

2024

Tempe Community Council Human Services Community Needs Assessment



TEMPE
Community
Council



**Southwest Interdisciplinary
Research Center**
Arizona State University

Acknowledgments

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A thank you goes out to all the community members who gave of their time and knowledge to contribute to these findings. It is only through their contributions that we can describe in their words the community human services needs of Tempe residents. Thank you also to the providers and agencies who worked with their members and with the researchers to ensure implementation of the surveys and focus groups. Lastly, we would like to thank Maria Kirley and Mara de Luca Funke for their assistance with facilitating outreach, focus groups, and report formatting.

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Tempe Community Council Human Services Community Needs Assessment

Executive Summary

Introduction

Tempe Community Council (TCC) is a 501(c)(3) nonprofit corporation committed to addressing current and long-term human service needs in Tempe, Arizona. In 2024, TCC contracted with the Southwest Interdisciplinary Research Center (SIRC) with Arizona State University to conduct a comprehensive Tempe human services community needs assessment. The project entailed a multi-method approach to data collection to create a complete picture of the needs in Tempe based on these target populations identified by the TCC including Older Adults; Working Poor Individuals; Children, Youth, and Families; Individuals with a Disability; Spanish Speakers; and Domestic and Sexual Abuse Survivors.

Data were collected through a variety of methods targeting both individuals who received human services in Tempe and those who may have needed them but had not accessed services. Data collection methods included secondary data collection, 405 anonymous community surveys, 62 human service provider surveys, seven targeted focus groups with 40 participants, seven key informant interviews, and three community forums. Participants for the community survey, focus groups, and community forums were recruited across Tempe. Provider survey and key informant interview participants were recruited based on the services they provide to Tempe residents.

Key Insights

The following are the major human service needs and topics that emerged from the data. Key data insights are presented followed by additional details within each section of the report. The needs and themes are presented in no particular order of priority as they were mentioned frequently throughout the data collection process.

Upon integrating the insights from the small group discussion, with the data obtained from the surveys, focus groups, and key informant interviews, data saturation was achieved, therefore no additional data collection was necessary. This indicates the qualitative data collection captured the range of perspectives and themes pertinent to the community needs assessment, ensuring the rigor and reliability of the findings.

Mental health



- Mental health issues were reported by community respondents as one of the most significant challenges faced in the past year.
- Over 40% of community respondents were struggling with their well-being.
- Providers reported mental health as one of the greatest community challenges regarding human services.
- Providers reported mental health care as a top priority for improving human services for Tempe residents.
- Focus group participants suggested that improved financial assistance and community infrastructure can improve the mental health of the community.
- Key informants reported mental health and related trauma at the forefront of the needs that were mentioned during the interviews.

Housing



- Rent costs were a burden to over 53% of renters in 2023, an increase from the previous needs assessment rate of 47%. A burden was defined as rent over 30% of income (US Census Bureau Selected Housing Characteristics 2023).
- Paying for a home was reported by community respondents as a top need to get or need more help. Community respondents reported needing help finding a home they could afford and help paying for utility bills.
- Providers reported housing as one of the greatest community challenges regarding human services.
- Providing a rent cap or rental assistance to residents was a common suggestion among focus group participants.
- Housing insecurity was one of the most pressing issues mentioned by key informants. There is seemingly less affordable housing despite efforts to develop shelters, elder care facilities, and affordable rental and ownership options.

Finances



- Paying bills/other financial issues were reported by community respondents as one of the most significant challenges faced in the past year.
- Lack of funding was one of the main reasons that limit providers' ability to serve more residents.
- Providers reported funding as one of the greatest community challenges regarding human services.
- Despite higher median incomes, Tempe had higher levels of poverty than Maricopa County, Arizona, and the United States (US Census Bureau Poverty Status 2023).
- Financial assistance for housing/rent, childcare, groceries, education, and healthcare was suggested by focus group participants.
- Key informants felt constrained by TCC's one-year funding cycles which made it challenging to project ahead for projects, interventions, and sustainability.

Homelessness



- Almost 50% of providers reported Tempe did not serve housing insecure/unhoused community members well.
- Providers reported homelessness as one of the greatest community challenges regarding human services.
- Focus group participants recognized a need for effective services to address homelessness among the community.

2023 Tempe rates of homelessness were higher than other geographical areas. 2024 data showed a possible decrease (Maricopa Association of Governments, 2023).

Food insecurity



- Providers reported food insecurity as one of the greatest community challenges and top issues regarding human services.
- Providers reported food assistance as a top priority to improve human services for Tempe residents.
- Food insecurity was identified as a persistent concern among the key informants. While there is a concern around families and homeless persons experiencing food insecurity, key informants also identified college students, young adults and seniors also struggling with food insecurity.

Work related



- Job and work related challenges were reported by community respondents as one of the most significant challenges faced in the past year.
- Job services or training were reported by providers as top issues addressed.
- Focus group participants mentioned the need for job training services.
- In 2023 Tempe had a higher unemployment rate than other geographical areas (U.S. Census Bureau “Selected Economic Characteristics” 2023).

Physical health



- Physical health issues were reported by community respondents as one of the most significant challenges faced in the past year.
- Almost 30% of community respondents reported facing serious health problems, illness, or injury in the past 12 months.

Transportation



- One-fifth of community respondents reported using public transportation to get around.
- While some focus group participants were satisfied with the free Orbit system, transportation vouchers for other public transportation was mentioned as a need for individuals experiencing homelessness.
- Transportation assistance was suggested by providers for how the City of Tempe could help organizations provide more.

Older Adults



- Those who are 65 years of age or older reported a disability, handicap or chronic disease that keeps them or anyone they live with from participating fully in life activities.
- 71% of providers reported serving seniors.
- Those in the senior focus group reported not being aware of the range of human services available.
- During the key informant interviews, the issue of seniors at risk for homelessness was mentioned as a huge issue.

Substance use



- 6% of community respondents reported alcohol or drug problems as a challenge faced in the past 12 months.
- Providers reported a high need for intervention services to address alcohol or drug abuse.
- Substance use was reported by providers as one of the greatest community challenges regarding human services.
- Focus group participants suggested partnerships with drug reduction organizations and the creation of safe use centers to address drug use/abuse.
- The issue of substance use was mentioned throughout many of the key informant interviews.

Education



- Help with continuing education was reported by community respondents as a top need to get or need.
- Providers reported that Tempe values the needs of young children and the importance of access to early education and support resources.
- Free classes and trainings were suggested by focus group participants.

Individuals with a disability



- A top overall current need reported by community respondents was to get assistance to support a handicap, chronic disease or disability.
- Providers reported challenges for people living with a disability as one of the greatest community challenges regarding human services.
- Participants from the disability focus group stressed the need to be made aware of the human services available.
- One key informant shared that people have low expectations for people living with disabilities.

Domestic and sexual abuse survivors



- Trauma or violence were reported as a top priority issue by the providers.
- Providers reported a high need for intervention services to help domestic abuse survivors.
- Providers reported domestic and sexual abuse as one of the greatest community challenges regarding human services.

Discussion of Findings

The analysis from the community and provider surveys, focus groups, and key informant interviews showed that while participants reported specific needs and challenges, future funding should be allocated for services and resources that meet the needs across all groups. These services and resources should address the lack of affordable housing, mental health care, financial needs, job-related services, food insecurity, and educational assistance. The specific needs of populations such as people living with a disability or domestic violence survivors should also be a priority.

The community survey respondents' greatest needs were related to mental health care, overcoming a disability or chronic disease, lack of social connection, and paying utility bills. Respondents also mentioned needing assistance to find affordable housing and to continue their education. While the city offers a wide variety of human services, focus group findings illustrated that many participants had little to no knowledge of available services. Participants often expressed that their lack of awareness was due to how the services were currently marketed and their reliance on informal communication such as word-of-mouth about how to access services.

Providers reported that the community's greatest challenges for human services were housing, homelessness, mental health, food insecurity, domestic and sexual abuse, substance use, and funding. On the other hand, providers also shared some of these challenges were also identified as Tempe's community-wide strengths and include food and financial assistance, education, housing and homeless support, transportation, cultural activities, and senior and domestic violence services. Key informant interview participants emphasized that housing insecurity and homelessness, food insecurity, economic problems, and underlying trauma (i.e., past events experienced by individuals) were the major issues related to human services needs in Tempe.

As TCC is at the forefront of addressing human service needs, the findings described also serve to document evolving issues and possible solutions from key players who have a deep understanding of the health and well-being of Tempe residents. The information gathered and depicted serves to provide insight into addressing emergent needs, resource allocation, and long-term support. The report outlines recommendations based on the information gleaned from all participants throughout this comprehensive human services community needs assessment.



Introduction

For the comprehensive Tempe human services community needs assessment, the Southwest Interdisciplinary Research Center (SIRC) at Arizona State University, engaged in a multi-method approach to data collection to create a complete picture of the human services needs of Tempe residents based on these target populations identified by the TCC: Older Adults; Working Poor Individuals; Children, Youth, and Families; Individuals with a Disability; Spanish Speakers; Individuals and Families Experiencing Homelessness; Undocumented People and Families; and Domestic and Sexual Abuse Survivors.

Data were collected using multiple methods including secondary data, anonymous community surveys, human service provider surveys, focus groups with target populations, key informant interviews, and community forums. (The community forum findings will be presented in a separate report.) This comprehensive human services community needs assessment report is divided into sections with findings for each data collection method which includes a discussion, conclusion, and a recommendations section. The appendices contain the secondary data analysis report, project methodology, a mixed-methods design model, key findings, and references.

The final step of the human services needs assessment is a prioritization summit which will be hosted by the TCC. The purpose of the summit is to share the findings from this report and give those invited the opportunity to recommend priorities for the upcoming funding cycle(s).



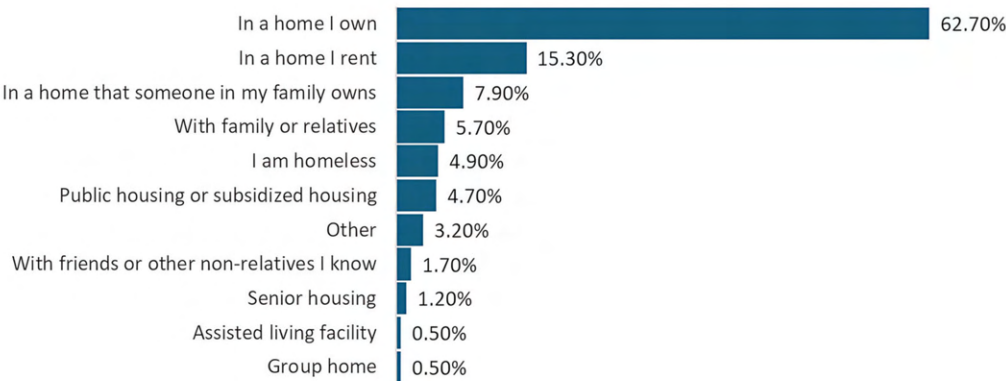
Community Survey Findings

Data presented in this section are based on 405 community surveys collected from Tempe residents in the fall of 2024. The community survey aimed to collect information about residents’ perceptions around human services needs in Tempe. The findings from the community survey are presented in this section. All quotes are reported as directly stated by participants.

Current Housing

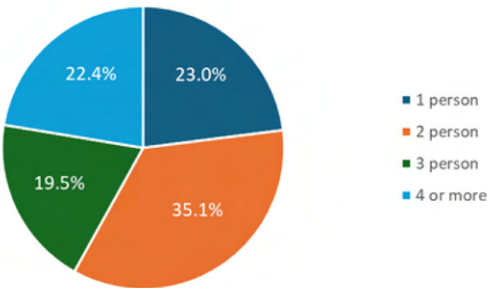
Most respondents reported living in a home they own or rent.

Where do you currently live? (Mark all that are true for you.)



Household Size

More than half of respondents reported living in a household with 1 to 2 people.

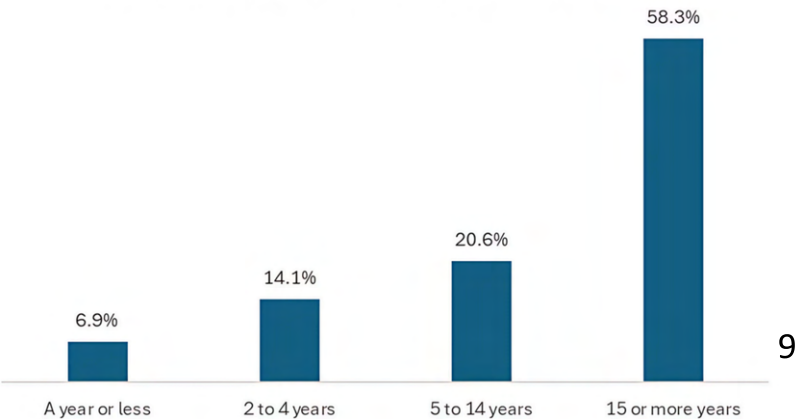


How many other people currently live in your home?

Years Lived in Tempe

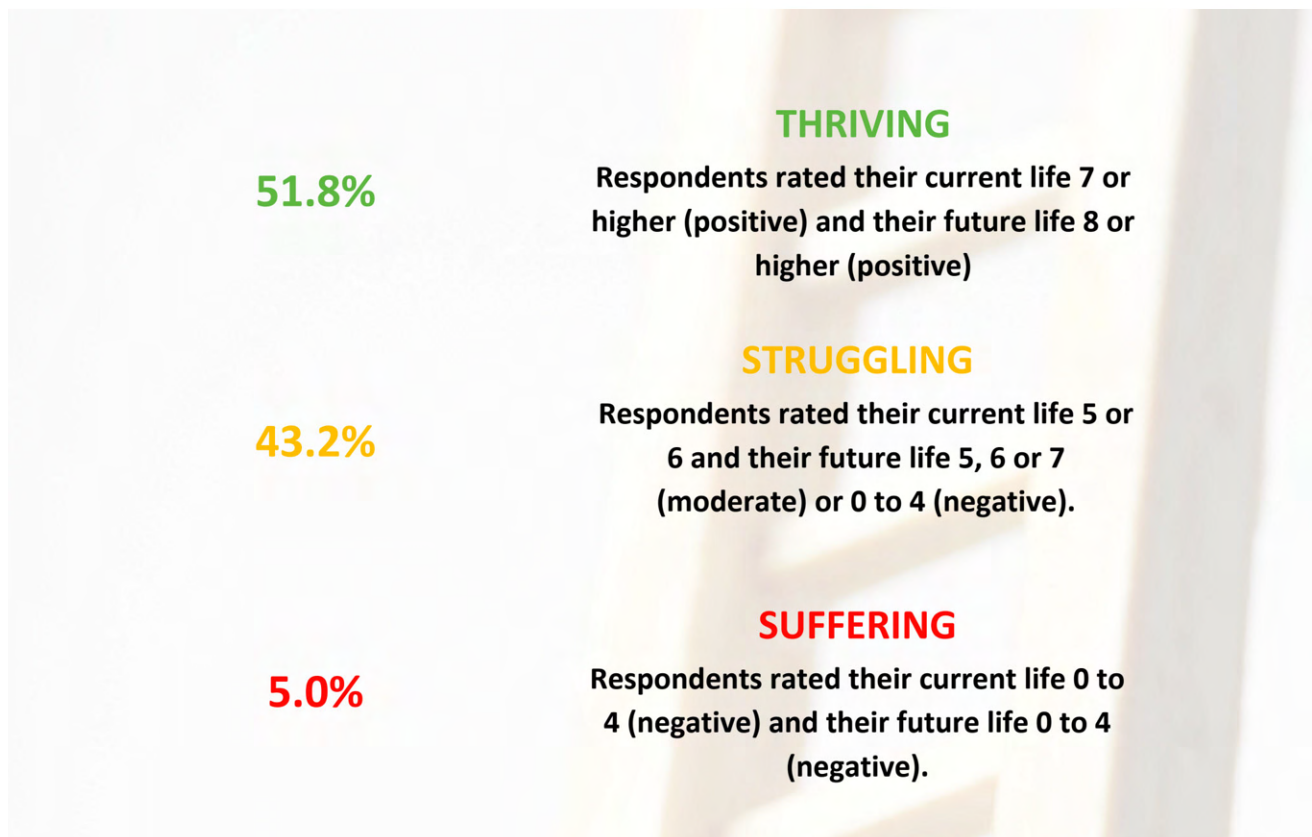
More than half of respondents had lived in Tempe for 15 or more years. Fewer than 10% have lived in Tempe for a year or less.

How long have you lived in Tempe, in total?



Ratings of Well-being

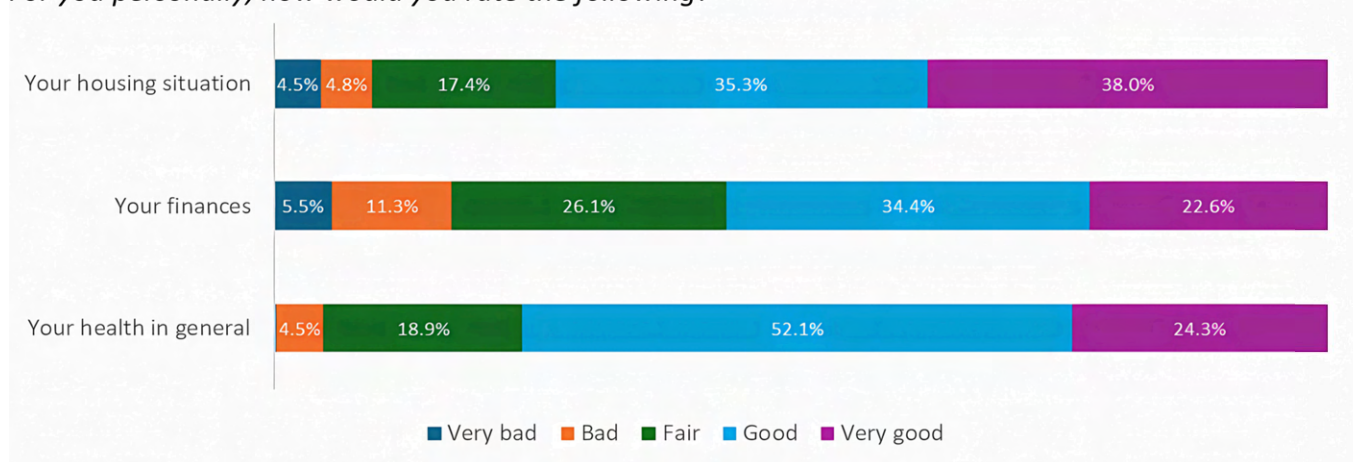
Similar to the 2021 community survey, the Cantril Self-Anchoring Striving Scale, an 11-point scale with 10 being their best possible life and 0 being their worst possible life, was also included in the 2024 community survey. Respondents selected which step of a ladder they felt they stood at the time of the survey and on which step they thought they would stand on, in about five years. Respondents' ratings were examined and categorized into one of three categories: thriving, struggling, or suffering. People who are *struggling* reported having more stress, financial challenges, and health issues. People who are *suffering* reported more physical and mental health challenges and less access to services compared to *thriving* individuals (Cantril, 1965, as cited in Gallop, 2009).



Well-being ratings appeared a bit lower than in 2021 with a higher percentage of respondents' ratings falling into the struggling category (43% compared to 37% in 2021). Respondents who considered themselves or a family member to be working but low income were more likely to be struggling or suffering. More homeowners were thriving whereas more renters were struggling. Respondents who considered themselves or a family member to be living with a disability were more likely to be struggling or suffering. Respondents who considered themselves or a family member to be a survivor of sexual or domestic violence were more likely to be suffering or struggling than thriving.

Ratings of Housing, Finance and Health

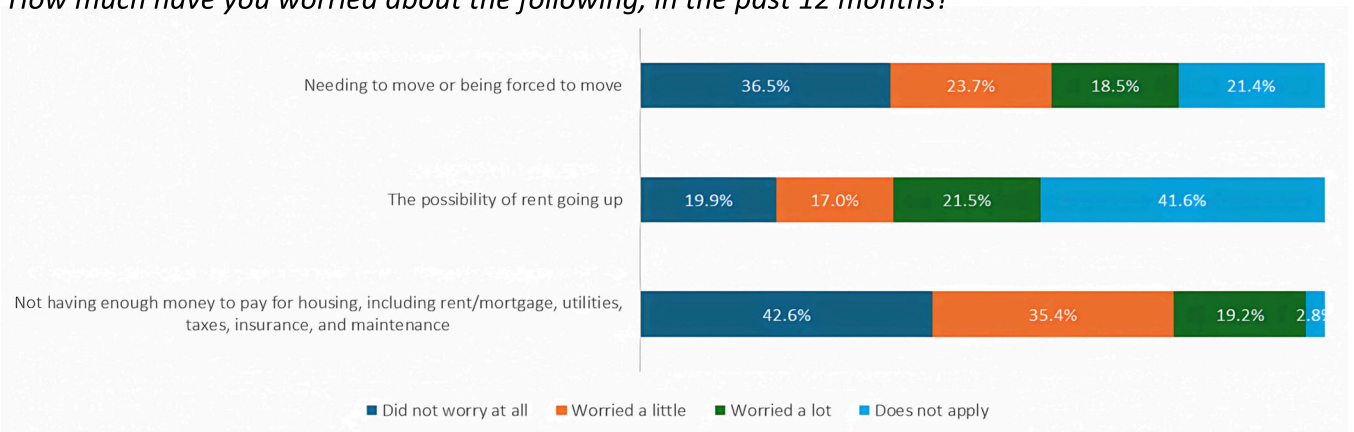
For you personally, how would you rate the following?



Similar to 2021, respondents rated their health and their housing situation positively with about three-quarters of respondents reporting good or very good. Finances were rated the lowest with only 57.0% reporting good or very good. Health, finances and housing situation were all rated more positively by respondents who were thriving than those who were struggling or suffering.

Housing Related Concerns

How much have you worried about the following, in the past 12 months?



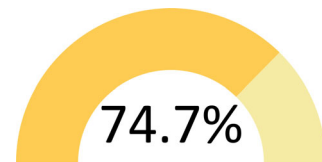
The biggest worry for respondents was not having enough money to pay for housing, including rent/mortgage, utilities, taxes, insurance, and maintenance. In 2021, the biggest worry was the possibility of rent increasing.

Rent costs were a burden to over 52.9% of renters in 2023, up from the previous needs assessment rate of 47.4%. A burden was defined as over 30% of income (US Census Bureau 2023).



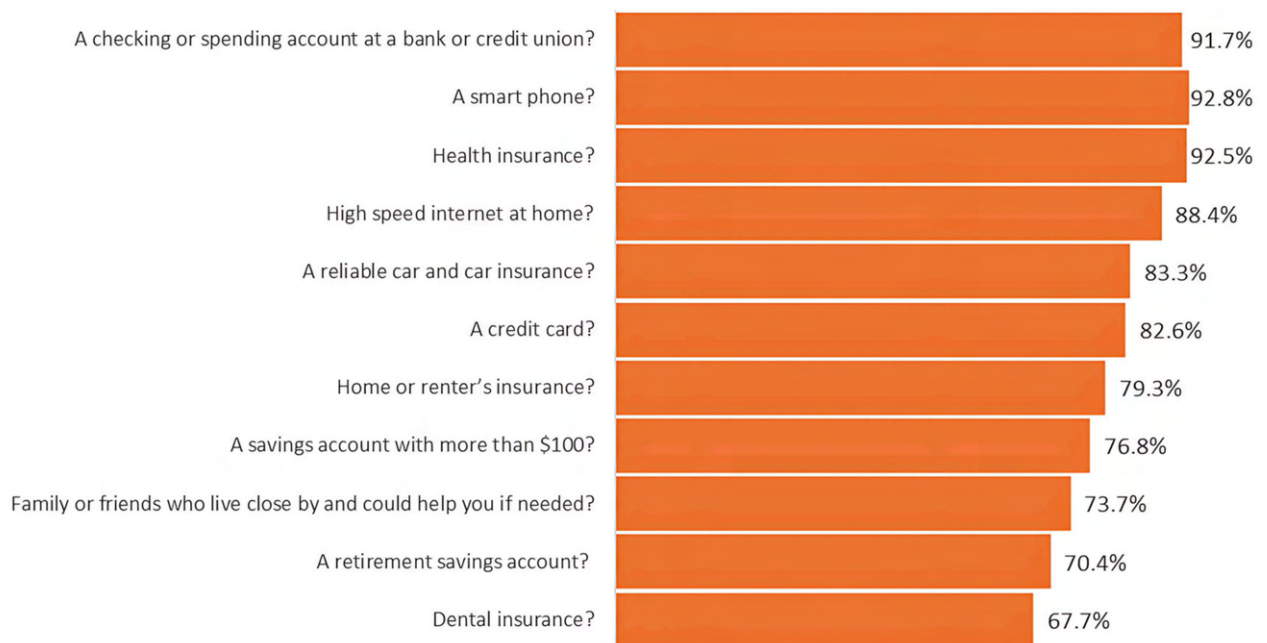
Resources

Have everything you need to “get by” without help from others



Yes

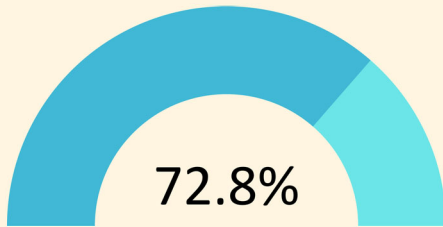
Do you have ...?



