



# **Community Assessment Report FY 2024-2026**



**South Middlesex Opportunity Council**

## Table of Contents

Table of Contents .....	2
1. Executive Summary .....	3
2. Agency Description .....	5
3. Community Profile .....	6
4. Community Assessment Process .....	41
5. Key Findings: Community Assessment .....	44
6. Key Findings: Internal Needs Assessment .....	81
7. Formal Board Acceptance .....	99
8. References .....	100
Appendix 1: Community Needs and Customer Satisfaction Survey .....	101
Appendix 2: Community Organizations Survey .....	109
Appendix 3: Focus Group Questions .....	113
Appendix 4: Key Stakeholder Interview Guide .....	116
Appendix 5: Board Survey and Self-Assessment .....	117
Appendix 6: Staff Survey .....	122
Appendix 7: Volunteer Survey .....	128
Appendix 8: Respondents to Community Organizations Survey by Sector .....	131

## 1. Executive Summary

Founded in 1965 in Framingham, Massachusetts, South Middlesex Opportunity Council (SMOC) is a nonprofit corporation with a 501 (C)(3) federal tax designation, a federally designated Community Action Agency (CAA) for the MetroWest region, and a certified Ch.40H statewide Community Development Corporation (CDC).

SMOC “will improve equity, wellness and quality of life for diverse individuals and families by providing advocacy, education, and a wide range of services; building a community of support and inclusion; and creating awareness to combat poverty through partnerships and coalitions with other organizations.” Our new tagline is “Compassion. Equity. Community.”

As a Community Action Agency, we are required to conduct a comprehensive community and internal needs assessment every three years. The assessment provides information about the causes and conditions of poverty within the communities we serve as well as our capacity to provide appropriate services and programs. This information is used to develop a comprehensive strategic plan that is community focused, targeted, and responsive to community member identified current needs.

A 20-member Planning Committee comprised of members of the Board, Executive Team, Senior Management, and Planning and Compliance staff was created and charged with steering, overseeing, and coordinating the Community Assessment Report and Strategic Planning (CARSP) process. The Planning Guide developed by the Department of Housing & Community Development (DHCD) provided the framework that we followed.

For the community needs assessment, we conducted the following surveys, focus groups and key stakeholder interviews – Community Needs and Customer Satisfaction Survey; Community Organizations Survey; focus groups at five SMOC programs; and key stakeholder interviews with leaders from four area community organizations. For the internal needs assessment, we conducted three surveys – Staff, Board and Volunteer.

Key Individual/Family/Community Level Needs as identified by survey respondents:

- Affordable housing
- Childcare
- Jobs
- Ability to pay heating and utility bills
- Training or education to get a job or better job
- Transportation
- Access to food

- Mental health services

Summary of Key Internal Needs:

- Staff Hiring, Retention, Training and Compensation
- Communication at all levels – board, management, staff
- Fundraising, public relations and visibility in the community
- Diversity in board membership
- Long term planning for financial viability
- Volunteer training opportunities

## 2. Agency Description

Founded in 1965 in Framingham, Massachusetts, South Middlesex Opportunity Council (SMOC) is a nonprofit corporation with a 501 (C)(3) federal tax designation, a federally designated Community Action Agency (CAA) for the MetroWest region, and a certified Ch.40H statewide Community Development Corporation (CDC). In 2022, staff participated in a review of our mission statement and tagline which was then presented to our Board of Directors and unanimously approved on April 19, 2022. The new mission statement reads “South Middlesex Opportunity Council will improve equity, wellness and quality of life for diverse individuals and families by providing advocacy, education, and a wide range of services; building a community of support and inclusion; and creating awareness to combat poverty through partnerships and coalitions with other organizations.” Our new tagline is “Compassion. Equity. Community”.

Our core mission is to work with individuals and families from diverse backgrounds to maximize self-sufficiency and economic independence, especially for the most vulnerable in our society, including those with disabilities and those experiencing homelessness/displacement. To achieve our mission, we administer over 60 major programs targeted to low-income individuals and families to assist them in their efforts to become self-sufficient and economically independent. These programs include emergency, program enriched and low-income housing, Head Start and Child Care, Home Energy Assistance Program, HEARTWAP, First-Time Home Buyer, Rental Assistance, Individual and Family Shelter and Housing, HiSET, ESL, Workforce Development, Microloan Fund, WIC Nutrition Services, Behavioral Health, Substance Use Disorder Residential Treatment, and Domestic Violence services.

Our programs are managed and operated by a diverse staff of about 730 dedicated human service workers, volunteers, and college interns. In FY2022, SMOC served about 50,000 residents in more than 200 communities across the Commonwealth. Our projected budget for FY2023 is approximately \$141,000,000. Currently, SMOC has a variety of programs operating in the MetroWest region of the state as well as Springfield, Worcester, and Lowell and surrounding communities.

We own and manage over 1,600 units of housing that provide affordable, safe, and secure homes for individuals and families. Included within this housing portfolio are many different emergency shelters, transitional housing for individuals and families, sober housing units, and permanent affordable housing rentals. Housing programs are integrated with case management and connections to SMOC wraparound services. Services offered in the housing program are designed to assist residents in their efforts to achieve self-sufficiency and economic independence.

### 3. Community Profile

South Middlesex Opportunity Council, Inc. (SMOC) is the federally designated Community Action Agency for ten communities in the MetroWest region of the state, an area approximately 20-30 miles west of Boston. The cities and towns in our CSBG service area include the following - Ashland, Bellingham, Framingham, Holliston, Hopkinton, Marlborough, Natick, Northbridge, Southborough and Wayland. With the exception of Northbridge, all the communities we serve are located in the MetroWest region of Massachusetts. Over the past years, SMOC has become affiliated with several agencies across the state - People in Peril Program in Worcester (2004, now known as the Greater Worcester Housing Connection), Open Pantry Community Services in Springfield (2009) and Lowell Transitional Living Center (2013) – and offers a variety of services and programs in these three communities.

The 495/MetroWest Partnership is a unique public/private collaboration of businesses, municipalities, and other stakeholders which coordinates, educates, and advocates for solutions to regional constraints and limited natural resources. According to their website, “Industry clusters with higher job concentration in the region than the state or nation include IT and Analytics, Biopharmaceuticals, and Medical Devices. The region continues to specialize in IT and Analytics and is over five times more specialized in this field than the nation, with a location quotient of 5.3 (location quotient quantifies how concentrated a particular industry is in a region as compared to the nation; a location quotient above 1.0 means the region has a proportionally higher concentration of employment in that sector)”.

The Department of Housing and Community Development (DHCD) and Massachusetts Association for Community Action (MASSCAP) contracted with MySidewalk, a community data library, to create community profiles for the 23 Community Action Agencies for the FY2024-2026 community needs assessment. Each agency’s dashboard provides data for indicators for the federally designated CSBG service area in the following domains - Demographics; Poverty; Education; Employment; Health, Social and Behavioral Development; Housing; Income, Infrastructure and Asset Development; and Transportation. Most of the data used in the community profiles in this report is pulled from the MySidewalk dashboard for our CSBG service area. A link to the full dashboard has been provided in the References section of this report. The dashboard can also be accessed on our agency website.

#### **Population Characteristics**

Framingham and Marlborough are the only two cities within our CSBG service area, although the other communities we serve are also cities, namely Lowell, Springfield, Waltham (where we have a WIC office) and Worcester. The rest of the communities are suburban towns, with Northbridge being more rural in character. With the exception of Bellingham and Northbridge, all the communities we serve experienced an increase in population, the majority at a higher rate than the state average. This is comparable to our 2021-2023 community needs assessment with the exception of the decline in population seen in this cycle in Bellingham and Northbridge.

## Population in SMOC CSBG Service Area and Select Cities

City/Town	2018 Population	2021 Population	Percentage Change 2018-2021
Ashland	17,576	18,646	6.1
Bellingham	17,016	16,934	-0.5
Framingham	71,649	72,089	0.6
Holliston	14,634	14,891	1.8
Hopkinton	17,178	18,501	7.7
Lowell	111,249	114,804	3.2
Marlborough	39,776	41,505	4.3
Natick	36,083	36,627	1.5
Northbridge	16,552	16,291	-1.6
Southborough	10,074	10,380	3.0
Springfield	154,596	155,770	0.8
Waltham	62,979	64,655	2.7
Wayland	13,720	13,859	1.0
Worcester	185,195	203,867	10.1
Total	705,268	800,840	4.0
Massachusetts	6,830,193	6,991,852	2.4

Sources: US Census Bureau ACS 5-Year Estimates, 2018 and 2021



### Total Population

**259,722**

People  
SMOC

**1,623,411**

People  
Middlesex County, MA

**6,991,852**

People  
Massachusetts

### Black, Indigenous and People of Color Population

**76,025**

People  
SMOC

**496,717**

People  
Middlesex County, MA

**2,120,178**

People  
Massachusetts

Sources: US Census Bureau ACS 5-year 2017-2021

The population in our CSBG service area is predominantly female, as was the case in our last community needs assessment. Framingham, Holliston, Lowell, Waltham, Wayland and Worcester are almost evenly split in terms of gender. In Hopkinton, almost two thirds of the population are female.

**Percentage Distribution of Population by Gender in SMOC CSBG Service Area and Select Cities**

City/Town	Male	Female
Ashland	48.4	51.6
Bellingham	44.7	55.3
Framingham	50.4	49.6
Holliston	50.0	50.0
Hopkinton	37.8	62.2
Lowell	50.3	49.7
Marlborough	48.7	51.3
Natick	48.3	51.7
Northbridge	48.9	51.1
Southborough	46.9	53.1
Springfield	47.7	52.3
Waltham	49.2	50.8
Wayland	49.2	50.8
Worcester	49.3	50.7

Source: US Census Bureau ACS 5-Year Estimates, 2021

The median age of the residents we serve indicates that they are millennials. In our CSBG service area, residents under 25 years of age in Hopkinton, Southborough and Wayland account for more than one third of the population in each of these communities. Bellingham, Holliston and Wayland have the highest percentage of residents aged 55 years and older.



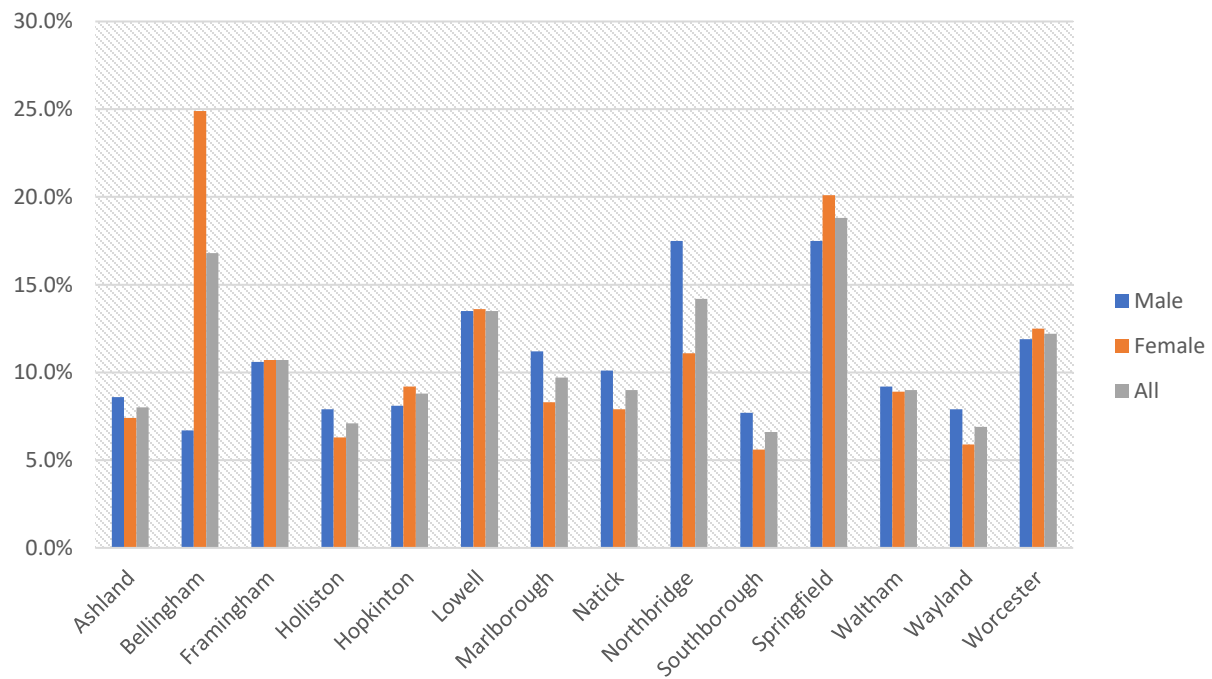
## Percentage Distribution of Population by Age Category in SMOC CSBG Service Area and Select Cities

City/Town	Under 5	5 to 14	15 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 to 74	75 and over	Median Age
Ashland	4.6	12.0	9.0	13.7	17.4	11.9	13.9	11.4	6.0	41.1
Bellingham	3.8	13.8	10.3	9.0	9.8	18.1	11.9	12.8	10.5	38.5
Framingham	6.1	12.8	13.6	13.4	17.7	12.7	10.6	6.9	5.2	36.6
Holliston	4.3	14.4	11.2	8.6	12.2	15.3	17.8	9.9	6.2	44.2
Hopkinton	7.8	9.3	19.6	6.5	8.0	24.9	9.9	6.6	7.4	42.8
Lowell	5.8	12.2	15.9	16.9	13.4	11.6	12.9	7.4	3.8	34.4
Marlborough	6.6	10.5	9.5	16.4	14.5	13.3	15.0	8.6	5.6	39.2
Natick	5.3	12.6	9.4	12.9	13.0	14.9	14.2	10.6	7.2	42.3
Northbridge	6.3	12.2	10.6	12.7	12.6	16.9	13.1	10.1	5.5	41.6
Southborough	6.5	15.7	11.0	8.7	12.8	18.9	13.1	7.6	6.0	42.5
Springfield	6.5	14.2	16.7	14.6	12.2	11.4	11.8	7.6	5.0	33.5
Wayland	6.4	14.2	12.3	7.2	12.5	13.6	16.6	9.1	8.0	43.1
Waltham	5.0	7.0	22.3	18.0	12.2	9.9	11.1	8.5	6.0	33.8
Worcester	5.3	10.9	18.6	16.2	12.5	11.5	12.2	7.6	5.4	34.4

Source: US Census Bureau ACS 5-Year Estimates, 2021

According to CDC data for 2010-2015, people living in SMOC-CSBG service area have a life expectancy of 81.9 years. This is comparable to the state life expectancy of 80.6 years. Male residents account for the highest percentage of the civilian noninstitutionalized population living with a disability in most of the communities we serve. There are a few exceptions, notably Bellingham and Springfield, where the majority is female.

## Civilian Noninstitutionalized Population With A Disability in SMOC Service Area & Select Cities



Source: US Census Bureau ACS 5-Year Estimates, 2021

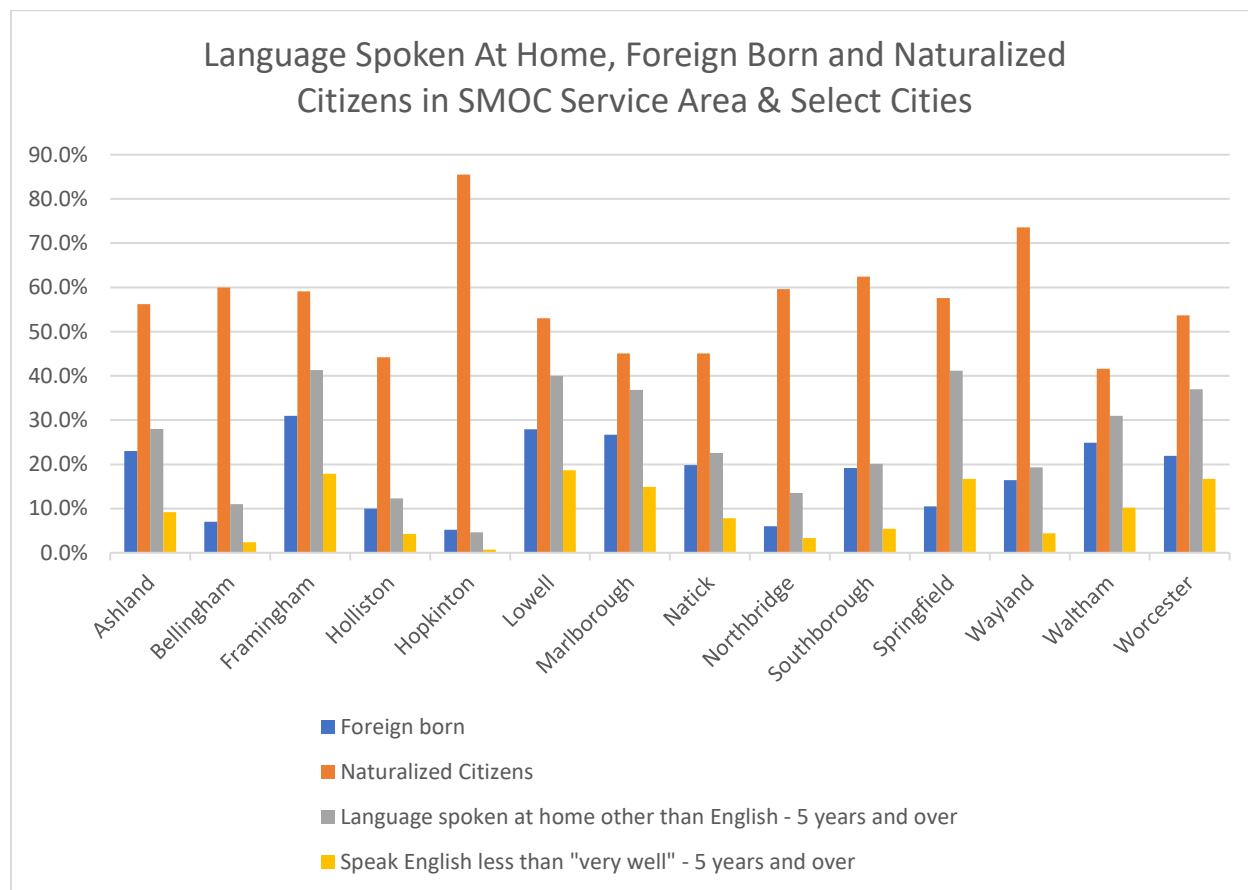
Most of the residents in SMOC-CSBG service area identify as white. Black or African American people account for one fifth of the population in Springfield. In Lowell, slightly more than one in five identify as Asian, which is not surprising given the high percentage of residents from Vietnam and other Southeast Asian countries. The population within our CSBG service area is diverse in terms of ethnicity with people of Hispanic or Latino heritage accounting for a significant proportion of the total residents in Framingham, Marlborough and Northborough. These communities have long attracted people from Puerto Ric, Brazil and other South American countries. In Springfield, close to half of the residents identify as Hispanic or Latino.

#### Percentage Distribution of Population by Race and Ethnicity in SMOC CSBG Service Area and Select Cities

City/Town	White	Black or African American	American Indian and Alaska Native	Asian	Native Hawaiian and Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino (of any Race)
Ashland	75.8	4.8	0.4	12.0	0	3.2	3.8	8.2
Bellingham	93.6	0.3	0	0.6	0	3.2	2.3	4.2
Framingham	63.5	6.5	0.2	8.8	0	13.5	7.4	16.7
Holliston	88.2	1.2	0	6.7	0	0.8	3.1	3.1
Hopkinton	94.1	0.3	0	1.7	0	0.5	3.3	4.5
Lowell	58.2	9.0	0.5	22.2	0.2	4.5	5.4	17.6
Marlborough	68.7	3.4	0.1	5.2	0.2	14.1	8.2	16.2
Natick	79.2	2.1	0.2	14.1	0	0.9	3.6	4.0
Northbridge	88.4	1.6	0.1	0.2	0.1	3.7	5.9	11.1
Southborough	79.6	0.7	0	16.4	0	2.4	1.0	2.5
Springfield	52.9	20.8	0.5	2.8	0	10.1	13.0	47.5
Wayland	80.8	0.9	0	13.6	0	0.3	4.3	5.0
Waltham	68.6	6.8	0.6	12.2	0.1	6.2	5.5	14.5
Worcester	64.7	12.7	0.5	6.8	0.1	5.5	9.8	23.9

Source: US Census Bureau ACS 5-Year Estimates, 2021

It is evident from the table below that most foreign-born residents within our service area want to make the United States of America their permanent home. A significant proportion of them have taken the necessary action to become naturalized citizens. Notwithstanding that, they continue to speak their native language at home, most notably in Ashland, Framingham, Marlborough and Natick. There is potential to benefit from ESL classes given the percentage of residents identified as speaking English less than “very well”.

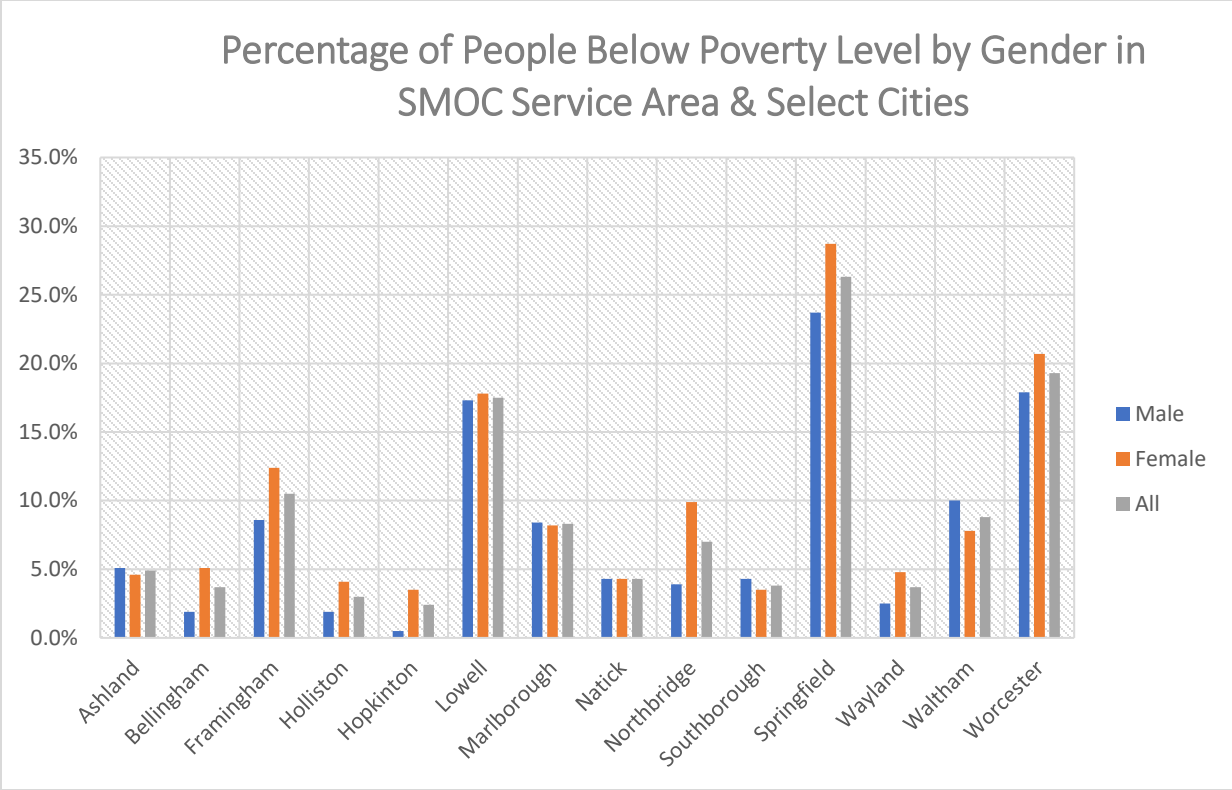


Source: US Census Bureau ACS 5-Year Estimates, 2021

**Immigrants****55,999**People  
SMOC**355,581**People  
Middlesex County, MA**1,209,717**People  
Massachusetts**Immigrants****21.6%**of People  
SMOC**21.9%**of People  
Middlesex County, MA**17.3%**of People  
Massachusetts**Native Citizens****203,722**People  
SMOC**1,267,830**People  
Middlesex County, MA**5,782,135**People  
Massachusetts**Native Citizens****78%**of People  
SMOC**78%**of People  
Middlesex County, MA**83%**of People  
Massachusetts*Sources: US Census Bureau ACS 5-year 2017-2021***Poverty Profile and Low-Income Population**

Although the percentage of people living in poverty in our CSBG service area is below the state average, this picture masks disparities within the ten communities. Framingham (10.5%), Marlborough (8.3%) and Northbridge (7.0%) have the highest prevalence of poverty in our service area compared to Southborough (3.8%), Wayland (3.6%) and Hopkinton (2.4%). This is comparable to the last needs assessment we conducted in 2019. Our non-CAP communities of Springfield, Worcester and Lowell recorded the highest percentage of people living in poverty.

Unfortunately, poverty in our service area continues to have a female face, especially in Framingham and Northbridge. The only exceptions are Ashland, Marlborough (slightly) and Southborough. Interestingly, Natick has the same percentage of males and females below the poverty line.



Source: US Census Bureau ACS 5-Year Estimates, 2021

**People Below Poverty Level**  
**17,060**  
People  
SMOC

---

**116,510**  
People  
Middlesex County, MA

---

**668,780**  
People  
Massachusetts

**People Below Poverty Level**  
**6.6%**  
of People  
SMOC

---

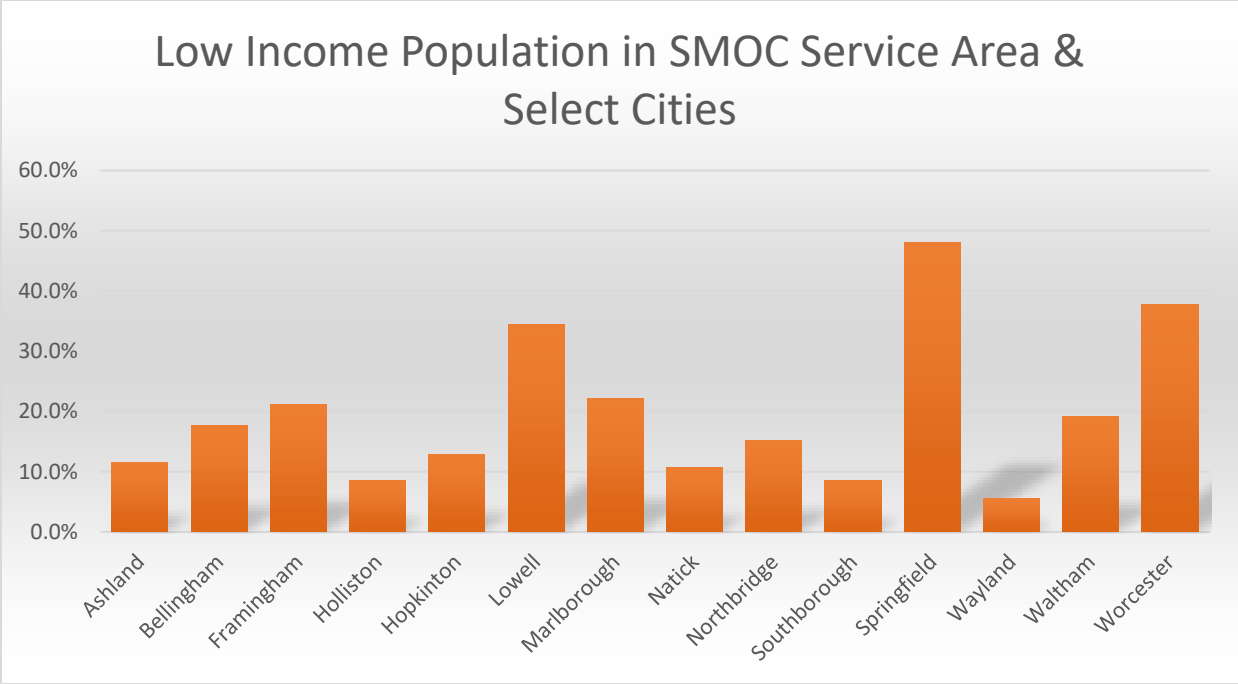
**7.2%**  
of People  
Middlesex County, MA

---

**9.6%**  
of People  
Massachusetts

Sources: US Census Bureau ACS 5-year 2017-2021

The U.S. Census identifies individuals with a household income of up to 200% of the federal poverty level as low-income. Within our CSBG service area, it is not surprising to see that the communities with the highest rate of poverty also have the highest percentage of low-income residents, namely Marlborough, Framingham, and Bellingham. The wealthier communities of Holliston, Southborough, and Wayland have lower rates of low-income households.



Source: US Census Bureau ACS 5-Year Estimates, 2021

Childhood poverty continues to be a major issue in the communities we serve. This is in spite of the implementation, and expansion, of targeted social safety net programs including the Child Tax Credit and Earned Income Tax Credit. With the exception of Ashland, Hopkinton, Northbridge, and Southborough, all of the cities and towns experienced an increase in the proportion of children under 5 years living in poverty. The incidence of poverty among residents aged 65 years and over has also been trending upwards since our last community needs assessment. Some of this may be attributed to the effects of the COVID-19 pandemic, rising costs and inflation.

**Percentage Distribution of Population Below Federal Poverty Level by Age Category in SMOC CSBG Service Area and Select Cities**

City/Town	Under 5 years	5 to 17 years	18 to 34 years	35 to 64 years	65 years and over
Ashland	0	6.1	5.3	4.7	5.0
Bellingham	18.6	0	3.7	3.8	3.4
Framingham	18.9	14.5	9.1	8.6	10.1
Holliston	2.2	2.8	4.6	1.2	7.3
Hopkinton	0	1.2	0.9	1.2	10.8
Lowell	24.9	23.4	17.6	14.9	14.7
Marlborough	7.6	12.0	10.6	6.4	7.3
Natick	7.0	3.2	4.6	3.6	5.8
Northbridge	10.7	10.3	6.5	5.6	6.5
Southborough	0	2.4	4.9	3.5	7.7
Springfield	34.5	37.9	25.4	21.4	21.0
Wayland	2.9	2.8	9.2	2.5	3.2
Waltham	10.3	8.2	12.0	5.6	10.3
Worcester	27.8	24.9	21.9	15.3	16.6

Source: US Census Bureau ACS 5-Year Estimates, 2021

Not surprisingly, households headed by single females with children under the age of 18 have the highest incidence of poverty across our CSBG service area, as well as in Lowell, Springfield, and Worcester. Even where children are not present, single female headed households are more likely to be in poverty compared to other types of households. This is consistent with the fact that women continue to bear the brunt of gender pay disparities, where they earn less than their male counterparts for comparable work. This structural problem must be addressed to lift women out of poverty and break the syndrome of generational poverty.

