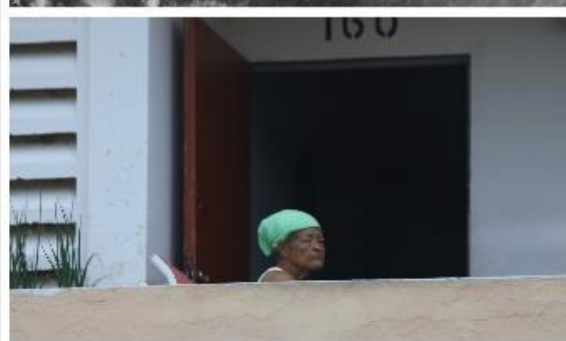


COMMUNITY NEEDS ASSESSMENT: UNDERSTANDING THE NEEDS OF VULNERABLE CHILDREN AND FAMILIES IN THE U.S. VIRGIN ISLANDS POST HURRICANES IRMA AND MARIA



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Caribbean Exploratory
Research Center

EXECUTIVE SUMMARY

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EXECUTIVE SUMMARY

In January 2018, the University of the Virgin Islands (UVI), through the Caribbean Exploratory Research Center (CERC), entered into an agreement with the Community Foundation of the Virgin Islands (CFVI) to conduct a community needs assessment. The purpose of the assessment was to determine the health, education, human services, and housing status and needs of children and families in the US Virgin Islands (USVI), post Hurricanes Irma and Maria.

Recognizing the importance of engaging the community in the effort, the research team at CERC utilized a community-based participatory research (CBPR) approach to accomplish the project objectives. This included the establishment of a Community Assessment Committee (CAC) and a Project Advisory Committee (PAC). PAC members included heads (or their representatives) of key government or semi-autonomous agencies, key personnel from community-based organizations (CBOs) or non-governmental organizations (NGOs), a representative of the Community Foundation of the Virgin Islands (CFVI), and members of the core research team.

Seven objectives guided the work of the research team and serve as the framework within which the findings are presented in this report. These objectives were: 1) Describe the USVI community by completing a *community profile*; 2) Describe/document the current status (post hurricanes) of the *health* of children and families; 3) Describe/document the current

status (post hurricanes) of the *education* of children and families; 4) Describe/document the current status (post hurricanes) of *select human services* for children and families; 5) Describe/document the current status (post hurricanes) of *housing and housing options* for children and families; 6) Describe/document *gap areas* with respect to health programs and services, education and educational services, select human services, and housing and housing options for children and families; and, 7) Describe or document *priority programmatic and service delivery issues* in the areas of health, education, select human services, and housing that need urgent attention.

The achievement of project objectives is expected to yield the following outcomes for the Community needs assessment: 1) Documentation of the programs and services available in the USVI post Hurricanes Irma and Maria; 2) Documentation of the needs of USVI children and families post Hurricanes Irma and Maria; 3) Documentation of gaps in services (direct and support) post Hurricanes Irma and Maria; 4) Provision of information to support efforts to address service gaps and age-specific post-disaster interventions to enhance recovery and resilience of children and vulnerable families; and, 5) Provision of information to policy makers and other stakeholders addressing needs of children and vulnerable families, particularly in the areas of health, education, human services, and housing.

Methodology

A concurrent, mixed-methods design was used. Qualitative (key informant interviews, focus group discussions, and community forums) and quantitative (surveys among the school-age population focused on behavioral health issues were used with youth and a compendium of instruments was used with adults) primary

data were collected. Additionally, administrative and secondary data were compiled and analyzed. Administrative data were solicited from key agencies and the team reviewed and analyzed available reports, as well as published and unpublished resources.

Study Participants and Data Collection

Both children and adults were included in primary data collection for this study. Children were youth in grades 4 through 6 in public elementary schools (to include 6th graders from one middle school and 4th – 6th graders from one K-8 school) and youth in grades 4 through 12 in parochial and private schools across the Territory.

Adult participants were persons ages 18 and older recruited primarily from clients of the two Federally Qualified Health Centers (FQHCs) in the Territory. Other adult participants were key personnel from education, health, human services and housing organizations across the Territory.

