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ABSTRACT

Based on the premise that ecological and health problems, and human responses to these problems, are directly related to community social and economic conditions, this study examined differences in health, housing, and human concerns across socioeconomically defined neighborhoods in West Virginia. Counties were grouped into three environmental regions. In each community, relatively homogeneous, geographically bound neighborhoods were mapped; within each neighborhood, approximately 100 households were selected. Each of these environments consisted of a residential ecosystem, or an intact residential environment in which common social and technological relationships existed between the residents and their surrounding neighborhood environment. The survey instrument used to conduct the 2,000 interviews was the Neighborhood Environmental Evaluation Decision System, designed to yield data dealing with such problems as migration, medical services, births-deaths, mental health, housing, sewage disposal, city services, and neighborhood environmental pollution. Some findings were: residents of lower income neighborhoods had a much greater incidence of health problems and received considerably fewer health services; and there was a strong tendency for both urban and rural low income neighborhood residents to report dissatisfaction and concern with numerous human services. (NQ)

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A SURVEY AND ANALYSIS OF HUMAN ECOSYSTEMS
AND HUMAN SERVICE SYSTEMS IN APPALACHIA

by
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CHAPTER ONE
INTRODUCTION

Personal perspectives on ecological problems differ. As the phrase goes, "We are where we sit." To affluent suburbanites the word ecology is likely to bring forth a concern with industrial pollution of the water and atmosphere, or a concern with worldwide population growth. To less affluent Americans ecology is a word relating to their concerns with sick children, relatives in mental hospitals, too few bedrooms, leaky roofs, cars that won't run and streets that are not paved.

At some level, rich and poor Americans share a common concern with man-man and man-environment relationships. However, these differ substantially in the extent to which they are personalized and the extent to which the consequences of ecological problems are immediate. While inadequate sewage disposal in a region may mean potentially polluted water to middle-income residents, it may mean immediate and critical health problems to low-income residents of that region. Similarly, middle-income persons are likely to see population growth and urban crowding problems as statistical abstractions which are costly and somewhat threatening and worrisome; low-income persons know these problems firsthand. Moreover, the poor are likely to experience crowding and overpopulation within the context of poor sewage and housing, inadequate medical and mental health services, as well as within limited prospects for long-term employment. More generally, their lives are lived out within an environmental context of a high density of stressful events.

From a researcher's point of view, a major problem is the development of a research strategy that taps into meaningful data at multiple levels of

concern. Moreover, these data must have the potential for shedding light on basic theoretical questions and contain some possible solutions to practical and immediate problems. In addition, it should be possible to use these data, whether basic or applied, as a basis for multiple strategies of ecological intervention.

Strategies of ecological intervention mean the deployment of resources in order to increase the quality of life at personal, community, and regional levels. In addition, these intervention strategies should be integrative, focusing on the related diversities of needs within social systems.

Conceptual models for intervention strategies which have been thus far employed have tended to be narrow in scope and operative at only a limited number of levels of the social systems involved. For example, we have tended to develop programs for emotionally disturbed children without focusing on the network of overlying family pathologies; we have developed programs for community referral of alcoholics without examining family and community stresses; and we have developed job training programs without medical programs designed to help workers stay healthy.

Neither have our intervention strategies successfully integrated the use of often scanty human service resources. Unfortunately, the reverse has tended to be the rule. The inter-organizational relationships among human service organizations, those organizations with real and potential resources for ecological intervention, have rarely approached canons of professional ethics so often referred to by their resident staff. In a recent review of some literature on these inter-organizational relationships, Demone and Harshbarger have noted that "...the extraordinary point is that many agencies are unaware of and disinterested

in the essential symbiosis which overlays the entire human service network. This awareness, when manifested, occurs frequently in the forms of competition, prejudice, and distrust. Boundary maintenance and domain protection are more common than collaboration and cooperation."¹

The recent growth and popularization of system theory would suggest that we may be developing tools with a potential for dealing with some of the problems of human ecosystems. A system has been defined as the totality of elements in interaction with each other, including the properties of heirarchical levels of units and interaction patterns, as well as boundaries, boundary maintenance, and internal-external energy relationships. Conceptually, this approach might be used by a physician in discussing the integrity of the human body or a social scientist in discussing the problems of a community or a region. That is, we might focus on an individual as a very basic unit in a system, his family and social relationships at the next higher level of that system, his neighborhood at a still higher level, until we begin to map the different levels, elements, and transactional relationships involved in a definition of a community. Such an approach could be carried on, of course, moving towards systems definitions of regions and large geographic areas. The essential requirement is that sub-unit and different system levels be interacting, or in some way functionally related.

For example, a child with emotional problems is part of a system which includes such relevant sub-systems as his family, community

¹Demone, H. W. Jr., and Harshbarger, D. The Planning and Administration of Human Services, New York: Behavioral Publications, 1973

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employment and economics, residential housing, tax revenues, city
ment, and parks and recreation to mention only a few. All of these sub-
systems are important components in understanding and intervening in
this serious problem. And, while it might seem naive to attack this child's
problem in isolation, it seems overwhelming to deal with it in all of its
complexity.

It is this dilemma which has led, on the one hand, to overspecialized
research, and, on the other, to research lacking sufficient specificity
to answer important ecological questions. That is, we have tended to
point our research in the direction of either individual or community-
wide pathology, without examining the ecological parameters or internal
community contingencies which are problem related. However, it is possible
that this dilemma is a product of the conceptual frameworks which we
have used, not the nature of the problem itself.

In the present project there has been an attempt to use the framework
of system theory to resolve this dilemma and to provide a mechanism for
multi-level integration of data.

CHAPTER TWO

ECONOMIC AND SOCIAL CONDITIONS IN WEST VIRGINIA - AN OVERVIEW

It is a premise of the present research that ecological and health problems, and human responses to those problems, are directly related to community social and economic conditions. Therefore, this chapter describes the broad social and economic structure of West Virginia; a structure containing all of the sample counties in this research. Hopefully, this description will provide a useful background for interpretations of the survey data presented in subsequent chapters. The present chapter will discuss income and employment trends, as well as patterns of educational and welfare investments and expenditures.

Employment

West Virginia's economy did not grow appreciably between 1950 and 1970. Data from the West Virginia Department of Employment Security indicate an estimate of 586,070 employed labor force participants in 1950 with a comparable estimate of 588,800 for 1970. The leading factors retarding the state's economic growth, during a time when the national economy was surging forward at unprecedented sustained rates, were declines in coal mining (122,800 persons employed in 1950 versus 48,900 in 1970) and agriculture (61,770 persons employed in 1950 versus 23,600 in 1970) which were not offset by employment gains in other industries, such as services, which nationally were assuming relatively more important positions. (See Table 2-1).

Agriculture has been declining in importance nationally, and West Virginia has also experienced this decline. However, the state has

been so heavily dependent upon coal mining that when employment fell in this important industry, the state's economy was critically damaged. This problem was further compounded by the fact that other industrial sectors did not grow enough to absorb displaced workers.

Normally, when an area experiences reduced economic opportunity, labor force mobility, which draws people from low income areas to high income areas, produces a new distribution of population. This occurred, and continues to occur, in West Virginia. It is well known that thousands of people moved from the state to other areas of the nation during the 1950's and 60's. It is also well known that this migration has produced a state population tending to have a disproportionately large number of older and younger people. These groups are, of course, the least mobile.

West Virginia's unemployment rate has exceeded the national rate for many years. In 1972 the rate of unemployment in West Virginia was 6.9 percent compared to 5.6 percent for the United States as a whole. (See Table 2-1). In the same year, per capita income in West Virginia was \$3574 compared to \$4478 for the United States. Indeed, the state's per capita income has consistently been below the national estimate. This has been true since at least 1940 as reported by the U. S. Bureau of the Census. (See Tables 2-2 and 2-3). Consistent with these trends, and largely due to discouraged workers, the nature of the demographic features of the state's population, and the industrial structure of the state's economy which heavily influences the quantity and quality of labor demand, the state's labor force participation rates are lower than the national rates. In 1970, the participation rate of males and females 16 years of age and over was 60.3 percent for the United States

compared to only 47.1 percent for West Virginia. Even when controlling by sex, the West Virginia labor force participation rates are lower, with male rates for the United States at 79.2 percent compared to West Virginia's 66.9 percent, and female rates at 42 percent for the United States compared to 29.4 percent for West Virginia. (See Table 2-4).

It is possible that the economic indicators cited above reveal a personal preference for leisure rather than income among potential labor force participants (the "lazy mountaineer" hypothesis). However, this explanation has not been widely advanced by those who have seriously studied work behavior in both West Virginia and the Appalachian Region. Neither does the data to be presented later support this point of view. Cultural explanations of the Region's economic problems have been advanced which have lead to inferences about non-economic factors which may restrain mobility. However, it probably is true that the delay in the achievement of a more comfortable equilibrium between the level of living of people of the state and their economic opportunities is due to a wide array of interdependent factors, including at least the following: the structure of economic opportunities inside and outside of the state; willingness to respond to greater economic opportunity (the cultural factor); and the ability to respond to economic opportunity (particularly health and education).

Educational attainment is generally regarded as positively related to health and neighborhood environmental quality. (It is also known to be intercorrelated with income). In 1970, median school years completed by people 25 years and over was 12.2 years for the United States compared

to only 10.6 years for West Virginia. (See Table 2-5). In part, the difference in educational attainment probably can be analyzed in terms of state expenditures for education, which vary with per capita income. In 1970 elementary and secondary teachers earned an average annual salary of \$9265 in the United States compared to only \$7800 in West Virginia. (See Table 2-6).

Public Welfare System in West Virginia

For those in the population who are poor, the Welfare and Food Stamp Programs offer critically needed services. The nature of these delivery systems are, therefore, significant in our analysis of human service systems which can effect basic changes in the lives of the low-income in West Virginia.

As a state which has historically failed to share in the full benefits of national economic expansion, resulting in income and education levels which have been subpar relative to national norms, it is not surprising to find a significantly larger percentage of poor people in West Virginia than in the nation. And given prevalent attitudes toward welfare recipients here and throughout the nation, it is not surprising to find a wide-spread concern with the welfare poor in West Virginia -- a concern which has been manifested in such actions as the reduction of the number of recipients among the unemployed father (i.e. AFDCU) categorical program.

Table (2-7) indicates that the public assistance rolls moved upward (though not steadily) from 53,357 families in 1955 to 57,664 families in 1961. While this is a significant increase in itself, far more important was what happened to the AFDC caseload during this same period.

Prior to 1961, unemployed fathers without full disability were ineligible to receive public assistance. However, as a result of the 1961 amendments to the Social Security Act, inability to find employment became a sufficient reason to receive public welfare aid. This new amendment, which became law at the option of the individual states led directly to the sudden explosion in the number of persons on welfare rolls and the so-called public welfare crisis which received (and continues to receive) national attention in the late 1960's and early 1970's, culminating in a wide array of proposals and experiments concerned with a workable and acceptable income maintenance program.

In West Virginia, as in the nation, this sudden increase in the welfare rolls, directly traceable in the 1961 ADCU law, caused a public outcry. While there were those who viewed the sudden growth in the numbers of welfare recipients as an indication that the welfare system was finally fulfilling its mission of extending services and income security to the impoverished, many policymakers and community and business leaders viewed the sudden growth in welfare caseloads as a crisis which threatened the very work ethic on which the nation had been founded. Their view was that something had to be done to reduce the number of welfare cases. There was simply no defense for swollen welfare caseloads. Therefore, stringent new welfare regulations were developed in order to exise the "cheaters" and "swindlers" (to use Senator Long's terminology) from the welfare rolls.

New laws were passed and the provisions of those new laws have been quickly implemented, particularly in West Virginia. In fact West Virginia has led the nation (and achieved national acclaim) in reducing the number

of caseloads receiving AFDCU categorical payments. From a high of about 13,000 families in 1962, West Virginia's Department of Welfare has been successful in reducing the so-called unemployed father's caseload to approximately 1,500 cases. Few states can equal that reduction rate.

Welfare policy in West Virginia, as in the nation generally, has been toward a reduction and stabilization in monthly money benefits for the adult welfare categories, such as AFDC and AFDCU, and an increase in their non-cash benefits (i.e. food stamps, services, clothing allowances). At the same time there has been an attempt to improve both the welfare services and the cash payments (which have been notoriously low in the United States in general and in West Virginia in particular) for the remaining categorical welfare groups (i.e. OAA, AB, AD, and GA).

The food stamp program in West Virginia has grown significantly since its inception in 1961, both in terms of the number of low income population served and in terms of its relative importance as a part of the new strategy to improve the lives of the low income population, particularly the welfare poor. (See Tables 16-20). Data on the operation of food stamp programs in West Virginia is included here because it indicates how an important program developed specifically to service the poor actually services the poor, and the extent to which the poor take advantage of this program designed to assist them in meeting one of their basic needs -- food.

Data presented in tables 2-7 through 2-11 indicate clearly that the number of participants and expenditures for food stamps have increased substantially since the beginning of the program on a pilot basis in 1961 and its first full year of operation in 1962. In 1962 in West Virginia,

14,000 persons participated in the program as recipients of food stamps valued at \$200,000. (See Table 2-8). For the fiscal year ending June 30, 1971, there were 66,100 households (or 247,000 people) who were active participants in the program and the total value of the food stamps they received had reached approximately \$65 million. If one excludes the monies used by the recipients to purchase the stamps, the bonus value of all stamps for fiscal year 1970 was almost \$45 million. (See Table 2-9).

Although the food stamp program in West Virginia has impressively expanded, a more important concern is how well is the program reaching the low-income population eligible to participate in the program -- welfare recipients and all other low-income combined. The answer is mixed; not very well in certain counties of the state, and quite well in others. Although data presented in Tables 2-10 and 2-11 are somewhat misleading and overstate the success of programs by including only welfare recipients rather than all eligible low income households in the base, as well as using \$3000 as the poverty level income, criteria quite different from those used by the West Virginia Department of Welfare in determining eligibility for participation in the food stamp program they nevertheless point up the great variability in the success of the food stamp program from county to county in West Virginia. For example, the percent of eligible low income recipients who have participated in the food stamp program reaches 50 percent or less in several counties of the state. (See Table 2-11). This unevenness in the administration probably reflects both inadequate attempts to make the potential clients aware of their eligibility, and the negative attitudes many low-income have regarding their becoming welfare clients.

The West Virginia Tax System: A Brief Overview

The amount of monies available to state government in West Virginia is, of course, important in meeting the basic health, education, welfare and other human service needs of residents. Since a large proportion of funds come from taxation, it is very important that the tax system be structured so as to be adequate, convenient and, perhaps most importantly in a democratic society, equitable. By adequacy we mean not only a system which raises sufficient tax revenue to carry out the functions of government, but also a system which is structured (in terms of the tax rate and base coverage) to be sufficiently elastic that it will provide substantially more revenue as the economy and the service needs of the people expanded. Convenience, of course, simply refers to ease of payment by the taxpayer and cost of tax collections to the state. Tax equity refers to fairness of the system; that is, it is based on the citizen's ability to pay and the citizen's benefits received.

There is, in fact, little about the West Virginia tax system at the state or local levels that is unique or particularly noteworthy with the exception of the state's heavy reliance on the Business and Occupational Tax as a source of tax revenue. The Business and Occupational Tax (which is the major revenue producing tax in the State), has been adjudged as one of the worst forms of taxation by tax experts throughout the nation and has little to recommend it other than the fact that it does raise substantial revenue for West Virginia. For the most part, the types of taxes included in West Virginia tax systems vary little from the types of taxes used by other state and local governments of the United States. It should be noted here that although, as in most states, the property

tax is the primary source of tax revenue for all local governments, its revenue raising ability is severely restricted by the long-standing tax limitation amendments of the West Virginia constitution which limit the rates that may be applied to the several classes of taxable property.

With the heavy reliance on the Business and Occupation tax, the general sales tax and other forms of sales taxation (without tax credits to reduce the burden on those with low incomes), the relative under-utilization of the personal income tax by state government and the major reliance on the property tax by local government, the West Virginia tax system is quite regressive.

Although the general expenditures of West Virginia per \$1000 of personal income have often exceeded the national average for various functions of state government (See Table 2-12), data presented in Table 2-13 indicate that West Virginia has lagged behind the other Appalachian states and the United States as a whole in the growth of state and local revenues derived from their own sources -- a measure of tax effort. In addition, as Table 2-14 points out, both state and local governments in West Virginia compare rather unfavorably with neighboring states of Appalachia as well as the nation as a whole in their allocations of monies for almost all categories of government programs. Particularly noteworthy is the low level of local government expenditures in West Virginia.

Despite the very encouraging economic growth experienced by West Virginia during the last few years, the state's primary sources of internal taxation have failed to provide expanded revenues as rapidly as had occurred in neighboring states. Table 2-12 describes this problem.

In comparison to all other Appalachian states, West Virginia is last in both the aggregate and percentile increases of state and local revenues over an 18 year period. Although this poor showing in part reflects the decline in population during the years covered by the table, it also may indicate the inelastic properties of the state tax structure.

In other words, the present state and local tax mechanisms of West Virginia may be incapable of expanding sufficiently given present rates of economic growth and the concurrent increase in demand for government services.

In general, per capita measurements of revenues and expenditures by West Virginia counties tend to confirm many of the survey findings to be presented later in this report that rural areas are in need of improved service from government delivery systems. Comparative county measurements in Table 2-14 indicate that both the per capita tax capacity and effort of the less populated counties are significantly below that of the more urbanized, heavily populated counties. The data cited above from the U. S. Bureau of the Census also show a failure of rural counties to assume debt in order to finance capital projects such as schools.

The relatively low per capita tax effort in rural areas is reflected in the lower than average expenditures for nearly all human services shown on Table 2-14. Outlays for services such as highways, welfare, public safety, and sewerage are significantly below the state-wide average. One very notable exception to this trend is the per capita expenditure for hospitals. This most likely reflects the higher per capita cost of maintaining hospital facilities in sparsely populated areas.

Ultimately, if existing programs are to be expanded or new programs established that will deal with the particular conditions and problems

described later in this report, it may be necessary to raise West Virginia's revenues and expenditures up to the national average on a per capita basis in order to pay for their operation. However, because of the inadequate tax base provided by the predominately low income population of the state, it is questionable whether state and local revenue efforts, without major changes such as an increased severance tax, will be adequate for the task ahead. Otherwise what may be required are increased Federal inputs designed specifically to compensate for the demonstrated inability of an underdeveloped area such as West Virginia to raise the revenue necessary to satisfy its many human needs.

TABLE 2-1
NONAGRICULTURAL WAGE AND SALARY WORKERS IN WEST VIRGINIA
ANNUAL AVERAGE, 1948-1959
(In Thousands)

Industry	1948	1949	1950	1951	1952	1953
NONAGRICULTURAL WAGE & SALARY WORKERS 1/						
MANUFACTURING	550.9	523.1	524.3	537.5	526.4	513.1
NON-MANUFACTURING	141.8	128.6	131.4	139.9	136.3	137.9
	409.2	394.5	392.9	397.6	390.1	375.2
Mining	138.1	125.8	122.8	123.9	114.3	97.7
Bituminous Coal Mining	131.7	120.0	117.5	118.9	108.9	92.1
Contract Construction	21.0	19.8	19.5	18.7	18.2	21.6
Transportation, Communications & Public Utilities	56.8	52.6	53.7	57.2	55.6	54.3
Trade	82.9	83.6	83.1	84.0	85.3	84.7
Finance, Insurance & Real Estate	9.0	9.4	10.1	10.4	10.8	11.0
Services	45.0	44.6	44.3	45.1	46.3	46.4
Government	56.3	58.7	59.5	58.4	59.7	59.6
Agriculture			61.7			
Industry	1954	1955	1956	1957	1958	1959
NONAGRICULTURAL WAGE & SALARY WORKERS 1/						
MANUFACTURING	475.4	480.5	502.3	568.5	470.3	465.0
NON-MANUFACTURING	127.3	130.5	132.9	133.0	122.2	126.6
	348.0	350.0	369.4	375.5	348.1	338.4
Mining	77.0	76.2	83.0	82.3	69.7	60.9
Bituminous Mining	71.3	70.9	77.8	77.4	64.2	55.6
Contract Construction	18.8	19.3	22.9	28.0	20.1	20.0
Transportation, Communications & Public Utilities	49.8	49.8	52.4	52.7	46.8	45.5
Trade	83.0	84.3	87.4	88.8	85.2	84.0
Finance, Insurance & Real Estate	11.5	11.9	12.4	12.5	12.5	12.6
Services	46.6	47.3	48.9	49.4	49.5	50.2
Government	61.3	61.3	62.5	61.6	64.3	65.3

* See last page of Table 2-1 for source of data.

TABLE 2-1 (Cont.)
 Employment (by Industry) and Unemployment
 for West Virginia, 1960-1972

Employment and Unemployment	Total 1960	Total 1961	Total 1962	Total 1963	Total 1964
Work Force	637.5	634.3	614.9	600.2	602.1
Unemployment (total)	75.7	85.6	73.7	61.8	52.8
Insured Unemployment Rate of Unemployment	11.9	13.5	12.0	10.3	8.8
Employment (total)	561.5	548.2	540.9	538.0	548.0
Wage and Salary					
Employment - ex. private household	460.0	448.1	447.5	449.9	460.9
Manufacturing	124.0	120.1	122.6	124.2	126.2
Durable Goods	74.4	69.9	71.9	73.1	75.9
Non-durable Goods	50.2	50.3	50.7	51.1	50.3
Nonmanufacturing	335.5	328.0	325.0	325.7	334.8
Mining	56.3	49.9	49.2	47.7	48.3
Contract Construction	18.4	18.8	17.8	18.4	20.5
Trans., Comm., and Public Utilities	44.4	41.6	41.3	40.8	40.8
Wholesale and Retail Trade	84.5	81.4	79.3	79.5	81.5
Finance, Ins. and Real Estate . . .	13.3	13.3	13.4	13.5	13.7
Service	51.1	51.1	52.6	53.7	54.7
Government	67.5	71.5	71.4	72.1	75.3
Other nonagricultural Employment	57.0	56.3	53.1	51.5	53.2
Agriculture	44.6	43.8	40.3	36.6	33.8
Persons Involved in Labor Mgt. Disputes	n.a.	n.a.	n.a.	n.a.	n.a.

Source: West Virginia Employment and Earnings Trends, Annual Summary, 1970, W. Va. Department of Employment Security, RS Series 103E.



TABLE 2-1 (Cont.)
 Employment (by Industry) and Unemployment
 for West Virginia, Annual Average 1960-1972

Employment and Unemployment	Total 1965	Total 1966	Total 1967	Total 1968	Total 1969	Total 1970	Total 1972
Work Force Unemployment (total)	615.3	623.6	625.4	629.0	623.4	630.0	657.3
Insured Unemployment Rate of Unemployment	47.6	42.6	39.7	40.3	34.6	40.1	45.5
Employment (total)	7.7	6.8	6.3	6.4	5.6	6.4	6.9
Wage & Salary Employment (exc. private households)	566.7	579.5	584.5	585.9	587.8	588.8	610.7
Manufacturing	476.6	495.1	503.6	508.4	512.3	513.9	537.3
Durable Goods	129.2	133.0	133.2	132.4	131.0	126.4	122.8
Nondurable Goods	78.9	81.1	81.1	80.6	79.6	75.8	75.3
Nonmanufacturing	50.3	51.9	52.1	51.8	51.5	50.6	47.4
Mining	347.3	362.2	370.4	375.9	381.3	387.6	414.5
Contract Construction	47.9	47.2	47.5	45.5	47.1	48.9	53.1
Trans. Comm. and Public Utilities	21.9	24.9	24.2	26.0	26.8	27.5	34.2
Wholesale and Retail Trade	40.7	40.6	40.9	41.3	41.3	41.6	40.2
Fin. Insurance & Real Estate	85.0	87.7	89.0	90.8	91.5	91.1	101.7
Services	14.1	14.3	14.5	14.7	15.1	15.7	16.5
Government	56.1	59.1	62.2	62.8	64.7	67.1	70.5
Other Nonagricultural Employment	81.7	88.5	92.1	94.9	95.0	95.6	98.3
Agriculture	58.8	56.1	54.3	52.5	51.7	51.3	51.6
Persons Invol. in Labor -	31.4	28.3	26.6	25.0	23.9	23.6	21.8
Mgt. Disputes	n.a.	n.a.	1.1	2.1	1.0	1.1	1.1

Source: West Virginia Employment and Earnings Trends, Annual Summary, 1970, W. Va. Department of Employment Security, RS Series 103E.

TABLE 2-2

Per Capita Income for the United States and West Virginia for the
Census Years 1940, 1950, 1960, and 1971

YEAR	AREA	
	United States	West Virginia
1940	595	407
1950	1,596	1,065
1960	2,216	1,596
1971	4,156	3,275
1972*	4,478	3,574

Source: U. S. Bureau of the Census and the Survey of Current Business, April 1973, p. 17.

*1972 data, preliminary.

TABLE 2-3
 FAMILY INCOMES - COMPARISONS BETWEEN
 W.VA. and UNITED STATES

INCOME ITEMS	Percent Distribution	
	U.S.	W.Va.
Median Income of Families and Unrelated Individuals		
1950	\$2,619	\$2,344
1960	4,791	3,931
1970	8,000	5,919
Family Income Level:		
\$0-4,999	20.3	31.8
\$4,999-9,999	32.4	38.5
\$10,000-Above	47.2	29.7
Families receiving Public Assistance Income	5.3	5.7
Families with Income Less Than Poverty Level ^a	10.7	18.0
Families with Income Less Than 75% of Poverty Level	7.0	12.3
Families with Income Less Than 125% of Poverty Level	15.0	24.6

Source: U.S. Bureau of Census General Social and Economic Characteristics, 1970.
^a Poverty status is defined according to various factors taken into account by U.S. Bureau of Census. The average poverty threshold for a non-farm family of four headed by a male was \$3,745.

Table 2-4

Labor Force Growth and Participation Rates, 1930-1980

Year	West Virginia						United States					
	Total Labor Force	Male Labor Force	Female Labor Force	Year	Total Labor Force	Male Labor Force	Female Labor Force	Year	Total Labor Force	Male Labor Force	Female Labor Force	
1930	569,677	487,609	82,068	1930	48,594,592	37,915,544	10,679,048	1930	48,594,592	37,915,544	10,679,048	
1940	634,957	523,813	111,144	1940	52,789,499	39,944,240	12,845,259	1940	52,789,499	39,944,240	12,845,259	
1950	660,242	522,194	138,048	1950	60,053,968	43,553,386	16,500,582	1950	60,053,968	43,553,386	16,500,582	
1960	588,030	425,634	162,446	1960	73,081,000	49,563,000	23,518,000	1960	73,081,000	49,563,000	23,518,000	
1964	592,000	413,000	179,000	1964	76,971,000	51,118,000	25,854,000	1964	76,971,000	51,118,000	25,854,000	
1970	629,000	438,000	191,000	1970	85,999,000	55,844,000	30,155,000	1970	85,999,000	55,844,000	30,155,000	
1975	632,000	437,000	195,000	1975	93,656,000	60,281,000	33,365,000	1975	93,656,000	60,281,000	33,365,000	
1980	598,000	412,000	186,000	1980	101,408,000	64,981,000	36,427,000	1980	101,408,000	64,981,000	36,427,000	

*15 years and over

LABOR FORCE PARTICIPATION RATES*

Year	West Virginia			United States		
	Both Sexes	Male	Female	Both Sexes	Male	Female
1930	49.7	82.0	14.9	54.5	84.1	24.3
1940	47.1	76.1	16.8	52.2	79.0	25.4
1950	47.0	74.5	19.6	53.5	78.7	28.9
1960	45.4	67.8	24.3	57.4	79.7	36.1
1964	45.6	66.4	26.5	56.5	77.2	37.0
**1970	47.1	66.9	29.4	60.3	79.2	42.8
**1975	50.7	71.6	30.6	60.1	79.1	42.5
**1980	52.8	71.9	32.4	60.5	79.2	43.0

*14 years and over, percent **16 years and over, percent
 Sources: U.S. Bureau of the Census From * Donald E. Hayhurst: Employment Security in West Virginia,
 Bureau of Government Research, West Virginia University, 1966, p. 19, and U.S. Bureau of the Census, 1970,
 Detailed Characteristics, West Virginia p.50-444. 1970 data for West Virginia and U. S. are census data,
 1975 and 1980 data are projections.

TABLE 2-5
Public School Enrollment and Teachers Salaries in
United States and West Virginia, 1970

	United States	West Virginia
Public School Enrollment (1,000)		
Elementary	27,497	222
Secondary	18,407	178
Classroom teachers (elem)	1,131,774	8,352
Secondary	929,341	8,230
Pupil-teacher ratio	22.3	24.1
Estimated Salary (Average in dollars)		
All teachers	9,265	7,800
Elementary	9,025	7,600
Secondary	9,540	8,000
Percent Distribution of Teachers by salary groups		
Under \$6,500	8.7	6.9
\$6,500-7499	15.6	34.4
\$7,500-8499	18.4	40.9
\$8,500-9499	16.7	8.3
\$9,500 and over	40.7	9.5

Source: U.S. Bureau of the Census, General Social and Economic Characteristics, 1970.

TABLE 2-6

Median School Years Completed by the Population 25 Years and Over
for the United States, West Virginia, and Selected Counties of
West Virginia for the Census Years 1940, 1950, 1960 and 1970

AREA	1940		1950	1960	1970	
	M	F				
United States	8.4	8.3	8.5	9.3	10.6	12.2
West Virginia	7.8	7.7	8.0	8.5	8.8	10.6
Harrison	8.1	8.1	8.3	8.9	9.9	12.0
Monongalia	8.0	7.8	8.2	8.8	9.4	12.1
Cabell	8.4	8.3	8.6	9.3	10.0	11.9
Kanawha	8.2	8.1	8.3	9.0	10.1	12.1
McDowell	7.0	6.7	7.3	7.7	8.1	8.7

Source: U.S. Bureau of the Census, Census of the Population,
1940, 1950, 1960 and 1970.

