

EASTERN SHORE OF VIRGINIA

11/9/2011

Community Needs Assessment



Eastern Shore of Virginia

NEEDS ASSESSMENT

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Accomack & Northampton Counties Departments of Social Services
Accomack & Northampton Counties Extension Services
Accomack & Northampton Counties Health Departments
Accomack-Northampton Planning District Commission
Accomack & Northampton Counties Public Schools
Accomack-Northampton Regional Housing Authority
Accomack County Emergency Management
Chincoteague Community Center
Eastern Shore Area Agency on Aging
Eastern Shore Center for Independent Living
Eastern Shore of Virginia Chamber of Commerce
Eastern Shore Coalition against Domestic Violence
Eastern Shore Community College
Eastern Shore Community Services Board
Eastern Shore of Virginia Housing Alliance
Eastern Shore Literacy Council
Eastern Shore Post
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Introduction

The **Eastern Shore of Virginia**, geographically removed from the rest of Virginia, has had a unique history of settlement and development that can be attributed to agriculture, fishing, tourism and the Pennsylvania Railroad. Bounded by Maryland to the North, it is located at the southern tip of the Delmarva Peninsula. The Eastern Shore of Virginia stretches for 75 miles between the waters of the Chesapeake Bay on the west and the Atlantic Ocean on the east. It consists of two counties - Accomack and Northampton- and hosts a year-round population of 45, 553 people (73% of whom live in Accomack County).¹

The 23-mile long Chesapeake Bay Bridge-Tunnel spans the mouth of the Bay and connects the rural counties and towns of the Eastern Shore to the Hampton Roads metropolitan area and the rest of the state. Terrain is very flat throughout, and dominated by cotton, soybean, vegetable and truck farming, and large-scale chicken farms. At the northern end of the Atlantic side are the beach community of Chincoteague, famous for its wild ponies; and Wallops Flight Facility, a NASA space launch base. Tangier Island, off the western shore in Chesapeake Bay, is also a day tourist destination. Economic development focuses around agriculture and aquaculture, tourism, new and existing businesses, education, and water quality.² The Eastern Shore has become one of the few places on the East Coast that has preserved its pristine marine environment and shoreline eco-system. Residents struggle with balancing this way of life with the growing need to adapt, develop and remain economically relevant.

Project Purpose

In early 2011, the **Eastern Shore Community Services Board** was awarded grant funding from the Virginia Department of Behavioral Health and Developmental Services for the purpose of strengthening local prevention coalitions. The study included implementing a comprehensive community needs assessment to include a survey and holding public, informative sessions throughout the Eastern Shore to gather statistical data regarding barriers for underserved populations and service providers. The culmination of the project was a Community Resource Fair where 275 residents were able to access services and information around health, employment, housing and other supportive services provided by twenty-two service provider agencies. This report summarizes the data collected from those who participated in the research activities. It is the intent that the report and its findings be made available to all agencies, local government and the general public in order to provide statistical data to guide policies and services as well as aid in the award of future funding opportunities.

The Planning Council was engaged as the evaluation agency to facilitate the town hall meetings and focus groups, and to design and implement the community needs survey to better understand the human services delivery system on the Eastern Shore. All elements of the study were developed in collaboration with the project's Planning Committee, which met at least monthly. The Planning Committee, made up of over twenty agencies, represents key service providers across the Eastern Shore that are experienced in receiving and implementing grant-funded projects. Most members also actively participate in the Eastern Shore Continuum of Care Coalition, which addresses housing and support services for the Eastern Shore's homeless and vulnerable populations.

¹ U.S. Census Bureau, population data, 2010. Website: www.census.gov

² Eastern Shore of Virginia Comprehensive Economic Development Strategy, June 2011.

Town Hall meetings / Focus Groups

Four **Town Hall meetings** were held - two in Melfa, one in Exmore and one on the Island of Chincoteague - in order to gather public feedback from residents across the Eastern Shore. Invitations were extended while announcements were made by service provider agencies and through the media (“Talk of the Shore” radio show on 103.3 FM and in the Eastern Shore Post newspaper). Extra effort was made to invite educators, service providers and members of the faith-based community to the Town Hall meetings in order to hear from individuals who are both experienced and active in the issues being discussed. Meetings were held at:

- Eastern Shore Community College: Workforce Development Center – Accomack County (2)
- Chincoteague Community Center – Accomack County
- Maranatha Baptist Church – Northampton County

In addition, three **Focus Group sessions** were conducted. The first was conducted for members of the Planning Committee, which is made up of key service providers. The final focus groups were for participants at the Community Resource Fair. Approximately 115 individuals participated in the various meetings held from April through September 2011.

The key topics for both the Town Hall meetings and focus groups were decided by the members of the Planning Committee together with the evaluator. These five topics were selected as they were deemed to be the most critical barriers that Eastern Shore residents face. This was supported by statistical research.

- Housing
- Transportation
- Employment
- Healthcare
- Education

The experience of the service provider agencies that make up the project’s Planning Committee was that the quality of life for residents of the Eastern Shore is most directly related to these five issues. It was vital to the project’s success to identify the extent to which they exist for residents as well as brainstorm how to address each one. Therefore, the questions posed at the Town Hall meetings and Focus Group sessions asked participants about the **accessibility** and **affordability** of each, as well as for their ideas on how to improve them.

Results of Town Hall meetings and Focus Group sessions

Participants made the following comments and observations:

Adequate employment opportunities, affordable housing and transportation were felt to be insufficient by residents regardless of their socio-economic status. Education as the foundation necessary for residents to obtain employment and thus afford housing and transportation came up while discussing each topic. Healthcare, although increasingly expensive, was deemed overall accessible and affordable by most due to the network of rural health centers around the Eastern Shore. However, the quantity of physicians as well as specialty medical care services are lacking and force residents to travel outside of the Eastern Shore for care.

Employment / Job Training

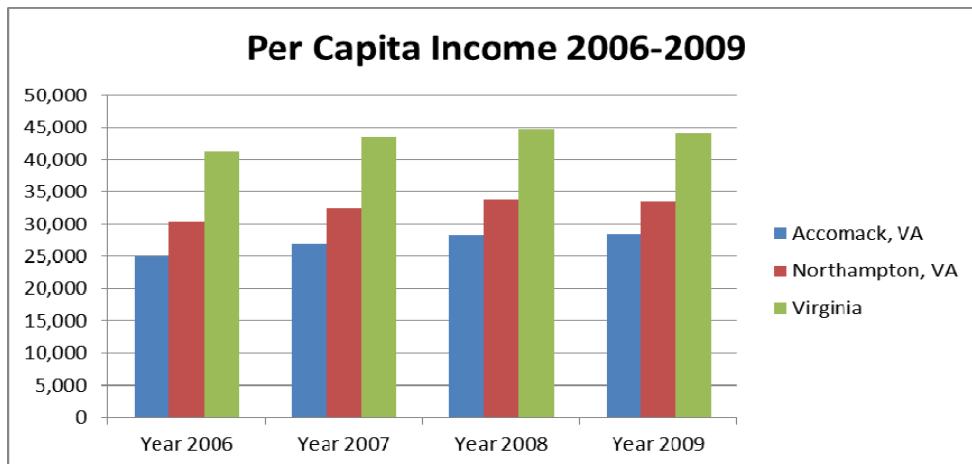
The increase in unemployed households coupled by the limited industries that offer jobs on the Eastern Shore was discussed at length. Many felt that the inadequate infrastructure (sewage, technology, etc.) and isolation of the Eastern Shore, particularly in Northampton County, drove away business development. Some felt the Chesapeake Bay Bridge Tunnel fees are held artificially high and the funds do not end up assisting the residents of the Shore.

Many commented that there was a vital disconnect between employment opportunities and education / job training available in both counties. While a job at NASA would pay a livable wage, it was unlikely a person would be hired if they only completed higher education at Eastern Shore Community College as the degrees offered there do not prepare people for the work at NASA. Some certification / technical programs that once were available on the Eastern Shore, such as auto mechanics, had closed down.

The service industry jobs available – at chicken farms, in tourism, farming or the fishing industry – do not pay enough to afford adequate housing, transportation and healthcare. Too few small businesses exist and the geographic distribution of the jobs available is a hardship for those without their own transportation. Seasonal employment surrounding tourism and agriculture was limited to only a few months each year and did not provide enough income to sustain a living wage.

Young adults tend to leave the Eastern Shore to find employment while more retirees remain. Many participants felt that it was vital to expand employment and business opportunities other than housing development that would provide permanent employment.

When asked about specific job training that was needed on the Eastern Shore in order for residents to find employment, participants responded that the low levels of education and literacy of many residents were a huge issue. Some job trainings named that would be useful on a regular basis were plumbing, electrical, auto mechanics and HVAC. Also discussed was that with advancements in technology, more computer-related training was needed – at both the high schools and community college. It was felt that technical colleges of different sorts would benefit the residents greatly. The limited vision of many to only work at the chicken farms and not strive for more was a concern for many participants.



