

Ocean County Needs Assessment 2020

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County Human Services Advisory Council
Authored by: [Rose Bulbach](#) & [Katie Schworn](#)

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PART 1



Executive Summary

Narrative: In the Words of the County

The Ocean County Human Services Advisory Council (HSAC) is a county-based planning, advisory, and coordinating council dedicated to helping the community meet its human service needs. Staff of the Ocean County Department of Human Services (OCDHS) provide oversight to the HSAC, which consists of more than 30 community providers serving as members of the Council. The HSAC is appointed by the County of Ocean Board of Commissioners and regulated through N.J.A.C 10:2 to review county-level human services activities; to serve as the primary vehicle for making local recommendations; and to assist county government, the New Jersey Department of Human Services (NJ DHS) and the New Jersey Department of Children and Families (NJ DCF).

It is the intention of the HSAC to facilitate and enhance the delivery of human services through collaborative relationships in the community and between local, county, state and federal agencies. The HSAC seeks to identify high priority human service needs for the community and improve access to services for target populations through its planning, coordinating, and implementing of NJ DHS initiatives at the county level. The HSAC serves as a community development leader in the establishment and continuity of a coordinated system of care that encourages agencies and organizations to design unified, flexible, and individualized programmatic opportunities within the community. Ocean County's functional network of agencies and organizations are dedicated to delivering strong programs and services to the community and its most vulnerable residents. Common goals have led to successful partnerships between different agencies and a diverse variety of services to meet specific consumer needs. Although this structure seeks to enable a seamless approach to providing services, key barriers in its delivery continue to exist. Access to transportation, long waitlists, a lack of awareness of services, stigma, and cultural or language barriers can often hinder consumers in obtaining needed services.

In a coordinated effort to understand the needs of families in the state, the NJ DCF has funded each county HSAC to undertake an assessment of local needs every two years. Counties are tasked with gathering information related to local basic and service needs, social connections and community networks, the impact of those needs on subpopulations, trends in needs over time, key barriers to service delivery and considerations for action. Under the auspices of the OCDHS, the HSAC seeks to obtain both qualitative and quantitative data from the needs assessment through questionnaires, focus groups and key informant interviews. The NJ DCF also provides the OCDHS with a County Data Profile¹ to assist the HSAC with identifying basic and specialized need areas.

¹ Rutgers School of Social Work, A Profile of Family and Community Indicators; 2019

The purpose of the 2020 Ocean County Needs Assessment discussed herein is to document current local needs and gain a better understanding of the community’s perception of the services available within the county. The needs assessment report is the result of a collaborative effort between the HSAC, its Planning Committee, County agencies, the community at-large and a wide variety of human and social service providers representing such fields as mental health, food insecurity, housing, childcare, community safety and employment and career services. The intended goal of the assessment findings is to recommend action steps community partners and leaders can make to reduce identified barriers, or alleviate the negative impact, to service delivery identified within the report.

Challenges in the methodology of the 2020 Ocean County Needs Assessment emerged as the coronavirus (COVID-19) pandemic² heightened at the start of the year. The HSAC was charged with securing virtual participation in the needs assessment to adhere to State mandated safety protocols. The online survey tool, SurveyMonkey (SVMK, Inc.), was utilized to distribute the NJ DCF needs assessment questionnaire to a predetermined set of diverse stakeholders such as community members, public service organizations and youth. Additionally, focus groups and one-on-one key informant interviews were facilitated through the Cisco Webex video conferencing platform. The HSAC also engaged with participants through email or by phone.

The HSAC Planning Committee assisted in prioritizing four specific need areas for the purpose of the needs assessment: food, housing, substance use disorder and children’s behavioral and mental health. These areas were discussed in focus groups and key informant interviews. Questions pertaining to the ease of access to services geographically as well as for subpopulations residing in the county were also discussed. Upon completion of the first phase in the needs assessment process, the HSAC reviewed data from each questionnaire, focus group, interview and other various sources to highlight areas of interest to the community in the needs assessment report. Through collaboration with local service providers and the results of the 2020 Ocean County Needs Assessment, a framework can be built to developing a plan of action to improve the quality of services available to Ocean County residents.

² “Coronavirus.” *World Health Organization*, www.who.int/health-topics/coronavirus.

Introduction

Purpose

The NJ DCF is collaborating 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 the NJ DCF 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 NJ DCF existing ChildStat process and shared with the NJ DCF staff and stakeholders during the County's ChildStat session. ChildStat is a learning, management and accountability tool used by the NJ 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 the NJ DCF executive management, senior leadership and system partners.

County Description

Narrative: In the Words of the County

Ocean County is located within the Atlantic Coastal Plain of central New Jersey. The county is the second largest in the state and one of four New Jersey counties that border the Atlantic Ocean. It is in close proximity to two of the nation's largest metropolitan centers, New York City, New York approximately 60 miles north and Philadelphia, Pennsylvania roughly 50 miles west. Ocean County also borders Atlantic, Burlington and Monmouth Counties. In addition, Atlantic City is located approximately 50 miles south of Toms River Township, which serves as the County Seat. These popular destinations are easily accessed via several major highways that run through Ocean County, including the Garden State Parkway.

The latest data from 2019³ lists Ocean County with a resident population of approximately 607,186, of which 24.2 percent are under 18 years and 7.1 percent are under 5 years. More than half of the population is recorded as female in sex. The 65 years and older population in Ocean County is the second highest in the state at 22.8 percent. Additionally, the racial breakdown of Ocean County documents 92.7 percent of residents as White, 9.5 percent Hispanic or Latino and 3.6 percent Black or African American. Less than eight percent of the total population reported⁴ a place of birth outside of the country therefore contributing to the higher than average population of residents with an English-only language background. Moreover, the largest population of veterans in the state, 35, 973 individuals, reside in Ocean County. There are an estimated 225,270 households and of those households, 68.5 percent are married couples living together, 15.5 percent are non-family living together and 15.9 percent are single individuals living alone. The median age of an Ocean County resident is 42 years.

Ocean County has 33 municipalities ranging in size from less than one square mile (Seaside Heights Borough) to over 100 square miles (Jackson Township). Data prepared in 2019⁵ by the Ocean County Planning Department accounts Lakewood, Toms River and Brick Townships as the largest municipalities in population size. Ocean County is considered one of the top five wealthiest counties in New Jersey with an estimated median income of \$68,021. The annual cost of living for a two parent-two child household is \$101,3706 and the median property value is \$285,200. The highest median property values for owner-occupied housing units are located in Mantoloking Borough while the lowest are in Manchester Township.

Ocean County has an extensive stretch of shoreline along the Atlantic Ocean and several of its attractions are frequented by tourists and locals each year. It is home to many beaches including Seaside Heights, Lavallette, Point Pleasant, and Long Beach Island. Six Flags Great Adventure in

Jackson has the world's tallest and second-fastest roller coaster and is a summer hotspot for residents of New Jersey and its neighboring states. The Seaside Heights Boardwalk and Jenkinson's Boardwalk in Point Pleasant Beach have been used for various television and film productions in popular culture. Additionally, Ocean County is a gateway to the New Jersey Pine Barrens, one of the largest protected pieces of land on the East Coast.

The current poverty rate in Ocean County is 10.7 percent, a number that is lower than the national average of 13.1 percent. The largest demographic living in poverty are females ranging 25-34 years followed by females 55-64 years. Annually, New Jersey participates in the Point-in-Time (PIT) Count of the Homeless to provide a statewide snapshot of households experiencing homelessness. The PIT Count records experiences of homelessness in each county on a single night in January. On January 28, 2020, 245 households in Ocean County⁷ were identified as currently homeless, 42 of which were chronically homeless. Out of the 245 households, there were 6 veterans, 87 survivors of domestic violence and 33 youth. Among all households experiencing homelessness on the night of the count, 24.6% had no source of income and 6.8% reported having earned income. The most common income sources of homeless households were public assistance (28.5%), Supplemental Security Income (SSI) (17.4%) and Temporary Assistance for Needy Families (TANF) (12.6%).

There are 155 licensed childcare centers in Ocean County, which allows the capacity for over 14,000 children to enroll. In 2019, there were 1,067 students enrolled in state-funded preschool and 4,379 enrolled in half and full day public kindergarten. Additionally, there were 68,555 students enrolled in public school. Over 90 percent of residents 25 years and older are high school graduates and less than 30 percent have earned a bachelor's degree or higher. The student population is skewed toward men, with 11,679 male students and 7,163 female students. The largest universities are Ocean County College, Beth Medrash Govoha and Georgian Court University.

Recent data charts list about 266,000 residents in Ocean County as employed. The largest employment industries are health care and social assistance, retail trade and educational services. The most common job groups are office and administrative support; sales and related occupations; and management. Compared to other counties, Ocean County has a high number of residents employed in law enforcement sectors. Additionally, the highest paid occupations are in law enforcement, computer and mathematical professions and management. Male residents have an average income 1.36 times higher than the average income of female residents. The mix of coastal

³ "QuickFacts, Ocean County." *U.S. Census Bureau*, www.census.gov/quickfacts/oceancountynewjersey

⁴ "2019 American Community Survey (ACS)." *U.S. Census Bureau*; Census Reporter, www.censusreporter.org/profiles/05000US34029-ocean-county-nj.

⁵ "Population by Municipality." *Ocean County Planning Department*, www.co.ocean.nj.us/GovtDirPage.aspx?ID=185.

⁶ "Family Budget Calculator," *Economic Policy Institute*, www.epi.org/resources/budget.

⁷ "NJCounts 2020 Results," *Monarch Housing Associates*, www.monarchhousing.org/njcounts-2020-results/

resort communities in Ocean County rely heavily on tourism and as a result, there are a number of seasonal employment opportunities. For the summer season, part-time employment is available at boardwalks, arcades, beaches, and other service industry areas.

Ocean Ride, through the Ocean County Department of Transportation Services, is the county operated transit system and includes two major services: the “Reserve-A-Ride” Program, which provides door-to-door, non-emergency medical transportation service to seniors (age 60 and older) and persons with disabilities (age 18 and over) and local modified fixed bus routes. The Ocean Ride transportation system currently includes 12 bus routes that operate throughout Ocean County. The routes are designed to connect key residential areas with popular destinations such as local governmental facilities, healthcare, shopping, employment, social services and other transit connections. Funding for Ocean Ride is provided by County tax dollars as well as State and Federal grants. There are only two bus terminals in Ocean County operating NJ Transit bus routes, in Lakewood and Toms River Townships. There is also an NJ Transit train station in Point Pleasant Borough. The capacity at which consumers can easily access public transportation in Ocean County has always been a large barrier to services.

The Community Health Planning Unit of the Ocean County Health Department (OCHD) assesses current health data and needs of county residents through data gathering and by collaborating with various healthcare agencies in the county. The most recent Community Health Improvement Plan (CHIP)⁸ lists substance abuse, diabetes, heart health, access to care and mental health as the five main health priorities for Ocean County. Heart disease and cancer are the two leading causes of death in Ocean County. Additionally, the increased use of opioids like oxycodone and heroin has contributed to an elevated drug overdose death rate. The number of deaths by suicide in Ocean County has hovered above New Jersey’s death by suicide rate for most years.

Projected challenges for the future continue to target exponential population growth within a local infrastructure that struggles to address needs with limited resources.

⁸ “Community Health Improvement Plan.” *Ocean County Health Department*, www.ochd.org/chip-introduction

Needs Assessment Methodology

Quantitative and qualitative data were collected to inform the 2020 Ocean County Needs Assessment from various sources and stakeholders related to:

- Housing
- Food
- Healthcare
- Community Safety
- Employment and Career Services
- Childcare
- 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 and Prevention Services
- Domestic Violence Services
- Parenting Skills Services and
- Legal and Advocacy Services

County Data Profile

The NJ DCF provided a data profile to the County Human Services Advisory Council (HSAC) to support the Council 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, healthcare, transportation, employment, community safety, mental health and substance use. The sources for data in the profile include a combination of federal databases. The primary purpose of the County Data Profile is to support the HSAC needs assessment team in identifying key areas to prioritize during focus group data collection efforts.

Approach for Prioritizing Needs

The World Health Organization (WHO) declared the global crisis over COVID-19 a pandemic on March 11, 2020. Five days later, State officials issued Executive Order No. 104, which authorized aggressive social distancing measures to mitigate further spread of COVID-19 in New Jersey. The speed and scale of the pandemic disrupted social and human services organizations globally. Many agencies in Ocean County were working remotely to maintain operations for consumers. To adhere with safety and social policies related to the spread of COVID-19, the HSAC was forced to conduct the 2020 Ocean County Needs Assessment virtually.

The HSAC Planning Committee was outreached through email on June 1, 2020 to initiate discussions and review the County Data Profile provided by the NJ DCF. The Committee members were engaged

to assist in determining the two basic need areas and the two specialized need areas, which were intended as the focus of the needs assessment. The Committee is comprised of local advocates, consumers, providers and community leaders with extensive practical expertise in the areas of social and human services, business management, public administration and health services. Members were asked to identify priority need areas based on data provided electronically on June 17, 2020. In addition, members were asked to reference current levels of service for the member's agency and projected demands for services in 2021 to strengthen the information provided in the identification exercise.

Through the prioritizing process, members of the Planning Committee were requested to contribute insight and offer a consensus vote during the planned virtual meeting conducted on June 25, 2020 via Cisco Webex. The Executive Committee of the HSAC, having reviewed the Planning Committee's outcomes and recommendations, approved the prioritizations as presented via email to the HSAC Coordinator on July 7, 2020. All recommendations are detailed within the 2020 Ocean County Needs Assessment.

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

1. Food
2. Housing
3. Substance Use Disorder and Prevention Services
4. Children's Behavioral and Mental Health Services

Focus Groups

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

Due to aggressive social distancing measures during the COVID-19 outbreak, focus groups sessions were scheduled virtually for approximately one hour. Questionnaires were completed online prior to attending a focus group. For each focus group session, participants were asked to complete a standard questionnaire to gather data about the key topic areas outlined in the aforementioned County Data Profile. The questionnaire was developed to identify areas of strength and areas in need of improvement related to County-based supports and service array. The questionnaire consists of demographic data and approximately ten questions related to each of the 13 basic and specialized

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 questionnaire, the focus group participants were asked to participate virtually in the dialogue component of the session. The dialogue requirement was intended to allow participants to highlight experiences and perceptions as community members and provide opportunity for a deeper discussion and assessment of top barriers in each area of need. Participants discussed the four County HSAC-selected basic and specialized service need 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 2020 Ocean County Needs Assessment focus groups was completed by the OCDHS staff as part of its HSAC responsibilities. In addition to the HSAC, the OCDHS is comprised of the Mental Health Board, the Children's Interagency Coordinating Council (CIACC), the Office for Individuals with Disabilities, the Advisory Commission on the Status of Women and the Workforce Development Board. Due to the time constraints imposed by the NJ DCF and the procedural difficulties of successfully administering the needs assessment during a national pandemic, the OCDHS staff and HSAC members utilized longstanding partnerships in the community to outreach individuals for participation. This included working in coordination with local human service provider agencies to recruit available staff and consumers engaged in services.

The Coordinator of each of the OCDHS units was tasked with identifying appropriate providers and key informants to participate. Individuals were outreached based on engagement with the OCDHS units, level of expertise in the basic and specialized areas of the needs assessment and service to the community. The OCDHS does not actively engage with consumers therefore identified providers assisted the OCDHS staff in recruiting consumers, either currently or previously served in programs, to participate in the needs assessment.

The NJ DCF required ten specific focus group areas:

- Community members currently or previously served by the Division of Child Protection & Permanency (DCP&P)
- Community members currently or previously served by the NJ DCF Children's System of Care (CSOC)
- Community members currently or previously served by community-based providers
- Youth or young adults 16 to 23 years
- Community members at large (2 separate groups for this area were required)
- Community-based organizations like health and human service providers

-
- Community leaders and influential people like judges, clergy or activists
 - Public service organizations like schools, police, or medical professionals
 - Local business owners

The OCDHS staff initially discussed the needs assessment during the virtual May 28, 2020 HSAC meeting and each monthly HSAC meeting thereafter, leading up to the inception of the first focus group on October 22, 2020. All aspects of the needs assessment were reviewed at these meetings including the methodology, the NJ DCF requirements and the appropriate outreach process.

The option to host in-person focus groups was eliminated due to social distancing requirements instituted by the State's Executive Order No. 104 to mitigate further spread of COVID-19 in New Jersey. In response, the OCDHS and HSAC developed a plan to coordinate focus groups virtually using the SurveyMonkey and Cisco Webex platforms. SurveyMonkey allowed the OCDHS staff to distribute a link for recipients to complete the NJ DCF provided questionnaire online. Cisco Webex was used to host virtual focus groups once individuals had completed the questionnaire. Doodle, an online scheduling tool, was used to coordinate focus group times with participants. These tools were not necessary prior to the pandemic and the rushed timeframe given by the NJ DCF provided no opportunity to onboard individuals in the use of these platforms. Several back and forth communications with community members and providers explaining the functionality of each platform contributed to increased staff time spent on the needs assessment.

The OCDHS staff communicated with over 50 individual consumers and providers via e-mail to solicit participation in the online questionnaire and virtual focus group discussions. From those communications, mass e-mails were sent to numerous support groups and committees requesting needs assessment participation. After several weeks of individuals declining the invitation to engage, a decision was made, in consultation with the NJ DCF, to incentivize participation. A \$25 Visa gift card incentive was offered to those completing the online questionnaire and participating in a focus group. Although an incentive was provided, recruitment proved extremely difficult because of the continuously evolving state of COVID-19. The length of the needs assessment questionnaire was also a deterrent as many individuals encountered survey fatigue and abandoned mid-questionnaire leading to a completion rate of 80 percent. Individuals who offered to participate in a focus group session also struggled with finding the opportunity to join virtually as many community members were providing in-home virtual schooling assistance, experiencing hybrid work shifts outside of typical hours, and experiencing quarantine or isolations due to COVID-19 infection.

Focus Group Participants

Approximately 27 focus groups were conducted as part of the 2020 Ocean County Needs Assessment. These focus groups were conducted with 51 participants from October 22, 2020 to December 7, 2020. The number of participants in each focus group ranged from a minimum of 1 and a maximum

of 15 participants. Approximately 88 online questionnaires were completed. Technological issues proved especially troublesome as several individuals had difficulty with computer microphones, cameras, or internet connections during focus groups, which caused sessions to last longer than expected. Without notice, participants failed to join 22 percent of the scheduled virtual focus groups leading to a loss in productivity for the OCDHS staff as time was explicitly set aside to host the focus groups.

Key Informant Interviews

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

Key Informant Recruitment

Recruitment of key informants for the needs assessment was approached in similar fashion to the process for focus groups. In compliance with the State's Executive Order No. 104 to limit person-to-person contact, key informant interviews were conducted virtually. Coordinators from each of the OCDHS units were tasked with reviewing contact lists and assisting the HSAC to determine the appropriate individuals to represent the prioritized need areas selected for Ocean County.

To represent the food need area, the OCDHS staff outreached the Programs & Advocacy Director at Fulfill, the food bank of Monmouth and Ocean Counties. The Chief Executive Officer of Monarch Housing Associates, Inc., who also serves as a member of the Ocean County Continuum of Care (CoC) Homelessness Prevention and Assistance Coalition (HPAC), was selected to illustrate key barriers of housing services in the county. The Alcohol and Drug Abuse Unit Coordinator from the OCHD was selected for input relative to substance use disorder. Children's behavioral and mental health services was represented by the Executive Director of Ocean Partnership for Children, Inc., Ocean County's Care Management Organization (CMO). The CMO agency provides a full range of treatment and support services to children with complex needs. Additionally, the OCDHS Director and the Ocean County Board of Social Services Director were asked to participate.

