Summary
The Office of Chief Financial Officer presents this report on the impact of the COVID-19 public health emergency on the residents of Wyandotte County and Kansas City, Kansas to provide information to policy makers as they evaluate the changes in the needs of the community, as evidenced by data demonstrating the disproportionate impacts of COVID-19 on certain populations, geographies, and economic sectors. The American Rescue Plan Act (ARPA) takes into consideration these disproportionate impacts by recognizing a broad range of eligible uses to encourage assistance by local governments to support the families, businesses, and communities hardest hit by the COVID-19 public health crisis.

Much of the information in the following sections of this report concerning the impact of the pandemic on the nation is from the American Rescue Plan Act (ARPA)’s State and Local Fiscal Recovery Fund’s (SLFRF) Interim Final Rule, published May 10, 2021, at https://home.treasury.gov/system/files/136/FRF-Interim-Final-Rule.pdf. [Footnotes are found at the end of this report.]

COVID-19 Pandemic Public Health Emergency

Since January 2020 when the coronavirus 2019 (COVID-19) was discovered, the disease has infected over 33.7 million and killed over 605,500 Americans. Since then, every part of life has been impacted, from social distancing, closed businesses, schools transitioned to remote education, and reduced travel. In April 2020, over 20.5 million of Americans lost their jobs, with 6,800 of them being Wyandotte County residents. The national unemployment rate reached its highest level at 14.4% following the most severe month-over-month decline in employment on record. During that same period, Wyandotte County’s rate of unemployment climbed to 16%. As of April 2021, there were still 8.2 million fewer jobs in the U.S. than before the pandemic. During this time, a significant share of households faced food and housing insecurity. Economic disruptions impaired the flow of credit to households, state and local governments, and businesses of all sizes. While some businesses weathered closures and sharp declines in revenue, many were forced to shut down, especially small businesses.

Response to the Pandemic by Government and its Impact
Amid this once-in-a-century crisis, state and local governments responded at an immense scale to prevent and address the spread of COVID-19. These included testing, contact tracing, isolation and quarantine, public communications,
issuance and enforcement of health orders, expansions to health system capacity like alternative care facilities, and a massive nationwide mobilization around vaccinations. Governments, including the Unified Government, also undertook efforts to prevent COVID-19 spread through safety measures in settings like nursing homes, schools, congregate living settings, dense worksites, incarceration settings, and public facilities. The pandemic’s impacts on behavioral health, including the toll of pandemic-related stress, have increased the need for behavioral health resources.

At the same time, state and local governments sought to address the economic impacts of the pandemic, tailored to the needs of their communities, including expanded assistance to unemployed workers, food assistance, rent, mortgage, and utility support, expanded services to support individuals experiencing homelessness, support for individuals with disabilities and older adults, and assistance to small businesses facing closures or revenue loss or implementing new safety measures.

State and local governments have seen substantial increases in costs to provide this response, often amid substantial declines in revenue due to the economic downturn and changing economic patterns during the pandemic. Facing these budget challenges, many state and local governments have been forced to make cuts to services or their workforces or delay critical investments. From February to May of 2020, state and local governments reduced their workforces by more than 1.5 million jobs and, in April of 2021, State, local, and Tribal government employment remained nearly 1.3 million jobs below pre-pandemic levels. The Unified Government instituted a hiring slowdown resulting in, at its peak, over 300 vacant positions out of 2,400 authorized positions, and postponed filling 24 entry level police officers to its ranks. These cuts to government workforces come at a time when demand for government services is high, as the frontlines of fighting the pandemic. Furthermore, state and local government austerity measures hamper overall economic growth, as occurred in the recovery from the Great Recession.

Disproportionately Impacted Communities
Both the public health and economic impacts of the pandemic have fallen most severely on communities and populations disadvantaged before it began. Low-income communities and people of color have faced higher rates of infection, hospitalization, and death, as well as higher rates of unemployment and lack of basic necessities like food and housing. The Wyandotte County unemployment rate for people of color was 9.0% at the end of 2019 compared with the average of 6.6% for the entire County. Pre-existing social vulnerabilities magnified the pandemic in these communities, where a reduced ability to work from home and, frequently, denser housing amplified the risk of infection. Higher rates of pre-existing health conditions also may have contributed to more severe COVID-19 health outcomes. In Wyandotte County, 17% of residents did not have health insurance coverage in 2019, up from 15.5% in 2017. Similarly, communities or households facing economic insecurity before the pandemic were less able to weather business closures, job losses, or declines in earnings and were less able to participate in remote work or education due to the inequities in access to reliable and affordable broadband infrastructure. Unfortunately, the pandemic also has reversed many gains made by communities of color in the prior economic expansion.