Source: U.S. Department of Commerce – Bureau of Economic Analysis

Website: <http://www.bea.gov/regional/reis/drill.cfm>

Transportation

While most participants agreed that Star Transit public transit buses were affordable, the routes and hours were extremely limited and did not allow for most households to rely on them for travel between work and home. The buses stop running in the early evening and therefore many rely on family and friends to drive them to and from work. If this is not an option, other drivers (i.e. gypsy cabs) charge exorbitant rates since taxis are not available.

Vulnerable populations, such as the elderly and disabled, have even fewer transportation options. Very little transportation is offered to ensure they get to medical appointments although some providers within Hampton Roads cross the Bay Bridge to bring them to appointments located in Norfolk or Virginia Beach. Medicaid taxis also come across the Bay Bridge and often require up to two weeks' notice for the appointment.

Residents felt that city buses were needed between the larger towns, reaching a large portion of the population that live and work within town limits. This would especially assist younger and lower income households. For those that ride bikes, safety was noted since there are not official bike lanes and they ride along the busy roads with large trucks and speeding traffic. Lanes are not clearly delineated in many areas. The quality of the roads was noted to be good in most places of the Eastern Shore, on the highway as well as on country lanes.

Housing

Housing issues were discussed at length and it was noted that there was a visible, growing inventory of substandard housing along the Eastern Shore as many foreclosed homes were abandoned for long periods. The limited water and sewage systems affected the opportunities of many to build new homes while the cost of oil and other utilities was very high for many households.

While new housing developments have cropped up over the past two decades, these were not affordable for most residents and were mostly purchased as vacation or retiree homes for people from other regions or states. The building of new housing developments has also significantly increased the median price of homes, placing more of a barrier for long-time residents to afford one. There is a limited inventory of apartments in both counties as well as subsidized housing for low-income and disabled households.

	Housing Stock	Median Value	Substandard
Accomack County	75% = detached, single units	\$52,700	7.5%
	25% = mobile homes, trailer units		
Northampton County	78% = detached, single units	\$57,700	25%
	14% = mobile homes	(\$77,500 – new)	
	8% = other		

Source: Accomack-Northampton Planning District Commission: Chesapeake Bay Bridge-Tunnel Toll Impact Study, 2001

Participants repeatedly stated that there were very few playgrounds, fields and community centers for entertaining children and hosting youth activities.

Healthcare

Overall, participants at the various Town Hall meetings and focus groups felt that their primary health care needs were met adequately through either their private practitioners or at the rural health centers. (Both counties were deemed both a Health Professional Shortage Area and Medical Underserved Area for primary care, mental health and dental health and are therefore eligible for federally qualified community health centers.)³ Several touted the quality of care offered at the health centers. Some felt the wait for appointments was not reasonable and participants in Chincoteague, in particular, related their preference to travel to Maryland for medical care where more private practitioners were available. Some residents also noted their preference to receive medical care at Hampton Roads' facilities.

There was considerable concern about the lack of emergency services and urgent care along the Eastern Shore and about the impending move of the Shore Memorial Hospital of its inpatient care out of Northampton County and into some, the distance between providers presented extremely difficult barriers. Others felt the takeover of the hospital by Riverside Health Systems would attract more providers, particularly for specialty care services.

According to the American Community Survey data from 2008-2009, the uninsured rate for the non-elderly population of the Eastern Shore was 16.1%.

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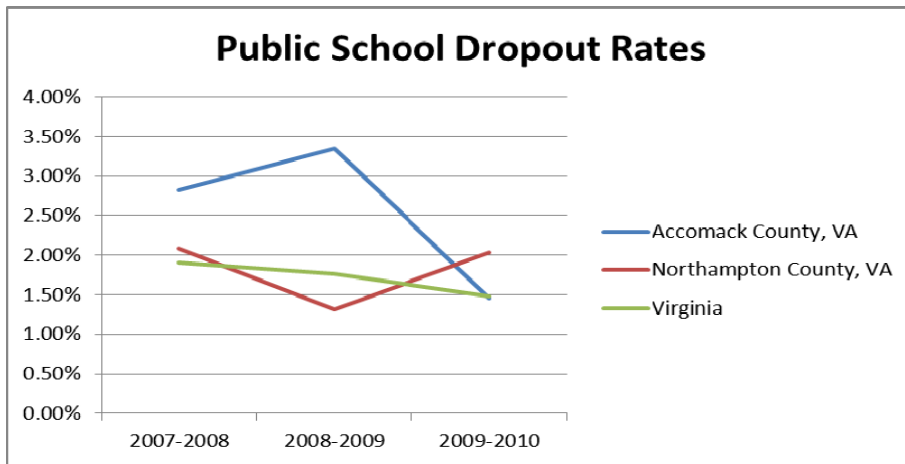
Various specialty care services is in demand and not available on the Eastern Shore. Many residents go without care simply because they cannot afford those services and their employers do not provide health insurance coverage for them. It was noted that physicians often come to the Eastern Shore on Health Corps programs only to leave once their debt is fulfilled. This creates a problem for continuity of care and building trusting relationships with health professionals.

Education

While the residents of Chincoteague Island were very positive about the quality of the public education available to them, other areas expressed concern about limited resources and how it was affecting the education of their children. Funding for school programs and transportation was insufficient and most after-school and summer programs were cut. Some children riding school buses were forced to travel as much as two hours in each direction. In addition, teacher's salaries were among the lowest in the state and, like physicians, many tend to leave for higher paying jobs elsewhere after a short period.

It was noted that parental involvement was missing for many schools and without it the responsibility of children's education lay solely on the school system, which is ill-equipped to handle it. Tutoring programs are available through some service provider agencies and churches but much more is needed. Hispanic student enrollment has nearly doubled since the 2004-05 school year in both school divisions, requiring additional services to ensure those children are learning and parents receiving important communications.

³ Health Resources Services Administration, website: <http://hpsafind.hrsa.gov/> and <http://muafind.hrsa.gov/index.aspx>



Source: Virginia Department of Education, website:

http://www.doe.virginia.gov/statistics_reports/graduation_completion/dropout_statistics/index.shtml

Besides the Eastern Shore Community College, institutions of higher education do not exist on the Eastern Shore and residents must leave to receive a Bachelor's degree. Old Dominion University has begun web-based instruction at the college and there is hope this will expand. Previous online instruction programs that were offered to high school students have disappeared and residents were frustrated about this.

Participants who attended the Community College were complimentary of the quality of education offered there. It was noted that the nursing program at the Community College was an asset and very well attended. Because of the growing need for healthcare, participants recommended expanding the medical certification and degree programs at the college.

For detailed responses from the Town Hall meetings and Focus Group sessions, see **Attachment A**.

Community Needs Survey

The community needs survey was developed and distributed to gather information from the residents around the Eastern Shore about which issues in their surrounding area were of concern, what barriers they experienced when seeking medical care, if they were able to secure employment, health benefits and housing, and overall how they felt about the quality of life on the Eastern Shore. Demographic questions were included in order to understand who was responding to the survey and to filter responses by county or by other specific population features. While the survey results are neither statistically significant nor representative of the entire population of the Eastern Shore, they provide a snapshot of opinions and experiences of everyday individuals from all sectors of the community and gather their perspective on health and quality of life issues.

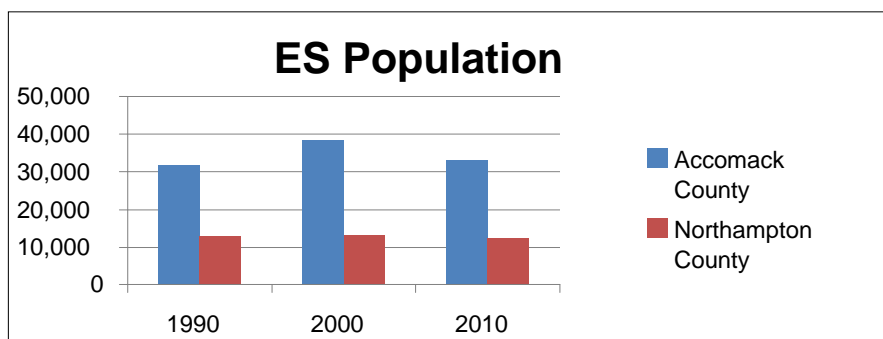
There were a total of 701 (697 completed) responses to the Community Survey, which totals 1.5% of the population. The surveys were available to the general public to complete in electronic form and in hard copy. The website was announced publicly through email blasts to service providers, weekly on the “Talk of the Shore” 103.3 FM radio show, and at Town Hall meetings. Paper copies (including large print) were strategically placed around the Eastern Shore in order to be completed by a large cross-section of residents. They were made available from June through September 2011 at various county departments, the Community College, the five Rural Health Centers locations, U.S. Social Security Administration and at the offices of several other service providers. Additionally, those who attended the Town Hall meetings and the Community Resource Fair completed them. Some service providers took the opportunity to elicit participation from clients during group gatherings. Each Planning Committee member was also asked to complete one.

