

**Region:** ROSC Region 4

**Agency:** Hour House

**ROSC County:** Clark County

**Contacts:**

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**Purpose of the Community Resource Assessment:** This research details a community resource assessment and describes how resources were evaluated in the context of local needs. The evaluation of local resources is an important initial step in partnership development and is essential for the success of health promotion and disease prevention interventions.

<b><i>Leadership Center Agency:</i></b>	Hour House
<b><i>Type of Report:</i></b>	Community Needs Assessment- Clark County
<b><i>Setting:</i></b>	Rural
<b><i>Total Number of Residents:</i></b>	15,088
<b><i>Number of School-aged Youth:</i></b>	3,320
<b><i>Total Number of Schools:</i></b>	8
<b><i>Total Number of Institutions of Higher Learning:</i></b>	1
<b><i>Total Number of Treatment Facilities:</i></b>	0 inpatient treatment facilities in the county; 1 SUD outpatient provider in the county
<b><i>Total Number of Coalitions/ROSC Councils:</i></b>	1 ROSC Councils

United States Census Bureau QuickFacts, July 2023

**Demographics**

Revised February 2025

Clark County is predominately White alone at 97%. Hispanic or Latin account for 1.8%, African Americans alone 1.1% and Asian alone is 0.4%, American Indian and Native Alaskan alone 0.3%, and two or more races 1.2 (United States Census Bureau QuickFacts, July 2023).

Persons under the age of 5 years old accounts for 5.2%, persons 5-18 years old is 22%, ages 18-65 is 52.1% and ages 65+ is 20.7% (*Community Demographics Clark County IL, 2024*). Females account for 49.5% and males 50.5% of the population (United States Census Bureau QuickFacts, July 2023).

The median household income is \$69,826 with the persons in poverty rate at 11.2% (*Illinois State poverty Percentage map, Illinois Extension*). The number of households for 2019-2023 is 4,180 with the average persons per household being 2.45 (United States Census Bureau QuickFacts, July 2023).

With this data, it can be determined most of the population in Clark County is White, above average income, and between the ages of 18-65 years old.

## **Gap Analysis**

### **Purpose of the Gap Analysis:**

This document identifies and evaluates the current gaps from the Community Resource Assessment between their actual performance and identify potential/desired action steps/plans and strategies to fill these gaps.

### **Summary of Identified Gaps Across the Continuum (FY25):**

- 1. Health Promotion:** Lack of community readiness to address substance use disorder (SUD) issues; lack of awareness and understanding regarding SUD resulting in increased community stigma.
- 2. Prevention:** Lack of early intervention for at-risk populations leaves vulnerable individuals without the support to prevent substance use from escalating.
- 3. Intervention/Harm Reduction:** Lack of drug court in Clark County, lack of information regarding access to harm reduction programs and services.
- 4. Treatment:** Lack of access to transportation, lack of residential rehabilitation program access/waitlists, staffing shortages.
- 5. Recovery Supports:** Lack of recovery housing, lack of sober activities outside of 12 step meetings.

Point on Continuum	Identified Gap: Clark and Cumberland County	Ideas for Community Action Steps	Ideas for Partnerships with Outside Groups/Organizations	Ideas for Changes at the State Level- How can state funders help bridge this gap?
<b>Health Promotion</b>	Lack of education/community understanding regarding substance use, resulting in increased stigma.	Anti-Stigma Campaign efforts, community education events that are designed to address stigma and increase substance use knowledge, social media campaigns, recovery testimonies.	Promote and create partnerships for anti-stigma efforts and campaigns, partner with prevention teams and local health departments to provide SUD awareness information to the community.	Increase funding for public awareness initiative.
<b>Prevention</b>	Insufficient early intervention for at-risk populations.	Establish peer mentoring and school-based intervention programs	Schools & youth organizations (mentorship and after-school programs) Grades 3 <sup>rd</sup> -5 <sup>th</sup>	Increase funding for school-based prevention programs.
<b>Intervention/Harm Reduction</b>	Lack of local drug court (Clark).	Advocacy of local drug court to local judge, states attorney, public defender, probation, etc., gathering research on efficacy on drug courts,	Assessing buy-in of judicial system, bring in additional community resources to enhance knowledge on drug	AOIC Board has informational sessions on the start-up of a drug court, increase funding avenues: SAMHSA grants, Illinois Criminal Justice Information

