016, 9.5% of expectant mothers in Polk County used tobacco during pregnancy, in-line with the statewide rate. In Yamhill County 11.6% of expectant mothers used tobacco during pregnancy, steadily rising since 2014.

According to the Children First for Oregon County Data Book 2017, Polk County ranks near the bottom in the state for infant mortality at 8.2 per 1,000 live births. Yamhill County fared little better at 5.2. Both are higher than the state average of 4.6. The primary cause identified by the Oregon Health Authority is perinatal conditions, followed by congenital anomalies. The third most common reason was SIDS followed by “other natural causes”. This ranking holds true for each of the years 2012-2016 in the table below.

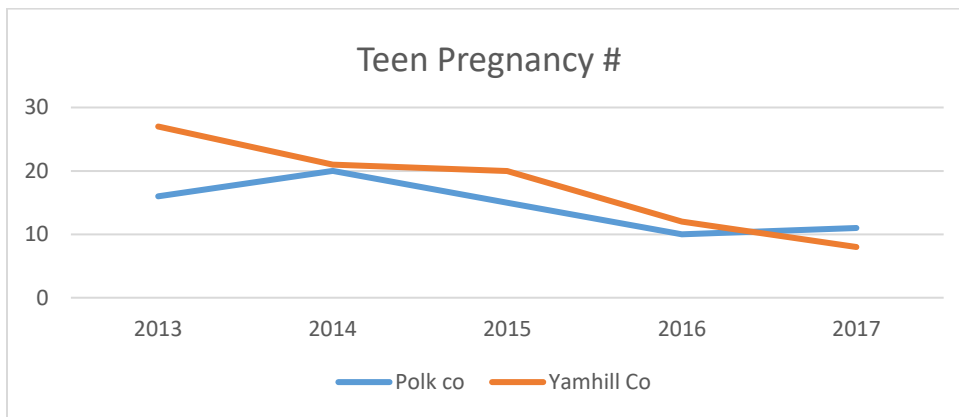
Table 7 Infant Mortality



Teen Pregnancy

Teen pregnancy was at an all-time low in 2017 at 2.6 per 1,000 in Polk County and 2.2 per 1,000 in Yamhill County, down from 12.3 in 2007 in Polk County and 10.8 in 2008 in Yamhill County. That equates to 10 births in Polk County in 2017 and 8 births in Yamhill County to teen mothers.

Table 8 Teen Pregnancy 2013-2017 Polk and Yamhill Counties



Source: public.health.oregon.gov/birthdeathcertificates/vitalstatistics

Nutrition

Food insecurity in Polk and Yamhill Counties was 22% in 2017. Our local food bank distributes food once per week and each week there is a line out the door and around the building. As mentioned above, SNAP utilization is up throughout our service area. The local 2-1-1- referral agency reports that food holds steady in both counties as the third highest request, topped only by housing and utility assistance (See Appendix 5).

WIC serves only 36% of pregnant women in Polk County and 46% of pregnant women in Yamhill County. Utilization has been down in our community for several years due to an unfortunate incident involving a few of the WIC employees. As a result, many of the program participants dropped out and are no longer receiving the benefit. This is something that our program would like to reverse. Our PIR data (see Appendix 2) indicate that during the 2014-2015

school year, WIC participation among enrolled families dropped to 30%. In 2016-2017, that number had risen to back up 40% but still hasn't fully recovered.

The two school districts in which our children transition to both offer free breakfast and lunch to all students as part of the Community Eligibility Program which essentially means the majority of the students in both districts qualify for free and reduced meals.

The Tribe does not employ a nutritionist or dietician, although Community Health has offered several cooking and food preservation classes throughout the year in collaboration with the food bank. We've partnered with them and the Dental Clinic to offer these classes and promote them heavily within our program.

Mental Health & Substance Abuse

Trauma, substance abuse, depression and anxiety are prevalent throughout our reservation. While the Tribe offers numerous resources for adults with substance abuse and mental health issues, we are sorely equipped to meet the needs of families with young children. Over the past three years, at least three counselors have come and gone, all within 6 months. The current counselors will not serve children under the age of 6. The primary reasons the Tribal Health Clinic reports parent seek mental health support are behaviors at school, ADHD, trauma and bullying. The top diagnosis for children were adjustment disorder, ADHD and Generalized Anxiety Disorder. The Clinic named lack of mental health providers as the primary barrier to accessing services.

According to the Kaiser Family Foundation, Oregon ranked the worst in the Nation for three of the four years from 2013-2016 for poor mental health among adults. Similarly, Mental Health America ranked each state in the Nation and ranked Oregon at 49th for services to both adults and youth. The same study ranks Oregon as the state with the highest prevalence of mental

illness (Source: <http://www.mentalhealthamerica.net/issues/2017-state-mental-health-america-ranking-states>).

The Annie E. Casey Foundation reported that Native Americans have experienced more adverse experiences than any other race/ethnicity. Thirty-seven percent of Native Americans across the United States have experienced 2 or more adverse experiences (ACE's), while only 19% of Non-Hispanic Whites have experienced the same. The Oregon Behavioral Risk Factor Surveillance System (BRFSS) reported in 2015 that one third of Oregon respondents experienced three or more adverse experiences before the age 18 (Source: Oregon Health Authority). The most common ACE's cited were emotional abuse and household substance abuse.

Transportation

According to the ACS DP04 and B08119 2016 5-year estimates, the vast majority of residents in our service area own a vehicle and commute to work. In Grand Ronde, only 4% of households do not have a vehicle. In Sheridan however, that number is much higher at 9% although this may be attributed to the prison population. In Willamina, 8% of households do not have a vehicle.

