

# Ohio County, West Virginia

## Community Needs Assessment Report

*Prepared for:*

Ohio County Community Needs  
Assessment Partnership (CNAP)

*and*

Community Needs Assessment Committee

*Funded through contributions from:*

City of Wheeling  
Wes Banco  
Hoffman Foundation  
First Presbyterian Church  
United Way of the Upper Ohio Valley  
Sisters of St. Joseph Health and Wellness Foundation  
Community Foundation for the Ohio Valley  
Ohio County Family Resource Network

*Prepared by:*

Collective Impact, LLC

July 1, 2021

---

## Table of Contents

<b>Introduction.....</b>	<b>1</b>
<b>Assessment Committee .....</b>	<b>1</b>
<b>Project Methodology.....</b>	<b>1</b>
<b>Description of Ohio County .....</b>	<b>3</b>
<b>Demographic Characteristics.....</b>	<b>3</b>
<b>Socio-Economic Characteristics .....</b>	<b>4</b>
<b>Analysis and Key Findings.....</b>	<b>6</b>
<b>Health/Mental Health .....</b>	<b>6</b>
<b>Mental Health Services.....</b>	<b>6</b>
<b>Intellectual and Developmental Disability Services.....</b>	<b>8</b>
<b>Chronic Disease.....</b>	<b>10</b>
<b>Childhood Education/Youth Programs.....</b>	<b>12</b>
<b>Services and Therapies for Children with Disabilities .....</b>	<b>12</b>
<b>Early Childhood .....</b>	<b>14</b>
<b>Child Day Care.....</b>	<b>15</b>
<b>After School Programs .....</b>	<b>17</b>
<b>Financial Stability .....</b>	<b>19</b>
<b>Homelessness .....</b>	<b>19</b>
<b>Emergency Rent/Mortgage Assistance .....</b>	<b>20</b>
<b>Utility Assistance.....</b>	<b>22</b>
<b>Access to Living Wage Employment.....</b>	<b>23</b>
<b>Food Access.....</b>	<b>25</b>
<b>Re-Entry (Prison and In-Patient Facilities).....</b>	<b>28</b>
<b>Appendix A: Survey Results Raw Data .....</b>	<b>31</b>
<b>Community Stakeholder Survey Results .....</b>	<b>31</b>
<b>Demographics.....</b>	<b>31</b>
<b>Greatest Needs and Strengths.....</b>	<b>37</b>
<b>Health/Mental Health .....</b>	<b>39</b>
<b>Childhood Education/Youth Programs .....</b>	<b>43</b>
<b>Financial Stability .....</b>	<b>48</b>
<b>Service Recipient Survey Results.....</b>	<b>61</b>
<b>Demographics.....</b>	<b>61</b>

---

<b>Greatest Needs and Strengths.....</b>	<b>66</b>
<b>Appendix B: Focus Group Results and Secondary Data .....</b>	<b>75</b>
<b>Health/Mental Health .....</b>	<b>75</b>
<b>Community Stakeholder Health/Mental Health Focus Group.....</b>	<b>75</b>
<b>Service Recipient Health/Mental Health Focus Group .....</b>	<b>77</b>
<b>Secondary Data .....</b>	<b>79</b>
<b>Childhood Education/Youth Programs.....</b>	<b>90</b>
<b>Community Stakeholder Childhood Education/Youth Programs Focus Group.....</b>	<b>90</b>
<b>Service Recipient Childhood Education/Youth Programs Focus Group .....</b>	<b>90</b>
<b>Secondary Data .....</b>	<b>95</b>
<b>Financial Stability .....</b>	<b>98</b>
<b>Community Stakeholder Financial Stability Focus Group.....</b>	<b>98</b>
<b>Service Recipient Financial Stability Focus Group .....</b>	<b>98</b>
<b>Secondary Data .....</b>	<b>101</b>
<b>Appendix C: References .....</b>	<b>108</b>

---

## Introduction

The Ohio County Community Needs Assessment Partnership (CNAP) conducted a community needs assessment to identify priorities for the community. The CNAP is comprised of the following organizations: Ohio County Family Resource Network (FRN), Community Foundation for the Ohio Valley (CFOV), West Virginia University (WVU) Extension – Ohio County, and United Way of the Upper Ohio Valley. The CNAP contracted with Collective Impact, LLC, a capacity building consulting firm based out of Huntington, WV, to assist in conducting the assessment project.

Services provided by Collective Impact include:

- Facilitation of planning sessions with CNAP and a local assessment committee.
- Development and administration of needs assessment surveys (community stakeholder survey and service recipient survey).
- Facilitation of six (6) focus groups with community stakeholders and service recipients.
- Secondary data collection and review.
- Analysis and summary of data collected through the surveys, focus groups, and secondary data review.
- Preparation of the Needs Assessment Report.

The needs assessment focused on specific needs in the areas of health/mental health, education/youth programs, and financial stability. Not all areas of the community nor services provided were included in this assessment, for example Substance Use Disorder (SUD) was recently assessed through a project with Youth Services System, Inc. and therefore was not included in this project. Also, while COVID-19 had become a significant issue facing the community, the project was assessing community needs independently of the health pandemic.

The final needs assessment report including key findings and conclusions is anticipated being available in the spring of 2021. Results from the assessment project will be used to assist a large number of community partners across the county in planning for future services, educating the community, and leveraging and distributing resources over the next several years.

## Assessment Committee

An Assessment Committee was convened by CNAP to provide general oversight and assistance for the project. The committee met several times from October 2020 through February 2021 to provide guidance to the consulting team about priorities and activities for the needs assessment process. The Assessment Committee provided the necessary “boots on the ground” needed to conduct a successful, interactive, and inclusive assessment project. Assessment Committee members include the following individuals:”

Lisa Badia	The Homeless Coalition
Kathie Brown	Wheeling Health Right
BJ Delbert	City of Wheeling

Jill Eddy	Youth Services System, Inc.
Marcy Jo Evans	Child Care Resource Center
Lori Jones	YWCA
Mark Games	Northwood
Julie Gomez	NAMI – Wheeling
Lewis Honaker	WVU Extension – Ohio County
Wendy Miller	Birth to Three
Karrie Mulhern	WV Northern Community College
Susie Nelson	Community Foundation for the Ohio Valley (CFOV)
Mark Patee	WV DHHR
Mark Phillips	Catholic Charities
Kelly Pizzoferrato	WV Jobs and Hope
Jay Prager	Easter Seals
Claudia Raymer	Ohio County Family Resource Network (FRN)
Jessica Rine	United Way of the Upper Ohio Valley

## Project Methodology

The Needs Assessment is based on a comprehensive review of both qualitative and quantitative data sources including: (1) data collected from key informants through a community stakeholder and service recipient survey, (2) opinions of focus group discussions convened via Zoom conferencing services, and (3) statistical data from relevant secondary data sources.

The needs assessment identified specific needs that local residents and community stakeholders feel are important to address. As part of the project, the broader community was engaged to learn about those community needs that are most important to people in Ohio County. Two separate surveys were conducted between November 2020 and February 2021. Six focus groups were held with community stakeholders and service recipients in March 2021. Surveys and focus group instruments were designed based on questions of interest by the Assessment Committee. Throughout the project, Assessment Committee members also identified and/or provided a wide range of secondary data indicators and data sources for the consulting team to review, consider, analyze, and include in this assessment report.

The CNAP and Assessment Committee adopted and used the following domains and subdomains to assess community needs and organize related project data:

### Health/Mental Health

- Mental Health Services
- Intellectual/Developmental Disability Services
- Chronic Disease (heart disease, cancer, diabetes, etc.)

### Childhood Education/Youth Programs

- Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)
- Early Childhood

- Child day Care (including before and after school care)
- After School Programs (4-H, Scouts, Anchor, etc.)

**Financial Stability**

- Homelessness
- Emergency Rent/Mortgage Assistance (Social Service Agencies and Churches)
- Utility Assistance
- Access to Living Wage Employment
- Food Access
- Re-Entry (Prison and In-Patient Facilities)

**Description of Ohio County**

Ohio County is located in the northern panhandle of West Virginia. It was named for the Ohio River, which forms its western border with the state of Ohio. It is the third-smallest county in the state, with a total area of 109 square miles. As of the 2010 census, the population density is 420.0 persons per square mile. The county seat is Wheeling.



**Demographic Characteristics**

The total population of the county is 42,143 people, with more female (51.3%) than male (48.2%) inhabitants.

Basic Demographic Characteristics	
Population	41,182*
Households	17,193
Family Households	9,862
Households with Children Under 18 Years	3,510

\*<https://worldpopulationreview.com/us-counties/states/wv> US Bureau of the Census 2020, 2019 ACS 5-year estimates

The median age of 43.6 years skews older than the national median of 38.1 years. One-quarter of the adult population is over age 65.

% Population By Age Group	
Under 5 Years	5.2%
Under 18 Years	19.1%
Over 18 Years	80.9%
65 Years and Older	21.2%

US Bureau of the Census, 2019 ACS 5-year estimates

There is little racial and ethnic diversity in Ohio County, with the white population at 92.9%. The next-largest racial group is black or African American at 3.9%.

<b>Population By Race</b>	
White	92.9%
Black or African American	3.90%
Hispanic or Latino (of any race)	1.20%
American Indian or Alaska Native	0.20%
Asian	0.70%
Other Race	0.30%
Two or More Races	1.90%

*US Bureau of the Census, 2019 ACS 5-year estimates*

Most county residents have achieved a high school education or higher.

<b>Education Attainment</b>	
Total High School or Higher	93.5%
High School or Equivalent	34.2%
Some College, No Degree	19.7%
Associate's Degree	7.6%
Bachelor's Degree	19.4%
Graduate or Professional Degree	12.6%

*US Bureau of the Census, 2019 ACS 5-year estimates*

Nearly 16% of the county's population faces a disability or limited English language ability.

<b>Language and Disability</b>	
18+ with Limited English Proficiency	205
Population with a Disability	6,414
% Population with a Disability	15.4%

*US Bureau of the Census, 2019 ACS 5-year estimates*

### **Socio-Economic Characteristics**

The median household income for Ohio County residents is \$50,584. This is significantly below the median income in both the state of WV and across the United States. Unemployment rates are in line with state averages, but above the national unemployment rate.

<b>Income and Unemployment</b>	<b>County</b>	<b>WV Average</b>	<b>US Average</b>
Median Household Income	\$50,584	\$60,920	\$80,944
Population 16 Years+	35,028	33,042	104,468
% in Labor Force	59.0%	53.8%	63.6%
% Unemployed	6.0%	6.0%	4.3%
% Without Health Insurance	4.3%	6.7%	9.2%

*US Bureau of the Census, 2019 ACS 5-year estimates, foodlink.wvu.edu*

Poverty levels in the county are in line with the national average and significantly below state levels.

Percent in Poverty	County	WV Average	US Average
All people	12.6%	16.0%	12.3%
Under 18 Years	12.8%	20.10%	16.8%
Single Female Head of Household	22.6%	31.1%	24,1%

*US Bureau of the Census, 2019 ACS 5-year estimates, foodlink.wvu.edu*

Fewer people own a home in Ohio County as compared to the state. Median rent in the area is significantly lower than state and national levels.

Housing	County	WV Average	US Average
% Owner Occupied	69.8%	73.2%	64.0%
% with Mortgage	45.4%	46.6%	62.7%
Median Rent	\$667	\$725	\$1,062
Rent over 35% of Income	38.4%	38.5%	27.4%
Households Receiving SSI	4.14%	6.86%	4.37%

*US Bureau of the Census, 2019 ACS 5-year estimates, foodlink.wvu.edu*

Lower levels of vehicle ownership in the county leaves 6.4% of the population using public transportation or walking to work. 4.1% of the population works from home. Nearly one-quarter of the population does not have access to the internet. A third of the population does not have a smartphone.

Vehicle and Internet Access	County	WV Average	US Average
% Households without a Vehicle	12.5%	8.3%	6.3%
% Households without Internet	22.0%	23.6%	20.6%
% Households without Smartphone	32.8%	36.31%	27.4%

*US Bureau of the Census, 2019 ACS 5-year estimates, foodlink.wvu.edu*



# Analysis and Key Findings

Data from the primary information sources of community stakeholder surveys/focus groups as well as service recipient surveys/focus groups was analyzed in addition to secondary data sources to determine the needs of Ohio County in three main domains:

1. Health/Mental Health
2. Childhood Education/Youth Programs
3. Financial Stability

## Health/Mental Health

### Mental Health Services

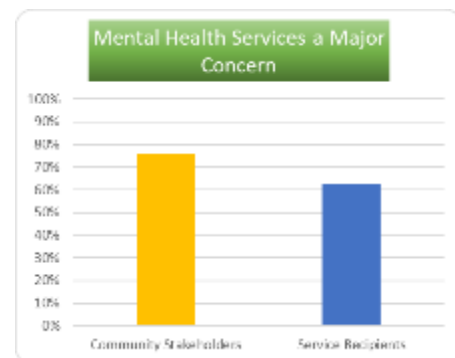


When asked to choose the three greatest areas of need in Ohio County, survey respondents chose mental health services more often than any other county need across all domains. This was true in surveys of both community stakeholders (68%) and service recipients (62%). Mental health services were further deemed a major concern by 76% of community stakeholders and 62% of service recipients.

In fact, 16% of service recipients listed mental health services as their number one need right now, second only to their need for financial assistance.

A stakeholder focus group lists several problems with the delivery of mental health care including:

- A need for additional providers in school-based mental health services.
- A need to expand school-based mental health services.
- A need for funding incorporated into state budgets rather than being grant-funded.
- Increased community awareness of available programs.
- A lack of therapists to address the existing demand and need for services.
- A lack of trained couple’s therapists, Obsessive-Compulsive Disorder (OCD) therapists, and eating disorder therapists.



Teachers are overwhelmed with mental health issues in the classroom. We need more quality health and mental health education for students.

Stakeholder Focus Group

The entire mental hygiene process is flawed – people are being discharged from services “into the streets” with limited or no services and no follow-through.

Stakeholder Focus Group

- A need to use of and promote mental health services other than therapy, such as early intervention services.
- Covid-19 has delayed suicide prevention services.
- Transportation issues create barriers to access.

A focus group of service recipients agrees with many of the stakeholder observations citing:

- Transportation is a barrier to receiving services.
- There is a lack of therapists for adolescents, especially 16-17 year-olds.
- There are not enough providers to meet the demand.
- A lack of awareness of providers and services.
- A lack of youth support groups.

The survey of community stakeholders asked what is most needed to improve mental health services in the community:

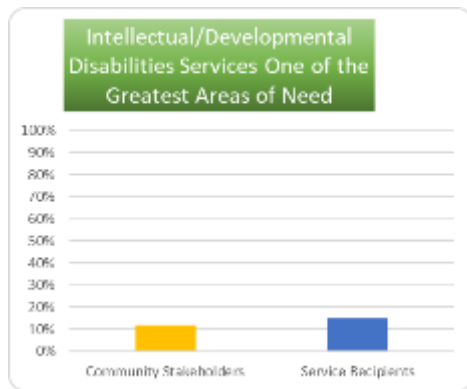


\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 40](#).

Respondents clearly believe there is a need to expand services. The need for expanded inpatient services was cited by 53% of respondents, followed by 40% citing expanded outpatient services, and 30% citing both expanded school mental health services and services for children and adolescents.

Secondary data shows that Ohio County tends to be both mentally and physically healthier than other WV counties. However, the most recent data from the WV Department of Health and Human Services reflects pre-pandemic trends and may not accurately reflect the current climate.

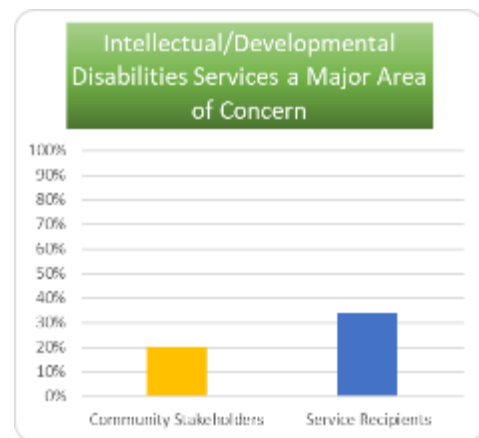
## Intellectual and Developmental Disability Services



Only 12% of community stakeholders and 15% of service recipients consider Intellectual and Developmental Disability Services (IDDS) to be one of the top three areas of greatest need in Ohio County. This places its perceived priority near the bottom for community stakeholders and near the middle for service recipients. This is despite approximately 22% of stakeholder survey respondents working in this area, and 13% of service recipient survey respondents receiving IDDS services in the last year. This

implies that IDDS services are a lower priority than many of the other service domains studied.

This should not suggest that these services are not considered important. Two-thirds of service recipients (68%) responded that IDDS are a moderate (34%) to major (34%) concern. Community stakeholders also rate IDDS services as a moderate (53%) to major (20%) concern.



The stakeholder focus group lists some of the barriers to effective delivery of IDD services:

- Wait list for services, especially with children – parents get frustrated and do not follow through in accessing services.
- Fragmented referral system makes it difficult for families to get services they might need.
- Awareness of all types of existing services is an issue for families.
- Families can be intimidated to access services – it can be an overwhelming and frightening experience.
- Oftentimes, people providing services are not well versed or knowledgeable about the services that exist.
- Transitioning from Birth-to-Three to other services is a difficult process.
- Getting families to follow through with initiation or transition of services.
- Newer service providers may not see the value in collaboration and working together.
- IDD services have been greatly impacted by COVID – lack of hands-on provision of services.
- Respite services for families is a gap in IDD services.

The service recipient focus group lists some obstacles to receiving services:

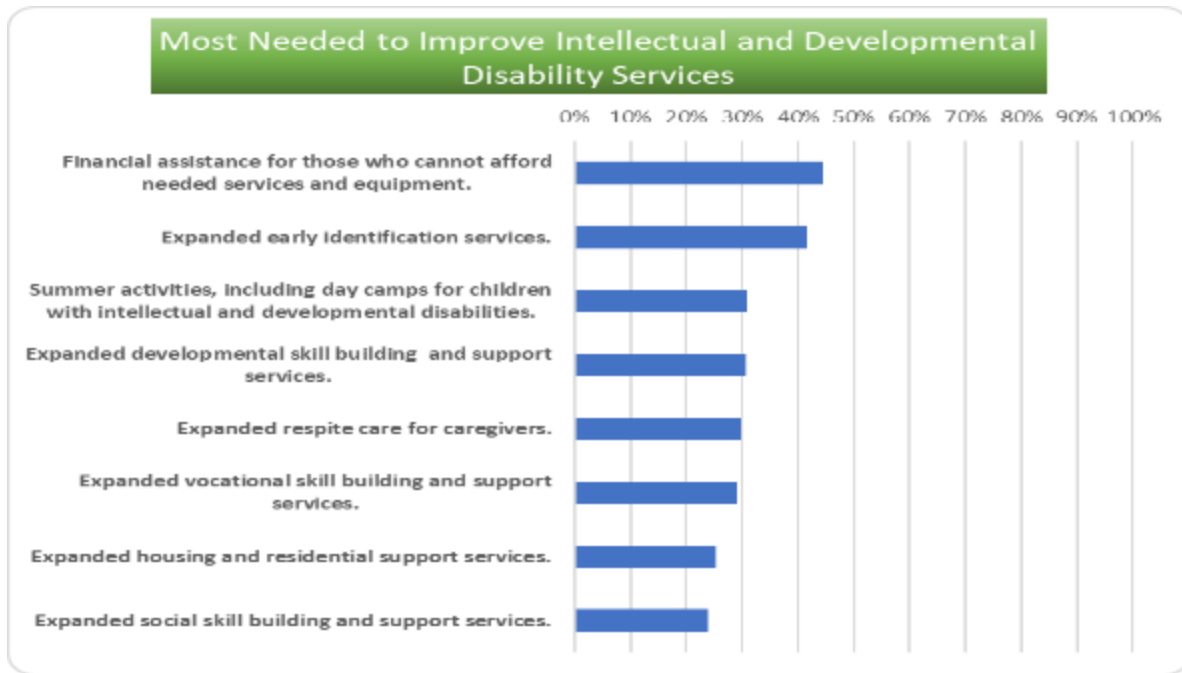
- People lack insurance for services.
- Transportation to and from services
- Not enough providers to meet the current.

- Awareness of providers and service
- Finding the right provider can be challenging.

Services for children with learning and developmental disabilities that don't have a one-year waiting list.

Service Recipient's #1 Need Right Now

The survey of community stakeholders asked what is most needed to improve the delivery of Intellectual and Developmental Disability Services in the community:



\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 41](#).

More financial assistance is strongly favored by 44% of respondents, closely followed by 41% seeing the need for expanding early identification services.

Secondary data elaborates on the number of people receiving care and wait-listed for care:

Receiving care in Ohio County:

Type of Care	Number Currently Receiving
Respite Care	4
Speech Therapy	0
Physical Therapy	1
Occupational Therapy	1
Social Skills Groups	Not offered

Nicole Hardman, REM Case Manager Supervisor Northern Region

Current waitlist for services in Ohio County:

Type of Care	Number Currently on Waitlist
Speech Therapy	14
Physical Therapy	5
Occupational Therapy	11

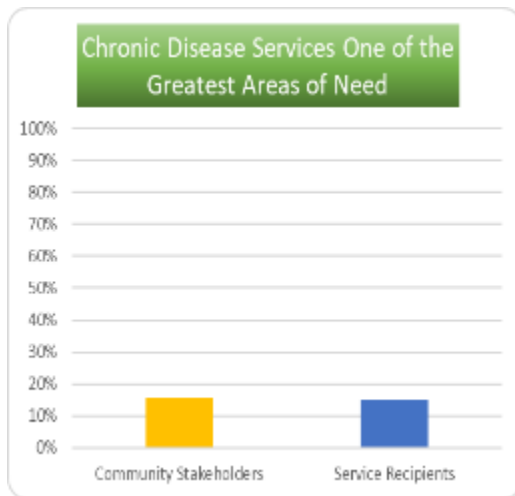
Allison O’Konski, Easter Seals

Average number of children treated in Ohio County each year:

Type of Care	Number Treated Annually
Speech Therapy	177
Physical Therapy	80
Occupational Therapy	141

Allison O’Konski, Easter Seals

### Chronic Disease

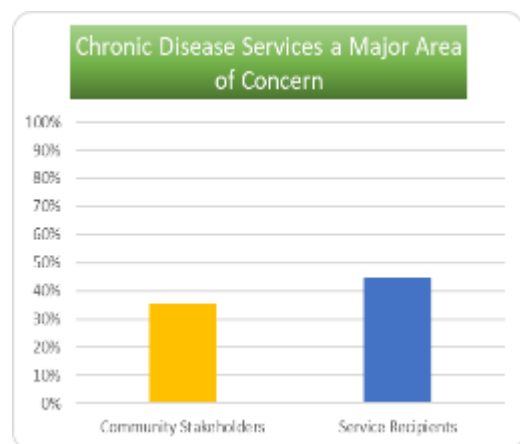


A nearly equal percentage of community stakeholders (16%) and service recipients (15%) believe services for the treatment of chronic disease are among the top three greatest areas of need in the county. This ranks these services in the middle of the list of priorities for both groups.

Service recipients rated chronic disease services as a major concern 45% of the time versus community stakeholders deeming it a major concern 35% of the time.

The community stakeholder focus group did not specifically mention chronic diseases, but list several issues in the delivery of healthcare in general:

- More trauma informed services and coordination of these types of services
- Transportation is always an issue – creating barriers to access to services.
- Awareness of all types of existing services is an issue for families.
- Families can be intimidated to access services – it can be an overwhelming and frightening experience.
- Oftentimes, people providing services are not well versed or knowledgeable about the services that exist.
- Health insurance for adults can be an issue.

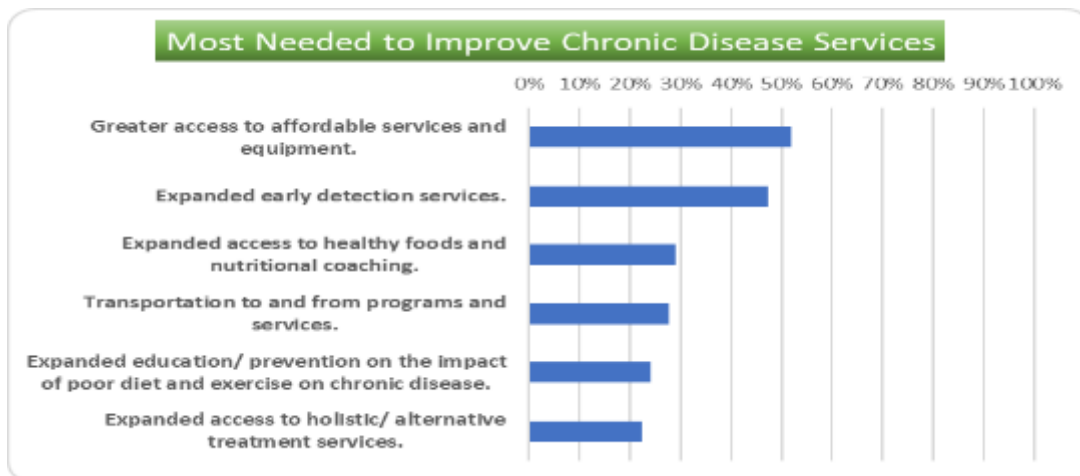


- Loss of Robert C. Byrd adolescent services has hurt community.
- Acute care in the valley is needed at the local level.
- Routine preventative dental services, especially finding providers that will accept Medicaid funding.
- Lack of communication from referral to service delivery – poor to no coordination of services.
- Not having the technology or internet access for telehealth services.
- Intensive outpatient services needed, particularly for males.
- Respite services have been difficult to access/provide because of COVID – families not wanting outsiders coming into homes and providers fearful of going into other people’s homes.

Similar concerns are listed by the service recipient focus group:

- People lack insurance for services.
- Transportation to and from services
- Not enough providers to meet the current demand.
- Awareness of providers and service is lacking.
- Finding the right provider can be challenging.
- Northwood is a large provider but lacks quality in service delivery.
- Lack of health care service coordination or aftercare support services (i.e., Wheeling hospital).
- Need for aftercare and support groups for cardiac patients.
- Need for more mobile and/or outreach services.
- Need for improved broadband and technology support for telehealth services.
- Need for enhanced communication and coordination between and among providers.

The survey of community stakeholders asked what is most needed to improve the delivery of Chronic Disease Services in the community:



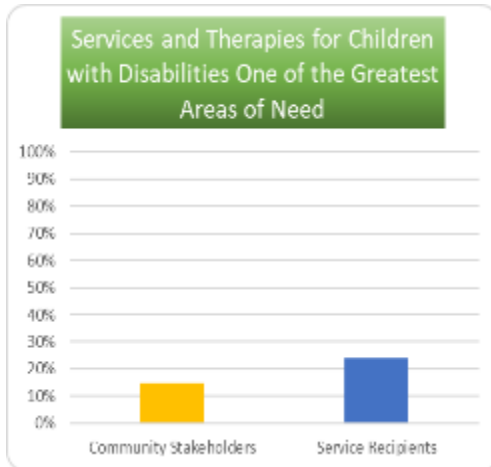
\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 42](#).

52% feel that greater access to affordable services and equipment is the greatest improvement needed, closely followed by 47% seeing the need for expanded early detection services.

Countyhealthrankings.org lists that 6% of county residents are uninsured, verifying an insurance barrier to receiving services.

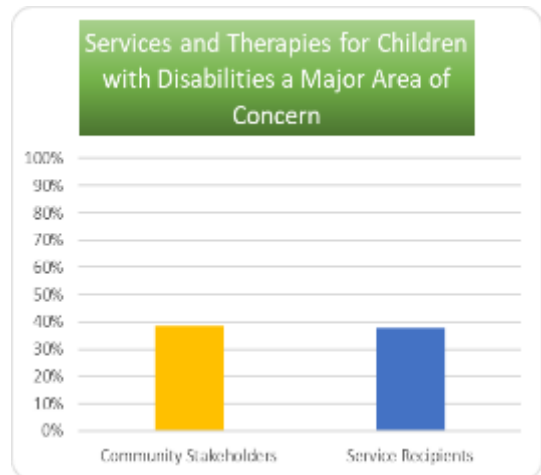
## Childhood Education/Youth Programs

### Services and Therapies for Children with Disabilities



The survey of community stakeholders found that 37% believe that services and therapies for children with disabilities is one of the top three greatest strengths in Ohio County. This makes it unsurprising that only 15% of stakeholder respondents feel that this is one of the top three greatest areas of need in the county. 27% of service recipients also believe that these services are one of the top three greatest strengths in the county. The service recipients ranked this as one of the top

three areas of need 24% of the time. This places this sub-domain firmly in the middle of the list of priorities for both groups.



Both community stakeholders (39%) and service recipients (38%) believe that the provision of disability

services for children is a major area of concern.

Focus groups believe that Birth-to-Three services are well-run and well organized.

The community stakeholder focus group cites some barriers to receiving services and therapies for children:

- Physicians are hesitant to refer to childhood programs (Birth-to-Three, etc.).
- Difficult to find services for 3-year-old children (i.e., preschool, early learning, socialization, etc.).

- Funding for some services is restrictive or non-existent.
- Grandparents raising grandchildren with trauma or other special needs.
- Stigma – women with SUD or other high-risk issues.
- Lack of foster care families – especially for special needs children.
- Lacking in extra-curricular activities for kids with special needs.
- Lack of training for staff working with children with disabilities and special needs.
- Wait list for early intervention, waiver, Birth-to-Three, home visitation services, etc.
- Need a central place or agency to innovate ideas to transform the service system, assist with Individual Education Plans, help write letters and applications for families to apply for services, connect families to basic services and resources, provide basic parent education services, etc.

The service recipient focus group cites:

- Transportation to a variety of services.
- Wait list for childcare services.
- Fear of childhood education and home visitation services being similar or connected to child protective services.
- Lack of awareness or knowledge of services that exist can be an issue for some families.
- Getting connected with the right services can be difficult.
- Resources, support groups, or services for siblings of special needs children – holistic and family focused approach – is needed.

The survey of community stakeholders asked what is most needed to improve the delivery of Services and Therapies for Children with Disabilities:

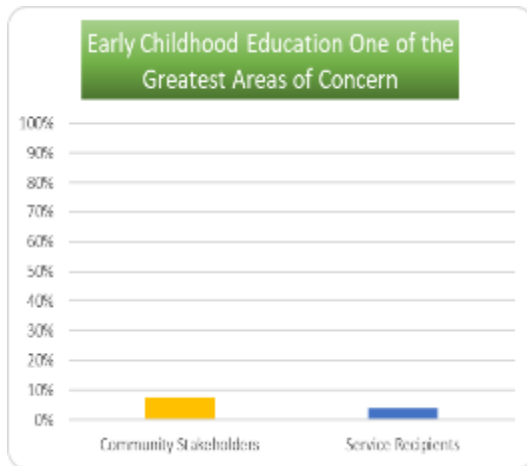


\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 44](#).



There is strong support (60%) for community-based support for emotional/behavioral disabilities. This is closely followed by 52% seeing the need for programs and services for families with adult children with special needs, 47% seeing the need for a streamlined process for Individual Education Plans, Individualized Family Service Plans, and Section 504 Plans, and 45% in support of respite care, childcare, before and after school care for children with special needs.

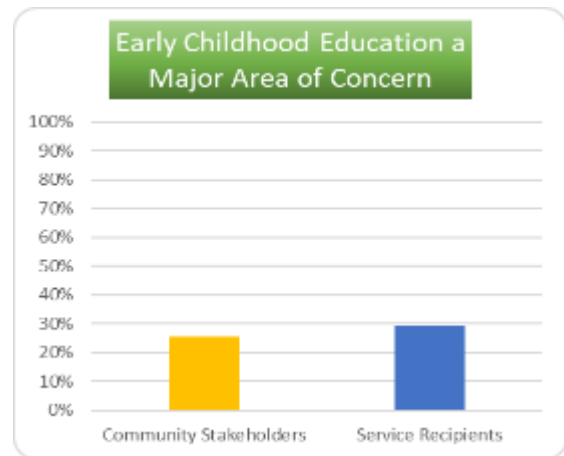
### Early Childhood



Early childhood education is rated as one of the top three strengths in the county by 28% of community stakeholders and 21% of service recipients. As a result, a low percentage of both groups view this as one of the greatest areas of concern in the county right now (7% community stakeholders, 4% service recipients).

More than a quarter

of both groups believe early childhood education is an area of major concern (community stakeholders 25%, service recipients 29%).



The community stakeholder focus group made a few observations regarding early childhood education:

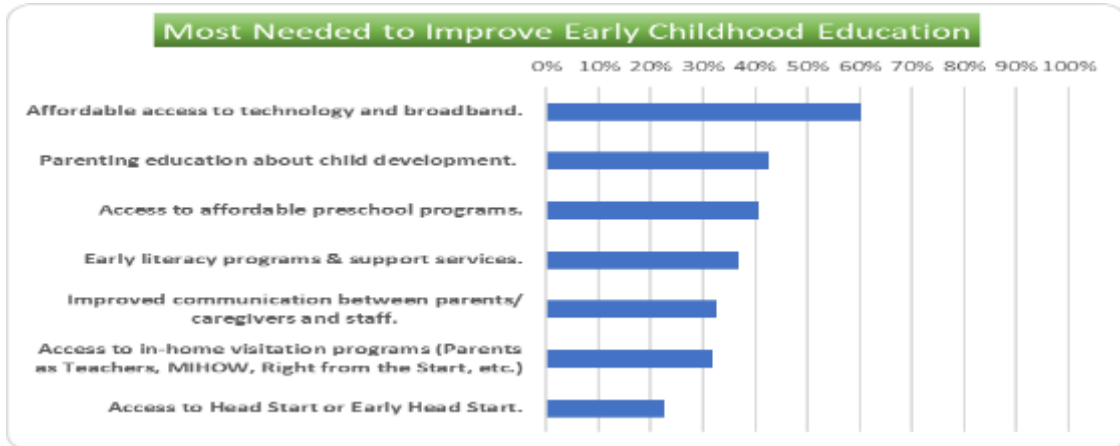
- Using virtual technologies can be limiting (lack of technology, internet, etc.)
- Some staff struggle to work remotely.
- Turnover of families follow turnover of staff.
- Child protective services need extra training and support.
- Education and support for parents is needed.
- Early childcare and childhood education collaboration among providers is strong.
- Pre-k programs are available and working well together.
- Expanded use of technology, enhanced broadband, virtual technology training etc., to expand and support service delivery, even beyond county lines is needed.

The service recipient focus group adds:

- Additional Universal Pre-K slots and services available at choice locations with transportation is needed.
- Streamlined registration process for Universal Pre-K services is needed.

- Lack of in-home parent education programs (i.e., Parents as Teachers, Healthy Families America, etc.).

The survey of community stakeholders asked what is most needed to improve the delivery of Early Childhood Education:

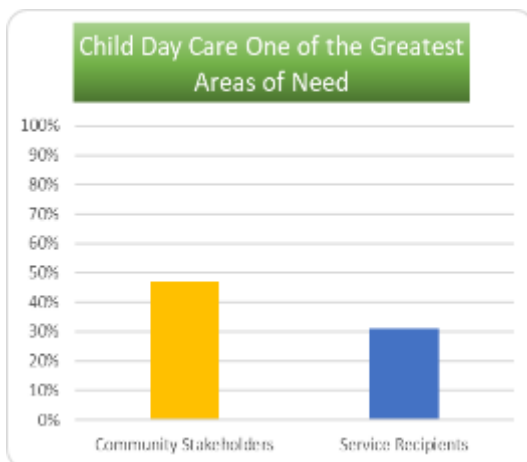


\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 45](#).

60% of respondents believe that affordable access to technology and broadband is most needed to improve early childhood education. This is supported by secondary data from *WV Foodlink* that indicates 22% of Ohio County households do not have access to the Internet at home, and 32% of households do not have a smartphone.

43% of respondents see a need for parenting education about child development. 41% believe there is a need for greater access to affordable preschool programs. Over 30% of respondents feel there is a need for early literacy programs and support services (37%), improved communication between parents/caregivers and staff (33%), and access to in-home visitation programs (32%).

### Child Day Care

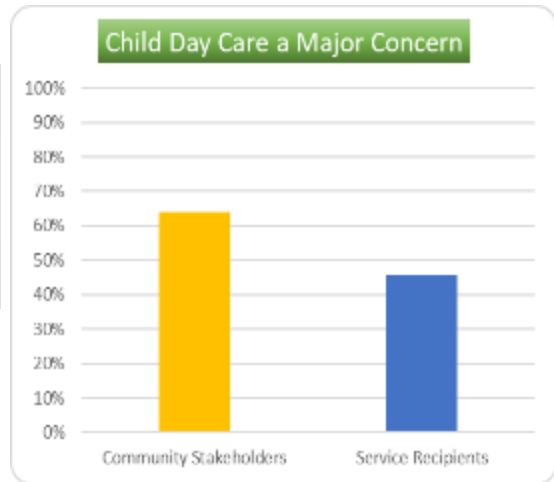


Childcare for working families is considered one of the greatest areas of need in Ohio County by 46% of community stakeholders and 31% of service recipients. This places it as the second highest area of need across all domains for community stakeholders and the third highest for service recipients.

64% of community stakeholders and 46% of service recipients feel that childcare is a major area of concern.

Childcare services have struggled during the pandemic, creating a gap of care for school-aged children.

Community Stakeholder Focus Group



The community stakeholder focus group lists several challenges facing childcare programs:

- Childcare centers have long wait lists.
- Childcare staff are underpaid with high staff turnover – difficult to maintain quality staff.
- Transportation to childcare services.
- Funding for some services is restrictive or non-existent.
- Licensing guidelines are restrictive.
- Transient staff at many organizations – large amount of staff turnover after being trained and bonds are made with children.
- Some staff struggle to work remotely.
- Not every school has afterschool care programs.
- Summer childcare for school aged kids is lacking.
- Difficulty finding children that are eligible and meet current requirements for services.
- Payment for childcare materials, resources, and staffing have been less during the pandemic due to lower state reimbursements.

