2020 Knoxville-Knox County Needs Assessment

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PREPARED FOR
Knoxville–Knox County Community Action Committee

BY
FORREST WENTZEL, BA
AMY WILSON HARDY, MSSW, BS
LINDA DAUGHERTY, MPA
The University of Tennessee, Knoxville

College of Social Work Office of Research and Public Service

Lori Messinger, Dean
Shandra Forrest-Bank, Director

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Introduction

The Knoxville-Knox County Community Action Committee (CAC) is a local public agency located in Knoxville, Tennessee. It is part of the national community action network established under the Economic Opportunity Act of 1964. CAC serves the community with a comprehensive range of federal, state, local, and privately funded programs that focus on building communities, providing services to individuals and families, and advocating for opportunities for lower-income people. Programs administered by CAC include, but are not limited to, AmeriCorps, Beardsley Farm, Community Leadership, Food and Nutrition Programs, Head Start, Housing and Energy Services, Neighborhood Centers, Office on Aging, Tax Assistance, Transit, and Energy & Community Services. CAC continues to be an integral social services provider within Knoxville and Knox County. The CAC mission is to promote family self-sufficiency and independent living for low-income and other vulnerable people through caring and efficient delivery of needed services and the development of partnerships at all levels. The purpose of this report is to summarize the needs in 2020 of those living in Knox County and Knoxville to inform CAC’s decision making and program planning.

This report is divided into nine sections. The first section is a Methodology section, which details how information was collected for this report. The Methodology section is followed by sections giving a demographic overview of Knox County and Knoxville; a portrait of poverty in the area; objective needs; perceptual needs, strengths, and gaps in services; client satisfaction; current services; 2020 goals and objective outcome measures; conclusions; and references.
Multiple methods were utilized to collect the data and information shared in this report. First, a thorough review of available secondary data was completed to identify needs and disparities across Knoxville and Knox County. Particular focus was placed on barriers to self-sufficiency and the impacts of poverty. The secondary analysis primarily relied upon, but was not limited to, data provided by the U.S. Census Bureau American Community Survey estimates, the Knox County Health Department Community Health Survey, National Low-income Housing Coalition, KnoxHMIS, and ET Index.

Primary data was collected from surveys completed by key stakeholders. The purpose of these surveys was to identify the perceived needs of the low-income community in the city of Knoxville and Knox County and to determine perceived gaps in meeting these needs. Methods for collecting these data were adjusted in response to the coronavirus disease (COVID-19) pandemic in Tennessee and Governor Bill Lee’s Executive Order #17 recommending that Tennesseans avoid gathering in groups of 10 or more people. A description of how the surveys were collected is discussed below. The survey instruments distributed to the stakeholders can be found in Appendix A.

**CAC Board Needs Assessment Survey.** The Knoxville-Knox County Community Action Committee (CAC) Board of Directors is a tripartite board composed of representatives of low-income individuals and families who reside in Knox County, elected officials, clergy, educators, members of the local business community, law enforcement, and representatives from other stakeholders in Knox County.

Each of the 26 members of the board was mailed a paper copy of the survey and an individualized web link to complete the survey hosted online by QuestionPro. During the month of August 2020, 19 board members completed a survey. This results in a response rate of 73.1%.

In the survey, board members were asked to rank the current CSBG services in order of importance and to identify barriers to self-sufficiency or aging in place. Board members also provided responses to open-ended questions about what CAC does best, what CAC could do better, and what CAC should keep doing.

**CAC Staff Needs Assessment Survey.** In August 2020, all CAC staff members were provided with a web link or paper survey to seek input on their perceptions about the needs of low-income individuals, families, and communities served by CAC programs that use Community Services Block Grant (CSBG) funds and other funding sources. Historically, staff input was limited to those employed in CSBG funded programs, but this year all full-time staff, regardless of their program’s funding source, were invited to participate. This methodology allowed for input from staff working at multiple levels of the organization who might provide a different perspective regarding client needs. Full-time staff from CSBG funded programs, the Office on Aging, Transit Department, and Knox County Head Start were provided the opportunity to participate in the survey. Part-time staff were not included because of reduced work hours due to COVID-19. Survey questions were completed by 245 staff members resulting in a response rate of 72.9%.
**CAC Program Director Needs Assessment Survey.** Also in August 2020, 25 Program Directors and Central Office Administrative staff were provided with a web link to an online survey designed to measure their perceptions about the needs of the low-income community in Knoxville and Knox County. Specifically, they were asked to voice their assessment of the needs of low-income individuals and families served by CAC programs that use CSBG funds and other funding sources. Survey responses were received from 21 Program Directors and Central Office Administrative staff for a response rate of 84%.

**CAC Community Partner Needs Assessment Survey.** A survey link was shared with 154 CAC community partners in August 2020. Of these partners, 83 completed the survey in its entirety and 24 completed some sections of the survey. All surveys – partially completed and fully completed surveys – were included in the analysis. The distribution of the types of organizations represented is displayed below: *

<table>
<thead>
<tr>
<th>Type</th>
<th>Non-profit</th>
<th>Local government</th>
<th>Faith-based</th>
<th>Health services</th>
<th>School district/higher education</th>
<th>For-profit</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>33</td>
<td>21</td>
<td>8</td>
<td>6</td>
<td>2</td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>

*(only 77 partners chose to respond to this question)*

**CAC Client Needs Assessment Survey.** From January through June 2020, 1,014 clients were served by 15 programs administered by CAC. In August 2020, a sampling frame was developed to target 279 agency clients served by these programs for inclusion in the Needs Assessment. These programs included: Project LIVE, Transit, Beardsley Farm Community Garden Program, the Neighborhood Centers, and other service programs. Program Directors were provided with a target for the number of surveys to complete with clients. Due to constraints imposed by COVID-19 restrictions, surveys were administered on paper, by telephone, and by web. The survey instrument provided clients with instructions to select which program solicited their participation, however it did not ask if they had completed a survey for another program. A total of 201 clients completed a survey. Because some clients may have completed more than one survey, but for different programs, a response rate for this group cannot be calculated.

The CAC Client Needs Assessment Survey included questions seeking input on household and community needs. Additionally, clients were asked to assess their level of satisfaction with the services they received from CAC programs to provide recommendations for how service might be improved in the future.
All needs assessment and survey research studies have limitations that impact the generalizability of the findings. The limitations for this study stem from the choice of survey questions, sampling methodology, and availability of secondary data.

First, the client survey for the CAC Needs Assessment was planned to be conducted in the Spring of 2020. However, the Knoxville/Knox County Safer At Home Order issued in March because of the COVID-19 pandemic delayed the ability to conduct the survey at that time due to lower staff capacity and limited in-person client interactions. Surveys were completed in August 2020 by clients currently accessing services and those that maintained consistent contact throughout the early onset of the pandemic. This modification in methodology could underrepresent the needs of clients who accessed services prior to the on-set of COVID-19 but were not comfortable with contact from others during the pandemic. Efforts were made to overcome this limitation by expanding opportunities to participate beyond providing paper surveys to be completed in-person. These measures included sharing a link to the survey in text messages and e-mails as well as staff completing the survey with clients on the telephone.

Second, the list of needs provided to survey respondents focused on the needs of individuals and families seeking economic self-sufficiency and employment. While participation in the survey was expanded to include staff from the Office on Aging and Knoxville-Knox County Head Start, the needs of seniors and clients with disabilities may not have been adequately addressed in the list of needs. Additionally, the checklist of services respondents was asked to rank was limited to CSBG services and did not cover all types of assistance offered through the wide variety of programs at the CAC.

Third, overall community representation was limited to those who were served by CAC programs. Due to budgetary constraints, the methodology did not include input from the community at large or from those low-income individuals who did not seek services from CAC. This limitation could potentially underrepresent a need that is not currently being served by CAC programs. However, to address this concern, a set of questions were included in the CAC Partners’ survey to identify low-income groups and services not currently being offered by CAC. Furthermore, participation for the CAC Partner survey was significantly expanded this year to include more than 150 partners.

Finally, current secondary data are not always available for both the city of Knoxville and Knox County. When available, this report includes data from both localities. Additionally, updated information about the homeless population and community health indicators for Knox County have yet to be released for inclusion in this report.
Located in East Tennessee, Knox County occupies an area of 526 square miles, including the City of Knoxville, which occupies 104.2 square miles near the center of the county. The U.S. Census Bureau estimated that the 2010 population density for Knox County was 850.5 persons per square mile. Knox County is located in the Ridge-and-Valley Appalachians, which are characterized by long, narrow ridges running northeast to southwest and alternating with valleys. Amongst the county’s numerous ridges is House Mountain in Corryton, the county’s highest point at 2,064 feet. The county is situated in the Great Appalachian Valley (known locally as the Tennessee Valley) about halfway between the Cumberland Plateau to the west and the Great Smoky Mountains to the east.

In the eastern portion of Knox County, the French Broad and Holston rivers combine to form the Tennessee River, which runs through downtown Knoxville. Two interstate highways—I-75, which runs north and south, and I-40, which runs east and west—intersect in Knox County, making it a hub for transit and distribution.

Figure 1: Knox County Topographical Map

According to 2018 estimates, 456,185 people live in Knox County, an increase of 8.4% since 2009. In the City of Knoxville, the population grew to 185,429 people, an increase of 4.5% since 2009. The population density of Knoxville, at 1,882.5 persons per square mile, is considerably higher than that of Knox County—897.8 persons per square mile.

Most residents of Knox County and Knoxville are White, non-Hispanic/Latino. However, the county and city are slowly becoming more diverse as the percentages of White, non-Hispanic/Latino residents decreased slightly, and the percentages of racial and ethnic minorities increased slightly from 2009 to 2018 (See Table 1). In 2009, 2.3% of the population in Knox County and 2.5% in Knoxville were Hispanic/Latino. By 2018, those proportions increased to 4.1% in Knox County and 5.7% in Knoxville. Additionally, from 2009 to 2018, the proportion of those who identified as Two or More Races increased 0.6 percentage points in Knox County and 1.1 percentage points in Knoxville.

### Table 1: Racial Characteristics in Knoxville and Knox County, Tennessee — 2009 and 2018

<table>
<thead>
<tr>
<th>Race</th>
<th>Knoxville 2009</th>
<th>Knoxville 2018</th>
<th>Knox County 2009</th>
<th>Knox County 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>79.6%</td>
<td>75.3%</td>
<td>87.2%</td>
<td>85.5%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>16.3%</td>
<td>17.5%</td>
<td>8.9%</td>
<td>8.8%</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>0.1%</td>
<td>0.5%</td>
<td>0.2%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.5%</td>
<td>1.8%</td>
<td>1.7%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>0.0%</td>
<td>0.1%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Some Other Race</td>
<td>0.5%</td>
<td>1.8%</td>
<td>0.5%</td>
<td>1.1%</td>
</tr>
<tr>
<td>Two or More Races</td>
<td>1.9%</td>
<td>3.0%</td>
<td>1.5%</td>
<td>2.1%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

In Knox County, there are 5,268 households where Spanish is spoken. In 26.6% of those households, English proficiency is limited. In Knox County 34.1% of Hispanic/Latino individuals over age 25 did not have a high school diploma or equivalent, making employment extremely difficult. As a result of these and other challenges, 27.5% of Hispanic/Latino residents of Knox County live below the poverty level, compared to 12.3% of white, non-Hispanic/Latino individuals in the county.
Knox County is aging, as evidenced by a slight decrease in the percentage of those who are under age 18 and a slight increase in those who are age 65 and older. In Knox County in 2017, 21.3% were under age 18, down from 22.0% in 2010. Persons aged 65 and older accounted for 14.7% of the population in Knox County in 2017, which is a slight increase from 12.9% in 2010. Often called the “Graying of America,” this trend is occurring nationwide as the Baby Boomer generation ages.

From 2010 to 2017, the nation’s median age has increased from 36.8 to 37.9 years. Additionally, there have been significant increases in the population of the oldest old. From 2000 to 2010, the number of those aged 90-94 increased 30.2%, from 1,112,531 in 2000 to 1,448,366 in 2010. The population of those aged 95 and older increased 25.9%, from 337,238 in 2000 to 424,608 in 2010. For males, these increases were even larger. The number of males aged 90-94 increased 30.2%, and the number of males aged 95 and older increased 25.9% from 2000 to 2010. In Knox County, the increases were similar from 2000 to 2010, as the population of those aged 85 and older increased 31.3% from 5,593 to 7,343.

A 2020 report published by the Tennessee Commission on Aging and Disability reported projections that by 2030, 19% of the overall population in Knox County will be 65 years old or older. This same study found that currently 22% of seniors in Knox County have difficulty walking and 39% of seniors have four or more chronic health conditions. As a result, as the population ages, greater strains will be placed on infrastructure and services as older adults need assistance with transportation, help preparing meals, more frequent medical visits, and assistance with daily living tasks regardless of whether they choose to age-in-place or move to a facility that helps with these needs. These changes in the needs of the population will impact community service organizations which will be called upon at a greater rate to help meet older Americans’ needs.

### Table 2: Age in Knox County — 2010–2018

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 18</td>
<td>22.0%</td>
<td>21.8%</td>
<td>21.7%</td>
<td>21.7%</td>
<td>21.6%</td>
<td>21.5%</td>
<td>21.4%</td>
<td>21.3%</td>
<td>21.2%</td>
</tr>
<tr>
<td>18 to 34</td>
<td>25.4%</td>
<td>25.5%</td>
<td>25.5%</td>
<td>25.5%</td>
<td>25.5%</td>
<td>25.6%</td>
<td>25.6%</td>
<td>25.6%</td>
<td>25.6%</td>
</tr>
<tr>
<td>35 to 49</td>
<td>21.1%</td>
<td>20.8%</td>
<td>20.4%</td>
<td>20.1%</td>
<td>19.7%</td>
<td>19.4%</td>
<td>19.2%</td>
<td>19.0%</td>
<td>18.9%</td>
</tr>
<tr>
<td>50 to 64</td>
<td>18.6%</td>
<td>18.9%</td>
<td>19.2%</td>
<td>19.3%</td>
<td>19.4%</td>
<td>19.4%</td>
<td>19.3%</td>
<td>19.3%</td>
<td>19.2%</td>
</tr>
<tr>
<td>65 and over</td>
<td>12.9%</td>
<td>13.0%</td>
<td>13.2%</td>
<td>13.4%</td>
<td>13.8%</td>
<td>14.1%</td>
<td>14.5%</td>
<td>14.8%</td>
<td>15.1%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

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8 Ibid.
12 Ibid.
The Baby Boomer generation faces a unique set of challenges as the average lifespan grows and the cost of health care increases. While Social Security benefits—averaging $18,036/year for retired workers—help to keep seniors above the Federal Poverty Level (FPL), these funds are not sufficient to cover the average cost of living for most seniors.\(^\text{13}\) A better indicator of the average cost of living is The Elder Index, which measures “…the income older adults need to live independently.”\(^\text{14}\) As shown in Table 3 below, depending on their housing situation, an individual over age 65, in good health, and living alone in Knox County needs between $19,068 and $28,428 a year to meet their independent living needs.\(^\text{15}\)

### Table 3: Economic Security for Elders in Knox County\(^\text{16,17,18}\)

<table>
<thead>
<tr>
<th>Elder Economic Index (per year)</th>
<th>Mean Social Security Income (calculated per year*)</th>
<th>100% Federal Poverty Level (FPL)</th>
<th>% of Population Age 65+ with Income Below FPL</th>
<th>Income at Elder Economic Security Index Level Expressed as a % of FPL Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner without Mortgage</td>
<td>$19,068</td>
<td>$12,760</td>
<td>8.0%</td>
<td>149%</td>
</tr>
<tr>
<td>Renter, One Bedroom</td>
<td>$22,608</td>
<td></td>
<td></td>
<td>177%</td>
</tr>
<tr>
<td>Owner, with Mortgage</td>
<td>$28,428</td>
<td></td>
<td></td>
<td>223%</td>
</tr>
</tbody>
</table>

*Based on monthly average Social Security Retirement income of $1,503 x 12 months.

In order to compensate for the increased difficulty of saving for retirement, many seniors struggle to leave the labor force. In Knox County, 26.8% of residents age 65-74 remained in the labor force in 2018, up from 21.0% in 2010. At 75 years or older, 6.8% of seniors remained in the labor force in 2018, up slightly from 6.1% in 2010.\(^\text{19}\)

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15 Ibid.

16 Ibid.


19 Ibid.
According to Census data, in 2018 28,997 veterans lived in Knox County and made up 8.1% of the total adult civilian population. Most veterans in Knox County are White (89.9%) and male (91.6%). The percentage of veterans who report a disability is higher than the non-veteran population. The median income for veterans in Knox County is $40,014. This is greater than the median income for the adult non-veteran population whose median income is $27,318. Unemployment among veterans in Knox County is nearly identical to the non-veteran population. In the past 12 months, 6.3% of Veterans had incomes below the poverty level, compared with 14.8% of the non-veteran adult population in Knox County.

In 2018, the City of Knoxville’s 10,027 veterans accounted for 6.7% of the city’s adult civilian population. Most veterans are White (80.7%) and male (90.8%), although a higher percentage of veterans in Knoxville are racial minorities (19.3%) when compared to Knox County (10.3%). Disability among veterans is higher than among non-veterans living in Knoxville. The median income among veterans in Knoxville is higher ($33,030) than among non-veterans ($21,313). Only 11.4% of veterans had income below the poverty level, compared to 24.6% of non-veterans. Unemployment is lower among veterans (3.9%) than among non-veterans (6.0%).

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21 Ibid.
22 Ibid.
23 Ibid.
**Knox County Veteran Characteristics**

<table>
<thead>
<tr>
<th></th>
<th>Veterans</th>
<th>Non-veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent reporting disabilities</td>
<td>27.8%</td>
<td>14.0%</td>
</tr>
<tr>
<td>Unemployment rate</td>
<td>3.5%</td>
<td>4.9%</td>
</tr>
<tr>
<td>Percent in poverty</td>
<td>6.3%</td>
<td>14.8%</td>
</tr>
<tr>
<td>Percent with bachelor’s degree or higher</td>
<td>34.1%</td>
<td>37.0%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

*Figure 4: Veteran Characteristics in Knox County — 2018*

---

**Knoxville Veteran Characteristics**

<table>
<thead>
<tr>
<th></th>
<th>Veterans</th>
<th>Non-veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent reporting disabilities</td>
<td>30.8%</td>
<td>16.4%</td>
</tr>
<tr>
<td>Unemployment rate</td>
<td>3.9%</td>
<td>6.0%</td>
</tr>
<tr>
<td>Percent in poverty</td>
<td>7.2%</td>
<td>15.3%</td>
</tr>
<tr>
<td>Percent with bachelor’s degree or higher</td>
<td>11.4%</td>
<td>24.6%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

*Figure 5: Veteran Characteristics in Knoxville — 2018*
In both Knoxville and Knox County, poverty has risen since 2013. Poverty rates in Knoxville are significantly higher than in Knox County (See Figure 6). A more detailed discussion of poverty in these areas continues in Section II.