The public transportation system does not make many runs from our rural area to nearby cities. This poses a logistical problem for appointments and for commuters that work anything other than day shift. That being said, all children on the Oregon Health Plan can access the OHP transportation system for medical appointments and Community Health also provides limited transportation.

Anecdotal information from our Family Educators and Teachers indicate that *reliable* transportation is a challenge for a significant number of families. While most have a vehicle, they often run into hardship with fuel, insurance, tires and overall maintenance.

Community Strengths & Resources

The community enjoys many strengths and resources, thanks in large part to the Tribe's programs for Tribal members. Among those are health care, youth prevention, family preservation, cultural resources and education. The Tribal campus includes a full service health clinic, library, elder's activity center, community garden, computer lab and a gymnasium. In addition, the Tribe offers transitional housing for men and women exiting substance abuse treatment or incarceration.

Our partnerships with various Tribal Departments contribute to our success and strength. For example, our partnership with the Tribe's Dental Clinic has increased the number of families utilizing that service, due in part to their presence throughout our program. The Dental Hygienist accompanies Family Educators on home visits as well as presents topics in circle time each month.

Another interesting partnership we have is with the Tribe's Natural Resources Department. The staff conduct activities with the children on site as well as on the Tribe's Reservation. This year, they've planted traditional foods with the children and hosted a special Father's Day socialization/field trip. Community Health is another partner that offers support to our Head Start families, especially in the area of managing head lice. They offer in-home support to help the family remove nits and clean the home.

Services offered elsewhere in the area include the 2-1-1 referral system for social services, domestic violence shelters, Service Integration Teams (SIT), Child Care Resource and Referral, Mid-Valley Parenting and WIC. The Early Learning Hubs of Yamhill and Marion/Polk Counties are also a valued resource. We partner with both Hubs to coordinate referrals and to offer state Pre-K services within our building. Because Grand Ronde, Willamina and Sheridan each overlap both Polk and Yamhill counties, we enjoy the benefit of accessing resources from both.

Beyond services, our community benefits from numerous employment programs and job opportunities for Native Americans and non-Natives alike. Programs like Vocational Rehabilitation and TERO (Tribal Employment Rights) provide Native Americans with necessary equipment/materials, proper attire, training and job skills. The Tribe's Education Division provides training dollars for college credit and vocational training as well as non-credit/personal enrichment experiences. For community members that are not Native American, jobs are available at every skill level at the Tribal Headquarters and at Spirit Mountain Casino.

Observations and Recommendations

Opportunities

In reviewing the data and compiling our list of strengths and resources, a couple vital services were missing:

- Mental health services for children birth to 5
- Transitional services for people engaged in the criminal justice system
- Emergency/temporary housing
- Childcare
- Health care for non-Tribal community members
- Grocery Store/fresh produce
- Adequate public transportation
- Clinic does not have a dietician or an audiologist

High on the priority list for all members of the committee was access to mental health care for young children. Over the past three years, the Tribe's Behavioral Health Clinic has employed at least 3 people that have not lasted more than 6 months, each time disrupting services to children and adding to their trauma.

Potential Partnerships

Throughout this process, the committee noted several potential partnerships, including 477 & TERO (Job training), Housing (credit repair, Ready-to-Rent classes, first time home buyers), Social Services (parenting classes), OSU Extension (Nutrition education, parenting education) Law Enforcement (general presence and familiarity, education), Future Generations Collaborative (cultural sensitivity, historical trauma, health promotion) and WIC (nutrition, data-sharing). Throughout the next several years we will build stronger relationships with each of these entities to better support our Head Start families.

Recommendations

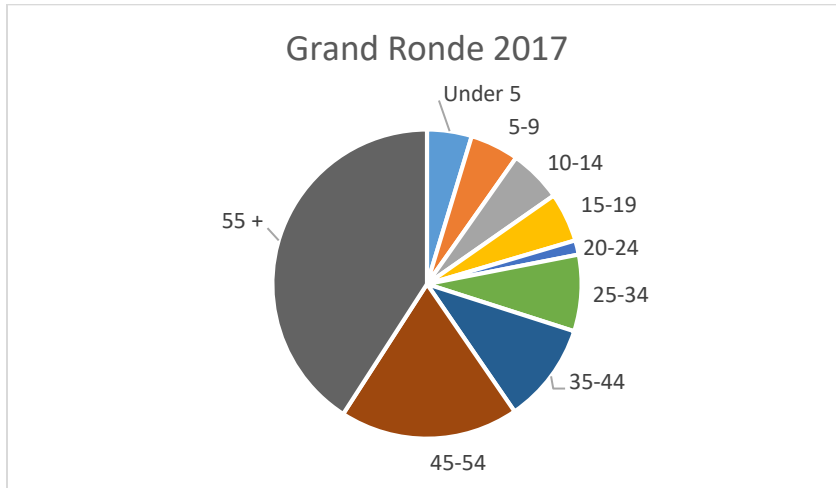
The committee arrived at the following recommendations for further exploration:

1. Expand child care opportunities in Grand Ronde
2. Comprehensive mental health services to families with young children
3. Professional development for dealing with challenging behaviors (Pyramid Model and Second Step)
4. Professional development on historical trauma and Tribal culture
5. Strengthen collaboration with WIC, explore moving to the preschool and having our staff certified
6. Advocate for emergency housing
7. Develop family services and fatherhood engagement initiatives
8. Explore opportunities to support employees of the Tribe that are parents of young children (points for recruitment, preference for extended day)?

UPDATE: MARCH 2019

Population

According to ACS data for 2017, the number of children under the age of 5 in Grand Ronde increased by 37% over 2016.



