

# Southern Chester County Health & Human Service Focus Groups Spring 2006

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Chester County Department of Human Services  
Chester County Community Foundation  
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## **I. Overview Summary**

In an effort to better understand the priority unmet social service needs of indigent residents of Southern Chester County, “town meeting” style focus groups were held in three regions. In each of the three regions, three focus group meetings were conducted, one seeking the opinions of community leaders, another seeking the opinions of recipients of social services, and a third seeking opinions from the Spanish speaking population. Focus groups were held in West Grove, Kennett Square and Oxford.

Each meeting lasted approximately 1.5 hours and consisted of identical talking points. Focus group participants were given a list of issues on which to comment to help stimulate participation. Participants were,

however, told that the talking points were not an all-inclusive list of topics and departure from that list was encouraged. Additionally, participants were told that not all of the suggested topics needed to be discussed, should they feel they were not issues in the community. The list of topic prompts was:

- Basic needs (food, clothing, shelter)
- Child care and activities for youth
- Drug and alcohol abuse
- Employment (unemployment and/or underemployment)
- Health insurance and medical coverage
- Health care and accessing health care providers
- Literacy/ illiteracy
- Mental health
- Mental retardation
- Older adults and people who care for them
- Violence and crime

Each of the individual reports for each focus group session details only those topics that were the most salient during each meeting. In several cases, individual focus group participants mentioned topics that were not echoed by a sufficient number of other participants and were accordingly omitted from the report.

In each of the nine focus group meetings there were four topics that were recurring and of enormous importance. They are discussed in detail below.

**A. Transportation:** The indigent residents of all three regions included in the focus group meetings expressed being isolated from other areas unless they had access to private transportation. Lack of public transportation makes it very difficult or even impossible to seek employment outside of the immediate area. Arriving at pharmacies, dental offices, and medical appointments is also problematic. Many indigent residents of both the Latino and non-Latino community are deeply affected on a daily basis by this lack of transportation. Elderly residents have difficulty getting to medical appointments, and teens are confined to their own neighborhood and not able to participate in the after school activities in neighboring towns.

Quite a few indigent families cited the lack of transportation as the cause of men needing to spend the week in another town where they were employed. Otherwise, they lacked the ability to reliably arrive at their job. If there were public transportation they would simply commute on a daily basis; as it is now, this is impossible.

**B. Healthcare Costs:** In Kennett Square, West Grove, and Oxford, without exception, every participant agreed that the cost of dental and medical care was tremendously taxing on the indigent community. High costs of medication, dental appointments and procedures, medical appointments, hospital stays, and emergency room visits affected residents irrespective of their age or ethnic background. In the case of immigrants, focus group participants referenced various occasions in which health professionals required a portion or the

entirety of their fee paid in advance, for fear that they were both uninsured and unable to pay. The result is that indigent residents often save for months in anticipation of a medical appointment, dedicating a disproportionately large amount of their resources to a few annual appointments.

Seniors and residents who use some form of public assistance also expressed that a disproportionately large amount of their resources also are spent on medication, and medical supplies that are only partially, if at all, covered by medical insurance.

**C. Housing:** The cost and limited availability of housing in all three regions was consistently mentioned in all focus group meetings. These two factors, participants said, have on some occasions led to an increase in homelessness; and on countless occasions to residents co-habiting to an extent that is expressly prohibited by their apartment leases. Resolving landlord/tenant issues demands a nuanced understanding of rental laws which few indigent residents can obtain. To prevent being discovered as breaching the terms of the lease agreement, many rental units are rarely visited by maintenance crews or landlords, and are thus poorly maintained.

Listings of available apartments are not easy to obtain and are difficult for non-English speakers to understand. Additionally, move-in costs are so expensive as to require indigent residents to save their incomes for several months prior to moving. The process of finding an available apartment, being able to afford the rent, and saving money to afford the move is complex, demanding and, by necessity, a collaborative effort between numerous immediate and extended family members and friends.