Service recipients observe:

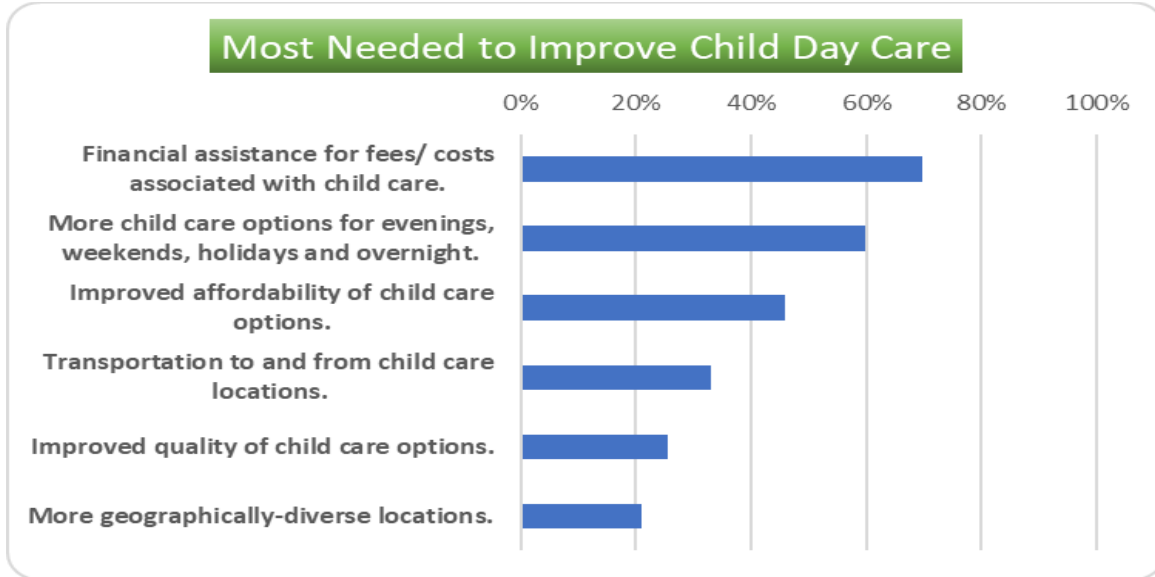
- Wait list for childcare services.
- Fear of childhood education and home visitation services being similar or connected to child protective services.
- Not enough daycare providers for various ages ranges within the same family, specifically for infants.
- Lack of awareness or knowledge of services that exist can be an issue for some families.
- Difficult for childcare providers to break even financially due to ratios,

Staff burnout has increased during the COVID pandemic, restrictions, and new regulations.

Community Stakeholder Focus Group

- space, and reimbursement rates.
- Costs for programs prohibit many families from accessing needed services.

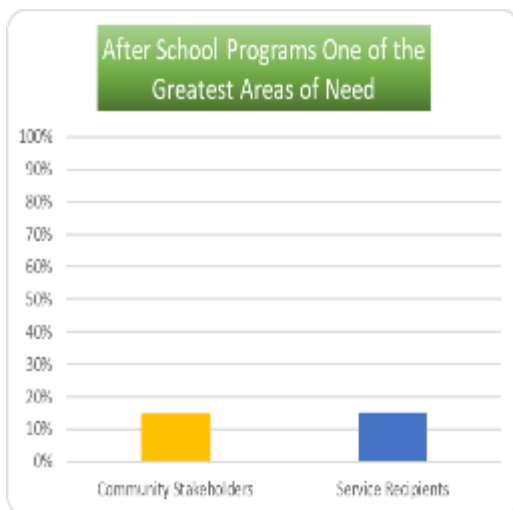
The survey of community stakeholders asked what is most needed to improve Child Day Care:



\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 46](#).

Costs and variety of services are the most pressing needs according to the community stakeholders. 70% believe financial assistance for the costs associated with childcare is needed. 60% believe more childcare options for evenings, weekends, holidays, and overnight would be beneficial. 40% believe improvements could be made to make childcare more affordable.

### After School Programs

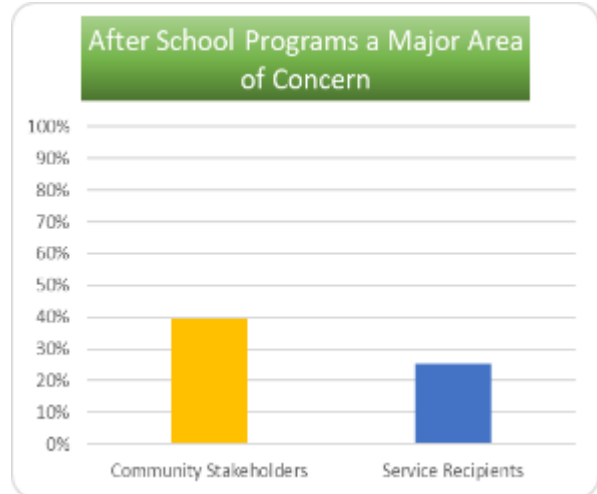


After school programs rate in the bottom third of the area’s greatest needs according to the community stakeholder survey (15%) and the service recipient survey (15%).

These programs are considered a major concern by a great deal more community stakeholders (40%) than service recipients (25%).

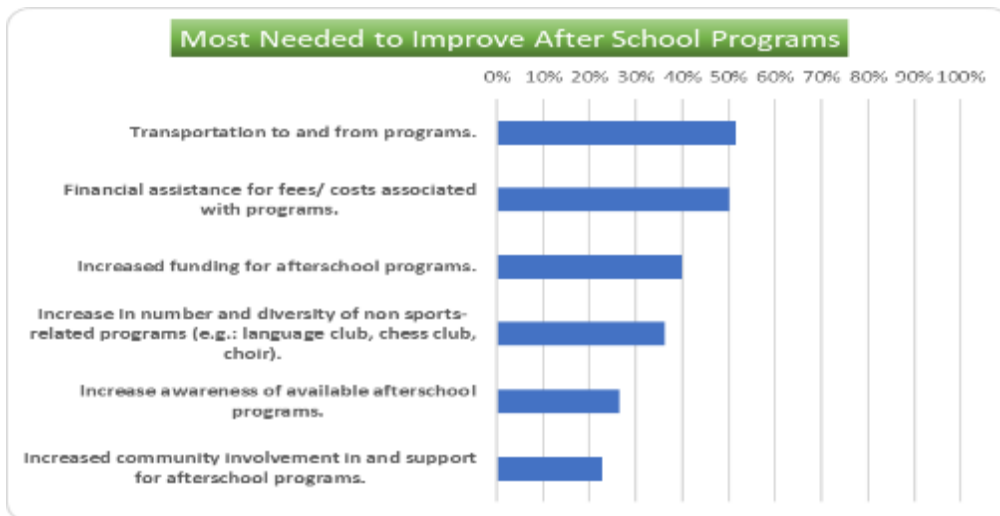
The community stakeholder focus group made a few observations about afterschool programs:

- Staffing and volunteer issues for 4-H clubs impacts number of kids that can be served.
- Parents need to be more engaged in programs and supported (i.e., 4-H, etc.).
- Time commitment required for some youth activities (i.e., sports, etc.).
- Limited or expensive services available for adolescent and youth programs.
- Lacking in extra-curricular activities for kids with special needs.
- YMCA summer programs are working well.
- Most in-person events and gatherings were canceled last year due to COVID.



The service recipient focus group adds only that recruitment for Girl Scouts is down due to COVID.

The survey of community stakeholders asked what is most needed to improve After School Programs:

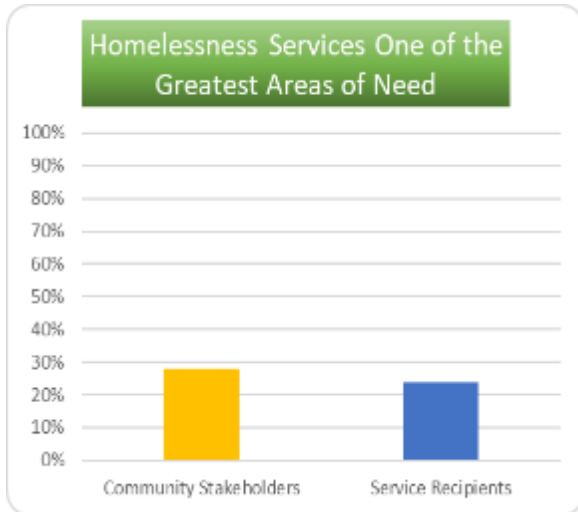


\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 47](#).

As with most other areas of concern, transportation (52%), financial assistance (50%), and funding (40%) are among the top recommendations to improve these programs.

## Financial Stability

### Homelessness



Both community stakeholders (28%) and service recipients (24%) rate services for homelessness in the top third when asked about the greatest areas of need in the county. Both groups believe homelessness issues are a major concern in the community (stakeholders 65%, service recipients 60%).

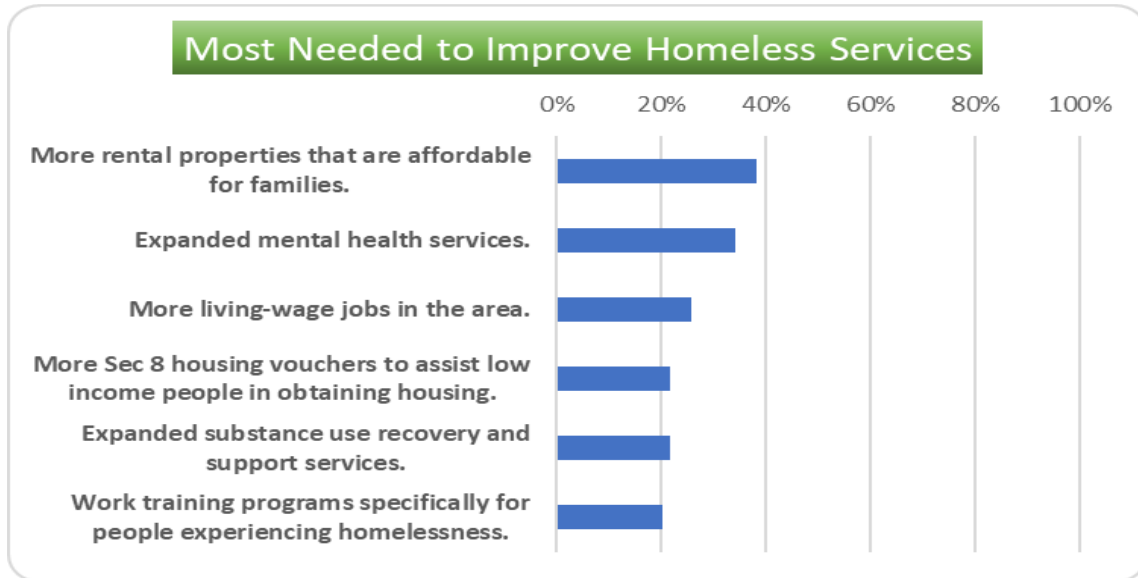


Services available now are viewed positively with 27% of community stakeholders and 21% of service recipients rating them among the best in the area.

The community stakeholder focus group had only a few observations about current homelessness services:

- Only have three units for emergency shelter for families with children.
- Emergency shelters do not provide equal access to the LGBTQ community.
- Catholic Charities Neighborhood Center's new homeless outreach coordinator is doing well.
- Salvation Army's warming shelter for folks to be sheltered and be fed is a current program working well in the community.

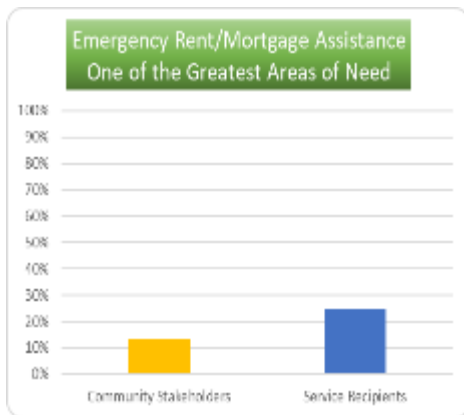
The survey of community stakeholders asked what is most needed to improve Homelessness Services:



\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 50](#).

38% believe there is a need for more rental properties that are affordable for families. 34% see the need for expanded mental health services. 26% believe more living-wage jobs need to be available in the area.

### Emergency Rent/Mortgage Assistance



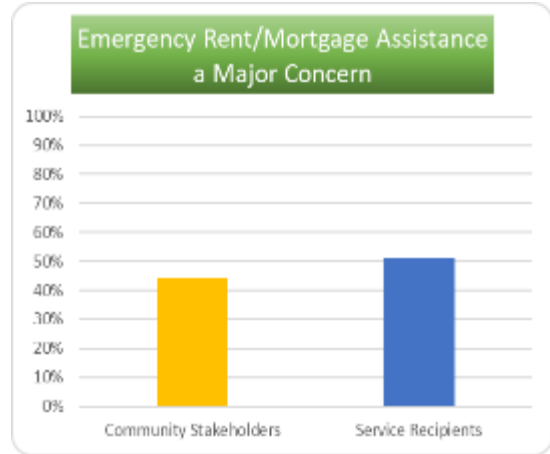
Community stakeholders and service recipients view emergency rent/mortgage assistance quite a bit differently. 25% of service recipients surveyed rate this as one of the greatest areas of need in the community, placing it in the top third of community needs. Community stakeholders, however, rate this in the bottom third, with only 13% of respondents rating it among the top three greatest areas of need in the community. The discrepancy could be the result of the fact that 21% of the service recipients surveyed received emergency rent/mortgage assistance in

the last year, placing it more at the forefront of their minds.

Both groups, 44% of community stakeholders and 51% of service recipients, view emergency rent/mortgage assistance as a major concern for the community.

Stakeholder and service recipient focus groups made a few observations about this issue:

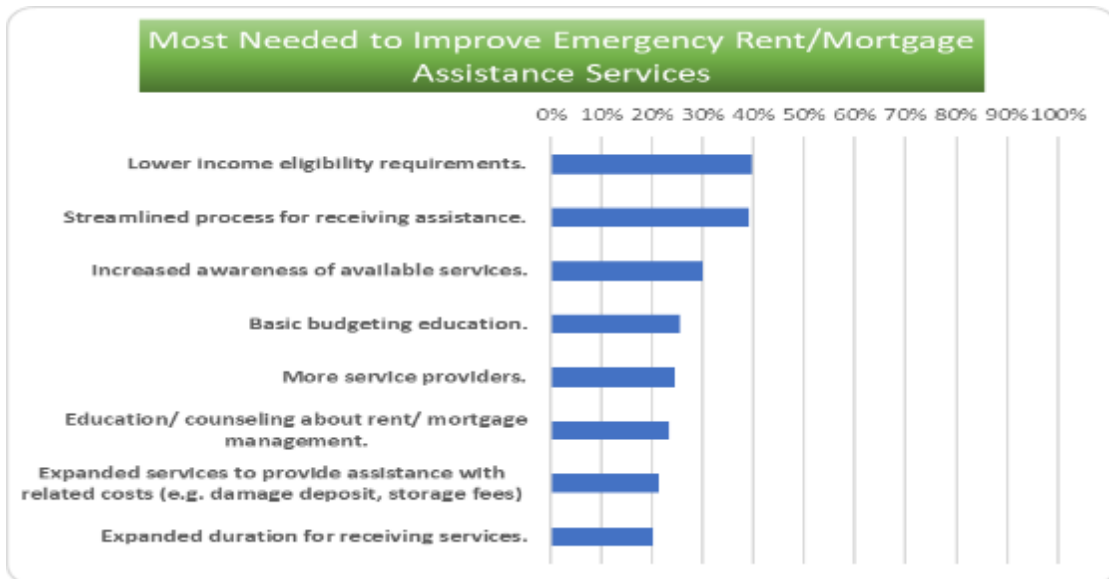
- Navigating and accessing safe, affordable, and quality housing is a challenge.
- Deposits and down payments for housing can be difficult to make.
- The various agencies and other stakeholders don't work well together or communicate with each other in a way that is helpful to clients. For example, HUD and landlords do not work well together to resolve systemic issues for their clients (i.e., evictions, vouchers).



It's easy for the community at large to think housing someone is easy because they're unaware of the requirements and restraints.

Service Recipient Focus Group

The survey of community stakeholders asked what is most needed to improve Emergency Rent/Mortgage Assistance programs:

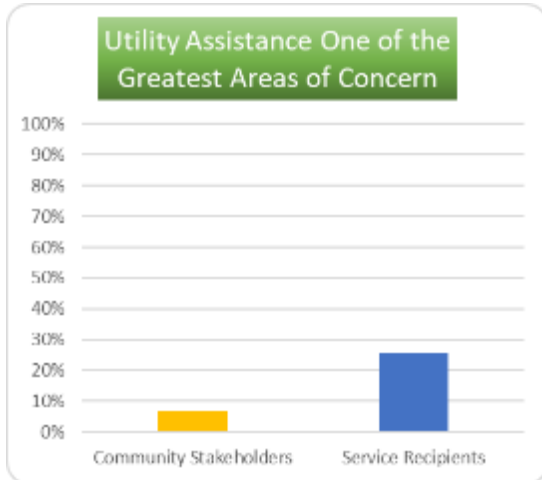


\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 53](#).



Lowering income eligibility requirements is favored by 40% of the respondents, 39% see value in streamlining the process for receiving assistance, and 30% believe the county needs to increase awareness of available services.

### Utility Assistance

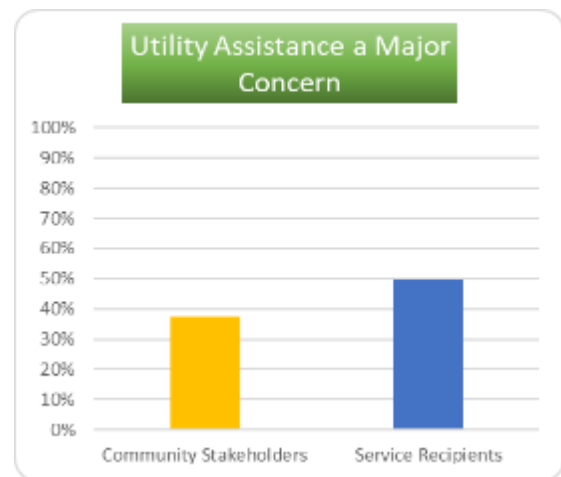


27% of service recipients surveyed received utility assistance in the last year. As a result, 26% of them rate this sub-domain as one of the greatest areas of concern in Ohio County, making it fourth on their overall list. On the contrary, only 7% of community stakeholders select this in their top three, making it last on their overall list of community concerns.

Utility assistance is viewed as a major concern by 37% of community stakeholders and 50% of service recipients.

The community stakeholder focus group makes a few observations about utility assistance programs:

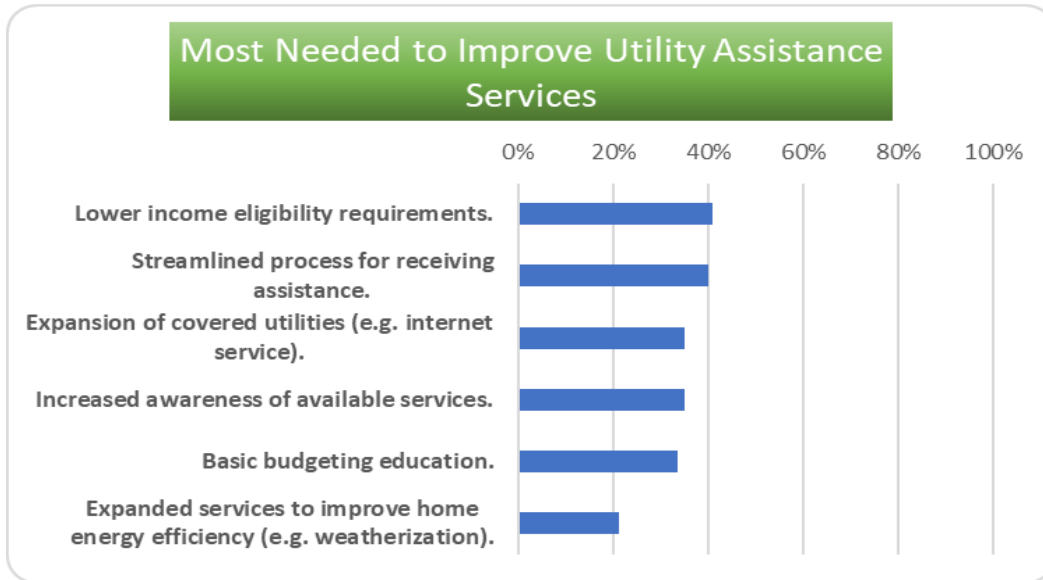
- Funding is needed services and basic living needs.
- Unpaid bills and debt lead to poor credit and barriers to services.
- Access to virtual services is hindered by a lack of broadband, technology services, etc.



If you've never needed assistance before, finding it can be quite the challenge. If you aren't in the system, then you're not aware of how to navigate it.

Service Recipient Focus Group

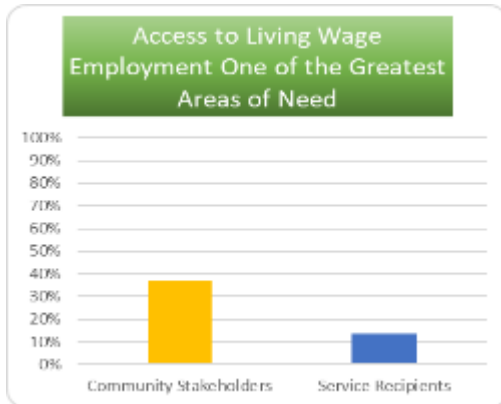
The survey of community stakeholders asked what is most needed to improve Utility Assistance programs:



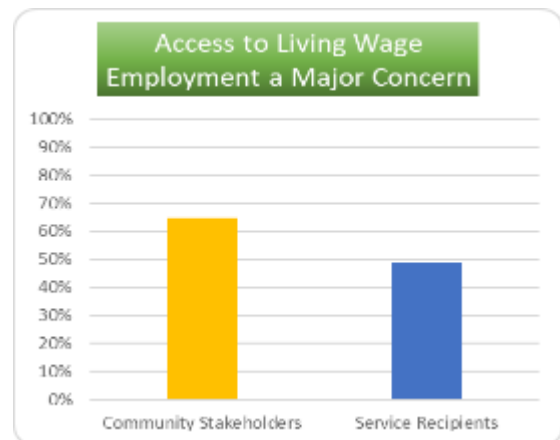
\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 52](#).

Recommendations are like those for emergency rent/mortgage assistance with 41% favoring lower income eligibility requirements, 40% recommending a streamlined process for receiving assistance, 35% expanding covered utilities (such as the internet), and 34% recommending basic budgeting education.

### Access to Living Wage Employment



Community stakeholders (36%) rate access to living wage employment as the third greatest area of need in the community, while service recipients (13%) rate it among their bottom three. Both groups, however, view this as a major concern in the community (65% of community stakeholders, and 49% of service recipients).



The community stakeholder focus group made several observations about access to living wage employment:

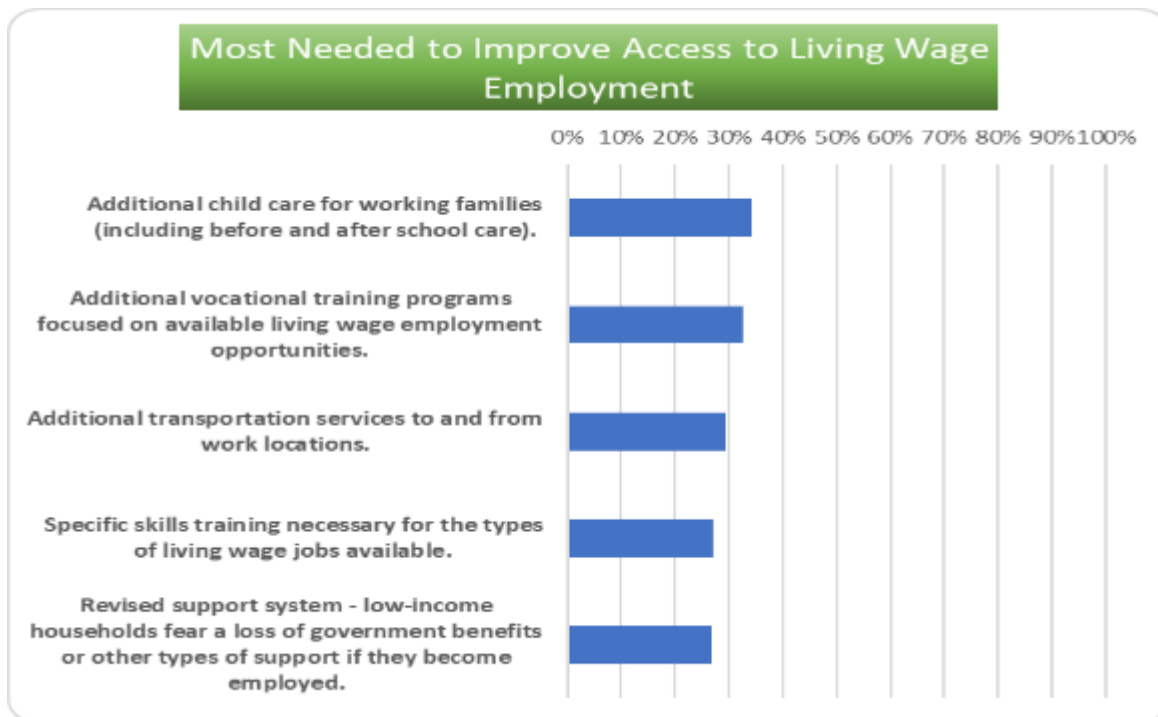
- Low wages for many staff creates family instability and turnover.

- There are currently strong community collaborations connecting individuals to work, employment, and training opportunities.
- Training programs at Northern Community College are working well - workforce, opioid response, etc.

The service recipient focus group adds:

- Working with Workforce Development is challenging. They are not responsive and lack prompt communication, particularly with their online system. The lack of clear direction and limited guidance they provide when you file for assistance, especially with unemployment is a major barrier to receiving needed services.
- A lot of people in the "working class" need assistance, especially now, but, because they don't qualify for assistance programs, they aren't eligible.
- Workforce needs an updated website where you can take care of your entire application process and see your case file online.

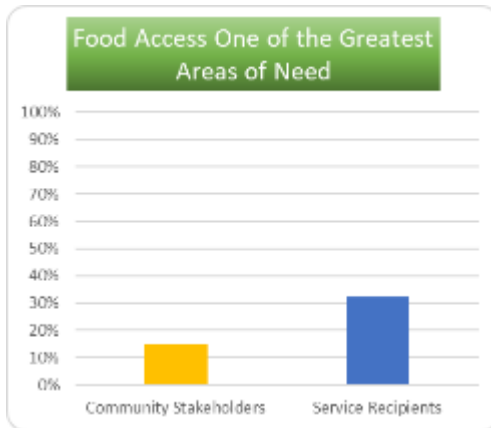
The survey of community stakeholders asked what is most needed to improve Access to Living Wage Employment:



\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 55](#).

34% support additional childcare for working families, 33% additional vocational training focused on available living wage employment opportunities, 30% additional transportation services to and from work locations, and 27% specific skills training necessary for the types of living wage jobs available.

## Food Access



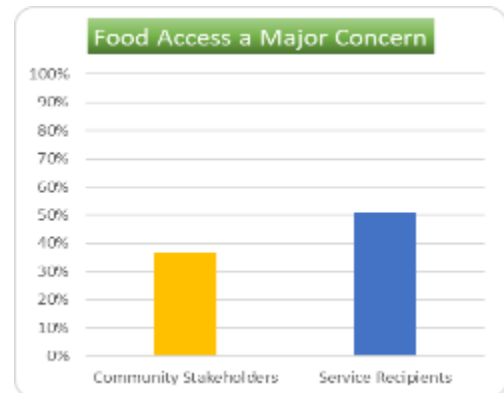
Service recipients (32%) rate food access as their second highest concern when choosing the three greatest areas of need in the county. Community stakeholders (15%) rate food access near the bottom of the county's greatest areas of need. Like categories with similar discrepancies, services recipients (46%) have made use of food access services within the last year, making this a higher priority for them.

Service recipients (51%) also felt that food access is a major concern in the area, versus the 36% of community stakeholders who rated it a major concern.

Both groups consider food access an area of strength for the county, with 47% community stakeholders and 50% of service recipients rating it as a service that is currently working well.

The community stakeholder focus group mentions a couple of barriers to providing and/or receiving food services:

- Transportation to the grocery store is a challenge.
- Food security is an issue in terms of access to groceries/food.



Both the community stakeholder focus group and the service recipient focus also point out where Ohio County is successful:

- Food security in downtown Wheeling proper – food services from soup kitchen, Catholic Charities, etc.
- FRN group attacks food security issues
- Food giveaways - access to food in the community has really helped a lot of families that needed food. Food pantries really help a lot.

*WV Foodlink* provides a profile of Ohio County and food access:

## Ohio County

### Ohio County Overview

The population of Ohio County is 41,755 with a median age of 44. 2,091 (19.01%) are under the age of 18, and 9,105 (21.81%) are over the age of 65.

Food access is difficult to measure because it is determined by many different factors. However, we can begin to calculate vulnerability to food insecurity at the census block group level based on the number of people in poverty, access to a vehicle, the quantity and quality of food retailers, and their proximity to people. According to those criteria, Ohio county has an overall food access score of 1.52 ranking 39 among West Virginia's 55 counties.

2 census block groups have very high levels of food access

3 census block groups have high levels of food access

20 census block groups have medium levels of food access

16 census block groups have low levels of food access

7 census block groups have very low levels of food access

### Resource Summary

<b>Food Assistance</b>	
Total Providers:	19
Food Pantries	11
Hot Meals	4
Backpack Programs	4
<b>SNAP</b>	
Enrollment Average	6,361
Monthly Disbursements	232
SNAP retailers	40
<b>WIC</b>	
Enrollment Average	736
WIC retailers	8
<b>Free and Reduced School Meal Programs</b>	
Eligible Students:	3,808
Eligible Students Percentage	71.32%
Breakfast Participation (of those eligible)	60.84%
Lunch Participation (of those eligible)	64.67%

<https://wvu.maps.arcgis.com/apps/MapJournal/index.html?appid=a5d8dfc15f4d4805ac00faa5e297675b#>

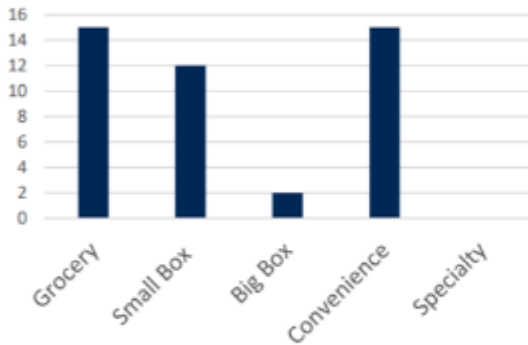
## FOOD ASSISTANCE

SNAP		WIC	
SNAP Enrollment Average / Month	6,293	WIC Average Monthly Cases	608
SNAP Enrollment Average	14.9%	WIC Retailers	8
SNAP % Children	36.3%		
SNAP Monthly Disbursement Average	\$1,046,885	School Nutrition	
SNAP Retailers	44	Free and Reduced Meal Eligible Students	3,786
		Eligible Students % from Total	71.5%
		Breakfast Participation (of Eligible)	54.6%
		Lunch Participation (of Eligible)	63.8%
		Summer Feeding programs (2019)	15
		Summer Meals per eligible student (2019)	10
Food Charities			
Total Food Assistance Providers	16		
# Food Pantries	11		
# Hot meals Programs	5		

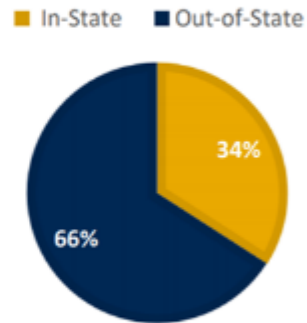
<http://foodlink.wvu.edu/wp-content/uploads/2021/05/Ohio-County-Profile.pdf>

# RETAIL FOOD ENVIRONMENT

## Food Retail Types



## Store Ownership



## Stores w/ Fresh Produce

12

## Total Food Retailers

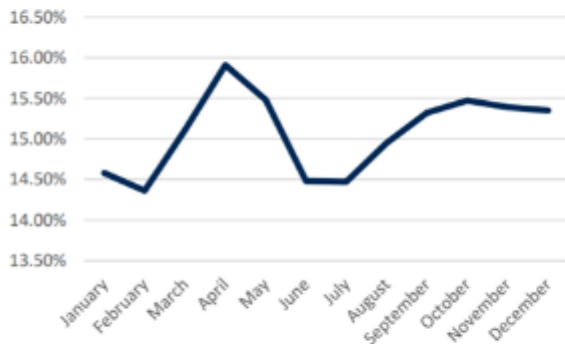
44

## WIC Approved Retailers

8

# PUBLIC NUTRITION ASSISTANCE

## SNAP Enrollment (2020)



## COVID-19 K-12 Meal Provision



## Monthly SNAP Disbursement

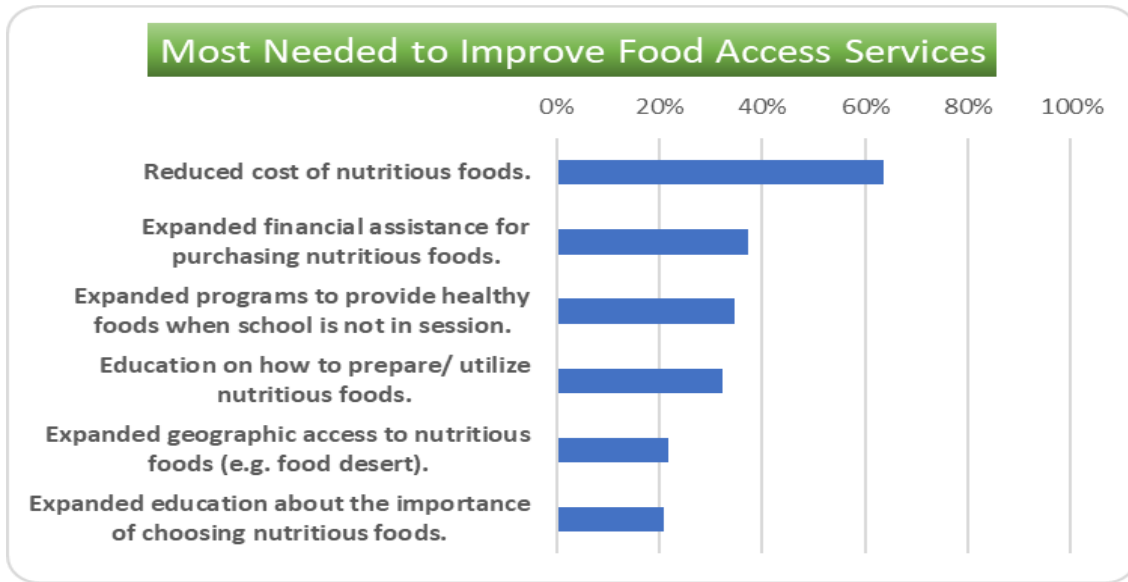
\$1,046,885

## Meals served per needy student (month)

29.8

<http://foodlink.wvu.edu/wp-content/uploads/2021/05/Ohio-County-Profile.pdf>

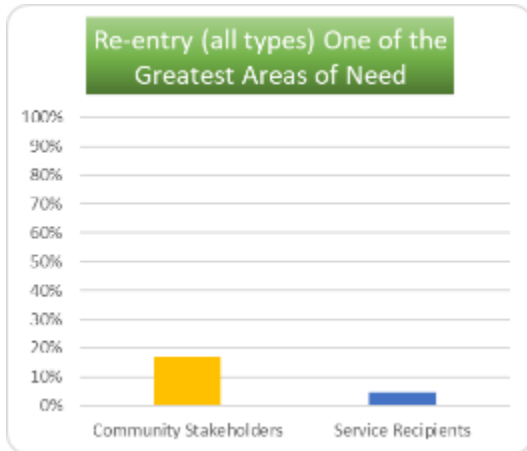
The survey of community stakeholders asked what is most needed to improve Food Access:



\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 56](#).

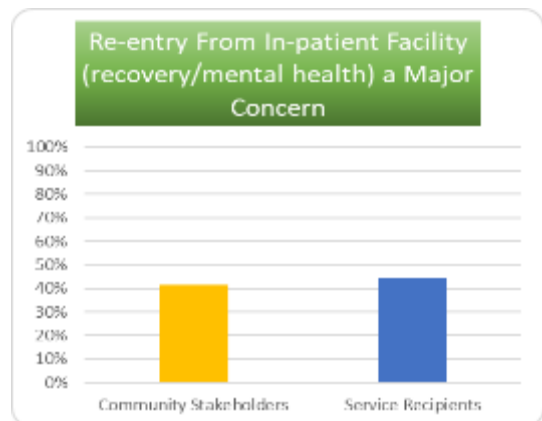
64% believe reduced cost of nutritious food is needed. Over 30% of respondents see a need for expanded financial assistance for the purchase of nutritious food (37%), expanded programs to provide healthy foods when school is not in session (35%), and education on how to prepare/utilize nutritious foods (32%).

**Re-Entry (Prison and In-Patient Facilities)**



Neither community stakeholders (17%) nor service recipients (5%) view re-entry as one of the three greatest areas of concern for the community.

Re-entry is viewed as a greater concern when it is from an in-patient facility rather than from prison. 41% of community stakeholders and 44% of service recipients view re-entry as a major concern when talking about an in-patient facility.



However, only 24% of community stakeholders and 25% of service recipients consider it a major concern when it concerns re-entry from prison.

