Even when rapid response is required, we must appreciate the strength of these communities AND understand their economic capacity to recover from the threat COVID 19 poses.

There are 3 primary factors that can identify communities whose health is especially vulnerable to an economic crisis during COVID 19 response. This tool can be used as a reference for understanding these factors as they present in the data. Where there is segregation, these inequities are profound and persistent.

Income, Net Worth, and Asset Poverty are key factors in determining how vulnerable a household is to an economic crisis and how difficult bouncing back may be.

Income is the money regularly received for work or investments. A high risk factor is more than 20% of an area’s households making within 200% of the federal poverty level.

Net Worth is the total dollar value of all a household’s assets subtracted by the total debts and liabilities. A high risk factor is having less than 50% of an area’s households owning the home they live in.

Asset Poverty is the inability to access the resources to cover 3 months of expenses. A high-risk factor is 16% or more of an area’s residents reporting not having the resources to replenish food in the previous 12 months.

Throughout the County, the relationship between being 65 years or older and economic vulnerability is complex. Elders tend to have more resources accumulated than younger community members.

However, the health risks of COVID 19 to elders are significant, and the confluence of age with the other risks also must be noted.

A high risk factor is having more than 14% of residents being 65 or older.
## Key Questions for Equity Impact Awareness

Progress must be swift and this is an imperfect tool. Nevertheless, it aims to identify communities that are extremely vulnerable to prolonged hardship with less resources to recover in an economic crisis. These are not the only considerations in reviewing sites, however these questions will highlight the inequities of risks in the County by race, economics, and age.

<table>
<thead>
<tr>
<th>Question</th>
<th>Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does this community’s Black, American Indian &amp; Alaska Native and Latinx residents together exceed 10%? 20% of residents?</td>
<td></td>
</tr>
<tr>
<td>Are more than 20% of this community’s household incomes within 200% of the federal poverty level (330% of households)?</td>
<td></td>
</tr>
<tr>
<td>Do less than 50% of this community’s households own the home they live in?</td>
<td></td>
</tr>
<tr>
<td>Have more than 16% of residents in this community experienced food insecurity in the last year?</td>
<td></td>
</tr>
<tr>
<td>Are more than 14% of residents of this community 65 years or older?</td>
<td></td>
</tr>
</tbody>
</table>

*The thresholds were chosen to highlight extreme economic conditions and to locate the 25% of areas with the most risk.

**The federal poverty threshold for a family of 4 in 2019 was $26,370.
This column **BELOW** lists the 48 Health Reporting Areas (HRA) in King County.

The higher (>25%) threshold in the **Race** indicator, the higher (>30%) **Income** indicator and the **Asset Poverty** indicator are scored as **2 POINTS**. The lower (>10%) **Race** indicator, the lower (>20%) **Income** indicator, the **Home Ownership** indicator and the **Age** indicator are scored as **1 POINT**.

The column with the horizontal red, pink and yellow bars represents each HRA’s total scoring of the risk indicators. The colors of the bars correspond to the **Impact Awareness Map** color gradients.

The highest possible total for each area is 8 points and determines the areas with the highest risk for prolonged impact with the least amount of resources to recover. Areas that do not meet the risk threshold in any of these

*Washington State Office of Financial Management, Forecasting Division, single year intercensal estimates 2001-2019, Community Health Assessment Tool (CHAT)

**City Health Profiles 2019, King County Public Health, Data from the American Community Survey, US Census Bureau

***Behavioral Risk Factor Surveillance Systems 2013, Washington State Department of Health, Center for Health Statistics