**Figure 6: Individuals in Poverty in Knoxville and Knox County, Tennessee — 2013–2018**

Source: U.S. Census Bureau ACS 5-Year Estimates
Poverty in the City of Knoxville is higher than in Knox County, regardless of race, ethnicity, age, or gender. Among racial groups, Black/African-American individuals in Knox County and Knoxville have the largest proportions of individuals and families living at or below the poverty level. As shown in Table 4 and Figure 7, in 2018, 34.9% of Black/African-American individuals in Knox County and 41.6% of Black/African-American individuals in Knoxville were living at or below the poverty level. This is higher than the proportion of white individuals living in poverty in Knox County (12.7%) and in the City of Knoxville (22.1%). Additionally, the proportions of Black/African-American individuals living in poverty in Knox County and the City of Knoxville are significantly higher than the poverty rate of 24.2% for Black/African-American individuals nationwide. For those identifying as White, American Indian or Alaska Native, Some Other Race, or Two or More Races, poverty rates in Knox County and Knoxville have slowly but steadily increased from 2009 to 2018. There are also differences in poverty by ethnicity; Hispanic/Latino individuals living in Knox County are more than twice as likely to live at or below the poverty level when compared to White, non-Hispanic/Latino individuals.²⁴

As shown in Figures 8 and 9, poverty trends by gender are similar to those nationwide. In 2018, 16.3% of women in Knox County and 27.7% of women in Knoxville lived in poverty.\textsuperscript{25} The poverty rate among men in Knox County is 14.1% and 25.2% in Knoxville.\textsuperscript{26} This is in part due to the gender pay gap. In Knox County, according to the U.S. Census Bureau in 2018, women earned 78 cents for every dollar earned by a man, on average. This disparity is greater for women of color in Tennessee who hold full-time year-round jobs, as Black/African-American women are paid 61 cents and Hispanic/Latina women are paid 63 cents for every dollar paid to white, non-Hispanic men.\textsuperscript{27}

### Table 4: Poverty by Race and Ethnicity in Knox County, Tennessee — 2014–2018

<table>
<thead>
<tr>
<th>Individuals below the poverty line</th>
<th>2014</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>65,635</td>
<td>67,732</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>47,294</td>
<td>48,513</td>
</tr>
<tr>
<td>Black/African American</td>
<td>13,973</td>
<td>13,572</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>74</td>
<td>119</td>
</tr>
<tr>
<td>Asian</td>
<td>1,235</td>
<td>1,225</td>
</tr>
<tr>
<td>Some Other Race</td>
<td>811</td>
<td>1,817</td>
</tr>
<tr>
<td>Two or More Races</td>
<td>2,248</td>
<td>2,486</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>5,180</td>
<td>5,056</td>
</tr>
<tr>
<td>White, Not Hispanic/Latino</td>
<td>43,156</td>
<td>45,417</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

**Racial and Ethnic Minorities are More Likely to Be in Poverty**

<table>
<thead>
<tr>
<th>Race/Minority</th>
<th>2014</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black/African American</td>
<td>41.3%</td>
<td></td>
</tr>
<tr>
<td>Two or More Races</td>
<td>40.5%</td>
<td></td>
</tr>
<tr>
<td>Some Other Race</td>
<td>32.6%</td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>30.8%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td></td>
<td>22.1%</td>
</tr>
<tr>
<td>Asian</td>
<td></td>
<td>22.1%</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td></td>
<td>13.2%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

\textsuperscript{25} Ibid.

\textsuperscript{26} Ibid.

\textsuperscript{27} Figures were calculated using U.S. Census Bureau 2018 American Community Survey 5-Year Estimates data from Table B20017: Median Earnings in the Past 12 Months (In 2018 Inflation-Adjusted Dollars) by Sex by Work Experience in The Past 12 Months for the Population 16 Years and Over with Earnings in the Past 12 Months and subtables B20017A, B20017B, and B20027i retrieved from https://data.census.gov/cedsci/table?q=B20017&g=0500000US47093&tid=ACSDT1Y2018.B20017&tp=true&hidePreview=true
As shown in Figures 8 and 9, in both Knox County and Knoxville, a greater proportion of those under 18 years of age live at or below the poverty level when compared to those aged 18–64 and 65 years of age and older.

**Figure 8: Percent Below Poverty Level by Age and Gender, Knoxville — 2018**

**Figure 9: Percent Below Poverty Level by Age and Gender, Knox County — 2018**

Growing up in poverty can have lifelong impacts in a wide variety of areas including cognitive development, physical development, and academic achievement. Additionally, these children face an opportunity gap. The opportunity gap is the way in which “race, ethnicity, socioeconomic status, English proficiency, community wealth, familial situations, or other factors contribute to or perpetuate lower educational aspirations, achievement, and attainment for certain groups of students.”

A 2019 Stanford University analysis of scores from hundreds of millions of tests over the past decade by students in thousands of school districts found “poverty impacts U.S. achievement gaps more than race.” The study found that racial segregation is associated with the achievement gap because students of color tend to be concentrated in high-poverty schools. High-poverty schools have less experienced teachers and fewer resources, the quality of the education provided is affected.

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30. Ibid.
data are not yet available about the impact of COVID-19, many educators have voiced concerns that these gaps may become wider as a result of the need to implement remote learning. Students whose families live in poverty may be more likely to have less reliable internet service and ability to participate in quality education and enrichment opportunities afforded to those with more reliable access.

The New York Times national education columnist Richard Rothstein points out that children growing up poor have greater difficulty achieving because they have more to overcome; they also have fewer opportunities because they are more likely to experience:

- Health risks such as greater exposure to environmental toxins (including lead), poor nutrition, asthma, less access to pediatric care, poorer vision, and greater inability to attain corrective lenses
- Living in unsafe housing and housing instability, which can lead to frequent moving and change of schools, causing a disruption to learning
- Parents working in low-wage jobs that are often unstable, leading to an unstable family financial situation
- Less access to high-quality early education during the time of most rapid brain development
- Greater exposure to crime and drug abuse in their neighborhoods
- Less access to enrichment experiences like travel, camps, arts, and music lessons
- Less frequent exposure to well-educated adults, complex language, large vocabularies, and lower expectations for critical thinking

A number of studies have found that biochemical changes due to stress among children living in poverty can make success in school more difficult. More specifically, under stress the brain produces cortisol, which destroys brain cells. This change creates risk factors for depression, anxiety, and anger, all of which can be enhanced by environmental factors like unhealthy living conditions, hunger, violence, or drug abuse in the home. One result of exposure to these factors is that the brain’s capacity to process information is slowed.

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33 Ibid.
In 2018, 13% of households in Knox County lived with incomes below the Federal Poverty Level (FPL). However, an additional 30% of households in Knox County lived above the official FPL but struggled to afford the necessities of life, despite being employed. This population is called ALICE—Asset Limited, Income Constrained, Employed.

The concept of ALICE began with a United Way of Northern New Jersey study of the hardships faced by families in one New Jersey county over a decade ago. Since then, United for Alice has grown and includes United Ways, corporations, and foundations in 20 states who are invested in a grassroots movement to change the dialogue about financial hardship.\(^{34}\)

The ALICE threshold is set using the Household Survival Budget, which “estimates the minimal cost of the six basic household necessities—housing, child care, food, transportation, health care, and a basic smartphone plan.”\(^{35}\) As shown in Figure 10, Hispanic/Latino households and Black/African-American households are more likely to be ALICE than other races. Households with single men or women are more likely to be ALICE than households with married heads of household (See Figure 11). As shown in Figure 12, households headed by those age 65 and older and 25 and younger are more likely to be ALICE than households where the head of the household is between the ages of 25 and 65.


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**Figure 10:** ALICE — Asset Limited, Income Constrained, Employed by Race in Knox County — 2018
Those who fall below the ALICE threshold are employed, but their earnings fall short of a livable amount to support a family. The Household Survival Budget reflects the minimum cost to live and work in the modern economy and includes housing, child care, food, transportation, health care, technology (a smartphone plan), and taxes. However, it does not include savings for emergencies, college, or retirement. The majority of jobs in Tennessee pay less than $20 per/hour, meaning that even with two adults working full time, income falls significantly short of the Household Survival Budget in Knox County. In 2018 the Household Survival Budget for a family of four with two school-aged children was $64,964 and $74,184 for a family of four with two children in childcare.

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36 Ibid.
37 Ibid.
38 Ibid.
Poverty in Knox County is mostly concentrated in the areas within and immediately surrounding downtown Knoxville. As shown in Figure 13, there are 10 census tracts in Knoxville with extremely high levels of poverty (i.e., over 40%). The people living in these areas comprise 19.5% of the population of Knoxville, but 40.3% of those living in poverty live in these 10 areas. The tract with the highest number of individuals living below the poverty line is tract 69 (Fort Sanders), where 4,104 people live in poverty. However, many of these individuals are college students who are unrelated individuals working only part-time or not at all, and whose families may be supporting them. Only 162 families live in census tract 69.

After Fort Sanders (tract 69), the area with the next highest number of those living in poverty is census tract 68, which contains most of the neighborhood of Morningside. There are 1,240 families living in tract 68. Over half of the households (55.5%) in tract 68 receive SNAP benefits (i.e., food stamps), compared to only 2.5% of households in tract 69. In Morningside, there are 693 households that do not have access to a vehicle and live more than ½ mile from the nearest supermarket.

Figure 14 shows the ten extreme poverty census tracts and an additional 21 Knox County census tracts where 20% or more of the individuals live in poverty. Those 31 census tracts account for nearly one-quarter (24.2%) of the total population in Knox County, but more than half (58.2%) of those living in poverty in Knox County live in one of those census tracts.

In many cases, racial and ethnic groups are not evenly distributed in high poverty areas. As shown in Figures 15 and 16, the highest concentrations of Black/African-American residents living in high poverty census tracts live in Mechanicsville, Morningside, and Burlington. However, the highest concentrations of White individuals living in high poverty census tracts are in the neighborhoods of Arlington, Sharp’s Ridge/Memorial Park, Western Heights, Marble City, Fort Sanders, and Old Sevier. There is some overlap between White and Hispanic/Latino individuals living in areas with high concentrations of poverty. More specifically, the highest concentrations of Hispanic/Latino residents living in poverty are located in Western Heights and Marble City, where a significant concentration of White individuals living in poverty also reside. Also as shown in Figures 15 and 16, only 8.1% of Knoxville’s White population and 9.4% of the total Hispanic/Latino population in Knoxville live in extreme poverty census tracts. However, 20.7% of the total Black/African-American population of Knoxville live in extreme poverty tracts.

## Concentrated Poverty: Population Living Below Poverty Level in Extreme Poverty Census Tracts (40% in Poverty or Higher), in Knoxville — 2018

<table>
<thead>
<tr>
<th>Tract</th>
<th>Neighborhood</th>
<th>Number in poverty</th>
<th>% in poverty</th>
<th>% of Knoxville poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>69</td>
<td>Fort Sanders</td>
<td>4,104</td>
<td>65.6%</td>
<td>11.9%</td>
</tr>
<tr>
<td>68</td>
<td>Morningside</td>
<td>2,714</td>
<td>59.8%</td>
<td>7.9%</td>
</tr>
<tr>
<td>28</td>
<td>Lonsdale</td>
<td>2,204</td>
<td>46.1%</td>
<td>6.4%</td>
</tr>
<tr>
<td>8</td>
<td>Old Sevier</td>
<td>2,036</td>
<td>55.5%</td>
<td>5.9%</td>
</tr>
<tr>
<td>29</td>
<td>Arlington, Sharp’s Ridge</td>
<td>1,938</td>
<td>52.3%</td>
<td>5.6%</td>
</tr>
<tr>
<td>14</td>
<td>Western Heights</td>
<td>1,727</td>
<td>65.4%</td>
<td>5.0%</td>
</tr>
<tr>
<td>20</td>
<td>Burlington</td>
<td>1,356</td>
<td>43.9%</td>
<td>3.9%</td>
</tr>
<tr>
<td>70</td>
<td>Mechanicsville</td>
<td>1,296</td>
<td>47.3%</td>
<td>3.8%</td>
</tr>
<tr>
<td>26</td>
<td>Marble City</td>
<td>1,032</td>
<td>41.2%</td>
<td>3.0%</td>
</tr>
<tr>
<td>9.02</td>
<td>University of Tennessee Knoxville</td>
<td>355</td>
<td>66.4%</td>
<td>1.0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total population</th>
<th>Number in poverty</th>
<th>% of Knoxville total population</th>
<th>% of Knoxville poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>34,553</td>
<td>18,762</td>
<td>19.5%</td>
<td>40.3%</td>
</tr>
</tbody>
</table>

*Figure 13: Concentrated Poverty: Population Living Below Poverty Level in Extreme Poverty Census Tracts (40% in Poverty or Higher), in Knoxville — 2018*
### Figure 14: High Poverty Census Tracts (20% or higher) in Knox County – 2018

<table>
<thead>
<tr>
<th>Tract</th>
<th>Neighborhood(s)</th>
<th>% in poverty</th>
<th># in poverty</th>
<th>% of Knox County poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>West View</td>
<td>39.1%</td>
<td>1,047</td>
<td>1.5%</td>
</tr>
<tr>
<td>19</td>
<td>East Knoxville, Park City</td>
<td>38.6%</td>
<td>554</td>
<td>0.8%</td>
</tr>
<tr>
<td>24</td>
<td>Vestal</td>
<td>37.9%</td>
<td>1,714</td>
<td>2.5%</td>
</tr>
<tr>
<td>21</td>
<td>Boyd’s Bridge</td>
<td>36.6%</td>
<td>1,102</td>
<td>1.6%</td>
</tr>
<tr>
<td>35</td>
<td>Lakemoor Hills, Kingsley Station</td>
<td>34.7%</td>
<td>1,639</td>
<td>2.4%</td>
</tr>
<tr>
<td>66</td>
<td>Fourth &amp; Gill, Old North Knoxville</td>
<td>34.6%</td>
<td>1,076</td>
<td>1.6%</td>
</tr>
<tr>
<td>67</td>
<td>Parkridge, Edgewood</td>
<td>33.2%</td>
<td>1,029</td>
<td>1.5%</td>
</tr>
<tr>
<td>32</td>
<td>East Knoxville, Chilhowee Hills</td>
<td>30.4%</td>
<td>885</td>
<td>1.3%</td>
</tr>
<tr>
<td>23</td>
<td>South Knoxville</td>
<td>30.0%</td>
<td>1,021</td>
<td>1.5%</td>
</tr>
<tr>
<td>22</td>
<td>South Knoxville, Island Home</td>
<td>22.9%</td>
<td>843</td>
<td>1.2%</td>
</tr>
<tr>
<td>54.02</td>
<td>Midway, Riverdale</td>
<td>22.7%</td>
<td>695</td>
<td>1.0%</td>
</tr>
<tr>
<td>30</td>
<td>Whittle Springs</td>
<td>22.2%</td>
<td>1,146</td>
<td>1.7%</td>
</tr>
<tr>
<td>62.08</td>
<td>Fountaincrest, Greenwood Forest</td>
<td>22.2%</td>
<td>1,328</td>
<td>2.0%</td>
</tr>
<tr>
<td>39.02</td>
<td>Norwood</td>
<td>21.9%</td>
<td>681</td>
<td>1.0%</td>
</tr>
<tr>
<td>17</td>
<td>Belle Morris</td>
<td>20.3%</td>
<td>453</td>
<td>0.7%</td>
</tr>
<tr>
<td>16</td>
<td>North Knoxville</td>
<td>20.2%</td>
<td>553</td>
<td>0.8%</td>
</tr>
<tr>
<td>8</td>
<td>Old Sevier</td>
<td>55.5%</td>
<td>2,036</td>
<td>3.0%</td>
</tr>
<tr>
<td>68</td>
<td>Morningside</td>
<td>59.8%</td>
<td>2,714</td>
<td>4.0%</td>
</tr>
<tr>
<td>29</td>
<td>Arlington, Sharp’s Ridge</td>
<td>52.3%</td>
<td>1,938</td>
<td>2.9%</td>
</tr>
<tr>
<td>70</td>
<td>Mechanicsville</td>
<td>47.3%</td>
<td>1,296</td>
<td>1.9%</td>
</tr>
<tr>
<td>28</td>
<td>Lonsdale</td>
<td>46.1%</td>
<td>2,204</td>
<td>3.3%</td>
</tr>
<tr>
<td>20</td>
<td>Burlington</td>
<td>43.9%</td>
<td>1,356</td>
<td>2.0%</td>
</tr>
<tr>
<td>26</td>
<td>Marble City</td>
<td>41.2%</td>
<td>1,032</td>
<td>1.5%</td>
</tr>
</tbody>
</table>

### All tracts with 20%–39.9% in poverty

<table>
<thead>
<tr>
<th></th>
<th>Total population</th>
<th>% of Knox County population</th>
<th># in poverty</th>
<th>% of Knox County poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>All tracts</td>
<td>73,155</td>
<td>16.4%</td>
<td>20,605</td>
<td>30.4%</td>
</tr>
</tbody>
</table>

### All tracts with 40% or more poverty

<table>
<thead>
<tr>
<th></th>
<th>Total population</th>
<th>% of Knox County population</th>
<th># in poverty</th>
<th>% of Knox County poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>All tracts</td>
<td>34,553</td>
<td>7.5%</td>
<td>18,762</td>
<td>30.3%</td>
</tr>
</tbody>
</table>