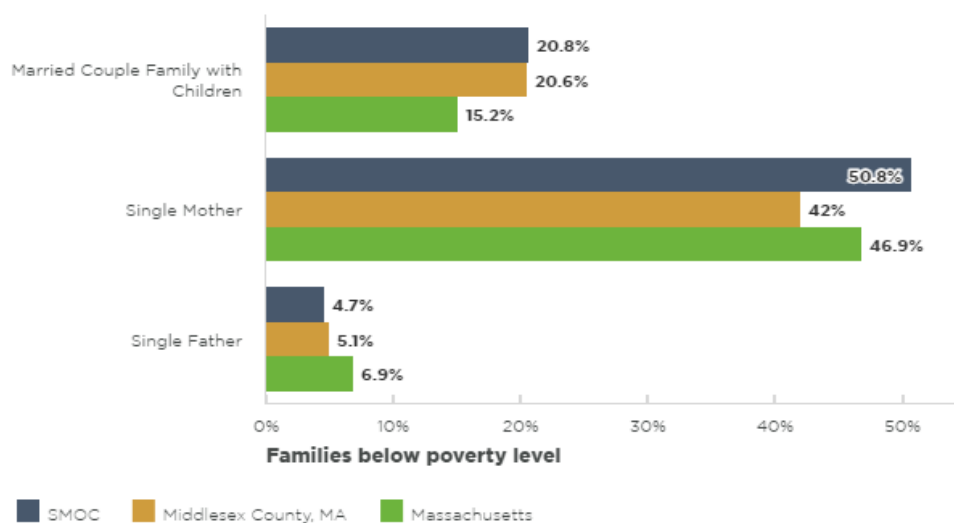


**Percentage Distribution of Population Below Federal Poverty Level by Household Type in SMOC  
CSBG Service Area and Select Cities**

City/Town	All Families	Married Couple Families	Female householder, no spouse present	All Families with children under 18	Married Couple Families with children under 18	Female householder, no spouse present with children under 18
Ashland	3.5	0.8	26.4	3.3	0	30.2
Bellingham	2.7	0	9.6	3.7	0	13.7
Framingham	7.6	3.9	24.9	13.2	5.8	35.3
Holliston	2.2	1.4	8.9	2.8	0.9	23.8
Hopkinton	0	0	0	0	0	0
Lowell	12.5	5.4	24.6	18.9	9.6	31.9
Marlborough	5.5	1.5	21.5	11.6	2.8	42.6
Natick	3.3	2.1	8.3	4.1	2.9	13.4
Northbridge	6.8	1.2	36.1	12.5	0.3	55.7
Southborough	3.9	3.7	10.1	4.5	3.8	17.6
Springfield	20.1	8.2	35.4	28.6	13.1	41.9
Wayland	3.8	1.8	24.4	3.9	1.1	30.9
Waltham	4.6	3.8	7.4	6.1	4.8	15.9
Worcester	14.5	7.7	26.5	20.3	8.3	35.7

Source: US Census Bureau ACS 5-Year Estimates, 2021

**Below Poverty Level by Family Type with Children**



Sources: US Census Bureau ACS 5-year 2017-2021

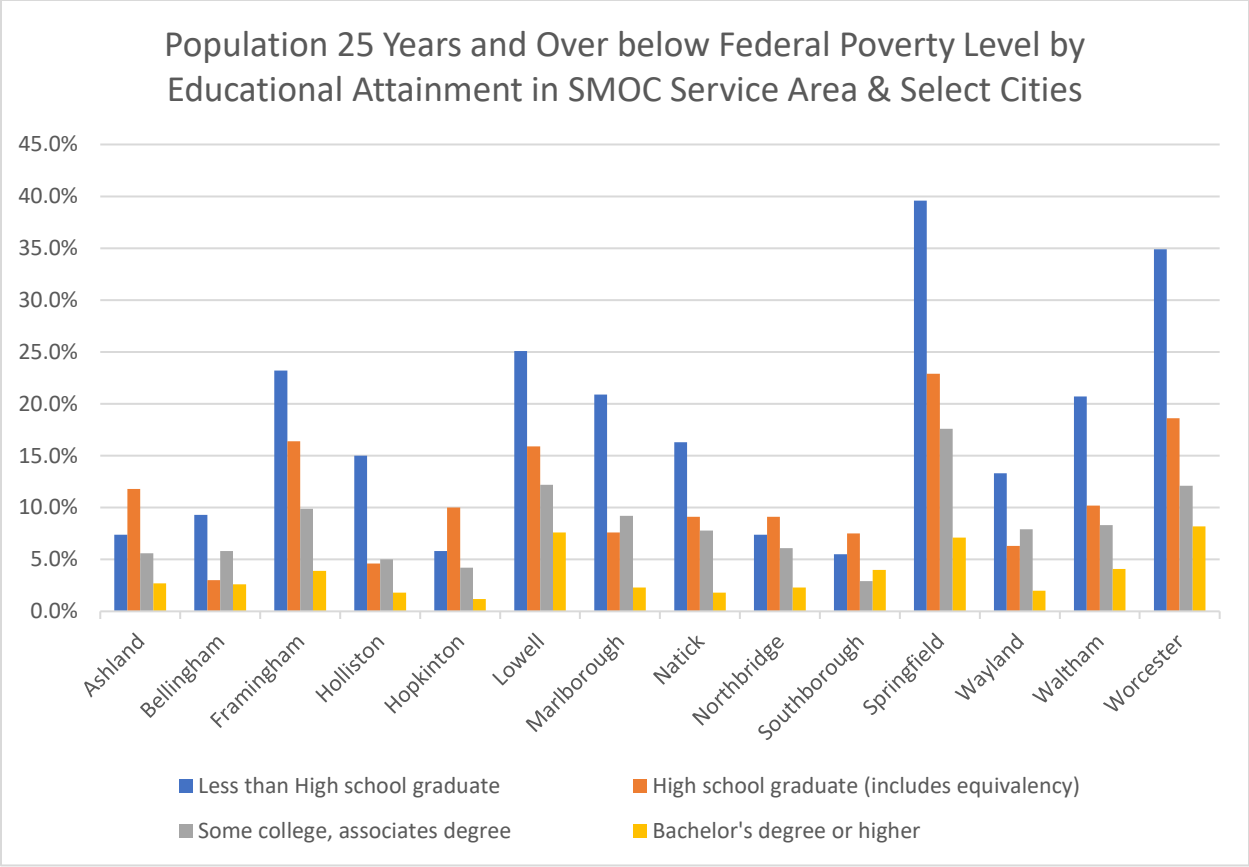
Black, Indigenous, Peoples of Color (BIPOC) populations continue to be disproportionately represented in the populations living in poverty in most of the communities we serve. Systemic racism and discrimination consistently impact the economic and social progress primarily serving residents who identify as American Indian, Alaskan Native, and Black or African American. In the big cities of Lowell, Springfield, and Worcester, the percentage of poor white residents is much higher than in the other communities.

### Percentage Distribution of Population Below Federal Poverty Level by Race and Ethnicity in SMOC CSBG Service Area and Select Cities

City/Town	White	Black or African American	American Indian and Alaska Native	Asian	Native Hawaiian and Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino (of any Race)
Ashland	6.1	3.4	0	0.6	-	0.7	0	8.8
Bellingham	3.6	100	-	0	-	0	0	20.2
Framingham	7.4	18.2	84.0	6.1	0	14.3	26.1	22.2
Holliston	3.2	0	-	0.9	-	0	5.0	1.9
Hopkinton	1.9	77.8	-	18.0	-	0	3.4	3.8
Lowell	18.7	13.8	20.8	13.6	0.5	25.0	21.0	31.7
Marlborough	6.9	9.9	0	0.3	100	16.9	7.5	16.9
Natick	3.7	29.5	0	1.6	0	5.6	12.9	13.3
Northbridge	6.6	0.4	0	20.5	0	0.2	17.6	11.7
Southborough	2.9	30.9	-	6.9	-	4.4	10.9	16.4
Springfield	23.9	25.5	17.1	14.9	-	34.8	33.1	36.2
Wayland	3.9	12.2	-	1.6	-	6.4	3.7	2.3
Waltham	6.2	12.5	4.9	17.5	0	15.1	11.9	11.7
Worcester	19.0	15.8	58.4	19.6	19.3	22.9	21.3	26.6

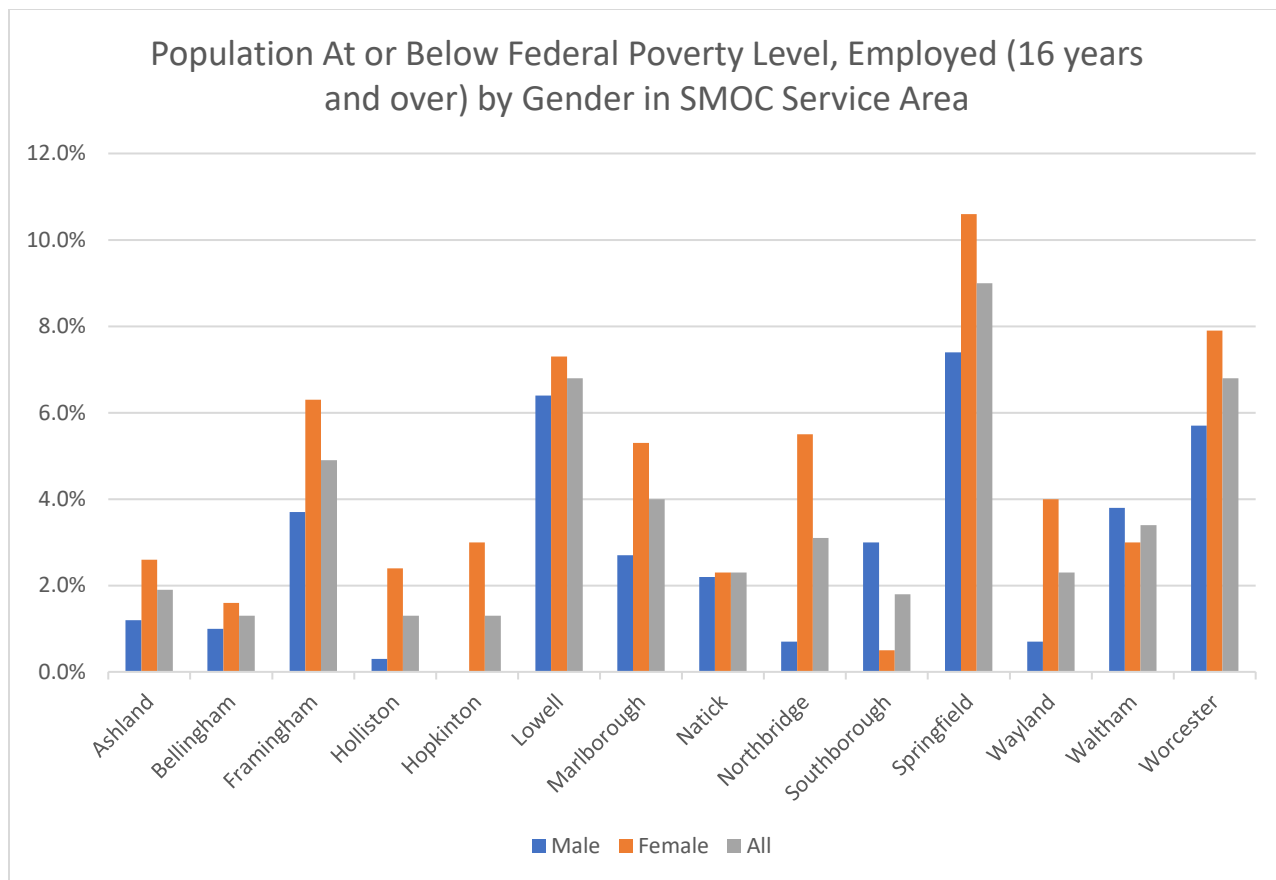
Source: US Census Bureau ACS 5-Year Estimates, 2021

The higher one's educational achievement is, the more likely the person is to be equipped to make a living that will lift them out of poverty. Higher education can also be linked to better physical and mental health, as well as less stress and fewer economic struggles. The rate of poverty is higher, in most communities served, among people who have not graduated high school. Even a high school diploma can significantly reduce the chances of living below the poverty line. It is imperative that attention is paid to reducing dropout rates, especially among BIPOC and disadvantaged and vulnerable populations.



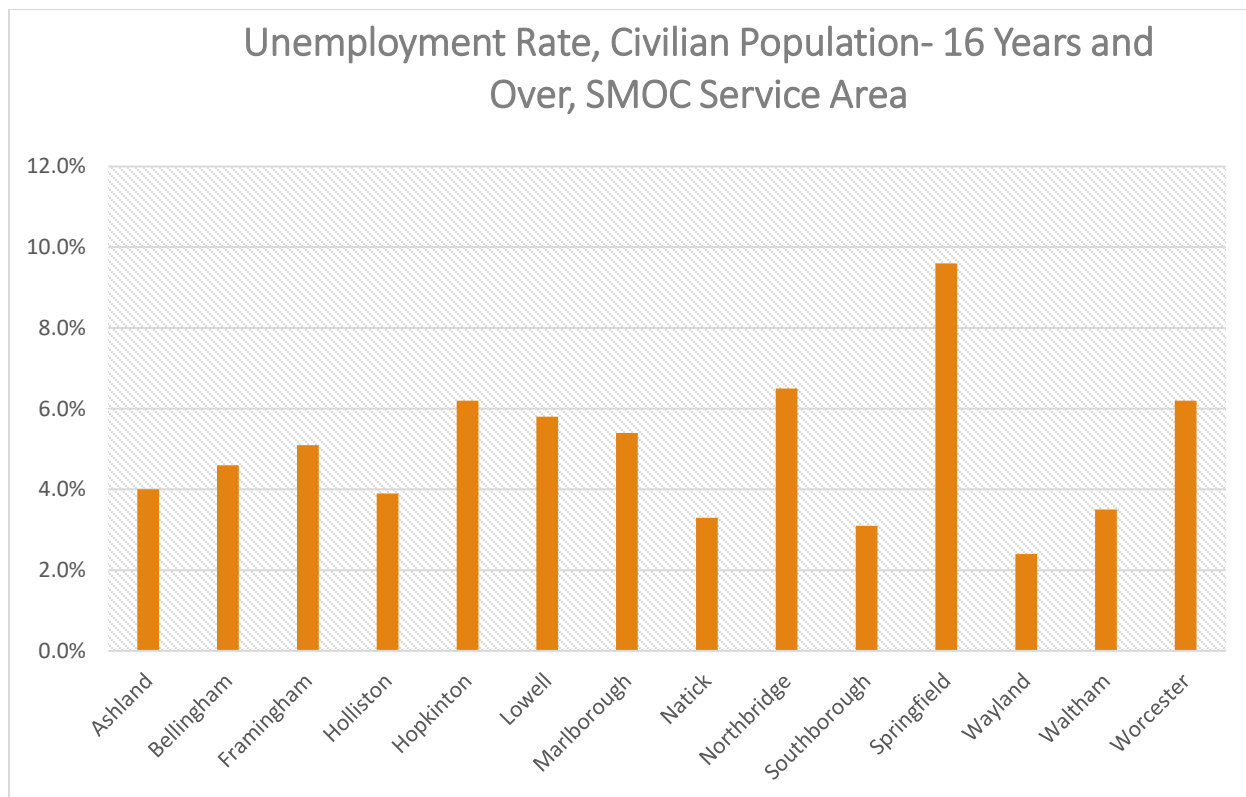
Source: US Census Bureau ACS 5-Year 2017-2021

Being employed is not a guarantee that one will rise out of poverty. Except for Southborough and Waltham, the percentage of women living below the poverty line is higher than their male counterparts in all the communities we serve. This is not surprising given that women continue to work mostly in low-skilled, low-paying jobs and the gender wage gap is still very much in existence. According to 2020 data from the Bureau of Labor Statistics, a woman earned 82 cents for every dollar a man makes. This structural anomaly must be corrected if we are committed to eliminating the pay disparity between men and women.



Source: US Census Bureau ACS 5-Year 2017-2021

According to the American Community Survey 5-Year Estimates (2017-2021), the unemployment rate for the civilian population 16 years and over in Massachusetts was 5.4%. The unemployment rate in our CSBG service area was lower at 4.4%. However, Northbridge, Hopkinton, and Marlborough have rates well above those of the state and service rates. Outside of our service area, Worcester registered the highest rate of unemployment at almost 10%. It is always troubling to see high unemployment as it is an indicator of a recession or depression, both of which reduce a country's GDP and exports. On an individual level, high unemployment adversely impacts earnings, spending, savings and investments.

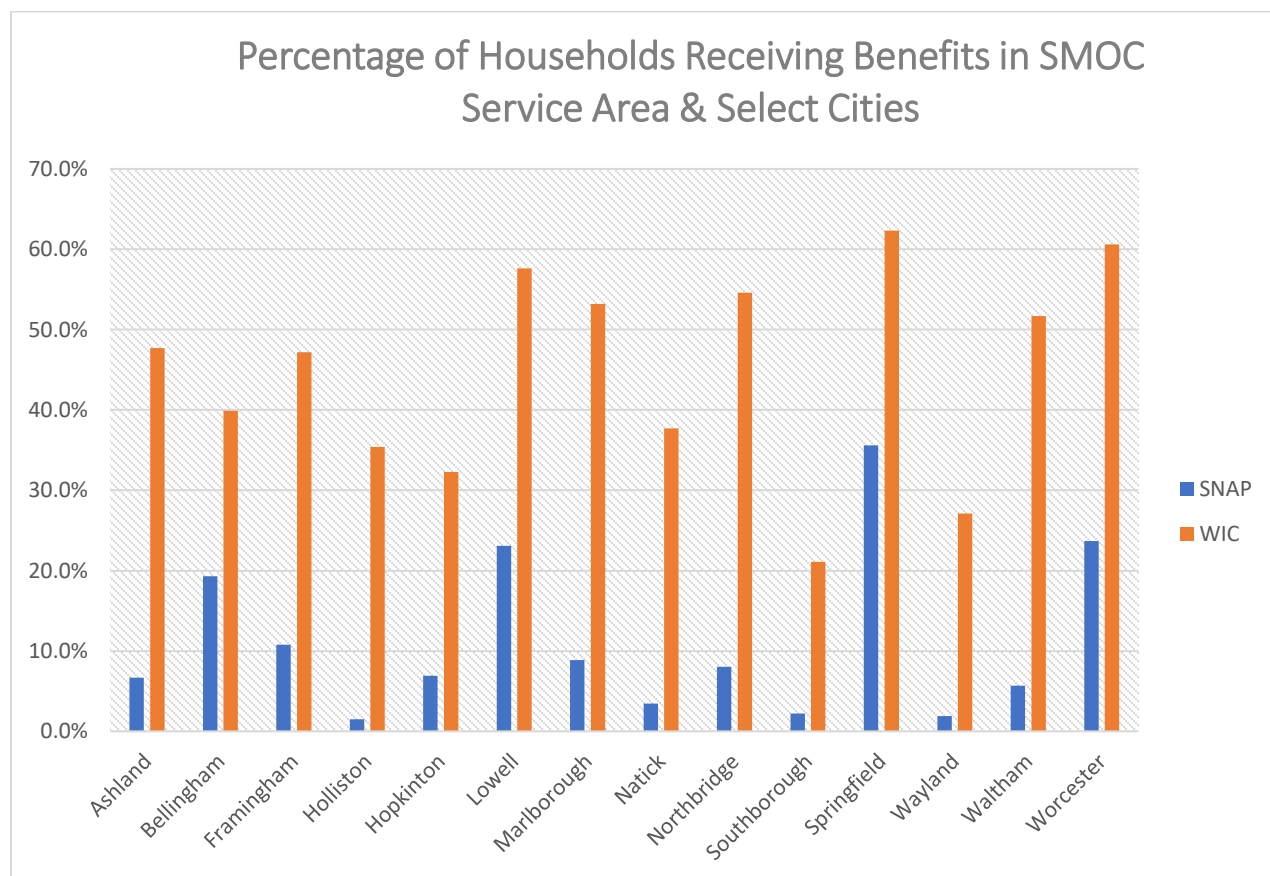


Source: US Census Bureau ACS 5-Year 2017-2021

In February 2023, the federal government ended the extra COVID SNAP benefits, known as SNAP Emergency Allotments. The last payments were made on March 2, 2023. Emergency allotments allowed all SNAP households to receive an additional \$95 in benefits or an additional benefit valued up to the maximum benefit for their household size, whichever value is greater (USDA Food and Nutrition Service). It is estimated that about 16 million households will be affected when the extra benefits end. These payments have been a lifeline for struggling families as rising costs and inflation have had an adverse impact on household budgets and spending. As a result, many families will be on the edge of a hunger cliff and will have to resort to food banks, food pantries, faith-based organizations and other similar organizations to put food on the table. It is encouraging to learn that Massachusetts residents will receive their first state-funded extra Supplemental Nutrition Assistance Program (SNAP) payment on April 7, 2023, following Governor Healey's signing of a supplemental budget that includes \$130 million to create an off-ramp from the extra COVID SNAP benefits ([mass.gov](https://www.mass.gov)).

The Women, Infants and Children (WIC) program is a nutrition program with the goal of keeping pregnant and breastfeeding women, new moms and kids under age 5 healthy. The SMOC WIC program provides a variety of benefits, free of charge, from offices in Framingham and Waltham. These include personalized nutrition consultations and group education with nutrition professionals, healthy food and infant formula, summer Farmers' Market coupons for fresh fruits

and vegetables for eligible individuals, electronic benefits via the WIC Card, WICShopper app, virtual breastfeeding classes and support, Happiest Baby on the Block classes to calm and soothe babies, WICSmart online education, and referrals to medical and other community services. The WIC program is very popular among eligible households in the communities we serve.

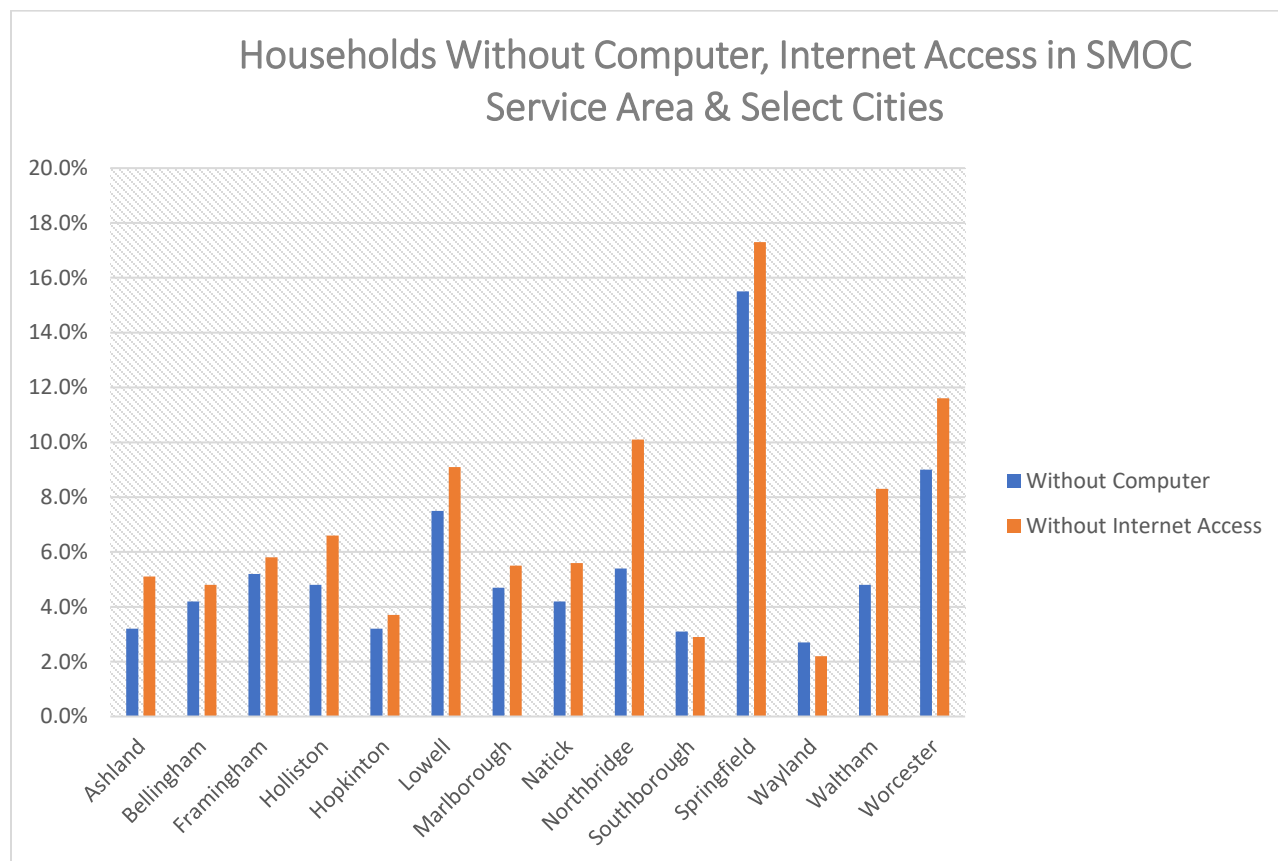


Sources: SNAP Data: US Census Bureau ACS 5-Year Estimates, 2021; WIC Data: 2018 - mass.gov

Access to the digital world is becoming increasingly important as many of the services we rely on are moving onto digital platforms and becoming less human facing. Access to devices such as computers, tablets and smartphones as well as internet connectivity for all communities is crucial if no-one is to be left behind.

Poverty and proximity can affect a community's access to digital connectivity. As evidenced in the chart below, Framingham and Northbridge (the communities with the highest and third highest incidence of poverty in our service area) also registered the highest percentage of communities without computers. In Northbridge, one out of ten households, does not have access to the internet. It is surprising to see that Holliston has the second highest percentage of

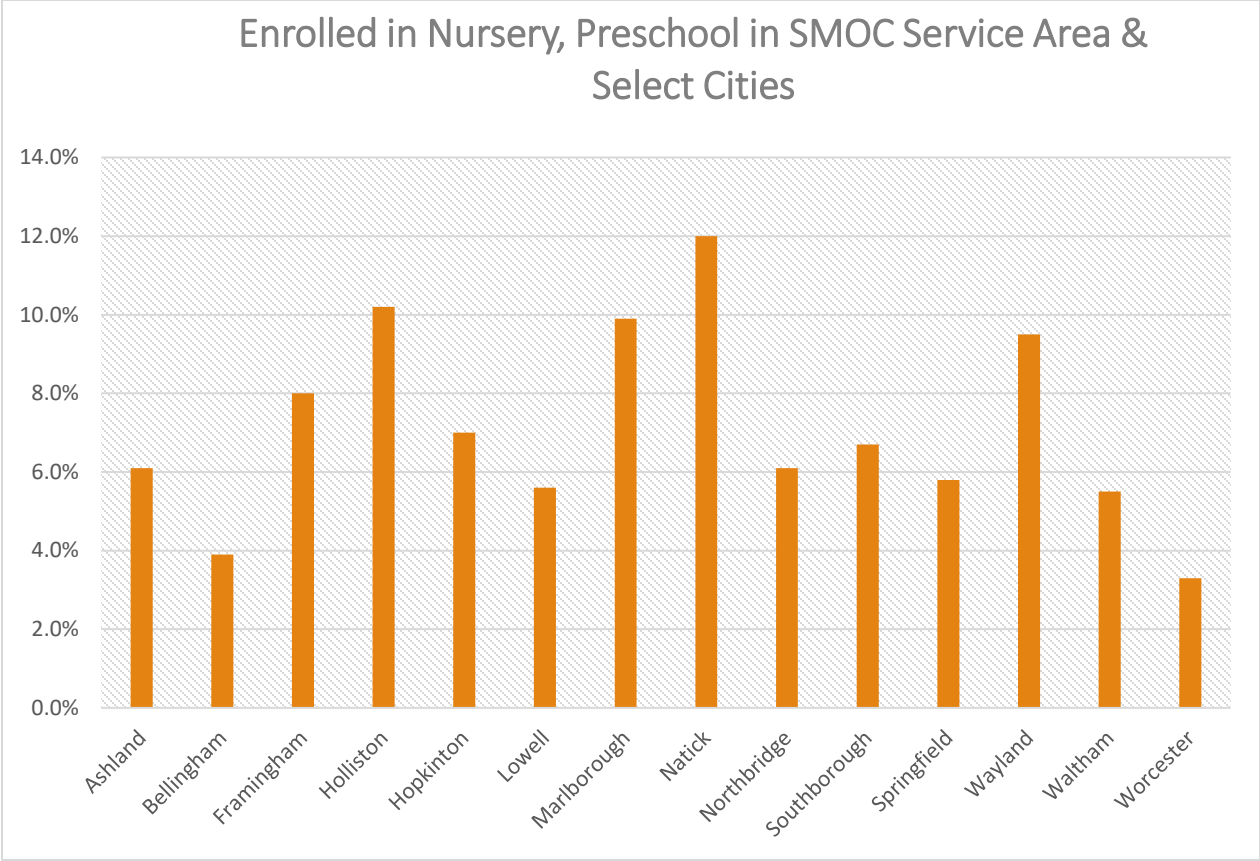
households without internet access, given its proximity to Boston. Springfield has the highest percentage of households without computers and internet access.



Source: US Census Bureau ACS 5-Year Estimates, 2021

## Education

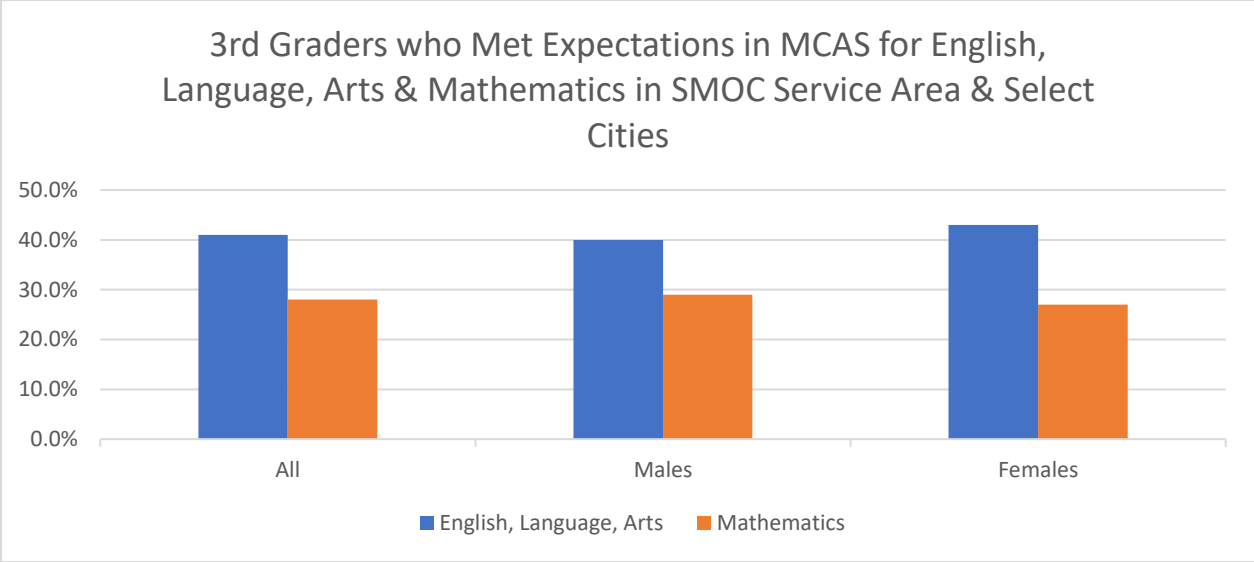
It is well documented that quality early education and care for young children improves physical and cognitive outcomes. It also provides children with a solid foundation upon which to build their future educational experience. SMOC Childcare provides quality, full-day/full-year, center-based and family childcare, early education and care services to infants and children through the 5th grade in Framingham Hudson and Marlborough. SMOC Head Start provides comprehensive early education and support services for children ages three to five and their families in Framingham, Marlboro, Medway, and Northbridge, as well as surrounding towns.



Source: US Census Bureau ACS 5-Year Estimates, 2021

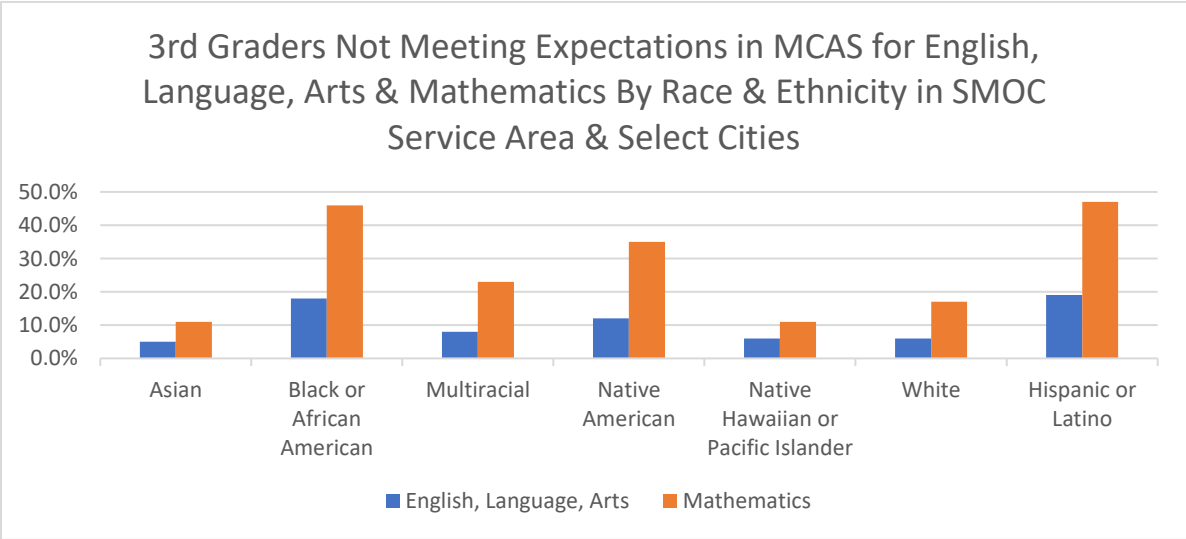
The Massachusetts Comprehensive Assessment System (MCAS) helps teachers, parents, and students know where students are excelling and where they need help. Students meeting basic learning standards in elementary school are less likely to drop out of high school than students who aren't. Low test scores provide an opportunity for school districts to adjust instruction to address those areas. In addition, MCAS informs parents and the public to ensure educators are taking action to remedy the situation. In Massachusetts, 2021 data shows that 41% of 3<sup>rd</sup> graders met expectations in English, Language and Arts. The gender breakdown is similar with females slightly higher (43%) compared to their male counterparts (40%). The percentage of students who met expectations in Mathematics is much lower at 28% overall, similar to the breakdown by gender. The data for the communities we serve, aligns with the state data.





