

**FY 2022-2023 SUMMARY REPORT OF THE
HOKE COUNTY RISK AND NEEDS ASSESSMENT COMMITTEE**

- I. Community Factors**
- II. Family Risk Factors**
- III. Individual Risk Factors**
- IV. School Level Risk Factors**
- V. County Risk and Needs Assessment and YASI Summary: FY 20-21**
- VI. Summary of the Existing Community Resources**
- VII. Summary of Gaps and Barriers in the Community Continuum**
- VIII. Proposed Priority Services for Funding**

I. Community Factors

Total Populationⁱ

52,082 - 48.2% White; 36.5% Black or African American, 10.5% American Indian; 2.4% Asian; 0.6% Native Hawaiian; 7.7% Hispanic or Latino.

Median Family Incomeⁱⁱ

- Hoke County median annual income of \$48,072 is less than the median annual income in the United States \$62,843 and North Carolina \$54,602.
- Hoke County per capita income of \$20,991 is less than the per capita income of the United States \$34,103 and North Carolina \$30,783.
- Hoke County poverty rate is 20.4% which is higher than the United State rate of 13.4% and the state rate of 14.7%

County Employment Dataⁱⁱⁱ

Hoke County has a labor rate force of 20,048 with 1,568 unemployed produces an unemployed rate of 7.8% which is higher than the state rate of 6.1%.

Health Department Data^{iv}

- Hoke County reported the following number of Syphilis cases: 7 cases (2020), rate 12.5% per 100,000 population; 10 cases (2019), rate 18.1% per 100,000 population.
- In 2020 there were 154 Gonorrhea cases with a rate of 275.8% compared to were 182 cases with a rate of 329.9% reported in 2019.
- Chlamydia cases reported in 2020, 351 cases with a rate of 628.7% compared to 423 cases with a rate of 766.8% reported in 2019.
- Number of HIV Reports (2018, all ages): 8

Teen Pregnancy ^v

In 2018, Hoke County ranks 23 in the State for Adolescent Pregnancies which is an + 2% change since 2017. Hoke County adolescent pregnancy rate (ages 15-19) is 33.4% compared to the North Carolina rate of 24.6% per 1000 population.

II. Family Risk Factors ^{vi}

- In 2018, Hoke County had 23.0% of children live in households that are food insecure and struggle to provide consistent and adequate nutrition. 53.3% of children live in poor or low-income homes, a significant risk factor for children’s academic and health success.
- In 2019, Hoke County had 81.5 rate per 1,000 for children assessed for abuse or neglect compared to 60.3 rate per 1,000 in 2018.

III. Individual Risk Factors ^{vii}

Table D4. High School Dropout Counts and Rates, 2018-2019 and 2019-2020*.

LEA Code	LEA or Charter School	Counts			Rates	
		2018-19	2019-20*	% Difference	2018-19	2019-20*
470	Hoke County	35	34	-2.9%	1.46	1.41

*While the data reported covers the full 2019-2020 academic year, caution should be taken when making comparisons to previous years. After the March 16th, 2020 school closure, there were significant reductions in the number of incidents of Crime and Violence, Suspensions, Alternative Learning Placements and withdraw dates for verified dropouts when compared to the same time frame in the prior school years.

DPS_DIJ FY 20-21 System Flow Data

COUNTY	JUVENILES_AT_INTAKE	JUVENILES_PUT_ON_PLAN_CONTRACT	JUVENILES_APPROVED_FOR_COURT	JUVENILES_ADJUDICATED	JUVENILES_PUT_ON_PROBATION	DETENTION_ADMISSIONS	JUVENILES_COMMITTED	JUVENILE_S_PUT_ON_PRIS
Hoke	68	17	26	19	18	13	0	1

COMPLAINTS RECEIVED BY COUNTY: FY 17-18 TO FY 20-21												PERCENTAGE OF TOTAL COMPLAINTS RECEIVED THAT WERE SCHOOL-BASED: BY COUNTY				
County	FY 17-18			FY 18-19			FY 19-20			FY 20-21			FY 17-18	FY 18-19	FY 19-20	FY 20-21
	Not School-Based	School-Based	Total	Not School-Based	School-Based	Total	Not School-Based	School-Based	Total	Not School-Based	School-Based	Total				
State Total	15,549	11,292	26,841	12,220	10,201	22,421	19,778	8,593	28,371	23,174	2,364	25,538	42%	45%	30%	9%
Hoke	93	85	178	116	90	206	191	59	250	258	9	267	48%	44%	24%	3%