The pre-selected participants were notified during the June 25, 2020 HSAC meeting and discussed the data the HSAC intended to obtain from its results of the key informant interviews and needs assessment. The majority of outreached key informants expressed disappointment in the time constraints set forth by the NJ DCF for the needs assessment process during an unprecedented pandemic. Engagements in previous commitments, daily reductions in staff due to COVID-19 outbreaks and pressures to maintain operation of services for clients limited the availability of key informants. After lengthy deliberation, it was determined that key informant interviews would be done solely through an electronic survey method utilizing the SurveyMonkey software.

The OCDHS staff emailed key informants a designated link to complete the needs assessment questionnaire on November 9, 2020. At the completion of the standard questionnaire, key

informants were engaged in targeted questions provided by the NJ DCF to utilize during key informant interviews. Key informants noted the length of the questionnaire, at nearly 100 questions, was extremely time consuming and frustrating to complete. By the end of the questionnaire, most of the participants identified experiencing survey fatigue. The questionnaire also explained there was an opportunity for virtual discussion after completing the needs assessment questionnaire however, none of the key informants felt it to be necessary.

Key Informant Interview Participants

Approximately six interviews were conducted in this county as part of its needs assessment. These interviews were conducted from November 9, 2020 to December 18, 2020. Each key informant completed the online key informant interview questionnaire.

Participant Demographics

As described in the above sections, both focus group and interview participants completed the needs assessment questionnaire. 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	51
Staff or Volunteer with a Community-Based Organization (e.g., Health and Human Services providers, Planning Board Participants)	44
Staff or Volunteer with a Public Service Organization (e.g., paramedics, fire fighter, police officers, air force, judges)	7
Local Business Owner in the County	7
Community leader and advocate in the county (e.g., hold a volunteer office, clergy, activist)	10
Other	10

Age	Number of Participants
Under 18	7
18-24	5
25-34	7
35-44	14
45-54	19
55-64	21
65 and over	14

Gender	Number of Participants
Female	73
Male	14
Non-binary, third gender/transgender	0
Prefer Not to Say	0
Other	0

Race	Number of Participants
American Indian or Alaska Native	1
Asian	0
Black or African-American	10
Native Hawaiian or Other Pacific Islander	0
White or Caucasian	74
Multi-Race (2 or More of the Previous)	2
Other	1

Ethnicity	Number of Participants
Hispanic, Latino or Spanish Origins	8
No Hispanic Latino or Spanish Origins	64

Education Level	Number of Participants
Grades Preschool-8	0
Grades 9-12-Non-Graduate	7
High School Graduate or GED	6
High School/GED <u>and</u> Some College/Trade	10
2 or 4-Year College/Trade School Graduate	27
Graduate or Other Post-Secondary School	37

Employment Status	Number of Participants
Employed: Full-Time	58
Employed: Part-Time	8
Unemployed-Looking for Work	1
Unemployed-Not Looking for Work	1
Retired	9
Student	6
Self Employed	2
Unable to Work	2

Years of Community membership	Number of Participants	Range
How many years have you been a member of this community?	84	1-30 years

Services Accessed by a Household Member within the last 2 Years	Number of Participants
Yes	30
No	48

Household Member History of Involvement with the NJ Division of Child Protection and Permanency (DCP&P)	Number of Participants
Yes	13
No	65

Participants represented the following municipalities

Barnegat, Beachwood, Brick, Eagleswood, Forked River, Jackson, Lacey, Lakewood, Little Egg Harbor, Manahawkin, Manchester, Point Pleasant, Stafford, Surf City, Toms River, and Waretown.

PART 2



Key Findings across Needs

An analysis of the data collected reveals common barriers across all needs. Lack of awareness, transportation access and long waitlists for services were identified consistently. Likewise geographically, the largest barrier impacts were in the southern and western areas of the county as transportation to existing service delivery hubs in central county locations was prohibitive. Findings suggest the barriers identified are ongoing and indicative of systemic issues and these findings are of no surprise. Annual and biannual assessments conducted through the varying units within the Ocean County Department of Human Services align predictably with the outcomes of this needs assessment endeavor in which lack of psychiatry, awareness of services, affordable housing, transportation access and long wait lists for services are well documented as priority issues across all areas of need. Likewise, the geographical barriers affecting access to service in the southern and western most areas of Ocean County have long been considered a priority need influencing agencies to build satellite services sites, provide remote strategies or in-home services moving away from the traditional business centers located in Toms River, Lakewood and Brick Townships.

When considering the data collectively, continuing to build capacity is critical. However, of more immediate concern is that individuals interviewed demonstrated an overall precarious lack of awareness of programs and services already available to meet immediate needs. Regarding infrastructure and capacity, Ocean County is the sixth most populous county in the State with two of the fastest growing municipalities in the State. From 2006 to 2016, the County's 5.5 percent growth accounted for 10 percent of the State's total population growth in that period. Due to this population increase, the demand for all services has increased. State and Federal funding formulas have been inflexible in adjusting for the County's rapid growth making it difficult for local prioritized needs to be served adequately. Ocean County has indeed faced capacity issues in meeting the needs of such a fast growing county. Systemic challenges exist in which providers have continued to re-engineer service delivery strategies to meet unprecedented demands for services in unpredictable economic and social times. Nevertheless, it is apparent that individuals in the community are not educated regarding the milieu of services that are available or how to adequately navigate the system.

Participants identified enhanced community outreach as a consistent measure to address awareness regarding availability and types of services residents may avail themselves to along with increasing access to existing services to combat wait lists, or long wait times. This aligns, again predictably with the current goals and objectives of the Department of Human Services' Boards and Commissions seek to bring federal, state, county and local attention and resources to the identified barriers and gaps, such as advocating for autonomy for APNs to help address the long waits for medication management and shortage of psychiatrists. Working to expand the promotion of services throughout all communities is underway, with special initiatives already underway within schools, colleges, churches, civic

organizations, Stigma Free Zones, and the media. Research is continually undertaken to monitor key indicators to assess progress in eliminating the identified barriers and gaps.

The data does not reveal any trends among specific subpopulations, with the exception of LGBTQIA+ or youth in general, likely due to the limitation in participant sample size. Regarding LGBTQIA+, or youth in general, dedicated services to these populations were noted as underdeveloped. Overall, the health and wellness of Ocean County citizens is dependent upon many determinants. One of these is the local human and social service system of care - a complex combination of services and agencies that are inter-linked and dependent upon one another. It is community-based and integrated across the life span and across service locations. More emphasis will be placed on service promotion, prevention and advocacy for these identified subpopulations.



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 Ocean County, 19 percent of households experienced severe cost burden (50% of income or more is spent on housing) for housing in 2017. This percentage is equal to the percentage for the State of New Jersey (U.S. Census Bureau American Community Survey; *see County Data Profile for Additional Source Information*). In 2019, the latest year of data made available in the County Data Profile, 20 percent of households experienced at least one of four severe 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 the United States Department of Housing and Urban Development (HUD); *see County Data Profile for Additional Source Information*).

Need Assessment Key Findings

Summary: Scope of the Need

Ocean County has a total of 286,170 housing units (fifth highest in the state) consisting of 216,383 detached single-unit structures, 37,135 multi-unit structures and 6,233 mobile homes with an overall housing occupancy rate of 79.2 percent. More than 80 percent of all housing units are owner occupied (third highest in the state)⁹ and the average value of owner-occupied housing units is \$279,000. The median of the monthly owner costs for homeowners with a mortgage is \$2,034 while those without a mortgage paid a median of \$772 monthly. In 2019¹⁰, 1.11 percent of all housing units, or 3,132, in Ocean County were in foreclosure.

Rental units account for 19.3 percent of all housing units in Ocean County and renters pay an average gross rent³ of \$1,428 per month, which is slightly higher than the State average of \$1,334. Gross rent provides information on the monthly housing cost expenses for renters. Gross rent is the contract rent plus the estimated average monthly cost of utilities (electricity, gas, water and sewer) and fuels (oil, coal, kerosene, wood, etc.) if these are paid by the renter (or paid for the renter by someone

⁹ "Ocean County Profile," *Census Reporter*, www.censusreporter.org/profiles/05000US34029-ocean-county-nj/

¹⁰ "Foreclosure Rates by County," *ATTOM Data Solutions*, David M. Zimmer/NorthJersey.com

else). In 2019, the rental vacancy rate for Ocean County was 1.4 percent. This number represents the fraction of homes for rent that are not occupied.

As the availability of affordable housing is considered a limited resource, residents in need of homelessness, homelessness prevention and voucher based rental services have experienced barriers in accessing resources. Ocean County has emergency shelter services for specific populations such as youth 10-21 years, families and survivors of domestic violence but does not have a traditional homeless shelter. For those with limited income, there are rooming houses and a significant amount of hotel/motels that offer daily, weekly and/or monthly rates. However, the availability of hotel/motel rooms is seasonal as Ocean County is a popular shore destination for many out-of-county residents during the summer. In consideration of the large population of residents 55 years and older, numerous senior living and retirement communities exist throughout the county. There are also housing developments catered to individuals with disabilities.

The majority of funding to provide homelessness and homelessness prevention services is provided to the county by the New Jersey Department of Human Services (NJ DHS), Division of Family Development (DFD) and the federal government. DFD provides Social Services for the Homeless (SSH)/Temporary Assistance for Needy Families (TANF) dollars to address issues such as emergency hotel/motel placement, security deposits, first month's rent, eviction prevention and utility assistance. There are also several non-profit and faith-based organizations used as funding resources by the community for temporary hotel/motel placement or rent assistance.

During the winter season, specifically November 1 through March 31, Code Blue is active throughout the State and Ocean County. Code Blue refers to a period when temperatures are predicted to reach 32 degrees and below, regardless of precipitation. Warming center services are available to ensure at risk individuals experiencing homelessness do not remain outside through extreme weather conditions. Additionally, numerous ancillary services are offered during Code Blue to assist individuals in obtaining stable, permanent housing and other needed resources, such as services for mental health and substance use disorder.

Although unprecedented, the coronavirus (COVID-19) pandemic is forecast to have a tremendously negative effect on housing in Ocean County. Executive Order No. 106 was issued on March 19, 2020 and states "a lessee, tenant, homeowner or any other person shall not be removed from a residential property as the result of an eviction or foreclosure proceeding." The eviction moratorium will end two months after the State's Public Health Emergency Declaration expires. The Executive Order does not restrict property owners from legally filing evictions during the moratorium, which can be harmful to a renter's credit history or ability to obtain affordable housing in the future. A tidal wave of evictions numbering in the hundreds of thousands is predicted if financial aid or legal help is not available. This trend will likely cause a spike in the number of individuals experiencing homelessness throughout the county. As a result, the need for services related to housing will increase leading to a

catastrophic demand within an overstretched and under-resourced system.

Summary: Nature of the Need

About 90 percent of respondents to the needs assessment questionnaire identified housing as one of the top three most important basic needs in Ocean County. Respondents also noted the top three barriers to addressing housing needs in the county are long waitlists, a lack of awareness of services for housing needs and transportation. A little more than 39 percent of respondents described housing as costly and reported struggling to find available, affordable housing units. Assessment participants also suggested the establishment of an ongoing sheltering program, like a transitional housing center, would better assist those experiencing homelessness in obtaining permanent self-sufficiency. Others noted a need for safe, affordable housing units without age restrictions.

Individuals able to locate available safe, affordable housing often report reasons for application denial as low credit scores, criminal history, lack of references, prior eviction history, and/or immigration status. Nearly half of the respondents also identified eligibility requirements as a key barrier to addressing housing needs. Some noted the inability to collect all of the necessary paperwork to complete applications as a barrier to services. The almost 65 percent of respondents that identified transportation as a key barrier explained it is difficult to travel within the county because few areas have close access to public transportation. Additionally, many noted the majority of services are isolated to one area (Toms River) and limits access to services for those in the southern and western parts of the county.

Lack of awareness of services was identified by nearly 70 percent of the respondents as a barrier to services. Discussion throughout the focus groups found that most people learn about housing services through word-of-mouth communication, internet searches, social media, emergency services, schools, non-profit or faith-based organizations and referrals. A majority of respondents and focus group participants noted individuals in need of services often struggle with the stigma of asking for help and will not attempt to access services for that reason. It is only when emergency services or family and friends intervene that some individuals will seek out necessary resources. In addition, long waitlists continue to be a deterrent for most individuals as it is assumed that resources are not available to serve the immediate need.

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

While service providers in Ocean County have always been proficient at maximizing limited resources, it is essential to continue reviewing potential funding resources, advocating for needed change, and informing local leadership regarding innovations that will affect positive change within an extremely overburdened system. The Human Services Advisory Council (HSAC) in collaboration and partnership with the Children's InterAgency Coordinating Council (CIACC) inherently engage in the aforementioned strategies to identify and address, to its capability and scope, change. The activities

of these groups have led to successful programs and assistance within our community. Nevertheless, to address needs identified through this process, the HSAC and CIACC will specifically focus on strategic information sharing and distribution methods that may better gain traction and saturation within the community. This may include broadening the type of agencies, businesses and organizations involved in social and human service initiatives locally.

Continued research will be conducted to ensure an understanding of the contributing and evolving factors influencing homelessness can be addressed more adequately within prevention initiatives. The OCDHS in collaboration with its community partners will continue to advocate for enhanced funding, broader eligibility considerations and non-traditional programming opportunities to serve emerging and foreseeable needs. Likewise, advocacy will continue around duplicative or conflicting guidelines, processes or regulations that pose barriers in accessing services.

Housing as an essential resource, yet primary identified need, requires continued influence in the shifting of the affordability of rentals, affordability in the purchase price of homes, availability of ongoing or long-term rental assistance, availability of affordable housing options and broader eligibility requirements determined by State or Federal guidelines. Issues related to accessing affordable housing options and housing services have been ongoing and will likely continue in the wake of the COVID-19 pandemic. While our goal, in Ocean, remains to achieve an accessible system of support promoting self-sufficiency, independence and wellness, desired outcomes cannot be achieved without a commitment of affordable housing, which remains a nationwide crisis in which macro and micro level influencers have a key role in the discovery of innovation.

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

Focus groups and key informant interviews found that Ocean County residents experiencing homelessness often stay with family or friends, if available, until permanent housing can be achieved. Residents also pursue housing assistance through local faith-based organizations, the County Board of Social Services, internet searches and social media. Participants noted the Ocean County Housing Resource Guide, which the HSAC updates and distributes annually, is helpful to obtaining resources for assistance. Additionally, participants expressed that a majority of residents lack knowledge about the State's Help and Homeless Hotline, NJ 2-1-1, as the service is not widely advertised. Key barriers noted by participants included the lack of awareness of services, transportation, long waitlists and eligibility requirements. Suggestions made to local leadership were in reference to the expansion of outreach, homelessness prevention and increased availability of funding.

Need Area: Survey Results

Housing

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.	76	32.89 %	42.11 %	19.74 %	1.32 %	3.95 %	100 %
2. Anyone in the county is able to access services.	76	21.05 %	40.79 %	26.32 %	3.95 %	7.89 %	100 %
3. Services are widely advertised and known by the county.	75	20.00 %	53.33 %	18.67 %	1.33 %	6.67 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	76	6.58 %	27.63 %	38.16 %	6.58 %	21.05 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	76	6.58 %	21.05 %	32.89 %	2.63 %	36.84 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	75	2.67 %	18.67 %	40.00 %	6.67 %	32.00 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	76	55	72.37%
Services do not exist	76	26	34.21%
Transportation	76	48	63.16%
Cannot contact the service provider	76	21	27.63%
Too expensive	76	30	39.47%
Lack of awareness of service	76	53	69.74%
Cultural Barriers	76	27	35.53%
Services provided are one-size fits all, and don't meet individual needs	76	32	42.11%
Stigma Leads to Avoidance	76	34	44.74%
Eligibility Requirement (explain below)	76	35	46.05%
Other (explain below)	76	9	11.84%

Need Area: Food

Status: Prioritized 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 **Ocean County**, the food insecurity rate for households was approximately nine percent in **2017** (United States Census Bureau Current Population Survey and United States Department of Agriculture Economic Research Service; see *County Data Profile for Additional Source Information*). This percentage is **less than** the percentage rate for New Jersey.

Need Assessment Key Findings

Summary: Scope of the Need

Ocean County has over 20 grocery stores along with numerous specialty and farmer markets spread across its 915 square miles. Emergency food is accessible through food pantries, churches and soup kitchens. Volunteers and staff at these programs will often refer individuals to additional needed services, when appropriate. Food insecurity can be a complex issue intertwined with other systemic challenges, such as low wages, a shortage of affordable housing, high medical costs and unemployment. Ocean County has the sixth highest annual cost of living in the state and families earning twice the federal poverty level may still struggle with food insecurity.

The United States Department of Agriculture (USDA)¹¹ describes food security through four levels; high food security, marginal food security, low food security and very low food security. Households with high food security have not had problems, or anxiety about, consistently accessing adequate food whereas marginal food secure households have had issues accessing adequate food, but the quality, variety and quantity of the food was not substantially reduced. Households with low food security have experienced reduced quality, variety and desirability of the accessible food, but the quantity of food intake and normal eating patterns were not substantially disrupted. In very low food secure households, eating patterns of one or more household members were disrupted and food intake reduced because the household lacked money or other resources for food.

An estimated 60 food pantries are scattered throughout Ocean County, the majority of which are operated by local faith-based and non-profit organizations. Fulfill, the food bank serving Ocean and

¹¹ "Definitions of Food Security," *U.S. Dept. of Agriculture*, www.ers.usda.gov

Monmouth Counties, reports allotting one million pounds of food each month for families in the two counties. Annually, Fulfill has served 136,000 people in Ocean and Monmouth Counties, 50,000 of which were children.¹² In Ocean County, 15,662 individuals were participating in the Special Supplemental Nutrition Program for Women, Infant and Children (WIC) as of 2018.¹³ Moreover, the same data reported 27,970 children were living in families receiving New Jersey’s Supplemental Nutritional Assistance Program (NJ SNAP). Seniors are also greatly affected by food insecurity and research has shown 3 out of 5 seniors in the United States¹⁴ who qualify for a State’s SNAP do not participate. Several factors contribute to the low participation rate including barriers related to mobility, technology and stigma. Older Americans are often discouraged by widespread myths about how the program works and eligibility requirements. Ocean County has its Meals on Wheels program, operated through Community Services, Inc., that delivers meals to seniors who are unable to purchase or prepare their own meals. Each year¹⁵, Meals on Wheels of Ocean County serves over 220,000 meals to more than 8,000 seniors.

Public transportation is not easily accessible within all areas of the county so individuals are limited without a personal vehicle or the capability to utilize rideshare services. Several grocery stores do offer personal shopping and home delivery services to accommodate customers. Additionally, some pantries have volunteers willing to deliver food to homebound individuals. In 2018, there were 52,900 food-insecure persons¹⁶ in Ocean County leading to a food insecurity rate of 8.9 percent. This rate puts Ocean County amongst the ten most food-insecure counties in the state. Additionally, an estimated 27 percent of individuals fell above the NJ SNAP and other nutrition programs threshold for eligibility while 73 percent remained below the threshold.

