Family Services

FY 2019 Community Impact Report

Travis County Health and Human Services

Research & Planning Division

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County Executive
Sherri E. Fleming

Project Leads
Courtney Bissonnet Lucas
April Klein
Rochelle Olivares

Research & Planning Division
Lawrence Lyman, Division Director
Korey Darling, Planning Manager
Rachel Coff
Anna Lisa Conlin
April Klein
Courtney Bissonnet Lucas
Rochelle Olivares
Octavio Ulloa

Questions or Comments?

For questions or for more information, please contact the Research & Planning Division at HHS_R&P@traviscountytx.gov.

TRAVIS COUNTY
HEALTH and HUMAN SERVICES

PURPOSE

Who we are:

A Department of Travis County that serves the community under the guidance of the Commissioner's Court

What we do:

Address community needs through internal and external investments and services

What we strive to accomplish:

Maximize quality of life for all people in Travis County

- Protect vulnerable populations
- Invest in social and economic well-being
- Promote healthy living: physical, behavioral, and environmental
- Build a shared understanding of our community

VALUES

We value helping people.

- We provide accessible, person-centered services with respect and care.
- We work to empower people through our service to them, always honoring the strengths and differences of the individuals and families of Travis County.

We value the accountability and integrity of our staff.

- We value the diversity of our staff and the experience each of us brings to HHS.
- We honor our collective service to the public, including the careful stewardship of public funds.
- We value the quality services we provide to the community in a spirit of shared responsibility.

We value cooperation and collaboration in the community at large and within HHS.

- We are interdependent and connected.
- We treat one another with respect and value effective communication and teamwork.
- We honor our partners in the community and engage with them to more efficiently and effectively serve our clients.

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Introduction

The Travis County Commissioners Court, through the Travis County Health and Human Services Department (HHS), annually invests nearly $22 million in community-based social service programs using one-time and ongoing funding structures. These Department investments align with and supplement our direct services to meet the needs of local residents. Community-based organizations are frequently geographically and culturally embedded in the communities they serve and are often best positioned to provide needed services.

Purpose of Report

The annual Community Impact Report provides an overview of HHS investments in health and human services. The *FY 2019 Community Impact Report* offers community context most pertinent to the services purchased, and details investment, programmatic, and performance information on the Department's social service contracts. This information allows policy makers, program managers, and others to better understand these investments, recognize accomplishments, identify areas for improvement, disseminate lessons learned, and highlight areas warranting further research.

Organization of Report

This report addresses nine issue areas—Access to Basic Supports, Behavioral Health, Child and Youth Development, Housing Continuum, Planning and Evaluation, Public Health, Safety Intervention Services, Supportive Services for Community Living, and Workforce Development—as well as pilot and one-time investments under Family Services. The Executive Summary aggregates financial, demographic, and geographic information for all issue areas, and offers a discussion of poverty as a framework for HHS investments. Each issue area section begins with community context and then provides performance highlights. Each program is classified into the issue area most closely aligned to its goals and objectives.

Although this report provides community context for individual issue areas separately, each issue area must be considered in a broader context. Community conditions related to a single issue area may have similar or related root causes and broad-level consequences. Current economic conditions also have a global impact on the community.

This report provides detailed information about each program covered by an issue area, including an overview of program goals, services provided, eligibility criteria, and funding. Also captured are each program's performance results, compared to its contractual performance goals, and explanations of notable variance (+/- 10%) between the performance results and goals.

Notes on Methodology

Community context discussed in this report reflects the most recent information available at the time of writing. The majority of the social service contracts included in the report followed a fiscal year calendar (October 1, 2018 through September 30, 2019) unless otherwise noted. Program and performance highlights are drawn from contracts and reports provided by contracted service providers. Estimates from the American Community Survey have been tested at a 90% confidence level for reliability. In some cases, all noted, estimates were unreliable due to small sample sizes.

