

Camden County Needs Assessment 2020

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County Human Services Advisory Council

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Table of Contents

PART 1

Executive Summary

Introduction

County Description

Needs Assessment Methodology

PART 2

Key Findings Across All Needs

Key Findings for Each Basic Need Area

- Housing
- Food
- Health Care
- Community Safety
- Employment and Career Services
- Child Care

PART 3

Key Findings for Specialized Service Need Areas

- Services for Families Caring for a Child of a Relative
- Behavioral/Mental Health Services for Children
- Behavioral/Mental Health Services for Adults
- Substance Use Disorder Services
- Domestic Violence
- Parenting Skills Services
- Legal and Advisory Services

PART 1



Executive Summary

-Human Services Needs Assessment Implementation-

The Walter Rand Institute for Public Affairs (WRI), part of Rutgers University, Camden, was contracted by Camden County, through the Community Planning and Advocacy Council (CPAC), to conduct the County's human services needs assessment. WRI is a research institute that has been operating in southern New Jersey since 2000. The applied research and technical assistance work of WRI focuses on social services, criminal justice, population health and wellness, education, and more.

CPAC transcribed the state supplied human services needs assessment survey into SurveyMonkey in order to disseminate it widely and encourage online completion, which served extremely helpful as the state is still operating under certain health and safety restrictions due to COVID 19. The survey remained open for 3 months and was distributed via email directly to County residents and stakeholders, as well as posted on CPAC's Facebook page. Cleverly, about 1.5 months into the survey open period, CPAC edited the survey to display the needs areas at random, rather than in the same order for everyone. The idea was to minimize survey fatigue and provide the opportunity for all needs to be addressed equally versus the same needs being listed first, as well as last. There was one small hiccup with the online survey in that due to a typo, which combined two needs into one, when identifying top basic needs, respondents were able to select the combined community safety/employment and career services as one top need area. This did not hinder the process of identifying Prioritized Needs; however, since neither community safety nor employment and career services were among the most frequently identified top basic needs. Overall, there were a total of 136 complete survey responses.

Something worth noting about the survey respondents is the potential lack of a representative sample of the County (and Camden City, its most populous municipality). Respondents skewed older, white, employed, and educated. The vast majority (71%) were between 35 and 64 years old; and 46% identified as White (compared with 66% of the County population), while 34% identified as Black (compared to 21% of County), and 8% Hispanic (compared to 16%). Camden City's racial breakdown is 23% white, 48% Black, and 49% Hispanic/Latino, which also do not match the survey respondents'. Three-quarters were employed full time, and over 70% had completed a two- or four-year degree or graduate or other post-secondary education (comparable to 33% of County residents having a bachelor's degree or higher; and only 9% of residents in Camden City). These demographics may not be the slice of County population most in need. Further, nearly 60% did indicate they had not accessed services in the past two years. Interestingly, the survey received the most responses from residents of Camden City (slightly more than 22%), Cherry Hill (10%), Pennsauken (7%), and Winslow Township (7%).

CPAC identified local leaders, service providers, parents, youth, and other stakeholders for additional data collection and reached out to these individuals to conduct focus groups. In total, CPAC reached out to 100 individuals for participation. The focus groups were also conducted by CPAC staff via Microsoft Teams. A challenge of holding virtual focus groups is that participants can often be convinced to take part in a live focus group through incentives like free food and refreshments, which CPAC overcame by offering \$25 gift cards to non-service provider (service providers willingly volunteered their time to participate in the needs assessment) participants. Even with this incentive, local business owners, college aged youth, public service organizations, and community members served by community based providers ended up being especially difficult to recruit. In total; however, there were 8 focus groups, totaling 50 participants, and the groups consisted of the following categories: Community Members at Large (Parents of Children Aged 0-8 Years Old); Youth/Young Adults (High School Youth); Community Based Organizations (Children’s System of Care Providers; Child Care Providers; Homeless Network Providers; Aging and Disabled Providers; CP&P Staff); Community Leaders Currently or Previously Served by CP&P (Parents); and Community Leaders (Faith Based).

Recruitment for key informant interviews was also conducted by CPAC via email, telephone, Facebook, and during other virtual meetings held by staff. Invitations were sent to a variety of human services providers and recipients, and key informant interviewees came from positions that included social service providers, health officials, community activists, county officials, and community leaders (parent leaders). In total, the County reached out to over 30 individuals for key informant interviews. CPAC offered \$50 gift card incentives to non-service provider (again. service providers willingly volunteered their time to participate in the needs assessment) participants. Key informant interviews were also conducted by CPAC staff via the video conferencing tool Microsoft Teams. A total of 12 interviews were conducted for the needs assessment.

CPAC was additionally interested in examining the availability of early childhood services, specifically defined as children’s services for ages 0-8 (included a variety of services, such as mental/behavioral development, school, intellectual and developmental disabilities, and childcare), and so conducted two focus groups and one key informant interview with a community member who is also a resource parent specifically focused on children’s services.

WRI used Excel to analyze the survey responses and NVivo to code and analyze the focus group and key informant interview responses.

-Prioritized Needs-

The Camden County Human Services Advisory Council (HSAC), voted to prioritize the following needs:

- Housing
- Behavioral and Mental Health Services for Children
- Behavioral and Mental Health Services for Adults
- Substance Use Disorder and Prevention Services for Adults and Adolescents

for this needs assessment report. This was based on results from the survey, focus groups, and key informant interviews.

-Prioritized Needs Findings-

Housing: Overall, there is a perception that there is not enough affordable housing, as well as housing services, available for those in need in Camden County. Housing came up more than any other Basic Need, being referenced 66 different times in focus groups and key informant interviews. Seventy-five percent of focus groups/interviews and 47% of survey respondents identified it as a top Basic Need. Further, more than 80% of survey respondents “Disagree” or “Strongly Disagree” that there are enough housing services available in Camden County. In terms of housing accessibility, 81% of respondents “Disagree” or “Strongly Disagree” that anyone is able to access these services. One interviewee stated, “You should not have to call somebody who knows somebody to get service...” Focus group participants consistently identified undocumented individuals as having the greatest difficulties accessing and receiving services, as a function of both language and fear of being reported. LGBTQ+ youth were also identified as being more likely to experience homelessness and housing insecurity. Issues of accessibility and appropriate levels of affordable housing stock is only further strained by the fact that Camden County has the fourth-highest number of people experiencing homelessness in the state. Moreover, 79% of respondents do not think that housing services in the county are known and widely advertised.

There is also a perception that cost is a major barrier to accessing housing. Housing is the third highest monthly expense for families in the County. The annual cost of living, as it is, already outpaces the median family income by over \$20,000 for County residents; and rises to \$60,000 for Camden City residents. Clearly, it is expensive to live in the County.

Wait lists was also identified as a barrier by 47% of survey respondents. One focus group participant echoed this, “you could be on [wait lists] for years, unless you know someone.” It is also interesting to note that only 28% of survey respondents think that housing service facilities are of good quality and 36% think that staff are well-trained, knowledgeable, and provide good customer service. These percentages are particularly low (although the “Don’t Know” response was more than 20% for these questions), and may be of interest for providers in the County to genuinely consider. Further, focus group/interview participants were especially critical of housing staff’s interactions with those in need. They voiced that agencies “[do not] try to help too much, they just push them to other agencies,” and staff are “just getting a paycheck,” as well as “The County can be oblivious to how they treat people,” and “Everyone should be treated with empathy.”

Most focus group/interview participants felt that the County lacks adequate funding, service diversity, and coordination of organizations and programs that focus on housing. Collaboration between the various housing service providers/housing information sources was mentioned as essential. There were

also repeated mentions of how difficult and time-consuming the process of applying for housing services can be; recommendations for dedicated advocates or case managers came up frequently.

Behavioral and Mental Health Services for Children: This Service Need was mentioned as a top need in 8 out of 20 (40%) focus groups and interviews and was the most selected top Service Need by survey respondents. There is a perception that there are not enough services to meet the behavioral and mental health needs of children in the County, as evidenced by 60% of survey respondents indicating this. Children were mentioned several times in the focus groups and interviews as a group that faced additional difficulty receiving these services. Participants also noted that the mental development of children under the age of five tends to be overlooked by caregivers. There is also a sense that minority youth and children of immigrants are at a disadvantage when it comes to accessing these services; especially if they want a minority provider or need services in other languages. Youth members of the LGBTQ+ community were also identified as a marginalized group. Cultural sensitivity and trauma informed care training may be areas the County should explore.

Lack of awareness is the most frequently identified barrier from survey respondents with 62% indicating that Camden County does not do a good job advertising its behavioral and mental health services for children. Further, community members and service providers also report a lack of knowledge about the services that do exist. School districts could be a useful resource for families to get information and children to receive these services; however, the transition to virtual schooling has left many without the resources they would historically be able to access, as evidenced by this quote from a needs assessment participant, “...most people rely on their children’s education provider to refer and guide them in the direction of services.” PerformCare was also mentioned as a resource; and survey respondents generally agree that behavioral and mental health services for children in the County are of good quality and staff are well trained and take race and ethnicity into account when providing services. It is worrisome; however, that focus group and interview participants were much more critical of staff, emphasizing the importance of maintaining a “non-judgmental perspective when interacting with clients.”

Transportation and wait lists are also barriers, and include comments about how some providers have months long wait times to even get a first appointment and public transportation options are very limited for residents outside of Camden City. Increasing the number of service providers and the advertisement of their services, especially if these providers are strategically located throughout the County to reduce the transportation barrier, would help to address these barriers.

Additionally, nearly every focus group/interview participant agreed that the County needs to facilitate collaboration between service providers, organizations, and community groups; to “form partnerships to decrease barriers,” and ensure that “entities...know each other [so as] to not reinvent the wheel.” Predominately, participants think that “everyone knows a piece of what is out there, but nobody coordinates or centralizes anything.”

When considering the long term impact COVID 19 is having on children and their support systems, the need for additional services and creative ways of delivering these services is crucial. Families are struggling economically and are disconnected from important supports like school counselors and extended family, none of which bodes well for the health of children with these kinds of needs.

Behavioral and Mental Health Services for Adults: Camden County residents have the highest rates of mental health distress in the state with 17.4% of its residents reporting having 14 or more “not good” mental health days out of the past 30. Further, Camden County has one of the highest diagnosed depression rates in the state at 19.5%, and is nearly 5 percentage points greater than the state average. Although men in Camden County report experiencing more mental health distress than women (3 percentage point differential), a higher percentage of women are diagnosed with depression than men in the County (28% vs 11%). Black residents report higher rates of mental health distress, at 24%, than Hispanic or white residents, at 21% and 18%, respectively; however, white residents report being diagnosed with depression almost a full 5 percentage points more than Black and Hispanic residents. Considering the ongoing impact of the novel coronavirus on residents’ lives, it is being predicted that mental health services will be in higher demand in the coming months and years.

Behavioral and mental health services for adults was mentioned in 12 out of 20 (60%) of the focus groups and interviews and was the second-most important Service Need identified by survey respondents. Interestingly, the vast majority of survey respondents (59%) did not agree that the County has enough behavioral and mental health services for adults. Although most did agree that these services’ facilities are clean, well-staffed, and have knowledgeable staff, but are roughly equally split about the cultural competency and equity of these services. Further, needs assessment participants stated that there are barely enough programs and services to meet the mental and behavioral health needs of Camden County residents. Additionally, only 30% of survey respondents agree that these services are accessible to those in need. Focus group/interview participants noted that it is difficult for residents to find services that will take them if they are not experiencing an emergency or mental health crisis. The expansion of service providers, as well as better collaboration and referrals between behavioral and mental health providers could help to address some of these issues.

Just like with all of the Prioritized Needs, there is a perception of a lack of awareness about mental and behavioral services for adults in the County, with 65% of survey respondents indicating that these services are not well known. Due to this, one focus group participant noted that individuals needing these services end up going to crisis centers and hospitals/doctors. Another indicated that some people are likely to ignore their issues until they reach a breaking point or self-medicate instead of reaching out for help; although others commented that this may be due to the stigma surrounding needing these services and not necessarily not knowing where to go for help. Need assessment participants strongly urged the County to increase its advertisement of currently available mental and behavioral health services for adults.

Additional barriers to accessing mental and behavioral services for adults are transportation, wait lists, and stigma. Expanding telehealth services could help meet the needs of more residents, but also address the issue of transportation and current social distancing requirements.

Substance Use Disorder and Prevention Services for Adults and Adolescents: The need for substance use disorder and prevention services in Camden County touches all types of individuals and has gotten noticeably worse over the past few years, as evidenced by the fact that overdose deaths in the County increased from 138 in 2014 to 329 in 2018 (138%). Survey respondents identified this as the second most important Service Need in the County, tying with behavioral and mental health services for adults. Seventy-five percent of the focus groups and interviews referenced this need. One local service provider lamented that the pandemic is significantly impacting this need, “Right now, it’s COVID making everything a lot worse.” Heroin and alcohol are the main drugs of choice among County residents entering substance abuse treatment centers.

According to 65% of survey respondents, there are not enough substance use disorder and prevention services in Camden County, and 58% of survey respondents do not think that services are widely advertised and known. SODAT, My Father’s House, Oaks Integrated Care, and Living Proof Recovery Center were identified by focus group and interview participants as positive supports in the County. Another source of information regarding these types of services mentioned was schools; however, now due to the pandemic causing schools to be virtual, youth may not feel they have a place to turn for help. For the most part, survey respondents indicated that services and staff are satisfactory; however, a sizeable percentage noted that these services are not delivered with appropriate considerations for clients of different races, ethnicities, ages, and genders.

Other major barriers identified by survey respondents are wait lists and transportation. Wait lists was brought up in conjunction with a sense of a lack of service providers. It was also noted that there is a “huge gap in services for kids” 12 or 13 years old and overall, few services are available for youth under 18 years of age, along with the variety and “quality of treatment for youth is inferior to adult treatment.” Youth stood out as a group particularly impacted by all of the barriers surrounding substance use disorder and prevention services. One recommendation offered by numerous need assessment participants is to create space for youth to speak with trusted adults about any substance-use-disorder-related questions. Youth “may be scared that their parents will find out that they are using drugs” and so do not go to them with questions or seeking support. Expanding, and starting new (like drop-in treatment centers) substance use disorder and prevention services, especially for youth, is an urgent need in the County. This can also help address the issue of wait lists.

Introduction

Purpose

The N.J. Department of Children and Families is partnering with human services organizations in each county to undertake an assessment of local strengths and needs. The goal of this assessment is to collect the information needed to make sure the right mix of services and activities are available in every county in New Jersey to support families. The findings from the needs assessment can be used to support the development of local recommendations to assist with decision making; the identification of high priority human Service Needs and barriers to service delivery for New Jersey's communities; the coordination and improvement of services to the Departments' target populations; the planning, funding, coordination and implementation of Department Initiatives.

This statewide approach to county-specific needs assessments aligns with DCF's existing county based continuous quality improvement review cycle, in which each county is evaluated every two years. The findings from the needs assessment will be embedded into the DCF's existing ChildStat process and shared with DCF staff and stakeholders during the county's ChildStat session. ChildStat is a learning, management, and accountability tool used by DCF to support continuous quality improvement, foster a shared sense of accountability and promote system-wide problem solving around critical issues affecting child and family outcomes. A ChildStat session incorporates analysis and interpretation of administrative data to support planning and dialogue between DCF executive management and senior leadership and system partners.

County Description

Narrative: In the Words of the County

- Demographics -

Camden County is the eighth-largest county by population in the state of New Jersey and covers an area of roughly 227 square miles. It is primarily an urban county, with 2 of its municipalities being cities and the other 35 being townships and boroughs. Three of the municipalities--Camden City, Cherry Hill, and Gloucester Township--have populations exceeding 50,000 and can be considered Urbanized Areas as defined by the US Census Bureau. The population density reported in the 2016 Hazard Mitigation Plan Update is 2,321.5 residents per square mile, meaning the County can be considered an Urbanized Area. The County becomes increasingly suburban moving southeast from Camden City, and at this extremity, includes a portion of the Winslow Fish and Wildlife Management Area and the western portion of Wharton State Forest. The average commute time for Camden County residents is about 28 minutes.

According to the 2019 US Census, Camden County has a population of 506,471, which represents a negligible difference in population from the 2015 Census, with the following racial/ethnic breakdown: 66% White, 21% Black, 16% Hispanic/Latino, 7% Asian, 9% other, 1% American Indian/Alaskan Native, and less than 1% Native Hawaiian/Pacific Islander. The majority of the County (80%) only speaks English, and 11% of the population was born somewhere other than the United States. The most population-dense city in the County, Camden City, has a markedly different composition than the County, so it is important to discuss these differences, which are noted throughout this County Profile section. According to the 2018 US Census, Camden City has a population of 73,973 (nearly 15% of the County's population) and has the second-highest population density of 8,248.7 residents per square mile in the County (after Woodlynne), and qualifying it as an Urbanized Area, with the following racial/ethnic breakdown: 23% White, 48% Black, 49% Hispanic/Latino, 3% Asian, 28% other, 2% American Indian/Alaskan Native, and less than 1% Native Hawaiian/Pacific Islander. The racial demographics of Camden City is notably different compared to the overall demographics of the County, with the City having a much smaller percentage of people who identified as White and more residents identifying as Black and Hispanic.

-Educational Attainment-

In Camden County, 89% of residents have at least a high school education, which is comparable to the statewide average of 90%. Fewer residents (33%) have a bachelor's degree or higher, and in this regard, the County is below the state average (41%). For Camden City, 71% of residents have a high school

degree or higher, which is lower than the County, and only 9% of residents have a bachelor's degree or higher.

- Employment, Income, and Cost of Living-

The largest employers in the County include the Cooper Health System, American Water Works, Bancroft Brain Injury Services, Campbell Soup Company, Diocese of Camden New Jersey Inc, Kennedy University Hospital, NJ Protocall Inc, Our Lady of Lourdes Medical Center, Inc, Virtua-West Jersey Health System Inc, and TD Bank. Health Care and Social Assistance are the major industries in Camden County, accounting for 18% of all jobs. The largest employers in Camden City include Cooper Health System, American Water Works, Campbell Soup Company, Delaware River Port Authority, L3 Technologies, Rutgers University – Camden, Camden County College, Our Lady of Lourdes Medical Center, Subaru, and Susquehanna Bank.

The median family income in the County is \$65,037, although has increased by 5% since 2013, is lower than the median family income for the state and ranks in the lower third of all New Jersey Counties. The median household income in Camden City is more than half less than the County's at \$26,105, and is the lowest average municipal income in the County. It is clear from this data that one of the places which should have the greatest need for economic and financial supportive services is Camden City, and as such, should be a primary point of concern for addressing gaps in basic needs, as resources directed to Camden City would help some of the most marginalized residents of the County.

