



2026 Community Needs Assessment

LOCAL MANAGEMENT BOARD OF ALLEGANY COUNTY

Local Management Board of Allegany County
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I. INTRODUCTION

NEEDS ASSESSMENT OVERVIEW

The 2026 Allegany County Community Needs Assessment was completed by the Local Management Board of Allegany County to inform planning, coordination, and investment decisions affecting children, youth, and families. The assessment provides a countywide review of child and family well-being indicators, community input, service availability, and barriers to access.

The assessment draws on both quantitative and qualitative data. Quantitative indicators were collected from federal, state, and local sources, including the U.S. Census Bureau, Maryland Department of Health, Maryland State Department of Education, Maryland Department of Human Services, Maryland Department of Juvenile Services, County Health Rankings & Roadmaps, and other publicly available datasets. Qualitative input was gathered through a community survey, key informant interviews, partner feedback, and stakeholder engagement designed to capture the experiences of families, service providers, and community members.

This assessment is intended to support the FY26–FY28 Community Plan. It helps identify local strengths, persistent challenges, available resources, and areas where additional coordination or investment may be needed. The findings also support the Local Management Board’s participation in Maryland’s ENOUGH Initiative by connecting local data, resident feedback, and service assets to broader efforts around child poverty reduction, family economic mobility, and neighborhood-level planning.

EXECUTIVE SUMMARY

The assessment shows that Allegany County has many community strengths, including committed service providers, schools, public agencies, health and behavioral health partners, housing resources, food assistance programs, workforce partners, youth-serving organizations, faith-based groups, libraries, and community spaces. These assets provide an important foundation for future planning.

Nevertheless, the assessment points to persistent and connected challenges affecting children, youth, and families. These include family economic instability, housing and basic-needs pressures, transportation barriers, child care access, health and behavioral health needs, school attendance, youth opportunity, and service navigation.

A major theme across the assessment is that services may exist, but families may still face barriers finding, reaching, qualifying for, or using them. Transportation, child care, program awareness, eligibility requirements, paperwork, service hours, and referral follow-through all affect whether families can successfully connect to support.

The findings of this assessment provide the foundation for the FY26–FY28 Community Plan, which translates the data, community input, and resource review into strategies organized around the four ENOUGH planning areas: **Cradle-to-Career Education, Healthy Families, Economically Secure Families, and Safe and Thriving Communities.**

II. METHODOLOGY

METHODOLOGY

The 2026 Allegany County Community Needs Assessment was developed using an approach that combined quantitative data review, community survey findings, partner and stakeholder input, and key informant feedback. This approach was designed to provide both a countywide view of measurable conditions and a community-informed understanding of how children, youth, families, and service providers experience local systems.

QUANTITATIVE DATA COLLECTION

Quantitative data was collected from publicly available federal, state, and local sources. These sources included, but were not limited to, the U.S. Census Bureau, Maryland Department of Health, Maryland State Department of Education, Maryland Department of Human Services, Maryland Department of Juvenile Services, County Health Rankings & Roadmaps, Maryland Balance of State Continuum of Care, Maryland Lead Registry, and other published datasets relevant to child and family well-being.

The quantitative review was organized around key result areas commonly used by Local Management Boards and the State of Maryland to assess outcomes for children, youth, and families. These included:

- **BABIES BORN HEALTHY**
- **HEALTHY CHILDREN**
- **CHILDREN ENTER SCHOOL READY TO LEARN**
- **CHILDREN ARE SUCCESSFUL IN SCHOOL**
- **YOUTH WILL COMPLETE SCHOOL**
- **YOUTH HAVE OPPORTUNITIES FOR EMPLOYMENT AND CAREER READINESS**
- **COMMUNITIES ARE SAFE FOR CHILDREN, YOUTH, AND FAMILIES**
- **FAMILIES ARE ECONOMICALLY STABLE**

Within each result area, indicators were selected to show trends, disparities, and areas of concern. Examples include infant mortality, low birth weight, teen birth rates, immunization rates, youth mental health indicators, student physical activity, kindergarten readiness, MCAP proficiency, chronic absenteeism, graduation rates, CTE completion, juvenile felony offenses, child maltreatment, out-of-home placement, child poverty, housing cost burden, and homelessness. The assessment also includes demographic data from the U.S. Census Bureau's 2024 ACS estimates to provide context for the county's age, gender, and racial/ethnic composition.

COMMUNITY SURVEY

Community input was gathered through a resident survey designed to better understand local experiences, needs, barriers, and priorities. The community survey included responses from 50 residents across eight neighborhoods or community school areas, with the largest share of responses coming from South Penn, followed by John Humbird, Cash Valley, and Beall. Respondents represented a range of age groups and lengths of time living in the community, including many long-term residents; 42% reported living in the community for more than 10 years.

The community survey asked residents about basic needs, access to services, barriers to employment, school and youth opportunity, community spaces, program awareness, program satisfaction, preferred communication methods, and desired future programs and services. Survey findings were used to identify recurring themes and to compare resident experiences with the quantitative indicators included in the assessment.

PARTNER AND KEY INFORMANT INPUT

In addition to resident survey responses, qualitative input was gathered from community partners and key informants. This input was intended to capture the perspectives of organizations and individuals working directly with children, youth, and families in Allegany County. Participants included representatives from public agencies, nonprofit organizations, education, service providers, and other community stakeholders.

Key informant interviews and partner feedback were used to identify community strengths, service gaps, barriers to access, emerging needs, and opportunities for improved coordination. The qualitative process also helped interpret quantitative findings by providing context from those working within the local service system and those with direct knowledge of family and community needs.

DATA ANALYSIS AND SYNTHESIS

Quantitative and qualitative findings were reviewed together to identify patterns and see how conditions interact across systems. For example, transportation was considered not only as a basic need, but also as a barrier to employment, health care, school participation, and program access. Similarly, child poverty was analyzed in relation to housing burden, food insecurity, utilities, health care access, and service navigation.

Community survey responses were reviewed for both frequency and theme. Closed-ended responses were summarized using percentages or counts, while open-ended responses were coded into themes such as basic needs, transportation, child care, youth programming, safety, mental health, communication, and trust. These themes were then compared against quantitative indicators to identify areas where data and lived experience aligned.

ENOUGH INITIATIVE ALIGNMENT

Because the assessment is being completed in the context of Maryland's ENOUGH Initiative, the methodology also considered issues related to child poverty, economic mobility, and cross-sector coordination. Data and community input were reviewed with attention to how local conditions affect family stability, youth opportunity, and access to resources. Findings from the assessment are intended to help inform local strategies, progress measures, and investment decisions aligned with ENOUGH priorities and broader Children's Cabinet goals.

RESOURCE AND GAP IDENTIFICATION

The assessment also considered the existing program and service landscape in Allegany County. Community survey data on program awareness, use, satisfaction, and barriers to access was used to better understand how residents interact with available services. This was especially important in distinguishing between the existence of services and the practical ability of families to find, access, and benefit from those services.

Gaps were identified by comparing community needs, available resources, and reported barriers. This process helped highlight areas where services may be insufficient, difficult to access, poorly understood, or misaligned with resident needs.

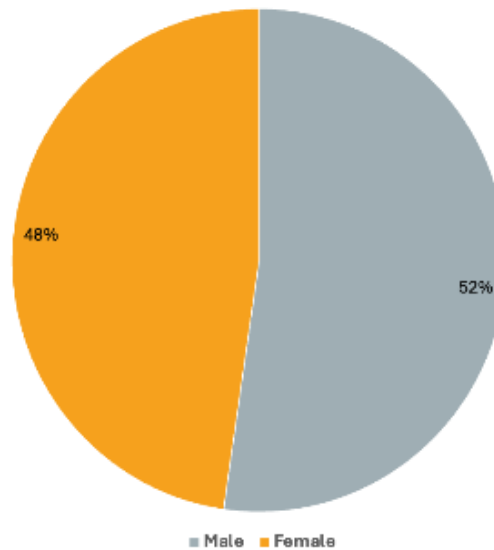
LIMITATIONS

As with any community assessment, findings are limited by available data and participation levels. Public datasets vary in publication year, methodology, and geographic specificity, and some indicators may not capture the most recent local conditions. Community survey findings reflect the perspectives of respondents who participated and should be interpreted as one important source of community input rather than a statistically representative sample of all Allegany County residents. Where possible, findings were strengthened by comparing multiple data sources and incorporating both quantitative indicators and qualitative feedback.

III. DEMOGRAPHICS

Population size, age distribution, sex, race, and ethnicity shape how services are planned, accessed, and delivered across the county. These figures are drawn from the U.S. Census Bureau's 2024 American Community Survey Demographic and Housing Estimates.

Population of Allegany County by Gender



POPULATION BY SEX

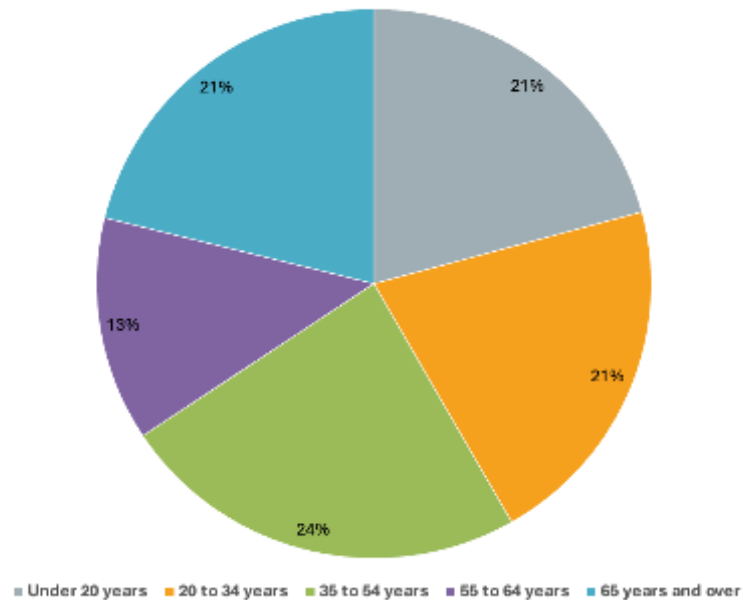
Allegany County's estimated total population is 67,452. The county has a slightly larger male population than female population, with 35,277 males and 32,175 females. This results in a sex ratio of 109.6 males per 100 females.

Sex	Population	Percent of Total Population
Male	35,277	52.3%
Female	32,175	47.7%
Total	67,452	100.0%

POPULATION BY AGE

The median age in Allegany County is 41.2 years. Approximately 17.8% of residents are under age 18, while 21.1% are age 65 or older. This age profile is important for planning because the county must consider the needs of both children and youth, as well as older adults who may be connected to caregiving households, intergenerational poverty, transportation needs, and health care access.

Population of Allegany County, By Age

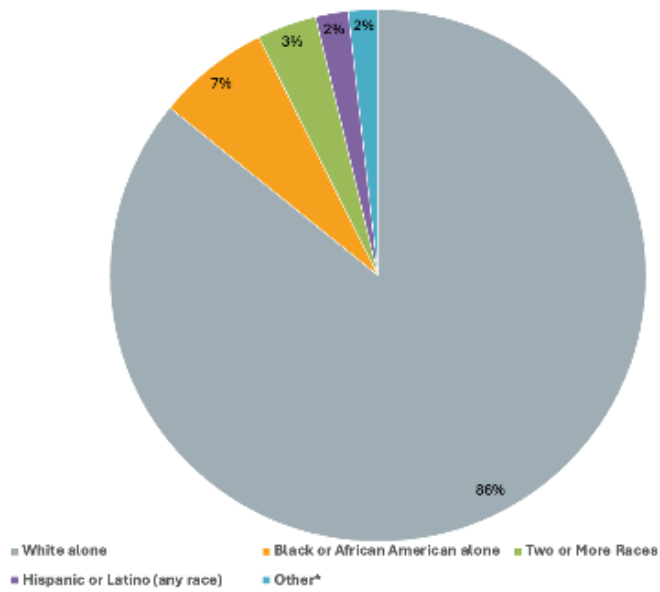


Age Group	Population	Percent of Total Population
Under 5 years	3,093	4.6%
5 to 9 years	3,513	5.2%
10 to 14 years	3,254	4.8%
15 to 19 years	4,165	6.2%
20 to 24 years	5,689	8.4%
25 to 34 years	8,433	12.5%
35 to 44 years	8,165	12.1%
45 to 54 years	7,977	11.8%
55 to 59 years	4,308	6.4%
60 to 64 years	4,593	6.8%
65 to 74 years	7,923	11.7%
75 to 84 years	4,384	6.5%
85 years and over	1,955	2.9%
Total	67,452	100.0%

RACE AND ETHNICITY

Allegany County's population is majority White, with 86.6% of residents identifying as White alone. Black or African American residents make up 6.9% of the population, and residents identifying as two or more races make up 4.5%. Hispanic or Latino residents of any race make up 2.0% of the total population.

