



*St. Joseph's Hospital, Inc.
and Candler Hospital, Inc.*

**2019 Joint Community Health Needs
Assessment**



St. Joseph's/Candler
2019 Community Health Needs Assessment

TABLE OF CONTENTS

Acknowledgements	5
Executive Summary	7
Conclusions	8
Introduction	9
History of Accessing Health and Social Needs at SJ/C	10
Affordable Care Act and Compliance with the Requirements of IRS Bulletin 2015-5	11
Collaborating Partner – Coastal GA Indicators Coalition	12
2016 CHNA Report – Request for Comments and Feedback	12
Evaluation of Impact	13
Purpose of the Community Health Needs Assessment, Scope and Priority Populations	18
Methodology	19
Chatham County Demographics	21
Total Population	
Average Household Size	
Families	
Percentage of Chatham County Population by Race	
Percentage of Chatham County Population by Age	
Income and Housing	22
Per Capita Income	
Median Household Income	
Renters Spending 30% or More of Household Income on Rent	
Homeownership	
Education	23
People 25+ with a High School Degree or Higher	
People 25+ with a Bachelor's Degree or Higher	
Percent of Students Reading at or Above Grade Level	
Graduation Rates by Race by School Year	
Graduation Rates by Gender by School Year	
-Continued on Next Page-	

St. Joseph's/Candler
2019 Community Health Needs Assessment

Poverty	25
People Living Below Poverty Level	
People Living 200% Above Poverty Level	
Children Living Below Poverty Level	
Families Living Below Poverty Level	
People 65+ Living Below Poverty Level	
	27
Insurance	
Percentage of Insured Adults Age 18-64	
Percentage of Insured Children Under Age 19	
Percentage of Population with Private Health Coverage by Age Group	
Percentage of Population with Public Health Coverage by Age Group	
Routine Care	28
Percentage of Adults who Received Routine Care	
People 65+ Who Received Recommended Preventive Services	
Pregnancy and Infants	29
Percentage of Babies with Low Birth Weight by Maternal Race/Ethnicity	
Percentage of Preterm Births by Maternal Race/Ethnicity	
Birth Rate in Females Aged 15-19 per 1,000 by Race/Ethnicity	
Infant Mortality Rate per 1,000 Live Births by Race/Ethnicity	
Physical Activity and Nutrition	30
Percentage of Adults who are Sedentary	
Percentage of Adults 20+ who are Obese	
Percentage of Children with Food Insecurity	
Percentage of the Population with Food Insecurity	
Life Expectancy and Death	31
Female Life Expectancy	
Male Life Expectancy	
Age Adjusted Deaths per 100,000	
Chronic Disease	32
Percentage of Adults with Chronic Conditions	
Cancer	33
Percentage of Population Age 50-70 Receiving Colon Cancer Screening	
Percentage of Women Age 50-74 with a Mammogram in Past Two Years	
Cancer Incidence Rates Per 100,000	
Mental Health	34
Percentage of Adults with Frequent Mental Distress	
Percentage of the Medicare Population with Depression	
Percentage of Adults with Inadequate Social Support	

St. Joseph's/Candler
2019 Community Health Needs Assessment

Prioritization of Needs	35
2019 Conclusions - <i>Repeated</i>	37
Request for Comments	37
Appendix 1: St. Joseph's/Candler's FY 2018 Community Benefits Report	38
Appendix 2: Chatham County Speaks Again! 2018 Survey of County Residents	40
Appendix 3: Community Blue Print Needs	167
Appendix 4: Healthy People 2020 – Chatham County Report	169
Appendix 5: SJ/C Chatham County Community Survey and Results	171
Appendix 6: SJ/C Emergency Department Medical Home Survey Results	219
Appendix 7: Community Needs Decision Tree	222
Appendix 8: Chatham County Health and Social Service Partner Providers	224
Appendix 9: Chatham County Safety Net Planning Council Brochure of Health Services	228

St. Joseph's/Candler
2019 Community Health Needs Assessment
ACKNOWLEDGEMENTS

St. Joseph's/Candler would like to thank the many people, organizations, agencies and partners who worked collaboratively to make this report possible. We would like to especially thank the Commissioners of Chatham County for selecting the Coastal Georgia Indicators Coalition (CGIC) to conduct a comprehensive community needs assessment of Chatham County which is the foundation of this report. CGIC was also the primary partner and co-author of this report. Additionally, we would like to thank Healthy Savannah's Racial and Ethnic Approaches to Community Health (REACH) team for developing, analyzing and reporting information gathered through the Public Forums and paper/electronic community surveys. Finally, we would like to thank the CGIC and Chatham County Safety Net Planning Council (CCSNPC) for helping the hospitals prioritize the many needs in Chatham County and to thank all the other partners for providing their annual reports, community assessments and generally for lending their support and guidance throughout the assessment process.

- Sr. Patricia Baber, RSM, Director St. Joseph's/Candler's (SJ/C) St. Mary's Community Center, Health Center and Good Samaritan Clinic
SJ/C Health Outreach and CCSNPC Health Care Collaborative Executive Committee
- Sr. Margaret Beatty, RSM, V.P. SJ/C Mission Services and Community Benefits
Health System/Community Health Needs Assessment (CHNA) Partner
- Linda Cramer, Assistant County Manager, Chatham County Government
CGIC Community Coalition Executive Leadership Team
- Lawton Davis, M.D., District Health Director, Coastal Health District
CCSNPC Health Care Collaborative Executive Committee
- Virginia Dick, Ph.D., Next Step Consulting, Owner & Consultant
REACH Team
- Brandon Gaffney, CEO, J.C. Lewis Primary Care Centers
Federally Qualified Health Center and CCSNPC Health Care Collaborative Executive Committee
- Albert Grandy, CEO, Curtis V. Cooper Primary Care Centers
Federally Qualified Health Center and CCSNPC Health Care Collaborative Executive Leadership Committee
- Mark Johnson, M.D., Chief Executive Officer, Gateway Behavioral Health Services
Mental & Substance Abuse Health Provider and CCSNPC Health Care Collaborative Executive Committee, Chair
- Otis Johnson, Ph.D., Community Advocate, Former Mayor of Savannah, GA
CGIC Community Collaborative Executive Leadership Team
- Tara Jones, Intern, CHNA Support, Liberty University
CGIC Community Collaborative and REACH Team
- Michael Kemp, V. P. Synovus Trust Company, NA
CGIC Community Collaborative Executive Leadership Team
- Paula Kreissler, Director of Healthy Living and Community Support, REACH Program Manager
YMCA and Healthy Savannah
- Rachael McConathy, Intern, CHNA Support, GA Southern University
CGIC Community Collaborative and REACH Team
- Lizann Roberts, Executive Director, Coastal GA Indicators Coalition
CHNA Co-Author, REACH Team

St. Joseph's/Candler
2019 Community Health Needs Assessment

- Adam Walker, Director of Operations, SJ/C Mission Services
Health System/Co-Author, CHNA, CGIC Community Collaborative Executive Leadership Team and CCNSNPC Health Care Collaborative Executive Committee
- Jennifer Wright, Director of Public Policy and Community Affairs, Memorial Health
Health System, CCSNPC Health Care Collaborative, Executive Committee and CGIC Community Collaborative Executive Leadership Team
- Taffanye Young, Bureau Chief, City of Savannah's Community and Economic Development Bureau
GCIC Community Collaborative Executive Leadership Team

St. Joseph's/Candler
2019 Community Health Needs Assessment
EXECUTIVE SUMMARY

This overview summarizes the key findings from the analysis of all data as well as community perception survey results. A full description of the qualitative and quantitative data follows in the full report.

Community Profile At-A-Glance

Chatham County is located on the southeast coast of the United States in Georgia. The total estimated population in 2018 is 294,365 people. There are an estimated 115,565 households with 72,833 families in Chatham County.

Caucasians make up the majority of the population at 51% followed by Black/African Americans at 40%. The largest percentage of the population falls into the 25-34 year-old age group.

The median household income is \$52,215. Approximately 47% of residents are homeowners. Approximately 50% of those who rent are burdened with more than 30% of their income going to rent. Approximately 65% of the population age 25+ has some college experience or some type of degree. Approximately 12% of families live below the poverty level in the county.

Life and Death

Female life expectancy is 79.6 years while male life expectancy is 74.3 years. The leading causes of death include cancer, heart disease, and stroke.

Health Issues

High blood pressure, arthritis and diabetes are among the top chronic diseases in the county. More than 50% of the population received routine dental care in the past year and more than 75% reported having routine medical checkup. Breast and lung/bronchial cancers lead the number of cancer cases in the county. Adults 18-64 have a 81% insured rate. Children 19 and under have a 95% insured rate.

Social Determinants

The term "social determinants of health" is used to describe the conditions in which a person is born, grows, lives, and works that affect their overall health. These conditions include education, workforce development, work environment, employment, and housing as well as other living and working conditions. Survey participants in the Chatham County Speaks Again! Survey identified violent crime, poverty rates, mental health, severe housing problems, and access to food and exercise opportunities as just a few issues which may affect their overall health.

St. Joseph's/Candler
2019 Community Health Needs Assessment
CONCLUSIONS

After reviewing all the data and feedback, the following indicators of health and social determinants of health are the most pressing needs in Chatham County.

Community Health Needs

- Access to affordable health insurance
- Access to mental health services
- Access to food and exercise opportunities
- Access to affordable and convenient health care
- Chronic disease and routine care

Social Determinants of Health

- Unemployment
- Severe housing problems
- Poverty
- Income
- Reading on grade level
- Violent crime
- Public transportation
- Recidivism

Increased efforts on addressing these needs should be focused on the at-risk and vulnerable populations of Chatham County. It is necessary to provide support to our local community in the form of quality services which are easily accessible to the masses. It is also necessary to provide ways to foster security in individuals and opportunities to improve quality of life. A strong support and resource system is invaluable for the health of our community.

St. Joseph's/Candler
2019 Community Health Needs Assessment

INTRODUCTION

St. Joseph's Hospital, Inc. and Candler Hospital, Inc., known as St. Joseph's/Candler Health System (SJ/C) is located in historic Savannah, GA and is the regions only faith based Health System. It is the areas only private not for profit Health System. SJ/C offers healthcare services across the entire continuum of care, including local and regional primary care, specialized inpatient and outpatient services at two anchor hospitals, home healthcare services, as well as a wide variety of community outreach and education efforts throughout the region.

SJ/C provides the most advanced, comprehensive treatments and state-of-the-art medical technologies available almost anywhere. Its faith based, holistic approach to healing encourages individuals to become more knowledgeable and responsible about their personal health.

Both St. Joseph's Hospital and Candler Hospital are individually accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), while the health system is one of a select few in the country to have achieved network accreditation status. Additionally, St. Joseph's/Candler is the only health provider in the region to have achieved MAGNET status for nursing excellence, and is noted as one of the country's Top 100 Integrated Healthcare Systems by *Modern Healthcare Magazine*. In January 2013, The American Hospital Association awarded St. Joseph's/Candler the prestigious Foster G. McGaw prize for its innovative programs to improve the health and well being of everyone in their community.

Mission

Rooted in God's love, we treat illness and promote wellness for all people.

Vision

Our vision is to set the standards of excellence in the delivery of health care throughout the regions we serve.

Values

The following values are represented by the six brush strokes preceding the name in the corporate logo. They serve as a reminder to the community that the SJ/C values precede-literally and figuratively-everything we do.

- **Compassion** – Showing empathy and concern for everyone and responding with kindness and sensitivity
- **Quality** – Optimizing talents, skills and abilities to achieve excellence in meeting and exceeding our patients' expectations
- **Integrity** – Adhering without compromise to high moral principles of honesty, loyalty, sincerity and fairness
- **Courtesy** – Demonstrating polite, cooperative and respectful behavior; showing consideration and care for each person
- **Accountability** – Using material goods wisely; being conscious of the environment; being accountable for prudent use of our talents and financial resources
- **Team Work** – Working together to accomplish tasks and goals; recognizing the interdependence of one another and each person's unique gifts

St. Joseph's/Candler
2019 Community Health Needs Assessment
HISTORY

St. Joseph's/Candler is rich in history and heritage. Its anchor institutions, St. Joseph's Hospital and Candler Hospital, are two of the oldest continuously operating hospitals in the nation. As such, both have been a part of the Savannah landscape and culture for a combined history of more than 350 years.

In addition, the Georgia Infirmary, Central of Georgia Railroad Hospital and Mary Telfair Women's Hospital- historic in their own right-bring that service record to nearly 650 cumulative years.

In 1997, the two legendary hospitals and their various entities affiliated, creating the largest health system in Southeast Georgia and the South Carolina Low Country.

St. Joseph's Hospital began in 1875 when the Sisters of Mercy took over the operations of the Forest City Marine Hospital in what is now the historic district. For over 135 years, Savannahians have trusted the care, compassion and medical expertise that have become synonymous with the St. Joseph's name. Now, located on Savannah's south side, St. Joseph's Hospital is home to some of the most breakthrough medical technology and innovations available. Specialty services at St. Joseph's include The Heart Hospital, The Institute for Advanced Bone and Joint Surgery and the Institute of Neurosciences, each offering unsurpassed space-age technology and expert clinical care.

Candler Hospital is Georgia's first hospital (first chartered in 1804) and the second oldest continuously operating hospital in the United States. Located in Savannah's Midtown and affiliated with the Methodist Church, Candler has been long recognized as offering the finest in primary care, outpatient services, and women's and children's services. Candler is home to the Mary Telfair Women's Hospital and the Nancy N. and J.C. Lewis Cancer & Research Pavilion, both renowned medical facilities offering some of the most advanced patient services in the country.

HISTORY OF ACCESSING HEALTH AND SOCIAL NEEDS AT SJ/C

St. Joseph's/Candler has a rich history of service to the community and building activities that address the health and social service needs for all its members. For example, twenty (20) years ago two Sisters of Mercy literally walked the streets of Savannah's Historic Cuyler Brownsville Neighborhood and asked the residents of that community what services were most needed to improve their health and overall standard of living. The responses were recorded, prioritized and presented to the Leadership Team and St. Joseph's/Candler's Board of Trustees. That exercise resulted in the creation of St. Mary's Community Center, strategically located directly in the Cuyler Brownsville Neighborhood. St. Mary's began providing for the health and social needs identified by the residents to improve that community's overall wellbeing. Twenty (20) years later St. Mary's continues to be an anchor of the community responding to the residents' ever changing needs.

The example above is just one of the informal ways St. Joseph's/Candler has evaluated the community's needs. Other forms of evaluation have been in part through collaborative efforts with organizations, business, churches, community leaders and social service agencies working to address other identified needs in various parts of the community and the region. In fact, St. Joseph's/Candler is one of the founding members of the Chatham County Safety Net Planning Council which include many groups which work to improve the health of the community.

Highlights of St. Joseph's/Candler's extensive community benefit and community assistance efforts can be found in **appendix 1** of this report.

AFFORDABLE CARE ACT

The Patient Protection and Affordable Care Act was signed in to law by President Barack Obama on March 23, 2010¹. The first outline of the requirements for not-for-profit hospitals was published in Notice 2010-39 on June 14, 2010². Subsequent notices followed. In the Internal Revenue Bulletin: 2015-5³ the IRS provided the final approved regulations that provide guidance regarding the requirements for charitable hospital organizations added by the Patient Protection and Affordable Care Act of 2010.

A key provision of the Act is that all not-for-profit hospitals must complete a Community Health Needs Assessment (CHNA) every three years. Once completed, an implementation plan must be submitted describing how the hospital(s) are addressing the identified health needs in their community. If the hospital(s) are not addressing those needs, they must explain why they are not. The IRS was charged with enforcing the new requirement.

COMPLIANCE WITH THE REQUIREMENTS OF IRS BULLETIN 2015-5

The IRS released the final requirements for hospital's CHNA in IRS Bulletin 2015-5 effective December 29, 2014. St. Joseph's Hospital, Inc. and Candler Hospital Inc. have made every effort to comply with the guidance provided by the IRS in that bulletin. An outline of the final requirements for each CHNA written report was adopted from the Catholic Health Association's for use in the completion of this CHNA. A summary of written CHNA requirements (January 2015)⁴ is listed below:

- Description of the community served by the hospital and a description of how the community was determined.
- Description of the process and methods used to conduct the assessment
 - The data and other information used in the assessment
 - Methods of collecting and analyzing this data and information
 - Any parties with whom the hospital collaborated or contracted for assistance
 - In the case of data obtained from external source material, the CHNA report may cite the source material rather than describe the method of collecting the data.
- Description of how the hospital solicited and took into account input from persons who represent the broad interests of the community.
 - The CHNA report should summarize the input of these persons and how and over what time period such input was provided (for example, meetings, focus groups, interviews, surveys or written comments and between what approximate dates)
 - Provide the names of organizations providing input and summarize the nature and extent of the organization's input.
 - The medically underserved, low-income, or minority populations being represented by organizations or individuals providing input.
 - The organization does not need to name persons participating in forums or other groups.

¹ www.whitehouse.gov/affordablecareact

² http://www.irs.gov/irb/2011-30_IRB/ar08.html

³ https://www.irs.gov/irb/2015-5_IRB/ar08.html#d0e162

⁴ <https://www.chausa.org/docs/default-source/community-benefit/summary-of-chna-requirements.pdf?sfvrsn=2>

St. Joseph's/Candler
2019 Community Health Needs Assessment

- In the event a hospital solicits but cannot obtain input from a source described above, the CHNA report must describe the hospital's efforts to solicit input from such sources.
- A prioritized description of the significant community health needs identified through the community health needs assessment, including a description of the process and criteria used in identifying significant needs and prioritizing such health needs.
- A description of the potential measures and resources identified through the CHNA to address the significant health needs.
- An evaluation of the impact of any actions that were taken since the hospital facility finished conducting its immediately preceding CHNA, to address the significant health needs identified in the hospital's prior CHNA(s).

COLLABORATING PARTNER – COASTAL GA INDICATORS COALITION

Working with community partners to identify and address complex community health needs enhances population health and provides better coordination of limited community resources. Our collaborating partner for the Community Health Needs Assessment is the Coastal GA Indicators Coalition.

Coastal Georgia Indicators Coalition, Inc. is a 501 c3 non-profit entity, comprised of community members and advocates working together through a comprehensive, coordinated approach for planning accountability. CGIC serves as a resource to agencies addressing overall health and well-being while leveraging resources for community initiatives that align with the strategic long-range plan known as the Chatham Community Blueprint. The purpose of the Coalition is to improve community well-being by engaging and leading the community work collectively in its development, implementation of strategic priorities that guide policy, programs and resource allocation.

2016 CHNA Report – Request for Comments and Feed Back

St. Joseph's/Candler posted the 2016 Community Health Needs Assessment on the System's website for easy access by anyone who wished to review and comment on the report. The web page, <https://www.sjchs.org/in-the-community/community-health-needs-assessment> includes historical and current CHNAs, Implementation Plans and Annual Updates and the System's Community Benefit Reports. The web page includes the following message:

"Your feedback is important in the CHNA process. Please send your written correspondence through any of the following options:

Mail

St. Joseph's/Candler's Community Benefits
Attention: Adam Walker
5353 Reynolds Street
Savannah, GA 31405

Email

communitybenefits@sjchs.org



No written comments or feedback was received pertaining to the information contained in the 2016 CHNA.

St. Joseph's/Candler
2019 Community Health Needs Assessment


Evaluation of Impact

During fiscal years 2016 – 2019, St. Joseph's/Candler continued, modified or increased outreach efforts in a number of areas in an effort to address the health and social determinants of health needs identified in the 2016 CHNA. These efforts are reported annually in the "Implementation Plan Progress Report" published on the SJ/C website at <http://www.sjchs.org/in-the-community/in-the-community>. A summary of the impact for fiscal years 2016 – 2019 is below. The reporting format was adopted from the Catholic Health Association's "Guide to Reporting Community Impact."⁵ Impact indicators were adapted from Healthy People 2020 Tracker⁶.

KEY

Symbol	Description
	A green arrow in the up direction indicates the identified health need in Chatham County is improving over time compared to the values in the 2013 CHNA.
	An equals sign indicates the identified health need in Chatham County has not significantly increased or decreased compared to the previous reporting period.

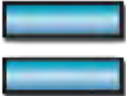

Long term initiatives such as reducing the breast cancer incidence rate may show little indicator improvement over short amounts of time, such as the three years between CHNA reporting cycles. However, SJ/C's goals and objectives outlined in the Implementation Plan Progress Reports represent ongoing efforts to improve the indicator in the interim periods. As noted before, please visit <http://www.sjchs.org/in-the-community/in-the-community> to review the specific work being done for each indicator listed below.

Identified Health Need	Community Benefit Actions	Impact
Increase access to health insurance for adults and children	<p>Goal 1: Facilitate enrollment in Health Exchange through counseling services and on-line assistance at four SJ/C outreach sites.</p> <ul style="list-style-type: none"> ➤ Commit staff time and resources of at least one co-worker at each of the four sites to be a credentialed counselor on the Health Exchange. ➤ Offer counseling and web tutorials to community members to enroll in Health 	



⁵ https://www.chausa.org/docs/default-source/community-benefit/2015-evaluatingcommunitybenefit-impact_web.pdf?sfvrsn=2

⁶ <https://www.healthypeople.gov/>



St. Joseph's/Candler
2019 Community Health Needs Assessment

Identified Health Need	Community Benefit Actions	Impact
	<p>Exchanges at each of the four outreach sites</p> <ul style="list-style-type: none"> ➤ Provide Medicaid application assistance to eligible clients through St. Mary's Center's Public Benefit Enrollment Services. <p>Goal 2: Provide a primary medical home for ineligible patients or for those who miss the enrollment periods, provide a primary medical home for those patients who do not qualify for Medicare/Medicaid and who cannot afford healthcare premiums because they are not eligible for a federal subsidy.</p> <ul style="list-style-type: none"> ➤ Increase access to health care services at St. Mary's Health Center and the Good Samaritan Clinic for those who do not qualify for care under the Affordable Care Act, for example those people who are undocumented or those who miss the enrollment period 	
Adults with Diabetes	<p>Goal: Operate comprehensive culturally and linguistically appropriate diabetic management programs</p> <ul style="list-style-type: none"> ➤ Provide free diabetes testing supplies for those patients enrolled in the diabetes management programs ➤ Provide A1C testing for those patients enrolled in the diabetes management program at least annually ➤ Enroll diabetic patients in diabetes group or one-on-one education at least annually <ul style="list-style-type: none"> ○ Provide at least one culturally and linguistically appropriate group education annually 	
Death Rate Due to Prostate Cancer	<p>Goal 1: Support evidence-based prostate cancer screening and early detection at the Good Samaritan Clinic, St. Mary's Health Center, the one SOURCE clinic, and one MGM clinic.</p>	

St. Joseph's/Candler
2019 Community Health Needs Assessment

Identified Health Need	Community Benefit Actions	Impact
	<p>Goal 2: Continue to provide prostate cancer care including navigation services, social services support, palliative care, and survivorship support at SJ/C Lewis Cancer & Research Pavilion to underserved populations.</p> <ul style="list-style-type: none"> ➤ Implement evidence-based prostate cancer screenings and follow-up guidelines at clinics. ➤ Provide PSA screening to qualified Good Samaritan Clinic and St. Mary's Health Center patients. ➤ Provide cancer support services to individuals with prostate cancer at SJ/C Lewis Cancer & Research Pavilion (LCRP.) 	
<p>Death Rate Due to Colorectal Cancer</p>	<p>Goal 1: Support evidence-based colon & rectal cancer screening and early detection at the Good Samaritan Clinic, St. Mary's Health Center, the one SOURCE clinic, and one MGM clinic.</p> <p>Goal 2: Continue to provide colon & rectal cancer care including navigation services, social services support, palliative care, and survivorship support at SJ/C Lewis Cancer & Research Pavilion to underserved populations.</p> <ul style="list-style-type: none"> ➤ Implement evidence-based screenings for colorectal cancer and follow-up guidelines at clinics. ➤ Provide Fecal Immunochemical Test (FIT) screening to qualified Good Samaritan Clinic and St. Mary's Health Center patients. 	
<p>Breast Cancer Incidence Rate</p>	<p>Goal 1: Support evidence-based breast cancer screening and early detection at the Good Samaritan Clinic, St. Mary's Health Center, the one SOURCE clinic, and one MGM clinic.</p> <p>Goal 2: Continue to provide breast cancer treatment and care including navigation services, social services support, palliative care, and survivorship support at SJ/C Lewis Cancer & Research Pavilion to underserved populations.</p> <ul style="list-style-type: none"> ➤ Implement evidence-based screenings for breast cancer and follow-up 	

St. Joseph's/Candler
2019 Community Health Needs Assessment

Identified Health Need	Community Benefit Actions	Impact
	<p>guidelines at clinics.</p> <ul style="list-style-type: none"> ➤ Provide screening mammograms to qualified Good Samaritan Clinic and St. Mary's Health Center patients. 	
Lung and Bronchus Incidence Rate	<p>Goal 1: Support evidence-based lung & bronchus cancer screening, early detection, and smoking cessation at the Good Samaritan Clinic, St. Mary's Health Center, the one SOURCE clinic, and one MGM clinic.</p> <p>Goal 2: Continue to provide lung & bronchus cancer care including navigation services, social services support, palliative care, and survivorship support at SJ/C Lewis Cancer & Research Pavilion to underserved populations.</p> <p>Goal 3: SJ/C supports early detection of lung cancer with low contrast CT scan of the lungs to at-risk individuals for low cost.</p> <p>Goal 4: SJ/C supports smoking cessation in the community.</p> <ul style="list-style-type: none"> ➤ Implement evidence-based screenings for lung cancer and follow-up guidelines at clinics. ➤ Support healthy lifestyles and smoking cessation through group education at the Good Samaritan Clinic and St. Mary's Health Center clinics. ➤ Provide cancer support services to individuals with lung cancer at SJ/C Lewis Cancer & Research Pavilion. ➤ Implement a low-contrast CT scan lung screening program if feasible. 	
Access to Affordable Medications	<p>Goal 1: Increase utilization of MedBank Inc., services at St. Mary's Health Center and the Good Samaritan Clinic; provide other medication assistance when needed</p>	

St. Joseph's/Candler
2019 Community Health Needs Assessment

Identified Health Need	Community Benefit Actions	Impact
	<ul style="list-style-type: none"> ➤ Provide MedBank, Inc. at SJ/C's St. Mary's Health Center or the Good Samaritan Clinic ➤ Purchase medications at pharmacies for patients who do not qualify for MedBank, Inc. services or patients with other special needs <p>Goal 2: Support MedBank, Inc. operations through in-kind operations to reduce operating cost to ensure services are offered to the broader community outside the operations of SJ/C outreach sites</p> <ul style="list-style-type: none"> ➤ Provide in-kind office space including utilities, maintenance and repairs ➤ Provide in-kind office supplies ➤ Support MedBank's annual fundraiser ➤ Provide support to MedBank by providing SJ/C staff on the organization's Board of Directors 	

PURPOSE OF THE COMMUNITY HEALTH NEEDS ASSESSMENT

St. Joseph's/Candler seeks to understand the health and social needs of the residents of Chatham County, GA through primary and secondary data collection including direct input from the medically underserved community and those who serve them directly or indirectly. This assessment complies with the Internal Revenue Service's (IRS) Final Ruling issued on December 31, 2014.

SCOPE OF ASSESSMENT

The Community Health Needs Assessment was conducted in Chatham County, Georgia, the primary service location for St. Joseph's/Candler. SJ/C's outreach centers are located in Chatham County, but most accept patients and clients from any county in GA and nearby counties in South Carolina.

Savannah, the first city established in Georgia, is the county seat of Chatham County. The county is the most populous one in Georgia that lies outside the Atlanta metropolitan area. Other municipalities within the county are Bloomingdale, Garden City, Pooler, Port Wentworth, Tybee Island, Thunderbolt, and Vernonburg. The U.S. Census Bureau's American Community Survey 2018 population estimate for the county is 294,365.

PRIORITY POPULATIONS – MEDICALLY UNDERSERVED

St. Joseph's/Candler has outreach programs that are inclusive of the broader community, such as the Health Lectures and Education Series, but also place special emphasis in outreach to at risk and vulnerable populations.

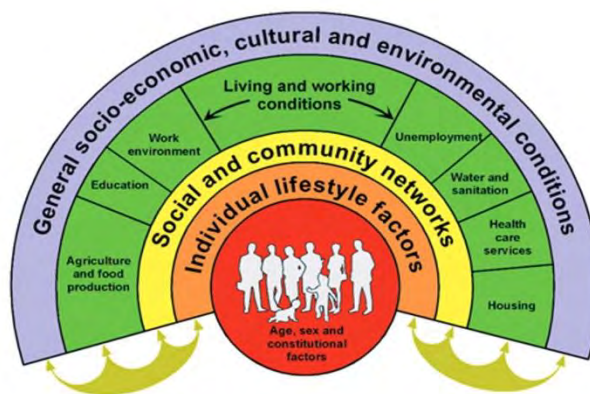
The IRS describes the medically underserved populations in IRS Bulletin 2015-5 as, "at risk of not receiving adequate medical care as a result of being uninsured or underinsured or due to geographic, language, financial, or other barriers."

Specifically, SJ/C targets populations living in poverty with a variety of health programs as well as programs or services that address the social determinants of health, described by the World Health Organization (WHO) are, "*Conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.*"⁷ Social determinants affect safe and affordable housing, workforce development and opportunities, education and many other social needs.

NOTE: Throughout the report the term vulnerable populations is used to describe those people living in poverty or at 200% of the federal poverty level or who are defined by the IRS as "medically underserved." These terms are used interchangeably throughout this report.

⁷ http://www.who.int/social_determinants/en/

St. Joseph's/Candler
2019 Community Health Needs Assessment



Source: *Global Oral Health Inequalities*

METHODOLOGY

St. Joseph's/Candler partnered with the CGIC and the REACH Team, to obtain primary and secondary data. These two groups also analyzed the findings of the data to determine the most pressing needs in the Chatham County Community. CGIC and the CCSPNC assisted the hospitals with prioritizing the health and social needs of the Chatham County community.

PRIMARY DATA SOURCING

GA Southern University was contracted by the CGIC to distribute approximately 30,000 random public opinion surveys (postcard, survey, postcard) stratified by County districts. The goal was a 15% return rate. 1,579 surveys were returned (28% web, 72% paper.) A copy of CGIC's Chatham County Speaks Again! - Community Blueprint Report produced by GA Southern University can be found in **appendix 2** of this report.

Community Engagement

In order to communicate with the public and all those involved in the assessment and planning process to date, the CGIC developed a Communication and Outreach Committee. Working with a public relations consultant, the committee implemented the following strategies to increase community engagement and establish an ongoing communication process.

- Web Site: The CGIC website www.coastalgaindicator.org links to sponsor web pages, houses a calendar of events, and posts meeting minutes, reports and publications.
- Monthly Electronic Newsletters: Email addresses were collected at every public meeting and event. A monthly electronic newsletter is sent to all in the database to maintain open and continuous communication, list opportunities for involvement, and provide update on progress towards the goals.

Open Community Meetings

The Chatham County Blue print process included a wide array of public meetings focused on listening to the voice of the community.

- **Neighborhood Forums** Over 300 community members participated in a total of fourteen neighborhood forums. At least 1 forum was held in each of the 8 County districts.

Community Partnerships

Over the past six years, there has been a growing realization for the need to integrate community indicators and performance measurement efforts at the community level to better assess the position and progress of the quality of life and to better engage citizens and other key stakeholders in the development and use of community indicators and performance measures by governmental and non-profit organizations.

Chatham County is unique in that it has several collaborative groups that work together to assess and address community health and social service needs. These key collaborative groups are members of the CGIC and include:

- Chatham County Safety Net Planning Council
- Step Up! Savannah's Anti-Poverty Coalition
- Healthy Savannah

These collaborative groups along with the city and county governments and many other organizations are members of the Coastal Georgia Indicators Coalition and participated in the development of the Chatham County Community Blue print, a public process to identify and address complex community health and social service needs.

SECONDARY DATA SOURCING

In 2012, St. Joseph's/Candler joined the Coastal Georgia Indicators Coalition (CGIC) and worked to expand the membership along with the number of community health data points collected. The Coalition purchased the Conduit Healthy Communities Institute (CHCI) web-based information system, which includes more than 100 health and quality of life indicators from more than 20 sources, including: U.S. Census Bureau, American Survey, Healthy People 2020, County Health Rankings, Centers for Disease Control and Prevention, Georgia Department of Public Health OASIS, Georgia Statistics System, National Cancer Institute, U.S. Department of Agriculture and The Food Environment Atlas. This information is uploaded to one data platform that is easy for the public to read and understand. In addition, the data is updated as new information is made available. The initial list of community health needs was compiled using the CHCI Community Indicators data.

About Conduit Healthy Communities Institute

Conduit Healthy Communities Institute developed a Community Health Needs Assessment web-based information system which compiles county, state, and federal data on a variety of health and social indicators in one user friendly platform. Through St. Joseph's/Candler's and Memorial Health's partnership with the Coastal Georgia Indicators Coalition, the secondary data from that site was used in the creation of this report. The platform is open to the public and can be found at www.coastalgaindicators.org.

The database measures how Chatham County compares to counties in the United States, or other Georgia counties. The Chatham County values may also be compared to established Healthy People 2020 target values. Healthy People 2020 values are established by the U.S. Department of Health and Human Services. For more information on Healthy People 2020, please direct your browser to www.healthypeople.gov.

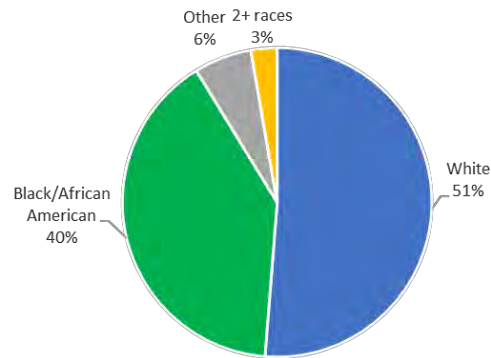
St. Joseph's/Candler
2019 Community Health Needs Assessment
CHATHAM COUNTY DEMOGRAPHICS

Total Population 294,365

Households 115,565

Families 72,388

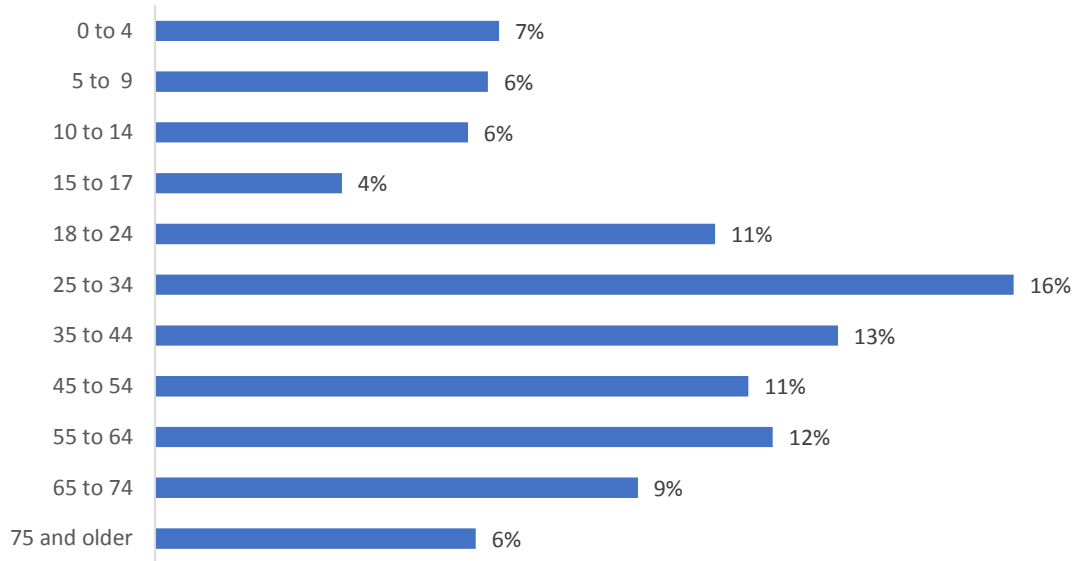
Percentage of Chatham County Population by
Race



Race	% of the population in Chatham	% of the population in Georgia
White	51%	56%
African American	40%	32%
American Indian/Alaskan Native	0.2%	0.4%
Asian	3%	4%
Native Hawaiian/Pacific Islander	0.1%	0.1%
Some other race	3%	4%
2+ races	3%	3%

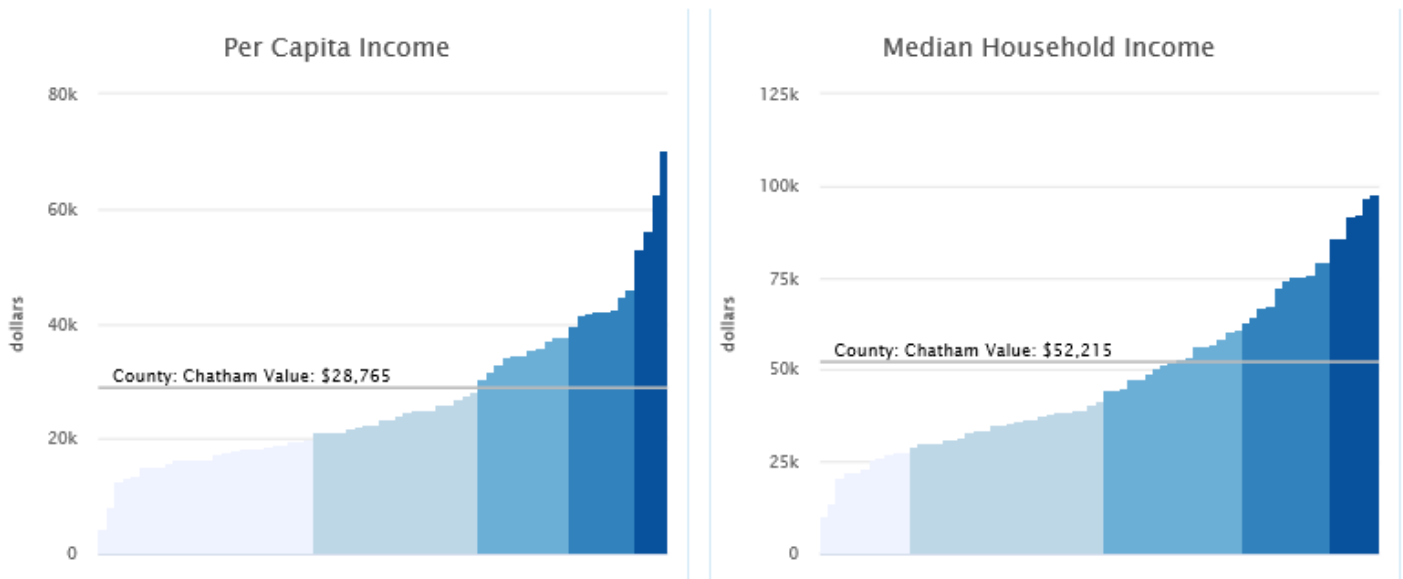
St. Joseph's/Candler
2019 Community Health Needs Assessment

Percentage of Chatham County Population by Age

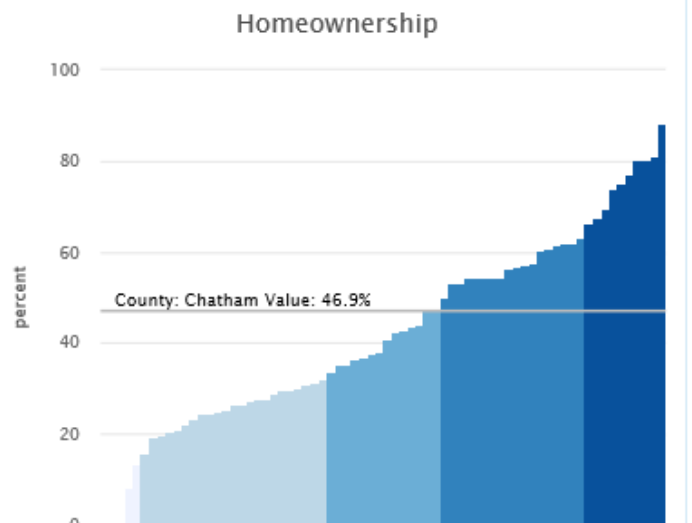
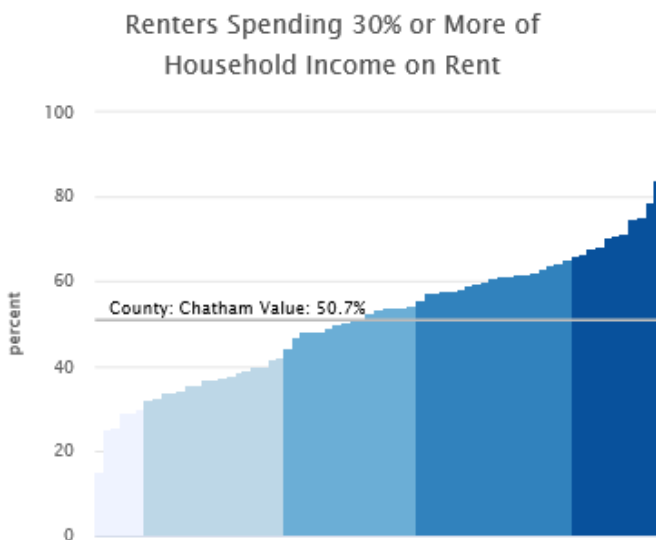


INCOME AND HOUSING

Income is a measure of economic wellbeing. Household with higher income tend to have better education, better access to care, and more options for housing, insurance, and leisure time activities. Housing situation is also a predictor of household health. Those who spend 30% or more of household income on rent tend to have less available food and medical expenses. Homeowners are more stable in the community and more likely to participate in civic affairs.



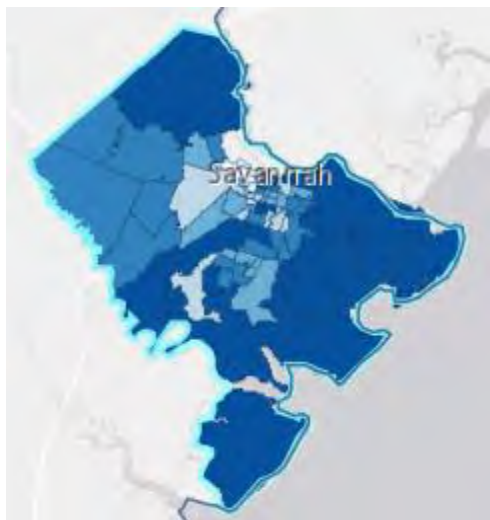
St. Joseph's/Candler 2019 Community Health Needs Assessment



EDUCATION

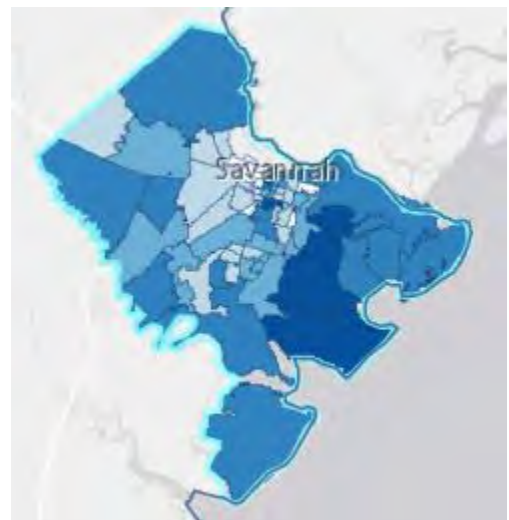
Education attainment impacts all aspects of life. Reading is a fundamental life skill. Being able to read at or above grade level is a precursor to college and career readiness. It also improves math and science scores. High school graduates have lower rates of health problems and lower risk of incarceration. Those with a college degree have improved job opportunities and have tendency to earn a much higher lifetime salary than those without.

People 25+ with a High School Degree or Higher



65.2% - 71.8% 71.8% - 82.3% 82.3% - 86.7% 86.7% - 91.5% 91.5% - 99.7%

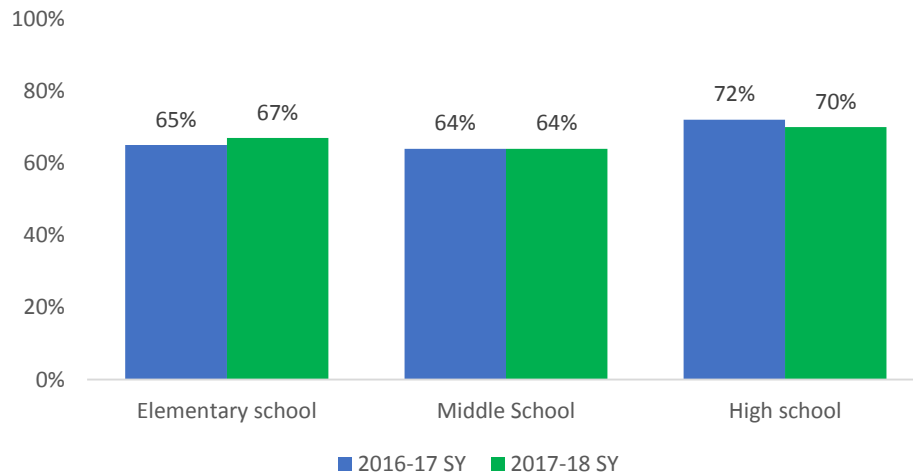
People 25+ with a Bachelor's Degree or Higher



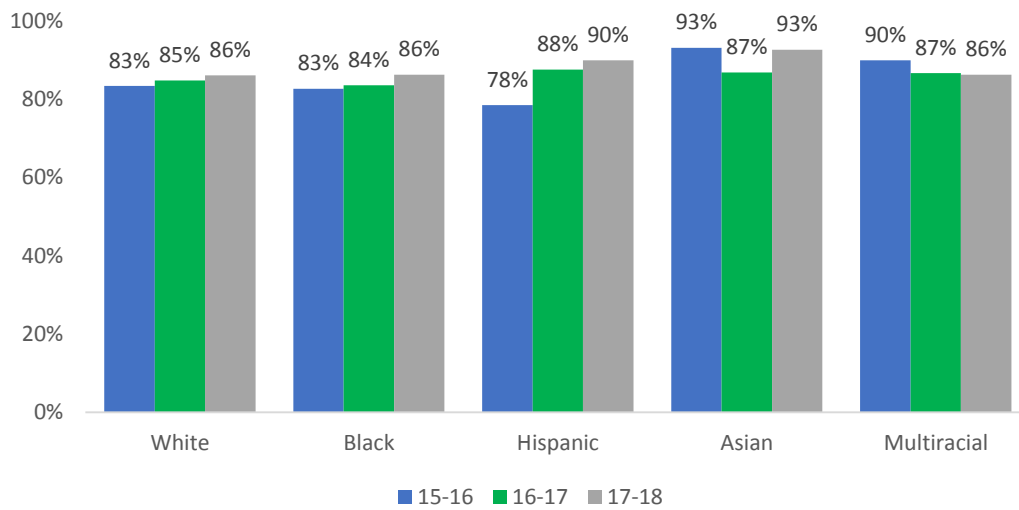
2.8% - 12.7% 12.7% - 23.4% 23.4% - 34.1% 34.1% - 48.4% 48.4% - 69.7%

St. Joseph's/Candler
2019 Community Health Needs Assessment

Percent of Students Reading at or Above Grade Level

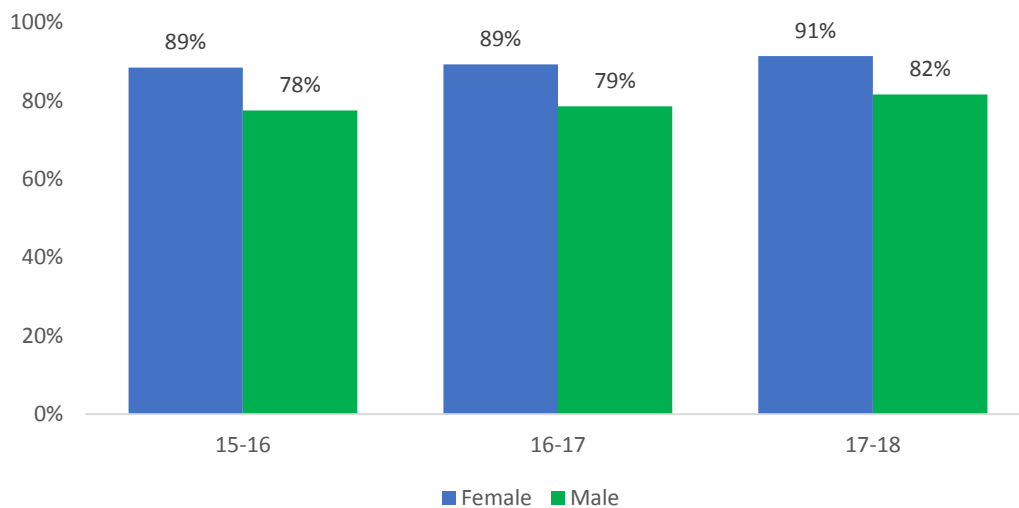


Graduation Rates by Race by School Year



St. Joseph's/Candler 2019 Community Health Needs Assessment

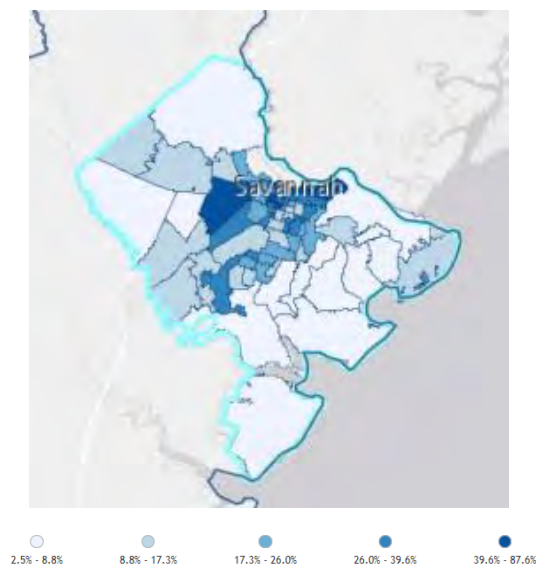
Graduation Rates by Gender by School Year



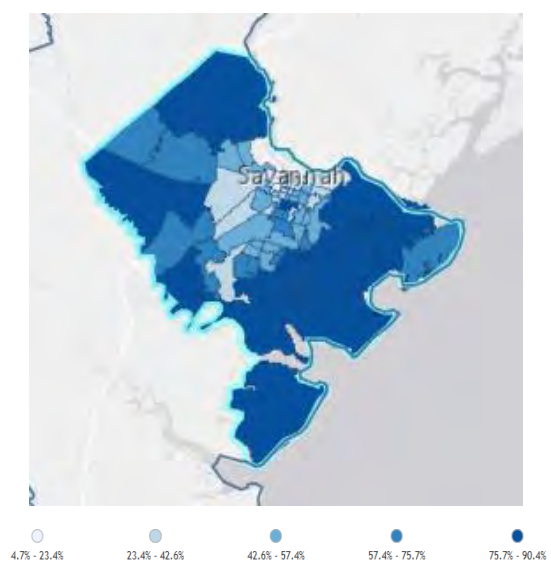
POVERTY

Federal poverty thresholds are set every year by the Census Bureau. Poverty is associated with insufficient employment opportunities, lower quality schools, and decrease community business survival. Those individuals and families living below poverty thresholds are less likely to have adequate health care and complete basic levels of education.

People Living Below Poverty Level

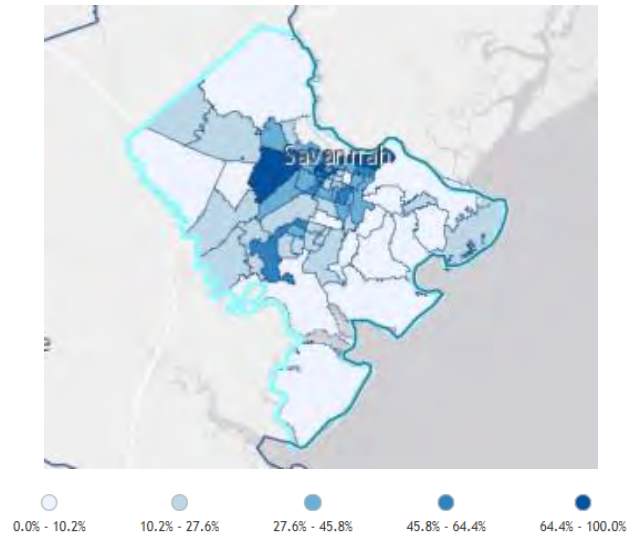


People Living 200% Above Poverty Level

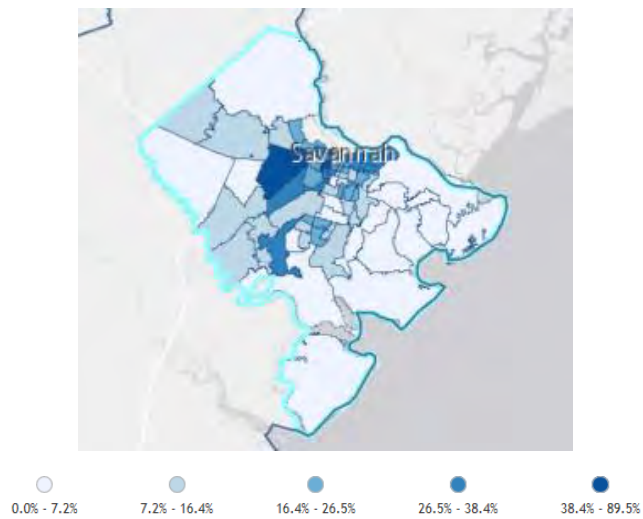


St. Joseph's/Candler
2019 Community Health Needs Assessment

Children Living Below Poverty Level

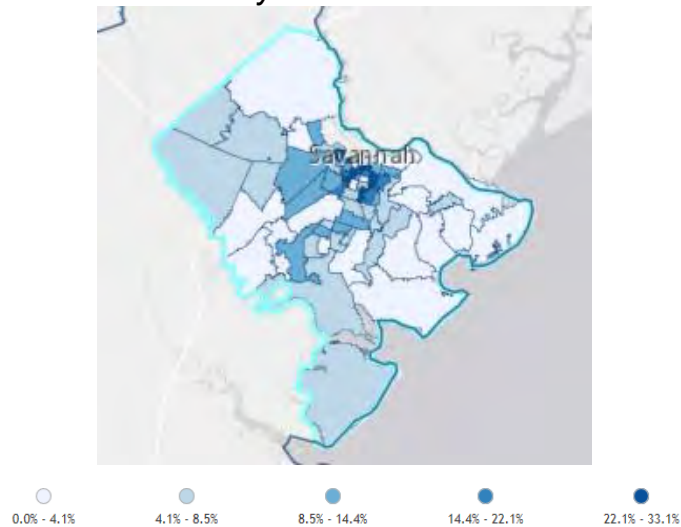


Families Living Below Poverty Level



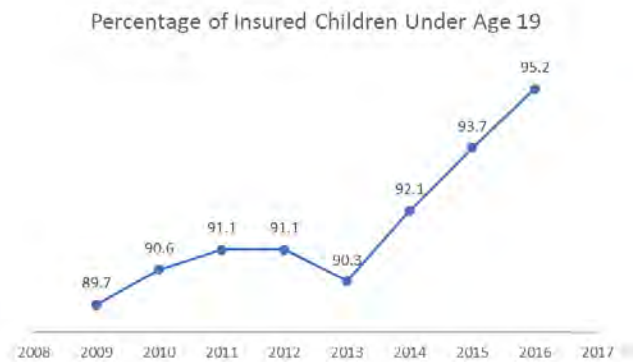
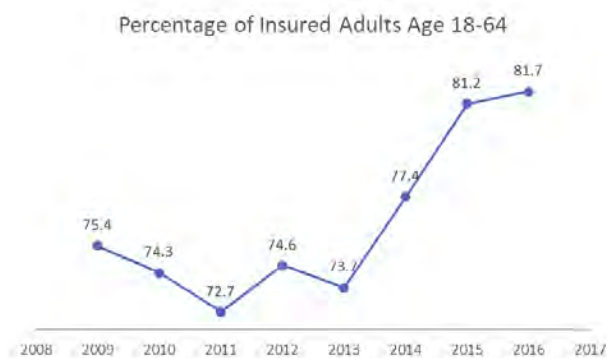
People 65+ Living Below Poverty Level

St. Joseph's/Candler 2019 Community Health Needs Assessment



INSURANCE

Medical costs in the United States are extremely high. People with health insurance are more capable of affording health care and prescription drugs. They are more likely to seek routine care such as checkups and screenings, and more likely to see treatment at the onset of a health condition instead of waiting until it becomes more severe. Health insurance premiums can be a barrier to obtaining coverage. Some employers offer coverage through employee benefits.

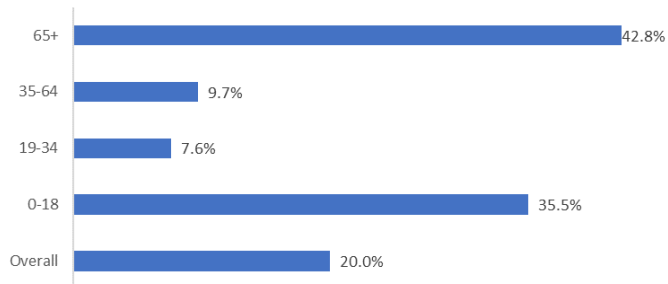


St. Joseph's/Candler 2019 Community Health Needs Assessment

Percentage of Population with Private Health
Coverage by Age Group



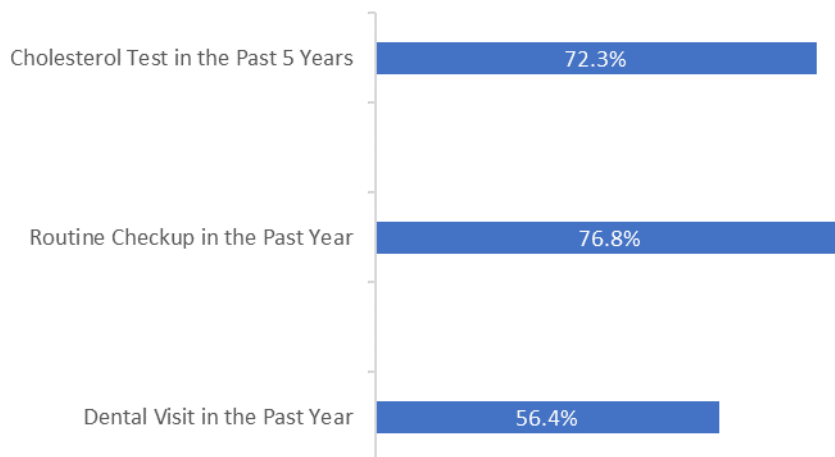
Percentage of Population with Public Health
Coverage By Age Group



ROUTINE CARE

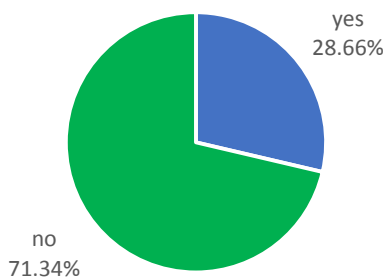
Routine medical care and screenings are important for maintaining good health. Regular checkups and screenings can help diagnose health issues prior to onset or in early stages. This is key for proper treatment. Those patients with a previous diagnosis should continue to have regular exams to monitor any progression and to diagnose new issues.

Percentage of Adults who Received Routine Care

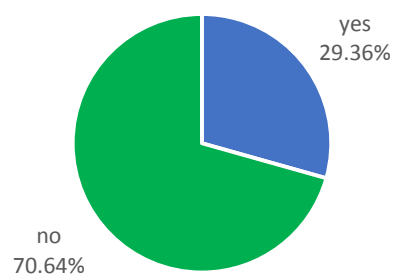


People 65+ Who Received Recommended Preventive Services

Male



Female

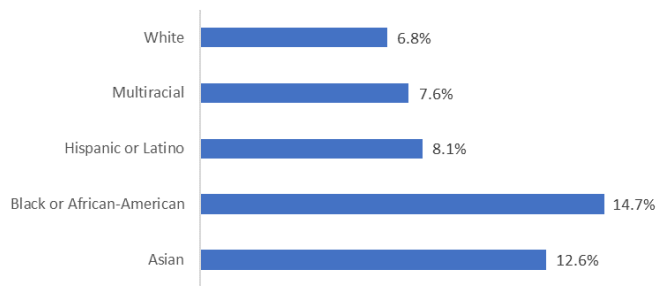


St. Joseph's/Candler
2019 Community Health Needs Assessment

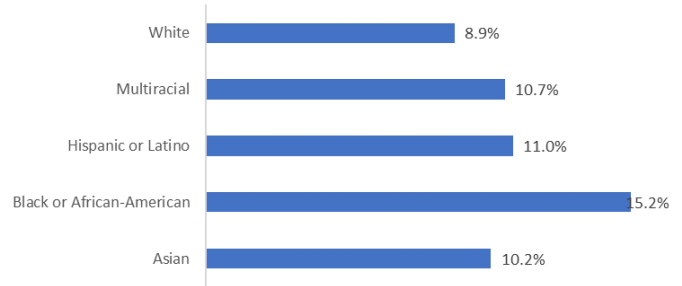
PREGNANCY AND INFANTS

High risk pregnancies can include such risk factors as maternal age, smoking, alcohol or drug use, poor nutrition, and lack of routine care. These risk factors can lead to premature delivery, low birth weight, and higher infant mortality rates. Babies born preterm or who have low birth weight are more likely to have need for specialized medical care and long-term disabilities. Measures expectant mothers can take to increase the likelihood of a full-term pregnancy and health baby are taking prenatal vitamins, abstaining from smoking, alcohol, and drug use, and seeking prenatal care.

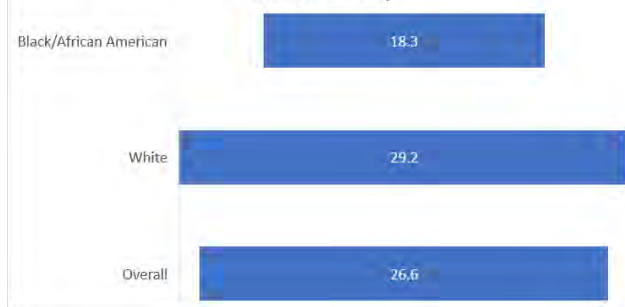
Percentage of Babies with Low Birth Weight By Maternal Race/Ethnicity



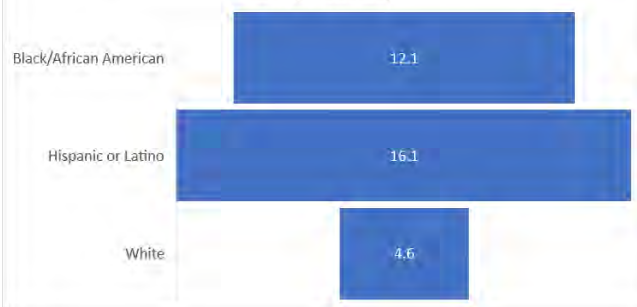
Percentage of Preterm Births By Maternal Race/Ethnicity



Birth Rate in Females Aged 15-19 per 1,000 by Race/Ethnicity



Infant Mortality Rate per 1,000 Live Births by Race/Ethnicity



St. Joseph's/Candler
2019 Community Health Needs Assessment

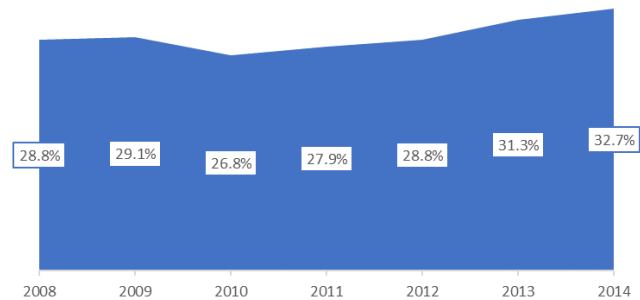
PHYSICAL ACTIVITY AND NUTRITION

Physical activity and nutrition are key factors to a healthy life. Lack of physical activity can lead to many chronic diseases such as heart disease, diabetes, and obesity. One of the Healthy People 2020 goals aims to reduce the percentage of adults who do not engage in leisure time activities. Poor nutrition is also a risk factor for these chronic diseases. Poor nutrition can stem from individual choice or lack of accessibility to quality, nutrient dense food.

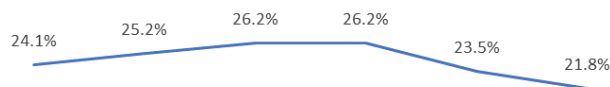
Percentage of Adults 20+ who are Sedentary



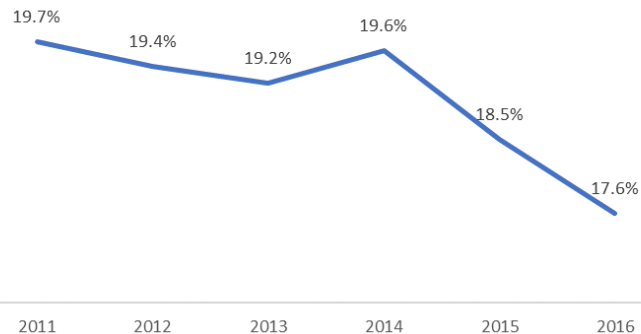
Percentage of Adults 20+ who are Obese



Percentage of Children with Food Insecurity



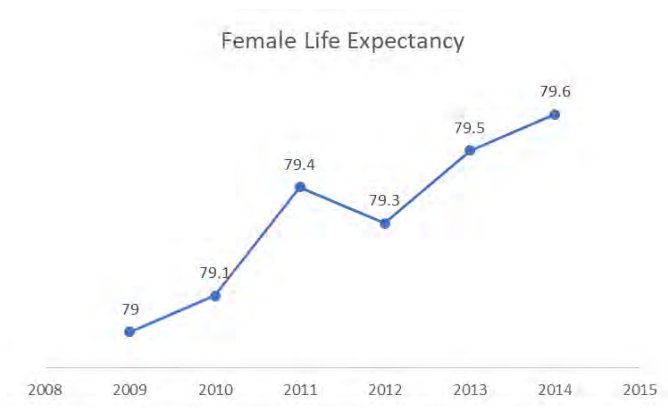
Percentage of the Population with Food Insecurity



St. Joseph's/Candler
2019 Community Health Needs Assessment
LIFE EXPECTANCY AND DEATH

Life expectancy is the estimated number of years a person can expect to live considering influences like demographics, geographical location, and available medical care. It is a good measure of population health but is affected by all cause death rates. Death rates are also affected by available medical care.

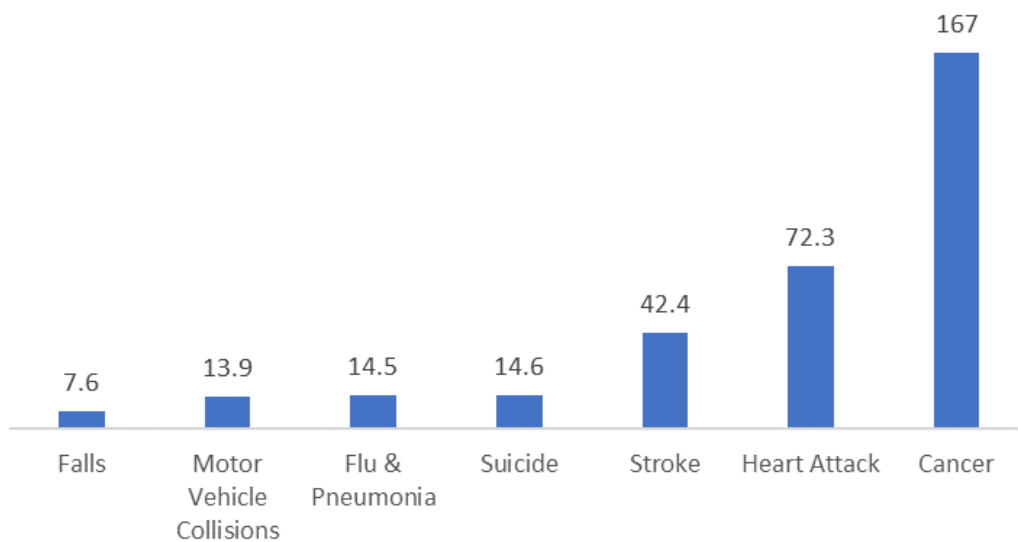
Female Life Expectancy 79.6 years



Male Life Expectancy 74.3 years

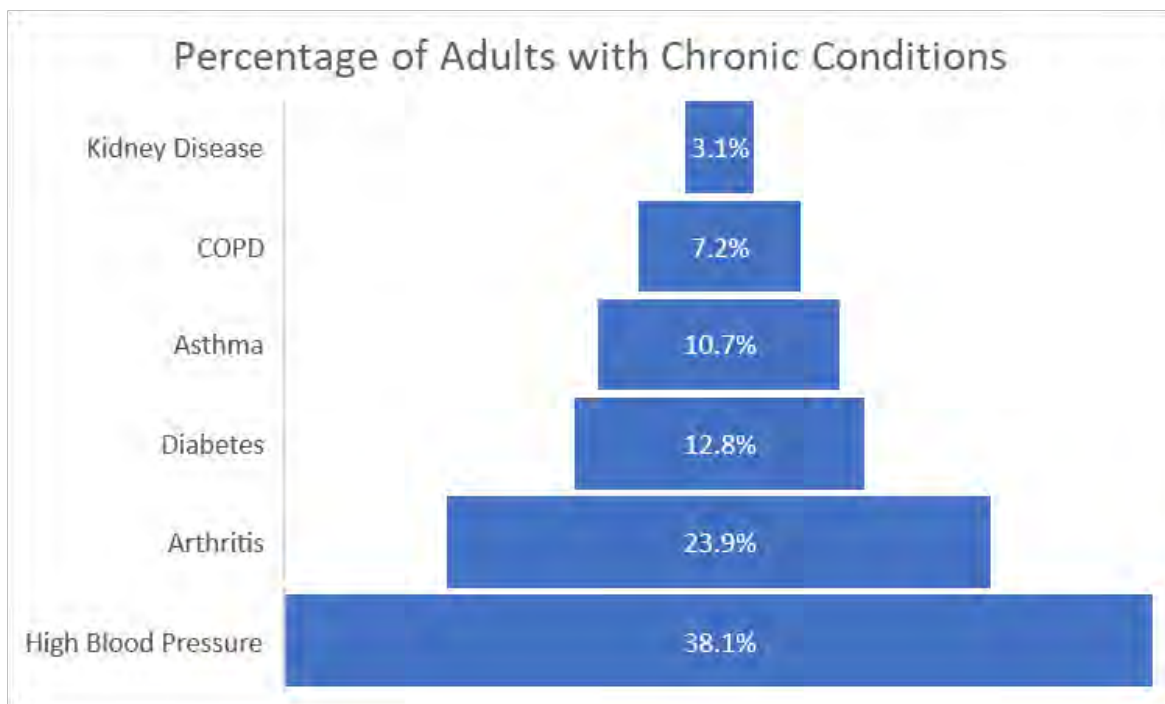


Age Adjusted Deaths per 100,000



CHRONIC DISEASE

The Centers for Disease Control defines a chronic disease as one that lasts more than one year, requires ongoing medical attention, and can inhibit some activities of daily living. Many chronic diseases share similar risk factors such as poor diet, lack of exercise and smoking. Often lifestyle changes, such as controlling obesity, plays a part in treatment along with medication and careful monitoring of conditions.

