

Blueprint for Impact



A Regional Health and Human Services Needs Assessment

Brunswick, New Hanover, and Pender Counties, NC

2005

UNCW MPA Program
Capstone Seminar

Blueprint for Impact

*A Regional Health and Human Services
Needs Assessment*

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Master of Public Administration Program
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Executive Summary

Background

Blueprint for Impact, a regional health and human services needs assessment conducted by the students in the MPA program at UNCW, was commissioned by the Cape Fear Area United Way and conducted from January through April, 2005. The purpose of the assessment is to provide another important tool for understanding the top needs in the region and provide a focus for stakeholders, decision makers, and citizens concerned with the quality of life in Brunswick, New Hanover, and Pender counties.

Methodology

With the assistance of United Way volunteers, the project used the following methods for collecting data from a variety of perspectives on needs:

- Service Provider Survey -- employees from service agencies who work with clients on a daily basis
- Client Survey -- people using key intake offices such as day shelters, health clinics, social service offices, and employment security facilities
- Public Perception Survey -- randomly selected households in the region
- Key Informant Survey -- leaders of organizations with broad perspectives on health and human services needs
- Focus Groups -- members of organizations from a wide variety of fields that serve in the area of health and human services in addition to leaders in business, philanthropy, religion, health, government and education.
- Secondary Data -- existing data sources from governmental and nonprofit research entities

This combination of methodologies produced good representation across the three counties and through the racial spectrum. For example, of the total participants in all surveys and focus groups who identified themselves, 72% were White, 17% were African American, 8% were Hispanic, 2% were American Indian or Alaskan Native, and 1% were Asian or Pacific Islander.

Summary of Findings

Surveys

From an overall regional perspective, data collected from the surveys indicate that issues around affordable healthcare stand out, including lack of affordable medical care, lack of medical insurance, and lack of affordable prescription medications.

The next tier of top needs, in no particular order, are affordable housing, domestic violence, drug abuse, drunk driving, and underage drinking.

In addition to these regional needs, Brunswick County respondents highlighted the lack of affordable day care for adults, lack of public transportation, and teen pregnancy. Crime was highlighted in New Hanover County. Pender County residents cited several other needs in addition to those found at the regional level, including healthcare for the elderly, lack of jobs, lack of public transportation, lack of recreational facilities, and the time it takes to get to medical facilities.

Focus Groups

The focus groups provide a different snapshot of needs that merit mention separately. While survey respondents had a fixed set of need categories from which to respond, focus group participants had the opportunity to rank their top needs after a discussion with other stakeholders.

From an overall regional perspective, additional needs beyond those identified by the surveys, the focus groups centered on youth programs and services, education, services for the elderly, access to mental health services, and affordable childcare.

Brunswick County focus groups also brought up a lack of medical specialists, suspect drinking water, abuse/neglect of children, and problems created by a lack of communication between agencies and groups in a large, diverse county. In New Hanover, a special emphasis on substance abuse was apparent. Pender County emphasized problems stemming from its relative remoteness, including lack of dentists and the distant location of key services.

Finally, where the number of respondents made it possible, the perspectives of particular groups were measured. Africa American clients highlighted the shortage of affordable housing and lack of jobs. Hispanic clients brought up family violence, language barriers, poor housing conditions, and overcrowded living space. In comparing the public

perception of respondents on public assistance versus those from high income households, lack of public transportation and abstinence education stood out for the less affluent, while wealthier households focus more on education needs.

Overall Regional Blueprint of Needs

Regional Surveys
Top Needs

Affordable Healthcare
Affordable Housing
Domestic Violence
Drug Abuse
Drunk Driving
Underage Drinking

Regional Focus Groups
Top Needs

Health/Medical
Youth
Housing
Education
Elderly
Mental Health
Transportation
Employment
Domestic Violence
Childcare

Conclusion

Attempting to rank complex, interrelated health and human services needs across a diverse region with any degree of certainty is a formidable task that must be ongoing. *Blueprint for Impact* hopes to provide further focus to this effort by highlighting needs that rise to the top using a variety of measurement tools -- surveys, interviews and discussions with 1,529 individuals over a three month period. Above all else, this study indicates that needs related to affordable healthcare and access to medical care (including mental health) are a major concern across the board.

In the next tier of needs, the rising cost of living in a highly desirable coastal region is reflected in concerns about affordable housing. The geographic size of the region and the remoteness of some areas exacerbate the multiple problems created by an obvious lack of public transportation, a particular problem for the elderly and the poor. Finally, this is a region that appears to be under significant social stress, given the consistent concerns over issues related to substance abuse and domestic violence.

This document attempts to highlight consistent themes and provide a measure of focus to a vast set of issues. All of the data collected from each survey methodology is included in the text or appendices, along with breakdowns by county as well. Armed with this detail, readers will be able to conduct their own analyses that will hopefully foster focused discussions on the most important needs of specific areas of the Cape Fear Region.

University of North Carolina Wilmington Master of Public Administration Program

May 3, 2005

Dear Cape Fear Community:

On behalf of the graduate students in my Capstone Seminar in Public Administration, I am pleased to submit *Blueprint for Impact*, a comprehensive health and human services needs assessment of Brunswick, New Hanover, and Pender Counties.

The Capstone class is one of the last core classes required of students completing the Master of Public Administration (MPA) program at UNCW. It requires the students to participate in a significant applied research project that integrates the science, processes, and art of public administration.

Blueprint for Impact has been a tremendous experience for my students. They have honed their technical skills in survey research, they have gained experience in the challenges of organizing and conducting community focus groups and interviews, and they have also developed a keener appreciation for the art of relating to a diverse array of groups and individuals.

Commissioned by the Cape Fear Area United Way, *Blueprint for Impact* is an excellent example of how UNCW can partner with the community to provide practical research experience for students, while at the same time providing a needed service to the region.

We are confident that this needs assessment provides another useful tool for the United Way and health and human service providers to have a better understanding of the comprehensive needs in the Cape Fear Region.

I invite you to contact me with any comments or questions at 910-962-3385 or bartht@uncw.edu.

Sincerely,



Thomas J. Barth, Ph.D.
Chair, Political Science
Director, MPA Program

Blueprint for Impact Advisory Board & Volunteers

ADVISORY BOARD

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Website Availability

This full report is available online at the Cape Fear Area United Way Website:

<http://www.cfaw.org>

and at the UNCW MPA Program Website:

<http://www.uncw.edu/pls/mpa/index.htm>

Please direct any questions or comments to:

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UNCW

910-962-3385

Email: bartht@uncw.edu

Methodology

KEY INFORMANT INTERVIEWS

Along with initial suggestions provided by the needs assessment Advisory Board, the key informant list was formalized during the focus group phase. Key informants were chosen from a sampling of the following:

- Members of the Advisory Board
- Executive Directors, Service Provider Entities
- Directors/ Executives of Government Entities
- Executives of Business Entities
- Executives of Funding Entities
- Leaders within religious sectors
- Leaders in minority communities
- Specialists within the Health and Human Service Sector
- Focus Group Invitees who were unable to attend a Focus Group Session
- Town/ City/ Community Leaders

The key informant survey (see Appendix A) was modeled from a sample included in Compass II.

The majority of the key informant interviews were conducted by members of the MPA Capstone Seminar class. Volunteers from outside of the class did conduct some interviews due to the short time frame of the project. All volunteer interviewers were given a letter on instruction (Appendix B) and preliminary questions were answered before they conducted interviews.

Each individual responsible for conducting a key informant interview was given the flexibility of being able to use a face-to-face discussion, a telephone call to the interviewee, or a faxed response.

Prior to being contacted by the interviewer, each key informant was mailed a letter (see Appendix C) explaining the purpose of the project and outlining the process. A copy of the survey was attached.

Interviewers contacted individuals on the key informant list to arrange interview times. Key informants were dropped from the list after three attempts to make contact with no response. Due to this structure, 35 individuals originally listed as key informants were not included in the project outcomes.

As key informant surveys were completed, additional individuals were contacted to cover any noticeable service gaps. In this same vein, organizations determined to be over-represented in focus groups were omitted from the key informant list. The interviews were completed within a five-week period.

A list of Key Informant Participants is included in Appendix D.

Current Board memberships identified by Key Informants are listed in Appendix E.

Key Informant Surveys Completed by Work Location

| | Attempted Surveys | Completed Surveys | Refused Participation |
|--|--------------------------|--------------------------|------------------------------|
| Brunswick County | 32 (26%) | 19 (22%) | 0 |
| New Hanover County | 62 (51%) | 48 (55%) | 1 (100%) |
| Pender County | 21 (17%) | 13 (15%) | 0 |
| Did not Indicate County of Work | 4 (3%) | 4 (4%) | 0 |
| Other | 3 (3%) | 3 (4%) | 0 |
| Total | 122 | 87 | 1 |

Key Informant Breakdown by Gender and Work Location

| | Female | Male | Did Not Indicate | Total |
|---------------------------|-----------------|-----------------|-------------------------|-----------------|
| Brunswick County | 9 | 10 | 0 | 19 (22%) |
| New Hanover County | 19 | 29 | 0 | 48 (55%) |
| Pender County | 9 | 4 | 0 | 13 (15%) |
| Did Not Indicate | 1 | 1 | 2 | 4 (5%) |
| Other | 1 | 2 | 0 | 3 (3%) |
| All Participants | 39 (45%) | 46 (53%) | 2 (2%) | 87 |

Key Informant Breakdown by Race and Work Location

| | American Indian | Asian or Pacific Islander | African American | White | Other | Did Not Indicate | Total |
|---------------------------|-----------------|---------------------------|------------------|-----------------|---------------|------------------|-------------------|
| Brunswick County | 0 | 0 | 1 | 17 | 0 | 1 | 19 (22%) |
| New Hanover County | 1 | 1 | 11 | 35 | 1 | 0 | 49 (55%) |
| Pender County | 0 | 0 | 3 | 10 | 0 | 0 | 13 (15%) |
| Other | 0 | 0 | 0 | 3 | 0 | 0 | 3 (3%) |
| Did Not Indicate | 0 | 0 | 0 | 2 | 0 | 2 | 4 (5%) |
| All Participants | 1 (1%) | 1 (1%) | 15 (17%) | 67 (76%) | 1 (1%) | 3 (4%) | 88 (100%)* |

* More than one race was listed

Key Informant Breakdown by Primary Occupation and Work Location

| | Business Executive | Public Executive | Professional | Administrative Support | Did Not Indicate | Other | Total |
|-------------------------|--------------------|------------------|-----------------|------------------------|------------------|----------------|-------------|
| Brunswick County | 7 | 10 | 0 | 1 | 0 | 2 | 20 |
| New Hanover | 14 | 22 | 12 | 0 | 0 | 5 | 53 |
| Pender County | 2 | 7 | 2 | 1 | 0 | 1 | 13 |
| Did Not Indicate | 0 | 1 | 0 | 0 | 2 | 1 | 4 |
| Other | 2 | 1 | 0 | 0 | 0 | 0 | 3 |
| All Responses | 25 (27%) | 41 (44%) | 14 (15%) | 2 (2%) | 2 (2%) | 9 (10%) | 93 * |

* More than one primary occupation was listed

SERVICE PROVIDER SURVEYS

The service provider survey is an assessment of health and human service needs as seen by service providers themselves. The survey asked about needs the provider sees in the community when working with their clients. We asked staff members who directly work with the clients the agency serves to complete the survey; that is, someone who has daily contact with clients and has insight into their needs.

The list of service providers was taken from the 2004 - 2005 Community Resources Directory produced by *First Call for Help of Coastal Horizons Center, Inc.* The directory is a free and confidential information and referral service for those in need in the community. Providers were initially informed of and invited to participate in this survey by e-mail or fax (see Appendices F and G), using e-mail addresses or fax numbers obtained for the listed organizations and programs in the directory. Eight additional agencies were added at the request of United Way.

A copy of the survey is attached as Appendix H. SurveyMonkey.com was used to allow participants to complete the survey on-line. SurveyMonkey.com is a well known proprietary software that provides on-line survey support. A link to the survey site that could be used to complete the survey and submit their answers from their own computer was sent to all participants. They were instructed to contact us if they experienced any problems with access to or submission of the survey. If a provider did not want to participate, a link was included that if clicked would remove them from the distribution list. SurveyMonkey.com collected and analyzed survey responses.

Two reminder e-mails were sent to providers who had not yet completed the survey or had not requested to be removed from the distribution list. See Appendices I and J.

Providers were given the option of having a Word version of the survey e-mailed to them so they could complete the survey document and return it as an e-mail attachment or via fax. All such surveys (e-mailed and faxed) were entered into the SurveyMonkey.com database to be analyzed.

Two hundred and ninety-one organizations and programs were sent e-mails and fifty-two were sent faxes, for a total of three hundred forty-three requests. At the end of the survey period, ninety-two surveys had been completed, for a response rate of 26.82 percent. A list of respondents is included in Appendix K.

Service Provider Survey Respondent Breakdown by County

| County | Number of Respondents |
|------------------------------------|------------------------------|
| Brunswick | 16 (17%) |
| New Hanover | 54 (59%) |
| Pender | 9 (10%) |
| New Hanover & Pender | 2 (2%) |
| NH, Pender, & Brunswick | 8 (9%) |
| Other | 3 (3%) |
| Total | 92 |

CLIENT SURVEYS

The client survey was also modeled using the Compass II software. It is based on a straightforward ranking scale.

The first portion of the survey centers around 39 themes or anticipated problems in our community. Each problem is given five potential responses: not an issue; minor issue; moderate issue; serious issue; or don't know. These responses allow the reader to begin thinking of the various problems and force them to rank the issues.

The last portion of the survey is concerned with demographics of the reader. The demographics allowed us to group data in various ways and find the most important issues to the different communities in the three surveyed counties.

The survey was pre-tested on members of the MPA Capstone Seminar class and United Way volunteers in order to discover design flaws. We made minor changes to clarify certain questions.

While conducting this survey, we had a Spanish version in hand, in order to get a good representation of the Hispanic population. See Appendices L and M for copies of the English and Spanish versions of the surveys.

The client survey was conducted evenly in the three counties. A total of 27 sites were used in this research. Appendix N contains a listing of these sites. Some sites served clients from multiple counties. This situation occurred primarily in New Hanover County, which helps explain why New Hanover respondents outweigh the other two counties.

Client Survey Respondent Breakdown by County

| Client Survey Demographics | Total |
|-----------------------------------|--------------|
| Brunswick County | 191 (31%) |
| New Hanover County | 241 (40%) |
| Pender County | 134 (22%) |
| Did not indicate | 43 (7%) |
| All Participants | 609 |

Client Survey Racial Composition

| Racial Composition | Total |
|---------------------------|--------------|
| African American | 107 (18%) |
| American Indian | 6 (1%) |
| Asian | 2 (.3%) |
| Hispanic Origin | 75 (12%) |
| White | 303 (50%) |
| Others | 45 (7%) |
| Did not indicate | 71 (12%) |
| Total | 609 |

PUBLIC PERCEPTION (TELEPHONE) SURVEY

A telephone survey was used to determine public perception of unmet needs by contacting randomly selected households in Brunswick, New Hanover, and Pender Counties.

A telephone survey questionnaire was designed to examine six different types of community health and human service issues:

- 1) Basic issues
- 2) Family issues
- 3) Physical or mental health issues
- 4) Employment issues
- 5) Senior citizen issues
- 6) Access to and use of services.

The questionnaire was developed using Compass II software. Previous studies used as guides included the 1999 United Way Quality of Life Survey and UNCW 2002 - 2003 Coastal Cape Fear Quality of Life Survey. In addition, the research team proposed items.

The ranking scale identifies issues as: strong problem; moderate problem; minor problem; not a problem; or, don't know. There is also an open-ended section asking respondents to rank their top three biggest needs in the area of health and human services. The survey ends with a demographic questionnaire. The survey is attached as Appendix O.

Once the questionnaire was finalized, a pre-test was performed over a two-day period by informal in-person interviews. The pretest provided an indication of typical length of survey time and additional feedback.

A field pretest was performed in a one-night telephone interview on February 23. The pretest helped to estimate length of time per survey and the potential number of surveys that could be completed per night, and allowed for additional training for staff. In addition, it allowed for the testing of software programming and hardware.

The UNCW Survey Research Laboratory (SRL) was used for data collection. The SRL provides data collection services in a variety of methodologies. Telephone interviewing is the most frequently used method. The SRL uses a well-defined telephone

survey system to randomly select numbers and handle situations when there is no response or the line is busy.

The SRL uses Computer Assisted Telephone Interviewing (CATI) software. See the discussion below under **Software Programs Used** for additional information.

The most recent telephone listings for the region were used as a basis for random sampling of numbers. Household listings were drawn at random from the directory, and three random digits replace the last three digits of its phone number, giving non-listed numbers and numbers of residents who are not in the directory the same chance of being called as numbers that are in the directory.

Experienced student assistants conducted field training of data collection personnel. Multi-disciplinary expertise with graduate training in survey research, statistics, and computer programming was a prerequisite. Supervisory staff were present throughout the telephone survey for monitoring and quality control.

Telephone surveying began on February 24, 2005, and continued until April 22, 2005. Phone calls were made between the hours of 6:00 pm and 9:00 pm, Sunday through Friday. Each survey was estimated to take 26 minutes.

A total of 28,056 phone calls were made. Non-respondent phone numbers were contacted a minimum of 10 times or until an answer was received. The survey refusal rate was 79%.

The results are based on 601 interviews of which 499 completed the entire survey. The respondents were a randomly selected group of residents 18 years of age or older from the three county area

Data was then transferred into SPSS (see the discussion below under **Software Programs Used** for additional information) and Microsoft Excel. The data used in this report have been weighted by gender, age, and county to correct for the overrepresentation or under representation of known socio-demographic groups. For example, seventy percent of the respondents were female.

Sample Error for the phone survey, using the completed number of surveys, was:

| | |
|-------------------|-----------|
| Region: | +/- .0439 |
| Brunswick County: | +/- .0717 |

New Hanover County: +/- .0702

Pender County: +/- .0918

Public Perception Survey Breakdown by Race

| | American Indian | Asian or Pacific Islander | African American | White | Other | Total |
|-------------------------|-----------------|---------------------------|------------------|-----------|---------|------------|
| <i>All Participants</i> | 10 (2%) | 6 (1%) | 61 (12%) | 394 (79%) | 28 (6%) | 499 |

Public Perception Survey Hispanic Breakout

| | Hispanic | Other | Total |
|-------------------------|----------|-----------|------------|
| <i>All Participants</i> | 15 (3%) | 484 (97%) | 499 |

Public Perception Surveys Completed by Work Location

| | Attempted Surveys | Completed Surveys | Refused Participation |
|---------------------------|-------------------|-------------------|-----------------------|
| Brunswick County | 211 (35%) | 188 (38%) | 23 (23%) |
| New Hanover County | 249 (41%) | 196 (39%) | 53 (52%) |
| Pender County | 141 (24%) | 115 (23%) | 26 (25%) |
| Total | 601 | 499 | 102 |

FOCUS GROUPS

The purpose of the conducting focus groups was to provide a comprehensive and objective analysis of the health and human service needs in Brunswick, New Hanover and Pender counties from the perspective of existing service providers and leaders in business, philanthropy, religion, health, government and education.

To identify individuals in each of these sectors, we consulted the:

- United Way staff;
- Needs Assessment Advisory Board;
- 2004 - 2005 Community Resources Directory produced by *First Call for Help of Coastal Horizons Center, Inc.* ;
- Council of Government's Public Officials Directory;
- Greater Wilmington Chamber of Commerce web-listing of Nonprofits ;
- North Carolina Association of Nonprofits;
- County School System websites for Brunswick, New Hanover and Pender Counties;
- County government websites for Brunswick, New Hanover and Pender Counties;
- Federal Tax Form I-990s for Nonprofits; and
- Referrals from faculty, community leaders, and staff in the health and human service fields.

We convened a minimum of three focus groups in each county, in various locations, to obtain diverse perspectives. Focus group start times were staggered between the mornings, late afternoon, and evening to accommodate different schedules. Due to overwhelming interest in New Hanover County, we added four additional focus group sessions. A list of meeting sites has been included in Appendix P.

With desired participants established and sites confirmed, we began the task of contacting individuals to request their participation. First, each potential participant was sent a letter that outlined the purpose of the project and the details of the focus groups. Participants could reserve a place in a session by calling a phone number with a voice-mail box or by emailing the needs assessment team at an account created for this use

(needsassessment@uncw.edu). All registrant names were entered into a master database. A listing of participants is provided in Appendix Q.

Due to the low registration figures in Brunswick and Pender Counties two weeks prior to the start of the focus groups, phone calls were made to all individuals on the participant lists who had not registered. The additional contact boosted attendance in both of these counties. Twenty-four hours prior to each focus group session, registrants received a confirmation phone call reminding them of the meeting location and start time.

To maintain consistency across the thirteen focus groups, six *Blueprint for Impact* assessment team-members set-up and facilitated the sessions. At each session, one person served as the focus group facilitator. A second team member was present to serve as a recorder. The recorder was responsible for taking notes manually, in addition to operating an electronic recording device. Participants were given the opportunity to agree to the taped session by the use of a consent form at each place setting.

Prior to the start of each session, the two team members would set-up the room. A focus group checklist (Appendix R) was used to ensure consistency. A registration form, two different colored index cards, a pen, and a name card were placed at each seat.

Each session was scheduled to last no more than ninety minutes. A script was created by the assessment team to ensure consistency in the sessions. See Appendix S for the outline of this script.

The recorder was responsible for participant follow-up. At least twenty-four hours after the focus group session, a follow-up email was sent to participants thanking them for their participation. They were also given the chance to reply to the email if they had other thoughts that came to them after the session.

Each focus group session tape was transcribed. The manual notes of the recorder were also typed. The collected index cards were summarized. Finally, data from the index card responses was entered into a database.

Gender Breakdown of Focus Group Participants

| | Female | Male | Total |
|--------------------------------|-----------------|-----------------|-----------------|
| Brunswick County | 22 | 20 | 42 (30%) |
| New Hanover County | 42 | 34 | 76 (54%) |
| Pender County | 16 | 6 | 22 (16%) |
| <i>All Participants</i> | 80 (57%) | 60 (43%) | 140 |

Race Breakdown of Focus Group Participants

| | African American | American Indian | Hispanic | White | Did Not Indicate | Total |
|--------------------------------|-------------------------|------------------------|-----------------|------------------|-------------------------|-----------------|
| Brunswick County | 5 | 0 | 0 | 37 | 0 | 42 (30%) |
| New Hanover County | 10 | 2 | 10 | 51 | 3 | 76 (54%) |
| Pender County | 5 | 0 | 0 | 16 | 1 | 22 (16%) |
| <i>All Participants</i> | 20(15%) | 2 (1%) | 10 (7%) | 104 (74%) | 4 (3%) | 140 |

SOFTWARE PROGRAMS USED

In the *Blueprint for Impact* needs assessment, COMPASS II was used a framework for our surveys. The COMPASS II software is a needs assessment system developed for the United Way as a national template to help form the framework of new surveys.

The Computer Assisted Telephone Interviewing (CATI) software was used in conducting the Public Perception Telephone Survey. CATI provides a reliable database of residential phone numbers. It enters responses directly into a computer, saving data input time and reducing potential inputting errors. The CATI software is designed for automatic question sequencing, direct data entry, and interviewer productivity analysis. CATI handles the administrative and telephone functions associated with interviewing, such as sample management, quota control, call disposition monitoring, productivity reporting, rapid dial or predictive dialing, and interviewer monitoring and rating.

The Statistical Package for the Social Sciences (SPSS) predictive analytic software was used to decipher the data results in an organized and usable fashion.

DATA ANALYSIS METHODOLOGY

Data Entry

After all the Key Informant, Client, and Service Provider surveys were collected, the responses were entered into electronic form. Once in electronic form, the data was uploaded into SPSS. The questions were analyzed for both frequency and distribution.

Mean Averages

The Community Challenges and Issues responses were assigned a numerical value for each survey as follows:

| <u>Client Survey</u> | <u>Key Informant Survey</u> | <u>Service Provider Survey</u> |
|----------------------|-----------------------------|--------------------------------|
| Not a Problem = 1 | Not an issue = 1 | Not a Problem = 1 |
| Minor Problem = 2 | Minor Issue = 2 | Minor Problem = 2 |
| Moderate Problem = 3 | Moderate Issue = 3 | Moderate Problem = 3 |
| Major Problem = 4 | Major Issue = 4 | Major Problem = 4 |

Rankings were then determined by the mean average of the responses each question received. Rankings were copied into Excel and sorted by descending ranking order. Appendices T and U contain these lists.

Focus Group Analysis

Each participant that attended a focus group was asked to fill out a note card that ranked the top three health and human service needs. The note card responses were compiled into Excel by location of focus groups and by county. The responses were assigned a value of 3 for the top need, 2 for the second need, and 1 for the third need. Because the note card responses were from an open ended question, the responses were subject to interpretation. Unique note card responses or responses that were unintelligible were removed from the analysis. This was a small amount of the note card responses. Viewing the note cards, it became obvious that general categories were emerging such as youth, health care, and housing. Examining the general categories, several subcategories emerged. For example, the general category for youth consisted of subcategories of youth

services, youth education, youth health, youth mental health, etc. Each category and subcategory received a code for data analysis. For responses that had multiple categories listed (i.e., the need to educate youth on health issues) each item got a code. After each response was coded, the information was loaded into SPSS.

Overall Ranking Method

The results of the Regional Client, Key Informant, Service Provider, and Public Perception rankings were combined for an Overall Regional Needs ranking. In order to focus on the top tier of all needs, any category that was listed at least once in the top five of any of the surveys was included in the Overall Regional Needs Ranking. Due to the large number of needs related to high cost of healthcare, a general category of Affordable Healthcare was created. This category includes five separate needs: lack of medical insurance, affordability of medical insurance, cost of healthcare treatments, lack of affordable medical care, affordability of prescription medications, and lack of affordable prescription medicine.

The top five county needs from each of the four surveys were used in a similar fashion to determine the overall county rankings.

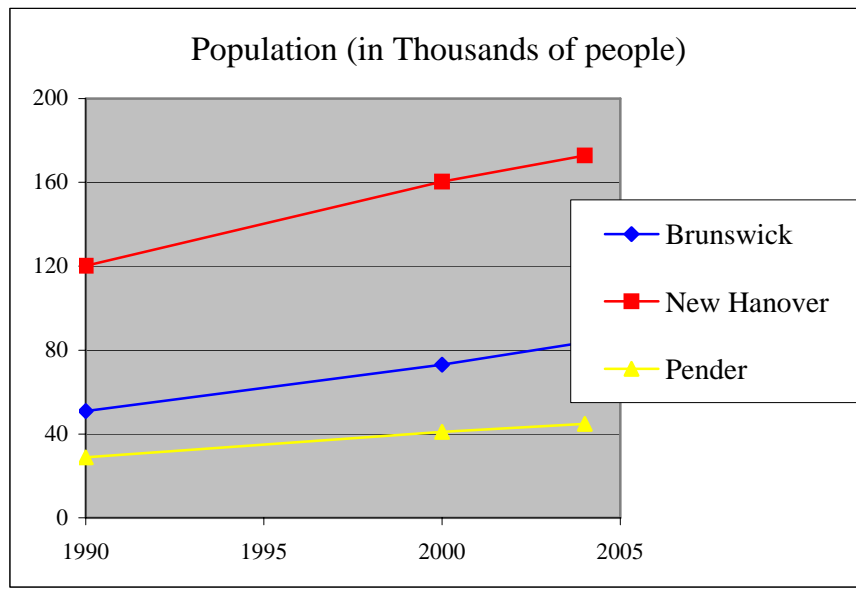
Beyond affordable healthcare, there is no basis for a particular ranking so all other top tier needs are listed in alphabetical order.

Population Snapshot

This section of the needs assessment provides an overview of the populations of New Hanover, Pender, and Brunswick Counties to provide context for the data in the other sections of the report. Implications of the trends presented in this section will be apparent throughout the report. Unless otherwise indicated, all data in this section are from the U.S. Census, the North Carolina Employment Security Commission, and the North Carolina Department of Public Instruction.

POPULATION GROWTH

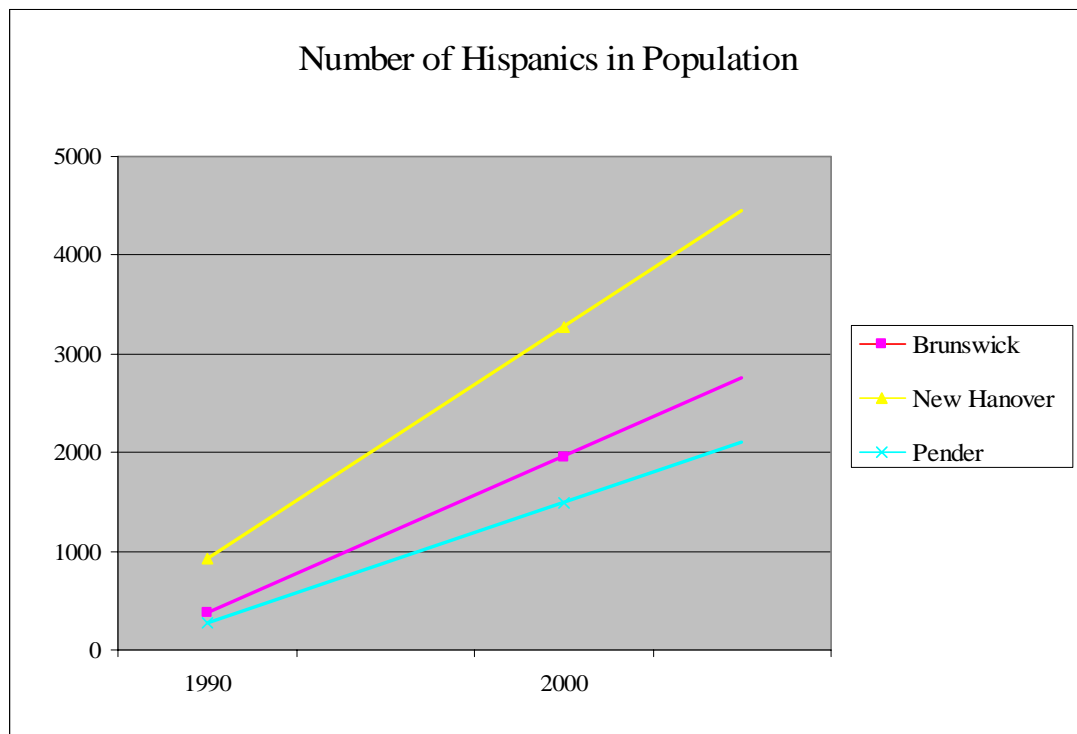
All three counties continue to gain population, increasing by an average of 39.8 percent from 1990 to 2004, with a three county population of 301,387. Brunswick County has experienced the most robust growth of all three counties with a rate of growth of 43.5 percent since 1990. This growth is due to the growing popularity of the area as a retirement community plus the emergence of less expensive bedroom communities for individuals employed in the Wilmington area. The three-county area of study is considered one of the fastest growing areas in the state, experiencing 21.4 percent growth since 1990. Given the availability of highly desirable undeveloped property near the coast and the influx of industries such as Verizon and expansion of PPD, Inc., this growth trend is projected to continue into the near future. This rapid growth places tremendous pressure on all aspects of health and human services, particularly school systems.



RACIAL AND ETHNIC DIVERSITY

The three-county region is a predominately white community. Interestingly, the population distribution in the three counties is proportionally similar in that there have been increases of white, African American, and other racial communities without any significant imbalance in one county over another. In other words, all three counties have a similar racial makeup.

