



Agency Data Profile

Community Needs Assessment



Downeast Community Partners Profile



About Downeast Community Partners

Downeast Community Partners (DCP) was formed in 2017 with the merging of two of the most venerable organizations in the region, Child and Family Opportunities and the Washington Hancock Community Agency. With a mission to improve the quality of life and reduce the impact of poverty in Downeast communities, DCP is committed to creating and delivering services and programs that treat community members with dignity and compassion and offer them the possibility of achieving their goals and dreams.

Mission

Downeast Community Partners' mission is to improve the quality of life and reduce the impact of poverty in Downeast communities.

Vision

Downeast Community Partners is a catalyst for improving life in Downeast Maine.

Values

Dignity. Compassion. Possibility.

Services Offered by Downeast Community Partners

Children's Education

Early Care and education programs such as Head Start, Early Head Start, and Family Futures Downeast help provide childcare, meals, education, and more to children and families in Hancock and Washington County.

Elder Services

Our day program, called Friendship Cottage, provides a place for elders to spend time during the day and where they can still feel integrated into our community. At Home provides support for seniors wanting to maintain independent living in their current home by installing safety railings, delivering meals and medications, and more.

House and Home Services

We have multiple programs that help people pay their rent and utility bills, access and pay for heating services during the winter, as well as provide home repairs and weatherization services. We also provide heating system repair and replacement, tank and pipe replacement, and mortgage and loan intervention and counseling.

Transportation

Transportation assistance is offered for doctors' appointments, grocery shopping, and more. Downeast Community Partners has a fleet of vans and cars dedicated to transporting people in our community to and from vital destinations.

Financial Services

Downeast Community Partners provides tax preparation services as well as general Financial Coaching. We also help with mortgages, obtaining loans, and family development accounts.

Supportive Services

We also have programs that are based more on coaching and providing knowledge to people or families in need. Our Whole Family Coaching program aims to help families succeed and reach their goals. We also have nursing services as well as maternal and child health services. We also provide pantry food boxes to people and families in need.

Environmental Scan

The following tables provide an overview of the community that Downeast Community Partners (DCP) serves in their service area. For more detailed statewide data by county, please see the full 2021 MeCAP Statewide Community Needs Assessment.

Figure 1: Social Vulnerability Index

| Measure | United States | Maine | Hancock County | Washington County |
|--|---------------|-----------|----------------|-------------------|
| Population | 324,697,795 | 1,335,492 | 54,601 | 31,491 |
| Median Age | 38.1 | 44.7 | 48.8 | 48.1 |
| Below Poverty | 13.4% | 11.8% | 10.8% | 18.9% |
| Median Household Income | \$62,843 | \$57,918 | \$57,178 | \$41,347 |
| Age 65+ | 15.6% | 20.0% | 24.1% | 23.7% |
| Age 17 or Younger | 22.6% | 18.9% | 17.3 | 19% |
| Unemployment (July 2021) | 5.4% | 5.0% | 4.5% | 6.7% |
| Households with Disability | 12.6% | 16.0% | 14.6% | 22.5% |
| Single Parent Household | 14.0% | 21% | 21% | 23% |
| Speak English less than “very well” | 8.4% | 1.5% | 0.8% | 1.1% |
| Housing Units - Mobile Homes % | 6.2% | 9.5% | 19.3% | 29.3% |
| No Vehicle | 8.6% | 7.1% | 5.6% | 8.9% |

SOURCE: American Community Survey, 2019 5-Year Estimates; 2021 County Health Rankings

Figure 2: Age and Demographics

| Measure | United States | Maine | Hancock County | Washington County |
|--|---------------|-------|----------------|-------------------|
| Under 5 Years | 6.1% | 4.8% | 4.4% | 4.7% |
| 5 to 9 Years | 6.2% | 5.2% | 5.0% | 4.9% |
| 10 to 19 | 12.9% | 11.3% | 9.7% | 11.7% |
| 20 to 34 | 20.7% | 17.5% | 15.7% | 14.5% |
| 35 to 54 | 25.6% | 25.3% | 24.0% | 23.3% |
| 55 to 64 | 12.9% | 15.7% | 17.1% | 17.0% |
| 65+ | 15.6% | 20.0% | 24.1% | 23.7% |
| Race and Ethnicity | | | | |
| White alone, Not Hispanic or Latino | 60.7% | 98.3% | 97.1% | 92.9% |
| Hispanic or Latino | 18.0% | 1.7% | 1.5% | 2.4% |
| Black or African American | 12.7% | 2.0% | 1.2% | 1.4% |
| American Indian or Alaska Native | 0.8% | 1.7% | 1.1% | 6.6% |
| Asian | 5.5% | 1.7% | 1.5% | 0.8% |
| Other | 5.5% | 0.4% | 0.2% | 0.5% |
| Foreign Born Population | 13.3% | 3.6% | 3.1% | 4.0% |