**D. Immigrant Issues:** In each of the regions, a litany of issues endemic to the immigrant experience took center stage. Illiteracy, social isolation, poverty, unemployment, unawareness of immigration laws, and fear of authority all contribute compellingly to making the hue of daily life an anxious, uncertain, and often fearful, one. Many immigrants in the area, as well as nationally, thus live quietly and in the shadows.

On the whole, participants felt that the difficulties immigrants experience represent the faulty monumental pillars in the edifice of community building. Only in undoing these hindrances can progress be made towards upward social mobility, inclusiveness, and equality.

On several occasions focus group participants related stories that demonstrated that the community is grossly misinformed and under-informed about various things. Many immigrants simply do not understand the consequences of not being able to pay the bill at an emergency room, calling the police department, reporting domestic violence, filing a complaint with a landlord, opening a bank account, or getting prenatal care or counseling. On equally as many occasions, many immigrants find themselves being forced to develop elaborate, often illegal compensations, such as attempting to return to their country of origin for medical services, attempting to develop alternative identities to open bank or phone accounts or gain employment, failing to report domestic violence, or sharing one car among six acquaintances.

The immigrant community of Kennett Square, relative to the other two regions, was most informed on the availability of resources. Participants were aware of language classes, health professionals, and

other social services and were, in general, able to get there. In the other towns, however, many focus group participants stressed that both Oxford and West Grove were too far removed from larger towns like Kennett Square and West Chester. They frequently expressed that services were concentrated there and hence were inaccessible to them.



## **II. Avondale & West Grove Community Leaders Focus Group**

**A. Summary:** The focus group was attended by eight very involved and well informed community leaders. The participants were asked to offer their insight into the following topics insofar as they related to the Avondale and West Grove areas. Topics included: basic needs (e.g. food, and clothing), childcare, drug and alcohol use, employment, health insurance and coverage, literacy, mental health, mental retardation, elderly residents, and crime and violence (domestic and non-domestic).

There was overwhelming consensus amongst focus group members that the majority of unmet social service needs were concentrated in the Hispanic community of Avondale and West Grove; a community that most group members agreed had not only become significantly larger but also more permanent. For example, one group member mentioned that the local high school that once had 13 Hispanic families,

over the last decade had become the school for more than 200, mainly indigent, Hispanic families.

**B. Transportation:** The most unanimously agreed upon gap in social service in the Avondale and West Grove area was the need for transportation. Focus group participants noted that most recipients of social services looked toward Kennett Square and/or West Chester for their social services needs. Many community leaders thought that services available to the West Chester and Kennett Square communities had limited impact on the Avondale and West Grove areas because of the absence of transportation. Focus group participants noted that the transportation crisis was endemic to various aspects of daily life and was a major issue facing Avondale and West Grove. This has implications affecting access to: health care, dental care, employment, and other resources that might otherwise be readily available in larger surrounding towns.

**C. Health care:** One of the most mentioned topics in the focus group meeting was the difficulty of finding, accessing, and paying for health care.

Many group members mentioned that although some health care providers did speak Spanish the majority did not. Many of those did not have translating services. Focus group participants stated that dentists that accepted low income patients or adjusted fees were very few and the one that did was far away, causing many indigent residents to rely on a local church to give rides. Vision care amongst the area's poor was thought to be non-existent.

The cost of physical exams required for participation in after school sports was prohibitive, causing lack of participation.

Complaints of health care issues mostly centered on cost and transportation. Group members agreed that these challenges made healthcare consistently reactive in nature and almost never preventative.

**D. Basic Needs:** Most respondents agreed that though there was a level of poverty that made affording food and clothing difficult, the most pressing unmet basic need was the need for affordable housing. Several focus group members mentioned that the Avondale/West Grove area lacked any type of low income or Section 8 housing. They credited this housing crisis to increases in both property values and area development. The issues that have risen from the lack of affordable housing are many; they include unaffordable moving costs, the need for large extended families to cohabitate, over-inhabited dwellings, poor and unregulated landlord/tenant relations. With area one-bedroom apartments costing nearly \$800 in monthly rent, many community leaders agreed that area housing was simply unaffordable for the indigent community earning minimum wages or less. One focus group participant mentioned that community organizations that attempt to provide rent assistance are overwhelmed with the demands.