Population of Allegany County, By Race / Ethnicity



Race	Population	Percent of Total Population
White alone	58,427	86.6%
Black or African American alone	4,633	6.9%
American Indian and Alaska Native alone	155	0.2%
Asian alone	708	1.0%
Native Hawaiian and Other Pacific Islander alone	28	0.0%
Some Other Race alone	466	0.7%
Two or More Races	3,035	4.5%
Total	67,452	100.0%

HISPANIC OR LATIN ORIGIN

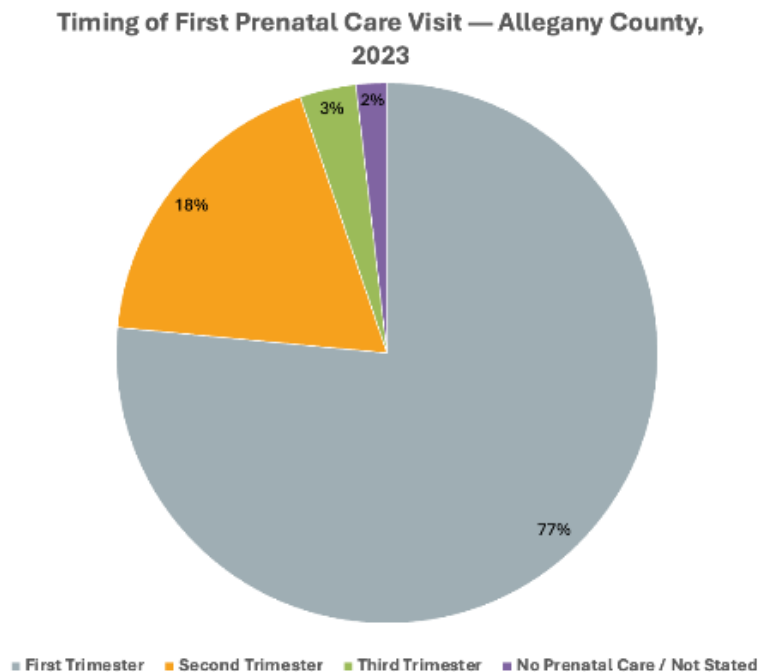
Hispanic or Latino Origin	Population	Percent of Total Population
Hispanic or Latino, of any race	1,328	2.0%
Not Hispanic or Latino	66,124	98.0%
Total	67,452	100.0%

IV. QUANTITATIVE DATA

RESULT: BABIES BORN HEALTHY

The “Babies Born Healthy” result area examines maternal and infant health indicators that help measure whether children in Allegany County are getting a healthy start in life. Indicators in this section include prenatal care, infant mortality, low birth weight, births to adolescents, and substance-exposed newborns. Together, these measures provide insight into maternal health, access to care, early childhood risk factors, and disparities that may affect long-term child development and family well-being.

INDICATOR: PRENATAL CARE IN THE FIRST TRIMESTER



Definition: The percentage of live births by timing of the mother’s first prenatal care visit, including first trimester, second trimester, third trimester, and no prenatal care or not stated.

Source: Maryland Department of Health, Vital Statistics Administration, 2023, Table 6: Allegany County Births.

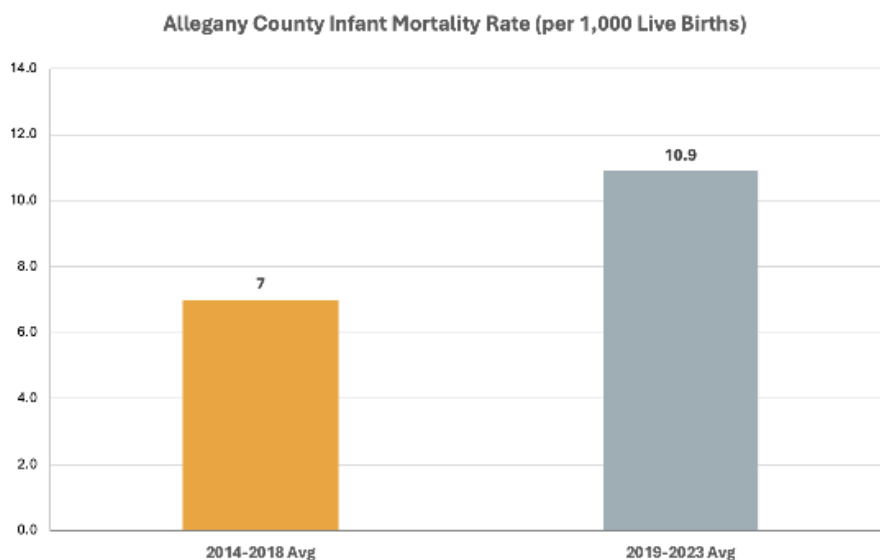
SIGNIFICANCE

Early prenatal care is important for monitoring maternal and fetal health, identifying potential risks, connecting families to needed supports, and improving birth outcomes. First-trimester prenatal care allows health care providers to screen for medical, behavioral, and social risk factors early in pregnancy. Delayed or absent prenatal care may indicate barriers such as lack of insurance, transportation challenges, provider shortages, limited awareness, substance use, or other social and economic pressures.

ANALYSIS

In 2023, 77% of Allegany County births involved prenatal care beginning in the first trimester. Another 18% began prenatal care in the second trimester, 3% in the third trimester, and 2% had no prenatal care or prenatal care was not stated. While most births involved prenatal care beginning in the first trimester, nearly one-quarter of births did not. This suggests that continued attention should be given to early pregnancy outreach, access to providers, transportation, insurance coverage, and supports for mothers who may face barriers to timely prenatal care.

INDICATOR: INFANT MORTALITY



Definition: The number of infant deaths before age one per 1,000 live births.

Source: Maryland Department of Health, Vital Statistics Administration, *Infant Mortality in Maryland, 2023*; CDC/NCHS Infant Mortality Data, 2023–2024.

SIGNIFICANCE

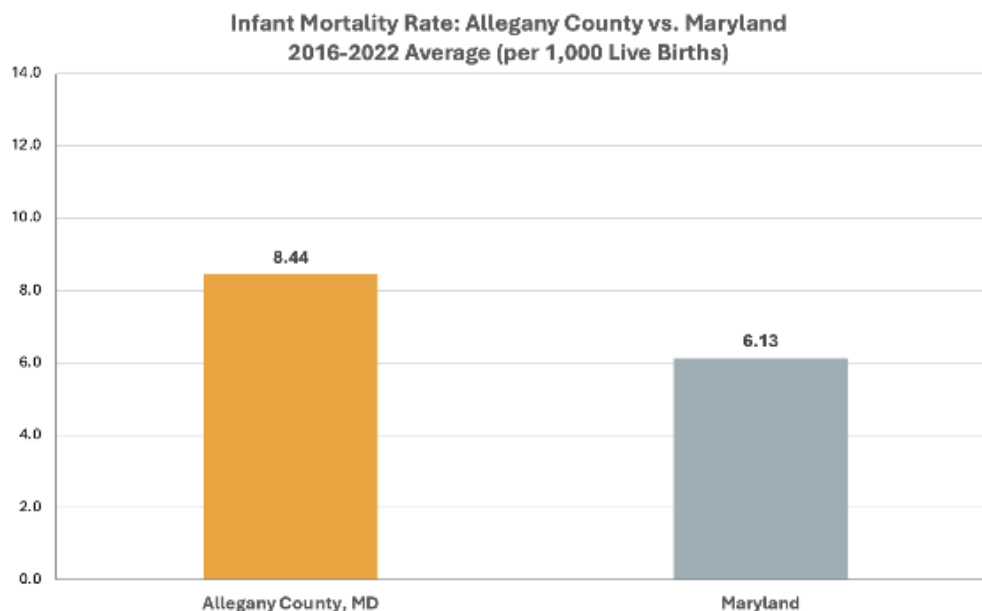
Infant mortality is a key measure of overall maternal and child health. It reflects not only medical care before and after birth, but also broader social and economic conditions affecting families, including poverty, access to prenatal care, maternal health, nutrition, housing stability, substance use, and health care access. Because infant deaths are relatively rare in smaller counties, rates may fluctuate from year to year, so multi-year averages are often used to identify broader trends.

ANALYSIS

Allegany County's infant mortality rate increased from 7.0 deaths per 1,000 live births in the 2014–2018 average to 10.9 deaths per 1,000 live births in the 2019–2023 average. This upward movement is concerning and should be monitored closely, particularly in connection with prenatal care, low birth weight, maternal health, and access to early childhood supports. Because small population numbers can cause rate instability,

this indicator should be interpreted alongside other maternal and infant health measures rather than in isolation.

INDICATOR: INFANT MORTALITY — ALLEGANY COUNTY COMPARED TO MARYLAND



Definition: The number of infant deaths before age one per 1,000 live births, comparing Allegany County to the State of Maryland.

Source: County Health Rankings & Roadmaps, 2025 Annual Data Release; infant mortality rate, 2016–2022 average.

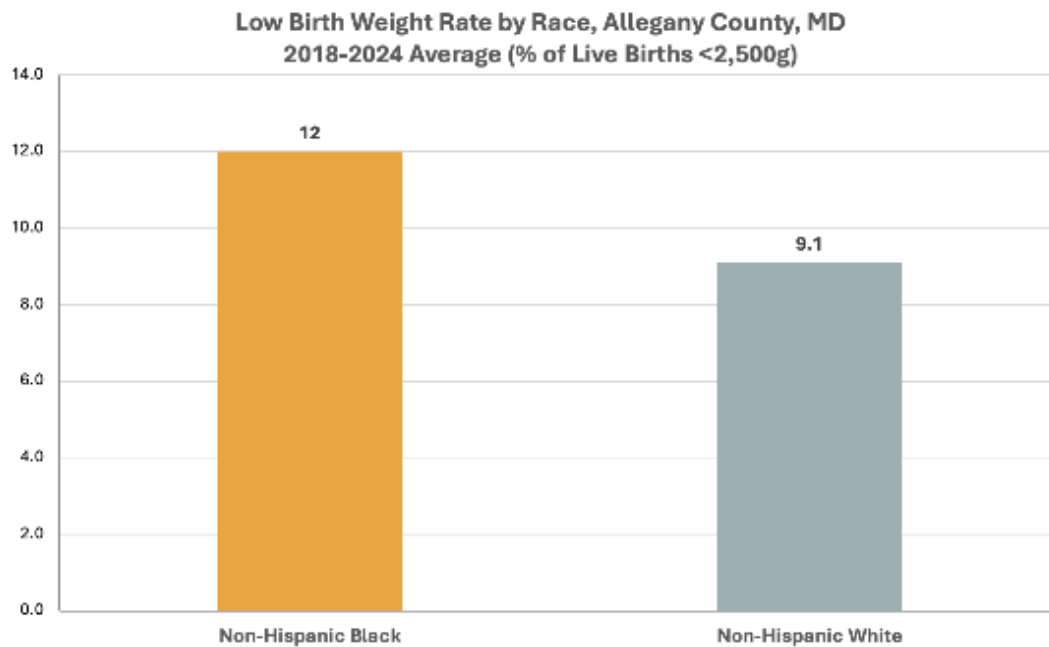
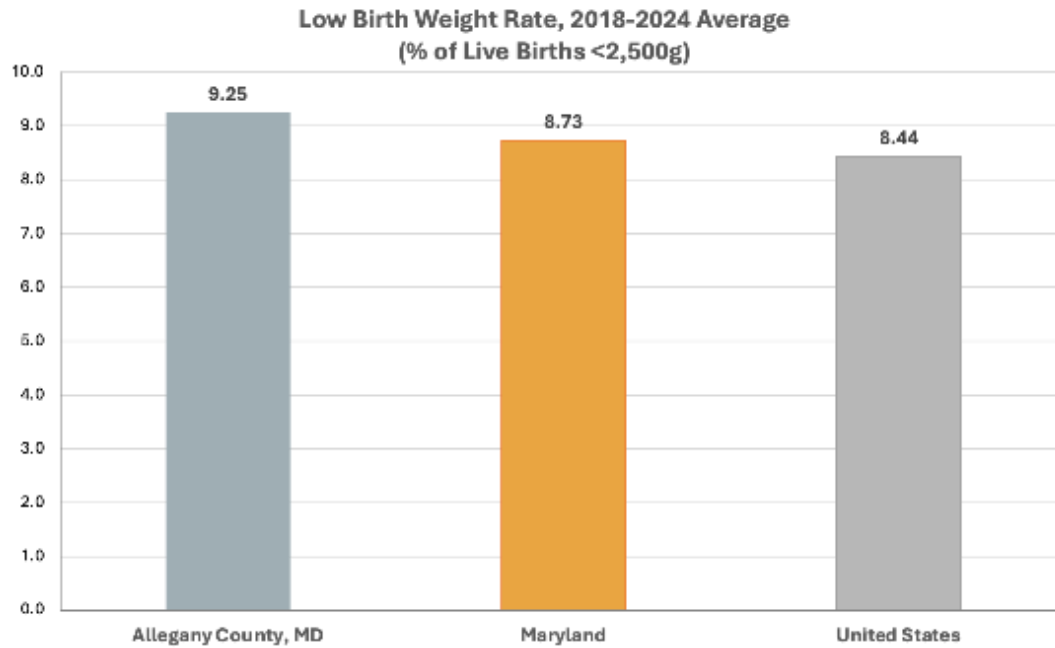
SIGNIFICANCE

Comparing Allegany County’s infant mortality rate to the statewide rate helps show whether local outcomes differ from Maryland overall. This comparison can help identify whether local maternal and infant health systems, access barriers, or socioeconomic conditions may require targeted attention.

ANALYSIS

For the 2016–2022 average, Allegany County’s infant mortality rate was 8.44 deaths per 1,000 live births, compared with 6.13 deaths per 1,000 live births statewide. This indicates that Allegany County’s infant mortality rate was higher than Maryland’s overall rate during this period. This difference reinforces the need for continued focus on maternal health, prenatal care, infant health, and early family supports.

INDICATOR: LOW BIRTH WEIGHT



Definition: The percentage of live births in which the infant weighed less than 2,500 grams at birth.

Source: County Health Rankings & Roadmaps, 2026; NCHS Natality Files, 2018–2024.