The national pandemic has significantly affected the demand for food in Ocean County. Early response to the spread of the outbreak included panic buying to stock up on food and other resources, including toilet paper, hand sanitizer and cleaning supplies. In turn, food banks struggled to meet the need because grocery warehouses were running out of basic items. State officials signed Executive Order No. 104 on March 16, 2020, which suspended normal business operations for dining establishments and only allowed businesses to offer food delivery and/or take-out services. Communities along the Jersey Shore were hard-hit by the mandate as many jobs in the area are part of the service industry. A significant amount of newly unemployed residents began to experience food insecurity for the first time. Job loss and other economic crises associated with COVID-19 related

¹² “Hunger in our Community,” *Fulfill NJ*, www.fulfillnj.org/hunger-in-our-community/

¹³ “Ocean County Indicators,” *Kids Count Data Center*, www.datacenter.kidscount.org/data#NJ/5/0/char/0

¹⁴ “SNAP & Senior Hunger Facts,” *National Council on Aging*, www.ncoa.org/news/resources-for-reporters/

¹⁵ “Meals on Wheels,” *Meals on Wheels of Ocean County*, www.csimow.org/

¹⁶ “Map the Meal Gap,” *Feeding America*, www.feedingamerica.org/

response measures is predicted to push the rate of food insecurity in Ocean County to 14.2 percent by the end of 2020.

Summary: Nature of the Need

In 2019, NJ SNAP reached 705,000 residents¹⁷ throughout the state. Data shows almost 47,000 of those residents live in Ocean County. Food insecurity is commonly associated with poverty but most food insecure households are living above the federal poverty level, with at least one individual who is employed. Of those, several consumers explained an inability to qualify for NJ SNAP because the household income reaches slightly above the gross monthly income requirement. According to the USDA, more than 11 million children¹⁸ live in food insecure homes in the United States. Ocean County had over 16,000 children¹³ receiving free or reduced school lunch in 2019 to offset the lack of nutrient dense food available at home. About 8,500 children received free or reduced school breakfast in Ocean County during 2019. Another 7,150 students were eligible for the two programs but did not participate. This is likely because the family is unaware of the resource or, due to unwarranted stigma surrounding food insecurity, negatively perceives the need for assistance. Studies have shown parents can sometimes fear child protective services will intervene in response to a household's level of food insecurity.

Nearly 60 percent of respondents to the needs assessment questionnaire identified food as one of the top three most important basic needs in Ocean County. Individuals noted struggling between using incomes to cover household expenses and having nutritious food available. Of the key barriers, lack of awareness of service, transportation and stigma were identified as those encountered most by consumers in Ocean County. Individuals also stated there is little to no education available on the eligibility requirements to receive assistance at food banks. Most expressed the belief that level of income or immigration status is documented, which made consumers wary of utilizing the services. For those currently or previously engaged in services, more than half of respondents to the questionnaire agreed staff are well trained, knowledgeable and provide good customer service.

More than 65 percent of respondents identified a lack of awareness of services related to food as the top barrier for residents in Ocean County. Respondents suggested expansion of the marketing of services to ensure all residents, regardless of the household's current food insecurity level, are outreached with information. Over half of the respondents agreed access to transportation is a key barrier in obtaining food assistance resources among residents as well. Without a personal vehicle, it is difficult for consumers to arrange transportation to food banks or local providers when services are needed. The lack of transportation services is seen more prevalently in the southern and western

¹⁷ "SNAP State-by-State Fact Sheet," Center on Budget and Policy Priorities, www.cbpp.org/research/food-assistance/a-closer-look-at-who-benefits-from-snap-state-by-state-fact-sheets#New_Jersey

¹⁸ "Child Hunger in America," *No Kid Hungry*, www.nokidhungry.org/who-we-are/hunger-facts

areas of the county. Additionally, the associated stigma around government assistance programs has led consumers to refrain from seeking help at all.

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

Food insecurity can be a long term or temporary need for individuals based on a number of risk factors such as income, housing status and employment. Limited access to transportation also increases the risk of experiencing levels of food insecurity. The HSAC will continue to work in collaboration with local service providers to advocate for needed change and advise local leadership of improvements that can support the system of resources positively. Research will be conducted to understand the risk factors influencing food insecurity in Ocean County so that these factors are more adequately addressed within preventative measures. Representatives from local food banks and pantries serve as members of the HSAC to provide updates on services and local events ensuring a unified approach to service delivery for the community.

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

Focus groups and key informant interviews for this need area found that a majority of residents in Ocean County are referred to services by family or friends through word-of-mouth communication. Some reported locating services through internet searches, social media, local faith-based organizations or school staff. Many noted the barriers specific to food bank services were the lack of available foods to meet specialized dietary needs, lack of fresh produce and that services are only limited to regular business hours. Additionally, participants explained the income eligibility guidelines per household size for NJ SNAP are difficult to meet and that the application requires an extensive amount of verification that leads to a household's inability to meet its immediate need for food. Access to transportation was also cited as a barrier to services in every focus group and key informant interview.

Need Area: Survey Results

Food

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.	76	1.32 %	30.26 %	39.47 %	17.11 %	11.84 %	100 %
2. Anyone in the county is able to access services.	76	2.63 %	35.53 %	39.47 %	17.11 %	5.26 %	100 %
3. Services are widely advertised and known by the county.	76	7.89 %	42.11 %	28.95 %	15.79 %	5.26 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	76	5.26 %	23.68 %	31.58 %	17.11 %	23.37 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	76	2.63 %	5.26 %	47.37 %	21.05 %	23.68 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	76	3.95 %	11.84 %	42.11 %	19.74 %	22.37 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	76	7	9.21%
Services do not exist	76	8	10.53%
Transportation	76	49	64.47%
Cannot contact the service provider	76	14	18.42%
Too expensive	76	3	3.95%
Lack of awareness of service	76	50	65.79%
Cultural Barriers	76	24	31.58%
Services provided are one-size fits all, and don't meet individual needs	76	14	18.42%
Stigma Leads to Avoidance	76	40	52.63%
Eligibility Requirement (explain below)	76	11	14.47%
Other (explain below)	76	9	11.84%

Need Area: Healthcare

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 **Ocean County**, the estimated proportion of children under 18 years old (minors) with no health insurance coverage was 3.7 percent in 2017. This percentage is **less than** the estimated percentage of minors with no health insurance for New Jersey in the same year (U.S. Census Bureau American Community Survey; see *County Data Profile for Additional Source Information*).

In Ocean County in **2018**, there were 335 reports of late or lack of prenatal care. This was an **increase** of 48 reports from the previous year (Centers for Disease Control and Prevention; see *County Data Profile for Additional Source Information*).

Need Assessment Key Findings

Summary: Scope of the Need

In Ocean County, 94.2 percent of the population has health insurance coverage⁴ with 46.4 percent on employee plans, 16.9 percent on Medicaid, 17.6 percent on Medicare, 12.6 percent on non-group plans and less than 7 percent without health insurance. Of the data available for Ocean County, Point Pleasant Beach and Seaside Heights have the largest percentages of minors without health insurance coverage. Ocean County has the fourth highest New Jersey Family Care Medicaid (the Federal/State-funded health insurance program) participation in the State. In 2019, 51,095 children under 18 years in the county were receiving health insurance coverage through the program. On average, less than 10,000 adults in Ocean County are enrolled in New Jersey Family Care Medicaid. Families can apply for the program at the County Board of Social Services in Toms River.

The average number of patients visiting primary care physicians in Ocean County reaches at minimum 2,500 per year. There is a growing need for more primary care physicians in the State and Counties most at risk face significant health challenges and barriers. A data report published through the Association of American Medical Colleges¹⁹ shows primary care doctor-to-patient ratios exceed the national median in 13 of the State's 21 Counties, including Ocean. Ocean County has roughly half the number of providers needed to meet the national median of 90 primary care physicians, or PCMDs,

¹⁹ "2019 State Physician Workforce Data Report," AAMC, www.aamc.org/data-reports/workforce/data/2019-state-profiles

per 100,000 residents. Others included Cumberland, Salem, Sussex, Hudson and Passaic Counties. Certain population groups, such as seniors, typically require more primary care services.

Part of the discussion surrounding primary health care in the State and County relates to Advanced Practice Nurses (APNs). As of 2019, there were 9,799 active APNs in the state and an upward trend in the number of APN graduates. Evidence shows the number of practicing APNs could bridge the gap of primary care providers in two-thirds of New Jersey's Counties. This would require the expansion of APN authority to allow independent prescribing of medications. Current law requires a collaborative agreement with a physician.

There are numerous urgent care centers, three hospital systems (RWJBarnabas Health, Encompass Health, Meridian Health), 10 federally qualified health centers (FQHCs) and one veterans clinic operated by the United States Department of Veterans Affairs, Veterans Health Administration. The Ocean County Health Department (OCHD) is open to residents in need of a range of services including, alcohol and drug services, chronic disease screening, and community assessment and health education. Ocean County is also home to an extensive scope of health and wellness programs provided by County, State, and non-profit agencies.

Residents of Ocean County have an estimated life expectancy of 79.4 years. Recent data²⁰ shows 90 percent of the population has adequate access to locations for physical activity within the county. Still, nearly 30 percent of the county reports experiencing obesity. Heart diseases and cancer have claimed the first and second spots as the leading causes of death in Ocean County⁸ with 201 deaths per 100,000 and 163 deaths per 100,000 individuals in 2014-2016 respectively. The age distribution of a given population often determines the most common health problems in a community and Ocean County's large population of seniors likely attributes to these two leading causes of death.

The COVID-19 pandemic is likely to have a profound and lingering impact on the health care system. At the peak of the outbreak, hospitals mobilized to meet capacity needs, increased staffing resources through reciprocity of healthcare professional licenses across state lines and broadened the use of telehealth by clinicians to provide care. In Ocean County, the latest data for the week ending December 11, 2020 showed more than 1 out of every 4 hospital beds as occupied by patients experiencing COVID-19 symptoms. Health care providers have reported a decline in traditional emergency cases, like heart attacks and strokes attributing this to a fear of contagion. Health experts warn the delayed or indirect effects that could result from deferred or canceled treatment are substantial. Additionally, responses like social distancing and stay-at-home directives has placed a

²⁰ "County Health Rankings & Roadmaps," *Robert Wood Johnson Foundation Program*, www.countyhealthrankings.org/app/new-jersey/2020/rankings/ocean/county/outcomes/overall/snapshot

greater number of the population at risk for developing acute behavioral health issues, such as depression, anxiety, substance use disorder and post-traumatic stress disorder (PTSD).

Summary: Nature of the Need

Nearly 70 percent of respondents agreed that healthcare is one of the top three important basic needs for residents in Ocean County. There are many facets to health care access, which incorporates medical, dental and mental health care. Consumers need comprehensive coverage to include preventative services, providers that accept the individual's insurance and a relatively close geographic location of providers to patients. The barriers identified most in this need area were transportation, lack of awareness of services and long waitlists. Participants also noted adequate health care coverage is often costly.

Approximately 68 percent of respondents selected transportation as a substantial hurdle in health care for Ocean County residents. Public transportation is limited throughout the county and without a personal vehicle or access to rideshare services, it can be difficult for residents to obtain needed services. The Ocean Ride transit system and its "Reserve-A-Ride" program is available for seniors (age 60 and over) and individuals with disabilities (age 18 and over) to access non-emergency medical transportation services, such as to a county located doctor's office, hospital or other medical facility. Additionally, Ocean Ride can provide regularly scheduled transportation services for veterans to access major in and out-of-county New Jersey Department of Veterans Affairs (VA) medical clinics.

A lack of awareness of services related to health care was reported as a barrier by almost 60 percent of respondents. Most participants felt that services were available within the county but not widely advertised to the public. It was noted a majority of residents search for services through the internet, social media and referrals from family or friends. Consumers also discover services while engaged in other assistance, like employment or housing. Additionally, the OCHD regularly hosts events to outreach community members and provide education on various health care topics.

Long waitlists and expensive health care costs were identified equally by 44 percent of respondents to the needs assessment questionnaire. Medical appointments often need to be scheduled weeks or months in advance. At times, medical providers will not take new patients until the office is able to shorten the waitlist. Providers commonly operate during regular business hours with few offering limited services at night or on weekends. Individuals are forced to take days off from work or remove children from school to accommodate those hours and receive necessary care. Respondents also expressed the inability to afford health care plan premiums, deductibles, copays and other related expenses, which can prohibit individuals from receiving proper care.

Need Area: Survey Results

Healthcare

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.	75	14.67 %	33.33 %	33.33 %	5.33 %	13.33 %	100 %
2. Anyone in the county is able to access services.	75	14.67 %	33.33 %	38.67 %	5.33 %	8.00 %	100 %
3. Services are widely advertised and known by the county.	74	16.22 %	35.14 %	32.43 %	5.41 %	10.81 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	75	9.33 %	16.00 %	40.00 %	6.67 %	28.00 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	75	2.67 %	9.33 %	48.00 %	16.00 %	24.00 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	75	2.67 %	9.11 %	46.67 %	18.67 %	22.67 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	75	33	44.00%
Services do not exist	75	15	20.00%
Transportation	75	51	68.00%
Cannot contact the service provider	75	21	28.00%
Too expensive	75	33	44.00%
Lack of awareness of service	75	43	57.33%
Cultural Barriers	75	20	26.67%
Services provided are one-size fits all, and don't meet individual needs	75	15	20.00%
Stigma Leads to Avoidance	75	29	38.67%
Eligibility Requirement (explain below)	75	24	32.00%
Other (explain below)	75	7	9.33%

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 safety in the community. (E.g., local police, the New Jersey Department of Children and Families' (NJ DCF) Division of Child Protection and Permanency (DCP&P), Family Success Centers, security companies, neighborhood watch, safe havens, hospitals, etc.)

In Ocean County there was a total of 555 violent crimes in 2019 and the violent crime rate per 1,000 was 0.93 percent (New Jersey Department of Law and Public Safety, Division of New Jersey State Police, Uniform Crime Reports, Updated 8/15/19; *see County Data Profile for Additional Source Information*). Of the non-violent crimes committed there was a total of 26 arson reports, 189 motor vehicle thefts, 4,741 larcenies and 960 burglaries in Ocean County (New Jersey Department of Law and Public Safety, Division of New Jersey State Police, Uniform Crime Report, Updated 8/15/19; *see County Data Profile for Additional Source Information*).

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

Crime prevention and community policing in Ocean County falls under the collaborative -jurisdiction of the Ocean County Prosecutor's Office (OCPO), the Ocean County Sheriff's Office, local municipal police departments and the New Jersey State Police (NJSP).

The County Prosecutor for each county in the State is appointed by the governor. The OCPO serves as the lead law enforcement Agency of Ocean County and is organized into multiple units that focus on specific areas of crime, policing and quality assurance. The Investigative Unit of the OCPO targets criminal investigations of major crimes, special victims, the Narcotics Strike Force and special investigations. The Litigation Unit within the OCPO is divided amongst administration and court functions while the Professional Standards Unit specializes in addressing internal affairs investigations and police training. The Victim and Witness Unit provides advocacy to witnesses and survivors of crime. The Agency leads several community-based programs to encourage a safe and secure community relinquished from the fear of violent crime.

In 2020, the OCPO hosted a series of virtual town halls on law enforcement and the community to share information and answer questions pertaining to social justice, use of force, police accountability, training, internal affairs and the overall responsibilities and services available. Participating community leaders included the elected representatives, the County Sheriff, faith-based leaders and local police Chiefs.

The Sheriff's Office is also a system of dedicated units addressing specific areas of crime, safety and disaster response, with patrols canvassing communities countywide. Additionally, housed within the Sheriff's Office are several divisions including the Office of Emergency Management and the Fire Marshal's Office, Foreclosures and Specialized Community Services. Other units include Crime Scene Investigations, Field Services – Regional Fugitive Task Force, Honor Guard, Civil Process Unit, Police Academy and the Crisis Negotiations Team. The Sheriff's Office facilitates several safety focused community programs through its Specialized Community Services Unit which include the Child Seat Safety Program, Safe Driving, Vehicle Theft Prevention, Heatstroke, Protecting the Elderly, Toy Drives, K-9 Enforcement, Child IDs, Project Lifesaver, Substance Use Prevention, Community Emergency Response Team and the Youth Police Camp.

The Ocean County Sheriff's Office Communications Division consists of a 9-1-1 Public Safety Answering Point (PSAP), which answers 9-1-1 calls for all 33 of the municipalities in Ocean County and a full Public Safety Dispatch Operation. The operation is a consolidated communications center, serving multiple jurisdictions and disciplines. The Ocean County Sheriff's Office Communications Division provides professionally competent public services to over 600,000 residents year round and a swell of one million residents during the summer travel months. Law enforcement dispatch services are provided for the Sheriff's Office, OCPO, Medical Examiner's Office and 13 municipal police agencies. Additionally, Fire Dispatch Services are provided for 39 fire companies, Emergency Medical Dispatch services for 22 first aid squads and the dispatch of 3 special response and tactical support teams. Paramedic and Life Flight dispatch is provided for the entire county. The Communications Division is a two-stage operation with a dedicated call taker area and a separate dispatch area. The call takers communicate with the police, fire, emergency services dispatchers through a Computer Aided Dispatch System (CAD). The County's public safety and public service communication needs are handled with the use of a 700 MHz Trunked Radio System.

In continuing its commitment to the safety and security of Ocean County's residents, the Ocean County Sheriff's Office Communications Division PSAP underwent several recent infrastructural enhancements. The 9-1-1 center is capable of receiving and dispatching text to 9-1-1 calls. In 2019, the police dispatch positions were expanded to allow for 33 percent more coverage. In 2018, the Ocean County Sheriff's Office Communications Division handled over 547,000 telephone calls of which 202,000 were 9-1-1 calls. The Division also dispatched 345,000 calls for service. The Communications Division is also currently equipped with a Mobile Command Unit (MCU). The MCU responds to large-scale incidents such as fires, multi-casualty incidents and public relations events. It is a mobile command center operated and staffed by the members of the Communications Division.

The OCPO and Sheriff's Office collaborate with local municipal law enforcement, community agencies and non-private organizations to support initiatives, including but not limited to:

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- Drive Sober
 - Child Safety Seats
 - It Gets Better
 - Unbreakable: Anti Bullying Initiative
 - Distracted Driving
 - NJ Move Over
 - Drug Abuse Resistance Education
 - Click it or Ticket
 - Teen Driving Safety
 - Bike Helmet Safety
 - Cyber Safety

The NJSP provide general police services associated with the statewide enforcement of laws, prevention of crime, the protection of State officials and properties, the pursuit and apprehension of offenders and the gathering of legal evidence to ensure offender conviction. In certain municipalities, NJSP is the sole provider of general police services. The NJSP patrols all State highways and investigates accidents occurring on those highways. The Garden State Parkway and Routes 9/166, 72, 35, 70, 37 and 88 are all categorized as State of New Jersey highways in which highway and traffic enforcement falls under NJSP jurisdiction within Ocean County. Troop "C" of the NJSP serves the central jurisdictional portion of New Jersey, which includes Ocean County. There are a contingent of Criminal Investigation Office Detectives who handle all criminal investigations in Troop "C". Upon request, the Troop also assist other police agencies located in central New Jersey. Six Flags Great Adventure in Jackson is also within the scope of Troop "C". During high profile music concerts and shows, personnel are assigned to assist various law enforcement agencies with traffic and crowd control. The NJSP provide statewide investigation, intelligence and emergency management services while supporting local law enforcement efforts. The maintenance of criminal records and identification systems is the exclusive responsibility of the NJSP.