In Wyandotte County, the COVID-19 death rate among low-income neighborhoods was twice the rate of high-income western County neighborhoods. COVID-19 cases per 100,000 population by ethnicity/race show a disparity of 5,597,
people of color compared to 2,700 cases of white populations; Of the total cases of people of color, 3,949 are Hispanic and 1,648 are African American.  

Figure 1 - Wyandotte County COVID-19 Death Rates by Zip Code (as of 7/7/21)

Figure 2 - Wyandotte County COVID-19 Case Rates Per 100,000 Population by Ethnicity/Race (as of 7/7/21)

Disparities Among Residents in Wyandotte County
Income disparities for Wyandotte County residents prior to the pandemic crossed geographic and racial categories. Of the total Kansas City, Kansas population, 53% are people of color of which 23% are black or African American and 30% Hispanic or Latino.  Disparities, such as the average age at death, are evident between geographic areas of the County, with a difference of as much as 10 years. In zip code 66102 (eastern Wyandotte County), the average age of death was 66.5 years compared to age 73.4 years in 66109 (western part of the County). Infant Mortality is 4.4 per 1,000 live births among whites compared to 12.1 per 1,000 live births for blacks. Also, data of infant mortality rates
between neighborhoods demonstrates additional disparities with 14.2 per live births in Armourdale and 13.7 in Northeast, compared to 2.4 in Piper (western Wyandotte County).  

Residents with a disability are 13.8% of the total population in the County compared to 12.7% nationwide and 9.2% in Johnson County, Kansas.

The following map shows Qualified Census Tracts in Wyandotte County where:
- 50% or more of households of four persons have incomes that are 60% less of the area median gross income, OR
- a poverty rate of at least 25%.

Of the total resident populations of approximately 165,000, 54% or 89,360 residents live in a census tract that meets one or both criteria, amounting to 38 of the County’s 70 total census tracts. Area Median Gross Income in the Kansas City Metropolitan Statistical Area is $86,600, and 60% of that equates to $52,000 in annual gross income. All residents in these census tracts live on incomes below $52,000 a year.

Poverty in Wyandotte County is defined as living on an annual income of $26,000 for a household of four persons. Twenty-four of these 38 census tracks have average poverty rates of 25% or greater.

**Figure 3 – Wyandotte County Qualified Census Tracks – Low-Income / High Poverty Rates**

Median household income ranges from $11,000 in Census Tract 418 (just north of KCK downtown in which 49% of its 916 people live below the poverty line) to $45,102 in Census Tract 452 in KU-Med area where 22% of its 4,062 people live below the poverty line. Note Census Tract #411, where 66% of its 1,575 people live below the poverty line and have a median household income of $13,250 per year.
Persons living in poverty in Kansas City, Kansas is 19.8%, compared to Kansas City, Missouri at 16.1% and Johnson County at 5.3%. Those persons in poverty disproportionately fall on children ages 17 years and younger, comprising 54% of the total in Kansas City, Kansas.

Per capita income is often used to measure the overall standard of living or wealth of an area since it takes into account the total population regardless of any other factors (e.g. employment status). The per capita income for Wyandotte County is $22,335 which is the third lowest among all counties in Kansas. Johnson County has the highest at $46,517. Within Wyandotte County, Census tract 411 (north of State Ave. & east of 10th St.) has the lowest per capita income in the County at $7,321.

When Cross-Lines Community Outreach operated the cold weather shelter this last winter, they had 120 unique individuals present, and they had over 170 unique individuals present to the warming center at Cross-Lines. They have continued to see new faces each week, with a significant increase during the month of June 2021. The KCK Police Department Homeless Outreach team have interacted with 425 unique individuals experiencing homelessness within the last 18 months.

Since 2014, Black and Hispanic/Latinx youth homicide rates have been consistently higher than white homicide rates. From 2010 to 2019, Black youth homicides happened at the highest rate, consistently being 3 to 5 times that of White youth homicides. Additionally, youth homicides are concentrated in the east side of the county. The highest homicide rates over the period of 2010 to 2019 occurred in the following neighborhoods:

- Northeast (55.8 homicides per 100,000 population)
- Northwest (42.9 homicides per 100,000 population)
- Bethel (30.1 homicides per 100,000 population)
- Argentine (23.3 homicides per 100,000 population)
- Armourdale (21.1 homicides per 100,000 population)

Figure 4 – Wyandotte County Youth Death Rate per 100,000 Population by Neighborhood

Youth death rates per 100,000 in Wyandotte County follow similar geographic patterns as poverty rates. The northeast part of the County has 45-75 youth deaths per 100,000, compared to 23-26 youth deaths per 100,000 in the western part of the County.