SIGNIFICANCE

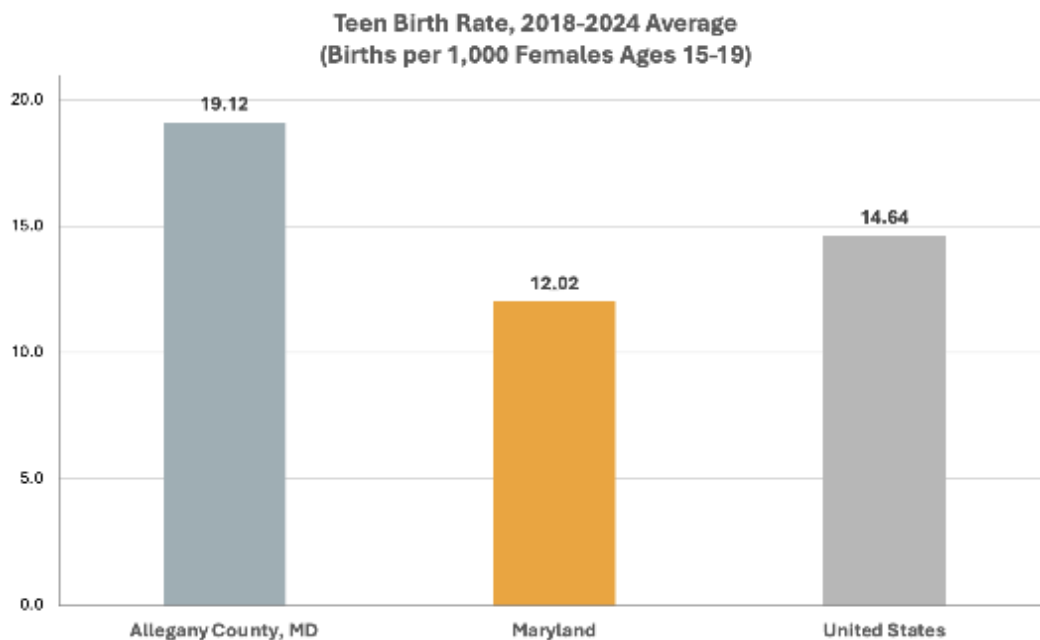
Low birth weight is an important indicator of infant health and future developmental risk. Babies born at a low

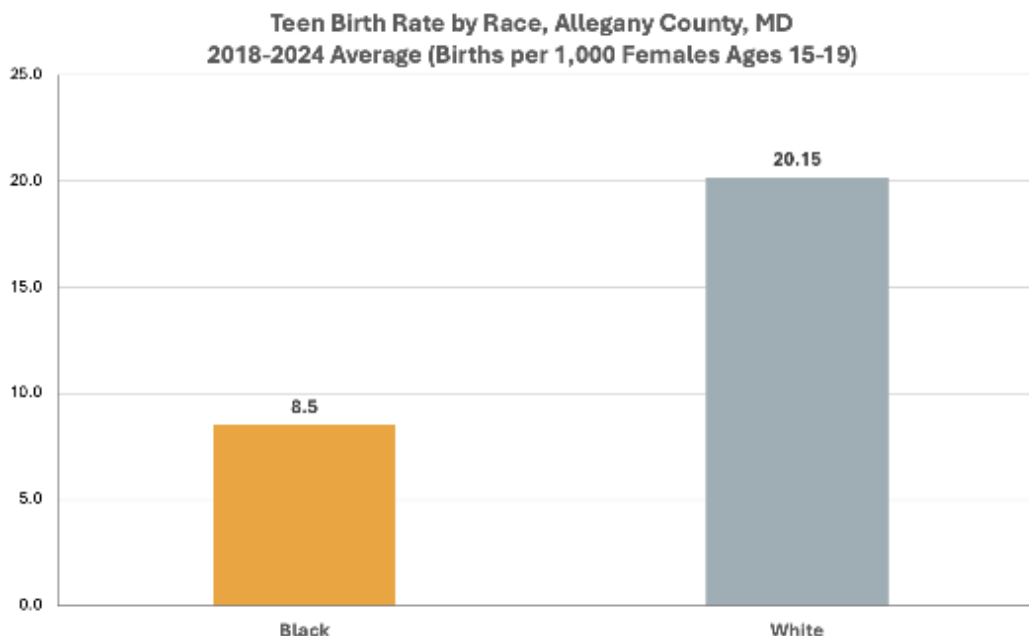
birth weight are at greater risk for health complications, developmental delays, respiratory problems, and other challenges. Low birth weight can be influenced by maternal health, prenatal care, nutrition, smoking, substance use, chronic stress, poverty, and other social determinants of health.

ANALYSIS

Allegany County's low birth weight rate for the 2018–2024 average was 9.25%, compared with 8.73% for Maryland and 8.44% for the United States. The county's rate is slightly higher than both the state and national rates. The data also shows a racial disparity within Allegany County: the low birth weight rate was 12.0% for Non-Hispanic Black infants compared with 9.1% for Non-Hispanic White infants. This suggests the need to examine maternal health outcomes through both a countywide and disparity-focused lens.

INDICATOR: BIRTHS TO ADOLESCENTS





Definition: The number of births per 1,000 females ages 15–19.

Source: County Health Rankings & Roadmaps, 2026; NCHS Natality Files and Census Population Estimates, 2018–2024.

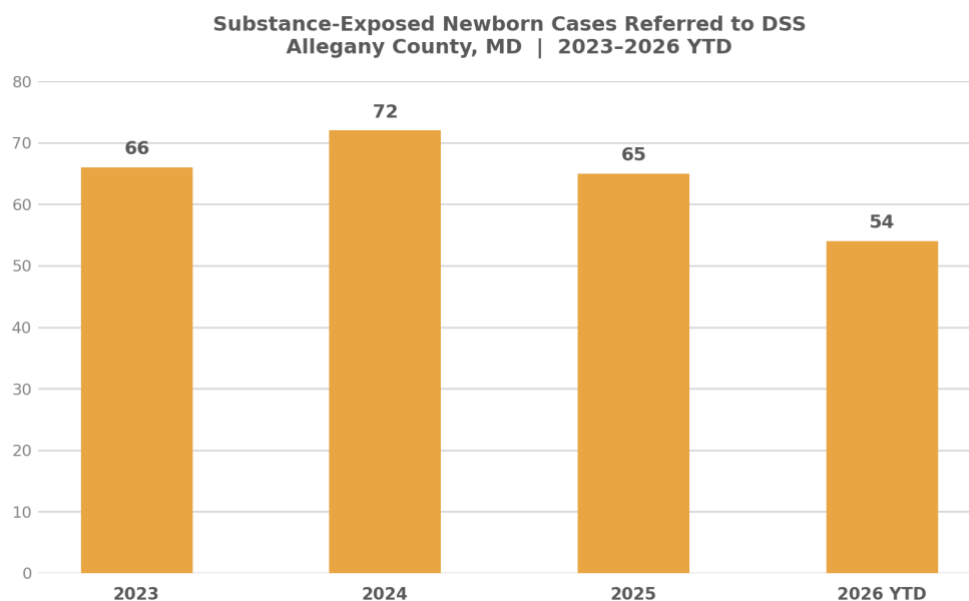
SIGNIFICANCE

Teen birth rates are connected to adolescent health, educational attainment, family economic stability, and long-term outcomes for both young parents and children. Teen parents may face additional barriers to completing school, securing employment, accessing child care, and achieving financial stability. This indicator can also reflect access to reproductive health education, preventive care, trusted adults, and youth support systems.

ANALYSIS

Allegany County's teen birth rate for the 2018–2024 average was 19.12 births per 1,000 females ages 15–19, compared with 12.02 for Maryland and 14.64 for the United States. Allegany County's rate is higher than both the state and national rates. The data also shows differences by race, with a teen birth rate of 20.15 for White females ages 15–19 and 8.5 for Black females ages 15–19. This indicator suggests a continued need for adolescent health education, youth development opportunities, support for young parents, and access to reproductive and preventive health services.

INDICATOR: SUBSTANCE-EXPOSED NEWBORNS



Definition: The number of substance-exposed newborn cases referred to the Local Department of Social Services. Under Maryland guidance, a health care provider may refer a newborn to LDSS when a newborn tests positive for a controlled substance following birth, displays effects of fetal alcohol spectrum disorder, shows signs of withdrawal or is affected by substance abuse, or when caregiver behavior may affect the safety of the newborn.

Source: Maryland Department of Human Services / Local Department of Social Services substance-exposed newborn referral data, 2023–2026 YTD.

SIGNIFICANCE

Substance-exposed newborn cases are an important indicator of maternal health, infant safety, substance use disorder, and the need for coordinated family supports. These cases may reflect prenatal substance exposure, withdrawal symptoms, fetal alcohol spectrum disorder concerns, or caregiver impairment affecting newborn safety. Substance-exposed newborns and their families may require coordinated responses involving health care providers, social services, behavioral health treatment, substance use treatment, early intervention, home visiting, and family support.

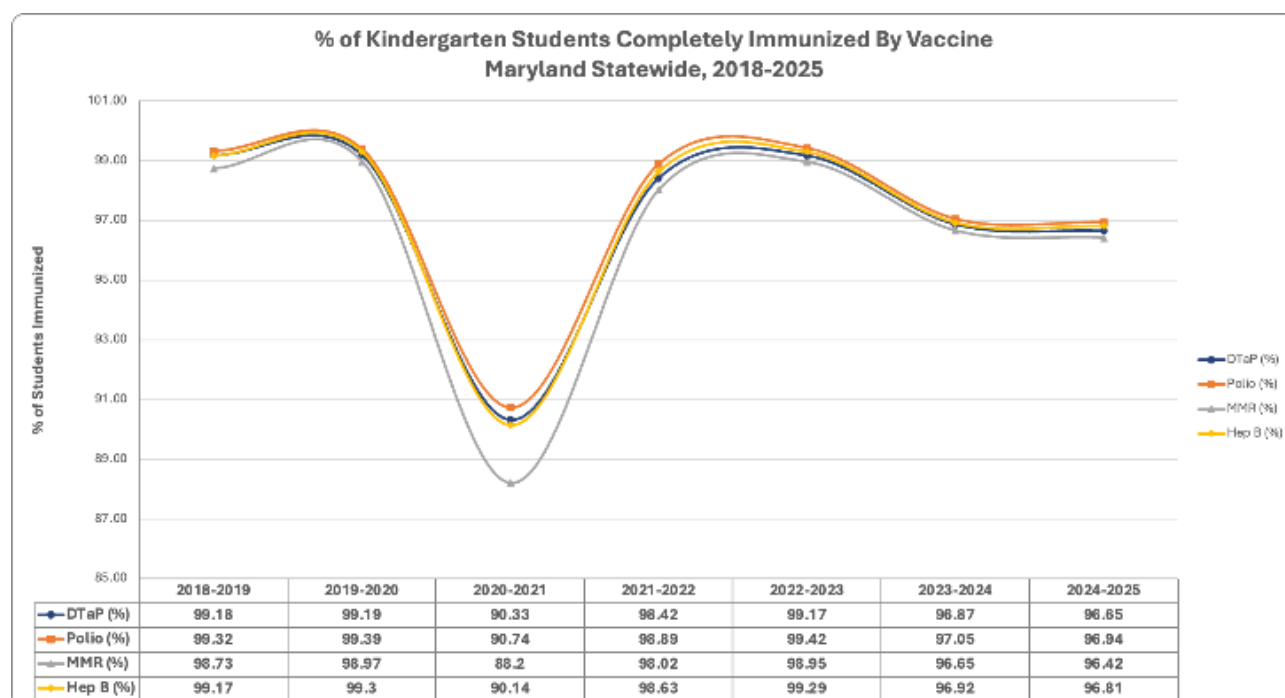
ANALYSIS

Allegany County recorded 66 substance-exposed newborn cases in 2023, 72 in 2024, 65 in 2025, and 54 cases in 2026 year-to-date. The annual totals from 2023 through 2025 show a relatively consistent level of cases, ranging from 65 to 72 per year. While 2024 was the highest year shown, 2025 returned to a level similar to 2023. The 2026 figure should be interpreted cautiously because it is year-to-date rather than a completed annual total. Overall, the data suggests that substance exposure among newborns remains a persistent concern and should continue to be considered alongside prenatal care, infant health, behavioral health access, substance use treatment, child welfare, and family stabilization supports.

RESULT: HEALTHY CHILDREN

The “Healthy Children” result area examines indicators related to children’s physical health, behavioral health, access to health coverage, and health-related behaviors. Indicators in this section include immunization completion, obesity, health insurance coverage, depressive symptoms among students, electronic vapor product use, and physical activity. Together, these measures help show whether children and youth in Allegany County have the conditions, supports, and access needed to grow, develop, and participate fully in school and community life.

INDICATOR: IMMUNIZATIONS — MARYLAND



Definition: The percentage of kindergarten students completely immunized by vaccine type, including DTaP, polio, MMR, and Hepatitis B.

Source: Maryland Department of Health, Annual School Immunization Survey, 2018–2025.

SIGNIFICANCE

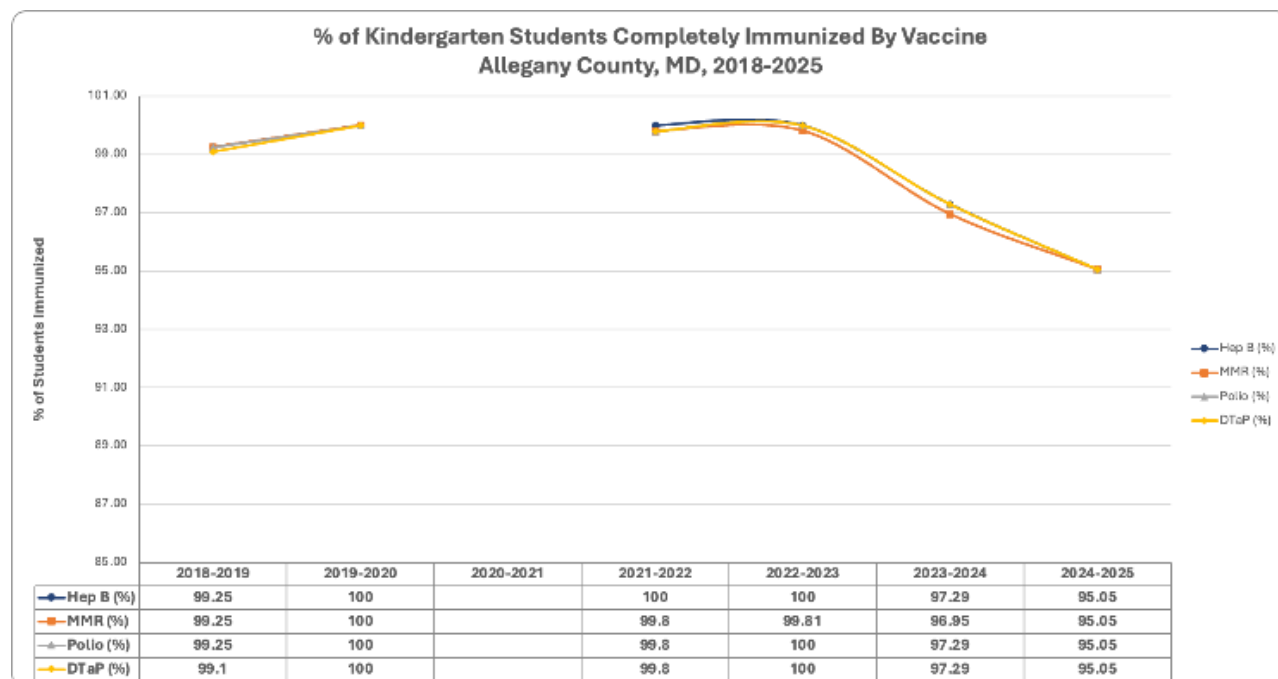
Childhood immunizations are an important measure of preventive health and community protection. High immunization rates help prevent the spread of vaccine-preventable diseases in schools and child care settings. Immunization data also reflects access to pediatric care, family engagement with health systems, school health compliance, and broader public health infrastructure.