There are 31, of Ocean County's 33 municipalities, with a municipal police department. Barnegat Light Borough contracts with the Long Beach Township police department for services. Eagleswood Township is patrolled by the New Jersey State Police. Municipal police serve the municipality, receiving funding through the municipal budget and report directly to the administrative bodies within that municipality. There are currently 1,104 municipal police officers in Ocean County.

The latest county crime rate data¹ from 2019 reported Ocean County as having a lower rate of crime, 1,087.8, than a majority of the State. The crime rate refers to instances of murder, rape, robbery and aggravated assault, which are categorized as violent crimes. Without accounting for population size, Ocean County also has the lowest juvenile arrest rate in the State, five juvenile arrests per 1,000

juveniles in the county. Data from 2019²¹ reported Island Heights had a limited number of violent crimes, followed by Plumsted and Ocean Township. The small population size of these municipalities, less than 10,000 residents, is linked to the overall absence of violent crimes reported. However, many of the smaller beach communities are noted to have higher crime rates, which is anecdotally attributed to the influx of tourists during the summer season. Lakewood Township, the largest municipality in Ocean County, reported the highest number of violent crimes. Of the 4,063 offenses occurring in 2020²² within Ocean County and documented by the NJSP, 24 percent were cleared of charges and 762 arrests were executed.

Preliminary research amid the COVID-19 outbreak found that crime decreased in the United States during the first few months of the pandemic. The New Jersey State Police Superintendent reported at a press briefing on May 16, 2020 that crime had also dropped throughout the State. Compared to the data from March through May of 2019, arrests reduced by 65 percent. The New Jersey State Police Superintendent noted the rapid decline in overall crime was likely a result of individuals following the restrictions of Executive Order No. 107, which mandated residents to stay at home beginning March 21, 2020 to limit further spread of COVID-19. As of January 2021, the 2020 crime rate data for counties and municipalities has not been released.

Summary: Nature of the Need

Community safety is defined as reaching a state of well-being among the social and physical environments of a population. This can be achieved through the reduction of crime as well as the perceived cohesiveness of a community. It was identified as an important basic need area in Ocean County by 15 percent of respondents to the needs assessment questionnaire. Nearly 70 percent agreed there are enough services available and accessible to residents in the county. A majority of respondents also felt that law enforcement staff in Ocean County are well trained and knowledgeable. Three key barriers identified through the questionnaire were a lack of awareness of services, cultural differences and stigma. Few respondents, about 20 percent, noted access to transportation as a barrier.

Community safety includes addressing critical social problems that marginalized groups generally experience, like access to housing and food security. Numerous respondents cited significant concern for people who are homeless or individuals with disabilities. In Ocean County, local law enforcement agencies attend multiple trainings throughout the year to understand the best ways officers can engage with these vulnerable populations. Respondents additionally noted there is a shortage of multi-lingual staff among community safety providers. Language barriers and ethnic disparities in the

²¹ “Offenses Known by Law Enforcement,” *Federal Bureau of Investigation*, www.fbi.gov/services/cjis/ucr

²² “State of New Jersey Department of Law and Public Safety,” *2020 Uniform Crime Report*, www.state.nj.us/njsp/ucr/pdf/current/2020_UCR_Jan-Sept_v2.xlsx

workforce can drastically reduce the capabilities of a provider. Representatives from local police, the NJ DCF Division of Child Protection & Permanency (DCP&P) and the County Family Success Center regularly attend the monthly County Human Services Advisory Council (HSAC) meetings to inform the community of appropriate resources and upcoming events that promote community safety.

Need Area: Survey Results Community Safety

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.	74	4.05 %	16.22 %	56.76 %	14.86 %	8.11 %	100 %
2. Anyone in the county is able to access services.	74	4.05 %	14.86 %	60.81 %	12.16 %	8.11 %	100 %
3. Services are widely advertised and known by the county.	74	2.70 %	25.68 %	43.24 %	17.57 %	10.81 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	74	5.41 %	17.57 %	36.49 %	12.16 %	28.38 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	74	2.70 %	8.11 %	45.95 %	17.57 %	25.68 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	74	2.70 %	13.51 %	50.00 %	17.57 %	16.22 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	74	4	5.41%
Services do not exist	74	11	14.86%
Transportation	74	15	20.27%
Cannot contact the service provider	74	9	12.16%
Too expensive	74	3	4.05%
Lack of awareness of service	74	35	47.30%
Cultural Barriers	74	35	47.30%
Services provided are one-size fits all, and don't meet individual needs	74	10	13.51%
Stigma Leads to Avoidance	74	26	35.14%
Eligibility Requirement (explain below)	74	4	5.41%
Other (explain below)	74	14	18.92%

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, County Family Success Centers, County Board of Social Services, etc.)

The unemployment rate in Ocean County was at 3.1 percent in May 2019, a small tenth of percentage over the rate for New Jersey at that time. For the year, the average unemployment rate for the county was 4.0 percent. The COVID-19 outbreak engendered an economic downturn throughout the United States in 2020. The country's unemployment rate drastically increased from 3.8 percent in February to 14.4 percent in April. In New Jersey, the unemployment rate²³ increased from 3.8 percent in February to 16.3 percent in April. By December, nearly two million workers in New Jersey had filed for unemployment. New Jersey encountered its highest unemployment rate for 2020 in June when it reached 16.8 percent. Ocean County's unemployment rate was at its highest in April with 17.3 percent. Additionally, Ocean County had 121,152 unemployment claims by the end of the year. The highest amount of claims for the county were from Brick, Toms River, Lakewood and Jackson Townships.

Need Assessment Key Findings

Summary: Scope of the Need

The U.S. Census Bureau³ reports nearly 60% of Ocean County's population as employed. In 2019, the unadjusted unemployment rate ranged from a high of 4.8 percent to a low of 2.9 percent and the average unemployment rate was 3.6 percent. The top employers in Ocean County are Six Flag Theme Parks, Inc., the County of Ocean, RWJ Barnabas Health, Meridian Health Systems, Toms River Regional School District and Joint Base McGuire-Dix-Lakehurst. Approximately 95.4 percent of the workforce in Ocean County are employed in New Jersey and 36.5 percent work outside the county with an average commute time of 34 minutes. About 42 percent of workers have two vehicles per household. It is uncommon for residents living in Ocean County to maintain employment without a personal vehicle.

Ocean County is the second largest in New Jersey in terms of land area. Residents spend 23 percent of the household's income on transportation with an annual auto cost of \$14,705¹ (fifth highest in the state). Ocean Ride, through the Ocean County Department of Transportation Services, is the County operated transit system and includes two major services: the "Reserve-A-Ride" Program, which provides door-to-door, non-emergency medical transportation service to seniors (60 years and older)

²³ "Local Area Unemployment Statistics," *U.S. Bureau of Labor Statistics*, www.bls.gov/eag/eag.nj.htm

and persons with disabilities (18 years and older) and local modified fixed bus routes. The Ocean Ride transportation system currently includes 12 bus routes that operate throughout Ocean County. The routes are designed to connect key residential areas with popular destinations such as local governmental facilities, healthcare, shopping, employment, social services and other transit connections. Funding for the Ocean Ride System is provided by County tax dollars as well as State and Federal grants. There are only two bus terminals in Ocean County operating NJ Transit bus routes, Lakewood and Toms River. There is also an NJ Transit train station in Point Pleasant. The capacity at which consumers can easily access public transportation in Ocean County has always been a large barrier to services.

The most common employment sector for those who live in the county are; education services, health care and social assistance. The least common employment sectors are agriculture, forestry, fishing, hunting and mining. The lowest paying industries are arts, entertainment and recreation. The median household income for County residents in 2019 was \$70,909, lower than the State median but higher than that of the United States. Males living in Ocean County earned a median income of \$62,439 while women earned a median income of \$45,174. The current poverty rate in Ocean County is 10.7 percent, a number that is lower than the national average of 13.1 percent. The most common racial or ethnic group living below the poverty line in Ocean County is African American followed by Hispanic and White.

Jobseekers or those in need of career training can access assistance through the local Ocean County PIC, the One-Stop Career Center (OSCC). The Center provides services to youth/young adults, seniors, and veterans. Services can include but are not limited to career counseling, in-demand occupational training, job search assistance, education/literacy, vocational rehabilitation and workforce/labor information. Those receiving public assistance (Temporary Assistance for Needy Families (TANF)/General Assistance/NJ SNAP) are able to access the OSCC and other employment/training services through the WorkFirst New Jersey Program. Ocean County residents reentering the workforce after incarceration also have access to the NJ Reentry Corporation, which can assist with removing barriers to obtaining gainful employment for this population.

The COVID-19 pandemic has brought devastating economic consequences to the state. In 2020, New Jersey lost its 10-year job growth within two months. In April of that year, New Jersey lost 757,700 jobs, or 18 percent of its total employment. The State imposed Executive Order No. 107 on March 21, 2020 that required all residents to remain at home unless obtaining services deemed as essential by the Executive Order. The leisure and hospitality sector in the State, which includes restaurants and hotels, was largely impacted as it lost 236,500 jobs by April. Tourism in Ocean County is a \$5 billion annual industry and 98 percent of all businesses in the County are classified as small businesses. Ocean County ranks third among the 21 Counties in New Jersey for tourism revenue, bringing in 11 percent of the State's total tourism dollars. Several key businesses like restaurants, bars, County parks and recreation fields were closed or remained open with limited capacity from Memorial Day

until after Labor Day. Other businesses could only provide curbside pick-up and delivery services. The evolving state of the pandemic led Ocean County to reach 121,152 unemployment claims between March 21, 2020 and December 26, 2020.

Summary: Nature of the Need

More than 40 percent of respondents to the needs assessment questionnaire identified employment and career services as one of the top three most important basic need areas among Ocean County residents. Over 70 percent of respondents noted the most significant barrier within employment and career services is the lack of transportation options encountered by individuals that do not have a personal vehicle or access to rideshare services. Respondents suggested implementing satellite or mobile employment programs to help bridge the gap between residents living outside Toms River, which is the municipality the majority of services in this sector is located. Transportation is also limited outside of regular business hours, on nights and weekends and during holidays. The multitude of transportation boundaries make it difficult for individuals to find, apply for and retain employment.

An additional barrier, identified by 67 percent of respondents, is the lack of awareness of services as respondents felt employment and career services are not widely advertised or known by residents in Ocean County. Most employers have shifted to posting available jobs via the internet rather than in print, which confines those individuals without access to internet and those without the technological proficiency to navigate these online websites. Although it is typical for individuals to neglect asking for help until an emergent situation arises, the availability of services are still largely shared through word-of-mouth communication.

Moreover, as Ocean County is reliant on its tourism income, there are substantial amounts of part-time seasonal employment opportunities contributing to the lack of sustainable employment. Respondents noted this deficit affects the ability to obtain other basic needs like housing, transportation and healthcare. The leading employer in Ocean County, Six Flags Theme Parks, Inc. is open all year but with lower staffing levels during the winter months. Large portions of businesses in Ocean County are restaurants and retail establishments, which often do not allow individuals to earn a sustainable wage that covers the cost of living in Ocean County. The average annual salary among retail salespersons, cashiers and restaurant servers throughout New Jersey was \$25,253 in 2017²⁴ and the average cost of living in Ocean County is \$42,190⁶ for a single individual with no children.

Repeatedly noted was the lack of cultural diversity within agencies that provide these services. Non-English speaking individuals often have difficulty articulating specific needs because there is an

²⁴ “Occupational Employment and Wages,” New Jersey Department of Labor & Workforce Development, www.nj.gov/labor/lpa/employ/oeswage/oeswage_index.html

absence of multilingual staff. Nearly 30 percent of respondents identified experiencing cultural barriers during service acquisition. New Jersey is among the top four states with the highest percentage of non-English speaking populations. The latest data reports 12 percent of households in Ocean County speak a language other than English. Research has shown the demand for employees proficient in more than one language will grow substantially in the next five years.

Need Area: Survey Results

Employment and Career Services

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.	73	6.85 %	39.73 %	38.36 %	4.11 %	10.96 %	100 %
2. Anyone in the county is able to access services.	73	6.85 %	32.88 %	42.47 %	4.11 %	13.70 %	100 %
3. Services are widely advertised and known by the county.	73	8.22 %	50.68 %	26.03 %	4.11 %	10.96 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	73	8.22 %	23.29 %	36.99 %	8.22 %	23.29 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	73	1.37 %	15.07 %	41.10 %	8.22 %	34.25 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	73	2.74 %	10.96 %	41.10 %	13.70 %	31.51 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	73	16	21.92%
Services do not exist	73	13	17.81%
Transportation	73	52	71.23%
Cannot contact the service provider	73	15	20.55%
Too expensive	73	4	5.48%
Lack of awareness of service	73	49	67.12%
Cultural Barriers	73	21	28.77%
Services provided are one-size fits all, and don't meet individual needs	73	22	30.14%
Stigma Leads to Avoidance	73	18	24.66%
Eligibility Requirement (explain below)	73	16	21.92%
Other (explain below)	73	9	12.33%

Need Area: Childcare

Status: General Need Area

Childcare 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 childcare and before- and after- school care. It also seeks to address the existence of community services that support the need for childcare (e.g., licensed daycares providers, subsidized and unsubsidized childcare, Child Care Resource and Referral (CCR&R) agencies, Boys & Girls Clubs, YMCAs, County Family Success Centers, County Board of Social Services, etc.).

In Ocean County in 2017, the median monthly center-based childcare cost for an infant was less than the median monthly cost for New Jersey. The median monthly center-based childcare cost for a toddler was less than the median monthly cost for New Jersey. The median monthly center-based childcare cost for Pre-Kindergarten in Ocean County was less than the median monthly cost for New Jersey.

Need Assessment Key Findings

Summary: Scope of the Need

The childcare market can be difficult to navigate. In 2018, Congress approved an historic increase of nearly \$5 billion over two years for the Child Care Development Block Grant, allowing states to help meet the needs of low-income families across the nation. When adjusted for inflation, childcare funding remains below 2001 levels. Childcare costs can exceed college tuition in many states, and yet, less than 17 percent of eligible United States families²⁵ who need assistance to meet childcare costs are able to get it. Childcare in the United States is offered in many diverse settings such as private homes, licensed childcare centers, churches, synagogues and on-site businesses. Licensing standards vary widely by state and locality and accessing high quality options can be difficult. Additionally, childcare terminology is often unfamiliar to most parents. For families needing other resources, such as childcare subsidy assistance to pay for childcare, accessing childcare options is even more complex and difficult.

As of 2020, there are 204 licensed childcare centers²⁶ in Ocean County that have been approved by the New Jersey Department of Children and Families (NJ DCF). Although childcare centers are dispersed throughout the county, a majority of centers are located in the more densely populated municipalities such as Toms River, Brick and Lakewood. There is a lack of centers in the southern (Tuckerton and Little Egg Harbor) and western (Whiting, Lakehurst and Plumsted) areas of Ocean

²⁵ Banghart, P., King, C., Bedrick, E., Hirilall, A., & Daily, S. (2019, October 09). States' Use of the Child Care and Development Block Grant Funding Increase, www.childtrends.org/publications/states-use-of-the-child-care-and-development-block-grant-funding-increase

²⁶ "Licensed Childcare Centers," *The New Jersey Department of Children and Families*, <https://data.nj.gov/>

County. In addition, there are three Head Start²⁷ locations through O.C.E.A.N., Inc., a comprehensive preschool program for children 3 to 5 years from disadvantaged families. Eligibility is based on income guidelines from the federal government. The program provides services in five major areas: education, health, social services, parent involvement, and special needs. The Head Start centers are located in Brick, Manchester and Toms River. O.C.E.A.N., Inc. also collaborated with Ocean County College to offer a Kids Development Center, which assists children in developing physically, socially and cognitively. Additionally, the YMCA of Greater Monmouth County (YMCA) offers full-time day care and before/after school care. These “Y-Kids” sites are located in the partnering school districts of Toms River, Berkeley and Manchester. The YMCA also offers summer youth camps for Ocean County children.

According to the New Jersey Child Care Market Price study²⁸ by the New Jersey Department of Human Services Division of Family Development, the median monthly cost of childcare for an infant in Ocean County is \$900, which is the fifth lowest in the state. The median monthly cost for a toddler is \$810, the 7th lowest cost for a toddler in New Jersey. For children in Pre-Kindergarten (Pre-K), Ocean County’s median monthly cost of \$723 is the fourth lowest in the state. The median monthly costs for infant, toddler and pre-k are all below the state median.

Eligible families that are unable to afford the costs associated with childcare can receive assistance through several subsidy programs. The New Jersey Department of Human Services Division of Family Development contracts with Child Care Resource & Referral (CCR&R) services, to administer childcare subsidy programs in New Jersey. The CCR&Rs connect parents, providers, community leaders and policymakers concerning childcare. There is a CCR&R agency located in every county in New Jersey. The lead CCR&R in Ocean County is The Children’s Home Society of New Jersey (CHSofNJ)²⁹ located in Toms River Township. The CHSofNJ is also responsible for registering and monitoring family childcare providers in Ocean County.

The subsidy programs in Ocean County administered by The CHSofNJ are the New Jersey Cares for Kids program (NJCK), the Work First NJ program, and kinship childcare. The NJCK program helps low and middle income families pay for the cost of childcare. Parents pay a portion of the childcare cost, based on household income and family size, and NJCK pays the balance up to the State maximum. Families receiving public assistance through the Work First NJ program are eligible to receive childcare subsidy while working or participating in an approved job or training activity. Parents must be referred to The CHSofNJ by the County Board of Social Services for this subsidy program. Kinship is a subsidy offered through the NJCK program that helps individuals that hold custody of a relative’s child pay for childcare.

²⁷ “Head Start Programs,” *O.C.E.A.N., Inc.*, www.oceaninc.org/head-start-programs

²⁸ “New Jersey Child Care Market Price Study”, *New Jersey Department of Human Services Division of Family Development*, www.childcarenj.gov/Resources/Reports

²⁹ “Subsidy Programs”, *Ocean Child Care Resource & Referral*, www.chsofnj.org/ocean-ccrr-programs

The CHSofNJ employs a Family Engagement Specialist to support families through outreach and consumer education utilizing various strategies, community events, focus groups and meetings. The specialist coordinates several “Books, Balls, & Blocks!” events throughout the year. The event provides a developmental screening for children 1 month to 5 years, interactive learning activities, and access to community resources. In addition, the Family Engagement Specialist works closely with other agencies throughout Ocean County to identify community resources and promote public awareness of available services.

Following the COVID-19 outbreak, enrollment has decreased by an average of 67 percent in childcare centers across the country, according to a July survey by the National Association for the Education of Young Children (NAEYC)³⁰, the latest data available. Yet, nearly 90 percent of childcare centers continue to spend more on sanitation supplies and personal protective equipment (PPE). New Jersey issued Executive Order No. 110 on March 25, 2020, which required childcare centers to close on April 1, 2020 unless serving children of essential workers. Childcare centers were permitted to reopen through Executive Order No. 149 on June 15, 2020. During the COVID-19 outbreak, with many residents struggling to balance employment and remote-learning school schedules, New Jersey launched the School-Age Tuition Assistance Program to help families pay for care for school-age children in need of childcare due to impacts faced as a direct result of the pandemic. Many parents have also chosen to decline childcare services because of a fear of contagion. Class size reductions, expensive PPE, frequent cleaning and other procedural changes will likely increase costs for childcare in the future as well as limit the number of childcare providers available.