Considerations When Reading This Report

Performance results provide only a starting point for understanding the impact of these programs. These summary statistics are not necessarily an indication of the programs' overall performance, but rather a snapshot of their performance over a one-year period. Within these reports, service providers offer explanations for variance in performance, which provides context and meaning to summary results.

Performance results do not reflect programs' full value to and impact on the community. Therefore, it is important to keep the following considerations in mind when reviewing program performance.

Readers should use caution when comparing output and outcome results across programs, as participant characteristics can significantly influence a given program's performance goals and results. For example, performance results may be lower for programs with clients who face considerable challenges (e.g., serious mental illness or addiction issues) and have little social support.

Factors beyond the program's control may also impact the program's performance. For example, the relative scarcity or abundance of jobs in the local economy will impact client employment rates for a workforce development program, regardless of the quality of training and support provided. Without controlling for these factors, the true impact or efficacy of the program on outcomes cannot be discerned.

Readers should also use caution when examining outcome results for programs with less than 30 clients, in which the outcome of just a few clients can greatly affect the program's total outcome result. In these instances, examining percentages may be less helpful than examining raw numbers.

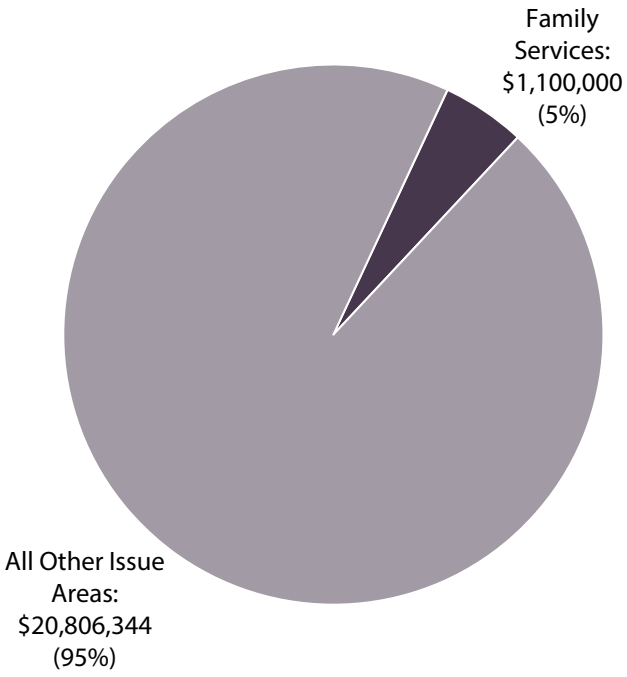
Finally, this report captures a selection of performance measures, which may not reflect the program's full impact on participants and their families, peers, and neighborhood. Performance measures may not all be equal in importance or value to the community.

Investment Overview

Goals and Services

Family Services includes pilot and one-time investments that span multiple issue areas and align with the goals of those issue areas. These investments also support Travis County HHS goals: Protect vulnerable populations; Invest in social and economic well-being; Promote healthy living: physical, behavioral, and environmental; and Build a shared understanding of our community.

Investment in Family Services and Other Issue Areas, FY 2019



Funding Summary

The FY 2019 Funding Amount reflects 12–month funding (October 1, 2018 through September 30, 2019) unless otherwise noted.

Agency Name	Program Name	FY 2019 Funding Amount
Austin Independent School District	School-based Family Resource Centers	$100,000*
Integral Care	Families With Voices/Familias Con Voces Collaborative	$1,000,000

*One-time funding from December 1, 2018 through September 30, 2019

Client Demographics

The table below summarizes the demographics for clients served in School-based Family Resource Centers. Income data is only collected on those who enter case management, and these individuals may opt to not provide this information during intake.