The cost of living in the County is the lowest of all New Jersey counties at \$87,509 (for a two parent two child family). Despite being the lowest cost of living in New Jersey, it is still significantly higher than the median family income for Camden County families. For Camden City residents, the median household income is more than three times lower than the cost of living in the County. This suggests that families in Camden County, but especially families in Camden City, are likely experiencing financial or material hardship, especially as COVID 19 has dramatically impacted employment over the past year. Transportation, housing, child care, and health care are the top expenses for families in the County. According to the Economic Policy Institute, Camden County families are spending over \$1,000 per month on each of these expenses. Child care is especially burdensome, accounting for 19% of a family's annual cost of living.

In June 2019, unemployment in Camden County (3.4%) was slightly higher than the average for New Jersey (3.3%). According to the U.S. Bureau of Labor Statistics, a little over a year later, following the effects of COVID 19, the County's unemployment rate significantly increased to 15.5% (June 2020). This compares with New Jersey's rate of about 16.8%, which is higher than the United States as a whole (11.2%), likely because New Jersey was one of the states hit hardest by the pandemic early on. The unemployment rate in Camden County decreased to 7.3% in October 2020, while the unemployment rate for the state of New Jersey decreased to 8.2%. Camden City's unemployment rate had fallen from

8.8 percent as of March 2019 to 7.7 percent as of March 2020, but in June 2020, the unemployment rate rose in conjunction with the County rate, up to 22.9%.

- Poverty and Cost of Basic Needs -

According to the County data profile supplied by the state for this needs assessment, the County has a higher poverty rate for families with children under the age of eighteen than the state, with 16% of Camden County families falling below the poverty line, while 12% of families do statewide (2017). There are some municipalities that are outliers in this regard – Haddon Heights Borough, Laurel Springs Borough, Waterford Township, Voorhees Township, Berlin Borough, Haddonfield Borough, Audubon Borough, Haddon Township, and Barrington Borough all have families with children under eighteen poverty rates under 5%, while Hi-Nella Borough, Chesilhurst Borough, Brooklawn Borough, Lindenwold Borough, Mount Ephraim Borough, Lawnside Borough, Woodlynne Borough, Bellmawr Borough, and Camden City all exceed a 16% poverty rate for families with children under the age of eighteen. Camden City is the most notable outlier; it has the highest poverty rate in the County for families with children under the age of eighteen at 44%, which is nearly twice as high as the municipality with the second-highest poverty rate for families with children under the age of eighteen (Bellmawr Borough, with a rate of 26%).

Given the potential impact of COVID on food security, especially for children who rely on free or reduced lunches and meals from schools as a regular source of food, it is also necessary to consider the rate of food insecurity in Camden County. According to the County data profile, it appears that food insecurity in Camden County may have been decreasing; the number of children receiving free or reduced lunch has remained roughly the same since 2013, but the number of children receiving SNAP nutritional assistance has decreased since 2013. The food insecurity rate has also decreased slightly since 2015, but remains higher than the state rate, and ranks in the top third of New Jersey counties. These data points are pre-COVID 19 and may not reflect the current need for food in the County. Further, it is important to question whether the inconsistency in food insecurity numbers is the result of people not accessing these supports due to lack of information or eligibility requirements or is the result of an actual reduction in need.

Childcare is a major expense for County residents, costing roughly \$1,400 per month and outpacing family spending on each of housing, health care, and transportation. Childcare costs in the County are very close to the statewide average, being just \$100 less expensive than the average costs in the infant, toddler, and pre-Kindergarten categories. For Camden County, 19% of households reported spending 50% or more of their household income on housing, which is the same rate as the New Jersey average. The average Camden County household spends 21% of their income on transportation, which is also on par with the state average.

- Health Care -

As of 2017, only 3.3% of minors in Camden County were without health insurance coverage, the fifth-lowest county rate in the entire state. In Camden City, only 3.6% of minors were without health insurance coverage, which is comparable to the Countywide average. Camden County minors without health insurance primarily reside in the municipalities of Chesilhurst Borough, Bellmawr Borough, Lindenwold Borough, Runnemede Borough, Brooklawn Borough, Stratford Borough, Magnolia Borough, Pennsauken Township, and Lawnside Borough, all of which have rates ranging from 5 – 10%. The vast majority of children (94.9%) in the County meet all immunization requirements; this percentage has remained relatively consistent since 2013. Camden County has the sixth-highest frequency of reports of poor (late or absent) prenatal care, with 435 reports of late or insufficient prenatal care in 2018, a 17% increase (63 additional reports) from 2017. In 2019, the County had 52,046 adults and children on Medicaid, the fifth-highest number of Medicaid participants of all twenty-one New Jersey Counties.

- Community Safety and Crime-

Camden County has the third-highest violent and fourth-highest non-violent crime rate per 1,000 people in New Jersey. Its violent crime rate (4.6) and non-violent crime rate (24.2) are both higher than the state average. In 2019, Camden County had a murder rate (per 100,000) of 4.4 and an assault rate of 200.3. Camden City has a markedly higher violent crime rate than both the County and the State average (2.3), with a rate of 15.8 and a non-violent crime rate that is slightly higher than the County average at 28.9 per 1,000 people. The murder rate in 2019 for Camden City was 24.6 (down from one its all-time highs of 86.3 in 2012), and the assault rate was 877.8. The juvenile arrest rate in the County has decreased since 2012; however, is the second-highest in the state at 23 per 1,000 (2018). Concerning domestic violence, Camden County has the second-highest rate in the state, with 6,532 incidents occurring in 2019. This is primarily led by Camden City, which accounts for 40% of all the incidents in the County and has nearly five times as many incidents as Winslow Township, the municipality with the next-highest number of incidents.

Crime in general; however, has been on the decline in Camden City, with nearly 2,300 fewer incidents in 2019 than in 2010. Rape and auto theft are the two categories of crime which have not experienced a major decrease between 2010 and 2019. It is worth noting that the decrease in crime happened in conjunction with the City's move to disband its municipal police force and replace it with a county-level police department which places an emphasis on community policing.

-Child Welfare and Education Special Services-

Camden County has the second-highest number of children in the care of Children Protection and Permanency (CP&P) in the state, with a total of 5,459 in and out-of-home placements. The number of children in CP&P out-of-home placements has remained fairly steady from 2015 to 2018.

Without accounting for population size, Camden County has 15,638 children enrolled in special education services, the sixth-highest number of children receiving services of the NJ counties in 2018. The County had 19% of its children classified for special education, which is slightly above the state average of 17.8%. Interestingly, Camden County has only 650 children receiving early intervention services, which is comparable to the statewide average. Camden City School District had 1,605 students with IEPs in the 2018 to 2019 school year. The disparity between the number of children with IEPs in Camden City alone and the total number of children receiving early intervention services in the County suggests that there may be a greater need for early childhood services than what is currently being provided, or that residents may be experiencing some barriers to accessing currently-existing early childhood services.

Needs Assessment Methodology

Quantitative and qualitative data from various sources and stakeholders related to housing, food, health care, community safety, employment and career services, child care, services for families caring for a child of a relative, behavioral/mental health services for children, behavioral/mental health services for adults, substance use disorder services, domestic violence services, parenting skills services and legal and advocacy services were collected to inform this needs assessment.

County Data Profile

DCF provided a county data profile to the county Human Service Advisory Council (HSAC) to support the HSAC in identifying key topics to be explored in more depth. The data profile consists of the most recently available administrative data related to demographic population and selected indicators of poverty, housing, food security, childcare, health care, transportation, employment, community safety, mental health and substance use. The sources for the data included in the profile include a combination of federal databases. The primary purpose of the county data profiles is to support the HSAC needs assessment team in identifying key areas to prioritize during the focus group data collection efforts.

Approach for Prioritizing Needs

The Walter Rand Institute (WRI), part of Rutgers University, Camden, was contracted in October 2020 by the Community Planning and Advocacy Council (CPAC) to help conduct the County's needs assessment according to the guidelines set forth by the state, as well as compile this report. WRI is a research institute that has been operating in southern New Jersey since 2000. The applied research and technical assistant work they do touches on social services, population health, education, criminal justice, and more. CPAC recruited participants and conducted the focus groups and key informant interviews, as well as converted the survey to SurveyMonkey and distributed to the community, while WRI analyzed the data from the focus groups, key informant interviews, and surveys, and provided technical assistance to CPAC on boosting survey responses, diversifying focus group and interview participants, and determining the Prioritized Needs of the County.

The Community Planning and Advocacy Council added the survey questions into the online survey platform SurveyMonkey. This allowed for respondents to take the needs assessment survey online, which was of the utmost importance as COVID-19 continues to limit in-person interactions with the community. In order to maintain uniformity among the data collected, CPAC copied the wording and style of questions from the state. Halfway through the open period of the survey, CPAC edited the survey to display the needs areas to respondents at random, rather than in the same order for everyone. The reasoning behind this decision was to ensure that any potential survey fatigue respondents experienced as they provided feedback about need areas would not disproportionately affect the needs areas toward the end of the survey, and also to mitigate the impact of the possibility

that respondents' choices were a product of the first handful of needs areas that they happened to see.

Due to a typo on the digitized version of the survey, which combined two needs into one, when identifying top Basic Needs, respondents were able to select the combined community safety/employment and career services as one top need area. This did not hinder the process of identifying Prioritized Needs, however, since neither community safety nor employment and career services were among the most frequently identified top basic needs.

A link to the needs assessment survey was distributed via email directly to some County residents and stakeholders and remained open for a period of 3 months. A link to the online survey was also posted on the Community Planning and Advocacy Council's Facebook page in an effort to increase participation during the current public health crisis. Overall, there were a total of 133 complete survey responses. While the survey was open for residents and stakeholders to answer, CPAC also identified local leaders, service providers, parents, and other key informants for additional data collection and reached out to these individuals to conduct focus groups and key informant interviews via the video-conferencing application Microsoft Teams.

The Walter Rand Institute used Excel to analyze what County residents and stakeholders considered to be the most important need areas and barriers for the County. Camden County residents and stakeholders who took the survey identified: housing, food, child care, behavioral and mental health services for youth, behavioral and mental health services for adults, and substance use disorder and prevention services as the top needs of the County. After uploading detailed notes from the focus groups and key informant interviews into the coding software program NVivo, the Walter Rand Institute created categories and coded the information provided by these County residents and stakeholders. The focus group and key informant interview participants reported: housing, food, healthcare, behavioral and mental health services for youth, behavioral and mental health services for adults, and substance use disorder and prevention services as the top needs for Camden County.

The Walter Rand Institute considered the top needs identified by survey respondents and focus groups and interview participants and sent the Community Planning and Advocacy Council Team a list of the six most identified needs. These were: housing, food, child care, behavioral and mental health services for youth, behavioral and mental health services for adults, and substance use disorder and prevention services. CPAC sent an email to the Human Services Advisory Council and asked them to vote on the 4 top needs that should be considered Prioritized in the Needs Assessment Report. The 4 Prioritized Needs are: housing, behavioral and mental health services for youth, behavioral and mental health services for adults, and substance use disorder and prevention services.

The four need areas selected by the county to be the focus areas and primary topics in the qualitative data (e.g. focus groups and key informant interviews) collection included:

1. Housing
2. Behavioral and Mental Health Services for Adults
3. Behavioral and Mental Health Services for Children
4. Substance Use Disorder and Prevention Services

Focus Groups

In an effort to implement a uniform needs assessment approach across counties to support statewide trend analysis, DCF required HSACs to conduct a series of focus groups. The purpose of the focus groups was to collect qualitative information to better understand the scope, nature and local context related to addressing community needs that influence families.

Focus groups sessions were scheduled for approximately one and half hours with the first thirty minutes being designated for introductions and survey completion and the remaining hour being designated for the focus group dialogue. In each focus group session, participants were asked to complete a standard survey to gather data about the key topic areas outlined in the aforementioned data profiles. The survey was developed to identify areas of strength and areas in need of improvement related to county-based supports and service array. The survey consists of demographic data and approximately 10 questions related to each of the eleven basic and service needs. Six of the questions are based on a five-point Likert scale ranging from Strongly Disagree to Strongly Agree.

Upon completion of the surveys, the focus group participants were asked to transition into the dialogue component of the session. The dialogue requirement was intended to allow participants to highlight their experiences and perceptions as community members and provide opportunity for a deeper discussion and assessment of top barriers in each area of need. Group members discussed two selected basic and service need priority areas. Facilitators use a structured protocol to explain the purpose, goals, confidentiality and informed consent and objectives of the focus group.

Recruitment.

Recruitment for the focus groups was conducted by the Community Planning and Advocacy Council, based on the state's recommended types of individuals/organizations to be included. Due to the safety requirements necessary to avoid the spread of the novel coronavirus, outreach was conducted via email, telephone, Facebook, and during other virtual meetings held by CPAC staff. The staff member in charge of recruiting individuals for the focus groups sent a series of invitations to prospective participants starting in June 2020 and continued through December 14, 2020. This process not only included direct invitations to local leaders and service providers, but requests for the names of County

residents who would be willing to participate in the needs assessment process. In order to gather the necessary groups of people and meet the recommendations of the state, Camden County not only needed service providers, but parents and young people. CPAC was able to leverage its connections in the community to recruit participants for its focus groups directly and through referrals from other community organizations. WRI also made recommendations of who (both individuals and organizations) should be included in the focus groups. In total, the County reached out to over 100 individuals for participation in the focus groups.

Focus groups were conducted by CPAC staff via the video conferencing tool Microsoft Teams. Participants received an invitation to the focus group via email. Two CPAC staff participated in each focus group; one acting as a facilitator and the other as note-taker. Facilitators used the templates provided by the state and customized by the Walter Rand Institute to ask participants about the needs they considered to be most pressing in Camden County and what barriers residents face when attempting to access services. Note-takers recorded participants' responses using a combination of handwritten notes, word processing tools like Microsoft Word and Google Docs, and chat logs. These records of focus group responses were shared with the Walter Rand Institute to be entered into NVivo for analysis.

As noted earlier, in the interest of the health and well-being of both the participants and the CPAC staff, the recruitment and participation process for focus groups was conducted virtually. Due to the virtual nature of these interactions, access to reliable internet connections, experience with online video conferencing tools, and childcare needs during the time allotted for the focus groups all presented barriers for participation. In this challenging time in which we find ourselves, participants were less readily available than was expected, and this impacted the overall number of focus groups CPAC was able to hold. Local business owners, college aged youth, public service organizations, and community members served by community based providers were especially difficult to recruit. Another challenge of holding virtual focus groups is that participants can often be convinced to take part in a live focus group through incentives like free food and refreshments, which CPAC overcame by offering \$25 gift cards to non-service provider (service providers willingly volunteered their time to participate in the needs assessment) participants, although most participants were not aware that they would be receiving an incentive until after they had signed up for the focus group.

A total of 8 focus groups were conducted for the needs assessment, totaling over 50 participants, and the groups consisted of the following categories: Community Members at Large (Parents of Children Aged 0-8 Years Old); Youth/Young Adults (High School Youth); Community Based Organizations (Children's System of Care Providers; Child Care Providers; Homeless Network Providers; Aging and Disabled Providers; CP&P Staff); Community Leaders Currently or Previously Served by CP&P (Parents); and Community Leaders (Faith Based).

Focus Group Participants. A total of 8 focus groups were conducted in this county as part of this needs assessment. These focus groups were conducted from June 15, 2020 to December 14, 2020. There was a total number of 51 participants. The number of participants in each focus group ranged from a minimum of two and a maximum of 10 participants. During the focus group sessions, a total of zero surveys were completed.

Key Informant Interviews

Key informant interviews were conducted to gather additional feedback from County Human Services Directors and other identified individual selected by the HSACs regarding considerations for addressing the needs and concerns that were highlighted in the data profiles and focus group sessions. Facilitators use a structured protocol to explain the purpose, goals and objectives of the focus group.

Recruitment.

Recruitment for key informant interviews was also conducted by the Community Planning and Advocacy Council. Due to the safety requirements necessary to avoid the spread of the novel coronavirus, outreach was conducted via email, telephone, Facebook, and during other virtual meetings held by CPAC staff. A list was compiled by CPAC staff of individuals who would be able to offer important perspectives on a variety of local concerns. Invitations were sent to a variety of human services providers and recipients, and key informant interviewees came from positions that included social service providers, health officials, community activists, county officials, and community leaders (parent leaders). The staff member in charge of recruiting participants sent a series of invitations to prospective interviewees starting in June 2020 and continuing through December 14, 2020. In total, the County reached out to over 30 individuals for key informant interviews. CPAC offered \$50 gift card incentives to non-service provider (again, service providers willingly volunteered their time to participate in the needs assessment) participants.

Key informant interviews were conducted by CPAC staff via the video conferencing tool Microsoft Teams. Interviewees received an invitation to the interview via email. Two CPAC staff participated in each interview; one acting as a facilitator and the other as note-taker. Facilitators used the templates provided by the state and customized by the Walter Rand Institute to ask participants about the needs they considered to be most pressing in Camden County and what barriers residents face when attempting to access services. Note-takers recorded participants' responses using a combination of handwritten notes, word processing tools like Microsoft Word and Google Docs, and chat logs. These records of key informant interview responses were shared with the Walter Rand Institute to be entered into NVivo for analysis.

Due to the current public health crisis and state restrictions on public gatherings, the recruitment and participation process for key informant interviews was conducted virtually. Due to the virtual nature of these interactions, access to reliable internet connections, experience with online video conferencing

tools, and childcare needs during the key informant interviews, all presented barriers for participation. In this challenging time in which we find ourselves, participants were less readily available than was expected, and this impacted the overall number of key informant interviews CPAC was able to hold. The key informants that CPAC reached out to and who were able to set aside time and participate in these interviews provided important information to the County about the needs of its residents. A total of 12 interviews were conducted for the needs assessment.

Key Informant Interview Participants. A total of 12 interviews were conducted in this county as part of this needs assessment. The total number of participants included was 12. These interviews were conducted from June 15, 2020 to December 14, 2020. There was a total of zero surveys completed during the interview sessions.

Participant Demographics

As described in the above sections, both focus group and interview participants completed the needs assessment survey. Below we combine information for all participants to provide an overview of the participant demographics.