Overall, about three-quarters of respondents reported that they did have everything they needed to get by without help from others which appears to be a small increase compared to 2021 when only about two-thirds responded they had enough to get by on their own. Having a retirement savings account followed by having dental insurance were the resources reported by the smallest percentage of respondents.

Expenses

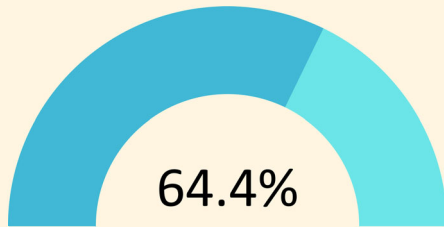
How would a \$400 emergency expense that you have to pay impact your ability to pay your other bills this month?



Would still be able to pay all bills



Today, could you pay off what you owe on your credit cards if you wanted to?



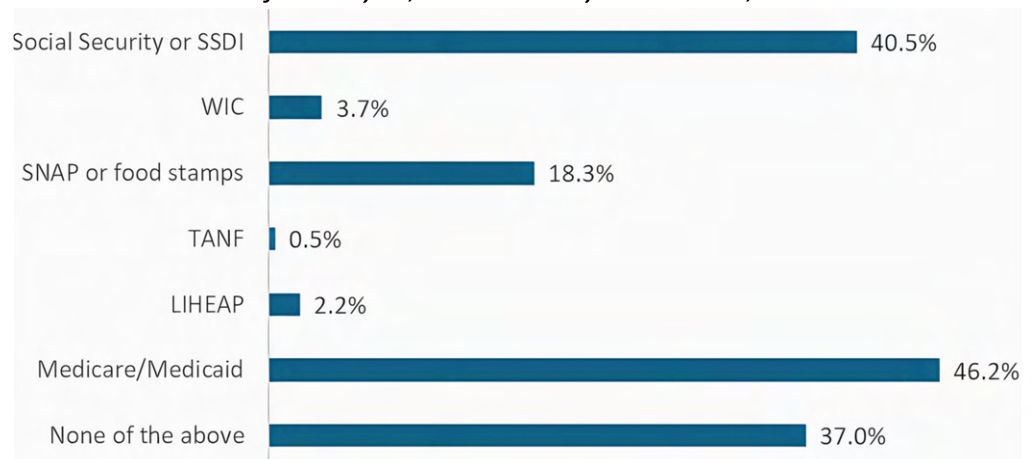
Yes



Benefits by Household

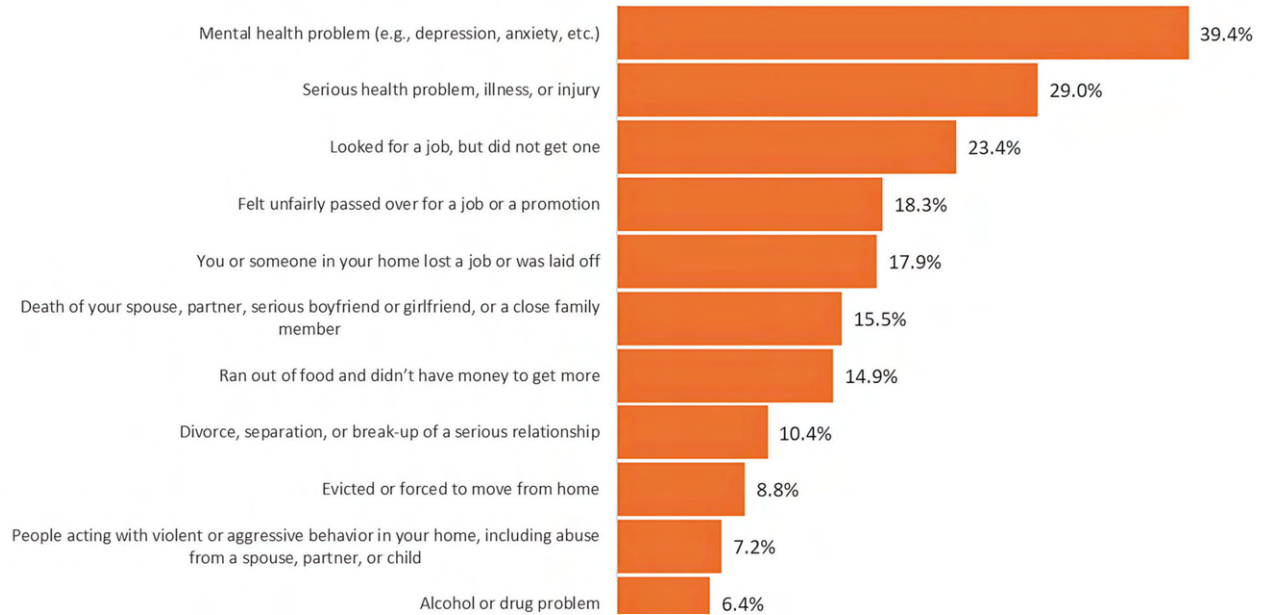
The majority of participants reported having Medicare/Medicaid or Social Security/SSDI benefits for themselves or a household member.

Mark each benefit that you, or someone you live with, receive



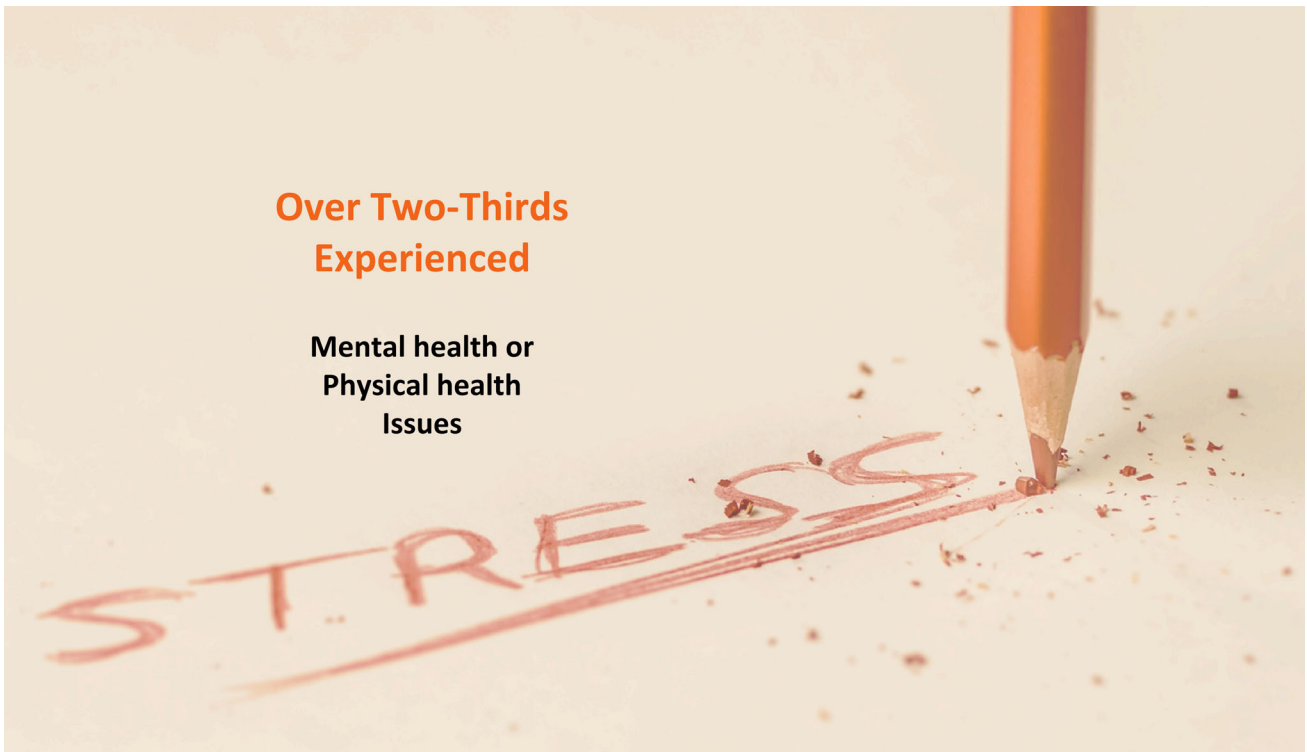
Stressful Events

Many people face different types of challenges in life. Please answer the following questions based on your experience. Have you faced any of the following in the past 12 months?



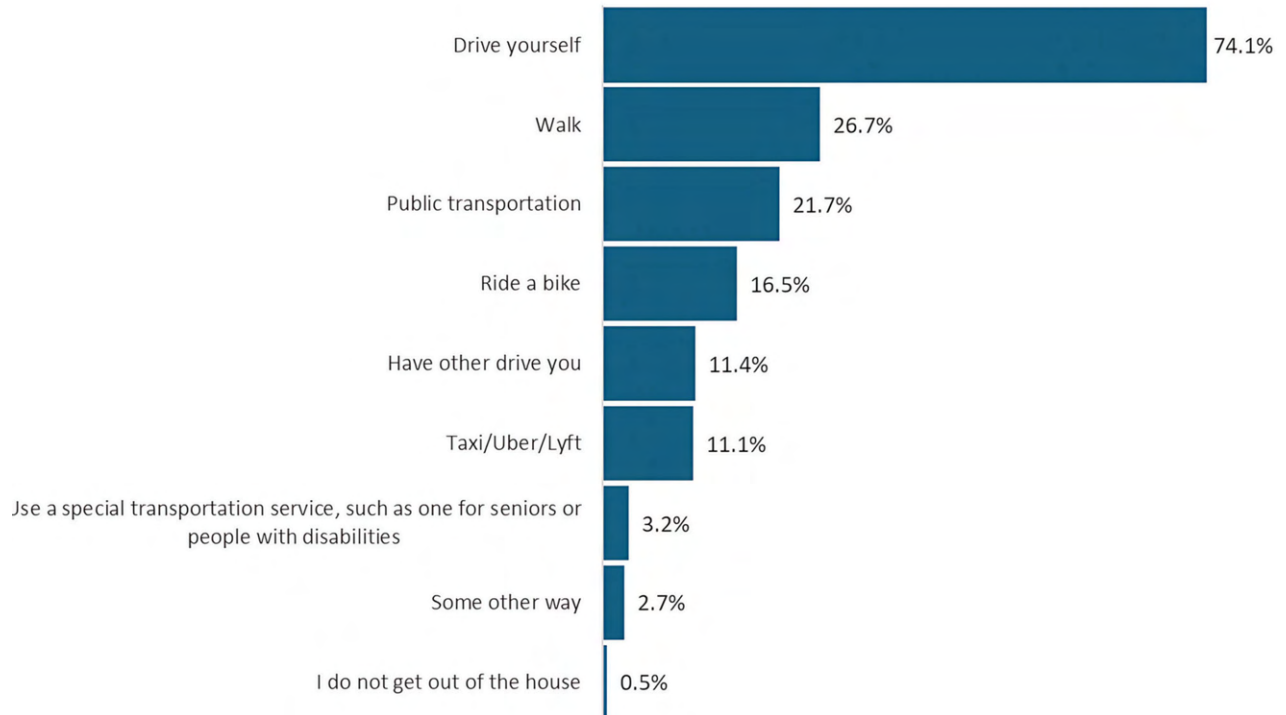
**Over Two-Thirds
Experienced**

**Mental health or
Physical health
Issues**



Getting Around

How do you usually get around your community for things like shopping, visiting the doctor, running errands, or other things? (Check all that apply)



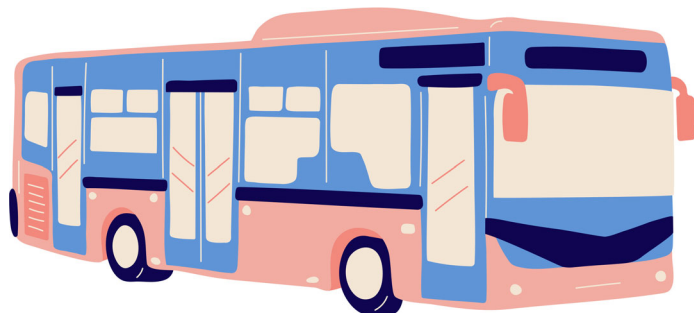
Drive yourself



Walk

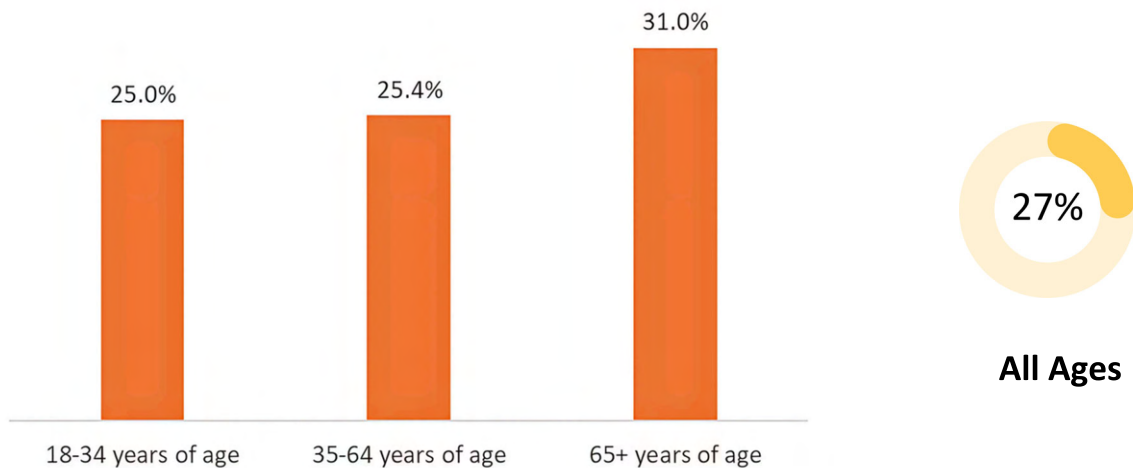


Public transportation



Unable to Participate in Daily Life

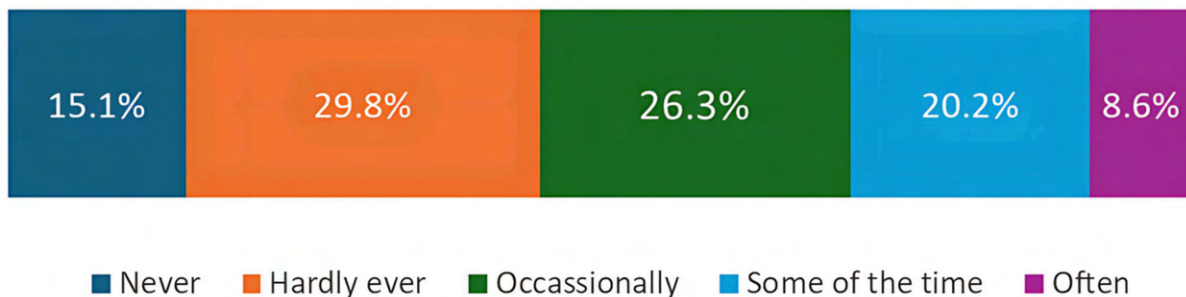
Does any disability, handicap, or chronic disease keep you or anyone you live with from participating fully in work, school, housework, or other activities?



More people 65 years of age or older with a disability or chronic disease reported not being able to participate fully in life activities due to a disability or chronic disease.

Loneliness

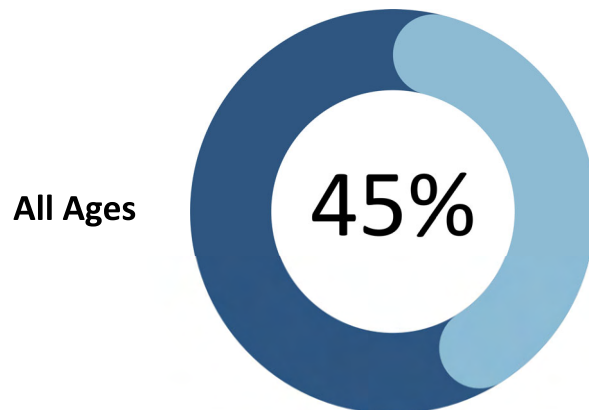
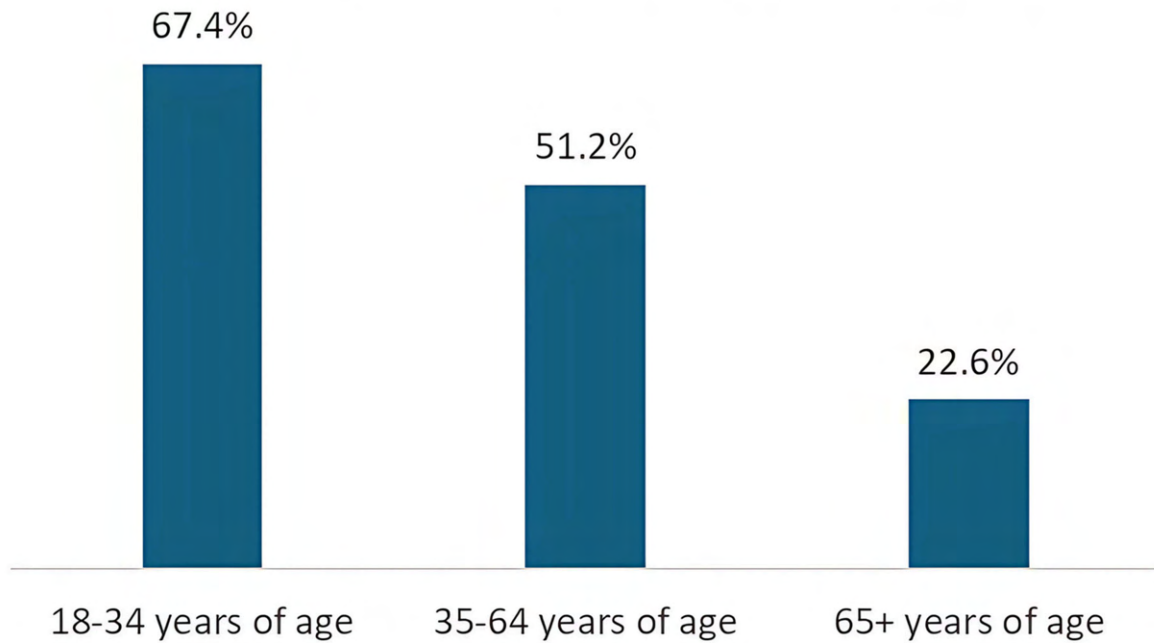
How often do you feel lonely?



Nearly 30% of respondents reported feeling lonely some of the time or often. More people reported feeling lonely in 2021 when almost 40% reported some of the time or often.

Poor Mental Health

Have you had a day when your mental health was NOT good in the past 30 days? (Yes responses)

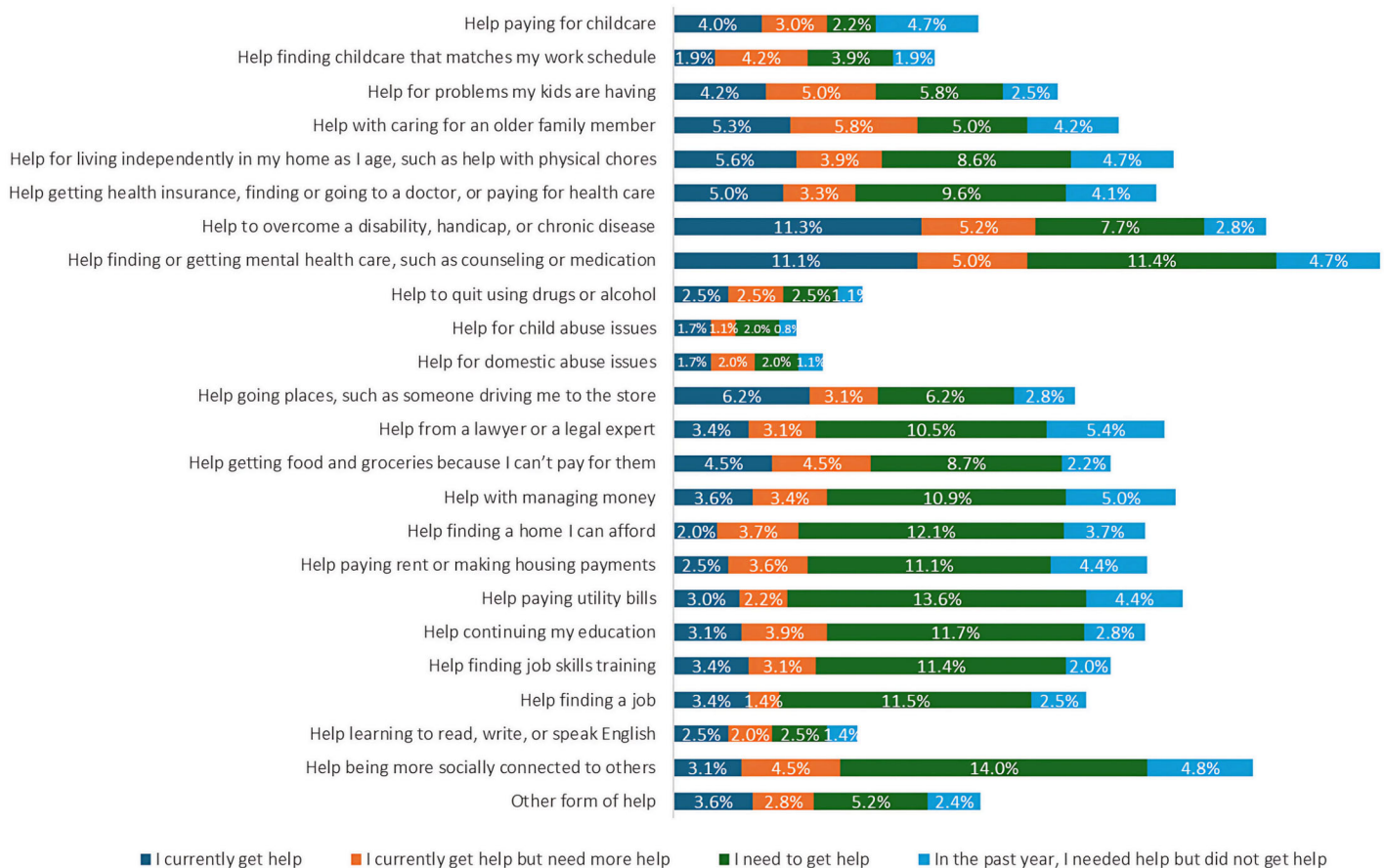


More people 18-34 years of age reported poor mental health than other age groups which was similar to respondents in 2021.



Current Needs for Help

Do you currently get or need any of the following types of help?



Top Overall Needs

Help finding or getting mental health care, such as counseling or medication
 Help to handle a disability, handicap, or chronic disease
 Help being more socially connected to others
 Help paying utility bills

Top Need to Get Help or Need More Help

Paying for a home

Help finding a home I can afford
 Help paying utility bills

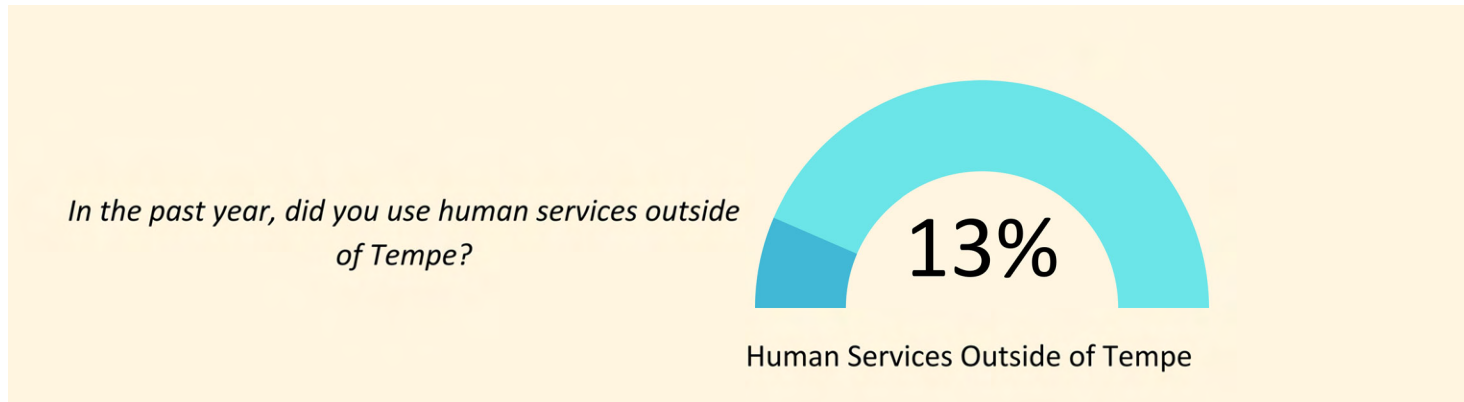
Mental health

Help being more socially connected to others
 Help finding or getting mental health care, such as counseling or medication

Education

Help continuing my education

Utilization of Human Services Outside of Tempe



For those respondents who said yes that they used human services outside of Tempe, the **services** they reported using included mental and physical health care, transportation services, housing services, vocational services, and art classes.