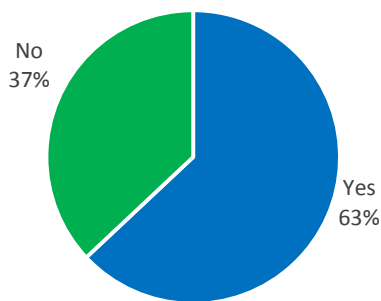


St. Joseph's/Candler
2019 Community Health Needs Assessment

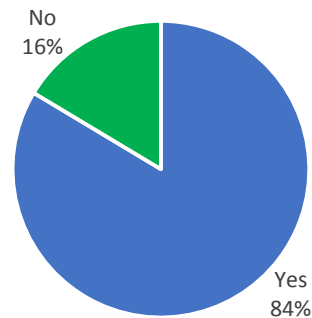
CANCER

Cancer is a leading cause of death in the United States. Cancer is the result of abnormal cells dividing without control and invading other tissue. According to data from the National Cancer Institute, breast, colorectal and lung cancers have some of the highest new case rates among the 100 different types of cancer. Males have a higher incidence rate of 507 cases per 100,000 while the female incidence rate is lower at 405.2. This has been the trend since 2004 reporting year.

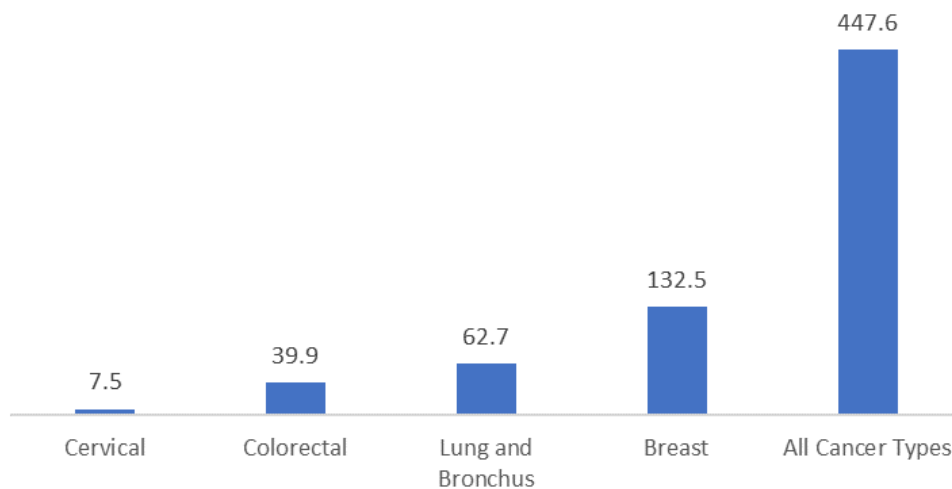
Percentage of Population Age 50 to 75 Receiving Colon Cancer Screening



Percentage of Women Age 50 to 74 with a Mammogram in Past Two Years



Cancer Incidence Rates Per 100,000

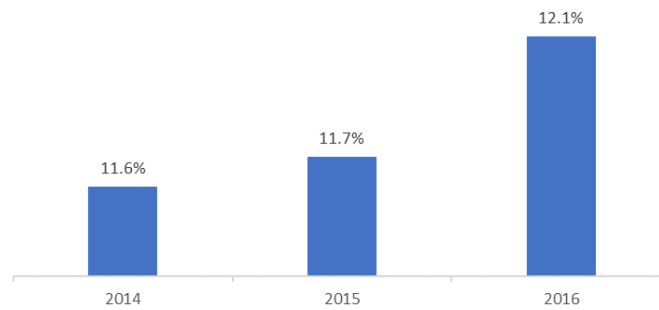


St. Joseph's/Candler
2019 Community Health Needs Assessment

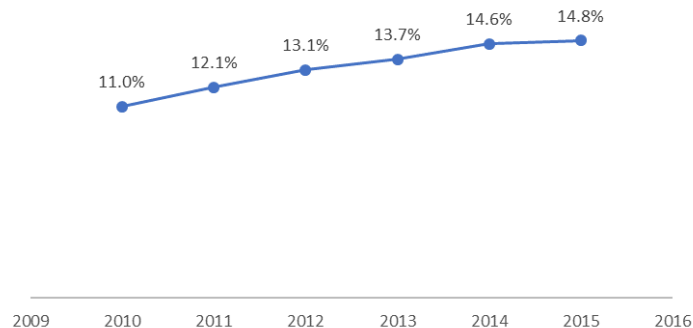
MENTAL HEALTH

Psychological distress can affect all aspects of life including family, employment, and social interactions. An excess of persistent days with fatigue, sadness, loss of interest, or other emotional issues can signal the need for medical attention. These symptoms can be the result of depression, a chronic disease that can be improved through a variety of treatments, both pharmacological and otherwise.

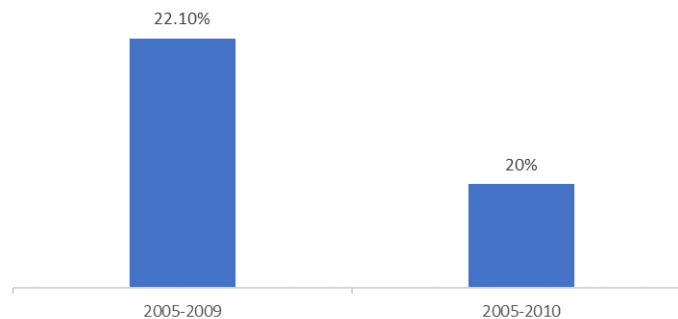
Percentage of Adults with Frequent Mental Distress



Percentage of the Medicare Population with Depression



Percentage of Adults with Inadequate Social Support



PRIORITIZATION OF NEEDS

Utilizing primary and secondary data sources, SJ/C developed a list of identified health and social needs. The needs were also cross referenced with annual reports from other local health and social service providers as secondary verification sources. The final list of needs was reviewed with the Chatham County Safety Net Planning Council and representatives from Coastal Health District to help prioritize the needs that SJ/C could address. Data used included:

- Coastal GA Indicators Coalition Dashboards
 - Community Indicator Dashboard - <https://www.coastalgaindicators.org/index.php?module=indicators&controller=index>
 - Disparity Dashboard Data - <https://www.coastalgaindicators.org/index.php?module=indicators&controller=index&action=dashboard&alias=disparities>
- Chatham County Speaks Again! Report – **appendix 2**
 - Community Blue Print Needs – **appendix 3**
- Healthy People 2020 – Chatham County Report - **appendix 4**
- SJ/C Chatham community paper and electronic survey results (n: 295) – **appendix 5**

Other Internal Information

SJ/C's Emergency Department (ED) Medical Home Team is made up of health coaches who work with GA Southern University students to connect uninsured and underinsured patients with health and social services. Data from May 2018 – May 2019 was used to determine the most health and social needs identified by patients utilizing ED services by zip code. This information can be found in **appendix 6** of this report.

Secondary Source Partners

Chatham County is an extremely collaborative community where hospitals, the health department, social service agencies, municipal government, schools of higher learning and many others work together to help address the health and social needs of the community. Key partnerships and coalitions in Chatham County include the organizations listed below. Each of these organizations provides an annual report to assess needs and evaluate progress toward their stated goals. Please refer to the websites listed for other helpful community health and social services' reports.

Coastal Georgia Indicators Coalition (CGIC)

www.coastalgaindicators.org

Over the past few years there has been a growing awareness of the need to integrate community indicators and performance measurement efforts at the community level. The intention is to better assess the position and progress of communities' quality of life and to better engage the communities' citizens and stakeholders. The sponsors of the Savannah-Chatham Community Indicators Coalition have a shared responsibility for assessment, planning, evaluation, and accountability for policy change and systems change over time.

St. Joseph's/Candler
2019 Community Health Needs Assessment
Chatham County Safety Net Planning Council (CCSNPC)

www.chathamsafetynet.org

The CCSNPC serves as a countywide planning group for healthcare. It was created in 2004 to improve the efficiency and effectiveness of the local healthcare delivery system, to advise regarding healthcare trends, and to assist the County Commissioners in better meeting the healthcare needs of uninsured and underinsured constituents. Since 2006, the Council has provided an annual evaluation to assess needs and trends and to identify key existing resources and gaps in the Community's healthcare delivery system. This evaluation is based on voluntary submission of data from the provider partners and publicly available data on population and policies affecting healthcare.

Healthy Savannah, Inc.

www.healthysavannah.org

Healthy Savannah is dedicated to making Savannah a healthier place to live. Healthy Savannah leads and supports healthy lifestyles in Savannah by:

- Creating an environment that makes a healthy choice an easy choice,
- Building a collaborative network that identifies and shares resources,
- Collecting and disseminating information,
- Promoting best practices and implementing innovative programs, and
- Advocating for effective policies.

Step-Up Savannah, Inc.

www.stepupsavannah.org

Step Up Savannah, Inc., a collaborative of organizations, businesses, and government agencies, seeks to move families toward economic self-sufficiency.

Three Focus Areas

- Workforce development and jobs
- Wealth building and financial understanding
- Work supports

Prioritizing the Data

A decision tree was used to determine if an indicator was or was not a community need (**appendix 7.**) There were four determination types:

1. Secondary Data – Is the Chatham County indicator red or yellow? If yes, the indicator is a community need.
2. Secondary Data – Is the Chatham County value meeting the Healthy People 2020 target? If not, the indicator is a community need.
3. Primary Data – Did survey respondents identify additional needs? If so, they are a community need.
4. Primary Data – Did the community input process identify additional needs? If so, they are a community need.

St. Joseph's/Candler
2019 Community Health Needs Assessment
CONCLUSIONS - Repeated

After reviewing all the data and feedback, the following indicators of health and social determinants of health are the most pressing needs in Chatham County.

Community Health Needs

- Access to affordable health insurance
- Access to mental health services
- Access to food and exercise opportunities
- Access to affordable and convenient health care
- Chronic disease and routine care

Social Determinants of Health

- Unemployment
- Severe housing problems
- Poverty
- Income
- Reading on grade level
- Violent crime
- Public transportation
- Recidivism

Increased efforts on addressing these needs should be focused on the at-risk and vulnerable populations of Chatham County. It is necessary to provide support to our local community in the form of quality services which are easily accessible to the masses. It is also necessary to provide ways to foster security in individuals and opportunities to improve quality of life. A strong support and resource system is invaluable for the health of our community.

St. Joseph's/Candler will continue to work independently and collectively with other health and social services' providers to address the health and social service needs of the Chatham County community. A list of other partner providers can be found in **appendix 8**. A list of Chatham County Safety Net health providers can be found in **appendix 9**.

REQUEST FOR COMMENTS

St. Joseph's/Candler welcomes your comments, suggestions or questions related to the Community Health Needs Assessment, including any report published in previous years. Your feedback is important in the CHNA process. Please send your written correspondence through any of the following options:

Mail

St. Joseph's/Candler's Community Benefits
Attention: Adam Walker
5353 Reynolds Street
Savannah, GA 31405

Email

communitybenefits@sjchs.org

Appendix 1

St. Joseph's/Candler's FY 2018 Community Benefit Report

St. Joseph's/Candler
2019 Community Health Needs Assessment
**A SOCIAL ACCOUNTABILITY REPORT ON ST. JOSEPH'S/CANDLER'S CHARITABLE MISSION
REFLECTING THE ACTUAL COST (NOT CHARGES) OF PROVIDING CARE IN OUR COMMUNITY -**

TRADITIONAL CHARITY CARE

Charity Care.....\$51,753,549

Outpatient and inpatient services provided **at cost** for indigent patients

Unreimbursed Care.....\$14,239,208

Medicaid uncompensated care **at cost** for the underinsured and GA hospital tax

TOTAL TRADITIONAL CHARITY CARE.....\$65,992,757

OTHER BENEFITS

Community Health Improvement Services & Community Benefit Operations.....\$1,801,867

- African American Health Info. and Resource Center
- Community Health Education and Presentations
- ED Medical Home Program
- Eye Care Clinic
- Good Samaritan Clinic
- Johnny's Bridges to Hope Mental Health Prog.
- Smart Senior
- St. Mary's Health Center

Health Professions Education.....\$220,900

Subsidized Health Services.....\$1,164,513

- Assisted Living Assistance
- Home Health Services
- Infusion/DME/Tube Feeding Supplies
- Nursing Home Assistance
- Outpatient Palliative Care
- Renal Dialysis Services

Financial and In Kind Contributions.....\$648,660

- Angels of Mercy
- Augusta University
- Church/Religious Outreach
- Community Board Involvement
- Food Assistance
- Hotel Lodging
- Medbank, Inc.
- Medical Missions
- Meeting Space
- Mercy Volunteers
- Prescription Drug Assistance
- Support Groups

Community Building Activities.....\$437,892

- Community Economic Development Boards
- GED Classes
- Pre-school Program
- Project SEARCH
- Resume and Employment Search Assistance
- Tax Preparation Assistance (VITA)
- Workforce development Programs

TOTAL OTHER BENEFITS.....\$4,273,832

TOTAL COMMUNITY BENEFITS.....\$70,266,589

In addition to the more than \$70.2 million dollars in formal community benefits, St. Joseph's/Candler provided \$37,925,845 in uncollected service cost and uncompensated Medicare cost in Fiscal Year 2018.

TOTAL COMMUNITY ASSISTANCE.....\$108,192,434

2017 Total Community Assistance

\$81,920,484

Appendix 2

Chatham County Speaks Again! 2018 Survey of Chatham County Residents Health and Wellness

Chatham County Speaks Again!

2018 Survey of County Residents



Prepared by
Center for Business Analytics and Economic Research
Business Innovation Group
Parker College of Business, Georgia Southern University

For the
Coastal Georgia Indicators Coalition
April 2019



Foreword

This study reports the findings of the 2018 county-wide survey of the adult population of Chatham County, Georgia. The report was produced by Center for Business Analytics and Economic Research (CBAER), a member of the Business Innovation Group, Parker College of Business at Georgia Southern University.

The survey and this report could not have been completed without important input and support from the Coastal Georgia Indicators Coalition.

The following CBAER team members and external partners played valuable roles and contributed their expertise in the production of the report.

Project Team

Analytics and Research:

Dr. Michael Toma

Mr. Benjamin McKay

Mr. Daniel Howard

Ms. Mary Willoughby

Special thanks to Georgia Southern University student assistants:

Mr. Stephen Kenyon, (MBA Graduate student)

Ms. Morgan Rushing (Bachelor of Science Business Economics)

Mr. Phil Boyum, (MBA Graduate student)

Ms. Victoria Kesler (MACC Graduate student)

Mr. Slade Taylor (MACC Graduate student)

Ms. Rachel Brown (Bachelor of Arts Graphic Design)



Table of Contents

Executive Summary	1
I. Introduction	5
II. The Big Picture: Challenges Facing Chatham County	11
III. Reasons for In-migration and Planned Out-migration	17
IV. Comparison of 2015 and 2018 Survey Responses	22
V. Neighborhood Satisfaction	28
VI. Public Safety	48
VII. Economic Independence	56
VIII. Health and Wellness	67
IX. Education	75
X. Planning for 2035 and Beyond: Open-Ended Comments	82
Appendix A. Survey Responses by Questions.....	83
Appendix B. Survey Instrument	110
Appendix C. Chatham County Commission District Maps	116

Executive Summary

The Center for Business Analytics and Economic Research (CBAER), a unit of the Business Innovation Group at Georgia Southern University, partnered with the Coastal Georgia Indicators Coalitions, Inc. (CGIC) to conduct a community wide survey in Chatham County, Georgia in the Fall of 2018. This is part of an ongoing effort of CGIC to maintain a record of objective information that serves as an informational tool used to monitor progress on matters of importance to the well-being of the community. This report is a follow-up study to an analysis conducted by the Armstrong State University Public Service Center in 2015. The 2015 report along with input of CGIC and other community leaders served as the basis of an extensive survey that was developed and delivered to 30,000 randomly selected addresses in Chatham County. This sample was stratified by county commission district to obtain survey responses representative of Chatham County.

The Big Picture

In the 2018 questionnaire, participants were provided with 18 priority area issues drawn from the strategic planning work performed by the county and represented in the *Chatham Community Blueprint* document. Each participant was asked to select four priority issues that community leaders should focus on improving. Listed below are the top six issues selected by survey respondents:

1. Violent crime rate
2. People living below poverty rate
3. Higher wage jobs
4. Mental health
5. Repeat crime offender rate
6. High school graduation rate

Across the eight county districts, both violent crime and people living in poverty remained top concerns, while higher wages and mental health had wider ranges across the districts. For example, in District 1 high wages jobs rated eighth, but third in Districts 2, 3, 5 and 8. This is a recurring theme throughout the analysis, that place (i.e. District) is correlated with the views of respondents.

SPLOST Fund Allocation

Respondents were asked how they would choose to spend \$1,000 in new Special Purpose Local Option Sales Tax (SPLOST) revenue across a list of eight possible functional areas. The allocation of funds across the functional areas are as follows:

1. Public Safety - 18%
2. Transportation Project: Roads & Bridges - 15%
3. Drainage Infrastructure - 15%
4. Affordable Housing Solutions - 13%

5. Early Childhood Development Facility – 11%
6. Infrastructure for Business and Industry Attraction and Job Creation – 10%
7. Recreation, Parks & Green Space - 10%
8. Sidewalks, Trails, Bike Paths - 9%

It is highly notable that the combined allocation on (#7) Recreation/Parks/Green Space and (#8) Sidewalks/Trails/Bike Paths exceeded the allocation toward (#1) Public Safety.

Reason for in-migration and planned out-migration

Survey participants were asked the following questions: “Did you move to Chatham County in the past 5 years?” and, “Do you plan to leave Chatham County in the next 5 years.”

- Overall, 33% moved to Chatham County in the past five years and 34% plan to leave Chatham County over the next five years.
- Quality of life was cited most frequently as the reason for leaving the county.
- In general, “good schools” are not attracting migration to Chatham County. While 4% of respondents to this question said good schools was the reason for moving into Chatham County, 14% said they were leaving because of the schools. The 10-point swing is the largest margin of any of the stated reasons for moving in or out of the county.
- Participants were most likely to have moved into District 2, 7, and 8 and were planning to leave District 5, 6, 7, and 8.
- Persons planning to leave Chatham County were most likely to leave Georgia (38%), or are not sure of their destination (37%), while a smaller percentage planned to move to a destination in Georgia (24%).

Comparison of 2015 and 2018 Survey Responses

The 2018 responses are generally similar to answers provided in 2015. Two examples below reflect similarities in demographics of respondents and perspective on crime:

- In 2018, 36% of the sample was male and 60% was female – a slight shift from 35% male and 63% female in 2015.
- In 2018, 64% of responses were provided by people over 50 years of age as compared to 67% in 2015.
- “My neighborhood is mostly free of property crime”: 56% agreed or strongly agreed in 2018, while 55% agreed or strongly agreed in 2015.
- “My neighborhood is mostly free of violent crime”: 74% agreed or strongly agreed in 2018 and 72% did so in 2015.

Responses to several questions did change by more than 10 percentage points, including:

- Agreement and strong agreement increased by 12 percentage points with respect to “Job opportunities available that match my skills.”

- Overall, satisfaction with (and awareness of) public transportation improved notably from the 2015 to 2018, with 36% satisfied/very satisfied in 2018, up from 20% in 2015. Further, those responding “N/A/Don’t Know” declined from 53% in 2015 to 32% in 2018.

Other noteworthy findings include:

- None of the crime-related questions displayed a large amount of variation when participants were asked about crime in *their* neighborhood.
- More residents are employed and feel there are jobs in Chatham County that match their skills, but the same percentage still report living paycheck to paycheck.
- In addition, the majority of participants noted their satisfaction with overall quality of life is high (in the mid-70% range), while over 44% perceive quality of life as improving.

Access to Goods, Services, and Public Transportation

- Overall, 86% of residents agreed they have access to grocery stores with healthy food choices. The responses vary somewhat by ethnicity, with agreement at 82% for African American and 90% for White residents.
- 68% of Chatham County residents are satisfied with healthy food options in their neighborhoods. Districts 8 and 5 are less satisfied at 60% and 62%, respectively, and satisfaction is highest in District 4 at 79%.
- 67% are satisfied with CAT bus routes, with District 5 being the most satisfied at 91% and District 7 being the least satisfied at 37%.
- 66% of residents say their neighborhoods are conveniently located near recreational facilities and activities, but only 33% are satisfied with youth recreational opportunities and 39% are satisfied with adult opportunities in their neighborhoods.

Neighborhood Cohesiveness

- 65% of residents know their neighbors and have friends in the neighborhood, and 68% see people in their neighborhoods as being willing to help one another.
- 76% are satisfied/very satisfied with the overall quality of their lives, varying from 58% in District 5 to 91% in District 4.
- About 47% of residents between 18 and 34 are satisfied with race relations in their neighborhoods compared to 44% of 50-64 year-old and 55% of respondents age 65 and older. Among Black respondents, satisfaction with race relations is at 29%, while White residents are at 48%; 19% of White residents are dissatisfied compared to 27% of Black residents.

Public Safety

- Overall, 72% of Chatham County residents report their neighborhoods are mostly free of violent crime; 55% say their neighborhoods are mostly free of property crime, and 56% agree that the police care about the needs of their neighborhoods.
- Positive perceptions of public safety in neighborhoods are most apparent in the opinions of residents in District 4, followed by District 7; lowest opinions of public safety are in District 2, followed by District 3.
- 41% of District 1 residents see the trend in quality of public safety as worsening, while 56% of Districts 4 and 8 see public safety as not changing.

Economic Independence

- Across the districts, perceptions are that job opportunities match the skills of residents. The lowest scores are recorded in District 2, 3 and 5 in the mid-60% range and highs in the high 70% in District 7 and 4.
- 70% of 18-34 year-olds in the County are aware of financial aid and resources that can support educational goals (such as FAFSA, scholarships, loans, grants).
- Full-time employment ranged from a high in District 4 of 68% to a low of 51% in District 3.

Health and Wellness

- About 56% of residents are satisfied with medical services in the county, with District 6 residents being significantly more satisfied (75%) compared to other districts, and District 3 being least satisfied (49%).
- Modest gains in some healthy behaviors occurred (less smoking, more exercise), while reporting of chronic conditions (diabetes and high blood pressure) declined modestly from 2015 to 2018.

Education

- Current satisfaction levels with public schools are generally lowest in Districts 2, 5 and 7, while Districts 4 and 8 report higher levels of satisfaction with public schools.
- A majority of respondents with one or more children in the household perceive the trends in the overall quality of public education as unchanging.
- The perceived trend in the quality of elementary schools is improvement.
- Trends in the quality of public schools are perceived to be improving the most in District 3, 4, and 8, while they are reported as deteriorating in District 6 and 7.

Introduction

Across the country, local community-focused nonprofits and governments are seeking ways to better understand the needs and concerns of the local population. A common practice used to develop an understanding of issues of most concern to residents is to conduct surveys.

In Chatham County, the Coastal Georgia Indicators Coalition, Inc. (CGIC) desired to conduct a follow-up survey of the community, having first undertaken a county-wide survey in 2015. The 2015 survey and analysis was conducted by Armstrong State University's Public Service Center. The follow-up survey performed in 2018 was a joint effort of the CGIC and Georgia Southern University's Center for Business Analytics and Economic Research (CBAER), a unit of the Business Innovation Group (BIG).

This 2019 report provides results of a community-wide survey to assess the current baseline views of the community on numerous topics of interest to community residents. Respondents were asked to report their level of satisfaction with various aspects of the community and whether trends were improving or deteriorating. In addition, the participants shared their views on 17 specific priority areas of importance in the community as reflected in the *Chatham Community Blueprint*. Further, residents' perspectives on the allocation of Special Purpose Local Option Sales Tax revenue across different functional areas were obtained. Together, each of the following sections documenting survey responses may provide community leaders with information useful in the decision-making process.

Survey Instrument

The 2019 survey report was developed using the 2015 questionnaire as the starting point. Working in close cooperation with CGIC, the questionnaire was refined through a series of meetings and workshops with community stakeholders reflected in the diverse membership of the CGIC. In general, one foundational element of the updating strategy was to make changes only when warranted by evolving community concerns and conditions. This facilitated comparison of survey responses from 2015 and 2018 where appropriate, but allowed for evolution in the questionnaire to capture recently emerging issues in the community. A brief overview of the topics in the 90 question survey is listed next.

- Priorities for the Community (2 questions)
- Access to Goods, Services Public Transportation, and Jobs (13 questions)
- Health Related Questions (9 questions)
- Public Safety Questions (10 questions)

- Satisfaction with Aspects of My Neighborhood (16 questions)
- Trends in Quality in My Neighborhood (16 questions)
- In- and Out-migration (5 questions)
- Demographics (13 questions)

Description of the Sample (Responses)

Project Sample. A total of 1,597 completed surveys were obtained: 441 (28%) web surveys and 1,156 (72%) paper surveys. Total response rate was 5.3%. The 2018 sample has just under 300 responses fewer than from the 2015 survey (6.3% response rate).

Given the number of responses and the county population, the 95% confidence interval for a given response is +/- 2.4 percentage points. At the district level, the margin of error ranges from +/-5.5% in District 4 to +/- 9% in District 5.

Table 1.1 provides an overview of responses by commission district. Responses range from a low of 115 (7%) from District 5 to 320 (20%) in District 4. District 4 had 20% of total responses and 12% of county population. Response rates were lower from Districts 3, 5, and 8 with 9%, 7% and 8% of the sample, respectively, but with 12% to 14% of county population in each district. The sample was weighted (discussed in greater detail below) to account for the non-uniformity in response rates by district.

Table 1.1 Sample by District: Comparison to Adult Population* in Chatham County

Commission District	Respondents	% of Respondents	District Population	% of County Population
District 1	262	16%	33,991	11%
District 2	187	12%	36,011	12%
District 3	136	9%	36,066	12%
District 4	320	20%	35,171	12%
District 5	115	7%	37,719	13%
District 6	257	16%	35,517	12%
District 7	193	12%	39,545	13%
District 8	127	8%	41,947	14%

*Adult population was drawn from factfinder.census.gov and based on 2017 numbers. About 77% of the County population are 18 and older. Age demographics across districts are likely comparable to the age demographics of the county as a whole, according to SAGIS.

Sample Demographics. 15% of survey participants are between 18 and 34 years of age; 21% are between 35 and 49 years of age; 28% are between 50 and 64, and over 35% of the

sample are 65 years of age and older. The age distribution tracks closely with the 2015 sample with a slight shift of more 35-49 year-olds (from 18% to 21%) and fewer 50-64 year olds (from 31% to 28%).

Table 1.2 provides an overview of the sample demographics as compared to the U.S. Census Bureau statistics for Chatham County.

Table 1.2 Demographic Characteristics of Sample & Population of Chatham County

	% of Respondents 2015	% of Respondents 2018	Total N (2018)	% of Total Population (2018)
Age				
18-24	2%	3%	32,655	14%
25-34	13%	12%	48,272	21%
35-49	18%	21%	51,916	23%
50-64	31%	28%	52,959	23%
65-74	23%	22%	25,301	11%
75 and older	13%	14%	16,633	7%
Gender				
Male	35%	36%	107,684	47%
Female	63%	60%	120,052	53%
Not Provided	2%	3%	n/a	n/a
Race/Ethnicity				
Hispanic or Latino	1%	2%	19,122	7%
African American/Black	22%	19%	111,272	38%
Caucasian/White	69%	74%	139,804	48%
Native American	1%	1%	878	0.3%
Asian/Pacific Islander	1%	2%	10,960	4%
Biracial/Multiracial	2%	3%	7605	3%
Other	2%	2%	860	0.3%
Education				
Less than high school	1%	1%	22,482	12%
High school/GED	9%	5%	47,028	24%
Some college	17%	15%	45,478	23%
Job training/cert.	6%	6%	n/a	
Associate degree	7%	8%	16,238	8%
Bachelor degree	26%	32%	37,654	19%
Graduate/Prof. degree	31%	32%	26,201	13%
Type Residence				
Owner-occupied	80%	65%	157,787	57%
Rental housing	15%	29%	120,650	43%
Stay w/ family/friends	3%	5%	n/a	n/a

Table 1.2 continued

	% of Respondents 2015	% of Respondents 2018
Length of Residency in Chatham County		
Less than 5 years	15%	20%
5-10 years	15%	15%
11-15 years	9%	11%
16-20 years	8%	9%
21-30 years	13%	13%
31-50 years	19%	19%
51 years or more	19%	13%
Household Annual Income*		
Less than \$5,000	8%	8%
\$5,000-\$9,999	2%	2%
\$10,000-\$19,999	5%	4%
\$20,000-\$29,999	8%	6%
\$30,000-\$39,999	8%	9%
\$40,000-\$49,999	7%	9%
\$50,000-\$59,999	10%	9%
\$60,000-\$79,999	14%	14%
\$80,000-\$99,999	10%	13%
\$100,000 and above	24%	24%
Employment Status**		
Full-time job	46%	59%
Part-time (<30 hours weekly)	12%	14%
Retired	33%	18%
Not working	7%	8%

*Total household income in Chatham County less than \$10,000: 7.4%; \$100,000 and over: 23.1%.

**Population in Chatham County 16 and over employed: 59.4%; 4.2% unemployed; 35.5% not in labor force.

Source: 2017 American Community Survey 1-Year Estimates, Selected Economic Characteristics

About 55% of the respondents are females; 16% of respondents are African American/Black and 74% are White.¹ Only 29 respondents (1.8%) self-identified as Hispanic or Latino; 20 respondents (1.2%) self-identified as Asian/Pacific Islander. Thirty

¹Throughout this report, the terms “African American” or “Black” and “Caucasian” or “White” are used interchangeably, following Census guidelines. Further, “Caucasian” or “White” assumes the individuals are “non-Hispanic White.”

(1.8%) respondents identified their race as biracial or multiracial, and 32 (1.9%) selected the “Other” category. Three percent (51 individuals) of the sample did not answer this question. Both women and African Americans had a decreased response rate from the 2015 survey while White participation increased from 69% to 74%.

More respondents (64%) report having either a bachelor’s degree (32%) or graduate/professional degree (32%) in 2018 as compared to the 60% of respondents in 2015. Fewer live in owner-occupied housing, with 75% residing in their own home in 2018 compared to 80% in 2015, while 19% are in rental housing, and 3% report staying with family or friends.

Responses to the question, “How many years have you lived in total in Chatham County?” range from less than one to 96 years. About 30% have lived in the county ten years or less, while over 33% have lived in Chatham County for more than 30 years.

About 59% of the sample are employed full-time, 14% work part-time, 18% are retired, with another 8% reporting not working. About one-fourth of this sample report a total annual household income of \$100,000 or more, while 10% report an income of less than \$10,000. Overall, about 38% report annual income at less than \$50,000, and approximately 62% have total household income at \$50,000 or above. Eight percent did not answer this question. Compared to 2015 responses, there are fewer reporting income below \$10,000. Income reported above \$50,000 is similar in both samples.

Place of Employment. Respondents were also asked for the city within Chatham County or another county in which they work. Table 1.3 on the following page displays the cities where county residents work and the percentage of responses in each location. Responses are very similar across the 2015 and 2018 surveys.

The bulk of people report working in the city of Savannah, with Pooler cited as the next most frequent location of work. The percentage of respondents reporting Pooler, Garden City, and Bloomingdale each increased by approximately one percentage point while Savannah was cited by fewer respondents.

There is a one percentage point decline in the number of county residents reporting working outside of the county. Those who work outside the County report a variety of locations, with the most frequent locations being Liberty and Bryan County.

Table 1.3 Place of Employment

	2015 Responses	2018 Responses
SAVANNAH	77%	75%
POOLER	6%	7%
OUTSIDE CHATHAM COUNTY	7%	6%
GARDEN CITY	3%	4%
ELSEWHERE IN CHATHAM COUNTY	3%	3%
PORT WENTWORTH	1%	2%
THUNDERBOLT	2%	1%
TYBEE ISLAND	1%	1%
BLOOMINGDALE	0.3%	1%
VERNONBURG	0.1%	0.1%

Weighting Procedures. As noted in the previous discussion, 15% of survey participants are between 18 and 34; 18% are between 35 and 49; 31% are between 50 and 64, and over 35% are 65 years of age and older. Thus, compared to the age demographics of the adult population in Chatham County, younger participants are underrepresented, and respondents 50 and older are significantly overrepresented.

Thus, the data required weighting to achieve proportionate distributions by district and age within each district. Weighting is a technique in survey data analysis that attempts to reduce sampling bias by applying multipliers to individual cases to better align the sample with specific population parameters. Thus, the following results reported are based on the data weighted by district and age, as was the case for the 2015 survey.

The remaining sections of this report include an analysis of responses with results presented in nine sections:

II. The Big Picture: Challenges facing Chatham County

**III. Reasons for In-migration and
Planned Out-migration**

IV. Comparison of 2015 and 2018 Survey Responses

V. Neighborhood Satisfaction

VI. Public Safety

VII. Economic Independence

VIII. Health and Wellness

IX. Education

X. Comment Analysis

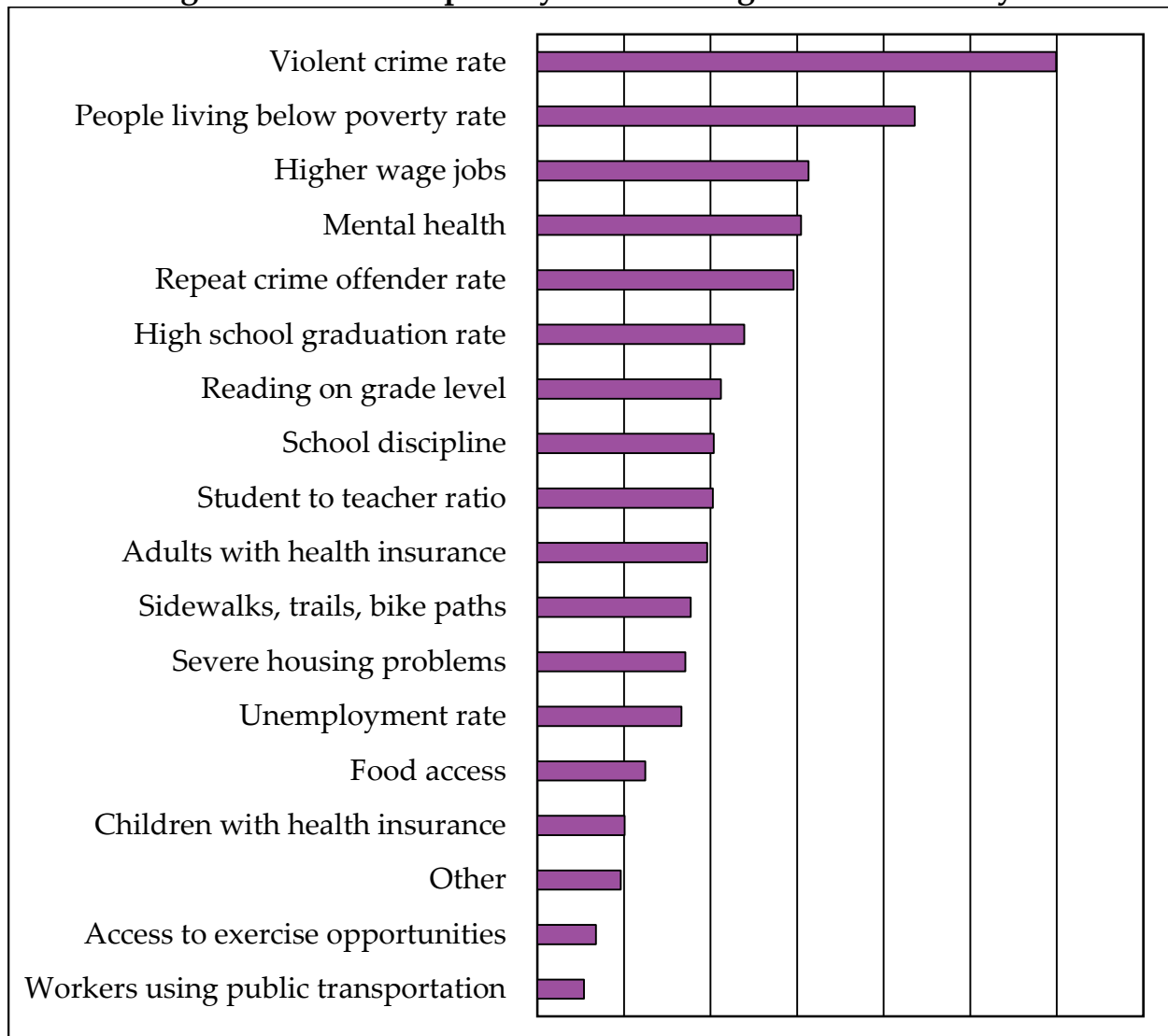
As well as reporting overall results in each section, cross-tabulation statistics are reported, where appropriate, across commission districts and by selected demographic characteristics such as age, race, and income. Trends in the quality of various aspects of life in Chatham County in the above areas are discussed in relevant sections.



II. The Big Picture: Challenges Facing Chatham County

Survey respondents were provided with 17 issues facing the community. Each participant was asked to select the top four issues community leaders should focus on improving. The overall responses for Chatham County indicate that participants view violent crime and human capital issues as being major priorities for community leaders to address going forward.

Figure 2.1 What are priority issues facing Chatham County?



Although violent crime is the most important issue to participants, four additional issues stood out. These include people living below poverty rate, higher wage jobs, mental health, and repeat crime offender rate. Three of these four issues could be linked to policies that support economic development and education/job training programs.

Community priorities are cross-tabulated by district and displayed in Table 2.1. Across each of the districts, violent crime rate and people living below poverty rate remained top-ranked priority issues. In contrast, access to exercise opportunities and workers using public transportation remained the lowest ranked priorities.

Table 2.1 Ranking of Priority Issues By District								
	District 1	District 2	District 3	District 4	District 5	District 6	District 7	District 8
Violent crime rate	1	1	1	1	1	1	1	1
People living below poverty rate	2	2	2	2	2	3	2	2
Higher wage jobs	8	3	3	4	3	4	6	3
Mental Health	4	4	4	5	4	5	3	6
Repeat crime offender rate	3	5	6	3	5	2	8	5
High school graduation rate	5	8	5	9	7	8	5	7
Reading on Grade level	7	11	10	6	8	10	4	10
School discipline	6	13	14	7	11	6	11	8
Student to teacher ratio	10	12	13	8	10	11	9	4
Adults with health insurance	11	7	9	13	9	7	10	12
Sidewalks, trails, bike paths	9	10	8	11	13	9	7	13
Severe housing problems	13	6	7	12	6	12	15	16
Unemployment Rate	12	9	11	10	12	15	14	9
Food access	16	14	12	16	14	14	18	11
Children with health insurance	15	16	17	14	15	13	12	18
Other	14	15	16	15	18	16	13	14
Access to exercise opportunities	17	18	15	17	16	17	16	15
Workers using public transportation	18	17	18	18	17	18	17	17

Across the other priority issues, a wide degree of variation is present in terms of which issues are ranked higher or lower. The priority issues with the widest variation in ranking across the districts include:

- Severe Housing Problems, highest ranked at 6 in District 2 and 5 and lowest ranked in District 8 at 16
- School Discipline: highest ranked at 6 in District 1 and 6 and lowest ranked in District 3 at 14
- Students to teacher ratio: highest ranked in District 8 at 4 and lowest ranked in District 3 at 13

Responses in the “Other” Category

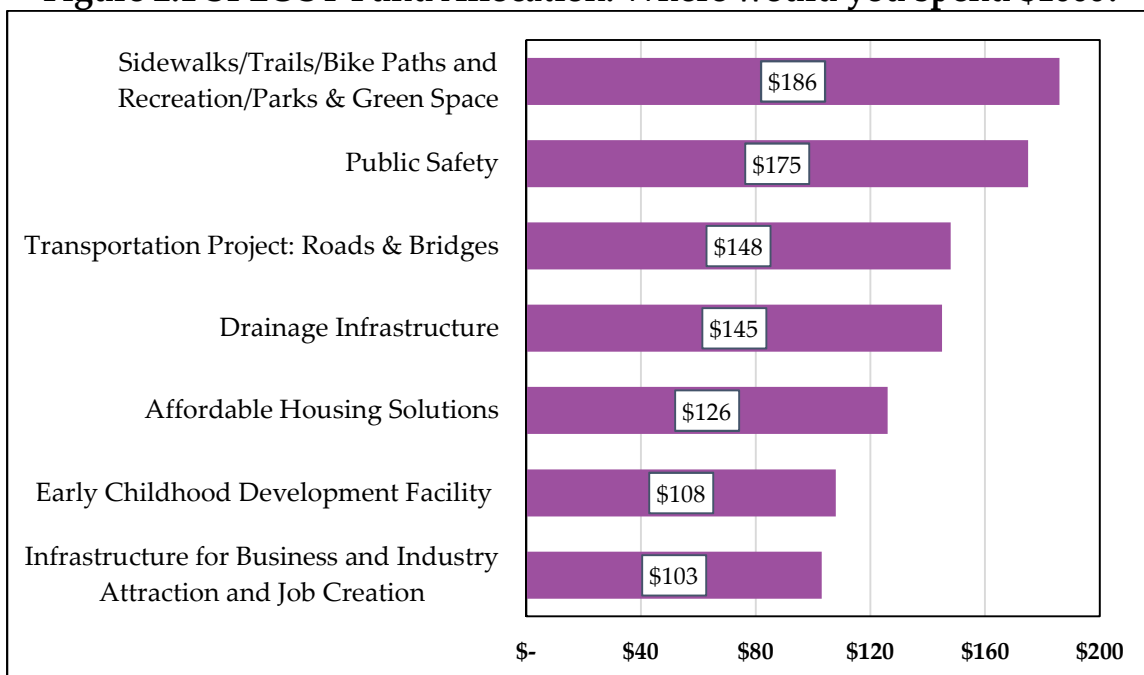
In addition to the 17 issues priority listed on the survey (and draw from the *Chatham Community Blueprint*), some participants chose to provide a response in the “other” category which ranked 15th overall. This open-ended question gave respondents the option to provide their write-in responses. In total, 183 participants answered “other” (11% of total responses). The percentages listed in the bullet points are solely linked to the participants that answered “other”. The open-ended responses were grouped into nine general categories. The nine categories are listed below along with several examples of the types of comments provided.

- **Transportation** (21%) example comments: repair roads, traffic is excessive, dangerous, senior transportation.
- **Government Reform** (18%) example comments: reduce taxes, reduce government spending, improve daily operations.
- **Social Issues** (12%) example comments: gun control, voting access, family planning issues.
- **Environmental Issues** (11%) example comments: cleaning up trash/litter, develop clean energy.
- **Economic/Workforce development** (10%) example comments: increase development, focus on tourism issues, improve community aesthetics, expand industry.
- **Education Issues** (10%) example comments: improving paths to technical careers, youth job training, adequate funding of public education.
- **Crime** (8%) example comments include: reducing speeding in neighborhoods, focus on robberies and break-ins, need for criminal justice reform.

Allocation of SPLOST Revenue

Another import “Big Picture” issue concerns setting priorities for the expenditure of Special Purpose Local Option Sales Tax (SPLOST) revenue. Survey respondents were asked how they would allocate \$1,000 of SPLOST revenue across eight functional categories. Respondents could allocate SPLOST funds across as many priorities as desired, subject to the constraint that the total allocation did not exceed \$1,000. Figure 2.1 depicts the dollar amount of allocation across the functional areas.

Figure 2.1 SPLOST Fund Allocation: Where would you spend \$1000?



A notable finding is that combined spending on recreational assets/green space and sidewalks/trails/bike paths garnered a larger level of funding support (\$186) than the top category of public safety (\$175). As indicated in Table 2.2 on the following page, SPLOST allocations to recreational assets and sidewalks/trails/bike paths ranges from a low of \$147 in District 5 to a high of \$241 in District 7. The combined allocation to these two categories exceeds the allocation to public safety in four of the eight districts (1, 4, 6, and 7).

Among single categories, public safety and transportation projects received the highest allocations of SPLOST funds from respondents. This is consistent with the results of the previous section in which the violent crime was cited as the most important priority issue facing the county.

The allocation of SPLOST funding was cross-tabulated by district to assess variance in preferences across the functional areas at the sub-county level. Table 2.2 shows that Public Safety is consistently received the largest SPLOST allocation regardless of district, with five districts (1, 2, 3, 5 and 8) having it with the highest funding level and three districts (4, 6 and 7) having it at the second highest level. In Districts 4, 6, and 7, Transportation Projects is listed as the highest priority.

Table 2.2 Where would you spend \$1000 of SPLOST funds? Results by District

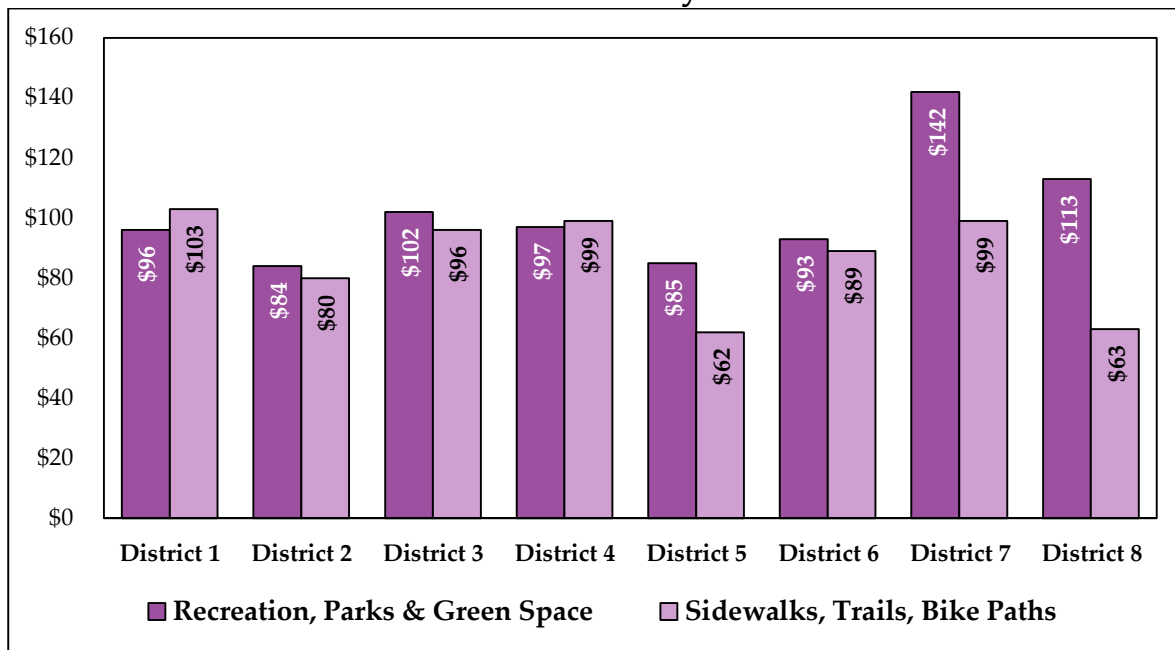
	District 1	District 2	District 3	District 4	District 5	District 6	District 7	District 8
Sidewalks, Trails, Bike Paths and Recreation, Parks & Green Space	\$199	\$164	\$198	\$196	\$147	\$182	\$241	\$176
Public Safety	\$179	\$186	\$206	\$173	\$173	\$158	\$155	\$183
Transportation Project: Roads & Bridges	\$140	\$107	\$121	\$206	\$118	\$170	\$159	\$173
Drainage Infrastructure	\$163	\$158	\$121	\$128	\$155	\$151	\$132	\$164
Affordable Housing Solutions	\$112	\$168	\$136	\$85	\$160	\$129	\$122	\$104
Early Childhood Development Facility	\$111	\$114	\$96	\$102	\$141	\$104	\$103	\$103
Business Infrastructure /Industry Attraction/Job Creation	\$96	\$104	\$122	\$111	\$106	\$108	\$86	\$98

Highlighted below are the differences between highest and lowest allocation at the district level. This difference represents the degree of variation in the intensity of county resident preferences for various project types by district. The widest differences in preference intensity is registered for transportation projects. The lowest range of differences in preferences, signifying the most consistency in responses, is for sidewalks/trails/bike paths.

- Public Safety: \$51 difference high to low
- Transportation Projects: Roads & Bridges: \$99 difference high to low
- Drainage Infrastructure: \$43 difference high to low
- Affordable Housing Solutions: \$83 difference high to low
- Early Childhood Development Facility: \$45 difference high to low
- Business Infrastructure/Industry Attraction/Job Creation: \$36 difference high to low
- Recreation, Parks & Green Space: \$58 difference high to low
- Sidewalks, Trails, Bike Paths: \$41 difference high to low

The combined responses for sidewalks/trails/bike paths and recreation/parks & green space was split into two categories, one focusing on pathways and the other focusing on recreation/greenspace assets. District 7 was most supportive of recreation, parks and green space spending and District 1 was the most in favor of sidewalks, trails, and bike paths.

Figure 2.2 Recreation/Green Space and Pathway Allocations of SPLOST Funds by District

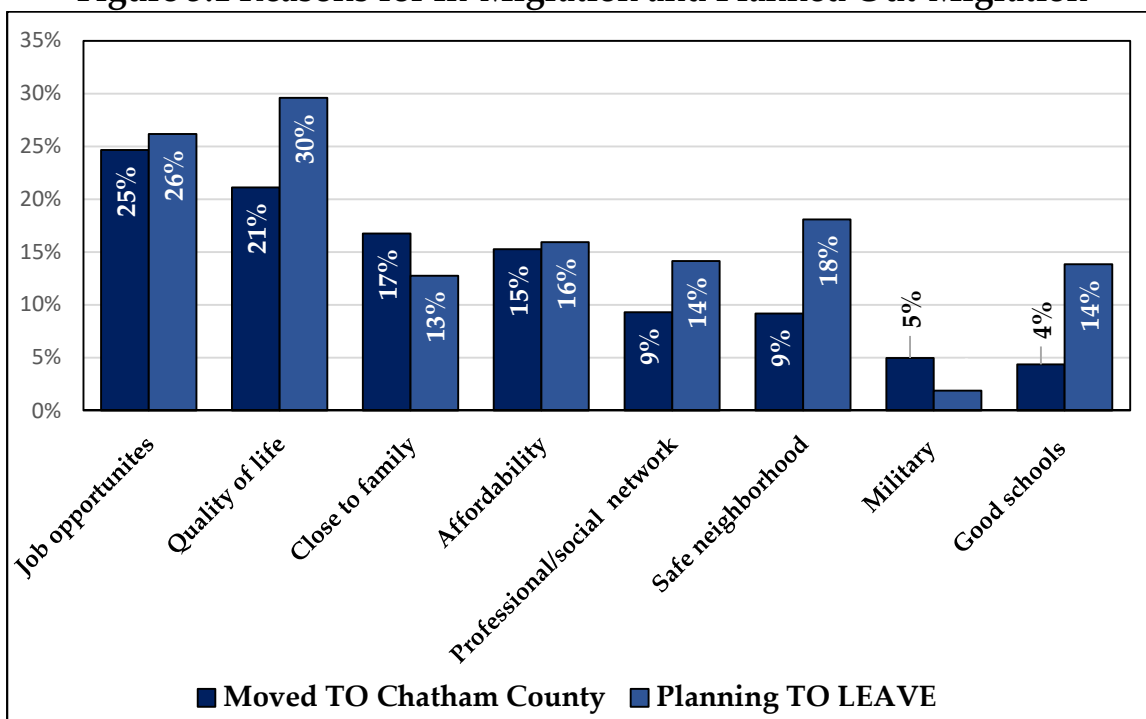




III. Reasons for In-migration and Planned Out-migration

To assess the reasons for in-migration and planned out-migration from Chatham County, respondents were asked about the reasons they chose to move to Chatham County and, if there were plans to leave in the next five years, why residents were considering leaving the county. A total of 33% of respondents noted they had moved to the county in the past five years, while 34% had plans to leave during the next five years. The reason most frequently cited reason for in-migration was job opportunities, while quality of life was most often reason cited for out-migration.

Figure 3.1 Reasons for In-Migration and Planned Out-Migration

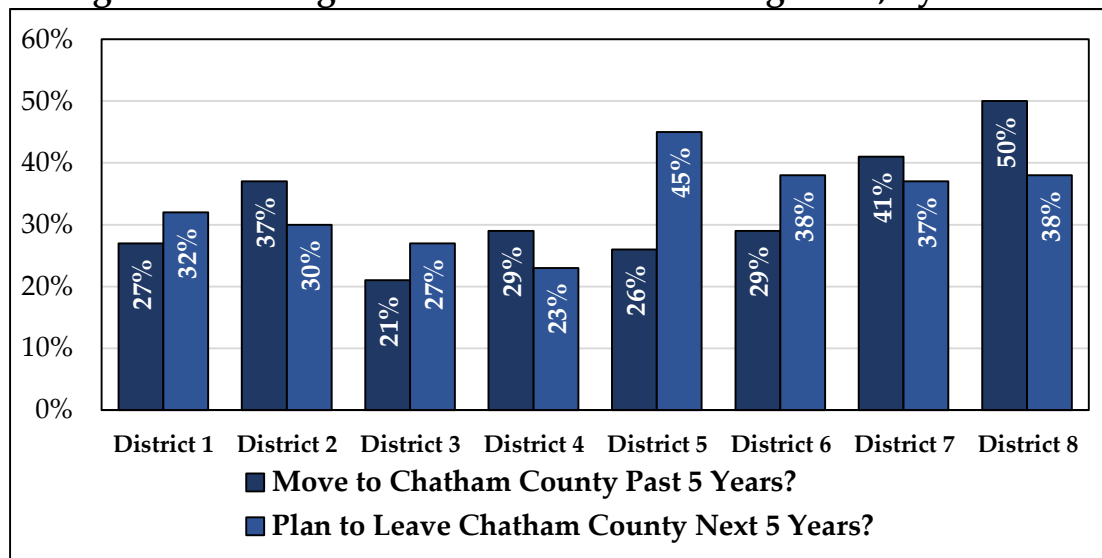


A notable finding is that job opportunities and quality of life are the most frequent reasons cited for in-migration and out-migration. Beyond these categories, being close to family and affordability are among the more important attractors for people moving to the county. Among repellants, safety of neighborhoods plays a role, while there is little variability across responses for affordability, networks, schools, and closeness to family.

Notable differences of migration behavior and reasons for migration appear when results are cross-tabulated by district. Figure 3.2 depicts a flow of population in and out of the

county at the district level. District 8 is the most transient district, while District 3 and 4 have the least transient population.

Figure 3.2 In-Migration and Planned Out-Migration, by District



Reasons for in-migration and planned out-migration by district are provided in Table 3.1. District 8, 7, and 2 (descending order) reported the largest proportion of survey respondents that moved into the district during the past five years. With respect to out-migration, District 5, 8, 6, and 7 (descending order) had the largest proportion of people who are planning to leave during the next five years. District 4 residents are least likely to report planning to leave.

The reason for moving varied by district. For example, in District 8, affordability is the most frequently cited reason people moved to the district, while the most cited reason for planned departure is quality of life. In District 2 and 4, the most common reason for planned departure and in-migration is quality of life. Job opportunities is cited as the most common reason for in-migration and planned out-migration in District 7.

Moving for good schools is rated the lowest (excluding military-related reasons) reason for in-migration in all districts except District 4, where it is the fourth-most cited reason for moving. Although schools are not highly cited as a reason to move to the area, schools are not frequently cited as a reason for out-migration, generally rating as the third or fourth-most cited reason for out-migration behind quality of life, job opportunities and sometimes affordability.

Table 3.1 Reasons for In-Migration and Out-Migration Ranked by District								
	District 1	District 2	District 3	District 4	District 5	District 6	District 7	District 8
Job opportunities								
In-Migration	1	3	1	2	2	1	1	2
Out-Migration	3	2	2	2	1	3	1	2
Quality of Life								
In-Migration	3	1	2	1	6	3	2	3
Out-Migration	1	1	1	1	2	1	4	1
Close to Family								
In-Migration	2	4	4	5	1	2	3	5
Out-Migration	7	7	5	7	5	7	3	5
Affordability								
In-Migration	4	2	3	4	5	5	7	1
Out-Migration	6	4	6	3	3	2	6	6
Professional/Social Network								
In-Migration	6	6	5	6	3	7	6	6
Out-Migration	2	6	7	6	6	6	2	3
Safe Neighborhood								
In-Migration	5	5	6	3	7	6	5	4
Out-Migration	4	3	3	4	4	4	7	4
Military								
In-Migration	8	8	7	7	8	4	4	7
Out-Migration	8	8	8	8	8	8	8	8
Good Schools								
In-Migration	7	7	7	8	4	8	8	7
Out-Migration	5	5	4	5	7	5	5	7

In addition to these listed factors, the survey also provided the opportunity to provide “Other” reasons for in-migration and out-migration. The other reasons for in-migration include:

- Location/Personal: 40%
- Career/Training: 26%
- Weather: 17%
- Retirement: 17%

Please note that percentages listed pertain to the percentage of respondents who replied in the “other” category for this question. For example, of the total number of respondents who offered a different reason for moving to Chatham County, weather was cited by 17%.

Five “other” reasons cited for planned out-migration include:

- Location/Personal: 39%
- Government/Taxes: 36%
- Retiring out of Chatham County: 13%
- Career Move: 7%
- Crime: 5%

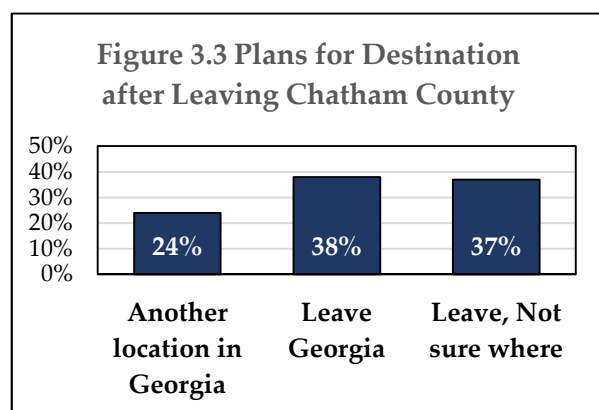
There are notable differences in the top four reasons for in-migration when cross-tabulated by age. Younger respondents (under 50) primarily cite job opportunities as the motivating reason for in-migration, while quality of life and being close to family primarily motivate in-migration for respondents of 50 years or more in age.

- Age 18-34: 36% Job Opportunities, 14% Quality of Life, 12% Professional/Social Network, while Affordability and Military are tied at 10%.
- Age 35-49: 27% Job Opportunities, 18% Quality of Life, 15% Close to Family, and 12% Affordability
- Age 50-64: 29% Quality of Life, tie at 18% between Close to Family and Affordability, and Job Opportunities
- Age 65 plus: 42% Close to Family, 33% Quality of Life, 29% Affordability, and 28% Safe Neighborhood

Respondents planning to leave Chatham County in the next five years are doing so to increase their quality of life or to pursue job opportunities. The top four reasons for out-migration cross-tabulated by age are as follows:

- Age 18-34: 34% Job Opportunities, 25% Quality of Life, 19% Good Schools, and 18% Professional/Social Network
- Age 35-49: Tied at 36% are Job opportunities and Quality of Life, 26% Safe Neighborhood, and 23% Good Schools
- Age 50-64: 34% quality of life, 22% Safe Neighborhood, 19% Affordability, and 16% Job Opportunities
- Age 65 plus: 26% quality of life, 24% Close to Family, 18% Affordability, and 13% Safe Neighborhood

The final question in this section focused on where respondents were planning to go when they leave Chatham County. Overall, 38% are planning to leave Georgia altogether, while 37% are not sure where they are going. Twenty-four percent plan to stay in Georgia after leaving Chatham County. See Figure 3.3.



As compared to the overall responses for the county, a higher proportion of respondents aged 35-49 plan to leave Georgia, while a lower proportion of those over age 65 plan to leave the state. However, nearly half of those aged 65 and over who planned to leave are not sure of their next destination.

Table 3.2 Plans for Destination After Leaving Chatham County by Age

	18-34	35-49	50-64	65 +
Another location in Georgia	24%	20%	30%	26%
Leave Georgia	38%	44%	39%	26%
Leave, Not sure where	38%	36%	31%	48%

With respect to the district level, District 1 residents are the most decisive about their next destination. Forty percent plan to stay in Georgia, which is nearly ten percentage points higher than the next two districts with residents considering Georgia as their next destination. With the exception of District 5 and 6, those with definite destinations in mind are more likely to be leaving Georgia than to relocate to another Georgia destination.

Table 3.3 Plans for Destination After Leaving Chatham County by District

	District 1	District 2	District 3	District 4	District 5	District 6	District 7	District 8
Another location in Georgia	40%	25%	23%	23%	30%	32%	14%	20%
Leave Georgia	58%	47%	28%	39%	24%	26%	55%	44%
Leave, Not sure where	2%	28%	49%	37%	46%	42%	31%	36%



IV. Comparison of 2015 and 2018 Survey Responses

A comparison of survey responses from county-wide survey in 2015 and 2018 was performed. Overall, many of the responses showed only modest difference between these two surveys. Cases highlighted below have a variance in response rate of ten percentage points or more. Given this baseline for difference, there are some notable changes in responses to survey questions in 2018 as compared to 2015.

For the following questions, the change was a notable increase in positive sentiment.

- Q8: “There are job opportunities available that match my skills” increased by 12% in strongly agree and agree categories.
- Q50: “Satisfaction with Aspects of My Neighborhood - Public Transportation” (CAT bus, trolley, ferry, bike system) increased by 17% in strongly agree & agree and a 21% decrease in not applicable/don’t know.
- Q6: “It would benefit me if CAT bus routes were changed for better access to jobs” increased by 12 percent in strongly disagree & disagree and increased 14% in neutral sentiment.
- Q67: Improving “Trend in Public Transportation Quality” increased from 5% in 2015 to 17% in 2018.
- Q68: Improving “Trend in Medical Services (treatment, medicine)” increased from 9% in 2015 to 27% in 2018.
- Q71: Improving “Trend in Overall Quality of Life” increased from 12% in 2015 to 44% in 2018.

These changes in sentiment mean that more residents in Chatham County reported better job matches and improved satisfaction with most aspects of public transportation. Further, improving trends were also cited for public transportation, medical services, and notably, overall quality of life.

Satisfaction with public transportation does vary and increase by age with people aged 18-34 being the least satisfied (49%), while persons 65 and over are the most satisfied (63%).

One notable case in which the change is an increase in negative sentiment was:

- Q60: “Trends in Quality in My Neighborhood – Public Safety” responses indicating sentiment is becoming slightly or much worse increased by 11%.

Sentiment that public safety is trending worse results from respondents shifting from the neutral category toward a negative view. Neutral responses declined to 41% in 2018 from 49% in 2015. The percentage of respondents reporting improving trends in neighborhood public safety declined slightly, from 31% in 2015 to 29% in 2018.

Presented in the remainder of this section are the core questions deployed in the survey from both 2015 and 2018. Notable highlights are highlighted below each table.

Table 4.1 Access to Goods, Services, Public Transportation, and Jobs					
	Year	Strongly Agree & Agree	Neutral	Strongly Disagree & Disagree	N/A, DK
3. My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	2018	87%	4%	10%	0%
	2015	88%	4%	8%	0%
4. My neighborhood is conveniently located near recreational facilities and activities.	2018	67%	13%	19%	1%
	2015	71%	12%	15%	1%
5. My neighborhood is conveniently located near CAT bus routes.	2018	69%	7%	13%	11%
	2015	64%	7%	13%	16%
6. It would benefit me if CAT bus routes were changed for better access to jobs.	2018	19%	26%	22%	34%
	2015	17%	12%	10%	60%
8. There are job opportunities available that match my skills.	2018	63%	14%	12%	11%
	2015	51%	16%	16%	17%
10. I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	2018	56%	14%	10%	20%
	2015	57%	11%	10%	22%
11. I spend 1/3 or more of my budget on housing (mortgage or rent).	2018	57%	7%	32%	5%
	2015	53%	8%	32%	7%
12 I live paycheck to paycheck at my current job.	2018	41%	13%	38%	9%
	2015	42%	12%	36%	11%

Highlights from Table 4.1 include:

- Satisfaction with access to recreational facilities declined to 67% from 71% in 2015.
- Satisfaction with access to CAT bus routes increased to 69% from 64%.
- In 2018, approximately 63% of respondents indicated there are job opportunities matching their skills, up from 51% in 2015.
- There is little change in the proportion of respondents saying they spend more than 1/3 of their income on housing or that live paycheck to paycheck.

Table 4.2 Health-Related Questions				
	Year	Yes	No	N/A, DK
17. I eat five cups of fruits and/or vegetables daily.	2018	35%	63%	1%
	2015	36%	63%	1%
18. I exercise regularly (at least 30 minutes 5 times a week).	2018	49%	50%	1%
	2015	46%	55%	0%
19. I or someone in my household currently smokes cigarettes.	2018	14%	85%	1%
	2015	17%	79%	4%
20. I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	2018	17%	81%	2%
	2015	17%	79%	4%
21. I or someone in my household has diabetes.	2018	14%	85%	1%
	2015	16%	78%	6%
22. I or someone in my household has high blood pressure.	2018	32%	67%	1%
	2015	34%	62%	4%
23. I or someone in my household has cancer.	2018	6%	93%	2%
	2015	6%	87%	8%
24. I have a family doctor I see for routine care.	2018	75%	24%	1%
	2015	76%	24%	0%

Highlights from Table 4.2 include:

- Modest improvement in healthy behavior occurred with respect to participation in frequent exercise (49% in 2018, up from 46% in 2015) and reduced smoking (decline to 14% from 17%).
- The proportion of respondents reporting regular consumption of fruits or vegetables remained the same between 2015 and 2018.
- Reporting of chronic medical conditions declined two percentage points for diabetes (down to 14% from 16%) and high blood pressure (down to 32% from 34%).
- The proportion of respondents reporting that they have a family doctor they see for routine care remained roughly the same at 75%.

