

Housing & Human Services Master Plan Advisory Committee

October 6, 2004

Meeting Summary

The fourth quarterly meeting of the Housing and Human Services Master Plan Advisory Committee was held October 6 from 4:00 to 7:00 pm at the West Boulder Senior Center.

Participants: Jacob Blass, Jerry Lee, Barbara Pingrey, Jack Robinson, Chuck Stout, Barbara Ryan, Jane Nelson, Helen Dorsey Corbett

Staff: John Pollak, Karen Rahn, Richard Johnson, Linda Hill-Blakley, Erika Krouse

Materials were distributed for the meeting, including:

- Written reports from the four summer study groups: Senior Services Division; Children, Youth and Families Division; Community Services Division; and Housing Division;
- Boulder Valley Comprehensive Plan Policies Regarding Housing and Human Services;
- Summary Report on the Boulder City Council Community Sustainability Policy Goal.

The meeting agenda included:

- **Study Group Reports:** Staff presented summaries of the work of the four summer study groups, followed by committee discussion;
- **Conceptual Framework:** A proposed draft conceptual framework (Key Values, Vision, Policies, Strategies) was introduced and discussed;
- **Boulder Valley Comprehensive Plan Update:** A briefing was provided on the Boulder Valley Comprehensive Plan Update, with future input from the HHS Master Plan on the policies regarding housing and human services requested; and
- **Community Sustainability Council Policy Goal Committee:** A briefing on the work of the Community Sustainability Goal Committee was provided.

Reports from the Four Summer Study Groups

At the May meeting of the Advisory Committee, members volunteered to serve on study groups, with one group for each of the four divisions of the Housing and Human Services Department (Senior Services; Children, Youth and Families; Community Services; and Housing). Each study group met three times over the course of the summer. The groups varied in size and composition, with several members participating on more than one study group. Each study group began with a review of some background information, including: input from HHS staff brainstorming sessions, the demographic profile, and the programs and services summary. The study groups provided a good opportunity for more extended discussion and specific focus on the work of each of the four divisions of the department.

Key driving trends and emerging issues for boulder were identified by the study groups and are summarized below:

Children, Youth and Families

- **Working Families and Early Child Care and Education:** Employed single- and two-parent families are the norm, with the majority of the community's youngest children spending significant time in early care and education programs. Quality, accessibility and affordability of child care at this pivotal development age is essential for all families, with low-income families and families with special needs in particular struggling to access quality care.
- **Youth Risk Behaviors:** The rate of drug and alcohol use among teens is alarming, as are a number of other serious concerns, including depression, suicide, and sexual pressures. Increasing healthy behaviors, adaptive life skills, parenting education and positive engagement of youth in the community is critical.
- **Middle School Youth:** The early teen years are a critical transition time. Appropriate summer and after school activities for youth are often lacking during post-childhood, pre-teen and pre-employment age ranges, complicated by transportation needs.
- **School-Linked Services:** As the primary and essential environment for children and youth, schools are a prime access and entry point to link school-aged children and their families to a variety of prevention and early intervention services that can address non-academic barriers to educational success.
- **Regional Initiatives:** The need for human services does not stop at city limits; many families live, work and go to school in separate jurisdictions. Additional regional planning and strategies are needed beyond jurisdictional limits, particularly in a restrained economy.

Community Services

- **Community Support:** In contrast to Boulder's high median income, 14% of Boulder residents (not including college students) live below the poverty level and struggle to meet the most basic needs of shelter for homeless and domestic violence situations, food and health care. Approximately \$2.5 million is allocated annually to human services in the Boulder community, supporting not only basic needs and safety net services, but also prevention and intervention services that catch problems early and prevent future, higher treatment expenditures.
- **Civil Rights:** Boulder's Human Rights Ordinance is nationally recognized as a model for protecting residents against discrimination in housing, employment and public accommodation at the local level. Approximately 300 inquiries of discrimination are handled annually, primarily through mutual agreements between complainants and respondents facilitated through the Office of Human Rights. Recent trends indicate a growing need in processing cases of national origin.
- **Human Relations:** Residents need a mechanism through which they can seek redress to community problems or perceptions of injustice. Boulder Revised Code provides for the Human Relations Commission, appointed by City Council, which serves as an early bellweather for Council on social policy and social justice.