TABLE 2-7
Public Welfare Expenditures and Caseloads in West Virginia
1955-56 to 1971-72

Year	Total Welfare Expend. (\$100)	Total P.A. Case-Load	Total P.A. Expend. (\$100)	Total AFDC Case-load	Total AFDC Expend. (\$100)	P.A. Case-Load families	Total AFDC Caseload (families) (100's)
1950							
1955	32,611.2	126,982	\$30,851.1	82,041	\$16,038.9	53,357	17.8
1956	36,063.6	126,546	30,756.3	82,395	17,988.3	32,639	17.9
1957	36,800.0	126,599	31,199.5	84,212	18,729.3	51,520	18.3
1958	40,037.7	134,340	33,871.3	92,616	21,119.6	52,566	20.1
1959	41,252.7	133,232	33,900.0	94,166	21,815.1	51,118	20.5
1960	44,336.2	132,431	33,929.9	93,159	21,936.3	50,158	20.2
1961	62,555.6	164,111	44,192.9	127,786	35,035.3	57,664	29.6
1962	65,740.3	167,451	48,876.8	134,808	38,498.6	56,012	30.3
1963	62,886.9	150,813	44,531.1	120,705	34,271.6	50,647	27.0
1964	65,870.2	140,883	42,181.3	112,034	32,000.4	47,690	25.1
1965	68,502.4	128,767	40,206.9	100,887	29,904.9	44,809	22.9
1966	72,261.2	118,673	40,134.3	91,518	33,303.8	42,227	20.1
1967	78,271.6	113,311	42,633.7	85,276	34,443.2	40,681	20.9
1968	79,208.2	109,519	42,248.5	83,102	27,585.0	40,073	19.7
1969	113,186.6	121,400	49,935.9	90,038	30,287.0	46,160	22.1
1970	146,817.8	130,304	54,415,760	99,271	33,654.3	49,796	24.4
1971	162,014.1	117,291	57,271,147	86,302	31,882.0	46,786	21.7
1972							

Source: West Virginia Department of Welfare, Annual Reports, 1955-56 to 1971-72.

TABLE 2-8
PARTICIPANTS IN THE FOOD STAMP PROGRAM IN WEST VIRGINIA, 1962-1972
NUMBER OF PERSONS PARTICIPATING/COMPARED TO THE TOTAL VALUE OF FOOD STAMPS

Month	Number of Persons Participating	Total Value of Food Stamps
July 1962	14,000	\$ 200,000
July 1963	31,500	505,000
July 1964	30,500	496,000
July 1965	28,500	465,000
July 1966	80,000	1,250,000
July 1967	100,000	1,800,000
July 1968	118,000	2,100,000
July 1969	137,000	2,500,000
July 1970	189,000	4,600,000
July 1971	247,000	5,750,000
July 1972	251,622	6,522,688
		\$6,239,911

Source: West Virginia Department of Welfare, Annual Report, 1971-72 and the preliminary 1972-73 Annual Report.

SUMMARY OF FOOD STAMP PROGRAM PARTICIPATION IN WEST VIRGINIA BY COUNTY
JULY 1, 1970 to JUNE 30, 1971

County	Households	Increase	Purchase Price	Bonus	Stamp Value	Increase
Barbour	694	232	\$ 223,093.25	\$ 446,945.75	\$ 670,039	\$ 268,562
Berkeley	817	446	205,596.50	558,050.50	793,747	458,335
Boone	1,545	435	500,678.00	1,095,308.00	1,595,986	522,231
Braxton	831	222	258,735.00	545,976.00	804,711	250,396
Brooke	670	313	167,472.75	447,160.25	614,633	303,835
Cabell	3,497	1,665	819,379.00	2,274,659.00	3,094,038	1,591,307
Cathoun	509	168	168,740.00	367,623.00	536,363	207,891
Clay	913	226	325,906.25	676,802.75	1,002,709	304,609
Doddridge	269	114	70,902.75	195,935.25	266,838	135,449
Fayette	2,558	659	871,137.00	1,667,544.00	2,538,681	778,591
Gilmer	423	144	139,324.25	276,719.75	416,044	167,269
Grant	264	106	82,766.50	169,774.50	252,541	114,919
Greenbrier	1,377	541	434,842.50	901,694.50	1,336,537	583,207
Hampshire	352	162	99,549.00	237,586.00	337,135	171,208
Hancock	551	291	147,647.50	383,445.50	531,093	287,753
Hardy	284	117	89,440.25	175,097.75	264,538	118,701
Harrison	1,710	865	458,490.50	1,101,188.50	1,559,679	829,433
Jackson	562	184	175,857.50	366,737.50	542,595	195,687
Jefferson	414	212	113,071.50	312,557.50	425,629	236,515
Kanawha	6,815	2,779	1,919,475.75	4,576,321.25	6,495,797	2,851,126
Lewis	736	285	222,907.75	433,051.25	655,959	286,938
Lincoln	1,852	607	646,948.00	1,353,907.00	2,000,855	736,392
Logan	2,337	652	783,413.25	1,775,930.75	2,559,344	870,515
Marion	1,457	639	391,897.25	908,575.75	1,300,473	623,645
Marshall	939	391	235,948.25	616,829.75	852,778	392,608
Mason	820	255	230,592.75	478,036.25	708,629	241,213
Mercer	2,482	929	784,587.50	1,660,038.50	2,444,626	1,018,063
Mineral	768	283	199,145.50	455,968.50	655,132	263,364
Mingo	2,793	588	1,056,702.25	2,046,926.75	3,103,629	865,911
Monongalia	1,341	771	310,409.75	889,200.25	1,199,410	727,685
Monroe	443	174	147,451.75	323,050.25	470,502	209,034
Morgan	223	88	57,875.00	132,689.00	190,564	94,273
McDowell	3,271	847	1,294,290.75	2,522,164.25	3,816,455	1,214,415
Nicholas	1,000	311	321,666.25	645,471.75	967,138	347,910
Ohio	1,497	714	370,924.00	927,938.00	1,298,862	665,769
Penitton	265	104	74,672.25	174,142.75	248,815	109,242
Pleasants	179	76	58,306.50	122,481.50	180,788	84,783
Pocahontas	499	207	144,400.75	328,814.25	473,215	221,945
Preston	1,015	420	324,287.25	712,799.25	1,037,087	479,702

TABLE 2-9 (Cont.)

County	households	Increase	Purchase Price	Bonus	Stamp Value	Increase
Putnam	899	377	253,677.75	591,142.25	844,820	379,094
Raleigh	3,316	1,065	950,603.75	2,285,648.25	3,236,252	1,237,872
Randolph	1,191	480	378,330.75	798,891.25	1,177,222	526,656
Ritchie	352	163	108,182.50	239,741.50	347,924	193,377
Roane	669	239	211,510.75	447,994.25	659,505	251,225
Summers	970	258	299,860.75	661,193.25	961,054	307,589
Taylor	502	205	154,809.50	294,458.50	449,268	193,192
Tucker	328	152	79,060.25	208,814.75	287,875	154,985
Tyler	351	152	97,344.25	232,640.75	329,985	164,832
Upsher	696	197	216,419.75	453,436.25	669,856	232,757
Wayne	2,286	665	789,273.75	1,658,567.25	2,447,841	831,518
Webster	1,163	311	345,581.50	733,229.50	1,078,811	291,889
Wetzel	915	327	211,329.50	609,068.50	830,398	344,596
Wirt	205	75	57,442.50	132,325.50	189,768	76,116
Wood	1,780	862	419,347.00	1,123,903.00	1,553,250	808,953
Wyoming	1,565	344	771,403.00	908,437.00	1,679,840	493,857
TOTALS	66,160	24,094	\$20,282,709.75	\$44,704,653.25	\$64,987,363	\$26,318,969

Source: West Virginia Department of Welfare, Annual Reports, 1971-72 and preliminary 1972-73 Annual Report.



TABLE 2-10
 PERCENTAGE OF WEST VIRGINIA STATE POPULATION SERVED BY PUBLIC ASSISTANCE
 PROGRAMS BASED ON 1970 CENSUS (FINAL DATA), AND AVERAGE
 RECIPIENTS FOR FISCAL YEAR ENDED JUNE 30, 1972

Area and County	State Population	Average Recipients	% of Population
TOTAL	1,744,237	106,547	6.1
Area 1:	171,229	6,437	3.8
Brooke	29,685	968	3.3
Hancock	39,749	1,019	2.6
Marshall	37,598	1,588	4.2
Ohio	64,197	2,862	4.5
Area 2:	30,243	1,590	5.3
Tyler	9,929	521	5.2
Wetzel	20,314	1,069	5.3
Area 3:	125,070	3,759	3.0
Marion	61,356	2,269	3.7
Monongalia	63,714	1,490	2.3
Area 4:	34,819	1,688	4.8
Hampshire	11,710	696	5.9
Mineral	23,109	992	4.3
Area 5:	66,183	2,066	3.1
Berkeley	36,356	1,479	3.2
Jefferson	21,280	601	2.8
Morgan	8,547	286	3.3
Area 6:	90,972	2,657	2.9
Wirt	4,154	212	5.1
Wood	86,818	2,445	2.8
Area 7:	17,419	892	5.1
Pleasants	7,274	306	4.2
Ritchie	10,145	586	5.8

See source at the end of Table 2-10.

TABLE 2-10 Cont.

Area and County	State Population	Average Recipients	% of Population
Area 8:	79,417	2,390	3.0
Doddridge	6,389	303	4.7
Harrison	73,028	2,087	2.9
Area 9:	53,363	3,353	6.3
Barbour	14,030	1,127	8.0
Preston	13,878	1,453	10.5
Taylor	25,455	773	3.0
Area 10:	40,913	3,037	7.4
Pocahontas	8,800	691	7.8
Randolph	24,596	1,965	8.0
Tucker	7,447	381	5.1
Area 11:	24,493	1,601	6.5
Grant	8,607	446	5.2
Hardy	8,855	581	6.6
Pendleton	7,031	574	8.2
Area 12:	131,224	7,225	5.5
Cabell	106,918	6,072	5.8
Mason	24,306	1,153	4.7
Area 13:	35,014	1,976	5.6
Jackson	20,903	893	4.3
Roane	14,111	1,083	7.7
Area 14:	14,828	1,656	11.2
Calhoun	7,046	996	14.1
Gilmer	7,782	660	8.5
Area 15:	36,939	2,241	6.1
Lewis	17,847	1,200	6.7
Upshur	19,092	1,041	5.5

Area and County	State Population	Average Recipients	% of Population
Area 16: Lincoln Putnam	46,537 18,912 27,625	4,487 3,211 1,276	9.6 17.0 4.6
Area 17: Kanawha	229,515	11,536	5.0
Area 18: Braxton Clay	21,996 12,666 9,330	2,714 1,242 1,472	12.3 9.8 15.8
Area 19: Nicholas Webster	32,361 22,552 9,809	2,855 1,342 1,513	8.8 6.0 15.4
Area 20: Wayne	37,581	4,099	10.9
Area 21: Boone Logan	71,387 25,118 46,269	6,530 2,490 4,040	9.1 9.9 3.7
Area 22: Fayette	49,332	4,210	8.5
Area 23: Greenbrier Monroe	43,362 32,090 11,272	2,330 1,569 761	5.4 4.9 6.8
Area 24: Mingo	32,780	5,067	15.5

TABLE 2-10 Cont.

Area and County	State Population	Average Recipients	% of Population
Area 25: Raleigh	70,080	4,429	6.3
Area 26: McDowell Wyoming	80,761 50,666 30,095	9,658 7,274 2,384	11.9 14.4 7.9
Area 27: Mercer Summers	76,419 63,206 13,213	6,064 4,226 1,838	7.9 6.9 13.9

Source: West Virginia Department of Welfare, Annual Reports, 1971-72
and preliminary 1972-73 Annual Report.

Table 2-11

Percent of West Virginia Population Receiving Public Assistance, Percent of Population below Poverty Level, Percent Participating in Food Stamp Program, 1970-71

	No & % of Pop. Receiving Public Assistance		No of Household Participating in Food Stamp Programs		Income less than Poverty Level, Persons		Income less than Poverty Level, Household		
	Average No	%	No	As a % Welfare Recipients	No	%	No	%	
Barbour	1127	8.0	694	61.6	80.0	4027	30.1	870	31.4
Berkeley	1179	3.2	817	69.3	50.8	5693	16.1	1608	18.0
Boone	2490	9.9	1545	62.0	81.7	7682	30.7	1890	30.4
Braxton	1242	9.8	831	66.9	99.4	5295	42.1	836	40.8
Brooke	968	3.3	670	69.2	68.4	3216	10.9	980	12.0
Cabell	6072	5.8	3497	57.6	53.1	17060	17.5	6581	34.2
Calhoun	996	14.4	509	51.1	151.5	3119	44.5	336	34.7
Clay	1472	15.8	913	62.0	138.1	4078	43.9	661	45.3
Doddridge	303	4.7	269	88.8	81.0	1686	26.6	332	33.9
Fayette	4210	8.5	2558	60.8	60.1	14317	29.5	4256	31.8
Gilmer	660	8.5	432	64.1	82.5	2991	42.6	513	40.2
Grant	446	5.2	264	59.2	52.4	2807	32.8	504	30.1
Greenbrier	1569	4.9	1377	87.8	70.5	8411	26.4	1952	26.3
Hampshire	696	5.9	352	50.6	76.2	3006	26.5	462	23.2
Hancock	1019	2.6	551	54.1	51.9	2997	7.6	1061	9.9
Hardy	581	6.6	285	48.9	63.1	2829	32.1	450	30.8
Harrison	2087	2.9	1710	81.9	43.2	12370	17.2	3957	18.8
Jackson	893	4.3	562	62.9	88.1	4128	19.8	638	17.1
Jefferson	601	2.8	416	69.2	41.2	3582	37.4	1004	30.6
Kanawha	11536	5.0	6815	59.1	55.6	37673	16.5	12266	18.2
Lewis	1200	6.7	736	61.3	76.7	4611	28.8	960	24.1
Lincoln	7211	17.0	1852	57.7	152.1	8176	43.5	1218	39.7
Logan	7404	8.7	2337	57.8	72.2	12706	27.5	3239	26.8
McDowell	7274	14.4	3271	45.0	75.6	18068	35.8	3325	33.2
Marion	2269	3.7	1457	64.2	43.2	9837	16.3	3370	19.4
Marshall	1588	4.2	939	59.1	59.1	4777	13.0	1589	16.7
Mason	1153	4.7	820	71.1	60.1	6213	26.1	1364	26.0
Mercer	4226	6.9	2482	58.7	62.2	14009	22.5	3990	24.1
Mineral	992	4.3	768	77.4	56.2	4672	20.6	1366	23.4
Mingo	5067	15.5	2793	55.1	82.7	13923	42.6	3376	41.6
Monongalia	1490	2.3	1341	90.0	38.4	10932	18.9	1488	21.6
Monroe	761	6.8	443	58.2	82.6	3368	39.2	536	30.5
Morgan	286	3.3	223	78.0	50.0	1675	19.7	447	23.2
Nicholas	1342	6.9	1000	74.5	68.4	6560	29.2	462	32.6
Ohio	2862	14.5	1497	50.1	45.6	8737	14.2	2282	17.5
Pendleton	574	8.2	265	46.2	95.3	2303	33.4	278	33.5
Pleasants	306	4.2	179	58.5	55.9	1162	17.3	320	21.7
Pocahontas	691	7.8	439	72.2	85.6	2732	31.4	581	34.6
Preston	1453	10.5	1015	70.8	66.1	7845	31.2	536	29.9
Putnam	1276	4.6	899	70.5	89.8	4450	16.1	1001	17.1
Raleigh	4429	6.3	3316	74.9	68.0	16388	23.7	4873	25.5
Randolph	1965	8.0	1191	60.6	71.3	6720	28.6	1670	28.5
Ritchie	586	5.8	352	60.1	61.1	2931	29.2	576	27.6
Roane	1083	7.7	669	61.8	106.7	4008	30.3	627	27.1
Summers	1838	13.9	970	52.8	87.5	5225	39.7	1109	39.7
Taylor	773	3.0	502	64.9	59.1	3039	22.3	650	24.1
Tucker	381	5.1	328	86.1	63.2	2072	28.5	519	30.0
Tyler	521	5.2	351	67.4	65.5	2200	22.4	536	23.9
Upshur	1041	5.5	696	66.9	57.0	5248	29.4	1222	31.0
Wayne	4099	10.9	2286	55.8	115.4	9929	26.5	1981	22.9
Webster	1513	15.4	1163	76.9	135.1	4251	43.7	861	43.1
Wetzel	1069	5.3	913	85.6	92.7	4140	21.4	947	20.7
Wirt	212	5.1	205	97.7	127.0	1386	33.4	168	30.0
Wood	2445	2.8	1780	72.8	50.1	10134	12.1	1461	14.7
Wyoming	2384	7.9	1565	65.6	88.2	7320	24.4	1774	26.6
Statewide									
Total	106,547	6.1	66,160	62.1	66.0	380,111	22.2	100,208	27.1

Source: U.S. Bureau of the Census, General Social and Economic Characteristics, 1970, and West Virginia Department of Welfare, Annual Reports, 1971-72 and 1972-73

TABLE 2-12

Selected Economic Items Comparing
West Virginia and the United States

ITEM	United States	West Virginia	W.Va. as percent of U.S.	Ranking of W.Va.
Per Capita General Expenditures of State & Local Government for:				
All Functions	\$ 472	\$ 399	85%	40
Education	192	161	84	39
Local Schools Only	139	113	81	44
Highways	70	102	145	10
Public Welfare	41	36	88	22
Health & Hospitals	34	21	62	47
General Expenditures of State & Local Government Per \$1,000 of Personal Income for:				
All Functions	\$ 161	\$ 182	113%	21
Education	65	74	113	21
Local Schools Only	48	51	108	16
Highways	24	47	194	7
Public Welfare	14	17	117	14
Health & Hospitals	11	10	83	33
Per Capita Debt of State & Local Government	\$ 574	\$ 354	62%	41

Note: All money figures rounded to the nearest dollar.

Source: U.S. Bureau of Census - General Social and Economic Characteristics, 1970.

TABLE 2-13
 Increase in Government General Revenue
 from Own Sources from 1953 to 1971

Government & Date	United States		Appalachian States		West Virginia	
	Total in Millions	Percent Increase	Total in Millions	Percent Increase	Total in Millions	Percent Increase
Local Government						
1953	\$ 12,693		\$ 4,664		\$ 61	
1971	57,491	353%	19,947	328%	224	268%
State Government						
1953	11,750		4,307		134	
1971	61,290	422%	22,643	426%	507	277%

Source: U.S. Bureau of Census - Governmental Finances in 1970-1971.

TABLE 2-13 (Cont.)
 Selected Economic Items Comparing
 West Virginia and the United States

ITEM	United States	West Virginia	W. Va. as percent of U.S.	Ranking of W. Va.
Per Capita Personal Income ^a	\$ 3,910	\$ 2,929	75%	46
Median Annual Pay Rate of Full-time State & Local Government Employees ^b	6,172	4,942	80	46
Per Capita General Revenue from: ^b All Sources	461	383	83	40
Federal Government	78	103	133	16
State & Local Govt.	383	279	73	46
Taxes	308	223	72	45
Property	131	60	45	44
Non Property	177	163	92	27
Revenue Per \$1,000 of Personal Income from: ^b				
All Sources	157	175	111	23
Federal Government	26	47	178	10
State & Local Govt.	131	128	98	29
Taxes	105	102	97	27
Property	45	27	60	42
Non Property	60	75	124	12

Note: All money figures rounded to the nearest dollar.

^aSource: U.S. Bureau of Census - General Social and Economic Characteristics, 1970.

^bSource: U.S. Bureau of Census - Census of Governments, 1967

TABLE 2-14

Selected Items of Local Government Finances by Population-Size Groups of County Areas for West Virginia, 1966-67

Item	Population-size group (1966 population)					
	Total	100,000 to 249,999	50,000 to 59,999	25,000 to 49,999	10,000 to 24,999	Less than 10,000
Number of Areas	55	2	10	12	20	11
Population, 1966	1 809 200	348 600	649 100	390 200	335 500	85 800
	Percent Distribution					
Number of Areas	100.0	3.6	18.2	21.8	36.4	20.0
Population, 1966	100.0	19.3	35.9	21.6	18.5	4.7
General Revenue, Excluding Interlocal	100.0	23.5	35.7	20.6	16.0	4.2
Intergovernmental Revenue	100.0	17.7	33.9	21.2	22.1	5.2
From State Government	100.0	17.2	33.5	21.9	21.9	5.4
From Local Sources	100.0	27.9	37.0	20.1	11.5	3.5
Taxes	100.0	28.5	34.7	22.2	11.5	3.1
Property	100.0	26.0	34.6	23.7	12.3	3.4
Other	100.0	49.3	35.3	9.3	4.8	1.2
Charges and Miscellaneous	100.0	26.6	42.2	15.5	11.3	4.4
Direct General Expenditure	100.0	22.7	36.0	20.7	16.5	4.1
Capital Outlay	100.0	22.5	38.5	20.3	17.8	1.0
Other	100.0	22.7	35.6	20.8	16.3	4.6
Education	100.0	19.6	34.4	23.1	18.3	4.6
Other than Capital Outlay	100.0	20.1	34.0	22.3	18.6	5.0
Highways	100.0	30.3	42.4	16.2	9.0	2.1
Other than Capital Outlay	100.0	29.7	42.1	17.2	8.9	2.1
Public Welfare	100.0	21.0	24.6	32.9	17.9	3.6
Hospitals	100.0	0.9	61.5	3.7	22.1	11.9
Other than Capital Outlay	100.0	-	69.3	4.2	12.9	13.6
Health	100.0	32.2	34.0	14.0	16.0	3.7

See source at the end of Table 2-14.

TABLE 2-14 (Cont.)

Selected Items of Local Government Finances by Population-Size Groups of County Areas for West Virginia, 1966-67

Item	Population-size group (1966 population)					
	Total	100,000 to 249,999	50,000 to 59,999	25,000 to 49,999	10,000 to 24,999	Less than 10,000
				Percent Distribution--Continued		
Police Protection	100.0	29.2	38.9	19.1	10.7	2.2
Fire Protection	100.0	45.0	41.3	10.2	3.2	0.3
Sewerage	100.0	24.4	54.4	13.7	6.5	1.0
Other than Capital Outlay	100.0	31.5	38.7	18.5	9.3	2.0
Sanitation other than Sewerage	100.0	42.2	31.5	18.6	6.7	1.0
Parks and Recreation	100.0	27.4	58.2	9.9	3.0	1.5
Natural Resources	100.0	6.1	52.0	8.4	30.3	2.4
Housing and Urban Renewal	100.0	37.7	21.5	4.1	36.6	0.1
Correction	100.0	34.7	29.2	19.5	13.4	3.3
Libraries	100.0	68.7	9.5	8.6	12.6	0.7
Financial Administration	100.0	26.4	36.8	16.7	15.5	4.5
General Control	100.0	26.2	35.4	18.2	15.2	4.9
General Public Buildings	100.0	55.1	22.7	9.9	10.3	2.0
Interest on General Debt	100.0	35.8	28.3	29.1	5.9	0.5
Other and Unallocable	100.0	28.4	38.9	17.5	12.2	3.0
Water Supply Revenue	100.0	6.5	52.0	26.8	12.1	2.7
Water Supply Expenditure	100.0	5.9	57.7	21.7	12.5	2.2
General Debt Outstanding	100.0	39.0	27.1	27.7	5.6	0.6
Long-term	100.0	39.2	26.6	28.0	5.6	0.6
Local Schools	100.0	43.3	17.7	31.1	7.1	0.8
Other	100.0	37.1	31.2	26.4	4.9	0.5



TABLE 2-14 (Cont.)
 Selected Items of Local Government Finances by Population-Size Groups of County Areas for West Virginia, 1966-67

Item	Population-size group (1966 population)					
	100,000 to 249,999	250,000 to 49,999	50,000 to 99,999	10,000 to 24,999	Less than 10,000	
Average Per Capita--Continued						
General Revenue, Excluding Interlocal	164.53	201.05	163.56	157.12	141.77	146.11
Intergovernmental Revenue	69.97	64.13	66.13	68.84	83.20	76.15
From State Government	64.20	57.40	59.97	65.19	75.92	73.50
From Local Sources	94.56	136.93	97.43	88.28	50.57	69.96
Taxes	65.63	96.92	63.44	67.49	40.87	43.36
Property	58.83	79.52	56.76	64.54	39.11	41.60
Other	6.80	17.40	6.69	2.94	1.76	1.76
Charges and Miscellaneous	28.93	40.00	33.99	20.80	17.70	26.60
Direct General Expenditure	162.84	191.82	163.39	156.33	144.52	142.31
Capital Outlay	20.84	24.30	22.35	19.61	19.98	4.35
Other	142.00	167.52	141.04	136.71	124.54	137.95
Education	119.93	114.15	107.20	119.65	110.37	109.69
Other than Capital Outlay	99.79	104.17	94.47	103.06	100.15	105.99
Highways	3.80	5.98	4.49	2.85	1.84	1.65
Other than Capital Outlay	3.32	5.12	3.90	2.64	1.60	1.45
Public Welfare	2.21	2.41	1.52	3.37	2.13	1.68
Hospitals	4.80	0.21	8.23	0.83	5.71	12.01
Other than Capital Outlay	4.20	-	6.11	0.82	2.92	12.01
Health	1.38	2.31	1.31	0.90	1.19	1.07
Police Protection	4.72	7.16	5.14	4.18	2.72	2.18
Fire Protection	2.95	6.89	3.40	1.40	0.51	0.20
Severage	5.14	6.51	7.79	3.25	1.81	1.11
Other than Capital Outlay	2.65	4.33	2.86	2.28	1.34	1.10
Sanitation other than Severage	1.89	4.15	1.66	1.63	0.68	0.42

TABLE 2-14 (Cont.)

Selected Items of Local Government Finances by Population-Size Groups of County Areas for West Virginia, 1966-67

Item	Population-size group (1966 population)					
	100,000 to 249,999	50,000 to 59,999	25,000 to 49,999	10,000 to 24,999	Less than 10,000	
	Total					
			Average Per Capita--Continued			
Parks and Recreation	1.96	2.70	3.18	0.90	0.32	0.61
Natural Resources	0.90	0.28	1.32	0.35	1.47	0.45
Housing and Urban Renewal	1.91	3.73	1.14	0.37	3.76	0.02
Correction	0.73	1.32	0.60	0.66	0.53	0.51
Libraries	1.09	3.90	0.29	0.43	0.74	0.15
Financial Administration	1.80	2.47	1.85	1.40	1.51	1.69
General Control	3.45	4.70	3.40	2.91	2.83	3.56
General Public Buildings	2.42	6.92	1.53	1.11	1.34	1.03
Interest on General Debt	4.10	7.63	3.24	5.53	1.31	0.74
Other and Unallocable	5.66	8.34	6.13	4.60	3.74	3.54
Water Supply Revenue	5.06	1.70	7.34	6.29	3.29	2.83
Water Supply Expenditure	4.67	1.42	7.52	4.70	3.14	2.16
General Debt Outstanding	116.22	235.26	87.77	149.23	35.07	15.00
Long-term	113.35	230.56	83.91	147.03	34.47	15.00
Local Schools	58.69	86.96	19.04	55.76	14.83	6.87
Other	74.66	145.60	64.87	91.27	19.64	8.13

Source: U.S. Bureau of Census, Census of Governments, 1967.

CHAPTER THREE
THE PRESENT STUDY

1. The Research Design

In designing the framework for the study, the guiding principle was that ecological problems are, first and foremost, immediate and personal. Moreover, it was assumed that the frequency and intensity of ecological problems, in health and housing, for example, could be best understood if they could be viewed against the background of different but comparable residential ecosystems. The present research design is an attempt to assess the ecological texture of the environment.

Figure 1 expresses the research model developed for this project. Neighborhood is defined as a geographically bounded and functionally related set of households; community as a geographically bounded and functionally related set of neighborhoods; zone as a geographically bounded and functionally related set of communities and environmental region is defined as geographically bounded and functionally related environmental zones.

An example of a zone in this project would be a county. An example of a particular environmental region would be counties that are contiguous, or in important and specifiable ways share certain commonalities with respect to economic base, population distribution, and other demographic characteristics which highlight qualitative difference between these and other combinations of environmental zones. For example, the farming region of Central West Virginia vs. the coal mining region of Southern West Virginia.

A first, and critical, step in the development of the present project was the choice of different environmental regions; geographic areas which are representative of the region and which had the potential for yielding data that might enable our generalizing to larger segments of the Appalachian region.

Briefly, the environmental regions selected and their characteristics were as follows:

Environmental Region 1 (Northern West Virginia): Zone 1, Monongalia County; Zone 2, Marion County

Economic base: Mixture of heavy mining, manufacturing, higher education

Population distribution: 1 urban center of 25,000 plus; multiple rural communities

Environmental Region 2 (Central West Virginia): Zone 1, Lewis County; Zone 2, Randolph and Pendleton Counties

Economic base: Mixture of light manufacturing, mining, farming

Population distribution: 1 urban center 7,000 to 9,000 each; multiple rural communities

Environmental Region 3 (Southern West Virginia): Zone 1, Boone County; Zone 2, Raleigh County

Economic base: Heavy mining, both deep and surface; light manufacturing

Population distribution: Raleigh County, 1 urban center of 20,000; Boone County, 1 urban center of 2,500; both counties with high density of small rural communities

Through the diversification of each Environmental Region, as indicated in Figure 1, it should be possible to organize the data into related and comparable ecosystems and clusters of ecosystems.