Role in the Community (not mutually exclusive)	Number of Participants
County Resident	73
Staff or Volunteer with a Community-Based Organization (e.g., Health and Human Services providers, Planning Board Participants)	66
Staff or Volunteer with a Public Service Organization (e.g., paramedics, fire fighter, police officers, air force, judges)	11
Local Business Owner in the County	1
Community leader and advocate in the county (e.g., hold a volunteer office, clergy, activist)	23
Other	12

Age	Number of Participants
Under 18	5
18-24	5
25-34	13
35-44	27
45-54	37
55-64	32
65 and over	14

Gender	Number of Participants
Female	107
Male	25
Non-binary, third gender/transgender	1
Prefer Not to Say	4
Other	0

Race	Number of Participants
American Indian or Alaska Native	1
Asian	4
Black or African-American	46
Native Hawaiian or Other Pacific Islander	0
White or Caucasian	62
Multi-Race (2 or More of the Previous)	9
Other	11

Ethnicity	Number of Participants
Hispanic, Latino or Spanish Origins	24
No Hispanic Latino or Spanish Origins	109

Education Level	Number of Participants
Grades Preschool-8	0
Grades 9-12-Non-Graduate	9
High School Graduate or GED	10
High School/GED <u>and</u> Some College/Trade	18
2 or 4-Year College/Trade School Graduate	36
Graduate or Other Post-Secondary School	60

Employment Status	Number of Participants
Employed: Full-Time	102
Employed: Part-Time	8
Unemployed-Looking for Work	5
Unemployed-Not Looking for Work	1
Retired	11
Student	3
Self Employed	1
Unable to Work	2

Years of Community membership	Number of Participants	Range
How many years have you been a member of this community?	133	1-30+ years

Services Accessed by a Household Member within the last 2 Years	Number of Participants
Yes	49
No	80

Household Member History of Involvement with NJ Division of Child Protection and Permanency	Number of Participants
Yes	20
No	110

Participants represented the following municipalities

Audubon, Barrington, Bellmawr, Berlin, Blackwood, Camden City, Cherry Hill, Clementon, Erial, Evesham, Glassboro, Gloucester Township, Gloucester City, Haddon Heights, Haddon Township, Haddonfield, Hopewell, Laurel Springs, Lawnside, Lindenwold, Mantua, Marlton, Merchantville, Pennsauken, Pine Hill, Runnemede, Sicklerville, Voorhees, Washington Township, West Deptford, and Winslow.

Additional Data Collection Methodologies

The Community Planning and Advocacy Council was interested in examining the availability of early childhood services, specifically defined as children’s services for ages 0-8 (included a variety of services, such as mental/behavioral development, school, intellectual and developmental disabilities, and childcare), which, through their experiences with community members, they identified as a need not adequately captured by the needs assessment. To this end, CPAC collected data about children’s services in the County through two focus groups and one key informant interview with a community

member who is also a veteran and resource parent. Relevant data from the County data profile was used to supplement and expand on the qualitative data which CPAC collected.

While CPAC wanted to understand the specific needs of caregivers of young children, they recognize that for continuity of this Report, the findings for this additional need will be combined with the findings of the child care section of this report.

PART 2



Key Findings Across Needs

-Top Needs- Camden County's needs assessment consists of nearly 140 survey responses, a dozen interviews with key informants, and eight focus groups. Collectively, these respondents and participants rank the top Basic Needs in the County as: (1) Housing; (2) Food; and (3) Child Care, although focus group/interview participants did rank Healthcare slightly higher than Child Care. The top service needs, collectively rank as: (1) Behavioral and Mental Health Services for Children; (2) Behavioral and Mental Health Services for Adults; and (3) Substance Use Disorder and Prevention Services for Adults and Adolescents. It is interesting to note; however, that the fourth Service Need ranked by survey respondents is Domestic Violence Services; whereas for focus group participants and interviewees it is Parenting Skill Services. Using their expertise as Camden County stakeholders, the Human Services Advisory Council selected: (1) Behavioral and Mental Health Services for Adults; (2) Housing; (3) Behavioral and Mental Health Services for Children; and (4) Substance Use Disorder and Prevention Services for Adults and Adolescents as the four Prioritized Needs. These needs are considered the most pressing and require action in the next one to three years.

-Lowest Ranked Needs- On the other end of the rankings, some needs are considered less pressing in Camden County. Among survey respondents, the needs that are considered lowest priority are: (4) Community Safety/Employment and Career Services¹; (3) Parenting Skill Services; (2) Legal and Advocacy Services; and (1) Services for Families Caring for a Child of a Relative. Among focus group participants and key informants, the needs that are considered lowest priority are: (3) Child Care; and Employment and Career Services (tied with same number of votes); (4) Services for Families Caring for a Child of a Relative; Community Safety; and Legal and Advocacy Services (all tied with same number of votes); and (5) Domestic Violence Services

-Trends in Need Areas- Analyzing the Camden County information gathered throughout the needs assessment reveals a few trends across the 14² need areas:

- 1). In conducting a human services needs assessment in a County like Camden, it is important to segment out its largest municipality, Camden City, in terms of demographics, needs, and barriers specific to its population. Camden County, like Essex County, is unique in that a large proportion of its population, and need, comes from one major city—Camden in the case of this County, and Newark in the case of Essex County. It is well known and documented that both of these cities score poorly on child and family welfare, health,

¹ Please note from the Methodology Section, due to a typo on the digitized version of the survey, when identifying top basic needs, respondents were able to select both community safety and employment and career services as one top need area. Given this, we are not able to discern which survey respondents think is not a top need, Community Safety or Employment and Career Services, or if they think both are not top needs.

² Please note from the Methodology Section, Camden County added Children's Services specifically defined as children's services for ages 0-8 (included a variety of services, such as mental/behavioral development, school, intellectual and developmental disabilities, and childcare) to the list of Needs about which to focus group and interview.

education, quality of life and environment, financial, employment, and community safety indicators. To truly address the needs and human services in the County, one needs to separate out Camden City from the overall County, and conduct a separate assessment on needs of City residents and how these needs are being addressed.

Camden City heavily influences the County's indicators on community safety/crime, employment, income, and poverty; and also is starkly different than the County on these same indicators, as well as racial/ethnic breakdown and educational attainment. Where the City drives the County's statistics, the County ends up ranking in the top worst counties in the state. Some of these contrasts include: median family income in the County is \$65,037; whereas it is only \$26,105 in the City; unemployment rate in the County last June was 15.5%, while it was 22.9% in the City; 16% of Camden County families fall below the poverty line; whereas 44% of Camden City families live in poverty; violent crime rate in the County is 4.6; while the City's reaches 15.8; and lastly, 33% of County residents have a bachelor's degree or higher; whereas only 9% of residents have a bachelor's degree or higher. When examining these statistics, it is important to consider the level of need for certain services, such as employment and career, community safety, legal and advocacy, domestic violence, mental and behavioral health, housing, food, and substance use. It is also important to further research the unique barriers faced by City residents to accessing the services most needed.

2). It was frequently mentioned by focus group and interview participants that the quality of services, across most Basic and Service Need areas, are delivered poorly. It came up time and time again that service recipients are treated in demoralizing or dehumanizing ways by staff, in both direct and indirect ways. Further, survey respondents vastly disagreed that services, again this is across most Basic and Service Need areas, are provided with sensitivity to and appropriate knowledge about race, ethnicity, and gender. One needs assessment participant emphasized the importance of upholding a "non-judgmental perspective when interacting with clients." These results point to the need for County-led services and service providers in the County to undergo cultural sensitivity, and even trauma informed care, training.

3). Lastly, an issue that was raised in many of the Basic and Service Need areas, but certainly for all of the Prioritized Needs, is the poor collaboration and communication between agencies—service providers and informational resources—as well as knowledge of one another. One needs assessment participant referred to this as ping pong since those seeking information/help are consistently bounced around from one point of contact to another to another in the hopes of finally reaching the appropriate service for their need. This, along with the perception of poor service delivery, is frustrating and can lead to giving up on seeking services. It appears as if service providers often are not aware of all the resources

and services available, both within their area of operation (i.e. a food bank not knowing about other food resources) or outside of it, which is extremely important for residents who have multiple needs. The suggestion of service navigators or ‘hubs’ were offered to help mitigate these concerns.

Potentially connected to this, but reported as a separate issue, across most of the Basic and Service Needs, but especially noted for the Prioritized Needs, is the perception that there are not enough services in the County to meet the need. This could also be a function of one the most reported barriers—lack of awareness of services. Regardless, perhaps if there was better coordination of and between the various human services in the County, more residents in need could be served leading to increased knowledge about the many services that do exist in the County.

-Barriers- While the County has the will to make changes to improve service delivery and accessibility, there are persistent barriers that residents face when attempting to receive services. The barriers most reported by survey respondents, focus group participants, and key informants are: (1) Lack of Awareness of Services; and (2) Transportation. Then the two groups differ on the ranking of the remaining most common barriers across all need areas. Focus group and interview participants proceed to rank the barriers as: (3) Eligibility Requirements; (4) Stigma; (5) Services Do Not Exist; and (6) Too Expensive/Cost of Services. The survey respondents; however, rank the remaining top barriers as: (3) Wait Lists; (4) Cultural Barriers; (5) One Size Fits All; and (6) Services Do Not Exist.

Based on what is known about the County, some of these barriers are not surprising. Although Camden County ranks 17th (out of 21) in land area (smallest), it is clear from focus group and interview participants that transportation is an issue for residents outside of Camden City; which is further compounded because many of the human services are located in the City. Eighty percent of the focus groups/interviews mentioned transportation as a barrier, accounting for nearly 14% of all barriers noted. Survey respondents noted transportation as a barrier 718 times, which calculates to nearly 19% of all barriers noted. Some recommendations offered by focus group/interview participants are to strategically locate various human services throughout the County (along publicly accessible transportation routes) and expand tele/virtual service appointments.

The lack of awareness about programs and services in the County is widespread among stakeholders and residents. This is the top barrier reported by survey respondents and focus group/interview participants for every Basic and Service Need areas, but especially highlighted for the Prioritized Needs. In fact, lack of awareness was noted 584 times by survey respondents (15% of all barriers noted) and mentioned 49 times during the 20 focus groups and interviews. This is especially concerning because residents often rely on County employees and local service providers to make referrals. Residents report that trying to get linked with service providers can be difficult since they are not aware what services exist or have trouble actually connecting with service providers. Many brought up the need

for greater distribution of information about various service providers and greater marketing/advertising of available services. Although there are multiple information and referral sources in the County, like Resource.net, Aunt Bertha (through the Camden Coalition of Healthcare Providers), and 211, many families either do not know about them or do not utilize them when looking for assistance, although 211 was mentioned by some focus group and interview participants as a place individuals start when looking for services. It appears that Camden County needs to work on marketing its human service programs to residents and connecting service providers with one another to address the pervasive lack of awareness of services available in the County. Focus group and interview participants also noted a need for interagency knowledge of programs and resources available in the County.

-Subgroup Impact-There are a number of subgroups of the population that experience disproportionate levels of need or face additional challenges when accessing services in Camden County. Some of these include: A). Low Income Families; B). Minority Families; C). LGBTQ+ Residents; especially Youth; and D). Women. This is true across all need areas, but women were identified as especially impacted with regards to child care, and LGBTQ+ residents with regards to behavioral/mental health (for adults and children), housing, and substance use disorder and prevention services.

As previously mentioned, families in Camden City are the poorest in the County with a median family income of only \$26,105, three times less than the County's. The June 2020 unemployment rate in the City was 7.4 percentage points higher than the County's. Forty-four percent of Camden City families fall below the poverty line, which is 28 percentage points higher than the County's rate. Lastly, 33% of County residents have a bachelor's degree or higher; whereas only 9% of residents have a bachelor's degree or higher. All of these statistics indicate that families in Camden City—low income families—have greater difficulty improving their family's financial standing in comparison to the County. Further, Camden City is predominately Black (48%) and Hispanic/Latino (49%); whereas the County is predominately white (66%), and research has demonstrated the correlation between race and socio-economic status. Additionally, Blacks residents report higher rates of mental health distress, at 24%, than Hispanic or white residents, at 21% and 18%, respectively.

LGBTQ+ residents; especially youth, are perceived to be a marginalized group throughout the need areas, but in particular with housing, behavioral and mental health services, and child care. Focus group and interview participants seemed especially sensitive to the needs of this population and shared that services in the County could be more inclusive and welcoming for these individuals, chiefly youth.

Women also appear to be a group particularly impacted by several of the needs in this assessment, as well as the barriers noted. Women in the County earn \$9,000 (nearly 20% difference) less annually than their male counterparts. According to the County data profile, child care is the largest monthly expense in Camden County. Every month, roughly \$1,386 is spent to care for children. If women are the single

parent head of households with children under 18 years old (27% in Camden City vs. 8.3% in the County and 6.8% in the state), this financial burden falls on them. Further, the annual cost of living for families in the City is \$60,000 more than their median household income.

Women are the primary victims of domestic violence and are diagnosed with depression at a higher rate than men in the County (28% vs 11%). Outside of domestic violence services, no other specific female-oriented services came up during focus groups and interviews. Based on what is known about their mental health and earnings, it would seem that the County should be investing in programs designed to support women.

-Recommendations-In addition to the suggestions made about greater advertising and marketing of available human services in the County, needs assessment participants strongly advocated for better coordination of services and this should include interagency collaboration to help families navigate the various services and connect with the service that best fits their needs. Participants felt that this interagency collaboration could help with wait times, as well as reducing a family's feeling of being in limbo while waiting to get connected to the right service provider. Further, some even suggested the need for a centralized hub of services.

Additionally, expanding transportation services is high priority. Suggestions include establishing mobile services; expanding service sites to areas outside of Camden City; and adding more public transportation routes and points of access for public transportation in areas outside of the City. These suggestions cannot be address by the County alone, and would require help and funding from the state.

A thread of destigmatizing needs and humanizing service provision wove through the need areas. Needs assessment participants were very vocal that in order to increase the utilization of current services, the County needs to destigmatize seeking and receiving services among its residents and service providers. A specific suggestion for how to do this is to increase the amount of information available to the public regarding a given need; thereby, normalizing it, which also relates to better communications about available human services. Moreover, many participants indicated that interactions with agency staff vary from rude and disrespectful to downright dehumanizing, and how this needs to change urgently. Perhaps training in cultural sensitivity, as well as trauma informed care could help to address this concern.



Need Area: Housing

Status: Prioritized Need Area

Housing includes the availability of affordable, stable, permanent and acceptable living accommodations. This need area seeks to assess the sufficiency of housing in the county and the degree to which residents are homeless or threatened with eviction, as well as the existence of community supports (e.g., subsidy, vouchers, etc.) and services aimed at ensuring housing for all (e.g., Homelessness Prevention Program, Housing Resource Center, community shelters, County Board of Social Services, Section 8, affordable housing, housing authorities, etc.)

In Camden County, 19 percent of household income was spent on housing in 2017. This percentage is equal to the percentage for the state of New Jersey (American Community Survey; *see County Data Profile for Additional Source Information*). In 2019 the latest year of data made available in the county profile packet, 21 percent of households experienced at least one of four housing problems: 1.) overcrowding determined by high person-per-room, persons-per-bedroom, or unit square footage-per-person; 2) severe cost burden, 3) lack of kitchen facilities, or 4) lack of plumbing facilities (Comprehensive Housing Affordability Strategy; data compiled by HUD; *see Data Profile for Additional Source Information*). Additional data for this need area may be available in the county profiles.

Need Assessment Key Findings

Summary: Scope of the Need

The County's Human Services Advisory Council has prioritized housing as a need in Camden County. Out of the 20 focus groups and interviews conducted, housing was identified as a top Basic Need in 16 (75%). Furthermore, housing was identified as a top Basic Need by 47% of survey respondents, making it the most selected top Basic Need among survey respondents. Housing is the third highest monthly expense for families in Camden County according to the data profile provided by the state. And this further exacerbates lower income families in the County as its annual cost of living outpaces the median family income by over \$20,000; this rises to \$60,000 for Camden City residents. When it comes to households with a severe cost burden for housing, Camden County's rate is the same as the statewide average (19%). Since 2014, the percent of households with severe housing problems (defined as overcrowding, severe cost, lack of kitchen facilities, or lack of plumbing facilities) has fluctuated around 21%. While the housing needs of Camden County residents may be on par with the rest of the state, cost and amount of services/housing stock are still issues for the County to address. More than 80% of survey respondents "Disagree" or "Strongly Disagree" that there are enough housing services available in Camden County. Further, a recent estimate of the homeless population in the County (2019) indicates that 603 people are experiencing homelessness, which means that Camden County has the fourth-highest number of people experiencing homelessness in the state. Further, when survey respondents were asked if they agree or disagree with the statement "Anyone in the County is able to access (housing) services," 81% "Disagree" or "Strongly Disagree", indicating the need for housing

services is widespread. When asked whether housing services in Camden County are known and widely advertised, 79% of survey respondents “Disagree” or “Strongly Disagree”.

When asked about barriers to getting housing services and subgroups that are impacted more by this need, a few main points arose. Focus group participants consistently identified undocumented individuals as being at a greater risk of having difficulties accessing and receiving services, as a function of both language barriers and a fear of contacting service providers. LGBTQ+ youth were also identified as being more likely to experience homelessness and housing insecurity. One focus group participant pointed out that people who lack a car or reliable transportation to Camden City are unlikely to be able to access services and that residents in the lower portion of the County, such as those in Winslow Township, Waterford Township, and Berlin Township, are typically less aware of the services available.

Summary: Nature of the Need

When asked about housing, only 13% of survey respondents “Agree” or “Strongly Agree” that services are widely advertised and known in the County. When asked if they agree or disagree with the statement “Anyone in the County is able to access services,” only 15% of survey respondents “Agree” or “Strongly Agree”. This indicates that residents feel services are difficult to access, which is likely exacerbated by long waitlists (identified as a barrier by 47% of survey respondents) and a lack of knowledge about what services are available.

The Camden County Board of Social Services, Center for Family Services, shelters, and the 2-1-1 Information and Referral Agency were identified during focus groups and interviews as being the supports most frequently utilized by people struggling to meet housing needs in Camden County. When it comes to the quality of housing services in Camden County, survey respondents had mixed opinions about the satisfactoriness of housing services and staff. While 28% of survey respondents “Agree” or “Strongly Agree” that housing service facilities are of good quality and 40% “Disagree” or “Strongly Disagree” they are of good quality, respondents almost equally “Agree” or “Strongly Agree” and “Disagree” or “Strongly Disagree”, at 36% and 35% respectively, that staff at these facilities are well-trained, knowledgeable, and provide good customer service. One thing to note; however, is that the number of people selecting the “Don’t Know” answer went up significantly (more than 20%) for the questions regarding quality of services, discriminatory practices, and staff knowledgeability. This suggests that individuals responding to the survey may be less likely to have personal experience utilizing housing services and so are less able to speak to specific qualities of the services. Despite this larger proportion of people who may not have utilized housing services, the number of people selecting the “Don’t Know” answer was much smaller for questions about the availability, accessibility, and advertisement of services; it may be that some people who would otherwise utilize housing services choose not to as a result of the perceived difficulties of accessing these services.