Gender	Num.	Pct.
Female	6,705	55%
Male	5,310	43%
Unknown	212	2%
Total	12,227	100%

Ethnicity		
Hispanic or Latino	10,142	83%
Not Hispanic or Latino	1,876	15%
Unknown	209	2%
Total	*12,227*	*100%*

Race		
American Indian and Alaska Native	256	2%
Asian	242	2%
Black or African American	1,047	9%
Native Hawaiian and Other Pacific Islander	1	0.01%

Age	Num.	Pct.
Under 5	865	7%
5 to 11	2,374	19%
12 to 14	1,880	15%
15 to 17	1,277	10%
18 to 24	914	7%
25 to 39	2,195	18%
40 to 54	1,921	16%
55 to 64	253	2%
65 to 74	66	1%
75 and over	274	2%
Unknown	208	2%
Total	*12,227*	*100%*

Income		
<50% of FPIG	109	9%
50% to 100%	199	16%

Race, cont.	Num.	Pct.
White	10,321	84%
Some other race	7	0.1%
Two or more races	133	1%
Unknown	220	2%
Total	*12,227*	*100%*

Income, cont.	Num.	Pct.
101% to 150%	81	7%
151% to 200%	17	1%
>200%	6	0.5%
Unknown	815	66%
Total	*1,227*	*100%*

Note: Percentages may not total to 100% due to rounding.

See Appendix for specific income guideline levels.

The table below summarizes the demographics for clients served in the Families With Voices/Familias Con Voces Collaborative. Individual demographics are reported for gender, ethnicity, and race, while income status reflects families. Due to HIPAA privacy concerns, and specifically, the risk of re-identification, age information has been removed from this report.

Gender	Num.	Pct.
Female	113	56%
Male	90	44%
Other	*203*	*100%*

Ethnicity		
Hispanic or Latino	58	29%
Not Hispanic or Latino	141	69%
Unknown	4	2%
Total	*203*	*100%*

Race		
American Indian and Alaska Native	6	3%
Black or African American	151	74%
White	36	18%
Some other race	3	1%
Two or more races	6	3%
Unknown	1	0.5%
Total	*203*	*100%*

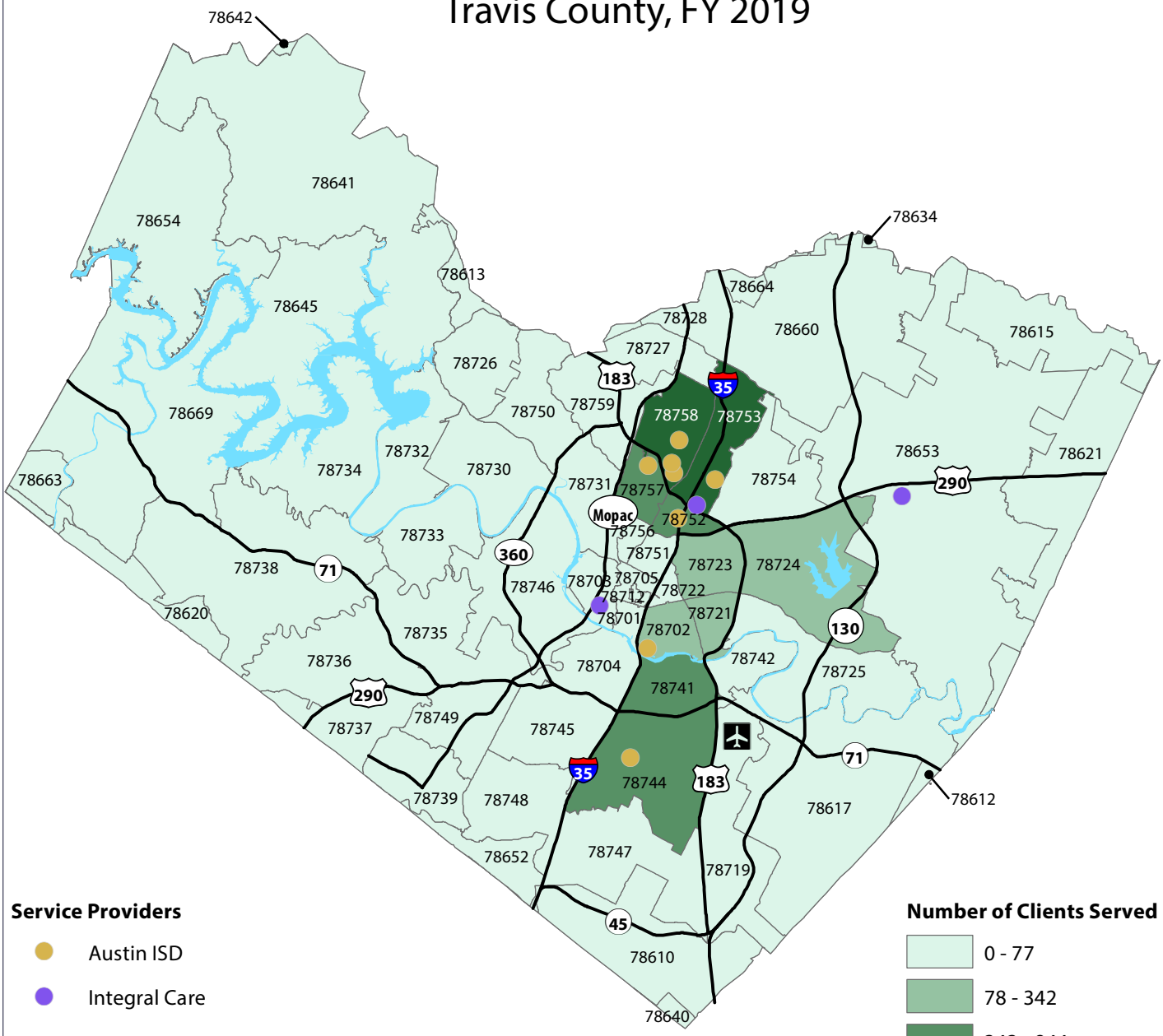
Income	Num.	Pct.
<50% of FPIG	26	13%
50% to 100%	17	8%
101% to 150%	6	3%
151% to 200%	2	1%
Total	*51*	*25%*

