

Socioeconomic Needs in the Coachella Valley

2007-2019

**Trend Reporting
Based on Five Cycles
of HARC's Coachella
Valley Community
Health Survey**

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Executive Summary

Background

The Coachella Valley is a unique community located within Riverside County in Inland Southern California. In the past, local organizations found that County-level data did not adequately tell the story of the health needs of those living in the Coachella Valley. Service providers in the region struggled for years to monitor population trends including health disparities, inequities, and health behaviors. HARC, Inc., a nonprofit research organization, was founded in 2006 to fill this gap and provide objective, reliable data that are specific to the Coachella Valley.

In 2007, HARC conducted the first health survey in the region via a random-digit-dial telephone survey, now known as the Coachella Valley Community Health Survey. The results of this survey provided vital information about health and quality of life in the region across topics such as healthcare access, healthcare utilization, health behaviors, major diseases, mental health, and much more. It was determined that the survey would be revised and repeated every three years in order to measure progress over time and to provide data that is as current as possible. To date, the survey has been conducted five times: 2007, 2010, 2013, 2016, and 2019.

Trend Reports

This report is part of series of four trend reports commissioned by Desert Healthcare District/Foundation (DHCD/F), which has been the primary funder of the Coachella Valley Community Health Survey since its inception. DHCD/F requested four trend reports that examine data across all five surveys. These four reports include:

1. Socioeconomic needs (this report)
2. Healthcare access
3. Major disease
4. Mental health

A total of five cycles of surveys are included in this report. This report includes topics covering socioeconomic needs in regard to food security, socioeconomic needs (e.g., need for assistance with housing, utilities, etc.), and poverty. Each topic is analyzed in a variety of ways, including comparisons by age, geography, ethnicity, education, and household income. For geographic comparisons, the Coachella Valley was split into three regions to include the West Valley, Mid-Valley, and East Valley.

Results

Adult Socioeconomic Needs

Food Security

From 2007 to 2019, food security has remained relatively stable in the Coachella Valley, with only a few changes. One notable change is that the rate of residents reporting to spend less money on food in order to prioritize other basic needs has substantially decreased from 54.0% in 2016 to 21.3% in 2019. Overall, most slight differences were found among demographic and socioeconomic comparisons. For instance, lower income families report higher rates of cutting the size of meals or skipping meals, higher frequency in cutting the size of or skipping meals, and higher rates of receiving emergency food.

Social and Economic Needs

Overall, residents report an increase in social and economic needs over the years. There is a substantial increase of adults reporting to need food assistance and financial assistance. More differences can be seen among age, income level, and geography. Residents aged 18 to 39 illustrate the most need with financial assistance, rental assistance, and transportation. Need for food assistance has more than doubled for households across all income levels. Moreover, almost one in four households with incomes below \$20,000 report a need in food assistance.

Poverty

When observing the Federal Poverty Level (FPL) of residents living in the Coachella Valley, it is apparent that more adults are living in lower poverty levels today compared to previous years. Compared to Riverside County and the state of California, in recent years, the Coachella Valley has higher rates of adults living in poverty. Moreover, poverty varies by age; residents aged 18 to 39 are more likely to live in poverty while residents aged 65 and older are less likely to live in poverty.

Child Socioeconomic Needs

Food Security

Food security for children has been improving since 2007. Fewer parents/guardians are reporting that they have to cut the size of or skip meals for children in the home, from 10.2% in 2010 to 4.1% in 2019. In addition, from 2016 to 2019, the need to spend less money on food has significantly dropped (39.9% to 14.0%). Lastly, children that do not eat for a whole day because there was not enough money to buy food has remained low across all surveys.

Poverty

When analyzing the Federal Poverty Level (FPL) of the children's families in the Coachella Valley, several changes were seen. In 2019, there was a spike in children's families living above the 300% poverty level and a decline in families with 101-200% poverty level. In comparison to Riverside County and California as a whole, Coachella Valley children are more likely to be living in poverty than those in the wider region.

Introduction

About HARC

HARC, Inc. is a 501(c)(3) nonprofit organization that specializes in research and evaluation services. HARC was founded to help tell the story of the Coachella Valley through a quantitative lens, as the only data available to our region was at the county-level. Having a local research firm enables health leaders and service providers to identify health disparities, inequities, unhealthy behaviors, and trends.

HARC has since expanded to not only continue the survey, but to provide other research and evaluation-based services. These services include, but are not limited to needs assessments, program evaluations, analyses of existing data, and much more. HARC provides customized analytical consulting services, tailored to the needs of its clients to help them answer important questions regarding those they serve. Doing so enables our clients to evaluate the great work that they do and to make the Inland Empire a healthier, and ultimately, happier place to live.

About the Coachella Valley Community Health Survey

The Coachella Valley is a unique community located within Riverside County in Inland Southern California. In the past, local organizations found that County-level data did not adequately tell the story of the health needs of those living in the Coachella Valley. Service providers in the region struggled for years to monitor population trends including health disparities, inequities, and health behaviors. HARC was founded in 2006 to fill this gap and provide objective, reliable data that are specific to the Coachella Valley.

In 2007, HARC conducted the first health survey in the region via a random-digit-dial telephone survey. The results of this survey provided vital information about health and quality of life in the region across topics such as healthcare access, healthcare utilization, health behaviors, major diseases, mental health, and much more. It was determined that the survey would be revised and repeated every three years in order to measure progress over time and to provide data that is as current as possible. To date, the survey has been conducted five times: 2007, 2010, 2013, 2016, and 2019.

HARC's Coachella Valley data are used by nonprofit health and human services agencies, hospitals, federally qualified health centers, institutions of higher education, K-12 education, governmental agencies, and media organizations, among others. These organizations use the data to better understand the people who live in our region, and also to apply for funding, prioritize health needs, develop programs to address those needs, create presentations/lectures, write articles, design and conduct trainings, and make/change policy.

Most notable among these uses is how the data have strengthened local nonprofits' requests for funding. Dozens of nonprofits have used this data over the last decade to make compelling requests for funding and have successfully generated millions of dollars each survey cycle. These funds have provided support for critically important programs and services, such as mental health counseling for children, pregnancy prevention education for teens, medical care for uninsured adults, meal delivery for homebound seniors, and HIV testing for all.

About Trend Reports

Desert Healthcare District/Foundation (DHCD/F) has been the primary funder of the Coachella Valley Community Health Survey since its inception, typically funding about half of the cost of this undertaking. When providing funding for the 2019 survey, DHCD/F asked for the creation not only of the typical Executive Report, but also for four trend reports to compare data points over survey cycles. The four trend reports include:

1. Socioeconomic needs (this report)
2. Healthcare access
3. Major disease
4. Mental health

This particular report covers socioeconomic needs in the Coachella Valley, and includes topics of food security, poverty rates, and social and economic needs.

It is important to be aware of the population being assessed within each section. For example, in some cases, the entire adult population may receive a question, and in other circumstances, only a portion of the adult population receives a question. To illustrate, all adults are asked whether they have health insurance. Following this, only adults who report having insurance are asked questions about who pays for the insurance. Thus, the entire adult population may not be compared each time, and the reader should take caution in understanding which portion of the adult population is being analyzed.

It is worth noting that the survey methodology changes, and thus, comparisons across survey cycles should be interpreted with caution. HARC chooses to continue to model the survey based on emerging best practices, which means that methods change. See the methodology section of this report for more detail on these differences.

Additionally, not all questions are asked on all five survey cycles. The survey content is community-driven; that is, adapted each year to provide data that local organizations need and cannot find elsewhere. Due to funding restrictions, questions have to be cut in order to add new topics, and thus, some topics may not be included on all five surveys. For example, a question may be asked in 2010, 2013, and 2019, but not in 2007 or 2016. When that occurs, the years in which the question was not asked is simply not included in the figures/tables.

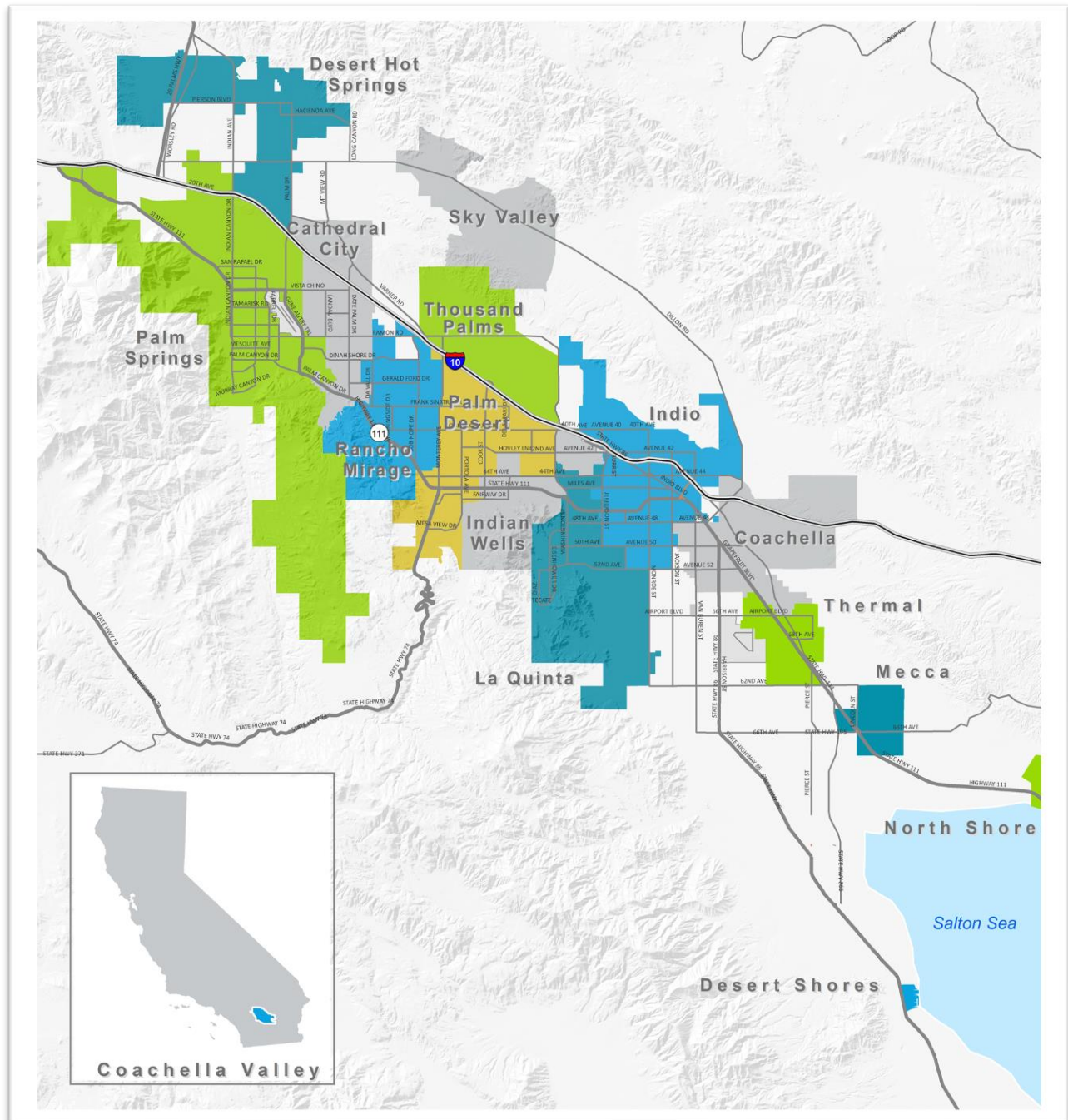
In addition to comparisons over the years, demographic comparisons are also included in this report, per the request of DHCD/F. For the adult data, comparisons of geography, age, ethnicity, education, and income are included. For the child data, comparisons of geography, age, ethnicity, and income are included.

On the note of comparing topics over the years, in the 2007, 2010, and 2013 surveys, race/ethnicity was assessed using a single question. In 2016, based on the advice of data users and potential funders, HARC shifted to the method utilized by the U.S. Census Bureau, which asks two separate questions on race and ethnicity. Because there was a change in how these topics were assessed, race/ethnicity can only be compared from 2016 to 2019.

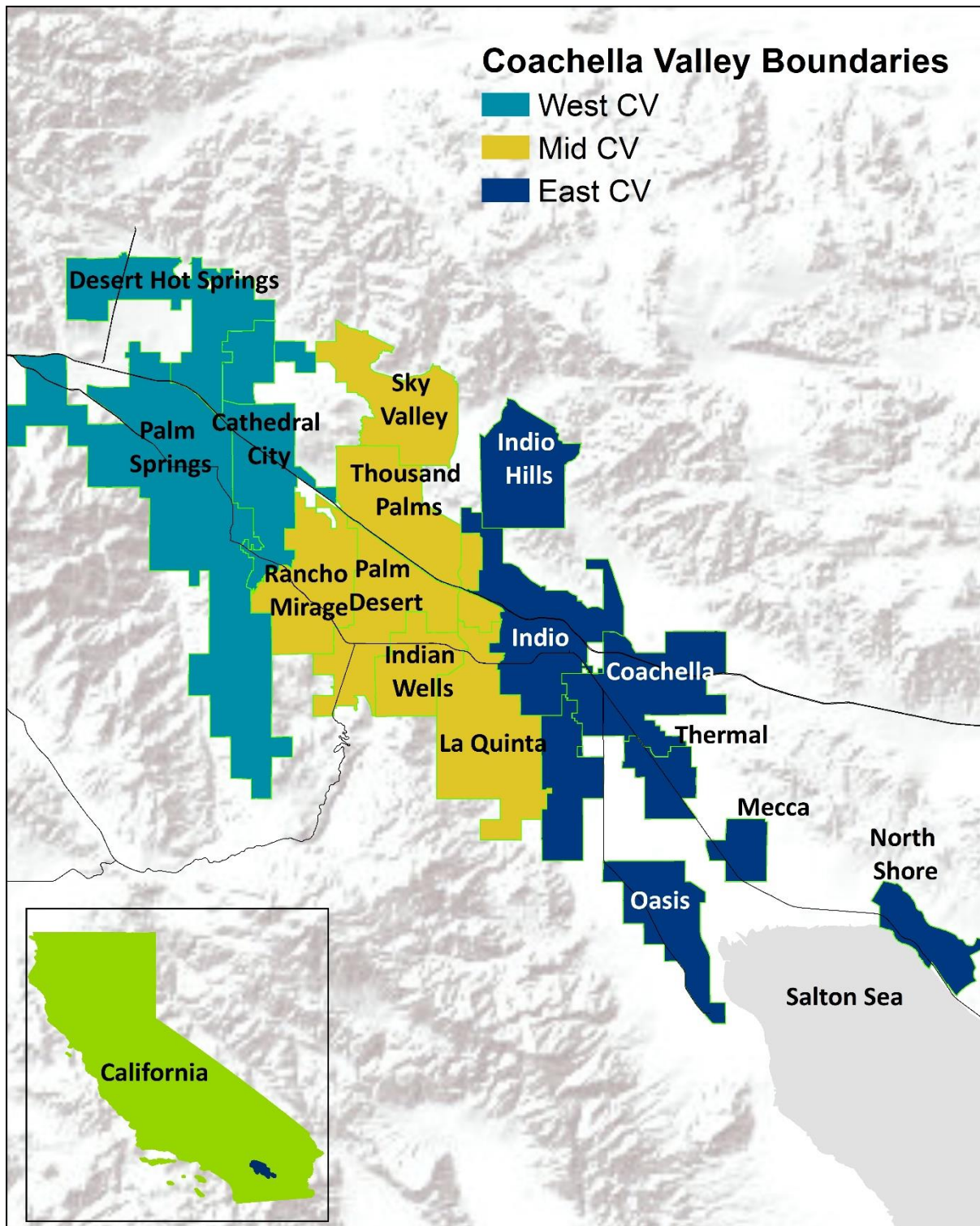
To provide context for these comparisons, each report has an identical section in the results section on adult demographics and child demographics. This presents a picture of the population changes (or lack thereof) over time.

Coachella Valley Geography

This report focuses on the health status of the Coachella Valley in Eastern Riverside County, California. Tribal areas within the Coachella Valley include the reservations of the Agua Caliente Band of Cahuilla Indians, the Augustine Band of Mission Indians, the Cahuilla Band of Mission Indians, and the Torres-Martinez Desert Cahuilla Indians. The Coachella Valley is made up of nine major cities (Cathedral City, Coachella, Desert Hot Springs, Indian Wells, Indio, La Quinta, Palm Desert, Palm Springs, and Rancho Mirage) as well as several unincorporated areas (such as Bermuda Dunes, Mecca, Thermal, and Thousand Palms, among others).



As mentioned earlier, the survey includes residents living in the Coachella Valley. However, one of the demographic comparisons made throughout the report includes geography. Specifically, the Coachella Valley was split into three regions to include the West Valley (Desert Hot Springs, Palm Springs, Cathedral City, Garnet CDP, Desert Edge CDP), Mid Valley (Rancho Mirage, Thousand Palms CDP, Sky Valley CDP, Palm Desert, Desert Palms CDP, Bermuda Dunes CDP, Indian Wells, La Quinta), and East Valley (Indio, Indio Hills CDP, Coachella, Mecca CDP, Oasis CDP, Thermal CDP, North Shore CDP, Vista Santa Rosa CDP). See the map below for a visual representation of the Coachella Valley geography split into three regions.



Methods

Data Collection

The survey instruments were modeled after the well-respected Centers for Disease Control and Prevention's (CDC) Behavioral Risk Factor Surveillance System (BRFSS) and the California Health Interview Survey (CHIS) conducted by UCLA. The instruments assessed topics such as access to and utilization of healthcare, health status indicators, health insurance coverage, and health related behaviors.

For each survey cycle, the data were collected by telephone with randomly selected adults, or randomly selected children (by proxy interview with an adult determined to be the most knowledgeable about the selected child). Surveys were conducted in English or Spanish, based on the preferences of the participant. Surveys were restricted to private residences (such as apartments, houses, or mobile homes) within the geographic area of the Coachella Valley with landlines and/or cell phones. This survey does not include people who live in group home settings (such as nursing homes, assisted living facilities, jails, or prisons, etc.), or those who do not have a landline or a cell phone (which is an estimated 3.1% of U.S. households, according to the National Health Interview Survey).¹ Also, the survey likely does not represent those who are homeless.