IV. School Level Risk Factors^{viii}

Table S7. 2019-2020* Short-Term Suspension Statistics for Schools in LEAs

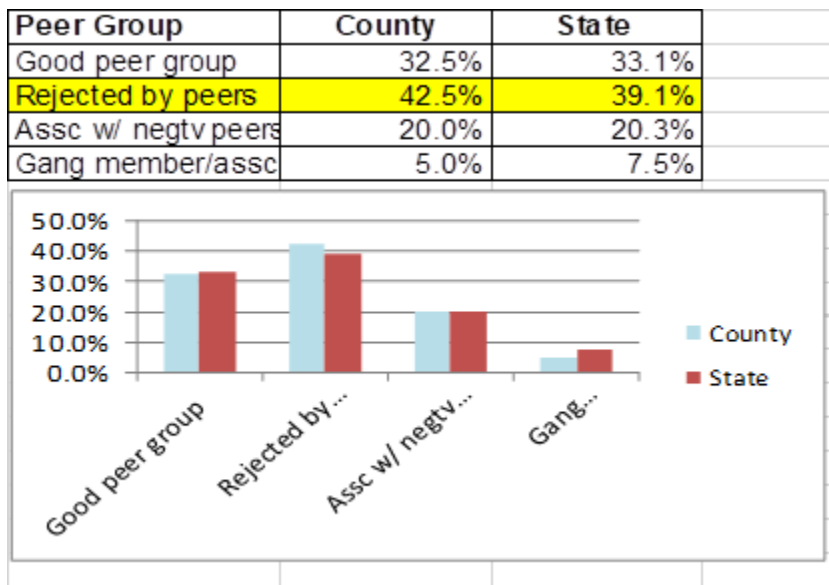
LEA Code	School Code	LEA Name	School Name	Final ADM	# of STS	Total STS Days	Days per STS	STS per 100 Students	STS per 1000 Students
470	000	Hoke County Schools	LEA Total	8722	979	2,460	2.51	11.22	112.24
470	310	Hoke County Schools	Don D Steed Elementary	629	46	59	1.28	7.31	73.13
470	312	Hoke County Schools	Hoke County High	1830	334	1,070	3.20	18.25	182.51
470	316	Hoke County Schools	J W McLaughlin Elementary	277	8	9	1.13	2.89	28.88
470	320	Hoke County Schools	West Hoke Middle	589	69	137	1.98	11.71	117.15
470	328	Hoke County Schools	Scurlock Elementary	644	16	27	1.69	2.48	24.84
470	330	Hoke County Schools	Hawk Eye Elementary	393	24	35	1.46	6.11	61.07
470	332	Hoke County Schools	East Hoke Middle	732	173	367	2.12	23.63	236.34
470	336	Hoke County Schools	West Hoke Elementary	453	31	65	2.10	6.84	68.43
470	340	Hoke County Schools	Rockfish Hoke Elementary	743	14	16	1.14	1.88	18.84
470	342	Hoke County Schools	J W Turlington School	73	121	367	3.03	165.75	1657.53
470	346	Hoke County Schools	Upchurch Elementary	636	19	46	2.42	2.99	29.87
470	441	Hoke County Schools	Sandy Grove Elementary	564	41	75	1.82	7.27	72.70
470	442	Hoke County Schools	Sandy Grove Middle	741	77	182	2.36	10.39	103.91
470	443	Hoke County Schools	SandHoke Early College High	418	6	7	1.17	1.44	14.35

*While the data reported covers the full 2019-2020 academic year, caution should be taken when making comparisons to previous years. After the March 16th, 2020 school closure, there were significant reductions in the number of incidents of Crime and Violence, Suspensions, Alternative Learning Placements and withdraw dates for verified dropouts when compared to the same time frame in the prior school years.