SOURCE: American Community Survey, 2019 5-Year Estimates

Figure 3: Household Income and Poverty

| | United States | Maine | Hancock County | Washington County |
|---|---------------|----------|----------------|-------------------|
| Median Household (HH) Income | \$62,843 | \$57,918 | \$57,178 | \$41,347 |
| Total Below 100% Federal Poverty Level (FPL) | 13.4% | 11.8% | 10.8% | 18.9% |
| Under 5 years | 20.3% | 17.0% | 12.6% | 28.9% |
| 5 to 17 years | 17.9% | 14.4% | 13.5% | 25.3% |
| 18 to 34 years | 16.3% | 16.0% | 14.4% | 22.4% |
| 35 to 64 years | 10.5% | 9.9% | 8.8% | 17.9% |
| 65 years and over | 9.3% | 8.7% | 10.1% | 12.4% |
| Below 50% of FPL | 5.5% | 4.0% | ND | ND |
| Below 125% of FPL | 16.3% | 14.6% | ND | ND |
| Below 150% of FPL | 20.3% | 18.6% | ND | ND |
| Below 185% of FPL | 26.3% | 24.8% | ND | ND |
| Below 200% of FPL | 28.9% | 27.7% | ND | ND |

SOURCE: American Community Survey, 2019 5-Year Estimates

Figure 4: Social Characteristics Measures

| | United States | Maine | Hancock County | Washington County |
|---|---------------|---------|----------------|-------------------|
| Total Households | 120,756,048 | 559,921 | 23,661 | 13,791 |
| Homeownership Percentage | 64.0% | 72.3% | 76.3% | 76.5% |
| Single Parent Household¹ | 14% | 21% | 24.8% | 26.9% |
| Living Alone | 13.3% | 15.1% | 15.9% | 16.8% |
| Grandparents Responsible for Grandchildren | 34.1% | 34.1% | 34.5% | 51.5% |
| Veteran Status | 7.3% | 9.6% | 10.1% | 11.8% |
| Educational Attainment | | | | |
| Less than 9th grade | 5.1% | 2.6% | 2.0% | 4.0% |
| 9th to 12th grade, no diploma | 6.9% | 4.8% | 3.9% | 6.7% |
| High school graduate/ GED | 27.0% | 31.5% | 30.8% | 38.0% |
| Some college, no degree | 20.4% | 19.3% | 20.1% | 20.1% |
| Associate degree | 8.5% | 10.1% | 9.1% | 9.2% |
| Bachelor's degree | 19.8% | 20.0% | 20.0% | 14.1% |
| Graduate degree | 12.4% | 11.8% | 14.0% | 8.0% |
| HS Graduation rate (202) | 88.0% | 87.4% | 88.6% | 87.8% |
| No Health Insurance | 8.8% | 7.9% | 10.2% | 12.1% |
| Receiving SNAP Benefits | 11.7% | 13.5% | 10.0% | 22.6% |
| Food Insecurity – All Ages | 10.9% | 12.1% | 17.9% | 25.7% |
| Median Mortgage (2019) | \$1,595 | \$1,398 | \$1,353 | \$1,068 |
| Median Rent | \$1,062 | \$853 | \$818 | \$603 |
| Housing Cost Burdened² | 32.88% | 29.75% | 28.69% | 27.69% |
| Children Eligible for Free/Reduced Price Lunch | 49.5% | 38.3% | 32.8% | 56.6% |

SOURCE: American Community Survey, 2019 5-Year Estimates; Source: Feeding America, State-By-State Resource: The Impact of Coronavirus on Food Insecurity, 2019; Annie E. Casey Foundation, Kids Count Data Center, County Graduation Rates 2014-2020 Maine.

¹ 2021 County Health Rankings.

² The percentage of households that spend 30% or more of their income on housing.

