Purpose

This research focuses on assessing community resources and outlines the evaluation process in relation to local needs. Evaluating local resources is a crucial first step in developing partnerships and is vital for the effective implementation of health promotion and disease prevention initiatives. Our survey was conducted from December 30, 2024-February 14, 2025.

Overall Demographics

Logan County

- **Total Population:** 27,987
- **Median Household Income:** $64,188
- **Age Range-** *2023 Census*
  - Under 18: 5,447
  - 18-24: 2,829
  - 25-34: 4,863
  - 35-44: 3,601
  - 45-54: 3,536
  - 55-64: 3,615
  - 65 +: 5,317
- **Language Spoken at Home**
  - English Only: 96.5%
  - Spanish: 2.4%
  - Other Indo-European Language: 0.6%
  - Asian and Pacific Islander Languages: 0.3%
  - Other Languages: 0.1%
- **Race and Ethnicity**
  - American Indian and Alaska Native: 50
  - Asian: 181
  - Black or African American: 1,520
  - Hispanic or Latino: 818
  - Native Hawaiian and Other Pacific Islander: 1
  - Not Hispanic or Latino: 24,452
  - Some Other Race: 437
  - Two or More Races:1,129
  - White: 24,669

Mason County

- **Total Population:** 13,086
- **Median Household Income**: $62,127
- **Age Range-** *2023 Census*
  - Under 18: 2,649
  - 18-24: 885

- o 25-34: 1,385
- o 35-44: 1,438
- o 45-54: 1,605
- o 55-64: 1,953
- o 65 +: 2,963
- **Language Spoken at Home**
  - o English Only: 98.1%
  - o Spanish: 1.4%
  - o Other Indo-European Language: 0.4%
  - o Asian and Pacific Islander Languages: 0.1%
  - o Other Languages: 0.0%
- **Race and Ethnicity**
  - o American Indian and Alaska Native: 24
  - o Asian: 28
  - o Black or African American: 51
  - o Hispanic or Latino: 184
  - o Native Hawaiian and Other Pacific Islander: 1
  - o Not Hispanic or Latino: 12,339
  - o Some Other Race: 43
  - o Two or More Races:516
  - o White: 12,423

Logan and Mason County

- **Total Population:** 41,073
- **Median Household Income:** $63,157.50
- **Age Range-** *2023 Census*
  - o Under 18: 8,096
  - o 18-24: 3,714
  - o 25-34: 6,248
  - o 35-44: 5,039
  - o 45-54: 5,141
  - o 55-64: 5,568
  - o 65 +: 8,280
- **Language Spoken at Home**
  - o English Only: 97.3%
  - o Spanish: 1.9%
  - o Other Indo-European Language: 0.5%
  - o Asian and Pacific Islander Languages: 0.2%
  - o Other Languages: 0.05%
- **Race and Ethnicity**
  - o American Indian and Alaska Native: 74
  - o Asian: 209
  - o Black or African American: 1,571
  - o Hispanic or Latino: 1,002

- o Native Hawaiian and Other Pacific Islander: 2
- o Not Hispanic or Latino: 36,791
- o Some Other Race: 480
- o Two or More Races:1,645
- o White: 37,092

Survey Results

- **Total Surveys Collected:** 343
  - o 0.835% of the population
    - ▪ 249 Surveys (73%) from Logan County
    - ▪ 94 Surveys (27%) from Mason County
- **Income Level**
  - o 19% - Prefer Not To Say
  - o 7% - Under $24,999
  - o 28% - $25,000-$49,999
  - o 27% - $50,000-$99,999
  - o 18% - $100,000-and over
- **Age Range**
  - o Under 18: 0
  - o 18-24: 13
  - o 25-34: 69
  - o 35-44: 78
  - o 45-54: 68
  - o 55-64: 42
  - o 65 +: 40
  - o Skipped: 33
- **Language Spoken at Home**
  - o English: 99%
  - o Spanish: 0.5%
  - o Mandarin: 0.5%
  - o French: 0%
  - o Arabic: 0%
  - o Other Languages: 0%
- **Ethnicity**
  - o Hispanic or Latino: 14
  - o Not Hispanic or Latino: 294
  - o Skipped: 35
- **Race**
  - o African American/Black: 9
  - o Asian: 2
  - o Caucasian/White: 286
  - o Native Hawaiian: 4
  - o Pacific Islander: 0