		seek out funding sources		Authority (ICJIA) Grants
<b>Intervention/Harm Reduction</b>	Need for increased health promotion around harm reduction programs and services.	Social media posts with places in the community to access harm reduction materials and services.	Working with partnering agencies to share social media posts and physical flyers.	Updated statewide list of harm reduction services and materials.
<b>Intervention/Harm Reduction</b>	Increase awareness of public access to free Narcan.	The usage of physical flyers in the community to promote harm reduction materials and services.	Partner with local health departments and other agencies to provide Narcan trainings.	Increase funding for harm reduction supplies for both counties.

Point on Continuum	Identified Gap: Clark and Cumberland County	Ideas for Community Action Steps	Ideas for Partnerships with Outside Groups/Organizations	Ideas for Changes at the State Level- How can state funders help bridge this gap?
<b>Treatment</b>	Lack of reliable transportation.	Creation of volunteer-based model: work with local organizations and coalitions to identify driver volunteers, expansion of public bus system operation hours.	Potential partnerships with church buses, potential partnerships with HRC and their transportation vans.	Expansion of transportation service contracts, implementation of a free loop service.
<b>Treatment</b>	Lack of access to treatment due to waitlists & staff shortages for outpatient treatment	Increase workforce capacity by launching targeted recruitment campaigns, offer training programs to local residents to become paraprofessionals or certified aides, supporting trained staff in their duties and easing the burden on licensed professionals	Building partnerships with other treatment agencies for referrals.	Funding towards local providers to increase staffing and overall supports, fund more community-based treatment centers.

Point on Continuum	Identified Gap: Clark and Cumberland County	Ideas for Community Action Steps	Ideas for Partnerships with Outside Groups/Organizations	Ideas for Changes at the State Level- How can state funders help bridge this gap?
<b>Recovery</b>	Lack of recovery housing.	Increase understanding of the various types of housing, examine tax incentives, getting community buy-in, explore funding opportunities.	Local business & workforce agencies (recovery-friendly hiring), partnerships with recovery-oriented agencies to provide services, housing authorities and real estate developers (sober living options).	Employer/landlord incentives, increased funding for recovery homes.
<b>Recovery</b>	Lack of sober activities outside of 12 step meetings.	Work with PLEs to plan sober events on a regular basis, develop a community calendar.	Partner with local businesses (coffee shops, gyms, etc.), engage local organizations and community centers.	Establish and fund statewide sober activity programs, expand state funding for recovery-focused education and skill-building, provide grants to local community organizations.

### Continuation of Gap Analysis (paragraph form)

One of the most significant issues is the stigma surrounding SUD, which creates barriers for individuals seeking help. Many community members view substance use as a moral failing rather than a medical condition, leading to discrimination, shame, and reluctance to access necessary services. This stigma is further compounded by a general lack of community readiness to address SUD, as there is insufficient awareness, advocacy, and coordinated efforts to implement effective solutions. The ROSC community survey question, "**People who use drugs deserve respect,**" and its responses highlight the presence of stigma in the community. Based on the data, a significant portion of respondents either disagreed or remained neutral on this statement. While **38.5% strongly agreed and 32.1% agreed**, indicating a positive perspective, **24.9% remained neutral**, and a smaller but notable percentage disagreed. The presence of neutrality and disagreement suggests that some individuals in the community may still hold stigmatizing beliefs toward people who use drugs, possibly seeing substance use as a moral failing rather than a health issue.