Phone calls were conducted by ICF Macro (2007 and 2010) and then by Kent State University (2013, 2016, 2019) using computer assisted telephone interviewing (CATI) labs.

One change that has occurred in the methods is the inclusion of cell phones in data collection. It is critically important to include cell phone respondents, as recent estimates from the National Health Interview Survey shows that more than half of American homes are now cell phone only (57.1%), and cannot be reached by a landline.² Another 15.0% of households are defined as "wireless *mostly*", that is, while they do *have* landlines, they receive all or almost all of their calls on cell phones. Thus, approximately 72.1% of U.S. households take most or all of their calls on cell phones. In fact, only 5.3% of American households are landline only (i.e., no cell phones).³

It is especially critical to include people who do not have landlines, as they tend to be younger, more likely to be living in poverty, more likely to rent their home than own it, and more likely to be Hispanic/Latino than people with landlines. Including cell phone only respondents helps us to better represent the true needs of the community.⁴

¹ Blumberg, S.J., Luke, J.V. (June 2019). Wireless substitution: Early release of estimates from the National Health Interview Survey, July–December 2018. National Center for Health Statistics. Available online at <https://www.cdc.gov/nchs/data/nhis/earlyrelease/wireless201906.pdf>

² Blumberg, S.J., Luke, J.V. (June 2019). Wireless substitution: Early release of estimates from the National Health Interview Survey, July–December 2018. *National Center for Health Statistics*. Available online at <https://www.cdc.gov/nchs/data/nhis/earlyrelease/wireless201906.pdf>

³ Ibid.

⁴ Ibid.

In HARC’s first survey in 2007, the sample included no cell phones. By the most recent survey in 2019, the sample was almost entirely made up of cell phone respondents, as illustrated in the table below. This may limit comparability over survey cycles.

Year	% of Completed Surveys Done on a Cell Phone	% of Completed Surveys Done on a Landline
2019	78.1%	21.9%
2016	59.6%	40.4%
2013	24.8%	75.2%
2010	7.5%	92.5%
2007	0.0%	100.0%

Weighted Data

Each cycle, once data collection was complete, statisticians employed by the survey vendors (ICF Macro and Kent State University) weighted the sample data to most accurately represent the entire Coachella Valley population.

The post-stratification weighting used an iterative proportional fitting (or raking) algorithm. The data were weighted according to the most recently available U.S. Census Bureau’s American Community Survey’s five-year estimates, for the nine incorporated cities in the Coachella Valley combined with the 12 census-designated areas (CDPs; Bermuda Dunes, Desert Edge, Desert Palms, Indio Hills, Garnet, Mecca, North Shore, Oasis, Sky Valley, Thermal, Thousand Palms, and Vista Santa Rosa) to capture the Coachella Valley population. The weights were raked to age, sex, race, ethnicity and telephone use. In 2016 and 2019, HARC provided these weights to the statisticians; in prior cycles, the statisticians were responsible for obtaining the numbers themselves.

As an example of this weighting method, the 2019 sample included 2,521 survey respondents, and their responses are weighted to represent the approximately 430,000 people living in the Coachella Valley. As such, the weighted percentages represent estimates that are weighted from the 2,500+ respondents to the 430,000+ residents of the region and is the proportion of people that the population estimate represents.

It is worth noting that there are two major shifts in weighting between the earliest surveys—2007, 2010, and 2013—and the two most recent surveys, 2016 and 2019. In the first three survey cycles, the weighting procedure included weighting to the seasonal residents. This likely included both migrant farmworkers and those retirees who have chosen to make the Coachella Valley their second home during the winter months; it included anyone who stayed in the Valley more than 30 days. In early survey cycles, HARC weighted the data to represent these seasonal residents based on the Wheeler’s Report. However, in 2016 HARC made the decision to stop weighting the seasonal resident data because of the relative age of the reference data (the 2009 Wheeler’s Report has not been updated since) and the lack of a clear explanation regarding the methods of the Wheeler’s Report (HARC strives to weight the data to sources with extremely strong methods and high reliability).

HARC staff made this methodological decision in an effort to strengthen the reliability of the data and reduce reliance on outdated figures so that the 2016 and 2019 data could be as robust

and reliable as possible. Thus, population estimates in earlier cycles of 2007, 2010, and 2013 are different from those in 2016 and 2019 survey cycles.

Additionally, in the early survey cycles (2007, 2010, and 2013), race/ethnicity was asked as a combined question—and weighted as such. In the 2016 and 2019 cycles, the survey used the U.S. Census Bureau’s protocol for asking race/ethnicity as two separate questions, with corresponding weights. As such, there may be some shifts in the population estimates in this aspect as well. While the lack of continuity is a disadvantage, HARC staff chose to make the switch to using the gold standard (U.S. Census Bureau) to increase the strength and reliability of HARC’s data. Additionally, this now allows for easy comparisons between HARC’s Coachella Valley data and Census Bureau data for other regions.

Thus, these changes may impact the comparability of estimates across survey cycles; the reader should keep these in mind when interpreting differences over time.

Adult Results

Adult Demographics

Gender

Since 2007, adult gender has remained relatively stable, although to some degree this is an artifact of weighting. In 2019, the option to answer to gender as “neither” was added and revealed 0.7% of participants identifying as “neither”.

Table 1. Adult Gender

Gender	2007	2010	2013	2016	2019
Male	47.1%	50.0%	51.1%	49.7%	50.0%
Female	52.9%	50.0%	48.9%	50.3%	49.3%
Neither	-	-	-	-	0.7%

Age

Age has also remained unvaried throughout the years. However, in 2010, there was a small rise for the age group of 65 and older, which has since dropped.

Table 2. Adult Age

Age Group	2007	2010	2013	2016	2019
18-39	31.5%	24.2%	29.4%	34.2%	30.9%
40-64	33.1%	35.2%	34.1%	39.4%	39.9%
65+	35.4%	40.5%	36.5%	26.4%	29.2%

Race/Ethnicity

From 2007 to 2013, race and ethnicity were assessed in a single question. However, in 2016, HARC separated these race and ethnicity questions to follow the same protocol as the U.S. Census.

Prior to 2016, race remained stable with majority of residents identifying as White/Caucasians and about a quarter identifying as Hispanic/Latino.

Table 3. Adult Race/Ethnicity – 2007 to 2013

Race	2007	2010	2013
White/Caucasian	63.9%	69.5%	67.4%
Black/African American	3.5%	2.1%	3.0%
Asian	1.3%	1.1%	1.5%
Native Hawaiian or Other Pacific Islander	0.7%	0.4%	0.6%
American Indian/Alaska Native	0.5%	0.5%	1.0%
Hispanic/Latino	28.8%	22.5%	24.5%
Other	1.2%	2.4%	2.1%

Using the new format dictated by the U.S. Census Bureau, the percent of local adults who identify as Hispanic/Latino increased, as illustrated below.

Table 4. Adult Ethnicity – 2016 to 2019

Ethnicity	2016	2019
Hispanic/Latino	55.3%	48.2%
Not Hispanic/Latino	44.7%	51.8%

There have not been many changes in race between 2016 and 2019. Two notable changes are in Asian and American Indian/Alaska Native populations: the Asian population in decreased while American Indian/Alaska Native population increased.

Table 5. Adult Race – 2016 to 2019

Race	2016	2019
White/Caucasian	68.6%	66.2%
Black/African American	2.9%	2.8%
Asian	3.4%	0.6%
American Indian/Alaska Native	0.7%	3.3%
Other	24.4%	27.2%

Income

Since 2007, the percent of participants in the lowest income bracket (\$0 to \$19,999) has increased.

Table 6. Adult Income

Income Level	2007	2010	2013	2016	2019
\$0 to \$19,999	13.1%	15.5%	14.9%	27.7%	21.1%
\$20,000 to \$49,999	37.2%	38.9%	27.0%	31.6%	29.9%
\$50,000 to \$99,999	33.1%	24.5%	46.2%	21.8%	24.4%
\$100,000 or more	16.6%	21.0%	12.2%	18.9%	24.5%

Education

As illustrated in the table below, educational attainment has remained relatively stable from 2007 to 2019.

Table 7. Adult Education Level

Education Level	2007	2010	2013	2016	2019
Less than HS	16.8%	9.5%	12.2%	19.7%	14.9%
High school or GED	22.8%	21.2%	17.9%	19.2%	18.1%
Some college	27.3%	25.6%	29.9%	25.6%	28.1%
College	21.6%	29.8%	24.8%	20.5%	23.6%
Postgraduate	11.5%	14.0%	15.3%	15.1%	15.3%

Geography

City and CDP (census designated place) boundaries of the Coachella Valley were chosen by HARC in consultation with DHCD/F to represent western, middle, and eastern portions of the Valley.

The Coachella Valley was split into three regions to include the West Valley (Desert Hot Springs, Palm Springs, Cathedral City, Garnet CDP, Desert Edge CDP), Mid Valley (Rancho Mirage, Thousand Palms CDP, Sky Valley CDP, Palm Desert, Desert Palms CDP, Bermuda Dunes CDP, Indian Wells, La Quinta), and East Valley (Indio, Indio Hills CDP, Coachella, Mecca CDP, Oasis CDP, Thermal CDP, North Shore CDP, Vista Santa Rosa CDP).

As illustrated in the table below, between 2007 to 2019, there have been some changes in the geographic distribution of participants, going from predominantly West Valley in 2007 to an even distribution across the three regions in 2019.

Note that these differences may be a legitimate representation of population shifts over time (that is, the East Valley has become more populated in recent years) or it may simply be an artifact of data collection (that is, recent surveys have done a better job of recruiting participants from the East Valley than early surveys).

Table 8. Adult Geography

Gender	2007	2010	2013	2016	2019
West Valley	49.3%	34.8%	31.9%	36.0%	33.2%
Mid Valley	29.9%	41.4%	39.9%	30.1%	32.3%
East Valley	20.8%	23.8%	28.1%	33.9%	34.5%

Adult Food Insecurity

To understand food security in the Coachella Valley, participants were asked several questions. One of these questions was, **“In the last 12 months, did you/you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?”**

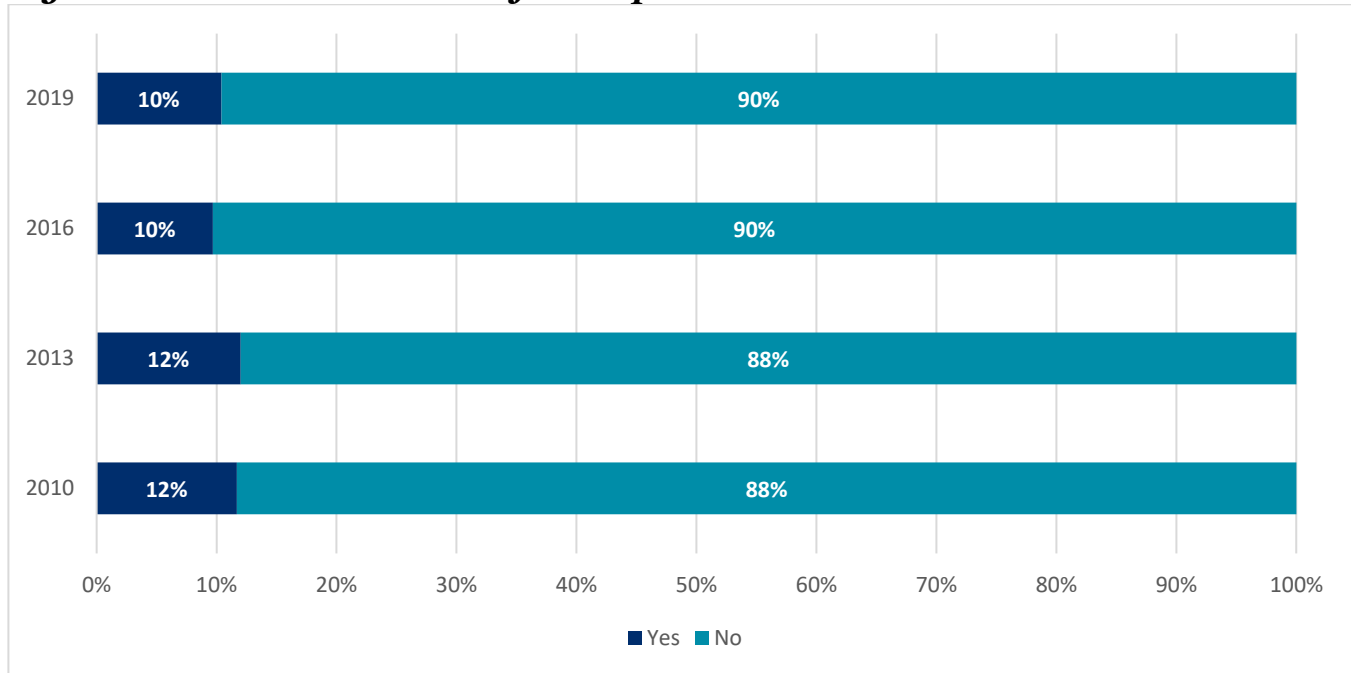
Overall

Throughout the years, not many changes have occurred based on adults cutting the size of their meals or skipping meals. Fortunately, the majority of local adults do not have to cut the size of or skip meals due to lack of money for food.

Table 9. Adult – Cut the Size of or Skip Meals

Cut the size of or skip meals	2010	2013	2016	2019
Yes	11.7%	12.0%	9.7%	10.4%
No	88.3%	88.0%	90.3%	89.6%

Figure 1. Adult – Cut the Size of or Skip Meals



Comparisons

Age Comparisons

Over the years, a higher percentage of younger adults (those between 18 and 39) need to cut the size of meals or skip meals due to lack of money for food, in comparison to their older counterparts.

Table 10. Adult – Cut the Size of or Skip Meals by Age

Age Group	2010	2013	2016	2019
18-39	24.0%	19.6%	11.6%	16.2%
40-64	14.2%	16.4%	12.3%	11.5%
65+	2.4%	1.2%	3.1%	3.0%

Geographic Comparisons

In 2013, there was a small increase in Western Coachella Valley residents skipping or cutting the size of meals. Aside from that, the percentage of Coachella Valley residents cutting the size of or skipping meals has remained relatively similar throughout the years.

Table 11. Adult – Cut the Size of or Skip Meals by Geography

Geography	2010	2013	2016	2019
West Valley	13.4%	17.6%	12.7%	12.1%
Mid Valley	8.0%	7.3%	6.3%	5.5%
East Valley	16.0%	12.1%	9.3%	13.5%

Hispanic/Latino Comparisons

As seen below, rates based on ethnicity comparisons have remain stable. The Hispanic/Latino population seem to cut the size of or skip meals slightly more than non-Hispanic/Latinos.

Table 12. Adult – Cut the Size of or Skip Meals by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	11.1%	12.7%
Not Hispanic or Latino	8.4%	7.9%

Income Comparisons

Not surprisingly, households with lower income are more likely to have to cut the size of or skip meals due to lack of money. However, since 2010, there has been a noticeable decline of the need to do so in the lowest income bracket.

Table 13. Adult – Cut the Size of or Skip Meals by Income

Income Level	2010	2013	2016	2019
\$0 - \$19,999	41.4%	23.8%	22.5%	21.9%
\$20,000 - \$49,999	16.5%	24.2%	9.7%	18.0%
\$50,000 - \$99,999	*	4.3%	3.3%	4.4%
\$100,000 or more	*	0.6%	*	*

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Residents with more education are less likely to cut the size of or skip meals due to lack of money. However, since 2010, there has been a decline of residents with a less than high school education skipping or cutting the size of meals due to lack of money.

Table 14. Adult – Cut the Size of or Skip Meals by Education

Education Level	2010	2013	2016	2019
Less than high school	25.0%	25.1%	16.9%	13.1%
High school or GED	15.8%	19.2%	10.0%	13.1%
Some college	14.5%	10.9%	9.7%	13.9%
College	6.3%	6.9%	5.8%	6.6%
Post-graduate	3.7%	3.5%	4.8%	4.0%

Those who had to cut meals or skip meals were then asked **how often they had to cut the size of meals or skip meals** in the past year.

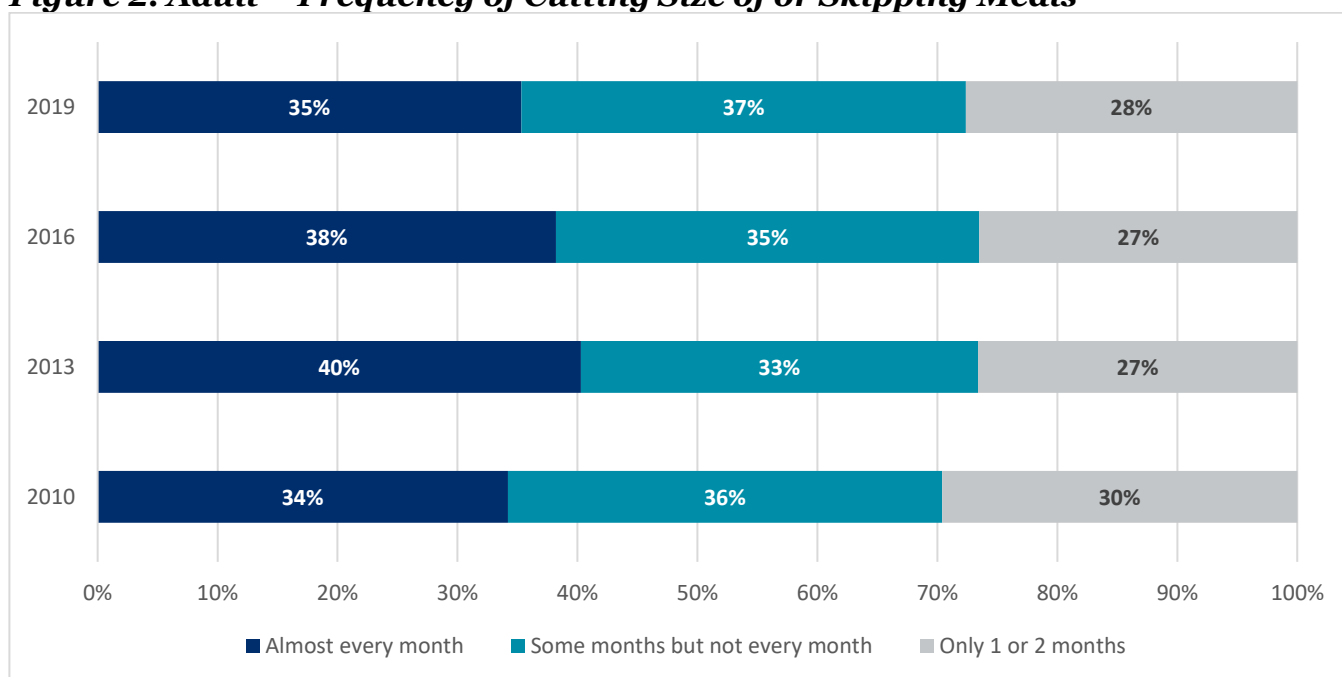
Overall

In 2013, there was an increase of residents who cut the size of or skip meals almost every month (40.3%), however this rate decreased down to 35.3% by 2019. Overall, the frequency patterns have not changed much over the years, as illustrate in the table and chart below.