o Two or More Races: 8
o Skipped: 34

Identified Gaps in Logan and Mason County

1. **Stigma**
    a. Stigma around recovery and denial that there is a community problem
2. **Transportation**
    a. Lack of public transportation options or support to help people in recovery get to treatment
3. **Recovery Supports**
    a. Lack of access to variety of local support group meetings. Lack of readiness of local PLE's to provide recovery services. Lack of local recovery housing. Lack of access to local support group meetings.
4. **Health Promotion**
    a. Lack of MAR services and wraparound services. Difficulties finding mental health and substance use treatment services.
5. **Harm Reduction**
    a. Limited awareness and confidence in accessing harm reduction resources

Logan/Mason ROSC Needs/Community Resource Assessment

Gap Category	Identified Gap	Desired State	Action Plan
Stigma	Stigma around recovery and denial that there is a community problem	Informed community that welcomes the possibility of recovery and necessary services	Continue focus on person-centered language, engaging in community events, and disseminate information through multiple outlets (social media, flyers, etc..)
Transportation	Lack of public transportation options or support to help people in recovery get to treatment	Increase of public transportation options or support to help people in recovery get to treatment	Advocate for improved transportation options with community governments.
Recovery Supports	Lack of access to variety of local support group meetings.	Increase multiple pathways to recovery groups available in Logan and Mason Counties	Raise awareness of existing meetings and support organizations, work to keep information updated, and purchase materials that are needed to start up groups
Recovery Supports	Lack of readiness of local PLE's to provide recovery services.	Increase CRSS, CPRS, and vocational opportunities for skill-building	Promote CRSS and CPRS to increase awareness, workforce, and peer recovery services.
Recovery Supports	Lack of local recovery housing.	Women and children recovery housing in Logan County and increase of recovery housing in Mason County.	Stay connected with Oxford House, evaluate readiness and investigate existing barriers for community safe housing options, and advocate the need to add recovery housing with city officials.
Recovery Supports	Lack of access to local support group meetings.	Access to local multiple pathways to recovery	Continue to support and provide any materials that would be needed to start up any group (i.e. books, flyers, etc..). Host monthly ROSC council meetings and post them on YouTube, and host guest speakers to increase awareness.
Health Promotion	Lack of MAR services and wraparound services.	Options and services to increase	Advocate and educate for the need of MAR services and wraparound services.
Health Promotion	Difficulties finding mental health and substance use treatment services.	A well-promoted network of mental health and substance use treatment services that highlights existing resources and attracts new support,	To establish a well-promoted network of mental health and substance use treatment services, we can implement community awareness campaigns, foster partnerships with local organizations, create resource

		ensuring easy access for individuals in need.	directories, conduct educational workshops, establish feedback mechanisms, advocate for increased funding, and develop peer support programs.
Harm Reduction	Limited awareness and confidence in accessing harm reduction resources	Increased awareness and confidence among individuals in the community to access and utilize harm reduction resources.	Provide education and training, launch awareness campaigns, implement peer outreach programs, collaborate with local organizations, create accessible resource guides, host community feedback sessions, and offer incentives for engagement.

A substantial **88%** of respondents identified stigma as a widespread issue in the community, influencing perceptions of individuals with substance use disorders. This stigma is reflected in the **62%** of respondents who indicated they would consider relocating if they learned that someone in their neighborhood was actively using substances. Despite these concerns, there is a notable willingness to support recovery efforts; **57%** of respondents expressed strong agreement or agreement with the idea of living in a neighborhood with recovery housing or individuals in recovery.

Furthermore, **85%** of participants indicated they would be willing to spend an evening socializing with someone in recovery, while **48%** expressed a willingness to socialize with a person who is currently using substances. However, **23%** of respondents stated they would not be willing to do so. Additionally, **83%** believe that substance use disorder is not showing a person's character. A significant **66%** of respondents stated that a moral failing is not the cause of someone's substance use disorder if they are currently using substances, demonstrating an understanding of the complexities surrounding addiction.