Poverty

The percentage of families living in poverty in each of the three zip codes within our service area decreased significantly. This has been attributed in part to the minimum wage increase. In fact, many Head Start programs around the state have identified this as a trend contributing to a decrease in income eligible families. 2018 PIR data indicates that 22% of our enrolled families were over-income, compared to 3% the year before. This can partially be explained by our recent expansion, allowing us to double the size of our Early Head Start program.

In contrast, of the families enrolled during the 2017-2018 school year, 47% had no working parent in the household, that is up from 30% the year before.

Percentage of Families (with children under age 5) in Poverty

	Grand Ronde	Willamina	Sheridan
2016	50%	52%	30%
2017	28.6%	28.7%	4.3%

Social Safety Net

According to our PIR data, in 2018 22% of our families received TANF benefits compared to 14% the year prior. We saw a slight decrease in SNAP utilization, from 71% down to 68% and a marked increase in WIC utilization, from 40% in 2017 to 63% in 2018.

Homelessness

Updated Point-In-Time homeless counts are not yet available for 2018 but the Department of Education has released numbers of homeless students in each school district. In Willamina

there was a dramatic increase in students they identified as homeless (75% increase) and in Sheridan the increase was 25%.

Housing

The Tribe recently broke ground on 18 new low-income apartments. Homeownership opportunities are expanding as well with 35 houses in the long-term strategic plan.

Mental Health

In 2018 the Tribe was awarded a “LAUNCH” grant by the Substance Abuse and Mental Health Services Administration (SAMHSA). The focus of this grant is to promote the overall wellbeing of children birth through 8 years. The grant is administered by the Behavioral Health department and we are hopeful that families with young children will have increased access to mental health services as a result.

In addition, the preschool no longer has a Mental Health Consultant and is currently searching for someone to fill that role.

Childcare

The lack of childcare has not improved, however, the Child Care Resource & Referral is working with the Preschool to identify and support caregivers in our area. We are still in the early stages but more work is being planned, including bringing early childhood development classes to Grand Ronde and creating a lending library for child care providers. We will ultimately encourage childcare providers to become licensed.

School Readiness

Willamina School District reported slightly lower scores in Approaches to Learning than last year which is also slightly lower than the state average (compared to last year in which Willamina School District reported higher than average scores). Early Math skills were slightly lower than last year as well, but still higher than the state average. Literacy skills went down in all three areas but letter recognition is still above state average while sound recognition is lower than state average.

Appendices

1. ACS DP03: 2016 Selected Economic Characteristics

Subject	Polk County		Yamhill County		Grand Ronde		Sheridan		Willamina	
	Estimate	Percent	Estimate	Percent	Estimate	Percent	Estimate	Percent	Estimate	Percent
EMPLOYMENT STATUS										
Population 16 years and over	62,313	62,313	81,401	81,401	1,766	1,766	6,968	6,968	2,389	2,389
In labor force	37,420	60.1%	48,788	59.9%	838	47.5%	3,101	44.5%	1,312	54.9%
Civilian labor force	37,317	59.9%	48,775	59.9%	838	47.5%	3,088	44.3%	1,312	54.9%
Employed	33,643	54.0%	44,760	55.0%	757	42.9%	2,722	39.1%	1,136	47.6%
Unemployed	3,674	5.9%	4,015	4.9%	81	4.6%	366	5.3%	176	7.4%
Armed Forces	103	0.2%	13	0.0%	0	0.0%	13	0.2%	0	0.0%
Not in labor force	24,893	39.9%	32,613	40.1%	928	52.5%	3,867	55.5%	1,077	45.1%
Civilian labor force	37,317	37,317	48,775	48,775	838	838	3,088	3,088	1,312	1,312
Unemployment Rate	(X)	9.8%	(X)	8.2%	(X)	9.7%	(X)	11.9%	(X)	13.4%
Females 16 years and over	32,569	32,569	41,125	41,125	907	907	2,829	2,829	1,281	1,281
In labor force	17,902	55.0%	22,794	55.4%	400	44.1%	1,484	52.5%	625	48.8%
Civilian labor force	17,889	54.9%	22,794	55.4%	400	44.1%	1,484	52.5%	625	48.8%
Employed	16,339	50.2%	21,219	51.6%	367	40.5%	1,334	47.2%	554	43.2%
Own children of the householder under 6	5,434	5,434	6,989	6,989	69	69	381	381	214	214
All parents in family in labor force	3,411	62.8%	4,016	57.5%	31	44.9%	180	47.2%	99	46.3%
Own children of the householder 6 to 17	12,202	12,202	15,803	15,803	247	247	1,130	1,130	415	415
All parents in family in labor force	8,640	70.8%	10,390	65.7%	121	49.0%	886	78.4%	276	66.5%
COMMUTING TO WORK										
Workers 16 years and over	32,916	32,916	44,068	44,068	729	729	2,646	2,646	1,106	1,106
Car, truck, or van -- drove alone	25,145	76.4%	32,731	74.3%	643	88.2%	2,051	77.5%	890	80.5%
Car, truck, or van -- carpooled	3,688	11.2%	5,410	12.3%	41	5.6%	189	7.1%	135	12.2%
Public transportation (excluding taxi)	167	0.5%	307	0.7%	6	0.8%	21	0.8%	0	0.0%
Walked	1,163	3.5%	2,239	5.1%	9	1.2%	101	3.8%	45	4.1%
Other means	614	1.9%	885	2.0%	3	0.4%	22	0.8%	15	1.4%
Worked at home	2,139	6.5%	2,496	5.7%	27	3.7%	262	9.9%	21	1.9%
Mean travel time to work (minutes)	24.4	(X)	25.0	(X)	22.0	(X)	31.6	(X)	31.4	(X)
OCCUPATION										
Civilian employed pop 16 yrs and over	33,643	33,643	44,760	44,760	757	757	2,722	2,722	1,136	1,136
Mgmt, business, science, and arts	12,115	36.0%	14,576	32.6%	156	20.6%	808	29.7%	270	23.8%
Service occupations	6,006	17.9%	8,637	19.3%	258	34.1%	608	22.3%	298	26.2%
Sales and office occupations	8,059	24.0%	9,405	21.0%	189	25.0%	592	21.7%	265	23.3%
Natural resources, construct, maint	3,496	10.4%	4,839	10.8%	64	8.5%	201	7.4%	174	15.3%
Product, transport, material moving	3,967	11.8%	7,303	16.3%	90	11.9%	513	18.8%	129	11.4%