Some of the barriers identified most often were waitlists and a lack of awareness of services. Forty-seven percent of survey respondents identified waitlists as a barrier and many focus group participants echoed this concern. One focus group participant noted that “you could be on [wait lists] for years, unless you know someone.” Participants indicated that this is primarily due to a lack of affordable housing (stock) in the County. When discussing wait lists, it was noted by multiple participants that individuals seeking housing services find themselves waiting not only on an actual housing placement list but also waiting to have even an introductory appointment with someone who can help them find housing, prolonging the impact of housing insecurity on individuals and families. Another focus group participant, talking about the lack of awareness of the services available said, “The first thing people do is panic. They don’t know what to do or who to call. It’s unadvertised and unclear what people should do when they need housing.” It is not hard to imagine how the potential delay in pursuing services resulting from a lack of awareness could exacerbate the problems people experience with waiting for services. Again, focus group participants consistently identified the lack of affordable housing available to people in Camden County. One participant noted that “once [a person’s] voucher ends, the rent doubles and they can’t afford to live there anymore.” The idea of providing more comprehensive services and addressing the root causes of housing insecurity was brought up by many interviewees and focus group participants. Individuals with housing issues may also be dealing with unemployment, financial issues, domestic violence, or a substance use disorder, which can be exacerbated by long housing wait times.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

Housing is not just a Prioritized Need, it is the most frequently-identified top Basic Need by residents of the County, and it is clearly imperative that steps are taken to mitigate the barriers to accessing housing services. The majority of interview and focus group participants were skeptical that Camden County could address housing at the County level, even if it continues to prioritize it. Most participants felt that the County lacks adequate funding, service diversity, and coordination of organizations and programs that focus on housing. Participants suggested that, while there simply are not enough resources available for affordable housing, some shortcomings related to funding may be beyond the County’s control. One participant noted that, “These are national problems and can’t really be addressed at the County level.”

The Board of Social Services, shelters, and 2-1-1 were frequently mentioned as resources that can help individuals get referred to housing service providers, but collaboration between agencies is still a serious issue. Participants who identified housing as a top need often mentioned that people typically do not know where to start when looking for help, as “You can’t plan for losing your housing.” There were also repeated mentions of how difficult and time-consuming the process of applying for services can be. The value of dedicated advocates or case managers came up frequently during discussions with service providers, who recognize that, while they are able to refer a person to an agency for help, people often experience difficulties with navigating these systems, and having somebody who is

familiar with the system to take a client through each step would greatly improve the client's experience. Wait times, eligibility requirements, and quality of service barriers could potentially be lessened through the use of navigators for people seeking housing services, where somebody with knowledge of the available services and relationships between providers could not only help individuals understand their options, but also help them advocate for themselves when running into issues with the system.

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

One of the major recurring themes across the focus groups and key informant interviews was the poor service residents receive when seeking assistance with housing. Some other recurring themes not discussed above include the lack of coordination of services and eligibility requirements. Many of the interviewees have been County residents for over fifteen years, which gives additional weight to these themes. Multiple people indicated that interacting with housing service providers, as one participant put it, "Isn't the best experience sometimes." The prevalence of waitlists, as discussed above, coupled with a lack of coordination between service providers can frustrate residents and lead them to feel that their time is being wasted, leaving them with the perception that "[The Board of Social Services] doesn't try to help too much, they just push them to other agencies." These frustrations are exacerbated by the quality of the interactions residents have with staff who are perceived as "just getting a paycheck," suggesting that, as one participant put it, "The County can be oblivious to how they treat people." This perceived lack of empathy in interactions with residents could be due in part to the high case load some focus group participants noted, but; ultimately, focus group and key informant interview participants shared the sentiment that, at the end of day, "It's about customer service."

The lack of coordination between services providers means that residents seeking services will often have to call a variety of different providers or be transferred to multiple different providers before finding someone who can help them. It was noted that, "People are treated like a ping-pong ball;" ultimately, only receiving services after speaking with several different agencies, which perpetuates the perception that the Board of Social Services will just pass a resident along to another agency, as noted above. Improved communication between agencies was suggested by multiple focus group participants and was identified as an area which, if improved upon, would likely improve the quality of services that residents receive and help to reduce some of the negative perceptions surrounding housing services. As one key informant suggested, "You should not have to call somebody who knows somebody to get service...to get somebody to take care of somebody else. Everyone should be treated with empathy."

Most of the interviewees and focus group participants said that increased collaboration between agencies/organizations and supports/services which are tailored to individuals' specific needs would help to better meet the needs of families locally. When talking about the existing constellation of services, people were mostly dissatisfied with the amount of access Camden County residents have to

supportive services, and although some participants disagreed over whether there are enough providers, almost all agreed that funding was a concern. Focus group and key informant interview participants identified increasing interagency collaboration, especially to provide transportation to services, facilitate better and more complete care for individuals and families, and improve communications about available services as the primary way in which the New Jersey Department of Children and Families could collaborate with Camden County. One participant suggested “bringing people together to cross-reference and [share] knowledge and skills,” which echoes the recommendations for more comprehensive services from a variety of providers made by numerous community leaders, service providers, and Camden residents as part of this assessment.

Eligibility requirements were also identified by focus group and key informant interview participants as a hindrance to individuals seeking to access housing services. The typical scenario shared involved a resident who should, for all intents and purposes, be eligible for assistance, but made too much or too little, was unable to go to the shelter because they had not been placed there, did not pass background or credit checks, or did not have access to documents such as birth certificates. One focus group participant shared a particularly sad story about a “parent [who] had a criminal background [and] isn’t able to live in the home,” with their family. Scenarios like this one can deter residents from seeking and accessing housing services in order to avoid potentially separating one or more members of their family, so it is imperative to reconsider the stringency of eligibility requirements, most especially those which might separate a family.

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	91	42 %	40 %	11 %	0 %	8 %	68 %
2. Anyone in the county is able to access services.	91	34 %	46 %	14 %	0 %	6 %	68 %
3. Services are widely advertised and known by the county.	91	31 %	47 %	12 %	1 %	9 %	68 %
4. Services take race, age, gender, ethnicity and more into account.	91	15 %	28 %	26 %	4 %	26 %	68 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	91	14 %	25 %	26 %	2 %	32 %	68 %
6. Staff are well-trained, knowledgeable and provide good customer service.	89	11 %	23 %	34 %	2 %	30 %	67 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	64	48%
Services do not exist	133	38	29%
Transportation	133	38	29%
Cannot contact the service provider	133	32	24%
Too expensive	133	30	23%
Lack of awareness of service	133	60	45%
Cultural Barriers	133	41	31%
Services provided are one-size fits all, and don't meet individual needs	133	34	26%
Stigma Leads to Avoidance	133	34	26%
Eligibility Requirement (explain below)	133	39	29%
Other (explain below)	133	6	5%

Need Area: Food

Status: General Need Area

Food security is the availability and ability to acquire nutritionally adequate and safe foods. This area of need seeks to assess the level to which residents throughout the county have adequate food and the existence of community services and supports to address unmet food needs (e.g., food banks, soup kitchen, local pantry, community-based organization, Supplemental Nutrition Assistance Program (SNAP), food stamps, Women, Infants, Children (WIC) Supplemental Nutrition Program, etc.)

In **Camden County**, the food insecurity rate for households was approximately 11.8 percent in **2017**, the most recent date of available data (U.S. Census Bureau Current Population Survey and U.S. Department of Agriculture Economic Research Service; see *County Data Profile for Additional Source Information*). This percentage is **greater than** the percentage rate for New Jersey.

Need Assessment Key Findings

Summary: Scope of the Need

According to the County data profile provided by the state, food insecurity in Camden County is slightly decreasing, but the following reduced numbers could be more a reflection of application barriers and eligibility requirements versus an actual change in need. In 2015, 12.6% of Camden County residents, or nearly 64,000 individuals, experienced food insecurity, and by 2017, it decreased to 11.8%. This decrease runs parallel to the state of New Jersey's rate of food insecurity, which went from 10.8% to 9.6% over the same time period. Although the food insecurity rate of 11.8% is lower than the national average of 12.5%, it is still higher than the New Jersey state average of food insecurity (9.6%).

Between 2013 and 2017, 1,981 less Camden County residents enrolled in the special supplemental nutrition program for Women, Infants, and Children (WIC). This also parallels the downward trend in WIC enrollment across the state. However, the decrease in WIC enrollment in Camden County (15%) was greater than the 11% decrease in WIC enrollment for all of New Jersey. There were also 30,483 total Camden County residents that received SNAP benefits in 2017, which is 3,497 less than the 33,981 recipients in 2013. The number of children that received free or reduced lunch remained relatively stable and on trend with the state, with 31,343 children in 2017. That is less than a .005% decrease between 2013 and 2017. It is worth noting that these data points are pre-COVID 19, and it is likely that the need for food in the County has increased, especially as a result of the transition to virtual education, which may have seriously hindered access to breakfast and lunch for youth who were formerly receiving free or reduced lunches.

Results from the County Needs Assessment Survey show that approximately 54% of survey respondents "Agree" or "Strongly Agree" that there are enough food services in Camden County, while 41% "Disagree" or "Strongly Disagree" with that statement. When asked if they agree or disagree with the statement that anyone in the County can access food services, the results are nearly the same with

48% of survey respondents noting that they “Agree” or “Strongly Agree” and 47% noting “Disagree” or “Strongly Disagree”. Out of the 20 focus groups and key informant interviews, 8 discussed food, and 6 identified food as one of the top Basic Needs in the County. Focus group participants and interviewees report that families with lower incomes are hit especially hard by food needs. Unhoused people also face additional barriers to receiving food assistance because of their inability to find out about resources and lack of transportation to get to the services that exist.

Summary: Nature of the Need

When discussing the availability and accessibility of food supports in Camden County, most people agree the County is doing well. Some focus group participants and interviewees were able to identify services available in the County by name, mentioning the “Hope Mobile” from the Center for Family Services, Cathedral Kitchen, and the Food Bank of South Jersey. One interview respondent shared, “When you’re trying to find food to feed your family – you would think that people would start calling everyone they know to find out what to do. But they don’t. They’d rather call somewhere where nobody knows their struggle. They’ll call the County, their township, and then go from there.” Based on the experiences shared in focus groups and interviews, it appears that Camden County has challenges with creating streamlined and comprehensive information about available resources, while also struggling to connect those in need with the available services. Participants suggested that providing more knowledge and education to residents about the services that are currently available, normalizing seeking and receiving food services, increasing collaboration between local farms, distribution channels, and residents to ensure that food resources are being directed where they are most needed would all be ways to improve residents’ access to food services in the County.

Similar to the insights provided in the surveys and focus groups, the majority of survey respondents (44%) identified lack of awareness of the services as a barrier to food services. Additionally, 41% of survey respondents report transportation being a barrier to accessing food services. Twenty percent of respondents also report that the “one-size-fits-all” style of the resources does not meet the individual, unique needs of the community, which presents a barrier to food services. Approximately 20% of survey respondents also identify cultural barriers to accessing food services, which complements the results regarding “one-size-fits-all” barriers as well.

When asked if services are widely advertised and known in the County, survey respondents seemed very divided. About 49% “Strongly Agree” or “Agree” and 47% of respondents “Disagree” or “Strongly Disagree”. Focus group participants and interviewees confirm these barriers, reporting that accessing food services requires individuals in need to know where to go and, currently, the community in Camden County does not know where to go. One focus group respondent pointed out that “...people don’t know of the services...I only know of Cathedral Kitchen”. Other comments discussed concerns

about frequent rejection due to eligibility requirements, especially for people who are housing-insecure or undocumented. As one respondent noted, “this County, and country in general, has way too many farms, markets, & wealth for so many people to be hungry.” The lack of access to a full supermarket in downtown Camden City was also noted by many respondents as a cause for and perpetuator of food insecurity and unhealthy food options. As one respondent indicated, “In the City [of Camden] residents have to go all the way to Cherry Hill for the good stuff like Wegman’s and Shop Rite. The City got left with Price Rite and dollar stores.”

When asked if the facilities providing food services are of good quality, 63% of survey respondents either “Strongly Agree” or “Agree”. Sixty percent of survey responses also indicated that the staff of the food service providers are well-trained, knowledgeable, and provide good customer service. These numbers are some of the highest in all of the survey results. This indicates a discrepancy between the quality of services and the lack of awareness of and/or access to them, as indicated by the other survey, interview, and focus group results. During an interview, one participant said, “...there really is no standard format for getting information about food or where you can get help with food. Some people will call the County to get names of food pantries in their area or, again, reach out to their church or a local church.” This discrepancy between the known quality services and the barriers in accessing them suggests that increased resources and services paired with more comprehensive awareness-raising about the services could alleviate some of the community barriers to accessing food services in Camden County. In contrast to the overall responses regarding quality of services, it is important to note that when asked about discriminatory practices, about half of the survey respondents “Agree” or “Strongly Agree” that food services in Camden County take race, age, gender, and ethnicity into account during service delivery.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	92	13 %	27 %	41 %	13 %	5 %	69 %
2. Anyone in the county is able to access services.	92	9 %	38 %	37 %	12 %	4 %	69 %
3. Services are widely advertised and known by the county.	92	13 %	33 %	39 %	10 %	4 %	69 %
4. Services take race, age, gender, ethnicity and more into account.	92	10 %	23 %	32 %	11 %	25 %	69 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	92	8 %	10 %	54 %	10 %	19 %	69 %
6. Staff are well-trained, knowledgeable and provide good customer service.	92	5 %	16 %	51 %	10 %	17 %	69 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	18	14%
Services do not exist	133	21	16%
Transportation	133	55	41%
Cannot contact the service provider	133	21	16%
Too expensive	133	12	9%
Lack of awareness of service	133	60	45%
Cultural Barriers	133	27	20%
Services provided are one-size fits all, and don't meet individual needs	133	27	20%
Stigma Leads to Avoidance	133	27	20%
Eligibility Requirement (explain below)	133	26	20%
Other (explain below)	133	4	3%

Need Area: Health Care

Status: General Need Area

Health care service providers deliver medical care, including health promotion, disease prevention and diagnosis and treatment services, to children and adults. This need area seeks to determine the level of residents in the county with health care needs, the availability of insurance coverage, and the existence of community services and supports that address health and wellness (e.g., doctors and clinics, hospitals, Medicaid Services, Home Visiting Programs, Family Success Centers, etc.)

In **Camden County**, the estimated proportion of children under 18 years old (minors) with no health insurance coverage was 3.3 percent in 2017. This percentage is **less than** the estimated percentage of minors with no health insurance for New Jersey in the same year (ACS; see Data Profile for Additional Source Information).

In Camden County in **2018**, there were 435 reports of lack of or no prenatal care. This was **increase** of 63 reports from the previous year (Center for Disease Control and Prevention; see *Data Profile for Additional Source Information*).

Need Assessment Key Findings

Summary: Scope of the Need

Five of the focus groups and key informant interviews mentioned healthcare as a top Basic Need in Camden County (25%). Health care is also prioritized by survey respondents, 32% of which identified it as one of the County's top Basic Needs. According to the county data profile, residents of Camden County appear to have adequate access to healthcare. As of 2017, only 3.3% of minors in Camden County were without health insurance coverage, the fifth-lowest county rate in the entire state. Further, the percentage of minors without health insurance has decreased slightly over time in the County from 4.9% in 2013 to 3.3% in 2017. In Camden City, only 3.6% of minors were without health insurance coverage, which is comparable to the County average. Camden County minors without health insurance primarily reside in the municipalities of Chesilhurst Borough, Bellmawr Borough, Lindenwold Borough, Runnemede Borough, Brooklawn Borough, Stratford Borough, Magnolia Borough, Pennsauken Township, and Lawnside Borough, all of which have rates ranging from 5 – 10%. Chesilhurst and Bellmawr have the largest percentages of minors without insurance.

The vast majority of children (94.9%) in the County meet all immunization requirements; this percentage has remained relatively consistent since 2013, and slightly surpasses the state's percentage. For comparison, Cumberland County has the highest immunization percentage at 97%. Camden County has the sixth-highest frequency of reports of poor (late or absent) prenatal care, with 435 reports of late or insufficient prenatal care in 2018, a 17% increase (63 additional reports) from 2017. This puts the County in the bottom half of New Jersey counties when it comes to prenatal care.

In 2019, the County had 52,046 adults and children on Medicaid, the fifth-highest number of Medicaid participants of all 21 New Jersey counties. Furthermore, during a 2018 community health needs survey conducted by the Walter Rand Institute at Rutgers University, Camden, the top three resources community members reported needing were free/low cost medical care, free/low cost prescription drugs, and low-cost dental care. Thirty-two percent of these individuals reported not getting essential healthcare for themselves because of cost. One of this needs assessment's focus group participant echoed these concerns with, "Universal Health Care is needed!"

Focus group and interview participants made a distinction about accessibility and affordability of health care for residents of Camden City versus residents outside of the city. One participant noted that most people, in the city especially, do not have health care insurance (or enough coverage) and struggle to figure out what to do. They end up utilizing the Emergency Room, CamCare, or Urgent Care since they have extended hours and telehealth. Many participants also mentioned the cost of health care, even if one has health insurance, as being too expensive, especially for families who are barely making ends meet. According to the Economic Policy Institute, families in Camden County spend over \$1,000 per month on healthcare expenses. Interestingly, other participants mentioned about how getting to and from health care appointments is easier in Camden City given its more extensive transportation system, but not so much for outlying municipalities. One participant noted, "...if you're not on the main road and you miss the bus, that's it. You won't be getting there." The most noted barrier to this service as noted by survey respondents was transportation at slightly higher than 38%.

Summary: Nature of the Need

Asked to agree or disagree with the statement that there are enough healthcare services available in Camden County, nearly 50% of survey respondents designated "Disagree" or "Strongly Disagree", but nearly the same percentage (45%) answered "Agree" or "Strongly Agree," indicating a split in perception about this. Further, nearly 37% of respondents listed lack of awareness of services as a major barrier. There is a much greater gap between those that agree or disagree about whether anyone in the County is able to access these services with nearly 55% responding with "Disagree" or "Strongly Disagree", and only nearly 39% with "Agree" or "Strongly Agree". The same gap continues when looking at whether survey respondents felt that health care services are widely advertised and known in the County with 58.4% choosing "Disagree" or "Strongly Disagree", and only nearly 33% with "Agree" or "Strongly Agree".