Figure 5: Health Overview

| | United States | Maine | Hancock County | Washington County |
|---|---------------|---------|----------------|-------------------|
| Poor Mental Health Days | 3.8 | 5.0 | 4.7 | 5.2 |
| Poor Physical Health Days | 3.4 | 4.2 | 3.8 | 5.0 |
| Frequent Mental Health Distress | 11.7% | 12.7% | 14% | 17% |
| Ratio of Primary Care Providers | 880:1 | 900:1 | 700:1 | 1,750:1 |
| Ratio of Mental Health Providers | 170:1 | 200:1 | 250:1 | 170:1 |
| Ratio of Dentists | 1,210:1 | 1,480:1 | 1,960:1 | 2,090:1 |
| Chronic Disease Prevalence (per 100,000) | | | | |
| Adults with Heart Disease | 26.81% | 22.48% | 22.56% | 24.38% |
| High Blood Pressure | 57.20% | 48.71% | 46.22% | 53.75% |
| Adults with Asthma | 4.97% | 4.68% | 4.53% | 4.32% |
| Diagnosed Diabetes | 26.95% | 22.55% | 19.70% | 25.65% |
| Leading Causes of Death (deaths per 100,000)³ | | | | |
| Heart Disease | 166.0 | 147.9 | 140.1 | 180.0 |
| Cancer | 155.5 | 169.2 | 156.9 | 197.0 |
| Unintentional Injury | 45.7 | 59.1 | 58.9 | 94.3 |
| Diabetes | 21.2 | 22.3 | 21.2 | 19.7 |
| Alzheimer's | 29.4 | 27.6 | 24.2 | 19.7 |
| Suicide Rates (Age-Adjusted Rate per 100,000) | 14.5 | 18 | 17 | 13 |
| Adult Obesity Prevalence (Age-Adjusted Rate per 100,000) | 42.2 | 31.7 | 30.4 | 34.9 |
| Maine Adults Past Month Binge Drinking | 25.8% | 17.9% | 17.5% | 18% |
| Percent Adults Current Smokers | 16.1% | 22.6 | 19.4% | 30.7% |
| COVID-19 Confirmed Cumulative Cases (as of 9/12/21) | 41.3M | 57,752 | 1,292 | 643 |
| COVID-19 Deaths (as of 9/12/21) | 662K | 897 | 41 | 18 |

Source: County Health Rankings & Roadmaps, 2018; National Institute on Minority Health & Health Disparities HDPulse; Death Rate Report for Maine by County 2014 – 2018; National Center for Chronic Disease Prevention & Health Promotion; Division of Population Health Places Database, 2018; The State Epidemiological Outcomes Workgroup, Tobacco Prevention & Control Dashboard, 2015 – 2017

³ NIH, HDPulse. Death Rates Table.

Qualitative Research Findings

| | Number of Participants |
|------------------------------|------------------------|
| Focus Group Participants | 11 |
| Stakeholders Interviewed | 8 |
| Community Survey Respondents | 397 |

Key Stakeholder Interview Quotes

A total of eight stakeholders were interviewed from the DCP service area. A selection of quotes that provide some insight into the strengths, needs, and challenges and barriers include the following:

- “It’s a beautiful place to live. People are nice and there is good working collaboration between organizations.”
- “One perception of Washington County is that it is the ‘Wild, Wild West.’”
- “There’s a lack of livable wage. There’s tons of generation poverty.”
- “The faith-based community is growing and getting involved in the addiction work. That’s different for people here. There’s a ‘new timer tattoo recover’ and they are taking it on with more fierceness. Now you can hit a meeting almost every night. People are on the sidewalks screaming about it.”
- “Hancock and Washington County are very different. Areas in Hancock are doing really well. There are good jobs here [Hancock County].”
- “There’s a population decline in Washington County. Who is going to take care of those folks?”
- “Right now, we are having a hard time filling all jobs, even the \$15-\$18 an hour jobs. The biggest challenge is bus drivers and childcare providers. It has always been a problem before COVID-19. We could pay more if the state paid more for the contracts.”
- “We have limited public transportation. Rural Maine doesn’t have a public transportation mindset. What is available to people does not accommodate their needs. There’s an attitude – want it on their terms.”
- “Housing development [low-income] doesn’t work up here due to communities being so far apart. Housing units are old and tired and very few rentals. The rules need to change to allow smaller developments.”
- “We do have two [homeless] shelters in Hancock and none in Washington. Most [people] are couch surfing or living in camps, trailers, or cabins. It does seem to be increasing in numbers. People can’t get heating assistance sometimes because [their living situation] is not considered permanent.”
- “Healthcare beyond basic care requires you to go to Bangor or Portland. They can do some at Ellsworth or MDI. Calais has a hospital and a FQHC. It gets more challenging the further east you go.”
- “Food insecurity is not an issue. There are multiple accesses to food, but it’s ‘what they like or want to eat.’ People don’t know how to cook or can’t cook.”