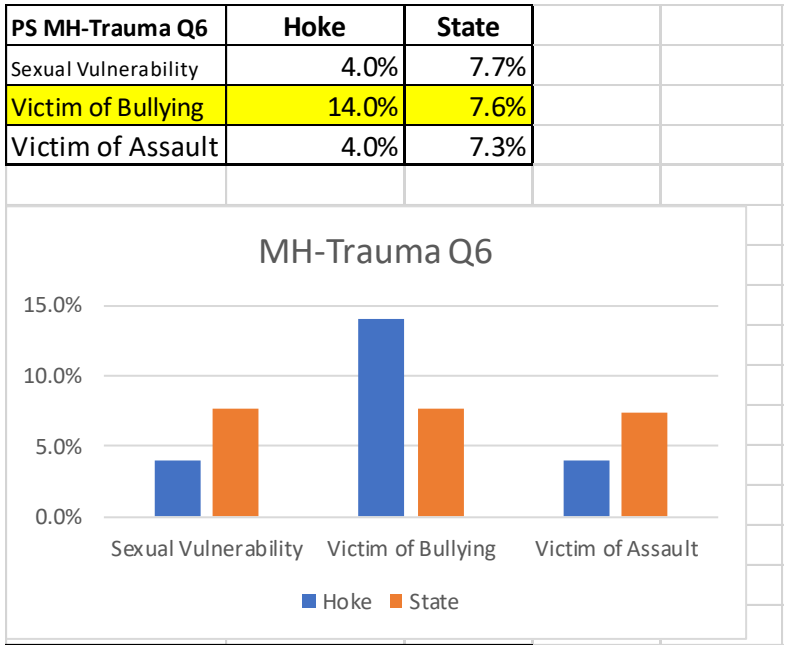
V. County Risk and Needs Assessment Summary: FY 20-21^{ix}

PEER DOMAIN

1. **Peer Relationships- 42.5%** of youth are rejected by their peers which is higher than the state rate of 39.1%.

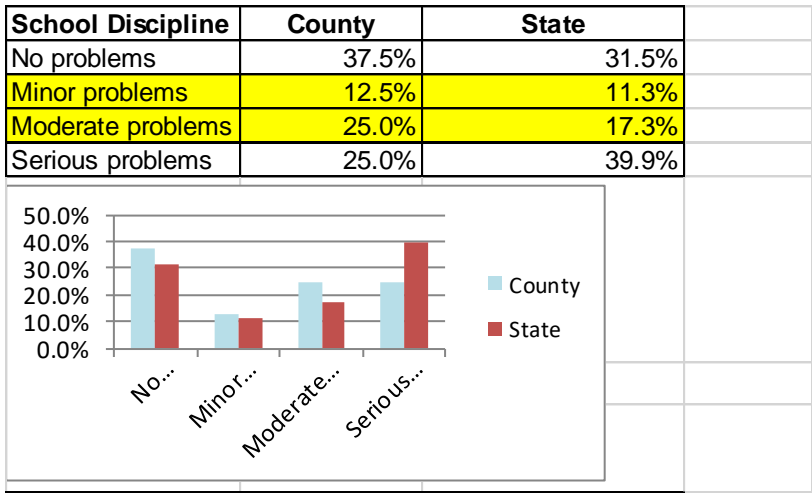


2. **Mental Health Trauma** – 14% of the youth reported being a victim of Bullying which is almost double the state rate of 7.6%.