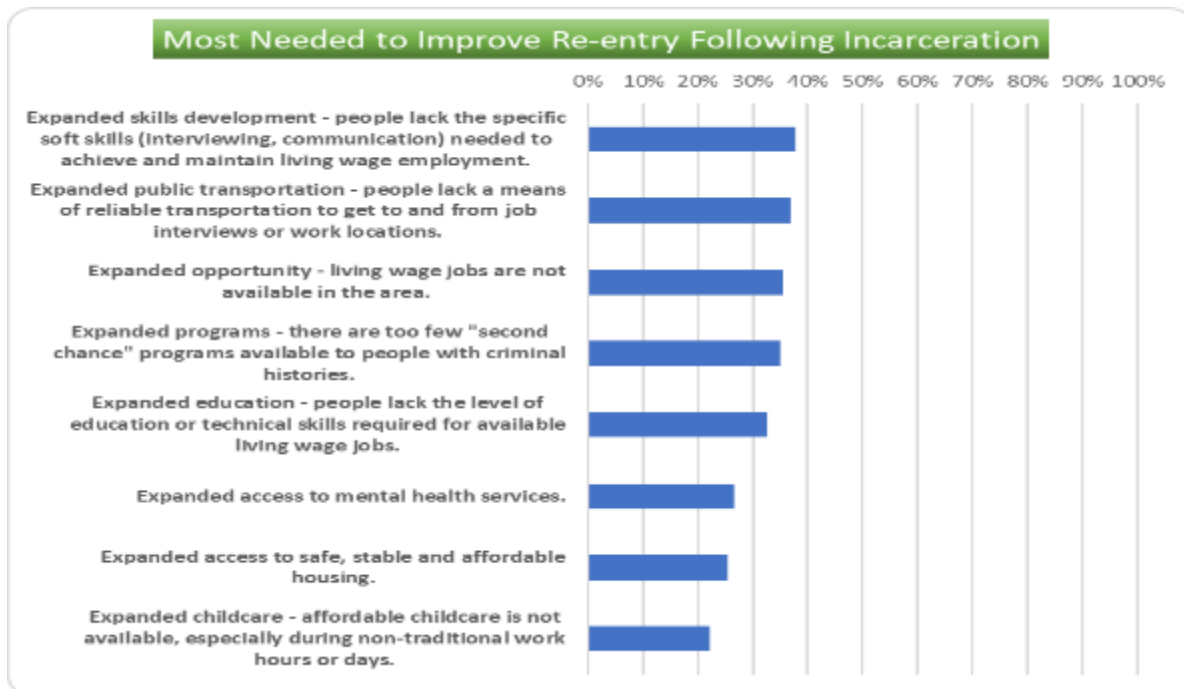
Focus groups made some observations about community re-entry services:



- Ongoing funding is needed for sustainable programs beyond pilot or demonstration periods – peer recovery, inspire, CABHI, etc.
- Greater funding, focus, and support for prevention program and services.
- More holistic, systemic, and coordinated approach to service delivery.
- More deep and intentional collaborations to transform the delivery system.
- Transitional housing is a great program that needs refunded and expanded.
- Lack of access for people who may find themselves in a financial slump who don't qualify for assistance programs.
- People not working within these systems are not aware of this as far as collaboration and cross communication.
- There is always a need for more coordination of services, whether that's programming or understanding as to why things work the way they do.
- A website is needed that is easy to go to that tells you all the services and resources available in the area and how to apply for them.
- Holistic approach where every aspect of the circumstance is acknowledged. For instance, is it someone who needs help often or just once? Are chronic needs something that should be addressed and how can education as to how to improve circumstances.



The survey of community stakeholders asked what is most needed to improve Re-Entry Services Following Incarceration:

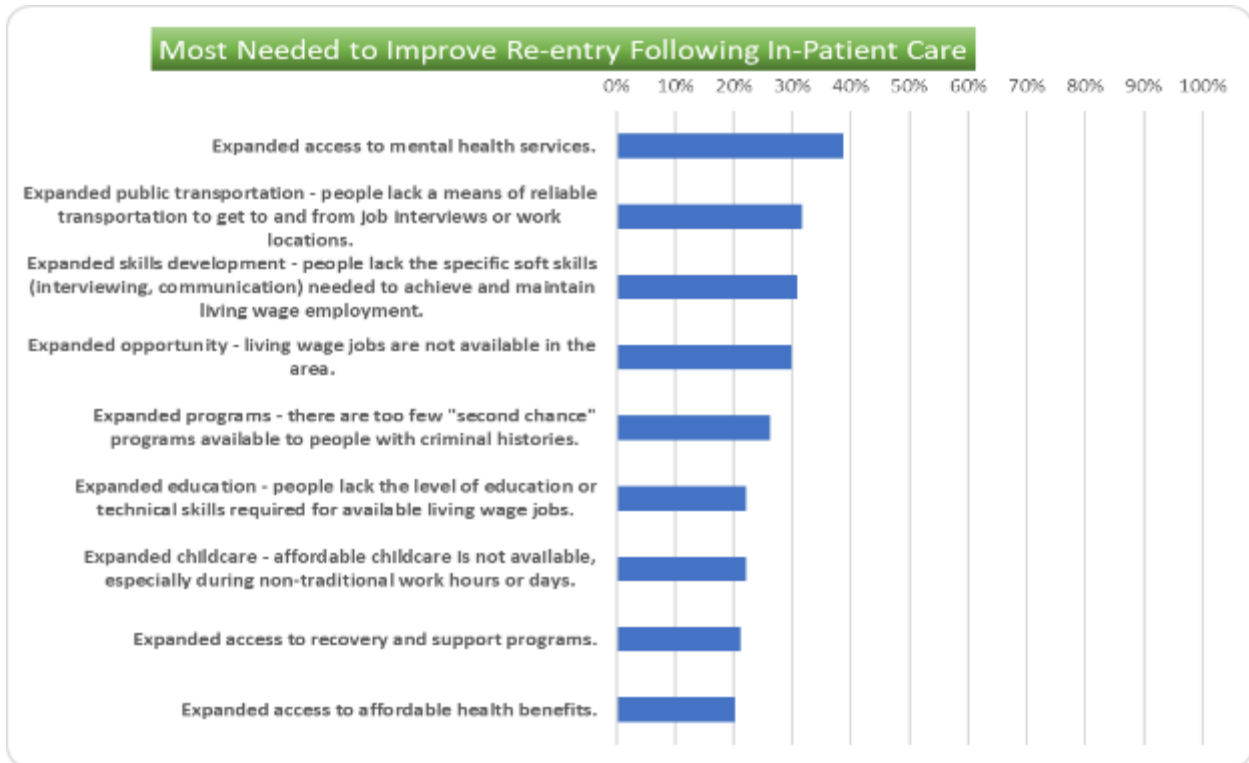


\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 57](#).



38% report a need for expanded skill development, 37% believe there is a need for expanded public transportation, 35% believe there is a need for expanded opportunity for living wage jobs, 35% believe there should be expanded programs for people with criminal histories, and 33% believe expanded education programs are needed.

The survey of community stakeholders also asked what is most needed to improve Re-Entry Services Following In-Patient Care:



\*Choices selected by 20% or more respondents listed here. For the full chart, see [page 59](#).

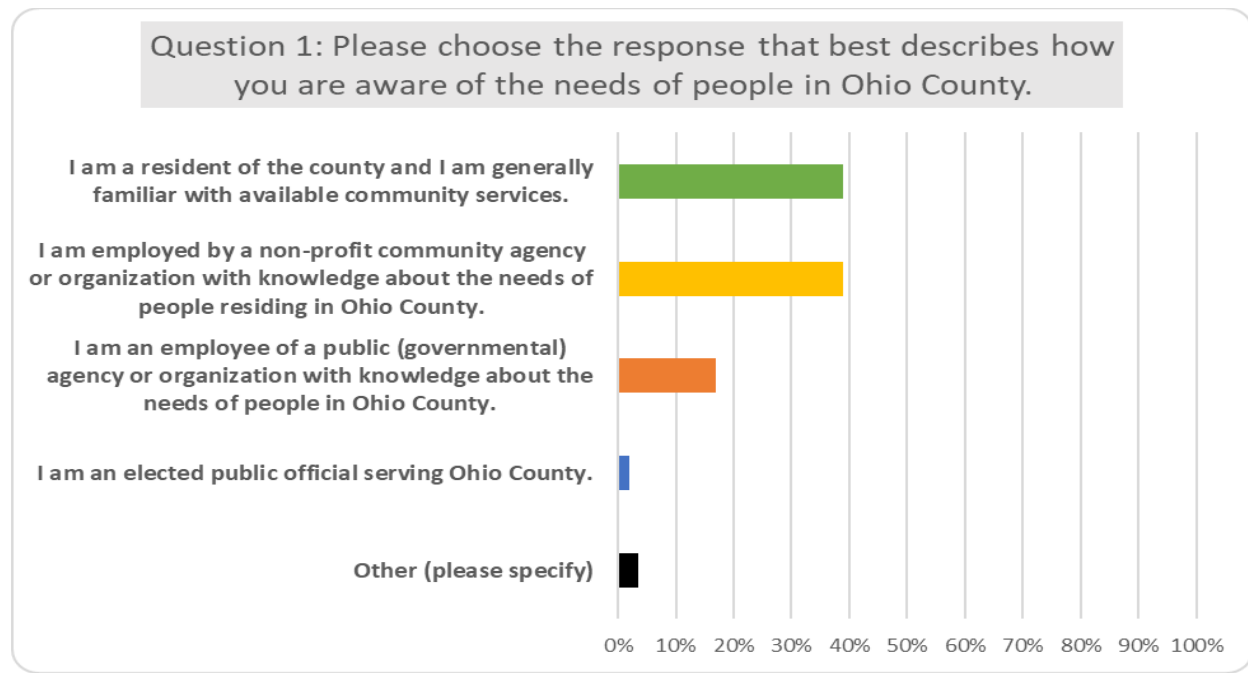
39% believe expanded access to mental health services is needed, 32% support expanded public transportation, 31% support expanded skill development, and 30% support expanded opportunity for living wage jobs.

# Appendix A: Survey Results Raw Data

## Community Stakeholder Survey Results

Community needs in the areas of health/mental health, childhood education/youth programs, and financial stability were assessed via an online survey of community stakeholders. The survey was conducted over a four-month period between November 2020 and January 2021. There were 319 stakeholder respondents.

### Demographics

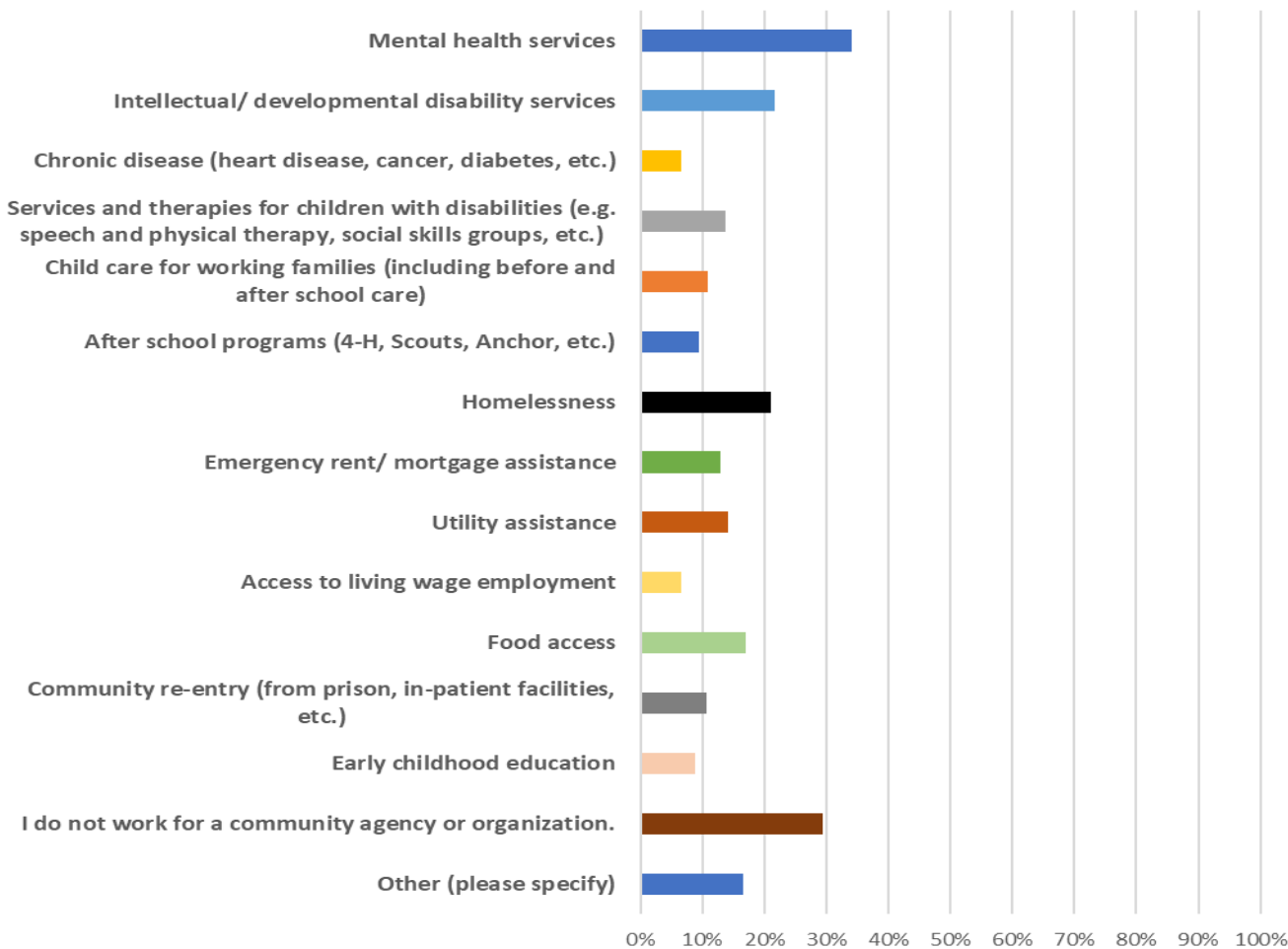


ANSWER CHOICES	RESPONSES
I am a resident of the county and I am generally familiar with available community services.	38.87% 124
I am employed by a non-profit community agency or organization with knowledge about the needs of people residing in Ohio County.	38.87% 124
I am an employee of a public (governmental) agency or organization with knowledge about the needs of people in Ohio County.	16.93% 54
I am an elected public official serving Ohio County.	1.88% 6
Other (please specify)	Responses 3.45% 11
<b>TOTAL</b>	<b>319</b>

Specified Verbatim Responses for "Other:"
Government official outside of Ohio County
I work for a bank (major employer for the upper Ohio Valley)
I am a resident of Ohio County. I know of some places in our county that give assistance for community services/needs. Usually hear of them through social media and word of mouth from someone who have experienced help from the place(s).

I grew up in Ohio County and am a volunteer with Ohio County 4-H
I am both an employee of a non-profit, and committee or board member of organizations that help the Northern Panhandle
I just know people that need assist. Even watching the news local people needing help
I am retired now. I just moved back here a year and a half ago and am not very familiar with this areas needs.
I work in advertising and help non-profits
I am a nonprofit of 2 food pantry and know ledgethe need of people in OHIO
Employee in Community Mental Health center
Board member of several community services

Question 2: If you work for a community agency or organization that provides services to children and/or families, which of the following service areas does your agency or organization address in Ohio County? Check all that apply.

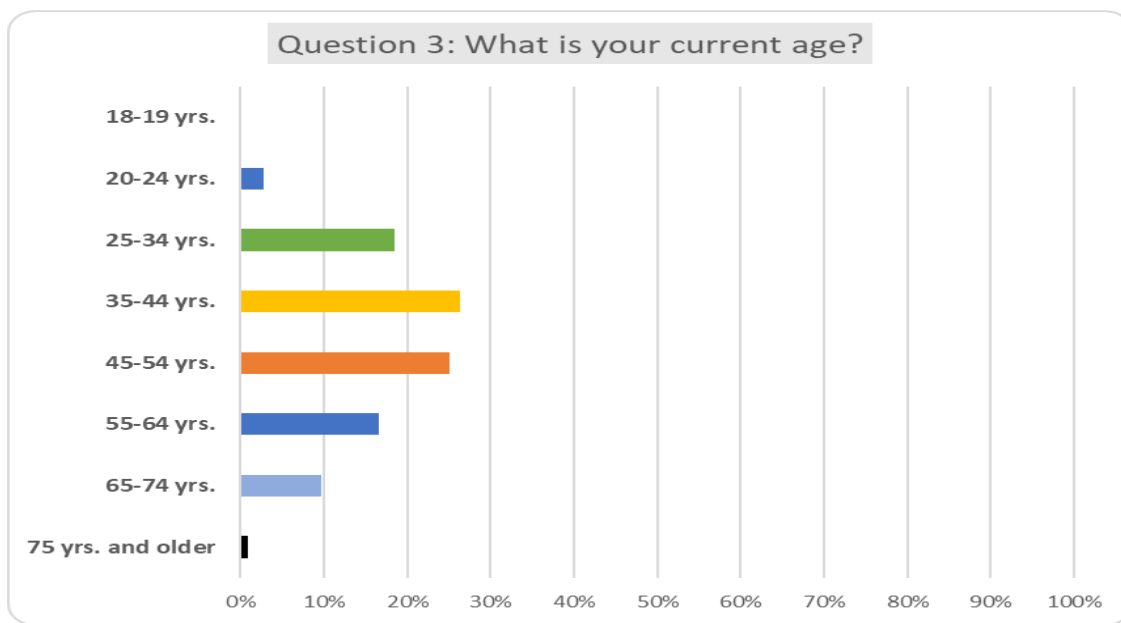


ANSWER CHOICES	RESPONSES
▼ Mental health services	34.17% 109
▼ Intellectual/ developmental disability services	21.63% 69
▼ Chronic disease (heart disease, cancer, diabetes, etc.)	6.58% 21
▼ Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)	13.79% 44
▼ Child care for working families (including before and after school care)	10.97% 35
▼ After school programs (4-H, Scouts, Anchor, etc.)	9.40% 30
▼ Homelessness	21.00% 67
▼ Emergency rent/ mortgage assistance	12.85% 41
▼ Utility assistance	14.11% 45
▼ Access to living wage employment	6.58% 21
▼ Food access	16.93% 54
▼ Community re-entry (from prison, in-patient facilities, etc.)	10.66% 34
▼ Early childhood education	8.78% 28
▼ I do not work for a community agency or organization.	29.47% 94
▼ Other (please specify)	Responses 16.61% 53

Total Respondents: 319

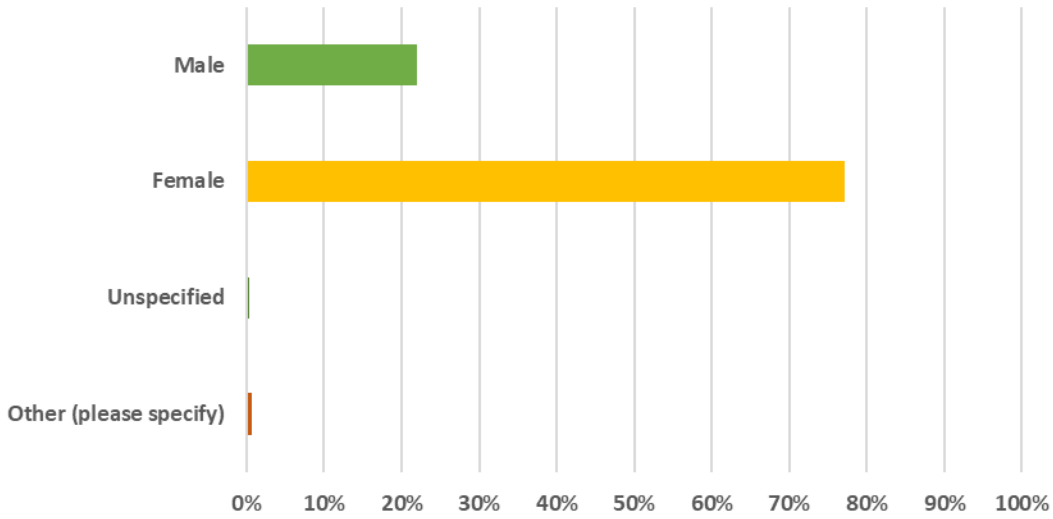
Specified Verbatim Responses for “Other”	
	Child Advocate
Mitigating the impact of high ACE scores through community building, creative opportunities, and entrepreneurship.	emergency shelter for women/transitional living for youth
Women in addiction	Ohio County Schools
Addiction	Local Government
Financial institution	Blind and visually impaired services
prevention	Healthcare Provider Education
NCOA for American Job Center	Government
Public parks and other agencies	Child Welfare Services
Advocacy	Nutrition
Disaster Response, Blood Services, Lifesaving training, Services to Armed Forces	grant maker
Work for non-profit	TRANSPORTATION
As a local attorney, I sometime represent people with mental illnesses &/or their families.	we do many things, it depends on the needs of the community at the time
Family Planning Services	foster care
Transportation	Special education teacher.
secondary education teacher	High School Education
Education	DOMESTIC Violence
advocacy	K-12 Education
Shelter, emergency housing, food, therapy, re-entry...	Victim Advocate in Prosecutors Office
Early Care and Education	Domestic Violence Victims

We provide civil law assistance for low income folks that includes eviction assistance, SS representation, representation for DVPO's, guardianship, kinship, custody, child support, visitation, divorce. We provide services for driver's license issues as well as expungements. We attempt to help folks overcome barriers to employment. We also offer assistance with education matters for kids - IEP's for instance.	I am on the Board of Directors for NAMI and Greater Wheeling Homeless Coalition
Shelter	Domestic Violence
None	None
Youth Athletics for disabled and abled.	Behavioral health
Education	Recreation
Foster Care Agency	Health insurance
Crisis Stabilization Services	Women's Health and Family Planning
Low income health care	FRN



ANSWER CHOICES	RESPONSES
18-19 yrs.	0.00% 0
20-24 yrs.	2.82% 9
25-34 yrs.	18.50% 59
35-44 yrs.	26.33% 84
45-54 yrs.	25.08% 80
55-64 yrs.	16.61% 53
65-74 yrs.	9.72% 31
75 yrs. and older	0.94% 3
<b>TOTAL</b>	<b>319</b>

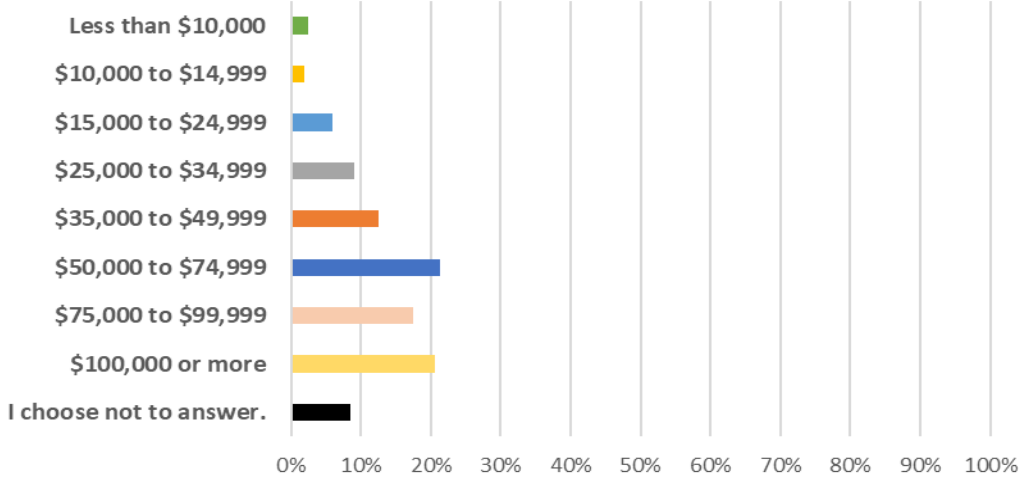
Question 4: What is your gender?



ANSWER CHOICES	RESPONSES	
Male	21.94%	70
Female	77.12%	246
Unspecified	0.31%	1
Other (please specify)	Responses 0.63%	2
<b>TOTAL</b>		<b>319</b>

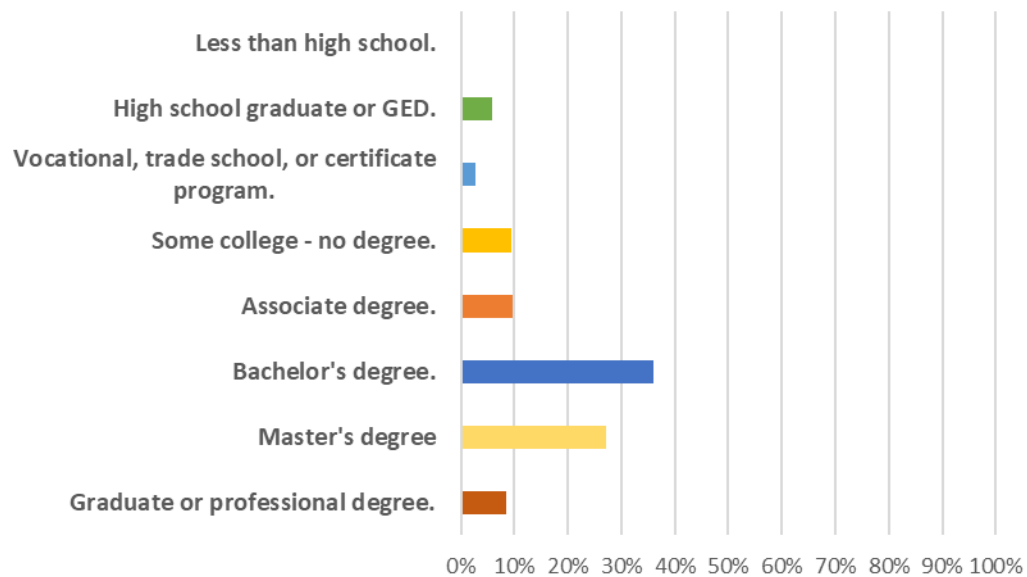
Specified Verbatim Responses for "Other"
none of your business
transgender

Question 5: What is your approximate average household income?



ANSWER CHOICES	RESPONSES	
Less than \$10,000	2.51%	8
\$10,000 to \$14,999	1.88%	6
\$15,000 to \$24,999	5.96%	19
\$25,000 to \$34,999	9.09%	29
\$35,000 to \$49,999	12.54%	40
\$50,000 to \$74,999	21.32%	68
\$75,000 to \$99,999	17.55%	56
\$100,000 or more	20.69%	66
I choose not to answer.	8.46%	27
<b>TOTAL</b>		<b>319</b>

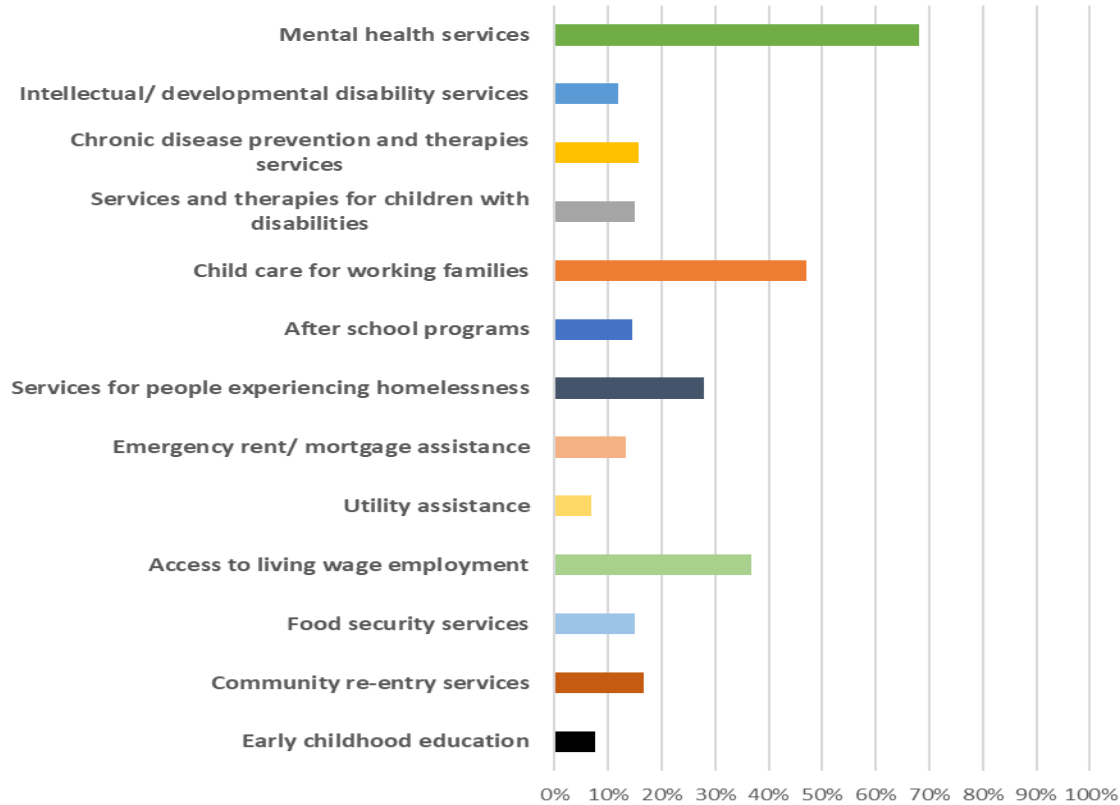
Question 6: What is the highest level of education you have completed?



ANSWER CHOICES	RESPONSES	
Less than high school.	0.31%	1
High school graduate or GED.	5.96%	19
Vocational, trade school, or certificate program.	2.82%	9
Some college - no degree.	9.40%	30
Associate degree.	9.72%	31
Bachelor's degree.	36.05%	115
Master's degree	27.27%	87
Graduate or professional degree.	8.46%	27
<b>TOTAL</b>		<b>319</b>

## Greatest Needs and Strengths

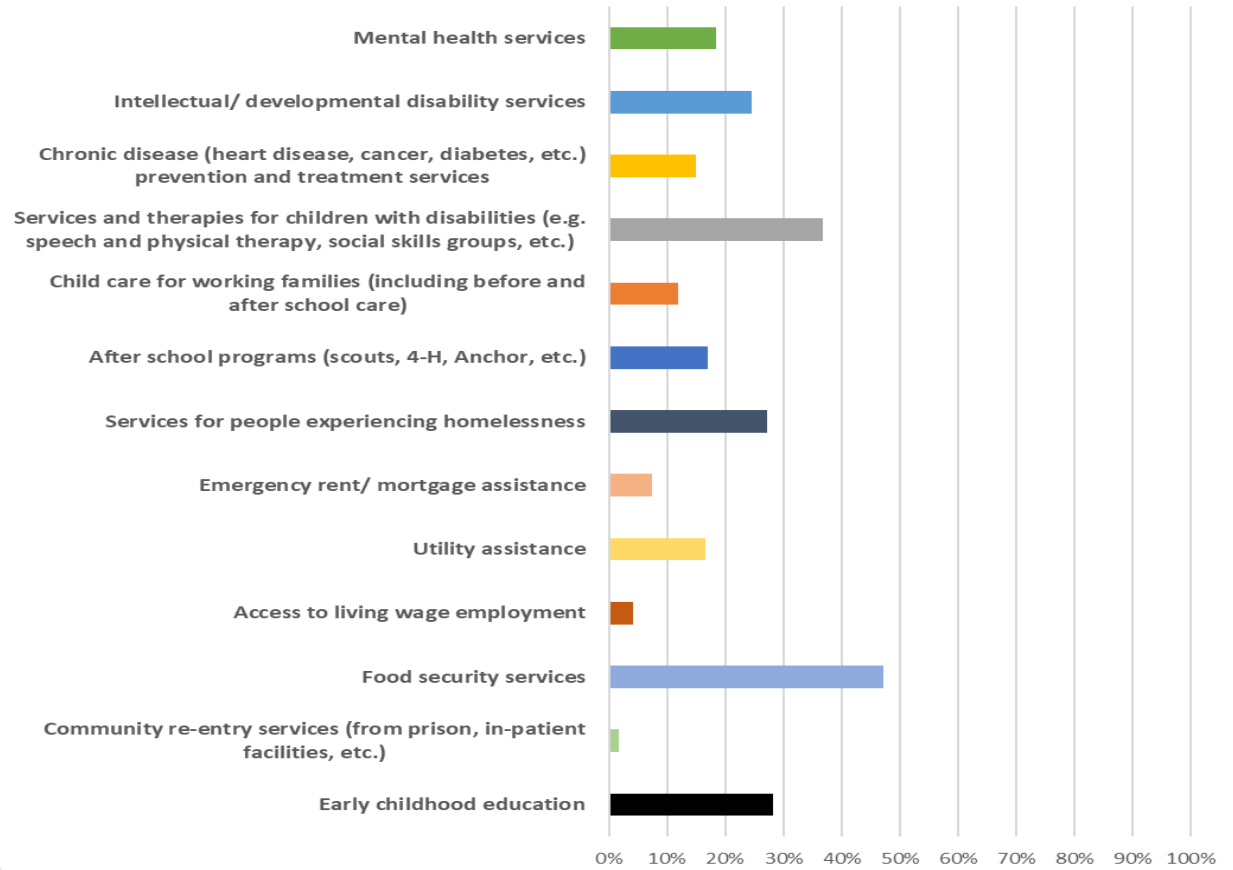
Question 7: Out of the following areas, what do you think are the top three areas of need of children and families living in Ohio County? Select up to 3 areas of need.



ANSWER CHOICES	RESPONSES
▼ Mental health services	68.03% 200
▼ Intellectual/ developmental disability services	11.90% 35
▼ Chronic disease (heart disease, cancer, diabetes, etc.) prevention and treatment services	15.65% 46
▼ Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)	14.97% 44
▼ Child care for working families (including before and after school care)	46.94% 138
▼ After school programs (scouts, 4-H, Anchor, etc.)	14.63% 43
▼ Services for people experiencing homelessness	27.89% 82
▼ Emergency rent/ mortgage assistance	13.27% 39
▼ Utility assistance	6.80% 20
▼ Access to living wage employment	36.73% 108
▼ Food security services	14.97% 44
▼ Community re-entry services (from prison, in-patient facilities, etc.)	16.67% 49
▼ Early childhood education	7.48% 22
<b>Total Respondents: 294</b>	



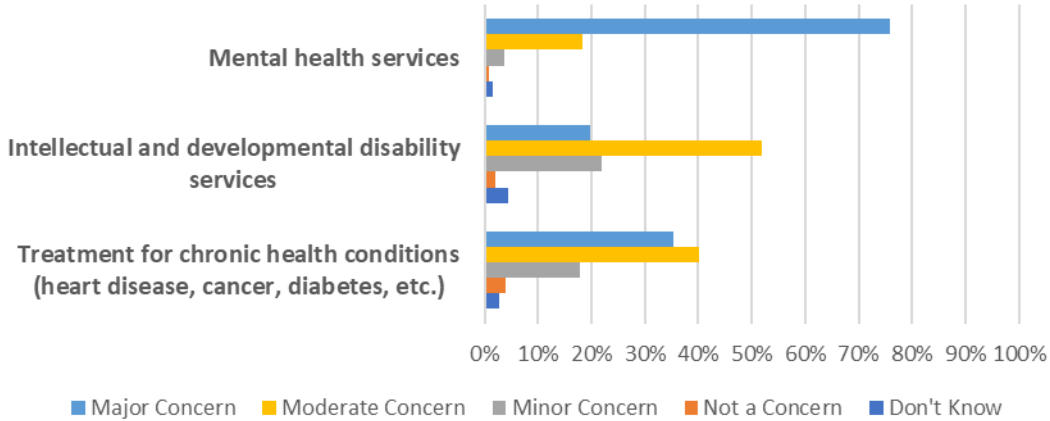
Question 8: Out of the following areas, what do you consider to be the greatest strengths within the services system in Ohio County?  
Select up to 3 strengths.



ANSWER CHOICES	RESPONSES
▼ Mental health services	18.37% 54
▼ Intellectual/ developmental disability services	24.49% 72
▼ Chronic disease (heart disease, cancer, diabetes, etc.) prevention and treatment services	14.97% 44
▼ Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)	36.73% 108
▼ Child care for working families (including before and after school care)	11.90% 35
▼ After school programs (scouts, 4-H, Anchor, etc.)	17.01% 50
▼ Services for people experiencing homelessness	27.21% 80
▼ Emergency rent/ mortgage assistance	7.48% 22
▼ Utility assistance	16.67% 49
▼ Access to living wage employment	4.08% 12
▼ Food security services	47.28% 139
▼ Community re-entry services (from prison, in-patient facilities, etc.)	1.70% 5
▼ Early childhood education	28.23% 83
<b>Total Respondents: 294</b>	

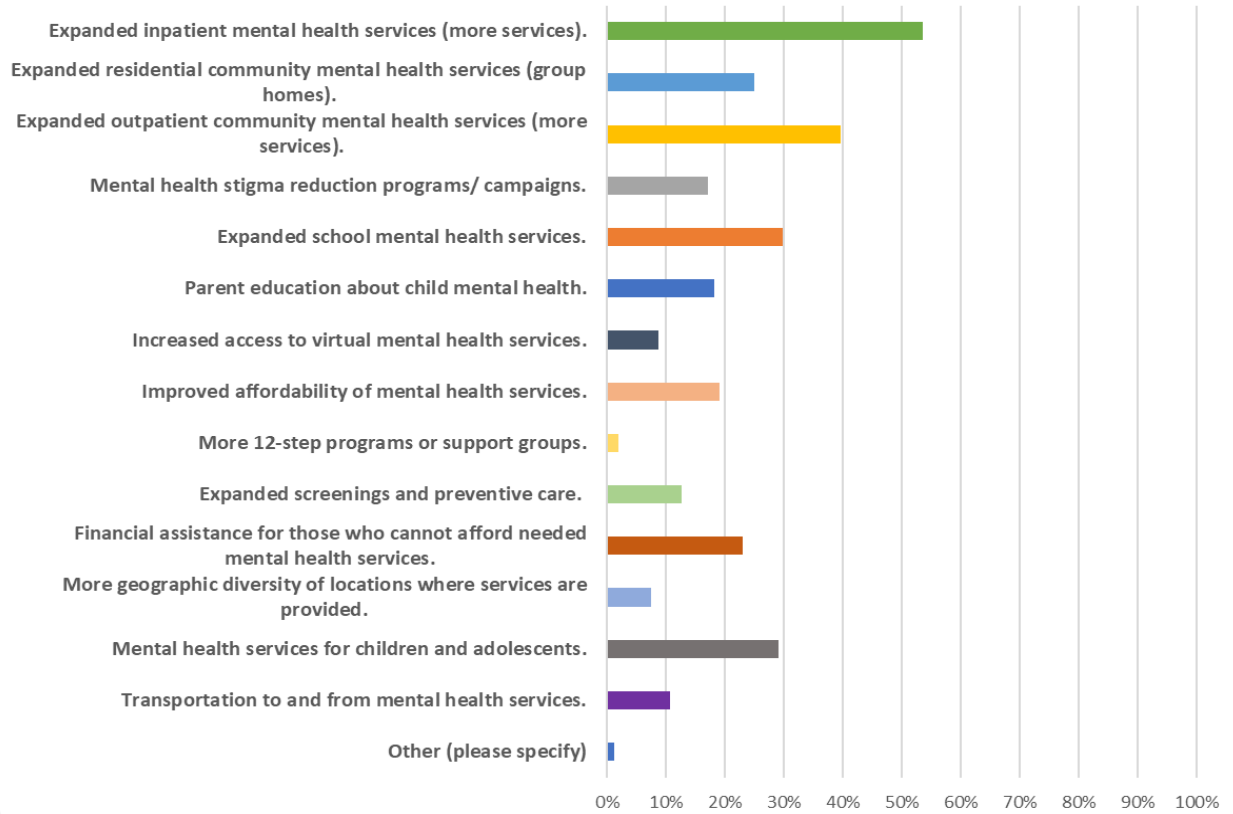
## Health/Mental Health

Question 9: Thinking about your personal experience and knowledge about the area, please tell whether each of the items listed below is currently a major concern, a moderate concern, a minor concern or not a concern in Ohio County.