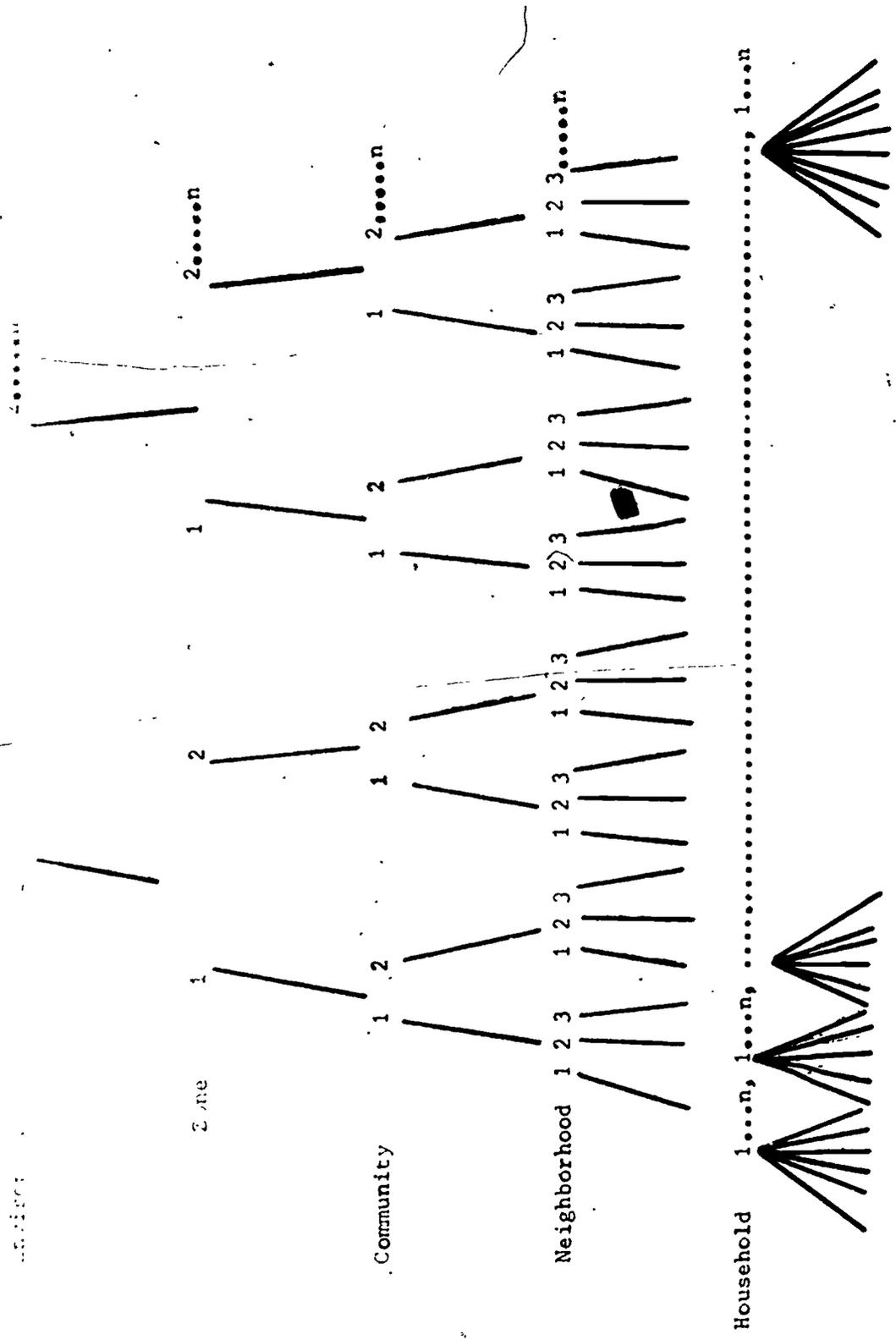


Fig. 1. Stratified Design for Appalachian Human Ecosystems Project.

2. Sampling

In each Zone, or county, quota sampling was used to complete the design indicated in Table 3-1. In each community relatively homogeneous, geographically bounded neighborhoods were selected and mapped. Within each of these neighborhoods, hopefully representing environments of differing ecological texture, including different income levels, a total of approximately 100 households were selected.

The purpose of this method of local sample selection was the same as the purpose that guided the selection of environmental regions; that of representative neighborhoods which have the potential for facilitating the generalizing of findings. Each of these environments consisted of a residential ecosystem, or an intact residential environment in which there were common social and technological relationships between the residents themselves and their surrounding neighborhood environment.

Through the use of quota sampling a rather high proportion of homes in any given residential environment were sampled. This permitted accurate estimates of the density or texture of certain ecological events within that neighborhood, and the comparisons of event density across neighborhood environments, communities, zones, and environmental regions.

3. The Survey Data

The survey research instrument being used was the Neighborhood Environmental Evaluation Decision System (NEEDS), developed by the Bureau of Community Environmental Management. This instrument has been designed to yield a wide array of data dealing with such problems as migration, medical services, births-deaths, mental health, housing, sewage disposal, city services, and neighborhood environmental pollution. NEEDS is a complex,

TABLE 3-1

Quota Sampling at the Community Level

Environmental Region 1				
Zone 1				
	Urban	Neighborhood Income Level		Rural
	Hi	Mid	Lo	Lo
No. Households	100	100	100	100

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but a well-organized instrument to administer for simultaneously gathering the reported incidence per family of this cluster of ecological problems.

The data were gathered through household interviews conducted by part-time staff recruited from the local areas sampled. Approximately 2000 interviews were conducted.

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CHAPTER FOUR

RESULTS

Part One: Health

The research findings related to health indicate that, in the neighborhoods sampled, residents of lower income neighborhoods reported a much greater incidence of health problems than residents of upper income neighborhoods. Further, residents of lower income neighborhoods reported receiving considerably fewer health services than residents of upper income neighborhoods.

These data are highlighted by the following:

A. Health Problems

1. Rural low income neighborhood residents over age 5 reported twice the incidence (43% vs. 22%) of serious health problems reported by urban higher income neighborhood residents. In addition, low income urban neighborhood residents reported an incidence of problems one and one-half times as great (37% vs. 22%) as among the residents of high income neighborhoods (See Table 4-1).
2. Rural low income neighborhood residents over age 5 reported an incidence of serious disabilities which was twice as high as that reported by residents of higher income urban neighborhoods (15% vs. 7%). Similarly, the incidence of serious disabilities among residents of low income urban neighborhoods was about one and one-half times greater (12% vs. 7% than that reported by higher income urban neighborhood residents. (See Table 4-2).

B. Health Services Usage

1. There was a pronounced tendency for upper income urban neighborhood residents to receive more hospital care for serious diseases

than low income neighborhood residents. Conversely, low income neighborhood residents tended to rely on home care for treatment of serious diseases (See Table 4-3).

2. Over twice as many serious disabilities went untreated among rural low income neighborhood residents as among high income urban neighborhood residents (22% vs. 8%). The former group also had the lowest percentage (17%) of hospitalization among all neighborhood groups (See Table 4-4).
3. Special therapy or rehabilitation for diseases occurred at a rate almost twice as great (16% vs. 9%) among high compared with low income neighborhood residents (See Table 4-5).
4. Compared to high and middle income neighborhoods, low income neighborhood residents were two to four times as likely to report time delays and expensive costs as reasons preventing them from using public or private health services (See Table 4-6).
5. The receipt of special therapy or rehabilitation for a disability was lower among low income, as contrasted with upper income, neighborhood residents (See Table 4-7).
6. There was about one-third greater use of private physicians for medical care among upper, as opposed to lower, income neighborhood residents (86% vs. 56%). There was a strong tendency for low income neighborhood residents to use emergency rooms and hospital clinics, facilities which were used at much lower rates by upper income neighborhood residents (See Table 4-8).

C. Health Concerns

1. While the particular health services that people would like to see made available varied, there was a general trend for all income groups to support the development of programs having

the features of home contact, prevention, and early problem detection. Of particular interest were preference for visiting nurses, home care, alcohol and drug clinics, and dental care.

(See Table 4-9)

Other health findings were as follows:

A. Health Problems

1. Tables 4-10, 4-11, 4-12, and 4-13 generally elaborate the major findings that residents of lower income neighborhoods reported a large number of health problems. Of particular interest is Table 4-10, indicating the incidence of health problems for infants immediately following birth.
2. Table 4-11 indicates that 17% of the recent births in the rural low income neighborhood residents had related illnesses or injuries to the mother. The next highest incidence of these injuries or illnesses was 14% among urban high income neighborhood residents.
3. Table 4-12 describes disabilities among children under five years of age; there was a tendency for a greater number of problems to occur among rural low income neighborhood groups than in other groups.
4. Table 4-13 indicates a high level of concern about behavioral and emotional problems of children among parents in all income groups. Overall, these concerns tended to be somewhat lower among middle income neighborhood residents.

B. Health Services Usage

1. All results in this section were described earlier as highlighted findings. Generally, wide discrepancies were found between high and low income neighborhood residents regarding their usage of health and medical services (See Tables 4-3, 4-4, 4-5, 4-7, 4-8).

C. Health Services Availability and Adequacy

1. Table 4-14 shows that small percentages of residents in each income category had found that a needed medical service was unavailable to them. Urban high income neighborhood residents gave the largest (4%) overall response on this item. Lewis County and Boone County were the two areas in which lack of a needed medical service was most frequently reported, particularly among high income neighborhood residents.

D. Family Planning

1. In each income group the percent of people using birth control was approximately equal (Table 4-15).
2. The percentages of people using medically supervised means of birth control (Table 4-16) and consulting a doctor, clinic or family planning service concerning birth control differed across income groups. Urban high income neighborhood residents showed the smallest usage of medically supervised birth control methods and medical services concerning birth control methods, and low income neighborhood residents reported the greatest use of these services (See Table 4-17).

E. Emergency Transportation

1. Private vehicles were cited by all residents as the most likely means of emergency medical transportation.
2. Middle income urban neighborhood residents, however, showed a strong (40%) second preference for emergency vehicles (Table 4-18).

F. Concerns Regarding Health

1. The various patterns of preferences among different income groups for new health services was indicated in the data highlights (See Table 4-9).
2. Most residents reported relatively little dissatisfaction with existing public medical facilities; the largest percentage of dissatisfaction (5%) occurred among residents of urban middle income groups (See Table 4-19).
3. Low income neighborhood residents expressed a concern about the lack of the right kind of food. 39% of the residents of urban low income neighborhoods and 25% of the residents of rural low income neighborhoods expressed this concern (See Table 4-20).

TABLE 4-1

Health Problems Per 100 People 5 Years of Age or Older*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	17		40	51
Marion	2	29	48	48
Lewis	30	37		32
Randolph	23	29	27	38
Pendelton				45
Boone	37	50	23	43 ^a
Raleigh	19		48	39
Total Frequency	$\frac{368}{1708^b}$	$\frac{252}{793}$	$\frac{586}{1588}$	$\frac{591}{1365}$
Average per 100	22	32	37	43

Note: Figures were obtained by dividing the total number of conditions reported by the total number of people in each cell and then multiplying by 100.

*Q38 Has anyone five years of age or older in this household had any of these conditions in the past 12 months? 1. Asthma 2. Tuberculosis 3. Chronic Bronchitis and/or Emphysema 4. Rheumatic fever 5. High blood pressure 6. Stroke 7. Coronary heart disease including heart attack 8. Arthritis or Rheumatism 9. Diabetes 10. Cancer or

Table 4-1 Continued

Leukemia 1. Noticeably overweight 12. Noticeably underweight 13. Repeated attacks of sinus trouble 14. Hardening of the arteries - Cerebral Arteriosclerosis 15. Stomach ulcer (Peptic ulcer disease) 16. Kidney stones 17. Gall bladder trouble, gall stones 18. Treated for mental illness or emotional disorders 19. Diseases of the nervous system other than mental or emotional disorders (Cerebral Palsy, etc.) 20. Chronic skin trouble 21. Hernia or rupture 22. Diseases of female or male genital organs - privates, (Hysterectomy, prostrate troubles, etc.) 23. Cirrhosis of the liver (liver trouble).

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

^bTotal frequency of conditions reported divided by total people.

TABLE 4-2
 Disabilities Per 100 Persons Five Years of Age or Older*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	7		10	17
Marion	4	3	21	14
Lewis	7	10		17
Randolph	12	9	10	23
Pendelton				13
Boone	11	0	15	16 ^a
Raleigh	4		7	5
Total Frequency	$\frac{120}{1708^b}$	$\frac{56}{793}$	$\frac{192}{1588}$	$\frac{206}{1365}$
Average Per 100	7	7	12	15

Note: Figures were obtained by dividing the number of disabilities reported by the total number of people in each cell and then multiplying by 100.

*Q45 Does anyone five years of age or older in this household have any of these conditions? 1. Unable to stand or walk. 2. Deafness or serious trouble hearing with one or both ears. 3. Serious trouble seeing with one or both eyes even when wearing glasses. 4. Cleft palate or

TABLE 4-2 (continued)

Harelip 5. Any speech defect 6. Missing finger or hand or arm or toe or foot or leg. 7. Palsy (chronic shaking or tremor) 8. Paralysis of any kind. 9. Repeated trouble with back or spine 10. Club foot. 11. Permanent stiffness or any deformity of the foot, or leg or finger or arm or back or other areas. 12. Other impairment or disability.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

^bTotal frequency of disabilities reported divided by total people.

TABLE 4-3
 Type of Treatment Received for a Serious Disease
 in the Past 12 Months*

Response	Urban			Rural
	High	Middle	Low	Low
Hospital	20%	18%	16%	12%
Doctor	61%	55	67	58
Home Care	8	13	11	17
None of These	10	14	5	13
Totals	99%	100%	99%	100%

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*Q39-44C Did (person's name) enter the hospital, see a doctor, or receive home care for this condition? (See diseases listed in Table 4-1, Q38.)

TABLE 4-4

Type of Treatment Received for a Serious Disability*

Response	Urban			Rural
	High	Middle	Low	Low
Hospital	24%	24%	24%	17%
Doctor	63	51	61	51
Home Care	5	5	8	9
None of These	8	20	8	22
Totals	100%	100%	101%	99%

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*Q46-51C Did (person's name) enter the hospital, see a doctor, or receive home care for this condition? (See diseases listed in Table 4-2, Q45.)

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TABLE 4-5
 Receipt of Special Training, Therapy or Rehabilitation
 for a Disease in the Last 12 Months*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	5%		9%	11%
Marion	36	4%	6	2
Lewis	1	14		5
Randolph	12	9	16	10
Pendelton				6
Boone	10	30	0	5 ^a
Raleigh	41		10	35
Total Frequency	$\frac{58}{369}$	$\frac{24}{246}$	$\frac{46}{591}$	$\frac{52}{588}$
Average	16%	10%	8%	9%

Note: Percentages were obtained by dividing the number of affirmative responses by the total number of responses.

*Q39-44D Has (person's name) had any special training, therapy or rehabilitation for this condition? (See conditions given in Table 4-2.)

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-5A

Receipt of Special Training, Therapy or Rehabilitation
for a Disability*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	29%		20%	30%
Marion	13	0%	24	23
Lewis	5	36		24
Randolph	29	43	22	11
Pendelton				22
Boone	40	0	10	21 ^a
Raleigh	38		30	27
Total Frequency	$\frac{38}{132}$	$\frac{20}{59}$	$\frac{40}{200}$	$\frac{29}{208}$
Average	29%	34%	18%	24%

Note: Percentages were obtained by dividing affirmative responses by the total number of responses.

*Q46-51D Has (person's name) had any special training, therapy or rehabilitation for this condition? (See conditions given in Table 4-2.)

^aDatum is from a middle income rural Boone County Neighborhood and is not included in column total.

Reasons Preventing Use of a Public or Private
Health or Medical Service*

Response	Urban			Rural
	High	Middle	Low	Low
Had to Wait Too Long	7%	8%	20%	23%
Bad Experience with Health Ctr.	1	0	2	2
Bad Reputation of Health Ctr.	0	1	2	1
See too many people before Dr.	1	0	2	2
Don't Get Same Doctor Regularly	1	1	2	7
Too Expensive	4	4	16	15
Costs too much to get to Health Service	0	1	3	4

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*073&74 While living at this residence, have any of the following reasons prevented you from using a public or private health or medical service or from returning to a health or medical service when requested to by a doctor?

TABLE 4-7
 Receipt of Special Training, Therapy or Rehabilitation
 for a Disability*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	29%		20%	30%
Marion	13	0	24	23
Lewis	5	36		24
Randolph	29	43	22	11
Pendelton				22
Boone	40	0	10	21 ^a
Raleigh	38		30	27
Total Frequency	$\frac{38}{132}$	$\frac{20}{59}$	$\frac{40}{200}$	$\frac{49}{208}$
Average	29%	34%	18%	24%

Note: Percentages were obtained by dividing affirmative responses by the total number of responses.

*Q46-51D Has (person's name) had any special training, therapy or rehabilitation for this condition? (See conditions given in Table 4-2.)

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

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TABLE 4-8
Where Routine Medical Care is Obtained*

Response	Urban			Rural
	High	Middle	Low	Low
Private Physician	86%	83%	61%	56%
Prepaid Medical Facility	0	1	1	10
Community Health Center	0	1	3	6
Health Dept. Clinic	0	3	1	0
Hospital Clinic	11	10	20	18
Hospital Emergency Room	2	0	12	9
Totals	99%	98%	98%	99%

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*Q69 Where do members of this household usually go for medical care when feeling sick or ill?

Health Service Would Like to See Made Available*

Response	Urban			Rural
	High	Middle	Low	Low
Visiting Nurses	9%	16%	11%	10%
Well Baby (Child) Care (inc. immuniz).	4	5	10	5
Home Care & Housekeeping	12	8	8	9
Disease Detection & Care Programs	5	4	6	11
Mental Hlth. Psychiatric Services	7	3	4	3
Family Plan & Birth Control	10	6	6	5
V.D. Clinic & Education	9	12	6	6
Alcohol & Drug Clinic	11	15	8	7
Dental Clinic & Education	6	3	6	15
School Health	3	3	3	4
Nursing, Convalescent Home	8	4	6	7
Child Day Care Ctrs.	4	4	4	4

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*Q75 Which public health service would you most like to see made available to people in this neighborhood?

TABLE 4-10

Percentage of Serious Health Problems during the
First Three Days Following Birth for Children under 24 Months*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		9%	26%
Marion	17	13%	7	11
Lewis	100	14		14
Randolph	0	22	7	11
Pendelton				0
Boone	5	0	17	0 ^a
Raleigh	0		0	0
Total Frequency	$\frac{6}{41}$	$\frac{4}{26}$	$\frac{8}{91}$	$\frac{9}{64}$
Average	7%	15%	9%	14%

Note: Percentages were obtained by dividing the number of problems reported by the number of children younger than 24 months.

*Q22 During the first three days following birth did any child younger than 24 months have any serious problems? (Serious problems include yellow jaundice, breathing difficulty, heart trouble, shakes, bloated stomach, not passing stool, blood in stool or urine, etc.).

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

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TABLE 4-11

Percentage of Serious Illness or Injury to the
Mother Connected with Pregnancy or Delivery of a Child Younger than 24 Months*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		10%	37%
Marion	20	25%	7	0
Lewis	50	0		14
Randolph	67	0	13	22
Pendelton				50
Boone	22	0	6	5 ^a
Raleigh	0		8	0
Total Frequency	$\frac{8}{57}$	$\frac{2}{20}$	$\frac{8}{90}$	$\frac{11}{64}$
Average	14%	10%	9%	17%

Note: Percentages were obtained by dividing the number of illnesses reported by the number of children younger than 24 months in each cell.

*Q23 Was there any serious illness or injury to the mother connected with the pregnancy or delivery of (baby's name)? (Serious illness or injury includes high blood pressure, swelling of feet and ankles, gain of over thirty pounds, kidney infection, heart trouble, convulsions, heavy bleeding before labor and after pregnancy, nausea and vomiting requiring

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Table 4-11 Continued

hospitalization, water broke twelve hours or more before delivery, etc.).

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-12

Disabilities Per 100 Children under 5 Years of Age*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	53		13	24
Marion	13	13	13	13
Lewis	38	28		21
Randolph	7	10	15	5
Pendelton				30
Boone	4	0	28	23 ^a
Raleigh	26		19	71
Total Frequency	$\frac{23}{111^b}$	$\frac{11}{83}$	$\frac{40}{236}$	$\frac{30}{123}$
Average Per 100	21	13	17	24

Note: Figures were obtained by dividing the total number of conditions reported by the number of children younger than five years of age in each cell and then multiplying by 100.

*Q26 How many children under five years of age had any of these conditions in the past 12 months? 1. Unable to stand or walk (for child over one year of age) 2. Deafness or serious trouble hearing with one or both ears 3. Serious trouble seeing with one or both eyes even when wearing glasses. 4. Cleft palate or harelip 5. Any speech defect 6. Missing finger or hand or

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Table 4-12 (Cont.)

arm or toe or foot or leg 7. Palsy (chronic shaking or tremor) 8. Paralysis of any kind 9. Repeated trouble with back or spine 10. Club foot 11. Permanent stiffness or any deformity of the foot or leg or arm or back or other areas 12. Asthma 13. Cerebral Palsy 14. Treated for mental illness or emotional disorders 15. Rheumatic Fever 16. Epilepsy 17. Hepatitis 18. Hernia or rupture 19. Noticeably underweight 20. Other impairment or disability

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

^bTotal frequency of conditions reported divided by total of children under five years of age.

TABLE 4-13

Concerns about Behavioral and Emotional Problems of
Children Between the Ages of 5 and 15 Years Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.17		.19	.36
Marion	.55	.52	.88	.44
Lewis	.56	.11		.22
Randolph	.16	.25	.26	.16
Pendelton				.95
Boone	.85	.00	1.00	.42 ^a
Raleigh	.34		.88	.75
Total Frequency	<u>235</u> 557	<u>88</u> 310	<u>298</u> 548	<u>189</u> 444
Average	.42	.28	.54	.43

Note: Figures were obtained by dividing the number of concerns expressed out of nineteen possible by the number of households per cell.

*Q60 Most children have some of these conditions. For children five years of age and over and less than 15 years of age, please tell me whether you are concerned by the amount or length of time any of these conditions have existed? 1. Won't mind 2. Hyperactive

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Table 4-13 Continued

or can't stick to one thing long enough 3. Easily upset, bad temper, high strung, or nervous 4. Wets the bed or can't toilet train 5. Trouble sleeping, or frequent nightmares 6. Thumbsucking 7. Stuttering 8. Breathholding 9. Frequently swallows things other than food 10. Cries too much 11. Fights too much 12. Clings to mother 13. Breaks things on purpose (destructive) 14. Often depressed, moody or withdrawn 15. Lying 16. Stealing 17. Starts fires 18. Doesn't make friends easily, can't get along with other children, or gets jealous 19. Poor appetite or other eating problems.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-14
Unavailability of Health or Medical Service*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		0%	0%
Marion	0	1%	0	0
Lewis	17	6		3
Randolph	3	2	1	1
Pendelton				0
Boone	10	0	5	8 ^a
Raleigh	0	3		2
Total Frequency	$\frac{24}{557}$	$\frac{8}{310}$	$\frac{7}{548}$	$\frac{4}{444}$
Average	4%	3%	1%	1%

Note: Percentages were obtained by dividing affirmative responses by the total number of responses.

*Q73 (1) While living at this residence, have you ever been prevented from receiving public or private health or medical service because the type of service needed was not available?

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-15

Use of Artificial or Other Methods of Controlling Family Size*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	86%		70%	63%
Marion	68	77%	59	65
Lewis	60	52	36	48
Randolph	57	56		46
Pendelton				40
Boone	70	86	72	63 ^a
Raleigh	52		77	67
Total Frequency	$\frac{172}{271}$	$\frac{68}{108}$	$\frac{152}{239}$	$\frac{95}{167}$
Average	63%	63%	64%	57%

Note: Percentages were obtained by dividing the total number of affirmative responses by the total number of responses.

Q65 Are you using any artificial or other methods of controlling family size?

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-16

Use of Medically Supervised Means of Controlling Family Size*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	57%		61%	53%
Marion	58	74%	52	58
Lewis	35	30		36
Randolph	37	49	27	39
Pendelton				33
Boone	50	71	55	44 ^a
Raleigh	28		71	57
Total Frequency	$\frac{113}{271}$	$\frac{57}{108}$	$\frac{128}{239}$	$\frac{80}{167}$
Average	42%	53%	54%	48%

* Note: Percentages were obtained by dividing the number of responses of a method requiring medical supervision (diaphragm, IUD, pills, vasectomy, tubal ligation) by the total number of responses for all methods.

*Q66 Would you please tell me what methods of controlling family size you are currently using?

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-17

Use of Doctor, Clinic, or Family Planning
Service within Last 2 Years Concerning Birth Control*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	42%		62%	55%
Marion	36	31%	61	49
Lewis	49	48		32
Randolph	43	43	26	41
Pendelton				20
Boone	29	13	43	33 ^a
Raleigh	24		69	32
Total Frequency	$\frac{93}{270}$	$\frac{43}{113}$	$\frac{132}{253}$	$\frac{73}{175}$
Average	34%	38%	55%	42%

Note: Percentages were obtained by dividing affirmative responses by the total number of responses.

*Q67 Have you been to a doctor, clinic, or family planning service within the past two years concerning the use of birth control methods?

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-18

Emergency Medical Care Transportation*

Response	Urban			Rural
	High	Middle	Low	Low
Private Vehicle	84%	54%	69%	71%
Emergency Vehicle	13	40	21	24
Taxi	1	2	6	1
Call Medical Care to Home	1	2	0	2
Totals	99%	98%	96%	98%

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*Q72 If you needed medical care during the night in a hurry, how would you most likely get to a place of medical care?

TABLE 4-19

Dissatisfaction with Public Medical Facilities*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		0%	0%
Marion	5	1%	0	0
Lewis	4	5		1
Randolph	0	8	0	1
Pendelton				0
Boone	2	0	0	6 ^a
Raleigh	0		0	0
Total Frequency	$\frac{10}{557}$	$\frac{14}{310}$	$\frac{0}{548}$	$\frac{2}{444}$
Average	2%	5%	0%	1%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103C On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Public Medical Facilities.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

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TABLE 4-20
Concern about Lack of Good Food*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	2%		12%	21%
Marion	3	1%	24%	33
Lewis	27	20		14
Randolph	5	10	38	36
Pendelton				17
Boone	21	58	84	61 ^a
Raleigh	3		72	24
Total Frequency	$\frac{50}{557}$	$\frac{57}{310}$	$\frac{214}{548}$	$\frac{112}{444}$
Average	9%	12%	39%	25%

Notes: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q106B Please tell me if these conditions exist in this area, and if so whether you are concerned or unconcerned. People do not have enough right kind of food.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

0090

Part Two: Housing

Data in this section define a wide variety of housing conditions and housing deficiencies; typically, the most major and the most frequent occurrence of housing deficiencies were found among homes in low income neighborhoods.

These data are highlighted by the following:

A External Conditions of Housing

1. There were strong and consistent findings detailing very high rates of external housing deficiencies in low, and particularly urban low, income neighborhoods.

This was true for:

- a. roofing (See Table 4-21).
 - b. paint (See Table 4-22).
 - c. chimneys and cornices (See Table 4-23).
 - d. outside walls (See Table 4-24).
 - e. doors and windows broken (See Table 4-25).
 - f. outside porches and stairs rotted or missing (See Table 4-26).
 - g. foundation sagging or leaning (See Table 4-27).
 - h. percentage of households with one or more abandoned motor vehicles (See Table 4-28).
 - i. percentage of households with rubbish accumulation (See Table 4-29).
 - j. percentage of households neglected landscaping (See Table 4-30).
2. Outside wells or cisterns were not frequently reported, but tended to be found in low income neighborhoods (See Table 4-31).
 3. 8 to 10% of all low income households sample reported using pit privys to dispose of human waste (See Table 4-32).

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B. Housing Space

1. One-third of the households of low-income neighborhoods had four or fewer rooms; this was twice the incidence of small houses found among higher income neighborhoods (See Table 4-33).
2. There was a tendency for there to be more people per household in low income neighborhood homes (See Table 4-34).

C. Housing Problems and Deficiencies

1. Low income neighborhood housing had from two to seven times as many deficiencies (e.g., unheated rooms, rooms without electricity or windows, etc.) as housing in higher income neighborhoods (See Table 4-35).
2. Kitchen deficiencies, such as not having a working kitchen sink or running water or the absence of an electric or gas stove or refrigerator, were almost exclusively the problems of homes in low income neighborhoods, with the rate of kitchen deficiencies being highest among rural low income neighborhoods (See Table 4-36).
3. The lack of a working flush toilet inside the house was also a low income neighborhood problem; this problem was particularly evident in rural low income neighborhoods (See Table 4-37).
4. Other bathroom problems (such as sink, tub or shower deficiencies) were also the near exclusive problems of low income neighborhoods, with their greatest incidence occurring among low income rural neighborhood houses (See Table 4-38).

D. Housing Concerns

Residents of both middle and low income neighborhoods expressed concern about the lack of low-cost, low-rent housing at rates two to three times

greater than among residents of most high income neighborhoods. This concern was expressed by one-half of all residents interviewed in low income neighborhoods (See Table 4-39).

Other findings were as follows:

A. Housing Space

1. Data on rooms and people per house were indicated in the housing data highlights (See Tables 4-34 and 4-33).
2. Homes in low income neighborhoods tended to have fewer bedrooms than homes in higher income neighborhoods (See Table 4-40).

B. Housing Problems and Deficiencies

1. Data on general household deficiencies, kitchen and bathroom deficiencies, were presented in the housing data highlights (See Tables 4-35, 4-36, 4-37 and 4-38).
2. Unvented space heaters were found in homes in both middle and low income neighborhoods; they were most frequently found in urban neighborhoods (See Table 4-41).
3. Residents reported the presence of rats within the past year in over one-third of all low income neighborhood interviews. This is a rate four to seven times greater than that reported among middle and high income neighborhoods (See Table 4-42).
4. Evidence of vermin other than rats were infrequently reported (See Table 4-43).

C. Housing Ownership and Costs

1. There was a strong tendency among urban settings for middle and high income neighborhoods to have high rates of home ownership, and in urban low income neighborhoods for about one-third of the

residents to rent. Rural low income neighborhoods were characterized by ownership rather than rental (See Table 4-44).

2. As indicated in Table 4-45, monthly rental costs are generally proportional to neighborhood household income.

D. Housing Concerns

1. Data on concerns about the lack of low-cost, low-rent housing were presented in the housing concern highlights (See Table 4-39).
2. Residents of urban low income neighborhoods reported the greatest frequency of concern with the condition of their neighborhood and its houses (See Table 4-46).
3. Overcrowding in the area was most frequently cited by residents of low income urban neighborhoods (See Table 4-47).
4. Concerns about poor street lighting were most frequently reported by residents of both urban and rural low income neighborhoods (See Table 4-48).
5. Less than one-fifth of the respondents in all neighborhoods reported dissatisfaction with public housing (See Table 4-49).
6. While rodent, pest and dog control were not frequently reported as problems in any neighborhood, they were more often reported in middle and high income neighborhoods (See Table 4-50).
7. Few residents of any neighborhood expressed dissatisfaction with the enforcement of their local housing code (See Table 4-51)

TABLE 4-21

Roof Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.03	.03
Marion	.00	.00	.18	.12
Lewis	.00	.26		.03
Randolph	.00	.02	.24	.08
Pendelton		.06		.17
Boone	.00	.03	.15	.07 ^a
Raleigh	.01		.35	.05
Total Frequency	$\frac{1}{558}$	$\frac{51}{484}$	$\frac{86}{560}$	$\frac{37}{521}$
Average	.00	.11	.15	.07

Note: Figures were obtained by dividing the total number of deficiencies reported by the number of households surveyed.

