# 2025 Community Needs Assessment

NORTHEAST MICHIGAN
COMMUNITY SERVICE AGENCY
NEMCSA

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# EXECUTIVE SUMMARY/KEY FINDINGS

In the winter of 2024, the Northeast Michigan Community Service Agency (NEMCSA) undertook a nine-week process to survey the residents, organizations, and elected officials of Northeast Michigan. This was done to gather information for a community needs assessment (CNA). Responses from the 12-county region of Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle, and Roscommon counties were analyzed within this report.

The purpose of a Community Needs Assessment (CNA) is to develop a comprehensive understanding of the region's population and communities. The data collected supports informed decision-making and offers community members a platform to share their perspectives. NEMCSA conducts a CNA every three years. It is important to acknowledge that response rates for this survey were lower than expected, likely due to the concurrent distribution of multiple community surveys during the same period.

Drawing upon the data gathered, demographic information that is publicly available, and the years of experience that NEMCSA has working with individuals battling poverty, top needs were identified, recommendations were made, and conclusions were drawn.

**Top Five Needs Identified:**
Communities need/lack:
- safe and affordable housing.
- jobs offering a livable wage.
- alternative transportation options for families that do not have their own automobile.
- licensed childcare providers.
- specialty medical providers.

*"Understanding the communities in Northeast Michigan allows NEMCSA to position itself to positively affect change. Community needs assessments are a vital tool in gaining a clearer understanding of the challenges facing the area and its residents. By looking at the data and seeing the needs, NEMCSA can work to identify opportunities to reduce barriers and help clients reach their fullest potential."* – Lisa Bolen, Executive Director/CEO

Considering factors of demographics, geography, education, lack of childcare providers, and lower wages paid in the area, it is possible to begin to identify the barriers facing the communities, families, and individuals. As the Community Action Agency (CAA) for the area, NEMCSA is positioned to address these needs, and reduce barriers. Through collaboration, strategic planning, and resourcefulness, NEMCSA will continue to empower clients on their journeys to economic mobility to reach their fullest potential.

# NEMCSA AS AN AGENCY

## THE HISTORY OF NEMCSA

The Northeast Michigan Community Service Agency (NEMCSA) is a private Community Action Agency in northeast Michigan, incorporated in 1968. Prior to NEMCSA, there were three Community Action Agencies servicing the area. Thunder CAP, which served Alcona, Alpena, Montmorency, and Presque Isle counties; 7CAP which served Arenac, Iosco, Ogemaw and Oscoda counties, and the counties of Emmet, Charlevoix, Cheboygan, and Otsego on the western edge. In a trade, Emmet and Charlevoix counties went to the west to Northwest Community Action Agency and Crawford County came east, creating the 11-county core service area of NEMCSA covering Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, and Presque Isle counties. Unique to NEMCSA is the inclusion of the Region 9 Area Agency on Aging, which began in 1974.

Community Action is a coordinated effort to address the root causes of poverty and ultimately move a person to self-sufficiency. There are over 1,000 Community Action Agencies throughout the United States and Puerto Rico, with 27 of those being in Michigan. NEMCSA is geographically the largest in Michigan and serves the largest number of counties.

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**The NEMCSA Mission**

*Enhancing quality of life by empowering individuals and strengthening communities.*

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## SERVICE AREA



The Northeast Michigan Community Service Agency has a core service area of 11 counties in beautiful northeast Michigan. The service area boasts the Huron National Forest, the AuSable River, strong farming communities, and 1,850 miles of shoreline. NEMCSA is a catalyst providing solutions to improve the lives of those served. The 11 core counties served by NEMCSA are: Alpena, Alcona, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, and Presque Isle covering approximately 6,200 square miles.

NEMCSA also provides many services to residents of Roscommon County and therefore, Roscommon County is included in this report. Throughout this report, when the "report area" or "12-county area" is referred to, it will be reflective of NEMCSA's 11-core counties and Roscommon County together. In charts and graphs, Service Area or SA may be used to indicate the report area.

## PROGRAMS AND SERVICES

NEMCSA offers programming for every stage of life. Programs are in place to address homeless prevention, foreclosure and homebuyer education, weatherization assistance, self-sufficiency, pregnant women and children, school success, senior services, volunteer programs, and poverty education.

**Early Childhood Services** provides support to pregnant moms, infants, toddlers, and preschool programming to children ages 3-5. Built into this service delivery model are supports for the whole family, setting up children for a lifetime of success.

*"NEMCSA Head Start has helped my child excel in learning the material that is needed to enter kindergarten. We feel she is well prepared for grade school after attending the Head Start Program."*

**Community Programs** offer a wide array of empowering services for individuals and families to help alleviate financial stressors. These include rent and mortgage assistance, volunteering, water and sewer payment assistance, homeless prevention, and weatherization. A client from the weatherization program shares:

*"I want to thank you all for all the work and improvements that have been done to make my home energy efficient and economized. Thank you for the new furnace and hot water heater. I am already seeing a reduction in my power bill. There would have been no way that I could afford all the improvements you have made. All the people that were involved have been really friendly and professional."*

**The NEMCSA School Success Partnership** collaborates with school systems, parents, and students to overcome barriers they may be experiencing, reducing truancy, improving academic performance, and strengthening families.

*"Our liaison has played a very important role in my child's educational and developmental success this year. He feels comfortable talking with her and going to her with issues he has to work through. We appreciate all she has done for our family. We hope to continue working with her in the future."*

**The Region 9 Area Agency on Aging** works to promote lifelong independence and dignity for all individuals and to assist the aged and disabled.

*"I am so appreciative of the assistance of the Michigan Medicare Assistance Program counselor. Being new to Medicare, I was overwhelmed by the volume of information to be considered. My counselor was professional, courteous, and kind to me, and helped me find a perfect plan that I would never have found without her help."*

For a list of current NEMCSA programs, visit the website at www.nemcsa.org.

## NEMCSA BOARD OF DIRECTORS

The Board of Directors for NEMCSA is a tripartite board, consisting of equal parts local private sector, public sector, and low-income community representatives. The bylaws for the Board of Directors outline a board composed of 24-33 members who are dedicated to serving their communities within the NEMCSA core counties. Board members include elected officials, business and professional representatives, liaisons from advisory groups, and consumer representatives.

## ACKNOWLEDGEMENT AND THANK YOU TO PARTNERS

Recognizing that enhancing quality of life, empowering individuals, and strengthening communities is not independent work, NEMCSA would like to sincerely thank the many local, state, and federal organizations and agencies that partner with NEMCSA every day to help those battling poverty. NEMCSA values their support and dedication in moving families towards self-sufficiency, healthy outcomes, and stable homes. These partners provide complementary resources and collaborate to effect change and improve family stability.
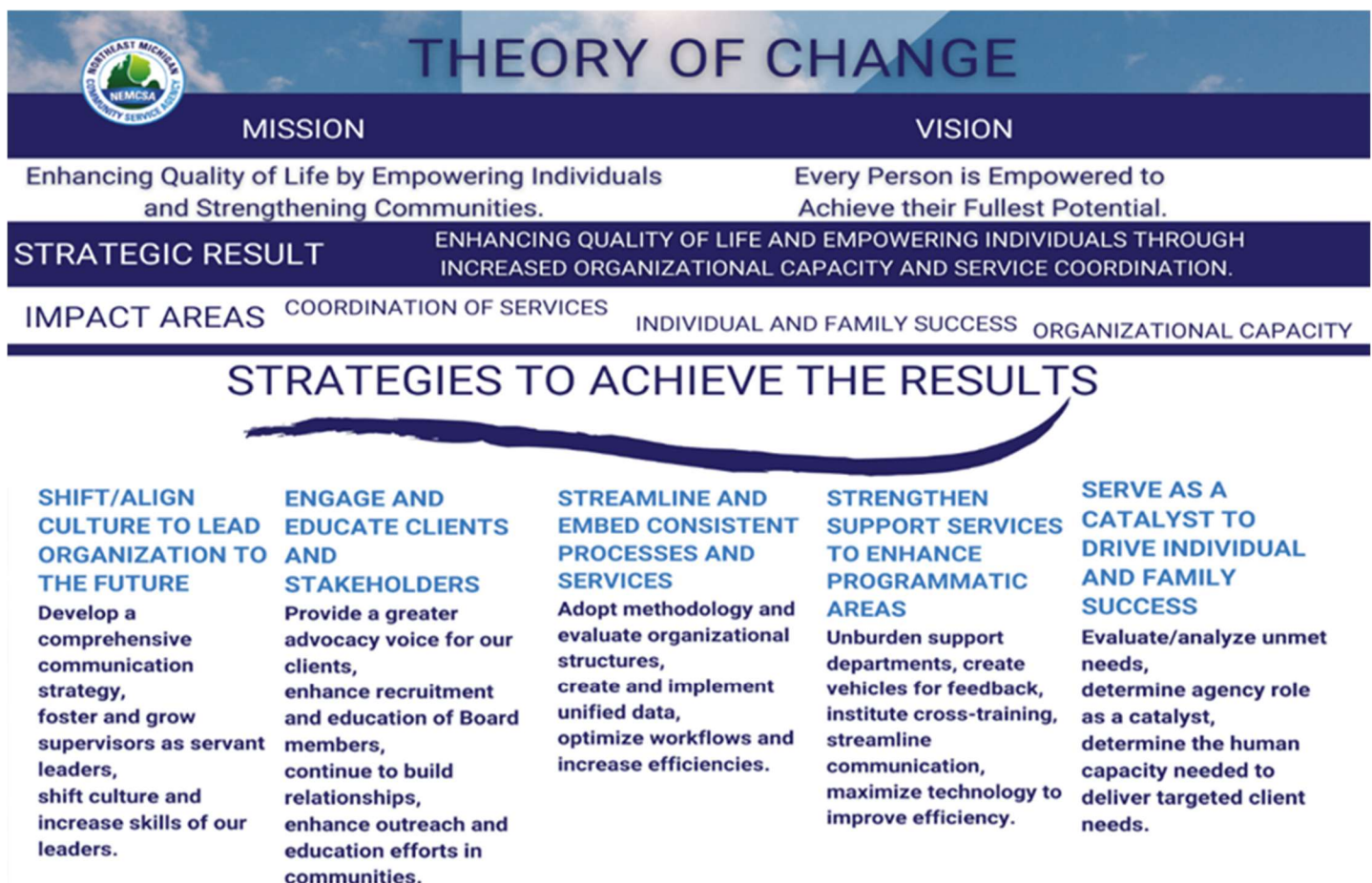
## PURPOSE OF COMMUNITY ASSESSMENT

Completing a Community Needs Assessment (CNA) allows an agency to determine the composition of their communities and make data-driven decisions. Surveys completed by community members, partner organizations, and elected officials assist the CAA in obtaining a clear picture of the service areas and a better understanding of their clients. Community Action Agencies often base strategic plans and programming decisions upon the data collected during the CNA process.

### Strategic Planning

Three impact areas were identified in the 2020-2025 NEMCSA strategic plan to focus on. These were:
- Organizational Capacity
- Coordination of Services (Internal and External)
- Individual and Family Success



**THEORY OF CHANGE**

**MISSION**
Enhancing Quality of Life by Empowering Individuals and Strengthening Communities.

**VISION**
Every Person is Empowered to Achieve their Fullest Potential.

**STRATEGIC RESULT** — ENHANCING QUALITY OF LIFE AND EMPOWERING INDIVIDUALS THROUGH INCREASED ORGANIZATIONAL CAPACITY AND SERVICE COORDINATION.

**IMPACT AREAS** — COORDINATION OF SERVICES — INDIVIDUAL AND FAMILY SUCCESS — ORGANIZATIONAL CAPACITY

**STRATEGIES TO ACHIEVE THE RESULTS**

**SHIFT/ALIGN CULTURE TO LEAD ORGANIZATION TO THE FUTURE**
Develop a comprehensive communication strategy, foster and grow supervisors as servant leaders, shift culture and increase skills of our leaders.

**ENGAGE AND EDUCATE CLIENTS AND STAKEHOLDERS**
Provide a greater advocacy voice for our clients, enhance recruitment and education of Board members, continue to build relationships, enhance outreach and education efforts in communities.

**STREAMLINE AND EMBED CONSISTENT PROCESSES AND SERVICES**
Adopt methodology and evaluate organizational structures, create and implement unified data, optimize workflows and increase efficiencies.

**STRENGTHEN SUPPORT SERVICES TO ENHANCE PROGRAMMATIC AREAS**
Unburden support departments, create vehicles for feedback, institute cross-training, streamline communication, maximize technology to improve efficiency.

**SERVE AS A CATALYST TO DRIVE INDIVIDUAL AND FAMILY SUCCESS**
Evaluate/analyze unmet needs, determine agency role as a catalyst, determine the human capacity needed to deliver targeted client needs.

NEMCSA developed a Theory of Change with strategies to achieve the three impact areas. As shown on the image below, NEMCSA has specific action items in place to achieve positive change within the three impact areas. The community needs assessment would align with the catalyst of *serving to drive individual and family success by evaluating and analyzing unmet needs*.

Utilizing data gathered from a Community Needs Assessment, NEMCSA will be able to identify the gaps and strengths related to each impact area. Once identified, NEMCSA can set a course through its strategic planning process and organizational development to meet those goals.

If a need is identified that cannot be met within existing programming, NEMCSA will evaluate whether meeting this need aligns with their mission, vision, and values. If alignment exists, NEMCSA will coordinate with partners to explore ways to meet this need. This could involve NEMCSA creating a program, advocating for funding, grant writing, or providing expertise to partners better situated to meet the need.

## Organizational Standards

The Federal Office of Community Services (OCS) established the Community Services Block Grant (CSBG) Organizational Standards Center of Excellence (COE) in 2012. Through the COE, a set of organizational standards were developed to ensure CSBG eligible entities, such as NEMCSA, have the capacity to provide high-quality services to low-income families and communities. Regularly assessing the needs and resources at the community level is a pivotal component of Community Action and the reason for conducting a community needs assessment. Utilizing data from the needs assessment allows for organization direction to be set and agency resources to be defined. Below are the organizational standards defined by OCS, which are used to guide the community needs assessment process.