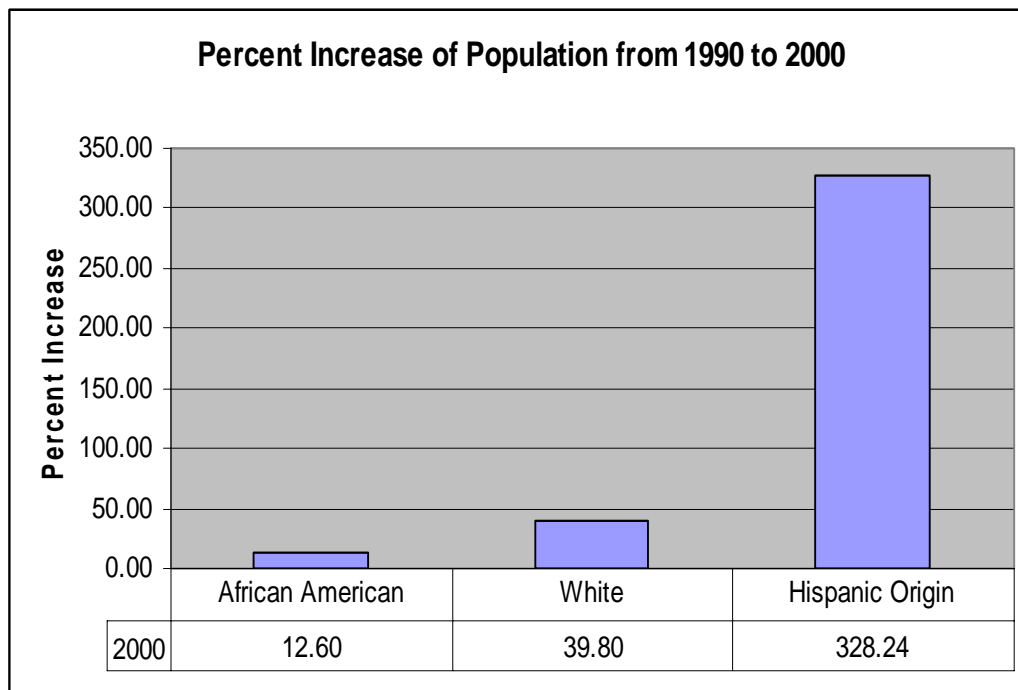
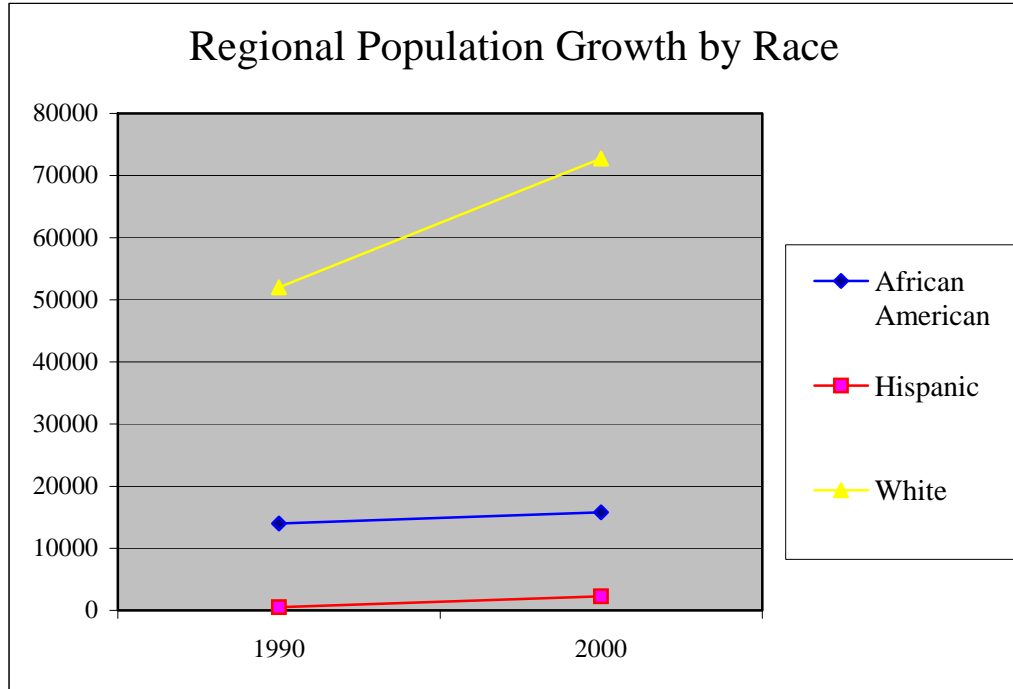
However, diversity is on the rise. It is important to note that the third largest racial group in all three counties is the Hispanic community, making up 2.76 percent of the population in each county, on average.



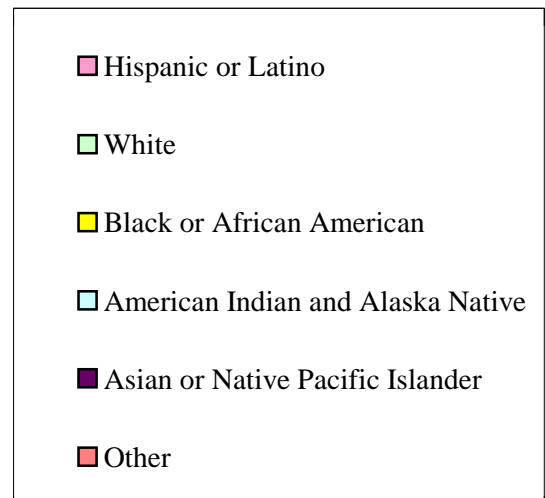
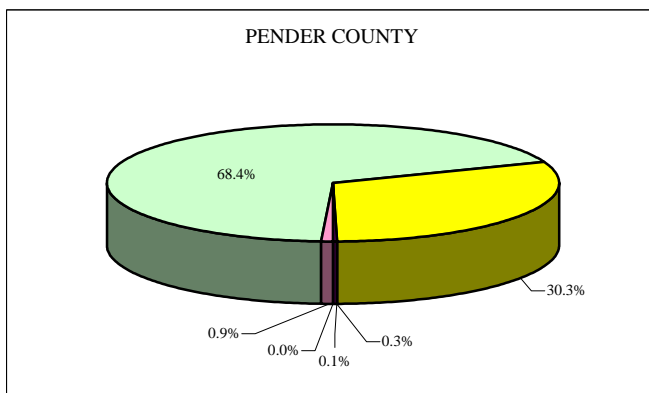
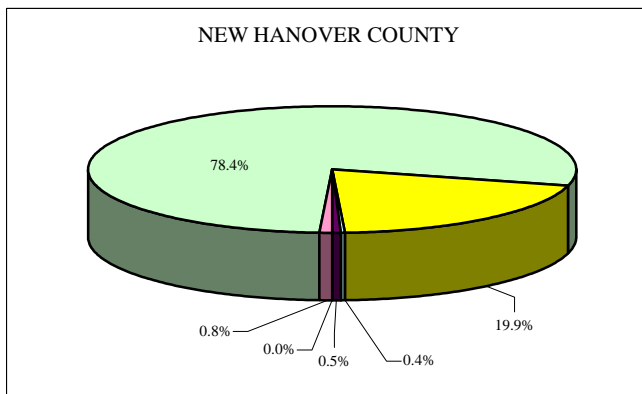
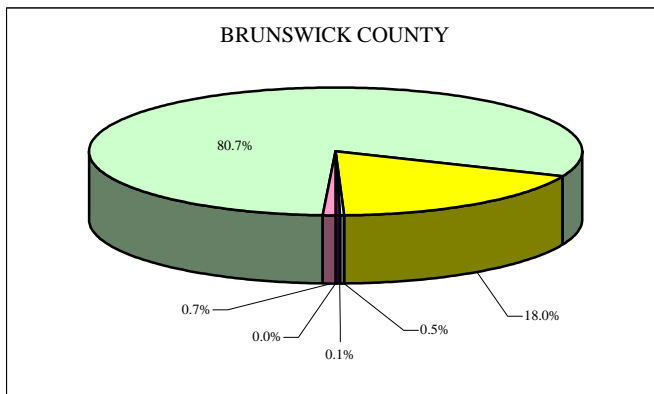
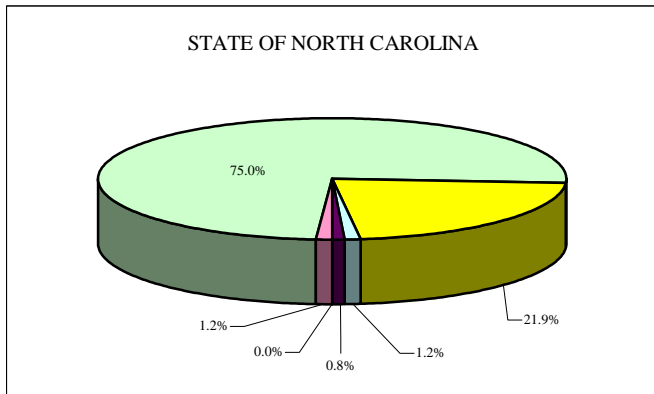
Percent Increase From 1990 to 2000

| | |
|----------------|------|
| North Carolina | 21.4 |
| Brunswick | 43.5 |
| New Hanover | 33.3 |
| Pender | 42.4 |

Between 1990 and 2000, the Hispanic population increased eight times faster than the white population and 25 times faster than the African American population. They are a rapidly growing segment of the tri-county population.

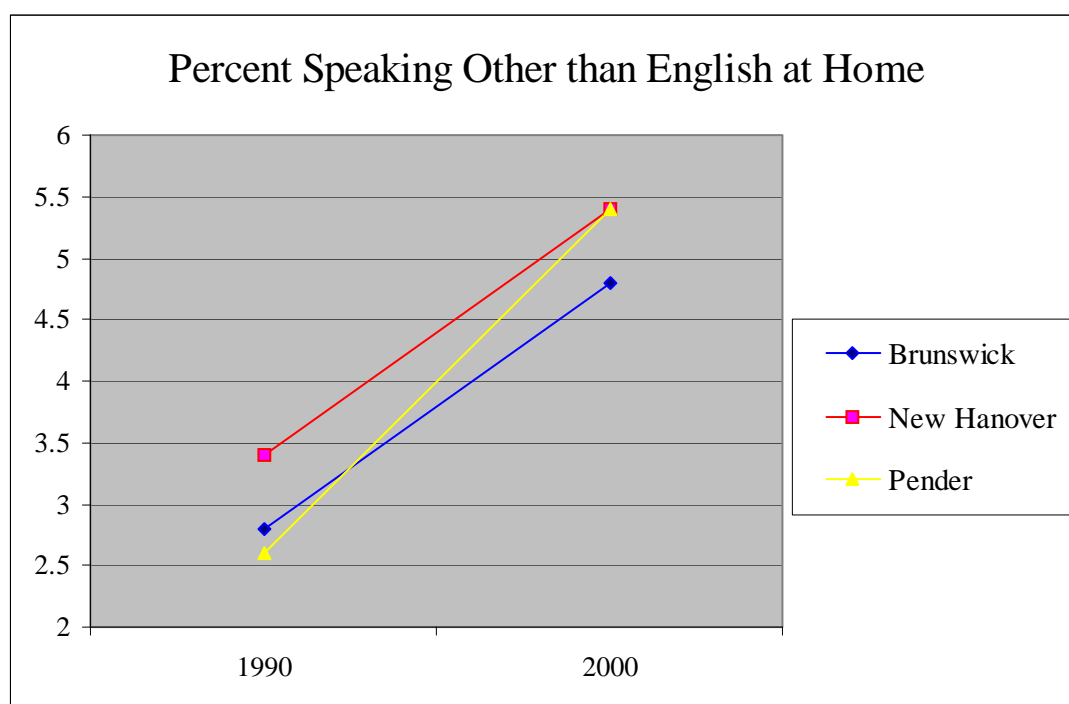


The rapid growth in the Hispanic community is not just the result of a seasonal influx of migrant workers; but families laying roots in the community as well. Furthermore, experts serving the Hispanic community suggest that official population estimates of this population under-represent the true picture.



NON-ENGLISH SPEAKING POPULATION

Just over 14,000 residents in the study area speak a language other than English at home, a number that has nearly doubled since 1990. In 1990, the three-county average of persons speaking a language other than English at home was 2.9 percent. In 2000, that number increased to an average of 5.2 percent. This trend places pressure on health and human services agencies to hire or train employees in other languages, primarily Spanish.



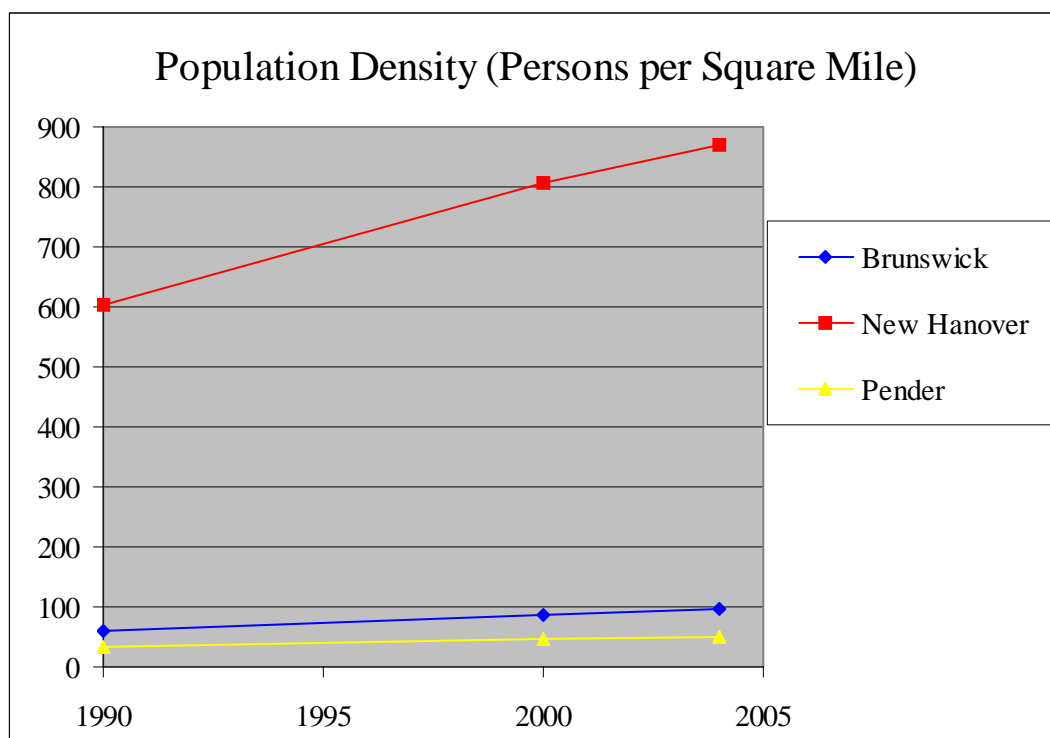
GEOGRAPHIC RESIDENTIAL PATTERNS

One of the more obvious geographic pattern changes is the amount of area classified as urban vs. rural. In New Hanover County, 82 percent of the population lives in what can be considered an urban area, with the remaining 18 percent living in rural areas. In Pender and Brunswick Counties, nearly 100 percent of the population lives in what can be considered a rural area.

Population density in New Hanover County is also significantly higher than in the other two counties with 888 persons per square mile, which is 783 percent higher than Brunswick County and 1,579 percent higher than Pender County.

These statistics demonstrate the increasing importance of good transportation systems in Brunswick and Pender Counties and accessibility of health and human services providers.

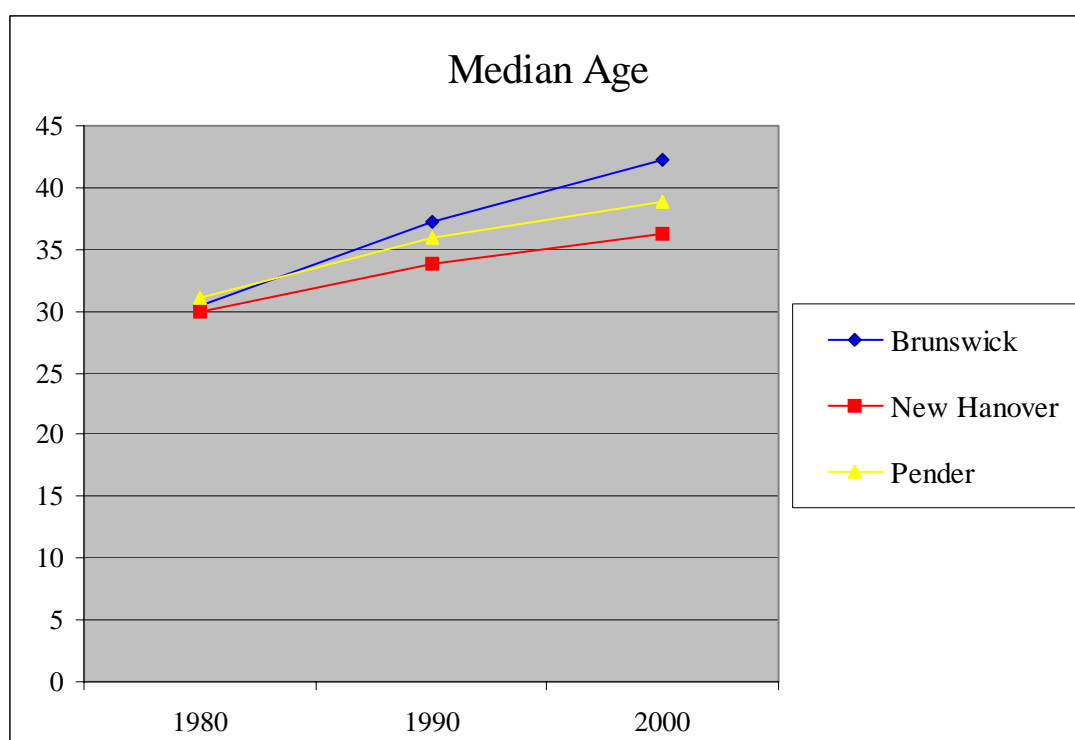
It is also important to note that although Brunswick and Pender Counties are considered rural, a pattern is developing where population density is increasing rapidly along the coast while other areas of the counties remain more sparsely populated.



AGE PROFILE

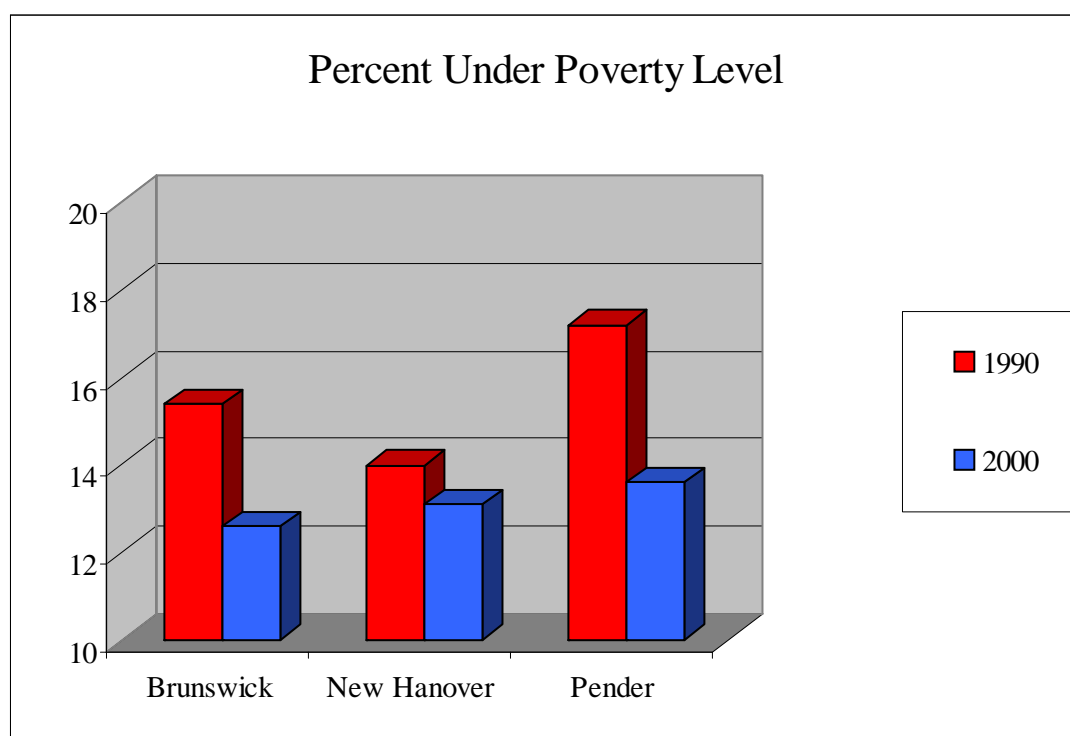
The population of the three counties is aging, a trend that mirrors the nation. The median age has increased 8.6 years since 1980. The median age in the 2000 census ranged from 36.3 (New Hanover) to 42.2 (Brunswick), with Pender in between.

An aging population has a host of significant implications for health and human services providers. More individuals are on fixed incomes, health needs increase, and accessibility becomes a major issue in a region dependent on the automobile for transportation.



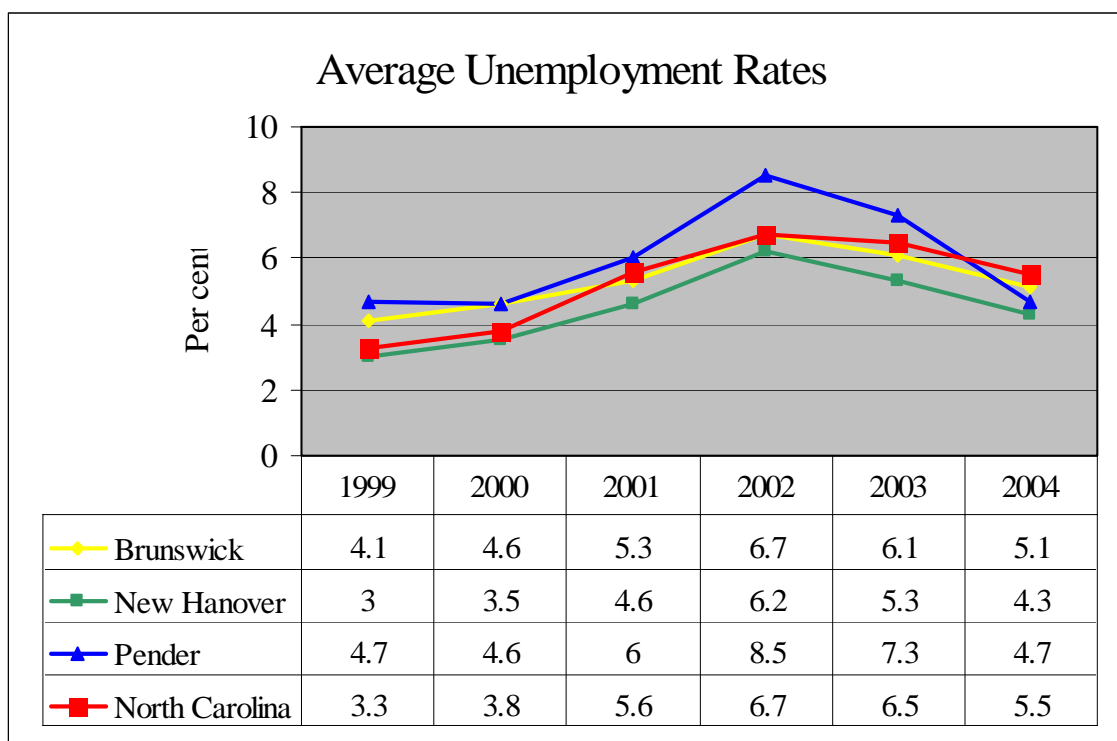
POVERTY LEVELS

The number of people living below the poverty level is dropping in the three-county study area. The average percent of individuals under the poverty level decreased from 15.5 percent in 1990 to 13.1 percent in 2000. However, what appears to be an optimistic picture overlooks the fact that in a region with a relatively high cost of living, a living wage is far above the official poverty line. The annual federal poverty threshold in 2003 for a family of four was \$14,810.

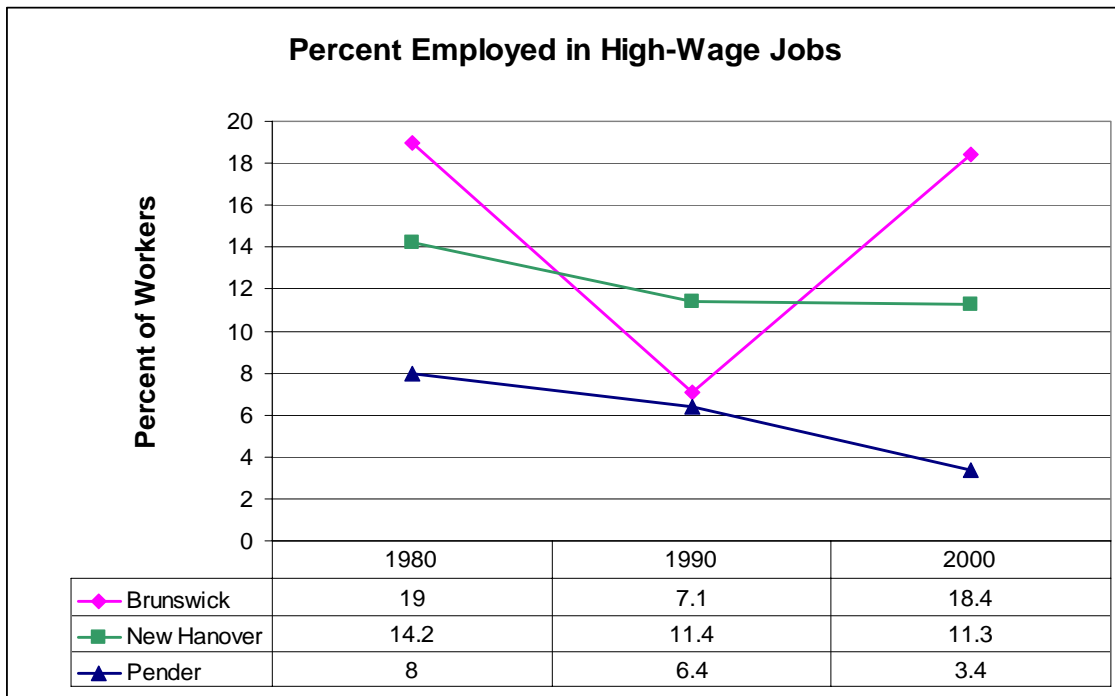


UNEMPLOYMENT RATE

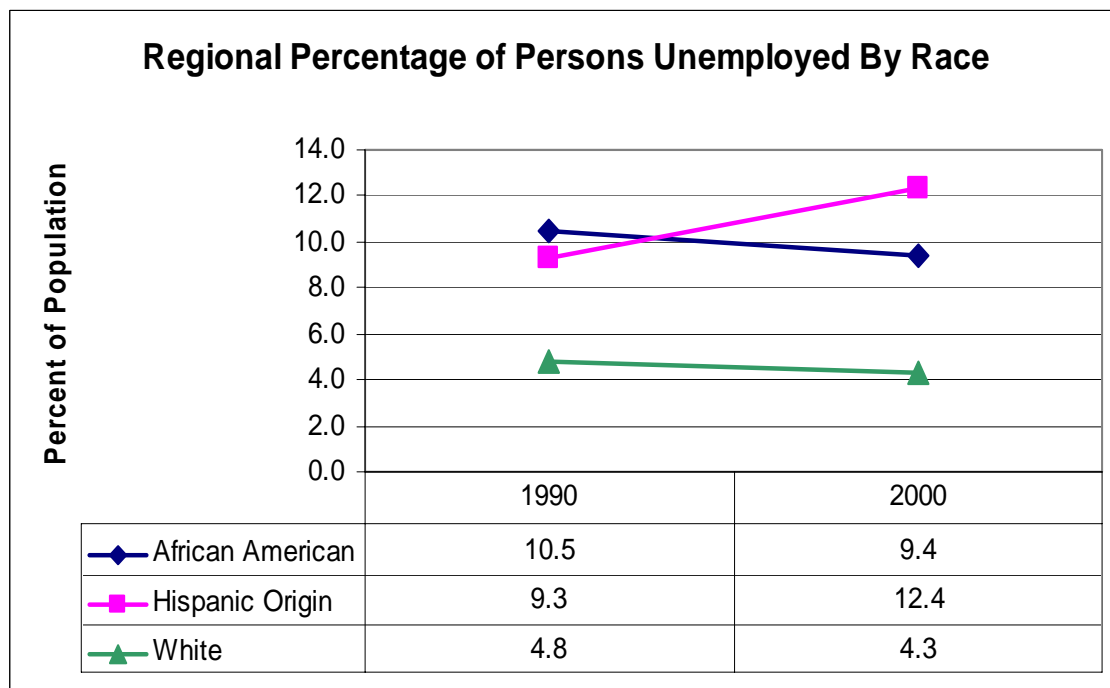
Unemployment rates are declining throughout the region after reaching a peak in 2002, but this picture obscures the fact that a high percentage of jobs in the region are in the lower wage service industry areas or available only seasonally. In addition, the unemployment rates are much higher for African Americans and Hispanics.



SOURCE: North Carolina Employment Security Commission, Local Area Unemployment Statistics (LAUS) Program report, (<http://www.ncesc.com/lmi/laborStats/laborStatMain.asp>)



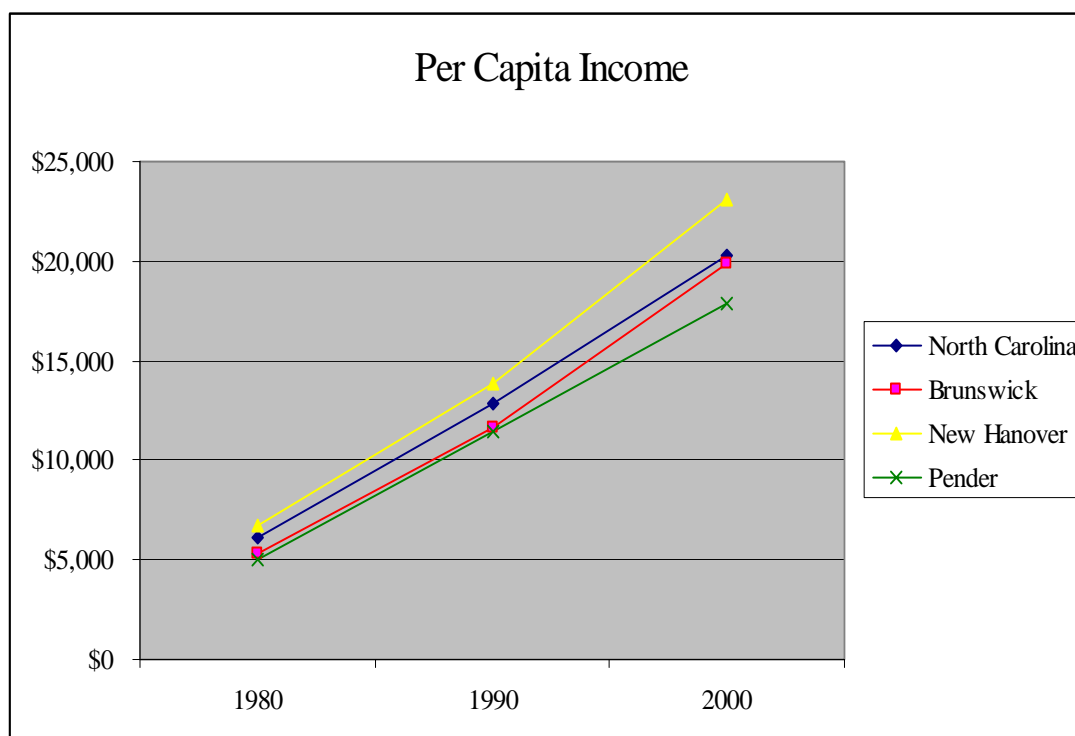
SOURCE: 2004 UNCW Quality of Life Report (from U.S. Department of Commerce data)



INCOME

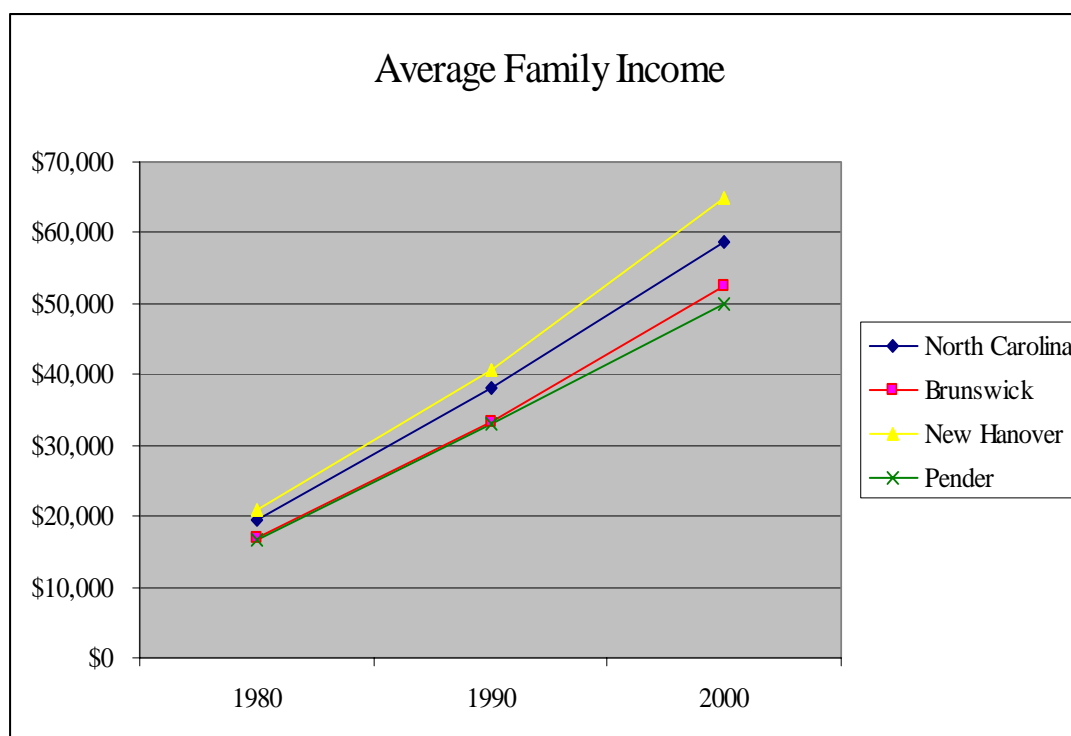
Over the last ten years, average per capita incomes increased 70% in Brunswick County, 67% in New Hanover County, and 56% in Pender County, compared to a 58% average increase for the state. Brunswick County drew significantly ahead of Pender County and was able to match the state average, but did not come near New Hanover County's average.

Relative to the average income for North Carolina residents, average per capita income in Brunswick County increased from 87% to nearly 100% between 1980 and 2000. Average per capita income in New Hanover County has always been about 10% higher than the state average. And, average per capita income in Pender County has increased since 1980 from just over 80% to nearly 90%.