Survey respondents rate the County better in terms of health care services taking race, age, gender, ethnicity, and more into account when providing services with just over 47% who "Agree" or "Strongly Agree," as well as regarding that services are of good quality (clean, well-supplied, etc.) with just over 51% indicating "Agree" or "Strongly Agree," and service staff being well-trained, knowledgeable, and providing good customer service with nearly 58% who "Agree" or "Strongly Agree". It is important to

note here, however, that the percentage of “Don’t Know” responses increased for these items to between nearly 18% and 20%.

Focus group and interview participants shared that most individuals seeking health care services go to the Camden County Board of Social Services, their employers, or Center for Family Services’ Insurance Navigators (help with enrollment in Medicaid and Affordable Care Act insurance). Participants repeatedly mentioned the need for more options for affordable health care and free insurance/services. Nearly 30% of survey respondents listed expense as a barrier to this service. As well, many focus group and interview participants also mentioned the need for additional health care insurance/supports as often times the care individuals do have is not enough for their health needs. Further, one focus group participant mentioned the need for better collaboration between the local health care providers to ensure more residents have access to the care they need. Some of the additional top barriers survey respondents noted for health care services are cultural barriers (26.5% and wait lists (24.3%).

Interview participants offered some recommendations for the County to better meet the health care needs of residents. Several participants noted that currently available health care services need to be promoted and advertised more, while others recommended advocating for an increase in these services. One participant specifically suggested establishing more health care practices in underserved areas in the County. This same participant also proposed that the County help with transportation to and from medical and health care services and offer more support to the County’s Federally Qualified Health Care Center(s). Lastly, there was also a call for the County to work with others to determine how to offer free health care for all residents.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	93	16 %	33 %	38 %	8 %	5 %	70 %
2. Anyone in the county is able to access services.	93	13 %	42 %	33 %	5%	6 %	70 %
3. Services are widely advertised and known by the county.	92	14 %	43 %	27 %	7 %	9 %	69 %
4. Services take race, age, gender, ethnicity and more into account.	92	9 %	24 %	39 %	9 %	20 %	69 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	93	3 %	26 %	43 %	9 %	19 %	70 %
6. Staff are well-trained, knowledgeable and provide good customer service.	93	9 %	15 %	49 %	10 %	17 %	70 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	33	25%
Services do not exist	133	21	16%
Transportation	133	52	39%
Cannot contact the service provider	133	22	17%
Too expensive	133	40	30%
Lack of awareness of service	133	50	38%
Cultural Barriers	133	36	27%
Services provided are one-size fits all, and don't meet individual needs	133	25	19%
Stigma Leads to Avoidance	133	25	19%
Eligibility Requirement (explain below)	133	24	18%
Other (explain below)	133	4	3%

Need Area: Community Safety

Status: General Need Area

Community safety is the ability to be and feel safe from crime or violence in one's community and public spaces. This need area seeks to assess the level to which residents throughout the county are safe from crime or violence and the existence of community services and supports to assist residents with being and feeling safe in their community (e.g., local police, DCF's Child Protection and Permanency, Family Success Centers, security companies, neighborhood watch, safe havens, hospitals, etc.)

In Camden County there was a total of 2,359 violent crimes in 2016 and the *violent crime* rate per 1,000 was 4.6 percent (NJ Department of Law and Public Safety, Division of NJ State Police, Uniform Crime Reports, Updated 8/15/19; see Data Profile for Additional Source Information). Of the *non-violent* crimes committed there was a total of 129 arson, 928 motor vehicle theft, 8,823 larceny and 2,591 burglary in Camden County (NJ Department of Law and Public Safety, Division of NJ State Police, Uniform Crime Report, Updated 8/15/19; see *Data Profile for Additional Source Information*).

Need Assessment Key Findings

Summary: Scope of the Need

Camden County's violent crime rate (which includes murder, rape, robbery, and aggravated assault) is the third-highest for New Jersey counties, with 4.6 violent crimes per 1,000 residents. Hunterdon has the lowest in the state, with 0.4 per 1,000 residents and Essex has the highest, at 5.7. The most common violent crime in Camden County is aggravated assault. Shootings and other gun violence are especially common in Camden City. Camden's non-violent crime rate (which includes burglary, larceny, motor vehicle theft, and arson) is 24.2 per 1,000 residents. The most common non-violent crime in Camden County is larceny.

In 2017, New Jersey had a homicide rate of 4.1 per 100,000 people, but Camden County had a rate of 7.6 per 100,000 people, the second highest in the state. While the 2017 rate is relatively high, it is down from a rate of 11 in 2013. The homicide rate for males, 15.6, is more than five times higher than the rate for females. The homicide rate for Black residents is 28.6, which is almost 16 times greater than the homicide rate for white, non-Hispanic residents. This is troubling and indicates that as a subgroup of the overall County population, Black residents, and male Black residents especially, are at a much greater risk of being victims of violence.

The Camden County juvenile arrest rate exceeds the state average, with 23 arrests per 1,000 youth, compared to the New Jersey average of 10 per 1,000 youth. The County's rate has been on the decline over the last five years, from 32 in 2012 to 23 in 2016; however, is the second highest in the state. Further, there were 366 youth admitted to detention in Camden County in 2019, as reported in the

New Jersey Juvenile Justice Commission JDAI Annual Report, which represents a 17.4% increase from 2018.

One cannot discuss crime in Camden County without segmenting out Camden City, which has been known as one of the most violent municipalities in the state. Most of Camden County's crime statistics are driven by the incidents that occur in Camden City. In 2013, when Camden City disbanded their police force and formed a County Metro division, there were a total of 57 homicides, which was down slightly from the year prior of 67. This accounted for 81.4% of the total of 70 homicides in the County. By 2017, the number of homicides in Camden City decreased to 25, which accounted for 68% of all County homicides. And in 2020, homicides in Camden City decreased by 2 to 23, which accounted for 74% of all County homicides. Camden City remains as having one of the highest violent crime rates in the state, including homicide, and juvenile arrests. On the more positive side, as recently reported by WHYY in early 2021, crime is down in Camden City to a level not seen in more than 50 years.

While only two key informant interviewees, 10% of all focus groups and interviews, identified community safety as a top Basic Need, the majority of survey respondents (54%) "Disagree" or "Strongly Disagree" that there are enough services available, which, coupled with the statistics above, is clearly indicative of a shortage of services to contribute to residents' feelings of safety in their communities.

Summary: Nature of the Need

When asked whether anyone in Camden County can access community safety services, 49% of survey respondents "Disagree" or "Strongly Disagree", while 43% "Agree" or "Strongly Agree", suggesting that the community is divided with regard to service accessibility. Residents offered mixed opinions regarding the quality and equity of the community safety services provided in the County; 43.7% "Disagree" or "Strongly Disagree" that services take race, age, and gender into account when delivering services, but 40% and 44% "Agree" or "Strongly Agree" that facilities providing community safety services are of good quality and that staff are well trained and provide good customer service, respectively. It is worth noting that the wording of the survey leaves some room for respondents to interpret what is meant by community safety services. Because the term "community safety" is not explicitly defined, it could mean access to police officers for some respondents or community based organizations or neighborhood associations for others.

Interviewees did not identify many providers or organizations for residents to seek when in need of community safety services in Camden County. One participant noted that residents will "personally go to [the] authorities," for the purpose of being "secretive." Another interviewee supported this, identifying local law enforcement as the primary point of contact for residents seeking community safety services. The dearth of identified service providers and points of contact is indicative of the larger

issue facing community safety services in the County; 65% of survey respondents “Disagree” or “Strongly Disagree” that services are widely advertised and known.

Participants identified several subgroups on whom the noted barriers have a greater impact, with minorities, LGBTQ +, and adults (aged 30 to 50) all being mentioned. Based on focus group responses, community policing is critical to increasing residents’ access to community safety services. Both key informant interviewees agreed that there is a need for the presence of officers in communities, especially when “law enforcement [can] keep residents aware of what is going on in the community,” with one noting that “County law enforcement must do more and more footwork,” and the other asking for “more foot patrol police.”

When it comes to barriers Camden County residents face when accessing community safety services, the responses from survey participants varied. Lack of awareness of services (35.3%) was the number one barrier to services by far, but cultural barriers (27.2%), one-size fits all services (24.3%), stigma (24.3%), and transportation (22.8%) were also identified as barriers. Key informant interviewees offered some potential barriers to accessing services that people experience, with one participant pointing out that “people [are] afraid to call to get things fixed. They won’t even advocate for themselves. [They are] afraid they might lose their subsidy or be called rude,” which contributes to the air of secrecy mentioned previously when seeking community safety services, including the support of local law enforcement. This same participant also noted that people “don’t like to ask for help,” or may be “scared.” While some of these barriers to access can be categorized as stigma, those pertaining to fear may be indicative of a larger issue, namely a distrust between residents and law enforcement. One potential solution to these barriers was suggested by a key informant who said, “Continuing to have law enforcement entities participate within the community setting brings better safety to the community, creates an engaging law enforcement within the community, [offers] better access to law enforcement, [and promotes] more community involvement and a better sense of safety.” Participants also indicated that the delivery of instant news and updates regarding community safety matters would be beneficial to increasing residents’ feelings of being in the loop, and called for law enforcement processes to be more transparent by making “it known to the public...how law enforcement operates, its structure, processes of arrests, bail, law enforcement responses, procedures,” and more, because, as another participant pointed out, “you (law enforcement) are our business. We employ you. Give us answers.”

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If Applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	90	8 %	46 %	33 %	6 %	8 %	68 %
2. Anyone in the county is able to access services.	90	6 %	43 %	39 %	4 %	8 %	68 %
3. Services are widely advertised and known by the county.	90	14 %	49 %	28 %	2 %	7 %	68 %
4. Services take race, age, gender, ethnicity and more into account.	90	9 %	33 %	34 %	4 %	19 %	68 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	90	4 %	21 %	39 %	2 %	33 %	68 %
6. Staff are well-trained, knowledgeable and provide good customer service.	90	8 %	21 %	43 %	2 %	26 %	68 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	18	14%
Services do not exist	133	22	17%
Transportation	133	31	23%
Cannot contact the service provider	133	15	11%
Too expensive	133	14	11%
Lack of awareness of service	133	48	36%
Cultural Barriers	133	37	28%
Services provided are one-size fits all, and don't meet individual needs	133	33	25%
Stigma Leads to Avoidance	133	33	25%
Eligibility Requirement (explain below)	133	13	10%
Other (explain below)	133	6	5%

Need Area: Employment and Career Services

Status: General Need Area

Employment is the condition of having paid work or an alternate ability to earn a living. This need area seeks to determine the employment status (e.g., full or part-time, permanent or temporary) of county residents and the employment opportunities within a county, as well as the existence of community services and supports to assist in ensuring employment (e.g., unemployment services, career development, County One-Stop Centers, Family Success Centers, County Board of Social Services, etc.)

In June 2019, the rate of unemployment in Camden County was 3.4%, which was higher than the New Jersey unemployment rate (3.3%). Due to the impacts of COVID-19, unemployment increased by an average of 10 percentage points across the entire Philadelphia-Camden-Wilmington Metropolitan area. According to the New Jersey Department of Labor and Workforce Development, the unemployment rate in Camden County significantly increased from 3.8% in June 2019 to 15.5% by June 2020. This parallels the increase in unemployment impacting the state of New Jersey (16.6% in June 2020). The rate was likely higher in New Jersey than the United States as a whole (11.1% in June 2020) because New Jersey was one of the first states in the U.S. hit by the pandemic.

Need Assessment Key Findings

Summary: Scope of the Need

As of 2017, the median household annual income in Camden County was \$65,037. This is the eighth lowest median household annual income in New Jersey and, while being higher than the national average (\$57,562), it is lower than the state average of \$76,475. The median household annual income in Camden County has not noticeably increased (approximately increased by 5%) since 2013, when the median household income for County residents was \$61,683. This is significantly different than the change of median annual income in the United States, which increased by approximately 15% between 2013 and 2017. The Camden County municipalities with the lowest median household income in 2017 were Camden City (\$26,105), Lindenwold (\$41,346), Hi-Nella (\$45,132), Woodlynne (\$45,201), and Audubon Park (\$49,250). Camden City is a clear outlier with a median household income that is nearly a third of the average Camden County median household income .

The difference in pay between male and female wage-earners in Camden County is stark. The median annual wage of a man in Camden County is \$55,880, while the median annual wage of a female worker is \$46,597, a difference of over \$9,000. This means that men in Camden County make nearly 20% more than women. This is in spite of the fact that women in New Jersey have been attaining education and degrees at a higher rate than men across all age groups in the working population. This distinct difference in wages parallels the gender wage gap in both New Jersey and the United States at large. Considering women are an incredibly important part of the economy, the County should consider this to be a serious issue to be addressed. Another measure of income inequality is the GINI index, which ranges from 0 (perfect equality where everyone receives an equal share) to 1 (perfect inequality where

one recipient or group of recipients receives all the income). The GINI rating for the United States was 48 in 2018, which is higher than the average global rating. According to the New Jersey Department of Health, the rates of unequal wage distribution in New Jersey were similar, with a GINI rating at 49 in 2018. Camden County also had a GINI rating of 48 this same year. These numbers signify a serious level of income equality in Camden County, in New Jersey, and in the United States at large, which call for policy changes that may acknowledge and address them.

Four of 20 focus groups and interviews (20%) identified employment and career services as a top Basic Need. While that may not reflect an overwhelming urgency to address employment and career services, the statistics support the still-prevalent need for employment and/or career support. In addition to the inequalities experienced by women and the general income inequality noted through the County's GINI rating, focus group and interview participants indicated that there are other subgroups in Camden County that experience noticeable difficulties when it comes to employment, namely people of color. Participants also indicated that individuals without access to transportation or internet connected devices face challenges applying for and following up with jobs. Additionally, job availability in Camden County is noted as a significant barrier to those seeking employment. Other challenges people face include childcare needs, lack of working papers, and a demand for better job training and/or preparation.

Summary: Nature of the Need

More than half of survey respondents "Disagree" or "Strongly Disagree" that there are enough services in Camden County to address employment and career services. When asked if anyone in Camden County could access these services, 50% indicated they "Disagree" or "Strongly Disagree" while only 33% reported "Agree" or "Strongly Agree". The One Stop Career Center in the Camden County Human Services building was mentioned in focus groups and interviews as a useful resource for residents. Local colleges, community centers, and the Center for Family Services were also mentioned as providing important services to job-seekers, specifically internet access and assistance with job seeking and applications. These supports are vital because while access to technology was not identified as a top barrier to individuals receiving assistance, as one focus group participant put it, "There may be no Internet or it's too expensive and they can't afford it. The other problem is that people may not be computer literate. They may have a computer, have Internet and don't know how to use it. Then they're just stuck." The fact that most job postings have moved online also contributes to the importance of reliable internet access for job-seekers. When asked about the quality of services available in Camden County, 43% of survey respondents "Agree" or "Strongly Agree" that the employment and career services are of good quality and 47% "Agree" or "Strongly Agree" that staff are knowledgeable and well trained.

The top three barriers survey respondents report are transportation (45%), lack of awareness of services (36%), and cultural barriers (24%). Transportation is one of the dominant and longstanding barriers for residents throughout the needs assessment. This has a huge impact on employment because without access to quality public transportation or other dependable transportation like a car, many County residents are unable to reliably travel to job sites, including interviews, or travel to the office locations of County career services. When considering transportation in Camden County, one focus group participant said, “For some people, transportation and where they live is a barrier. This is usually true for poor people. If you live in an area between the Black Horse Pike or White Horse Pike, it’s hard to get to services in those in between municipalities. Many of the services used to be located in the City or places you could get to along one of those two routes. Now, PSE&G moved their offices to the Waterfront and its further out for people without any transportation... Now the WIB [Workforce Investment Board] which has...unemployment services and even the Board of Social Services are moving way down to Lindenwold. You can get there by bus – or a couple of buses – but then you get off and still have to walk like 10 miles to get to the county offices.” Another respondent shared, “The services are ‘all clumped in one area’. There are no barriers if you’re in the City of Camden. But there are barriers in the entire County that make it harder to access things if you have to go into the City.” It’s clear that transportation functions as a large barrier for employment, including trying to seek unemployment services, pursuing a job application or hiring process, and having reliable transportation to work. During focus groups and interviews, the eligibility requirements for employment and career services came up frequently. Eligibility criterion limits the services available to individuals needing employment assistance, in particular for veterans or people who are housing-insecure.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	87	13 %	43 %	26 %	2 %	16 %	65 %
2. Anyone in the county is able to access services.	87	10 %	39 %	30 %	5 %	16 %	65 %
3. Services are widely advertised and known by the county.	86	13 %	44 %	28 %	2 %	13 %	65 %
4. Services take race, age, gender, ethnicity and more into account.	87	10 %	24 %	33 %	5 %	28 %	65 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	87	8 %	20 %	39 %	5 %	29 %	65 %
6. Staff are well-trained, knowledgeable and provide good customer service.	87	8 %	15 %	41 %	6 %	30 %	65 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	28	21%
Services do not exist	133	19	14%
Transportation	133	61	46%
Cannot contact the service provider	133	23	17%
Too expensive	133	15	11%
Lack of awareness of service	133	49	37%
Cultural Barriers	133	33	25%
Services provided are one-size fits all, and don't meet individual needs	133	31	23%
Stigma Leads to Avoidance	133	31	23%
Eligibility Requirement (explain below)	133	16	12%
Other (explain below)	133	5	4%

Need Area: CHILD CARE**Status: General Need Area**

Child care services include agencies that provide care and supervision to children; as well as, before- and after- school care programs. This need area seeks to assess the level to which residents throughout the county need child care and before and after school care and the existence of community services and supports that address the need for child care (e.g., licensed daycares providers, subsidized and unsubsidized childcare, Child Care Resource and Referral Agencies, Boys & Girls Clubs, YMCAs, Family Success Centers, County Board of Social Services, etc.)

In Camden County in 2017 the median monthly center-based child care cost for an infant was greater than the median monthly cost for NJ. The median monthly center-based child care cost for a toddler was greater than the median monthly cost for NJ. Median monthly center-based child care cost child care cost for Pre-K in Camden County was greater than the median monthly cost for NJ.