> **3.1 The organization conducted a community needs assessment and issued a report within the past 3 years.**
> **3.2 As part of the community assessment, the organization collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).**
> **3.3 The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) and in the community assessment.**
> **3.4 The community assessment includes key findings on the causes and conditions of poverty and the needs of the community assessed.**
> **3.5 The governing board formally accepts the completed community assessment.**

# THE COMMUNITIES WHERE WE LIVE, WORK, AND PLAY
## Community Profile
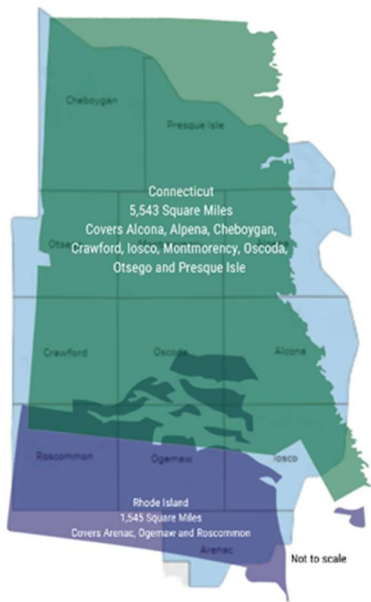


The square mileage of Rhode Island (1,545) and Connecticut (5,543) combined cover 7,088 miles. NEMCSA's twelve counties cover 6,800 square miles.

NEMCSA provides services within this report area to 1.9% of the population of the state of Michigan while covering 16.6% of the total land area. This equates to almost 6,800 square miles (Roscommon adds approximately 600 square miles to the coverage area) making it geographically the largest Community Action Agency in the state of Michigan. In comparison, the service area covers as much land as roughly the states of Rhode Island and Connecticut combined.

The following pages provide a journey through the report area and how it relates to the state of Michigan on indicators such as housing, household spending, education, employment, and many others. These indicators provide a picture of the communities in which northern Michiganders live, work and play. All these indicators identify causes of poverty and resources within the community.

## Age and Population
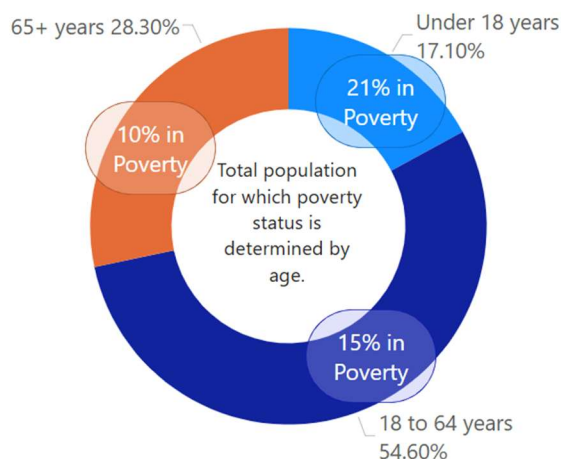
NEMCSA Service Area                                            State of Michigan
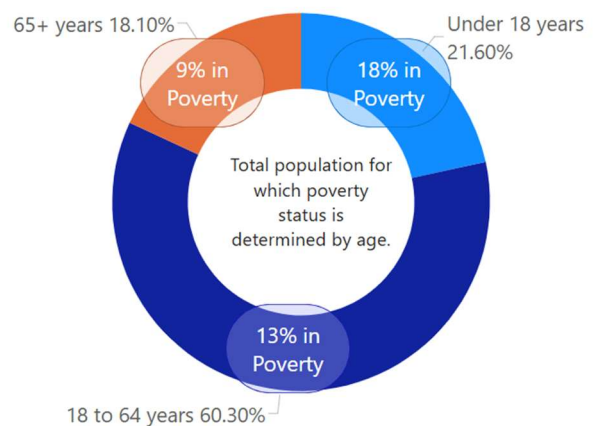


The largest portion of the population for both NEMCSA service area and the State of Michigan falls into the 18 to 64 years of age range. However, the population of those over the age of 65 in the service area (28.30%) is noticeably higher than it is for the State of Michigan (18.10%). The median age for the service area is 51, compared to a median age in the state of 40, showcasing the older population residing in our communities.

## Race, Ethnicity, and Gender

| | State of Michigan | | | | | NEMCSA 12-Counties (Core Counties + Roscommon) | | | | | Comparison | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Total Population | | In Poverty | | | Total Population | | In Poverty | | | NEMCSA vs State % | |
| | Number | Percent | Total | Number | Percent | Number | Percent | Total | Number | Percent | Population | In Poverty |
| **Total Population with Ages Determined** | 10,051,595 | 100.0% | 9,842,260* | 1,284,470 | 13.1% | 195,687 | 100.0% | 193,053* | 28,150 | 14.6% | 1.9% | 1.5% |
| Ages 0-17 | 2,150,899 | 21.4% | 2,122,008 | 370,766 | 17.5% | 34,434 | 17.6% | 33,665 | 6,695 | 19.9% | -3.8% | 2.4% |
| Ages 18-64 | 5,910,322 | 58.8% | 5,934,637 | 747,354 | 12.6% | 105,633 | 54.0% | 106,060 | 16,191 | 15.3% | -4.8% | 2.7% |
| Ages 65+ | 1,755,671 | 17.5% | 1,785,615 | 166,350 | 9.3% | 53,061 | 27.1% | 53,327 | 5,264 | 9.9% | 9.6% | 0.6% |
| **Total Population with Gender and Ethnicity/Race Identified \*** | 10,051,595 | | 9,842,260 | | | 195,687 | | 193,053 | | | 1.9% | 2.0% |
| *Male | 4,982,079 | 49.6% | 4,862,139 | 577,578 | 11.9% | 98,780 | 50.5% | 97,347 | 12,974 | 13.3% | 0.9% | 1.4% |
| *Female | 5,069,516 | 50.4% | 4,980,121 | 706,892 | 14.2% | 96,907 | 49.5% | 95,706 | 15,177 | 15.9% | -0.9% | 1.7% |
| Hispanic | 564,999 | 5.6% | 564,567 | 104,944 | 18.6% | 3,709 | 1.9% | 3,726 | 790 | 21.2% | -3.7% | 2.6% |
| White | 7,516,312 | 74.8% | 7,381,395 | 768,623 | 10.4% | 182,481 | 93.3% | 180,341 | 25,703 | 14.3% | 18.5% | 3.8% |
| African American/Black | 1,346,689 | 13.4% | 1,299,351 | 339,599 | 26.1% | 1,320 | 0.7% | 1,055 | 406 | 38.5% | -12.7% | 12.3% |
| American Indian/ Alaska Native | 46,010 | 0.5% | 44,169 | 8,958 | 20.3% | 1,165 | 0.6% | 1,138 | 179 | 15.7% | 0.1% | -4.6% |
| Asian | 329,676 | 3.3% | 321,793 | 33,854 | 10.5% | 1,085 | 0.6% | 1,073 | 206 | 19.2% | -2.7% | 8.7% |
| Hawaiian/ Pacific Islander | 2,670 | 0.0% | 2,494 | 741 | 29.7% | 19 | 0.0% | 19 | 2 | 10.5% | 0.0% | -19.2% |
| Other Race & 2 or more Races | 810,238 | 8.1% | 793,058 | 132,695 | 16.7% | 9,617 | 4.9% | 9,427 | 1,655 | 17.6% | -3.1% | 0.8% |

*Total population with poverty status determined.

Recognizing that 100% of the Federal Poverty Level is not accurately reflective of total poverty in the area, please consider the stats below for 200% FPL.

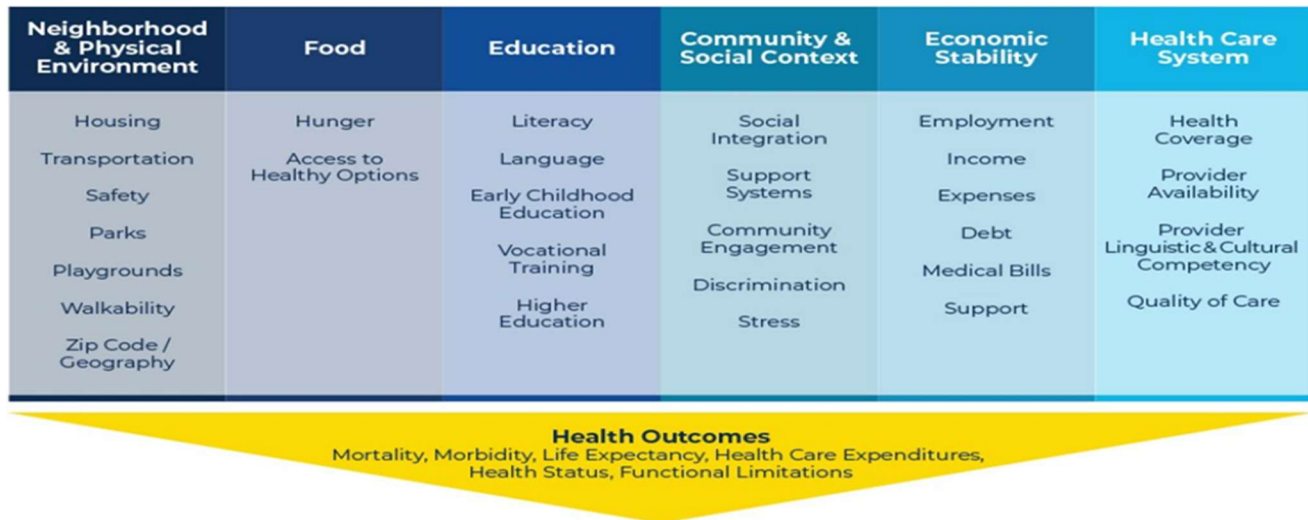| | State of Michigan | | NEMCSA 12- Counties | |
|---|---|---|---|---|
| | Number | Percent | Number | Percent |
| Total Population | 9,842,260* | | 193,053* | |
| 200% FPL | 2,879,231 | 29.3% | 70,360 | 36.4% |

This reflects a 7.1% higher rate of economically disadvantaged people in the NEMCSA 12-county service area when compared to the State of Michigan.

The NEMCSA service area is predominately white (93.3%) with other race and two or more races (4.9%) the second most. There is only a slight difference in the representation of males (50.5%) and females (49.5%) in the service area. It is important to note that U.S Census data only reports male and female gender, data for other gender identifications is therefore unavailable.

Data is also represented in the chart above for those at or below 100% of the Federal Poverty Level, which is the definition used by the US Census for being in poverty. For the NEMCSA service area, 14.6% of the population meet this definition, while 36.4% are at or below 200% FPL. This compares to 13.1% and 29.3% for the State of Michigan. In addition, recognizing that a more accurate reflection of those struggling in the area is to consider those at or below 200% of the Federal Poverty Level, that information is included as well.

# SOCIAL DETERMINANTS OF HEALTH

The social determinates of health framework is a concept familiar to many in the helping professions. To allow for better understanding of the concepts discussed within the CNA, this framework is utilized to organize and examine the data. The SDOH provides a structure that measures the community, agency, or individual resources or lack thereof. By aligning the SDOH and the domains used within the community needs assessment, NEMCSA can segregate causes and evaluate them in a more detailed manner. This structure allows NEMCSA staff across all levels to strategically plan for, evaluate, and review possible programs and services to meet the need.

| Neighborhood & Physical Environment | Food | Education | Community & Social Context | Economic Stability | Health Care System |
|---|---|---|---|---|---|
| Housing | Hunger | Literacy | Social Integration | Employment | Health Coverage |
| Transportation | Access to Healthy Options | Language | Support Systems | Income | Provider Availability |
| Safety | | Early Childhood Education | Community Engagement | Expenses | Provider Linguistic & Cultural Competency |
| Parks | | Vocational Training | Discrimination | Debt | Quality of Care |
| Playgrounds | | Higher Education | Stress | Medical Bills | |
| Walkability | | | | Support | |
| Zip Code / Geography | | | | | |

**Health Outcomes**
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

# DOMAINS

To fully understand the impact the Social Determinants of Health have on a community, they are categorized into domains: neighborhood & physical environment, food, education, community & social context, economic stability, and health care system. For the purposes of the CNA, the community domain contains the SDOH domains of neighborhood and physical environment and community and social context. The domains act as the "umbrella", while specific factors under each umbrella must be considered. Only when the domains are analyzed along with the findings of the community needs assessment can a greater picture of the needs in the area be formed.

## Community Domain

The Community Domain provides the foundation for a community and includes such items as childcare availability, housing, and transportation. A thriving foundation can help create stability and opportunities for families. Communities are strong when systems and services exist to support those who live in them. Several resources within the community domain are discussed at greater length below.

## Childcare

Lack of affordable childcare was again identified as a top five need within the community. In 2024, the Quad County Childcare Coalition, representing Alcona, Arenac, Iosco, and Ogemaw Counties, released their Childcare Innovation Grant Report. The report identifies challenges for childcare providers. These include:
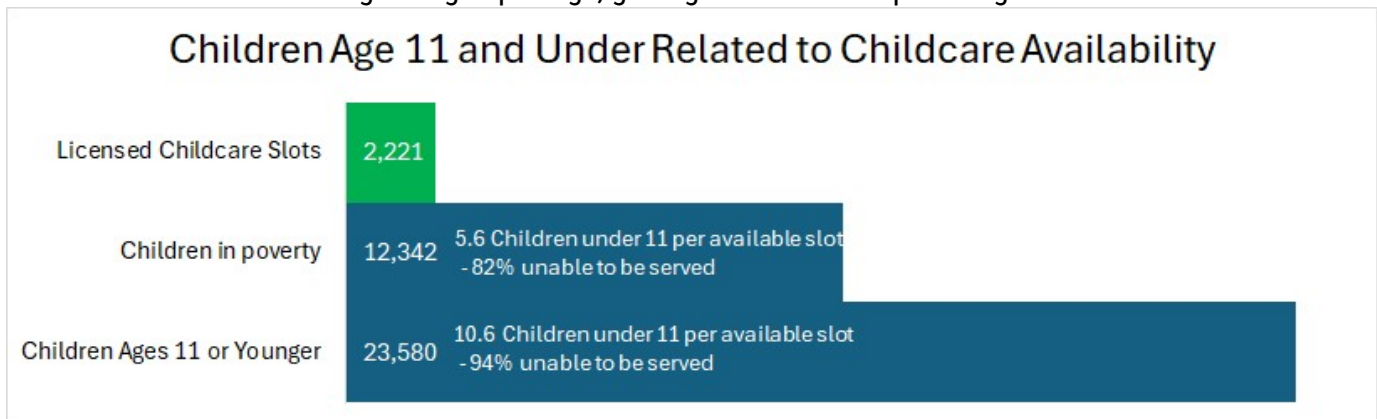
- Expansion Capacity: Providers are limited in their ability to expand their services due to space and resource constraints.