Over the last ten years, average family incomes increased 58% in Brunswick County, 60% in New Hanover County, and 51% in Pender County, compared to a 54% average increase for the state. New Hanover County average family incomes remained significantly higher than the rest of the region.

Relative to the average income for North Carolina residents, average per capita incomes in Brunswick and Pender Counties increased little between 1980 and 2000, averaging approximately 87%. Average per capita income in New Hanover County increased slightly from 107% to 111% of the state average during this 20-year period.



Needs Identified by Survey Analysis

REGIONAL SURVEY RESULTS

This section presents top needs identified from each of our surveys -- public perception surveys, client surveys, service delivery surveys, and key informant interviews. These needs will be broken down by county as well.

The top regional needs identified for the tri-county area sorted by each component of our assessment are indicated in the following Tables.

KEY INFORMANT SURVEY – TOP 10

1. Lack of affordable prescription medication
2. Lack of affordable medical care
3. Drug use among adults (18 and over)
4. Shortage of affordable housing
5. Underage drinking
6. Drug use among children (17 and younger)
7. Lack of adequate public transportation
8. Poverty
9. Lack of affordable daycare for children
10. Mental illness/emotional issues among adults (18 and older)

SERVICE PROVIDER SURVEY – TOP 10

1. Lack of affordable prescription medicine
2. Lack of medical insurance
3. Underage drinking
4. Lack of affordable medical care
5. Domestic violence
6. Family violence, abuse of adults or children
7. Shortage of affordable housing
8. Poverty
9. Drug Abuse
10. Healthcare for elderly persons

CLIENT SURVEY – TOP 10

1. Lack of medical insurance
2. Drug abuse
3. Affordability of prescription medications
4. Underage drinking
5. Lack of affordable medical care
6. Teenage pregnancy
7. Domestic violence
8. Healthcare for elderly persons
9. Crime
10. Alcoholism and alcohol abuse by adults

PUBLIC PERCEPTION SURVEY – TOP 10

1. Cost of healthcare treatments
2. Affordability of medical insurance
3. Affordability of prescription medications
4. Lack of medical insurance
5. People who drive drunk
6. Teachers not disciplining students
7. Domestic Violence
8. Too many students in each class
9. Underage drinking
10. Physical activity of children

TOP OVERALL REGIONAL NEEDS IDENTIFIED BY SURVEYS

After a comprehensive review of the data from these multiple sources public perception (telephone) survey, client surveys, service providers, and key informants interviews, we determined that the top health and human services need in the region comprised of Brunswick, New Hanover, and Pender Counties was:

- **Affordable healthcare**

Under the general category of affordable healthcare, we included several related issues that ranked near the top of all of our surveys:

- Lack of medical insurance
- Affordability of medical insurance
- Cost of healthcare treatments
- Lack of affordable medical care
- Lack of affordable prescription medication
- Affordability of prescription medications

Other top-tier identified needs in the tri-county area were:

- **Affordable housing**
- **Domestic violence**
- **Drug abuse**
- **Drunk driving**
- **Underage drinking**

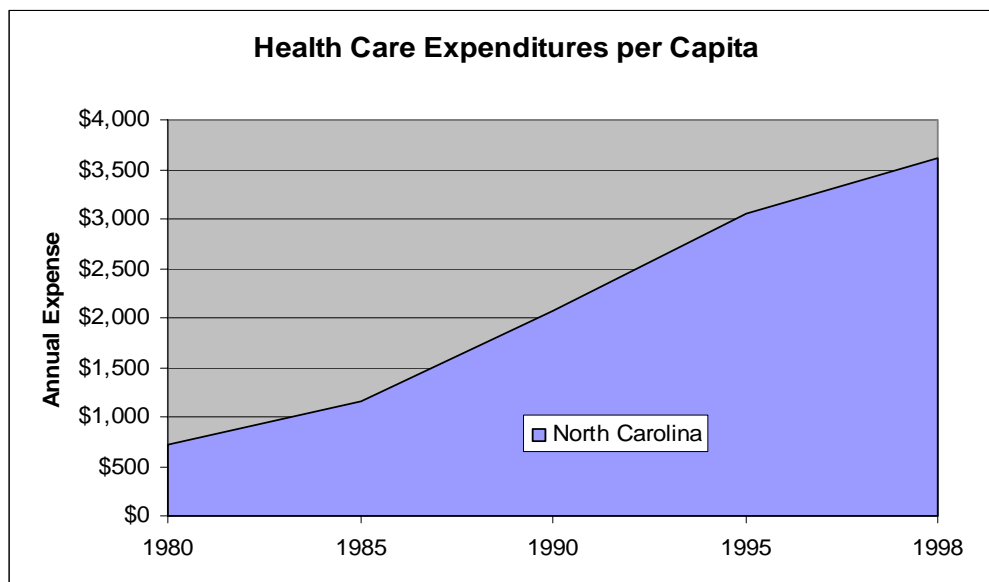
Affordable Healthcare

“Medical care for the aging is very prevalent and more companies are shutting out medical insurance for their employees.”

“Health care costs are escalating there is no affordable coverage for the working poor.”

Affordable healthcare is clearly a major concern for all of the respondents in our surveys. Whether it is expressed as lack of health insurance, cost of health insurance, affordability of prescription drugs, or general cost of medical care, people in this region see this issue as a serious threat to their quality of life. Of course, the cost of healthcare is a statewide and national concern as well.

The chart below provides a graphic demonstration of the escalating cost of healthcare in North Carolina. As with most issues related to cost of basic services, those hit hardest are individuals on fixed incomes like the elderly or the working poor who don't qualify for Medicaid yet work in jobs with poor or non-existent health benefits.



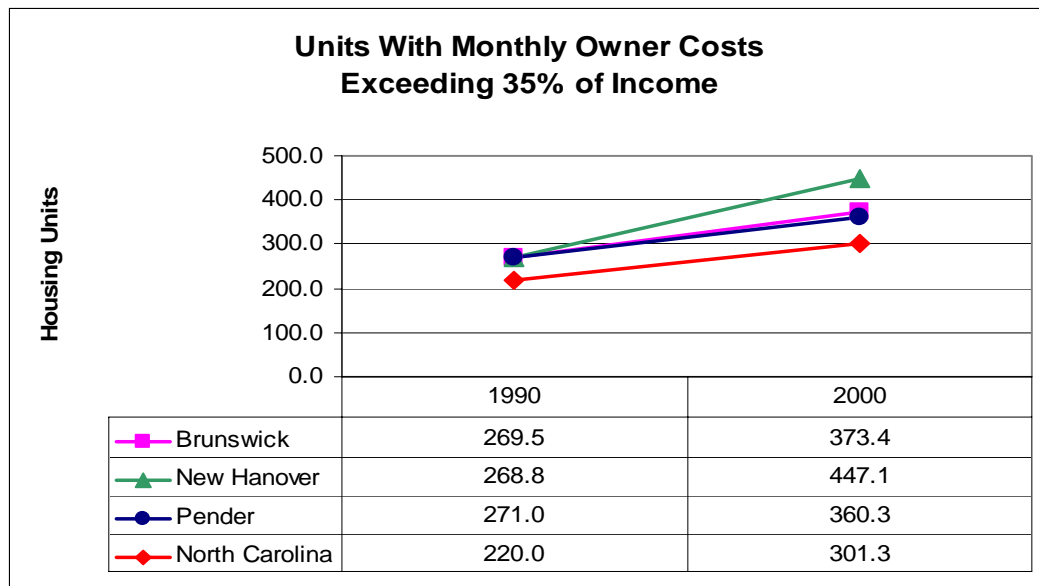
SOURCE: NC Department of Insurance “Health Care Cost Profile of North Carolina” ([http://www.ncdoi.com/CR\(Section4\).pdf](http://www.ncdoi.com/CR(Section4).pdf))

Affordable Housing

“We don’t make enough money and there are few starter houses being built.”

“There is a huge discrepancy between the haves and have-nots In my school, for example, I have kids who live in \$2 million houses and kids that live in substandard trailers.”

A consequence of living in a highly desirable coastal region is the escalation of housing costs. Relatively high income retirees moving from other areas of the country, investors, and professionals willing to pay top dollar to live by the ocean are driving housing costs upward, making it increasingly burdensome for individuals living on modest incomes. Housing experts estimate that households that must devote more than 35% of their monthly income to housing costs are burdened – the chart below shows that the number of burdened households in the region is steadily increasing.



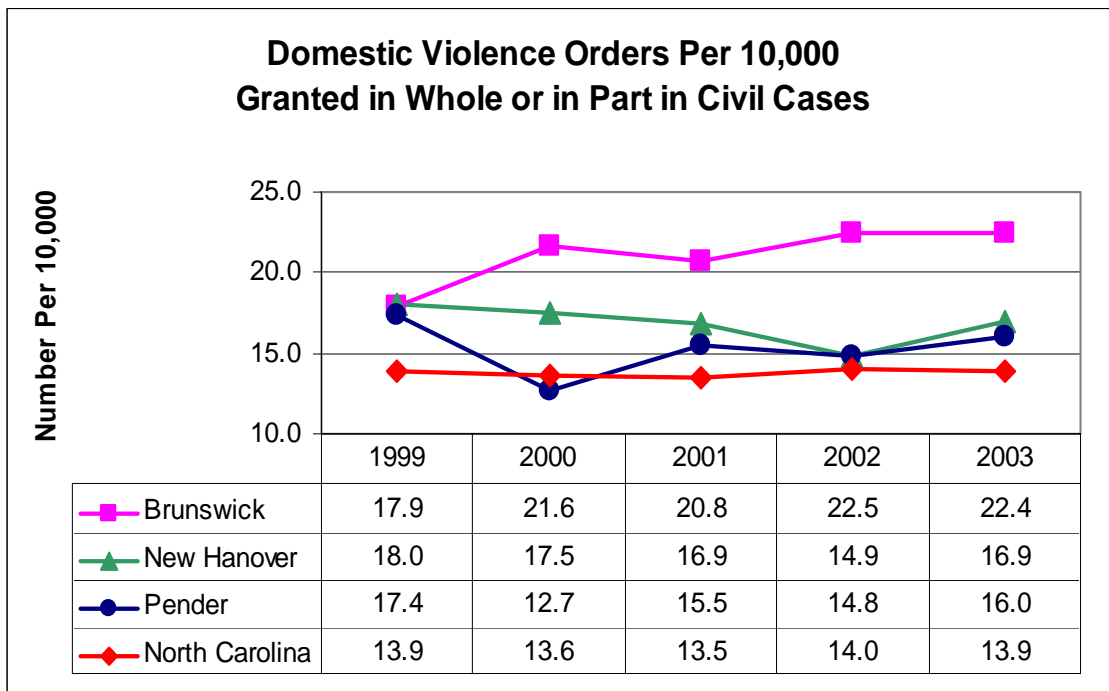
Unless otherwise indicated, all data in this section are from the U.S. Census.

Domestic Violence

“We are working very hard on the prevention level if someone grows up in an abusive household, they are 95% more likely to repeat that abuse.”

“More money needs to go into efforts to teach the victims.”

The chart below demonstrates that domestic violence orders are above the state average in all three counties in the region. This phenomenon may be a good example of a symptom indicating a region under social stress.



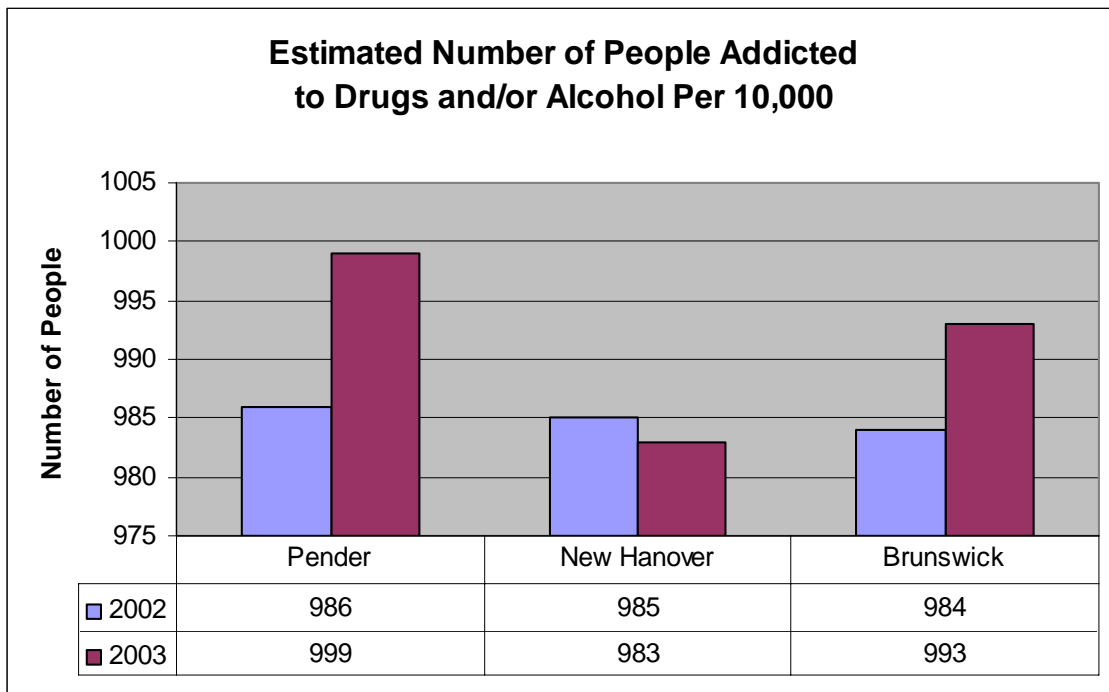
SOURCE: NC Judicial Department – AOC Court Management and Information Services
(<http://www.nccourts.org/Citizens/SRPlanning/Statistics.asppdf>)

Drug Abuse

“Drugs are tied directly or indirectly to probably 90% of the crime larceny, stealing, robberies, and other issues.”

“We have found them with marijuana, inhalants, and that kind of thing kids just are as absolutely out of control with drug use as I have seen it in my 16 years.”

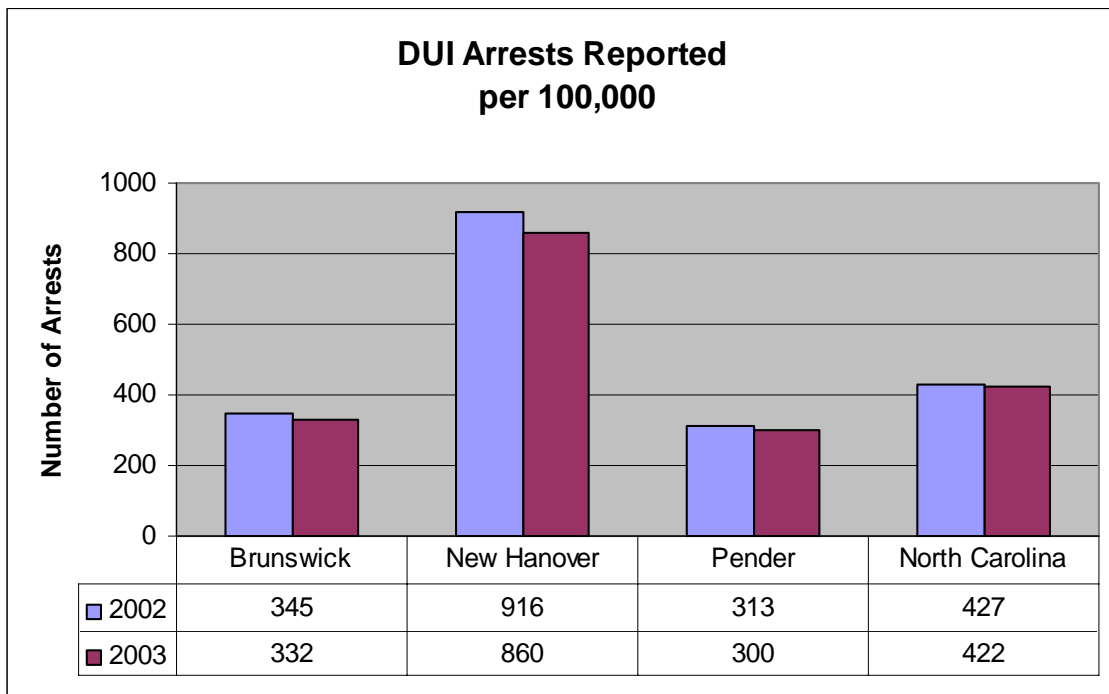
Concern over drug abuse is reflected in the chart below, which indicates that addiction is on the rise in Pender and Brunswick counties. Drug abuse is a core issue because it leads to crime and undermines the ability of youth to advance their education and for adults to maintain gainful employment.



SOURCE: Alcohol and Drug Council of North Carolina 2002 and 2003 NC Epidemiological Data and the Duke Epidemiologic Catchment Area Study (www.alcoholdrughelp.org/sdata02.htm)

Drunk driving

Drunk driving is a well-founded major concern in the region, as the chart below demonstrates that DUI arrests in New Hanover County is well above the state average. The high numbers in New Hanover are likely fueled by residents from other counties driving in to take advantage of the large number of establishments, as well as large numbers of college students and tourists on vacation. Drunk drivers are a threat to all citizens on the roads.

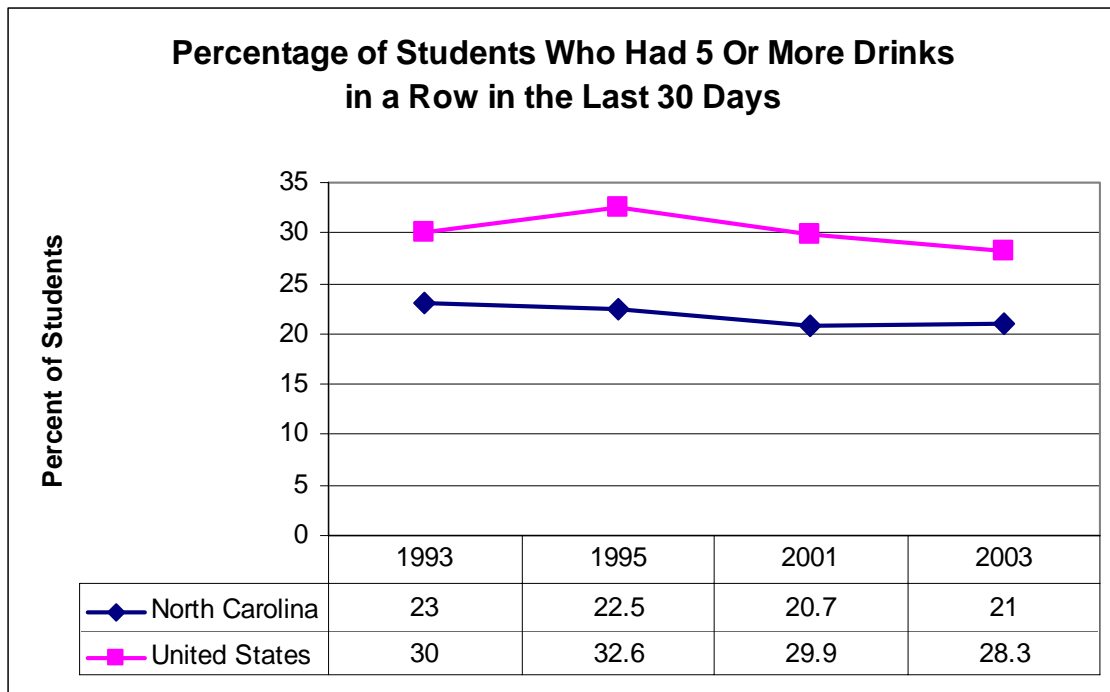


SOURCE: Alcohol and Drug Council of North Carolina 2002 and 2003 NC Epidemiological Data and the Duke Epidemiologic Catchment Area Study (www.alcoholdrughelp.org/sdata02.htm)

Underage Drinking

“We have ignored the dangers of underage drinking. This problem is on the rise and knows no socioeconomic boundaries. I look forward to the day when we attack the alcohol industry with the same zeal we took on the tobacco industry.”

Although the chart below indicates that underage drinking in North Carolina is below the national average, it is nonetheless disturbing that over 20% of students in the state may drink heavily. As with drug use, underage drinking not only puts lives in peril, but undermines a focus on quality education.



SOURCE: National Center for Chronic Disease Prevention & Health, from the report, “Youth Online: Comprehensive Results,” (<http://apps.nccd.cdc.gov/yrbss/index.asp>)

BRUNSWICK COUNTY SURVEY RESULTS

The top ten needs identified for Brunswick County sorted by each survey component of our assessment are provided in Appendix V. Breaking out the responses from these multiple sources, the top overall needs are:

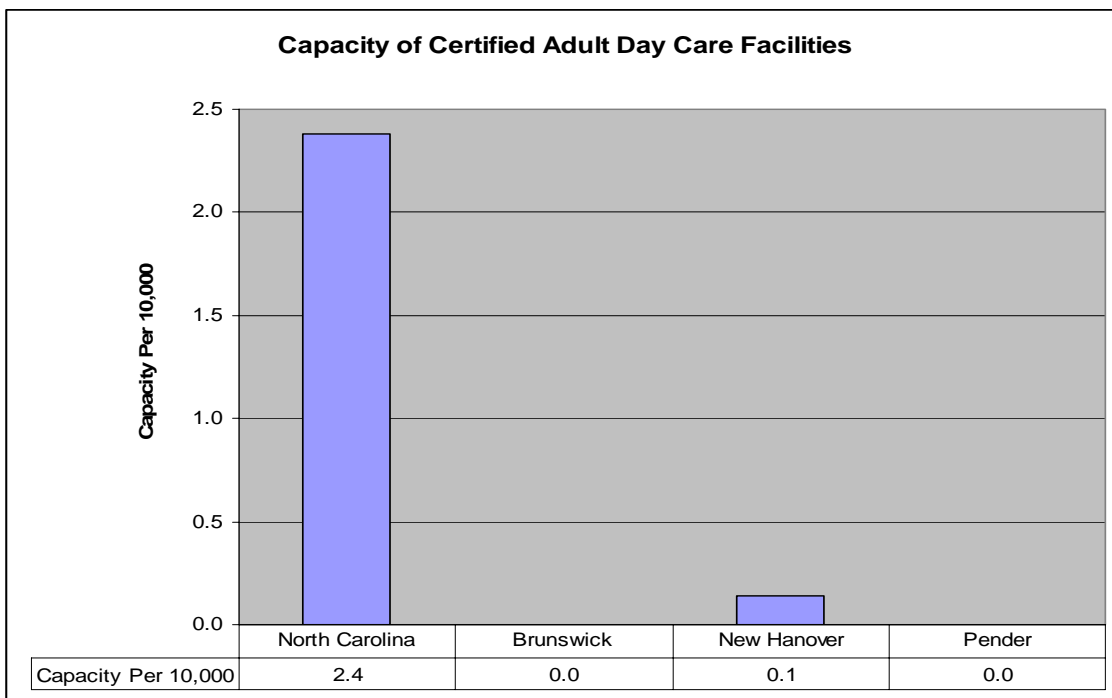
- **Affordable healthcare**
- **Domestic violence**
- **Drug abuse**
- **Affordable day care for adults ***
- **Public transportation ***
- **Teen pregnancy ***
- **Underage drinking**

* **Affordable day care for adults, public transportation, and teen pregnancy** are identified needs specific to Brunswick County.

Affordable Day Care for Adults

“ the facilities are really dismal. I don't think anybody in here would go to the senior center to have a meal by choice. But it's there and it's good if that's the only thing you've got but it's not taking care of the elderly.”

With an aging population in the region, the lack of adult day care facilities in not just Brunswick County but in the entire region is a need that will only increase. This need also is relevant to the increasing pressures being placed on families balancing dual careers, raising children, and caring for aging parents.

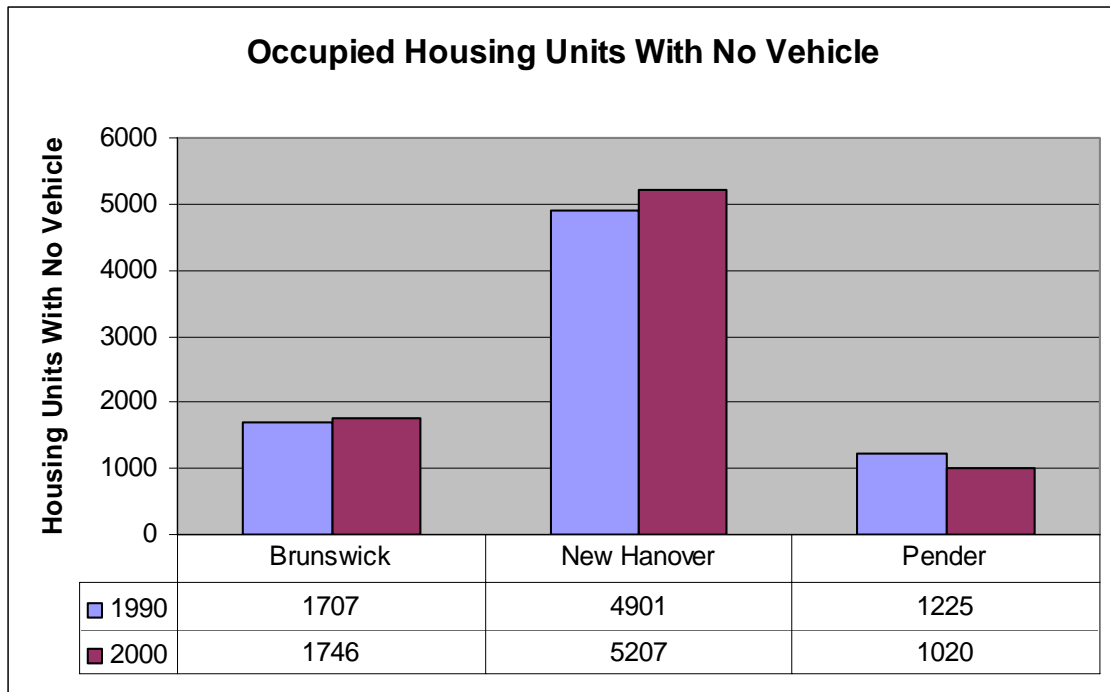


SOURCE: North Carolina Division of Aging and Adult Services, 2004 report on NC certified adult day care centers in NC, (<http://www.dhhs.state.nc.us/aging/adcadh.htm>)

Public Transportation

“..... transportation for seniors is a major issue. There is a sector that just misses that cutoff and they don't have transportation for medical appointments, emergencies, whatever.”

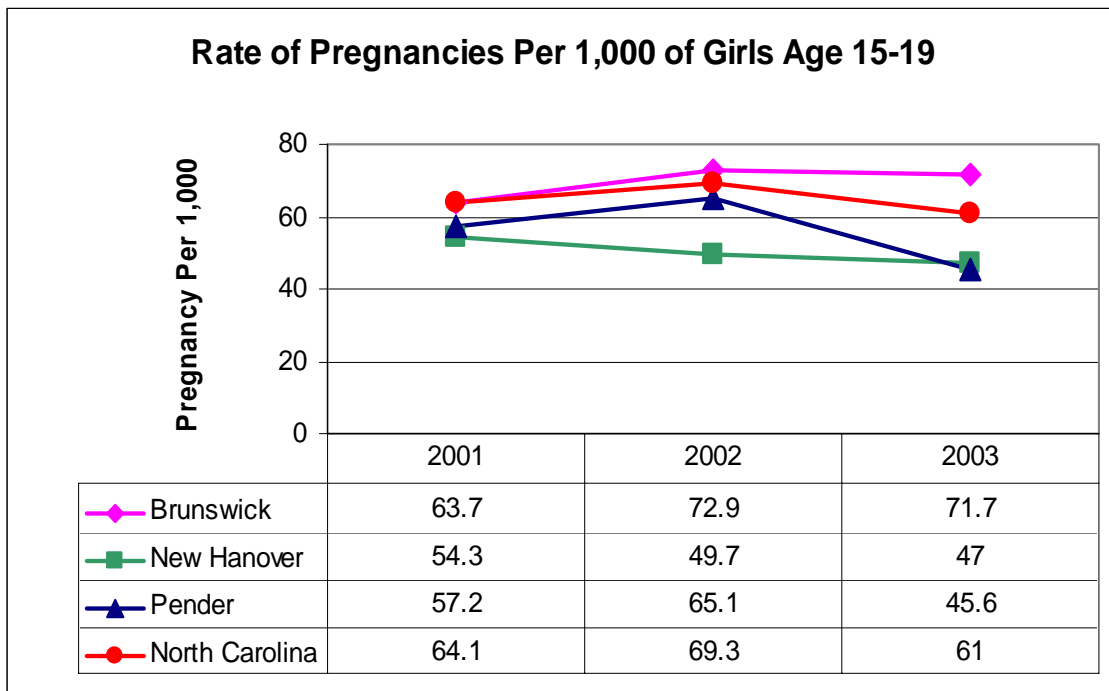
The lack of a public transportation system in Brunswick and Pender counties is a major need, not only for the residents of these counties who cannot access services but also for employers in the region who cannot tap labor pools that do not have automobiles. The chart below shows the number of households without a vehicle, which undoubtedly correlates highly with the elderly and lower income population. This need is keenly felt in Brunswick County because of the size of the county and the remoteness of some areas.



Teen Pregnancy

“Teen pregnancy is becoming an accepted thing.”

Although progress has been made with teen pregnancy, the chart below does indicate that Brunswick County has a particular challenge in this area. This issue merits continued attention since there is a high correlation between teen pregnancy and poverty.



SOURCE: Adolescent Pregnancy Prevention Coalition of North Carolina report on Adolescent Pregnancy years 2001-2003 (<http://www.appcnc.org/database/detail.cgi?Statistics>)

NEW HANOVER COUNTY SURVEY RESULTS

The top ten needs identified for New Hanover County sorted by each survey component of our assessment are provided in Appendix V. Breaking out the responses from these multiple sources, the top overall needs are:

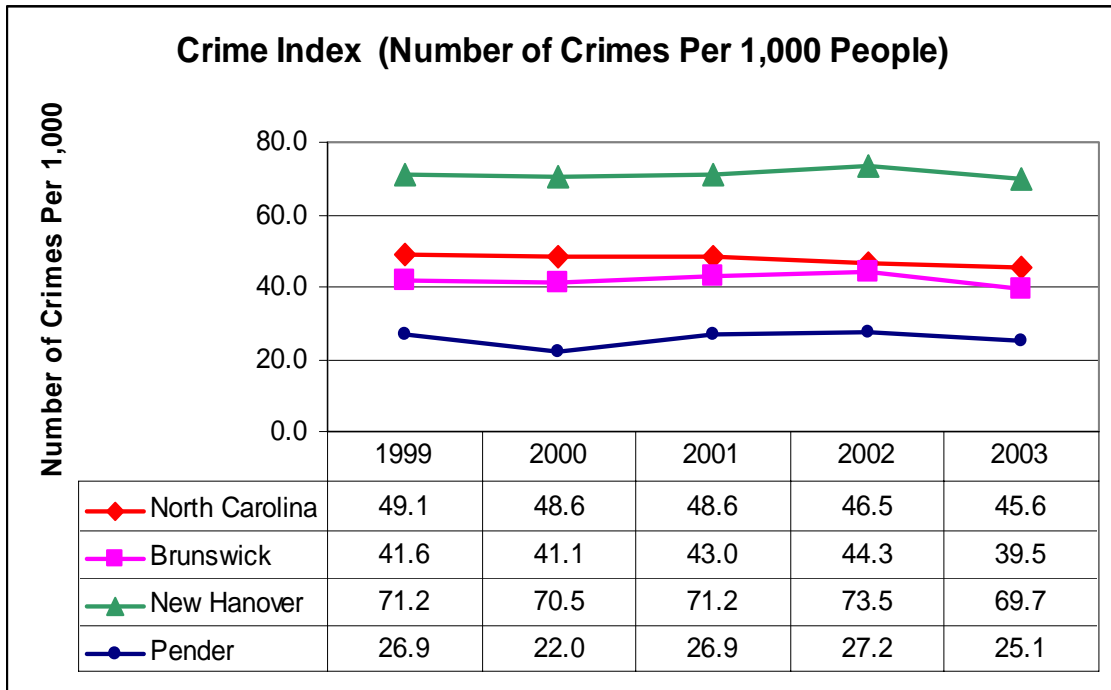
- **Affordable healthcare**
- **Affordable housing**
- **Crime ***
- **Domestic violence**
- **Drug abuse**
- **Drunk driving ***
- **Underage drinking**

* **Crime** was an identified need specific to New Hanover County.

Crime

“The facts are that New Hanover has the highest exit and entry rates in the jails in the state. Many will return to jail and they will commit crimes again.”

The concern about crime in New Hanover County is reflected in the chart below, which shows that New Hanover exceeds the state average on the crime index. Compared to other urban counties, New Hanover is relatively high as well.