Summary of Demographic Data

Below is a comparison of those who completed the survey with official data from the 2010 Census. Note that total responses to each question vary as some questions were skipped. Seven (1%) surveys were completed by persons who stated that they did not reside on the Eastern Shore.

County	Responses		Population	
Accomack	485	70%	33,164	73%
Northampton	198	29%	12,389	27%
Total	690		45,553	

Source: U.S. Census Bureau, website: <http://factfinder2.census.gov>



Source: U.S. Census Bureau, website: <http://factfinder2.census.gov>

54% of those surveyed stated that they lived within town limits while the remaining lived in more rural settings. Towns listed included: Melfa, Accomac, Onley, Parksley, Cheriton, Exmore, Onancock, Temperanceville, Birdsnest, Quinby, Belle Haven, Cape Charles, Nassawadox, Painter, Withans, Wachapreague, and others.

Gender	Responses		2010 Census	
Male	144	21%	22,083	48%
Female	553	79%	23,470	52%
Total	697	100%	45,553	100%

Age Group	Responses		2010 Census	
Under 18	6	1%	9,361	21%
18 – 24	102	15%	3,389	8%
25 – 34	136	19%	4,747	10%
35 – 44	106	15%	4,958	11%
45 – 54	139	20%	6,983	15%
55 – 64	138	20%	6,998	15%
65 or over	70	10%	9,117	20%
Total	697	100%	45,553	100%

According to the Census data above, half of the Eastern Shore's population is persons aged 45 and older. 50% of those that responded to the survey were also of that age group.

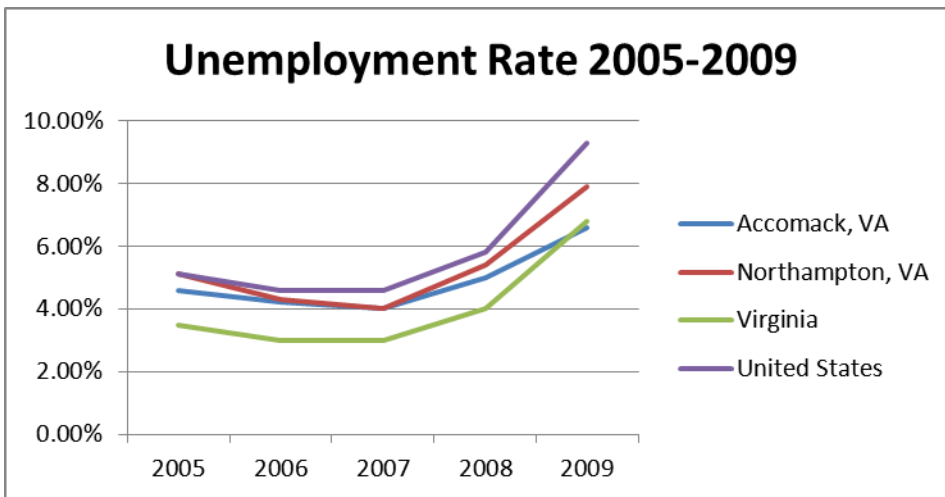
Race / Ethnicity	Responses		2010 Census	
White / Caucasian	264	37.9%	28,830	63%
African American / Black	388	55.7%	13,831	30%
Asian / Pacific Islander	2	0.3%	319	0.7%
Native American	5	0.7%	162	0.4%
Multiracial	13	1.9%	0	N/A*
Other	15	2.1%	1,695	N/A*
Hispanic / Latino	10	1.4%	3,596	N/A*
Total	697	100%	N/A*	N/A*

Note: ethnicity crosses several races.

Of the 697 responses, 52% responded that they were employed while 48% were not. It is important to note that some of those listed as unemployed were retired or not working by choice. The August 2011 employment statistics from the Bureau of Labor Statistics demonstrate the following for the Eastern Shore:

County	Civilian Labor Force	Employed	Unemployment	
Accomack	21,542	20,061	1,481	6.9%
Northampton	6,964	6,416	548	7.9%
Total	28,506	26,477		

Source: Bureau of Labor Statistics, website: <http://www.bls.gov/lau/laucntycur14.txt>

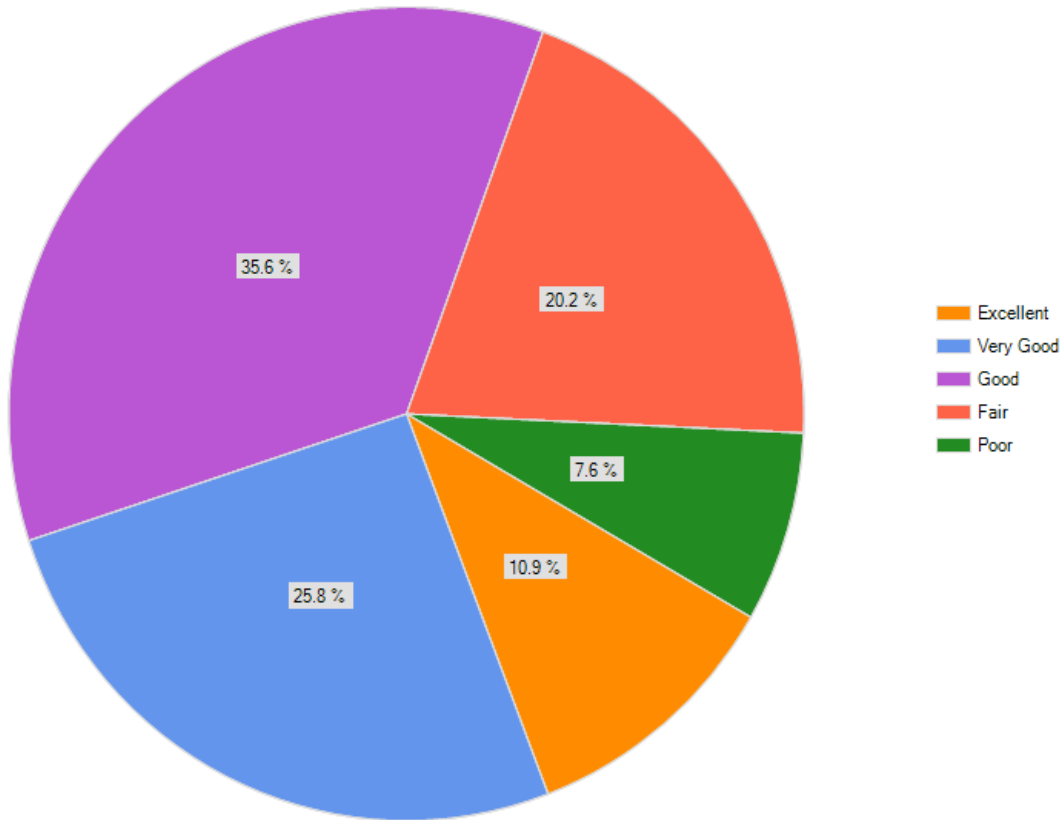


Source: Bureau of Labor Statistics, Local Area Unemployment Statistics
 Website: http://bi.cao.virginia.gov/VEC_EIS/rdPage.aspx

Summary of Responses

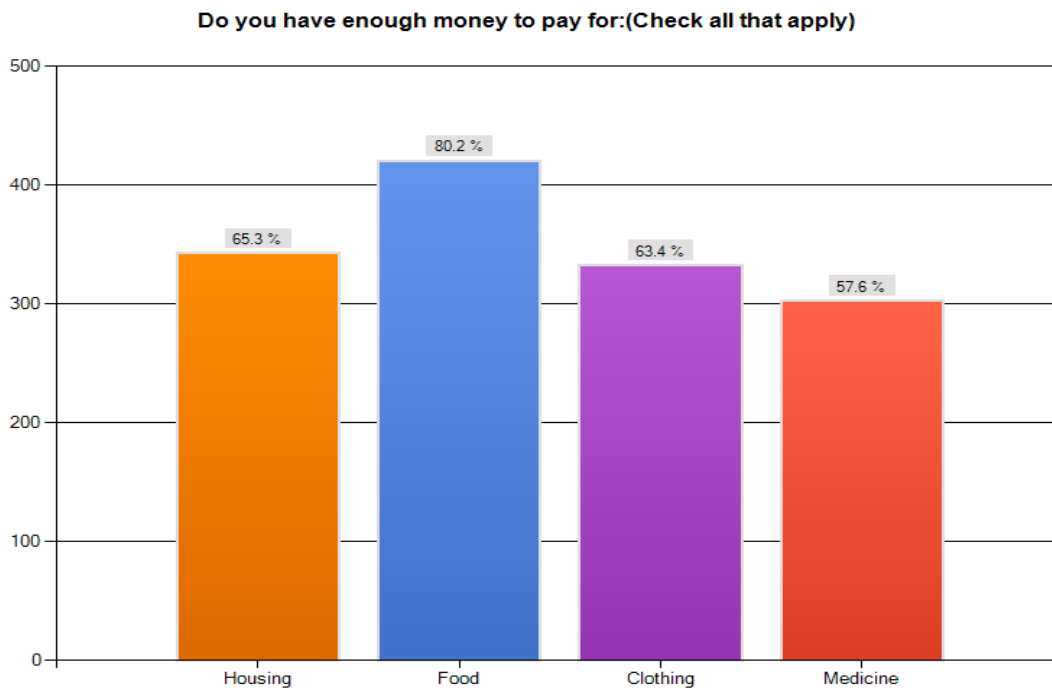
Those surveyed first answered questions about how they rated life on the Eastern Shore. While 35% responded rated life as 'Good', 26% rated it as 'Very Good' and even 11% rated it 'Excellent'.