INDUSTRY										
Civilian employed pop 16 yrs and over	33,643	33,643	44,760	44,760	757	757	2,722	2,722	1,136	1,136
Agriculture, forestry, fishing, hunting, mining	1,790	5.3%	2,835	6.3%	42	5.5%	191	7.0%	139	12.2%
Construction	2,130	6.3%	2,389	5.3%	12	1.6%	111	4.1%	43	3.8%
Manufacturing	3,143	9.3%	7,229	16.2%	37	4.9%	430	15.8%	182	16.0%
Wholesale trade	844	2.5%	1,532	3.4%	79	10.4%	48	1.8%	21	1.8%
Retail trade	3,406	10.1%	4,576	10.2%	113	14.9%	195	7.2%	115	10.1%
Transport, warehousing, and utilities	839	2.5%	1,580	3.5%	14	1.8%	134	4.9%	29	2.6%
Information	344	1.0%	568	1.3%	0	0.0%	15	0.6%	16	1.4%
Finance/insurance, real estate	1,788	5.3%	2,272	5.1%	3	0.4%	123	4.5%	13	1.1%
Professional, scientific, mgmt, admin and waste mgmt services	2,685	8.0%	3,876	8.7%	17	2.2%	161	5.9%	37	3.3%
Educational services, and health care and social assistance	8,814	26.2%	9,959	22.2%	125	16.5%	491	18.0%	273	24.0%
Arts, entertainment, and recreation, and accommodation and food services	2,785	8.3%	3,889	8.7%	162	21.4%	448	16.5%	198	17.4%
Other services, except public admin	1,551	4.6%	1,916	4.3%	30	4.0%	95	3.5%	25	2.2%
Public administration	3,524	10.5%	2,139	4.8%	123	16.2%	280	10.3%	45	4.0%
CLASS OF WORKER										
Civilian employed pop 16 yrs and over	33,643	33,643	44,760	44,760	757	757	2,722	2,722	1,136	1,136
Private wage and salary workers	23,499	69.8%	35,985	80.4%	413	54.6%	1,972	72.4%	876	77.1%
Government workers	7,973	23.7%	5,520	12.3%	297	39.2%	517	19.0%	188	16.5%
Self-employed in own not incorporated business workers	2,141	6.4%	3,173	7.1%	47	6.2%	233	8.6%	50	4.4%
Unpaid family workers	30	0.1%	82	0.2%	0	0.0%	0	0.0%	22	1.9%
INCOME AND BENEFITS (IN 2016 INFLATION-ADJUSTED DOLLARS)										
Total households	28,725	28,725	35,002	35,002	794	794	2,441	2,441	1,129	1,129
Less than \$10,000	2,071	7.2%	2,086	6.0%	30	3.8%	145	5.9%	55	4.9%
\$10,000 to \$14,999	1,195	4.2%	1,591	4.5%	93	11.7%	187	7.7%	64	5.7%
\$15,000 to \$24,999	2,871	10.0%	3,284	9.4%	120	15.1%	319	13.1%	253	22.4%
\$25,000 to \$34,999	3,201	11.1%	3,225	9.2%	75	9.4%	237	9.7%	95	8.4%
\$35,000 to \$49,999	3,733	13.0%	5,868	16.8%	208	26.2%	342	14.0%	112	9.9%
\$50,000 to \$74,999	6,039	21.0%	6,546	18.7%	106	13.4%	524	21.5%	325	28.8%
\$75,000 to \$99,999	3,792	13.2%	4,740	13.5%	44	5.5%	309	12.7%	138	12.2%
\$100,000 to \$149,999	4,011	14.0%	4,782	13.7%	76	9.6%	291	11.9%	62	5.5%
\$150,000 to \$199,999	1,115	3.9%	1,510	4.3%	38	4.8%	41	1.7%	25	2.2%
\$200,000 or more	697	2.4%	1,370	3.9%	4	0.5%	46	1.9%	0	0.0%
Median household income (dollars)	54,010	(X)	54,951	(X)	42,045	(X)	49,321	(X)	46,902	(X)
Mean household income (dollars)	66,106	(X)	73,159	(X)	52,022	(X)	58,287	(X)	51,032	(X)
With earnings	20,965	73.0%	26,179	74.8%	542	68.3%	1,703	69.8%	835	74.0%
Mean earnings (dollars)	64,666	(X)	71,212	(X)	53,941	(X)	60,138	(X)	48,420	(X)
With Social Security	9,969	34.7%	12,613	36.0%	387	48.7%	1,017	41.7%	358	31.7%
Mean Social Security income	18,697	(X)	19,082	(X)	17,735	(X)	17,052	(X)	20,100	(X)
With retirement income	6,680	23.3%	7,354	21.0%	146	18.4%	546	22.4%	170	15.1%
Mean retirement income	26,708	(X)	25,593	(X)	15,462	(X)	19,245	(X)	14,159	(X)