**E. Child Care and Activity for Youths:** Group members mentioned that although several after-school programs exist, participation among children from indigent families suffered. The main barrier to participation is the inability of many poor children to obtain the required physical examinations. The prohibitive factors were cost and transportation.

**F. Drug and Alcohol Abuse:** Group members with insight into youth issues through their employment in public school

mentioned that they had seen several drugs surface in school, most prominently alcohol and marijuana. They mentioned the absence of peer-to-peer drug support groups.

In adults, alcoholism and cigarette smoking is a problem, especially in males of the Latino community.

### **III. Avondale & West Grove English-Speaking Users Focus Group**

**A. Summary:** This third West Grove area focus group had a handful of attendees. Issues raised included housing, transportation, cultural sensitivity, police responsiveness to drug- and gang-related problems, poverty, dental and vision care, unemployment and general health care.

**B. Housing:** The most emphasized topic in this focus group was the need for affordable housing. Focus group participants thought that the housing situation could indeed be called a crisis, and that the crisis affects indigent West Grove residents regardless of their race, age and gender. Participants mentioned several occasions in which people they knew of, or worked with, had resided in trailers and were asked to leave with very short notice. Participants mentioned that this is happening more frequently due to the rate at which land is being developed into houses.

The cost of housing is unaffordably high for many residents. This has led to many people cohabitating with other family members to be able to afford rent. This cohabitation is often illegal and leads to less than ideal landlord-tenant relationships throughout West Grove. The condition of residences, therefore, is often poor.

Participants expressed the urgent need for a bi-lingual agency that could provide rental

listings, information, legal advice, and rental assistance. For many, not only is the process of renting difficult to afford but it is also daunting. Many heads of families are not aware of their rights, or how to go about procuring safe, affordable housing.

**C. Transportation:** Focus group participants were of the opinion that lack of public transportation is at the root of many of the problems that face West Grove area residents. Seniors find it very difficult to both afford medication and to travel to pharmacies and doctors. Access to dental and vision care was a problem for many indigent area residents, as was health care--because of the cost of care, language barriers, and because of lack of transportation to providers.

Activities for youth were lacking in the area, and the activities that did exist lacked transportation. Employment for poorer West Grove residents is often limited to local small companies because of the lack of transportation.

**D. Crime:** Focus group participants also voiced concerns about gang-related vandalism, tagging, and drugs they have witnessed locally. Participants mentioned that they thought the gang problem is overlooked, under-addressed, and dismissed as being concentrated in and originating from larger area cities rather than in the West Grove area.

**E. Cultural Sensitivity:** Little cross-cultural dialogue hinders understanding between West Grove area Latino and non-Latino residents. Consequences of this are low police understanding and responsiveness to Latino issues, the perception by non-Latino residents that all Latinos are undocumented aliens, the perception that jobs are stolen by Latinos,

and crime is disproportionately caused by Latinos. Additionally, solutions to problems such as domestic violence, alcoholism, and smoking within the Latino community could be better approached with awareness as to how these issues are outgrowths of culturally reinforced behaviors.

**F. Inter-agency Communication:** Focus group participants also suggested that though there may be several social service agencies in the area whose goals are to address residents' concerns, the absence of an overarching centralized agency that could link the various non-profit, governmental, and religious organizations was problematic. It has led to lack of awareness of what help does exist, how to qualify for it, and to significant redundancy of services. Focus group participants added that currently the source of information for referring needy people to agencies for aid is "the grapevine."