What kind of place is Accomack County / Northampton County to live?

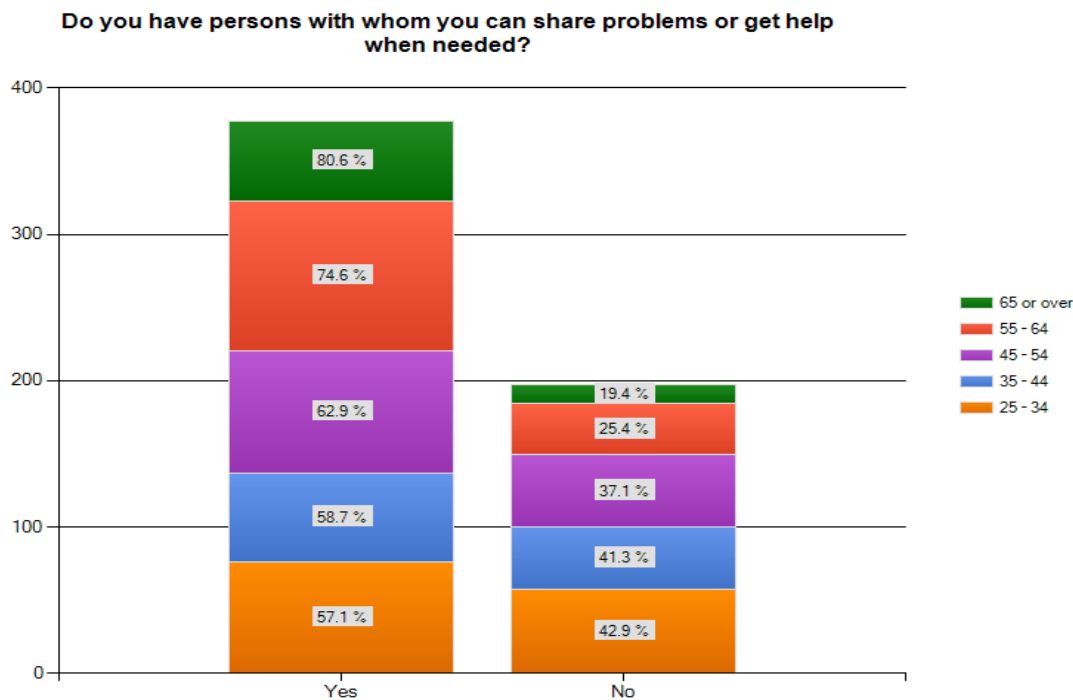


When asked how they felt about the Eastern Shore as a place to raise children, an overwhelming majority (71%) rated it 'Good' to 'Excellent'. As a place to grow old, again the majority (75%) rated it between 'Good' and 'Excellent'. For each of the three questions discussed above, just over 7% rated the Eastern Shore as 'Poor', with the remaining (18-21%) selecting 'Fair', respectively.

Next, those surveyed were asked if they had enough money to pay for everyday expenses, like:



To understand the level of isolation felt by the residents of the Eastern Shore, the survey asked if residents felt they had someone with whom to share problems or to get help. Of the 685 that answered only 2/3 responded 'Yes', leaving 34% feeling they had no one to turn to. Of those who responded positively, they listed their family, friends, church, God and service providers such as the Community Services Board or Department of Social Services as people and places they turn to for help.



Community Issues

Those surveyed were asked to rate the importance of 32 different issues in their community, selecting 'Very Important', 'Somewhat Important' or 'Not Important'. The five **most important** issues named by both counties were:

1. Unemployment / Underemployment (91.9%)
2. Lack of affordable housing (84.6%)
3. Ability to read and write (84.4%)
4. Lack of job training programs (83.8%)
5. Poor quality of public education (K-12) (82.2%)

These ratings underline the same concerns shared by service providers and participants at Town Hall meetings and focus groups.

Other issues rated by at least 75% of those surveyed as '**Very Important**' include:

Child abuse	Mental illness or emotional problems
Lack of services for children with special needs	Crime
Lack of public transportation	Lack of services for the mentally ill
Lack of services for the elderly	Teen pregnancy
Lack of services for adults with special needs	

The five issues named as **least important** to those surveyed within their communities were:

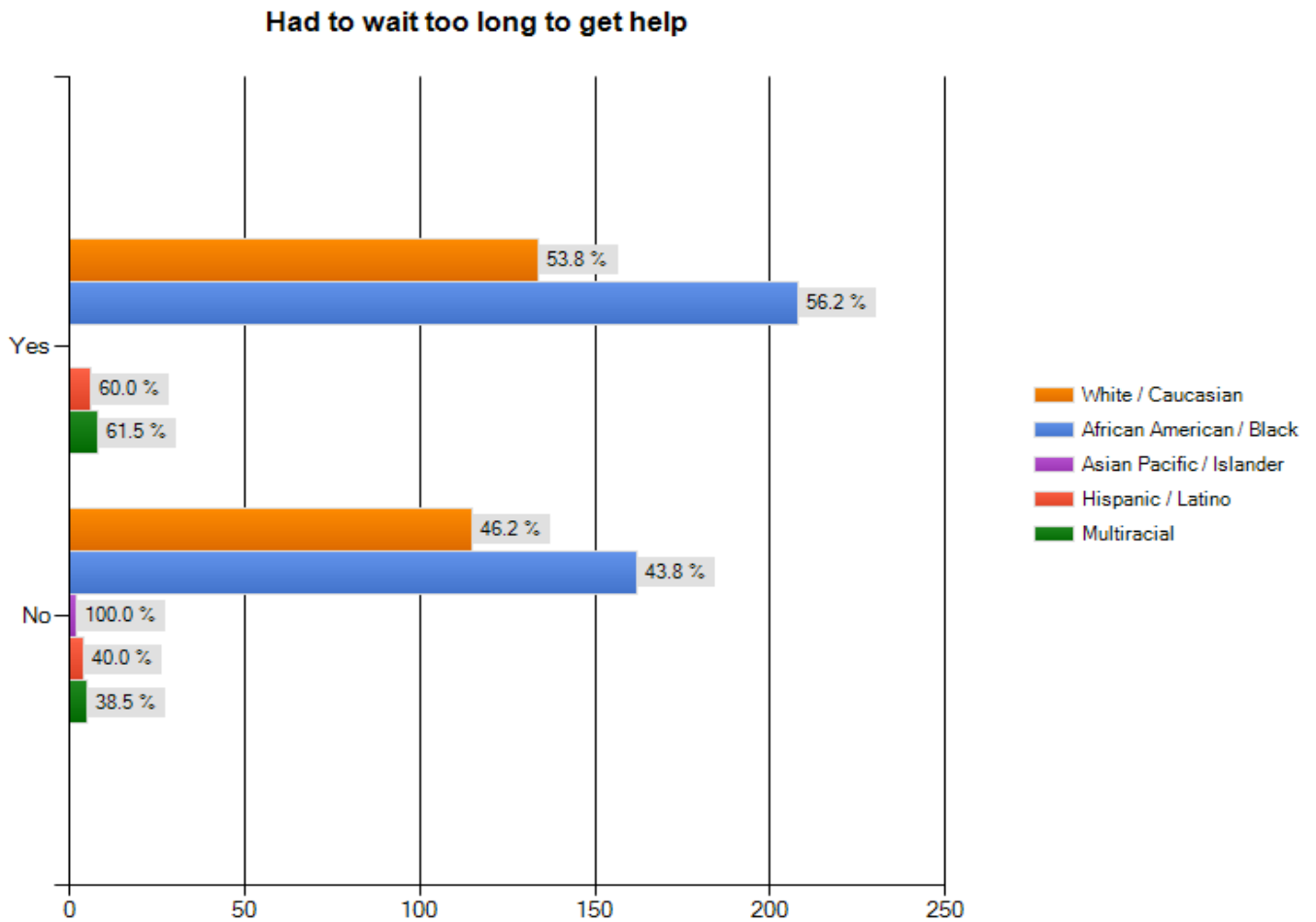
1. Noise pollution (25.1%)
2. Exposure to wildlife / wild animals (18.5%)
3. Tobacco use (17.3%)
4. Air pollution (15.8%)
5. Gangs (10.5%)