Sources: Massachusetts Department of Elementary and Secondary Education 2021

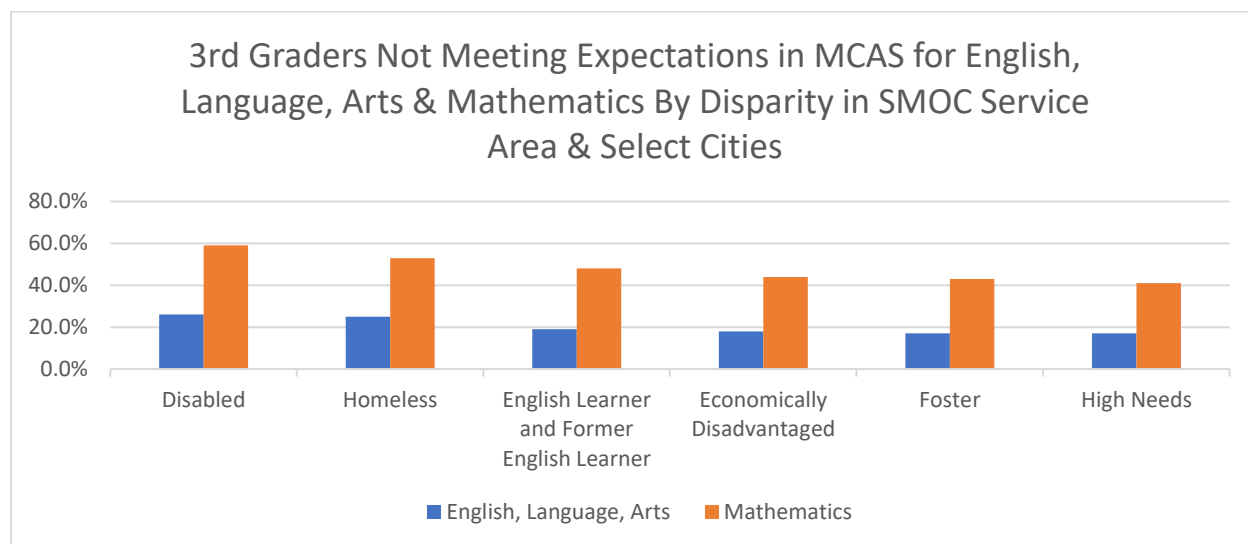
Students who identify as Asian and Native Hawaiian or Pacific Islander had the lowest rates of not meeting expectations. Black or African American and Hispanic or Latino students had the highest rates of not meeting expectations in all subjects. Over one third of Native American students did not meet expectations for mathematics. These disparities have to be investigated and remedied to ensure that BIPOC students are brought up to par with their counterparts.



Sources: Massachusetts Department of Elementary and Secondary Education 2021

Other disparities that can impact performance in MCAS include disability, experience of homelessness/displacement, limited English proficiency, living below the poverty line, and

placement in the foster care system. Students living with a disability, experiencing homelessness/ displacement, and with limited English proficiency registered the highest rates of not meeting expectations in all subjects. Students who live with these challenges must be given extra support and services so they can be successful in their pursuit of education.



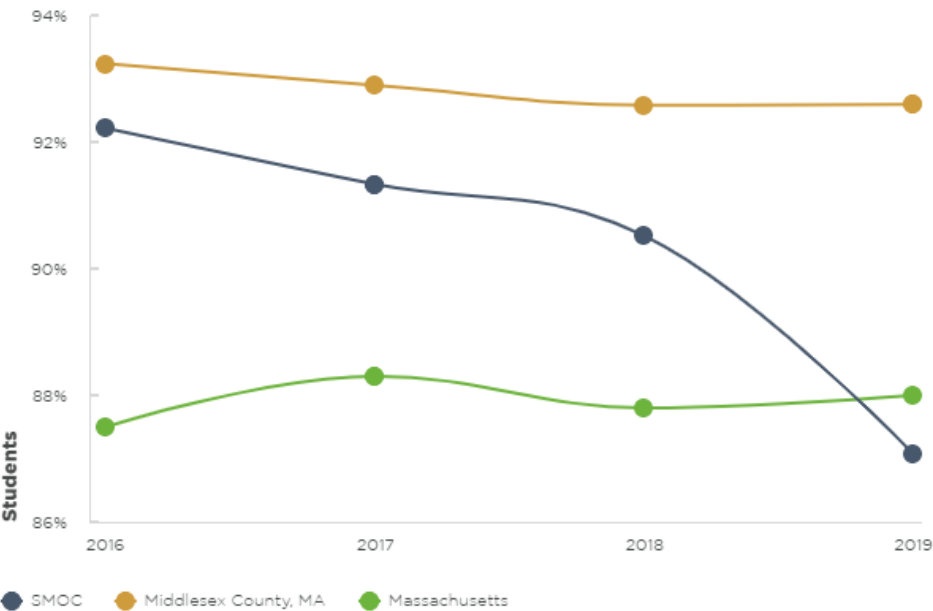
Sources: Massachusetts Department of Elementary and Secondary Education 2021

In general, the public high school graduation rate in the 2018-2019 school year in our service area (87.1%) is comparable to the state (88%) with Middlesex County registering a slightly higher rate (92.6%). However, it is alarming to see the decline in high school graduation rates from 2016 to 2019. This warrants further investigation as it does not augur well for the future of the people we serve. It is vital to identify and address any barriers our youth are facing as they go through the educational system, especially high school, which is the traditional gateway into college and other institutions of higher learning.

Residents of the communities we serve are relatively highly educated. The data shows that they are on par with the state figures when looking at educational attainment. One noticeable exception is the percentage (18.9%) of residents with a high school diploma, which is slightly lower than the state average of 23.2%. It is encouraging to see that a higher proportion of our residents have a bachelor's degree compared to Middlesex County and Massachusetts as a whole. The percentage of residents with a Graduate level degree is also higher in our service area compared to the state. Residents with more education are more likely to have higher paying jobs that provide benefits such as health insurance, paid leave, and retirement. Conversely, people with less education are more likely to work in occupations with few benefits. Low-income residents who are struggling to access basic necessities, such as food and shelter, are unable to

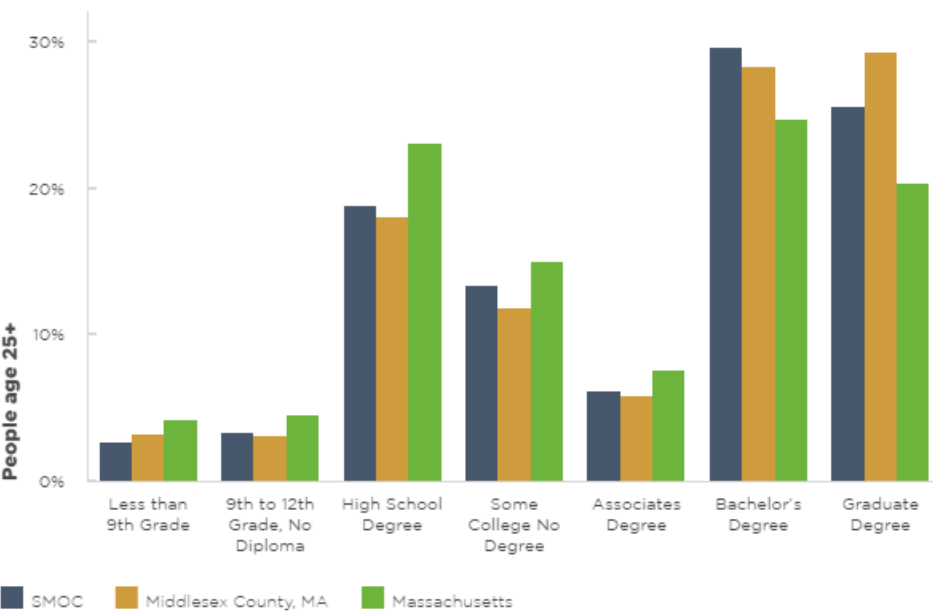
prioritize their education and long-term goals and are often stuck in a generational cycle of poverty.

High School Graduation Rate Over Time



Sources: EDFacts

Educational Attainment



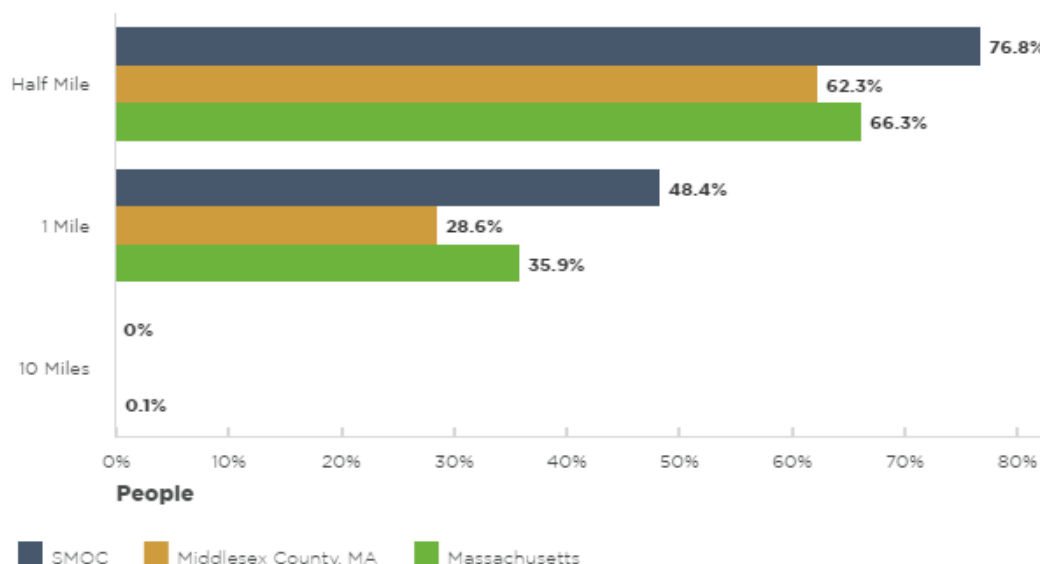
Sources: US Census Bureau ACS 5-year 2017-2021

## Health, Social, and Behavioral Development

According to older adages, “health is wealth” and “prevention is better than cure”. Health goes beyond the treatment of disease and provision of medical care. Social and environmental determinants of health such as income, education, employment, housing, social support, urban design, clean air, and water are also important factors in the determination of population health. Massachusetts instituted universal health insurance coverage in 2006 and is near 100% coverage statewide.

The United States Department of Agriculture (USDA) identifies low access to healthy food as “a significant number of individuals within the geography being far from a supermarket, wholesale club, supercenter, or grocery store.” As a result, their diet tends to lean more towards processed, shelf stable foods and less towards healthy, nutritious alternatives such as fresh fruits and vegetables.

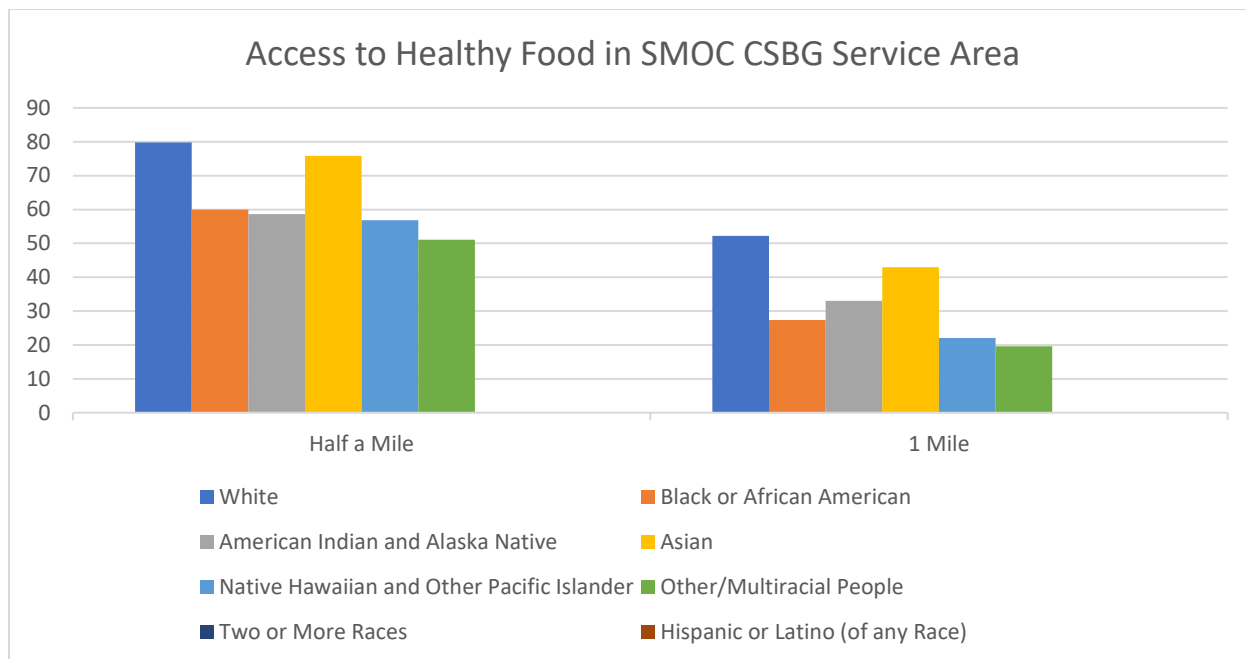
### People with Low Access to Healthy Food



Sources: USDA ERS 2019

*\*This data represents the number of people living a specified distance from a supermarket, wholesale club, supercenter, or grocery store.*

Racial disparities exist in access to healthy food. White residents are more likely to live within half a mile of a supermarket, wholesale club, supercenter, or grocery store where they can access healthy foods. Food deserts are “areas where fresh fruits and vegetables, as well as whole grains, legumes, dairy, or meat, are completely lacking or prohibitively expensive.” (esperanca.org). They disproportionately affect minority and low-income populations. Negative effects of food deserts on communities include obesity, which can also be intergenerational, malnutrition, food allergies or sensitivities. A history of racial segregation has both caused and exacerbated the situation.



Source: USDA ERS 2019

Preliminary data released in December 2022 by the Massachusetts Department of Public Health revealed that opioid-related overdose deaths decreased in the first nine months of 2022 compared to the same time last year. “In the first nine months of 2022, there were 1,696 confirmed and estimated opioid-related overdose deaths, approximately 25 fewer deaths than in the first nine months of 2021, or a 1.5 percent decrease” (mass.gov). This decline occurred despite the presence of illicit fentanyl, a potent synthetic opioid that has been combined with heroin and cocaine and is driving force in opioid-related overdoses and deaths. However, the same data also shows that in 2021, there were 2,301 opioid-related overdose deaths, a 9.4 percent increase over the previous year.

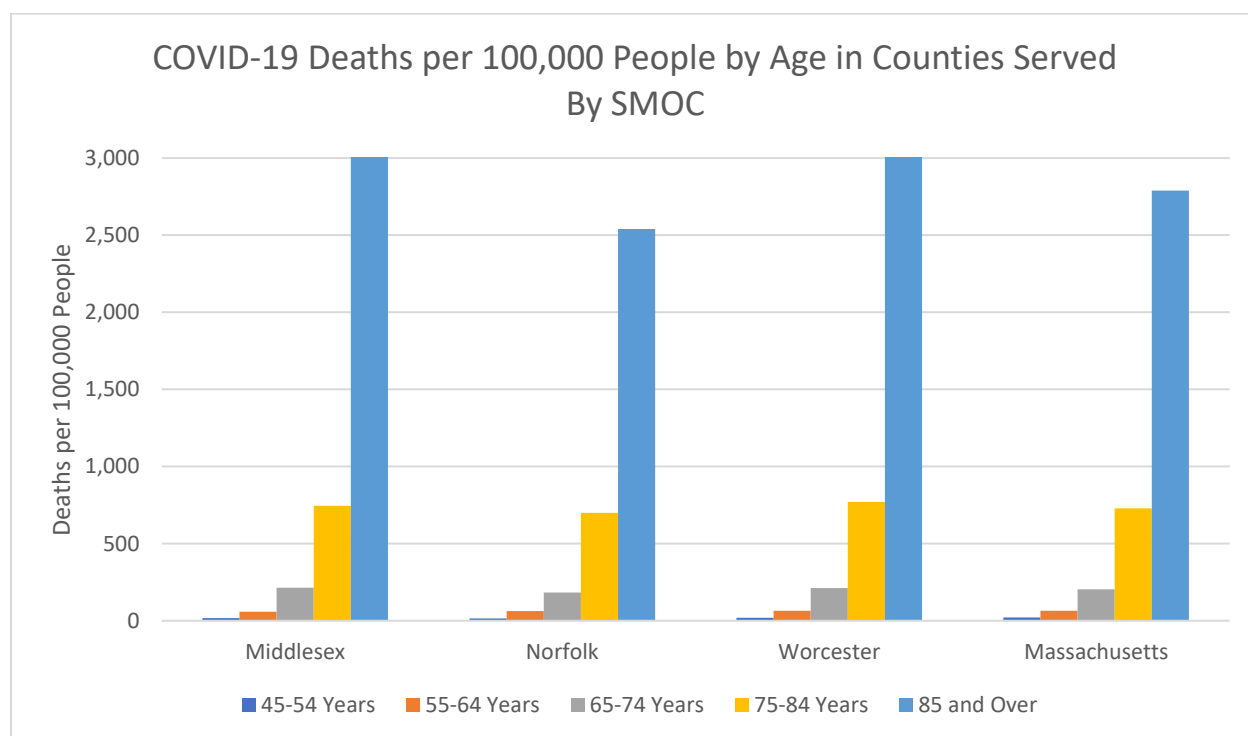
According to 2018 data from AIDSvu (presented by Emory University’s Rollins School of Public Health in partnership with Gilead Sciences, Inc. and the Center for AIDS Research at Emory University (CFAR)), the HIV prevalence rate for Middlesex County, where most of our service area is located, is 282 per 100,000 compared to the state’s rate of 349 per 100,00. HIV prevalence among men is almost double that of women in Middlesex County at 400 compared to 170 per 100,000. At the state level, it is slightly more than two and a half times higher at 513 compared to 197 per 100,000. In Massachusetts as a whole, the number of new HIV diagnoses has been steadily declining since 2008, a clear indication that program interventions are working.

The leading causes of death in 2020 in the US, and Massachusetts, according to the Centers for Disease Control and Prevention (CDC), were heart disease, cancer and COVID-19. Among women, cancer was the number one leading cause of death followed by heart disease and COVID-19.

Heart disease was the leading cause of death for men, with cancer a close second, followed by COVID-19.

A breakdown of the data by race and ethnicity reveals that cancer, heart disease and stroke were the leading causes of death among Asians. Black/African American, Hispanic/Latino, and white individuals had the same leading causes of death, namely, cancer, heart disease and accidents/unintentional injuries. Among Native Americans, it was accidents, heart disease and cancer. It is imperative to investigate the root causes of these disparities in order to develop targeted interventions.

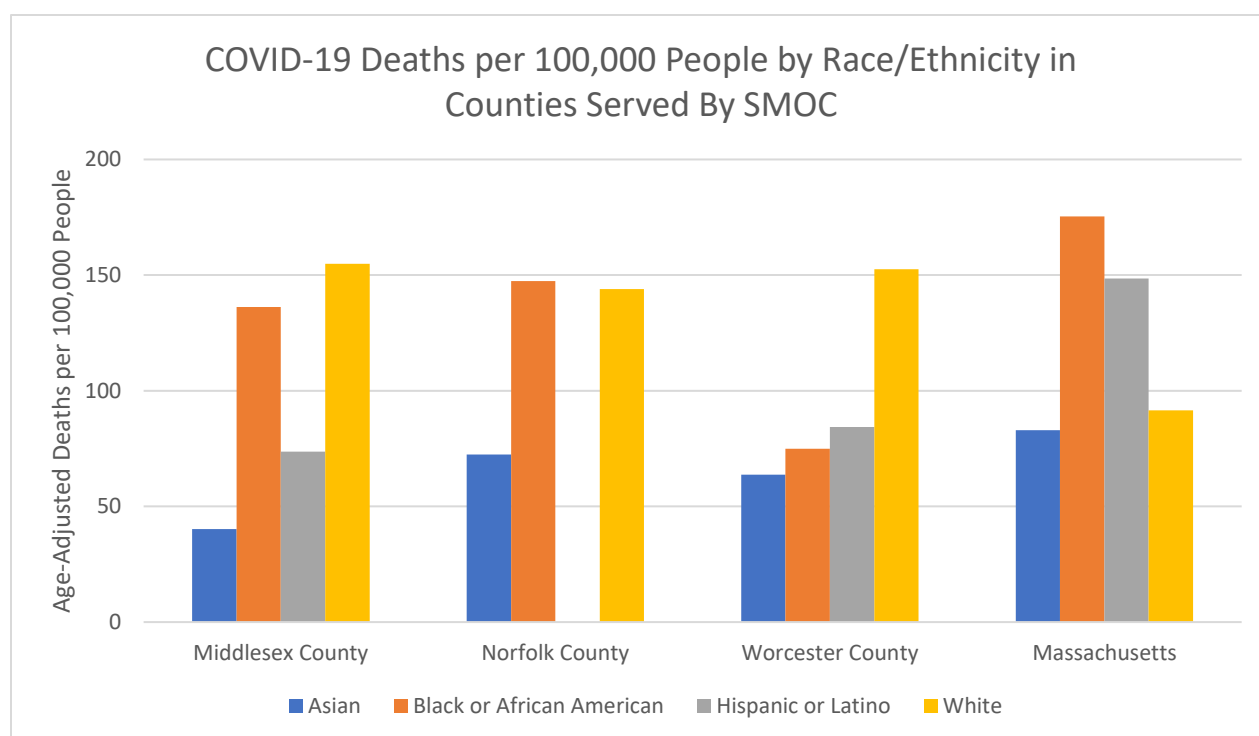
The COVID-19 pandemic continues to negatively impact communities across the globe, although infection and death rates have declined significantly compared to the beginning of the pandemic. Advances in vaccines and treatments have led to a waning in severe illness and deaths. However, preexisting, underlying health conditions can make some people more susceptible to complications from COVID. Some areas of the state were already experiencing a severe burden of poor physical and mental health prior to the pandemic, which has exacerbated health inequities and exposed gaps in access to healthcare. Across all the counties served by SMOC, more residents aged 75 years and over succumbed to the disease, particularly those over 85 years of age.



Source: CDC WONDER Cause of Death 2020

At the state level, Black or African American residents had the highest death rate from COVID-19 among all racial/ethnic groups in 2020, according to the CDC. People of Hispanic or Latino heritage also succumbed to COVID at a much higher rate, compared to their white and Asian counterparts. This is in stark contrast to the three counties we serve where white residents had the highest rate of mortality. According to The COVID Tracking Project, in Massachusetts, through March 7, 2021:

- Hispanic/Latino people were most likely to have contracted COVID-19
- Black/African American people were most likely to have been hospitalized with COVID-19
- White people were most likely to have died from COVID-19

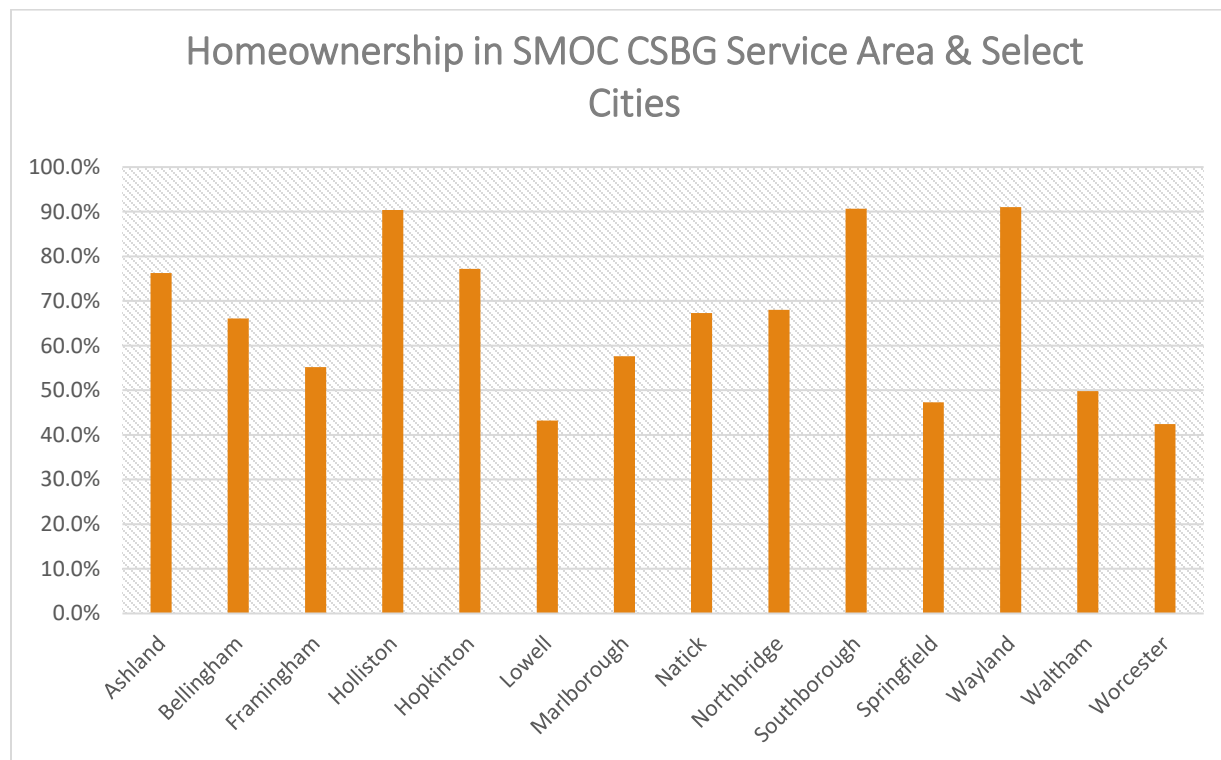


Source: CDC WONDER Cause of Death 2020

## Housing

Data from the American Community Survey, 5-Year Estimates, 2021 reveals that only 4.4% of housing units in our CSBG service area are vacant. Vacant properties are detrimental to communities as they contribute to “reduced property values, increased crime and increased costs for municipal governments” (HUD Office of Policy Development and Research, Evidence Matters, Winter 2014).

Home ownership continues to be the hallmark of success and the ultimate achievement of the “American dream”. Homeownership creates generational wealth and contributes significantly to lifting families out of poverty, if done in an equitable manner. All the towns in our CSBG service area have homeownership rates above 50%. Homeownership is very high, 90%, in the wealthier communities of Holliston, Southborough and Wayland.



Source: US Census Bureau ACS 5-Year Estimates, 2021

Not surprisingly, racial disparities continue to persist in homeownership with BIPOC residents lagging significantly behind in all the communities that we serve. It is well documented that BIPOC individuals have a harder time securing fair and equitable loans to purchase homes. In the 1930s, government maps outlined areas where Black residents lived and were therefore deemed risky investments where property values would decline over time. More commonly known as redlining, this practice led to the effective barring of Black home buyers from qualifying for secure mortgages from many mainstream banks.



**Percentage Distribution of Home Ownership by Race and Ethnicity in SMOC CSBG Service Area and Select Cities**

City/Town	White	Black or African American	American Indian and Alaska Native	Asian	Native Hawaiian and Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino (of any Race)
Ashland	83.7	1.1	0.6	10.5	0	2.3	1.1	4.1
Bellingham	92.0	1.1	0	0	0	4.3	2.6	4.3
Framingham	77.4	2.8	0	10.6	0.2	2.5	3.0	6.0
Holliston	92.4	0.4	0	5.5	0	0.3	0.9	0.9
Hopkinton	96.3	0	0	1.8	0	0	1.8	0
Lowell	66.1	5.1	0.2	18.1	0.1	2.6	3.8	9.2
Marlborough	81.8	0.7	0	5.2	0	4.8	5.7	6.0
Natick	85.4	1.1	0	9.3	0	0.4	2.0	3.0
Northbridge	89.6	0.4	0	0	0	2.6	3.4	9.3
Southborough	83.6	0.3	0	13.5	0	1.1	0.8	1.0
Springfield	53.3	19.0	0.5	2.6	0	5.5	7.3	24.0
Wayland	83.4	0.3	0	11.2	0	0.7	2.3	3.0
Waltham	84.2	2.3	0	8.5	0	0.8	2.4	3.0
Worcester	75.3	6.8	0.3	5.6	0	2.7	4.0	10.4

Source: US Census Bureau ACS 5-Year Estimates, 2021

The Federal Department of Housing and Urban Development (HUD) helps low-income families, older adults, and those living with a disability afford decent, safe, and sanitary housing to live in. This federal program provides funds to public housing agencies that allow them to administer housing choice vouchers. Voucher holders typically pay no more than 30% of their income on rent. The stock of HUD subsidized housing in our service area is minimal in comparison to the more urban communities of Lowell, Springfield and Worcester. Rent burden is a reality for many households in the communities we serve. Close to half of the households in Marlborough, Framingham, and Ashland spend 30% or more of their income on gross rent making it challenging to have enough income to meet other household needs.

## Housing Stock, HUD Subsidized Housing Inventory and Rent Burden in SMOC CSBG Service Area and Select Cities

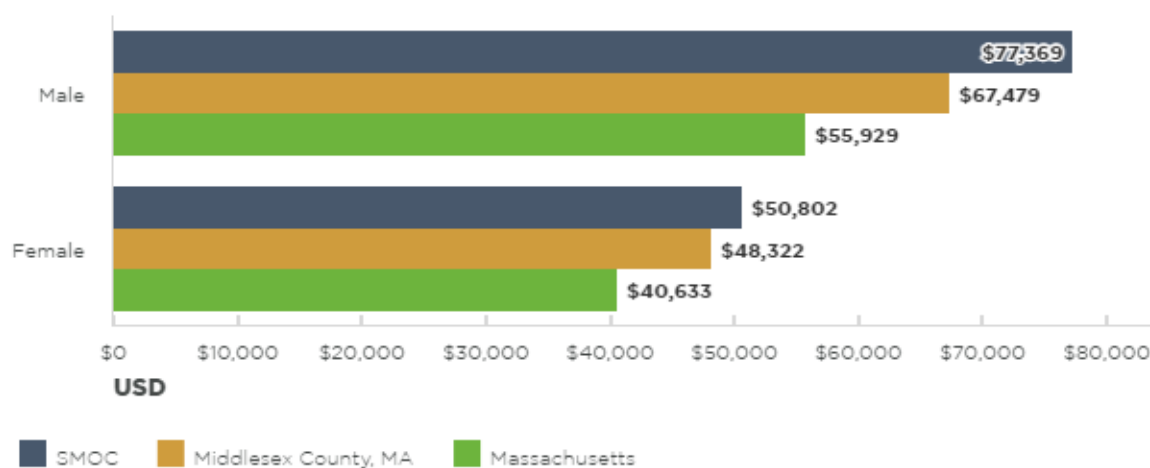
City/Town	Total Housing Units	% HUD Subsidized Housing Inventory	Excessive Renter Housing Costs - Gross Rent 30% or More of Income
Ashland	7,990	3.5	45.9
Bellingham	2,084	2.3	51.8
Framingham	28,992	7.5	47.1
Holliston	5,617	2.0	17.5
Hopkinton	1,303	1.6	63.5
Lowell	44,129	13.2	48.1
Marlborough	18,276	4.7	49.0
Natick	15,767	2.8	39.2
Northbridge	6,674	3.4	41.0
Southborough	3,632	0.1	28.5
Springfield	63,179	19.4	55.3
Wayland	5,039	3.0	35.1
Waltham	26,234	7.3	41.0
Worcester	85,218	13.4	49.6

Sources: US Census Bureau ACS 5-Year Estimates, 2021; DHCD Chapter 40B Subsidized Housing Inventory (SHI)

## Income, Infrastructure and Asset Development

Earnings from wages and salaries are typically the largest source of income for most people. The gender gap in median earnings continues to persist as evidenced by data from the 2021 American Community Survey, 5-Year Estimates, 2017-2021. Median earnings for men outstrip that of women in our CSBG service area, Middlesex County and Massachusetts as a whole.