### All tracts with 20% or more in poverty

<table>
<thead>
<tr>
<th></th>
<th>Total population</th>
<th>% of Knox County population</th>
<th># in poverty</th>
<th>% of Knox County poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>All tracts</td>
<td>107,708</td>
<td>24.2%</td>
<td>39,367</td>
<td>58.1%</td>
</tr>
</tbody>
</table>
### Table: Percent of Knoxville Population Living in Extreme Poverty Tracts by Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Less than 15%</th>
<th>15–30%</th>
<th>30–50%</th>
<th>50% or higher</th>
</tr>
</thead>
<tbody>
<tr>
<td>White, not Hispanic Latino</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of Knoxville White population below poverty level living in extreme poverty tracts</td>
<td>37.1%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of Knoxville White population living in extreme poverty tracts</td>
<td>8.1%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black/African-American</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of Knoxville Black/African-American population below poverty level living in extreme poverty tracts</td>
<td>50.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of Knoxville Black/African-American population living in extreme poverty tracts</td>
<td>20.7%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Figure 15: Population Living in Extreme Poverty Census Tracts (40% in Poverty or Higher) by Race — 2018*
Figure 16: Hispanic/Latino Population Living in Extreme Poverty Census Tracts (40% in Poverty or Higher) — 2018
As shown in Tables 5 through 7, the median income in Knox County for households ($54,437) is higher than the median household income in the City of Knoxville ($37,703). The median income in Knox County is higher than the median income in the state of Tennessee ($50,972), but lower than the median income in the United States ($60,293).\textsuperscript{41} The median income in the City of Knoxville is lower than the median incomes for both the state of Tennessee and the United States. Smaller proportions of households in Knox County receive SSI, cash public assistance, and SNAP benefits when compared to Tennessee and the United States as a whole. However, greater proportions of households in the City of Knoxville receive SSI, cash public assistance, and SNAP when compared to Knox County, the state of Tennessee, and the United States.\textsuperscript{42}

\textsuperscript{42} Ibid.
**Table 5: Median and Mean Incomes for Households, Families, Married-couple Families, and Nonfamily Households in Knoxville — 2018**

<table>
<thead>
<tr>
<th></th>
<th>Households</th>
<th>Families</th>
<th>Married-couple Families</th>
<th>Nonfamily Households</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>79,579</td>
<td>39,547</td>
<td>24,422</td>
<td>40,032</td>
</tr>
<tr>
<td><strong>Median income</strong></td>
<td>$37,703</td>
<td>$49,473</td>
<td>$67,923</td>
<td>$28,851</td>
</tr>
<tr>
<td><strong>Mean income</strong></td>
<td>$56,382</td>
<td>$72,117</td>
<td>$91,495</td>
<td>$39,337</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

**Table 6: Income Distribution for Households, Families, Married-couple Families, and Nonfamily Households in Knox County —**

<table>
<thead>
<tr>
<th></th>
<th>Households</th>
<th>Families</th>
<th>Married-couple Families</th>
<th>Nonfamily Households</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>183,318</td>
<td>113,989</td>
<td>86,402</td>
<td>69,329</td>
</tr>
<tr>
<td>Less than $10,000</td>
<td>7.4%</td>
<td>4.7%</td>
<td>1.3%</td>
<td>13.2%</td>
</tr>
<tr>
<td>$10,000 to $14,999</td>
<td>5.0%</td>
<td>2.3%</td>
<td>0.9%</td>
<td>9.5%</td>
</tr>
<tr>
<td>$15,000 to $24,999</td>
<td>10.5%</td>
<td>6.6%</td>
<td>4.1%</td>
<td>16.9%</td>
</tr>
<tr>
<td>$25,000 to $34,999</td>
<td>10.3%</td>
<td>8.2%</td>
<td>6.4%</td>
<td>13.7%</td>
</tr>
<tr>
<td>$35,000 to $49,999</td>
<td>13.0%</td>
<td>11.5%</td>
<td>9.6%</td>
<td>15.9%</td>
</tr>
<tr>
<td>$50,000 to $74,999</td>
<td>17.4%</td>
<td>18.3%</td>
<td>19.0%</td>
<td>15.3%</td>
</tr>
<tr>
<td>$75,000 to $99,999</td>
<td>12.8%</td>
<td>15.7%</td>
<td>18.0%</td>
<td>7.5%</td>
</tr>
<tr>
<td>$100,000 to $149,999</td>
<td>13.1%</td>
<td>17.3%</td>
<td>21.4%</td>
<td>5.7%</td>
</tr>
<tr>
<td>$150,000 to $199,999</td>
<td>5.3%</td>
<td>7.8%</td>
<td>9.8%</td>
<td>1.2%</td>
</tr>
<tr>
<td>$200,000 or more</td>
<td>5.3%</td>
<td>7.7%</td>
<td>9.5%</td>
<td>1.1%</td>
</tr>
<tr>
<td><strong>Median income</strong></td>
<td>$54,437</td>
<td>$72,650</td>
<td>$86,487</td>
<td>$32,037</td>
</tr>
<tr>
<td><strong>Mean income</strong></td>
<td>$76,945</td>
<td>$95,389</td>
<td>$109,566</td>
<td>$44,739</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates

**Table 7: Income and SSI, Public Cash Assistance, and SNAP Recipients in the United States, Tennessee, Knox County, and the City of Knoxville — 2018**

<table>
<thead>
<tr>
<th></th>
<th>Mean Per Capita Income (dollars)</th>
<th>Median Household Income (dollars)</th>
<th>Households with Supplemental Security Income (SSI)</th>
<th>% Households with Supplemental Security Income (SSI)</th>
<th>Households receiving cash public assistance</th>
<th>% Households receiving cash public assistance</th>
<th>Households with food stamps/SNAP benefits in past 12 months</th>
<th>% Households with food stamps/SNAP benefits in past 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>$32,621</td>
<td>$60,293</td>
<td>6,449,860</td>
<td>5.4%</td>
<td>2,939,063</td>
<td>2.5%</td>
<td>14,635,297</td>
<td>12.2%</td>
</tr>
<tr>
<td>Tennessee</td>
<td>$28,511</td>
<td>$50,972</td>
<td>150,669</td>
<td>5.9%</td>
<td>60,172</td>
<td>2.3%</td>
<td>379,325</td>
<td>14.8%</td>
</tr>
<tr>
<td>Knox County</td>
<td>$31,678</td>
<td>$54,437</td>
<td>8,864</td>
<td>4.8%</td>
<td>3,367</td>
<td>1.8%</td>
<td>21,981</td>
<td>12.0%</td>
</tr>
<tr>
<td>City of Knoxville</td>
<td>$25,176</td>
<td>$37,703</td>
<td>5,496</td>
<td>6.9%</td>
<td>2,204</td>
<td>2.8%</td>
<td>15,295</td>
<td>19.2%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau ACS 5-Year Estimates
In Knox County in 2015, those with an income in the top 1% made 26.2 times more than those with an income in the bottom 99%. The average annual income for an individual in the top 1% was $1,268,658, compared to the annual average income of $48,485 that the bottom 99% made. In Knoxville, the top 1% made 21.2 times more than the bottom 99%. As shown in Figure 18, the top 1% of families receive 17.8% of all the income in Tennessee.43

According to the U.S. Census Bureau, the Gini index is the “summary measure of income inequality.” The Gini index varies between zero and one. A value of one indicates a perfect inequality where only one household has any income. A value of zero indicates perfect equality where all households have equal income.” In 2018, the Gini index for Knox County is 0.4836, while the Gini index for Knoxville is slightly higher at 0.575. For comparison, the 2018 Gini index for the United States is 0.4822, and the 2018 Gini index for Tennessee is 0.4802. This means that the level of income inequality in Knox County is on par with the level of income inequality in Tennessee and the United States. In the City of Knoxville, there is slightly more income inequality than in Knox County, the state of Tennessee, and the United States. It is important to note that the United States’ level of income inequality is relatively high.44

Race also plays a role in income inequality. Looking at the Gini index by race in the United States, the Gini Index is lower for white households (0.474) than for Asian (0.481) and African-American/Black (0.491) households.45 This means that there is less income inequality among white households than African-American/Black or Asian households.

Figure 18: GINI Index, Knoxville and Knox County — 2018
As Figure 19 shows, since 2015 there has been less unemployment in Knoxville and Knox County than in either the state of Tennessee or the nation. More specifically, the unemployment rate in Knoxville was 2.9% and 3.2% in Knox County. This is lower than the state rate of 3.4% and the national rate of 3.7%. However, these rates can be extremely deceptive as they do not include the millions of individuals who said they want a job but have not participated in a job search in the past 4 weeks. This measure also fails to account for involuntary part-time workers who want to work full time, are available to do so, but cannot find a full-time job. If these groups are included, Tennessee’s 2019 unemployment rate jumps from 3.5% to 6.8%. Additionally, when looking at employment statistics, the underemployment rate must also be considered. The underemployment rate factors in the total number of unemployed and those who are employed part-time for economic reasons and all marginally attached workers as a percentage of the civilian workforce and marginally attached workers. The underemployment rate in 2019 was 7.7% nationwide and 6.8% in Tennessee. In the spring of 2020, the COVID-19 pandemic led to dramatically increased unemployment. Although annual unemployment data are not yet available to gauge the long-term impact of the pandemic, April 2020 data statewide suggests that the immediate impact was staggering—an increased unemployment rate of 14.7%.

Figure 19: Unemployment Percentages from Bureau of Labor Statistics — 2015–2018

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Census data show that level of education affects median earnings. As shown in Figure 20, the 2018 median annual earnings among those with graduate or professional degrees in Knox County was $63,065, which is $44,848 higher than the median annual earnings of $18,217 for those who did not graduate from high school.\(^5\) In Knoxville, the 2018 median annual earnings for those with a graduate or professional degree was $51,570, which is $34,425 higher than the median annual earnings of $17,145 for those who did not graduate from high school. As shown in Figure 21, a greater proportion of those who do not complete high school live at or below the poverty level compared to those with higher levels of education. Those with a bachelor’s degree or higher are the least likely to live at or below the poverty level—4.3% in Knox County and 6.8% in Knoxville.\(^6\)


\(^{6}\) Ibid.
In 2020, the overall high school graduation rate was an encouraging 91.8%. However, when looking at certain groups, the proportion of students graduating is an area of concern. More specifically, as shown in Figure 22, students in foster care, students experiencing homelessness, disabled students, English language learners, economically disadvantaged students, and students who are Black/African-American, Hispanic/Latino, or Native American are significantly less likely to graduate from high school.\textsuperscript{52}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{knox_county_schools_graduation_rates_by_student_group_2020.png}
\caption{Knox County Schools Graduation Rates by Student Group – 2020}
\end{figure}

\textsuperscript{52} Tennessee Department of Education. (2020). \textit{Knox County Graduation Rate}. https://reportcard.tnk12.gov/districts/470/graduation
Nationwide there is a lack of quality, affordable housing. According to the U.S. Department of Housing and Urban Development’s Office of Policy Development and Research, housing is considered affordable when a household spends no more than 30% of their income on housing. Conversely, if a household is rent/cost burdened, it means that the household is spending more than 30% of its income on rent/housing.\(^53\)

One reason for the lack of affordable housing is that the number of low-cost housing units continues to decline. A 2018 report by the Joint Center for Housing Studies of Harvard University stated that “more than 2.5 million units priced below $800 in real terms—affordable to households earning up to $32,000 per year—were lost on net between 1990 and 2016.”\(^54\)

---


The Tennessee Department of Health has expressed concern over the health effects of housing stress, stating, “Quality housing is associated with positive physical and mental well-being.”55 Nearly one-third (29.7%) of those living in Knox County are experiencing some kind of housing stress. Those experiencing housing stress are facing one or more of the following concerns:

- Lack of complete plumbing
- Lack of complete kitchen facilities
- Gross rent or selected owner costs greater than 30 percent of household income
- More than one person per room living in the household56

Housing is not affordable for many in Knox County and Knoxville working minimum wage and low-wage jobs. As shown in Figure 23, rent is rising in Knoxville. There has been a 15.57% increase in the cost of rent in the past 2 years and a 19.5% increase in the past 5 years.57,58 In 2020 Knox County and Knoxville, the fair market rent (FMR) for a two-bedroom unit is $915 per month.59 To afford a two-bedroom unit in Knoxville or Knox County, a household needs to earn $36,600 a year or roughly $17.60 an hour.60 This means that to afford housing, a renter household would need to work 96 hours per week at minimum wage. In Knox County in 2020, the estimated hourly mean wage for a renter is $14.15, and affordable rent at that wage is $736, well below the FMR of $915. In Knoxville, the situation is similar, as the estimated mean hourly wage for a renter is $14.47, and affordable rent at that wage is $752, which is below the FMR of $915.61

Calls to Knox County’s 2-1-1 call centers serve as another indicator of the lack of affordable housing. 2-1-1 call centers provide help locating food, shelter, and meeting other emergency needs. During the 2019 calendar year, most 2-1-1 calls made in Knox County (28.8%) were related to housing and shelter needs. Among those housing and shelter calls, 55% were specifically related to rental assistance.62 According to data available for the 2020 fiscal year in Knox County, Knoxville’s Community Development Corporation (KCDC) will provide 1,647 units of public housing for low-income individuals and families. Additionally, KCDC utilized $23 million in Housing Assistance Payments (HAP) funding and supported approximately 4,108 Section 8 housing units.63 However, there are still waiting lists for public housing and Section 8, according to the KCDC website.

Figure 23: Affordability of Monthly Rent in Knoxville — 2020

| Two-bedroom apartment (Fair market rent $915 per month) | Minimum income of $17.60/hour | Work 96 hour per week at minimum wage |

Source: National Low-income Housing Coalition

57 Equivalent data not available for Knox County.
60 Ibid.
61 Ibid.
A discussion of housing access and affordability must include the topic of homelessness. Because of variations in the way the homeless are counted and the different definitions of “homeless,” it is often difficult to provide an accurate estimate of the number of homeless individuals in an area. Although not all homeless individuals seek services, looking at the number of those who access services, their characteristics, and their needs can be helpful in better understanding the homeless situation in an area. Knox County, like many areas, utilizes the Homeless Management Information System (HMIS) to collect data on homelessness in the community.

According to KnoxHMIS in 2018, 9,183 individuals accessed homeless services from one of 20 partner agencies in Knox County. This number is roughly equivalent to the number served in 2017. Among those who were served in 2018, 86.2% were homeless, 8.7% were housed but at-risk of becoming homeless, and 5.1% were stably housed. As shown in Table 8, those who accessed services were most likely to be white (61%), non-Hispanic/Latino (90%), and between the ages of 25 and 55 (54%). In terms of subpopulations, there were 716 family households, which included 2,246 persons or 25% of all active clients served, 815 were unaccompanied youth (9% of all active clients) and 995 seniors (11% of all active clients) (See Table 8).

### Table 8: Demographics of KnoxHMIS Clients — 2018

<table>
<thead>
<tr>
<th></th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Households by Race</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>5,623</td>
<td>61%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>2,675</td>
<td>29%</td>
</tr>
<tr>
<td>Other</td>
<td>142</td>
<td>2%</td>
</tr>
<tr>
<td>Null</td>
<td>743</td>
<td>8%</td>
</tr>
<tr>
<td><strong>Households by Type of Family</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Hispanic/Non-Latino</td>
<td>8,224</td>
<td>90%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>230</td>
<td>3%</td>
</tr>
<tr>
<td>Null</td>
<td>729</td>
<td>8%</td>
</tr>
<tr>
<td><strong>Households by Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0–17</td>
<td>1,271</td>
<td>14%</td>
</tr>
<tr>
<td>18–24</td>
<td>816</td>
<td>9%</td>
</tr>
<tr>
<td>25–55</td>
<td>4,933</td>
<td>54%</td>
</tr>
<tr>
<td>56–61</td>
<td>1,017</td>
<td>11%</td>
</tr>
<tr>
<td>62+</td>
<td>985</td>
<td>11%</td>
</tr>
<tr>
<td>Null</td>
<td>161</td>
<td>2%</td>
</tr>
</tbody>
</table>

**Source:** KnoxHMIS 2018 Annual Report

### Table 9: Subpopulations of Active KnoxHMIS Clients — 2018

<table>
<thead>
<tr>
<th>Subpopulation</th>
<th>#</th>
<th>%</th>
<th>Change from 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individuals in families</td>
<td>2,246</td>
<td>25%</td>
<td>+5%</td>
</tr>
<tr>
<td>Youth</td>
<td>815</td>
<td>9%</td>
<td>+1%</td>
</tr>
<tr>
<td>Veterans</td>
<td>774</td>
<td>8%</td>
<td>-1%</td>
</tr>
<tr>
<td>Chronically homeless</td>
<td>627</td>
<td>7%</td>
<td>+2%</td>
</tr>
<tr>
<td>Street homeless</td>
<td>1,899</td>
<td>21%</td>
<td>+5%</td>
</tr>
<tr>
<td>Seniors</td>
<td>995</td>
<td>11%</td>
<td>+1%</td>
</tr>
</tbody>
</table>

**Source:** KnoxHMIS 2018 Annual Report
The most frequently reported causes of homelessness in Knox County relate to difficulties in finding and remaining in affordable housing (26%) (See Figure 24). The second most regularly reported cause of homelessness in Knox County is an inability to find or keep employment with a livable wage (23%). Other frequently reported causes of homelessness include substance abuse (250), fleeing domestic violence (222) and non-violent family confrontation (188). The 2018 Knoxville Knox County Homeless Coalition Biennial Study, which included interviews with 215 Knoxville residents who were “experiencing homelessness in 19 programs provided in shelters and outdoor locations,” dispels the myth that all homeless people are unemployed. The study found that 18% of those interviewed reported that they were employed. For those with an income, the average weekly income was $133 a week, or $6,934 a year. Almost one third (30%) reported that their primary daytime activity was working or looking for work.

There were positive outcomes for many of those served, including:
- 1,886 individuals were placed in positive housing situations.
- 64% housing outcomes were to positive housing destinations.
- Those programs that provide rapid rehousing averaged 52 days to housing.
- Time to exit was 54 days in emergency shelter programs.
- Time to exit was 138.25 days in programs providing transitional housing.
- Those programs that provide permanent housing had an average length of stay of 1,200 days.

Source: KnoxHMIS 2018 Annual Report

Figure 24: Causes of Homelessness as Reported by Head of Household — 2018

LACK OF AFFORDABLE HOUSING IS THE LEADING CAUSE OF HOMELESSNESS


Data from the 2019 KnoxHMIS Annual Report were not available at the time this report was completed. An addendum will be provided as data are made available.

Ibid.