*Exterior Premise Analysis. Roof: Loose or missing materials; sagging.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-22
Neglected Outside Paint*

County	Urban			Rural
	High	Middle	Low	Low
Mohongalia	.00		.09	.08
Marion	.00	.00	.94	.19
Lewis	.01	.37		.08
Randolph	.00	.06	.16	.06
Pendelton		.06		.86
Boone	.04	.09	.18	.17 ^a
Raleigh	.01		.46	.13
Total Frequency	$\frac{6}{610}$	$\frac{58}{425}$	$\frac{93}{381}$	$\frac{60}{405}$
Average	.01	.14	.24	.15

Note: Figures were obtained by dividing the total number of deficiencies reported by the number of households surveyed.

*Exterior Premise Analysis. Paint: Neglected

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-23
Chimney and Cornice Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.02	.07
Marion	.00	.00	.18	.04
Lewis	.00	.01		.01
Randolph	.00	.00	.20	.05
Fendelton		.00		.00
Boone	.00	.01	.03	.03 ^a
Raleigh	.00		.21	.02
Total Frequency	<u>0</u> 622	<u>3</u> 515	<u>56</u> 563	<u>18</u> 521
Average	.00	.01	.10	.03

Note: Figures were obtained by dividing the total number of deficiencies reported by the number of households surveyed.

*Exterior Premise Analysis. Chimneys and cornices: Cracks, rotted, or missing material; leaning.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-24
Outside Walls Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.06	.06
Marion	.00	.00	.39	.17
Lewis	.00	.14		.04
Randolph	.00	.04	.19	.08
Pendelton		.03		.12
Boone	.03	.03	.13	.14 ^a
Raleigh	.01		.39	.04
Total Frequency	$\frac{4}{622}$	$\frac{33}{515}$	$\frac{106}{563}$	$\frac{43}{521}$
Average	.01	.06	.19	.08

Note: Figures were obtained by dividing the total number of deficiencies reported by the number of households surveyed.

*Exterior Premise Analysis. Outside Walls: Loose or missing material; Rotted or Open Cracks; Leaning.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-25

Door and Window Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.10	.18
Marion	.00	.00	.42	.20
Lewis	.00	.18		.06
Randolph	.01	.08	.31	.40
Pendelton		.08		1.00
Boone	.05	.06	.12	.16 ^a
Raleigh	.00		.54	.12
Total	<u>5</u>	<u>46</u>	<u>127</u>	<u>122</u>
Frequency	622	496	523	481
Average	.01	.10	.24	.25

Note: Figures were obtained by dividing the total number of deficiencies reported by the number of households surveyed.

*Exterior Pre-Inspection Analysis. Doors and Windows. Breaks, Cracks in Panes; Loose or Missing Frames; Screens (Missing, or torn).

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

0099

TABLE 4-26

Porch and Steps Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.13	.22
Marion	.00	.00	.41	.31
Lewis	.01	.26		.08
Randolph	.00	.06	.28	.21
Pendleton		.05		.29
Boone	.07	.03	.14	.25 ^a
Raleigh	.01		.62	.06
Total Frequency	$\frac{9}{622}$	$\frac{59}{515}$	$\frac{151}{563}$	$\frac{98}{521}$
Average	.01	.11	.27	.19

Note: Figures were obtained by dividing the total number of deficiencies reported by the number of households surveyed.

*Exterior Premise Analysis. Outside Proches and Stairs: Rotted, missing or broken materials, open cracks; sagging.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

0100

TABLE 4-27
Foundation Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.04	.07
Marion	.00	.00	.26	.13
Lewis	.04	.02		.01
Randolph	.00	.03	.18	.05
Pendelton		.11		.22
Boone	.03	.04	.14	.14 ^a
Raleigh	.01		.55	.04
Total Frequency	$\frac{7}{619}$	$\frac{14}{508}$	$\frac{93}{534}$	$\frac{37}{499}$
Average	.01	.03	.17	.07

Note: Figures were obtained by dividing the total number of deficiencies reported by the number of households surveyed.

*Exterior Premise Analysis. Foundation: Loose or Missing Material; Open Cracks (Larger than pencil width); Sagging or Leaning.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-28

Percentage Households with One or More Abandoned Motor Vehicles*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		5%	17%
Marion	0	6%	5	10
Lewis	0	0		6
Randolph	0	2	11	0
Pendelton		0		8
Boone	0	18	12	9 ^a
Raleigh	0		17	14
Total Frequency	$\frac{1}{631}$	$\frac{22}{517}$	$\frac{37}{441}$	$\frac{45}{477}$
Average	0%	4%	8%	9%

Note: Percentages were obtained by dividing the total number of affirmative responses by the total number of households surveyed.

*Exterior Premise Analysis. Abandoned Motor Vehicles: One; Two or Three; More than Three.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

0102

TABLE 4-29

Percentage Households with Rubbish Accumulations*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		19%	35%
Marion	0	8%	42	25
Lewis	0	9		4
Randolph	0	2	29	20
Pendelton		0		16
Boone	9	1	32	7 ^a
Raleigh	0		51	7
Total Frequency	$\frac{9}{636}$	$\frac{28}{515}$	$\frac{146}{475}$	$\frac{96}{526}$
Average	1%	5%	31%	18%

Note: Percentages were obtained by dividing the total number of affirmative responses by the total number of households surveyed.

*Exterior Premise Analysis. Rubbish Accumulations: Detracts from the Premise; Detracts from Premise and adjacent property; Detracts from entire block frontage.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-30
Percentage Households with Neglected Landscaping*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		27%	42%
Marion	0	5%	72	25
Lewis	1	26		8
Randolph	0	2	25	23
Pendelton		0		61
Boone	19	12	26	45 ^a
Raleigh	0		76	19
Total Frequency	$\frac{20}{636}$	$\frac{63}{515}$	$\frac{202}{476}$	$\frac{140}{526}$
Average	3%	12%	42%	27%

Note: Percentages were obtained by dividing the total number of affirmative responses by the total number of households surveyed.

*Exterior Premise Analysis. Landscaping: Neglected; Needs Maintenance.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-31
Percentage Households with Outside Well or Cistern*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		1%	0%
Marion	0	0%	0	0
Lewis	0	0		4
Randolph	0	0	13	2
Pendelton		0		48
Boone	1	7	0	19 ^a
Raleigh	0		1	0
Total Frequency	$\frac{1}{620}$	$\frac{5}{513}$	$\frac{14}{557}$	$\frac{26}{519}$
Average	0%	1%	3%	5%

Note: Percentages were obtained by dividing the total number of affirmative responses by the total number of households surveyed.

*Exterior Premise Analysis. Outside Well or Cistern.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

010J

TABLE 4-32
 Percentage Households with Pit Privy*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		5%	15%
Marion	0	0%	0	0
Lewis	0	0		3
Randolph	0	0	9	7
Pendelton		0		17
Boone	0	4	0	6 ^a
Raleigh	0		34	25
Total Frequency	<u>0</u> 620	<u>5</u> 513	<u>45</u> 557	<u>57</u> 519
Average	0%	1%	8%	11%

Note: Percentages were obtained by dividing the total number of affirmative responses by the total number of households surveyed.

*Exterior Premise Analysis. Pit Privy

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

0106

TABLE 4-33

Number of Regularly Occupied Rooms in the House*

Response	Urban			Pural
	High	Middle	Low	Low
1-4	11%	16%	34%	31%
5-7	66	70	60	61
8 or more	23	14	6	8
Totals	100%	100%	100%	100%

*Q77 How many regularly occupied rooms are in your housing unit?

0107

TABLE 4-34
 Number of People Living in the House*

Response	Urban			Rural
	High	Middle	Low	Low
1-3	58%	68%	58%	63%
4-6	39	30	34	30
7 or more	2	2	7	6
Totals	99%	100%	99%	99%

*Q 1 How many people live in this housing unit and have no other usual address at which they live?

TABLE 4-35
Housing Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.04		.07	.17
Marion	.01	.02	1.02	.29
Lewis	.06	.30		.72
Randolph	.03	.14	.53	.27
Pendelton				.52
Boone	.22	.08	.81	.04 ^a
Raleigh	.05		.61	.22
Total Frequency	$\frac{37}{557}$	$\frac{45}{310}$	$\frac{274}{548}$	$\frac{155}{444}$
Average	.07	.15	.50	.35

Note: Figures were derived by dividing the number of reported deficiencies out of a possible seven by the number of households in a cell.

*Data are derived from the combination of two questions: Q78 which, if any, of the following conditions exist in one or more of these regularly occupied rooms?

1. A room with no working heating system provided by the landlord
2. A room without working electricity.
3. A room with no window or no daylight.
4. A room with no windows that can be opened or closed at will and with no mechanical ventilation.

Q92 Does this housing unit have any of the following conditions in any of its rooms? 1. Plumbing leaks 2. Frequent rain water leaks through ceilings, walls, windows or doors 3. Water collects on ceilings, walls, windows or doors

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

0110

TABLE 4-36
Kitchen Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.10	.27
Marion	.00	.00	.11	.07
Lewis	.00	.08		.18
Randolph	.00	.00	.20	.18
Pendelton				.38
Boone	.01	.00	.08	.20 ^a
Raleigh	.00		.28	.36
Total Frequency	$\frac{2}{557}$	$\frac{7}{310}$	$\frac{79}{548}$	$\frac{98}{444}$
Average	.00	.02	.14	.22

Note: Figures were obtained by dividing the number of reported deficiencies out of six possible by the number of households.

*Q90 Is there a kitchen sink inside this housing unit?

Does it provide hot and cold running water and drain away waste water?

Is there a gas or electric kitchen stove inside this housing unit?

Does it work?

Is there a mechanical refrigerator inside the housing unit? Is it in working order?

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-37

Percentage of Households Reporting Lack of a Working Flush Toilet*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		12%	24%
Marion	0	0%	5	5
Lewis	0	0		23
Randolph	0	0	12	13
Pendelton				28
Boone	0	0	4	20 ^a
Raleigh	0		30	67
Total Frequency	$\frac{1}{557}$	$\frac{0}{310}$	$\frac{68}{548}$	$\frac{106}{444}$
Average	0%	0%	12%	23%

Note: Percentages were obtained by dividing the number of reported deficiencies by the number of households.

*Q91 Is there a flush toilet inside your housing unit? Does it Work?

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-38

Bathroom Sink, Tub or Shower Deficiencies Per Household*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	.00		.25	.85
Marion	.00	.00	.40	.25
Lewis	.00	.11		.43
Randolph	.00	.02	.40	.64
Pendelton				.57
Boone	.00	.08	.06	.49 ^a
Raleigh	.00		.66	1.45
Total Frequency	<u>0</u> 557	<u>12</u> 310	<u>178</u> 548	<u>291</u> 444
Average	.00	.04	.32	.65

Note: Figures were obtained by dividing the number of reported deficiencies out of three possible by the number of households.

*091 Is there a bathroom sink inside your housing unit? Does it provide hot and cold running water and drain away waste water? Is there a bathtub or shower inside your housing unit?

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

0113

TABLE 4-39

Concern about Lack of Low-Cost, Low-Rent Housing*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	13%		38%	27%
Marion	0	39%	35	57
Lewis	51	61		67
Randolph	16	44	37	58
Pendleton				45
Boone	17	75	87	64 ^a
Polk	6		74	53
Total Frequency	$\frac{88}{557}$	$\frac{115}{310}$	$\frac{279}{548}$	$\frac{221}{444}$
Average	16%	37%	51%	50%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105G For each condition I'm about to read, please tell me if the condition exists and if it does exist whether you are concerned or unconcerned about it. There is not enough low-cost, low-rent housing in the area.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-40
Number of Bedrooms in the House*

Response	Urban			Rural
	High	Middle	Low	Low
0-1	1%	7%	8%	9%
2-3	73	74	80	75
over 4	25	18	10	15
Totals	99%	99%	98%	99%

*Q81 How many bedrooms do you have? Count rooms used only for sleeping.

TABLE 4-41

Percentage of Households with Unvented Space Heaters*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		10%	10%
Marion	0	2	44	14
Lewis	0	22		3
Randolph	0	9	13	11
Pendelton				0
Boone	6	31	7	27 ^a
Raleigh	0		7	2
Total Frequency	$\frac{6}{545}$	$\frac{38}{308}$	$\frac{79}{530}$	$\frac{34}{435}$
Average	1%	12%	15%	8%

Note: Percentages were obtained by dividing the number of interview observations of unvented space heaters by the number of households per cell.

*Q 115 Unvented space heaters present? (Observed by the interviewer either by walking about the housing unit after obtaining permission, or by observing from the spot where the interview was conducted in the event that permission to move about is not granted).

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-42
 Percentage of Households Reporting Presence of Rats*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	10%		31%	58%
Marion	3	2%	36	21
Lewis	3	8		18
Randolph	1	7	36	16
Pendelton				48
Boone	9	83	37	32 ^a
Raleigh	5		63	58
Total Frequency	$\frac{128}{557}$	$\frac{27}{310}$	$\frac{210}{548}$	$\frac{154}{444}$
Average	5%	8%	38%	35%

Note: Percentages were obtained by dividing the number of affirmative responses by the number of households per cell.

*Q89 Within the last year, have you seen any rats or signs of rats in or near this building?

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-43

Percentage of Households with Presence of Vermin other than Rats*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	10%		1%	0%
Marion	0	0	19	0
Lewis	0	1		1
Randolph	1	1	0	0
Pendelton				2
Boone	5	0	8	0 ^a
Raleigh	0		9	2
Total Frequency	$\frac{14}{557}$	$\frac{2}{310}$	$\frac{35}{548}$	$\frac{3}{444}$
Average	3%	1%	6%	1%

Note: Percentages were obtained by dividing the number of interviewer observations of vermin by the number of households per cell.

*Q117 (Observed by the interviewer, either by walking about the housing unit after obtaining permission, or by observing from the spot where the interview was conducted in the event that permission to move about is not granted.) Other vermin or vermin signs observed?

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-44
Home Ownership*

Response	Urban			Rural
	High	Middle	Low	Low
Rented	9%	19%	31%	17%
Cooperative	0	1	4	0
Owned	82	78	57	71
Occupied, no rent	2	1	5	7
Totals	93%	99%	97%	95%

*93 Is your housing unit--1) rented for cash rent 2) a cooperative or condominium which is owned or being bought by you or someone else in this household 3) owned or being bought by you or someone else in this household 4) occupied without payment of cash rent

TABLE 4-45
Monthly Rent Costs*

Response	Urban			Rural
	High	Middle	Low	Low
\$0-49	24%	45%	61%	77%
\$50-99	41	48	34	22
\$100-149	22	3	5	0
\$150-199	11	3	0	1
Totals	98%	99%	100%	100%

*Q94 Which of the following categories best describe this household's monthly rent?

TABLE 4-46

Concern about Condition of Neighborhood and Its Houses*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	32%		13%	14%
Marion	3	0%	43	12
Lewis	5	27		30
Randolph	3	9	26	23
Pendelton				10
Boone	20	58	20	25 ^a
Raleigh	2		82	16
Total Frequency	$\frac{56}{557}$	$\frac{40}{310}$	$\frac{167}{548}$	$\frac{73}{444}$
Average	10%	13%	30%	16%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105H For each condition I'm about to read, please tell me if the condition exists and if it does exist whether you are concerned or unconcerned about it. The condition of the neighborhood and its houses is unsatisfactory.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-47
Concern about Overcrowding in the Area *

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		8%	2%
Marion	3	0%	5	12
Lewis	8	8		1
Randolph	0	9	20	7
Pendelton				2
Boone	18	25	21	26 ^a
Raleigh	1		7	5
Total Frequency	$\frac{24}{557}$	$\frac{21}{310}$	$\frac{64}{548}$	$\frac{24}{444}$
Average	4%	7%	12%	5%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105I For each condition I'm about to read, please tell me if the condition exists, and if it does exist whether you are concerned or unconcerned about it. The area is overcrowded.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-48
Concern about Poor Street Lighting*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	12%		18%	51%
Marion	4	5%	42	22
Lewis	27	25		14
Randolph	14	26	69	8
Pendelton				10
Boone	23	17	13	40 ^a
Raleigh	1		87	45
Total Frequency	$\frac{65}{557}$	$\frac{58}{310}$	$\frac{214}{548}$	$\frac{116}{444}$
Average	12%	19%	39%	26%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105J For each condition I'm about to read please tell me if the condition exists, and if it does exist whether you are concerned or unconcerned about it. Poor street lighting.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-49
Dissatisfaction with Public Housing*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	13%		12%	7%
Marion	1	1%	15	20
Lewis	57	35		16
Randolph	8	20	2	30
Pendelton				19
Boone	27	0	13	8 ^a
Raleigh	5		11	22
Total Frequency	$\frac{93}{557}$	$\frac{59}{310}$	$\frac{59}{548}$	$\frac{81}{444}$
Average	17%	17%	11%	18%

Note: Percentages were obtained by dividing dissatisfied responses by the total number of responses.

*Q104J Please tell me whether you are satisfied or dissatisfied with these services. Public Housing.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-50
Dissatisfaction with Rodent, Pest and Dog Control*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	2%		0%	0%
Marion	3	2%	2	0
Lewis	8	7		3
Randolph	5	7	0	4
Pendelton				0
Boone	9	8	0	3 ^a
Raleigh	1		0	0
Total Frequency	$\frac{22}{557}$	$\frac{17}{310}$	$\frac{2}{548}$	$\frac{5}{444}$
Average	4%	6%	0%	1%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103G On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Rodent, Pest and Dog Control.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-51

Dissatisfaction with Housing Code Inspection*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	2 ^a		0%	0%
Marion	7	0%	3	0
Lewis	0	4		3
Randolph	0	1	1	0
Pendelton				0
Boone	4	0	0	1
Raleigh	1		0	0
Total Frequency	$\frac{11}{557}$	$\frac{4}{310}$	$\frac{4}{548}$	$\frac{2}{444}$
Average	2%	1%	1%	1%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103F On the basis of your own experience, or from what you've read, please tell me whether you are satisfied or dissatisfied with the following services. Housing Code Inspection.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

Part Three: Human Services

This section contains data, largely attitudinal, regarding neighborhood residents' views of various human services, both private and public, in their communities. While feelings of satisfaction or dissatisfaction with dimensions of community life varied, depending upon the particular neighborhood and questionnaire item being focused upon, there was a strong tendency for residents from both urban and rural low income neighborhoods to report dissatisfaction and concern with numerous human services.

These data are highlighted by the following:

A. Recreation

1. Virtually one-third of the residents of all neighborhoods expressed dissatisfaction with recreation for children, teenagers, and adults (See Tables 4-52, 4-53, and 4-54).
2. Over 40% of the respondents in middle and low income neighborhoods expressed their concern with the lack of neighborhood parks and playgrounds, a problem about which only 20% of the residents of urban high income neighborhoods expressed concern (See Table 4-55).

B. Transportation

1. Over 20% of middle and low income households sampled were without a means of private transportation (See Table 4-56).
2. While there was a tendency for residents of middle income neighborhoods to voice dissatisfaction with public transportation, this was most typical of residents of middle and high income neighborhoods in Lewis, Randolph, and to some extent, Marion, counties (See Table 4-57).

3. Considerable dissatisfaction with street and road conditions and maintenance were expressed by residents of all neighborhoods, ranging from about one-fifth of the high income urban neighborhood respondents to one-half of the low income rural neighborhood respondents (See Table 4-58).

C. Commerce

1. Residents of low income neighborhoods, particularly low income rural neighborhoods, were concerned about the inconvenience of their neighborhood to transportation, shopping, schools and other services (See Table 4-59).
2. Residents of low income neighborhoods, particularly rural neighborhoods, were concerned about harsh policies of their neighborhood stores (See Table 4-60).
3. Concern about a lack of neighborhood food stores was true of certain neighborhoods at all income levels, but was particularly noticeable among low income neighborhoods (See Table 4-61).
4. Almost one-half of all respondents in low income urban neighborhoods were concerned about the lack of neighborhood drug stores; the concern was shared by residents of low income rural neighborhoods (See Table 4-62).
5. Residents of low income neighborhoods were concerned about the lack of neighborhood laundromats (See Table 4-63).

D. Income and Employment

1. Table 4-64 indicates the percent of households in all neighborhoods falling within each of the three income brackets in the present study. In effect, this table serves to validate the initial categorizing of neighborhoods.

2. Lack of income was a pervasive concern among low income neighborhood residents. This concern was from four to five times as great among all low income neighborhoods as among all high income neighborhoods (See Table 4-65).
3. Lack of work or working hours was a pervasive concern among residents of low income neighborhoods (See Table 4-66).

iv. Local Government

1. There was a tendency for direct political or social action to deal with neighborhood conditions to have been taken by residents of lower rather than upper income neighborhoods (See Table 4-67).
2. The residents of high and middle income urban neighborhoods felt themselves represented in local government to a greater extent than did residents of low income urban and rural neighborhoods (See Table 4-68).
3. Virtually all neighborhoods reported a concern about a lack of police protection in their neighborhood (See Table 4-69).

Other findings regarding human services were as follows:

v. Recreation

1. All recreation findings were indicated in the data highlights (See Tables 4-54, 4-53, 4-52, 4-55).

Transportation

1. Ownership of vehicles and concerns with public transportation and street conditions were indicated in the data highlights (See Tables 4-56, 4-57 and 4-58).
2. A concern with traffic conditions was reported in all samples, but was particularly true of middle and high income urban neighborhoods (See Table 4-70).

C. Commerce

1. Commerce related findings were reported in the data highlights (See Tables 4-59, 4-62, 4-60, 4-63, 4-61).
2. Rural low income neighborhoods were particularly concerned about the presence of too many bars in the area of the neighborhood (See Table 4-71).

D. Income and Employment

1. Data regarding income and employment were indicated in the data highlights (See Tables 4-64, 4-65, and 4-66).
2. Table 4-70 indicates sources of income for all samples; the major difference across income groups was in the tendency for high income neighborhood residents to be self-employed.
3. No neighborhood sample seemed dissatisfied with employment services (See Table 4-73).

E. Local Government

1. Findings regarding social action, representation in government, and lack of police protection were reported in the data highlights (See Tables 4-67, 4-68, and 4-69).
2. With the exception of 3 neighborhoods in Boone County, there was little concern about overactive neighborhood action groups (See Table 4-74).
3. With the exception of neighborhoods in Boone County, there was little concern about elders running neighborhood programs (See Table 4-75).
4. A number of low income urban and rural neighborhoods, as well as high and middle income neighborhoods in Boone County, were

concerned that neighborhood action groups did not represent the people's interests (See Table 4-76).

5. While most respondents in all neighborhoods reported that the police treated them fairly, this was less true for rural neighborhoods (See Table 4-77).
6. Few people were dissatisfied with existing levels of police protection (See Table 4-78).
7. With the exception of one middle income urban neighborhood in Randolph County, most neighborhood residents reported satisfaction with their courts (See Table 4-79).
8. About one-fifth of the residents of middle and low income neighborhoods expressed dissatisfaction with jails, correctional facilities and probation. With the exception of one rural low income neighborhood, few low income residents expressed this attitude (See Table 4-80).
9. Virtually all respondents expressed satisfaction with fire protection (See Table 4-81).
10. With the exception of one middle income urban neighborhood, virtually all residents expressed satisfaction with water, light, and power services (See Table 4-82).
11. Middle income urban neighborhood residents tended to express more concern with their schools than did residents of high or low income neighborhoods. This concern was virtually unexpressed among low income neighborhoods (See Table 4-83).
12. A greater number of residents of middle and high income neighborhoods expressed concern with welfare and public assistance administration than residents of low income neighborhoods (See Table 4-84).

F. Sanitation and Pollution Control

1. Considerable dissatisfaction was expressed regarding sewage disposal; this was less true of residents of low income urban neighborhoods than of other neighborhood samples (See Table 4-85).
2. Few neighborhood residents expressed dissatisfaction with trash or garbage collection (See Tables 4-86 and 4-87).
3. Both air and water pollution controls were sources of dissatisfaction among urban and rural neighborhood residents. These concerns were more frequently expressed regarding water pollution (See Tables 4-88 and 4-89).

TABLE 4-52

Dissatisfaction with Recreation for Children*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	24%		23%	22%
Marion	24	15%	28	33
Lewis	90	61		51
Randolph	12	34	19	50
Pendelton				48
Boone	60	17	47	31 ^a
Raleigh	29		25	38
Total Frequency	<u>214</u> 557	<u>108</u> 310	<u>150</u> 548	<u>172</u> 444
Average	38%	35%	27%	39%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q104D Please tell me whether you are satisfied or dissatisfied with these services. Recreation for Children.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-53

Dissatisfaction with Recreation for Teenagers *

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	26%		26%	23%
Marion	29	18%	29	34
Lewis	86	65		42
Randolph	19	34	18	55
Pendelton				50
Boone	59	17	51	31 ^a
Raleigh	30		20	31
Total Frequency	$\frac{222}{557}$	$\frac{114}{310}$	$\frac{157}{548}$	$\frac{168}{444}$
Average	40%	37%	29%	38%

Note: Percent ages were obtained by dividing "dissatisfied" responses by the total number of responses.

*0104C Please tell me whether you are satisfied or dissatisfied with these services. Recreation for Teenagers.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-54

Dissatisfaction with Recreation for Adults *

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	11%		23%	12%
Marion	11	8%	27	32
Lewis	15	55		59
Randolph	18	34	10	50
Pendelton				24
Boone	61	17	51	31 ^a
Raleigh	21		22	25
Total Frequency	<u>173</u> 557	<u>97</u> 310	<u>142</u> 548	<u>150</u> 444
Average	31%	31%	26%	34%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*0104B Please tell me whether you are satisfied or dissatisfied with these services. Recreation for Adults.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-55

Concern about Lack of Neighborhood Parks and Playgrounds*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	17%		36%	60%
Marion	0	21%	17	27
Lewis	51	55		53
Randolph	9	46	39	39
Pendelton				50
Boone	45	58	47	83 ^a
Raleigh	7		84	64
Total Frequency	$\frac{111}{557}$	$\frac{128}{310}$	$\frac{231}{544}$	$\frac{210}{444}$
Average	20%	41%	42%	47%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*O105K For each condition I'm about to read, please tell me if the condition exists, and if it does exist whether you are concerned or unconcerned about it. Neighborhood does not have enough adequate parks and playgrounds.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

0136

TABLE 4-56

Ownership of Car, Truck, or Motorcycle*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	88%		85%	82%
Marion	95	68%	47	
Lewis	96	78		80
Randolph	97	82	72	66
Pendelton				97
Boone	92	92	77	85 ^a
Raleigh	95		62	69
Total Frequency	<u>523</u> 567	<u>239</u> 311	<u>378</u> 524	<u>343</u> 440
Average	94%	77%	72%	78%

Note: Percentages were obtained by dividing affirmative responses by the total number of responses.

*Q70 Do you or someone in this household own a working car, truck, motorcycle or motor scooter?

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-57

Dissatisfaction with Public Transportation*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		3%	0%
Marion	7	5%	1	0
Lewis	22	14		4
Randolph	3	39	0	7
Pendelton				0
Boone	2	0	0	5 ^a
Raleigh	0		0	2
Total Frequency	$\frac{25}{557}$	$\frac{63}{310}$	$\frac{7}{548}$	$\frac{9}{444}$
Average	5%	20%	1%	2%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103J On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Public Transportation.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-58

Dissatisfaction with Street and Road Conditions and Maintenance*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	27%		26%	52%
Marion	11	38%	62	70
Lewis	58	38		28
Randolph	19	18	32	61
Pendelton				33
Boone	13	8	35	11 ^a
Raleigh	13		7	38
Total Frequency	$\frac{124}{557}$	$\frac{90}{310}$	$\frac{173}{548}$	$\frac{221}{444}$
Average	22%	29%	32%	50%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q104F Please tell me whether you are satisfied or dissatisfied with these services. Street and Road Conditions and Maintenance.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-59
 Concern about Inconvenience of Neighborhood to
 Transportation, Shopping, Schools, and Other Services*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	8%		14%	48%
Marion	1	1%	14	12
Lewis	18	13		54
Randolph	0	11	15	51
Pendelton				24
Boone	17	33	4	55 ^a
Raleigh	0		63	16
Total Frequency	$\frac{36}{557}$	$\frac{29}{310}$	$\frac{106}{548}$	$\frac{156}{444}$
Average	6%	9%	19%	35%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105A For each condition I am about to read, please tell me whether or not the condition exists, and if it does exist whether you are concerned or unconcerned about it. Neighborhood is inconvenient to transportation, shopping, schools, and other services.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-60

Concern about Harsh Policies of Neighborhood Stores*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	5%		9%	37%
Marion	0	1%	2	8
Lewis	18	11		41
Randolph	1	9	17	24
Pendelton				21
Boone	16	42	19	28 ^a
Raleigh	1		62	53
Total Frequency	$\frac{34}{557}$	$\frac{26}{310}$	$\frac{101}{548}$	$\frac{130}{444}$
Average	6%	8%	18%	29%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105C For each condition I'm about to read, please tell me whether or not the condition exists, and if it does exist whether you are concerned or unconcerned about it. Policies of neighborhood stores are hard on people.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-61
Concern about Lack of Neighborhood Food Stores*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	2%		14%	20%
Marion	0	0%	20	0
Lewis	32	19		45
Randolph	1	7	18	16
Pendelton				17
Boone	22	50	38	49 ^a
Raleigh	1		62	5
Total Frequency	$\frac{28}{557}$	$\frac{30}{310}$	$\frac{145}{548}$	$\frac{75}{444}$
Average	5%	10%	26%	17%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*0105F For each condition I'm about to read, please tell me whether or not the condition exists, and if it does exist whether you are concerned about it. Neighborhood does not have enough food stores.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-62

Concern about Lack of Drug Stores in the Neighborhood*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	26%		46%	40%
Marion	1	9%	12	48
Lewis	2	0		52
Randolph	1	4	13	62
Pendelton				62
Boone	17	50	3	27 ^a
Raleigh	1		79	31
Total	<u>23</u>	<u>20</u>	<u>178</u>	<u>216</u>
Frequency	557	310	548	444
Average	4%	6%	32%	49%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105B For each condition I'm about to read, please tell me whether or not the condition exists, and if it does exist whether you are concerned or unconcerned about it. Neighborhood does not have enough drug stores.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-63

Concern about Lack of Neighborhood Laundromats*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	2%		20%	31%
Marion	1	3%	24	1
Lewis	8	4		57
Randolph	3	6	18	36
Pendelton				17
Boone	20	58	6	17 ^a
Raleigh	34		67	45
Total Frequency	$\frac{79}{557}$	$\frac{20}{310}$	$\frac{135}{548}$	$\frac{132}{444}$
Average	14%	6%	25%	30%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q105D For each condition I'm about to read, please tell me whether or not the condition exists, and if it does exist whether you are concerned or unconcerned about it. Neighborhood does not have enough laundromats.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-64
Total Yearly Income before Taxes*

Response	Urban			Rural
	High	Middle	Low	Low
\$0-4900	8%	23%	59%	53%
\$4900-10000	36	55	34	39
\$10,000 +	56	22	8	8
Totals	100%	100%	101%	100%

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*Q101 Including salaries, wages, and all other sources of income, which of the following categories best describe this household's total yearly income before taxes?