The lack of early intervention for at-risk populations, including youth and individuals with co-occurring mental health disorders, poses a significant barrier to preventing the escalation of substance use disorders, as timely outreach, education, and screening are essential for effective prevention. Without proactive outreach, education, and screening, many individuals do not receive the necessary support before substance use escalates into a severe disorder. The ROSC community survey question, "**Everyone in my community can get help for substance use regardless of income level, insurance status, race, ethnicity, primary language, disabilities, gender identity, sexual orientation, or citizenship status,**" and the responses indicate that early intervention is a significant gap in the community. A combined **34.3% of respondents (12.3% 'Strongly Disagree' and 22% 'Disagree')** believe that barriers exist in accessing substance use help, which suggests that many individuals—especially those from marginalized groups—may not receive the early intervention services they need. Additionally, **30.4% of respondents selected 'Neutral,'** indicating uncertainty or a lack of awareness regarding available

The absence of a drug court limits alternative pathways to rehabilitation for those involved in the criminal justice system. Instead of being offered treatment and recovery support, individuals struggling with SUD often face punitive measures that fail to address the root causes of their substance use. The survey question regarding drug courts and the responses suggest that community members recognize the potential benefits of having a drug court. With **79.4% responding "Yes,"** the majority of participants acknowledge that drug courts provide individuals with substance use disorders an opportunity to access long-term recovery support instead of facing

traditional legal consequences. This indicates strong community awareness of the role drug courts can play in diverting individuals from incarceration toward treatment-focused alternatives. However, **16.1% of respondents stated they "Don't know,"** which suggests that some community members may not be fully informed about how drug courts operate or their benefits. A small percentage responded "No," which may reflect skepticism about their effectiveness or a belief that other approaches are more suitable. Overall, the overwhelming support for drug courts implies that the community sees a need for such a program, reinforcing the gap in local judicial options for individuals with substance use disorders. Establishing a drug court could address this need by providing a structured, rehabilitative pathway for those facing legal and recovery-related challenges. Additionally, increased education about drug courts could help inform those who are uncertain about their role in promoting recovery and reducing recidivism.

Transportation barriers further exacerbate the issue, making it difficult for individuals to access healthcare, treatment centers, and support services. Many who need assistance are unable to travel to the nearest available resources, leading to delayed or forgone treatment. Additionally, the community lacks a residential rehabilitation program, leaving individuals with few options for intensive, structured recovery support. Without such programs, those in need of long-term care are often forced to seek treatment outside the community, which can be both costly and logistically challenging. The ROSC community survey question, **"I have access to reliable transportation in my community,"** and the responses indicate that transportation is a gap for a portion of the population. While **71.4% responded "Yes,"** meaning they do have reliable transportation, a significant **17.8% responded "No,"** and **10.8% indicated "I don't know."** This means that nearly **one-third of respondents either lack transportation or are uncertain about their access to it.** The presence of individuals who struggle with reliable transportation suggests that some community members may have difficulty reaching essential services, including substance use treatment, harm reduction programs, recovery meetings, and employment opportunities. The **"I don't know"** responses may indicate a lack of awareness about available transportation options, further emphasizing the need for better communication and resources. This gap highlights the need for solutions such as expanded public transportation, shuttle services for treatment and recovery programs, or financial assistance for transportation to ensure individuals can access critical services. Addressing this barrier would improve engagement in treatment and recovery efforts, ultimately supporting better outcomes for individuals struggling with substance use disorder.

The absence of recovery housing presents a major obstacle for individuals transitioning out of treatment, as stable and supportive living environments are crucial for maintaining sobriety and preventing relapse. The ROSC community survey question, **"Would having more recovery housing options in your community be beneficial for individuals in recovery from substance use challenges?"** and its responses clearly indicate a need for expanded recovery housing. A significant **80.7% of respondents answered**



'Yes,' demonstrating strong community support for additional recovery housing options. Meanwhile, **15.7% of respondents selected 'I don't know,'** which may suggest a lack of awareness about the role of recovery housing in sustaining long-term sobriety. A small percentage responded 'No,' which could reflect differing opinions on the necessity of such programs or confidence in existing housing options. Overall, the overwhelming support for more recovery housing highlights a gap in available resources for individuals transitioning from treatment to stable, sober living environments. Addressing this need could improve long-term recovery outcomes by providing safe, supportive housing, reducing relapse rates, and fostering a stronger recovery community.