Need Assessment Key Findings**Summary: Scope of the Need**

Many families in Camden County struggle with childcare. According to the County data profile provided by the state, child care is the largest monthly expense for families in Camden County. Every month, (for a two parent, two child family) \$1,386 is spent to care for children, which exceeds the amount of money spent for any other cost of living, including transportation, housing, health care, other necessities, taxes, and food costs. At \$1,040 per month, the cost of infant care in Camden County is only four dollars less than the state average. For toddler care, the County is in a similar position, with the median cost of \$909 per month being only \$43 less than the state average, while for pre-kindergarten aged children, County residents pay a median of \$737 per month, almost \$100 less than the state average. In a County where the median household income is significantly less than the cost of living, these high expenses can pose serious issues for families; for some families in Camden City, a year of infant care could amount to almost half of a family's yearly household income.

Participants brought up child care services during 9 of the 20 focus groups and key informant interviews, and 7 focus group and interview participants selected child care as one of their top Service Needs. This is hardly surprising, as there are 116,574 children under the age of 18 living in Camden County, and over 30% of these children are less than six years old, which needs assessment participants think tends to be the age range where children require the most supervision.

When discussing families that are most in need of child care services, focus group participants and interviewees reported that low income families and minority families were especially disadvantaged in this service area. One participant noted that "it is hard for people with language barriers...to get services," and multiple focus groups and interviewees agreed that "people of color, other minorities,

and the LGBTQ population experience barriers at higher rates.” Some of the recommendations offered to mitigate barriers to accessing services included increasing the resources allotted to child care providers to help reduce costs, and establishing “daycares that [are] open all day,” or daycares where “the hours of operation can be changed...to better accommodate working parents.”

Summary: Nature of the Need

When asked if there are enough child care services in Camden County, 54% of survey respondents “Disagree” or “Strongly Disagree”. Respondents expressed similar feelings about the accessibility of child care services in the County, with 57% saying they “Disagree” or “Strongly Disagree” that anyone can access services. Cost was the most frequently identified barrier for families trying to access child care, with 42% of survey respondents indicating that child care is too expensive. Many of the focus group participants and interviewees agreed that cost is a serious barrier for families looking for child care, and that caregivers often “want their child in a child care center that has a good reputation, but most times that comes at a high price.”

It was noted that child care accessibility can have an impact on other aspects of caregivers’ lives, especially those relating to their careers and employment and their ability to access other services. One participant felt that “more is needed [from the Department of Children and Families] to address where to leave children, and leave them safely, while parents are in work or school.” Another participant pointed out that “if a person can’t get child care, they’re not going to be able to get to an appointment, even if it’s close by,” which may prevent already-under-resourced and underserved caregivers from receiving additional supports.

Participants in the children’s services focus group, which asked questions specifically pertaining to the umbrella of services for young children in the County, indicated that caregivers typically “rely on their children’s educational providers to refer and guide them in the direction of services.” It was also noted that friends and family members who have experience navigating services for children in the County may become points of contact for caregivers. Barriers that were mentioned include trust in providers and previous negative interactions with providers and a reduction in the quality of service delivery as a result of “organizations not working together or being collaborative.” Similar to child care services, participants felt that the umbrella of young children’s services are more difficult to access for minorities, low income families, and women. One focus group participant, who happened to be a service provider, shared an anecdote about the way in which they witnessed a medical professional treat a client. This participant mentioned that “the medical professional adjusted their tone and delivery when they realized the client was not alone and that someone was there to be of support to

her.” It is clear from this anecdote that the County must work to combat inequity in the quality of services provided to its residents.

While 44% and 47% of respondents “Agree” or “Strongly Agree” that child care facilities in Camden County are of good quality and staff provide good customer service, respectively, 53% of respondents “Disagree” or “Strongly Disagree” that services are widely known and advertised. This, coupled with the sentiments that there are not enough services and that services are difficult to access, suggests that the County might start to increase accessibility by increasing the awareness of available child care services for both caregivers and providers, in order to provide better referrals. This, in conjunction with expanding services throughout the County and reducing the cost of child care services, should improve residents’ overall access to these services.

ⁱ Please note from the Methodology Section, Camden County added Children’s Services specifically defined as children’s services for ages 0-8 (included a variety of services, such as mental/behavioral development, school, intellectual and developmental disabilities, and childcare) to the list of Needs about which to focus group and interview.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	92	18 %	36 %	27 %	3 %	15 %	69 %
2. Anyone in the county is able to access services.	92	15 %	41 %	32 %	1 %	11 %	69 %
3. Services are widely advertised and known by the county.	92	11 %	42 %	29 %	2 %	15 %	69 %
4. Services take race, age, gender, ethnicity and more into account.	92	7 %	18 %	45 %	4 %	26 %	69 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	91	4 %	24 %	41 %	4 %	26 %	68 %
6. Staff are well-trained, knowledgeable and provide good customer service.	92	7 %	20 %	42 %	5 %	26 %	69 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	41	31%
Services do not exist	133	24	18%
Transportation	133	49	37%
Cannot contact the service provider	133	12	9%
Too expensive	133	57	43%
Lack of awareness of service	133	38	29%
Cultural Barriers	133	33	25%
Services provided are one-size fits all, and don't meet individual needs	133	20	15%
Stigma Leads to Avoidance	133	20	15%
Eligibility Requirement (explain below)	133	31	23%
Other (explain below)	133	8	6%

PART 3

Results: Specialized Service Needs



Need Area: Services for Families Caring for a Child of a Relative

Status: General Need Area

Kinship services are supports for caregivers who have taken on the responsibility of caring for kin, including financial assistance, support groups, navigation of government benefits and assistance, and more. This need area seeks to assess the level to which residents require kinship services and the existence of community services and supports to support caregivers' ability to care for their kin (e.g., Kinship Navigator Program, DCF's Division of Child Protection and Permanency, Family Success Centers, County Board of Social Services, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

In Camden County, there are 116,574 children under 18 years of age – 33% are under 6 years old, 33% are between 6 and 11, and 34% are between 12 and 17. In 2018, a total of 48,461 children were being served by New Jersey Department of Child Permanency & Protection (DPC&P). Of all the children served by DPC&P, Camden County accounts for 11% of them, or 5,459 children – with 88% of children served by DPC&P remaining in-home care placements, and 12% (658) removed from the home and living in out-of-home care placements. Camden County also has the second highest number of children served by DPC&P, next to Essex County (5,984). The number of children in DPC&P out-of-home placement (658), through a kin or non-kin placement has fluctuated from 2011 to 2018. In 2018, 43% (280) of children were in kin out-of-home placements with family members, and 57% of children (378) were in non-kin out-of-home placements, which include placements with non-kinship resource families, congregate care, and independent living.

Community members recognize the challenge of caring for additional children, as individuals are trying to juggle family and work obligations for their own family, on top of the additional responsibilities of a child that may be in a different school or have a different schedule than their other children. Childcare also remains a concern as many of these caregivers work and cannot find or afford additional childcare. In Camden County, the median cost for monthly child care for infants is \$1,040, \$909 for toddlers, and \$737 for Pre-K. As the median household income in the County is \$65,037, and the annual cost of living is \$87,509, the typical family is already under a great financial strain, as the cost of living exceeds their household income by nearly 33%. Worse, for families in Camden City, the median household income is only \$26,105, more than three times less than the cost of living for the County. This incredible financial strain can easily be exacerbated by a year's worth of child care costs for an infant, amounting to over \$12,000, or almost half of a family's household income in Camden City.

Focus groups and interviews showed that some limitations for many caring for another child include an inability to access medical care for these additional children, kinship care resources "running out" and placing additional financial strain on caregivers, and the challenges of being unable to make permanent or important decisions without having legal custody of the child. These focus groups and interviews also highlighted certain subgroups within Camden County that have a greater need for

kinship services. The most common are older family members, typically grandparents, that are caring for their children's children and have to "figure out everything all over again." Another cited subgroup is composed of siblings that are caring for younger siblings, who may be unable to bear the financial burden of providing adequate care, especially in the event that resources become unavailable. Conversations around kinship care revealed that most individuals access these services through DCP&P or another adoption agency, or through Kinship support groups. One key informant interviewee shared that people rely on the schools to see what resources may be available.

Summary: Nature of the Need

In considering barriers to accessing services for families caring for a child of a relative, 43% of survey respondents felt that there was a lack of awareness of services. Many respondents shared that the services are not widely advertised and known by the County (45%). One focus group participant suggested that the County create more social media ads to increase the awareness of services that already are available. Another suggested creating a central hub where residents can go for help, "...a hotline maybe." Suggestions were also made to use informal community supports to share information, such as Family Success Centers, local community agencies, churches, libraries, and schools. Other barriers identified were evenly split among survey respondents and include that services do not exist (18%), transportation (21%), cannot contact the service provider (17%), cultural barriers (20%), and that services provided are one-size fits all and do not meet individual needs (15%). In one interview, a community member shared that most people do not know there are any services that could help them.

While the need for kinship services certainly exists, multiple focus group and key informant interview participants expressed the stigma around reaching out for assistance. Many individuals caring for children of relatives try to handle and care for the additional child/children on their own. "They may not go to seek help because they have past issues with DCP&P themselves, their home may not be big enough, or they don't have the finances to take care of the child correctly, but would much rather the child stay with family." Another focus group participant expressed that there is often hesitancy to seek help because of fear of the child being taken away. One key informant interviewee shared a criticism of kinship services, that people do not understand why they "...can't just take the family member(s) in..." and care for them without any additional funding or services. In reality, many families are already strapped for financial, emotional, and physical resources. In 2017, 15.5% of Camden County families with children under the age of 18 were living in poverty. In Camden City, 43.5% of families with children under the age of 18 were living in poverty. The four other municipalities with the highest poverty rates among families in Camden County were 26% in Bellmawr Borough, 26% in Woodlynne Borough, 25% in Lawnside Borough, and 23% in Mount Ephraim. It is clear that the need for supports for children living in poverty is especially prevalent in Camden City, which has more than twice as many children living in poverty than the next-highest municipality in the County and almost three times as many children living in poverty than the County average as a whole.

While 55% of survey respondents “Disagree” or “Strongly Disagree” that there are enough services available in the County to help those who have needs to help care for the child of a relative, only 30% “Agree” or “Strongly Agree” that there are enough services to help those caring for the child of a relative. In a similar split, 48% of survey respondents “Disagree” or “Strongly Disagree” that anyone in Camden County is able to access these services, while 32% “Agree” or “Strongly Agree”, and 19% said they “Don’t Know”. For those residents that do seek assistance in caring for a relative child, availability of services remains a concern. Focus group and key informant interview participants shared there are limited resources for families and grandparents to assist family members who are trying to help with raising the children, and these resources seem to be specifically limited because those individuals offering help are family members. Suggestions for the creation and expansion of phone or virtual support groups were also made. Interviews further revealed that there is a lack of accountability among services providers and programs that are created to help families. Nevertheless, 46% of respondents “Agree” or “Strongly Agree” that staff are well-trained and knowledgeable and provide good customer service, and only 21% “Disagree” or “Strongly Disagree”. More than 40% of survey respondents felt that kinship services take race, age, gender, ethnicity, and more into account, while 29% “Disagree” or “Strongly Disagree”, suggesting that services may not be tailored to the specific needs of certain groups of individuals seeking these services.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	90	14 %	40 %	28 %	2 %	16 %	68 %
2. Anyone in the county is able to access services.	90	13 %	36%	30 %	2 %	19 %	68 %
3. Services are widely advertised and known by the county.	90	17 %	46 %	18 %	3 %	17 %	68 %
4. Services take race, age, gender, ethnicity and more into account.	90	10 %	20 %	36 %	4 %	30 %	68 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	90	7 %	13 %	38 %	4 %	38 %	68 %
6. Staff are well-trained, knowledgeable and provide good customer service.	90	9 %	12 %	43 %	3 %	32 %	68 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	21	16%
Services do not exist	133	25	19%
Transportation	133	28	21%
Cannot contact the service provider	133	23	17%
Too expensive	133	10	8%
Lack of awareness of service	133	59	44%
Cultural Barriers	133	27	20%
Services provided are one-size fits all, and don't meet individual needs	133	21	16%
Stigma Leads to Avoidance	133	21	16%
Eligibility Requirement (explain below)	133	16	12%
Other (explain below)	133	3	2%

Need Area: Behavioral/Mental Health Services for Children

Status: Prioritized Need Area

Child behavioral/mental health services are services designed to assess, address and support the emotional, psychological and social well-being of children. This need area seeks to assess the level to which children throughout the county have behavioral/mental health disorders, their ability to cope and function, and the existence of community services and supports to address children's behavioral/mental health needs (e.g., hospitals, in/out-patient therapy, individualized counseling, medication management, PerformCare, DCF's Children's System of Care, Family Support Organizations, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

Behavioral and mental health services for children in Camden County is determined to be a Prioritized Need based on responses from community members and the Human Services Advisory Council. This decision is well supported by data. It was mentioned in 8 out of 20 (40%) of the focus groups and interviews conducted and was the most selected top Service Need by survey respondents. These are not just perceptions; Camden County residents have the highest rates of mental health distress in the state. While the average rate of mental health distress for the state is 12.1%, in Camden County 17.4% of residents reported having 14 or more "not good" mental health days out of the past 30. This is the highest rate in the state, and represents an increasing trend in the number of poor mental health days from the previous years. From 2013 to 2014, Camden County's rate increased roughly 2 percentage points, from 11.9% to 14%, remained constant for a year, and then increased by 1 percentage point in 2016, and another 2 percentage points (up to 17.4%) in 2017. Considering the ongoing material, emotional, and psychological impact of the novel coronavirus on residents' lives, it is being predicted that mental health services will be in higher demand in the coming months and years. Black residents reported higher rates of mental health distress, at 24%, than Hispanic or white residents, at 21% and 18%, respectively. Men in Camden County reported experiencing more mental health distress than women. Twenty-one percent of men in the County reported experiencing health distress as compared to roughly 18% of women.

When it comes to diagnosed depression, Camden County has one of the highest rates in the state. Its rate of 19.5% is second only to Mercer County, and is nearly 5 percentage points greater than the average for New Jersey (14.8%). Further, this rate signifies the reversal of a previous downward trend from 2013 to 2016, from 19.4% in 2013 to 17.7% in 2016. Again, there is a disparity when looking at gender, though in the opposite direction; 11.3% of men in Camden County are diagnosed with depression, whereas 28.1% of women suffer from the same issue. Some race differences emerge for depression diagnoses. White residents of Camden County report being diagnosed with depression

almost a full 5 percentage points more than Black and Hispanic. During focus groups, multiple individuals pointed out that minority youth and children of immigrants are at a disadvantage when it comes to accessing mental and behavioral health services. Youth members of the LGBT+ community were also identified as an impacted subgroup. One key informant noted that, “there is a lack of LGBTQ community services that are accessible, affordable, housing affirming, welcoming, safe spaces for LGBTQ youth,” while another pointed out that there are “very few services for children - [they are] even more limited if the family wants a minority provider or needs a Spanish- or other-language-speaking provider.”

According to data provided by the state, there are 40 different services available in Camden County that can help with mental health distress. Of particular importance are the 5 supportive housing locations, 3 self-help centers, 6 residential service facilities, the integrated case management service, and 3 intensive outpatient treatment and support service centers. Despite the presence of these services, the vast majority of survey respondents did not agree that Camden County has enough mental and behavioral services for children. When asked about the availability of these supports, 60% of survey respondents “Disagree” or “Strongly Disagree” with the statement that there are enough services. Children were mentioned several times in the focus groups and interviews as a group that faced additional difficulty receiving services. According to not only residents, but service providers as well, there is a serious lack of mental and behavioral services for children. Focus group and interview participants also noted that the mental development of children under the age of five tends to be overlooked by caregivers. Overall, participants felt that the services currently provided “seem to be available for those who get involved with [the] court system,” and some noted that, “most people rely on their children’s education provider to refer and guide them in the direction of services,” which suggests that one impact of remote education may be a reduction in the amount and quality of interactions that caregivers have with their children’s teachers and school staff.

Summary: Nature of the Need

When considering the nature of the need for behavioral and mental health services for children in Camden County, the data indicates that there are some gaps in services that the County could work to address in the coming years. Sixty percent of survey respondents indicated that there are not enough behavioral and mental health services for young people in Camden County. When asked if they agree with the statement that behavioral and mental health services for young people are accessible to County residents, 47% of respondents “Disagree” or “Strongly Disagree” while a close 42% “Agree” or “Strongly Agree”. Lack of awareness is the most frequently identified barrier from survey respondents, which supports the fact that 62% of survey respondents did not think that Camden County does a good job advertising its behavioral and mental health services for children.

During focus groups and interviews, community members and service providers alike reported a lack of behavioral and mental health services for children and a lack of knowledge about the services that

do exist as major barriers. Participants frequently cited a child's school as the primary source for caregivers to identify available services and resources, and typically relied on schools to recognize their children's behavioral issues. While school districts could be a useful resource for children to get help, the transition to virtual schooling has left many children without the resources they would historically be able to access. Furthermore, participants noted that, "doing services virtually is not working for everyone." The relative dearth of service referrals from schools, in conjunction with a lack of services for children who are not engaged with the justice system, further exacerbate the issue of residents feeling that children who are in need of behavioral and mental health services "have to get a charge to get services."

PerformCare was mentioned by some focus groups and interview participants as a resource for youth, but one participant shared a particular jarring anecdote about a "22-year-old [who] was made guardian over her younger siblings when the parent died. [She] was told...that [she] had to go to PerformCare to request services for her sibling. She is being treated like an adult, having to figure out an adult system with no help or guidance." While experiences like this may not be common, as can be inferred by the survey respondents who generally felt that the services which do exist in Camden County for young people dealing with behavioral or mental health issues are of good quality, it is still concerning that some youth may be faced with situations like this. Among survey respondents, 42% "Agree" or "Strongly Agree" that services take race and ethnicity into account, and 48% and 53% "Agree" or "Strongly Agree" that the facilities which provide services are of good quality and that staff are well trained, respectively. Focus group participants and interviewees were more critical of staff in the County, emphasizing the importance of maintaining a "non-judgemental perspective when interacting with clients." Another participant noted that part of the issue is that "some of the CSOC workers are fresh out of school, not fully trained, and poorly paid. This leads to families getting [the] 'luck of the draw' with their worker."

After lack of awareness of services, the two largest barriers reported by survey respondents were transportation and wait lists. One focus group/interview participant shared that wait lists for youth service providers can be "months long to even get in for an appointment." Other participants highlighted the plight of residents in municipalities such as Winslow Township which are farther away from Camden City, noting that, "if you don't have a car or transportation, it's impossible to get to the City or to services." Increasing the number of service providers and the advertisement of their services, especially if these providers are strategically located to reduce the transportation barrier, would help to address all of the barriers to accessing service identified by focus group/interview participants and survey respondents.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

Based on its status as a Prioritized Need, behavioral and mental health services for children should be considered an urgent need in Camden County. In considering the long term impact of the novel coronavirus on children and their social, emotional, and behavioral development, the need is even more apparent. Families are struggling economically and are more likely to be disconnected from the previously-reliable points of contact for identifying and connecting their children to resources, such as school systems, which does not bode well for the health of children with these kinds of needs. It is not difficult to imagine that demand for these services will increase over the next few years.