## Median Earnings by Sex



Sources: US Census Bureau ACS 5-year 2017-2021

Hopkinton, Wayland, and Southborough register the highest median earnings of all the communities in our CSBG service area. At the lower end are Northbridge, Marlborough, and Framingham. Springfield, Worcester and Lowell have the lowest median earnings in all the communities we serve. Median incomes follow the same trend. Overall, our communities surpass the state average in both median earnings and income.

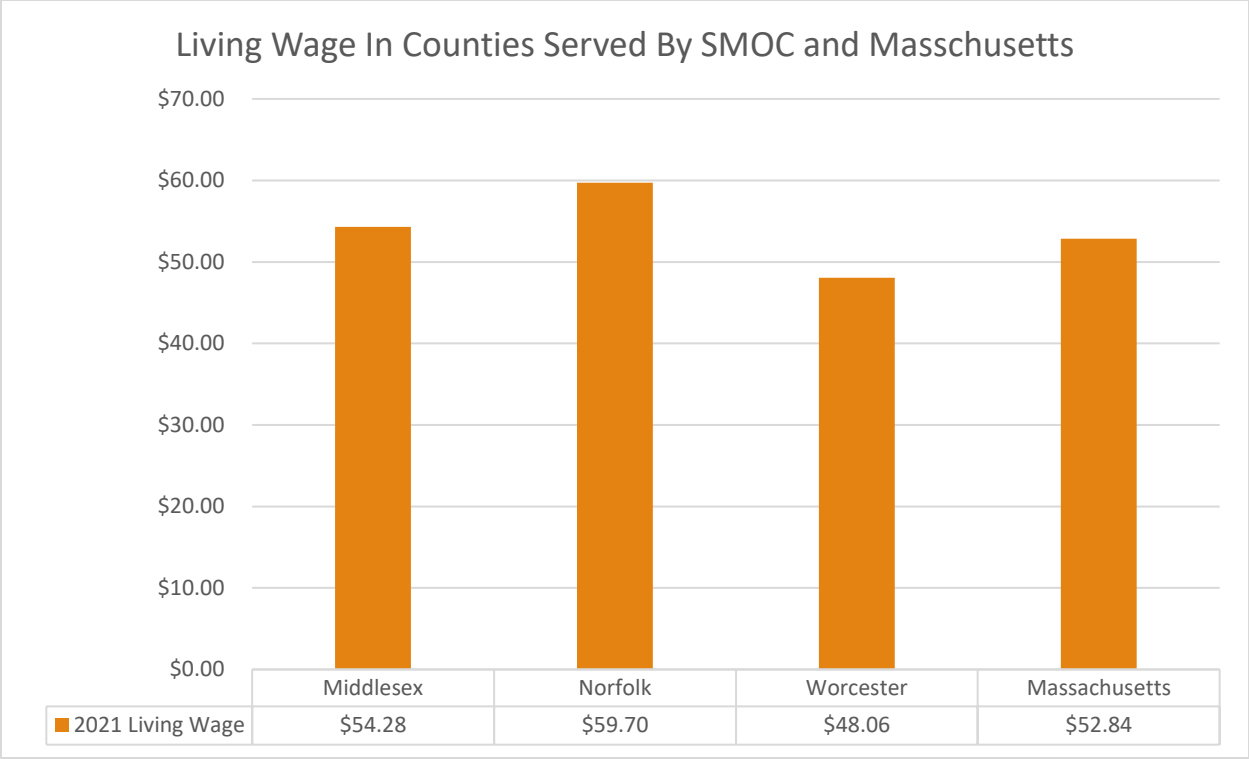
The Gini Index (sometimes known as the Gini Coefficient) is the most commonly used statistical measure of income inequality, ranging from 0 to 1. According to the Census Bureau, "a measure of 1 indicates perfect inequality, i.e., one household having all the income and the rest having none. A measure of 0 indicates perfect equality, i.e., all households having an equal share of income." A coefficient between 0.3–0.4 indicates that there is adequate equality. This means that income or wealth is distributed in a suitable way but can be distributed more equally. A coefficient greater than 0.4 indicates that there is a big income gap, which is the case in our service area.

## Median Earnings, Median Income and Income Inequality in SMOC CSBG Service Area and Select Cities

City/Town	Median Earnings	Median Income	Income Inequality (Gini Index)
Ashland	65,561	115,959	0.41
Bellingham	55,777	109,042	0.37
Framingham	47,947	90,638	0.46
Holliston	70,184	142,348	0.41
Hopkinton	91,231	179,192	0.44
Lowell	37,972	64,489	0.45
Marlborough	47,406	86,230	0.42
Natick	69,801	122,914	0.45
Northbridge	46,431	97,206	0.38
Southborough	78,736	170,223	0.47
Springfield	32,477	43,308	0.48
Wayland	89,297	203,789	0.43
Waltham	48,938	103,498	0.42
Worcester	36,722	56,746	0.48

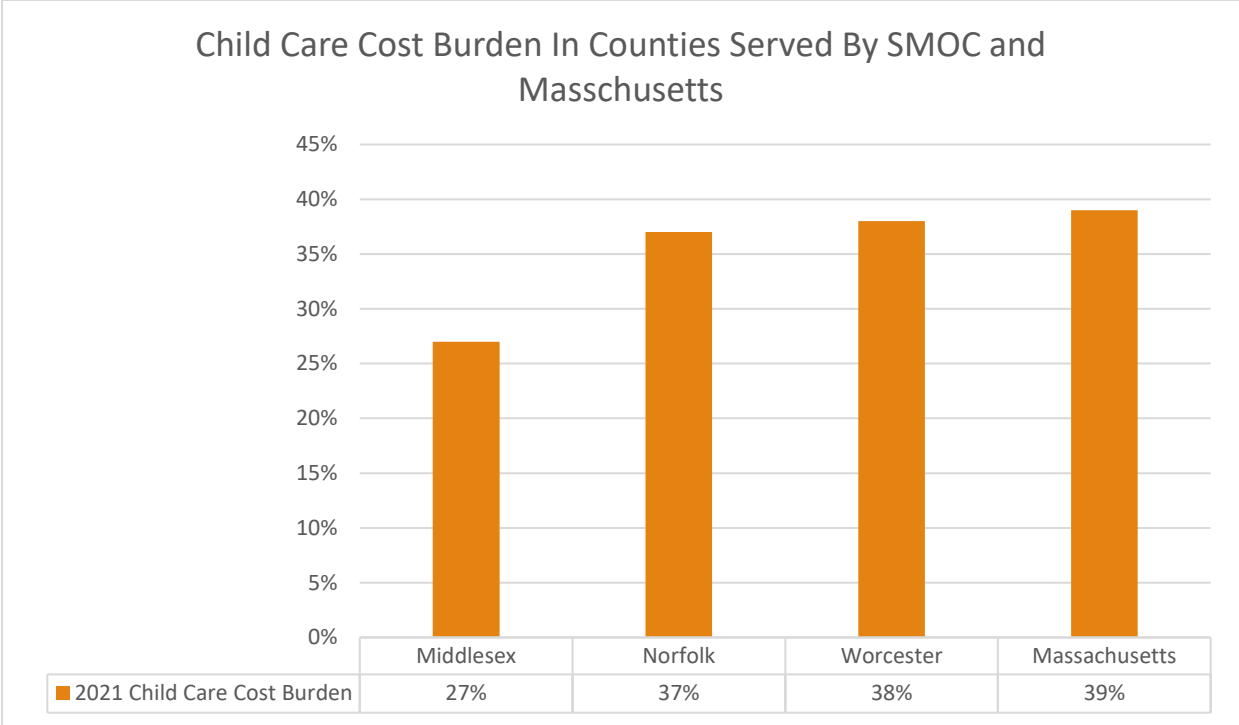
Source: US Census Bureau ACS 5-Year Estimates, 2021

MIT has developed a living wage calculator to estimate the cost of living in communities or regions across the United States based on typical expenses. The tool helps individuals, communities, and employers determine a local wage rate that allows residents to meet minimum standards of living. A living wage is defined as the hourly wage needed to cover basic household expenses, plus all relevant taxes, for a household of one adult and two children. With the exception of Worcester County, the living wage in the other counties where we operate programs and provide services is higher than the State, an indication of the relatively higher cost of living in these regions.



Source: The Living Wage Calculator, 2021

Childcare has been reported as a major issue in the past cycles of our community needs assessment. Finding trusted, reliable, and affordable childcare is a challenge for families across all incomes. A lack of childcare can lead to more women leaving the workforce, families slipping into poverty, and food insecurity for children. Parents need access to quality childcare options close to where they live to keep a stable job and allow their children to thrive in safe, caring environments. The effects of the COVID-19 pandemic continue to linger and negatively impact access to and availability of safe, reliable childcare. Households in Middlesex County spend more than a quarter of their median household income on childcare. Childcare costs are even more of a burden in Norfolk and Worcester counties, with households spending close to 40% of their income. This does not leave much in the budget to pay for other expenses such as housing, food, health and transportation.



\*Childcare costs for a household with two children as a percent of median household income.

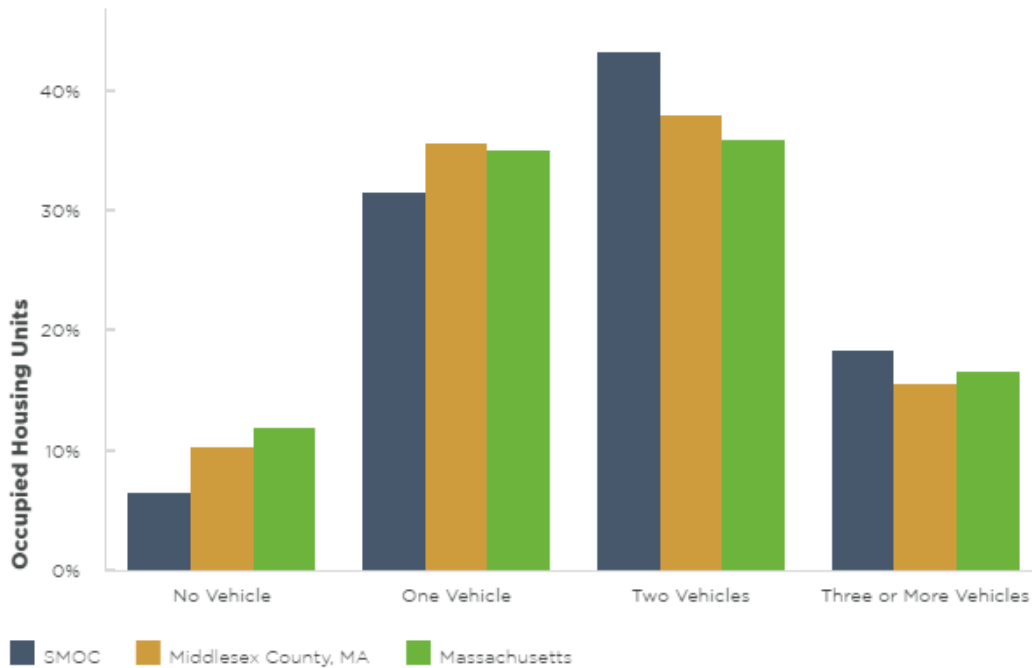
Sources: The Living Wage Calculator, Small Area Income and Poverty Estimates 2020-2021

**Transportation**

Reliable, accessible and affordable transportation is critical in all aspects of life. It provides communities with mobility and access to employment, education, medical care, community resources, and recreational opportunities. Transportation disparities affect people's ability to participate in healthy, social, and economic activities. MetroWest Regional Transit Authority, Lowell Regional Transit Authority and Worcester Regional Transit Authority are the three public, non-profit organizations charged with providing public transportation in our service regions.

Vehicle ownership per occupied housing units in our CSBG service area is high with only 6.5% reporting that they have no vehicle. About a third have one vehicle while almost half have two vehicles at their disposal. Almost one fifth have three or more vehicles. Most residents have access to two vehicles across the three geographies.

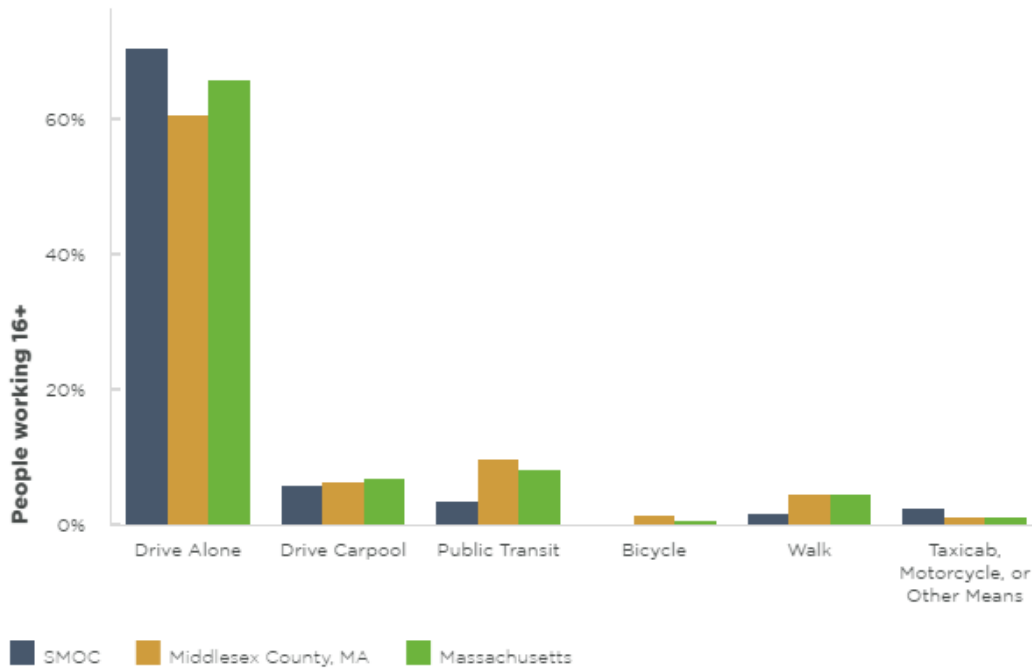
### Vehicles Available for Occupied Housing Unit



Sources: US Census Bureau ACS 5-year 2017-2021

Reliance on public transit is low within our CSBG service area with the vast majority of residents using their own transportation and driving alone on their commute. Being able to answer basic questions about commute patterns can inform decisions about where more public transit may be needed and how residents are getting to different places.

## Commute Transportation to Work



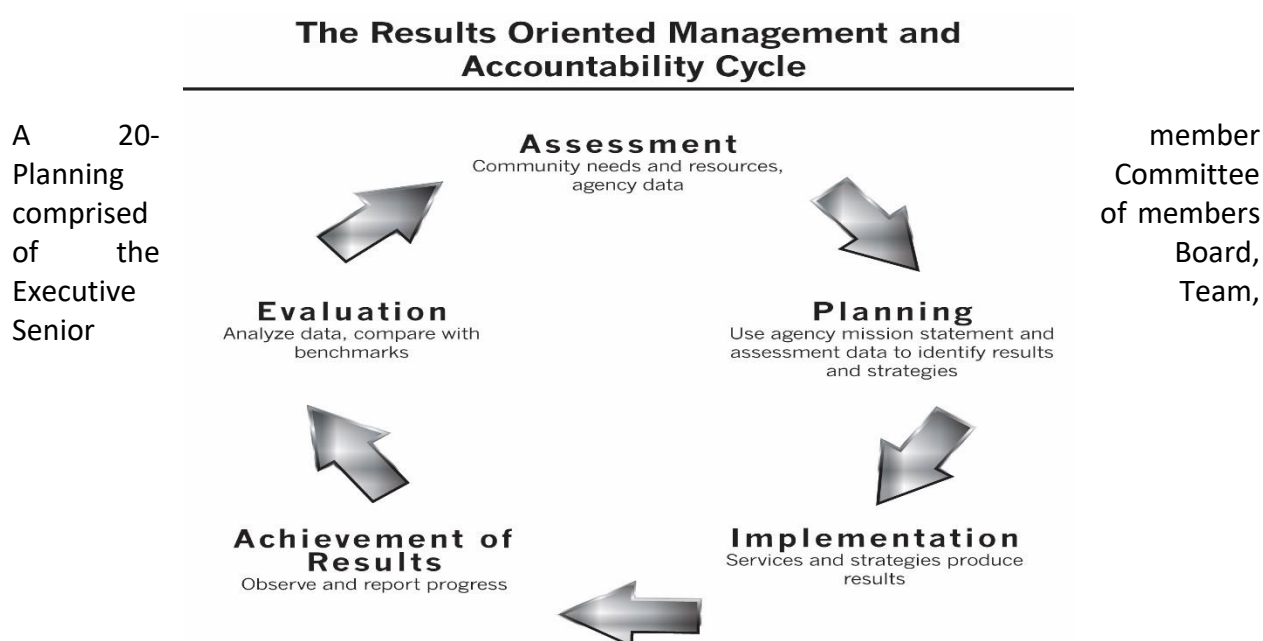
Sources: US Census Bureau ACS 5-year 2017-2021

The Low Transportation Cost Index (LTCI) is based on estimates for a 3-person single-parent family earning 50% of the median income for renters in the surrounding region. The index values range from 0 to 100. The higher the index, the lower the cost of transportation in a given geography. 2016 data from the Departments of Housing and Urban Development and Transportation shows lower transportation costs in Middlesex (LTCI 100) and Worcester (LTCI 96) counties, compared to Massachusetts (LTCI 48). No data is available for Norfolk County where Bellingham is located.



## 4. Community Assessment Process

The Results Oriented Management and Accountability (ROMA) Cycle (see below) provides a performance management framework for continuous growth and improvement among Community Action Agencies. A comprehensive assessment of community and internal agency needs is the first step in the ROMA cycle to gain a better understanding of needs and opportunities to improve lives. We can then develop appropriate programs, implement them, report the results, evaluate their impact, and adjust as needed.



Management, and Planning and Compliance staff was created and charged with steering, overseeing, and coordinating the CARSP process. An internal kickoff meeting was held in October 2022 to establish the framework and officially begin the community needs assessment and strategic planning process. The Planning Guide developed by DHCD was reviewed in this initial meeting. A number of staff also attended DHCD's CARSP Kickoff Training Series in October 2022 organized for all the community action agencies. The Planning Committee meets on a monthly basis to review progress and the various deliverables.

Based on the size of the population living below the poverty line in our CSBG service area, the ideal sample size for the Community Needs and Customer Satisfaction Survey was calculated at 374, at a 95% confidence level. The survey was designed in SurveyMonkey and, for the first time, quick response (QR) codes were generated and distributed, in addition to the regular web link, for ease of access. The links were posted on our agency website and social media platforms including Facebook, Twitter and Instagram. Paper copies of the survey were also available for program staff to hand out to clients in MetroWest, Lowell, Worcester and Springfield. Given the diverse client base we serve, the survey was

translated and made available in 5 languages; English, Spanish, Portuguese, Haitian Creole and French. Data collection commenced in January 2023 and ended at the beginning of April 2023. We reached out to a number of partner agencies which also serve low-income populations but were unsuccessful in having them administer the survey to their clients.

The Community Needs and Customer Satisfaction Survey (Appendix 1) collected information about demographics, housing, health care, COVID-19, food security, employment, transportation, income, debt, safety, childcare, social media and use of and satisfaction with SMOC services. Similar to the last needs assessment, all Community Action Agencies were required to include a set of common questions to provide a statewide profile of community needs.

The Community Organizations Survey (Appendix 2) was administered online through SurveyMonkey from January to April 2023. Over 100 organizations were contacted with contextual explanations and background to the CARSP as well as the link to the online survey. These included community and faith-based organizations, state and local government agencies, financial institutions, educational institutions, legislators, police departments, and health entities among others. Organizations were requested to describe the populations they serve, identify their geographic service area and classify the nature of the services provided. In terms of community needs, they were asked to rank the needs in various sectors such as housing, healthcare, financial and economic concerns, childcare, nutrition, domestic violence, and transportation. Ranking ranged from 1-High to 5-Not Applicable. They were also required to identify other community needs and suggest strategies to avoid duplication and enhance collaboration with SMOC.

To supplement the data from the quantitative surveys, we conducted focus groups in March and April 2023 with clients in four SMOC programs. Due to staff and time constraints, we selected programs located in Framingham – Co-Occurring Enhanced Women’s Residential Dual Diagnosis Treatment Program; Anchored In Recovery Peer Support Recovery Center; a co-ed Supportive Housing Program; and Turning Point Emergency Shelter for single, unaccompanied men. The groups were conducted in English and facilitated by program staff. The discussion revolved around food, housing, employment/education, and transportation – issues which had surfaced from the Community Needs and Customer Satisfaction Survey – and community strengths/assets/resources (Appendix 3). Data from focus groups held at our Community and Cultural Center was also reviewed as part of the community needs assessment. In addition, Planning Department staff participated in the community needs discussion facilitated by MASSCAP’s Planners Community of Practice in March.

Key Stakeholder interviews were conducted in April with leaders from several area partner agencies. We solicited information about key needs in their respective communities, community-level resources to address these needs and ideas for interagency collaboration, partnerships and service integration (Appendix 4). The following participated in the stakeholder interviews:

- Reverend Dr. J. Anthony Lloyd, Greater Framingham Community Church
- Allison Parks, Wayside Youth and Family Support Services

- Stephanie Hirshon, MetroWest Chamber of Commerce
- Jon Fetherston, MetroWest Regional Transit Authority

The Board Survey (Appendix 5) was also designed in SurveyMonkey and administered from February to March 2023. Board members were asked how long they have served on the Board, the sector they represent, rate various aspects of the agency and its operations, comment on areas they rated as “Disagree” or “Strongly Disagree”, describe three strengths of the agency and describe three areas where they would like to see improvements within the agency.

The Staff Survey (Appendix 6) was designed and administered in SurveyMonkey from February to April 2023. Our President and CEO emailed staff explaining the context and purpose of the survey as well as the link to access the survey. Staff were asked to identify the regions where they work, demographic information, describe their role, rate various aspects of their specific program environment and general work environment, identify additional programs and services that they felt were needed, comment on areas they rated as “Disagree” or “Strongly Disagree” and offer suggestions to improve the work environment at SMOC.

We also administered a Volunteer Survey (Appendix 7) in SurveyMonkey as part of the internal needs assessment from February to April 2023. Our President and CEO emailed managers explaining the context and purpose of the survey and provided the link for volunteers to complete the survey. Volunteers were asked to identify the programs they volunteered in, demographic information, rate various aspects of their volunteer experience, identify additional programs and services that they felt were needed, comment on areas they rated as “Disagree” or “Strongly Disagree” and offer suggestions to improve the volunteer experience at SMOC.

## 5. Key Findings: Community Assessment

### Community Needs Assessment and Customer Satisfaction Survey

A total of 493 surveys were submitted for analysis, a 14% drop in responses compared to the 562 surveys returned during the 2021-2023 community needs assessment. However, it is above the optimal sample size of 374 required for the population in poverty in the ten cities and towns that make up our CSBG service area. Almost two thirds of the survey were completed in English, followed by Portuguese (21.5%) and Spanish (14.4%).

### Survey Submissions by Language

Language	Number of Surveys	Percentage
English	311	63.1
Portuguese	106	21.5
Spanish	71	14.4
French	4	0.8
Creole	1	0.2
<b>Total</b>	<b>493</b>	<b>100</b>

There was a broad-based response to the survey across the agency. The highest responses came from WIC followed by CSPECH as seen in the table below.

### Survey Submissions by Program

Programs/Projects	Number of Surveys
CSPECH	47
Turning Point	12
TAY	10
WIC	72
PFS	18
SMOC Roland's House	16
SMOC Sage House	14
SMOC Rhodes House	12

The majority of survey respondents live in Framingham, Worcester, and Marlborough as seen in the table below.

## Survey Submissions by Service Area

Town	Number of Surveys
Framingham	144
Worcester	70
Marlborough	41
Ashland	17
Spencer	11

## Demographic Characteristics

More than half of the survey respondents (57.9%) were of the 25-44 age bracket followed by 23.2% of the 45-64 age bracket. 14.1% of the respondents were of the 18-24 age bracket. Only 3.6% of the respondents were veterans. A majority of the respondents (69.0%) identified as women, 27.7% as male, and 0.68% as gender non-binary. Regarding sexual orientation of respondents, 82.3% identified as straight, 2.7% as bisexual, and 1.8% as gay or same gender loving. 10.9% of the respondents preferred not to disclose their sexual orientation.

Regarding racial representation, 52.7% of the respondents were white, 12.8% were Black/African Americans, 5.8% were multiracial, 2.2% were American Indians, 13.7% preferred not to disclose their race and 62 respondents did not answer the question. Over a third (36.3%) of respondents identified as Hispanic/Latino.

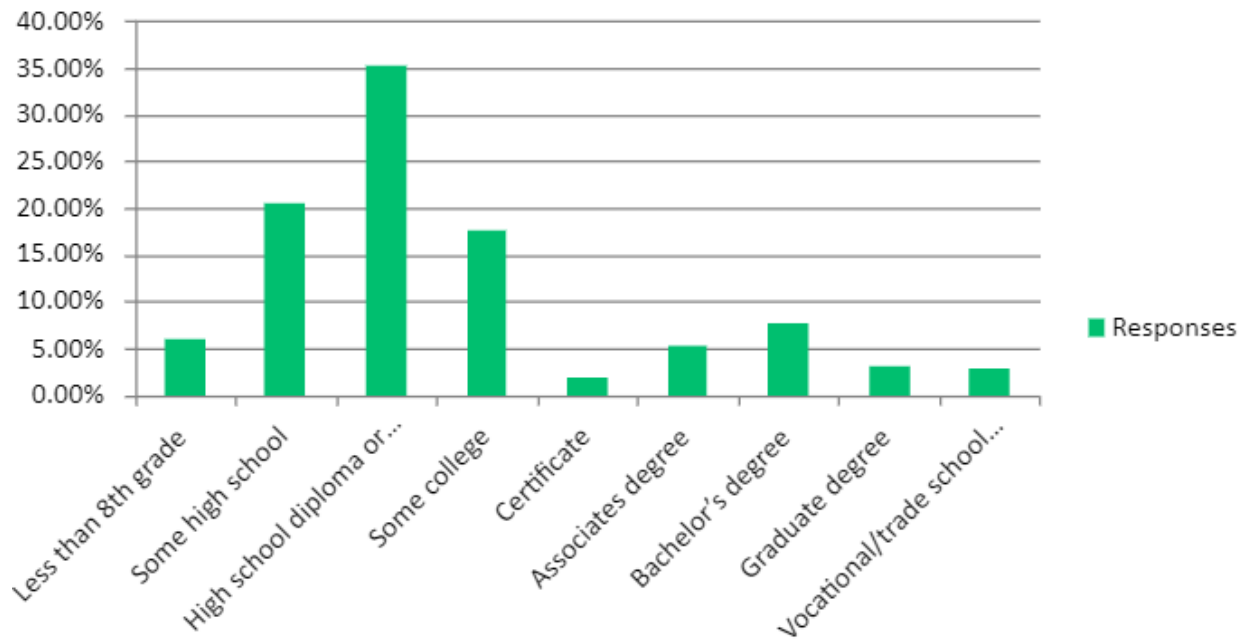
Middlesex County is very diverse in terms of language. Three main languages are spoken by the clients served. The survey revealed that 66.8% of the respondents spoke English, 26.5% speak Spanish and 22.7% speak Portuguese. Other languages spoken include Russian, Haitian Creole and Arabic.

Regarding household type, the survey revealed three main household types; single-family household (41.5%), two-parent household with children (29.5%), and single parent female head of household.

Regarding housing status, the survey revealed that 71.2% of respondents rent, 18.8% are homeless, 5.4% live with their family or friend and 5.4% own the houses they live in. About a third (30.9%) of respondents who rent reported that their rents are subsidized while 45.6% said they were not receiving any rent subsidy. Regarding how much of their income was spent on rent and mortgage, the survey revealed that 45.1% of respondents spend more than half of their income on rent and mortgage while 36.5% spend less than half of their income on rent/mortgage.

The survey was interested in the level of education of the clients served at SMOC. Almost three quarters of respondents have a high school diploma or higher, with a third reporting some college or beyond.

## Highest Completed Grade in School



### SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

In the area of health, 96.3% of the respondents had some form of health insurance. Regarding insurance for children under 26 years, the results show that 62.5% of the age group below 26 years have health insurance. About a third (30.4%) of respondents selected Not Applicable as a response. Generally, insurance coverage for adults is higher than for the age group below 26 years. There is fairly good insurance coverage in the area since the state of Massachusetts has made Health Insurance quasi-mandatory since 2006.

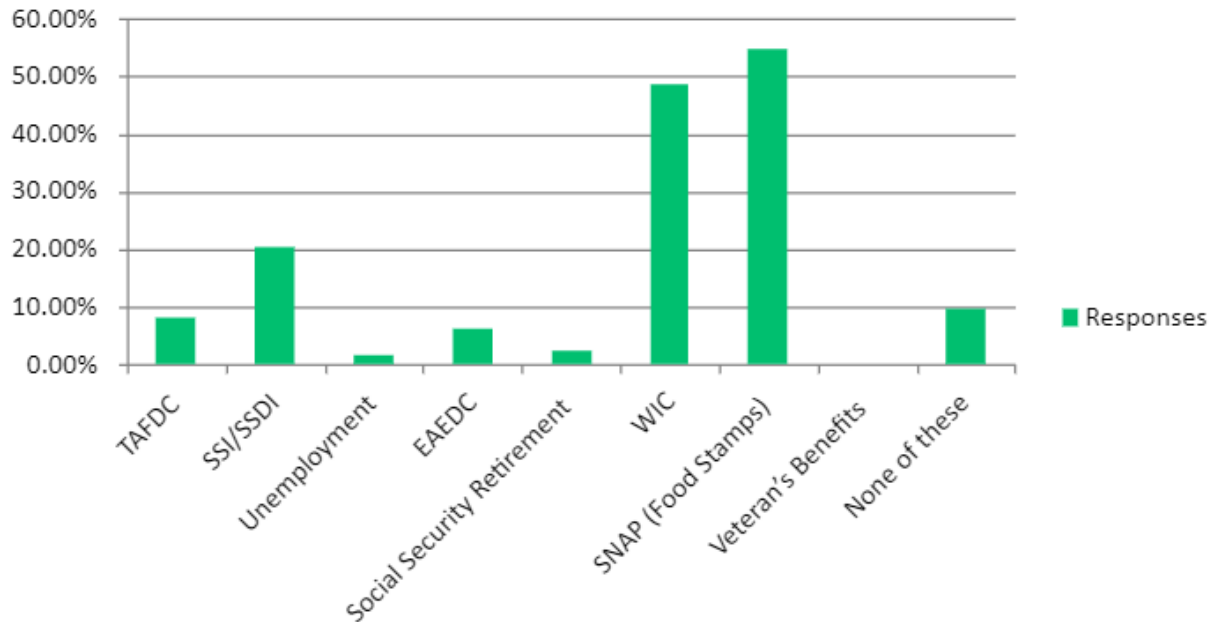
Regarding access to Primary Health Care, 75.9% of respondents indicated that they had a Primary Care Physician.