Housing

- **Housing Goal:** The 10% affordable housing goal to maintain the economic diversity of the community will not be realized in the 10 year time frame with existing resources. It would take double the current production levels – from 150 to 300 units a year – to meet the goal in ten years, or an extension to at least 2018 to accomplish the 10% goal at the current level of production. Escalating costs and limited land supply will further challenge development.
- **Lack of Housing Desirable for Families:** Many of the new homes being produced – both market rate and affordable – are condos or stacked flats, which appeal primarily to individuals or couples. Thus, many of the new residential units being produced are not the housing type desired by many families. As a result, some families tend to look outside the city for single family homes.
- **Housing for Special Populations:** More options are needed for people transitioning from shelters, the justice system, and people dealing with mental illness or other disabilities. For people with very marginal incomes, very inexpensive housing is lacking, such as SRO (single room occupancy) units or similar alternative housing options.
- **Aging of the Housing Stock:** Constructed and mobile homes in the community are aging and may require significant repair or replacement in the not too distant future that may not be affordable for many.
- **Growth of the Senior Population:** With the future growth of the senior population, a variety of housing options appropriate for the elderly will be needed.
- **Regional Initiative.** The Consortium of Cities is undertaking a new regional affordable housing initiative through the Boulder County Civic Forum. This effort could have important impacts in housing planning and development for the city of Boulder and its surrounding areas.

Seniors

- **Aging Community:** In the coming decade, Boulder will age considerably as the first baby boomers enter their senior years; the number of Boulder residents over 65 is expected to grow by over 14% from 2000 to 2010. As significant as this growth in Boulder's senior population will be, a bigger surge is predicted for the following decades, peaking in 2030 when Boulder's median age (without students) will be 51. We need to begin now to plan and prepare for the "graying of Boulder."
- **Support for Seniors and Caregivers:** The intersection of three trends (growing elderly population, elders living longer and increasing numbers of family members serving as caregivers) point to the need in the coming decade for a greater emphasis on community resources, counseling support for caregivers, and more in- and out-of-home care assistance options. As people live longer, long-term chronic illness, disabilities and dependency are more likely.
- **Basic Needs:** A growing senior population will require more resources to ensure that basic needs of the elderly – such as safety, physical and mental health, housing and transportation – can continue to be met. Trends in Medicare coverage, availability of physicians and pricing will place increasing pressure on local assistance to seniors for health-related issues.

- **Engagement:** The trend of declining membership in service organizations and religious institutions is increasing the need for opportunities for seniors to remain active and engaged in the community, reducing social isolation and slowing mental and physical deterioration.

Department- and Community-Wide

- **Community Awareness:** Many community leaders recognize the connection between human services and overall quality of life in the community. There is a need for broader community awareness about the important role of housing and human services in providing benefit to local workers and employers, as well as serving as in investment in diverse members of the community.
- **Community and Civic Engagement:** There is a need to find ways to engage all residents of the community in feeling connected. Families need more places to go locally. Affordable shopping options are lacking, forcing many lower income residents to shop outside the city. In the schools and throughout the community as a whole, people of different backgrounds and incomes tend to be separated, with limited opportunities for shared experiences and a sense of inclusion in community life.
- **Latino Immigrants.** Boulder's immigrant population – especially from Mexico – is a growing component of the community and of its lower income population. Services and service delivery should recognize cultural differences and must, in some cases, adapt to be accessible to this population.
- **Partnerships:** Continued successful collaboration with community agencies, city departments and other governments is essential in planning and providing services. This promotes effective leveraging of funds and strengthens the system of services. Efforts to build the capacity of community agencies are also essential to maintain a system of service capable of meeting community needs.
- **Social Impact Filters for Development and Planning Processes:** Social concerns should be integrated with environmental, economic and physical planning. Assessment of the relationship between planned physical development on social conditions should be regularly considered.
- **County Responsibility:** The County generally does not provide services or support the efforts of municipalities in providing human services, even though city residents are also residents of the county. Matching efforts should be considered, as well as policy-level support.