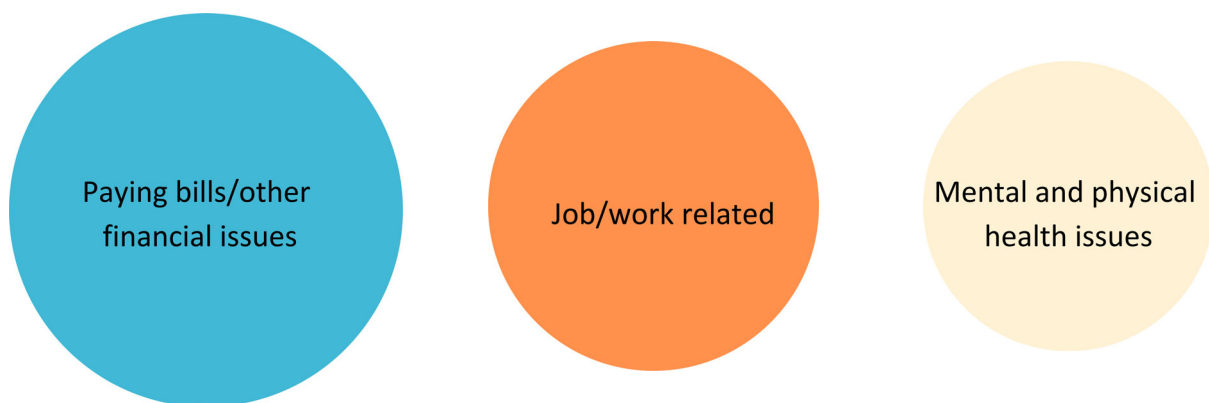
Respondents also reported where they received human services outside of Tempe.

Locations included Mesa, Chandler, Gilbert, Scottsdale, Phoenix, Flagstaff, Colorado Springs, Denver, Baltimore, St. Paul, California, Hawaii, New York, Krabi, and Telehealth.

Most Significant Challenge Faced in the Past Year

What was the most significant challenge you faced in the past year, and what could have helped make things easier for you?

Top 3 Challenges



Similar to 2021 findings, work related challenges and health issues were among the top three responses. However, pandemic related issues were not reported as a significant challenge faced in the past year as was the case in 2021 during COVID-19.

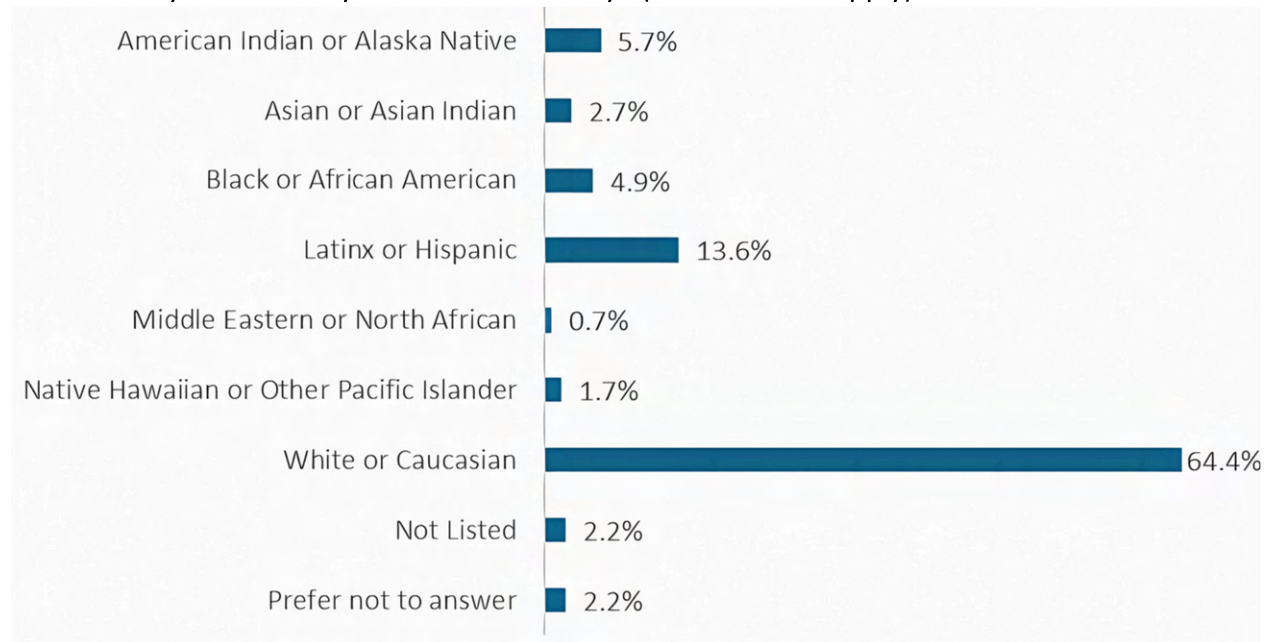
Suggestions for Making Challenges Easier

Based on the most significant challenge you faced in the past year, what could have helped make things easier?

<i>"Knowing what public resources are available for assistance."</i> - Community Survey Respondent	<i>"People reaching out to help and spend time with me."</i> - Community Survey Respondent
<i>"Mental health services."</i> - Community Survey Respondent	<i>"More rental/utility/mortgage assistance, more food bank assistance (better hours), a clothing bank, transportation assistance, more access to other social services."</i> - Community Survey Respondent
<i>"Help in finding a job."</i> - Community Survey Respondent	<i>"Tips with job applications or resumes."</i> - Community Survey Respondent
<i>"Someone to come by occasionally and take care of some things in the house."</i> - Community Survey Respondent	<i>"Having enough to pay bills."</i> - Community Survey Respondent

Community Survey Demographics

How would you describe your race or ethnicity? (Check all that apply)

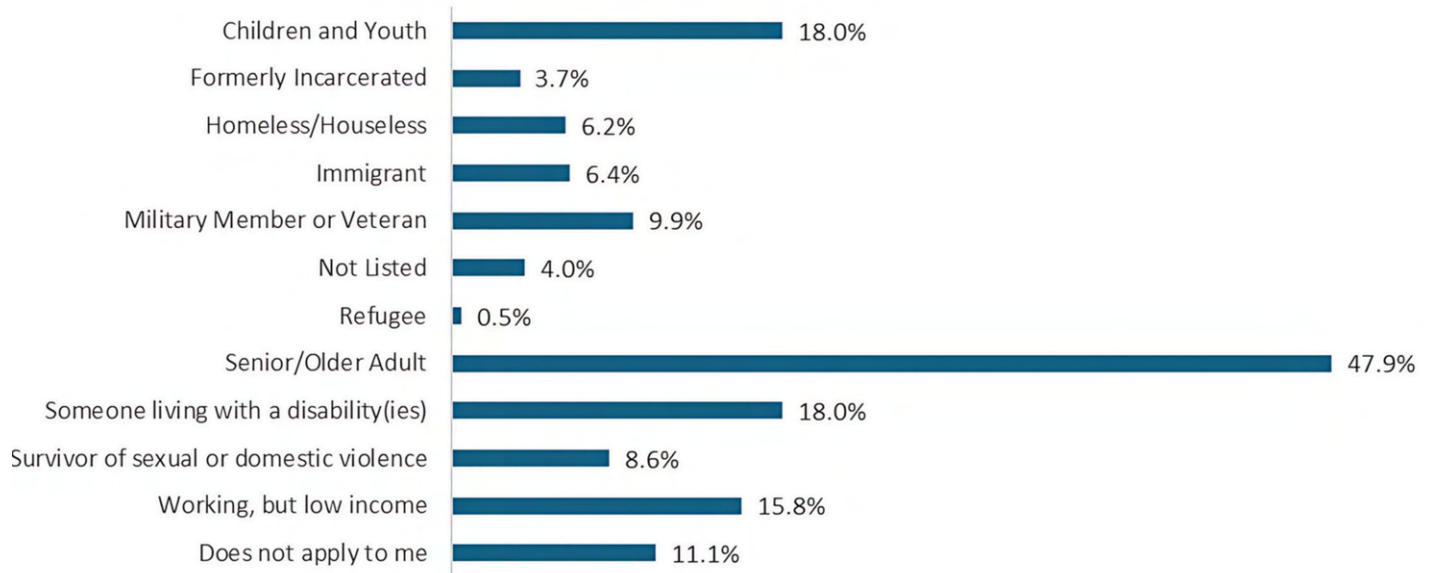


- **29.0%** Have children younger than 18 who live with respondents, at least sometimes
- **15.0%** Single parents
- **52.6%** Ages 35-64
- **67.5%** Female, 31.4% Male, 0.7% Non-Binary
- **12.1%** Identify as LGBTQ+
- **9.5%** College student
- **95.0%** Citizen
- **64.8%** Bachelor's degree or higher
- **67.2%** Work for pay during the past 12 months
- **53.6%** reported one to three people in their home, including themselves, age 18 or older, currently make money at a job



Target Populations

*Would you consider yourself or someone in your family to be a member of any of the following?
(Check all that apply)*



Respondents from many target populations completed the survey. The target populations with the largest response were senior/older adult, someone living with a disability, respondents with children or youth in their household, and working but low income.



Conclusion

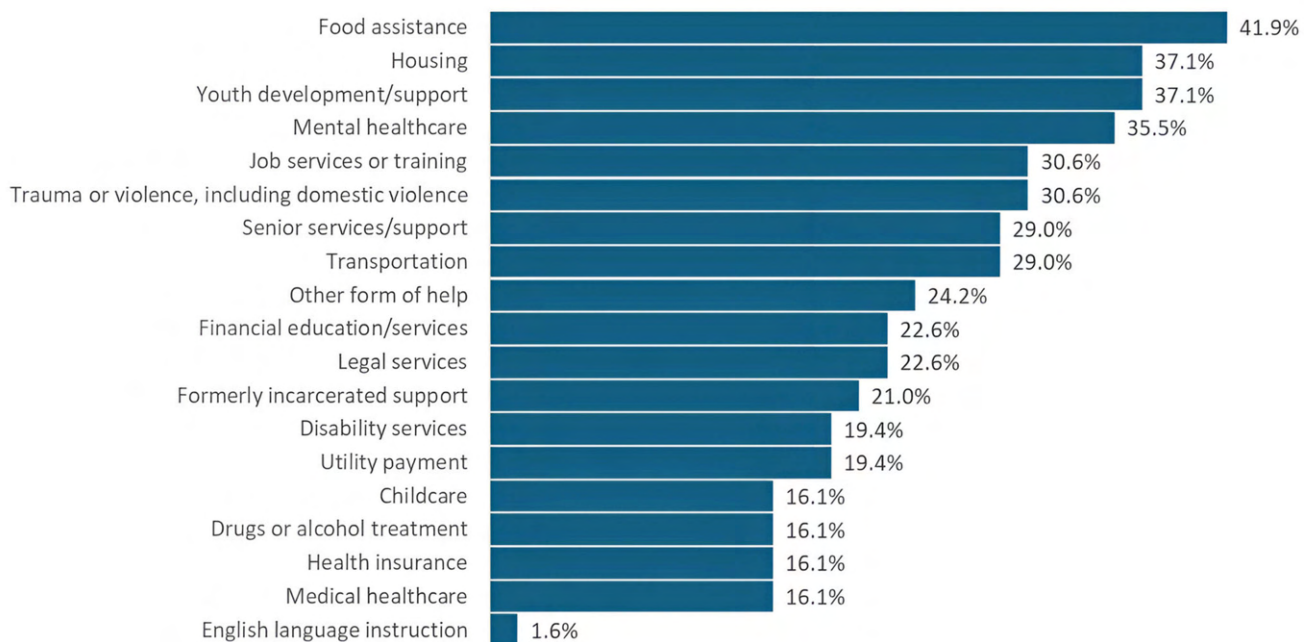
The community survey data showed that residents' greatest needs were related to mental health care, help to handle a disability or chronic disease, social connection, and needing help to pay utility bills. Respondents reported financial, work-related, and health issues (both mental and physical) as their greatest challenges. Suggestions for making challenges easier included increasing knowledge about the available resources, providing additional in-home services, offering more mental health services, providing financial assistance, offering a clothing bank, increasing access to other social services, and needing more assistance related to finding a job. Respondents also mentioned needing help to find affordable housing and to continue their education. Not having enough money to pay for housing, including rent/mortgage, utilities, taxes, insurance, and maintenance were reported as the biggest worries for community respondents. Survey respondents did not specifically mention COVID-19 related issues when prompted to report their most significant challenge faced in the past year as was the case in the 2021 needs assessment survey data.

Provider Survey Findings

Data presented in this section are based on 62 provider surveys collected from Tempe human service providers in the fall of 2024. The provider survey aimed to assess the ability of the human services' system to address and meet the human services' needs of the community. All quotes are reported as directly stated by participants.

Issues Addressed by Tempe Human Services Providers

Please select each issue that you, or the organization you work for, currently address, improve, treat, prevent, educate, or otherwise directly help Tempe residents experiencing that issue.



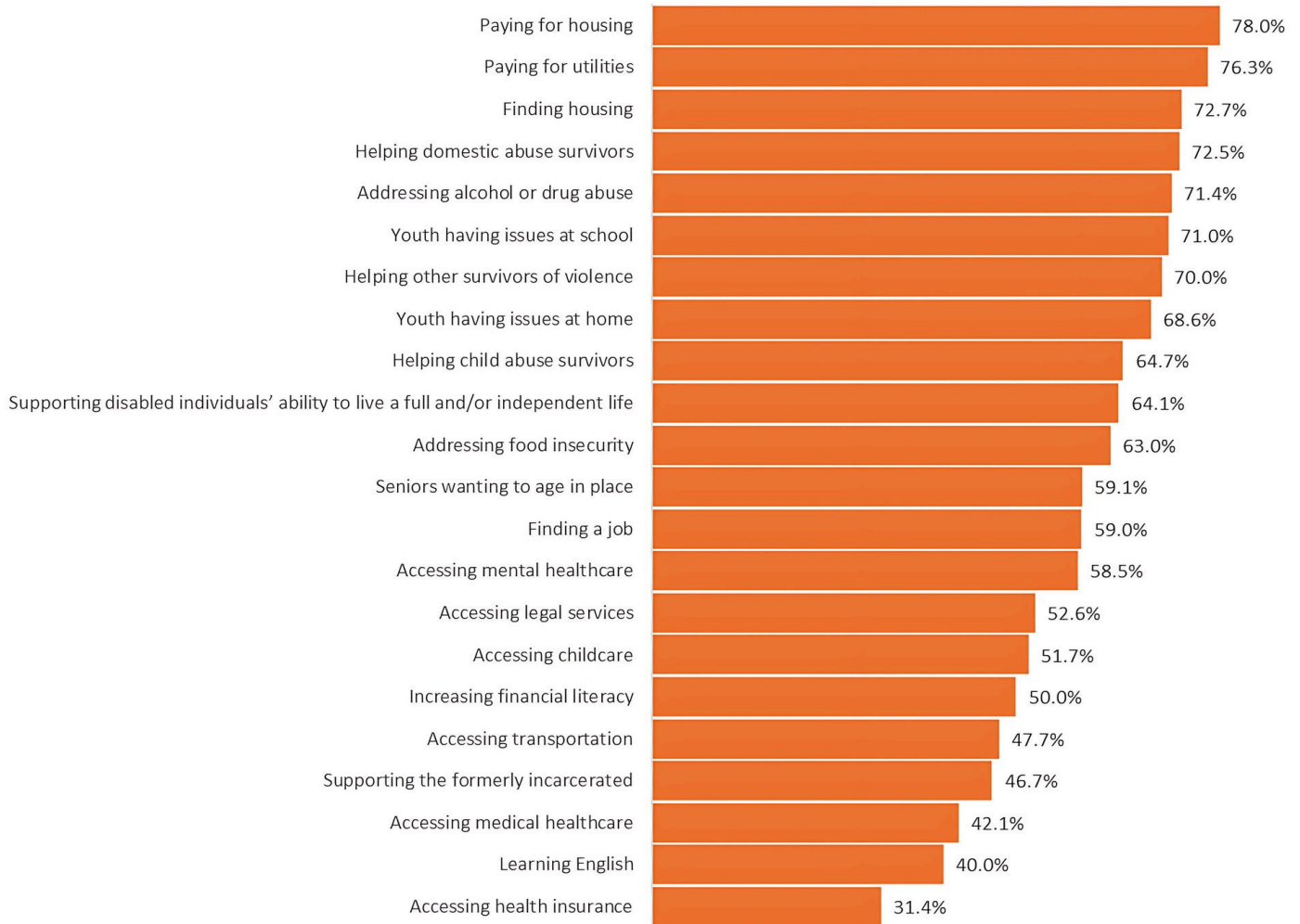
In 2023 Tempe had a higher unemployment rate than other geographical areas (U.S. Census Bureau 2023).

Top Issues Addressed

Food assistance
Housing
Youth development/support
Mental healthcare
Job services or training
Trauma or violence

Amount of Intervention Needed to Make Significant Improvement: *Extreme or Strong Intervention*

For each issue you indicated in question one that you or the organization you work for currently addresses, please indicate the amount of intervention needed for a typical person facing that issue to make a significant improvement.



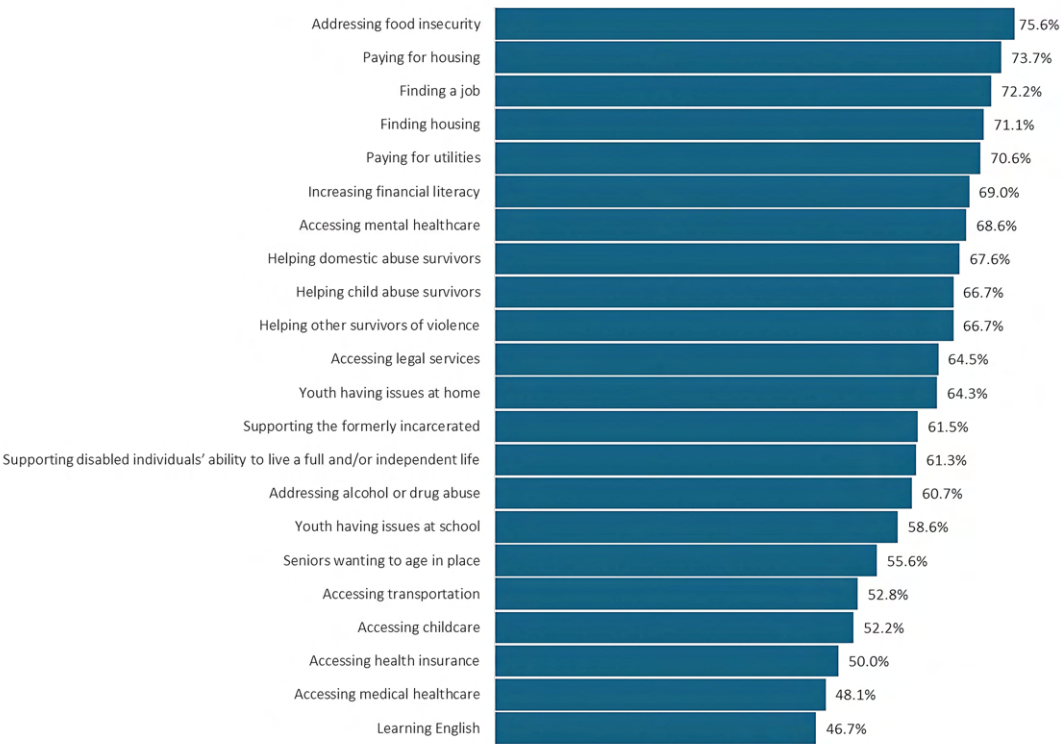
Since the previous needs assessment, median rent increased from below \$1,200 to nearly \$1,800 (Census Bureau, 2023).

Highest Amount of Intervention Needed

Paying for housing
 Paying for utilities
 Finding housing
 Helping domestic abuse survivors
 Addressing alcohol or drug abuse
 Youth having issues at home
 Helping other survivors of violence

Increased Organizational Capacity in the Past 3 Years

In the past three years, has your organization’s capacity to serve more residents facing each issue you selected above increased? For this question, capacity is defined as the combination of time and resources (such as money, staff, and hours of operation) available.



**Greatest Increases
in Capacity**

- Addressing food insecurity
- Paying for housing
- Finding a job
- Finding housing
- Paying for utilities

Top Ways the City of Tempe Could Help Organizations

Funding was the most reported way the City of Tempe could help organizations provide more services to residents.

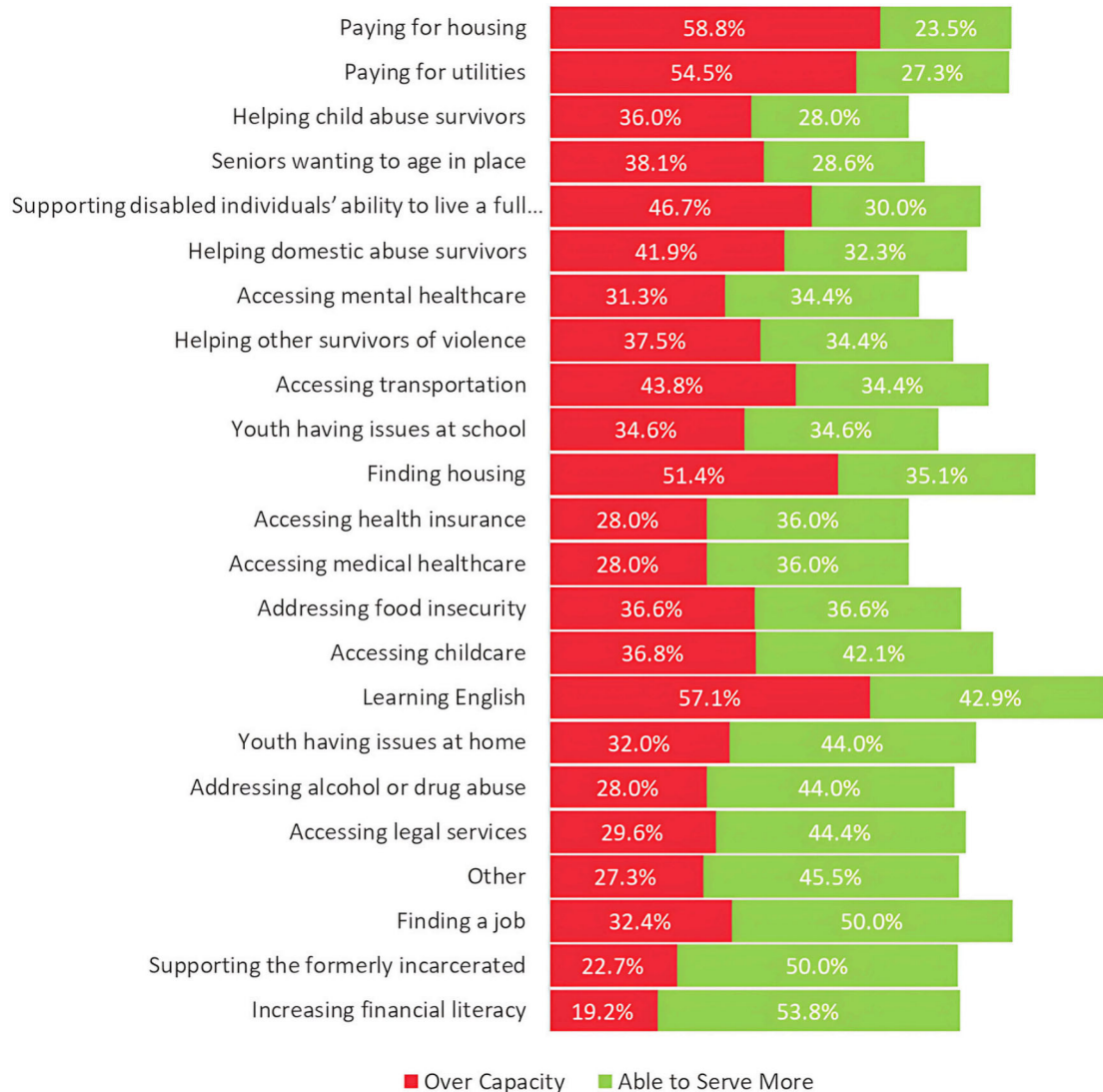


Transportation and affordable housing assistance were also mentioned as ways Tempe could help organizations provide more services to residents.