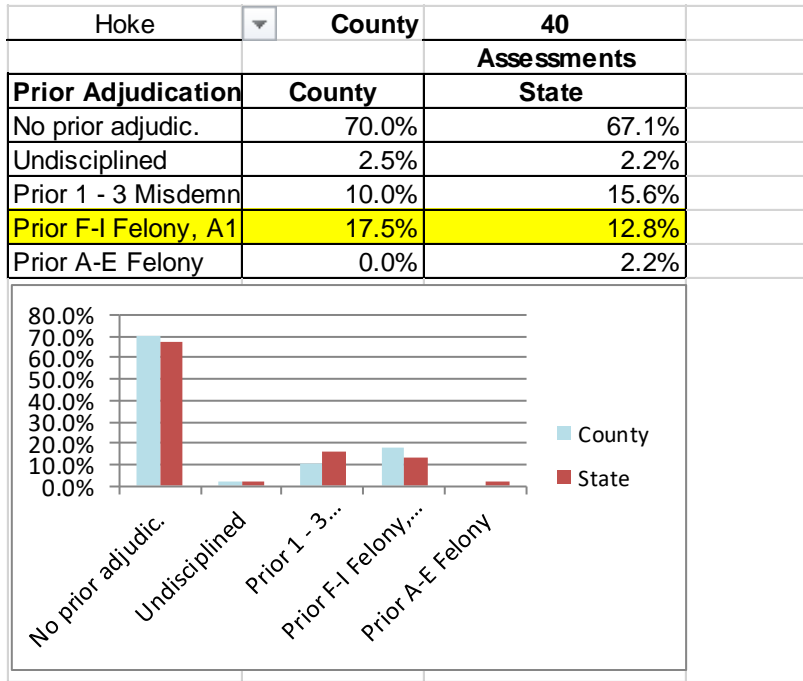
SCHOOL DOMAIN

1. **School Behavior Problems**- 37.5% of youth reported having Minor-Moderate School Behavior Problems.

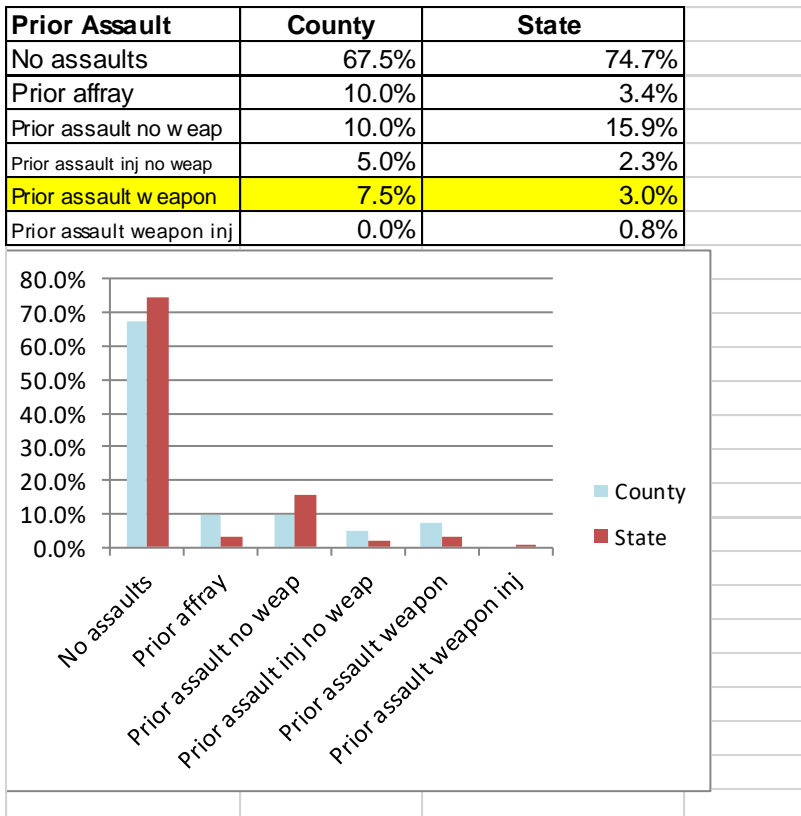


INDIVIDUAL DOMAIN

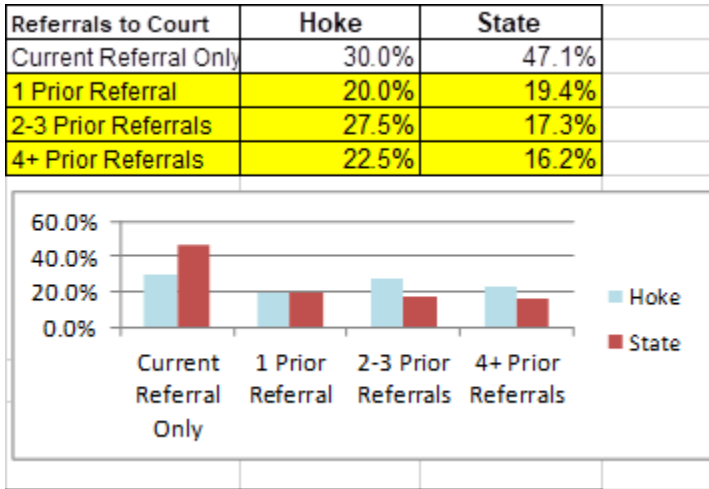
1. **Delinquent History-** 17.5% of the reported prior offenses are Serious A1 Misdemeanor and Felony F-I.