Key Focus Group Quotes

| Comments and Ideas | |
|---|--|
| Top Challenges Mentioned | Employment Housing and homelessness |
| Unique Strength or Challenge Mentioned | There is a strong sense of community and a deep, rich, diverse culture with the First Peoples, Latinx and others. |
| Housing | We have 30 families in our program each year, at least one family living in a tent in August. Homelessness isn't in your face. You don't see it but it's here. In the summertime, people live in tents at campgrounds. During winter, people live in uninsulated campers. There's a lot of squatting. |
| Mental Health | We have a growing recovery community in Washington County. |
| Childcare Insight | Very little licensed or center care. There are a lot of people who do babysitting on the side. A lot of people don't want to report their income in fear of losing benefits. |
| Transportation insight | You need to know someone to get to work. For women it is dangerous to get a ride from someone because they expected something in return (i.e., money, sexual favors, etc.) |
| Employment | A lot of people work multiple jobs and have side hustles. young people have the hunger to work but don't have the opportunities. But also, people need to keep their benefits. A lot of the jobs are seasonal – blueberries, lobstering, tipping for wreaths, trees. Unless you have a job at bank, grocery store or teacher, food services, mostly seasonal |
| Basic Needs Insight | For heating assistance for DCP then you need to call the day it's open (October). First appointment is in December. People typically have to requalify for SNAP. |
| Magic Wand Highlight | All the systems here are overwhelmed. Some are so nice. I've never had a negative experience with DHHS, but TANF made me feel bad about me. They all need a program on how to talk to people. |
| Noted Policy Area | Simplifying means testing for all programs on the phone. |

Community Survey Results

| Downeast Community Partners | | |
|-----------------------------|--|---------|
| | Need | Percent |
| 1 | Developing more livable-wage jobs | 55.6% |
| 2 | Providing more flexible and affordable childcare options for working parent(s) | 55.3% |
| 3 | Creating more shelter beds for certain populations (children, women, families, LGBTQ, veterans, etc.) | 53.7% |
| 4 | Making dental care more affordable | 53.5% |
| 5 | Increasing the number of affordable childcare providers | 53.0% |
| 6 | Increasing the availability of prepared foods for seniors (Meals on Wheels, etc.) | 52.5% |
| 7 | Improving access to high-speed internet and technology | 52.5% |
| 8 | Increasing the number of substance use disorder providers and services | 52.3% |
| 9 | Increasing the number of affordable apartments | 52.3% |
| 10 | Increasing the number of mental health providers in rural communities | 52.1% |
| 11 | Expanding crisis services for mental health and substance use disorders | 51.9% |
| 12 | Providing more after-school programs for school-aged children | 51.6% |
| 13 | Creating technical school, trade school, or other job training options | 51.4% |
| 14 | Making public transportation available in rural communities | 51.4% |
| 15 | Providing more senior housing options | 51.2% |
| 16 | Increasing the number of affordable houses for sale | 50.9% |
| 17 | Providing job growth opportunities | 50.7% |
| 18 | Reducing the amount of other drug misuse (heroin, cocaine, etc.) | 50.2% |
| 19 | Increasing the number of childcare providers who offer age-appropriate education | 50.2% |
| 20 | Increasing the number of high quality licensed childcare providers | 50.2% |
| 21 | Reducing building costs of new affordable housing units | 50.0% |
| 22 | Reducing the amount of opioid misuse | 49.8% |
| 23 | Reducing the amount of alcohol misuse | 49.5% |
| 24 | Increasing the number of landlords who accept housing vouchers | 49.5% |
| 25 | Creating more emergency shelter beds for people who are homeless | 49.3% |
| 26 | Creating higher quality rental apartments and houses | 49.3% |
| 27 | Increasing programs for major housing repairs (roofs, windows, etc.) | 49.1% |
| 28 | Providing soft skills education (customer service, showing up on time, etc.) | 48.8% |
| 29 | Creating more affordable public transportation options | 48.8% |
| 30 | Increasing the number of dentists who serve MaineCare patients | 48.4% |
| 31 | Providing more recreational opportunities for youth | 48.1% |
| 32 | Reducing the amount of childhood obesity | 47.9% |
| 33 | Adding better routes and time schedules to current public transportation system | 47.9% |
| 34 | Providing help with weatherization | 47.9% |
| 35 | Expanding open hours at food banks | 47.0% |
| 36 | Reducing stigma associated with mental health and substance misuse | 47.0% |
| 37 | Increasing the number of detox facilities | 47.0% |
| 38 | Helping more people who are homeless to find their missing identification documents (driver's license, social security number, etc.) | 47.0% |
| 39 | Providing more transportation options to childcare services | 46.5% |
| 40 | Reducing the amount of smoking and vaping | 46.1% |
| 41 | Providing help with utility assistance (heating fuel, electricity, etc.) | 45.6% |
| 42 | Reducing the amount of adult obesity | 45.1% |