PENDER COUNTY SURVEY RESULTS

The top ten needs identified for Pender County sorted by each survey component of our assessment are provided in Appendix V. Breaking out the responses from these multiple sources, the top overall needs are:

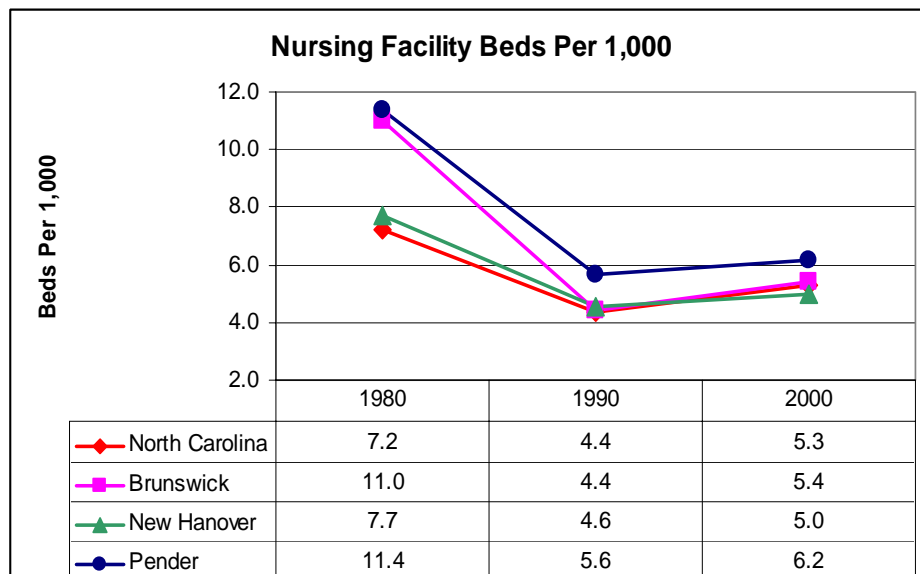
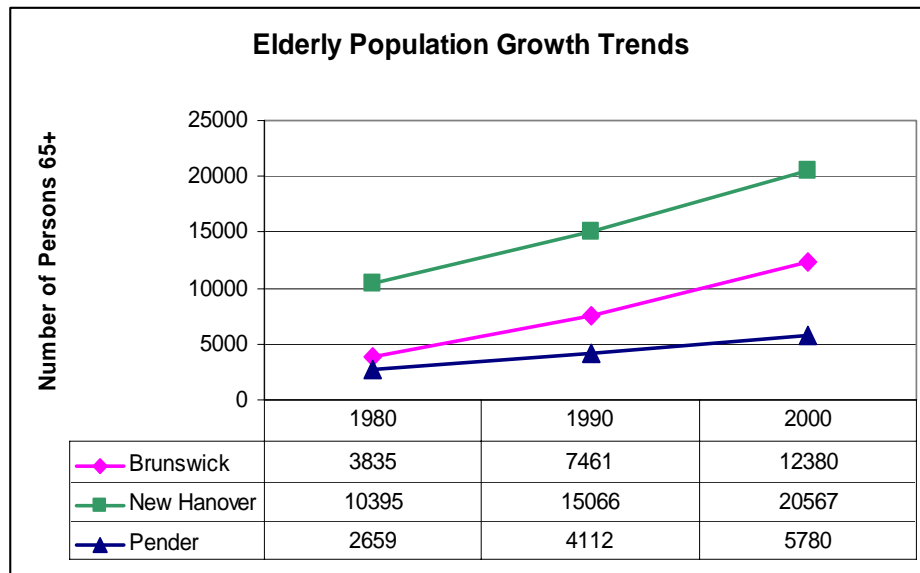
- **Affordable healthcare**
- **Drug abuse**
- **Healthcare for the elderly ***
- **Jobs/Unemployment ***
- **Public transportation ***
- **Recreational facilities ***
- **Time it takes to get to medical facility ***

* **Healthcare for the elderly, jobs/unemployment, public transportation, recreational facilities, and time it takes to get to medical facility** are identified needs specific to Pender County.

Healthcare for the Elderly

“I have one small area, about a ten block area, where 21 widows are living by themselves they are constantly calling the police for different things that they need. And it’s not just what we do.”

A repeated theme in this report is the challenges of an aging population to the health and human services system in the region. For example, the chart below illustrates that the number of nursing facility beds is not keeping pace with the increase in the aging population.

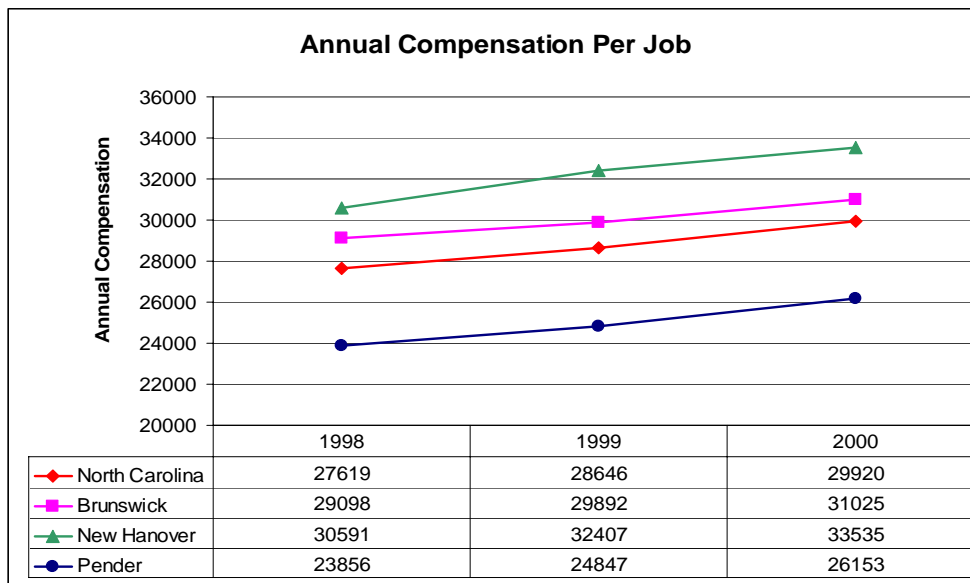


Jobs/Unemployment

“The jobs do not pay high wages in Pender County. I mean \$6, \$7, \$8 if you get a \$7.50 – \$8.00 job, you are high on a hog around here. That’s a sad statement. I think 70-80% of the people in Pender County have \$7-\$8 an hour jobs. And when you take taxes out of that, you don’t have much left over.”

“We have all heard of minimum wage but I am talking about a living wage. I’m not sure of the exact number but I think that it is somewhere around \$11 - \$12 an hour at least.”

A major concern in Pender County is the lack of high paying jobs. The chart below shows that the county ranks last in the region on annual compensation per job. The \$26,000 average annual income per job in 2000, for example, falls far short of estimates of a livable wage in the region (\$36,216 according to the NC Justice Center Report).



SOURCE: US Department of Commerce, US Bureau of Economic Analysis (<http://www.bea.doc.gov/bea/regional/reis/drill.cfm?table=CA06&lc=9&years=2000,1999,1998&format=htm&areatype=37000&sort=0>)

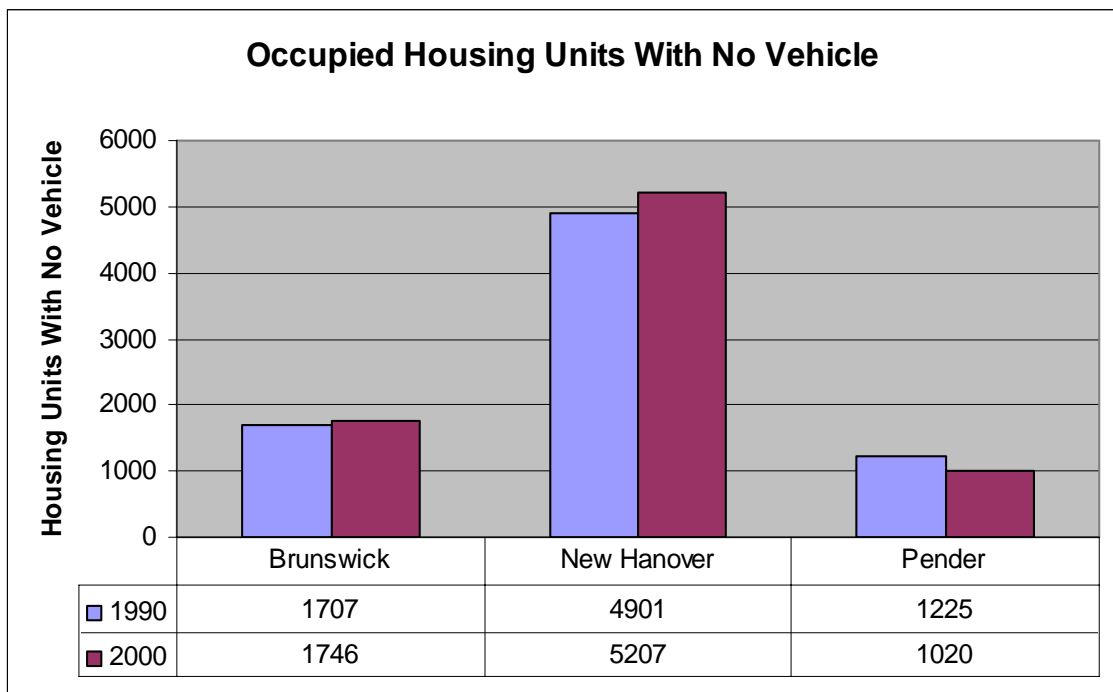
Public Transportation

“We have no public transportation.”

“..... indigent people can apply for USDA commodities, but they have to go to Burgaw to apply and to pick it up If you don't have a car and don't have the money to pay for gas how are you going to do it?”

“We don't have vans, taxis, buses, or rental services; none of that transportation exists.”

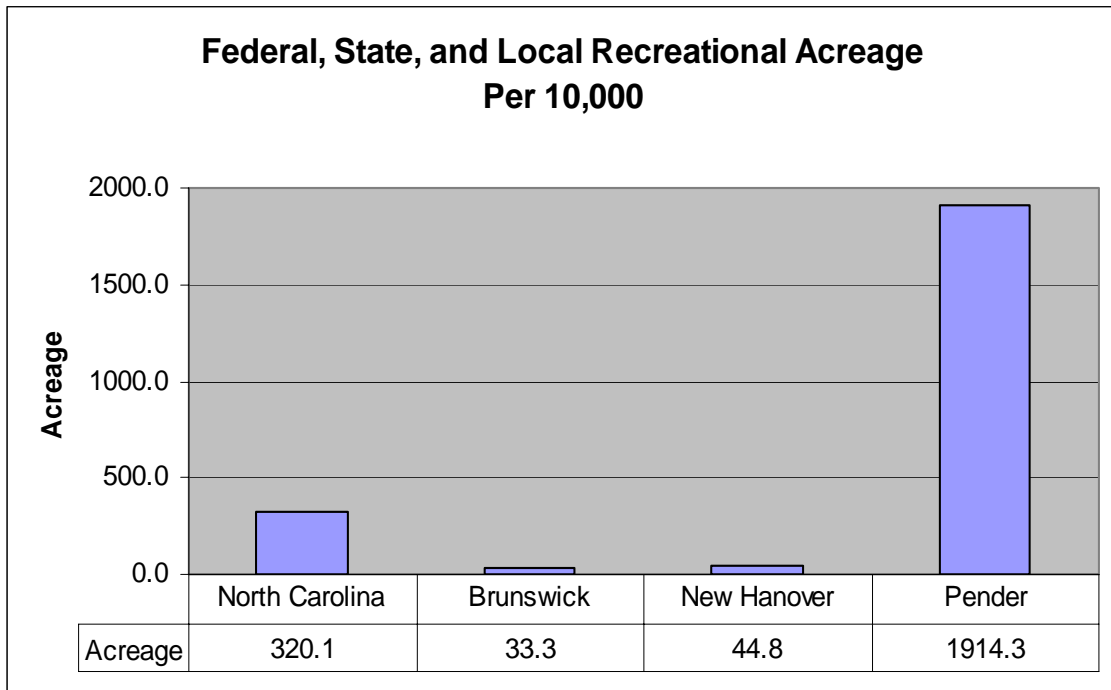
Consistent with the situation in Brunswick County, the lack of a public transportation system poses serious obstacles to accessing services and employment for residents of Pender County without a vehicle.



Recreational Facilities

“We need recreation centers in several areas of this county, especially for middle school and high school children; they have nothing to do when they get home from school.”

Although the chart below shows that Pender County has abundant recreational acreage, the need for more recreational centers with structured programming is apparent, particularly as the population continues to grow at a rapid pace. Mere green space is not enough.



Time it takes to get to Medical Facility

“In Atkinson, an eye doctor will come once a week.”

“If you have an emergency you go to Wilmington.”

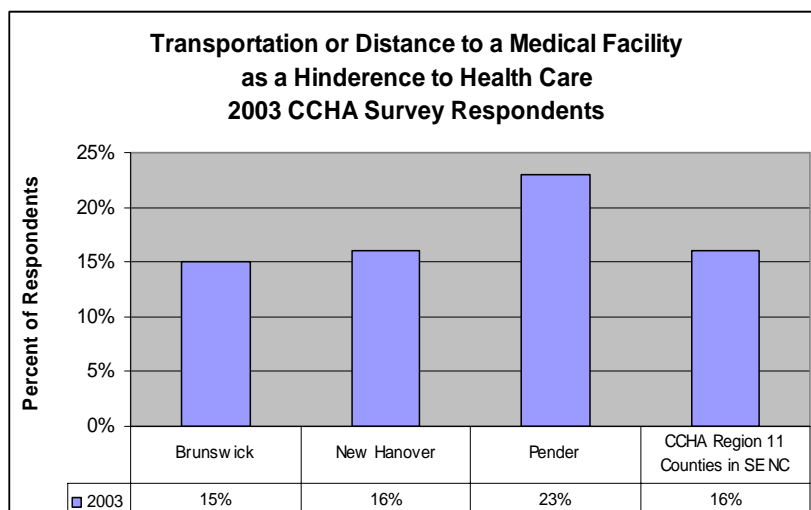
“The hospital in Burgaw sends people to Wilmington all the time.”

“.....specialized care isn’t available. You must go to Wilmington because only general practitioners are in the country.”

“Pender County has a lot of small towns and cities in it the coordination of medical services and doctor availability and getting the medicines and treatment when needed seems to pose a problem to some of our citizens.”

The chart below indicates that Pender County residents have the greatest difficulty in the region getting to a medical facility. This need stems from a combination of lack of physicians and the geographic remoteness of parts of the county, particularly west of US 17.

There is roughly one physician for every 2,400 people in Pender County, compared to one physician for every 300 people in New Hanover County and one for every 500 people across the state. There is roughly one dentist for every 4,200 people in Pender County, compared to one for every 1,500 in New Hanover County and one for every 2,500 across the state. (UNCW Quality of Life Study, 2004).



SOURCE: 2003 Survey of the Coastal Carolina Health Alliance

ADDITIONAL NOTEWORTHY SURVEY INFORMATION

AFRICAN AMERICAN CLIENT SURVEY RANKINGS

To obtain a sense of the more specific needs of the African American community, the client survey responses from this community were analyzed. The top ten needs reported were:

1. Lack of Medical Insurance
2. Drug Abuse
3. Affordability of Prescription Medicine
4. Underage Drinking
5. Lack of Affordable Medical Care
6. Teenage Pregnancy
7. Shortage of Affordable Housing *
8. Crime
9. Domestic Violence
10. Lack of Jobs *

* Not on regional top ten

Compared to the regional client survey, the African American respondents also highlighted shortage of affordable housing and lack of jobs. The greater concern over lack of jobs is not surprising given that African Americans continue to experience much higher unemployment rates than the general population (as do Hispanics). Of course, lack of jobs also correlates with concern over affordable housing.

Illustrative quotes related to these issues are:

“The part that you don’t see is the extended family situation where there is two and three families doubled up in one location that are also considered homeless. The definition of homeless is lacking an adequate place to dwell. So that is not their dwelling but they have access to it through a family member or they know somebody.”

“There’s limited opportunities for work if you don’t work in the housing industry, golf, or that type of industry. Ninety percent of the parents in my school work in housing, construction, roads, landscaping, or golf jobs, those are pretty much low paying jobs.”

HISPANIC CLIENT SURVEY NEEDS

Similarly, to obtain a sense of the more specific needs of the Hispanic community, the client survey responses from this community were analyzed. The top ten needs reported were:

1. Lack of Medical Insurance
2. Family Violence *
3. Domestic Violence
4. Teenage Pregnancy
5. Language Barriers *
6. Drug Abuse
7. Poor Housing Conditions *
8. Alcoholism and Alcohol Abuse by Adults
9. Underage Drinking
10. Overcrowded Living Space *

* Not on regional client survey Top 10

Compared to the regional client survey, the Hispanic community also highlighted family violence, language barriers, poor housing conditions, and overcrowded living space. The tremendous increase in the Hispanic population in the region has been well documented in this report. Language barriers will continue to be a problem until health and human services agencies, particularly hospitals, have the resources to hire staff proficient in Spanish. The concern over family violence, not as highly ranked in any other survey results, is likely a result of a stressed population coping with poor housing and overcrowded living space.

Illustrative quotes related to these issues are:

“And the landlords, I mean, they are the ones renting the place like this. They will rent a 2 bedroom trailer and everybody may pay \$35 a week or \$5 a day and they may rent it to 20 people. And we know that is illegal, when it comes to fire safety especially, but they will do that and it has been permitted.”

“Well, we have huge mental health problems which will be translated to huge legal problems. There are no personnel and no services. The mental health system is about ready to go through a huge crisis in our state. That is going to be more so with the Hispanic populations.”

LOW INCOME VS. HIGH INCOME SURVEY NEEDS

Another interesting breakout is to compare responses to the public perception (telephone) survey between high income respondents and those on public assistance.

| High Income (> \$75,000) <u>Perception Survey Rankings</u> | Public Assistance <u>Perception Survey Rankings</u> |
|---|--|
| 1. Affordability of medical insurance | 1. Affordability of medical insurance |
| 2. Cost of healthcare treatment | 2. Affordability of prescription medicine |
| 3. Affordability of prescription medicine | 3. Cost of healthcare treatments |
| 4. People who drive drunk | 4. Not enough bus routes to get you to various locations * |
| 5. Children’s physical activity | 5. Lack of medical insurance |
| 6. Lack of medical insurance | 6. Inadequate public transportation to the beach * |
| 7. Underage drinking | 7. Lack of public transportation options * |
| 8. Teachers not disciplining students | 8. Abstinence Education * |
| 9. Too many students in each class | 9. Underage Drinking |
| 10. Domestic Violence | 10. Medical coverage with your insurance plan |

* Not on regional public perception survey Top 10

In comparing these two groups, additional items from the regional results that stand out are transportation issues as well as abstinence education. The following quote regarding transportation is illustrative:

“Transportation. For all counties. Transportation is inaccessible in some areas. That was the biggie because that crossed over your housing, employment, and also your medical care. All of that – transportation.”

It is not surprising that abstinence education would be on the minds of lower income respondents, given the high probability of poverty for young unwed mothers. Compared to the poorer respondents, it is also not surprising that higher income respondents are less concerned about public transportation since they are more likely to be able to afford an automobile. Their focus was more on education issues, an undeniable key to continued prosperity for their children.

Needs Identified in Focus Groups

In addition to the surveys described above, information was also collected from a series of focus groups throughout the region. These results provide another snapshot of health and human services needs using a different methodology. Instead of individuals responding to preset categories of needs, focus group participants were able to express what they believed to be the top needs without any prompting and after engaging in discussion with other members of each focus group.

TOP OVERALL REGIONAL NEEDS FROM FOCUS GROUPS

Combining results from focus groups across all three counties, the top ten categories of needs and the general categories of need included in each one are:

1. Health/Medical
 - affordability of healthcare
 - lack of medical specialists
 - availability/access to medical care
2. Youth *
 - youth programs/services
 - youth after school activities/recreation
 - youth health/medical
3. Housing
 - affordable housing
 - housing for the homeless
4. Education *
 - youth and parent education
5. Elderly *
 - elderly services and programs
 - elderly health and medical needs
6. Mental Health *
 - mental health for children

- lack of insurance coverage
- 7. Transportation
 - Inadequate public transportation
- 8. Employment
 - wages/pay
- 9. Domestic Violence
 - services/programs
 - awareness/referral services
- 10. Child Care *
 - affordable childcare

* Not listed in top needs from overall regional survey results

Youth

A number of concerns related to youth were raised in the focus groups, including a lack of youth program and services, particularly after school activities such as recreation outlets. The following quote is illustrative:

“I just want to mention that we have 152 children on our waiting list for mentors. That concerns me. And talking about after school programs, I think a real close look at funding after school programs with the thought of funding not babysitters, but someone who does enrichment and then we get into our outcome measures.”

Education

Concerns over education, both in terms of youth and parent education, were apparent. Overcrowded classrooms are a concern, the result of the rapid growth of the region. Discipline in the classroom was mentioned. Parent education is also needed, not just in terms of working with children on school preparation but character formation as well. The following quote is illustrative of the concern over basic education skills:

“We have a huge literacy problem here that lies not with bilingualism, but people who don’t read at level or don’t have the capacity to understand the directions to be able to get a job at a storage unit. Restocking and you can’t read the labels. Again, it’s kids that have dropped out and have been chronically passed over within the educational system.”

Elderly

Given the frailty that comes with aging as well as lack of access to an automobile, a general concern over services and programs for the elderly, particularly in the health and medical areas, is apparent. The following quote illustrates one part of the problem – lack of awareness of available services:

“We have a good health department that is very active but the educational part is not known throughout the community particularly with the seniors. We need more public relations of human services with the senior citizens about the availability of health services.”

Mental Health

An issue not as apparent in the survey results but a major theme in the focus groups was concern over access to mental health services. Concerns included lack of services, particularly for children, lack of specialists in the mental health area, access to prescribed medications and lack of residential treatment programs for children. There are also major concerns over reforms in mental health at the state level and insurance coverage. The following quotes are illustrative:

“This is going to get worse and worse and the primary care providers are supposed to pick up these complex cases. There will be more and more dumped into the emergency room because they don’t have meds. They won’t have meds because no one will see them in order for them to get the prescription. And, a primary care provider is going to decide that these cases are out of their range.”

“But what is coming down as far as mental health reform [from the state]...that really needs to be looked at because people are going to be without services. And also people that are going to be without services are a lot of times the ones that cannot speak for themselves.”

Childcare

Given the high percentage of working couples in the region (a necessity to make ends meet), a need for affordable childcare is evident. Without affordable childcare, parents can be forced with the unsettling choice of settling for lower quality care or leaving children unattended for periods of time. The following quote is illustrative:

“Affordable is the key, I think. We keep some children who are sponsored by DSS, but their waiting list is atrocious. And then there are parents who are the working poor that don’t fit either category. They can’t pay the full fee and they don’t qualify for DSS.”

BRUNSWICK COUNTY FOCUS GROUP RESULTS

The top ten needs identified in the Brunswick County Focus Groups are:

1. Health/Medical *
2. Youth
3. Education
4. Elderly
5. Mental Health
6. Transportation
7. Environment *
8. Housing
9. Employment
10. Abuse/Neglect and Communication (tie) *

* Medical, environment and abuse/neglect, and communication are focus group identified needs specific to Brunswick County.

Medical

The feedback related to medical issues in Brunswick County was the lack of medical specialists in the area, creating a need to travel to Wilmington for medical care. The following quote is illustrative:

“There is a need for medical specialists in specific areas. Out of the 900 babies from Brunswick County this year, 180 were actually delivered in Brunswick County because of the lack of OB/GYNs.”

Environment

Environmental concerns in Brunswick County focused on the lack of quality drinking water and sewer service in more remote areas of the county. This situation reflects the challenge of keeping pace with the development in the county plus the sheer

size and diversity of a county with dense development in the north near Wilmington and on the coast, but much more remote and sparsely populated areas to the west and south. The following quote is illustrative:

“It’s embarrassing to even have to say something like this, but it affects Longwood, Cedar Grove, Ash, and other areas. How come we can’t correct these situations? This is just neglect not to provide people with clean water, water they can use.”

Abuse/Neglect

The focus of these comments was on concerns over abuse and neglect of children. Latch key children, or children being left at home unsupervised, was a theme. Concern over child abuse is reflected below:

“It stems from poverty, lack of education, and lack of parent support groups, parents don’t have any place to go, and women don’t have any place to go. Single fathers don’t have any place to go to get help on what they do; they don’t know what to do so they ball up their fist.”

Communication

These comments focused on the fragmentation from the growth and sheer size of the county, making it difficult to communicate and coordinate services and overall planning. The following quote is illustrative:

“I think there is a lack of communication as the county grows. What’s going on in Leland, what’s going on in Ash, what’s going on in Shallotte, some people are talking to each other and some people are not, and that is a problem. Maybe it’s the size of the county, because so many things are new.”

NEW HANOVER COUNTY FOCUS GROUP RESULTS

The top ten needs identified in the New Hanover County Focus Groups are:

1. Health/Medical
2. Housing
3. Youth
4. Education
5. Mental Health
6. Domestic Violence
7. Transportation
8. Elderly
9. Employment
10. Substance Abuse *

* Substance abuse is a focus group identified need specific to New Hanover County.

Substance Abuse

A theme of note in the New Hanover County focus groups was the prevalence of substance abuse, both drug and alcohol abuse. For example, police are reporting a rise in heroin use, returning to the popularity of this drug in the 1970s. Furthermore, use of drugs like heroin is seen across all socioeconomic levels. The quotes below are illustrative:

“We have found them with marijuana, inhalants, and that kind of thing. And kids are just absolutely out of control with drug use as I have seen it in my 16 years.”

“The underlying factor [is that] 90% of these problems whether it’s spousal abuse or child abuse is driven by alcoholism and drugs, and it’s going to be that way for every[one] until this country comes to grips with it.”

PENDER COUNTY FOCUS GROUP RESULTS

The top ten needs identified in the Pender County Focus Groups are:

1. Health/Medical
2. Youth
3. Elderly
4. Employment
5. Transportation
6. Housing
7. Child Care
8. Dental *
9. Mental Health, Education, and Location of Services (tie)*

* Dental and location of services are focus group identified needs specific to Pender County.

Dental

Lack of dental services, particularly in the western side of Pender County, is a major theme. Data supports this concern. There is roughly one dentist for every 4,200 people in Pender County, compared to one for every 1,500 in New Hanover County and one for every 2,500 on average across the state (UNCW Quality of Life Study, 2004). The following quote is illustrative:

“The top issue for me, especially in the field that I work, would be dental care for school-age children. And I would say that is countywide. We just have a lack of providers and the families...even if they have health insurance, dental is not always covered. And it’s really hard to find people to work on teeth for free.”

Location of Services

Given the remoteness of parts of Pender County, particularly west of US 17, a major concern is the inconvenient location of services, particularly health services. This is a particular problem because of the lack of transportation options in the county. The following quotes are illustrative:

“Pender County has a lot of small towns and cities in it so the coordination of medical services and doctor availability and getting the medicines and treatment when needed seems to pose a problem for some of our citizens.”

“There are no emergency services available on the weekends. If you get hurt on the beach on the weekend you have to go to Wilmington.”

Research Team Observations

In the course of conducting multiple surveys and focus groups, the team of researchers compiled a set of observations not reflected in the preceding needs analysis that are worth mentioning. Chief among these are:

Benefits of Networking and Participation

Researchers note that during focus groups participants often exchanged contact information and became aware of agencies with similar services and needs. The act of coming together and sharing ideas about regional needs fostered relationships and an understanding of common needs and interests.

County Frustration with Unaddressed Needs

Also evident in some of the focus groups was a growing frustration with a perceived lack of results from participating in yet another discussion of issues and needs. Sponsors of research efforts that involve stressed community service providers and clients must take responsibility for following up on findings and communicating outcomes.

Coordination and Competition between Nonprofits

Focus group participants, as well as survey respondents, shared the challenges created by the hundreds of health and human services provider agencies in the region competing for limited resources. Efforts to more effectively coordinate services among these agencies could result in desirable economies of scale or more efficient sharing of resources.

Importance of Comprehensive Resource Directory

Due to the large number of nonprofit and government agencies providing health and human services, a comprehensive and continuously updated directory of community resources is fundamental for understanding gaps and needs. The Community Resources Directory produced by *First Call for Help of Coastal Horizons Center, Inc.* was an invaluable resource for this study, but the need for updating is apparent.

Value of Multiple Snapshots

Understanding priority needs requires the consideration of multiple perspectives. This study demonstrates that different groups of people view needs differently in

important ways, whether based on geography, income, ethnicity, or organizational setting. A comprehensive needs assessment must provide a balanced examination of both aggregate perspectives (i.e., common themes across groups), as well as more narrow yet also important views (e.g., county perspectives).

Marketing of Existing Services

Although serious needs created by lack of resources are apparent, needy citizens are not taking advantage of the services that do exist because of a lack of awareness. Health and human services agencies should consider focusing more resources on publicizing their services to a wider portion of the population.

Pressures Created by Rapid Growth of Region

The problems created by a declining population are well documented (e.g., declining tax base). Different stresses produced by rapid population growth are evident in the Cape Fear Region: overcrowded schools and roads; increases in cost of living; inadequate water and sewer services; residential dislocation; rising taxes. These needs contribute to a stressful environment and pace of life that has unhealthy implications.

Key Informant Survey

Cover Sheet

Conduct either in person or by telephone by April 8, 2005

- 1. Date of Interview:**
- 2. Name of Key Informant:**
- 3. Title or Occupation:**
- 4. Employer:**
- 5. Address:**
- 6. City:**
- 7. Telephone Number:**
- 8. Email Address:**
- 9. County:**
- 10. Name of Interviewer**
- 11. Special Instructions:**

- 12. Interviewer Notes:**

Blueprint for Impact

a health and human services needs assessment conducted by the Master of Public Administration program at UNCW

- When complete, please send the Key Informant Cover Sheet and Interview Responses to Dr. Tom Barth. An envelope is provided for your convenience.

Key Informant Survey

Your participation in this research study is entirely voluntary. You may refuse to participate or stop at anytime.

Community Strength

Communities have strengths that help people make their community a better place to live. Here is a list of common strengths. For each one, please indicate whether you Strongly Agree, Somewhat Agree, Somewhat Disagree or Strongly Disagree that the strength exists in your community. Check only one in each row.

| Strongly Agree | Somewhat Agree | Somewhat Disagree | Strongly Disagree | No Opinion/ Don't Know |
|---------------------------|---------------------------|------------------------------|------------------------------|-----------------------------------|
|---------------------------|---------------------------|------------------------------|------------------------------|-----------------------------------|

1. Your community is one where leaders from business, labor, government, education, religious, neighborhood, non-profit and all other sectors come together and work productively to address critical community issues.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

2. Your community is one that actively promotes positive relations among people from all races, genders, ages and cultures.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

3. Your community is one where all religious groups come together to address pressing social concerns.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

4. Your community is one where associations in neighborhoods from various parts of the community share strategies and work together.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

5. Your community is one that actively supports and strengthens connections between families, neighborhoods and the whole community.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

6. Your community is one that actively promotes participation in the political process from all races, genders, ages and cultures.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Key Informant Survey

| | | | | |
|-----------------------|-----------------------|--------------------------|--------------------------|-------------------------------|
| Strongly Agree | Somewhat Agree | Somewhat Disagree | Strongly Disagree | No Opinion/ Don't Know |
|-----------------------|-----------------------|--------------------------|--------------------------|-------------------------------|

7. Your community is one in which there exists a great deal of mutual respect among leaders from all sectors of the community.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

8. Your community is one where leaders from all sectors of the community share common goals and uphold a vision for the community.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Community Challenges and Issues

People experience challenges and issues sometimes in the community where they live. Here is a list of common issues. For each one, please indicate whether you believe it is Not an issue, is a Minor Issue, is a Moderate Issue or a Major Issue for people in your community. Check only one in each row.

| | | | | |
|---------------------|--------------------|-----------------------|--------------------|-------------------------------|
| Not an Issue | Minor Issue | Moderate Issue | Major Issue | No Opinion/ Don't Know |
|---------------------|--------------------|-----------------------|--------------------|-------------------------------|

Unemployment or Underemployment

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Poverty

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Lack of Jobs

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Illiteracy

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Unsafe School Environment

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Overcrowded Classrooms

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Water and/or Air Pollution

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Key Informant Survey

| Not an Issue | Minor Issue | Moderate Issue | Major Issue | No Opinion/ Don't Know |
|--|--------------------------|--------------------------|--------------------------|-------------------------------|
| Noise and/ or Other Pollution | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Drug Abuse among Adults (18 and older) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Drug Abuse among Children (17 and younger) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Underage Drinking | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alcohol Abuse/ Alcoholism among Adults (18 and older) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alcohol Abuse/ Alcoholism among Children (17 and younger) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mental Illness and/or Emotional Issues among Adults (18 and older) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mental Illness and/or Emotional Issues among Children (17 and younger) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lack of Affordable Medical Care | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lack of Affordable Prescription Medications | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| HIV/ AIDS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shortage of Affordable Housing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Substandard / Poor Housing Conditions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Key Informant Survey

| Not an Issue | Minor Issue | Moderate Issue | Major Issue | No Opinion/ Don't Know |
|--|--------------------------|--------------------------|--------------------------|-------------------------------|
| Overcrowded Housing <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Homelessness <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shortage of Recreational Facilities <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Community Disaster Services <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lack of Cultural Activities <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lack of Cultural Arts Education <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Crime <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gangs <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Teen Pregnancy <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Discrimination Based on Race <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Discrimination Based on Gender <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Family Violence, Abuse of Children or Adults <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lack of Affordable Day Care for Children | | | | |

Key Informant Survey

| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Not an Issue | Minor Issue | Moderate Issue | Major Issue | No Opinion/ Don't Know |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lack of Affordable Day Care for Adults | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Inadequate Public Transportation | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Poor Road and/or Traffic Conditions | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Time it takes to get to a Medical Facility | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Write in the applicable issues for your community. Only use issues referenced in community issues and challenges.