Comparison: Over Capacity and Able to Serve More

In the past three years, has your organization's capacity to serve more residents facing each issue you selected above increased? For this question, capacity is defined as the combination of time and resources (such as money, staff, and hours of operation) available.



Over Capacity by 50% or More

Paying for housing
Learning English
Paying for utilities
Finding housing

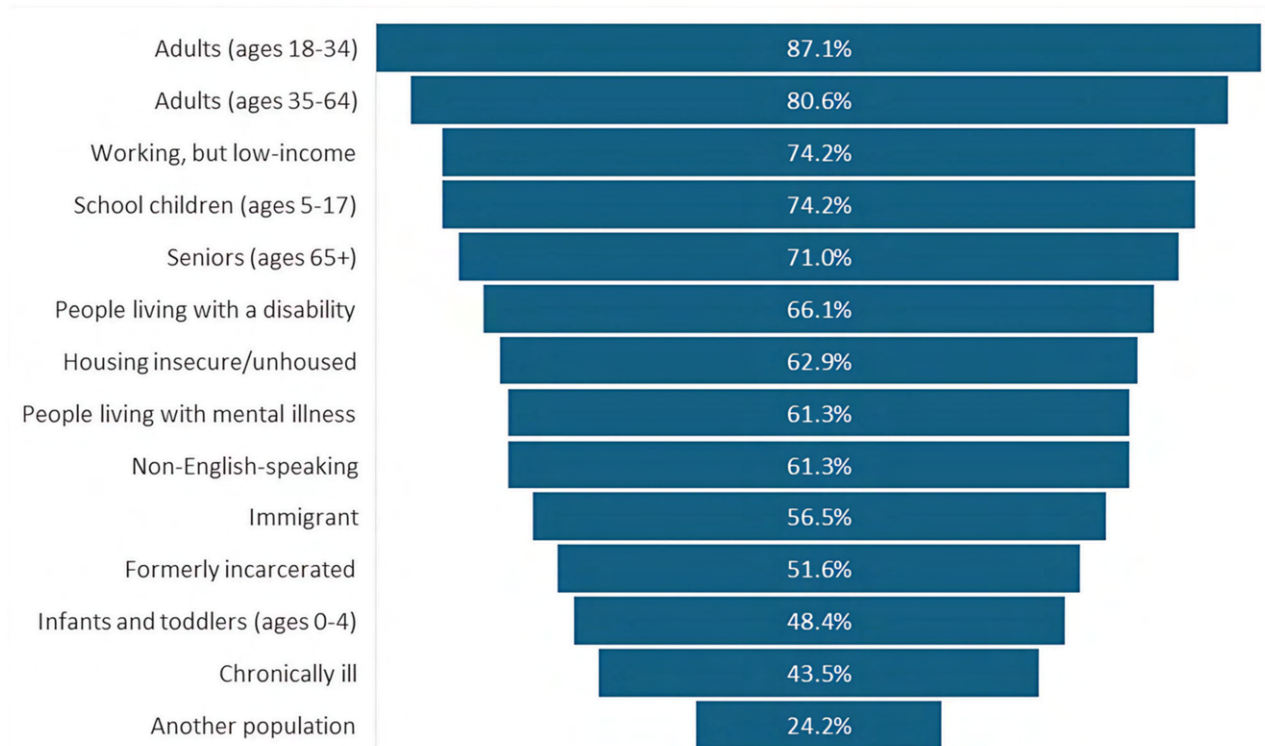
Greatest Ability to Serve More

Increasing financial literacy
Supporting the formerly incarcerated
Finding a job

Lack of **funding** and **staffing** were the main issues that limit providers' ability to serve more residents.

Populations Served

Which of the following populations do you or your organization serve? Please check all that apply.



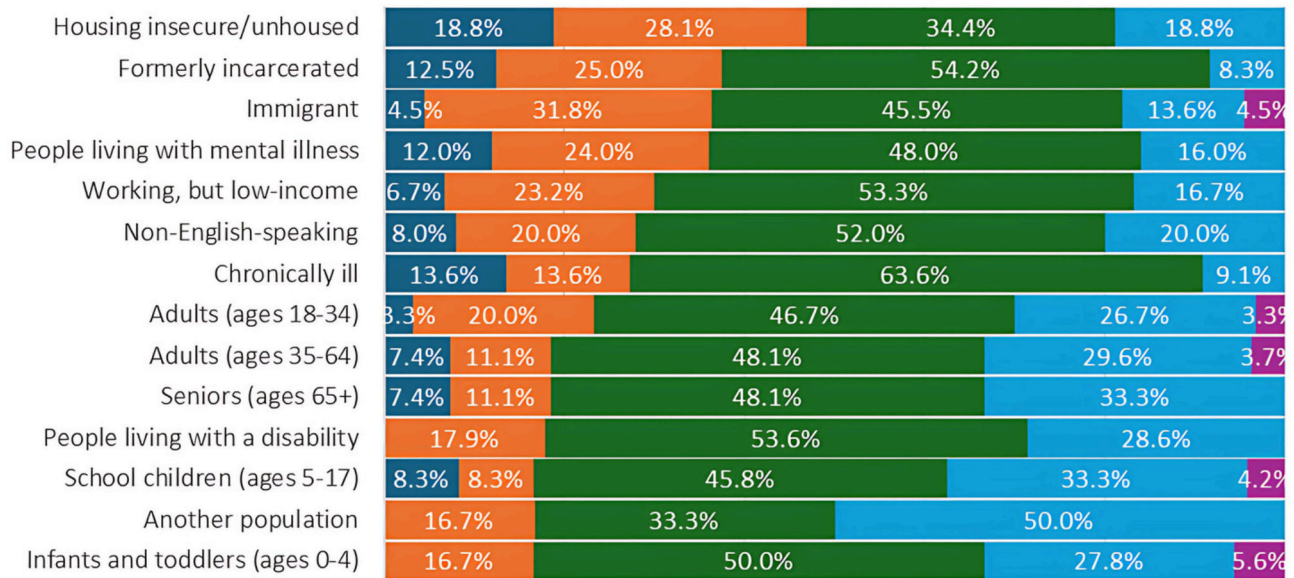
Top Populations Served

Adults
Working but low-income
School children
Seniors
People living with a disability



Perceptions of Meeting Needs by Population

Please mark how well you think Tempe is currently meeting the needs of people in each group that you or your organization serves.



■ Not Well at All ■ Not So Well ■ Somewhat well ■ Very well ■ Extremely well



Somewhat well, very well, or extremely well

Infants and toddlers
Another population
School children
People living with a disability

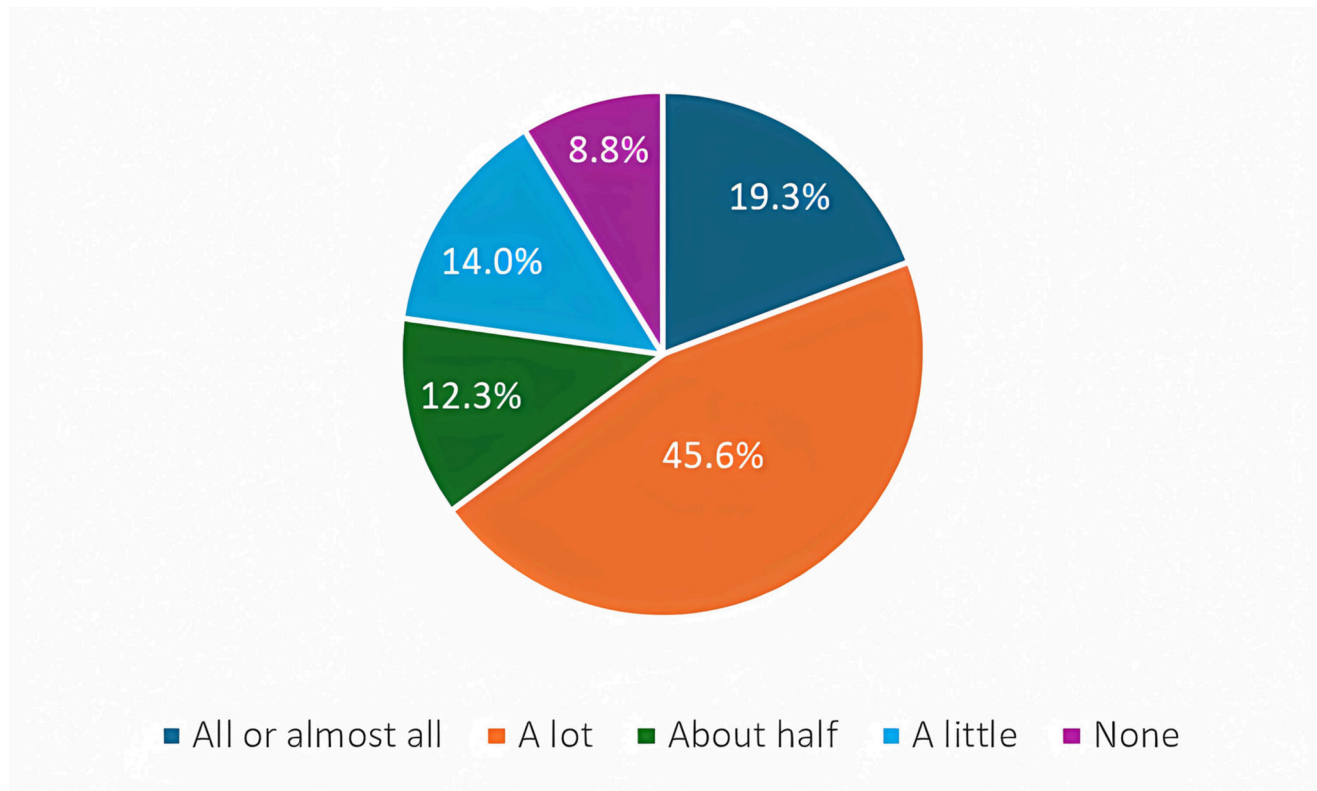
Not well at all or not so well

Housing insecure/unhoused
Formerly Incarcerated
Undocumented
People living with mental illness



2023 Tempe rates of homelessness were higher than other geographical areas in AZ or US. 2024 data showed a possible decrease in rate but official population data were not available at the time of this report (Maricopa Association of Governments, 2023; Maricopa Association of Governments 2024; U.S. Department of Housing and Urban Development, 2023)

Programming for Underrepresented Racial Groups



How much of your programming is focused on increasing access to services/resources for members of underrepresented racial or ethnic groups?

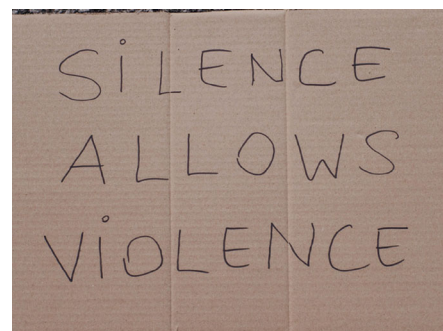
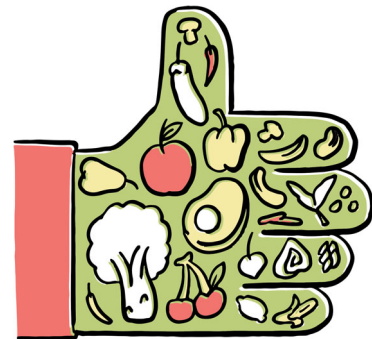
About three-quarters of programming is focused on increasing access for members of underrepresented racial or ethnic groups.



Increasing access

Greatest Community-Wide Challenges Regarding Human Services

Taking into account both the number of people experiencing a particular challenge and the severity of the challenge (amount of suffering it causes), what is Tempe's greatest community-wide challenge regarding human services?



Tempe's Top Human Services Related Community-Wide Strengths

What are Tempe's 1-2 top community-wide strengths with regard to human services?

Providers shared a variety of Tempe's community wide strengths. Strengths included food assistance, education, financial assistance, housing and homeless support, transportation, services for seniors, cultural activities, and domestic violence services.

Provider comments about community-wide strengths included:

"Awareness of Human Service Needs"

"Solution Focused"

"Encourages Community Involvement"

"Community Group Leadership"

"Good City Council and Mayor"

"Committed to Equity"

"Inclusive"

"Empathy"

"Stellar Outreach Programs"

"Loves its Citizens"

"Dedicated Human Services Staff"

"Response to Residents' Needs"

*"TCC Collaboration and Partnerships
with Emergency Response Providers"*

"Willingness to Do More"



Number One Suggestion to Improve Tempe's Ability to Address Human Service Needs

What is the number one thing that you think would improve Tempe's ability to address human service needs in the community?

Housing: Accessible, Additional, and Affordable

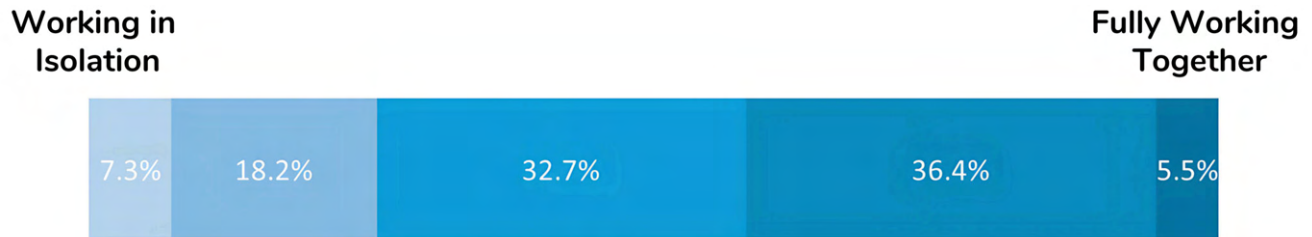


Additional suggestions included increased funding, increased outreach, mental health services, substance use treatment and recovery services, changing laws to not criminalize poverty and homelessness, funding for deaf and blind services, better coordination of services, increased collaboration with other cities and government entities, and the creation of a center with wrap-around services (i.e., one place for multiple services).

Despite higher median incomes, Tempe had higher levels of poverty than other demographic areas in AZ and US (U.S. Census Bureau, 2023f, U.S. Census Bureau, 2023g, U.S. Census Bureau, 2023h, U.S. Census Bureau, 2023).

Agency Collaboration

Please rate how well the different human service agencies in Tempe work together?



While very few agencies are *fully* working together, about 2/3 of agencies are *mostly* working together.

Fewer than 10% of agencies are working in isolation.



Providers shared reasons for their ratings which included:

"I think most of the agencies work really well together, there is always room for improvement."

"More communication and collaboration is needed between our agencies."

"Staff spend the majority of their time providing direct service to clients that come to their agency, that they don't have time to answer or return calls from other non-profit providers trying to assist additional community members."

"We work together by informing our patient community about the resources available to them by other agencies in the city of Tempe. We do, however, need a community website/page in which all of our agencies are listed with the resources that are available to our Tempe community members."

Continued Impact of COVID-19 on Populations Served

How would you describe the impact that COVID-19 continues to have on the populations you serve?

COVID-19 **continues** to **impact** populations served by Tempe Human Service providers.

These **impacts** include mental and physical health, finances, availability of funding and housing vouchers, affordability of goods, housing and resources, learning and absenteeism, hesitancy to come receive services, and isolation of senior adults.

Providers' comments included:

*"Children behind in school.
Mental health - isolation."*

*"COVID-19 continues to have a
moderate impact on the families
we serve."*

*"Less than in prior years but getting
better."*

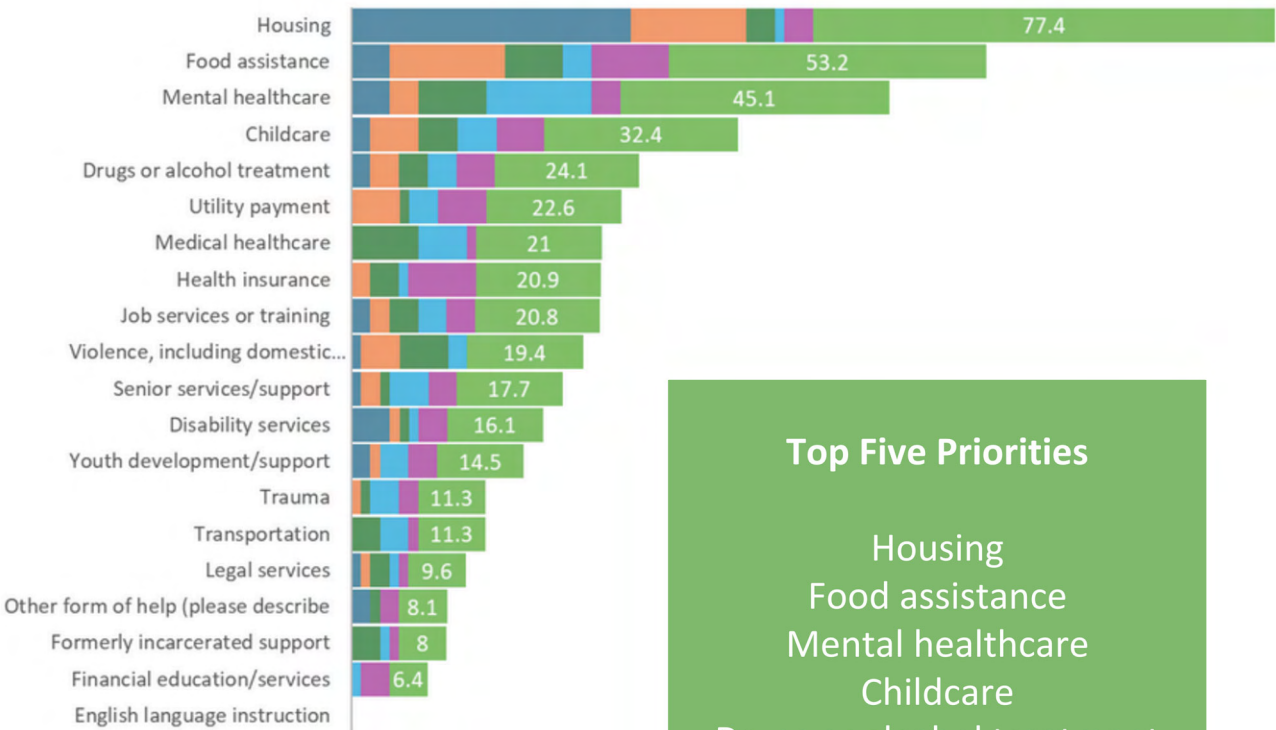
*"An extreme impact remains on seniors and
the Deaf, Deaf [&] Blind community."*

*"COVID-19 is still a concern and has
limited our capacities at domestic
violence shelters."*



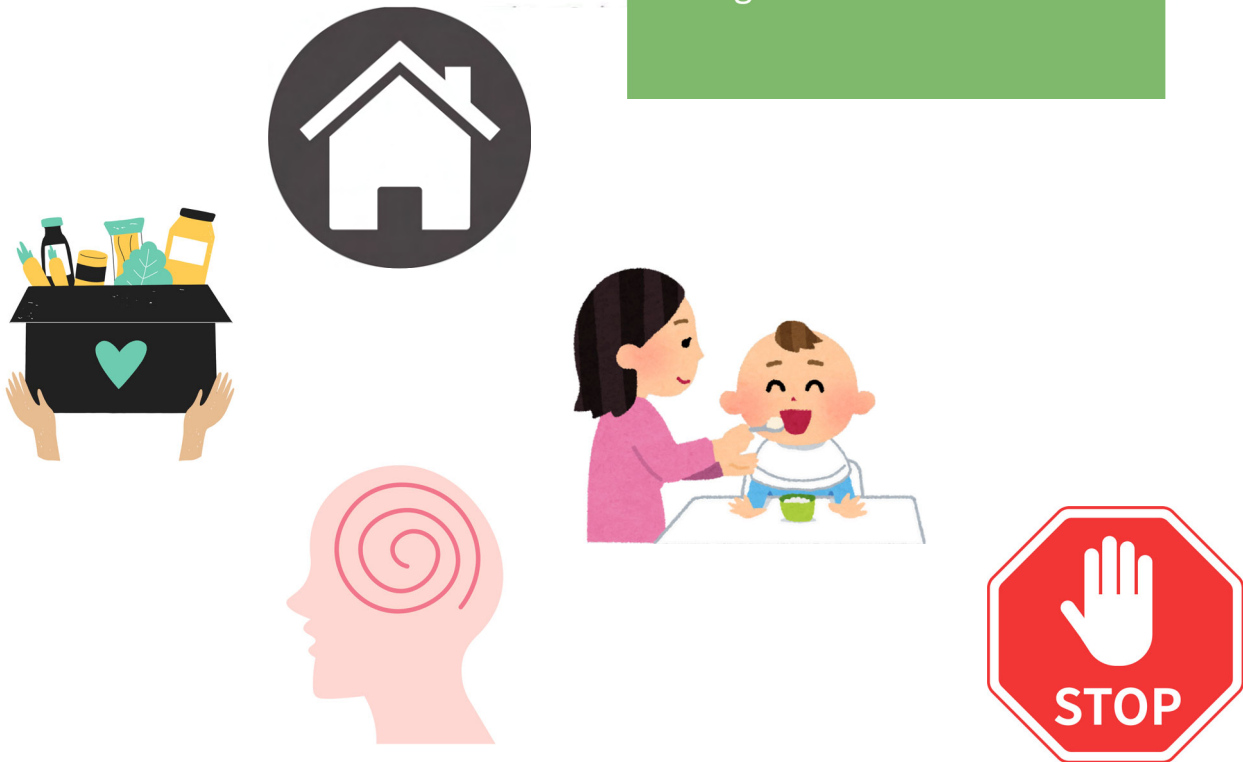
Priorities

If you were in charge of improving human services for Tempe residents, what would be your top five priority areas for action in the next five years? Please rank your top five priorities by entering "1" next to your top priority, "2" next to your second priority, and so on up to five (5).

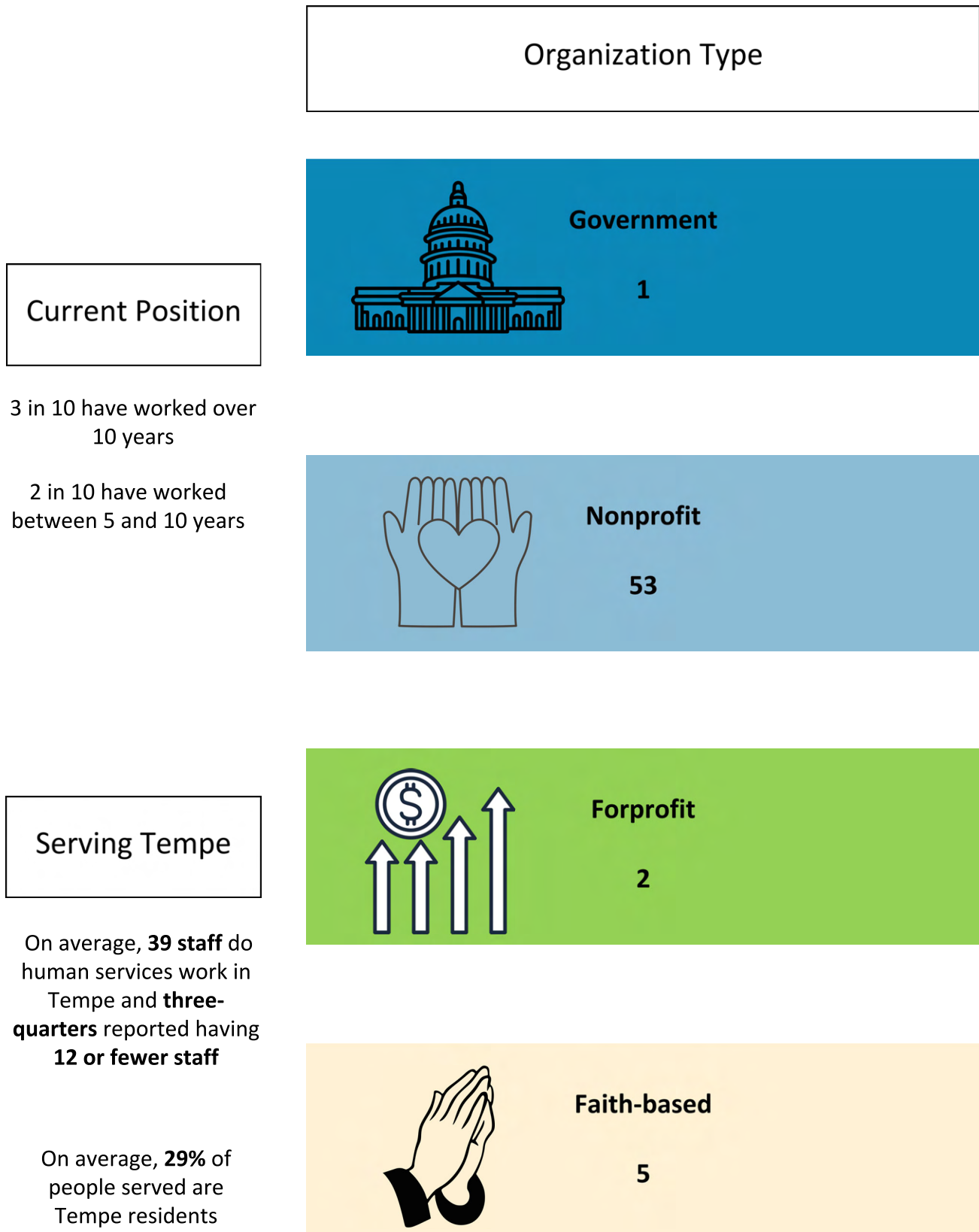


Top Five Priorities

Housing
Food assistance
Mental healthcare
Childcare
Drugs or alcohol treatment



Provider Demographics



Provider Comments

Please share below any additional comments you have about human services in Tempe.

