

Far Southside ROSC (TEECH) Needs Assessment for the ROSC – Year 3

Community resource Map and list of strengths and gaps

Description of the Community's current support of Far Southside ROSC Council Initiative, including strengths and opportunities. Far Southside ROSC Council has educated and will continue to educate the community on ROSC and RCO's and they appear receptive as evidence of their participation and input in the ROSC Council meetings.

According to the Substance Use and Mental Health Administration, a community-needs assessment is a collaborative process that determines the nature and extent both of needs and resources in a community. The Far Southside ROSC Council (TEECH) conducted a community needs assessment for the past couple of years which engaged the community, peers, and stakeholders in identifying the available resources and services for those residing on the Far Southside of Chicago. The needs assessment aimed to become one of the sources to developing a sustainable ROSC Council. The community needs assessment was developed using a holistic approach placing emphasis on the importance of a continuum of care which requires the assistance of the entire community. The focus of this assessment was in the areas of substance use and mental health, substance use prevention/treatment, early intervention, long-term recovery, recovery support, peer support, employment, housing, medical, mental health, financial stability, and legal assistance. Identified gaps in resources or the absence of resources needed were addressed throughout the assessments to enhance those who are in recovery, family, friends, and the overall community.

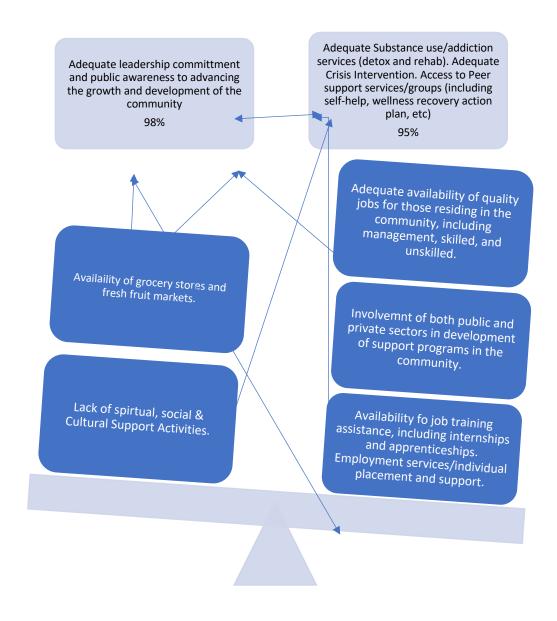
Year 1

According to the Far Southside needs assessment data, the following list of identified strengths of the community per the surveys were: See Exhibit A for Survey

- a. Availability of adequate health care services, pharmacies, hospitals, local clinics, including mental health and substance use services in the community.
- b. Adequacy of police, fire protection, and public safety in the community.
- c. Adequate accessibility to local schools, elementary, secondary, and post-secondary, and vocational programs in the community.

The gaps were identified in the survey outcomes. Survey outcomes are delineated in graph form which pinpoints the gaps that are most prevalent as perceived by the stakeholders and peers. The Far Southside ROSC Council hoped to bridge the gaps by providing education, support and awareness for the community, and education and support for the person in recovery, and their family and friends. Many of those methodologies were used during subsequent ROSC meetings and proved effective as evidenced by the first-year outcome of the ROSC Council and the collaboration with the community, stakeholders, family, and friends.

Exhibit A SURVEY OUTCOMES

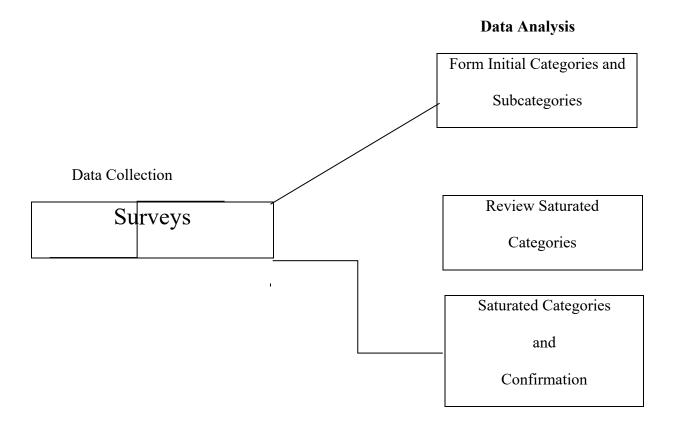


A. Assumptions and Limitations:

The limitations of this research study are associated with internal feelings and discomfort as it pertains to identifying loved ones or self who may be suffering with addiction/homelessness/unemployment and mental health.