Key Findings

While key findings are summarized based on the seven objectives used to guide the development of this Community needs assessment, some overarching statements can be made regarding findings that transcended particular objectives. First, there was consistent information from both qualitative and quantitative data, as well as primary and secondary data, that stress remains a significant health issue for residents in the Territory, in the aftermath of Hurricanes Irma and Maria. This is a reality for both children and adults. Stress emerged as a major challenge for many in the community, including agencies that provide services to vulnerable children

and families that are still in the recovery phase and for whom neither the available services nor staffing levels have returned to normalcy. Some families remain displaced and many continue to deal with home repair challenges, including interacting with insurance companies and contractors involved with Federal Emergency Management Agency (FEMA)-related repairs. The needs of our community are myriad in the aftermath of Hurricanes Irma and Maria and while the report provides details on some of those needs, the bullets below attempt to encapsulate the most salient for ease of review by policy-makers, service providers, and funding agencies.

Community Profile

- The USVI is a group of small islands in the Caribbean with a decreasing population that is predominantly Black, multiracial, and multi-ethnic, with the majority of the community being over 35-years old.
- Economic stressors on the predominantly single -sector economy have contributed to high unemployment

and conspicuous poverty in the Territory.

- Low educational attainment, high percentage of female single-headed households and a weak economy put significant pressure on the community to provide safety nets in human services, health, education and housing for low and moderate-income families of the Territory.

Health

- There are lingering effects of the hurricanes on the psychological well-being of children and adults.
- Of the study participants, 282 or 60.2% had an overall Center for Epidemiologic Studies Depression Scale-10 (CESD-10) score of 10 or higher, which suggests that for the study participants, 6 in 10 could have depressive symptoms.
- There is evidence that elementary aged students across the Territory may have future issues with Post-Traumatic Stress Disorder (PTSD) as a result of experiencing

- Hurricane Irma and/or Hurricane Maria and that girls may have more challenges with future PTSD than boys.
- According to findings of this study, approximately 42.5% of the secondary students may be at risk for PTSD.
- Analysis of survey responses reveal possible levels of PTSD symptoms at approximately 57.5% in the adult population surveyed, based on a suggested cut -point of a score of 30 points, with possible scores in the range of 17.

- Other key findings include:
 - FQHCs filled a critical gap for residents whose primary care physicians left the Territory after the hurricanes, as well as for recovery workers who were assigned to St. Croix.
 - Hospitals continue to operate at limited capacity due to damage to physical structure and loss of staff and remain unable to provide some critical medical services.

- Data from secondary sources reveal major decreases in patient services with the exception of an increase in admissions for behavioral health clients at Roy L. Schneider Hospital (RLS). The Juan Luis Hospital and Medical Center (JLH) is without an inpatient behavioral health unit.
- There were major challenges accessing current health services data from VIDOH and JFL.

Education

The public education system sustained significant disruptions as a result of Hurricanes Irma and Maria that had immediate implications for the provision of key services, most notably full-day instruction for students. The disruptions extended to school plants being deemed “condemned”, resumption of instruction being delayed due to schools being used as shelters, and storage facilities for the school breakfast and lunch program being completely destroyed.

Other key findings include:

- VIDE saw a 20% reduction in overall school enrollment for SY2017-2018 in the months immediately following the hurricane, for a total enrollment of 10,868 in December 2017 with only a fractional percentage of students returning prior to the end of the school

year with this reduction continuing into SY2018-2019 as VIDE recorded a fall enrollment of 10,720.

- Almost all after school programs had to be suspended immediately following the hurricanes, and most are not yet back on line.
- Because of the double-session schedules at many of the public schools across the Territory, there was a significant reduction in the number of subsidized school meals provided during SY2017-2018.
- As of December 2018, all modular classrooms had not been erected or cleared for occupancy. The late start to the school year for some schools resulted in modified school days in order to make up the instructional time.

Select Human Services

- Head Start (HS) services are still not functioning optimally due to several centers being off line.
- Data from the Program Information Report (PIR) reflect a reduction in HS enrollment for SY2017-2018 compared to SY2015-2016 and SY2016-2017.
- In 2017-2018 private day care centers dropped to less than 50% of capacity in terms of available space and children enrolled.
- There was an increase in households receiving Supplemental Nutrition Assistance Program (SNAP) benefits in September 2018 compared to August and September 2017.