#### **IV. Avondale & West Grove Latino Users Focus Group**

**A. Summary:** This focus group was attended by approximately 15-20 West Grove residents. The group consisted mostly of non-English speaking recipients of social services and partly of the staff of the church-based group that provides assistance to many non-English speaking members of the congregation.

**B. Civic Information:** The most pressing issue for the majority of the focus group participants is the lack of reliable information concerning immigration issues. Considering the country's current fervor for addressing issues of immigration, many of the focus group participants were very unsure as to where they could obtain assistance on a variety of issues without risking adversely affecting their immigration status. Many focus group participants were

afraid to travel even short distances for what many would label "necessities," for fear of being pulled over by police or approached in any way by an official who they fear might have the power and inclination to unfavorably affect their ability to live in this country. Fear is as present as is misinformation.

By way of example, two focus group participants expressed the panic they felt when an employee at a local store told them she would go and check something with the store manager. Thinking the store manager had a position of power, the two shoppers promptly left the store.

Another elderly focus group participant mentioned that she was so afraid of using (and unable to afford) local medical care for a needed life-threatening operation, because she felt she might be arrested upon entering the hospital. Hence, she traveled back to Mexico to be operated on immediately, then returned to West Grove. A source of information that distinguishes fact from myth about the national immigration laws, and informs Spanish speaking residents of their rights, is desperately needed.

**C. Transportation:** The vast majority of the focus group participants felt as if the West Grove area was an isolated small town distanced from what they frequently referred to as the "big towns." These bigger towns, West Chester and Kennett Square, are the only places they knew of that can provide social services such as shelters, doctors, dentists, community centers, rental assistance, etc. The only transportation participants knew of was finding a friend who had a car and was willing to take the day off of work.

**D. Housing:** Focus group participants spoke about the cost of renting apartments.

They said that they often feel “tricked” by landlords who ask for arbitrary rent increases to the already extremely high cost of renting in the area, citing that they must pay more for exceeding the living capacity of the unit.

**E. Health Care:** The cost of dental and medical care is almost always unaffordable. Many focus group participants mentioned that they are in the process of saving money, and have been for the past few months, to be able to take their children to a dental or medical appointment. They said many health practitioners would not see them unless at least half (sometimes all) of the fee is paid in advance.

**F. Mental Health:** When asked about mental health, physical disabilities, alcoholism, domestic violence, nutrition, tobacco use, and issues related to seniors, in their community a very large number of focus group participants either knew people who struggled with those issues or did so themselves. When asked about resources for any of those issues, the respondents knew of none other than going to the church for the spiritual strength to deal with those issues.



## **V. Kennett Square Community Leaders Focus Group**

**A. Attendees:** Approximately 25 community leaders involved in some form

of social service (secular and religious) attended this focus group.

**B. Housing:** Focus group participants mentioned the high cost of housing as an enormous problem in the Kennett Square area, not only for the most indigent of residents but also for those residents that are gainfully employed in a steady job. The high cost of housing especially affects working single Latino men, who often are forced to far exceed the living capacity of the unit they live in.

**C. Youth:** Though many scholastic and non-scholastic activities exist for children and youths in the Kennett Square area, those in charge of organizing those activities have noticed (and fear an increase in) gang activity. This activity has taken the form of “tagging,” vandalism, some drug activity, and a notable increase in children’s admiration of gang culture. Focus group participants mentioned that many at-risk children are “walking the line” in between identifying and admiring gang culture and actual gang participation. The age at which participants feel that both the admiration and potential participation in gang activity begins at a much younger age than one might think. One participant estimated as young as late elementary school or early middle school.

Bi-lingual youth are often more socially empowered than their non-English speaking parents because they are more linguistically and culturally fluent. As a result, focus group participants remarked that they have seen children dismissing their parents’ household leadership and opting instead to spend a lot of time on the street and joining what one participant referred to as “gang like” groups of friends. Focus group participants on the whole agree that Kennett Square is fertile ground for the

establishment and strengthening of gangs absent a concerted and preemptive effort.