Positive housing is defined as owning, renting, living in permanent housing, or staying with friends or family with permanent tenure, whereas negative exit destinations include jail/prison/juvenile detention, emergency shelter place not meant for human habitation.
There are factors in the home and larger environment that may disproportionately affect those experiencing poverty. Those living in distressed areas usually live in older homes. These homes often lack adequate insulation, have older, less energy-efficient appliances, are more likely to have outdated heating and cooling systems.\textsuperscript{69} There are many Americans living in poverty because of health problems. These health problems can be made worse by cold spells and heat waves. Living in housing that has poor insulation and/or inadequate heating and cooling does little to protect those who are most affected by extreme heat or cold weather.\textsuperscript{70} These findings were echoed in a 2017 study published in the Journal of Community Practice. In that study, perceptions of the urban environmental conditions in four diverse neighborhoods in Knoxville were investigated.\textsuperscript{71} This study found that those living in lower income areas expressed more concerns about weather extremes than those living in more affluent areas. Additionally, those low-income study participants who did not live in public housing were less likely to live in weatherized homes because they could not afford the cost or weatherization and were not aware that they may qualify for city-sponsored weatherization programs.\textsuperscript{72}

In addition to living in energy inefficient housing, many live in homes with lead paint. For example, according to a 2015 report, 50.7\% of all homes in Knox County (98,989) were built before 1980, making them more likely to have lead paint.\textsuperscript{73} Since those with lower incomes are more likely to live in older homes and are more likely to be unable to afford renovations to remove or contain lead-based paints in the home, they are more likely to be exposed to lead. This is especially true for children living in these homes, as they are more likely to ingest chips of lead-based paint. This can lead to developmental delays, physical illness, and behavioral problems in exposed children. One program can assist qualifying families within the city limits of Knoxville with lead abatement—The Lead Safe & Healthy Homes program provided by Knoxville-Knox County CAC Housing and Energy Services.\textsuperscript{74}

Radon exposure can also be a problem in homes in Knox County. According to the Tennessee Department of Health, “Radon is a naturally occurring radioactive gas produced by the breakdown of uranium in rocks and soils. Radon gas is tasteless, colorless, and odorless. The only way to know if it is in your home is to test for it.”\textsuperscript{75} Determining whether or not radon is present in a home is important because radon gas is the second leading cause of lung cancer, second only to cigarette smoking, and is responsible for about 20,000 lung cancer deaths in the United States annually.\textsuperscript{76} The Environmental Protection Agency predicts that Knox County has average indoor radon screening levels greater than 4 pCi/L, which is the level at which the EPA recommends taking actions to lower levels in the home.\textsuperscript{77} While radon testing kits are available for free from the Tennessee Department of Environment and Conservation, mitigating radon in the home is not. To mitigate radon levels in the home, homeowners

\begin{itemize}
  \item Ibid.
  \item Ibid.
  \item Knoxville-Knox County CAC (n.d.). \textit{Knoxville Lead-safe and Healthy Homes Program}. http://knoxvilletn.gov/government/city_departments_offices/community_development/knoxville_lead-safe_and_healthy_homes_program
  \item Ibid.
  \item Environmental Protection Agency. (n.d.) \textit{Radon Zones (with State Information)}. https://www.epa.gov/radon/find-information-about-local-radon-zones-and-state-contact-information
\end{itemize}
must either hire a contractor or utilize do-it-yourself radon reduction materials and techniques. In either case, low-income homeowners may not be able to afford to hire a contractor or buy materials.

No waterborne disease outbreaks have been reported that are connected to any utility providers in Knox County in the past decade. However, since 2004, “500 miles of water ways have been added to the region’s list of impaired waterbodies in East Tennessee,” making them unsafe for fishing and swimming.\textsuperscript{78}

As shown in Figure 25, air quality in Knoxville is improving. In 2018, 69\% of days were considered “good” air quality days as measured by the Air Quality Index,\textsuperscript{79} which “…summarizes levels of ground-level ozone, particulate matter (soot and other particles), carbon monoxide, sulfur dioxide, and nitrogen dioxide into one measure.” ET Index describes the importance of good air quality:

\begin{quote} 
While air quality is important for everyone who lives in a community, it is especially important for sensitive groups including children, the elderly, and those with breathing problems such as asthma. Those with lower incomes who are affected by poor air quality may not be able to receive the treatment they need to combat the symptoms of exposure to poor quality air such as eye, nose, and throat irritation; coughing; and difficulty breathing.\textsuperscript{80}
\end{quote}

Poor air quality disproportionately affects lower income neighborhoods. A 2017 study of four neighborhoods in Knoxville found that roughly half of residents included in the sample from low-income neighborhoods mentioned air quality concerns. However, none of those who participated in the study in wealthier neighborhoods noted concerns about air quality.\textsuperscript{81} More specifically, those from lower income neighborhoods reported that nearby factories and businesses were the source of the air pollution. However, in one neighborhood, while some residents noted the pollution caused by the businesses, they were not against having these industries in their neighborhood because those companies invested in the neighborhood by hiring residents and donating to local schools.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{Knoxville_Air_Quality_Has_Improved.png}
\caption{Percent of Good Air Quality Days in Knox County — 2011–2018}
\end{figure}


FOOD ACCESS AND INSECURITY

In East Tennessee, it is estimated that 1 in 5 children and 1 in 8 adults are at risk of hunger. Further, within their 18 county, 8,000 square mile service area, Second Harvest of East Tennessee estimates that 160,000 people are going hungry.82 The United States Department of Agriculture considers a household to be food-secure if the household has “enough food for an active, healthy life for all household members.”83 Any household that does not meet that criteria is considered “food-insecure.” Nationwide, in 2018, there were 37,227,000 individuals living in food-insecure households.84 In 2018 in Knox County there were 53,150 food-insecure individuals and 12,680 of those individuals were children.85 In other words, the food-insecurity rate among individuals in Knox County is 11.7% and 13.1% among children. While most are eligible for nutrition programs such as SNAP or WIC, 34% of food insecure individuals and 22% of food insecure children do not qualify for any type of nutrition program.86 In Knox County, 4,150 households do not have vehicles and are more than ½ mile from the nearest supermarket, making adequate food access difficult. 50,109 people live in low-income census tracts that are more than a mile from the nearest supermarket.87

The Knox County Health Department’s 2014-2015 Community Health Assessment examined the issues of food-insecurity and access in Knox County. Findings from the report include:88

- 39% of students in Knox County schools qualify for free or reduced cost breakfast and lunch.
- In 2013, 11.5% of households in Knox County received Supplemental Nutrition Assistance Program (SNAP) benefits.
- 11.3% of those living in Knox County are low-income and do not live close to a grocery store.
- Black/African American adults were more likely than White adults to report always or usually feeling stressed about preparing nutritional meals (18.2% vs. 13.1%).
- 38.9% of those with incomes less than $15,000 per year reported being stressed about preparing nutritious meals, compared with 4.2% of those with incomes greater than $50,000 per year.
- Among adults who are unable to work, 37.2% reported always or usually feeling stressed about preparing nutritious meals.
- 29.0% of farmers markets in Knox County accept SNAP benefits, compared with 21.0% nationwide and 11.8% in Tennessee.

Food insecurity and hunger are growing concerns among staff and students at the University of Tennessee, Knoxville. A system-wide study found that 32% of UT Knoxville students are food insecure, meaning they lack access to adequate and nutritious food. The University of Tennessee, Knoxville began to address these issues through programs that support campus food pantries, starting a meal swipe donation program, starting a campus community garden, and creating smartphone app to alert students when there is extra food available for free from events. However, these initiatives are stop-gap measures for emergency food assistance. To address long-term issues, the University of Tennessee, Knoxville has launched a new initiative known as End Hunger/Feed Change (EHFC). This working group aims to “develop sustainable initiatives to lessen the effects of food insecurity our entire campus community – including staff and students online and on campus – through long-term initiatives and university policy.”89

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84 Ibid.
86 Ibid.
Poverty and low incomes affect health and access to health care. The Knox County Health Department utilized findings from the 2014 Behavior Risk Factors Survey (BRFS) in their 2014–2015 Knox County Health Assessment to better understand physical, oral, and mental health disparities in the Knox County population. As shown in Figure 26 and 27 below, those with lower incomes and less education have worse health outcomes.

**Figure 26: Health Outcomes by Income in Knox County — 2014**

- **Diagnosed with diabetes**
  - Income less than $15,000: 20.3%
  - Incomes higher than $50,000: 3.7%

- **Had heart attack**
  - Income less than $15,000: 8.4%
  - Incomes higher than $50,000: 2.9%

- **Stressed about preparing nutritious meals**
  - Income less than $15,000: 38.9%
  - Incomes higher than $50,000: 4.2%

**Source:** Knox County Health Department 2014-2015 Community Health Assessment

**Figure 27: Health Outcomes by Level of Education in Knox County — 2014**

- **Diagnosed with diabetes**
  - Less than high school diploma: 18.7%
  - Graduated from college: 7.3%

- **Diagnosed with angina or coronary artery disease**
  - Less than high school diploma: 11.0%
  - Graduated from college: 5.2%

- **Healthy body weight**
  - Less than high school diploma: 31.3%
  - Graduated from college: 42.0%

**Source:** Knox County Health Department 2014-2015 Community Health Assessment

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90 Data from the 2019-2020 Community Health Assessment conducted by the Knox County Health Department were not available at the time this report was completed. An addendum will be provided as data are made available.

91 Ibid.
The BRFS also found that:

- 34.0% of adults with a household income lower than $15,000 reported seeing a dentist in the past year, compared with 84.6% of those with a household income greater than $50,000.
- 58.8% of adults over 65 with less than a high school education reported having all teeth extracted compared to 6.7% of those over 65 with a college degree.
- Individuals with a household income of less than $15,000 reported more days of poor mental health in the past 30 days compared to individuals with a household income of $50,000 or more (10.3 days vs 2.7 days).
- 17.2% of individuals who did not complete high school reported that they were dissatisfied or very dissatisfied with their lives, compared to 3.7% of those who graduated from college.

As shown in Figures 28 and 29, there is significant overlap between census tracts with the highest levels of poverty and those tracts that have the worst outcomes for physical and mental health. This is especially true in the following census tracts:

- 8—Old Sevier
- 9.02—University of Tennessee, Knoxville
- 14—Western Heights
- 20—Burlington
- 26—Marble City
- 27—West View
- 28—Lonsdale
- 29—Arlington, Sharp’s Ridge
- 68—Morningside
- 69—Fort Sanders
- 70—Mechanicsville

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92 The BRFS survey instrument defined poor mental health days as those that included stress, depression, and problems with emotions.
The Robert Wood Johnson Foundation’s County Health Rankings provides insights on a number of health topics in states and counties in the United States. Table 10 below shows selected county health measures in Tennessee and Knox County in 2020. In most cases, Knox County’s health indicators are more positive or equivalent to health measures statewide. There are two exceptions to this. In Knox County, the rates of injury deaths and excessive alcohol consumption are higher than in Tennessee as a whole.

### Table 10: Selected 2020 County Health Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Knox County</th>
<th>TN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premature death (# of deaths under 75 per 100,000)</td>
<td>9,100</td>
<td>9,300</td>
</tr>
<tr>
<td>Adult obesity (BMI over 30)</td>
<td>31%</td>
<td>33%</td>
</tr>
<tr>
<td>Primary care physicians (rate per 100,000 of patients to every PCP) (the lower the better)</td>
<td>890:1</td>
<td>1,400:1</td>
</tr>
<tr>
<td>Dentists (rate per 100,000 of patients to every dentist) (the lower the better)</td>
<td>1,608:1</td>
<td>1,860:1</td>
</tr>
<tr>
<td>Mental health providers (rate per 100,000 of patients to every mental health provider) (the lower the better)</td>
<td>270:1</td>
<td>660:1</td>
</tr>
<tr>
<td>Preventable hospital stays (discharges for ambulatory-care sensitive conditions per 1,000)</td>
<td>4,393</td>
<td>5,320</td>
</tr>
<tr>
<td>Violent crime (rate per 100,000)</td>
<td>506</td>
<td>621</td>
</tr>
<tr>
<td>Excessive drinking (% self-report)</td>
<td>17%</td>
<td>14%</td>
</tr>
<tr>
<td>Alcohol-impaired driving deaths (% of driving deaths with alcohol involvement)</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>Injury deaths (per 100,000)</td>
<td>100</td>
<td>89</td>
</tr>
<tr>
<td>Social associations (rate per 10,000)</td>
<td>12.3</td>
<td>11.3</td>
</tr>
</tbody>
</table>

Source: County Health Rankings and Roadmaps

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94 Ibid.
Drug overdoses are another health problem significantly impacting Knox County. It has been observed that high rates of opioid prescriptions, opioid-related hospitalizations, and overdose deaths are highly correlated with poverty and unemployment.\(^\text{95}\) As shown in Figures 30 and 31, although the number of patients receiving opioids for pain in Knox County has decreased, drug overdose deaths have steadily increased from 2014 to 2018. There were a total of 263 fatal drug overdoses in Knox County in 2018. Of those, 218 were the result of an opioid overdose, 67 were heroin overdoses, 37 were benzodiazepine overdoses, and 34 resulted from a combination of opioids and benzodiazepines.\(^\text{96}\) Other drugs, such as methamphetamines, cocaine and alcohol are also responsible for drug overdose deaths. According to the Knox County Regional Forensic Center, in 2018 the five most identified drugs in drug-related deaths were synthetic opioids, methamphetamine, heroin, cocaine, and alcohol.\(^\text{97}\) According to the Knox County Regional Forensic Center, in 2019, 293 people died from drug overdose in Knox County and 28 died from overdose in Anderson County. The five most common drugs identified in drug-related deaths in 2019 were synthetic opioids, methamphetamine, alcohol/ethanol, heroin and cocaine. Additionally, the Knox County Regional Forensic Center reported, “Preliminary data for drug deaths in 2020 does unfortunately indicate an upward trend for drug-related death cases in Knox County.”\(^\text{98}\)

In 2017, 13.2% of high school students in Tennessee report having taken prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it.\(^\text{99}\) Additionally, 12% of patients with an opioid prescription had at least one overlapping benzodiazepine prescription. This combination was present in 27% of all opioid overdose deaths in Tennessee in 2018.

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\(^{98}\) Ibid.

As shown in Figure 32, those with less income were more likely to report being unable to see a doctor due to cost. Overall, 15.8% of Knox County adults surveyed reported that they could not see a doctor in the past 12 months because of cost. According to the Knox County Health Department’s 2014–2015 Community Health Assessment, “This number is more than three times higher than the Healthy People 2020 target of 4.2%.” Additionally, employment status was a factor, as 43.0% of unemployed adults reported that they were unable to see a doctor due to cost compared to 15.9% of employed adults. This finding is understandable, especially considering that 54% of those adults who are unemployed do not have health insurance, compared to 15.5% of employed adults.\footnote{Ibid.} As shown in Figure 33, those with lower household incomes and those living below the poverty level are less likely to have health insurance coverage.
Similar to the overlap between poverty and health outcomes, there is an overlap between poverty and lack of health insurance in some census tracts (See Figure 34). This is demonstrated in the map below. The tracts where this overlap is most noticeable are:

14—Western Heights
20—Burlington
26—Marble City
27—West View
28—Lonsdale
29—Arlington, Sharp’s Ridge
68—Morningside
69—Fort Sanders
70—Mechanicsville

Figure 34: Lack of Health Insurance in Extremely High Poverty Census Tracts — 2018

Regarding resources that can increase access to healthcare in Knox County, positive findings were reported in the 2014-2015 Community Health Assessment:

- Number of hospitals and physicians per capita
- TennCare system
- Knox County Indigent Care Program
- City of Knoxville Office on Homelessness
- Cherokee Health Systems Integrated Care
- Interfaith Health Clinic
- The Free Medical Clinic
- Knox Area Project Access
Lack of Transportation

While it is true that only a small minority of individuals in Knox County (6.2%) and Knoxville (11.1%) do not own a vehicle, many of those who do not own a vehicle are low-income individuals (See Figure 35). In Knoxville and Knox County traveling from home to work is difficult without a vehicle, as Knoxville Area Transit (KAT) service is not accessible for those who do not live near stops or work evening shifts and on weekends. According to the ET Index, living in the region without a car is difficult. As they explained in their 2015 report:

Getting around the region without a car is challenging due to long distances between trip origins and destinations and low-density development that does not support extensive transit service. Some parts of the region, however, do have sidewalks and bicycle lanes, and the number of greenways in the region is growing.  

As shown in Figure 36, the 2017 National Household Travel Survey found that those in Tennessee with lower incomes tend to own older vehicles. This is understandable as lower income families may not be able to afford to buy a vehicle as frequently, and when they do, they tend to purchase previously owned vehicles because they are less expensive than new ones. However, this can be a problem as far as transportation reliability is concerned, as older vehicles are more likely to break down and need repairs. Without reliable transportation, these families may find it difficult to commute to and from work and to complete necessary daily activities (e.g., grocery shopping, medical appointments, transporting children to and from school).

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According to a 2015 study, the average Knox County household spends 59% of its income on housing and transportation combined, which is considerably higher than the national average of 40%. To better understand travel behavior in East Tennessee, the Knoxville Regional Transportation Planning Organization conducted the East Tennessee Household Travel Survey in 2008. The survey collected data from a random sample of 1,400 households in Knox, Blount, Anderson, Jefferson, Loudon, Roane, Sevier, and Union counties. Regarding the average number of trips made in a 24-hour period using a personal vehicle, the survey found that, overall, the number of trips increased as household income increased. For example, those with household incomes between $25,000 and $35,000 made, on average, just over seven trips in a 24-hour period compared to those with household incomes between $75,000 and $100,000, who made an average of just under 11 trips in a 24-hour period. One reason for these findings could be the fact that households with more income may have more workers needing to commute to and from work. However, it is also possible that due to the cost of operating a vehicle and the cost of fuel, households with lower incomes may limit their trips to save money.

Those without vehicles have public transportation options. Knoxville Area Transit (KAT) is the most extensive transportation option offering fare-operated buses in Knoxville and some Knox County locations as well as a free trolley service for areas around downtown Knoxville and the area around the University of Tennessee, Knoxville. KAT makes over 3 million passenger trips each year. However, KAT service is limited, as night and weekend routes are less extensive and routes into Knox County are limited. While some can use KAT services to commute to and from work, those who do not live or work near a bus line or work evening or night shifts are not able to take advantage of the transit system. Knox County CAC Transit provides accessible, demand-response public transportation services to the residents of Knox County who live within Knox County outside the KAT service area and to those city residents who are not served by the KAT fixed route system, including those who live too far from a bus stop or whose destination is not within the KAT service area.

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106 Ibid.