2. **Prior Assaults** – 7.5% of youth reported having committed an assault with a weapon.

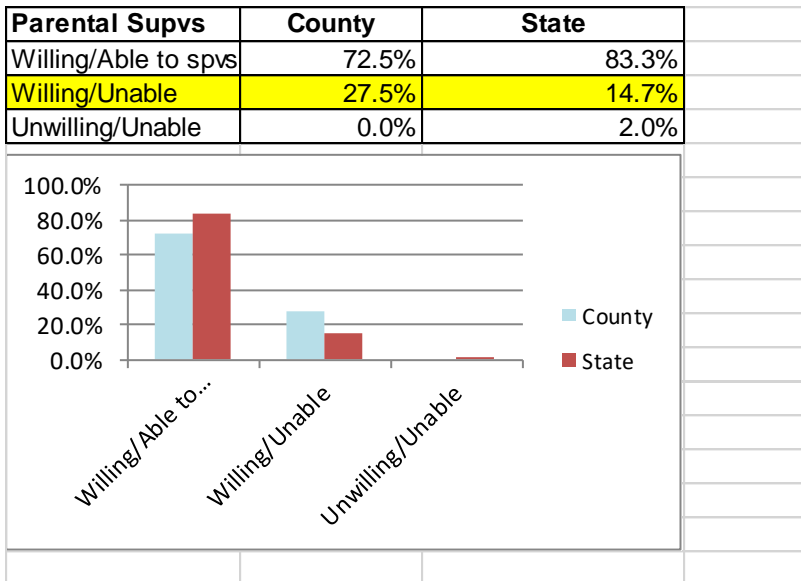


3. **Prior Referrals to Court** – 70% of the youth reported having a prior referral to court with 22.5% having 4 or more referrals.

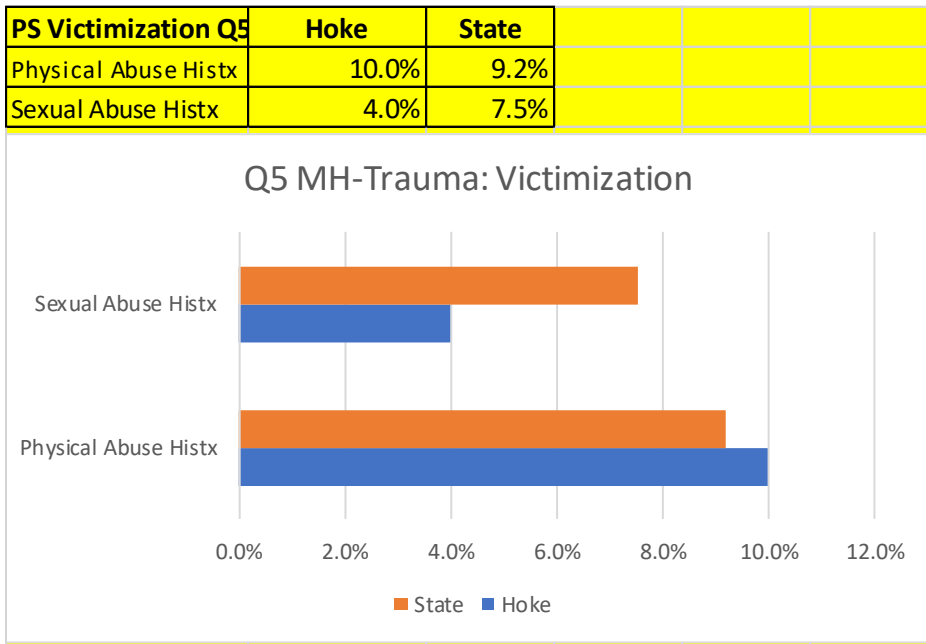


FAMILY DOMAIN

1. **Family Supervision Skills**- **27.5%** parent/guardian/custodian reported willingness but being unable to supervisor their children..