**D. Health Care:** On the issue of access to health care, most participants agreed that when compared to other Southern Chester County towns, accessing health care is easier because there are more health practitioners in Kennett Square. Affording health care, however, is very difficult if not impossible.

Many potentially undocumented area residents are unsure as to the legalities behind attempting to obtain, health, dental, and or vision care, hospital or emergency room visits. Focus group participants suggested civic education classes in addition to the seemingly successful language classes program, as a means to better inform the non-English speaking population about issues. Additionally, though some local non-profits whose representatives attended the focus group often send translators along with non-English speaking patients, on the whole there are very few bi-lingual health profession offices in the Kennett Square Area.

**E. Inter-Agency Communication:** The focus group nearly unanimously agreed that there are a great number of agencies dedicated to improving the lives of Kennett Square residents. However, participants also agreed that very little inter-agency communication exists, causing both gaps and redundancies in the service. Many participants suggested a consolidation of the agencies that perhaps places them all “under one roof” would serve to correct this problem.

## **VI. Kennett Square English-Speaking Users Focus Group**

**A. Summary:** A dozen Kennett-area residents attended this session. The most voiced topics were senior citizen concerns, housing and homelessness, racial segregation amidst Kennett Square youth, gang activity, drugs, and the perceived lack of racial inclusiveness in the social services.

**B. Senior Citizen Concerns:** Seniors who attended the group had concerns about depression. They mentioned that it is extensive in the senior community. They also shared concerns about transportation for seniors who have lost their ability to drive, socialization for seniors, finding caregivers, and the cost of medicine.

The seniors in attendance mentioned that the community of people that used to check up on seniors has diminished with time as friends become sick and or pass away, leaving many seniors socially disconnected. Participants mentioned that depression is very present yet under-reported due to isolation; and under-treated due to increasing costs of depression treatment and medication.

Focus group participants suggested that a resource that would help unite care givers with seniors who need them, as well as unite seniors in the community as a “buddy system,” would help ensure that seniors do not live isolated, lonely, and uncared for.

**C. Housing and Homelessness:** Another issue raised by the participants is homelessness. Two focus group participants mentioned that they have seen an increase in homelessness. More specifically, participants referenced occasions in which people, usually Latinos, have been seen living under a local bridge/railroad track. The resources to address this homelessness are severely lacking. Participants said that the only shelters for the homeless exist in

Coatesville and West Chester. Homelessness in the area is thought to be a consequence of what focus group participants labeled as the “incredibly high” cost of rent in Kennett Square.

**D. Teens, Drugs and Gangs:** Other issues noted by participants are an increase in school drugs, namely cocaine and marijuana. The increase in gang culture and gang idolization among youths, though not any specific gang violence, also was discussed. Participants agreed that the gang issues faced by other larger cities like Wilmington, Philadelphia, and Newark are destined to be headed to the Kennett Square area. Children are especially vulnerable.

Focus group participants indicated that area children in the school and outside of the school seemed very racially segregated. Also participants referenced several occasions where Latino gangs of children have bullied weaker Latino and non-Latino children. Sexually explicit language among youth was also mentioned as part of a larger divide between children and figures of authority, including parents and school teachers. The lack of communication between age groups and the lack of communication between cultures that live in Kennett Square is credited as contributing to the isolation of both Latinos in the community and Latino youth. The focus group as a whole concurred that more youth mentorship organizations that combine peer mentorship, youth activity, and ethnic integration could address the advent of youth and gang-related problems in prevention rather than reaction.

**E. Inclusiveness of Social Services:** Focus group participants thought that effort should be made to combat the perception that social services cater exclusively to needy Latino families. There are many needy non-Latino

families that feel as if the whole social service infrastructure of the Kennett Square area is concentrated on meeting the needs of indigent Latinos.

