

Discussion and conclusions

Community stakeholders identified seven questions they wanted the Community Assessment to answer. This discussion and conclusions section draws upon relevant findings from surveys and focus groups to answer these questions. This section also cites secondary data that illustrate and supplement the assessment's conclusions. Appendices C and D provide additional statistics that help to quantify the incidence and prevalence of certain issues, and provide context by identifying trends and comparing conditions in Knox County to Ohio overall.

1. What do Knox County residents need? What needs are already being met and what are the highest-priority unmet needs?

Overall, there was a great deal of overlap between the results of different research methods, and Knox County residents seemed to agree upon a set of issues that emerged as significant unmet needs in the community. Although different groups voiced their own specific concerns, people from different parts of the county, of different ages, and with different incomes or family situations generally seemed to agree upon the importance of these four issues:

- Health care affordability, insurance, access, and quality
- Jobs, economic issues, and support for self-sufficiency (wages, benefits, unemployment, poverty, and lack of money for basic needs)
- Recreational and entertainment activities, especially affordable activities for children, families, and teens
- Mental health, stress, emotional issues, and substance abuse

Health care and insurance. Obtaining health insurance and paying for medical care were the primary health concerns expressed by research participants. This issue is closely tied to concerns about employment and many residents referred to the need for more jobs with benefits in Knox County. The uninsured rate for adults in Knox County rose from 10.0% in 1998 to 14.4% in 2004, above the 12.5% rate for Ohio adults overall in 2004. Meanwhile, the unemployment rate in Knox County dropped to 5.6% in 2004, slightly below the overall Ohio unemployment rate of 6.1% (see Appendix C). Therefore, as uninsurance has risen in Knox County, unemployment has fallen, possibly indicating an increase in jobs that do not provide benefits. Low-income parents talked about access to health insurance in the context of self-sufficiency, identifying it as a critical work support. Senior citizens and low-income parents also talked about the need for improved health care access and quality, calling for things like better doctors and mental health providers, more providers who take public health insurance, an urgent care center, more local health fairs, and better information about medication.

A health assessment survey conducted via mail by the Knox County Health Department (KCHD) in 2004 provides additional information about insurance status and health care access (see Appendix D for data tables). This survey found that young adults age 19 to

30, especially young men, and those with lower incomes—but not extremely poor—were the most likely to lack health insurance. One-quarter of the men age 19-30 who responded to the KCHD survey reported having no insurance, and 28% of those with annual household incomes between \$10,000 and \$24,999 had no insurance. Gaps in coverage were substantial for most of these respondents; 66% of adults age 19-64 with no insurance said they had gone three or more years without health insurance. As expected, respondents without insurance reported problems with accessing medical care. Almost half of the uninsured respondents (46%) said there was a time during the past 12 months when they needed to see a doctor but could not because of the cost.

Jobs and poverty. Survey respondents and focus group participants expressed widespread concern about the availability of jobs with decent wages and training for those jobs. Youth focus group participants cited the lack of high-paying and high-skilled jobs in the area as a reason why educated young people leave Knox County. Low-income parents talked about feeling trapped in a “cycle of poverty” due to low-paying jobs and poor access to benefits. Low-income survey respondents reported widespread problems paying for basic needs, such as food, health care, and clothing.

Poverty rates increased sharply in Knox County in 2004. In 2004, 19.2% of Knox County children were living below the poverty line, up from 12.3% in 2002. Similarly, in 2004 19.4% of all persons in Knox County were living below the poverty line, up from 9.8% in 2002 (see Appendix C). While Knox County’s proportion of children living below the poverty line (100% Federal Poverty Line (FPL)) was slightly lower than Ohio’s proportion, the percent of Knox County children and adults living at 200% FPL was substantially higher than for Ohio overall, indicating a large number of “near poor” or “working poor” families. Indeed, in 2004, 51% of Knox County children were classified as living in households at 200% FPL or below (see Appendix C).