***“Better than in other cities
the size of Tempe”***

***“It's hard work doing
what you do and I
fear it will only get
harder as funds are
cut.”***

***“Tempe values the needs of
young children, working
together to ensure access to
early education and support
resources. By partnering across
organizations, families, and
local agencies create a strong
foundation for children's
development and future
success.”***



***“We would like to
collaborate more with other
organizations in Tempe”***

Conclusion

Similar to the community survey respondents, providers reported that the community's greatest challenges for human services were housing, homelessness, mental health, food insecurity, domestic and sexual abuse, substance use, challenges for people living with disabilities, and funding. The issues reported by providers that needed the largest amount of intervention included paying for housing or utilities, finding housing, helping domestic abuse survivors, addressing alcohol or drug abuse, youth having issues at home, and helping other survivors of violence. On the other hand, providers shared a variety of Tempe's community-wide strengths including food and financial assistance, education, housing and homeless support, transportation, cultural activities, and senior and domestic violence services.

Providers reported being over capacity to provide services for the following issues: paying for housing, learning English, paying for utilities, and finding housing. Areas where providers reported still having the ability to serve more included increasing financial literacy, supporting the formerly incarcerated, and finding a job. A new question was added to the provider survey for 2024 to assess the degree to which organizational capacity may have changed over the past three years. Providers reported that the areas with the greatest increase in capacity to serve included addressing food insecurity, paying for housing, finding a job, finding housing, and paying for utilities. The number one suggestion from providers to improve Tempe's ability to address human services was to provide additional, accessible, and affordable housing. Providers reported that COVID-19 continued to impact the populations served by Tempe human service providers. Providers mentioned continued impacts on mental and physical health, finances, availability of funding and housing vouchers, affordability of goods, housing-related resources, learning and absenteeism, hesitancy to receive in-person services, and isolation of senior adults.

Focus Group Findings

In addition to the the community survey, SIRC also held four in-person and three virtual focus groups with a total of 40 Tempe residents. While analyzing the results from the focus groups it became evident that findings from the Individuals Experiencing Homelessness group would need to be reported separately to ensure that the experiences and unique perspectives of this group would not overshadow the overall focus group findings. Therefore the thematic analysis is presented in two sections: one covering themes and findings from five groups: Older Adults, Working Poor Individuals, Children, Youth, and Families, Individuals with a Disability, and Spanish Speakers; and one for the Individuals and Families Experiencing Homelessness group. All quotes are reported as directly stated by participants. The findings from the focus groups capture the voices of Tempe residents who have interacted with human services, providing valuable insights into their personal experiences and challenges. However, it is important to note that these perspectives represent a specific subset of the community and should not be used to generalize the experiences of all Tempe residents or areas outside of Tempe, Arizona.

The focus group data illuminated seven different themes:

1. Knowledge level of human services
2. Access to human services
 - a. Barriers to access
 - b. Service satisfaction
3. Affordability
4. Mental Health
5. Discrimination and Mistrust
6. Additional Services and Feedback
7. Additional Themes
 - a. Post COVID-19
 - b. Substance Use Services



Thematic Analysis: Older Adults, Working Poor Individuals and Families, Children, Youth, and Families, Individuals with a Disability, and Spanish Speakers

Knowledge level of human services



The focus groups started by asking participants about their knowledge of the different services provided by the city of Tempe. Some participants mentioned awareness and knowledge of programs and services including the HOPE team, the Tempe Community Action Agency (TCAA), the 211 hotline, Meals on Wheels, food boxes, and educational and recreational services. However, many focus group participants emphasized they had **little to no knowledge** about services offered by the city due to what they considered **poor marketing of the services**. In addition, many participants attributed the awareness they did have to word of mouth or communication with friends and families.

“What we're missing is the basic line of communication, letting everybody or what resources we have, in the form of a human being, not a recording, and not just a website.” – Older Adults Group

“I don't really know any resources in Tempe that are available. I know churches do food boxes”- Working Poor Individuals Group

“I think just some of the things that like we already talked about making the website more user-friendly, putting out flyers, I know more about the city's trash schedule than I do about the services that are offered for families” - Children, Youth, and Families Group

“It would've been good to know about this department and these programs so maybe I could've applied for housing or food assistance. [...] was also unemployed on a few occasions so it would've also been good to know about that.” Spanish Speakers Group

“One of the things I like down here at Mountain Park Health Center is, I don't know if it's once a week or twice a month, or whatever they do it. They set up tables in the parking lot, and they give out food. They give out clothing, they give out all of this stuff. And I thought, that's great. But again, if you don't know, how can we get the word out more that this is happening because I don't have any problems with what's out there. I have a problem with how to get the information to people who need it.” - Individuals with a Disability Group

Access to Human Services

Barriers

Participants were asked a series of questions about the quality of the human services, how easy or difficult they were to use, and the factors that contributed to or decreased their accessibility. Focus group discussions indicated that **lack of awareness of services** limited participants' ability to fully benefit from the services designed to meet their needs. Participants also mentioned that they felt **frustrated** by the use of automated message services by many programs instead of direct communication with an employee. Older adults mentioned that their **lack of computer skills** limited their access to online resources and lack of direct communication with an employee delayed their access to services. Meanwhile, participants from the family and disability groups mentioned that they felt frustrated by **income requirements** to access services since some of their incomes were slightly above the required limit making them ineligible to access the much-needed services.



"I think one thing that's fairly clear is that, at least for me, but I think for a lot of us, we like to talk to a person on the telephone with a human touch instead of having to access it. But I think it seems to be more and more go to the computer to find out the answer, whereas what we look for is kind of like the personal touch." Older Adults Group

"So, I think that right there is like a huge area of opportunity just for parents and families, because a lot of them do tend to struggle in not really knowing. If you're not in that circle, you don't really know what you're potentially missing that can help or support your family"
-Children, Youth, and Families Group

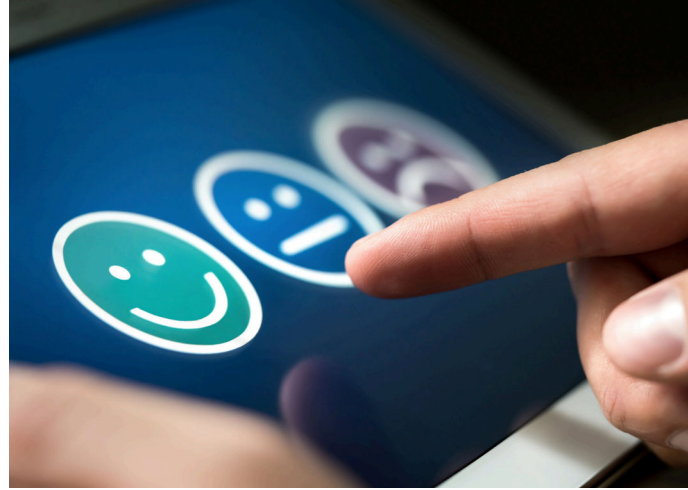
"I think even with how expensive things are right now with inflation happening and all of that, then the cost of living going up, we are still requiring people to make such a low, low income in order to approve them for any type of help." - Working Poor Individuals Group

"Like you said, you have to dig too deep. I don't go online much just because of that. You have to dig so far, and then I'm lost, so I don't do it." – Older Adults Group

"For me, I make too much money for the state to help me out. I have to pay for everything on my own... But I want to keep my job... If I didn't have a job, maybe they would help me. Right, that's the exact catch-22 we're talking about...the only way for [name] to get DDD services through the Division of Developmental Disabilities was to not work as much here. So, like to depend on the government more, so that the government could help rather than continue to be a productive, tax-paying citizen. It was a really sad thing. I want to keep working." -Individuals with a Disability Group

Satisfaction/Dissatisfaction with Services

This subtheme captured participants' discussions of satisfaction or dissatisfaction with the available services. Participants from the senior group agreed programs for seniors offered at the **multigenerational centers** were good at providing them with activities, classes, and tech support to enhance their well-being. One participant from the disability group highlighted the value of **food banks** in providing residents with enough protein, fruits, and vegetables to maintain healthy diets. Some agreed the **Orbit public transportation** system was effective and helpful while one participant with a school-age student praised the **after-school programs**.



Meanwhile, some participants expressed **dissatisfaction** with the lack of a **single point of contact** or one designated person who is well-informed about all services and who can provide direct assistance. Others criticized the time-consuming process of accessing services such as SNAP benefits stating that this could discourage individuals from accessing additional needed services. One participant from the disability group expressed dissatisfaction with increasing rents in income-based apartment complexes.

"And probably to add to that, our North Tempe Center is very good, providing us all kinds of things to get us together and to learn. Or fellow neighbors and stuff. Very good center. They do a wonderful job here. They really do. Very, very welcoming." - Older Adults Group

"I know, for me, I recently tried to apply for food stamps and assistance with that, because I don't make a lot of money, I found the process extremely difficult, and I just gave up and just said, I'll just tough it out. It was easier for me to suffer than it is to go through the process of trying to get help with food and groceries. I get emails constantly about SNAP benefits and things that I might be eligible for, but the process that is involved is too much for a single dad who's working and taking care of his kids and doing all that. I usually just chalk it up to I guess those services are meant for people who desperately need them or know how to use the system well. I can't believe how difficult I found it to get assistance." - Children, Youth, and Families Group

"And that new number, that, was it 311, is that it for Tempe? I don't like it. I used to call to change our trash thing, and I could call and talk to Joe. Now, I can't talk to Joe anymore. I got to go to 311, and have Joe maybe call me back. And then I don't have my phone with me when Joe calls back, so I can't get to him anymore." - Older Adults Group

"Okay, you're working. You got good money coming in. You rent the apartment. It is a thousand dollars a month. Okay, you lose your job, or you have to take a cut and pay because you got laid off, or whatever you get another job that's not paying as much. Why is it that they can raise your rent? But they can't lower it if it's income based?" - Individuals with a Disability Group

Mental Health

Focus group participants briefly discussed the mental health needs of their communities. One participant reported knowledge of the CARE 7 program in assisting residents with mental health challenges. One participant suggested changes to physical infrastructure could help benefit the mental health of residents while another stated that addressing financial hardship should be the starting point to reduce mental health challenges. Lastly, two participants mentioned the need for accessible mental health services including free counseling, medical evaluation, and a crisis hotline.



"Free counseling services. Free medical evaluation."-Spanish speakers Group

"I feel that if you have better infrastructure, like green infrastructure, or like try to make the city more walkable, that could also help overall, like everyone's mental health as a community, because we can all actually meet your neighbors, walk around. - Children, Youth, and Families Group

"In my opinion, everything that has to do with finances should be prioritized because I think that leads to a lot of psychological unrest or issues, so if the financial part is addressed, then I think that you get a break from psychological issues." -Spanish Speakers Group

"But the connection being able to call have and I don't know. We probably have what but a crisis line some way to reach out and talk to somebody about whatever it is If there is a crisis line, we call them Hotlines back home, if there is one...I can call if I need." - Individuals with a Disability Group

Affordability

Focus participants discussed how affordable the city was. Participants stressed the high costs of living in Tempe as urban life continues to rise. Housing prices, rent, utilities, and everyday expenses like groceries and transportation add up quickly, making it difficult for many people to afford a comfortable lifestyle. Wages often do not keep pace with the cost of living, forcing individuals and families to make tough financial choices including passing on promotions, not buying homes, paying for expensive healthcare, and halting professional careers to care for children. Thus, participants perceive rent caps, an income scaling system to allow all residents access to low cost services, and affordable healthcare services as beneficial.

"Rent is very high. I think food is high. It's on the high end. Utilities, what I like about city of Tempe is they do have that, like you can add a dollar to your bill to help out people that need help kind of thing. I like that idea. In the past, we have given into that." - Older Adults Group

"Tempe residents alone have to pay a lot, especially for rent. It's like almost \$2,000 just for a two-bedroom in some areas. Plus, depending on people's diets, you spend more on food, but there isn't much support or resources for Tempe specifically." - Working Poor Individuals Group

"So I would like to see more medical free medical care or minimal price cost for medical care, because senior citizens, even for myself, I'm on a fixed income" - Older Adults Group

"So, there's no affordable daycare here in Tempe. And if there is, it's very hard to access it to. Or like healthcare help, I tried with the state application to get the financial help, I got denied because I make too much money, again. But I don't make enough money to pay a daycare. So, it's like a loophole, like, well, then I'm in this limbo of, cannot afford a daycare, then my husband cannot work full time because we don't have anyone to take care of [daughter]. Yeah, it's very frustrating." - Children, Youth, and Families Group



Additional Services and Feedback

Focus group participants were asked about services the city could offer to improve residents' well-being. Participants from the **Older Adults** group emphasized the importance of designing a human-centered proactive outreach that includes direct communication with a service coordinator about their questions and guidance on how to access the services. Participants also mentioned the inclusion of resources such as social workers and lawyers at multigenerational centers. A budgeting class to help seniors with their finances and partnerships with restaurants so they can donate their food at the end of the day were also noted. Participants from the **Working Poor Individuals and Families** and **Children, Youth, and Families** groups stressed the need to provide residents with financial assistance for housing/rent, childcare, groceries, education (including training for individuals experiencing homelessness), and healthcare. Meanwhile, participants from the **Spanish Speakers** group suggested the city should ensure that services are accessible in the languages spoken by residents and to provide job opportunities to individuals experiencing homelessness. Overall, participants agreed that better communication about the services available is needed and suggested services should be marketed using different platforms including TV and social media.

"You know, if you had it in a book you could read the title of the agency, the name of the agency, and then look under there and say, Oh, they are for what I'm looking for. But we don't have a place like that. A service like that they used to give out back in the day before your time, before her time, before everybody's time. We had phone books." -Individuals with a Disability Group

"Maybe TV advertisements or TikTok is huge now. So even doing like TikTok ads or having the marketing department in the city of Tempe put something on their social media for more people to see." - Working Poor Individuals Group

"There should be someone in that big building, who can serve as a coordinator, or whatever, a human being, not hello, I am here, electronic, you can talk to me in full sentences." - Older Adults Group

"Better assistance in regards to languages that are spoken in the city, for people who come from outside that either may already be established in the city, or even temporary workers. Also, legal assistance when it comes to daily life issues, including the benefits that we could get from the city." - Spanish Speakers Group

"I mean, like in a perfect world, you can have an information center at like the city office or the library or something that has a dedicated person to just help people, I mean I'm sure you'd want to talk to people answering calls or just sort of like an informational position where people could go when they have questions or when they need help, whether it's people with disabilities or anyone who's looking for assistance and doesn't know where to go. I know the state is really hard to navigate, so having resources available locally within their own city would be helpful" - Individuals with a Disability Group

Thematic Analysis: Individuals Experiencing Homelessness



Knowledge of human services

When asked about the human services offered by the city of Tempe, participants were well-informed about the multiple programs and resources available including the HOPE team, the Tempe Community Action Agency (TCAA), the Central Arizona Shelter Services (CASS), and the 211 hotline. Participants mentioned these programs and organizations provided services such as help with obtaining IDs, housing vouchers, and accessing resources such as emergency rental assistance. One participant mentioned the IHelp Emergency Shelter program that provides homeless individuals with shelter at local churches. However, participants mentioned some of these programs have decreased their services throughout the years even though they seemed to have worked for the community.

“Like I said, they had programs that worked, and for some reason, they decreased them over the years. So, when they had these programs, they had to have whatever in place to make sure that they at least meet a certain number of people. I remember the housing vouchers, the permanent housing vouchers they were talking about, I was on that list. I didn't realize they developed a system to drop me to the bottom of the list. They didn't tell me that. But I remember all these things. They have a lot going on out here, and I don't know why they started decreasing”- Individuals and Families Experiencing Homelessness Group

“They have the HOPE team, but the HOPE team, they don't provide much or even go out as much for help. So, they would help you with your ID, housing, or housing vouchers, things like that, but they really don't do a whole lot. They even had several homeless programs, but they don't do any of that now”- Individuals and Families Experiencing Homelessness Group

Access to Human Services

Barriers

Participants discussed a number of barriers to accessing shelter and housing including limited shelter spaces and few pet-friendly options, housing vouchers based on the documented number of services accessed in the past, housing application fees, and lack of knowledge on how to navigate the system.

“So, me personally, when I came down here and I got, I was on the streets, I tried getting into a shelter but I couldn't get into one, not even with my service dog. I wouldn't go to CASS because when I went to CASS, I still have a scar on my face from being at CASS.”- Individuals and Families Experiencing Homelessness Group

“So, when people don't go into places like CASS or aren't in a shelter or aren't here or there, you're not pinging in the HMIS system. And if you're not pinging in the HMIS system, your name will drop down to the bottom of the wait list for your housing voucher. And these are things that are not being told to the people that are homeless. They aren't being told how the system actually works.”- Individuals and Families Experiencing Homelessness Group

“So, they give you so much time to get housed and then it expires. So, what they're doing is they're giving you these vouchers. They're making you go spend \$25, \$35, \$45 for an application fee and nobody is accepting these vouchers. Nobody. Nobody. So, what they're doing is they've given them to other people, and people will go in to these places, and they'll just run off. Once the help is done, they'll run off. They won't sit there and try to figure out how to come up with the rent. They just run off. So, they have a long track record of homeless doing that. So, that's why nobody wants to accept the voucher anymore.”- Individuals and Families Experiencing Homelessness Group

Service Satisfaction

Overall participants expressed dissatisfaction with many of the available services as they were not helpful in assisting them with their specific needs. Participants were disgruntled that housing vouchers were not being accepted by apartment complexes, and also discussed limited housing availability, lack of understanding of mental health needs, and lack of empathy from service providers toward their situation. These barriers have led to distrust in service providers among the homeless population.

“Yeah, I just want to say about these vouchers that they're giving out from, what is it, CBI that's giving them, Home Inc., these vouchers are trash. They're garbage. Nobody's going to take these vouchers. So, that just means they're handing us out vouchers that are no good.”- Individuals and Families Experiencing Homelessness Group

“The Rapid Rehousing ones, yes, I will agree, kind of are not as great, especially if you have a hard time holding down a job that some people do, and so, then you're still set up for failure. Now, permanent supportive housing, I do have that voucher. Now, the one thing I found that came with that is that there's limited housing. When you go and you get your voucher, it is like a race to get to that location and get your application, and hopefully before the person before you, because if they've already submitted their application and they get approved, that spots gone. So, now you're back again looking for another spot.”- Individuals and Families Experiencing Homelessness Group

"I'm a vet, and I just got out of prison. I've been trying to get my meds for over a month. The other day I had to go to the emergency room because the whole team thinks I'm on drugs. But when I have my anxiety attacks and my PTSD, I take drug tests monthly due to the fact that I'm trying to fight for my daughter so I can see her. They were accusing me of using methamphetamines because I was so agitated and they just straight up won't help me." - Individuals and Families Experiencing Homelessness Group

"So, when you are supposed to be on the HOPE team, and you're supposed to be... I'm coming in and I've got tears crying. I've been keeping my son off the streets. I've been doing everything I can. And I go to you and you want to offer me a spoiled peanut butter and jelly sandwich. Do you want to tell me if I've got anywhere else I could go, like..." - Individuals and Families Experiencing Homelessness Group

Mental Health

Participants recognized that mental health problems are part of the homeless community and that mental health professionals are essential to ensure individuals receive the mental health services they need. One participant mentioned the need to have mental health providers at every organization providing services to the homeless while another participant stressed the need to prioritize mental health services over criminalization.

"Every organization needs somebody that is there for mental health because every shelter that I was at with Hope had somebody just screaming and just..."
- Individuals and Families Experiencing Homelessness Group

"I know I've been in jail with people that have this mental health thing. I'm like, well, why are you in here, it's supposed to be getting priority." - Individuals and Families Experiencing Homelessness Group

Discrimination and Distrust

All focus group participants agreed homeless individuals are often discriminated against and criminalized which has led to a general distrust of city officials, law enforcement, and assistance programs. Participants from the homeless focus group mentioned they often feel misunderstood and stigmatized for their living situation. They reported being barred from using public spaces and penalized for not having a place to live. Current policies and law enforcement practices have been enacted to prevent individuals from using public parks to sleep, to restrict mingling around certain public spaces, and to limit using benches to avoid sleeping on the ground.

"What are we supposed to do? They're building all the parks for the tourists. What about the parks for the homeless? There used to be parks where you could camp. I was going to say, I've noticed too that I think they have a lot of these services out there, but for some reason, they conveniently don't inform people and then they make these laws now to use them against you. They use the services against you instead of using them to help you."

- Individuals Experiencing Homelessness Group

"I've seen somebody get set on fire while they're asleep. Like, these are things that are real. And they're not seeing these things, but they think that putting us in a perpetual cycle of incarceration for us losing our homes, whether it be from one-parent housing that only can make so much money, mental health. You got veterans that put their life on the line for this country, and you got them out there on the street. That's sad. That's sad. And that's just showing me the type of world we live in."

- Individuals Experiencing Homelessness Group

Additional Services and Feedback

Focus group participants offered suggestions on the additional services the city could provide for the homeless population which included accessible hygiene services, legal assistance, employment opportunities, accessible shelters, and better communication and transparency. Participants offered suggestions and stressed the need to access low to no-cost laundry services to wash their clothing and the availability of public showers. Access to showers was identified as an essential element to obtain and maintain employment and avoid panhandling.

"Luckily right now, I'm fortunate I just got a job, but it sucks where I can't even clean up to go to this job. And I've asked for help, vouched to go to someone just to get cleaned up. I just need help for two or three weeks so I can get my first check. But there's no help for it, like we can't even camp out somewhere where we can set up a tent because we are camping."

- Individuals and Families Experiencing Homelessness Group

"I have to search high and low and try and find places that will help me do my laundry without hitting a street corner and still flying a sign or going out and panhandling and doing the things just like I was doing when I was on the streets and homeless. To make money, I don't have those kinds of services. My clinic can't even give me those services."

- Individuals and Families Experiencing Homelessness Group



Participants also mentioned the need for free legal assistance to resolve outstanding fines or legal issues and to navigate bureaucratic processes that prevent access to services and benefits. Another participant reiterated the need to make shelters pet-friendly, especially for service animals, as pet restrictions are a barrier for pet owners to secure temporary shelter.

"A lot of homeless people will have legal troubles, and they don't know how to navigate it, and they get jammed up, probation, jail, things like that." - Individuals and Families Experiencing Homelessness Group

"Like they need to have certain services for people who they feel are going to, they've got to help people who are trying to get off the street, who are trying to make a better way for themselves. You've got to help people like that. She's got a service dog. Why aren't you accepting pets? Like, that's the most ridiculous thing I've ever heard."
- Individuals and Families Experiencing Homelessness Group

Lastly, participants agreed that volunteer-based programs and services are better, as volunteers are seen as more caring and compassionate than paid employees.