## **VII. Kennett Square Latino Users Focus Group**

**A. Summary:** This focus group, conducted in Spanish, was attended by approximately 40 Kennett Square area residents. Participants were asked about their opinions on various aspects of life in Kennett Square. Their most salient and frequently mentioned responses are discussed below. They include the cost of housing in the area, uncertainty about their eligibility for health services, the unaffordable high cost of dental and medical care, and a long catalogue of fears and rumors, some true and some false, about immigration issues.

**B. Housing:** Several focus group participants mentioned that they have been evicted from their homes, and as a result they have been looking for affordable housing for the past few months. In the interim they are living with family. They mentioned that finding an apartment is very difficult, as listings are mostly in English and the apartment search process done mostly by word of mouth. Also, also available apartments are expensive, with both security deposits and rent requiring prospective tenants to save income for several months in preparation. Many participants mentioned that by the time the multi-step process mentioned above is complete, the sought after apartment is no longer available.

Participants almost unanimously agreed that the largest contributor to their poverty is the fact that such a large portion of their income is dedicated to paying rent. This expense is only partly mitigated by cohabitating with

family members, a solution which many participants said leads to tensions with the landlord. Many focus group participants are unsure about the laws that govern landlord and tenant relations, and do not know where to find out about them.

**C. Health Care:** Most focus group participants are also unsure about the legal and financial consequences associated with using the emergency room, primary health care offices and dental offices. Though many participants share their often conflicting rumors about these issues, they lack an authoritative source of reputable civic/legal information. Many residents fear that failing to promptly pay certain medical bills, or even going to the hospital emergency room without payment in hand, can adversely affect their immigration status. The combination of both the fears and costs associated with going to the hospital, doctor, or even the dentist makes many focus group participants use these services as a very last resort.

**D. Literacy:** Participants as a whole feel that utilizing the language classes available in the area makes communicating with health professionals about the above mentioned topics much easier. Very few area health professional speak Spanish.

**E. Youth Crime & Gangs:** Participants feel very safe in the Kennett Square area. Crime is not very prominent. Participants have noticed an increase in gang presence in the area. After the focus group, one participant privately mentioned that he was loosely affiliated with a large gang with origins in Central America. He said that most gang influence comes from Wilmington, Washington D.C., and Philadelphia. He also mentioned that many gang members who move to the Kennett Square area do so to escape the gang life.

Other focus group participants feared that once they moved to the United States they would lose their children to the “new gang culture.” Many were thankful for the after-school activities, without which many parents said they could not cope. Quite a few focus group participants who are also parents had not heard of those after-school activities.

**F. Transportation:** Public transportation is a problem, as it is difficult to obtain employment outside of the area or travel out of Kennett Square. Participants mentioned that most of what they needed could be found in Kennett Square. Leaving Kennett Square to find employment, attend a medical appointment, or visit family members is very difficult. As a result, many group participants say they have not left the area in years.



## **VIII. Oxford Community Leaders Focus Group**

**A. Summary:** This focus group of Oxford-area residents was attended by approximately 20 community leaders who work in various areas of public and non-profit service. A majority of the concerns that were voiced from the participants arise from the fact that Oxford is geographically removed from larger areas such as West Chester and Kennett Square. This affects issues of transportation, activities for youth,

drug use, employment, and access to health care (dental and medical) outside of the area. Other issues not related to geographic isolation, but of serious concern to the focus group participants, were illiteracy, domestic violence, and the high cost of housing; the latter labeled by two focus group participants as a “crisis”.

**B. Housing and Homelessness:** As in other areas of Chester County, many indigent Oxford residents find that an enormous part of their monthly income must be dedicated to housing costs. Many families are forced to live together. Landlord tenant tensions are frequent. Moving costs are often prohibitive.

Participants mentioned that many people move to the Oxford area to avoid an even higher cost of living in areas of Chester County. The population increase aggravates the already serious housing problem. As a result homelessness is increasingly a problem. The shelters that might be able to accommodate a homeless person are in Lancaster, West Chester and Coatesville and vacancy is not guaranteed. One focus group participant mentioned that homeless people often have to be placed in hotels until a shelter becomes available. One participant mentioned that the library accommodates a growing number of homeless people during the day. The same difficulties encountered when attempting to find a shelter for a homeless person are faced when trying to place a victim of domestic violence in a safe shelter. Transportation to these shelters is also very difficult for any person that lacks a car.