Treatment effectiveness is a common belief, with **76%** of respondents feeling that treatment can lead to improvement for those with substance use disorders. However, there remains a notable uncertainty regarding Medication Assisted Recovery (MAR), as **45%** of respondents neither agreed nor disagreed on its effectiveness, and **41%** felt similarly about the notion that MAR substitutes one drug addiction for another.

Access to healthcare providers offering MAR is a significant concern, with **59%** of respondents stating it is difficult to find such services in their community. In response to this gap, **60%** of participants strongly agreed or agreed that more healthcare providers should offer medications for substance use disorders to improve accessibility.

Respect for individuals facing these challenges is evident, as **72%** of respondents strongly agreed or agreed that people who use drugs deserve respect, while an overwhelming **91%** expressed the same feeling for individuals with mental illness. Harm reduction services also play a role, with **43%** of respondents believing that services like Narcan and syringe service programs

reduce the risks of drug use, while **28%** do not share this belief. Additionally, **31%** of respondents strongly agreed or agreed that it is difficult to find harm reduction services in their community, with **37%** remaining neutral and **32%** disagreeing or strongly disagreeing.

However, **53%** reported difficulties in finding mental health and substance use treatment services, with **23%** remaining neutral on this issue. A strong call for increased funding is present, with **80%** of respondents advocating for more government investment in treatment options for mental health and substance use disorders. Significant barriers to fair access remain, as **52%** of respondents strongly disagreed or disagreed that everyone in the community can receive help for mental health issues, and **51%** felt similarly regarding substance use treatment.

The Logan/Mason Recovery-Oriented System of Care (ROSC) can play a pivotal role in addressing these challenges by providing a comprehensive framework that supports individuals in recovery and promotes access to essential services. ROSC can focus on reducing stigma through community education and outreach programs, creating more supportive environments for individuals seeking help.

Overall, the data reveals a complicated situation of attitudes toward substance use and recovery in the community, characterized by significant stigma, a desire for respect and dignity for those affected, and a clear demand for improved access to treatment services. Addressing these challenges is essential for creating a more supportive and fair environment for individuals impacted by substance use disorders and mental health issues.

Swot Analysis

Strengths

- Strong awareness of the need for expanded recovery services
- Committed ROSC Council
- Passion and willingness for the work
- Compassion and understanding, desire to create an inclusive environment
- Strong foundation in the community: Drug Court etc.
- Collaborative spirit and desire to work together
- Inclusive of PLE – a group of committed participating PLE – creating a space for folks to participate
- Some exiting movement towards expanding services and supports in the area
- Recovery in Action subcommittee
- Funding available for Peer Recovery Specialist trainings
- Oxford House has a house with a capacity of 7 men
  - Also looking to potentially expand men's housing and include housing for women with children
- SIU MAR Program
- Limited access to Harm Reduction services
- Multiple pathways to recovery (SMART Recovery, CoDa, Open Arms Celebrate Recovery, AA, NA, and Recovery Support Group)

Weaknesses

- No existing inpatient treatment centers
- Lack of access to local support group meetings in Mason County
- Lack of MAR services and wraparound services
- Resistance to facing the issue within the community/lack of understanding or education of addiction as a disease, rather than a moral failure
- Despite desire to collaborate in Mason County, many providers and organizations remain silos of service
- Limited financial resources – two small rural counties
- We need additional representation from PLE
- Deflection Program (BRIDGE) is the beginning stages of planning. Mason County isn't as represented in the planning stages. Working to get more by-in from Mason County.
- Lack of public transportation options or support to help people in recovery get to treatment

Opportunities

- Other organizations willing to partner/assist with action in Logan & Mason counties

- Technical assistance and free trainings from Faces & Voices of Recovery in Illinois, developing RCOs
- Recovery Corps contracted to provide services to the state – peer recovery specialists
- Heartland Peer Specialist apprenticeship – possible local option
- Government officials are largely aware and supportive of the need for increased recovery actions
- Lack of public transportation options or support to help people in recovery get to treatment
- 5th Street Building is being built to be a safe spaces to gather and feel supported and having services available
- Expanding sober living options in our area
    - Looking to get housing for women in Logan County
    - Looking specifically for sober living housing in Mason County
- Lack of resources for PLE to access benefits
- Deflection Program (BRIDGE) is the beginning stages of planning. Active participation in Logan County. BRIDGE supports Logan, Mason, and Menard Counties.
- Using the United States Probation Office Felon Friendly Employers to create a more community focused list.