- Business Planning Needs: Many providers require assistance with the business planning, including financial management and long-term sustainability.
- Lack of Qualified Employees: childcare providers in northeast Michigan are struggling to find qualified staff to meet the growing demands for their services. Providers are unable to compete with other local employers regarding employee compensation packages, including wages and benefits. Finding certified and experienced caregivers is a significant challenge
- Ratio Issues: Maintaining appropriate staff-to-child ratios is challenging due to staffing shortages.

In addition, three challenges were identified for parents:
- Cost of Childcare: The high cost of childcare in the region places a significant burden on parents, affecting their financial well-being.
- Lack of Certified Caregivers: Parents often struggle to find childcare providers with the necessary certifications and qualifications
- Limited Hours of Operation: A lack of childcare providers operating during extended business hours poses difficulties for working parents.

NEMCSA also conducted phone interviews with local childcare providers. When asked about their biggest challenges in providing childcare, responses were similar to what was shared in the report. These include not having enough openings, getting resources and providing affordable care.

### Children Age 11 and Under Related to Childcare Availability

| | | |
|---|---|---|
| Licensed Childcare Slots | 2,221 | |
| Children in poverty | 12,342 | 5.6 Children under 11 per available slot - 82% unable to be served |
| Children Ages 11 or Younger | 23,580 | 10.6 Children under 11 per available slot - 94% unable to be served |

The preceding chart shows that there are 2,221 year-round licensed childcare spots available to children in the NEMCSA 12-county CNA area. This number does not include preschool centers or programs such as Head Start as those are not year-round programs. Vying for those spots are 23,580 children under the age of eleven, meaning there are about eleven children for every available spot. **This leaves a gap of 21,359 children, or 94%, unable to receive care** in a licensed childcare setting while being too young to remain home alone. If every available spot were to be utilized by a child below 200% FPL, 82% would not have a spot. Lack of available childcare impacts parents' decisions on whether to work or remain home and have a lower family income. Parents may also struggle with whether they should trust their children to a friend, family member, or other unregulated and unlicensed childcare provider that may not be providing the same quality of care as the licensed and regulated childcare providers. When local childcare providers were asked what improvements they would like to see in their industry, one responded:

*"Expand and help more families that need daycare. Not enough providers and most only provide the bare minimum. Should be more quality."*

Following is a map of the location for licensed childcare providers in the service area. There are noticeable gaps where the distance to a provider is significant and may require traveling outside of a normal commute. This is an additional barrier for families in the area.



Licensed Childcare Providers within the NEMCSA 12-County Service Area

https://michigan.maps.arcgis.com/apps/webappviewer/index.html?id=a0e24821a9c24b60a50038957528311a

## Housing

Within the NEMCSA service area, most houses (59.3%) were built before 1979. The median value of houses is $161,790 compared to the State median value of $217,600, a difference of $55,810. In comparison, in the NEMCSA 2022 CNA, the median home value for the service area was $106,000 and $155,000 for the State of Michigan.

*"As housing challenges continue to evolve, our team at NEMCSA has stepped up with purpose and determination. We've strengthened our Homeless Response System by expanding outreach efforts, enhancing prevention strategies, building stronger partnerships, and streamlining the path to housing. We are committed to advocating for sustainable solutions and building up communities where stability, dignity, and access to safe housing are our new reality."*
*-Victoria Purvis, Director of Homeless and Prevention Services, NEMCSA*

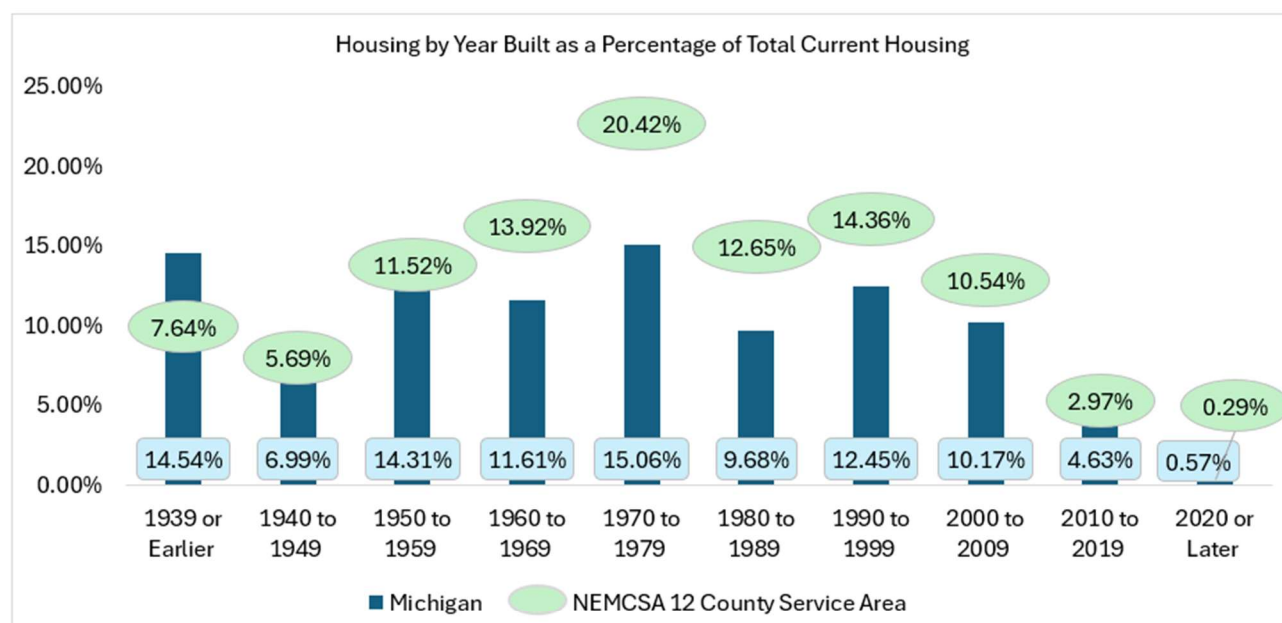| | State of Michigan | | NEMCSA 12-Counties | | Comparison |
| --- | --- | --- | --- | --- | --- |
| | Number | Percent | Number | Percent | NEMCSA vs State % |
| **Housing** | | | | | |
| Total Units | 4,599,683 | | 140,218 | | |
| Occupied Units | 4,040,168 | 87.8% | 87,316 | 62.3% | -25.6% |
| Vacant Units | 559,515 | 12.2% | 52,902 | 37.7% | 25.6% |
| Renter Occupied | 1,094,011 | 27.1% | 14,491 | 16.6% | -10.5% |
| Owner Occupied | 2,946,157 | 72.9% | 72,825 | 83.4% | 10.5% |
| Median Value | $ 217,600 | N/A | $ 161,790 | N/A | -$55,810 |
| Median Rent | $ 1,084 | N/A | $ 797 | N/A | -$287 |
| Median Costs Mortgage+ | $ 1,521 | | $ 1,117 | | -$404 |
| Homes built before 1979 | 2,874,796 | 62.5% | 83,129 | 59.3% | -3.2% |
| Homes built after 1980 | 1,724,887 | 37.5% | 57,090 | 40.7% | 3.2% |

+ Selected Monthly Owner Costs

*"NEMCSA has helped me several times. Without their help, my family and I would have been homeless or without power."*
*-NEMCSA Client*

**Housing by Year Built as a Percentage of Total Current Housing**

| Year Built | Michigan | NEMCSA 12 County Service Area |
|---|---|---|
| 1939 or Earlier | 14.54% | 7.64% |
| 1940 to 1949 | 6.99% | 5.69% |
| 1950 to 1959 | 14.31% | 11.52% |
| 1960 to 1969 | 11.61% | 13.92% |
| 1970 to 1979 | 15.06% | 20.42% |
| 1980 to 1989 | 9.68% | 12.65% |
| 1990 to 1999 | 12.45% | 14.36% |
| 2000 to 2009 | 10.17% | 10.54% |
| 2010 to 2019 | 4.63% | 2.97% |
| 2020 or Later | 0.57% | 0.29% |

■ Michigan ⬭ NEMCSA 12 County Service Area

| | Reasons for Vacant Units | | | | |
|---|---|---|---|---|---|
| | State of Michigan | | NEMCSA 12- Counties | | Comparison |
| | Number | Percent | Number | Percent | NEMCSA vs State % |
| For Seasonal, Recreational, or Occasional Use | 260,162 | 46.5% | 46,223 | 87.4% | 40.9% |
| For Sale | 27,620 | 4.9% | 895 | 1.7% | -3.2% |
| Sold, Not Occupied | 21,872 | 3.9% | 522 | 1.0% | -2.9% |
| For Rent | 58,335 | 10.4% | 613 | 1.2% | -9.3% |
| Rented, Not Occupied | 13,471 | 2.4% | 160 | 0.3% | -2.1% |
| For Migrant Workers | 1,645 | 0.3% | 38 | 0.1% | -0.2% |
| Other | 176,410 | 31.5% | 4,451 | 8.4% | -23.1% |
| Total Vacant Units | 559,515 | | 52,902 | | * 9.5% |

\* Percentage of total vacant units within the State

The area has 52,902 vacant units, which could be seen as having a surplus of housing. However, of the vacant units, 87.4% fall in the same category. In contrast, 46.5% of the State's
vacant units are for seasonal, recreational or occasional use. The large amount of vacant units for seasonal, recreational, or occasional use is due to the many fishing camps, hunting camps, family cabins, and summer vacation rentals that can be found in the area. These units are not designed for full year occupancy and are often lacking in heating and cooling capabilities. In addition, once the seasonal, recreational, or occasional use properties are deducted from the vacant properties, there remain only 6,679 units in the 12 counties. Also of note, only 2.9% of units are available for sale or rent in the service area compared to 15.3% of units for the state of Michigan.

## Households Spending More Than 30% of Income on Housing

| | State of Michigan | | | | NEMCSA 12- Counties (Core Counties + Roscommon) | | | | NEMCSA vs State % | |
|---|---|---|---|---|---|---|---|---|---|---|
| | Number of Households | Percent of Total Households | Number paying more than 30% of income | Percent | Number of Households | Percent of Total Households | Number paying more than 30% of income | Percent | Percent of Households by Income Bracket | Percent of Households paying more than 30% of income |
| No payment | 57,830 | 1.4% | | | 2,283 | 2.3% | | | 0.9% | |
| Less than $20,000 | 431,488 | 10.8% | 379,785 | 88.0% | 13,625 | 14.0% | 10,504 | 77.1% | 3.2% | -10.9% |
| $20,000-$34,999 | 445,166 | 11.2% | 285,956 | 64.2% | 13,962 | 14.3% | 6,183 | 44.3% | 3.2% | -20.0% |
| $35,000-$49,999 | 468,649 | 11.7% | 189,357 | 40.4% | 14,426 | 14.8% | 2,930 | 20.3% | 3.0% | -20.1% |
| $50,000 - $74,999 | 674,935 | 16.9% | 129,683 | 19.2% | 18,851 | 19.3% | 1,713 | 9.1% | 2.4% | -10.1% |
| $75,000 or more | 1,911,172 | 47.9% | 77,305 | 4.0% | 34,344 | 35.2% | 818 | 2.4% | -12.7% | -1.7% |
| Total | 3,989,240 | | 1,062,086 | 26.6% | 97,491 | | 22,148 | 22.7% | 0.0% | -3.9% |

*Households spending more than 30% of income on Housing by Income*

Based on the housing market standard of 30% of income being spent on shelter costs being considered affordable, it is important to understand how many individuals in the service area are at or below this benchmark. Though a 30% cost burden is high, the service area has 8,829 (9%) households that pay 50% or more of their income on housing. The State of Michigan has 492,008 (12.3%) in the same category.

### Transportation

Most individuals within the service area own their own automobile, not as a luxury, but as a matter of necessity. Due to the rural nature, most have to commute to get to jobs, school, goods and services. For those that are unable to own their own vehicle, the transportation situation is quite challenging. Public transportation is available in many of the communities, but not all. These public systems are not as robust as many urban public transit systems and often have limited routes and operating times. Many of the public transits are unavailable during evening or weekend hours, placing an additional burden on those without their own private automobile. For individuals driving to work, the median commute distance is 29 miles, with a mean commute time of 24 minutes. Also, many seniors express challenges around transportation to medical appointments, which was also supported by the Council on Aging Director's focus groups.

Some would suggest that individuals utilize ride-share options for the times that the public transportation is not an option. With the rural nature of the area, there are very few offering this service and it is a very unreliable form of transportation, only recently becoming available at all with many communities having zero, one, or two drivers, which is far less than needed to make this a viable alternative.

NEMCSA conducted interviews with four local transportation providers to gather challenges they face when providing services. Reponses included getting people places on time, not having enough wheelchair accessible vans, state assistance and funding being decreased, and educating riders on paying for services.

When asked about ideas to help with overcoming challenges and improving transportation options, three out of the four interviewees responded that updated technology would be beneficial to improving services.