Table 4.5 Public Safety Questions					
	Year	Strongly Agree & Agree	Neutral	Strongly Disagree & Disagree	N/A, DK
27. My neighborhood is mostly free of property crime (break-ins/ stealing).	2018	56%	12%	30%	2%
	2015	55%	14%	29%	2%
28. My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	2018	74%	7%	16%	4%
	2015	72%	10%	16%	3%
29. The police care about the needs of my neighborhood.	2018	60%	21%	13%	6%
	2015	55%	25%	13%	7%
30. My neighborhood is mostly free of alcohol-related problems.	2018	53%	14%	15%	19%
	2015	56%	15%	14%	15%
31. My neighborhood is mostly free of unlawful drugs.	2018	46%	12%	22%	20%
	2015	49%	14%	23%	14%
32. I know my neighbors and have friends in the neighborhood.	2018	66%	16%	17%	1%
	2015	70%	17%	13%	1%
33. People in my neighborhood are willing to help each other.	2018	68%	19%	8%	6%
	2015	68%	21%	8%	4%
34. Juvenile crime is a problem in my neighborhood.	2018	21%	20%	43%	17%
	2015	20%	19%	48%	14%
35. I feel safe on the CAT bus.	2018	15%	16%	8%	62%
	2015	14%	9%	6%	71%
36. There are homeless people who live in my neighborhood.	2018	17%	6%	56%	21%
	2015	14%	5%	58%	23%

In Table 4.5, notable findings include:

- 5% more respondents in 2018 than in 2015 said they felt the police department cares about the needs of their neighborhood.
- Participants' views on crime are little changed between 2015 and 2018, although there is a three percentage point decline the number of responses with positive sentiment about problems with unlawful drugs in their neighborhood.
- There was a four percentage point decline among respondents indicating they know their neighbors and have friends in the neighborhood.
- 3% more respondents (17%) reported that homeless people live in their neighborhood, as compared to 14% reported in 2015.

Table 4.6 Satisfaction with Aspects of My Neighborhood					
	Year	Strongly Agree & Agree	Neutral	Strongly Disagree & Disagree	N/A, DK
38. Pre-K/Early Childcare	2018	18%	10%	8%	63%
	2015	22%	9%	7%	62%
39. My child's Public Elementary School	2018	17%	7%	10%	66%
	2015	19%	8%	9%	64%
40. My child's Public Middle School	2018	10%	7%	13%	69%
	2015	12%	8%	11%	68%
41. My child's Public High School	2018	10%	7%	15%	68%
	2015	12%	7%	13%	68%
43. Public Safety	2018	51%	26%	18%	5%
	2015	56%	21%	19%	5%
44. Race Relations	2018	43%	28%	21%	8%
	2015	48%	25%	20%	8%
50. Public Transportation (CAT bus, trolley, ferry, bike system)	2018	36%	18%	12%	32%
	2015	20%	16%	11%	53%
51. Medical Services (treatment, medicine)	2018	56%	18%	15%	11%
	2015	64%	19%	12%	5%
54. Overall Quality of Life	2018	75%	16%	7%	1%
	2015	77%	15%	7%	1%

Highlights from Table 4.6 include:

- Positive sentiment about satisfaction with public schools declined two percentage points for elementary, middle, and high schools.
- Satisfaction with Pre-K and early childcare declined four percentage points.
- Satisfaction with public safety declined to 51% from 56%.
- Five percentage points fewer respondents (to 43% from 48%) indicated satisfaction with race relations.
- Satisfaction with broadly defined public transportation increased 16 percentage points to 36% from 20%.
- Satisfaction with medical services declined to 56% from 64%.
- Satisfaction with overall quality of life declined two percentage points to 75% from 77%.

Table 4.7 Trend in Quality in My Neighborhood					
	Year	Getting Much or Slightly Better	Not Changing	Getting Much or Slightly Worse	N/A, DK
56. My child's Public Elementary School	2018	10%	13%	8%	69%
	2015	12%	11%	8%	69%
57. My child's Public Middle School	2018	7%	13%	8%	72%
	2015	8%	9%	8%	75%
58. My child's Public High School	2018	7%	13%	9%	72%
	2015	9%	8%	9%	74%
60. Public Safety	2018	29%	41%	18%	12%
	2015	31%	49%	7%	13%
67. Public Transportation (CAT bus, trolley, ferry, bike system)	2018	17%	37%	5%	40%
	2015	5%	34%	17%	44%
68. Medical Services (treatment, medicine)	2018	27%	43%	10%	19%
	2015	9%	51%	30%	10%
71. Overall Quality of Life	2018	44%	40%	8%	7%
	2015	12%	44%	39%	5%

Highlights from Table 4.7 include:

- There is a modest decline in the proportion of respondents indicating their child's public school (at all levels) is improving.
- Two percentage points fewer (to 29% from 31%) of respondents report improving trend in public safety.
- A substantial increase is found among respondents reporting improving trend in broadly defined public transportation (+12%, rising to 17% from 5%).
- A substantial increase in those reporting improving trend in medical services occurred from 2015 (9%) to (27%).
- In 2018, over three times the proportion of respondents as compared to 2015 reported improving quality of life. Satisfaction with quality of life trend increased to 44% from 12%



V. Neighborhood Satisfaction

Several questions in the survey are related to neighborhood access to goods, services, and public transportation; in other words, how convenient are neighborhoods in Chatham County to access those necessary services and services that enhance quality of life?

First, respondents were asked whether they strongly agreed, agree, were neutral, disagreed, or strongly disagreed with the following statements:

- ❖ My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).
- ❖ My neighborhood is conveniently located near recreational facilities and activities.
- ❖ My neighborhood is conveniently located near CAT bus routes.
- ❖ I have internet access.

Respondents were also asked about satisfaction with food options, recreational opportunities, public transportation, and safety on the CAT bus.

Almost 90% of Chatham County residents agree that they have access to grocery stores with healthy food choices; in fact, 60% “strongly agree” with this statement. When asked about satisfaction with food options, 68% of residents are “very satisfied/satisfied,” and only 12% “strongly disagree/disagree,” with 16% answering “neutral” to this question. These results indicate a slightly lower rate of satisfaction to 69% from 71% in 2015.

Respondents were also asked where they buy most of their food: over 95% identified grocery stores as where they buy most of their food, although residents have access to multiple options as shown in Table 5.1 below.

Table 5.1 Food Sources for Chatham County Residents

Where Do You Buy Most of Your Food? (check all that apply)	% Using these Sources
Grocery Store	95%
Discount Store (Dollar Store, Big Lots, etc.)	8%
Farmer’s Market	8%
Fast Food/Takeout	7%
Convenience Store	2%
Other written-in sources:	
Sam’s Club/Wal-Mart/Target/Walgreens	2%
Military Commissaries	1%
Food co-ops, personal gardens, health food stores	1%

Sixty-seven percent of residents responding in 2018 say their neighborhoods are conveniently located near recreational facilities and activities, while 19% disagree/strongly disagree. The positive response declined from 71% in 2015, while the disagree total increased 3 percentage points from 2015 to 2018.

In the 2018 survey, 37% of Chatham County residents say they are very satisfied/satisfied with recreation for adults, while 27% strongly disagree/disagree, with another 19% answering “neutral.” Only 33% of residents are very satisfied/satisfied with recreational opportunities for youth; 23% disagree/strongly disagree. This is a drop from the 57% of residents who reported very satisfied/satisfied with recreational opportunities in 2015.

Sixty-seven percent of residents state their neighborhoods are conveniently located near CAT bus routes, with 15% disagreeing, and 7% selecting the “Neutral” response. Responding to whether they would benefit from a change in CAT routes to better access jobs, 19% in 2018 versus 17% in 2015 strongly agreed/agreed, but many more (22% versus 10%) disagreed/strongly disagreed.

Most residents (62%) answered “N/A or Don’t Know” to the question regarding bus safety, with 14% saying that they feel safe, 15% responding neutral, and 8% reporting that they do not feel safe. Overall, satisfaction with Public Transportation improved notably from 2015 to 2018, with 36% satisfied/very satisfied (up from 20%) while 12% are dissatisfied.

Table 5.2 Convenience of Neighborhoods to Healthy Food Choices, Recreational Activities, and Public Transportation

My neighborhood is conveniently located near:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A or D/K
A grocery store w/healthy food choices	60%	26%	4%	5%	4%	0%
Recreational facilities and activities	35%	31%	13%	12%	7%	1%
CAT bus routes	37%	30%	7%	7%	8%	11%
Would benefit if CAT bus routes were changed for better access to jobs	9%	10%	25%	11%	11%	33%
I feel safe on the CAT bus.	5%	9%	15%	5%	3%	62%
Percent Satisfied with:	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A or D/K
Public Transportation	9%	27%	18%	7%	5%	32%
Recreational Opportunities for Adults	8%	29%	19%	19%	8%	14%
Recreational Opportunities for Youth	7%	26%	16%	16%	7%	27%
Healthy Food Options	22%	46%	15%	8%	4%	3%
I have internet access	75%	17%	2%	2%	2%	1

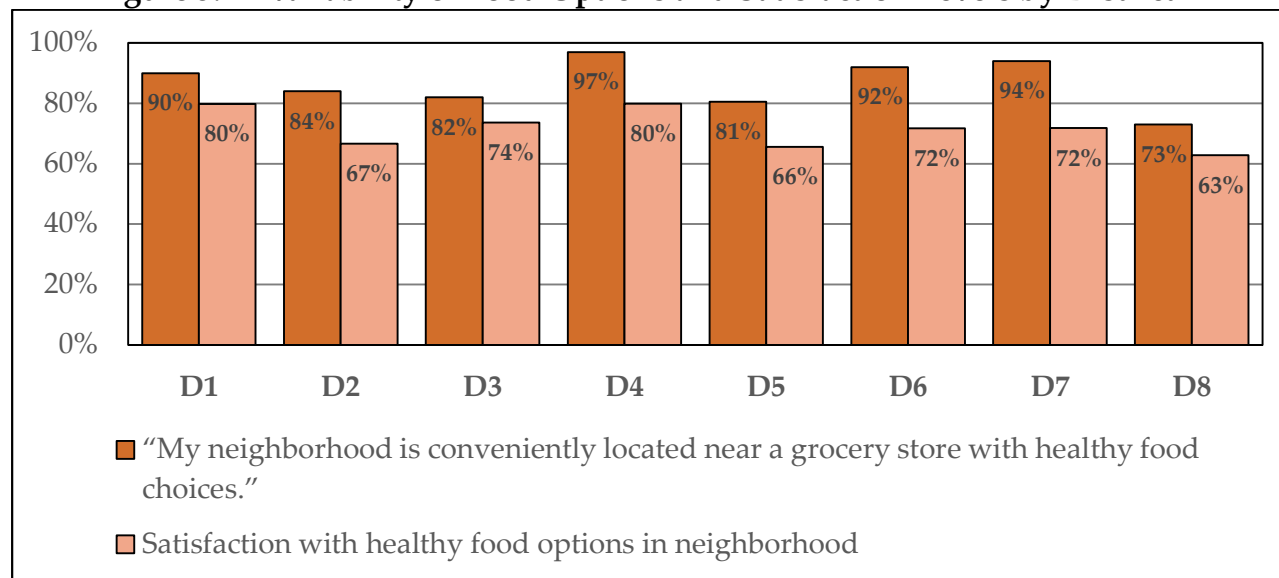
Neighborhood Convenience/Satisfaction by District, Age, and Race: Grocery Stores with Healthy Food Choices

For analysis of the responses to questions about neighborhood access to grocery stores with healthy food choices, recreational facilities, and bus routes by district, age, and race, “strongly agree” and “agree” responses were combined, as were “strongly disagree” and “disagree.” The “N/A/Don’t Know” category was eliminated, but “neutral” was included. The same approach was applied to the measures of satisfaction.

Regarding access to grocery stores with healthy food choices, District 8 residents are different in their responses compared to all other districts and less likely to agree they have such access. As the figure below shows, access to grocery stores with healthy food choices ranges from highs of 97% in District 4 and 94% in District 7 to a low of 73% in District 8.

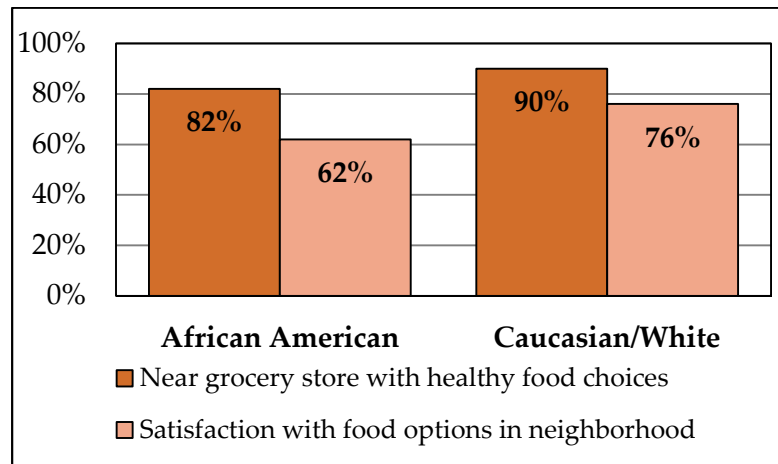
When asked about satisfaction with food options, a similar pattern is present in the responses. Districts 2, 5, and 8 are less satisfied, reporting 64%, 62% and 60%, respectively. District 4 has the highest level of satisfaction at 80%.

Figure 5.1 Availability of Food Options and Satisfaction Levels by District



African American residents are less likely to have convenient access to grocery stores with healthy food choices (82% compared to 90% of Caucasian residents). Likewise, satisfaction levels are lower among African Americans (62% compared to 76% of Caucasian residents).

Figure 5.2 Availability of Food Options and Satisfaction Levels by Race



There are minor age differences with the two younger age groups reporting more access to grocery stores with healthy food choices. However, residents 65+ are more satisfied with food options than residents under 35, as shown in Table 5.3.

Table 5.3 Grocery Store Convenience and Satisfaction by Race and Age

Near grocery store with healthy food choices	African American	White	18-34	35-49	50-64	65 and older
Strongly Agree/Agree	81%	90%	87%	89%	84%	84%
Neutral	1%	4%	5%	1%	4%	6%
Strongly Disagree/Disagree	18%	6%	8%	10%	11%	10%
Satisfaction with food options in neighborhood:						
Very Satisfied/Satisfied	62%	74%	68%	74%	70%	80%
Neutral	20%	14%	18%	13%	19%	13%
Very Dissatisfied/Dissatisfied	13%	10%	15%	13%	11%	7%

Neighborhood Convenience/Satisfaction by District, Age, and Race: Recreational Facilities and Activities

District 5, 6, and 8 residents are more likely to disagree that their neighborhoods are conveniently located near recreational facilities and activities. Access to recreational facilities/activities ranges from a high of 87% in District 4 to a low of 56% in District 5. District 4 is also higher in terms of satisfaction with recreational opportunities for youth 78%, compared to only 53% of District 2, about 35% of Districts 7 and 6, one fourth of Districts 2, 3, and 6, and only 22% of District 5 residents are satisfied with recreational opportunities for youth in their neighborhoods. Satisfaction with recreational opportunities for adults is generally higher than for youth, with District 4 most satisfied at 73% and District 5 least satisfied at 28%.

Figure 5.3 Access to Recreational Facilities by District

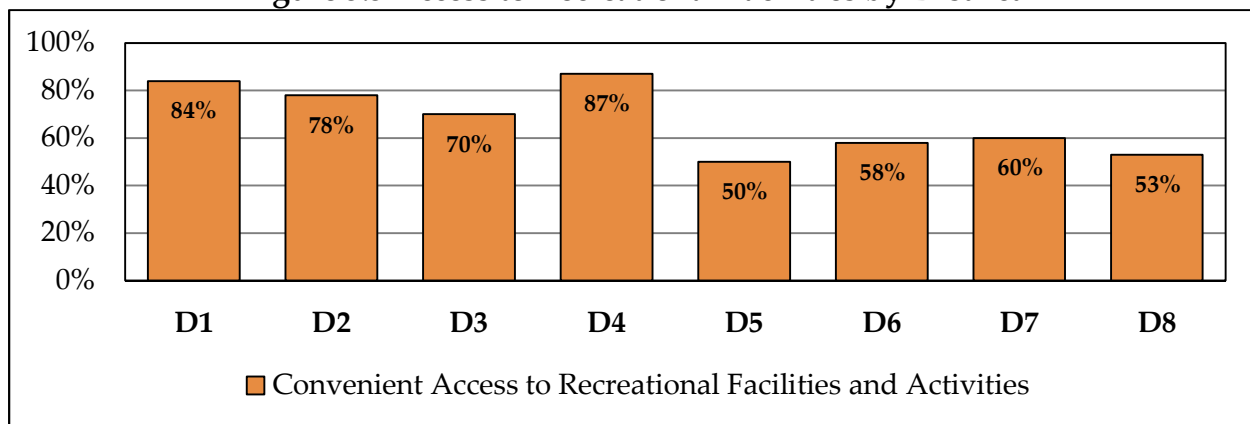
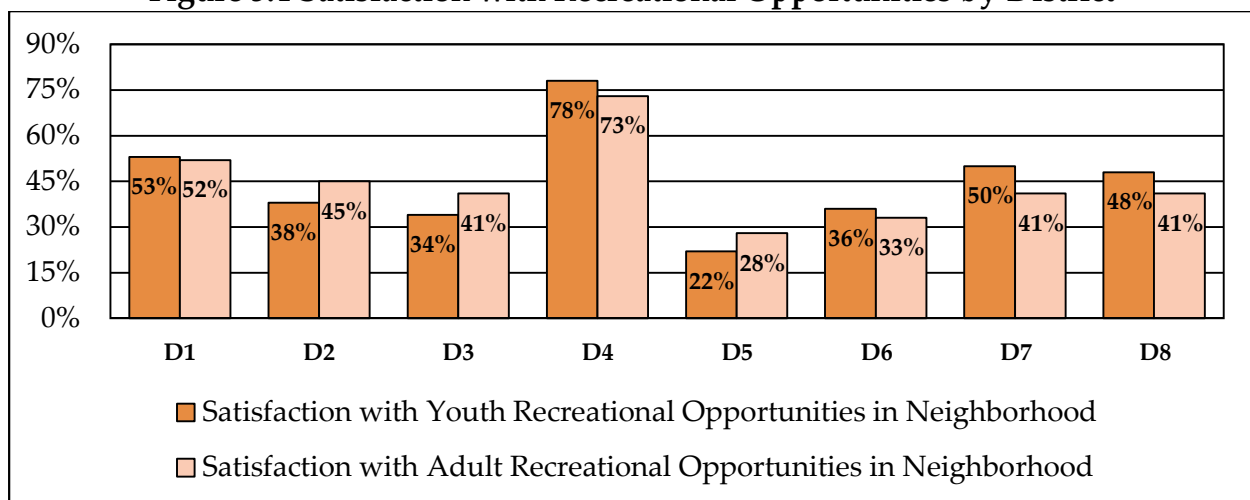


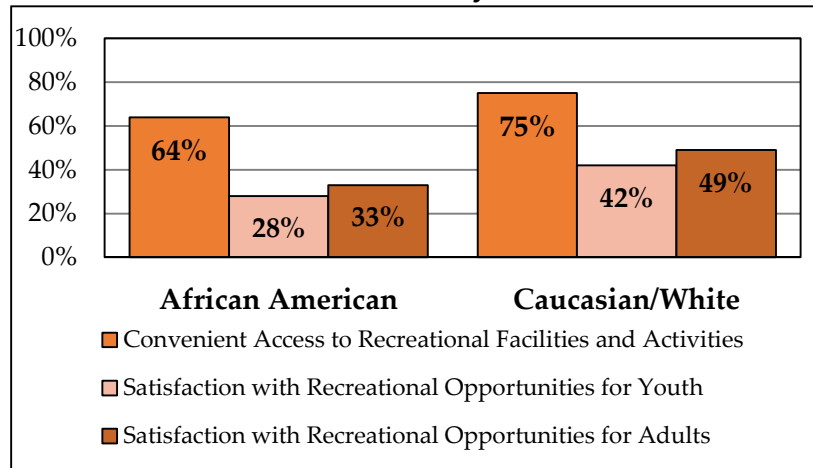
Figure 5.4 Satisfaction with Recreational Opportunities by District



Black residents are somewhat more likely to disagree that their neighborhoods are conveniently located near recreational facilities and activities compared to White residents (64% compared to 75%).

Fewer Black residents express satisfaction with recreation opportunities for youth or adults, 28% and 33%, respectively, compared to 42% and 49% of White residents satisfied with recreational opportunities for youth and adults.

Figure 5.5 Recreational Facilities Access and Satisfaction by Race



Regarding access to recreational activities, residents age 35-49 are more satisfied than other age groups. Satisfaction with youth and adult recreational opportunities were found to be more satisfactory for older residents. See Table 5.4.

Table 5.4 Access to Recreational Facilities/Activities and Satisfaction by Race and Age

Convenient Access to Recreational Facilities and Activities	African American	White	18-34	35-49	50-64	65 and older
Strongly Agree/Agree	65%	69%	64%	72%	69%	67%
Neutral	16%	14%	14%	10%	13%	16%
Strongly Disagree/Disagree	19%	16%	22%	18%	18%	16%
Satisfaction with YOUTH Recreational Opportunities in Neighborhood						
Very Satisfied/Satisfied	35%	48%	41%	47%	47%	48%
Neutral	32%	23%	22%	20%	23%	24%
Very Dissatisfied/Dissatisfied	11%	30%	37%	33%	30%	28%
Satisfaction with ADULT Recreational Opportunities in Neighborhood						
Very Satisfied/Satisfied	24%	48%	40%	43%	47%	54%
Neutral	44%	23%	19%	23%	26%	28%
Very Dissatisfied/Dissatisfied	11%	29%	41%	34%	27%	19%

Public Transportation Measures by District, Age, and Race

Opinions regarding access and other issues related to public transportation in Chatham County vary widely among residents by district. District 3 and 5 residents generally have positive opinion about access to CAT bus routes, over 87%. District 7 has the lowest perception of access: only 37% agree that CAT bus routes are conveniently accessible.

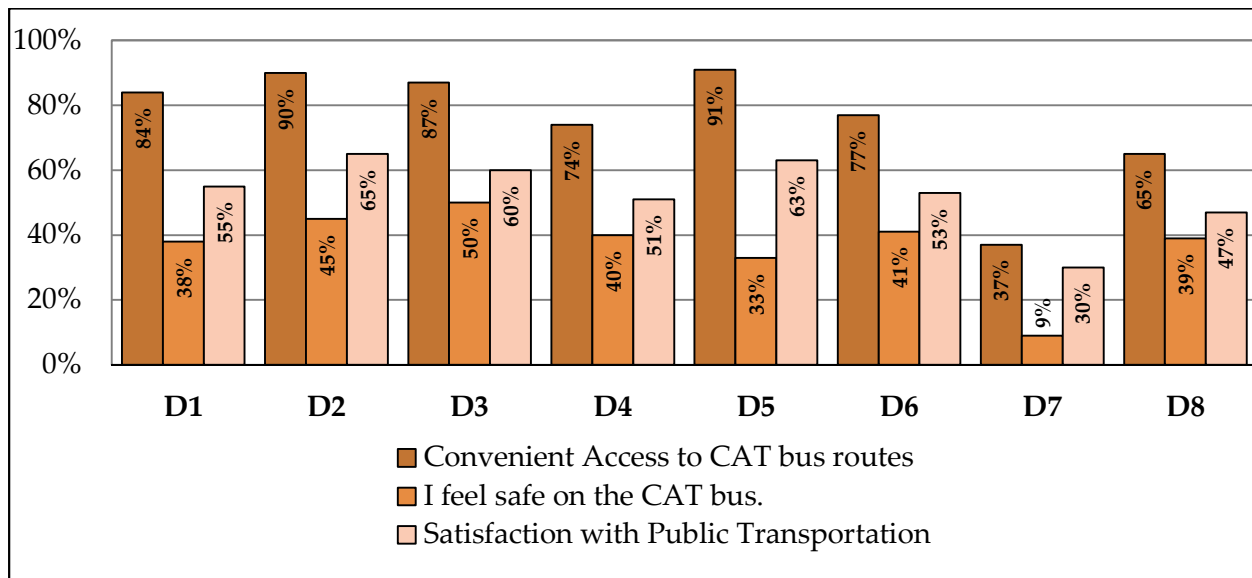
Safety on the CAT bus: High percentages of residents in all Districts responded “N/A or Don’t Know” to the question of feeling safe, ranging from 48% in District 2 to 76% in District 4. Percentages in Table 5.5 reflect the responses of those who did express an opinion about safety. Districts with higher reported rates of access also generally feel safer on CAT buses. Highest agreement about safety is in Districts 2 and 3, with about half feeling safe on CAT buses.

Lowest satisfaction levels with public transportation are in Districts 7 (43%), and 8 (27%). This is a significant reduction from the 2015 survey that had a top rate of dissatisfaction of 41% in District 7, 36% in District 4, and 28% in District 8. About 65% of District 2 residents are satisfied; well over half of residents in District 5 and District 3 are satisfied.

Table 5.5 Public Transportation Questions by District

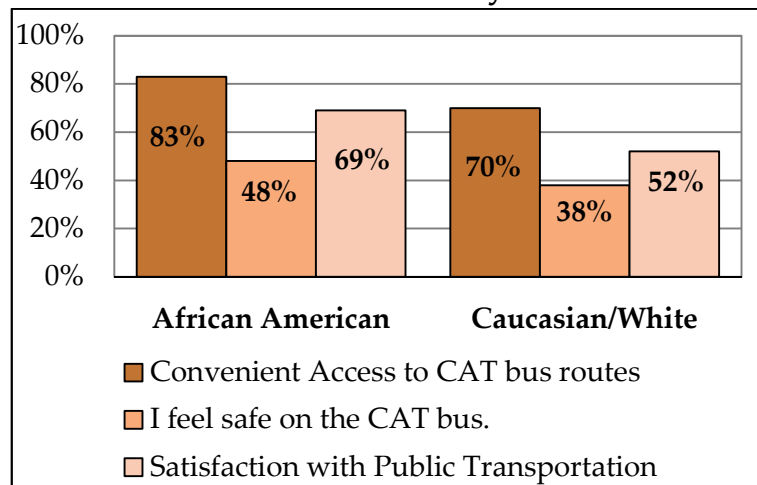
Convenient Access to CAT bus routes	D1	D2	D3	D4	D5	D6	D7	D8
Strongly Agree/Agree	84%	90%	87%	74%	91%	77%	37%	65%
Neutral	7%	7%	6%	12%	3%	12%	17%	5%
Strongly Disagree/Disagree	9%	3%	8%	14%	6%	11%	45%	30%
I feel safe on the CAT bus.								
Strongly Agree/Agree	38%	45%	50%	40%	33%	41%	9%	39%
Neutral	34%	40%	42%	40%	47%	39%	44%	42%
Strongly Disagree/Disagree	28%	15%	9%	21%	20%	20%	47%	20%
% Satisfaction with Public Transportation								
Very Satisfied/Satisfied	55%	65%	60%	51%	63%	53%	30%	47%
Neutral	26%	26%	28%	28%	25%	28%	27%	26%
Very Dissatisfied/Dissatisfied	18%	10%	12%	21%	11%	18%	43%	27%

Figure 5.6 Access to Public Transportation and Satisfaction Levels by District



Perceptions of public transportation issues vary substantially across Black and White residents and by age category. African American residents are generally more positive toward public transportation. White residents are more likely to disagree that access to bus routes is convenient. Conversely, 83% of Black residents agree that they have convenient access to CAT bus routes compared to 70% of White residents. Thirty-eight percent Caucasian residents feel safe on the CAT bus compared to 48% of African American residents. Similarly, 69% of African Americans are satisfied with public transportation compared to only 38% of Caucasian residents.

Figure 5.7 Access to Public Transportation and Satisfaction Levels by Race



Residents between 18 and 34 are more likely (81%) to say that their neighborhoods are conveniently located near CAT bus routes compared to 68% of residents 65+. Perceptions about safety on CAT buses declines with age. A smaller percentage (27%) of residents aged 18-34 say that they do not feel safe on the CAT bus compared to 39% of those aged 35-49, and 47% of those 65+. Younger residents are also less satisfied (49%) with public transportation as compared to 56% of those aged 50-64.

Trends in Quality of Recreational Opportunities and Public Transportation Measures

Respondents were also asked to rate the trends in the quality of recreational opportunities in their neighborhoods and public transportation (CAT bus, trolley, ferry, and bike system).

County-wide, the perception of 48% of residents is that trend in quality of recreational opportunities for adults is not changing. About 15% of residents see quality getting slightly better for adults and 4% say quality is getting much better. Only 3% stated that recreational opportunities are “getting much worse.” Another 6% believe they are “getting slightly worse” and 24% of residents responded “N/A or Don’t Know” to this question. Regarding trends in the quality of youth opportunities for recreation, only 17% of respondents see things getting better while 8% report worsening, 39% say no change, and 35% “Don’t Know.”

Analyzing trends in the quality of recreational opportunities by district reveals notable differences. Residents in District 4 are more likely to see the quality as getting better (43% for youth and 37% for adults). Respondents seeing recreational opportunities as getting better for youth ranged from 15% in Districts 3 and 5 to 43% in District 4. Trends for recreation opportunities for adults were viewed as more stable, with no change reported in a range from 58% in District 7 to 74% in District 7.

**Table 5.7 Trend in Quality of Recreational Opportunities
by Chatham County Commission District**

The Quality of YOUTH Recreational Opportunities in My Neighborhood is:	D1	D2	D3	D4	D5	D6	D7	D8
Getting Better	26%	30%	15%	43%	15%	27%	35%	24%
Not Changing	55%	58%	68%	55%	66%	52%	56%	67%
Getting Worse	6%	12%	17%	2%	20%	21%	9%	9%
The Quality of ADULT Recreational Opportunities in My Neighborhood is:	D1	D2	D3	D4	D5	D6	D7	D8
Getting Better	23%	21%	16%	37%	19%	24%	32%	30%
Not Changing	70%	67%	74%	62%	59%	60%	58%	61%
Getting Worse	13%	12%	10%	2%	22%	16%	10%	9%

Trends in the quality for youth recreational opportunities differ by race and age. About 42% of Black residents see recreational opportunities as improving compared to 23% of White residents. White residents are more likely to see opportunities as not changing (67% compared to 42%).

Differences in responses were apparent across age of respondent with respect to adult recreation opportunities. Separately, respondents in the 35-49 age category were less likely to view recreational opportunities as improving for youth. Generally, older age was associated with perception of improved trends for quality of youth and adult recreational opportunities.

Table 5.8 Trend in Quality of Recreational Opportunities by Race and Age

The Quality of YOUTH Recreational Opportunities in My Neighborhood is	Black Residents	White Residents	Age 18-34	Age 35-49	Age 50-64	Age 65+
Getting Better	42%	23%	28%	21%	28%	32%
Not Changing	42%	67%	59%	69%	60%	56%
Getting Worse	14%	10%	13%	11%	13%	12%
The Quality of ADULT Recreational Opportunities in My Neighborhood is	Black Residents	White Residents	Age 18-34	Age 35-49	Age 50-64	Age 65+
Getting Better	30%	23%	21%	21%	29%	35%
Not Changing	55%	67%	66%	71%	58%	56%
Getting Worse	13%	10%	13%	8%	12%	9%

Neighborhood Cohesion

Several questions posed to Chatham County residents reflect dimensions of neighborhood cohesiveness. Respondents were asked whether they strongly agreed, agree, were neutral, disagreed, or strongly disagreed with the following:

- ❖ I know my neighbors and have friends in the neighborhood.
- ❖ People in my neighborhood are willing to help each other.

Respondents were also asked how satisfied they are with race relations, housing options, visual appeal of their neighborhoods (litter), and their overall quality of life.

Most residents perceive their neighborhoods as being cohesive and characterized by positive relations: 65% of residents know their neighbors and have friends in the

neighborhood, however, this percentage is down from 70% in the 2015 survey, and 67% still see people in their neighborhoods as being willing to help one another. About 61% of residents are satisfied/very satisfied with the cleanliness of their neighborhoods, and 74% are satisfied/very satisfied with the overall quality of their lives.

On the other hand, 21% of residents are dissatisfied/very dissatisfied with race relations in their neighborhoods, representing a modest 1-point increase from 2015. Fewer are satisfied/very satisfied with race relations; 43% in 2018 compared to 48% in 2015. Twenty-seven percent of residents are neutral when it comes to satisfaction with race relations in neighborhoods, and 8% responded “N/A or Don’t Know.”

With respect to affordable housing options, the proportion of residents reporting satisfaction declined to 21% as compared to about half in 2015. Twenty-three percent report being dissatisfied/very dissatisfied with affordable housing options.

Table 5.9 Cohesiveness of Neighborhoods, Race Relations, Housing Options, Neighborhood Appearance, Overall Quality of Life

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A or D/K
I know my neighbors and have friends in the neighborhood.	24%	41%	17%	12%	5%	1%
People in my neighborhood are willing to help each other.	24%	43%	19%	5%	3%	6%
	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A or D/K
Affordable Housing Options	4%	17%	22%	15%	8%	32%
Race Relations	8%	35%	27%	14%	7%	8%
Cleanliness of Neighborhood (litter)	18%	43%	14%	15%	9%	2%
Overall Quality of Life	20%	54%	16%	6%	1%	1%

Cohesiveness of Neighborhoods and Race Relations by District, Race, and Age

A clear majority of residents in all districts state they know their neighbors and have friends in the neighborhood, as well as stating that neighbors are willing to help one another. However, there are substantial differences in responses across the districts.

District 4 has the most positive ratings with 81% of residents knowing their neighbors and having friends in their neighborhoods and 86% saying that neighbors are willing to help one another. Seventy percent of District 2 and 68% of District 3 residents report knowing neighbors and having friends in the neighborhood. Feeling that neighbors are willing to help one another is lowest in District 5 (61%), 8 (65%), 6 (64%), and 3 (66%).

Forty-three percent of county residents are satisfied with race relations in their neighborhoods. However, satisfaction levels range from only 32% satisfied in District 8 to 56% in District 4 and 59% in District 7. About one-third of District 1, 2, and 5 residents are “very dissatisfied/dissatisfied” with race relations.

**Table 5.10 Neighborhood Cohesiveness and Satisfaction
with Race Relations by District**

I know my neighbors and have friends in the neighborhood.	D1	D2	D3	D4	D5	D6	D7	D8
Strongly Agree/Agree	79%	70%	68%	81%	57%	60%	62%	56%
Neutral	12%	13%	16%	11%	23%	20%	16%	23%
Strongly Disagree/Disagree	10%	17%	16%	8%	21%	19%	23%	21%
People in my neighborhood are willing to help each other.								
Strongly Agree/Agree	84%	71%	66%	86%	61%	64%	75%	65%
Neutral	13%	20%	21%	12%	24%	25%	19%	28%
Strongly Disagree/Disagree	4%	9%	13%	2%	15%	10%	6%	7%
% Satisfied with Race Relations in One's Neighborhood								
Very Satisfied/Satisfied	35%	33%	41%	56%	45%	52%	59%	32%
Neutral	32%	35%	38%	24%	21%	30%	27%	58%
Very Dissatisfied/Dissatisfied	34%	32%	22%	20%	34%	17%	14%	10%

As indicated in Table 5.11 on the next page, responses about neighborhood cohesiveness differ by race and age. About 53% of Black residents know their neighbors and have

friends in their neighborhoods compared to 69% of White residents. White residents are less likely to select the “neutral” response (15% compared to 22%).

Black residents have a lower level of satisfaction with race relations in their neighborhoods at 32% compared to White residents at 52%. More Black residents were “neutral” (40% to 27% White) and more likely to be dissatisfied with race relations (28% to 21% White).

Differences are also apparent with age, with those 50 and older being more likely to know their neighbors, have friends in the neighborhood, and see their neighbors as being willing to help each other.

A different pattern is apparent in responses by age category regarding satisfaction with race relations. There is little variation across age categories reporting satisfaction with race relations, but those aged 35-49 tend to be more dissatisfied, while those aged 18-34 report the lowest levels of dissatisfaction.

Table 5.11 Neighborhood Cohesiveness and Satisfaction with Race Relations by Race and Age

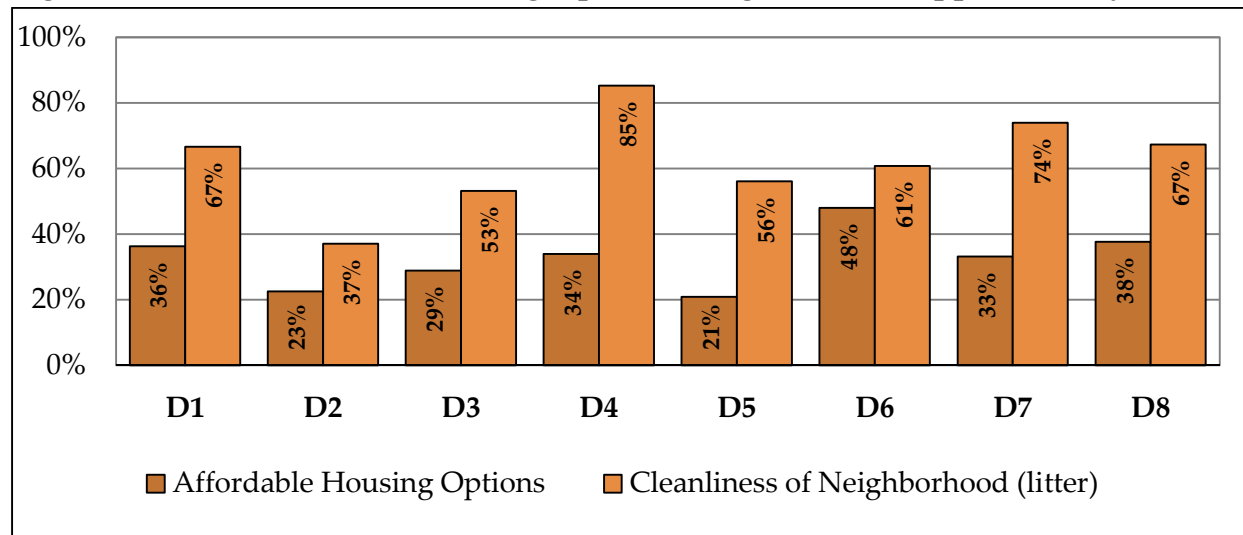
I know my neighbors and have friends in the neighborhood.	Black	White	Age 18-34	Age 35-49	Age 50-64	Age 65+
Strongly Agree/Agree	53%	69%	52%	74%	73%	73%
Neutral	22%	15%	20%	15%	17%	17%
Strongly Disagree/Disagree	24%	16%	28%	12%	11%	11%
People in my neighborhood are willing to help each other.						
Strongly Agree/Agree	58%	77%	60%	79%	75%	75%
Neutral	31%	17%	29%	14%	17%	17%
Strongly Disagree/Disagree	12%	6%	10%	7%	8%	8%
Satisfaction with Race Relations in Neighborhood:						
Very Satisfied/Satisfied	32%	52%	47%	45%	44%	44%
Neutral	40%	27%	33%	27%	31%	31%
Very Dissatisfied/Dissatisfied	28%	21%	20%	28%	25%	25%

Satisfaction with Housing Options and Neighborhood Appearance by District, Race, and Age

Satisfaction with affordable housing options is relatively low across all districts, ranging from a high of 48% in District 6 to a low of 21% in District 5. District 2 is next highest at 23% and the balance of districts average around 30%.

District 4 residents are substantially more satisfied (84%) with the visual appeal of their neighborhoods. District 1, 6, 7, and 8 residents also report relatively high satisfaction (greater than 61%) with cleanliness of their neighborhood.

Figure 5.8 Satisfaction with Housing Options, Neighborhood Appearance by District

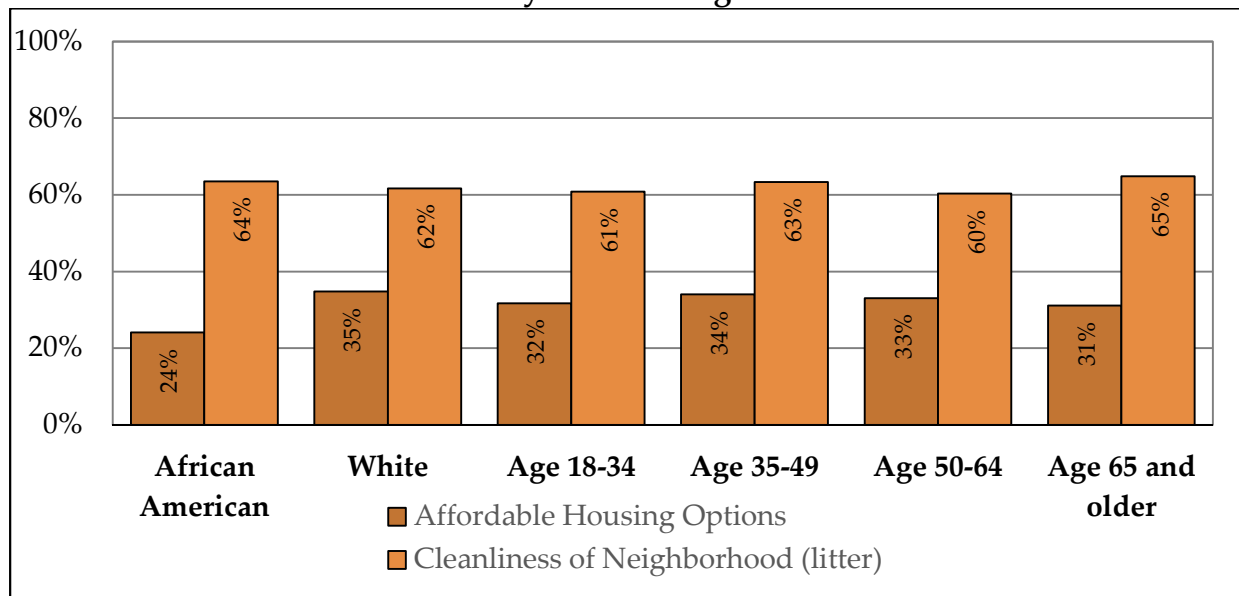


As indicated in Figure 5.9 on the next page, African Americans are less likely to be satisfied with housing affordability. About 35% of White residents are satisfied compared to 24% of African American residents. Conversely, 42% of African American residents are dissatisfied compared to 30% of White residents.

Differences were relatively small with respect to age. Satisfaction with housing options ranged between 31% and 34% for the four age categories.

A roughly equal proportion of White and Black residents view cleanliness of neighborhood positively: 62% of White residents are satisfied compared to 64% of Black residents. Older respondents are somewhat more satisfied than younger respondents: satisfaction with visual appeal ranged from 61% of 18-34 year-olds to 65% those 65 and older.

Figure 5.9 Satisfaction with Housing Options and Neighborhood Appearance by Race and Age



Satisfaction with Overall Quality of Life by District, Race, and Age

Satisfaction with overall quality of life varies significantly across the districts, as indicated in Table 5.12. Satisfaction is highest in District 4 at 91% and notably higher than in other districts. The next three highest ratings are in District 7 (85%), District 1 (81%), and District 8 (79%). The lowest ratings for quality of life satisfaction are in District 5 (56%) and District 2 (67%).

Table 5.12 Satisfaction with Overall Quality of Life by District

Overall Quality of Life	D1	D2	D3	D4	D5	D6	D7	D8
Very Satisfied/Satisfied	81%	67%	76%	91%	56%	75%	85%	79%
Neutral	13%	24%	13%	8%	29%	17%	14%	15%
Very Dissatisfied/Dissatisfied	6%	9%	10%	0%	15%	9%	1%	6%

Table 5.13 on the following page summarizes responses about quality of life by race and age. White residents are more satisfied with their overall quality of life (80%) as compared to Black residents (67%). Black and White residents were about equally likely to select the “neutral” response. A notable difference is present with respect to dissatisfaction about quality of life: 15% of Black residents are dissatisfied compared to 5% of White residents.

Older respondents are more satisfied with their quality of life than younger respondents: satisfaction ranged from 70% among 18-34 year-olds to about 77%-78% of those between age 35 and 64, and up to 86% of those 65 and older.

Table 5.13 Satisfaction with Overall Quality of Life by Race and Age

Overall Quality of Life	African American	Caucasian /White	Age 18-34	Age 35-49	Age 50-64	Age 65+
Very Satisfied/Satisfied	67%	80%	70%	78%	77%	86%
Neutral	18%	15%	21%	16%	17%	13%
Very Dissatisfied/Dissatisfied	15%	5%	9%	6%	6%	6%

Trends in Neighborhood Quality

Chatham County residents were also asked about their perceptions of trends in the quality of the visual appeal of neighborhoods and overall quality of life. See Table 5.14. About 48% of residents say that their overall quality of life is getting better compared to 43% who say it is not changing, and 9% who say quality of life is getting worse.

Forty-eight percent see no change in trend for visual appeal of their neighborhoods, 33% report improvement, and 19% perceive it to be getting worse.

Table 5.14 Trends in Visual Appeal and Quality of Life

Neighborhood Quality	Visual Appeal	Overall Quality of Life
Not Changing	48%	43%
Getting Worse	19%	9%
Getting Better	33%	47%

Responses about the trends in both visual appeal and quality of life differed, as indicated in Figures 5.10 and 5.11 on the next page. For example, 39% of District 5 residents see improvement in the visual appeal of neighborhood, as compared to a low of 27% of residents in Districts 3 and 1 and 29% of District 2.

Improvement in overall quality of life ranged from a low of 40% in District 6 to a high of 56% in District 7. Only 2% of District 4 residents see quality of life as worsening, but 16% of District 5 residents perceive a deterioration of overall quality of life.

Figure 5.10. Trends in “Visual Appeal in My Neighborhood” by District

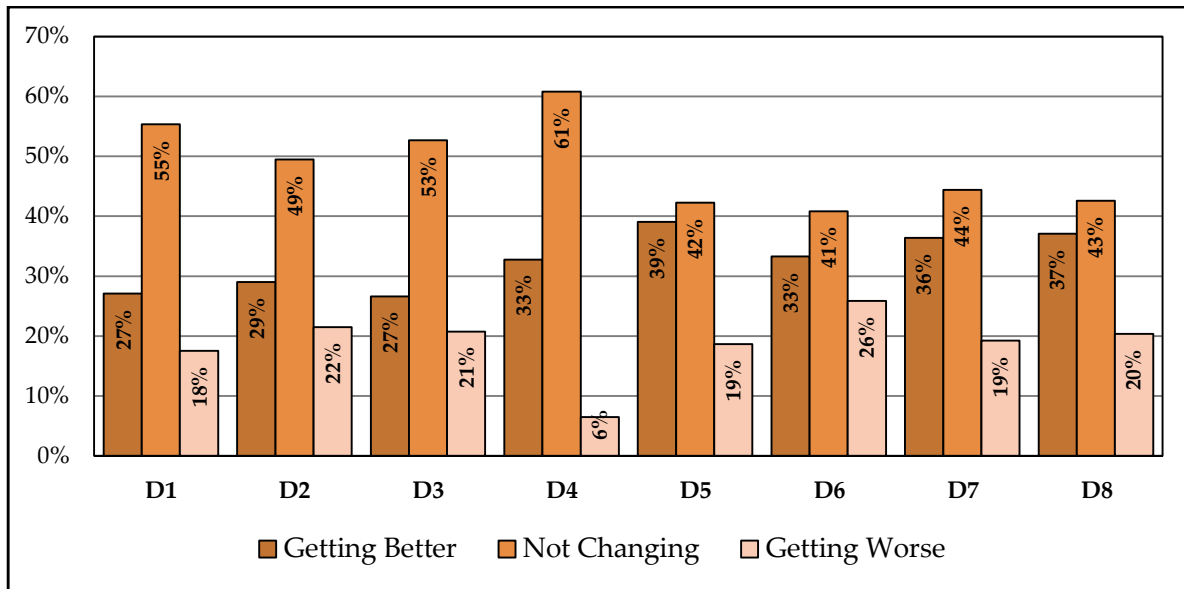
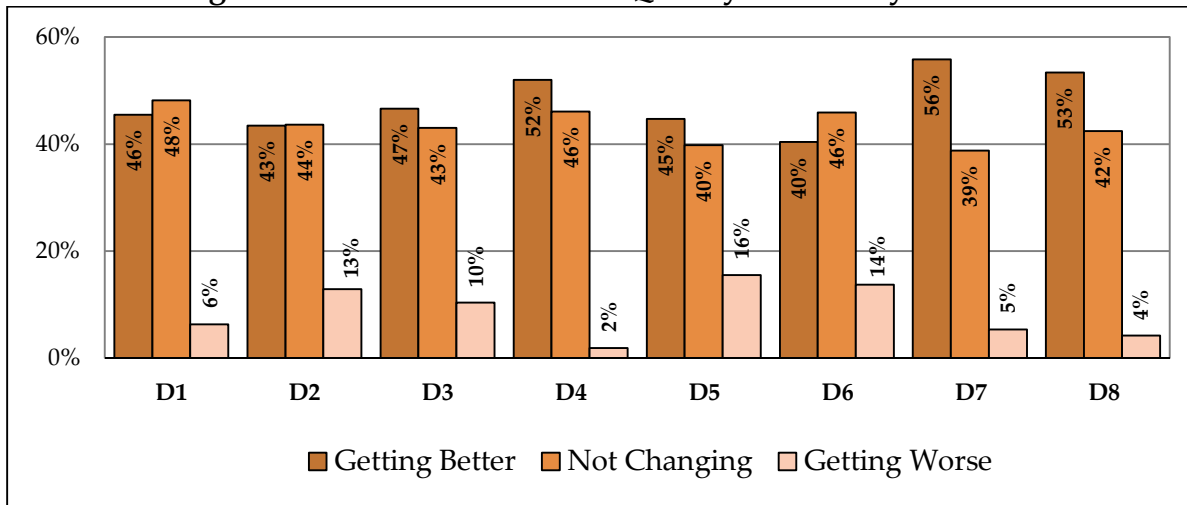


Figure 5.11 Trends in “Overall Quality of Life” by District



Trends in the quality of visual appeal of neighborhoods differ by race but not by age. See Table 5.15. About 52% of Black residents see improvement in the visual appeal of

Table 5.15 Trend in Visual Appeal by Race

Quality of Visual Appeal in My Neighborhood is:	Black Residents	White Residents
Not Changing	30%	19%
Getting Worse	18%	52%
Getting Better	52%	29%

neighborhoods compared to 29% of White residents. White residents are also more likely to perceive worsening conditions in visual appeal (52% compared to 18%), and less likely (19% vs. 30%) to perceive stability in visual appeal.

Trends in the overall quality of life differ notably by race and age. About 58% of Black residents see quality of life as improving compared to 47% of White residents. White residents are more likely to view the quality of life as not changing (44% compared to 34%). The proportion of Black and White residents reporting a worsening in quality of life was roughly equal.

Older age is associated with perceiving improving conditions in quality of life. Respondents in the 35-49 age category are the least likely to see quality of life as improving (43%) compared to 18-34 year-olds (47%) and 50-64 year-olds (49%). Among respondents age 65+, 55% reported improving quality of life.

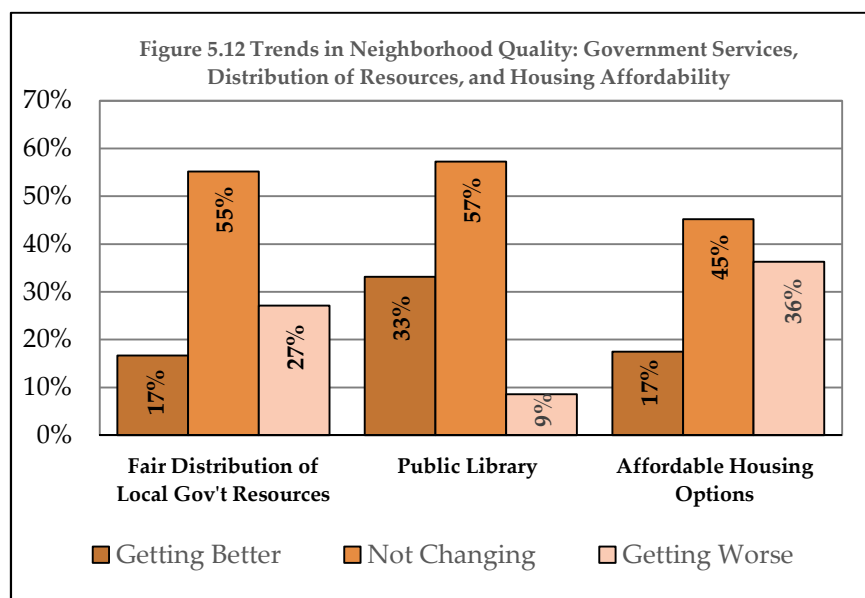
Trends in Government Services, Distribution of Resources, and Housing Affordability

Three questions regarding trends in aspects of neighborhoods are addressed:

- ❖ Services Provided by Local Government
- ❖ Public Library
- ❖ Affordable Housing Options

Well over half of Chatham County residents see these aspects as not changing as indicated in Figure 5.12 below. relatively small percentages of county residents perceive improvement in trends regarding these issues: 17% see fair distribution of Local Government Resources as improving; 33% viewed public library services as improving; and 17% see housing options as becoming more affordable.

The proportion of respondents that view these issues as worsening varies widely across the issues. At the low end, 9% view public library services as declining, 27% seeing fair distribution of local government resources worsening, and 36% see affordable housing options as getting worse.



Views on the distribution of local government resources or services in neighborhoods vary with racial/ethnic group, with 24% of Black residents and 12% of White residents viewing this as getting worse; and about the same proportion across the two groups view this situation as improving. However, most residents view this factor as not changing, with 48% of Black residents and 61% of White residents choosing “Not Changing” as their answer.

Across the districts (see Table 5.16), responses to all three of these aspects of neighborhoods vary by the question asked. For example, 63% of District 3 viewed public library services as “Not Changing,” while 47% viewed affordable housing options as “Not Changing.” For the public library question, the “Getting Better” responses varied widely from a low of 25% in District 8 to a high of 51% in District 4.

Views on the improvement in the fair distribution of local government resources are different across the districts, ranging from a low 11% in District 1 and 2 to high of 21% in District 4 and 23% in District 7. Across the board, “Not Changing” is the most common response. These responses are mostly in the 50% range.

Table 5.16 Trend in Neighborhood Quality: Natural Environment, Local Government Services, and Equal Distribution of Resources/Services by District

Fair Distribution of Local Gov't Resources	D1	D2	D3	D4	D5	D6	D7	D8
Not Changing	49%	57%	55%	56%	52%	52%	50%	61%
Getting Worse	25%	32%	30%	23%	30%	32%	26%	22%
Getting Better	11%	11%	15%	21%	18%	16%	23%	17%
Public Library								
Not Changing	64%	61%	63%	48%	48%	55%	62%	62%
Getting Worse	6%	8%	11%	1%	13%	5%	11%	12%
Getting Better	31%	31%	25%	51%	39%	40%	26%	25%
Affordable Housing Options								
Not Changing	41%	37%	47%	48%	40%	46%	48%	56%
Getting Worse	45%	49%	30%	34%	34%	34%	42%	27%
Getting Better	14%	14%	23%	18%	25%	20%	10%	17%

Responses regarding the trend in quality of services provided by local government (see Table 5.17 on the following page) are different according to race, and differences are fairly marked. For example, 24% of Black residents see services as “Getting Better” compared to 12% of White residents. White residents are significantly more likely to see government services as “Not Changing” (61% compared to 48%) or “Getting Worse” (24% to 12%). Differences by age are relatively small.

Perceptions about trends in the quality of public library services also differ by race and age. About 56% of African-American residents view the quality of the public library services as improving compared to 27% of White residents. White residents are more likely to see the quality of library services as not changing (62% compared to 40%) or getting worse (11% to 4%).

Opinions about library services were similar across age groups, with the notable exception of 35-49 year-olds who are less likely to see improvement. In general, however, older residents are generally more likely to view the quality of the public library services as improving.

With respect to perceptions about the trend in affordable housing options, 22% of Black residents see affordable housing as getting better compared to 16% of White residents. Both groups are likely to see this as not changing (46% compared to 45%), but White residents are slightly more likely to view housing affordability worsening (39% to 25%).

Differences by age group are notable, with 42% of respondents between 18 and 34 viewing affordable housing options as worsening, while 26% of those 65 and older view it similarly.

Table 5.17 Trend in Neighborhood Quality: Natural Environment, Local Government Services, Equal Distribution of Resources/Services by Race and Age

Fair Distribution of Local Gov't Resources	African American	Caucasian /White	Age 18-34	Age 35-49	Age 50-64	Age 65+
Not Changing	48%	61%	60%	56%	52%	51%
Getting Worse	26%	27%	28%	26%	31%	24%
Getting Better	24%	12%	11%	19%	17%	25%
Public Library						
Not Changing	40%	62%	61%	61%	56%	48%
Getting Worse	4%	11%	9%	8%	6%	10%
Getting Better	56%	27%	30%	19%	37%	42%
Affordable Housing Options						
Not Changing	46%	45%	40%	46%	48%	54%
Getting Worse	25%	39%	42%	39%	35%	26%
Getting Better	22%	16%	19%	15%	17%	20%



VI. Public Safety

Eleven questions asked about crime and safety in the respondents' neighborhoods. These questions focused on the prevalence of property and violent crime, attitudes towards neighborhood policing, drug and alcohol abuse, community connectivity, juvenile crime, homelessness, public transportation, and pedestrian safety.

Aspects of Public Safety in Neighborhoods

Public safety in one's neighborhood depends on numerous factors. Chatham County residents were asked whether they strongly agreed, agreed, were neutral, disagreed, or strongly disagreed with eight statements measuring public safety characteristics in neighborhoods. The response category "Not applicable, don't know" was included. The statements are:

- ❖ My neighborhood is mostly free of property crime (break-ins/stealing).
- ❖ My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).
- ❖ The police care about the needs of my neighborhood.
- ❖ My neighborhood is mostly free of alcohol-related problems.
- ❖ My neighborhood is mostly free of unlawful drugs.
- ❖ Juvenile crime is a problem in my neighborhood.
- ❖ There are homeless people who live in my neighborhood.
- ❖ I am concerned about being hit by a vehicle while walking in my neighborhood.
- ❖ I know my neighbors and have friends in the neighborhood.
- ❖ People in my neighborhood are willing to help each other.
- ❖ I feel safe on the CAT bus.

As indicated in Table 6.1, 77% of Chatham County residents report their neighborhoods are mostly free of violent crime, but that drops to 57% of residents stating their neighborhoods are mostly free of property crime. About 60% of residents strongly agree or agree the police care about the needs of their neighborhoods. All three of these indicators are improved from 2015 with the most improvement in perception of police care for neighborhoods (up from 55%), free from violent crime (up from 72%), and free from property crime (up from 55%).

Fewer residents, 52% in 2018 compared to 56% in 2015, see their neighborhoods as being mostly free of alcohol-related problems. A smaller percentage (46%) also state their neighborhoods are mostly free of unlawful drugs, down from 49% in 2015.

One-fifth (20%) of residents see juvenile crime as a problem in their neighborhoods in 2018, consistent with 2015. However, 16% say that there are homeless people living in

their neighborhoods, up from 14% in 2015.

In addition, the majority of participants (52%) are not concerned about being hit by a vehicle while walking in their neighborhood.

Higher percentages of “N/A or Don’t Know” occur in the five questions relating to police caring, alcohol, drugs, juvenile crime, and homelessness in neighborhoods. Further, about 21% of residents are “neutral” with respect to the question regarding police caring about neighborhood needs.

Table 6.1 Perceptions of Aspects of Public Safety in Neighborhoods

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A or D/K
Neighborhood mostly free of property crime	15%	42%	12%	21%	9%	0%
Neighborhood mostly free of violent crime	34%	43%	7%	11%	4%	0%
Police care about needs of my neighborhood	18%	42%	21%	8%	4%	6%
Neighborhood mostly free of alcohol-related problems	17%	35%	14%	11%	4%	19%
Neighborhood mostly free of unlawful drugs	15%	31%	12%	13%	8%	20%
Juvenile crime is a problem in my neighborhood	6%	15%	19%	29%	13%	17%
Homeless people live in my neighborhood	5%	11%	6%	27%	29%	21%
Concerned about being hit by a vehicle while walking in my neighborhood	11%	19%	15%	31%	21%	3%

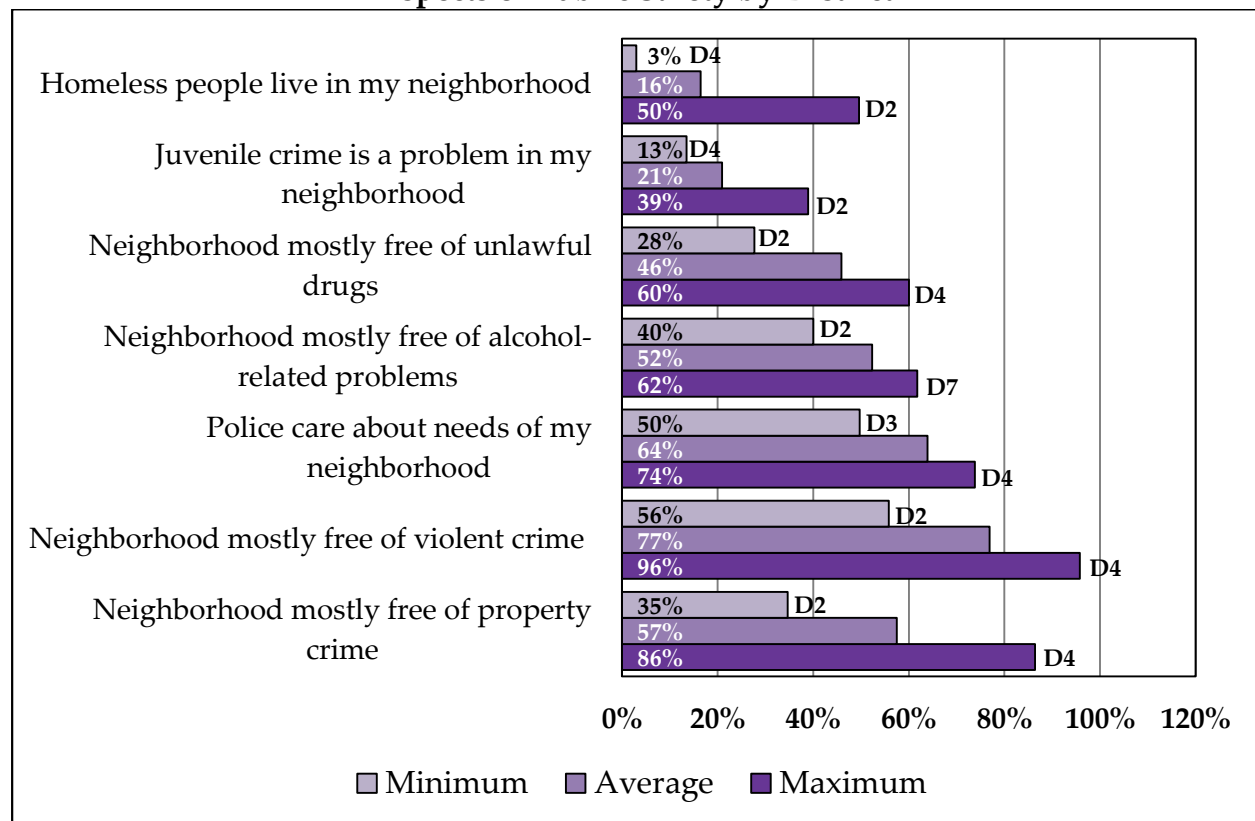
Aspects of Public Safety in Neighborhoods by District

Residents' opinions of public safety by district were also analyzed, combining "strongly agree" and "agree" response categories in one overall category and "strongly disagree" and "disagree" choices into another category. Favorable aspects of public safety in neighborhoods are most apparent in the opinions of residents in District 4 as shown in Figure 6.2. District 4 responses are generally much more positive than other districts, with District 2 displaying the next most favorable responses.

However, responses in other districts signal residents' concerns. Districts 2 and 3 generally exhibit the least positive responses, and variation among responses by district is striking. For example, 86% of District 4 residents see their neighborhoods as mostly free of property crime compared to only 35% of District 2 residents. Likewise, 96% of District 4 residents say that their neighborhoods are mostly free of violent crime compared to 56% of those respondents living in District 2.

In the figure below, the lowest agreement in a district for the question is displayed along with the average value for all districts (the middle bar) and highest value in a district.

Figure 6.2 Low, High, and Average of Strongly Agree/Agree Responses toward Aspects of Public Safety by District



Perceptions of Public Safety in Neighborhoods by Age and Race

Table 6.2 below presents a comparison of perceptions about public safety in neighborhoods by age category. There are some notable differences across the age categories with respect to perceptions of property crime and violent crime. With respect to freedom from property crime, the youngest group, age 18-34, perceive the least property crime (63% agree), followed by age 65+ (60%), then age 50-64 (55%), and those aged 35-49 (49%).

Perceptions of public safety have improved overall from 2105 to 2018, except that smaller percentages of two age groups, 35-49 (64% down from 73%) and 65+ (55% down from 70%) agree their neighborhoods are free from violent crime. There is agreement from 82% of those in the 18-34 age group (up from 73% in 2015) and 73% of the 50-64 age group (up from 70% in 2015) that their neighborhoods are mostly free of violent crime.

Residents 65 and older are more likely to strongly agree/agree that police care about the needs of the neighborhood (71% answering in the affirmative compared to 64% of 18-34 year olds, 60% of those 35-49, and 63% of those 50-64). All age groups improved in agreement by approximately five points from 2015.

Also, those 65 and older are less likely (17% agree) to see juvenile crime as a problem compared to adults in the remaining age groups wherein 26% to 28% of respondents agreed that juvenile crime is a problem. Residents 18-34 are least likely to agree that there are homeless people living in their neighborhoods.

Table 6.2 Percent Agreement with Public Safety Questions by Age

	Age 18-34	Age 35-49	Age 50-64	Age 65+
Neighborhood mostly free of property crime	63%	49%	55%	60%
Neighborhood mostly free of violent crime	82%	64%	73%	55%
Police care about needs of my neighborhood	64%	60%	63%	71%
Neighborhood mostly free of alcohol-related problems	66%	62%	64%	65%
Neighborhood mostly free of unlawful drugs	62%	58%	52%	55%
Juvenile crime is a problem in my neighborhood	26%	27%	28%	17%
Homeless people live in my neighborhood	18%	22%	26%	20%

Attitudes of Black and White residents toward aspects of public safety in neighborhoods differ notably for some issues, as noted in Table 6.3 below. In general, African American residents are more likely to be less satisfied about aspects of public safety than White residents. For example, Black residents are more likely to disagree that their neighborhoods are free of violent crime (28% disagree vs. 12% for White residents) and are dissatisfied about whether the police care about the needs of the neighborhood (24% vs. 11% White dissatisfaction).

Responses about whether there is a problem with juvenile crime tended to be similar across the two groups.

Table 6.3 Percent Agreement with Public Safety Questions by Race

	African American	Caucasian /White
Neighborhood mostly free of property crime.		
Strongly Agree/Agree	55%	58%
Neutral	13%	11%
Strongly Disagree/Disagree	32%	31%
Neighborhood mostly free of violent crime		
Strongly Agree/Agree	64%	81%
Neutral	8%	6%
Strongly Disagree/Disagree	28%	12%
Police care about needs of my neighborhood:		
Very Satisfied/Satisfied	51%	68%
Neutral	25%	20%
Very Dissatisfied/Dissatisfied	24%	11%
Neighborhood mostly free of alcohol-related problems		
Very Satisfied/Satisfied	49%	68%
Neutral	16%	16%
Very Dissatisfied/Dissatisfied	28%	16%
Neighborhood mostly free of unlawful drugs		
Very Satisfied/Satisfied	51%	60%
Neutral	13%	14%
Very Dissatisfied/Dissatisfied	36%	26%
Juvenile crime is a problem in my neighborhood		
Very Satisfied/Satisfied	30%	26%
Neutral	15%	24%
Very Dissatisfied/Dissatisfied	54%	50%
Homeless people live in my neighborhood		
Very Satisfied/Satisfied	35%	18%
Neutral	8%	7%
Very Dissatisfied/Dissatisfied	50%	75%

Satisfaction with Public Safety in Neighborhoods

Survey respondents were asked one general question about how satisfied they were with public safety in their neighborhoods. About 9% of Chatham County residents are very satisfied, 42% are satisfied, 13% are dissatisfied, and 5% are very dissatisfied. Another 25% are neutral and about 5% responded “Don’t know.” The percentage of “very satisfied” declined from 14% in 2015 and the 2018 “Neutral” shifted up from 21%.

Table 6.4 below presents overall satisfaction with public safety by district. The “very satisfied” and “satisfied” response categories were combined into one category and “very dissatisfied” and “dissatisfied” choices were combined into another category. Neutral responses were included in the cross-tabulation analysis.

Substantial differences are apparent with respect to overall public safety, with District 4 clearly having the highest satisfaction level (81%), and District 2 having the lowest (39%). Residents in Districts 1, 2, 3, and 5 are well below the median of 51% satisfaction.

Satisfaction levels with public safety are below 2015 levels from 3 to 10 percentage points in all neighborhoods, except for District 2 which experienced a slight increase in satisfaction from 36% to 39%.