Which of the above referenced issues do you believe is the most serious in your community?
Name only one.

Which of the above referenced issues do you believe is the second most serious in your community? Name only one.

Which of the above referenced issues do you believe is the third most serious in your community. Name only one.

Please share briefly any comments you may have on community strengths and challenges and issues.

Key Informant Survey

The following questions will be used solely for statistical purposes. Your answers will be combined with other responders to get a better understanding of the survey participants as a whole. Your answers will remain confidential. Please check only one for each question.

Are you...

Male

Female

In which county do you reside? _____

In which county do you work? _____

Are you of Spanish/ Hispanic Origin or Descent?

Yes

No

Please indicate what you consider your primary racial or ethnic group

American Indian

Asian or Pacific Islander

African America

White

Hispanic or Latino

Other, please specify _____

Which of the following categories describes your primary occupation?

Business executive, administrative or managerial

Public executive, administrative or managerial

Professional

Technical

Sales

Administrative support (clerical, secretarial)

Service

Industrial

Homemaker

Not employed

Other, please specify _____

Please identify your current membership on any non profit boards of directors, naming each organization separately:

Key Informant Survey Volunteer Information

Blueprint for Impact

a regional health and human services needs assessment
conducted by the MPA Program at UNCW

Key Informant Information for Volunteers

Dear Volunteers,

First and foremost, thank you for volunteering to assist the Capstone Class in the MPA Program with this project. This is something that would be incredibly difficult to complete without your support.

Enclosed in your volunteer packet you will find cover sheets for each key informant and a copy of the interview questions. Each key informant has previously received a copy of the interview questions for their convenience.

Please contact the key informant and either conduct or schedule a time to conduct the interview. Interviews may be completed in person or over the phone.

Please ask only the questions that are indicated and make any notations on the interview form. Once complete, you may mail your interview forms to Dr. Tom Barth in the envelope provided.

The MPA Capstone Class will be presenting the results of this regional health and human services needs assessment on May 3 at 2:30 in room 100 of the University Union on the campus of UNCW. You are welcome to attend and please also extend an invitation to the key informant at the end of your interview.

Should you have any questions please feel free to give any of us a call. And again, thank you for volunteering for this project.

Jill Davis Gunter
Member of Capstone Class, 681-1336 or 352-6948

Amy Broadfoot
Coordinator of Capstone Project, 297-0894

Dr. Tom Barth
Instructor for Capstone Class and Chair of Political Science Department
962-3385

Key Informant Survey Cover Letter

March 6, 2005

Key Informant
Organization
Address

Dear Key Informant:

As part of the effort to build a better region, we are asking a sample of community leaders to agree to an interview giving their opinions and ideas regarding local community needs, strengths and issues. We are contacting you because you are a valued leader in the community, and we believe that your insights will lead to an improved New Hanover County and region.

The process is sponsored by the Cape Fear Area United Way and being conducted by graduate students in the Master of Public Administration program at UNCW.

An interviewer representing the UNCW Health and Human Services Needs Assessment will be contacting you soon asking about community strengths, challenges and issues.

Because it is unlikely that few experts, if any, will be knowledgeable about every community strength, challenge and issue, categories for “No Opinion/ Don’t Know” are included in the answer choices. We are providing you with the interview questions in advance so that you may have time to think over the questions.

Your response to this interview will be kept confidential. The results of all interviews will be combined, and no ideas or opinions will be attributed to unless you agree ahead of time. If we feel that it would help to attribute something specifically to you, we will contact you and ask your permission to do so.

Your interview is only a portion of a comprehensive Health and Human Services Needs Assessment that is currently underway. Results of the assessment will be presented on May 3 on the campus of UNCW in Room 100 of the University Union. The presentation will begin at 2:30 and you are invited to hear the results of this much anticipated process. Following the presentation, results from the assessment will be available on the Department of Political Science website at <http://www.uncw.edu/pls/>.

Thank you in advance for your valued contributions to this important effort to improve our region.

Sincerely,

Dr. Tom Barth
Director of the Master of Public Administration Program

List of Key Informants

Brunswick County Key Informants

Glenda Browning
Vonnie Fulwood
Neil Gannon
Edgar Haywood
Ronald Hewett
Paul Jensen
Steve Johnson
Marty Lawing
Dianne McRainey
Warren Mortley
Anita Oldham
Joan Olenchak
Becky Page
Michael Reaves
Karen Sphar
Cathy Swaim
Randy Thompson
Bud Thorsen
Martha Warner
Percy Woodard
Mitzi York

New Hanover County Key Informants

Virginia Adams
Robert Angeli
Kirsten Atkinson
Cathy Barlow
Stephen Barnett
Spence Broadhurst
Cynthia Brown
Denis Carter
Sterling Cheatham
Karin Cox
Cynthia Crane

List of Key Informants

Annette Crumpton
Sandra Diehl
Steve Dillon
Trish Doyle
Albert Eby
John Elliott
Ralph Evangelous
Pamela Federline
Vinton Fountain
Garry Garris
Godfrey Guerzon
Dewey Harris
Herbert Harris
Dexter Hayes
Melissa Hight
Tori Jones
Leigh Ann Kingsbury
Leslie Langer
Warren Lee
Al Lerch
Connie Majure-Rhett
Phil Marion
Chris May
Eric McKeithan
Veronica McLaurin-Brown
Dolores Moore
Laurie Myles
Janet Nelson
LaVaughn Nesmith
Tom Nettleman
Allan O'Neal
Harper Peterson
Tony Puente
John Ranalli
Dave Rice
Louis Rogers
Tom Rumsey

List of Key Informants

Robert Speight
Lee Anna Stoker
Margaret Weller-Stargell
Anonymous Participants

Pender County Key Informants

Karen Barnhill
Kay Bradshaw
Connie Carr-Costin
Linda Clark
Wes Davis
Amy Goodwin
Jack Griffith
Joyce Keith
Eddie King
Scott Martin
Alane Savod
Reta Shiver
Kay Warner

Current Board Memberships Identified by Key Informants

American Red Cross
Amigos International/ Centro Latino
Arlie Gardens Guild
Boy Scouts, Cape Fear Council (4)
Brunswick Community College Foundation Board
Brunswick County Board of Education
Brunswick County Chamber of Commerce
Brunswick County Economic Development Commission
Brunswick County Emergency Food and Shelter
Brunswick County Foundation
Brunswick Criminal Justice Partnership
Brunswick Juvenile Crime Commission Council
Brunswick Transportation Board (3)
Burgaw Area Chamber of Commerce
Cape Fear Area United Way (3)
Cape Fear Area United Way Cabinet
Cape Fear Area United Way (former)
Cape Fear Area United Way Investment Board
Cape Fear Regional CDC
Carolina/ Virginia Telephone Membership Association
Chamber of Commerce
Child Abuse Prevention Coalition
Child Fatality Task Force
Coastal Area AHEC
Coastal AHEC Health Sciences Foundation
Coastal Horizons Center
Commission for African American History
Committee of 100
Communities in Schools of Brunswick County (4)
Communities in Schools of the Lower Cape Fear
Community Action/ Head Start
Community Boys and Girls Club
Community Core Growth Planning Committee
Downtown Rotary
Elderhaus, Inc. (2)
Fayetteville Chamber of Commerce
First Tee of Brunswick County
Filipino-American Association of Lower Cape Fear
First Fruit Ministries
Focus on Leadership
Friends of the Oak Island Lighthouse
Governor's Crime Commission
Greater Wilmington Chamber of Commerce (6)
Healthy Carolinians
Hispanic CDC
JOB Ready

Current Board Memberships Identified by Key Informants

Leadership Wilmington
Literacy
March of Dimes State Program Services Committee
Masonboro Baptist Church Deacon Board
Master of Public Administration Advisory Board
More at Four
Multi-Media Inc.
NAACP
National Association of Comm. Mediation
National Authentic Voice
NC Coast Host
NC Hospital Association Board of Directors
NC Maritime Security Executive Committee
NC Professional Society of Child Abuse
NC-TASH
NC Telecommunications Industry Association
New Hanover County Cooperative Extension
New Hanover County Partnership for Children (3)
New Hanover Day Treatment Center
New Hanover Regional Medical Center Volunteer Auxiliary
North Carolina Mediation Network
Partners for Economic Inclusion
Pender Arts Council
Pender County Partnership for Children
Pender Economic Alliance
Pender Housing
Pine Forest Cemetery
Prevent Child Abuse America
ROCAME
Rotary International (3)
SEANC
Shallotte Rotary Club
Southeastern Collaboration Team
Southport Rotary Club
Smart Start
Task Force for the Uninsured
The ARC
Tileston Clinic
Tourism and Economic Development Committee
Treasurer Access
UNCW
Watson School of Education
Wilmington/ Cape Fear Ballet Company
Wilmington Health Access for Teens (2)
YMCA
YWCA

Service Provider Survey

Initial E-mail Request

Dear Service Provider,

The Master of Public Administration program at UNC – Wilmington is conducting a health and human service needs assessment of Brunswick, New Hanover, and Pender counties called the *Blueprint for Impact*. As you may be aware, the *Blueprint for Impact* has been commissioned by the Cape Fear Area United Way and the results will be available to the public in May.

One facet to gathering information for the needs assessment is a series of surveys that are being conducted with the general community, with recipients of services, and with service providers. This is where we need your help. We would like for your organization to participate in the needs assessment by taking a few minutes to complete the following survey. It asks about needs you see in the community as a service provider. We would like someone to complete the survey that works hands-on with the clients your agency serves, someone that has daily contact with your clients and is in-tune with their needs.

The series of surveys is only one tool that is being used to assess the needs of the tri-county area. It is possible that someone in your agency has received an invitation to attend a focus group or to participate in a personal interview. If this is the case we ask that someone not attending a focus group or participating in a personal interview complete this survey. It is important that your organization completes this survey in addition to any other activities in which you may be participating. It is another way for your organization's voice to be heard.

To participate, please click on the following link: [SurveyLink] and complete the survey. If you have any trouble accessing the survey or have any questions regarding the survey please contact Corey Taylor at 910-233-4559 or send an email to needsassessment@uncw.edu.

We thank you very much for your participating in this initiative. The importance of your input cannot be stressed enough. We ask that you complete the survey by April 5th.

We hope that the results of the *Blueprint for Impact* will positively affect our communities for years to come! If you have any questions about the *Blueprint for Impact* please contact Tom Barth at (910) 962-3385 or bartht@uncw.edu.

Sincerely,
The *Blueprint for Impact* Team

Please note: If you do not wish to participate in this survey, please click the link below:
[RemoveLink]

Service Provider Survey

Initial Fax Cover Letter

Dear Service Provider,

The Master of Public Administration program at UNC – Wilmington is conducting a health and human service needs assessment of Brunswick, New Hanover, and Pender counties called the *Blueprint for Impact*. As you may be aware, the *Blueprint for Impact* has been commissioned by the Cape Fear Area United Way and the results will be available to the public in May.

One facet to gathering information for the needs assessment is a series of surveys that are being conducted with the general community, with recipients of services, and with service providers. This is where we need your help. We would like for your organization to participate in the needs assessment by taking a few minutes to complete the following survey. It asks about needs you see in the community as a service provider. We would like someone to complete the survey that works hands-on with the clients your agency serves, someone that has daily contact with your clients and is in-tune with their needs.

The series of surveys is only one tool that is being used to assess the needs of the tri-county area. It is possible that someone in your agency has received an invitation to attend a focus group or to participate in a personal interview. If this is the case we ask that someone not attending a focus group or participating in a personal interview complete this survey. It is important that your organization completes this survey in addition to any other activities in which you may be participating. It is another way for your organization's voice to be heard.

To participate, please go to the following website and complete the survey:

<http://www.surveymonkey.com/s.asp?u=24004934839>

Or, you may fill out the included survey in paper form and fax it to 910-798-3917. If you have any trouble accessing the survey or have any questions regarding the survey please contact Corey Taylor at 910-233-4559 or send an email to needsassessment@uncw.edu.

We thank you very much for your participating in this initiative. The importance of your input cannot be stressed enough. We ask that you complete the survey by April 1st.

We hope that the results of the *Blueprint for Impact* will positively affect our communities for years to come! If you have any questions about the *Blueprint for Impact* please contact Tom Barth at (910) 962-3385 or bartht@uncw.edu.

Sincerely,
The *Blueprint for Impact* Team

Service Provider Survey

Your participation in this research study is entirely voluntary. You may refuse to participate or stop at any time.

What is the name of your organization? _____

In which county is your organization located? _____

What is your position within your organization (case manager, therapist, etc.)? _____

Here is a list of common community issues. For each one, please describe whether you believe it is not a problem, is a minor problem, is a moderate problem, or is a serious problem for the people in your community. Feel free to add notes or elaborate on your choices.

| Issue | Not a problem | Minor Problem | Moderate Problem | Serious Problem | Don't Know |
|---|---------------|---------------|------------------|-----------------|------------|
| Unemployment | | | | | |
| Poverty | | | | | |
| Lack of Jobs | | | | | |
| Illiteracy | | | | | |
| Unsafe school environment | | | | | |
| Overcrowded classrooms | | | | | |
| Lack of cultural arts education | | | | | |
| Water or air pollution | | | | | |
| Noise or other pollution | | | | | |
| Quality of community disaster services | | | | | |
| Alcoholism and alcohol abuse by adults | | | | | |
| Underage drinking | | | | | |
| Drug abuse | | | | | |
| Mental Illness | | | | | |
| Lack of affordable medical care | | | | | |
| Lack of affordable prescription medicine | | | | | |
| Lack of medical insurance | | | | | |
| Healthcare for elderly persons | | | | | |
| HIV/AIDS | | | | | |
| Enough doctors/Medical staff in the community | | | | | |
| Shortage of affordable | | | | | |

Service Provider Survey

| | | | | | |
|--|--|--|--|--|--|
| housing | | | | | |
| Poor housing conditions | | | | | |
| Overcrowded housing | | | | | |
| Lack of proper utilities | | | | | |
| Shortage of recreational facilities | | | | | |
| Lack of cultural activities | | | | | |
| Lack of public meeting space | | | | | |
| Crime | | | | | |
| Gangs | | | | | |
| Discrimination based on one's race | | | | | |
| Discrimination based on one's sex | | | | | |
| Teenage pregnancy | | | | | |
| Family violence, abuse of children or adults | | | | | |
| Daycare for children | | | | | |
| Daycare for adults | | | | | |
| Domestic violence | | | | | |
| Language barriers | | | | | |
| Inadequate public transportation | | | | | |
| Time it takes to get to a medical facility | | | | | |

Are there any issues you would like to add that are not listed above?

What are the three issues you believe deserve the most attention within your community?

- 1.
- 2.
- 3.

On what are you basing your observations?

Additional comments. (Feel free to attach extra sheets if necessary)

Thank you for participating in this survey. The findings will be available to the community in May.

Service Provider Survey

First Follow-up E-mail Request

Dear Service Provider,

We would like to remind you to please fill out the Service Provider Survey for the *Blueprint for Impact Needs Assessment*. The *Blueprint for Impact* is a health and human service needs assessment of Brunswick, New Hanover, and Pender counties conducted by the Master of Public Administration program at UNC – Wilmington. As you may be aware, the *Blueprint for Impact* has been commissioned by the Cape Fear Area United Way and the results will be presented to the public on May 3rd.

Your organization received a prior email explaining the needs assessment and inviting your organization to participate. We have extended the deadline for completing this survey to April 5th so that we may include as many organizations as possible in this initiative. To participate, please click on the following link: [Survey Link] and complete the online survey. If you have any problems accessing the survey, please call Corey Taylor at 910-233-4559 or send an email to needsassessment@uncw.edu. The survey can be emailed to you in Word form or a paper copy can be faxed if this is preferable.

The importance of your participation cannot be stressed enough. We thank you in advance for participating in the *Blueprint for Impact Needs Assessment*. Below is the information included in the first email for review.

Sincerely,
The *Blueprint for Impact* Team

Initial e-mail sent to your organization:

The Master of Public Administration program at UNC – Wilmington is conducting a health and human service needs assessment of Brunswick, New Hanover, and Pender counties called the *Blueprint for Impact*. As you may be aware, the *Blueprint for Impact* has been commissioned by the Cape Fear Area United Way and the results will be available to the public in May.

One facet to gathering information for the needs assessment is a series of surveys that are being conducted with the general community, with recipients of services, and with service providers. This is where we need your help. We would like for your organization to participate in the needs assessment by taking a few minutes to complete the following survey. It asks about needs you see in the community as a service provider. We would like someone to complete the survey that works hands-on with the clients your agency serves, someone that has daily contact with your clients and is in-tune with their needs.

Service Provider Survey

The series of surveys is only one tool that is being used to assess the needs of the tri-county area. It is possible that someone in your agency has received an invitation to attend a focus group or to participate in a personal interview. If this is the case we ask that someone not attending a focus group or participating in a personal interview complete this survey. It is important that your organization completes this survey in addition to any other activities in which you may be participating. It is another way for your organization's voice to be heard.

To participate, please click on the following link: [SurveyLink] and complete the survey. If you have any trouble accessing the survey or have any questions regarding the survey please contact Corey Taylor at 910-233-4559 or send an email to needsassessment@uncw.edu.

We thank you very much for your participating in this initiative. The importance of your input cannot be stressed enough. We ask that you complete the survey by April 5th.

We hope that the results of the *Blueprint for Impact* will positively affect our communities for years to come! If you have any questions about the *Blueprint for Impact* please contact Tom Barth at (910) 962-3385 or bartht@uncw.edu.

Sincerely,
The *Blueprint for Impact* Team

Please note: If you do not wish to participate in this survey, please click the link below:
[RemoveLink]

Service Provider Survey

Final E-mail Request

Dear Service Provider,

We would like to remind you to please fill out the Service Provider Survey for the *Blueprint for Impact Needs Assessment*. **This is the last email your organization will receive** asking you to participate in the survey. The *Blueprint for Impact* is a health and human service needs assessment of Brunswick, New Hanover, and Pender counties conducted by the Master of Public Administration program at UNC – Wilmington. As you may be aware, the *Blueprint for Impact* has been commissioned by the Cape Fear Area United Way and the results will be presented to the public on May 3rd.

We would like someone to complete the survey that works hands-on with the clients your agency serves, someone that has daily contact with your clients and is in-tune with their needs. **It is possible that someone in your agency has received an invitation to attend a focus group or to participate in a personal interview. If this is the case we ask that someone not attending a focus group or participating in a personal interview complete this survey.** It is important that your organization completes this survey in addition to any other activities in which you may be participating. It is another way for your organization's voice to be heard.

Your organization received two prior emails explaining the needs assessment and inviting your organization to participate. The last day to complete the survey is **Friday, April 8th**. To participate, please go to the following site and complete the online survey:

<http://www.surveymonkey.com/s.asp?u=24004934839>

If you have any problems accessing the survey, please call Corey Taylor at 910-233-4559 or send an email to needsassessment@uncw.edu. The survey can be emailed to you in Word form if this is preferable.

The importance of your participation cannot be stressed enough. We thank you in advance for participating in the *Blueprint for Impact Needs Assessment!*

Sincerely,
The *Blueprint for Impact* Team

Please note: If you do not wish to participate in this survey, please click the link below:
[RemoveLink]

Respondents to Service Provider E-mail Survey

Organizations that responded to the Service Provider E-mail Survey

Access Family Services, Inc
Battleship NORTH CAROLINA
Boys and Girls Homes of NC
Brigade Boys & Girls Club
Brunswick Co. Volunteer Center
Brunswick County Emergency Services
Brunswick County Health Department
Brunswick County Health Dept
Brunswick County Partnership for Children
Brunswick County Public Housing
Brunswick County Schools
Brunswick Family Assistance Agency
Burgaw Elementary School
Cape Fear Council - Boy Scouts of America
Cape Fear Literacy Council
Cape Fear Public Transportation Authority
Carousel Center, Inc.
Child Advocacy Commission of the Lower Cape Fear Inc.
Children's Home Society of NC
City of Southport
City of Wilmington
City of Wilmington
City of Wilmington, Community Development Division
City of Wilmington, Planning Division
Coastal Horizons Center, Inc.
Coastal Horizons Center, Inc.
Communities in Schools of Brunswick County, Inc.
Communities in schools of Brunswick County, Inc.
Community Foundation of Southeastern North Carolina
Community United Effort (CUE)
Crisis Intervention Services of Coastal Horizons Center, Inc.
Developmental Services
Domestic Violence Shelter and Services, Inc.
Elderhaus, Inc.
Family Services of the Lower Cape Fear
First Baptist Church
First Fruit Ministries
Girls Incorporated of Wilmington
Good Shepherd Ministries Ashley Center
Greater Topsail Area Chamber of Commerce and Tourism
Hospital Hospitality House
House of Hope of NC
Jesus Ministries Church & Outreach
Juvenile Day Treatment Center
La Leche League of Wilmington
Learning Perspectives, Inc.

Respondents to Service Provider E-mail Survey

LIBRARY

Lifetime Resources

LINC Inc.

MedSource

NC Services for the Blind

New Hanover Co. Dept. of Aging

New Hanover Correctional Center

New Hanover County Board of Education

New Hanover County Commissioners

New Hanover County Dept of Social Services

New Hanover County Health Dept

New Hanover County Parks Department

New Hanover County Planning Dept.

New Hanover Human Relations Commission

New Hanover Metro Treatment

Parent Corps

Parenting Place of the Exchange Clubs

Pender Adult Services, Inc.

Pender Co. Health Check

Pender Correctional Institution

Pender County Housing Dept.

Pender County Partnership for Children

Pender Home Health

Phoenix Employment Ministry

Rape Crisis Center of Coastal Horizons Center, Inc.

Region O CISM Team

Regional Resource Center for the Deaf and Hard of Hearing

Sex Addicts Anonymous/Sex & Love Addicts Anonymous

Shalotte Assisted Living

SOUTHEASTERN AREA CENTER FOR MENTAL HEALTH, DEVELOPMENTAL
DISABILITIES AND SUBSTANCE ABUSE SERVICES

Southeastern Center

Southeastern Center For MH/DD/SAS

SOUTHEASTERN CENTER FOR MH/SA/DD

Southport-Oak Island Area Chamber of Commerce

Thalian Hall

Town of Carolina Beach

Town of Sunset Beach

U.S. Army Corps of Engineers, Wilmington District

Volunteers of America - Willow Pond

West Pender Middle

Wilmington Family YMCA

Wilmington Fire Dept.

Wilmington Health Access for Teens

Wilmington Interfaith Hospitality Network

Wilmington International Airport

Women, Infants, and Children Nutrition Program

Client Survey

Your participation in this research study is entirely voluntary. You may refuse to participate or stop at any time.

What county do you live in? _____

On a daily basis you see the needs of those you live and work with, including yourself. Consider this your community.

Here is a list of common community issues. For each one, please describe whether you believe it is not a problem, is a minor problem, is a moderate problem, or is a serious problem for the people in your community. Feel free to add notes or elaborate on your choices.

| Issue | Not a problem | Minor Problem | Moderate Problem | Serious Problem | Don't Know |
|---|----------------------|----------------------|-------------------------|------------------------|-------------------|
| Unemployment | | | | | |
| Poverty | | | | | |
| Lack of Jobs | | | | | |
| Illiteracy | | | | | |
| Unsafe school environment | | | | | |
| Overcrowded classrooms | | | | | |
| Lack of cultural arts education | | | | | |
| Water or air pollution | | | | | |
| Noise or other pollution | | | | | |
| Community disaster services | | | | | |
| Alcoholism and alcohol abuse by adults | | | | | |
| Drug abuse | | | | | |
| Underage drinking | | | | | |
| Mental Illness | | | | | |
| Lack of affordable medical care | | | | | |
| Lack of affordable prescription medicine | | | | | |
| Lack of medical insurance | | | | | |
| Healthcare for elderly persons | | | | | |
| HIV/AIDS | | | | | |
| Enough doctors/Medical staff in the community | | | | | |
| Shortage of affordable housing | | | | | |
| Poor housing conditions | | | | | |
| Overcrowded housing | | | | | |

Client Survey

| | | | | | |
|--|--|--|--|--|--|
| Lack of proper utilities | | | | | |
| Shortage of recreational facilities | | | | | |
| Lack of cultural activities | | | | | |
| Lack of public meeting space | | | | | |
| Crime | | | | | |
| Gangs | | | | | |
| Discrimination based on race | | | | | |
| Discrimination based on one's sex | | | | | |
| Teenage pregnancy | | | | | |
| Family violence, abuse of children or adults | | | | | |
| Daycare for children | | | | | |
| Daycare for adults | | | | | |
| Domestic violence | | | | | |
| Language barriers | | | | | |
| Inadequate public transportation | | | | | |
| Time it takes to get to a medical facility | | | | | |

Are there any issues that you would like to add that we didn't mention?

What are the three issues you believe deserve the most attention within your community?

- 1.
- 2.
- 3.

On what are you basing your observations?

Additional comments.

Are you male or female?

Client Survey

What year were you born?

What do you consider to be your primary racial or ethnic group?

--American Indian or Alaskan Native

--Asian or Pacific Islander

--Black

--White

--Other

Are you of Hispanic origin? Yes No

Do you own your own home, rent, or live in public housing? (Choose one)

Thank you for participating in this survey. The findings will be available to the community in May.

Evaluación de las necesidades Encuesta de los Clientes

Su participación en este estudio de la investigación es completamente voluntaria. Usted puede negarse a participar o detenerse en cualquier momento.

¿En qué condado vive usted ? _____

Diariamente usted ve las necesidades de aquéllos con quien vive y trabaja incluyendo usted mismo. Para efectos de esta encuesta considere este grupo como su comunidad.

Aquí abajo verá una lista de problemas comunes de la comunidad. Para cada uno, haga el favor de describir si cree que no es problema, es problema menor, es problema moderado, o es problema serio para las personas en su comunidad. Puede añadir comentarios para elaborar sus respuestas.

| Tema | No es problema | Es problema menor | Es problema moderado | Es problema serio | No sé o no tengo opinión |
|---|-----------------------|--------------------------|-----------------------------|--------------------------|---------------------------------|
| Desempleo | | | | | |
| Pobreza | | | | | |
| Falta de Trabajo | | | | | |
| Analfabetismo | | | | | |
| Peligroso ambiente escolar | | | | | |
| Aulas superpobladas | | | | | |
| Falta de educación de artes culturales | | | | | |
| Contaminación del aire o del agua | | | | | |
| Ruido u otra contaminación | | | | | |
| Calidad de servicios de catástrofes en la comunidad (sobre todo para los huracanes) | | | | | |
| Alcoholismo y abuso del alcohol en adultos | | | | | |
| Abuso de drogas | | | | | |
| Abuso de alcohol en menores | | | | | |
| Enfermedades mentales | | | | | |
| Falta de atención médica asequible | | | | | |
| Falta de medicinas asequibles | | | | | |
| Falte de seguro médico | | | | | |
| Atención médica para las personas de tercera edad | | | | | |

Evaluación de las necesidades Encuesta de los Clientes

| | | | | | |
|--|--|--|--|--|--|
| SIDA/VIH | | | | | |
| Suficientes doctores/ personal médico en la comunidad | | | | | |
| Escasez de vivienda asequible | | | | | |
| Malas condiciones en las viviendas | | | | | |
| Viviendas superpobladas | | | | | |
| Falta de servicios públicos apropiados | | | | | |
| Escasez de instalaciones recreativas | | | | | |
| Falta de actividades culturales | | | | | |
| Falta de espacio para reuniones públicas | | | | | |
| Crimen | | | | | |
| Pandillas organizadas | | | | | |
| Discriminación racial | | | | | |
| Discriminación sexual | | | | | |
| Embarazos en las adolescentes | | | | | |
| Violencia familiar, abuso de niños o adultos | | | | | |
| Guarderías infantiles | | | | | |
| Centros de cuidado diurno para ancianos | | | | | |
| Violencia doméstica | | | | | |
| Barreras lingüísticas | | | | | |
| Insuficiente transporte público | | | | | |
| Tiempo de entrada en un centro médico (clínica u hospital) | | | | | |

¿Hay otro tema que le gustaría añadir, no mencionado arriba?

Evaluación de las necesidades Encuesta de los Clientes

En su opinión, ¿cuáles son los tres problemas que merecen mayor atención en su comunidad?

- 1.
- 2.
- 3.

¿En qué basa sus observaciones?

Comentarios adicionales.

Por favor indique:

Sexo (masculino o femenino)

Año de nacimiento

¿A cuál de los siguientes grupos étnicos pertenece usted principalmente?

- Indio Americano o nacido en Alaska
- Asiático o nacido en las Islas del Pacífico
- Negro
- Blanco
- Otro

¿Es usted hispano o de origen hispano?

¿Es usted dueño de su propia casa? ¿Alquila? ¿Vive en una vivienda pública? (Escoja uno)

Le agradecemos su participación en esta encuesta. Los resultados se publicarán durante el mes de mayo.

Client Survey Locations

1. UNCW (New Hanover)
2. Elderly Care (New Hanover)
3. Brunswick Community College (Brunswick)
4. New Hanover County Employment Security Commission (New Hanover)
5. Brunswick County DSS (Brunswick)
6. Employment Security Commission & Job Link Career Center (Brunswick)
7. Brunswick County Department of Older Adults (Brunswick)
8. Noah's Ark Child Care (New Hanover)
9. Pender County DSS (Pender)
10. Employment Security Commission (Pender)
11. New Hope Clinic (Brunswick)
12. New Hanover County Library (New Hanover)
13. New Hanover DSS (New Hanover)
14. Pender Adult Services (Pender)
15. Pender County Library (Pender)
16. Tileston Outreach Health Center (New Hanover)
17. Social Security Administration (New Hanover)
18. Catholic Social Ministries (New Hanover)
19. Catholic Social Ministries (Pender)
20. Hispanic Resource Center (Brunswick)
21. Little Town Child Care (Pender)
22. Kids Connection (Brunswick)
23. Brunswick County Health Department (Brunswick)
24. Pender County Health Department (Pender)
25. New Hanover County Health Department (New Hanover)
26. Good Shepard Day Shelter (New Hanover)
27. Ashley Transitional Housing Center (New Hanover)

Public Perception Telephone Survey

IF - NO ANSWER BY 5TH RING
 - ANSWERING MACHINE MESSAGE
 - OR, BUSY SIGNAL | -----> TAP 3 [ENTER]

IF - A modem OR FAX
 - A NOT IN-SERVICE NUMBER
 - OR, NUMBER CHANGED TO NEW NUMBER | -----> TAP 2 [ENTER]

IF - SOMEONE ANSWERS |-----> TAP 1 [ENTER]

Hello, my name is _____ and I am a UNCW research student. This is a survey about your views on the health and human service needs in our area. The survey focuses on New Hanover, Pender, and Brunswick counties. May I speak to the person with the next birthday who lives at this residence and is 18 years of age or older?

<<If not here but Respondent is 18 or over, interview Respondent>>
 <<If new person picks up, repeat first two sentences above>>

We are calling residents whose phone numbers were randomly selected. Your answers are confidential. The survey will last approximately 20 minutes.

- <1> ELIGIBLE AND WILLING RESPONDENT
- <2> HARD REFUSAL (Do not call back)
- <3> INELIGIBLE PERSON:
 - UNDERAGE
 - LANGUAGE PROBLEM
 - HEARING PROBLEM
- <4> INELIGIBLE NUMBER:
 - BUSINESS OR INSTITUTIONAL #
 - PHONE BOOTH
- <5> SOFT REFUSAL (No explicit statement, simple hang up, too busy now)

Your participation in this research study is entirely voluntary. You may refuse to participate or stop at any time.

What county do you currently live in?

- (1) New Hanover
- (2) Pender
- (3) Brunswick
- <4> Some other county
- <99> dont know

How many years have you lived in this county?

Enter number of years.
 If less than one year, enter 0.
 <<Enter 9999 if don't know or refused>>

Do you expect to be living in the same county five years from now?

- (1) Yes
- (2) no
- <99> don't know/refuse

On a daily basis you see the needs of those you live and work with, including yourself. Tonight we will call these people your community. People experience challenges and issues sometimes in the community where they live. Based on these observations, what is the biggest need in your community?

(Open response)

Public Perception Telephone Survey

Keeping what we defined as your community in mind ... Communities have strengths that help people make their community a better place to live. Here is a list of common strengths. For each one, please describe whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree that the strength exists in your community.

People in your community gather together formally and informally, for example at picnics or meetings.

- (1) strongly agree
- (2) somewhat agree
- (3) somewhat disagree
- (4) strongly disagree
- <99> don't know/refuse

People in your community consider the same things important.

- (1) strongly agree
- (2) somewhat agree
- (3) somewhat disagree
- (4) strongly disagree
- <99> don't know/refuse

People in your community come together to work on common goals.

- (1) strongly agree
- (2) somewhat agree
- (3) somewhat disagree
- (4) strongly disagree
- <99> don't know/refuse

People and groups in your community come together to help each other out when they have a problem.

