



HealthierHere

LANDSCAPE ASSESSMENT 2025

Introduction

HealthierHere's Landscape Assessment uses both quantitative and qualitative data to present a snapshot of the current well-being, needs, and community priorities in King County. HealthierHere uses these data and assessments to guide engagement and outreach efforts and organizational and program priorities. HealthierHere encourages our partners to utilize this Landscape Assessment for similar purposes or for advancing their own efforts as applicable.

As an interim between full assessments, this report provides updated sociodemographic data for King County and reflects community needs and priorities in the face of significant state and federal landscape changes.

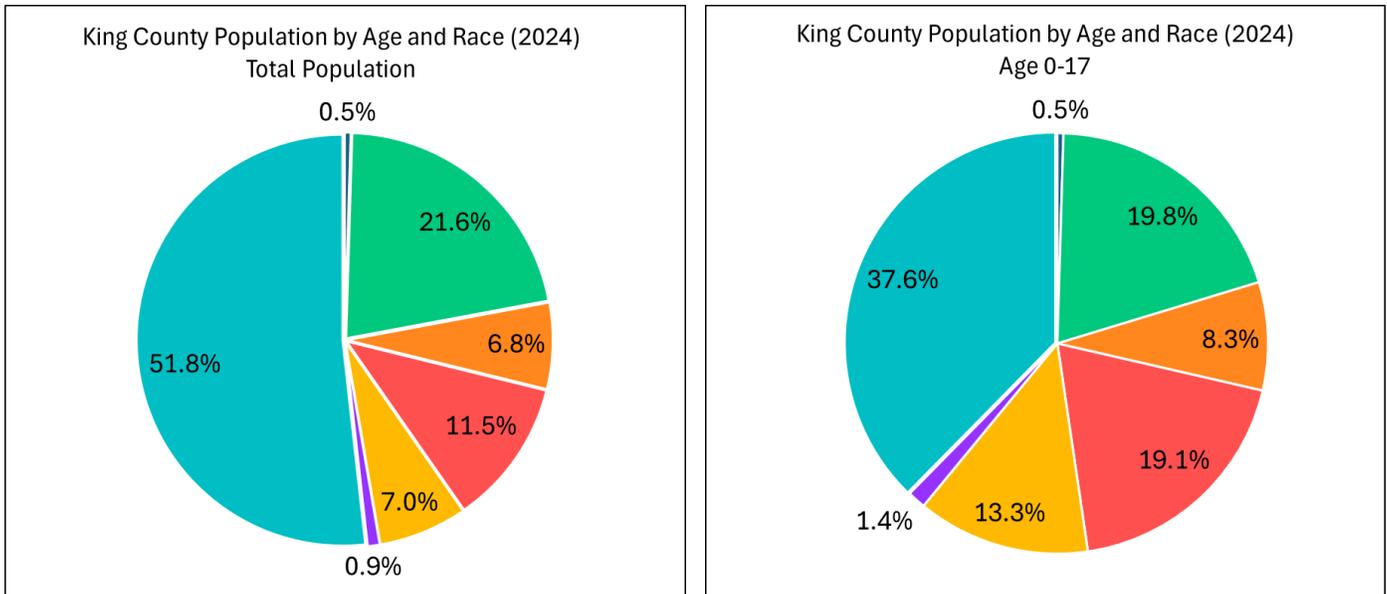
HealthierHere believes all people deserve to see themselves represented in data collected about them and for them. We acknowledge that the data presented in this report is limited by the methods used and gaps present in the original data collection. We work to intentionally present the data we have access to while ground truthing it with our partners and the communities we serve.

King County at a Glance

In 2025, King County’s Population was estimated to be 2,411,700, a 1.41% increase over the last year. Home to 29.72% of the state’s residents, King County is the most populous county in Washington State.¹

King County has seen increasing racial and ethnic diversity over the past several years. Data from Public Health Seattle & King County² show that, in 2024, the predominant races among all King County residents were White (51.8%) and Asian (21.6%), whereas among children ages 0-17 there are higher proportions of almost all races other than White (37.6%) and Asian (19.8%). Further demonstrating the county’s diversity:

- 27.1% of the county’s population were immigrants or refugees³ (2024)
 - compared to 16.1% in WA state
- 33% of King County residents spoke a language other than English at home³ (2024)
 - compared to 22.3% in WA state



- American Indian/Alaska Native
- Asian
- Black
- Hispanic
- Multiple race
- Native Hawaiian/Pacific Islander
- White

Additional data demonstrates that 8.7% of residents were living below the poverty level, though rates were much higher for American Indian/Alaska Native (17.2%), Black (15%), and Hispanic (14.8%) residents.⁴