Lack of Child Care

For many families, affording child care can be a challenge, as monthly child-care costs can exceed mortgage or rent. According to Child Care Aware of America, in 2019, the annual price of childcare for an infant was $9,017, which only slightly less than a year’s tuition at a public four-year university.108 Child care at a child care center for an infant and four year old in Tennessee costs $16,503 annually. The report further explains that in Tennessee, single parents pay 40 % of their income for center-based infant child care for one child. Married parents of two children living at the poverty line pay 65.7% of their household income for center-based child care. While family child care homes are less expensive, a single parent can expect to spend 28.4% on care for an infant and a married family with two children in care living at the poverty line will spend 48.2% of their income on child care in that setting.109

Tennesseans for Quality Early Education surveyed Tennessee parents of children under age 5. The survey found that in Knoxville, a lack of adequate child care affected not only parents and their families, but also businesses, tax payers, and the larger economy.110 The study found that because of inadequate childcare, Knoxville loses $122 million in earnings and revenue annually.111 Further, 94% of parents surveyed in Knoxville said that inadequate child care negatively impacted their productivity and/or their career opportunities. The 2019 report found that among parents surveyed in Knoxville, many have trouble accessing and affording quality child care. More specifically, the survey found that in Knoxville:

- 73% reported problems accessing suitable child care (e.g. has open slots, provides care outside for M–F daytime hours, can accommodate changing shifts, convenient location)
- 71% reported difficulty affording child care
- 61% had difficulty finding quality child care

Further, among those surveyed in Knoxville:

- 49% have turned down a new job offer or promotion due to child care problems
- 37% have turned down further education or training because of a lack of adequate child care
- 25% have quit a job because of problems with child care.

One program that helps to combat the lack of quality child care is Knoxville-Knox County Head Start/Early Head Start program for low-income families administered by the Knoxville-Knox County CAC. During the 2019–2020 year, the program served 887 children, or approximately 38% of eligible preschool-aged children and 4.9% of eligible infants in Knox County received Head Start/Early Head Start services. In addition to quality child care, children and families who are enrolled in Head Start/Early Head Start also have access to support services including, “social services, mental health and disability services, and transportation. Head Start receives USDA reimbursement and nutritious meals are provided based on the hours the child attends the center.”112

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109 Ibid.
111 Ibid.
Section IV: Perceptual Needs, Strengths, and Gaps in Services

CAC Board Member, CAC Staff, CAC Program Manager, CAC Community Partner, and CAC Client Surveys

CAC board members, staff, program directors, community partners, and clients were provided an opportunity to share their perceptions about the needs of the low-income community in Knox County. Each group was asked to complete a survey that contained both close-ended and open-ended questions. Questions were included to allow respondents to rank the importance of CSBG services and to identify specific barriers that clients face. Highlighted findings from these surveys are displayed in Tables 11 through 16. Additionally, clients, staff, program managers, and community partners were asked to rank the top five household problems and the top five community problems for low-income residents.

The rankings of importance for ten CSBG services are found in Table 11. Because the rankings ranged from 1 to 10, with 1 being the most important, smaller averages signify a higher level of importance assigned by each group of respondents.
### Table 11: Ranking of Importance of Knoxville-Knox County CAC CSBG Services by CAC Board, CAC Staff, CAC Program Directors, and Community Partners — 2020

<table>
<thead>
<tr>
<th>Services Provided by CAC</th>
<th>CAC Board Members (n = 18)</th>
<th>CAC Staff (n = 197)</th>
<th>CAC Program Directors (n = 18)</th>
<th>Community Partners (n = 80)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helping people become more self-sufficient through education by increasing literacy, getting a GED, obtaining job training or postsecondary education.</td>
<td>3.72</td>
<td>5.01</td>
<td>5.00</td>
<td>4.65</td>
</tr>
<tr>
<td>Helping people become more self-sufficient by getting and keeping a job.</td>
<td>3.50</td>
<td>4.48</td>
<td>4.44</td>
<td>4.33</td>
</tr>
<tr>
<td>Helping low-income people meet their food needs by community gardening.</td>
<td>8.06</td>
<td>7.02</td>
<td>7.61</td>
<td>8.18</td>
</tr>
<tr>
<td>Helping low-income families achieve safe, affordable and energy efficient housing.</td>
<td>5.28</td>
<td>4.31</td>
<td>4.39</td>
<td>3.61</td>
</tr>
<tr>
<td>Helping low-income families move out of poverty by providing comprehensive case management services.</td>
<td>5.56</td>
<td>5.20</td>
<td>4.33</td>
<td>4.63</td>
</tr>
<tr>
<td>Helping people in crisis avoid utility shut-off, eviction, or other emergencies.</td>
<td>5.44</td>
<td>4.77</td>
<td>4.17</td>
<td>4.90</td>
</tr>
<tr>
<td>Helping the working poor people qualify for and get better paying jobs.</td>
<td>5.28</td>
<td>5.36</td>
<td>6.39</td>
<td>5.55</td>
</tr>
<tr>
<td>Providing financial education programs.</td>
<td>7.11</td>
<td>7.17</td>
<td>7.61</td>
<td>7.61</td>
</tr>
<tr>
<td>Helping people access needed services such as medical, mental health and other treatments, social services, grocery shopping, and other needed services through transportation.</td>
<td>4.78</td>
<td>5.54</td>
<td>5.06</td>
<td>4.64</td>
</tr>
<tr>
<td>Helping elderly people to live independently in their homes and prevent the high costs of institutionalization.</td>
<td>6.28</td>
<td>5.84</td>
<td>6.00</td>
<td>6.91</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Community Needs Assessment Surveys for CAC Board Members, Staff, Program Directors, and Community Partners (Appendices A–D).
There was variation between stakeholder groups regarding the importance of the 10 CSBG services. However, three services emerged in the “top five” for all groups: helping low-income families to find safe and affordable housing, helping people to become more self-sufficient through employment, and helping people to become more self-sufficient through increasing education or job training. Findings displayed in Table 12 suggest further differences between groups in the perceived importance of the CSBG services. Program directors, staff, and partners are more likely to perceive meeting immediate needs such as finding housing, avoiding utilities being shut off, and providing case management as most important. Board members, however, view longer-term strategies to self-sufficiency and providing transportation services as more important.

Table 12: The Three CAC Services Ranked As “Most Important” by CAC Board, Staff, Program Directors, and Community Partners in the CAC Community Needs Assessment Survey — 2020

<table>
<thead>
<tr>
<th>Ranking</th>
<th>Board</th>
<th>Staff</th>
<th>Program Directors</th>
<th>Community Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Helping people become more self-sufficient by getting and keeping a job</td>
<td>Helping low-income families achieve safe, affordable and energy efficient housing</td>
<td>Helping people in crisis avoid utility shut-off eviction or other emergencies</td>
<td>Helping low-income families achieve safe, affordable and energy efficient housing</td>
</tr>
<tr>
<td>2</td>
<td>Helping people become more self-sufficient through education by increasing literacy, getting a GED, obtaining job training or postsecondary education</td>
<td>Helping people become more self-sufficient by getting and keeping job</td>
<td>Helping low-income families move out of poverty by providing comprehensive case management services.</td>
<td>Helping people become more self-sufficient by getting and keeping a job</td>
</tr>
<tr>
<td>3</td>
<td>Helping people access needed services such as medical, mental health and other treatments, social services, grocery shopping, and other needed services through transportation</td>
<td>Helping people in crisis avoid utility shut-off, eviction, or other emergencies</td>
<td>Helping low-income families achieve safe, affordable and energy efficient housing.</td>
<td>Helping low-income families move out of poverty by providing comprehensive case management services.</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Community Needs Assessment Surveys for CAC Board Members, Staff, Program Directors, and Community Partners (Appendices A–D).
Table 13 presents responses from the four groups when asked to identify three problems or barriers that prevent people from achieving self-sufficiency in the areas of employment, health insurance, childcare, transportation, independent living, housing, and nutrition. For each question, survey respondents were provided a list of five to eight factors that may contribute to the problem. From this list, they were asked to select up to three that believed were the most significant barriers to attaining self-sufficiency. Cost emerged as a significant barrier for obtaining health insurance, childcare, transportation, independent living, and nutritious foods. Lack of transportation and lack of education and training were reported as significant barriers to securing employment.

<table>
<thead>
<tr>
<th>Problems/Barriers</th>
<th>% of CAC Board Members Selecting Each Response (n = 18)</th>
<th>% of CAC Staff Selecting Each Response (n = 245)</th>
<th>% of CAC Program Directors Selecting Each Response (n = 21)</th>
<th>% of Community Partners Selecting Each Response (n = 107)</th>
</tr>
</thead>
<tbody>
<tr>
<td>What problems keep people in our community from getting work?</td>
<td>84.2% Lack of training/education or skills 68.4% No transportation 57.9% Childcare 36.8% Mental disability 10.5% Physical disability</td>
<td>77.1% Lack of training/education or skills 71.4% No transportation 65.7% Childcare 22.9% Mental disability 11.8% Physical disability</td>
<td>81.0% No transportation 66.7% Lack of training/education or skills 61.9% Childcare 23.8% Mental disability 4.8% Physical disability</td>
<td>61.7% No transportation 60.7% Lack of training/education or skills 53.3% Childcare 38.3% Mental disability 16.8% Physical disability</td>
</tr>
<tr>
<td>What problems make it hard for people in our community to get health insurance?</td>
<td>94.7% Cost 84.2% Not offered by employer 68.4% Lack of knowledge of public or private insurance 26.3% No private insurance available 5.3% Poor credit</td>
<td>87.3% Cost 69.0% Lack of knowledge of public or private insurance 65.3% Not offered by employer 16.3% No private insurance available 11.0% Poor credit</td>
<td>85.7% Cost 85.7% Lack of knowledge of public or private insurance 61.9% Not offered by employer 9.5% Poor credit 4.8% No private insurance</td>
<td>84.1% Cost 63.6% Lack of knowledge of public or private insurance 56.1% Not offered by employer 16.8% No private insurance available 8.4% Poor credit</td>
</tr>
<tr>
<td>What problems make it hard for people in our community to have or keep childcare?</td>
<td>89.5% Cost 63.2% No transportation 57.9% Hours not sufficient 26.3% Location of care providers 21.1% Children have special needs 21.1% Not enough providers 5.3% Quality of providers</td>
<td>78.0% Cost 47.3% Hours not sufficient 46.5% No transportation 28.2% Quality of providers 21.2% Children have special needs 20.4% Location of care providers 17.1% Not enough providers</td>
<td>90.5% Cost 42.9% No transportation 42.9% Hours not sufficient 23.8% Location of care providers 19.0% Not enough providers 9.5% Children have special needs 5.3% Quality of providers</td>
<td>77.6% Cost 44.9% Hours not sufficient 33.6% No transportation 22.4% Quality of providers 20.6% Not enough providers 19.6% Location of care providers 15.9% Children have special needs</td>
</tr>
<tr>
<td>What problems do people in our community have with transportation?</td>
<td>73.7% Can’t afford a car 52.6% Can’t afford car insurance 42.1% No car 42.1% Can’t afford car repairs 26.3% No bus routes near home 21.1% No bus routes near work 15.8% No public transportation 10.5% Price of gas</td>
<td>73.1% Can’t afford a car 51.8% Can’t afford car repairs 49.4% Can’t afford car insurance 44.5% No car 23.7% No bus routes near home 13.5% No bus routes near work 8.2% Price of gas 5.7% No public transportation</td>
<td>71.4% Can’t afford a car 52.4% Can’t afford car repairs 47.6% No bus routes near work 42.9% Can’t afford car insurance 28.6% No bus routes near home 19.0% No car 4.8% Price of gas 4.8% No public transportation</td>
<td>55.1% Can’t afford a car 41.1% No bus routes near work 33.6% Can’t afford car repairs 32.7% Can’t afford car insurance 30.8% No car 29.9% No bus routes near work 24.3% No public transportation 2.8% Price of gas</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Community Needs Assessment Surveys for CAC Board Members, Staff, Program Directors, and Community Partners (Appendices A–D).
Table 13 (cont.)

<table>
<thead>
<tr>
<th>Problems/Barriers</th>
<th>% of CAC Board Members Selecting Each Response ((n = 18))</th>
<th>% of CAC Staff Selecting Each Response ((n = 245))</th>
<th>% of CAC Program Directors Selecting Each Response ((n = 21))</th>
<th>% of Community Partners Selecting Each Response ((n = 107))</th>
</tr>
</thead>
<tbody>
<tr>
<td>What problems do older adults or persons with disabilities in our community have that keeps them from living independently in their homes?</td>
<td>73.7% Can’t afford to maintain home 57.9% Unable to complete daily living tasks 42.1% Can’t afford long term care insurance 36.8% Unable to prepare meals 26.3% Can’t afford to retrofit home 21.1% Unable to complete housekeeping tasks 15.8% No public transportation 10.5% Unable to shop for food</td>
<td>58.4% Can’t afford to maintain home 51.8% Unable to complete daily living tasks 37.1% Unable to complete housekeeping tasks 36.3% Can’t afford long term care insurance 27.8% Unable to prepare meals 22.4% Unable to shop for food 16.7% Can’t afford to retrofit home 7.8% No public transportation</td>
<td>57.1% Unable to complete daily living tasks 47.6% Can’t afford to maintain home 33.3% Unable to prepare meals 33.3% Unable to complete housekeeping tasks 23.8% Can’t afford to retrofit home 23.8% Unable to shop for food 19.0% Can’t afford long term care insurance 4.8% No public transportation</td>
<td>55.1% Unable to complete daily living tasks 52.3% Can’t afford to maintain home 29.9% Unable to complete housekeeping tasks 23.4% Unable to prepare meals 22.4% Can’t afford long term care insurance 19.6% Can’t afford to retrofit home 16.8% Unable to shop for food 14.0% No public transportation</td>
</tr>
<tr>
<td>What problems do people in our community have with housing?</td>
<td>84.2% Can’t find affordable housing 73.7% Rent too high 52.6% House needs major repairs 47.4% Utilities too high 26.3% House payment too high</td>
<td>67.8% Rent too high 65.7% Can’t find affordable housing 59.2% Utilities too high 37.1% House needs major repairs 24.1% House payment too high</td>
<td>85.7% Can’t find affordable housing 57.1% Rent too high 57.1% Utilities too high 47.6% House needs major repairs 23.8% House payment too high</td>
<td>71.0% Can’t find affordable housing 69.2% Rent too high 57.0% Utilities too high 33.6% House needs major repairs 11.2% House payment too high</td>
</tr>
<tr>
<td>What problems do people in our community have with finding and preparing nutritious food?</td>
<td>84.2% Location of grocery stores 78.9% Cost of good quality food 57.9% Lack of nutrition education 31.6% Unable to prepare food 21.1% Unable to shop for food 10.5% Lack of community gardens</td>
<td>78.0% Cost of good quality food 53.1% Lack of nutrition education 31.0% Unable to prepare food 26.5% Location of grocery stores 24.9% Unable to shop for food 19.2% Lack of community gardens</td>
<td>85.7% Cost of good quality food 57.1% Lack of nutrition education 38.1% Location of grocery stores 33.3% Unable to prepare food 23.8% Unable to shop for food 9.5% Lack of community gardens</td>
<td>72.9% Cost of good quality food 46.7% Location of grocery stores 45.8% Lack of nutrition education 33.6% Unable to shop for food 26.2% Unable to prepare food 13.1% Lack of community gardens</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Community Needs Assessment Surveys for CAC Board Members, Staff, Program Directors, and Community Partners (Appendices A–D).
Table 14 displays the five problems facing households (selected from a list of 14) most frequently selected by survey respondents. Lack of transportation and financial resources were consistently identified as the most serious problems currently being experienced by households. Specifically, inability to pay for rent or mortgage, food, and utility bills were reported as serious problems by all groups. However, CAC clients most frequently reported a health problem as being the most serious problem they are facing.

Table 14: Ranking of Top Five Client Household Problems by CAC Clients, CAC Staff, CAC Program Directors, and Community Partners — 2020

<table>
<thead>
<tr>
<th>Rank</th>
<th>CAC Clients (n = 190)</th>
<th>CAC Staff (n = 245)</th>
<th>CAC Program Directors (n = 21)</th>
<th>Community Partners (n = 107)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Needs/Problems (*Indicates a tie)</td>
<td># and % Identifying Problem</td>
<td>Needs/Problems (*Indicates a tie)</td>
<td># and % Identifying Problem</td>
</tr>
<tr>
<td>1</td>
<td>Health problem</td>
<td>55 28.9%</td>
<td>Transportation</td>
<td>169 69.0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Transportation</td>
<td>16 76.2%</td>
</tr>
<tr>
<td>2</td>
<td>Money for rent or house payment*</td>
<td>53 27.9%</td>
<td>Can’t pay utility bill</td>
<td>169 69.0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Can’t pay utility bill</td>
<td>15 71.4%</td>
</tr>
<tr>
<td>3</td>
<td>Transportation*</td>
<td>53 27.9%</td>
<td>Money for rent or house payment</td>
<td>166 67.8%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Money for rent or house payment</td>
<td>14 66.7%</td>
</tr>
<tr>
<td>4</td>
<td>Can’t pay utility bill</td>
<td>50 26.3%</td>
<td>Money for food</td>
<td>134 54.7%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Money for food</td>
<td>12 57.1%</td>
</tr>
<tr>
<td>5</td>
<td>Money for food</td>
<td>48 25.3%</td>
<td>Day care for children</td>
<td>128 52.2%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Finding a job</td>
<td>11 52.4%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Money for food</td>
<td>61 57.0%</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Community Needs Assessment Surveys for CAC Clients, Staff, CAC Program Directors, and Community Partners (Appendices B–E).
Table 15 presents the five most serious community or neighborhood problems chosen by respondents. There was great consistency across all groups in identifying the most serious problems. Lack of affordable housing, transportation, money for rent or mortgage, money for food were selected as one of five most serious problems by all groups. Crime emerged as the number one problem for CAC staff but did not make the top five list for clients or community partners. Alternatively, community partners were the only group to identify mental illness and inadequate health care as one of the most serious problems.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Needs/Problems (*Indicates a tie)</th>
<th>CAC Clients (n = 190) # and % Identifying Problem</th>
<th>CAC Staff (n = 245) # and % Identifying Problem</th>
<th>CAC Program Directors (n = 21) # and % Identifying Problem</th>
<th>Community Partners (n = 107) # and % Identifying Problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Homelessness</td>
<td>96 53.6%</td>
<td>Crime 156 63.7%</td>
<td>Lack of affordable housing 16 76.2%</td>
<td>Lack of affordable housing 69 64.5%</td>
</tr>
<tr>
<td>2</td>
<td>Lack of affordable housing</td>
<td>89 48.9%</td>
<td>Drug abuse 134 54.7%</td>
<td>Inadequate transportation 13 61.9%</td>
<td>Mental illness 55 51.4%</td>
</tr>
<tr>
<td>3</td>
<td>Unemployment*</td>
<td>88 48.9%</td>
<td>Lack of affordable housing 115 46.9%</td>
<td>Hunger 8 38.1%</td>
<td>Drug abuse 49 45.8%</td>
</tr>
<tr>
<td>4</td>
<td>Drug abuse*</td>
<td>88 48.6%</td>
<td>Lack of good paying jobs 98 40.0%</td>
<td>Inadequate health care 8 38.1%</td>
<td>Homelessness 47 43.9%</td>
</tr>
<tr>
<td>5</td>
<td>Lack of good paying jobs</td>
<td>82 46.1%</td>
<td>Unemployment 96 39.2%</td>
<td>Crime 7 33.3%</td>
<td>Inadequate health care 44 41.1%</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Community Needs Assessment Surveys for CAC Clients, Staff, CAC Program Directors, and Community Partners (Appendices B–E).
Knoxville-Knox County CAC clients were surveyed to learn more about their satisfaction with the services received and the treatment received from staff members. Specifically, clients were asked to provide feedback on staff follow-through, timeliness, and overall service experience. Clients also were given the opportunity to give recommendations for service improvements.