"But it also comes down to people. If you put volunteers into these positions, you will find a lot more people being more caring and compassionate to people, instead of people with a paycheck. People with a paycheck, that's their job. They have to do these things. They're not going to do it to their full potential..." - Individuals and Families Experiencing Homelessness Group



Additional Topics

Focus group participants from the **Older Adults** and **Working Poor Individuals and Families** groups were asked three additional questions related to increasing demands for services related to physical health, mental health, or substance use disorder and the lessons or insights learned from the COVID-19 pandemic. The theme *additional topics* was included to capture these brief discussions. These themes were categorized into two sub-themes, Post-COVID-19 Services and Substance use.

Post-COVID-19. Participants from the **Older Adults** and **Working but Working Poor Individuals and Children, Youth, and Families** groups reported that after the pandemic people are more guarded; some things never came back, and many processes can be accomplished online.

"People are more guarded and more concerned. At least we can wave across the street or, you know." - Older Adults Group

"Yes. Somethings never came back. Somethings never came back after COVID, not fully."-Older Adults Group

"I feel like we also learned that a lot of things can be done online or through a form that's done online. So, you don't have to go into actual facilities to turn in paperwork or show who you are."-Working Poor Individuals Group

"I think we learned that we can spend less time filling out paperwork at doctor's offices and we can do it all from our phone."-Working Poor Individuals Group

Substance Use Services. Participants from the Working but **Working Poor Individuals and Families** group provided suggestions on how to address drug use/abuse in Tempe. Suggestions included partnerships with drug reduction organizations, creation of a safe use center to reduce the risks associated with drug use and provision of welcoming spaces for AA meetings.

"Safe use center, teaming up with shot in the dark, safe drug use meeting, light medical training and free Narcan"- Working Poor Individuals Group

"I know I have been on the lookout for a DBT group, therapy group. I've seen more open and public drug use and a safe use center would absolutely help and reduce risk"- Working Poor Individuals Group

"Having more accessible meetings for like AA and A, those type of things. Or having a specific place instead of random churches, because I know a few people don't like going into those type of facilities, they feel uncomfortable there. So, a more welcoming place for meetings, other like health clinics for them, for their sobriety, like a methadone clinic or something like that."- Working Poor Individuals Group

Conclusion

While the city offers a wide variety of human services, focus group findings showed that many participants had little to no knowledge of the services offered by the city. Some focus group participants mentioned awareness or knowledge of a few programs and services addressing housing, homelessness, food insecurity, and educational needs. Participants often attributed their lack of awareness to the poor marketing of the services and their reliance on informal communication about how to access them. While some participants were satisfied with some of the services offered including those provided at multi-generational centers and schools, many expressed frustration with the lack of a central point of contact, a person they could call to ask for guidance on how to navigate the services. Participants viewed this as an essential service the city should provide as online resources might not be accessible to those with limited computer skills or access to technology, including seniors and people with disabilities. Participants also expressed concerns and frustration with high living costs and low wages that forced many individuals to make tough financial choices such as passing on a job promotion and home-ownership opportunities, paying for high-cost healthcare, and pausing professional careers to care for children.

Participants also discussed income-based services as a barrier to accessing certain programs. Some participants reported not being able to access services such as low-cost childcare because their incomes were slightly above the required limit. Meanwhile, residents might be aware of state services that could cover their needs; however, due to the time-consuming processes of finding, applying, and obtaining various state services, some participants reported being hesitant to seek any additional services after these experiences. This frustration that accompanies the burdensome process of applying for services could explain why some residents do not access services. Participants from the **Individuals and Families experiencing homelessness** group reported several barriers to accessing services, including limited shelter spaces and few pet-friendly options, housing vouchers based on the documented number of services accessed in the past, housing application fees, and lack of knowledge on how to navigate the system.

Focus group participants were asked about services Tempe could offer to improve residents' well-being. Participants emphasized the need for accessible communication channels and stressed the importance of designing human-centered proactive outreach that includes direct communication with a service coordinator. Participants also mentioned the inclusion of resources such as social workers and lawyers at multigenerational centers. A budgeting class to help seniors with their finances and partnerships with restaurants for food donations were also noted. Participants from the **Working Poor Individuals and Families** and **Children, Youth, and Families** groups stressed the need to provide residents with financial assistance for housing/rent, childcare, groceries, education, and healthcare. Participants from the **Individuals and Families experiencing homelessness** group offered suggestions on the additional services the city could provide for the homeless population including accessible hygiene services, legal assistance, employment opportunities, accessible shelters, and better communication and transparency. Meanwhile, participants from the **Spanish Speakers** group suggested the city ensures services are accessible in the languages spoken by residents. Overall, participants agreed that better communication about the available services is needed and suggested services should be marketed using different platforms including hard print, TV, and social media (e.g., TikTok).

Key Informant Interviews Findings

In addition to the administration of the provider survey, seven key informant interviews were conducted in late 2024 with representatives from human service agencies that provided human services either directly or indirectly to Tempe residents. All quotes are reported as directly stated by participants.

The key informant data illuminated three themes.

1. Human service needs of individual community members and families with insights on the needs and gaps around social determinants of health in areas of education, economy, health, substance use, food insecurity, mental health, costs, housing insecurity, and needs of special populations
2. System and organizational capacities and concerns, funding for services, and communication about services
3. Suggestions and ideas on improving human services in Tempe

Human Service Needs

Across the interviews, interestingly the informants did not only name the need for which they are mainly providing services, but rather discussed root causes of problems especially undiagnosed trauma. This was certainly the case when the discussion centered on any of the target populations identified by TCC: Older Adults, Working Poor Individuals, Children, Youth, and Families, Individuals with a Disability, Individuals and Families Experiencing Homelessness, Undocumented People, and Families, and Domestic and Sexual Abuse Survivors. Informants pointed out that these individuals and groups sometimes know about the availability of various services but also need human services offered in different ways and locations. Further, the human needs for food and shelter have long been seen as basic necessities, which is why they often rise to the top as well. Interviewees acknowledged that food and housing services exist, but these topics were also mentioned in the discussions of more services needed in Tempe on an ongoing basis. Food insecurity and homelessness were also presented as common and corroding physical manifestations of (un)diagnosed trauma.

You know, low income and poverty are huge, huge issues for our population as well. Because if you are more concerned about putting food on your plate and those things take a second place, or third place, or fourth place in what your daily priorities are you know, if you, if we have those basic needs that need to be addressed first, your first priority may not be a developmental evaluation for your child, who's, you know, 2 years old. - Key Informant



Service

Help

Guide

Housing Insecurity

Leading the most pressing issues was the central theme of housing insecurity and homelessness based on several mitigating factors of economy, increasing costs of rents and/or mortgages, and fewer local, state and federal resources. These concerns have contributed to the rapid increase of new families – from all ages – experiencing homelessness and many for the first time due to inability to pay rent and / or mortgage and sometimes foreclosure or eviction. There is seemingly less affordable housing and although efforts are going forward to develop shelters, elder care facilities, and affordable rental and ownership housing options, the current pace of need has surpassed availability, thus continuing to raise the profile of this issue.

Senior homelessness, huge issue. Seniors at risk of homelessness, huge issue. Lot of them women homeless for the 1st time. - Key Informant

A lot of unmet basic needs not being met – families are looking for affordable housing- the housing affordability. We've seen a dramatic increase in the number of evicted families. - Key Informant

What we know is that disproportionately African Americans are homeless on the streets. - Key Informant

The challenge we're seeing is individuals who are losing their housing later in life with more health needs but wanting independence and not knowing again how to navigate systems. - Key Informant

We don't get told how much money we have to serve the community, you know. So I could go on and on. So there have been significant changes to the way homeless prevention services are funded to local nonprofits that have made it more difficult to serve the community and made it more difficult for people to get access to services. A lot of it. - Key Informant



Food Insecurity

As food insecurity for Tempe residents continues to be a concern identified by informants, this is coupled with the fact that overall systems funding and resource allocation has shifted and reduced in many cases. While there is a concern around families and homeless persons experiencing food insecurity, college students, young adults and seniors are also now being affected. Several mentioned that the city does have food banks and provides SNAP benefits, but there are times when these resources run low, especially with fewer providers and less subsidies. And demand has outpaced supply with daily household numbers as much as doubling what they were just a few years ago and nonprofits dealing with bare pantry shelves.

But our food insecurity in the community is for all ages. That is a huge area of need for a number of reasons. One because of economic, you know, challenges going back to pandemic also because in our community, our state, our county, there has been a shift away from food insecurity funders like United Way groups as they have moved to other areas of emphasis.

- Key Informant

Families experiencing food insecurity – we have programs whether it's food banks, SNAP benefits, but helping support those families when resources run low. Food insecurity is also an issue for college age students and young adults – they come to us and they receive food for the program they're participating in but we refer them to other resources also.

- Key Informant

Mental Health

Also at the forefront of the needs mentioned across the provider informant continuum was the major stressor of mental health and its related trauma. This trauma is presenting itself in the Tempe community in mental health issues and most visibly in those who are unhoused or underhoused based on environment and community factors of what are referred to as social determinants of health: namely high cost of childcare, increasing rent and home costs, substance use, income/employment, financial burden, and lack of food. The informants described that Tempe community members are concerned with the fulfillment of their and their family's needs, desires, or expectations especially among these areas.

I think that the needs are that people are struggling with a variety of complex symptoms if you will that result from trauma and we are seeing that in the form of home, you know, people not having access to housing, people with substance use disorder people with some either general mental health issues or serious mental health, mental illness, overall, just a lack of ability to navigate complex systems, problem solve and just live successful lives....just to wrap that question up the mental health and the well-being of our young people. I think we're still dealing with some of that social, emotional well-being coming out of the pandemic and it's contributing to the isolation which is continuing to grow and add to our elder mental, well-being challenges. - Key Informant

Economy and High Costs of Living

The economy and increased costs of living are impacting the community members at an alarming rate – much faster than the providers can support. There was mention of those who work in Tempe not being able to afford to live in the city as rising rents and mortgage prices had exceeded their clients' and co-workers' ability to pay to live near their work. Informants spoke of knowing people who had second and third jobs to support themselves and were looking for workforce development options as a way to improve their lives. The economic impacts mentioned include additional related topics such as where children went to school and the transportation systems not always available to get people to school and work.

And so that just the idea that someone can be working 40 hours a week and wind up homeless is just because of how outrageous childcare expenses are - the availability of affordable childcare and all the things it takes to be a single parent, it's heartbreaking, and that should not happen. - Key Informant

Perhaps, if they previously have been renting here, and then the cost of rent goes up, then that forces a family to move out of the city and then disconnect from educational services and family services that they were receiving and they might not be able to stay within the district if it's just too far for them to travel, even if they wanted to stay within the elementary school or the high school district, and they might have to move to another city where it is just more affordable. And then we just know that their educational outcomes might then suffer, as well as all the other social, emotional things that can happen in terms of loss of friends and group social connections for a young person as well. - Key Informant

Health Care Access

While access to health care was not top of mind, it was another social determinant of health that came up in these interviews. Respondents discussed how health care services have changed, still need improvement, and have a real and lasting impact on overall health and safety in Tempe.

But you know, doctors' offices began to really explore telemedicine because of Medicaid and Medicare allowing it. So we what we found was, we had a lot of our impoverished folks who did not have access to affordable high speed data. - Key Informant

Complexity, I think, is another is another big issue. Health care systems, complexity. And even the Americans with Disabilities Act is over 30 years old now. Some of these laws are over 50 years old. In some ways we've made a lot of progress, and in some ways we've made very, very little progress. In my opinion we haven't made very much progress at all. - Key Informant

Substance Use

Although those with substance use issues were not among the priority target populations identified by TCC, the corroding thread of substance use seeped through many of the interviews when discussing the most pressing issues facing their clients. Like trauma, substance use is apparent among the community and those in need of assistance span multiple populations. Providers indicated they were needing to incorporate knowledge, interventions and solutions for this issue into their services.

So I think it's probably, you know, correlated to increase in housing prices, housing availability, drug crisis, mental health crisis. You know all sort of all of those things on the rise. - Key Informant

...high availability of Fentanyl in our community - Key Informant

It would just be what I've observed in the parks. From just seeing folks who look like they might be under the influence to straight up physically abusing drugs. - Key Informant

...young people who are turning to different substances to alleviate anxiety. The pressures that they're feeling when they're in school. But definitely because I am part of an opioid response team I have looked at the data and know that there has been a spike, you know, in the last year it's started to, but it's still higher than it was previously. - Key Informant

We do come across families active in addiction. We come across families that are active in recovery. And so our role there is to support the whole family. And I think that's another area of complement you know we do have the 12 step resources, the resources for Community Bridges, you know some of the other recovery centers within Tempe. And we're able to talk to families that express need in that area, and we do encourage, you know, certainly encourage recovery to the extent that that is our role. - Key Informant



Needs of Target Populations

Key informants were asked about their knowledge and thoughts regarding the target populations identified by TCC: Older Adults, Working Poor Individuals, Children, Youth, and Families, Individuals with a Disability, Individuals and Families Experiencing Homelessness, Undocumented People and Families, and Domestic and Sexual Abuse Survivors. Although asked, most informants did not usually feel qualified to provide comments on these groups and their needs other than what was already presented. Although there are not specific comments or responses for those target population groups, there were a few instances noted that spoke of services or lack thereof for those subpopulations.

Quite frankly of the services that we offer, I don't ask citizenship status...We don't ask your status. You're in crisis. Our job is to help stabilize you and get you plugged in, either to the hospital or to whatever service you need. - Key Informant

So by having to remain in the shadows, they're not getting the outreach and education they need, so we don't see them until they're in crisis, which then costs everybody a lot more. - Key Informant

[as to immigrants or undocumented people] I mean, as far as care for their children, those services are being met. Because again, that's what we have in the facility. - Key Informant

Our children with significant disabilities, developmental intellectual disabilities in group homes and sheltered workshops, and we don't really see that these children can work and should be working in the in the community. It is a systemic kind of way of thinking. So I think low expectations of people with disabilities is a huge concern in the community. And sometimes those low expectations come from parents and family members, you know. Senior homelessness, huge issue. Seniors at risk of homelessness, huge issue. Lot of them women homeless for the first time. - Key Informant



Systems and Organizational Capacities

In addition to individual and family needs, the key informants were in a unique position to describe various aspects of Tempe services systems and organizational capacities and concerns. Each group and funded agency provided specific services to people very much in need; organizations may provide singular or multiple services and sometimes provide overlapping services in different locations. Thus these key informants were able to perceive resource allocation and systems capacity management from a managerial and organizational level, which is a higher-level vantage point than that of individuals and families.



I think it's not so much what services are necessarily missing. It's the resources, it's the number of people we have. It's the money we have. It's the time we have. You know, we've got so many good things in place, but being able to get it to everyone who needs it, I think, is where you know everybody would be lacking. - Key Informant

Within the full scope of like all of the Tempe funded projects, I think we are a good complement and I don't know all of them. - Key Informant

A lot of [the application] has gone online. And so, for example if your elderly parents needed help paying the rent, they'd have to create an online account, upload their own supporting documents, and do all that within 5 days, or the application expires. - Key Informant

But not only doing all of that – but even knowing about it – as well as finding out the information. They're just used to going to a place or something. Yeah, so that's why I venture to say that impacts homelessness when a family is experiencing a 5-day notice, and they've got to deal with these cumbersome bureaucratic systems that are beyond their control, that are beyond city of Tempe's control that lead to homelessness and evictions. - Key Informant



Funding and Funding Cycles

While individually the key informants believed their agency was doing a good job managing its resources, most of them felt that more resources for their area(s) of intervention were needed to fully address the needs of the groups they served. They also felt constrained by short funding cycles without being able to project ahead for projects, interventions, and sustainability.

We're losing access to a lot of those programs that were stood up on all the stimulus dollars as a region...And so service demand is growing. People need more, they expect more, and yet we have less money to provide it with now. - Key Informant



There are always more households than we have the funding to serve and it has become harder to serve those households with the Tempe cap because our funding. - Key Informant

Because bureau funding comes from the federal government through the state, through the county, now through the city of Tempe, where it used to come more directly... So every pass through takes their administrative cut on top, and there are less dollars for the local agency serving the need. - Key Informant

But I know that those nonprofits are submitting applications to every single funder that they can find. I know that they're worrying about it. And let me tell you, I'm not far behind. This morning, that's what I was ruminating about is, I really need to work on finding some grants for these specialists, because funding has been cut. - Key Informant

We can't do anything with one-year funding. It takes me 6 months to hire somebody and train them. Yeah, and so and this is my opinion, what the breakdown that we see in social service programs is the temporary nature of the programs that we provide. How are we ever going to achieve longitudinal success when we're funding programs for one year, 2 years, 3 years at the most. - Key Informant

Duplicity of Efforts

Also mentioned during interviews was the probable duplication of efforts and lack of an asset map or any perceived or real systematically coordinated service delivery program. In the eyes of the key informants, no matter what Tempe has done in the area of service coordination, they felt like that approach had been done 'a million times' with no prolonged sustainability or reinforcement.

You know, these are decisions that have to be made? Or can we join forces, or can we divide and conquer? Or what can we do. - Key Informant

And so what happens then is coordination doesn't happen. And worse replication happens. So currently, the city is hiring [these] workers. We've had [these] workers for 22 years that have wait lists on every one of their caseloads. - Key Informant

We have this great continuum of serving the homeless community in Tempe. We have the hope team that does street outreach. We have shelter services. We have shelter diversion services so we can use funding to prevent people from going into a shelter in the first place and the city has housing vouchers. If all of that were connected where it's the same people that were doing street outreach are getting [people] into housing, using city housing vouchers then that's an example of how we can have better shared successes and better use of public resources. - Key Informant

Ideas for Improving Coordination and Human Services Provisions

Information Sharing

Overall, the key informants were pleased to share their knowledge and ideas with the researchers, knowing this information would anonymously be passed on to TCC members and other decision-makers. While describing areas of concern, they also offered suggestions about possible improvements for services that meet the needs of Tempe residents.

There was some hesitation as to the respondents sensing that they actually knew all of what TCC provided - the what, where, and when human services were offered. In fact, the research team noted there were multiple times when the informants asked for clarification about what was meant by and/or included in TCC's definition and provision of 'human services'. Informants knew that there was a lot of information listed on the website but finding specifics was not always clear and easy to do. (Similarly, focus groups participants expressed the same lack of knowledge about existing services and how to find out about these services.)

So the better coordination of services starts with a full and deep understanding of the resources that already exist in the community, the expertise that already exists in the community. And then the city, helping us as a partner to figure out where are the gaps without duplicating those services. - Key Informant

Let's start a committee, but it's like I would love to see interdepartmental IGAs, you know, type stuff where we are sharing the information about, you know, here are the updates. Here's what's available, you know. Here's what we've experienced. What would, what should we be doing in that situation? What's the right number to call for X, you know. - Key Informant

We have recommended year after year that an asset map be developed of nonprofit resources and programming in the community. - Key Informant

And I think that's a great starting point. To learn about what each organization is doing, have some shared projects within the arena of serving individuals experiencing homelessness. I think that's an area that is more coordinated. - Key Informant



Service Delivery

Other suggestions focused on ways to improve the services and programming. These included making efforts related directly to the populations and co-morbidities that need to be addressed.

We have to bring it to the people. We have to make it easier for people to engage or our business model goes down, and I think that the same thing is true for social services. We it's, you know, meeting people where they're at right. And but it's more than that. It's also revamping our programming to make it more flexible, to make it more successful for the participants because they don't want to anymore. - Key Informant

People are having ongoing long-term issues. And so I try to develop programming that addresses all of those so that people don't have to call a bunch of different numbers, don't have to go here for that and over there for that. Now, some of that we can't help, you know, like but sometimes when you are trauma informed, when you have done the research, when you do listen to what people say they don't want to have to go all the places. - Key Informant

TCC and Service Provider Methods

Finally, several of the suggestions centered around how TCC could provide a description of all the human services they provide along with a common measurement to ensure that all human service providers have a clear representation of the services provided as to not overlap, have similar rubrics for performance and have a better understanding of what is being offered to ultimately provide services to those most in need. Not surprisingly, these ideas included how best to, with full transparency, present information and services to all members of the Tempe community.

An asset map would be helpful if there also were a I don't want to call it a policy, but sort of a position taken by the city about involving those community assets in service delivery involving them in decision making. There used to be budget planning meetings at the city that would be, you know, more than just how do we work? Better profits? Pretty much know how to do this but it's deeper than that. It's to be at the table when there are decisions made and priorities set about that that affect us. - Key Informant

We all ought to be on the same page when it comes to discussing the issue and the success rate of our programs. For instance, we have a 40% success rate and they have an 80% success rate; are we using the same formula and transparently reporting to the community using a consistent formula? If not, it's misleading to city residents. And funders. - Key Informant

So the better coordination of services starts with a full and deep understanding of the resources that already exist in the community, the expertise that already exists in the community and then the city, helping us as a partner to figure out where are the gaps without duplicating those services. - Key Informant

*There's also willingness for people to be engaged in new and exciting ways.
- Key Informant*

Conclusion

Researchers conducted seven key informant interviews with service providers who were pleased to discuss human services in Tempe. Although not the focus of the interviews, housing insecurity and homelessness, food insecurity, economic problems/high costs, and trauma-informed care for all services surfaced as major issues for providers. These issues were seen as impacting Tempe's residents, including those from the target groups.

The informants discussed systems and organizational concerns about funding for programs and possible duplicity of efforts, feeling these are areas that could be improved. Further, they offered suggestions on ways to improve coordination and provide human services, including offering more ways to share information with other providers and residents and bringing the services and programming more directly to the community as integrated, co-located offerings. Listening to and providing resources for these suggestions may be valuable as TCC along with the funded human services providers seek to best meet the needs of Tempe residents.

I can see, like the coordination of services kind of is like an underlying theme just because of what you do and who you work with in your model. - Key Informant



Conclusion and Discussion

This comprehensive human services community needs assessment provided the opportunity for residents, human service providers, and key informants with extensive knowledge to share their perspectives on the landscape of Tempe human services in 2024. The goal was to understand current human services needs to determine future funding prioritization and allocation. Residents were invited to share their perspectives via a survey, focus groups, and community forums. Providers shared their perspectives by completing a survey to assess the city's human services system, while key informants shared their perspectives and insights through participation in interviews. Secondary data related to Tempe human services were also collected and examined. Collected data were analyzed for each data collection method and summarized to determine the overall human services needs of the community.

When taking responses from all participants into consideration, overall findings suggested that the most pressing human service needs included: assistance related to affordable housing, mental health care, needs of target populations such as people living with a disability or domestic violence survivors, financial needs, job-related services, and food insecurity. Also, service providers shared many community-wide strengths which included food and financial assistance services, education services, housing and homeless support, transportation, cultural activities, and senior and domestic violence services. Providers also reported funding was the number one factor that could help them serve more residents. Examples of how additional funding could be used included hiring staff, marketing, community education, and increasing services. Key informants presented a portrayal of a city ready to collaborate with innovative and specific ideas on how to improve coordination of services while describing a community continuing to struggle with human service needs around homelessness, food insecurity, and mental health at the forefront. Key informants were also able to highlight the most pressing issues, human service needs, barriers, and economic and social concerns while also providing insight into system and organizational capacities including funding and communication.

In addition, while Tempe offered many human services, the findings from the focus groups showed a lack of understanding and awareness of the available services. This suggests that an alternative marketing strategy is warranted to ensure increased access. Focus group participants also shared their challenges with accessing services including lack of direct human communication and understanding of available services, low-income requirements coupled with the high cost of living, and limited financial assistance. Suggestions to make services more visible and accessible were shared by participants on how to increase the coordination of services to better meet the needs of residents. Additionally, suggestions for overcoming challenges were offered by community survey participants and included increasing knowledge about available resources, providing additional in-home services, offering more mental health services, and providing financial assistance.

As TCC is at the forefront of addressing human service needs, the findings described herein could also serve to determine next steps as current issues faced by the providers are presented along with potential solutions and suggestions from these key players. The information gathered and depicted serves to provide insight into addressing emergent needs, resource allocation, and long-term support and potential future response. The report outlines recommendations based on the information gleaned from all participants throughout this comprehensive human services community needs assessment.



Recommendations

1. Prioritize the top human services needs when allocating funding.

- Community members, providers, focus group participants, and key informants mentioned mental health, housing, homelessness, finances, and job-related services as top human services needs for the Tempe community.

2. Improve coordination of human services.

- Review suggestions on ways to improve coordination and provision of human services.
- Design a human-centered outreach that includes direct communication with a service coordinator who can help residents with service needs.

3. Physical integration of services.

- Provide more integrated, co-located offerings to make accessibility easier. Providing a one-stop shop will enable residents to receive more human services.

4. Evaluate and simplify applications for assistance and services.

- Streamline the paperwork process for applying to receive services. Many participants reported lengthy and complicated paperwork as a barrier to applying for assistance.