With Supplemental Security Income	1,272	4.4%	1,774	5.1%	54	6.8%	58	2.4%	109	9.7%
Mean Supplemental Security Inc	10,218	(X)	10,288	(X)	6,891	(X)	10,143	(X)	12,928	(X)
With cash public assistance income	1,264	4.4%	1,533	4.4%	52	6.5%	119	4.9%	90	8.0%
Mean cash public assistance income	3,158	(X)	3,123	(X)	4,798	(X)	2,583	(X)	5,634	(X)
Food Stamp/SNAP benefits past 12 mo	5,365	18.7%	6,648	19.0%	163	20.5%	584	23.9%	374	33.1%
Families	19,687	19,687	24,960	24,960	568	568	1,555	1,555	783	783
Less than \$10,000	879	4.5%	1,307	5.2%	8	1.4%	56	3.6%	63	8.0%
\$10,000 to \$14,999	454	2.3%	657	2.6%	38	6.7%	11	0.7%	19	2.4%
\$15,000 to \$24,999	1,488	7.6%	1,696	6.8%	75	13.2%	170	10.9%	82	10.5%
\$25,000 to \$34,999	1,758	8.9%	2,159	8.6%	50	8.8%	207	13.3%	88	11.2%
\$35,000 to \$49,999	2,314	11.8%	3,952	15.8%	169	29.8%	203	13.1%	92	11.7%
\$50,000 to \$74,999	4,583	23.3%	4,930	19.8%	81	14.3%	338	21.7%	238	30.4%
\$75,000 to \$99,999	2,931	14.9%	3,857	15.5%	36	6.3%	208	13.4%	140	17.9%
\$100,000 to \$149,999	3,696	18.8%	3,888	15.6%	75	13.2%	275	17.7%	36	4.6%
\$150,000 to \$199,999	982	5.0%	1,356	5.4%	34	6.0%	41	2.6%	25	3.2%
\$200,000 or more	602	3.1%	1,158	4.6%	2	0.4%	46	3.0%	0	0.0%
Median family income (dollars)	64,862	(X)	61,947	(X)	44,387	(X)	61,313	(X)	54,356	(X)
Mean family income (dollars)	76,560	(X)	80,865	(X)	59,547	(X)	69,497	(X)	57,069	(X)
Per capita income (dollars)	24,827	(X)	26,523	(X)	22,661	(X)	20,006	(X)	19,796	(X)
Nonfamily households	9,038	9,038	10,042	10,042	226	226	886	886	346	346
Median nonfamily income (dollars)	31,160	(X)	35,665	(X)	21,477	(X)	26,023	(X)	21,184	(X)
Mean nonfamily income (dollars)	40,325	(X)	48,582	(X)	30,448	(X)	36,453	(X)	31,525	(X)
Median earnings for workers (dollars)	26,846	(X)	26,948	(X)	30,161	(X)	22,310	(X)	26,804	(X)
Median earnings for male full-time, year-round workers (dollars)	50,103	(X)	48,148	(X)	65,136	(X)	37,708	(X)	47,212	(X)
Median earnings for female full-time, year-round workers (dollars)	38,622	(X)	38,417	(X)	32,500	(X)	37,098	(X)	26,928	(X)
HEALTH INSURANCE COVERAGE										
Civilian noninstitutionalized pop	78,109	78,109	100,045	100,045	2,034	2,034	6,535	6,535	2,971	2,971
With health insurance coverage	71,433	91.5%	91,057	91.0%	1,821	89.5%	5,918	90.6%	2,608	87.8%
With private health insurance	55,064	70.5%	69,290	69.3%	1,147	56.4%	4,170	63.8%	1,695	57.1%
With public coverage	28,851	36.9%	36,277	36.3%	1,052	51.7%	2,706	41.4%	1,348	45.4%
No health insurance coverage	6,676	8.5%	8,988	9.0%	213	10.5%	617	9.4%	363	12.2%
Civilian noninstitutional pop under 18 yr	18,348	18,348	23,717	23,717	365	365	1,585	1,585	646	646
No health insurance coverage	727	4.0%	718	3.0%	45	12.3%	102	6.4%	16	2.5%
Civilian noninstitutionalized pop 18 to 64	46,739	46,739	60,670	60,670	1,151	1,151	3,836	3,836	1,916	1,916
In labor force:	34,943	34,943	45,513	45,513	778	778	2,908	2,908	1,254	1,254
Employed:	31,524	31,524	41,756	41,756	700	700	2,587	2,587	1,078	1,078
With health insurance coverage	28,112	89.2%	36,656	87.8%	673	96.1%	2,267	87.6%	936	86.8%
With private health insurance	25,769	81.7%	33,768	80.9%	611	87.3%	2,005	77.5%	856	79.4%
With public coverage	3,503	11.1%	4,186	10.0%	89	12.7%	371	14.3%	117	10.9%
No health insurance coverage	3,412	10.8%	5,100	12.2%	27	3.9%	320	12.4%	142	13.2%