Upward trends in Food Stamp caseloads and the proportion of children eligible for free or reduced-price lunches provide another indicator that poverty is rising in Knox County. While Ohio Works First (OWF, “welfare”) caseloads have remained fairly consistent over the past eight years, the number of Food Stamp cases and individual Food Stamp recipients grew steadily between 2000 and 2004, the most recent year for which data are available (see Appendix C). School lunch program data provide the most up-to-date proxy measure of child poverty. For the 2005-06 school year, 31% of children enrolled in all five school districts in the county were eligible for free or reduced-price lunches. This is up slightly from 27% in 2004-05 and 28% in 2003-04. The number and proportion of students eligible for this program increased in all five districts between the 2004-05 and 2005-06 school years (see Appendix C).

Activities. Having “nothing to do,” particularly for children and teens, was a common theme voiced throughout this assessment. The biggest unmet need appears to be for free or low-cost recreation, entertainment, and cultural activities. Youth called for a new community center that would offer a wide variety of activities, and more businesses that cater to teen interests. Senior citizens expressed concern that youth get into trouble when they do not have enough to do, and suggested creating a new teen center in the county.

Low-income parents were frustrated with the lack of affordable family activities, particularly indoor activities and facilities for the winter months. Parents also stressed the need for more before and after-school care for children.

Mental health, stress, and substance abuse. Survey respondents rated “anxiety, stress, or depression” as the most significant problem in their own households. It is unclear from this result if people are most concerned with stress and emotional issues or more serious and diagnosable mental health problems. Alcohol and drug abuse was also rated as a significant community problem. Asset mapping and comments from parents and youth in focus groups indicate that existing resources for treating mental health and substance abuse problems are not adequate.

The number of new clients served by the Alcohol and Drug FREEDOM CENTER grew steadily between 2002 and 2005. In 2005, alcohol and marijuana continued to be the primary drugs for the majority of their clients (see Appendix C). County-level data about mental health caseloads and the incidence of specific mental health problems were not available for this report.

Other important issues. Several other issues also emerged from two or more research methods as important unmet needs:

- Obesity
- Teen pregnancy
- Unsafe driving habits
- Poor access to transportation for seniors and youth
- Lack of affordable housing and substandard housing
- Family violence and abuse of children or adults

Please see Appendices C and D for secondary data about these issues.

There are currently resources available in Knox County to help people with needs related to virtually all of these high-priority issues. Gaps remain, however, and more can be done to build upon and improve these resources.

2. What assets do we already have to meet these needs?

Community strengths

This Community Assessment identified many strengths and assets. Often citing the benefits of living in a small town, focus group participants listed the following things that make Knox County a good place to live:

- Safety and low crime rate compared to bigger cities
- Friendly people, people looking out for each other, and more relaxed lifestyle
- Green space, parks, trails, and many outdoor places for children to play
- Good schools and a good community for young children
- Central location and access to other cities for goods and services (Columbus, Mansfield, Newark, Coshocton)
- Some high-quality services and programs available for families and senior citizens

Survey results indicate that the vast majority of respondents feel that people in their town or area come together to help each other, gather together formally and informally, and work together on common goals. The vast majority of key informants agreed that Knox County leaders come together to work productively on community issues and respect each other, and that the county actively supports connections between families and the community.

Volunteerism was another community strength. Half of the *Household Survey* respondents (52%) said they regularly do volunteer work, compared to 29% nationwide (US Bureau of Labor Statistics, 2004-2005).

Survey respondents classified many topics as “not an issue” or a “minor issue” in their community, indicating relative satisfaction with the status quo in the following areas:

- Safety and low levels of concern about crime, gang activity, or unsafe schools
- Green space and the environment
- Schools

The findings about perceived community safety are supported by the results of a survey the Knox County Health Department conducted at the 2005 county fair. Among over 400 respondents, 92% said they “feel safe” in their community (see Appendix D).