- Over \$30,000,000 in Disaster Supplemental Nutrition Program (D-SNAP) benefits were distributed to eligible residents in the USVI in the aftermath of Hurricanes Irma and Maria.
- Damage to facilities was widespread, impacting service delivery to all ages and also affecting the health of employees.
- The Social Services Block Grant (SSBG) Program affords an avenue for the Virgin Islands Department of Human Services (VIDHS) to provide services to a wide-range of persons in the community who need support.

Housing

- FEMA data estimates as of September 2018 indicated that 23,301 households incurred some damages to their primary residences from one or both hurricanes.
- As a result of Hurricanes Irma and Maria, families in private and public housing, owners and renters experienced significant challenges related to clean-up of water and debris, loss of personal items, emergency repairs, displacement, mobilization to address insurance and more permanent repair requirements, and high levels of stress.
- Recovery to the housing stock involved federal programs and resources as well as private insurance, personal funds, and personal efforts over a 15-month period with the task still unfinished.
- The Virgin Islands Housing Finance Authority (VIHFA) offers several programs to assist the homeless and qualified low and moderate income residents with first-time home ownership.
- The Virgin Islands Housing Authority (VIHA) and VIHFA will be significant partners in the strategy to build resilience in the VI community.
- VIHA houses no-income and low-income families through its public housing inventory – which provides over 3,000 units, and its Housing Choice Voucher Program (HCVP) which provides housing for approximately 1,600 eligible families.
- VIHA's tenant pool in the St. Thomas-St. John District and Territory-wide contracted by 10% and 12%, respectively, from 2016 to 2018, primarily due to the destruction of the Tutu housing community that had to be completely evacuated due to damage from Hurricane Irma. That housing community is slated for demolition.

Voices from the Community

Through Town Hall meetings, Focus Group discussions, and Key Informant interviews, members of the community shared with the Research Team some of their experiences with Hurricanes Irma and Maria; how they were doing over one year after the disruptions, and the extent to which they were able to access needed services. Other information shared revolved around how the disruptions affected key agencies' capacity to deliver services and offer programs at pre-hurricane levels; how staffing levels were impacted, and the status of programs and services more than one year after the two hurricanes.

Ten themes emerged from the study participants' responses to the various questions posed by the Research Team:

- Initial and continuing effects of stress and trauma;
- Surviving; being a survivor; survival;
- Counseling – need for counseling; stigma associated with counseling;
- Displacement from homes; no stable homes; disruption in families;
- Concern for children;
- Vulnerability of the elderly; concern for the elderly;
- Disruption in services; gaps in services;
- Collaboration; cooperation; teamwork;
- Communication; and,
- Need for better planning for future disruptions.

Program and Services Gaps in Key Areas

The Community needs assessment identified a number of program and services gaps that are now visible in the recovery period following the historic interactions with two category 5 hurricanes in September 2017, some of which are enumerated below:

Health

- Availability and delivery of behavioral health services for children, adolescents and their families remains a major health service gap in the Territory.
- Insufficient school counselors to meet the behavioral health needs of the children in the Territory's public schools.
- Limited access to dental care services that existed prior to the hurricanes remains a major service gap, with the only provider that accepts Medicaid having a wait list of 4000 for dental services on the island of St. Croix.
- Limited capacity in the area of inpatient care in the Territory attributable both to damage to the two hospitals, and the loss of key clinical and non-clinical personnel.

Education

- A lack of resources for counselors to address behavioral health needs of children in the public school system has been identified as a gap in services in the education system.
- Delays exist in the readiness of modular classrooms across the Territory.
- Delays exist in the resumption of the full range of after school programs for youth.

Select Human Services

- HS Program staffing challenges exist, particularly relative to HS teachers and assistant teachers.