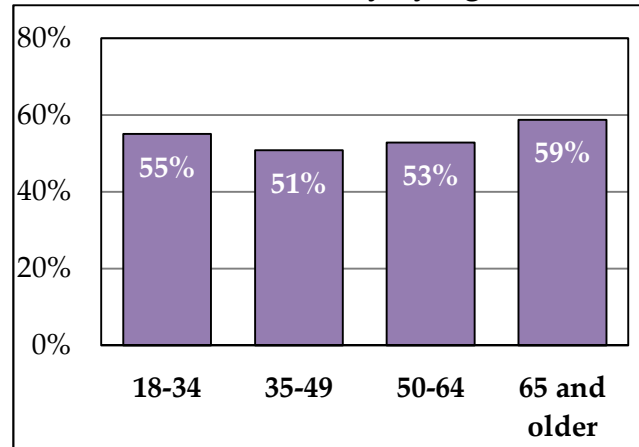
Table 6.4 Satisfaction with Public Safety by District

Overall Quality of Life	D1	D2	D3	D4	D5	D6	D7	D8
Very Satisfied/Satisfied	47%	39%	42%	81%	46%	56%	67%	56%
Neutral	26%	31%	38%	12%	30%	27%	26%	27%
Very Dissatisfied/Dissatisfied	27%	31%	19%	6%	24%	17%	8%	16%

Satisfaction with Public Safety by Age

Across age categories, differing responses are apparent in the satisfaction of Chatham County residents with overall public safety. Residents in the two middle age categories are likely to be least satisfied, 51% of those age 35-49 and 53% of those 50-64. Fifty-nine percent of those age 65 and older are satisfied with public safety compared to 55% of those between 18 and 34. Every age group in the 2015 survey reported higher levels of satisfaction ranging from 58% to 64% from youngest to oldest.

Figure 6.3. Very Satisfied/Satisfied with Public Safety by Age



Differences were present when comparing White and Black residents' level of satisfaction with public safety. About 57% of White residents are satisfied with public safety compared to 49% of Black residents. Black (30%) and White (27%) residents are roughly equal in being "neutral" about public safety. Black residents (21%) are somewhat more dissatisfied as compared to White residents (17%).

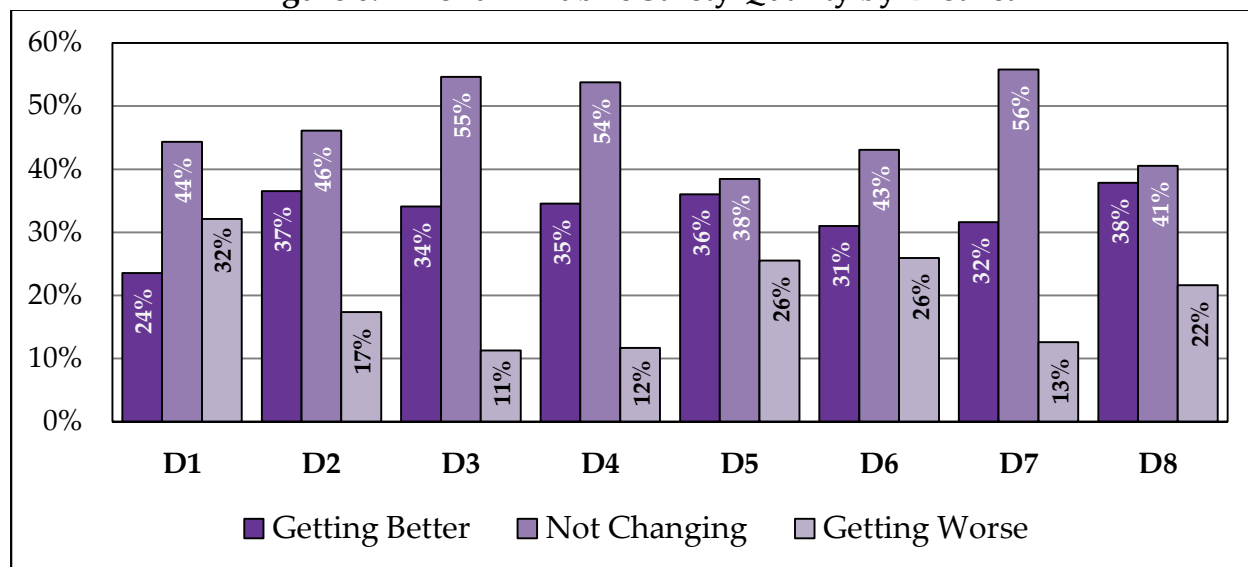
Trends in Quality of Public Safety in Neighborhoods

Respondents were also asked to rate the trends in the quality of public safety in their neighborhoods. Almost 18% of residents see public safety quality "getting slightly worse/much worse," which is a notable increase from 7% recorded for this answer in 2015. Another 41% view public safety as not changing in 2018, down from 49% in 2015. About 24% see public safety as "getting slightly better," and 5% said it is "getting much better." Twelve percent of residents responded "N/A or "Don't know" to this question.

Perceived trends in the quality of public safety vary across the districts, as indicated in Figure 6.4. Districts are clustered in a closer range for all categories in 2018. Around one-fourth of residents in Districts 1, 6 and 7 view the public safety trend getting "slightly/much better" (24%, 31% and 32% respectively). The balance of Districts 2, 3, 4, 5, and 8 are nearer one-third. This range of perceived improvement is much more compact in 2018, as compared to the range of 13% in District 8 to 32% in District 1 in the 2015 survey. In Districts 8, 6, and 5 from 38% to 43% view no change in public safety

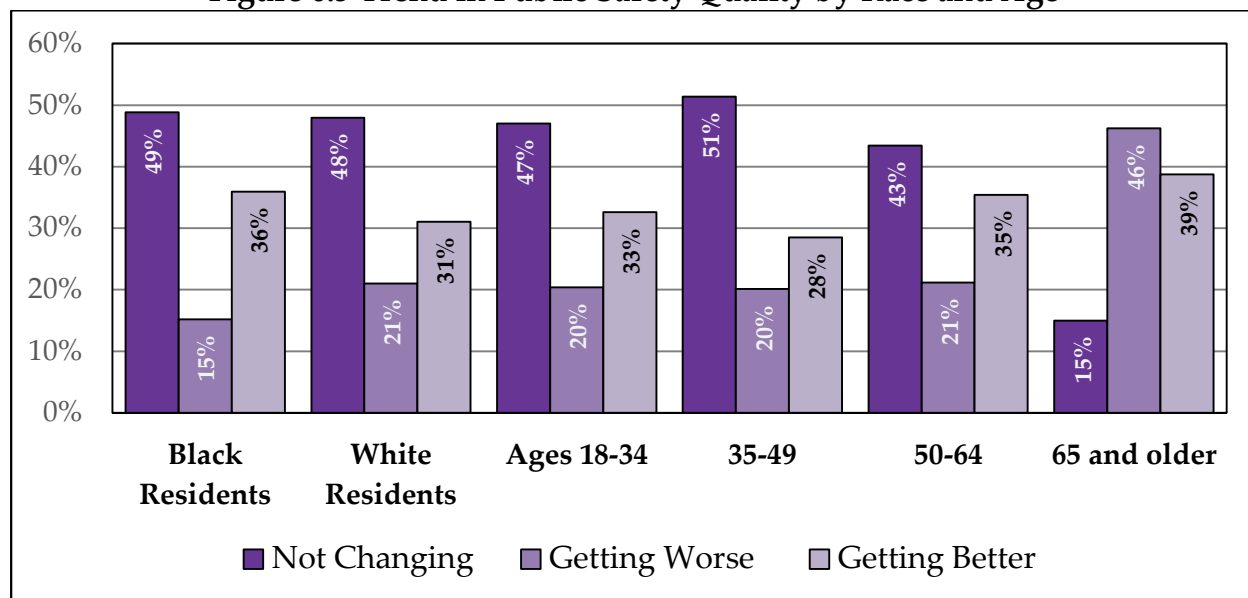
trends in 2018, while from 41% to 49% report no change in the remaining districts. While about one in ten of residents in Districts 3, 4, and 7 perceive public safety trend worsening, District 1 has 32% reporting public safety worsening.

Figure 6.4 Trend in Public Safety Quality by District



Perceived trends in the quality of public safety also differ by race and age. Almost 36% of African American residents see public safety as improving compared to 31% of White residents. Compared to the 2015 survey, all four ages groups report improved public safety trends in larger percentages in 2018; ages 18-34 increased from 29% to 33%, 35-49 from 21% to 28%, 50-64 from 28% to 35% and 65+ from 25% to 39%.

Figure 6.5 Trend in Public Safety Quality by Race and Age





VII. Economic Independence

To evaluate the economic growth and health of a community and plan for the future, it is important to assess residents' opinions about access to jobs, job training, and accessibility of educational programs, as well as to measure residents' personal economic conditions. Seven questions in the 2018 survey specifically addressed these aspects of Chatham County's residents.

Demographic questions measured employment status, income, and homeownership, allowing for further analysis of economic well-being. Residents were also asked where they work in Chatham County, or if they work outside the county.

Respondents were asked whether they strongly agreed, agree, were neutral, disagreed, or strongly disagreed with the following seven statements:

- ❖ It would benefit me if CAT bus routes were changed for better access to jobs.
- ❖ I have internet access.
- ❖ There are job opportunities available that match my skills.
- ❖ Opportunities for job and career advancement are available to me.
- ❖ I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).
- ❖ I spend 1/3 or more of my budget on housing (mortgage or rent).
- ❖ I live paycheck to paycheck at my current job.
- ❖ I have access to childcare services that match my work schedule.

Economic Self-Sufficiency: Accessibility of Jobs

Many fewer survey participants (34% compared to 60%) selected the "N/A/Don't know" response category to the statement "It would benefit me if CAT bus routes were changed for better access to jobs from the 2015 to 2018 survey, suggesting increased awareness of CAT routing options. Only a slightly larger percent (to 19% from 17%) agree or strongly agree with this statement in the two surveys. Notably more (26% versus 12%) are neutral in 2018 as compared to 2015. In 2018, 22% strongly disagree or disagree with this statement.

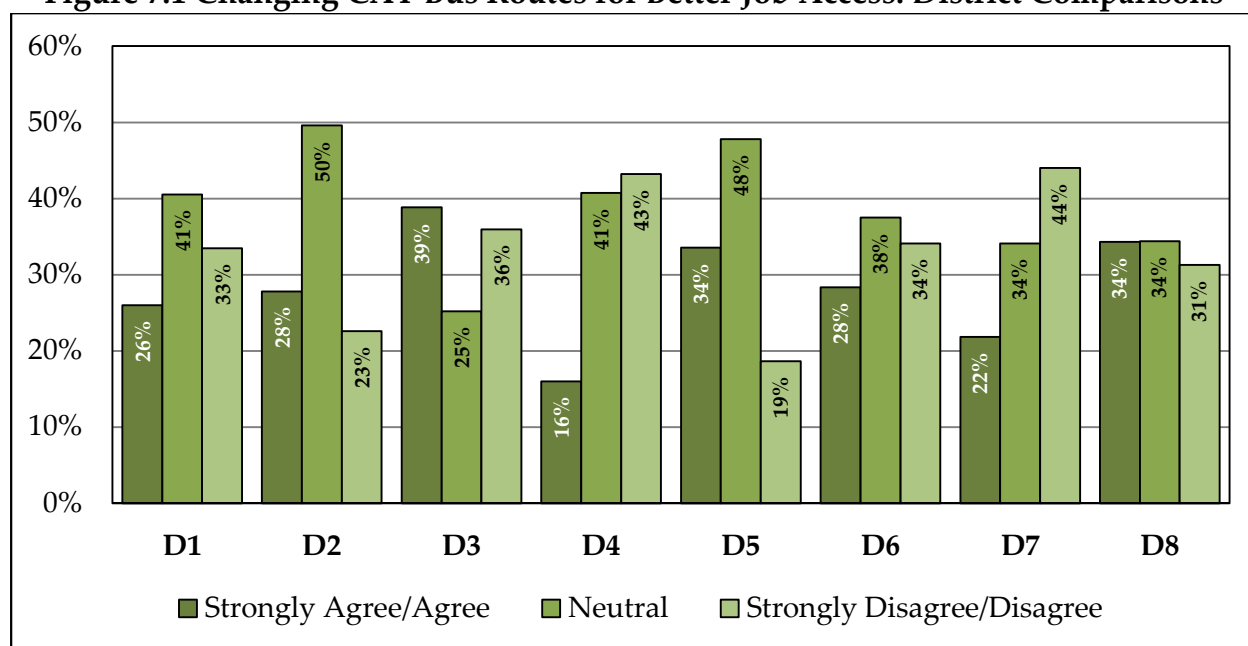
Attitudes toward changing bus routes for better job access vary significantly across districts. See Table 7.1. Districts 2, 3, 5, and 8 are more likely to agree with changing routes, and Districts 5 and 8 are more likely to have an opinion about changing routes. About one-fourth of residents in Districts 3, 5, and 8 agree that changing bus routes would give them better access to jobs.

Table 7.1 CAT Bus Routes: District Comparisons

"It would benefit me if CAT bus routes were changed for better access to jobs."	D1	D2	D3	D4	D5	D6	D7	D8
Strongly Agree/Agree	17%	19%	24%	11%	25%	17%	14%	24%
Strongly Disagree/Disagree	26%	34%	17%	27%	33%	23%	23%	23%
Neutral	22%	16%	22%	29%	13%	20%	30%	21%
N/A or Don't Know	35%	30%	37%	34%	30%	40%	33%	32%

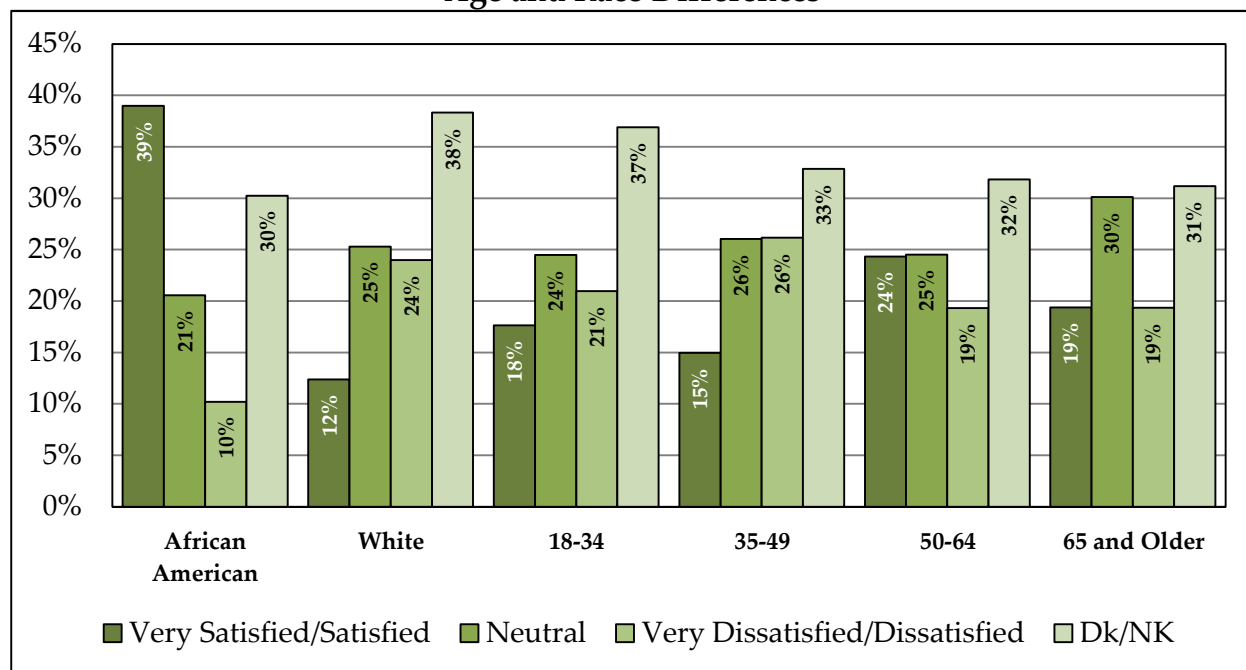
Figure 7.1 below presents the distribution of responses from survey participants not answering with "N/A or Don't Know" across districts. For example, of District 1 residents who expressed an opinion other than "N/A or Don't Know," 41% were neutral about whether changes in CAT bus routes would better link them to jobs. Residents in most districts are either neutral or agreed that changing bus routes could help them. Residents in Districts 4 and 7 were more likely to disagree.

Figure 7.1 Changing CAT Bus Routes for Better Job Access: District Comparisons



This issue also affects age and race categories differently, as indicated in Figure 7.2 on the following page. African Americans in Chatham County were more likely to agree (39% compared to 12% of White residents), and persons between 50 and 64 were significantly more likely to agree that changing bus routes for better job access could benefit them.

**Figure 7.2 Changing CAT Bus Routes for Better Job Access:
Age and Race Differences**



Economic Self-Sufficiency: Jobs Matching Skills and Opportunities for Advancement, Access to Childcare

Optimal job accessibility also includes having skills that match job opportunities, awareness of opportunities for career advancement, and the ability to access childcare services matching one's work schedule.

Sixty-two percent of county residents believe there are job opportunities that match their skills compared to 51% of 2015 respondents. Twelve percent disagree with this statement, 14% are neutral, and 11% answered "N/A or Don't Know." Also improved over 2015, 60% of county residents are aware of opportunities for job and career advancement that are available to them, as compared to 44% in 2015. Twelve percent of residents disagree, 15% are neutral, and 12% answered "N/A or Don't Know."

Perceptions of job opportunities matching skills are not equally held by residents across the districts. In Table 7.2, 79% of District 7 residents feel that job opportunities match their skills compared to 63% of District 2 and 3 residents. Nineteen percent of District 3 and 5 residents disagree with this statement.

District 1, 2, and 7 residents are more likely to agree that opportunities for career advancement are available to them. With "N/A/Don't Know" responses eliminated,

about 72% of these residents perceive opportunities for advancement compared to a low of 64% of residents in District 5. Disagreement with this statement is highest in Districts 3 and 5 (20% and 21%, respectively) and lowest in 2 (10%) and 4 (8%).

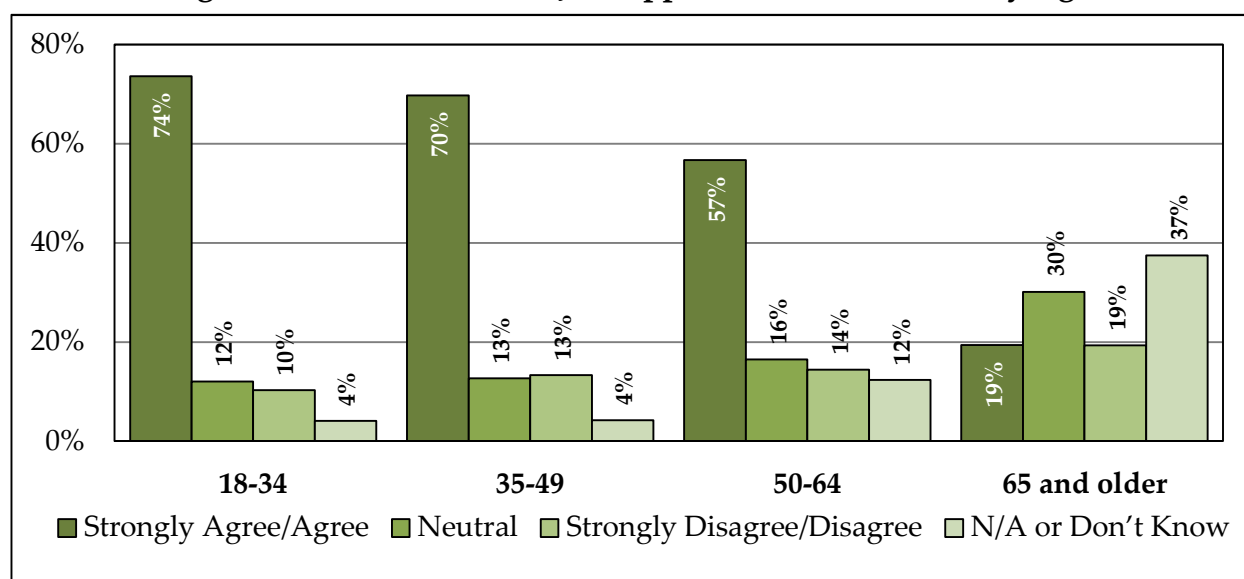
**Table 7.2 Job Opportunities Matching Skills
and Career Advancement Opportunities by District**

"There are job opportunities available that match my skills."	D1	D2	D3	D4	D5	D6	D7	D8
Strongly Agree/Agree	74%	63%	63%	78%	61%	74%	79%	72%
Neutral	14%	21%	18%	15%	20%	14%	13%	15%
Strongly Disagree/Disagree	12%	16%	19%	7%	19%	13%	9%	13%
"Opportunities for job and career advancement are available to me."								
Strongly Agree/Agree	72%	71%	68%	68%	64%	68%	72%	67%
Neutral	17%	20%	12%	24%	15%	17%	18%	17%
Strongly Disagree/Disagree	11%	10%	20%	8%	21%	15%	11%	12%

Perceptions regarding job opportunities matching skills did differ significantly by race, as noted in Figure 7.3. About 55% of Black residents agree that job opportunities match their skills compared to 65% of White residents.

Differences by age are distributed in a predictable manner. Younger respondents are more likely to agree that job opportunities are available that match their skills, while older residents (presumably with more years of experience and less flexibility defining their skill-sets) are less likely to agree.

Figure 7.3. Match between Job Opportunities and Skills by Age

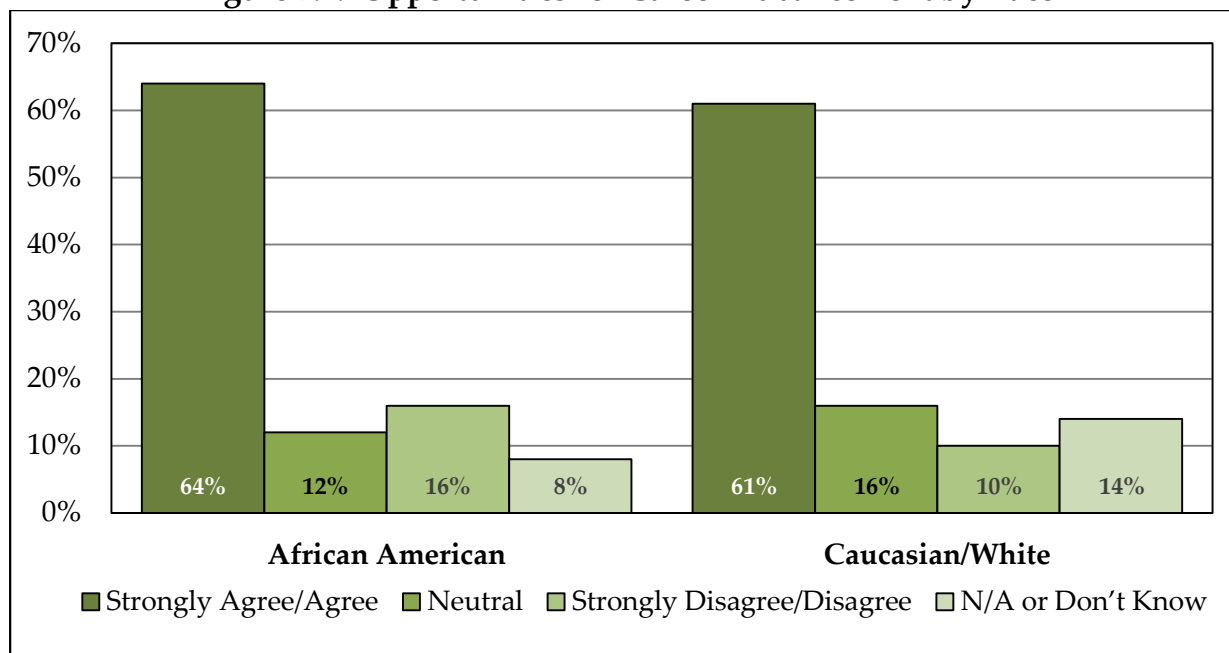


With respect to opportunities for career advancement, there was little difference across the age groups, except for those aged 65+ who predictably opted into the “N/A or Don’t Know” category.

Black residents and White residents differed somewhat about whether opportunities for career advancement are available. Both groups are similar in levels of neutral response; however, Black residents are more likely to agree (64%) that career advancement opportunities are available as compared to 61% of White residents.

The proportion agreeing that career opportunities are available are about twenty percentage points higher as compared to responses by race in 2015.

Figure 7.4. Opportunities for Career Advancement by Race



Regarding the statement, “I have access to childcare services matching my work schedule,” 62% responded “N/A or Don’t Know” with 16% “Strongly Agree/Agree,” 9% “Disagree/Strongly Disagree” and 14% “Neutral.” This was a new question in 2018.

At the district level, 50% of the residents in District 4 strongly agreed/agreed about access to childcare, but that agreement fell to 27% in District 5 and 30% in District 7. White residents are more likely (35%) than Black residents (28%) to have access to childcare that matches their work schedule. Further, residents from households with greater than \$50,000 in household income agreed at a rate of 44% as compared to 29% for households with less than \$50,000 in household income.

Economic Self-Sufficiency: Income Development and Asset Building: Knowledge of Financial Resources

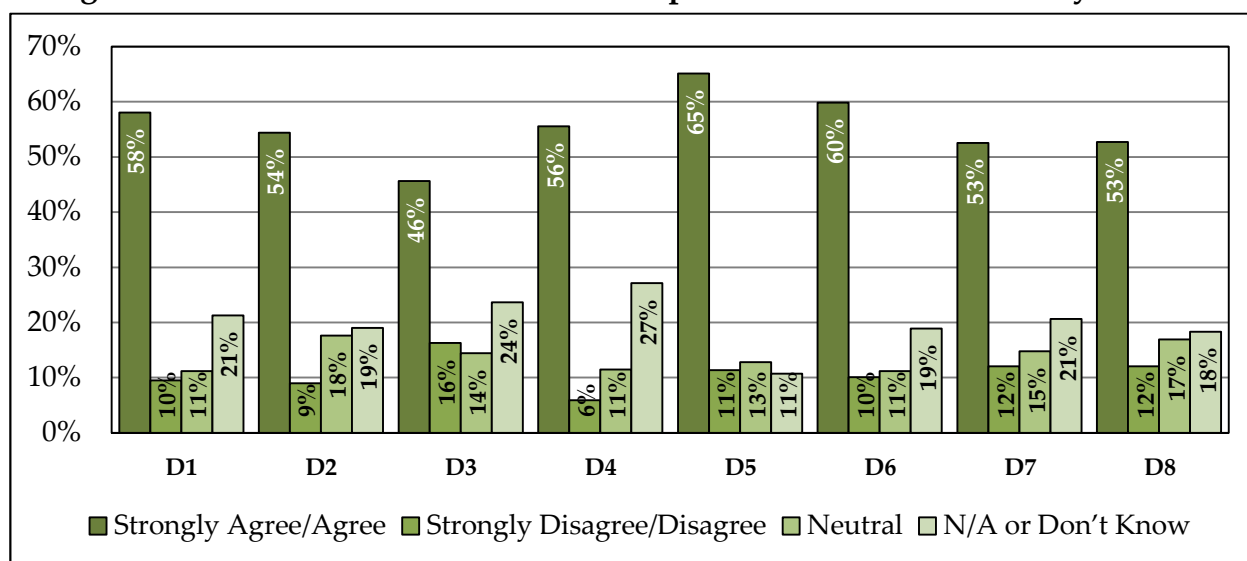
Another aspect of economic self-sufficiency is being aware of resources that can help one to achieve educational goals that in turn lead to better career opportunities and advancement. Access to the internet for both job-search and educational advancement is fundamental; 92% of respondents stated “Strongly Agree/Agree” to having internet access with only 4% lacking access and 4% responding “N/A” or “neutral.”

Knowledge of financing one’s educational goals is important in development of human capital and economic self-sufficiency. Fifty-five percent of county residents are aware of financial aid and resources that can support educational goals. Eleven percent are not aware of such resources, while 14% are neutral (20% answered “N/A/Don’t Know”). Awareness of these resources is higher among 18-34 year olds (71% agree) as compared to 60% of persons aged 35-49, and 47% of those aged 50-64. Also, only 10% of 18-34 year-olds selected the “N/A/Don’t Know” response.

Comparison of resident awareness of resources to help achieve educational goals by race yielded some differences. Excluding “N/A/Don’t Know” categories, 75% of African Americans and 65% of Whites are aware of resources. However, White residents are more likely (23%) to answer “N/A or Don’t Know” about financial resources as compared to Black residents (9%).

Awareness of resources is lowest in District 4 (46%) and highest in District 5 at 65%, as indicated in Figure 7.5. The proportion of residents answering “N/A or Don’t Know” to this question is highest in Districts 4, 3, 1 and 7 (in descending order).

Figure 7.5. Awareness of Resources to Help Meet Educational Goals by District

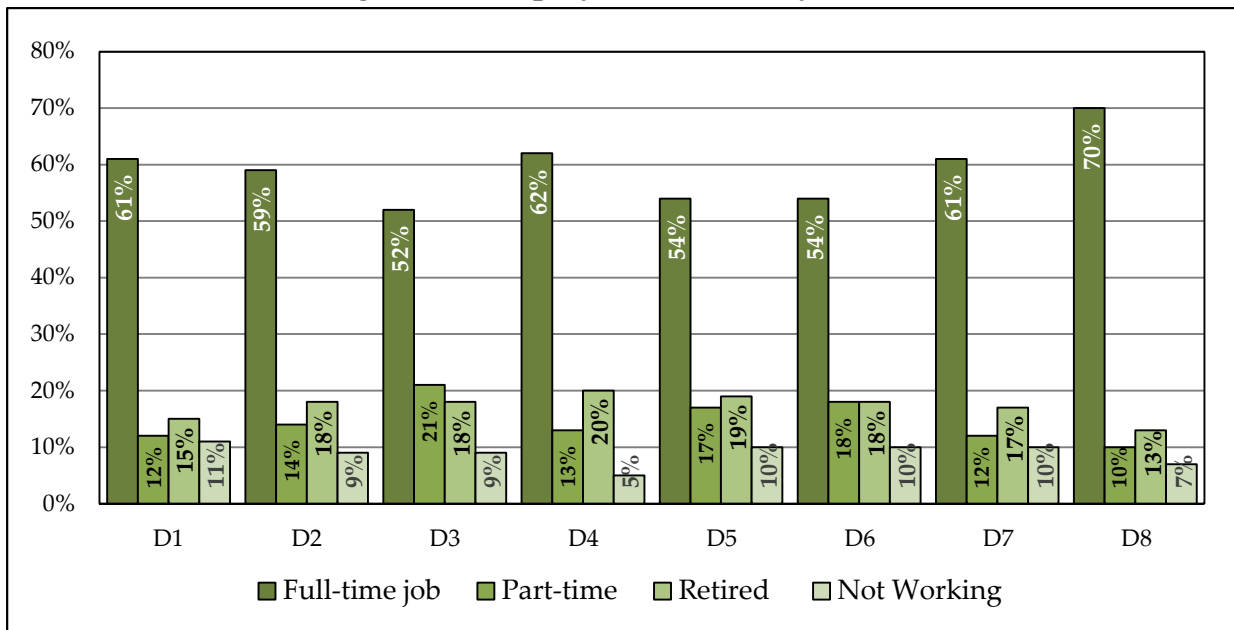


Income Development and Asset Building: Employment Status and Homeownership Rates

While being aware of resources to aid in meeting educational goals is important for improving the economic condition of one's future, it is essential to consider the current status of Chatham County residents in terms of employment and homeownership rates. About 59% of residents report holding a full-time job in 2018, 14% worked part-time (less than 30 hours a week), 18% were retired, and 8% were not working. These figures are nearly identical to the responses from 2015.

Notable differences are apparent with respect to district, race, and age, as shown in Figures 7.6 and 7.7. District 3 reports the lowest proportion of those working full-time (53%) as compared to the high of 70% in District 8. Part-time employment in District 3 is highest at 23%, compared to the low of 10% in District 8. The proportion of residents "not working" (but not retired) is clustered at roughly 10% for Districts 1, 2, 3, 5, 6, and 7. The lowest "Not Working" figures are reported for District 4 (5%) and District 8 (7%).

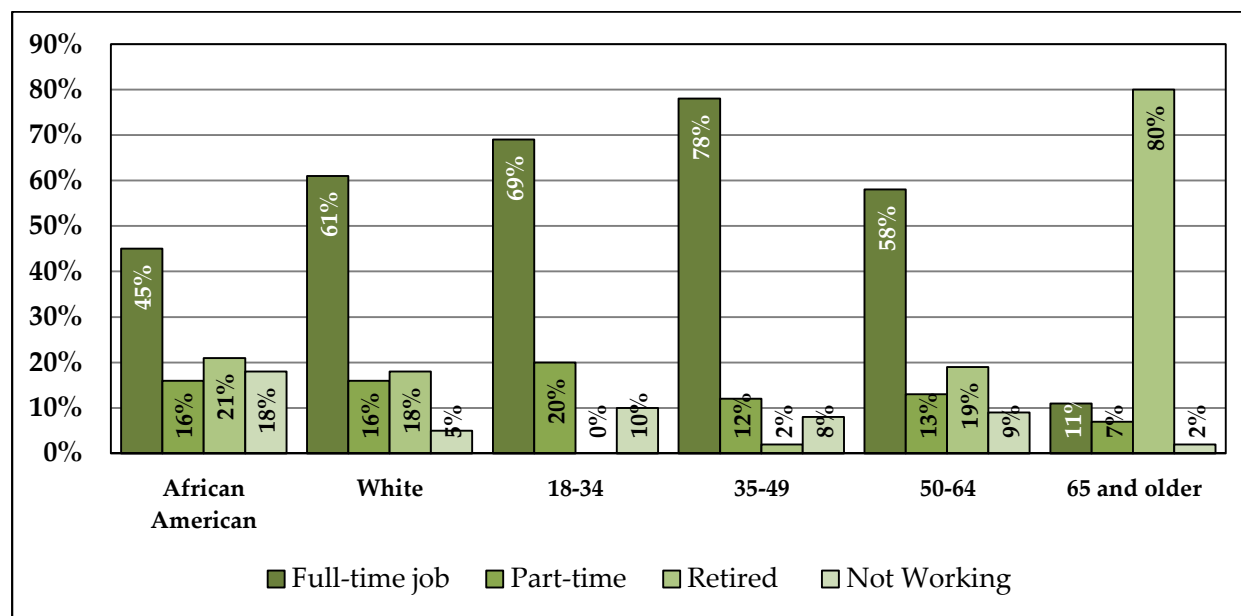
Figure 7.6. Employment Status by District



Substantial differences are apparent when comparing employment status between Black and White survey respondents (see Figure 7.7 on the following page). White residents are more likely to report being fully employed compared to Black residents: 62% versus 49%. Further, 18% of Black residents report not working (not retired) as compared to 5% of White residents. In 2015, 13% of Black survey respondents were not working in 2015 compared to 7% of White respondents.

When comparing responses by age, those aged 35-49 are most likely to be fully employed (78%) compared to 68% of those aged 18-34 and 58% of those aged 50-64. Although 80% of residents age 65 and older are retired, 12% still report working full-time, 9% are working part-time, and 2% reported not working.

Figure 7.7. Employment Status by Race and Age



Several cross-tabulations of employment status and other variables were developed. Among Chatham County residents reporting being fully employed in 2018, 21% of White residents are low income (defined as less than \$50,000 per household), while 53% of fully employed African American residents are in low income households.

Notable differences are present when evaluating employment status by income status:

- 27% of full-time employed residents report annual household income of less than \$50,000 compared to 73% of fully employed residents reporting \$50,000 and higher in total annual household income.
- 51% of residents working part-time report annual household income of less than \$50,000.
- 59% of residents not working report annual household income less than \$50,000.
- 40% of retired residents report annual household income less than \$50,000.

Of county residents in lower income households, 37% held full-time jobs, 46% worked part-time, 37% were retired, and 9% were not working in 2018. Conversely, of the higher income households, 57% worked full-time, 30% part-time, 30% were retired, and 4% reported not working.

Homeownership Rates by District, Age, Income, and Race

A home is generally viewed as one of the most significant economic assets a person can attain. This section focuses on homeownership in Chatham County by district, age categories, income levels, and race. Overall, 65% of the respondents live in their own homes which is a decrease from the 2015 response of 73%.

Homeownership rates vary across the eight districts, ranging from 55% of District 5 residents to a high of 80% in District 4 (see Table 7.3). Along with District 4, Districts 1 and 7 have the highest homeownership rates. Patterns of renting vs homeownership have shifted from 2015 to 2018 with District 1, 2, and 3 residents reporting decreased proportion of renters to homeowners while Districts 4, 5, 6, 7, and 8 report increased rental housing.

Table 7.3 Living Situation by District

	D1	D2	D3	D4	D5	D6	D7	D8	Total
Owner-occupied Housing	74%	61%	61%	80%	55%	64%	66%	64%	65%
Rental Housing	20%	34%	29%	18%	42%	32%	26%	34%	29%
Staying with Family or Friends	7%	5%	9%	2%	4%	5%	8%	2%	5%

About 31% of homeowners report annual household income less than \$50,000. Comparing homeowners by racial category shows that 70% of homeowners are White, 20% are African American, and 10% are some other category. Further,

- Among lower income homeowners, 34% are Black and 66% are White.
- Among upper income homeowners, 17% are Black and 83% are White.

Table 7.4 below presents homeowner/renter status cross-tabulated by the four age categories. A large majority of residents 35 and older are homeowners (ranging from 75% to 87% in older age groups) as compared to 42% of residents between ages 18 and 34. Substantially more (10%) younger adults in Chatham County report staying with friends and/or family.

Table 7.4 Living Situation by Age Differences

	18-34	35-49	50-64	65 and older
Owner-occupied Housing	42%	75%	78%	87%
Rental Housing	48%	23%	19%	12%
Family/Friends	10%	2%	3%	1%

Living Paycheck to Paycheck

Achieving economic self-sufficiency is fostered by earning enough income to build savings and coping with financial emergencies. Overall results from this survey indicate that 44% of Chatham County residents live paycheck to paycheck at their current jobs. (This compares to 42% in 2015.) Forty-one percent report they do not live paycheck to paycheck, 13% are neutral, and 9% answered “N/A/Don’t Know.”

Living paycheck to paycheck varies notably by race, age, homeowner status, and income:

- 58% of Black residents live paycheck to paycheck compared to 36% for White.
- 48% of residents aged 18-34 live check to check compared to 46% of those aged 35-49 and 39% of those aged 50-65.
- 59% of renters live paycheck to paycheck compared to 24% of homeowners.
- 48% of residents reporting annual household income less than \$50,000 live paycheck to paycheck compared to 25% of households with income exceeding \$50,000.

Cross-tabulation of living paycheck to paycheck by district uncovers substantial differences at the district level. District 1 and 4 have the lowest reported rates of living paycheck to paycheck, 28% and 31%, respectively. In comparison, 55% of District 3 residents report similarly along with 52% of District 2 residents.

Table 7.5 Living Paycheck to Paycheck by District

“I live paycheck to paycheck at my current job.”	D1	D2	D3	D4	D5	D6	D7	D8	Total
Strongly Agree/Agree	28%	52%	55%	31%	61%	43%	48%	41%	44%
Neutral	14%	11%	12%	13%	16%	17%	9%	21%	14%
Strongly Disagree/Disagree	57%	38%	33%	55%	23%	40%	38%	38%	41%

Economic Self-Sufficiency: Housing Cost Budget

One survey question sought information about the economic burden facing residents in terms of how much they spend on housing, whether that is a mortgage or rental costs. Respondents were asked whether they strongly agree, agree, are neutral, disagree, or strongly disagree with the statement, “I spend 1/3 or more of my budget on housing (mortgage or rent).” Persons reporting spending more than 33% of their budget on housing costs are at risk of being under great financial stress.

Overall, an increased percentage of Chatham County residents (56%) “strongly agree” or “agree” that more than 33% of their budget is consumed by housing costs in 2018, as compared to 53% in 2015. In fact, 34% “strongly agree” with this statement (up five percentage points from 2015). Another 31% “disagree” or “strongly disagree,” 7% are neutral, and 5% answered “N/A/Don’t Know.”

Housing Cost Budget by Income, Homeowner Status, Age, Race, District

Additional detail is revealed by considering housing cost by income level, homeowner status, race, age, and district. Analysis reveals notable challenges facing several sub-groups.

- 59% of residents reporting annual household income less than \$50,000 spend more than 33% of their budgets on housing compared to 42% of those earning \$50,000 and over.
- Spending more than 33% of budgets on rent negatively impacts asset building, and this survey shows that residents who rent are significantly more likely to be in this situation compared to homeowners: 74% of renters stated that they spend more than one-third of their budget on housing compared to 48% of homeowners.
- Financial stress due to housing costs is also felt much more by those age 18-34: 69% of those residents spend more than a third of their budget on housing compared to 58% of those age 35-49, 55% of those age 50-64, and 44% of residents 65+.
- African American residents (73%) are more likely to spend more than one-third of the budget on housing as compared to White residents (54%).

Notable housing cost stress is felt more by a majority of residents in seven of the eight districts, as indicated in Table 7.6 below. In total, 59% of county residents spend more than 33% of their budgets on housing costs. This varies from a high of 72% of residents in District 5 to a low of 49% of District 1 residents.

Table 7.6 Spending More Than 1/3 of Budget on Housing: District Comparisons

“I spend 1/3 or more of my budget on housing (mortgage or rent).”	D1	D2	D3	D4	D5	D6	D7	D8	Total
Strongly Agree/Agree	49%	58%	59%	56%	72%	63%	50%	65%	59%
Neutral	9%	10%	9%	7%	5%	7%	10%	4%	8%
Strongly Disagree/Disagree	42%	32%	32%	20%	23%	30%	40%	31%	33%



VIII. Health and Wellness

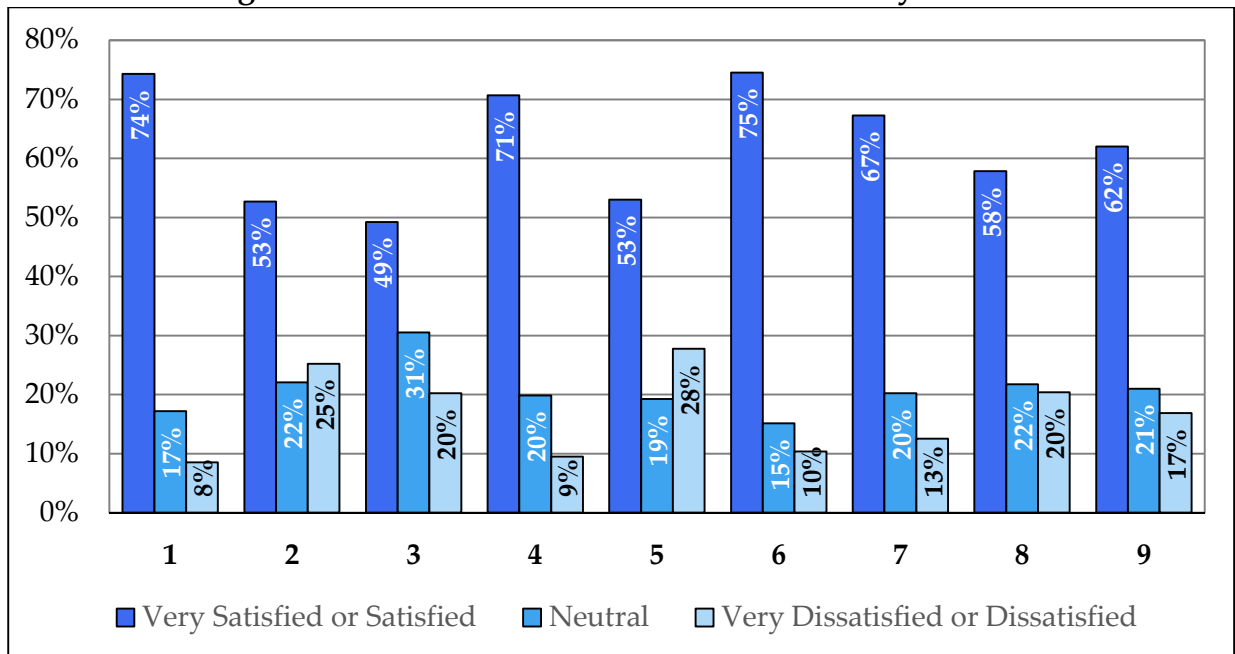
The survey had ten questions about the health of Chatham County residents. Respondents were asked to rate their agreement or disagreement with statements on diet, alcohol use, tobacco use, disease, exercise habits, healthcare, and health insurance.

Satisfaction with Medical Services in Neighborhoods

Survey respondents were asked how satisfied they are with medical services (treatment, medicine) in their neighborhoods. Fewer responses in 2018 than 2015 indicated satisfaction with medical treatment, only 56% of residents are very satisfied (14%) or satisfied (42%) with medical services in the county, down from 64% in 2015, with 15% of residents being very dissatisfied (6%) or dissatisfied (9%). Another 18% are neutral regarding this question.

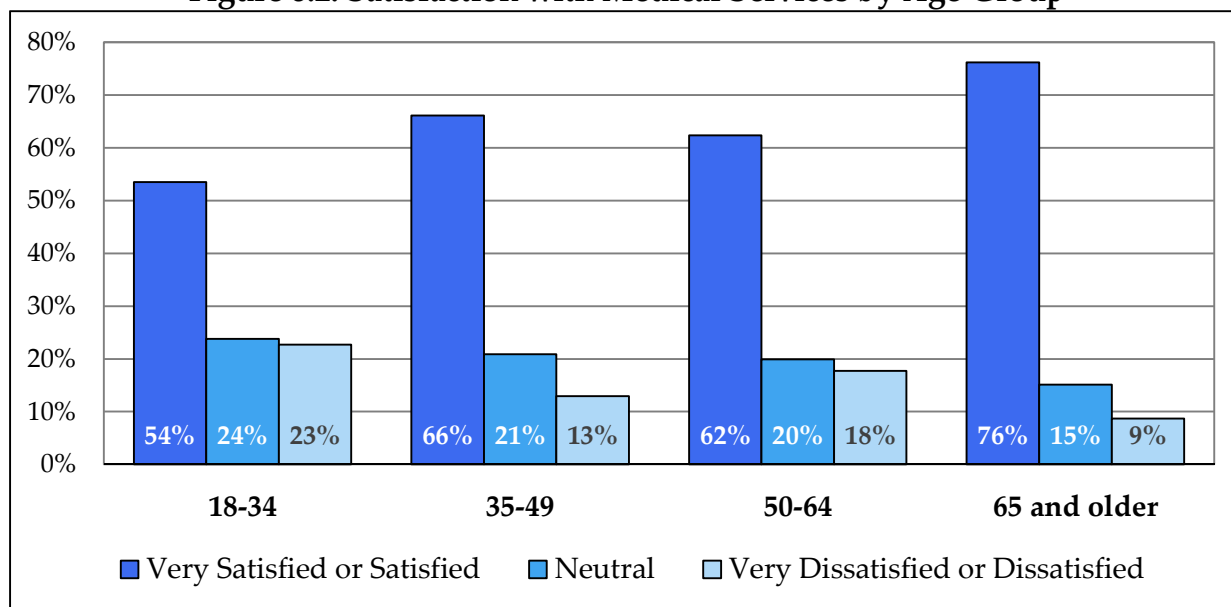
As indicated in Figure 8.1 below, respondents in District 1, 6 and 4 are more satisfied (69%, 68% and 64%, respectively) compared to other districts in which satisfaction ranged from 43% to 52%. The most dissatisfaction was recorded in District 5, with 28% of residents dissatisfied or very dissatisfied.

Figure 8.1. Satisfaction with Medical Services by District



Age of respondent also influences satisfaction with medical services: 76% of respondents in Chatham County who are 65 years of age and older are very satisfied/satisfied with medical services compared to 66% of respondents aged 35-49 and 55% of respondents aged 18-34.

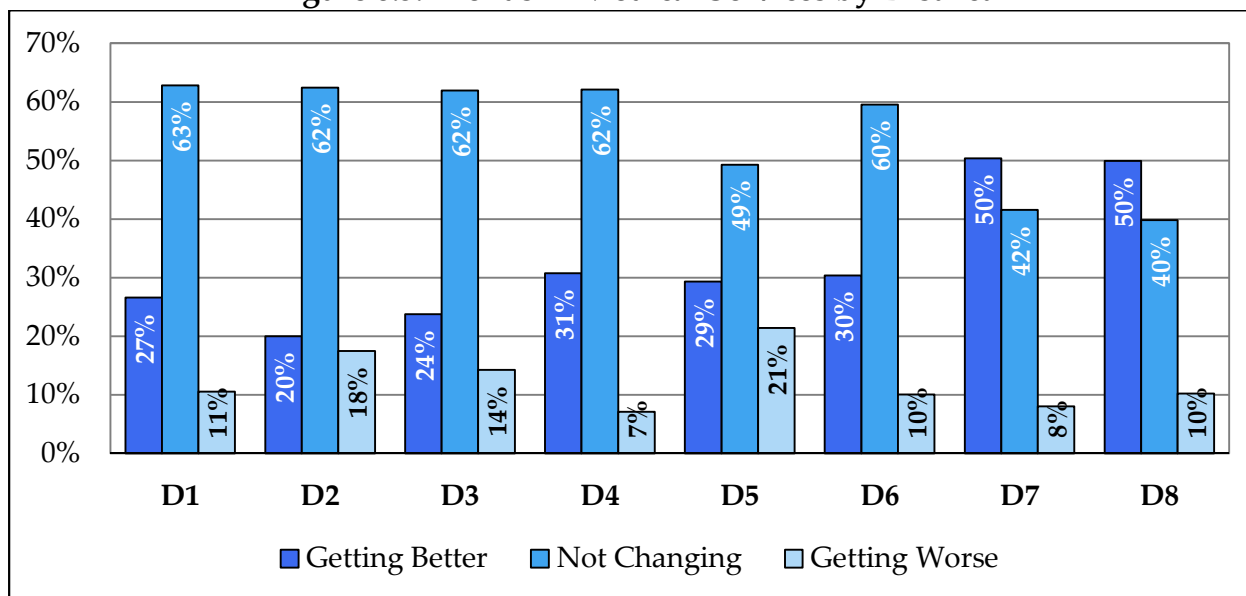
Figure 8.2. Satisfaction with Medical Services by Age Group



Respondents were asked to rate the trends in the quality of medical services in their neighborhoods. Attitudes toward the trend in quality of medical services declined between the survey periods with 27% of residents perceiving changes for the better, down from 31% in 2015. Only 3% stated that medical services are “getting much worse,” while another 7% believe they are “getting slightly worse,” and 44% see no change. Almost 19% of residents responded “N/A or “Don’t know” to this question.

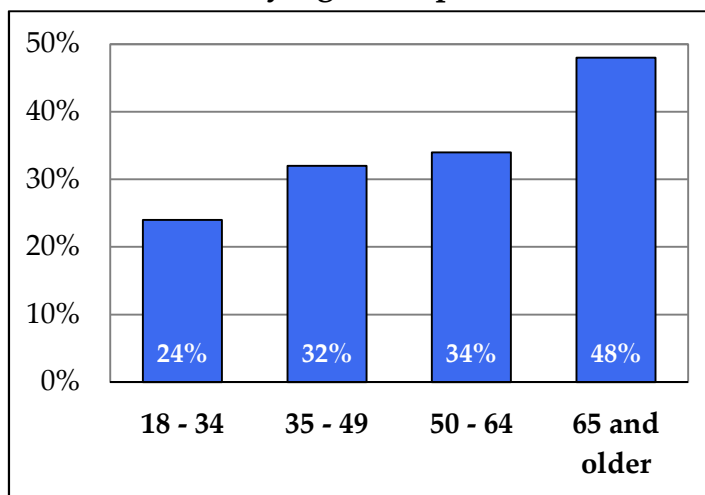
At the district level (Figure 8.3 on the following page), perceived trends in medical services vary notably. Residents in Districts 7 and 8 are more likely than other districts to view medical services as improving. The proportion of residents reporting improving medical services ranged from 20% in District 2 to 50% in Districts 1 and 8.

Figure 8.3. Trends in Medical Services by District



Significant differences were also apparent with age. Respondents in the 65+ age category are more likely to see medical services as getting better (48%) compared to 24% of 18-34 year-olds, 32% of 35-49 year-olds, and 34% of 50-64 year-old respondents. A significant proportion of respondents in all age groups were neutral in response, ranging from 45% of those 65+ to 62% of those 18-24. The greatest dissatisfaction was reported by the 35-49 cohort at 16%.

Fig. 8.4. Medical Services "Getting Better" by Age Group



While a majority of respondents are satisfied with medical treatment services, a significantly smaller proportion report satisfaction with behavioral/mental health care. One-fourth of respondents are satisfied/very satisfied (5% "very satisfied" and 20% "satisfied." Dissatisfaction was reported by 18% of residents and 35% did not know, while 21% gave a "neutral" response. Forty-five percent of respondents agree they have access to behavioral/mental health services, but 14% lack access, 13% are neutral, and 28% "N/A or Don't Know." Awareness of the trends in behavioral health services appears limited; 37% have a neutral response and 40% "Don't Know/NA," while 12% perceive improvement in services and 10% report worsening,

The differences among responses by district to “satisfaction with behavioral health services” were relatively small, as presented in Table 8.1. Respondents from District 1 reported highest satisfaction at 45% and District 5 was lowest at 32%. However more than half of all responses by District were “N/A” or Neutral. Twenty-four percent of respondents in District 1 were the most dissatisfied with mental/behavioral health services.

Table 8.1 Satisfaction with Mental/Behavioral Health Services by District

Mental/Behavioral Health Services	D1	D2	D3	D4	D5	D6	D7	D8	Total
Strongly Agree/Agree	45%	38%	39%	44%	32%	43%	42%	39%	38%
Neutral	31%	29%	41%	39%	38%	27%	34%	24%	32%
Strongly Disagree/Disagree	24%	33%	32%	17%	30%	30%	24%	37%	28%

In Table 8.2, differences among responses by District of “trend in quality of behavioral health services” are clearly present. District 5 had the highest positive outlook with 31% perceiving improvement and District 3 had the lowest with only 9% seeing improvement.

A large majority of respondents across the districts reported no change in perceived trend for mental health services. This ranged from a low of 49% in District 5 to a high of 76% in District 4. The “Getting Worse” category is reported by about 16% to 20% of residents in six of eight districts. District 6 residents are most pessimistic about trend in mental health services.

Table 8.2 Trends of Mental/Behavioral Health Services by District

Mental/Behavioral Health Services	D1	D2	D3	D4	D5	D6	D7	D8	Total
Getting Better	15%	13%	9%	18%	31%	21%	29%	23%	20%
Not Changing	69%	68%	73%	76%	49%	54%	56%	61%	62%
Getting Worse	16%	19%	18%	6%	20%	26%	16%	16%	17%

Healthy Lifestyles and Illnesses

Ten questions in the survey measured aspects of healthy lifestyles and serious illnesses facing Chatham County residents. Overall, the trend and some of the news is positive. For example, about 75% of survey respondents see a family doctor for routine care, 88% have health insurance, and only 5% of residents report someone in the household has cancer. However, the proportion of residents facing struggles with diabetes and high blood pressure are higher: about 14% of respondents report they or other household members have diabetes, and 31% state they or others in the household have high blood pressure. However, but both figures are about two percentage points lower than in the 2015 survey. In addition, 23% of households report a member needing mental/behavioral health support.

Two questions related to diet and exercise as key components of healthy lifestyles. About 63% of Chatham County residents acknowledge they do not eat five cups of fruits/and or vegetables daily, and only 1% selected the “N/A/Don’t Know” response to this question. Nearly half of residents report exercising regularly; 49% exercise at least 30 minutes five times a week. However, almost 50% of county residents do not exercise regularly and 1% were “N/A/Don’t Know” on this question.

Other obvious aspects of healthy lifestyles concern smoking cigarettes and alcohol consumption. Fourteen percent of residents report they or someone in the household smokes cigarettes (down from 17% in 2015), and 17% report they or household members drink more than two drinks of alcohol daily. Conversely, more than four out of five of respondents or their household members do not smoke cigarettes or drink more than two drinks daily.

Table 8.3 presents responses to these ten health-related survey questions. It is noted that the “N/A or Don’t Know” category was two percent for all items except for those needing mental/behavioral health support (3%). This represents a significant increase in awareness about smoking, alcohol consumption, diabetes, high blood pressure and cancer from the 2015 survey in which from 4% to 8% were unaware of these potential health issues in their household.

Table 8.3 Healthy Lifestyles and Illnesses Questions

Questions	Yes	No	NA/DK
I eat five cups of fruits and/or vegetables daily.	35%	63%	1.4%
I exercise regularly (at least 30 minutes 5 times a week).	48%	49%	1.5%
I or someone in my household currently smokes cigarettes.	14%	84%	1.2%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	17%	81%	1.6%
I or someone in my household has diabetes	14%	84%	1.4%
I or someone in my household has high blood pressure	31%	66%	1.3%
I or someone in my household has cancer	5%	92%	1.6%
I have a family doctor I see for routine care.	74%	24%	0.6%
I or someone in my household has need for mental/behavioral health support.	23%	73%	3.0%
I have health insurance	87%	11%	0.5%

Table 8.4 below provides percent agreement with the ten health-related questions by district. Differences are apparent across each issue, but no clear pattern emerges. For example, residents reporting eating a healthy diet are more likely to be in Districts 1, 2, 3, and 4, but District 1 also reports one of the highest percentages of smoking cigarettes and District 2 reports higher daily alcohol consumption. Over half of residents in Districts 1, 3, 4, and 7 exercise regularly, and 84% of District 1 residents see a doctor regularly for routine care. High blood pressure ranges from a high of 38% in District 6 to a low of 24% in District 4. Disparity in health insurance is notable with Districts 1, 4, 6, and 7 reporting from 93% to 95% with health insurance, but Districts 3 and 5 at 79% with health insurance.

Table 8.4 Percent Agreement with Health and Wellness Questions by District

Questions	D1	D2	D3	D4	D5	D6	D7	D8
I eat five cups of fruits and/or vegetables daily.	38%	45%	37%	37%	31%	30%	34%	31%
I exercise regularly (at least 30 minutes 5 times a week).	58%	44%	52%	51%	37%	46%	55%	47%
I or someone in my household currently smokes cigarettes.	13%	16%	20%	5%	19%	16%	13%	10%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	20%	26%	22%	14%	13%	10%	15%	14%
I or someone in my household has diabetes	10%	13%	16%	8%	20%	15%	9%	18%
I or someone in my household has high blood pressure	32%	29%	31%	24%	35%	38%	30%	34%
I or someone in my household has cancer	4%	5%	7%	7%	4%	7%	3%	8%
I have a family doctor I see for routine care.	84%	71%	71%	80%	73%	81%	74%	68%
I or someone in my household has need for mental/behavioral health support.	27%	28%	26%	16%	23%	25%	23%	18%
I have health insurance	93%	85%	79%	95%	79%	94%	93%	89%

Consideration of these aspects of healthy lifestyles and illnesses by age categories reveals differences and highlights the health concerns faced by older residents in Chatham County. Sixty-two percent of residents age 65+ are coping with high blood pressure in their household, and 12% of individuals face cancer in their household compared to only 2% of 18-34-year olds. Diabetes is present in the 49% of households of those aged 50 and above as compared to about 16% of those aged 18-40. Seeing a doctor for routine care predictably varies by age, ranging from 59% of 18-34-year olds to 97% of those 65+.

One issue that stands out is the percent of county residents who smoke cigarettes or live with someone who does. Fourteen percent of younger individuals (18-34) answered affirmatively to this question compared to about 16% of those between 35 and 64, and only 9% of those aged 65 and older. Younger respondents are likewise more likely to report a need for mental/behavioral health services: 29% of 18-34 year olds, 28% of 35-49 year olds, 21% of 50-64 year olds, and only 11% of those 65+.

As would be expected, nearly all of the 65+ respondents have health insurance (97%) because of Medicare eligibility. The youngest respondents, 18-34 years old report 83% with health insurance, a figure which increases to 90% for those aged 35 to 64.

Table 8.5 Percent Agreement with Health and Wellness Questions by Age

Questions	Age 18-34	Age 35-49	Age 50-64	Age 65+
I eat five cups of fruits and/or vegetables daily	30%	43%	40%	33%
I exercise regularly (at least 30 minutes 5 times a week)	50%	46%	51%	51%
I or someone in my household currently smokes cigarettes	14%	17%	16%	9%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u>	14%	21%	19%	16%
I or someone in my household has diabetes	6%	10%	18%	31%
I or someone in my household has high blood pressure	13%	27%	46%	62%
I or someone in my household has cancer	2%	6%	7%	12%
I have a family doctor I see for routine care	59%	79%	84%	97%
I or someone in my household has need for mental/behavioral health support	29%	28%	21%	11%
I have health insurance	83%	90%	89%	97%

Healthy Lifestyles and Wellness by Race

Cross-tabulating responses to health-related questions by race uncovered different patterns across the demographic groups, especially with respect to diabetes and high blood pressure.

- Over 30% of Black residents in Chatham County report having diabetes or living with someone who does, compared to 11% of White residents answering similarly.
- Even more dramatic is the difference between racial groups and high blood pressure: 51% of Black residents have high blood pressure or live with someone who does, compared to 25% of White residents.
- Differences in having a family doctor that one sees regularly for routine care did not vary as widely: 78% of African Americans agreed with this statement compared to 74% of Caucasians.

Black and White residents are roughly equally likely to report smoking, but White residents are more likely to report drinking more than two drinks daily. A little over 15% of White residents report they or someone in the household smoke cigarettes compared to 16% of Black residents, while almost 19% of White residents drink more than two drinks of alcohol daily compared to 13% of Black residents.



IX. Education

Four questions in the survey assessing neighborhoods in Chatham County addressed respondents' satisfaction with Pre-K/early childcare programs and public elementary, middle, and high schools. Four other questions were about perceptions of trends in the quality of public schools. Results are reported for the county, then cross-tabulated by district and age.

Satisfaction with Public Schools in Neighborhoods

Four questions asked about satisfaction with “my child’s” four categories of public schooling, but most respondents selected “Not applicable/Don’t know” to these questions. From 63% to 68% survey respondents answered N/A, suggesting they did not have a child in the public school system. The “N/A or Don’t Know” responses are eliminated from the following analysis in order to focus on residents reporting at least one child in their household and who were ostensibly more familiar with the public school system. As with all other results, these are weighted by district and age of respondent.

Of those residents in Chatham County with at least one child in the household, over 44% are very satisfied/satisfied with Pre-K and early childcare programs. (See Table 9.1 below.) This is a substantial decline from 2015 when 60% reported satisfaction. About 25% are neutral and 31% are very dissatisfied (16%) or dissatisfied (15%) with early childcare programs.

Table 9.1 Satisfaction with Schools

Satisfaction with Aspects of My Neighborhood:	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Pre-K/Early Childcare	19%	25%	25%	15%	16%
My child’s Public Elementary School	25%	25%	12%	21%	16%
My child’s Public Middle School	11%	25%	13%	29%	21%
My child’s Public High School	11%	24%	13%	27%	24%

About 50% of residents are very satisfied (25%) or satisfied (25%) with their children’s public elementary schools, while 11% are neutral and 37% are very dissatisfied (16%) or dissatisfied (21%). This, too, is a decreased level of satisfaction from the 2015 survey in which 58% were satisfied/very satisfied and only 25% were dissatisfied/very dissatisfied.

As noted above, dissatisfaction is higher with elementary schools than Pre-K/early childcare. Dissatisfaction is higher still with middle schools and high schools. About 50% of residents are very dissatisfied (21%) or dissatisfied (29%) with middle schools and 51% of residents are very dissatisfied (24%) or dissatisfied (27%) with their children’s public high schools. Thirteen percent selected the neutral response with respect to middle school satisfaction, and equally 13% are neutral about high schools. Only 36% of residents are very satisfied (11%) or satisfied (25%) with middle schools, and 35% are very satisfied (11%) or satisfied (24%) with high schools.

Satisfaction with Public Schools by District

Satisfaction with public schools in neighborhoods was analyzed by district. For this analysis, the “very satisfied” and “satisfied” response categories were collapsed into one overall category and “very dissatisfied” and “dissatisfied” choices were collapsed into another category. Neutral responses were also included in the cross tabulation. Responses are reported only for county residents with children in the household.

Significant differences are apparent across districts for all four public school questions as indicated in Table 9.2. Overall, District 4 has the highest satisfaction level, followed by Districts 1 and 8. In District 4, 70% of residents with children in the household are satisfied with early childcare, 87% are satisfied with elementary schools, 66% are satisfied with middle schools, and 69% are satisfied with high schools. District 8 has a 65% satisfaction rate with elementary schools, which is the second highest and is well behind District 4 which is a clear outlier with 22 percentage points separating these two districts.

**Table 9.2 Percent Very Satisfied/Satisfied with Public Schools
in Neighborhoods by District**

Questions	D1	D2	D3	D4	D5	D6	D7	D8
Pre-K/Early Childcare	53%	30%	41%	70%	34%	46%	26%	53%
My child’s Public Elementary School	52%	28%	51%	87%	35%	48%	34%	65%
My child’s Public Middle School	44%	26%	35%	66%	25%	25%	22%	44%
My child’s Public High School	38%	38%	35%	69%	27%	31%	20%	24%

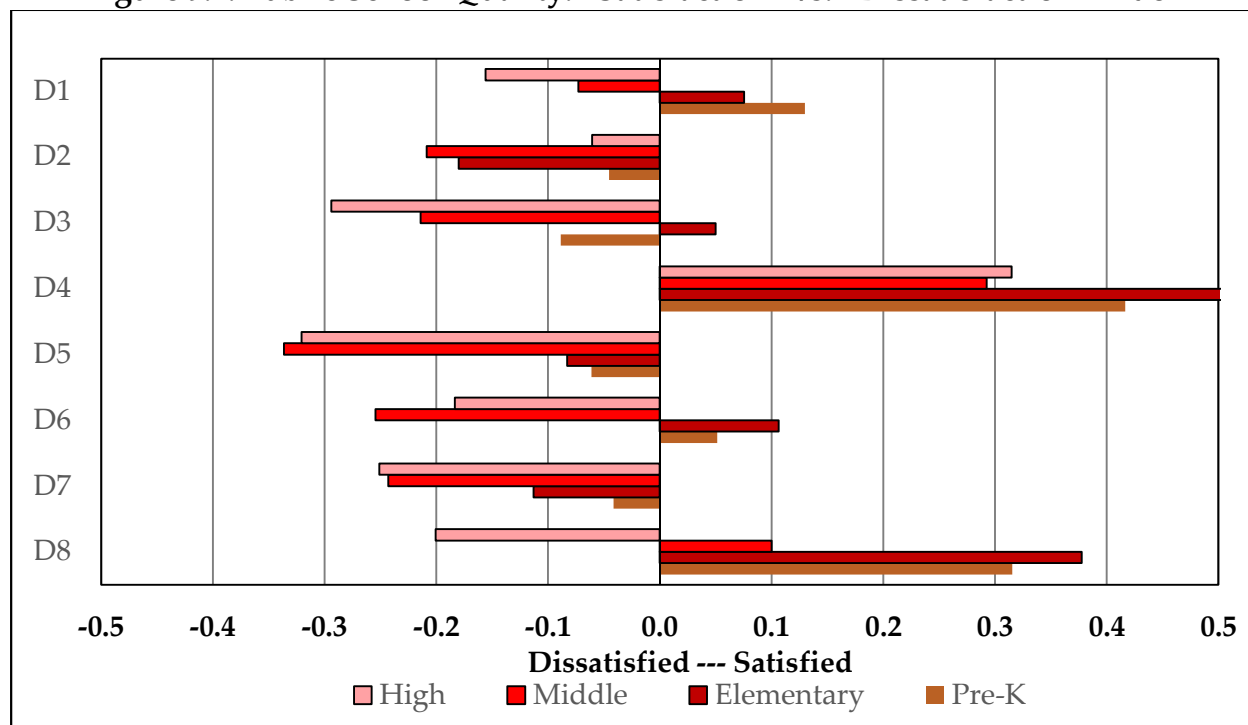
District 7 has the least satisfied residents. The lowest score for satisfaction with Pre-K/early childcare programs is in District 7 (26%), although District 2 is second at 30%. The lowest score for elementary school satisfaction is in District 2 (28%). Only 22% of residents in District 7 who expressed an opinion about public middle schools and high schools are

satisfied. However, it should be emphasized that even though the sample is weighted by district and age, the responses reported here reflect a smaller sub-sample of the data: only those residents with children in the household who did not respond “N/A or Don’t Know.” Thus, care should be taken when generalizing from this data.

Figure 9.1 below presents an index² of responses on satisfaction or dissatisfaction with public schools from each district. Possible values range from 1 to -1 with 1 corresponding to a response of “Very Satisfied” by all respondents and -1 corresponding to a response of “Very Dissatisfied” by all respondents. A score of 0 implies the average opinion is neutral.

District 4 and District 8 residents are clearly most satisfied with public schools, although only in District 4 is there satisfaction with public high schools. District 5 residents are least satisfied with the quality of public schools. Pre-K and early childhood education has generally satisfactory responses in four of eight commission districts.

Figure 9.1. Public School Quality: “Satisfaction” vs. “Dissatisfaction” Index



²The index is generated by a weighted average of responses. Responses of Very Dissatisfied, Dissatisfied, Neutral, Satisfied, and Very Satisfied are given weights of -1,-0.5, 0, 0.5, 1 respectively.

Satisfaction with Public Schools by Age

When public school satisfaction responses are cross-tabulated by age of respondent, differences are apparent. In general, the 35-49 age cohort expresses higher degrees of satisfaction with the lower grades, while the 65+ age group is more satisfied with high schools. Residents in the 18-34 age category are least satisfied with high schools. Satisfaction with upper grades is substantially lower than satisfaction with Pre-K and elementary schools for all age groups under 65 years old.