- (1) strongly agree
- (2) somewhat agree
- (3) somewhat disagree
- (4) strongly disagree
- <99> don't know/refuse

People in your community trust each other.

- (1) strongly agree
- (2) somewhat agree
- (3) somewhat disagree
- (4) strongly disagree
- <99> don't know/refuse

People who may be different from one another participate together in community activities.

- (1) strongly agree
- (2) somewhat agree
- (3) somewhat disagree
- (4) strongly disagree
- <99> don't know/refuse

Now tonight I have a list of common issues. For each one, please describe whether you believe it is: not a problem, is a minor problem, is a moderate problem, or is a serious problem for the people in your community.

Public Perception Telephone Survey

The first set of questions relates to health issues.

Substance abuse by minors:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Substance abuse by adults:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Children not getting enough physical activity:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Lack of organized team sports for children:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Underage smoking:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Underage drinking:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Alcoholism and alcohol abuse by adults:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Drug related illnesses:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem

Public Perception Telephone Survey

<99> don't know/refuse

Smoking related illnesses:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Depression:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Youth/Teen Suicide:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Mental Illness:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Lack of medical insurance:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Lack of medical coverage within your insurance plan:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Lack of services covered by Medicaid:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Affordability of medical insurance:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem

Public Perception Telephone Survey

(4) is a serious problem
<99> don't know/refuse

Medicaid ineligibility:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Cost of healthcare treatments:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Location of healthcare centers:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Number of healthcare centers:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Staff availability at healthcare centers:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Number of HIV/AIDS treatment centers:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Lack of HIV/AIDS education:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Affordability of prescription medications:

(1) not a problem
(2) is a minor problem

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(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Infant mortality:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Healthcare for elderly persons:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Availability of dental care:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Is there any other issue you'd like to mention pertaining to health issues?

(Open response)

What year were you born?

<< _ _ Enter the last two years of the year of birth>>
<< Enter 9999 if don't know or refuse>>

How many adults 65 years of age or older, including yourself, live in your household?

<<Enter 9999 if don't know or refuse>>

Now I would like to get your thoughts on social issues in our region. Please keep in mind the scale: not a problem, minor problem, moderate problem, or serious problem.

Teenage pregnancy:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Abstinence education:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Public Perception Telephone Survey

Facilities for teen pregnancy support:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Education for the prevention of disease:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Sex education:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Discrimination based on race:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Discrimination based on sex:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Cultural discrimination:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Domestic violence:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Child abuse:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem

Public Perception Telephone Survey

<99> don't know/refuse

Adult abuse:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Emotional or psychological abuse:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Language barriers within the community:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Finding affordable legal help:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Finding care for a person with a disability :

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Finding care for a person with a serious illness:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Finding care for an elder:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem
- (4) is a serious problem
- <99> don't know/refuse

Daycare for children:

- (1) not a problem
- (2) is a minor problem
- (3) is a moderate problem

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(4) is a serious problem
<99> don't know/refuse

Is there anything that you would like to add pertaining to social issues?

(Open response)

Keep in mind the same rating scale as I ask you questions about safety in your community.

People who drive drunk:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Drug enforcement:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Assault:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Vandalism:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Juvenile delinquency in your community:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Robbery:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Prostitution:

(1) not a problem
(2) is a minor problem

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(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Gangs:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Is there anything that you would like to add pertaining to safety?

(Open response)

Now I will ask you about economic issues in your community.

Unemployment:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Not having appropriate shelter:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Not having enough clothing:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Not having enough food:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Finding it difficult to budget:

(1) not a problem
(2) is a minor problem
(3) is a moderate problem
(4) is a serious problem
<99> don't know/refuse

Is there anything that you would like to add pertaining to economic issues?

(Open response)

Public Perception Telephone Survey

Which best describes your house or apartment. Is it -->

- (1) Owned by someone in your household,
- (2) Rented, or
- (3) Occupied without rent?

<99> Don't know/ refused

Do you live in public housing?

- (1) Yes
- (2) No

<99> Dont know

Which best describes where you live?

- (1) Single family home
- (2) Apartment building or condominium
- (3) Mobile home/trailer

<99> none of the above/refuse

Again, I will name some housing issues that may occur in your community. Please indicate if you see them as not a problem, a minor problem, a moderate problem, or a serious problem.

Access to public housing

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Overcrowded living space in your community

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Not enough places to live

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Number of people living under one roof

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Poor air conditioning units

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Lack of proper heating in your community

Public Perception Telephone Survey

(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Lack of indoor plumbing
(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Lack of electricity
(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Lack of effective transitional housing for Elderly care
(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

<<Interviewer: transitional housing is nontraditional residential settings with individuals facing problems or challenges in their lives>>

Lack of Halfway homes
(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Lack of Domestic violence shelters
(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Cost of rent or mortgage payment in your community
(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Is there anything that we left out?
(Open response)

Public Perception Telephone Survey

The next issue is focused on education. Please indicate if you observe them as not a problem, a minor problem, a moderate problem, or a serious problem.

Illiteracy

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Lack of after school or summer educational programs

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Lack of tutors in the community

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Children feeling threatened by bullying at school

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

More security at school such as using metal detectors and police officers.

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Classroom violence

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Too many students in each class

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Lack of discipline in schools

- (1) not a problem

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(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Not enough music classes in school

(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Not enough art classes in school

(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Not enough science classes in school

(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Not enough English classes in school

(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Not enough physical activities during school hours

(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

After school daycare

(1) not a problem
(2) a minor problem
(3) a moderate problem
(4) a serious problem
<99> don't know/refuse

Is there anything that you would like to add pertaining to education?
(Open response)

Now we will shift towards environmental issues in our area. For each one, please describe whether you believe it is not a problem, is a minor problem, is a moderate problem, or is a serious problem for the people in your community.

Public Perception Telephone Survey

Littering

- (1) not a problem
 - (2) a minor problem
 - (3) a moderate problem
 - (4) a serious problem
 - <99> don't know/refuse
- People disposing of oil and lawn products unsafely

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Fumes from car exhaust

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Too much unnatural light at night

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Noise from traffic

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Air quality

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Water quality

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Community disaster services

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Public Perception Telephone Survey

Is there anything that you would like to add pertaining to environmental issues?

(Open response)

This series of questions is concerned with leisure activities.

Shortage of public swimming pools

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Shortage of public parks

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Shortage of community recreational leagues such as soccer, football, basketball, and baseball.

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Lack of art museums

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Not enough history museums

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Too few alcohol-free festivals

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Lack of family friendly community activities

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

Public Perception Telephone Survey

<99> don't know/refuse

Not enough daytime community events

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Lack of night time community events

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Too few youth cultural activities

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Lack of public meeting space in your community

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Affordability of recreational activities

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Affordability of entertainment activities such as movies and live music.

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Is there anything that you would like to add pertaining to leisure activities?

(Open response)

Transportation is the next issue in our survey.

Adequate public transportation

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem

<99> don't know/refuse

Public Perception Telephone Survey

Inadequate public transportation to the beach

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Time it takes to get to a medical facility

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Finding a way to get to work

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Lack of bike paths

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Not enough buses for daily travel

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Not enough bus routes to get you to various locations

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Lack of public transportation options

- (1) not a problem
- (2) a minor problem
- (3) a moderate problem
- (4) a serious problem
- <99> don't know/refuse

Is there anything that you would like to add?

(Open response)

Public Perception Telephone Survey

Are there any other issues in your community that we have not mentioned that you would like to mention now?

(Open response)

Which three issues that we have talked about tonight do you believe deserve the most attention within the community?

(Open response)

Please answer the following questions with yes or no answers.

Do you regularly volunteer in your church?

(1) Yes

(2) No

<99> refuse to answer

Do you regularly volunteer in your local schools?

(1) Yes

(2) No

<99> refuse to answer

Do you regularly volunteer in your local hospital?

(1) Yes

(2) No

<99> refuse to answer

Do you regularly volunteer in other organizations in your community?

(1) Yes

(2) No

<99> refuse to answer

Where do you volunteer?

Do you vote in most elections?

(1) Yes

(2) No

<99> refuse to answer

How much opportunity do you have to affect how things happen in your community?

Would you say it is

(1) A lot of opportunity,

(2) Some opportunity,

(3) a Little opportunity or

(4) Not much.

<99> refuse to answer

How satisfied are you with your ability to affect how things happen in your community?

(1) Very satisfied,

(2) Somewhat satisfied,

(3) a Little satisfied or

(4) Not satisfied at all

<99> refuse to answer

Public Perception Telephone Survey

Has someone in your household committed a crime in the past year?

(1) Yes

(2) No

<99> refuse to answer

Has someone in your household been a victim of a crime in the past year?

(1) Yes

(2) No

<99> refuse to answer

The following questions will help us be certain we have included a valid sampling of people.

What is your postal zip code?

<<Enter last three numbers of the zip code>>

Are you male or female?

(1) Male

(2) Female

<99> refuse

Which of the following, including yourself, live in your household?

(1) Two or more adults without children

(2) Two or more adults with at least one child aged 17 or younger

(3) One adult with at least one child aged 17 or younger

(4) One adult living alone

<99> don't know/refuse

Are you of Spanish/Hispanic origin or descent?

(1) Yes

(2) No

<99> refuse

What do you consider to be your primary racial or ethnic group?

(1) American Indian

(2) Asian or Pacific Islander

(3) Black or African American,

(4) White or

(5) some other racial or ethnic group?

<99> refuse

What is the Other racial or ethnic group?

Counting income from all sources including all earnings from jobs, pensions, unemployment insurance, public assistance, for everyone living in your home, stop me when I get to the income that includes your amount

(1) Less than \$5,000

(2) \$5,000-\$10,000

(3) \$10,000-\$15,000

(4) \$15,000-\$20,000

(5) \$20,000-\$25,000

(6) \$25,000-\$35,000

(7) \$35,000-\$50,000

(8) \$50,000-\$75,000

(9) \$75,000-\$100,000

(10) \$100,000-\$125,000

(11) \$125,000-\$150,000

(12) \$150,000-\$175,000

(13) \$175,000-\$200,000

(14) \$200,000-\$250,000

(15) \$250,000-\$300,000

(16) \$300,000 and above

<17> Refused

<99> don't know

Public Perception Telephone Survey

Does anyone in your household receive public assistance such as Temporary Assistance for Needy Families (TANF), food stamps, or Supplemental Security Income (SSI)?

(1) Yes

(2) No

<99> don't know/refuse

That's all of the questions that we have for you tonight.

Thank you for your time and cooperation and have a great night!!!

<Hang Up Now>

<Enter 1 to Continue>

Thanks, but tonight we are only talking with people in New Hanover, Pender, or Brunswick county.

Enter 1 to complete.

Focus Group Meeting Locations

Brunswick County

Brunswick Community College – Leland Campus
Leland, North Carolina

Museum of Coastal Carolina
Ocean Isle Beach, North Carolina

Southport Chamber of Commerce
Southport, North Carolina

New Hanover County

Greater Wilmington Chamber of Commerce (2 Sessions)
Downtown Wilmington, North Carolina

Hispanic Community Development Center
Downtown Wilmington, North Carolina

New Hanover County Library Myrtle Grove Branch (2 Sessions)
Wilmington, North Carolina

University of North Carolina Wilmington Campus, Leutze Hall (2 Sessions)
Wilmington, North Carolina

Pender County

Atkinson Town Hall
Atkinson, North Carolina

Cape Fear Community College – Hampstead Campus Auditorium
Hampstead, North Carolina

Pender County Board of Education Office
Burgaw, North Carolina

Focus Group Participants

Brunswick County

| First Name | Last Name | Title | Organization |
|------------|-----------|--------------------------------|---|
| Deborah | Ahlers | Commissioner | Town of Caswell Beach |
| Shirley | Babson | School Board Member | Brunswick County Board of Education |
| Joyce | Beatty | Principal | Belville Elementary School |
| Cynthia | Calhoun | Social Worker | Southeastern Center |
| Ellen | Cameron | Social Worker | Lower Cape Fear Hospice and Life Care Center |
| Lynn | Carlson | Nonprofit | Hope Harbor Home |
| Melanie | Champion | Teacher | Brunswick County Public Schools |
| Paul | Fisher | Alderman | City of Southport |
| Linda | Fluegel | Town Administrator | Town of Sunset Beach |
| Shirley | Freeman | City Clerk/Finance Officer | City of Northwest |
| Lois | Gable | Director | Southport-Oak Island Area Chamber of Commerce |
| Helen | Gabriel | Director | Brunswick Literacy Council |
| Joseph | Gore | Higher Ed. Administrator | Brunswick Community College |
| L. Blair | Harmon | Mayor of St. James | L. Blair Harmon |
| P. Ed | Hughes | Mayor Pro Tem | P. Ed Hughes |
| Gary | Knapp | Executive Director | Brunswick County Habitat for Humanity |
| Larry | Lammert | Mayor | Village of Bald Head Island |
| David | Lewis | City Manager | City of Boiling Spring Lakes |
| Elly | Lister | Commissioner | Elly Lister |
| Jayne | Mathews | County Employee | Brunswick County Volunteer Center |
| Mike | McCracken | Public Relations Manager | Progress Energy |
| Norman | Meares | Mayor | Town of Holden Beach |
| Diana | Mintz | Principal | Leland Middle School |
| May | Moore | Brunswick County Commissioner | Brunswick County Commissioners |
| Warren | Mortley | Director | Providence Home Family Emergency Teen Shelter |
| Stanley | Oathout | Councilmember | Town of St. James |
| Sarah | Peterson | Education Reporter | State Port Pilot |
| Darlene | Reiners | Medical Administrator | Brunswick Community Hospital |
| James | Roach | Alderman | Town of Shallotte |
| Polly | Russ | Former Pres., United Way Board | Civic Leader |
| Osey | Sanders | Police Chief | Town of Leland |
| Mary | Snead | Councilmember | Town of Oak Island |
| Lenn | Steiner | Councilmember | Town of Sunset Beach |
| Cathy | Swaim | Nonprofit | Hope Harbor Home |
| Cynthia | Tart | | Communities in Schools |
| Jerry | Thrift | Vice President | Brunswick Community College |
| Patsy | Thrift | Nonprofit | Communities in Schools of Brunswick County |
| Dean | Walters | Commissioner | Town of Ocean Isle Beach |
| Jerry | Walters | Town Manager | Town of Caswell Beach |
| Pete | Wilbeoer | Asst. Principal | South Brunswick Middle School |
| Eulis | Willis | Mayor | Town of Navassa |
| Dwight | Willis | Principal | Supply Elementary School |

Focus Group Participants

New Hanover County

| First Name | Last Name | Title | Organization |
|------------|---------------|---------------------------|--|
| Janet | Adams | Publisher/PR | Muendo Latino |
| Annie | Anthony | Volunteer | Cape Fear Volunteer Center |
| Barbara | Averitt | Social Worker | Access Family Services |
| Karen | Beatty | Social Worker | New Hanover County Schools |
| Steve | Bilzi | Board Member | NHC Board of Education |
| Barbara | Birkenheuer | Nonprofit | Cape Fear Habitat for Humanity |
| Jaimee | Blackman | Nonprofit | New Hanover County Partnership for Children |
| Tufanna | Bradley | | Coastal AHEC |
| John | Carey | Police Chief | Town of Wrightsville Beach |
| Denis | Carter | Assoc. Vice Chancellor | UNCW |
| Luis | Ciliselli | Social Worker | Migrant Education |
| Fred | Clingenpeel | Lieutenant | New Hanover County Sheriff's Office |
| Jamie | Collins | Social Worker | New Hanover County Department of Social Services |
| Lois | Cook Steele | Director | YWCA of Lower Cape Fear |
| Wanda | Coston | Planning Director | New Hanover County |
| Karin | Cox | Executive Director | Parenting Place |
| Lawrence | Craige | Attorney | Lawrence C. Craige & Associates |
| Annette | Crumpton | Administrator | New Hanover County Department of Aging |
| Tom | Cunningham | Assistant Director | Greater Wilmington Chamber of Commerce |
| Budd | Dingwall | Principal | Codington Elementary |
| Albert | Eby | Public Administrator | WAVE Transit |
| Krista | Eller | Nonprofit | New Hanover County Partnership for Children |
| Kitty | Eurkeys | | Domestic Violence Shelter and Services |
| Jorge | Figueroa, PhD | | Wilmington Health Access for Teens |
| Marsha | Fretwell, MD | Medical Doctor | Marsha Fretwell, MD |
| Angel | Funk | Social Worker | Domestic Violence Shelter and Services |
| Richard | Gerrish | Social Worker | Assisted Home Healthcare |
| Maribel | Gomez | Concerned Citizen | Hispanic CDC |
| Greg | Gonthier | Nonprofit | Easter Seal UCP of North Carolina |
| Allen | Gray, Jr. | Board Member | Elderhaus |
| Rick | Hairston | Director | Carolina Canines for Service |
| Lethia | Hankins | Council Member | Wilmington City Council |
| Kim | Hennes | | Women's Leadership Forum |
| Christine | Herbert | Social Worker | Geriatric Specialty Team |
| Paul | Hicks | Director | Cape Fear CDC |
| Terri | Holler | Medical Provider | Hispanic CDC |
| Glenda | Holt | Title V Program Director | Cape Fear Area United Way - Senior Aides Program |
| Glenda | Holt | Project Director | Senior Aides Program |
| Paige | Howsier | Family Nurse Practitioner | Tileston Outreach Health Clinic |
| Silvia | Itderlt | Nonprofit | Hispanic CDC |
| Jane | Jones | Social Worker | Cape Fear Council of Governments |
| Randolph | Keaton | Social Worker | Wilmington Housing Authority |

Focus Group Participants

| First Name | Last Name | Title | Organization |
|------------|----------------|----------------------------|---|
| Katrina | Knight | Social Worker | Good Shepherd Ministries |
| Carlo | Lauore | Commercial Banker | BB&T |
| Al | Lerch | Assistant Superintendent | New Hanover County Schools |
| Judith | Malmon | Board Member | Landfall Foundation |
| Anne | Mason | Board Member | Wilmington Woman's Club |
| Gordon | McInnis | Counselor | Family Services of the Lower Cape Fear |
| Marcela | Medoza-Batista | Civic Leader | Hispanic CDC |
| Nicolas | Montoya | Nonprofit | Amigos International |
| Nicolas | Montoya | Nonprofit | Amigos International |
| Janice | Morgan | Nonprofit | Boy Scouts of America, Cape Fear Council |
| Linda | Patton | Director | Literacy Council of Cape Fear |
| Calvin | Peck | Manager | Town of Carolina Beach |
| Linda | Pierce | Director | Catholic Social Ministries |
| Roy | Pinnick | | Family Services of the Lower Cape Fear |
| Frankie | Roberts | Director | LINC, Inc. |
| Boyd | Robison | | Small Business and Technology Development Center |
| Arlanda | Rouse | Public Administrator | Cape Fear Public Transport Authority |
| Sonia | Royes | Social Worker | Hispanic CDC |
| Sonia | Royes | Social Worker | Catholic Social Ministries |
| Kathy | Sabella | Educator | Hispanic CDC |
| James | Sabella | Educator | UNCW |
| David | Spencer | Principal | John T Hoggard High |
| William | Stokes | Retired Banking | Kiwanis Club of Wilmington |
| Sharon | Stone | Nonprofit | Bellamy Mansion Museum of History and Design Arts |
| Sue | Strickler | Nonprofit | Lower Cape Fear Hospice & Life Care Center |
| Alan | Swart | | New Hanover County Partnership for Children |
| Clancy | Thompson | | Child Advocacy Commission of the Lower Cape Fear |
| Lucy | Vasquez | | Amigos Internacional |
| Scott | Whisnet | Director of Public Affairs | New Hanover Health Network |
| Tracy | Wilkes | Nonprofit | Dreams of Wilmington |
| Diana | Woolley | Executive Director | The Carousel Center |

Focus Group Participants

Pender County

| First Name | Last Name | Title | Organization |
|------------|------------|-----------------------|---|
| Jean | Beasley | Nonprofit/Educator | Sea Turtle Rescue and Rehabilitation Center |
| Wayne | Briley | Police Chief | Town of Burgaw |
| David | Cignotti | Principal | Cape Fear Elementary School |
| Linda | Clark | Town Clerk | Town of Atkinson |
| Susan | Forbes | President | Hampstead Chamber of Commerce |
| Buddy | Fowler | Councilmember | Town of Surf City |
| Amy | Goodwin | Program Director | Safe Haven of Pender |
| Alayna | Gray | Principal | Pender Learning Center |
| Cheryl | Highsmith | Community Leader | Pender County Department of Social Services |
| Leigh Ann | Kapiko | Principal | South Topsail Elementary |
| Judy | Katalinic | Councilor | Village of St. Helena |
| Donna | Lanier | Nurse, County Schools | Pender County Public Schools |
| Deborah | McAllister | Public Relations | Pender County Department of Social Services |
| Mary | Meece | Commissioner | Town of Topsail Beach |
| Patricia | Miller | Director | Services for the Blind |
| Mark | Minsky | Principal | Malpass Corner Elementary School |
| Michael | Moore | Town Manager | Town of Surf City |
| E.D. | Rivenbark | County Commissioner | Pender County Commissioners |
| June | Robbins | | West Pender Middle School |
| Bridget | Wortman | Administrator | North Topsail Elementary |
| 2 | Anonymous | Participants | |

Focus Group Check List

Materials Needed for Focus Group

- Cassette tape recorder with batteries.
- Flip Chart and Stand
- Index cards (Two Colors) numbered
- Markers for Flip Chart, Sharpies for Nametags, pens or pencils
- Address, telephone number, and name of contact person at location.
- Roadmaps/ driving instructions
- Name tags, handouts, registration forms
- Script for Moderator & Recorder Forms
- Box of tissues, duct tape, scissors
- Sign for door of meeting area
- Writing tablets for moderator and recorder
- 2 Large Manila Envelopes to collect Index Cards and Registration Forms
- Tupperware container to transport materials

Refreshments

- Morning Meeting:** Muffins, Doughnuts, OJ, Coffee, Bottled Water, Cups, Ice, Napkins, Plates, Small Cooler for Ice, Candy
- Afternoon/Evening Meeting:** Cookies, Chips, Soft Drinks, Bottled Water, Cups, Ice, Napkins, Plates, Small Cooler for Ice, Candy

Focus Group Room Set-up

- Check Thermostat
- Notice the lighting
- Look for visible distractions
- Arrange chairs and tables. The moderator should be facing the door, and the recorder should be setting by the door to welcome and register late arrivals.
- Refreshment Table
- At each place setting: Index Cards, Pen, Registration Form, Name plate
- Set up and test tape recorder

Focus Group Script

Welcome and Introductions

Purpose

This is an assessment of health and human service needs for Brunswick, New Hanover and Pender Counties only. This is not a problem solving session but an opportunity to verbalize your thoughts concerning various needs, trends and gaps in our communities.

Guidelines

Before we begin, let me suggest some things that will make our discussion more productive.

1. Please speak up
2. Only one person should talk at a time.
3. You may be assured of confidentiality.
4. We will not be taking a break, so please feel free to take personal breaks as needed during the session. Restrooms are located: _____.
5. Respect others opinions and comments.
6. Please cut off cell phones, or if you need to keep them on, please turn it to vibrate. We request that if you must take calls, please leave the room during the duration of your call.

Moderator Role

My role here is to ask questions and listen. As you can see, we will work through the five questions that are listed on the board. I won't be participating in the conversation, but I want you to feel free to talk to one another. There is a tendency in these discussions for some people to talk a lot and some people not to say much. But it is important to hear from each of you today because you have different experiences and perspectives that we would like to hear. So, if one of you is sharing a lot, I may ask you to let others talk. And if you aren't saying much, I may ask you for your opinion.

Recorder Role

Insert Name will not participate in the discussion. *She/He* will take comprehensive notes, keep track of time, and operate the tape recorder. At the end of the session, *she/he* will review our notes to ensure that we recorded all of the issues discussed.

Focus Group Questions

We are about to begin. The session will last no longer than 90 minutes. One last request, before responding to a question, please state whether your comment is reflective of a particular county, neighborhood, part of a county, the whole region, etc. Does anyone have any questions?

Focus Group Script

Index Card Ranking

Please take the state color index card that is in front of you. Please take a moment to list the top three health and human service needs in our community. The issues listed at #1 should be the greatest issue in the community... then the second most, then third, etc.

Questions

Question #1

Ask each person to go around the room and report on their #1 choice. Place these on the board to assist with the start of conversation. What are the most important needs that affect health and human services in our community?

Question #2

What are you basing your observations on?

Question #3

What gaps exist in services, programs and funding to address the needs?

Question #4

What trends that might affect health and human services delivery, both positive and negative, should key decision makers be aware of as they may undertake a planning process?

Question #5

Are there topics that were ranked #2 or #3 that we have not discussed yet? Is there anything else you would like to share in regards to health and human services that we have not already covered?

Take up the first ranking card.

Recorder Review

Recorder should read back through notes to ensure that person has accurately recorded issues and concepts. Did we miss anything? Corrections should be made at that time.

Second Index Card Ranking

Please take the state color index card that is in front of you. Again, please take a moment to list the top three health and human service needs in our community. The issues listed at #1 should be the greatest issue in the community... then the second most, then third, etc. These may be the same three that you listed when we

Focus Group Script

started. You may feel differently now that we have had the time to talk through the issues, needs and gaps in our community.

Dismissal

This concludes our session this evening. Again, we greatly appreciate your time and commitment to this project. Before you leave, let us please take up your index cards and the registration form you received when you came in.

Quick Announcement: On May 3, we will be presenting the results from the needs assessment in Room 100 of the University Union on UNCW's campus at 2:30 p.m. We hope that you will be able to join us.

Again, thank you and safe travels home.

Assessment Mean Ranks by Location

Key Informant Rankings

Regional

| | Rank | Mean |
|---|------|------|
| LACK OF AFFORDABLE PRESCRIPTION MEDICATIONS | 1 | 3.54 |
| LACK OF AFFORDABLE MEDICAL CARE | 2 | 3.48 |
| DRUG ABUSE AMONG ADULTS (18 AND OLDER) | 3 | 3.36 |
| SHORTAGE OF AFFORDABLE HOUSING | 4 | 3.35 |
| UNDERAGE DRINKING | 5 | 3.33 |
| DRUG ABUSE AMONG CHILDREN (17 AND YOUNGER) | 6 | 3.33 |
| INADEQUATE PUBLIC TRANSPORTATION | 7 | 3.23 |
| POVERTY | 8 | 3.20 |
| LACK OF AFFORDABLE DAY CARE FOR CHILDREN | 9 | 3.19 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG ADULTS (18 AND OLDER) | 10 | 3.18 |
| UNEMPLOYMENT OR UNDEREMPLOYMENT | 11 | 3.17 |
| LACK OF AFFORDABLE DAY CARE FOR ADULTS | 12 | 3.17 |
| OVERCROWDED CLASSROOMS | 13 | 3.15 |
| ALCOHOLISM AND ALCOHOL ABUSE BY CHILDREN | 14 | 3.15 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 15 | 3.13 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 16 | 3.11 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG CHILDREN (17 AND YOUNGER) | 17 | 3.10 |
| CRIME | 18 | 3.06 |
| ILLITERACY | 19 | 3.00 |
| LACK OF JOBS | 20 | 2.95 |
| SUBSTANDARD/POOR HOUSING CONDITIONS | 21 | 2.93 |
| DISCRIMINATION BASED ON RACE | 22 | 2.84 |
| SHORTAGE OF RECREATIONAL FACILITIES | 23 | 2.79 |
| HOMELESSNESS | 24 | 2.76 |
| TEENAGE PREGNANCY | 25 | 2.76 |
| HIV/AIDS | 26 | 2.75 |
| OVERCROWDED HOUSING | 27 | 2.73 |
| WATER AND/OR AIR POLLUTION | 28 | 2.67 |
| GANGS | 29 | 2.58 |
| DISCRIMINATION BASED ON GENDER | 30 | 2.48 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 31 | 2.45 |
| LACK OF CULTURAL ARTS EDUCATION | 32 | 2.44 |
| UNSAFE SCHOOL ENVIRONMENT | 33 | 2.35 |
| LACK OF CULTURAL ACTIVITIES | 34 | 2.30 |
| NOISE AND/OR OTHER POLLUTION | 35 | 2.07 |
| COMMUNITY DISASTER SERVICES | 36 | 1.93 |

Assessment Mean Ranks by Location

Key Informant Rankings

Brunswick

| | Rank | Mean |
|---|------|------|
| DRUG ABUSE AMONG CHILDREN (17 AND YOUNGER) | 3.50 | 1 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICATIONS | 3.50 | 2 |
| LACK OF AFFORDABLE DAY CARE FOR ADULTS | 3.47 | 3 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.43 | 4 |
| UNDERAGE DRINKING | 3.40 | 5 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.38 | 6 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.37 | 7 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.35 | 8 |
| DRUG ABUSE AMONG ADULTS (18 AND OLDER) | 3.25 | 9 |
| ALCOHOLISM AND ALCOHOL ABUSE BY CHILDREN | 3.17 | 10 |
| ILLITERACY | 3.11 | 11 |
| UNEMPLOYMENT OR UNDEREMPLOYMENT | 3.10 | 12 |
| POVERTY | 3.10 | 13 |
| LACK OF AFFORDABLE DAY CARE FOR CHILDREN | 3.10 | 14 |
| SUBSTANDARD/POOR HOUSING CONDITIONS | 3.06 | 15 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG ADULTS (18 AND OLDER) | 3.05 | 16 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG CHILDREN (17 AND YOUNGER) | 3.00 | 17 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 2.95 | 18 |
| TEENAGE PREGNANCY | 2.89 | 19 |
| CRIME | 2.84 | 20 |
| LACK OF JOBS | 2.84 | 21 |
| OVERCROWDED CLASSROOMS | 2.81 | 22 |
| OVERCROWDED HOUSING | 2.76 | 23 |
| WATER AND/OR AIR POLLUTION | 2.75 | 24 |
| LACK OF CULTURAL ACTIVITIES | 2.63 | 25 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.58 | 26 |
| LACK OF CULTURAL ARTS EDUCATION | 2.56 | 27 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.52 | 28 |
| HIV/AIDS | 2.50 | 29 |
| HOMELESSNESS | 2.50 | 30 |
| DISCRIMINATION BASED ON GENDER | 2.31 | 31 |
| DISCRIMINATION BASED ON RACE | 2.25 | 32 |
| UNSAFE SCHOOL ENVIRONMENT | 2.20 | 33 |
| GANGS | 2.07 | 34 |
| NOISE AND/OR OTHER POLLUTION | 2.00 | 35 |
| COMMUNITY DISASTER SERVICES | 1.89 | 36 |

Assessment Mean Ranks by Location

Key Informant Rankings

New Hanover

| | Rank | Mean |
|--|------|------|
| LACK OF AFFORDABLE PRESCRIPTION MEDICATIONS | 3.56 | 1 |
| DRUG ABUSE AMONG ADULTS (18 AND OLDER) | 3.51 | 2 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.51 | 3 |
| UNDERAGE DRINKING | 3.43 | 4 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.41 | 5 |
| DRUG ABUSE AMONG CHILDREN (17 AND YOUNGER) | 3.34 | 6 |
| LACK OF AFFORDABLE DAY CARE FOR CHILDREN | 3.29 | 7 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG ADULTS (18 AND OLDER) | 3.25 | 8 |
| ALCOHOLISM AND ALCOHOL ABUSE BY CHILDREN | 3.22 | 9 |
| POVERTY | 3.21 | 10 |
| OVERCROWDED CLASSROOMS | 3.21 | 11 |
| CRIME | 3.19 | 12 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.19 | 13 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG CHILDREN (17 AND YOUNGER) | 3.16 | 14 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.16 | 15 |
| UNEMPLOYMENT OR UNDEREMPLOYMENT | 3.10 | 16 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.08 | 17 |
| DISCRIMINATION BASED ON RACE | 3.06 | 18 |
| LACK OF AFFORDABLE DAY CARE FOR ADULTS | 3.05 | 19 |
| ILLITERACY | 2.98 | 20 |
| HIV/AIDS | 2.97 | 21 |
| HOMELESSNESS | 2.92 | 22 |
| LACK OF JOBS | 2.88 | 23 |
| SUBSTANDARD/POOR HOUSING CONDITIONS | 2.82 | 24 |
| GANGS | 2.80 | 25 |
| WATER AND/OR AIR POLLUTION | 2.80 | 26 |
| TEENAGE PREGNANCY | 2.76 | 27 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.72 | 28 |
| OVERCROWDED HOUSING | 2.68 | 29 |
| DISCRIMINATION BASED ON GENDER | 2.54 | 30 |
| UNSAFE SCHOOL ENVIRONMENT | 2.51 | 31 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.29 | 32 |
| NOISE AND/OR OTHER POLLUTION | 2.22 | 33 |
| LACK OF CULTURAL ARTS EDUCATION | 2.20 | 34 |
| LACK OF CULTURAL ACTIVITIES | 1.98 | 35 |
| COMMUNITY DISASTER SERVICES | 1.83 | 36 |