Perceptions about school quality are also largely supported by other data. The Ohio Department of Education provides school district report cards that rate overall performance on a six-point scale—excellent, effective, continuous improvement, academic watch, and academic emergency. For the 2004-05 school year, four of the five districts in Knox County received the “effective” designation and one (Danville) received the “continuous improvement” designation. For the most part, Knox County school districts often out-perform similar districts, particularly on the 10th Grade Ohio Graduation Test. With the exception of East Knox, 2003-04 graduation rates in county districts exceeded the state requirement of 90%. The 2003-04 graduation rate in the Mount Vernon school district, for example, was 93.5%, compared to 85.9% statewide (see Appendix D).

Assets and resources

Knox County is home to many social service organizations that serve children, youth, senior citizens, and low-income people. Several different agencies report that they provide emergency or financial assistance, housing assistance, transportation assistance, and physical health care.

Significant assets and infrastructure mentioned by focus group participants included:

- Health care providers (Knox Community Hospital, Knox County Health Department, etc.)
- The New Hope Early Education Center and Head Start
- Family home child care providers
- YMCA of Mount Vernon

- Public schools
- Mount Vernon Nazarene University and Kenyon College
- Wide array of safety-net providers (Department of Job and Family Services, Interchurch Social Services, Salvation Army, Kno-Ho-Co Community Action, etc.)
- Retail businesses on Coshocton Avenue

3. Where are there overlaps in service or duplicated services?

No unnecessary overlaps

This Community Assessment did not specifically identify any *unnecessary* overlaps or duplications of social services in Knox County. The *Social Service Provider Survey* and focus groups revealed that there are several emergency assistance providers, youth programs, and senior services in the county. Focus group participants indicated that it was desirable and necessary to have a variety of service providers in these areas. In the parent focus group, participants argued that limited resources and rigid eligibility criteria for emergency assistance programs leave gaps in the safety net instead of actual duplications in service. Youth focus group participants cited several programs related to teen pregnancy, although the overall consensus seemed to be that more could be done to prevent teen pregnancy. Similarly, youth were aware of several church-sponsored teen centers, but many voiced complaints about the rules at these centers and it is not clear from this research if they are duplicative. Finally, seniors argued that they wanted *more* local senior programs. Residents of Fredericktown, Centerburg, and Danville called for services in their own towns, instead of having to rely upon programs in Mount Vernon.

Not enough providers of mental health and substance abuse treatment or employment services and economic development

Given that mental health, substance abuse, jobs, and economic issues have been identified as high-priority needs, it appears that there are relatively few resources available for these problems. For most low-income residents, there is really only one major mental health provider (Moundbuilders Guidance Center) and one substance abuse treatment provider (Alcohol and Drug Freedom Center). In the parent focus groups, participants expressed their frustration with the lack of choice in mental health services.

Similarly, on the *Social Service Provider Survey*, only four organizations reported that they provide “job training or employment opportunities for low-income people” and only two reported working on “economic development.” Comparing this to the 17 organizations providing emergency or financial assistance (utilities, material needs, etc.) and nine organizations providing food assistance, it appears that there are more resources for addressing the symptoms of poverty than resources for preventing poverty and promoting self-sufficiency.

4. Are people aware of existing resources and do they know how to access them?

Most United Way member agencies enjoy high visibility

Overall, many Knox County residents seem to be aware of existing social services. According to the results of the *United Way Agency Awareness and Satisfaction Survey*, the majority of respondents were aware of most United Way member agencies. Emergency assistance providers, such as Interchurch Social Services, and nationally-affiliated organizations, such as the YMCA, Red Cross, and Salvation Army, enjoyed almost universal visibility. Low-income residents, parents, senior citizens, and youth were mostly aware of the organizations that serve them. Overall, Consumer Credit Counseling Service, Compassionate Friends, and the South Vernon Youth League were the only United Way member agencies that were known by fewer than half of survey respondents.