Table 9.3 Satisfaction with Public Schools in Neighborhoods by Age

Questions	18-34	35-49	50-64	65 and older
Pre-K/Early Childcare	41%	54%	42%	42%
My child's Public Elementary School	51%	51%	44%	52%
My child's Public Middle School	36%	31%	30%	50%
My child's Public High School	30%	25%	38%	57%

Trends in Quality of Public Schools

Respondents were also asked to rate the trends in the quality of Pre-K/early education, and public elementary, middle, and high schools in their neighborhoods. Most respondents replied in the "N/A or Don't Know" category (47% to 54%). However, 20% of residents view public elementary schools as improving, compared to 7% who perceive them as worsening, and 26% see no change. Only 12% and 11% of residents, respectively, view public middle and high schools as improving, while a nearly equal percentage see middle and high schools as worsening.

Table 9.4 Trends in Quality of Public Schools in Neighborhoods

Quality of Public Schools in Neighborhoods	Getting Much Worse	Getting Slightly Worse	Not Changing	Getting Slightly Better	Getting Much Better	N/A/ Don't Know
Pre-K/Early Childcare	3%	4%	26%	14%	6%	47%
My child's Public Elementary School	5%	7%	20%	16%	6%	47%
My child's Public Middle School	5%	7%	21%	9%	3%	54%
My child's Public High School	7%	6%	26%	5%	6%	50%

As indicated in Table 9.5, responses about trends in early childcare and pre-k education display a stronger presence of improvement in the eyes of residents than declining quality. Only in District 1 are more residents viewing conditions as worsening than improving (14% to 12%). Overall, respondents from Districts 3, 4, 5, and 8 view quality as improving more quickly than residents in Districts 1, 2, 6 and 7.

**Table 9.5 Trends in Quality of Early Childcare & Pre-K Education
in Neighborhoods by District**

Quality of Early Childcare & Pre-K	Getting Worse	Getting Better	Not Changing	N/A/ Don't Know
District 1	14%	12%	28%	45%
District 2	6%	13%	24%	57%
District 3	13%	29%	28%	30%
District 4	2%	25%	34%	40%
District 5	14%	26%	15%	45%
District 6	5%	15%	29%	52%
District 7	2%	10%	18%	70%
District 8	4%	21%	35%	40%

Table 9.6 presents the responses for residents' perceptions of trends in the quality of public elementary schools by district.³ More than 25% of respondents in Districts 3, 4, 5, and 8 report the most notable improvement in the trends in the quality of elementary schools. District 3 has the most residents reporting improvement with 45%. However, residents in Districts 1, 2, and 6 are more likely to view elementary schools as worsening.

**Table 9.6 Trends in Quality of Public Elementary Schools
in Neighborhoods by District**

Quality of Elementary Schools	Getting Worse	Getting Better	Not Changing	N/A/ Don't Know
District 1	20%	16%	11%	53%
District 2	12%	8%	22%	57%
District 3	3%	48%	22%	27%
District 4	9%	26%	31%	34%
District 5	18%	22%	13%	48%
District 6	12%	11%	29%	47%
District 7	10%	17%	9%	64%
District 8	7%	27%	19%	47%

³The two "getting worse" response categories were collapsed into one category as were the two "getting better" response categories. Those respondents selecting "not changing" and "N/A/Don't Know" are retained in this analysis and shown in Tables 9.5 to 9.8.

Table 9.7 focuses on perceived trends in public middle schools, by district. District 3, 4, 5, and 8 residents are more likely to view middle schools as improving, but residents in Districts 1, 2, 6, and 7 are more pessimistic. Only 1% of residents in District 7 perceive middle schools as improving, compared to 13% who view middle schools as worsening. District 5 and District 6 residents are most likely to report worsening a perception of worsening quality in public middle schools. However, the majority of residents in all districts selected the “N/A or Don’t Know” response category.

Table 9.7 Trends in Quality of Public Middle Schools in Neighborhoods by District

Quality of Middle Schools	Getting Worse	Getting Better	Not Changing	N/A/ Don’t Know
District 1	21%	11%	9%	59%
District 2	10%	7%	22%	61%
District 3	0%	11%	35%	55%
District 4	6%	21%	34%	39%
District 5	18%	19%	13%	51%
District 6	17%	5%	20%	58%
District 7	13%	1%	14%	72%
District 8	7%	27%	24%	42%

Table 9.8 below presents the perceptions about trends in quality of public high schools, by district. Districts 2, 4, and 8 residents are more likely to perceive high schools as improving. Districts 1, 6, and 7 are more pessimistic. However, as before, the majority of residents selected the “Don’t Know” response category.

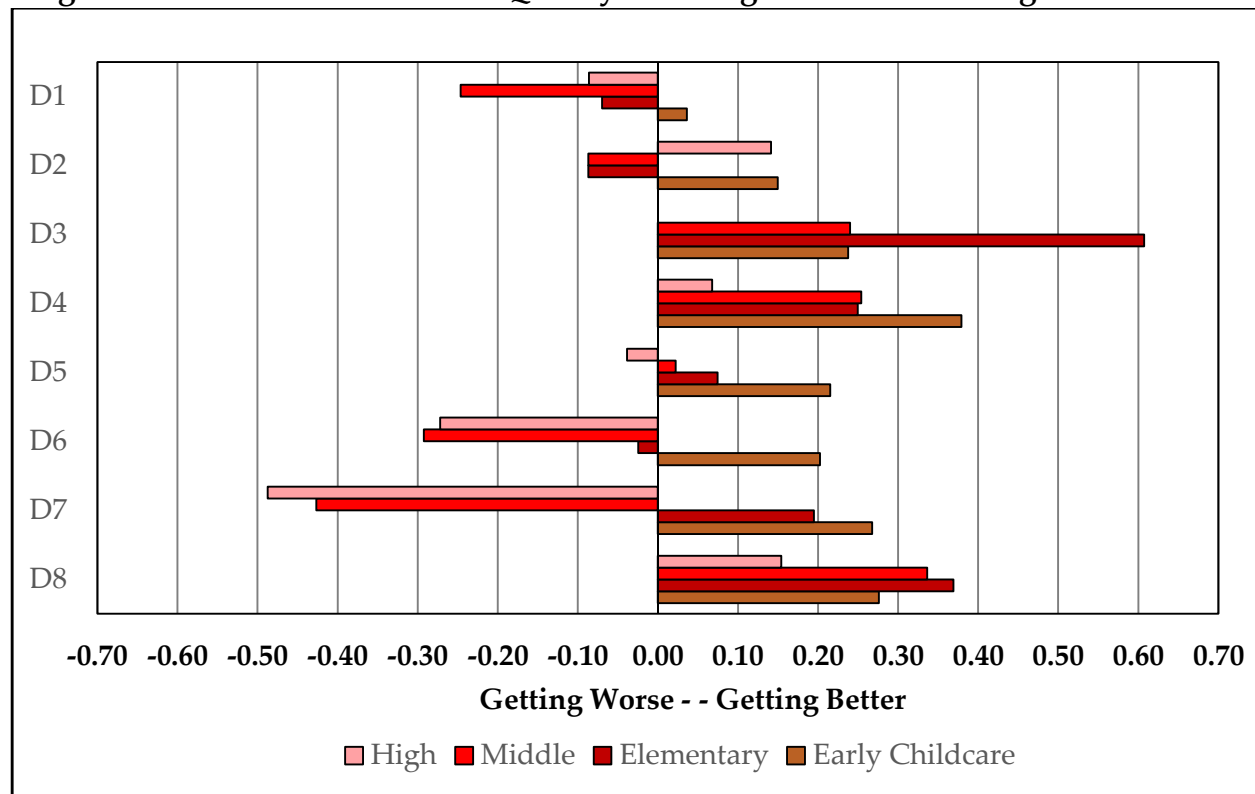
Table 9.8 Trends in Quality of Public High Schools in Neighborhoods by District

Quality of High Schools	Getting Worse	Getting Better	Not Changing	N/A/ Don’t Know
District 1	18%	14%	17%	51%
District 2	6%	12%	22%	60%
District 3	0%	0%	42%	58%
District 4	7%	12%	44%	37%
District 5	18%	16%	16%	51%
District 6	20%	6%	25%	49%
District 7	15%	0%	16%	69%
District 8	20%	31%	23%	26%

Figure 9.2 displays a visualization of Chatham County residents' perception about trends in the quality of public school education at four levels of schooling, by district. The index is computed by subtracting the "Getting Worse" responses from "Getting Better" responses and adjusting for the proportion of "N/A Don't Know" responses.

Possible values for the index range from -1 to 1. A value of -1 implies all pertinent respondents chose "Getting Worse." A value of 0 means an equal number of respondents chose "Getting Better" and "Getting Worse," and a value of 1 implies that all pertinent respondents chose "Getting Better." A value of 0 implies that the average opinion of respondents in a given district was that public school quality is perceived to be generally remaining the same.

Fig. 9.2. Trends in Public School Quality: "Getting Better" vs "Getting Worse" Index



The index suggests Chatham County residents in Districts 3, 4, 5, and 8 perceive their neighborhood public schools are generally improving in quality. Residents in Districts 6 and 7 perceive a worsening trend in the quality of public middle schools and public high schools.

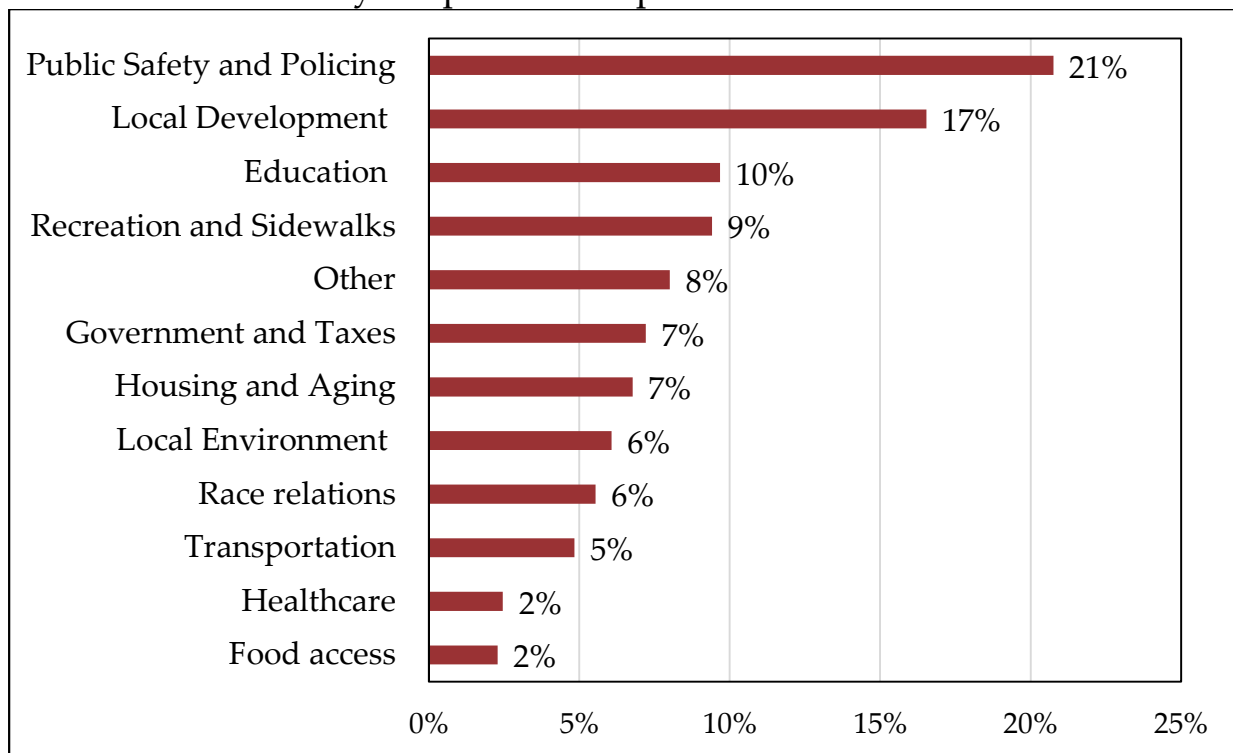


X. Planning for 2035 and Beyond: Open-Ended Comments

Survey respondents were asked to write what they perceived to be the issues facing the community going forward. The question asked “Do you have any other comments as we think about planning for 2035 and beyond?”

About 700 comments were received (from 1,597 surveys completed) and many of these comments touched on multiple issues. Overall, there were 35 reoccurring issues with over 1,200 mentions of key words relating to these topics. These 35 issues were then collapsed into 12 major themes and the frequency of twelve themes is displayed in Figure 10.1 below.

Figure 10.1. Planning for 2035 and Beyond:
Survey Respondents Open-Ended Comments



Appendix A. Survey Responses by Questions

Overall Responses (Combined for Chatham County)

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	61%	26%	4%	6%	4%	0%
My neighborhood is conveniently located near recreational facilities and activities.	36%	31%	13%	12%	7%	1%
My neighborhood is conveniently located near CAT bus routes.	38%	31%	7%	6%	7%	11%
It would benefit me if CAT bus routes were changed for better access to jobs.	9%	10%	26%	11%	11%	34%
I have internet access.	75%	17%	2%	2%	2%	2%
There are job opportunities available that match my skills.	32%	31%	14%	6%	6%	11%
I am aware of opportunities for job and career advancement.	29%	31%	15%	8%	4%	12%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	29%	27%	14%	7%	3%	20%
I spend 1/3 or more of my budget on housing (mortgage or rent).	35%	22%	7%	19%	12%	5%
I live paycheck to paycheck at my current job.	25%	16%	13%	19%	19%	9%
I have access to child care services matching my work schedule.	8%	8%	14%	5%	4%	62%
I have access to mental/behavioral health services.	18%	28%	13%	8%	5%	28%
I have access to adult senior services.	10%	15%	14%	5%	2%	54%
I have gone to the public library during the past 12 months.	32%	20%	4%	15%	23%	7%

Overall Responses- continued 1

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	35%	63%	1%
I exercise regularly (at least 30 minutes 5 times a week).	49%	50%	1%
I or someone in my household currently smokes cigarettes.	14%	85%	1%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	17%	81%	2%
I or someone in my household has diabetes.	14%	85%	1%
I or someone in my household has high blood pressure.	31%	67%	1%
I or someone in my household has cancer.	6%	93%	2%
I have a family doctor I see for routine care.	75%	24%	1%
I or someone in my household has need for mental/behavioral health support.	23%	74%	3%
I have health insurance.	88%	11%	1%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	15%	41%	12%	21%	9%	2%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	32%	42%	7%	11%	4%	4%
The police care about the needs of my neighborhood.	18%	42%	21%	9%	4%	6%
My neighborhood is mostly free of alcohol-related problems.	17%	35%	14%	11%	4%	19%
My neighborhood is mostly free of unlawful drugs.	15%	31%	12%	13%	9%	20%
I know my neighbors and have friends in the neighborhood.	24%	42%	16%	12%	5%	1%
People in my neighborhood are willing to help each other.	25%	43%	19%	5%	3%	6%
Juvenile crime is a problem in my neighborhood.	6%	15%	20%	29%	14%	17%
I feel safe on the CAT bus.	5%	10%	16%	5%	3%	62%
There are homeless people who live in my neighborhood.	6%	11%	6%	27%	29%	21%
I am concerned about being hit by a vehicle while walking in my neighborhood.	11%	20%	15%	31%	20%	3%

Overall Responses- continued 2

Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	7%	11%	10%	4%	4%	63%
My child's Public Elementary School	7%	10%	7%	5%	5%	66%
My child's Public Middle School	3%	7%	7%	7%	6%	69%
My child's Public High School	3%	7%	7%	7%	8%	68%
Affordable Housing Options	4%	17%	23%	15%	8%	33%
Public Safety	9%	42%	26%	13%	5%	5%
Race Relations	8%	35%	28%	14%	7%	8%
Fair Distribution of Local Gov't Resources	3%	19%	28%	18%	12%	20%
Cleanliness of Neighborhood (litter)	18%	43%	14%	15%	9%	2%
Recreational Opportunities for Youth	7%	26%	16%	16%	7%	28%
Recreational Opportunities for Adults	8%	30%	20%	19%	8%	15%
Public Library	22%	36%	16%	7%	3%	16%
Public Transportation (CAT bus, trolley, ferry, bike system)	9%	28%	18%	7%	5%	32%
Medical Services (treatment, medicine)	14%	42%	18%	9%	6%	11%
Mental/Behavioral Health Services	5%	20%	21%	11%	7%	35%
Healthy Food Options	22%	47%	16%	8%	4%	3%
Overall Quality of Life	21%	54%	16%	6%	1%	1%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	3%	7%	18%	2%	1%	67%
My child's Public Elementary School	4%	7%	13%	5%	3%	69%
My child's Public Middle School	3%	4%	13%	5%	3%	72%
My child's Public High School	3%	4%	13%	4%	5%	72%
Affordable Housing Options	3%	9%	28%	16%	7%	37%
Public Safety	5%	24%	41%	13%	5%	12%
Race Relations	5%	19%	44%	11%	6%	15%
Fair Distribution of Local Gov't Resources	3%	9%	40%	14%	6%	28%
Cleanliness of Neighborhood (litter)	8%	22%	45%	12%	5%	8%
Recreational Opportunities for Youth	4%	13%	40%	5%	3%	35%
Recreational Opportunities for Adults	4%	15%	48%	6%	3%	24%
Public Library	12%	15%	44%	4%	2%	23%
Public Transportation (CAT bus, trolley, ferry, bike system)	6%	12%	37%	3%	2%	40%
Medical Services (treatment, medicine)	7%	19%	44%	7%	3%	19%
Mental/Behavioral Health Services	3%	9%	38%	6%	4%	40%
Healthy Food Options	12%	30%	42%	4%	2%	10%
Overall Quality of Life	9%	35%	40%	7%	1%	7%

District One Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	64%	26%	3%	4%	3%	0%
My neighborhood is conveniently located near recreational facilities and activities.	44%	39%	8%	3%	6%	0%
My neighborhood is conveniently located near CAT bus routes.	43%	30%	6%	6%	2%	13%
It would benefit me if CAT bus routes were changed for better access to jobs.	10%	6%	26%	12%	10%	35%
I have internet access.	79%	16%	2%	1%	2%	1%
There are job opportunities available that match my skills.	35%	31%	13%	6%	4%	11%
I am aware of opportunities for job and career advancement.	36%	29%	14%	7%	2%	11%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	33%	25%	11%	6%	3%	21%
I spend 1/3 or more of my budget on housing (mortgage or rent).	29%	17%	9%	24%	14%	7%
I live paycheck to paycheck at my current job.	15%	12%	13%	24%	28%	8%
I have access to child care services matching my work schedule.	11%	13%	13%	7%	2%	54%
I have access to mental/behavioral health services.	21%	26%	18%	8%	6%	22%
I have access to adult senior services.	14%	14%	17%	4%	1%	50%
I have gone to the public library during the past 12 months.	32%	20%	4%	15%	24%	6%

District One Responses- continued 1

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	38%	60%	2%
I exercise regularly (at least 30 minutes 5 times a week).	58%	42%	0%
I or someone in my household currently smokes cigarettes.	13%	87%	0%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	20%	79%	0%
I or someone in my household has diabetes.	10%	89%	1%
I or someone in my household has high blood pressure.	32%	68%	0%
I or someone in my household has cancer.	4%	96%	0%
I have a family doctor I see for routine care.	84%	16%	0%
I or someone in my household has need for mental/behavioral health support.	27%	69%	4%
I have health insurance.	93%	7%	0%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	11%	39%	9%	25%	15%	1%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	32%	39%	9%	12%	5%	3%
The police care about the needs of my neighborhood.	19%	42%	21%	12%	2%	4%
My neighborhood is mostly free of alcohol-related problems.	16%	38%	19%	8%	2%	16%
My neighborhood is mostly free of unlawful drugs.	12%	38%	12%	14%	7%	17%
I know my neighbors and have friends in the neighborhood.	30%	49%	12%	8%	2%	0%
People in my neighborhood are willing to help each other.	31%	51%	13%	2%	2%	1%
Juvenile crime is a problem in my neighborhood.	7%	19%	17%	28%	14%	15%
I feel safe on the CAT bus.	4%	11%	14%	6%	6%	59%
There are homeless people who live in my neighborhood.	2%	11%	6%	35%	28%	19%
I am concerned about being hit by a vehicle while walking in my neighborhood.	14%	24%	16%	33%	13%	1%

District One Responses- continued 2

Satisfaction with Aspects of My Neighborhood	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	8%	12%	6%	6%	4%	64%
My child's Public Elementary School	10%	10%	5%	8%	8%	60%
My child's Public Middle School	7%	5%	4%	10%	11%	63%
My child's Public High School	5%	6%	5%	8%	16%	60%
Affordable Housing Options	4%	18%	19%	14%	6%	39%
Public Safety	7%	38%	25%	16%	10%	4%
Race Relations	6%	26%	29%	19%	12%	7%
Fair Distribution of Local Gov't Resources	2%	16%	28%	20%	15%	19%
Cleanliness of Neighborhood (litter)	12%	53%	14%	14%	5%	2%
Recreational Opportunities for Youth	7%	32%	19%	11%	5%	26%
Recreational Opportunities for Adults	8%	37%	21%	12%	8%	13%
Public Library	19%	40%	20%	5%	3%	14%
Public Transportation (CAT bus, trolley, ferry, bike system)	6%	32%	19%	7%	5%	31%
Medical Services (treatment, medicine)	16%	53%	16%	6%	2%	7%
Mental/Behavioral Health Services	6%	27%	21%	7%	10%	29%
Healthy Food Options	27%	50%	16%	1%	3%	3%
Overall Quality of Life	20%	60%	13%	3%	2%	1%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	1%	7%	27%	4%	1%	59%
My child's Public Elementary School	3%	8%	15%	8%	3%	62%
My child's Public Middle School	3%	4%	13%	9%	5%	65%
My child's Public High School	2%	7%	14%	7%	8%	62%
Affordable Housing Options	1%	7%	26%	24%	5%	37%
Public Safety	4%	17%	42%	24%	6%	6%
Race Relations	3%	18%	43%	14%	10%	11%
Fair Distribution of Local Gov't Resources	1%	8%	49%	12%	7%	23%
Cleanliness of Neighborhood (litter)	5%	21%	53%	13%	4%	5%
Recreational Opportunities for Youth	2%	15%	44%	3%	0%	35%
Recreational Opportunities for Adults	2%	15%	54%	4%	2%	22%
Public Library	5%	18%	48%	3%	1%	24%
Public Transportation (CAT bus, trolley, ferry, bike system)	3%	13%	39%	4%	1%	40%
Medical Services (treatment, medicine)	5%	18%	54%	7%	2%	13%
Mental/Behavioral Health Services	2%	8%	47%	6%	4%	32%
Healthy Food Options	11%	39%	38%	2%	0%	10%
Overall Quality of Life	8%	36%	46%	5%	1%	4%

District Two Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	57%	27%	3%	9%	4%	0%
My neighborhood is conveniently located near recreational facilities and activities.	44%	34%	12%	5%	4%	1%
My neighborhood is conveniently located near CAT bus routes.	54%	31%	6%	3%	0%	6%
It would benefit me if CAT bus routes were changed for better access to jobs.	11%	8%	34%	9%	6%	30%
I have internet access.	72%	21%	1%	1%	4%	1%
There are job opportunities available that match my skills.	26%	30%	19%	7%	8%	10%
I am aware of opportunities for job and career advancement.	24%	40%	17%	4%	5%	9%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	25%	29%	18%	8%	1%	19%
I spend 1/3 or more of my budget on housing (mortgage or rent).	33%	24%	10%	23%	8%	2%
I live paycheck to paycheck at my current job.	33%	15%	10%	22%	13%	7%
I have access to child care services matching my work schedule.	8%	8%	15%	3%	4%	62%
I have access to mental/behavioral health services.	21%	30%	15%	6%	7%	21%
I have access to adult senior services.	9%	14%	16%	2%	2%	57%
I have gone to the public library during the past 12 months.	27%	20%	3%	16%	21%	13%

District Two Responses - continued 1

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	45%	52%	2%
I exercise regularly (at least 30 minutes 5 times a week).	44%	54%	2%
I or someone in my household currently smokes cigarettes.	16%	83%	1%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	26%	72%	2%
I or someone in my household has diabetes.	13%	83%	4%
I or someone in my household has high blood pressure.	29%	70%	2%
I or someone in my household has cancer.	5%	92%	3%
I have a family doctor I see for routine care.	71%	29%	0%
I or someone in my household has need for mental/behavioral health support.	28%	68%	4%
I have health insurance.	85%	15%	0%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	5%	28%	14%	31%	19%	2%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	11%	42%	9%	22%	11%	5%
The police care about the needs of my neighborhood.	15%	43%	24%	7%	5%	6%
My neighborhood is mostly free of alcohol-related problems.	9%	31%	15%	20%	16%	9%
My neighborhood is mostly free of unlawful drugs.	6%	22%	16%	18%	22%	17%
I know my neighbors and have friends in the neighborhood.	28%	41%	13%	12%	4%	2%
People in my neighborhood are willing to help each other.	28%	40%	19%	4%	4%	4%
Juvenile crime is a problem in my neighborhood.	12%	27%	21%	20%	5%	14%
I feel safe on the CAT bus.	8%	15%	21%	4%	4%	48%
There are homeless people who live in my neighborhood.	20%	30%	7%	19%	10%	15%
I am concerned about being hit by a vehicle while walking in my neighborhood.	19%	26%	18%	24%	14%	1%

District Two Responses - continued 2

Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	3%	7%	13%	3%	7%	67%
My child's Public Elementary School	4%	5%	8%	2%	10%	71%
My child's Public Middle School	3%	4%	9%	2%	9%	73%
My child's Public High School	3%	3%	9%	3%	8%	73%
Affordable Housing Options	5%	13%	23%	23%	11%	25%
Public Safety	4%	34%	30%	24%	7%	2%
Race Relations	6%	26%	33%	21%	9%	6%
Fair Distribution of Local Gov't Resources	4%	14%	28%	22%	14%	18%
Cleanliness of Neighborhood (litter)	4%	33%	16%	26%	21%	0%
Recreational Opportunities for Youth	7%	19%	17%	18%	7%	32%
Recreational Opportunities for Adults	9%	29%	19%	21%	7%	15%
Public Library	16%	36%	19%	10%	1%	18%
Public Transportation (CAT bus, trolley, ferry, bike system)	11%	39%	20%	6%	2%	22%
Medical Services (treatment, medicine)	12%	33%	19%	14%	7%	16%
Mental/Behavioral Health Services	7%	19%	20%	14%	9%	31%
Healthy Food Options	24%	40%	17%	11%	4%	4%
Overall Quality of Life	18%	48%	23%	8%	1%	2%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	2%	4%	13%	4%	2%	74%
My child's Public Elementary School	1%	4%	12%	4%	3%	75%
My child's Public Middle School	1%	2%	12%	5%	2%	78%
My child's Public High School	2%	3%	12%	3%	3%	78%
Affordable Housing Options	3%	6%	24%	19%	14%	34%
Public Safety	2%	30%	41%	11%	4%	10%
Race Relations	2%	20%	43%	17%	5%	12%
Fair Distribution of Local Gov't Resources	2%	5%	40%	14%	9%	30%
Cleanliness of Neighborhood (litter)	6%	20%	46%	11%	9%	7%
Recreational Opportunities for Youth	4%	12%	31%	5%	2%	46%
Recreational Opportunities for Adults	4%	11%	48%	6%	2%	29%
Public Library	8%	15%	47%	4%	2%	22%
Public Transportation (CAT bus, trolley, ferry, bike system)	5%	20%	40%	3%	1%	31%
Medical Services (treatment, medicine)	5%	11%	45%	8%	4%	28%
Mental/Behavioral Health Services	2%	5%	40%	7%	4%	41%
Healthy Food Options	13%	26%	39%	7%	1%	14%
Overall Quality of Life	8%	32%	40%	9%	2%	9%

District Three Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	52%	30%	2%	9%	7%	0%
My neighborhood is conveniently located near recreational facilities and activities.	32%	37%	9%	13%	8%	0%
My neighborhood is conveniently located near CAT bus routes.	42%	40%	5%	5%	3%	5%
It would benefit me if CAT bus routes were changed for better access to jobs.	13%	11%	17%	13%	9%	37%
I have internet access.	73%	15%	4%	3%	2%	3%
There are job opportunities available that match my skills.	27%	29%	16%	7%	10%	12%
I am aware of opportunities for job and career advancement.	20%	38%	9%	14%	3%	15%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	20%	26%	14%	8%	8%	24%
I spend 1/3 or more of my budget on housing (mortgage or rent).	29%	27%	8%	19%	11%	5%
I live paycheck to paycheck at my current job.	33%	18%	10%	12%	17%	9%
I have access to child care services matching my work schedule.	3%	7%	11%	7%	4%	69%
I have access to mental/behavioral health services.	13%	35%	4%	8%	5%	34%
I have access to adult senior services.	12%	17%	7%	3%	4%	58%
I have gone to the public library during the past 12 months.	27%	23%	1%	13%	29%	8%

District Three Responses - continued 1

II. Health	Yes	No	N/A/DK
I eat five cups of fruits and/or vegetables daily.	37%	61%	1%
I exercise regularly (at least 30 minutes 5 times a week).	52%	46%	2%
I or someone in my household currently smokes cigarettes.	20%	78%	2%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	22%	76%	2%
I or someone in my household has diabetes.	16%	81%	3%
I or someone in my household has high blood pressure.	31%	66%	2%
I or someone in my household has cancer.	7%	90%	3%
I have a family doctor I see for routine care.	71%	25%	4%
I or someone in my household has need for mental/behavioral health support.	26%	70%	4%
I have health insurance.	79%	19%	2%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	8%	38%	16%	23%	13%	1%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	16%	47%	8%	20%	9%	1%
The police care about the needs of my neighborhood.	13%	34%	30%	12%	6%	5%
My neighborhood is mostly free of alcohol-related problems.	8%	36%	18%	12%	4%	23%
My neighborhood is mostly free of unlawful drugs.	10%	28%	11%	15%	13%	22%
I know my neighbors and have friends in the neighborhood.	19%	47%	16%	10%	6%	2%
People in my neighborhood are willing to help each other.	20%	43%	19%	7%	6%	5%
Juvenile crime is a problem in my neighborhood.	10%	11%	22%	18%	18%	21%
I feel safe on the CAT bus.	6%	15%	18%	3%	1%	57%
There are homeless people who live in my neighborhood.	12%	15%	7%	22%	19%	25%
I am concerned about being hit by a vehicle while walking in my neighborhood.	16%	21%	15%	33%	14%	1%

District Three Responses - continued 2

Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	8%	14%	4%	2%	5%	67%
My child's Public Elementary School	6%	10%	3%	7%	5%	69%
My child's Public Middle School	2%	5%	3%	9%	4%	77%
My child's Public High School	2%	6%	3%	6%	7%	75%
Affordable Housing Options	4%	15%	24%	13%	10%	34%
Public Safety	6%	33%	35%	12%	6%	8%
Race Relations	8%	29%	35%	16%	4%	7%
Fair Distribution of Local Gov't Resources	1%	20%	34%	14%	12%	19%
Cleanliness of Neighborhood (litter)	14%	39%	19%	15%	13%	1%
Recreational Opportunities for Youth	4%	21%	15%	17%	16%	26%
Recreational Opportunities for Adults	4%	29%	17%	20%	10%	20%
Public Library	18%	33%	19%	10%	3%	16%
Public Transportation (CAT bus, trolley, ferry, bike system)	14%	28%	19%	6%	3%	30%
Medical Services (treatment, medicine)	11%	33%	25%	8%	9%	14%
Mental/Behavioral Health Services	5%	16%	24%	11%	9%	36%
Healthy Food Options	18%	53%	15%	6%	5%	3%
Overall Quality of Life	24%	51%	13%	10%	0%	2%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	6%	6%	17%	2%	4%	65%
My child's Public Elementary School	3%	14%	12%	3%	1%	67%
My child's Public Middle School	3%	4%	16%	2%	0%	75%
My child's Public High School	2%	4%	14%	0%	3%	76%
Affordable Housing Options	4%	11%	31%	15%	5%	34%
Public Safety	5%	26%	49%	6%	4%	10%
Race Relations	4%	22%	49%	7%	4%	14%
Fair Distribution of Local Gov't Resources	3%	9%	40%	17%	4%	26%
Cleanliness of Neighborhood (litter)	6%	20%	50%	12%	8%	6%
Recreational Opportunities for Youth	2%	8%	47%	5%	6%	30%
Recreational Opportunities for Adults	3%	10%	50%	3%	5%	29%
Public Library	8%	12%	49%	4%	5%	21%
Public Transportation (CAT bus, trolley, ferry, bike system)	9%	17%	37%	1%	1%	36%
Medical Services (treatment, medicine)	4%	16%	49%	8%	4%	19%
Mental/Behavioral Health Services	2%	5%	47%	5%	7%	34%
Healthy Food Options	11%	28%	49%	1%	1%	8%
Overall Quality of Life	8%	35%	39%	8%	1%	8%

District Four Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	86%	11%	0%	2%	1%	0%
My neighborhood is conveniently located near recreational facilities and activities.	66%	21%	9%	2%	2%	0%
My neighborhood is conveniently located near CAT bus routes.	34%	27%	10%	4%	8%	17%
It would benefit me if CAT bus routes were changed for better access to jobs.	6%	5%	27%	9%	20%	34%
I have internet access.	83%	11%	3%	0%	0%	2%
There are job opportunities available that match my skills.	42%	27%	12%	4%	2%	13%
I am aware of opportunities for job and career advancement.	40%	20%	20%	6%	1%	13%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	31%	24%	11%	5%	1%	27%
I spend 1/3 or more of my budget on housing (mortgage or rent).	36%	16%	7%	18%	15%	8%
I live paycheck to paycheck at my current job.	18%	11%	12%	25%	25%	9%
I have access to child care services matching my work schedule.	13%	9%	12%	3%	4%	60%
I have access to mental/behavioral health services.	22%	23%	15%	5%	4%	30%
I have access to adult senior services.	14%	12%	18%	3%	3%	49%
I have gone to the public library during the past 12 months.	43%	15%	2%	17%	20%	2%

District Four Responses - continued 1

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	37%	61%	1%
I exercise regularly (at least 30 minutes 5 times a week).	51%	48%	1%
I or someone in my household currently smokes cigarettes.	5%	94%	1%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	14%	83%	2%
I or someone in my household has diabetes.	8%	91%	1%
I or someone in my household has high blood pressure.	24%	76%	1%
I or someone in my household has cancer.	7%	92%	1%
I have a family doctor I see for routine care.	80%	20%	0%
I or someone in my household has need for mental/behavioral health support.	16%	83%	1%
I have health insurance.	95%	5%	0%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	30%	56%	6%	6%	2%	1%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	57%	38%	2%	2%	1%	0%
The police care about the needs of my neighborhood.	26%	43%	20%	3%	2%	6%
My neighborhood is mostly free of alcohol-related problems.	23%	39%	14%	7%	1%	16%
My neighborhood is mostly free of unlawful drugs.	23%	37%	11%	9%	1%	19%
I know my neighbors and have friends in the neighborhood.	36%	44%	11%	5%	4%	0%
People in my neighborhood are willing to help each other.	39%	44%	12%	1%	1%	4%
Juvenile crime is a problem in my neighborhood.	4%	10%	22%	38%	18%	8%
I feel safe on the CAT bus.	2%	7%	10%	4%	1%	76%
There are homeless people who live in my neighborhood.	1%	2%	3%	25%	56%	13%
I am concerned about being hit by a vehicle while walking in my neighborhood.	4%	15%	18%	33%	28%	2%

District Four Responses - continued 2

Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	17%	18%	9%	3%	1%	52%
My child's Public Elementary School	17%	13%	6%	1%	2%	61%
My child's Public Middle School	6%	14%	9%	5%	4%	62%
My child's Public High School	7%	15%	8%	5%	5%	61%
Affordable Housing Options	4%	19%	28%	12%	5%	33%
Public Safety	22%	57%	12%	4%	2%	3%
Race Relations	11%	41%	22%	12%	6%	8%
Fair Distribution of Local Gov't Resources	6%	26%	19%	19%	10%	20%
Cleanliness of Neighborhood (litter)	39%	46%	8%	3%	3%	0%
Recreational Opportunities for Youth	23%	42%	10%	6%	3%	17%
Recreational Opportunities for Adults	25%	42%	13%	9%	3%	8%
Public Library	46%	34%	8%	2%	0%	11%
Public Transportation (CAT bus, trolley, ferry, bike system)	11%	21%	18%	8%	6%	36%
Medical Services (treatment, medicine)	23%	41%	18%	5%	4%	9%
Mental/Behavioral Health Services	5%	23%	24%	7%	3%	38%
Healthy Food Options	39%	40%	15%	3%	2%	1%
Overall Quality of Life	39%	52%	8%	0%	0%	0%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	4%	8%	23%	1%	0%	64%
My child's Public Elementary School	5%	7%	18%	4%	1%	64%
My child's Public Middle School	3%	7%	19%	4%	1%	67%
My child's Public High School	3%	6%	20%	4%	2%	65%
Affordable Housing Options	1%	10%	29%	15%	6%	40%
Public Safety	8%	22%	47%	8%	2%	12%
Race Relations	4%	19%	50%	7%	3%	16%
Fair Distribution of Local Gov't Resources	3%	13%	41%	12%	4%	28%
Cleanliness of Neighborhood (litter)	10%	20%	56%	4%	2%	7%
Recreational Opportunities for Youth	8%	23%	42%	1%	1%	25%
Recreational Opportunities for Adults	10%	22%	53%	1%	0%	14%
Public Library	17%	23%	41%	1%	0%	18%
Public Transportation (CAT bus, trolley, ferry, bike system)	4%	9%	45%	3%	2%	37%
Medical Services (treatment, medicine)	6%	18%	52%	4%	2%	17%
Mental/Behavioral Health Services	1%	9%	45%	2%	2%	41%
Healthy Food Options	16%	27%	49%	0%	0%	7%
Overall Quality of Life	13%	35%	44%	2%	0%	6%

District Five Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	45%	35%	9%	8%	3%	0%
My neighborhood is conveniently located near recreational facilities and activities.	15%	33%	18%	25%	6%	2%
Access to Public Transportation and Jobs						
My neighborhood is conveniently located near CAT bus routes.	47%	39%	3%	2%	4%	5%
It would benefit me if CAT bus routes were changed for better access to jobs.	8%	16%	33%	7%	6%	30%
I have internet access.	67%	20%	2%	6%	3%	2%
There are job opportunities available that match my skills.	28%	28%	18%	10%	7%	10%
I am aware of opportunities for job and career advancement.	30%	27%	14%	13%	6%	10%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	30%	35%	13%	8%	3%	11%
I spend 1/3 or more of my budget on housing (mortgage or rent).	47%	22%	5%	16%	6%	4%
I live paycheck to paycheck at my current job.	31%	26%	14%	14%	6%	9%
I have access to child care services matching my work schedule.	7%	5%	16%	6%	5%	61%
I have access to mental/behavioral health services.	9%	28%	16%	17%	2%	27%
I have access to adult senior services.	8%	18%	15%	14%	2%	43%
I have gone to the public library during the past 12 months.	25%	26%	6%	21%	15%	6%

District Five Responses - continued 1

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	31%	69%	1%
I exercise regularly (at least 30 minutes 5 times a week).	37%	60%	3%
I or someone in my household currently smokes cigarettes.	19%	78%	3%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	13%	84%	4%
I or someone in my household has diabetes.	20%	80%	0%
I or someone in my household has high blood pressure.	35%	65%	0%
I or someone in my household has cancer.	4%	95%	2%
I have a family doctor I see for routine care.	73%	26%	0%
I or someone in my household has need for mental/behavioral health support.	23%	73%	4%
I have health insurance.	79%	21%	0%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	16%	31%	18%	24%	5%	5%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	25%	38%	14%	13%	4%	7%
The police care about the needs of my neighborhood.	14%	42%	20%	12%	6%	6%
My neighborhood is mostly free of alcohol-related problems.	14%	30%	14%	18%	4%	19%
My neighborhood is mostly free of unlawful drugs.	13%	26%	16%	11%	11%	23%
I know my neighbors and have friends in the neighborhood.	19%	37%	23%	16%	5%	0%
People in my neighborhood are willing to help each other.	16%	40%	22%	9%	5%	8%
Juvenile crime is a problem in my neighborhood.	5%	15%	22%	27%	12%	19%
I feel safe on the CAT bus.	5%	11%	23%	8%	2%	50%
There are homeless people who live in my neighborhood.	5%	10%	10%	32%	18%	26%
I am concerned about being hit by a vehicle while walking in my neighborhood.	10%	19%	12%	38%	17%	3%

District Five Responses - continued 2

Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	5%	10%	14%	4%	6%	62%
My child's Public Elementary School	5%	10%	9%	8%	6%	61%
My child's Public Middle School	3%	9%	8%	10%	6%	64%
My child's Public High School	1%	10%	9%	11%	5%	64%
Affordable Housing Options	3%	12%	23%	19%	14%	29%
Public Safety	8%	35%	29%	17%	5%	5%
Race Relations	9%	34%	19%	20%	11%	7%
Fair Distribution of Local Gov't Resources	5%	22%	25%	17%	15%	16%
Cleanliness of Neighborhood (litter)	12%	43%	15%	17%	12%	2%
Recreational Opportunities for Youth	3%	14%	19%	26%	10%	28%
Recreational Opportunities for Adults	3%	22%	23%	28%	11%	14%
Public Library	17%	47%	16%	9%	5%	6%
Public Transportation (CAT bus, trolley, ferry, bike system)	12%	37%	19%	3%	5%	23%
Medical Services (treatment, medicine)	10%	37%	17%	14%	10%	12%
Mental/Behavioral Health Services	7%	15%	27%	14%	7%	31%
Healthy Food Options	12%	51%	15%	11%	7%	5%
Overall Quality of Life	15%	39%	28%	12%	2%	2%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	5%	8%	18%	3%	2%	63%
My child's Public Elementary School	6%	6%	11%	3%	5%	69%
My child's Public Middle School	6%	4%	11%	4%	5%	71%
My child's Public High School	5%	3%	12%	3%	5%	72%
Affordable Housing Options	6%	12%	28%	14%	10%	30%
Public Safety	5%	27%	33%	16%	6%	13%
Race Relations	8%	20%	35%	16%	7%	13%
Fair Distribution of Local Gov't Resources	5%	10%	40%	16%	7%	22%
Cleanliness of Neighborhood (litter)	11%	25%	38%	10%	7%	9%
Recreational Opportunities for Youth	6%	4%	41%	11%	1%	38%
Recreational Opportunities for Adults	5%	10%	46%	14%	3%	22%
Public Library	20%	13%	38%	9%	0%	19%
Public Transportation (CAT bus, trolley, ferry, bike system)	11%	16%	32%	6%	1%	34%
Medical Services (treatment, medicine)	12%	13%	39%	12%	5%	19%
Mental/Behavioral Health Services	5%	14%	30%	8%	4%	38%
Healthy Food Options	14%	31%	31%	6%	6%	12%
Overall Quality of Life	13%	28%	36%	12%	2%	9%

District Six Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	63%	28%	3%	4%	2%	0%
My neighborhood is conveniently located near recreational facilities and activities.	28%	28%	15%	15%	11%	2%
My neighborhood is conveniently located near CAT bus routes.	41%	27%	10%	8%	2%	12%
It would benefit me if CAT bus routes were changed for better access to jobs.	9%	8%	23%	12%	9%	40%
I have internet access.	78%	15%	3%	0%	2%	2%
There are job opportunities available that match my skills.	38%	28%	11%	6%	4%	12%
I am aware of opportunities for job and career advancement.	28%	32%	15%	8%	5%	12%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	35%	25%	11%	6%	4%	19%
I spend 1/3 or more of my budget on housing (mortgage or rent).	34%	25%	7%	16%	11%	6%
I live paycheck to paycheck at my current job.	26%	14%	15%	20%	15%	10%
I have access to child care services matching my work schedule.	5%	8%	15%	7%	2%	63%
I have access to mental/behavioral health services.	24%	21%	14%	7%	6%	28%
I have access to adult senior services.	7%	14%	11%	4%	3%	61%
I have gone to the public library during the past 12 months.	39%	22%	3%	10%	22%	4%

District Six Responses - continued 2

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	30%	68%	1%
I exercise regularly (at least 30 minutes 5 times a week).	46%	54%	1%
I or someone in my household currently smokes cigarettes.	16%	84%	1%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	10%	88%	2%
I or someone in my household has diabetes.	15%	84%	1%
I or someone in my household has high blood pressure.	38%	62%	0%
I or someone in my household has cancer.	7%	92%	1%
I have a family doctor I see for routine care.	81%	19%	0%
I or someone in my household has need for mental/behavioral health support.	25%	73%	2%
I have health insurance.	94%	6%	0%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	11%	38%	12%	30%	7%	3%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	29%	50%	5%	9%	1%	5%
The police care about the needs of my neighborhood.	16%	49%	16%	9%	5%	6%
My neighborhood is mostly free of alcohol-related problems.	18%	35%	10%	12%	1%	24%
My neighborhood is mostly free of unlawful drugs.	15%	31%	10%	17%	7%	21%
I know my neighbors and have friends in the neighborhood.	21%	38%	20%	12%	7%	3%
People in my neighborhood are willing to help each other.	22%	38%	23%	8%	2%	7%
Juvenile crime is a problem in my neighborhood.	3%	11%	22%	32%	10%	23%
I feel safe on the CAT bus.	6%	7%	13%	6%	1%	66%
There are homeless people who live in my neighborhood.	1%	11%	5%	28%	30%	26%
I am concerned about being hit by a vehicle while walking in my neighborhood.	8%	18%	13%	35%	21%	4%

District Six Responses - continued 2

Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	2%	9%	8%	8%	5%	68%
My child's Public Elementary School	3%	9%	6%	9%	6%	67%
My child's Public Middle School	1%	5%	6%	9%	7%	72%
My child's Public High School	2%	5%	6%	9%	8%	70%
Affordable Housing Options	6%	25%	16%	12%	6%	35%
Public Safety	5%	46%	25%	13%	3%	7%
Race Relations	11%	36%	27%	11%	5%	10%
Fair Distribution of Local Gov't Resources	1%	20%	32%	15%	10%	22%
Cleanliness of Neighborhood (litter)	17%	44%	12%	21%	6%	1%
Recreational Opportunities for Youth	2%	22%	21%	15%	7%	32%
Recreational Opportunities for Adults	3%	25%	22%	21%	12%	18%
Public Library	28%	38%	11%	3%	3%	17%
Public Transportation (CAT bus, trolley, ferry, bike system)	11%	27%	20%	8%	5%	29%
Medical Services (treatment, medicine)	15%	53%	14%	3%	7%	9%
Mental/Behavioral Health Services	5%	21%	17%	9%	9%	39%
Healthy Food Options	21%	49%	15%	8%	4%	3%
Overall Quality of Life	18%	57%	17%	5%	4%	0%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	2%	6%	17%	3%	3%	69%
My child's Public Elementary School	4%	3%	14%	7%	6%	67%
My child's Public Middle School	2%	3%	11%	7%	7%	70%
My child's Public High School	3%	1%	14%	5%	9%	69%
Affordable Housing Options	3%	10%	28%	15%	6%	39%
Public Safety	6%	21%	38%	15%	7%	12%
Race Relations	6%	14%	41%	14%	8%	17%
Fair Distribution of Local Gov't Resources	3%	9%	37%	15%	7%	28%
Cleanliness of Neighborhood (litter)	11%	20%	38%	19%	5%	6%
Recreational Opportunities for Youth	4%	13%	32%	7%	6%	38%
Recreational Opportunities for Adults	4%	15%	44%	7%	4%	26%
Public Library	18%	16%	44%	3%	1%	18%
Public Transportation (CAT bus, trolley, ferry, bike system)	7%	8%	40%	3%	2%	38%
Medical Services (treatment, medicine)	8%	19%	51%	5%	3%	15%
Mental/Behavioral Health Services	5%	9%	32%	9%	6%	40%
Healthy Food Options	10%	28%	41%	10%	3%	8%
Overall Quality of Life	11%	28%	44%	12%	1%	4%

District Seven Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	71%	23%	3%	2%	1%	0%
My neighborhood is conveniently located near recreational facilities and activities.	29%	31%	19%	11%	9%	1%
My neighborhood is conveniently located near CAT bus routes.	13%	17%	14%	13%	24%	20%
It would benefit me if CAT bus routes were changed for better access to jobs.	4%	10%	23%	17%	13%	33%
I have internet access.	78%	19%	0%	1%	1%	1%
There are job opportunities available that match my skills.	34%	37%	10%	3%	5%	11%
I am aware of opportunities for job and career advancement.	31%	33%	14%	5%	4%	13%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	27%	26%	15%	8%	4%	21%
I spend 1/3 or more of my budget on housing (mortgage or rent).	30%	18%	9%	17%	21%	4%
I live paycheck to paycheck at my current job.	20%	17%	9%	20%	25%	9%
I have access to child care services matching my work schedule.	6%	6%	13%	5%	5%	64%
I have access to mental/behavioral health services.	15%	34%	11%	8%	7%	26%
I have access to adult senior services.	8%	16%	13%	4%	2%	57%
I have gone to the public library during the past 12 months.	36%	14%	7%	11%	25%	7%

District Seven Responses - continued 1

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	34%	66%	0%
I exercise regularly (at least 30 minutes 5 times a week).	55%	44%	0%
I or someone in my household currently smokes cigarettes.	13%	86%	0%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	15%	85%	0%
I or someone in my household has diabetes.	9%	91%	0%
I or someone in my household has high blood pressure.	30%	70%	0%
I or someone in my household has cancer.	3%	95%	2%
I have a family doctor I see for routine care.	74%	26%	0%
I or someone in my household has need for mental/behavioral health support.	23%	74%	3%
I have health insurance.	93%	7%	0%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	21%	52%	9%	13%	4%	1%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	49%	41%	2%	3%	1%	3%
The police care about the needs of my neighborhood.	20%	46%	18%	5%	3%	7%
My neighborhood is mostly free of alcohol-related problems.	24%	38%	12%	2%	1%	24%
My neighborhood is mostly free of unlawful drugs.	19%	37%	10%	8%	1%	24%
I know my neighbors and have friends in the neighborhood.	20%	41%	15%	17%	5%	2%
People in my neighborhood are willing to help each other.	19%	51%	18%	5%	0%	7%
Juvenile crime is a problem in my neighborhood.	1%	15%	16%	36%	17%	15%
I feel safe on the CAT bus.	1%	2%	12%	6%	8%	71%
There are homeless people who live in my neighborhood.	1%	4%	2%	32%	39%	21%
I am concerned about being hit by a vehicle while walking in my neighborhood.	6%	17%	12%	33%	28%	3%

District Seven Responses - continued 2

Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, D/K
Early Childcare (Age 0 to 3) & Pre-K Education	2%	7%	11%	6%	0%	74%
My child's Public Elementary School	4%	8%	8%	3%	3%	74%
My child's Public Middle School	2%	3%	5%	7%	5%	78%
My child's Public High School	1%	5%	6%	5%	5%	77%
Affordable Housing Options	4%	16%	23%	16%	3%	38%
Public Safety	11%	50%	24%	5%	2%	8%
Race Relations	9%	42%	23%	9%	3%	14%
Fair Distribution of Local Gov't Resources	4%	22%	25%	15%	8%	26%
Cleanliness of Neighborhood (litter)	28%	42%	12%	10%	3%	6%
Recreational Opportunities for Youth	9%	26%	17%	14%	3%	30%
Recreational Opportunities for Adults	9%	26%	24%	21%	4%	15%
Public Library	17%	35%	14%	9%	6%	19%
Public Transportation (CAT bus, trolley, ferry, bike system)	3%	14%	15%	14%	10%	44%
Medical Services (treatment, medicine)	14%	46%	18%	7%	4%	11%
Mental/Behavioral Health Services	5%	20%	21%	8%	6%	39%
Healthy Food Options	25%	46%	16%	10%	2%	2%
Overall Quality of Life	18%	67%	14%	1%	0%	1%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	1%	6%	9%	2%	0%	82%
My child's Public Elementary School	1%	5%	10%	3%	3%	78%
My child's Public Middle School	1%	2%	9%	3%	6%	79%
My child's Public High School	1%	1%	8%	5%	6%	80%
Affordable Housing Options	2%	3%	25%	15%	6%	48%
Public Safety	6%	21%	46%	8%	3%	17%
Race Relations	4%	16%	46%	7%	4%	22%
Fair Distribution of Local Gov't Resources	4%	11%	32%	11%	5%	37%
Cleanliness of Neighborhood (litter)	10%	22%	40%	15%	2%	11%
Recreational Opportunities for Youth	6%	16%	36%	4%	2%	36%
Recreational Opportunities for Adults	4%	20%	44%	6%	1%	24%
Public Library	10%	10%	44%	4%	4%	29%
Public Transportation (CAT bus, trolley, ferry, bike system)	2%	5%	32%	6%	4%	51%
Medical Services (treatment, medicine)	8%	30%	31%	5%	1%	24%
Mental/Behavioral Health Services	4%	11%	30%	4%	4%	46%
Healthy Food Options	13%	29%	40%	5%	0%	13%
Overall Quality of Life	8%	43%	36%	4%	0%	9%

District Eight Responses

Access to Goods, Services, Public Transportation, and Jobs

Access to Goods and Services	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	46%	26%	7%	8%	12%	1%
My neighborhood is conveniently located near recreational facilities and activities.	25%	27%	16%	18%	13%	1%
My neighborhood is conveniently located near CAT bus routes.	28%	32%	4%	12%	16%	8%
It would benefit me if CAT bus routes were changed for better access to jobs.	9%	15%	23%	7%	14%	32%
I have internet access.	74%	17%	2%	3%	4%	0%
There are job opportunities available that match my skills.	30%	35%	12%	6%	6%	11%
I am aware of opportunities for job and career advancement.	26%	33%	17%	7%	4%	12%
I am aware of financial aid and resources that can support my educational goals (such as FAFSA, scholarships, loans, grants).	28%	24%	17%	9%	3%	18%
I spend 1/3 or more of my budget on housing (mortgage or rent).	39%	24%	4%	16%	14%	2%
I live paycheck to paycheck at my current job.	22%	17%	20%	14%	21%	7%
I have access to child care services matching my work schedule.	8%	8%	17%	3%	4%	61%
I have access to mental/behavioral health services.	19%	24%	13%	8%	5%	31%
I have access to adult senior services.	6%	17%	16%	4%	2%	56%
I have gone to the public library during the past 12 months.	24%	17%	5%	13%	29%	11%

District Eight Responses - *continued 1*

II. Health	Yes	No	N/A, DK
I eat five cups of fruits and/or vegetables daily.	31%	67%	2%
I exercise regularly (at least 30 minutes 5 times a week).	47%	50%	2%
I or someone in my household currently smokes cigarettes.	10%	89%	1%
I or someone in my household drinks more than two drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	14%	85%	1%
I or someone in my household has diabetes.	18%	80%	1%
I or someone in my household has high blood pressure.	34%	61%	5%
I or someone in my household has cancer.	8%	91%	1%
I have a family doctor I see for routine care.	68%	31%	1%
I or someone in my household has need for mental/behavioral health support.	18%	80%	2%
I have health insurance.	89%	11%	1%

Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A, DK
My neighborhood is mostly free of property crime (break-ins/stealing).	17%	49%	8%	15%	8%	2%
My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	40%	38%	7%	5%	4%	5%
The police care about the needs of my neighborhood.	21%	37%	22%	8%	3%	8%
My neighborhood is mostly free of alcohol-related problems.	23%	37%	10%	7%	4%	20%
My neighborhood is mostly free of unlawful drugs.	18%	31%	10%	14%	6%	21%
I know my neighbors and have friends in the neighborhood.	19%	36%	23%	16%	5%	1%
People in my neighborhood are willing to help each other.	20%	40%	25%	5%	2%	9%
Juvenile crime is a problem in my neighborhood.	5%	13%	15%	33%	13%	21%
I feel safe on the CAT bus.	3%	7%	13%	3%	2%	71%
There are homeless people who live in my neighborhood.	3%	6%	4%	28%	36%	24%
I am concerned about being hit by a vehicle while walking in my neighborhood.	10%	17%	14%	23%	30%	7%

District Eight Responses - continued 2

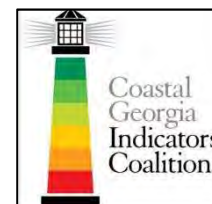
Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	10%	12%	16%	6%	4%	53%
My child's Public Elementary School	9%	15%	11%	4%	1%	60%
My child's Public Middle School	3%	13%	11%	4%	3%	66%
My child's Public High School	2%	9%	9%	6%	10%	64%
Affordable Housing Options	6%	21%	25%	12%	7%	30%
Public Safety	11%	42%	26%	12%	3%	6%
Race Relations	7%	46%	31%	5%	5%	6%
Fair Distribution of Local Gov't Resources	2%	15%	30%	20%	8%	25%
Cleanliness of Neighborhood (litter)	16%	47%	15%	14%	7%	3%
Recreational Opportunities for Youth	4%	30%	8%	20%	8%	30%
Recreational Opportunities for Adults	6%	29%	18%	22%	11%	14%
Public Library	12%	22%	19%	12%	7%	28%
Public Transportation (CAT bus, trolley, ferry, bike system)	6%	21%	14%	9%	6%	44%
Medical Services (treatment, medicine)	12%	40%	20%	14%	4%	10%
Mental/Behavioral Health Services	3%	21%	16%	17%	6%	37%
Healthy Food Options	13%	47%	16%	15%	4%	5%
Overall Quality of Life	15%	63%	15%	6%	1%	2%
Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	N/A, DK
Early Childcare (Age 0 to 3) & Pre-K Education	4%	11%	22%	1%	0%	62%
My child's Public Elementary School	5%	6%	15%	3%	0%	72%
My child's Public Middle School	5%	6%	13%	5%	1%	71%
My child's Public High School	4%	4%	10%	6%	4%	72%
Affordable Housing Options	2%	9%	36%	14%	4%	35%
Public Safety	5%	27%	33%	16%	2%	17%
Race Relations	5%	21%	47%	5%	3%	19%
Fair Distribution of Local Gov't Resources	4%	8%	43%	12%	3%	30%
Cleanliness of Neighborhood (litter)	7%	26%	37%	14%	4%	13%
Recreational Opportunities for Youth	3%	13%	44%	3%	3%	34%
Recreational Opportunities for Adults	4%	20%	47%	3%	4%	22%
Public Library	7%	9%	40%	6%	2%	36%
Public Transportation (CAT bus, trolley, ferry, bike system)	2%	8%	32%	2%	1%	55%
Medical Services (treatment, medicine)	8%	33%	32%	8%	0%	19%
Mental/Behavioral Health Services	2%	9%	31%	6%	2%	50%
Healthy Food Options	7%	31%	45%	4%	2%	11%
Overall Quality of Life	7%	43%	39%	4%	0%	7%

Appendix B. Survey Instrument

Benjamin McKay, Michael Toma, and Dominique Halaby of the Center for Business Analytics and Economic Research in the College of Business at Georgia Southern University (GSU) are conducting a community wide survey to learn about concerns of Chatham County residents. The survey was developed in partnership with the Coastal Georgia Indicators Coalition. The information gained from this community-wide survey will be included in the *Chatham County Survey* report which will inform the community planning process, thereby benefitting you and Chatham County residents.



Your address was selected at random and you must be age 18 or over to participate. Before you begin please note your participation is completely voluntary, and you may stop at any time without penalty. Participating in this survey poses minimal risk, no more than typically associated with daily life. There is limited assurance of confidentiality due to the technology of the internet. Data collected will be presented in aggregated form and no attributed individual responses will be included in the final report. The database will be stored on a password protected hard drive for a period of six years. After six years, it will be erased.



TOKEN

Current Resident

ADD

Savannah, GA ZIP

To thank you for using approximately 20 minutes of your time, you will be **entered in a drawing in which you could win either a grand prize of \$250 or one of five runner-up prizes of \$50. Please use the pre-paid business reply envelope to respond by December 7, 2018.** If you prefer to complete this survey online, please go to: cob.georgiasouthern.edu/big/survey and enter the number above the address.

This project has been reviewed and approved by the GSU IRB under tracking number H19025. For questions about your rights as a participant, please contact GSU-IRB at 912-478-5465. For questions about the research, contact Mr. Benjamin McKay at (912) 478-0872. Completion and return of the survey implies you agree to participate and your data may be used in this research.

* Please read each item carefully and select the best response for you. There are no right answers. Your honesty is needed for this to be meaningful.

* Do not include your name or any other identifier on the survey. Your responses are confidential.

I. Priorities for the Community

1. Of the following 17 items, what are the **TOP FOUR** issues community leaders should focus on improving?
Place an X by your **TOP FOUR** issues.

<input type="checkbox"/> Unemployment rate	<input type="checkbox"/> Adults with health insurance
<input type="checkbox"/> Higher wage jobs	<input type="checkbox"/> Children with health insurance
<input type="checkbox"/> Severe housing problems	<input type="checkbox"/> Food access
<input type="checkbox"/> People living below poverty rate	<input type="checkbox"/> Mental health
<input type="checkbox"/> High school graduation rate	<input type="checkbox"/> Access to exercise opportunities
<input type="checkbox"/> Reading on grade level	<input type="checkbox"/> Violent crime rate
<input type="checkbox"/> Student to teacher ratio	<input type="checkbox"/> Repeat crime offender rate
<input type="checkbox"/> School discipline	<input type="checkbox"/> Workers using public transportation
<input type="checkbox"/> Sidewalks, trails, bike paths	<input type="checkbox"/> Other _____

2. Suppose you have \$1,000 in Special Purpose Local Option Sales Tax (SPLOST) money to spend. How much money would you spend for each of the following projects, assuming you would spend more money on a project you think is more important? (Note that SPLOST funds can only be used on construction projects.)

\$ _____ Recreation, Parks & Green Space	\$ _____ Public Safety
\$ _____ Drainage Infrastructure	\$ _____ Affordable Housing Solutions
\$ _____ Transportation Projects: Roads & Bridges	\$ _____ Infrastructure for Business and Industry Attraction and Job Creation
\$ _____ Sidewalks, Trails, Bike Paths	\$ _____ Early Childhood Development Facility
*** Please be sure your total adds to \$1,000! ***	

In Sections II to VI, please circle the number indicating your agreement or disagreement with the statements.

II. These questions are about <u>your access</u> to Goods, Services, Public Transportation, and Jobs.	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	Not applicable
	1	2	3	4	5	6	7	8	9	10
3. My neighborhood is conveniently located near a grocery store with healthy food choices (such as fresh fruits/vegetables).	1	2	3	4	5	6				
4. My neighborhood is conveniently located near recreational facilities and activities.	1	2	3	4	5	6				
5. My neighborhood is conveniently located near CAT bus routes.	1	2	3	4	5	6				
6. It would benefit me if CAT bus routes were changed for better access to jobs.	1	2	3	4	5	6				
7. I have internet access.	1	2	3	4	5	6				
8. There are job opportunities available that match my skills.	1	2	3	4	5	6				
9. I am aware of opportunities for job and career advancement.	1	2	3	4	5	6				
10. I am aware of financial aid and resources that can support my educational goals (such as: FAFSA, scholarships, loans, grants).	1	2	3	4	5	6				
11. I spend 1/3 or more of my budget on housing (mortgage or rent).	1	2	3	4	5	6				
12. I live paycheck to paycheck at my current job.	1	2	3	4	5	6				
13. I have access to child care services matching my work schedule.	1	2	3	4	5	6				
14. I have access to mental/behavioral health services.	1	2	3	4	5	6				
15. I have access to adult senior services.	1	2	3	4	5	6				
16. I have gone to the public library during the past 12 months.	1	2	3	4	5	6				

III. Health-Related Questions	Yes	No	Not applicable Don't Know
17. I eat five cups of fruits and/or vegetables daily.	1	2	3
18. I exercise regularly (at least 30 minutes 5 times a week).	1	2	3
19. I or someone in my household currently smokes cigarettes.	1	2	3
20. I or someone in my household drinks more than 2 drinks of alcohol <u>DAILY</u> (beer/wine/hard liquor).	1	2	3
21. I or someone in my household has diabetes.	1	2	3
22. I or someone in my household has high blood pressure.	1	2	3
23. I or someone in my household has cancer.	1	2	3
24. I have a family doctor I see for routine care.	1	2	3
25. I or someone in my household has need for mental/behavioral health support.	1	2	3
26. I have health insurance.	1	2	3

IV. Public Safety Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not applicable, Don't Know
27. My neighborhood is mostly free of property crime (break-ins/stealing).	1	2	3	4	5	6
28. My neighborhood is mostly free of violent crime (robbery, assault, rape, murder).	1	2	3	4	5	6
29. The police care about the needs of my neighborhood.	1	2	3	4	5	6
30. My neighborhood is mostly free of alcohol-related problems.	1	2	3	4	5	6
31. My neighborhood is mostly free of unlawful drugs.	1	2	3	4	5	6
32. I know my neighbors and have friends in the neighborhood.	1	2	3	4	5	6
33. People in my neighborhood are willing to help each other.	1	2	3	4	5	6
34. Juvenile crime is a problem in my neighborhood.	1	2	3	4	5	6
35. I feel safe on the CAT bus.	1	2	3	4	5	6
36. There are homeless people who live in my neighborhood.	1	2	3	4	5	6
37. I am concerned about being hit by a vehicle while walking in my neighborhood.	1	2	3	4	5	6

V. Satisfaction with Aspects of My Neighborhood	Very Satisfied	Satisfied	Neutral	Dis-satisfied	Very Dissatisfied	Not Applicable, Don't Know
38. Early Childcare (Age 0 to 3) & Pre-K Education	1	2	3	4	5	6
39. My child's Public Elementary School	1	2	3	4	5	6
40. My child's Public Middle School	1	2	3	4	5	6
41. My child's Public High School	1	2	3	4	5	6
42. Affordable Housing Options	1	2	3	4	5	6
43. Public Safety	1	2	3	4	5	6
44. Race Relations	1	2	3	4	5	6
45. Fair Distribution of Local Gov't Resources	1	2	3	4	5	6
46. Cleanliness of Neighborhood (litter)	1	2	3	4	5	6
47. Recreational Opportunities for Youth	1	2	3	4	5	6
48. Recreational Opportunities for Adults	1	2	3	4	5	6
49. Public Library	1	2	3	4	5	6
50. Public Transportation (CAT bus, trolley, ferry, bike system)	1	2	3	4	5	6
51. Medical Services (treatment, medicine)	1	2	3	4	5	6
52. Mental/Behavioral Health Services	1	2	3	4	5	6
53. Healthy Food Options	1	2	3	4	5	6
54. Overall Quality of Life	1	2	3	4	5	6

VI. Trends in Quality in My Neighborhood (Getting Better or Worse?)	Getting Much Better	Getting Slightly Better	Not Changing	Getting Slightly Worse	Getting Much Worse	Not Applicable, Don't Know
55. Early Childcare (Age 0 to 3) & Pre-K Education	1	2	3	4	5	6
56. My child's Public Elementary School	1	2	3	4	5	6
57. My child's Public Middle School	1	2	3	4	5	6
58. My child's Public High School	1	2	3	4	5	6
59. Affordable Housing Options	1	2	3	4	5	6
60. Public Safety	1	2	3	4	5	6
61. Race Relations	1	2	3	4	5	6
62. Fair Distribution of Local Gov't Resources	1	2	3	4	5	6
63. Cleanliness of Neighborhood (litter)	1	2	3	4	5	6
64. Recreational Opportunities for Youth	1	2	3	4	5	6
65. Recreational Opportunities for Adults	1	2	3	4	5	6
66. Public Library	1	2	3	4	5	6
67. Public Transportation (CAT bus, trolley, ferry, bike system)	1	2	3	4	5	6
68. Medical Services (treatment, medicine)	1	2	3	4	5	6
69. Mental/Behavioral Health Services	1	2	3	4	5	6
70. Healthy Food Options	1	2	3	4	5	6
71. Overall Quality of Life	1	2	3	4	5	6

72. Did you move to Chatham County in the past 5 years?

↓ ☐ ₁ Yes (Go to #73) ☐ ₂ No (Go to #74) →

73. Check the box of any of the following that influenced your decision to MOVE TO Chatham County.

- | | |
|--|---|
| <input type="checkbox"/> ₁ Job opportunities | <input type="checkbox"/> ₅ Safe neighborhood |
| <input type="checkbox"/> ₂ Good schools | <input type="checkbox"/> ₆ Affordability |
| <input type="checkbox"/> ₃ Close to family | <input type="checkbox"/> ₇ Quality of life |
| <input type="checkbox"/> ₄ Professional/social networking opportunities | <input type="checkbox"/> ₈ Military |
| | <input type="checkbox"/> ₉ Other _____ |

Go to #74 (next column to right)

74. Do you plan to leave Chatham County in the next 5 years?

↓ ☐ ₁ Yes (Go to #75) ☐ ₂ No (Go to #77 on next page)

75. Check the box of any of the following that are influencing your decision to LEAVE Chatham County.

- | | |
|--|---|
| <input type="checkbox"/> ₁ Job opportunities | <input type="checkbox"/> ₅ Safe neighborhood |
| <input type="checkbox"/> ₂ Good schools | <input type="checkbox"/> ₆ Affordability |
| <input type="checkbox"/> ₃ Close to family | <input type="checkbox"/> ₇ Quality of life |
| <input type="checkbox"/> ₄ Professional/social networking opportunities | <input type="checkbox"/> ₈ Military |
| | <input type="checkbox"/> ₉ Other _____ |

Go to #76 (on back)

76. If you answered Yes to #74 that you are planning to leave Chatham County in the next 5 years you would...

- ☐ ₁ go to another location in Georgia. ☐ ₂ leave Georgia. ☐ ₃ leave, but are not sure where.