Threats
- No end in sight for new cases/people who need recovery services
- Stigma around recovery and denial that there is a community problem
- Prior failure to deliver on objectives or see tangible results from recovery efforts
- Poor access to Internet/cell phone services – barrier to using Telehealth services
- Healthcare gaps and lack of mental health professionals
- COVID has presented new challenges – gaps in in-person services
    - Some agencies being short staffed and have waiting lists.
- Inadequate youth services, prevention & treatment options
- Lack of awareness of resources on diversifying funding opportunities
- Limited financial resources – two small rural counties

Community Readiness

Based on the information shared, the community seems to be at a mixed and changing point when it comes to attitudes about substance use and recovery. Here are some important points that show this readiness:

1. **Awareness of Stigma**:
   - A large number of people (88%) see stigma as a common problem. This awareness is important because it shows that the community is ready to tackle negative views about substance use disorders.

2. **Willingness to Support Recovery**:
   - Even with stigma, many people (57%) are okay with living near recovery housing, and 85% would be willing to hang out with someone in recovery. This shows a readiness to support recovery efforts.

3. **Respect for Individuals**:
   - Most people (72% for drug users and 91% for those with mental health issues) respect individuals facing these challenges, which is a good sign for creating a supportive community.

4. **Desire for Better Access to Treatment**:
   - Many people (80%) want the government to invest more in treatment options, showing a strong wish for better access to resources.

5. **Mixed Views on Treatment Options**:
   - While many believe treatment can help (76%), there is some uncertainty about Medication-Assisted Recovery (MAR), with 45% unsure about its effectiveness. This suggests that more information is needed.

6. **Recognition of Barriers**:
   - Many people (53%) have trouble finding mental health and substance use treatment services, which shows they understand the challenges that need to be fixed.

7. **Support for Harm Reduction Services**:
   - While 43% believe harm reduction services can help, 28% do not, indicating that more education is needed in this area.

In short, the community is open to supporting recovery efforts and understands the issues, but there is still a need for more education and outreach to create a better environment for individuals dealing with substance use and mental health challenges.

Priorities for Expansions/Technical Assistance for Expansion

In light of the findings from the SWOT analysis, it is crucial to identify key priorities for the expansion of recovery services and to seek technical assistance that will enhance the support provided to individuals in need. These priorities focus on addressing the existing gaps in treatment options, increasing community awareness, and fostering collaboration among service providers. By strategically targeting these areas, the community can create a more robust and effective recovery network that meets the diverse needs of its residents.

Now, here are the identified priorities for expansion and technical assistance:

1. **Establish Inpatient Treatment Centers:**
   - Address the lack of available inpatient treatment options by advocating for and developing new facilities.
2. **Enhance Support Group Accessibility:**
   - Finding the champions in both counties to help increase the number and availability of local support group meetings.
3. **Develop MAR and Wraparound Services:**
   - Focus on expanding Medication-Assisted Recovery (MAR) services and comprehensive wraparound services to support individuals in recovery by continuing to be apart of Hope on 5th
4. **Increase Community Education and Awareness:**
   - Continuing to use our Stigma Reduction Campaign to shift perceptions of addiction from a moral failure to a disease and reducing stigma and resistance within the community.
5. **Foster Collaboration Among Providers:**
   - Encourage partnerships and collaborative efforts among service providers to break down silos and create a more integrated support system.
6. **Improve Transportation Options:**
   - Address the lack of public transportation by developing solutions to help individuals in recovery access treatment facilities and support services.
7. **Expand Sober Living Options:**
   - Prioritize the development of more sober living environments, particularly for women and families, to provide safe and supportive housing.
8. **Utilize Technical Assistance for RCO Development:**
   - Take advantage of technical assistance offered by organizations such as Faces & Voices of Recovery to build strong Recovery Community Organizations (RCOs).