Table 15. Adult – Frequency of Cutting Size of or Skipping Meals

Frequency	2010	2013	2016	2019
Almost every month	34.2%	40.3%	38.2%	35.3%
Some months but not every month	36.2%	33.1%	35.3%	37.0%
Only 1 or 2 months	29.6%	26.6%	26.5%	27.6%

Figure 2. Adult – Frequency of Cutting Size of or Skipping Meals



Comparisons

Age Comparisons

In 2013, there was an increase in the frequency of skipping meals for the age group between ages 18 to 39 (40.1% stated they cut the size of or skip meals almost every month).

Table 16. Adult – Frequency of Cutting Size of or Skipping Meals by Age

Frequency	Age Group	2010	2013	2016	2019
Almost every month	18-39	22.3%	40.1%%	24.8%	21.0%
	40-64	41.2%	36.2%	47.0%	44.9%
	65+	60.6%	60.4%	51.5%	67.5%
Some months but not every month	18-39	43.6%	27.0%	38.5%	41.5%
	40-64	31.8%	42.9%	35.3%	33.5%
	65+	27.0%	*	20.3%	30.3%
Only 1 or 2 months	18-39	34.1%	32.9%	36.7%	37.5%
	40-64	19.1%	20.9%	17.7%	21.6%
	65+	20.2%	30.3%	28.6%	*

Note: Red asterisks represent a statistically unstable estimate.

Geographic Comparisons

Notably, in 2013, there was an increase of Mid Valley residents that skipped or cut the size of their meals “almost every month”. As of 2019, majority of residents skipping or cutting the size of meals almost every month are from the Western Coachella Valley.

Table 17. Adult – Frequency of Cutting Size of or Skipping Meals by Geography

Frequency	Geography	2010	2013	2016	2019
Almost every month	West Valley	47.2%	30.5%	41.5%	40.2%
	Mid Valley	26.9%	77.9%	36.8%	30.6%
	East Valley	25.0%	24.1%	34.3%	32.8%
Some months but not every month	West Valley	33.9%	28.9%	37.3%	31.7%
	Mid Valley	20.3%	16.8%	45.6%	47.6%
	East Valley	52.6%	53.9%	26.3%	37.6%
Only 1 or 2 months	West Valley	18.9%	40.7%	21.2%	28.1%
	Mid Valley	52.8%	*	17.6%	21.8%
	East Valley	22.4%	22.0%	39.5%	29.6%

Note: Red asterisks represent a statistically unstable estimate.

Hispanic/Latino Comparisons

There have been small changes in frequency of missing or skipping meals by ethnicity over time. The percent of Hispanic/Latino adults who had to cut the size of meals or skip meals “some months but not every month” went up from 2016 to 2019.

Table 18. Adult – Frequency of Cutting Size of or Skipping Meals by Ethnicity

Frequency	Ethnicity	2016	2019
Almost every month	Hispanic or Latino	27.6%	25.4%
	Not Hispanic or Latino	49.6%	51.3%
Some months but not every month	Hispanic or Latino	38.8%	47.5%
	Not Hispanic or Latino	32.5%	20.6%
Only 1 or 2 months	Hispanic or Latino	33.6%	27.2%
	Not Hispanic or Latino	17.8%	28.1%

Income Comparisons

Those in the lowest income bracket (\$0 to \$19,999) has steadily increased in the percentage of people who had to cut the size of meals or skip meals “almost every month”.

Table 19. Adult – Frequency of Cutting Size of or Skipping Meals by Income

Frequency	Income Level	2010	2013	2016	2019
Almost every month	\$0 - \$19,999	32.2%	24.4%	42.9%	51.4%
	\$20,000 - \$49,999	25.9%	49.0%	45.2%	21.8%
	\$50,000 - \$99,999	*	36.2%	*	*
	\$100,000 or more	*	*	*	*
Some months but not every month	\$0 - \$19,999	55.4%	26.3%	29.5%	28.9%
	\$20,000 - \$49,999	20.9%	35.3%	32.7%	42.5%
	\$50,000 - \$99,999	*	34.6%	*	*
	\$100,000 or more	*	*	*	*
Only one or two months	\$0 - \$19,999	12.4%	49.3%	27.5%	19.7%
	\$20,000 - \$49,999	53.2%	15.8%	22.0%	35.7%
	\$50,000 - \$99,999	*	29.3%	*	*
	\$100,000 or more	*	*	*	*

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Those with less than a high school education who have had to cut or skip meals “almost every month” has steadily increased over time, as illustrated in the table below.

Table 20. Adult – Frequency of Cutting Size of or Skipping Meals by Education

Frequency	Education Level	2010	2013	2016	2019
Almost every month	Less than high school	23.1%	35.1%	42.8%	40.6%
	High school or GED	40.2%	21.9%	24.9%	30.7%
	Some college	26.5%	44.2%	39.2%	32.6%
	College	45.1%	71.6%	29.8%	32.6%
	Post-graduate	63.3%	66.0%	66.7%	69.3%
Some months but not every month	Less than high school	46.4%	52.8%	29.0%	46.1%
	High school or GED	35.7%	36.4%	47.8%	41.0%
	Some college	46.4%	30.5%	38.2%	33.3%
	College	*	*	40.4%	31.4%
	Post-graduate	*	*	*	*
Only one or two months	Less than high school	30.5%	12.0%	28.2%	13.2%*
	High school or GED	24.1%	41.7%	27.3%	28.3%
	Some college	27.2%	25.3%	22.6%	34.2%
	College	*	*	*	*
	Post-graduate	*	*	*	*

Note: Red asterisks represent a statistically unstable estimate.

To better understand food insecurity, residents were asked if, during the past year, **anyone in the household had to go without eating for a whole day because there was not enough money for food.**

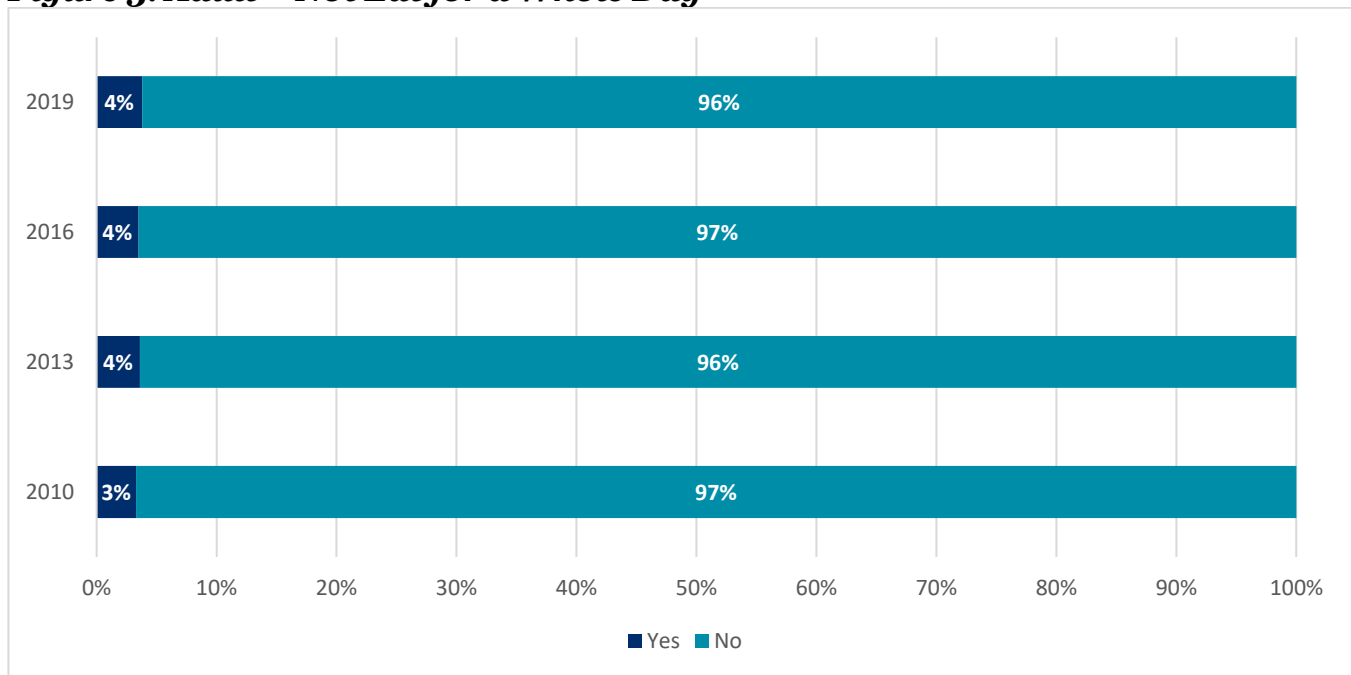
Overall

The percentage of people not eating for whole day has remained low over the years and very stable, as illustrated in the table and chart below.

Table 21. Adult – Not Eat for a Whole Day

Not Eat for a Whole Day	2010	2013	2016	2019
Yes	3.3%	3.6%	3.5%	3.8%
No	96.7%	96.4%	96.5%	96.2%

Figure 3. Adult – Not Eat for a Whole Day



Comparisons

Age Comparisons

When looking at age, seniors are less likely than younger adults to have to go without eating for a whole day due to lack of money.

Table 22. Adult – Not Eat for a Whole Day by Age

Age Group	2010	2013	2016	2019
18-39	5.1%	4.9%	4.5%	5.5%
40-64	5.2%	6.0%	4.5%	4.4%
65+	0.5%	0.5%	*	0.9%

Note: Red asterisks represent a statistically unstable estimate.

Geographic Comparisons

Regarding geography, there have been a few slight changes over the past years. Most notably, the most recent report finds that adults in Mid Valley are less likely to not eat for a whole day than their counterparts on either end of the Valley.

Table 23. Adult – Not Eat for a Whole Day by Geography

Geography	2010	2013	2016	2019
West Valley	3.2%	5.9%	5.0%	4.5%
Mid Valley	4.0%	2.4%	3.5%	1.8%
East Valley	2.2%	2.9%	1.9%	4.9%

Hispanic/Latino Comparisons

There have been no significant changes in not eating for a whole day based on ethnicity.

Table 24. Adult – Not Eat for a Whole Day by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	3.2%	4.5%
Not Hispanic or Latino	3.8%	2.9%

Income Comparisons

The highest proportion of residents who do not eat for a whole day are in the income bracket between \$0 to \$19,999. While in earlier years there seemed to be a steady decrease in residents not eating for a whole day with incomes up to \$19,999, this percentage rose again in 2019.

Table 25. Adult – Not Eat for a Whole Day by Income

Income Level	2010	2013	2016	2019
\$0 - \$19,999	15.0%	7.9%	6.9%	9.5%
\$20,000 - \$49,999	3.7%	4.7%	4.1%	6.3%
\$50,000 - \$99,999	*	2.2%	*	*
\$100,000 or more	*	*	*	*

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Going without eating for an entire day has not changed much over time based on educational level, as illustrated in the table below.

Table 26. Adult – Not Eat for a Whole Day by Education

Education Level	2010	2013	2016	2019
Less than high school	5.3%	5.9%	4.4%	5.2%
High school or GED	4.5%	5.0%	2.1%	6.1%
Some college	3.4%	5.6%	5.4%	4.2%
College	2.6%	*	2.1%	2.5%
Post-graduate	*	*	2.9%	*

Note: Red asterisks represent a statistically unstable estimate.

Those who had to go without eating for a whole day in the past year were also asked to report **the frequency of not eating for a whole day**.

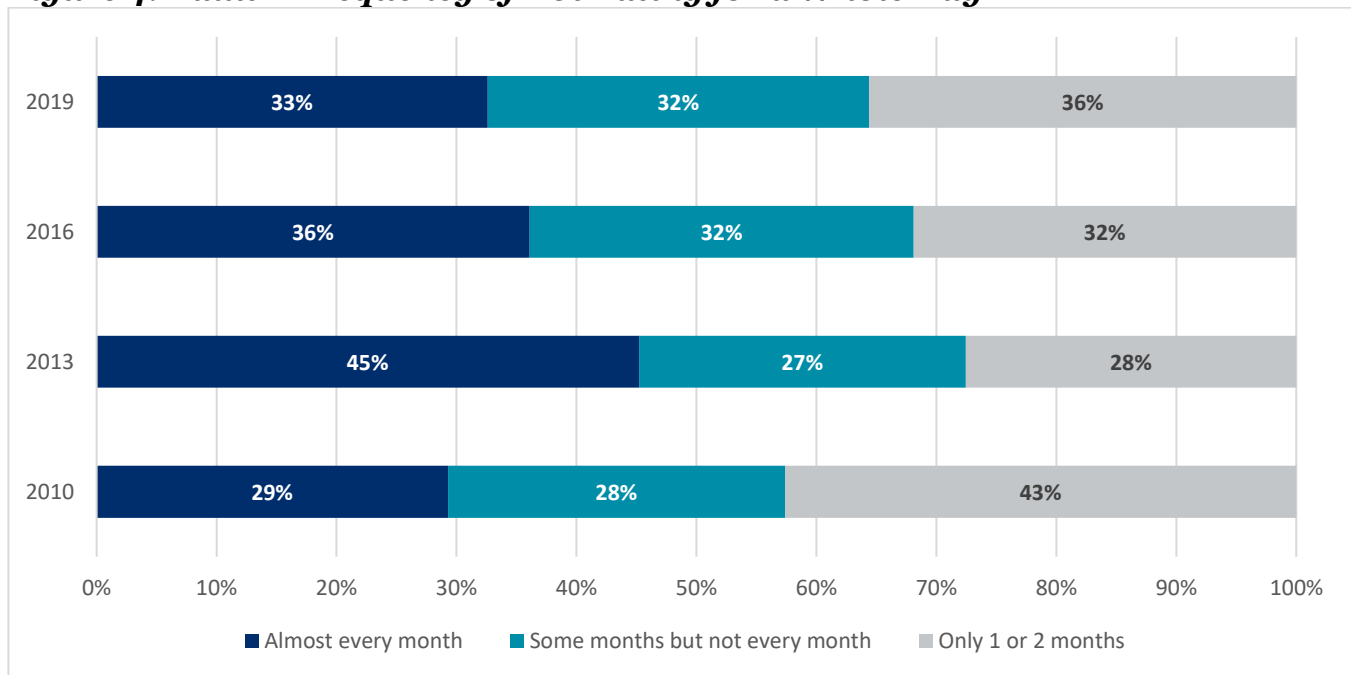
Overall

The frequency of residents not eating for a day has been shifting over the years. Since 2016, about one third of residents said, “almost every month”, one third said “some months but not every month”, and another third said, “only 1 or 2 months”.

Table 27. Adult – Frequency of Not Eating for a Whole Day

Frequency	2010	2013	2016	2019
Almost every month	29.3%	45.3%	36.1%	32.6%
Some months but not every month	28.1%	27.3%	32.0%	31.8%
Only 1 or 2 months	42.6%	27.6%	31.9%	35.6%

Figure 4. Adult – Frequency of Not Eating for a Whole Day



Comparisons

No further comparisons are made for this variable because the sample sizes were too small; nearly all estimates were statistically unstable.

Coachella Valley adults were also asked if, **in the past year, they had received emergency food from a food assistance program, such as a church, a food pantry, a food bank, or eat in a soup kitchen.**

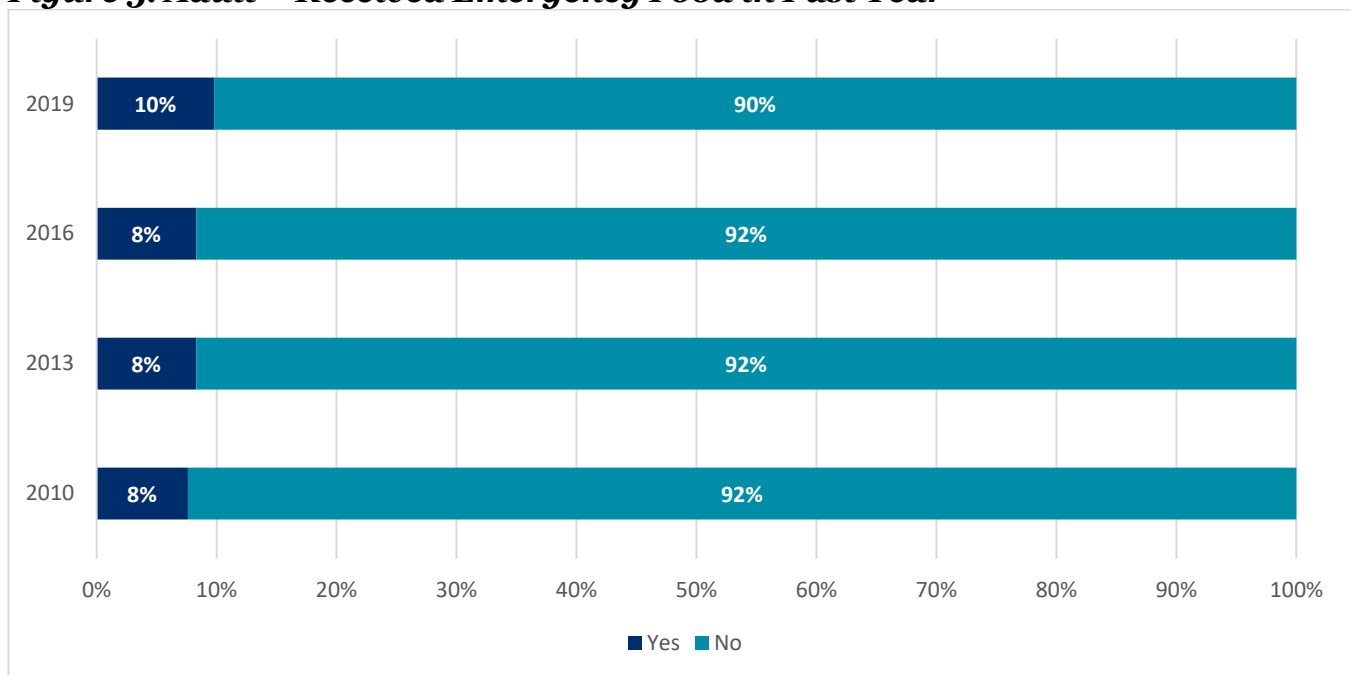
Overall

Throughout the years, less than 10.0% of residents have received emergency food but this percent has been very slightly increasing over the years, as illustrated in the table and chart below.