Unemployed:	3,419	3,419	3,757	3,757	78	78	321	321	176	176
With health insurance coverage	2,332	68.2%	2,557	68.1%	67	85.9%	196	61.1%	116	65.9%
With private health insurance	1,483	43.4%	1,384	36.8%	19	24.4%	59	18.4%	13	7.4%
With public coverage	1,131	33.1%	1,290	34.3%	50	64.1%	137	42.7%	103	58.5%
No health insurance coverage	1,087	31.8%	1,200	31.9%	11	14.1%	125	38.9%	60	34.1%
Not in labor force:	11,796	11,796	15,157	15,157	373	373	928	928	662	662
With health insurance coverage	10,375	88.0%	13,258	87.5%	259	69.4%	858	92.5%	517	78.1%
With private health insurance	6,920	58.7%	9,003	59.4%	138	37.0%	417	44.9%	252	38.1%
With public coverage	4,478	38.0%	5,605	37.0%	180	48.3%	530	57.1%	364	55.0%
No health insurance coverage	1,421	12.0%	1,899	12.5%	114	30.6%	70	7.5%	145	21.9%
PERCENTAGE OF FAMILIES AND PEOPLE WHOSE INCOME IN THE PAST 12 MONTHS IS BELOW THE POVERTY LEVEL										
All families	(X)	10.2%	(X)	11.9%	(X)	13.7%	(X)	8.9%	(X)	16.5%
With related children under 18 yrs	(X)	17.5%	(X)	21.0%	(X)	46.8%	(X)	17.6%	(X)	23.9%
With related children under 5 yrs	(X)	23.9%	(X)	29.2%	(X)	50.0%	(X)	29.4%	(X)	52.1%
Married couple families	(X)	5.5%	(X)	5.8%	(X)	4.8%	(X)	3.9%	(X)	9.3%
With related children under 18 yrs	(X)	9.2%	(X)	9.3%	(X)	23.5%	(X)	7.6%	(X)	11.1%
With related children under 5 yrs	(X)	8.6%	(X)	13.6%	(X)	50.0%	(X)	33.0%	(X)	38.6%
Families with female head, no husband	(X)	29.4%	(X)	39.5%	(X)	43.1%	(X)	14.1%	(X)	32.6%
With related children under 18 yrs	(X)	38.3%	(X)	51.0%	(X)	66.7%	(X)	20.4%	(X)	32.6%
With related children under 5 yrs	(X)	76.2%	(X)	73.6%	(X)	60.0%	(X)	0.0%	(X)	27.3%
All people	(X)	15.5%	(X)	15.7%	(X)	15.4%	(X)	12.9%	(X)	18.0%
Under 18 years	(X)	17.4%	(X)	22.5%	(X)	36.4%	(X)	16.1%	(X)	23.9%
Related children under 18 yrs	(X)	17.0%	(X)	22.1%	(X)	36.2%	(X)	16.1%	(X)	23.2%
Related children under 5 yrs	(X)	26.0%	(X)	27.7%	(X)	63.2%	(X)	27.2%	(X)	32.8%
Related children 5 to 17 yrs	(X)	14.0%	(X)	20.2%	(X)	30.9%	(X)	13.6%	(X)	18.8%
18 years and over	(X)	14.9%	(X)	13.6%	(X)	11.0%	(X)	11.9%	(X)	16.3%
18 to 64 years	(X)	17.3%	(X)	15.5%	(X)	13.3%	(X)	11.9%	(X)	19.1%
65 years and over	(X)	6.6%	(X)	6.4%	(X)	6.0%	(X)	12.0%	(X)	3.4%
People in families	(X)	10.9%	(X)	13.5%	(X)	14.6%	(X)	8.8%	(X)	16.8%
Unrelated individuals 15 yrs and over	(X)	35.4%	(X)	26.5%	(X)	20.3%	(X)	27.9%	(X)	23.7%

2. PIR DATA/Family Trends

	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2016- 2017	2017- 2018
Over Income	15%	9%	11%	15%	3%	22%
Native American	79%	87	75	64	65	76
Homeless	11%	7	0	10	29	10
2 Parent family	52%	46	47	45	54	55
Single Parent	48%	54	53	55	45	45
Nobody in hh employ.	48%	39	37	28	30	47
TANF	24%	19	28	22	14	22
SNAP	24%	32	35	43	71	68
WIC	52%	35	30	30	40	63
No HS diploma	13%	12	2	12	20	16