In October of 2025, 442,323 people or about 19.5% of King County residents were eligible for Medicaid.⁵ In the previous year (2024), 5.3% of the population lacked health insurance, though



rates of uninsurance were much higher for Hispanic (15.2%), American Indian/Alaska Native (14.5%), and Native Hawaiian/Pacific Islander (10.1%) residents.⁶

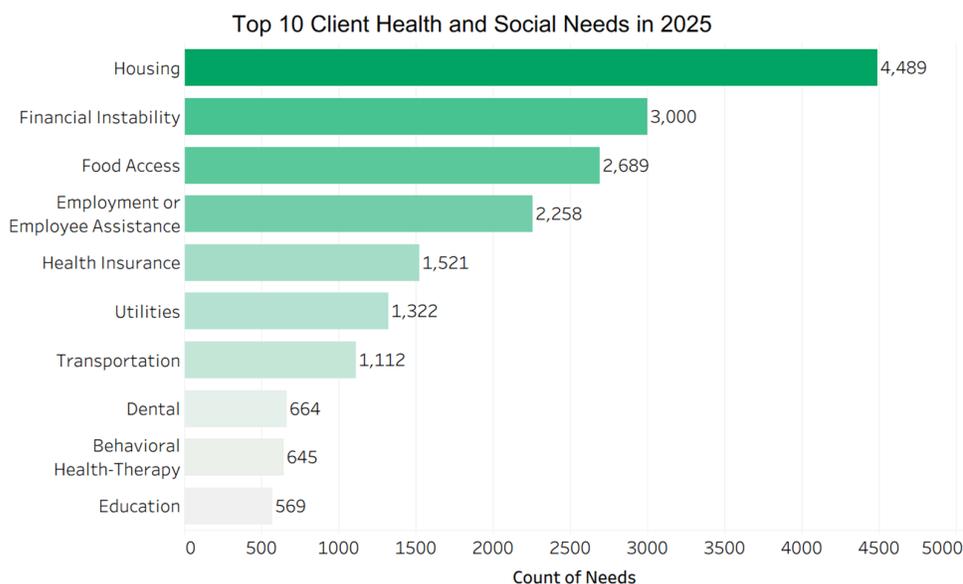
In 2025, the Department of Commerce⁷ estimated that 52,146 King County residents experienced homelessness or housing instability. In the same year, King County added 20,200 new housing units, representing 42% of the State’s total additions.¹

Further insights about the needs and well-being of communities in King County can be seen in HealthierHere’s Community Hub data.

HealthierHere Community Hub Insights

HealthierHere’s Community Hub serves as a care coordination hub for King County, matching individuals and families with community-based workers who help them find and connect to resources, navigate systems, and assess and champion their needs.

In 2025, HealthierHere’s enrolled **5,190** clients in our care coordination program. Of these clients, **41.3%** had four or more health or social needs. The top needs of all clients referred into the program included housing, financial instability, food, employment, and health insurance.



Evolving Needs

HealthierHere understands that the needs of both Community Hub clients and our partner agencies in King County have shifted significantly over the past year due to major federal and state landscape changes impacting the health and health-related social needs of King County residents.

These include changes in federal administration and priorities; executive orders rolling back diversity, equity, and inclusion efforts; increased ICE activity; Medicaid and SNAP funding and eligibility reductions; a prolonged federal government shutdown disrupting public benefits and employment; and Washington State’s substantial budget deficit leading to widespread cuts during the 2025 legislative session.



In response to these changes, HealthierHere conducted a focus group with partners across sectors to better understand impacts on community priorities and needs.

Focus Group Insights

HealthierHere conducted a focus group discussion with six community members representing six unique organizations. Participants were invited via a network sampling approach. Organizational perspectives included a Federally Qualified Health Center, a Non-profit affordable housing organization, a Native-led nonprofit organization, a nonprofit collaborative, a nonprofit youth and family services provider, and an aging and disability services government agency. Focus group questions centered around emerging and changing community priorities. Emerging themes included:

Preservation of Services - community health efforts have focused on preserving current services and benefits while mitigating the effects of federal changes.

Housing - organizations are experiencing an increased demand for housing and housing-related services in addition to the impacts of rising costs for meeting basic needs. The downstream health and social needs impacts are growing.

“...I don't think we've had to have such an intricate set of decision making that has such real consequences for health and well-being for a long time. So, it feels very COVID. Some of this very emergency based, reactive.” - Focus Group Participant

Service Disruptions - as federal benefits are cut or changed, community members are turning to already resource-constrained community-based organizations to

meet their needs. Even when resources are available, people struggle to access timely care.

HealthierHere’s Role - participants emphasized opportunities for HealthierHere to strengthen community convening efforts for coordinated advocacy, cross-sector collaboration, and reduced duplication.

References

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