ANALYSIS

Statewide immunization rates remained generally high across the period shown, although the chart indicates

a substantial decline during the 2020–2021 school year, followed by recovery in subsequent years. This pattern likely reflects the disruption of school and health systems during the COVID-19 period. The most recent years show statewide immunization completion rates below the highest pre-pandemic levels, suggesting continued attention is needed to ensure children remain connected to routine preventive care.

INDICATOR: IMMUNIZATIONS — ALLEGANY COUNTY



Definition: The percentage of Allegany County kindergarten students completely immunized by vaccine type, including DTaP, polio, MMR, and Hepatitis B.

Source: Maryland Department of Health, Annual School Immunization Survey, 2018–2025.

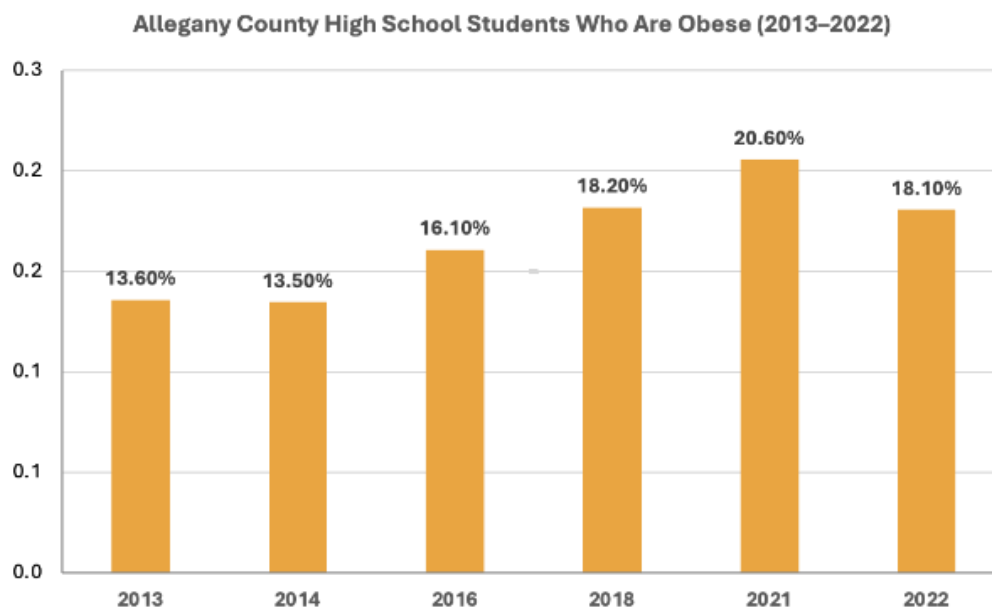
SIGNIFICANCE

Local immunization rates provide insight into children’s access to preventive care and the strength of school-health coordination. Declines in immunization completion may suggest barriers such as missed well-child visits, limited access to providers, transportation challenges, vaccine hesitancy, administrative delays, or disruptions in school enrollment and documentation. Maintaining high immunization rates is especially important in school settings, where children are in close contact with one another.

ANALYSIS

Allegany County’s immunization rates were high in the earlier years shown, but the chart indicates a notable decline in the most recent school years across the vaccine categories displayed. The decline appears more pronounced locally than the statewide pattern. This suggests a need to better understand whether the issue is related to access, documentation, delayed care, school enrollment patterns, or other barriers. Continued coordination among schools, pediatric providers, the health department, and families may be important to improve timely immunization completion.

INDICATOR: OBESITY



Definition: The percentage of Allegany County high school students classified as obese based on Youth Risk Behavior Survey data.

Source: Maryland Department of Health, YRBS, Allegany County, 2022–2023.

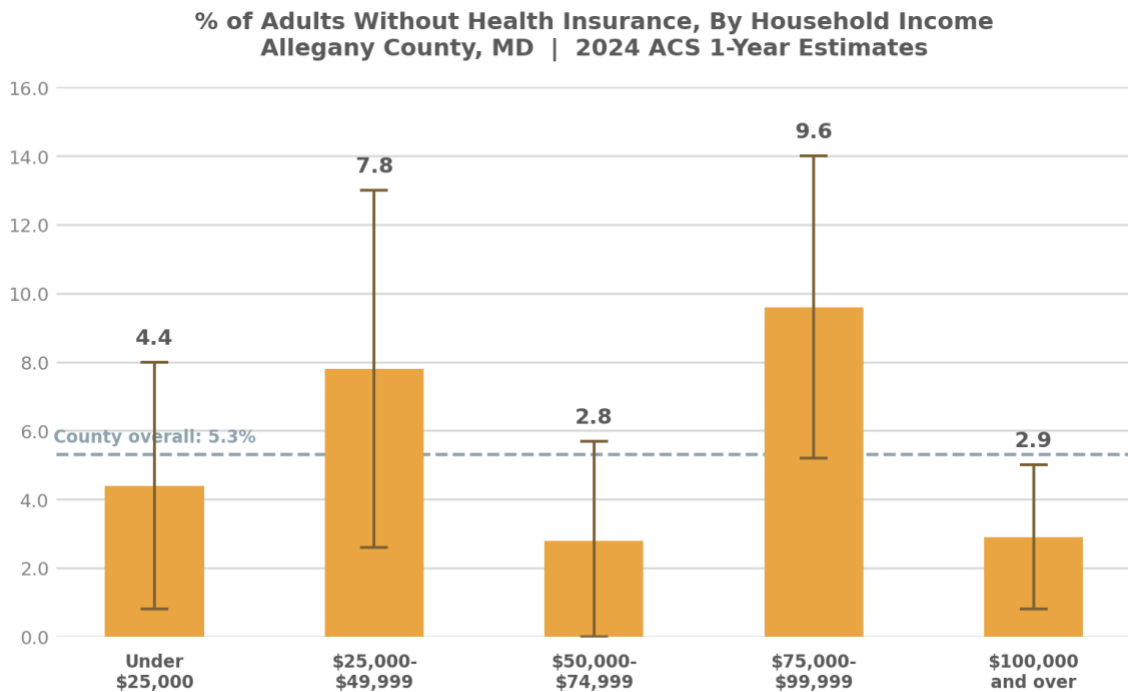
SIGNIFICANCE

Childhood and adolescent obesity is associated with increased risk for chronic health conditions, including diabetes, high blood pressure, heart disease, joint problems, and mental health challenges. Obesity can be influenced by many factors, including nutrition, physical activity, household income, access to healthy foods, neighborhood safety, family routines, transportation, and opportunities for recreation. Because obesity is shaped by both individual behavior and community conditions, it is an important indicator for local planning.

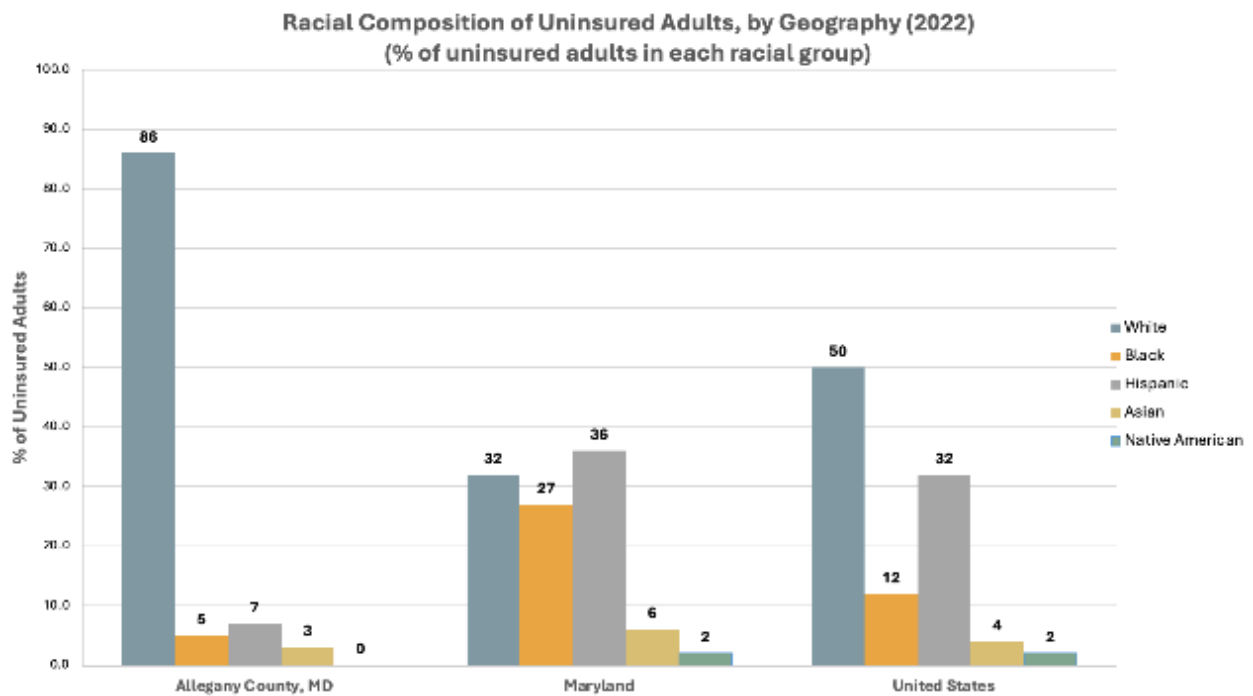
ANALYSIS

The percentage of Allegany County high school students who are obese increased from 13.8% in 2013 to 20.69% in 2021, before decreasing to 18.10% in 2022. Although the most recent data point shows improvement from 2021, the overall trend remains higher than the earliest years shown. This suggests that obesity should remain an area of focus, particularly in connection with access to healthy food, physical activity, safe recreational spaces, school-based wellness efforts, and family supports.

INDICATOR: HEALTH INSURANCE COVERAGE — ADULTS



Bars show the estimate; brackets show the 90% margin of error. Overlapping ranges mean the differences between brackets are not statistically reliable.



Definition: The percentage of adults without health insurance by household income, along with the racial composition of uninsured adults.

Source: U.S. Census Bureau, 2024 ACS 1-Year Estimates, Table S2703; U.S. Census Bureau, 2022 ACS 1-Year Estimates, Table S2701; KFF State Health Facts.

SIGNIFICANCE

Adult health insurance coverage affects the well-being of children and families. Parents and caregivers without insurance may delay care, struggle to manage chronic conditions, or face financial stress from medical costs. Adult health coverage can also affect a family's ability to maintain stable employment, care for children, and connect to preventive and behavioral health services. For families with children, caregiver health is often directly tied to household stability.

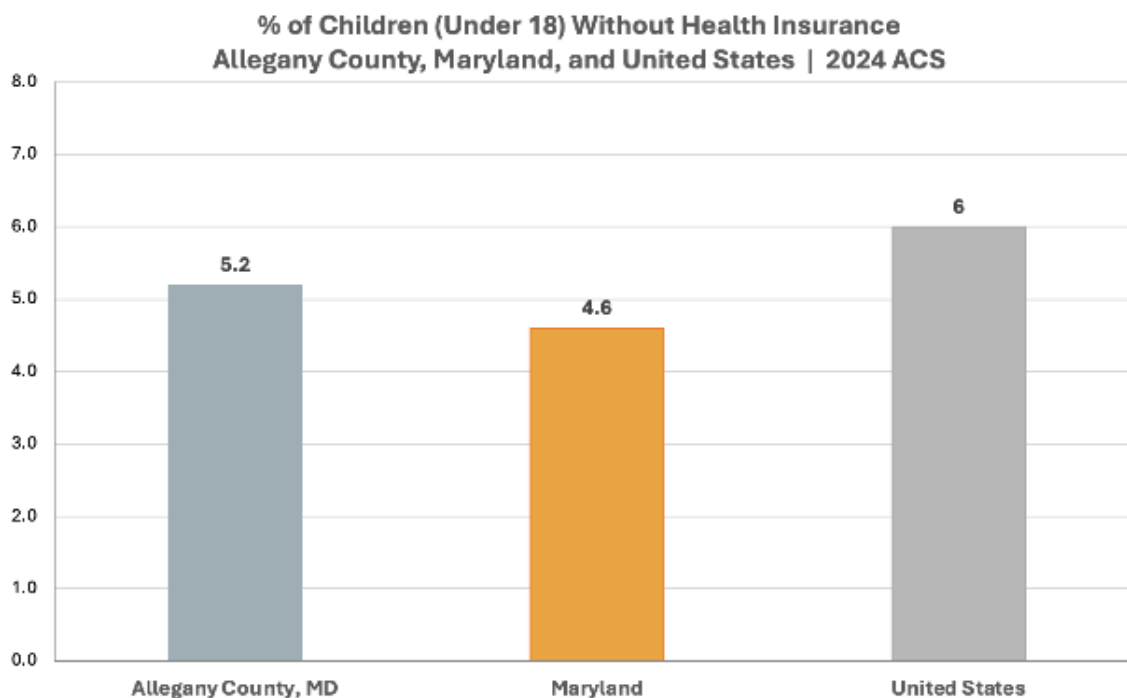
ANALYSIS

An estimated **5.3%** of Allegany County adults were without health insurance in 2024, with a margin of error of **±1.4%**. This means the countywide adult uninsured rate is likely between **3.9% and 6.7%**. Because this countywide estimate has the clearest interpretation, it should be treated as the primary finding for this indicator.