Note: Percentages may not total to 100% due to rounding.

See Appendix for specific income guideline levels.

Family Services

Service Provision Locations and Clients Served by ZIP Code
Travis County, FY 2019



Service Providers

- Austin ISD
- Integral Care

Number of Clients Served

- 0 - 77
- 78 - 342
- 343 - 844
- 845 - 4,281

Notes: This map shows 12,146 clients of Austin ISD's Family Resource Centers by ZIP code; 25 clients were duplicated due to moving over the course of the year. 106 clients (1% of the total) were not included because their ZIP codes were outside of Travis County boundaries. Client ZIP codes are not displayed for Integral Care's Families With Voices due to HIPAA privacy concerns.

Source data: Contracted service providers, FY 2019.
This map was created using ArcGIS Online shapefiles.
Created by: Travis County HHS, Research & Planning Division, 2019.

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Austin Independent School District

School-based Family Resource Centers

Program Description

School-based Family Resource Centers (FRCs) provide wraparound family support services with the goal of stabilizing families in transition and crisis so that their children are in school and ready to learn. FRCs work in collaboration with the campus and other partners to address barriers to learning, thus improving student outcomes in terms of attendance, academics, and behavior that increase the potential of graduation from high school. The FRCs work to stabilize families through case-managed and responsive family support services; adult education classes and workshops; and community school and family engagement efforts that are all aimed at helping families achieve and maintain stability so that their students can succeed in school. FRCs work to enhance accessibility to campus and community resources for families who are fearful, disenfranchised, or have experienced significant barriers in accessing health, education and social services on behalf of their children and families. They provide the added value of encouraging strong family-school relationships to improve student success.

Funding

The total HHS investment in the School-based Family Resource Centers program from December 1, 2018 through September 30, 2019 was $100,000. This is the fifth year of one-time funding authorized by the Travis County Commissioners Court. This investment comprised 25.1% of their total program budget. HHS also funds the AISD MBK Success Mentor Program, which is described in the Child and Youth Development issue area report.