Several issues that followed close behind and were also rated '**Not Important**' by many of those surveyed include:

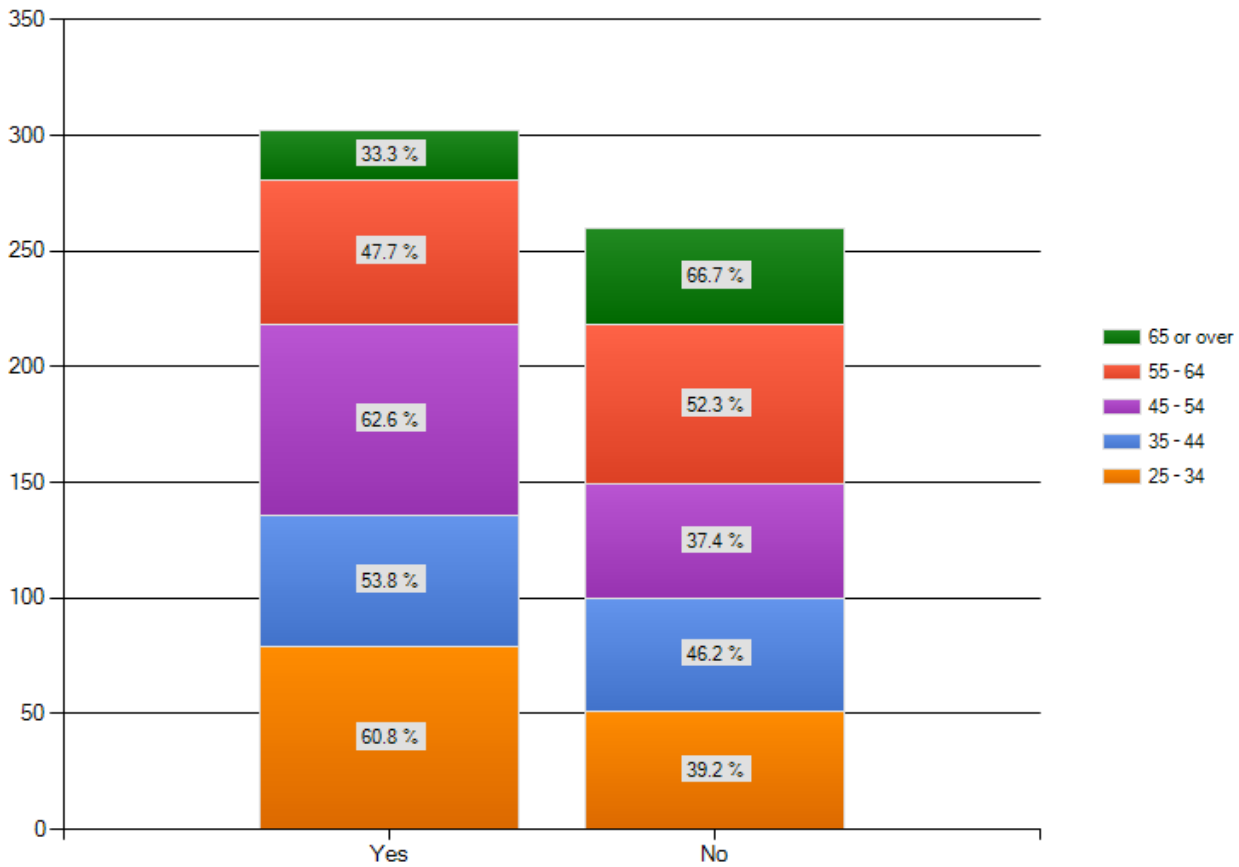
Vehicle injuries
Lack of access to computer / Internet
Alcoholism / other drug abuse
Street / Neighborhood litter

Barriers to Medical Services

Six questions were posed about people's experiences when accessing medical services to understand what type, if any, barriers they encountered. 55% named affordability and the amount of time required to get an appointment as the most significant barriers. These were followed by lacking information about services available and eligibility requirements. Only a bit more than 1/3 felt that locations, days and hours of the medical services were inconvenient.



Could not afford



Those surveyed were then asked to list medical services that were not available to them.

- Dental Care (65%)
- Primary Care (53%)
- Specialty Care (47%)

When asked to name the types of specialty care services missing from, or lacking on, the Eastern Shore, those surveyed listed:

- | | |
|------------------------|------------------|
| Optometrist | Neurologist |
| Cardiac | Mental health |
| Pain management | Home health care |
| Plastic surgeon | Transportation |
| Children's orthopedist | Allergist |

Employment data among those who completed the survey revealed the following information:

	Number	Percent
Employed	362	52%
Unemployed	335	48%
<i>Of those employed:</i>		
Part-time	102	29%
Full-time	245	71%
Has health benefits	221	32%
Has dental benefits	194	28%

Residents were asked to describe their **household**, including status and size. Results revealed that:

	Number	Percent
Rent	308	44%
Own	256	37%
Other:	133	19%
Living with someone	66	50%
Homeless	9	6%
Other situation*	58	44%
Member is a Veteran	110	17%
Member has a Disability	243	37%

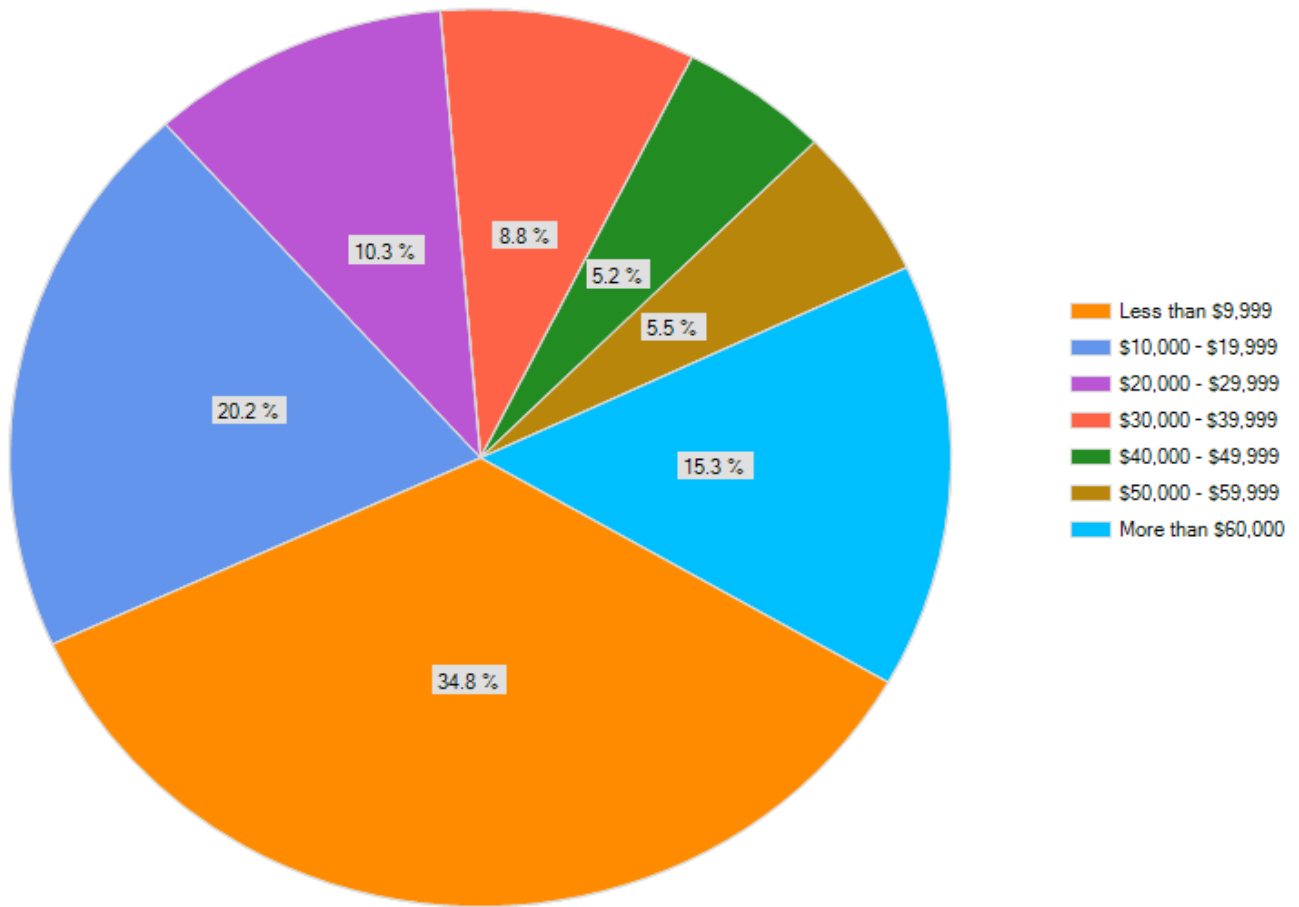
**Responses under "Other situation" include: buying a home, renting a shed, lifetime property rights or otherwise not specified.*