TABLE 4-65
Concern about Lack of Income*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	3		33%	34 ^a
Marion	3	27	50	57
Lewis	39	42		38
Randolph	11	33	64	57
Pendelton				50
Boone	15	58	93	7 ^a
Raleigh	1		88	64
Total Frequency	$\frac{60}{557}$	$\frac{88}{310}$	$\frac{323}{548}$	$\frac{218}{444}$
Average	11%	28%	59%	49%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q106A: "If the conditions exist in this area, and if so whether you are concerned or unconcerned. People do not have enough income."

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

0140

TABLE 4-66
Concern about Lack of Work or Working Hours*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		24%	18%
Marion	0	3%	24	41
Lewis	30	26		14
Randolph	7	24	39	65
Pendelton				31
Boone	15	42	88	75
Raleigh	3		84	38
Total Frequency	<u>46</u> 557	<u>58</u> 310	<u>236</u> 548	<u>152</u> 444
Average	8%	19%	43%	34%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q106C Please tell me if these conditions exist in this area, and if so whether you are concerned or unconcerned. People do not have enough work or working hours.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-67
Political and Social Action*

Response	Urban			Rural
	High	Middle	Low	Low
Called or written an official	17%	11%	13%	18%
Formed or attended a neighborhood organization	9	4	9	15
Signed a petition	27	15	20	38
Tried to do something myself	6	5	5	6
Talked to landlord	2	2	10	3
Gave money to help	25	22	28	48

*0107 There are many ways of trying to deal with conditions in a neighborhood. In attempting to deal with neighborhood conditions, have you ever done any of the following in this neighborhood?

0148

TABLE 4-68
Representation in Local Government*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	86%		84%	20%
Marion	77	83%	48	53
Lewis	58	72		45
Randolph	14	93	50	57
Pendelton				52
Boone	79	100	78	43 ^a
Raleigh	90		12	51
Total Frequency	$\frac{418}{557}$	$\frac{257}{310}$	$\frac{337}{548}$	$\frac{199}{444}$
Average	75%	83%	61%	45%

Note: Percentages were obtained by dividing "agree" responses by the total number of responses.

*110A Please tell me whether you agree or disagree with each of the following statements. The people in this neighborhood are represented in the local government.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-69

Lack of Police Protection in the Neighborhood*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	41%		56%	56%
Marion	47	61%	42	47
Lewis	52	34		37
Randolph	24	32	52	73
Fendelton				26
Boone	34	50	21	55 ^a
Raleigh	59		67	47
Total Frequency	<u>252</u> 557	<u>131</u> 310	<u>266</u> 548	<u>220</u> 444
Average	45%	42%	49%	50%

Note: Percentages were obtained by dividing "agree" responses by the total number of responses.

*0110C Please tell me whether you agree or disagree with each of the following statements. There is not enough police protection in this neighborhood.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-70

Dissatisfaction with Traffic Conditions*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	48%		30%	35%
Marion	19	23%	22	17
Lewis	57	31		11
Randolph	32	32	13	30
Pendelton				5
Boone	24	33	41	9 ^a
Raleigh	30		12	7
Total Frequency	<u>193</u> 557	<u>89</u> 310	<u>138</u> 548	<u>86</u> 444
Average	35%	29%	25%	19%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q104G Please tell me whether you are satisfied or dissatisfied with these services. Traffic Conditions.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

0151

TABLE 4-71
Concern about too Many Area Bars*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		11%	20%
Marion	1	2%	5	40
Lewis	23	25		61
Randolph	8	13	6	38
Pendelton				10
Boone	23	58	24	52 ^a
Raleigh	2		4	35
Total Frequency	$\frac{47}{557}$	$\frac{45}{310}$	$\frac{58}{548}$	$\frac{157}{444}$
Average	8%	15%	11%	35%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*0105E For each condition I'm about to read, please tell me whether or not the condition exists, and if it does exist whether you are concerned or unconcerned about it. Too many bars in the area.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

Sources of Income *

Response	Urban			Rural
	High	Middle	Low	Low
Salary or Wages	52%	45%	46%	41%
Self Employment, Rent Investments Dividends Inheritance	22	13	5	3
Old Age Assistance Benefits	1	0	3	1
Soc. Sec.-- Special Benefits for Persons 72+	2	2	5	3
Soc. Sec.-- Ret. Ins. & R.R. Ret.	11	16	12	15
Soc. Sec.-- Survivor's Insurance	4	9	9	6
Soc. Sec.-- Disability Insurance	2	3	5	5
Pensions	3	6	6	6
A.D.C.	0	1	5	3
Unemployment Comp.	0	1	1	3
Veteran's Cash Benefits	3	2	3	5
Totals	100%	98%	99%	97%

Note: Percentages were obtained by dividing the number of responses in each category by the total number of responses.

*Q76 During the past year, which of the following sources have you or any members of this household received income from:

TABLE 4-73

Dissatisfaction with Employment Services*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	2%		1%	0%
Marion	0	0%	2	0
Lewis	3	2		1
Randolph	1	6	0	1
Pendelton				0
Boone	4	0	0	6 ^a
Raleigh	0		0	2
Total Frequency	$\frac{8}{557}$	$\frac{9}{310}$	$\frac{1}{548}$	$\frac{3}{444}$
Average	1%	3%	0%	1%

Note: Percentages were obtained by dividing dissatisfied responses by the total number of responses.

*Q103L On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Employment Services.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-74

Concern about Over-Activity of Neighborhood Action Groups*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		5%	0%
Marion	1	0%	3	2
Lewis	0	2		3
Randolph	1	1	1	0
Pendelton				0
Boone	15	42	2	11 ^a
Raleigh	1		5	5
Total Frequency	$\frac{17}{557}$	$\frac{8}{310}$	$\frac{19}{548}$	$\frac{7}{444}$
Average	3%	3%	3%	2%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*Q106D Please tell me if these conditions exist in this area, and if so whether you are concerned or unconcerned. Neighborhood action groups are too active.

^aDatum is from a middle income rural Boone County neighborhood and are not included in column total.

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TABLE 4-75

Concern about Outsiders Running Neighborhood Programs*

County	Urban			Rural
	High	Middle	Low	Low
Boone	3%		2%	0%
...	1	0%	5	0
...	4	2		7
...	0	0	2	1
...				5
...	12	42	5	6 ^a
...	4		8	11
Total	$\frac{23}{557}$	$\frac{7}{310}$	$\frac{20}{548}$	$\frac{14}{444}$
	4%	2%	4%	3%

Notes: Percentages were obtained by dividing "concerned" responses by total number of responses.

* Question: Please tell me if these conditions exist in this area, and whether you are concerned or unconcerned. Too many neighborhood programs run by outsiders.

^a Data is from a middle income rural Boone County neighborhood and

* included in column total.

TABLE 4-76

Concern that Neighborhood Action Groups Do
Not Represent or Act in the People's Interests*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	3%		5%	0%
Marion	3	0%	9	1
Lewis	4	4		8
Randolph	1	0	2	1
Pendleton				0
Boone	12	33	14	12 ^a
Raleigh	4		13	18
Total Frequency	$\frac{25}{557}$	$\frac{7}{310}$	$\frac{43}{544}$	$\frac{18}{444}$
Average	4%	2%	8%	4%

Note: Percentages were obtained by dividing "concerned" responses by the total number of responses.

*0106F Please tell me if these conditions exist in this area, and if so whether you are concerned or unconcerned. Neighborhood action groups do not represent or act in the people's interests.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-77

Fair Police Treatment of Neighborhood People*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	87%		85%	66%
Marion	87	95%	77	77
Lewis	91	84		62
Randolph	88	96	90	78
Pendelton				86
Boone	84	92	88	44 ^a
Raleigh	75		82	84
Total Frequency	$\frac{467}{557}$	$\frac{285}{310}$	$\frac{463}{548}$	$\frac{329}{444}$
Average	84%	92%	85%	74%

Note: Percentages were obtained by dividing "agree" responses by the total number of responses.

*0110B Please tell me whether you agree or disagree with the following statements. Police treat the people of this neighborhood fairly.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-78

Dissatisfaction with Police Protection*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		0%	0%
Marion	1	0%	2	0
Lewis	9	4		0
Randolph	3	3	0	1
Pendelton				0
Boone	2	17	0	4 ^a
Raleigh	0		1	2
Total Frequency	$\frac{12}{557}$	$\frac{8}{310}$	$\frac{3}{548}$	$\frac{2}{444}$
Average	2%	2%	1%	1%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*0103H On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Police Protection.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-79

Dissatisfaction with Courts*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	5%		2%	5%
Marion	1	1%	5	3
Lewis	10	4		7
Randolph	3	24	1	3
Pendelton				17
Boone	12	8	3	3 ^a
Raleigh	5		7	4
Total Frequency	$\frac{33}{557}$	$\frac{33}{310}$	$\frac{18}{548}$	$\frac{24}{444}$
Average	6%	11%	3%	5%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q104I Please tell me whether you are satisfied or dissatisfied with these services. Courts

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-80

Dissatisfaction with Jails, Correctional Facilities and Probation*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	10%		4%	2%
Marion	0	4%	6	2
Lewis	53	35		9
Randolph	4	26	2	5
Pendelton				26
Boone	27	25	3	13 ^a
Raleigh	5		9	4
Total Frequency	$\frac{84}{557}$	$\frac{68}{310}$	$\frac{24}{548}$	$\frac{28}{444}$
Average	15%	22%	4%	6%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*0104K Please tell me whether you are satisfied or dissatisfied with the following services. Jails, Correctional Facilities, and Probation.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-81
Dissatisfaction with Fire Protection*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		0%	0%
Marion	1	0%	2	0
Lewis	0	0		0
Randolph	3	0	0	0
Pendelton				0
Boone	1	0	0	0 ^a
Raleigh	0		0	0
Total Frequency	$\frac{4}{557}$	$\frac{0}{310}$	$\frac{2}{548}$	$\frac{0}{444}$
Average	1%	0%	1%	0%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103I On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Fire Protection.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-82
Dissatisfaction with Water, Light, Power
(Gas or Electric) Service*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		0%	0%
Marion	0	0%	1	0
Lewis	1	2		0
Randolph	1	3	0	0
Pendelton				0
Boone	1	17	0	5 ^a
Raleigh	0		0	0
Total Frequency	$\frac{3}{557}$	$\frac{8}{310}$	$\frac{1}{548}$	$\frac{0}{444}$
Average	1%	3%	0%	0%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*0103K On the basis of your own experience or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Water, Light, Power (gas or electric).

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-83
Dissatisfaction with Schools, Education*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		1%	0%
Marion	4	0%	0	0
Lewis	1	1		0
Randolph	0	17	0	0
Pendelton				0
Boone	4	17	0	0 ^a
Raleigh	0		0	0
Total Frequency	$\frac{8}{557}$	$\frac{23}{310}$	$\frac{0}{548}$	$\frac{0}{444}$
Average	1%	7%	0%	0%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103D On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Schools, Education.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-84

Dissatisfaction with Welfare and Public Assistance Administration*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		1%	0%
Marion	3	0	1	0
Levis	9	6		4
Randolph	7	21	1	5
Pendelton				0
Boone	7	17	0	3 ^a
Raleigh	1		0	0
Total Frequency	$\frac{21}{557}$	$\frac{32}{310}$	$\frac{3}{548}$	$\frac{7}{444}$
Average	4%	10%	1%	2%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*1983-84, on the basis of your own experience, or from what you've read, please tell us whether you are satisfied or dissatisfied with the following services. Welfare and Public Assistance Administration.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-85
Dissatisfaction with Sewage Disposal*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	1%		4%	10%
Marion	9	4%	4	33
Lewis	25	16		4
Randolph	10	15	14	30
Pendelton				10
Boone	4	8	4	5 ^a
Raleigh	29		8	7
Total Frequency	$\frac{83}{557}$	$\frac{37}{310}$	$\frac{33}{548}$	$\frac{76}{444}$
Average	15%	12%	6%	17%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q104A Please tell me whether you are satisfied or dissatisfied with these services. Sewage Disposal.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-86

Dissatisfaction with Trash Collection*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		0%	1%
Marion	5	1%	0	0
Lewis	0	0		0
Randolph	1	2	0	1
Pendelton				0
Boone	0	8	0	2 ^a
Raleigh	1		0	0
Total Frequency	$\frac{6}{557}$	$\frac{4}{310}$	$\frac{0}{548}$	$\frac{2}{444}$
Average	1%	1%	0%	1%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103A On the basis of your own experience, or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Trash collection.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-87
Dissatisfaction with Garbage Collection*

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	0%		0%	1%
Marion	5	1%	0	0
Lewis	0	0		0
Randolph	0	1	0	1
Pendelton				0
Boone	1	8	0	2 ^a
Raleigh	0		0	0
Total Frequency	$\frac{5}{557}$	$\frac{5}{310}$	$\frac{0}{548}$	$\frac{2}{444}$
Average	1%	1%	0%	1%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*Q103B On the basis of your own experience or from what you've heard or read, please tell me whether you are satisfied or dissatisfied with the following services. Garbage collection.

^aDatum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-88

Dissatisfaction with Air Pollution Control *

County	Urban			Rural
	High	Middle	Low	Low
Monongalia	13%		17%	3%
Marion	4	8%	14	9
Lewis	19	15		16
Randolph	9	14	7	3
Pendelton				17
Boone	20	17	16	6 ^a
Raleigh	4		0	2
Total Frequency	<u>59</u> 557	<u>39</u> 310	<u>68</u> 548	<u>34</u> 444
Average	11%	13%	12%	8%

Note: Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

*0104E Please tell me whether you are satisfied or dissatisfied with these services. Air Pollution Control.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

TABLE 4-89

Dissatisfaction with Water Pollution Control*

County	Urban			Rural
	High	Middle	Low	Low
Monroe	23%		20%	5%
Marion	4	3%	1	36
Lewis	52	20		21
Randolph	16	20	12	7
Pendleton				14
Boone	21	17	20	3 ^a
Raleigh	6		3	22
Total Frequency	$\frac{104}{557}$	$\frac{45}{310}$	$\frac{73}{548}$	$\frac{81}{444}$
Average	19%	15%	13%	18%

* Percentages were obtained by dividing "dissatisfied" responses by the total number of responses.

104# Please tell me whether you are satisfied or dissatisfied with these services. Water Pollution Control.

^a Datum is from a middle income rural Boone County neighborhood and is not included in column total.

CHAPTER FIVE

DISCUSSION, IMPLICATIONS, AND PROPOSALS

Neighborhoods and Human Ecology: "What's it Like to Live Here?"

Defining the quality of community or neighborhood life is a difficult task. Past attempts have ranged from political and economic data on state and local government operations and finance, to the subjective feelings of community residents. While these kinds of data have not been excluded from the present study, its primary thrust has been to quantitatively detail the range and density of important ecological events in neighborhood life.

Three principal types of data were pursued in this study; data on family health and health concerns, data on the physical condition of neighborhood housing, and attitudinal data regarding human services in the community. Approximately 2000 structured interviews were conducted in a stratified design in 38 neighborhoods throughout West Virginia.

The results were remarkably consistent. The neighborhoods in which this research was conducted yielded data which formed a number of coherent patterns; patterns of data that appeared to be primarily based on neighborhood levels of income. That is, the range and density of ecological events and health concerns varied between certain kinds of neighborhoods, but were consistent within what were, economically, the same types of neighborhoods.

It should be noted that one of the earlier considerations in the design of the regional sampling, contrasts in different sections (Northern, Central, Southern) of the state did not yield any particularly significant

2. \$500,000 - User outlays (or monies paid by participants who purchase transportation stamps).
3. \$300,000 - Project provides support to those who develop or extend transportation services (both private and non-profit organizations are eligible).
4. \$250,000 - Engineering research and equipment adaptation for rural areas and other parts of state.
5. \$250,000 - Social Science type research and evaluation.

Total Actual Cash: About \$3.8 million (\$4.3 minus \$500,000 user outlay).

Geographical Coverage: All 55 Counties of West Virginia.

Population Coverage: 120,000 eligible or potential riders from the target group of those over 60 years of age with incomes of less than \$1,500 per year.

Expected Usage of TRIP: 30,000 clients of 25% or eligible target group. (Estimate based on usage of Federal Food Stamp Program).

**Net Federal Subsidy necessary to provide Transportation Stamps to 30,000 elderly poor - \$3,000,000.

Formula for Monthly Allotment of Stamps*

<u>Family Size</u>	<u>Dollar Value of Stamps</u>	<u>User Outlay</u>	<u>Bonus Stamps</u>
1	\$10	Variable - Sliding	?
2	15	scale according	?
3	18	to family income	\$13

B. Maximum Coverage Program - Based on above cited cost calculations of TRIP.

Geographical Coverage: All 55 counties of West Virginia.

Population Coverage: All state residents living in households with incomes of less than the poverty level according to the 1970 U. S. Census; 380,113 eligible riders.

Expected Usage: 95,028 clients or 25 percent of eligible target group. (Estimate based on usage of Federal Food Stamp Program).

*See Appendix D for TRIP formula for monthly allotment of stamps by income range and household size.

were viewed positively and concerns about lack of income and work were not common. Most people felt that their interests were represented in local government. While there were concerns about the lack of police protection, that which was available was favorably regarded. There was considerable dissatisfaction with jails and correctional facilities. Sewage disposal and air and water pollution controls were problems about which there was considerable concern. Overall, while families in these neighborhoods were not without their problems, their lives might be generally described as relatively rich in resources for problem management; in short, living in these neighborhoods probably approximates the American stereotype of "the good life."

2. Middle Income Urban Neighborhoods

The rates of health problems and disabilities were about midway between those of upper and lower income neighborhoods, as were the use rates for hospitals and physicians. More people received home care or no professional care for health and disability problems than in upper income neighborhoods, and rehabilitative training was less available. A substantial number of people reported serious health problems immediately following the birth of a child. Concerns about children's behavior problems, while relatively high, were lower than in other types of neighborhoods. The exterior condition of homes was worse than among upper income neighborhoods, and abandoned motor vehicles were occasionally present. Houses were somewhat smaller than in upper income

neighborhoods. The rate of internal housing deficiencies in plumbing, appliances, etc., was twice that of upper income homes. There was considerable concern about low-cost housing and hazards such as unvented space heaters were relatively common. Reports of rats were not frequent, and most homes were privately owned. There was some concern about the quality of the neighborhood, and as much dissatisfaction with public housing as in upper income neighborhoods. There was considerable dissatisfaction with recreation for all age groups, and a high rate of concern about the lack of parks and playgrounds. Many families owned no auto and there was dissatisfaction with both public transportation and road conditions. A small number of people were concerned about neighborhood shopping facilities. A large number of residents were concerned about lack of income and about lack of work. There was a moderate rate of political participation and most people felt that they were represented in local government. There was concern about a lack of police protection and traffic conditions, although available police and fire protection was positively regarded. There was a comparatively high rate of dissatisfaction with the courts and jail and correctional facilities. While low in any absolute sense, the highest rate of dissatisfaction with the schools appeared in these neighborhoods. There was some dissatisfaction with welfare administration. Relatively high rates of concern regarding sewage disposal and air and water pollution controls were also recorded. For these neighborhoods life was not without

statistically elevated rates of problems, and resources for problem management were, in contrast to upper-income neighborhoods, less abundant.

3. Low Income Urban Neighborhoods

The rate of health problems and disabilities in these neighborhoods exceeded all groups except rural low income neighborhoods. Medical care, through hospitals and physicians, was available, although rehabilitation therapies were not. Expense and delays in obtaining medical service were reported as problems in getting health care. The largest number of parental concerns about children's behavior was found in these neighborhoods.

Housing in these neighborhoods had a greater number of exterior deficiencies than in all other types of neighborhoods, including neglected paint, roof problems, and problems with outside walls, doors, porches, foundations, etc. A comparatively large number had pit privies. Abandoned motor vehicles were fairly common, as were rubbish accumulations, and neglected yards. Houses tended to be relatively small, with more people living in them. Heating, plumbing and other internal housing deficiencies were quite high. Hazards such as unvented space heaters and rats were at their highest. Not surprisingly, home ownership was lowest in these neighborhoods; one-third of the residents rented. A large number of people were concerned about the condition of their neighborhood and overcrowding in the area. There were concerns about the lack of recreation for all age groups as well as the absence of parks and playgrounds. A large number of families did not own an auto, and many were dissatisfied with road

and street maintenance. Residents were concerned about the inconvenience of the neighborhood's location, the harsh policies of neighborhood stores, and lack of food and drug stores in the neighborhood and a lack of good food. A very large number of the residents were concerned about low income and a shortage of work. These neighborhoods tended to be relatively more active politically. However, fewer people felt they were represented in local government, when contrasted with upper income neighborhoods. There were concerns about the lack of police protection, although residents felt the police treated them fairly. Dissatisfaction with the courts and correctional facilities was low. There was relatively little concern with sewage disposal, though many people were concerned about air and water pollution controls. Overall, social and environmental stresses, particularly those associated with housing, were rather severe. Whether using objective data or the residents' subjective views, these neighborhoods present numerous ecological problems; the quality of life can not be viewed very positively.

4. Low Income Rural Neighborhoods

Health problems and disabilities reached their highest reported rates in these neighborhoods, as did the number of people relying on home care or treatment of health problems. The largest number of people reporting no treatment for serious disabilities were found here. Expense and time delays were frequently reported as reasons for not using medical services. The lowest rates of usage of private physicians were reported here. Health problems

among newborns and mothers were frequently reported, as were disabilities among young children. Parental concerns about children's behavior problems were relatively high. Housing deficiencies were at about the same level as in middle income urban neighborhoods and considerably lower than in low income urban neighborhoods. Abandoned vehicles and some rubbish accumulation were common. Size of houses and number of occupants were about the same as in low income urban neighborhoods. While kitchen and bathroom deficiencies were relatively high, these stemmed primarily from a lack of running water in certain neighborhoods. Many people were concerned about low-cost housing. There were fewer unvented space heaters than in low and middle income urban neighborhoods. Reports of rats were common. Most people owned their homes, and concerns about the condition of the neighborhood were at a moderate level. There was a dissatisfaction with recreation for all age groups, and the highest rates of concern about the lack of parks and playgrounds occurred here. A significant number of people were without autos, and there was widespread concern about road conditions. Concerns about the inconvenience of neighborhood shopping were higher than in any other type of neighborhood, as were concerns about the harsh policies of neighborhood stores and the lack of drug stores. Concerns about lack of income and work were common. There was a very high rate of political participation and most people did not feel that they were represented in local government. There were concerns about the

lack of police protection and the presence of too many bars. Fewer people felt they were treated fairly by police than in other types of neighborhoods. There was considerable dissatisfaction with sewage disposal and air and water pollution controls. Overall while housing tended to be privately owned and in significantly better condition than among low income urban neighborhoods, the other stresses in neighborhood life are at about the same or a higher level than among low income urban neighborhoods.

There were major and far-reaching differences in the quality of life across the types of neighborhoods assessed in the present study. Generally, as neighborhood income level decreased, health problems worsened and the use of medical services decreased; housing became increasingly deficient, particularly to the extent that it was rented. There was a tendency for there to be more concern with the quality of public services as income increased.

At the same time the various income and urban-rural neighborhoods had a number of common concerns. They desired more preventive health services, particularly those that would increase contact with the home; they wanted work to be available, and expressed worry about the lack of low-cost housing. There were also concerns about the general conditions of neighborhoods, the lack of public transportation, and road conditions. There were prevalent concerns about the lack of police protection, though the police were regarded positively. Most neighborhoods expressed concerns about air and water pollution controls.

Implications for Social Research

The preceding data strongly point towards a number of implications for social research at the community level. They include the following:

1. What visibly appear to be different types of relatively homogeneous neighborhoods can be validated through survey research as both homogeneous and different.
2. That these differences can be quantified along multiple dimensions of health, housing, and human services.
3. That these differences between neighborhood are primarily due to disparities in neighborhood income levels.

Taking these three points one step further, it should be possible to develop and effectively support the position that this type of research has detailed and quantified economically based neighborhood life styles or social class in Appalachia.

A Potential Problem: Are the Health Data Accurate?

Findings based on survey research methods, such as those of the present project, are always open to the criticism that they lack validity. This is a particularly important problem when trying to assess physical health. Based on the findings of some previous and related research in this region, however, it is likely that if the preceding data err, it is in a conservative direction; that is, the estimates, if wrong, are too low.

When researchers from West Virginia University School of Medicine¹ followed up a door-to-door survey of health problems in a rural community

¹Schwerha, J. J., Chick, E. W., and Jarvis, M. A. A Unique Learning Experience: Community Health in a Rural Area. The West Virginia Medical Journal, 1967 (Jan.), 8-11.

with physical examinations of the respondents, they found that a large number of people were not aware of their medical problems. Their findings are summarized in Table 5-1.

TABLE 5-1

Reports and Incidence of Health Problems
in 1967 WVU Medical Center Research

		Medical Exam	
		Problem Not Found	Problem Found
Self Report by Subjects Regarding Problems	Affirmative	(A) 31	(B) 25
	Negative	(C) not reported	(D) 134

However, not only were the people participating in the study correct nearly as often as they were wrong in reporting the particular physical health problems assessed in the study (Cells A vs. B), but most people were unaware of other existing problems (Cell D). What emerged prior to the physical examinations was a relatively low recognition or estimate of the frequency of physical health problems. Thus, it should be noted that data in the present research which is based on respondents' reports of health problems in themselves and among their families, are likely to represent conservative estimates of those physical health problems.

Implications for Social Policy

Overall, the data tends to confirm any suspicion that low income and rural location, in that order of importance, will combine to produce a substantially lower quality of life and basic government services than does higher income and urban location.

Not only does high income seem to insure greater access to quality medical care and other human services, but the basic social-economic infrastructure provided by government apparently heavily favors wealthier neighborhoods. For example, such key government services such as good roads, street lighting, and recreation are clearly distributed in greater quantity and quality to high, and in most cases, middle income neighborhoods. Although this state of affairs can be justified in light of the greater overall amount of taxes to be exacted from the middle and high income segments of the population, it does not appear to reflect the priorities necessary to alleviate the plight of those living under difficult social and economic conditions.

Perhaps the most revealing data is that which reflects the more subjective responses of those questioned. Through questions which elicited opinions and the rich detail of individual experiences, we were given an unusually candid insight into the effects that poverty and rural isolation can have on human concerns, behavior, and expectations. Predictably, low income groups expressed a high degree of concern about basic daily necessities such as food, lack of work and income, and transportation. At the same time, low income residents expressed almost no concern about the inability of certain government services such as employment agencies and public housing to provide them with assistance. These responses might

be contrasted with the high degree of concern expressed about such services as roads and local stores. The inference might be drawn that a lack of exposure or a lack of knowledge about a specific service might well lead to a virtual absence of any expectation of and demand for that particular service. Interestingly, this conclusion seems further warranted by the marked tendency of low income residents to use birth control clinics. This service has been available in most areas of the present survey and was usually a well publicized human service. Thus, it might be argued that when services which meet the needs of people are readily available, and, most importantly, when people were made aware of their existence, it could then be expected that these services will be widely and frequently used.

The section of this report which dealt with external conditions of housing provides an excellent case supporting home ownership for the poor. Although owner-occupied rural housing is more likely to lack basic amenities, such as flush toilets, their overall condition seemed to reflect a pride in ownership. This is in contrast to the predominantly rented, urban low income housing, which while being more likely to have complete bathroom and kitchen facilities, showed a far greater incidence of environmental deterioration and neglect than did rural low income housing.

Overall, and more specifically, this research would suggest the following social policy guidelines for the immediate future in West Virginia.

1. Health services need to be made more available and accessible to the poor, particularly the rural poor.
2. Middle and low income neighborhoods have pressing needs for increased transportation services.

3. A strategy of effectively publicizing available health and social services should be developed.
4. There are prevalent needs for low income urban housing.
5. Public housing for low income residents is likely to produce more problems than it solves. Rather, any strategy to alleviate housing problems should be oriented towards increasing the opportunity for private home ownership.

Implications for Intervention: Have We Tested Service Delivery Systems?

Before the effectiveness of existing preventive health facilities and other human services can be accurately judged, it seems fair to say that they must first be made accessible to a maximum number of people over a time span sufficient to establish both regular usage patterns and the capacities of the delivery system. If this were to be done, deficiencies could be noted and corrections and additions made to existing service systems.

Survey data gathered from sample neighborhoods during the course of this project provide numerous indications that many of West Virginia's poor, particularly those in rural areas, lack a reliable means of transportation to places where goods and services might be obtained. Such a conclusion seems warranted by responses to questions dealing with both the ease of mobility and the resulting degree of freedom to choose between existing services.

Perhaps the most reliable indication of a statewide transportation problem is the response of the rural poor, recorded in Table 4-56, to a

question concerning motor vehicle ownership. These figures show that nearly 20 percent of the rural households surveyed lacked a working motor vehicle of any type. Nationwide, according to the U.S. Census Bureau, only 11.7 percent of rural households are without an automobile. Thus, a low income West Virginian in a rural area is almost twice as likely to be without automobile transportation as is a rural resident elsewhere in the United States. Although this fact alone might justify drastic action to improve the transportation available in rural areas, additional indications of the existence of severe mobility problems appeared in other questions.

For example, Table 4-58 showed that fully half of all rural respondents were dissatisfied with road conditions and maintenance. This figure is far higher than the response from any of the other income and locational categories and no doubt reflects the many miles of barely improved dirt roads that link West Virginia's rural hollows with services available in the state's towns and cities. It is possible that automobile ownership in many rural areas may be virtually meaningless during the inclement weather which frequently makes such roads all but impassable.

Table 4-59 indicates that the rural poor were also far more concerned than were other state residents about the inconvenience of their neighborhoods to transportation, shopping, schools, and other services. Perhaps better than any other question, this response is evidence suggesting the isolation felt by low income rural residents. The findings of Table 4-59 are confirmed and reinforced by Table 4-62 and Table 4-61 which show a high degree of concern by both rural and urban poor people about a lack of access to food and drug stores.