Table 28. Adult – Received Emergency Food in Past Year

Received Emergency Food	2010	2013	2016	2019
Yes	7.6%	8.3%	8.3%	9.8%
No	92.4%	91.7%	91.7%	90.2%

Figure 5. Adult – Received Emergency Food in Past Year



Comparisons

Age Comparisons

Residents between the ages 18 to 64 seem to receive emergency food more than residents above 65 years old.

Table 29. Adult – Received Emergency Food by Age

Age Group	2010	2013	2016	2019
18-39	12.6%	9.9%	8.7%	11.9%
40-64	10.3%	12.9%	11.3%	11.8%
65+	2.3%	2.9%	3.2%	4.9%

Geographic Comparisons

When comparing residents that receive emergency food by region, there have been some slight changes over the years. However, one stable trend is that adults in Mid Valley receive emergency food the least.

Table 30. Adult – Received Emergency Food by Geography

Geography	2010	2013	2016	2019
West Valley	8.2%	10.6%	9.7%	10.8%
Mid Valley	4.6%	2.8%	2.9%	5.3%
East Valley	11.7%	13.3%	11.4%	13.0%

Hispanic/Latino Comparisons

From 2016 to 2019, the percent of Hispanic/Latino adults that receive emergency food remained relatively stable.

Table 31. Adult – Receiving Emergency Food by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	10.9%	11.6%
Not Hispanic or Latino	6.1%	7.7%

Income Comparisons

Households with lower income illustrate to receive emergency food the most; this holds true across all survey cycles.

Table 32. Adult – Received Emergency Food by Income

Income Level	2010	2013	2016	2019
\$0 - \$19,999	24.6%	16.0%	21.5%	22.9%
\$20,000 - \$49,999	8.8%	13.5%	8.4%	13.6%
\$50,000 - \$99,999	*	3.9%	2.2%	5.4%
\$100,000 or more	*	*	*	*

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Over the past decade, the percent of residents with less than high school education that receive emergency food has been decreasing. On the contrary, the percent of residents with a college or post-graduate degree that receive emergency has been slightly increasing.

Table 33. Adult – Receiving Emergency Food by Education

Education Level	2010	2013	2016	2019
Less than high school	26.5%	21.5%	17.4%	14.2%
High school or GED	11.6%	10.6%	9.4%	10.9%
Some college	4.4%	8.4%	7.4%	11.7%
College	3.3%	4.0%	3.6%	6.8%
Post-graduate	1.9%	1.8%	2.7%	5.6%

Residents were also asked **if in the past year, they have spent less money on food because they needed to prioritize other basic needs**, such as healthcare, housing, transportation, or utilities. This question was added in 2016, thus there is no data prior to that.

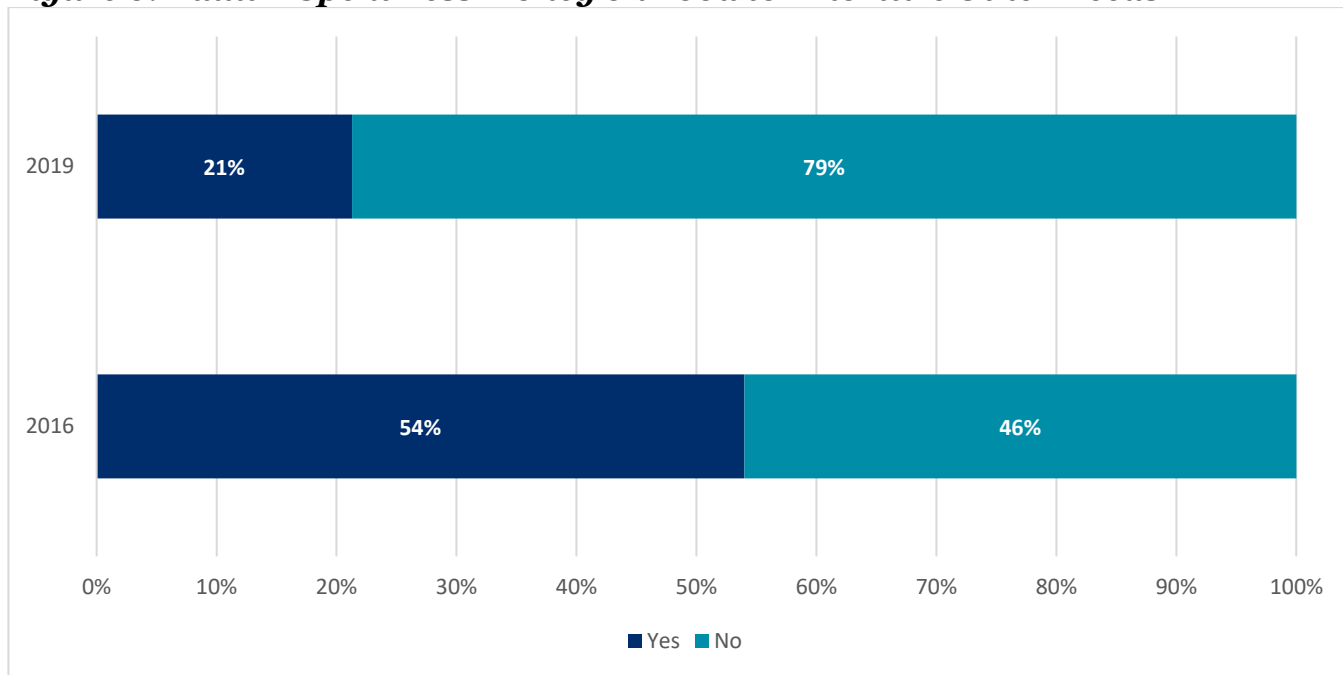
Overall

From 2016 to 2019, significantly fewer residents needed to spend less money on food to prioritize other needs.

Table 34. Adult – Spent Less Money on Food to Prioritize Other Needs

Spent Less Money on Food	2016	2019
Yes	54.0%	21.3%
No	46.0%	78.7%

Figure 6. Adult – Spent Less Money on Food to Prioritize Other Needs



Comparisons

Age Comparisons

From 2016 to 2019, there was a shift based on age groups that need to spend less money on food to prioritize other needs. In 2016, more residents in the age group between 40 to 64 needed to spend less money on food, whereas in 2019, residents in the age group between 18 to 39 demonstrated a higher need.

Table 35. Adult – Spent Less Money on Food by Age

Age Group	2016	2019
18-39	54.9%	30.0%
40-64	60.9%	23.9%
65+	28.8%	8.6%

Geographic Comparisons

In 2016, about half of the adults from each region in the Coachella Valley demonstrated the need to spend less money on food. Overall, this decreased from 2016 to 2019, with adults in Mid Valley seeing the most substantial drop.

Table 36. Adult – Spent Less Money on Food by Geography

Geography	2016	2019
West Valley	51.6%	24.7%
Mid Valley	54.0%	13.6%
East Valley	57.8%	25.4%

Hispanic/Latino Comparisons

The need to spend less money on food to prioritize other basic needs dropped substantially from 2016 to 2019; the drop was especially sharp for non-Hispanic/Latino adults, as illustrated in the table below.

Table 37. Adult – Spent Less Money on Food by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	48.5%	26.4%
Not Hispanic or Latino	59.2%	15.6%

Income Comparisons

Based on income, the need for residents across all income levels decreased from 2016 to 2019. Households with lower income levels illustrate the most need.

Table 38. Adult – Spent Less Money on Food by Income

Income Level	2016	2019
\$0 - \$19,999	68.3%	35.8%
\$20,000 - \$49,999	38.1%	31.0%
\$50,000 - \$99,999	*	14.0%
\$100,000 or more	*	5.7%

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Similarly, the need for residents across all education levels decreased from 2016 to 2019. The decrease was most substantial for adults with a post-graduate degree.

Table 39. Adult – Spent Less Money on Food by Education

Education Level	2016	2019
Less than high school	58.9%	28.2%
High school or GED	36.5%	25.0%
Some college	62.0%	25.3%
College	45.7%	18.0%
Post-graduate	69.4%	8.1%

Adult Social and Economic Needs

Coachella Valley residents answered a series of questions about whether they needed help in the past year with food assistance, housing, rental assistance, financial assistance, utility assistance, transportation, and/or home health care.

First, residents of the Coachella Valley were asked if they **needed food assistance** in the past year.

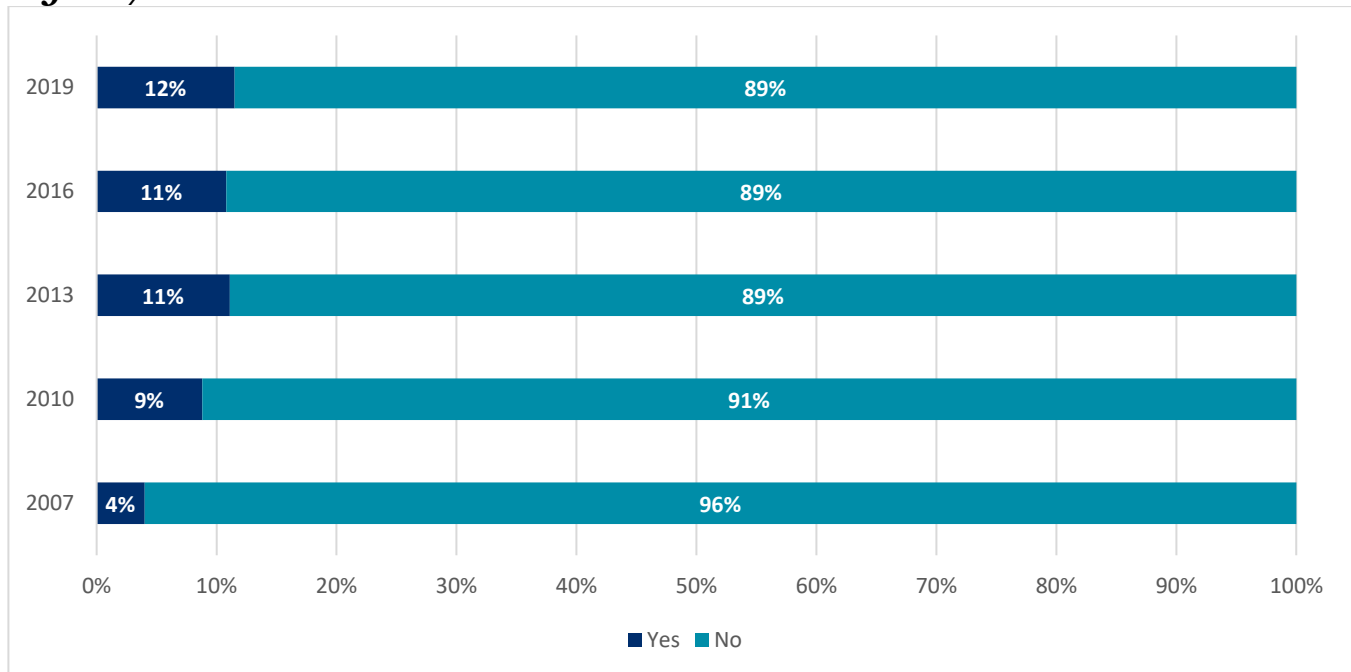
Overall

Since 2007, there has been an overall increase in the percentage of residents in need of food assistance. In 2007, only 4.0% of adults needed food assistance and in 2019 11.5% needed that same help.

Table 40. Adult – Need Food Assistance

Need Food Assistance	2007	2010	2013	2016	2019
Yes	4.0%	8.8%	11.1%	10.8%	11.5%
No	96.0%	91.2%	88.9%	89.2%	88.5%

Figure 7. Adult – Need Food Assistance



Comparisons

Age Comparisons

While adults aged 18 to 64 are the group with the highest percentage in need of food assistance, there is also a need among adults age 40 to 64. Residents aged 65 and older report a small need.

Table 41. Adult – Need Food Assistance by Age

Age Group	2007	2010	2013	2016	2019
18-39	6.5%	15.1%	16.1%	12.8%	15.6%
40-64	4.0%	11.9%	16.3%	13.2%	14.1%
65+	1.8%	2.7%	2.5%	4.9%	3.6%

Geographic Comparisons

Over the years, the adults in Mid Valley have a lower need for food assistance than those in the two ends of the Valley, as illustrated in the table below.

Table 42. Adult – Need Food Assistance by Geography

Geography	2007	2010	2013	2016	2019
West Valley	5.5%	10.1%	15.0%	13.7%	13.3%
Mid Valley	2.0%	5.3%	6.0%	6.5%	7.0%
East Valley	4.0%	12.8%	14.0%	11.6%	13.9%

Hispanic/Latino Comparisons

The need for food assistance has remained slightly higher for Hispanic/Latino adults than non-Hispanic/Latino adults.

Table 43. Adult – Need Food Assistance by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	12.2%	13.4%
Not Hispanic or Latino	9.8%	9.2%

Income Comparisons

Since 2007, the need for food assistance has more than doubled for households across all income levels; households earning less than \$50,000 have a much higher level of need than those earning \$50,000 or more, as illustrated in the table below.

Table 44. Adult – Need Food Assistance by Income

Income Level	2007	2010	2013	2016	2019
\$0 - \$19,999	10.2%	31.6%	25.8%	28.5%	24.5%
\$20,000 - \$49,999	5.5%	9.4%	16.2%	10.5%	18.4%
\$50,000 - \$99,999	0.6%	2.4%	6.1%	1.8%	5.8%
\$100,000 or more	0.1%	*	*	*	1.8%

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Similarly, the need for food assistance has increased since 2007 across all education levels.

Table 45. Adult – Need Food Assistance by Education

Education Level	2007	2010	2013	2016	2019
Less than high school	7.9%	22.1%	23.4%	22.3%	14.5%
High school or GED	3.2%	11.8%	19.9%	9.1%	15.6%
Some college	5.9%	7.9%	11.1%	11.1%	12.9%
College	1.1%	5.3%	2.5%	6.3%	8.8%
Post-graduate	*	2.9%	5.2%	4.2%	5.5%

Note: Red asterisks represent a statistically unstable estimate.

Next, residents of the Coachella Valley were asked if they **needed housing assistance** in the past year.

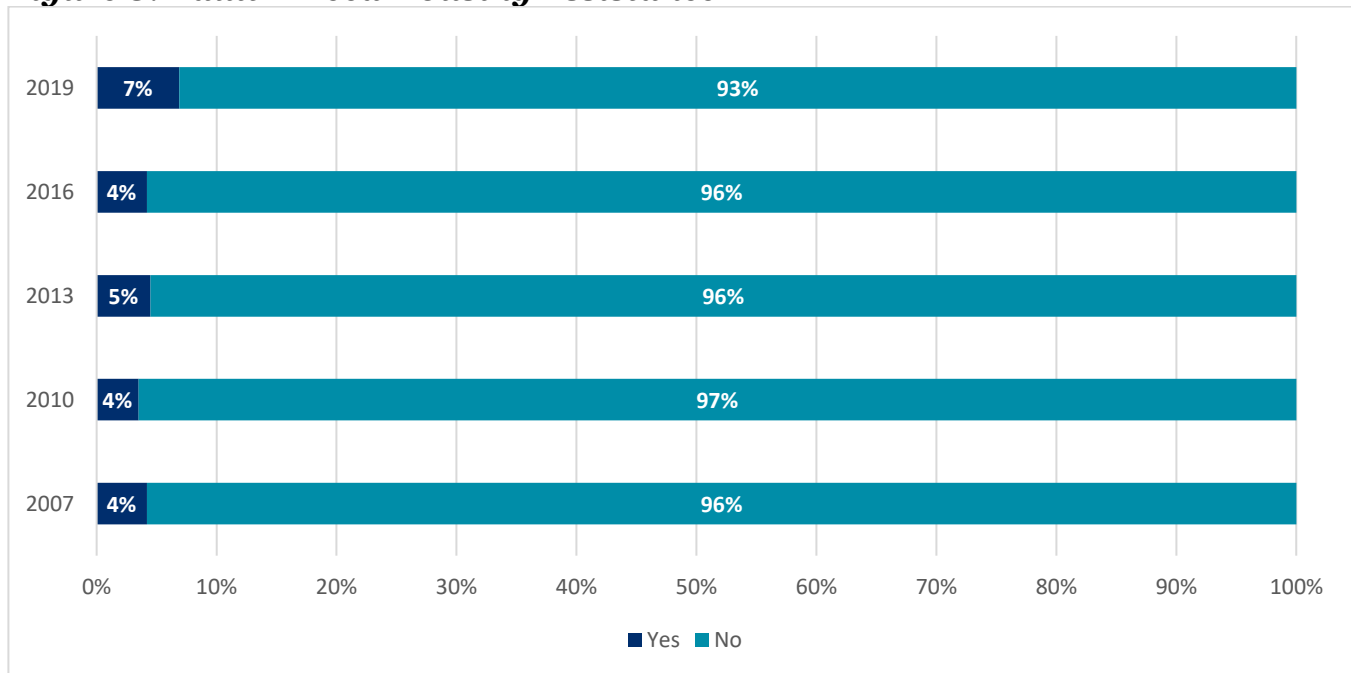
Overall

From 2007 to 2019, there has been a small increase in the percentage of residents needing help with housing.