The survey was interested in knowing whether clients had some form of disability. Survey results indicated that 33.4% of clients had a disability compared to 66.5% without a disability. Of those who indicated that they had a disability, 40.2% acknowledged that their disability was documented. Of the 33.4% respondents who acknowledged that they had a disability, only 4.6% acknowledged that they use assistive technologies.

### Benefits Received by Households

The survey was interested in knowing which social safety net benefits clients receive. SNAP (54.9%), WIC (48.5%) and SSI/SSDI (20.3%) are the most common benefits respondents receive. Slightly less than 10% of the respondents acknowledged that they did not receive any type of benefits.

## Benefits Received by Household



SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

Another area of interest to the survey was the income levels of the clients. The results showed that almost half of the respondents (49.3%) earn below \$2000 per month before taxes. When taxes are applied to this amount, their incomes cannot help them meet their basic needs. About a quarter (24.0%) of the respondents are in the \$2000-\$4000 income bracket. One fifth of the respondents had no cash income.

### Respondent's Income Level (before taxes)

Income level	Percentage
My household has no cash income	20.5
Under \$2000 per month	49.3
Between \$2000-\$4000 month	24.0
Between \$4000-\$6000	5.1
Over \$6000	0.9

SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

### Needs impacting People in the Community

The main objective of the survey was to identify the key needs impacting people in the communities we serve. Respondents were to choose all the top needs impacting people in their community. The results obtained showed that affordable housing is the top need (70.8%)

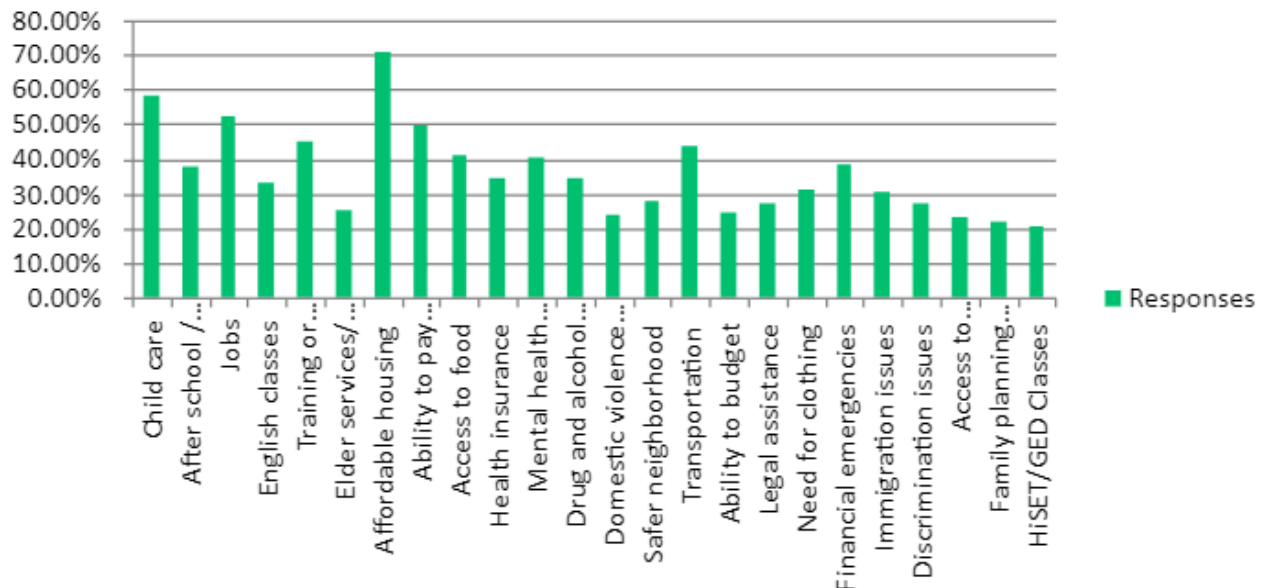
followed by childcare (53.2%), jobs (52.4%), ability to pay heating and utility bills (49.7%), training or education to get a job or better job (44.9%), transportation (43.8%), access to food (40.9%) and mental health services (40.1%). This is the third time in a row that affordable housing has emerged as the top need, as was the case in our 2018-2020 and 2021-2023 needs assessment.

### **Individual/Family/Community Level Needs Statements**

- Affordable housing (70.8%) – At the Individual/Family Level, low-income individuals and families need safe, decent housing that is affordable. At the Community Level, communities do not have an adequate stock of affordable housing to meet current and future demand.
- Childcare (53.2%) – At the Individual/Family Level, low-income individuals and families need access to childcare that is safe, affordable, accessible and of a high quality. At the Community Level, there is a need for more subsidies and vouchers.
- Jobs (52.4%) – At the Individual/Family Level, low-income individuals and families need good jobs that pay living wages that can sustain and meet their needs. At the Community Level, there is a need to ensure that employers pay living wages.
- Ability to pay heating and utility bills (49.7%) – At the Individual/Family Level, low-income individuals and families need assistance to pay their energy bills and avoid the risk of utility shut-offs. At the Community Level, there is a need to expand discount and benefit programs.
- Training or education to get a job or better job (44.9%) – At the Individual/Family Level, low-income individuals and families do not have the necessary credentials to access well-paying jobs.
- Transportation (43.8%) – At the Community Level, there is limited public transportation that is accessible and affordable to community members.
- Access to food (40.9%) – At the Individual/Family Level, low-income individuals and families lack access to healthy, nutritious food that is affordable. At the Community Level, low-income communities need access to stores that sell affordable, healthy, nutritious food.
- Mental health services (40.1%) – At the Individual/Family Level, individuals and families need access to mental health services that are affordable, accessible and culturally appropriate. At the Community Level, there are limited mental health facilities to meet demand.



## Self-Identified Top Needs Impacting People in the Community



SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

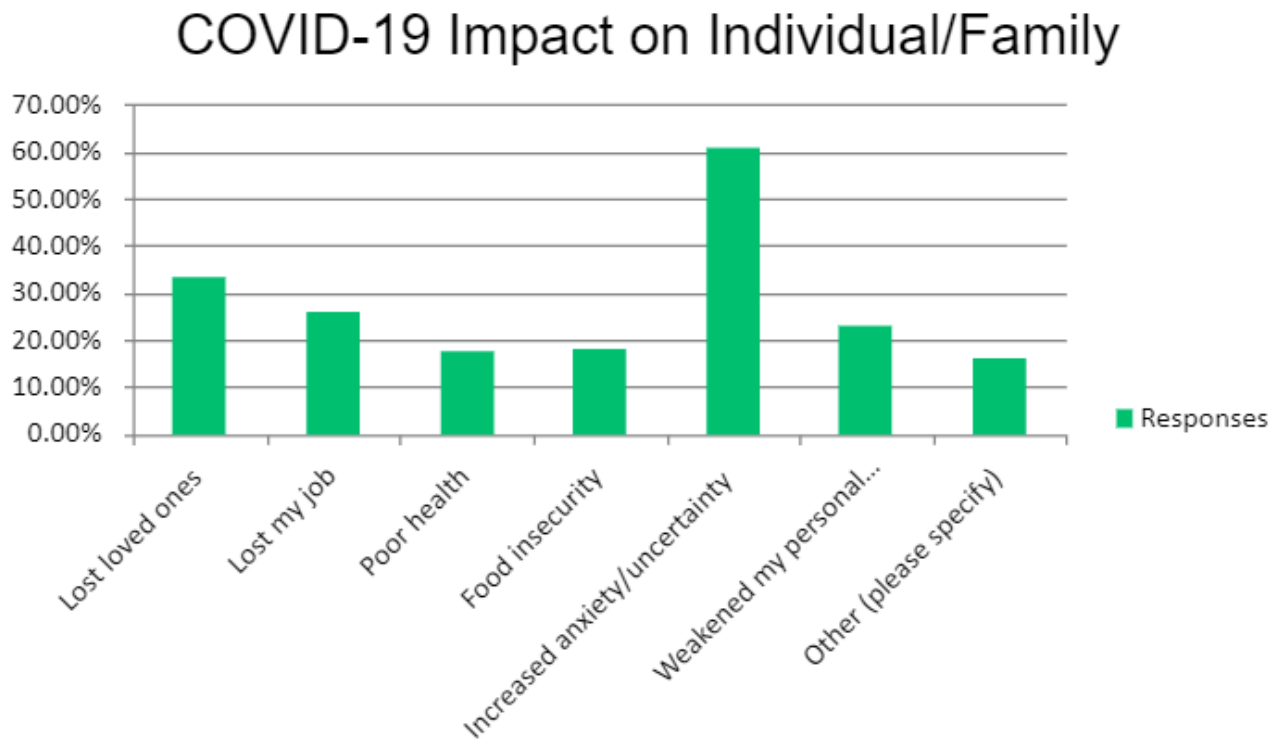
### Impact of COVID-19 on the Community

The survey was interested in how community members assessed their current family situation compared to before the COVID-19 pandemic. Although half of the respondents felt that their current family situation was the same, 34.9% of respondents felt that their situation was worse. Only 14.1% of respondents felt that they were better off now compared to before the pandemic. COVID-19 continues to impact communities in various ways.

The COVID-19 pandemic had a huge impact on the community. Almost two thirds (61.0%) of respondents revealed that the pandemic resulted in increased anxiety and uncertainty in their communities. Other major negative effects of the pandemic included death of loved ones, job losses, poor health, weak relationships. Other impacts of COVID-19 identified in the community by respondents included:

- The economy never really recovered from COVID-19
- PTSD, Depression and anxiety got worse
- Loss of SSDI by some respondents
- Increased debts from being out of work
- Increased difficulty finding housing

- Unhealthy weight gain
- Increased discrimination
- Changing towns with kids and changing schools for kids
- Prices of basic necessities went up
- Fear to leave my house

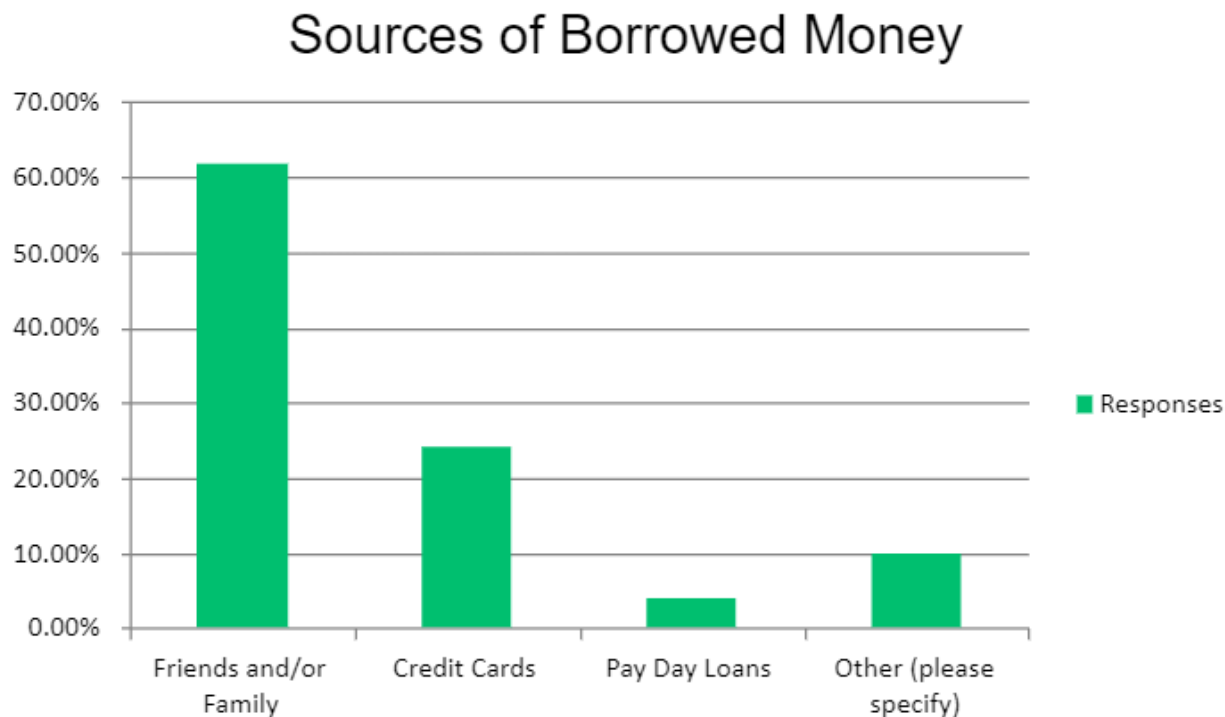


SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

According to the results, 36.8% of respondents cannot pay their bills regularly every month, 20.2% are unsure as to whether they can pay their bill each month. 42.9% of respondents acknowledged that they were able to pay their bills regularly and on time every month. Generally, less than half of all respondents are able to pay their bills every month.

Since a majority of respondents cannot pay their bills, they are forced to borrow money from various sources. Almost two thirds (61.6%) of respondents borrow money from friends and family, 24.3% use credit cards, 4.0% use Pay Day loans and 9.9% borrow from other sources. Many community members have resorted to not paying their bills or delaying payments. Some

reported that they negotiate with their landlords, while others depend on student loans, charities, gift cards, rep payee, etc.



SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

A majority of community members cannot afford to address emergencies. Asked whether they can set aside at least \$500 for emergencies, only one fifth (21.2%) revealed that they currently have that available. The vast majority, 71.7%, of respondents cannot address emergencies because they cannot save. Most community members live a “hand to mouth” lifestyle.

### Challenges to Financial Stability of Community Members

The survey was interested in identifying the key factors that keep families from feeling more financially stable. According to the respondents, these include the high cost of living expenses (40.0%), limited affordable housing (33.8%), no reliable means of transportation (31.2%), low fixed income (29.0%) and expensive childcare costs (28.3%). These challenges mirror the key community needs expressed earlier in the survey. Most are structural in nature and beyond the family’s capacity to resolve on their own, thereby requiring changes to systems and institutions.

Other challenges identified by respondents included:

- “Retired”
- “My earnings haven't kept up with inflation”
- “Can't find a landlord that will rent to me or subsidized housing that will take me with my CORI”
- Taking care of young children so cannot work outside the home

What keeps you or your family from feeling more financially stable?	Percentage
I work full-time but my pay doesn't cover my expenses	22.1
I can only find part-time/seasonal work	7.2
I can't find a job	23.4
I or my family have debt	25.2
I need more education or training to get work or better work	22.4
Childcare is too expensive and/or interferes with my ability to work	28.3
Childcare is not consistently available in my area	11.9
My living expenses (rent/mortgage, heat, food) are too high	44.0
I can't find housing that I can afford	33.8
I or a family member have had a lot of medical expenses that weren't covered by insurance	7.8
I don't have reliable transportation	31.2
I am on a fixed income (Social Security, pension, etc.), and my income is limited	27.0
I lost eligibility for benefits (i.e., SNAP, MassHealth, DTA)	10.1
Someone in my household is spending money on things we don't need, so there isn't enough left for other expenses	1.8
Someone else controls the money and makes decisions I don't agree with	1.5
I or a family member am struggling with addiction/substance use	9.9
I or a family member am struggling with mental health issues	20.0

I don't feel safe in my home	4.4
I don't feel safe in my community	4.9
I don't have reliable elder care which interferes with my ability to work	0.5
There is a language barrier keeping me from talking to employers	4.1
I have serious physical/mental health concerns	15.3
Caring for a child or other family member with disabilities keeps me from working	3.3
My immigration status keeps me from finding consistent work with good pay	8.5
Not Applicable	2.8
Other (please specify)	6.5

SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

Regarding access to food and food security, the survey showed that 11.3% of respondents currently have little or no food and largely depend on community meals, food pantries, and friends and relatives. One fifth of respondents acknowledged that they had less than one week's food available, 31.8% have more than one week's food available, and 36.2% acknowledged that they have adequate food and do not depend on food pantries.

### Community Health Needs

The survey was interested in knowing whether community members had access to healthcare. Over half (59.8%) of respondents acknowledged that they had an annual medical check within the last year. One fifth (20.4%) had a medical checkup within the last two years. Generally, access to health is high in the community. 47.0% of the respondents acknowledged that they had seen a dentist within the last year while 52.9% did not see a dentist for two or more years.

Regarding alcohol/substance use disorder, a little over a third (34.6%) of respondents admitted that they were struggling with these issues. Fortunately, 46.0% of respondents knew where they could refer someone struggling with alcohol/substance use disorder for treatment. Generally, alcohol/substance use issues are still a concern in the community and there is need to sensitize community members on the availability of existing treatment centers.

Responding to the question whether they felt lonely/isolated, 14.2% of respondents said they were lonely/isolated, 42.4% said they did not feel isolated/lonely while 37.9% said they

sometimes feel lonely/isolated. We can conclude that many community members feel isolated/lonely for a variety of reasons. Very often, isolation and a feeling of loneliness is associated with trauma. It might be necessary to start thinking about trauma healing initiatives in the community.

### **Prevalence of Violence in the Community (Safer Neighborhood)**

Asked whether their households suffered physical or emotional abuse within the last one year, 15.8% of the respondents responded in the affirmative while the majority (84.1%) said they did not suffer any such abuse. From the responses, it could be construed that the community is relatively free of physical and emotional abuse, but we know that domestic violence is consistently underreported due to shame, embarrassment, safety, and other reasons.

We were interested in knowing if respondents needed the help of law enforcement in the past year. One fifth answered in the affirmative while the majority (79.5%) said No. Personal safety was the reason given by most (42.5%) of the respondents, followed by help with something personal (such as lost/stolen item, car accident, etc.). Although most people (71.9%) said they were comfortable asking the police for help, those (28.0%) who did not, offered the following concerns:

- “They are corrupt”
- “They don’t do anything. Brush it all under the rug”
- “Cops judge you”
- “I have tried before and they allowed my ex to continue abusing me”
- “I have never had a positive experience with law enforcement and I just feel they tend to make things worse/higher anxiety situation”
- “I do, but I’m white. My husband is Black. I’m very nervous about him having any interactions with police. I don’t want him to die. I need him in my life and want to grow old together with him”
- “Because of my immigration status, am not American citizen yet”
- “They do not take you seriously, are not approachable”
- “The victim always seems to become the problem especially when people of power are involved”
- “I don't like RACISTS”
- “I have had some very bad experiences with the cops in the past”

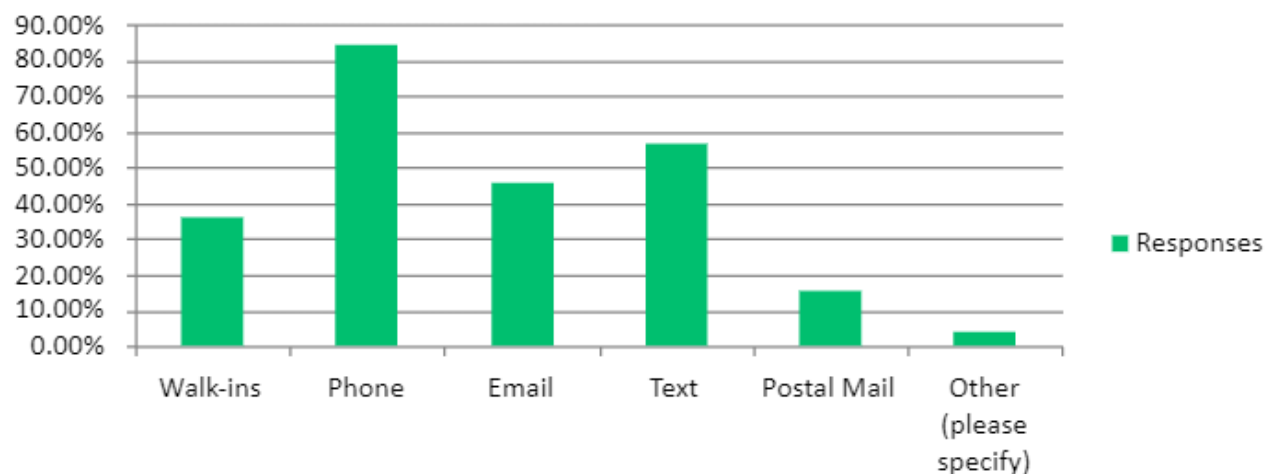
Clearly, there is a need to work with law enforcement on some of these negative perceptions raised about them. The Police are an integral part of the community and should inspire confidence, rather than fear.

### Communication with SMOC

Communication is a key area in social work and human services in general. The survey wanted to know the methods respondents would like to use to communicate with SMOC. The majority (84.4%) would prefer to use the phone to reach SMOC, 56.6% prefer to use text messaging, 45.7% prefer to use email and 36.2% preferred walk-ins. Other methods of communicating with SMOC suggested by respondents were, Unit visits, use of WhatsApp and Zoom. Unit visits were suggested because respondents complained that some managers do not answer phone calls. Unit visits were also proposed because some of the customers have challenges with transportation and cannot walk in as they would like to.

Responding to the question on how SMOC could reach out to clients with information, two thirds preferred to receive information by text, 65.3% by phone, and 46.9% by email.

### Preferences for Personal/Direct Communications with SMOC Service Providers (e.g. appointments, questions for case manager, etc.)



SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

### Privacy and Confidentiality

Only 20% of respondents answered the question about privacy and confidentiality concerns. Slightly more than three quarters of respondents indicated they had no concerns while 20.4%

said they did have concerns about the information they provide to SMOC. The following were given as reasons why they are concerned about giving their information. The top concern was how their information would be used. It is important that we continue to reassure clients that their information will be strictly guarded and not used against them or shared without their consent.

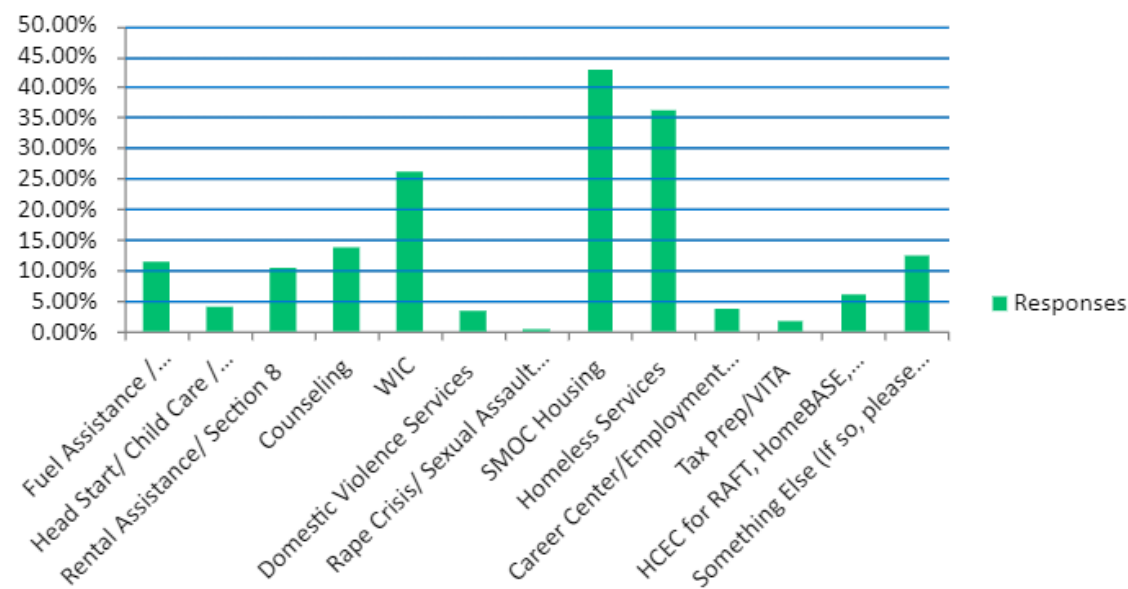
#### Reasons why I am concerned about giving my information to SMOC

Reasons	Percentage
I don't trust how my information will be used	37.2
I don't trust the person collecting my information	9.3
I'm afraid of identity theft	25.5
I'm afraid that I might be discriminated against/stigmatized based on my identity	27.9

SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

Of the 365 people who responded to this question, almost three quarters (71.7%) indicated that they received services from SMOC in the past year. The following SMOC services were the most widely used - SMOC Housing (42.9%), Homeless Services (36.2%), WIC (25.9%), Counselling (13.7%), Fuel Assistance (11.4%) and Rental Assistance (10.2%).

#### SMOC Services Used in Past Year



SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey



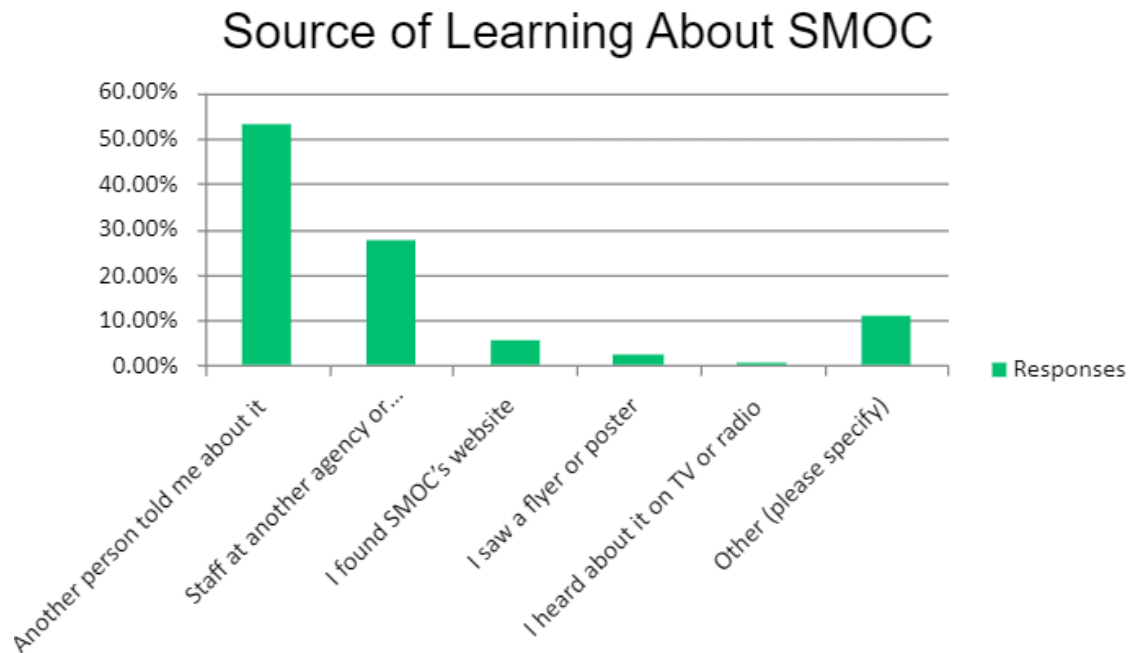
## How Clients Learned about SMOC

The survey also took interest in knowing how the respondents heard about SMOC and its services. Over half (53.1%) of respondents heard about SMOC and its service from another person, 27.3% from a staff of another organization. Only 5.5% discovered SMOC on its website and 2.3% discovered SMOC through a SMOC flyer.

Other sources include the following:

- Shelter
- A social worker
- A family member
- A church
- BMC Hospital
- Staff of SMOC

It is clear from the survey that most respondents did not learn about SMOC because the agency marketed itself, rather mostly hearing about SMOC from people outside the agency. SMOC needs to be more aggressive in its outreach to the community about all the services it provides. There is a need for the organization to come up with a communication plan to introduce its services to the community that it serves. The launch of SMOC's new website in the coming months will make it easier to find all SMOC services and programs and contact the relevant program staff.



#### SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

Half of the survey respondents answered the question about customer satisfaction. The table below shows that, overall, respondents were satisfied with the agency's environment and way of working with them. Customer satisfaction is high with most people agreeing with the statements that were offered. Most were rated favorably with a score around or above 80% except for SMOC's acknowledgement of their diversity and SMOC's ability to share information about other internal or external services. These areas should be investigated and improved.

### Level of Customer Satisfaction with SMOC Services (%)

Statement	Yes	No	N/A
When I came into the building, I felt welcome.	78.9	5.4	15.6
I was helped in a timely manner.	85.6	7.8	6.6
I was treated with respect and dignity.	87.9	5.1	7.0
My privacy was respected.	87.5	7.1	5.5
I felt safe and comfortable sharing my information	84.7	10.6	4.7
I got the information/services I needed.	89.5	7.4	3.1
I was satisfied with the service I received.	86.2	9.5	4.3
I felt discriminated against due to my identity.	11.8	81.9	6.3
I feel like SMOC acknowledged my diverse background.	59.0	10.0	30.9
I was informed about other SMOC or community services.	68.9	20.7	10.4
I would recommend this program to friends and/or family.	89.7	5.2	5.2
The building was clean.	80.1	6.2	13.7

SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

### Positive SMOC Testimonies by Respondents

Compassionate, Culturally Sensitive Staff	Professional Service Delivery	Provided Needs	Clean and Safe Environment
Person centered care	Teamwork	Housing	Warm and friendly place
Treat clients with respect	Available	Counselling services	A general feeling of safety
Very kind staff	Accountable	Helped me recover from substance abuse	Easy to access
The willingness to help	Reliable	Provided me with addiction services	Clean and clean housing
Supportive and responsive	Time conscious	Provided me with Mental Health services	Safe place to be in
Prompt Service	Professional case managers	Provides food in good quantities	A safe space
Treat every One fairly	Get answers and results	Helped us pay for heat	
No discrimination	Straight forward answers to my worries	Legal assistance	
	We were able to do things discreetly through the mail.	Fuel assistance	

	Very quick with housing placement	Rental assistance	
	Very knowledgeable and helpful in area I needed.		

SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

### Client Recommendations for SMOC

Communicate More	Improve Shelter Conditions	Recruit and Train More Staff	Give Time to Listen to Clients
Provide identification badges for staff	Ensure proper property maintenance	Case Manager should have more time to work with clients.	Have more empathetic people work here
Increase more opportunities for direct contact between staff and clients e.g., unit visits	More women dorms. More structures, less chaos at the shelters	Focus on hiring staff that really have a passion to help people	Help people who just come in, people who are new and make them feel comfortable.
More communication about issues of interest to clients	A little more information on inspections and maintenance, via phone or text to let residents know	There is need for more staff in the office to meet client needs	Listen to the clients' needs
E-mail documents about denial or approval along with hard copies	Keep the shelters clean	More training for both staff and clients	Try to be more understanding and patient with people
Organize SMOC open Days for the public to know about SMOC	Enforce no smoking rules in the house.	More care workers	Be empathetic and caring towards clients

SMOC 2024-26 Community Needs Assessment and Customer Satisfaction Survey

### Additional Recommendations/Proposals by Clients

1. Create a SMOC marketing department
2. Organize more health events for staff, clients and community
3. Provide transportation to and from work for clients that need transport
4. Organize information visits or "SMOC open days" to let the public know SMOC

5. Figure out how to let people apply for services online.
6. Open the building again, have MH walk in appointments or face to face counseling. Telehealth is not working well.
7. Provide clients with forms to fill out electronically instead of phone interviews.
8. Increase staff at Night and Day shifts to two per shift.
9. Keep clients occupied. Idleness promotes a lot of gossiping and hatred

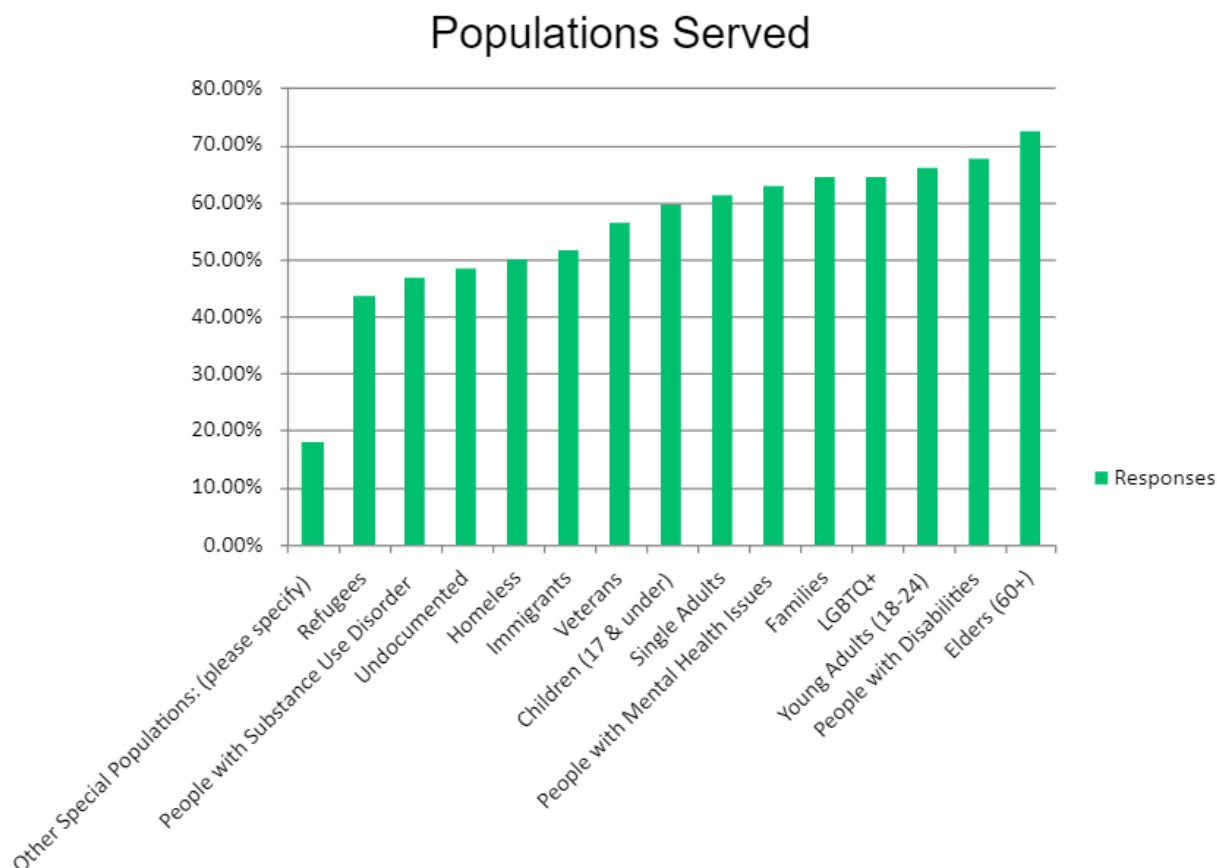
### **Additional Client Requested Help/Programs**

- Setting up Mental Health Clinics
- Help with Health Insurance
- Better upkeep of SMOC property and programs
- Put more emphasis on jobs and job training (Job readiness programs)
- Provide space to listen to clients
- Provide counselling service and Day Program services at the shelters
- WIC should update their food options. It should offer food types that are accepted by schools. For this to happen, they need to work with the schools to know which food to provide.
- Ensure regular monitoring to ensure that client goals are met
- Provide transportation for people going for appointments, especially in winter.
- Provide immigration assistance
- Staff training should include a module on customer service. Staff need to be more empathetic to clients.
- Introduce a Computer Loan Program
- Provide clients with proper information to help them make informed choices.
- Graduate clients who come to the end of the program. Orient them on where to go. (More emphasis on after care programs)
- Provide clients with guidelines and follow through to ensure compliance
- Provide Walk-in Mental Health Services including emergency medication programs.
- Provide more women housing and more mental Health housing

### **Community Organizations Survey**

Of the 62 responses received, the top five most served populations were older adults aged 60 years and over (72.6%), people with disabilities (67.7%), young adults aged 18-24 (66.1%), the LGBTQ+ community (64.5%), and families (64.5%). The top populations served by the community organizations represented in the 2021-2023 CARSP were people with disabilities (86.4%), those experiencing homelessness/displacement (81.8%), people seeking mental health

services (81.8%), and older adults aged 60 years and over (81.8%). With this comparison, we can see an 18.7% decrease in services provided for people with disabilities and a 9.2% decrease in services provided for older adults. We also see a 19% decrease in organizations serving people seeking mental health services and a 32% decrease in organizations serving those experiencing homelessness/displacement despite 75% of the client base served having a need for mental health services, 87.5% of the client base served having a need for affordable housing, and 79.2% having a need for rental assistance. This shows that the demand is greater than for the current services available. Additional populations served by community organizations represented include; people living with HIV, businesses, people living with chronic illness, and Spanish and Portuguese speakers.



SMOC 2024-26 Community Organizations Survey

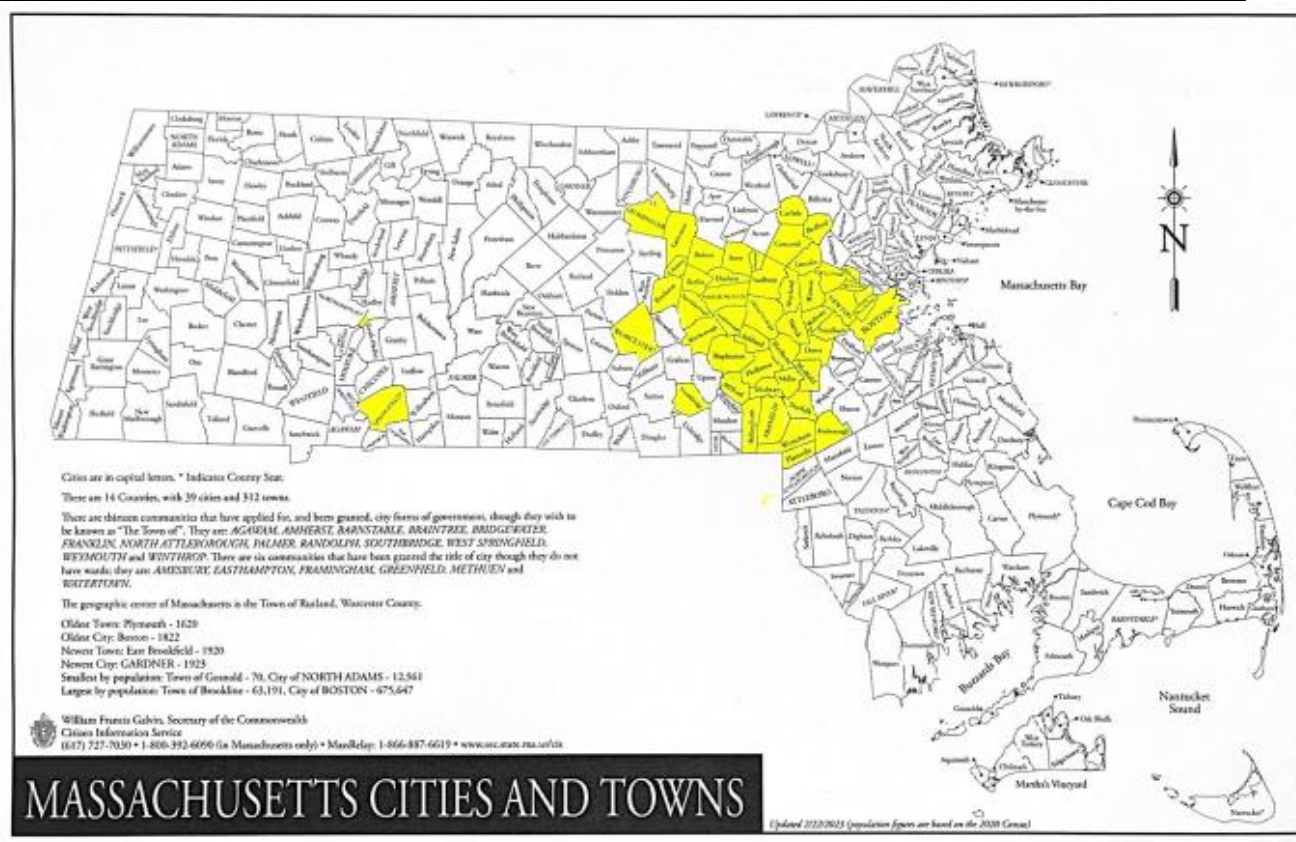
## Communities Served

The community organizations services 50 cities and towns in the Commonwealth of Massachusetts. Many of the towns served are the same as those within the CSBG service areas

and other towns where our clients and guests are from. The top five communities served are Framingham (69.4%), Natick (56.5%), Wayland (51.6%), Marlborough (50.0%), and both Ashland and Hopkinton with 48.4%. One organization reported serving the greater New England region in addition to two organizations reporting services to central Massachusetts.

The full list of reported communities served includes the following:

Framingham, Natick, Wayland, Marlborough, Ashland, Hopkinton, Southborough, Holliston, Bellingham, Northbridge, Sudbury, Lincoln, Concord, Marlborough, Weston, Wellesley, Waltham, Milford, Worcester, Clinton, Leominster, Bolton, Berlin, Lancaster, Pioneer Valley, Springfield, Hudson, Boston, Carlisle, Bedford, Northborough, Westborough, Dover, Sherborn, Belmont, Watertown, Newton, Brookline, Needham, Weston, Franklin, Foxborough, Stow, Medfield, Maynard, Medway, Millis, Plainville, Norfolk, Wrentham



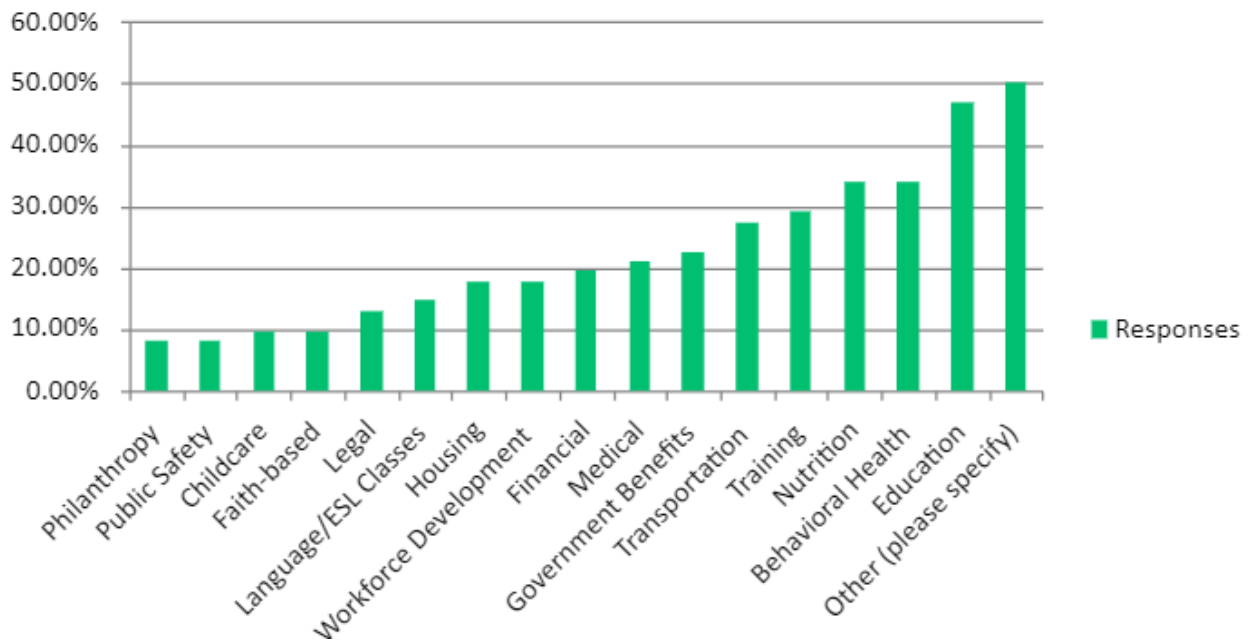
(Population figures based on 2020 Census)

## Nature of Services

The community organizations provide a wide range of services and programs for their residents. 46.8% of community organizations reported providing education and 33.9% providing both nutrition and behavioral health services. Only 17.7% of the community organizations represented provide housing services, far less than needed to meet the need for housing (87.5%) and rental assistance (79.2%) in the communities served.

Food Pantry and Food Services, Diaper Bank, I and R, Social Opportunities, Educational, and Fitness Programs for Older Adults, Early Learning Center, Public Health, Infectious Disease Services (Counseling, Testing, and Treatment for HIV, STI, TB, Viral Hepatitis C and Vaccination), COVID-19 and Influenza Vaccination Clinics, Therapeutics, Health Promotion/ Health Education Workshops, Health Insurance, Employment Services and Vocational Programs, Business Networking and Advocacy, Septic Oversight, Animal Keeping Regulations, Brazilian Consulate, Residential and Day Supports for People with Intellectual Disabilities, Autism, and Brain Injuries, Family Supports, Adult Family Care, Shared Living, Co-Response Jail Diversion, Re-Entry Services, CDBG and HOME Funds, Home Care Services, Information 7 Referral, Peer Counseling, IL Skills Training, Nursing Home Transition

## Nature of Services



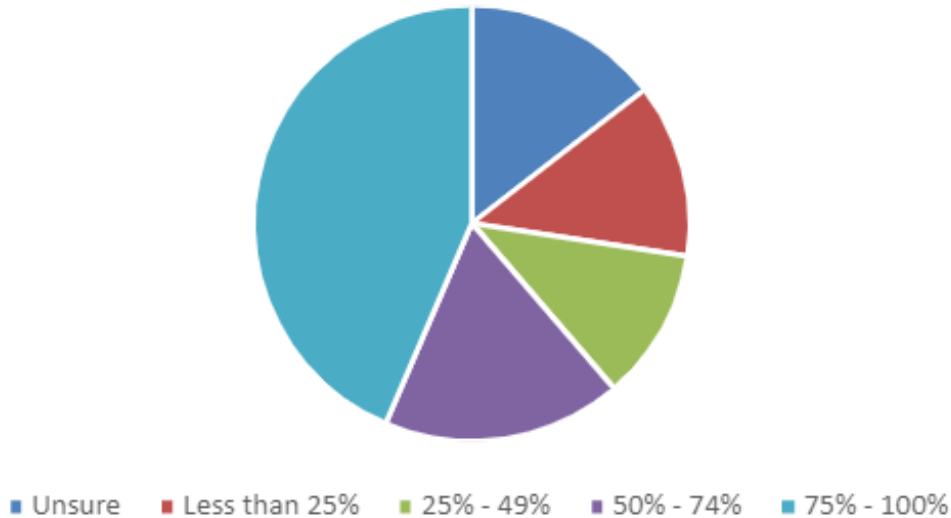
SMOC 2024-26 Community Organizations Survey

### Income Level

About 44% of community organizations reported that 75%-100% of their client base have incomes below the median household income level, a 7% increase from the 2021-2023 CARSP. Over the past 6 years, we see a consistent declining trend in median household income, beginning with 40.9% of the responding community organizations reported 50%-74% of their client base having income below the median household income, compared to 25.5% in the 2021-2023 CARSP, followed by 17.7% now; the difference shifting to the 75%-100% category.



## Percentage of Client Base with Income Below Median Household Income

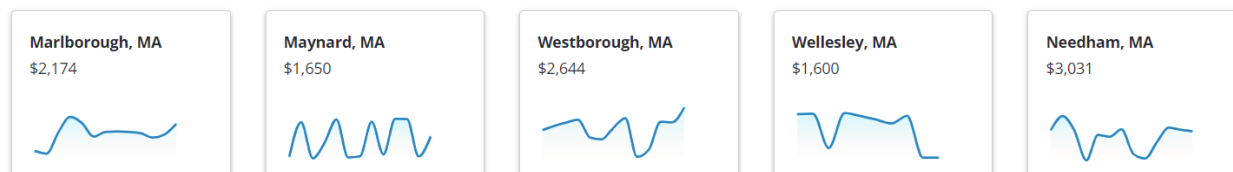


SMOC 2024-26 Community Organizations Survey

### Areas of Need

The highest-level need area identified by the community organizations who responded was affordable housing (87.5%), exactly consistent with our findings in the 2021-2023 CARSP. This is the third consecutive survey period reflecting little to no change as the need for affordable housing in the 2018-2020 CARSP was reported at 86.4%. This is unsurprising given the high rents in the service areas. For reference, according to Zillow Rental Manager, the average 1-bedroom property in Framingham, Massachusetts rents at \$2,122/month. Represented in the figure below, a comparison of 5 additional surrounding communities is provided. For a 2-bedroom property, the average monthly rent is \$2,700, which is an increase of \$288 from April of 2022 and \$383 above the national median.

## 5-Town Comparison of Average Monthly Rent of a 1-Bedroom Property



Source: Zillow Rental Data

*Framingham, MA Rental Market. Average Rental Price in Framingham, MA & Market Trends | Zillow Rental Manager. (n.d.). Retrieved April 12, 2023, from <https://www.zillow.com/rental-manager/market-trends/framingham-ma/?bedrooms=1>*

Mental health services were among the highest needs areas (75%) along with childcare (57.7%). The need for mental health services increased by 18.8% from the 2021-2023 CARSP. Given the context of the COVID-19 pandemic and civil unrest of the past three years, the rise in need for mental health services was anticipated. Access to transportation services exhibits a 12.5% decrease in need, despite still being in the top five needs areas.

### Top Ten Needs Areas:

1. Finding Affordable Housing 87.5%
2. Rental Assistance 79.1%
3. Mental Health Services 75%
4. Child Care 57.7%
5. Transportation 54.1% / Access to Public Transportation 53.19%
6. Good Paying Job Opportunities 53.3%
7. Affordable Child Care 52.2%
8. Access to Fresh Fruits and Vegetables 51.1%
9. Home Ownership Opportunity 51.0%
10. Substance Use Disorder Services 51.0%

### Ten Lowest Needs Areas:

1. Banking Services 41.8%
2. Workplace Safety 39.5%
3. Neighborhood Crime/Safety 37.2%
4. Violent Crime Victim Services 36.5%
5. Car Ownership Opportunities 34.0%
6. Community Organizing 28.8%
7. Domestic Violence Services for Men 30.2%
8. Rep Payee Services 23.2%
9. Nutrition Education 20.0%
10. Treatment of Offenders 20.0%

Community organizations ranked Family Planning Services (61.4%), Parenting Skills and Support (60.0%), Acute Care Services (56.8%), Debt Management (54.6%), Assistance Paying for Prescription Medications (53.3%), Community Meals (53.3%), Assistance with Cost of Health Insurance (52.2%), Eligibility for Transitional Assistance (51.2%), Culturally Sensitive Health Care (51.1%), Nutrition Education (51.1%), Emergency Shelter (51.1%), Job Training (50.0%), and Food Pantry Resources (50.0%) as moderate needs for more than 50% of their client base.

### Housing Needs

	High	Moderate	Low
Home Ownership Opportunity	51.0	38.3	4.2
Rental Assistance	79.1	14.5	4.1
Finding Affordable Housing	87.5	10.4	0.0
Emergency Shelter	38.3	51.0	8.5
Community Organizing	20.0	42.2	28.8

SMOC 2024-26 Community Organizations Survey

### Health Care Needs

	High	Moderate	Low
Health Insurance	34.7	41.3	15.2
Assistance with Applying for and/or Maintaining Health Insurance	38.3	46.8	8.5
Assistance with Cost of Health Insurance	30.4	52.1	10.8
Assistance with Paying for Prescription Drugs	31.1	53.3	8.8
Dental Care	37.7	48.8	8.8
Translation Services	47.8	34.7	15.2
Substance Use Disorder Services	51.0	36.1	8.51
Mental Health Services	75.0	20.8	4.17
Acute Care Services	22.7	56.8	11.3
Primary Health Care Services	39.5	48.8	6.9
Culturally Sensitive Health Care	35.5	51.1	8.8
Family Planning Services	11.3	61.3	15.9

SMOC 2024-26 Community Organizations Survey

## Financial/ Economic Needs

	High	Moderate	Low
Good Paying Jobs	53.3	31.1	11.1
Job Training	31.8	50.0	13.6
Child Care	57.7	26.6	8.8
Elder Care/ Senior Services	40.0	42.2	4.4
Transportation/ Public Transportation	54.1	33.3	8.3
Eligibility for Transitional Assistance	26.8	51.2	17.0
Money for Basic Needs	39.1	43.4	15.2
Financial Literacy/ Budgeting Classes	37.7	44.4	13.3
Debt Management	25.0	54.5	13.6
Adult Education/ GED	20.4	47.7	18.1
Computer Skills Training	32.6	45.6	13.0
English as a Second Language	40.9	40.9	15.9
Energy/ Fuel Assistance	45.6	36.9	8.7
Rep Payee Services	6.9	44.1	23.2
Banking Services	11.6	32.5	41.8

SMOC 2024-26 Community Organizations Survey

## Child Care Needs

	High	Moderate	Low
Affordable Child Care	52.2	25.0	9.0
Parenting Skills and Support	15.5	60.0	13.3
After School/ Summer Child Care	47.7	29.5	6.8
Off Hours Child Care	50.0	29.5	6.8
Pre-School/ Head Start	27.9	46.5	25.6
Voucher Application Assistance	36.3	46.5	11.6

SMOC 2024-26 Community Organizations Survey

## Nutrition Needs

	High	Moderate	Low
Nutrition Assistance Programs (SNAP, WIC)	45.4	36.3	15.9
Food Pantry Resources	45.4	50.0	2.2
Community Meals	24.4	53.3	17.7
Nutrition Education	26.6	51.1	20.0
Access to Affordable Healthy Food	47.7	36.3	13.6
Access to Fresh Fruits and Vegetables	51.1	31.1	15.5

SMOC 2024-26 Community Organizations Survey

## Domestic Violence/ Sexual Assault Survivor Needs

	High	Moderate	Low
Domestic Violence Services for Women	31.1	42.2	13.3
Domestic Violence Services for Men	11.6	41.8	30.2
Domestic Violence Services for Children	30.2	39.5	13.9
Treatment for Offenders	13.3	44.4	20.0
Prevention Services/ Communication Education	34.0	43.1	11.3
Neighborhood Crime/ Safety	16.2	43.1	11.3
Workplace Safety	4.6	39.5	39.5
Violent Crime Victim Services	17.0	36.5	36.5

SMOC 2024-26 Community Organizations Survey

## Transportation Needs

	High	Moderate	Low
Access to Public Transportation	53.1	34.0	8.5
Affordability of Public Transportation	46.6	35.5	13.3
Car Ownership	25.0	36.3	34.0

SMOC 2024-26 Community Organizations Survey

Survey respondents were also asked to identify any additional needs outside of those we provided. The list was quite extensive ranging from legal assistance to snow removal. This list highlights the many needs that are often left unmet for our populations served.

Qualified Caregivers, Youth Development Opportunities, Hoarding Resources and Assistance, Cultural Competency, Legal Assistance, Support for Young Adults Transitioning into the Workforce, Senior Housing, Media Literacy, Substance Use Prevention, Access to COVID-19 Vaccinations, Access to Household Cleaning Supplies, Personal Items, and Diapers, PCA/ Homemaker Services, Diversity of Workforce, Support for Neurodiverse Individuals, Access to Free College/Community College Courses, Telehealth Services, Assistance Reaching those Isolated from Others, Support for People with Disabilities at Work and/or Finding Work, Community Service, Community Buy-in, Community Gatherings, Critical Home Repair, Chronic Illness/Conditions, Snow Removal from Cars and Walkways for Seniors or People with Disabilities

## Areas of Collaboration

Given that we serve many of the same communities, there is opportunity for cross communication, collaboration between SMOC and community organizations, and the establishment and maintenance of partnerships. Some of the areas identified included continued support with domestic violence cases, workforce development, and centralized food distribution sites or delivery services. One idea proposed by a survey responder was for the organization of a task force or “think tank” to brainstorm collaborate solution design for lack of affordable health care, access to affordable housing, and resolutions to food insecurity that continues to exist in the communities served. We could organize a think tank to address permanent solutions to affordable health care, housing, and food insecurity.

Many community organizations expressed interest in increased cross-communication stating they think “having regular opportunities to help educate all service providers on what different agencies offer and do” would help organizations continuously update their resource bank and connect on where there are significant gaps in services or barriers to access. Building off this desire for collaboration, multiple organizations expressed desire for sharing with their client base the services offered by our organization and request for the same to be done by SMOC.

## Additional Areas of Collaboration

Sector	Seeking from SMOC	Offers for SMOC
<b>Housing</b>		
	Rental Assistance for Families in Transition (RAFT)	
	Vouchers for Housing	
	Access to Affordable Housing Units	
	Fuel Assistance	
	Financial Support for Property Taxes	
<b>Education</b>		
	Hi-Set	Workforce Training
<b>Support Services</b>		
	Childcare	
	Domestic Violence Case Support	
	Case Management	
	Assistance with Benefits Applications	
<b>Food</b>		
	Centralized Food Distribution Sites Between SMOC Houses	Existing Community Freezer Program
	Food Delivery Services	Offer to Provide Free Food through Client Choice Farmer's Market
<b>Transportation</b>		
	Vouchers for Public Transportation	
<b>Behavioral Healthcare Services</b>		
	Sober Housing	
	Medication Supported Treatment	
	Counseling Services	
	AA Meetings	

<b>Public Health</b>		
	Application Assistance with Insurance	
	Vaccination Clinics	
	Referrals to Dental Clinics that Accept Mass Health	
	Health Maintenance and Treatment for Older Adults	
<b>Communication</b>		
	Distribute Information on Needs of Those Experiencing Homelessness/Displacement with Community Organizations	Offer to Assist SMOC in Producing Information Videos About Provided Services/ Programs
	Advertise Food Pantry and Diaper Bank Located at A Place To Turn	
<b>Volunteer Opportunities</b>		
	Advertise Volunteer Opportunities	Church Members Available to Volunteer with SMOC
		Older Adults Facilitating/ Supporting Literacy Program for SMOC Clients

SMOC 2024-26 Community Organizations Survey

## Areas of Overlap

We were also interested to know where duplication or overlap in services exists between SMOC and the community organizations in the area. Common services provided across the board were identified as mental health services, substance abuse and addiction recovery services, shelters, fuel assistance, childcare, case management, workforce development, and hi-set education. With this overlap comes concern that agencies working to address the same needs areas are not communicating or collaborating effectively with each other. One response provided an expression of communities needing to think more regionally and not only focus on the needs of their specific city/town. Eleven organizations stated an understanding of no overlap of services.

## Concerns

Concerns to note that came to light in the survey responses included a call out of the increasing need for bed in shelters, stating that there are a lot of shelters but never enough beds.



Additionally, a backlog in fuel assistance was pinpointed as the underlying cause of many issues impacting the efficient service delivery. Lastly, in light of the ongoing staffing challenges of human service providers, one comment made in the survey results stated that the salary and benefits of employees need to remain competitive to fill staffing needs.

## **Key Stakeholder Interviews**

Key Stakeholder interviews were conducted in April with leaders from a number of area partner agencies. We solicited information about key needs in their respective communities, community-level resources to address these needs and ideas for interagency collaboration, partnerships and service integration.

- Reverend Dr. J. Anthony Lloyd, Greater Framingham Community Church
- Allison Parks, Wayside Youth & Family Support Services
- Stephanie Hirshon, MetroWest Chamber of Commerce
- Jon Fetherston, MetroWest Regional Transit Authority

Below is a summary of the key findings from the interviews.

### **Top Community Needs/Gaps:**

- Affordable Housing – cost; availability; ability to stay housed; eviction moratorium coming to an end.
- Utility Costs - people’s capacity and ability to meet rising costs; making choices as to what to pay for; falling behind and accumulating arrears.
- Food Insecurity – was an issue prior to inflation but is now multiplied; making decisions with little income; going without food in some cases; quality is lacking.
- Mental Health – real, big in the community; exacerbated by the COVID-19 pandemic; appointment wait times are long; not enough counselors and clinicians in provider agencies.
- Workforce Development - not enough staffing across the board; lack of Spanish and Portuguese-speaking clinicians to serve diverse populations in Framingham and MetroWest; “Connecting qualified candidates with employers”; Inclusive hiring practices; low reimbursement rates don’t support work; difficulty attracting and retaining staff even though wages are being increased; competing with other providers and state government.

- General Resources — not enough resources and support to meet all community needs.
- Caregiver Support - Family Partner Program staff noted there's a strong emphasis on clinical work but little or no support for caregivers as substance misuse, behavioral challenges, long waitlists for clinicians, etc. persist.
- Transportation Services – frequency of transportation; need increased funding to increase the frequency of stops along the fixed route system: every fifteen minutes instead of every hour or every two hours.

### **Community Resources:**

- Food programs including GFCC Children's Breakfast Program; United Way Community Meals; A Place To Turn Food Pantry.
- MetroWest Legal Services to help with housing issues, evictions, other issues.
- Advocates Community Behavioral Health Center on Route 9 in Framingham – 24-hour mobile and onsite crisis intervention services.
- Behavioral Health Partners of MetroWest (BHPMW) – behavioral health collaborative of Advocates, Wayside Youth & Family Services, Spectrum Health Systems and SMOC; Care Connection Program working well to connect people to behavioral health services.
- Educational Institutions including Framingham State University and Mass Bay Community College.
- Community ESL Services including Framingham Adult ESL and SMOC ESL programs.
- Technology usage and the increase of Zoom usage has enabled stronger outreach.
- 5-year plan to house area courts in the former Danforth Museum on Union Ave so housing, immigration, and drug courts will all be in one building. Will increase access but may lead to increased traffic downtown.

### **Attempts Made to Address the Needs and Impact of Such Attempts in your Community:**

- Wayside and SMOC partnership to meet the needs of the growing Haitian immigrant community.
- Communication with MWRTA to expand language/translation services for transportation routes and printed materials

- Highlighting trades through partnership with Framingham State University President Dr. Niemi
- Partnership with Pelham Lifelong Learning Center
- Bi-weekly cooking classes for residents
- Writing support letters for non-profits' initiatives
- “The city needs to look into harnessing the non-profits who are in the trenches”
- “Engage legislative groups”
- Partnership with local schools to increase transportation for youth to school buildings.

#### **Reasons Why These Attempts Have Succeeded or Failed:**

- Highlighting and celebrating the uniqueness of community
- Talking to people, collaboration and partnership
- “Strength in numbers”
- Travel Training Program has supported 20% of local school attending youth to be trained in using busses.
- Support from municipalities and local leaders
- Working in isolation is a detriment to families
- Lack of trust by the community
- Community member’s may be “weary of people not respecting language and culture”
- Employees and business assumptions of what community members need, talking at community members and not listening to what they want and need
- Stigma around public transportation usage
- Individual interest in protecting and preserving independence

#### **Ideas for Collaboration/Partnerships/Service Integration/etc.:**

- Need for advocacy on the state/federal levels for increased funding to increase frequency of stops along the fixed route systems

- Create a coalition for housing advocacy to increase the stock of affordable housing in the area; Strengthen the Framingham Housing Taskforce
- Create and publish a resource directory of social service agencies that is easily and quickly accessible to make referrals
- Planning Phase 2 of the February 2023 community forum with community members and local police departments to discuss community relations
- Have smaller conversations to make tasks less overwhelming, manageable and increase opportunities for success
- Seek resources to meet increasing needs
- Distribute SMOC information on Chamber of Commerce platforms to connect with businesses; “get information where it needs to go”
- Employers need to embrace public transportation and offer it as a benefit to their employees, for example MWRTA in partnership with MathWorks offers a shuttle service that will pick employees up at the train/rail station and shuttle them to the MathWorks Office.
- Increased inter-organizational communication to identify and address various needs.
- Word of mouth relay of provided services

#### **Other Observations:**

- Mass Health recertification – the importance of sensitizing community members and referring them to free Certified Application Counselors (CAC); MetroWest Legal Services is providing legal assistance to community members
- Large immigrant communities need support to regularize their stay; process takes a long time; use immigration lawyers who know the law, system and process so people don’t get taken advantage of
- When we get too big, things get lost
- Increase impact and support when agencies collaborate
- COVID-19 Impact on Workforce
- Increased Organizational Flexibility and Creativity
- Availability of possibility to work from Home Opportunities

- Business Spatial Management with the increase in employees working from home or on a hybrid schedule.
- Equating skillsets of humanities majors with skillsets needed for jobs and finding ways to quantify hiring metrics
- Given the increase in Fortune 500 companies (Staples, TJX), the existing colleges and universities in Framingham, Natick, and Wellesley, the ending of the Public Health Emergency of the Corona Virus, and the migration of residents out of Boston and into the suburbs, there is a travel boom expected over the next 5-10 years. This is anticipated to cause a collective traffic jam into and out of Framingham leading to an increase in the need for reliable, affordable, and accessible public transportation.
- Acknowledgement of temporary disabilities that come such as breaking a leg and not be able to drive
- Push for increased outreach in having people understand how to access and use public transportation before they need it.
- With consideration to individuals living with cognitive and developmental disabilities, public transportation can be a connector to quality of life; to education, to employment, to health and wellness, to exercise, to social gatherings, etc.

