

**UNITED WAY OF CENTRAL JERSEY
COMPASS NEEDS ASSESSMENT**

**- TELEPHONE SURVEY -
- RESIDENT FOCUS GROUPS -
- KEY INFORMANT DISCUSSIONS -**

Conducted for:
**United Way of Central Jersey
and Middlesex County**

Conducted by:

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**Eagleton Institute of Politics
Center for Public Interest Polling
Project Director: Patrick Murray**

Data Collection:
June 2001 – May 2002

**UNITED WAY OF CENTRAL JERSEY
COMPASS NEEDS ASSESSMENT**

This report is divided into four sections:

EXECUTIVE SUMMARY

TELEPHONE SURVEY

RESIDENT FOCUS GROUPS

KEY INFORMANT DISCUSSIONS

UNITED WAY OF CENTRAL JERSEY COMPASS NEEDS ASSESSMENT

EXECUTIVE SUMMARY

The United Way of Central Jersey COMPASS Needs Assessment process was conducted by The Eagleton Institute's Center for Public Interest Polling in consultation with representatives from the United Way of Central Jersey ("UWCJ") and from Middlesex County. The main objective of this study is to provide information on the social service and related needs of residents within the UWCJ service area – which is defined as all of Middlesex County and Franklin Township in Somerset County.

The specific issues addressed by this study include employment, health care access, housing needs, child care, youth needs, senior social needs and respite care, transportation needs, literacy issues, and barriers to accessing needed services.

The COMPASS study methodology involved three main components:

- (1) a telephone survey conducted between June 13 and 24, 2001 with a random probability sample of 400 UWCJ area residents 18 years old and older;
- (2) seven focus groups discussions with groups of residents held between January and May 2002; and
- (3) seven key informant group discussions held in April 2002.

The following summarizes the main findings from the survey. The UWCJ service area population includes 612,000 adults (of whom 98,000 are age 65 and older) and 189,000 children living in 285,000 households.

The service needs are grouped into categories and presented in the relative rank order of "need intensity" as expressed in the survey, resident focus groups, and key informant discussions.

1. Housing Affordability

Approximately 26-30,000 area households report having had problems keeping up with mortgage, rent, or utility payments in the past two years. About 1-in-4 of these households include seniors.

Having enough income left for other living expenses after paying for housing is possibly the most important issue faced by low-income and other populations in need. In the focus group discussions, many unemployed residents reported that having a stable housing situation is usually a prerequisite for being able to find and keep a job.

Even though anywhere from 2 to 10 percent of area households report experiencing poor housing quality issues, such as dirty water or rodents, this does not come up as a major issue. In most cases, residents living in these conditions do not register complaints because either they don't know where to go or, most likely, they are afraid of losing their current housing (either through condemnation or eviction) if they do complain. Affordable housing is at a premium.

The most useful programs for residents would be expanded rental assistance programs and emergency utility assistance to help them make ends meet.

2. Employment and Training

Approximately 1-in-5 area households (56-61,000) include an adult who has been involuntarily out of work over the past two years.

Skill levels are the most important factor in obtaining jobs that pay a living wage according to both residents and key informants. Most low-income or unemployed residents (particularly women) feel they lack the skills to get higher paying jobs. These skills include word processing, computer applications, and record-keeping. Many jobs now require bilingual abilities as well. Some residents may need to complete GEDs as a first step toward other training opportunities. For many parents, the major barrier to obtaining training and/or maintaining a job is lack of child care.

3. Transportation

Having affordable, available, and accessible transportation is the lynchpin to serving many needs for all residents in the UWCJ service area. This need is illustrated by the single mother who needs to get her children to child care and then to her job and back or by the senior citizen who simply would like to go shopping on a particular evening.

In all, about 29-33,000 households include someone who relies on public transportation to get to a job in Central New Jersey. About 18-21,000 households have someone who regularly uses public transportation to get to services or go shopping.

Even with the large number of residents who use public transportation to get around Central New Jersey, even more express the need for expanded bus and rail services. About 33-37,000 area households report having major problems getting transportation to and from places.

Residents complain that bus routes and schedules do not go where they need to go. Many point out that jobs in southern Middlesex County industrial parks are inaccessible to them. Getting to a child care center and to a job and then back to the child care center before it closes at the end of the day is nearly impossible for the working parent who relies on public transportation. In a number of cases, residents report that the lack of transportation is the reason why they either don't have a job.

Most low-income residents cannot afford their own car. Many working poor rely on high-cost private taxis to get to health care or other services. The lack of public transportation options is more pronounced in Franklin Township, Carteret, and Southern Middlesex County than it is in other parts of the UWCJ area.

4. Health Care

About 22-25,000 area households do not have health insurance coverage for everyone under their roof. A major issue brought up by key informants is that many low-paying jobs lack health care benefits.

About 24-27,000 are households experienced a time in the past 12 months when someone in their household needed to see a doctor but could not because of the cost.

Many uninsured adults let their own health needs go untreated until they reach a critical stage. Some low-income residents use local health clinics, but many are unaware of them. Waiting periods (either for getting an appointment or once in the office) are a particular barrier that keep some people from getting needed treatment.

Most of the parents who participated in the focus groups have Medicaid or New Jersey Family Care. Some working parents report that the Family Care co-pays are high. With proposed restrictions on adults in Family Care, these needs could become even more pronounced in the near future.

Paying for additional health related services, such as prescriptions, dental care, vision care, and medical supplies is another need expressed by low-income residents. Seniors especially report these services as their major health care needs.

5. Child Care

There are approximately 105,000 households with children under the age of 18 in the study area. Of these, 97,000 are considered “family” households by the census.

Among these households, 48-52,000 have a parent as the primary caregiver during the day, 14-16,000 have a grandparent or other adult family member, about 1-2,000 have older children watch younger siblings, and 3-4,000 go to a neighbor or friend.

Another 15-17,000 parents use a child care center as their primary care provider during the day, 4-5,000 use a registered provider, and 5-7,000 use school-based or after-school programs.

Among those households that do not use professional child care, 14-16,000 households say they need the service but cannot find affordable child care. Another 3-4,000 cannot find the type of child care they need (either due to age restrictions or the special needs of the child).

For many single parents and low-income families, having quality, reliable, affordable, and accessible child care is a prerequisite to being able to hold down a job or obtaining needed education or skills training.

Even parents who have satisfactory child care arrangements report there is a need for more options for care of infants and toddlers, affordable after-school and before-school care, extended hours for shift workers (at the least from 7:00 am to 8:00 pm), summer programs, and sick care or care for other special circumstances.

6. Youth Issues

Parents and providers alike send a clear message about the need for directed after-school programs for youth. According to the survey, only about 2-3,000 households include a teenager who participates in a mentoring, employment, or guidance program. More youth programs are needed to provide many types of services, ranging from homework assistance to sports to “values enhancement.” These programs need to be located in a safe place, include a space that youth can call their own, and be supervised (preferably by a younger adult who can relate to the youth). Almost all study participants call for the building of accessible youth centers, but only if they include programs rather than exist as simply a place to “hang out.”

These programs should be low-cost or free for most residents in need. They should be culturally appropriate and accessible by public transportation as well.

Under special needs, according to parental reports, approximately 6-7,000 households include a pre-teen child with emotional or behavioral problems. About 10 percent of

these youth are *not* getting help for those problems. Anger management is a special area of concern.

7. Senior Issues

Cost of living is a major issue for area seniors. Even with a paid-off mortgage, stagnant income sources cannot meet rising property taxes. Many seniors struggle to pay for utilities and food. In poorer areas, many seniors live with their families.

Taking all unmet needs into account, transportation is the major concern for most seniors. Supplemental health care (prescriptions, dental, vision, supplies) is also important.

Many seniors do not meet their own nutritional or social needs. This may be due to lack of resources (such as transportation) or simply a reticence to participate in group activities. Unique and creative ways to overcome these barriers are called for.

It was also noted by seniors who participated in the study that there are not enough senior centers (accessibility) and that some programs are not attractive or do not meet needs. One noted issue is making sure that meal programs address the growing cultural diversity of the senior population.

Of the 70,000 area senior households, 13-14,000 include a senior who cannot get out of the house to participate in different activities. About 8-9,000 residents are the caregiver for a senior in their own home. Most of these caregivers do not use skilled care or respite care options.

8. Disability Services

While disability issues were not covered from the resident perspective in this study, there is a great deal of statewide data available. Residential placement in appropriate housing situations is a major issue for this group. Fewer services are available for someone who becomes disabled as an adult than there are for those who have a developmental disability. Residents with disabilities might present multiple challenges (substance use, emotional problems, cultural diversity) that the disability provider system may not be able to address on its own.

9. Counseling

About 7-9,000 area households include someone who has had a reported problem with alcohol or drugs in the past two years. In the focus groups, the need for substance abuse treatment was expressed most persistently by urban homeless residents. It is also an issue (albeit less discussed) for formerly incarcerated residents. Residents with unmet substance treatment needs feel that the requirements for getting into most programs are too stringent, or (ironically) that the programs have too many demands accepted.

Emotional counseling is another important need. Young parents especially may need parenting skills training as well as coping skills. Anger management in particular is a coping skill that many parents and providers feel that youth today need.

Counseling in general (whether it is substance use related or mental health related) is needed by people who are trying to transition into productive lives (e.g. homeless individuals, those with drug addictions, recent parolees, etc.).

10. Literacy/Cultural Diversity

About 1-in-10 households include someone who has difficulties reading or writing English. In most cases this person is an adult, but such problems are also reported for teenagers and younger children.

Many service providers are attempting to improve their cultural competencies, but the rapid diversification of cultures in the UWCJ area makes it nearly impossible to fully meet that need. Successful services are those which provide more than language translation. Cultural matches between provider staff and residents are necessary to build trust and to enable communication. Many immigrant residents will not approach service providers unless staff from their particular ethnicity is available. This can range from welfare services, to youth recreation, to senior meal programs.

Barriers to Accessing Services

The main barriers to working, job training, and other pathways to self-sufficiency are transportation and child care.

Three main barriers to obtaining other types of services were identified through the course of the study. These include (1) lack of information, (2) lack of trust, and (3) program eligibility restrictions.

In many cases, residents in need either don't know where to go or don't know that programs may be available to help them. The survey section of this report lists some commonly used information sources for different types of populations in need. Overall, the most common source is "word of mouth." Residents who are "in the system" (receiving welfare, attending a senior nutrition center, etc.) are more likely to be exposed to information about many other services. Relatively more self-sufficient residents may not be aware of these services because they have limited interaction with the service provider system (e.g. working parents who only utilize the Head Start program), where such information is not as readily available or disseminated.

Lack of trust in providers is a significant barrier for people who are trying to transition into self-sufficiency. Specifically, these include people who have had drug addictions, homeless individuals, and those formerly incarcerated. These residents worry that their past lives will keep them from being eligible for services, or that such information will be used against them in other ways. Negative experiences only serve to strengthen this barrier.

In addition, building trust is also a cultural issue. Residents seeking services need to have a certain comfort level with providers. That requires having staff who can empathize with residents' social backgrounds.

The root of program eligibility restrictions as a barrier is difficult to pin down. Sometimes it may not be that eligibility rules have changed, but that available funding has disappeared. Many times residents may not know how to effectively present their case.

Providers call for more case management. Many residents could clearly use this type of help, but the current quality of case management is inconsistent according to those who have used this service.

Finally, the location of services can be a barrier. This study included focus group discussions with residents from four urban areas: New Brunswick, Perth Amboy, Carteret, and Franklin. There were clear differences in availability of services between the former two municipalities and the latter two. Furthermore, seniors experience discrepancies in the fact that some towns have extensive senior centers, while others have none. Suburban residents also point out the difficulty getting to services and other opportunities, especially for youth.

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TELEPHONE SURVEY

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Conducted by:

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Eagleton Institute of Politics | Center for Public Interest Polling

June 2001

SUMMARY

The United Way of Central Jersey COMPASS Needs Assessment Telephone Survey was developed by The Eagleton Institute's Center for Public Interest Polling in consultation with representatives from the United Way of Central Jersey and from Middlesex County. The main objective of the survey is to provide information on the social service and related needs of residents within the UWCJ service area.

The survey involved telephone interviews conducted between June 13 and 24, 2001 with a random probability sample of 400 UWCJ area (defined as all Middlesex County municipalities and Franklin Township) residents 18 years old and older.

The following summarizes some of the main findings from the survey. Projections are made to the population affected. The survey area's population includes 285,000 households, 612,000 adults (of whom 98,000 are age 65 and older) and 189,000 children. Survey estimates have a margin of sampling error of ± 5 percent.

Employment

Approximately 1-in-5 area households (56-61,000) include an adult who has been involuntarily out of work over the past two years. This includes about 6-7,000 adults who are still out of work.

Health Care

About 22-25,000 area households do not have health insurance coverage for all their members.

About 24-27,000 are households experienced a time in the past 12 months when someone in their household needed to see a doctor but could not because of the cost. Of these, about 17-19,000 are households who have some type of insurance coverage for all their members.

Major barriers to obtaining health care include getting time off work (21-23,000), being able to pay for prescriptions (19-21,000), finding transportation to appointments (17-19,000), not having health services nearby (16-18,000), and finding day care (9-10,000).

Housing

Housing problems experienced by area households include making mortgage, rent or utility payments (26-30,000). This includes 6-9,000 homes with seniors.

About 20-22,000 homeowners have had problems paying for the maintenance of their homes. This includes 7-10,000 households with seniors.

Other housing problems include dirty tap water (28-31,000 households), peeling paint (24-27,000), insects (20-22,000), heating system (14-15,000), overcrowding (13-14,000), and rodents (6-7,000).

Child Care

There are approximately 105,000 households with children under the age of 18 in the study area. Of these, 97,000 are considered “family” households by the census.

Among these households, 48-52,000 have a parent as the primary caregiver during the day, 14-16,000 have a grandparent or other adult family member, about 1-2,000 have older children watch younger siblings, and 3-4,000 go to a neighbor or friend. Among professional child care providers, 15-17,000 use a child care center as their primary care provider during the day, 4-5,000 use a registered provider, and 5-7,000 use school and after-school programs. Among those who use an adult relative or a friend for child care, 7-8,000 pay for that service. In total, about 32-35,000 households with children use some sort of professional or paid primary child care source.

Among those household that do not use professional child care, 14-16,000 households say they cannot find affordable child care. Another 3-4,000 cannot find the type of child care they need.

Youth Issues

According to parental reports, approximately 6-7,000 households include a pre-teen child with emotional or behavioral problems. About 10 percent of these are not getting help for those problems.

About 2-3,000 households include a teenager who participates in a mentoring, employment, or guidance program.

Senior Issues

Of the 70,000 area households with seniors, 13-14,000 include a senior who cannot get out of the house to participate in different activities.

Other major reasons why seniors don't go out include preference to stay home (12-13,000 senior households), costs of activities (9-10,000), no companion (7-8,000), lack of activities (6-7,000), and transportation problems (3-4,000).

About 23-25,000 area households include someone who is responsible for the care of an ill or homebound senior. About 8-9,000 take care of the senior in their own home, 10-12,000 in the senior's home, and 4-5,000 in a nursing facility.

Of the 18-21,000 households with someone who takes care of an ill senior in a home setting, the vast majority (14-16,000) have no outside professional help. 2-3,000 use skilled nursing care, 1-2,000 use respite care, and less than 1,000 use both skilled care and respite care.

Among those who do not use skilled care, about 3-4,000 say they would like to sue it but they are unaware of how to get the service or cannot afford it.

Among those who do not use respite care, 5-6,000 households would like to have this type of service at least occasionally.

Transportation

About 29-33,000 households include someone who relies on public transportation to get them to work in Central New Jersey. About 18-21,000 households have someone who regularly uses public transportation to get to services or go shopping.

About 33-37,000 area households have major problems getting transportation to and from places. Another 41-46,000 households have minor problems with transportation.

Substance Use

About 7-9,000 area households include someone who has had a reported problem with alcohol or drugs in the past two years.

**UNITED WAY OF CENTRAL JERSEY
COMPASS NEEDS ASSESSMENT
TELEPHONE SURVEY**

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**UNITED WAY OF CENTRAL JERSEY
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CHAPTER 1: INTRODUCTION

A. Project Background and Objectives

The United Way of Central Jersey COMPASS Needs Assessment Telephone Survey was developed by The Eagleton Institute's Center for Public Interest Polling in consultation with representatives from the United Way of Central Jersey and from Middlesex County. The main objective of the survey is to provide information on the social service and related needs of residents within the UWCJ service area.

The specific issues addressed by this study include:

- unemployment issues,
- health care access,
- housing needs,
- child care and youth recreation needs,
- senior social needs and respite care, and
- transportation needs.

B. Summary of Research Methodology

The survey involved telephone interviews conducted between June 13 and 24, 2001 with a random probability sample of 400 UWCJ area (defined as all Middlesex County municipalities and Franklin Township) residents 18 years old and older.

Percentages for the total sample of 400 have a sampling error of ± 5 percent at a 95 percent confidence level with 50/50 proportions. Sampling error is the probability

difference in results between interviewing everyone in a population versus interviewing a scientific sample taken from that population. Sampling error does not take into account any other possible sources of error inherent in any study of public opinion. A more comprehensive description of the research methodology is included in Appendix B.

C. Organization of the Report

This descriptive report is designed to provide an overview of the key findings from the research and a road map to the data produced from the survey. Following this introductory chapter is a summary of the survey findings.

Following the narrative report are two appendices. Appendix A contains the text of the questions used in the survey as well as the demographic and other questions used in the analysis of the data. Readers are encouraged to use the questionnaire in Appendix A to review the exact question wording. Appendix B provides additional information about the survey methodology and a demographic profile of survey participants for a better understanding of the process used to obtain the data.

D. Caveats and Acknowledgments

Because of the small overall sample size, it is not feasible to report statistically significant findings for most sub-groups within the population. However, where the data indicate a possible difference, these will be referenced as a point of interest for further study. *Inclusion of these findings in this report should not be construed as being statistically significant differences supported by the present survey data.*

At Eagleton, the study was directed by Patrick Murray, Senior Research Analyst. The report and the interpretation of the survey findings are the sole responsibility of the

Center for Public Interest Polling, the Eagleton Institute of Politics at Rutgers the State
University of New Jersey.

**UNITED WAY OF CENTRAL JERSEY
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TELEPHONE SURVEY**

CHAPTER 2: OVERVIEW OF SURVEY FINDINGS

A. Introduction

The findings reported in this chapter are organized around the main questions included in the survey. The findings are presented for the entire area first. The survey report may indicate areas where gaps exist. However, due to the small sample size these sub-group differences should not be construed as statistically significant. They are included here only to indicate areas for further study.

B. Overall Area Needs

According to area residents, the top needs of their Central Jersey neighbors are recreation (17%), transportation (14%), and education (10%).

When asked about the needs of their own household, residents list a wide range of issues. The most common needs are financial, such as making ends meet (16%), and getting tax relief (7%).

Six percent of area households need recreation services. Recreation needs are more noted among parents (10%). Residents from the suburban Brunswicks (North, South, and East), Franklin, and Sayreville may have more of a need for these services.

Six percent of area households say their most important need is home maintenance assistance. This is a particular need among those age 55 and older (13%). Home maintenance may also be more of an issue in the eastern Raritan area (Perth

Amboy, South Amboy, Sayreville, Old Bridge, South River) than it is in other municipalities.

Four percent of area households say their most pressing need is either open space or quality of life issues, education, crime and safety, or transportation. Parents are more likely to list education as their most important need (12%). Education seems to be a more important reported need in Perth Amboy than in other towns. Transportation is more likely to be listed by residents of the far southern part of Middlesex County. Open space issues may be somewhat more important in New Brunswick and East Brunswick than in other area towns.

Three percent of households list their most important need as housing. This is particularly true in New Brunswick.

Two percent say their household's most important need is better health care access. This is somewhat more likely to be a need in East Brunswick, the Sayreville/South Amboy area, and Monroe and towns south.

Two percent say their most important need is better utility service. Residents of Old Bridge and the Monroe area may be more likely to view this as most important.

One percent of households list jobs as most important. This appears to be more of an issue in New Brunswick and Perth Amboy than elsewhere.

One percent of all households, including three percent of parents, say that child care is their most pressing need. Nearly half of all area residents (44%) say their household does not have any pressing needs.

C. Employment

One-in-five area households (21%) report that someone in their household has been involuntarily out of work in the past two years. About half of these people are still out of work. This statistic is more likely to affect lower income households. Overall, about 5 percent of the “chief wage earners” in area households are currently out of work.

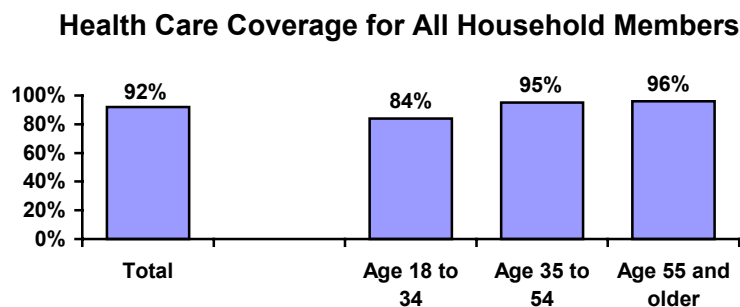
The main self-reported reason for unemployment in the area is related to a health disability (33%). About 15 percent of those unemployed in the past two years were let go due to a company relocation or downsizing and 13 percent were laid off for other reasons. Six percent were fired.

Other reasons for job loss include lack of appropriate job skills (7%), the failure of one’s own business (4%), the employee quit (3%), or the employee’s age (2%).