Characteristics of the client respondents are displayed in Table 16. The majority of the respondents (73.6%) reside in the eastern or northern quadrant of the county and are female (77.5%). Less than one out of three respondents (31.8%) were employed full or part time. However, most of the respondents (84.0%) currently had health insurance.

### Table 16: Characteristics of Respondents to Client Satisfaction Survey — 2020

<table>
<thead>
<tr>
<th>Program participation (n = 201)</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Benefits</td>
<td>8</td>
<td>4.0%</td>
</tr>
<tr>
<td>COVID-19 Assistance</td>
<td>8</td>
<td>4.0%</td>
</tr>
<tr>
<td>Grandparents as Parents</td>
<td>14</td>
<td>7.0%</td>
</tr>
<tr>
<td>Green Thumb</td>
<td>26</td>
<td>12.9%</td>
</tr>
<tr>
<td>CAC Transit</td>
<td>37</td>
<td>18.4%</td>
</tr>
<tr>
<td>Neighborhood Centers</td>
<td>24</td>
<td>11.9%</td>
</tr>
<tr>
<td>Project LIVE (Office on Aging)</td>
<td>20</td>
<td>10.0%</td>
</tr>
<tr>
<td>Resilient Families</td>
<td>17</td>
<td>8.5%</td>
</tr>
<tr>
<td>Social Services</td>
<td>24</td>
<td>11.9%</td>
</tr>
<tr>
<td>Steps to Success</td>
<td>8</td>
<td>4.0%</td>
</tr>
<tr>
<td>Volunteer Assisted Transportation</td>
<td>6</td>
<td>3.0%</td>
</tr>
<tr>
<td>Youth WINS</td>
<td>9</td>
<td>4.5%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quadrant of city/county residence (n = 193)</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>75</td>
<td>38.9%</td>
</tr>
<tr>
<td>South</td>
<td>16</td>
<td>8.3%</td>
</tr>
<tr>
<td>East</td>
<td>67</td>
<td>34.7%</td>
</tr>
<tr>
<td>West</td>
<td>35</td>
<td>18.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender (n = 191)</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>148</td>
<td>77.5%</td>
</tr>
<tr>
<td>Male</td>
<td>43</td>
<td>22.5%</td>
</tr>
</tbody>
</table>

*Source: Knoxville-Knox County Community Action Committee Client Services and Satisfaction Survey contained in Appendix E.*
Table 16 (cont.)

<table>
<thead>
<tr>
<th>Employment status (n = 192)</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working part-time</td>
<td>23</td>
<td>12.0%</td>
</tr>
<tr>
<td>Working full-time</td>
<td>38</td>
<td>19.8%</td>
</tr>
<tr>
<td>Unemployed — looking for work</td>
<td>54</td>
<td>28.1%</td>
</tr>
<tr>
<td>Unemployed — not looking for work</td>
<td>29</td>
<td>15.1%</td>
</tr>
<tr>
<td>Retired</td>
<td>52</td>
<td>28.1%</td>
</tr>
<tr>
<td>Stay at home caregiver</td>
<td>11</td>
<td>5.7%</td>
</tr>
<tr>
<td>Disabled</td>
<td>12</td>
<td>5.8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health insurance status (n = 194)</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have health insurance</td>
<td>163</td>
<td>84.0%</td>
</tr>
<tr>
<td>I do not have health insurance</td>
<td>31</td>
<td>16.0%</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Client Services and Satisfaction Survey contained in Appendix E.

The list of services and number of client respondents who reported accessing the services are shown in Table 17. The most frequently reported services provided to clients were transportation, assistance with finding housing, and assistance with paying rent and services. Many clients indicated they had received more than one service from CAC.

Table 17: Report of Services Received by Respondents to CAC Client Satisfaction Survey — 2020

<table>
<thead>
<tr>
<th>Service</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transportation</td>
<td>58</td>
<td>28.7%</td>
</tr>
<tr>
<td>Finding housing</td>
<td>56</td>
<td>27.7%</td>
</tr>
<tr>
<td>Utilities</td>
<td>48</td>
<td>23.8%</td>
</tr>
<tr>
<td>Rent</td>
<td>46</td>
<td>22.8%</td>
</tr>
<tr>
<td>Completing paperwork for benefits (SNAP, SSI, unemployment)</td>
<td>34</td>
<td>16.8%</td>
</tr>
<tr>
<td>Food Pantry items, clothing and household items</td>
<td>34</td>
<td>16.8%</td>
</tr>
<tr>
<td>Free seeds and plants</td>
<td>28</td>
<td>13.9%</td>
</tr>
<tr>
<td>Finding a job</td>
<td>27</td>
<td>13.4%</td>
</tr>
<tr>
<td>A community garden plot</td>
<td>20</td>
<td>9.9%</td>
</tr>
<tr>
<td>Mobile Meals, Summer Grab &amp; Go, commodities, food supplements</td>
<td>18</td>
<td>8.9%</td>
</tr>
<tr>
<td>Tips on how to garden and healthy living</td>
<td>18</td>
<td>8.9%</td>
</tr>
<tr>
<td>Support for grandparents</td>
<td>17</td>
<td>8.4%</td>
</tr>
<tr>
<td>Increased education</td>
<td>13</td>
<td>6.4%</td>
</tr>
<tr>
<td>Getting birth certificate, SSN card, or State ID</td>
<td>12</td>
<td>5.9%</td>
</tr>
<tr>
<td>Empty Stocking Fund</td>
<td>12</td>
<td>5.9%</td>
</tr>
<tr>
<td>Home repairs</td>
<td>12</td>
<td>5.9%</td>
</tr>
<tr>
<td>Job Training</td>
<td>10</td>
<td>5.0%</td>
</tr>
<tr>
<td>Tutoring for my child or youth</td>
<td>9</td>
<td>4.5%</td>
</tr>
<tr>
<td>VITA Tax Assistance</td>
<td>8</td>
<td>4.0%</td>
</tr>
<tr>
<td>Doctor appointments and pharmacy</td>
<td>7</td>
<td>3.5%</td>
</tr>
<tr>
<td>Access to child care</td>
<td>7</td>
<td>3.5%</td>
</tr>
<tr>
<td>Mortgage</td>
<td>2</td>
<td>1.0%</td>
</tr>
</tbody>
</table>

†Percentage distribution of total number of services reported.
Source: Knoxville-Knox County Community Action Committee Client Services and Satisfaction Survey contained in Appendix E.
Clients were asked about their service experience on five dimensions of customer service and satisfaction. Results from these questions are shown in Table 18. Virtually all clients (more than 96%) answered “Yes” to questions about whether they were treated with respect, were helped in a timely manner, got the information/services they needed, and would recommend CAC to friends and/or family. A somewhat smaller portion (79%) indicated they were told about additional services offered by CAC or other community services.

### Table 18: Client Satisfaction with Staff Treatment, Timeliness, and Overall Service — 2020

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th></th>
<th>No</th>
<th></th>
<th>NA</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>I was helped in a timely manner.</td>
<td>190</td>
<td>97.4%</td>
<td>3</td>
<td>1.5%</td>
<td>1</td>
<td>2.0%</td>
</tr>
<tr>
<td>I was treated with respect.</td>
<td>197</td>
<td>99.5%</td>
<td>0</td>
<td>0.0%</td>
<td>1</td>
<td>0.1%</td>
</tr>
<tr>
<td>I got the information/services I needed.</td>
<td>187</td>
<td>96.4%</td>
<td>4</td>
<td>2.1%</td>
<td>3</td>
<td>1.5%</td>
</tr>
<tr>
<td>I was informed about other CAC or community services.</td>
<td>147</td>
<td>79.0%</td>
<td>19</td>
<td>10.2%</td>
<td>20</td>
<td>10.8%</td>
</tr>
<tr>
<td>I would recommend CAC to friends and/or family.</td>
<td>190</td>
<td>97.5%</td>
<td>3</td>
<td>1.5%</td>
<td>2</td>
<td>1.0%</td>
</tr>
</tbody>
</table>

Source: Knoxville-Knox County Community Action Committee Client Services and Satisfaction Survey contained in Appendix E.

Respondents were given the opportunity to use their own words to express how the services provided by CAC had impacted their lives. Most offered a response when asked, “What difference did receiving the CAC Neighborhood Center service(s) make for you/your family?” Their responses demonstrate the breadth of assistance and services offered. A sample of these responses are shared below:

- “Allowed me to have a garden. I canned veggies that I picked, it saved me money in my food budget.”
- “Allowed us to stay in our home.”
- “Great difference. Opened up a whole new world of opportunities and support!”
- “Gave us a home, helped get us a home!”
- “I am able to get to appointments now and I have SNAP.”
- “I had called a plumber who wanted $4000, but CAC was able to do it for free.”
- “I was able to get to work; therefore, allowing me to take care of my family.”
- “It saved my life! It is great! Everyone is always professional.”
- “The job information I received helped me get employed.”

However, substantially fewer clients provided a response when asked, “Do you have any recommendations to improve how we serve you?” Instead, they provided positive statements like, “Everything is great and better than anywhere else I know of.” The few recommendations offered focused on improving communication and increasing the amount of services available. A sample of these recommendations are shared below:

- “Maybe outreach to schools so more grandparents know about the program.”
- “Give more flyers in the community.”
- “Have a better online application.”
- “Bus passes.”
Section VI: Current Services

Client Characteristics

In most cases, a full range of client characteristics is collected during an intake interview to assist with determining eligibility for services and assessing client needs. The data elements vary by program and funding source. Table 19 includes selected agency statistics reported in 2019. Though the aggregate client characteristics may not include information about all agency clients, these statistics provide a picture of the client population. The available data indicate that agency clients are more likely to be Black/African American, to have less education, and to be disabled than the general population in Knox County and Knoxville.

Table 19: Selected Client Characteristics Reported for Fiscal Year 2019

<table>
<thead>
<tr>
<th>Race</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>0.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>0.4%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>30.5%</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>0.2%</td>
</tr>
<tr>
<td>White</td>
<td>41.6%</td>
</tr>
<tr>
<td>Other</td>
<td>0.9%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>6.3%</td>
</tr>
<tr>
<td>Not reported</td>
<td>19.8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latino</td>
<td>2.7%</td>
</tr>
<tr>
<td>Not Hispanic/Latino</td>
<td>56.7%</td>
</tr>
<tr>
<td>Not reported</td>
<td>40.6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 18 years</td>
<td>27.7%</td>
</tr>
<tr>
<td>18 to 64</td>
<td>47.8%</td>
</tr>
<tr>
<td>65 and over</td>
<td>23.0%</td>
</tr>
<tr>
<td>Not reported</td>
<td>1.5%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education (Ages 25 and up)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school graduate</td>
<td>25.0%</td>
</tr>
<tr>
<td>High school graduate</td>
<td>36.0%</td>
</tr>
<tr>
<td>12th grade and some secondary</td>
<td>12.5%</td>
</tr>
<tr>
<td>Not reported</td>
<td>26.5%</td>
</tr>
</tbody>
</table>

Source: FY 2019 Knoxville-Knox County Community Action Agency CSBG IS Survey
Service Locations and Available Services

Neighborhood Centers located in East, South, and West Knox County are focal points for service delivery to low-income individuals and families. The Centers are strategically located in the four quadrants of Knox County to provide residents equal access to services, information, and referral. Their specific locations are:

<table>
<thead>
<tr>
<th>Quadrant</th>
<th>Neighborhood Center Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>East</td>
<td>4610 Asheville Highway</td>
</tr>
<tr>
<td>South</td>
<td>522 Old Maryville Pike</td>
</tr>
<tr>
<td>West</td>
<td>2247 Western Avenue</td>
</tr>
</tbody>
</table>

The West Neighborhood Center is in the Ross Building, which also houses Central Office Administration and many programs operated by CAC, including:

- Knoxville-Knox County Office on Aging
- Ross-Central Head Start Center
- CAC Housing and Energy Services
- AmeriCorps
- Homeward Bound
- Knox County CAC Transit
- Office of Community Services
- Office of Community Services (LIHEAP)
- Food and Nutrition Programs
- Volunteer Income Tax Assistance (VITA)
- Community Leadership
- Community Action for Affordable Neighborhoods (CAAN)

In addition to CAC services, the Ross Building houses the Murphy Branch of the Knox County Library.

CAC services are provided at other locations as well those listed above, including six Head Start Centers, the John T. O’Connor Senior Center, the Daily Living Center, Beardsley Farm Urban Agriculture, and Barbara H. Monty Mobile Meals Community Kitchen. The CAC Program Directory contains a complete listing of services targeted to low-income people.

The delivery process for all CSBG services is similar. Applicants complete an application form that includes eligibility determination information, basic information about the individual and/or the family, and the types of services needed. Services are provided to any eligible individual or family who needs and desires to make use of the available service.

If a program or caseload is full, individuals may be placed on a waiting list, referred to another CAC component, or referred to another agency able to meet the need. Individuals and families may be referred by other agencies or programs to CAC or may apply directly. For some services, a plan of service must be developed. For others, such as the garden program, provision of the seeds and plants constitutes the completion of service. The plan of service includes problem identification and the steps or actions to be taken to resolve the problem. A client release of information statement is secured so that information can be shared with other CAC components and outside agencies. When services are completed, the case is closed. The differences in the ways each service is offered are described in each service’s admissions policies.
Linkages Developed to Fill Service Gaps

- CAC is responding to the emerging COVID-19 pandemic. CAC serves on a variety of task force committees including: Children and Youth, Nutrition, Homeless and Social Services. The CAC executive director is a representative to the Emergency Operation Center (EOC) for Knoxville and Knox County.

- An even stronger partnership has developed with the Knox County Health Department regarding families and individuals identified to need stabilization services during COVID-19. As a result, CAC added two case managers to Family Stabilization Services who are bilingual. One case manager is fluent in Spanish and the other is fluent in Swahili, Kirundi, and Kinyarwanda.

- During the COVID-19 pandemic, CAC services have adapted to include curbside/parking lot assistance, on-site intake packet pick-up and drop box, by appointment services, drive thru events, virtual education, wellness checks, and increased telephone support.

- New CAC COVID-19 initiatives include access to pandemic benefits (i.e. unemployment, stimulus, P-EBT, and CARES utility and rental assistance), mask distribution, and grab-and-go meals for youth, families, and seniors.

- CAC will continue to link with other providers of homeless services through participation and leadership in the Knoxville-Knox County Homeless Coalition (KKCHC) and the Mayor’s Roundtable on Homelessness. CAC is an active partner in the Continuum of Care Coordinated Entry System and leading partner in planning community educational awareness events in collaboration with the KKCHC—such as the annual Landlord Summit. Additionally, linkages with the City of Knoxville’s Department of Community Development and Knox County’s Department of Community Development provide the basis for working on issues related to homelessness, homeless prevention, and affordable housing.

- CAC receives funding from the Department of Housing and Urban Development Continuum of Care and Emergency Solutions Grant to support REACH, Families in Need, and Elizabeth Homes in order to provide street outreach, homeless prevention, and rapid-rehousing.

- CAC will continue a partnership with KCDC (public housing provider) and the City of Knoxville to provide case management to public housing residents at risk of eviction and homelessness.

- CAC continues to further the KCDC partnership through participating in the Choice Neighborhood planning process and plans to develop a new Head Start location in the Lonsdale/Western Heights Community.

- CAC has organized the Youth Homelessness Council which is comprised of more than 30 organizations to address unmet needs and policies that affect youth who are homeless in Knox County. CAC hosts the monthly Youth Advisory board where an average of nine youth who are currently or formerly homeless meet for support and to inform community decision-making.

- CAC continues its Elderly Linkage partnership with Samaritan Place to provide case management for seniors (60+ and up) to move seniors who are homeless from shelters into permanent housing.

- Linkages with utility companies, faith-based organizations, and Project HELP will continue with regard to improvements in the system for handling shut-offs and other utility-related issues.

- CAC partners with Knoxville Utilities Board (KUB) to raise funds and administer Project HELP, providing locally funded utility assistance.

- CAC partners with Knoxville Utility Board (KUB) to provide weatherization services to eligible KUB customers through the Round It Up program. KUB automatically rounds up the monthly utility bill to the nearest dollar. One hundred percent of the funds are sent to CAC to operate the program.
• CAC partners with the City of Knoxville, the Alliance to Save Energy, Knoxville Utilities Board, and the Socially Equal Energy Efficient Development to expand the “Savings in the House” program to include water efficiency and healthy & resilient home education. Partners are developing new curriculum and innovative workshops to educate Knoxville-Knox County residents. CAC provides direct install of water saving measures while performing other weatherization energy efficiency work to low income households.

• CAC partners with the City of Knoxville to provide a comprehensive Lead-Based Paint Hazard Reduction (LHR) grant program to identify and control lead-based paint hazards in eligible privately-owned rental or owner-occupied housing populations with in the city limits of Knoxville.

• CAC partners with Three3 to build relationships between the energy efficiency and health care sectors in Knoxville. This partnership will demonstrate energy efficiency interventions, in addition to lowering utility consumption, can also improve the health of occupants.