**C. Health Care:** Though there are some health professionals in the area, some participants mentioned that more often than not people need to go to larger towns to obtain health care. For many indigent

residents of Oxford this is difficult. Access issues include lack of public transportation and lack of translation services. Two focus group participants mentioned that many health care providers are “cracking down” and denying services to patients with outstanding bills. To families with many children or with pregnant women this is especially problematic.

**D. Activities for Teens and Drug Use:** Focus group participants mentioned that in many cases children in Oxford lack activities. Some focus group participants noticed many Latino children identifying with gang culture (though not actual gang membership) and credit it to boredom.

Many activities for youth do exist, though often too far away from Oxford. Teen drug use is also a problem in the Oxford area for the Latino and non-Latino population and focus group participants suggested it was because of those same reasons. Police report seeing a lot of drugs among youth, namely intravenous heroin, crack and cocaine. Marijuana is also ubiquitous.

**E. Mental Health:** Treatment for drug abuse or other psychological treatment for the undocumented community is nearly non-existent. One focus group participants that works with indigent Latino families estimated that 60% of Latino families in Oxford are undocumented and that national rates of depression among undocumented mothers is extremely high. Oxford lack resources to properly address the mental health needs of the community, particularly those of the undocumented community.

**F. Gangs:** Though gang culture is visible amongst the Latino youth in the Oxford area, Oxford has actual gang problems from motorcycle gangs with affiliations with national groups such as the “Hells Angels”

and the “Pagans,” and some less visible Klu Klux Klan membership. Lack of interracial communication brings a strong element of racial tension to Oxford.

**G. Inclusiveness in Social Services:** Many Latino and non-Latino residents struggle to meet their most basic needs (food, clothing). Those non-profit and religious organizations that help residents meet those needs often find it difficult to make the non-Latino community aware that services are available for them also. Some participants noted that the overwhelming presence of the Latinos at places that provide some kind of social service often lead non-Latinos to incorrectly assume they are excluded.

## **IX. Oxford English Speaking Users Focus Group**

**A. Summary:** The participants of this Oxford area focus group were mostly senior citizens. As a result, their participation centered on issues facing seniors in the Oxford area. These issues include the cost of prescription drugs, transportation, activities for seniors, depression and mental health, homelessness. Understanding how to navigate the paperwork associated with prescription drug plans, Medicare Part D, welfare, and disability claims are problematic.

**B. Cost of Health Care:** One focus group participant said that he and his friends struggle substantially with affording the costs associated with chronic medical conditions such as diabetes, depression, and high blood pressure. He mentioned that while some of the costs of medication and medical equipment are covered, many are not. For example, the participant stated that his insulin costs are covered but the needles needed to deliver the insulin are not. Finding places that give discounted

prescription drugs or free samples is becoming increasingly difficult. The focus group unanimously agreed that keeping up with appointments, paperwork, applications to be considered for free samples, appealing denial of coverage notices from insurance companies, and filing for disability was very difficult for many seniors. The area “Adopt-a-Friend” program helps seniors to better confront some of these issues, but participants agreed that number of seniors in need of help is overwhelming.

**C. Transportation:** Obtaining reliable health care proves very difficult for seniors of limited means. Many doctors are far away. The public transportation that does exist is very unreliable. Participants mentioned that the “Rover” service that provides transportation is inundated with calls awaiting the Rover service, and the wait is very long.

**D. Cost of Medications:** Without the “Adopt-a-Friend” program many seniors would not be able to keep appointments or arrive at the pharmacy with regularity. The “Adopt-a-Friend” program is rapidly losing volunteers. When generic drugs are not available, and the cost of brand name drugs is so much that seniors must figure out other “solutions.” Many seniors resort to skipping dosages to stretch out their medication for longer periods of time or taking other medications not designed for their specific condition.