Table 46. Adult – Need Housing Assistance

Need Housing Assistance	2007	2010	2013	2016	2019
Yes	4.2%	3.5%	4.5%	4.2%	6.9%
No	95.8%	96.5%	95.5%	95.8%	93.1%

Figure 8. Adult – Need Housing Assistance



Comparisons

Age Comparisons

Over the past years, the rate of residents in the ages 40 to 64 that need help with housing has been increasing from 2.7% in 2007 to 8.3% in 2019. From 2007 to 2013, the need in housing for residents aged 65 and older was slowly declining but started to increase again in 2016 and has

Table 47. Adult – Need Housing Assistance by Age

Age Group	2007	2010	2013	2016	2019
18-39	7.3%	6.5%	8.5%	4.6%	8.5%
40-64	2.7%	4.2%	5.0%	5.4%	8.3%
65+	2.3%	0.9%	0.7%	2.1%	3.2%

Geographic Comparisons

When comparing geography in the Coachella Valley, the Mid Valley has reported the least need in housing assistance each year.

Table 48. Adult – Need Housing Assistance by Geography

Geography	2007	2010	2013	2016	2019
West Valley	5.8%	4.5%	6.5%	4.7%	7.2%
Mid Valley	1.5%	1.4%	3.4%	2.3%	5.3%
East Valley	4.7%	5.5%	3.8%	5.4%	8.0%

Hispanic/Latino Comparisons

Need for housing assistance rose from 2016 to 2019 regardless of ethnicity, as illustrated in the table below. Consistently, the housing need is slightly higher for Hispanics/Latinos.

Table 49. Adult – Need Housing Assistance by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	5.7%	8.7%
Not Hispanic or Latino	3.0%	4.9%

Income Comparisons

Lower income levels demonstrate the most need in housing, specifically residents with income levels below \$19,999, although there was a brief downturn in 2013 and 2016.

Table 50. Adult – Need Housing Assistance by Income

Income Level	2007	2010	2013	2016	2019
\$0 - \$19,999	18.1%	17.4%	14.3%	9.1%	17.6%
\$20,000 - \$49,999	4.0%	2.8%	6.5%	3.6%	6.9%
\$50,000 - \$99,999	0.5%	*	1.8%	*	4.8%
\$100,000 or more	0.6%	*	*	*	0.6%

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

As illustrated below, residents with less than high school education demonstrate the most need for housing assistance. In 2013, there was a drop in housing need for residents with less than high school education, but this percent increased again in 2016.

Table 51. Adult – Need Housing Assistance by Education

Education Level	2007	2010	2013	2016	2019
Less than high school	8.3%	8.4%	6.7%	11.0%	9.9%
High school or GED	2.8%	4.7%	8.7%	3.7%	7.2%
Some college	6.1%	4.5%	2.2%	3.4%	6.9%
College	1.9%	1.5%	4.9%	1.6%	6.2%
Post-graduate	*	*	*	1.3%	4.9%

Note: Red asterisks represent a statistically unstable estimate.

Next, residents of the Coachella Valley were asked if they **needed rental assistance** in the past year.

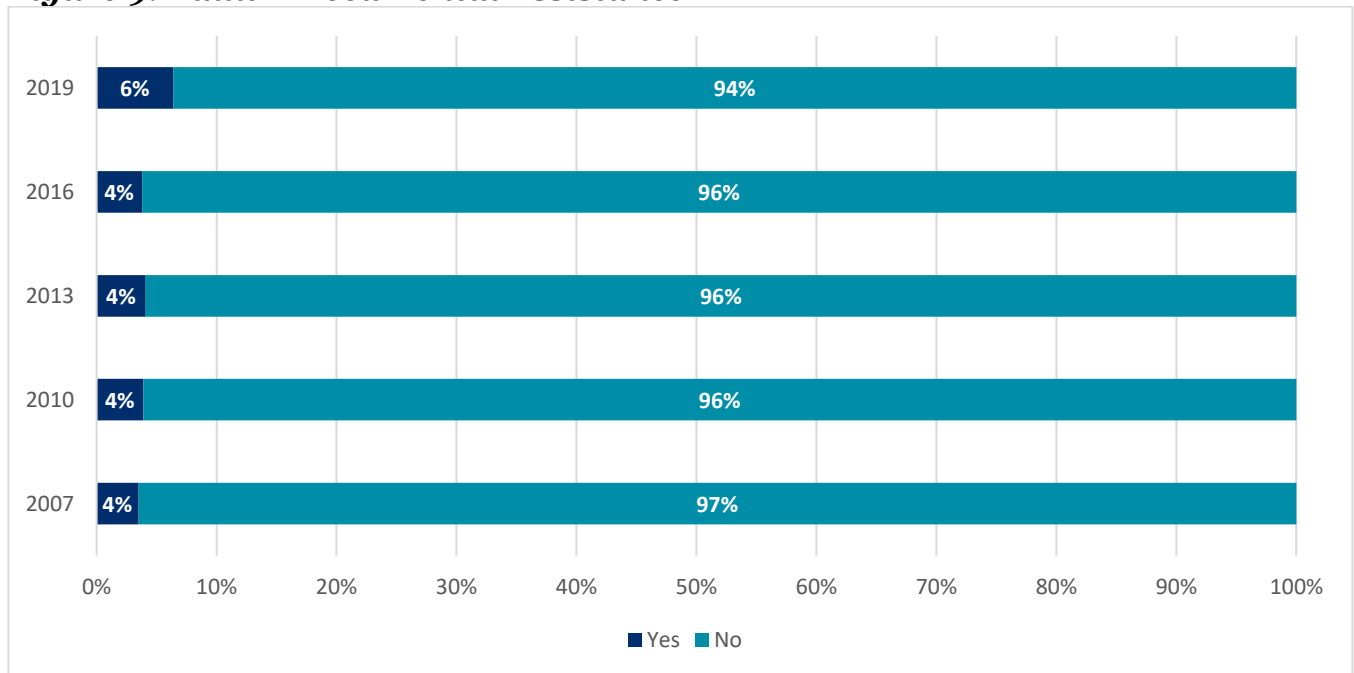
Overall

As seen below, the percentage of residents with a need in rental assistance gradually increased from 2007 to 2013. This percentage slightly decreased in 2016 but increased again in 2019.

Table 52. Adult – Need Rental Assistance

Need Rental Assistance	2007	2010	2013	2016	2019
Yes	3.5%	3.9%	4.1%	3.8%	6.4%
No	96.5%	96.1%	95.9%	96.2%	93.6%

Figure 9. Adult – Need Rental Assistance



Comparisons

Age Comparisons

In 2007, 2010, and 2019, the age group between 18 and 39 demonstrated the most need with rental assistance. However, in 2013 and 2019, residents aged 40 to 64 showed the most need.

Table 53. Adult – Need Rental Assistance by Age

Age Group	2007	2010	2013	2016	2019
18-39	6.7%	8.8%	4.9%	3.9%	10.3%
40-64	2.4%	3.8%	6.8%	5.0%	5.9%
65+	1.6%	1.1%	1.0%	1.8%	2.8%

Geographic Comparisons

Apart from the year 2016, it is apparent that the East Valley show the most need with rental assistance compared to adults in the West Valley and Mid Valley.

Table 54. Adult – Need Rental Assistance by Geography

Geography	2007	2010	2013	2016	2019
West Valley	3.2%	4.7%	3.2%	4.9%	7.5%
Mid Valley	1.2%	1.5%	3.9%	2.5%	3.8%
East Valley	7.9%	6.8%	5.4%	3.8%	7.8%

Hispanic/Latino Comparisons

From 2016 to 2019, there was a relatively small increase in rental assistance need from both Hispanic/Latino and non-Hispanic/Latino populations.

Table 55. Adult – Need Rental Assistance by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	4.7%	7.9%
Not Hispanic or Latino	3.0%	4.7%

Income Comparisons

From 2007 to 2016, there was a slight decrease in rental assistance need with families that have income levels up to \$19,999; however, this percentage increased to 14.3% in 2019.

Table 56. Adult – Need Rental Assistance by Income

Income Level	2007	2010	2013	2016	2019
\$0 - \$19,999	19.0%	18.8%	11.1%	9.5%	14.3%
\$20,000 - \$49,999	3.0%	2.3%	5.6%	3.6%	10.0%
\$50,000 - \$99,999	0.1%	*	1.1%	*	2.8%
\$100,000 or more	0.1%	*	*	*	*

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Throughout the years, residents with less than high school education had the greatest need with rental assistance.

Table 57. Adult – Need Rental Assistance by Education

Education Level	2007	2010	2013	2016	2019
Less than high school	9.3%	9.5%	10.1%	9.1%	9.3%
High school or GED	3.4%	4.9%	3.4%	3.2%	8.7%
Some college	3.2%	4.6%	5.3%	3.8%	7.0%
College	1.1%	1.9%	1.9%	*	4.4%
Post-graduate	*	*	*	2.1%	2.9%

Note: Red asterisks represent a statistically unstable estimate.

Next, participants were asked if they **needed financial assistance** in the past year.

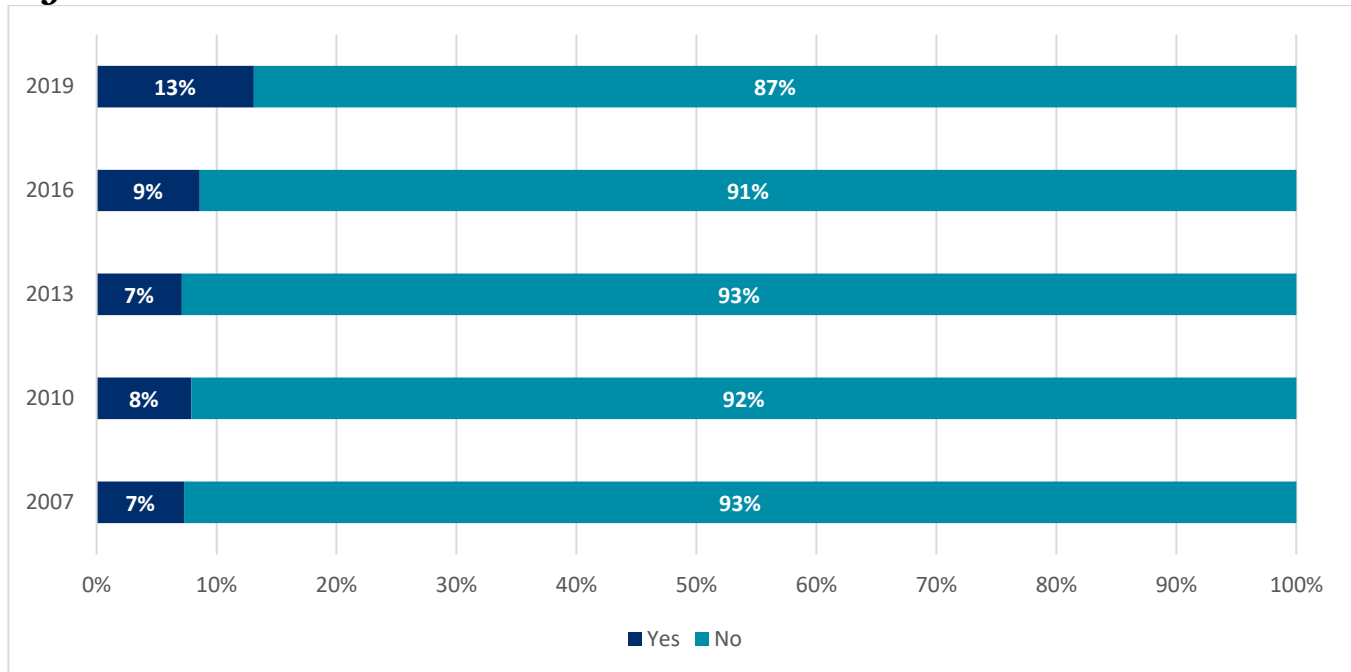
Overall

Since 2007, the percentage of residents in need of financial assistance almost doubled.

Table 58. Adult – Need Financial Assistance

Need Financial Assistance	2007	2010	2013	2016	2019
Yes	7.3%	7.9%	7.1%	8.6%	13.1%
No	92.7%	92.1%	92.9%	91.4%	86.9%

Figure 10. Adult – Need Financial Assistance



Comparisons

Age Comparisons

Varying changes have occurred in financial need by age group between 2007 and 2019. Notably, the rates of residents in need increased for all age groups and residents aged 18 to 39 illustrate the most need in comparison.

Table 59. Adult – Need Financial Assistance by Age

Age Group	2007	2010	2013	2016	2019
18-39	14.8%	14.1%	8.9%	10.7%	21.8%
40-64	5.0%	10.1%	11.3%	9.6%	12.7%
65+	2.4%	2.3%	1.9%	4.6%	4.6%

Geographic Comparisons

When comparing financial need over time, there has been a substantial increase in the need across all regions of the Coachella Valley. Most notably, the Mid Valley increased in need from 1.4% to 8.7% and the East Valley also almost doubled in need.

Table 60. Adult – Need Financial Assistance by Geography

Geography	2007	2010	2013	2016	2019
West Valley	10.5%	9.2%	8.0%	11.3%	14.4%
Mid Valley	1.4%	5.0%	6.2%	6.9%	8.7%
East Valley	8.9%	11.1%	7.6%	7.3%	16.1%

Hispanic/Latino Comparisons

While the percent of non-Hispanic/Latino population in need of financial assistance increased by 1.7%, the increase in the Hispanic/Latino population was even greater with a 7.1% increase.

Table 61. Adult – Need Financial Assistance by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	9.3%	16.4%
Not Hispanic or Latino	8.0%	9.7%

Income Comparisons

In 2013, there was a decrease in household incomes between \$0 to \$19,999 that need financial assistance, but this percentage rose the following years. Noticeably, incomes of \$50,000 to \$99,999 also rose from 1.4% in 2007 to 9.9% in 2019.

Table 62. Adult – Need Financial Assistance by Income

Income Level	2007	2010	2013	2016	2019
\$0 - \$19,999	19.8%	25.9%	13.8%	18.3%	23.9%
\$20,000 - \$49,999	12.6%	9.1%	13.3%	10.4%	22.1%
\$50,000 - \$99,999	1.4%	3.0%	3.5%	2.7%	9.9%
\$100,000 or more	0.1%	*	*	2.5%	1.7%

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Each year, about 11.0% to 15.0% of residents with less than high school education described a need for financial assistance. Additionally, the financial need for residents with a college education has grown substantially over time, from 2.8% in 2007 to 10.6% in 2019.

Table 63. Adult – Need Financial Assistance by Education

Education Level	2007	2010	2013	2016	2019
Less than high school	11.0%	15.2%	13.6%	11.0%	14.3%
High school or GED	9.2%	9.9%	7.4%	7.8%	15.0%
Some college	8.7%	11.0%	8.4%	10.8%	17.3%
College	2.8%	3.9%	4.3%	7.2%	10.6%
Post-graduate	3.2%	2.9%	3.5%	4.9%	6.4%

Next, participants were asked if they **needed utility assistance** in the past year.

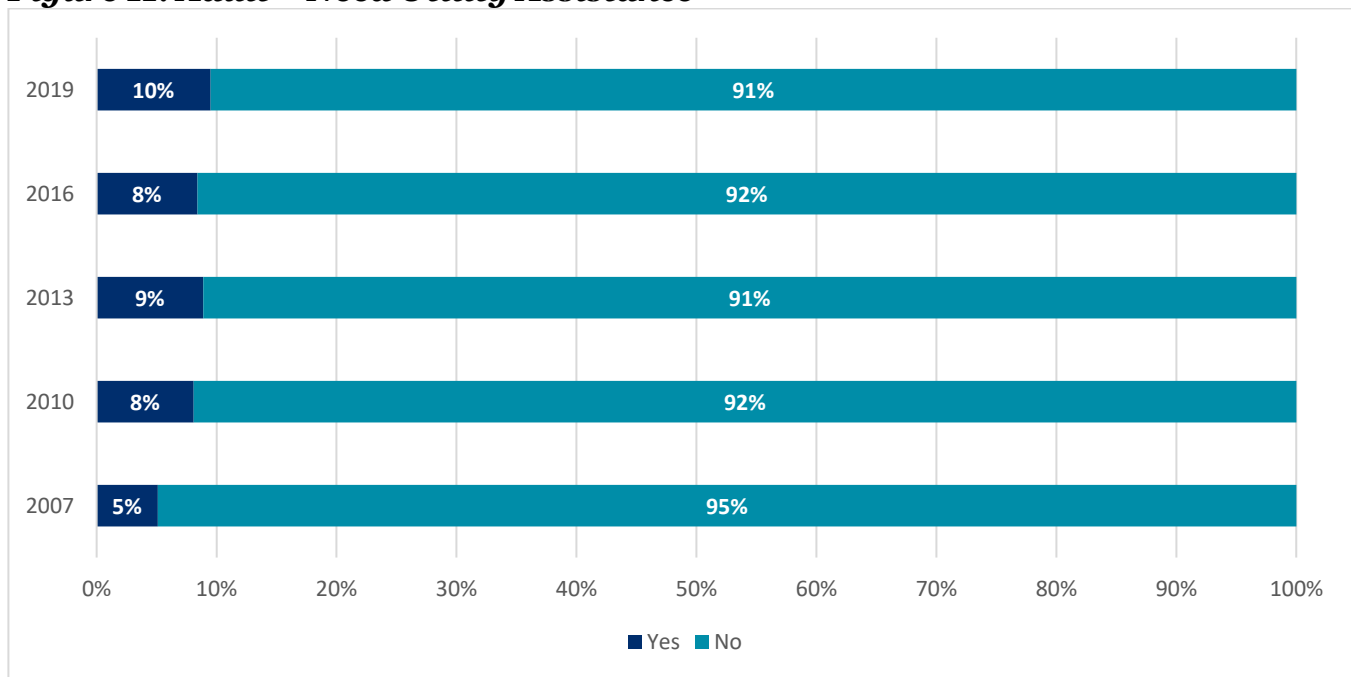
Overall

In 2007, a small portion of the residents answered that they need help with utility assistance (5.1%). Over the years, this percentage has grown but remains relatively low at 9.5%.