HS/EHS Child Trends

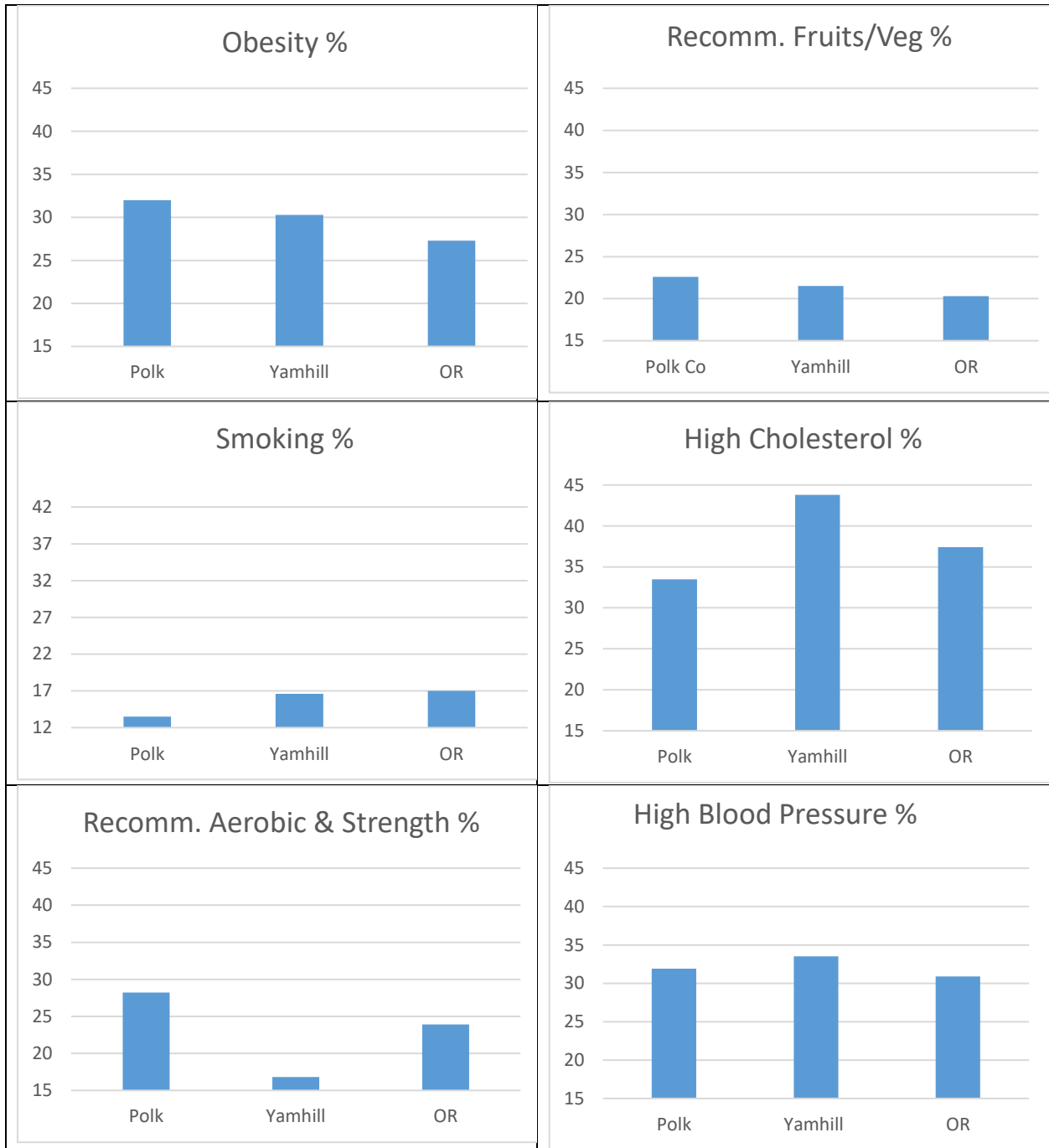
Asthma	8%	20	17	5	6
Over BMI	10%	14	16	2	15
Foster care	6.50%	3.5	3	3.5	6.5
IFSP	8%	0	0	9	8