2. **Family Victimization- 10%** youth reported being physically abused by their parents or siblings.



VI. Summary of the Existing Community Resources

STRUCTURED ACTIVITIES- Any non-residential program that provides a structured service plan of learning for the purpose of improving an individual’s identified need(s) and with the purpose of improving the juveniles’ (or parent’s) skills or expanding their knowledge in a particular area or enhancing academic performance.

1. **Road To Success Mentoring Program** (JCPC Funded)
2. **Hoke County Teen Court** (JCPC Funded)
3. **Local Parks and Recreation Athletic Programs**
4. Middle/High School Athletic Programs & Clubs
5. **Parents as Teachers** – parents of children 0-5 provided by Hoke County Cooperative Extension.
6. **Strengthening Families** – Adults who are court-ordered or referred by Hoke County DSS provided by Hoke County Cooperative Services.
7. **Triple P Positive Parenting Program** – Serves families with children ages 0-12, currently provided by Hoke County Health Department.

RESTORATIVE PROGRAMS- Programs that offer immediate and short-term involvement with juveniles to focus on negative and/or offending behaviors with the aim of resolution of the presenting problem and extinction of behavior.

1. **RTS-Youth Engage in Services** (JCPC Funded)
2. **Hoke County Teen Court** (JCPC Funded)

COMMUNITY DAY PROGRAMS- Programs that offer well supervised and highly structured program of service to youth. Such service may enable youth to remain in the community. Clients may be long-term suspended from school or have behavior that might otherwise result in placement in detention. Typically, this type structure serves youth who are court involved and referrals are made from juvenile court counselors. Programs can either be full day or partial day (emphasis on service in the afternoon/after school hours). It is

desirable for programs to have both treatment and educational components, such as, Individual and/or Family Counseling, Substance Abuse Education/Treatment, Restitution/Community Service, Tutoring, Alternative Education, Vocational Development and Structured Activities.

1. Rebuilding the Dream Youth Structured Day Program (JCPC Funded)

ASSESSMENT SERVICES-Clinical Evaluations and Assessments, including Psychological Evaluations to help court counselors and judges recommend the most appropriate consequences and treatment for court involved youth.

- 1. Diagnostic Assessment Services (Sandhills MCO/LME)**
- 2. The Haymount Institute** – psychological testing, psychiatry, medication management, counseling.

CLINICAL TREATMENT SERVICES-Programs in which a professional helps a juvenile and/or his or her families solve problems through goal directed planning. It may include individual, group, family counseling or a combination. It may have a particular focus such as sex offender treatment or substance abuse treatment. Services may be community or home based.

- 1. Daymark Recovery Services** – Metal Health, Substance Abuse, Trauma-focused and cognitive behavioral therapy, family therapy, medication management.
- 2. Greater Visions** – Mental Health, Substance abuse, drug testing, Trauma-Focused therapy, Family therapy.

RESIDENTIAL PROGRAMS-Programs where services are delivered in a residential setting.

- 1. Eckerd Residential Services-** serves on average 48 youth a day who have received Level II dispositions at two short-term juvenile justice residential facilities where youth receive a complete rehabilitative experience delivered in an average of 90 days.
- 2. Methodist Home for Children Residential Services-** operates five multipurpose juvenile group homes across the state. The homes address antisocial behaviors through implementing a social and life skills curriculum that is individualized for each youth. MHC also operates a transitional home for youth exiting youth development centers who cannot return to their home communities due to gang violence or family disorder. The transitional home provides youth with independent living skills to assist them when they leave the home and begin living on their own
- 3. Level II Foster Care and Level III Therapeutic Foster Care (DSS/MCO funded)**
- 4. Craven Transitional Home (DJJ state contract funded)**
- 5. Level IV PRTF-(Medicaid funded)**
- 6. Dillon Assessment Center (DJJ state contact funded)**
- 7. Tarheel Challenge Program**

VII. Summary of Gaps and Barriers in the Continuum of Services

- Lack of transportation continues to be a barrier to children having access to some services when transportation is not provided by a program.
- Children with no Medicaid or private insurance who are unable to obtain Mental Health Services.
- Lack of parental participation continues to be a barrier for children and families having access to services and no consequence/leverage on the parent for following through with recommended services.
- Not funding the current JCPC programs would create a gap in Restorative service, Structure Activities designed for Delinquent and At-Risk youth, and Community Day Programs.