- HS children access to initial health screening and adequate health needs follow-up.
- For SY2015-2016 through SY2017-2018, a gap exists in the number of HS children needing medical services and those who have received such services.
- Only 3% of HS children identified as needing preventive dental care in SY2017-2018 received such care.
- The number of HS children with health insurance coverage at the end of the SY2017-2018 was lower than for SY2015-2016 and SY2016-2017.
- Challenges exist with ensuring adequate resources for protective and foster care.
- Challenges exist with program efforts to assist Temporary Assistant for Needy Families (TANF) recipients to get to self-sufficiency.

Housing

- Availability of housing stock due to destruction/damage of family and rental properties.
- Challenges associated with providing safe, affordable housing to a population that is over 50% low and moderate-income, living on small islands with limited land mass and a high cost of living.
- The aging public housing inventory (average age is 50-60 years old) represents a major vulnerability for this sector for future disruptions.

Priority Programmatic and Service Delivery Issues that Need Urgent Attention

Priority Programmatic Issues

Health

- Identify and implement primary and secondary intervention programs to address PTSD and depression in children and adults at the population level.
- Recruit professional staff and providers, particularly in the areas of behavioral health, chronic conditions (diabetes and hypertension), and dental care.
- Strengthen collaborative arrangements with providers outside of the Territory to improve management of clients in the wake of such a disaster, to include plans for evacuation of patients in the eventuality hospital systems fail as occurred in September 2017.

Education

- Fill critical vacancies in the public school system, to include teachers, school nurses and school counselors.
- Establish system to safely store student data in the event of loss due to damage as seen in recent disaster.

Human Services

- Repair and reopen HS centers that closed in the aftermath of the hurricanes.
- Increase access to preventive dental and medical care for the HS population.
- Fill key vacancies in both the HS and EHS programs to optimize service delivery to HS and EHS children and families.
- Examine the low TANF participation in the St. Thomas-St. John district to ensure that the neediest in the district are being reached and served.

- Re-evaluate the approach to Job Opportunities and Basic Skills (JOBS) Program experiences for TANF recipients and how JOBS contributes to the ultimate goal of self-sufficiency.
- Revisit the local criteria for qualification for TANF benefits, particularly the requirements that only single persons can qualify for TANF benefits and that mothers must provide information about their children's fathers in order to meet TANF qualification requirements.

Housing

- The priority programmatic issues related to housing are linked to actions associated with filling the gaps in housing availability and conditions in the Territory.
- It will also be critical to many in the community to develop housing initiatives to reduce the unmet housing needs of vulnerable groups in the community.
- The immediate challenge is providing some level of assistance to the more than 5,300 households that suffered severe or major damage from the catastrophic hurricanes.
- Rebuild/replace the aging housing inventory to ensure hardened structures that better address issues such as accessibility for residents, environmental considerations, energy efficiency, and right-sizing based on smaller family sizes.

Priority Service Delivery Issues

Health

- Repair service delivery sites, particularly for hospitals and VIDOH.
- Replace lost equipment and resources needed to deliver primary and inpatient care to children and families in the USVI.
- Fill critical vacancies in the VIDOH and enhance the delivery of quality health care, to include dental care.
- Fill critical vacancies in the hospitals to build capacity to provide inpatient care.

Education

- Rebuild schools, to include school libraries.
- Restock lost equipment such as promethean boards and computers for classroom instruction.
- Restock lost equipment for programs such as athletic programs, music programs and other enrichment programs.

Human Services

- Rebuild HS classrooms to optimize delivery of services to the HS population.
- Conduct targeted recruitment of staff for key vacancies in the HS and EHS programs.
- Assess viability of re-engineering of JOBS Program and overall approach to self-sufficiency for TANF clients.

Housing

- Develop a communications strategy for the general public to understand and follow the guidelines, actions and timelines of housing repair programs.
- Acknowledge safe, affordable housing as being a critical component of community development.
- Factor in economic, size, and isolation challenges while working to ensure a future where citizens will have a place to live that has a chance of withstanding extreme weather, like hurricanes.