Eligibility Criteria

School-based FRCs are located in Austin ISD Title I schools with high rates of students eligible for free/reduced price lunch, an indicator that reflects high concentrations of lower income families. However, there are no eligibility requirements.

The FRC serves anyone who requests services from the program, but case management services are only provided to families with children enrolled in the target campuses because of the linkage to schools. Clients are presumed to be residents of Travis County who have pre-school or school aged children.

Austin Independent School District

School-based Family Resource Centers

When families are enrolled in the database, student and family information is validated with Austin ISD data through the AISD eCST data system; however, there is no additional affirmative verification done for eligibility.

Austin ISD: School-based Family Resource Centers

The School-based Family Resource Centers met or exceeded most performance goals. Staff noted that this was the first year that all output measures included data from an additional three FRC sites. Thus, goals were estimated during the prior year and this year's data can help serve as a baseline for future goal setting. Further, this was the first time the program reported on unduplicated clients receiving specified service types (see the fourth through ninth outputs). Goals may be adjusted for the next fiscal year given this year's performance data.

The lower-than-expected number of service encounters is reflective of not having a full-time social worker at Burnet Middle School from August through October (see the third output). Staff also reported that they re-purposed the Community School Coordinator for Cook and Wooldridge Elementary Schools to an Adult Education Coordinator, so there were no responsive services at those two sites (see the eighth output). The decrease in partner services is mainly reflective of the fact that the FRCs lost immunization clinic services at festivals that they used to help coordinate service delivery for and also lost Dell Children's Health Express at Navarro High School (see the fifth output). The AVEY partnership with Austin Energy increased the number of families receiving case management services to help those families with utility assistance (see the ninth output).

In terms of outcomes, this year was the first time reporting on the first three outcomes in this way. Results achieved can help baseline performance and can be used to adjust performance target for the coming year. Finally, the fourth outcome reflects attendance for 5,606 students in 3,971 families where the parent consented to share their school data with AVEY and was not limited to only those students whose families are receiving case management services; this measure or reporting will be revised for the next fiscal year.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	12,227	10,375	118%
Number of unduplicated families served	3,774	2,905	130%
Number of unduplicated service encounters	6,593	7,470	88%
Number of unduplicated clients served with Service Navigation (Outreach)	603	540	112%
Number of unduplicated clients served with Partner Services	203	374	54%
Number of unduplicated clients served with Adult Education Services	1,026	581	177%

Austin ISD: School-based Family Resource Centers

Performance Goals and Results

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Number of unduplicated participants served with Family and Community Engagement Services	2,918	1,660	176%
Number of unduplicated clients served with Responsive Services	1,284	1,536	84%
Number of unduplicated clients served with Case Management Services	418	350	119%
Outcomes			
Percentage change in % of unduplicated families in crisis or at risk for KNOWLEDGE OF ACCESS TO RESOURCES	85% decrease	68% decrease	Met Goal
Percentage change in % of unduplicated families in crisis or at risk for HEALTH CARE ACCESS	33% decrease	44% decrease	Did Not Meet Goal
Percentage change in % of unduplicated families in crisis or at risk for SCHOOL CONNECTEDNESS	34% decrease	23% decrease	Met Goal
Percentage of enrolled days attended by AISD students whose families are receiving case management services	91%	N/A	N/A

*Total Program Performance Results and Goals reflect performance over a 10–month contract period.

Integral Care

Families With Voices/Familias Con Voces Collaborative

Program Description

This pilot program uses a Wraparound Family Intervention approach to address multiple complex needs of whole families, in an effort to create lasting, positive change for children in these families. Services focus on families with children in the outlying areas of Travis County, and more specifically, impacted block groups in areas of very low or low opportunity outside of the City of Austin. Services currently target families residing in the 78653 ZIP code.