Table 64. Adult – Need Utility Assistance

Need Utility Assistance	2007	2010	2013	2016	2019
Yes	5.1%	8.1%	8.9%	8.4%	9.5%
No	94.9%	91.9%	91.1%	91.6%	90.5%

Figure 11. Adult – Need Utility Assistance



Comparisons

Age Comparisons

When measuring need based on age, it is apparent that residents 65 and older reported the least need. In 2010, there was spike in the rate of residents aged 18 to 39 describing a need with utility assistance. This need shifted in 2013 as residents aged 40 to 64 described a higher need that year. As of 2019, 12.1% of residents aged 40 to 64 and 8.3% of residents aged 18 to 39 report assistance with utilities.

Table 65. Adult – Need Utility Assistance by Age

Age Group	2007	2010	2013	2016	2019
18-39	6.7%	16.4%	7.7%	8.6%	8.3%
40-64	5.9%	7.6%	15.1%	9.5%	12.1%
65+	2.7%	3.8%	4.3%	6.5%	7.2%

Geographic Comparisons

Based on geography, most years reveal that the West Valley and East Valley have similar needs with utility assistance. In comparison, adults in Mid Valley reported a lower level of need.

Table 66. Adult – Need Utility Assistance by Geography

Geography	2007	2010	2013	2016	2019
West Valley	6.7%	11.6%	12.4%	11.3%	10.6%
Mid Valley	2.4%	4.7%	6.4%	8.1%	7.5%
East Valley	5.8%	8.7%	8.3%	5.8%	10.3%

Hispanic/Latino Comparisons

While the non-Hispanic/Latino community has shown a slight decrease in utility assistance, the Hispanic/Latino population has shown a small increase from 2016 to 2019.

Table 67. Adult – Need Utility Assistance by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	7.5%	9.9%
Not Hispanic or Latino	9.3%	8.9%

Income Comparisons

In 2010, there was a rise in the need for utility assistance in households with incomes up to \$19,999. Since then, the need for utility assistance from households with incomes up to \$19,999 has dropped but still remains at 18.5%.

Table 68. Adult – Need Utility Assistance by Income

Income Level	2007	2010	2013	2016	2019
\$0 - \$19,999	13.6%	27.0%	13.9%	19.7%	18.5%
\$20,000 - \$49,999	9.5%	10.1%	13.6%	11.7%	12.4%
\$50,000 - \$99,999	1.4%	2.2%	6.3%	*	9.0%
\$100,000 or more	0.1%	*	*	*	*

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

While some years show that residents with a less than high school education require the most need with utility assistance, other years illustrate that residents with a high school or some college education have the most need.

Table 69. Adult – Need Utility Assistance by Education

Education Level	2007	2010	2013	2016	2019
Less than high school	4.8%	11.7%	17.0%	12.9%	8.4%
High school or GED	7.6%	13.6%	8.7%	7.4%	10.1%
Some college	7.6%	9.7%	11.3%	10.2%	12.0%
College	1.7%	3.5%	4.4%	4.6%	8.6%
Post-graduate	1.1%	4.1%	5.7%	6.4%	6.5%

Next, participants were asked if they **needed transportation assistance** in the past year.

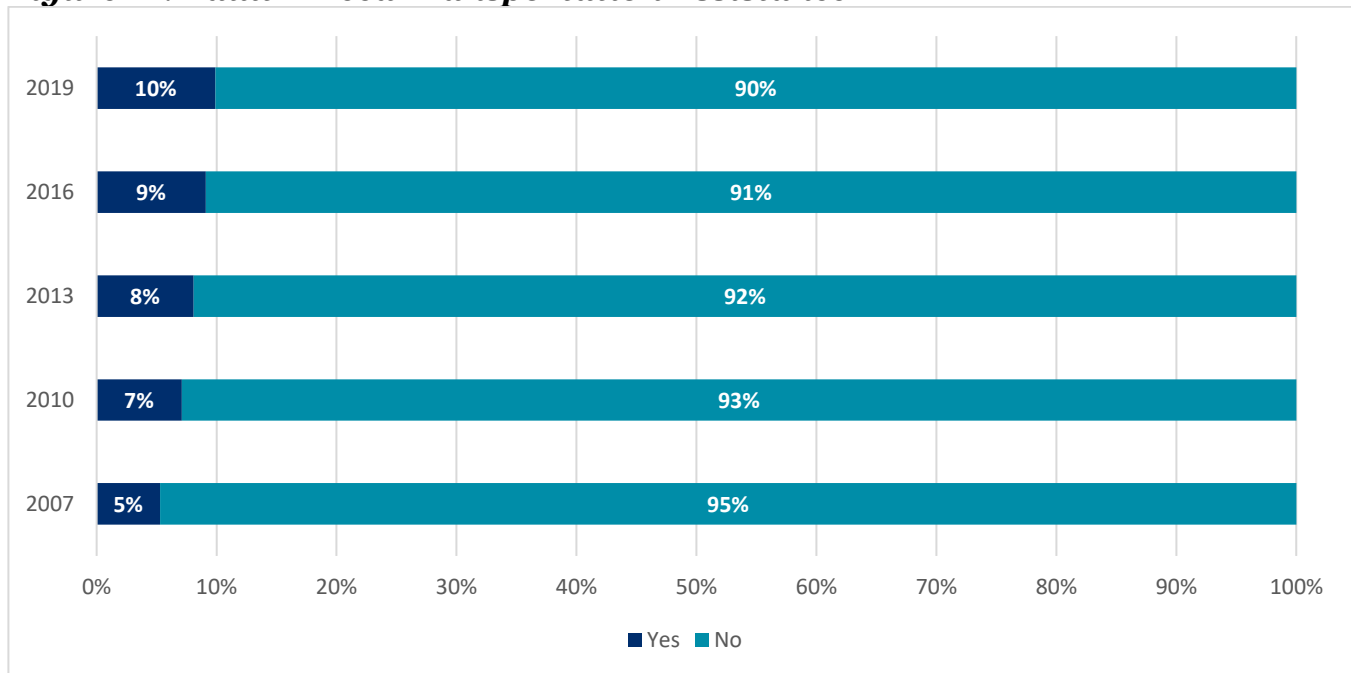
Overall

In 2007, a small percent of 5.3% residents described a need in transportation. Over the years, this percentage almost doubled to 9.9% in 2019.

Table 70. Adult – Need Transportation Assistance

Need Transportation Assistance	2007	2010	2013	2016	2019
Yes	5.3%	7.1%	8.1%	9.1%	9.9%
No	94.7%	92.9%	91.9%	90.9%	90.1%

Figure 12. Adult – Need Transportation Assistance



Comparisons

Age Comparisons

People between the ages 18 to 39 appear to have the most need in transportation; the transportation need among this group increased from 5.5% in 2007 to 15.8% in 2019.

Table 71. Adult – Need Transportation Assistance by Age

Age Group	2007	2010	2013	2016	2019
18-39	5.5%	10.7%	9.9%	11.2%	15.8%
40-64	3.9%	9.1%	10.3%	7.6%	8.3%
65+	5.9%	3.3%	4.7%	8.7%	5.9%

Geographic Comparisons

Over the years, there appear to be some changes in transportation need based on geography. In 2007, residents from west Coachella Valley illustrated more need in transportation than the rest of the Coachella Valley regions. However, by 2010, more residents from the east Coachella Valley answered to have a need in transportation. As of 2019, 13.2% of East Coachella Valley residents say they need help with transportation.

Table 72. Adult – Need Transportation Assistance by Geography

Geography	2007	2010	2013	2016	2019
West Valley	7.6%	8.1%	9.9%	9.3%	10.7%
Mid Valley	1.9%	4.0%	4.6%	5.9%	5.6%
East Valley	5.3%	10.9%	10.9%	11.9%	13.2%

Hispanic/Latino Comparisons

Notably, similar fractions of Hispanic/Latino and non-Hispanic/Latinos demonstrated a need in transportation in 2016. This changed in 2019; less non-Hispanic/Latinos needed help and more Hispanic/Latinos have transportation needs.

Table 73. Adult – Need Transportation Assistance by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	9.1%	12.0%
Not Hispanic or Latino	9.2%	7.7%

Income Comparisons

From 2007 to 2010, there was a notable increase in transportation need from families with incomes up to \$19,999. Since then, the percentage dropped and then increased again before dropping to 17.3% in 2019.

Table 74. Adult – Need Transportation Assistance by Income

Income Level	2007	2010	2013	2016	2019
\$0 - \$19,999	7.9%	22.3%	14.4%	20.8%	17.3%
\$20,000 - \$49,999	7.6%	7.9%	9.8%	6.9%	10.7%
\$50,000 - \$99,999	1.2%	2.5%	5.4%	3.4%	7.3%
\$100,000 or more	0.2%	*	2.2%	1.8%	3.0%

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Throughout the years, residents with a less than high school education level appear to have the most need in transportation. However, as of 2019, residents with a high school or GED education as well as residents with some college education also have transportation needs.

Table 75. Adult – Need Transportation Assistance by Education

Education Level	2007	2010	2013	2016	2019
Less than high school	8.8%	14.7%	18.3%	15.3%	12.7%
High school or GED	7.3%	9.5%	11.2%	10.4%	13.2%
Some college	4.6%	8.4%	8.1%	8.7%	10.8%
College	3.0%	3.8%	4.1%	5.4%	7.2%
Post-graduate	1.8%	2.1%	3.0%	5.5%	6.3%

Finally, participants were asked if they **needed home health care** in the past year.

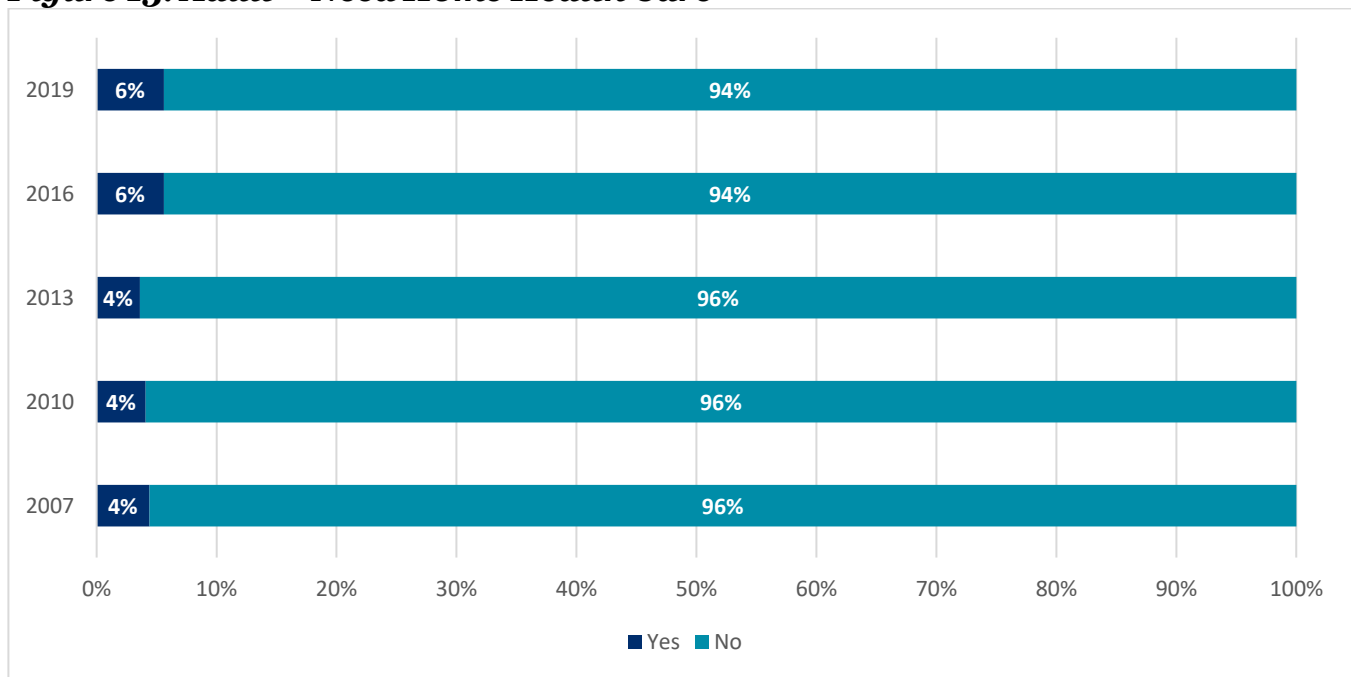
Overall

Since 2007, the population in need of home health care has been relatively stable, showing a slight increase of 1.2% from 2007 to 2019.

Table 76. Adult – Need Home Health Care

Need Home Health Care	2007	2010	2013	2016	2019
Yes	4.4%	4.1%	3.6%	5.6%	5.6%
No	95.6%	95.9%	96.4%	94.4%	94.4%

Figure 13. Adult – Need Home Health Care



Comparisons

Age Comparisons

In comparing age groups with a need for home health care, there does not seem to be drastic differences between them.

Table 77. Adult – Need Home Health Care by Age

Age Group	2007	2010	2013	2016	2019
18-39	6.7%	*	*	4.5%	6.1%
40-64	2.5%	5.4%	4.3%	5.4%	6.1%
65+	3.9%	4.4%	4.3%	7.2%	4.5%

Note: Red asterisks represent a statistically unstable estimate.

Geographic Comparisons

Home health care need has slightly varied by year. While the year 2016 shows that Mid Coachella Valley require the most help, they also reported the least need in comparison to the other regions in 2019.

Table 78. Adult – Need Home Health Care by Geography

Geography	2007	2010	2013	2016	2019
West Valley	5.9%	6.1%	4.0%	6.5%	6.7%
Mid Valley	2.6%	2.9%	4.4%	7.4%	3.9%
East Valley	4.0%	3.2%	2.2%	3.0%	6.3%

Hispanic/Latino Comparisons

While the need for help with home health care has dropped for non-Hispanic/Latino populations, the need almost doubled for the Hispanic/Latino population.

Table 79. Adult – Need Home Health Care by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	3.7%	6.3%
Not Hispanic or Latino	7.1%	4.9%

Income Comparisons

From 2007 to 2019, the need in home health care has slightly dropped for incomes up to \$19,999. On the contrary, this has slightly increased for incomes between \$20,000 to \$99,999.

Table 80. Adult – Need Home Health Care by Income

Income Level	2007	2010	2013	2016	2019
\$0 - \$19,999	11.4%	10.2%	5.8%	11.7%	7.9%
\$20,000 - \$49,999	5.7%	4.6%	4.0%	4.3%	8.3%
\$50,000 - \$99,999	2.1%	3.4%	2.7%	5.0%	4.4%
\$100,000 or more	1.1%	*	3.1%	3.4%	*

Note: Red asterisks represent a statistically unstable estimate.

Education Comparisons

Help with home health care has been gradually increasing for residents with a less than high school and also for those with a college education.

Table 81. Adult – Need Home Health Care by Education

Education Level	2007	2010	2013	2016	2019
Less than high school	1.9%	2.7%	2.2%	6.7%	6.3%
High school or GED	5.7%	5.5%	4.6%	3.0%	5.8%
Some college	7.4%	4.2%	3.2%	7.4%	5.9%
College	2.5%	3.1%	3.6%	7.4%	7.5%
Post-graduate	1.9%	4.8%	4.5%	2.0%	1.7%

Adult Poverty

Participants provided data on the number of people in their household in addition to the household income levels. Using this data, HARC was able to calculate poverty levels based on the 2019 Federal Poverty Level (FPL). FPL is used to measure eligibility for many programs, such as Medi-Cal/Medicaid, Head Start, federal student aid, supplemental Nutrition Assistance Program (SNAP, aka food stamps or CalFresh), and more.

Households that live “below the poverty line” are those whose income is less than 100% of the FPL.

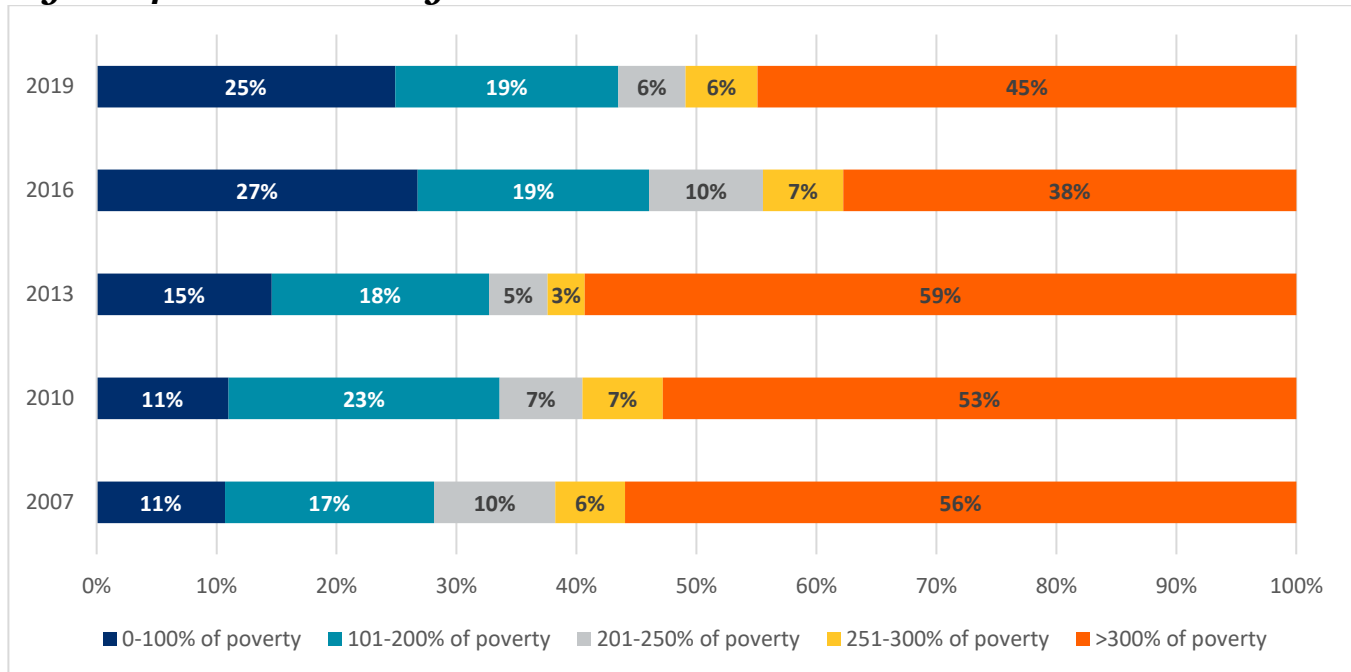
Overall

The trend shows that the percent of local adults living in poverty has increased over time, as illustrated in the table and chart below.