Among those who have been actively looking for a job but are still unemployed, 20 percent were laid off, 18 percent have a health disability, 16 percent lack appropriate job skills, and 15 percent suffered a business failure.

D. Health Care Access

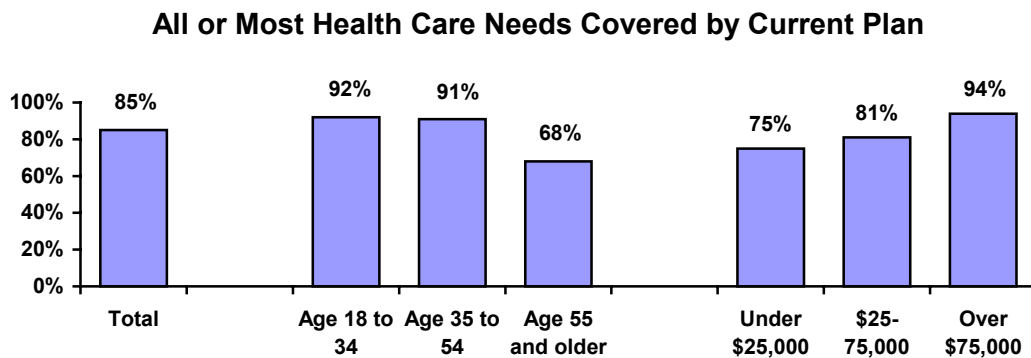
According to survey findings, 92 percent of area households have health insurance coverage for all the people living under their roof. Health care coverage is somewhat less extensive among adults age 18 to 34 and among Hispanic residents.



One percent of households lack coverage for children living there. This may be more prevalent in Perth Amboy and in the suburban Brunswicks (North, South, East) and Franklin than in other area towns.

The main reasons for residents' lack of coverage include the fact that their job does not offer it (32%), it is too expensive (20%), non-covered adults are not employed (12%), and coverage is not available to part-time employees (11%). Other reasons cited include lack of citizenship (6%), expired coverage (5%), and lack of availability to non-family members.

Among those who have health insurance coverage, 85 percent report that all or most of their health care needs are covered by their plan. Lower income families and older residents are somewhat less likely to say that their needs are covered.



Nearly 1-in-10 are residents (9%) report that a member of their household needed to see a health care practitioner in the past month, but could not because of the cost. This is particularly noted for those earning less than \$25,000 (18%), but is also a problem for those in the middle income bracket (12% of those earning \$25,000 to \$75,000).

This also is true of households with insurance coverage (7%). Households without insurance coverage (35%) are most likely to report that someone was unable to

see a doctor in the past year because of the cost. Although, 7 percent of households with insurance coverage also report this problem.

Residents were asked about the impact of five potential barriers to obtaining health care. About 1-in-4 reports having some problems with getting time off work for appointments (26%), being able to pay for prescribed medications (24%), and not having health services nearby (23%). About 1-in-7 residents reports that finding transportation to medical offices is a problem (14%). Among parents, 1-in-5 reports that finding child care is a problem (19%).

Not being able to pay for a prescription is more of a problem for those age 55 and older (34%) and those age 18 to 34 (29%) than it is for residents aged 35 to 54 (14%).

New Brunswick residents may be more likely to report problems with getting time off work, being able to pay for prescriptions, and finding transportation. Asian residents seem somewhat more likely to report problems with getting time off work and with finding health services nearby. Older residents and lower income residents are somewhat more likely to report problems getting transportation.

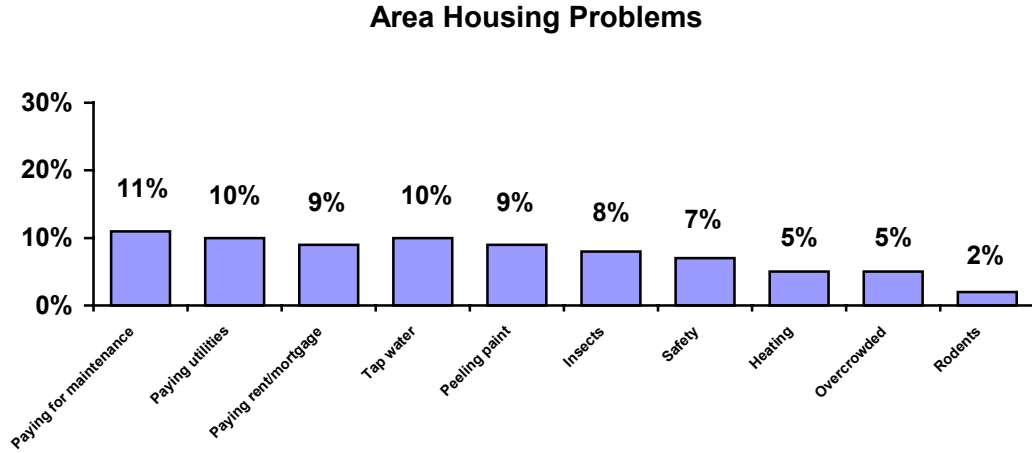
E. Housing

Two thirds (68%) of area households own their homes. By race/ethnicity, this includes about 4-in-5 white families and half of black, Hispanic, and Asian families.

The prevalence of home ownership is lowest in the cities of New Brunswick and Perth Amboy, as well as in Plainsboro.

About half of all renters have been in their homes for two years or less, compared to 1-in-5 home owners who have lived in their current home for only a couple of years.

About 1-in-10 area households experience some type of problem with their home, either with expenses or with housing conditions.



In the past two years, 1-in-10 households have had problems paying rent, mortgage, or utilities. About 1-in-10 homeowners have had problems maintaining their homes in the past two years.

Households that have experienced problems paying rent or mortgage include all income categories, from under \$25,000 (17%), to \$25,000-75,000 (10%), to over \$75,000 (5%). However, those households earning less than \$25,000 are somewhat more likely to have experienced problems with utility payments (24%) and home maintenance (21%).

Also, black families and New Brunswick residents seem somewhat more likely to report problems with paying utilities. Residents of Sayreville may be somewhat more likely to experience problems maintaining home repairs.

In terms of other housing issues, Hispanic families tend to have more problems with overcrowding and peeling paint in their homes. Asian families are more likely to complain of insects and safety issues. Problems such as dirty tap water, peeling paint, and rodents seem to be more of a problem in New Brunswick.

All of these problems affect both homeowners and renters to some degree. However, peeling paint (17%) and insect problems (14%) are more likely to affect renters.

F. Child Care

Overall, one-third of area households (35%) include a child under the age of 18. This includes about half of all black, Hispanic, and Asian households and 1-in-4 white households. Twenty percent of area households have two or more children.

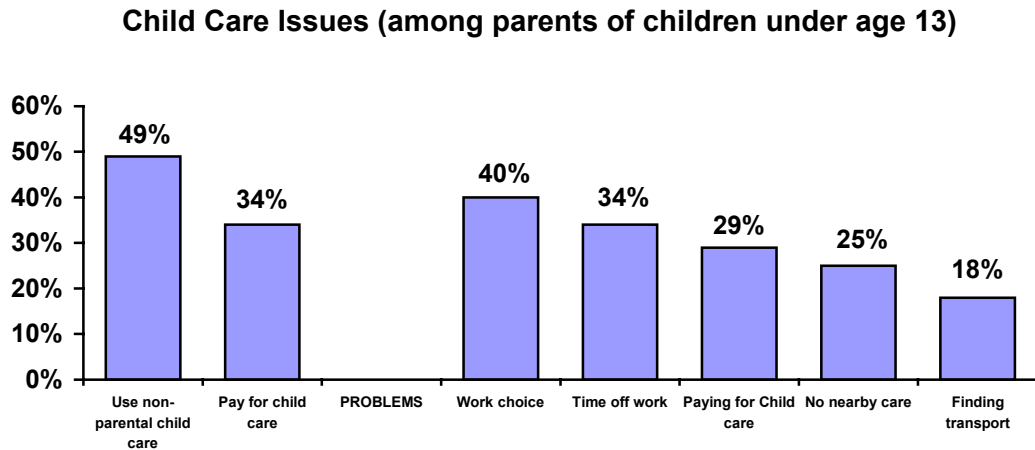
Eight percent of area households include a child age 2 or younger. 10 percent include a child between the ages of 3 and 5. Fifteen percent include a child between the ages of 6 and 12 and 14 percent include a teenage child.

Child care for nearly half of all area households with children under the age of 13 is provided by the mother (45%) or father (14%). About one quarter of these households rely on a family member (mostly grandparents – 14%) or neighbor to watch their children and the remaining one-quarter use a child care center (17%) or registered family provider (6%) to provide child care. Eight percent also list their child's school as another child care source.

In all, about half of area households with children under the age of 13 have child care provided by someone other than a parent for at least part of the time. About 1-in-3 area households with children under the age of 13 pay for child care services.

Upper income households seem to be somewhat more likely than middle and lower income families to use non-parental child care, but they are not more likely to pay for this care. Black and Hispanic families appear to be much more likely than white or

Asian families to use non-parental child care. They also seem to be more likely to pay for this child care.



About 3-in-4 child care users are very satisfied with the quality and convenience of the child care they receive. Fewer than 1-in-12 are not satisfied. Among those who pay for child care services, about 4-in-10 are very satisfied with the cost, 3-in-10 are somewhat satisfied, and 3-in-10 are not satisfied with the cost they pay for child care.

Among those parents who do not currently use child care services, about 1-in-4 say they would like to use child care but they cannot find affordable child care services. Black and Hispanic families and those in the lower income bracket appear much more likely to express this need for professional child care.

Among the other issues facing area parents of children under age 13 are having to make a choice between work and child care (40%), getting time off work to care for a sick child (34%), not being able to pay for child care (29%), finding child care near home or work (25%), and finding transportation to child care (18%).

Black and Asian parents may be more likely to experience problems finding transportation. Black families may experience more problems paying for child care. White families and upper income families are less likely to experience any of these child care problems.

G. Youth Issues

Among parents of pre-teen children, 1-in-10 says their child has experienced emotional or behavioral problems, such as attention deficit disorder or depression. Lower income families are about twice as likely to report this situation. There appear to be no differences by race or ethnicity. In almost all cases, these parents say they have been able to get help for their children.

In the area of teen mentoring, according to parental reports, about 1-in-12 teenagers participate in some type of program to provide guidance, such as an employment program or Big Brothers/Big Sisters. Overall, 2-in-3 parents of teens feel that their child could benefit from this type of program.

About 7-in-10 children between the ages of 6 and 17 participate in after-school activities or other recreational programs. It appears that white children are somewhat more likely to participate in these types of activities while Asian children are somewhat less likely than others to do so.

About 1-in-3 parents say that it is difficult for them to arrange transportation for their child to get to recreational activities. This appears to be more of an issue among younger parents (those under age 35) and black parents than it is for others.

About half of area parents with school-age children feel that there are enough recreational programs and facilities for youth in their neighborhood or town. Hispanic parents seem to be least likely to feel this way.

Among facilities or programs parents would like to see in their towns are more local sports programs (13%), a recreational center (13%), a community pool (10%), more parks and playgrounds (9%), more educational activities (9%), a center exclusively for youth (5%), lower costs for current programs (4%), a skating rink (4%), arts activities (3%), and programs specifically for younger children (3%). Asian and Hispanic parents are somewhat more likely to name a community swimming pool as something they would like to see. Black and Hispanic parents are somewhat more likely to want more sports programs.

H. Senior Issues

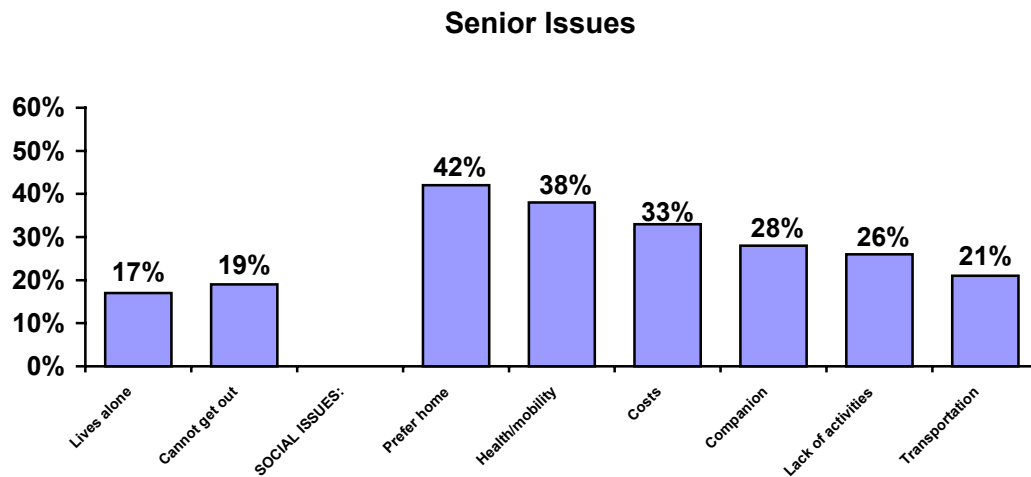
Nearly 1-in-4 (23%) of all area households includes someone age 65 and older. White households are about twice as likely as other racial/ethnic backgrounds to include a senior member. The Monroe/Jamesburg area has the highest concentration of seniors. Households with seniors are somewhat less prevalent in the Woodbridge area, North Brunswick/South Brunswick/Franklin area, Old Bridge, and the Plainsboro/Cranbury area.

Among these seniors, half live with younger household members. About 1-in-4 senior households consists of two seniors only and 1-in-6 consists of a senior who lives alone. White seniors appear to be much more likely than seniors of other racial/ethnic

backgrounds to live alone. About 1-in-5 senior women lives alone compared to about 1-in-8 senior men who live alone.

More than half of these seniors (58%) are able to get out most of the time to participate in different activities. About 1-in-5 are able to get out some of the time and 1-in-5 are not able to get out at all.

Among the reasons seniors are not able to get out to participate in certain activities, a preference to stay home (42%) and health or mobility problems (38%) are most common. Other problems faced by many seniors include the cost of activities (33%), the lack of a companion to attend activities (28%), the lack of available activities (26%), and the lack of transportation to activities (21%).



About 1-in-12 households (8%) reports that someone cares for a senior who is ill or homebound or have responsibility for a senior in a nursing home. This appears to be slightly more prevalent among black households and among households in New Brunswick. Among those who care for a senior, about half do so in the senior's own

home, 1-in-3 do so in their own home, and 1-in-6 do so in a nursing home facility or senior residence.

Among those people who care for a senior at home (theirs or the senior's), only about 1-in-8 report utilizing skilled care services from a visiting nurse or other practitioner. Among those who don't use skilled care, most report that the senior doesn't need such help or that the family can handle the situation. About 1-in-5 say they are unaware of the service or cannot afford it.

Similarly, 1-in-8 people who care for a senior say they use respite care – that is someone to spend time with the senior while the caregiver goes out to run errands or do other activities. The 1-in-8 who currently use respite care compares to about 1-in-3 caregivers who say they could use respite care at least occasionally.

I. Transportation

Almost all (95%) area households own a car, including 2-in-3 that own more than one vehicle. About 1-in-8 households earning under \$25,000 does not own a car. There are no significant racial/ethnic differences in reported car ownership.

Over 1-in-5 households (22%) include an adult who uses public transportation to get to work. About half of these commuters (11% of all area households) work within 20 miles of their home.

About 1-in-3 black, Hispanic, and Asian households includes a public transit commuter, compared to 1-in-7 white households. White commuters are also less likely to work in Central New Jersey than are commuters of other racial/ethnic backgrounds. New

Brunswick residents appear to be most likely to use public transportation for their work commute.

About 7 percent of area households regularly use public transportation to go shopping or to get services. Lower income residents and New Brunswick residents seem more likely to use public transportation for this purpose.

Overall, 28 percent of area residents report that transportation is a problem for their households. This seems to be a particular issue for Asian households.

Three-in-ten residents say that having more public transportation options would be most helpful to them and their transportation issues. This sentiment is strongest in the southern portions of Middlesex County (Plainsboro, Cranbury, and Monroe).

Eight percent of area residents feel that improving roads is most important for them and 7 percent say the same about lowering the cost of running a car (e.g. gas and insurance). About half (47%) do not express any need for transportation improvements for them personally.

J. Substance Use

According to survey reports, about 3 percent of households include someone who has had a problem with alcohol or drugs in the past two years. This issue affects all racial/ethnic, income and age groups, but it appears to be somewhat more prevalent in urban areas.

K. English Literacy

About 1-in-10 households reports that someone in their household has difficulties reading or writing English. In most cases (7%) this person is an adult, but such problems are reported for teenagers (1%) and younger children (1%) as well.

This language barrier is most likely to be reported among Hispanic households (about 1-in-4). About 1-in-7 Asian households reports having a problem with English literacy, as do 1-in-10 black households and 1-in-17 white households.

L. Income Issues

About 4 percent of area households report having an annual income under \$10,000, 12 percent earn between \$10,000 and \$25,000, 19 percent earn between \$25,000 and \$50,000, 16 percent earn between \$50,000 and \$75,000, 15 percent earn between \$75,000 and \$100,000, and 21 percent earn \$100,000 or more. Another 13 percent do not report their income.

Black and Hispanic households are somewhat more likely to earn below \$25,000 (about 1-in-4), while Asian households are least likely to earn less than \$25,000 (about 1-in-20). Also older residents (40% age 55 and older) are more likely than those who are under 35 years old (14%) or 35 to 54 years old (7%) to live in a household earning less than \$25,000.

About 1-in-20 area households (5%) reports receiving public assistance. This includes about 1-in-5 Hispanic households, 1-in-12 black households, and fewer than 1-in-25 white or Asian households.

About half (47%) of all area households report that their current income level enables them to buy all the things they need. Two-in-five (39%) say their income buys some of the things they need, and 10 percent say it buys them only a few of the things they need.

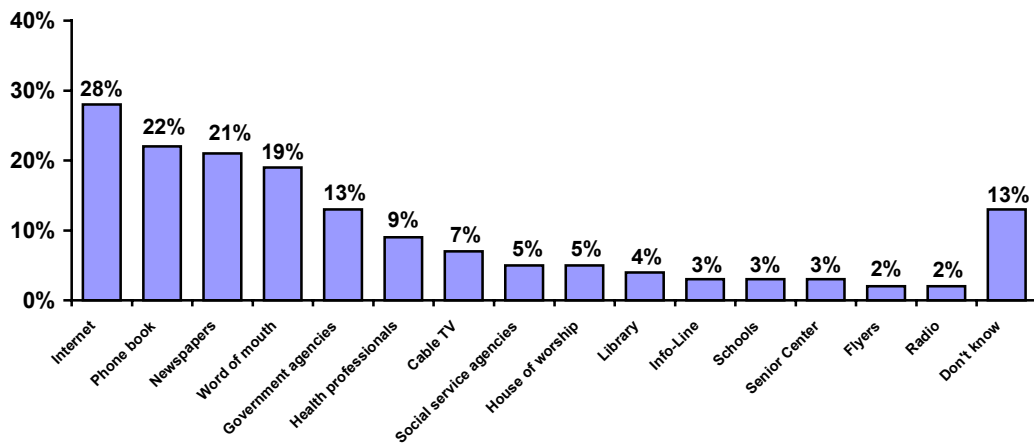
As may be expected, those earning less than \$25,000 (about 1-in-4) are more likely to report that their current income only buys a few of the things they need. This situation is reported by between 1-in-7 and 1-in-12 residents of all racial/ethnic backgrounds.

M. Information Sources

If they needed to find out what type of help was available in their area the most common sources of information residents would turn to include the Internet (28%), the telephone book (22%), local newspapers (21%), and family, friends, or colleagues (19%).

Other sources of information that some residents would think to use include

Social Service Information Sources



county or city government agencies (13%), health care professionals (9%), local cable access television (7%), social service agencies (5%), their religious organization (5%), the local library (4%), Info-Line (3%), local schools (3%), the local senior center (3%), flyers or notices (2%), and the radio (2%). Thirteen percent of area residents don't know where they would turn for information if they needed help.

In general, Asian residents (19%) are somewhat more likely than others to say they don't know where they would turn for information.

Lower income residents are somewhat more likely to turn to local cable access channels for information than are those in the middle and upper income categories. However, extremely few people earning less than \$25,000 would use the Internet at this point in time.

It is also helpful to look at potential information sources by current service needs to examine how best to reach certain populations.

Unemployed – the top information sources for this group include the Internet (30%), telephone book (25%), word of mouth (22%), and local newspapers (21%).

Medical care cost barrier – the top information sources for this group include the Internet (17%), social service agencies (16%), government agencies (14%), word of mouth (14%), and local newspapers (14%). Also, 20 percent of this group do not know where to turn for information about services.

Peeling paint in housing – the top information sources for this group include the telephone book (33%), word of mouth (23%), and local newspapers (20%).

Insects in housing – the top information sources for this group include the Internet (36%), word of mouth (28%), and the phone book (22%).

Tap water problems – the top information sources for this group include local newspapers (35%), the Internet (31%), the phone book (31%), and word of mouth (23%).

Mortgage/rent problems – the top information sources for this group include word of mouth (40%), the telephone book (27%), the Internet (20%), and local newspapers (19%).

Utility payment problems – the top information sources for this group include word of mouth (35%) and the phone book (34%).

Need affordable child care – the top information sources for this group include the Internet (24%), local newspapers (24%), the phone book (19%), and word of mouth (19%).

Child with behavioral problems – the top information sources for this group include word of mouth (32%), local schools (19%), the phone book (19%), and health care professionals (19%).