The household income breakdown should be read with caution. The chart shows variation by income group, including a higher estimated uninsured rate among adults in households earning **\$75,000 to \$99,999**, but the margins of error are large enough that the income groups cannot be clearly distinguished from one another. In other words, the chart is useful for showing that there may be differences by income, but it should not be used to conclude that one specific income group has the highest uninsured rate.

What the data does suggest is that adult uninsurance is not limited only to the lowest-income households. Some adults may earn too much to qualify for Medicaid while still facing affordability, enrollment, or employer-coverage barriers. This indicator should be considered alongside employment, household income, health care access, and basic-needs data.

INDICATOR: HEALTH INSURANCE COVERAGE — CHILDREN



Definition: The percentage of children under age 18 without health insurance coverage.

Source: U.S. Census Bureau, 2024 ACS 1-Year Estimates.

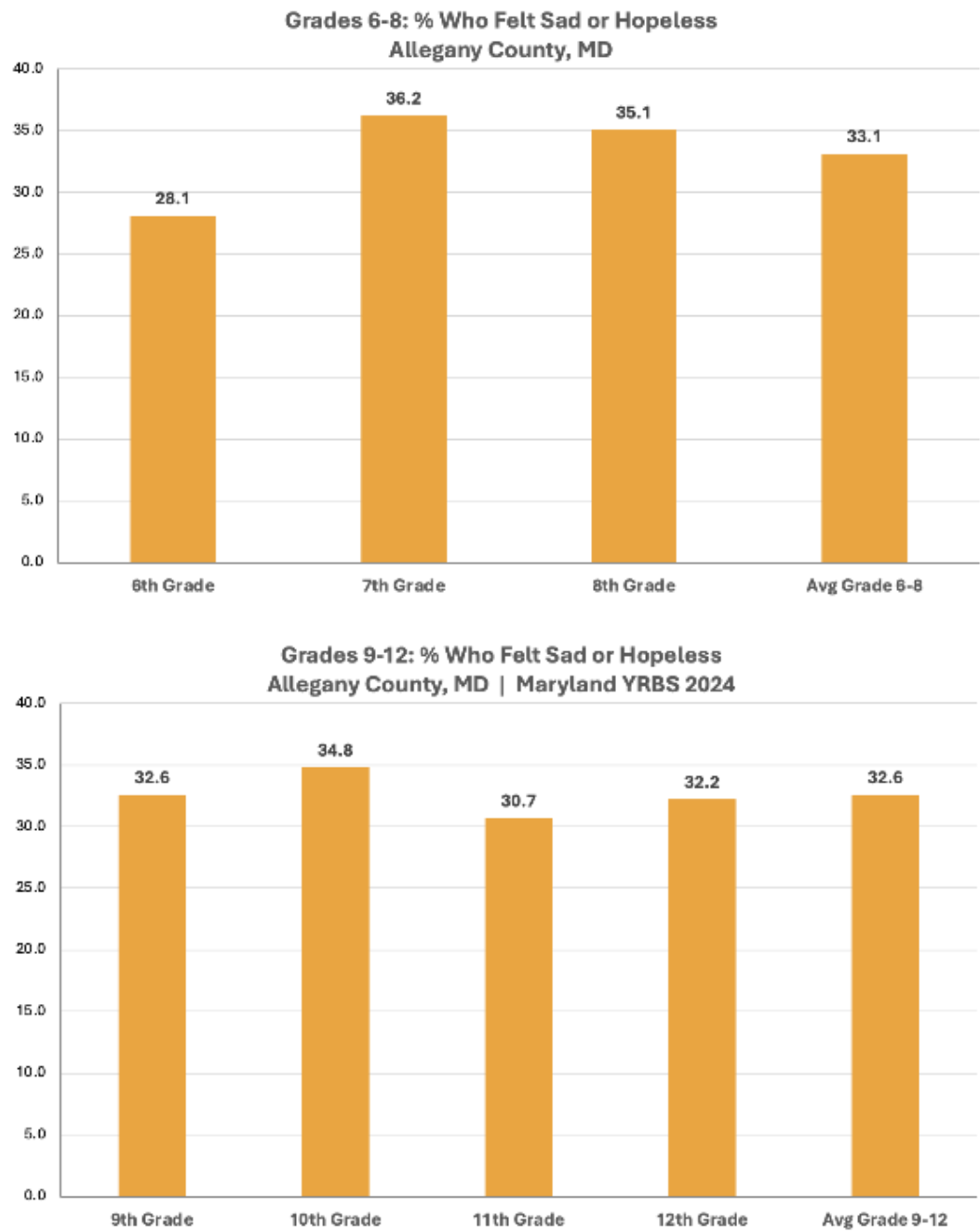
SIGNIFICANCE

Health insurance coverage is a key measure of access to preventive care, primary care, dental care, behavioral health services, and treatment when children are sick or injured. Children without health insurance are more likely to miss routine care and may be less connected to medical providers. Coverage is especially important for early identification of developmental, physical, and behavioral health needs.

ANALYSIS

In 2024, **5.2%** of Allegany County children under age 18 were without health insurance, compared with **4.6%** in Maryland and **6.0%** in the United States. Allegany County's child uninsured rate is slightly higher than the state rate but below the national rate. While most children in the county have health insurance coverage, the remaining uninsured population still represents an important access concern, particularly for children with health, developmental, or behavioral needs.

INDICATOR: PUBLIC SCHOOL STUDENTS REPORTING DEPRESSIVE SYMPTOMS



Definition: The percentage of public school students who reported feeling sad or hopeless, by grade level.

Source: Maryland Department of Health, 2024 YRBS, Persistent Sadness or Hopelessness by Grade, Allegany County.

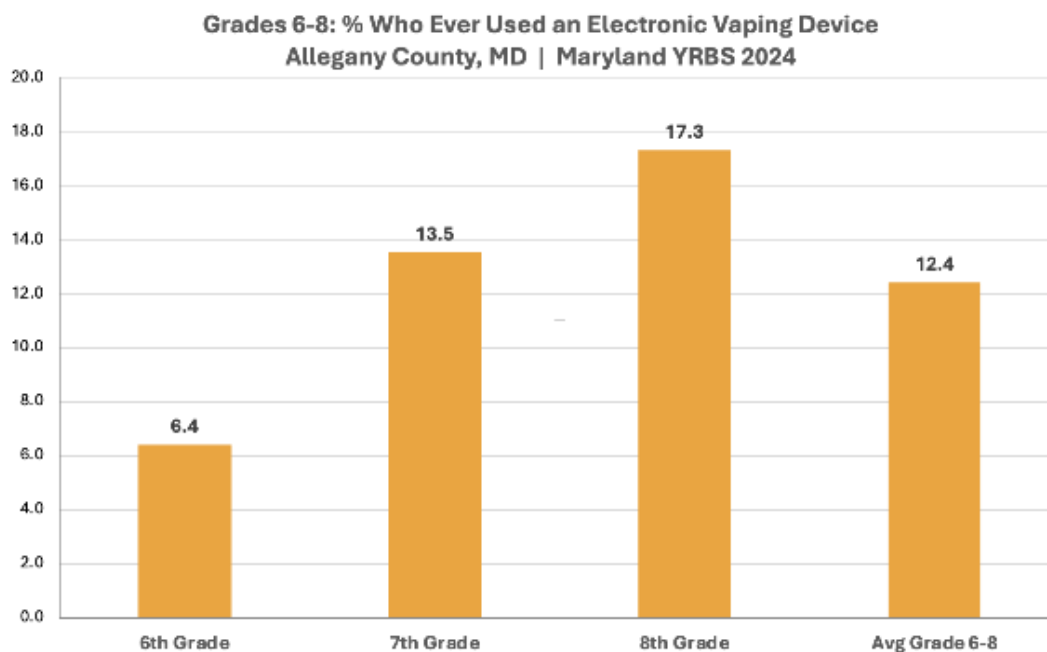
SIGNIFICANCE

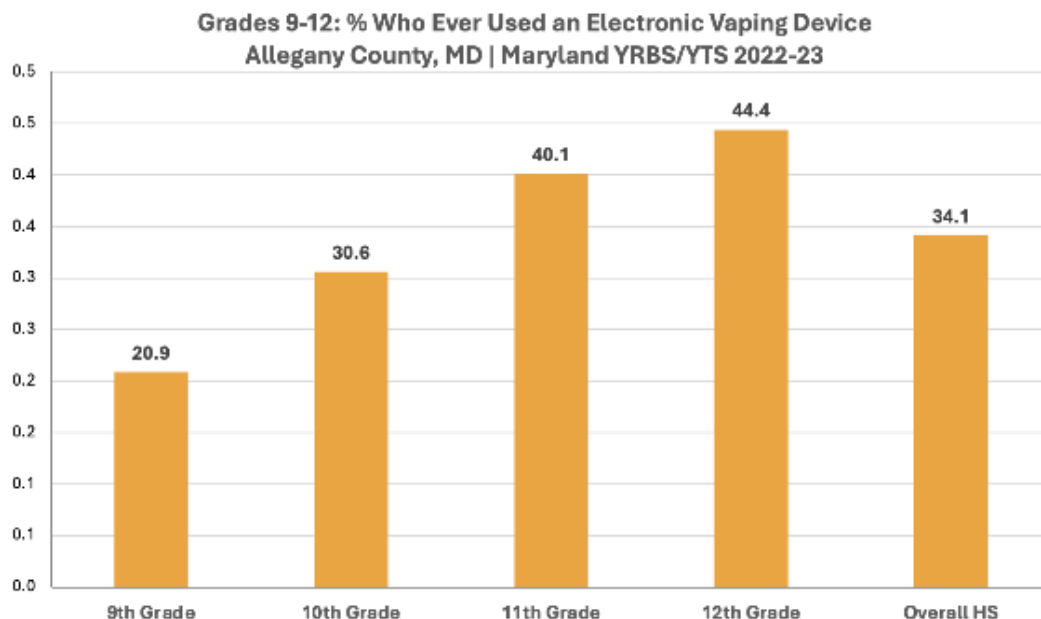
Student reports of persistent sadness or hopelessness are an important measure of youth mental health and emotional well-being. Depression and emotional distress can affect school attendance, academic performance, relationships, substance use risk, and overall development. This indicator is especially important because it may point to needs that are not always visible through school performance or service-use data alone.

ANALYSIS

The chart shows substantial levels of sadness or hopelessness among both middle and high school students. Among grades 6–8, the average shown is 33.1%, with the highest rate in 7th grade at 36.2%. Among grades 9–12, the average shown is 32.6%, with rates relatively consistent across high school grade levels. These findings suggest that roughly one-third of students in the grades shown reported sadness or hopelessness, indicating a continued need for youth mental health supports, school-based services, trusted adults, and accessible prevention and early intervention strategies.

INDICATOR: PUBLIC SCHOOL STUDENTS REPORTING ELECTRONIC VAPOR PRODUCT USE





Definition: The percentage of public school students who reported ever using an electronic vapor product, by grade level.

Source: Maryland Department of Health, YRBS, Allegany County, 2024; Maryland Department of Health, YRBS/YTS, Allegany County High School, 2022–2023.