The average household size is 3.17:

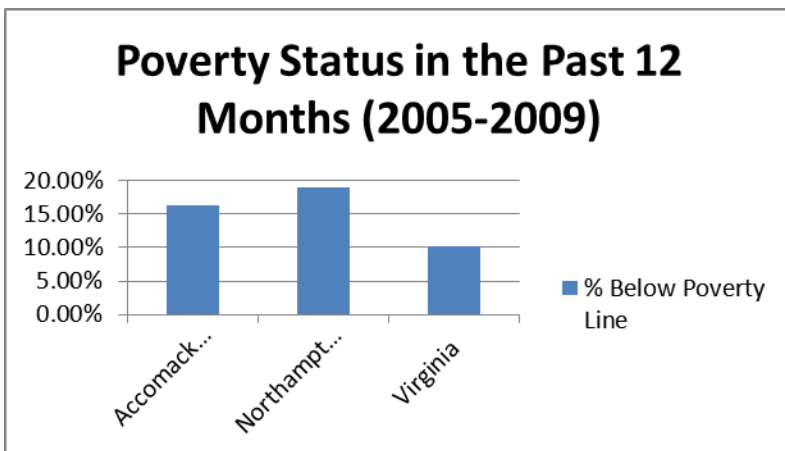
2.05 – Adults

1.53 - Children under 18 years of age

Total household income:

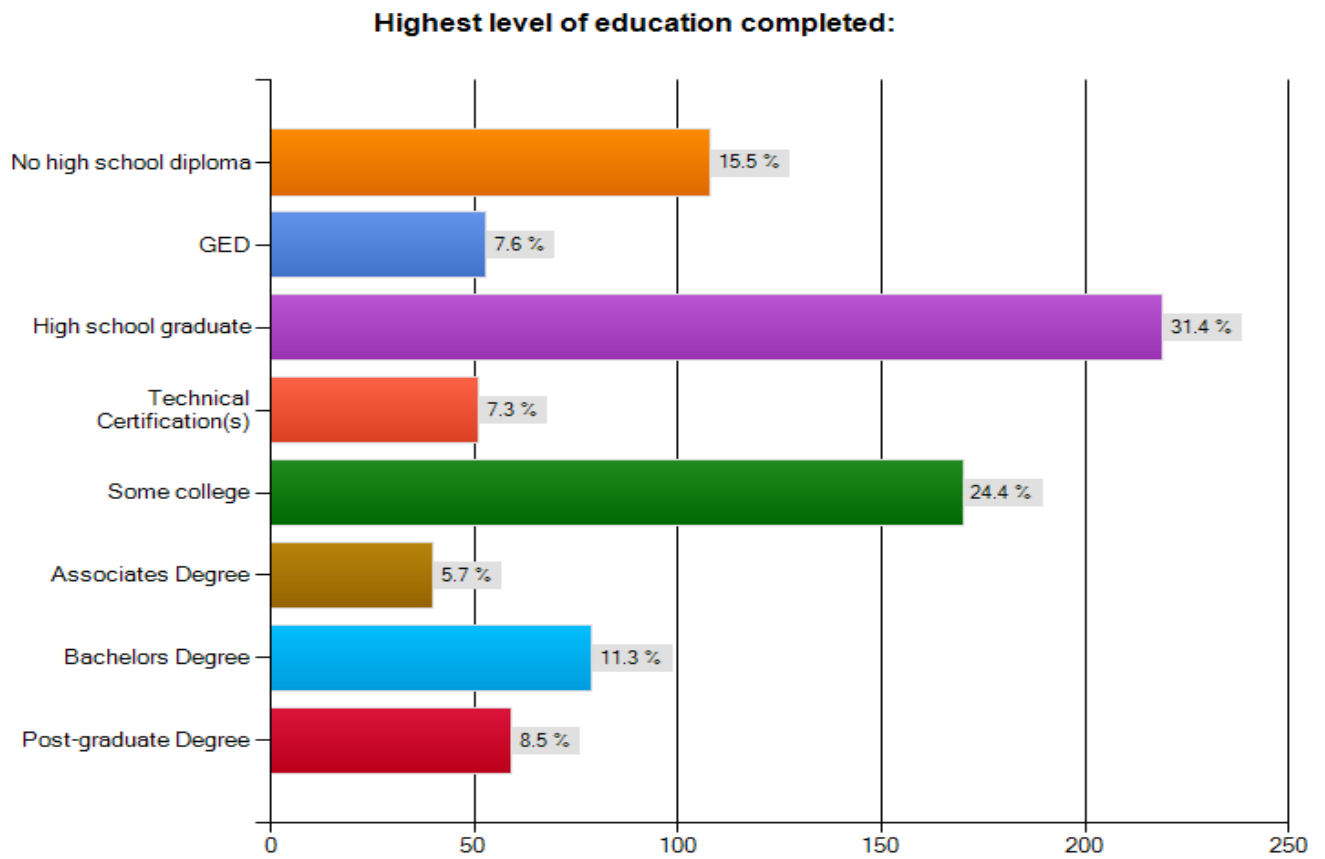


More than 1/3 of those surveyed claimed their household income was less than \$10,000 while over half claim it's less than \$20,000 annually.



Source: U.S. Census Bureau, website: <http://www.factfinder.census.gov>

The **education level** among those surveyed revealed that only ¼ obtained degrees in higher education.



To view a complete Summary of Responses, see **Attachment B**.

Veterans Services

In an effort to identify Veteran's needs on the Eastern Shore, those surveyed who identified themselves as Veterans were asked specific questions. While 110 of those surveyed stated that a member of their household is a Veteran, only as many as 79 responded to the specific questions below:

Please tell us when you served:

	Number	Percent
WWII	4	5%
Korea	8	10%
Vietnam	35	46%
Gulf War/Iraq/Afghanistan	12	16%
Peacetime	23	30%
Total	76	N/A *

* Note: some selected more than one option

Do you receive medical care at:

	Number	Percent
Hampton VAMC	13	30%
Pocomoke, Maryland	7	16%
Other VAMC	5	11%
Non-VAMC	19	43%
Total	44	100%

If a Vietnam Veteran, have you registered to receive an Agent Orange exam at a VAMC?

	Number	Percent
Yes	3	6%
No	48	94%
Total	51	100%

Would you utilize a Community-based Outpatient Clinic located on the Eastern Shore?

	Number	Percent
Yes	55	70%
No	24	30%
Total	79	100%

Uses and Limitations of the Data

The data provided in this report were collected through a model utilizing community-wide participation that involved citizen input from various geographic areas and backgrounds across the Virginia Eastern Shore. For any community plan to be realistically implemented, it must be developed through broad participation by persons who share the commitment and have a role in the community's health and well being. Uses of this data can benefit the human service delivery system as a whole as well as the individual organizations, depending on the opportunities taken with the resources available to incorporate the results into practice or policy. Publicizing the report through media channels, at least in summary, is important to recognize the initiative taken by the service providers to identify the bigger community needs so as to develop and implement improvements wherever possible.

There are many ways citizens can participate in local decision making (e.g. voting, campaigning, joining a neighborhood or interest group). Citizen surveys are fundamentally different, measuring general public opinion and attitudes and offering public officials potentially useful policy input information. Contrary to the expectations of those who believe citizens dislike and distrust government, citizens give their local government generally high marks for service delivery.⁴ Policy makers tend to agree that citizen participation is key to developing acceptable, sustainable policy decisions. Such participation traditionally suffers, however, from claims that citizens who participate do not represent the views of the community. Another commonly heard criticism is that citizens participating do not understand enough about the issues to evaluate the policy choices or the consequences of their decisions. One option is to turn to public opinion surveys as a means of determining the opinions of a wider, statistically representative sample of the population, yet the problem of an uninformed or uninterested sample of respondents persists. This is particularly important when surveys are used as one form of citizen input into policy decisions.