	MAJOR CONCERN	MODERATE CONCERN	MINOR CONCERN	NOT A CONCERN	DON'T KNOW	TOTAL	WEIGHTED AVERAGE
▼ Mental health services	75.79% 191	18.25% 46	3.57% 9	0.79% 2	1.59% 4	252	1.34
▼ Intellectual and developmental disability services	19.84% 50	51.98% 131	21.83% 55	1.98% 5	4.37% 11	252	2.19
▼ Treatment for chronic health conditions (heart disease, cancer, diabetes, etc.)	35.32% 89	40.08% 101	17.86% 45	3.97% 10	2.78% 7	252	1.99

Question 10: Thinking about your personal experience and knowledge of the area, select the three (3) things that are most needed in order to improve mental health services in Ohio County.



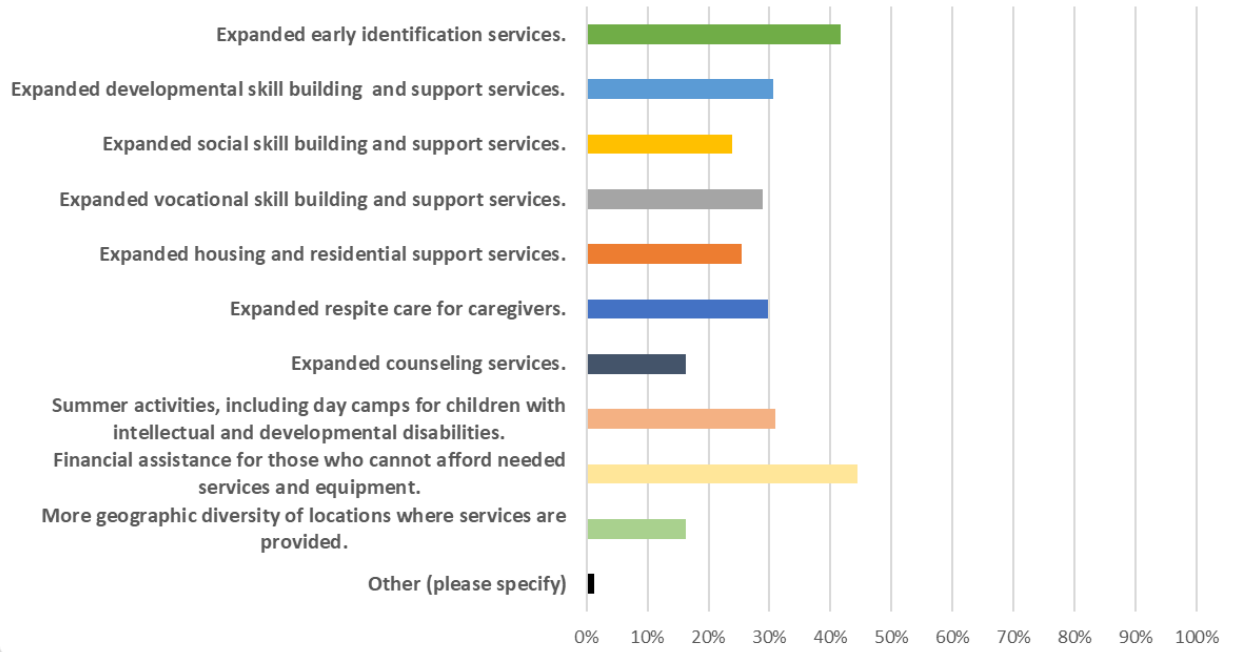
ANSWER CHOICES	RESPONSES
Expanded inpatient mental health services (more services).	53.57% 135
Expanded residential community mental health services (group homes).	25.00% 63
Expanded outpatient community mental health services (more services).	39.68% 100
Mental health stigma reduction programs/ campaigns.	17.06% 43
Expanded school mental health services.	29.76% 75
Parent education about child mental health.	18.25% 46
Increased access to virtual mental health services.	8.73% 22
Improved affordability of mental health services.	19.05% 48
More 12-step programs or support groups.	1.98% 5
Expanded screenings and preventive care.	12.70% 32
Financial assistance for those who cannot afford needed mental health services.	23.02% 58
More geographic diversity of locations where services are provided.	7.54% 19
Mental health services for children and adolescents.	28.97% 73
Transportation to and from mental health services.	10.71% 27
Other (please specify)	Responses 1.19% 3
<b>Total Respondents: 252</b>	

**Specified Verbatim Responses for “Other”**

Don't know

More competitive pay for healthcare workers in mental health facilities.  
workforce

Question 11: Thinking about your personal experience and knowledge of the area, select the three (3) things that are most needed in order to improve intellectual and developmental disability services in Ohio County.



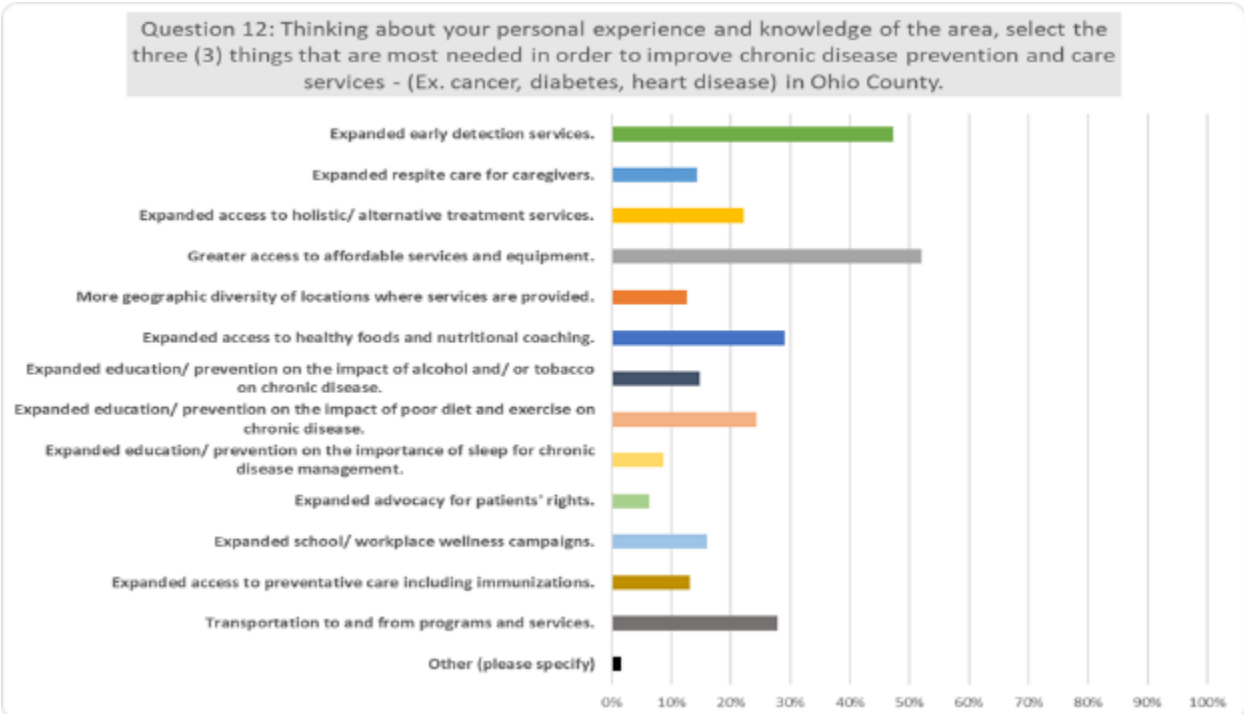
ANSWER CHOICES	RESPONSES
Expanded early identification services.	41.67% 105
Expanded developmental skill building and support services.	30.56% 77
Expanded social skill building and support services.	23.81% 60
Expanded vocational skill building and support services.	28.97% 73
Expanded housing and residential support services.	25.40% 64
Expanded respite care for caregivers.	29.76% 75
Expanded counseling services.	16.27% 41
Summer activities, including day camps for children with intellectual and developmental disabilities.	30.95% 78
Financial assistance for those who cannot afford needed services and equipment.	44.44% 112
More geographic diversity of locations where services are provided.	16.27% 41
Other (please specify)	Responses 1.19% 3
<b>Total Respondents: 252</b>	

**Specified Verbatim Responses for “Other”**

Don't know

Expand the number of skilled psychiatric professionals

workforce



ANSWER CHOICES	RESPONSES
Expanded early detection services.	47.22% 119
Expanded respite care for caregivers.	14.29% 36
Expanded access to holistic/ alternative treatment services.	22.22% 56
Greater access to affordable services and equipment.	51.98% 131
More geographic diversity of locations where services are provided.	12.70% 32
Expanded access to healthy foods and nutritional coaching.	28.97% 73
Expanded education/ prevention on the impact of alcohol and/ or tobacco on chronic disease.	14.68% 37
Expanded education/ prevention on the impact of poor diet and exercise on chronic disease.	24.21% 61
Expanded education/ prevention on the importance of sleep for chronic disease management.	8.73% 22
Expanded advocacy for patients' rights.	6.35% 16
Expanded school/ workplace wellness campaigns.	15.87% 40
Expanded access to preventative care including immunizations.	13.10% 33
Transportation to and from programs and services.	27.78% 70
Other (please specify)	Responses 1.59% 4

Total Respondents: 252

### Specified Verbatim Responses for “Other”

Don't know

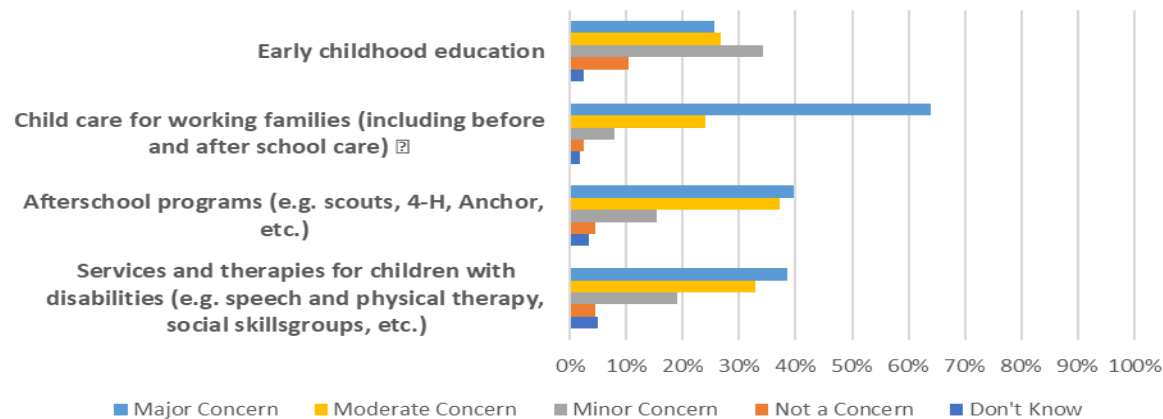
All of the above

Better mental health and stress management will lead to less obesity, less alcoholism, and less smoking. Education needs to include info on how these health issues are rooted in stress and dysfunction.

sustained relationships with experienced practitioners

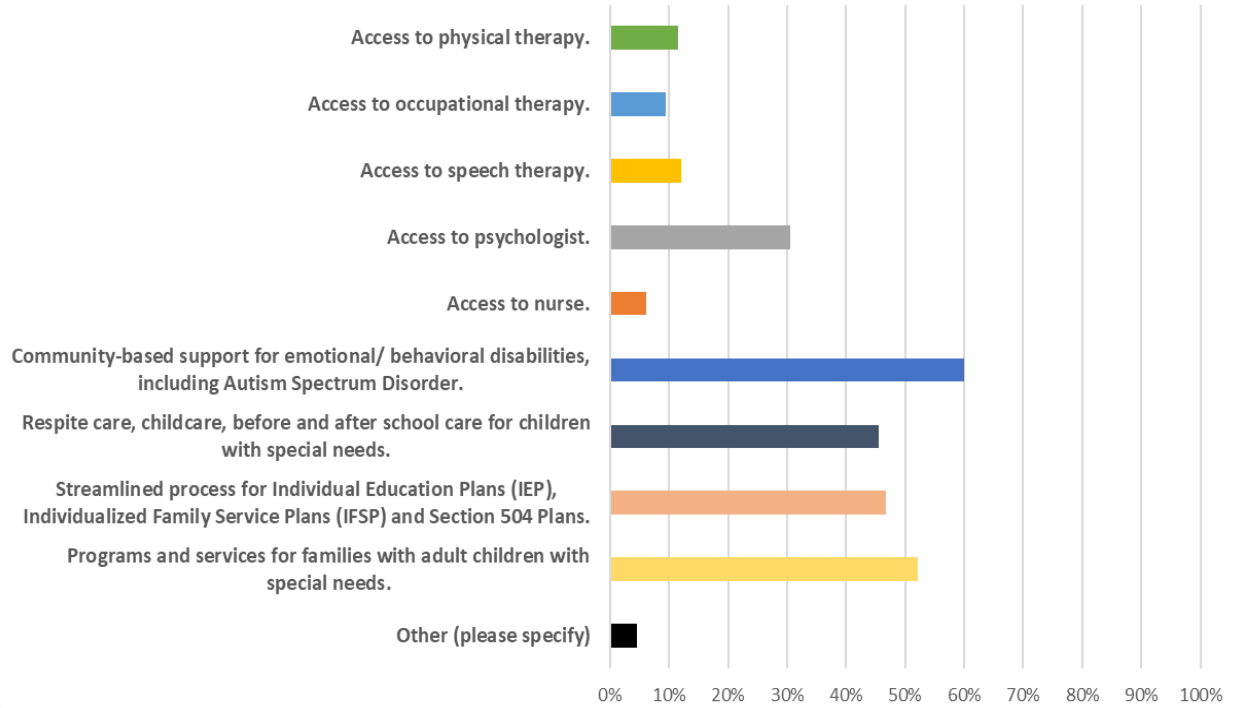
### Childhood Education/Youth Programs

Question 13: Thinking about your personal experience and knowledge about the area, please tell whether each of the items listed below is currently a major concern, a moderate concern, a minor concern or not a concern in Ohio County.



	MAJOR CONCERN	MODERATE CONCERN	MINOR CONCERN	NOT A CONCERN	DON'T KNOW	TOTAL	WEIGHTED AVERAGE
Early childhood education	25.52% 61	26.78% 64	34.73% 83	10.46% 25	2.51% 6	239	2.38
Child care for working families (including before and after school care)	64.06% 155	23.97% 58	7.85% 19	2.48% 6	1.65% 4	242	1.54
Afterschool programs (e.g. scouts, 4-H, Anchor, etc.)	39.67% 96	37.19% 90	15.29% 37	4.55% 11	3.31% 8	242	1.95
Services and therapies for children with disabilities (e.g. speech and physical therapy, social skillsgroups, etc.)	38.59% 93	32.78% 79	19.09% 46	4.56% 11	4.98% 12	241	2.05

Question 14: Thinking about your personal experience and knowledge about the area, select the three (3) things you believe are most needed in order to improve services and therapies for children with disabilities (e.g. speech and physical therapy, social



ANSWER CHOICES	RESPONSES
Access to physical therapy.	11.57% 28
Access to occupational therapy.	9.50% 23
Access to speech therapy.	11.98% 29
Access to psychologist.	30.58% 74
Access to nurse.	6.20% 15
Community-based support for emotional/ behavioral disabilities, including Autism Spectrum Disorder.	59.92% 145
Respite care, childcare, before and after school care for children with special needs.	45.45% 110
Streamlined process for Individual Education Plans (IEP), Individualized Family Service Plans (IFSP) and Section 504 Plans.	46.69% 113
Programs and services for families with adult children with special needs.	52.07% 126
Other (please specify)	Responses 4.55% 11
<b>Total Respondents: 242</b>	

**Specified Verbatim Responses for “Other”**

Advocacy groups to support families in decision making for their children or family members with special needs.

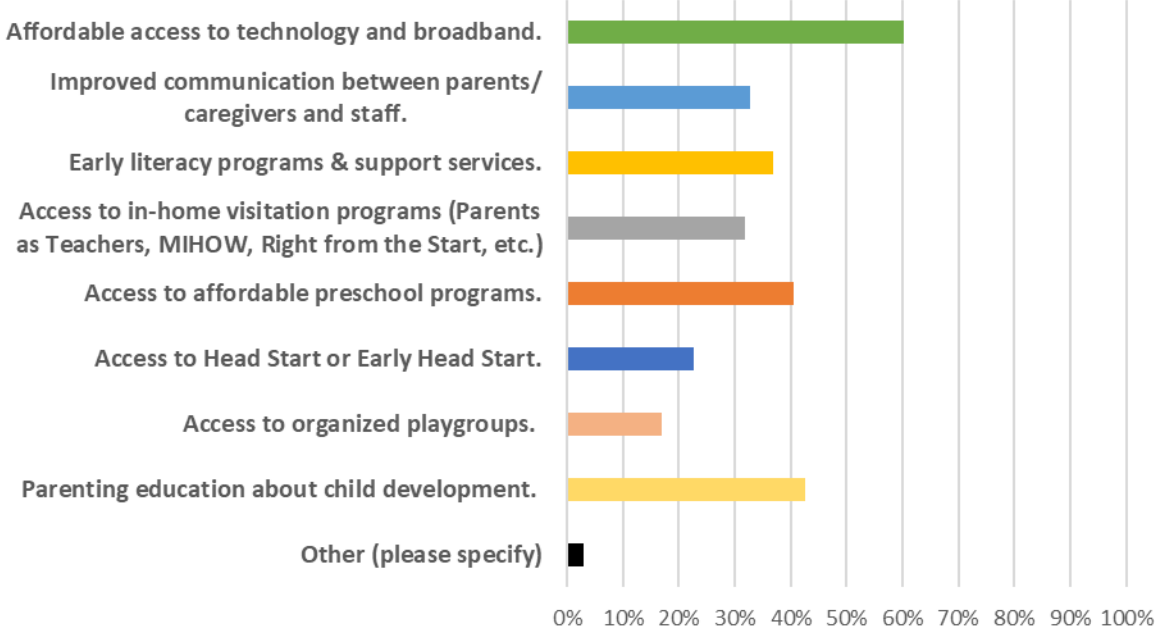
don't know

Na

I'm not sure of the services offered

better access to supplemental insurance to cover the copays, deductibles, and items not covered by private health insurance or when health insurance is maxed out.
Don't know
Services for individuals with dual diagnosis of IDD and Mental Illness
We don't see kids.
I don't know
Don't know
access to all above therapists

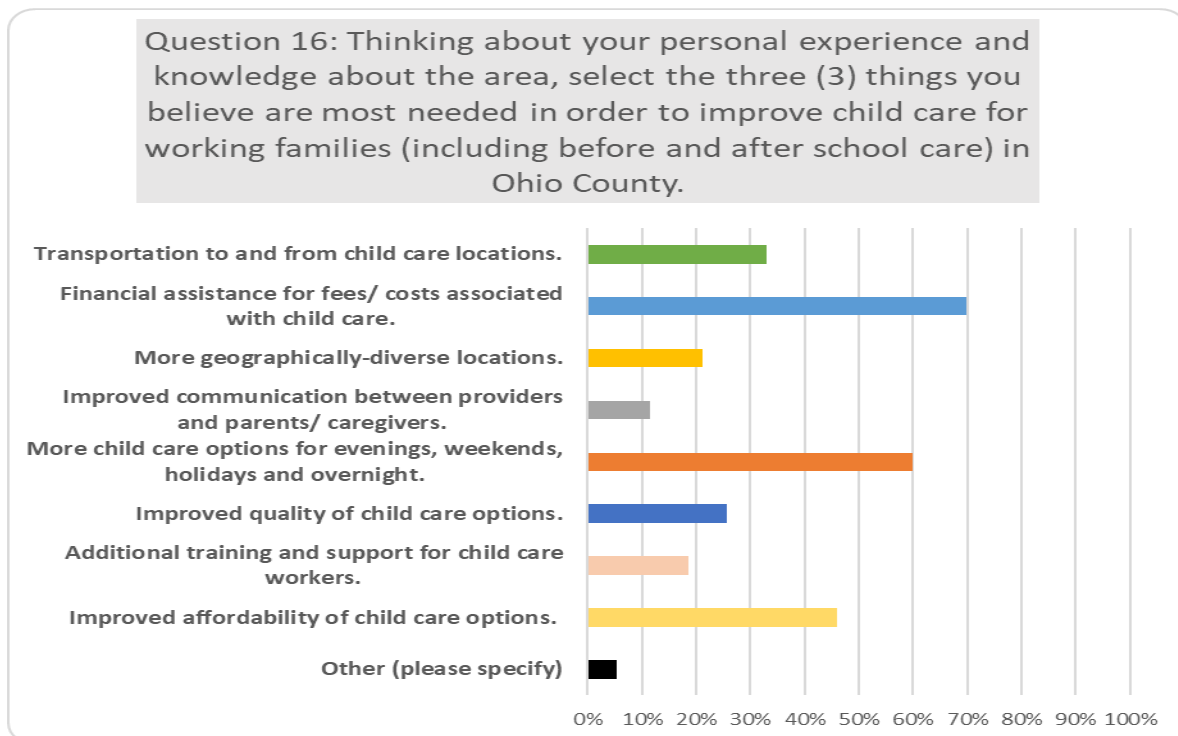
Question 15: Thinking about your personal experience and knowledge about the area, select the three (3) things you believe are most needed in order to improve early childhood education in Ohio County.



ANSWER CHOICES	RESPONSES
▼ Affordable access to technology and broadband.	60.33% 146
▼ Improved communication between parents/ caregivers and staff.	32.64% 79
▼ Early literacy programs & support services.	36.78% 89
▼ Access to in-home visitation programs (Parents as Teachers, MIHOW, Right from the Start, etc.)	31.82% 77
▼ Access to affordable preschool programs.	40.50% 98
▼ Access to Head Start or Early Head Start.	22.73% 55
▼ Access to organized playgroups.	16.94% 41
▼ Parenting education about child development.	42.56% 103
▼ Other (please specify)	Responses 2.89% 7
<b>Total Respondents: 242</b>	

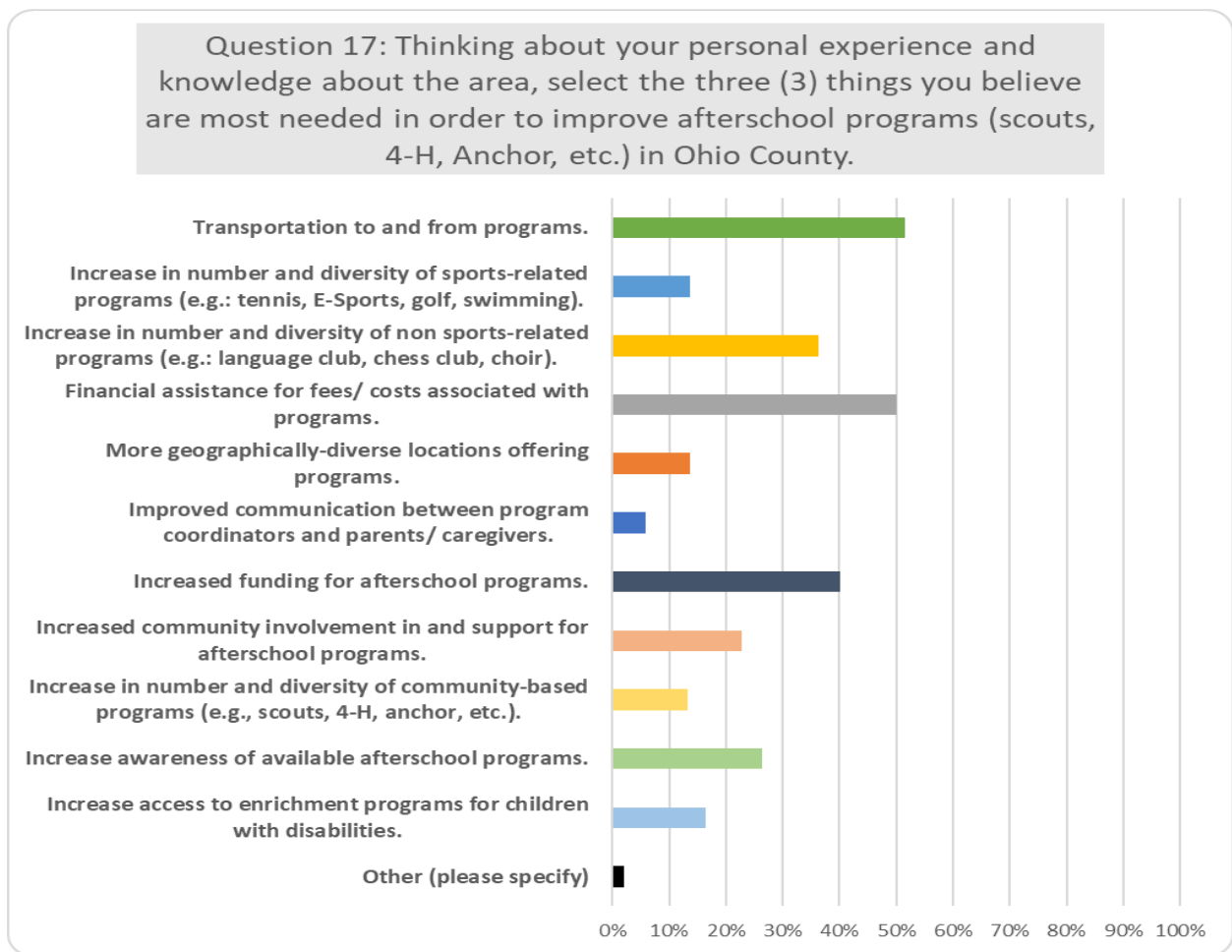


Specified Verbatim Responses for “Other”
Quality affordable care
Na
Ohio county schools should be evaluating all children, not just children they “assume” need services. And they should do evaluations as required by law, not just ones they “feel” need evaluations. They should follow policy so many children aren’t falling through the cracks.
More available services- not enough services to provide for the need
Not familiar since we don't see kids.
Community support for those who wish to be full time moms. Kick the stigma. Value the contributions of full time moms in child development.
don't know.



ANSWER CHOICES	RESPONSES
Transportation to and from child care locations.	33.06% 80
Financial assistance for fees/ costs associated with child care.	69.83% 169
More geographically-diverse locations.	21.07% 51
Improved communication between providers and parents/ caregivers.	11.57% 28
More child care options for evenings, weekends, holidays and overnight.	59.92% 145
Improved quality of child care options.	25.62% 62
Additional training and support for child care workers.	18.60% 45
Improved affordability of child care options.	45.87% 111
Other (please specify)	Responses 5.37% 13
<b>Total Respondents: 242</b>	

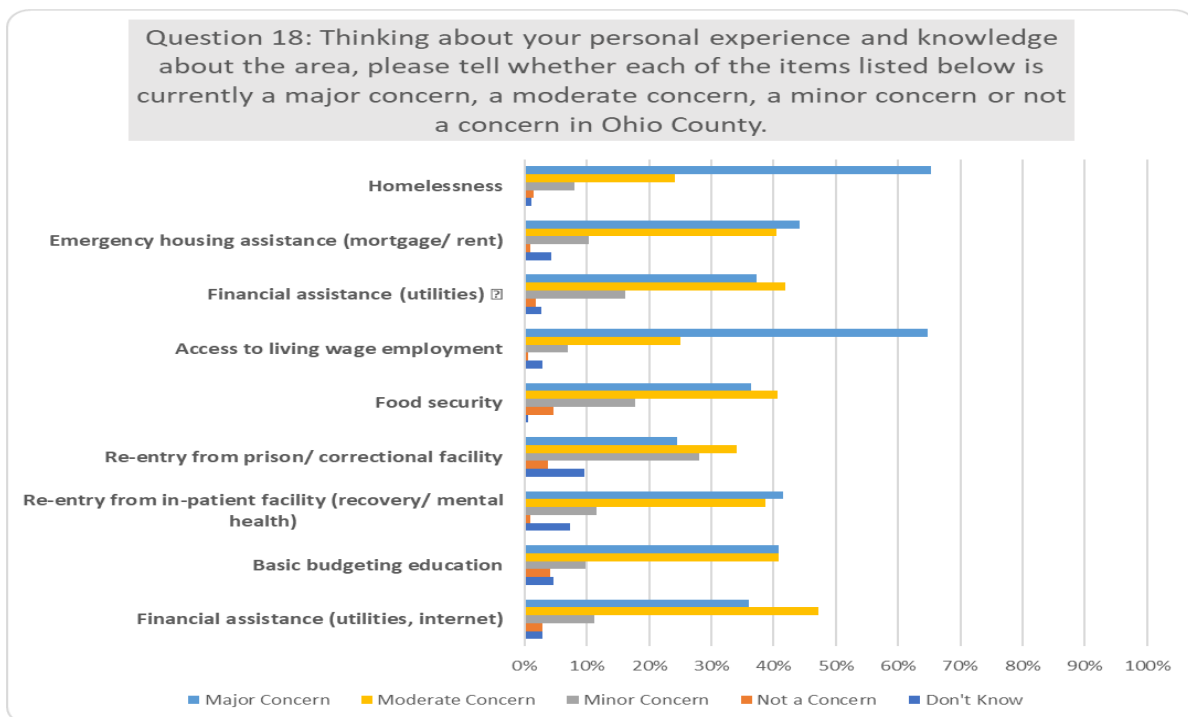
Specified Verbatim Responses for “Other”
More sites for elementary aged students due to school closure--urgent and short-term
Very little care available for school-aged children.
Na
We can't forget the working poor and those in private schools. Families in Catholic schools are often not given a community based before or after school option - only the one the school provides if any.
More subsidies for childcare for families and more wage subsidies and ongoing education for childcare workers.
More child care options during the work week
More locations
grants for child care provider supplies to help with the at home schooling
24/7 childcare for shift working parents
Improved wages and benefits for child care workers
More childcare centers and in home providers
Increase pay for child Care workers
We don't see kids



ANSWER CHOICES	RESPONSES
Transportation to and from programs.	51.65% 125
Increase in number and diversity of sports-related programs (e.g.: tennis, E-Sports, golf, swimming).	13.64% 33
Increase in number and diversity of non sports-related programs (e.g.: language club, chess club, choir).	36.36% 88
Financial assistance for fees/ costs associated with programs.	50.00% 121
More geographically-diverse locations offering programs.	13.64% 33
Improved communication between program coordinators and parents/ caregivers.	5.79% 14
Increased funding for afterschool programs.	40.08% 97
Increased community involvement in and support for afterschool programs.	22.73% 55
Increase in number and diversity of community-based programs (e.g., scouts, 4-H, anchor, etc.).	13.22% 32
Increase awareness of available afterschool programs.	26.45% 64
Increase access to enrichment programs for children with disabilities.	16.53% 40
Other (please specify)	Responses 2.07% 5
Total Respondents: 242	

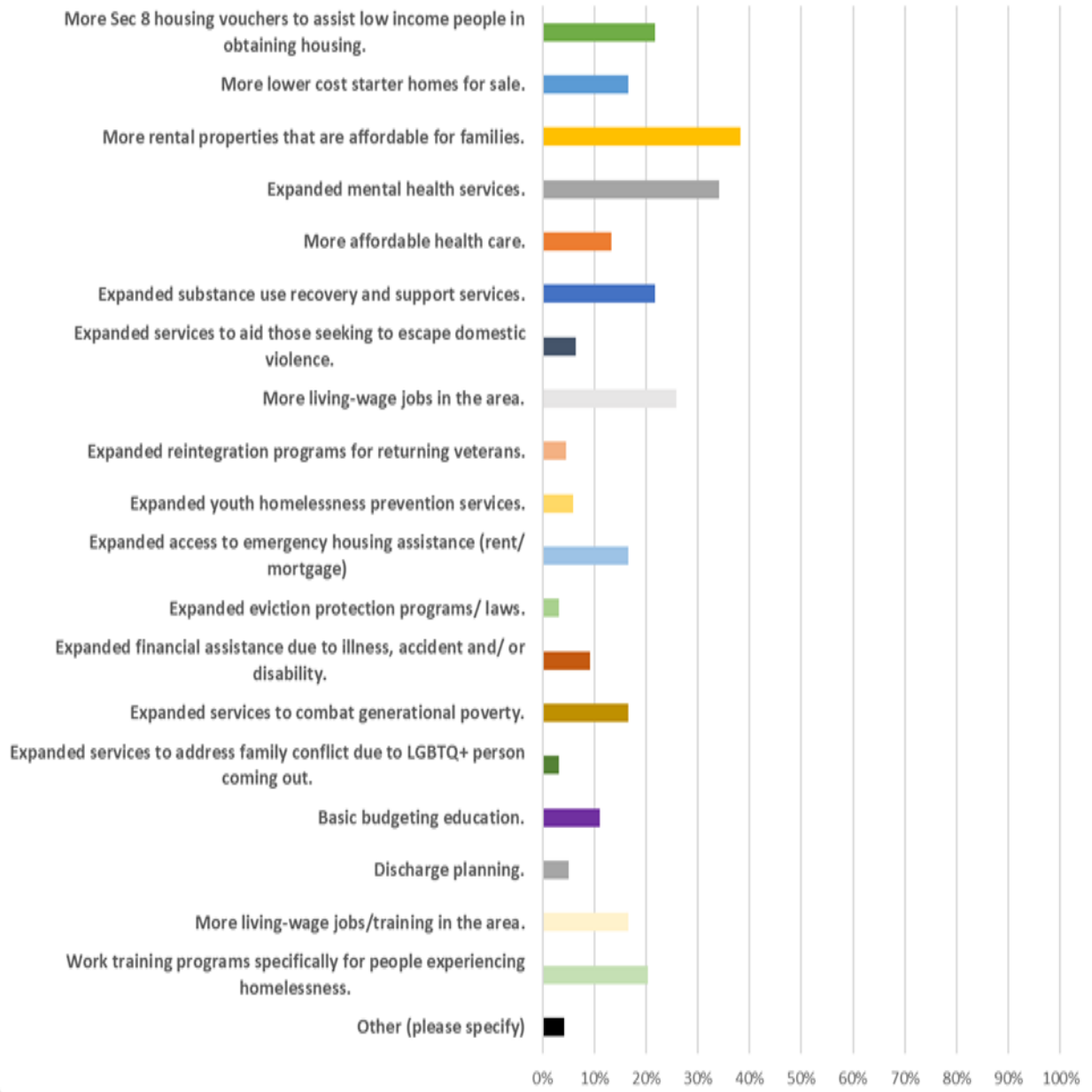
Specified Verbatim Responses for “Other”
Increased educational support for literacy. Too many children fail to meet the 4th grade benchmark for reading. This problem has persisted for years, with little or no improvement.
Interest from the child in a program. volunteers to run a program.
Na
We don’t see kids
don’t know.