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*"Without reliable transportation, people in Northeast Michigan face hardships getting to work, getting to medical appointments, or even getting to the grocery store. Lack of transportation is one of the biggest challenges to economic mobility. Access to transportation is one of the best ways to achieve financial security."*
*-Frances Ommani, NEMCSA Strategy and Development Director*

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## Education Domain

Advancing education leads to a greater chance of achieving a secure economic future. However, educational attainment within the NEMCSA 12-county report area trends less than State of Michigan averages. Within the area, for individuals 25 years of age and older, 9.1% of the population has less than a high school diploma, 35.6% have attained a high school degree, 35.8% have some college, and 19.5% have a bachelor's or higher education. The State of Michigan has rates of 8.0% less than a high school diploma, 27.9% have attained a high school degree, 32.1% with some college, and 32.1% with a bachelor's or higher degree.

For individuals experiencing poverty, 25.4% of poverty-impacted individuals in the service area having a high school education or less 15.3% high school diploma, 12.4% with some college and 5.6% with a bachelor's or higher. These statistics support the theory that a higher education decreases your likelihood of being in poverty.

The CNA report area has a noticeably lower percentage of individuals who attain a bachelor's or higher degree when compared to the state. In terms of median earnings within the service area, those with less than a high school diploma earns $30,136 while those with at least a bachelor's degree earn $51,267. In comparison, State of Michigan median earnings are $30,333 with less than a high school diploma and $65,476 with at least a bachelor's degree. For those living within this area, regardless of educational attainment, people earn less compared to the rest of the State. In addition, having a less educated workforce creates barriers when it comes to growing a local economy.

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*"The earliest years of a child's life shape who they will become. Investing in high-quality early education does more than prepare children for school. It offers families hope, opens doors to opportunity, and builds stronger, more resilient communities. The impact lasts a lifetime, laying the foundation for self-sufficiency, stability, and long-term success."*
*-Tricia Grifka, NEMCSA Early Childhood Services Director &*
*Michigan Head Start Association President*

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Regardless of education, those ages 25 and older living in service area are more likely to be in poverty. One notable exception appears to be those that do not complete high school. These individuals seem to have a better chance of escaping poverty here than in other parts of Michigan. Possible factors for this could be the large number of family farms, service industry positions, and a lower cost of living in the region.

| | State of Michigan | | | | NEMCSA 12-Counties (Core Counties + Roscommon) | | | | Comparison | |
|---|---|---|---|---|---|---|---|---|---|---|
| | Total Population | | In Poverty | | Total Population | | In Poverty | | NEMCSA vs State % | |
| | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Population | In Poverty |
| Education - Ages 25+ | 6,869,549 | | 741,448 | 10.8% | 147,756 | | 19,649 | 13.3% | 2.2% | 2.5% |
| Less than High School | 546,987 | 8.0% | 148,728 | 27.2% | 13,411 | 9.1% | 3,408 | 25.4% | 1.1% | -1.8% |
| High School/GED | 1,917,759 | 27.9% | 282,303 | 14.7% | 52,670 | 35.6% | 8,047 | 15.3% | 7.7% | 0.6% |
| Some College/ Associates | 2,202,230 | 32.1% | 220,863 | 10.0% | 52,892 | 35.8% | 6,576 | 12.4% | 3.7% | 2.4% |
| Bachelors + | 2,202,573 | 32.1% | 89,554 | 4.1% | 28,784 | 19.5% | 1,618 | 5.6% | -12.6% | 1.6% |

*Population data is for those over age 25, where poverty status is determined

*"Education is the foundation of every child's future, but that foundation is only as strong as the support behind it. When students are chronically absent, they miss more than lessons – they miss critical moments for growth, connection, and confidence. Family engagement plays a vital role in a child's educational journey. When families prioritize attendance and stay involved, it sends a powerful message that education matters. Without that support, the impact of chronic absenteeism deepens, widening achievement gaps and limiting potential at a time when kids need consistency and encouragement the most."*
*- Dorothy Pintar, NEMCSA Community Programs Director*

## Food Access Domain

While food access and the affordability of food did not arise as a top need within the CNA outcomes, large portions of the service area are food deserts. Shown on the following map, the areas shaded in pink are food deserts where there is low access to food sources. To be considered a food desert for a rural area, the distance needs to be 10 miles or greater to a food source and is one mile or greater in an urban area.

According to Feeding America, Otsego County (15.3%) is the only county within the service area with a food insecurity rate close to the State of Michigan (15.4%). The remaining 11 counties are higher. The area averages a food insecurity rate of 18.4%.

**Food Deserts Within the NEMCSA 12-County CNA Reporting Area**
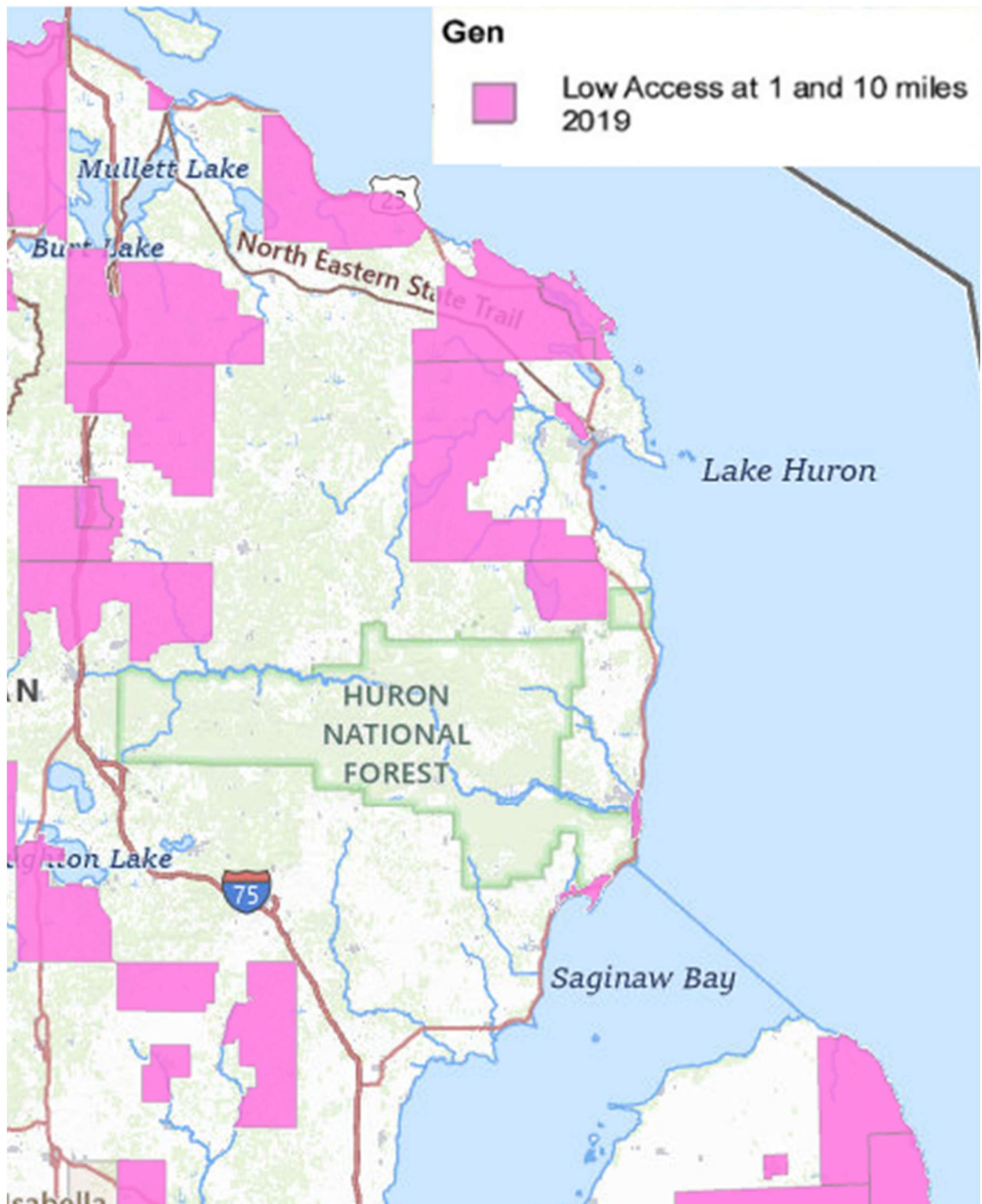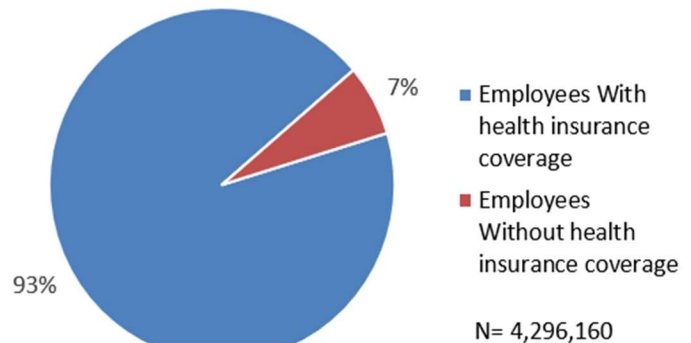
## Health Care Services Domain

The Health Care Services Domain refers to how well a community can take care of its residents considering both access to and affordability of care. With the rural nature of the area and transportation being identified as a need, especially for those in poverty, having close access to care is vital to keeping residents healthy.
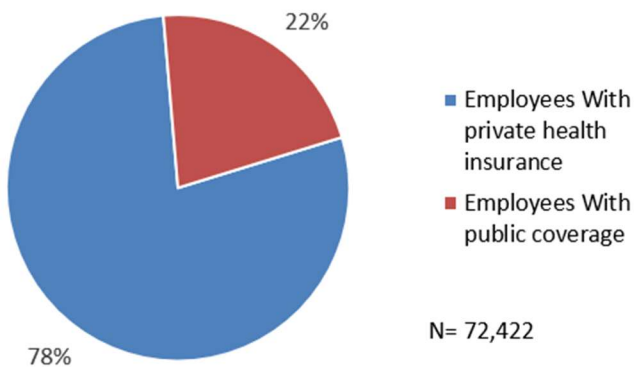
### Insurance Rates

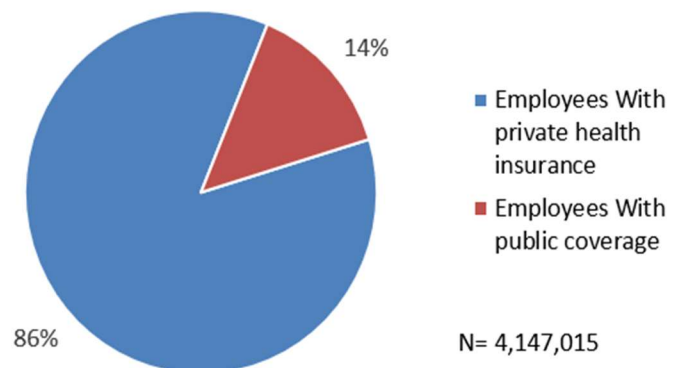**Health Insurance Rates for Working Individuals in the NEMCSA 12-County Service Area**
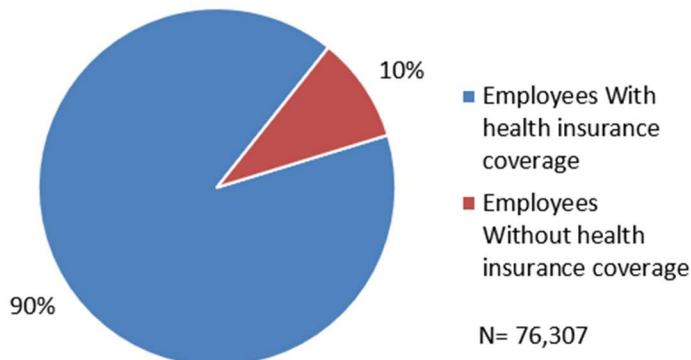
- Employees With health insurance coverage — 90%
- Employees Without health insurance coverage — 10%

N= 76,307

**Health Insurance Rates for Working Individuals in Michigan**

- Employees With health insurance coverage — 93%
- Employees Without health insurance coverage — 7%

N= 4,296,160

**Health Insurance Rates by Type for Working Individuals in the NEMCSA 12-County Service Area**

- Employees With private health insurance — 78%
- Employees With public coverage — 22%

N= 72,422

**Health Insurance Rates by Type for Working Individuals in Michigan**

- Employees With private health insurance — 86%
- Employees With public coverage — 14%

N= 4,147,015

In terms of insurance rates, the NEMCSA 12-county CNA report area fares worse than the state of Michigan. For those who are working, the state averages only 7% without health insurance, whereas the NEMCSA area averages 10%.  When comparing types of insurance held, public versus private, 22% of those within the area have public insurance coverage while the state only has 14%.

*"Being able to provide services and supports to older adults, caregivers, and adults with disabilities in Northeast Michigan helps to alleviate barriers to specialty medical providers through education and transportation assistance.  As the population in the area continues to age, it is vital the communities work together to meet the needs that will face this population"*
*-Laurie Sauer, Area Agency on Aging Director*

## Medical Providers

| Geography | Primary Care Physician Ratio (2024) *Averaged for Service Area | Mental Health Provider Ratio (2024) *Averaged for Service Area | Fair or Poor General Health Among Adults (2022) | Poor Mental Health Among Adults (2022) | Poor Physical Health Among Adults (2022) |
|---|---|---|---|---|---|
| Service Area | 1,334 | 3,138 | 20.8% | 16.9% | 15.8% |
| Michigan | 706 | 822 | 17.9% | 17.5% | 13.2% |

The NEMCSA 12-county service area has significantly higher ratios of patients to medical providers than the State of Michigan. For Primary Care Physicians, there is on average one physician for every 1,334 individuals in the service area (1:1,334). This is almost double the State of Michigan ratio of one physician for every 706 individuals (1:706). For Mental Health Providers, the gap is even larger. For the service area, there are 3,138 individuals for every provider (1:3,138). This is almost four times higher than the state ratio of 822 individuals for every one provider (1:822).

In terms of actual health of residents, 20.8% of the service area population have reported fair or poor general health among adults, while 17.9% of the state population reported the same. Also, 15.8% reported poor physical health among adults in the service area compared to 13.2% for the State.