The assumptions of this study included the following:

- a. The perception of the recovering person as it pertains to stigmas/stereotypes.
- b. The perceptions of the communities about support groups and services.
- c. The perceptions of family and friends of persons suffering with mental health, substance use disorders, and persons with lived experience
- d. Substance use involvement cannot subconsciously be inflicted on others.
- e. Stakeholders will be enthusiastic to collaborate and to build their community.



Data Analysis

Qualitative data analysis "builds on the data from the identified gaps, data analysis goes through the data and highlights significant statements, sentences, or quotes that provide an

understanding" (Creswell, 2007, p. 61). Creswell (2007) stated that this process allows the "researcher to follow a path of analyzing the data to develop an increasingly detailed knowledge of the topic being studied" (p. 19).

The data analysis consisted of several components. Recurrent communicative subject matter or examples were recognized, common items were grouped. This technique served to condense the data down to the concepts that were frequently and consistently conveyed in the surveys.

I. Define the goals for the assessment

- a. Articulate the purpose of the assessment The purpose of the assessment was to outline the gaps within the communities to obtain solutions to uniting communities by providing educational knowledge on long-term recovery, mental health issues and community concerns. The goal was to allow the voices of those most impacted by the identified gaps to be heard and addressed, resulting in collaboration with stakeholders to build a sustainable ROSC Council for the continuation of addressing gaps within the communities.
- b. Identify the target populations for the assessment of needs and services The communities are characterized by a fluctuation in socio-economic status where its residents run the gamut from poverty to wealth. The areas appear to be culturally diverse with approximately 50% African Americans, 30% Caucasians, 15% Hispanics, and 5% are of other races. The socio-economic gap in the far south side community seems to have created a culture of silence where "no one talks about substance use or mental illness." resulting in limited care and resources for those who have been afflicted with the disease of addiction and/or mental health. Addiction and mental health have brought about distress within the community as the youth and young adults are rapidly overdosing, dying, and becoming addicted to mood altering substances. In addition, the rapid increase in addiction and mental health within these communities has brought on overwhelming issue with unemployment, homelessness, and incarcerations.
- c. Determine how data will be collected and used: The data was collected from surveys that consisted of 15 questions from those who have been actively attending the ROSC

meetings (stakeholders and peers). The use of the data is to collectively obtain necessary information to possibly close some of the identified gaps. The sample consisted of 25 participants and the survey addressed affordable housing, adequate access to social services, availability of adequate health care, adequate accessibility to local schools, availability of grocery stores and fresh fruit markets, adequacy of police, fire protection, and public safety, spiritual, social and cultural support activities, adequate substance use/addiction services, peer and recovery support services, adequate leadership commitment and public awareness, availability to job training assistance and internships, involvement of both public and private sectors, adequate availability of quality jobs, strength of the community, needs of the community and the disadvantages of the community.

d. Determine the timeline for the process: Qualitative Methodology (Data collection and use)/ timeline. The qualitative methodology provided the opportunity for the participants' comments to evolve into a collective voice through the surveys. The TEECH Foundation used surveys and interviews to ascertain the perceived stakeholder community needs as they pertained to recovery support services and their readiness to support a ROSC and RCO. The following timeline was used:

Activities	Date	Responsible party	Measurable Outcomes	
	October 1, 2018	TEECH Foundation	Attendance Sign in Sheets	
ROSC meetings	November 10, 2018			
Survey	November 2018	TEECH Foundation	Survey Responses	
completion				
	October 2018	TEECH Foundation	Interview outcomes	
Interviews	November 2018			
	December 2018			
Community	December 2018	TEECH Foundation	Completed needs	
Needs			assessment	
Assessment				

a. Determine the strategic use of the findings - The aim of this research was to identify community-needs while building a collaborative process that determines the nature and extent both of needs and resources in a community. In this case, the community

has become disconnected and have increasing addiction, overdoses, mental health, homelessness and incarcerations that are not being addressed. This research discovered that a lack of assistance, resources, education and support remains an issue as evidenced by the open dialogue in the ROSC meetings and the surveys where peers gave clarity to the struggles they are enduring within their communities.