Table 82. Adult – Poverty Levels

FPL Category	2007	2010	2013	2016	2019
0-100% FPL	10.7%	11.0%	14.6%	26.8%	24.9%
101-200% FPL	17.4%	22.6%	18.1%	19.3%	18.6%
201-250% FPL	10.1%	6.9%	4.9%	9.5%	5.6%
251-300% FPL	5.8%	6.7%	3.1%	6.7%	6.0%
>300% FPL	55.9%	59.3%	37.8%	44.9%	

Figure 14. Adult – Poverty Levels



Poverty can be cut at any particular level; many choose to measure in four groups: 0 to 99% FPL, 100% to 199%, 200% to 299%, and over 300% FPL. The table below utilizes these cut-points rather than the cut-points generally used by HARC; it provides slightly less focused insight but is still extremely useful.

Overall, a greater percentage of adults in the Coachella Valley are living in poverty than in Riverside or California, as illustrated in the table below.

Table 83. Adult - Poverty Levels Across Regions

Geography	Poverty Level	2007	2013	2016	2019
Coachella Valley	0 to 99% FPL	10.7%	14.6%	26.8%	15.7%
	100% to 199% FPL	17.4%	18.1%	19.3%	17.7%
	200% to 299% FPL	15.9%	8.0%	16.2%	13.7%
	300% FPL or more	55.9%	59.3%	37.8%	52.9%
Riverside County	0 to 99% FPL	13.6%	11.4%	17.3%	17.8%
	100% to 199% FPL	17.6%	22.4%	22.6%	20.2%
	200% to 299% FPL	15.9%	18.9%	13.3%	18.6%
	300% FPL or more	53.0%	47.3%	46.8%	43.4%
California	0 to 99% FPL	13.9%	15.2%	17.5%	14.6%
	100% to 199%	16.9%	19.9%	18.7%	16.7%
	200% to 299%	13.8%	14.8%	13.4%	13.8%
	300% FPL or more	55.3%	50.1%	50.4%	54.9%

Note: Riverside County and California data are from the California Health Interview Survey (CHIS). No CHIS data was available for the year 2010, and thus, no comparisons are provided for that year.

Comparisons

Age Comparisons

From 2007 to 2010, about a third of the residents aged 18 to 39 have remained in 101-200% poverty level. However, in more recent years, more residents in the same age group have shifted to the 0-100% poverty level. On the contrary, majority of residents aged 65 and older are above the 300% poverty level.

Table 84. Adult – Poverty Level by Age

FPL Category	Age Group	2007	2010	2013	2016	2019
0-100% FPL	18-39	18.6%	24.3%	29.3%	37.7%	36.0%
	40-64	10.3%	9.0%	15.5%	27.2%	22.4%
	65+	3.2%	2.8%	2.6%	11.0%	16.6%
101-200% FPL	18-39	30.9%	35.2%	28.6%	25.7%	24.8%
	40-64	13.1%	24.6%	21.1%	17.8%	19.7%
	65+	8.7%	11.3%	6.8%	12.7%	10.3%
201-250% FPL	18-39	15.1%	12.3%	6.6%	11.0%	6.5%
	40-64	7.8%	5.1%	5.5%	6.8%	5.2%
	65+	7.8%	4.9%	3.2%	11.6%	5.1%
251-300% FPL	18-39	6.4%	4.3%	3.0%	7.0%	6.0%
	40-64	5.8%	6.2%	3.5%	5.1%	6.2%
	65+	5.2%	9.1%	2.8%	9.0%	5.8%
>300% FPL	18-39	29.0%	23.9%	32.5%	18.6%	26.8%
	40-64	62.9%	55.2%	54.5%	43.1%	46.5%
	65+	75.2%	72.0%	84.5%	55.7%	62.2%

Geographic Comparisons

Most Mid Valley adults live at or above 300% poverty level in relative economic stability. In contrast, there are a high percentage of adults living in poverty in West Valley and East Valley, as illustrated in the table below.

Table 85. Adult – Poverty Level by Geography

FPL Category	Geography	2007	2010	2013	2016	2019
0-100% FPL	West Valley	11.3%	9.6%	13.7%	25.9%	24.8%
	Mid Valley	2.2%	3.9%	9.2%	17.2%	11.1%
	East Valley	19.5%	25.1%	23.0%	36.3%	37.8%
101-200% FPL	West Valley	21.5%	23.8%	19.3%	21.5%	19.4%
	Mid Valley	4.6%	17.0%	13.4%	10.5%	12.1%
	East Valley	26.8%	30.5%	23.9%	24.8%	23.8%
201-250% FPL	West Valley	11.0%	9.1%	4.6%	10.3%	4.8%
	Mid Valley	7.1%	5.0%	3.6%	7.6%	5.7%
	East Valley	13.2%	6.5%	7.3%	10.2%	6.3%
251-300% FPL	West Valley	7.4%	8.0%	2.7%	7.7%	7.4%
	Mid Valley	3.9%	6.6%	2.5%	7.7%	5.7%
	East Valley	4.9%	4.7%	4.4%	4.8%	4.9%
>300% FPL	West Valley	48.7%	49.6%	59.7%	34.5%	43.7%
	Mid Valley	82.2%	67.5%	71.3%	57.0%	65.4%
	East Valley	35.6%	33.2%	41.3%	23.9%	27.3%

Hispanic/Latino Comparisons

More than half non-Hispanic/Latino live at or above 300% poverty level, while a high proportion of Hispanic/Latinos live at the 0-100% poverty level.

Table 86. Adult – Poverty Level by Ethnicity

FPL Category	Ethnicity	2016	2019
0-100% FPL	Hispanic or Latino	41.8%	39.1%
	Not Hispanic or Latino	16.1%	9.5%
101-200% FPL	Hispanic or Latino	28.2%	24.2%
	Not Hispanic or Latino	13.0%	12.4%
201-250% of poverty	Hispanic or Latino	9.6%	5.2%
	Not Hispanic or Latino	9.4%	6.0%
201-250% FPL	Hispanic or Latino	5.2%	5.6%
	Not Hispanic or Latino	7.9%	6.5%
>300% of poverty	Hispanic or Latino	15.3%	26.0%
	Not Hispanic or Latino	53.6%	65.7%

Income Comparisons

As income is a component of the calculation for poverty, it is not used to compare in this section.

Education Comparisons

When examining poverty levels by education, over the years, the percentage of residents with a less than high school education that are at the 0-100% poverty level has been increasing – approximately 57.1% in 2019. On the contrary, residents with higher education levels are more likely to be above 300% of the poverty level.

Table 87. Adult – Poverty Level by Education

FPL Category	Education Level	2007	2010	2013	2016	2019
0-100% FPL	Less than high school	38.3%	36.6%	31%	56%	57.1%
	High school or GED	9.6%	14.4%	29.3%	32.1%	42.1%
	Some college	7.5%	10.9%	10.8%	29.1%	19.7%
	College	2.0%	3.5%	9.1%	12.7%	13.9%
	Post-graduate	*	*	*	6.1%	3.5%
101-200% FPL	Less than high school	31.4%	46.5%	31.8%	31%	27.2%
	High school or GED	30.2%	35.2%	22.5%	29.1%	23.4%
	Some college	13.8%	25.7%	17.3%	18.1%	22.4%
	College	5.7%	8.7%	13.7%	12.5%	12.9%
	Post-graduate	3.4%	8.7%	10.9%	7.3%	8.5%
201-250% FPL	Less than high school	11.7%	3.4%	7.9%	3.9%	*
	High school or GED	14.5%	10.5%	5.0%	11.8%	4.1%
	Some college	12.1%	8.2%	7.1%	10.6%	9.5%
	College	4.6%	7.1%	1.4%	12.4%	5.2%
	Post-graduate	5.2%	1.1%	4.2%	6.6%	3.1%
251-300% FPL	Less than high school	7.9%	6.2%	3.0%	*	*
	High school or GED	5.7%	8.0%	3.7%	8.1%	*
	Some college	8.3%	7.9%	3.0%	8.6%	10.8%
	College	2.4%	5.7%	3.3%	6.6%	8.0%
	Post-graduate	3.1%	5.0%	2.2%	8.4%	3.6%
>300% FPL	Less than high school	10.7%	7.3%	26.3%	8.5%	10.9%
	High school or GED	39.9%	31.8%	39.5%	18.9%	29.7%
	Some college	58.3%	46.3%	61.8%	33.6%	37.6%
	College	85.3%	74.9%	72.5%	55.8%	60.0%
	Post-graduate	88.0%	83.5%	81.8%	71.6%	81.3%

Child Results

Child Demographics

It is important to note here that children do not actually participate in the survey, but rather the questions are answered by an adult determined to be the most knowledgeable about the selected child. For each survey cycle, the vast majority of adults answering questions for their children are parents of the child. Sometimes, however, this person is an adoptive parent, grandparent, stepparent, etc. For brevity, the adult respondent will be referred to as the parent/guardian throughout the narratives.

Gender

The distribution of male and female children has not substantially changed over the years in the Coachella Valley; this is partially due to the weighting. About half of children are males and the remaining half are females.

Table 88. Child Gender

Gender	2007	2010	2013	2016	2019
Male	56.6%	54.7%	48.6%	51.0%	50.7%
Female	43.4%	45.3%	51.4%	49.0%	49.3%

Age

Likewise, the percentage of children ages 0-5 and 6-17 has not substantially changed from 2007 to 2019.

Table 89. Child Age

Age Group	2007	2010	2013	2016	2019
0-5	31.5%	33.7%	35.7%	31.7%	37.6%
6-17	68.5%	66.3%	64.3%	68.3%	62.4%

Race/Ethnicity

From 2007 to 2013, race and ethnicity were assessed in a single question. However, from 2016 to 2019, HARC began asking questions pertaining to race and ethnicity using the same protocol as the U.S. Census, which is two separate questions.

Early measures of race/ethnicity illustrated that most local children are Hispanic/Latino, as illustrated in the table below.

Table 90. Child Race/Ethnicity – 2007 - 2013

Race	2007	2010	2013
White/Caucasian	23.8%	19.2%	19.9%
Black/African American	5.6%	6.0%	6.2%
Asian	1.1%	1.6%	1.4%
Native Hawaiian or Other Pacific Islander	0.2%	1.4%	0.0%
American Indian/Alaska Native	1.1%	2.1%	0.7%
Hispanic/Latino	67.9%	65.2%	64.4%
Other	0.2%	4.5%	7.5%

From 2016 to 2019, there was a substantial change in the percentage of children who are Hispanic/Latino, as illustrated below.

Table 91. Child Ethnicity – 2016 -2019

Ethnicity	2016	2019
Hispanic/Latino	76.9%	51.9%
Not Hispanic/Latino	23.1%	48.1%

From 2016 to 2019, there was a substantial change in the percentage of children who are White. That is, about 51.4% in 2016 were White/Caucasian, while about 66.6% were White/Caucasian in 2019. Conversely, there was a substantial drop in the percentage of children who are other, from 2016 (42.0%) to 2019 (25.1%).

Table 92. Child Race – 2016 -2019

Race	2016	2019
White/Caucasian	51.4%	66.6%
Black/African American	3.0%	3.2%
Asian	2.7%	1.5%
American Indian/Alaska Native	0.8%	3.6%
Other	42.0%	25.1%

Household Income

From 2007 to 2019, income levels have changed. Specifically, the percentage of children living in households with incomes of \$20,000 to \$49,999 decreased from 55.2% in 2007 to 25.0% in 2019. Additionally, the percentage of children living in homes within \$100,000 or more of household income increased from 11.5% in 2007 to 35.5% in 2019.

Table 93. Child Household Income

Income Level	2007	2010	2013	2016	2019
\$0 to \$19,999	16.8%	24.8%	31.4%	24.5%	18.6%
\$20,000 to \$49,999	55.2%	50.6%	44.5%	37.8%	25.0%
\$50,000 to \$99,999	16.4%	18.5%	15.9%	19.4%	20.9%
\$100,000 or more	11.5%	6.0%	8.2%	18.4%	35.5%

Geography

In 2007, about half of children lived in West Valley; this shifted in 2010, where most children lived in East Valley. Like the geographic distribution of adults, this may represent an actual shift of the population (e.g., where children actually live) but is more likely to represent a shift in survey participants (e.g., better East Valley outreach over the years has led to a more representative sample in that geography).

Table 94. Child Geography

Gender	2007	2010	2013	2016	2019
West Valley	49.2%	28.6%	32.0%	25.2%	28.2%
Mid Valley	12.5%	22.6%	18.9%	19.5%	31.1%
East Valley	38.3%	48.8%	49.1%	55.3%	40.6%

Child Food Insecurity

Parents/guardians were asked, “In the last 12 months, did you ever **cut the size of or skip meals** for (child’s name) or any of the children in the household because there wasn’t enough money for food?”

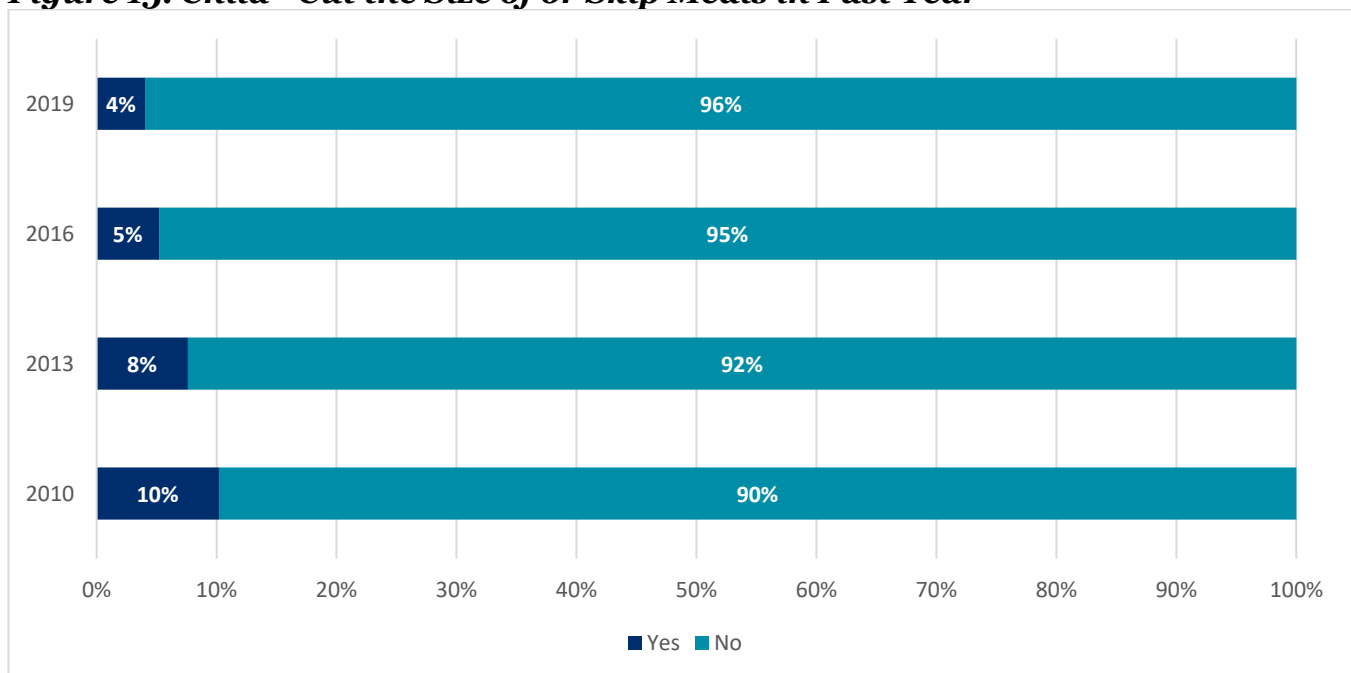
Overall

Food insecurity—as measured by the percent of children who had to cut meals or skip meals—has steadily decreased since the question was first asked in 2010, as illustrated in the table and chart below.

Table 95. Child - Cut the Size of or Skip Meals in Past Year

Cut the Size of or Skip Meals	2010	2013	2016	2019
Yes	10.2%	7.6%	5.2%	4.1%
No	89.8%	92.4%	94.8%	95.9%

Figure 15. Child - Cut the Size of or Skip Meals in Past Year



Comparisons

Age Comparisons

As illustrated below, children that have the size of their meals cut or skipped are more likely to be aged 6 to 17. However, this percentage has been declining.

Table 96. Child - Cut the Size of or Skip Meals by Age

Age Group	2010	2013	2016	2019
0-5	*	*	*	3.7%
6-17	14.1%	9.0%	7.2%	4.4%

Note: Red asterisks represent a statistically unstable estimate.

Geographic Comparisons

Over the years, the percentage of children skipping meals in all regions of Coachella Valley have been slightly declining.