*"The ever-changing landscape of healthcare nationwide provides opportunities and challenges when it comes to meeting the needs of seniors in rural communities like Northeast Michigan. Pivoting, preparing, and planning are all necessary to poise healthcare organizations and providers to be ready to meet the challenges ahead."*
*-Jeff Meden, Executive Director of PACE Northeast Michigan*

**Total Health Care Workers**
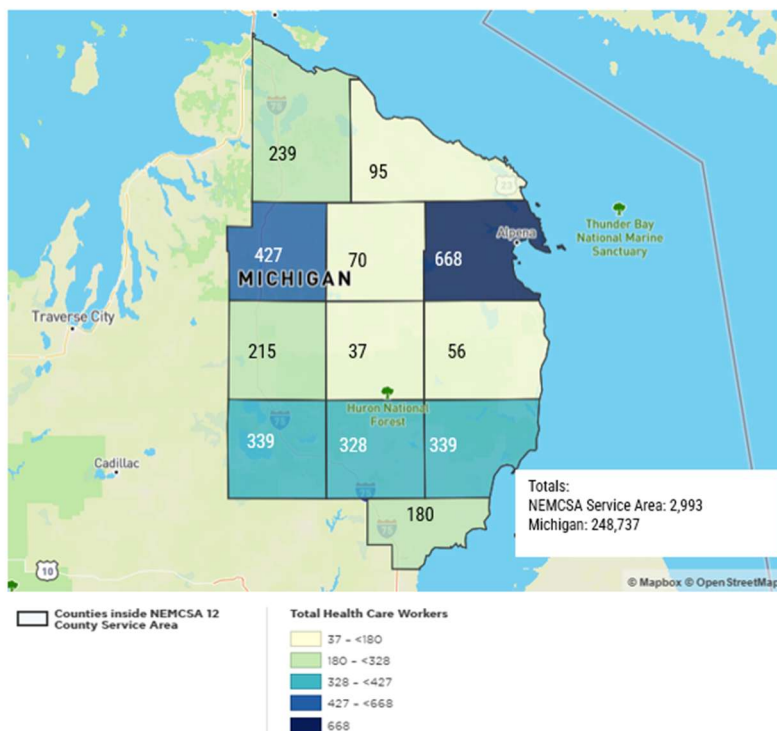


The map shows the number of healthcare workers in each of the counties within the NEMCSA service area. The total is 1.2% of all Michigan healthcare workers, while the total population is nearly 2% of the state population.

Totals:
NEMCSA Service Area: 2,993
Michigan: 248,737

Counties inside NEMCSA 12 County Service Area

Total Health Care Workers
- 37 - <180
- 180 - <328
- 328 - <427
- 427 - <668
- 668

*Sources: NPPES NPI 2024*

## Financial and Income Stability Domain

The Financial and Income Stability Domain encompasses those things that address the financial health of the community. Data related to this domain was utilized from the A.L.I.C.E project and the U.S. Census Bureau to identify jobs offering livable wages as a top five need within the 12-county CNA report area.
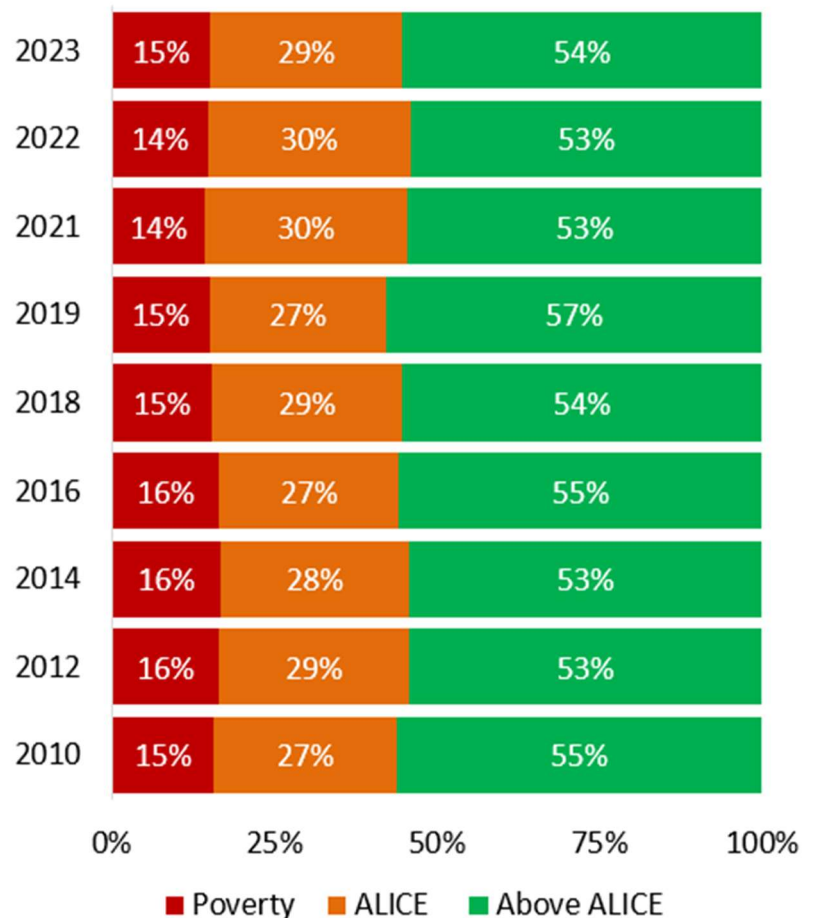
### A.L.I.C.E (Asset Limited, Income Constrained, Employed)

It's not just families in poverty who need to be considered when looking at the income in the area. Asset Limited, Income Constrained and Employed (A.L.I.C.E.) families also need to be considered when planning poverty initiatives. A.L.I.C.E families are often described as those that are one crisis away or are teetering on the edge of poverty and financial instability. These families may not qualify for services as they make more than 100% FPL, however, they would be financially unable to withstand one unpredictable life event.

According to the 2025 United Way A.L.I.C.E. Report, that references census data from 2023, a family of four (two adults and two children in childcare) need an annual salary of $68,772 to afford just the basics, or an hourly rate of $34.39. That same family would need an annual income of $113,544, or a combined hourly rate of $56.77 to be considered financially stable.

The NEMCSA service area has a median household income of $56,744. On average, 29% of households qualify as A.L.I.C.E, with an additional 15% that fall below the poverty line. In addition to the 14,970 households that fell below 100% FPL, there are 29,108 households that qualify as A.L.I.C.E. This results in a total of 44% of the service area households falling below the ALICE threshold. The Michigan average for A.L.I.C.E. households is 27.0%, with an additional 14% meeting the poverty definition. This results in a total of 41% of households below the ALICE threshold.



NEMCSA Service Area Percentage of Households by A.L.I.C.E. Status 2010-2023

| Year | Poverty | ALICE | Above ALICE |
|------|---------|-------|-------------|
| 2023 | 15% | 29% | 54% |
| 2022 | 14% | 30% | 53% |
| 2021 | 14% | 30% | 53% |
| 2019 | 15% | 27% | 57% |
| 2018 | 15% | 29% | 54% |
| 2016 | 16% | 27% | 55% |
| 2014 | 16% | 28% | 53% |
| 2012 | 16% | 29% | 53% |
| 2010 | 15% | 27% | 55% |

This means 44,078 households in the NEMCSA CNA report service area could benefit from NEMCSA programs, but many may not qualify.

## Income

**Income**

| Median amounts in dollars | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | Median Age of Workers | Median Household Income | Median Earnings | Less than High School | High School | Some College/ Associates | Bachelor's Degree | Graduate/ Professional Degree |
| Service Area (SA) | 43 | $56,617 | $34,463 | $29,842 | $31,945 | $37,075 | $50,201 | $67,268 |
| State of Michigan (MI) | 40 | $71,149 | $41,442 | $30,333 | $36,821 | $43,367 | $65,476 | $83,727 |
| SA VS MI $ Amount | | -$14,532 | -$6,979 | -$491 | -$4,876 | -$6,292 | -$15,275 | -$16,459 |
| SA VS MI % of Earnings | | 79.6% | 83.2% | 98.4% | 86.8% | 85.5% | 76.7% | 80.3% |

The median household income for those in the NEMCSA area is only 80% of the state median household income. Regardless of education level, those working in the NEMCSA service area make less when compared to the State.
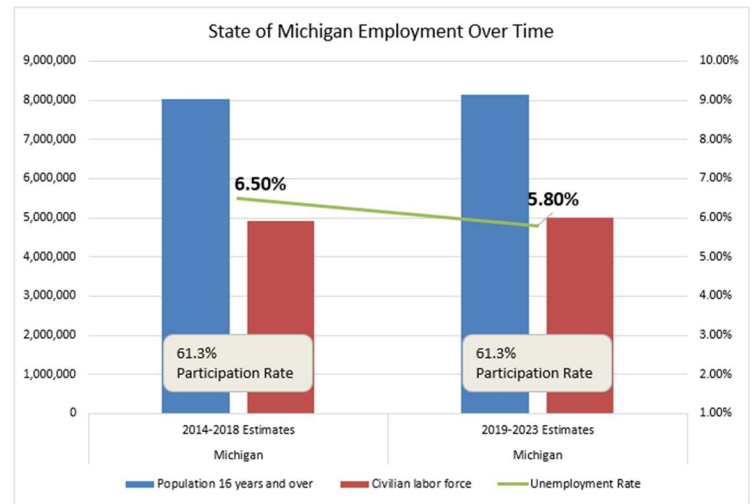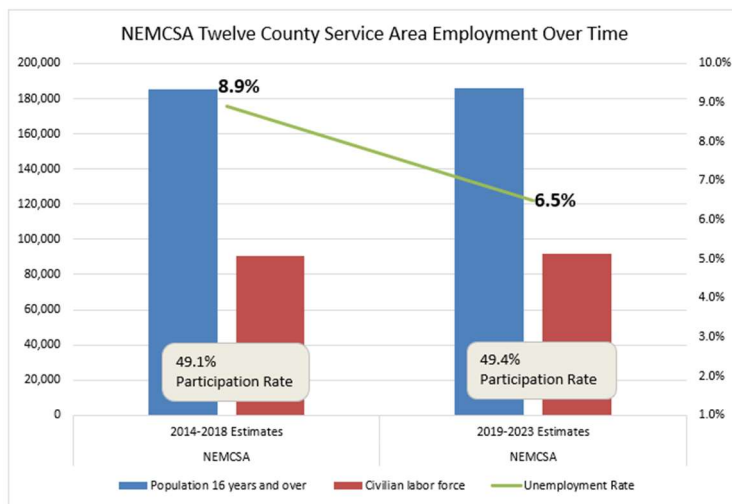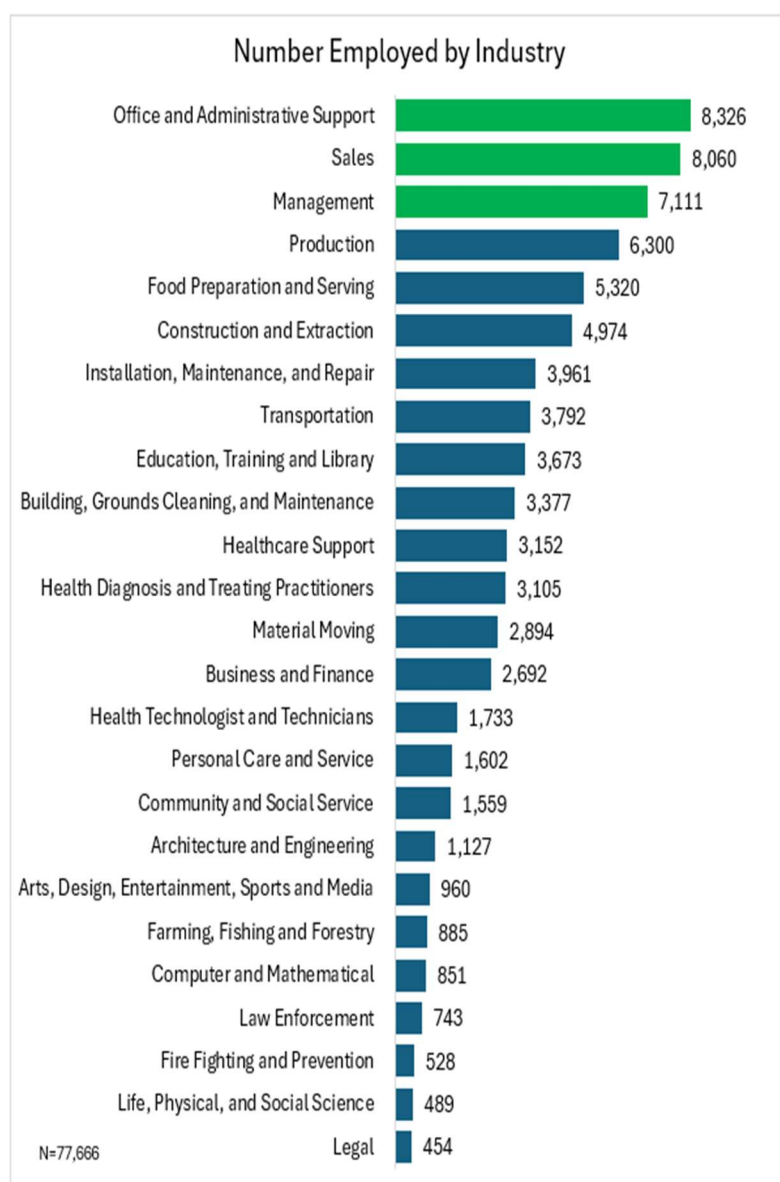




## Employment Over Time

Trend data shows that the employment rate for the report area has decreased in the 2019-2023 timeframe, compared to the 2014-2018 timeframe estimates. However, when compared with the trend data for the state of Michigan over the same timeframes, the unemployment rate for the area remains higher. Within the area, the estimated rate for unemployment was 6.5% compared to a state estimation during the same time frame of 5.80%.