Parents seem aware of government programs and emergency assistance providers, but need more information about eligibility criteria, family activities, and educational opportunities

Large federal and state-funded programs such as Women, Infants, and Children (WIC), Ohio Works First (OWF), Head Start, food stamps, and Medicaid enjoyed high visibility among the parents in the focus groups. Many also seemed to know where to go for help with food, housing, utilities, and clothing. These parents seemed largely aware of existing health care resources and the state-funded child care subsidy program, although there was some confusion about fees at the health department's medical and dental clinics, and about eligibility criteria for the child care subsidy.

Awareness of existing recreational activities for children and families seemed to be low. Many had not heard of the YMCA scholarships for low-income individuals and families. Library story times were only mentioned by one parent, and many resources were not mentioned at all, such as the Children's Garden at the Career Center in Mount Vernon and the Brown Family Environmental Center in Gambier. There appears to be a large opportunity to increase community awareness of family activities in Knox County. Parents suggested posting flyers in public places and putting them in grocery bags, and developing a monthly "family activities bulletin."

Parents perceived a lack of access to secondary and adult education and job training. This may be due to an actual lack of educational opportunities in Knox County and/or to poor awareness of existing programs.

Teens are aware of many—but not all—youth programs and services

Youth seemed to be aware of resources within their own schools, citing help from guidance counselors and teachers, and the existence of support programs and school-based activities. Most seemed to be aware of youth-serving agencies such as the YMCA of Mount Vernon, Big Brothers/Big Sisters, church-sponsored teen centers, 4-H, and the mental health and substance abuse agencies (Moundbuilders Guidance Center and the Freedom Center). The focus group discussions and the *Awareness and Satisfaction* Knox County Community Assessment 2004-2005

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Survey results, however, indicate that many youth may not know about the South Vernon Youth League, MOTA, the Kno-Ho-Co family planning clinic, Consumer Credit Counseling Service, and New Directions. These latter resources may be important as the youth transition into young adulthood.

Computer use and Internet access are fairly common among parents and youth, but not seniors

According to surveys administered to focus group participants, most youth have access to the Internet and could receive information about teen activities and resources online. Eighty-four percent of youth said they had a computer with Internet access at home and 81% said they had used the Internet to find information about recreational activities, health care, or social services. Almost all of the 17 low-income parent focus group participants (94%) also reported that they have a computer with Internet access in their homes, and 41% said they have used the Internet to find information about family activities, health care, or social services. Far fewer senior citizens, however, reported Internet access; only 28% of senior focus group participants had computers with Internet access in their homes.

While these results are based upon small sample sizes, the findings about high levels of Internet access are supported by the 2005 Knox County Health Department county fair survey. Seventy-two percent of this sample of 480 Knox County residents said they had access to the Internet, mostly from their homes. Access varied greatly by educational level. Only 44% of those who did not graduate from high school reported having Internet access, compared to 84% of those with some college or a college diploma. Sixty-six percent of those over age 50 said they had Internet access (see Appendix D).

5. What kinds of barriers do consumers face when trying to get help?

Cost, stigma, lack of transportation, rigid eligibility criteria, and disrespectful service providers are barriers for some low-income parents

Cost and stigma appear to be barriers for low-income families. Long distances and poor access to reliable transportation are barriers to accessing high-quality medical, mental health, and dental services in Columbus and other cities. Providers' refusal or inability to accept public health insurance is another major health care barrier. Inflexible eligibility criteria for a wide variety of programs are sometimes barriers for the working poor, who may earn too much to get help. Finally, disrespectful or unprofessional service providers deter some parents from asking for help.

Cost, lack of transportation, busy parents, and normal adolescent development may deter some youth from getting help

Cost and lack of transportation are the most obvious barriers teens face when they are trying to find "something to do" or "somewhere to hang out." Many of the youth focus group participants referred to how busy their parents are and that most parents work outside the home. This could mean that parents have less time to help their teenage

children solve problems, or to seek or get to activities or social services. Low levels of satisfaction with the mental health and substance abuse treatment providers may also deter some teens from seeking help with those types of problems. Certain aspects of normal adolescent development may prevent youth from using existing resources. Adolescents typically seek independence and freedom. While they need some parental attention and adult supervision, they dislike restrictive rules and environments they feel are too structured.