Discussion

Following the presentations on the work of the study groups, committee members discussed noteworthy points, common areas and other areas of concern. An outline of comments is offered below.

- Decreasing federal and state responsibility puts additional burden at the local level. Are local communities, including Boulder, willing to carry added responsibilities?

- Boulder County generally does not support services provided within the City of Boulder – this is the case in senior services; affordable housing; and children, youth and families. Could the County be encouraged to be more involved, such as matching funds or efforts with municipalities? Since the Boulder Valley Comprehensive Plan is a joint City-County effort, is there an opportunity for a policy addressing this issue?
- Investment in human services often saves money for other entities. For example, services provided or funded by HHS may save police department resources; funding provided to the People’s Clinic saves resources for Boulder Community Hospital.
- Political boundaries are a concern. People cross boundaries in terms of where they live, work and shop. More of a regional approach should be pursued.
- Boulder should take pride in the status of human services in Boulder. While clearly there are unmet needs, increasing needs and decreasing funding, Boulder is doing far better than many other Colorado communities in terms of solid planning, range of available services, reasonable safety net services, strong interagency cooperation and nonduplication of services.
- Boulder’s level of community giving is lower than many other communities. According to a recent edition of the Chronicle of Philanthropy, for those with incomes over \$100,000, the statewide average for giving is 7-8%. In Boulder County, the average is 5.9%; Denver’s average is 10.1%. Average gifting amount in Denver is \$6,200, compared to Boulder’s at \$2,900.
- Boulder may be victim to its own success. There may be the perception that because there are so many services, people do not need to give.
- People may be unaware of the vulnerability of the safety net of services. For example, the People’s Clinic is very vulnerable, and the Mental Health Center has seen enormous cuts from the state in the past few years.
- There are continuing concerns about the gap in this community between the rich and the poor. There are many pockets of poor people who live in Boulder, at times in very poor living conditions. Many community members are not aware of this.
- Increasing community awareness. The concept of social marketing and community education needs to be broader than just HHS or human services agencies. Enlightened self-interest is a possible approach – helping people understand why they should care. This could be approached from the perspective of positive social norms. A strong, desirable community has been created; how can that be sustained? Statistics alone cannot move people, but visual images can make it seem more real.

Introduction and Discussion of Conceptual Framework (Key Values, Vision, Policies, Strategies)

The study group working on children, youth and families initiated a discussion of the importance of creating a conceptual framework for the master plan. They stressed the importance of beginning with a broader perspective that articulates key values, visions, policies and strategies. An outline of this framework was presented to the Advisory Committee, followed by discussion. Staff will incorporate suggestions made at the October 6 meeting and work with a review group to be formed of Committee members in advance of the next meeting.

Briefing on the Boulder Valley Comprehensive Plan Update *(John Pollak, Co-Director, Housing and Human Services)*

The Boulder Valley Comprehensive Plan (“Comp Plan”) is a long-term, 15-year vision for the community. Major updates generally occur every five years, with the updates involving about one and one-half years of work. The Comp Plan is jointly adopted by the City of Boulder and Boulder County through a four-body review process that includes: City Council, City Planning Board, County Planning, and the County Commissioners. A major update process has just been initiated.