The scarcity of sober activities also limits opportunities for individuals to engage in healthy, substance-free social interactions, increasing the risk of relapse. Addressing these gaps is crucial to building a community that fosters prevention, treatment, and sustained recovery for individuals struggling with substance use disorder. The ROSC community survey question, "**Are there events or activities in your community that are welcoming to individuals who prefer a substance-free environment?**" and the responses highlight a need for more sober activities in the community. While **53.9% of respondents answered 'Yes,'** indicating that some substance-free events exist, a significant portion of the population remains uncertain or does not see enough options available. Notably, **15.3% of respondents said 'No,'** directly stating that there are not enough welcoming sober activities. Additionally, **30.8% selected 'I don't know,'** suggesting a lack of awareness or visibility of such events. This uncertainty could indicate that even if sober activities are available, they may not be well-promoted or accessible to those seeking them. These findings emphasize the need to expand and promote substance-free recreational and social opportunities. Increasing sober activities can provide individuals in recovery with positive, supportive environments that encourage community engagement and long-term sobriety. Addressing this gap could involve organizing more sober-friendly events, increasing awareness of existing programs, and fostering inclusive community spaces for individuals seeking substance-free social connections.

### **SWOT Analysis:**

#### Strengths:

- Community connections.
- SUD Treatment/Mental Health Treatment Organization

- Several 12 step groups.
- Educational groups provided in the jail by Kyle Houser/Recovery Navigator.
- Strong recovery community.
- Ability to create substantial relationships within the community as a whole.

Weaknesses:

- Rebuilding community relationships/creating long standing rapport.
- Reducing stigma with law enforcement & county officials.
- Lack affordable and reliable public transportation.
- Community readiness is unstable in regard to SUD.
- Lack of Sober Activities outside of 12-step programs.
- Lack of recovery housing.

Opportunities:

- Acceptance of people with a SUD (destigmatizing in the community).
- Community education and awareness.
- Development of Recovery Housing.

Threats:

- Lack of knowledge and education of SUD.
- Lack of early intervention and prevention.
- No SUD Level 3.5 facility within county limits.
- Stigma.
- Lack of funding for community programs.

**Community Readiness**

Throughout FY25, the ROSC Council has been able to make effective and substantial strides in raising awareness of substance use

disorder and Recovery in the forms of family-oriented events, presentation to key stakeholders, and continuous outreach to members and organizations of Clark County. Although strides have been made, opposition to this topic is still extensive due to generational beliefs, hardened ideas due to work environments, and the hurt caused within families due to the nature of this disease. Stakeholders with community power are weary of prevention and harm reduction efforts. Community members lack the education or awareness of substance use disorder as well as access to local resources. Even so, Council members and PLEs have been willing to share their experiences with substance use disorder within their families or themselves with faith-based leaders, local businesses, and other organizations helping to break down barriers to conversations surrounding this sensitive topic—which is where it starts.

### **Priorities for Expansion/Technical Assistance for Expansion**

The Clark/Cumberland County ROSC has identified key strengths, challenges, and opportunities through our SWOT analysis. Expanding recovery support services in our community requires sustained commitment from stakeholders, strategic outreach, and resource development. While our strong community connections, engaged recovery network, and presence of treatment organizations provide a solid foundation, barriers such as stigma, limited transportation, and a lack of recovery housing hinder progress. Building relationships with law enforcement and county officials remains a priority. Additionally, gaps persist due to the absence of stable community readiness, early intervention programs, and a local Level 3.5 SUD treatment facility. To overcome these challenges and strengthen recovery support, we will focus on the following measures:

- Strengthen and expand community connections to enhance collaboration and support for recovery initiatives.
- Increase engagement with law enforcement and county officials to reduce stigma and build trust.
- Improve community awareness and education on SUD through targeted outreach and training sessions.
- Advocate for and support the development of recovery housing to address the current gap in resources.
- Identify and promote sober activities outside of 12-step programs to provide diverse recovery support options.
- Address transportation barriers by exploring partnerships or volunteer-based solutions to increase accessibility.
- Share evidence-based research with under-involved sectors to foster broader support and understanding.