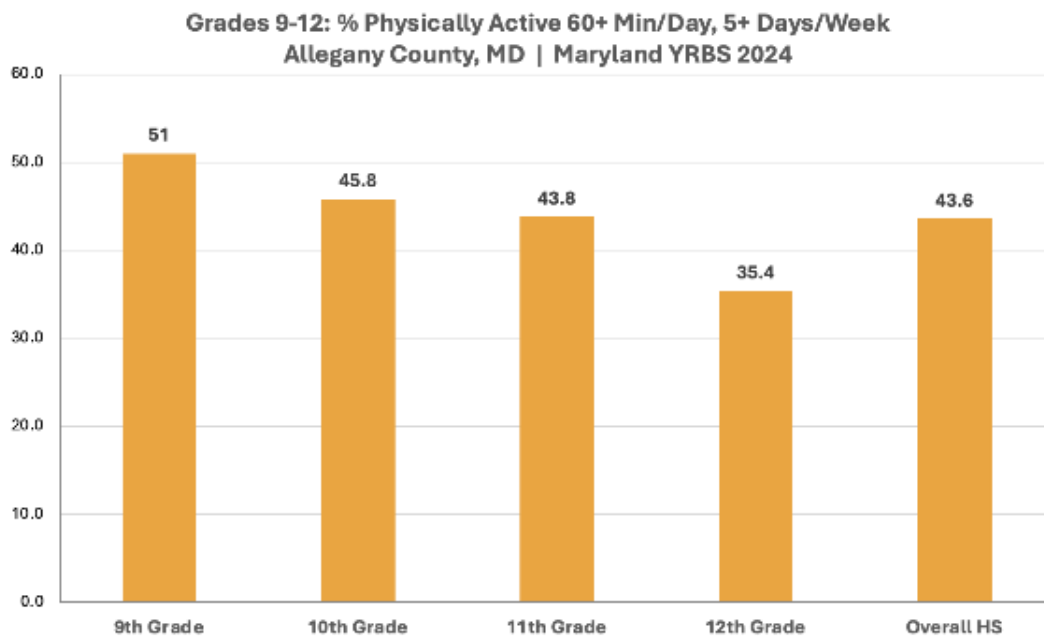
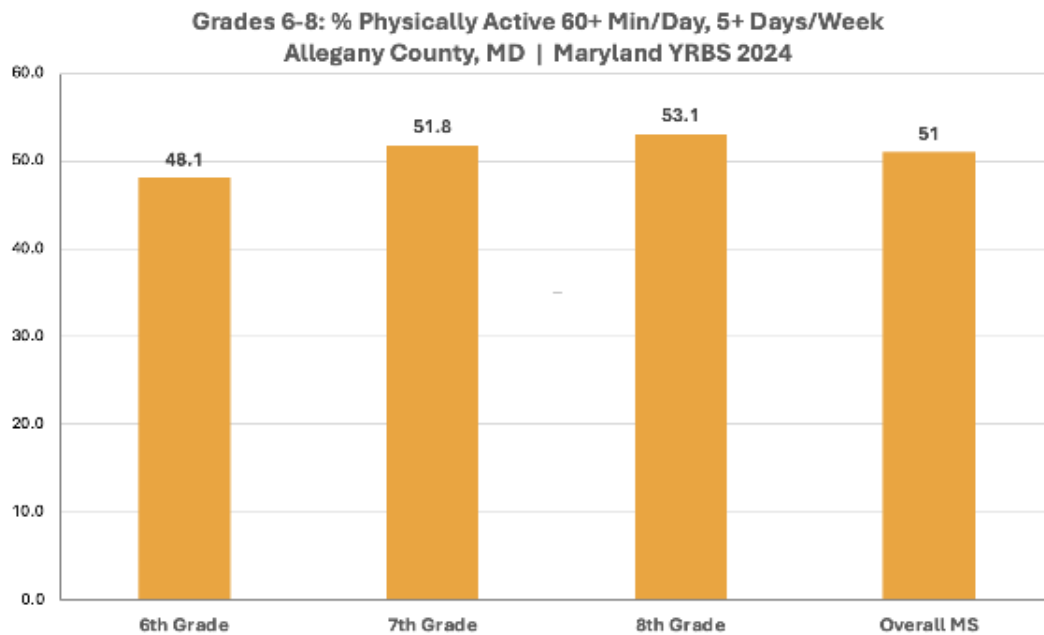
SIGNIFICANCE

Electronic vapor product use among youth is a public health concern because it may expose students to nicotine and other substances during critical periods of brain development. Vaping may also be associated with other risk behaviors, peer influence, stress, and mental health concerns. Tracking use by grade level helps identify when prevention and education efforts may need to begin.

ANALYSIS

Electronic vapor product use increases sharply by grade level. Among grades 6–8, the chart shows use rising from 6.4% in 6th grade to 17.3% in 8th grade, with an average of 12.4% across grades 6–8. Among high school students, use rises from 20.9% in 9th grade to 44.4% in 12th grade, with an overall high school rate of 34.1%. These findings suggest that prevention efforts should begin before high school and continue through adolescence, with attention to peer influence, stress, mental health, and access to positive youth activities.

INDICATOR: STUDENTS PHYSICALLY ACTIVE FOR 60+ MINUTES ON 5+ DAYS IN THE PAST WEEK



Definition: The percentage of students who reported being physically active for at least 60 minutes on five or more days during the past week.

Source: Maryland Department of Health, 2024 YRBS.

SIGNIFICANCE

Physical activity supports physical health, mental health, healthy weight, academic performance, and overall

youth development. Regular activity can reduce risk for obesity and chronic disease while also supporting emotional regulation and social connection. Physical activity levels may be influenced by school programs, sports participation, access to recreation, neighborhood safety, transportation, family schedules, and cost.

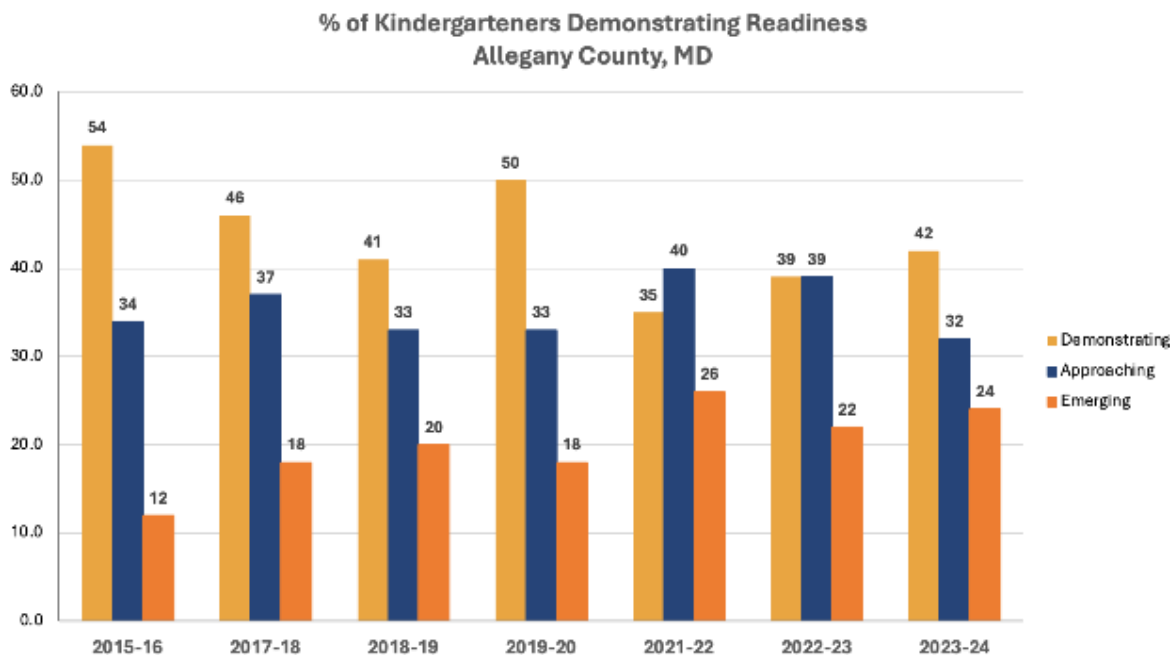
ANALYSIS

The chart shows that physical activity levels are higher among middle school students than high school students. Among grades 6–8, the overall rate shown is 51.0%, with rates ranging from 48.1% in 6th grade to 53.1% in 8th grade. Among grades 9–12, the overall rate shown is 43.6%, declining from 51.0% in 9th grade to 36.4% in 12th grade. This decline across high school grades suggests a need to consider how older youth can remain connected to physical activity through affordable recreation, sports, after-school programs, safe community spaces, and wellness-focused programming.

RESULT: CHILDREN ENTER SCHOOL READY TO LEARN

The “Children Enter School Ready to Learn” result area examines whether young children in Allegany County are entering kindergarten with the foundational skills and supports needed for early academic success. Indicators in this section include Kindergarten Readiness Assessment results, readiness by subpopulation, and enrollment in publicly funded pre-K during the year before kindergarten. Together, these measures help show how prepared children are at school entry and whether early learning supports are reaching the children and families who may benefit most.

INDICATOR: KINDERGARTEN READINESS ASSESSMENT — STUDENTS DEMONSTRATING READINESS



Definition: The percentage of kindergarten students demonstrating readiness on the Kindergarten Readiness Assessment by domain, including language and literacy, mathematics, and social foundations.

Source: Maryland State Department of Education, Kindergarten Readiness Assessment Annual Reports, Allegany County, 2014–2024.

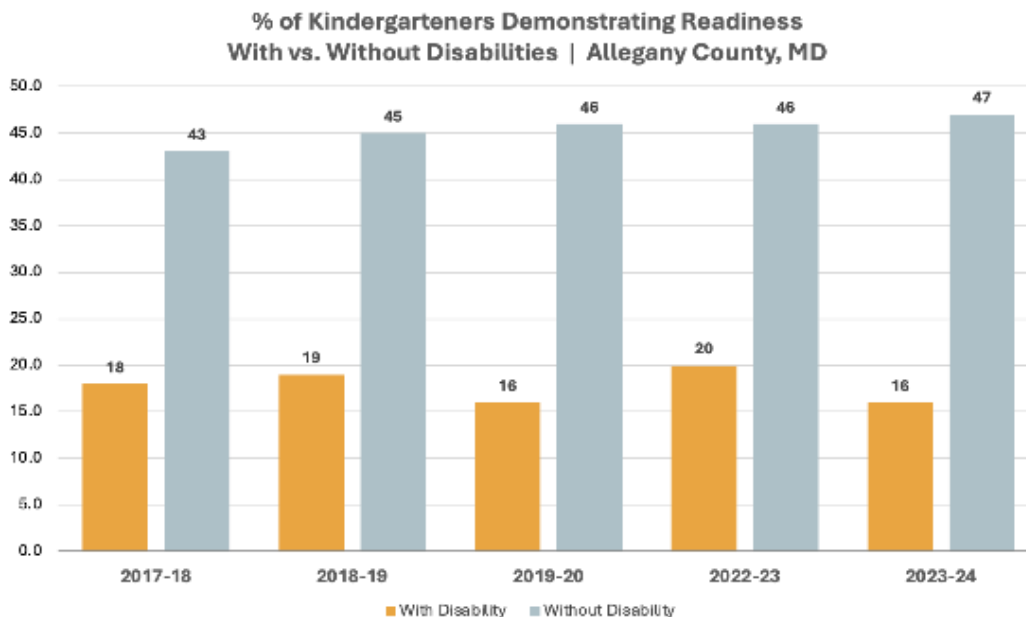
SIGNIFICANCE

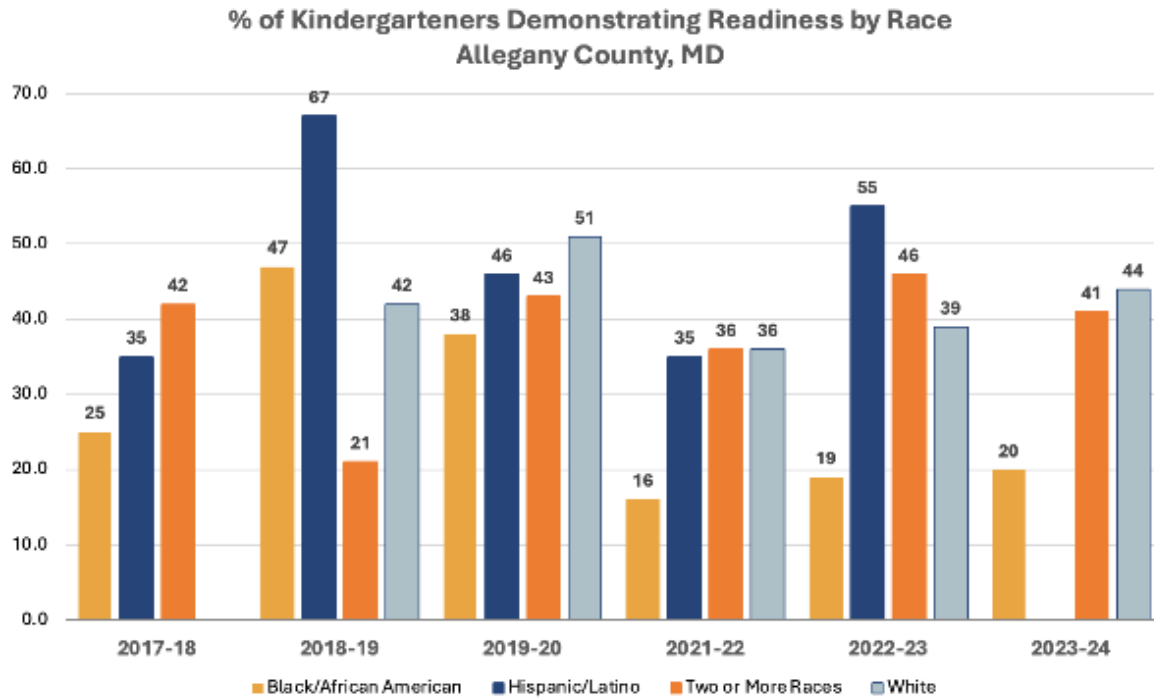
Kindergarten readiness is an important early indicator of future school success. Children who enter school with stronger early literacy, math, and social-emotional skills are generally better positioned to participate in classroom learning, build relationships, and meet later academic milestones. Readiness is influenced by many factors, including access to early childhood education, family economic stability, health, developmental supports, child care quality, and exposure to language-rich environments before kindergarten.

ANALYSIS

Allegany County’s Kindergarten Readiness Assessment results show that a meaningful share of children enter kindergarten not yet fully demonstrating readiness. In the most recent year shown, 41% of kindergarteners were Demonstrating Readiness, while 34% were Approaching Readiness and 24% were Emerging Readiness. This means that more than half of kindergarten students were not yet fully demonstrating readiness at school entry. The chart also shows fluctuation over time, with the percentage of students demonstrating readiness varying across the years displayed. These findings suggest the need for continued attention to early childhood education, pre-K access, developmental supports, and family engagement before kindergarten.

INDICATOR: KINDERGARTEN READINESS ASSESSMENT BY SUBPOPULATION





Definition: The percentage of kindergarten students demonstrating readiness by selected subpopulation groups, including students with disabilities and racial groups.

Source: Maryland State Department of Education, Kindergarten Readiness Assessment, Allegany County, 2017–2024.