2020 youth (1-24) homicides hit a 10 year high (28.4 homicides per 100,000 population). There were 18 youth (1-24) homicides in 2020, compared to 10 in 2019 and 8 in 2018. A plurality (44.4%) of youth homicides for 2020 were Hispanic/Latinx.

Over half (10) of the youth homicides in 2020 were 18 years or younger. During most other years, homicides were more likely to occur in the 19 to 24 population. Harmon High School district saw a plurality of these deaths. The rate of homicide for 10- to 18-year-old in the Harmon High School district for the year of 2020 was 137.5 homicides per 100,000 population. This is a major uptick from the previous 5 years. Washington High School district also
saw a large increase in the homicide rate of 10- to 18-year-old (82.67 homicides per 100,000). USD 500 saw an overall 5 year high for 10–18-year-old homicides (58.7 per 100,000).  

**American Rescue Plan Act (ARPA)**

On March 11, 2021, the American Rescue Plan Act (ARPA) was signed into law by the President. Section 9901 of ARPA amended Title VI of the Social Security Act (the Act) to add section 603, which establishes the Coronavirus Local Fiscal Recovery Fund (LFRF). The Local Fiscal Recovery Funds are intended to provide support to local governments in responding to the impact of COVID-19 and in their efforts to contain COVID-19 on their communities, residents, and businesses.

Through the Local Fiscal Recovery Funds, Congress provided local governments with significant resources to respond to the COVID-19 public health emergency and its economic impacts through four categories of eligible uses.

ARPA provides a substantial infusion of resources to meet pandemic response needs and rebuild a stronger, more equitable economy as the country recovers. Payments from the Local Fiscal Recovery Funds are expected to achieve the following overriding objectives:

- First, to ensure that local governments have the resources needed to continue to take actions to decrease the spread of COVID-19 and bring the pandemic under control;
- Secondly, to provide support for costs incurred in addressing public health and economic challenges resulting from the pandemic, including resources to offer premium pay to essential workers in recognition of their sacrifices over the last year;
- Thirdly, to replace government revenue lost due to COVID-19, helping to ensure that governments can continue to provide needed services and avoid cuts or layoffs; and
- Fourthly, to lay the foundation for a strong, equitable economic recovery, not only by providing immediate economic stabilization for households and businesses, but also by addressing the systemic public health and economic challenges that may have contributed to more severe impacts of the pandemic among low-income communities and people of color, and
- Finally, to make necessary investments in water, sewer, or broadband infrastructure.

**Interim Final Rule**

Within the eligible use categories outlined in the Local Fiscal Recovery Funds provisions of ARPA, local governments have flexibility to determine how best to use payments to meet the needs of their communities and populations. The Interim Final Rule (IFR) facilitates swift and effective implementation by establishing a framework for determining the types of programs and services that are eligible under the ARPA and reflect changes in the needs of communities, as evidenced by nationwide data demonstrating disproportionate impacts of the COVID-19 public health emergency on certain populations, geographies and economic sectors. The Interim Final Rule takes into consideration these disproportionate impacts by recognizing a broad range of eligible uses to help support the families, businesses, and communities hardest hit by the COVID-19 public health emergency. The Interim Final Rule establishes certain regular reporting requirements, including by requiring State, local, and Tribal governments to publish information regarding uses of Fiscal Recovery Funds payments in their local jurisdiction.

**Unified Government’s State and Local Fiscal Recovery Funds (SLFRF) Allocation and Needs Assessments**

The Unified Government was allocated two separate direct allocations by the U.S. Treasury, with the City of Kansas City, Kansas as the recipient of $55,383,872 and Wyandotte County, Kansas as a second recipient of $32,132,644. One half of these payments were received in mid-May of 2021, with the second half scheduled to be received in May of 2022. As discussed in the Interim Final Rule released by the U.S. Treasury in mid-May, as well as the subsequent Compliance and Reporting Guidance released in late June 2021, these funds must be spent on eligible expenditures aimed at achieving
the objectives of the American Rescue Plan, including addressing disparities in housing and public health access experienced by low-income residents and persons of color.