Summary: Nature of the Need

Approximately 30.56 percent of respondents to the needs assessment questionnaire identified childcare as an important basic need for Ocean County residents. More than 40 percent of the respondents felt there are not enough childcare services available in the County. Additionally, 30 percent of respondents cited a lack of knowledge on childcare services and could not provide an answer to the availability of those services. Respondents expressed that childcare centers in Ocean County are expensive and do not have hours that can accommodate the work schedule of some consumers. It was also cited that there is a lack of slots available for the childcare subsidy programs.

The majority of respondents selected transportation as the most prevalent barrier to childcare services in Ocean County. Some respondents noted traveling between childcare and employment is difficult without a personal vehicle due to the limited public transportation. This likely contributed to the 28.77 percent of respondents that cited services are not accessible to the entire county. Often, those individuals residing in the southern and western areas of Ocean County are more likely to

³⁰ “Holding on Until Help Comes,” *National Association for the Education of Young Children*; 13 July 2020

struggle with transportation access. Nearly 30 percent of respondents felt that childcare services are not widely advertised or known by residents. Approximately 45.21 percent of respondents selected a lack of awareness as a barrier to services. Other barriers identified by an equal percentage of respondents were long waitlists and high costs. A few respondents also cited eligibility requirements as a barrier to services. A majority of respondents proposed more community outreach throughout the entire county. Respondents felt that the public is often unaware of services until an inherent need arises.

Need Area: Survey Results

Childcare

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.	73	4.11 %	36.99 %	20.55 %	6.85 %	31.51 %	100 %
2. Anyone in the county is able to access services.	73	6.85 %	28.77 %	24.66 %	8.22 %	31.51 %	100 %
3. Services are widely advertised and known by the county.	73	9.59 %	30.14 %	27.40 %	5.48 %	27.40 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	73	6.85 %	15.07 %	35.62 %	4.11 %	38.36 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	73	1.37 %	9.59 %	42.47 %	8.22 %	38.36 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	72	1.39 %	12.50 %	37.50 %	9.72 %	38.89 %	99.99 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	73	33	45.21%
Services do not exist	73	14	19.18%
Transportation	73	39	53.42%
Cannot contact the service provider	73	4	5.48%
Too expensive	73	33	45.21%
Lack of awareness of service	73	33	45.21%
Cultural Barriers	73	18	24.66%
Services provided are one-size fits all, and don't meet individual needs	73	17	23.29%
Stigma Leads to Avoidance	73	7	9.59%
Eligibility Requirement (explain below)	73	17	23.29%
Other (explain below)	73	11	15.07%

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 kin (e.g., Kinship Navigator Program, the NJ DCF Division of Child Protection & Permanency (DCP&P), County Family Success Centers, County Board of Social Services, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

Kinship care refers to the care of children by relatives. Relatives are the preferred resource for children removed from parental care to maintain familial connections. Families care for relative children for numerous reasons including parental substance abuse and mental illness; child abuse, neglect, or abandonment; illness or death; incarceration; and domestic violence. Children may also live with relatives because of military deployment, employment opportunities in other states, divorce, and deportation. A relative is an adult related to the child by blood, adoption, or affinity within the fifth degree of kinship, including stepparents, step siblings, and all relatives whose status is preceded by the words "great," "great-great," or "grand," or the spouse of any of these persons, even if the marriage was terminated by death or dissolution. However, a grandparent, aunt, uncle or sibling is typically given preferential consideration for the placement of the child. Kinship legal guardianship is defined as a caregiver willing to assume the care of a child due to parental incapacitation with the intent to raise the child to adulthood and is appointed by the court.

Nearly 2.7 million children³¹ are in kinship care in the United States, an increase of almost 18 percent over the past decade. A majority of these living arrangements are established informally within families. In New Jersey, 54,000 children reside in kinship care. The most recent data available from 2017³² shows 8 percent of children in the State under 18 years live with grandparents or other relatives. Approximately, 11,407 grandparents in New Jersey responsible for the care of a grandchild have a disability and 7,180 live in poverty.

The Division of Child Protection and Permanency (DCP&P) is New Jersey's child protection and child welfare agency within the New Jersey Department of Children and Families. The State's Child Abuse Hotline receives reports of child abuse and neglect 24-hours a day, 7-days a week. The Agency

³¹ "National Kids Count," *Annie E. Casey Foundation*, www.datacenter.kidscount.org/data#USA/1/0/char/0

³² "New Jersey Fact Sheet," *Grandfamilies.org*, www.grandfamilies.org/State-Fact-Sheets

investigates all reports of child abuse or neglect by collecting information through home visits and interviews with the child’s household members, as well as people such as teachers, physicians, or school counselors. Child protection investigations are generally closed within 60 days. Ocean County has two local DCP&P offices located in the northern and southern regions of the county— Toms River and Bayville, respectively. In 2018, Ocean County had the fifth highest¹ number of children served by DCP&P in the state. Additionally, there were 359 children in DCP&P out-of-home placement in the county.

After assuming responsibility for a child of a relative, many families can experience financial hardship. Public financial assistance is available for kinship caregivers, although many caregivers may not be aware of the resources that exist. Less than 12 percent of families in the United States providing kinship care³¹ receive assistance from the joint Federal-State cash assistance program Temporary Assistance for Needy Families (TANF), although nearly 100 percent of the children in such families are eligible. Moreover, less than half of low-income kinship care households receive assistance from the Federal Supplemental Nutrition Assistance Program (SNAP) despite the fact that a large majority report experiencing levels of food insecurity. There are childcare subsidy programs geared to provide financial support for kinship caregivers but only 17 percent of those caring for the child of a relative receive childcare assistance.

In New Jersey, the Kinship Navigator Program serves as a one-stop for information and referral services to kinship caregivers. Kinship caregivers can utilize the NJ 2-1-1 hotline to register for the program. Once registered, the caregiver’s information is transmitted to the local Kinship Navigator agency. In Ocean County, The Children’s Home Society of New Jersey (CHSofNJ) is the lead agency for this program. Kinship Navigator staff can provide one-on-one support supplemented by workshops, support groups and social activities. The program allows kinship caregivers in Ocean County to obtain resources for a variety of social services, like medical coverage, housing, childcare, and legal advocacy.

Summary: Nature of the Need

Services for families caring for the child of a relative was identified as the least important prioritized need area for residents of Ocean County in the needs assessment questionnaire. This is likely because an overwhelming majority of respondents cited inexperience and a lack of knowledge surrounding kinship caregiving. Of the 88 respondents to the questionnaire, fifteen skipped this section altogether. Nearly 40 percent of respondents agreed there are enough services available in the county to meet this need; however, almost 50 percent of respondents identified a lack of knowledge on the availability of these services. Approximately 47.95 percent of the respondents felt that services are widely advertised for kinship caregivers. Comparatively, about 50 percent stated a lack of knowledge that prevented the participants from accurately responding to the question. Additionally, more than 60 percent of respondents were unable to answer whether facilities for these services are

of good quality and if staff are well trained and knowledgeable. The most identified key barrier to services for kinship caregivers was a lack of awareness of services in Ocean County. Additional barriers reported were transportation and cultural barriers. Some respondents recommended agencies increase community outreach that can provide information on these services to the public. A few suggested funneling resources and materials through back-to-school nights throughout Ocean County school districts.

Need Area: Survey Results

Services for Families Caring for the Child of a Relative

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.	73	12.33 %	28.77 %	9.59 %	2.74 %	46.58 %	100 %
2. Anyone in the county is able to access services.	73	9.59 %	27.40 %	15.07 %	1.37 %	46.58 %	100 %
3. Services are widely advertised and known by the county.	73	15.07 %	32.88 %	8.22 %	1.37 %	42.47 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	72	8.33 %	18.06 %	22.22 %	1.39 %	50.00 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	72	5.56 %	6.94 %	20.83 %	2.78 %	63.89 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	71	4.23 %	7.04 %	23.94 %	4.23 %	60.56 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	73	12	16.44%
Services do not exist	73	14	19.18%
Transportation	73	19	26.03%
Cannot contact the service provider	73	8	10.96%
Too expensive	73	10	13.70%
Lack of awareness of service	73	49	67.12%
Cultural Barriers	73	16	21.92%
Services provided are one-size fits all, and don't meet individual needs	73	11	15.07%
Stigma Leads to Avoidance	73	13	17.81%
Eligibility Requirement (explain below)	73	12	16.44%
Other (explain below)	73	12	16.44%

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, an 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 New Jersey, the NJ DCF Children's System of Care (CSOC), Family Support Organizations, etc.)

Need Assessment Key Findings

Summary: Scope of the Need

Behavioral and mental health are an essential part of a child's overall health. Mental health during childhood means reaching developmental and emotional milestones as well as learning healthy social skills and ways to cope with trauma. Mental Health America proclaims it is easy for parents to identify a child's physical needs: nutritious food, warm clothes when it is cold, bedtime at a reasonable hour. However, a child's mental and emotional needs may not be as obvious. Good mental health allows children to think clearly, develop socially and learn new skills. Additionally, good friends and encouraging words from adults are all important for helping children develop self-confidence, high self-esteem, and a healthy emotional outlook on life³³.

Healthcare professionals use the guidelines in The American Psychiatric Association's Diagnostic and Statistical Manual, Fifth Edition (DSM-5), to help diagnose mental health disorders in children. The most common mental health disorders diagnosed in childhood are attention-deficit/hyperactivity disorder (ADHD), anxiety and depression. Other conditions and concerns that affect children's learning, behavior and emotions include learning and developmental disabilities, autism and risk factors like substance use and self-harm. Suicide remains the second leading cause of death for persons 10 to 14, 15 to 19, and 20 to 24³⁴ years. As of 2019, nearly 150,000 children under 18 years¹³ were living in Ocean County.

PerformCare New Jersey is the Contracted System Administrator (CSA) for the NJ DCF Children's System of Care (CSOC). PerformCare is the single point of access to a wide array of behavioral health,

³³ "What Every Child Needs for Good Mental Health", *Mental Health America*, www.mhanational.org/what-every-child-needs-good-mental-health

³⁴ Curtin, S. C., & Heron, M. (2019). Death Rates Due to Suicide and Homicide Among Persons Aged 10-24: United States, 2000-2017. *NCHS data brief*, (352), 1-8.

intellectual and developmental disability services as well as substance use treatment for youth (up to 21 years) and families throughout the state. PerformCare focuses on prevention and early intervention by connecting youth with appropriate local resources regarding behavioral health. PerformCare can assist families when a child is impacted by depression, trauma, bullying, violence, defiant behavior and/or drug or alcohol use. PerformCare services are available by phone 24 hours a day, 7 days a week, including holidays.

More than 300 calls³⁵ from Ocean County residents to PerformCare were reported for the month of November in 2020, the latest data available. Of the children assessed through the calls, 37.6 percent were children between 5 and 10 years. Nearly 30 percent were youth between 14 and 17 years. Approximately 200 of the children assessed were female while 194 were male. About 82 percent of the calls received were from the child's parent or legal guardian, with 62.4 percent requesting in-home services and 22.1 percent inquiring about an intellectual or developmental disability. In the same month, PerformCare authorized 1,774 children in Ocean County for Intensive In-Community services, 1,038 children for Care Management Organization (CMO) services and 563 children for Family Support services for those with an intellectual or developmental disability.

New Jersey has CMOs in each of its 21 counties. CMOs provide treatment and support services to children with complex mental health, substance use, intellectual, and developmental needs. Generally, children appropriate for CMO level services are engaged in multiple systems of care including the New Jersey Division of Child Protection & Permanency (DCP&P), Juvenile Justice Commission (JJC), substance use or mental health systems. The lead CMO for Ocean County is Ocean Partnership for Children, Inc. (OPC). Ocean County youth 3 to 21 years are served through OPC, which is funded by Medicaid. Annually, 90 percent of the youth served by OPC successfully remain at home and connected to school and social supports for the duration of services. In 2019, OPC served 1,688 youth in Ocean County. Children must be referred by PerformCare to access services through OPC.

Family Support Organizations (FSOs) are county-based organizations that provide direct family-to-family peer support, education, advocacy and other services to family members of children with emotional and behavioral problems. The Ocean County FSO is located in Toms River and provides peer support to families with children that have multifaceted needs. Annually, Ocean County FSO serves over 500 families in Ocean County and reaches thousands through outreach events to promote services.

Preferred Behavioral Health Group operates Ocean County's Children's Mobile Response and Stabilization Services (CMRSS). This program provides intervention and stabilization services to youth

³⁵ "Children & Youth Who Accessed the System of Care," *NJ Children's System of Care*, www.nj.gov/dcf/childdata/interagency/

(birth to 21 years) exhibiting severe emotional or behavioral needs that threaten to disrupt the child's household. The services are designed to defuse an immediate crisis, keep children and families safe from harm and maintain the child's current living situation (such as a foster home, treatment home or group home) in the community. An average of 300 Ocean County youth are served annually through the program.

Notably, New Jersey has the highest rate of children identified with Autism Spectrum Disorder in the nation, 1 in 34 children. Nationally, the prevalence of Autism is 1 in 54 children. Males are identified with Autism at a rate four times higher than females. The rate of Autism in Ocean County is 1 in 39 children. POAC Autism Services of New Jersey provides training throughout the State and County for parents and educators; recreational and support services to children and adults with Autism; and training for law enforcement and first responders. Both OPC and Ocean County FSO provide services for children and families of children with Autism Spectrum Disorder in Ocean County. Additionally, the Ocean County Library is currently constructing a sensory-friendly space within its main branch in Toms River to provide a specially designed area for children with Autism Spectrum Disorder and other developmental disabilities. Community Medical Center in Toms River also has a sensory-friendly Emergency Department that can provide patients with Autism Spectrum Disorder tablets with special software, sensory items and other items that can provide support, comfort and security to this vulnerable population.

Summary: Nature of the Need

Nearly 75 percent of respondents to the needs assessment questionnaire identified behavioral and mental health services for children as an important prioritized need area for Ocean County residents. More than half of the respondents agreed there are not enough services available to assist individuals in this need area. Nearly 70 percent of respondents felt that services are not widely advertised or known by the community. Respondents that did access behavioral or mental health services for children agreed that the services were of good quality and staff were well trained and knowledgeable.

A majority of respondents equally agreed that a lack of awareness of services and the stigma associated with mental health are key barriers to service delivery for families. Closely in percentage were limited access to transportation and long waitlists. Additionally, some respondents cited a lack of education on emergency response methods for first responders and law enforcement that may encounter children with cognitive and physical disabilities. Respondents also felt that schools systems were absent of the appropriate behavioral and mental support and resources for children. Comments also cited the documentation that is typically required to receive benefits or program services can be confusing and very daunting for parents to navigate.

Research gleaned from focus groups and key informant interviews learned that a high percentage of

consumers are unfamiliar with PerformCare and its services. Many participants stated that services in this need area were discovered through self-referral rather than the use of a coordinate entry system like PerformCare. Other participants found providers through family or friends that were connected to the social services system. An internet search of “children’s behavioral health services in Ocean County” did not yield any immediate results for PerformCare but rather offered an extensive list of service providers, which led consumers to call a number of different providers in an effort to access the appropriate service.

Moreover, respondents overwhelmingly agreed there is a shortage of child and adolescent psychiatrists (CAPs) to address the need area. Data studies have shown this shortage has been severe across the United States for the past ten years. The latest study in 2018³⁶ revealed there are approximately 8,300 practicing CAPs in the United States. In New Jersey, there are 324 practicing CAPs to a population of almost two million children under 18 years. Ocean County has eight practicing CAPs to its nearly 150,000 children and adolescents.

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

The Ocean County CIACC serves as a mechanism to advise the Ocean County Mental Health Board and the NJ DCF in planning for mental health services for children. The Ocean County CIACC provides the County with multidisciplinary forums to review and discuss the system of services for children with social, emotional and behavioral challenges, substance use and developmental disabilities; identify and address barriers to effective service delivery; and seek solutions for the County and make appropriate recommendations on programs and policies that impact children and families. The ultimate goal of the Ocean County CIACC's activities is to oversee behavioral health services available to children and families to ensure that the appropriate and least restrictive level of care is obtained and a comprehensive system of needed services within the County is maintained.

In 2006, the Ocean County CIACC formed the Education Partnership, the first of its kind in New Jersey. The mission of the Education Partnership is to promote, develop and enhance collaborative efforts between school, behavioral health and child protective service systems as well as other interested populations to improve the well-being of children in Ocean County. The Education Partnership hosts seven trainings through the school year and receives feedback at each training to ensure the curriculum meets the current need. The Ocean County CIACC’s Education Partnership system has been used as a model by other counties in the State.

The Ocean County CIACC additionally has two sub-committees, which are the Systems Review and

³⁶ “CAP Workforce Distribution Map,” *American Academy of Child & Adolescent Psychiatry*, www.aacap.org/aacap/Advocacy/Federal_and_State_Initiatives/Workforce_Maps/Home.aspx

Aging Out/Aging In Committees. The Systems Review Committee seeks to identify gaps in services through ethical and evidence-based practices. The Committee discusses challenging and successful cases within the care management system, and significant intersystem issues, as well as identifies training and technical assistance needs. The Aging Out/Aging In Committee facilitates successful transition from children's services to adult services for young adults with challenging situations by providing collaborative case consultation and technical assistance to providers involved with the young adult and the family. This Committee fosters local system integration, information/resource sharing and networking.

The Ocean County CIACC continues to increase its partnerships with schools to reduce barriers and improve accessibility through participation in the County Superintendent's Roundtable and other networking opportunities. Through collaborative partnerships and cross-training, the Ocean County CIACC will increase local capacity for supporting youth with unique needs, including youth with intellectual and developmental disabilities and youth with specific cultural needs, such as Orthodox Jewish, Spanish-speaking, and LGBTQIA+.

The Traumatic Loss Coalitions (TLC) for Youth Program is New Jersey's primary suicide prevention program funded by the New Jersey Department of Children and Families (NJ DCF), Division of Family and Community Partnerships, Office of School Linked Services. The TLC is operated by Rutgers University Behavioral Healthcare. The TLC has operated as a County-based collaborative since 2000 with a TLC Coordinator in each County. These County Coordinators provide Coalition meetings throughout the year bringing together school personnel, mental health clinicians, juvenile justice personnel, law enforcement officials, social service agencies and child welfare workers. These meetings are effective forums for reviewing crisis events, identifying service needs, and providing professional development through the inclusion of an educational presentation. The Ocean County Department of Human Services (OCDHS) is the County Contract Administrator for the TLC in Ocean County and the YMCA of Greater Monmouth County is the lead service provider through its Counseling & Social Services Department. The Ocean County TLC provides suicide prevention and trauma response assistance to schools following unfortunate losses due to suicide, homicide, accident, and illness. This is accomplished through county, regional, and statewide conferences, training, consultation, onsite traumatic loss response, and technical assistance. The purpose is to ensure that those working with youth from a variety of disciplines and programs have up-to-date knowledge about mental health issues, suicide prevention, traumatic grief, and resiliency enhancement.

The HSAC in collaboration and partnership with the CIACC inherently engage in the aforementioned strategies to identify and address, to the capability and scope of these councils, change. Certain barriers to service delivery within the children's behavioral health system, like the shortage of child psychiatrists, cannot adequately be addressed through local means. The HSAC has frequently collaborated with the Ocean County Legislative Advocacy Committee to ensure local Legislative

District leaders are aware of system issues to ensure maximum service delivery standards for this vulnerable population.