5. Increase the length of time residents stay qualified for services.

- Reduce the frequency with which community members need to reapply for services. Paperwork frequency was seen as a barrier to applying for services by some residents.

6. Implement new marketing strategies to share information about what services are available.

- Community members did not always understand what was meant when discussing or asking about human services without an explanation. Determining a new way of marketing or discussing human service opportunities using a different terminology instead of the words “human service” will be beneficial.
- Utilize hard copy marketing, TV, and social media (e.g., TikTok, Nextdoor) to get the word out about what services are offered.
- Institute a direct point of contact that can answer residents’ questions and provide information about the available services and resources via a phone call.

7. Partner with community entities and individuals to disseminate information about human services.

- Implement new marketing strategies to reach more community members who might not currently be utilizing but need services. Recruit community entities and members to help share information about what services are being offered as well as where and when.

8. Use volunteers for homeless services

- When providing services to the homeless populations, utilize volunteers to provide the services. Homeless focus group participants reported feeling more compassion from volunteers than paid workers.

9. Provide transportation vouchers.

- When possible, offer transportation vouchers for residents to increase accessibility and participation.



Appendix A

Secondary Data Analysis

Secondary Data Analysis

Purpose and Scope

The purpose of the secondary data analysis was to leverage existing data sources both to get a big picture understanding of the community needs of the city of Tempe and to look for indications of success in addressing issues identified in the prior community needs assessment. It was important to compare metrics not only against the past but also against current regional, state, and national data. This multilevel comparison would give a better idea of whether improvements had been achieved and a better direction for where future efforts could be made. The scope of this analysis focused on major indicators of community needs including demographic information, survey results, and economic statistics. Secondary data were readily available to cover these points of interest as they are gathered regularly by the government.

Data Sources

Various data sources were reviewed to identify basic trends as well as higher level details on topics of interest. The most informative data source was the American Community Survey (ACS), with the most recent information from the 2023 1-year estimates. The ACS is conducted by the United States Census Bureau annually and is highly accurate in its estimates. There is also a 5-year ACS that is published regularly and is somewhat more accurate because of its larger sample size. The most recent available 5-year ACS was from 2018-2022 and was cited when more appropriate than the 2023 1-year survey.

Many other sources were viewed for comparison and to gather additional insight specific to Tempe. One of those was the Maricopa Association of Governments, which uses information from the ACS and compiles it into reports and maps specific to Arizona as well as compiling additional data. Maricopa County also recently completed its own community health needs assessment, and data specific to Tempe were reviewed. The U.S. Department of Housing and Urban Development was reviewed for information pertinent to the homeless population. The following list reflects the most heavily used resources for citations:

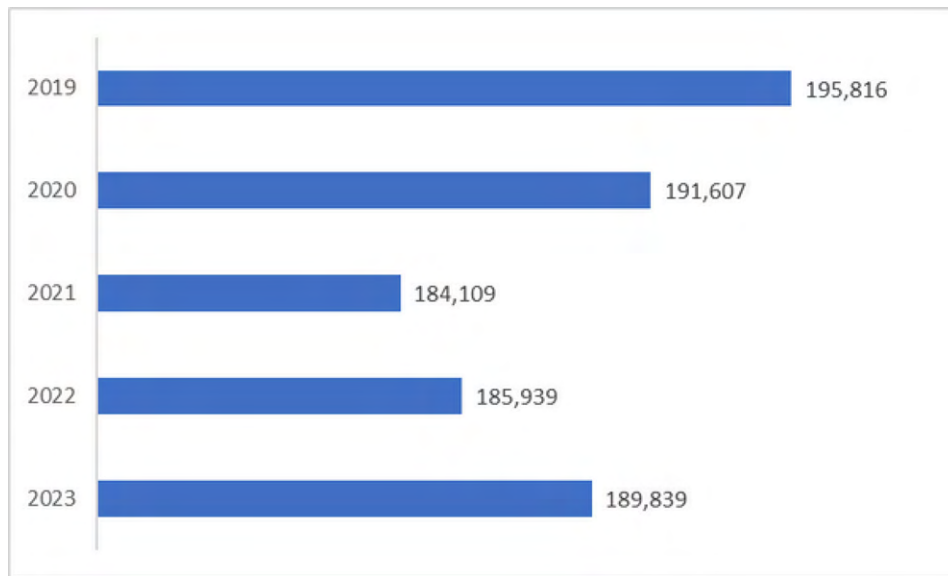
1. American Community Survey
www.census.gov/programs-surveys/acs
2. Arizona Maricopa Association of Governments
<https://azmag.gov/Programs/Maps-and-Data>
3. Maricopa County Health Needs Assessment
www.maricopa.gov/4980/current-CHNA-CHIP-Data-and-Reports
4. U.S. Department of Housing and Urban Development
www.hud.gov

Key Indicators and Variables

Demographic data were analyzed at each of the four levels: city, county, state, and national. Data were examined for trends in population size, ethnicity, and gender. For this analysis, economic indicators included: housing cost trends, poverty levels, unemployment, and rates of homelessness.

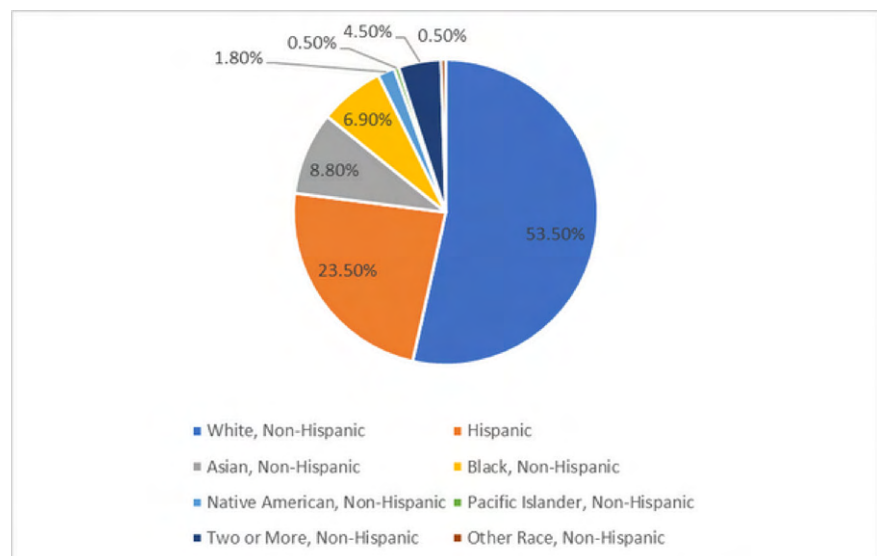
Data Trends and Patterns

Population 2019-2023 Tempe

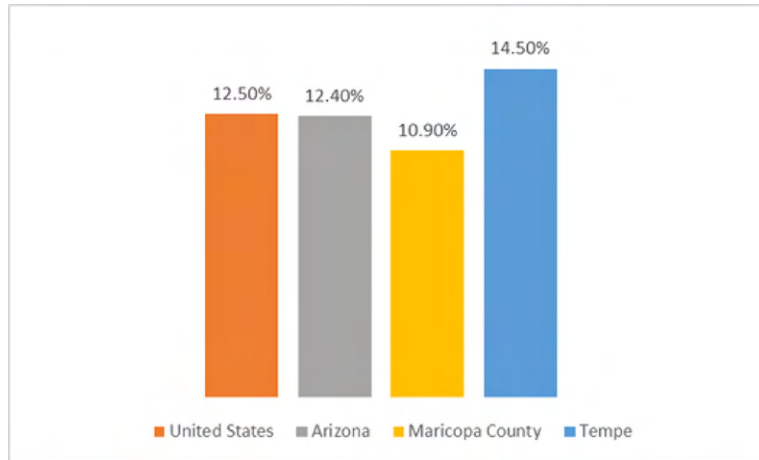


When compared to 5 years ago, Tempe's population was lower in 2023 (189,839) than it was in 2019 (195,816), but it increased each year since 2021 according to the 1-year ACS estimates (U.S. Census Bureau, 2019a; U.S. Census Bureau, 2020a; U.S. Census Bureau, 2021a; U.S. Census Bureau, 2022a; Census Bureau, 2023a). The most prevalent age group was age 25-34 years, and the most prevalent races and ethnicities were White (53.5%) followed by Hispanic (23.5%) and Asian (8.8%) (Maricopa Association of Governments, 2022).

Race and Ethnicity 2023 Tempe

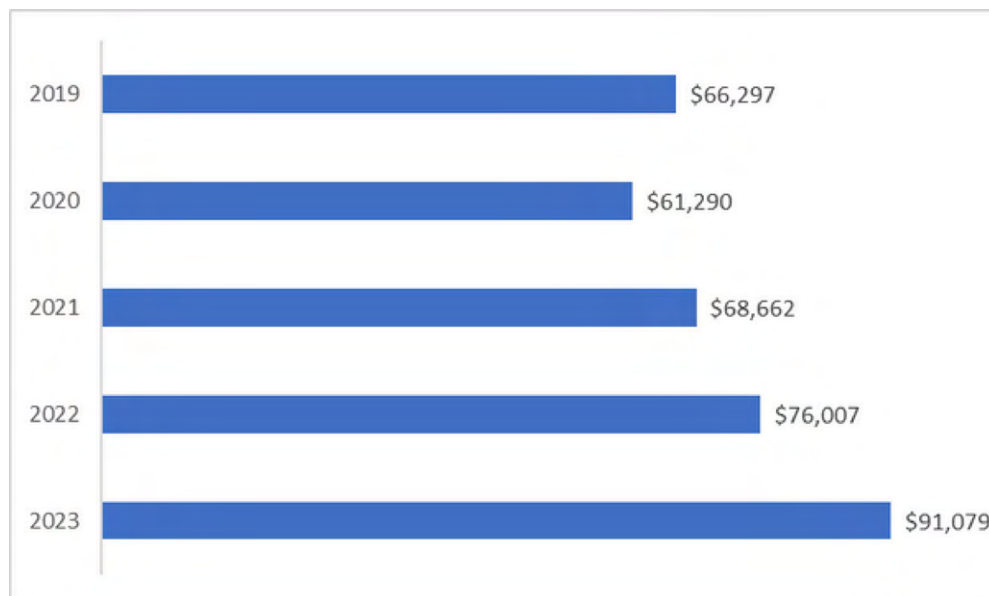


Poverty 2023



According to the ACS 1-year estimates, as of 2023 Tempe had a higher poverty level (14.5%) when compared to all levels: national 12.5%, state 12.4%, and county 10.9%. Despite the higher poverty level, median income levels were higher in Tempe (\$91,079) compared to national (\$77,719), state (\$77,315), and county (\$87,048). It should be noted that Tempe's poverty level, though higher than comparison geographical levels, is down from 17.1% in 2019, and income is up from the 2019 median of \$66,300 reported in the prior needs assessment (U.S. Census Bureau, 2019c; U.S. Census Bureau, 2023b; U.S. Census Bureau, 2023c; U.S. Census Bureau, 2023d; U.S. Census Bureau, 2023e; U.S. Census Bureau, 2023f; U.S. Census Bureau, 2023g; U.S. Census Bureau, 2023h; U.S. Census Bureau, 2023i).

Median Income 2019-2023 Tempe



Younger males age 18-34 without children more likely to experience poverty in 2023

1,523

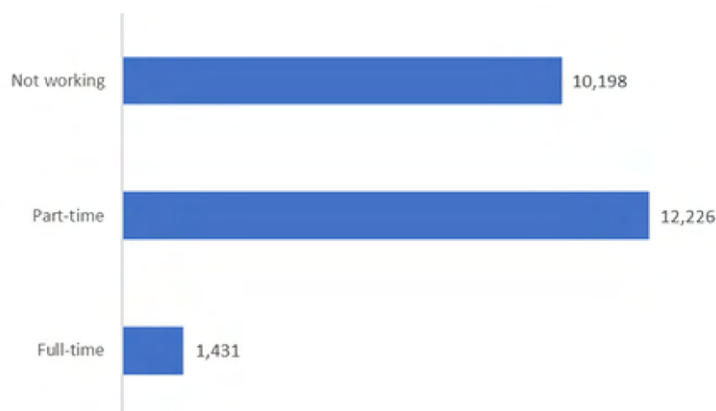
The number of female-led households with no spouse experiencing poverty on average from 2018-2022

Poverty by Family Status

Likelihood of poverty varied somewhat from the 5-year estimate when compared to the 2023 1-year estimate depending on family status. When looking at families in the 5-year estimate, female led households with no spouse represented the highest rate of poverty (Maricopa Association of Governments, 2022). This trend has continued since the prior TCC Community Human Services Needs Assessment. In the 2023 1-year estimate, younger males (age 18-34) were more likely to be in poverty in Tempe compared to women of the same age without children (U.S. Census Bureau 2023f).

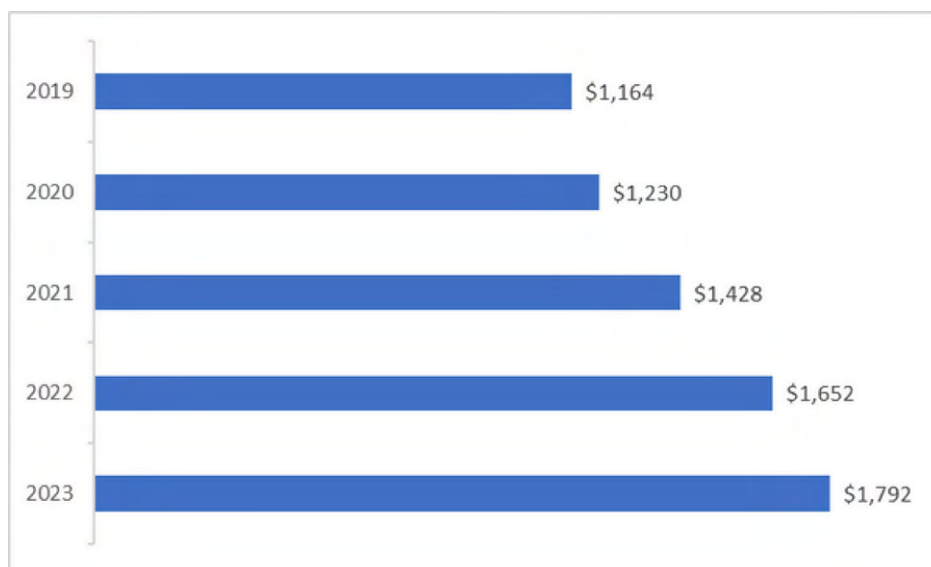
Poverty by Work Status

In the 2023 1-year estimate there were 23,855 individuals over age 16 who were in poverty. More individuals working part-time experienced poverty. However, when examining the overall numbers of people working compared to the percentage of each category the results were as follows: full-time (80,484), only 1.8% of them were in poverty (1,431); part-time (43,175) 28.3% experienced poverty (12,226); not working (35,294) 28.9% were in poverty (10,198) (U.S. Census Bureau 2023f).



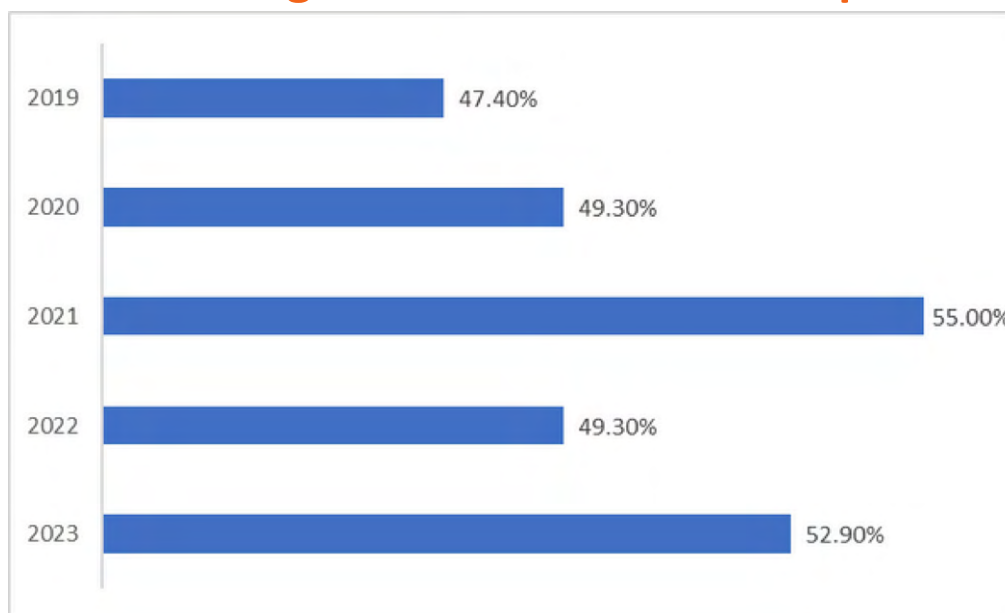
**Poverty for Individuals
16 Years and Older by
Work Status
2023 Tempe**

Median Rent 2019-2023 Tempe



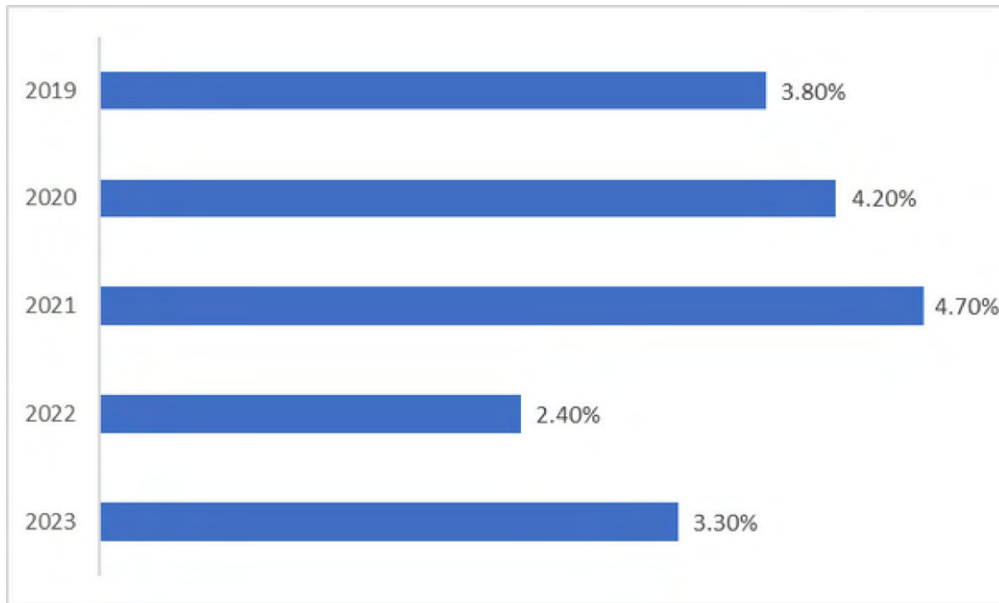
The price for median rent increased from less than \$1,200 in the prior needs assessment to \$1,472 in the 5-year ACS estimate, and in the most recent 1-year estimate median rent further increased to \$1,792 (Maricopa Association of Governments, 2022; U.S. Census Bureau, 2019d; U.S. Census Bureau, 2023n).

Housing Burden 2019-2023 Tempe



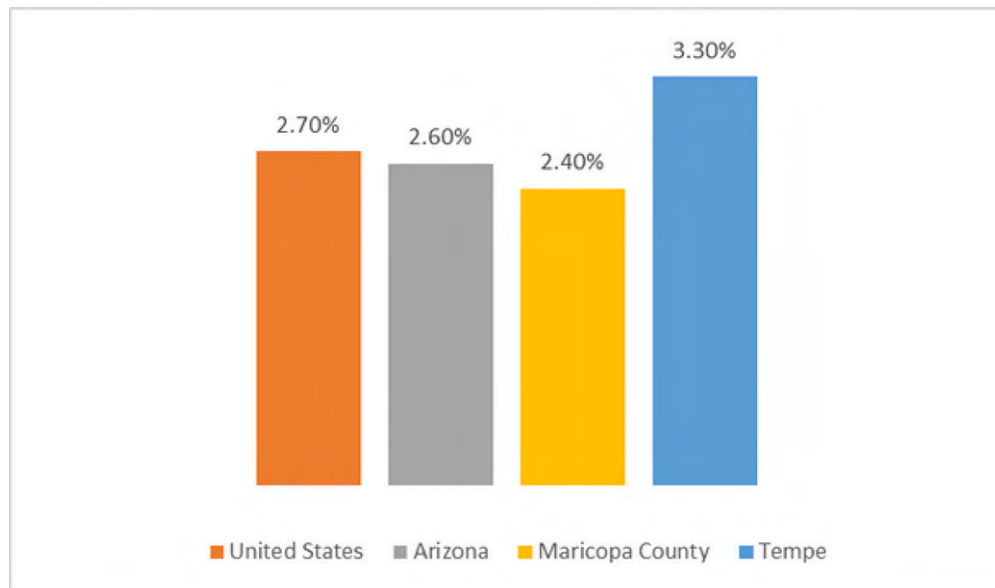
Housing burden was defined as rent costs exceeding 30% of income. As reported in the prior needs assessment, the trend was going down from 54% in 2010 compared to 47.4% in 2019. Since then levels of burden showed instability with a slight upward increasing trend from 47.4% in 2019 to 52.9% in 2023 (U.S. Census Bureau, 2019d; U.S. Census Bureau, 2020d; U.S. Census Bureau, 2021d; U.S. Census Bureau, 2022d; U.S. Census Bureau, 2023n).

Unemployment 2019-2023 Tempe

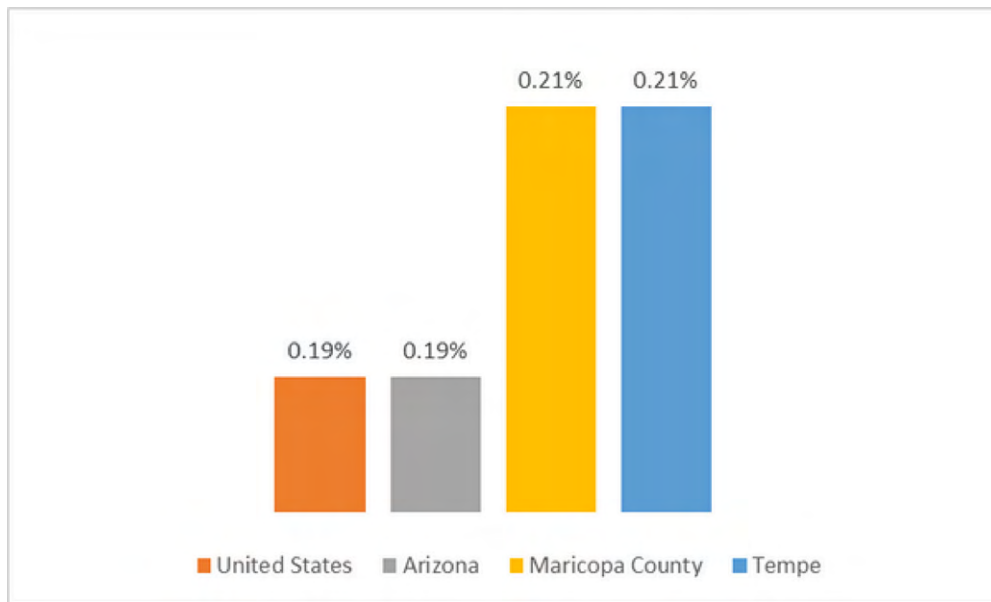


Rates were down for unemployment in 2023 (3.3%) since the last TCC Assessment was performed in 2021 (4.0%). However, Tempe has the highest rate when compared to county (2.4%), state (2.6%), and national (2.7%) (U.S. Census Bureau, 2021c; U.S. Census Bureau, 2023j; U.S. Census Bureau, 2023k; U.S. Census Bureau, 2023l; U.S. Census Bureau, 2023m;).

Unemployment 2023



Homelessness 2023



For 2023 homelessness in Tempe (0.21%) (Maricopa Association of Governments, 2023) was higher compared to levels national (0.19%) and state (0.19%) levels but comparable to county (0.21%) (U.S. Department of Housing and Urban Development 2023). In 2023 Tempe's homeless rate was up from that in 2019 (0.19%). Although the 2024 Point-in-time Homelessness Count was quite a bit lower at 266 vs 406 unsheltered people in 2023, it is important to note that it was pouring rain the day of the count in 2024 which is a rare occurrence in Maricopa County and most likely affected the number of people who were not in shelters that morning. However, at the time of this report writing the Census Bureau had not yet released 2024 data on population to quantify the potential decrease in homelessness rate.