**Suggested Guiding Principles**

As the Commission embarks on a prioritization process of the Local Fiscal Recovery Funds, the following are suggested guiding principles:

- **Target Goals** - Target ARPA funding to support UG Strategic Goals
- **Core Values** - Center decision-making on core values of equity, engagement, and excellence
- **Cash-Fund Now** - Strategic investments to lower future financing and potential mill levy reliance
- **Leverage** - Leverage existing efforts and infrastructure; Avoid duplication of resources
- **Maximize** - Maximize all ARPA funding by cross-mapping against more restrictive funding first
- **Best Practices** - Best practices implementation from the COVID-19 response
- **Flexibility** - Maintain flexibility to reallocate funding as needs and federal guidance evolve
- **One-Time** - Use one-time funds for one-time uses or have a path to sustainability

**Evaluation of Immediate Needs**

In keeping with the principles to maximize all ARPA funding by cross-mapping against more restrictive funding first, as well as to proceed with a deliberative, data-driven decision-making process, the direction was to first identify those immediate needs that require funding to continue to carry out the services and programs aimed at mitigating the spread of the disease. The following are more descriptions of these immediate needs. These descriptions are provided as a supplement to the CFO presentation made on July 15, 2021, as part of the 4th Budget Workshop.

**Wyandotte County – Immediate Needs**

**Public Health – Total $5.49 M**

Vaccination, testing and contact tracing – Total $1.71 M
- UGPHD Deputy Medical Officer (6-mos) - $98 K
- Mobile Vaccine Units - $350 K
- Adding COVID vaccination to UGPHD Clinic - $624 K
- Technical assistance program to assist medical providers in providing COVID vaccination - $100 K
- Forgiveness for court fees if vaccinated + KS Legal Services staff to assist residents in the process - $150 K
- Maintain testing in schools, long-term care facilities, and high-risk settings in the community like inpatient mental health/substance use facilities, congregate living facilities, etc. - $25 K
- Continue testing relationship with Vibrant Health, focusing on at-risk & vaccine hesitant populations - $150 K
- Contact tracing/case investigation/epi staff - $216 K

Prevention in congregate settings – Total $109 K
- Replace Food Delivery Equipment at Congregate Sites to Mitigate Disease Spread (Aging) - $79 K
- Transportation assistance for UGPHD clients - $30 K

Other COVID expenses (communication, isolation, quarantine) – Total $625 K
- COVID quarantining & isolation support (motel stays, meals) - $25 K
- Home delivery of food, cleaning supplies, PPE to at-risk households; also includes COVID test kit home delivery - $100 K
- Testing, vaccine communications - $500 K

Payroll of public health and other Public Sector staff responding to COVID-19 – Total $1 M
- Funding for COVID-involved staff so grant staff can reassigned to normal duties - $1 M

Mental health and substance abuse services – Total $232 K
- Intellectual/Mental Health (Dual Diagnosis Clients) - Human Services/Developmental Disabilities - $72 K
- Drug misuse prevention coordinator at UGPHD - $160 K
Other public health services – Total $1.8 M
- Adding DataDirect analysis tool to CDP electronic health record system at UGPHD - $108 K
- ARPA Coordinator at UGPHD - $200 K
- Increase CHIP Health Access Lead Agency backbone staff from .5 FTE to 1 FTE @ Vibrant Health - $80 K
- UGPHD mobile clinic unit that provides multiple UGPHD services in off-site community settings - $400 K
- Third-party evaluation of UGPHD COVID response - $50 K
- Evaluation of UGPHD clinical services post-COVID - $100 K
- Ongoing primary data collection -- vaccine hesitancy - $50 K
- Education Team that continues COVID education but also education on other communicable diseases/health behaviors/immunization outreach - $175 K
- Diversity, equity, and inclusion consultant to work with the Public Health Department - $50 K
- COVID operation demobilization storage for equipment and supplies - $600 K

Negative Economic Impact – Total $1.20 M
Household assistance for food, rent, mortgage, utilities, cash, internet access, eviction prevention) – Total $618 K
- Direct Food Assistance via deployment of Dotte Mobile Grocer - $200 K
- Funds for hygiene/personal care items (e.g. toiletries, diapers) for families on WIC - $80 K
- Counseling for Dispute Resolution - Human Services/Developmental Disabilities - $10 K
- 2 attorneys from Kansas Legal Services focused on both housing issues (e.g. evictions, landlord-tenant disputes) as well as medical issues (Medicaid), DV, immigration, and other supports for low-income Wyandotte residents - $150 K
- Two (2) bi-lingual housing navigator staff to assist people in community with housing/housing education needs - $100 K