While surveys may not be the most widely recognized channel for communicating information to the public, there is value to public participation in ongoing policy-making and community development. Surveys are one method to gather information from citizens who are affected but otherwise unable to participate in these processes. By identifying the opinions of people in the community, surveys offer information on the varying status of agreement and disagreement and the various perceptions, accurate or mistaken.

Weaknesses of surveys must also be noted, such as cost and the skills required to interpret data, as well as social influences on certain groups of respondents or language barriers. Another drawback is that respondents may not have experience with or know enough about the topics to provide quality responses to the questions. However implemented, the surveys represent the perception of the individual responding to the questions and offering feedback and should be viewed as such. Rather than being the only form of contact, surveys work best when they complement other forms of citizen participation.

To this end, the Eastern Shore Community Needs Survey was not only widely distributed across geographic areas but also collected household-level information that allowed for personal perspectives regarding the most significant gaps and barriers in the existing human services delivery system, including schools, medical care and more. It was also used in tandem with face-to-face town hall meetings and focus group sessions that asked broader questions around the issues and which were widely announced to gather participants from all factions of the community.

⁴ *Linking Citizen Satisfaction Data to Performance Measures: A Preliminary Evaluation*. Public Performance & Management Review, Vol. 24 No. 1. September 2000 30-52

Interpreting the results and implementing change become the biggest challenge to end users of the data. Service evaluation is critical to monitor challenges and for focusing efforts and resources where failures are identified. However, national best practices demonstrate that the nurturing and development of strong community consensus regarding the needs of the service delivery system can be a springboard for future collective action.

It is recommended to use the data contained in this report to:

- Evaluate and implement service improvements;
- Raise awareness of community issues;
- Educate the general public and local government of challenges such as existing resources, barriers and gaps in services, changes in perception, and successes;
- Identify trends that will affect how services are delivered, where, to whom and the quantity;
- Target and seek additional funding to expand, enhance or adjust the service delivery system.

The existing Continuum of Care coalition, made up of key service providers (governmental and non-governmental) should take the following steps in order to make the best use of the data:

1. **Review and analyze the summary of responses** contained in this report along with other social indicators that demonstrate community-wide issues.
2. **Identify trends, gaps, barriers and successes** within the bigger issues discussed in this report.
3. **Develop a realistic action plan** that includes
 - a. a goal
 - b. at least one objective
 - c. very specific activities around each issue
 - d. person or organization responsible for each activity
 - e. timeline

The action plan should be developed over a succession of meetings within a limited time period, such as six months, while the motivation around implementing change is elevated. The action plan should be used as a guiding document over the next 3-5 years and reviewed and updated annually. The action plan, along with a summary of the key results from this report, should be incorporated into the annual or strategic plan of every agency within the human service delivery system to ensure consistency of efforts.

Those within the Continuum of Care that have the expertise and incentive to seek additional funding and resources should make appointments with local governmental leadership as well as private funding organizations to announce the action plan undertaken by the service providers. Through these personal exchanges and supporting documentation, priorities can be identified for allocating resources where additional assistance is needed to affect change. Some examples of this are:

- expansion of the transportation system for those most medically vulnerable
- development of affordable housing options near bus routes and schools
- creation of new services (counseling, training, in-home case management, etc.) that do not exist
- enhancement of basic services such as food, clothing and school supplies, emergency financial assistance and job training

Determining strengths and weaknesses within the current system while matching needs with assets is the cornerstone of any successful strategy for community-wide improvement.

ATTACHMENT A

Town Hall meetings / Focus Group Responses

1. How long have you lived on the Eastern Shore?

Not a resident	15 years	45 years (3)
3 months	16 years (3)	46 years
6 months	18 years	47 years (2)
9 months (2)	19.5 years	48 years (2)
Less than 1 year	20 years	49 years (2)
1 year (3)	21 years (3)	50 years (3)
2 years (5)	24 years	51 years (2)
3 years	26 years (3)	52 years
4 years (3)	28 years (2)	53 years (2)
5 years (4)	29 years	54 years
6 years	32 years	55 years
7 years (2)	33 years	59 years
8 years (4)	34 years	64 years
10 years (2)	35 years	73 years
11 years	38 years	80 years
13 years (3)	42 years	All my life (3)
14 years (2)	43 years	

2. Tell us what you like best about living on the Eastern Shore.

Slow pace (1)	Public transportation
Peace and quiet	Closeness of the community
Nature, wildlife	People are kind and diverse welcoming to strangers
The people of the Eastern Shore	Slower pace (2)
No traffic	Open, friendly
Small-town community	People are more willing to help out
Beach, boating	Less traffic
Tons of churches	Wide, open spaces
Beauty of the area	Resources of Chesapeake Bay and ocean, outdoor life
People	Less stressful
Next to the water	Friendly people (2)
Quiet (3)	Relationships
Freedom to travel	Laid back
Safe place to raise children	Good family environment
Retirement	Islands
Cost of living	
Schools	
So green	

3. Is housing accessible? Is it affordable?

Not very accessible; long waiting list for Habitat for Humanity

Lack of housing stems from lack of employment opportunities*

Varies by community

Planning District Commission holds training sessions for people experiencing homelessness; how is this information accessed?

Number of vouchers not sufficient, not offered often enough

One year-round faith-based shelter

Substandard housing; structure, insulation, lack of foundations

Not enough affordable housing developments

Trailer parks becoming too expensive

Need to expand water and sewer systems

Limited access to power

Internet connection very slow, affects businesses

Most people coming to AICC for assistance need help with electric bill

Oil heating is outrageous, especially a problem for the elderly

Lack of low-income housing

Lack of affordable rental housing in safe locations

20% of the property on the Shore has been abandoned; homes are dilapidated and unsafe

Question of legal ownership of abandoned property

Health hazards related to occupation of abandoned housing

Many people are moving out of the ES

Growing Hispanic population

Need more jobs in order to make housing affordable

More people purchasing second homes or retirement homes on the ES – increasing surrounding real estate assessments in the area

Gentrification

Affordable for people coming from North, not from other areas

Not much affordable housing in Chincoteague

Vice mayor – tourist area, valuable land makes affordable housing less attractive for contractors. Housing is affordable but not in relation to income opportunity

Some affordable housing has age restrictions

Shifting to seasonal rentals, part-time residents

Housing and land should be more affordable for young people

Sewage is a problem

Property value has increased exponentially compared to wages

Assessment values of property unrealistically high – taxes increasing every year

Not affordable or accessible – disabled low-income housing have to get on a waiting list for financial assistance – slow process

No emergency financial assistance for housing

Can't afford housing on social security checks

Some of the housing (trailers, concrete houses) need to be condemned

Not accessible or affordable in relation to income, job market, credit challenges

Young families can't find places to rent on their budget – nothing less than \$700 or \$800

Rent at trailer parks is about \$500 (not affordable) and some people would like for them to go away

Where to look for affordable housing? The newspaper (dead-end) or word-of-mouth (most effective)
Landlords don't like to negotiate
Getting women out of domestic violence shelter and into permanent housing is very difficult
Affordable rent for the shore is \$200-\$300 per month
Northampton families in poverty have so many interwoven issues – every aspect of life is a struggle (housing, transportation, education, etc.)
Utility bills too high for people to use heat in the winter and air in the summer
Not enough housing for disabled persons, with kids play areas and with community centers
Not affordable: poor quality housing vs. rent prices
Utilities should be included in rent
Need more apartment complexes
The area is not safe
Property values are bad
More poor than good quality
More housing is needed
Change old schools into housing
Price vs. wages a problem
Need standards for landowners (rentals), for all housing, not just Section 8
Need playgrounds, play areas for kids
Need several recreation and community centers
Need Boys and Girls Clubs
Need community involvement

4. Is *transportation* accessible? Is it affordable?

Transport only runs for Cape Charles to Parksley; only 7 runs during the day

Difficult to access areas that aren't off the main artery of Eastern Shore

Students of the community college wait around for the bus

Reliable and on time

Hours are limited, need longer route time

Often have to rely on family or friends for transportation; get charged exorbitant fees

Vans for senior centers, MR, MH – people sometimes wait a long time for rides

Medicaid cabs come from across the bay

Public transport is very affordable

Public transportation not close enough to affordable housing communities

Younger families 18-25 lacking transportation

No public transportation after 6pm

Limited transportation available for elderly population

No Star transit above Accomack area

Friends charging for rides

Car insurance less expensive than other areas

More people riding bicycles on the highway – insufficient safety measures in place (lights, bike lanes, etc.)