Strengths - A variety of local businesses to serve the community.
 Weaknesses - Lack of collaboration amongst organizations.

Year 2

According to the Community Needs Assessment Resource Guide National Gap "a community needs assessment is a process conducted by all Community Action Agencies every three years to determine the underlying causes and conditions of poverty within the community they serve and identify the available resources to address the unmet needs of the community's most vulnerable residents" (https://communityactionpartnership.com/publication_toolkit/community-needs-assessment-resource-guide/).

The Far Southside ROSC Council is entering into its second year and will be providing pertinent information of the gaps identified in year one.

The identified gaps from year 1 (one) had some successful outcomes. The Far Southside ROSC has collaborated with stakeholders who have opened doors to hiring community residence at the newly developed Evergreen Plaza mall. In addition, the monthly ROSC meetings appeared to create a platform that is beginning to break the cycle of silence within the communities as evidence of participant disclosure of what they feel is underreported violence and overdoses throughout the community. This solidified the need for needle exchange and Naloxone trainings and medication give away. The Far Southside ROSC presented the latest statistics and data to the community about the overdoses and violence in the Southside Communities to validate their assumptions.

Exhibit A

ILLINOIS VIOLENT DEATH REPORTING SYSTEM

Community areas on the south and west sides of Chicago consistently experience the highest incidence of are at increased risk for violence. Between 2013 and 2017, the pattern of violence showed significant conscity, as violence became overall less dispersed. The Chicago Community Area with the highest amount of y the south side of the city in 2013 to the west side by 2017.

Figure 3. Adolescent homicide ranks by Chicago Community Area (CCA)

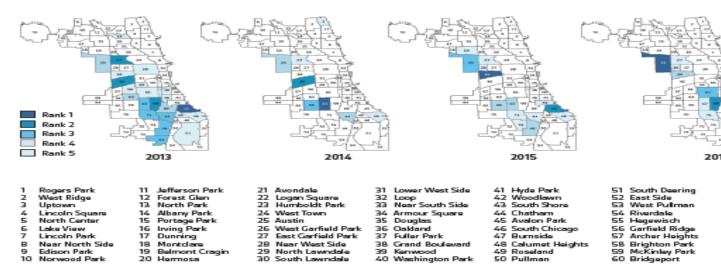


Table 1. Adolescent firearm homicides: Annual CCA rankings (name/corresponding CCA number); ranks with multiple CC/

CCA Rank	2013	2014	2015	2016		
1	South Shore (43)	West Englewood (67)	North Lawndale (29)	Austin (25)		
2	Englewood (68) Humboldt Park (23) South Lawndale (30)	South Lawndale (30)	South Shore (43)	Englewood (68)		
3	Auburn Gresham (71) Chatham (44) Roseland (49) West Englewood (67) West Pullman (53)	Chicago Lawn (66)	Austin (25)	New City (61)		
4	Austin (25) Gage Park (63) Greater Grand Crossing (69)	Austin (25) Chatham (44)	Roseland (49) Chicago Lawn (66) West Englewood (67)	North Lawndale (29		
5	Albany Park (14) Avalon Park (45) Brighton Park (58) Grand Boulevard (38) McKinley Park (59) Near West Side (8) New City (61) North Lawndale (29) South Chicago (46) South Deering (51) Washington Park (40)	Humboldt Park (23) Rogers Park (1) South Chicago (46)	Auburn Gresham (71) Belmont Cragin (19) Chatham (44) Humboldt Park (23) South Chicago (46) Washington Heights (73) West Garfield Park (26) Woodlawn (42)	Auburn Gresham (7 Humboldt Park (23) South Shore (43) West Englewood (6 West Garfield Park		