Table 97. Child - Cut the Size of or Skip Meals by Geography

Geography	2010	2013	2016	2019
West Valley	10.4%	6.8%	7.6%	*
Mid Valley	*	5.2%	*	*
East Valley	11.0%	9.1%	4.8%	5.0%

Note: Red asterisks represent a statistically unstable estimate.

Hispanic/Latino Comparisons

The percentage of children cutting the size of or skipping meals based on ethnicity has remained unvaried from 2016 to 2019.

Table 98. Child - Cut the Size of or Skip Meals by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	6.4%	6.2%
Not Hispanic or Latino	*	*

Note: Red asterisks represent a statistically unstable estimate.

Income Comparisons

As seen below, the percentage of children that cut the size of or skip meals in households with incomes between \$20,000 to \$49,000 has been declining. Similarly, the rate of children that cut the size of or skip meals in households with incomes up to \$19,999 had been declining until 2019, when the percentage increased.

Table 99. Child - Cut the Size of or Skip Meals by Income

Income Level	2010	2013	2016	2019
\$0 - \$19,999	18.8%	12.4%	7.4%	14.7%
\$20,000 - \$49,999	12.5%	8.5%	7.7%	*
\$50,000 - \$99,999	*	*	*	*
\$100,000 or more	*	*	*	*

Note: Red asterisks represent a statistically unstable estimate.

For children who had to cut the size of their meals or skip meals in the past year, parents/guardians were then asked **how often this occurred**.

Overall

The frequency of children cutting the size of or skipping meals has remained unvaried, with the exception of 2016. In 2016, there was a significant decline of parents reporting that their children cut the size of or skipped meals “almost every month”.

Table 100. Child - Frequency of Cutting the Size of or Skipping Meals

Frequency	2010	2013	2016	2019
Almost every month	21.2%	21.8%	*	24.9%
Some months but not every month	49.6%	42.5%	59.3%	47.9%
Only one or two months	29.2%	35.7%	36.1%	*

Note: Red asterisks represent a statistically unstable estimate.

Comparisons

No further comparisons are made for this variable because the sample sizes were too small; virtually every estimate was statistically unstable.

Parents/guardians were asked whether in the past year they have **spent less money on food because they needed to prioritize other basics needs**, such as healthcare, housing, transportation, or utilities.

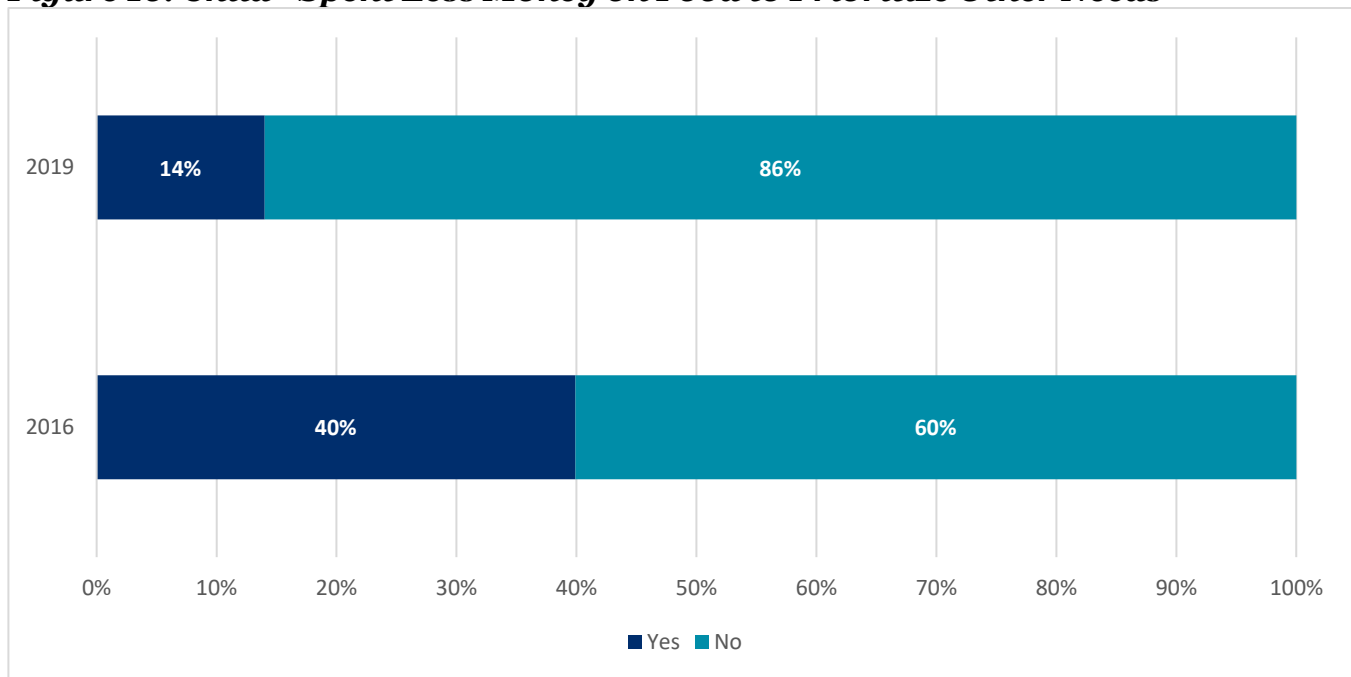
Overall

From 2016 to 2019, the need to spend less money on food decreased substantially, as illustrated in the table and chart below.

Table 101. Child - Spent Less Money on Food to Prioritize Other Needs

Spend Less Money on Food	2016	2019
Yes	39.9%	14.0%
No	60.1%	86.0%

Figure 16. Child - Spent Less Money on Food to Prioritize Other Needs



Comparisons

Age Comparisons

Spending less money on food to prioritize other basic needs was more common for older children in 2016, but age groups were relatively similar in 2019.

Table 102. Child - Spend Less Money on Food by Age

Age Group	2016	2019
0-5	25.4%	14.2%
6-17	53.6%	13.9%

Geographic Comparisons

The need to spend less money on food to prioritize other basic needs was most common in Mid Valley in 2016; this shifted to East Valley by 2019.

Table 103. Child - Spend Less Money on Food by Geography

Geography	2016	2019
West Valley	42.6%	11.3%
Mid Valley	50.0%	5.7%
East Valley	34.9%	22.2%

Hispanic/Latino Comparisons

From 2016 to 2019, both Hispanic/Latino and non-Hispanic/Latino populations indicated a substantial decrease in need to spend less money on food.

Table 104. Child - Spend Less Money on Food by Ethnicity

Ethnicity	2016	2019
Hispanic or Latino	40.2%	18.6%
Not Hispanic or Latino	39.4%	9.1%

Income Comparisons

Not surprisingly, children in homes with an annual household income of over \$100,000 are less likely to need to restrict spending on food to prioritize other basic needs; this has stayed true over time.

Table 105. Child - Spend Less Money on Food by Income

Income Level	2016	2019
\$0 - \$19,999	41.4%	21.6%
\$20,000 - \$49,999	38.3%	19.8%
\$50,000 - \$99,999	*	15.6%
\$100,000 or more	*	*

Note: Red asterisks represent a statistically unstable estimate.

Child Poverty

Participants provided data on the number of people in their household in addition to the household income levels. Using this data, HARC was able to calculate poverty levels based on the 2019 Federal Poverty Level (FPL).

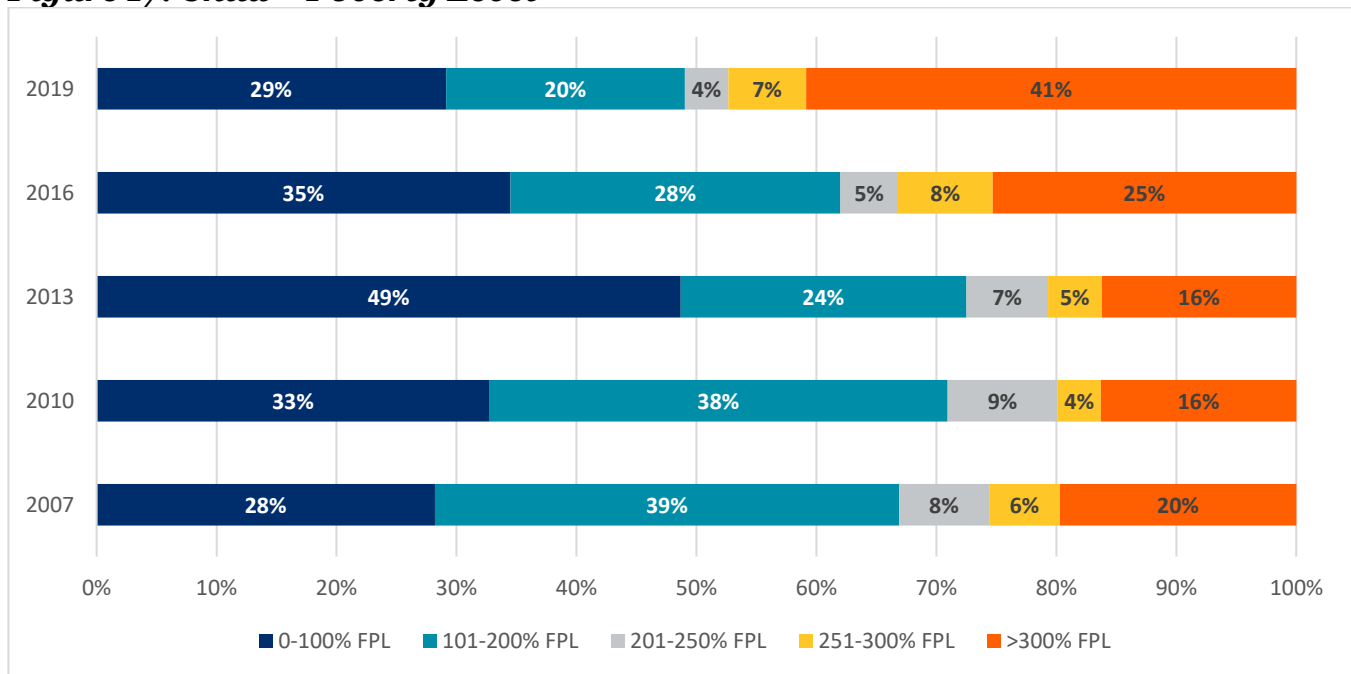
Overall

In 2019, there was an increase in children’s families living above the 300% poverty level, with a rate of 40.8%. On the contrary, the rate of children’s families living at the 101-200% poverty level has been declining.

Table 106. Child – Poverty Levels

Federal Poverty Level	2007	2010	2013	2016	2019
0-100% FPL	28.2%	32.8%	48.7%	34.5%	29.1%
101-200% FPL	38.7%	38.2%	23.8%	27.5%	19.9%
201-250% FPL	7.5%	9.2%	6.8%	4.8%	3.6%
251-300% FPL	5.9%	3.6%	4.5%	7.9%	6.5%
>300% FPL	19.7%	16.3%	16.2%	25.3%	40.8%

Figure 17. Child – Poverty Level



In comparison with Riverside County, more Coachella Valley children live at the 0-100% poverty level and less live above the 300% poverty level. Similarly, in comparison with the state of California, there are more families living in lower poverty levels than in California.

Table 107. Child - Federal Poverty Level Across Regions

Geography	Poverty Level	2007	2013	2016	2019
Coachella Valley	0 to 99% FPL	28.2%	48.7%	34.5%	29.1%
	100% to 199% FPL	38.7%	23.8%	27.5%	19.9%
	200% to 299% FPL	13.4%	11.3%	12.7%	10.1%
	300% FPL or more	19.7%	16.2%	25.3%	40.8%
Riverside County	0 to 99% FPL	14.8%	16.6%*	22.6%*	17.6%
	100% to 199% FPL	24.9%	23.8%	25.8%*	15.0%
	200% to 299% FPL	15.9%	16.1%	7.3%*	17.6%
	300% FPL or more	44.3%	43.5%	44.3%	49.8%
California	0 to 99% FPL	20.5%	22.4%	27.6%	16.1%
	100% to 199%	20.0%	24.1%	20.4%	20.2%
	200% to 299%	13.2%	12.8%	10.8%	11.7%
	300% FPL or more	46.2%	40.8%	41.2%	52.0%

Note: Riverside County and California data are from the California Health Interview Survey (CHIS). No CHIS data was available for the year 2010, and thus, no comparisons are provided for that year.

Comparisons

Age Comparisons

When observing age, the majority of children’s families live in the 0-200% poverty levels, regardless of age. In more recent years, there has been a large increase of children’s families of all ages now living at or above the 300% of poverty level.

Table 108. Child - Federal Poverty Level by Age

Federal Poverty Level	Age Group	2007	2010	2013	2016	2019
0-100% FPL	0-5	25.0%	34.0%	49.6%	41.2%	25.8%
	6-17	29.7%	32.2%	48.2%	31.7%	31.2%
101%-200% FPL	0-5	43.8%	38.6%	17.7%	32.3%	22.5%
	6-17	36.4%	37.9%	27.3%	25.5%	18.3%
201-250% FPL	0-5	8.5%	7.0%	*	*	4.2%
	6-17	7.1%	10.3%	7.5%	5.9%	3.2%
251-300% FPL	0-5	7.4%	*	7.0%	4.9%	6.9%
	6-17	5.2%	2.5%	3.2%	9.1%	6.3%
>300% FPL	0-5	15.3%	14.6%	20.6%	19.1%	40.6%
	6-17	21.6%	17.2%	13.7%	27.9%	41.0%

Note: Red asterisks represent a statistically unstable estimate.

Geographic Comparisons

In 2013, there was an increase in the proportion of Western Coachella Valley children living in households with lower poverty levels, illustrating half of the West Coachella Valley to live at 0-100% poverty level. By 2019, about a third of the Western Coachella Valley children were living above the 300% poverty level, slightly more than one-third living at 0-100% poverty, and the remainder of children distributed in between.

Table 109. Child - Federal Poverty Level by Geography

Federal Poverty Level	Geography	2007	2010	2013	2016	2019
0-100% of poverty	West Valley	32.2%	28.5%	51.0%	32.7%	39.0%
	Mid Valley	11.6%	6.4%	24.7%	12.3%	13.2%
	East Valley	28.6%	47.6%	56.5%	44.6%	34.3%
101-200% of poverty	West Valley	43.7%	55.9%	27.4%	26.2%	15.9%
	Mid Valley	23.5%	29.4%	18.3%	22.6%	9.2%
	East Valley	37.9%	32.8%	23.7%	30.1%	31.0%
201-250% of poverty	West Valley	7%	4.9%	9%	6.7%	*
	Mid Valley	4.6%	20.7%	10.7%	*	*
	East Valley	9.1%	6.1%	3.8%	5.0%	6.1%
251-300% of poverty	West Valley	2.8%	3.4%	*	8.5%	8.7%
	Mid Valley	6.8%	*	*	*	7.8%
	East Valley	9.2%	2.1%	5%	6.2%	4.0%
>300% of poverty	West Valley	14.3%	7.3%	9.7%	26%	34.0%
	Mid Valley	53.4%	36.5%	40.2%	51.4%	68.4%
	East Valley	15.2%	11.4%	11%	14.2%	24.6%

Note: Red asterisks represent a statistically unstable estimate.

Hispanic/Latino Comparisons

Two noticeable trends seen below are that the Hispanic/Latino population living at 101-200% poverty level decreased by 10.0% from 2016 to 2019. In addition, the Hispanic/Latino population living above 300% poverty level increased by 10.0% from 2016 to 2019.

Table 110. Child - Federal Poverty Level by Ethnicity

Federal Poverty Level	Ethnicity	2016	2019
0-100% of poverty	Hispanic or Latino	40.8%	45.9%
	Not Hispanic or Latino	15.2%	12.2%
101-200% of poverty	Hispanic or Latino	32.4%	22.8%
	Not Hispanic or Latino	14.1%	17%
201-250% of poverty	Hispanic or Latino	4.3%	3.5%
	Not Hispanic or Latino	6.8%	3.7%
251-300% of poverty	Hispanic or Latino	7.2%	2.5%
	Not Hispanic or Latino	7.5%	10.6%
>300% of poverty	Hispanic or Latino	15.4%	25.2%
	Not Hispanic or Latino	56.4%	56.5%

Income Comparisons

As income is a component of poverty, this comparison is not made.

Conclusion

Overview

This report covered socioeconomic needs, including food security, need for assistance (e.g., housing assistance, utility assistance, etc.), and poverty. Each topic was analyzed by demographic and socioeconomic characteristics such as age, geography, ethnicity, education, and household income characteristics

Adult Changes

Since 2007, there have been a few changes to food security, social and economic needs, and poverty in the Coachella Valley. In regard to food security, the rate of residents reporting to spend less money on food in order to prioritize other basic needs has substantially decreased from 54.0% in 2016 to 21.3% in 2019.

There has been an increase in need for assistance among our community across several different types of assistance. For instance, since 2007, there has been an increase in adults reporting to need food assistance and financial assistance. More differences can be seen based on demographics; for example, adults aged 18 to 39 show the most need with financial assistance, rental assistance, and transportation. In addition, households with lower incomes illustrate higher need. For example, one quarter of adults with incomes less than \$20,000 reported a high need in food assistance.

The percent of Coachella Valley adults living in poverty or near-poverty has increased over the years. Local adults are more likely to be living in poverty than those in Riverside County or California as a whole.

Child Changes

Food security for children has been improving over the years. Less parents are reporting to cut the size of or skip meals for the child, and the rate of parents needing to spend less money on food has significantly dropped (39.9% in 2016 to 14.0% in 2019). Fortunately, the percentage of children that do not eat for a whole day because there was not enough money to buy food has remained low across all surveys.

The percent of local children living in poverty or near-poverty has gradually improved over time. However, Coachella Valley children are more likely to be living in poverty than children in the broader regions of Riverside County and California.

Our hope is that by more closely examining the local data on socioeconomic needs that we can begin to identify inequities and make efforts to minimize these inequities. People should not experience subpar quality of life simply because they live in a particular geographic region, earn a certain amount of money, or belong to a certain racial or ethnic group. This report is one step closer towards a widespread, healthy Coachella Valley community.