Source:
(Maricopa Association of
Government, 2024)

Unsheltered Count by Municipality				
Municipality	2020	2022	2023	2024
Avondale	56	59	45	46
Buckeye	41	32	60	25
El Mirage	9	9	26	15
Gila Bend	4	11	7	10
Glendale	170	406	170	211
Goodyear	23	30	22	30
Litchfield Park	0	0	0	0
Peoria	83	115	92	82
Sun City	12	32	4	0
Surprise	29	46	67	49
Tolleson	5	7	7	7
Wickenburg	0	0	6	0
Youngtown	11	8	20	8
Phoenix	2,380	3,096	3,333	2,701
Carefree	0	0	0	0
Cave Creek	0	1	0	0
Chandler	75	133	115	115
Fountain Hills	0	1	2	1
Gilbert	9	15	17	16
Guadalupe	22	64	75	74
Mesa	338	451	366	309
Paradise Valley	0	0	2	0
Queen Creek	2	7	1	7
Scottsdale	102	114	64	89
Tempe	396	384	406	266
Uninc. MC*	n/a	n/a	8	15
Total	3,767	5,029	4,908	4,076

*Unincorporated Maricopa County is excluded from the subregions.

Appendix B

Human Services Community Needs Assessment Methodology

Methodology

Study Design

The Tempe Human Services Community Needs Assessment employed an explanatory sequential mixed-methods design where quantitative data collection and analysis informed and guided the qualitative phase of the needs assessment (Appendix C). This approach ensured a robust exploration of community needs by leveraging both quantitative data and in-depth narratives from the community. By combining robust quantitative methods with in-depth qualitative approaches, the Tempe Human Services Community Needs Assessment provided a comprehensive understanding of the community's needs. The explanatory sequential design further ensured that the community's voice remained central with actionable insights guiding future interventions. The study followed strict ethical protocols, including informed consent, confidentiality, and the voluntary nature of participation. Target attention was given to ensuring that all community members, particularly marginalized groups, felt safe and empowered to share their perspectives. The various data collection methods included secondary data analysis, a community survey, provider survey, focus groups, key informant interviews, and community forums. A prioritization summit will be convened by TCC to further gather diverse perspectives based on the data findings herein.

Secondary data analysis

To begin the secondary data analysis, the 2021 previous needs assessment report was reviewed. Following that review, dozens of websites were examined to identify data rich resources. Several sites repeatedly utilized data from the US Census Bureau tables; therefore, those tables were primarily directly analyzed for trends. Excel spreadsheets were created to track information across geographical areas for easy comparison. Geographical regions of interest for comparison were identified as national, state, and county. Topics of interest were decided by reviewing the listed priorities given by TCC and included: poverty levels and indicators of poverty, unemployment rates, and homelessness and housing data.

Community survey

TCC recommended utilizing the existing 2021 survey instrument for this 2024 assessment. In partnership with TCC, SIRC reviewed and revised the survey, and TCC approved the updated survey. The survey included demographic questions, Likert-scale items, and open-ended questions for richer insights aimed at measuring human service needs in the community. Questions included human service topics such as food and housing assistance, health, transportation, childcare, and employment. The survey was translated into Spanish by an external agency and back translated internally before being finalized and administered. The survey was created in Qualtrics, an online data gathering platform, as well as on a hard copy paper format. Flyers were developed to market the survey. TCC approved all final surveys, documents, and flyers for this community needs assessment. Once approved, the survey was disseminated through online platforms, physical distribution at community centers, and outreach at public events to maximize participation.

Consent, Survey Administration and Participation

The protocol, consent form, recruitment materials, and surveys were approved by the Arizona State University Institutional Review Board (IRB). The community survey was administered in multiple ways to ensure all participants had an opportunity to complete the survey. Data were collected via online through Qualtrics and on paper. The survey was administered through email with an invitation which included the Qualtrics survey link. TCC and SIRC emailed a flyer which included the survey link to Tempe providers. Additionally, the survey was marketed through social media platforms. Follow-up reminder emails were sent. The survey was administered between September and November 2024. (The end date for the survey was extended into November to allow for more community members to respond.) For online, participants who clicked on the Qualtrics link were provided with an electronic consent statement before proceeding to respond to the survey. Paper surveys were administered to participants who preferred to complete a paper survey. The majority of surveys were completed online.

Data Cleaning and Analysis

Once the community survey link was closed online, paper surveys were entered into a separate Qualtrics data file. Data quality checks were performed to ensure data entry accuracy. Both Qualtrics data files were downloaded in SPSS Statistics (Version 28). The data files were merged and cleaned. Since the study examined human services needs of Tempe residents, only respondents who reported living in Tempe were included in the final data set for analysis. Also, responses that appeared to be bots were excluded from the analyses. Lastly, surveys that only had a few initial responses (i.e., the survey was started and stopped with no further responses) were deleted from the final data set.

Preliminary analysis was conducted to examine data by target group to inform changes to focus group questions. Descriptive statistics based on survey responses were conducted in SPSS and Excel. Excel was used to create tables and graphs for the report. Qualitative responses from open-ended questions were reviewed. Common themes and patterns were identified and reported to provide a deeper understanding of quantitative findings. Reported responses throughout the report are based solely on those respondents who responded to the item.

The community survey was optional and voluntary. Responses to the survey were anonymous. The survey took approximately 25 minutes for participants to complete. The survey did not include any of the participants' contact information. Three participants who chose to be in a random drawing were selected from the drawing to receive a \$45 electronic gift card.

The targeted sample size for the community survey was 384 surveys and was determined using a sample size table based on estimates needed for a known population size (Isaac & Michael, 1995). Based on a population size of approximately 190,000, a 95% confidence level, and a 5% margin of error, a sample size of 384 participants was calculated. This calculation ensures that findings are generalizable to the broader community with high confidence. The final sample size for this report was 405 community surveys, exceeding the required number of surveys needed to ensure generalizability to the broader Tempe community.

Provider Survey

The survey instrument that was administered for the 2021 community needs assessment was reviewed and updated for this 2024 assessment. The survey contained a mix of closed-ended and open-ended questions aimed at measuring the human services system's ability to address community needs. Service providers completed a parallel online survey, using Qualtrics, which focused on their observations of community needs, gaps in services, and opportunities for improvement. This ensured the inclusion of expert perspectives alongside community voices.

Consent, Survey Administration and Participation

The protocol, consent form, recruitment materials, and survey were approved by the Arizona State University Institutional Review Board. Data were collected through an online platform (i.e., Qualtrics). The provider survey was administered through email with an invitation which included a Qualtrics survey link. The survey was emailed by SIRC to a list of Tempe providers which was provided by TCC. A follow-up email invitation was also emailed. The online provider survey was administered to Tempe human service providers between October and November 2024. Providers who clicked on the Qualtrics link were provided with an electronic consent statement before proceeding to respond to the survey.

The provider survey was optional and voluntary. Responses to the survey were anonymous. The provider survey took approximately 15 minutes for participants to complete. The provider survey did not include any of the participants' contact information. No incentives were offered for participation. There were 62 provider surveys that were included in the analysis for this report.

Data Cleaning and Analysis

Once the provider surveys were completed, the Qualtrics data file was downloaded into SPSS Statistics (Version 28). Quantitative data were cleaned. Surveys that only had a few initial responses (i.e., the survey was started and stopped with no further responses) were deleted from the final data set.

Focus Groups

This section highlights the methods used to conduct seven focus groups that included six different target populations. The research team analyzed the data by individual target populations. The target number of focus groups to conduct was eight; however, two groups had no attendance. An additional focus group for the disability population was completed to accommodate participants.

The focus groups were conducted in September 2024, December 2024, and January 2025 at various locations throughout Tempe and via Zoom. The focus group design and execution proceeded through five phases: (1) focus group discussion guide development; (2) focus group recruitment and location securement; (3) focus group data collection; (4) analysis and findings methods; and (5) report writing and presentation of findings.

Development of Focus Group Questions

Two different focus group set of questions were developed in partnership with the TCC team. The first set of questions was developed in August 2024 before the distribution of the community survey. A second set of questions was developed in November 2024 after the analysis of survey findings. Focus group questions were then modified to accommodate the survey findings. Both sets of questions centered around community human needs services, barriers, and potential solutions.

During this process, frequent email communication and weekly meetings occurred to provide guidance and review of the focus group questions as well as to provide project updates. After review and discussion, the focus group questions were approved by the TCC team. All processes and protocols were then reviewed and approved by the IRB for research related projects involving human subjects.

Sample Selection

To recruit participants, purposive sampling was used which involves the attraction and selection of individuals who meet certain inclusion criteria and do not meet certain exclusion criteria. Inclusion criteria consisted of living in Tempe and meeting the criteria for the target population for that group. Target populations were recruited according to the priority populations identified by TCC and SIRC. The eight target populations included the following:

- Individual and Families Experiencing Homelessness
- Older Adults Ages 65+ years
- Children, Youth and Families
- Individuals with a Disability
- Working Poor Individuals and Families
- Survivors of Domestic and Sexual Violence
- Undocumented People
- Spanish Speakers

However, no specific groups were held for the domestic and sexual abuse survivors or the undocumented persons due the lack of participants.

Recruitment

Marketing efforts included English and Spanish flyers and word of mouth by SIRC evaluators and partners. Recruitment materials were distributed by email or in person by SIRC evaluators and partners across Tempe. Flyers were specifically tailored to the populations of interest and posted in some local businesses and organizations of community partners. Efforts were made to recruit through a wide range of networks and associations for each group with the assistance of TCC and SIRC partners.

Registration

Before registration, interested individuals were screened to ensure they met the qualifying criteria using a set of questions developed. Participants were able to register for the groups via email or online through an online survey questionnaire platform. After registering for a focus group session, potential participants were sent reminders and a confirmation email that included logistical information such as time, date, and directions before their focus group.

Venues

SIRC worked with new and existing community partners to identify and reserve appropriate locations for focus groups. Venues were selected to ensure sufficient reach throughout Tempe, and two community partners volunteered their space. ASU's Zoom platform was used for all virtual focus groups.

Participants

The target number of participants for Zoom focus groups was four to six individuals and six to 12 individuals for in-person groups. Each group was scheduled for approximately 90 minutes which was sufficient time for high-quality data collection from the discussion while remaining respectful of participants' time. Participants were 18 years of age or older, and a total of 40 individuals participated in the focus groups. Participants had the option of signing up for an in-person or Zoom focus group; three focus groups were conducted via Zoom and four in person.

Incentives

Individuals who participated in a focus group via Zoom received a \$45 Tango e-card as a stipend. The Tango e-card was redeemable with over 500 vendors. Individuals who participated in person received a \$45 Walmart gift card. Additionally, individuals participating in the in-person focus groups were also provided with a light meal and healthy beverages. The \$45 incentive was deemed ethical as it was sufficient to achieve participation without being coercive (Grant and Sugarman, 2004).

Consent

Per IRB requirements, participants were fully informed of any risks, benefits, and expectations associated with their participation. They were asked to sign an IRB-approved consent form prior to participating in the focus group. The signed consent forms were stored separately from any personal data provided by the focus group participants.

Facilitation and Data Collection

Focus groups were moderated by SIRC researchers who were specifically trained to be focus group facilitators. Each focus group had at least one facilitator and one co-facilitator/note-taker. Groups were predominantly conducted in English, with some in Spanish as necessary. All researchers received training prior to data collection regarding the discussion guides, using audio recording equipment, and running focus groups to ensure consistency in the facilitation process across groups. The facilitator and co-facilitator utilized the Focus Group Discussion Guide to assure adherence to the approved protocol in following procedures and asking questions. The Guide provides approximate times and highlights the required questions. English focus group recordings were transcribed by a contracted third party. Spanish focus group recordings were translated and transcribed by a contracted third party. To maintain participant anonymity, all names were redacted from the transcripts.

Analysis and Findings Methods

Qualitative methods used for the analysis included a combination of deductive and inductive analysis and thematic analysis.

Key informant interviews

In-depth interviews were conducted with seven key stakeholders, via Zoom, and included those who provide or have primary or direct knowledge of the community and human services. These interviews provided context to the quantitative data and offered expert insights into systemic challenges and opportunities.

Introduction

This section of the report specifically highlights the methods and findings from the seven key informant interviews conducted in late 2024 with representatives from human service agencies that provide human services either directly or indirectly to Tempe residents.

Background and Purpose

Key informant interviews are qualitative in-depth interviews with people who have direct knowledge or experience about a particular topic and know what is going on in the community (UCLA). The purpose of key informant interviews is to collect information from people with this primary knowledge about the community. These community experts, with their particular knowledge and understanding, provide insight on current conditions, the nature of problems and offer recommendations for solutions (University Colorado, DICE Methods).

In fact, key informant interviews can play a critical role in needs assessments as they provide important perspectives and firsthand knowledge of the community and more specifically, the needs of the community. These interviews can serve as a tool to assess and collect data that centers on people and communities with lived experience and expertise.

Contacting these key informants for this study was important for three distinct reasons.

1. They provide unique perspectives on issues important to the population they serve.
2. Their in-depth understandings offer insights to assist in guiding the city and related leaders in making data driven decisions.
3. Information from key informant interviews helps to triangulate the other data sources for this overall Human Service Needs Assessment.

These data, gathered along other data sources as part of the larger study, support an analysis around questions in five topic areas: 1) the most pressing needs of specific populations; 2) impacts of cost of living and economy; 3) gaps in infrastructure; 4) opportunities to improve coordination of services; and 5) other social determinates of health factors based on outside factors including COVID. Participants who were not employed by the City of Tempe were offered a \$45 electronic gift card incentive upon completion of the interview, and these were emailed to the qualified participants after the interview.

IRB

Key informant interview data collection followed consent approval procedures as required by ASU's Institutional Review Board (IRB). The measurement instruments used were developed specifically for this study; questions were informed by a review of existing research as well as preliminary findings from preceding study components and client input as well as previous reports.

Inclusion Criteria and Recruitment

With information and input from TCC, SIRC designed a list of potential candidates to participate in the key informant interviews. The team ensured that the key informants were representatives who either provided services or had firsthand knowledge of the target populations identified by TCC as well as a broader understanding of the Tempe population, knowledge of how the local government processes work, and were familiar with human service needs and current concerns of Tempe residents.

SIRC developed recruitment materials to reach out to key stakeholders to participate in this study. These materials included a recruitment email that highlighted the study's purpose, explained the key informant interview process, time involved and confidentiality measures in accordance with IRB. Two senior SIRC staff identified seven diverse key informants (and possible substitutions) and which SIRC person would contact them. The identified key stakeholders were then sent this recruitment email that outlined the study and the 'ask' of them, a 30-45 Zoom or phone interview regarding Tempe human services needs based on their unique role with Tempe services. The key contacts were then invited to contact the researcher if they were interested in participating in the study.

Throughout this process, SIRC researchers monitored the responses to the email correspondence and follow-up emails (three invitations were sent if no response). In two cases, potential key stakeholders did not respond to the three emails and therefore, the researchers invited other potential candidates. Soon thereafter the final two interviewees were confirmed. Interviews were scheduled and completed in late 2024 based on SIRC and key stakeholder availability. All seven interviews were conducted via Zoom.

Consent and Incentives

Verbal consent was obtained prior to the interview. The consent process included the interview reading the consent script, which included information about the study's purpose, topics covered, confidentiality, recording, and study protections. The interviewer provided participants the names and numbers of the study's principal investigator and the ASU Office of Research Integrity and Assurance.

The interview participants were reminded that their responses were confidential, would be reported in the aggregate, and that they could skip questions they did not wish to answer. After reviewing the guidelines set forth in the consent script, the participants were then asked if they were interested in participating in the voluntary study and to provide a "Yes" or "No" verbal consent of participation and recording. Affirmative consent was documented for the seven participants.

Protocol Overview

Key informants were asked questions about the programs and services their organizations provide; their knowledge of human services needs in Tempe; experiences with client engagement; barriers to participation that residents could be experiencing; existing community resources; infrastructure and coordination of services; and any other community factors (e.g., homelessness, substance, abuse, etc.) that affect, or might affect, programmatic efforts in that community. These in-depth questions aligned with the assessment topic areas for the overall report.

Transcription of Interviews and Qualitative Data Analysis

Interviews were recorded using the Zoom recording function. Following the completion of all interviews, audio recordings were securely transferred to a password protected database on a secure server. No identifiable participant information was shared with the research team. The two senior researchers transcribed the recordings using the Zoom transcript function. Coding, analysis, and report writing were completed using Word and Excel. The researchers together determined themes guided by the questions and overall findings. The key informant data were then analyzed and organized thematically to highlight prevalent ideas across the interviews.

Community Forums

Public forums provided an open space for community members to validate survey findings, share personal experiences, and contribute ideas for addressing identified needs. Three forums were conducted: one via Zoom and two in person. The findings from the community forums will be presented in a separate report.

Prioritization Summit

A final process for prioritizing needs will bring together representatives from all stakeholder groups to review the findings here in, deliberate on priorities, and create an action plan. This collaborative approach will ensure collective decision-making and alignment on the most pressing issues surrounding human services in Tempe. TCC will conduct the prioritization summit.

Appendix C

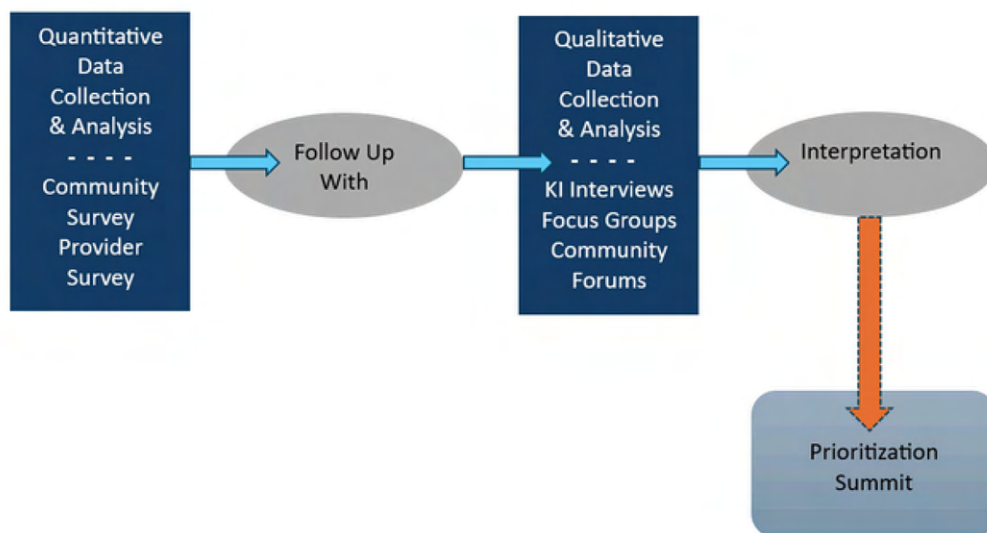
Mixed Methods Explanatory Sequential Design

Mixed Methods Explanatory Sequential Design

The purpose of an explanatory sequential design is to determine what quantitative results need further explanation (Creswell, 2014). A prioritization summit, while not part of the sequential design, is included in the following diagram to reflect the full design of the Tempe Human Services Community Needs Assessment.

Figure 1

Mixed Methods Explanatory Sequential Design



Data Analysis

The integration of quantitative and qualitative data occurred in two phases. Quantitative survey results were used to identify key areas of need, which were then explored in detail through focus groups, interviews, and forums. Insights from qualitative data were synthesized to expand on the quantitative findings. Information gleaned will be shared during the prioritization summit process to ensure a comprehensive understanding of community needs.

Quantitative Data

Data from the community and provider surveys were analyzed using descriptive statistics. Cross-tabulations were conducted to identify trends and disparities across demographic groups. The findings were used to inform qualitative data collection.

Qualitative Data

Transcripts from focus groups, interviews, and forums were analyzed thematically to identify key themes and patterns. This analysis complemented the quantitative findings, providing context and depth to patterns observed.

Appendix D

Key Findings

Key Findings

Key findings for each of the quantitative data components are summarized in this section.

Secondary Data Analysis: Key Findings

An initial step in the project, and as an ongoing process throughout, was to collect secondary data related to Tempe.

When comparing data from the prior needs assessment and prior years, Tempe has continued to have higher poverty levels when compared to other geographical regions despite higher median incomes. Single parent homes with mothers were the most likely to experience poverty which is a continuation since the prior needs assessment. Housing affordability has been a perceived issue since the prior needs assessment. Tempe has successfully decreased their unemployment rate since the last needs assessment, though it is still higher than other geographical levels in Arizona and the United States.

Preliminary data from 2024 would suggest a potential big decrease in the homeless population in Tempe, based on the Point-in-time (PIT) Homelessness Count, but official Census Bureau data on the population was not yet available at the time of this report and outside factors most likely affected the total 2024 PIT count.

The full secondary data report is included in Appendix A, and relevant secondary data findings are shared throughout the document and are recognized by data in blue circles.

Community Survey: Key Findings

A community survey similar to the instrument implemented in 2021 was administered to Tempe residents to measure perceptions around human service needs for the community. There were 405 community surveys included in the analyses for this report.

Top Needs: Respondents top overall needs were for help finding or getting mental health care, help to manage a disability, handicap, or chronic disease, help being more socially connected to others, and help paying utility bills.

Greatest Challenges: Respondents reported financial, work related, and health (both mental and physical) issues) as their greatest challenges.

Well-being: Over 40% of respondents were struggling. People who are struggling have more stress, financial challenges, and health issues than individuals who are thriving.

Mental health: Overall, 45% of respondents reported that they had a day when their mental health was NOT good in the past 30 days. More people 18-34 years of age reported poor mental health than other ages groups. Mental health related services were one of the greatest needs reported. Respondents reported needing help for being more socially connected to others and help finding or getting mental health care, such as counseling or medication.

Greatest worry: Not having enough money to pay for housing, including rent/mortgage, utilities, taxes, insurance, and maintenance was reported as the biggest worry for respondents.

Living situation: Most respondents reported living in a home they own or rent. More than half of respondents reported living in a 1 to 2 person household. More than half of respondents had lived in Tempe for 15 or more years. Fewer than 10% have lived in Tempe for a year or less.

Resources: Three-quarters of respondents reported that they have everything they needed to “get by” without help from others. Having a retirement savings account followed by having dental insurance were the resources reported by the smallest percentage of respondents.

Finances: A third of respondents reported that they could not pay off what they owed on their credit cards. Many (73%) reported that they would still be able to pay all bills if a \$400 emergency expense came up that was due in a month. Top needs mentioned by respondents were help paying for a home, help finding an affordable home, and help paying utility bills. Only 57% of respondents reported their personal finances positively.

Provider Survey: Key Findings

A provider survey similar to the instrument implemented in 2021 was administered to Tempe human services providers to assess the ability of the human services' system to address and meet the human services' needs of the community. There were 62 provider surveys included in the analyses for this report.

Top issues addressed: The most frequently reported issues providers mentioned addressing were food assistance, housing, youth development/support, mental healthcare, job services or training, and trauma or violence.

Greatest intervention needed: Providers were asked to indicate the level of intervention needed by issue. The issues reported that need the most intervention included paying for housing or utilities, finding housing, helping domestic abuse survivors, addressing alcohol or drug abuse, youth having issues at home, and helping other survivors of violence.

Community challenges: Providers reported that housing, homelessness, mental health, food insecurity, domestic and sexual abuse, substance use, challenges for people living with disabilities, and funding were the greatest challenges for Tempe human services.

Community strengths: Providers shared a variety of Tempe's community wide strengths. Strengths included food assistance, education, financial assistance, housing and homeless supports, transportation, senior service, cultural activities, and domestic violence services.

Capacity to serve: Providers reported being over capacity to provide services for paying for housing, learning English, paying for utilities, and finding housing. Areas where providers still have ability to serve more included increasing financial literacy, supporting the formerly incarcerated, and finding a job. A new question was added to the provider survey for 2024 to assess the degree to which organizational capacity may have changed over the past three years. Providers reported that the areas with the greatest increase in capacity to serve in the last three years included addressing food insecurity, paying for housing, finding a job, finding housing, and paying for utilities.

Populations served: According to the providers, the populations they serve the most included adults, working but low income, school-aged children, seniors, and people living with a disability. Providers were also asked to rate how well Tempe was able to meet the needs of the population served. Providers reported Tempe served these populations well: infants and toddlers, school children, and people living with a disability; whereas they reported not meeting the needs as well for the following populations: housing insecure/unhoused, formerly incarcerated, undocumented, and people living with mental illness.

Top suggestion to address human service needs: Providers reported additional, accessible, and affordable housing to be the number one suggestion to improve Tempe’s ability to address human service needs.

COVID-19 impact: COVID-9 continued to impact populations served by Tempe Human Service providers. Impacts on mental and physical health, finances, availability of funding and housing vouchers, affordability of goods, housing and resources, learning and absenteeism, hesitancy to come receive services, and isolation of senior adults were reported by providers.

Appendix E

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