Not only does the limited mobility suggested by these data prevent the full utilization of existing service facilities, it also tends to arbitrarily limit the choices that individuals are free to make between similar and competing services. It might be argued that a lack of mobility on the part of those in need of services might give undue advantage to deficient services with advantageous locations. For example, the high usage rates by the urban and rural poor of clinics and hospital emergency rooms shown by Table 4-8 might be lowered if individuals were able to travel at will to private physicians or other medical professionals. In addition, rural areas with highly mobile populations would be more attractive to physicians who would be assured that patients had easy access to their place of business.

Further evidence of a lack of choice stemming from possible transportation difficulties seems to be offered by Table 4-6, a table dealing with reasons preventing the respondent's use of available health services. The fact that a significantly large proportion of both rural and urban poor complained that they had to wait too long for service at a place of health care, suggests that services available to this sector of the population might be utilized beyond their present operating levels.

Many of the low income respondents also complained that available health care was too expensive. The fact that many economically poor clients of these services were unable to travel to other places of health care would seem to increase the number of patients who have no choice but to wait long period for service, and also perhaps pay what they feel are unreasonable prices.

A lack of choice due to forced isolation may also cause the rural poor to express more concern than other groups about the harsh policies of neighborhood stores in Table 4-60. Stores in poor neighborhoods, particularly in rural areas, have little incentive to improve their method of conducting business when they are assured of a virtually captive clientele.

When offered mobility, rural residents have quickly abandoned unfair and inefficient local services. The OEO funded Raleigh County, West Virginia free bus project (1967-1969) demonstrated that when transportation was readily available in low income rural areas, residents unhesitatingly took their commercial business and health needs to locations where they were best served.²

Given the kinds of responses mentioned in the preceding discussion, it is very difficult to view the health and human service data in the present survey as representing data generated in the context of fully functioning human service systems. Because of strong indications that many West Virginians may be unable to get to the locations of various services, any attempt to judge the ability of such services in meeting human needs are likely to be less than valid. Left unanswered by all the survey data is a fundamental question: If the mobility factor was a constant across all income and locational sectors of the sample population, what would be the use patterns of existing services?

²See study of free bus project done for U. S. Department of Transportation by the Resource Management Corp., The Transportation Needs of the Rural Poor (Washington, D. C.: 1969). This project and a number of cooperative bus systems are detailed in Appendixes A and B.

In light of the inability of those most in need of services to take full advantage of present facilities, it would be premature at this time to suggest a number of new or significantly expanded categorical delivery systems. Rather, a first step, one which would make services available to those in need, seems critical. Therefore, what follows are descriptions and cost estimates for broad aim transportation systems; systems designed to link people with services.³ Once these or similar programs have been in effect long enough to gain acceptance and widespread use, a second step, that of assessing the adequacy of certain human service systems, might be taken. Such an incremental approach to the development of human service systems in West Virginia will require a longer period of time to mature, but should lead to delivery systems that effectively serve their constituencies.

PROGRAM PROPOSALS

1. State-Wide Transportation Stamp Program

Cost calculations based on estimates and figures supplied by TRIP (Transportation Renumeration Incentive Program). This pilot transportation stamp program has been initiated by West Virginia Governor Arch A. Moore, Jr. and is funded by OEO (Office of Economic Opportunity) and will get underway in the fall of 1973.

A. Minimum Program - TRIP

Total Funding - \$4.3 million

Breakout of Funding:

1. \$3,000,000 - Bonus monies or OEO cash subsidies for participants who purchase transportation stamps.

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³Additional transportation programs that have been tested in Appalachia are described in Appendixes A, B, C, D and E.

2. \$500,000 - User outlays (or monies paid by participants who purchase transportation stamps).
3. \$300,000 - Project provides support to those who develop or extend transportation services (both private and non-profit organizations are eligible).
4. \$250,000 - Engineering research and equipment adaptation for rural areas and other parts of state.
5. \$250,000 - Social Science type research and evaluation.

Total Actual Cash: About \$3.8 million (\$4.3 minus \$500,000 user outlay).

Geographical Coverage: All 55 Counties of West Virginia.

Population Coverage: 120,000 eligible or potential riders from the target group of those over 60 years of age with incomes of less than \$1,500 per year.

Expected Usage of TRIP: 30,000 clients of 25% or eligible target group. (Estimate based on usage of Federal Food Stamp Program).

**Net Federal Subsidy necessary to provide Transportation Stamps to 30,000 elderly poor - \$3,000,000.

Formula for Monthly Allotment of Stamps*

<u>Family Size</u>	<u>Dollar Value of Stamps</u>	<u>User Outlay</u>	<u>Bonus Stamps</u>
1	\$10	Variable - Sliding scale according to family income	?
2	15		?
3	18		\$13

B. Maximum Coverage Program - Based on above cited cost calculations of TRIP.

Geographical Coverage: All 55 counties of West Virginia.

Population Coverage: All state residents living in households with incomes of less than the poverty level according to the 1970 U. S. Census; 380,113 eligible riders.

Expected Usage: 95,028 clients or 25 percent of eligible target group. (Estimate based on usage of Federal Food Stamp Program).

*See Appendix D for TRIP formula for monthly allotment of stamps by income range and household size.

380,113 - eligible riders
.25 - expected usage rate

95,028 - expected total usage

30,000 TRIP clients @ \$3,000,000 per year

95,028 Transportation Stamp clients @ \$9,480,000
 per year

(Estimate includes administrative costs)

\$9,480,000 - Estimated cost of expanded transportation stamp
 program

\$1,500,000 - User outlays based on TRIP estimates

\$7,980,000 - Total actual cash necessary to implement program

2. State-Wide System of County Operated Buses Serving Rural Areas

Cost calculations based on actual expenses incurred by Monongalia County Court in establishing rural bus systems serving Monongalia County, West Virginia.

- A. Minimum Program - (Utilizing three 16 passenger buses per county).
 Appropriate for the more sparsely populated counties of West Virginia, but projected here on state-wide basis.

Geographical Coverage: 50 non-metropolitan Counties of West Virginia.

Population Coverage: All resident of rural areas of non-metropolitan counties.

Expected Usage of Rural Bus Systems: There are 64,069 rural households without automobiles in West Virginia. Residents of these living units would constitute the core ridership of any bus system.

Cost Base: One Non-metropolitan County

\$48,000 - Three 16 passenger buses.

3,600 - insurance for one year.

26,000 - yearly operating expenses.

\$77,000 - cost of establishing and maintaining system for one year.

- x50 - non-metropolitan counties in West Virginia
- * \$3,850,000 - total estimates cost of minimum county operated rural bus system projected on state-wide basis. (Administrative Costs not included).
- B. Maximum Program - (Utilizing four 16 passenger and one 32 passenger buses per county). Coverage and usage characteristics same as for minimum system cited above.

Cost Base: One Non-metropolitan County.

\$100,000 - initial capital expenditure for four 16 passenger and one 32 passenger bus.

6,000 - insurance for one year.

41,600 - operating expenses for one year.

\$147,000 - cost of establishing and maintaining system for one year.

 x50 - non-metropolitan counties in West Virginia

\$7,380,000 total estimated cost of maximum county operated rural bus system projected on state-wide basis. (Administrative costs not included).

3. A State-Wide System of Mobile Dental Vans

An alternate strategy to establish links between people and services is that of bringing the services to the people. The Southern West Virginia Regional Health Council has been doing just this since 1969 with its mobile dental vans. The following are cost estimates for a particular kind of service program which have been projected on a state-wide basis in order to examine the feasibility of expanding this highly successful program. While this program focuses on dental health, the reader might consider other health programs that could be developed with this model. Cost calculations based on figures supplied by the Southern West Virginia Regional Health Council, Bluefield, West Virginia.*

*See Appendix C for details of program.

A. Minimum Program

Geographical Coverage: All rural areas of state.

Population Coverage: All rural children cited by the U. S. Census as living below the poverty level. (Under age 18).

Expected Usage: There are 106,962 children in rural areas of West Virginia living below the poverty level.

\$60,500 - cost of purchasing and operating one mobile dental van with one dentist for one year.

x12 - number of vans necessary to treat 106,963 children once a year. (According to Southern West Virginia Regional Health Council, one van can treat a maximum of 8,400 people once a year).

\$726,000 - total estimated cost of dental care for all rural poor children of West Virginia for one year. (Administrative costs not included).

B. Maximum Program

Geographic Coverage: All rural areas of state.

Population Coverage: All rural children in West Virginia regardless of income. (Under age of 18).

Expected Usage: There are 384,012 children in rural areas of West Virginia.

\$60,500 - cost of purchasing and operating one mobile dental van with one dentist for one year.

x45 - number of vans necessary to treat 384,012 children once a year.

*\$2,722,500 - total estimated cost of dental care for all rural children of West Virginia for one year. (Administrative costs not included).

*See Appendix C for details of program.

CHAPTER SIX
EVALUATION OF NEEDS

Overall, NEEDS is a valuable instrument.¹ It defines and quantifies a number of the very fundamental problems in neighborhood life, and has the potential for serving as a strong foundation for community development in both rural and urban America.

In carrying out the present project a number of problems were experienced in the use of the NEEDS instrument; specific problem descriptions and recommendations for change are specified later in this section. It should be understood that although we are very critical of NEEDS over-inclusiveness, organizational structure, and certain sets of response alternatives, we regard NEEDS as a valuable prototype in the development of neighborhood research instruments. In many ways, NEEDS merely reflects the complexity of the problem itself. Hopefully, the present evaluation of NEEDS will further the development of the instrument and the accomplishment of the difficult task of evaluating the quality of neighborhood life.

Questionnaire Structure

Retrieving data from the NEEDS questionnaire was hampered from the beginning by the structure of the questionnaire. While the questionnaires are of a type that can be fed through a scanner and the information duplicated on data cards, an initial major problem arose in putting the cards in the proper sequence. A second major problem appeared in the formatting of the questionnaire.

¹Copies of the Exterior Premise Analysis and Interior Interview forms which comprise the NEEDS instrument evaluated here are included in Appendix F.

Specifically, Stage II of NEEDS is 17 pages long, yielding 23 cards per interview. The result, after scanning, was 23 groups of about 2000 cards each (total sample size). It was then necessary to merge these 23 groups in the appropriate order. Normally this is not a difficult task. The first step was to sort the 23 groups on some identification number unique to each questionnaire (set of 23 cards), and this was accomplished through each interview's I.D. number. The second step was to sort within each set of 23 to get the set in the correct sequence. This could not be done for the interview numbers had not been arranged sequentially; a problem that could have been avoided had complete instructions accompanied NEEDS.

The second and most consequential problem involved the format of the card. The difficulty was that instead of entering the number of the reply selected in one or two card columns, the question format provided as many card columns as possible replies. For example, a question with two replies, yes or no, was given two card columns. If yes was the answer the first column was punched and the second was left blank. If no was indicated the reverse was true. To then give a simple frequency count two sub-variables had to be displayed. The first with the number of yes replies and the blanks, the second with no replies and the blanks. As the number of replies to a question increased, the number of sub-variables became very large; when cross-classifications were required the size became prohibitive. This type of organization also made more sophisticated statistical analyses, such as Analysis of Variance or Regression Analysis, very difficult to impossible, because the total sum of squares of a dichotomous dependent variable with replies 0 and 1 equaled zero.

Thus, the data in its present form did not easily lend itself to further research and analysis. This could have been avoided by formulating

the data so that the designated card columns gave the reply number and not merely a blank or a one reply. Also, much time could have been saved if the interview numbers had been sequentially arranged.

General Recommendation: A complete reformatting of NEEDS, simplifying the coding of alternative responses to questions.

Questionnaire Content

A. NEEDS

1. Exterior Premise Analysis (Stage I)

While most items yield information, it would appear that the inter-correlation between interior and exterior premise conditions is sufficiently high that, for research purposes, the number of exterior items could be reduced. For example, it is quite likely that if in Stage II the kitchen stove doesn't work (item 90), there are bathroom deficiencies (item 91), and there are sagging walls (item 114) and unsafe electrical conditions (item 118), then it's very probable that there will also be rubbish accumulation, uncollectable discards, etc., appearing in the Exterior Premise Analysis.

For purposes of community planning and/or articulating community problems, it may be desirable to have this abundance of information. For research purposes, however, the amount of information to be managed could be reduced through the use of probability statements and limited sampling.

B. NEEDS Interior Interview (Stage II)

1. In an apparent attempt to cover everything of importance in assessing neighborhood life (admittedly a difficult problem) the questionnaire seems to drift on and on, sometimes returning to information touched on earlier, sometimes not. For example, physical housing information is gathered on page 14 of Stage II, then pages 15 and 16 deal with rents and

salaries, and concerns with human services, respectively, then page 17 returns to attitudes and information on housing. Similarly basic information on household occupants is split across pages 3 and 6, with parents' physical and behavioral concerns about children on pages 4 and 5; behavioral concerns, this time for older children, emerges again on page 11.

Recommendation 1: Reorganize Stage II of NEEDS with an attempt to create meaningful, coherent, complete organizational sub-structures.

2. Stage II tends to have a metropolitan, large city flavor to it, and most items referring to large city problems are inappropriate to research in predominately rural areas such as West Virginia. Specifically, items 12, 13, 102, 110, 126, 128, and 129 are limited value in West Virginia, and could probably be omitted from rural surveys.

Recommendation 2: Have rural interviewers omit items 12, 13, 102, 110, 126, 128, and 129 in most rural research.

3. There is no information gathered in Stage II regarding the frequency or incidence of retardation across all age groups, or senility as a problem among the aged.

Recommendation 3: The inclusion of items which would assess the problems of retardation across all age groups, and senility (and associated problems) among the aged.

4. Items 10 and 11 required the interviewer to write information on the interview format. In large scale research, such as the present project, the labor costs associated with extracting and coding this information render it virtually worthless, or at best of very low yield in a cost-benefit framework.

Recommendation 4: Provide a coded format for items 10 and 11.

5. Items 39-44, 46-51, 53-59, and 60 all attempt to link specific problems to particular members of the household. Tremendous confusion

was experienced in the present data analysis with respect to who had what. Ultimately this resulted in a loss of precision in the data analysis because of our being forced to simply look at the frequency of occurrence of problems among, say, adults, rather than among "head of household", "spouse", etc.

The source of the confusion stemmed from the demand that each interviewer remember which household resident was which coded or numbered person, a difficult task. This was compounded by possible errors in coding as the numbered person format was used. Further, the computer programs available to extract this information were unable to keep the cast of household characters straight.

Recommendation 5: Recode items 39-44, 46-51, 53-59, and 60 in a simpler format, e.g., by household residents' sex, role, and age status. While this might lengthen the number of pages required for the data, it would enhance precision and eliminate much data confusion.

6. Items 73 and 74 seem to contain a laundry list of reasons why people have difficulties using health services. The internal logic of this list is not easily discernable. In addition, there is some redundancy in the response alternatives, e.g., in item 74 alternative 1, "facility too far away", is probably highly correlated with response 8, "costs too much to get to health service".

Recommendation 6: Restructure the response alternatives of items 73 and 74 in an attempt to simplify the items; e.g., the use of fewer but broader categories, such as costs, mode of travel distance, problems in communicating with health personnel, etc.

7. Considerable confusion grew out of the data reported on page 16. While this confusion was, to some extent, true for every item on the page, it seemed most typical of items 103 through 106. The inconsistency in item format (103 vs 104; 103 and 104 vs 105 and 106) made the interpretation of computer printouts rather difficult. Further, these inconsistencies created problems in making comparisons among the four items.

Recommendation 7: Reformat items 103 - 106 so that the response categories are consistent across items.

8. Also on page 16, questions arose regarding whether or not the response alternatives in item 107 had been subjected to psychological scaling techniques. The value of the information attained would be substantially enhanced if this were so.

Recommendation 8: If not already done, subject the response alternatives of item 107 to psychological scaling techniques, then reformat consistent with scaling principles.

9. Similar to item 107, item 109, if not already developed via psychological scaling techniques, would have its informational and predictive value substantially increased if response alternatives were created through scaling methods.

Recommendation 9: If not already done, subject response alternatives in item 109 to psychological scaling techniques, then reformat the item consistent with scaling principles.

CHAPTER SEVEN
CONCLUDING COMMENTS

This research project has attempted to quantify a number of dimensions of neighborhood life in West Virginia. While many of the major findings regarding differences in health, housing, and human concerns across socio-economically defined neighborhoods may not be too surprising to readers who have some familiarity with life in Appalachia, these data provide what may be the most comprehensive and soundest data base for planning in the state's history. Hopefully the data will be further analyzed and applied towards the planning of effective human services in West Virginia.

While 52% of the U.S. population earned less than \$10,000, and 20% less than \$5000 in 1970, approximately 70% of West Virginia's population earned less than \$10,000 in that year, and 32% lived in families where the income was less than \$5000.¹ It is these families, particularly the latter, that the research strongly suggests are in need of ways to increase the quality of their lives. Compared to upper income families, their health is nearly twice as bad, their housing deficient, and community services in both the private and public sectors are less available to them.

Of equal concern, from both research and community development points of view, is the fact that although low income families in the present study were more politically active than higher income groups, they felt unrepresented in local government. It is possible that effective human services in these low income neighborhoods will come about only after

¹Census Bureau, U.S. Department of Commerce, 1972.

the undertaking of community organization efforts necessary to change whatever realities support this feeling of removal from government, and perhaps democracy itself.

Life for the poor in Appalachia has never been easy. Over the years the stresses of mountain life and an economic dependence upon the declining industries of agriculture and mining have combined to consume the resources of most economically poor families. However, the past does not necessarily predict the future.

In recent years a number of changes have brightened the state's potential for the future; the out-migration of the state's population has virtually ceased; coal mining has again become economically viable, although its long-range future remains somewhat uncertain; and state tax revenues have increased, with state government reporting a considerable surplus in fiscal year 1972-73. This combination of population stability and increasing resources may provide the conditions necessary to dramatically improve the quality of life in West Virginia. It is our intent that the present data serve both as a base for that development, and a set of benchmarks against which the effectiveness of future programs of human services can be measured.

West Virginia's abundance of beauty and physical resources are perhaps unparalleled in the United States. If she is to attain the stature she deserves, there must be a sharply expanded development of her greatest resource: her people. Hopefully, this project will help attain that end.

APPENDICES A - F

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APPENDIX A

Free Bus System Demonstration Project In Raleigh County, West Virginia¹

In September, 1967, the Raleigh County Community Action Association (RCCAA) received a \$44,400 grant from the Office of Economic Opportunity (OEO) to operate a free bus system in a sparsely populated rural area of Raleigh County, approximately 22 miles from Beckley. RCCAA was able to utilize the initial funding to operate a fleet of five buses for a period of 19 months.

Operations consisted of one round trip from each designated route to Beckley and back. Three-fourths of the riders were picked up in front of their homes. The drivers were salaried local residents, all of whom were previously in need of employment.

1. Degree of Usage - Approximately 250 different people utilized the buses each month. At the end of operations, the buses were functioning in excess of 110 percent of rated capacity.

2. Purpose of Usage - As the data in Table A-1 indicate, the majority of rides were for purposes of shopping. A significant percentage of riders also attended community action meeting (for which special bus runs were made) and received medical care or visited social service agencies. Very few riders used the buses for transportation to work.

3. Benefit/Cost - $\$91,563/\$44,400 = 2.06$

4. Savings per rider per month - \$21.70. This total includes

¹Source: Resource Management Corporation, The Transportation Needs of the Rural Poor, Report prepared for the Bureau of Public Roads, U.S. Dept. of Transportation, 1969.

TABLE A-1

Trip Purposes Reported By Free Bus Passengers:

<u>Activity</u>	<u>Percentage of all Trips</u>
Grocery Purchases	28.48
Other Shopping	18.24
CAA Meetings	13.85
Medical/Doctor	12.28
Work	6.74
Food Stamps	5.48
Church	4.70
Visiting	3.34
Welfare	2.77
Recreation	1.98
Job Training	1.77
Social Security	1.72

savings in transportation costs in addition to benefits from greater access to lower shopping prices and social sector goods and services.

5. Value of improved access to medical care - Estimated at \$100 per year for each rider who received medical care.

6. Who utilized service - 79 percent of the riders were classified as poor. Only 27 percent of the county was so categorized.

APPENDIX B

Co-op Transportation Systems In Appalachian, North Carolina²

In June, 1968, OEO granted funds for local research into the feasibility of a cooperative transportation system. Several plans grew out of meetings with citizens in low income communities. What was agreed upon as the most workable plan was adopted and put into operation in Watauga County, North Carolina. This effort served as a model and the idea of cooperative transportation quickly spread to surrounding counties, each modifying the plan to suit local needs.

1. Watauga County: "The Green Eagle Rural Community Transportation Cooperative" - Members of this group, with the assistance of community action advisers, drew up bylaws and issued \$5 shares that made residents eligible to ride the buses. All management decisions, including scheduling, are made by a majority vote of all members. The cost of fares is also determined by members and varies with the purpose and duration of each trip. Initial OEO funding covered the first monthly payments for the Co-op's four small buses, as well as operating expenses such as driver's salaries. After a period of a year and a half, the system was put on its own resources.

2. Avery County Co-op Bus System - This system is similar to the one in Watauga County except that scheduling is simplified because all members live in the community of Beech Mountain.

3. Mitchell County Co-op Bus System - This system also serves primarily one community, that of Buladeen. It has been used exclusively as

²Source: "The Green Eagle", Mountain Life and Work, July-August, 1970, pp. 16-17

a means of transportation to work and operates round the clock. So successful has been this system that its original 12 passenger bus has been traded in for a 34 - seat model.

Observations On Bus Systems, Free And Cooperative:

The above mentioned cooperative transportation projects of a cooperative nature, all managed through a basic form of participatory democracy, seemed to offer an excellent opportunity for rural people to tailor a transportation system to the particular needs and life-styles of their area. In addition, the community organizations formed around the bus systems of both general types would seem to provide the groundwork for concerted action on other local problems.

Difficulties encountered by special transportation systems established specifically to get inner-city residents to suburban jobs might tend to plague the long-r-lived rural bus systems. Once the poorer urban residents were made financially able by their suburban jobs, they were found to purchase cars and thus cease to provide the special transportation systems with the patronage necessary to operate. In the case of rural bus systems, this potential problem might be the subject of future research.

APPENDIX C

Mobile Dental Clinic Program of the Southern West Virginia Regional Health Council

Since 1970 the Southern West Virginia Regional Health Council has operated four two-chair mobile dental units in conjunction with two fixed dental clinics. Both the mobile clinics and fixed offices have operated almost from the outset at peak capacity, averaging a total of 700 corrections each month by the individual dentists. Children have been given priority in this dental care project although treatment is made available to additional age groups when alternative means of care are not available.

Operation of the various dental clinics has been coordinated with a program of intensive dental education and preventive measures in area elementary schools. Applications of stannous flouride and dental health lectures have been combined to produce positive results. This project reached more than 25,000 children in five counties during the first six months of its operation. In conducting the education project it was discovered that 35% of those participating had never owned a toothbrush, and 45% had never visited a dentist.

APPENDIX D

West Virginia Transportation Stamp Program

State initiative and Federal funding has permitted the West Virginia Department of Welfare to institute the nation's first transportation stamp program. Called TRIP (Transportation Remuneration and Incentive Program) this innovative approach to the transportation problems of the handicapped and elderly poor has been granted \$4.5 million in OEO funds for Fiscal Year 1973-1974. TRIP also provides subsidies to enable commercial carriers to establish new transportation systems or improve existing ones.

As the program is presently structured, only those persons 60 years of age or older with incomes of less than \$1,500 are eligible to participate. It is anticipated that the physically handicapped will be included at a later date. TRIP stamps are distributed according to an income discount system similar to that used by the Federal Food Stamp Program. Those with the lowest incomes pay only a token fee of 25 cents for a monthly quota of stamps. TRIP stamps can be used on any public conveyance that qualifies for the program, including taxis.

In addition to facilitating transportation for those most in need of mobility, TRIP is intended to provide public carriers with the incentive to modify their facilities to accommodate the handicapped and aged poor and to expand their services into new areas.

Although TRIP is an innovative and praiseworthy effort to end the forced isolation of many West Virginians, the present program appears to have two problems. First, it is not clear at this time whether or not private citizens who transport their neighbors may receive reimbursement for TRIP stamps. Secondly, TRIP neglects the large number of

West Virginia's poor who are under the age of 60. TRIP would be most beneficial to this sector of the population, primarily because of its ability to provide improved access to employment opportunities. Due to the fact that TRIP has recently been funded as a pilot transportation project, these apparent shortcomings may well be eliminated by the program's future expansion.

NET INCOME BASIS FOR COUPON ISSUANCE						
HOUSEHOLD SIZE						
Monthly INCOME RANGE	<u>ONE PERSON</u>		<u>TWO PERSONS</u>		<u>THREE PERSONS</u>	
	STAMP PRICE	STAMP VALUE	STAMP PRICE	STAMP VALUE	STAMP PRICE	STAMP VALUE
0-25	\$.25	\$10.00				
26-76	1.00	10.00				
77-123	2.00	10.00				
124-183	3.00	10.00				
184-266	5.00	10.00				
0-53			\$.50	\$15.00		
54-106			2.00	15.00		
107-156			3.00	15.00		
157-250			4.00	15.00		
251-360			6.00	15.00		
0-75					\$.75	\$18.00
76-129					2.00	18.00
130-182					3.00	18.00
183-277					5.00	18.00
278-360					7.00	18.00

Source: Proposal by the State of West Virginia for Transportation Remuneration and Incentive Program (TRIP) June 4, 1973.

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APPENDIX E

Family Health Service

The Family Health Service is operated by the Memorial General Hospital Association of Elkins, West Virginia, under a grant from the U.S. Department of Health, Education and Welfare. It has been established to provide comprehensive health services for the rural population of Randolph County and adjoining areas of Barbour and Pocahontas Counties. In addition to providing subsidized health care to families and individuals registered with the program, the Family Health Service also offers health maintenance and home improvement information, a medical referral service, home care, and transportation to health services in Elkins. It is staffed by 29 full-time employees and 20 part-time family health workers.

A. Family Health Workers

Specially trained residents of rural communities act as Family Health Workers under the supervision of the Family Health Service. The Service pays these workers on a part-time basis and subsidizes their telephones. It is the primary function of these workers to instruct rural people in various health maintenance practices. They have been trained to provide instruction and to answer questions about safe drinking water, inoculations, and care of the sick. Family Health Workers also provide a medical referral service, guiding their neighbors to available specialized health services. These workers may also be called on to supplement health professionals in the giving of home care.

B. Health Vans

Families and individuals registered with the Family Health Service

may take advantage of the Service's two Health Vans. These are 12-passenger vans driven by two full-time women drivers that transport people from rural areas to the offices of doctors and other health professionals in Elkins. These vehicles are not set up as ambulances and only those physically capable of taking a normal automobile ride can be transported. One of the vans operates strictly on reservation basis and will pick up riders at their homes. The Family Health Service has found that once rural residents were made aware of the existence of the Health Van transportation system its patronage increased sufficiently to justify its continuation. Payment for utilization of the Health Van is based both upon the ability of the rider to pay and the length of the ride. The approximate cost of operating each bus on a yearly basis is \$15,750. (45,000 miles @ 35¢ per mile).

APPENDIX F

NEIGHBORHOOD ENVIRONMENTAL EVALUATION AND DECISION SYSTEM
EXTERIOR PREMISE ANALYSIS (SIDE TWO)

NEIGHBORHOOD NUMBER										BLOCK NUMBER										
0	1	2	3	4	5	6	7	8	9	0	1	2	3	4	HUNDREDS	5	6	7	8	9
PREMISE NUMBER										0	1	2	3	4	TENS	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9	0	1	2	3	4	UNITS	5	6	7	8	9

PREMISE CONDITIONS

UNACCEPTABLE FENCE OR RETAINING WALL (NEEDS REPAIRS OR IS UNSIGHTLY)														
ABANDONED MOTOR VEHICLES (MARK ONE, ONLY)					ONE	TWO OR THREE					MORE THAN THREE			
RUBBISH ACCUMULATIONS (MARK ONE, ONLY)					ACCUMULATION DETRACTS FROM THE PREMISE									
					ACCUMULATION DETRACTS FROM PREMISE AND ADJACENT PROPERTY									
					ACCUMULATION DETRACTS FROM ENTIRE BLOCK FRONTAGE									
UNCOLLECTABLE DISCARDS (MARK ONE, ONLY)					ONE	TWO OR THREE					MORE THAN THREE			
REFUSE STORAGE					LIDS NOT TIGHT FITTING OR ABSENT					TYPE CONTAINER USED NOT PROPER OR IS ABSENT				
					PUTRESCIBLE REFUSE ON THE GROUND									
LANDSCAPING (MARK ONE, ONLY)					NEGLECTED					NEEDS MAINTENANCE				
OTHER		LIVESTOCK			POULTRY			RODENTS						
MOSQUITOES		ABANDONED REFRIGERATOR			OVERFLOWING SEPTIC TANK			FLIES						
EXCESSIVE ANIMALS		SAFETY HAZARD			OTHER INSECTS OR PESTS									

AUXILIARY STRUCTURE CONDITION (MARK NUMBER OF EACH TYPE)	GOOD	1	2	3	4	5	6	7	8	9
	FAIR	1	2	3	4	5	6	7	8	9
	POOR	1	2	3	4	5	6	7	8	9

DIMENSIONS
(IN FEET)

LOT WIDTH	0	1	2	3	4	THOUSANDS	5	6	7	8	9
	0	1	2	3	4	HUNDREDS	5	6	7	8	9
LOT LENGTH	0	1	2	3	4	TENS	5	6	7	8	9
	0	1	2	3	4	UNITS	5	6	7	8	9
MAIN STRUCTURE WIDTH	0	1	2	3	4	THOUSANDS	5	6	7	8	9
	0	1	2	3	4	HUNDREDS	5	6	7	8	9
MAIN STRUCTURE LENGTH	0	1	2	3	4	TENS	5	6	7	8	9
	0	1	2	3	4	UNITS	5	6	7	8	9
AUXILIARY STRUCTURE WIDTH	0	1	2	3	4	THOUSANDS	5	6	7	8	9
	0	1	2	3	4	HUNDREDS	5	6	7	8	9
AUXILIARY STRUCTURE LENGTH	0	1	2	3	4	TENS	5	6	7	8	9
	0	1	2	3	4	UNITS	5	6	7	8	9

NEIGHBORHOOD ENVIRONMENTAL EVALUATION AND DECISION SYSTEM INTERIOR INTERVIEW

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13792-02

FORM APPROVED
BUDGET BUREAU NO. 85-R-0124

10-7000-07-01-0000

INTERVIEW NUMBER

9 HOW MANY DEATHS OF CHILDREN ONE YEAR OF AGE OR UNDER LIVING IN THIS HOUSEHOLD HAVE OCCURRED DURING THE LAST TWELVE MONTHS?