When asked whether the County has enough programs and resources to meet the behavioral and mental health needs of children in the County, responses varied. While some interviewees felt that the current organizations and services in place would be able to support the behavioral and mental health of County youth, others were less optimistic, suggesting that the County will not be able to meet the needs of residents when “every year the level of service goes up, but the funding does not go up too.” Participants were far less divided on another topic; nearly every participant was in agreement about the need for the County to facilitate collaboration between service providers, organizations, and community groups, emphasizing the need for the County to “form partnerships to decrease barriers,” and ensure that “entities...know each other [so as] to not reinvent the wheel.” The prevailing view of the way that the County currently operates is that “everyone knows a piece of what is out there, but nobody coordinates or centralizes anything.” It is clear that there is some capacity within the County to make improvements to the coordination of the provision of its services, which would help reduce barriers to access, but also that additional support from the state would be helpful in addressing these needs long term through the establishment of additional and more optimally-located service providers, especially as the repercussions of the educational and lifestyle changes associated with the coronavirus emerge among youth in the County.

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

A few trends emerged throughout the needs assessment. Camden County residents and service providers maintain that the County simply does not do enough to make their services known to the public. The survey question about whether or not these services are well known received 65% of respondents noting “Disagree” and “Strongly Disagree”. Focus group and key informant interview participants often noted that County residents do not know where to go or who to contact to get behavioral and mental health assistance for their children.

Cultural barriers were also identified as one of the top four barriers by survey respondents, but were not mentioned during the focus groups and interviews. This is likely due to the fact that the service providers and community leaders participating in the needs assessment described the stigma around

receiving these kinds of services as all-encompassing and not limited to any specific group of people. Survey respondents, unable to expand on their answers, may have felt similarly to focus group and key informant interview participants, but selected cultural barriers as a catch-all for the stigma surrounding behavioral and mental health services. It was also clear from the information collected that individuals in Camden County feel that if these types of services were advertised more widely, there would be less stigma associated with them. Regardless of a consensus about the presence or absence of cultural barriers, there is a clear impact of stigma on whether people decide to seek behavioral and mental health help; focus group/interview participants indicated that “parents experience shame and stigma when their child needs help,” and that “parents are in denial about [their] children’s behavior.” Increasing the amount of information available to caregivers about behavioral and mental health services and normalizing seeking and receiving behavioral and mental health services would be helpful for improving access for children in the County.

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	91	19 %	41 %	30 %	1 %	10 %	68 %
2. Anyone in the county is able to access services.	91	12 %	35 %	36 %	5 %	11 %	68 %
3. Services are widely advertised and known by the county.	91	20 %	42 %	25 %	2 %	11 %	68 %
4. Services take race, age, gender, ethnicity and more into account.	90	9 %	24 %	37 %	6 %	24 %	68 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	91	7 %	12 %	41 %	8 %	33 %	68 %
6. Staff are well-trained, knowledgeable and provide good customer service.	91	5 %	11 %	44 %	10 %	30 %	68 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	43	32%
Services do not exist	133	28	21%
Transportation	133	46	35%
Cannot contact the service provider	133	24	18%
Too expensive	133	24	18%
Lack of awareness of service	133	59	44%
Cultural Barriers	133	38	29%
Services provided are one-size fits all, and don't meet individual needs	133	28	21%
Stigma Leads to Avoidance	133	28	21%
Eligibility Requirement (explain below)	133	13	10%
Other (explain below)	133	6	5%

Need Area: Behavioral/Mental Health Services for Adults

Status: Prioritized Need Area

Adult behavioral/mental health services include services designed to assess, address and support the emotional, psychological and social well-being of adults. This need area seeks to assess the level to which adult residents throughout the county have behavioral/mental health disorders, their ability to function and the existence of community services and supports to address adult behavioral/mental health needs (e.g., hospitals, in/out-patient therapy, individualized counseling, medication management, Statewide Parent Advocacy Network, Division of Mental Health and Addiction Services, PerformCare, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

Behavioral and mental health services for adults in Camden County is determined to be a Prioritized Need based on responses from community members and the Human Services Advisory Council. This decision is well supported by data. It was mentioned in 12 out of 20 (60%) of the focus groups and interviews conducted and is the second-most important Service Need identified by survey respondents. These are not just perceptions. Camden County residents have the highest rates of mental health distress in the state. While the average rate of mental health distress for the state is 12.1%, in Camden County 17.4% of residents reported having 14 or more “not good” mental health days out of the past 30. This also represents an increasing trend in the County for the number of poor mental health days from the previous years. From 2013 to 2014, Camden County’s rate increased roughly 2 percentage points, from 11.9% to 14%, remained constant for a year, and then increased by 1 percentage point in 2016, and another 2 percentage points (up to 17.4%) in 2017. Considering the ongoing material, emotional, and psychological impact of the novel coronavirus on residents’ lives, it is being predicted that mental health services will be in higher demand in the coming months and years. Black residents reported higher rates of mental health distress, at 24%, than Hispanic or white residents, at 21% and 18%, respectively. Men in Camden County reported experiencing more mental health distress than women. Twenty-one percent of men in the County reported experiencing mental health distress as compared to roughly 18% of women.

When it comes to diagnosed depression, Camden County has one of the highest rates in the state. Its rate of 19.5% is second only to Mercer County, and is nearly 5 percentage points greater than the average for New Jersey (14.8%). Further, this rate signifies the reversal of a previous downward trend from 2013 to 2016, from 19.4% in 2013 to 17.7% in 2016. Again, there is a disparity when looking at gender, though in the opposite direction; 11.3% of men in Camden County are diagnosed with depression, whereas 28.1% of women suffer from the same issue. Some race differences emerge for depression diagnoses as well. White residents of Camden County report being diagnosed with

depression almost a full 5 percentage points more than Black and Hispanic residents. During focus groups, multiple individuals pointed out that minority individuals are at a disadvantage when it comes to accessing mental and behavioral health services. Members of the LGBT+ community also are identified as especially impacted by focus group and interview participants.

According to data provided by the state, there are 40 different services available in Camden County that can help with mental health distress. Of particular importance are the 5 supportive housing locations, 3 self-help centers, 6 residential service facilities, the integrated case management service, and 3 intensive outpatient treatment and support service centers. Despite the presence of these services, the vast majority of survey respondents did not agree that Camden County has enough services. When asked about the availability of these supports, 59% of respondents “Disagree” or “Strongly Disagree” with the statement that there are enough services.

Summary: Nature of the Need

According to survey respondents, behavioral and mental health services for adults in Camden County are not accessible. When prompted to “Agree” or “Disagree” with the statement that anyone in the County could access services, only 30% of individuals responded that they “Agree” or “Strongly Agree”, and 57% indicated that they “Disagree” or “Strongly Disagree”. Many focus group and key informant interview participants reported that, while there are behavioral and mental health services available in the County, there are serious barriers that stop individuals from accessing services related to their mental or behavioral health.

Asked about how widely advertised and known these services are, survey respondents overwhelmingly found the amount of outreach lacking, with 65% indicating that the behavioral and mental health services in Camden County are not well known. When asked where people currently turn to meet their behavioral and mental health needs, focus group participants noted crisis centers or the 2-1-1 state hotline, various local social services, and hospitals. One participant indicated that for some people, the “easiest access [to behavioral and mental health services] is by going to the ER or doctor’s office.” Other participants mentioned that people are likely to ignore their issues until they reach a breaking point or self-medicate instead of reaching out for help. Some participants suggested that this was likely due to the stigma surrounding behavioral and mental health treatment, and that efforts to improve public awareness and knowledge about mental health needs would help to reduce this stigma and ostensibly improve access to services in the County.

When asked about the quality of behavioral and mental health services in Camden County, survey respondents mostly answered positively. More people “Agree” or “Strongly Agree” with statements about services being clean and well-staffed, and having knowledgeable staff, with 43% and 50%, respectively, but respondents were more ambivalent about the cultural competency and equity of services, as 40% indicated that they “Disagree” or “Strongly Disagree” and 38% indicated that they

“Agree” or “Strongly Agree” that services take race, age, gender, ethnicity and more into account. Focus group and key informant interview participants corroborated these perceptions, with one focus group participant noting that “many places like the welfare office are not easy to access, and the workers are not welcoming.”

The barriers that were mentioned most frequently by survey respondents, focus group participants, and interviewees are lack of awareness of services, services do not exist, transportation, wait lists, and stigma. One focus group participant, discussing the accessibility of services, noted that “for adults, getting services is a struggle. It’s horrible what we provide and call a mental health system. An adult can call or go to crisis. There are no partial day programs,” while another participant indicated that “there is a lack in the community of non-emergency behavioral and mental health services.” The absence or shortage of accessible services, compounded with the stigma surrounding them and the long wait lists to access those which are available, prevents adults in the County from receiving mental and behavioral health services until they are facing an emergency or crisis.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

Based on the responses given through the survey, focus groups, and interviews, there is a clear need to expand the availability and advertisement around behavioral and mental health services in Camden County. Considering the impact of the novel coronavirus on the way services are provided and people's ability and capacity to access these services, it is likely that mental and behavioral health services will become even more important in the next three years.

While the community does have access to a limited amount of services, participants of the focus groups and interviews feel that there are barely enough programs and services to meet the needs of Camden County residents. When asked whether it was feasible for the County to address some of the barriers to accessing behavioral and mental health services, most participants felt that the County would not be able to effectively address these needs with the resources currently at its disposal. Several participants felt that some of the barriers, especially the stigma surrounding behavioral and mental health for adults, were problems at the national level, and it was unreasonable to expect that they could be effectively addressed at the County level. Other participants felt that the impact of some of these barriers could be mitigated at the County level, most especially by increasing its advertisement of currently available services and increasing the public's awareness and knowledge of behavioral and mental health services.

Focus group and interview participants felt it would be helpful for the state to provide additional resources to help address some of the noted barriers. Participants felt that with increased funding, more collaboration between organizations, and more direct service providers and education programs, the County could improve access to behavioral and mental health providers. Transportation was also noted as an issue in the County, especially for those who need to access services and do not live in Camden City. With more service providers and better collaboration between currently-existing providers, wait lists (identified as a barrier by 38% of survey respondents) could be reduced, and residents without access to reliable transportation would not have to rely on travelling to Camden City to access services.

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Camden County residents and service providers maintain that the County simply does not do enough to make their services known to the public. Lack of awareness is listed by survey respondents as one of the top three barriers for every need area. The survey question about whether or not the County services are well known frequently has the largest proportion of "Disagree" and "Strongly Disagree" responses, and in the case of mental and behavioral services for adults, 65% of respondents. Focus group and key informant interview participants often noted that County residents do not know where to go or who to contact to get behavioral and mental health assistance.

Focus groups participants also noted that people receiving behavioral and mental health services typically experience a change in providers as a result of changing insurance coverage. According to one focus group participant, “people with mental health issues often feel segregated from the rest of the world. [Having] to re-establish relationships [with providers] all the time...is really hard for someone with mental health issues.” Participants also noted that it is often difficult for residents to find behavioral and mental health services that will take patients that are not experiencing an emergency or crisis. The expansion of service providers, as well as better collaboration and referrals between points of contact in the behavioral and mental health system, could help to address some of these issues in Camden County.

Cultural barriers were also identified as one of the top five barriers by survey respondents but were not mentioned during the focus groups and interviews. This is likely due to the fact that the service providers and community leaders participating in the needs assessment described the stigma around receiving these kinds of services as all-encompassing and not limited to any specific group of people. Survey respondents, unable to expand on their answers, may have felt similarly to focus group and interview participants, but selected cultural barriers as a catch-all for the stigma surrounding behavioral and mental health services. It was also clear from the information collected that individuals in Camden County feel that if these types of services were advertised more widely, there would be less stigma associated with them. Regardless of a consensus about the presence or absence of cultural barriers, there is a clear impact of stigma on whether people decide to seek behavioral and mental health help; increasing the amount of available information about services and normalizing behavioral and mental health services would be helpful for improving access for adults in the County.

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	90	21 %	38 %	24 %	6 %	11 %	68 %
2. Anyone in the county is able to access services.	90	19 %	39 %	27 %	3 %	12 %	68%
3. Services are widely advertised and known by the county.	90	19 %	46 %	20 %	4 %	11 %	68 %
4. Services take race, age, gender, ethnicity and more into account.	89	11 %	28 %	34 %	6 %	21 %	67 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	88	5 %	23 %	38 %	6 %	30 %	66 %
6. Staff are well-trained, knowledgeable and provide good customer service.	90	6 %	16 %	43 %	7 %	29 %	68 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	51	38%
Services do not exist	133	31	23%
Transportation	133	53	40%
Cannot contact the service provider	133	25	19%
Too expensive	133	31	23%
Lack of awareness of service	133	56	42%
Cultural Barriers	133	37	28%
Services provided are one-size fits all, and don't meet individual needs	133	31	23%
Stigma Leads to Avoidance	133	31	23%
Eligibility Requirement (explain below)	133	23	17%
Other (explain below)	133	4	3%

Need Area: Substance Use Disorder and Prevention Services (Adults and Adolescents)

Status: Prioritized Need Area

Substance use treatment services includes services that provide a range of assessment and supportive treatment for substance use disorders. This need area seeks to gauge the substance use needs and the existence of community services and supports to address substance use disorder needs throughout the county (e.g., detoxification, short- and long-term inpatient treatment services, outpatient treatment services, medication management, Division of Mental Health and Addiction Services, NJ 2-1-1, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

Substance use disorder and prevention services are identified by the Human Services Advisory Council, County residents, and local service providers as a Prioritized Need. Based on survey responses, it was the second most selected Service Need, behind behavioral and mental health services for children, and tied with behavioral and mental health services for adults. During focus groups and interviews, it was referenced 14 different times, meaning that it came up in nearly three-quarters of all focus groups and interviews. Looking at the data, it is not surprising that Camden County residents are concerned about substance use disorder and prevention services. Suspected overdose deaths in Camden County rose 7% between 2017 and 2018. This translates into 22 more people dying totalling 329 overdose deaths. This number has increased every year, and more than doubled since 2014, when it was only 138.

During focus groups and key informant interviews, participants reported that substance use disorders disproportionately impact lower income communities, minorities, and LGBT+ youth, with the caveat that the need for substance use disorder and prevention services affects all types of individuals. Some participants indicated that COVID presents an additional barrier. A local service provider attested during their interview that, "Right now, it's COVID making everything a lot worse." According to the County data profile, heroin and alcohol were identified as the main drugs of choice among residents entering substance abuse treatment centers at 45% and 20%, respectively. With the exception of marijuana (15%), none of the other substances (opiates, cocaine, other drugs) were identified by more than 10% of people entering treatment as the root of their substance use issues.

Summary: Nature of the Need

According to 65% of survey respondents, there are not enough substance use disorder and prevention services in Camden County. When asked about substance use disorder and prevention services, 58% of survey respondents "Disagree" or "Strongly Disagree" that services are widely advertised and known in Camden County. The accessibility of services fared only slightly better than the availability of services, with 56% of survey respondents indicating that they "Disagree" or "Strongly Disagree".

Services to Overcome Drug Abuse among Teenagers (SODAT), My Father's House, Oaks Integrated Care, and Living Proof Recovery Center were identified during focus groups and interviews as positive supports for people dealing with substance use disorder in Camden County. When it comes to the quality of services, survey respondents tend to agree that the services and staff are satisfactory, but 41% "Disagree" or "Strongly Disagree" that services are provided with the proper considerations made for clients of different races, ethnicities, ages, and genders. Thirty-eight percent of survey respondents "Agree" or "Strongly Agree" that facilities designed to meet this need are of good quality, and 49% "Agree" or "Strongly Agree" that staff are well trained. It is worth noting that the number of people selecting the "Don't Know" response rose significantly (by more than 20%) for the questions regarding quality of services, discriminatory practices, and staff knowledgeability as opposed to questions about availability and accessibility of services. This suggests that individuals responding to the survey may be less likely to have personal experience utilizing substance use disorder services and so are less able to speak to specific qualities of the services.

The top three barriers identified by survey respondents are lack of awareness (40%), transportation (35%), and wait lists (35%). Lack of awareness is one of the biggest barriers for all need areas and substance use disorder and prevention services are no different in this respect. Lack of awareness of available services presents a significant barrier between the general population and people working in community based organizations who help make referrals for people in need. One local service provider noted that, "In terms of substance abuse, one of the biggest barriers is a lack of info about the [efficacy] of certain treatments." Multiple focus group participants indicated that a major obstacle to people receiving treatment was a lack of self-awareness; especially for youth, who may "be in denial that they need help" or "think they can do it all by themselves."

One recommendation made by numerous participants is to create space for youth to speak with trusted adults about any substance-use-disorder-related questions. It was mentioned in multiple focus groups and key informant interviews that a major unforeseen impact of COVID on substance use disorder services comes as a result of the transition to virtual schooling. "Before," one local service provider noted, "people would go through the school system and get help and information on resources from the school system." Trusted adults, such as those at schools, were mentioned multiple times in interviews as a resource that many youth take advantage of, preferring to seek help from someone removed from their family and friend groups. Increasing the amount of information available to the public would also help address the stigma surrounding substance use disorder. Participants noted that youth "may be scared that their parents will find out that they are using drugs," or "are afraid to be judged by their peers, so they don't seek help." The combined impact of a lack of awareness of services coupled with stigma and reduced access to trusted supports/resources means that many youth struggle with substance use disorder instead of receiving services which could improve their health and well-being.