Need more education around safe bike riding (“Bike Rodeo” this weekend)

18-wheelers driving too fast, causing accidents

Used to have county bus service discontinued from coming to Chincoteague last fall

No cab services

Some people charge to give rides

Roads to the south get narrow and you can't see the paint on the road

Back roads are in great condition – you can get everywhere on them

Public transportation is getting better – more stops and willing to stop at your house if you call ahead

Star transit refuses to go beyond certain geographic limits

Limited hours, frequent delays make travel time unpredictable

No service at night

Some folks are in connection with the cancer center or other services to get them to the grocery store, etc. – there are some underused services out there (American Cancer Society Road to Recovery)

Eastern Shore Area on Aging has 2 vans – used to pick up persons with disabilities to take to medical appointments (free, no requirement to qualify)

Medicaid cabs need two weeks' notice to transport to doctor's appointment

Star Transit's cost is good but the times and area covered are limited

Need city buses

Need medical transport services for people without Medicaid

Need more buses for handicapped persons

5. Are there **employment opportunities available?**

Very limited***

Large employers are Bay Shore, Tyson, Purdue, fast food, seasonal tourist industry, NASA, schools, hospital

Some are laying off employees

Offering less overtime, cutting back hours

When the chicken plants cut back, the community could suffer

Migrant workers August-Oct/Nov

Business running into community barriers (chicken plants looking to expand chicken houses into Northampton County)

NASA seeking expansion (does not align with ES labor pool, skill sets)

Need a youth center – education, resources, and engagement

Sewage and infrastructure problems are a barrier to new businesses coming to ES

Need fabrication industries

Not enough job training to draw big companies to the area

Need more chicken houses so the two chicken plants can expand to capacity, increase employment opportunities

Geographic limitations of the area - need more, smaller businesses

Bridge-Tunnel tolls held artificially high – barrier to employment commutes

Biggest industry is tourism in Chincoteague– make all of your \$ in the summer

Affordable parking is key to keeping tourists coming

People who work at NASA place their kids in Maryland schools

Service jobs don't earn enough

Lack of high-speed Internet access for the entire shore – will have access within the next year

Lack of employment on the shore, especially in Northampton – no new jobs coming to Northampton – need more diversity in employment opportunities

Younger people are leaving Northampton, leaving an aging population

Biggest employers are in healthcare and education. Farming to a much lesser extent.

Cape Charles gets some tourism, but those jobs are seasonal for low pay

Some people say that construction is improving, but that may be because a lot of places went out of business in the recession so there's less competition for new businesses

A lot of retired people on the shore

Government restrictions on fishing and crabbing make it difficult to make a living

Some aquaculture

Folks need to consider how are we going to maintain the eastern shore culture but generate new opportunities for growth and employment to get people excited about staying here on the shore rather than moving away – policy makers need to be convinced

One job may not be enough to make ends meet

There are no jobs, you; have to really look

Networking is a must

No jobs unless you go to work for the chicken farm companies

Employee requirements are not reasonable

Need more employers

Better paying jobs

6. Are there any specific *job trainings* needed?

Literacy level is low among many adults**

Insufficient incentive to further education without job opportunities

Establishing education as a value in the home*

About 1/3 of adults 25+ do not have HS diploma/GED

Job Corp and YMCA provide youth education – teen pregnancy rate declining

High HS dropout rate

Need consumer math skills

Fabrications computers telecommunications

Technical colleges or schools would provide incentive for big companies – readily available workforce

Reading and writing, basic math skills

Heating and A/C training

Untapped grant opportunities

This community is good adapting to the job opportunities by training students for what's available

Vocational trainings – plumbing, electrical, auto mechanics, HVAC

Need a big-ticket degree to work at NASA

County is not friendly to big business – lot of bureaucratic barriers - not so much in Chincoteague but the rest of the county

Great welding program but no jobs for that on the shore

Industrial arts programs have been abandoned

No unions on the shore to provide on-the-job training

Not enough liberal arts programs

Shore should invest in technical training – college should have training and certification for auto mechanics

Kids who don't like school really seem to enjoy the vocational programs

GED isn't easy to pass – barrier to getting into vocational programs

A lot of vocational programs offered in Accomack are not offered in Northampton

Eastern Shore Community College has classes at convenient times

Training is needed for jobs like Cashier, Quick Books, Secretary, and Computer Programmer

The cost of higher education and training is a barrier

Trainings needed for offices, pharmacy tech, nursing, computers, and green energy

Need on-the-job training programs

Need to volunteer

Employers are not working with people with criminal histories

7. Is *healthcare* accessible? Is it affordable?

Rural Health Centers and Health Dept. offer income-based fees (sliding scale)

Lack of providers

Lack of transportation to Rural Health

No urgent care centers

Hospital move will affect many people

Access to dental care for Medicaid participants

Schools and Head Start have dental clinics

Senior services offer transportation, home weatherization

Gap in services for those who earn too much to qualify for Rural Health but too little to afford healthcare

Continuity of services is a problem

Information about services not adequately communicated to lower-income families

Have to go elsewhere for specialty care

Primary care is plentiful

Common to cross into Salisbury for healthcare

Rural health system ranked in top 3 in the country (includes dental, ob-gyn care)

Mental health services are lacking

Smaller population means greater difficulty subsidizing specialized care

Cost of medications is a problem

When the hospital moves to Accomack, it will be able to attract more specialists to the area – specialists will then attract sub-specialists

CHCs open half-day Saturday, no Sunday

Tourists put strain on ambulances

Health facilities are too far apart

The Shore lost a lot of physicians due to contractual obligations through the Health Corps as they only have 3-4 years of obligation

Get used to certain doctors then they leave

Affordable dental care – bring back dental fairs!

Dentists not available 5 days a week

Dialysis – have to go to Nassawadox

Primary care hours are limited

Have to travel far to get specialty care

Have to travel too far to find primary care providers; access is limited

Specialty care is nonexistent

The hospital is getting a bad reputation

The hospital doesn't accept all forms of health insurance

Not many pediatricians

Need more inpatient/residential resources for substance abuse

Great senior center on shore but some single elderly don't have transit to the center (churches, senior center offer some transportation)

People misuse the emergency room because 1) you can't be refused care for lack of insurance 2) lack of after-hours care

Emergency services get called for simple problems

Hospital moving soon out of Northampton – it's a long time coming but I think other urgent care centers will come to the southern end of the shore

Get a doctor that you like then they leave, especially pediatricians

If a new hospital comes, then we may get more specialists
The Eastern Shore hospital not as well equipped for emergency care as other hospitals on the other side of the bay
Doctor's offices have long waits for appointments – several weeks or months
Doctor's offices seem to give preferential treatment related to which school district you're in
I love my doctor at Cape Charles Medical Center
Franktown is pretty good with scheduling appointments within reasonable time frames
Positive - Pediatricians at rural health see patients at the hospital
Positive – the hospice is wonderful – the staff is accessible and easy to work with – go above and beyond
No insurance means no specialist
Need affordable health or dental plans
Go to Maryland for primary care because they have appointments available
No emergency care or hospital service
No after hour care
Quality of care is low for uninsured

8. Is education accessible? Is it affordable?

Parent involvement is almost nonexistent

Teacher wages are too low

No accountability for school tardiness

School bus transportation is reliable but often slow due to geography

Community college accessible and affordable

YMCA offers free tutoring

Language barriers for migrant workers

Turkish and Haitian populations are increasing

Weekend education less accessible

Dual enrollment offered at all high schools – now for fee

e-learn for GED online learning

Many residents have difficulty with Internet connection

Increased classroom size

Decreased school budgets

Lack of school supplies

Parent involvement in student achievement

College enrollment increasing

College graduates leave the area to seek higher-paying jobs, more professional job opportunities

Difficult to stay in education programs when facing housing and financial crises

Elementary education needs greater focus on basic practical math skills

SOL testing gets in the way of practical education

Teachers burdened with more administrative responsibilities

Parents, churches, and communities need to reinforce learning for children

Public schools offer programs for people to come into the school and volunteer

Need more parenting classes for families on the shore

Would like to have a satellite location for community college

Better quality education

Kids are more focused

Parents and teachers are involved

High schools need to offer more vocational programs again

The community college is fantastic – very accessible and help with financial aid – there's something for everyone at the community college

Public schools are in really bad shape (quality of classroom instruction) across the board, and families can't afford alternatives

Reading level of high school graduates is insufficient

Focus on stupid things like uniforms; seem to be less concerned about reading level

Kids aren't being well prepared for the workplace or higher education

Too many kids in one school, classes being combined (Northampton)

Northampton not able to tend to problems surrounding kids in poverty – housing issues, etc. (school social work)

Teachers don't have the money to purchase resources that they need to teach – kids have to switch off reading the required books or teachers have to buy their own materials

Parents unable to help kids with homework because of their own lack of education

High teen pregnancy, but it seems to be declining due to outreach

Need more higher education

Need affordable pre-school
Good class size overall
No resources for special needs children
The location of schools (i.e. Chincoteague and ESCC)
Schools are good
Need more art programs in a community center

ATTACHMENT B

Community Needs Survey Responses

**The
Planning
Council** 70 *Years*