0 1 2 3 4 5 6 7 PLUS NR UNK

10 HAVE YOU MOVED IN THE LAST THREE YEARS?

YES NO NR UNK

If the answer is NO NR or UNK go to 11 If the answer is YES ask

WHERE DID YOU LIVE JUST BEFORE YOU MOVED HERE?

a) STREET INTERSECTION _____

CITY AND STATE _____

(Ask about place before that etc until you obtain last 4 addresses within the last 3 years Do not record moves which occurred more than 3 years ago.)

b) STREET INTERSECTION _____

CITY AND STATE _____

c) STREET INTERSECTION _____

CITY AND STATE _____

d) STREET INTERSECTION _____

CITY AND STATE _____

11 WHAT ARE SOME OF THE THINGS YOU LIKE MOST ABOUT LIVING IN THIS NEIGHBORHOOD?

12 WERE YOU OR ANY MEMBER OF THIS HOUSEHOLD BORN OUTSIDE THE FIFTY STATES? (If "YES", ask) WHERE?

(Code only one response.)

NO MEXICO CUBA PUERTO RICO OTHER NR UNK

13 OTHER THAN ENGLISH, IS THERE ANOTHER EVERYDAY LANGUAGE SPOKEN IN THIS HOUSEHOLD? (If "YES" ask) WHAT LANGUAGE IS SPOKEN?

- | | | |
|----------------|--------------------------------------|-----------------------|
| 1 ARABIC | 8 HUNGARIAN | 15 RUSSIAN UKRAINIAN |
| 2 CHINESE | 9 IRISH | 16 SERBO-CROATIAN |
| 3 CZECH SLOVAK | 10 ITALIAN | 17 SLOVENIAN RUMANIAN |
| 4 DUTCH | 11 LITHUANIAN | 18 SPANISH |
| 5 FRENCH | 12 NORWEGIAN SWEDISH DANISH, FINNISH | 19 YIDDISH |
| 6 GERMAN | 13 POLISH | 20 JAPANESE |
| 7 GREEK | 14 PORTUGUESE | |

21 OTHER (specify _____)

14 WHAT IS THE HIGHEST GRADE (OR YEAR) OF REGULAR SCHOOL YOU HAVE EVER ATTENDED?

NONE 1 2 3 4 UNIT 5 6 7 8 9 NURSERY KINDER NR UNK

Question 15 is asked only if "NO"

15 Which of the following categories best describes the respondent? (Code only one answer.)

CAUCASIAN WHITE NEGRO BLACK ORIENTAL INDIAN (AMER) OTHER UNK

(Other, specify _____)

16 ARE THERE ANY CHILDREN IN THIS HOUSEHOLD UNDER FIVE YEARS OF AGE?

YES NO NR UNK

ECA 122 CIM 14 70

0215

NEIGHBORHOOD COMMUNITY EVALUATION AND DECISION SYSTEM
INTERIOR INTERVIEW

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13742-09

FORM NO. 10-68
NIGHT BUREAU NO. 1-68
REVISED 1-68

1) WHAT IS THE FIRST NAME OF EACH CHILD UNDER FIVE YEARS OF AGE AND THEIR RELATIONSHIP TO THE HEAD OF THEIR FAMILY IN THIS HOUSEHOLD? INCLUDE INFANTS UNDER ONE YEAR OF AGE.

CHILD OF NEE OR STEPCILD
GRANDCHILD OF HEAD OF AREA OR AREA ORIGINATOR
BROTHER OR SISTER OF HEAD
NEICE OR NURSE OF HEAD
OTHER FAMILIAL RELATION TO HEAD
OTHER NOT RELATED TO HEAD
NR
UNK

18) IS Child's name: A. Male, B. Female? (Use a supplement if needed)

MALE	FEMALE	NR	UNK	(03) MALE	FEMALE	NR	UNK	(04) MALE	FEMALE	NR	UNK
------	--------	----	-----	-----------	--------	----	-----	-----------	--------	----	-----

19) HOW OLD IS Child? (Do not code in both yrs & mos. Use a supplement if needed)

(01) YRS	(02) MOS	(03) 0	(04) 1	(05) 2	(06) 3	(07) 4	(08) 5	(09) 6	(10) 7	(11) 8	(12) 9	NR	UNK
----------	----------	--------	--------	--------	--------	--------	--------	--------	--------	--------	--------	----	-----

20) WHAT MONTH WAS Child BORN IN AND WHAT WAS Child's AGE AT LAST BIRTHDAY?

(01) MO	(02) YR	(03) MO	(04) YR	(05) AGE	(06) MO	(07) YR	(08) AGE	(09) MO	(10) YR	(11) AGE
---------	---------	---------	---------	----------	---------	---------	----------	---------	---------	----------

21) FOLLOWING BIRTH, DID Child STAY IN THE HOSPITAL? (Use a supplement if needed)

(01) 0	(02) 1	(03) 2	(04) 3	(05) 4	(06) 5	(07) 6	(08) 7	(09) 8	(10) 9	PLUS	NR	UNK
--------	--------	--------	--------	--------	--------	--------	--------	--------	--------	------	----	-----

22) WHAT WAS Child's WEIGHT AT BIRTH? (Use a supplement if needed)

(01) UNDER 5 LBS	(02) 5 TO 10 LBS	(03) GREATER THAN 10 LBS	NR	UNK
------------------	------------------	--------------------------	----	-----

23) DURING BIRTH, DID Child FOLLOWING BIRTH DID Child HAVE ANY SERIOUS PROBLEMS? (Use a supplement if needed)

(01) YES	(02) NO	(03) NR	(04) UNK
----------	---------	---------	----------

24) WAS THERE ILLNESS OR INJURY TO THE MOTHER CONNECTED WITH THE PREGNANCY OR DELIVERY OF Child? (Use a supplement if needed)

(01) YES	(02) NO	(03) NR	(04) UNK
----------	---------	---------	----------

25) HAS Child BEEN SHOT? (Use a supplement if needed)

(01) 1	(02) 2	(03) 3	(04) 4	(05) 5	(06) 6	(07) 7	(08) 8	(09) 9	PLUS	NR	UNK
--------	--------	--------	--------	--------	--------	--------	--------	--------	------	----	-----

NEIGHBORHOOD ENVIRONMENTAL EVALUATION AND DECISION SYSTEM
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FORM APPROVED
BUREAU BUREAU NO. 83 D-0124

13792-10

23 IN ORDER TO PROVIDE BETTER HEALTH CARE, WE HAVE TO KNOW WHAT PROBLEMS EXIST AND FOR WHICH NEIGHBORHOODS. THE NEXT COUPLE OF QUESTIONS HELP US GET THIS INFORMATION HAVE ANY OF THE CHILDREN UNDER FIVE YEARS OF AGE HAD ANY OF THESE CONDITIONS IN THE PAST TWELVE MONTHS? Show Card 26. (Then ask) HOW ABOUT ANY OF THESE CONDITIONS? Show Card 29A. (Mark only one response)

YES NO

NR UNK

24 PLEASE JUST GIVE ME THE NUMBERS OF THE CONDITIONS AND THE FIRST NAME OF THE CHILD. (Use supplement if needed)

01 CHLD 02

Show Card 26

03 CHLD 04

- 1 UNABLE TO STAND OR WALK (FOR CHILD OVER ONE YEAR OF AGE)
- 2 DEAFNESS OR SERIOUS TROUBLE HEARING WITH ONE OR BOTH EARS
- 3 SERIOUS TROUBLE SEEING WITH ONE OR BOTH EYES EVEN WHEN WEARING GLASSES
- 4 CLEFT PALATE OR HARELIP
- 5 ANY SPEECH DEFECT
- 6 MISSING FINGER OR HAND OR ARM OR TOE OR FOOT OR LEG
- 7 PALSY (CHRONIC SHAKING OR TREMOR)
- 8 PARALYSIS OF ANY KIND
- 9 REPEATED TROUBLE WITH BACK OR SPINE
- 10 CLUB FOOT
- 11 PERMANENT STIFFNESS OR ANY DEFORMITY OF THE FOOT OR LEG OR FINGER OR ARM OR BACK OR OTHER AREAS

01 CHLD 02

Show Card 26A

03 CHLD 04

- 12 ASTHMA
- 13 CEREBRAL PALSY
- 14 TREATED FOR MENTAL ILLNESS OR EMOTIONAL DISORDERS
- 15 RHEUMATIC FEVER
- 16 EPILEPSY
- 17 HEPATITIS
- 18 HERNIA OR RUPTURE
- 19 NOTICEABLY UNDERWEIGHT
- 20 OTHER IMPAIRMENT OR DISABILITY

(Please specify)

27 HAVE ANY OF THE CHILDREN UNDER FIVE HAD ANY OF THESE CONDITIONS IN THE PAST TWO WEEKS? Show Card 28.

YES NO

NR UNK

28 PLEASE JUST GIVE ME THE NUMBERS OF THE CONDITIONS AND THE FIRST NAME OF THE CHILD. (Use supplement if needed)

01 CHLD 02

Show Card 28

03 CHLD 04

- 1 FREQUENT EAR INFECTIONS
- 2 STREPT THROAT
- 3 SERIOUS INFECTIONS SUCH AS ABSCESSES, SORES OR INFLAMMATION OTHER THAN THROAT LUNG OR EAR INFECTION
- 4 BRONCHITIS OR PNEUMONIA
- 5 INGESTION POISONING
- 6 FRACTURE OR BROKEN BONE
- 7 SERIOUS BURNS
- 8 OTHER

(Please specify)

BCA 177 (CWI)
1-6-70

0217

NEIGHBORHOOD ENVIRONMENTAL EVALUATION AND DECISION SYSTEM
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FORM APPROVED
BUDGET BUREAU NO. 85 8 0124

13792-11

Area 29 for ...

29 THIS QUESTION DEALS WITH CONCERNS PARENTS OFTEN HAVE ABOUT THEIR CHILDREN. MOST CHILDREN HAVE SOME OF THESE CONDITIONS PLEASE TELL ME WHETHER YOU ARE CONCERNED BY THE AMOUNT OR LENGTH OF TIME ANY OF THESE CONDITIONS HAVE EXISTED FOR EACH CHLD OVER ONE YEAR AND LESS THAN FIVE YEARS OLD. JUST GIVE ME THE NUMBERS OF THE CONDITIONS AND THE FIRST NAME OF EACH CHLD. Show Card 29. (Use supplement sheet if there are more than 10 children less than five years old.)

(01) CHILD (02)

Show Card 29

(03) CHILD (04)

- 1 WON'T MIND
- 2 HYPERACTIVE OR CAN'T STICK TO ONE THING LONG ENOUGH
- 3 EASILY UPSET BAD TEMPER HIGH STRUNG OR NERVOUS
- 4 TROUBLE SLEEPING OR FREQUENT NIGHTMARES
- 5 THUMBSUCKING
- 6 STUTTERING
- 7 BREATHHOLDING
- 8 FREQUENTLY CHEWS ON THINGS OTHER THAN FOOD
- 9 STARTS FIRES
- 10 FIGHTS TOO MUCH
- 11 CLINGS TO MOTHER OR CRIES TOO MUCH
- 12 BREAKS THINGS ON PURPOSE (DESTRUCTIVE)
- 13 OFTEN DEPRESSED MOODY OR WITHDRAWN
- 14 LYING
- 15 STEALING
- 16 POOR APPETITE OR OTHER EATING PROBLEMS
- 17 DOESN'T MAKE FRIENDS EASILY CAN'T GET ALONG WITH OTHER CHILDREN OR GETS JEALOUS

OTHER

NR

UNK

OTHER

NR

UNK

OTHER

NR

UNK

Other, please specify _____

Other, please specify _____

Other, please specify _____

Other, please specify _____

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FORM APPROVED
BUDGET BUREAU NO. 65 R 0134

13792-15

INTERVIEW NUMBER

Ask [30] [39] for all members of the household 5 years of age and older.

30. WHAT IS YOUR FIRST NAME? (Write respondent's name on tab.) WHAT IS THE FIRST NAME OF EACH MEMBER OF THIS HOUSEHOLD? PLEASE LIST ACCORDING TO AGE BEGINNING WITH THE YOUNGEST MEMBER FIVE YEARS OF AGE OR OLDER. (Write names on tab.) WHAT IS (Person's name) RELATIONSHIP TO THE HEAD OF HIS (HER) FAMILY LIVING IN THIS HOUSEHOLD? Use supplement sheet if needed. Respondent is (01)

- 01. MALE OR FEMALE
- 02. AGE
- 03. RELATIONSHIP TO HEAD OF HOUSEHOLD
- 04. RACE
- 05. SEX
- 06. OCCUPATION
- 07. EDUCATION
- 08. MARITAL STATUS
- 09. NUMBER OF CHILDREN
- 10. YEAR OF BIRTH
- 11. YEAR OF ENTRY INTO AREA
- 12. YEAR OF DEPARTURE FROM AREA

- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09
- 10
- 11
- 12

31. IS (Person's name) A MALE OR A FEMALE? (Use supplement sheet if needed.)

	MALE	FEMALE	RESPONDENT	NR	UNK		MALE	FEMALE	NR	UNK
01						02				
03						04				
05						06				
07						08				
09						10				
11						12				

32. HOW OLD IS (Person's name)? Record age in years. Use supplement sheet if needed.

	1	2	3	4	TENS UNITS	5	6	7	NR	UNK		1	2	3	4	TENS	5	6	7	NR	UNK	
01											02											
03											04											
05											06											
07											08											
09											10											
11											12											



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13792-17

FORM APPROVED
BUDGET BUREAU NO. 85 R 0134

INTERVIEW NUMBER

38 HAS ANYONE FIVE YEARS OF AGE OR OLDER IN THIS HOUSEHOLD HAD ANY OF THESE CONDITIONS IN THE PAST TWELVE MONTHS? Show Card 38. HOW ABOUT ANY OF THESE CONDITIONS? Show Card 38A. PLEASE JUST GIVE ME THE NUMBER OF EACH CONDITION AND HOW MANY PEOPLE HAD THAT CONDITION. (If there are more than twelve people over four in the household record conditions for persons numbered over twelve on the supplement sheets only)

INTERVIEW NUMBER

CODE THE CONDITION NUMBERS

1st CONDITION 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

3rd CONDITION 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

5th CONDITION 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

2nd CONDITION 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

4th CONDITION 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

6th CONDITION 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

In the case of 38, NONE NR or UNK units 45 on the next page. If any or more conditions are reported in 38, use 39, 40, 41, 42, 43, 44 on the next page.

39 A) WHO HAD (Name of first condition in 38)? (Code person number)
NR UNK
0 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

B) ABOUT HOW MANY DAYS DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
0 1 2 3-5 6-10 11-15 DAYS 16-20 21-25 26 PLUS NR UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
(Code only the most severe)
HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

D) HAS (Person's name) HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
YES NO NR UNK

40 A) WHO HAD (Name of second condition in 38)? (Code person number)
NR UNK
0 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

B) ABOUT HOW MANY DAYS DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
0 1-2 3-5 6-10 11-15 DAYS 16-20 21-25 26 PLUS NR UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
(Code only the most severe)
HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

D) HAS (Person's name) HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
YES NO NR UNK

41 A) WHO HAD (Name of third condition in 38)? (Code person number)
NR UNK
0 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

B) ABOUT HOW MANY DAYS DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
0 1-2 3-5 6-10 11-15 DAYS 16-20 21-25 26 PLUS NR UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
(Code only the most severe)
HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

D) HAS (Person's name) HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
YES NO NR UNK

42 A) WHO HAD (Name of fourth condition in 38)? (Code person number)
NR UNK
0 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

B) ABOUT HOW MANY DAYS DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
0 1-2 3-5 6-10 11-15 DAYS 16-20 21-25 26 PLUS NR UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
(Code only the most severe)
HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

D) HAS (Person's name) HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
YES NO NR UNK

43 A) WHO HAD (Name of fifth condition in 38)? (Code person number)
NR UNK
0 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

B) ABOUT HOW MANY DAYS DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
0 1-2 3-5 6-10 11-15 DAYS 16-20 21 25 26 PLUS NR UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
(Code only the most severe)
HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

D) HAS (Person's name) HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
YES NO NR UNK

44 A) WHO HAD (Name of sixth condition in 38)? (Code person number)
NR UNK
0 1 2 TENS
0 1 2 3 4 UNITS 5 6 7 8 9

B) ABOUT HOW MANY DAYS DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
0 1-2 3-5 6-10 11-15 DAYS 16-20 21-25 26 PLUS NR UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
(Code only the most severe)
HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

D) HAS (Person's name) HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
YES NO NR UNK

ECA 172 CIN 6-70



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13792-18

FORM APPROVED
 (U.S. GPO: 1964 O-354-013)

45 DOES ANYONE FIVE YEARS OF AGE OR OLDER IN THIS HOUSEHOLD HAVE ANY OF THESE CONDITIONS? Show Card 45. PLEASE JUST GIVE ME THE NUMBER OF EACH CONDITION AND HOW MANY PEOPLE HAVE THAT CONDITION.
 (If more than twelve people over four in the household record conditions for persons numbered over twelve on the supplement sheets only.)

	NO	NR	UNK
CODE THE CONDITION NUMBERS			
1ST CONDITION	2	3	TENS
0	1	2	3 4 UNITS 5 6 7 8 9
3RD CONDITION	2	3	TENS
0	1	2	3 4 UNITS 5 6 7 8 9
5TH CONDITION	2	3	TENS
0	1	2	3 4 UNITS 5 6 7 8 9
2ND CONDITION	2	3	TENS
0	1	2	3 4 UNITS 5 6 7 8 9
4TH CONDITION	2	3	TENS
0	1	2	3 4 UNITS 5 6 7 8 9
6TH CONDITION	2	3	TENS
0	1	2	3 4 UNITS 5 6 7 8 9

46 A) WHO HAD Name of first condition in 45? (Code person number)
 C 1 2 TENS NR UNK
 0 1 2 3 4 UNITS 5 6 7 8 9
 C) DID Person's name ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
 (Code only the most severe.)
 HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

B) ABOUT HOW LONG DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
 1 WK 2 WKS 3 WKS 1 MO 2 MOS 3 MOS 6 MOS PLUS NR UNK
 D) HAS Person's name HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
 YES NO NR UNK

47 A) WHO HAD Name of second condition in 45? (Code person number)
 C 1 2 TENS NR UNK
 0 1 2 3 4 UNITS 5 6 7 8 9
 C) DID Person's name ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
 (Code only the most severe.)
 HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

B) ABOUT HOW LONG DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
 1 WK 2 WKS 3 WKS 1 MO 2 MOS 3 MOS 6 MOS PLUS NR UNK
 D) HAS Person's name HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
 YES NO NR UNK

48 A) WHO HAD Name of third condition in 45? (Code person number)
 C 1 2 TENS NR UNK
 0 1 2 3 4 UNITS 5 6 7 8 9
 C) DID Person's name ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
 (Code only the most severe.)
 HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

B) ABOUT HOW LONG DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
 1 WK 2 WKS 3 WKS 1 MO 2 MOS 3 MOS 6 MOS PLUS NR UNK
 D) HAS Person's name HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
 YES NO NR UNK

49 A) WHO HAD Name of fourth condition in 45? (Code person number)
 C 1 2 TENS NR UNK
 0 1 2 3 4 UNITS 5 6 7 8 9
 C) DID Person's name ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
 (Code only the most severe.)
 HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

B) ABOUT HOW LONG DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
 1 WK 2 WKS 3 WKS 1 MO 2 MOS 3 MOS 6 MOS PLUS NR UNK
 D) HAS Person's name HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
 YES NO NR UNK

50 A) WHO HAD Name of fifth condition in 45? (Code person number)
 C 1 2 TENS NR UNK
 0 1 2 3 4 UNITS 5 6 7 8 9
 C) DID Person's name ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
 (Code only the most severe.)
 HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

B) ABOUT HOW LONG DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
 1 WK 2 WKS 3 WKS 1 MO 2 MOS 3 MOS 6 MOS PLUS NR UNK
 D) HAS Person's name HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
 YES NO NR UNK

51 A) WHO HAD Name of sixth condition in 45? (Code person number)
 C 1 2 TENS NR UNK
 0 1 2 3 4 UNITS 5 6 7 8 9
 C) DID Person's name ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE HOME CARE FOR THIS CONDITION?
 (Code only the most severe.)
 HOSPITALIZED DOCTOR HOME CARE NONE OF THESE NR UNK

B) ABOUT HOW LONG DURING THE PAST TWELVE MONTHS HAS THIS CONDITION KEPT (Person's name) IN BED ALL OR MOST OF THE DAY?
 1 WK 2 WKS 3 WKS 1 MO 2 MOS 3 MOS 6 MOS PLUS NR UNK
 D) HAS Person's name HAD ANY SPECIAL TRAINING, THERAPY OR REHABILITATION FOR THIS CONDITION?
 YES NO NR UNK

EA 12-70



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FORM APPROVED
BUDGET BUREAU NO. 45 R 0134

13792-19

Be sure you have asked about each reported condition in 45 before asking 52

INTERVIEW NUMBER

52 HAS ANYONE FIVE YEARS OF AGE OR OLDER IN THIS HOUSEHOLD HAD ANY OF THESE CONDITIONS IN THE PAST TWO WEEKS? Show Card 52. PLEASE JUST GIVE ME THE NUMBER OF EACH CONDITION AND HOW MANY PEOPLE HAVE HAD THE CONDITION (If there are thirteen or more household members, use a supplement form for persons numbered 13 or higher to record answers to 52-59)

1ST CONDITION	CODE THE CONDITION NUMBERS								
	3	4	TENS	5	6	7	8	9	UNITS
0	1	2	3	4	5	6	7	8	9
3RD CONDITION	3	4	TENS	5	6	7	8	9	UNITS
0	1	2	3	4	5	6	7	8	9
5TH CONDITION	3	4	TENS	5	6	7	8	9	UNITS
0	1	2	3	4	5	6	7	8	9
7TH CONDITION	3	4	TENS	5	6	7	8	9	UNITS
0	1	2	3	4	5	6	7	8	9

2ND CONDITION	3	4	TENS	5	6	7	8	9	UNITS
D	1	2	3	4	5	6	7	8	9
4TH CONDITION	3	4	TENS	5	6	7	8	9	UNITS
D	1	2	3	4	5	6	7	8	9
6TH CONDITION	3	4	TENS	5	6	7	8	9	UNITS
D	1	2	3	4	5	6	7	8	9

(If "46 (OTHER)" is marked for any of these seven conditions please specify)

If the answer to 52 is NO NR or UNK go to 60 on the next page. If one or more conditions are reported in 52 ask 53, 54, 55 for reported conditions

53 A) WHO HAD (Name of first condition in 52)? (Code person number)

0	1	2	TENS	NR	UNK				
0	1	2	3	4	5	6	7	8	9

B) HOW MANY DAYS OF EMPLOYMENT (SCHOOL WORK, HOUSEWORK) HAS (Person's name) BEEN LIMITED IN OR LOST IN THE PAST TWO WEEKS DUE TO THIS CONDITION?

0	1	2	3	4	DAYS	5	6	7 PLUS	NR	UNK
0	1	2	3	4	5	6	7	8	9	UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE ATTENTION AT HOME FOR THIS CONDITION IN THE PAST TWO WEEKS? (Code most severe)

HOSPITALIZED	DOCTOR	HOME CARE	NONE OF THESE	NR	UNK
0	1	2	3	4	5

54 A) WHO HAD (Name of second condition in 52)? (Code person number)

0	1	2	TENS	NR	UNK				
0	1	2	3	4	5	6	7	8	9

B) HOW MANY DAYS OF EMPLOYMENT (SCHOOL WORK, HOUSEWORK) HAS (Person's name) BEEN LIMITED IN OR LOST IN THE PAST TWO WEEKS DUE TO THIS CONDITION?

0	1	2	3	4	DAYS	5	6	7 PLUS	NR	UNK
0	1	2	3	4	5	6	7	8	9	UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE ATTENTION AT HOME FOR THIS CONDITION IN THE PAST TWO WEEKS? (Code most severe)

HOSPITALIZED	DOCTOR	HOME CARE	NONE OF THESE	NR	UNK
0	1	2	3	4	5

55 A) WHO HAD (Name of third condition in 52)? (Code person number)

0	1	2	TENS	NR	UNK				
0	1	2	3	4	5	6	7	8	9

B) HOW MANY DAYS OF EMPLOYMENT (SCHOOL WORK, HOUSEWORK) HAS (Person's name) BEEN LIMITED IN OR LOST IN THE PAST TWO WEEKS DUE TO THIS CONDITION?

0	1	2	3	4	DAYS	5	6	7 PLUS	NR	UNK
0	1	2	3	4	5	6	7	8	9	UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE ATTENTION AT HOME FOR THIS CONDITION IN THE PAST TWO WEEKS? (Code most severe)

HOSPITALIZED	DOCTOR	HOME CARE	NONE OF THESE	NR	UNK
0	1	2	3	4	5

56 A) WHO HAD (Name of fourth condition in 52)? (Code person number)

0	1	2	TENS	NR	UNK				
0	1	2	3	4	5	6	7	8	9

B) HOW MANY DAYS OF EMPLOYMENT (SCHOOL WORK, HOUSEWORK) HAS (Person's name) BEEN LIMITED IN OR LOST IN THE PAST TWO WEEKS DUE TO THIS CONDITION?

0	1	2	3	4	DAYS	5	6	7 PLUS	NR	UNK
0	1	2	3	4	5	6	7	8	9	UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE ATTENTION AT HOME FOR THIS CONDITION IN THE PAST TWO WEEKS? (Code most severe)

HOSPITALIZED	DOCTOR	HOME CARE	NONE OF THESE	NR	UNK
0	1	2	3	4	5

57 A) WHO HAD (Name of fifth condition in 52)? (Code person number)

0	1	2	TENS	NR	UNK				
0	1	2	3	4	5	6	7	8	9

B) HOW MANY DAYS OF EMPLOYMENT (SCHOOL WORK, HOUSEWORK) HAS (Person's name) BEEN LIMITED IN OR LOST IN THE PAST TWO WEEKS DUE TO THIS CONDITION?

0	1	2	3	4	DAYS	5	6	7 PLUS	NR	UNK
0	1	2	3	4	5	6	7	8	9	UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE ATTENTION AT HOME FOR THIS CONDITION IN THE PAST TWO WEEKS? (Code most severe)

HOSPITALIZED	DOCTOR	HOME CARE	NONE OF THESE	NR	UNK
0	1	2	3	4	5

58 A) WHO HAD (Name of sixth condition in 52)? (Code person number)

0	1	2	TENS	NR	UNK				
0	1	2	3	4	5	6	7	8	9

B) HOW MANY DAYS OF EMPLOYMENT (SCHOOL WORK, HOUSEWORK) HAS (Person's name) BEEN LIMITED IN OR LOST IN THE PAST TWO WEEKS DUE TO THIS CONDITION?

0	1	2	3	4	DAYS	5	6	7 PLUS	NR	UNK
0	1	2	3	4	5	6	7	8	9	UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE ATTENTION AT HOME FOR THIS CONDITION IN THE PAST TWO WEEKS? (Code most severe)

HOSPITALIZED	DOCTOR	HOME CARE	NONE OF THESE	NR	UNK
0	1	2	3	4	5

59 A) WHO HAD (Name of seventh condition in 52)? (Code person number)

0	1	2	TENS	NR	UNK				
0	1	2	3	4	5	6	7	8	9

B) HOW MANY DAYS OF EMPLOYMENT (SCHOOL WORK, HOUSEWORK) HAS (Person's name) BEEN LIMITED IN OR LOST IN THE PAST TWO WEEKS DUE TO THIS CONDITION?

0	1	2	3	4	DAYS	5	6	7 PLUS	NR	UNK
0	1	2	3	4	5	6	7	8	9	UNK

C) DID (Person's name) ENTER THE HOSPITAL, SEE A DOCTOR, OR RECEIVE ATTENTION AT HOME FOR THIS CONDITION IN THE PAST TWO WEEKS? (Code most severe)

HOSPITALIZED	DOCTOR	HOME CARE	NONE OF THESE	NR	UNK
0	1	2	3	4	5

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FORM APPROVED
BUDGET BUREAU NO 85 R 0134

61 DID YOU OR ANYONE ELSE IN THE HOUSEHOLD GET HURT OR INJURED DURING THE LAST TWO WEEKS HERE AT HOME, IN THE YARD, OR IN YOUR NEIGHBORHOOD? ("Hurt or injured" includes such things as falls, cuts, poisoning, burns, etc. including minor ones not thought serious.)

YES NO NR UNK

62 HOW MANY INJURIES OCCURRED INSIDE THE HOME? (If one or more injuries are reported, give the respondent Show Card 62 and ask) FOR THOSE INJURIES WHICH OCCURRED INSIDE THE HOME, HOW MANY RESULTED IN EACH OF THE FOLLOWING?

NONE 1 INJURY 2 INJURIES 3 PLUS INJURIES NR UNK

- Show Card 62 63 64
- A) HOSPITALIZATION
 - B) MEDICAL ATTENTION SUCH AS CALLING A DOCTOR, GOING TO THE CLINIC, ETC.
 - C) HOME FIRST AID SUCH AS A BANDAGE, OINTMENT, OR OTHER TREATMENT
 - D) COMPLAINED OF PAIN BUT DID NOT REQUEST OR NEED FIRST AID
 - E) DID NOT COMPLAIN OF PAIN AND DID NOT REQUEST OR NEED FIRST AID

63 HOW MANY INJURIES OCCURRED IN THE YARD INCLUDING THE SIDEWALK? (If one or more injuries are reported, give the respondent Show Card 63 and ask) FOR THOSE INJURIES WHICH OCCURRED IN THE YARD OR ON THE SIDEWALK, HOW MANY RESULTED IN EACH OF THE FOLLOWING?