Teen can benefit from mentoring – the top information sources for this group include the Internet (35%), the phone book (31%), and local newspapers (27%).

Need for more youth recreational activities – the top information sources for this group include local newspapers (35%), the Internet (32%), and the phone book (29%).

Senior not able to get out – the top information sources for this group include the local newspapers (20%), cable TV (17%), government agencies (17%), and word of mouth (17%).

Care giver for senior – the top information sources for this group include the Internet (31%), the phone book (22%), and health care professionals (22%).

Use local public transportation for work – the top information sources for this group include the phone book (29%), and the Internet (24%).

Use local public transportation for other purposes – the top information sources for this group include social service agencies (22%), word of mouth (21%), and local newspapers (19%). Also, 22 percent of this group do not know where to turn for information about services.

Have transportation problems – the top information sources for this group include the Internet (31%), the phone book (19%), and word of mouth (19%).

Substance use – the top information sources for this group include the phone book (44%), word of mouth (28%), the Internet (24%), and health care professionals (23%).

English literacy problems – the top information sources for this group include word of mouth (24%), government agencies (18%), and the Internet (18%).

**APPENDIX A:
SURVEY INSTRUMENT
EAGLETON INSTITUTE Center for Public Interest Polling
UNITED WAY OF CENTRAL JERSEY 2001 COMPASS NEEDS ASSESSMENT
June 13-24, 2001 (n=400)**

Hello. My name is _____. I am from the Eagleton Poll at Rutgers University. We are doing a survey for Middlesex County and the United Way of Central Jersey about the service needs of people in the Middlesex County area. This information will be used to better understand those services which are needed in our area.

Your is one of 400 households that have been contacted to take part in this survey. So your participation is important to insure that we get an accurate representation of the area. It will only take about 15 minutes to complete and all your answers will be kept CONFIDENTIAL.

- S1. Am I speaking to a member of the household who is at least 18 years old?
[IF YES:] Do you have time to complete the interview with us now?
- S2. And just so I can make sure all towns in the study area are covered, what town or municipality do you actually live in?

- 12% Piscataway/Dunellen/Middlesex/South Plainfield
- 16 Edison/Metuchen/Highland Park
- 15 Woodbridge/Carteret
- 6 Perth Amboy
- 6 New Brunswick
- 15 North Brunswick/South Brunswick/Franklin
- 7 East Brunswick/Milltown
- 8 Sayreville/South Amboy/South River
- 7 Old Bridge
- 6 Monroe/Jamesburg/Helmetta/Spotswood
- 3 Plainsboro/Cranbury

A. AREA NEEDS

A. How would you rate **[READ ITEM]** as a place to live—excellent, good, only fair, or poor?

	<u>Excellent</u>	<u>Good</u>	<u>Only fair</u>	<u>Poor</u>	<u>DK/Ref</u>
1. Central New Jersey	22%	56%	19%	3%	--%
2. <i>[read in hometown or city]</i>	24	52	20	4	1

A3. Now we'd like to ask you about the needs of people in your area. These may include economic, social service, and recreational needs. Based on what you have seen or heard, what are the **MOST IMPORTANT** needs that people in your area have today?

17%	Recreation
14	Transportation /buses/trains/roads
10	Education/schools
7	Money/making ends meet
4	Housing/affordable housing
4	Social services
4	Child care
4	Jobs
3	Tax relief
3	Open space, quality of life issues
3	Health care
2	Crime, safety
2	Other
35	Don't know

A4. And thinking about your own household, what are the **MOST IMPORTANT** needs of your household today?

16%	Money/making ends meet
7	Tax relief
6	Recreation
6	Home maintenance
4	Open space, quality of life issues
4	Education/schools
4	Crime, safety
4	Transportation /buses/trains/roads
3	Housing/affordable housing
2	Health care
2	Better utility services
1	Jobs
1	Child care
2	Other
44	Nothing/Don't know

B. EMPLOYMENT NEEDS

Now, I'm going to ask you some questions about your household. Let's start with employment issues.

B1. In the past two years, have any adults in your household been involuntarily out of work – that is laid off, disabled, or otherwise unemployed?

21%	Yes	>>> CONTINUE WITH SERIES
74	No	
4	(VOL) Retired	
1	(VOL) Don't Know / Refused	

B2. How many adults have been out of work in the past two years?

79%	None	18%	One	3%	Two
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B3. [Has this person / Have any of them] been looking for work during this time?

62% (n=78)

B4. [Was this person / Were any of these people] the chief wage earner in your household?

54% (n=78)

B5. [Is this person / Are any of these people] still out of work?

52% (n=78)

B6. What is the **MAIN** reason [this person was / these people were] out of work?

(n=78)

33% Health disability
15 Company relocation/downsize
13 Laid off
7 Lack of job skills
6 Fired
4 Own business failed
3 Quit
2 Age
14 Other
3 No answer

C. HEALTH CARE ACCESS

C1. Are all the members of your household covered by some type of health insurance—including prepaid care plans such as HMOs, or government plans such as Medicare or Medicaid?

92% YES

C2a. Do all, some, or none of the **ADULTS** in your household have health insurance coverage?

92% All
4 Some
4 None

C2b. Do all, some, or none of the **CHILDREN UNDER AGE 18** in your household have health insurance coverage?

34% All
1 None
65 NA/no children in HH

C3. Are the people who are not covered by insurance immediate family members of those who are?

82% Yes 18% No (n=21)

C4. What is the **MAIN** reason these people in your household do **NOT** have health insurance coverage?

(n=29)

32% Job doesn't offer
20 Too expensive
12 Not employed
11 Not available to part time employees
6 Not a citizen
5 Coverage expired
4 Only available to family members
10 No answer

C5. And when the members of your household need health care, does your insurance coverage generally pay for all of your needs, most of your needs, some of your needs, or none of your needs?

(n=389)
 27% All needs are covered
 58 Most needs are covered
 12 Some needs are covered
 1 No needs are covered
 2 (VOL) Don't Know / Refused

C6. Was there a time during the last 12 months, when someone in your household needed to see a doctor or nurse practitioner, but could not because of the cost?

(n=400)
 9% YES
 91 NO
 1 (VOL) Don't Know / Refused

C7. There are many reasons why people don't get the medical care they need. For each one I read, please tell me how much of a problem it has been for your household. First, [**READ ITEM**] --- has this been a major problem, minor problem, or not a problem for your household?

	<u>Major Problem</u>	<u>Minor Problem</u>	<u>Not a Problem</u>	<u>Does Not Apply(VOL)</u>	<u>Don't Know/Ref</u>
a. Finding transportation to get medical care	6%	8%	84%	1%	1%
b. Finding day care for your children	3	6	39	50	1
c. Getting time off from work	8	18	62	11	1
d. Not having health services nearby	6	17	75	1	1
e. Being able to pay for a prescription for medicine	7	17	76	--	--

D. HOUSING

D1. Do you own or rent your apartment or house?

68% Own
 30 Rent
 2 Live rent free with parents / relatives / friends
 -- (VOL) Don't Know / Refused

D2. For how many years have you lived in this home?

28% 2 or less
 17 3 to 5
 15 6 to 10
 17 11 to 20
 17 21 to 40
 5 Over 40

D3. Do any of the following conditions exist in your home?

	<u>Yes</u>
a. Too many people living there	5%
b. The paint is chipped or flaking	9
c. There are rats or mice in the building	2
d. There are cockroaches or other insects in the building	8
e. The tap water is dirty or smells bad	10
f. The heating doesn't work right in the winter	5
g. The area around my home is not safe	7

D4. Have you had any problems in the past two years keeping up with either a mortgage or property tax payments or rent payments?

9% YES
90 NO
1 (VOL) Don't Know / Refused

D5. Have you had any problems in the past two years paying for utilities, such as electricity, gas, or oil?

10% YES
89 NO
1 (VOL) Don't Know / Refused

[ASK Q.D6 TO HOMEOWNERS ONLY]

D6. And have you had any major problems in the past two years keeping up with the maintenance of your home – where you had problems paying for necessary repair or maintenance work?

(n=275)
11% YES
88 NO
1 (VOL) Don't Know / Refused

D7. If you needed to find another home or apartment today, how difficult would it be for you to find a place that you could afford in your current neighborhood?

25% Very difficult
32 Somewhat difficult
22 Not too difficult, or
16 Not at all difficult
5 (VOL) Don't Know / Refused

E. CHILD AND YOUTH NEEDS

E1. Now I'd like to ask some questions about children.
Do any children under the age of 18 live in your household?

35% YES

E2a. How many of these children are between the ages of 13 and 17?

21% None 9% One 5% Two or more

E2b. How many are between the ages of 6 and 12?

20% None 10% One 5% Two or more

E2c. How many are between the ages of 3 and 5?

25% None 8% One 2% Two or more

E2d. And how many are age 2 or younger?

27% None 8% One --% Two or more

(Summary -- Number of children in Household: 65% None 15% One 14% Two 6% Three or more)

E3. Are you the parent or a primary caregiver for these children?

31% YES

4 NO

65 No children in Household

GO TO SECTION F

GO TO SECTION F

E4. I'd like to ask some questions about your children who are **AGE 12 AND YOUNGER**.
Who usually watches or takes care of these children during the day?
[ACCEPT ALL ANSWERS]

(n=102)

45% Mother

14 Father

12 Grandmother

2 Grandfather

2 Older children watch the younger children

4 Other family member (Aunt, Uncle, cousin, etc.)

4 A friend or neighbor

17 Child care center

6 Registered Family Child Care Provider

8 School

[ASK IF OTHER THAN PARENT OR PROFESSIONAL CHILD CARE IN Q.E4]

E5. Do these people take care of your children in your home or in their own home?

(n=30)
 35% Respondent's home
 31 Caregiver's home
 6 (VOL) BOTH
 27 School

E6. Do you pay for this child care ?

(n=30)
 50% YES

[ASK IF OTHER THAN PARENT IN Q.E4]

E7. Overall, how satisfied are you with the [READ ITEM] of the child care you have—
 very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?

	<u>Very Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Not Very Satisfied</u>	<u>Not At All Satisfied</u>	<u>Don't Know/Ref</u>
a. Quality (n=51)	73%	18%	4%	--%	5%
b. Cost (n=35)	43	29	13	15	--
c. Convenience (n=51)	75	16	6	2	1

[ASK IF PROFESSIONAL CHILD CARE IS USED]

E8. Are you not using professional child care because you do not need it, because you cannot find the kind of child care you need, or because you cannot afford child care?

(n=81)
 66% DO NOT NEED IT
 5 CANNOT FIND WHAT I NEED
 18 CANNOT AFFORD IT
 4 (VOL) BOTH CANNOT FIND AND CANNOT AFFORD
 8 (VOL) Don't Know / Refused

E9. Parents may face a number of concerns in finding care for their children. For each one I read, please tell me how much of a problem it has been for you. First, **[READ ITEM]** --has this been a major problem, minor problem, or not a problem for you?

(n=102)	Major Problem	Minor Problem	Not a Problem	Don't Know/Ref
a. Finding transportation to child care	9%	9%	80%	1%
b. Finding child care near your home or work	10	15	72	4
c. Getting time off from work to care for a sick child	12	22	61	5
d. Not being able to pay for child care	20	9	69	2
e. Having to make a choice between work and child care	14	26	56	3

E10. In another area, do any of your children **AGE 12 OR YOUNGER** ever experience any emotional or behavioral problems, such as attention deficit or depression?

(n=102)
9% YES

E10a. Are you able to find help for them when they have these problems?

(n=9)
90% YES

[IF TEENS IN HOUSEHOLD, CONTINUE WITH SERIES.]

E11. Now I'd like to ask some questions about the teenagers in your household. Do any of these teens participate in a mentoring program or other program to provide help or guidance, such as an employment program or Big Brothers/Big Sisters?

(n=47)
8% YES
90 NO
2 (VOL) Don't Know / Refused

E12. How much do you feel that your teen could benefit from participating in this type of program?

(n=43)
32% A great deal,
32 Some,
11 A little, or
23 Not at all?
2 (VOL) Don't Know / Refused

E13. Do any of your children between the ages of 6 and 17 participate in after-school activities or other recreational programs?

(n=90)
71% YES

E14. How easy is it to arrange transportation for your child to get to recreational activities that they may want to participate in?

(n=90)
40% Very easy,
26 Somewhat easy,
18 Somewhat difficult, or
15 Very difficult?
2 (VOL) Don't Know / Refused

E15. Do you feel there are enough recreational programs and facilities for youth in your neighborhood or town?

(n=90)
53% YES
41 NO
5 (VOL) Don't Know / Refused

E16. What types of youth activities or improvements in recreational programs or facilities would you like to see in your area?

(n=90)
13% More local sports programs
13 "Y" / recreation center
10 Pool
9 Parks / playgrounds
9 Educational activities
5 Teen center
4 Lower costs for programs
4 Skating rink
3 Arts activities
3 Programs for younger children
3 Other
23 Don't know

F. SENIOR NEEDS

F1. Now, I'd like to ask some questions about adults in your household.
How many adults age 18 or older live in your household **INCLUDING** yourself?

(n=400)
18% One
55 Two
18 Three
9 Four or more

(Summary: total household size = adults + children)
16% Lives alone
33 Two people
20 Three people
19 Four people
13 Five or more people

F2. [Is this adult / How many of these adults are] age 65 or older?

77% None
13 One
10 Two

F3. [Is this senior / Are these seniors] able to get out to participate in different activities?

(n=97)
39% All the time,
19 Most of the time,
19 Some of the time, or
19 None of the time?
4 (VOL) Don't Know / Refused

F4. There are many reasons why seniors may not participate in certain activities. I am going to read a list. For each one, please tell me how much of a reason it is for seniors in your household.
First, **[READ ITEM]** -- is this a major reason, minor reason, or not a reason why the seniors in your household do not participate in certain activities?

(n=97)	<u>Major Reason</u>	<u>Minor Reason</u>	<u>Not a Reason</u>	<u>Does Not Apply(VOL)</u>	<u>Don't Know/Ref</u>
a. Finding transportation to activities	5%	16%	74%	2%	3%
b. Health or mobility problems	16	22	62	--	--
c. Don't have anyone to go with	11	17	69	2	1
d. There aren't many activities available	9	17	62	3	9
e. Activities cost too much	14	19	65	1	1
f. Just prefer to stay home	18	24	54	4	1

F5. Are there any other reasons why the seniors in your household do not participate? (n=97)
3% language barrier, 3% lack of time, 3% don't like the people, 92% no other

F6. Do you or anyone in your household care for a senior who is ill or homebound or have responsibility for the care of a senior who may be in a nursing facility or group home?

(n=400)
8% YES

F7. Do you care for this person in your home, in their home, or are they in a nursing facility or group home?

(n=34)
37% Respondent's home
46 Senior's home
17 Nursing facility/group home

Now I'm going to ask you some questions about **SKILLED** care and **RESPITE** care. **SKILLED CARE** are services given by a visiting nurse or other health care practitioner. **RESPITE CARE** is someone who comes in to spend time with a senior so that you can go out and run errands or other activities.

F8. Do you have anyone who comes in to help you with **SKILLED** care, that is a visiting nurse or other health care practitioner?

(n=26)
13% YES

[ASK IF NURSING FACILITY OR SKILLED CARE IS USED]

F9. Overall, how satisfied are you with the **[READ ITEM]** of the elder care you have—very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?

(n=10)	<u>Very Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Not Very Satisfied</u>	<u>Not At All Satisfied</u>	<u>Don't Know/Ref</u>
a. Quality	25%	67%	8%	--%	--%
b. Cost	14	58	20	8	--
c. Convenience	34	52	8	6	--

[ASK IF NURSING FACILITY OR SKILLED CARE IS USED]

F10. What is the **MAIN** reason why you do not have professional **SKILLED** care?

(n=23)
34% Senior doesn't need help
30 Family can handle it
14 Cannot find / unaware of service
7 Cost
15 Don't know / no answer

[ASK IF SENIOR IS CARED FOR AT HOME]

F11. Do you have someone who comes in to provide **RESPITE** care – that is to spend time with your senior so that you can go out and run errands or other activities?

(n=26)
12% YES

F12. Thinking about your own situation, could you use **RESPIRE** care almost every day, at least once a week, occasionally, or rarely?

(n=26)
 20% Almost every day
 7 At least once a week
 9 Occasionally
 20 Rarely
 40 (VOL) Never
 4 (VOL) Don't Know / Refused

G. OTHER NEEDS

Now I'd like to ask some general questions about your household.

G1. How many cars do members of your household own or lease?

(n=400)
 3% None
 30 One
 46 Two
 19 Three or more
 1 Don't know

G2. Do any adults in your household use public transportation to get to work or school on a regular basis?

(n=400)
 22% YES

G2a. Do any of these adults work within 20 miles of your home – that is in the Central Jersey area?

(n=84)
 48% YES

G3. Do any members of your household use public transportation to get to services or go shopping on a regular basis?

(n=400)
 7% YES

G4. Overall, how much of a problem is getting transportation to and from places for your household –

(n=400)
 13% A major problem,
 15 A minor problem, or
 71 Not a problem at all?
 1 (VOL) Don't Know / Refused

G5. What is the **MOST IMPORTANT** thing that should be done to make transportation easier for you and your household?

(n=400)
17% More /better bus service
3 More/better rail service
10 More /better public transportation
8 Better traffic flow/roads
7 Reduce costs for running car (gas, insurance)
2 Better information about public transportation
4 Other
47 No answer

G6. On another topic. In the past two years, has anyone in your household had a problem with alcohol or drugs?

(n=400)
3% YES

G6a. Have they received any type of help or treatment for this?
[IF "YES:" ASK, "what type of treatment?]

(n=10)
36% 12-step / AA / NA
9 Detox
40 Inpatient treatment
8 NO, no help or treatment
8 (VOL) Don't Know / Refused

G6b. Did they get enough help for this?

(n=10)
75% Yes

G7. Now, does anyone in your household have difficulties with reading or writing English? [IF "YES" ASK: *Is this an adult, teenager, or younger child?*]

(n=400)
7% Yes, adult
1 Yes, teenager
1 Yes, younger child
91 No, no one

- G8. And now some questions about where you get information. How would you and your household find out about what help is available in the area if you had a need? Where would you go for information?

[DO NOT READ LIST. MULTIPLE RESPONSE. PROBE: "Any others?"]

	(n=400)
28%	The Internet
22	The telephone book
21	Local newspapers
19	Word of mouth from friends/family/co-workers
13	County or city agencies
9	Doctors, medical professionals, health insurance plans
7	Cable television
5	Social service agencies
5	A church, temple, or place of worship
4	Library
3	"Info-Line"
3	Local schools
3	Senior Center
2	Flyers or notices
2	The radio
5	Other
13	Don't know/no answer

H. DEMOGRAPHICS

Now I just have a few questions so that we can group all answers.

- H1. What is the highest grade or year of school you completed?

	(n=400)
2%	8 th grade or less
5	Grades 9-11/some high school
27	Grade 12/High school graduate/GED
2	Vo-tech/training school
12	Some college
9	Junior/community college graduate/Associates degree
28	College graduate/Bachelors degree
15	Post graduate/masters-doctorate

- H2. Are you married, widowed, divorced, separated, a member of an unmarried couple, or have you never been married?

58%	Married
7	Widowed
8	Divorced
1	Separated
4	Member of unmarried couple
21	Single-Never married
1	(VOL) Don't Know / Refused

H3. What was your age on your last birthday?

5% 18 to 20
4 21 to 24
21 25 to 34
25 35 to 44
20 45 to 54
9 55 to 64
9 65 to 74
7 75 or over
1 No Answer / Refused

H4. Are you of Hispanic or Latino origin?

H5. Do you consider your race to be white, black, Asian, or something else?

61% White, non-Hispanic
11% Black/African-American, non-Hispanic
16 Asian
4 White Hispanic
1 Black Hispanic
1 Mixed race Hispanic
4 Other Hispanic/Latino
1 Other
2 Refused

H6. So that we can group all answers, what is your total annual household income before taxes? Stop me when I reach the appropriate category.

2% (VOL) No income (less than \$1,000 a year)
2 Under \$10,000,
2 \$10,000 to just under \$15,000,
4 \$15,000 to just under \$20,000,
6 \$20,000 to just under \$25,000,
7 \$25,000 to just under \$35,000,
12 \$35,000 to just under \$50,000,
16 \$50,000 to just under \$75,000,
15 \$75,000 to just under \$100,000, or
21 \$100,000 or more
13 (VOL) Don't Know / Refused

H7. With your current income, is your household able to buy all of the things you need, buy some of the things you need, buy a few of the things you need, or not buy much of what you need?

47% Buy ALL of the things you need,
39 Buy SOME of the things you need,
8 Buy a FEW of the things you need, or
2 NOT buy much of what you need?
3 (VOL) Don't Know / Refused

H8. Does anyone in your household receive public assistance, such as welfare, TANF, S.S.I., or food stamps to help pay for food, shelter, or health care?

5% YES
93 NO
1 (VOL) Don't Know / Refused

GENDER (FROM OBSERVATION) 48% Male 52% Female

APPENDIX B:
SURVEY METHODOLOGY

I. INTRODUCTION

The United Way of Central Jersey COMPASS Needs Assessment Telephone Survey was developed by The Eagleton Institute's Center for Public Interest Polling in consultation with representatives from the United Way of Central Jersey and Middlesex County. The main objective of the survey is to provide information on the social service and related needs of residents within the UWCJ service area.

II. QUESTIONNAIRE DEVELOPMENT

The questionnaire was drafted and refined by UWCJ representatives and the Eagleton research staff. The draft questionnaire was pretested with a random group of Middlesex County residents and modifications were made to the survey instrument in order to increase the understandability and accuracy of the questions asked.