### **SMOC Program Focus Groups**

To supplement the data from the quantitative surveys, we conducted focus groups in March and April 2023 with clients in four SMOC programs. Due to staff and time constraints, we selected programs located in Framingham – Co-Occurring Enhanced Women’s Residential Dual Diagnosis Treatment Program; Anchored In Recovery Peer Support Recovery Center; a co-ed Supportive Housing Program; and Turning Point Emergency Shelter for single, unaccompanied men.

### **Food:**

- Most people have access to food stamps (SNAP), but some run out of benefits before the end of the month, so they have to resort to food pantries and family/friends for assistance.
- It would be great if the monthly benefit amounts could be increased.
- Food variety is limited at food pantries, not enough fresh fruit and vegetables.
- Transportation is a barrier to accessing fresh fruits and vegetables so some resort to nearby convenience stores with limited options.

- Farmers markets offer fresh, healthy fruits and vegetables and matching such locations with SNAP and WIC benefits would help in increasing access.
- Increasing eligibility for free school lunches.

#### **Health:**

- Most clients have health and dental insurance coverage but not all services are covered, especially under Mass Health which the majority of clients have.
- Mental health is a major issue in the community with homelessness identified as a leading cause
- Some PCPs are not receiving new members, so the waitlists are long
- Language barriers to accessing care
- Need more substance use disorder treatment programs for women
- Increased outreach and visibility for peer recovery support center

#### **Housing:**

- Some clients have been evicted in the past and this has impacted future housing opportunities
- Increase the number of emergency shelters and stock of affordable housing

#### **Employment and Education:**

- Most participants in the focus groups are unemployed due to a variety of reasons including homelessness, criminal history, mental health issues, substance use disorders, physical health issues, language barriers, lack of education and training.
- Workforce development programs focused on resume writing, computer training, job training/education and coaching were recommended to help people reenter the workforce
- Dream jobs identified include treatment programs helping women with mental health and recovery, healthcare such as EMT, CNAs, nurses, real estate, mechanics, air traffic controllers

- Barriers to getting their dream job include high cost and duration of education, criminal histories
- Remove the vaccine mandates for employment
- CORI checks for employment can be a barrier for some people

#### **Transportation:**

- Most participants rely on public transportation to get around and is mostly affordable and reliable
- Transportation vouchers to help with costs of public and private transportation would be very helpful
- Increase accessibility and information about transportation options

#### **Community Strengths/Assets/Resources:**

- Many feel safe in their current locations
- Community resources such as low-wage jobs, public transport, healthcare and stores are close by
- Need additional community resources such as swimming pools, splash pads, playgrounds

#### **Framingham Community and Cultural Center Focus Group Summary – area providers, teen residents**

- Immigrant services and programs
- Parent empowerment programs
- Housing education
- Mental health services, support groups for children and youth
- Multilingual counselors
- Insurance enrollment
- Affordable childcare and access to subsidies during ESL classes and other programs
- Additional GED classes

- Adult education e.g., coding classes
- Job training services /computer skills/executive functioning skills, prioritize, structure your thinking
- Social and afterschool programs for kids\* (teens) – afterschool and evening (check on Girl's and boy's clubs, hoops and homework)
- Affordable summer programs
- Drop in safe spaces for kids
- Kids' gently used sports equipment repository
- Food insecurity, especially for those community members who are ineligible for benefits
- Financial literacy: how to write a check, get their credit score; people in the foster system, for example, don't learn these things from their parents
- Fuel Assistance - Help applying for fuel assistance
- Elder services: People aging out of systems and need to transition to senior housing
- Knowing what programs are out there and eligibility
- Domestic Violence services could be provided at the Center, e.g., education for boys around domestic violence!
- Access to art and music classes for all ages, make spaces for specific populations: BIPOC, LGBTQ+, other languages
- A space for gaming/social space

#### **MASSCAP Planners Community of Practice Focus Group**

- DEI/Immigrant services
- Mental health and healthcare
- Inflation/cost of basic needs
- Housing



## 6. Key Findings: Internal Needs Assessment

We conducted our organizational internal needs assessment using staff, Board and volunteer surveys to evaluate the ability and effectiveness of existing programs and infrastructure in meeting the needs of low-income people. The surveys were administered using Survey Monkey.

### STAFF SURVEY

299 staff responded to the survey, about 40% of SMOC's workforce of approximately 750. In the self-assessment, staff were asked to indicate in which geographical region of the Commonwealth they work. It is interesting to note that the vast majority, 221, out of the total 299, work in MetroWest (Framingham Area), representing 74% of the workforce. The Lowell area registered the lowest number, representing 5%.

#### Staff Responses by Geographic Region

Region	Responses (%)	Total
MetroWest (Framingham Area)	74	221
Worcester Area and N. Central	15	44
Springfield and W. Central	6	19
Lowell Area	5	15
All Regions	100	299

SMOC 2024-26 Staff Survey

In addition to the questions about the geographical region, the survey asked to indicate their respective role in SMOC. Two hundred, ninety-five staff members responded to this question. Almost half (45%) are Direct Care staff, the rest are Management level, Administrative staff, Support/Property staff, and Variable Relief staff.

### Staff Role in SMOC

Role	Responses (%)	Total
Direct Care Staff	46	136
Management Level	24	72
Administrative Staff	16	49
Support and Property Staff	10	31
Variable Relief Staff	2	7

#### SMOC 2024-26 Staff Survey

Almost half (48%) of the staff who responded to the survey are in the 45 to 64 years age range. About 42% are 25 to 44 years old while less than 4% are under the age of 24. Almost 6% are 65 or older. Slightly more than three quarters (77.7%) of respondents identify as female while males accounted for less than a fifth at 18.8%. About 1% identify as Transgender (0.34%) and Non-binary (0.67%). We had added a Prefer not to answer option which received a response of 2.3%.

Two thirds (66.6%) of respondents identify as White. The next highest response was Prefer not to answer at 10.1% followed by Racial group not listed, please specify at 8.0% – the majority of responses was Hispanic. Other racial groups were as follows - Multiracial (6.7%), African American/Black (5.0%), Asian (2.3%), American Indian/Alaskan Native (0.6%) and Native Hawaiian/Other Pacific Islander (0.34%).

### Program Environment

We used a standard rating scale to evaluate staff responses to statements pertaining to the program environment. Most staff strongly agree or agree with the statements. Almost one out of four are neutral about the following statements: I am satisfied in my current position; and I have opportunity for advancement or promotion. Considering the second top comment indicates staff want more opportunities for advancement or promotion, this is an area management should work on.

### Program Environment (%)

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
My manager is approachable, accessible, and offers help when needed	55.2	31	8.8	3	2	0
I feel supported by my manager	52.4	29.7	10.5	3.7	3.7	0
Within my program/ department, our clients achieve success in improving the conditions of their lives after working with SMOC	33.7	47.1	13.8	1.4	1	3
I can positively impact service delivery at SMOC	47.7	41.6	6.7	0.7	1	2.4
Staff trainings that are offered give me the tools to improve my job performance	24.8	42.7	19	7.5	3.4	2.7
I can communicate concerns to management and the issues are addressed	37.7	34	16.8	7.1	3.7	0.7
I am satisfied in my current position	32.9	37.6	24.1	3.4	2	0
I enjoy my working relationship with fellow employees	49.5	40.1	8.8	1.7	0	0
I understand the role of different programs/departments	32	47.5	12.8	6.1	1.4	0.3

I have opportunity for advancement or promotion	23.2	30.7	28.3	11.3	3.8	2.7
I receive regular feedback and supervision	33.8	42.2	15.9	5.1	2.7	0.3
I have a manageable workload within my position	25.9	38.7	17.5	10.8	6.1	1

SMOC 2024-26 Staff Survey

Top 3 reasons why staff disagree or strongly disagree with some of the statements:

1. Staff expressed having an unmanageable workload, mostly due to staffing needs
2. Not enough opportunities for advancement or promotion
3. Not enough staff and management training opportunities

Top 3 things clients need that we are not addressing:

1. The need for more mental health assistance
2. Responding to clients in a timelier manner
3. Translation Services

### Agency Environment

The table below shows staff responses to the statements in the area of the agency environment. In general, the vast majority of staff members strongly agree or agree with the statements in the survey. Of concern is that one out of four staff are neutral about the following statement: SMOC adequately handles complaints and grievances. It is possible that working on improving communication between management and staff, which was the top commented reason why staff disagreed with some statements, could also help remedy feelings regarding complaints and grievances. It is clear that management needs to do some more work in these areas.

### Agency Environment (%)

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
SMOC effectively communicates with its employees	16.3	46.1	21.0	13.6	2.4	0.7
The benefits offered (vacation, sick, holidays, dental and health insurance, 403b) are good	31.4	44.3	13.5	7.1	2	1.7
There is a strong feeling of teamwork and cooperation in SMOC	26.1	43.7	19.3	7.5	3.4	0
My work is valued by SMOC	24.9	44.0	21.2	7.5	2.1	0.3
SMOC encourages work/life balance	26.4	40.0	22.0	8.8	2.4	0.3
I feel safe at work	34.9	48.5	11.2	3.4	2	0
I have the tools needed to assist clients or get my job done	27.2	50.5	14.1	6.5	1.0	0.7
I have a good understanding of SMOC's mission	44.1	48.5	5.4	1.4	0.3	0.3
The range of SMOC services meets our client needs	31.4	50.0	10.8	3.7	1	3
SMOC is successful in our core mission	29.4	50.9	16.4	0.3	0.7	2.4
Management treats staff with dignity and respect	32.8	47.4	9.9	7.2	2.7	0

Management is open to receiving feedback and suggestions	30.6	42.1	17.2	7.1	1.7	1.4
SMOC adequately handles complaints and grievances	19.6	37.8	25	6.8	3.7	7.1
SMOC administers policies and practices in a consistent manner	22.6	46.2	18.5	6.9	2.7	3.1

SMOC 2024-26 Staff Survey

Top 3 reasons why staff disagree or strongly disagree with some of the statements:

1. Need more communication between management, staff, and between departments
2. Feeling underpaid for the amount of work done
3. Lack of management support and reachability

Top 3 changes SMOC could make to improve the agency environment:

1. Increase wages
2. Increase staffing and retention
3. Provide training opportunities

Top 3 suggested services to be added:

1. More behavioral health services such as on-site clinicians at certain programs, crisis intervention, drug/alcohol counselors, small groups, classes, trauma-based services, and housing
2. More sober housing including on-site support staff 24/7
3. Employment/Career services

### COVID-19 Precautions

The table shows staff responses to statements regarding their experience with COVID-19 precautions at the agency. In general, the vast majority of staff members strongly agree or agree with the statements in the survey.

### COVID-19 Precautions (%)

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
I feel SMOC has created a safe, clean, healthy environment	37	45.1	10.2	4.4	2.7	0.7
I understand SMOC's COVID-19 protocols	39.1	51.9	7.1	0.3	1.7	0
I know where to find SMOC's COVID-19 protocols	38.2	49.7	8.1	2	0.3	1.7
SMOC has helped me gain access to COVID-19 and/or Influenza vaccines	40.7	43.8	10.8	1.4	1.4	2

SMOC 2024-26 Staff Survey

Top 3 reasons why staff disagree or strongly disagree with some of the statements:

1. Frustration over clients and/or staff not always following protocols (i.e., mask wearing, not coming in when sick, etc.)
2. Bathroom cleanliness and sanitation
3. Disagree with COVID-19 vaccine requirement for staff

### BOARD SURVEY

The Board survey included questions about the board and agency performance and served as a tool to assess the performance of individual Board members and the Board as a whole.

Nineteen out of 21 (90%) members completed the survey which was entered and analyzed in SurveyMonkey. Over half (52.6%) of the members have served on the Board 10 years or longer so there is considerable longevity and institutional memory within the group. The rest have been on the Board between 1 and 9 years. Of the 19 respondents, 42.1% represent the Public sector, 36.8% represent the Low-Income sector, 10.5% represent the Private sector, and two members were not sure of their sector.

The majority (63.1%) of respondents are 65 years or older, 26.3% are in the 45 to 64 years age range while 10.5% are between 25 and 44 years old. There are slightly more females (52.6%) than males (42.1%), while 5.2% selected the Prefer not to answer response.

The racial breakdown of respondents shows almost three quarters (72.2%) identify as White, followed by African American/Black (16.6%). Prefer not to answer and Racial group not listed, please specify were each selected by one respondent.

### Agency Performance

We used a standard rating scale to evaluate Board members on the issues pertinent to the performance of the agency. The table below shows their responses to statements in this area. All Board members either strongly agree or agree on the following statements: SMOC is successful at meeting its mission, has a strong understanding of community needs, programs and services meet client needs, management is aligned with the agency goals, decision making is deliberate and thoughtful. This is an indication that the agency is on the right track.

While 50% of members agree that SMOC does a good job with fundraising and public relations, almost a quarter (22.2%) were neutral. Three members were neutral about the statement that SMOC staff are adequately trained and supported to meet the agency's mission. One member disagrees with the statement that staff communication with the Board is satisfactory.

### Agency Performance (%)

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
SMOC is successful at meeting its mission	61.1	38.9	0	0	0	0
SMOC has a strong understanding of community needs	66.7	33.3	0	0	0	0
SMOC's programs and services meet client needs	50	50	0	0	0	0
SMOC's programs and services meet community needs	50	44.4	5.6	0	0	0
SMOC's programs and services meet agency needs	55.6	38.9	5.6	0	0	0
SMOC's management is aligned with the agency goals	77.8	22.2	0	0	0	0
SMOC's decision making is deliberate and thoughtful	58.8	41.2	0	0	0	0
SMOC does a good job with fundraising and public relations	16.7	50	22.2	5.6	0	5.6



SMOC implements sound financial management practices	66.7	27.8	5.6	0	0	0
SMOC staff are adequately trained and supported to meet the agency's mission	44.4	38.9	16.7	0	0	0
Staff communication with the Board is good	55.6	38.9	0	5.6	0	0

SMOC 2024-26 Board Survey

### Individual Board Member Performance

In the self-assessment section of the survey, each Board member was asked to describe their performance as a Board member. It is encouraging to see that most members strongly agree that they have a strong understanding of SMOC's mission and goals (66.7%) and find serving on the Board to be a satisfying and rewarding experience (77.8%).

Over a third (44.4%) of members strongly agreed or agreed that they understand the organization's financial statements and over half (55.6%) of members strongly agree that they understand what is expected of them as a Board member. One member doesn't know what is expected of them as a member. These findings present an opportunity for further communication and education.

### Individual Board Member Performance (%)

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
I have a strong understanding of SMOC's mission and goals	66.7	33.3	0	0	0	0
I understand what is expected of me as a Board member	55.6	33.3	5.6	0	0	5.6
I find serving on the Board to be a satisfying and rewarding experience	77.8	11.1	11.1	0	0	0
I understand the organization's financial statements	44.4	44.4	5.6	5.6	0	0

SMOC 2024-26 Board Survey

## Board Performance

This section of the survey looked at the performance of the Board as a whole. Again, it is encouraging to see that the majority of members strongly agree that the Board works toward a safe and inclusive environment for Board members, staff, and clients (66.7%), uses the agency's mission and values to drive decision-making (61.1%), adequately reviews the results of the annual independent financial audit (66.7%), and adequately reviews the annual strategic objectives and budget for the agency (50%).

While 50% of members agree the board understands the needs of clients and how they may be changing, 38.9% strongly agreed and 11.1% were neutral. In the last board survey conducted for the FY 2021-2023 CARSP, 62.5% of members strongly agreed with this statement.

Three members disagreed that the Board adequately tracks progress towards meeting the goals and adequately reviews the agency's investment policies. These findings indicate areas for improvement.

### Board Performance (%)

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
The Board adequately reviews the agency's investment policies	22.2	38.9	16.7	16.7	0	5.6
The Board adequately reviews the results of the annual independent financial audit	66.7	22.2	5.6	5.6	0	0
The Board adequately reviews the annual strategic objectives and budget for the agency	50	38.9	5.6	5.6	0	0
The Board adequately tracks progress toward meeting the agency's strategic goals	38.9	44.4	0	16.7	0	0
The Board uses the agency's mission and values to drive decision-making	61.1	27.8	11.1	0	0	0
The Board adequately assesses and responds to changes in the agency's environment	52.9	35.3	0	5.9	0	5.9
The Board works toward a safe and inclusive environment for Board	66.7	22.2	5.6	5.6	0	0

members, staff, and clients						
The Board understands the needs of clients and how they may be changing	38.9	50	11.1	0	0	0

SMOC 2024-26 Board Survey

### Key Board Strengths

- Board members are invested, informed, and active in the organization and willing to give their time and expertise.
- Commitment to the agency and serving the community
- Board Members communicate with each other and offer support to agency
- The Board is made up of a diverse group who are passionate and driven to assure the agency lives up to its mission on all fronts
- Conscious effort to be inclusive regardless of gender, ethnicity, political beliefs, religious following, economic status or zip code
- Board and staff work well together to accomplish the agency's mission

### Suggestions To Improve Agency/Board Performance

- Improve and expand fundraising activities by better showcasing the benefits of the Agency's services within communities.
- Continue to seek diversity in new Board members; including age, culture, different backgrounds and professions.
- Increase staffing and pay across the Agency.
- Keep open communication between management and the Board
- Actively plan for long-term financial viability
- Provide Board member training on Agency operations
- Institute a formal security risk assessment to prepare for the risks of today's environment.

### Identified Challenges Facing Agency/Board

- Uncertainty of government and private funding
- Funding cutbacks when the needs for services are increasing

- Drawing more financial support from wider community served
- Employee recruitment and retention
- Need for more clinicians
- Equitable employee wages, particularly front-line workers
- Employee training and development
- Planning ahead for Board members reaching the end of their tenure
- Public relations and SMOC's image in the community
- Continuing transition from prior long-term President to current CEO

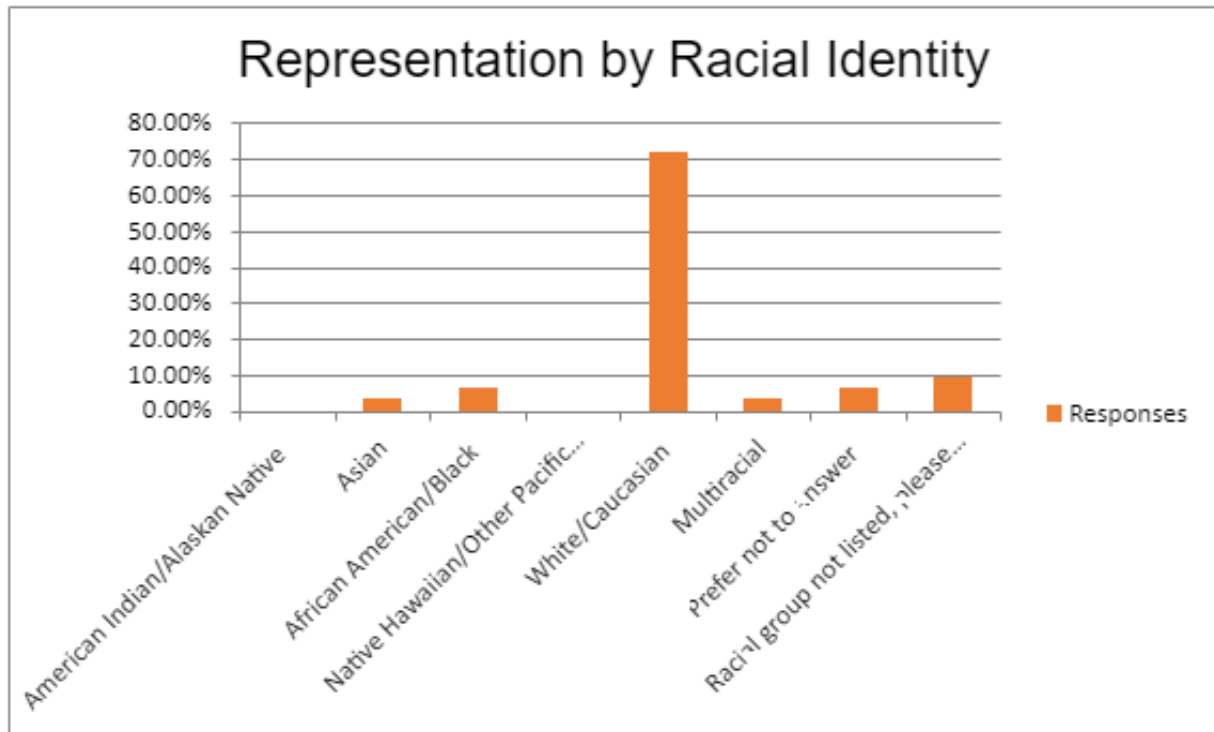
## **Volunteer Survey**

The Volunteer Survey focused on the experience of volunteers in the various programs where they supported staff. A total of 32 responses were received representing 13 programs (See Table Below).

### **Demographics**

53% of the volunteers fell within the age range of 24-44 years old, 28% aged 45-64, and 16% aged 65 and older. No volunteers were below the age of 18. Studies show that the generation of adults born between the years 1946 and 1964 (as of 2023, aged 59-79) is the generation most likely to volunteer making up 37% of active volunteers globally (Mrkonjić, 2023). In the context of the United States, most volunteers tend to fall in the age range of 35-44 (Mrkonjić, 2023). 75% of volunteers surveyed identify as female, and the remaining 25% identify as male showing a lack of gender diverse representation.

Racial identity data showed a lack of alignment in ratio with the communities served, as 72% of volunteers identify as white, 6% identifying as Black or African American, 6% identifying as Hispanic, 3% identifying as Asian, and 3% identifying as Brazilian.



SMOC 2024-26 Volunteer Survey

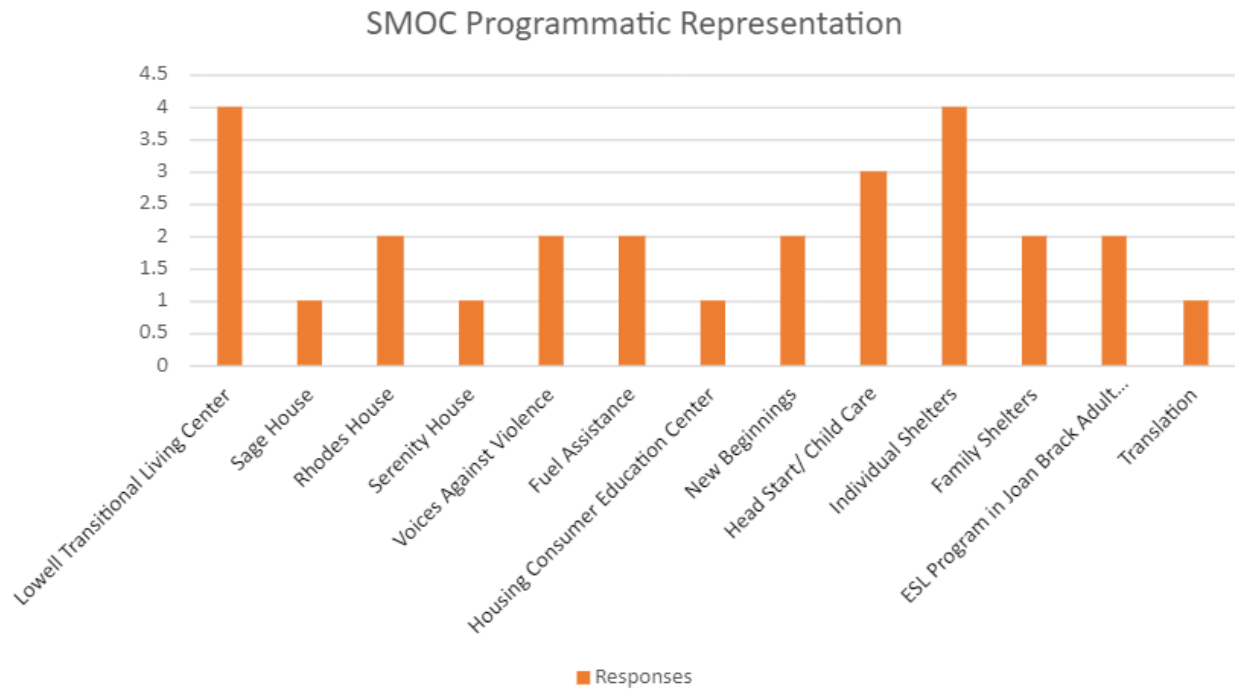
**Programmatic Representation**

This section of the Volunteer Survey focuses on the SMOC services through which the volunteers are engaged with. A combined 30% of volunteers held roles in Lowell Transitional Living Center (LTLC) and Individual Shelters; having the most currently serving volunteers at 4 each. The second highest count of volunteers occurs in Child Care/Head Start with 3 volunteers represented in the survey.

### Survey Submissions by Program

Program	Responses
Lowell Transitional Living Center	4
Sage House	1
Rhodes House	2
Serenity House	1
Voices Against Violence	2
Fuel Assistance	2
Housing Consumer Education Center	1
New Beginnings	2
Head Start/ Child Care	3
Individual Shelters	4
Family Shelters	2
ESL Program in Joan Brack Adult Learning Center	2
Translation	1
TOTAL	27

SMOC 2024-26 Volunteer Survey



## SMOC 2024-26 Volunteer Survey

### Work Environment

In this section, volunteers were asked to rate the work environment as it pertained to the SMOC program they volunteered in. Analyzing the timeline of a volunteer position from the beginning, 76.5% of volunteers expressed having a positive experience with the application process being simple and straightforward. 76.5% of volunteers feel they have and continue to receive the training and resources needed to succeed in their roles. Once in their programs, 94.1% of volunteers expressed feeling a part of collaborative team environment.

## Work Environment (%)

Details	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
SMOC's volunteer application process is simple and straightforward	35.2	41.1	5.8	0.0	0.0	17.6
The program I volunteer in effectively communicates with its volunteers	31.2	37.5	18.7	0.0	0.0	12.5
I can communicate concerns to management and the issues are addressed	23.5	52.9	0.0	5.8	0.0	17.6
Program staff are approachable and accessible and offer help when needed	35.2	41.1	5.8	0.0	0.0	17.6
There is a strong feeling of teamwork and cooperation in the program(s) I volunteer in	47.0	47.0	5.8	0.0	0.0	0.0
My volunteer work is valued by the program I volunteer in	35.2	41.1	17.6	0.0	0.0	5.8
Volunteer trainings give me the tools I need	41.1	35.2	11.7	0.0	0.0	11.7
My volunteer work has a positive impact on the program	29.4	47.0	5.8	0.0	0.0	17.6



SMOC succeeds at its mission of improving equity, wellness and quality of life for diverse individuals and families	29.4	41.1	11.7	0.0	0.0	17.6
I feel SMOC has created a safe, clean, healthy environment (New Question)	29.4	41.1	5.8	5.8	0.0	17.6

SMOC 2024-26 Volunteer Survey

### Takeaways:

- 76.5% of volunteers represented believe the volunteer application process is simple and straightforward compared to 87.5% in 2020.
- 68.8% of volunteers represented have experienced effective communication within their programs compared to 100% in 2020.
- 76.5% of volunteers represented believe their program staff are accessible compared to 100% in 2020.
- 76.5% of volunteers represented believe they can communicate concerns to management compared to 75% in 2020.
- 94.1% of volunteers represented believe there is a strong feeling of teamwork in their program compared to 85.6% in 2020.
- 94.1 % of volunteers represented believe there is strong cooperation in their program compared to 85.6% in 2020.
- 76.5% of volunteers represented feel that their work in the program is valued compared to 87.5% in 2020.
- 76.5% of volunteers represented believe training equipped them with the tools needed to perform their roles compared to 100% in 2020. More training opportunities and training resources were requested as an improvement to the volunteer experience.
- 76.5% of volunteers represented believe their work has a positive impact on the program compared to 62.5% in 2020.

- 70.6% of volunteers represented believe SMOC succeeds at its mission of improving equity, wellness, and quality of life for diverse individuals compared to 75% in 2020. 13% of survey participants responded that there are no additional needs of our clients, implying that SMOC is currently providing services to meet clients' needs. 81% of survey respondents did not provide any commentary.
- 70.6% of volunteers represented believe SMOC is a safe, clean, and healthy environment.

### **Top 3 Services SMOC Needs to Add**

1. Transportation
2. Group Activities
3. Computer Classes

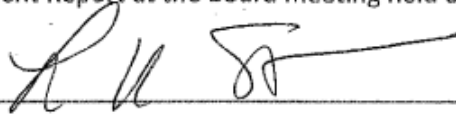
### **Top 3 Things SMOC Could Do to Improve the Volunteer Experience**

1. Provide increased training opportunities and resources.
2. Increase level of security at the front desk in 7 Bishop location.
3. Increased communication from program staff.

## 7. Formal Board Acceptance

The Board of Directors of the South Middlesex Opportunity Council reviewed and adopted the FY 2024-2026 Community Assessment Report at the Board meeting held on Tuesday, May 16, 2023, in Framingham, MA.

Larry Scult – Board Chair

A handwritten signature in black ink, appearing to be 'L Scult', written over a horizontal line.

Date: May 16, 2023

## 8. References

495/MetroWest Partnership - <https://www.495partnership.org/>

Esperanca.org

Mass.gov – Department of Public Health

MetroWest Health Foundation

Mrkonjić, E. (2023, March 14). Volunteering Statistics for 2023: How charitable are we? Team Stage. Retrieved April 6, 2023, from <https://teamstage.io/volunteering-statistics>

My SideWalk SMOC Community Needs Assessment dashboard:  
<https://dashboards.mysidewalk.com/community-needs-assessment-south-middlesex>

US Census Bureau American Community Surveys, 5-Year Estimates, 2017-2021

USDA Food and Nutrition Service - <https://www.fns.usda.gov/snap/changes-2023-benefit-amounts>

# Appendix 1: Community Needs and Customer Satisfaction Survey

## South Middlesex Opportunity Council FY 2024-2026 Community Assessment Report & Strategic Plan COMMUNITY NEEDS AND CUSTOMER SATISFACTION SURVEY

At South Middlesex Opportunity Council (SMOC), we work to improve the quality of life of people in the cities and towns served. By completing this survey, you will help improve our understanding of the needs of the community. Your valuable input will help us to not only enhance our current services, but to plan for the future. All of your individual responses are anonymous and there are no risks to participating or penalty for not participating. This survey should take about 5-7 minutes to complete. If you want more information about SMOC or would like to apply for services, please visit our website at <https://www.smoc.org>.