Stanley Manne Children's Research Institute: luriechildrens.org/SUDORS

Number of opioid-involved overdose deaths by Chicago Community Area, July 2017-June 2018

Stanley Manne Children's Research Institute: luriechildrens.org/SUDORS

Roseland - 22

Auburn Gresham – 17

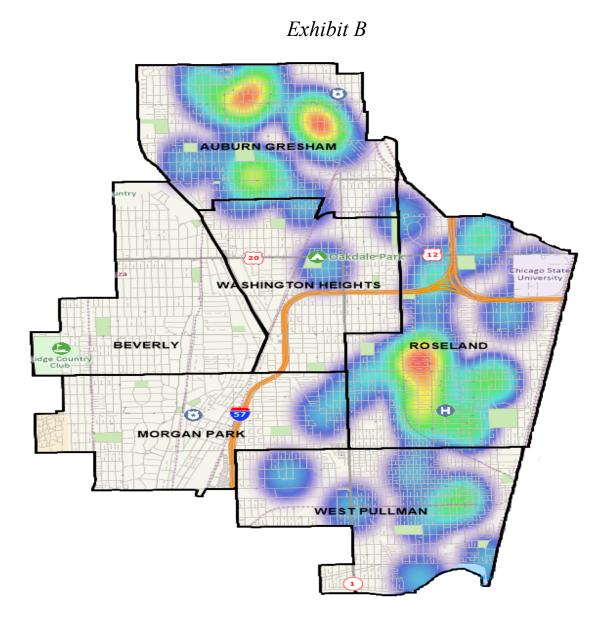
West Pullman -8

Beverly-0

Morgan Park <5

Density map of opioid-involved overdose deaths, Southwest Side of Chicago

Stanley Manne Children's Research Institute: luriechildrens.org/SUDORS



Need for continued research: The outcome

The research was taken from a small sample indicating dire gaps within the community. TEECH will continue to revisit the research so to broaden the sample to identify possible additional gaps within the communities. Albeit, at this time the gaps which have been identified are prevalent for those who voiced their opinions, and it appears that a continuation of research is needed to address and close the aforementioned gaps. Therefore, it is imperative that TEECH Foundation will continue with building a sustainable ROSC Council.

- II. List of Technical Assistance Priorities for Expanding ROSC in the community
 - a. More education for both providers and stakeholders on ROSC/RCO including webinars
 - b. Provide consultations for the ROSC /RCO providers
 - c. Assist with developing sustainability resources

III. Inventory of all SUD and COD resources:

1. Below is a list of licensed SUD Prevention and Treatment Services: MAT Services are Highlight MAT:

TEECH Foundation

Advocate Trinity

Footprints to Recovery

South Suburban Council

Interventions

New Hope

HRDI

Haymarket

Gateway Foundation

Women's Treatment Center

Mercy Housing

Salvation Army

Rosemoor – Assessment Substance

A Little Bit of Heaven

Lawndale Christian Health

Men and Women Prison Ministries

New Beginnings 12 Step

TEECH/Bethany 12 Step Meeting

2. Peer Recovery Support Service Providers are listed below:

TEECH Foundation

N' The Spirit

Lights of Zion

Kates Detective Services

Reassemble Education & Training Inc.

Transitional Training Services

Cornerstone Community Development Corporation

Education Design Development and Research Corporation

- 3. Location of Recovery Residences are listed below:
 - 1. Elite House of Sober Living
 - a. 331 Memorial Drive,
 - b. 1428 Elm Drive, 74 W 15 Street
 - c. 6830 S Talman, 1236 W 72nd Pl.
 - 2. It's About Change Sober Living