Besides the substantive series of questions, some basic demographic information was obtained from all study participants in order to provide a more detailed analysis of the data.

The final version of the questionnaire was programmed into a CATI (Computer Assisted Telephone Interview) system. The CATI system enables the interviewer to accurately skip over certain questions which may be irrelevant to a particular study participant, while retaining the flow and integrity of the interview process.

III. SAMPLE DESIGN

A random proportional probability sample was used to select the 400 UWCJ service area (comprised of all of Middlesex County and Franklin Township in Somerset County) residents 18 years of age and older who were contacted to participate in this study. The sample was designed to make sure that all municipalities and population gender were proportionately selected.

The three-digit exchange was used to match telephone numbers and geographic areas. The remaining four digits were randomly selected. This procedure insures that those with unlisted or new telephone numbers are included in the sample. Each working phone number was called a minimum of three times, at different times of the week, in an effort to reach people who were infrequently at home.

IV. WEIGHTING

While those interviewed in a survey ideally will have the same characteristics as the population they represent, samples frequently may under-represent groups that are more difficult to interview, such as the elderly or those with less than a high school education – or those with a higher likelihood of telephone contact. To correct this imbalance, a statistical technique known as "weighting" is used. The weighting procedure used in this study compares adult population figures for area municipalities from the 2000 U.S. Census with those of the sample.

When there is significant difference between these two figures, the sample is weighted so it more accurately reflects the population of the state. For example, if census figures show 6 percent of area residents live in New Brunswick and the sample consists

of 5 percent from New Brunswick, each respondent in this municipality would be counted as 1.2 persons to adjust for this difference.

V. SAMPLING ERROR

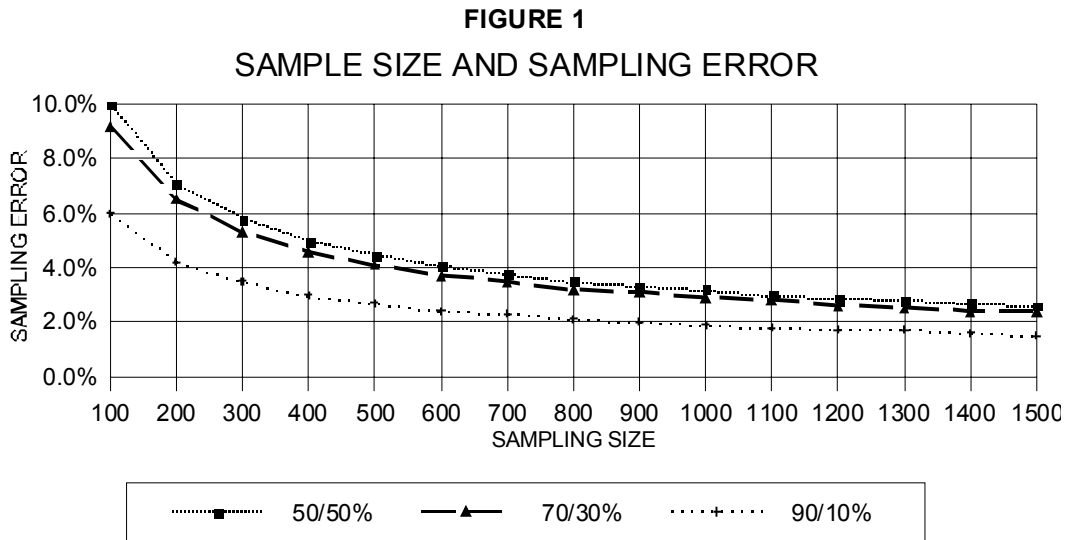
The percentages obtained in a sample survey are estimates of what the distribution of responses would be if the entire population had been surveyed. "Sampling error" is a statistical term which describes the probable difference between interviewing everyone in a given population and a sample drawn from that population. For example, the sampling error associated with a sample of 400 persons is ± 5 percent at a 95 percent confidence interval. Thus, if 47 percent of those in a sample of 400 are found to agree with a particular statement, the percentage of agreement within the population from which the sample was drawn would be between 42 and 52 percent ($47 \pm 5\%$) 95 times out of 100.

Sampling error increases as the sample size is reduced. For, example, if statements are made based on a sub-group of 200 persons, the sampling error is ± 7 percent. This fact must be kept in mind when comparing the responses of different groups within a sample (e.g. men compared with women). Figure 1 in this appendix shows the relationship between sample (or group) size and sampling error.

Readers should note that sampling error does not take into account other possible sources of error inherent in any study of public opinion.

VI. DATA COLLECTION

The study involved CATI interviews with a random probability sample of 400 Middlesex County/Franklin Township residents 18 years of age and older. The CATI interviews were conducted by telephone between June 13 and 24, 2001 by experienced professional interviewers who were trained and monitored by the Eagleton research staff.



VII. DATA PROCESSING AND ANALYSIS

The CATI system generates a computer readable data file which reduces the amount of error inherent in the coding and entry of data recorded on paper questionnaires. An SPSS (Statistical Package for the Social Sciences) computer file was developed to process the CATI information. The SPSS system enabled the Eagleton research staff to integrate the survey data so that it could be presented in aggregate form.

VIII. PROFILE OF STUDY PARTICIPANTS
(n=400)

<u>Gender</u>	
--Male	48%
--Female	52
<u>Age</u>	
--18 to 24	9
--25 to 44	46
--45 to 64	29
--65 and older	16
<u>Race/Ethnicity (combined)</u>	
--White, non-Hispanic	61
--Black/African-American	12
--Asian	16
--Hispanic/Latino	10
--Other	1
<u>Education</u>	
--High school or less	34
--Some college	23
--College graduate	28
--Post graduate	15
<u>Income</u>	
--Less than \$25,000	16
--\$25,000-\$50,000	19
--\$50,000-\$100,000	31
--Greater than \$100,000	21
--No answer	13
<u>Region</u>	
--Piscataway/Dunellen/Middlesex/South Plainfield	12
--Edison/Metuchen/Highland Park	16
--Woodbridge/Carteret	15
--Perth Amboy	6
--New Brunswick	6
--North Brunswick/South Brunswick/Franklin	15
--East Brunswick/Milltown	7
--Sayreville/South Amboy/South River	8
--Old Bridge	7
--Monroe/Jamesburg/Helmetta/Spotswood	6
--Plainsboro/Cranbury	3

DEMOGRAPHIC COMPARISON OF SURVEY AND 2000 CENSUS

	<u>Survey (%)</u>	<u>Census (%)</u>
Male adults	48.2	48.2
Female adults	51.8	51.8
Age 18 to 24	8.5	12.2
Age 25 to 34	21.0	20.6
Age 35 to 44	24.9	22.6
Age 45 to 54	20.4	17.5
Age 55 to 64	9.2	10.9
Age 65 to 74	9.3	8.5
Age 75 and older	6.8	7.6
Home ownership	68.0	67.1
Income under \$25,000	18.1	16.1
Income \$25,000-49,999	22.3	23.0
Income \$50,000-99,999	35.9	37.8
Income \$100,000 or more	23.7	23.1
Average household size <i>(not a percentage)</i>	2.84	2.73
Children in household	35.2	36.8
Senior (age 65+) in household	24.1	24.5
White non-Hispanic	62.0	63.9
White Hispanic	4.1	5.8
Black	12.0	9.5
Asian	16.1	13.5
Other	4.8	5.2
Mixed race	1.0	2.1
Total Hispanic	9.9	11.8

**UNITED WAY OF CENTRAL JERSEY
COMPASS NEEDS ASSESSMENT**

RESIDENT FOCUS GROUPS

**UNITED WAY OF CENTRAL JERSEY
COMPASS NEEDS ASSESSMENT
RESIDENT FOCUS GROUPS**

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**UNITED WAY OF CENTRAL JERSEY COMPASS NEEDS ASSESSMENT
RESIDENT FOCUS GROUPS**

Conducted by:

R

Eagleton Institute of Politics | Center for Public Interest Polling
January-May 2002

SUMMARY

A total of seven group discussions were held. Each of these groups was composed of residents from a particular segment of the community identified as experiencing pronounced needs. As such, this report summarizes the results of each group separately.

However, for virtually all groups, the need for *Housing, Jobs/Training, and Transportation* top their priorities of need. It should be noted that the need expressed by Franklin Township residents are in somewhat different priority order than for Middlesex County residents. Also the needs expressed by seniors are very different from those in the other six groups.

For housing, the focus is on simply finding an affordable roof over their heads, rather than with the quality of the housing. Assistance with paying for utilities is also important.

For jobs/training, there are a number of different but related concerns. Most participants (particularly women) feel they lack the skills to get higher paying jobs. These skills include, word processing, computer applications, and record-keeping. Many also see racial barriers in certain service sector jobs. Particularly in New Brunswick, black residents seem to feel that low-level service jobs as well as construction jobs (for the new projects in the area) are going to immigrants. This ethnic bias is also seen in jobs available through employment agencies. At the same time, many jobs now require bilingual ability.

Among unemployed residents, job-seekers report submitting applications for numerous positions, but there is usually little follow-up on their part.

Regarding transportation, residents complain that bus routes and schedules do not go where they need to go. Many point out that jobs in southern Middlesex County industrial parks are inaccessible to them. Most cannot afford their own car. Lack of public transportation options are even more pronounced in Franklin Township.

Overall, most residents do not know what services are available, or indeed where to go to ask about potential services. Communications are haphazard and information about available services may be inconsistent. Many residents rely upon their local welfare and unemployment offices as the primary source of information about all types of services.

Note: Focus group participants are not selected by probability sampling techniques. As such, the results are not projectable to the full population. However, the results of focus groups can be used to clarify findings from quantitative surveys.

Group 1 -- Women in Transitional Housing

Held at Amandla Crossing on January 28, 2002.

Nineteen women in the Amandla program participated in this group. The vast majority are of Hispanic ethnicity and hail from Perth Amboy. All are single mothers.

Since Amandla Crossing provides many of the services these women need, the discussion focused on those services that were lacking before entering transitional housing, and their anticipated needs upon leaving the program.

The services most needed by these women include (listed in rank order):

- (1) Housing
- (2) Jobs/Training
- (3) Transportation
- (4) Health Care

Housing

The housing problems they face include not being able to meet rents before the program. Only 3 had their own apartment before coming to Amandla, 5 lived in a shelter and the remainder lived with family or friends.

All will receive section 8 assistance once they graduate from the program. However, the women still worry about finding available affordable housing and facing discrimination as single mothers.

While some women experienced maintenance problems with apartments they have rented, these were not mentioned as major issues in comparison to affording rent and utilities.

Jobs/Training

Problem in finding jobs that pay enough to maintain a home.

Some note language barriers as an impediment. In many customer service jobs, bilingual skills are necessary.

Skills enhancement is a major component to the job search. These include computer skills at the top of the list. Other skills these women would like to acquire include: communications, graphic arts, counseling certificates, and accounting/billing.

Most consider \$10/hour a livable wage.

Transportation

Participants report an over-reliance on taxis because bus routes and schedules don't meet their needs (for getting to/finding jobs, getting to doctor's appointments, etc.). Some report that cab companies which accept Medicaid reimbursement are often unreliable. Some women have owned cars, but can't afford the upkeep.

Health Care

Most children are covered under NJ KidCare or FamilyCare, though only about a third of the mothers have health care coverage for themselves. Most women let their own health problems go untreated due to lack of insurance.

Child/Youth

Most women have or will rely on family members for child care while they work. When asked about their ideal preferences for child care, half prefer family while half would prefer a professional child care center.

These mothers are particularly concerned about the lack of after-school programs (or perceived lack). They feel that there are few opportunities for youth. Athletic programs and tutoring programs topped the list. Where programs do exist (e.g. athletic leagues), they are unaffordable for most of these mothers.

Also, about half of these women say they would have liked to have some type of parental education to assist them in dealing calmly and knowledgeably with the pressures of being a parent.

Obtaining Services

All these women have caseworkers, but only half say they are very helpful. About 1-in-3 feel that the caseworker does not inform them of all the programs available.

Other services they would like include legal aid, particularly with obtaining child support payments, and counseling/therapy, especially family counseling.

More than half have put off applying for services or approaching a particular agency due to prior negative experiences.

Group 2 – Low-income/High-need New Brunswick residents

Held at Elijah's Promise on February 7, 2002.

Fourteen people participated in this group, including 6 men and 8 women. Most participants are black (10), four are white, and none are Hispanic. Two live in shelters and three live on the street. The remainder live with family or have their own home.

The services most needed by this group include (listed in rank order):

- (1) Housing
- (2) Jobs/Training
- (3) Transportation

Housing

This group felt strongly that they need a stable address before they can get a job.

“Affordable” housing is not available for this group.

Many don't know where to go for rental assistance. Four have applied and complain about the long waiting period.

Jobs/Training

Only four people in this group currently have a job. Most feel that the jobs they could fill are taken by Mexican immigrants. These are mostly low-level service jobs or laborer positions. Most participants (mainly the women in the group) would like to obtain computer skills to improve their chances in the job market.

Transportation

Transportation is a major daily problem for half this group.

Cost is especially important. Bus schedules (start and end times) as well as frequency make it hard to get to appointments/job centers. Also, buses do not serve the areas in Dayton/Cranbury where there are industrial parks with potential jobs.

Health Care

Substance abuse treatment is an important issue for many people in this group. However, they feel that the requirements for getting into a program are too stringent, or (ironically) that the programs have too many demands once you are in them. They also point to the difficulty with complying with the need to complete certain types of treatment programs in order to obtain public assistance.

About one-third of this group report being turned down for health care services.

Trust with providers is a major issue with this group.

Child/Youth

Child care is an issue for work, but most of these participants have older latchkey children. As such, they point to the need for more after-school programs, particularly tutoring. These programs (as well as summer school) need to be offered free of charge.

The group also worries about the way the police treat youth (related to the trust issue), profiling them based on clothing and appearance.

Obtaining Services

The group is generally uninformed about where to go for services. About six use a counseling services, but many more would like to have these services.

The main barrier seems to be trust. Many are scared to apply for services because of what they would have to reveal about themselves (particularly with regard to possible illicit activity).

Group 3 – Formerly Incarcerated Residents

Held at NJ Association on Correction Resource Center on February 19, 2002.

Fifteen people participated in this group, including 8 men and 7 women. All utilize the resource center because they have recently been incarcerated. Most participants are black (8), 3 are white, and 4 are Hispanic. Two have their own home, about half are living with family or friends, and the remainder are in a halfway house.

The services most needed by this group include (listed in rank order):

- (1) Jobs/Training
- (2) Housing
- (3) Transportation

Jobs/Training

Only 5 people currently have a job. The number one barrier is their criminal record, particularly those with felony convictions. This applies to jobs at any level.

This group was also worried that Hispanic immigrants were lowering wages and closing off certain opportunities. They also mentioned lack of transportation to job locations elsewhere in the county as an issue.

Like other groups, these residents would like training in computers and record-keeping. Unlike other groups, a number of them have other job skills (nurse's aide, carpentry, etc.) but find themselves barred from pursuing or returning to those careers because of past convictions.

Housing

Unlike the Elijah's Promise group, these participants all have some sort of fall-back base for housing. About one-third are in a halfway house and the remainder can rely on family. Thus housing is secondary to getting a good job, even though none currently have a permanent place to live.

Like other groups, the lack of affordable housing is the most important housing concern, followed by assistance with utilities. The quality of housing was not mentioned by this group.

Transportation

Many own cars but have had them impounded and must pay hundreds or thousands of dollars to retrieve them. Thus they must rely on public transportation, which makes it difficult to look for jobs outside of the immediate area.

Health Care

Three have Medicaid, while four more are in the process of getting Medicaid.

Many face problems getting public aid because of their past convictions and the need to go through certain rehabilitative programs first (particularly for drug-related offenses). Substance abuse treatment is an issue for many in this group, although they did not talk about the issue in depth.

Child/Youth

More than three-fourths of this group has children, of which all are currently being cared for by family members. Two participants are unhappy with the care being provided by their family. Most would like to get professional child care when they move into their own home. This group would also like to see more after-school programs.

Obtaining Services

Counseling services are also a priority need for this group, including single parent support, women's support, and child enrichment. Legal services are also required to obtain social services, resolve custody issues, obtain child support payments, and declare bankruptcy.

While most have caseworkers, many have problems finding information on available services. The unemployment office seems to be a major source of information. Many don't know what to ask for.

They don't have a lot of trust for the staff at unemployment and social services. They do trust churches, friends, and counseling centers/services.

Group 4 – New Brunswick Adult High School Students

Held at New Brunswick Adult Learning Center on March 1, 2002.

Thirteen people participated in this group, all women. (Overall, there are very few men age 21 and older in the adult school programs.) Most participants are black (9, including 5 African immigrants), 2 are white, and one is Hispanic. About one-third are in their twenties, while the rest are older. Most live with their family and pay a share of the rent. Seven women have children.

The services most needed by these women include (listed in rank order):

- (1) Housing
- (2) Jobs/Training
- (3) Transportation

Housing

As most of these women are living with family while attending school, affordable housing is the number one issue. They feel that the only housing assistance programs are for those on welfare or those who can qualify for a section 8 certificate. For those who have been homeless, they feel there are not many options in terms of shelters and that welfare money would be better spent on rental assistance than on motel rooms.

Almost all live in situations where the housing is substandard (e.g. overcrowding, peeling paint, pests, etc.), but these concerns were not mentioned until prompted by the moderator. Like in other groups, the desire for a roof over one's head, regardless of condition, is of primary concern.

Jobs/Training

About one-third of the group works full-time, one-third works part-time, and one-third is unemployed. More than half have been out of work in the past two years.

Those currently working are in the following fields: insurance, cashier, nursing home, hospital housekeeping. Hourly wages range from \$6.50-8.00.

The major obstacle to lucrative employment for this group is the lack of a high school diploma or GED. Many see the GED as a stepping stone to further education. Several would like to go to college, while others would like to go on to technical school for training in computers, record-keeping. Funding for higher education is a major priority with this group.

Currently, many are able to attend school because their children are in school or they have alternative child care arrangements. Some may have to stop attending the program in the summer due to child care issues. Most feel that they will not be able to complete their GED's on schedule because of other pressures.

Transportation

Lack of transportation to potential job sites is the major transportation concern for this group. Bus schedules and routes are pointed to as inadequate.

Health Care

Most don't have medical insurance. None of those currently employed can get insurance through their workplaces. When ill, they generally go to the emergency room. Some use the Chandler clinic or Catholic Charities (St. John's), but most are unaware of these resources.

Child/Youth

Having some type of child care would be assist many of these women in completing their diplomas on time. However, private child care is too expensive.

A number are mothers of teenagers and would like to see more after-school programs. They would like to have a place like a "Y" for their kids (none of the women were familiar with the Hub Teen Center, although one knew of it when it was located on George Street). These programs should include recreation, tutoring, and self-affirming programs for youth.

Obtaining Services

A number of mothers mention counseling (for themselves and their children) as a service they utilize or would like to utilize. Counseling includes support groups, therapy, and education. As soon as you earn any money, you are ineligible for services.

Group 5 – Suburban Seniors

Held at the Eagleton Institute on March 12, 2002.

Eight seniors participated in this group, representing Piscataway, Old Bridge, Spotswood, and Helmetta. The group included 5 women and 3 men. Most participants are white (6), one is black and one is Indian. Half live in senior housing, two live with family and two live on their own.

The services most needed by this group include (listed in rank order):

- (1) Transportation
- (2) Coverage for additional medical expenses
- (3) Social needs/support

Housing

Most are satisfied with current living situation but are concerned with their bills, especially in the future. Specifically, they are worried that as their expenses go up and their income remains steady, it becomes harder and harder to pay for utilities and other expenses.

Jobs/Training

This is not an issue for this group.

Transportation

Public transportation does not go to the places these seniors need to go. For those who can no longer drive, this affects their ability to see the medical provider of their choice, to shop, and to attend recreational opportunities. Using public transportation for shopping is a barrier for those who have trouble carrying packages.

Even available transportation options are restrictive as to the times they are available and the requirements for prior notice to book the service. These services also need to be available during the evening.

Health Care

As far as basic medical care is concerned most do not have major complaints about their basic Medicare coverage. The main problem is transportation to the doctor's office which restricts the type of doctors they can go to.

The areas where needs are unmet due to costs include the following:

Prescriptions - the main prescription programs available to seniors who have income restrictions that are too tight.

Dental care – need goes unmet because most do not have coverage.

Eye Glasses - some seniors need complex prescriptions which they cannot find through discount programs.

Hearing Aids - are considered cosmetic therefore not a necessity.

Child/Youth

This is not an issue for this group.

Obtaining Services

Social support is a major need for seniors. One of the barriers is seniors' aversion to terms like "therapy" or "counseling." At the same time seniors say they would like someone to talk to (preferably from their own age cohort) when they go through transitions in life, such as when they have to sell their home and move or when it is no longer possible for them to drive.

On a more basic level, seniors say they need low cost, stimulating activities. Occasional bus trips to major events are fine, but they may be financially out of reach for many seniors. They would like to see trips to local museums and theaters, visits by local people, and classes on interesting topics (e.g. music/art appreciation), and more wellness programs (not just focused on "aging conditions"). Moreover these programs need to be extended to evenings and weekends to help fill social needs.

Meal programs are one potential opportunity for social interaction. One barrier is some seniors' aversion to socializing. Another barrier raised by this group is the need for culturally appropriate meal programs. Participants report that some immigrant seniors will not access meal programs (and the related activities) because the food options are not culturally familiar or do not meet with dietary restrictions (e.g. vegetarian for Hindus, kosher, etc.).