The goals of the Families With Voices/Familias Con Voces Collaborative include:

- Using the Self-Sufficiency Matrix, assess each eligible family and family member in the following key service need areas (outcome scales) to determine level of need, self-sufficiency, stability, and functioning. These areas are: behavioral health, child and youth development, food and transportation, housing continuum, and workforce development;
- Using a Wraparound Holistic Family Team approach, address each outcome scale with the family and family members and assist them in achieving progress in identified benchmarks as they move through the continuum on the Self-Sufficiency Matrix; and
- Through the collection and management of data, demonstrate improvements and progress, creating lasting and positive change for children in these families.

Services provided include:

- Care Coordination and Case Management: A Family Wraparound Team (FWT) is developed around every family served. The FWT consists of the following team members: the family, formal and informal supports identified by the family, Family Wraparound Team Care Coordinator (FWTCC), a housing specialist, a behavioral health specialist, a workforce development specialist, and any external providers who provide non-traditional services such as mentoring, respite care, and recreational therapy. The FWTCC also serves as the transportation specialist and facilitates access to food assistance needs if identified.
- Coordinated Assessment: The Fenn-Jorstad Self-Sufficiency Matrix is used as a guide for the coordinated assessment tool developed by Integral Care. Families are screened for eligibility and assessed across all five required issue areas at program entry (housing continuum, workforce development, child and youth development, behavioral health, and food and transportation). The assessment is administered every ninety days with each family receiving services and is used to facilitate and guide the Person Centered Care Plan (PCCP). The PCCP allows individuals receiving services to have a strong voice in the development of their care plan and in the guidance of the plan moving toward successful individual and family outcomes.
- Career Case Management Assessment: The Goodwill Career Case Manager completes a career case

management assessment and an initial Individual Career Plan with the client, reviews program forms and documentation, and initiates services with the client.

- Workforce Development Services: The Goodwill Career Case Manager works closely with clients to achieve their vocational goals. Services include job readiness training, job development/placement, job retention support, and occupational skills training leading to an industry-recognized credential. Vocational outcomes for participants of occupational training programs include placement, earnings increase, credential attainment, and six- and twelve-month job retention.
- Housing Continuum: Integral Care's Adult Behavioral Health (ABH) Supportive Housing service has two dedicated housing specialists for this program's families. The housing specialist develops a housing service plan and works directly with families to rapidly find suitable housing (if the family is homeless) or assist the family in maintaining stable housing. Financial assistance is available, covering expenses such as rent, utilities, mortgage, rent/utilities debt, minor home repair, and basic furnishings. Housing services include an assessment of housing needs, landlord outreach, provision of emergency housing supports, and homelessness prevention and rapid re-housing. All families receiving housing continuum services receive ongoing case management.
- Food Services: The FWTCC assesses food security and nutritional needs for families at intake and at 90–day intervals. The FWTCC provides resources to families about available food pantries, coordinates access to SNAP benefits, and provides gift cards for food assistance to supplement the family's food budget. Families also receive basic information on nutrition at intake and receive referrals to community resources on nutrition classes when needed.
- Child and Youth Development Services: Children ages 0-3 are screened using the Ages and Stages Questionnaire (ASQ) or ASQ-SE as appropriate. All children age four or over who are identified as having behavioral health issues by the parent are screened using the Child and Adolescent Needs and Strengths (CANS) assessment. The program provides evidence-based care for children with emotional and cognitive diagnoses and works with their families to provide guidance and understanding. Services include, but are not limited to: psychiatric evaluations, individual therapy, individual/group counseling, cognitive-behavioral therapy, family therapy, parenting sessions, and medication management. The FWTCC facilitates linkages to social and emotional learning opportunities by exploring children's extracurricular interests.
- Behavioral Health Services: The Behavioral Health Specialist meets and addresses all of the behavioral health service needs of the family, including children and adults. Service options available to children and families include, but are not limited to: intensive outpatient services (including individual and family counseling/therapy), psychiatric evaluations and medication management, skills training, case management, care coordination using the System of Care Wraparound practice model, the Youth Empowerment Program for children with a serious emotional disturbance, and Integrated Primary Care and Behavioral Health School-Based Clinic Services located in Manor ISD. Services are provided by licensed counselors and/or qualified mental health practitioners. All service options can be and are provided in the home, community, school, or clinic.