- a. 1604 Harbor Ave
- b. 409 Prairie
- c. 394 Madison Ave
- 3. Claudia and Eddies Sober Living a
 - a. 17116 S Elm Dr
 - b. 14714 S. Madison Ave
- 4. Yana House Sober Living
 - a. 7120 S Normal
- 5. Prentice House
 - a. 10710 S Wentworth
 - b. 255 W 112th Place
- 6. Featherfist Veterans Housing
 - a. 2255 E 75th Street
- 7. Affordable Recovery Home 13811 Western Ave
- 8. Phoenix Recovery Home 501 N Central
- 9. House of James 15957 Halsted Street
- 10. N' The Spirit Recovery Home -7225 S Yale
- 11. God Is Sober Living 7528 S Eggleston
- 12. Henry's Sober Living 8032 S Ingleside Ave
- 13. Hardin House -7249 S St. Lawrence Ave
- 4. Social Service (Department of Children Services DCFS)
 - a. Envision Unlimited
- 5. A count of the credentialed peer recovery support professionals
 - 1 NCRS
 - 3 Recovery Coaches
 - 2 CADC
 - 1 CSADC
 - 1 CODP I
 - 1 CODP II
 - 1 NCAC II
 - 1 GCE
 - 1 Recovery Coach Trainer
- Description of community current readiness to support the ROSC and RCO Far
 Southside ROSC (TEECH) has educated and will continue to educate the community on
 ROSC and RCO's and they appear receptive as evidence of continued engagement in the
 ROSC council meetings.
 - c. Strengths A variety of local businesses to serve the community. This continues to be the strength of the community in year 2.
 - d. Weakness Lack of collaboration amongst organization. The organizations began to collaborate as the year was coming to an end. Resigning of MOU's are the evidence of the shift in the organization's collaborations.

Year 3

According to the Community Needs Assessment Resource Guide National Gap "a community needs assessment is a process conducted by all Community Action Agencies every three years to determine the underlying causes and conditions of poverty within the community they serve and identify the available resources to address the unmet needs of the community's most vulnerable residents" (https://communityactionpartnership.com/publication_toolkit/community-needs-assessment-resource-guide/).

The Far Southside ROSC Council is entering into its third year and will be providing pertinent information of the gaps identified in year two.

The identified gaps from year 2 (two) had some successful outcomes with the FSSRI becoming a Drug Overdose Prevention Program to provide Narcan trainings and medication for the Southside of Chicago. Also, they are intricate players in the Far Southside Task Force which was developed in the 2nd year of ROSC. The Far Southside ROSC continued to collaborate with stakeholders provided employment to many individuals in recovery and returning citizens, whereas ensuring that housing for PLE's was maintained throughout out COVID. Also, food desserts were closed in Auburn Gresham and Ashburn, along with a recovery home being placed in Morgan Park.

In addition, the hush, hush cycle or code of silence was broken because of the need of resources during COVID and FSSRI was one of the few resource brokers that still had their doors open. This increased collaborations with the recovery homes, treatment centers, detox, hospitals and companies within the community. Therefore, solidifying the need of the ROSC council on the Far Southside of Chicago. Year 3 has taken a turn and the focus of the community has been on the inflation as a result of COVID-19.

Update: Some of Year 1 identified gaps were addressed doing Year 2 although COVID 19 surfaced. FSSRI used this time as an opportunity to be more visible within the community. Whereas, connecting with recovery-based programs (treatment, detox, hospitals) with employees who would service those seeking recovery and in recovery. Also, we worked with the homeless

shelters to ensure housing was in place for those seeking shelter. FSSRI was very visible by providing resources so the community in paying their utilities, housing, medications, and other issues of concern. Because FSSRI took the initiative to enhance community needs they have become open to supporting the ROSC Council as evidence of the linkages, PLE, family and friends' involvement and those seeking recovery and in recovery participation in ROSC. However, year 2 brought on barriers that surpassed the norm, overdoses We are continuing to work in this area with providing education and ensuring Narcan is provided to each individual and placed in everyone's homes. Therefore, it appears that a continuation of research is needed to continue addressing and closing the aforementioned gaps and newly verbally reported issues in year 3 (three). It appears the overdose issues will continue to be a work in progress, but year 2 also brought about new barriers to address in year 3 (which is price inflation). The average family seems to be struggling as price grudging with food, housing, clothing, gas, and medication. This has become the topic of discussion from the community. Therefore, FSSRI is surveying to find out how these issues effects the communities on the Far Southside of Chicago, which will allow the FSSRI to seek solutions and resources to assist the Far Southside of Chicago.