Isolation and lack of transportation are barriers for senior citizens

Isolation seems to be a barrier to seniors getting help. Some focus group participants shared that they feel alone in tough times. Many are reluctant to call on family, and some seniors shared that their children either have moved away or are too busy with their own lives. Access to transportation is another concern for those who can no longer drive. Seniors pointed to a number of limitations in existing transportation programs (MOTA, FISH, and Station Break) and said that seniors cannot always rely upon these services.

6. How satisfied are consumers with existing services?

Most consumers seem satisfied with most United Way member agencies

The majority of respondents to the *United Way Agency Awareness and Satisfaction Survey* reported that they were “satisfied” or “very satisfied” with most of the agencies they had used, indicating an overall level of satisfaction with these programs among Knox County residents. The United Way member organizations receiving the highest satisfaction ratings were: Hospice of Knox County, Interchurch Social Services, Kno-Ho-Co, New Directions, and the American Red Cross. These organizations largely help people in times of crisis.

Lower satisfaction with mental health, substance abuse, and employment services

The organizations receiving the lowest satisfaction ratings on the *Agency Awareness and Satisfaction Survey* were Moundbuilders Guidance Center, the Alcohol and Drug Freedom Center, and the Knox County Department of Job and Family Services (DJFS). These organizations are each the sole or primary providers of the type of service they provide in Knox County. Lack of choice or competition may adversely affect consumer satisfaction. Furthermore, some of these agencies’ consumers are non-voluntary (e.g., court-ordered to attend), which may also negatively affect their level of satisfaction.

Although the focus group questions were not specifically designed to assess consumer satisfaction, discussions with low-income parents and youth seemed to confirm these survey results. Parents voiced complaints about long waits and the lack of skilled children’s mental health providers at Moundbuilders. Parents expressed a strong desire for an alternative mental health provider in Knox County that will take public health insurance. Some said they go to Columbus for their mental health needs, while others were frustrated because they could not afford to travel out of the county for counseling.

It is difficult to pinpoint specific concerns about DJFS, given that it administers several different programs. There was widespread frustration with OWF's emphasis on full-time work requirements instead of access to secondary and adult education. The "system's" work requirements, work programs, and asset limits—coupled with poor access to education and living wage jobs—was repeatedly described as a "trap" that perpetuates an endless "cycle of poverty." Some parents also said they felt stigmatized for being on assistance and that they had been treated disrespectfully by caseworkers at DJFS. Other parents, however, said they had very good experiences working with individual DJFS caseworkers. Other programs, such as Children's Protective Services, food stamps, Medicaid, PIP, and PRC received mixed reviews.

Youth, particularly Alternative Center students, were quite critical of Moundbuilders and the Freedom Center, although their reasons for dissatisfaction with these agencies are unclear. More research should be done to assess consumer satisfaction with the agencies.

7. What kinds of limitations do providers face when trying to offer help?

This question was not directly addressed by the Community Assessment. However, results of the *Social Service Provider Survey* regarding budget cuts and program changes in 2003-2005 do provide some information about limitations.

Many social service agencies have experienced funding, staff, and program cuts

Overall, more than half of the social service organizations surveyed experienced budget cuts during 2003 and 2004, and decreases in funding were more common than funding increases. Sixty-eight percent of organizations said they experienced some kind of reduction or elimination in funding during 2003, rising to 74% in 2004.

As a result of these funding cuts, many organizations reported that they had to reduce services or staff in some way. About one-third of those surveyed reported some kind of reduction or elimination of services in 2003 or 2004. Thirty-five percent of the agencies reported some kind of elimination or reduction of programs or services in 2003, falling slightly to 29% in 2004. Over one-quarter of the organizations (28%) said they had to turn clients away or start a waiting list in 2003, falling slightly to 23% in 2004. Almost half (47%) said they reduced or consolidated staff in 2003, dropping to 43% in 2004.