Also, not all communities have a senior community center or meal site, making it difficult for many seniors to avail themselves of meals and other activities. They feel that seniors in Middlesex County should be able to have access to any site.

Group 6 – Franklin Township Head Start Parents/Care Givers

Held at Somerset Head Start on April 25, 2002.

Eight people participated in this group, including 4 men and 4 women. Five participants are Hispanic and 3 are black. The group included 5 parents, two grandparents, and one custodial relative.

The services most needed by this group include (listed in rank order):

- (1) Transportation
- (2) Affordable housing
- (3) Health care
- (4) Language training

Housing

Housing costs are too high in Somerset. Most have had occasions where they needed emergency assistance with paying utilities and the red tape is difficult to negotiate. These residents feel that Somerset County does not have enough support services.

Jobs/Training

All parents pointed out the need for better computer skills and more literacy programs as a way to advance their job opportunities and increase their incomes. They feel that these programs are not available locally.

Transportation

Transportation is was the clear number one issue for this group. Somerset County does not have the transportation options and there is no bus service in Franklin Township except for the Suburban New York City bus that travels along Route 27. Lack of transportation is a major barrier to getting and keeping a job, getting to child care, and getting to needed services.

Health Care

These parents complain about the wait for scheduling services in publicly subsidized managed care plans. This becomes especially important when children need immunizations in order to start school. Also, health care insurance does not provide for all needs (e.g. medical equipment, such as nebulizers for children with asthma).

Child/Youth

These Head Start parents are satisfied with their current child care situation. However, they identify important gaps, including the lack of care options for infants and toddlers, after-school, before-school, and summer programs.

Parents would like to see low- or no-cost summer day camp programs for their children.

A local teen center with sport activities is a major need identified by this group. These parents complain that local sports activities cost too much for low-income parents and that there needs to be an alternative.

Obtaining Services

The importance of language and culture was focused on by this group more than any other. Spanish speakers wanted better English proficiency, and interestingly, English speakers also want some knowledge of Spanish. This may be due to the composition of service providers in Franklin Township and Somerset County. Compared to Middlesex County, Somerset may have fewer ethnically-oriented programs, so that people of different cultures are more likely to mix and deal with one another.

Overall, they feel that Somerset County is a harder place to obtain services than neighboring Middlesex. These problems are compounded by a lack of transportation to get to the county seat in Somerville, difficulty with getting county identification cards, and the overall lack of services nearby that Franklin residents know about or can access. Most assume that they are not eligible for any services across the border in New Brunswick and do not know about any non-profit or religious organizations there that would be willing to serve them.

Group 7 – MCEOC Head Start Parents

Held at Perth Amboy Head Start on May 6, 2002.

Twelve people participated in the group, including eleven parents and one grandparent. All but two are women. Seven are Hispanic, four are black, and one is white. Eight live in Perth Amboy and four in Carteret. The group included eight single mothers.

The services most needed by this group include (listed in rank order):

- (1) Financial assistance for working families
- (2) Child care
- (3) Programs for children (recreational/educational)

Financial Assistance

All of these parents work and, thus, do not meet income eligibility requirements for many services (e.g. Section 8, Food Stamps, etc.). These parents report needing many services to make ends meet. Prevailing wages make it difficult to meet housing costs. Utility assistance is a major issue.

A few mothers reported having to quit their job because they were working simply to pay for child care. The one or two who left their jobs voluntarily, rather than due to a disability or dismissal were not able to obtain unemployment benefits or other financial assistance.

Child Care/Youth Services

Families with two wage earners try to adjust their schedules to provide child care. The cost for quality child care is high – and quality is extremely important. All currently use Head Start, but need extended hours -- starting at 7:00 am and going until at least 6:00 pm, but preferably until 8:00 pm. Start and end times are inconsistent from site to site. Also the additional charge for early drop-off or late pick-up may be too much for some families. These parents also pointed to the need for alternative sources of child care when head Start is closed (school holidays and summer).

Youth need places to go so they can avoid getting into mischief, but these can't simply be alternative "hang-outs." Supervised programs need to be in place. Recreation programs for all ages are one of the most important service needs voiced by this group.

Transportation

Transportation is a major issue. All but four of these families have their own car, which they need to be able to get to their job. Carteret residents in particular feel that public transportation is inadequate. Parents also feel that there should be more transportation for their children to get to and from school and other programs.

Jobs/Training

After transportation issues, the major barrier to getting a decent job is training. The major barrier to getting training or education (such as through the adult high school) is lack of child care.

Health Care

Many of the parents have co-pay levels for Family Care that are difficult to meet on a tight budget. Also, it is difficult to get referrals to counseling for themselves or their children. Paying for optical care and dental care is difficult.

Obtaining Services

Overall, Carteret parents feel they have fewer programs than if they lived in Perth Amboy. Many parents also feel that the availability of certain programs depends whether your child is a student in a particular school.

Parents feel hampered by the amount of red tape in obtaining services. Some also believe that racism plays a major role in who gets services and that black and Latino families get less than white families. These parents lack a lot of information about potential services. None was aware of Info-Line. As working parents, they are not as familiar with the system as other residents in need.

APPENDIX:

TOPIC GUIDE – RESIDENT FOCUS GROUPS

The subject areas listed in the topic guide suggest the general subject areas that will be addressed in the group discussion. However, focus groups can be very dynamic and depending on the issues the group itself brings up, these subjects may not be covered in this specific order or may not be discussed in the same detail as suggested by the topic guide. The key to a focus group is to develop a dialogue with the participants in the most productive and natural way. The actual questions asked may be modified so they are more relevant to the experiences of each specific group.

A. INTRODUCTIONS (10 minutes)

1. Moderator introduces self/Eagleton. Tells about the kinds of work we do.
2. Explain what focus groups are. Explain why we are doing 5 or 6 of these group sessions.
3. Explain reason for tape recording session [*If being recorded*].
4. Group rules--everyone gets into the act. Free-wheeling discussion. No right or wrong answers--just want your opinions. Feel free to disagree. Be respectful.
5. Explain use of topic guide.
6. Time limit—90 minutes. Incentives (\$25) --pick up when you leave.
7. Confidentiality: all your answers will be kept confidential. Will not identify individuals--just interested in general themes that arise.
8. Brief self-introduction (first names only).

We're going to spend the next 90 minutes talking about the day to day needs experienced by you and your family.

B. SERVICE NEEDS

1. Thinking about the day to day needs of you and your family -- What types of needs do you have? We'll go around the room and I'll list them on the board. **(LIST ON BOARD)**

POSSIBLE ITEMS RELEVANT FOR EACH GROUP:

Clinic/Adult High School/Transitional Housing groups:

- Case management (someone who helps you locate different services)
- Housing (rent, maintenance)
- Food,
- Transportation assistance (to get to and from doctor's appointments, support group meetings, jobs, etc.)
- Emergency financial assistance (when you can't pay the rent or heating bill, or your car breaks down)
- Medical care/insurance coverage
- Dental care
- Counseling (support groups, therapy, etc.)
- Substance abuse treatment or detox
- medications
- adult education
- unemployment, job training
- recreation

Groups with parents:

- child care
- recreational activities for children
- education issues

Seniors:

- recreational activities
- home aide (health and daily activities, paying bills, etc.)
- Case management (someone who helps you locate different services)
- Housing (rent, maintenance)
- Food,
- Transportation assistance (to get to and from doctor's appointments, support group meetings, jobs, etc.)
- Emergency financial assistance (when you can't pay the rent or heating bill, or your car breaks down)
- Medical care/insurance coverage
- Dental care
- Counseling (support groups, therapy, etc.)
- medications

Formerly incarcerated:

- legal services
- unemployment, job training
- barriers to employment caused by legal status
- Case management (someone who helps you locate different services)
- Housing (rent, maintenance)
- Food,
- Transportation assistance (to get to and from doctor's appointments, support group meetings, jobs, etc.)
- Emergency financial assistance (when you can't pay the rent or heating bill, or your car breaks down)
- Medical care/insurance coverage
- Dental care
- Counseling (support groups, therapy, etc.)
- Substance abuse treatment or detox
- medications
- adult education
- recreation

2. Now let's look at the needs that were mentioned the most.

[FOR EACH MENTIONED BY ABOUT HALF OR MORE] :

- Describe the problems you have had meeting that need?
- What kind of help would meet that need?
- Have you tried to get help? DESCRIBE. What keeps you from getting help?

PROBE for following:

- Finances/costs (lack of insurance)
- Changes in financial situation in the past year
- Transportation
- Do not trust service providers
- Don't know where services are located/are too far away
- Don't know if I am eligible
- Don't know how to apply
- Prejudice (sexism, racism, etc.)
- Afraid (Of what?) / Stigma
- Delays
- Had bad experience
- Hours when services are available

- Where would you go to find out about getting help?

Let's move on to some other types of needs that we haven't talked about:

[NOTE: If the following needs are mentioned above, the following probes will be incorporated into the discussion as appropriate]

C. EMPLOYMENT NEEDS [if not already discussed]

1. Have any of you been out of work in the past two years? That is to say you were laid off, fired, or quit, and couldn't find another job for some time. And have you had a partner or spouse who was out of work. *[IF ENOUGH HANDS GO UP, PROCEED]*
2. What is the main reason you or your spouse or partner were out of work?
3. How did you or your spouse or partner look for other jobs?
4. What do you think is the main reason you or your spouse or partner were unable to find another job?

D. HEALTH CARE ACCESS [if not already discussed]

1. How many people here have health insurance? What kind do you have? Is your whole family covered by health insurance?
2. *[IF ENOUGH HANDS GO UP]* Why are you (others in family) not covered?
3. Have you had any problems in the past year or two trying to get medical care? dental care? prescriptions? Describe
4. Have you or anyone in your family needed help with drugs or alcohol? What kind of help did you/they get? What do you/they need still? Where have you gone for help or where would you go for help?

E. HOUSING NEEDS [if not already discussed]

1. Do you own or rent where you live now, or do you live with family?
2. Do you have any problems with paying the mortgage, rent, or utilities – or keeping up with the maintenance of your home? DESCRIBE.
3. Do have any problems in your home, such as peeling paint, heat that doesn't work, mice, bugs, or dirty water? What have you tried to do about those problems? Where would you turn for help with those problems?
4. If you had to move, do you think you would be able to find affordable housing in your area?

F. CHILD AND YOUTH NEEDS [if not already discussed]

1. How many of you have children under the age of 18? under the age of 13? under the age of 5? *[IF ENOUGH HANDS GO UP, PROCEED]*
2. Who is the primary caregiver for these children? How satisfied are you with your current child care arrangements?
3. What are some of your main child care issues? Do child care concerns affect your ability to work if you want? Do you have to work in order to pay for child care?
4. Do you know of anywhere you can go for help with child care issues? Where would you try first?
5. Have any of you felt like you could use some help in parenting, particular for new parents? Such as parenting education.
6. Do you have any other needs or concerns about your children (aside from child care)? These may include behavioral issues, or recreational needs, and so on. DESCRIBE

G. CAREGIVER NEEDS [if not already discussed]

1. Do you take care of a senior or some else who is sick and largely confined to home? *[IF ENOUGH HANDS GO UP, PROCEED]*
2. Do you have any help caring for this person? What kind of help would you like to get? Why don't you have this care? *[Probe for skilled care and respite care]*
3. Where would you go to find out about this type of help?

H. SENIOR NEEDS [if not already discussed]

1. What kind of day-to-day help do you get? What kind do you need?
2. What is the main reason you are not able to get the help you need? Do you know where to go to find out about that kind of help?
3. What kind of activities do you generally participate in? How do you get to these activities?

4. Are there other activities that you would like to participate in but can't? Why not?
[Probe for transport, health/mobility companionship, costs, lack of availability, preference]

I. TRANSPORTATION NEEDS [if not already discussed]

1. How many people here own a car (including cars owned by your family that you can use)? How many people rely on public transportation (buses and trains) to get to work or school or appointments most or all of the time? And how many people here use public transportation to get around Central Jersey at least some of the time – not including trips to Newark, New York City, or Trenton?
2. How much of a problem is transportation for you and your family? Please describe some of the times when transportation has posed a problem getting you or a family member somewhere they needed or wanted to be.
3. Specifically, have transportation problems made it hard for you or other family members to get a job? to get to the doctors or other services you need? to get your kids to activities? to get yourself to recreational activities or shopping?

J. SUMMARY (10 minutes)

1. We've discussed a lot of different things about your service needs. Is there anything we left out?
2. Thinking back on the discussion we have just had, what is the most important improvement you would like to see in the system that provides services to people like you?

APPENDIX

NOTES FROM RESIDENT FOCUS GROUPS

AMANDLA CROSSING Focus Group

1/28/2002

(Focus group conducted in English with Spanish-language assistance/clarification from Amandla staff member)

19 participants

Gender

19 women

Race/ethnicity

15 Hispanic

2 black

2 white

Town (before entering Amandla Crossing)

13 from Perth Amboy.

1 from Sayreville

1 from New Brunswick

1 from Somerset County

1 from Omaha Nebraska

1 from Paterson

1 from (inaudible)

Family

11 participants with one child

6 participants with two children

1 participant with six children

Housing

It is a range of 2-3 months to about a year that these woman have been at Amandla's Crossing

SERVICE NEEDS (before moving into the program)

Top needs are (in rank order):

(1) Housing

(2) Jobs/Training

(3) Transportation

(4) Health care

Group listing (in no particular order):

- Transportation (10 people)
 - doctors appointments (kids)
 - Money (all)- Welfare (all)
 - Childcare (8 people)
 - Affordable Housing (16 people)
 - Jobs (8 people) had a job (8 people) were searching for a job, but couldn't find one
 - Somebody to talk to/Support Groups (9 people)
 - Legal Services (4 people) -Legal services
 - would like access to out of state lawyers
 - lawyers for child support issues
 - Counseling/Therapy (13 people)
 - Womens awareness
 - One to one counseling
 - How kids can cope with moving from place to place
 - Family counseling-most agreed on this one
 - Anger management
 - Child Therapy
 - Education (all)
 - GED's-(everyone needs to get one)
 - need a GED to go to different training schools and programs
 - Food (3 people)
 - Medical/ Healthcare Insurance (7 people)
-

Housing

- rent too high
- availability of housing
- Discrimination- against single mothers (1/2 of the people have this problem).
 - Kids too young
 - Kids too old
- Money is taken away once working, lose money for rent

Areas look for housing?

- Perth Amboy, South Amboy, Sayreville, Raritan Center, Old Bridge

How many people were living in their own apartment before they came here?

- 3 people living in their own apartment
- 5 people living in a shelter
- the rest lived family or friends

What were some of the things you tried to do to get your own apartment?

How many places did you go to until you gave up?

- Need money in order to get apartment, so try to get job before getting an apartment
- need help paying security deposit

Tried to get assistance from:

- Welfare office-(everyone)
 - Middlesex County Welfare assistance is hard to get
 - About ½ the people have been put in a hotel by the welfare office
 - the hotels are really nasty
 - Section 8-most have tried, no one has gotten.
 - takes several years to get
 - Must go through system (programs) to get section 8
-

Jobs/Employment

- Jobs are not available
- they are hard to get too they don't pay enough
- have to go to an employment agency that you get money taken out of your check so that you still are not making enough
- lack skills
- Hours
- Language barriers/Must be BI-lingual (receptionist, sales, customer service)
- Have individuals from companies come and have a job fair

Skills needed

- Typing
- Computers-the number one skill
- Communication skills
- Graphic arts
- certification for counseling
- billing/medical billing

What do you consider a good wage?

- \$8 an hour, 4 people consider
 - \$10 an hour, most everyone considers this good
-

Transportation

- too long a wait/not on time
- sometimes the bus doesn't stop
- getting to the bus station is a problem
- not reliable
- for about half the group, public transportation does not go where they need to go
- going to doctors they use the Medicaid taxi but it is not reliable, the taxi company takes longer because they are not paid cash, they are paid by Medicaid.
- Some people take a taxi to certain places-hard/expensive

- Saturday and Sundays the bus runs on a different schedule and not as often, you need someone with a car
- need a driver's license

Previous car ownership

- about 6 had cars
 - 2 still have a car
 - have old cars, they don't last that long/repairs too much
 - insurance is hard/expensive
 - can't afford to register
-

Child Care/Youth Needs

(Doesn't come up at the top of the list)

- hard to find someone to trust
- you have to have a job before you even get childcare

Current child care arrangements while working

- use family(a large amount)
- one bought children to work
- one has left her children alone, **How old were they?** It started pretty young, I have worked all my life, but nor they are teenagers.
- When on welfare and trying to get off it and get a job, once you get a job the first thing they do is snatch up your check, they should give everybody a chance to get off their feet before snatching their money. You give them a pay stub and the next thing they do is deduct it from your check.

About half have a family member that they could use for child care. The rest have no one.

Ideal childcare situation

- Family member (7 people)
- Day Care Center (7 people)

Other child needs?

- Sports programs
- About 9 people feel there aren't enough opportunities for kids
- Activities for kids too expensive
- Counseling for kids (about 6 people)
- Need eyeglasses for kids
- Tutoring for problems in school (about 8 people)
- Child support payments-(7-8 people said there is a child support order yet they don't receive their payments due to the office claiming they can't find the father even though the mother can give the exact location of the father

Parenting education/support

- about ½ of the participants would have liked to receive some parenting education for themselves
- How to calm down
- Sent to work in day care, learned to control temper
- Calming techniques (about 8 people) would have found this helpful
- Transition for teenagers, issues they go through
- Different stages of life for a child to understand better
- Better communication skills with children
- How to treat kids who have a bad temper
- How to control ADHD
- How to detect problems and deal with them (about ½ think their child may have a problem but does not know how to have the experience to identify it).

If these programs were available and you had access to them how would that work, that would be convenient for you? Where would you like those to be available?

- Catholic Charities
- Welfare Office
- Access-UMDNJ
- School
- Community Centers
- Crisis Centers
- Doctor's offices
- UMDNJ-(Edison and Piscataway)
- Counselor come to your home

Health Care

- 6 participants have coverage for themselves
- almost everyone has coverage for children (most have NJ Family Care)
- most participants let health problems go untreated because of lack of insurance**

Medicaid issues

- Bills, they send you a bill they are supposed to cover, but the doctor's office says that Medicaid won't pay (about 8 people this happened to)
- must choose from list of doctors
- when a doctor refers you to another doctor and the referral doctor doesn't carry your insurance
- lab work, must go to a separate place
- need surgery, they will only pay for local anesthetic, not general

Other issues

- Medicine is expensive, must go through all the channels to get certain prescriptions
- finding the right doctor
- Dentists and doctors not taking your insurance
- Have problem getting monthly welfare cards that are needed to see a doctor

GENERAL BARRIERS TO OBTAINING SERVICES

- Some individuals (at agencies) are condescending
- discriminate by the way they talk to you
- about half the people have had a bad experience were people are condescending to them
- Welfare made a new rule that if you drop out of the Amandla Crossing program or you get kicked out they will take your kids away.
- More than ½ have have not gone for certain types of services or put it off or delayed getting a type of service because they had a bad experience dealing with people

Caseworkers

- All have caseworkers
- 7 people say they are helpful
- 3 people say they are not helpful
- About 5-6 people said their caseworker don't tell them about different programs available

ELIJAH'S PROMISE Focus Group
2/07/2002

-14 participants

Gender

-6 males
-8 females

Race/ethnicity

10 black
4 white
no Hispanic

Town

12 New Brunswick
1 Edison
1 North Brunswick

Family

???

Housing

-2 live in shelters
-2 live with family
-about half have an apartment or home
-the rest are homeless

SERVICE NEEDS

Top needs are (in rank order):

- (1) Housing**
- (2) Jobs/Training**
- (3) Transportation**

Group listing of needs (in no particular order):

- Welfare
- Dr.s –Far Away
- Transportation to Dr.'s
- Health Care- expensive, Medicaid, family healthcare
- Shelter
 - long waiting list
 - no women's shelter in New Brunswick
 - New Brunswick needs a bigger men's shelter

- Drug help not available
 - Job (local projects)
 - Trusting the people and services that are there to help you.
 - New Brunswick is a big drug area. It is drug central for Heroin, New York City comes after N.B. for Heroin
-

Housing

The number one problem

Need stable housing situation in order to get a job.

- 1 person gets rental assistance
 - 4 people have applied for rental assistance
 - 2 people want rental assistance and don't know where to go
 - all focus group participants uses food pantries/soup kitchens
 - Elijah's Promise
 - the church at High projects
-

Jobs/employment

Currently, 10 people are out of work

Main reason out of work?

- Mexicans get all of the jobs
 - temp agencies pick Mexicans for all of the jobs
 - Lack of skills
 - need computer skills
 - need some sort of public bath house
-

Transportation

- No transportation available to where the jobs are
 - South Brunswick-Route 130 near industrial parks
 - Raritan Center
 - Dayton/Cranbury

The buses that do run have time issues

- they don't run often enough
- they stop running too early in the evening
- There is always transfer fees on buses

Day to day, Transportation is a major problem for half the people.

Cost on transportation is a big issue, it takes about \$2.00 a day to get to Elijah's Promise.

-need more transportation money from the system.

Welfare requires you to go to training for programs everyday but the public transportation runs too infrequently to make it to the programs on time.

Child Care/Youth Needs

-1/2 the participants have children

-Childcare is an issue in order to go to work

-in the future the children going to college will be an issue, need programs to supplement grades in order to get into college.

-After school activities for teens is a big issue, there are no programs for them.