Although, the FSSRI has been diligent with meeting the community needs with ensuring basic needs are addressed such as assisting with opening recovery homes, grocery stores and getting politicians and the alderman more involved there is still a need to do more. The survey that was distributed throughout the communities, at town hall meetings, caps meetings, church's, recovery homes, treatment centers, and hospitals to get a scope of what the issues of the Community which is causing barriers to survival.

The survey was a 13-question survey to not overwhelm those taking the surveys. The only demographic questions asked which were optional was name and zip code. Reason being the questions asked were designed to be universal because in developing the survey (council and PLE's) it appeared everyone was relatable to the issues discussed in the survey. In addition, the FSSRI overall goal is to address barriers within a year and that is why creating a lengthy survey would not meet the scope of the deliverables.

Exhibit A

Questions:

- 1. Have the inflation in prices caused financial difficulties? If yes, how:
 - 80% of those who answered this question said that inflation has caused financial difficulties in their lives with the main reason being prices are going up but wages are not.
- 2. Have you lost anything because of the inflation in prices (car, housing etc.)? If yes explain:
 - 75% of those who answered this question said they have downsized opposed to losing any anyof their basic needs.
- 3. Have you excessed any resources to assist during the price inflations?
 - 98% of those who answered this question said they have used resources during the price inflation (CEDA, DHS and PPE loans).
- 4. What resources ae available in your community (treatment programs, housing, food pantry's etc.)?
 - 50% of those who answered this question said they have these resources in their immediate communities. Others informed they must go out of their communities for these services.
- 5. Have addiction, overdoses and mental health increased in your communities in the past year?
 - 97% of those who answered this question said overdoses and mental health has increased in their communities their evidence was the increase of gun violence and crime.
- 6. Do you have Narcan, and have you shared your knowledge of Narcan with friends, family, and your community? If no why, and if yes what was their response.
 - 75% of those who answered this question said they have Narcan. 60% informed they have shared this information with others, who some are open, and others are where not.
- 7. Are you open to recovery-based programs being put in your community (treatment centers, safe houses, recovery home)? I yes why, if not why:

- 50% of those who answered this question said they are not open to having recovery-based programs in their community (stigmas were identified).
- 8. Have law enforcement, Alderman and legislative been sensitive to your community needs.
 - 50% of those who answered this question said the law enforcement, alderman and legislative has been sensitive to their community needs. The other 50% said that law enforcement does not come into their area, and they did not know their alderman or other legislators.
- 9. Have crime increased in your communities in the past year?
 - 100% said crime has increased in their area, emphasizing nowhere is safe.
- 10. Have homelessness increased in your communities?
 - 25% of those who answered this question said homelessness has not increased or not visible. The other 75% said homelessness has increased with the youths in their communities.
- 11. Have collaboration increased in your communities?
 - 50% of those who answered this question said they saw collaboration increase during COVID, but it seems things is going back to how they were. The other 50% were undecided.
- 12. Do you use community platforms to get your voice heard about your community concerns (block club meetings, town halls etc.?
 - 30% of those who answered this question said they have attended community platforms. The 70% answered no.
- 13. What are some barriers in your community that you want to be addressed?
 - 98% of those who answered this question mostly identified finances and crime as the biggest barriers that need to be addressed.

The survey was designed to obtain information for legislators and decision-makers with the goal of getting some reprieve for the people. The identified barriers in the community if addressed will bring a substantial amount of assistance to those who are in addiction, recovery, family and the overall community. Whereas, possibly reducing stigmas about substance use, harm reduction and mental illness

The outcome of this step is a Community Action Plan which will contain Specific, Measurable, Attainable, Realistic and Timely (SMART) objectives and the activities to support those objectives.