There are two primary components to the Comp Plan: land use and policies. Historically, most of the focus has been on land use. This has been broadened in recent years to include the areas of housing and human services. This year, a unique opportunity is presenting itself. Planning Board and City Council have both expressed an interest in expanding the Comp Plan to include broader policies, with one area of focus to be “social equity.” In particular, there is an interest in addressing policies that may help bridge the gap between people of different income levels.

Most City departments have master plans that feed into the Comp Plan in a variety of ways. The HHS master plan and the Advisory Committee may assist in informing the Comp Plan update with input on social issues. Copies of the current policies regarding housing and human services were distributed. Planning Board and Council will refine the direction of Comp Plan focus over the next six to seven weeks. Toward the beginning of 2005, there will be an opportunity to contribute to the revision of the existing policies related to housing and human services.

Briefing on the Community Sustainability Council Policy Goal Committee *(Karen Rahn, Co-Director, Housing and Human Services)*

At the City Council goal-setting retreat in January, 2004, a new Council policy goal related to community sustainability was added to Council’s priorities. That goal joined the four existing goal areas (affordable housing, transportation, environmental sustainability and economic sustainability). The Community Sustainability Goal Committee includes four Council members: Robin Bohannon, Crystal Gray, Shaun McGrath, and Andy Schultheiss.

The general objective and interest of this goal is to enhance the livability of the community, with special emphasis on addressing the needs of youth, assessing the impact of the aging population,

enhancing the built environment (especially public spaces and recreation), bridging the gap between socioeconomic and cultural differences, and outreach to diverse communities.

Between February and September, the goal committee met with a wide range of community groups, with presentations from over 50 organizations and city programs. Through that process, several major themes have emerged:

- Community and Civic Engagement;
- Expanding and Valuing Diversity;
- Neighborhood and Community Livability;
- Needs of Youth and Children;
- School Partnerships; and
- Needs of Seniors.

One overarching theme is to enhance community livability through outreach and through policies. The goal committee developed potential strategies for each of those major themes. Council goal committee members are most interested in seeing where their leadership could be most effective in those areas. For example, under the theme of engagement, a City organization strategy might be creating a social impact filter for planning processes, similar to environmental assessments. Other areas of interest include: expanding the legislative agenda to include social welfare issues, regional planning with non-profit and other governmental agencies, and participating in a community-wide plan for addressing issues identified in the Youth Risk Behavior Survey.

The work of the Community Sustainability Goal Committee is a parallel effort and reinforces the work of the HHS Master Plan. Many of the emerging issues are consistent across both efforts. The HHS Master Plan will identify appropriate roles and priorities for the department, with the Community Sustainability group focused more specifically on areas for Council action or leadership.

Next Steps

Refinement of the Conceptual Framework: A review group composed of Advisory Committee members will assist in refining a conceptual framework for the master plan. After discussion, committee members agreed that this could begin with preliminary work shared via an “e-group,” with drafts provided to all committee members via e-mail or surface mail. The group concurred that one or more meetings may be helpful as well to allow for group sharing of ideas. Staff will begin by incorporating suggestions and providing a revised draft to committee members for comment, with future meetings scheduled as needed for those interested in providing additional guidance. Any interested Advisory Committee members are welcome to participate.

Comprehensive Plan Policies: As discussed earlier in the meeting, an additional review group may be formed in early 2005 to provide input on the Comp Plan policies related to affordable housing and human services.

Community Sustainability Council Policy Goal Committee: As the goal committee further clarifies strategies under the goal, they will identify communication and coordination mechanisms with the Housing and Human Services Master Plan.

Preliminary Master Plan Draft: Staff will commence work on a preliminary draft of the master plan. Staff anticipates having this available by the next Advisory Committee meeting, planned for January. This preliminary draft will not be a polished document, but will be the basis for initial review by the Advisory Committee, internal review by the HHS department, discussion with other departments, and a public input process, which has yet to be planned.

Next Meeting: The next full meeting of the Advisory Committee will be in January. Staff will be in touch with Advisory Committee member to request information on availability for possible dates.