| | Labor force participation by poverty status | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | State of Michigan | | | | NEMCSA Twelve Counties (Core Counties + Roscommon) | | | | Comparison | |
| | Total Population | | In Poverty | | Total Population | | In Poverty | | NEMCSA vs State % | |
| | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Population | In Poverty |
| **Civilian Labor Force, Age 16+** | 5,002,850 | | 363,820 | 7.3% | 83,095 | | 6,581 | 7.9% | | 0.6% |
| Employed | 4,712,135 | 94.2% | 279,434 | 76.8% | 77,666 | 93.5% | 5,198 | 79.0% | -0.7% | 2.2% |
| Unemployed | 290,715 | 5.8% | 84,386 | 23.2% | 5,429 | 6.5% | 1,383 | 21.0% | 0.7% | -2.2% |

U.S. Census employment data is based on a civilian labor force comprised of those age 16 and older. Most of the labor force within the area is employed at a rate of 93.5%. This is slightly lower than the State average of 94.2%. The unemployment rate in the area, 6.5%, is higher than the State rate of 5.8%

for the same time period. Of those who make up the civilian labor force in the NEMCSA area, 7.9% are living in poverty. Additionally, 79.0% of those who live in poverty are employed. This contradicts the widely held belief that individuals living in poverty do not want to work.

| Industry | Number of Establishments | % Total Establishments |
|---|---|---|
| Retail Trade | 808 | 15.53% |
| Construction | 695 | 13.36% |
| Accommodation and Food Services | 611 | 11.75% |
| Other Services | 578 | 11.11% |
| Health Care and Social Assistance | 563 | 10.82% |
| Manufacturing | 355 | 6.82% |
| Professional, Technology, and Science | 319 | 6.13% |
| Administrative Support and Waste Management | 227 | 4.36% |
| Finance and Insurance | 213 | 4.09% |
| Transportation and Warehousing | 168 | 3.23% |
| Agriculture, Forestry, Fishing, Hunting | 148 | 2.85% |
| Real Estate | 144 | 2.77% |
| Arts, Entertainment, and Recreation | 109 | 2.10% |
| Public Administration | 84 | 1.61% |
| Information | 69 | 1.33% |
| Mining, Oil, and Gas | 43 | 0.83% |
| Utilities | 28 | 0.54% |
| Educational Services | 23 | 0.44% |
| Wholesale Trade | 12 | 0.23% |
| Management | 5 | 0.10% |

**Number Employed by Industry**

| Industry | Number Employed |
|---|---|
| Office and Administrative Support | 8,326 |
| Sales | 8,060 |
| Management | 7,111 |
| Production | 6,300 |
| Food Preparation and Serving | 5,320 |
| Construction and Extraction | 4,974 |
| Installation, Maintenance, and Repair | 3,961 |
| Transportation | 3,792 |
| Education, Training and Library | 3,673 |
| Building, Grounds Cleaning, and Maintenance | 3,377 |
| Healthcare Support | 3,152 |
| Health Diagnosis and Treating Practitioners | 3,105 |
| Material Moving | 2,894 |
| Business and Finance | 2,692 |
| Health Technologist and Technicians | 1,733 |
| Personal Care and Service | 1,602 |
| Community and Social Service | 1,559 |
| Architecture and Engineering | 1,127 |
| Arts, Design, Entertainment, Sports and Media | 960 |
| Farming, Fishing and Forestry | 885 |
| Computer and Mathematical | 851 |
| Law Enforcement | 743 |
| Fire Fighting and Prevention | 528 |
| Life, Physical, and Social Science | 489 |
| Legal | 454 |

N=77,666

### Industries and Employers

Within the report area, the largest number of individuals are employed in the office and administrative support category, while sales and management make up the next two categories. The top industries for the area based on the number of establishments are retail trade (15.53% of total establishments) with construction (13.36%) and accommodation and food services (11.75%), which are the next two largest industries. In contrast, firefighting and prevention, life, physical, and social sciences, and the legal profession have the least number of individuals employed within the service area.

## TOP FIVE NEEDS

Many factors contribute to the causes of poverty in the report area. The rural nature of the region, smaller populations that translate to less funding allocations, lower educational attainment by the population, and less job growth attracting new investments, all factors into the causes of continued poverty for the region.

Considering the above causes in conjunction with the data collected during the community needs assessment process, the following top five needs were identified. Section 2 contains the process used in identifying and ranking the top five needs.

| NEED | Family or Community Need |
|---|---|
| 1. Communities lack safe and affordable housing. | Community |
| 2. Communities lack jobs offering a livable wage. | Community |
| 3. Communities lack alternative transportation options for families that do not have their own automobile. | Community |
| 4. Communities lack licensed childcare providers. | Community |
| 5. Communities lack specialty medical providers. | Community |

# SECTION 2: NEMCSA SURVEY DATA AND FINDINGS

## CNA PROCESS

### Methodology

Every three years, in accordance with organizational standards set forth by the Federal Office of Community Services, NEMCSA undertakes a primary data gathering effort through the creation, administration, and analysis of a community needs assessment. The data gathering tools include a survey, focus groups, interviews, and a review of relevant data sets for the service area. The survey tool asks for demographic information concerning age, race, residence, marital status, income, and other important information. It then asks participants what they have and what they need in terms of housing, food, education, healthcare, transportation, and income. Additional information gathered asks those taking the survey to gauge the strengths and weaknesses they see in the community. Focus groups were used to gather participants' thoughts on needs or weaknesses related to the domains contained within this report, as well as any ideas they wanted to share related to those needs. Finally, relevant data sets are reviewed to obtain insights on the broader community as a whole. Census data was a primary resource utilized in determining a picture of the population served. This data is analyzed and used in decision making so NEMCSA can align services to identified needs.

### Survey Creation/Distribution

Drawing on previous community needs assessments, feedback from the Board of Directors, and a review of CSBG standards, a comprehensive survey tool was developed to effectively collect data from the communities served. The survey targeted three key groups: individuals, community-based organizations, and elected officials. This multi-perspective approach ensured a more well-rounded and accurate understanding of community needs. In 2025, the primary method of data collection was through an online survey platform. Paper versions were also made available for those who required them, with completed responses later entered into the digital system to ensure consistency in data aggregation.

Distribution of the survey was done through several avenues. Traditional distribution methods included word of mouth, sharing at meetings, and the distribution of a flyer with a QR code. Other methods included social media, the NEMCSA agency website, county collaborative bodies, and the NEMCSA Board of Directors. The survey was open to accept responses for a nine-week period in 2024.

## Focus Groups

Focus groups were utilized to gather information directly from agency stakeholders. There were multiple formats utilized depending on how much time was allowed and the audience. This process has allowed valuable insights into our local community's strengths and weaknesses, and the data is used to support the findings within this report. Topics of housing, food, education, transportation, health, income/financial stability, and the overall community were discussed. In focus groups conducted with the NEMCSA Board of Director's and program volunteers, housing was overwhelmingly identified as the top concern. In a focus group conducted with Council/Commission on Aging directors, income and financial stability were identified as the top concerns.

## Data Collection

An important consideration for data collection was anonymity for those completing the CNA survey. NEMCSA values the information provided by survey respondents, offering anonymity allowed for those completing the survey to feel comfortable in revealing their needs and personal information related to income, housing, etc.

### Data Input and Analysis

The survey tool was created in Formstack software. This allowed for responses to be automatically compiled within the software. Once compiled, the data could be exported to other programs for analysis as needed.

The survey results were exported to Microsoft Excel, where the dataset was refined by filtering out responses originating outside the designated twelve-county service area. Data analysis and visualization were conducted using Microsoft Excel, Microsoft Power BI, and Canva.

### Methodology in Ranking the Needs Identified

NEMCSA distributed a Community Needs Assessment (CNA) survey to gather responses from community members, partner organizations, and elected officials. The responses gathered were refined to focus solely on responses from NEMCSA's core counties and Roscommon County. Responses from other counties were not included in the data.

The analysis focused on indicators that revealed strengths and weaknesses across multiple domains. To establish the overall ranking of each indicator, three percentages were combined. The percentage of survey responses:

- Identifying the indicator as a personal need
- Categorizing the indicator as a weakness (responses marked "No opinion" were excluded. Those indicating "strength" or "weakness" were included in the calculations)
- That recognized the indicator as the top priority.

This method resulted in a maximum score of 300 for each indicator. The item with the highest score was "Safe & Affordable Housing," achieving a score of 134. A full list of the needs and scores can be

found at the end of this report. "Taxi/Car Rental/Rideshare Services Available" and "Evening, Late Night, & Weekend Transportation" were combined into "Alternatives to Private Transportation" due to their similarities.

## Data Dissemination

The 2025 NEMCSA Community Needs Assessment Report will be shared with the community and stakeholders through a variety of methods. The final report will be posted on the NEMCSA website, as well as the link to the report being shared on social media. In addition, the report will be shared electronically with partners. Other means of report dissemination may include sharing with local collaborative bodies, county commission boards, and foundations. The data will also be shared with the NEMCSA Board of Directors at a regularly scheduled meeting.

## What We Collected

A total of 442 surveys were collected throughout the survey timeframe. This is a decrease from the 2022 Community Needs Assessment, however, several local agencies were also conducting CNA's during the 2025 timeframe. Of the surveys collected, 41 were from counties outside of the NEMCSA service area (core counties and Roscommon) and therefore removed from data analysis. Responses were gathered from three groups, individuals (326 responses), organizations (61 responses), and elected officials (14 responses). Individuals who completed the survey were asked questions regarding what they viewed as strengths and weaknesses, what they had and what they needed in terms of basic services, and basic demographic data. Elected officials and community organizations were also asked the same community strength and weakness questions. All respondents were asked open-ended qualitative questions on how they viewed the services provided by NEMCSA from their prospective lens.

### Individual Respondents

Of the individual responses, 84 were from Iosco County, 70 from Alpena County, and 172 from the remaining counties included in the report. The largest age brackets for responses were 25-44 years of age with 114 responses, 45-54 years of age with 57 responses, and 65-74 years of age with 53 responses and 102 responses from the remaining age groups.

| Alcona | Alpena | Arenac | Cheboygan | Crawford | Iosco |
|---|---|---|---|---|---|
| 30 | 70 | 17 | 20 | 31 | 84 |

| Montmorency | Ogemaw | Oscoda | Otsego | Presque Isle | Roscommon |
|---|---|---|---|---|---|
| 7 | 16 | 9 | 9 | 26 | 7 |

### Elected Official Respondents

A total of 14 elected officials completed the survey. The largest number of responses came from Crawford County with four and Presque Isle County with eight. Unfortunately, five counties had no elected officials who completed the survey.

Gathering responses from elected officials is vital to see the whole picture of the community as well as NEMCSA as an agency.  Elected officials are tasked with representing their constituents, and that includes the businesses and agencies within their communities. Gauging the knowledge of elected officials about NEMCSA services as well as the communities they represent provides a unique lens when looking at the community. Awareness of NEMCSA services by elected officials is vital for future funding advocacy.