## Financial Stability



	MAJOR CONCERN	MODERATE CONCERN	MINOR CONCERN	NOT A CONCERN	DON'T KNOW	TOTAL	WEIGHTED AVERAGE
Homelessness	65.33% 130	24.12% 48	8.04% 16	1.51% 3	1.01% 2	199	1.49
Emergency housing assistance (mortgage/rent)	44.19% 95	40.47% 87	10.23% 22	0.93% 2	4.19% 9	215	1.80
Financial assistance (utilities)	37.33% 81	41.94% 91	16.13% 35	1.84% 4	2.76% 6	217	1.91
Access to living wage employment	64.81% 140	25.00% 54	6.94% 15	0.46% 1	2.78% 6	216	1.51
Food security	36.45% 78	40.65% 87	17.76% 38	4.67% 10	0.47% 1	214	1.92
Re-entry from prison/correctional facility	24.42% 53	34.10% 74	28.11% 61	3.69% 8	9.68% 21	217	2.40
Re-entry from in-patient facility (recovery/mental health)	41.47% 90	38.71% 84	11.52% 25	0.92% 2	7.37% 16	217	1.94
Basic budgeting education	40.74% 88	40.74% 88	9.72% 21	4.17% 9	4.63% 10	216	1.91
Financial assistance (utilities, internet)	35.98% 77	47.20% 101	11.21% 24	2.80% 6	2.80% 6	214	1.89

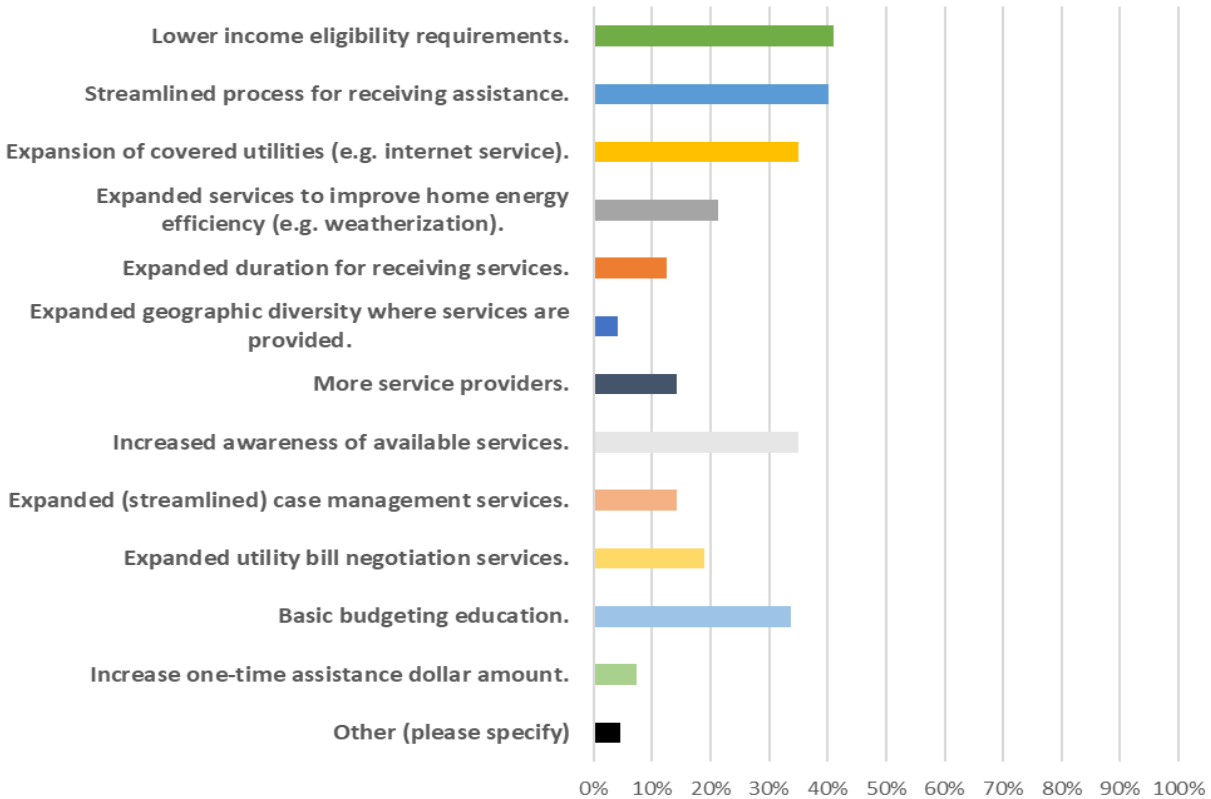
Question 19: Thinking about your personal experience and knowledge of the area, select the three (3) things you believe are most needed in order to improve homeless services in Ohio County.



ANSWER CHOICES	RESPONSES	
▼ More Sec 8 housing vouchers to assist low income people in obtaining housing.	21.66%	47
▼ More lower cost starter homes for sale.	16.59%	36
▼ More rental properties that are affordable for families.	38.25%	83
▼ Expanded mental health services.	34.10%	74
▼ More affordable health care.	13.36%	29
▼ Expanded substance use recovery and support services.	21.66%	47
▼ Expanded services to aid those seeking to escape domestic violence.	6.45%	14
▼ More living-wage jobs in the area.	25.81%	56
▼ Expanded reintegration programs for returning veterans.	4.61%	10
▼ Expanded youth homelessness prevention services.	5.99%	13
▼ Expanded access to emergency housing assistance (rent/ mortgage)	16.59%	36
▼ Expanded eviction protection programs/ laws.	3.23%	7
▼ Expanded financial assistance due to illness, accident and/ or disability.	9.22%	20
▼ Expanded services to combat generational poverty.	16.59%	36
▼ Expanded services to address family conflict due to LGBTQ+ person coming out.	3.23%	7
▼ Basic budgeting education.	11.06%	24
▼ Discharge planning.	5.07%	11
▼ More living-wage jobs/training in the area.	16.59%	36
▼ Work training programs specifically for people experiencing homelessness.	20.28%	44
▼ Other (please specify)	Responses 4.15%	9
<b>Total Respondents: 217</b>		

Specific Verbatim Responses for "Other"
More case management services. Many unsheltered citizens need help with basic assistance, such as obtaining the identification that would allow them to work.
Transition to work programs that would allow an individual to go to work and get established before all government assistance is cut off. such as part of the income is exempted for 6 months to allow the person to save for rent and deposit. Medical assistance is locked in for a year or until health insurance from the employer becomes available.
better agency collaboration determining the "why" and "how" of homelessness in our communities
Assistance with obtaining identification (DL, SS card, etc)
There's too many options to just choose three of these, because pretty much all of them are extremely important. We don't do enough as a community to help the homeless in Ohio County.
Free housing for homeless people. Free.
More transitional housing options. More shelters.
I do not know the best way to help
Funding and services for individuals not eligible for Homeless Coalition services; daytime shelter for homeless individuals

Question 20: Thinking about your personal experience and knowledge of the area, select the three (3) things you believe are most needed in order to improve utility assistance services in Ohio County.

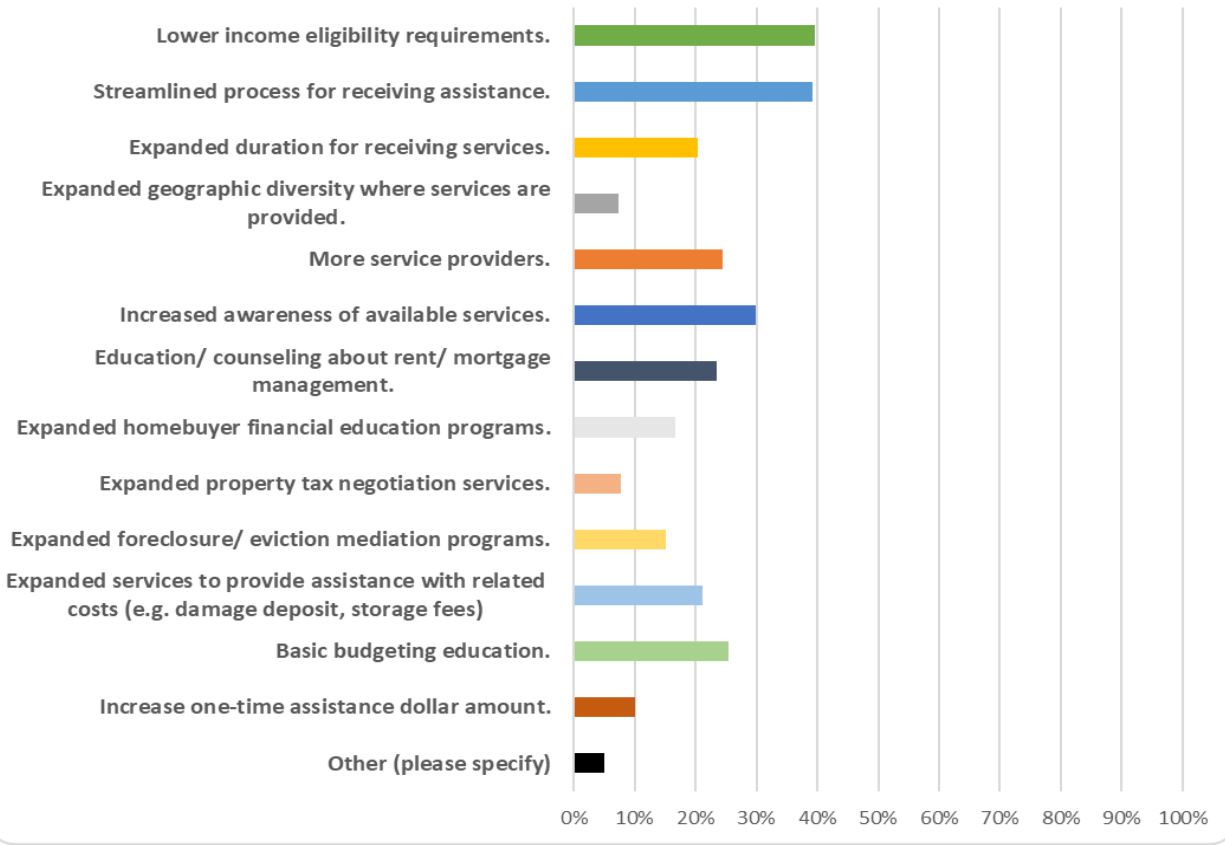


ANSWER CHOICES	RESPONSES	
▼ Lower income eligibility requirements.	41.01%	89
▼ Streamlined process for receiving assistance.	40.09%	87
▼ Expansion of covered utilities (e.g. internet service).	35.02%	76
▼ Expanded services to improve home energy efficiency (e.g. weatherization).	21.20%	46
▼ Expanded duration for receiving services.	12.44%	27
▼ Expanded geographic diversity where services are provided.	4.15%	9
▼ More service providers.	14.29%	31
▼ Increased awareness of available services.	35.02%	76
▼ Expanded (streamlined) case management services.	14.29%	31
▼ Expanded utility bill negotiation services.	18.89%	41
▼ Basic budgeting education.	33.64%	73
▼ Increase one-time assistance dollar amount.	7.37%	16
▼ Other (please specify)	Responses	4.61%

Total Respondents: 217

Specific Verbatim Responses for “Other”
Don't know.
Should not be against last 60 days of earnings. If someone loses a job and current income is zero, that does not matter and it should!
I do not know enough about this to answer
Too much \$\$\$ given away now.
I don't know enough about this to offer a response
Transportation to services
S
Increase the guidelines for assistance/circumstances
Ability to have help with already shut off utilities.
Not sure

Question 21: Thinking about your personal experience and knowledge of the area, select the three (3) things you believe are most needed in order to improve emergency rent/ mortgage assistance services in Ohio County.

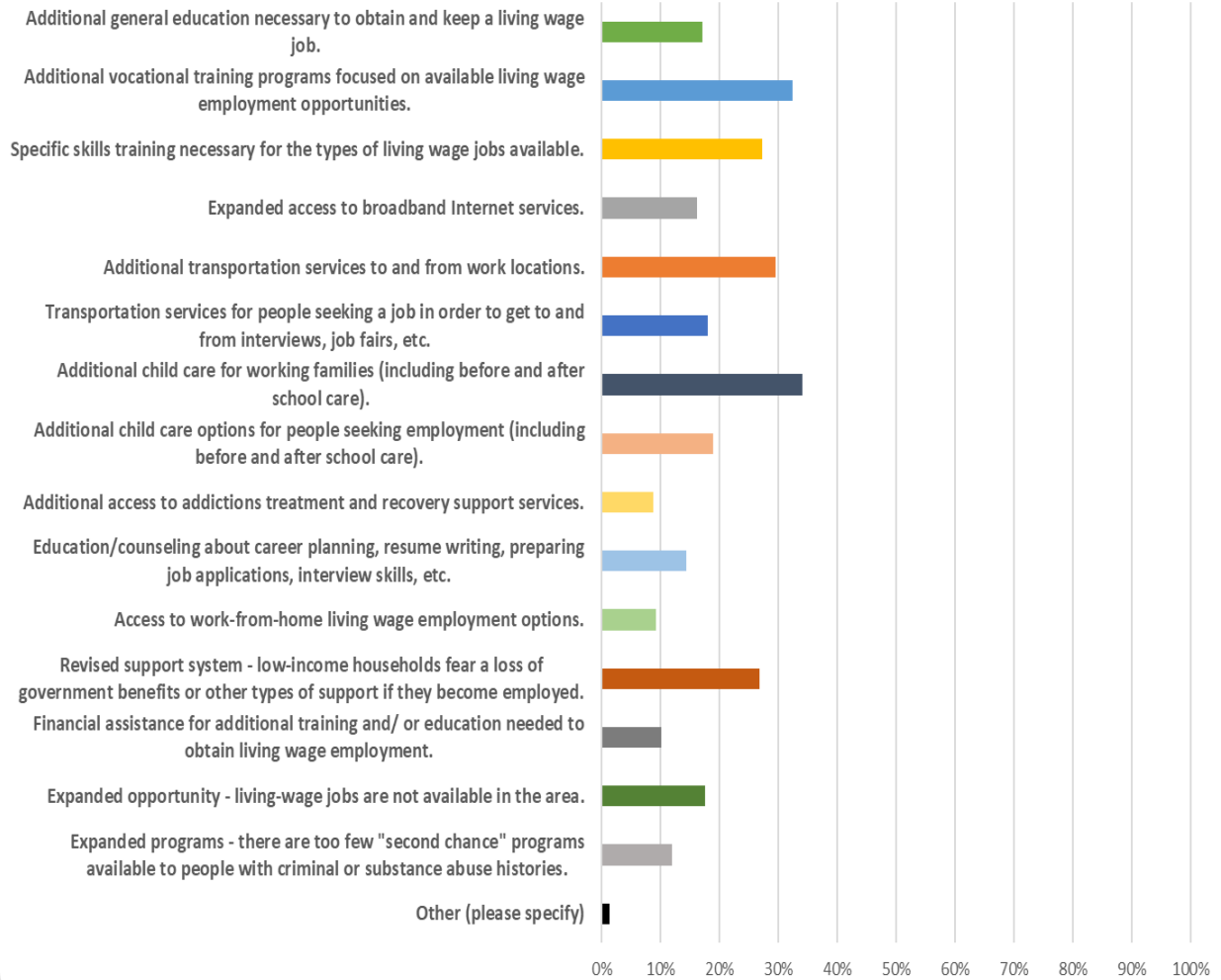




ANSWER CHOICES	RESPONSES
Lower income eligibility requirements.	39.63% 86
Streamlined process for receiving assistance.	39.17% 85
Expanded duration for receiving services.	20.28% 44
Expanded geographic diversity where services are provided.	7.37% 16
More service providers.	24.42% 53
Increased awareness of available services.	29.95% 65
Education/ counseling about rent/ mortgage management.	23.50% 51
Expanded homebuyer financial education programs.	16.59% 36
Expanded property tax negotiation services.	7.83% 17
Expanded foreclosure/ eviction mediation programs.	15.21% 33
Expanded services to provide assistance with related costs (e.g. damage deposit, storage fees)	21.20% 46
Basic budgeting education.	25.35% 55
Increase one-time assistance dollar amount.	10.14% 22
Other (please specify)	<a href="#">Responses</a> 5.07% 11
Total Respondents: 217	

Specific Verbatim Responses for “Other”
Don't know
I do not have enough information.
increase access to low income housing and Hud
I don't know enough about this to offer a response, but would agree with the educational components along with some landlord pieces...this area has some really crummy and predatory landlords
Make more transportation available to those needing to apply in person
Transportation to services
Improve access during nontraditional hours.
Affordable housing with in walking distance to downtown services
Increase income eligibility
Not sure
Education on how to care for your home, cleaning, maintenance, being a good neighbor

Question 22: Thinking about your personal experience and knowledge of the area, select the three (3) things you believe are most needed in order to improve access to living-wage employment in Ohio County.



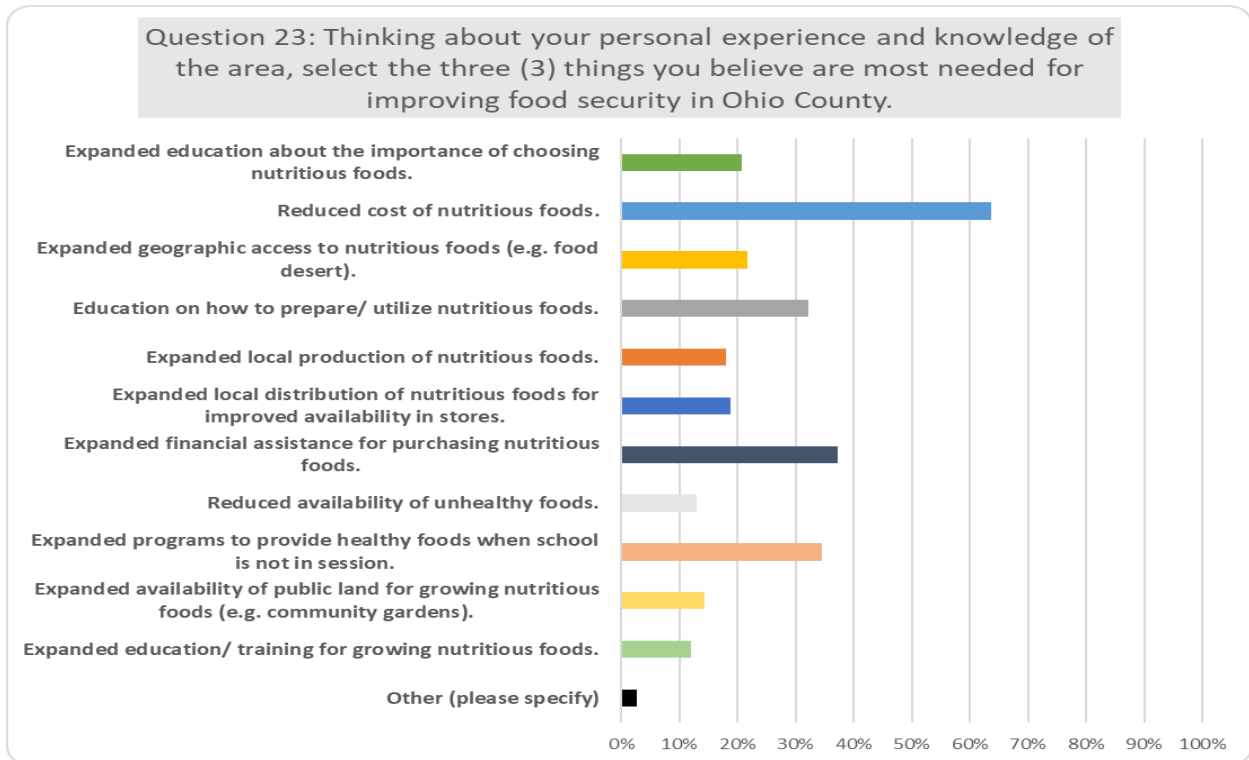
ANSWER CHOICES	RESPONSES
Additional general education necessary to obtain and keep a living wage job.	17.05% 37
Additional vocational training programs focused on available living wage employment opportunities.	32.72% 71
Specific skills training necessary for the types of living wage jobs available.	27.19% 59
Expanded access to broadband Internet services.	16.13% 35
Additional transportation services to and from work locations.	29.49% 64
Transportation services for people seeking a job in order to get to and from interviews, job fairs, etc.	17.97% 39
Additional child care for working families (including before and after school care).	34.10% 74
Additional child care options for people seeking employment (including before and after school care).	18.89% 41
Additional access to addictions treatment and recovery support services.	8.76% 19
Education/counseling about career planning, resume writing, preparing job applications, interview skills, etc.	14.29% 31
Access to work-from-home living wage employment options.	8.22% 20
Revised support system - low-income households fear a loss of government benefits or other types of support if they become employed.	28.73% 61
Financial assistance for additional training and/ or education needed to obtain living wage employment.	10.14% 22
Expanded opportunity - living-wage jobs are not available in the area.	17.61% 38
Expanded programs - there are too few "second chance" programs available to people with criminal or substance abuse histories.	11.98% 26
Other (please specify)	Responses 1.38% 3
<b>Total Respondents: 217</b>	

**Specific Verbatim Responses for “Other”**

SNAP benefit should not be lowered \$60 with a \$0.25 increase. (\$40). Should not be lowered at all

The city/county need to make conditions hospitable for businesses to locate and expand here, thus creating more living wage jobs. Not just part-time retail or part-time fast food, either, but rather companies where people can have a career, whether it's blue or white collar.

Not sure



ANSWER CHOICES	RESPONSES
Expanded education about the importance of choosing nutritious foods.	20.74% 45
Reduced cost of nutritious foods.	63.59% 138
Expanded geographic access to nutritious foods (e.g. food desert).	21.66% 47
Education on how to prepare/ utilize nutritious foods.	32.26% 70
Expanded local production of nutritious foods.	17.97% 39
Expanded local distribution of nutritious foods for improved availability in stores.	18.89% 41
Expanded financial assistance for purchasing nutritious foods.	37.33% 81
Reduced availability of unhealthy foods.	12.90% 28
Expanded programs to provide healthy foods when school is not in session.	34.56% 75
Expanded availability of public land for growing nutritious foods (e.g. community gardens).	14.29% 31
Expanded education/ training for growing nutritious foods.	11.98% 26
Other (please specify)	Responses 2.76% 6
<b>Total Respondents: 217</b>	

**Specific Verbatim Responses for “Other”**

There are a lot of food programs in Ohio County, but the quality of the food often lacks nutrition.

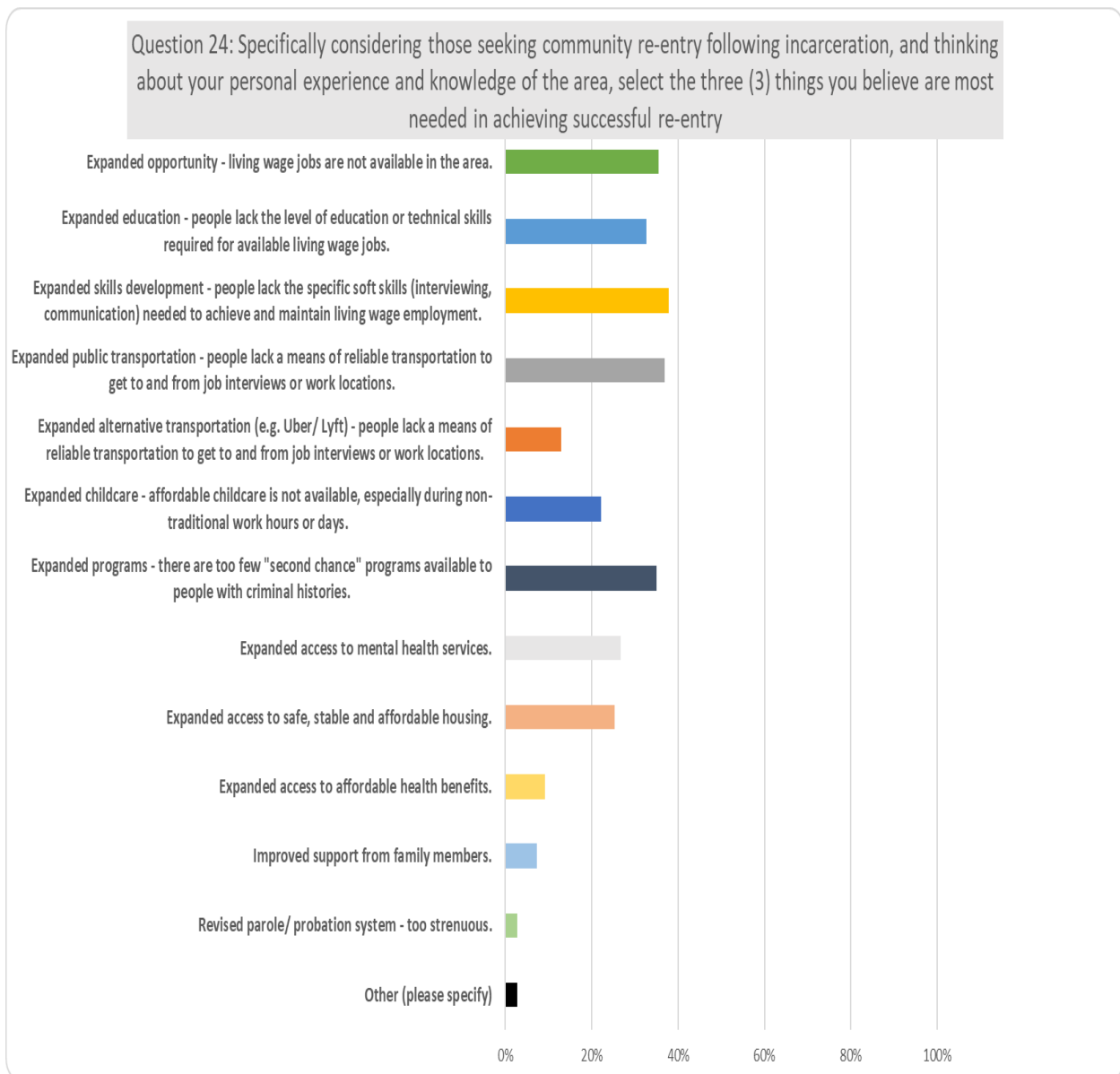
we need a way of getting food to the children when school is not in session or being done virtually. children do not have transportation during the day due to parents work schedule or parent are not willing to take the child to pick up the food. utilize the buses to do food delivery at afternoon bus stops.

More transportation is needed to access food banks, etc

Transportation to obtain food

Not sure

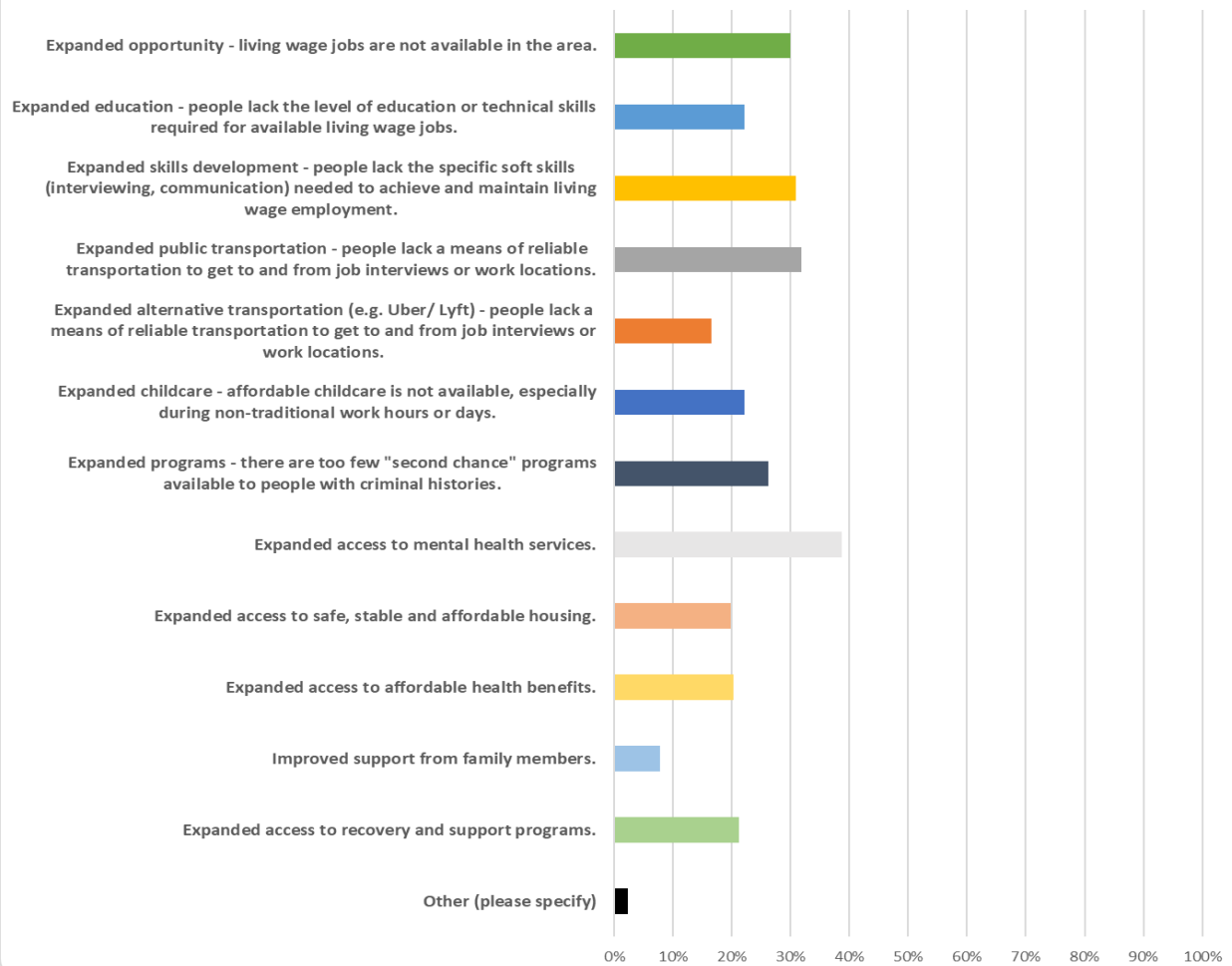
Cooking skills training to prepare food available, for all ages from early teen to elderly



ANSWER CHOICES	RESPONSES
Expanded opportunity - living wage jobs are not available in the area.	35.48% 77
Expanded education - people lack the level of education or technical skills required for available living wage jobs.	32.72% 71
Expanded skills development - people lack the specific soft skills (interviewing, communication) needed to achieve and maintain living wage employment.	37.79% 82
Expanded public transportation - people lack a means of reliable transportation to get to and from job interviews or work locations.	36.87% 80
Expanded alternative transportation (e.g. Uber/ Lyft) - people lack a means of reliable transportation to get to and from job interviews or work locations.	12.90% 28
Expanded childcare - affordable childcare is not available, especially during non-traditional work hours or days.	22.12% 48
Expanded programs - there are too few "second chance" programs available to people with criminal histories.	35.02% 76
Expanded access to mental health services.	26.73% 58
Expanded access to safe, stable and affordable housing.	25.35% 55
Expanded access to affordable health benefits.	9.22% 20
Improved support from family members.	7.37% 16
Revised parole/ probation system - too strenuous.	2.76% 6
Other (please specify)	Responses 2.76% 6
Total Respondents: 217	

Specific Verbatim Responses for "Other"
Don't know
Means to obtain necessary documents or photo ID to apply for work or housing.
I do not know enough to answer.
more basic. They need the tools when they exit to be successful; you need an ID. You cant get an ID without proof of residency. no money. no id. no one will rent. Almost need a 60 day caseworker to bridge the transition of housing/job/ mental health
Na
I do not know how to help

Question 25: Specifically considering those seeking community re-entry following in-patient care [Ex. mental health, substance use treatment, physical rehab (cardiac/stroke)], and thinking about your personal experience and knowledge of the area, select t



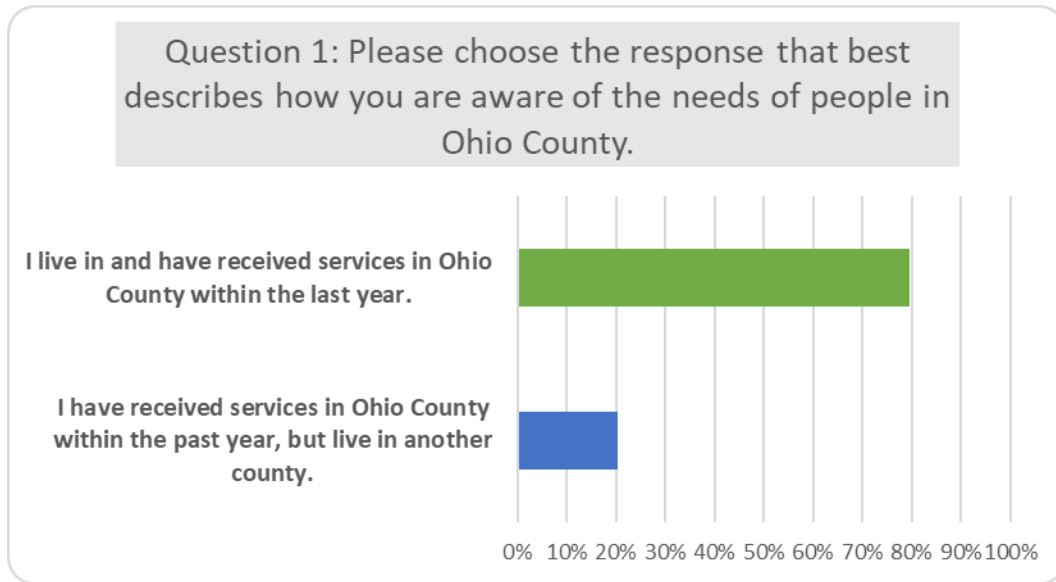
ANSWER CHOICES	RESPONSES
Expanded opportunity - living wage jobs are not available in the area.	29.95% 65
Expanded education - people lack the level of education or technical skills required for available living wage jobs.	22.12% 48
Expanded skills development - people lack the specific soft skills (interviewing, communication) needed to achieve and maintain living wage employment.	30.88% 67
Expanded public transportation - people lack a means of reliable transportation to get to and from job interviews or work locations.	31.80% 69
Expanded alternative transportation (e.g. Uber/ Lyft) - people lack a means of reliable transportation to get to and from job interviews or work locations.	16.59% 36
Expanded childcare - affordable childcare is not available, especially during non-traditional work hours or days.	22.12% 48
Expanded programs - there are too few "second chance" programs available to people with criminal histories.	26.27% 57
Expanded access to mental health services.	38.71% 84
Expanded access to safe, stable and affordable housing.	19.82% 43
Expanded access to affordable health benefits.	20.28% 44
Improved support from family members.	7.83% 17
Expanded access to recovery and support programs.	21.20% 46
Other (please specify)	Responses 2.30% 5
<b>Total Respondents: 217</b>	

<b>Specific Verbatim Responses for “Other”</b>
don't know
I do not know enough to answer.
Na
I do not know how to help
availability of case management assistance

## Service Recipient Survey Results

The greatest needs and strengths of the community were assessed via an online survey of community service recipients. The survey was conducted over a four-month period between December 2020 and February 2021. There were 195 service recipient respondents.

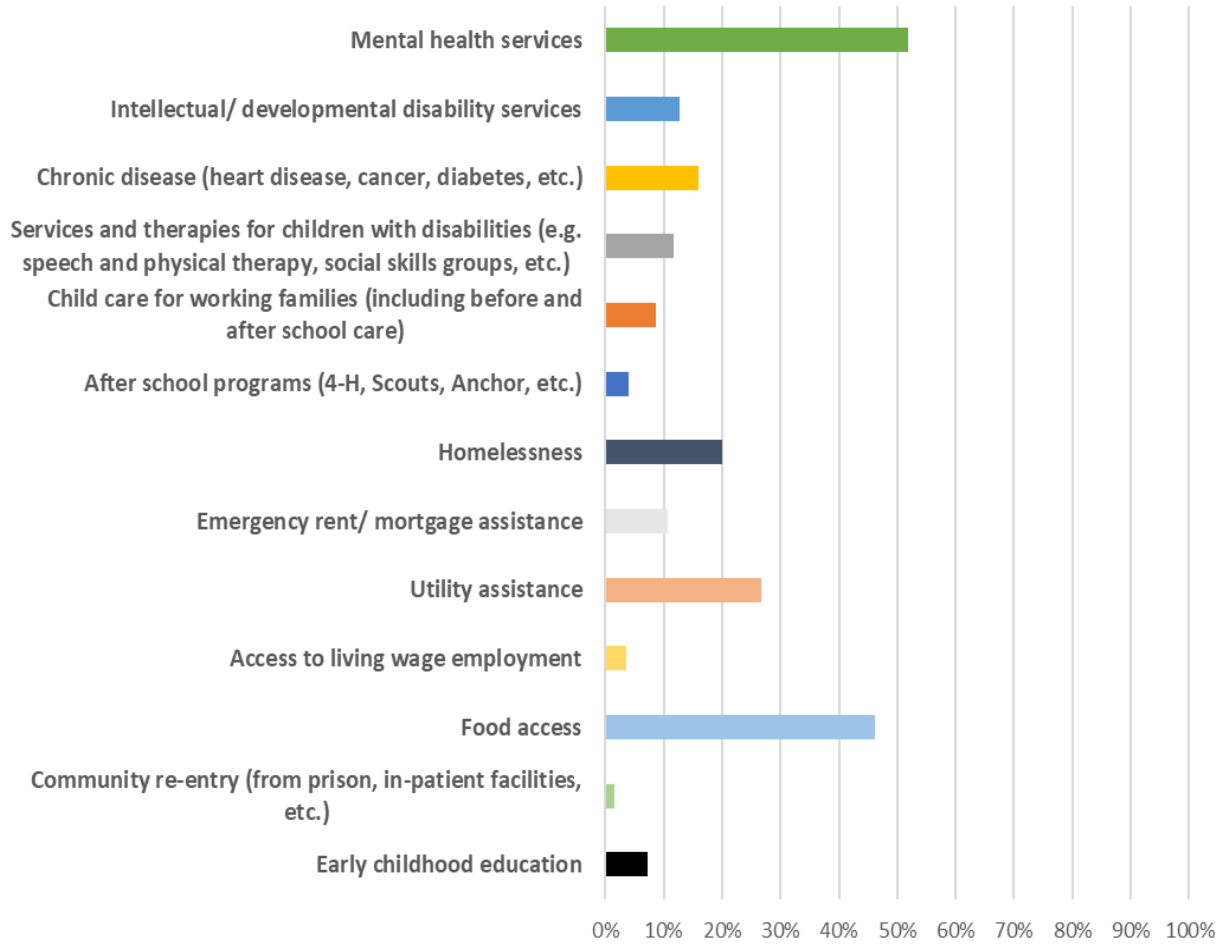
### Demographics



ANSWER CHOICES	RESPONSES
▼ I live in and have received services in Ohio County within the last year.	79.49% 155
▼ I have received services in Ohio County within the past year, but live in another county.	20.51% 40
<b>TOTAL</b>	<b>195</b>

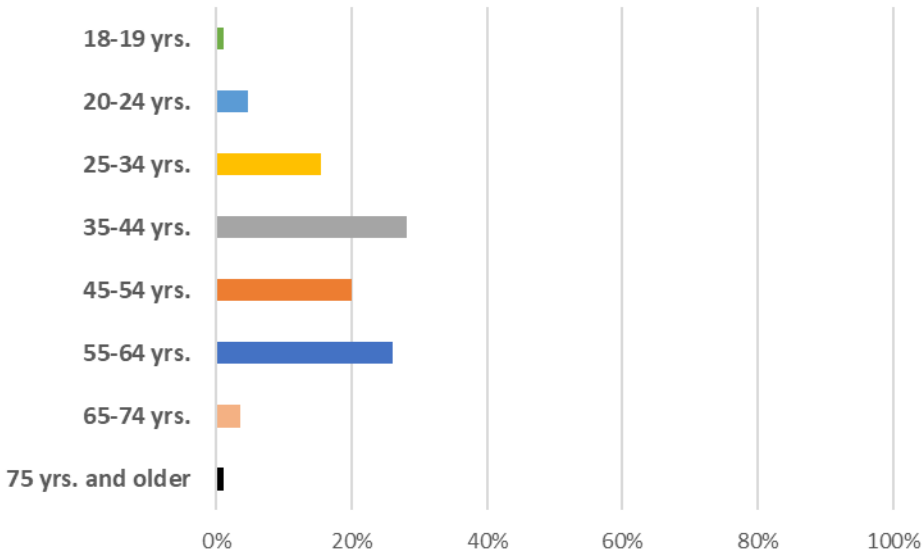


Question 2: Which of the following services have you received in Ohio County in the past year? Check all that apply.