-Summer school is an issue because you have to pay for it, it isn't affordable

-there is a teen center but it doesn't have any learning or academic activities

-a majority of teens, are selling drugs because they have nothing else to do.

-they need an after school program, that includes:

-teachers to help with homework

-skills programs

-life skills

-tutoring

-learning a trade

What do you do for childcare?

-teenagers-latch key

-waiting lists for daycare, pre-school programs.

Police have gotten really nasty to the kids. They profile kids black & white by a certain style of clothing they wear. Police have gotten nasty in general

-There are some good cops, but there are ones who let their jobs get the best of them so they take it out on the community.

Health Care

-Need De-tox center in New Brunswick

-RWJ has a lot of services, but doesn't broadcast them out, although you need insurance in order to get their services

-If you don't have any insurance, healthcare is really hard to get.

-about 5 people have been turned down for healthcare service when tried to get it.

-about 5 people have caseworkers

-the caseworkers are overloaded with work, they have too many people

Trust is a big issue among all of the participants. They have trouble trusting the system and the people that work for the system.

To get welfare they always have to go through some other program before they can actually get welfare.

-Being addicted to drugs is a big problem for people to get welfare. They must go to detox to get welfare, but the follow up rehabilitation after detox is flawed. There is never space for rehabilitation after detox so they end up using immediately after detox.

-another stipulation in order to get in the detox program you have to be high to enter it.

GENERAL BARRIERS TO OBTAINING SERVICES

-6 people use counseling

- a couple of people would like counseling services but don't know where to go

-participants say it is very difficult to relate to counselors because they can't relate with each other. They would like counselors that have had the same experiences as them, specifically drug abuse.

-About 2 don't have a high school diploma

-About 4 have used a legal aid

-About 5 need and would like to use a legal aid

Trust issues with the system

-scared about being honest because you might get locked up

-going to agencies that are supposed to help you is a threat

-take a risk of going to jail by reaching out for help.

NJ ASSOCIATION ON CORRECTION RESOURCE CENTER Focus Group

2/19/02

15 participants

(due to the small room size and the need for some participants to get to jobs, the full session was held with 10 participants, while a mini-session was held with 5 participants in another office)

Gender

- 8 males
- 7 females

Race/ethnicity

- 8 black
- 3 white
- 4 Hispanic

Town

- 10 New Brunswick
- 2 Edison
- 3 North Brunswick

Family

About half have young children.

Housing

- 2 in own apartment
- 7 with family
- 6 in halfway house

SERVICE NEEDS

Top needs are (in rank order):

- (1) Jobs/Training**
- (2) Housing**
- (3) Transportation**

Group listing of needs (in no particular order):

- Education/College Money
- Housing/Low Income/Mortgage
- Single Parent Support/Groups
- Youth Organization
- Medical
- Child Care
- Transport

- Driving Courses/License repair
 - Women's Support
 - Homeless
 - Jobs-Training
 - Child Enrichment/Arts & Spanish/Pre-school
 - Schools Better
 - Utility payment Assistance
 - Drug Rehab
 - Child Support
 - Disability/Support- Income
 - Need legal services:
 - custody papers
 - child support
 - bankruptcy
 - welfare
-

Housing

How many people live with there family?

7 ppl

How many people don't have a permanent place to live?

-all

What are the problems you face getting housing?

-Everybody here needs some sort of housing assistance.

Homeless

-more housing for families, nit just for single people, is needed

-case workers make it harder to get into shelter

-They are to busy helping people in other areas than helping their own residents

-need shelters near jobs

Jobs/Employment

How many people here currently have a job?

2 people

All need assistance to get a job

What are the problems you have getting jobs?

- Discrimination
- transportation to jobs

When you go to apply for jobs, how does your history come up?

- on application

Has everybody here been convicted of a felony?

Yes, a couple of no's

What kind of jobs do you apply for?

- Nursing home
- haven't yet in halfway house
- agencies-
- Fast food-anything
- (talking about the hiring of Spanish people over others) can't quite make out conversation. They will take a lower wage than others

How many have applied for a job in the past two months?

- almost everybody
- A couple have been working
- there has been no response

They have put application in surrounding areas.

Education and training needed:

- Computer training skills
- Business courses
- Things/Opportunities are closed because of felony conviction
- help to start a business/carpentry & construction

Transportation needs

- Getting license back is a big issue
 - large surcharge in order to get license back which can be really expensive

Public Transportation

- Buses stop only at certain times, not accommodating enough
 - need more free Rutgers buses to run
 - need a bus pass from social services
 - there is currently one free bus, there is a need for another one
-

Child Care/Youth Needs

All have children, with the exception of two participants having grown children

- all participants with children say that their children are currently living with relatives
- 2 participants say they need this current situation changed

Would like for their kids in the future:

- child support
- Medicaid
- daycare
- counseling
- positive programs

Child/Daycare:

- personable people
- 3 people would look for a private home
- most would like daycare

For older kids participants would like after school programs.

3 participants take care of an elderly person

- the elderly being taken care of all receive financial aid
-

Health Care

About 3 people have Medicaid

- 1 man in process of getting Medicaid
- 3 ladies in halfway house in process of getting Medicaid

Problems with Medical care:

- insurance premiums too expensive
 - have trouble getting it, person was convicted of drugs and has to go through a certain program in order to get any state help
 - 1 person has a family member who has a drug problem
-

Case Manager

- Most have counselors
- most have trouble finding out about information of services available to them
- one lady even called social services on something

Besides the NB resource center, where else is there to go?

- Unemployment office
- Work First
- Halfway House counselor
- Case worker at the shelter

Some people are more helpful than others.

You need to do your research and know more than the workers or you will get the run around.

At the resource center, about 3 people said they have asked about housing/trans./employment
-they learned about the tire for hire program through the resource center

Clothing/Food

-soup kitchen

-truck comes with clothes every couple of weeks

-there needs to be an open door policy to get clothes, currently you have to meet certain criteria to qualify.

-Food stamps given out for the month really only cover about two weeks and only include food.

-Some feel that every time you get out of jail the situation gets worse and it is harder to better things.

-About 6 have been in jail more than once

GENERAL BARRIERS TO OBTAINING SERVICES

-most of participants need counseling

Finding general programs to help with everyday services is hard:

-people need access to the Internet to find things

-can use the library to be helpful

Social Services

-many people return to selling drugs because not enough money and support comes through the state to provide for themselves or their families. And once you have drug charges you can't get anything from the state.

Do participants trust their case worker/counselors etc...

They **don't** trust:

-Social Services

-Unemployment

They trust:

-Church, Friends

-NB Counseling Center-certain counselors there

-Counselor at halfway house

NEW BRUNSWICK ADULT HIGH SCHOOL Focus Group
3/01/02

13 participants

Gender

13 females

Race/ethnicity

9 black (including 5 African immigrants)

2 white

1 Hispanic

Town

12 New Brunswick

1 Edison

Family

7 participants have children

Housing

Most live with family, and most pay a share of the rent.

SERVICE NEEDS

Top needs are (in rank order):

(1) Housing

(2) Jobs/Training

(3) Health Care

Group listing of needs (in no particular order):

-Transportation

-Medical care

-Money

-Jobs

-Housing

-Clothing

-Day care

-Food

-After-school mentoring teen centers

-“Y”

-Drug treatment

- College fund
 - Crisis Intervention-Local
 - Pregnant teens-housing & skills
 - Rental and Utility assistance
 - Recent incarceration aid
 - Crime watch
 - Counselors (AIDS, Juvenile)
 - Training
-

Housing

- Just about all need a home of their own
- some live with their family
- if you are not in section 8 or on Welfare you can't get any housing assistance

- Shelters have waiting lists
- Not many options if you are homeless

- Need a rent match program

- 2 people live in very crowded situations
- all suffer housing problems such as chipped paint, rodents, bugs etc... but don't really do anything because they don't have much choice when it comes to housing

- Welfare pays for people to stay in hotels, but should use that money for rental assistance instead of paying for hotels.

Where do you go for help/info to get housing?

- welfare
 - resource center
 - housing coalition
 - HUD apartments
-

Jobs/Employment

- 4 people have full time jobs
- 4-5 people have part time jobs

More than ½ have been out of work in the past 2 years

- the biggest problem getting jobs is not having a GED and having a criminal record
- the type of jobs participants currently have:
 - insurance, cashier, nursing home, hospital-nursing assistant-housekeeping, dept. store

- The pay they get in these jobs is a range of \$6.50- \$8.00 an hour
- They all agree education is tied to jobs and they should have training programs

What will a GED get you?

- better job
- helping your kids with their work
- a chance to go to college and become or study:
 - a dietician
 - nursing
 - accounting
 - computers
- several would like to go on to college after their GED
- currently there is a need for more teachers for tutoring help
- need college fund money
- also with a criminal record it is hard to get financial aid

What do you think would help people who are afraid to go into a program like this decide to enter one?

- have more one on one attention in the beginning
- people who have been or are in the program can tell others

- Need college funds so they can go onto college once they get their GED

What are some problems with attending school right now?

- with family, have a troubled son right now a lot of work right and working on paying off past bills
- the only reason why one participant can attend school is because her kids are currently in school
- Not all think they will get their GED as scheduled because of family or moving issues or transitions. One person has court issues which may delay her from getting her GED on a scheduled time

Transportation

- It would be nice to have vans that transport you too and from jobs
 - Some jobs and opportunities participants have turned down because they have no way of getting to them or it is extremely difficult.
 - one uses a taxi and it adds up for the year
 - buses need to go to more places
 - there are no bus transfers to some of the places where there are jobs
 - for just this area the buses are fine, but outside of this area not as good.
-

Child Care/Youth Needs

-it is about \$100-150 a week for younger kids

-having help with childcare will help participants with going to school, it will make it easier for them.

Teens

-need more after school programs

-They have no where to go so they hang out on the streets

-no after school programs at all for younger kids

-would like a “Y” for kids

-would like a place kids can go for tutoring

-they need some type of recreation

Health/ Medical

-Most don't have any medical insurance

-Most jobs they can get don't offer insurance

-when ill, they go to :

-emergency room

-Catholic Charities

-Chandler

-St. Peters has a program as well

-Some insurance doesn't cover all medication and participants have to pay out of pocket

-glasses and eye care is a big problem as well

-If sick some have to pay out of their pocket when they can't really afford to.

-Many have not heard about these different resources to get medical care

GENERAL BARRIERS TO OBTAINING SERVICES

-they want to know everything and anything about you such as financial status and schooling, if you have a record,

-even now, fast food joints won't hire you if you have a record

**SUBURBAN SENIORS Focus Group (held at Eagleton Institute, New Brunswick)
3/12/2002**

8 participants

Gender

5 women

3 men

Race/ethnicity

6 white

1 Asian Indian

1 black

Town

Piscataway (3)

Old Bridge (3)

Spotswood (1)

Helmetta (1)

Housing

4 live in senior housing

2 live with family members

2 live on their own

SERVICE NEEDS

Top needs are (in rank order):

(1) Transportation

(2) Gap coverage for additional medical expenses

(3) Social/support

Group listing (in no particular order):

Helmetta has no senior center/services

Better bus service to go shopping

Crafts (although most say this is already available)

Transportation for doctor visits

Literature on what is available

Better quality food/nutrition

On-site nurse

Mental health support/programs

Exercise

Moving assistance/support for transition
Prescription assistance income levels raised

Transportation

-5 of the 8 seniors in this group drive (most only during the day-time). However, they note that transportation is the biggest problem for seniors. The transportation does not go to the places they need.

-There is not enough transportation and it affects going to appointments at the doctors. Some seniors have no choice but to go to the doctors that the senior buses go to because they can't get transportation to the doctors of their choice.

-Most places are not easy to reach for them unless they have a car

-Most try to get around using the senior bus, the church bus, or relying on a friend, but still find that difficult.

-Many would like the opportunity to have transportation for shopping. Shopping in general can be very difficult with no transportation and even more difficult for those who have trouble carrying things.

-Three people know about Areawide transport, but find the amount of time for notice (two weeks, according to the group) to be prohibitive. Only one man has used it.

-Even for those who drive, they are restricted to day-time activities only.

Health Care

As far as basic medical care most use Medicare with a 20% co-payment. Most do not have major complaints about their basic insurance coverage. The main problem is transportation to the doctor's office. This restricts the type of doctors they can go to. For example, one woman noted that she could get free medical care under her husband's union pension, but she would need to travel to New York City which is not covered by senior services.

Most senior centers currently have screenings such as Blood pressure monthly and for diabetes. Most agree if some senior centers don't have these screening that it would be very helpful if they would. However, in this group, most use their primary care doctors for these screenings.

The areas where needs are unmet include the following.

Prescriptions can be very expensive. According to these seniors, currently the main prescription program available to seniors who have an income of under \$18,000. Those not qualified (about 3 of the participants), have to pay out of pocket for expensive prescriptions. They feel the prescription program needs to be expanded.

Dental care-many need it but have not gotten it because they don't have dental insurance and can't really afford to pay out of pocket.

Eye Glasses- Are not usually covered under insurance, but some are able to find a discounts on glasses through AARP or they try to shop around for a good deal if they have that luxury, but they are still expensive. Some seniors, though, say need complex prescriptions which they cannot get cheaply.

Hearing Aids- Are very expensive and not covered by insurance. They are considered cosmetic therefore not a necessity. One woman is going without a hearing aid because she can't afford one.

Overall, these are the types of needs that have gone unmet because the seniors can't afford them.

Social Support

Social support is a major need of these seniors. Although many shied away from actually using the terms support, they noted many times in their senior lives when having someone to talk with would be helpful. These issues include coping with moving, different illnesses, or adjusting to not be able to drive. It is unclear how receptive seniors would be to something that is labeled as "counseling" or "support" but a desire was expressed for this type of service.

Moving-Transition

Just about everyone has moved out of the house they resided in for the majority of their adult lives. It is a big adjustment for everyone especially having to get rid of a lifetime of belongings and downsize to a one or two bedroom apartment. It is hard physically and mentally.

-Some would like some sort of support to talk with some one who has gone through the same experience. A few would like specific programs and support groups for coping.

Recreation

-Just about everyone is satisfied with the current activities that are offered at their senior centers. These activities include, Pool, Sewing and crochet (at home and at centers – usually to donate to a charity), Exercise classes, Painting, Bocce Ball, gardening/holiday grounds decorating at senior residence, Bingo, Bridge/Chess, Teaching English as a second language, etc. Some activities that some seniors do on their own include: shop in local town, go to the movies, read paper, sew quilts, and take friends out.

--The major recreation issue for seniors is the lack of activities on weeknights and weekends. Lack of transportation is the main problem.

-Currently some senior centers have a trip every month, but they can be expensive, just about everyone agreed that they would prefer cheaper trips to local museums and local theatres than having more expensive trips. They would prefer a costly trip on an occasional basis.

-For those living in senior residences, the week-ends can be an especially depressing time. On these days, there are no set activities and many seniors simply hope that a family member or friend will come visit them. One participant said that she and some friends started a Saturday night card party that anyone could join in. As she stated, "They see us there enjoying ourselves and they can be on their own or they can join in and have fun. It's their choice."

-They would also enjoy having more local people/groups (e.g. school bands) to come into the senior center to entertain them.

-They all agreed there is a need for more stimulating programs (e.g. music/art appreciation) and more wellness programs.

Housing

Most are satisfied with current living situation but are concerned with their bills, especially in the future. Social security is their main source of income along with their savings, they are concerned that they are living longer and might not have enough money to last them until they pass on. Specifically, they are worried that as their expenses go up and their income remains steady, it becomes harder and harder to pay for utilities and other expenses.

Food

-Almost all the seniors in this group use their local nutrition centers at least once a week. Most were satisfied with the food available to them, although many agreed that vegetables were overcooked, bringing into question the nutritional value. One woman said she would use it more often if the food was better prepared.

-Most seniors take their main meal in the middle of the day (whether it is at the nutritional center or at home).

-A couple of women still do the majority of their own cooking as their main source of food. Most do not cook for themselves. For example, some seniors have a bowl of cereal as their evening meal.

-One issue of note affects the growing Indian senior population. Many of these seniors are vegetarians and do not avail themselves of the nutrition sites, since their dietary restrictions are usually not accommodated.

GENERAL BARRIERS TO OBTAINING SERVICES

- Transportation is the major barrier for the seniors in this group.
- Group participants also report that there are a large number of seniors who will not come out to participate in activities regardless of transportation or other support offered.
- Seniors who live in municipalities without a senior center may be at a disadvantage if they can't find (and get to) a neighboring town's center that is willing to accommodate them. Most would like the option of being able to go to any senior center in Middlesex County.
- Some seniors who do not access the centers may not get the full range of information about services that more active seniors do.
- A few seniors report that some of the centers in the county are physically less inviting than others. They note that some centers put all their activities in one huge room, whereas those with smaller rooms exclusively devoted to different activities (e.g. reading, art, etc.) are more attractive to seniors.

FRANKLIN HEAD START PARENTS Focus Group

4/26/02

8 participants

Gender

4 women

4 men

Race/ethnicity

5 Hispanic

3 black

Town

All Franklin Township

Family

All are caregivers for children in the Somerset Head Start program.

Two are grandparents and one is a custodial relative for her niece.

SERVICE NEEDS

Top needs are (in rank order):

(1) Transportation

(2) Affordable housing options

(3) Health care

(4) Language training

Group listing (in no particular order):

Public Transportation (lack of)

More affordable housing

Recreation for youth (none nearby), such as a rec center and free sports leagues

More contact with police

Parenting skills training (stress management)

English classes

Spanish classes (needed for many jobs now)

Job training (e.g. computers, languages, etc.)

Medical care – particularly long waits to schedule appointments

Sick child care

Hard to find out what's available (especially for non-English speakers)

Immigration issues

System is complicated/you get the run-around

Crisis services

Pre-natal care (many do not use it)

Transportation

This was the clear number one issue for this group. Somerset County does not have the transportation options and there is no bus service in Franklin Township whatsoever (except for the Suburban New York City bus that travels along Route 27). Lack of transportation options is a major barrier to getting and keeping a job, getting to child care, and getting to needed services. Many spend more than they can afford on taxis (\$6-10 for a one-way trip). As one participant put it, “If you can just get there [e.g. job, services], you can work other things out. All the other needs will fall into place.”

- Need a bus down Hamilton Street/Franklin Boulevard.
- to get to work
- to get to major supermarkets (many pay higher prices and get less choice because they have to rely on local convenience markets)

Housing

Housing costs are too high in Somerset. Most have had occasion where they needed emergency assistance with paying utilities. These residents feel that Somerset County does not have enough support services. One man recently bought a home, but he was unable to get an additional loan to pay for necessary repairs.

- Apartments in Somerset are expensive and many are not well-maintained
- Difficult to get loans to buy a home
- No assistance for maintenance/rehabilitation
- Utility assistance difficult to get – there is a lot of red tape

Health Care

All these parents/care givers have health care coverage for themselves and their children. Some have Medicaid or Medicare, some have family care, and some have employer provided benefits. All parents complain about the wait for scheduling services in publicly subsidized managed care plans. This becomes especially important when children need immunizations in order to start school.

- Health care insurance does not provide for all needs (e.g. medical equipment, such as nebulizers for children with asthma
- Public clinics have lengthy waits in the office (One care giver reported leaving the dentist’s office without his granddaughter being seen after waiting three hours beyond her scheduled appointment.)

Language/Cultural Issues

This group focused on the need for more bilingual staff at social services. Also, many Hispanic immigrants need help to fill out the school paperwork for their children. This is important as children transitions from child care to school.

Answering machines at social service offices should have messages in both English and Spanish, especially the health department and schools, so that parents know what is needed for their children. Many adults want ESL training but don't know where to get it in Somerset County.

Generally, this group feels that public providers in Somerset County have not fully recognized the needs of a growing immigrant population (including African and Asian as well as neighboring Middlesex has.

Child Care/Youth Needs

These Head Start parents are satisfied with their current child care situation. However, they identify important gaps. These include the lack of care options for infants and toddlers, after-school, and summer programs.

One caregiver complained that local schools start their day at 9:10 am, and there is a sizable fee for dropping children off early at school when many working poor parents have little choice.

Parents would like to see low- or no-cost summer day camp programs for their children.

A local teen center with sport activities is a major need identified by this group. These parents complain that local sports activities cost too much for low-income parents and that there needs to be an alternative.

Another suggestion was to bring back a "Week of the People" summer program with activities for the whole family.

Jobs/Training

All parents pointed out the need for better computer skills and more literacy programs as a way to advance their job opportunities and increase their incomes. They feel that these programs are not available locally.

GENERAL BARRIERS TO OBTAINING SERVICES

- Somerset County has fewer services than Middlesex County, are not as
- It is more difficult for immigrants to get a county social service ID in Somerset
- Many services are not local, must go to Somerville for some
- Fewer transportation options than Middlesex
- Individuals at some agencies are disrespectful
- Not fully informed of all the services that exist
- Overall there is a need for more crisis services – places where people can go when they need food, experience spousal/child abuse, have to deal with teen violence, etc.

MCEOC HEAD START PARENTS Focus Group

5/06/02

12 participants

Gender

10 women

2 men

Race/ethnicity

7 Hispanic

4 black

1 white

Town

8 Perth Amboy

4 Carteret

Family

All but one are the parent (the other is a grandmother) of a child in the Head Start program. The group included eight single mothers.

SERVICE NEEDS

Top needs are (in rank order):

- (1) Financial assistance for working families**
- (2) Child care**
- (3) Programs for children (recreational/educational)**

Group listing (in no particular order)

Need more programs located in Carteret (e.g. Head Start, etc.)