VIII . Part V. Proposed Priority Services for Funding

Comparing the services needed to address the elevated Juvenile Risk Factors and Juvenile Needs with services currently available in the community. Services which are currently available in the community and sufficient to meet the needs of court involved youth or those youth most at risk for court involvement are not considered as a priority for JCPC funding.

The Committee proposes that the following services be approved as the funding priorities for FY 2022-2023

<input checked="" type="checkbox"/> Mentoring Services	<input checked="" type="checkbox"/> Restitution/Community Service	<input checked="" type="checkbox"/> Services Addressing Problem Sexual Behavior
<input checked="" type="checkbox"/> Parent/Family Skill Building	<input checked="" type="checkbox"/> Teen Court	<input checked="" type="checkbox"/> Group Home
<input checked="" type="checkbox"/> Interpersonal Skill Building	<input checked="" type="checkbox"/> Psychological Assessments	<input checked="" type="checkbox"/> Temporary Shelter
<input checked="" type="checkbox"/> Vocational Skills	<input checked="" type="checkbox"/> Counseling	<input checked="" type="checkbox"/> Runaway Shelter
<input checked="" type="checkbox"/> Experiential Skills	<input checked="" type="checkbox"/> Home Based Family Counseling	<input checked="" type="checkbox"/> Specialized Foster Care
<input checked="" type="checkbox"/> Tutoring/Academic Enhancement	<input checked="" type="checkbox"/> Crisis Counseling	<input checked="" type="checkbox"/> Temporary Foster Care
<input checked="" type="checkbox"/> Mediation	<input checked="" type="checkbox"/> Substance Abuse Prevention/Education	<input checked="" type="checkbox"/> Juvenile Structured Day

Respectfully submitted,

Tom Landry
 Community Needs Assessment Committee Chair
 11/15/2021

Sources

- ⁱ U.S. Census Bureau, 2020 Decennial Census. <https://www2.census.gov/programs-surveys/decennial/2020/data/>
- ⁱⁱ U.S. Census Bureau, American Community Survey (ACS) and Puerto Rico Community Survey (PRCS), 2019 ACS 5-Year Estimates. <https://data.census.gov/cedsci/table?q=Hoke%20County,%20North%20Carolina%20Income%20and%20Poverty&g=0100000US&tid=ACSST5Y2019.S1701&hidePreview=true>
- ⁱⁱⁱ NC Commerce’s Demand Driven Data Delivery (“D4”) system: <https://d4.nccommerce.com/LausSelection.aspx>
- ^{iv} (NC Department of Public Health Epidemiology Branch, 2016 HIV/STD Surveillance Report) <https://testyourwell.nc.gov/cd/stds/figures/2020-STD-AnnualReportFinal.pdf>;
- ^v SHIFT NC (Sexual Health Initiatives For Teens) is a statewide nonprofit leading North Carolina to improve adolescent and young adult sexual health. <https://www.shiftnc.org/data/map>
- ^{vi} <https://ncchild.org/wp-content/uploads/2021/03/Hoke.pdf>
- ^{vii} Public Schools of North Carolina. State Board of Education Department of Public Instruction: Report to the North Carolina General Assembly; Consolidated Data Report, <https://www.dpi.nc.gov/data-reports/dropout-and-discipline-data/discipline-alp-and-dropout-annual-reports>
- ^{viii} Public Schools of North Carolina. State Board of Education Department of Public Instruction: Report to the North Carolina General Assembly; Consolidated Data Report, <https://www.dpi.nc.gov/data-reports/dropout-and-discipline-data/discipline-alp-and-dropout-annual-reports>, NCDPS-DJJ System Flow Data
- ^{ix} The Risk and Needs Assessment Committee reviewed data gleaned from the Juvenile Risk and Needs Assessment and the new YASI data instrument administered by Juvenile Court Counselors after juveniles are referred with a complaint alleging that a delinquent act has occurred and prior to adjudication of the juvenile.