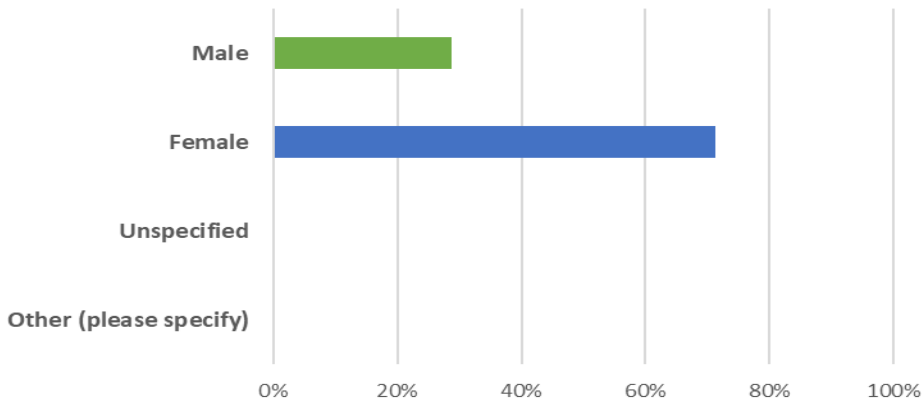
ANSWER CHOICES	RESPONSES
▼ Mental health services	51.79% 101
▼ Intellectual/ developmental disability services	12.82% 25
▼ Chronic disease (heart disease, cancer, diabetes, etc.)	15.90% 31
▼ Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)	11.79% 23
▼ Child care for working families (including before and after school care)	8.72% 17
▼ After school programs (4-H, Scouts, Anchor, etc.)	4.10% 8
▼ Homelessness	20.00% 39
▼ Emergency rent/ mortgage assistance	10.77% 21
▼ Utility assistance	26.67% 52
▼ Access to living wage employment	3.59% 7
▼ Food access	46.15% 90
▼ Community re-entry (from prison, in-patient facilities, etc.)	1.54% 3
▼ Early childhood education	7.18% 14
<b>Total Respondents: 195</b>	

### Question 3: What is your current age?

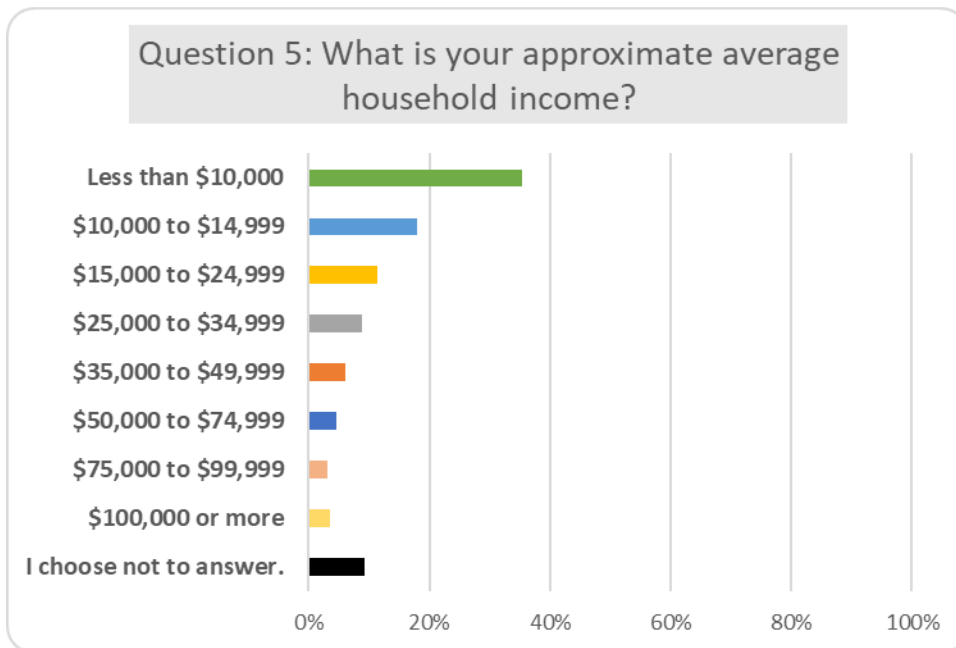


ANSWER CHOICES	RESPONSES	
▼ 18-19 yrs.	1.03%	2
▼ 20-24 yrs.	4.62%	9
▼ 25-34 yrs.	15.38%	30
▼ 35-44 yrs.	28.21%	55
▼ 45-54 yrs.	20.00%	39
▼ 55-64 yrs.	26.15%	51
▼ 65-74 yrs.	3.59%	7
▼ 75 yrs. and older	1.03%	2
<b>TOTAL</b>		<b>195</b>

### Question 4: What is your gender?

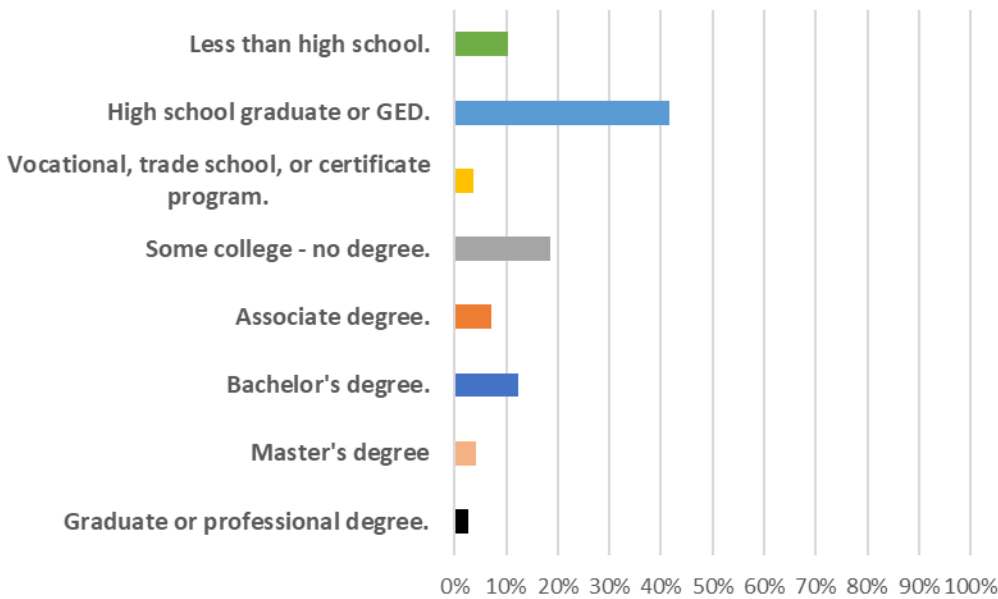


ANSWER CHOICES	RESPONSES
Male	28.72% 56
Female	71.28% 139
Unspecified	0.00% 0
Other (please specify)	Responses 0.00% 0
<b>TOTAL</b>	<b>195</b>



ANSWER CHOICES	RESPONSES
Less than \$10,000	35.38% 69
\$10,000 to \$14,999	17.95% 35
\$15,000 to \$24,999	11.28% 22
\$25,000 to \$34,999	8.72% 17
\$35,000 to \$49,999	6.15% 12
\$50,000 to \$74,999	4.62% 9
\$75,000 to \$99,999	3.08% 6
\$100,000 or more	3.59% 7
I choose not to answer.	9.23% 18
<b>TOTAL</b>	<b>195</b>

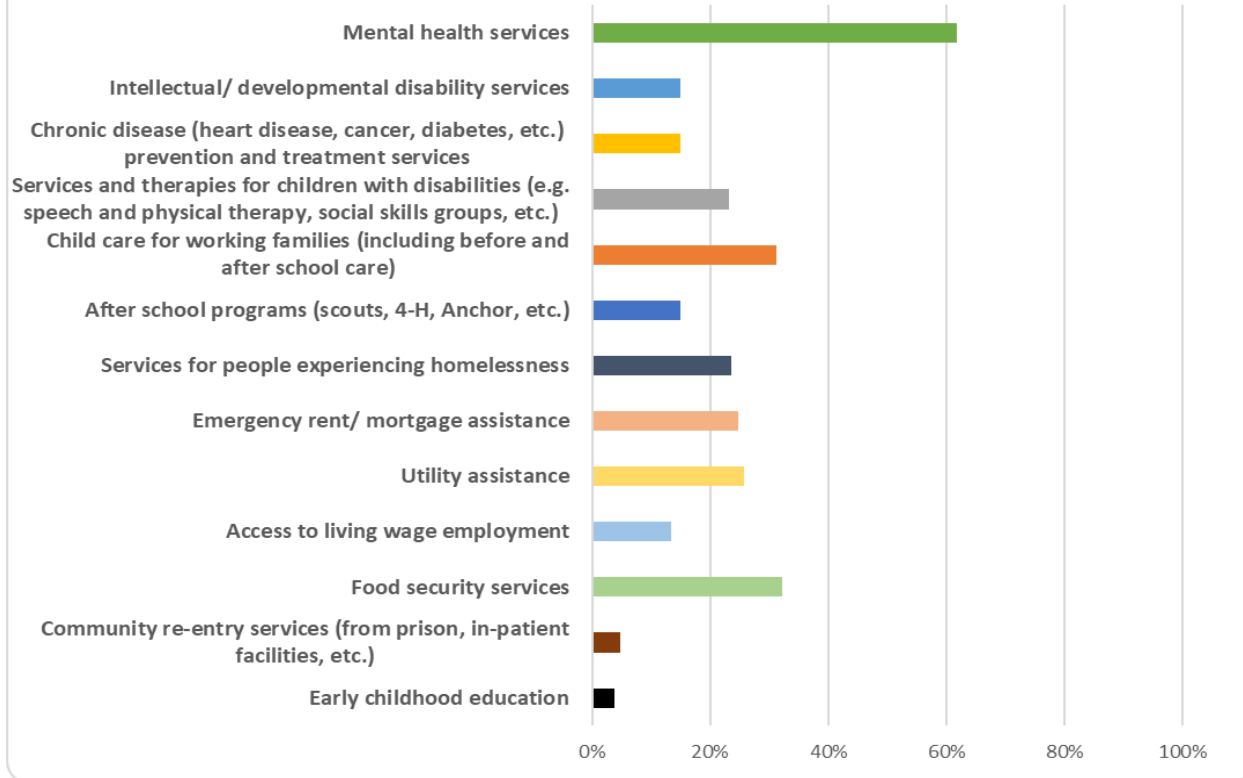
Question 6: What is the highest level of education you have completed?



ANSWER CHOICES	RESPONSES	
Less than high school.	10.26%	20
High school graduate or GED.	41.54%	83
Vocational, trade school, or certificate program.	3.59%	7
Some college - no degree.	18.46%	36
Associate degree.	7.18%	14
Bachelor's degree.	12.31%	24
Master's degree	4.10%	8
Graduate or professional degree.	2.56%	5
<b>TOTAL</b>		<b>195</b>

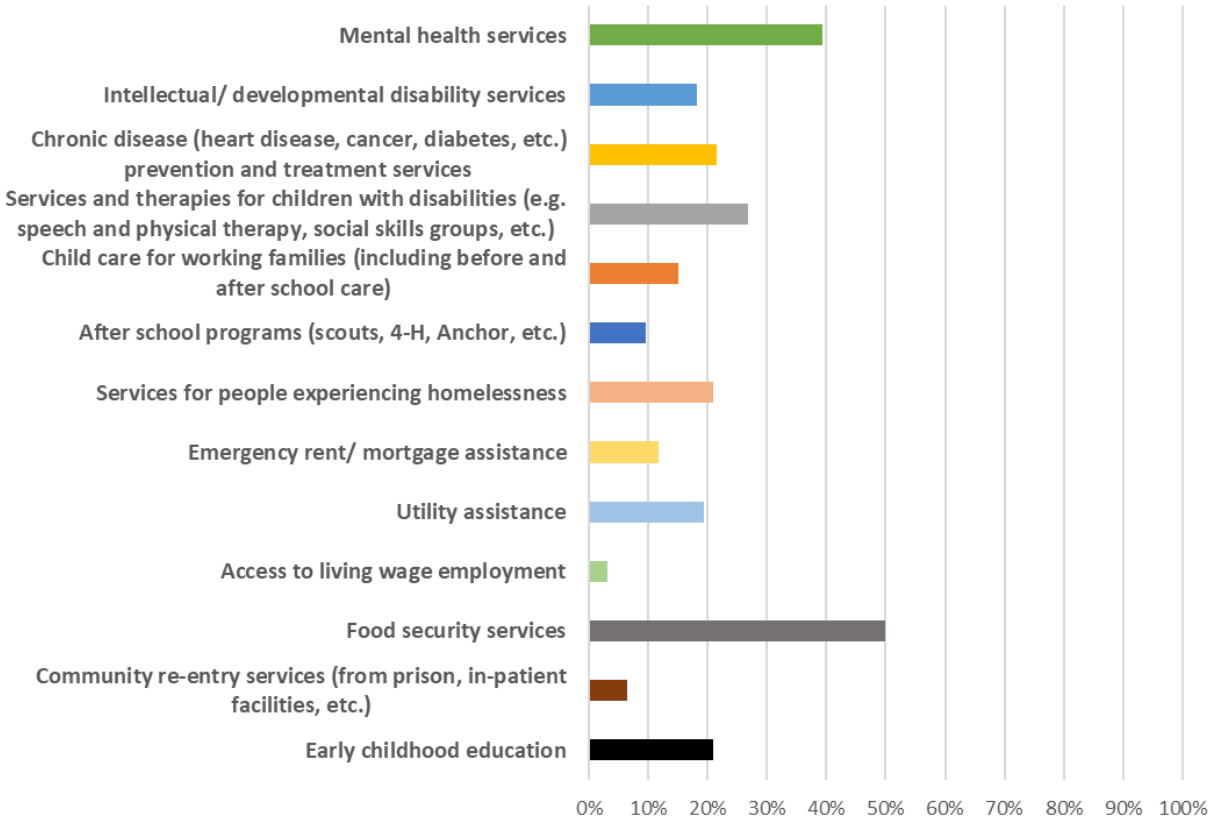
## Greatest Needs and Strengths

Question 7: Out of the following areas, what do you think are the top three areas of need of children and families living in Ohio County?  
Select up to 3 areas of need.



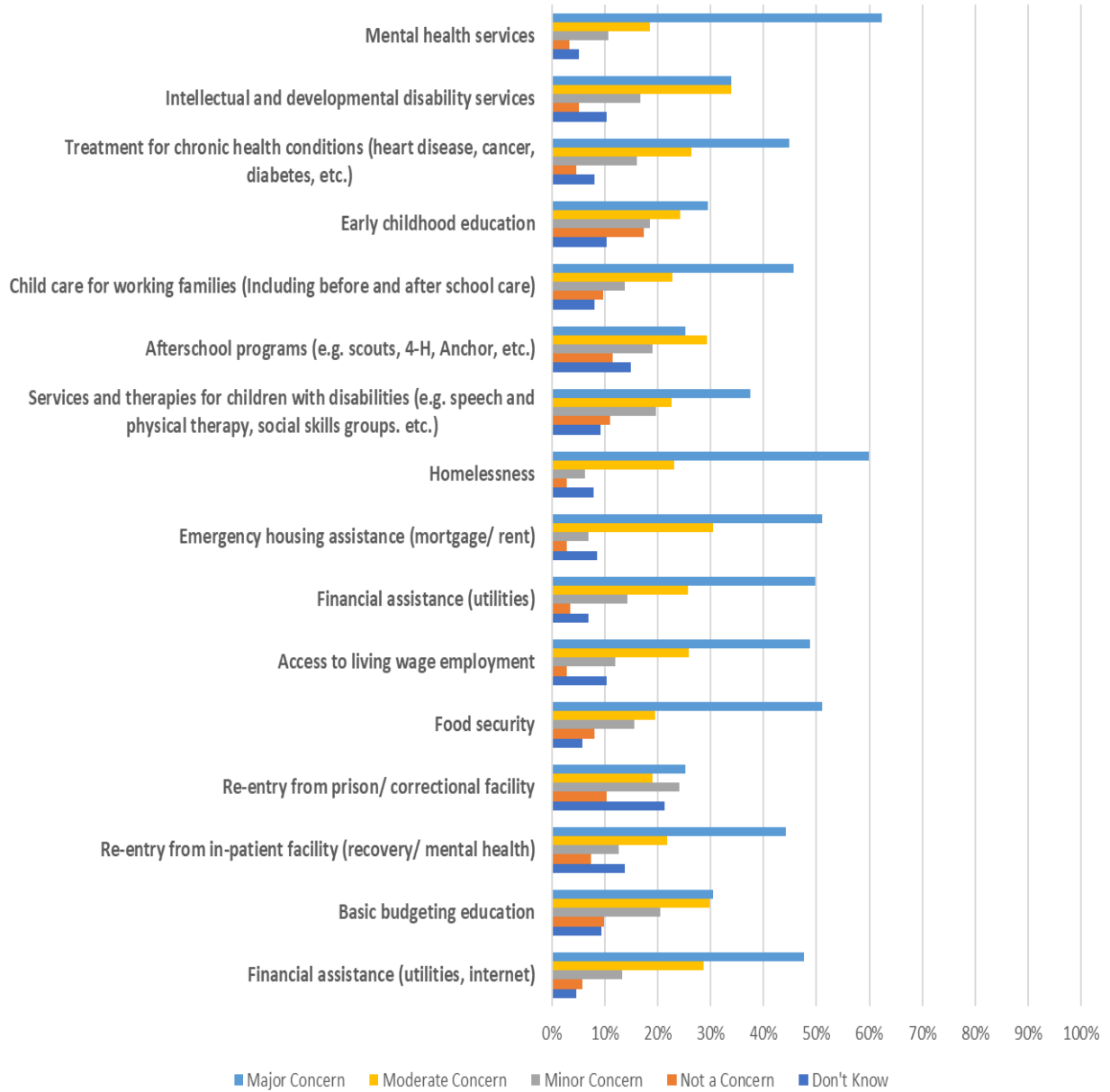
ANSWER CHOICES	RESPONSES
▼ Mental health services	61.83% 115
▼ Food security services	32.26% 60
▼ Child care for working families (including before and after school care)	31.18% 58
▼ Utility assistance	25.81% 48
▼ Emergency rent/ mortgage assistance	24.73% 46
▼ Services for people experiencing homelessness	23.66% 44
▼ Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)	23.12% 43
▼ Intellectual/ developmental disability services	15.05% 28
▼ Chronic disease (heart disease, cancer, diabetes, etc.) prevention and treatment services	15.05% 28
▼ After school programs (scouts, 4-H, Anchor, etc.)	15.05% 28
▼ Access to living wage employment	13.44% 25
▼ Community re-entry services (from prison, in-patient facilities, etc.)	4.84% 9
▼ Early childhood education	3.76% 7
<b>Total Respondents: 186</b>	

Question 8: Out of the following areas, what do you consider to be the top three greatest strengths within the services system in Ohio County? Select up to 3 strengths.



ANSWER CHOICES	RESPONSES
▼ Food security services	50.00% 93
▼ Mental health services	39.25% 73
▼ Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)	26.88% 50
▼ Chronic disease (heart disease, cancer, diabetes, etc.) prevention and treatment services	21.51% 40
▼ Services for people experiencing homelessness	20.97% 39
▼ Early childhood education	20.97% 39
▼ Utility assistance	19.35% 36
▼ Intellectual/ developmental disability services	18.28% 34
▼ Child care for working families (including before and after school care)	15.05% 28
▼ Emergency rent/ mortgage assistance	11.83% 22
▼ After school programs (scouts, 4-H, Anchor, etc.)	9.68% 18
▼ Community re-entry services (from prison, in-patient facilities, etc.)	6.45% 12
▼ Access to living wage employment	3.23% 6
<b>Total Respondents: 186</b>	

Question 9: Thinking about your personal experience and knowledge about the area, please tell whether each of the items listed below is currently a major concern, a moderate concern, a minor concern or not a concern in Ohio County.



	MAJOR CONCERN	MODERATE CONCERN	MINOR CONCERN	NOT A CONCERN	DON'T KNOW	TOTAL	WEIGHTED AVERAGE
▼ Mental health services	62.36% 111	18.64% 33	10.67% 19	3.37% 6	5.06% 9	178	1.70
▼ Intellectual and developmental disability services	33.91% 59	33.91% 59	16.67% 29	5.17% 9	10.34% 18	174	2.24
▼ Treatment for chronic health conditions (heart disease, cancer, diabetes, etc.)	44.83% 78	26.44% 46	16.09% 28	4.60% 8	8.05% 14	174	2.05
▼ Early childhood education	29.48% 51	24.28% 42	18.50% 32	17.34% 30	10.40% 18	173	2.55
▼ Child care for working families (including before and after school care)	45.71% 80	22.86% 40	13.71% 24	9.71% 17	8.00% 14	175	2.11
▼ Afterschool programs (e.g. scouts, 4-H, Anchor, etc.)	25.29% 44	29.31% 51	18.97% 33	11.49% 20	14.94% 26	174	2.61
▼ Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.)	37.57% 65	22.54% 39	19.65% 34	10.98% 19	9.25% 16	173	2.32
▼ Homelessness	59.89% 106	23.16% 41	6.21% 11	2.82% 5	7.91% 14	177	1.76
▼ Emergency housing assistance (mortgage/rent)	51.15% 89	30.46% 53	6.90% 12	2.87% 5	8.62% 15	174	1.87
▼ Financial assistance (utilities)	49.71% 87	25.71% 45	14.29% 25	3.43% 6	6.86% 12	175	1.92
▼ Access to living wage employment	48.85% 85	25.86% 45	12.07% 21	2.87% 5	10.34% 18	174	2.00
▼ Food security	51.15% 89	19.54% 34	15.52% 27	8.05% 14	5.75% 10	174	1.98
▼ Re-entry from prison/correctional facility	25.29% 44	18.97% 33	24.14% 42	10.34% 18	21.26% 37	174	2.83
▼ Re-entry from in-patient facility (recovery/mental health)	44.25% 77	21.84% 38	12.64% 22	7.47% 13	13.79% 24	174	2.25
▼ Basic budgeting education	30.41% 52	29.82% 51	20.47% 35	9.94% 17	9.36% 16	171	2.38
▼ Financial assistance (utilities, internet)	47.70% 83	28.74% 50	13.22% 23	5.75% 10	4.60% 8	174	1.91



Question 10: Right now, what is your number 1 need? Please be as specific as possible. (Answers provided verbatim)
N/A
Not sure
To get my pain gone & great health care
N/A
N/A
N/A
not having or losing insurance / future medical bills
Elective surgery for 10+ lb Fatty Cyst.
Nothing that i can think of.
Child care for working single mothers.
Childcare, before & after care.
Housing
N/A
N/A
Fines, Job
N/A
N/A
Help with money management
N/A
N/A
I currently have mold in my home that i can't get removed.
N/A
N/A
Better and affordable health and education plan.
Health care
N/A
N/A
Education
DENTIST / WEIGHT LOSS
Treatment for chronic health conditions
MONEY, FOOD
New friendships
Food source
MONEY
N/A
intellectual development - buying more books
transportation
transportation
Mental Health Services
mental health - family
N/A

MAKE PAIN STOP
Mental Health
Education budgeting
N/A
service and therapies for children with disabilities, speech and physical
To get fixed from pain, & well being
N/A
N/A
A THEPARIST
N/A
Dental & Eye care for diabetic
Rent prices too high for minimum wage income
Recovery
mental health
more health care facilities
Making a good living wage w/o having to utilize programs for "low income"
N/A
To feel confident about my mental health provider.
Money & Food
Access to phone/internet
Aptment Homelessness
Id's help people with felonis
i need a place to live for me and my girlfriend.
A place to live.
Finding a home and a job and medical insurance.
Homelessness - don't meet criteria of military serv + long wait
A place to live.
N/A
N/A
Living wage and the roads need fixed bad around here in Wheeling WV. It's crazy that I am a single mother who works full time making \$10.50 I get no help from the kids dad. So it's all on me I make to much to get help from DHHR but i'm barly able to pay my bills. So it would be nice if working mothers could get some help.
I am disabled and use a wheelchair and oxygen. It is hard to find help to get to any appointments.
Living Wage
Child care
Access to affordable mental health services.
food
Mental health. There is none in the valley just Northwood and they do not work with children and dont take some insurance
Services for children with learning and developmental disabilities that don't have a one-year waiting list.
Getting equipment and excessible vehicle for my son
None of the above. Many prayers to be strong for someone in need of the above choices.

I am more concerned for children who clearly have a bad home life and cps not doing their job and taking those kids out of nasty situations
Financial assistance
Mental/emotional inpatient facilities.
Help with rent but the only place in the area only helps with 500 dollars once a year
food security
Food
Help with transportation. Getting to doctor and store
Access to long term affordable hoysing
Financial
Better transportation
Homeless
Affordable and accessible childcare before and after school for families with multiple school age children Internet
Affordable housing
Respite
.
Assistance with my disabled daughter.
1 on 1 with adult special needs example—the snoozelen room
Family member has been laid-off very recently.
Help with disable child, in our home
Helping family members with utilites.
Help for people with special needs
Services for I/DD Waiver child including respite care
Getting to appointments
Finding affordable housing
Help with Rent and other bills
Transportation
Paying out of pocket for NHS visits
Special education resources
Job
I do not feel I have any needs at the moment that are not being met; however, working in social services I feel the homeless population is something that needs to be addressed.
Intellectual and developmental disability services
Health insurance. We make over the guidelines but cant afford health and dental care
Intellectual and developmental disability services
Care of an adult child with disabilities during emergency situations. Day Center closing, illness of parent, or sibling.
Drug treatment
to get help with rent and utilities
Continued IDD services
More options when it comes to what company I can choose for a home health aide. Because of my insurance (wv Medicaid) I can only choose West Virginia Choice. Also, there isn't much for children to do around Wheeling.
Good mental health care

food
AFTER SCHOOL CARE K THROUGH 8
n/a
Before and after care for working parents.
Baby food!! When people donate food they rarely donate baby food. It happens that I have autistic twins and one only eats baby food, other than chips, cookies and crackers. My twins are 10 years old now. So when I ship for him it's quite expensive. He eats 4-6 tubs per feeding three times a day. So if I try to get help for him they rarely ever have any and if they do it's stage 1 which is tiny little jars. If he would eat those he would have to eat at least 10 or 15! There is zero help for food assistance for my son. I also run a facebook page with 99k followers and this is not uncommon in our autism community. And it's not just them. Many seniors can only eat baby food and even dental patients. There is nothing for people with the need for a disability issue.
Being able to afford my bills while home with my kids. I haven't been able to return to work in order to make sure they're completing their work and learning to the best of my ability.
Access to affordable mental health services
Affordable child care
The LIEAP program is difficult to apply for. Internet access is getting more expensive and is very necessary for families with children or adults learning or working from home.
Transportation
Getting license back
Lonelyhearts
mental health needs
Higher social security for people with disabilities
Transportation to and from work bc the bus stops too early and starts too late.
Help with getting rent and utilities caught up and paid.
Mental health
Mental Health help
financial stability d/t lack of purpose
financial hardship. not having enough income, I receive SSI and I find myself not having adequate funds for what I need after I pay my bills and household items.
Increased mental health services
Need more facilities for children dealing with neglectful parents. Instead of cps letting the kids stay in the homes of nasty parents
Access to therapy for children. Examples ABA, speech, physical therapy, occupational therapy.
Mental health services
Therapy
Place to live
Currently, my number one need is financial assistance for everything.
Facilities for young adults with mental disorders.
Getting into housing.
Affordable child care
utility assistance; I do not have my utilities in my name however it is my residence and I am unable to receive assistance (my identity was stolen)

to get a job
help with getting my son full time
to have hip surgery I need
Finding someone to help, in home health aide.
Utility Assistance
my health
to fix my house up without utilities to be turned off
my health to make sure diabetes is under control
FINANCIAL STABILITY
mental health service
mental health support
want all the support I can get
to be able to have surgery on my hip.
Finding assistance when moving and not having a vehicle.
Mental Health Services.
Before and after care for elementary student
help with surgery for my physical problems
mental health & support system
mental health /diabetes
social security will not give me my back pay
Mental Health
Mental Health
Mental HEalth
Mental Health
Mental Health
mental health
mental health
mental health services
main concern is insurance delaying treatment for major back issues and pain.
the food assistants and access to reliable transportations.

# Appendix B: Focus Group Results and Secondary Data

## Health/Mental Health

### Community Stakeholder Health/Mental Health Focus Group

Ohio County Community Needs Assessment  
Community Stakeholder Focus Group Responses  
Health/Mental Health  
March 9, 2021 @ 10:00 am  
17 Participants

Health/ Mental Health: Mental Health Services, Intellectual/Developmental Disability Services, and Chronic Disease (heart disease, cancer, diabetes, etc.)

1. What are the barriers or challenges to providing and/or receiving Health/Mental Health services in Ohio County?
  - Wait list for services, especially with children – parents get frustrated and do not follow through in accessing services
  - Fragmented referral system makes it difficult for families to get services they might need
  - Availability of services for young children, especially mental health services
  - Need additional providers in school based mental health services – need to address access, awareness, costs, etc.
  - More trauma informed services and coordination of these types of services
  - Transportation is always an issue – creating barriers to access to services
  - Need for school-based health services in addition to expanded mental health service
  - Funding for mental health services should be incorporated into state budgets not just grant funded
  - Awareness of all types of existing services is an issue for families
  - Families can be intimidated to access services – it can be an overwhelming and frightening experience
  - Often times, people providing services are not well versed or knowledgeable about the services that exist
  - Entire mental hygiene process is flawed – people are being discharged from services “into the streets” with limited or no services and no follow through
  - Teachers are overwhelmed with mental health issues in the classroom – need more quality health and mental health education for students
  
2. Thinking about Health/Mental Health services, what are the gaps that exist in the delivery system in Ohio County?
  - Health insurance for adults can be an issue
  - Loss of Robert C. Byrd adolescent services has hurt community
  - Acute care in the valley is needed at the local level
  - Lack of mental health services

- Respite services for families is a gap in IDD services
  - Routine preventative dental services, especially finding providers that will accept Medicaid funding
  - Lack of communication from referral to service delivery – poor to no coordination of services
  - Not having the technology or internet access for telehealth services
  - Intensive outpatient services, particularly for males
  - Lack of therapists statewide to address the existing demand and need
  - Lack of trained couples therapists, Obsessive Compulsive Disorder (OCD) therapists, and Eating Disorder specialists
  - Use of and promotion of other mental health supportive services other than therapy (i.e., early intervention services, etc.)
  - Transitioning from Birth-to-Three to other services is a difficult process
  - Getting families to follow through with initiation or transition of services
  - Newer service providers may not see the value in collaboration and working together
3. What specific Health/Mental Health services being provided in Ohio County are working well, and why?
- Destigmatizing mental health services
  - Families are very aware of IDD services
  - Service rich with a variety of resources in Ohio County
  - Collaboration and networking is strong in Ohio County (i.e., FRN, coalitions, etc.)
  - Enhanced training and development opportunities because of COVID-19
  - Strong Mental Health services and pilot/demonstration projects showing positive results
  - Reaching more children through universal prevention
  - Expanded school based Mental Health services and the tier system that is being implemented
  - Holistic and systemic approach to identifying needs and addressing those needs
  - Birth-to-three system for screening and identification of needs and services
  - Some agencies are improving efforts to get families to follow through with services
  - Community works together well to identify gaps and finding ways to address those gaps
  - Improvement in family involvement with services planning and delivery with in-home services
  - New services such as mobile crisis, wrap-around, safe at home, etc., are working very well and offer promising outcomes
  - Assertive Community Treatment works well to transition individuals
4. Are Health/Mental Health services well-coordinated in Ohio County?
- Mental hygiene discharge planning could be better coordinated
  - School-based mental health is well coordinated
  - Overall a climate of collaboration
  - School principals work with providers well to coordinate services
5. How has COVID-19 impacted the Health/Mental Health service delivery system in Ohio County?

- Telehealth services have increased and are working well to better coordinate services
  - A lot of people need to receive services in the home or community – this has been a challenge
  - Transportation barrier has been decreased due to COVID
  - Anxiety and stress have increased impacting the delivery and receipt of services
  - IDD services have been greatly impacted – lack of hands-on provision of services
  - Access to services has been greatly impacted due to COVID
  - Difficult to adhere to social distancing regulations in the classroom, particularly when students need access to mental health services while at school
  - Suicide prevention services have been delayed – attempting to adjust
  - Respite services have been difficult to access/provide – families not wanting outsiders coming into homes and providers fearful of going into other people’s homes
  - Youth mentoring programs and other supportive services have suffered in getting volunteers engaged and willing to work with others
  - Influx of statewide services offered via virtual platforms (LBGTQ groups, recovery support groups, etc.)
6. What are some ways we can use best practices and/or innovation to improve the Health/Mental Health service delivery system in Ohio County?
- Expanded resource guides for providers and families to access
  - More detailed resources guide with detailed specialty definitions, service descriptions, and explanations of acronyms
  - Examine the service system to identify duplication, ways to better coordinate services, addressing access issues, funding sources, etc.
  - Strengthen the crisis intervention team “approach” for mental health and IDD

### **Service Recipient Health/Mental Health Focus Group**

Ohio County Community Needs Assessment

Service Recipient Focus Group Responses

Health/Mental Health

March 9, 2021 @ 6:00 pm

3 Participants

Health/ Mental Health: Mental Health Services, Intellectual/Developmental Disability Services, and Chronic Disease (heart disease, cancer, diabetes, etc.)