Assessment Mean Ranks by Location

Key Informant Rankings

Pender

| | Rank | Mean |
|--|------|------|
| UNEMPLOYMENT OR UNDEREMPLOYMENT | 3.64 | 1 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.64 | 2 |
| LACK OF JOBS | 3.50 | 3 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICATIONS | 3.50 | 4 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.45 | 5 |
| SHORTAGE OF RECREATIONAL FACILITIES | 3.45 | 6 |
| POVERTY | 3.42 | 7 |
| OVERCROWDED CLASSROOMS | 3.40 | 8 |
| LACK OF CULTURAL ARTS EDUCATION | 3.40 | 9 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.22 | 10 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG ADULTS (18 AND OLDER) | 3.20 | 11 |
| SUBSTANDARD/POOR HOUSING CONDITIONS | 3.18 | 12 |
| LACK OF CULTURAL ACTIVITIES | 3.18 | 13 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.10 | 14 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 3.09 | 15 |
| ILLITERACY | 3.00 | 16 |
| DRUG ABUSE AMONG ADULTS (18 AND OLDER) | 3.00 | 17 |
| MENTAL ILLNESS AND/OR EMOTIONAL ISSUES AMONG CHILDREN (17 AND YOUNGER) | 3.00 | 18 |
| LACK OF AFFORDABLE DAY CARE FOR CHILDREN | 3.00 | 19 |
| LACK OF AFFORDABLE DAY CARE FOR ADULTS | 3.00 | 20 |
| DRUG ABUSE AMONG CHILDREN (17 AND YOUNGER) | 2.89 | 21 |
| OVERCROWDED HOUSING | 2.89 | 22 |
| CRIME | 2.83 | 23 |
| ROAD CONDITIONS | 2.73 | 24 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 2.70 | 25 |
| DISCRIMINATION BASED ON RACE | 2.70 | 26 |
| ALCOHOLISM AND ALCOHOL ABUSE BY CHILDREN | 2.67 | 27 |
| UNDERAGE DRINKING | 2.67 | 28 |
| COMMUNITY DISASTER SERVICES | 2.50 | 29 |
| TEENAGE PREGNANCY | 2.50 | 30 |
| HIV/AIDS | 2.40 | 31 |
| DISCRIMINATION BASED ON GENDER | 2.40 | 32 |
| HOMELESSNESS | 2.30 | 33 |
| GANGS | 2.29 | 34 |
| UNSAFE SCHOOL ENVIRONMENT | 1.91 | 35 |
| WATER AND/OR AIR POLLUTION | 1.91 | 36 |
| NOISE AND/OR OTHER POLLUTION | 1.55 | 37 |

Assessment Mean Ranks by Location

Service Provider Survey Mean Rank by Location

Regional

| <u>Need</u> | <u>Mean</u> | <u>Rank</u> |
|--|-------------|-------------|
| LACK OF AFFORDABLE PRESCRIPTION MEDICINE | 3.60 | 1 |
| LACK OF MEDICAL INSURANCE | 3.59 | 2 |
| UNDERAGE DRINKING | 3.58 | 3 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.52 | 4 |
| DOMESTIC VIOLENCE | 3.36 | 5 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.34 | 6 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.31 | 7 |
| POVERTY | 3.30 | 8 |
| DRUG ABUSE | 3.27 | 9 |
| HEALTHCARE FOR ELDERLY PERSONS | 3.23 | 10 |
| MENTAL ILLNESS | 3.20 | 11 |
| LACK OF JOBS | 3.19 | 12 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.19 | 13 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.14 | 14 |
| CRIME | 3.10 | 15 |
| POOR HOUSING CONDITIONS | 3.09 | 16 |
| TEENAGE PREGNANCY | 2.99 | 17 |
| OVERCROWDED CLASSROOMS | 2.96 | 18 |
| UNEMPLOYMENT | 2.90 | 19 |
| ILLITERACY | 2.87 | 20 |
| DAYCARE FOR CHILDREN | 2.86 | 21 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.84 | 22 |
| OVERCROWDED HOUSING | 2.81 | 23 |
| HIV/AIDS | 2.77 | 24 |
| DAYCARE FOR ADULTS | 2.75 | 25 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.65 | 26 |
| DISCRIMINATION BASED ONE RACE | 2.64 | 27 |

Assessment Mean Ranks by Location

| | | |
|---|------|----|
| GANGS | 2.58 | 28 |
| UNSAFE SCHOOL ENVIRONMENT | 2.57 | 29 |
| LACK OF CULTURAL ARTS EDUCATION | 2.56 | 30 |
| WATER OR AIR POLLUTION | 2.46 | 31 |
| LACK OF CULTURAL ACTIVITIES | 2.36 | 32 |
| DISCRIMINATION BASED ON SEX | 2.34 | 33 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.33 | 34 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 2.33 | 35 |
| LACK OF PUBLIC MEETING SPACE | 2.27 | 36 |
| LACK OF PROPER UTILITIES | 2.17 | 37 |
| NOISE OR OTHER POLLUTION | 2.13 | 38 |
| QUALITY OF COMMUNITY DISASTER SERVICES | 1.79 | 39 |

Service Provider Survey Mean Rank by Location

Brunswick

| | <u>Mean</u> | <u>Rank</u> |
|--|-------------|-------------|
| <u>Need</u> | | |
| LACK OF MEDICAL INSURANCE | 3.50 | 1 |
| UNDERAGE DRINKING | 3.47 | 2 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICINE | 3.44 | 3 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.36 | 4 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.25 | 5 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.14 | 6 |
| MENTAL ILLNESS | 3.14 | 7 |
| POVERTY | 3.13 | 8 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.13 | 9 |
| DRUG ABUSE | 3.07 | 10 |
| LACK OF JOBS | 3.06 | 11 |
| POOR HOUSING CONDITIONS | 3.06 | 12 |
| DOMESTIC VIOLENCE | 3.06 | 13 |
| HEALTHCARE FOR ELDERLY PERSONS | 2.93 | 14 |

Assessment Mean Ranks by Location

| | | |
|---|------|----|
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 2.93 | 15 |
| LACK OF CULTURAL ACTIVITIES | 2.86 | 16 |
| ILLITERACY | 2.80 | 17 |
| DAYCARE FOR CHILDREN | 2.75 | 18 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.67 | 19 |
| TEENAGE PREGNANCY | 2.67 | 20 |
| LACK OF PUBLIC MEETING SPACE | 2.67 | 21 |
| CRIME | 2.67 | 22 |
| DAYCARE FOR ADULTS | 2.67 | 23 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.67 | 24 |
| UNEMPLOYMENT | 2.60 | 25 |
| OVERCROWDED HOUSING | 2.57 | 26 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 2.56 | 27 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.53 | 28 |
| UNSAFE SCHOOL ENVIRONMENT | 2.53 | 29 |
| OVERCROWDED CLASSROOMS | 2.53 | 30 |
| LACK OF CULTURAL ARTS EDUCATION | 2.43 | 31 |
| HIV/AIDS | 2.09 | 32 |
| GANGS | 2.08 | 33 |
| DISCRIMINATION BASED ONE RACE | 2.08 | 34 |
| WATER OR AIR POLLUTION | 2.00 | 35 |
| LACK OF PROPER UTILITIES | 1.93 | 36 |
| DISCRIMINATION BASED ON SEX | 1.92 | 37 |
| QUALITY OF COMMUNITY DISASTER SERVICES | 1.60 | 38 |
| NOISE OR OTHER POLLUTION | 1.40 | 39 |

Assessment Mean Ranks by Location

Service Provider Survey Mean Rank by Location

New Hanover

| <u>Need</u> | <u>Mean</u> | <u>Rank</u> |
|--|-------------|-------------|
| UNDERAGE DRINKING | 3.67 | 1 |
| LACK OF MEDICAL INSURANCE | 3.66 | 2 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICINE | 3.62 | 3 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.57 | 4 |
| DOMESTIC VIOLENCE | 3.47 | 5 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.46 | 6 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.44 | 7 |
| POVERTY | 3.41 | 8 |
| CRIME | 3.34 | 9 |
| DRUG ABUSE | 3.33 | 10 |
| HEALTHCARE FOR ELDERLY PERSONS | 3.31 | 11 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.24 | 12 |
| MENTAL ILLNESS | 3.24 | 13 |
| LACK OF JOBS | 3.22 | 14 |
| OVERCROWDED CLASSROOMS | 3.18 | 15 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.17 | 16 |
| POOR HOUSING CONDITIONS | 3.15 | 17 |
| HIV/AIDS | 3.07 | 18 |
| TEENAGE PREGNANCY | 3.04 | 19 |
| UNEMPLOYMENT | 2.98 | 20 |
| OVERCROWDED HOUSING | 2.98 | 21 |
| DISCRIMINATION BASED ONE RACE | 2.92 | 22 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.92 | 23 |
| ILLITERACY | 2.87 | 24 |
| DAYCARE FOR CHILDREN | 2.86 | 25 |
| GANGS | 2.78 | 26 |

Assessment Mean Ranks by Location

| | | |
|---|------|----|
| DAYCARE FOR ADULTS | 2.77 | 27 |
| WATER OR AIR POLLUTION | 2.71 | 28 |
| UNSAFE SCHOOL ENVIRONMENT | 2.67 | 29 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.55 | 30 |
| DISCRIMINATION BASED ON SEX | 2.51 | 31 |
| LACK OF CULTURAL ARTS EDUCATION | 2.46 | 32 |
| NOISE OR OTHER POLLUTION | 2.45 | 33 |
| LACK OF PROPER UTILITIES | 2.20 | 34 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 2.13 | 35 |
| LACK OF CULTURAL ACTIVITIES | 2.13 | 36 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.12 | 37 |
| LACK OF PUBLIC MEETING SPACE | 2.00 | 38 |
| QUALITY OF COMMUNITY DISASTER SERVICES | 1.80 | 39 |

Service Provider Survey Mean Rank by Location

Pender

| <u>Need</u> | <u>Mean</u> | <u>Rank</u> |
|---|-------------|-------------|
| LACK OF AFFORDABLE PRESCRIPTION MEDICINE | 3.57 | 1 |
| HEALTHCARE FOR ELDERLY PERSONS | 3.50 | 2 |
| SHORTAGE OF RECREATIONAL FACILITIES | 3.50 | 3 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.50 | 4 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 3.50 | 5 |
| LACK OF MEDICAL INSURANCE | 3.29 | 6 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.29 | 7 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 3.29 | 8 |
| UNDERAGE DRINKING | 3.25 | 9 |
| LACK OF CULTURAL ACTIVITIES | 3.25 | 10 |
| POVERTY | 3.22 | 11 |
| LACK OF JOBS | 3.22 | 12 |
| ILLITERACY | 3.13 | 13 |

Assessment Mean Ranks by Location

| | | |
|--|------|----|
| LACK OF CULTURAL ARTS EDUCATION | 3.13 | 14 |
| LACK OF PUBLIC MEETING SPACE | 3.11 | 15 |
| DRUG ABUSE | 3.00 | 16 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.00 | 17 |
| POOR HOUSING CONDITIONS | 3.00 | 18 |
| TEENAGE PREGNANCY | 3.00 | 19 |
| DAYCARE FOR ADULTS | 3.00 | 20 |
| DOMESTIC VIOLENCE | 3.00 | 21 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 3.00 | 22 |
| UNEMPLOYMENT | 2.89 | 23 |
| DAYCARE FOR CHILDREN | 2.88 | 24 |
| OVERCROWDED CLASSROOMS | 2.71 | 25 |
| MENTAL ILLNESS | 2.67 | 26 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 2.63 | 27 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 2.63 | 28 |
| CRIME | 2.56 | 29 |
| LACK OF PROPER UTILITIES | 2.50 | 30 |
| OVERCROWDED HOUSING | 2.33 | 31 |
| QUALITY OF COMMUNITY DISASTER SERVICES | 2.17 | 32 |
| DISCRIMINATION BASED ON SEX | 2.14 | 33 |
| HIV/AIDS | 2.00 | 34 |
| GANGS | 2.00 | 35 |
| DISCRIMINATION BASED ONE RACE | 1.86 | 36 |
| UNSAFE SCHOOL ENVIRONMENT | 1.71 | 37 |
| WATER OR AIR POLLUTION | 1.71 | 38 |
| NOISE OR OTHER POLLUTION | 1.43 | 39 |

Assessment Mean Ranks by Location

Client Survey Mean Rank by Location

Regional

Regional Client Survey Mean Ranks

| Need | Mean | Ranks |
|---|------|-------|
| LACK OF MEDICAL INSURANCE | 3.47 | 1 |
| DRUG ABUSE | 3.45 | 2 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICINES | 3.33 | 3 |
| UNDERAGE DRINKING | 3.30 | 4 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.29 | 5 |
| TEENAGE PREGNANCY | 3.27 | 6 |
| DOMESTIC VIOLENCE | 3.23 | 7 |
| HEALTHCARE FOR ELDERLY PERSONS | 3.22 | 8 |
| CRIME | 3.19 | 9 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.17 | 10 |
| LACK OF JOBS | 3.14 | 11 |
| POVERTY | 3.13 | 12 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.12 | 13 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.12 | 14 |
| HIV/AIDS | 3.06 | 15 |
| UNEMPLOYMENT | 3.05 | 16 |
| POOR HOUSING CONDITIONS | 3.05 | 17 |
| INADEQUATE PUBLIC TRANSPORTATION | 2.98 | 18 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.97 | 19 |
| ILLITERACY | 2.93 | 20 |
| OVERCROWDED HOUSING | 2.90 | 21 |
| DISCRIMINATION BASED ONE RACE | 2.82 | 22 |
| OVERCROWDED CLASSROOMS | 2.82 | 23 |
| MENTAL ILLNESS | 2.79 | 24 |
| GANGS | 2.69 | 25 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.67 | 26 |
| DAYCARE FOR ADULTS | 2.63 | 27 |
| LACK OF CULTURAL ARTS EDUCATION | 2.63 | 28 |
| LACK OF CULTURAL ACTIVITIES | 2.63 | 29 |
| DISCRIMINATION BASED ON SEX | 2.59 | 30 |
| DAYCARE FOR CHILDREN | 2.58 | 31 |
| WATER OR AIR POLLUTION | 2.57 | 32 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 2.53 | 33 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.49 | 34 |
| UNSAFE SCHOOL ENVIRONMENT | 2.47 | 35 |
| LACK OF PROPER UTILITIES | 2.42 | 36 |
| LACK OF PUBLIC MEETING SPACE | 2.31 | 37 |

Assessment Mean Ranks by Location

| | | |
|------------------------------|------|----|
| QUALITY OF DISASTER SERVICES | 2.28 | 38 |
| NOISE OR OTHER POLLUTION | 2.28 | 39 |

Client Survey Mean Rank by Location

Brunswick

Brunswick County Client Survey Ranking

| Need | Mean | Rank |
|--|------|------|
| DRUG ABUSE | 3.50 | 1 |
| LACK OF MEDICAL INSURANCE | 3.38 | 2 |
| UNDERAGE DRINKING | 3.30 | 3 |
| TEENAGE PREGNANCY | 3.28 | 4 |
| DOMESTIC VIOLENCE | 3.25 | 5 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.19 | 6 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICINES | 3.16 | 7 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.15 | 8 |
| HEALTHCARE FOR ELDERLY PERSONS | 3.12 | 9 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.10 | 10 |
| CRIME | 3.10 | 11 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.07 | 12 |
| POVERTY | 3.01 | 13 |
| SHORTAGE OF AFFORDABLE HOUSING | 2.99 | 14 |
| LACK OF JOBS | 2.97 | 15 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.93 | 16 |
| UNEMPLOYMENT | 2.92 | 17 |
| POOR HOUSING CONDITIONS | 2.91 | 18 |
| ILLITERACY | 2.77 | 19 |
| HIV/AIDS | 2.77 | 20 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.77 | 21 |
| LACK OF CULTURAL ACTIVITIES | 2.72 | 22 |
| DISCRIMINATION BASED ONE RACE | 2.70 | 23 |
| OVERCROWDED HOUSING | 2.69 | 24 |
| MENTAL ILLNESS | 2.64 | 25 |
| LACK OF CULTURAL ARTS EDUCATION | 2.64 | 26 |
| DAYCARE FOR ADULTS | 2.60 | 27 |
| OVERCROWDED CLASSROOMS | 2.59 | 28 |
| DAYCARE FOR CHILDREN | 2.52 | 29 |
| WATER OR AIR POLLUTION | 2.49 | 30 |
| GANGS | 2.45 | 31 |
| DISCRIMINATION BASED ON SEX | 2.41 | 32 |
| LACK OF PUBLIC MEETING SPACE | 2.40 | 33 |
| UNSAFE SCHOOL ENVIRONMENT | 2.39 | 34 |

Assessment Mean Ranks by Location

| | | |
|---|------|----|
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.36 | 35 |
| LACK OF PROPER UTILITIES | 2.33 | 36 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 2.28 | 37 |
| NOISE OR OTHER POLLUTION | 2.16 | 38 |
| QUALITY OF DISASTER SERVICES | 2.13 | 39 |

Client Survey Mean Rank by Location

New Hanover

New Hanover County Client Survey Ranking

| | Mean | Rank |
|--|------|------|
| Need | | |
| LACK OF MEDICAL INSURANCE | 3.50 | 1 |
| DRUG ABUSE | 3.42 | 2 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICINES | 3.38 | 3 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.37 | 4 |
| CRIME | 3.32 | 5 |
| UNDERAGE DRINKING | 3.30 | 6 |
| HEALTHCARE FOR ELDERLY PERSONS | 3.22 | 7 |
| DOMESTIC VIOLENCE | 3.18 | 8 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.18 | 9 |
| HIV/AIDS | 3.17 | 10 |
| TEENAGE PREGNANCY | 3.15 | 11 |
| LACK OF JOBS | 3.14 | 12 |
| POVERTY | 3.12 | 13 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.09 | 14 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.08 | 15 |
| UNEMPLOYMENT | 3.03 | 16 |
| POOR HOUSING CONDITIONS | 3.00 | 17 |
| ILLITERACY | 2.92 | 18 |
| OVERCROWDED CLASSROOMS | 2.91 | 19 |
| MENTAL ILLNESS | 2.91 | 20 |
| OVERCROWDED HOUSING | 2.91 | 21 |
| DISCRIMINATION BASED ONE RACE | 2.82 | 22 |
| GANGS | 2.81 | 23 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.81 | 24 |
| WATER OR AIR POLLUTION | 2.72 | 25 |
| INADEQUATE PUBLIC TRANSPORTATION | 2.65 | 26 |
| DISCRIMINATION BASED ON SEX | 2.64 | 27 |
| UNSAFE SCHOOL ENVIRONMENT | 2.61 | 28 |
| LACK OF CULTURAL ARTS EDUCATION | 2.56 | 29 |
| DAYCARE FOR CHILDREN | 2.52 | 30 |
| DAYCARE FOR ADULTS | 2.49 | 31 |
| NOISE OR OTHER POLLUTION | 2.41 | 32 |

Assessment Mean Ranks by Location

| | | |
|---|------|----|
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.40 | 33 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 2.39 | 34 |
| LACK OF CULTURAL ACTIVITIES | 2.38 | 35 |
| LACK OF PROPER UTILITIES | 2.35 | 36 |
| SHORTAGE OF RECREATIONAL FACILITIES | 2.34 | 37 |
| QUALITY OF DISASTER SERVICES | 2.23 | 38 |
| LACK OF PUBLIC MEETING SPACE | 2.04 | 39 |

Client Survey Mean Rank by Location

Pender

Pender County Client Survey Ranking

| Need | Mean | Rank |
|---|------|------|
| LACK OF MEDICAL INSURANCE | 3.56 | 1 |
| LACK OF AFFORDABLE PRESCRIPTION MEDICINES | 3.48 | 2 |
| LACK OF AFFORDABLE MEDICAL CARE | 3.41 | 3 |
| DRUG ABUSE | 3.39 | 4 |
| HEALTHCARE FOR ELDERLY PERSONS | 3.38 | 5 |
| LACK OF JOBS | 3.36 | 6 |
| SHORTAGE OF AFFORDABLE HOUSING | 3.35 | 7 |
| TEENAGE PREGNANCY | 3.35 | 8 |
| INADEQUATE PUBLIC TRANSPORTATION | 3.35 | 9 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 3.29 | 10 |
| POVERTY | 3.28 | 11 |
| UNDERAGE DRINKING | 3.26 | 12 |
| POOR HOUSING CONDITIONS | 3.24 | 13 |
| DOMESTIC VIOLENCE | 3.23 | 14 |
| UNEMPLOYMENT | 3.22 | 15 |
| FAMILY VIOLENCE, ABUSE OF CHILDREN OR ADULTS | 3.18 | 16 |
| ILLITERACY | 3.12 | 17 |
| SHORTAGE OF RECREATIONAL FACILITIES | 3.10 | 18 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 3.10 | 19 |
| HIV/AIDS | 3.08 | 20 |
| CRIME | 3.05 | 21 |
| OVERCROWDED HOUSING | 3.05 | 22 |
| ENOUGH DOCTORS/MEDICAL STAFF IN THE COMMUNITY | 2.95 | 23 |
| OVERCROWDED CLASSROOMS | 2.92 | 24 |
| LACK OF CULTURAL ACTIVITIES | 2.89 | 25 |
| DISCRIMINATION BASED ONE RACE | 2.85 | 26 |
| DAYCARE FOR ADULTS | 2.84 | 27 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 2.84 | 28 |
| DAYCARE FOR CHILDREN | 2.77 | 29 |

Assessment Mean Ranks by Location

| | | |
|---------------------------------|------|----|
| MENTAL ILLNESS | 2.74 | 30 |
| LACK OF CULTURAL ARTS EDUCATION | 2.73 | 31 |
| GANGS | 2.70 | 32 |
| DISCRIMINATION BASED ON SEX | 2.69 | 33 |
| LACK OF PROPER UTILITIES | 2.56 | 34 |
| LACK OF PUBLIC MEETING SPACE | 2.54 | 35 |
| QUALITY OF DISASTER SERVICES | 2.49 | 36 |
| WATER OR AIR POLLUTION | 2.39 | 37 |
| UNSAFE SCHOOL ENVIRONMENT | 2.31 | 38 |
| NOISE OR OTHER POLLUTION | 2.17 | 39 |

Phone Survey Rankings

Regional

| | Mean | Rank |
|---|------|------|
| COST OF HEALTHCARE TREATMENTS | 3.36 | 1 |
| AFFORDABILITY OF MEDICAL INSURANCE | 3.34 | 2 |
| AFFORDABILITY OF PRESCRIPTION MEDICATIONS | 3.29 | 3 |
| LACK OF MEDICAL INSURANCE | 3.23 | 4 |
| PEOPLE WHO DRIVE DRUNK | 3.14 | 5 |
| TEACHERS NOT DISCIPLINING STUDENTS | 3.03 | 6 |
| DOMESTIC VIOLENCE | 3.02 | 7 |
| TOO MANY STUDENTS IN EACH CLASS | 3.02 | 8 |
| UNDERAGE DRINKING | 3.01 | 9 |
| CHILDREN PHYSICAL ACTIVITY | 3.00 | 10 |
| LACK OF PUBLIC TRANSPORTATION OPTIONS | 2.96 | 11 |
| INADEQUATE PUBLIC TRANSPORTATION TO THE BEACH | 2.95 | 12 |
| SMOKING RELATED ILLNESSES | 2.93 | 13 |
| UNDERAGE SMOKING | 2.90 | 14 |
| SUBSTANCE ABUSE MINORS | 2.90 | 15 |
| NOT ENOUGH BUS ROUTES TO GET YOU TO VARIOUS LOCATIONS | 2.86 | 16 |
| TEENAGE PREGNANCY | 2.84 | 17 |
| NOT ENOUGH PHYSICAL ACTIVITIES DURING SCHOOL | 2.84 | 18 |
| FINDING IT DIFFICULT TO BUDGET | 2.82 | 19 |
| LITTERING | 2.81 | 20 |
| SUBSTANCE ABUSE ADULT | 2.80 | 21 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 2.80 | 22 |
| LACK OF BIKE PATHS | 2.79 | 23 |
| CHILD ABUSE | 2.79 | 24 |
| CHILDREN FEELING THREATENED AT SCHOOL | 2.74 | 25 |
| PHYSICAL VERBAL ABUSE | 2.74 | 26 |
| NOT ENOUGH BUSES FOR DAILY TRAVEL | 2.73 | 27 |

Assessment Mean Ranks by Location

| | | |
|--|------|----|
| NUMBER OF HIV AIDS TREATMENT CENTERS | 2.72 | 28 |
| ABSTINENCE EDUCATION | 2.70 | 29 |
| HEALTHCARE FOR ELDERLY PERSONS | 2.69 | 30 |
| SHORTAGE OF PUBLIC SWIMMING POOLS | 2.67 | 31 |
| COST OF RENT OR MORTGAGE PAYMENT | 2.67 | 32 |
| VANDALISM | 2.65 | 33 |
| PUBLIC TRANSPORTATION | 2.63 | 34 |
| DEPRESSION | 2.62 | 35 |
| FINDING CARE FOR A PERSON WITH A DISABILITY | 2.61 | 36 |
| UNEMPLOYMENT | 2.60 | 37 |
| FINDING AFFORDABLE LEGAL HELP | 2.60 | 38 |
| ASSAULT | 2.60 | 39 |
| NOT ENOUGH MUSIC CLASSES IN SCHOOL | 2.59 | 40 |
| EDUCATION FOR THE PREVENTION OF DISEASE | 2.58 | 41 |
| NOT ENOUGH ART CLASSES IN SCHOOL | 2.58 | 42 |
| LACK OF HIV AIDS EDUCATION | 2.57 | 43 |
| ROBBERY | 2.57 | 44 |
| ADULT ABUSE | 2.56 | 45 |
| DRUG ENFORCEMENT | 2.56 | 46 |
| TOO FEW YOUTH CULTURAL ACTIVITIES | 2.55 | 47 |
| FINDING CARE FOR A PERSON WITH A SERIOUS ILL | 2.54 | 48 |
| MEDICAL COVERAGE w YOUR INSURANCE PLAN | 2.54 | 49 |
| SEX EDUCATION | 2.52 | 50 |
| JUVENILE DELINQUENCY | 2.52 | 51 |
| LACK OF SERVICES COVERED BY MEDICAID | 2.51 | 52 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.50 | 53 |
| MEDICAID INELIGIBILITY | 2.49 | 54 |
| FACILITIES FOR TEEN PREGNANCY SUPPORT | 2.47 | 55 |
| FINDING CARE FOR AN ELDERLY PERSON | 2.45 | 56 |
| DRUG RELATED ILLNESSES | 2.44 | 57 |
| LACK OF TUTORS IN THE COMMUNITY | 2.43 | 58 |
| DISCRIMINATION BASED ONE RACE | 2.42 | 59 |
| NOT ENOUGH HISTORY MUSEUMS | 2.41 | 60 |
| MORE SECURITY AT SCHOOL | 2.40 | 61 |
| CLASSROOM VIOLENCE | 2.39 | 62 |
| LACK OF AFTER SCHOOL OR SUMMER EDUCATIONAL P | 2.38 | 63 |
| ILLITERACY | 2.37 | 64 |
| AFTER SCHOOL DAYCARE | 2.36 | 65 |
| AVAILABILITY OF DENTAL CARE | 2.35 | 66 |
| CULTURAL DISCRIMINATION | 2.35 | 67 |
| DOMESTIC VIOLENCE SHELTERS | 2.35 | 68 |
| NOT ENOUGH SCIENCE CLASSES IN SCHOOL | 2.33 | 69 |
| NOT HAVING APPROPRIATE SHELTER | 2.33 | 70 |
| FUMES FROM CAR EXHAUST | 2.31 | 71 |
| WATER QUALITY | 2.24 | 72 |
| DISCRIMINATION BASED ON SEX | 2.24 | 73 |
| NOT ENOUGH ENGLISH CLASSES IN SCHOOL | 2.23 | 74 |

Assessment Mean Ranks by Location

| | | |
|--|------|-----|
| PEOPLE DISPOSING OF OIL AND LAWN PRODUCTS UN | 2.22 | 75 |
| AFFORDABILITY OF ENTERTAINMENT ACTIVITIES | 2.22 | 76 |
| HALFWAY HOMES | 2.21 | 77 |
| MENTAL ILLNESS | 2.21 | 78 |
| ACCESS TO PUBLIC HOUSING | 2.20 | 79 |
| DAYCARE FOR CHILDREN | 2.18 | 80 |
| NOT HAVING ENOUGH FOOD | 2.16 | 81 |
| AFFORDABILITY OF RECREATIONAL ACTIVITIES | 2.15 | 82 |
| LACK OF ART MUSEUMS | 2.14 | 83 |
| TOO FEW ALCOHOL-FREE FESTIVALS | 2.14 | 84 |
| ORGANIZED SPORTS FOR KIDS | 2.13 | 85 |
| NOT ENOUGH DAYTIME COMMUNITY EVENTS | 2.11 | 86 |
| LACK OF NIGHT TIME COMMUNITY EVENTS | 2.11 | 87 |
| LACK OF EFFECTIVE TRANSITIONAL HOUSING FOR E | 2.09 | 88 |
| SHORTAGE OF PUBLIC PARKS | 2.08 | 89 |
| LACK OF PUBLIC MEETING SPACE | 2.02 | 90 |
| LACK OF FAMILY FRIENDLY COMMUNITY ACTIVITIES | 2.02 | 91 |
| STAFF AVAILABILITY AT HEALTHCARE CENTERS | 2.00 | 92 |
| INFANT MORTALITY | 2.00 | 93 |
| NOISE FROM TRAFFIC | 1.96 | 94 |
| GANGS | 1.96 | 95 |
| AIR QUALITY | 1.96 | 96 |
| YOUTH TEEN SUICIDE | 1.94 | 97 |
| NOT HAVING ENOUGH CLOTHING | 1.94 | 98 |
| TOO MUCH UNNATURAL LIGHT AT NIGHT | 1.90 | 99 |
| FINDING A WAY TO GET TO WORK | 1.87 | 100 |
| PROSTITUTION | 1.86 | 101 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 1.85 | 102 |
| SHORTAGE OF COMMUNITY REC. LEAGUES | 1.84 | 103 |
| NUMBER OF PEOPLE LIVING UNDER ONE ROOF | 1.82 | 104 |
| OVERCROWDED LIVING SPACE | 1.82 | 105 |
| NUMBER OF HEALTHCARE CENTERS | 1.77 | 106 |
| COMMUNITY DISASTER SERVICES | 1.77 | 107 |
| LOCATION OF HEALTHCARE CENTERS | 1.76 | 108 |
| NOT ENOUGH PLACES TO LIVE | 1.74 | 109 |
| LACK OF PROPER HEATING | 1.71 | 110 |
| POOR AIR CONDITIONING UNITS | 1.67 | 111 |
| LACK OF INDOOR PLUMBING | 1.34 | 112 |
| LACK OF ELECTRICITY | 1.30 | 113 |

Assessment Mean Ranks by Location

Phone Survey Rankings

Brunswick

| Descriptive Statistics | Mean | Rank |
|---|------|------|
| AFFORDABILITY OF MEDICAL INSURANCE | 3.44 | 1 |
| LACK OF PUBLIC TRANSPORTATION OPTIONS | 3.39 | 2 |
| AFFORDABILITY OF PRESCRIPTION MEDICATIONS | 3.38 | 3 |
| COST OF HEALTHCARE TREATMENTS | 3.34 | 4 |
| NOT ENOUGH BUS ROUTES TO GET YOU TO VARIOUS LOCATIONS | 3.26 | 5 |
| NOT ENOUGH BUSES FOR DAILY TRAVEL | 3.24 | 6 |
| INADEQUATE PUBLIC TRANSPORTATION TO THE BEAC | 3.20 | 7 |
| LACK OF MEDICAL INSURANCE | 3.16 | 8 |
| SHORTAGE OF PUBLIC SWIMMING POOLS | 3.10 | 9 |
| UNDERAGE DRINKING | 3.02 | 10 |
| PEOPLE WHO DRIVE DRUNK | 3.00 | 11 |
| INADEQUATE PUBLIC TRANSPORTATION TO THE BEACH | 2.98 | 12 |
| PUBLIC TRANSPORTATION | 2.97 | 13 |
| SUBSTANCE ABUSE MINORS | 2.96 | 14 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 2.96 | 15 |
| TEACHERS NOT DISCIPLINING STUDENTS | 2.91 | 16 |
| DOMESTIC VIOLENCE | 2.89 | 17 |
| NUMBER OF HIV AIDS TREATMENT CENTERS | 2.88 | 18 |
| TOO MANY STUDENTS IN EACH CLASS | 2.88 | 19 |
| SMOKING RELATED ILLNESSES | 2.86 | 20 |
| CHILDREN PHYSICAL ACTIVITY | 2.85 | 21 |
| LACK OF BIKE PATHS | 2.83 | 22 |
| FINDING IT DIFFICULT TO BUDGET | 2.83 | 23 |
| CHILDREN FEELING THREATENED AT SCHOOL | 2.82 | 24 |
| SUBSTANCE ABUSE ADULT | 2.81 | 25 |
| COST OF RENT OR MORTGAGE PAYMENT | 2.80 | 26 |
| FACILITIES FOR TEEN PREGNANCY SUPPORT | 2.77 | 27 |
| EDUCATION FOR THE PREVENTION OF DISEASE | 2.75 | 28 |
| TEENAGE PREGNANCY | 2.71 | 29 |
| LITTERING | 2.71 | 30 |
| LACK OF HIV AIDS EDUCATION | 2.69 | 31 |
| ABSTINENCE EDUCATION | 2.66 | 32 |
| TOO FEW YOUTH CULTURAL ACTIVITIES | 2.66 | 33 |
| NOT ENOUGH HISTORY MUSEUMS | 2.66 | 34 |
| NOT ENOUGH PHYSICAL ACTIVITIES DURING SCHOOL | 2.66 | 35 |
| NOT ENOUGH MUSIC CLASSES IN SCHOOL | 2.65 | 36 |
| PHYSICAL VERBAL ABUSE | 2.65 | 37 |