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

Focus groups and key informant interviews found that Ocean County residents experiencing a need for children’s behavioral and mental health services often find resources through family or friends. Residents also cited internet searches and social media as a method to obtaining the most up to date information. Additionally, participants expressed that a majority of services within this need area are not widely advertised. Key barriers noted by participants included the lack of awareness of services, transportation, long waitlists and eligibility requirements. Suggestions made to local leadership were in reference to the expansion of community outreach and an increased availability of funding.

Need Area: Survey Results

Behavioral/Mental Health Services for Children

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.	73	24.66 %	28.77 %	26.03 %	5.48 %	15.07 %	100 %
2. Anyone in the county is able to access services.	73	17.81 %	32.88 %	31.51 %	5.48 %	12.33 %	100 %
3. Services are widely advertised and known by the county.	73	19.18 %	46.58 %	16.44 %	4.11 %	13.70 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	73	12.33 %	21.92 %	34.25 %	6.85 %	24.66 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	73	9.59 %	6.85 %	46.58 %	8.22 %	28.77 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	73	8.22 %	10.96 %	45.21 %	12.33 %	23.29 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	73	35	47.95%
Services do not exist	73	27	36.99%
Transportation	73	36	49.32%
Cannot contact the service provider	73	14	19.18%
Too expensive	73	23	31.51%
Lack of awareness of service	73	48	65.75%
Cultural Barriers	73	28	38.36%
Services provided are one-size fits all, and don't meet individual needs	73	18	24.66%
Stigma Leads to Avoidance	73	44	60.27%
Eligibility Requirement (explain below)	73	17	23.29%
Other (explain below)	73	9	12.33%

Need Area: Behavioral/Mental Health Services for Adults**Status: General 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, an 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**

The New Jersey Department of Health Behavioral Risk Factor Surveillance Survey (BRFSS) reports 15.4 percent of Ocean County residents have experienced 14 or more days of mental distress. This sets Ocean County at the third highest rate of frequent mental distress in the state. The latest available data³⁷ also shows females in Ocean County identified a frequency of mental health distress at a rate nearly four percent higher than males. Approximately 65 percent of adults living in the County who experience frequent mental distress do not receive treatment. Additionally through the BRFSS, the rate of Ocean County residents that report a history of depression is the second highest in New Jersey.

The large population of seniors and veterans in Ocean County may be at the root of the elevated BRFSS indicators of mental health, as there is well-documented prevalence of behavioral health needs in these two groups. Individuals with serious mental illnesses are more likely to have poor health and complex medical needs with advancing age. Chronic health conditions in older adults are associated with an increased risk of depression. Research has shown there is a greater incidence of veterans in need of post-traumatic stress disorder (PTSD) services as well as homelessness, substance use disorder and employment services. Additionally, Ocean is among ten counties³ in the state with the highest percentage of individuals under 65 years with disabilities. Adults with disabilities report³⁸ experiencing frequent mental distress almost five times as often as the general population.

Death by suicide is the tenth leading cause of death in the United States. In Ocean County, the age-

³⁷ “New Jersey State Health Assessment Data,” New Jersey Department of Health, www-doh.state.nj.us/doh-shad/query/selection/njbrfs/BRFSSSelection.html

³⁸ “Disability and Health Promotion,” *Centers for Disease Control and Prevention*, www.cdc.gov/ncbddd/disabilityandhealth/features/mental-health-for-all.html

adjusted death rate³⁹ for suicide per 100,000 people is 8.3. It is slightly higher than the statewide rate of 8.0, but considerably lower than the national rate of 13.9. There were 54 deaths by suicide in the county in 2018. Mental health and substance use disorders are reported⁴⁰ as the most significant risk factors for suicidal behaviors. Public health experts project a rise in deaths by suicide in the upcoming decade due to the outbreak of COVID-19. The New Jersey Suicide Prevention Hopeline had an increase of more than 5,000 calls from March to June, the height of the pandemic, compared to the number of calls received in those same months the previous year. However, fewer people died by suicide⁴¹ in New Jersey in the first few months of the pandemic than in previous years. Preliminary research attributes the decline to the rise in telemedicine, which promoted access to care virtually. Many of the measures used to protect the community from spreading and contracting COVID-19 can easily contribute to an increase in depression and suicidal thoughts. These risk factors include economic stress following job loss, social isolation, decreased access to the community and chronic illness.

As essential health services, behavioral and mental health care remained available without interruption through the pandemic. Some providers transitioned to virtual modes of service delivery and others created a hybrid virtual/in-person approach using appropriate social distancing measures. Behavioral health providers reported an increase in individuals seeking preventative services, especially those in first responder and healthcare professions. In addition, individuals with serious mental illness - who were stable and engaged in higher levels of care prior to the COVID-19 outbreak – experienced decompensation as the isolation from natural supports, family, friends and social activities persisted.

In Ocean County, RWJBarnabas Health’s Monmouth Medical Center Southern Campus (MMCSC) Psychiatric Emergency Screening Services (PESS) is typically the first engagement with mental health services for a consumer. Consumers can access the crisis unit of local hospital emergency departments for mental health care.

Four hospitals in Ocean County are equipped with PESS or crisis units:

- RWJ Barnabas Monmouth Medical Center Southern Campus, Lakewood
- Hackensack Meridian Ocean Medical Center, Brick
- RWJ Barnabas Community Medical Center, Toms River
- Hackensack Meridian Southern Ocean Medical Center, Manahawkin

³⁹ “Ocean County Public Health Profile Report Index,” New Jersey Department of Health, www-doh.state.nj.us/doh-shad/community/highlight/index/GeoCnty/15.html

⁴⁰ “New Jersey Annual Report,” United Health Foundation, www.americashealthrankings.org/explore/annual/measure/Suicide/state/NJ

⁴¹ “Deaths by Suicide in NJ,” *New Jersey Department of Health*, www.nj.com/coronavirus/2020/07/experts-feared-a-spike-in-suicides-as-coronavirus-slammed-nj-but-data-shows-they-actually-dropped.html

In an effort to provide streamlined crisis services, PESS also deploys mobile outreach to homes, schools and other locations in the County. The latest reported data from 2016 shows 8,685 emergency department visits by Ocean County residents were attributed to behavioral or mental health disorders, the third highest in the state. An additional 3,478 visits were due to alcohol or drug use. There were 11,501 patients recorded with a primary diagnosis of behavioral or mental disorders.

There are five psychiatric inpatient units dedicated to serve residents of Ocean County, one of which is located in Toms River. The others are located out-of-county. Two Community Mental Health Centers (CMHCs) are located within the County and provide outpatient services to residents. Over 8,000 Ocean County residents are engaged in outpatient services quarterly. Adults in crisis in need of long-term care may seek further treatment at one of New Jersey's four psychiatric hospitals. In 2017, there were 126 admissions of Ocean County residents to State psychiatric hospitals. Admissions decreased eight percent the following year. Early intervention and support services served more than 1,000 county residents in 2018. These services include immediate access to intake, assessment, psychiatric evaluation and referral to ongoing outpatient care.

In the event of a disaster, Ocean County offers multiple mental health resources and services for those affected. The New Jersey Disaster and Terrorism Branch (NJ DTB) of the Division of Mental Health and Addiction Services (DMHAS) along with the Mental Health Association of New Jersey have collaborated to develop the Disaster Response Crisis Counseling (DRCC) certification course as well as the DRCC Chaplaincy certification course. Certified DRCCs are volunteers that become part of an emergency response network and respond to the needs of communities after a disaster. DRCC Chaplains specifically work with victims of a disaster that may seek comfort from faith-based leaders.

The Traumatic Loss Coalition (TLC) for Youth offers suicide prevention and trauma response assistance to schools following unfortunate losses due to suicide, homicide, accident and illness. This is accomplished through county, regional, and statewide conferences, training, consultation, onsite traumatic loss response, and technical assistance. The purpose is to ensure that those working with youth from a variety of disciplines and programs have up-to-date knowledge about mental health issues, suicide prevention, traumatic grief, and resiliency enhancement. In response to the September 11, 2001 terrorist attack, a toll free helpline was established through the Mental Health Association in New Jersey as a resource for persons seeking mental health services and information regarding other resources. The helpline continues to be maintained and has been used to support the services of the NJ DTB during times of declared disasters or incidents that significantly affect New Jersey's communities. The helpline has language access and 24-hour capability.

Throughout the COVID-19 pandemic, the OCDHS has been assisting the Ocean County Health Department (OCHD) in handling phone calls from the "worried well" and providing individuals with crisis counseling and psychological first aid telephonically. The department has worked closely with

the County Office of Emergency Management (OEM) to ensure that the community need for disaster behavioral health crisis counseling is met. The Hope and Healing Program was initiated by the NJ DTB in the first few months of the statewide shutdown. Local agencies are available to help increase capacity in providing crisis counseling for those affected by the pandemic.

Summary: Nature of the Need

More than 80% of respondents selected behavioral and mental health services for adults as one of the top three prioritized service need areas. The majority of respondents to the questionnaire identified lack of awareness of services, stigma and long waitlists are substantial barriers experienced by consumers. Additionally, for those living in the southern and western areas of Ocean County, access to transportation is a repeated issue. Of the ancillary services, not part of the behavioral and mental health system of care but often necessary for consumers to achieve and maintain personal wellness, housing, food assistance, and primary health care were listed as the most vital among county residents.

The Mental Health Board performed a needs assessment in 2019 to measure the accessibility and quality of services in this particular need area. The assessment reported a majority of individuals rated psychiatric, inpatient and outpatient services to be the least accessible core services for the behavioral and mental health of adults in Ocean County. Respondents identified the lack of psychiatrists as a key barrier to service delivery.

The deficiency in the availability of psychiatrists, who can prescribe and manage medications, results in long wait times to access necessary services. Advanced Practice Nurses (APNs) are not recognized as a viable alternative in the licensing standards for many programs. Therefore, APNs do not have full autonomy and must collaborate with a psychiatrist to practice. Many individuals in need of this level of care utilize primary care providers to bridge the gap but these providers are not trained in the same way as a psychiatrist or APN.

Additionally, individuals without insurance and those unable to access transportation noted difficulty in obtaining needed resources. In Ocean County, seven percent of residents lack a health insurance plan and a majority possess an inexpensive but minimal plan with high co-pays and deductibles for behavioral and mental health care.

Consumers experiencing co-occurring mental illness and substance use disorder also noted a struggle to find appropriate services to meet the individual's specific need. Although most programs are considered co-occurring capable, licensing standards are not flexible to accommodate for individuals whose symptoms cannot be categorized in one or the other. Additionally, salaries are not competitive in comparison to other healthcare fields to incentivize staff to invest time and money into dual

certifications and competencies.

The population in Ocean County as reported by the 2010 U.S. Census has increased by 6.12 percent in the past ten years. Though the population continues to grow each year, service providers utilized existing resources as well as develop new resources to expand the behavioral and mental health system of care. The Mental Health Board continues to work to expel mental health stigma and promote prevention activities through schools, churches, non-profit organizations and the media.

Need Area: Survey Results

Behavioral/Mental Health Services for Adults

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.	73	20.55 %	39.73 %	21.92 %	6.85 %	10.96 %	100 %
2. Anyone in the county is able to access services.	73	17.81 %	31.51 %	35.62 %	4.11 %	10.96 %	100 %
3. Services are widely advertised and known by the county.	73	19.18 %	39.73 %	20.55 %	8.22 %	12.33 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	73	8.22 %	23.29 %	31.51 %	10.96 %	26.03 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	73	5.48 %	13.70 %	38.36 %	12.33 %	30.14 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	73	2.74 %	15.07 %	38.36 %	13.70 %	30.14 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	73	43	58.90%
Services do not exist	73	18	24.66%
Transportation	73	40	54.79%
Cannot contact the service provider	73	11	15.07%
Too expensive	73	31	42.47%
Lack of awareness of service	73	47	64.38%
Cultural Barriers	73	28	38.36%
Services provided are one-size fits all, and don't meet individual needs	73	23	31.51%
Stigma Leads to Avoidance	73	45	61.64%
Eligibility Requirement (explain below)	73	20	27.40%
Other (explain below)	73	7	9.59%

Need Area: Substance Use Disorder and Prevention Services**Status: Prioritized Need Area**

Substance use treatment 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**

The Substance Abuse and Mental Health Services Administration (SAMHSA) categorizes substance use disorders (SUDs) as the recurrent use of alcohol and/or drugs, which results in a clinically significant impairment. A clinically significant impairment can include health problems, disability, or failure to meet major responsibilities at work, school, or home. There is a considerable overlap between mental health conditions and SUDs. Nationally, nearly half of those with a SUD also report experiencing a co-occurring mental illness and 1 in 5 adults with a mental illness report experiencing a SUD.

Data from the 2019 National Survey on Drug Use and Health⁴² reported approximately 19.3 million people 18 years or older had a SUD related to the use of alcohol or illicit drugs in the United States. Nearly 14.1 million people had an alcohol use disorder and 7.4 million people had an illicit drug use disorder. The most recent available data shows an estimated 1.6 million people had an opioid use disorder⁴² in 2019. Opioid overdose deaths increased in 2019 by approximately 4.6 percent (from the previous year) due to synthetic opioids, like fentanyl.

In New Jersey, there were 98,628 treatment admissions⁴³ and 96,482 discharges reported for 2019 to the New Jersey Department of Human Services (NJ DHS), Division of Mental Health and Addiction Services by substance abuse treatment providers. Of those admitted to substance use treatment, the most common primary substances identified were alcohol, heroin and opiates. More than 25,000 admissions in the state resulted in outpatient care services. Approximately 23,804 admissions resulted in intensive outpatient (IOP) care services. A majority of patients were admitted through self-referral. Individuals 35 to 54 years had the highest rate of admission.

⁴² “Key Substance Use and Mental Health Indicators,” SAMHSA, www.samhsa.gov/data/

⁴³ “2019 Statewide Substance Abuse Overview,” NJ Department of Human Services, www.state.nj.us/humanservices/dmhas/publications/statistical/#1

Ocean County had the second highest⁴⁴ number of admissions to substance use treatment throughout the state for 2019 (8,396 admissions). Historically, the county held the highest number of admissions in the state for five years until it was surpassed in 2018 by Essex and Camden counties. Aligned with the statewide report, the most common primary substances identified were alcohol, heroin and opiates. Nearly 2,500 admissions⁴⁴ in Ocean County were followed with outpatient care services while IOP care services followed 1,982 admissions. Most referrals to treatment were through the individual, criminal justice agencies or addiction services programs. County residents 35 to 54 years had the highest rate of admission. Toms River, Brick and Berkeley Townships accounted for the highest admissions by resident municipality.

On October 26, 2017, the United States Department of Health and Human Services declared the opioid crisis a public health emergency. The nationwide declaration has been renewed by the Secretary of Health and Human Services every 90 days, with the most recent renewal effective January 7, 2021. Naloxone (Narcan) is a nasal spray medication designed to counter the effects of an opioid overdose. Narcan has become widely available to emergency first responders, law enforcement officers and the public. Working with the New Jersey Attorney General's Office and the Department of Health, Ocean County was used as the trial for the New Jersey Law Enforcement Narcan Program. Since April 2014, the County's law enforcement agencies have been equipped with Narcan. Periodically, the NJ DHS has hosted Narcan distribution events throughout the State to provide the life-saving medication free to residents in each County. Local agencies in Ocean County often provide Narcan trainings to educate individuals how to administer Narcan effectively. There has been nearly 5,000 Narcan administrations in Ocean County⁴⁵ since 2015 (As of January 1, 2021). Comparatively, 1,198 deaths in the County were from a suspected drug overdose.

New Jersey has confidential helplines that provide guidance, education and support to individuals struggling with SUD. Helplines are staffed by trained specialists who can help callers find resources for SUD treatment. The NJ DHS funds ReachNJ, a State helpline that can be utilized by residents experiencing SUD. Trained addiction specialists answering the helpline assess each caller's needs and link the caller to treatment, counseling and support services regardless of an individual's health insurance status. Several other national and local helplines exist to support an individual's path to recovery.

The NJ DHS created an addiction services treatment directory, which can be found on the state website and used to find services in each of its 21 counties. Several SUD treatment centers are

⁴⁴ "2019 County Substance Overview," *NJ Department of Human Services*, www.state.nj.us/humanservices/dmhas/publications/statistical/#1

⁴⁵ "The New Jersey Opioid Data Dashboard," *New Jersey Department of Law & Public Safety*, www.njcares.gov

located within Ocean County while others are out-of-county agencies that serve Ocean County residents. Ocean County has one inpatient detoxification center, two outpatient detoxification centers, nine outpatient treatment programs and five recovery support services, in addition to numerous ancillary services that assist individuals with SUD. There are also ten facilities specialized to provide treatment to individuals experiencing co-occurring mental illness and SUD. Ocean County does not have a county located inpatient treatment program but eight programs throughout the State serve Ocean County residents. Residents in need of inpatient treatment must first be screened for eligibility.

The New Jersey Intoxicated Driving Program (IDP) is responsible for the administration of post-conviction interventions for individuals convicted of alcohol or drug-related driving under the influence (DUI) offenses. The OCHD is responsible for administering the Intoxicated Driver Resource Center (IDRC) for Ocean County. The purpose of the IDRC is to provide a professional education and screening intervention to any County residents convicted of an alcohol or drug related motor vehicle violation. Clients are assigned by a trial judge to either a 12 or 48-hour IDRC program based on the number or severity of the offenses. If appropriate, the client will be referred to an IDRC affiliated agency for a full assessment and required to comply with any treatment recommendations made in order to regain their driving privileges.

Substance abuse prevention⁴⁶ is defined as actively working, prior to the onset of a disorder, to prevent substance use or abuse. There are three types of prevention strategies: universal, selective and indicated. The mission of universal prevention is to deter the onset of drug abuse by providing all individuals in a population with the information and skills necessary to prevent a disorder or disease. Selective prevention targets specific subgroups of the population that are believed to be at a greater risk. Indicated prevention approaches are used for individuals who may or may not exhibit early signs of substance abuse but present risk factors, including depression and suicidal behavior. The NJ DHS Division of Mental Health and Addiction Services collaborates with County Alcohol & Drug Abuse Directors, County Mental Health Administrators and other Federal, State, County, and Local government entities in the administration of prevention and early intervention services.

The Ocean County Alliance program, housed under the Ocean County Health Department, is comprised of 16 separate Municipal Alliances spread throughout various towns within Ocean County. Municipal Alliances are spearheaded by committees made up of dedicated citizens, professionals and volunteers who provide substance abuse prevention services to the community. Alliances plan, coordinate and conduct alcohol, tobacco and other drug prevention programs for all members of the community from young children to older adults and collaborate with local government, schools, law

⁴⁶ “Prevention and Early Intervention Services,” *New Jersey Department of Human Services*, www.state.nj.us/humanservices/dmhas/resources/services/prevention/

enforcement, businesses and community agencies. Alliance programs include but are not limited to; parenting workshops, peer leadership programs, drug awareness events, and drug use and misuse among the senior population.