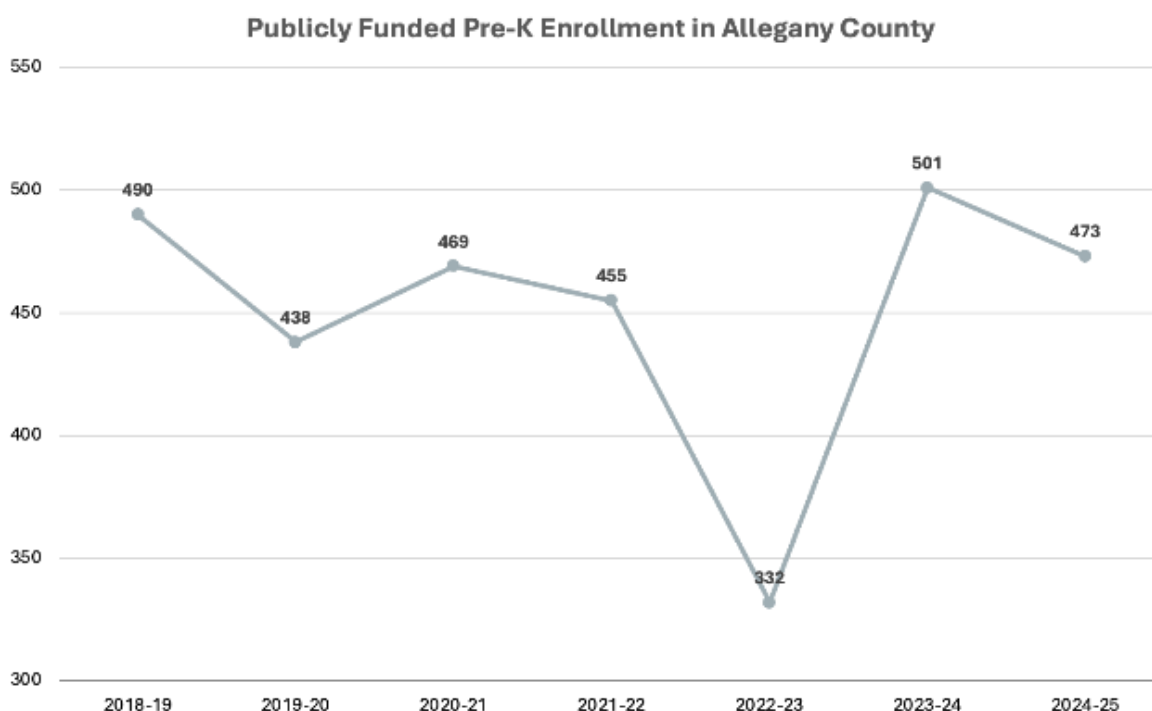
SIGNIFICANCE

Looking at kindergarten readiness by subpopulation helps identify whether all children are entering school with comparable levels of preparation and support. Countywide averages can mask disparities among children with disabilities, racial groups, income groups, English learners, or other student populations. Identifying readiness gaps at school entry is especially important because disparities present in kindergarten can widen over time without early intervention, family support, and access to high-quality early childhood services.

ANALYSIS

The subpopulation data shows notable differences in kindergarten readiness among student groups. Children with disabilities consistently demonstrate lower readiness levels than children without disabilities in the years shown. The race-specific chart also shows variation across groups, though some subpopulation results should be interpreted carefully because small numbers of students can cause large year-to-year changes. These findings suggest the importance of targeted early supports, developmental screening, special education readiness, family engagement, and equitable access to early learning opportunities before kindergarten.

INDICATOR: CHILDREN ENROLLED IN PUBLICLY FUNDED PRE-K THE YEAR BEFORE KINDERGARTEN



Definition: The number of children enrolled in publicly funded pre-K in Allegany County during the year before kindergarten.

Source: Maryland State Department of Education, Enrollment by Race/Ethnicity and Gender, Table 2, 2023–2025.

SIGNIFICANCE

Publicly funded pre-K can play an important role in improving school readiness, particularly for children from families with lower incomes or other risk factors. Pre-K provides early exposure to classroom routines, language development, social-emotional learning, early math and literacy skills, and developmental screening. Enrollment trends can help show whether children are accessing early learning opportunities before kindergarten and whether capacity, eligibility, transportation, or family awareness may be affecting participation.

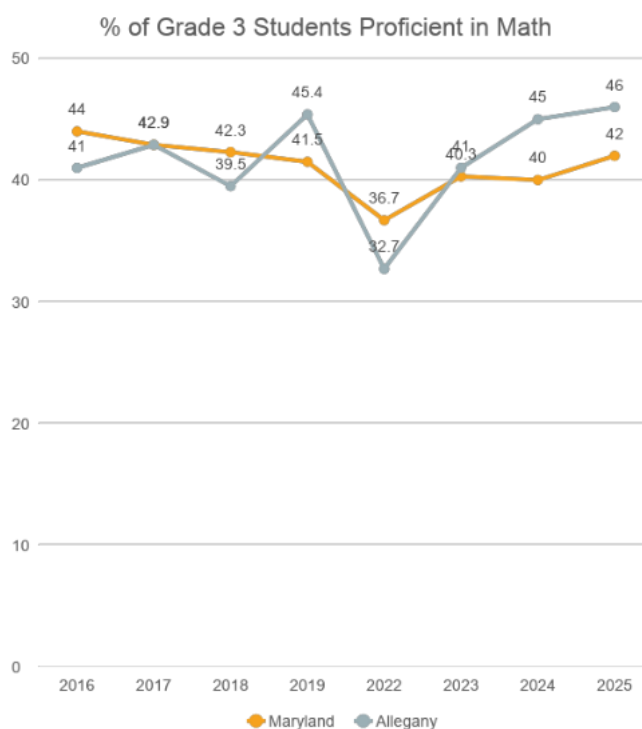
ANALYSIS

Publicly funded pre-K enrollment in Allegany County fluctuated during the years shown. Enrollment declined notably in 2022–2023 before increasing again in 2023–2024 and remaining relatively high in 2024–2025. This pattern suggests that pre-K participation may be affected by availability, eligibility, family choice, transportation, staffing, or broader disruptions to early childhood systems. Because pre-K is closely connected to kindergarten readiness, continued monitoring of enrollment and access is important, especially for children who may benefit most from early learning supports.

RESULT: CHILDREN ARE SUCCESSFUL IN SCHOOL

The “Children Are Successful in School” result area examines academic performance and school engagement among Allegany County students. Indicators in this section include Grade 3 proficiency in math and English Language Arts, Grade 8 proficiency in math and English Language Arts, and chronic absenteeism. Together, these measures provide insight into whether students are meeting key academic milestones and remaining consistently connected to school.

INDICATOR: MCAP PUBLIC SCHOOL STUDENTS IN GRADE 3 PROFICIENT IN MATH



Definition: The percentage of public school students in Grade 3 who scored proficient in math on the Maryland Comprehensive Assessment Program.

Source: Maryland State Department of Education.

SIGNIFICANCE

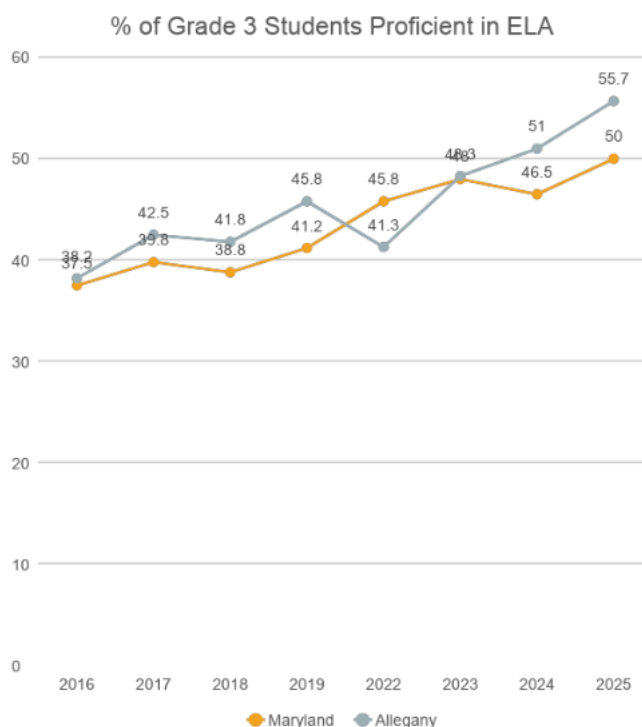
Third grade math proficiency is an important early academic indicator. By third grade, students are expected to be building foundational numeracy, problem-solving, and reasoning skills that support later success in math and other subjects. Students who are not proficient in early math may need additional academic support to avoid falling further behind as coursework becomes more complex.

ANALYSIS

Allegany County’s Grade 3 math proficiency has fluctuated over the period shown. The chart shows a decline around 2022, followed by improvement in more recent years. By 2025, Allegany County reached 46% proficiency, compared with 42% for Maryland. This recent performance suggests improvement in early math

outcomes, though the year-to-year variation indicates that continued attention to early math instruction, tutoring, and academic intervention remains important.

INDICATOR: MCAP PUBLIC SCHOOL STUDENTS IN GRADE 3 PROFICIENT IN ENGLISH LANGUAGE ARTS



Definition: The percentage of public school students in Grade 3 who scored proficient in English Language Arts on the Maryland Comprehensive Assessment Program.

Source: Maryland State Department of Education.

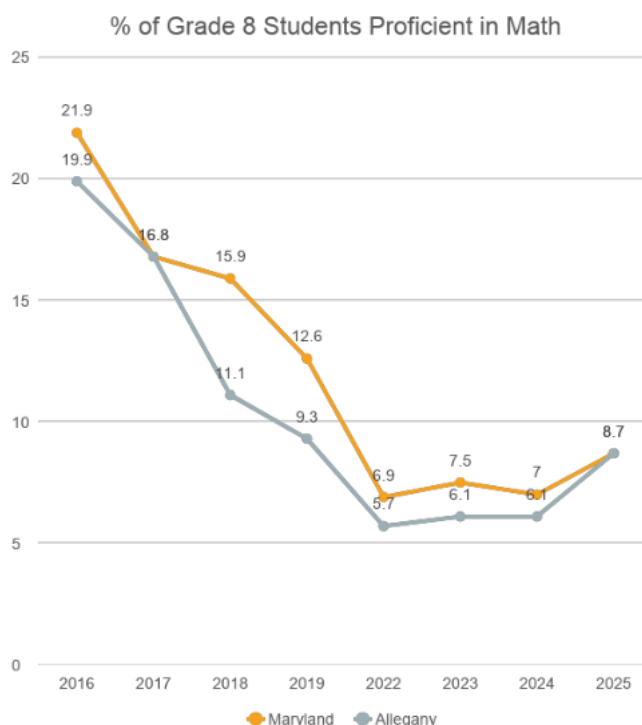
SIGNIFICANCE

Third grade English Language Arts proficiency is one of the most important academic indicators for children. By third grade, students are expected to move from learning to read toward reading to learn. Students who are not proficient in reading by this point may face greater challenges in later grades, when academic success depends heavily on reading comprehension, vocabulary, writing, and independent learning.

ANALYSIS

Allegany County's Grade 3 ELA proficiency increased over the period shown. The chart shows Allegany County rising from the high 30% range in 2016 to 55.3% in 2025. In the most recent year shown, Allegany County exceeded the statewide rate of 50%. This is a positive indicator and suggests improvement in early literacy outcomes. Continued focus should be placed on maintaining this progress, especially through early literacy supports, family engagement, attendance, and interventions for students who are not yet proficient.

INDICATOR: MCAP PUBLIC SCHOOL STUDENTS IN GRADE 8 PROFICIENT IN MATH



Definition: The percentage of public school students in Grade 8 who scored proficient in math on the Maryland Comprehensive Assessment Program.

Source: Maryland State Department of Education.

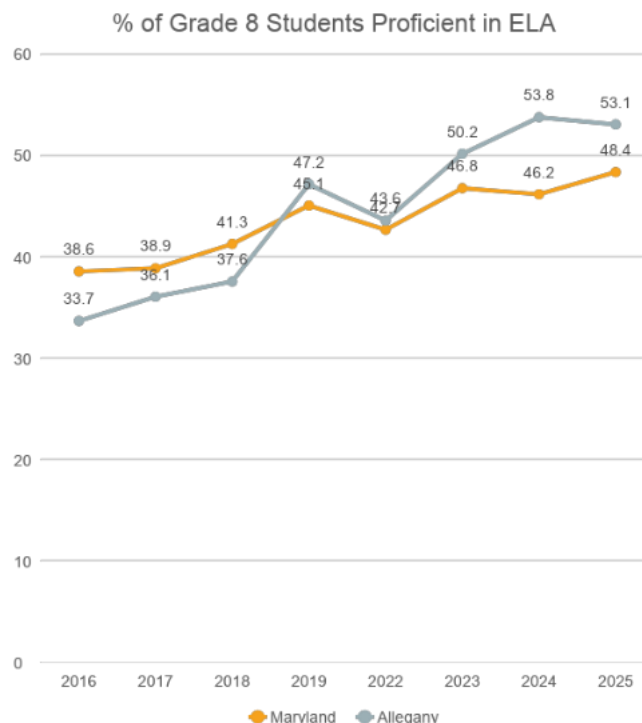
SIGNIFICANCE

Eighth grade math proficiency is an important indicator of readiness for high school coursework, including algebra, science, career and technical education, and postsecondary preparation. Low proficiency in middle school math can affect high school course placement, graduation pathways, college readiness, and access to higher-wage career opportunities. Because math skills build cumulatively, gaps by eighth grade can be difficult to close without targeted support.

ANALYSIS

Grade 8 math proficiency is one of the clearest academic concerns in this result area. The chart shows a significant decline from 2016 levels, with proficiency dropping sharply by 2022. Although there is some improvement in the most recent years, the 2025 rate remains low, with Allegany County at **8.7%** proficient. This suggests that middle school math should remain a major focus for academic support, including tutoring, intervention, attendance strategies, and alignment between middle school preparation and high school readiness.

INDICATOR: MCAP PUBLIC SCHOOL STUDENTS IN GRADE 8 PROFICIENT IN ENGLISH LANGUAGE ARTS



Definition: The percentage of public school students in Grade 8 who scored proficient in English Language Arts on the Maryland Comprehensive Assessment Program.

Source: Maryland State Department of Education.