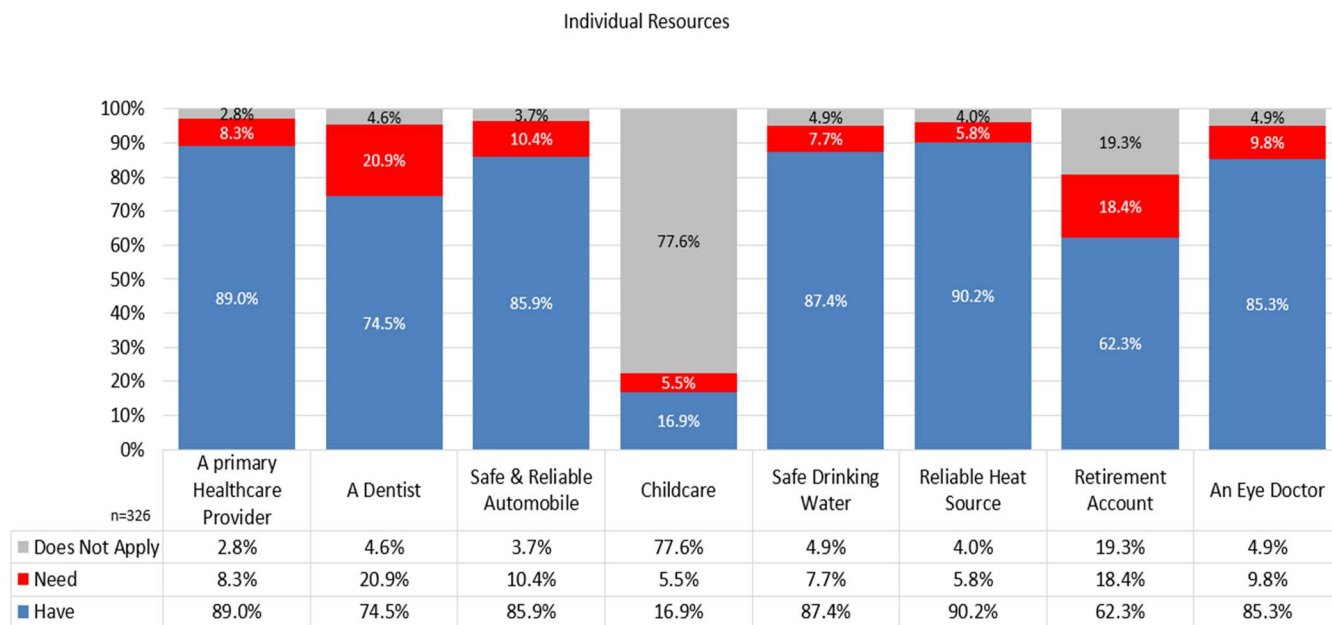**Organizational Respondents**

Collaboration with other organizations and entities is one of the most powerful tools an organization can leverage to impact the individuals and communities they serve. Asking other organizations for their perspective on resources, NEMCSA as an agency, provides peer-to-peer feedback which is so valuable to an organization. A total of 61 completed surveys were gathered from community organizations: 12 from Alpena County and 11 from Iosco County. Except for Montmorency County, there were at least two community organizations in each county that completed a survey. Unfortunately, Montmorency County did not have any community organizations complete a survey. It is important to note that some of the organizations that completed the survey represent more than one county and may cover Montmorency County.
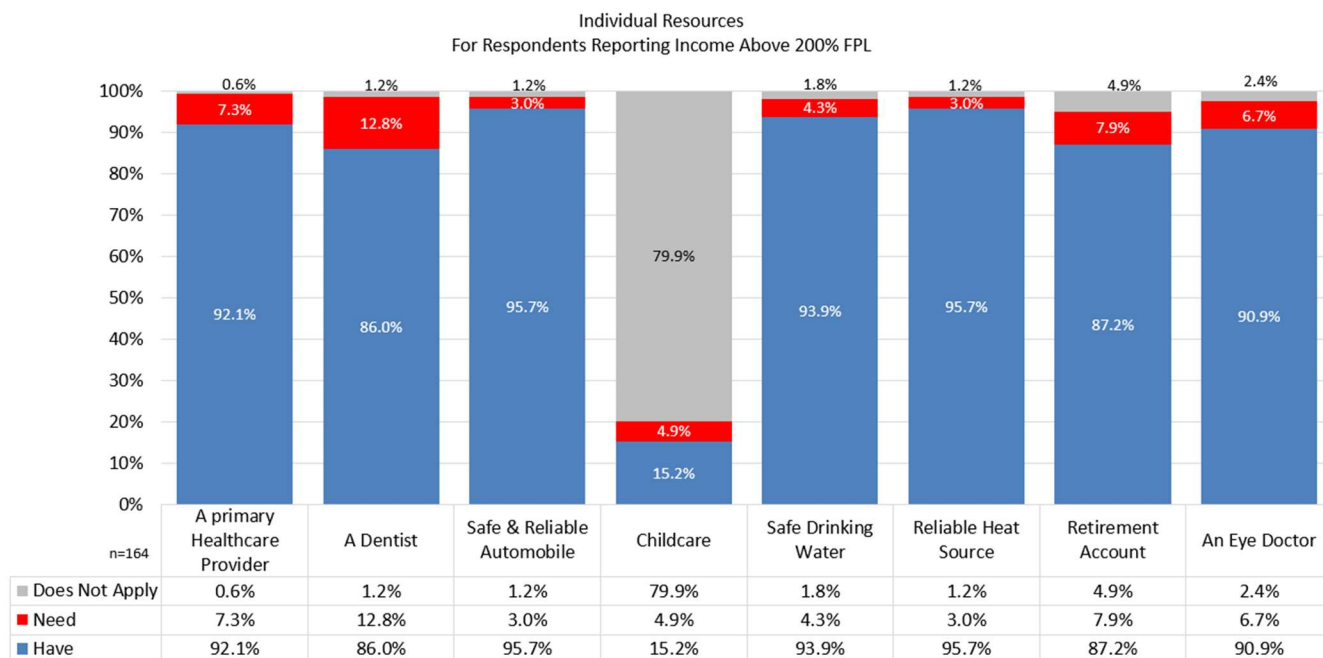
## INDIVIDUAL RESOURCES

Always compelling is reviewing the data produced in the "Have vs. Need" section of the survey. The first chart below titled "Individual Resources" shows responses for all those completing the question, regardless of economic standing. The greatest needs shown are a dentist at 20.9%, a retirement account at 18.4%, and a safe and reliable automobile at 10.4%. Of note, the need for a dentist and a retirement account were also identified in the 2022 NEMCSA CNA, however the need for a dentist was 14.1% and the need for a retirement account was 15.1%.

When looking specifically at childcare, a large percentage of respondents (77.6%) indicated that daycare did not apply to them, which given the age of population in the area, is not unexpected. However, of the respondents who indicated childcare applied to them (based on if they answered need or want), nearly one in four indicated childcare as something they needed. When you combine that with the lack of available licensed slots, we realize this is a significant barrier to working parents.
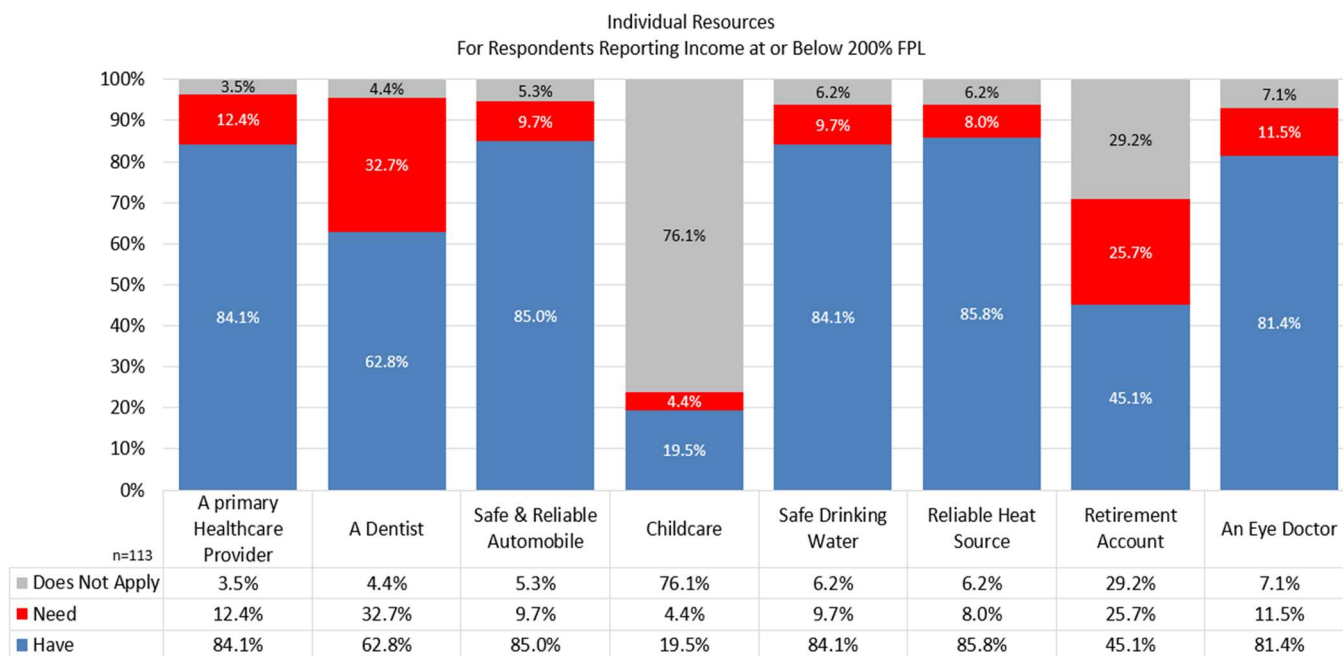
Individual Resources



| n=326 | A primary Healthcare Provider | A Dentist | Safe & Reliable Automobile | Childcare | Safe Drinking Water | Reliable Heat Source | Retirement Account | An Eye Doctor |
|---|---|---|---|---|---|---|---|---|
| ▨ Does Not Apply | 2.8% | 4.6% | 3.7% | 77.6% | 4.9% | 4.0% | 19.3% | 4.9% |
| ■ Need | 8.3% | 20.9% | 10.4% | 5.5% | 7.7% | 5.8% | 18.4% | 9.8% |
| ■ Have | 89.0% | 74.5% | 85.9% | 16.9% | 87.4% | 90.2% | 62.3% | 85.3% |

The "Have vs. Need" responses were also broken down into two categories, those whose income is above 200% if the Federal Poverty Level (164) and those whose income was at or below 200% of the Federal Poverty Level (113).
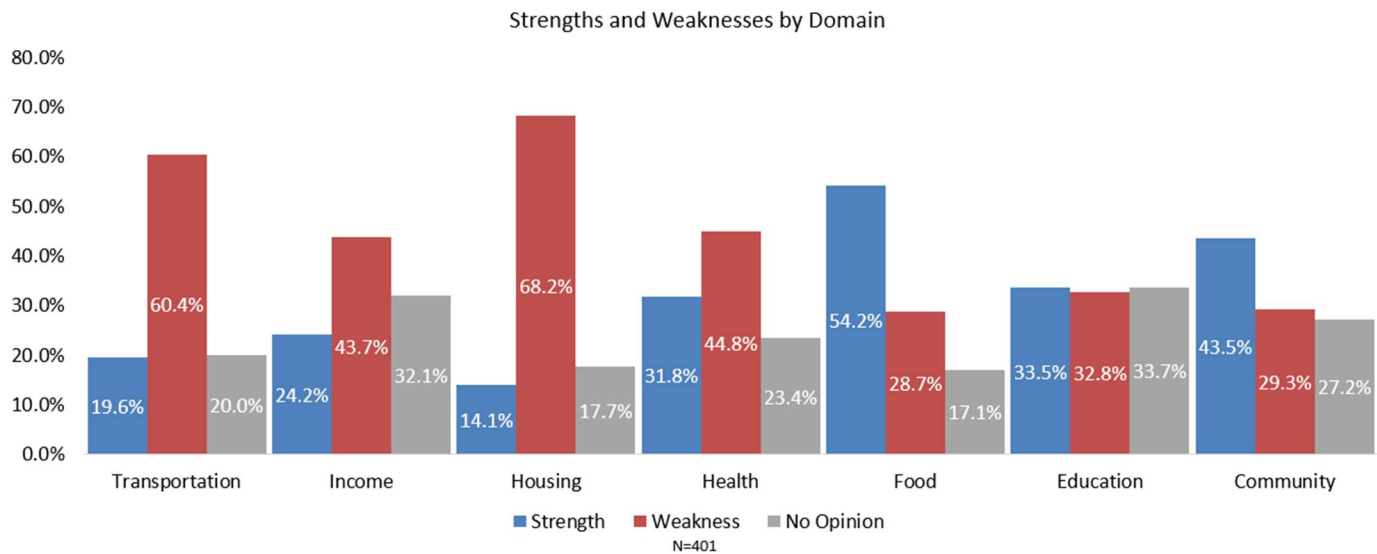
Of the individuals above poverty, the greatest need was a dentist at 12.8%, a retirement account at 7.9%, and a primary health care provider at 7.3%.

**Individual Resources**
**For Respondents Reporting Income Above 200% FPL**

| n=164 | A primary Healthcare Provider | A Dentist | Safe & Reliable Automobile | Childcare | Safe Drinking Water | Reliable Heat Source | Retirement Account | An Eye Doctor |
|---|---|---|---|---|---|---|---|---|
| Does Not Apply | 0.6% | 1.2% | 1.2% | 79.9% | 1.8% | 1.2% | 4.9% | 2.4% |
| Need | 7.3% | 12.8% | 3.0% | 4.9% | 4.3% | 3.0% | 7.9% | 6.7% |
| Have | 92.1% | 86.0% | 95.7% | 15.2% | 93.9% | 95.7% | 87.2% | 90.9% |

Of those in poverty, shown below, similar needs exist, however at a much higher rate than those above poverty. Again, a dentist is the most common need at 32.7%, followed by a retirement account at 25.7% and a primary healthcare provider at 12.4%. This data relates that why the same needs exist across the community, those in poverty are more greatly impacted by the lack of these resources in their community.

**Individual Resources**
**For Respondents Reporting Income at or Below 200% FPL**

| n=113 | A primary Healthcare Provider | A Dentist | Safe & Reliable Automobile | Childcare | Safe Drinking Water | Reliable Heat Source | Retirement Account | An Eye Doctor |
|---|---|---|---|---|---|---|---|---|
| Does Not Apply | 3.5% | 4.4% | 5.3% | 76.1% | 6.2% | 6.2% | 29.2% | 7.1% |
| Need | 12.4% | 32.7% | 9.7% | 4.4% | 9.7% | 8.0% | 25.7% | 11.5% |
| Have | 84.1% | 62.8% | 85.0% | 19.5% | 84.1% | 85.8% | 45.1% | 81.4% |

## STRENGTHS AND WEAKNESSES



Strengths and Weaknesses by Domain

Survey respondents were asked about different measures within each domain and whether they viewed it as a strength, weakness, or had no opinion. Housing (68.2%) was found to be the largest weakness, followed by transportation (60.4%) and health (44.8%). Food (54.2%) and community (43.5%) were found to be the biggest strengths.

Four of the seven domains, transportation, income, housing and health, were all found to be more of a weakness than a strength. Interestingly, education was ranked almost evenly across strength (33.5%), weakness (32.8%), or no opinion (33.7%).

## COMMUNITY PERCEPTIONS OF NEMCSA SERVICES



Awareness of NEMCSA Services
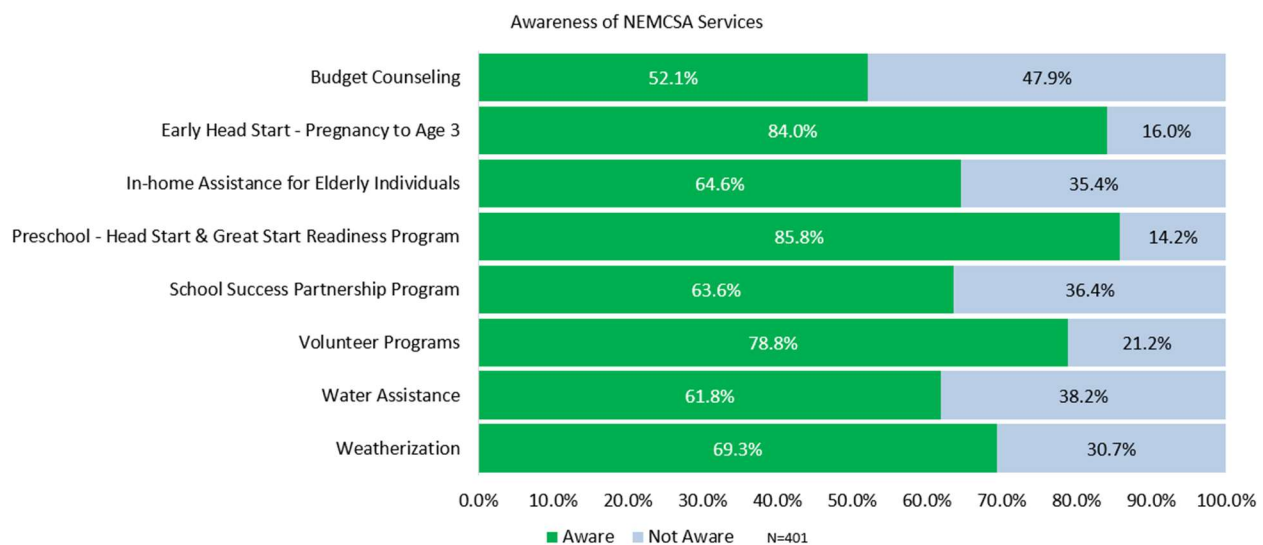
For awareness of NEMCSA services, survey respondents were most aware of Preschool – Head Start and Great Start Readiness Program (85.8%), followed by Early Head Start – Pregnancy to Age 3 (84.0%) and Volunteer Programs (78.8%). Survey respondents were least aware of Budget Counseling (52.1%), Water Assistance (61.8%) and the School Success Partnership Program (63.6%).