The cost of prescription drugs for those with chronic illness is such that one participant referred to it as “almost as much as rent.”

**E. Housing and Homelessness:** Housing in the Oxford area is already expensive and difficult to find. A typical monthly rent for a one-bedroom apartment in the area can be \$500/month. Finding that apartment is also

a challenge, as they are in such high demand and relatively short supply.

Focus group participants said that as a result, they have observed a number of people that seem to be homeless spending all day in the library and all night in Wal-Mart, and or McDonald's and sleeping in their cars. Options for homeless people are limited and far from Oxford.

## **X. Oxford Latino Users Focus Group**

**A. Summary:** This focus group was attended by approximately 50 people and was conducted in Spanish. The focus group was prompted with a list of issues. The issues about which participants contributed the most were immigration, cost and availability of health care, childcare, employment, and transportation. Additionally, many basic needs were not met such as clothing and home heating costs.

Many of the group's commentary on priority unmet needs centered on concerns about immigration. This includes health care costs, the legalities associated with use of the hospital emergency room, and fears about the trajectory of national immigration policy.

**B. Health Care:** Many focus group participants commented that the whole experience of using the health care system was difficult, daunting, and expensive. This includes primary care physician visits, ambulance use, emergency room visits, hospital stays, and dental appointments. Quite a few participants mentioned that local physicians will not see a patient unless s/he has cash to pay in advance. Also participants fear that the whole process of visiting a hospital emergency room will result in adversely affecting their immigration status should they be unable to pay the bill immediately and in full.

Obtaining dental care for children is equally as problematic. Though some focus group participants did know of a free dental clinic, it is not in the area and is very difficult to get to. In general, among the focus group participants there were many rumors, with varying degrees of truth about immigration laws and civil rights.

**C. Transportation:** Transportation, be it to dental clinics, doctors' appointments, or potential job opportunities, is troublesome. There is no public transportation to places outside of the Oxford area that participants know of. Many families present discussed how up to three or four families share a car with one another, so as to enable the men to share it to go to work. When the women who stay home with children need the car for a medical appointment, it requires reserving the car months in advance and saving money for months in advance to pay the bill.

**D. Employment:** Similar strategies are needed to search for jobs outside of the Oxford. Without alternative strategies, feasible employment opportunities are limited to the area immediately in or around Oxford. Nearly all of the focus group participants agreed that as a community they are very willing to work and accept any jobs offered to them. But the difficulty is in both finding work and in being able to reliably get to work--an accomplishment that many participants stated is often impossible when many families share one car.

**E. Childcare:** Mothers overwhelmingly mentioned that they are often prohibited from working locally because they have to stay home with children. Many mothers remarked that children with two working parents lack supervision and activities. When asked about after-school activities, either as part of the school program or

otherwise, only a few focus group participants knew of them. Of those few, only one child participates. Some participants remarked that those programs have fees associated with them that were prohibitive.

**F. Mental Retardation and/or Special**

**Needs:** Several focus group participants noted that they know of no special resources for children with mental retardation. They are extremely curious as to what options are available in terms of special education, employment, health care, and specialized childcare.

**G. Care for Seniors:** Not one of the families present have a senior in a nursing home or are considering it. All of the participants mentioned that seniors in their families stay home and, when possible, take care of children. When seniors get too old to take care of children and require care themselves, every participant agreed that it demanded that another member of the family remove him/herself from the workforce to care for the senior during the day.

**H. Basic Needs:** When asked about basic needs, many participants mentioned that the winter time is most difficult. Heating costs often make families wear winter coats indoors when their heat is shut off, or to keep costs down to prevent a shut off. Most participants do not know of any places other than the church to go and ask for assistance with utility bills. Many participants also rely on the churches' food and clothing drives for winter clothing and food when money is scarce. ###

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