• CAC continues to participate with the Food Policy Council and support Emergency Food Helpers with regard to improvements in the food security system and the capacity to meet the need for emergency food.

• CAC Beardsley Farm has increased educational programming to include more field trips, cooking classes, how-to videos, Head Start lessons. In addition, the farm initiated “Farm Camp” (sponsoring low-income 4th and 5th graders for a week-long camp about growing food and nutrition) and “Grow, Teach, Knox” (a day of workshops for formal or informal educators to learn about tools and resources for outdoor education).

• CAC Beardsley Farm grew its “Refugee Garden” Program from 3-4 plots on-site to 15 plots on-site, in addition to forming a partnership with Bridge Refugees to expand gardens throughout Knoxville to about 30 plots. Additionally, community gardens we went from 10 raised beds to over 80 to increase access for persons with mobility concerns.

• CAC Beardsley Farm started the “Farm-to-Senior” program in collaboration with Mobile Meals to use farm produce in meals with the help of volunteers to process the produce.

• CAC Beardsley Farm has expanded its community-outreach. An average of 48,168 shelf stable meals were distributed annually to area pantries through the “Emergency Food Helpers” program. An average of 10,000 pounds of fresh produce annually to food insecure clients through pantries, non-profits, and Mobile Meals. Additionally, an average of 830 community members participated during onsite events celebrating nature, farming, and the community.

• CAC distributed an average of 8,000 seedlings each year and 9,500 seed packs to Knox County residents through the “Green Thumb” Program.

• CAC participates on both the Housing and Prevention & Education Implementation Teams for the All4Knox initiative which works to develop and implement a community-wide strategic plan to reduce substance misuse and its impact on individuals, families, and our community.

• Linkages will continue with our regional workforce council and the American Job Center to help meet the need for jobs that pay a living wage and offer benefits. CAC is coordinating with the ETHRA workforce board staff to make access to American Job Center services available through access points (e.g. self-serve kiosks) at area neighborhood centers, CSBG service sites.

• Linkages with employers and other transportation providers will continue to be a major focus of Knox County CAC Transit to connect people and jobs during regular and extended hours.

• CAC will bridge the gap for educational success through its “Steps to Success” program which links Pellissippi State Community College students who are demonstrating academic success, but are facing barriers to completing their degree. Case management and information and referral for basic services are provided.
• CAC provides services to children and families and the senior population through funding sources other than CSBG. Staff, working in these programs, has well-established linkages in the community to ensure client needs are met.

• CAC Resilient Families was newly established to help families achieve short- and long-term goals related to maintaining their housing and increasing their self-sufficiency. Programming includes family classes and incorporates a 2Gen approach.

• CAC holds a position of leadership within the social services network. This makes it easier to consult on individual cases and bring groups together to work on various issues and problems. Planning activities will continue to address specific service gaps and the need to bring agencies and organizations together to set priorities and take steps to close identified gaps whenever possible.

Description of How Funding Under the CSBG Act Will Be Coordinated with Other Public and Private Resources

CAC uses City of Knoxville and Knox County funds to supplement CSBG program support costs and to coordinate services made available through other public and private resources.

Programs for low-income individuals and families in the service area are reasonably well-coordinated. An example of coordination took place several years ago when Knox County decided to consolidate services and “do more with less.” The responsibilities of Knox County’s General Assistance Office were transferred to CAC, allowing utility and other emergency services to be integrated with other similar services. Increased agency capacity and expanded partnerships with the City of Knoxville and Knox County have resulted in a major expansion of affordable housing opportunities, both in new home construction and major home rehabilitation.
Section VII: 2019 Goals and Objective Outcome Measures

National Performance Indicator (NPI) forms, which detail the outcomes of their efforts in each fiscal year, are completed by each Community Action Agency. Using these data, state totals are compiled. Each state then forwards their totals to Washington, D.C., where national totals are compiled. All agencies use the same reporting document to ensure reporting of standardized outcomes. This section provides a summary of Knoxville-Knox County CAC’s outcomes for the fiscal year ending June 30, 2019.

Goal 1: Low-Income People become More Self-Sufficient

1.1 Employment
- 151 unemployed adults obtained employment.
- 28 unemployed youth obtained employment.
- 96 unemployed participants obtained and maintained a job for at least 90 days.
- 9 unemployed participants obtained employment with a living wage or higher.
- 79 employed participants obtained benefits and/or an increase in income.

1.2 Employment Supports
- 13 obtained a high school diploma and/or equivalency.
- 1 individual obtained a bachelor’s degree
- 1 obtained an associate degree.
- 69 obtained a credential, certificate or degree related to educational or vocational achievement.
- 169 participants maintained safe and affordable housing.

1.3 Employment Asset Enhancement and Utilization
- 3,356 were served through tax preparation programs.
- 3,092 were served through financial coaching/counseling programs.

Goal 2: The Conditions in which Low-Income People Live Are Improved

2.1 Community Improvement and Revitalization
- 900 safe and affordable housing units were built or set aside for people with low incomes.
- 2,231 safe and affordable housing units were maintained or improved.
- 385 energy efficiency improvements were made to homes in low-income communities.
- 3 Knoxville Area Transit Bus lines were expanded through South Knoxville toward downtown Knoxville.
- 160 were served in community gardening activities.
- 436 school supply items were provided.

When numbers “served” are discussed, the total number of services provided are counted, whereas all other indicators are unduplicated counts of individuals.
2.3 **Community Engagement**

- 289,144 volunteer hours were donated to the agency.

**Goal 3: Low-Income People Own a Stake in Their Community**

3.1 **Community Enhancement through Maximum Feasible Participation**

- 151,873 volunteer hours were donated to the community from low-income members of the community.

3.2 **Community Empowerment via Maximum Feasible Participation**

- 15 low-income people participated in formal community organizations, government, boards, or councils that provide input for decision-making and policy-setting through Community Action efforts.
- 3 low-income people acquired and maintained community leadership roles.
- 257 participants increased their skills, knowledge, and abilities to enable them to work with Community Action to improve conditions in the community.

**Goal 4: Partnerships among Supporters and Providers of Services to Low-Income People Are Achieved**

4.1 **The Number of Organizations, Both Public and Private, that Community Action Actively Works with to Expand Resources and Opportunities in Order to Achieve Family and Community Outcomes**

- 1,141 organizations created partnerships with CAC to expand resources and opportunities in order to achieve family and community outcomes:
  - 338 nonprofit organizations
  - 168 faith-based organizations
  - 6 local government organizations
  - 21 state government organizations
  - 22 federal government organizations
  - 397 for-profit businesses or corporations
  - 25 consortiums/collaborations
  - 9 school districts
  - 11 institutions of postsecondary education/training
  - 15 financial/banking institutions
  - 122 health service institutions
  - 7 statewide associations or collaborations

**Goal 5: Agencies Increase Their Capacity to Achieve Results**

5.1 **Agency Development**

- Staff attended 45,309 hours of training.
- Certifications includes:
  - 4 nationally certified ROMA implementers
  - 48 staff with a Child Development Associate (CDA) credential
  - 3 LEED risk certified assessors
  - 3 Building Performance Institute (BPI) certified professionals
  - 14 Classroom Assessment Scoring System (CLASS) certified professionals
  - 26 certified teachers
  - 2 certified ACEs trainers
Goal 6: Low-Income People, Especially Vulnerable Populations, Achieve Their Potential by Strengthening Family and Other Supportive Environments

6.1 Independent Living
- 6,069 senior citizens maintained an independent living situation.
- 8,169 individuals with disabilities maintained an independent living situation.
- 27 individuals with chronic illness maintained an independent living situation.

6.2 Emergency Assistance
- 6,698 utility payments (including emergency payments) were made.
- 654 rent or mortgage payments (including emergency payments) were made.
- 1,266 emergency hygiene kits/boxes were provided.
- 507 home repairs (including emergency home repairs) were made.
- 22 were served through temporary shelter (including emergency shelter) placement programs.
- 2 were served through legal assistance programs.
- 2,482 were served through emergency clothing assistance programs.

6.3 Child and Family Development:

Infant and Child
- 1,031 children demonstrated improved emergent literacy skills.
- 324 children who participated in preschool activities are developmentally ready to enter kindergarten or the first grade.

Youth
- 46 youth improved positive approaches toward learning
- 109 were served in summer youth recreational activities.
- 91 were served in summer education programs.
- 33 were served in mentoring programs
- 10 were served in leadership training.

Adults
- 1,253 parents and other caregivers improved their home environments.
- 780 parents and other caregivers learned and exhibited improved family functioning skills.
- 2,261 individuals demonstrated increased nutrition skills.
- 83 were served in leadership training.

6.4 Family Supports (Seniors, Disabled, and Caregivers)
- 77 were served in parenting support programs.
- 60 child care subsidies were provided.
- 29 were served in eldercare day centers.
- 476 were served in nursing sessions.
- 135 were served through in-home affordable senior or disabled care sessions.
- 80 independent-living home improvements were made.

6.5 Miscellaneous Service Counts
- 26,489 food boxes were provided.
- 22,307 referral calls were provided.
- 7,248 meals were prepared.
Reducing poverty and mitigating its impacts are complicated by the interconnectedness of the root causes of poverty. Poverty often results from the inability to secure a job that pays a living wage and offers benefits such as health insurance and funding of a retirement account. A number of factors impact a person’s ability to secure and maintain a job offering a living wage – lack of adequate education or job skills, lack of stable housing, lack of reliable transportation, lack of quality child care, and poor physical and/or mental health. Many of these factors are exacerbated by living in areas of concentrated poverty due to limited access to and availability of opportunities for employment offering a living wage.

In 2018, it was estimated by the U.S. Census Bureau that approximately 1 in 6 of all Knox County residents (15.2%) and 1 in 5 children under 18 (19.2%) currently live in households whose income falls below the Federal Poverty Level. These percentages were higher within the city limits of Knoxville – 26.2% and 36.6%, respectively. Those people who live in poverty are likely to live within a relatively small area of the county. The majority of individuals experiencing poverty live in one of 31 census tracts. The population within these 31 census tracts account for only one-quarter of the overall population of Knox County but represent more than half of those who live in poverty. Moreover, 10 of these 31 census tracts, are defined as extreme poverty census tracts because 40% or more of the residents have incomes that fall below the Federal Poverty Level. All of the extreme poverty census tracts are located within or immediately surrounding Knoxville’s downtown area.

Poverty is not experienced equally across ethnic and racial groups. Those who identify as Hispanic/Latino or Black/African American disproportionately experience poverty in Knox County. Hispanic/Latino individuals living in Knox County are more than twice as likely to live at or below the poverty level when compared to White, non-Hispanic/Latino individuals and Black/African American individuals are almost three times as likely as White individuals to live at or below the poverty level. Additionally, females are more likely to experience poverty than their male counterparts. Furthermore, children in one-parent homes with a female head of household are significantly more likely to experience poverty than those living in a male head of household.

Childhood poverty has long-term implications and frequently results in a cycle of poverty. Studies and data consistently show that students experiencing childhood poverty are less likely to graduate from high school. Lack of a high school diploma severely limits employment opportunities. Consequently, individuals without a high school degree are significantly more likely to live in poverty than those who are able to obtain higher levels of education. Without proper supports needed to complete at least a high school education, poverty is likely to be perpetuated from one generation to the next.

Another vulnerable population in Knox County are ALICE (Asset Limited Asset Limited, Income Constrained, Employed) households. These households, whose incomes do not fall below the Federal Poverty Level, often struggle to meet their everyday necessities but often do not qualify for income-
based assistance. Overall, 30% of households in Knox County are considered ALICE households. Households headed by individuals under the age of 25 and over the age of 65 are most likely to fall within this income group. Children and senior citizens are most likely to be defined as ALICE.

CAC has been providing services and valuable resources to meet the needs of the vulnerable in Knox County since 1964. Housed in proximity to the areas experiencing the highest levels of poverty in Knox County, it is within walking distance for many and located on a main public transportation route. CAC provides as a wide variety of programs intended to serve the needs of all age groups. These programs include, but are not limited to, early childhood education, workforce development, weatherization, transportation, rental and housing assistance, senior assistance, and nutrition assistance. In addition to direct services, CAC has been particularly successful in building partnerships with local government offices and other non-profit groups to provide the services and supports needed by the community’s vulnerable population to thrive and prosper. These partnerships and long experience with meeting the needs of the community have enabled CAC to quickly and successfully adjust its operations to meet the emerging needs resulting from the COVID-19 pandemic.
Appendix A: CAC Board Member Assessment of Services and Client Needs Survey
The Knoxville-Knox County Community Action Committee  
Community Needs Assessment Survey  
2020 Board Members

We value your experience and opinion. There are no right or wrong answers. We need your input to continue to serve in the most cost-effective way meeting the most critical needs in our community.

Section I: Community Services Block Grant (CSBG) Services
The following is a list of services provided by CAC using Community Services Block Grant (CSBG) funds. We are interested in your opinion about low-income community needs and the extent to which these CSBG services meet those needs.

- Read over the entire list.
- Rank the list 1 through 10.
- **1 is the most important** service and **10 is the least important**. Use each number only once.

___ Helping people become more self-sufficient through education by increasing literacy, getting a GED, obtaining job training or post-secondary education.
___ Helping people become more self-sufficient by getting and keeping a job.
___ Helping low-income people meet their food needs by community gardening.
___ Helping low-income families achieve safe, affordable and energy efficient housing.
___ Helping low-income families move out of poverty by providing comprehensive case management services.
___ Helping people in crisis avoid utility shut-off, eviction, or other emergencies.
___ Helping the working poor people qualify for and get better paying jobs.
___ Providing financial education programs.
___ Helping people access needed services such as medical, mental health and other treatments, social services, grocery shopping, and other needed services through transportation.
___ Helping elderly people to live independently in their homes and prevent the high costs of institutionalization.

Some of these questions were adapted from The 2011 Indiana Statewide Community Needs Assessment (www.INCAP.org).

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Section II: Community Issues
For each question below, circle UP TO THREE (3) responses that best reflect your opinion.

a. What problems keep people in our community from getting work?
1. No problems
2. No transportation
3. No jobs available
4. Lack of training/education or skills
5. Physical disability
6. Childcare
7. Mental disability

b. What problems make it hard for people in our community to get health insurance?
1. No problems
2. Cost
3. Not offered by employer
4. Lack of knowledge of public or private insurance options
5. No private insurance available
6. Poor credit

(c) What problems make it hard for people in our community to have or keep childcare?
1. No problems
2. Cost
3. Hours not sufficient
4. Children have special needs
5. Location of care providers
6. No transportation
7. Quality of providers
8. Not enough providers

(d) What problems do people in our community have with transportation?
1. No problems
2. No car
3. Price of gas
4. Can’t afford a car
5. Can’t afford car repairs
6. Can’t afford car insurance
7. No public transportation
8. No bus routes near home
9. No bus routes near work

(e) What problems do older adults or persons with disabilities in our community have that keeps them from living independently in their homes?
1. No problems
2. Can’t afford long term care insurance
3. Can’t afford to retrofit home
4. Can’t afford to maintain home
5. Unable to complete housekeeping tasks
6. Unable to prepare meals
7. Unable to shop for food
8. Unable to complete daily living tasks
9. No public transportation

University of Tennessee College of Social Work Office of Research and Public Service
f. What problems do people in our community have with housing?
1. No problems
2. Rent too high
3. Utilities too high
4. House needs major repairs
5. Can’t find affordable housing
6. House payment too high

g. What problems do people in our community have with finding and preparing nutritious food?
1. No problems
2. Cost of good quality food
3. Location of grocery stores
4. Lack of community gardens
5. Lack of nutrition education
6. Unable to prepare food
7. Unable to shop for food

Section III: Services Provided by the Knoxville-Knox County CAC

1. What needs are being most effectively met by CAC?

2. What are we doing best?

3. Who does CAC serve best?

4. What population does CAC serve most?
5. Who are the people who DO NOT participate in CAC’s programs?

6. What can be done to reach the people in the community who do not participate in CAC’s programs more effectively?

7. Are there services that are not being provided that you believe we should study and consider in future planning?

8. Are there needs that are being overlooked? What are they?

9. What is the most important thing for CAC to keep doing?

Thank you! We greatly appreciate your service on the CAC Board.

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Appendix B: CAC Program Director Assessment of Services and Client Needs Survey
We need your help so that Knox CAC can continue to meet the needs of our community. As part of our commitment to serving the needs of our clients, we are conducting the triennial Community Needs Assessment. We would like to learn more about your perspectives on the needs of the low-income individuals, families, and communities you serve as well as the programs provided by CAC using Community Services Block Grant (CSBG) funds. The information you provide will help to inform the Knoxville-Knox County CAC Needs Assessment. Please take 10-15 minutes to fill out this survey.

Which of the following are concerns for the clients with whom you work? [Please check all that apply]
1. After school care for children
2. Can’t pay utility bill
3. Care for elderly family member
4. Day care for children
5. Drug or alcohol problem
6. Finding a job
7. Health problem
8. House needs repair
9. Money for food
10. Money for rent or house payment
11. Transportation
12. Using check cashing services, title pawn, or rent to own, or tax preparation with high fees
13. Other - please specify: __________

Which of the following problems are the five most serious problems in the communities/neighborhoods in which your clients live? [Please check the five problems you see as the most serious.]
1. Crime
2. Drug abuse
3. Homelessness
4. Hunger
5. Illiteracy
6. Inadequate health care
7. Inadequate transportation
8. Lack of affordable housing
9. Lack of good paying jobs
10. Lack of job training
11. Lack of programs to help elderly
12. Lack of recreation programs
13. Mental illness
14. Teen pregnancy
15. Unemployment
16. Other - Please specify: __________

What problems keep people in our community from getting work? Select UP TO THREE (3) responses that best reflect your opinion.
1. Childcare
2. Lack of training/education or skills
3. Mental disability
4. No jobs available
5. No transportation
6. Physical disability
7. No problems
What problems make it hard for people in our community to get health insurance? Select UP TO THREE (3) responses that best reflect your opinion.
1. Cost
2. Lack of knowledge of public or private insurance options
3. No private insurance available
4. Not offered by employer
5. Poor credit
6. No problems

What problems make it hard for people in our community to have or keep childcare? Select UP TO THREE (3) responses that best reflect your opinion.
1. Children have special needs
2. Cost
3. Hours not sufficient
4. Location of care providers
5. No transportation
6. Not enough providers
7. Quality of providers
8. No problems

What problems do people in our community have with transportation? Select UP TO THREE (3) responses that best reflect your opinion.
1. Can’t afford a car
2. Can’t afford car insurance
3. Can’t afford car repairs
4. No bus routes near home
5. No bus routes near work
6. No car
7. No public transportation
8. Price of gas
9. No problems

What problems do older adults or persons with disabilities in our community have that keeps them from living independently in their homes? Select UP TO THREE (3) responses that best reflect your opinion.
1. Can’t afford long term care insurance
2. Can’t afford to retrofit home
3. Can’t afford to maintain home
4. Unable to complete daily living tasks
5. Unable to complete housekeeping tasks
6. Unable to prepare meals
7. Unable to shop for food
8. No public transportation
9. No problems
What problems do people in our community have with housing? Select UP TO THREE (3) responses that best reflect your opinion.
1. Can’t find affordable housing
2. House needs major repairs
3. House payment too high
4. Rent too high
5. Utilities too high
6. No problems

What problems do people in our community have with finding and preparing nutritious food? Select UP TO THREE (3) responses that best reflect your opinion.
1. Cost of good quality food
2. Lack of community gardens
3. Lack of nutrition education
4. Location of grocery stores
5. Unable to prepare food
6. Unable to shop for food
7. No problems

The following is a list of services provided by CAC using Community Services Block Grant (CSBG) funds. We are interested in your opinion about low-income community needs and the extent to which these CSBG services meet those needs. Read over the entire list. Rank the list 1 through 10 by selecting the number that reflects its importance. 1 is the most important service and 10 is the least important. Use each number only once.