Source: annual PIR data filed with the Office of Head Start

3. ACS S1501: Educational Attainment 2012-2016 5 Year Estimates

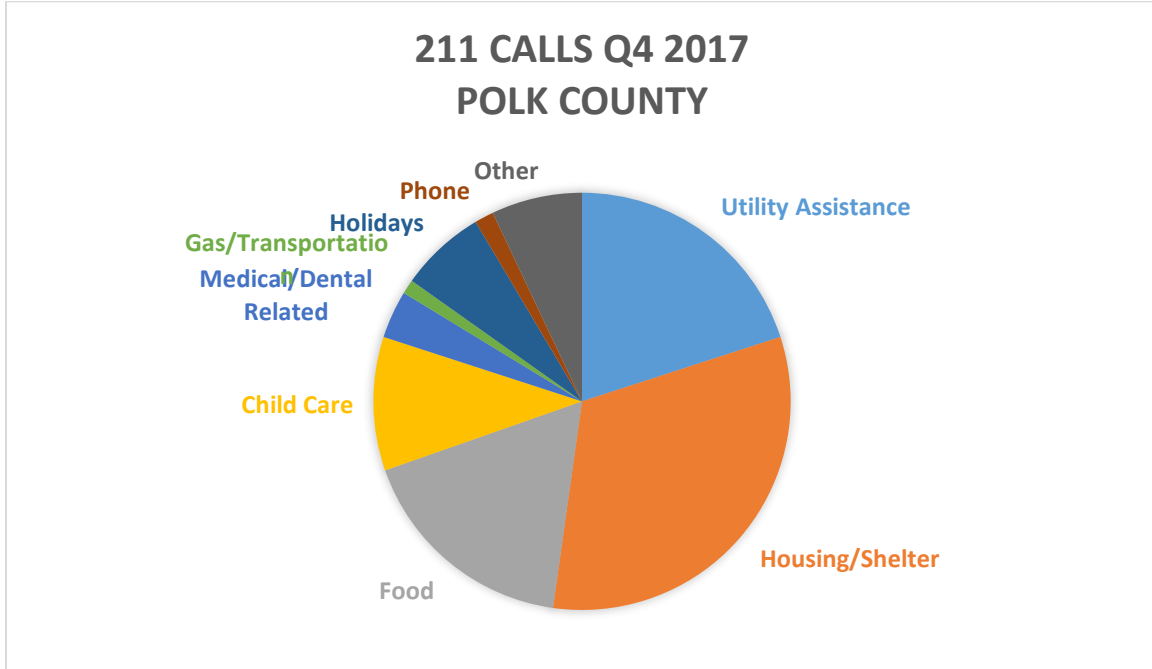
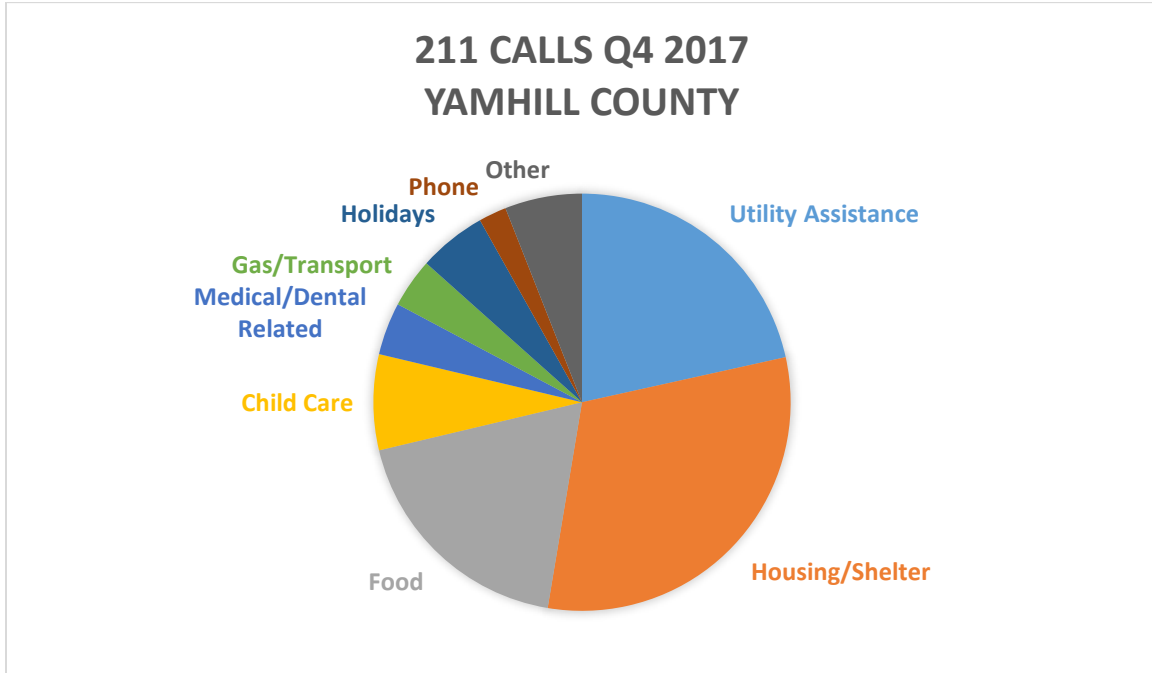
Subject	Grand Ronde		Sheridan		Willamina	
	Total	Percent	Total	Percent	Total	Percent
Population 18 to 24 years	39	(X)	401	(X)	352	(X)
Less than high school graduate	8	20.5%	93	23.2%	19	5.4%
High school graduate (includes equivalency)	13	33.3%	175	43.6%	114	32.4%
Some college or associate's degree	17	43.6%	122	30.4%	219	62.2%
Bachelor's degree or higher	1	2.6%	11	2.7%	0	0.0%
Population 25 years and over	1,630	(X)	6,300	(X)	1,973	(X)
Less than 9th grade	43	2.6%	146	2.3%	11	0.6%
9th to 12th grade, no diploma	207	12.7%	551	8.7%	215	10.9%
High school graduate (includes equivalency)	773	47.4%	2,274	36.1%	699	35.4%
Some college, no degree	381	23.4%	1,934	30.7%	546	27.7%
Associate's degree	71	4.4%	622	9.9%	203	10.3%
Bachelor's degree	119	7.3%	526	8.3%	183	9.3%
Graduate or professional degree	36	2.2%	247	3.9%	116	5.9%
Percent high school graduate or higher	(X)	84.7%	(X)	88.9%	(X)	88.5%
Percent bachelor's degree or higher	(X)	9.5%	(X)	12.3%	(X)	15.2%
RACE AND HISPANIC OR LATINO ORIGIN BY EDUCATIONAL ATTAINMENT						
White alone	1,192	(X)	5,064	(X)	1,803	(X)
High school graduate or higher	1,047	87.8%	4,623	91.3%	1,609	89.2%
Bachelor's degree or higher	111	9.3%	709	14.0%	270	15.0%
White alone, not Hispanic or Latino	1,185	(X)	4,783	(X)	1,749	(X)
High school graduate or higher	1,045	88.2%	4,374	91.4%	1,562	89.3%
Bachelor's degree or higher	111	9.4%	673	14.1%	270	15.4%
American Indian or Alaska Native alone	323	(X)	236	(X)	52	(X)
High school graduate or higher	260	80.5%	228	96.6%	39	75.0%
Bachelor's degree or higher	38	11.8%	0	0.0%	0	0.0%
Two or more races	93	(X)	249	(X)	116	(X)
High school graduate or higher	66	71.0%	177	71.1%	97	83.6%
Bachelor's degree or higher	4	4.3%	22	8.8%	29	25.0%
Hispanic or Latino Origin	26	(X)	661	(X)	59	(X)
High school graduate or higher	21	80.8%	586	88.7%	52	88.1%
Bachelor's degree or higher	0	0.0%	52	7.9%	0	0.0%

4. Health Indicators



Oregon Health Authority
public.health.oregon.gov/diseaseandconditions/chronicdisease/databeports/pages/countydata.aspx

5. (2-1-1) Referrals



6. School Readiness Indicators

Oregon Kindergarten Assessment 2017-2018

Institution Name	Approaches to Learning				Early Mathematics		Early Literacy					
	Self Regulation	Interpersonal Skills	Total		Numbers & Operations		Uppercase Letter Names Recognition		Lowercase Letter Names Recognition		Letter Sound Recognition	
	Average Rating (1 - 5)	Average Rating (1 - 5)	Average Rating (1 - 5)	N	Average Num Correct (0- 16)	N	Average Num Correct (0- 26)	N	Average Num Correct (0- 26)	N	Average Num Correct (0- 26)	N
Statewide	3.5	3.8	3.6	40,967	11.2	40,575	14.5	40,485	12.1	40,467	8.2	40,379
Willamina SD 30J	3.7	3.8	3.7	60	12.4	60	17.1	60	15.5	60	14.5	60
Sheridan SD 48J	3.4	3.6	3.4	53	10.4	52	12.2	53	9.7	53	5.3	53