Integral Care

Families With Voices/Familias Con Voces Collaborative

Funding

The total HHS investment in the Families With Voices/Familias Con Voces Collaborative from October 1, 2018 through September 30, 2019 was $1,000,000. This investment comprised 100% of their total program budget. HHS funds additional programs and services at Integral Care, including the Expanded Mobile Crisis Outreach Team, Main Mental Health Interlocal, Main Mental Health Interlocal: IDD Care Coordinator, Main Mental Health Interlocal: ThriveCare of Travis County, Parenting In Recovery/Family Drug Treatment Court, Substance Abuse Managed Services Organization, Substance Abuse Managed Services Organization: MAT, and System of Care Managed Services Organization, which are described in the Behavioral Health issue area report, and the Community Advancement Network, which is described in the Planning and Evaluation issue area report.

Eligibility Criteria

To be eligible for this program, families must:

- Have dependent children between the ages of 0-22;
- Reside in the 78653 ZIP code or be identified by the Manor Independent School District as homeless;
- Fall within the income level requirements: at or below 60% of Median Family Income (MFI) at intake (80% of families) or up to 80% of MFI at intake (20% of families); and
- Demonstrate need in one or more of the five core areas of housing continuum, workforce development, child and youth development, behavioral health, and access to basic supports (food and transportation).

These families show systemic struggles meeting the basic necessities of everyday life including nutritious food, housing, employment, clothing, transportation, healthcare, and psychological well-being, including optimal physical and mental health.

Integral Care: Families With Voices/Familias Con Voces Collaborative

The Families With Voices Collaborative exceeded all output goals and met or exceeded all but one outcome goal. Staff reported that the program experienced more graduations than originally projected, which allowed them to serve more families, and had more families than expected who were known to Integral Care enter the program (see the first through fourth outputs).

Staff noted that more families than expected entered the program needing housing services, which led to a large number of initial housing stability assessments as well as re-assessments when families experience a housing challenge (see the sixth output). A larger than projected number of families participated in Goodwill's employment services, which led to more employment plans and updates developed (see the seventh output). Program staff completed a few more CANS assessments than was expected (see the eighth output) and experienced an increased number of adult family members who went through an ANSA assessment (see the ninth output).

While there were fewer families with children ages 0-10 graduating this fiscal year, most families that did have children 0-10 had childcare that scored as Safe or Self Sufficient on the Self Sufficiency Matrix (see the second outcome). The attendance rate for children enrolled in Manor ISD was lower than projected (see the third outcome). Staff explained that this rate is affected by numerous factors for the families they serve: many are housing unstable, have transportation issues, or have children with medical and behavioral health conditions that impact their attendance. While fewer than expected children met the 93% goal, a number of children had attendance rates within 84-91%. Staff continue to work with Manor ISD to develop new strategies for improving attendance.

All participants in Goodwill services were able to accomplish at least one employment goal (see the fourth outcome). The program was able to help a greater than expected number of families by the 180 day mark achieve a Safe or Self Sufficient rating on housing (see the fifth outcome) and had more families than anticipated exit the program scoring Safe or Self Sufficient on housing (see the sixth outcome). The program also exceeded goals for the percentage of families able to maintain or increase their income at the 180 day mark (see the seventh outcome).

Please note that due to HIPAA privacy concerns, and specifically, the risk of re-identification, certain performance information has been removed from this report.