1. What are the barriers or challenges to providing and/or receiving Health/Mental Health services in Ohio County?
- People lack insurance for services
  - Transportation to and from services
  - Lack of therapists for adolescents, especially 16-17-year-olds
  - Not enough providers to meet the current
  - Awareness of providers and service

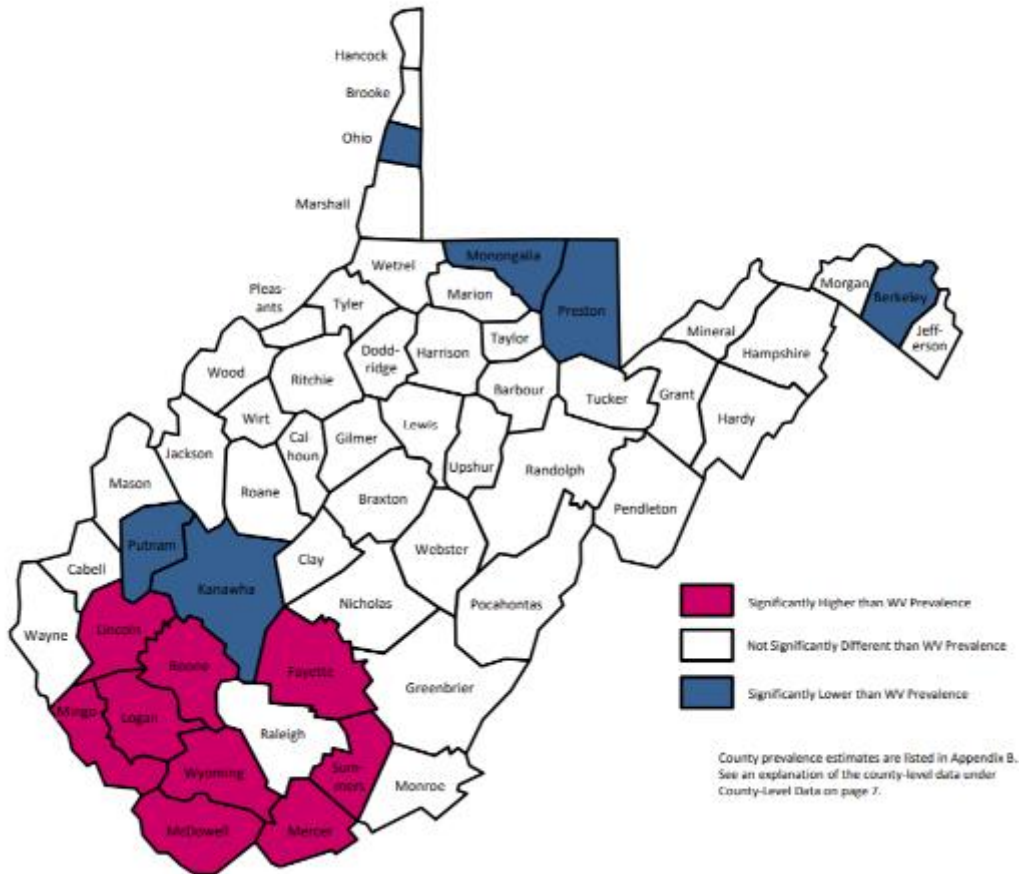


- Finding the right provider can be challenging
  - Northwood is a large provider but lacks quality in service delivery
2. Thinking about Health/Mental Health services, what are the gaps that exist in the delivery system in Ohio County?
    - Diabetes specialists services are lacking
    - Ohio Valley Medical Center recently closed
    - Lack of support groups for youth
  3. What specific Health/Mental Health services being provided in Ohio County are working well, and why?
    - Wheeling Health Right is a phenomenal service
  4. Are Health/Mental Health services well-coordinated in Ohio County?
    - Lack of health care service coordination or aftercare support services (i.e., Wheeling hospital)
  5. How has COVID-19 impacted the Health/Mental Health service delivery system in Ohio County?
    - Pandemic has created a lot of isolation
    - Interference with home visitation services like head start, parents as teachers, etc.
    - Lack of access to technology or internet services to facilitate virtual meetings and service provision
    - Lack of in-person connection is a challenge for many service providers
  6. What are some ways we can use best practices and/or innovation to improve the Health/Mental Health service delivery system in Ohio County?
    - Aftercare and support groups for cardiac patients
    - Transportation access to services
    - More mobile and/or outreach services
    - Improved broadband and technology support for telehealth services
    - Enhanced communication and coordination between and among providers

## Secondary Data

Fair to poor health in WV by county:

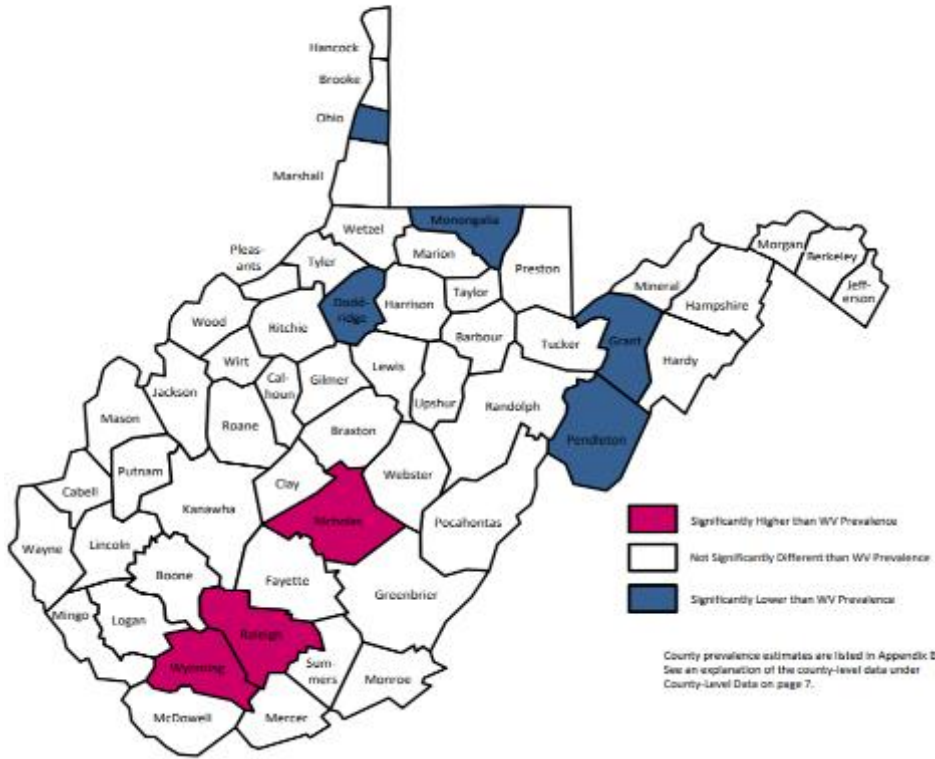
WV Prevalence (2014-2018) - 26.0%



<http://www.wvdhhr.org/bph/hsc/pubs/brfss/2018/BRFSS2018.pdf>

Prevalence of poor mental health by county:

WV Prevalence (2014-2018) - 17.6%



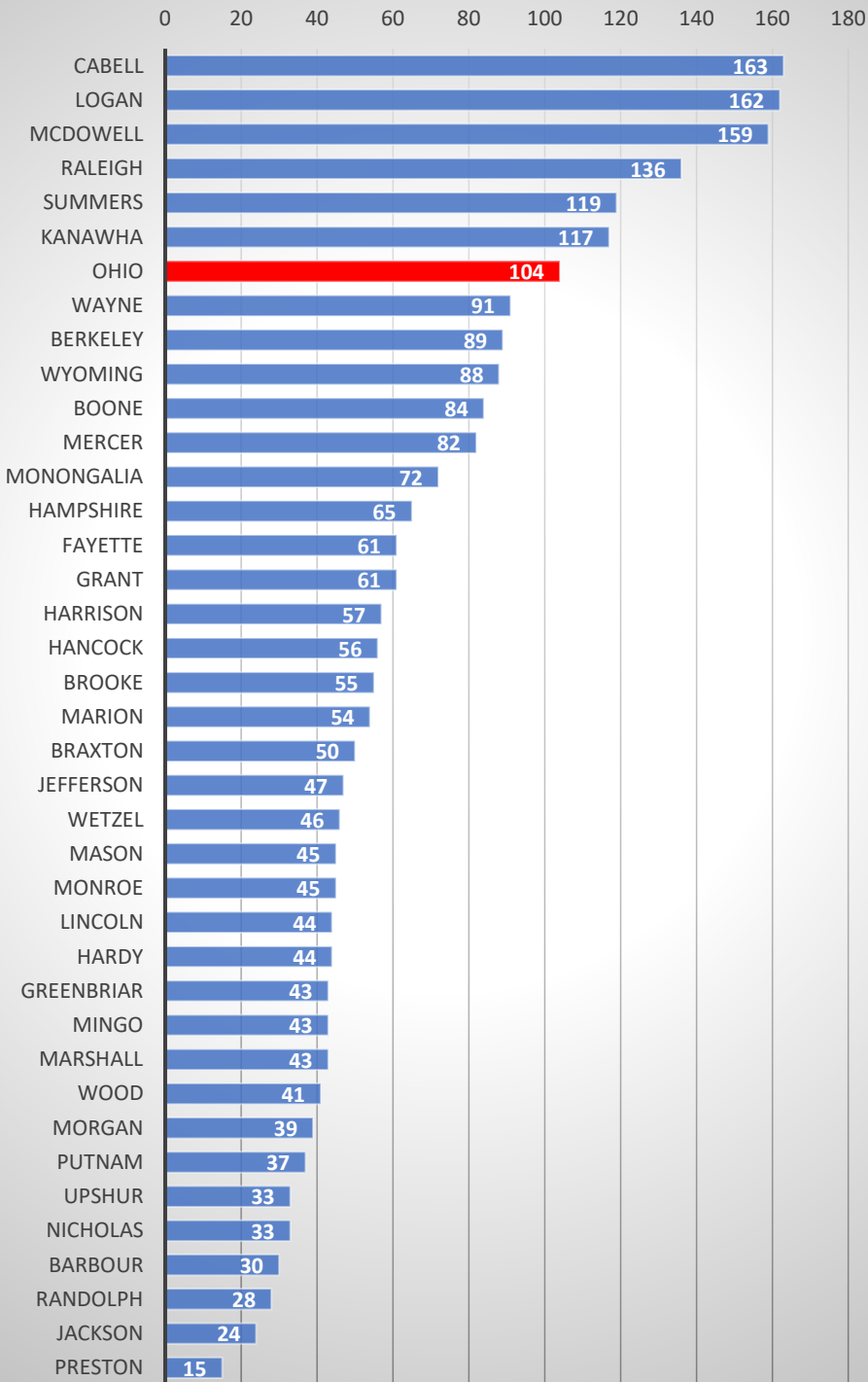
<http://www.wvdhhr.org/bph/hsc/pubs/brfss/2018/BRFSS2018.pdf>

Fatal overdoses in WV by county:

County Name	All Drugs	All Opioids	Fentanyl	Heroin	Cocaine	Methamphetamine
Ohio	43	35	32	6	8	17

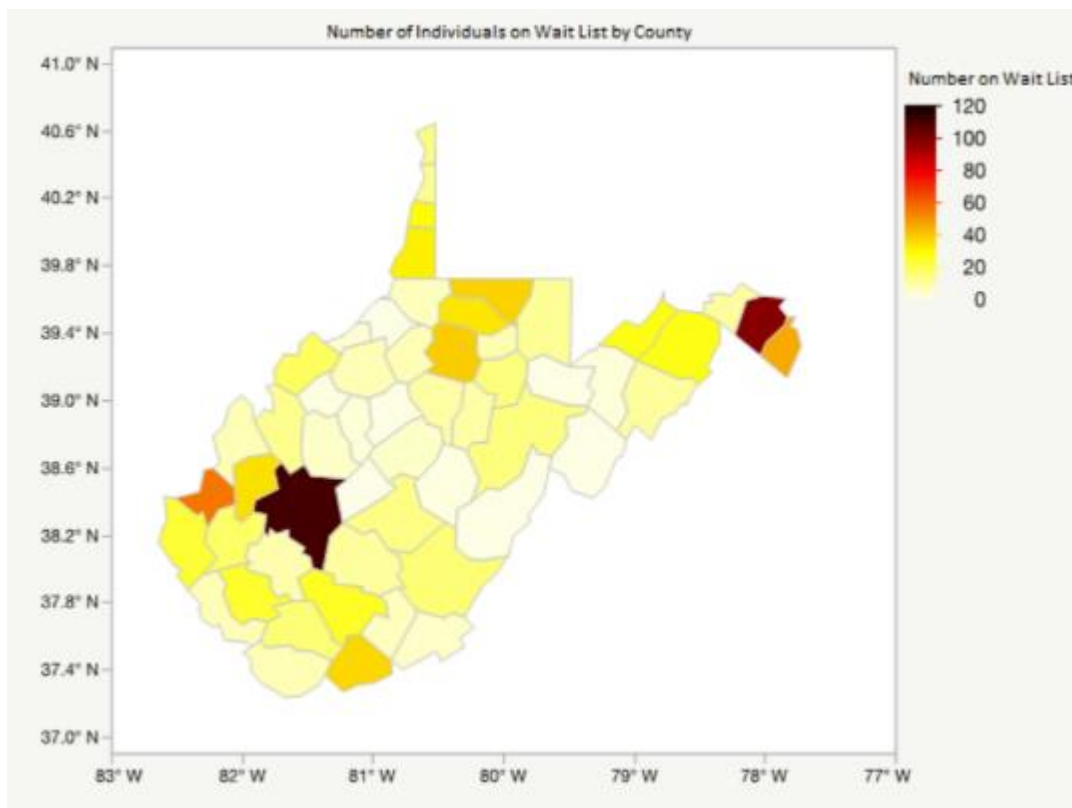
<https://dhhr.wv.gov/office-of-drug-control-policy/datadashboard/Pages/default.aspx>

## 2020 Overdose Deaths Per 100,000 by WV County



<https://dhhr.wv.gov/office-of-drug-control-policy/datadashboard/Pages/default.aspx>

Intellectual/developmental disability waiver waitlist by county:



In Ohio County, 144 members receive the IDD waiver as of 4/30/2021

<https://dhr.wv.gov/bms/Programs/WaiverPrograms/IDDW/Documents/IDDW%20Report%20to%20Governor%20Jim%20Justice.pdf>

Available waiver services in WV compared with neighboring states:

Available Waiver Services*	WV	OH	MD	KY	PA	VA
Adaptive & Assistive Equipment		X	X	X	X	X
Assessment/Reassessment				X		
Behavior Support	X		X	X	X	X
Benefits Counseling					X	X
Case Management/ Service Coordination	X			X	X	
Communication Specialist					X	X
Community Learning/Guide Services			X	X	X	X
Crisis Services	X					X
Day Habilitation	X	X	X	X	X	X
Dietary Therapy	X	X			X	
Education Support					X	
Electronic/Remote Monitoring	X	X	X		X	X
Environment Assessment			X			
Environmental Accessibility Adaptation - Home	X	X	X	X	X	X
Environmental Accessibility Adaptation - Vehicle	X		X	X	X	
Family Caregiver Training and Empowerment			X		X	
Family & Peer Mentoring			X	X		X
Goods and Services	X	X	X	X	X	
Home Delivered Meals		X				
Housing Support Services			X			
Interpreter Services		X				
Job Development	X	X	X	X	X	X
Life Sharing Needs Group					X	
Medical Day Care			X			
Money Management		X				
Music, Art and Equine Assisted Therapy					X	
Nursing Delegation		X	X			
Nursing by LPN	X	X			X	X
Nursing by RN	X	X			X	X
Occupational Therapy	X			X	X	
Orientation, Mobility and Vision Support					X	
Participant Education, Training & Advocacy Supports			X			
Person-Centered Support (Personal Care/Homemaker/Companion Services)	X	X	X	X	X	X
Personal Emergency Response System						X
Physical Therapy	X			X	X	
Pre-Vocational Services	X	X	X	X	X	X
Respite	X	X	X	X	X	X
Shared Living		X	X	X		
Speech Therapy	X			X	X	
Support Brokerage			X		X	X
Supported Employment	X	X	X	X	X	X
Transition Services			X	X	X	X
Transportation	X	X	X	X	X	X

\*Actual name of service may vary between state waivers

<https://dhhr.wv.gov/bms/Programs/WaiverPrograms/IDDW/Documents/IDDW%20Report%20to%20Governor%20Jim%20Justice.pdf>



**Comparison of WV Person Centered Support Services (PCS)-Family and Respite Care with Neighboring States**

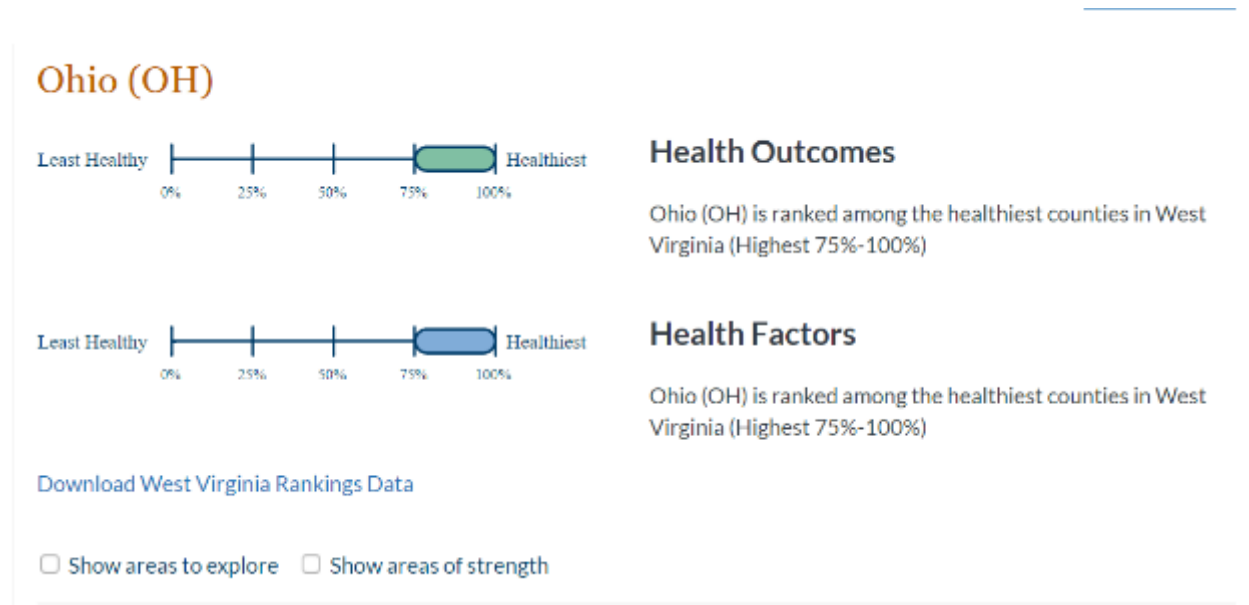
	West Virginia	Kentucky	Maryland	Ohio	Pennsylvania	Virginia
Are parents/legal representatives allowed to be paid workers?	Yes	Yes, if self-directing	Yes, if self-directing	Yes (adults only in IO Waiver)	Yes, adults only	Yes, adults only under limited circumstances
Available units/hrs PCS-Family	Age <18= 5hrs/day based on in/out of school calendar  Age ≥18=8 hrs/day	<b>*MPW:</b> 40 hrs/week combined with <u>all</u> services (except Case Mgt and Respites) <b>*SCL:</b> 40 hrs/week	82 hrs/week; though family workers limited to 40 hrs/week per provider	<b>*IO:</b> No set limit <b>*Level 1:</b> Cannot exceed \$5,000/yr for ALL services <b>*SELF:</b> Max for ALL services is \$40K/yr for adults \$25K/yr for children	<b>*PFDS:</b> \$30,000/year limit for ALL services <b>*Consolidated:</b> No upper budget limit	<b>IFDDS:</b> 8 hrs/day  <b>ID:</b> 8 hrs/day
Available units/hrs Respite	912 hours/yr or avg of 2.5 hours per day	<b>*MPW</b> - 830 hrs/yr <b>*SCL:</b> 830 hrs/yr	45 days/yr (daily rate); no more than 28 consecutive days/yr	<b>*Community</b> 60 days/yr <b>*Residential</b> - 90 days/yr – <b>*Informal</b> (only available in Level 1) max \$5K/yr for ALL services	<b>*PFDS:</b> 480 units/yr or 30 days/yr \$30,000/year limit for ALL services; 480 units/yr <b>*Consolidated:</b> No upper budget limit	<b>IFDDS:</b> 480 hrs/yr  <b>ID:</b> 720 hrs/yr
Additional Information	Average costs program wide are \$66,000 per person; upper budget limit dependent on service limits per age and living arrangement	*2 Waiver programs *Michelle P. Waiver ( <b>MPW</b> ) *Supports for Community Living ( <b>SCL</b> )– does not allow a live-in caregiver to provider more than 40 hrs/week of service; must have intellectual AND developmental disability to qualify	*Community First Choice Waiver	*3 Waiver programs *Individual Options ( <b>IO</b> ) *Self-Empowered Life Funding ( <b>SELF</b> ) <b>*Level 1</b> Waiver offers comparable Respite as available in WV - has a max limit of \$5,000/service year for ALL services	*2 Waiver programs somewhat comparable to WV *Person/Family Directed Support ( <b>PFDS</b> ) <b>*Consolidated</b> Waiver – no upper budget limit *PA does not generally allow parents/LR to be provider	2 Waiver programs *Individual and Family Disabilities Support ( <b>IFDDS</b> ) serves age 6 and above *Intellectual Disability ( <b>ID</b> ) serves below age 6 *Average costs for those <6=\$28,038; for those ≥6=\$65,994

<https://dhhr.wv.gov/bms/Programs/WaiverPrograms/IDDW/Documents/IDDW%20Report%20to%20Governor%20Jim%20Justice.pdf>

State	Number on Wait List(s)
West Virginia	1,068
Kentucky	4,000+
Maryland	5,000+
Ohio	30,000+
Pennsylvania	9,000+
Virginia	13,000+

<https://dhhr.wv.gov/bms/Programs/WaiverPrograms/IDDW/Documents/IDDW%20Report%20to%20Governor%20Jim%20Justice.pdf>

Ohio County Health Rankings:





## County Demographics +

	Ohio (OH) County	Trend ⓘ	Error Margin	Top U.S. Performers ⓘ	West Virginia
--	------------------	---------	--------------	-----------------------	---------------

### Health Outcomes

#### Length of Life

Premature death	ⓘ 9,900		8,800-11,000	5,400	10,800
-----------------	---------	--	--------------	-------	--------

#### Quality of Life

Poor or fair health	ⓘ 20%		17-23%	14%	24%
Poor physical health days	ⓘ 4.6		4.1-5.0	3.4	5.3
Poor mental health days	ⓘ 5.4		5.0-5.9	3.8	5.8
Low birthweight	<u>9%</u>		8-10%	6%	9%

#### Additional Health Outcomes (not included in overall ranking) +

### Health Factors

#### Health Behaviors




Adult smoking	ⓘ 22%		18-25%	16%	27%
Adult obesity	32%		28-37%	26%	38%
Food environment index	7.9			8.7	6.9
Physical inactivity	24%		20-28%	19%	28%
Access to exercise opportunities	86%			91%	59%
Excessive drinking	ⓘ 16%		15-17%	15%	14%
Alcohol-impaired driving deaths	40%		28-51%	11%	25%
Sexually transmitted infections	271.2			161.2	198.2
Teen births	<u>22</u>		20-25	12	31

	Ohio (OH) County	Trend ⓘ	Error Margin	Top U.S. Performers ⓘ	West Virginia
--	------------------	---------	--------------	-----------------------	---------------

### Clinical Care


Uninsured	6%		5-7%	6%	8%
Primary care physicians	600:1			1,030:1	1,280:1
Dentists	900:1			1,210:1	1,760:1
Mental health providers	310:1			270:1	730:1
Preventable hospital stays	<u>6,067</u>			2,565	5,748
Mammography screening	<u>43%</u>			51%	39%
Flu vaccinations	<u>48%</u>			55%	42%

## Social & Economic Factors

High school completion	93%		92-95%	94%	87%
Some college	70%		64-76%	73%	56%
Unemployment	4.5%			2.6%	4.9%
Children in poverty	<b>18%</b>		10-25%	10%	21%
Income inequality	5.4		4.8-6.1	3.7	5.0
Children in single-parent households	28%		21-34%	14%	25%
Social associations	20.1			18.2	13.0
Violent crime	678			63	330
Injury deaths	<b>111</b>		96-125	59	124

Additional Social & Economic Factors (not included in overall ranking) +

## Physical Environment

Air pollution - particulate matter	8.2			5.2	7.8
Drinking water violations	Yes				
Severe housing problems	10%		8-11%	9%	11%
Driving alone to work	<b>82%</b>		79-85%	72%	82%
Long commute - driving alone	21%		18-24%	16%	33%

Additional Physical Environment (not included in overall ranking) +

Note: Blank values reflect unreliable or missing data

Countyhealthrankings.org, 2021 data excluding deaths from COVID-19

Prevalence of Chronic Disease in Ohio County compared to the US and the state of WV:

Chronic Disease	US Prevalence	WV Prevalence	Ohio County Greater than WV Prevalence	Ohio County No Significant Difference from WV Prevalence	Ohio County Lower than WV Prevalence
Heart Attack	4.6%	8.6%		X	
Angina or Coronary Heart Disease	4.3%	8.3%		X	
Stroke	3.4%	4.4%			X
Cardiovascular Disease	9.1%	15.5%		12.8%	
Diabetes	11.4%	16.2%			9.8%
Pre-Diabetes	Not Available	11.8%		X	
Skin Cancer	6.2%	7.7%			X
Other Cancer	6.8%	8.0%		X	
Overall Cancer	11.7%	14.1%			10.7%
Lifetime Asthma	14.5%	16.3%		X	
Current Asthma	8.9%	12.3%		13.4%	
COPD	6.8%	15.3%			11.4%
Arthritis	25.8%	40.1%			X
Kidney Disease	3.1%	4.6%		X	
Depression	18.3%	26.6%		22.0%	

West Virginia Behavioral Risk Factor Surveillance Report, 2018,

<http://www.wvdhhr.org/bph/hsc/pubs/brfss/2018/BRFSS2018.pdf>

Ohio County Behavioral Risk Factors and Health Conditions 2014-2018:

<b>Ohio County</b>	<b>Percentage</b>	<b>County Rank</b>	<b>Significance vs. WV</b>
Fair or Poor Health	19.9	51	Lower
No Health Care Coverage (18-64)	9.4	36	NS
Obesity	30.6	51	Lower
Obese or Overweight	66.5	46	NS
Physical Inactivity	26.4	42	NS
Current Smoking	25.5	35	NS
Smokeless Tobacco Use	5.9	50	NS
Binge Drinking	13.7	8	NS
Cardiovascular Disease	12.8	33	NS
Diabetes	9.8	53	Lower
Cancer	10.7	51	Lower
Current Asthma	13.4	18	NS
COPD	11.4	44	NS
Arthritis	32.4	50	Lower
Depression	22.0	37	NS

*NS=no significant difference from WV prevalence*

*West Virginia Behavioral Risk Factor Surveillance Report, 2018,*  
<http://www.wvdhhr.org/bph/hsc/pubs/brfss/2018/BRFSS2018.pdf>

## **Childhood Education/Youth Programs**

### **Community Stakeholder Childhood Education/Youth Programs Focus Group**

Ohio County Community Needs Assessment  
Community Stakeholder Focus Group Responses  
 Childhood Education/Youth Programs  
 March 10, 2021 @ 10:00 am  
 14 Participants

Childhood Education/Youth Programs: *Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.), Early Childhood, Child Day Care (including before and after school care), and After School Programs (4-H, Scouts, Anchor, etc.)*

1. What are the barriers or challenges to providing and/or receiving Childhood Education/Youth Programs services in Ohio County?
  - Using virtual technologies can be limiting (lack of technology, internet, etc.)
  - Childcare centers have long wait lists
  - Childcare staff are underpaid with high staff turnover – difficult to maintain quality staff
  - Transportation to childcare services

- Physicians are hesitant to refer to childhood programs (Birth-to-Three, etc.)
  - Childcare serving children with special needs
  - Difficult to find services for 3-year-old children (i.e., preschool, early learning, socialization, etc.).
  - Funding for some services is restrictive or non-existent
  - Licensing guidelines are restrictive
  - Mental health issues impact childcare and other services for children – lack holistic programs and services for children
  - Grandparents raising grandchildren with trauma or other special needs
  - Stigma – women with SUD or other high-risk issues
  - Staffing and volunteer issues for 4-H clubs impacts number of kids that can be served
  - Transient staff at many organizations – large amount of staff turnover after being trained and bonds are made with children
  - Some staff struggle to work remotely
  - Turnover of families follow turnover of staff
  - Child protective services need extra training and support
2. Thinking about Childhood Education/Youth Programs services, what are the gaps that exist in the delivery system in Ohio County?
- Education and support for parents
  - Parents need to be more engaged in programs and supported (i.e., 4-H, etc.)
  - Lack of foster care families – especially for special needs children
  - Time commitment required for some youth activities (i.e., sports, etc.)
  - Limited or expensive services available for adolescent and youth programs
  - Lacking in extra-curricular activities for kids with special needs
  - Lack of training for staff working with children with disabilities and special needs
  - Not every school has afterschool care programs
  - Summer childcare for school aged kids is lacking
  - Wait list for early intervention, waiver, Birth-to-Three, home visitation services, etc.
3. What specific Childhood Education/Youth Programs services being provided in Ohio County are working well, and why?
- Early childcare and childhood education collaboration among providers is strong
  - Pre-k programs are available and working well together
  - Birth-to-Three services are organized and well run
  - Wrap around services, universal pre-k, childcare, etc. are quality services
  - Backpack programs, extension services, etc.
  - A lot of support organizations and programs exist
  - Schools seem to work well together to provide afterschool services
  - Strong community partnerships dedicated to addressing needs
  - Opportunities to provide food for children afterschool, summer, weekend, etc.
  - YMCA summer programs
4. Are Childhood Education/Youth Programs services well-coordinated in Ohio County?

- Birth-to-Three and Ohio County Schools do a good job of coordinating services and transitioning kids
  - Claudia and the FRN does a great job
  - Child Care Resource Center has also collaborated with a lot of other agencies to help families
5. How has COVID-19 impacted the Childhood Education/Youth Programs service delivery system in Ohio County?
- Cancelled most in-person events, gatherings, etc. (i.e., 4-H)
  - Childcare services have struggled – creating a gap for care of school aged children
  - Lack of access to internet, technology, having an adult present to assist child in use of virtual learning, etc.
  - Had to be more creative and flexible with the way services are provided
  - Resilient children and parents in relearning how to learn and be innovative with activities, trainings, etc. – forced us out of our comfort zones
  - Increase use of technology for telehealth/mental health, learning, etc.
  - Increased parent engagement in some programs
  - People have learned new skills and gained new knowledge
  - Some grandparents raising grandchildren struggle with technology and remote learning
  - Greater collaboration and stronger partnerships among providers
  - Payment for childcare materials, resources, and staffing have been less during the pandemic due to lower state reimbursements
  - Staff burnout has increased during COVID pandemic, restrictions, new regulations, etc.
  - Difficult in finding children that are eligible and meet current requirements for services
  - Parents are overwhelmed and mental health issues have increased leading to less engagement in services
  - Teaching parents to “coach” their children has created better results in many cases
6. What are some ways we can use best practices and/or innovation to improve the Childhood Education/Youth Programs service delivery system in Ohio County?
- Reach out and connect with local colleges and to assess current needs and increase parent and volunteer training opportunities
  - Transportation for things beyond medical or behavioral health appointments such as various things like to a job interviews, youth activities, etc.
  - Expanded use of technology, enhanced broadband, virtual technology training etc., to expand and support service delivery, even beyond county lines
  - Central place or agency to innovate ideas to transform the service system, assist with Individual Education Plans, help write letters and applications for families to apply for services, connect families to basic services and resources, provide basic parent education services, etc.

## Service Recipient Childhood Education/Youth Programs Focus Group

Ohio County Community Needs Assessment

Service Recipient Focus Group Responses

Childhood Education/Youth Programs

March 10, 2021 @ 6:00 pm

7 Participants

Childhood Education/Youth Programs: *Services and therapies for children with disabilities (e.g. speech and physical therapy, social skills groups, etc.), Early Childhood, Child Day Care (including before and after school care), and After School Programs (4-H, Scouts, Anchor, etc.)*

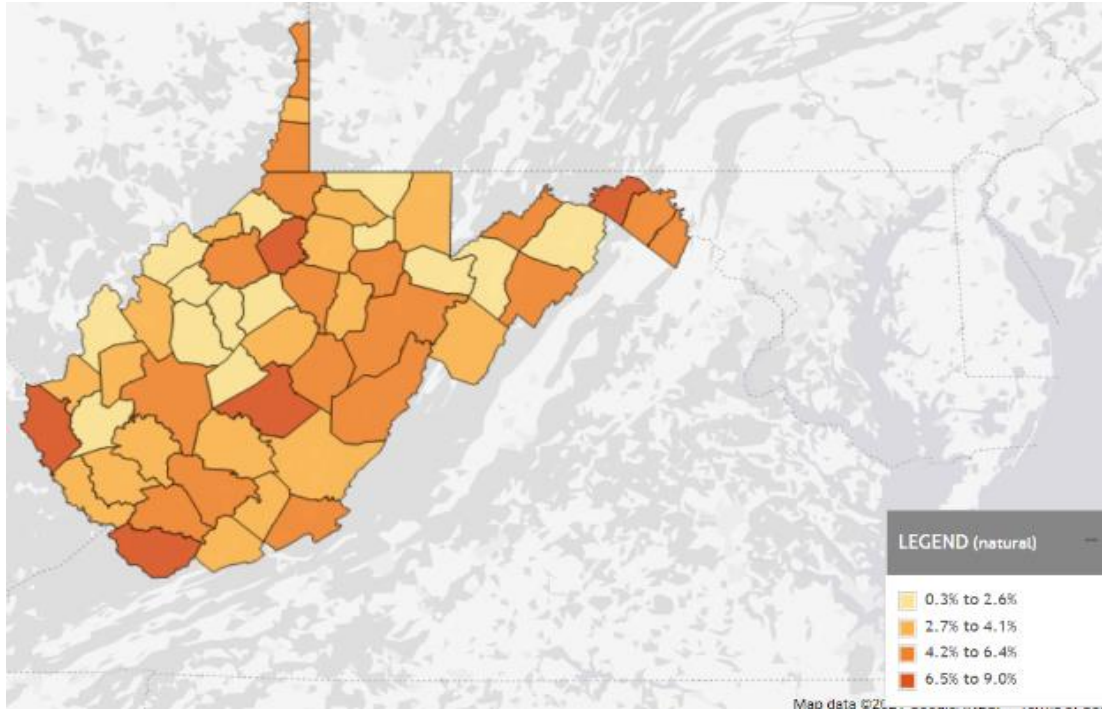
1. What are the barriers or challenges to providing and/or receiving Childhood Education/Youth Programs services in Ohio County?
  - Transportation to a variety of services
  - Wait list for childcare services
  - Fear of childhood education and home visitation services being similar or connected to child protective services
  - Not enough daycare providers for various ages ranges within the same family, specifically for infants
  - Lack of awareness or knowledge of services that exist can be an issue for some families
  - Getting connected with the right services can be difficult
  - Difficult for childcare providers to break even financially due to ratios, space, and reimbursement rates
  - Some obstacles exist in getting access or referral to Birth-to-Three services
  - Recruitment for Girl Scouts is down due to COVID pandemic
  - Qualifications can be too restrictive for some services
  - Ohio County Pre-K registration is a confusing process – first come first serve basis – the online registration system gets overwhelmed and crashes on users
2. Thinking about Childhood Education/Youth Programs services, what are the gaps that exist in the delivery system in Ohio County?
  - Kids that are in the “grey area” – have needs but don’t meet school or outpatient program requirements
  - Lack of in-home parent education programs (i.e., Parents as Teachers, Healthy Families America, etc.)
  - Costs for programs prohibit many families from accessing needed services
3. What specific Childhood Education/Youth Programs services being provided in Ohio County are working well, and why?
  - Birth -to-Three works very well, no waiting list, etc.
  - Birth-To-Three and Easter Seals provides outstanding services – knowledgeable staff, good process, easy access, etc.
  - Wheeling rehab feeding clinic



4. Are Childhood Education/Youth Programs services well-coordinated in Ohio County?
  - Birth-To-Three services are well coordinated with other related services
5. How has COVID-19 impacted the Childhood Education/Youth Programs service delivery system in Ohio County?
  - Lack of socialization for young children and infants – hard to develop strong bonds with staff who are social distancing, wearing masks, etc.
  - Virtual home visitation has pros and cons
  - Gaps in service delivery due to social distancing
  - Daycare has adjusted well with working parents providing services virtually
  - We have learned that parents do not have to be completely involved in all aspects of all programs and service – parents are not being required to be present in all activities – this can be a good thing for the child and/or parent
6. What are some ways we can use best practices and/or innovation to improve the Childhood Education/Youth Programs service delivery system in Ohio County?
  - Using technology, virtual methods, and social media for recruitment and engagement for youth services
  - Aggregate services agency for information and referral to services
  - Resource, support group, or services for siblings of special needs children – holistic and family focused approach
  - Assess need for and best approach for facilitating successful support groups for families with children with special needs
  - Additional Universal Pre-K slots and services available at choice locations with transportation
  - Streamlined registration process for Universal Pre-K services

## Secondary Data

Percent of children without health insurance in WV, Ohio County 3.3%:



<https://datacenter.kidscount.org/data/map/9961-percent-of-children-without-health-insurance?loc=50&loct=5#5/any/false/false/573/2811/19317/Orange/>

School enrollment by grade in Ohio County for 2020-2021:

<b>Grade Level</b>	<b>Enrollment</b>
Pre-K/Early Childhood	275
Kindergarten	414
1	306
2	360
3	364
4	339
5	327
6	385
7	387
8	382
9	390
10	400
11	376
12	351
<b>Total Enrollment</b>	<b>5056</b>

Zoom WV <https://zoomwv.k12.wv.us/Dashboard/dashboard/2056>

Early literacy allocations by county:

**FY 2019-2020 Early Literacy Allocations by County**

<b>County</b>	<b>FY 20 Allocation</b>	<b>County</b>	<b>FY 20 Allocation</b>
Barbour	\$39,017	Mineral	\$64,735
Berkeley	\$291,781	Mingo	\$80,044
Boone	\$63,055	Monongalia	\$159,563
Braxton	\$36,081	Monroe	\$28,177
Brooke	\$30,882	Morgan	\$33,748
Cabell	\$206,501	Nicholas	\$61,852
Calhoun	\$15,671	Ohio	\$79,103
Clay	\$33,789	Pendleton	\$14,737
Doddridge	\$17,781	Pleasants	\$16,300
Fayette	\$105,974	Pocahontas	\$17,222
Gilmer	\$13,270	Preston	\$69,020
Grant	\$25,008	Putnam	\$129,194
Greenbrier	\$78,370	Raleigh	\$198,098
Hampshire	\$47,332	Randolph	\$68,117
Hancock	\$62,374	Ritchie	\$22,407
Hardy	\$39,287	Roane	\$34,023
Harrison	\$165,220	Summers	\$26,297
Jackson	\$68,925	Taylor	\$38,192
Jefferson	\$125,749	Tucker	\$15,245
Kanawha	\$419,520	Tyler	\$20,672
Lewis	\$44,168	Upshur	\$63,887
Lincoln	\$63,817	Wayne	\$112,007
Logan	\$91,555	Webster	\$24,638
Marion	\$124,066	Wetzel	\$42,401
Marshall	\$72,523	Wirt	\$17,526
Mason	\$66,722	Wood	\$199,732
McDowell	\$56,866	Wyoming	\$60,742
Mercer	\$162,017	West Virginia	\$4,265,000

FY 20 allocation funding formula:

- » 50%: Head count enrollment Pre-K-3
- » 50%: Head count low SES enrollment Pre-K-3

<https://wvde.us/wp-content/uploads/2021/01/21347-LeadersOfLiteracy-LOCEA-Report-v9.pdf>

Children receiving Individualized Education Plan or 504 Services in Ohio County by disability:

Age	AU	BD	CD	DB	DF	EG	GF	HI	LD	MD	MM	MS	OH	PH	PS	TB	VI	IC	Total
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	<u>2</u>	0	0	0	<u>2</u>
3	0	0	<u>8</u>	0	0	0	0	0	0	0	0	0	0	0	<u>16</u>	0	0	0	<u>24</u>
4	0	0	<u>25</u>	0	0	0	0	0	0	0	0	0	0	0	<u>16</u>	0	0	0	<u>41</u>
5	<u>6</u>	0	<u>50</u>	0	0	0	0	0	0	0	<u>1</u>	0	<u>1</u>	0	<u>3</u>	0	0	0	<u>61</u>
6	<u>3</u>	<u>1</u>	<u>29</u>	0	0	0	0	<u>1</u>	<u>1</u>	0	<u>5</u>	0	<u>3</u>	0	0	0	0	0	<u>43</u>
7	<u>9</u>	0	<u>30</u>	0	0	0	0	0	<u>5</u>	<u>1</u>	<u>6</u>	<u>1</u>	<u>11</u>	0	0	0	0	0	<u>63</u>
8	<u>1</u>	0	<u>23</u>	0	0	0	<u>5</u>	<u>3</u>	<u>11</u>	0	<u>7</u>	0	<u>11</u>	0	0	0	<u>1</u>	0	<u>62</u>
9	<u>12</u>	<u>1</u>	<u>9</u>	0	0	0	<u>3</u>	0	<u>18</u>	<u>4</u>	<u>14</u>	0	<u>14</u>	0	0	0	0	0	<u>75</u>
10	<u>5</u>	<u>2</u>	<u>5</u>	0	0	0	<u>9</u>	<u>1</u>	<u>20</u>	0	<u>15</u>	0	<u>10</u>	0	0	0	0	0	<u>67</u>
11	<u>7</u>	<u>1</u>	<u>2</u>	0	0	0	<u>5</u>	0	<u>24</u>	<u>3</u>	<u>13</u>	0	<u>17</u>	0	0	0	0	0	<u>72</u>
12	<u>3</u>	0	<u>2</u>	0	0	0	<u>7</u>	<u>1</u>	<u>14</u>	<u>3</u>	<u>13</u>	0	<u>13</u>	0	0	0	0	0	<u>56</u>
13	<u>6</u>	<u>3</u>	<u>1</u>	0	0	0	<u>5</u>	<u>1</u>	<u>18</u>	<u>1</u>	<u>10</u>	0	<u>12</u>	0	0	0	0	0	<u>48</u>
14	<u>8</u>	<u>3</u>	0	0	<u>1</u>	0	0	0	<u>18</u>	<u>2</u>	<u>10</u>	0	<u>14</u>	0	0	0	0	0	<u>56</u>
15	<u>7</u>	<u>3</u>	0	0	0	0	0	<u>1</u>	<u>13</u>	<u>2</u>	<u>10</u>	0	<u>9</u>	0	0	0	<u>1</u>	0	<u>46</u>
16	<u>4</u>	<u>1</u>	<u>1</u>	0	0	0	0	<u>1</u>	<u>18</u>	<u>2</u>	<u>3</u>	0	<u>18</u>	0	0	0	0	0	0
17	<u>5</u>	<u>3</u>	0	0	0	0	0	0	<u>11</u>	<u>3</u>	<u>12</u>	0	<u>9</u>	0	0	0	0	0	<u>43</u>
18	0	0	0	0	0	0	0	0	<u>2</u>	<u>1</u>	<u>5</u>	0	<u>1</u>	0	0	0	0	0	<u>9</u>
19	0	0	0	0	0	0	0	0	0	<u>1</u>	<u>2</u>	0	0	0	0	0	0	0	<u>3</u>
20	<u>1</u>	0	0	0	0	0	0	0	0	0	0	<u>1</u>	0	0	0	0	0	0	<u>2</u>
21	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<u>77</u>	<u>18</u>	<u>185</u>	0	<u>1</u>	0	<u>34</u>	<u>9</u>	<u>173</u>	<u>23</u>	<u>126</u>	<u>2</u>	<u>143</u>	0	<u>37</u>	0	<u>2</u>	0	830

There are approximately 90 students on a 504 plan PK-12 in OCS.