# CONCLUSION AND RECOMMENDATIONS

## CONCLUSION

Analysis of the community needs assessment data revealed a number of significant challenges facing the service area. Some of these challenges are unique to the rural characteristics of the area, while others reflect more universal issues found throughout the state. Many Community Action Agency (CAA) activities reference the top five needs identified in the assessment. For that reason, these needs were further evaluated based on their impact on families, and five specific issues stood out.

**Top Five Needs**
1. Communities lack safe and affordable housing.
2. Communities lack jobs offering a livable wage.
3. Communities lack alternative transportation options for families that do not have their own automobile.
4. Communities lack licensed childcare providers.
5. Communities lack specialty medical providers.

These needs are closely connected and often influence one another, creating a cascading impact on poverty. When all contributing factors are considered, it becomes clear that these top needs, in combination with the rural nature of the area, play a significant role in the higher-than-average poverty and unemployment rates found within the report area.

For example, when a family does not have access to safe and affordable housing, their choices within the community become very limited. In many cases, families are forced to double up with relatives or friends to avoid homelessness, which can lead to overcrowded and unstable living environments.

Transportation is another challenge that directly affects a household's earning potential and ability to meet basic needs. Without access to a reliable vehicle, it is difficult to attend medical appointments or access dental care, especially when those providers are located more than 30 minutes from home. Lack of transportation also limits employment opportunities and can prevent families from improving their financial circumstances. Additionally, the regional climate makes owning a vehicle almost a necessity. However, the harsh winters increase wear and tear on vehicles, often resulting in expensive repairs or shortened vehicle lifespans.

Childcare access is another major concern for working families. As noted in this report, there is a significant shortage of licensed and regulated childcare providers across the area. This scarcity makes it difficult for parents to find affordable, quality care, which can force one parent to remain at home rather than enter the workforce. As a result, families may experience ongoing financial hardship, further contributing to the cycle of poverty.

## RECOMMENDATIONS

To address the critical needs identified through this community needs assessment, the following recommendations are proposed. These strategies aim to improve the quality of life, access to essential services, and long-term stability for individuals and families in our communities:

**1. Expand Access to Safe and Affordable Housing**

- Collaborate with local governments, housing authorities, and nonprofit developers to increase the supply of affordable housing units.
- Support policies that incentivize the development of mixed-income and low-income housing projects.
- Advocate for rental assistance programs and emergency housing support to reduce housing insecurity and homelessness.

**2. Promote Job Creation and Livable Wages**

- Partner with economic development organizations and workforce boards to attract and grow industries offering sustainable, livable-wage employment.
- Invest in workforce training and upskilling programs that align with local job market needs, particularly in high-demand sectors such as healthcare, skilled trades, and technology.
- Advocate for local wage policies that support financial stability for working families.

**3. Improve Transportation Access for Families Without Vehicles**

- Explore the feasibility of expanding public transit routes, ride-share programs, or micro-transit options in underserved areas.
- Collaborate with regional transportation authorities to identify and address transit deserts.
- Support community-based transportation solutions such as volunteer driver networks and transportation vouchers for families accessing work, school, and services.

**4. Increase the Availability of Licensed Childcare Providers**

- Support programs that reduce barriers to childcare licensing and provide incentives for providers to open or expand services in underserved areas.
- Partner with educational institutions and workforce development agencies to recruit, train, and retain childcare professionals.
- Advocate for increased public funding to expand subsidized childcare slots and improve provider compensation.

**5. Expand Access to Specialty Medical Services**

- Collaborate with regional health systems to expand telehealth and mobile specialty clinics for rural and underserved populations.
- Advocate for recruitment and retention programs to attract specialty medical providers to the area, including loan repayment incentives and rural residency programs.
- Explore partnerships with academic medical centers and regional hospitals to provide rotating or visiting specialist care.

These recommendations reflect the community's expressed priorities and are grounded in both quantitative data and qualitative feedback. Ongoing collaboration with stakeholders, residents, and partner organizations will be essential to advancing these goals and measuring their impact over time.

# REFERENCES

Centers for Disease Control and Prevention. PLACES: Local Data for Better Health, 2022 Release. PLACES Public Inquiries (Division of Population Health, Epidemiology and Surveillance Branch), U.S. Department of Health & Human Services, June 28 2025 (metadata update), https://data.cdc.gov/500-Cities-Places/PLACES-Local-Data-for-Better-Health-Census-Tract-D/nw2y-v4gm. Accessed 1 July 2025.

Centers for Medicare & Medicaid Services. "Data Dissemination." National Provider Identifier Standard, Centers for Medicare & Medicaid Services, updated May 2025, www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProvIdentStand/DataDissemination. Accessed 26 Feb. 2025.

Feeding America. Map the Meal Gap: County-Level Food Insecurity, 2023 (Overall), Michigan. Map.FeedingAmerica.org, https://map.feedingamerica.org/county/2023/overall/michigan. Accessed 19 June 2025.

Go to the Atlas. (2025, June 19). Retrieved from USDA Economic Research Service U.S. Department of Agriculture: https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/ Northeast Michigan Community Service Agency. Northeast Michigan Community Service Agency, n.d., www.nemcsa.org. Accessed 22 July 2024.

State of Michigan, Department of Technology, Management & Budget. "Michigan GIS Open Data Portal." ArcGIS Web Application, Esri, https://michigan.maps.arcgis.com/apps/webappviewer/index.html?id=a0e24821a9c24b60a50038957528311a. Accessed 24 July 2024.

U.S. Bureau of Labor Statistics. Quarterly Census of Employment and Wages (QCEW), 2023. U.S. Department of Labor, 5 June 2024, www.bls.gov/cew/data.htm. Accessed 28 May 2025.

U.S. Census Bureau, U.S. Department of Commerce. "Financial Characteristics." American Community Survey, ACS 5-Year Estimates Subject Tables, Table S2503, 2023, https://data.census.gov/table/ACSST5Y2023.S2503?q=s2503&g=040XX00US26_050XX00US26001,26007,26011,26031,26039,26069,26119,26129,26135,26137,26141,26143&moe=false. Accessed on May 22, 2025.

U.S. Census Bureau, U.S. Department of Commerce. "Health Insurance Coverage Status and Type by Employment Status." American Community Survey, ACS 5-Year Estimates Detailed Tables, Table B27011, 2023, https://data.census.gov/table/ACSDT5Y2023.B27011?t=Health+Insurance&g=040XX00US26_050XX00US26001,26007,26011,26031,26039,26069,26119,26129,26135,26137,26141,26143&moe=false. Accessed on April 10, 2025.

U.S. Census Bureau, U.S. Department of Commerce. "Selected Housing Characteristics." American Community Survey, ACS 5-Year Estimates Data Profiles, Table DP04, 2023, https://data.census.gov/table/ACSDP5Y2023.DP04?q=dp04&g=040XX00US26_050XX00US26001,26007,26011,26031,26039,26069,26119,26129,26135,26137,26141,26143&moe=false. Accessed on May 22, 2025.

U.S. Census Bureau. "Educational Attainment." American Community Survey, ACS 5-Year Estimates Subject Tables, Table S1501, 2022, https://data.census.gov/table/ACSST5Y2022.S1501?t=Educational Attainment&g=040XX00US26_050XX00US26001,26007,26011,26031,26039,26069,26119,26129,26135 ,26137,26141,26143&moe=false. Accessed on June 4, 2024.

U.S. Census Bureau. American Community Survey 5-Year Estimates, 2019–2023. U.S. Department of Commerce, Dec. 12, 2024, www.census.gov/data/developers/data-sets/acs-5year.html. Accessed 21 March 2025.

U.S. Department of Agriculture, Economic Research Service. Food Access Research Atlas (FARA): 2019. USDA ERS, 27 Apr. 2021, www.ers.usda.gov/data-products/food-access-research-atlas/download-the-data. Accessed 22 May 2025.

U.S. Department of Housing and Urban Development and U.S. Department of Transportation. Location Affordability Index (LAI) Version 3 (2012–2016). HUD Exchange, published 23 May 2019 (dataset), metadata updated 1 Mar. 2024, hudgis-hud.opendata.arcgis.com/datasets/b7ffe3607e8c4212bf7cf2428208dbb6. Accessed 1 July 2025.

U.S. Department of Housing and Urban Development. Consolidated Planning/CHAS Data, 2017–2021. HUD User, released 12 September 2024, accessed 22 May 2025. HUD User, www.huduser.gov/portal/datasets/cp.html.

United For ALICE. (2025, June). Research Center - Michigan. Retrieved from United For ALICE: https://unitedforalice.org/state-overview/Michigan
United For ALICE. Introducing ALICE: Michigan. United For ALICE, https://www.unitedforalice.org/introducing-ALICE/Michigan. Accessed 5 June 2025.

WorkLife Systems. "Update Referral." WorkLife Systems, https://stage.worklifesystems.com/ReferralUpdate/UpdateReferral/4461700?activetab=SearchProgra ms. Accessed 24 July 2024.

| Domain | Need from CNA | % of survey respondents identifying as a personal need they have | % of Survey Responses Identifying as a Weakness - without including "No Opinion" responses | % of Survey Responses Identifying as the TOP Weakness | Total Score |
|---|---|---|---|---|---|
| Housing | Safe & Affordable Housing | | 86 | 48 | **134** |
| Income | Livable Wages | | 89.3 | 36.7 | **126** |
| Transportation | Evening, Late Night, & Weekend Transportation | | 91.3 | 25.8 | **117.1** |
| Transportation | Taxi/Car Rental/Rideshare Services Available | | 90 | 15.6 | **105.6** |
| Income | Childcare | 5.5 | 84.3 | 13.1 | **102.9** |
| Health | Medical Specialists | | 83.1 | 17.9 | **101** |
| Housing | Quality of Available Housing Options | | 86.3 | 12.4 | 98.7 |
| Housing | Homeless Shelters | | 87.6 | 9.5 | 97.1 |
| Community | Youth Activities, Programs, or Facilities | | 67.6 | 25.6 | 93.2 |
| Education | Behavior Support | | 69.7 | 19.5 | 89.2 |
| Health | Mental Health Providers | | 75.7 | 13.3 | 89 |
| Income | Full-Time Jobs W/Benefits | | 65.1 | 23.3 | 88.4 |
| Food | Quality Food Available | | 44.3 | 43.7 | 88 |
| Education | After School Programs/Care | | 69.6 | 15.2 | 84.8 |
| Health | Dental Providers | 20.9 | 49.3 | 13.3 | 83.5 |
| Transportation | Public Transportation Available | | 55.6 | 26.7 | 82.3 |
| Health | Substance Abuse Treatment | | 72.8 | 6.8 | 79.6 |
| Community | New Businesses | | 65.5 | 12.2 | 77.7 |
| Housing | Affordable Senior Housing Options | | 70.4 | 7.2 | 77.6 |
| Transportation | Agency Provided Medical Transportation Available | | 65.2 | 11.3 | 76.5 |
| Health | Pediatricians | | 65.4 | 2.9 | 68.3 |
| Community | Reliable Internet Access | | 52.5 | 15.4 | 67.9 |
| Education | Trade/Apprenticeship Programs | | 49.5 | 14.9 | 64.4 |
| Health | Medical Providers | 8.3 | 44.2 | 11.3 | 63.8 |
| Health | Sliding Fee Pmt Plans | | 56.3 | 7.5 | 63.8 |
| Community | Support Groups | | 54.3 | 6.3 | 60.6 |
| Education | College/Post-Secondary Opportunities | | 49.6 | 10 | 59.6 |
| Community | Affordable Tax Preparation Options | | 56.6 | 2.3 | 58.9 |
| Education | Academic Support/Tutoring | | 54.5 | 4.3 | 58.8 |
| Community | Resources are conveniently located | | 49.8 | 7.5 | 57.3 |
| Income | Employment Assistance Agencies or Programs | | 52.7 | 3.8 | 56.5 |
| Income | Full-Time Jobs W/O Benefits | | 54.2 | 1.4 | 55.6 |
| Health | Eye Doctors | 9.8 | 38 | 2.9 | 50.7 |
| Food | Food Pantries | | 25.6 | 23.8 | 49.4 |
| Health | Nearby Medical Care (<30min) | | 40.1 | 7.9 | 48 |
| Education | Alternative Education Programs | | 44.4 | 2.7 | 47.1 |
| Community | Veteran Services | | 41.4 | 2.9 | 44.3 |
| Community | Water & Sewer Services | | 37.4 | 2.7 | 40.1 |
| Income | Part-Time Jobs | | 36.6 | 2.7 | 39.3 |
| Education | Preschool Accessibility | | 33.3 | 5.4 | 38.7 |
| Education | Quality K-12 Education | | 28.8 | 7.5 | **36.3** |
| Community | Parks & Recreation Activities | | 26.7 | 4.5 | **31.2** |
| Community | Public Services (Police, Fire, EMS) | | 17.3 | 2.9 | **20.2** |
| Community | Safety of neighborhoods | | 13.2 | 2 | **15.2** |
| Community | Religion & Cultural Organizations | | 10.7 | 0.5 | **11.2** |