- Helping people become more self-sufficient through education by increasing literacy, getting a GED, obtaining job training or postsecondary education.
- Helping people become more self-sufficient by getting and keeping a job.
- Helping low-income people meet their food needs by community gardening.
- Helping low-income families achieve safe, affordable and energy efficient housing.
- Helping low-income families move out of poverty by providing comprehensive case management services.
- Helping people in crisis avoid utility shut-off, eviction, or other emergencies.
- Helping the working poor people qualify for and get better paying jobs.
- Providing financial education programs.
- Helping people access needed services such as medical, mental health and other treatments, social services, grocery shopping, and other needed services through transportation.
- Helping elderly people to live independently in their homes and prevent the high costs of institutionalization.

What needs are being most effectively met by CAC?

What are we doing best at Knox CAC?
Who does Knox CAC serve best?

What population does Knox CAC serve most?

Who are the people who DO NOT participate in Knox CAC's programs?

What can be done to reach the people who do not participate more effectively?

Are there needs that are being overlooked? What are they?

What gaps in services do you see for the clients you serve?
When you refer a client out for services in the community, what are the three agencies you most commonly refer clients to?

Agency 1

Agency 2

Agency 3

What CAC programs are working well and need to be expanded to meet emerging needs in the community?

What new programs does CAC need to implement over the next five years to meet emerging needs in the community?
Appendix C: CAC Staff Assessment of Services and Client Needs Survey
Knoxville-Knox County CAC Staff Assessment of Services and Client Needs Survey

We would like to learn more about your perspectives on the needs of the low-income individuals, families, and communities you serve as well as the programs provided by CAC using Community Services Block Grant (CSBG) funds. The information you provide will help to inform the Knoxville-Knox County CAC Needs Assessment. Please take 10-15 minutes to fill out this survey.

1. Which of the following are concerns for the clients with whom you work?
   [Please check all that apply]
   ______ Finding a job
   ______ Transportation
   ______ House needs repair
   ______ Money for food
   ______ Money for rent or house payment
   ______ Day care for children
   ______ After school care for children
   ______ Health problem
   ______ Using check cashing services, title pawn, or rent to own, or tax preparation with high fees
   ______ Drug or alcohol problem
   ______ Can’t pay utility bill
   ______ Care for elderly family member
   ______ Other (Please Specify): ____________________________

Please continue the survey on the next page.
Knoxville-Knox County CAC Staff Assessment of Services and Client Needs Survey

2. Which of the following problems are the five most serious problems in the communities/neighborhoods in which your clients live? [Please check the five problems you see as the most serious.]

___ Lack of affordable housing
___ Teen pregnancy
___ Unemployment
___ Lack of good paying jobs
___ Crime
___ Lack of job training
___ Illiteracy
___ Lack of programs to help elderly
___ Inadequate transportation
___ Drug abuse
___ Mental illness
___ Homelessness
___ Lack of recreation programs
___ Inadequate health care
___ Hunger
___ Other Please Specify:

3. For each question below please circle UP TO THREE (3) responses that best reflect your opinion.

a. What problems keep people in our community from getting work?
   1. No problems
   2. No transportation
   3. No jobs available
   4. Lack of training/education or skills
   5. Physical disability
   6. Childcare
   7. Mental disability

b. What problems make it hard for people in our community to get health insurance?
   1. No problems
   2. Cost
   3. Not offered by employer
   4. Lack of knowledge of public or private insurance options
   5. No private insurance available
   6. Poor credit

Please continue the survey on the next page.

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Knoxville-Knox County CAC Staff Assessment of Services and Client Needs Survey

c. What problems make it hard for people in our community to have or keep childcare?
   1. No problems
   2. Cost
   3. Hours not sufficient
   4. Children have special needs
   5. Location of care providers
   6. No transportation
   7. Quality of providers
   8. Not enough providers

d. What problems do people in our community have with transportation?
   1. No problems
   2. No car
   3. Price of gas
   4. Can’t afford a car
   5. Can’t afford car repairs
   6. Can’t afford car insurance
   7. No public transportation
   8. No bus routes near home
   9. No bus routes near work

e. What problems do older adults or persons with disabilities in our community have that keeps them from living independently in their homes?
   1. No problems
   2. Can’t afford long term care insurance
   3. Can’t afford to retrofit home
   4. Can’t afford to maintain home
   5. Unable to complete housekeeping tasks
   6. Unable to prepare meals
   7. Unable to shop for food
   8. Unable to complete daily living tasks
   9. No public transportation

f. What problems do people in our community have with housing?
   1. No problems
   2. Rent too high
   3. Utilities too high
   4. House needs major repairs
   5. Can’t find affordable housing
   6. House payment too high


g. What problems do people in our community have with finding and preparing nutritious food?
   1. No problems
   2. Cost of good quality food
   3. Location of grocery stores
   4. Lack of community gardens
   5. Lack of nutrition education
   6. Unable to prepare food
   7. Unable to shop for food

Please continue the survey on the next page.
Knoxville-Knox County CAC Staff Assessment of Services and Client Needs Survey

4. The following is a list of services provided by CAC using Community Services Block Grant (CSBG) funds. Please read over the entire list. Then, rank the entire list from 1 to 10. 1 is the MOST IMPORTANT service and 10 is the LEAST IMPORTANT SERVICE. Please use each number only once.

___ Helping people become more self-sufficient through education by increasing literacy, getting a GED, obtaining job training, or post-secondary education
___ Helping people be more self-sufficient by getting and keeping a job
___ Helping low-income people meet their food needs by community gardening
___ Helping low-income families achieve safe, affordable, and energy efficient housing
___ Helping low-income families move out of poverty by providing comprehensive case management services
___ Helping people in crisis avoid utility shut-off, eviction, or other emergencies
___ Helping the working poor people qualify for and get better paying jobs
___ Providing financial education programs
___ Helping people access needed services such as medical, mental health, and other treatments, social services, grocery shopping, and other needed services through transportation
___ Helping elderly people live independently in their homes and prevent the high costs of institutionalization

5. What needs are being most effectively met by CAC?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

6. What are we doing best?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

7. Who does the CAC serve best?

________________________________________________________________________
________________________________________________________________________

Please continue the survey on the next page.

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Knoxville-Knox County CAC Staff Assessment of Services and Client Needs Survey

8. What population does CAC serve most?

9. Who are the people who DO NOT participate in CAC’s programs?

10. What can be done to reach the people who do not participate more effectively?

11. Are there needs that are being overlooked? What are they?

12. What gaps in services do you see for the clients you serve?

13. When you refer a client out for services in the community, what are the three agencies you most commonly refer clients to?
   a.  
   b.  
   c.  

*Please continue the survey on the next page.*
14. What CAC programs are working well and need to be expanded to meet emerging needs in the community?

________________________________________________________________________

________________________________________________________________________

15. What new programs does CAC need to implement over the next five years to meet emerging needs in the community?

________________________________________________________________________

________________________________________________________________________

Thank you for taking the time to complete this survey!
Appendix D: CAC Community Partner Assessment of Services and Client Needs Survey
Knoxville-Knox County Community Action Committee — Needs Assessment 2020

We need your help so that Knox CAC can continue to meet the needs of our community. As part of our commitment to serving the needs of our clients, we are conducting the triennial Community Needs Assessment. We would like to learn more about your perspectives on the needs of the low-income individuals, families, and communities you serve as well as the programs provided by CAC using Community Services Block Grant (CSBG) funds. The information you provide will help to inform the Knoxville-Knox County CAC Needs Assessment. Please take 10-15 minutes to fill out this survey.

Which of the following are concerns for low-income individuals in the community in which you work? [Please check all that apply]
1. After school care for children
2. Can’t pay utility bill
3. Care for elderly family member
4. Day care for children
5. Drug or alcohol problem
6. Finding a job
7. Health problem
8. House needs repair
9. Money for food
10. Money for rent or house payment
11. Transportation
12. Using check cashing services, title pawn, or rent to own, or tax preparation with high fees
13. Other - please specify: __________

Which of the following problems are the five most serious problems in the communities/neighborhoods in which your agencies serve? [Please check the five problems you see as the most serious.]
1. Crime
2. Drug abuse
3. Homelessness
4. Hunger
5. Illiteracy
6. Inadequate health care
7. Inadequate transportation
8. Lack of affordable housing
9. Lack of good paying jobs
10. Lack of job training
11. Lack of programs to help elderly
12. Lack of recreation programs
13. Mental illness
14. Teen pregnancy
15. Unemployment
16. Other - Please specify: __________

What problems keep people in our community from getting work? Select UP TO THREE (3) responses that best reflect your opinion.
1. Childcare
2. Lack of training/education or skills
3. Mental disability
4. No jobs available
5. No transportation
6. Physical disability
7. No problems
What problems make it hard for people in our community to get health insurance? Select UP TO THREE (3) responses that best reflect your opinion.
1. Cost
2. Lack of knowledge of public or private insurance options
3. No private insurance available
4. Not offered by employer
5. Poor credit
6. No problems

What problems make it hard for people in our community to have or keep childcare? Select UP TO THREE (3) responses that best reflect your opinion.
1. Children have special needs
2. Cost
3. Hours not sufficient
4. Location of care providers
5. No transportation
6. Not enough providers
7. Quality of providers
8. No problems

What problems do people in our community have with transportation? Select UP TO THREE (3) responses that best reflect your opinion.
1. Can’t afford a car
2. Can’t afford car insurance
3. Can’t afford car repairs
4. No bus routes near home
5. No bus routes near work
6. No car
7. No public transportation
8. Price of gas
9. No problems

What problems do older adults or persons with disabilities in our community have that keeps them from living independently in their homes? Select UP TO THREE (3) responses that best reflect your opinion.
1. Can’t afford long term care insurance
2. Can’t afford to retrofit home
3. Can’t afford to maintain home
4. Unable to complete daily living tasks
5. Unable to complete housekeeping tasks
6. Unable to prepare meals
7. Unable to shop for food
8. No public transportation
9. No problems
What problems do people in our community have with housing? Select UP TO THREE (3) responses that best reflect your opinion.
1. Can’t find affordable housing
2. House needs major repairs
3. House payment too high
4. Rent too high
5. Utilities too high
6. No problems

What problems do people in our community have with finding and preparing nutritious food? Select UP TO THREE (3) responses that best reflect your opinion.
1. Cost of good quality food
2. Lack of community gardens
3. Lack of nutrition education
4. Location of grocery stores
5. Unable to prepare food
6. Unable to shop for food
7. No problems

The following is a list of services provided by CAC using Community Services Block Grant (CSBG) funds. We are interested in your opinion about low-income community needs and the extent to which these CSBG services meet those needs. Read over the entire list. Rank the list 1 through 10 by selecting the number that reflects its importance. 1 is the most important service and 10 is the least important. Use each number only once.

- Helping people become more self-sufficient through education by increasing literacy, getting a GED, obtaining job training or postsecondary education.
- Helping people become more self-sufficient by getting and keeping a job.
- Helping low-income people meet their food needs by community gardening.
- Helping low-income families achieve safe, affordable and energy efficient housing.
- Helping low-income families move out of poverty by providing comprehensive case management services.
- Helping people in crisis avoid utility shut-off, eviction, or other emergencies.
- Helping the working poor people qualify for and get better paying jobs.
- Providing financial education programs.
- Helping people access needed services such as medical, mental health and other treatments, social services, grocery shopping, and other needed services through transportation.
- Helping elderly people to live independently in their homes and prevent the high costs of institutionalization.

What needs are being most effectively met by CAC?

What are we doing best at CAC?
Who does CAC serve best?

What population does CAC serve most?

Who are the people who DO NOT participate in CAC's programs?

What can be done to reach the people who do not participate more effectively?

Are there needs that are being overlooked? What are they?

What gaps in services do you see for the low-income individuals with whom your agency works?
What CAC programs are working well and need to be expanded to meet emerging needs in the community?

What new programs does CAC need to implement over the next five years to meet emerging needs in the community?

Please give an example of a time you partnered with CAC to help a client be successful.

Which of the following best describes your agency?
1. Consortium
2. Faith based
3. Financial
4. For Profit
5. Health Services
6. Local Government
7. Non-Profit
8. School District
9. Other - Please specify:
Appendix E: CAC Client Service and Satisfaction Survey
Knoxville-Knox County Community Action Committee (CAC)

Client Service and Satisfaction Survey

2020

We Value Your Opinion and Feedback. Please fill out all 3 pages!

We want to be sure that the services that CAC provides are the services that help people the most and that we are serving you well. You can help us by telling us what you think. There are no right or wrong answers to these questions and your answers will help us to improve our services and plan for the future. Thank you!

1) What program asked you to do this survey? Please put an “X” next to the program.

- Access to Benefits
- Knox CAC Transit
- Social Services, Elizabeth Homes
- Steps to Success
- COVID Assistance
- Project Live
- Social Services, Families in Need
- South Center
- East Center
- Resilient Families
- Social Services, REACH
- Youth WINS
- Green Thumb

2) Which services did you apply for? Please put an “X” next to all services you received.

<table>
<thead>
<tr>
<th>Assistance with:</th>
<th>Other services:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completing paperwork for benefits (SNAP, SSI, unemployment)</td>
<td>A community garden plot</td>
</tr>
<tr>
<td>Doctor appointments and pharmacy</td>
<td>Access to child care</td>
</tr>
<tr>
<td>Finding a job</td>
<td>Empty Stocking Fund</td>
</tr>
<tr>
<td>Finding housing</td>
<td>Free seeds and plants</td>
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<tr>
<td>Food Pantry items, clothing and household items</td>
<td>Home repairs</td>
</tr>
<tr>
<td>Getting birth certificate, SSN card, or State ID</td>
<td>Increased education</td>
</tr>
<tr>
<td>Mortgage</td>
<td>Job Training</td>
</tr>
<tr>
<td>Rent</td>
<td>Mobile Meals, Summer Grab &amp; Go, commodities, food supplements</td>
</tr>
<tr>
<td>Utilities</td>
<td>Support for grandparents</td>
</tr>
<tr>
<td></td>
<td>Tips on how to garden and healthy living</td>
</tr>
<tr>
<td></td>
<td>Transportation</td>
</tr>
<tr>
<td></td>
<td>Tutoring for my child or youth</td>
</tr>
<tr>
<td></td>
<td>VITA Tax Assistance</td>
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</tbody>
</table>

2020 Knoxville-Knox County Needs Assessment

University of Tennessee College of Social Work Office of Research and Public Service, August 2020
3) Did you receive the service you applied for?  ____Yes  ____No

3a. If no, what did they tell you about why you did not receive the service?  ____Did not tell me why

They told me: ________________________________________________________________

3b. Were you given ideas of where else to go for help?  ____Yes  ____No

If yes, what did they suggest? __________________________________________________

Please answer these questions about your experience and how you were treated by CAC staff members.

4) I was helped in a timely manner.  ____  ____  ____
5) I was treated with respect.  ____  ____  ____
6) I got the information/services I needed.  ____  ____  ____
7) I was informed about other Knox CAC or community services.  ____  ____  ____
8) I would recommend Knox CAC to friends and/or family.  ____  ____  ____

9) What difference did receiving CAC services make for you and your family?  ________________________________________________________________

10) How could CAC improve how they serve you?  ________________________________________________________________

We would like to ask you a few questions about you, your family, and your neighborhood and community.

11) Below is a list of problems that some people experience. Is this a problem for you or anyone living in your household? Please check all that apply.

______ After school care for children  ____ House needs repair
______ Can’t pay utility bill  ____ Money for food
______ Continuing secondary education or training programs  ____ Money for rent or house payment
______ Care for elderly family member  ____ Physical health problem
______ Day care for children  ____ Transportation
______ Drug or alcohol problem  Using check cashing services, payday advances, title pawn, rent to own, or tax preparation with high fees
______ Finding a job  ____ Other  ________________________________
12) Tell us what you think about community problems in your neighborhood. Below is a list of problems that some people experience in your neighborhood or in the community where you live. For each problem, please circle the number that reflects your opinion about how serious each problem is:

- If you think it is “Not a problem,” then circle 1
- If you think it is “Somewhat of a problem,” then circle 2
- If you think it is a “Serious problem,” then circle 3

<table>
<thead>
<tr>
<th>Issue</th>
<th>Not a problem</th>
<th>Somewhat of a problem</th>
<th>Serious problem</th>
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<td>a)</td>
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<td>3</td>
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</table>

Please write the problem in the space below:

We have just a few questions about you.

13) What is your sex or gender?  ___Female  ___Male  ___Prefer not to identify

14) What year were you born?  ____________

15) What area of Knox County do you live?  ___East  ___North  ___South  ___West

16) Do you have health insurance?  ___No  ___Yes

17) What is your employment status?  ___I am working part-time  ___I am working full-time  ___Retired  ___Unemployed—looking for work  ___Unemployed—not looking for work  ___Stay-at-Home Caregiver

Thank you for taking your time to tell us what services are most important to you and your family.