The OCHD operates numerous substance use prevention programming in Ocean County. Some of these initiatives include but are not limited to:

- Footprints for Life
- Unique YOU
- TiPs
- We're Not Buying It 2.0
- WISE
- #DrugCode
- Oh! The Places You'll Go
- Shore to Age Well
- ALCOHLEDU

Additionally, RWJ Barnabas Health administers the DART Prevention Coalition, which has served Ocean County for ten years. The Coalition focuses on preventing underage drinking, prescription drug abuse and the illegal use of marijuana and tobacco in Ocean County. DART is comprised of community leaders including law enforcement and government officials, educators, business owners, substance abuse professionals, faith-based leaders, and youth. DART continually assesses substance use trends in the County in order to implement community-level strategies that best address the unique needs of Ocean County. Strategies include policy advocacy, training for alcohol retailers, promotion of prescription drop boxes, community presentations, technical assistance to emerging local coalitions, and coordination of 15 Youth Prevention Coalitions.

To prevent misuse of prescription medications, New Jersey's Project Medicine Drop (NJPMDD) places secured drop boxes at participating police departments across the State to provide consumers an opportunity to dispose of unused medications safely. Ocean County presently has 21 prescription/medicine drop-off boxes for County residents to dispose of unused or expired prescriptions. These drop-off boxes are available 24 hours per day, 7 days per week.

The COVID-19 pandemic has brought on unprecedented challenges for the health care system generally, as well as specific challenges for patients coping with SUDs. Emergency rooms, previously a common first stop for patients seeking help with a SUD, have become less accessible as patients hesitate to come to the emergency room due to fear of infection. Although the risk of severe illness from COVID-19 for people who use drugs or have a SUD is not known, people who use drugs may have underlying medical conditions that put the individual at an increased risk for severe illness from COVID-19. Moreover, social and economic changes caused by the pandemic, along with the

traditional difficulties regarding treatment access and adherence can increase the risk of developing a SUD. New Jersey had a higher number of drug-related deaths⁴⁵ in each of the first four months of 2020, when compared to 2019. The NJ DHS extended telehealth coverage for Medicaid members, distributed additional Narcan and enabled certain medication assisted treatment home delivery options to expand access to care. In Ocean County, the Health Department assigned a social support coordinator for residents with COVID-19. The coordinator assists residents with social service requests including access to food, clothing, emotional/behavioral support, medical assistance, housing services, unemployment benefits, grief support, health care coverage, and transportation concerns. The department can also link residents with SUD treatment providers throughout the county.

Summary: Nature of the Need

Nearly 70 percent of respondents to the needs assessment questionnaire identified SUD services as one of the top three most important prioritized need areas for residents in Ocean County. The stigma associated with SUDs, access to transportation and long waitlists were all equally identified as the top three key barriers to obtaining SUD services in the county. Individuals also stated there is a lack of diversity among staff employed by agencies that provide these services. Most respondents expressed there to be various crisis response measures for substance abuse but that the county lacks prevention programs to combat substance use before the intervention of emergency or criminal repercussions is needed. Other respondents felt that the minimal or lack of health insurance coverage of an individual greatly effects the ability to receive services.

Focus groups and key informant interviews found that most people discover SUD services through the Ocean County Health Department (OCHD), hospitals, law enforcement agencies, family or friends and local faith-based organizations. Many of the participants felt that the population of individuals experiencing homelessness concurrently with a SUD are at a greater risk for relapse after treatment. Individuals who are homeless sometimes encounter situations while living on the street or in the woods that can lead the individual toward increased substance abuse. Focus groups also discussed the idea that further community outreach by local leaders could help to reduce the stigma often associated with seeking help. Some consumers noted the lack of public transportation in the county contributed to the reluctance to find treatment or recovery programs. Participants overwhelmingly noted service delivery barriers are ongoing and continue to affect the entire county.

Of the participants currently or previously engaged in services, 50 percent agreed that staff were well trained and knowledgeable. A large percentage felt that services were not widely advertised or known by residents in the county. The majority of participants cited researching services through the internet or calls to local providers to determine eligibility. Additionally, consumers identified many substance use treatment centers only offer short-term stays, usually 14 days, which can lead to high recidivism rates for this vulnerable population.

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

The Human Services Advisory Council (HSAC) in collaboration and partnership with the Mental Health Board inherently engage in strategies to identify and address, to its capability and scope, change. Continued research will be conducted to ensure the contributing and evolving factors influencing substance use disorder can be addressed more adequately within prevention initiatives. Various Ocean County agencies, including the HSAC and the Mental Health Board, host monthly meetings that provide opportunities to discuss substance use disorder. These meetings bring together partners to address barriers and collaborate to ensure residents have access to the appropriate care.

The OCHD is the lead agency for the County Overdose Fatality Review Program (OC-ORFP), a multi-pronged approach to combat overdose death in Ocean County. The program examines an overdose decedent's collective history with the hope to better understand substance use disorder and overdose fatalities. The social autopsy is used to empower county agencies and health providers to develop new programming and advocate for policy change that can lead to reduced numbers of addiction and overdose deaths in Ocean County. The OC-ORFP team collects data to create a comprehensive substance use report that provides accounts and context around the circumstances associated with abuse and overdose, specific to Ocean County. Each year, the program seeks to identify programmatic fissures in public systems and social services that, if strengthened, could prevent future deaths. Through the identification of these missed opportunities in the system of care and subsequent development of targeted prevention, treatment and recovery strategies combined with recommendations on policies and laws this initiative's long-term goal is the prevention of overdose death.

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

Focus group and key informant interviews found that Ocean County residents experiencing a need for SUD services often find resources through local hospital emergency rooms or family and friends. Residents commonly cited social media and internet searches as an additional method. Additionally, participants expressed the limited access to transportation throughout the county is a significant hindrance to obtaining services. Participants expressed a need for additional community outreach events to break the stigma associated with SUD. Participants also felt that there is a need for an inpatient treatment center within the county.

Need Area: Survey Results

Substance Use Disorder and Prevention Services

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.	73	17.81 %	28.77 %	26.03 %	9.59 %	17.81 %	100%
2. Anyone in the county is able to access services.	73	15.07 %	28.77 %	30.14 %	10.96 %	15.07 %	100%
3. Services are widely advertised and known by the county.	73	15.07 %	34.25 %	23.29 %	9.59 %	17.81 %	100%
4. Services take race, age, gender, ethnicity and more into account.	73	6.85 %	17.81 %	32.88 %	10.96 %	31.51 %	100%
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	73	5.48 %	12.33 %	35.62 %	12.33 %	34.25 %	100%
6. Staff are well trained, knowledgeable and provide good customer service.	73	4.11 %	12.33 %	36.99 %	12.33 %	34.25 %	100%

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	73	37	50.68%
Services do not exist	73	19	26.03%
Transportation	73	41	56.16%
Cannot contact the service provider	73	9	12.33%
Too expensive	73	22	30.14%
Lack of awareness of service	73	26	35.62%
Cultural Barriers	73	21	28.77%
Services provided are one-size fits all, and don't meet individual needs	73	20	27.40%
Stigma Leads to Avoidance	73	42	57.53%
Eligibility Requirement (explain below)	73	22	30.14%
Availability of Substance Use Disorder Services	73	30	41.10%
Availability of Substance Abuse Prevention Programs	73	26	35.62%
Other (explain below)	73	7	9.59%



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, batterer intervention services, the New Jersey Department of Children and Families (NJ DCF) Office of Domestic Violence Services, domestic violence liaisons, domestic violence hotline, County Family Success Centers, etc.)

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

The New Jersey State Police⁴⁷ reported that in 2019 there were a total of 59,645 domestic violence offenses reported, which is a one percent decrease from 2018 (60,130). Domestic violence complaints that had prior court orders issued against the offender increased from 9,853 in 2018 to 10,761 in 2019. The number of domestic violence incidents that resulted in homicide increased by three percent in 2019. Of the domestic violence offenses reported, 84 percent were recorded as assault or harassment. Arrests were made in 37 percent of the total offenses reported in the State. Children were actively involved or present during 25 percent of the domestic violence incidents reported throughout New Jersey. Substance use was an apparent factor in 22 percent of the reported offenses.

In 2019, Ocean County had 4,372 domestic violence cases, an 8.6 percent increase from 2018. The majority of incidents occurred on Sunday. Domestic violence incidents in the county that resulted in homicide increased from two reports in 2018 to four reports in 2019. Of the domestic violence offenses reported, assault accounted for 1,656 cases while harassment accounted for 1,864 cases. These were the top two offenses in Ocean County. Without factoring in municipality population size, Toms River had the highest domestic violence offenses reported, followed by Brick and Lakewood Townships. Age, race and gender were not disclosed in the New Jersey State Police report.

Survivors of domestic violence residing in Ocean County can obtain services through numerous confidential programs. The NJ DCF operates the Division on Women (DOW), which funds services in each of the State's 21 Counties to meet the needs of victims of sexual assault and domestic violence. Services include emergency shelter, 24-hour helpline, crisis counseling, Domestic Violence Response Teams (DVRTs) and advocacy. The New Jersey Domestic Violence Hotline operates 24 hours, 7 days a week to provide confidential access to domestic violence information and services. The hotline is bilingual and accessible to individuals who are deaf or hard of hearing. New Jersey also as an Address

⁴⁷ "2019 Annual DV Report," *New Jersey State Police*, www.njsp.org/ucr/domestic-violence-reports

Confidentially Program (ACP) that assists individuals who, because of domestic violence, have relocated for safety reasons. This program limits the ability of an abuser to access information that would reveal the new location of an ACP participant. ACP provides eligible domestic violence survivors with a substitute mailing address, which has no connection to the survivor's actual location.

The NJ DCF-designated lead domestic violence services program for Ocean County is Providence House of Catholic Charities. Providence House assists survivors with separation from abusive individuals, locating alternative housing and filing restraining orders to remove barriers that can prevent a survivor from breaking the cycle of violence. Providence House has a 24-hour helpline, emergency safe houses, individual counseling, support groups and legal advocacy. Providence House also offers the Peace: A Learned Solution (PALS) program — a creative arts therapy program — to children ages three to 12 years who have witnessed violence in the homes. Catholic Charities additionally provides community education on domestic violence.

Ocean County College operates the county Displaced Homemaker Program, which provides short-term educational or training grants to help individuals become economically self-sufficient. This program is designed to service those who have lost a primary source of income due to separation, divorce, disability or death of the primary family provider. Program services are intended to enhance employability and earnings, and enhance the quality of life for the displaced homemaker and the entire family. Services include career, employment and life counseling, connection to social and community organizations, and job search assistance. Other available services include academic advising, health and wellness programs, supportive counseling, self-esteem and confidence building, and information and referrals to community resources and social services.

Since domestic violence can include sexual assault, Ocean County has a designated sexual abuse and assault program operated by St. Francis Counseling Service. The program supports survivors of sexual violence with services that include a confidential, anonymous 24-hour crisis hotline and short-term individual and group counseling. Ocean County has a Sexual Assault Response Team (SART) based out of the Ocean County Prosecutor's office. The SART is made up of law enforcement agents, a confidential sexual violence advocate and a forensic nurse examiner. The SART exists to provide victim-centered services, to help minimize re-victimization, to provide forensic medical exams quickly and with quality evidence examination, and to assist in prosecution. Members of the SART accompany individuals to forensic exams, police interviews and court proceedings.

The national pandemic has led to increased reports of domestic violence⁴⁸ worldwide, spurred by restrictions imposed to control the spread of COVID-19. In New Jersey, at a press briefing on Monday, May 18, 2020, the New Jersey State Police Superintendent reported a decrease in domestic violence reports after Executive Order No. 107 was issued on March 21, 2020, directing all residents to stay at home until further notice. However, experts noted this decline was likely a result of underreporting. Factors that contribute to underreporting are the inability to contact helplines safely and a real or perceived lack of access to resources. Additionally, the fear of contagion could have prevented an individual from seeking refuge at a domestic violence shelter. On April 24, 2020, the State issued

⁴⁸ "Domestic Violence Calls Mount," *New York Times*, www.nytimes.com/2020/05/15/us/domestic-violence-coronavirus.html

Administrative Order No. 2020-9 preventing Municipalities and Counties from imposing COVID-19 related restrictions on hotels, motels, or private residences housing individuals lacking permanent housing, including domestic violence victims, and extending protection from eviction to such individuals. To prevent crowds that contradict social distancing measures at domestic violence shelters, the NJ DCF DOW issued a guidance to service providers on July 7, 2020 requiring domestic violence service programs operating under contract with the NJ DCF to use hotels or motels for overflow when emergency safe houses are full.

Summary: Nature of the Need

According to the Centers for Disease Control and Prevention (CDC)⁴⁹, about one in four women and one in ten men have experienced contact sexual violence, physical violence, psychological aggression or stalking by an intimate partner. Over a quarter of respondents to the needs assessment questionnaire identified domestic violence services to be an important prioritized service need area for Ocean County. Of the respondents, 30 percent agreed there are enough services available in the county to address this need area. The same amount reported an unfamiliarity with domestic violence services expressing there has not been a need for these services by the individual. The majority of respondents agreed that all persons, regardless of race, age, gender identity or ethnicity, are able to access services and that staff are well trained and knowledgeable.

More than 65 percent of respondents identified a lack of awareness as the most significant barrier to obtaining domestic violence services. Respondents felt that those experiencing domestic violence do not often know where to search for services. Survivors of domestic violence are sometimes encouraged to outreach a trusted friend or family member, but respondents were concerned that a majority of the public lacked the knowledge to refer individuals to appropriate services. To increase awareness, Ocean County recognizes Domestic Violence Awareness Month each October. Events are hosted throughout the month to deliver education about the prevalence of domestic violence and resources available in the community to assist domestic violence survivors and family or friends that may be concerned a loved one is experiencing domestic violence.

An additional key barrier, identified by 60 percent of respondents, is the stigma that can exist around domestic violence. Research has shown there are two main stigma components to domestic violence; individual and interpersonal. Studies through the National Library of Medicine⁵⁰ define individual stigma as the psychological processes in which individuals engage in response to stigma, such as concealment. Advocates note that a significant amount of time may lapse before an individual realizes there is a pattern of domestic violence in the relationship. It can take even longer for an individual to make safe decisions to leave an abuser. Those experiencing domestic violence will often stay silent out of a fear of judgement. Interpersonal stigma refers to interactions that occur between the stigmatized and the non-stigmatized. Domestic violence survivors can feel lonely, isolated and frightened. Inadvertently, when made aware of the situation by the survivor, individuals may re-traumatize survivors and lead to further isolation and fear. Some cultural differences can also deter

⁴⁹ “Intimate Partner Violence, *Centers for Disease Control and Prevention*, www.cdc.gov/violenceprevention/intimatepartnerviolence

⁵⁰ “Structural Stigma,” *National Library of Medicine*, www.ncbi.nlm.nih.gov/pmc/articles/PMC5172391/

domestic violence survivors from reporting like a perceived belief of specific gender roles that emphasize control of a partner.

Transportation in Ocean County was also noted as a barrier to service delivery by 30 percent of respondents. When domestic violence occurs in the household, survivors often find the safest place to be is out of the home and away from further abuse. Lack of available transportation can play an influential role in preventing individuals experiencing domestic violence from obtaining services. In the southern and western areas of the county, the limited access to public transportation intensifies this barrier.

Need Area: Survey Results Domestic Violence Services

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.	73	13.70 %	26.03 %	23.29 %	6.85 %	30.14 %	100 %
2. Anyone in the county is able to access services.	73	12.33 %	17.81 %	35.62 %	8.22 %	26.03 %	100 %
3. Services are widely advertised and known by the county.	73	13.70 %	34.25 %	23.29 %	5.48 %	23.29 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	73	8.22 %	19.18 %	30.14 %	6.85 %	35.62 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	73	4.11 %	4.11 %	32.88 %	10.96 %	47.95 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	73	5.48 %	4.11 %	35.62 %	12.33 %	42.47 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	73	12	16.44%
Services do not exist	73	14	19.18%
Transportation	73	22	30.14%
Cannot contact the service provider	73	9	12.33%
Too expensive	73	4	5.48%
Lack of awareness of service	73	48	65.75%
Cultural Barriers	73	29	39.73%
Services provided are one-size fits all, and don't meet individual needs	73	11	15.07%
Stigma Leads to Avoidance	73	44	60.27%
Eligibility Requirement (explain below)	73	6	8.22%
Other (explain below)	73	9	12.33%



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

Stable, responsive, nurturing relationships and rich learning experiences in the earliest years provide lifelong benefits for learning, behavior and both physical and mental health⁵¹. Parenting is perceived as an important public health issue facing our society and is documented as the pinnacle element implicated in childhood development, wellness and overall success. Support for parenting is listed by the American Institutes for Research⁵² as one of the four categories of United States programs, services and policies for children birth to 3 years that affect the extent of inequality and provide supportive early life experiences. The essential components of parenting such as caring for and protecting from harm, controlling settings, enforcing boundaries, supporting development to optimize potential and maximizing opportunity are designed to promote wholeness within the child and the family unit. Parenting influences emotional and physical health along with behavior while buffering against or building resilience toward adversity and mediators of damage⁵³. Parenting is considered an acquired skill, shaped through experience and circumstance. General practitioners, community pediatricians, service providers of all types and primary health teams are in key positions to promote services for the whole child, delivered through supporting better parenting. Together with social services and education, initiatives that teach and enhance parenting skills so that parents can take a more effective role with their children have emerged successfully in recent years.

Unfortunately, not all children have equal chances to experience supportive interactions and enriching environments, especially those in poverty, of color, and at risk because of other social and familial challenges. As such, the NJ DCF and its partners work to support family success in the state. New Jersey has developed a strong network of prevention support and services that are culturally responsive, strength-based and family-centered. The State has doubled its support for evidence-based home visiting programs. Three models of these programs are available in each of the State's 21 Counties. Families are matched with trained and qualified professionals who provide information and

⁵¹ National Scientific Council on the Developing Child (2004). Young Children Develop in an Environment of Relationships: Working Paper No. 1. Retrieved from www.developingchild.harvard.edu.

⁵² Howard, Eboni C., "What Matters Most for Children: Influencing Inequality at the Start of Life" (2015). *Mickey Leland Center on Hunger, Poverty, and World Peace*. www.digitalscholarship.tsu.edu/mlcejs_info/11

⁵³ Houghugh M. (1998). The importance of parenting in child health. Doctors as well as the government should do more to support parents. *BMJ (Clinical research ed.)*, 316(7144), 1545. www.doi.org/10.1136/bmj.316.7144.1545

support related to child development, healthy parent-child interaction, and the importance of early learning and school readiness. Home Visitors collaborate with families to provide connections to community resources to enhance family self-sufficiency and provide early screening for the detection of developmental delays.

The Healthy Families program provides support to parents from pregnancy and birth to 3 years. For Ocean County, it is provided by Preferred Behavioral Health Group Children's Services in Brick Township. Nurse-Family Partnership services support families from first-time pregnancy to 2 years. This program is provided to county residents through Visiting Nurses of Central Jersey. The Parents as Teachers program supports pregnancy and infancy to preschool. Visiting Nurses of Central Jersey also provides the Parents as Teachers program. St. Francis Community Center in Long Beach Township offers this service to residents located in southern Ocean County. Services focus on parent education related to healthy child development, parent-child activities, ongoing child developmental screening and monitoring, parent education health and nutrition, family goal planning, support for self-sufficiency and linkages to additional social and family support services.

St. Francis Community Center provides several additional programs to support parents and families. The Parenting in Recovery program focuses on supporting families with a history of substance use disorder. Parents explore the effects of substance abuse on the family while learning effective parenting skills to strengthen family relationships. The center offers numerous parenting workshops and groups to meet the specific needs of parents and encompasses multiple aspects to child development. Additionally, St. Francis Community Center provides in-home therapeutic parenting skills and case management services to Spanish-speaking families referred by DCP&P.