There is a lottery for pre-school – should be more availability

Should have programs located at more than one site

Money

Flexible child care schedules – alternatives for when Head Start is closed,

Extended hours, and different hours for those on shift work

Food

After-school programs (recreation, help with homework)

More buses for the children

Summer activities

Some programs are only available if you are in a certain school/housing/etc.

Financial Assistance

All of these parents work and, thus, do not meet income eligibility requirements for many services. These parents report needing many services to make ends meet. Utility assistance is a major issue. They have to prioritize budgeting with housing and food at the top, followed by transportation to get to work, health care, and then utilities.

Most parents describe a catch-22 situation. They have to work in order to pay family expenses, but that makes their income marginally too high to qualify for services. Mothers who can't find affordable child care, for instance, must quit their jobs.

Many have applied for food stamps, but have been denied. One woman who took out loans for school was told that her loans counted as income and that she didn't qualify. There is a concern that assistance programs may over-compensate some families, while refusing others. The group feels there should be a more equitable distribution of the benefits of these programs.

Housing

These parents discussed the high cost of living in Middlesex County and how prevailing wages are not enough to meet housing costs. Some of these parents have applied for Section 8 certificates but been denied. A couple felt that people who are politically connected are more likely to move up the list.

A few feel that Section 8 drives up market rents in some areas, since landlords can get higher rental income. Some have applied for home mortgages, but cannot get them because of low incomes and/or bad credit ratings.

Transportation

Transportation is a major issue. All but four of these families have their own car, which they need to be able to get to their job. Carteret residents in particular feel that public transportation is inadequate and that even the taxi services stop running after a certain time.

In another area of transportation, these parents feel that there should be more transportation for their children to get to and from school and other programs. According to this group, there is no school busing service in either town.

Jobs/Training

After transportation issues, the major barrier to getting a job is training. The major barrier to getting training or education (such as through the adult high school) is lack of child care.

Health Care

Most of these parents have NJ Family Care coverage, one has NJ Kid Care, and three have Medicaid. Many of the parents have co-pay levels for Family Care that are difficult to meet on a tight budget. Also, HMOs limit choice of doctors.

According to these parents, it is difficult to get referrals to counseling for themselves or their children. Speech therapy services in particular have long waiting lists.

Under the new HMO Medicaid system, some parents report that it has become more difficult to get medical supplies covered (especially voiced by the mother of a child with disabilities). In all paying for optical care and dental care is difficult.

Child Care/Youth Services

Families with two wage earners try to adjust their schedules to provide child care. However, those who have tried this say that it puts a strain on their relationship and that stress can be taken out on the children.

The cost for quality child care is high – and quality is extremely important. However, a number of parents in this group see diminishing returns by cost. Their impression is that at a certain point the most expensive child care centers are providing an inferior service.

According to the Perth Amboy parents, there is a lottery to get into the school district's pre-school program and that this program needs to be provided to all.

All currently use Head Start, but need extended hours -- starting at 7:00 am and going until at least 6:00 pm, but preferably until 8:00 pm. Start and end times are inconsistent from site to site. Also the additional charge for early drop-off or late pick-up may be too much for some families. These parents don't see why one or two teachers can't be paid extra to work more hours, since not all parents need this service. Also parents would like to see a late night child care alternative for those who work later shifts.

These parents also pointed to the need for alternative sources of child care when head Start is closed (school holidays and summer).

They also feel that there should be more after-school programs (supervised and directed). Youth need places to go so they can avoid getting into mischief, but these can't simply be alternative "hang-outs." Programs need to be in place. Recreation, including free sports programs, at all ages are one of the most important services voiced by this group.

These parents report that many after-school programs are restricted to students in the particular school where the program is provided. They claim that some schools have more to offer than others and that programs at any school should be available to all children. This was voiced especially by the Carteret residents. Carteret parents also reported disparities in the recreational programs offered by the different public housing developments in their town.

GENERAL BARRIERS TO OBTAINING SERVICES

- Carteret parents feel they have fewer programs than in Perth Amboy.
- A number of parents feel that racism plays a major role in who gets services and that black and Latino families get less than white families.
- They are hampered by the amount of red tape to obtaining services.
- A few had to leave jobs in order to take care of children. The one or two who left voluntarily, rather than due to a disability or dismissal were not able to obtain unemployment benefits or other financial assistance.
- The scheduling of different programs for children may make it difficult for many to participate.
- Restrictions on sites and the lack of programs such as Head Start in Carteret is an important barrier for parents from that town.
- These parents lack a lot of information about potential services. None was aware of Info-Line. As working parents, they are not as familiar with system as others who may utilize welfare offices or unemployment offices for information about services.

**UNITED WAY OF CENTRAL JERSEY
COMPASS NEEDS ASSESSMENT**

KEY INFORMANT DISCUSSIONS

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**UNITED WAY OF CENTRAL JERSEY COMPASS NEEDS ASSESSMENT
KEY INFORMANT DISCUSSIONS**

Conducted by:

R

Eagleton Institute of Politics | Center for Public Interest Polling

April 2002

SUMMARY

Group discussions were held with key informants from April 16 to 19, 2002 as part of the United Way of Central Jersey COMPASS Needs Assessment. These groups included providers from seven different service sectors: child care services, youth services, services for people with disabilities, senior services, adult (i.e. low-income) services, services for women, and health care services. A total of 44 key informants invited by UWCJ participated in this process. Please note that the findings for the discussions with the adult services and women's issues providers have been combined due to low attendance at those two groups.

All these group discussions were facilitated according to the following format. First, participants were asked to list unmet service needs for the residents they serve (including needs not under their own particular service domain). Then, under the guidance of the facilitator, participants were prompted to discuss these needs, along with the barriers faced by residents in meeting those needs.

Finally, participants were asked to fill out a rating sheet assessing the seriousness to their clients of 32 different service needs or issues and 19 potential barriers to meeting those needs. These ratings were scored on a scale from 1 to 5 and average scores for each group are presented in the table following this discussion. Average scores of 4 or higher indicate the most serious needs or barriers.

The following discussion summarizes the most serious needs and barriers identified by these groups on their ratings sheets. It generally focuses on areas of consensus among the groups. For a more detailed discussion of the results from each group, please refer to the individual group summaries which follow the tables.

Please note that the following report reflects the opinions of the key informants who participated in these discussions. Their individual and collective experiences may differ from others or may include gaps in knowledge about service availability.

Public transportation arises as both the top-rated service need and the top-rated barrier to accessing services (see tables). Providers agree that public transportation is inadequate to meet the needs of all segments of the community. This includes affordability, availability, and accessibility – from the single mother who must get her child to day care and then get to work, to the person with a disability who needs an accessible van to attend a program outside of the county. Many working poor must rely on alternative transportation (taxis or private vans) which consumes a large proportion of their income.

If senior service providers are removed from the mix, **employment skills training** and the **lack of jobs with benefits** are as highly rated unmet needs as is transportation. Low wages are a related issue (especially among the unskilled), forcing families to prioritize their budgeting as follows: **housing first, then transportation, child care, food, and finally health care.**

These needs are inter-related. Since many families can barely meet the first priority, the other needs are neglected or compromised. If a person cannot afford transportation, they may not be able to work. Or if child care is not available or affordable, a parent may be forced into not working. And for many families, they cannot meet the first need, since **adequate and affordable housing** is hard to find in Middlesex County (for families in most income brackets).

Paying for all these services (housing, transportation, child care, food, and health care) are the major needs expressed in all these groups. In some cases, paying for some of these needs would not be as much of an issue if other needs were met by public services. For example, if public transportation routes and schedules were adequate, parents may have more job and child care options.

The most serious barriers, apart from costs and transportation, are: lack of information or awareness of services, eligibility restrictions for programs, language translation and cultural differences, health or mobility problems, and lack of child care.

Providers in all sectors called for more **case management** to help people negotiate the system better.

Child care is a major issue for parents that affects their ability to maintain a job, schedule medical visits, and access other services. The lack of affordable quality child care affects most families. This is even more important for those with infants and toddlers and children with special needs where the capacity, regardless of cost, is extremely low. The hours of operation and lack of year-round availability for child care may pose restrictions on a parent's ability to work.

Finally, many providers realize that **cultural competence** is an important element in making services accessible. They recognize that this extends beyond simple language translation services and point out there is a need for more outreach to immigrant communities. However, there are some pockets where the impact of cultural barriers on accessing services may not be fully recognized by some types of service providers.

On a scale of 1 (not at all serious) to 5 (very serious), please indicate the seriousness of each of the following issues or needs for people in Middlesex County/Franklin Township.

	Child Care	Youth Services	Disability Services	Senior Services	Adult Services	Health Services	Overall mean
Having public transportation routes and schedules that meets peoples' needs	4.3	4.6	4.4	4.1	5.0	4.7	4.5
Lack of jobs with benefits	4.3	4.1	4.2	2.6	5.0	4.7	4.2
Being able to pay rent/mortgage	3.9	3.8	4.0	4.4	4.8	4.5	4.2
Finding affordable child care	4.6	4.3	4.0	2.4	4.5	4.8	4.1
Paying for basic health care	4.1	4.1	3.4	4.2	3.5	5.0	4.1
Paying for medicines, eyeglasses, dental care	3.9	4.0	3.6	4.4	3.0	4.8	4.0
Not having enough money for emergencies	4.0	3.7	3.8	3.9	4.3	4.3	4.0
Employment skills/need for training	4.5	4.0	5.0	2.1	4.5	4.0	4.0
Low paying jobs	4.6	3.5	3.8	2.4	5.0	4.3	3.9
Paying for emergency sick care	4.4	3.4	3.4	3.7	3.5	4.7	3.9
Paying for food	4.1	3.7	3.2	4.0	4.5	3.8	3.9
Lack of jobs	4.1	3.9	4.2	2.2	4.0	4.2	3.8
Run-down/substandard housing	3.6	3.3	3.2	3.5	4.5	4.5	3.8
Paying for public transportation	3.7	3.6	4.0	3.2	3.8	4.2	3.8
Mental/behavioral health care	3.8	3.9	3.4	3.3	3.5	4.0	3.7
Availability of respite care for someone with serious illness	3.8	2.9	4.4	3.8	3.5	3.7	3.7
Literacy skills	4.2	4.3	2.8	2.4	4.0	4.3	3.7
English proficiency	4.1	3.9	2.6	2.5	4.0	4.5	3.6
Overcrowding in housing	3.7	3.4	2.5	2.9	4.3	4.8	3.6
Being able to pay utility bills	3.7	3.2	2.8	3.6	4.3	4.0	3.6
Poor parenting skills	3.9	4.5	3.0	2.5	3.5	4.3	3.6
Need for legal aid to get benefits	3.6	3.1	3.8	3.7	3.3	4.2	3.6
Alcohol and drug abuse	3.6	4.1	2.8	2.4	3.8	4.2	3.5
Teen pregnancy	3.8	3.9	2.2	2.3	3.5	4.5	3.4
Paying for private car	3.7	3.3	3.4	3.2	3.0	3.7	3.4
Availability of elder care	3.6	2.5	3.6	3.5	3.0	3.7	3.3
Recreation opportunities for youth	4.2	4.4	3.2	1.9	3.0	3.3	3.3
Recreation opportunities for adults	3.3	3.3	3.6	3.4	2.5	3.5	3.3
Need for legal aid in court action	3.4	3.1	3.0	3.4	3.0	3.5	3.2
Youth mentoring	3.6	4.1	2.2	2.1	2.8	4.0	3.1
Violent crime	3.2	3.7	2.2	2.2	2.8	4.2	3.1
Non-violent crime	3.4	3.0	2.2	2.5	2.3	3.5	2.8

The following is a list of barriers that may prevent people from using existing services. Please indicate how serious you think each one is on a scale from 1 to 5.

	Child Care	Youth Services	Disability Services	Senior Services	Adult Services	Health Services	Overall mean
Lack of transportation	4.5	4.7	4.6	4.4	4.8	4.5	4.6
People don't know what's available or where to go	4.5	4.7	4.6	4.2	4.3	4.0	4.4
Language barriers	4.3	4.6	3.4	2.9	4.5	4.5	4.0
Eligibility restrictions or limits	3.8	3.9	3.8	3.8	4.0	4.5	4.0
Health or mobility problems	3.7	4.0	4.0	4.5	3.5	4.2	4.0
Cost of services	4.0	3.9	3.8	4.3	2.8	4.8	3.9
Lack of child care	3.9	4.0	4.2	2.2	4.3	4.5	3.9
Inconvenient locations for services	4.2	3.9	4.0	3.5	3.3	3.5	3.7
Reluctance to go outside family/friends for help	3.3	4.3	3.2	3.2	3.5	4.0	3.6
Perception that costs are excessive	4.1	3.0	3.0	3.3	2.5	3.8	3.3
Inconvenient hours/days	3.7	3.7	3.0	2.7	3.0	3.7	3.3
Perceptions that the benefit is not worth the effort	3.3	3.0	2.8	2.9	2.5	4.0	3.1
Racial/ethnic discrimination	3.3	4.1	2.0	2.7	2.5	3.8	3.1
Caseworkers are uninformed	3.3	3.1	3.8	2.5	2.3	3.2	3.0
People dislike/distrust service providers	3.0	3.1	2.4	2.8	3.0	3.8	3.0
Concern about confidentiality	2.7	3.0	2.4	2.6	2.5	4.3	2.9
Gender/sexuality discrimination	3.4	3.7	2.2	2.2	2.3	3.7	2.9
Prior bad experiences	3.2	2.9	2.0	2.2	3.0	3.7	2.8
Caseworkers are unhelpful	2.7	3.1	2.8	2.4	1.5	2.8	2.6

INDIVIDUAL GROUP SUMMARIES

CHILD CARE SERVICES

April 16, 2002

11 participants

The service needs they listed include:

Unified/Understandable Systems

-- i.e. who provides what, Unified Child Care, Abbott districts, etc.

Child Care

-- Extended Hours (12-14 hour) + summer

-- Affordable (Reimbursement) Child Care

-- Quality

-- Sick Child Care

-- Special Needs Children

-- Staffing (Attract-Qualified) Training

-- Developmentally Appropriate Curriculum

-- School age After Care

-- Birth-3 Care (Higher Cost)

-- Focus on Urban-Regional Availability

Medical Services (Comprehensive)

Transportation (jobs)

Waiting list/availability

Vision/Dental (Comprehensive)

Bilingual/Bicultural (program literacy)

Housing (no long term lease)

Food/Meals

Jobs (Living wage) Protection

Parent involvement

Stress Management/Crisis Intervention

Women in Workforce (Demands)

Legal aid

Substance Abuse treatment

Central Source/Point of service

Update funding formulas (current based on 1980 Census)

Fatherhood initiatives

Difficulty negotiating the child care system is a major barrier identified by these key informants. Some providers feel that it is not clear who provides services for which types of children. There is also a great unmet need for care in certain segments of the child population, including birth to age 3, special needs children, and after-care (to accommodate parents' work schedules) and summer-time care for school age children. Having an alternative place where parents can bring their

children when sick is another important issue (especially for parents with tenuous employment who have to choose between caring for a sick child and losing their jobs).

At the same time, the group pointed out that knowledge and information about all available services is a major barrier for the families they serve. The group felt that Case Managers should be available to more parents, not just those in specific programs.

Cost of services is a major barrier, not only for child care but for medical care as well. For those parents who are working, many employers do not provide health benefits for dependents. In many cases, earnings may be too high to qualify for Family Care (or have a high co-pay) so many opt to simply pay for health care as they need it. Similarly, many choose not to fill or refill prescriptions due to cost.

Waiting periods for accessing medical care also pose a barrier. For example, Medicaid families may need to wait many weeks to schedule appointments with their primary care provider, which could delay their children receiving necessary immunizations before the school year starts. There is also a wait to get HMO approvals for certain types of care.

Other barriers faced by families are the lack of available services in certain areas. In the child care field, this may translate to long waiting lists due to lack of staffing (i.e. to non-profits having difficulty recruiting and retaining qualified staff). This barrier also includes certain types of health care practitioners who will not accept public insurance plans such as Medicaid – especially for specialty, dental, and vision care. This group also voiced some concerns about discrimination against women of child-bearing age (e.g. jobs, etc. where benefits may be perceived to cost more).

Language and cultural barriers are also important issues. Programs need to be culturally sensitive to different nationalities. Language translation needs to be readily available and accurate (including different languages and dialects). Also, undocumented residents are afraid to apply for services due to their residency status.

The other major barrier mentioned by this group is transportation. For most parents without their own cars, public transportation is not readily available. For the child care programs who provide their own transportation, insurance costs and changing child restraint regulations increase both the cost and risk.

Logistical problems are numerous for single mothers with two or more children who have no temporary child care options. Particularly, getting all their children on a bus in order to take one child to get medical care is very difficult. For working parents, finding public transportation that will take them to child care and then be able to connect to their job is practically impossible. Many rely on taxis or unregulated private vans, which consume a large portion of the family income.

Relative Needs and Barriers

The most serious **issues/needs** as seen by this group include (averaging a 4.0 or higher):

- Finding affordable child care
- Low paying jobs
- Employment skills/need for training
- Paying for emergency sick care
- Having public transportation routes and schedules that meet peoples' needs
- Lack of jobs with benefits
- Paying for basic health care
- Lack of jobs
- Not having enough money for emergencies
- Paying for food
- Recreational opportunities for youth
- Literacy skills
- English proficiency

The most serious **barriers** include (averaging a 4.0 or higher):

- People don't know what's available or where to go
- Lack of transportation
- Language barriers
- Inconvenient location for services
- Perceptions that costs are excessive
- Cost of services

YOUTH SERVICES

April 16, 2002

7 participants

The service needs they listed include:

Information on discipline and proper parenting skills
Adolescent
Coping Skills (when family situations won't change)
Adult survivors of child abuse support groups
More sexual abuse treatment programs/counselors/groups
Someone who will listen to youth
Mentors/Adult volunteers (some paid?)
Single parent counseling
Place for "Bonding"/Respect, Honesty, etc. ** Values **
Place where kids feel they belong (not the mall)
Preventive services for those not "in the system" now/yet (e.g. Counseling, jobs for youth)
Summer employment programs (link to legal)
"Age-ing out"- must leave school to work
Teen pregnancy (summer!)
Crime (summer!)
Lack of respect in male/female relationships (sexual harassment)
Services for men (parenting skills for custodial + non-custodial fathers)
Transportation (to activities/to jobs)
Multicultural Gaps (expanding w/in Hispanic)
Lack of Comfortable place to belong → Leads to gangs
Parent/Guardian permission (hard to find/get in urban areas)
Children w/adult responsibilities (work, child care, etc.)
Respite Services ("Family Breaks" via drop-in centers/ "safe places")
Employment
Programs for families
Career planning/vocational training
Child Care (Birth-3)
Time for parents to spend w/teens (especially if they have younger children – respite)
Housing (older teens-some are on own)
Health care (lack of insurance) (esp. vision dental)(immunizations in the fall)
Preventive health behavior education
Not aware of services/cultural
Substance abuse (don't realize risk both youth + parents)
-Long wait period for treatment (esp. kids in detention) related to family health

Availability and affordability of transportation is a major issue with this group. Liability related to transportation is an issue for volunteer organizations, such as scout troops. Many recreational opportunities or sites are inaccessible by public transportation. This group would like to see municipal bus service for seniors extended to youth, or barring that, having a partnership with non-profits with their own vans used for only part of the week (such as churches).

The transportation issue also affects jobs. Many teens work at malls. Buses stop running shortly after the malls close, but before the teens' shifts end.

More recreational opportunities are needed. Specifically, youth need supervised structured activities and not just simply a place to "hang out." A major incentive for youth is a sense of belonging to a group (those who have no alternatives turn to gangs). Overcoming low self-esteem should be a major goal of these programs.

Youth programs should also assist with mentoring and values enhancement. Many families must emphasize "survival," so imparting values fall by the wayside. Some providers report that "Slam Poetry" nights are extremely popular. The problem with scheduling these events regularly is a lack of permanent space. Each community should have a "safe" place for teens. Some pointed out that Senior Centers are generally not used in the evenings and that they could be opened up to teens.

A major barrier to expanding/starting youth programs is recruiting adults to mentor or volunteer (particularly from different cultures). Also, adult mentors need to be younger adults rather than "parental" figures.

There are particular disparities due to culture and language. Youth generally need adults from their own cultures to encourage participation in programs. In addition, youth and families from various cultures are looking for different benefits in youth activities (be it educational, vocational, recreational, etc.).

Having a cultural "match" between youth and counselor is a major barrier to obtaining therapy for youth and their families. Providers need to recruit clinicians from within the various communities.

Another barrier for at-risk youth is posed by being "outside" the system (e.g. juvenile justice, DYFS, etc.). This particularly applies to lower awareness and exposure to information about the different services available.

Finally, as many negative family situations may not change, youth need to be equipped with coping mechanisms. This is especially true when there is domestic violence or sexual abuse in the household (either witnessed by the child or experienced by the child). Providers and counselors need to be better trained to recognize the signs of abuse as well as substance use among teens.