VII. Demographics.

This section asks general demographic and other questions about you. Please check the appropriate responses, being as honest as possible. This information is used for comparison purposes only, and not as means of identification. Remember, all of your answers are CONFIDENTIAL.

77. Which age category describes your current age?

- ☐ ₁ 18-24 ☐ ₂ 25-34 ☐ ₃ 35-49 ☐ ₄ 50-64 ☐ ₅ 65-74 ☐ ₆ 75 and above

78. What is your gender? ☐ ₁ Male ☐ ₂ Female ☐ ₃ Prefer not to identify

79. Which best describes your living situation?

- ☐ ₁ Homeowner ☐ ₂ Renter ☐ ₃ Staying with family or friends ☐ ₃

Other _____

80. How many adults and children are currently living or staying at this address?

Adults (age 18 and over) _____

Children (under age 18) _____

81. How many years have you lived at your CURRENT address? _____ years

82. How many years have you lived in TOTAL in Chatham County? _____ years

83. What is your highest level of education?

- | | | |
|---|--|---|
| <input type="checkbox"/> ₁ Less than high school | <input type="checkbox"/> ₃ Some college (no degree) | <input type="checkbox"/> ₆ Bachelor (4-year) degree |
| <input type="checkbox"/> ₂ High school/GED | <input type="checkbox"/> ₄ Job training/certification | <input type="checkbox"/> ₇ Graduate or professional degree |
| | <input type="checkbox"/> ₅ Associate (2-year) degree | |

84. What is your race/ethnicity?

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> ₁ Hispanic or Latino | <input type="checkbox"/> ₃ Caucasian/White | <input type="checkbox"/> ₅ Asian/Pacific Islander | <input type="checkbox"/> ₇ Other |
| <input type="checkbox"/> ₂ African American | <input type="checkbox"/> ₄ Native American | <input type="checkbox"/> ₆ Biracial/Multiracial | |

85. Your current employment status is...

- ☐ ₁ Full-time job ☐ ₂ Part-time job (less than 30 hours/week) ☐ ₃ Retired ☐ ₄ Not working

86. The address of where you work is:

- | | | |
|--|--|---|
| <input type="checkbox"/> ₁ Savannah | <input type="checkbox"/> ₅ Port Wentworth | <input type="checkbox"/> ₉ Elsewhere in Chatham County |
| <input type="checkbox"/> ₂ Bloomingdale | <input type="checkbox"/> ₆ Thunderbolt | <input type="checkbox"/> ₁₀ Outside Chatham County |
| <input type="checkbox"/> ₃ Garden City | <input type="checkbox"/> ₇ Tybee Island | What County? ₁₁ _____ |
| <input type="checkbox"/> ₄ Pooler | <input type="checkbox"/> ₈ Vernonburg | |

87. What is the combined annual income, before taxes, of all working adults in the household in 2017?

Please include wages, earnings on a business, retirement income, social security, income on rental property you own, unemployment, disability, or any other source of cash income.

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> ₁ Less than \$5,000 | <input type="checkbox"/> ₄ \$20,000-29,999 | <input type="checkbox"/> ₇ \$50,000-59,999 | <input type="checkbox"/> ₉ \$80,000-99,999 |
| <input type="checkbox"/> ₂ \$5,000-9,999 | <input type="checkbox"/> ₅ \$30,000-39,999 | <input type="checkbox"/> ₈ \$60,000-79,999 | <input type="checkbox"/> ₁₀ \$100,000 and up |
| <input type="checkbox"/> ₃ \$10,000-19,999 | <input type="checkbox"/> ₆ \$40,000-49,999 | | |

88. What is the primary means of transportation in your household?

- | | | |
|---|---|--|
| <input type="checkbox"/> ₁ Car/Truck | <input type="checkbox"/> ₃ Walk | <input type="checkbox"/> ₅ Motorcycle/Moped/Motorized Scooter |
| <input type="checkbox"/> ₂ Bus | <input type="checkbox"/> ₄ Bicycle | <input type="checkbox"/> ₆ Other |

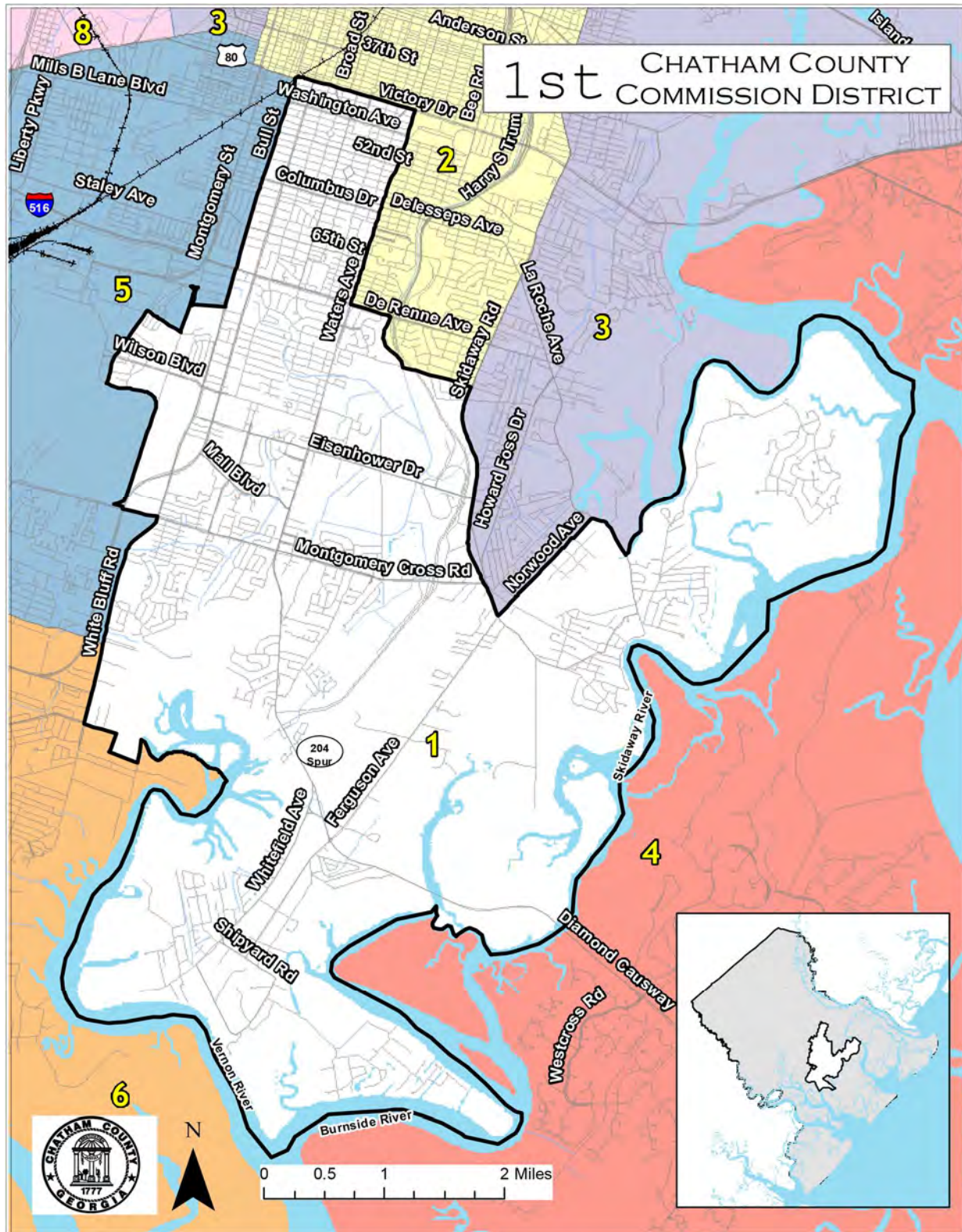
89. Where do you buy most of your food for you and your household? (Check all that apply.)

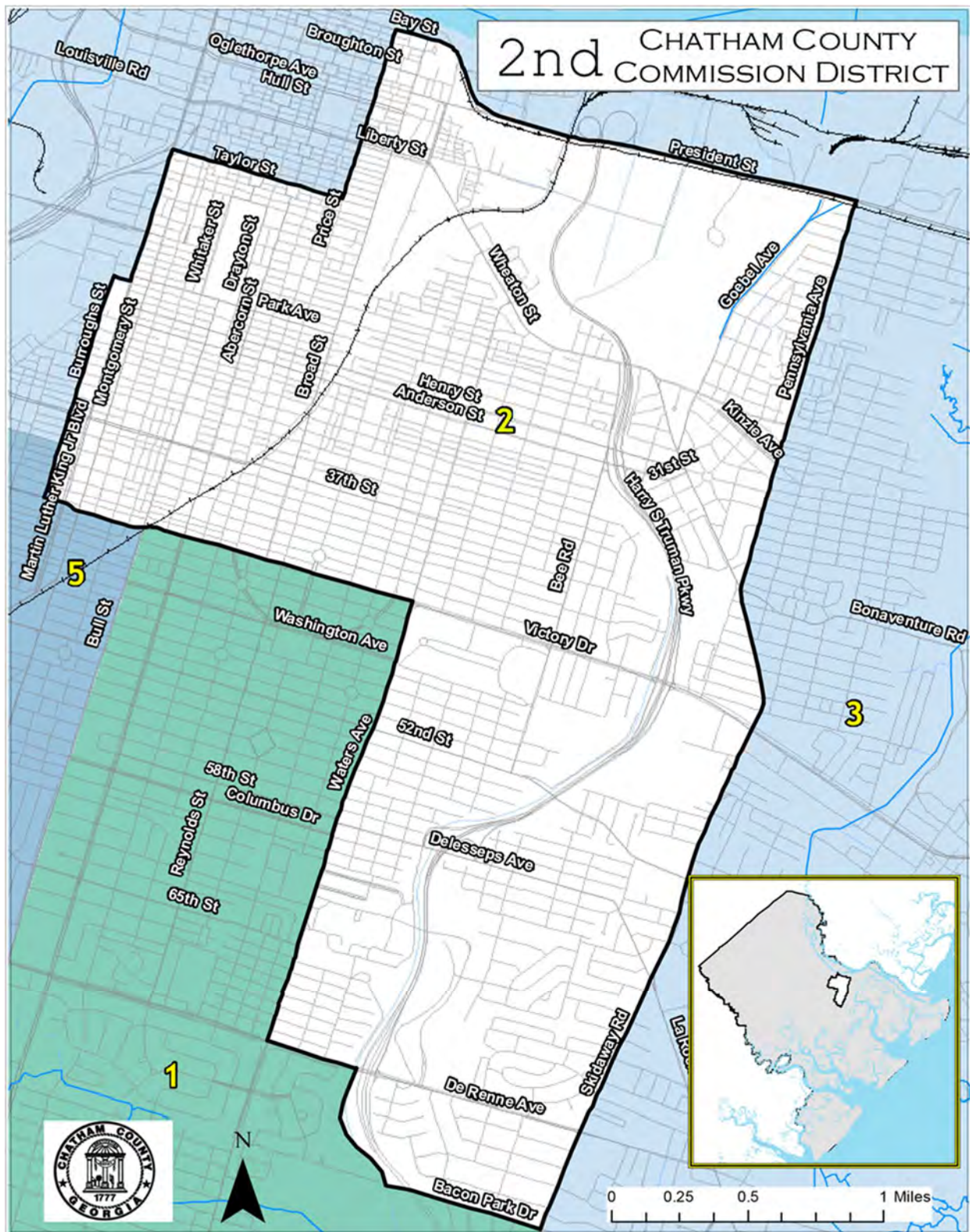
- | | | |
|---|---|---|
| <input type="checkbox"/> ₁ Grocery Store | <input type="checkbox"/> ₃ Discount Store (Dollar Store, Big Lots, etc.) | <input type="checkbox"/> ₅ Farmer's Market |
| <input type="checkbox"/> ₂ Convenience Store | <input type="checkbox"/> ₄ Fast Food/Takeout | <input type="checkbox"/> ₆ Other |

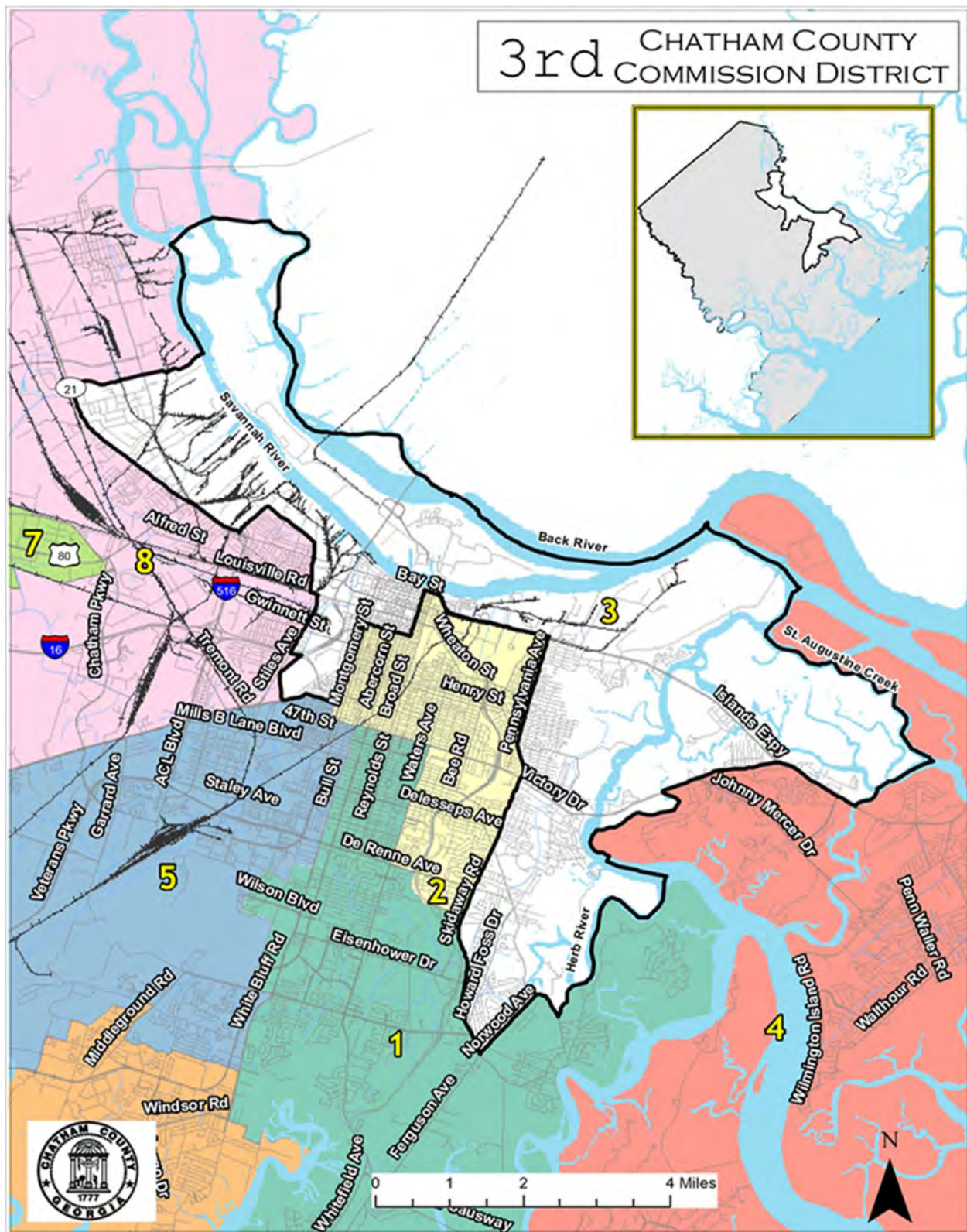
90. Do you have any other comments about our community as we think about planning for 2035 and beyond?

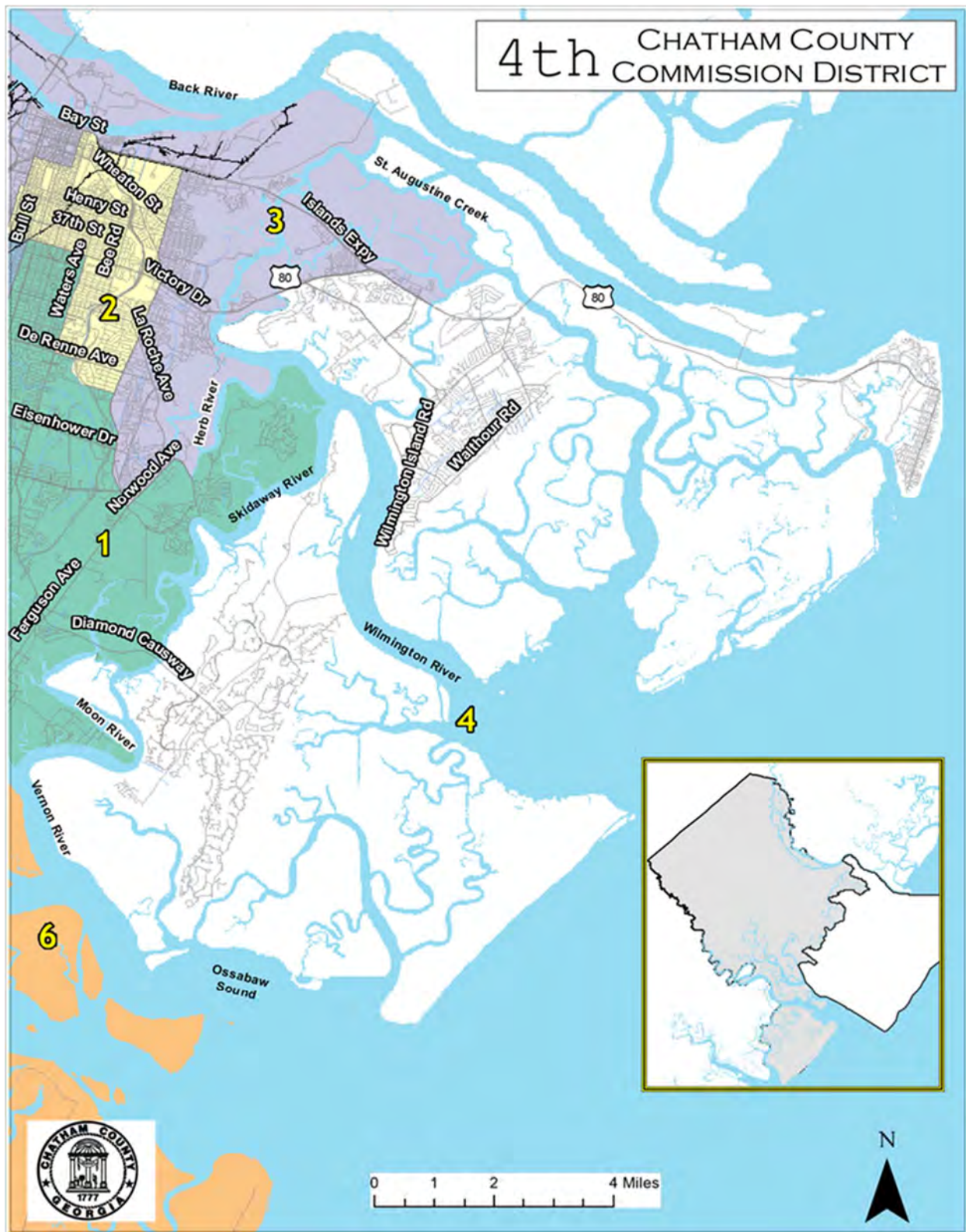
We appreciate you taking the time to complete this survey. Your opinions and feedback are vitally important to us!

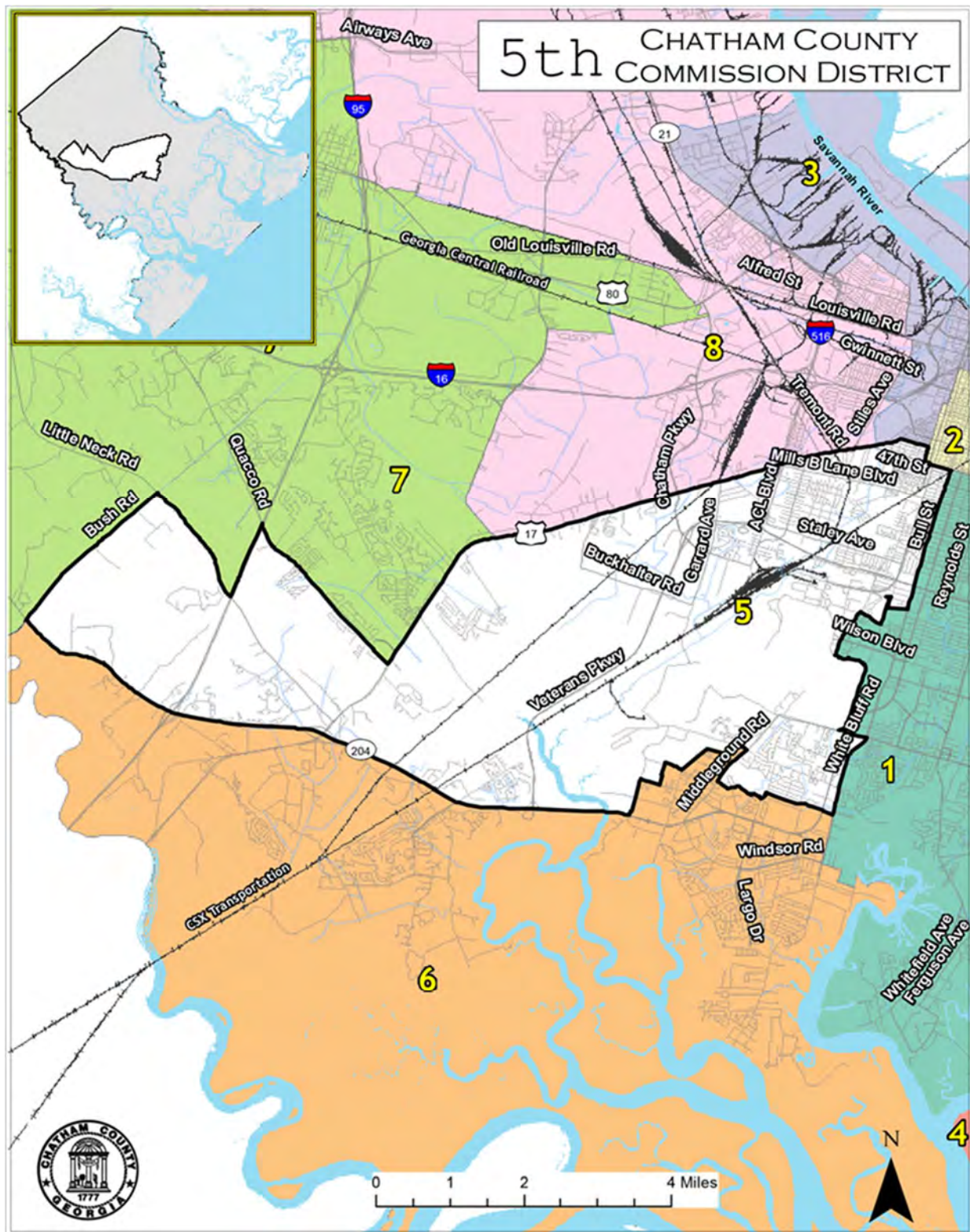
Appendix C. Chatham County Commission District Maps

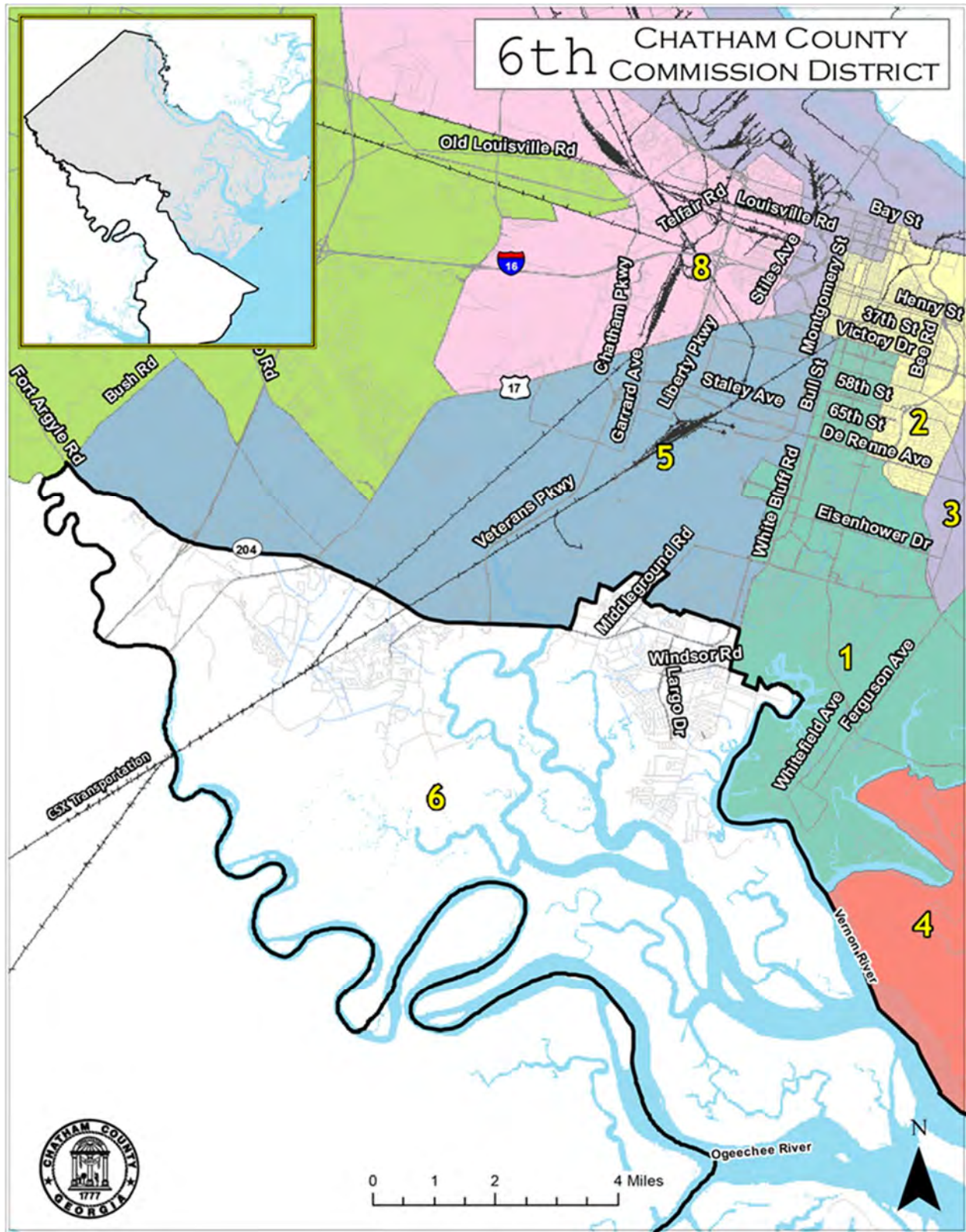


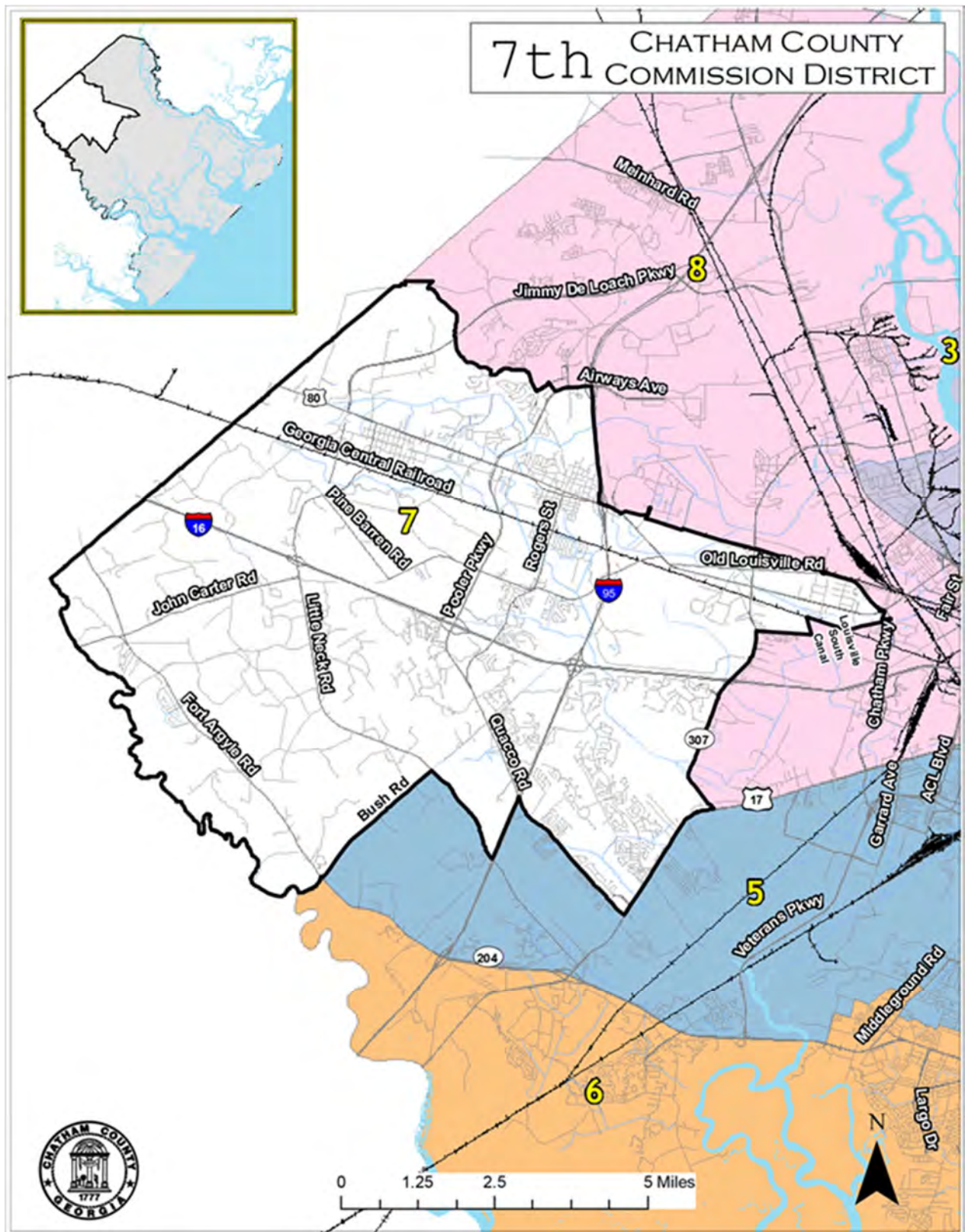


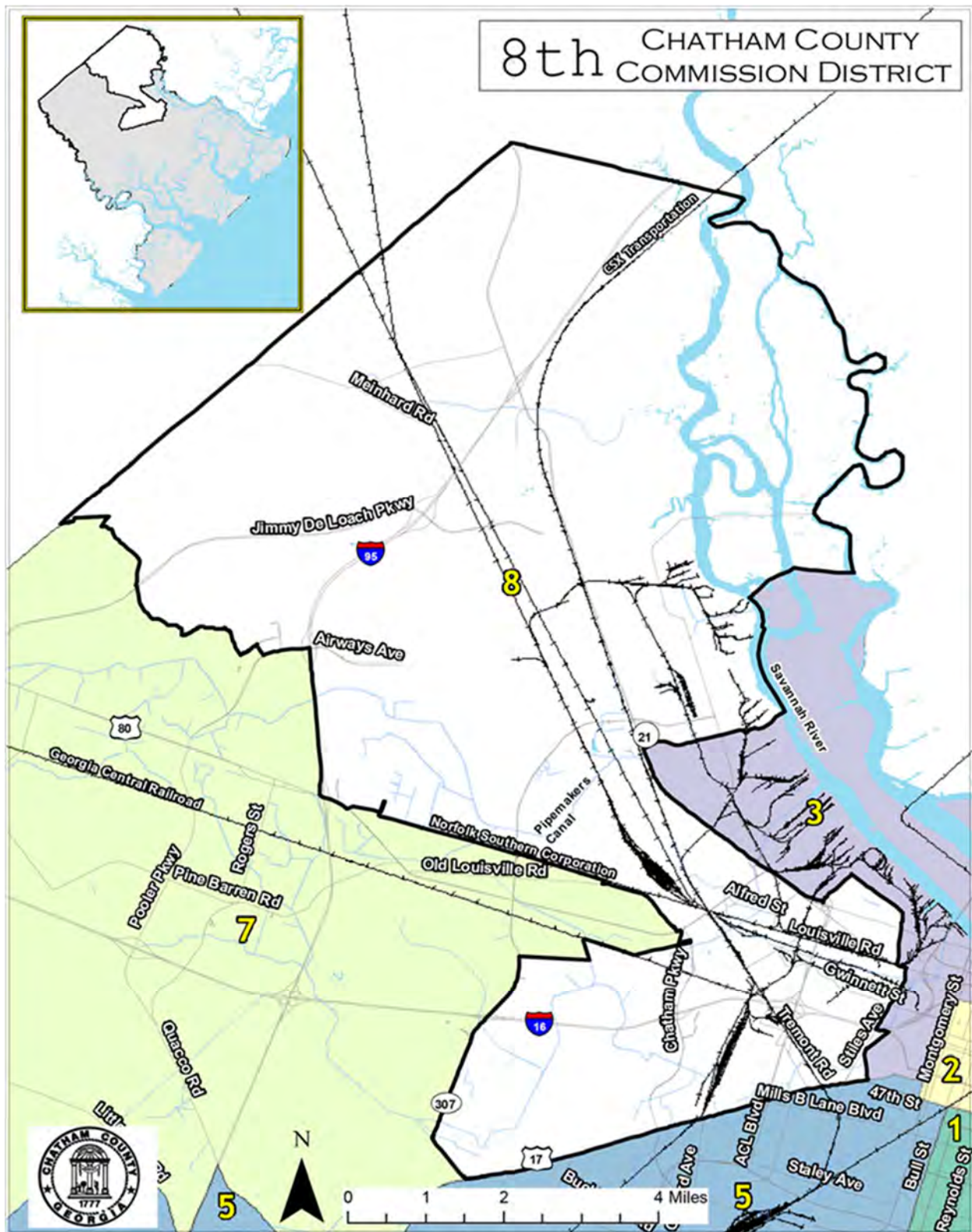












Appendix 3

Community Blue Print Needs

Chatham County Blueprint Identified Needs

These indicators were grouped into four areas of focus and shared with the community through reports to the Chatham County Commissioners and publication of an updated Blueprint document. The following indicators remain high on the list of needs and focus as identified by the community.

Economy

- Unemployment
- Per Capita Income
- Severe Housing Problems
- People Living Below Poverty Level

Education

- Engaging Students, Parent, and the Community in Student Education
- Reading on Grade Level
- Student to Teacher Ratio
- School Discipline
- Graduation Rate

Health

- Individuals with Health Insurance
- Food Insecurity
- Poor Mental Health Days
- Access to Exercise Opportunities

Quality of Life

- Violent Crime
- Workers Commuting by Public Transit
- Miles of Safe, Pedestrian Friendly Transportation
- Recidivism for Juveniles and Adults

These indicators are continually tracked and documented through the annual Status Report published by Coastal Georgia Indicators Coalition Inc. as a means of monitoring and reporting.

Appendix 4

Healthy People 2020 – Chatham County Report

St. Joseph's/Candler
2019 Community Health Needs Assessment

Savannah-Chatham Co. Community Indicator	Chatham Co. Current Rate	Healthy People 2020 Target	Target Status
Adults with Health Insurance	80.3%	100%	Not Met
Food Insecurity Rate	17.6%	N/A	N/A
Students Eligible for Free Lunch Program	57.3%	N/A	N/A
Children Living Below Poverty	25.9%	N/A	N/A
Homeownership	46.9%	N/A	N/A
Renters Spending 30% or more of Household Income on Rent	50.7%	N/A	N/A
Severe Housing Problem	20.3%	N/A	N/A
4 th Grade Math Proficiency	32%	N/A	N/A
8 th Grade Math Proficiency	14.9%	N/A	N/A
Fast Food Restaurant Density	1.02 restaurants /1,000 population	N/A	N/A
Food Environment Index	6.9	N/A	N/A
Violent Crime Rate	448/100,000 population	N/A	N/A
Children with Health Insurance	93.2%	100%	Not Met
Age-Adjusted Death Rate Due to Prostate Cancer	22.1/100,000 males	21.8/100,000 males	Not Met
All Cancer Incident Rate	447.6/100,000 population	N/A	N/A
Breast Cancer Incident Rate	132.5/100,000 females	N/A	N/A
Cervical Cancer Incident Rate	7.5/100,000 females	7.3/100,000	Not Met
Prostate Cancer Incident Rate	121.5/100,000 males	N/A	N/A
Child Food Insecurity	21.8%	N/A	N/A
Teen Pregnancy Rate	32.5/1,000 females ages 15-19	N/A	N/A
Age-Adjusted Death Rate Due to Stroke	42.4/100,000 population	34.8/100,000	Not Met
AIDS Prevalence Rate	327.4/100,000 population	N/A	N/A
Babies with Low Birth Weight	10.3%	7.8%	Not Met
Preterm Births	11.6%	9.4%	Not Met
Infant Mortality Rate	7.4/1,000 live births	6/1,000 live births	Not Met
Families Living Below Poverty	13%	N/A	N/A
People Living 200% Above Poverty Level	64.1%	N/A	N/A
People Living Below Poverty Level	17.3%	N/A	N/A
4 th Grade Reading Proficiency	29.3%	N/A	N/A
8 th Grade Reading Proficiency	32.9%	N/A	N/A
High School Graduation	81%	87%	Not Met
Grocery Store Density	0.20/100,000 population	N/A	N/A
Liquor Store Density	17/100,000 population	N/A	N/A
Poor Mental Health Days	3.8 days	N/A	N/A
Age-Adjusted Death Rate Due to Colorectal Cancer	16.1/100,000 population	14.5/100,000	Not Met
Age-Adjusted Death Rate Due to Breast Cancer	23.4/100,000 females	20.7/100,000	Not Met
Age-Adjusted Death Rate Due to Cancer	167/100,000 population	161.4/100,000	Not Met
Colorectal Cancer Incidence Rate	39.9/100,000 population	39.9/100,000	Met
Babies with Very Low Birth Rate	2.2%	1.4%	Not Met
Mothers Who Smoked During Pregnancy	3.5%	1.4%	Not Met
Adults Who Smoke	18%	12%	Not Met
Workers Commuting by Public Transportation	2.7%	5.5%	Not Met
Age-Adjusted Death Rate Due to Suicide	14.6/100,000 population	10.2/100,000	Not Met

Appendix 5

Chatham County Community Survey and Results

Community Health Needs Assessment Survey

Please help us gain a better understanding about the health issues and strengths within our community. If you can take a few minutes and complete the attached survey, it will help us understand the community needs, challenges, and strengths to help us improve our services and supports.

1. What do you think are the biggest health issues for adults and children in Chatham County? (mark all that apply for each)

	Adults	Children
Finding a doctor who will take care of you without insurance	<input type="checkbox"/>	<input type="checkbox"/>
Finding affordable insurance	<input type="checkbox"/>	<input type="checkbox"/>
Dental Services	<input type="checkbox"/>	<input type="checkbox"/>
Vision Services	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Services	<input type="checkbox"/>	<input type="checkbox"/>
Affordable Medications	<input type="checkbox"/>	<input type="checkbox"/>
Prenatal Care	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse	<input type="checkbox"/>	<input type="checkbox"/>
Sexually Transmitted Disease (STDs)	<input type="checkbox"/>	<input type="checkbox"/>
Chronic Disease Management (Diabetes, Heart Disease, High Blood Pressure, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Housing	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

2. What groups need the most help to access healthcare services in Chatham County

- | | | |
|---|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Low income | <input type="checkbox"/> Working poor | <input type="checkbox"/> Do not know |
| <input type="checkbox"/> Hispanics | <input type="checkbox"/> The disabled | <input type="checkbox"/> Homeless |
| <input type="checkbox"/> Uninsured | <input type="checkbox"/> Seniors | |
| <input type="checkbox"/> Other (please specify) | | |

3. What are the greatest barriers to receiving health care services in Chatham County?

- | | |
|---|--|
| <input type="checkbox"/> Getting a doctor | <input type="checkbox"/> Trusting a doctor |
| <input type="checkbox"/> Affording a doctor | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Other (please specify) | |

4. What are the greatest needs regarding health information and education in Chatham County?

- | | | |
|---|---|---|
| <input type="checkbox"/> Enough resources (doctors, offices, clinics, etc.) | <input type="checkbox"/> Disease management (Diabetes, Cancer, High Blood Pressure, Etc.) | <input type="checkbox"/> Dental services |
| <input type="checkbox"/> Appointments after work or on weekends | <input type="checkbox"/> Mental health | <input type="checkbox"/> General health information |
| <input type="checkbox"/> Other (please specify) | | |

5. Where do you see gaps for people needing healthcare service in Chatham County?

- | | | |
|--|---|---|
| <input type="checkbox"/> Enough doctors | <input type="checkbox"/> Mental health | <input type="checkbox"/> Dental care |
| <input type="checkbox"/> Enough free or reduced cost clinics | <input type="checkbox"/> Disease management | <input type="checkbox"/> Prescription drug assistance |
| <input type="checkbox"/> Other (please specify) | | |

6. What other problems affect how and where people receive healthcare in Chatham County?

- | | |
|---|--|
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Appointment times |
| <input type="checkbox"/> Money | <input type="checkbox"/> Doctors who take Medicaid or Medicare |
| <input type="checkbox"/> Other (please specify) | |

7. How would you like to learn more about healthy living, health services, and policies?

- | | | |
|--|---|---|
| <input type="checkbox"/> Newspapers/printed flyers | <input type="checkbox"/> Social media (Facebook, Twitter, Instagram, etc) | <input type="checkbox"/> Word of mouth |
| <input type="checkbox"/> Emailed newsletter | <input type="checkbox"/> Phone resource directory | <input type="checkbox"/> Direct mail |
| <input type="checkbox"/> Text messages | <input type="checkbox"/> Radio | <input type="checkbox"/> Community/neighborhood newsletters |

8. Which of the following services and activities do you use right now, which would you like to be able to use, and which ones do you want to learn about?

	Use now/have used	Would like to use	Want more information	Do not want to use	Does not apply to me
Private doctors office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public health department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Room (ER)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
YMCA/recreational activities/Gyms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire department blood pressure checks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
African American Health Resource Centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SNAP/EBT Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WIC Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. When you are sick, where do you see a doctor?

<input type="checkbox"/> Doctor's Office	<input type="checkbox"/> St. Mary's Health Center	<input type="checkbox"/> Curtis V. Cooper Primary Care Centers
<input type="checkbox"/> Urgent/Immediate Care Center	<input type="checkbox"/> The Good Samaritan Clinic	<input type="checkbox"/> Health Department
<input type="checkbox"/> Emergency Room	<input type="checkbox"/> J.C. Lewis Health Care Center	<input type="checkbox"/> Community Health Mission
<input type="checkbox"/> Other (please specify)		

10. When do you go to the doctor?

☐ For check ups
 ☐ When you are sick or hurt
 ☐ Never

11. How long does it take for you to get an appointment?

☐ More than 5 days
 ☐ 4 days
 ☐ 2 days

☐ 5 days
 ☐ 3 days
 ☐ 1 day

12. How long do you normally wait to see a doctor?

☐ 2-4 hours
 ☐ 1-2 hours
 ☐ 30 minutes – 1 hour
 ☐ Less than 30 minutes

13. If you can not see a doctor, why not?

- ☐ Cost too high ☐ Owe the doctor money ☐ Does not apply
☐ Not taking new patients ☐ Will not take my insurance
☐ Other (please specify)

14. Have you ever had trouble getting an appointment because you could not pay?

- ☐ Yes ☐ No ☐ Does not apply

15. Do you have insurance?

- ☐ Tricare ☐ Medicare ☐ No insurance
☐ Private insurance (such as Blue Cross Blue Shield, Employer insurance, etc.) ☐ Medicaid
☐ Other (please specify)

16. Do you need a doctor who charges you based on the amount you can pay? (Sliding scale)

- ☐ Yes ☐ No ☐ Does not apply

17. If you go to the emergency room, why do you go there?

- ☐ Do not have a doctor ☐ They are always open (24/7) ☐ Does not apply
☐ No insurance ☐ Can not afford insurance co-pay
☐ Other (please specify)

18. If you have cancer, what type of cancer do you have?

- ☐ Prostate Cancer ☐ Lung and Bronchus Cancer ☐ Does not apply
☐ Colorectal Cancer ☐ Breast Cancer
☐ Oral Cavity and Pharynx Cancer ☐ Melanoma (Skin) Cancer
☐ Other (please specify)

19. What other things do you think would make your quality of life better and improve your health?

- | | | |
|---|---|---|
| <input type="checkbox"/> Understanding health and health management better (education) | <input type="checkbox"/> Job training including resume and application assistance | <input type="checkbox"/> Reliable transportation |
| <input type="checkbox"/> Understanding what government programs I may qualify for (e.g., Food Stamps, Medicaid, Disability, etc.) | <input type="checkbox"/> Free or reduced day care expense so you can work or go to school | <input type="checkbox"/> Money management classes |
| <input type="checkbox"/> A college/university degree | <input type="checkbox"/> Free pre-school | <input type="checkbox"/> Access to free or reduced price food |
| <input type="checkbox"/> More college/university education | <input type="checkbox"/> Safe and affordable housing | <input type="checkbox"/> Computer training |
| <input type="checkbox"/> Other (please specify) | | |

Community Health Needs Assessment Survey

Demographics

20. What is your zip code?

Zip code:

21. Which best describes your current marital status?

- | | | |
|---|-------------------------------|---------------------------------------|
| <input type="radio"/> Married or domestic partnership | <input type="radio"/> Widowed | <input type="radio"/> Live in partner |
| <input type="radio"/> Divorced/Separated | <input type="radio"/> Single | |

22. How many people live in your household

- | | | |
|-------------------------|-------------------------|---------------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 3 | <input type="radio"/> 5 |
| <input type="radio"/> 2 | <input type="radio"/> 4 | <input type="radio"/> 6 or more |

23. I am:

- ☐ Male ☐ Female ☐ Transgender ☐ Prefer not to identify

24. How old are you?

- | | | |
|--------------------------------|--------------------------------|--|
| <input type="radio"/> 0 to 19 | <input type="radio"/> 30 to 44 | <input type="radio"/> 60 to 74 |
| <input type="radio"/> 20 to 29 | <input type="radio"/> 45 to 59 | <input type="radio"/> 75 years and older |

25. Which race/ethnicity best describes you?

- | | |
|---|--|
| <input type="radio"/> White, Non-Hispanic | <input type="radio"/> Native Hawaiian and Other Pacific Islander, Non-Hispanic |
| <input type="radio"/> Black or African American, Non-Hispanic | <input type="radio"/> Hispanic |
| <input type="radio"/> American Indian and Alaska Native, Non-Hispanic | <input type="radio"/> Prefer not to answer |
| <input type="radio"/> Asian, Non-Hispanic | |
| <input type="radio"/> Other (please specify) | |

26. What is the highest level of education you have completed?

- | | | |
|---|---|---|
| <input type="radio"/> Less-Than high school | <input type="radio"/> Some college, no degree | <input type="radio"/> Bachelor's Degree |
| <input type="radio"/> High School or GED | <input type="radio"/> Associate's Degree | <input type="radio"/> Graduate or Professional Degree |

27. What is your net household income per month? (The amount you have left over from your check after taxes, insurance, social security, etc. is taken out)

- | | |
|-------------------------------------|---|
| <input type="radio"/> \$0 - \$199 | <input type="radio"/> \$1,000 - \$1,999 |
| <input type="radio"/> \$200 - \$499 | <input type="radio"/> \$2,000 - \$2,999 |
| <input type="radio"/> \$500 - \$999 | <input type="radio"/> More than \$3,000 |

28. What is the primary language spoken in your household

- | | |
|--|----------------------------------|
| <input type="radio"/> English | <input type="radio"/> Vietnamese |
| <input type="radio"/> Spanish | <input type="radio"/> Filipino |
| <input type="radio"/> Other (please specify) | |

29. What is your employment status?

- | | |
|----------------------------------|---------------------------------|
| <input type="radio"/> Unemployed | <input type="radio"/> Part-time |
| <input type="radio"/> Homemaker | <input type="radio"/> Student |
| <input type="radio"/> Full-time | <input type="radio"/> Retired |

Thank you for taking the time to complete this survey!

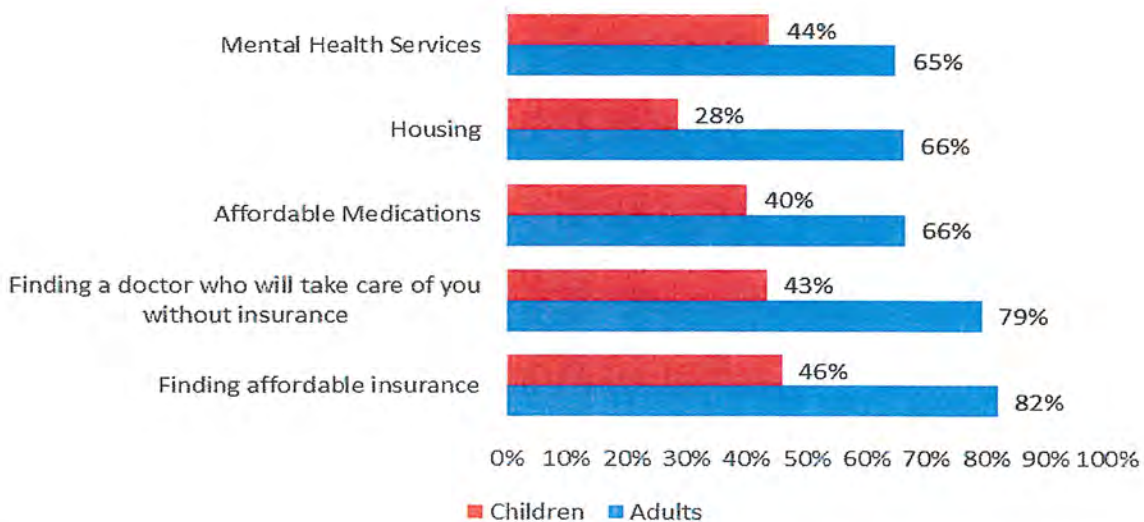
Biggest health issues for adults and children in Chatham County (Q1)

Community members were asked to indicate what they thought the top health issues were for children and adults in Chatham County. As can be seen in the table and graph below, finding affordable insurance was the biggest issue for both children and adults. Mental health services for youth and finding a doctor who will take care of you without insurance were the other top issues for youth. Finding a doctor and affordable medications were the other top issues for adults.

Table 1: Biggest health issues

	Adults	Children
Finding affordable insurance	82%	46%
Finding a doctor who will take care of you without insurance	79%	43%
Affordable Medications	66%	40%
Housing	66%	28%
Mental Health Services	65%	44%
Dental Services	62%	40%
Chronic Disease Management (Diabetes, Heart Disease, High Blood Pressure, etc.)	59%	16%
Vision Services	52%	30%
Substance Abuse	49%	21%
STDs	42%	17%
Prenatal Care	37%	14%

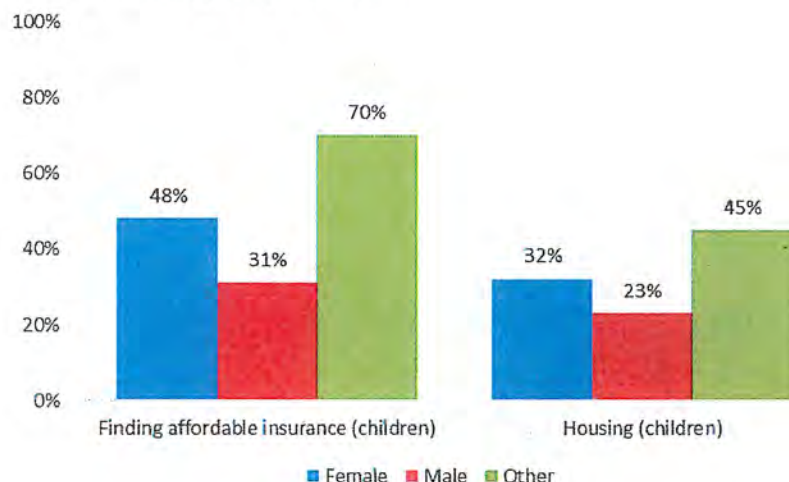
Figure 1: Top 5 Health issues for Adults and Children



When looking across groups, transgender and those who preferred not to identify were more likely to indicate that finding affordable insurance and housing for children were key health issues, than were

female or male respondents. There were no other statistical differences in responses among the gender groups.

Figure 2: Challenges by Gender



Among racial groups, those who identified as other (Hispanic, Asian, multi-racial, prefer not to identify) were more likely to indicate that finding a doctor, dental services, prenatal care for children, and STDs among children were bigger issues than the black or white respondents. There were no other statistical variations among respondents.

Figure 3: Challenges by Race

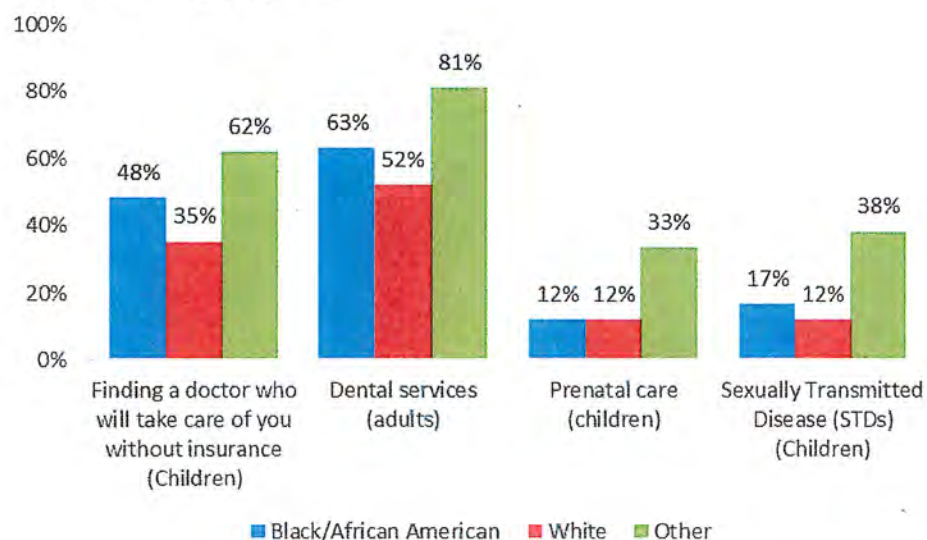
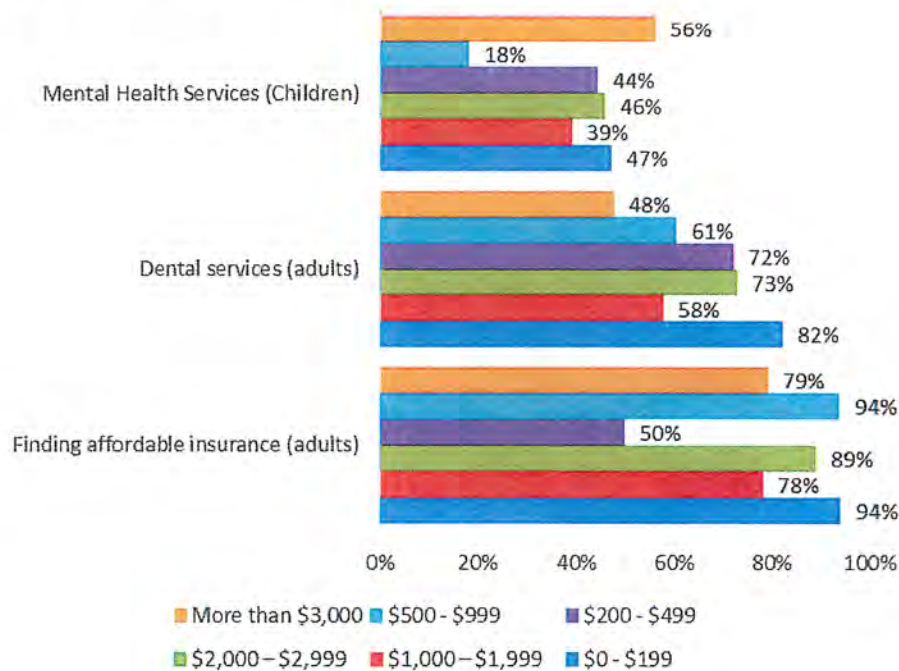


Figure 4: Challenges by Income



Those with an income level of \$200-499 per week were less likely than others to indicate that finding affordable insurance for adults was an issue. Those earning more than \$3,000 a week were less likely to indicate that dental services for adults were an issue. Among those earning, \$500-999 a week fewer were likely to indicate that mental health services for children was an issue for the community.

Respondents in the 31410 and 31411 zip code areas were not as likely to indicate that finding a doctor who will take you without insurance as respondents in other categories. Those in the 31419, 31410 and 31411 zip codes were less likely than other zip codes to indicate that dental services for adults were a concern. Respondents in 31415 were more likely to indicate that vision services for adults were an issue. Respondents in 31410 and 31411 were less likely than most zip codes and 31415 was the most likely to indicate that STDs among adults were a top concern.

Table 2: Challenges by Income

Zip Code	Finding a doctor who will take you without insurance (adults)	Dental services (adults)	Vision services (adults)	Sexually transmitted diseases (adults)
31401	83%	63%	54%	51%
31404	88%	62%	56%	59%
31405	83%	60%	40%	40%
31406	90%	61%	42%	39%
31415	88%	88%	81%	63%
31419	78%	47%	58%	42%
31407 and 31408	80%	80%	55%	35%
31410 and 31411	47%	26%	16%	5%
All other zip codes	59%	55%	55%	36%

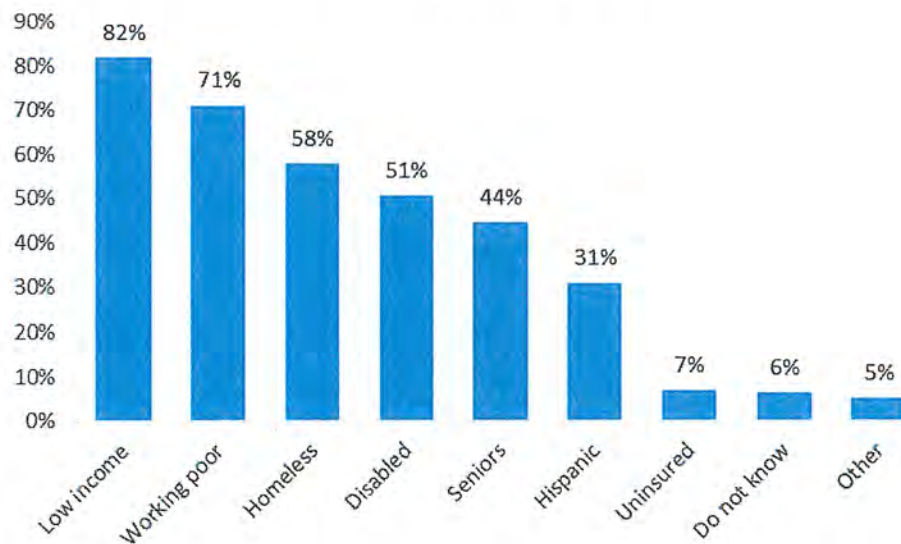
Groups that need the most help to access healthcare services in Chatham County (Q2)

The community survey also asked respondents what subpopulations needs the most support to access healthcare in Chatham county. There were 15 responses that indicated that there were other significant groups that needed access. Those other categories included other ethnicities, African American/Black residents, Immigrants, Veterans, Single mothers, and mental health challenges. Among the groups listed in the survey, low income were the most at risk followed by the working poor.

Table 3: Groups needing support

Group	%
Low income	82%
Working poor	71%
Homeless	58%
Disabled	51%
Seniors	44%
Hispanic	31%
Uninsured	7%
Do not know	6%
Other	5%

Figure 5: Groups needing assistance with accessing healthcare services

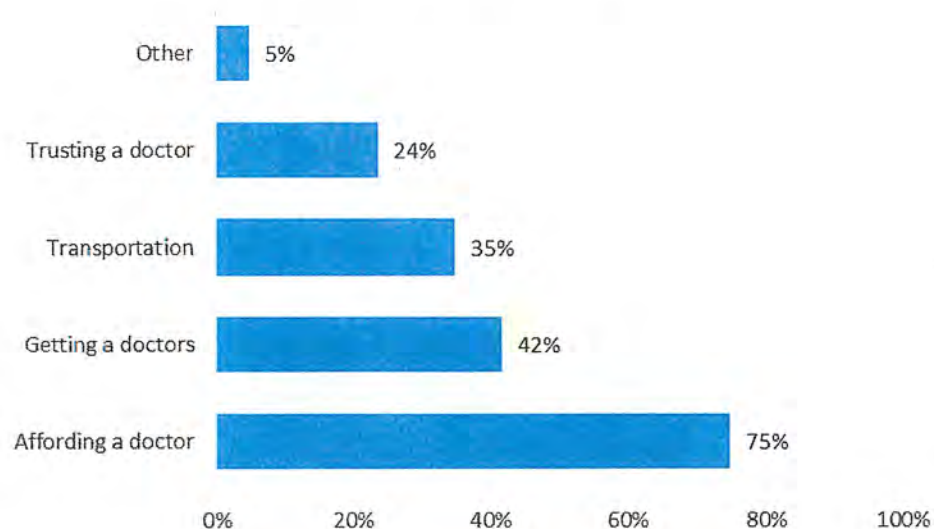


The only statistically significant group difference was that respondents who identified as “other” (Hispanic, Asian Pacific Islander, Prefer not to identify, multi-racial) were more likely than black or white respondents to indicate that Hispanics were the most at need for support (52% compared to 23% and 36% respectively).

Greatest Barrier to Receiving Healthcare in Chatham County (Q3)

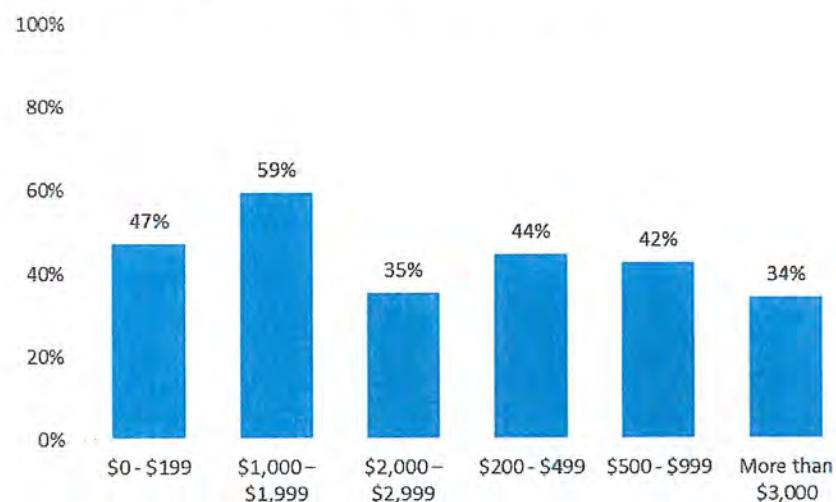
When respondents were asked about the greatest barriers to accessing healthcare, affordability was the top issue mentioned by three quarters of the respondents. Other responses included after hours and weekend services, services for ethnicities, insurance challenges (getting insurance and the high deductibles).

Figure 6: Greatest barriers to accessing healthcare



The only statistically significant difference among groups on the greatest barriers to receiving health care in the county were related to income. Respondents who earned \$1,000 to \$1,999 were more likely than other income levels to indicate that Getting a doctor was an issue.

Figure 7: Getting a doctor as a barrier by income

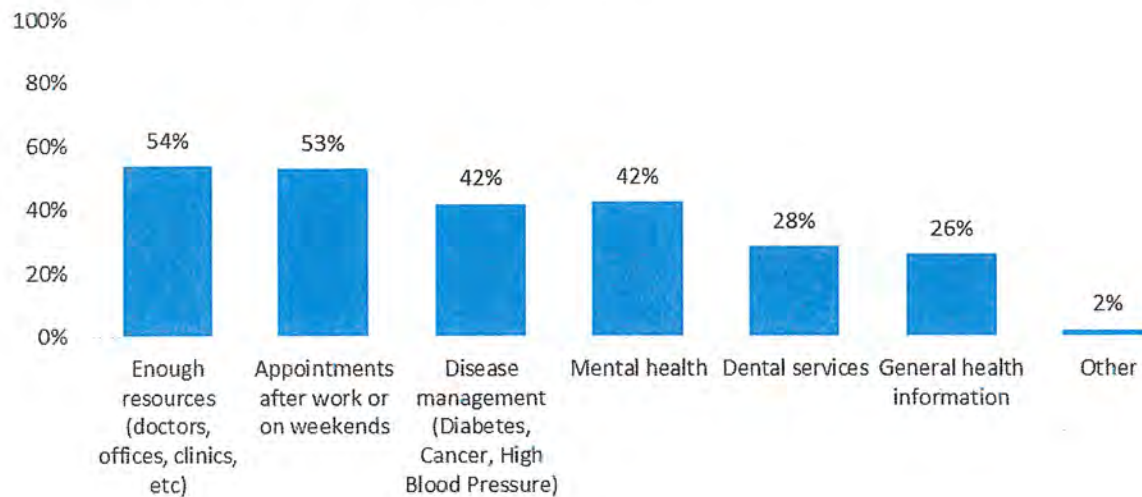


Greatest needs regarding health information and education in Chatham County (Q4)

The greatest need regarding health information and education in Chatham County was around enough resources. Among the 6 responses that were outside of the items listed in the survey, those included

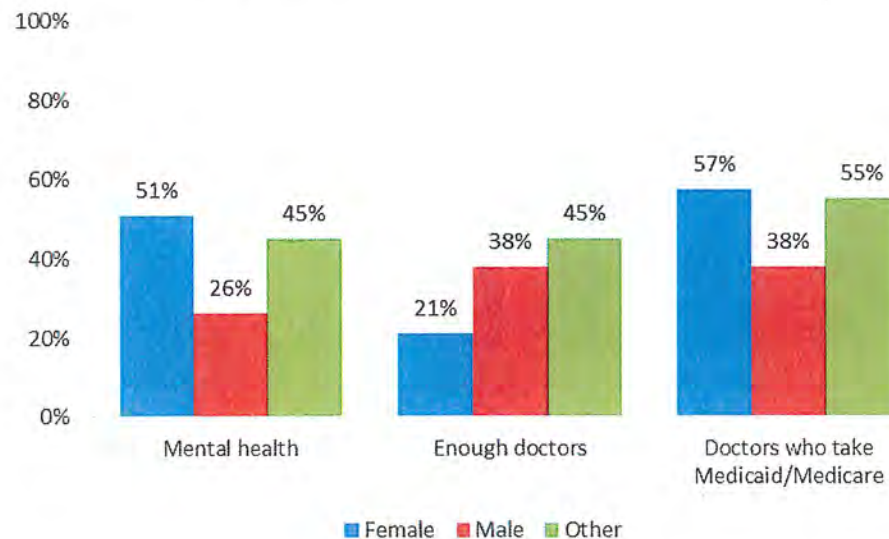
qualified health workers and communicating the importance of health care services for low income and high risk individuals.