Ocean Mental Health Services offers a long-term program designed to assist DCP&P involved families challenged with housing instability that would put children at risk for out-of-home placement or delay reunification of families. The Keeping Families Together (KFT) program utilizes a housing-first model to work with families in obtaining stable, subsidized housing. The goal of the program is to assist families in achieving housing stability, greater family functioning, child well-being, peer support and other skills and opportunities that foster increased self-sufficiency. The KFT program utilizes licensed clinicians, case managers, an employment specialist and a peer/parent advocate.

The Ocean County Family Support Organization (FSO) is a non-profit organization in Ocean County that supports families with children that have emotional and behavioral needs. Families are given community-based resources and support in a family-friendly, child-centered, culturally competent manner. Ocean County FSO collaborates with the County Care Management Organization (CMO) and other system partners to enhance the services provided to children and families.

A few of the support groups provided through Ocean County FSO are:

- Let's Talk Teens – For Parents/Caregivers with children 13 years and older.
- New Faces in Support – Education & networking for parents/caregivers with children 12 years and younger
- Open Parents Support – Informal group of parents/caregivers to share concerns
- Grandparents Support – For grandparents caring for a grandchild

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- Parents Empowering Parents – For parents with a child with a mental health concerns

There are two Family Success Centers (FSCs) in Ocean County, located in Toms River and Barnegat. Anchor FSC and Oasis FSC are community based family-centered neighborhood gathering places where any community resident can go for support, information and services. All services are free and confidential. The centers offer support groups, interactive workshops and family activities.

Family Success Centers also provide 10 core services:

- Access to health
- Advocacy
- Development of family success plans
- Parent education
- Parent-child activities
- Housing services
- Life skills
- Economic self-sufficiency/job readiness
- Home visiting programs and
- Information and referral services

Services are available English and Spanish. The goals of FSCs throughout the state are to promote family well-being, link families to community services, empower and support families, provide culturally sensitive programs and help families identify and build on strengths.

The Ocean County Health Department hosts a Parenting Wisely program that is designed to equip parents with necessary tools to engage with children during difficult family situations. Parents learn constructive skills to lessen drug and alcohol abuse in youth, school and homework problems, delinquency and family conflict. The program is also available in Spanish.

Ocean County parents of children in who identify within the LBGTQIA+ community can find resources through PFLAG Jersey Shore. PFLAG Jersey Shore offers monthly support meetings for parents of children to provide comfort, information and discussion about LBTQIA+ issues in a safe, confidential and non-judgmental environment. The organization provides peer-to-peer guidance for families to support a child who identifies as LBGTQIA+ community in a positive and encouraging manner.

Summary: Nature of the Need

Parenting skills services were identified as one of the least important prioritized need areas for Ocean County residents by respondents in the needs assessment questionnaire. Of those surveyed, almost 39 percent stated there are not enough services available in the county to help those in need of parenting skills services. Comparatively, over half of the respondents cited a lack of knowledge surrounding these services. Questionnaire results also showed 52 percent of respondents felt that services are not widely advertised or known by the public. This likely contributed to the 65 percent of respondents that identified a lack of awareness of services as a key barrier to service delivery. Of those previously or currently engaged in parenting skills services, 38 percent of respondents

agreed that facilities were of good quality and 42 percent felt staff were well trained and knowledgeable. Additional barriers to service delivery identified by respondents were stigma, transportation and cultural differences. Commonalties between responses included the need for more basic “Parenting 101” type services. Respondents also noted more community outreach is needed to inform residents of the services that are available for parents.

Need Area: Survey Results

Parenting Skills Services

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.	72	6.94 %	31.94 %	22.22 %	4.17 %	34.72 %	100 %
2. Anyone in the county is able to access services.	72	6.94 %	25.00 %	27.78 %	5.56 %	34.72 %	100 %
3. Services are widely advertised and known by the county.	72	12.50 %	40.28 %	12.50 %	5.56 %	29.17 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	72	2.78 %	20.83 %	26.39 %	5.56 %	44.44 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	72	1.39 %	4.17 %	33.33 %	5.56 %	55.56 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	72	1.39 %	6.94 %	36.11 %	5.56 %	50.00 %	100 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	72	12	16.67%
Services do not exist	72	14	19.44%
Transportation	72	24	33.33%
Cannot contact the service provider	72	8	11.11%
Too expensive	72	6	8.33%
Lack of awareness of service	72	47	65.28%
Cultural Barriers	72	23	31.94%
Services provided are one-size fits all, and don't meet individual needs	72	17	23.61%
Stigma Leads to Avoidance	72	25	34.72%
Eligibility Requirement (explain below)	72	7	9.72%
Other (explain below)	72	11	15.28%



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

From July 2018 to June 2019⁵⁴, there were 41,497 total court filings in Ocean County. This represents a decrease of four percent from the previous year. Ocean County had the 11th highest number of court filings in the State. Court proceedings in Ocean County are conducted at the Ocean County Courthouse located in the County Seat (Toms River). Attorney fees are based on numerous factors including location, experience level, qualifications and type of work. Fees can be billed hourly, at a flat rate, by contingency or retainer. New Jersey's average legal rate⁵⁵ is \$276 per hour (adjusted to reflect the cost of living for New Jersey), which is higher than the national average of \$258 per hour. The Ocean County Bar Association has a free Lawyer Referral Service for residents in need of a lawyer or legal advice. The Bar Association does not provide pro bono services but can assist the public with finding a participating lawyer that can assist individuals with specific legal issues.

Ocean County residents in need of assistance with navigating the court system can receive help through the State sponsored Judiciary Ombudsman Program. The Ombudsman is a neutral staff person that answers questions, addresses concerns from the public and is responsible for providing a bridge between the courts and the community. The Ombudsman does not have the ability to give legal advice or make referrals to specific legal services. The Ombudsman also coordinates community outreach efforts to familiarize the public with the court system, and to promote an environment of public trust and confidence. The Office of the Ombudsman for Ocean County is located in the Ocean County Courthouse.

Residents, adult or juvenile, charged with an indictable (felony) offense are entitled to representation by an attorney, regardless of the individual's ability to afford a legal defender. The New Jersey Office of the Public Defender (NJOPD) operates an office in each of the state's 21 counties to provide

⁵⁴ "Annual Reports, 2018-2019," *New Jersey Courts*, www.njcourts.gov/public/annualreports.html

⁵⁵ "2020 Legal Trends Report," *Clio*, www.clio.com/resources/legal-trends/2020-report/read-online/

criminal legal assistance for residents with a gross annual income under 125% of the federal poverty level. The decision to accept a defendant's application for public defender services is determined by the court rather than the NJOPD. Public defenders do not provide representation to individuals facing domestic violence complaints in Family Court, traffic or minor offenses that are handled in local Municipal Court or parole violation matters.

Through different subdivisions of the NJOPD, public defenders can provide representation to

- Parents or guardians accused of abusing and/or neglecting children and facing possible termination of parental rights
- Children who are the subjects of litigation against their parents and/or guardians when concerning alleged abuse and/or neglect or possible termination of parental rights
- Individuals in mental health-related commitments and
- Clients of the New Jersey Department of Human Services' (NJ DHS) Division of Developmental Disabilities in guardianship hearings

The NJOPD will continue to represent an individual, if necessary, in a direct appeal of a conviction, an adjudication or in any post-conviction proceedings in which the court rules provide that counsel may be assigned.

South Jersey Legal Services, Inc. (SJLS) is a non-profit organization that provides legal representation and advocacy to low-income individuals in several New Jersey Counties, including Ocean. SJLS offers free legal services in some civil cases to clients whose income and assets are within established limits.

SJLS most often assists with cases related to

- Supplemental Security Income (SSI), Temporary Aid to Needy Families (TANF), General Assistance (GA) and New Jersey Supplemental Nutrition Assistance Program (NJ SNAP)
- Medicaid
- Unemployment benefits
- Domestic violence
- Landlord-tenant disputes
- Elder Law
- Bankruptcy and foreclosure
- AIDS Advocacy
- Internal Revenue Service (IRS) tax law
- Migrant Farm-Worker labor law
- Superstorm Sandy disaster relief

SJLS encourages the participation of private attorneys in the delivery of legal services through its Private Attorney Involvement Program and is also involved in numerous special projects across the state that benefit a wide variety of demographics including veterans, seniors and domestic violence

survivors.

The Community Health Law Project (CHLP) provides legal and advocacy services to low-income individuals with disabilities in Ocean County. The organization is unique in that it specializes in services exclusively for individuals with disabilities, although its areas of expertise cover the entire range of civil law. The CHLP serves consumers of mental health services as well. Nearly forty percent of the CHLP's cases are Social Security Disability (SSD) insurance and SSI matters, with 95% of the appeals resulting in reversals of denials. The CHLP also serves consumers outside of Ocean County and assists close to 5,000 New Jersey residents throughout the year.

There are 16 independent Court Appointed Special Advocate (CASA) programs serving each of New Jersey's counties. In Ocean County, children involved in cases of abuse or neglect can be appointed a CASA by a Family Court judge. The CASA is an official part of the judicial proceedings and works alongside attorneys and social workers as an appointed officer of the court. The CASA is a volunteer specially trained to advocate for the best interest of the child. The CASA will make recommendations to the judge and attend hearings until the case is resolved.

Catholic Charities located in Lakewood Township is available to provide civil legal assistance for immigration services. Catholic Charities assists consumers with the completion of immigration petitions and the translation of documents. The Agency also provides information and referral.

Summary: Nature of the Need

More than 20 percent of respondents identified legal advocacy services as a prioritized service need area for Ocean County residents. About half of the respondents cited that there are not enough legal and advocacy services available within the county to meet the need. However, a majority of the respondents also identified lacking sufficient knowledge around legal and advocacy services and could not provide efficient answers to this section of the needs assessment questionnaire. More than 60 percent of respondents stated that services are not widely advertised or known by the public. Concurrently, a lack of awareness of services was identified as the leading barrier to receiving legal and advocacy services in Ocean County.

Approximately 42 percent of individuals previously or currently engaged in services identified the staff of agencies, at which legal and advocacy services were obtained, to be well trained and knowledgeable. More than 30 percent cited experiencing high service costs. Narrow financial eligibility requirements for public services often hinder populations with an income above the federal poverty level. Respondents additionally cited access to transportation and cultural differences as barriers to services within this need. Responses noted difficulties for residents in the southern and western areas of the county to access services centered in Toms River. Responses also noted a need for consideration of marginalized populations, like individuals with disabilities, seniors and individuals experiencing mental or behavioral health disorders.

Need Area: Survey Results

Legal and Advocacy Services

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.	72	23.61 %	27.78 %	19.44 %	1.39 %	27.78 %	100 %
2. Anyone in the county is able to access services.	72	15.28 %	29.17 %	23.61 %	2.78 %	29.17 %	100 %
3. Services are widely advertised and known by the county.	72	19.44 %	41.67 %	12.50 %	2.78 %	23.61 %	100 %
4. Services take race, age, gender, ethnicity and more into account.	72	9.72 %	18.06 %	25.00 %	5.56 %	41.67 %	100 %
5. Facilities that provide service to meet this need are of good quality. (e.g., clean, well-supplied)	72	4.17 %	11.11 %	29.17 %	4.17 %	51.39 %	100 %
6. Staff are well trained, knowledgeable and provide good customer service.	71	5.63 %	7.04 %	33.80 %	8.45 %	45.07 %	99.99 %

Key Barriers

Barrier	Total Number of Respondents	Number of Times Identified	Percentage of Responses
Wait Lists	72	19	26.39%
Services do not exist	72	20	27.78%
Transportation	72	21	29.17%
Cannot contact the service provider	72	8	11.11%
Too expensive	72	22	30.56%
Lack of awareness of service	72	50	69.44%
Cultural Barriers	72	20	27.78%
Services provided are one-size fits all, and don't meet individual needs	72	10	13.89%
Stigma Leads to Avoidance	72	16	22.22%
Eligibility Requirement (explain below)	72	21	29.17%
Other (explain below)	72	9	12.50%

The County Board of Commissioners, the County Department of Human Services (OCDHS) and the County Human Services Council (HSAC), along with the Office for Individuals with Disabilities Unit, collectively chose to input a narrative on the services accessed and barriers experienced by the disabilities population within this 2020 Ocean County Needs Assessment Report. The New Jersey Department of Children & Families when presenting this County Needs Assessment requirement did not indicate a need area that could specifically focus on the individuals with disabilities population although there are significant gaps in services throughout the State, which can interfere with the accessibility of services for individuals with disabilities. Therefore, the HSAC felt the inclusion of the following narrative was essential.

Summary: Scope of the Need

People with disabilities often face barriers more frequently, which can have a large impact on the population's ability to obtain needed services. An estimated 61 million adults in the United States live with a disability. About 20 percent of people in the country report some degree of hearing loss and 7 million people report having a visual disability. One million people in the United States are legally blind. Nearly 16 percent of people in the country have difficulties with physical functioning. Almost 8 million people in the United States have an intellectual disability, including 425,000 children.

According to the Edward J. Bloustein School of Planning and Public Policy at Rutgers University, the total reported population with a disability⁵⁶ residing in Ocean County is 77,492. According to the United States Census Bureau, as of 2019, 7.4 percent of the County population under 65 years is disabled. The median earnings in the past 12 months for individuals with disabilities is \$30,087. During the same period, 5,589 individuals with disabilities lived below the federal poverty level. Out of this number, 458 individuals were unemployed with a disability. Employment rates for people with disabilities are consistently less than half of people without disabilities. Sectioned by race and ethnicity, there are 71,991 individuals with disabilities that identify as White, 5,086 individuals that identify as Hispanic or Latino and 2,783 that identify as Black.

In Ocean County, 34,152 male and 40,351 female residents older than 18 years identify as having a disability. Approximately 5,411 Ocean County youth reported having a disability. Less than 200 male children in between birth and 5 years were identified as having a disability compared to the less than 50 female children in the same age range. For youth between 6 and 17 years, there were 3,608 reported males and 1,347 females who identified as having a disability.

⁵⁶ "Disability Population by State," *Rutgers University*, www.bloustein.rutgers.edu/

Based on the number of reported individuals with a disability in Ocean County, the most prominent disabilities are ambulatory disabilities (42,637), independent living disabilities (27,293) and cognitive difficulties (24,890). Other disabilities reported within Ocean County are hearing (22,635) and vision impairments (12,968). Approximately 14,773 individuals with disabilities in Ocean County report a self-care disability. Within Ocean County, there are 92 adult communities, 36 long-term care facilities, 36 alternate living facilities and 29 low income/subsidized senior and disabled housing complexes.

Summary: Nature of the Need

The Commission for Individuals with Disabilities, overseen by the OCDHS, agreed that housing and transportation are the most important service area needs for the disabilities population in Ocean County. It was reported that there is an increased need for affordable housing as well as housing that is Americans with Disabilities Act (ADA) compliant. The Commission also expressed that affordable housing opportunities are not adequately advertised when housing is available. The Commission felt that additional group homes and respite programs would benefit the community. Caregiver violence and exploitation against people with disabilities remains a point of continued interest while caregiver support, burnout and awareness of resources also ranked within priority need areas.

Transportation concerns cited an insufficient number of routes and stops in the County and that not enough transport services are available to meet the growing need of the community. Transportation services, including ride share services, were noted as having a lack of available physical assistance necessary for consumers - while traveling. Additionally, the inability to bring caregivers on certain public transport services was a listed concern. The Commission felt that a lack of public transportation to medical specialists that are located out-of-county has become increasingly difficult, as specialists are not in abundance in the southern, central or northern region of New Jersey. Of note, consumers have encountered scheduling challenges with public transportation services, as buses are sometimes fully booked due to the limited number of which are available. Feeder routes are also a concern as it is often difficult for individuals to acquire needed transport to public bus routes typically a significant distance away from the individual's home.

Additional barriers within this population are those faced by caregivers of an individual with a disability. It was noted that caregivers often lack the knowledge or awareness of available caregiver services and support. Caregiver burnout is a significant topic of concern as well. Burnout can happen when caregivers do not receive the personal support needed, or try to do more than able -- either physically or financially. Caregivers who are "burned out" may experience fatigue, stress, anxiety, and depression. Many caregivers also feel guilty when spending time on themselves rather than on a disabled, ill or elderly loved one. The Commission suggested that a State implemented "caregiver navigator" program designed to offset some of the difficulties caregivers experience when searching for resources and support would most certainly serve to positively impact the community.

A barrier identified across all disability populations (child, adult and caregiver/supports) is that residents are not aware of the services available in Ocean County. It has been communicated that once a consumer is linked, the awareness of services increases and can provide an additional opportunity to connect with ancillary services. The Office for Individuals with Disabilities within the OCDHS provides information, referral and linkage to services as appropriate.

Many people with disabilities are highly dependent on personal care assistants or other care providers. The duration of these relationships is highly variable, but many last for decades and continue after formal employment ends. While many caregiving relationships are healthy and beneficial to all parties, violence, exploitation, and abuse are prevalent. In many cases, abuse by caregivers is similar to other forms of domestic violence in that the offenses⁵⁷ are physical, emotional, and sexual. In relatively recent years, there has been a growing recognition of violence against people with disabilities as another category of maltreatment commonly linked to caregiving relationships. While there has been relatively little systematic study of abuse of people with disabilities by caregivers outside institutional settings, a few studies have attempted to address this issue. A recent study⁵⁸ found that approximately 40 percent of individuals with disabilities had experienced some form of abuse or exploitation, including 10 percent who had experienced physical violence by paid caregivers. Since disability is increasingly prevalent among people with advancing age and because most elder abuse is perpetrated against people that are vulnerable because of some degree of mental or physical disability, almost all cases of elder abuse could also be categorized as violence against people with disabilities. About 30 percent of all children who experience substantiated child abuse and neglect have diagnosed disabilities. Many adults with disabilities who are too young to be considered elders also become victims of violence or abuse. The Commission continues to support prevention, education and screening initiatives to reduce the risk of caregiver violence against individuals living with disabilities.

The COVID-19 pandemic also created barriers to care for individuals with disabilities. The closure and/or opening of Day Programming services with limited capacity restrictions increased challenges for persons with disabilities and caregivers. Available supports and respite have been reduced impacting social and emotional well-being of consumers and family members. Throughout the COVID-19 pandemic, the Ocean County Department of Human Services has been assisting the Ocean County Health Department in handling phone calls from the “worried well” and providing them with crisis counseling and psychological first aid telephonically. OCDHS has also been working closely with the County Office of Emergency Management (OEM) to ensure that the community need for disaster behavioral health crisis counseling is met. The County OEM continues to distribute public awareness

⁵⁷ Sullivan, P. M., and J. F. Knutson. “Maltreatment and Disabilities: A Population-Based Epidemiological Study.” *Child Abuse and Neglect* 24, no. 10 (2000): 1257–1273

⁵⁸ Ulicny, G. R., G. W. White, B. Brandford, and R. M. Mathews. “Consumer Exploitation by Attendants: How Often Does It Happen and Can Anything Be Done About It?” *Rehabilitation Counseling Bulletin* 33, no. 3 (1990): 240–246

on the “Register Ready – New Jersey’s Special Needs Registry for Disasters,” which allows residents with disabilities or access and functional needs and families, friends, caregivers and associates an opportunity to provide information to emergency response agencies. This allows emergency responders to better plan and serve individuals with disabilities in a disaster or other emergency. Several Ocean County located agencies and faith-based organizations have transitioned services to meet the needs of the community while also following public health mandates regarding social distancing and limited in-person activities.