The issue of wait lists, frequently identified by survey respondents as a barrier to accessing services, was often brought up in conjunction with a lack of service providers during focus groups and interviews. It was noted multiple times that there is a “huge gap in services for kids” who are 12 or 13 years old, few services available for residents under 18 years of age who are typically only referred to programs and services as a result of an interaction with the justice system, and the variety and “quality of treatment for youth is inferior to adult treatment.” This lack of providers and services means that youth seeking assistance for their substance use disorder may face long wait times, if they are even able to access services in the first place. One of our interviewees succinctly pointed out this problem, “It takes a lot for someone to go [to rehabilitation], so if they have long waits, it makes the person not want to go.” Making people wait for days or weeks at a time increases the likelihood that they will no longer seek treatment. Many people internalize their issue as a personal failing, not a physical health issue, as a product of the stigma noted above, which is a challenge Camden County should meet head on. Being able to offer support right away, as well as promoting education and destigmatization around substance use disorders and continuing to create spaces for youth to speak with trusted adults about their concerns are all essential for the County, considering the fact that the stigma surrounding this issue is most frequently what prevents people from seeking help in the first place.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

Expanding substance use disorder and prevention services, especially for youth, is an urgent need in Camden County. Interview and focus group participants had mixed opinions regarding the capacity of the County to address this issue. Participants felt that the County has some, but not enough, ability to increase the funding available to organizations and programs that focus on the needs of people dealing with substance use disorders. Wait lists are a big issue for people and part of that is because there just are not enough services to meet the demand in the County. Expanding existing programs or starting new ones, especially drop-in treatment centers and services tailored for youth, would greatly improve access to services. Almost all participants agreed that the County has the capacity to improve the coordination and collaboration of service providers, as well as improve the advertisement of services that are available in the County.

The County would benefit from additional funding and organizational support from the state to increase their capacity for delivering much needed substance use disorder and prevention services. A coordinated effort to advertise all the available resources and get residents familiar with the treatment options should be explored in the near future. Funding to create or expand individualized treatment services for youth and drop-in treatment services would make getting help easier and more accessible for residents. In the same vein, increased funding for programs that address long-standing barriers in the County, like transportation, would allow for more people to be served. As one resident noted, “There are barriers in the entire County that make it harder to access things if you have to go into [Camden] City. If you’re in Winslow - if you’re not on the main road and you miss the bus, that’s it. You won’t be getting there.”

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

In the focus groups and interviews, two additional trends became clear. The first is the fact that part of the reason people do not know where they can get substance use disorder and prevention services is because they only look for services when they are in dire need of help. Having the County provide this information and make it accessible to people before they are experiencing a crisis would not only destigmatize this issue but also streamline the process of receiving services for people who need them.

Transportation was frequently identified as a barrier for people who want to receive substance use disorder and prevention services, as is the time it takes to actually receive services. Since transportation is a frequently-identified barrier in all need areas of Camden County service provision, especially for residents outside of Camden City, the establishment of additional service providers in areas outside of the City, modification of currently-existing public transportation routes to better serve residents who may need to travel to the City for services, and creation of a mobile response unit are options the County should consider for the future.

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	90	21 %	43 %	23 %	4 %	8%	68%
2. Anyone in the county is able to access services.	90	14 %	41 %	37 %	2 %	6%	68%
3. Services are widely advertised and known by the county.	89	13 %	44 %	34 %	6 %	3%	67%
4. Services take race, age, gender, ethnicity and more into account.	90	12 %	29 %	34 %	1 %	23%	68%
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	90	9 %	18 %	37 %	2 %	34%	68%
6. Staff are well-trained, knowledgeable and provide good customer service.	90	10 %	9 %	47 %	3 %	31%	68%

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	47	35%
Services do not exist	133	31	23%
Transportation	133	48	36%
Cannot contact the service provider	133	27	20%
Too expensive	133	34	26%
Lack of awareness of service	133	55	41%
Cultural Barriers	133	37	28%
Services provided are one-size fits all, and don't meet individual needs	133	38	29%
Stigma Leads to Avoidance	133	38	29%
Eligibility Requirement (explain below)	133	29	22%
Availability of Substance Use Disorder Services	N/A	N/A	N/A
Availability of Substance Abuse Prevention Programs	N/A	N/A	N/A
Other (explain below)	133	8	6 %



Need Area: Domestic Violence Services

Status: General Need Area

Domestic violence is violence or other forms of abuse by one person against another in a domestic setting, e.g., husband and wife, child and parent, sibling and sibling, etc. This need area seeks to assess the level to which domestic violence impact residents throughout the county and the existence of community services and supports that will keep families safe from physical, sexual, financial, digital, mental and emotional forms of domestic violence (e.g., shelter services, victim services, batterers intervention services, DCF's Office of Domestic Violence Services, domestic violence liaisons, domestic violence hotline, Family Success Centers, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

Domestic violence remains a pervasive challenge across Camden County. In 2016, Camden County had 6,080 incidents of domestic violence, the second highest number of incidents in the state, following Essex County (6,437 incidents). The number of incidents in Camden County rose over time from 2013 (5,637) to 2016 (6,080), nearly 8%. Camden City accounts for 40% of the domestic violence incidents across the County. The City had 2,450 incidents in 2016, compared to 552 incidents in the next highest municipality, Winslow Township, and 479 incidents in the third highest municipality, Cherry Hill. Gloucester City (367), Lindenwold (359), Pennsauken (309), and Pine Hill (231) also had higher incidents than the remaining municipalities in Camden County.

Out of the 63,420 domestic violence offenses in Camden County from 2012- 2016, 43% (27,222) were assaults and 43% (27,256) were harassment. The remaining 14% of offenses were primarily criminal mischief and terroristic threats. Out of the 19,472 arrests over that same time period, 70% (13,705) were for assault, 15% (2,949) for harassment, and 7% (1,438) for criminal mischief.

When accessing services in Camden County, people go to the Women's Center, Volunteers of America's Batterers Program, the Camden County Domestic Violence Hotline, or the Domestic Violence Liaisons through the NJ Department of Child Protection and Permanency. While domestic violence victims are primarily female, multiple focus group/interview participants noted that there are not enough services for male victims. One participant noted, in some cultures, certain behaviors and actions are considered acceptable (such as corporal punishment), while in other cultures these actions may be viewed as inappropriate or offensive.

The prevalence of domestic violence in Camden County suggests that it occurs throughout many neighborhoods, and neighbors are often witness to these incidents. For example, one key informant noted the need to educate landlords, offer case management, and provide a stable living environment as ways to prevent victims of domestic violence from needing to move in and out of apartments. A theme of police intervention in domestic violence cases arose throughout the focus groups and

interviews, both positive and negative. Another key informant interviewee shared how they called the police after hearing a neighbor and boyfriend in a dispute, and the neighbor denied there was a problem after the police arrived, but then shared with the interviewee that he was, "...getting the help he needed." Other focus group and interview participants discussed local police issues and indicated that police do not want to get involved in domestic violence. One individual shared that the police only make matters worse as they, "...take the side of the person normally with the bruise but [that person] may be the attacker."

Summary: Nature of the Need

When addressing domestic violence needs in Camden County, 46% of survey respondents identified a "lack of awareness of service" as a barrier to receiving domestic violence services. Overall, many respondents shared that the Camden County domestic violence services are not widely advertised or known by residents across the county (64%). Respondents identified other barriers to accessing services: 29% of survey respondents identified cultural barriers, 27% noted transportation, 27% reported the services provided are one-size fits all and do not meet individual needs, and 21% indicated that there is a wait list to receive domestic violence services. In considering cultural barriers, a repeated challenge to accessing domestic violence services is the language barrier many victims face. Translators and/or Spanish speaking employees are needed to connect with victims and provide assistance. While 38% of survey respondents felt that domestic violence services take race, age, gender, ethnicity, and more into account when providing services, 34% "Disagree" or "Strongly Disagree", indicating mixed opinions surrounding the degree to which services are sensitive to the specific needs of individuals. Although 47% of respondents "Agree" or "Strongly Agree" that staff are well-trained and knowledgeable and provide good customer service, a lack of confidentiality remains a concern, as people do not trust service provider staff.

As noted, availability of services was also a concern, as focus group participants shared there is a Domestic Violence Liaison, but there are no openings in Camden County, or openings and services are limited for those seeking help. When asked about the availability of services, 57% of survey respondents "Disagree" or "Strongly Disagree" that there are enough services available in the County to help those who have domestic violence needs, while only 26% "Agree" or "Strongly Agree" that there are enough services to help those with domestic violence service needs. In a similar split, 46% of survey respondents "Disagree" or "Strongly Disagree" that anyone in Camden County is able to access services, while 41% "Agree" or "Strongly Agree" that anyone can access services. The lack of a clear majority may indicate that access to and quality of services may not be equal for different groups of people in the County.

Moreover, a mismatch between services provided and services needed also arose. For example, one focus group participant mentioned the lack of individual counseling available (as opposed to group counseling), another noted that many domestic violence victims have multiple children and are not able to be housed in a facility, and another noted that the anger management classes required by some programs or courts may not be appropriate. One focus group participant noted the need for providers to understand the people they are working with, sharing, "For domestic violence survivors, many get

pushed into something (drugs, alcohol) by their abuser. Their psyche impacts their self-esteem, job readiness, career, etc. Providers need to understand the cycle they are in.”

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	93	19 %	38 %	25 %	1 %	17 %	70 %
2. Anyone in the county is able to access services.	93	15 %	30 %	40 %	3 %	12 %	70 %
3. Services are widely advertised and known by the county.	93	22 %	42 %	20 %	2 %	14 %	69 %
4. Services take race, age, gender, ethnicity and more into account.	92	11 %	24 %	37 %	1 %	27 %	69 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	92	9 %	20 %	33 %	0 %	39 %	69 %
6. Staff are well-trained, knowledgeable and provide good customer service.	92	10 %	13 %	40 %	7 %	30 %	69 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	29	22%
Services do not exist	133	22	17%
Transportation	133	37	28%
Cannot contact the service provider	133	18	14%
Too expensive	133	8	6%
Lack of awareness of service	133	63	47%
Cultural Barriers	133	40	30%
Services provided are one-size fits all, and don't meet individual needs	133	36	27%
Stigma Leads to Avoidance	133	36	27%
Eligibility Requirement (explain below)	133	14	11%
Other (explain below)	133	15	11%



Need Area: Parenting Skills Services

Status: General Need Area

Parenting skills services are programs that aim to enhance parental capacity and skills, improve parenting practices and behaviors, and teach age appropriate child development skills and milestones. This need area seeks to assess the level to which residents require parenting skills services and the existence of community services and supports which address parenting skills (e.g., Home Visiting Program, Nurse-Family Partnership, Family Preservation, Family Success Centers, Family Service Organizations, Parents Anonymous, Parent Mentors, SPAN, etc.).

Need Assessment Key Findings

Summary: Scope of the Need

No specific data was provided in the County profile from the state about parenting skills services, so in considering the scope of this need, Camden County must rely on responses from surveys, key informant interviews, and focus groups. The County data profile does include some information about children which makes sense to include in this section. In 2017, Camden County had just over 116,500 children under the age of 18, which is roughly 23% of the County's entire population; Camden City's percentage of children under 18 stands at nearly 31%. The largest age range for the County's group of children is 12 to 17 years old at just slightly more than 40%. The County profile also provided the overall number of children served by the Department of Child Protection and Permanency (DCP&P). In Camden County, 5,459 families (in and out-of-home placements) were served by DCP&P in 2018, which was the second highest in the state. This data may be a useful indicator for the number of families who could benefit from parenting skills services. It would be beneficial for future County data profiles to consider collecting information about the parenting skills services available in the counties and their utilization rates. There are a number of services that exist in Camden County to help families, and specifically with parenting skills, including 4 Family Success Centers, Center for Family Services, and Hispanic Family Center.

Though only 5 focus groups and interviews out of the 20 conducted (25%) selected parenting skills services as a top Service Need, survey responses do indicate that parenting skills services are in need of expansion; 57% of respondents "Disagree" or "Strongly Disagree" that there are enough services in the County to help those in need. Only 14% of survey respondents "Agree" or "Strongly Agree" that these services are widely advertised and well-known. One interviewee underscored this by noting that "a lot of parents don't know what's available as far as parenting services in their area." When asked if anyone in the County could access these services, 49.5% "Disagree" or "Strongly Disagree" with the statement.

Summary: Nature of the Need

Focus group and interview participants stressed the need for parenting skills services, as it was mentioned in 6 out of the 20 conducted (30%), but also shared that parents could be embarrassed to seek services for fear of others finding out. This speaks to the stigma that may be associated with accessing these services. Others thought that many parents may need these services, but cannot recognize that need in themselves and thus do not seek out these services. One interviewee stated that “[parents] don’t feel they need it.” A focus group participant shared that “most parents don’t think they need these services as they believe they don’t need help parenting.” A few focus group and interview participants shared that parents may only access these services if they are ordered to go by the courts, DCP&P, or some other authority.

It is clear from survey responses that parenting skills services are valued and beneficial, but that more work must be done to connect these services with Camden County families in need. The most common barriers to accessing parenting skills services are lack of awareness of the available services (42.6%), lack of transportation (34.6%), cultural barriers (25.7%), wait lists (22.8%), and absence of services and services provided are one size fits all both at nearly 20%, as rated by survey respondents.

Some suggestions from focus group and interview participants around increasing the use of parenting skills services are: (1) engage pregnant women and start early, seeking out young parents; (2) post more service information in libraries; (3) ensure service information is also translated for Spanish and larger-Asian-speaking-and-reading populations in the County; and (4) provide incentives to attend parenting skills classes. Overall, as one participant stated, the County should “help provide resources to all parents, as many parents can be better parents.”

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	92	13 %	45 %	27 %	1 %	14 %	69 %
2. Anyone in the county is able to access services.	92	8 %	42 %	30 %	1 %	18 %	69 %
3. Services are widely advertised and known by the county.	91	18 %	56 %	14 %	0 %	12 %	68 %
4. Services take race, age, gender, ethnicity and more into account.	91	8 %	24 %	35 %	1 %	32 %	68 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	90	3 %	17 %	44 %	0 %	36 %	68 %
6. Staff are well-trained, knowledgeable and provide good customer service.	91	7 %	14 %	45 %	4 %	30 %	68 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	31	23%
Services do not exist	133	27	20%
Transportation	133	47	35%
Cannot contact the service provider	133	18	14%
Too expensive	133	15	11%
Lack of awareness of service	133	58	44%
Cultural Barriers	133	35	26%
Services provided are one-size fits all, and don't meet individual needs	133	27	20%
Stigma Leads to Avoidance	133	27	20%
Eligibility Requirement (explain below)	133	12	9%
Other (explain below)	133	3	2%



Need Area: Legal and Advocacy Services

Status: General Need Area

Legal and advisory services include legal assistance, advocacy and support in various types of legal matters, including child support, child custody, paternity, immigration, domestic violence, housing and eviction, criminal, etc. This need area seeks to assess if the level to which residents throughout the county have unresolved legal issues for which they need assistance and the existence of legal and advisory services to meet those needs (e.g., Legal Aid, pro-bono attorneys and clinics, court system, ombudsman, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

Since only a list of pro bono legal and advocacy service agencies is provided in the County data profile, the Camden County Human Services Advisory Council has to rely on information from surveys, key informant interviews, and focus groups to determine the scope of this need. Two of the 20 focus groups and key informant interviews identified legal and advisory services as a top Service Need in the County (10%). Unfortunately, data from the surveys and focus groups/interviews do not offer any resolution on the percent of the population in need of legal and advocacy and advisory services or how the County has performed in this area over time.

The 13 agencies listed in the County data profile include free and low cost legal services specializing in immigration, disability, education, intimate partner violence, military, LGBTQ +, and children. Four of the service agencies provide general advocacy and legal work, while the other 9 specialize in the previously listed topic areas.

Summary: Nature of the Need

There is a clear need for additional legal and advocacy services in the County, as 62.5% of survey respondents “Strongly Disagree” or “Disagree” that there are enough services available. Moreover, 57.5% of the respondents “Strongly Disagree” or “Disagree” that anyone is able to access these services, while only 25.8% of the respondents “Strongly Agree” or “Agree” with the statement.

A lack of awareness of services is identified as the most serious barrier to accessing these services by survey respondents. More than half (51.1%) do not think that legal services are widely advertised and known in the County. Forty-six percent of survey respondents identified a lack of awareness of services as a barrier to accessing services in the County. Focus group participants corroborated this finding, noting that “the lack of knowledge of services is a barrier.” One focus group participant indicated that a lack of understanding and an absence of a formal support structure is a barrier for many residents because “families need help with the paperwork, because they don’t understand and want to talk

about their situation live or in person.” Many residents may not have knowledge or expertise in completing legal forms/paperwork to apply for or seek legal services. Support from experts in the field or communication with a case coordinator could potentially mitigate this issue. Participants also felt that “the County needs to consider providing something like an academy or courses [to] help people navigate paperwork and services. Educational components could help answer questions on how to do [this or] that for families,” and one participant pointed out that “there is no education component to services, like if you’re facing this [specific] situation, you can do that [specific action].”

Survey respondents had mixed opinions about the equity and inclusivity of services provided, with 36.4% of respondents who “Agree” or “Strongly Agree” and 38.6% who “Disagree” or “Strongly Disagree” that services take race, age or gender, ethnicity, and more into account. Respondents held a positive opinion of legal services’ facilities and staff, as 39% “Agree” that facilities are of good quality and over 50% “Agree” or “Strongly Agree” that staff are well-trained and provide good customer service.

Focus group participants also identified another important issue hindering Camden County residents from accessing legal and advocacy services, with one participant pointing out that “a lot of the [legal service] programs are set up to automatically deny you for services.” Focus group participants and interviewees report that residents need to appeal the denial in order to access service, which makes it frustrating, difficult, and time-consuming. Whether programs are indeed set up to automatically deny applicants, the perception among residents and service providers that this is occurring is indicative of a larger issue with eligibility for services, and that issue must be promptly addressed to ensure that residents are not deterred from seeking and accessing legal and advocacy services.

Summary: Local Considerations for Addressing the Need for County Prioritized Need Area

If applicable: Additional Notable Focus Group Trends for County Prioritized Need Area

Need Area: Survey Results

Item	Total Number of Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Total
1. There are enough services available in the county to help those who have this need.	90	21 %	41 %	21%	1 %	16 %	68 %
2. Anyone in the county is able to access services.	90	17 %	41 %	24%	2 %	16 %	68 %
3. Services are widely advertised and known by the county.	90	22 %	51 %	13%	1 %	12 %	68 %
4. Services take race, age, gender, ethnicity and more into account.	90	13 %	24 %	33%	3 %	26 %	68 %
5. Facilities that provide service to meet this need are of good quality (e.g., clean, well supplied).	90	9 %	11 %	40%	0 %	40 %	68 %
6. Staff are well-trained, knowledgeable and provide good customer service.	90	8 %	11 %	50%	1 %	30 %	68 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	133	34	26%
Services do not exist	133	26	20%
Transportation	133	39	29%
Cannot contact the service provider	133	25	19%
Too expensive	133	34	26%
Lack of awareness of service	133	63	47%
Cultural Barriers	133	33	25%
Services provided are one-size fits all, and don't meet individual needs	133	29	22%
Stigma Leads to Avoidance	133	29	22%
Eligibility Requirement (explain below)	133	23	17%
Other (explain below)	133	7	5%