Limitations, Discussion, and Recommendations

Limitations

While the research team made every effort to gather and analyze data from a wide range of stakeholders in the health, education, human services and housing sectors to describe and document the current status of children and families following the devastating effects of Hurricanes Irma and Maria in the USVI, we must acknowledge a few limitations that the users of this report must keep in mind. Efforts to conduct key informant interviews with leadership of some agencies within the health sector were not successful, resulting in some gaps in the information on the health status of the population. However, extensive data on the clients served by the two federally qualified health centers in both districts as well as key informant interviews with the leadership of the two centers offer a solid foundation for the applicability of the findings presented. Further, a convenience sample of adults were recruited

Discussion

The purpose of this needs assessment was to describe and document the health, education, human services and housing needs of children and families in the wake of Hurricanes Irma and Maria, the two category 5 hurricanes that struck the US Virgin Islands in September 2017. One year following the historic storms, children and adults alike experience symptoms of depression and post-traumatic stress disorder that may be attributable, at least in some part, to their exposure to the traumatic destruction caused by the hurricanes. While this study does not purport to establish cause and effect, evidence

Recommendations

The findings of this community needs assessment point to a Territory with the most vulnerable experiencing challenges in five domains of social determinants of health – education, economic stability, the neighborhood and the built environment, social and

for participation in the battery of surveys on psychological health status so findings of the quantitative data may not be generalizable to the total population. Nonetheless, the authors contend that the objectives of the needs assessment to describe and document the health status of children and families have been met due to the fact that the majority of the clients served by the FQHC's would be considered some of the most vulnerable in the USVI.

Finally, an overarching limitation that must be recognized is related to the challenges of accessing and obtaining data on the population. Notwithstanding these limitations, the authors offer the findings of this community needs assessment as an important source of information on the impact of a major natural disaster on children and their families in the USVI.

from other communities that have had similar experiences suggest a strong link between the experience of going through the hurricanes and negative mental health outcomes. Several points are offered for consideration as important aspects of lessons learned from the needs assessment. These points suggest the overarching need for policy-makers to consider how to address key domains of the social determinants of health and how to engage in responsive, realistic, and community-engaged disaster planning for the vulnerable children and families in the community, and the broader community in a collaborative, integrated way.

community context, and health and health care – prioritized CDC (Healthy People 2020). Thus, within the context of the social determinants of health, recommendations are offered to:

Improve the overall health of vulnerable children and families by:

- Providing access to quality healthcare;
- Providing access to preventive health and behavioral health for children;
- Repairing health care facilities; and,
- Providing incentives for building the health care capacity in the Territory.

Improve educational outcomes for our youth by:

- Rebuilding schools, including libraries, with stable internet connectivity and associated instructional technology;
- Providing additional academic support for students who have fallen behind due to disruptions; and,
- Providing support services for teachers.

Increase economic stability of vulnerable families by:

- Re-engineering TANF program to assist families to move out of poverty; and,
- Providing certificate programs through UVI CELL to enhance skills of displaced workers.

Improve neighborhoods and the built environment by:

- Improving health and safety aspects of housing communities; and,
- Supporting vulnerable families to repair damaged homes so they have stable home environments.

Addressing the enumerated domains of the social determinants of health requires urgent attention and action on the part of policy-makers, funders, and service providers that will improve the social determinants for vulnerable children and families in the Territory, thereby strengthening their health and well-being, which is foundational to learning, growing, and earning.

In addition to attention to social determinants of health, the findings speak loudly of the need to begin community-engaged efforts

in disaster preparedness planning so as to ensure that community members, but particularly vulnerable children and families possess the tools needed to be prepared for future disruptions. Some key recommendations are provided to improve the community's preparedness for future disruptions. The recommendations are anchored in a community-engaged approach to disaster preparedness planning. To wit, key recommendations offered are:

- Preparedness plans must be intentional in addressing the vulnerable populations in our community, to include the elderly, persons with disabling conditions, children, and the poor.
- Disaster planning needs to include contingencies for instances of limited external assistance.
- Communication protocols associated with disaster preparedness planning should be sensitive to: a) Cultural nuances; b) Educational levels; c) English language proficiency; d) Reliability of communication mediums; e) Appropriate channels for disseminating information; and f) the most appropriate entity/person to lead communication efforts.

During the planning process, at the community as well as the territorial level, a compendium of strategies to address the emotional, psychological, and social aspects of the aftermath of disasters need to be included.