NONE 1 INJURY 2 INJURIES 3 PLUS INJURIES NR UNK

- Show Card 62 63 64
- A) HOSPITALIZATION
 - B) MEDICAL ATTENTION SUCH AS CALLING A DOCTOR GOING TO THE CLINIC, ETC.
 - C) HOME FIRST AID SUCH AS A BANDAGE, OINTMENT, OR OTHER TREATMENT
 - D) COMPLAINED OF PAIN BUT DID NOT REQUEST OR NEED FIRST AID
 - E) DID NOT COMPLAIN OF PAIN AND DID NOT REQUEST OR NEED FIRST AID

64 HOW MANY INJURIES OCCURRED ELSEWHERE IN THE NEIGHBORHOOD? (If one or more injuries are reported, give the respondent Show Card 64 and ask) FOR THOSE INJURIES WHICH OCCURRED IN THE NEIGHBORHOOD, HOW MANY RESULTED IN EACH OF THE FOLLOWING?

NONE 1 INJURY 2 INJURIES 3 PLUS INJURIES NR UNK

- Show Card 62 63 64
- A) HOSPITALIZATION
 - B) MEDICAL ATTENTION SUCH AS CALLING A DOCTOR GOING TO THE CLINIC, ETC.
 - C) HOME FIRST AID SUCH AS A BANDAGE, OINTMENT, OR OTHER TREATMENT
 - D) COMPLAINED OF PAIN BUT DID NOT REQUEST OR NEED FIRST AID
 - E) DID NOT COMPLAIN OF PAIN AND DID NOT REQUEST OR NEED FIRST AID

65 ARE YOU USING ANY ARTIFICIAL OR OTHER METHODS OF CONTROLLING FAMILY SIZE?

YES NO NR UNK

66 WOULD YOU PLEASE TELL ME WHAT METHODS OF CONTROLLING FAMILY SIZE YOU ARE CURRENTLY USING? PLEASE JUST GIVE ME THE APPROPRIATE NUMBERS

- Show Card 66
- 1) FOAM, JELLY OR CREAM
 - 2) RUBBER OR CONDOM
 - 3) DIAPHRAGM
 - 4) WITHDRAWAL
 - 5) RHYTHM
 - 6) INTRA-UTERINE DEVICE (IUD)
 - 7) DOUCHE
 - 8) SELF DENIAL (ABSTINENCE)
 - 9) PILLS
 - 10) MALE STERILIZATION (VASECTOMY)
 - 11) FEMALE STERILIZATION OR TUBES TIED (TUBAL LIGATION)
 - 12) OTHER

NR UNK

67 HAVE YOU BEEN TO A DOCTOR, CLINIC, OR FAMILY PLANNING SERVICE WITHIN THE LAST TWO YEARS CONCERNING USE OF BIRTH CONTROL METHODS?

YES NO NR UNK

68 DURING ANY SICKNESS OR ILLNESS WHICH OCCURRED WHILE LIVING AT THIS ADDRESS, WERE THERE ANY PROBLEMS TAKING CARE OF THE SICK PERSON BECAUSE OF ANY OF THE FOLLOWING CONDITIONS? Show Card 68.

- Show Card 68
- 1) TOO MANY STAIRS TO CLIMB
 - 2) LACKED HEAT
 - 3) COULDN'T GIVE PATIENT PRIVACY
 - 4) TOO MUCH NOISE
 - 5) DIFFICULTY IN PROVIDING CONSTANT OR PART TIME PERSONAL CARE
 - 6) NOT ENOUGH HOT WATER
 - 7) NOT ENOUGH FRESH AIR
 - 8) COULD NOT GIVE PATIENT PROPER FOOD OR DIET
 - 9) NO PRIVATE BATHROOM OR BATHROOM NOT WORKING
 - 10) OTHER
 - 11) NO PROBLEMS

NR UNK

(Please specify _____)

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69 WHERE DO MEMBERS OF THIS HOUSEHOLD USUALLY GO FOR MEDICAL CARE WHEN FEELING SICK OR ILL? (Do not read the responses to the respondent)

- | | |
|---|---------------------------------------|
| 1) PRIVATE PHYSICIAN (Fee for service including health insurance) | 2) PREPAID MEDICAL FACILITY OR CENTER |
| 3) NEIGHBORHOOD OR COMMUNITY HEALTH CENTER | 4) HEALTH DEPARTMENT CLINIC |
| 5) HOSPITAL CLINIC | 6) HOSPITAL EMERGENCY ROOM |
| 7) NURSING HOME SANITARIUM, CONVALESCENT HOME | 8) PHARMACIST DRUGGIST |
| 9) CHIROPRACTOR | 10) CANNOT GET MEDICAL CARE |
| 11) HAVE NEVER NEEDED MEDICAL CARE | 12) OTHER (Please specify) |
- NR UNK

70 DO YOU OR SOMEONE IN THIS HOUSEHOLD OWN A WORKING CAR, TRUCK, MOTORCYCLE, OR MOTOR SCOOTER?
YES NO NR UNK

71 HOW MANY PASSENGER AUTOMOBILES ARE OWNED OR REGULARLY USED BY MEMBERS OF YOUR HOUSEHOLD? COUNT COMPANY CARS KEPT AT HOME.
0 1 2 3 PLUS NR UNK

If "NO, NR or UNK" go to 72 If "YES" ask 71

72 IF YOU NEEDED MEDICAL CARE DURING THE NIGHT IN A HURRY, HOW WOULD YOU MOST LIKELY GET TO A PLACE OF MEDICAL CARE? (Code only one response. Do not read the responses to the respondent)

- | | |
|--|---|
| 1) PRIVATE AUTO TRUCK OR OTHER VEHICLE (Yours or a friend's) | 4) TAXI |
| 2) EMERGENCY VEHICLE (Ambulance, Police or Fire Dept. Car) | 5) TRAIN SUBWAY ELEVATED TRAIN |
| 3) BUS TROLLEY OR CABLE CAR | 6) WALK |
| | 7) WOULD CALL MEDICAL CARE TO MY HOME |
| | 8) CANNOT GET EMERGENCY MEDICAL ATTENTION |
| | 9) OTHER (Please specify) |
- 1 2 3 4 5 6 7 8 9 NR UNK

73 WHILE LIVING AT THIS RESIDENCE, HAVE ANY OF THE FOLLOWING REASONS PREVENTED YOU FROM USING A PUBLIC OR PRIVATE HEALTH OR MEDICAL SERVICE OR FROM RETURNING TO A HEALTH OR MEDICAL SERVICE WHEN REQUESTED TO BY A DOCTOR? Show Card 73

- | | | | |
|---|---|---|--|
| 1) TYPE OF SERVICE NEEDED NOT AVAILABLE | 2) HAD TO WAIT TOO LONG AT HEALTH FACILITY | 3) HAD BAD EXPERIENCE WITH HEALTH SERVICE | 4) DIDN'T WANT TO ACCEPT CHARITY OR ANYTHING THOUGHT TO BE CHARITY |
| 5) BAD REPUTATION OF HEALTH SERVICE | 6) DOCTOR DOESN'T EXPLAIN MY ILLNESS | 7) DON'T LIVE TO SIT IN WAITING ROOM WITH PEOPLE I KNOW | 8) CAN'T UNDERSTAND LANGUAGE OF HEALTH SERVICE PERSONNEL |
| 9) AFRAID OF DOCTOR | 10) ONLY TIME DOCTOR IS NEEDED IS WHEN I AM VERY SICK | 11) HAVE TO SEE TOO MANY PEOPLE BEFORE DOCTOR | 12) DON'T GET TO SEE SAME DOCTOR REGULARLY |

74 HOW ABOUT ANY OF THESE OTHER REASONS? Show Card 74

- | | | | |
|---------------------------------|--|--|---|
| 1) HEALTH FACILITY TOO FAR AWAY | 2) TOO SICK FROM PRIOR MEDICAL CONDITION | 3) NO ONE TO CARE FOR CHILDREN | 4) COULD NOT LOCATE HEALTH SERVICE BUILDING |
| 5) HEALTH CARE TOO EXPENSIVE | 6) TAKES TOO LONG TO GET TO HEALTH SERVICE | 7) HEALTH SERVICE ONLY OPEN HOURS WHEN I CANNOT BE THERE | 8) COSTS TOO MUCH TO GET TO HEALTH SERVICE |
| 9) BAD WEATHER | 10) OTHER (PLEASE SPECIFY) | 11) NONE OF THESE | |
- NR UNK

75 WHICH TWO PUBLIC HEALTH SERVICES WOULD YOU MOST LIKE TO SEE MADE AVAILABLE TO PEOPLE IN THIS NEIGHBORHOOD? Show Card 75

1ST RESPONSE	NR UNK	2ND RESPONSE
0 1 2 3 4 UNITS 5 6 7 8 9		0 1 2 3 4 UNITS 5 6 7 8 9
(OTHER Please specify)		

76 DURING THE PAST YEAR, WHICH OF THE FOLLOWING SOURCES HAVE YOU OR ANY MEMBERS OF THIS HOUSEHOLD RECEIVED INCOME FROM: Show Card 76.

- | | | | |
|---|---|---|--|
| 1) SALARY OR WAGES | 2) SELF EMPLOYMENT RENT INVESTMENTS DIVIDENDS INHERITANCE | 3) OLD AGE ASSISTANCE BENEFITS | 4) SOCIAL SECURITY - SPECIAL BENEFITS FOR PERSONS AGED 72 AND OVER |
| 5) SOCIAL SECURITY RETIREMENT INSURANCE AND RAILROAD RETIREMENT | 6) SOCIAL SECURITY SURVIVOR'S INSURANCE | 7) SOCIAL SECURITY DISABILITY INSURANCE | 8) PENSIONS (Private companies or civil service) |
| 9) ALIMONY AND PARENTAL CHILD SUPPORT | 10) AID TO FAMILIES WITH DEPENDENT CHILDREN | 11) UNEMPLOYMENT COMPENSATION | 12) VETERAN'S CASH BENEFITS |
| 13) AID TO THE PERMANENTLY & TOTALLY DISABLED | 14) AID TO THE BLIND | 15) EMERGENCY WELFARE ASSISTANCE | 16) OTHER (Please specify) |
| 17) NO INCOME | | | |

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THE NEXT SERIES OF QUESTIONS ASKS ABOUT REGULARLY OCCUPIED ROOMS IN YOUR HOUSING UNIT. A REGULARLY OCCUPIED ROOM IS A ROOM THAT YOU OR THE MEMBERS OF YOUR HOUSEHOLD USE FOR SLEEPING OR EATING OR LIVING. NOT ORDINARILY INCLUDED AS REGULARLY OCCUPIED ROOMS ARE HALLWAYS, BATHROOMS, WATER CLOSET COMPARTMENTS, ALCOVES, LAUNDRIES, FURNACE ROOMS, PANTRIES, FOYERS, KITCHENETTES, UTILITY ROOMS, CLOSETS, UNHEATED PORCHES AND HALF-ROOMS. UNLESS THESE ROOMS ARE ALSO USED AS EATING ROOMS, SLEEPING ROOMS, OR LIVING ROOMS.

INTERVIEW NUMBER

77 HOW MANY REGULARLY OCCUPIED ROOMS ARE IN YOUR HOUSING UNIT?

NUMBER OF ROOMS		TENS									NR	UNK
0	1	2	3	4	UNITS	5	6	7	8	9		

78 WHICH, IF ANY, OF THE FOLLOWING CONDITIONS EXIST IN ONE OR MORE OF THESE REGULARLY OCCUPIED ROOMS? PLEASE JUST GIVE ME THE NUMBERS OF THE CONDITIONS. Show Card 78 and 79.

- 1) A ROOM WITH NO WORKING HEATING SYSTEM PROVIDED BY THE LANDLORD
- 2) A ROOM WITHOUT WORKING ELECTRICITY
- 3) A ROOM WITH NO WINDOW OR NO DAYLIGHT
- 4) A ROOM WITH NO WINDOWS THAT CAN BE OPENED OR CLOSED AT WILL AND WITH NO MECHANICAL VENTILATION
- 5) NONE OF THESE

79 HOW MANY OF YOUR REGULARLY OCCUPIED ROOMS HAVE ONE OR MORE OF THESE CONDITIONS? Show Card 78 and 79.

TOTAL NUMBER OF ROOMS WITH ABOVE CONDITIONS		TENS									NR	UNK
0	1	2	3	4	UNITS	5	6	7	8	9		

80 EXCLUDING THE BASEMENT, ARE THERE ANY ROOMS IN WHICH THE FLOORS SLOPE? A SLOPING FLOOR HAS ONE PART HIGHER OR LOWER THAN THE LEVEL OF THE REST OF THE FLOOR

YES	NO	NR	UNK
-----	----	----	-----

81 HOW MANY BEDROOMS DO YOU HAVE? COUNT ROOMS USED ONLY FOR SLEEPING

NONE	1	2	3	4	ROOMS	5 PLUS	NR	UNK
------	---	---	---	---	-------	--------	----	-----

82 HOW MANY ADDITIONAL ROOMS ARE NORMALLY USED FOR SLEEPING AND ARE ALSO USED FOR COOKING, EATING, OR LIVING?

NONE	1	2	3	4	ROOMS	5	6	7 PLUS	NR	UNK
------	---	---	---	---	-------	---	---	--------	----	-----

83 DO YOU HAVE SIGHT PRIVACY IN THE ROOM YOU USE FOR SLEEPING? YES NO NR UNK

84 WHILE IN THE ROOM YOU USE FOR SLEEPING, ARE YOU BOTHERED BY NOISE FROM EITHER INSIDE OR OUTSIDE THE ROOM? YES NO NR UNK

85 WHILE IN YOUR BATHROOM, ARE YOU BOTHERED BY NOISE FROM EITHER INSIDE OR OUTSIDE THE BATHROOM? YES NO NR UNK

86 DO YOU HAVE ENOUGH ELECTRICAL OUTLETS IN EACH REGULARLY OCCUPIED ROOM WITHOUT USING SUCH SPECIAL ADAPTORS AS MULTIPLE-SOCKET OR OCTOPUS PLUGS? YES NO NR UNK

87 DO YOU USE AN OVEN, COOKING STOVE, HOT BELLY STOVE, HOT PLATE, FIREPLACE, OR PORTABLE ELECTRIC HEATER TO HELP HEAT ONE OR MORE ROOMS? YES NO NR UNK

88 DO YOU HAVE ENOUGH HEAT IN EVERY REGULARLY OCCUPIED ROOM? YES NO NR UNK

89 WITHIN THE LAST YEAR, HAVE YOU SEEN ANY RATS OR RAT SIGNS IN OR NEAR THIS BUILDING? YES NO NR UNK

90 IS THERE A KITCHEN SINK INSIDE THIS HOUSING UNIT? YES NO NR UNK

If YES ask: DOES IT PROVIDE HOT AND COLD RUNNING WATER AND DRAIN AWAY WASTE WATER? YES NO NR UNK

IS THE SINK USED BY ANOTHER HOUSEHOLD? YES NO NR UNK

IS THERE A GAS OR ELECTRIC KITCHEN STOVE INSIDE THIS HOUSING UNIT? YES NO NR UNK

If YES ask: DOES IT WORK? YES NO NR UNK

IS THE STOVE USED BY ANOTHER HOUSEHOLD? YES NO NR UNK

IS THERE A MECHANICAL REFRIGERATOR INSIDE THE HOUSING UNIT? YES NO NR UNK

If YES ask: IS IT IN WORKING ORDER? YES NO NR UNK

IS THE REFRIGERATOR USED BY ANOTHER HOUSEHOLD? YES NO NR UNK

91 IS THERE A BATHROOM SINK INSIDE YOUR HOUSING UNIT? YES NO NR UNK

If YES ask: DOES IT PROVIDE HOT AND COLD RUNNING WATER AND DRAIN AWAY WASTE WATER? YES NO NR UNK

IS THE SINK USED BY ANOTHER HOUSEHOLD? YES NO NR UNK

IS THERE A BATHTUB OR SHOWER INSIDE YOUR HOUSING UNIT? YES NO NR UNK

If YES ask: DOES IT PROVIDE HOT AND COLD RUNNING WATER AND DRAIN AWAY WASTE WATER? YES NO NR UNK

IS THE SHOWER OR TUB USED BY ANOTHER HOUSEHOLD? YES NO NR UNK

IS THERE A FLUSH TOILET INSIDE YOUR HOUSING UNIT? YES NO NR UNK

If YES ask: DOES IT WORK? YES NO NR UNK

IS THE TOILET USED BY ANOTHER HOUSEHOLD? YES NO NR UNK



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FORM APPROVED
 BUDGET BUREAU NO. 85-R-0134

92 DOES THIS HOUSING UNIT HAVE ANY OF THE FOLLOWING CONDITIONS IN ANY OF ITS ROOMS?
 Code as many as apply.

PLUMBING LEAKS	FREQUENT BATH WATER LEAK THROUGH CEILING, WALLS, WINDOWS OR DOORS	NR	UNK
WATER COLLECT ON CEILING, WALLS, WINDOWS OR DOORS		NR	UNK

93 IS YOUR HOUSING UNIT:
 (Read each of the four responses on the right)

1. RENTED FOR CASH RENT
2. A COOPERATIVE OR CONDOMINIUM WHICH IS OWNED OR BEING BOUGHT BY YOU OR BY SOMEONE ELSE IN THIS HOUSEHOLD
3. OWNED OR BEING BOUGHT BY YOU OR BY SOMEONE ELSE IN THIS HOUSEHOLD
4. OCCUPIED WITHOUT PAYMENT OF CASH RENT

94 WHICH OF THE FOLLOWING CATEGORIES BEST DESCRIBE THIS HOUSEHOLD'S MONTHLY RENT?
 (Show Card 93 and 95)

0	1	2	3	4	UNITS	5	6	7	8	9
					TENS					

95 WHICH OF THE FOLLOWING CATEGORIES BEST DESCRIBE THIS HOUSEHOLD'S MONTHLY MORTGAGE PAYMENTS?
 (Show Card 94 and 95)

0	1	2	3	4	UNITS	5	6	7	8	9
					TENS					

95 IN ADDITION TO THE RENT DO YOU ALSO PAY FOR — (Ask parts a, b, c, d and e of this question of each respondent)

a. ELECTRICITY? WHAT IS THE MONTHLY PAYMENT?
 NOT USED 0 1 2 3 4 5 6 7 8 9

b. GAS? WHAT IS THE MONTHLY PAYMENT?
 NOT USED 0 1 2 3 4 5 6 7 8 9

c. WATER? WHAT IS THE YEARLY PAYMENT?
 NOT USED 0 1 2 3 4 5 6 7 8 9

d. OIL COAL KEROSENE WOOD ETC? WHAT IS THE YEARLY COST?
 NOT USED 0 1 2 3 4 5 6 7 8 9

e. REAL ESTATE TAXES? WHAT IS THE YEARLY PAYMENT?
 NO IN MORT 0 1 2 3 4 5 6 7 8 9

97 NOT COUNTING YOUR HOME, HOW MANY APARTMENTS AND ROOMING UNITS ARE THERE IN THIS BUILDING?

0	1	2	3	4	UNITS	5	6	7	8	9
					TENS					

98 AT PRESENT HOW MANY RENTAL UNITS ARE VACANT?

0	1	2	3	4	UNITS	5	6	7	8	9
					TENS					

99 OF THESE VACANT RENTAL UNITS HOW MANY DO NOT HAVE THEIR OWN KITCHEN?

0	1	2	3	4	UNITS	5	6	7	8	9
					TENS					

100 HOW MANY ROOMS DO YOU HAVE YEARLY INCOME FROM?

0	1	2	3	4	UNITS	5	6	7	8	9 PLUS
					TENS					

101 INCLUDING SALARY, BONUSES, AND OTHER SOURCES OF INCOME, WHICH OF THE FOLLOWING CATEGORIES BEST DESCRIBE THIS HOUSEHOLD'S TOTAL YEARLY INCOME BEFORE TAXES? (Show Card 101)

0	1	2	3	4	UNITS	5	6	7	8	9
					TENS					

102 WITHIN THE LAST YEAR, WHICH OF THE FOLLOWING HAS BEEN A MAJOR THREAT IN THIS NEIGHBORHOOD?
 Show Card 102

- | | |
|--|-------------------------------|
| 1. VIOLENCE OR DESTRUCTION OF PROPERTY | 2. ASSAULT, FIGHTING, BEATING |
| 3. FIRE | 3. SUBJECTS THROWN OR DROPPED |
| 4. THEFT OR BURGLAR | 4. CURSING, SHAMING |
| 5. MURDER OR OTHER CRIME | 5. HOMICIDE, MURDER |
| 6. DRUGS OR ALCOHOL | 6. DRUNKENNESS |
| 7. VANDALISM | 7. JUVENILE DELINQUENCY |
| 8. PROSTITUTION | 8. ILLEGITIMACY |
| 9. EXTORTION OR BULLYING | 9. RACIAL PERSECUTION |
| 10. PERSECUTION DUE TO RELIGION OR ETHNICITY WHERE OTHERS ARE NOT PERSECUTED | 10. OTHER |
| | 11. NONE OF THESE |

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FORM APPROVED
BUDGET BUREAU NO. 85 R 0134

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103 ON THE BASIS OF YOUR OWN EXPERIENCE OR FROM WHAT YOU'VE HEARD OR READ, PLEASE TELL ME WHETHER YOU ARE SATISFIED OR DISSATISFIED WITH THE FOLLOWING SERVICES. ALSO PLEASE TELL ME WHETHER OR NOT YOU HAVE HAD PERSONAL CONTACT WITH THESE SERVICES. (Read each item. Do not code more than two responses for each service.)

- DISSATISFIED
SATISFIED
- NO PERSONAL CONTACT PERSONAL CONTACT NR UNK
- TRASH COLLECTION
 - GARBAGE COLLECTION
 - PUBLIC MEDICAL FACILITIES
 - SCHOOLS EDUCATION
 - WELFARE AND PUBLIC ASSISTANCE ADMINISTRATION HOUSING CODE INSPECTION
 - RODENT PEST AND DOG CONTROL
 - POLICE PROTECTION
 - FIRE PROTECTION
 - PUBLIC TRANSPORTATION
 - WATER LIGHT AND POWER (GAS OR ELECTRIC)
 - EMPLOYMENT SERVICES

104 NOW, PLEASE TELL ME WHETHER YOU ARE SATISFIED OR DISSATISFIED WITH THESE SERVICES (Read each item. Do not code more than two responses for each service.)

- DISSATISFIED
SATISFIED
- NO PERSONAL CONTACT PERSONAL CONTACT NR UNK
- SEWAGE DISPOSAL (Sewage and toilet back-ups etc.)
 - RECREATION FOR ADULTS
 - RECREATION FOR TEENAGERS
 - RECREATION FOR CHILDREN
 - AIR POLLUTION CONTROL
 - STREET AND ROAD CONDITIONS AND MAINTENANCE
 - TRAFFIC CONDITIONS
 - WATER POLLUTION CONTROL
 - COURTS
 - PUBLIC HOUSING
 - JAILS, CORRECTIONAL FACILITIES, AND PROBATION

105 IN THE PAST, PEOPLE HAVE MENTIONED CONCERN ABOUT SOME OF THE FOLLOWING CONDITIONS IN THEIR NEIGHBORHOOD. FOR EACH CONDITION I'M ABOUT TO READ, PLEASE TELL ME WHETHER OR NOT THE CONDITION EXISTS, AND IF IT DOES EXIST WHETHER YOU ARE CONCERNED OR UNCONCERNED ABOUT IT. (Read each item.)

- CONCERNED
UNCONCERNED
NEUTRAL
- NEIGHBORHOOD IS INCONVENIENT TO TRANSPORTATION SHOPPING SCHOOLS AND OTHER SERVICES
 - NEIGHBORHOOD DOES NOT HAVE ENOUGH DRUG STORES
 - POLICIES OF NEIGHBORHOOD STORES ARE HARD ON PEOPLE
 - NEIGHBORHOOD DOES NOT HAVE ENOUGH LAUNDROMATS
 - TOO MANY BARS IN THE AREA
 - NEIGHBORHOOD DOES NOT HAVE ENOUGH FOOD STORES
 - THERE IS NOT ENOUGH LOW COST LOW-RENT HOUSING IN THE AREA
 - THE CONDITION OF THE NEIGHBORHOOD AND ITS HOUSES IS UNSATISFACTORY
 - THE AREA IS OVERCROWDED
 - POOR STREET LIGHTING
 - NEIGHBORHOOD DOES NOT HAVE ENOUGH ADEQUATE PARKS AND PLAYGROUNDS

106 PLEASE TELL ME IF THESE CONDITIONS EXIST IN THIS AREA, AND IF SO WHETHER YOU ARE CONCERNED OR UNCONCERNED (Read each item.)

- CONCERNED
UNCONCERNED
NEUTRAL
- PEOPLE DO NOT HAVE ENOUGH INCOME
 - PEOPLE DO NOT HAVE ENOUGH OF THE RIGHT KIND OF FOOD
 - PEOPLE DO NOT HAVE ENOUGH WORK OR ENOUGH WORKING HOURS
 - NEIGHBORHOOD ACTION GROUPS ARE TOO ACTIVE
 - TOO MANY NEIGHBORHOOD PROGRAMS RUN BY OUTSIDERS
 - NEIGHBORHOOD ACTION GROUPS DO NOT REPRESENT OR ACT IN THE PEOPLE'S INTERESTS

107 THERE ARE MANY DIFFERENT WAYS OF TRYING TO DEAL WITH CONDITIONS IN A NEIGHBORHOOD. IN ATTEMPTING TO DEAL WITH NEIGHBORHOOD CONDITIONS, HAVE YOU EVER DONE ANY OF THE FOLLOWING IN THIS NEIGHBORHOOD? Show Card 107. PLEASE JUST GIVE ME THE NUMBERS.

- 1) CALLED OR WRITTEN A PUBLIC OFFICIAL
 - 2) JOINED A PROTEST PARADE OR PICKETED
 - 3) FORMED OR ATTENDED NEIGHBORHOOD ORGANIZATIONS
 - 4) SIGNED A PETITION
 - 5) TALKED TO A PRIEST, MINISTER, RABBI OR OTHER RELIGIOUS LEADER
 - 6) TRIED TO DO SOMETHING ABOUT IT MYSELF
 - 7) TALKED TO LANDLORD
 - 8) MET WITH OTHER INTERESTED PEOPLE
 - 9) GAVE MONEY TO HELP
 - 10) OTHER
 - 11) NONE OF THESE
- NR UNK (Please specify _____)

108 HERE ARE THINGS SOME PEOPLE WOULD LIKE TO SEE CHANGED IN THEIR HOME. WHICH OF THESE CONDITIONS WOULD YOU LIKE TO SEE CHANGED IF ANY? Show Card 108. PLEASE JUST GIVE ME THE NUMBERS OF THE CONDITIONS.

- 1) HOUSE TOO DRY IN WINTER
 - 2) HOUSE TOO HOT IN SUMMER
 - 3) NOT ENOUGH HOT WATER
 - 4) NO LAUNDRY FACILITIES OR FACILITIES INADEQUATE
 - 5) FURNITURE OLD OR LACKING
 - 6) INADEQUATE CLOSET SPACE
 - 7) NO ADEQUATE PLACE TO STORE GARBAGE BEFORE REMOVAL
 - 8) ODOR INSIDE HOUSE
 - 9) NOISE INSIDE BUILDING
 - 10) NOT ENOUGH ROOMS
 - 11) OTHER
 - 12) NONE OF THESE
- NR UNK (Please specify _____)

ECA 132 (CM) (8-70)

0229



NEIGHBORHOOD ENVIRONMENTAL EVALUATION AND DECISION SYSTEM
INTERIOR INTERVIEW

FORM NO. 1
DATE

10/17/74

109 PLEASE TELL ME WHETHER YOU AGREE OR DISAGREE WITH EACH OF THE FOLLOWING STATEMENTS

- 1 I WOULD NOT WANT TO LIVE IN MY HOUSE AT LEAST ANOTHER YEAR
- 3 MY HOUSE IS A PLACE I ENJOY BEING IN
- 5 OUR FAMILY GETS ALONG WELL TOGETHER
- 6 I ENJOY WORKING AROUND THE HOUSE
- 9 I GET ALONG WELL WITH MY NEIGHBORS

- 2 I WOULD LIKE TO MOVE TO ANOTHER PLACE
- 4 I DON'T ENJOY MY HOUSE
- 7 I WOULD LIKE TO MOVE AWAY FROM HOME AS SOON AS I CAN
- 8 I DON'T ENJOY WORKING AROUND MY HOUSE
- 10 I DON'T GET ALONG WELL WITH MY NEIGHBORS

110 PLEASE TELL ME WHETHER YOU AGREE OR DISAGREE WITH EACH OF THE FOLLOWING STATEMENTS

- 1 PEOPLE TREAT THE PEOPLE OF THIS NEIGHBORHOOD FAIRLY

THE PEOPLE OF THIS NEIGHBORHOOD ARE NOT TREATED FAIRLY

111 TENANTS AND LANDLORDS OFTEN HAVE DIFFERENT OPINIONS ABOUT WHO SHOULD BE RESPONSIBLE FOR CAUSE OF THE NECESSARY MAINTENANCE RESULTING FROM SOMETHING DONE BY ONE OR THE OTHER. AS A TENANT DO YOU THINK SHOULD

- 1 PAINT AND PAPER THE INTERIOR
- 2 COLLECT AND PLACE TRASH AND RUBBISH FOR CARRIAGE MEN TO PICK UP
- 3 REPLACE BROKEN WINDOWS OR SCREENS
- 4 REPAIR STOVES, OVENS, REFRIGERATORS AND KITCHEN SINKS
- 5 GET RID OF FOOD AND SHELTER USES IN THE BUILDING THAT INSURE THE HEALTH OF THE TENANTS

- 6 REPAIR ROOF
- 7 REPAIR PLUMBING
- 8 REPAIR ELECTRICAL AND THE APPLIANCES
- 9 MAINTAIN AND REPAIR THE BUILDING
- 10 REPAIR AND MAINTAIN THE APPLIANCE

112 YOU USUALLY SEE OR HEAR ABOUT THIS IN THIS NEIGHBORHOOD?

1 HAVE HEARD OF THIS IN THIS NEIGHBORHOOD. I HAVE HEARD OF THIS IN THIS NEIGHBORHOOD. I HAVE HEARD OF THIS IN THIS NEIGHBORHOOD. I HAVE HEARD OF THIS IN THIS NEIGHBORHOOD.

113 TYPE OF EVIDENCE OR REASONS FOR INVENTION OF FACTS REASONS FOR EVIDENCE OR REASONS FOR

114

112

123

THANK YOU VERY MUCH

DEPARTMENT OF HEALTH AND HUMAN SERVICES

124

125 STAMP

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