Assessment Mean Ranks by Location

| | | |
|--|------|----|
| SEX EDUCATION | 2.64 | 38 |
| FINDING CARE FOR A PERSON WITH A DISABILITY | 2.64 | 39 |
| HEALTHCARE FOR ELDERLY PERSONS | 2.63 | 40 |
| VANDALISM | 2.63 | 41 |
| NOT ENOUGH ART CLASSES IN SCHOOL | 2.61 | 42 |
| CHILD ABUSE | 2.61 | 43 |
| FINDING AFFORDABLE LEGAL HELP | 2.57 | 44 |
| DEPRESSION | 2.57 | 45 |
| MEDICAID INELIGIBILITY | 2.57 | 46 |
| LACK OF ART MUSEUMS | 2.51 | 47 |
| MEDICAL COVERAGE w YOUR INSURANCE PLAN | 2.51 | 48 |
| LACK OF SERVICES COVERED BY MEDICAID | 2.50 | 49 |
| DRUG ENFORCEMENT | 2.49 | 50 |
| ADULT ABUSE | 2.48 | 51 |
| MORE SECURITY AT SCHOOL | 2.48 | 52 |
| ACCESS TO PUBLIC HOUSING | 2.48 | 53 |
| FINDING CARE FOR A PERSON WITH A SERIOUS ILL | 2.46 | 54 |
| HALFWAY HOMES | 2.44 | 55 |
| DOMESTIC VIOLENCE SHELTERS | 2.43 | 56 |
| JUVENILE DELINQUENCY | 2.43 | 57 |
| DRUG RELATED ILLNESSES | 2.42 | 58 |
| ASSAULT | 2.38 | 59 |
| AFTER SCHOOL DAYCARE | 2.36 | 60 |
| ROBBERY | 2.36 | 61 |
| FINDING CARE FOR AN ELDERLY PERSON | 2.36 | 62 |
| NOT ENOUGH SCIENCE CLASSES IN SCHOOL | 2.35 | 63 |
| UNEMPLOYMENT | 2.34 | 64 |
| LACK OF TUTORS IN THE COMMUNITY | 2.33 | 65 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.31 | 66 |
| AVAILABILITY OF DENTAL CARE | 2.30 | 67 |
| ILLITERACY | 2.30 | 68 |
| LACK OF NIGHT TIME COMMUNITY EVENTS | 2.27 | 69 |
| LACK OF AFTER SCHOOL OR SUMMER EDUCATIONAL P | 2.27 | 70 |
| CLASSROOM VIOLENCE | 2.25 | 71 |
| NOT ENOUGH ENGLISH CLASSES IN SCHOOL | 2.24 | 72 |
| LACK OF EFFECTIVE TRANSITIONAL HOUSING FOR E | 2.23 | 73 |
| DISCRIMINATION BASED ONE RACE | 2.23 | 74 |
| TOO FEW ALCOHOL-FREE FESTIVALS | 2.21 | 75 |
| DAYCARE FOR CHILDREN | 2.21 | 76 |
| CULTURAL DISCRIMINATION | 2.18 | 77 |
| MENTAL ILLNESS | 2.15 | 78 |
| DISCRIMINATION BASED ON SEX | 2.15 | 79 |
| SHORTAGE OF PUBLIC PARKS | 2.14 | 80 |
| NOT HAVING APPROPRIATE SHELTER | 2.13 | 81 |
| STAFF AVAILABILITY AT HEALTHCARE CENTERS | 2.10 | 82 |
| NOT ENOUGH DAYTIME COMMUNITY EVENTS | 2.09 | 83 |
| ORGANIZED SPORTS FOR KIDS | 2.09 | 84 |

Assessment Mean Ranks by Location

| | | |
|--|------|-----|
| NOT HAVING ENOUGH FOOD | 2.06 | 85 |
| AFFORDABILITY OF ENTERTAINMENT ACTIVITIES | 2.04 | 86 |
| PEOPLE DISPOSING OF OIL AND LAWN PRODUCTS UN | 2.04 | 87 |
| LACK OF PUBLIC MEETING SPACE | 2.03 | 88 |
| LACK OF FAMILY FRIENDLY COMMUNITY ACTIVITIES | 2.02 | 89 |
| NUMBER OF HEALTHCARE CENTERS | 2.02 | 90 |
| AFFORDABILITY OF RECREATIONAL ACTIVITIES | 1.99 | 91 |
| LOCATION OF HEALTHCARE CENTERS | 1.97 | 92 |
| SHORTAGE OF COMMUNITY REC. LEAGUES | 1.95 | 93 |
| FUMES FROM CAR EXHAUST | 1.92 | 94 |
| WATER QUALITY | 1.90 | 95 |
| NOT HAVING ENOUGH CLOTHING | 1.86 | 96 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 1.84 | 97 |
| INFANT MORTALITY | 1.82 | 98 |
| TOO MUCH UNNATURAL LIGHT AT NIGHT | 1.75 | 99 |
| FINDING A WAY TO GET TO WORK | 1.75 | 100 |
| YOUTH TEEN SUICIDE | 1.75 | 101 |
| NOT ENOUGH PLACES TO LIVE | 1.72 | 102 |
| NOISE FROM TRAFFIC | 1.70 | 103 |
| NUMBER OF PEOPLE LIVING UNDER ONE ROOF | 1.68 | 104 |
| OVERCROWDED LIVING SPACE | 1.67 | 105 |
| PROSTITUTION | 1.60 | 106 |
| COMMUNITY DISASTER SERVICES | 1.58 | 107 |
| POOR AIR CONDITIONING UNITS | 1.56 | 108 |
| AIR QUALITY | 1.55 | 109 |
| LACK OF PROPER HEATING | 1.55 | 110 |
| GANGS | 1.54 | 111 |
| LACK OF INDOOR PLUMBING | 1.28 | 112 |
| LACK OF ELECTRICITY | 1.24 | 113 |

Phone Survey Rankings

New Hanover

| Descriptive Statistics | Mean | Rank |
|---|------|------|
| COST OF HEALTHCARE TREATMENTS | 3.36 | 1 |
| PEOPLE WHO DRIVE DRUNK | 3.28 | 2 |
| AFFORDABILITY OF PRESCRIPTION MEDICATIONS | 3.28 | 3 |
| AFFORDABILITY OF MEDICAL INSURANCE | 3.26 | 4 |
| LACK OF MEDICAL INSURANCE | 3.25 | 5 |
| TEACHERS NOT DISCIPLINING STUDENTS | 3.17 | 6 |

Assessment Mean Ranks by Location

| | | |
|--|------|----|
| DOMESTIC VIOLENCE | 3.14 | 7 |
| TOO MANY STUDENTS IN EACH CLASS | 3.13 | 8 |
| CHILDREN PHYSICAL ACTIVITY | 3.12 | 9 |
| UNDERAGE DRINKING | 3.03 | 10 |
| INADEQUATE PUBLIC TRANSPORTATION TO THE BEACH | 2.97 | 11 |
| CHILD ABUSE | 2.96 | 12 |
| NOT ENOUGH PHYSICAL ACTIVITIES DURING SCHOOL | 2.91 | 13 |
| PHYSICAL VERBAL ABUSE | 2.90 | 14 |
| SUBSTANCE ABUSE MINORS | 2.88 | 15 |
| TEENAGE PREGNANCY | 2.86 | 16 |
| INADEQUATE PUBLIC TRANSPORTATION TO THE BEAC | 2.86 | 17 |
| UNDERAGE SMOKING | 2.85 | 18 |
| LITTERING | 2.85 | 19 |
| FINDING IT DIFFICULT TO BUDGET | 2.83 | 20 |
| LACK OF BIKE PATHS | 2.81 | 21 |
| SUBSTANCE ABUSE ADULT | 2.81 | 22 |
| CHILDREN FEELING THREATENED AT SCHOOL | 2.79 | 23 |
| ASSAULT | 2.77 | 24 |
| ROBBERY | 2.74 | 25 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 2.73 | 26 |
| VANDALISM | 2.73 | 27 |
| COST OF RENT OR MORTGAGE PAYMENT | 2.71 | 28 |
| HEALTHCARE FOR ELDERLY PERSONS | 2.70 | 29 |
| LACK OF PUBLIC TRANSPORTATION OPTIONS | 2.70 | 30 |
| DEPRESSION | 2.67 | 31 |
| UNEMPLOYMENT | 2.67 | 32 |
| ADULT ABUSE | 2.67 | 33 |
| ABSTINENCE EDUCATION | 2.66 | 34 |
| NOT ENOUGH ART CLASSES IN SCHOOL | 2.62 | 35 |
| FINDING AFFORDABLE LEGAL HELP | 2.62 | 36 |
| FINDING CARE FOR A PERSON WITH A DISABILITY | 2.62 | 37 |
| DRUG ENFORCEMENT | 2.62 | 38 |
| NOT ENOUGH MUSIC CLASSES IN SCHOOL | 2.61 | 39 |
| NOT ENOUGH BUS ROUTES TO GET YOU TO VARIOUS LOCATIONS | 2.59 | 40 |
| FUMES FROM CAR EXHAUST | 2.58 | 41 |
| JUVENILE DELINQUENCY | 2.57 | 42 |
| NUMBER OF HIV AIDS TREATMENT CENTERS | 2.56 | 43 |
| FINDING CARE FOR A PERSON WITH A SERIOUS ILL | 2.55 | 44 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.54 | 45 |
| DISCRIMINATION BASED ONE RACE | 2.54 | 46 |
| MEDICAL COVERAGE w YOUR INSURANCE PLAN | 2.52 | 47 |
| CLASSROOM VIOLENCE | 2.51 | 48 |
| LACK OF SERVICES COVERED BY MEDICAID | 2.50 | 49 |
| CULTURAL DISCRIMINATION | 2.49 | 50 |
| DRUG RELATED ILLNESSES | 2.47 | 51 |
| LACK OF HIV AIDS EDUCATION | 2.46 | 52 |

Assessment Mean Ranks by Location

| | | |
|--|------|----|
| EDUCATION FOR THE PREVENTION OF DISEASE | 2.45 | 53 |
| FINDING CARE FOR AN ELDERLY PERSON | 2.45 | 54 |
| WATER QUALITY | 2.44 | 55 |
| NOT HAVING APPROPRIATE SHELTER | 2.43 | 56 |
| LACK OF AFTER SCHOOL OR SUMMER EDUCATIONAL P | 2.43 | 57 |
| LACK OF TUTORS IN THE COMMUNITY | 2.43 | 58 |
| MORE SECURITY AT SCHOOL | 2.43 | 59 |
| MEDICAID INELIGIBILITY | 2.42 | 60 |
| TOO FEW YOUTH CULTURAL ACTIVITIES | 2.42 | 61 |
| PUBLIC TRANSPORTATION | 2.40 | 62 |
| NOT ENOUGH BUSES FOR DAILY TRAVEL | 2.40 | 63 |
| PEOPLE DISPOSING OF OIL AND LAWN PRODUCTS UN | 2.39 | 64 |
| SEX EDUCATION | 2.39 | 65 |
| ILLITERACY | 2.38 | 66 |
| DISCRIMINATION BASED ON SEX | 2.35 | 67 |
| AFTER SCHOOL DAYCARE | 2.34 | 68 |
| SHORTAGE OF PUBLIC SWIMMING POOLS | 2.34 | 69 |
| DOMESTIC VIOLENCE SHELTERS | 2.33 | 70 |
| NOT ENOUGH SCIENCE CLASSES IN SCHOOL | 2.33 | 71 |
| AVAILABILITY OF DENTAL CARE | 2.32 | 72 |
| NOT HAVING ENOUGH FOOD | 2.29 | 73 |
| MENTAL ILLNESS | 2.28 | 74 |
| FACILITIES FOR TEEN PREGNANCY SUPPORT | 2.27 | 75 |
| GANGS | 2.24 | 76 |
| NOT ENOUGH ENGLISH CLASSES IN SCHOOL | 2.23 | 77 |
| AIR QUALITY | 2.21 | 78 |
| AFFORDABILITY OF ENTERTAINMENT ACTIVITIES | 2.18 | 79 |
| NOT ENOUGH HISTORY MUSEUMS | 2.17 | 80 |
| NOISE FROM TRAFFIC | 2.16 | 81 |
| AFFORDABILITY OF RECREATIONAL ACTIVITIES | 2.15 | 82 |
| YOUTH TEEN SUICIDE | 2.13 | 83 |
| DAYCARE FOR CHILDREN | 2.13 | 84 |
| TOO FEW ALCOHOL-FREE FESTIVALS | 2.10 | 85 |
| INFANT MORTALITY | 2.10 | 86 |
| PROSTITUTION | 2.09 | 87 |
| HALFWAY HOMES | 2.07 | 88 |
| ACCESS TO PUBLIC HOUSING | 2.06 | 89 |
| ORGANIZED SPORTS FOR KIDS | 2.05 | 90 |
| TOO MUCH UNNATURAL LIGHT AT NIGHT | 2.03 | 91 |
| NOT ENOUGH DAYTIME COMMUNITY EVENTS | 2.03 | 92 |
| NOT HAVING ENOUGH CLOTHING | 2.02 | 93 |
| LACK OF EFFECTIVE TRANSITIONAL HOUSING FOR E | 2.02 | 94 |
| LACK OF PUBLIC MEETING SPACE | 1.96 | 95 |
| LACK OF FAMILY FRIENDLY COMMUNITY ACTIVITIES | 1.93 | 96 |
| LACK OF NIGHT TIME COMMUNITY EVENTS | 1.92 | 97 |
| SHORTAGE OF PUBLIC PARKS | 1.88 | 98 |
| OVERCROWDED LIVING SPACE | 1.88 | 99 |

Assessment Mean Ranks by Location

| | | |
|--|------|-----|
| STAFF AVAILABILITY AT HEALTHCARE CENTERS | 1.88 | 100 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 1.85 | 101 |
| FINDING A WAY TO GET TO WORK | 1.85 | 102 |
| NUMBER OF PEOPLE LIVING UNDER ONE ROOF | 1.82 | 103 |
| LACK OF ART MUSEUMS | 1.79 | 104 |
| COMMUNITY DISASTER SERVICES | 1.74 | 105 |
| NOT ENOUGH PLACES TO LIVE | 1.72 | 106 |
| LACK OF PROPER HEATING | 1.72 | 107 |
| SHORTAGE OF COMMUNITY REC. LEAGUES | 1.66 | 108 |
| POOR AIR CONDITIONING UNITS | 1.65 | 109 |
| LOCATION OF HEALTHCARE CENTERS | 1.57 | 110 |
| NUMBER OF HEALTHCARE CENTERS | 1.55 | 111 |
| LACK OF INDOOR PLUMBING | 1.33 | 112 |
| LACK OF ELECTRICITY | 1.31 | 113 |

Phone Survey Rankings

Pender

| Descriptive Statistics(a) | Mean | Rank |
|---|------|------|
| AFFORDABILITY OF MEDICAL INSURANCE | 3.44 | 1 |
| COST OF HEALTHCARE TREATMENTS | 3.33 | 2 |
| LACK OF MEDICAL INSURANCE | 3.26 | 3 |
| AFFORDABILITY OF PRESCRIPTION MEDICATIONS | 3.20 | 4 |
| LACK OF PUBLIC TRANSPORTATION OPTIONS | 3.18 | 5 |
| NOT ENOUGH BUS ROUTES TO GET YOU TO VARIOUS LOCATIONS | 3.12 | 6 |
| SHORTAGE OF PUBLIC SWIMMING POOLS | 3.08 | 7 |
| NOT ENOUGH BUSES FOR DAILY TRAVEL | 3.07 | 8 |
| UNDERAGE SMOKING | 3.04 | 9 |
| UNDERAGE DRINKING | 3.02 | 10 |
| NUMBER OF HIV AIDS TREATMENT CENTERS | 2.99 | 11 |
| INADEQUATE PUBLIC TRANSPORTATION TO THE BEACH | 2.97 | 12 |
| ABSTINENCE EDUCATION | 2.93 | 13 |
| PEOPLE WHO DRIVE DRUNK | 2.88 | 14 |
| SUBSTANCE ABUSE MINORS | 2.88 | 15 |
| CHILDREN PHYSICAL ACTIVITY | 2.88 | 16 |
| INADEQUATE PUBLIC TRANSPORTATION TO THE BEAC | 2.87 | 17 |
| PUBLIC TRANSPORTATION | 2.86 | 18 |
| SMOKING RELATED ILLNESSES | 2.85 | 19 |
| LACK OF ART MUSEUMS | 2.85 | 20 |
| NOT ENOUGH HISTORY MUSEUMS | 2.85 | 21 |
| FACILITIES FOR TEEN PREGNANCY SUPPORT | 2.84 | 22 |

Assessment Mean Ranks by Location

| | | |
|--|------|----|
| TOO FEW YOUTH CULTURAL ACTIVITIES | 2.83 | 23 |
| UNEMPLOYMENT | 2.82 | 24 |
| LITTERING | 2.82 | 25 |
| SEX EDUCATION | 2.81 | 26 |
| DOMESTIC VIOLENCE | 2.80 | 27 |
| EDUCATION FOR THE PREVENTION OF DISEASE | 2.79 | 28 |
| NOT ENOUGH PHYSICAL ACTIVITIES DURING SCHOOL | 2.79 | 29 |
| ALCOHOLISM AND ALCOHOL ABUSE BY ADULTS | 2.79 | 30 |
| SUBSTANCE ABUSE ADULT | 2.76 | 31 |
| LACK OF HIV AIDS EDUCATION | 2.76 | 32 |
| FINDING IT DIFFICULT TO BUDGET | 2.75 | 33 |
| TOO MANY STUDENTS IN EACH CLASS | 2.75 | 34 |
| SHORTAGE OF PUBLIC PARKS | 2.74 | 35 |
| HEALTHCARE FOR ELDERLY PERSONS | 2.74 | 36 |
| AFFORDABILITY OF ENTERTAINMENT ACTIVITIES | 2.69 | 37 |
| FINDING CARE FOR A PERSON WITH A SERIOUS ILL | 2.69 | 38 |
| TEACHERS NOT DISCIPLINING STUDENTS | 2.69 | 39 |
| LACK OF TUTORS IN THE COMMUNITY | 2.66 | 40 |
| LACK OF BIKE PATHS | 2.65 | 41 |
| FINDING AFFORDABLE LEGAL HELP | 2.64 | 42 |
| MEDICAL COVERAGE w YOUR INSURANCE PLAN | 2.64 | 43 |
| LANGUAGE BARRIERS WITHIN THE COMMUNITY | 2.63 | 44 |
| FINDING CARE FOR AN ELDERLY PERSON | 2.62 | 45 |
| FINDING CARE FOR A PERSON WITH A DISABILITY | 2.61 | 46 |
| MEDICAID INELIGIBILITY | 2.58 | 47 |
| AVAILABILITY OF DENTAL CARE | 2.57 | 48 |
| LACK OF SERVICES COVERED BY MEDICAID | 2.56 | 49 |
| LACK OF NIGHT TIME COMMUNITY EVENTS | 2.55 | 50 |
| ORGANIZED SPORTS FOR KIDS | 2.51 | 51 |
| ILLITERACY | 2.50 | 52 |
| DEPRESSION | 2.48 | 53 |
| JUVENILE DELINQUENCY | 2.47 | 54 |
| CHILDREN FEELING THREATENED AT SCHOOL | 2.46 | 55 |
| CHILD ABUSE | 2.46 | 56 |
| DRUG ENFORCEMENT | 2.45 | 57 |
| AFFORDABILITY OF RECREATIONAL ACTIVITIES | 2.43 | 58 |
| AFTER SCHOOL DAYCARE | 2.43 | 59 |
| VANDALISM | 2.41 | 60 |
| LACK OF AFTER SCHOOL OR SUMMER EDUCATIONAL P | 2.41 | 61 |
| NOT ENOUGH DAYTIME COMMUNITY EVENTS | 2.41 | 62 |
| DRUG RELATED ILLNESSES | 2.39 | 63 |
| NOT ENOUGH MUSIC CLASSES IN SCHOOL | 2.38 | 64 |
| DISCRIMINATION BASED ONE RACE | 2.36 | 65 |
| DAYCARE FOR CHILDREN | 2.35 | 66 |
| NOT ENOUGH ART CLASSES IN SCHOOL | 2.34 | 67 |
| PHYSICAL VERBAL ABUSE | 2.34 | 68 |
| LACK OF FAMILY FRIENDLY COMMUNITY ACTIVITIES | 2.33 | 69 |

Assessment Mean Ranks by Location

| | | |
|--|------|-----|
| SHORTAGE OF COMMUNITY REC. LEAGUES | 2.32 | 70 |
| STAFF AVAILABILITY AT HEALTHCARE CENTERS | 2.32 | 71 |
| ASSAULT | 2.31 | 72 |
| ROBBERY | 2.29 | 73 |
| ACCESS TO PUBLIC HOUSING | 2.28 | 74 |
| NOT ENOUGH SCIENCE CLASSES IN SCHOOL | 2.28 | 75 |
| COST OF RENT OR MORTGAGE PAYMENT | 2.27 | 76 |
| HALFWAY HOMES | 2.26 | 77 |
| ADULT ABUSE | 2.26 | 78 |
| DOMESTIC VIOLENCE SHELTERS | 2.25 | 79 |
| NOT HAVING APPROPRIATE SHELTER | 2.25 | 80 |
| LACK OF PUBLIC MEETING SPACE | 2.23 | 81 |
| NOT ENOUGH ENGLISH CLASSES IN SCHOOL | 2.23 | 82 |
| COMMUNITY DISASTER SERVICES | 2.20 | 83 |
| MORE SECURITY AT SCHOOL | 2.18 | 84 |
| NUMBER OF HEALTHCARE CENTERS | 2.17 | 85 |
| TOO FEW ALCOHOL-FREE FESTIVALS | 2.17 | 86 |
| CULTURAL DISCRIMINATION | 2.16 | 87 |
| FINDING A WAY TO GET TO WORK | 2.15 | 88 |
| LOCATION OF HEALTHCARE CENTERS | 2.14 | 89 |
| WATER QUALITY | 2.08 | 90 |
| LACK OF EFFECTIVE TRANSITIONAL HOUSING FOR E | 2.08 | 91 |
| CLASSROOM VIOLENCE | 2.07 | 92 |
| NUMBER OF PEOPLE LIVING UNDER ONE ROOF | 2.06 | 93 |
| MENTAL ILLNESS | 2.03 | 94 |
| DISCRIMINATION BASED ON SEX | 2.01 | 95 |
| FUMES FROM CAR EXHAUST | 1.96 | 96 |
| LACK OF PROPER HEATING | 1.96 | 97 |
| POOR AIR CONDITIONING UNITS | 1.93 | 98 |
| PEOPLE DISPOSING OF OIL AND LAWN PRODUCTS UN | 1.92 | 99 |
| NOT HAVING ENOUGH FOOD | 1.88 | 100 |
| NOT ENOUGH PLACES TO LIVE | 1.88 | 101 |
| OVERCROWDED LIVING SPACE | 1.87 | 102 |
| INFANT MORTALITY | 1.86 | 103 |
| TIME IT TAKES TO GET TO A MEDICAL FACILITY | 1.85 | 104 |
| NOT HAVING ENOUGH CLOTHING | 1.74 | 105 |
| AIR QUALITY | 1.69 | 106 |
| TOO MUCH UNNATURAL LIGHT AT NIGHT | 1.65 | 107 |
| NOISE FROM TRAFFIC | 1.64 | 108 |
| GANGS | 1.63 | 109 |
| YOUTH TEEN SUICIDE | 1.55 | 110 |
| LACK OF INDOOR PLUMBING | 1.47 | 111 |
| PROSTITUTION | 1.44 | 112 |
| LACK OF ELECTRICITY | 1.34 | 113 |

Assessment Mean Ranks by Location

FOCUS GROUP RANKINGS

The listings below represent the number of times a need category was listed in the top three needs by a focus group participant. For determining rankings, health and medical were combined in one category.

FOCUS GROUP RANKINGS

| Regional | Frequency |
|--------------------------------|-----------|
| Youth general | 104 |
| Health general | 90 |
| Housing general | 83 |
| Education general | 68 |
| Elderly general | 66 |
| Medical general | 65 |
| Mental health general | 61 |
| Transportation | 46 |
| Employment general | 38 |
| Domestic violence general | 36 |
| Childcare general | 25 |
| Substance abuse general | 21 |
| Homeless general | 17 |
| Hispanic issues/services | 17 |
| Environment general | 16 |
| Crime general | 13 |
| Coordination/ collaboration | 12 |
| Disabled services | 11 |
| Abuse/neglect general | 11 |
| Services general | 11 |
| Prescriptions | 10 |
| In-home care general | 9 |
| Dental | 8 |
| Planning | 7 |
| Bilingual | 7 |
| Communication | 7 |
| School related issues | 6 |
| Fund nonprofits | 5 |
| Location of services | 5 |
| Traffic | 4 |
| Community complacency | 4 |

FOCUS GROUP RANKINGS

| Brunswick | Frequency |
|-----------|-----------|
|-----------|-----------|

Assessment Mean Ranks by Location

| | |
|--------------------------------|----|
| Youth general | 39 |
| Medical general | 30 |
| Education general | 27 |
| Health general | 25 |
| Elderly general | 24 |
| Mental health general | 22 |
| Transportation | 13 |
| Environment general | 12 |
| Housing general | 11 |
| Employment general | 10 |
| Abuse/neglect general | 7 |
| Communication | 7 |
| In-home care general | 6 |
| Homeless general | 5 |
| Substance abuse general | 5 |
| Childcare general | 5 |
| Services general | 5 |
| Hispanic issues/services | 4 |
| Planning | 4 |
| Disabled services | 3 |
| Dental | 3 |
| Fund nonprofits | 3 |
| Domestic violence general | 2 |
| Traffic | 2 |
| Coordination/ collaboration | 2 |
| School related issues | 2 |

FOCUS GROUP RANKINGS

| New Hanover | Frequency |
|---------------------------|-----------|
| Housing general | 66 |
| Health general | 51 |
| Youth general | 40 |
| Education general | 37 |
| Mental health general | 35 |
| Domestic violence general | 34 |
| Transportation | 26 |
| Elderly general | 26 |
| Employment general | 17 |
| Medical general | 16 |
| Substance abuse general | 15 |
| Childcare general | 14 |
| Crime general | 12 |
| Hispanic issues/services | 12 |
| Homeless general | 11 |

Assessment Mean Ranks by Location

| | |
|--------------------------------|----|
| Coordination/ collaboration | 10 |
| Bilingual | 7 |
| Prescriptions | 6 |
| Disabled services | 5 |
| Abuse/neglect general | 4 |
| In-home care general | 3 |
| Services general | 3 |
| Traffic | 2 |
| Fund nonprofits | 2 |
| School related issues | 2 |
| Planning | 1 |
| Environment general | 1 |
| Location of services | 1 |
| Community complacency | 1 |

FOCUS GROUP RANKINGS

| Pender | Frequency |
|--------------------------|-----------|
| Youth general | 25 |
| Medical general | 19 |
| Elderly general | 15 |
| Health general | 13 |
| Employment general | 11 |
| Transportation | 7 |
| Housing general | 6 |
| Childcare general | 6 |
| Dental | 5 |
| Mental health general | 4 |
| Education general | 4 |
| Prescriptions | 4 |
| Location of services | 4 |
| Disabled services | 3 |
| Environment general | 3 |
| Community complacency | 3 |
| Services general | 3 |
| Planning | 2 |
| School related issues | 2 |
| Homeless general | 1 |
| Substance abuse general | 1 |
| Crime general | 1 |
| Hispanic issues/services | 1 |

County Level Survey Results

Brunswick County

The top ten needs identified for Brunswick County sorted by each survey component of our assessment are:

Key Informant Survey

1. Drug abuse among children (17 and younger)
3. Lack of affordable day care for adults
2. Lack of affordable prescription medications
5. Underage drinking
4. Lack of affordable medical care
8. Alcoholism and alcohol abuse by adults (18 and over)
9. Drug abuse among adults (18 and over)
6. Inadequate public transportation
7. Shortage of affordable housing
10. Alcoholism and alcohol abuse by children (17 and younger)

Service Provider Survey

1. Lack of medical insurance
2. Underage drinking
3. Lack of affordable prescription medicine
4. Inadequate public transportation
5. Lack of affordable medical care
6. Family violence, abuse of children or adults
7. Mental Illness
8. Poverty
9. Shortage of affordable housing
10. Drug Abuse

County Level Survey Results

Client Survey

1. Drug Abuse
2. Lack of medical insurance
3. Underage Drinking
4. Teenage Pregnancy
5. Domestic Violence
6. Inadequate Public Transportation
7. Lack of affordable prescription medicine
8. Alcoholism and alcohol abuse by adults
9. Healthcare for elderly persons
10. Lack of affordable medical care

Public Perception Survey

1. Affordability of medical insurance
2. Lack of public transportation options
3. Cost of healthcare treatments
4. Affordability of prescription medications
5. Not enough bus routes to get you to various locations
6. Not enough buses for daily travel
7. Inadequate public transportation to the beach
8. Lack of medical insurance
9. Underage drinking
10. Shortage of public swimming pools

County Level Survey Results

New Hanover County

The top ten needs identified for New Hanover County sorted by each survey component of our assessment are:

Key Informant Survey

1. Lack of affordable prescription medications
2. Drug abuse among adults (18 and over)
3. Lack of affordable medical care
4. Underage drinking
5. Shortage of affordable housing
6. Drug abuse among children (17 and under)
7. Daycare for children
8. Mental Illness and/or emotional issues among adults (18 and over)
9. Alcohol abuse/alcoholism among children (17 and younger)
10. Poverty

Service Provider Survey

1. Underage drinking
2. Lack of medical insurance
3. Lack of affordable prescription medicine
4. Lack of affordable medical care
5. Domestic Violence
6. Shortage of affordable housing
7. Family violence, abuse of children or adults
8. Poverty
9. Crime
10. Drug Abuse

County Level Survey Results

Client Survey

1. Lack of medical insurance
2. Drug abuse
3. Lack of affordable prescription medicine
4. Lack of affordable medical care
5. Crime
6. Underage drinking
7. Healthcare for elderly persons
8. Domestic Violence
9. Alcoholism and alcohol abuse by adults (18 and over)
10. HIV/AIDS

Public Perception Survey

1. Cost of healthcare treatments
2. Affordability of prescription medications
3. Affordability of medical insurance
4. Lack of medical insurance
5. People who drive drunk
6. Lack of discipline in schools
7. Domestic Violence
8. Children not getting enough physical activity
9. Too many students in each class
10. Child abuse

County Level Survey Results

Pender County

The top ten needs identified for Pender County sorted by each survey component of our assessment are:

Key Informant Survey

1. Unemployment or underemployment
2. Lack of adequate transportation
3. Lack of jobs
4. Lack of affordable prescription medications
5. Lack of affordable medical care
6. Shortage of recreational facilities
7. Poverty
8. Overcrowded classrooms
9. Lack of cultural arts education
10. Family violence, abuse of children or adults

Service Provider Survey

1. Lack of affordable prescription medicine
2. Healthcare for elderly persons
3. Shortage of recreational facilities
4. Inadequate public transportation
5. Time it takes to get to a medical facility
6. Lack of medical insurance
7. Lack of affordable medical care
8. Not enough doctors/medical staff in the community
9. Underage drinking

County Level Survey Results

10. Lack of cultural activities

Client Survey

1. Lack of medical insurance
2. Lack of affordable prescription medicine
3. Lack of affordable medical care
4. Drug abuse
5. Healthcare for elderly persons
6. Lack of jobs
7. Shortage of affordable housing
8. Teen pregnancy
9. Inadequate public transportation
10. Language barriers within the community

Public Perception Survey

1. Affordability of medical insurance
2. Cost of healthcare treatments
3. Lack of medical insurance
4. Affordability of prescription medications
5. Lack of public transportation options
6. Not enough bus routes to get you to various locations
7. Shortage of public swimming pools
8. Not enough buses for daily travel
9. Number of HIV treatment centers
10. Underage smoking

References

- COMPASS II: Guide to Community Building.* (2001). United Way of America.
- King, J.A. and Kruger, R.A. (1998). *Involving Community Members in Focus Groups.* Thousand Oaks, California: Sage.
- Kruger, R.A. (1998). *Analyzing and Reporting Focus Group Results.* Thousand Oaks, California: Sage.
- Kruger, R.A. (1998). *Moderating Focus Groups.* Thousand Oaks, California: Sage.
- Kruger, R.A. (1998). *Developing Questions for Focus Groups.* Thousand Oaks, California: Sage.
- Morgan, D.L. (1998). *The Focus Group Guidebook.* Thousand Oaks, California: Sage.
- Morgan, D.L. (1998). *Planning Focus Groups.* Thousand Oaks, California: Sage.
- What Matters; United Way of Central Ohio Community Assessment.* (2004). Columbus, Ohio: Community Research Partners.