*Leah Stout, Ohio County Schools, Special Education Director*

## Financial Stability

### Community Stakeholder Financial Stability Focus Group

Ohio County Community Needs Assessment  
Community Stakeholder Focus Group Responses  
Financial Stability  
March 11, 2021 @ 10:00 am  
14 Participants

Financial Stability: *Homelessness, Emergency Rent/Mortgage Assistance (Social Service Agencies and Churches), Utility Assistance, Access to Living wage, Employment, Food Access, Re-Entry (Prison and In-Patient Facilities)*

1. What are the barriers or challenges to providing and/or receiving Financial Stability services in Ohio County?
  - Transportation for seniors to appointments, grocery stores, jobs/work, SUD treatment, department of motor vehicles, etc.
  - Funding for needed services and basic living needs
  - Lack of driver license or other necessary identification
  - Unpaid bills and debt leading to poor credit and barriers to services
  - Navigating and accessing safe, affordable, and quality housing
  - Food security – lack of access to groceries/food
  - Transportation barriers prevent people from taking educational classes in the evening
  - Access to virtual services – lack of broadband, technology services, etc.
  - Child support enforcement requirements often requires 50% or more of income
  - Deposits and down payments for housing can be difficult to make
2. Thinking about Financial Stability services, what are the gaps that exist in the delivery system in Ohio County?
  - Only have three units for emergency shelter for families with children
  - Emergency shelters do not provide equal access to the LGBTQ community
  - Access to library and computer services is limited or non-existent
  - Ongoing funding for sustainable programs beyond pilot or demonstration periods – peer recovery, inspire, CABHI, etc.
  - Low wages for many staff creating family instability and turnover
  - High health care costs create barriers for service recipients and employees of agencies and local companies
  - Additional school social workers are needed
3. What specific Financial Stability services being provided in Ohio County are working well, and why?
  - Food security in downtown Wheeling proper – food services from soup kitchen, Catholic Charities, etc.
  - FRN group attacks food security issues

- Strong community collaborations connecting individuals to work, employment, and training opportunities
  - Affordable Care Act opened pathways to Medicaid services – Medicaid expansion
  - Training programs at Northern Community College - workforce, opioid response, etc.
  - Catholic Charities Neighborhood Center’s new homeless outreach coordinator
  - Salvation Army’s warming shelter for folks to be sheltered and be fed
4. Are Financial Stability services well-coordinated in Ohio County?
- Some turf issues exist – primarily related to funding, but overall strong collaboration between providers
  - COVID has created more opportunities for strengthening collaborations and partnerships
  - Could be stronger links in certain areas – basic living needs, etc.
  - Scarce resources create competition for funding, staff, etc.,
5. How has COVID-19 impacted the Financial Stability service delivery system in Ohio County?
- COVID has required providers to shift services they provide and how they deliver them
  - Meetings and services are closed and provided in person
  - Virtual meetings and support groups have become more common
  - Created isolation and lack of connectedness
  - Increase in mental health challenges – exhausted with COVID fatigue
  - Staff shortages, layoffs, and turnover
  - Social distancing and quarantines have been detrimental to the service system
6. What are some ways we can use best practices and/or innovation to improve the Financial Stability service delivery system in Ohio County?
- Be proactive in addressing challenges created for children and families living through the pandemic
  - More flexibility in schedules, staffing, roles, and responsibilities
  - Greater funding, focus, and support for prevention program and services
  - More holistic, systemic, and coordinated approach to service delivery
  - More deep and intentional collaborations to transform the delivery system
  - Transitional housing is a great program that needs refunded and expanded

## Service Recipient Financial Stability Focus Group

Ohio County Community Needs Assessment

Service Recipient Focus Group Responses

Financial Stability

March 11, 2021 @ 6:00 pm

0 participants – 2 written responses were submitted

Financial Stability: *Homelessness, Emergency Rent/Mortgage Assistance (Social Service Agencies and Churches), Utility Assistance, Access to Living wage, Employment, Food Access, Re-Entry (Prison and In-Patient Facilities)*

1. What are the barriers or challenges to providing and/or receiving Financial Stability services in Ohio County?
  - Working with Workforce Development is challenging – they are not responsive and lack prompt communication, particularly with their online system. The lack of clear direction and limited guidance they provide when you file for assistance, especially with unemployment is a major barrier to receiving needed services.
  - Oftentimes, you have to seek help from multiple places, bringing time and transportation constraints to the situation.
  - A lot of people in the "working class" need assistance, especially now, but, because they don't qualify for assistance programs, aren't eligible.
2. Thinking about Financial Stability services, what are the gaps that exist in the delivery system in Ohio County?
  - The waiting list for these kinds of programs is too long.
  - The various agencies and other stakeholders don't work well together or communicate with each other in a way that is helpful to clients. For example, HUD and landlords do not work well together to resolve systemic issues for their clients (i.e., evictions, vouchers).
  - If you've never needed assistance before finding it can be quite the challenge. If you aren't in the system then you're not aware of how to navigate it.
  - It's easy for the community at large to think housing someone is easy because they're unaware of the requirements and restraints.
3. What specific Financial Stability services being provided in Ohio County are working well, and why?
  - Food giveaways - access to food in the community has really helped a lot of families that needed food. Food pantries really help a lot.
  - COVID-19 has put a strain on all programs and services, so not sure what is working well now.
4. Are Financial Stability services well-coordinated in Ohio County?
  - Not well coordinated – lacks communication among agencies.

- Lack of access for people who may find themselves in a financial slump who don't qualify for assistance programs.
  - People not working within these systems are not aware of this as far as collaboration and cross communication.
  - There is always a need for more coordination of services, whether that's programming or understanding as to why things work the way they do.
5. How has COVID-19 impacted the Financial Stability service delivery system in Ohio County?
- COVID-19 has increased needs in most every aspect.
6. What are some ways we can use best practices and/or innovation to improve the Financial Stability service delivery system in Ohio County?
- Workforce needs an updated website where you can take care of your entire application process and see your case file online.
  - A website that is easy to go to that tells you all of the services and resources available in the area and how to apply for them.
  - Holistic approach where every aspect of the circumstance is acknowledged. For instance, is it someone who needs help often or just once? Is chronic needs something that should be addressed and how can education as to how to improve circumstance be incorporated.

## Secondary Data

### Wheeling Area's Recent Economic Performance:

Several key facts behind the Wheeling Area's recent economic performance are as follows:

- After adding more than 3,000 jobs between early 2017 and late-2018, regional employment contracted by a slightly larger amount over the subsequent year or so.
- Job losses only accelerated as the COVID-19 pandemic hit in March, leading to a total job loss of 8,000 in two months' time. Just under half of those jobs have been recovered to date, which lags the state's recovery progress.
- Leisure and hospitality and retail trade suffered the region's largest job losses during the initial pandemic response, but the leisure and hospitality sector has seen a relatively weak rebound due to continued restrictions on maximum capacity.
- The region's coal industry has experienced major turmoil over the past year or so. Combined with ongoing market trends, the COVID-19 pandemic helped to push regional coal production down by more than one-third during the first half of the year.
- Natural gas output from horizontal wells has skyrocketed over the past year in Marshall, Ohio and Wetzel counties, but production has declined in Belmont County. The number of rigs deployed in the region has been cut in half since last year, which has weighed on new well development.



- The measured unemployment rate surged to its highest level since the early 1980s as a result of the COVID-19 pandemic.
- Unemployment has fallen sharply since mid-April but remains more than a percentage point higher than the statewide average.
- Per capita income growth has easily surpassed state and national averages in recent years. Ohio County residents have the state's highest income levels.

[https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau\\_be](https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau_be)

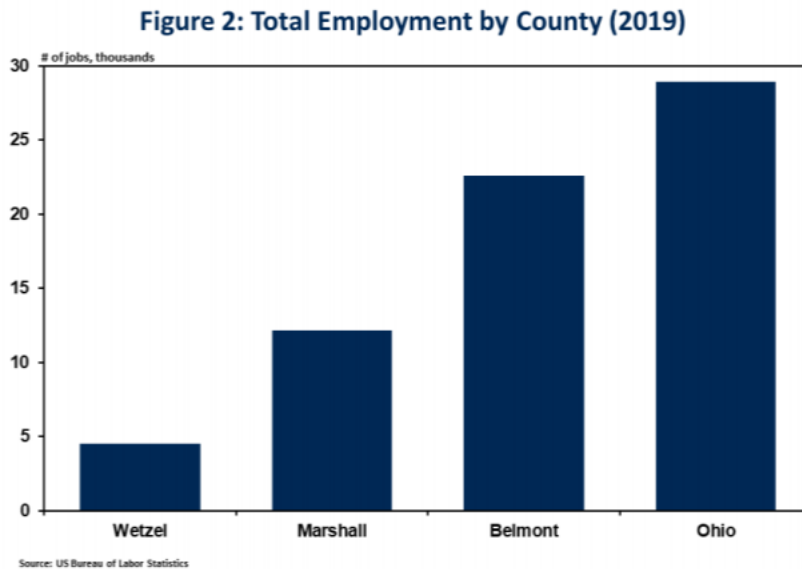
#### Economic Forecast for Wheeling Area:

Our forecast calls for the Wheeling Area to recover from the COVID-19 recession. The region's large energy sector will expose it to continued volatility going forward, but the area should enjoy growth that exceeds the statewide average during the outlook period. Key aspects of our forecast are as follows:

- We expect employment to increase at an average annual rate of 1.4 percent in the region over the next five years.
- Professional and business services and natural resources & mining will produce the strongest job growth during the outlook period.
- The manufacturing sector is expected to register moderate job growth after large losses that stretched over the past few decades.
- Gains could surprise on the upside, though stronger-than-expected growth will depend greatly up the fate of the proposed ethane cracker in Belmont County.
- Unemployment is expected to fall sharply over the next couple of years, before settling in the mid- to low- 5 percent range in 2023 and beyond.
- Inflation-adjusted per capita income is expected to rise at an annual average rate of roughly 1.8 percent between 2021 and 2025, led by wage gains.
- Demographic trends are expected to remain a net negative for the region, as population losses persist for the entirety of the outlook period.
- All four counties in the region are expected to lose residents, though Wetzel County will likely experience the largest percentage declines going forward.

[https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau\\_be](https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau_be)

Wheeling Area Unemployment by County:



[https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau\\_be](https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau_be)

Wheeling, WV-OH Metropolitan Statistical Area Employment Data for 2021:

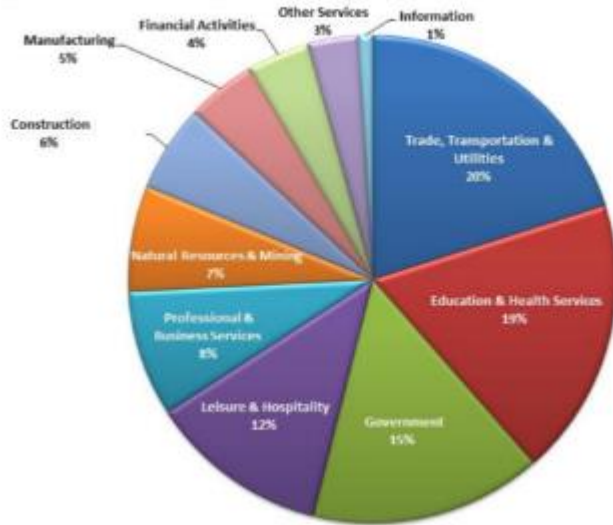
Month	Labor Force	Employment	Unemployment	Unemployment Rate
January 2021	61,998	57,252	4,746	7.7
February 2021	62,348	57,759	4,589	7.4
March 2021	61,958	58,024	3,934	6.3
April 2021	62,929	59,043	3,886	6.2
May 2021	61,197 (P)	27,717 (P)	3,480 (P)	5.7 (P)

*P=Preliminary Data*

<https://data.bls.gov/cgi-bin/surveymost>

Wheeling Area Unemployment by Sector:

**Figure 3: Wheeling Area Employment Distribution by Sector**

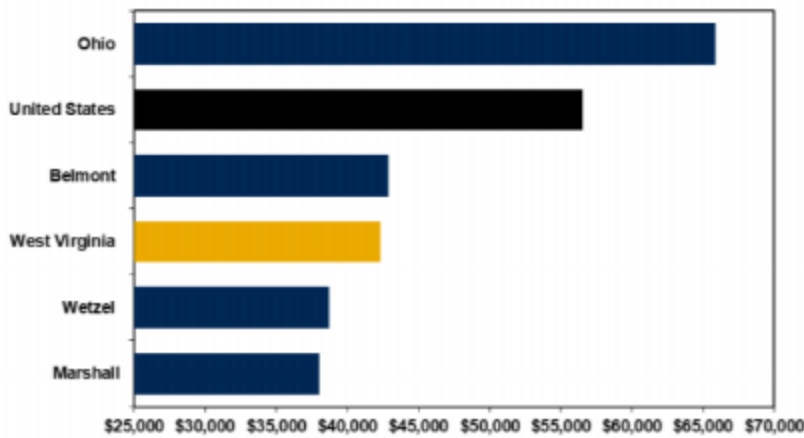


Source: US Bureau of Labor Statistics: 2019 data.

[https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau\\_be](https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau_be)

Per Capita Income by Area:

**Figure 7: Per Capita Personal Income by Area (2019)**

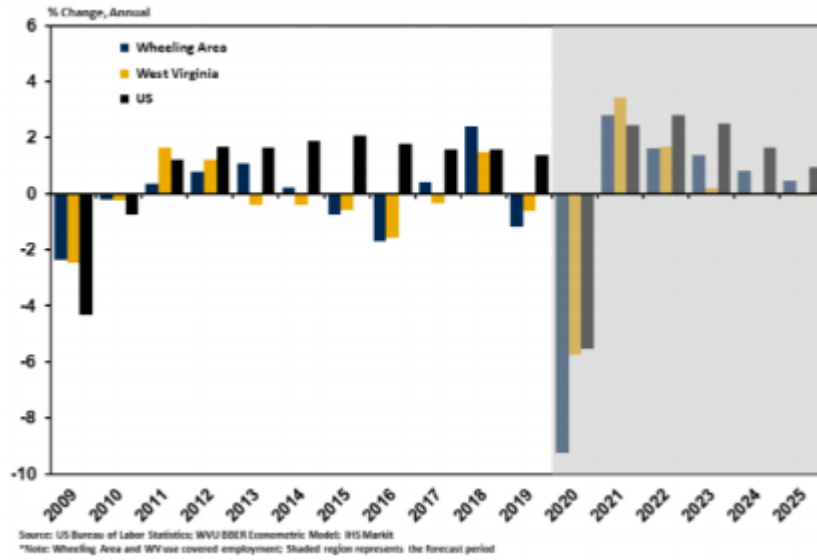


Source: US Bureau of Economic Analysis.  
\*Note: The 2019 figure for counties is a preliminary estimate.

[https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau\\_be](https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau_be)

Wheeling Area Employment Growth Forecast:

Figure 10: Employment Growth Forecast



[https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau\\_be](https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau_be)

Poverty Guidelines for 2021:

**HHS POVERTY GUIDELINES FOR 2021**

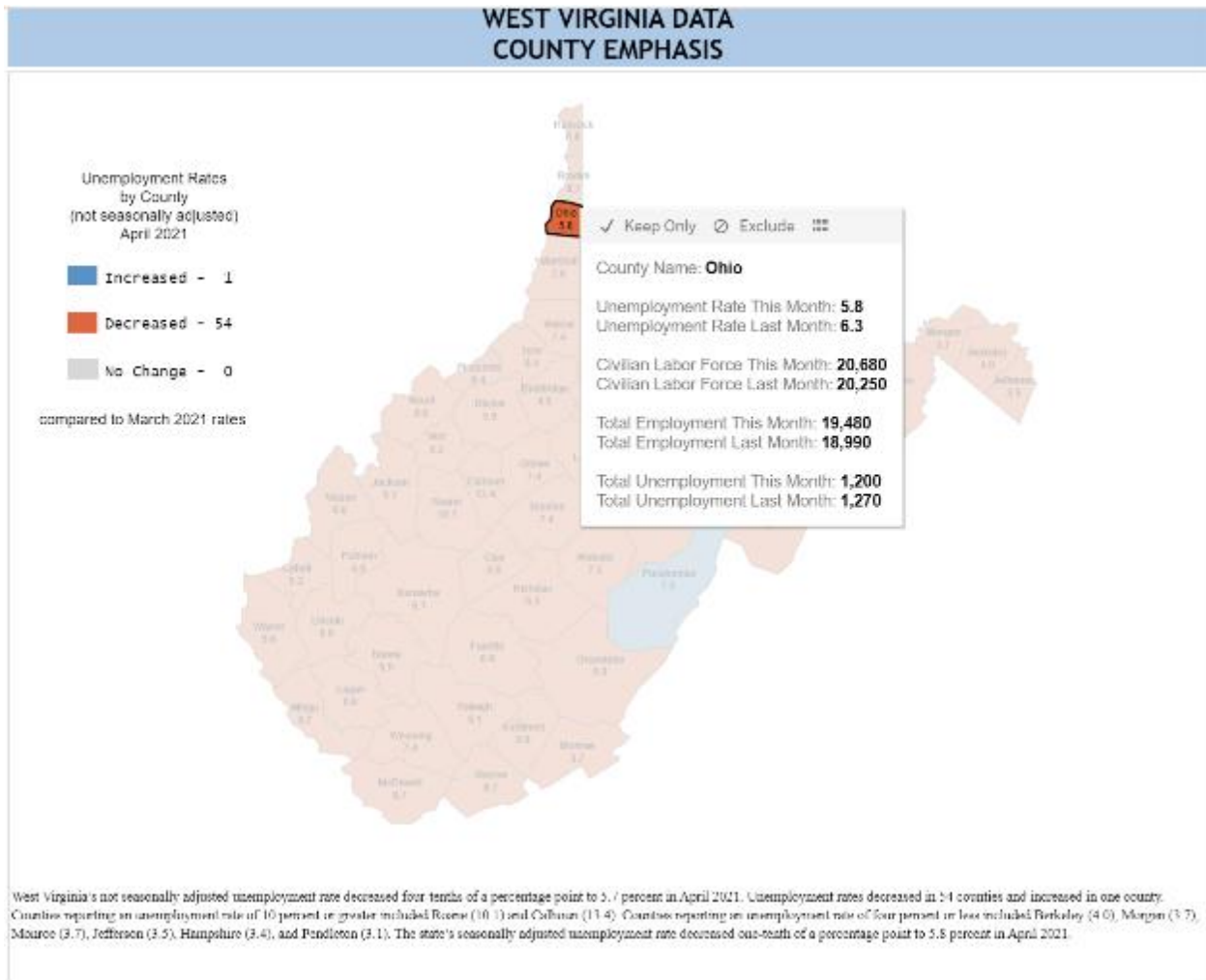
The 2021 poverty guidelines are in effect as of January 13, 2021  
[Federal Register Notice, February 1, 2021 - Full text.](#)

2021 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA	
PERSONS IN FAMILY/HOUSEHOLD	POVERTY GUIDELINE
For families/households with more than 8 persons, add \$4,540 for each additional person.	
1	\$12,880
2	\$17,420
3	\$21,960
4	\$26,500
5	\$31,040
6	\$35,580
7	\$40,120
8	\$44,660

Occupational Employment and Wage Estimates for Wheeling Area:

Full chart available at: [https://www.bls.gov/oes/current/oes\\_48540.htm](https://www.bls.gov/oes/current/oes_48540.htm)

Ohio County Unemployment Rates:



<http://lmi.workforcewv.org/DataRelease/CountyRelease.html>

## Appendix C: References

- 2011-2018 Statewide Permanency Trends.* (2020, May 8). Retrieved May 2021, from West Virginia Supreme Court of Appeals: <http://www.courtswv.gov/public-resources/CAN/pdfs/TrendReport2020.pdf>
- 2021 Food Access Profile Ohio County.* (n.d.). Retrieved May 2021, from WV Food Link: <http://foodlink.wvu.edu/wp-content/uploads/2021/05/Ohio-County-Profile.pdf>
- 2021 Heart Disease and Stroke Statistics Update Fact Sheet.* (n.d.). Retrieved May 2021, from American Heart Association: <https://www.heart.org/-/media/phd-files-2/science-news/>
- About Northwood Health Systems.* (n.d.). Retrieved May 2021, from Northwood Health Systems: <https://northwoodhealth.e3applicants.com/about-us>
- Afterschool in West Virginia.* (n.d.). Retrieved June 2021, from Afterschool Alliance: <https://afterschoolalliance.org/policyStateFacts.cfm?state=WV>
- Analysis of the West Virginia Intellectual and Developmental Disabilities Waiver Waitlist.* (2019, December). Retrieved February 2021, from West Virginia Department of Health and Human Resources: <https://dhhr.wv.gov/bms/Programs/WaiverPrograms/>
- ASC Demographic and Housing Estimates.* (n.d.). Retrieved 2021, from US Bureau of the Census: <https://data.census.gov/cedsci/table?g=0400000US54&d=ACS%201-Year%20Estimates%20Data%20Profiles&tid=ACSDP1Y2019.DP05&hidePreview=false>
- Backpack Project.* (2020). Retrieved June 2021, from West Virginia Reentry Councils: <https://wvreentry.org/backpack-project/>
- CCCS of the Mid-Ohio Valley.* (n.d.). Retrieved June 2021, from West Virginia CCCS: <https://www.wvcccs.org/>
- Cognitive Behavioral Therapy Core Skills.* (2020). Retrieved April 2021, from West Virginia School Health Technical Assistance Center: <https://livewell2.marshall.edu/MUTAC/mental-health/tools-and-resources/clinical-practice-tools/>
- College-Going Rate of WV Public High School Graduates at a Glance.* (2020). Retrieved May 2021, from West Virginia Higher Education Policy Commission: <https://www.wvhepc.edu/resources/data-and-publication-center/cgr/>
- Data by Issue.* (n.d.). Retrieved May 2021, from Prosperity Now Scorecard: <https://scorecard.prosperitynow.org/data-by-issue#finance/localoutcome>
- Data Dashboard.* (n.d.). Retrieved April 2021, from West Virginia Department of Health and Human Resources Office of Drug Control Policy: <https://dhhr.wv.gov/office-of-drug-control-policy/datadashboard/Pages/default.aspx>
- Data Visualization.* (n.d.). Retrieved May 2021, from West Virginia Coalition to End Homelessness: <https://wvceh.org/tools-resources/data-visualization.html>

- Division of Primary Care.* (2021). Retrieved May 2021, from West Virginia Department of Health and Human Resources: <https://dhhr.wv.gov/dpc/primarycare/Pages/county-details.aspx?County=ohio>
- Early Learning Longitudinal Study Results Shared at West Virginia Board of Education Meeting.* (2021, May 12). Retrieved June 2021, from West Virginia Department of Education: <https://wvde.us/early-learning-longitudinal-study-results-shared-at-wv-board-of-education-meeting/>
- Eligible children served by Head Start (ages 3-4) in West Virginia.* (2021). Retrieved May 2021, from The Annie E. Casey Foundation Kids Count Data Center: <https://datacenter.kidscount.org/data/tables/3411-eligible-children-served-by-head-start-ages-3--4?loc=50&loct=5#detailed/5/6986-7040/false/869,36,867,133,35,18,17,16,15,14/any/7026>
- Employment Opportunities.* (2021). Retrieved June 2021, from West Virginia Division of Personnel: <https://personnel.wv.gov/Pages/default.aspx>
- Feed to Achieve.* (n.d.). Retrieved June 2021, from West Virginia Department of Education: <https://wvde.us/child-nutrition/feed-to-achieve/>
- Food Access.* (2018). Retrieved May 2021, from Grow Ohio Valley: <http://www.growov.org/what-is-food-access-.html>
- Food Pantry.* (2021). Retrieved May 2021, from The House of the Carpenter: <https://houseofthecarpenter.com/program/food-pantry/>
- Girl Scout Troup 1088 - Wheeling, WV.* (n.d.). Retrieved June 2021, from Facebook: <https://www.facebook.com/Troop1088/>
- Glasmeier, A. K., & Technology, M. I. (2021). *Living Wage Calculation for West Virginia.* Retrieved June 2021, from Living Wage Calculator: <https://livingwage.mit.edu/states/54>
- Housing Needs by State/West Virginia.* (2021). Retrieved June 2021, from National Low Income Housing Coalition: <https://nlihc.org/housing-needs-by-state/west-virginia>
- Kids Count Data Book 2021.* (n.d.). Retrieved May 2021, from The Annie E. Casey Foundation: <https://www.aecf.org/interactive/databook/?l=54>
- Kids Count Data Center.* (2021). Retrieved May 2021, from The Annie E. Casey Foundation: <https://datacenter.kidscount.org/data/tables/9961-percent-of-children-without-health-insurance?loc=50&loct=5#detailed/5/6986-7040/false/573,16/2811/19317>
- Leading Indicators for Chronic Diseases and Risk Factors.* (2021). Retrieved May 2021, from Centers for Disease Control and Prevention: <https://chronicdata.cdc.gov/>
- Lego, B., & Deskins, J. (2020). *Wheeling Area Economic Outlook 2021-2025.* Retrieved June 2021, from West Virginia University The Research Repository: [https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau\\_be](https://researchrepository.wvu.edu/cgi/viewcontent.cgi?article=1321&context=bureau_be)



- Licensed Child Care Centers in Ohio.* (2021). Retrieved May 2021, from The Annie E. Casey Foundation Kids Count Data Center: <https://datacenter.kidscount.org/data/tables/3435-licensed-child-care-centers?loc=50&loct=5#detailed/5/7020/false/>
- Mancan Wheeling.* (2021). Retrieved May 2021, from Mancan: <https://www.mancan.com/wheeling>
- May 2020 State Occupational Employment and Wage Estimates West Virginia.* (2021, March 31). Retrieved June 2021, from US Bureau of Labor Statistics: [https://www.bls.gov/oes/current/oes\\_wv.htm](https://www.bls.gov/oes/current/oes_wv.htm)
- McCallister, J. (2019, December). *Critical Incident Annual Report: Child Fatalities and Near Fatalities Due to Abuse and Neglect.* Retrieved May 2021, from West Virginia Department of Health and Human Resources Bureau for Children & Families: [https://dhhr.wv.gov/bcf/Reports/Documents/2019\\_BCF\\_Critical\\_Incident%20\\_Report.pdf](https://dhhr.wv.gov/bcf/Reports/Documents/2019_BCF_Critical_Incident%20_Report.pdf)
- Median Household Income of the Total Population by County: 2019.* (n.d.). Retrieved May 2021, from US Bureau of the Census: <https://www.census.gov/content/dam/Census/library/visualizations/2020/demo/p30-08/f1-mp-19.pdf>
- Member Hospitals and Health Systems.* (n.d.). Retrieved May 2021, from West Virginia Hospital Association: <https://www.wvha.org/getmedia/3f92da0b-63bd-43fb-b455-09e51086b58a/WVHA-Member-Map.jpg.aspx>
- Mountaineer Rental Assistance Program.* (2017). Retrieved May 2021, from West Virginia Housing Development Fund: <https://www.wvhdf.com/programs/mountaineer-rental-assistance-program>
- Northern Region.* (n.d.). Retrieved May 2021, from Catholic Charities West Virginia: <https://catholiccharitieswv.org/regions/northern-region/>
- Ohio County 4-H.* (n.d.). Retrieved June 2021, from West Virginia Extension Service: <https://extension.wvu.edu/ohio/4h>
- Ohio County Correctional Center and Jail.* (2021). Retrieved May 2021, from West Virginia Division of Corrections and Rehabilitation: <https://dcr.wv.gov/facilities/Pages/prisons-and-jails/occcj.aspx>
- Ohio County Court Information.* (2020). Retrieved May 2021, from West Virginia Judiciary: <http://www.courtswv.gov/lower-courts/counties/ohio.html>
- Ohio County School Programs.* (2021). Retrieved May 2021, from Ohio County Schools: <https://www.boe.ohio.k12.wv.us/>
- Ohio County, WV.* (n.d.). Retrieved 2021, from US Bureau of the Census: <https://data.census.gov/cedsci/profile?g=05000000US54069>

- O'Konski, A. (2021, March 28). Easter Seals. *IDD Services and Therapies*. Retrieved April 2021, from Email
- Oxford Houses of West Virginia*. (2020). Retrieved June 2021, from Oxford House: <https://www.wvoxfordhouse.org/>
- Population of Counties in WV (2021)*. (n.d.). Retrieved 2021, from World Population Review: <https://worldpopulationreview.com/us-counties/states/wv>
- Poverty Guidelines*. (2021, January 15). Retrieved June 2021, from US Department of Health and Human Services: <https://aspe.hhs.gov/poverty-guidelines>
- Process*. (n.d.). Retrieved May 2021, from Jobs & Hope West Virginia: <https://jobsandhope.wv.gov/start/>
- Profiles-WV*. (n.d.). Retrieved May 2021, from Head Start Early Childhood Learning & Knowledge Center: <https://eclkc.ohs.acf.hhs.gov/federal-monitoring/report/grantee-service-profiles?state=WV>
- Programs-Women's Residence & Homeless Shelter*. (2021). Retrieved May 2021, from YMCA Wheeling: <https://ywcawheeling.org/programs/womens-residence/>
- Raymer, C. (2021, May 28). Executive Director Ohio County Family Resource Network. *IDD Waiver Data*. Retrieved from Email
- Resource Guide for Ohio County Families 2020*. (2020). Retrieved June 2021, from West Virginia Family Resource Network: <http://wvfrn.org/wp-content/uploads/2017/05/2020-Resource-Guide-Feb.pdf>
- Resources*. (n.d.). Retrieved May 2021, from National Center for Homeless Education: <https://nche.ed.gov/resources/>
- Resources*. (2021). Retrieved May 2021, from Catholic Charities West Virginia Child Care Resource Center: <https://ccrcwv.org/resources/>
- Robinson, S., & Bell, S. (2020, December). *Small Area Income and Poverty Estimates: 2019*. Retrieved May 2021, from US Bureau of the Census: <https://www.census.gov/content/dam/Census/library/publications/2020/demo/p30-08.pdf>
- School Health*. (2021). Retrieved March 2021, from Wheeling-Ohio County Health Department: <https://www.ohiocountyhealth.com/school-health/>
- State/Territory Profile-West Virginia*. (n.d.). Retrieved March 2021, from Early Childhood Training and Technical Assistance System: <https://childcareta.acf.hhs.gov/state-profiles/profiles/WV>
- Stout, L. (2020, December 21). Ohio County Schools, Special Education Director. *Individualized Education Plan by Disability*. Retrieved March 2021, from Email

- The 2019 Annual Statistics Report on Circuit, Family, and Magistrate Courts.* (n.d.). Retrieved May 2021, from The West Virginia Court System: <http://www.courtswv.gov/public-resources/press/Publications/2019AnnualReportStats.pdf>
- The Unity Center.* (2021). Retrieved June 2021, from Ohio Valley Recovery Inc.: <https://ohiovalleyrecovery.org/>
- Troop 6 Wheeling, WV.* (2010). Retrieved June 2021, from Troop 6 Wheeling, WV Boy Scouts of Amercia: <http://troop6wva.org/>
- Unemployment Assistance.* (n.d.). Retrieved June 2021, from Work Force West Virginia: <https://workforcewv.org/>
- Utility Assistance/LIEAP.* (2021). Retrieved June 2021, from West Virginia Department of Health and Human Resources Bureau for Children and Families: <https://dhhr.wv.gov/bcf/Services/familyassistance/Pages/Utility-Assistance.aspx>
- Utliy Assistance.* (2021). Retrieved June 2021, from The House of the Carpenter: <https://houseofthecarpenter.com/program/utility-assistance/>
- W.Va. Transit Systems.* (n.d.). Retrieved May 2021, from West Virginia Public Transit Authority: <https://wvtransit.com/wva-transit-systems/>
- Welcome to Serenity Hills.* (2021). Retrieved May 2021, from Serenity Hills Life Center: <https://www.serenityhillslifecenter.org/about/>
- West Virginia.* (2021). Retrieved March 2021, from County Health Rankings & Roadmaps: <https://www.countyhealthrankings.org/app/west-virginia/2019/rankings/ohio/county/outcomes/>
- West Virginia Comprehensive Behavioral Health Centers Directory.* (2019, February). Retrieved March 2021, from West Virginia Department of Health and Human Resources Bureau for Behavioral Health: [https://dhhr.wv.gov/bhhf/resources/Documents/WV%20Comprehensive%](https://dhhr.wv.gov/bhhf/resources/Documents/WV%20Comprehensive%20Centers%20Directory.pdf)
- West Virginia Data County Emphasis.* (2021, June 23). Retrieved June 2021, from Work Force West Virginia: <http://lmi.workforcewv.org/DataRelease/CountyRelease.html>
- West Virginia Pandemic EBT.* (n.d.). Retrieved June 2021, from West Virginia Department of Education: <https://wvde.us/wv-pebt/>
- West Virginia's Consolidated State Plan for the Elementary and Secondary Education Act of 1965, as Amended by Every Student Succeeds Act of 2015.* (2018, January 9). Retrieved June 2021, from West Virginia Department of Education: [https://wvde.us/wp-content/uploads/2018/01/WV\\_consolidatedStateplan\\_revision-1.pdf](https://wvde.us/wp-content/uploads/2018/01/WV_consolidatedStateplan_revision-1.pdf)
- West Virginia's Transformative System of Support for Early Literacy: A Progress Report.* (2020, December). Retrieved May 2021, from West Virginia Department of Education:

<https://wvde.us/wp-content/uploads/2021/01/21347-LeadersOfLiteracy-LOCEA-Report-v9.pdf>

*Wheeling Unemployment Office in Wheeling, WV.* (2021). Retrieved June 2021, from County Office: <https://www.countyoffice.org/wheeling-unemployment-office-wheeling-wv-be2/>

*Wheeling, WV Food Pantries.* (2021). Retrieved June 2021, from Food Pantries: <https://www.foodpantries.org/ci/wv-wheeling>

*Wheeling-Ohio County WIC Office.* (2021). Retrieved May 2021, from WIC Programs: [https://www.wicprograms.org/li/wheeling\\_ohio\\_county\\_](https://www.wicprograms.org/li/wheeling_ohio_county_)

*Where to Find Help.* (n.d.). Retrieved June 2021, from West Virginia Coalition to End Homelessness: <https://wvceh.org/where-to-find-help.html>

*WV County Data.* (n.d.). Retrieved April 2021, from West Virginia Department of Health and Human Resources Health Statistics Center: <https://www.wvdhhr.org/bph/hsc/statserv/>

*WV Reentry Councils Community and Resources.* (2020). Retrieved May 2021, from West Virginia Reentry Councils: <https://wvreentry.org/>

*WVBTT Information and Resources.* (n.d.). Retrieved May 2021, from West Virginia Department of Health and Human Resources: <http://www.wvdhhr.org/birth23/resources.asp>

*WVU Medicine Wheeling Hospital Pediatrics.* (n.d.). Retrieved April 2021, from WVU Medicine: <https://wvumedicine.org/wheeling/services/primary-care/pediatrics/>

*ZoomWV.* (2021). Retrieved May 2021, from West Virginia Department of Education: <https://zoomwv.k12.wv.us/Dashboard/dashboard/28116>