Integral Care: Families With Voices/Familias Con Voces Collaborative

Performance Goals and Results

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated families served	51	30	170%
Number of unduplicated existing families served	19	10	190%
Number of unduplicated new families served	32	20	160%
Number of unduplicated individual clients served	203	120	169%
Number of Self-Sufficiency Matrix assessments conducted	105	100	105%
Number of Housing Stability Plans developed	44	35	126%
Number of employment plans and employment plan updates developed	33	20	165%
Number of Child and Adolescent Needs and Strengths (CANS) assessments conducted	19	15	127%
Number of Adult Needs and Strengths Assessments (ANSAs) conducted	21	10	210%
Outcomes			
Percentage of families who have obtained or maintained a Safe or Self Sufficient score on transportation at program exit	55% (12/22)	50% (10/20)	109%
Percentage of families who report a Safe or Self Sufficient level of childcare at program exit	83% (10/12)	60% (9/15)	139%
Percentage of children enrolled in Manor ISD with an attendance rate of 93% or higher in the reporting quarter (duplicated count of children)	49% (103/210)	60% (30/50)	82%
Percentage of Goodwill participants who accomplished at least one educational/vocational goal on their Goodwill Career and Education Plan at exit	100% (21/21)	67% (6/9)	150%
Percentage of families who obtained or maintained a Safe or Self Sufficient score on the housing domain of the Matrix assessment at the 180 day participation mark	82% (23/28)	50% (10/20)	164%
Percentage of families who obtained or maintained a Safe or Self Sufficient score on the housing domain of the Matrix assessment at program exit	82% (18/22)	65% (13/20)	126%

Integral Care: Families With Voices/Familias Con Voces Collaborative

Performance Goals and Results

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Percentage of families who maintain or increase their income resources (earned and unearned income as well as debt reduction)	69% (24/35)	50% (10/20)	137%

Appendix

2019 Federal Poverty Income Guidelines

Most HHS contracts require programs to serve participants with household incomes at or below 200% of the Federal Poverty Income Guideline (FPIG) level. Some programs have chosen to follow a more stringent threshold. The following table presents the federal poverty thresholds by household size and income.

Household Size	Income Limits by Household Size				
	50%	100%	125%	150%	200%
1 person	$6,245	$12,490	$15,613	$18,735	$24,980
2 persons	$8,455	$16,910	$21,138	$25,365	$33,820
3 persons	$10,665	$21,330	$26,663	$31,995	$42,660
4 persons	$12,875	$25,750	$32,188	$38,625	$51,500
5 persons	$15,085	$30,170	$37,713	$45,255	$60,340
6 persons	$17,295	$34,590	$43,238	$51,885	$69,180
7 persons	$19,505	$39,010	$48,763	$58,515	$78,020
8 persons	$21,715	$43,430	$54,288	$65,145	$86,860
For families/households with more than 8 persons, add $4,420 for each additional person.					

Data source: "2019 Poverty Guidelines for the 48 Contiguous States and the District of Columbia," Office of The Assistant Secretary for Planning and Evaluation, U.S. Department of Health & Human Services, January 11, 2019, https://aspe.hhs.gov/poverty-guidelines.

2019 Austin Median Family Income Guidelines

Some programs may also use Austin MFI guidelines when measuring client incomes. The following table presents the median family income limits established by the U.S. Department of Housing and Urban Development (HUD) for the Austin-Round Rock, TX Metropolitan Statistical Area (MSA).

Household Size	Income Limits by Household Size		
	Extremely Low*	Very Low (50%)	Low (80%)
1 person	$19,900	$33,150	$52,850
2 persons	$22,750	$37,850	$60,400
3 persons	$25,600	$42,600	$67,950
4 persons	$28,400	$47,300	$75,500
5 persons	$30,700	$51,100	$81,550
6 persons	$34,590	$54,900	$87,600
7 persons	$39,010	$58,700	$93,650
8 persons	$43,430	$62,450	$99,700

*The FY 2014 Consolidated Appropriations Act changed the definition of extremely low-income to be the greater of 30/50^{ths} (60%) of the Section 8 very low-income limit or the poverty guideline as established by the Department of Health and Human Services, provided that this amount is not greater than the Section 8 50% very low-income limit.

Data source: "Austin-Round Rock, TX MSA FY 2019 Income Limits Summary," U.S. Department of Housing and Urban Development, https://www.huduser.gov/portal/datasets/il/il2019/2019summary.odn.