Job training assistance – Total $80 K
- WYEDC backbone support for CHIP Jobs & Education - $80 K

Aid to non-profits to mitigate COVID – Total $500 K
- Funds to human services related community non-profits and other agencies for COVID-related projects as required by ARPA - $500 K

Disproportionately Impacted Communities – Total $1.09 M
Educational assistance – Total $250 K
- Technical Skills Education to Previously Incarcerated Offenders Seeking to Pursue New Business Opportunities - $250 K

Housing support for unhoused persons – Total $160 K
- CHIP Housing backbone support for new Lead Agency - $160 K

Community health workers or benefit navigators – Total $151 K
- Crisis Respite - Human Services/ Developmental Disabilities - $91 K
- Provide assistance accessing or applying for utility bill assistance - $60 K

Community violence intervention – Total $529 K
- Primary data collection surrounding violence prevention in Wyandotte - $90 K
- Expansion of UGPHD violence prevention programs and services - $254 K
- New in-school program curriculum that addresses sexual health as well as addresses violence in the community/home - $3 K
- Ongoing Adverse Childhood Experiences (ACEs) training for UG/UGPHD staff - $10 K
- Add violence prevention community health workers to the hospital-based violence interrupter program (REVIVE) - $100 K
- Core support for MOCSA to serve as CHIP Violence Prevention lead agency - $73 K
**Other Eligible Uses-County – Total $159 K**

**Administration – Total $159 K**
- UG staff time administering ARPA program (City share) - $14 K
- Grant Management and Discovery Software (City share) - $35 K
- Grant/ARPA Administration and Writing Consultant (City Share) - $110 K

**Revenue Replacement – Total $500 K**
- Implementation of Online Processes across Many County Departments Online Technology-Customer Facing/Self Service Title & Registration Kiosks - $500 K

**City of Kansas City, Kansas – Immediate Needs**

**Public Health – Total $642 K**

- Physical plant changes to public facilities that respond to COVID – Total $142 K
  - Recreation Community Center Cleaning Machines - $65 K
  - Municipal Court Re-Opening Needs - $77 K

- Other COVID expenses (communication, isolation, quarantine) – Total $500 K
  - Communications-UG - $500 K

**Negative Economic Impact – Total $910 K**

- Small business economic assistance – Total $650 K
  - Small Business Support (program started with CARES $) - $250 K
  - Funding for small businesses that failed during COVID that are in the Qualified Census Tracks - $250 K
  - Augment funding for UG Toolbox - $150 K

- Tourism to mitigate COVID – Total $200 K
  - CVB support of programs to assist hotel industry to implement mitigation and infection prevention measures - $200 K

- Other economic support – Total $60 K
  - Program Manager for BankOn Initiative - $20 K
  - Bonuses for public safety new hires - $40 K

**Disproportionately Impacted Communities – Total $60 K**

- Healthy childhood environments – Total $60 K
  - After-school and summer camps recreation centers' space footprint analysis in order to get State certification; and bringing centers up to code & standards - $60 K

**Other Eligible Uses-City – Total $263 K**

**Administration – Total $263 K**
- UG staff time administering ARPA program (City share) - $14 K
- Grant Management and Discovery Software (City share) - $35 K
- Grant/ARPA Administration and Writing Consultant (City Share) - $214 K

**Revenue Replacement – Total $2.58 M**
- Implementation of Online Processes across Many City Departments Online Technology-Customer Facing/Self Service Kiosks - $500 K
- Municipal court management software-$929 K

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Footnotes


3 Kansas Department of Labor, Labor Market Information Center.


5 Kansas Department of Labor, Labor Market Information Center.


12 Unified Government of Wyandotte County/ Kansas City, Finance Department.


18 Small Area Health Insurance Estimates Program, U.S. Census Bureau.


22 Ebid.


24 Unified Government, Research Department, Death Data between 2010-2014.


27 US Census Bureau, American Community Survey (2019).

28 U.S. Census Bureau and the Unified Government Research Division.

29 Ebid.


32 U.S. Census Bureau and the Unified Government Research Division.

33 Rob Santel, LMSW, Director of Housing Solutions, Cross-Lines Community Outreach, Kansas city, Kansas

34 Wyandotte County Public Health Department

35 Wyandotte County Public Health Department

36 Wyandotte County Public Health Department

37 Wyandotte County Public Health Department


39 42 U.S.C. 801 et seq.

40 §§ 602, 603 of the Act.