**SMOC PROGRAM (if applicable)** \_\_\_\_\_

### SECTION 1 - QUESTIONS ABOUT YOU

1. What city/town do you live in? \_\_\_\_\_ ZIP Code \_\_\_\_\_

2. What is your age? ☐ Under 18    ☐ 18-24    ☐ 25-44    ☐ 45-64    ☐ 65 and older

3. Are you a veteran? ☐ Yes    ☐ No

4. What is your gender? ☐ Man    ☐ Woman    ☐ Transgender Woman    ☐ Transgender Man  
☐ Gender Non-Binary    ☐ An identity not listed \_\_\_\_\_ ☐ Prefer not to answer

5. What is your sexual orientation? ☐ Straight    ☐ Gay/Same Gender Loving    ☐ Bisexual  
☐ Questioning/Unsure    ☐ An identity not listed \_\_\_\_\_ ☐ Prefer not to answer

6. What is your racial group? ☐ American Indian or Alaskan Native    ☐ Asian  
☐ African American or Black    ☐ Native Hawaiian/Other Pacific Islander    ☐ White/Caucasian  
☐ Multiracial    ☐ Racial group not listed \_\_\_\_\_ ☐ Prefer not to answer \_\_\_\_\_

7. Are you Hispanic/Latino? ☐ Yes    ☐ No

8. Are you Brazilian? ☐ Yes    ☐ No

9. What languages do you speak at home? Check all that apply:  
☐ English    ☐ Spanish    ☐ Portuguese    ☐ Russian    ☐ Haitian Creole    ☐ Chinese (including Mandarin, Cantonese and other dialects)    ☐ Arabic    ☐ Language not listed \_\_\_\_\_

10. How many people are in your household *including yourself*?  
0 – 17 years \_\_\_\_\_ 18 years or older \_\_\_\_\_

11. What is your household type? ☐ Single Person ☐ Single Parent/Female ☐ Single Parent/Male ☐ Two Parent Household with Children Living with you ☐ Two Adults/ No Children  
☐ Multi-Generational Household ☐ Household type not listed \_\_\_\_\_

12. What is your housing status? ☐ Own ☐ Rent ☐ Homeless ☐ Living with friends or family

13. If you rent, do you have a housing subsidy? ☐ Yes ☐ No ☐ N/A

14. Do you spend more than half of your income on rent/mortgage? ☐ Yes ☐ No ☐ N/A

15. What is the highest grade you completed in school?

☐ Less than 8<sup>th</sup> grade ☐ Some high school ☐ High school diploma or GED/HiSET  
☐ Some college ☐ Certificate ☐ Associate's degree  
☐ Bachelor's degree ☐ Graduate degree ☐ Vocational/trade school diploma

16. Do you have health insurance for yourself? ☐ Yes ☐ No

17. Do your children (age 26 or under) have health insurance? ☐ Yes ☐ No ☐ N/A

18. Do you have a Primary Care Provider (Doctor, Nurse Practitioner, etc.)? ☐ Yes ☐ No

19. Do you have a disability? ☐ Yes ☐ No

19a. If yes, is your disability documented? ☐ Yes ☐ No

20. Do you use any Assistive Technologies/Aids such as screen readers, screen magnification software, speech input software, wheelchair/walker, etc.? ☐ Yes ☐ No

21. Please check ALL the benefits your household receives: ☐ TAFDC ☐ SSI/SSDI  
☐ Unemployment ☐ EAEDC ☐ Social Security Retirement ☐ WIC  
☐ SNAP (Food Stamps) ☐ Veteran's Benefits ☐ None of these

22. What is your household's monthly cash income before taxes?

- ☐ My household has no cash income
- ☐ Under \$2000/month (or Under \$24,000/year)
- ☐ \$2000 - \$4000/month (or \$24,000 - \$48,000/year)
- ☐ \$4001 - \$6000/month (or \$48,001 - \$72,000/year)
- ☐ Over \$6000/month (or Over \$72,000/year)

**Include:**

*Wages, TANF, Social Security, Disability Benefits, etc.*

**Do not Include:**

*Food Stamps (SNAP), WIC, MassHealth, Other Public Health Insurance, Fuel Assistance, etc.*

## SECTION 2 – QUESTIONS ABOUT COMMUNITY NEEDS

1. What do you think are the top needs impacting people in your community?	Check ALL that apply ✓
Child care	
After school / summer programs for children and youth	
Jobs	
English classes	
Training or education to get a job or better job	
Elder services/ Senior Care	
Affordable housing	
Ability to pay heating or utility bills	
Access to food	
Health insurance	
Mental health services	
Drug and alcohol treatment services	
Domestic violence services	
Safer neighborhood	
Transportation	
Ability to budget	
Legal assistance	
Need for clothing	
Financial emergencies	
Immigration issues	
Discrimination issues	
Access to technology / internet	
Family planning services	
HiSET/GED Classes	

2. Compared to before the COVID-19 pandemic, are you and your family now better off, worse off, or about the same? ☐ Better off ☐ Worse off ☐ About the same
- 2a. How has Covid-19 impacted you and/or your family? Select all that apply. ☐ Lost loved ones ☐ Lost my job ☐ Poor health ☐ Food insecurity ☐ Increased anxiety/uncertainty ☐ Weakened my personal relationships ☐ Other, specify \_\_\_\_\_
3. Are you able to pay your bills on time each month? ☐ Yes ☐ No ☐ Unsure
- 3a. IF NO**, have you had to borrow money from any of the following sources? Please check all that apply:
- ☐ Friends and/or Family ☐ Credit Cards ☐ Pay Day Loans ☐ Other, specify \_\_\_\_\_
4. Do you currently have at least \$500 set aside for emergencies? ☐ Yes ☐ No ☐ Unsure
5. What keeps you or your family from feeling more financially stable? Check ALL that apply:
- ☐ I work full-time but my pay doesn't cover my expenses
- ☐ I can only find part-time/seasonal work
- ☐ I can't find a job
- ☐ I or my family have debt
- ☐ I need more education or training to get work or better work
- ☐ Child care is too expensive and/or interferes with my ability to work
- ☐ Child care is not consistently available in my area
- ☐ My living expenses (rent/mortgage, heat, food) are too high
- ☐ I can't find housing that I can afford
- ☐ I or a family member have had a lot of medical expenses that weren't covered by insurance
- ☐ I don't have reliable transportation
- ☐ I am on a fixed income (Social Security, pension, etc.), and my income is limited
- ☐ I lost eligibility for benefits (i.e. SNAP, MassHealth, DTA)
- ☐ Someone in my household is spending money on things we don't need, so there isn't enough left for other expenses
- ☐ Someone else controls the money and makes decisions I don't agree with



- ☐ I am or a family member is struggling with addiction/substance use
- ☐ I or a family member am struggling with mental health issues
- ☐ I don't feel safe in my home
- ☐ I don't feel safe in my community
- ☐ I don't have reliable elder care which interferes with my ability to work
- ☐ There is a language barrier keeping me from talking to employers
- ☐ I have serious physical/mental health concerns
- ☐ Caring for a child or other family member with disabilities keeps me from working
- ☐ My immigration status keeps me from finding consistent work with good pay

☐ Other: \_\_\_\_\_

☐ Not applicable

6. Please select which of the following best describes your family's current food situation:

- ☐ Has little to no food and most food is provided through soup kitchens, community meals, food pantries, friends and relatives
- ☐ Has less than one week's food available
- ☐ Has more than one week's food available
- ☐ Able to obtain adequate food without relying on soup kitchens, community meals, food pantries, friends and relatives

7. How many times in the past year did you use a food pantry, soup kitchen, community meal, etc.?

- ☐ None    ☐ 1-4    ☐ 5-8    ☐ 9-12    ☐ More than 12 times

### **SECTION 3 - QUESTIONS ABOUT YOUR HEALTH CARE**

1. How many times have you used the Emergency Room in the past year? \_\_\_\_\_

2. When was your last physical/check-up?    ☐ Within the last year    ☐ 1-2 years ago  
☐ More than 2 years ago

3. Have you seen a dentist in the last year?    ☐ Yes    ☐ No

4. In the past year have you or someone you know struggled with alcohol/substance use?    ☐ Yes    ☐ No

5. If you or someone you know need treatment for alcohol/substance use, would you know where to get support?    ☐ Yes    ☐ No

6. Do you feel lonely/ isolated?    ☐ Yes    ☐ No    ☐ Sometimes    ☐ Rarely

#### **SECTION 4 - QUESTIONS ABOUT YOUR SAFETY**

1. Have you or someone in your household suffered physical or emotional abuse, or sexual assault, during the past year? ☐ Yes ☐ No
2. If yes, who abused you or your household member (check all that apply)? ☐ A stranger ☐ Boyfriend/  
Girlfriend ☐ Your spouse ☐ Your child ☐ Your parent(s) ☐ Other relative ☐ Friend ☐  
Roommate  
☐ Other (please specify) \_\_\_\_\_
3. Have you needed help from law enforcement during the past year? ☐ Yes ☐ No  
If yes, what was the reason? ☐ Personal safety ☐ Other emergency ☐ To stop the nuisance of a  
neighbor ☐ Help with something personal (such as lost/stolen item, car accident, etc.)
4. Do you feel comfortable asking law enforcement for help? ☐ Yes ☐ No

If no, why \_\_\_\_\_

#### **SECTION 5 – QUESTIONS ABOUT COMMUNICATION WITH SERVICE PROVIDERS**

1. Which of the following would you use for personal/direct communications with SMOC service providers (e.g. appointments, questions for case manager, etc.)? Check all that apply.  
☐ Walk-ins ☐ Phone ☐ Email ☐ Text ☐ Postal Mail ☐ Other (please specify)  
\_\_\_\_\_
2. Which of the following would you prefer for receiving general messages from SMOC (e.g. events, programs, general updates) with SMOC service providers? Check all that apply.  
☐ Walk-ins ☐ Phone ☐ Email ☐ Text ☐ Twitter ☐ Facebook ☐ Instagram  
☐ SMOC Website
3. Do you have any concerns about privacy and confidentiality? ☐ Yes ☐ No
- If Yes, please check all that apply:  
☐ I don't trust how my information will be used  
☐ I don't trust the person collecting my information  
☐ I'm afraid of identity theft  
☐ I'm afraid that I might be discriminated against/stigmatized based on my identity

---

#### **SECTION 6 – QUESTIONS ABOUT CUSTOMER SATISFACTION**

1. Did SMOC help you or anyone in your household in the past 12 months? ☐ Yes ☐ No

***IF YES, PLEASE PROCEED TO QUESTION 2. IF NO, YOU HAVE REACHED THE END OF THE SURVEY AND MAY STOP HERE. THANK YOU FOR YOUR TIME. WE APPRECIATE IT!***

2. Which SMOC services have you used in the past 12 months? Check all that apply:

- ☐ Fuel Assistance / Weatherization
- ☐ Head Start/ Child Care / Afterschool
- ☐ Rental Assistance/Section 8
- ☐ Counseling
- ☐ WIC
- ☐ Domestic Violence Services
- ☐ Rape Crisis/ Sexual Assault Services
- ☐ SMOC Housing
- ☐ Homeless Services
- ☐ Career Center/Employment Services/Education
- ☐ Tax Prep/VITA
- ☐ HCEC for RAFT, HomeBASE, First Time Homebuyers Program, Housing Assistance
- ☐ Something Else (If so, please feel free to explain what service you used): \_\_\_\_\_

3. How did you learn about SMOC? ☐ Another person told me about it ☐ Staff at another agency or organization referred me ☐ I found SMOC's website ☐ I saw a flyer or poster ☐ I heard about it on TV or radio ☐ Other \_\_\_\_\_

4. Please help us improve our provision of services by answering the following questions based on your most recent experience at SMOC:

- |  |   |
|--|---|
| 1. When I came into the building, I felt welcomed.           | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 2. I was helped in a timely manner.                          | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 3. I was treated with respect and dignity.                   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 4. My privacy was respected.                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 5. I felt safe and comfortable sharing my information        | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 6. I got the information/services I needed.                  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 7. I was satisfied with the services I received.             | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 8. I felt discriminated against due to my identity.          | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 9. I feel like SMOC acknowledged my diverse background.      | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 10. I was informed about other SMOC or community services.   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 11. I would recommend this program to friends and/or family. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 12. The building was clean.                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |

- 5. Please name one thing you liked the **most** about the service(s) you received
- 6. Please name one thing you liked the **least** about the service(s) you received
- 7. What is one way you think that SMOC could improve service delivery?
- 8. What other help would you like SMOC to offer in the future?

## Appendix 2: Community Organizations Survey

**South Middlesex Opportunity Council**  
**FY 2024-2026 Community Assessment Report & Strategic Plan**  
**COMMUNITY ORGANIZATIONS SURVEY**  
<https://www.surveymonkey.com/r/orgsurvey2023>

**Organization Name:**

**Your name:**

**Title / Position:**

**Address:**

**Tel:**

**E-mail:**

1. Please describe the population(s) served by your organization, please check all that apply:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Children (17 & Under)                           | <input type="checkbox"/> Elders (60+)                     | <input type="checkbox"/> Undocumented  |
| <input type="checkbox"/> Families  | <input type="checkbox"/> People w. Disabilities           | <input type="checkbox"/> Homeless      |
| <input type="checkbox"/> Young Adults (18-24)                            | <input type="checkbox"/> People w. Mental Health issues   | <input type="checkbox"/> Single Adults |
| <input type="checkbox"/> Veterans  | <input type="checkbox"/> People w. Substance Use Disorder |  |
| <input type="checkbox"/> Immigrants                                      | <input type="checkbox"/> Refugees                         | <input type="checkbox"/> LGBTQ+        |
| <input type="checkbox"/> Other Special Populations, please specify _____ |   |  |

2. Cities and towns in your agency's service area, please check all that apply:

- |  |                                     |                                      |                                       |                                    |
|--|-------------------------------------|--------------------------------------|---------------------------------------|------------------------------------|
| <input type="checkbox"/> Ashland                     | <input type="checkbox"/> Bellingham | <input type="checkbox"/> Framingham  | <input type="checkbox"/> Holliston    | <input type="checkbox"/> Hopkinton |
| <input type="checkbox"/> Marlborough                 | <input type="checkbox"/> Natick     | <input type="checkbox"/> Northbridge | <input type="checkbox"/> Southborough | <input type="checkbox"/> Wayland   |
| <input type="checkbox"/> Other, please specify _____ |                                     |                                      |                                       |                                    |

3. Nature of service you provide, please check all that apply:

- |                                       |  |                                      |  |  |
|---------------------------------------|--|--------------------------------------|--|--|
| <input type="checkbox"/> Housing      | <input type="checkbox"/> Financial           | <input type="checkbox"/> Childcare   | <input type="checkbox"/> Transportation              | <input type="checkbox"/> Behavioral Health |
| <input type="checkbox"/> Medical      | <input type="checkbox"/> Government Benefits | <input type="checkbox"/> Training    | <input type="checkbox"/> Workforce development       |  |
| <input type="checkbox"/> Philanthropy | <input type="checkbox"/> Public Safety       | <input type="checkbox"/> Education   | <input type="checkbox"/> Legal                       | <input type="checkbox"/> Language/ESL      |
| Classes                               | <input type="checkbox"/> Nutrition           | <input type="checkbox"/> Faith-based | <input type="checkbox"/> Other, please specify _____ |  |

4. What is the estimated % of your clients with incomes below the median household income?

Please see the table below if needed.

- |  |                                    |                                    |                                     |
|--|------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Less than 25% | <input type="checkbox"/> 25% - 49% | <input type="checkbox"/> 50% - 74% | <input type="checkbox"/> 75% - 100% |
|--|------------------------------------|------------------------------------|-------------------------------------|

Town	Median Household Income
Ashland	\$118,348
Bellingham	\$103,258
Framingham	\$86,322
Holliston	\$137,589
Hopkinton	\$172,683
Lowell	\$62,196
Marlborough	\$83,469
Milford	\$86,203
Natick	\$155,652
Northbridge	\$85,503
Southborough	\$156,845
Springfield	\$41,571
Waltham	\$103,498
Wayland	\$192,632
Worcester	\$51,647

Source: US Census Bureau, ACS 5-year 2016-2020

5. Using your own knowledge and experience in working with the population of the area, please rate what you believe to be the level of need in the greater MetroWest community:

TOPIC	High	Moderate	Low	None	Not Applicable
<b>HOUSING NEEDS</b>					
Home ownership opportunity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rental Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finding affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Organizing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>HEALTH CARE NEEDS</b>					
Health insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assistance with applying for and/or maintaining health insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assistance with cost of health insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assistance in paying for prescription drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Translation services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance use disorder services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acute care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Primary health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Culturally sensitive health care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family planning services					

TOPIC	High	Moderate	Low	None	Not Applicable
<b>FINANCIAL/ WORKFORCE NEEDS</b>					
Good paying jobs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elder Care/Senior Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation/Public Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eligibility for Transitional Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Money for basic needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial Literacy/Budgeting Classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Debt management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult Education/GED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer skills training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English as a second language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy/Fuel Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rep Payee services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Banking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>CHILD CARE NEEDS</b>					
Affordable child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting skills and support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After-school child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summer child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Off hours child care					
Pre-school/ Head Start	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Voucher application assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>NUTRITION NEEDS</b>					
Nutrition/food assistance programs (SNAP, WIC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food pantry resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nutrition Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to affordable healthy food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to fresh fruits and vegetables					
<b>DOMESTIC VIOLENCE/ SEXUAL ASSAULT SERVICE NEEDS</b>					
Domestic violence services for women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic violence services for men	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic violence services for children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TOPIC	High	Moderate	Low	None	Not Applicable
Treatment for offenders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention services/community education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood crime/safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workplace safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Violent crime victim services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TRANSPORTATION</b>					
Access to public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordability of public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Car ownership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Please describe one way you could help SMOC or SMOC could help you meet these needs?

7. What is the top area of overlap / duplication of services you identify?

8. What other needs would you identify? Please list the top 3.



## Appendix 3: Focus Group Questions

### I. Food

Do you receive SNAP and/or WIC benefits? Do they last the entire month?

What challenges have you faced enrolling and/or accessing or using these benefits?

What happens when you run out of SNAP and/or WIC benefits? What do you do to eat?

Do you use food pantries or community meals programs/centers, and/or food bank when you run out of food and/or benefits or do you utilize them all the time?

Do you know where to access food in emergency situations?

What would help you better access the foods you need? (i.e. more grocery stores accepting SNAP, more fruits and vegetables at convenience stores, etc.)

What types of food do you purchase? – (Food Selection)

What influences your food choices? (messaging, and what are they?)

What prevents you from getting to community meals programs/centers, and/or food banks?

### II. Health

Do you have health and/or dental insurance?

Does your insurance cover all of your needs? For example, prescriptions, medical deductibles, etc.

Are you aware of less expensive medical care options/cost saving prescription options?

Do you have a Primary Care Physician (PCP)?

How satisfied are you with the care you receive at your doctor's office?

How affordable is the healthcare you/your family receive?

Do untreated mental health conditions exist in your community?

Do you have access to mental health or substance use services?

Is substance use a problem in your community?

What do you think is the cause for substance use disorder in your community?

What do you think can be done to reduce the prevalence of substance use disorder in your community?

### **III. Housing**

Are you spending more than 30% of your income on housing?

Do you hold a housing subsidy?

Do you have to make choices about what bills you pay due to housing costs?

*Guidance: Are you not paying for \_\_\_\_\_ to pay for \_\_\_\_\_ or*

*Are you skipping payment for \_\_\_\_\_ to pay for housing*

Do you need additional services to pay utilities after housing costs are paid?

Do you have renter's insurance? If not, can you afford it?

\*Have you ever been evicted? If so, has it affected your ability to get housing?

*\*Question only applies to non-housing programs*

### **IV. Employment / Education**

Are you employed, unemployed, or underemployed?

If you're unemployed, what is the reason?

How can SMOC help you get a job?

If employed, how do you feel about your job? What do you like/what do you dislike? Pay (paid a living wage)/hours/travel time, etc.

What is your dream job?

What is preventing you from obtaining that job?

What types of educational services would assist you in achieving your dream job?

How many jobs have you had in the past year? If you have had more than one job, why?

### **V. Transportation**

What is your primary mode of transportation? Examples: Walk, public transportation, car, friend's car, Uber, etc.?

Is it reliable?

Is it affordable? For example, insurance, gas, repairs, other costs, etc.

If you use public transportation, is it accessible in your neighborhood/community? For example, within walking distance, routes, accessible to people with physical disabilities, fares, etc.

Would a transportation voucher be helpful?

**VI. Community Strengths/ Assets/ Resources**

Do you feel safe in your housing or neighborhood? Explain

What resources do you have in your neighborhood/community? For example: health, resources, housing, childcare, utilities, assistance with rent-arrears, transportation, employment, job training, language assistance, food banks, playgrounds, community pool, etc.

Are resources accessible in your neighborhood/community?

What are the challenges you face in accessing these resources?

## Appendix 4: Key Stakeholder Interview Guide

KEY STAKEHOLDER:

INTERVIEWER:

DATE:

**A. Top 3 needs/gaps in their community/service area.**

**B. Community-level resources available to address these needs.**

Attempts made so far to address the needs and impact of such attempts in your community

Reasons why these attempts have failed/succeeded

**C. Ideas for collaboration/partnerships/service integration/etc.**

**D. Other**

## Appendix 5: Board Survey and Self-Assessment

### FY 2024-2026 Community Assessment Report & Strategic Plan BOARD OF DIRECTORS SURVEY & SELF ASSESSMENT

<https://www.surveymonkey.com/r/boardsurvey24-26>

Thank you for participating in the SMOC Board Survey and Self-Assessment. As an agency, it is important for us to seek input and feedback from Board members about the performance of the agency and the Board. We believe that board member input is critical to understanding how SMOC is meeting the needs of the community and our mission. All surveys are completely anonymous.

1. How long have you served on the SMOC Board?

☐ Less than 1 year    ☐ 1 to 4 years    ☐ 5 to 9 years    ☐ 10 years or longer

2. What sector do you represent on the Board?

☐ Public    ☐ Low-Income Individuals and Families/Consumers    ☐ Private  
☐ I'm not sure

3. What is your age?

- a. 18-24
- b. 25-44
- c. 45-64
- d. 65 and older

4. How do you identify in terms of gender?

- a. Male
- b. Female
- c. Transgender
- d. Non-binary
- e. Identity not listed, please specify
- f. Prefer not to answer

5. How do you identify in terms of race?

- a. American Indian/Alaskan Native
- b. Asian
- c. African American/Black
- d. Native Hawaiian/Other Pacific Islander
- e. While/Caucasian
- f. Multiracial
- g. Racial group not listed, please specify\_\_\_\_\_
- h. Prefer not to answer

**Please rate the following statements.**

**5. Questions on Agency Performance**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't know
SMOC is successful at meeting its mission						
SMOC has a strong understanding of community needs						
SMOC's programs and services meet client needs						
SMOC's programs and services meet community needs						
SMOC's programs and services meet agency needs						
SMOC's management is aligned with the agency goals						
SMOC's decision making is participatory and inclusive						

SMOC does a good job with fundraising and public relations						
SMOC implements sound financial management practices						
SMOC staff are adequately trained and supported to meet the agency's mission						
Staff communication with the Board is good						

#### 6. Questions on Individual Performance

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't know
I have a strong understanding of SMOC's mission and goals						
I understand what is expected of me as a Board member						
I find serving on the board to be a satisfying and rewarding experience						
I understand the organization's financial statements						

**Questions on Board Performance**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't know
The Board adequately reviews the agency's investment policies.						
The Board adequately reviews the results of the annual independent financial audit.						
The Board adequately reviews the annual strategic objectives and budget for the agency.						
The Board adequately tracks progress toward meeting the agency's strategic goals.						
The Board uses the agency's mission and values to drive decision-making.						
The Board adequately assesses and responds to changes in the agency's environment.						
The Board works toward a safe and inclusive environment for board members, staff, and clients.						
The Board understands the needs of clients and how they may be changing.						



7. Please provide context/comments for your ratings here:

---

---

---

8. Please describe the top strength of the agency:

---

9. Please describe the top strength of the board:

10. Please describe one change the board/agency can make to improve its performance in the next 1-3 years?

---

11. What would you identify as a major challenge facing the agency or the board?

---

## Appendix 6: Staff Survey

### FY 2024-2026 Community Assessment Report & Strategic Plan STAFF SURVEY

<https://www.surveymonkey.com/r/staffsurvey24-26>

Thank you for participating in the SMOC staff survey. As an agency, it is important that you, our employees, help to identify what factors contribute to or impede a client's progress. We believe that staff input is critical to understanding how SMOC is meeting the needs of the community and our mission. All surveys are completely anonymous.

1) Which Region of the Commonwealth do you work out of?

- a. Metro West
- b. Central Massachusetts (Worcester Area and North County)
- c. Lowell
- d. Western Massachusetts (Springfield Area)

2) Please circle the letter that best describes your role in SMOC:

**a. Direct Care Staff-** *This may include Case Managers, Case Management Supervisors, Teachers/Child Care, Housing Stabilization, Program Advocates, Triage Workers, Counselors, Employment Specialists, Fuel Assistance Specialists, and Medical Team*

**b. Administration Staff-** *This may include Accountants, Analysts, Office Workers, Receptionist, Assistants, and Financial Services*

**c. Support and Property Staff-** *This may include Intake Specialists, Maintenance Technicians, Property Managers, Program Coordinators, Warehouse, Food Pantry, Drivers, Program Representatives or Inspectors, Energy Auditors*

**d. Variable Relief-** *This may include Relief, Admin and Labor*

**e. Management Level-** *This may include Program Directors, Program Managers, Component Directors, Senior Staff*

3) What is your age?

- a. Under 18
- b. 18-24
- c. 25-44
- d. 45-64
- e. 65 and older

4) How do you identify in terms of gender?

- a. Male
- b. Female
- c. Transgender
- d. Non-binary
- e. Gender not listed, please specify\_\_\_\_\_
- f. Prefer not to answer

5) How do you identify in terms of race?

- a. American Indian/Alaskan Native
- b. Asian
- c. African American/Black
- d. Native Hawaiian/Other Pacific Islander
- e. While/Caucasian
- f. Multiracial
- g. Racial group not listed, please specify\_\_\_\_\_
- h. Prefer not to answer

6) Please rate the following as it pertains to your **program environment**:

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Don't know</b>
My manager is approachable, accessible, and offers help when needed						
I feel supported by my manager						
Within my program/ department, our clients achieve success in improving the conditions of their lives after working with SMOC						
I can positively impact service delivery at SMOC						
Staff trainings that are offered give me the tools to improve my job performance						
I can communicate concerns to management and the issues are addressed						
I am satisfied in my current position						
I enjoy my working relationship with fellow employees						
I understand the role of different programs/departments						

I have opportunity for advancement or promotion						
I receive regular feedback and supervision						
I have a manageable workload within my position						

7) Please comment on why you rated something as disagree or strongly disagree\_\_\_\_\_

8) Do you feel there are client needs we are not addressing, if so please specify\_\_\_\_\_

9) Please rate the following as it pertains to the **agency environment**:

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Don't know</b>
SMOC effectively communicates with its employees						
The benefits offered (vacation, sick, holidays, dental & health insurance, 403b) are good						
There is a strong feeling of teamwork and cooperation in SMOC						
My work is valued by SMOC						
SMOC encourages work/life balance						
I feel safe at work						
I have the tools needed to assist clients or get my job done						
I have a good understanding of SMOC's mission						

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Don't know</b>
The range of SMOC services meets our client needs						
SMOC is successful in our core mission						
Management treats staff with dignity and respect.						
Management is open to receiving feedback and suggestions.						
SMOC adequately handles complaints and grievances.						
SMOC administers policies and practices in a consistent manner						

10) Please comment on why you rated something as disagree or strongly disagree\_\_\_\_\_

11) Are there any services that you would like to see added? If so, please specify\_\_\_\_\_

12) Please list the top change that SMOC could make to improve your work experience:

\_\_\_\_\_

13) Please rate your experience with **COVID-19 at SMOC:**

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Don't know</b>
I feel SMOC has created a safe, clean, healthy environment						
I understand SMOC's COVID-19 protocols						
I know where to find SMOC's COVID-19 protocols						
SMOC has helped me gain access to COVID-19 and/or Flu vaccines						

14) Please comment on why you rated something as disagree or strongly disagree\_\_\_\_\_

## Appendix 7: Volunteer Survey

### FY 2024-2026 Community Assessment Report & Strategic Plan VOLUNTEER SURVEY

<https://www.surveymonkey.com/r/volunteersurvey24-26>

Thank you for participating in the SMOC Volunteer Survey. As an agency we feel it's important that you, our volunteers, help to identify what factors contribute to or impede the volunteer experience. We believe that volunteers' input is critical to understanding how SMOC is meeting the needs of the community and their mission. All surveys are completely anonymous and confidential.

1. Which SMOC Programs have you volunteered in during the past year? Please check all that apply.

<input type="checkbox"/> LTLC	<input type="checkbox"/> Sage House	<input type="checkbox"/> OPCS
<input type="checkbox"/> GWHC	<input type="checkbox"/> Community Kiln	<input type="checkbox"/> Rhodes House
<input type="checkbox"/> VAV	<input type="checkbox"/> Serenity House	<input type="checkbox"/> Fuel Assistance
<input type="checkbox"/> HCEC	<input type="checkbox"/> WIC	<input type="checkbox"/> New Beginnings
<input type="checkbox"/> Head Start/Child Care		
<input type="checkbox"/> Workforce Development (please specify): _____		
<input type="checkbox"/> Individual Shelters (please specify): _____		
<input type="checkbox"/> Family Shelters (please specify): _____		
<input type="checkbox"/> Other (please specify): _____		

2. What is your age?

- a. Under 18
- b. 18-24
- c. 25-44
- d. 45-64
- e. 65 and older

3. How do you identify in terms of gender?

- a. Male
- b. Female
- c. Transgender
- d. Non-binary
- e. Gender not listed, please specify \_\_\_\_\_
- f. Prefer not to answer

4. How do you identify in terms of race?

- a. American Indian/Alaskan Native



- b. Asian
- c. African American/Black
- d. Native Hawaiian/Other Pacific Islander
- e. White/Caucasian
- f. Multiracial
- g. Racial group not listed, please specify\_\_\_\_\_
- h. Prefer not to answer

5. Please rate the following as it pertains to your volunteer experience:

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't know
SMOC's volunteer application process is simple and straightforward						
Volunteer trainings give me the tools I need						
The program I volunteer in effectively communicates with its volunteers						
I can communicate concerns to management and the issues are addressed						
Program staff are approachable and accessible and offer help when needed						
There is a strong feeling of teamwork and cooperation in the program(s) I volunteer in						
My volunteer work is valued by the program I volunteer in						
My volunteer work has a positive impact on the program						
SMOC succeeds at its mission of improving equity, wellness and quality of life for diverse individuals and families						
I feel SMOC has created a safe, clean, healthy environment						

6. Please comment on why you rated something as disagree or strongly disagree\_\_\_\_\_

7. Do you feel there are client needs we are not addressing? If so, please specify\_\_\_\_\_

8. Do you feel there are any services that you would like to see added? If so, please specify

\_\_\_\_\_

9. What impacted you most during your volunteer experience at SMOC?

---

10. Please list one thing that SMOC could do to improve your volunteer experience:\_\_\_\_\_

## Appendix 8: Respondents to Community Organizations Survey by Sector

### **Non-Profit**

- A Place To Turn Food Pantry
- Advocates Inc.
- Brazilian American Center Inc.
- Daniel's Table
- Family Promise MetroWest
- Hoops and Homework
- Lovin' Spoonfuls Food Rescue
- MassHire Career Connections
- MetroWest Center for Independent Living
- MetroWest Health Foundation
- Natick Service Council
- New England Aftercare Ministries, Inc.
- Programs For People, Inc.
- Springwell, Inc.
- United Way of Tri-County
- Wayside Youth & Family Support Network

### **Faith Based**

- Greater Framingham Community Church
- Temple Shir Tikva, Wayland
- The Plymouth Church in Framingham
- The Salvation Army, Framingham

### **Local Government**

- Access Framingham TV
- Bellingham Council on Aging
- City of Framingham

- Framingham Council on Aging/Callahan Center
- Framingham Housing Authority
- Framingham Police Department
- Holliston Senior Center
- Hopkinton Health Department
- Marlborough Council on Aging
- Natick Community Senior Center
- Natick Health Department
- Northbridge/Council on Aging
- Wayland Council on Aging
- Wayland Public Health Department

#### **State Government**

- Department of Developmental Services
- Massachusetts Rehabilitation Commission
- State Representative Carmine Gentile
- State Representative Jack Lewis

#### **For-Profit Business or Corporation**

- Hopkinton Chamber of Commerce

#### **School Districts**

- Framingham Public Schools

#### **Institutions of Post-Secondary Education/Training**

- Framingham State University

#### **Health Service Organizations**

- Edward M. Kennedy Community Health Center
- Program RISE @ JRI Health
- The Latino Health Insurance Program