Figure 8: Greatest needs regarding health information



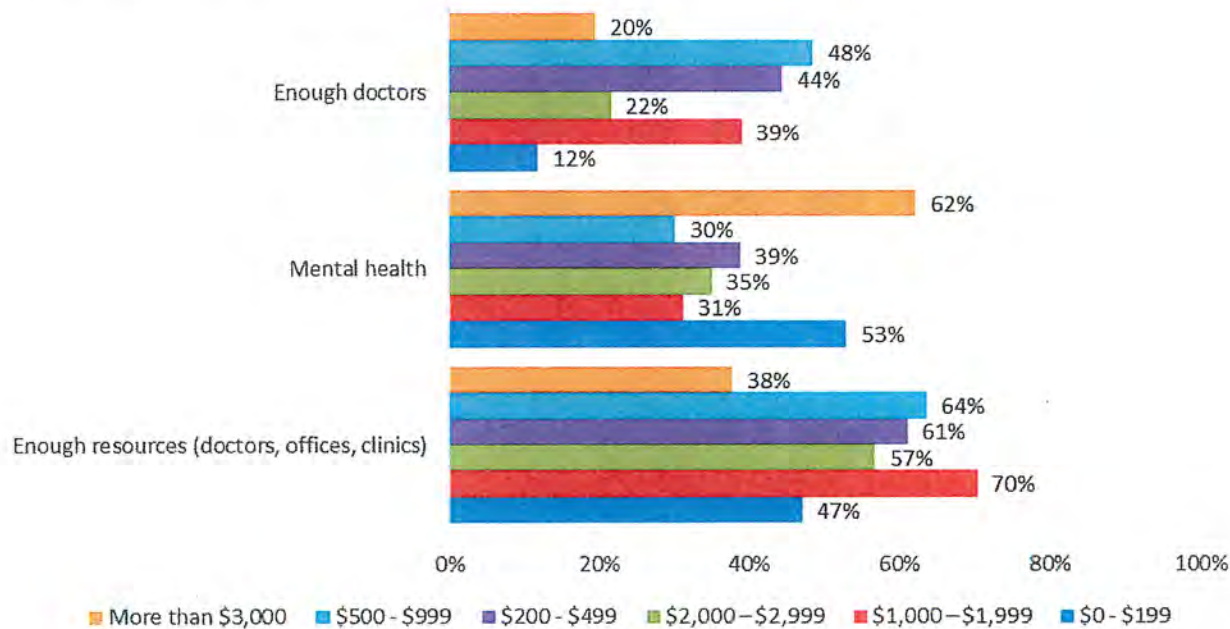
There were differences in how men and women responded to this question as well as differences in responses to some areas by income and zip code. In general, women were more likely than men or transgender/prefer not to answer to indicate that mental health services were a significant need. Men were less likely to indicate that doctors who take Medicaid/medicare was an issue in the community.

Figure 9: Barriers by Gender



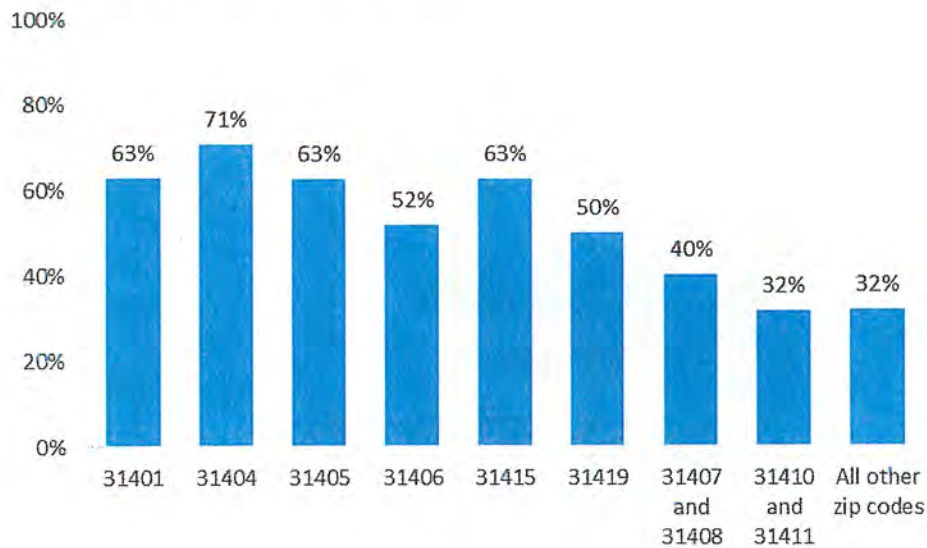
Those who earned more than \$3,000 per week were the least likely to indicate that enough resources was a barrier in the county, while those earning \$1,000 to \$1,999 were the most likely. Mental health was mentioned by a barrier more frequently among those who earned \$0-199 and more than \$3,000. The availability of doctors was seen as a barrier more frequently among those earning \$500 to 999 and least frequently among those earning \$0-199 per week.

Figure 10: Barriers by income level



Respondents in the 31404 zip code were the most likely to indicate that enough resources was an issue, while those in the 31410 and 31411 as well as other zip codes were the least likely to mention that enough resources were a barrier.

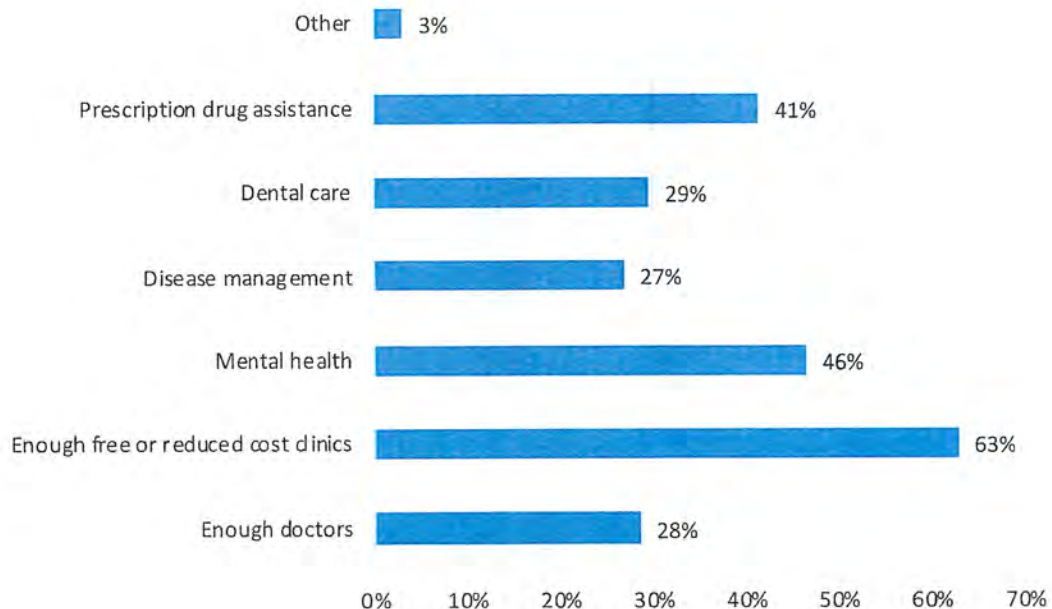
Figure 11: Barrier differences by zip code



Gaps for people needing healthcare services in Chatham County (Q5)

Among those who responded to the survey, the amount of free and reduced cost clinics was a top need for people needing health care services in the county. Disease management was the least cited need for health care services. There were no statistically significant differences among any groups in the responses to the perceived gaps and needs for health care in the county.

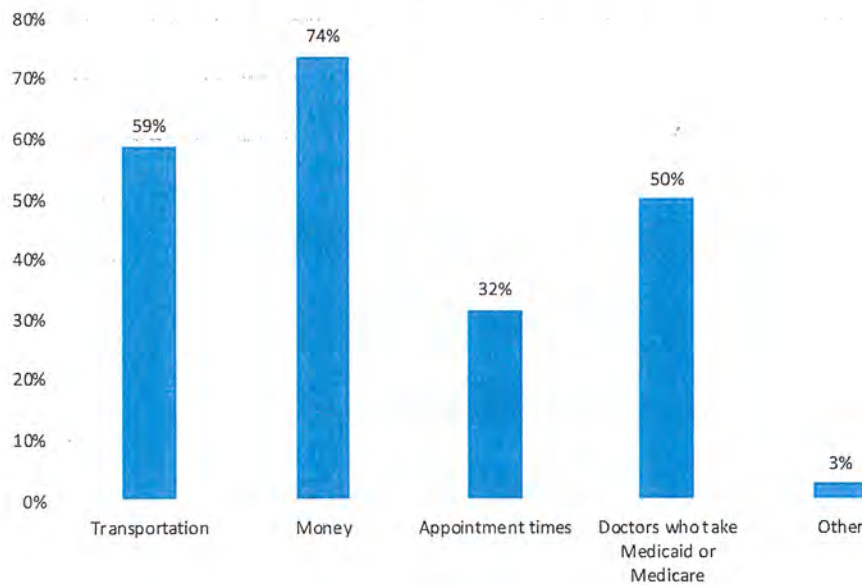
Figure 12: Gaps for people needing health care services



Other issues impacting how and where individuals access healthcare in Chatham County (Q6)

The primary issue impacting how individuals access healthcare in the county was money, cited by almost three quarters of the respondents. Over half of the respondents also indicated that transportation was an issue. There were no statistically significant differences in the responses and selected factors among any of the comparison groups.

Figure 13: Factors impacting how and where individuals access healthcare



Preferred ways to learn more about healthy living, health services, and policies (Q7)

Almost half (46%) of all respondents indicated that they preferred to receive information about healthy living and health services from social media. Respondents were least likely to select a preference for text messages as a way of receiving information.

Figure 14: Ways to learn about healthy living, health services, and policies

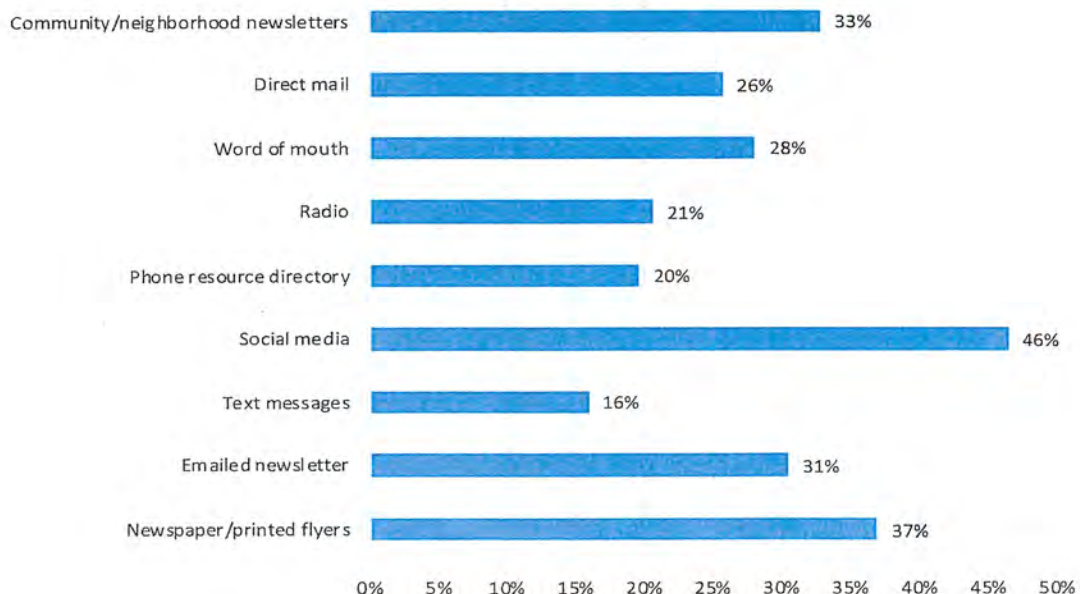
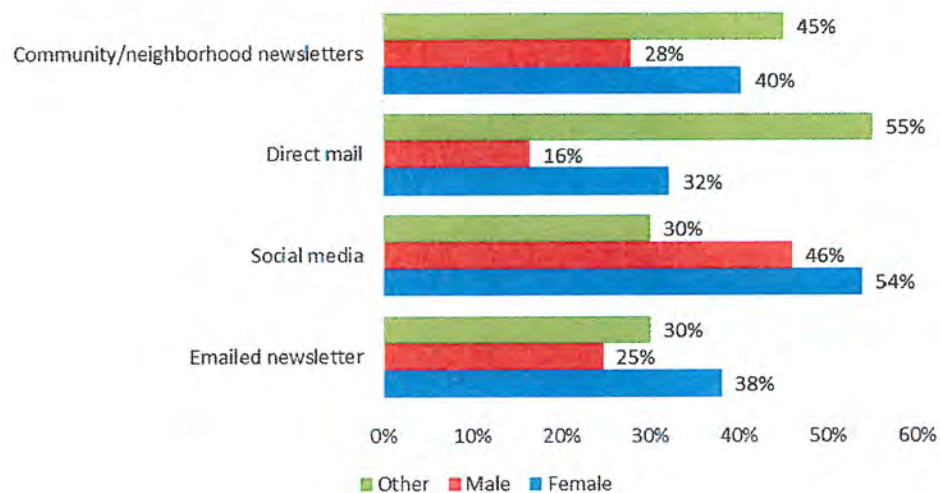


Table 4: Communication Preferences

	%
Community/neighborhood newsletters	33%
Direct Mail	26%
Word of mouth	28%
Radio	21%
Phone resource directory	20%
Social Media	46%
Text messages	16%
Emailed newsletter	31%
Newspaper/printed flyers	37%

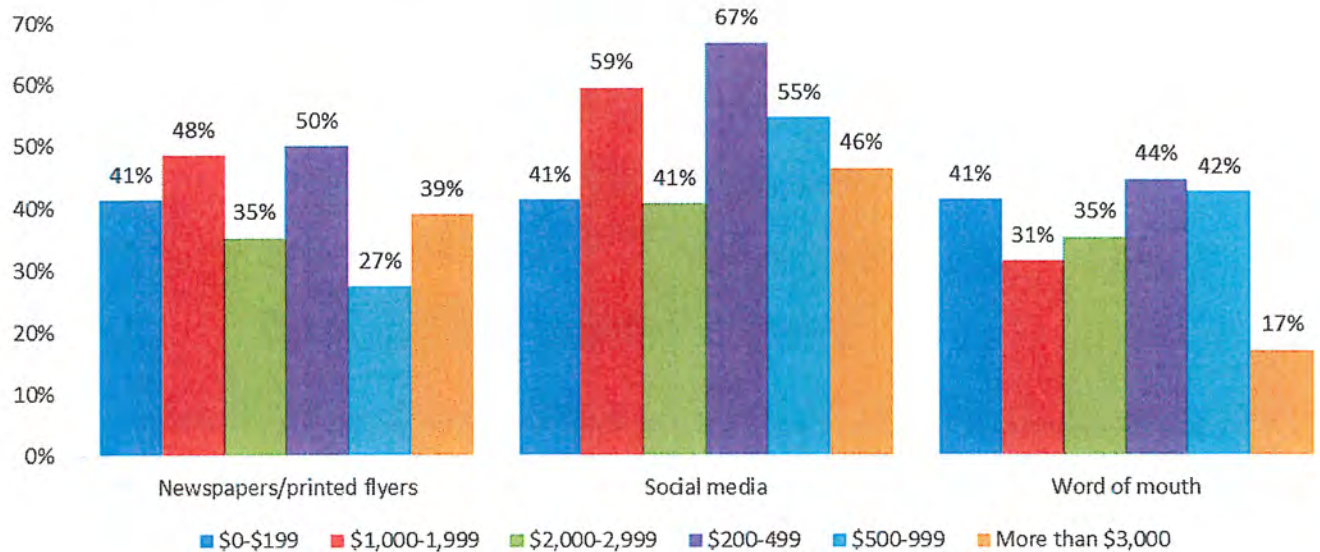
There were several difference across comparison groups. Females were more likely to prefer an emailed newsletter, social media, and community newsletters.

Figure 15: Communication preferences by gender



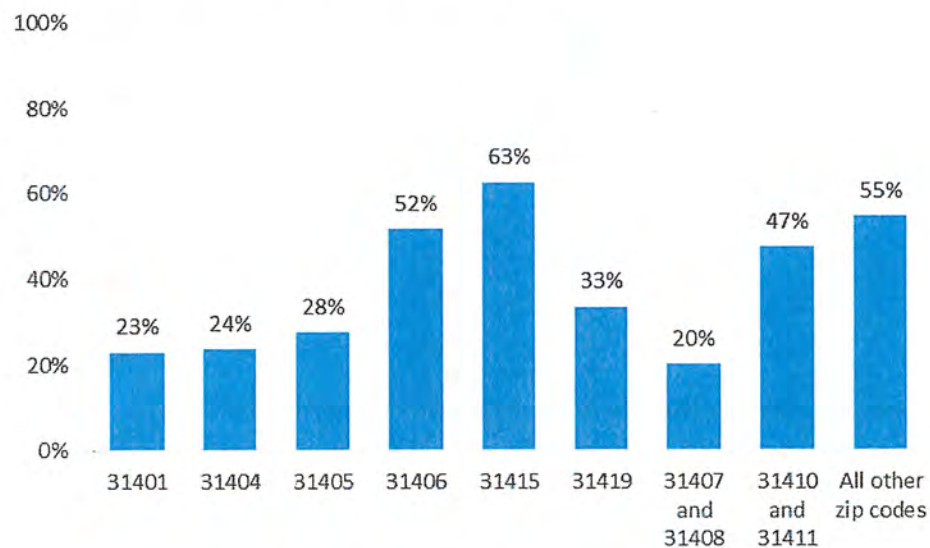
Those earning \$200-499 per week were more likely to want to receive information via newspaper/printed flyers or social media, while those earning \$500-999 were least likely to prefer newspapers/printed flyers. Those earning more than \$3,000 were least likely to prefer word of mouth.

Figure 16: Communications by income



Respondents in the 31415 zip code were the most likely to indicate a preference for community/neighborhood newsletters (63%), while those in 31407 and 31408 were the least likely to prefer this communication.

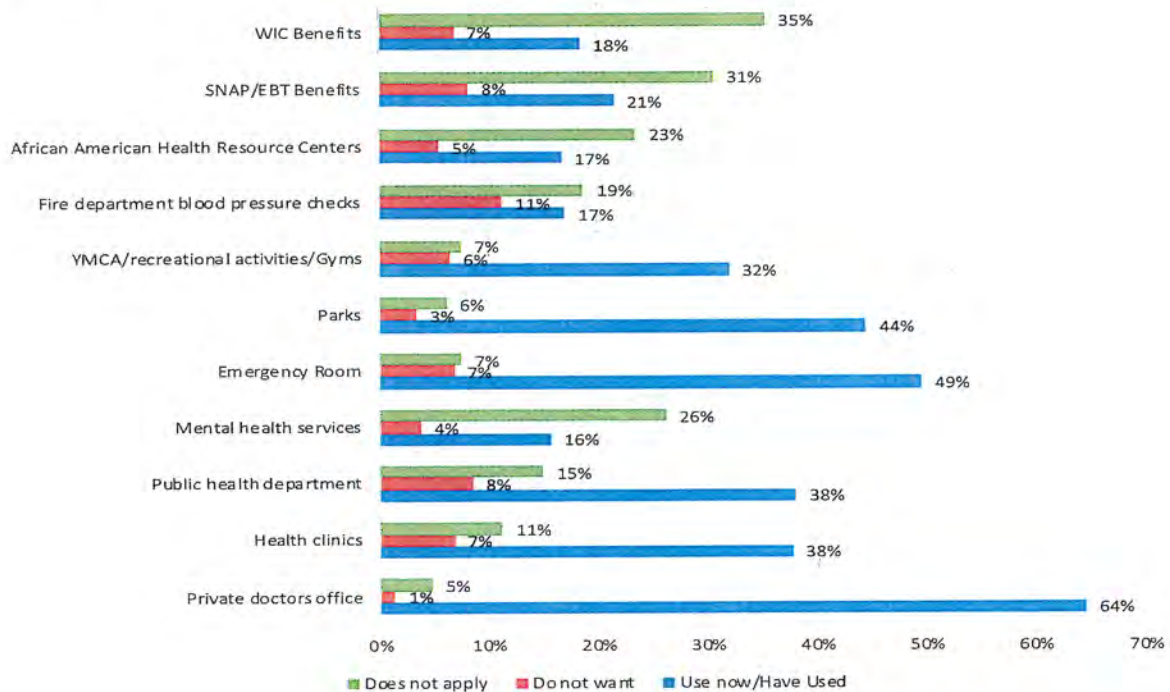
Figure 17: Communication preferences by zip code



Services Used (Q8a)

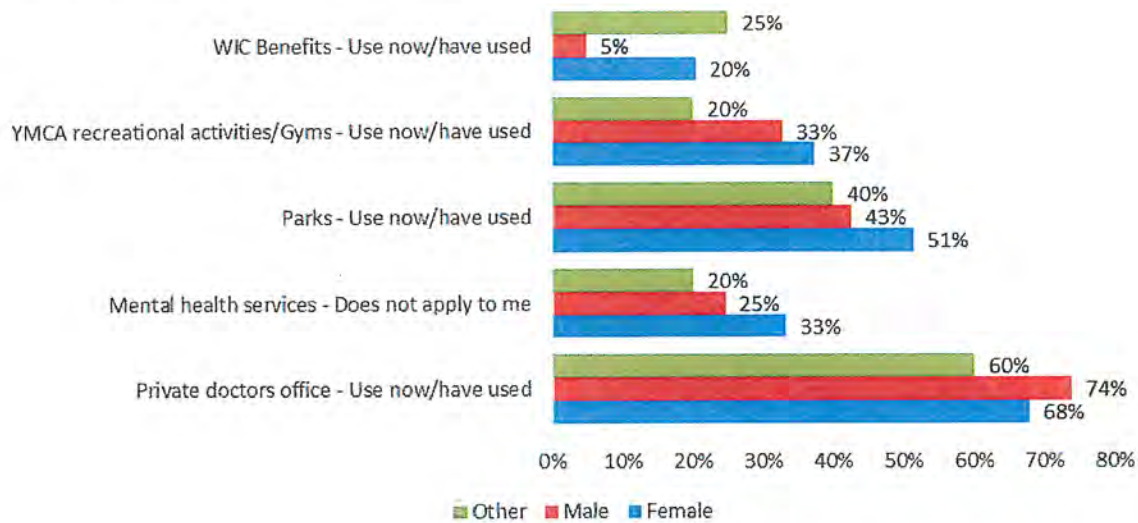
Respondents were asked to indicate which services they have used in the past, are currently using or would like more information about. As seen in the figure below, most (64%) have used a private doctors office and almost half have used an ER (49%).

Figure 18: Services Used



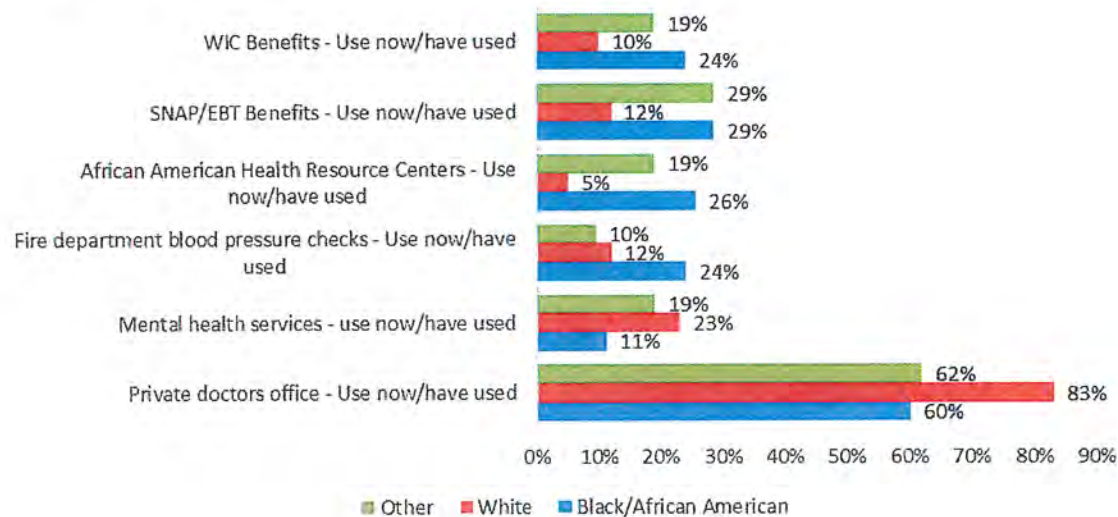
Men were more likely to indicate that they have used a private doctor's office. Women were more likely to indicate that mental health services did not apply to them. Women were more likely to indicate that they used WIC benefits, Parks, and YMCA recreational activities.

Figure 19: Services used by Gender



White respondents were more likely to indicate that they used a private doctors office and mental health services. African American respondents were more likely to indicate that they utilized fire department blood pressure checks, the African American Health Resource Centers, SNAP/EBT Benefits, and WIC Benefits.

Figure 20: Services by Race



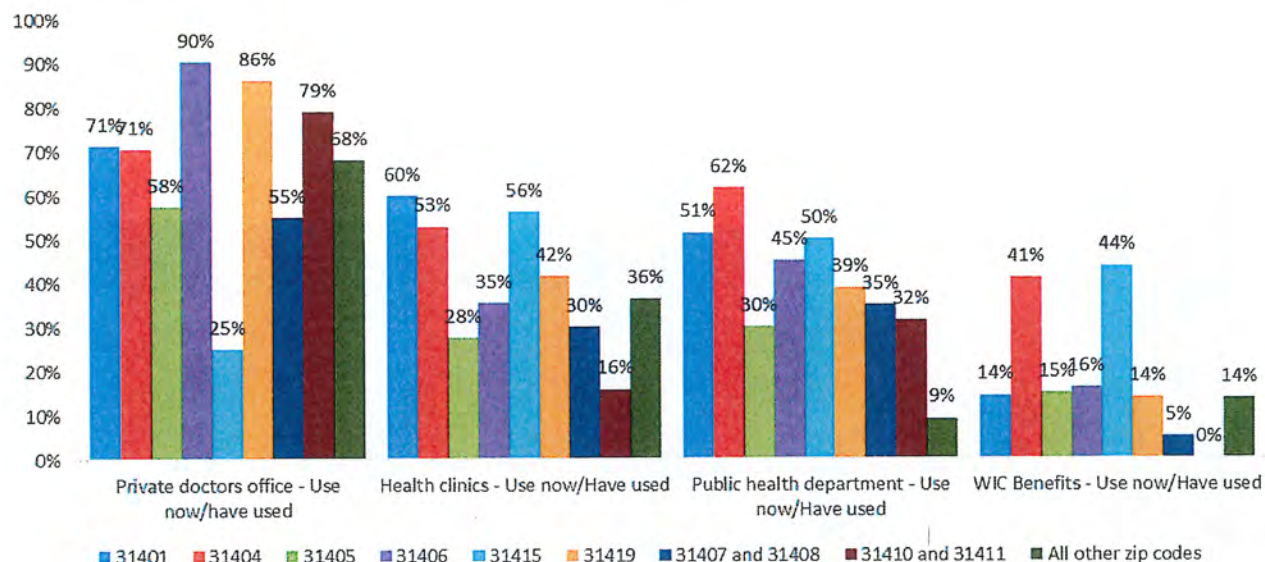
When examining resource use by income, higher income respondents were more likely to indicate use of private doctors office, mid-income level utilized health clinics more frequently, and those in the low-mid range were more likely to use the public health department and the ER. Higher income respondents were also more likely to utilize fitness areas while lower mid-income respondents were more likely to use SNAP/EBT and WIC.

Table 5: Services by Income

Service	\$0 - \$199	\$200 - \$499	\$500 - \$999	\$1,000 – \$1,999	\$2,000 – \$2,999	More than \$3,000
Private doctors office - Use now/have used	24%	44%	61%	75%	68%	84%
Health clinics - Use now/have used	29%	33%	67%	50%	38%	28%
Public health department - Use now/have used	12%	39%	70%	50%	32%	28%
ER - Use now/have used	24%	33%	70%	50%	54%	57%
Parks - Use now/have used	35%	39%	36%	48%	35%	60%
YMCA/recreational activities/Gyms - Use now/Have used	18%	33%	27%	36%	27%	45%
SNAP/EBT Benefits - Use now/have used	41%	22%	48%	33%	11%	5%
WIC Benefits - Use now/have used	24%	17%	36%	28%	14%	5%

Respondents in the 31415 zip code were the least likely to utilize a private doctors office and along with those in 31401 and 31404 were more likely to utilize health clinics. Respondents in 31404 were most likely to utilize the public health department. Respondents in the 31415 zip code were the most likely to indicate utilizing WIC benefits.

Figure 21: Services by zip code



Services they want to know more about (Q8b)

In general, respondents did not indicate a significant issue in many areas. About 20% of the respondents indicated that they wanted to use the YMCA/recreational activities/gyms in the community.

Figure 22: Services people want more information on

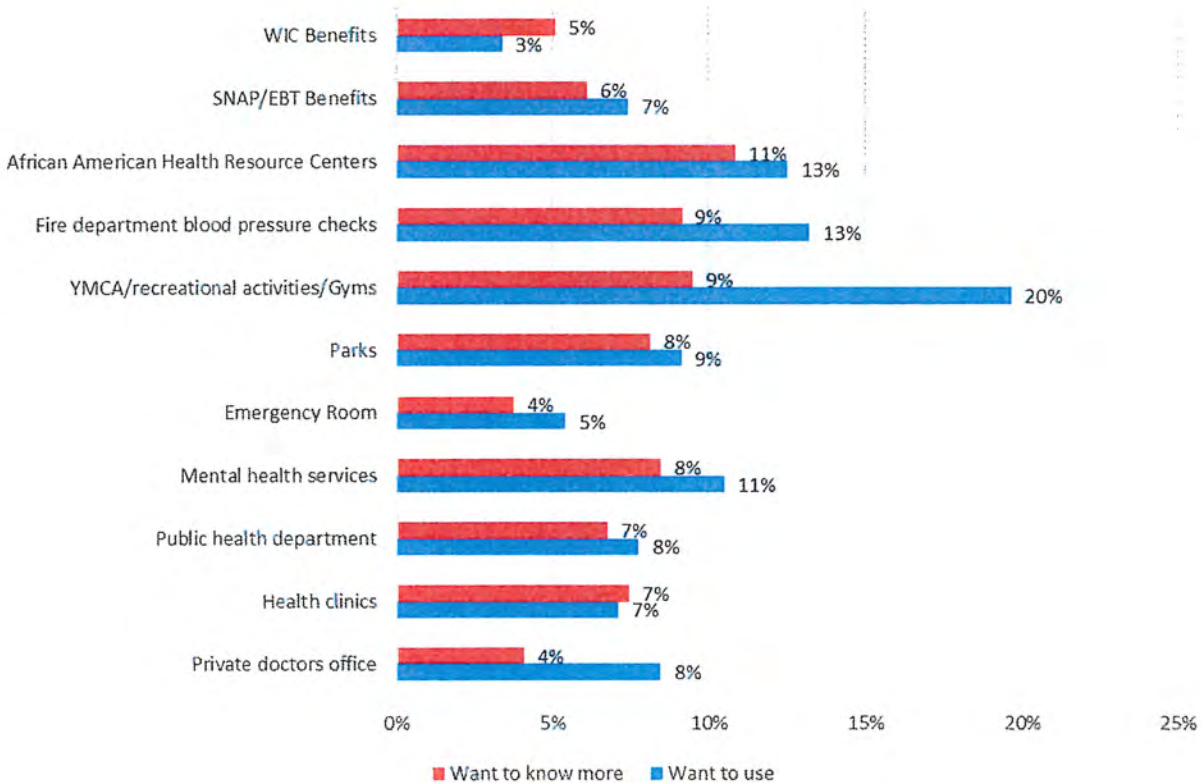
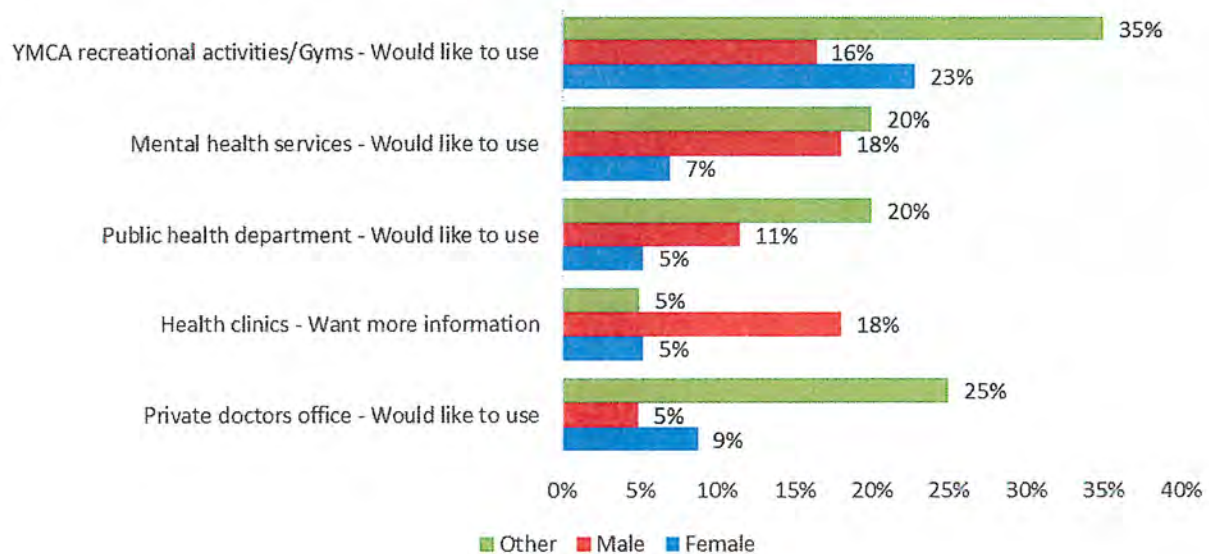


Table 6: Services use and interests

	Use now/have used	Want to use	Want to know more	Do not want	Does not apply
WIC Benefits	18%	3%	5%	7%	35%
SNAP/EBT Benefits	21%	7%	6%	8%	31%
African American Health Resource Centers	17%	13%	11%	5%	23%
Fire department blood pressure checks	17%	13%	9%	11%	19%
YMCA/recreational activities/Gyms	32%	20%	9%	6%	7%
Parks	44%	9%	8%	3%	6%
Emergency Room	49%	5%	4%	7%	7%
Mental Health Services	16%	11%	8%	4%	26%
Public Health Department	38%	8%	7%	8%	15%
Health Clinics	38%	7%	7%	7%	11%
Private doctors office	64%	8%	4%	1%	5%

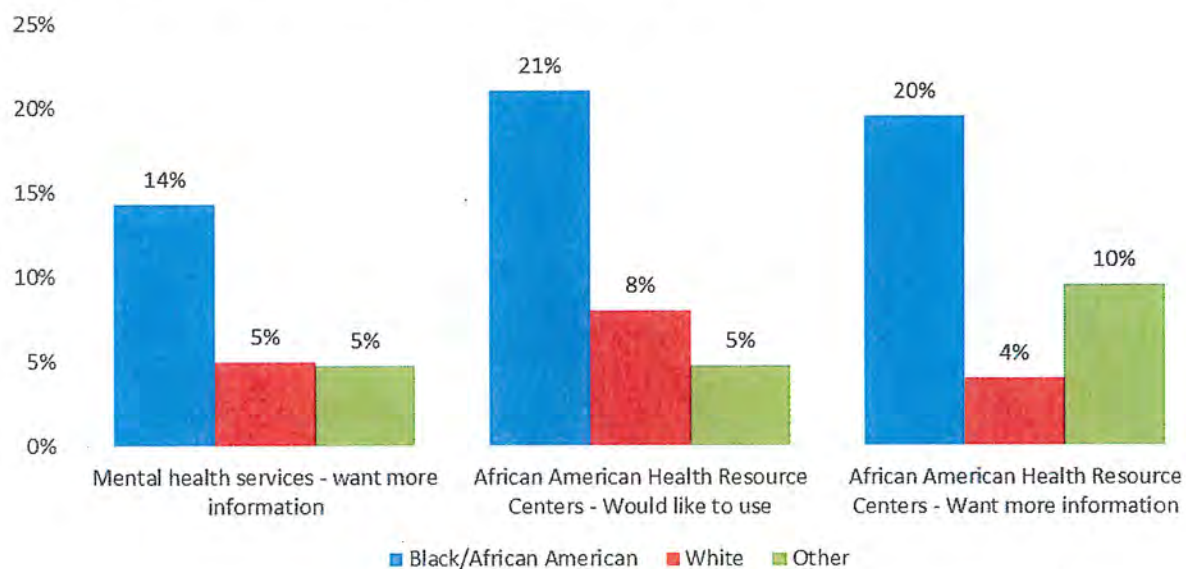
Women were more likely to indicate an interest in using the YMCA recreational activities or gyms. Men were more likely to indicate an interest in utilizing mental health services and health clinics.

Figure 23: Would like more information by gender



African American respondents were more likely to indicate an interest in using in the future mental health services and the African American Health Resource Centers.

Figure 24: Services they want more information about by race



Respondents who earned \$0-199 per week were more likely to want to use a private doctors office. A greater proportion of those who earned \$200-\$499 per week were interested in using health clinics and

mental health services. Those earning \$0 to 199 were more likely to want to use the African American Health Resource Centers.

Table 6: Service interests by income

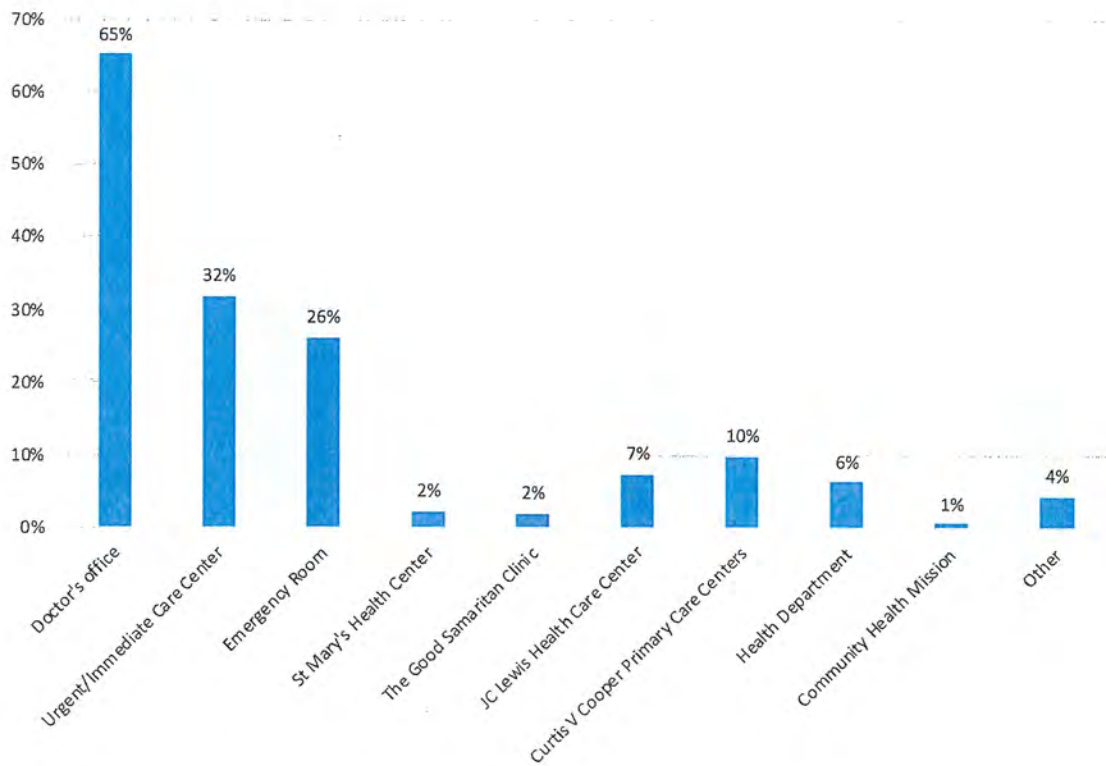
Would like to use	\$0 - \$199	\$200 - \$499	\$500 - \$999	\$1,000 - \$1,999	\$2,000 - \$2,999	More than \$3,000
Private doctors office	24%	22%	12%	11%	5%	4%
Health clinics	12%	22%	6%	9%	16%	1%
Mental health services	6%	22%	18%	20%	11%	2%
YMCA/recreational activities/Gyms	29%	28%	39%	23%	24%	11%
African American Health Resource Centers	35%	11%	12%	19%	16%	9%

There were no differences by zip code on what respondents would like to utilize.

Where do you see a doctor (Q9)

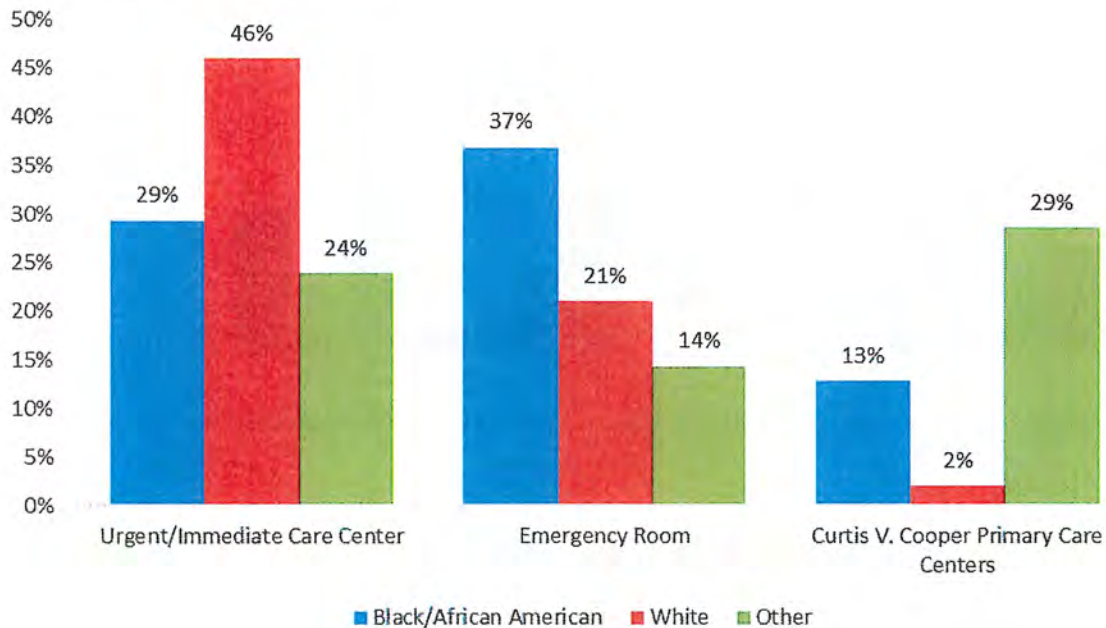
The majority of the respondents (65%) indicated that they see a doctor in the doctor's office, although almost a third (32%) indicated that they went to see the doctor at the urgent care center.

Figure 25: Where people see a doctor



White respondents were slightly more likely to indicate utilizing urgent/immediate care centers, while African American respondents were more likely to indicate utilizing the Emergency Room and others were more likely to see a doctor at the Curtis V Cooper Primary Care Center.

Figure 26: Doctor location by race



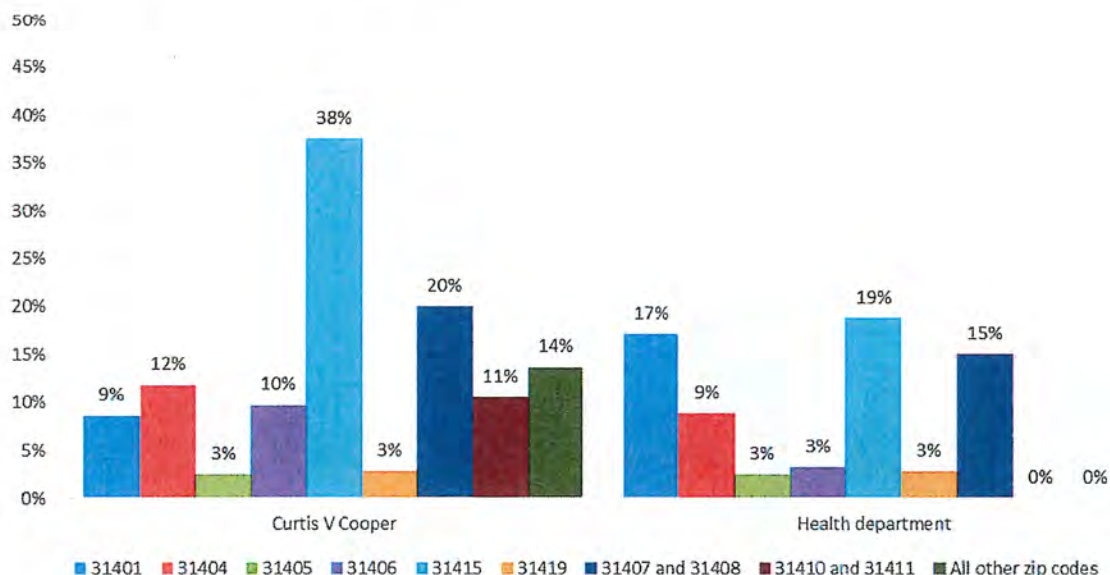
Those who earned more than \$3,000 per week were more likely to indicate they saw a doctor at the doctor's office. Those who earned \$500 to \$999 per week were more likely to utilize the emergency room. Those in the lowest income \$0-199 per week, were more likely to utilize JC Lewis and Curtis V Cooper.

Table 7: Location by Income Level

	\$0 - \$199	\$200 - \$499	\$500 - \$999	\$1,000 - \$1,999	\$2,000 - \$2,999	More than \$3,000
Doctor's office	24%	50%	48%	66%	76%	91%
Emergency Room	12%	39%	48%	33%	27%	17%
JC Lewis Health Care Center	29%	11%	12%	6%	5%	2%
Curtis V Cooper Primary Care Centers	24%	6%	21%	13%	8%	4%
Health Department	12%	17%	18%	8%	3%	0%

The **only** zip code that indicated utilizing the Community Health Mission was 31415. This zip code also was the most common selecting Curtis V Cooper and the Health Department.

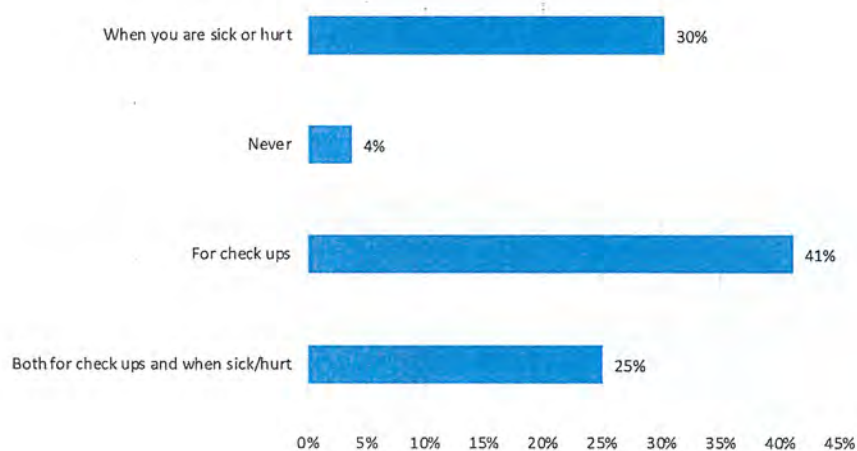
Figure 27: Doctor location by zip code



When do you see a doctor (Q10)

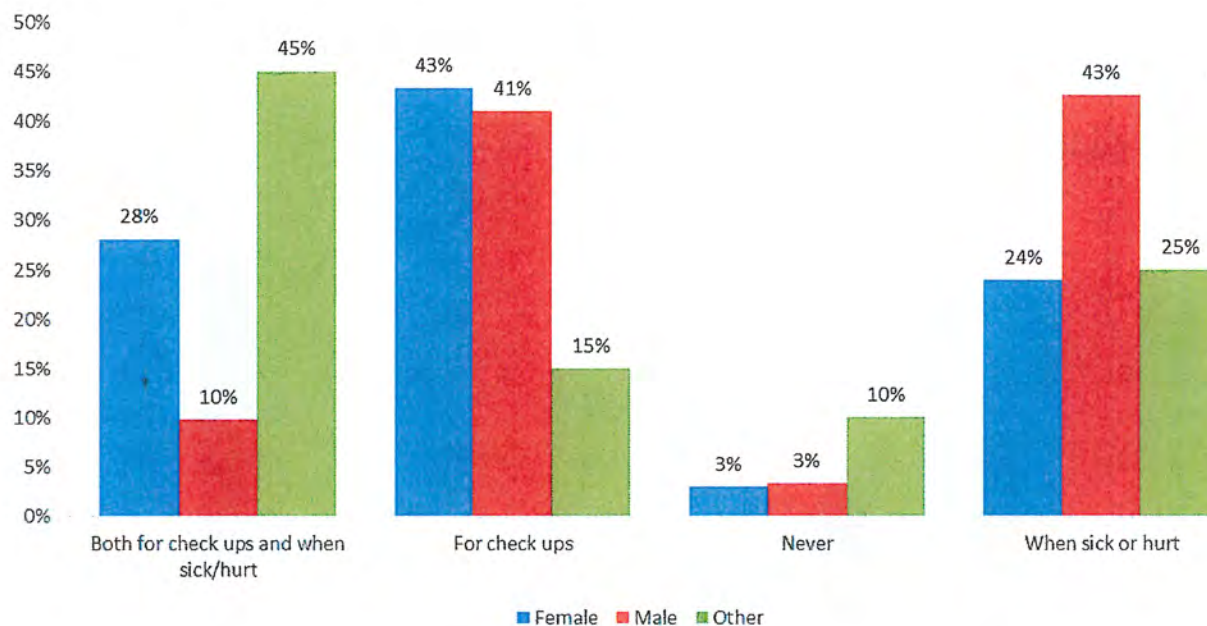
The most common response (41%) about when respondents saw a doctor was for check-ups. Only 4% indicated that they never saw a doctor.

Figure 28: When people see a doctor



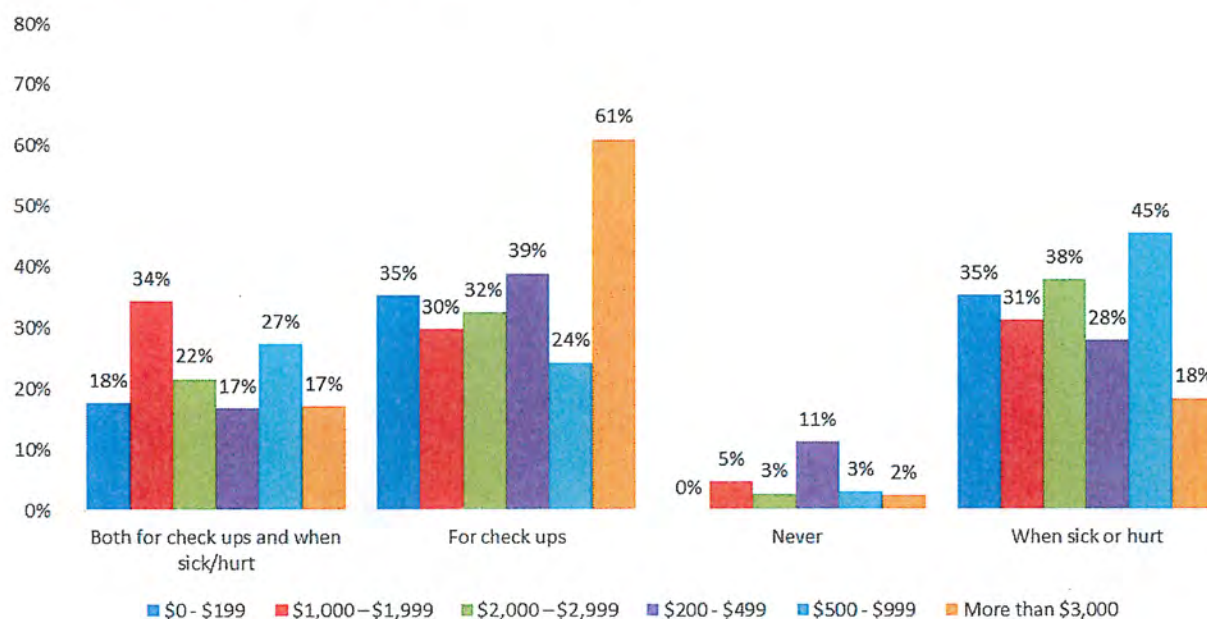
Men were more likely to indicate that they saw a doctor when they were sick or hurt. Other (transgender and prefer not to answer) were more likely to indicate they go both for check-ups and when sick or hurt and they were the least likely to indicate that they go for check ups.

Figure 29: When do you go to the doctor by gender



Respondents who earned more than \$3,000 per week were the most likely to indicate that they go for check-ups and least likely to go when sick or for both.

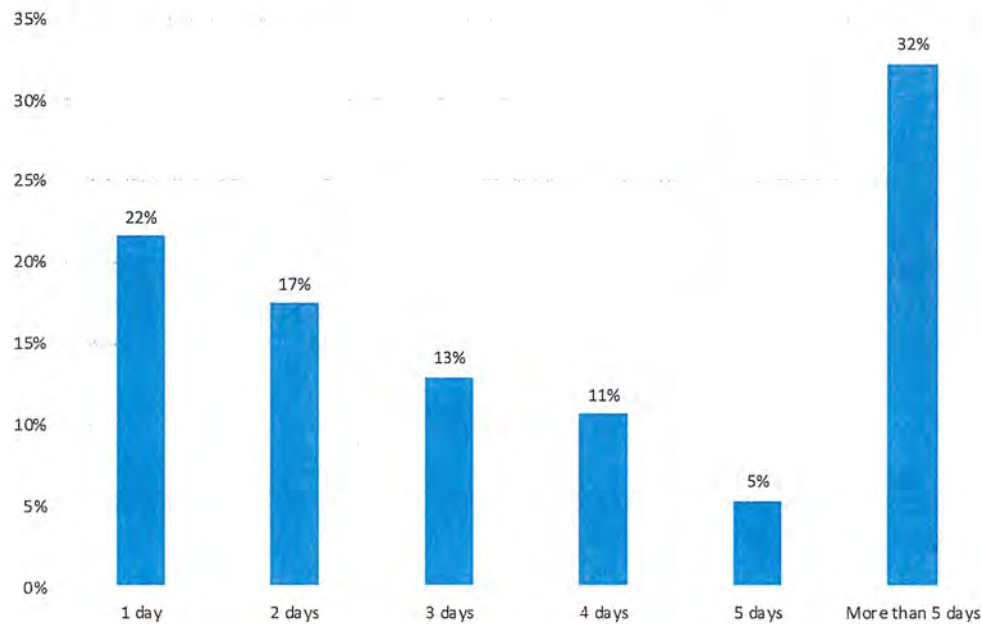
Figure 30: When do you go to the doctor by income



How long does it take for you to get an appointment (Q11)

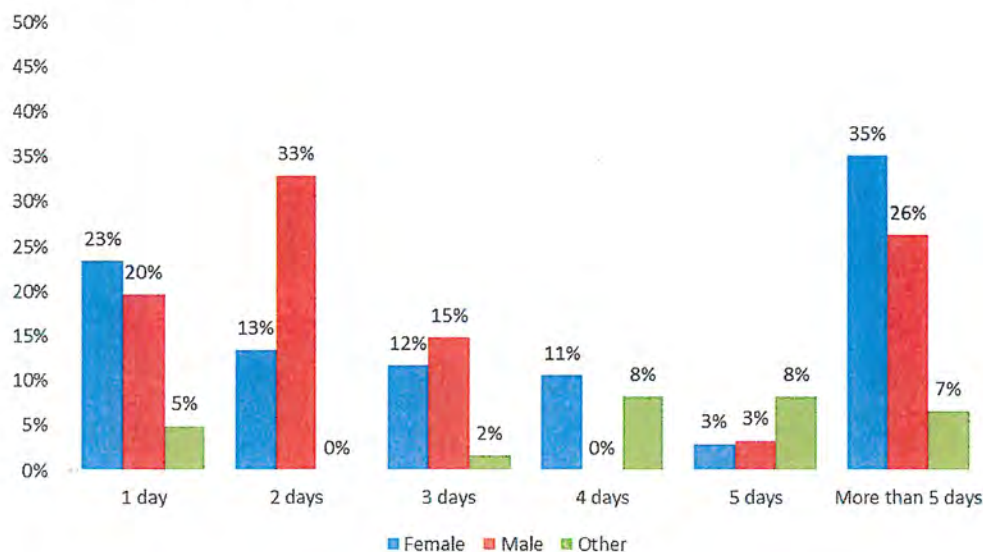
Almost a third (32%) of the respondents indicated that they waited more than 5 days to get an appointment. There were almost a quarter (22%) who indicated they were able to get an appointment in a day.

Figure 31: Time to get an appointment



Women were most likely to indicate that they waited more than 5 days for an appointment, while men were more likely to indicate they waited 2 days for an appointment.

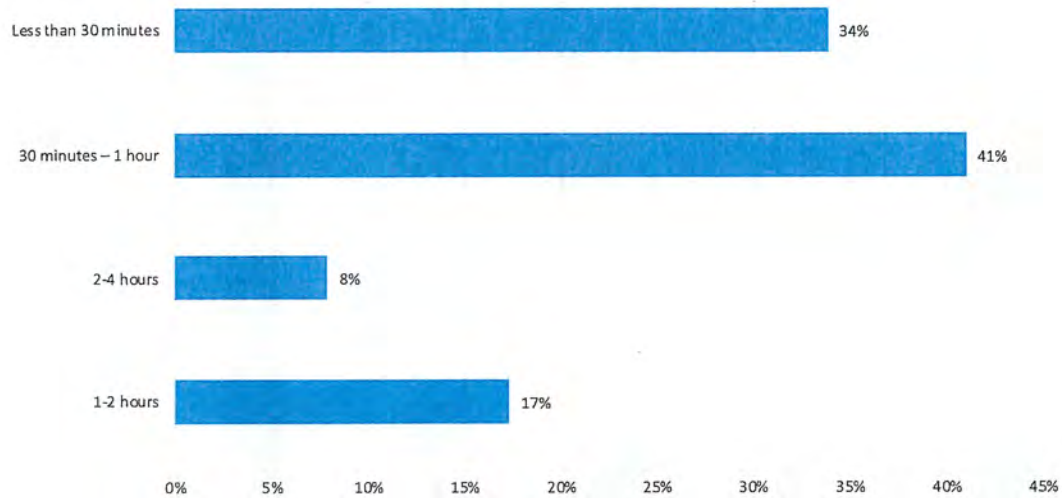
Figure 32: Wait time by gender



How long do you normally wait to see a doctor (Q12)

The most common response about how long people wait to see a doctor was 30 minutes to an hour (41%). About a quarter (25%) indicated waiting more than an hour.

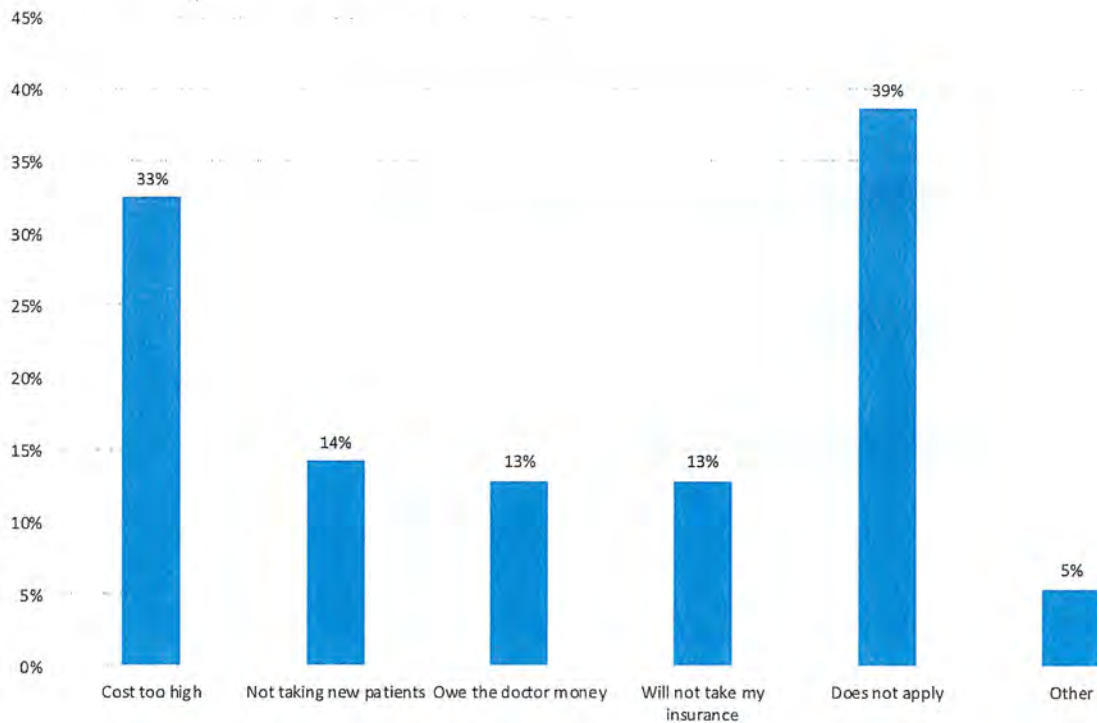
Figure 33: Wait time to see a doctor



If you are unable to see a doctor, why (Q13)

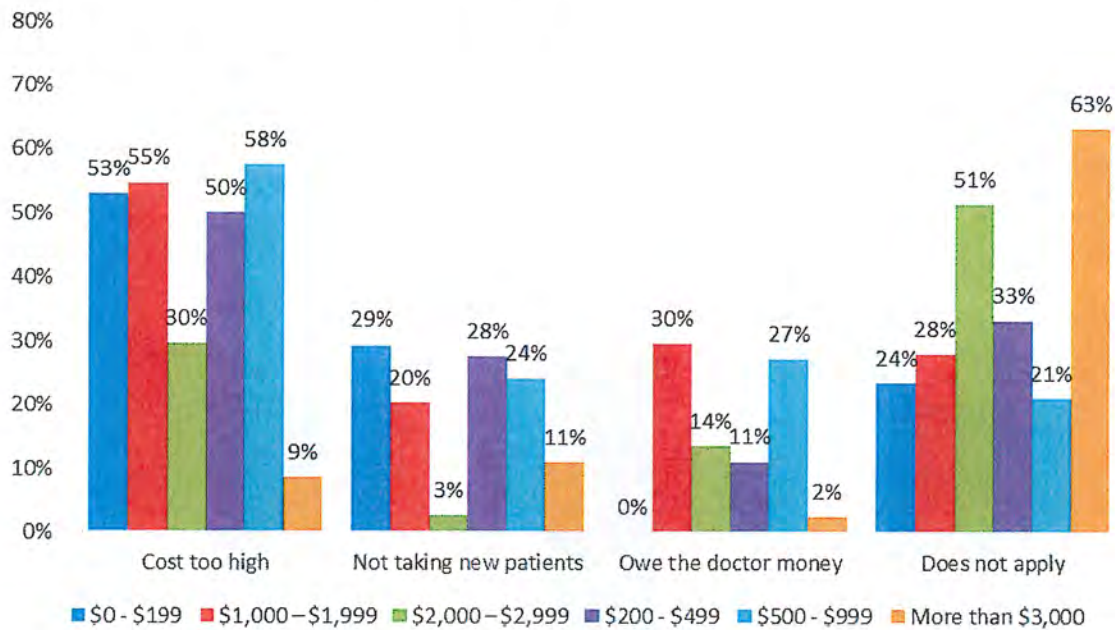
While over a third of the respondents that this did apply to them, 33% also indicated that the cost too high was the reason why they cannot see a doctor.

Figure 34: Reason you can't see a doctor



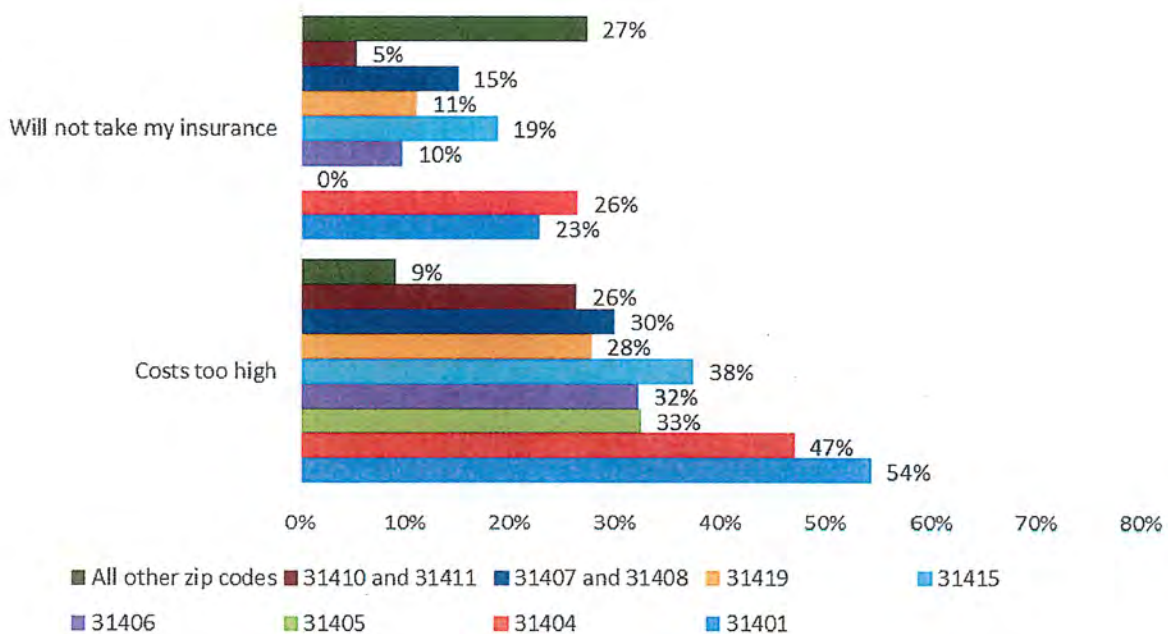
Respondents with higher weekly incomes were less likely to indicate that cost was a barrier or that not taking new patients was a barrier. Mid-income respondents were more likely to indicate that owing the doctor money was an issue. Higher income respondents were also more likely to indicate that this issue did not apply.

Figure 35: Reasons to not see doctor by income



Respondents in the 31401 zip code were the most likely to indicate that the costs were too high and the other zip codes were less likely to indicate that costs were too high. The respondents were the least likely indicate that not taking the insurance was a barrier, other zip codes were most likely to indicate this was an issue.

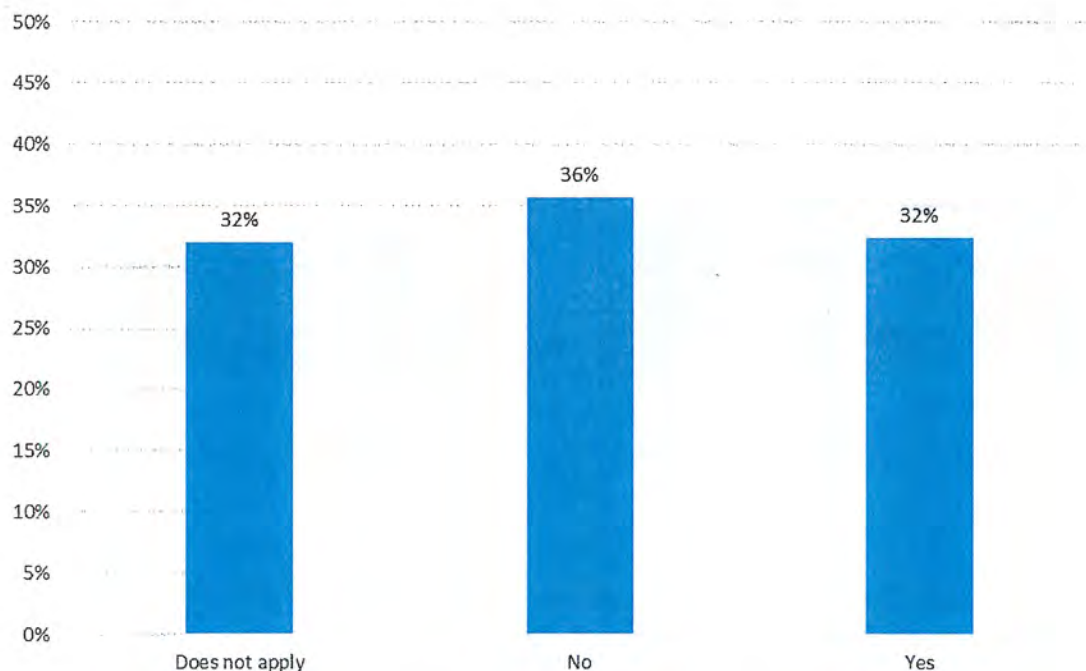
Figure 36: Barriers to doctor by zip code



Have you ever had trouble getting an appointment because you could not pay (Q14)

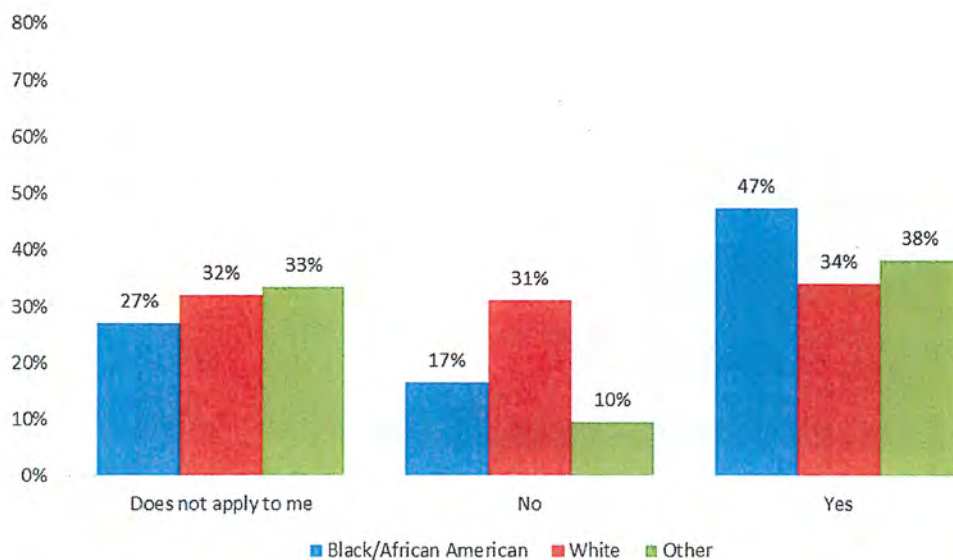
The respondents were evenly split among those who said that not being able to get an appointment was a problem, those who said it didn't apply, and those who said it was an issue.