Relative Needs and Barriers

The most serious **issues/needs** as seen by this group include (averaging a 4.0 or higher):

- Having public transportation routes and schedules that meet peoples' needs
- Poor parenting skills
- Recreational opportunities for youth
- Literacy skills
- Finding affordable child care
- Lack of jobs with benefits
- Youth mentoring
- Alcohol and drug abuse
- Paying for basic health care
- Paying for medicines, eyeglasses, dental care
- Employment skills/need for training

The most serious **barriers** include (averaging a 4.0 or higher):

- People don't know what's available or where to go
- Lack of transportation
- Language barriers
- Reluctance to go outside family/friends for help
- Racial/ethnic discrimination
- Lack of child care
- Health/mobility problems

DISABILITY SERVICES

April 17, 2002

5 participants

The service needs they listed include:

- Housing (Residential Placement)
- Transportation
- Isolation
- Link btw. Schools + Services for adults
 - (Transition, information carries over don't have to start over)
- Case management (very few have it) + inconsistent
- Lack of info how to access (adults)
- Developmentally disabled
- Physical or (later in life) vulnerable
- Adult-onset need for real vocational rehab
- Home based services
- Better access to medical resources
- Better education of medical professionals on disability awareness
 - (esp. pediatricians re developmental)
- S.S.D.I. – 2 year wait for Medicare (family care can't pick up) need GAP coverage
- Family support system (to be able to stay in home)
- Recreational Activities
- Proximity to daily resources
- Medical specialists in HMOs don't have expertise (re move to HMOs-most stay in-network)
- Directory of specialists accept Medicare
- Dental/Vision pros not accepting Medicare/aid also accessibility, sensitivity-choices limited
- Planning for future/\$\$ care after caregiver
- Vocational Training for less severely disabled (system geared to more severe cases)
- Personal Care (waiting list)
- Lack of staffing (esp. home health aid)

Lack of information about available services is a major barrier for this group, especially with a fragmented system. Case management and advocacy is a major need, but must be done outside of the service providers' domain to avoid conflict of interest. It was mentioned that some non-profits are now offering fee-for-service case management.

Like anyone else, many people with disabilities want to try to handle their own problems before turning to an agency. Also, they do not want to face the stigmatization that often

accompanies placing themselves in a public programs. Cost is a major issue for those services which are not covered by existing programs.

Housing was mentioned as being unaffordable overall. Specific to this group are lower incomes if one becomes disabled as an adult and the long wait for Section 8 certificates (if one can find a landlord who will accept Section 8). Moreover, there is community fear to housing groups of people with mental illnesses or developmental disabilities. Some housing developments that used to accept these types of residents have now become “ambulatory seniors only” residences.

People with disabilities also face barriers with available housing options. Licensed Residential Health Care Facilities are not required to be accessible. In fact, many service providers (including medical providers) do not have barrier-free locations. Furthermore, residents of LRFC facilities cannot qualify for many benefits, such as Medicaid waivers for home care, medical supplies, and transportation.

Transportation is another major issue, as may be expected for this group. Aside from the general complaint that public transportation routes and schedules are not adequate is the concern that most of these services are not always fully accessible. Even kneeling buses require riders to take at least one step. There is also a concern that Medicare does not cover transportation. There is a feeling that people with disabilities compete with seniors for local transportation services that are supposed to be available to both groups.

Employment is a major need to enhance the quality of life for people with disabilities. Again, transportation is a major barrier to this. Participants suggested that different disability service organizations who transport workers to the same job sites could pool their resources. Coordinating transportation for client workplaces takes up a significant amount of staff time.

Other barriers to employment are attitudinal – getting potential employers to see the benefit of hiring workers with disabilities. Many jobs can be done via telecommuting and some service agencies provide job coaches, so the employer does not have to expend resources training the new employee.

Another issue is transitioning from school to work. Families have little information about work and housing options. I.E.P.’s (Individualized Education Plans) are supposed to have a plan for this starting at age 16, but there are waiting lists for residential programs and there is not enough professional support in this area.

Day care, particularly medical day care, was seen as lacking (but was not mentioned until prompted).

Interestingly, this group did not mention mental health and substance abuse services until prompted. Some providers feel that people with disabilities do not want to acknowledge additional disabilities or needs (e.g. substance use, depression, etc.). Traditional “talk” therapy does not work as well with individuals with developmental disabilities. Also,

communities resist having behavioral/mental health programs located nearby (especially residential care).

At the same time, some service providers acknowledge that they do not always screen for additional needs, perhaps in part due to having resources overwhelmed dealing with service issues raised by the primary disability. The system is not really equipped to handle multiple issues, according to these providers.

Finally, cultural barriers were not seen as an important factor in disability services by this group. Most say they serve whoever comes to them, but there does seem to be a blind spot to acknowledging the barriers faced by those from different cultural backgrounds who do not seek services.

Relative Needs and Barriers

The most serious **issues/needs** as seen by this group include (averaging a 4.0 or higher):

- Employment skills/need for training
- Having public transportation routes and schedules that meet peoples' needs
- Availability of respite care for someone with a serious illness
- Lack of jobs
- Lack of jobs with benefits
- Finding affordable child care
- Paying for public transportation

The most serious **barriers** include (averaging a 4.0 or higher):

- People don't know what's available or where to go
- Lack of transportation
- Lack of child care
- Inconvenient locations for services
- Health/mobility problems

SENIOR SERVICES

April 17, 2002

11 participants

The service needs they listed include:

Transportation

-wait period; emergency; night + weekend; low availability; door-to-door; shopping; accessibility

Housing

Health insurance

Prescriptions (paying for)

Socialize/Exercise

Meals (Home & away)

Informative Programs

Chore Services

Respite care

Translation

Family connections

Outreach services (go to them)

Mental Health (seniors & caregivers)

Wellness

Home Health Services

Counseling (Individual + Group)

Adult protective services expanded to others at risk

Extended hours (e.g. respite in the evening)

Post-hospital care (food, etc.)

Consumer protection

Money/Bill management

Case manager (for those alone & in senior buildings)

Medication Administration

Stimulating programs (not "old" oriented)

Home environment modifications

Transition assistance

Advocacy

Transportation and making ends meet are the key issues for seniors according to this group of service providers.

Housing availability and costs are an imperative. After paying rent/mortgage/property tax bills, many seniors struggle to pay for utilities and food. There also needs to be more private affordable congregant housing for seniors. Assisted living options are too costly

for most seniors (particularly since many services incur additional charges in these facilities).

Many seniors, particularly in poorer areas, live with their children's families. Many are caregivers for grandchildren and can't get out to local services (especially in the summer, when the children are home all day).

Seniors who live alone need more help with daily chores. It is difficult to get home aides to come frequently in small blocks of times. For example, it may be more helpful for a senior to get help for 2 hours a day over 5 days rather than for 5 hours each on 2 days. However, home health services generally want to schedule larger blocks of time.

While almost all seniors have health care coverage, there are gaps for prescriptions, vision care, and dental care. Prescription assistance plans need to be available to more seniors (i.e. expand eligibility). Most seniors need help with understanding what Medicare covers and what supplemental coverage may be useful for them.

Social programs for seniors need to be stimulating (e.g. music, art, and wellness rather than bingo). Transportation needs to be readily available. Day trips should be low cost and local.

Nutrition is a major need for seniors which is being adequately met through community lunch and meal delivery programs, according to these providers. When the issue of culturally sensitive meal programs was raised by the facilitator, providers report that they have occasional "ethnic" meal days. Most providers do not perceive the style of cuisine as a barrier for seniors using meal programs. Some providers report that having meal programs to meet all preferences and indeed cultural dietary restrictions (e.g. kosher, vegetarian, etc.) is costly.

While meal delivery programs help with nutrition, the need for socialization is not met. This can be met by expanding congregant meal programs into more sites. For example, some seniors are not able to get out or are nervous about going out and will not go to a municipal meal site. However, they will go to their own housing facility's community room. Some suggest that cooperative agreements could be reached between housing facilities and meals-on-wheels programs to organize a central site for lunch programs.

There are some seniors who are mobile but choose to get services at home. They may be overwhelmed by the size of municipal programs, may be non-social, or may have mental health issues. One suggestion for meeting socialization needs is to set up weekly conference "chat" calls with 5 or 6 seniors. They could also meet twice a year for lunch or another activity.

Most seniors are averse to "mental health services" and this is the main barrier to counseling. Programs that work must make numerous visits to "break through" to

seniors. These services can be presented in different ways (through wellness programs such as yoga, etc.). It is also helpful when children and families are involved. The “social day care” need is high, but it is very labor intensive, costly, and requires transportation.

Among immigrant communities, many seniors came here as older adults and need a great deal of help negotiating the system. This population is extremely vulnerable to fraud. Overall, seniors need better education to protect themselves from deception. Unfortunately, the perpetrators of fraud have a lot more money to spend than do public programs trying to assist seniors. On a related issue, seniors may get bills from doctors for the amount of their services not covered by Medicare and unwittingly pay the bill.

Relative Needs and Barriers

The most serious **issues/needs** as seen by this group include (averaging a 4.0 or higher):

- Being able to pay rent/mortgage
- Paying for medicines, eyeglasses, dental care
- Paying for basic health care
- Having public transportation routes and schedules that meet peoples’ needs
- Paying for food

The most serious **barriers** include (averaging a 4.0 or higher):

- Lack of transportation
- Health/mobility problems
- Cost of services
- People don’t know what’s available or where to go

LOW -INCOME ADULT AND WOMEN'S SERVICES
April 18/19, 2002

4 participants (includes 3 participants in the adult service group and 1 participant in the women's services)

The service needs they listed include:

Living wage

Adequate & Affordable Housing ("affordable" varies across county)
Transportation
Financial assistance (rent/mortgage + utilities)
Emergency shelter
Prescription assistance (more minor, but persistent)
Information
Translation
Child care (cost/affordable/competent!)
Immigration counseling
(big need, being addressed but awareness?)
Health care (for those w/no coverage)
Mental health services
Food!!! (big jump this year)

(items specific to battered women)

Women in Shelter-if developmentally disabled -long wait for certification of services

Lack of parenting skills (esp. younger moms, don't know nutrition, laundry, bedtime, discipline)
Multiple problems (alcohol, drugs, health emotional) - (Doctors over prescribe)
Protection/Safety (e.g. restraining order)
Legal aid (pro bono) (no public defender in civil court)
Low cost therapy for domestic violence (esp. for children as well)-not provided
Schools need better understanding of violence + children (maybe ADHD)
Better Welfare system (not enough to live on)-forced to cheat
-not enough training/education. Support; forced not jobs w/no benefits + low pay

The major barrier for this group is low wages, which in turn means housing costs are out of reach for many. Many lack education/training to get higher paying jobs (although there are some programs to recruit women into non-traditional fields). Moreover, some people (particularly immigrants) are willing to accept \$5 an hour, which drives down the labor market. The welfare system encourages recipients to take any job, even though when public benefits expire, the wages may be too low and the job lacks the benefits that would enable the person/family to meet expenses.

Barriers to furthering one's vocational training/education include literacy issues, child care needs, transportation, and the immediate need for income (which would preclude participation in a lengthy all-day training program).

Finding transportation to get to and from jobs is a major issue (as well as getting to and from services). Transportation costs take a high percentage of people's earnings. Many rely on taxis or private vans to get to work, particularly if one needs to drop children off at day care as well. Parts of the county are totally under-served by public transportation, while other parts have inadequate routes and schedules.

Across the board, housing costs are high. Utilities add an additional expense. Section 8 certificates are hard to get. Also, many live on short-term leases and must move as ownership changes or rents increase. Sub-standard housing is a problem, but most tenants are unwilling to report problems for fear of losing housing (either through being evicted by the landlord or having the building closed by the health department).

The demand for emergency food has increased astronomically over the past year (as recorded by Info-Line requests) as other household expenses (housing, child care, transportation) have increased. In household budgeting, food is considered one of the more fungible items and so nutrition may suffer.

There needs to be more emergency shelter space, especially for those who don't qualify for emergency assistance. Also women who move from transitional housing programs to permanent housing need continual help (particularly with mental health issues such as dealing with abuse, parenting skills, etc.). There are other issues unique to many women (including those experiencing domestic violence), including the need for legal aid to get child support, custody, or restraining orders, protection for abusers, and therapy for themselves and especially their children (which is not usually considered in spousal abuse cases).

Most "working poor" parents rely on family or friends for child care. Many couples juggle their shifts to provide child care. Others go without. Parents who can afford professional child care need centers with extended hours (until 8 pm rather than 4 or 6 pm), after-school care, and summer care. Places for sick child care are also needed.

Health coverage is generally provided by Medicaid and Family Care, but there are gaps once a person's income rises. Even with public insurance there are gaps with dental and vision care. Working adults without dependents have no options if their job does not provide health care benefits.

Residential drug and alcohol detox is a major need. Many hospitals provide de facto emergency detox, but there is no detox center in the county. Also detox spaces for people without health coverage are practically impossible to get. Even for those with coverage, by the time a bed has opened up, they may be unreachable or unwilling to participate.

Mental health coverage is also a problem. The need for anger management is great, especially among teens. However, there are long wait periods to get into certain programs and many of them may be inaccessible by public transportation. Many residents don't see mental health care as a resource.

Immigration from all parts of the world poses another challenge for providers and residents alike. Only a few service providers can afford adequate language translation services (e.g. AT&T Language Line). Certain cultures may be less inclined to reach out to service providers for help.

In general, knowing where to go for services is a major barrier. Low-income residents have multiple needs, which compounds the difficulties of negotiating a fragmented system without a personal case manager. An agency who was able to provide a service last week may have used up that pool of money. However, another agency elsewhere may have obtained some funding or a funder's criteria for who is eligible may change. It is difficult for service providers to get the word out because most grants do not include funds to cover administrative costs.

Relative Needs and Barriers

The most serious **issues/needs** as seen by this group include (averaging a 4.0 or higher):

- Low paying jobs
- Lack of jobs with benefits
- Having public transportation routes and schedules that meet peoples' needs
- Employment skills/need for training
- Finding affordable child care
- Being able to pay rent/mortgage
- Paying for food
- Being able to pay utility bills
- Lack of jobs
- Run-down/substandard housing
- Not having enough money for emergencies
- Overcrowding in housing
- English proficiency
- Literacy skills

The most serious **barriers** include (averaging a 4.0 or higher):

- People don't know what's available or where to go
- Lack of transportation
- Eligibility restrictions or limits
- Language barriers
- Lack of child care

HEALTH CARE SERVICES

April 19, 2002

6 participants

The service needs they listed include:

- Dental
- Pre-Natal
- Language barriers
- Detox
- Health Education (especially HIV/AIDS)
- Prescription assistance
- Subsidized health care (for working poor)
- Transportation (especially to get services like dialysis)
- Child care
- Health coverage (lack of)
- Housing
- Eyeglasses/hearing aids (paying for)
- Vision care
- Surgical/medical supplies at home (paying for)
- Food
- Case management (need more)
- Counseling (full range from behavioral on up)
- Job training
- Medication monitoring for mentally ill
- Infant needs (cribs, strollers, diapers, formula, car seats)
- Parenting skills training
- Anger management/violence prevention (especially among young parents)
- Emergency shelter
- Domestic violence support

This group of key informants rated a particularly wide ranging list of needs as very serious.

First among these is lack of comprehensive health care coverage. Entry level jobs may provide emergency health care coverage, but not include benefits for preventive care, especially OB/GYN. Some publicly subsidized providers meet only certain needs and cannot provide the full range of care. Many specialists will not accept public insurance plans, thus reducing options. Public plans and clinics have long waiting periods, making it difficult for residents to access preventive care even if they have coverage.

There are cultural barriers to accessing health care. These include cultural preconceptions about when and where to go for care, citizenship requirements for certain public programs, and lack of language translation. Language translation for medical

services needs to be especially accurate, but there are not enough translators who understand medical terminology and the service is costly.

Among prevailing health care needs for many low and middle-income families, dental care is at the bottom of residents' priorities until there is a crisis. There is a waiting list for dental clinics and many low-income patients are referred to UMDNJ in Newark. These issues lower the likelihood that care will be sought out and continued.

For mental health care, providers feel that programs exist but the system really needs to reach out and overcome barriers related to culture, age, and education. Among service gaps in this area, there is still a need for more supervised residential services that provide additional programs, such as job training.

Teens especially are in need of anger management counseling. The programs are available, but overcoming resistance is a problem. School-based programs are good, but many at-risk youth are outside of the system (i.e. not in "main-stream" schools) and don't have access to these programs even though they may be most in need of them.

There is a feeling that the basic health care system doesn't properly recognize and deal with behavioral problems. Also, there is a feeling that the importance of mental illness treatment is not recognized by funders.

The service gaps and barriers for mental health care apply to drug and alcohol treatment as well – particularly detox services. Beds are scarce, programs are not local, and costs are expensive. Only emergency medical detox is available in-county, and only for certain "life-threatening" substances. There is a major stigma to admitting one has a problem (especially among people living with HIV).

Overall, meeting health care needs is a lower priority than housing and food for most struggling families. Since it so difficult for many residents to meet their daily living expenses, health care can fall by the wayside.

As such, many residents use the emergency room for primary care. Preventive care is cheaper for the system, but not for the resident (in terms of both time and money). Education on the need for preventive care and the services available is needed, yet is difficult to get this "indirect" service funded.

Other needs and barriers discussed in this group include the need for more case management. This would enable health care providers to track those who use the ER for primary care, so that other problems don't necessarily go undetected. Overall, the cost would be less to the system if medical case managers could move people into more preventive care.

Prescription plans are numerous and confusing. Prescriptions overall are not affordable.

Housing is expensive and out of reach for many. Among subsidized housing programs, the Section 8 process takes too long and can be demeaning. Residents who have any income cannot qualify for most programs. There are also many barriers and regulations governing special needs housing programs.

Job training is needed to improve skill levels, particularly for those without a high school diploma.

Public transportation is infrequent and inadequate. Some providers distribute cab vouchers and suggest a possible “health care van” that could service a larger community.

Child care is difficult. If a mother has to come in to a medical office for herself or a child, she generally must bring all her children. Women who want to work part-time can’t get part-time day care (i.e. must pay for full day), so they choose not to work. Teen mothers generally leave school and there is a need for child care programs to allow them to stay in school.

Parenting education and support – There are not a lot of programs on parenting skills. Parents also need respite care.

Use of pre-natal care, particularly among immigrant communities, is low. Many low-income expectant mothers don’t see themselves as requiring care.

Seniors – many are isolated and not getting the care they need, particularly with regard to potential mental health and substance use problems. Other seniors may be the care-giver for grandchildren and so can’t get to services. Immigrant seniors have higher fear levels of the service system.

Relative Needs and Barriers

The most serious **issues/needs** as seen by this group include (averaging a 4.0 or higher):

- Paying for basic health care
- Paying for medicines, eyeglasses, dental care
- Overcrowding in housing
- Finding affordable child care
- Paying for emergency sick care
- Lack of jobs with benefits
- Having public transportation routes and schedules that meet peoples’ needs
- Being able to pay rent/mortgage
- Run-down/substandard housing
- Teen pregnancy
- English proficiency
- Literacy skills

- Poor parenting skills
- Not having enough money for emergencies
- Low paying jobs
- Lack of jobs
- Paying for public transportation
- Need for legal aid to get benefits
- Violent crime
- Youth mentoring
- Mental/behavioral health care
- Alcohol and drug abuse
- Being able to pay utility bills
- Employment skills/need for training

The most serious **barriers** include (averaging a 4.0 or higher):

- Cost of services
- Eligibility restrictions/limits
- Lack of transportation
- Lack of child care
- Language barriers
- Concern about confidentiality
- Health/mobility problems
- Reluctance to go outside family/friends for help
- Perception that the benefit is not worth the effort
- People don't know what's available or where to go

APPENDIX:

TOPIC GUIDE - KEY INFORMANTS

The subject areas listed in the topic guide suggest the general subject areas that will be addressed in the group discussion. However, focus groups can be very dynamic and depending on the issues the group itself brings up, these subjects may not be covered in this specific order or may not be discussed in the same detail as suggested by the topic guide. The key to a focus group is to develop a dialogue with the participants in the most productive and natural way.

A. INTRODUCTIONS (10 minutes)

Moderator introduces self/Eagleton.

Explain why we are doing this session; explain Compass, survey and resident groups

Brief self-introductions (name, position, organization).

We're going to spend the next hour or so talking about the needs, met and unmet, of the people in Middlesex County and Franklin Township (UWCNJ catchment area).

B. SERVICE NEEDS (40 minutes)

1. Thinking about the day to day needs of the residents you serve -- What types of needs do they have? We'll go around the room and I'll list them on the board. **(LIST ON BOARD)**

POSSIBLE RELEVANT ITEMS:

- Case management (someone who helps you locate different services)
- Housing (rent, maintenance)
- Food,
- Transportation assistance (to get to and from doctor's appointments, support group meetings, jobs, etc.)
- Emergency financial assistance (when you can't pay the rent or heating bill, or your car breaks down)
- Medical care/insurance coverage
- Dental care
- Counseling (support groups, therapy, etc.)
- Substance abuse treatment or detox
- medications
- adult education
- unemployment, job training
- recreation for adults
- child care
- recreational activities for children

- education issues
- home aide (health and daily activities, paying bills, etc.)
- legal services
- unemployment, job training

2. Now let's look at some of these needs.

- Describe the problems resident have meeting that need?
- What kind of unmet service needs are there?
- What barriers keep them from getting the help they need?

PROBE for following:

- Finances/costs (lack of insurance)
- Changes in financial situation in the past year
- Transportation
- Do not trust service providers
- Don't know where services are located/are too far away
- Don't know if I am eligible
- Don't know how to apply
- Prejudice (sexism, racism, etc.)
- Afraid (Of what?) / Stigma
- Delays
- Had bad experience
- Hours when services are available

C. SUMMARY EVALUATION (30 minutes)

1. We've discussed a lot of different things about service needs. Is there anything we left out?
2. Now that we've had a chance to discuss these things we need to take a few minutes to get all these down on paper. I'm going to hand out two sheets, where I'd like to get your opinions. The first one asks you to rate the seriousness of need for a variety of issues. The next one asks you to rate the seriousness of barriers to services faced by residents you serve.