| | | |
|-----------|--|-------|
| 43 | Developing rental and mortgage assistance programs | 44.7% |
| 44 | Reducing MaineCare transportation limitations (i.e., limited to one parent and child) | 42.8% |
| 45 | Reducing stigma associated with the housing voucher program | 42.8% |
| 46 | Providing help with the cost of vehicle insurance and regular maintenance | 41.9% |
| 47 | Providing help with the cost of vehicle repairs | 41.9% |
| 48 | Increasing programs for minor housing repairs (paint, upgrades, etc.) | 40.0% |
| 49 | Expanding food options for people with dietary restrictions or allergies at food banks | 39.6% |

| Need | | | | | | | |
|------|--|---|--|--|---|--|--|
| | Under \$15,000 | Between \$15,000 and \$29,999 | Between \$30,000 and \$49,999 | Between \$50,000 and \$74,999 | Between \$75,000 and \$99,999 | Between \$100,000 and \$150,000 | Over \$150,000 |
| 1 | Expanding open hours at food banks | Expanding crisis services for mental health and substance use disorders | Increasing the number of mental health providers in rural communities | Increasing the number of substance use disorder providers and services | Increasing the number of affordable apartments | Improving access to high-speed internet and technology | Reducing the amount of other drug misuse (heroin, cocaine, etc.) |
| 2 | Making dental care more affordable | Reducing the amount of opioid misuse | Reducing the amount of opioid misuse | Developing more livable-wage jobs | Making public transportation available in rural communities | Providing more flexible and affordable childcare options for working parent(s) | Increasing the number of mental health providers in rural communities |
| 3 | Increasing the number of dentists who serve MaineCare patients | Providing more recreational opportunities for youth | Providing more flexible and affordable childcare options for working parent(s) | Reducing the amount of alcohol misuse | Increasing the number of high quality licensed childcare providers | Increasing the number of mental health providers in rural communities | Providing more flexible and affordable childcare options for working parent(s) |
| 4 | Providing help with the cost of vehicle repairs | Increasing programs for major housing repairs (roofs, windows, etc.) | Increasing the number of substance use disorder providers and services | Making dental care more affordable | Increasing the availability of prepared foods for seniors (Meals on Wheels, etc.) | Providing job growth opportunities | Increasing the number of childcare providers who offer age-appropriate education |
| 5 | Creating more affordable public transportation options | Reducing the amount of other drug misuse (heroin, cocaine, etc.) | Reducing the amount of childhood obesity | Providing more flexible and affordable childcare options for working parent(s) | Increasing the number of dentists who serve MaineCare patients | Making public transportation available in rural communities | Increasing the number of affordable apartments |

Needs Prioritization

| Survey Rank | Need |
|-------------|---|
| 5 | Providing more flexible and affordable childcare options for working parents |
| 13 | Increasing programs for housing repairs (maybe not necessarily in the NUMBER of programs but perhaps in funding and accessibility for it) |
| 16 | Reducing the stigma around poverty and asking for help |

Stakeholder Interview Participants

| Name | Organization |
|----------------------|--|
| Betsy Fitzgerald | Washington County Commissioners Office / DCP Board President |
| Wendy Harrington | Maine Sea Coast Mission – Downeast Campus |
| Marilyn Hughes | Regional Medical Center at Lubec |
| Heather Mawhinney | DCP – Family Futures Downeast |
| Dr. Marjorie Olivari | Northern Light |
| Mark Green | DCP |
| Peter Remick | Pastor |
| Skip Greenlaw | Local Businessman and Former State Legislator |