Figure 37: Trouble getting an appointment because you could not pay.



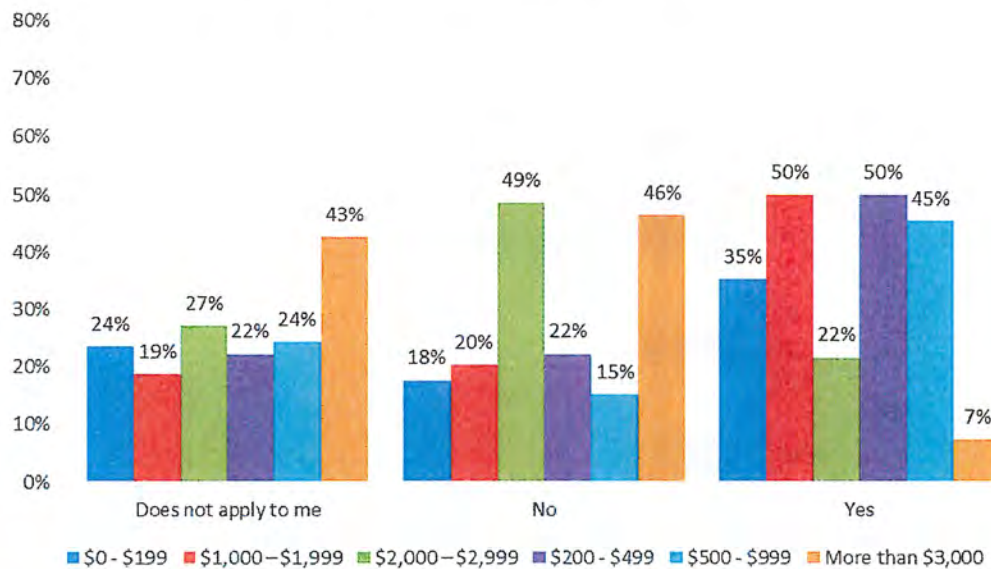
White respondents were more likely than other respondents to indicate that it was not an issue, while African American respondents were more likely to indicate it was an issue.

Figure 38: Trouble getting an appointment by race



Higher income respondents were more likely to indicate that the question did not apply to them or that it was not an issue.

Figure 39: Trouble getting an appointment by income



Respondents who lived in the 31406 and 31415 zip codes were less likely to indicate it did not apply to them. Those in 31415 were the least likely to say it was an issue and the most likely to indicate it was a challenge.

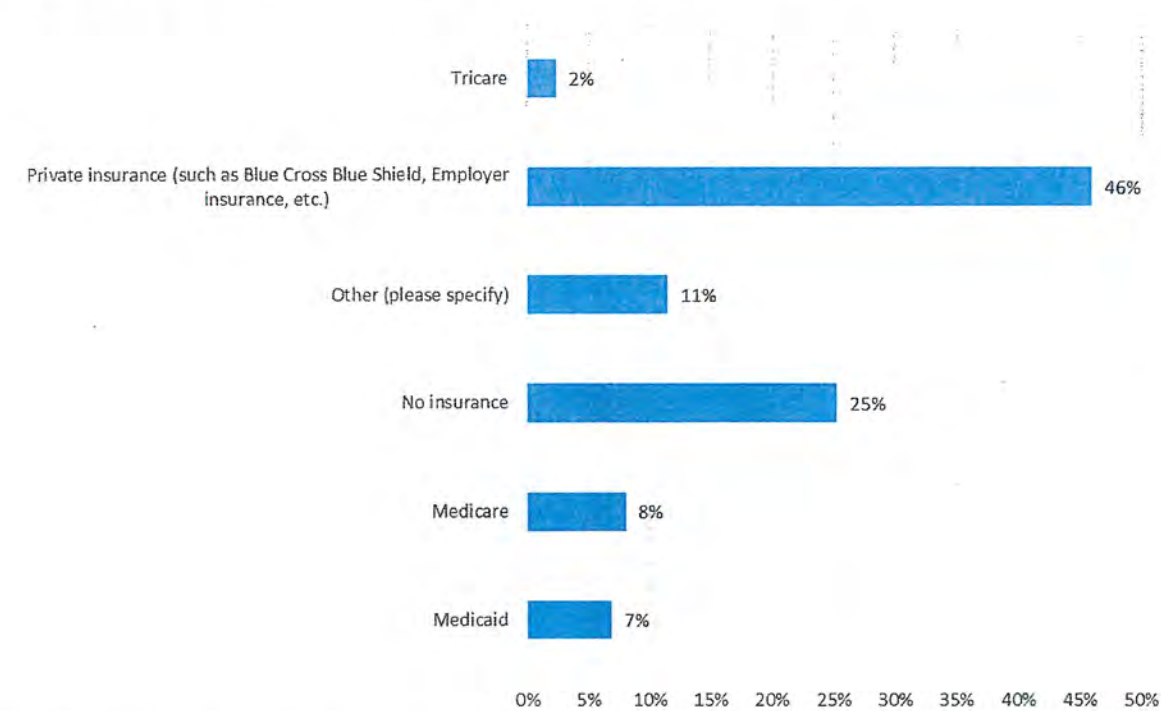
Table 8: Trouble getting an appointment by zip code

	31401	31404	31405	31406	31415	31419	31407 and 31408	31410 and 31411	All other zip codes
Does not apply to me	20%	35%	35%	19%	19%	28%	25%	47%	41%
No	26%	12%	13%	32%	0%	17%	25%	37%	36%
Yes	51%	44%	40%	39%	75%	47%	35%	16%	23%

Do you have insurance? (Q15)

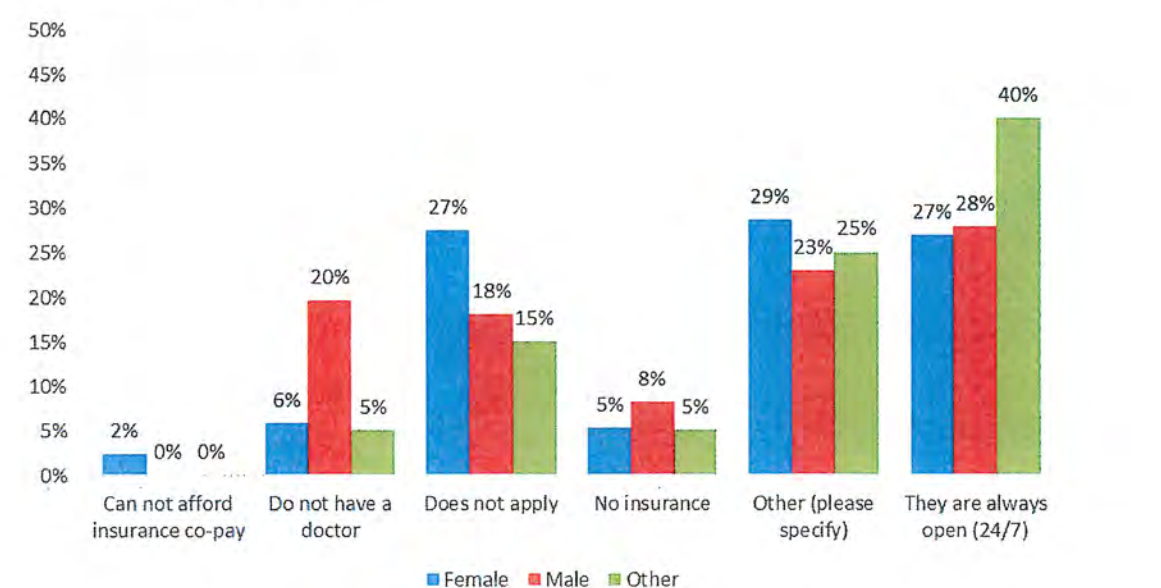
Almost half (46%) of the respondents indicated that they had insurance through private insurance. A quarter (25%) indicated they did not have any insurance.

Figure 40: Health insurance among the Chatham County Community



Men were more likely than other respondents to indicate that they did not have insurance. Women were more likely to indicate that they had private insurance and less likely to indicate they had no insurance.

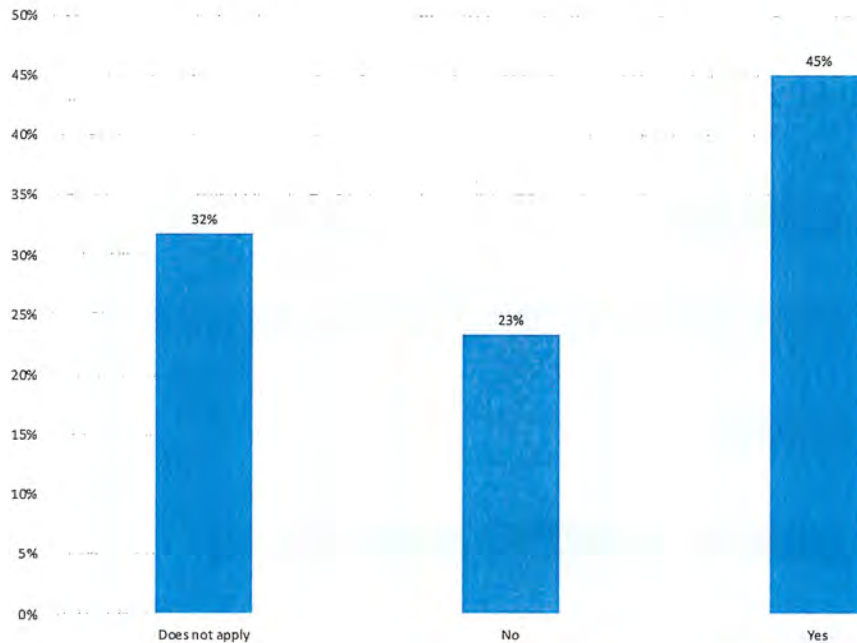
Figure 41: Insurance by gender



Do you need a doctor who charges you based on the amount you can pay, or a sliding scale (Q16)

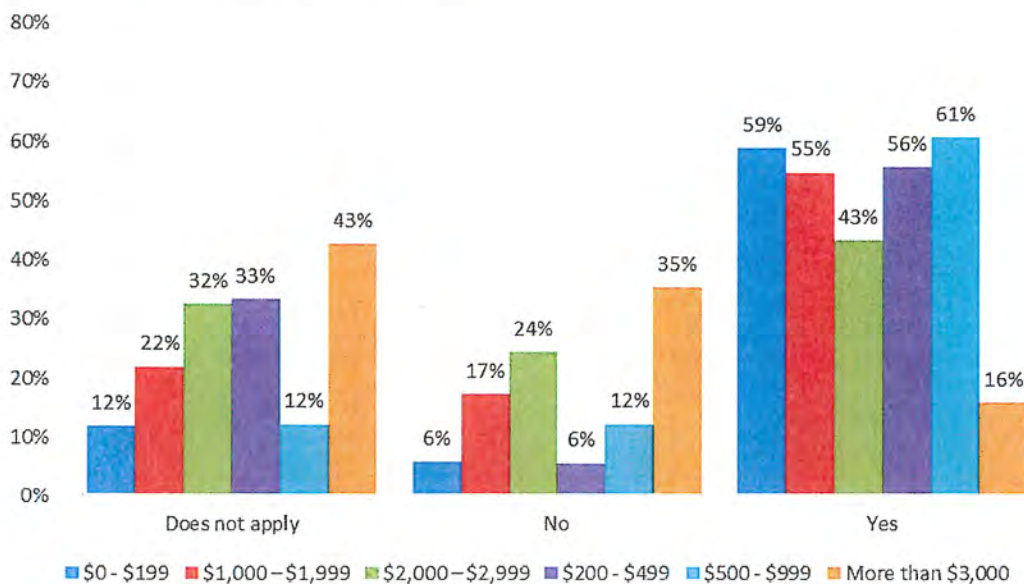
Almost half (45%) of the respondents indicated that the community needs a doctor that has a sliding scale payment method.

Figure 42: The community need for a doctor that has a sliding scale payment method



This with higher incomes were more likely to indicate that this was not an issue or that the community did not need a sliding scale doctor. Those in a mid-range income level were the most likely to indicate that this was a need in the community.

Figure 43: Need for a sliding scale by income



If you go to the emergency room, why do you go there (Q17)

Among those who go to the emergency room, the most common reason was that they were always open (30%). The only differences among groups were seen in comparisons among gender. Women were more likely to indicate that it did not apply; men were more likely to indicate they did not have a doctor, and other respondents were more likely to indicate that the ER was always open.

Figure 44: Reasons why the community goes to the emergency room

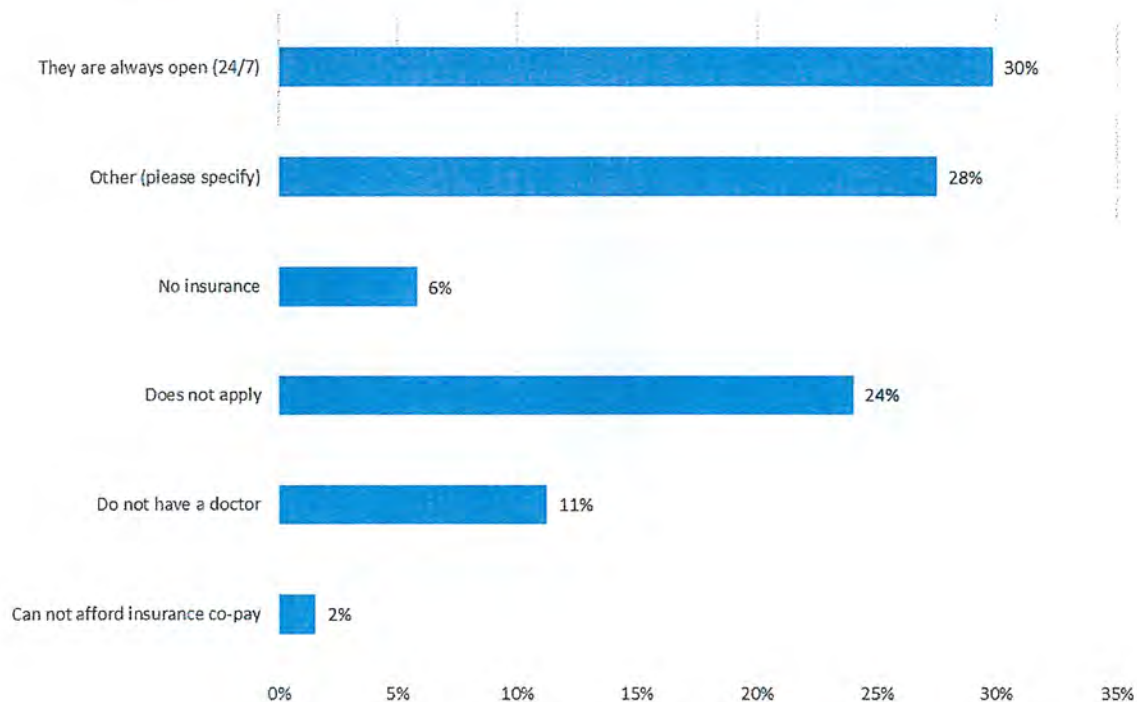
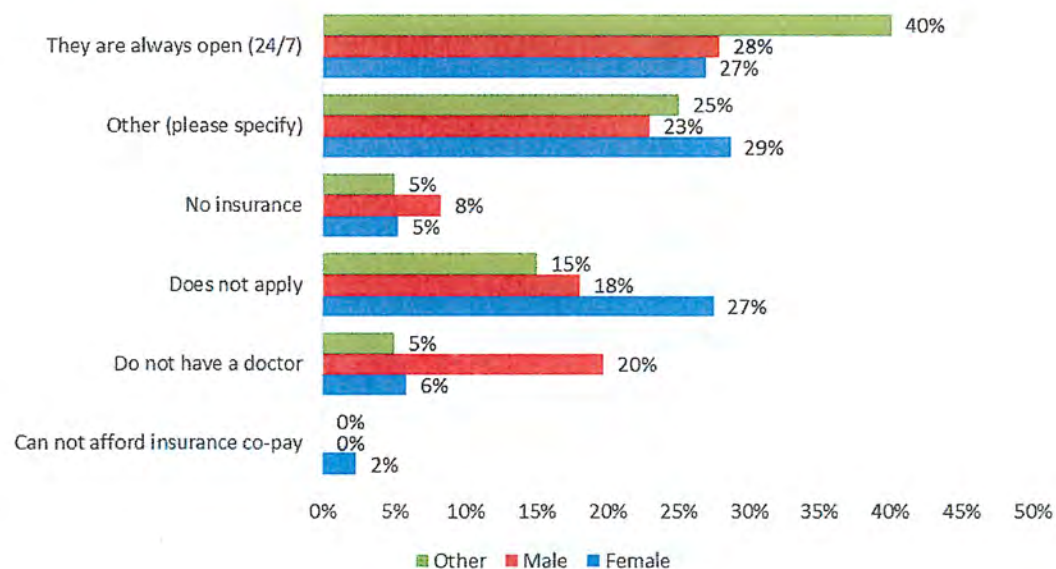


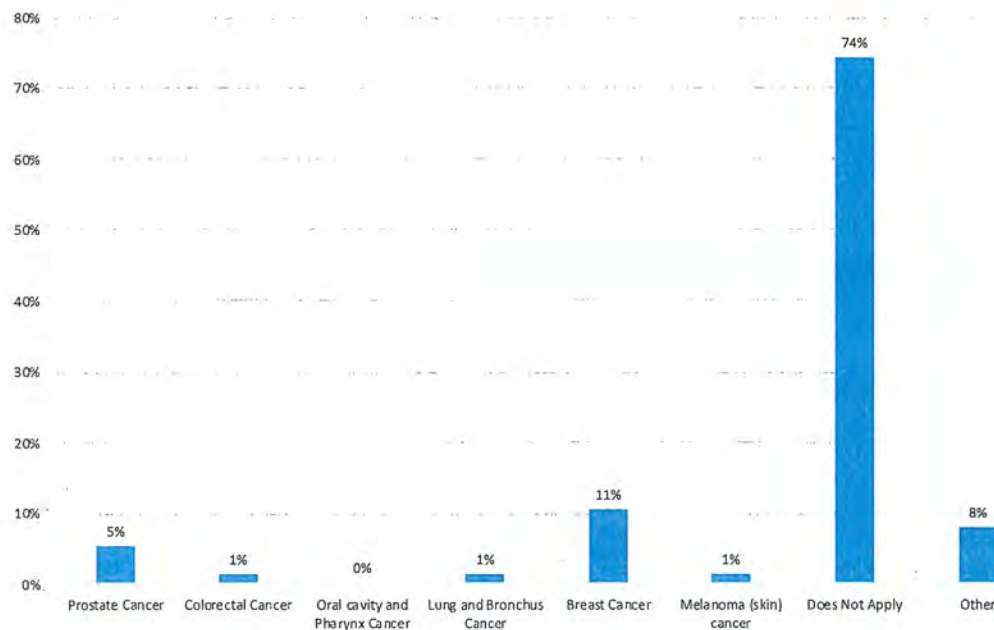
Figure 45: Reasons to go to the ER by gender



If you have cancer, what type of cancer do you have (Q18)

Most respondents (74%) indicated that they did not have any cancer. There were no differences in the responses by any comparison groups.

Figure 46: Cancer Frequency



What things do you think would make your quality of life better and improve your health (Q19)

The most common response (45%) was understanding health and health management and almost a third (32%) indicated that they needed to understand what government programs they qualify for.

Figure 47: Things that would make your quality of life better and improve your health

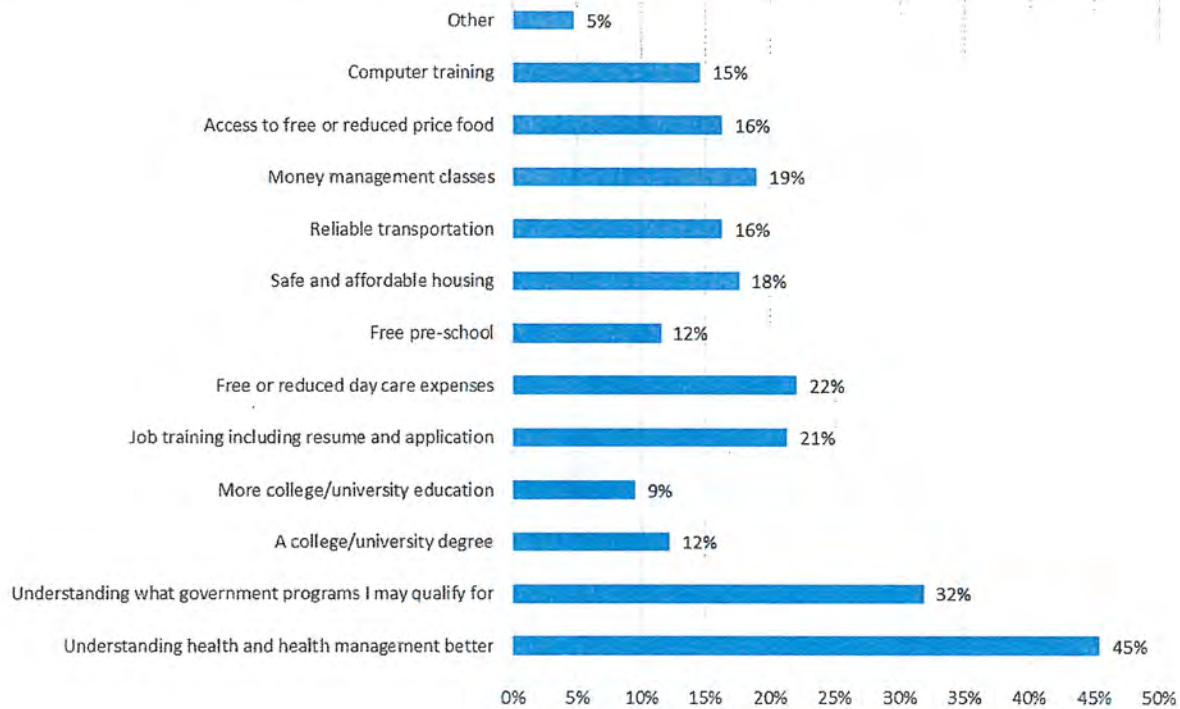
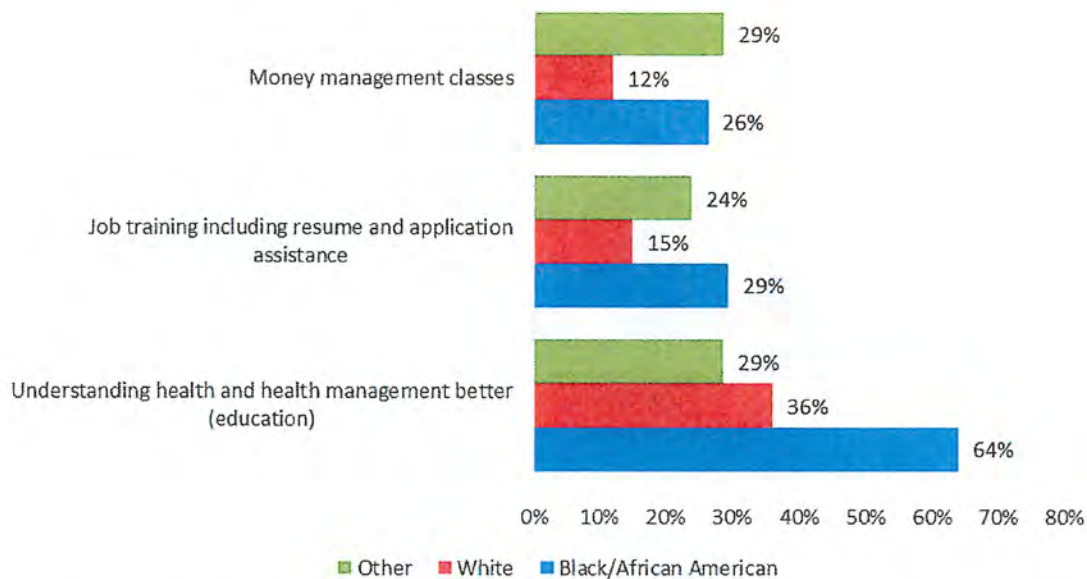


Table 9: Things to improve health and quality of life

	%
Other	4%
Computer training	15%
Access to free or reduced-price food	16%
Money management classes	19%
Reliable transportation	16%
Safe and affordable housing	18%
Free pre-school	12%
Free or reduced day care expenses	22%
Job training including resume and application	21%
More college/university education	9%
A college/university degree	12%
Understanding what government programs I may qualify for	32%
Understanding health and health management better	45%

Men were more likely to indicate that understanding health and health management was important (67% to 45% of women). African American respondents were more likely than others to indicate that understanding health and health management was important and that job training was needed.

Figure 48: Make quality of life better by race



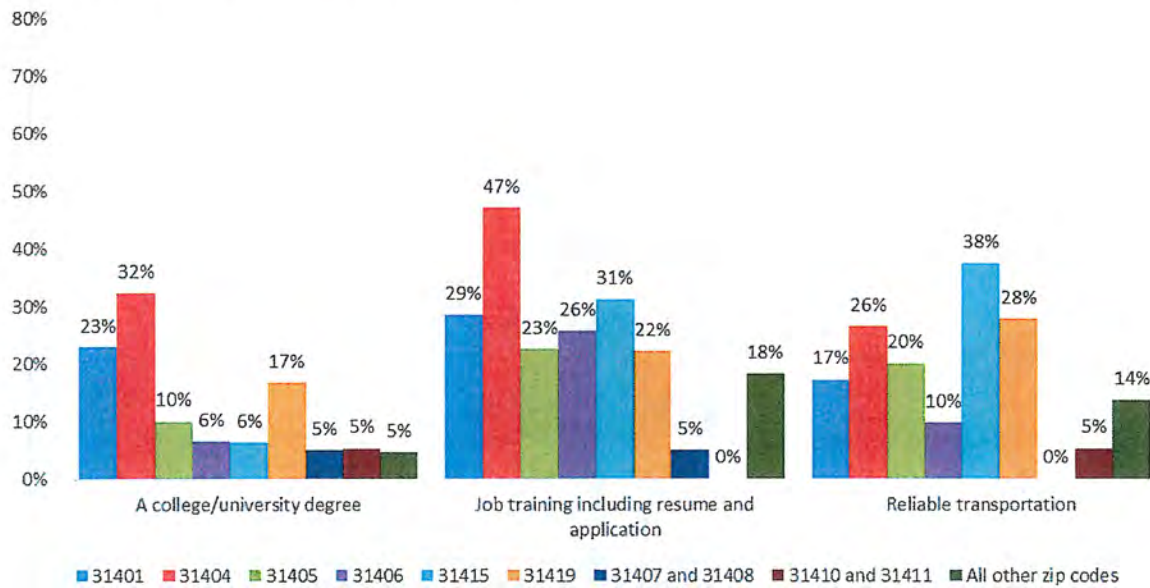
Higher income respondents were more likely to indicate that understanding health and health education would improve quality of life. Mid-income respondents were more likely to indicate that understanding government programs or a college degree would help improve quality of life. Lower income respondents were more likely to indicate that job training was important.

Table 11: Improve quality of life better by income

	\$0 - \$199	\$200 - \$499	\$500 - \$999	\$1,000 - \$1,999	\$2,000 - \$2,999	More than \$3,000
Understanding health and health management better (education)	47%	50%	61%	63%	51%	37%
Understanding what government programs I may qualify for	35%	39%	61%	48%	35%	12%
A college/university degree	12%	6%	21%	23%	5%	7%
Job training including resume and application assistance	35%	44%	27%	34%	11%	10%
Free or reduced day care expense	24%	28%	36%	31%	22%	13%
Safe and affordable housing	29%	28%	33%	16%	27%	10%
Access to free or reduced price food	35%	44%	24%	14%	16%	9%

Residents who live in 31404 were more likely to indicate a college degree or job training would improve quality of life. Those in 31415 were more likely to indicate that reliable transportation would be helpful.

Figure 49: Improve quality of life better by zip code



Demographics

Zip Code

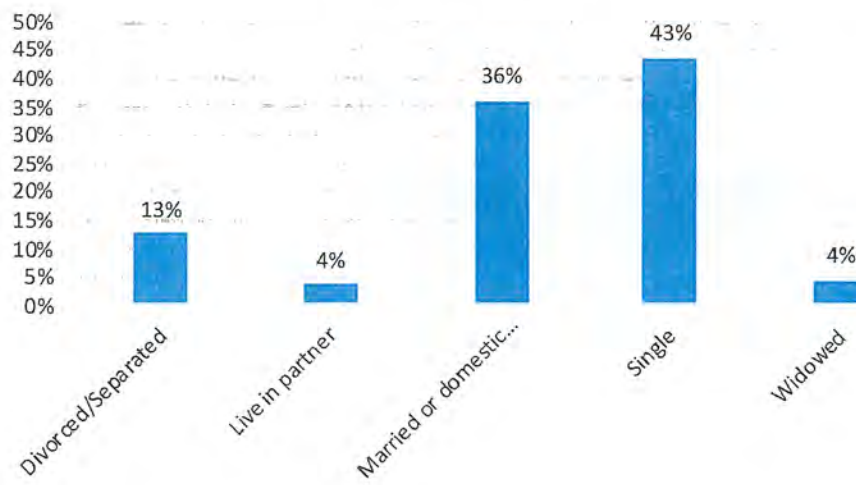
Most of the respondents for this survey indicated that they lived in the 31405, 31419, 31406, 31404, and 31401 zip codes. There were very few respondents indicating that they lived in the 3113, 31306, 31313, 31319, 31328, 31420, and 314401 zip codes.

Zip Code	Frequency	%
3113	1	0%
29909	2	1%
31302	2	1%
31306	1	0%
31312	3	1%
31313	1	0%
31319	1	0%
31322	9	4%
31328	1	0%
31401	34	13%
31404	34	13%
31405	40	16%
31406	31	12%
31407	10	4%
31408	10	4%
31410	13	5%
31411	6	2%
31415	16	6%
31419	36	14%
31420	1	0%
314401	1	0%

Marital Status

Almost half of the respondents of this survey indicated that they were single. 8% of respondents indicated that they had a live-in partner or were widowed. 13% of respondents reported being divorced or separated.

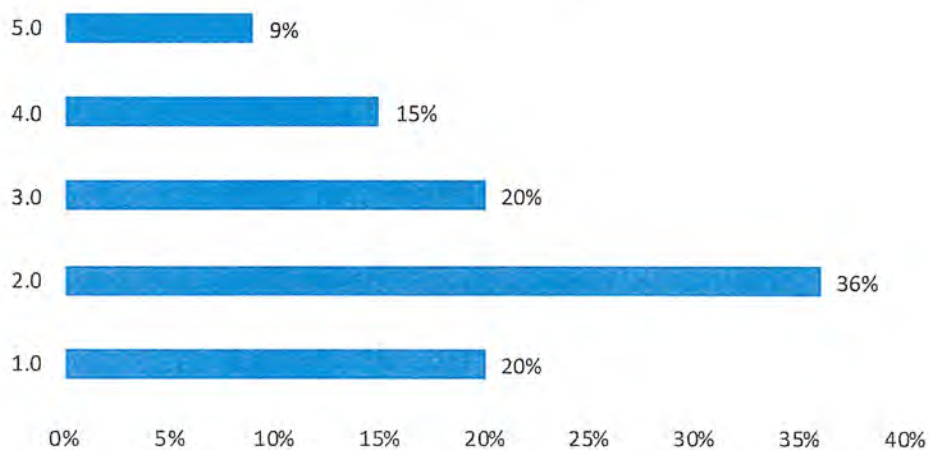
Marital Status



People in House

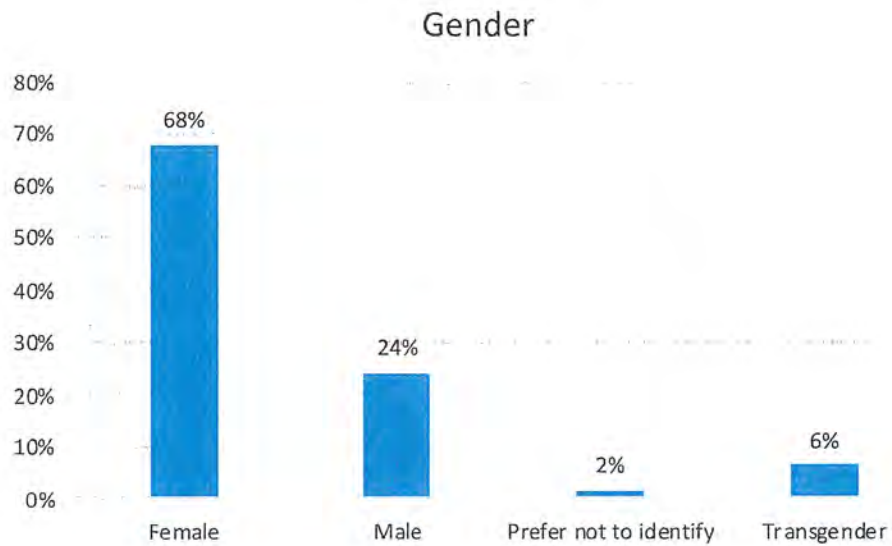
Of the people who participated in this survey, 36% indicated that there were 2 people living in the household. Only 9% of respondents reported that there were 5 or more people in the household. 20% of respondents reported that they live in a 1-person household.

People in House



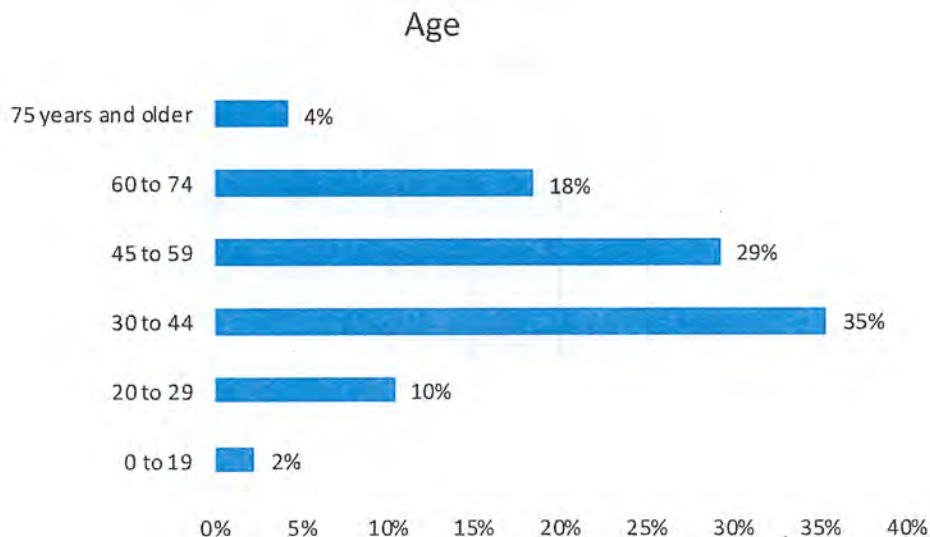
Gender

Of the people who took this survey, over half indicated that they identified as female. Respondents who identified as male account for 24% of the total respondents. 8% of respondents reported they are transgender or would prefer not to identify.



Age

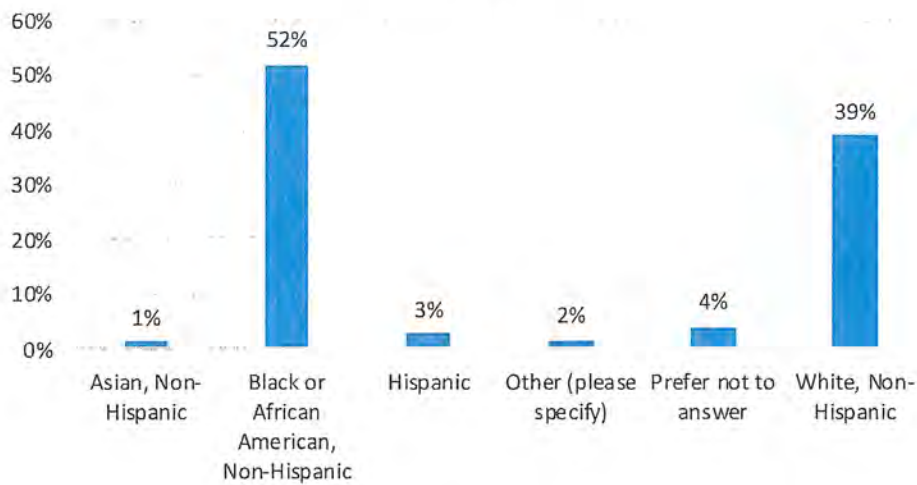
64% of respondents reported that they were between the age of 35 to 59. 6% of respondents reported that they were either age 0 to 19 or age 75 and older. 18% of respondents claimed they were between the ages 60 to 74.



Race

Half of the respondents of this survey reported that they identified themselves as Black or African American, Non-Hispanic. 39% of respondents reported that they identified themselves as White, Non-Hispanic. 6% of respondents identified themselves as Asian, Non-Hispanic, Hispanic, or other.

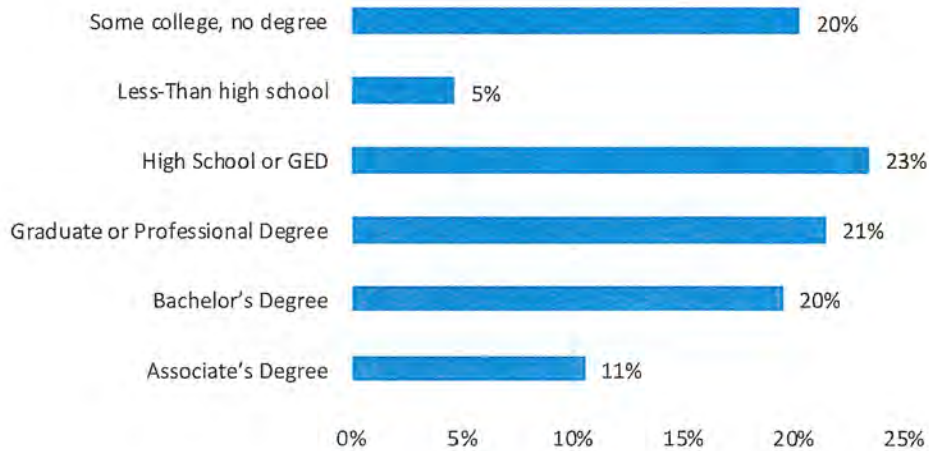
Race



Education

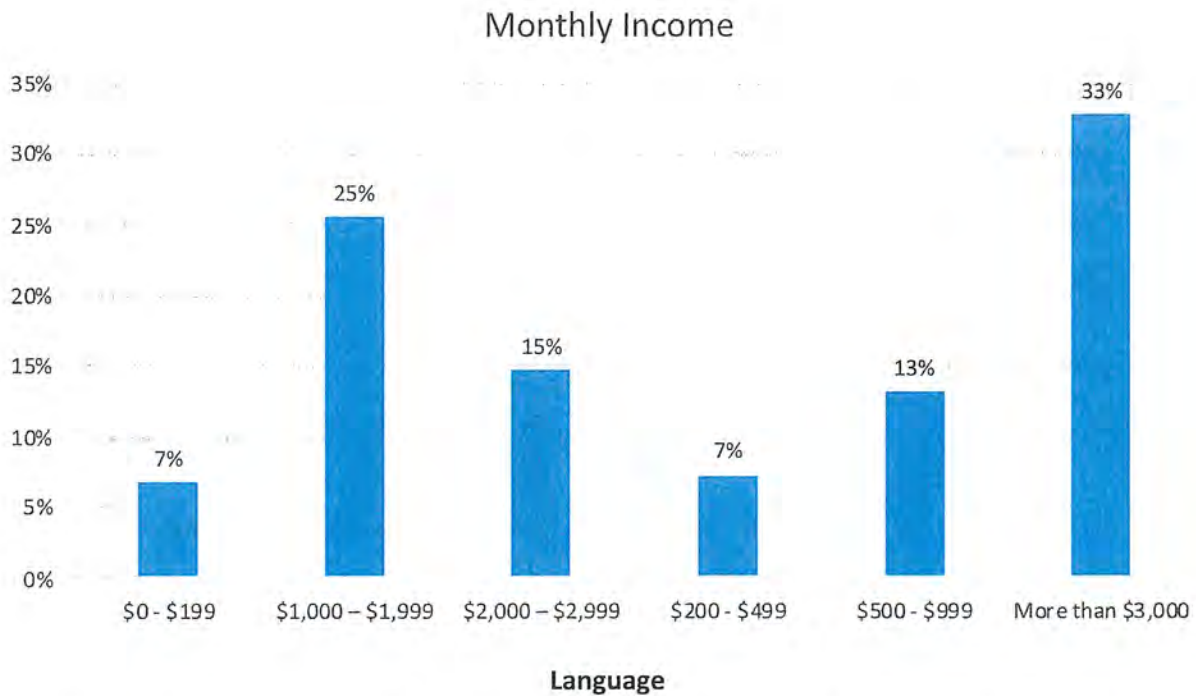
Of the respondents who participated in this survey, 5% indicated that their education level was less than high school. 52% of respondents reported that they head either an Associate's Degree, Bachelor's Degree, or a Graduate or Professional Degree.

Education

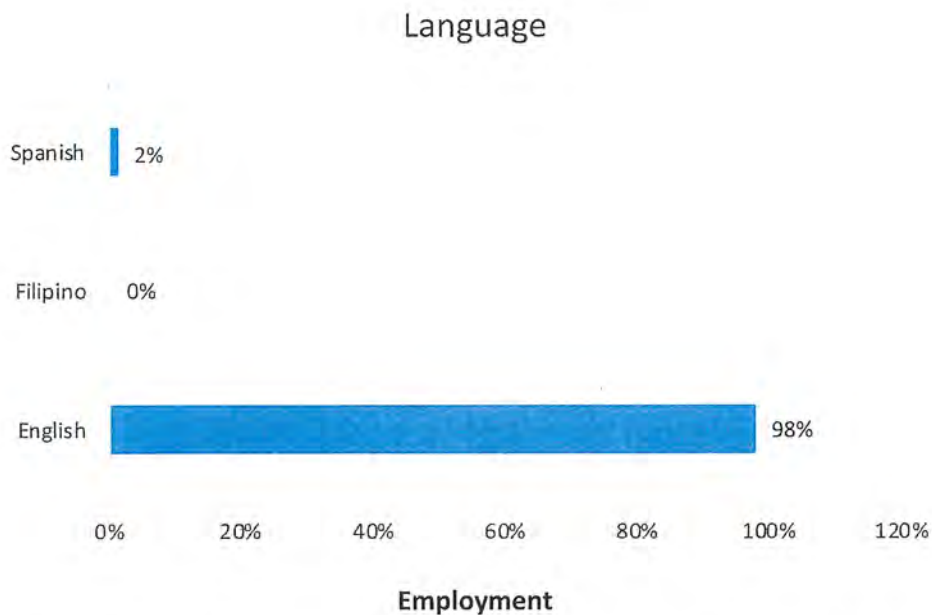


Monthly Income

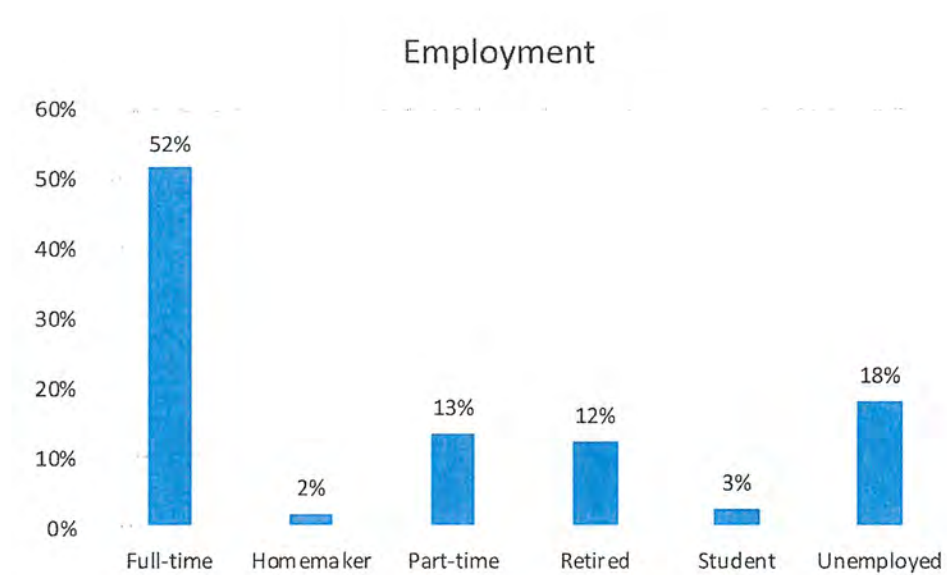
Of the respondents who participated in this survey, 27% reported that they have a monthly income of less than \$1,000 per month after taxes, insurance, and social security is taken out. 33% of respondents reported having a monthly income of \$3,000 or more after taxes, insurance, and social security is taken out.



The majority of respondents (98%) in this survey reported that English is the primary language spoken in their household. 2% of respondents claimed that Spanish or Filipino is the primary language spoken in their household.



Of the respondents who participated in this survey, over half of them reported their employment status as full time. 5% of respondents reported either being a student or a homemaker. 18% of respondents reported that they are unemployed.



Appendix 6

SJ/C Emergency Department Medical Home Survey Results

KPI #4 – Social Determinants of Health – Top 5 Zip Codes with Significant Health and Social Needs

SJ/C Emergency Departments Un/under insured patients, May 2018 – May 2019

Needs - Medical Domain						
Assessment	31401	31405	31409	31415	31419	Total
Needs - Medication(s)	226	452	3	238	381	1300
Needs - Education, Health	273	574	2	334	481	1664
Needs - Dependency, substance(s)	1	3	0	1	5	10
Needs - Disease(s), chronic	25	74	0	63	75	237
Needs - Medical Home (Primary Care)	270	531	4	302	498	1605
Needs - Medical attention, timely access	80	158	0	102	163	503
Needs - Mental Health, care of	17	22	0	9	19	67
Needs - Specialist(s)	32	57	0	21	61	171
Needs - Medical need, other	52	111	0	64	89	316
Total	976	1982	9	1134	1772	5873
Needs - Family/Environmental Domain						
Assessment	31401	31405	31409	31415	31419	Total
Needs - Budgeting Tips	0	0	0	0	0	0
Needs - Child Care	33	46	0	32	48	159
Needs - Clothing	7	12	0	4	8	31
Needs - Education, Health	162	348	4	193	250	957
Needs - Eligibility	12	30	0	11	36	89
Needs - Employment	48	95	0	61	92	296
Needs - Family Assistance	40	67	0	52	90	249
Needs - Financial Assistance	145	316	5	174	224	864
Needs - Health Insurance	35	67	0	29	76	207
Needs - Job Training	12	9	0	15	14	50
Needs - Food/Healthy Eating	24	24	0	21	17	86
Needs - Shelter/Housing	13	14	0	6	5	38
Needs - Legal	2	1	0	1	2	6
Needs - Phone Minutes	0	1	0	1	1	3
Needs - Relocation	1	0	0	0	4	5
Needs - Safe Home	0	5	0	1	0	6
Needs - SNAP, SSI, SSD	16	23	0	16	16	71
Needs - Transportation	27	30	0	20	13	90
Needs - Fam/Evn Needs - Other	1	11	0	5	6	23
Total	578	1099	9	642	902	3230

KPI #4 – Social Determinants of Health – Top 5 Zip Codes with Significant Health and Social Needs

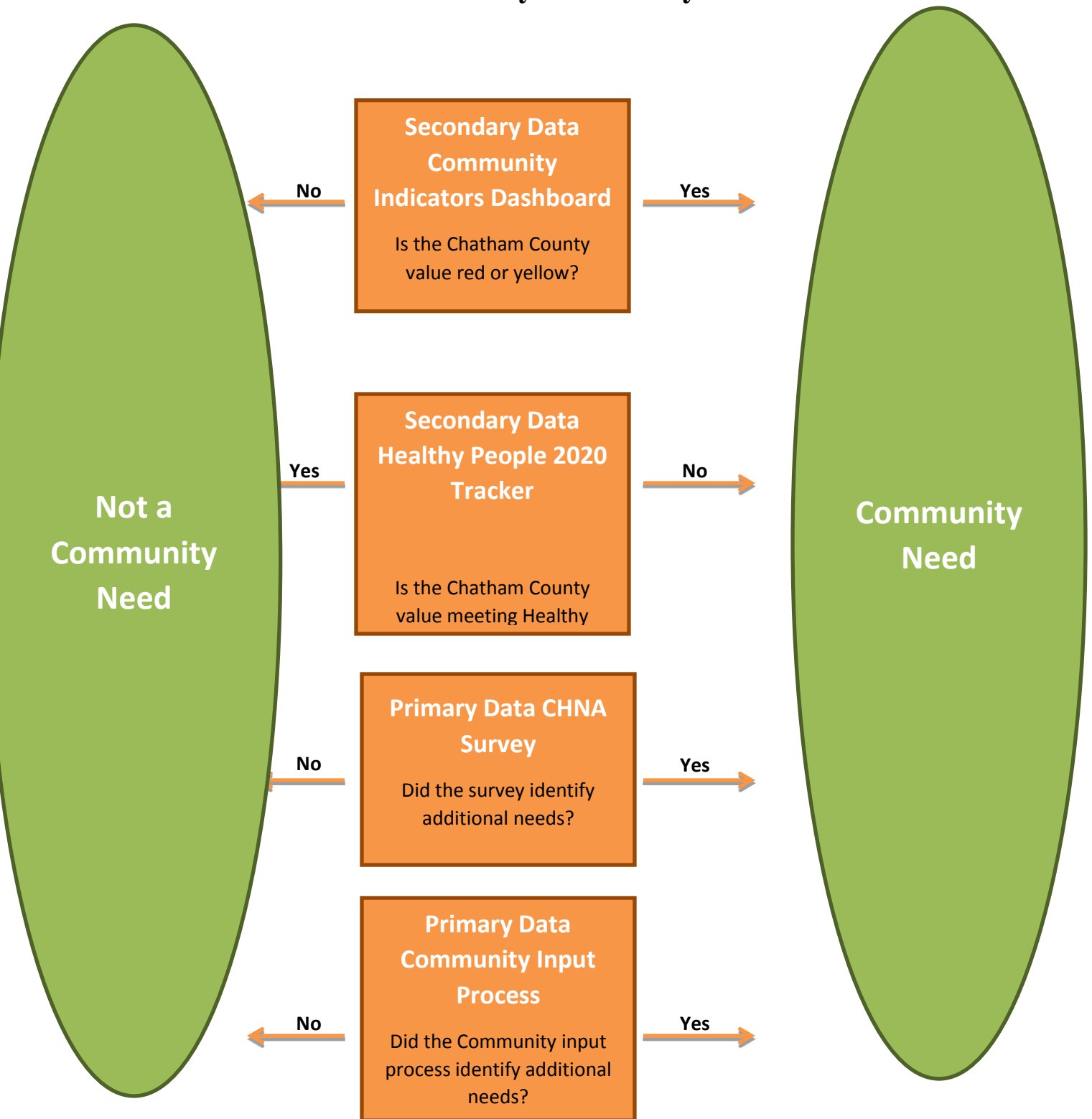
SJ/C Emergency Departments Un/under insured patients, May 2018 – May 2019

Needs - Personal Growth Domain						
Assessment	31401	31405	31409	31415	31419	Total
Needs - Legal	3	2	0	0	3	8
Needs - Personal Issues	10	22	0	12	7	51
Needs - Education	7	16	0	12	17	52
Needs - Cultural Adaptation	0	1	0	0	2	3
Needs - Safety, Basic Need	3	1	0	1	0	5
Needs - Support	5	4	0	5	2	16
Needs - Other	0	0	0	0	0	0
Total	28	46	0	30	31	135

Appendix 7

Community Needs Decision Tree

St. Joseph's/Candler
2019 Community Health Needs Assessment
Process to Identify Community Health Needs



Appendix 8

Chatham County Health and Social Service Provider Partners

St. Joseph's/Candler
2019 Community Health Needs Assessment

Chatham County is fortunate to have a number of health and social service providers who work independently and collaboratively to provide services to the residents of Chatham County. The CCSNPC focuses on health and the United Way of the Coastal Empire serves as a hub for health and social services through their 211 program.

Health

St. Joseph's/Candler operate Chatham County's only two free clinics serving patients throughout the county and region. These two clinics are strategically placed in locations to care for the medically underserved populations. They provide a variety of health and referral services to the patients they treat.

St. Joseph's/Candler's St. Mary's Health Center

St. Mary's Health Center (SMHC) started in a small room of SJ/C's St. Mary's Community Center, located in Culyer-Brownsville on the City of Savannah's West side in 2003. SMHC now operates in a free standing building at the corner of Henry and Drayton street in downtown Savannah and easily accessible to their patients. SMHC operates 5 days each week.

Primary Care Ages 19-64, Mammograms, Pap Smears, HIV Testing, Diagnostic/Imaging, Routine Pathology, Medication Assistance, Diabetic Counseling, Medical Supply Assistance and Hospitalization.

St. Joseph's/Candler's Good Samaritan Clinic

Located in Garden City, the Good Samaritan Clinic (GSC) opened in October 2007 to provide medical care to Hispanic patients on Savannah's West side. Since opening, GSC has seen a shift in ethnic demographics, but remains a trusted medical home for all their patients. GSC is open 5 days each week.

Services: Primary Care Ages 19-64, Diagnostic/Imaging, Routine Pathology, Medication Assistance, Diabetic Counseling, Nutrition Education, Personal Counseling and Hospitalization

Other Health Services

Chatham County Health Department

Health care services and wellness programs for Adults, Children, and Women's Health are available through the Georgia Department of Public Health. Services include immunizations, eye, ear and dental screenings, tuberculosis skin testing, family planning, sexually transmitted disease services, HIV testing and counseling, child health check and sports physical, the Children First program, breast feeding support, lead program, WIC, Babies Born Healthy, and a breast and cervical cancer program.

St. Joseph's/Candler
2019 Community Health Needs Assessment

Curtis V. Cooper Primary Health Care

Curtis V. Cooper Primary Health Care provides discounted services for qualifying patients. Services include adult medicine, pediatric health care, health education, gynecological clinic (by referral), Medicaid screening, prenatal (pregnancy) services, family planning services (birth control, etc.), pharmacy services, dental services, nutrition services, laboratory services, radiology services.

Dental Care Treatment Sites

There are several dental care treatment sites in Chatham County serving uninsured clients. To find out more information about dental sites, please visit: <http://www.chatham-safetynet.org/dental-care-treatment-sites/index.html>

J.C. Lewis Primary Health Care Center

The J.C. Lewis Primary Health Care Center provides primary health care, physician services, medication assistance, medical case management, health promotion and disease prevention, optometry, podiatry, shelter & housing referrals, economic education & referral, nutritional education and planning, dietary supplementation, prisoner re-entry program, 24-hour respite care, and behavioral health counseling.

Prescription Assistance

Prescription assistance is available from the City of Savannah, PharmaCare, Medicare Prescription Drug Plan, GeorgiaCares, NeedyMeds, MedBank, your doctor, or by purchasing generic medications. For more information on prescription assistance, please visit: <http://www.chatham-safetynet.org/prescription-assistance/index.html>

This information is provided with permission by the Chatham County Safety Net Planning Council.

Social Services

There is a wide variety of social services available to residents of Chatham County who qualify too. Social service programs offered by St. Joseph's/Candler are listed below.

St. Joseph's/Candler's St. Mary's Community Center

This center was established in 2000 in the Cuyler-Brownsville neighborhood to provide a variety of services addressing basic needs as well as opportunities for advancement.

Food Pantry, Public Benefit Enrollment Program, Counseling Service, Health Education, Eye Exam and Eye Glass Assistance, Pre-school, Senior Services, General Education Diploma (GED) Courses, Job Search Assistance, Computer Classes, Free Tax Preparation and Membership in Local Advocacy Groups.

St. Joseph's/Candler
2019 Community Health Needs Assessment

African American Health Information and Resource Center

Started in 1999, this center is part of St. Joseph's/Candler's ongoing commitment to improve the health of the African-American community and to correcting health disparities. Originally the Center opened to bridge the digital divide in computer services, but has become a hub for health and social service referrals.

Computer Classes, Healthy Kids Cooking Camp, Job Search Assistance, Health Education and Seminars, Weight Loss/Exercise Program, Reading and Story Telling for Children, Blood Sugar & Pressure Screenings and Case Management Program.

United Way of the Coastal Empire

www.uwce.org

The mission of United Way of the Coastal Empire (UWCE) is to improve lives by mobilizing the caring power of communities. Through partnerships, long-term planning and wise investment of donor contributions, United Way supports community programs and services within four impact areas.

Four Impact Areas

- Education & Youth Development
- Economic Independence
- Health & Wellness
- Basic Human Needs

Other Social Services

There are many other social service agencies serving Chatham County too. The United Way 211 program assists residents in identifying available programs throughout the county. A link to the 211 program is provided here so that any resident may explore the wide array of programs and services for health & social needs available in Chatham, Bryan, Effingham and Liberty Counties.

For a complete listing of the programs and services available in the 211 database, please visit:
<http://www.referweb.net/uwce/>

Appendix 9

Chatham County Safety Net Planning Council Brochure of Health Services



PRESCRIPTION ASSISTANCE

MEDBANK FOUNDATION

www.medbank.org

MedBank provides access to medications to eligible clients at no cost.

MEDICATION ASSISTANCE ELIGIBILITY:

- Resident of a participating county in SE/Central GA
- Diagnosed with a chronic illness
- Have NO prescription drug coverage
- Provide required proof of income.

(912) 356-2898

Call for locations.

Service Hours:

Mon – Fri 9am – 4pm

HIV

CHATHAM CARE CENTER

Chatham CARE Center is a dedicated Ryan White CARE Center and addresses the needs of those living with HIV providing comprehensive primary care, case management and supportive services. CARE is an AIDS Drug Assistance and Health Insurance Continuation Program enrollment site. Proof of residency and income are required. Individuals with no income can be assisted with support letters for proof of income.

107-B Fahm St.

Savannah

(912) 651-2253

Service Hours:

Mon – Fri: 7:30 AM – 6 PM

CHILDREN'S PUBLIC HEALTH INSURANCE

COASTAL CAMPAIGN FOR HEALTHY KIDS

www.coastalcampaign.org

MEDICAID / PEACHCARE FOR KIDS

Free enrollment and renewal assistance for children ages 0-19 years old. Children in a family of four earning up to \$60,768 may qualify.

(912) 661-3040

Mobile enrollment.

Flexible days and times.



BEHAVIORAL HEALTH RESOURCES

Developmental, mental health and addictive disease services for adults and children

GEORGIA CRISIS AND ACCESS LINE

1-800-715-4225

Free and confidential crisis intervention 24/7; mental health, drugs or alcohol. www.mygal.com

HUGS INC. (Heads Up Guidance Services)

Mental & Behavioral Health Counseling & Addiction Recovery Services

706 Wheaton St.

Savannah

(912) 417-4320

Service Hours:

Call for an appointment

SAVANNAH COUNSELING SERVICES

800 East 70th St.

Savannah

(912) 344-9403

1-866-557-9955

Service Hours:

Mon – Thurs: 8 AM – 6 PM

Fri: 8 AM – 12 PM

RECOVERY PLACE COMMUNITY SERVICES

835 E. 65th St.

Savannah

(912) 355-5938

Service Hours:

Mon-Fri: 9 AM – 6 PM

GA DEPT. OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES

For non-emergency, developmental disability services.

(912) 303-1649

(Intake and evaluation)

Service Hours:

Mon-Fri: 8 AM – 5 PM

NOTE: Both J.C. Lewis and Curtis V. Cooper provide behavioral health services

DENTAL SERVICES

SAVANNAH TECHINICAL COLLEGE DENTAL CLINIC

717 White Bluff Rd

Savannah

(912) 443-5351

Service Hours:

Call for an Appointment

NOTE: Both J.C. Lewis / Curtis V. Cooper provide dental services

VISION SERVICES

ST. MARY'S COMMUNITY CENTER

812 W. 36th St.

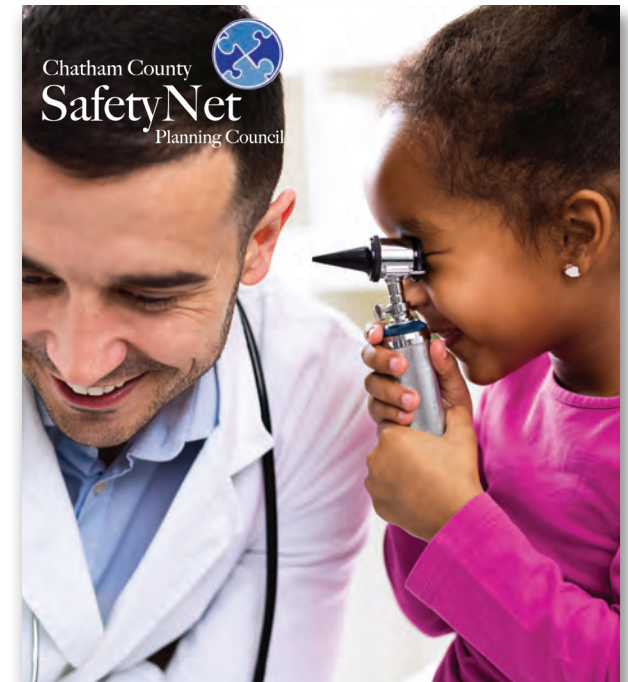
Savannah

(912) 447-0578

Service Hours:

2nd Thurs. & Fri. every month

Appointments only



COMMUNITY HEALTHCARE RESOURCES

Community Providers
Offering Affordable
Healthcare Services

www.ChathamSafetyNet.org

For more information about services in your Community, please contact, United Way of the Coastal Empire at 2-1-1 or (912) 651-7730, or go to www.uwce.org/211-2/

IF YOU ARE EXPERIENCING A MEDICAL EMERGENCY, CALL 911

AFFORDABLE PRIMARY CARE SERVICES

CURTIS V. COOPER PRIMARY HEALTH CARE, Inc. www.cvcprimaryhealthcareinc.com

The Curtis V. Cooper Primary Health Care, Inc. is a Federally Qualified Health Center providing primary and preventive health care, pediatric care, behavioral health, pharmacy services, OB/GYN, adult and pediatric dental services. Service areas: Savannah, Pooler, Garden City, Port Wentworth, Richmond Hill

106 E BROAD STREET SITE (Main)

106 E. Broad St.
Savannah
(912) 527-1000 or
(912) 454-8070

Service Hours:
Mon/Wed/Fri: 8 AM – 5 PM
Tues/Thurs: 8 AM – 7 PM
Sat: 9 AM – 2 PM

Pharmacy
(912) 527-1111

Service Hours:
Mon/Wed/Fri: 8 AM – 5 PM
Tues/Thurs: 9 AM – 5 PM
Sat: 10 AM – 2 PM

Dental Service
(912) 527-1000 or
(912) 454-8070

Service Hours:
Mon – Fri: 8 AM – 5 PM

ROBERTS STREET SITE

2 Roberts St.
Garden City
(912) 527-1100

Service Hours:
Mon – Thurs: 8 AM – 5 PM
Fri: 8 AM – 2:30 PM

Pharmacy
(912) 527-2742

Service Hours:
Mon/Tues/Thurs/Fri 9 AM – 5 PM

YAMACRAW VILLAGE SITE

349 West Bryan St.
Savannah
(912) 527-2727

Service Hours:
Mon–Thurs: 8 AM – 5 PM
Fri: 8 AM – 2:30 PM

COMPASSIONATE CARE WOMEN'S CENTER

Candler Professional
Building
5354 Reynolds St.
Suite 420, Savannah
(912) 355-6990

Service Hours:
Mon-Thurs: 8 AM – 5 PM
Fri: 8 AM – noon

REQUIRED FOR PATIENT REGISTRATION:

- Current state ID and social security card, passport, or birth certificate
- Verification of current address such as: driver's license, or utility bill
- Verification of Insurance: We accept Medicaid, PeachCare for Kids, Medicare, private insurance and self-pay
- Proof of household income (if uninsured): one month earnings or most recent IRS 1040 form, Social Security, child support, unemployment and/or worker's compensation, etc. Service discounts are available for qualifying patients. Eligibility is based on family income and family size.

IMPORTANT APPOINTMENT INFORMATION:

Please call to schedule an appointment. Walk-Ins are accepted, however, patients with appointments are seen first.

AFFORDABLE PRIMARY CARE SERVICES

J.C. LEWIS PRIMARY HEALTH CARE CENTER www.jclewishealth.org

J.C. Lewis Primary Health Care Center is a Federally Qualified Health Center offering comprehensive primary health care and preventative, enabling health services, as well as comprehensive behavioral health services. The adjacent Dental Center provides preventative, restorative and emergency oral health services for adults and children.

FAHM STREET SITE (Main)

125 Fahm St.
Savannah
(912) 495-8887

Service Hours:
Mon–Wed: 7 AM – 7 PM
Thurs: 8 AM – 5 PM
Fri – Sat: 8 AM – noon

Dental Center
107 Fahm St.
Savannah
(912) 544-0847

Service Hours:
Mon – Wed: 8 AM – 7 PM
Thurs: 8 AM – 5 PM
Fri: 8 AM – noon

SALVATION ARMY

3100 Montgomery St.
Savannah
(912) 651-7420

Service Hours:
Wednesday 2 PM – 5 PM

OLD SAVANNAH CITY MISSION

2414 Bull St.
Savannah
(912) 232-1979

Service Hours:
Tues: 1:30 PM – 6 PM

WEST BROAD STREET YMCA

1110 May St.
Savannah
(912) 233-1951

Service Hours:
Mon: 4 PM – 7 PM

J.C. LEWIS PRIMARY CARE PEDIATRIC CENTER

3802 Waters Avenue
Savannah
(912) 352-3845

Service Hours:
Mon – Thu: 8 AM – 5 PM
Fri: 8 AM – noon

REQUIRED FOR PATIENT REGISTRATION:

- Current state ID and social security card, passport, or birth certificate
- Verification of current address such as: driver's license, or utility bill
- Verification of Insurance: We accept Medicaid, PeachCare for Kids, Medicare, private insurance and self-pay
- Proof of household income (if uninsured): one month earnings or most recent IRS 1040 form, Social Security, child support, unemployment and/or worker's compensation, etc. Service discounts are available for qualifying patients. Eligibility is based on family income and family size.

IMPORTANT APPOINTMENT INFORMATION:

Please call to schedule an appointment. Walk-Ins are accepted, however, patients with appointments are seen first.

PUBLIC HEALTH SERVICES (Chatham County)

GA DEPARTMENT OF PUBLIC HEALTH www.gachd.org

Preventive healthcare services include immunizations, women's health, STD testing, health screenings and more.

CHATHAM COUNTY HEALTH DEPARTMENT

1395 Eisenhower Dr.
Savannah
(912) 356-2441

Service hours:
Mon – Fri: 8 AM – 5 PM
Thurs: 8 AM – 7 PM*
**extended hours for
clinic services only*

CHILDREN'S SPECIAL SERVICES

Babies Can't Wait, Children's Medical Services, Savannah Perinatal Initiative, Early Newborn Hearing

420 Mall Blvd.
Savannah
(912) 644-5804

Service Hours:
Mon-Fri: 8 AM – 5 PM

COMMUNITY CARE SERVICES

410 Mall Blvd., Suite G
Savannah
(912) 353-5001
Toll-free: (888) 698-2984

Service Hours:
Mon – Fri: 8 AM – 5 PM

MIDTOWN CLINIC

1602 Drayton St.
Savannah
Adult Health Phone:
(912) 651-3378
Child Health/Immunizations:
(912) 651-2587

Service Hours:
Mon – Fri: 8 AM – 5 PM

FREE PRIMARY CARE SERVICES

FREE Primary Medical Homes for the uninsured with an income less than 200% FPL

ST. MARY'S HEALTH CENTER

1302 Drayton St.
Savannah
(912) 443-9409

Service Hours:
Mon – Thurs: 8 AM – 5 PM
Fri: 8 AM – 12 PM

GOOD SAMARITAN

4704 Augusta Rd.
Garden City
(912) 964-4326

Service Hours:
Mon – Thurs: 8 AM – 5 PM

Services for non-English speaking Hispanic/Latino adults
Both clinics supported by St. Joseph's Candler Health System.