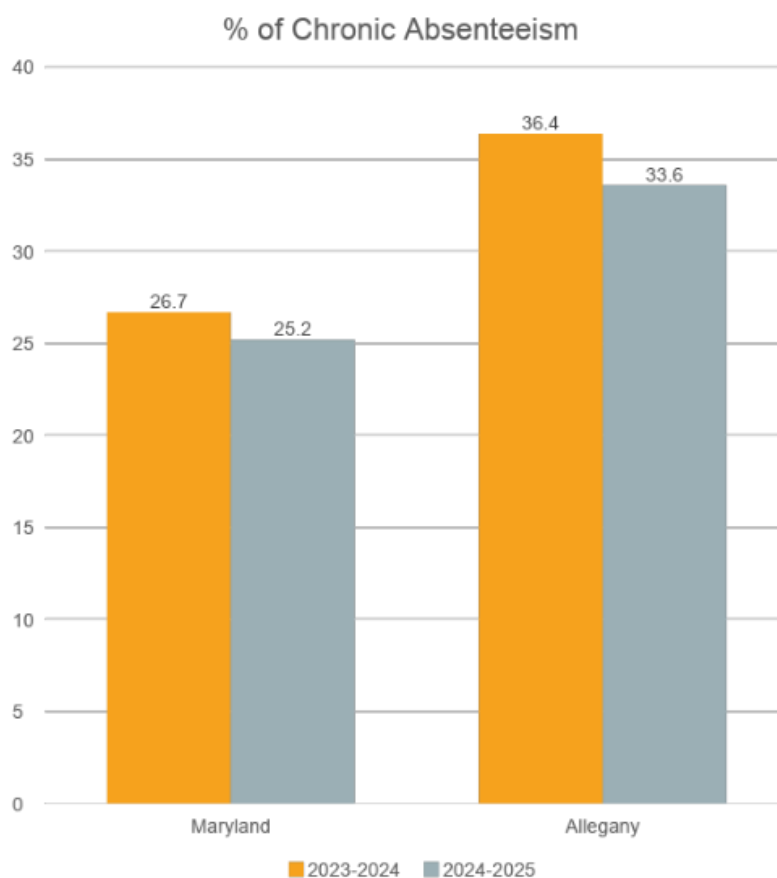
SIGNIFICANCE

Eighth grade ELA proficiency helps measure whether students are prepared for the reading, writing, and analytical demands of high school. Strong ELA skills support success across subjects, including social studies, science, career and technical education, and postsecondary planning. Middle school ELA proficiency is also connected to graduation readiness and long-term educational outcomes.

ANALYSIS

Allegany County's Grade 8 ELA proficiency has generally improved over the period shown. The chart shows growth from the mid-30% range in 2016 to 53.1% in 2025. In the most recent year shown, Allegany County outperformed the statewide rate of 48.4%. This suggests a positive trend in middle school literacy and reading-related outcomes. However, because nearly half of students are still not proficient, continued support remains important, particularly for students with attendance challenges, learning gaps, or limited access to academic support outside school.

INDICATOR: CHRONIC ABSENTEEISM



Definition: The percentage of students who are chronically absent during the school year.

Source: Maryland State Department of Education.

SIGNIFICANCE

Chronic absenteeism is a critical measure of school engagement and student well-being. Students who miss significant amounts of school are more likely to experience academic difficulties, fall behind in reading and math, become disconnected from school, and face increased risk of not graduating on time. Chronic absenteeism may also signal broader family or community challenges, including transportation barriers, health issues, mental health needs, housing instability, caregiving responsibilities, bullying, or lack of school connectedness.

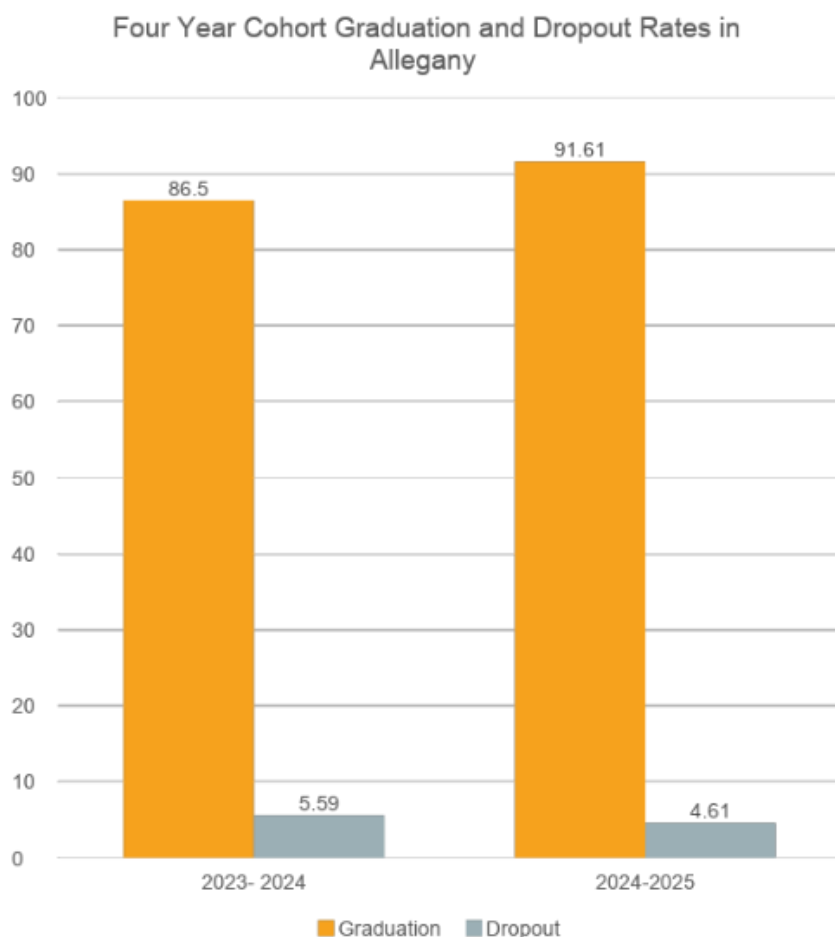
ANALYSIS

Chronic absenteeism remains a significant concern in Allegany County. The chart shows Allegany County's chronic absenteeism rate at 36.4% in 2023–2024 and 33.6% in 2024–2025. Both rates are higher than the statewide rates shown for Maryland, which were 26.7% in 2023–2024 and 25.2% in 2024–2025. Although Allegany County's rate declined from 2023–2024 to 2024–2025, approximately one-third of students remained chronically absent in the most recent year shown. This indicator should be understood as both an education issue and a broader family stability issue, connected to transportation, health, mental health, poverty, and access to supportive services.

RESULT: YOUTH WILL COMPLETE SCHOOL

The “Youth Will Complete School” result area examines whether students are successfully completing high school and remaining on track for future education, employment, and independence. High school graduation is one of the most important milestones for youth, as it is closely connected to long-term earnings, employment stability, health outcomes, and reduced involvement with justice or social service systems.

INDICATOR: FOUR-YEAR COHORT GRADUATION RATE



Definition: The percentage of students who graduate from high school within four years as part of their original ninth grade cohort, along with the percentage of students who drop out.

Source: Maryland State Department of Education.

SIGNIFICANCE

The four-year cohort graduation rate is a key measure of student success and school system performance. Students who graduate from high school are more likely to access postsecondary education, secure stable employment, earn higher wages, and experience better long-term outcomes. Dropout rates are also important because students who leave school before graduation may face greater barriers to employment, economic stability, and future opportunity.

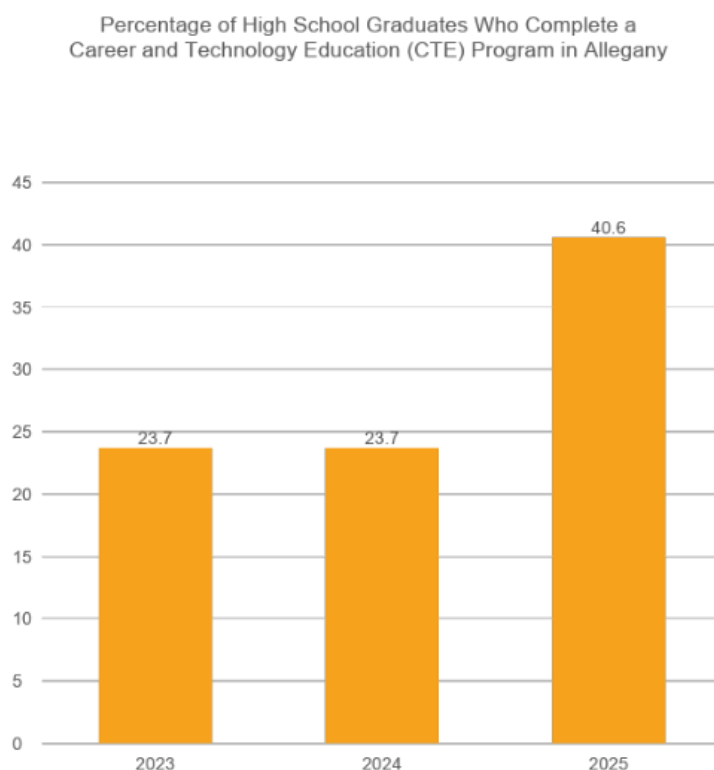
ANALYSIS

Allegany County's four-year cohort graduation rate improved from 86.5% in 2023–2024 to 91.61% in 2024–2025. During the same period, the dropout rate decreased from 5.59% to 4.61%. This improvement suggests positive movement in high school completion outcomes. However, graduation should also be considered alongside earlier indicators such as chronic absenteeism, middle school academic performance, youth mental health, and access to supports. The county's strong recent graduation rate is encouraging, but continued attention is needed to ensure that students remain engaged, supported, and prepared for life after high school.

RESULT: YOUTH WILL HAVE OPPORTUNITIES FOR EMPLOYMENT AND CAREER READINESS

The “Youth Have Opportunities for Employment and Career Readiness” result area examines whether young people are gaining exposure to career pathways, workforce skills, and postsecondary opportunities. Career readiness is especially important in communities where economic mobility, local employment opportunities, and youth retention are long-term concerns.

INDICATOR: HIGH SCHOOL GRADUATES WHO COMPLETE A CAREER AND TECHNOLOGY EDUCATION PROGRAM



Definition: The percentage of high school graduates who completed a Career and Technology Education program.

Source: Maryland State Department of Education.

SIGNIFICANCE

Career and Technology Education programs help students build practical skills, explore career pathways, earn credentials, and prepare for employment or further training after high school. CTE completion can support workforce development and economic mobility, particularly for students who may not immediately pursue a four-year college degree. Strong CTE participation can also help connect young people to local industries and reduce the gap between education and employment.

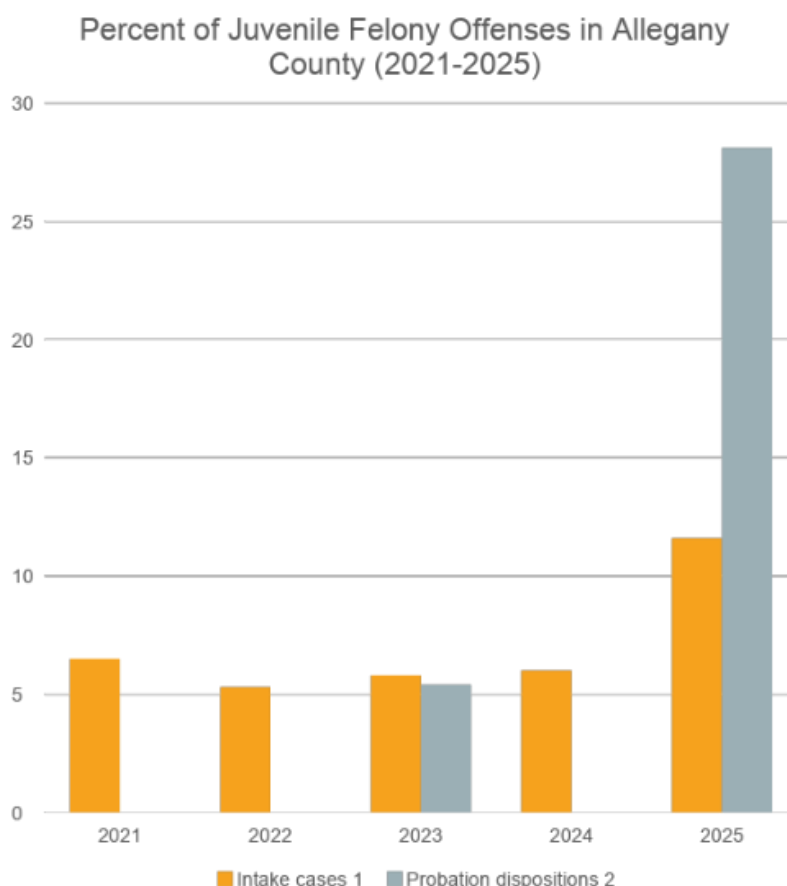
ANALYSIS

The percentage of Allegany County high school graduates completing a Career and Technology Education program increased substantially in the most recent year shown. The rate was 23.7% in both 2023 and 2024, then rose to 40.6% in 2025. This increase suggests significant growth in CTE completion and may indicate stronger student participation, expanded access, improved program alignment, or greater emphasis on career readiness pathways. Continued attention should be given to ensuring that CTE programs remain accessible, aligned with local workforce needs, and connected to employment, apprenticeships, postsecondary training, and industry-recognized credentials.

RESULT: COMMUNITIES ARE SAFE FOR CHILDREN, YOUTH, AND FAMILIES

The “Communities Are Safe for Children, Youth, and Families” result area examines indicators related to child safety, youth justice involvement, crime, environmental health risks, child maltreatment, and out-of-home placement. These measures help show whether children and families are living in safe, stable environments and whether local systems are preventing harm, responding to risk, and supporting family stability.

INDICATOR: JUVENILE FELONY OFFENSES



Definition: The percentage of juvenile felony offenses in Allegany County, including intake cases and probation dispositions.

Source: Maryland Department of Juvenile Services.

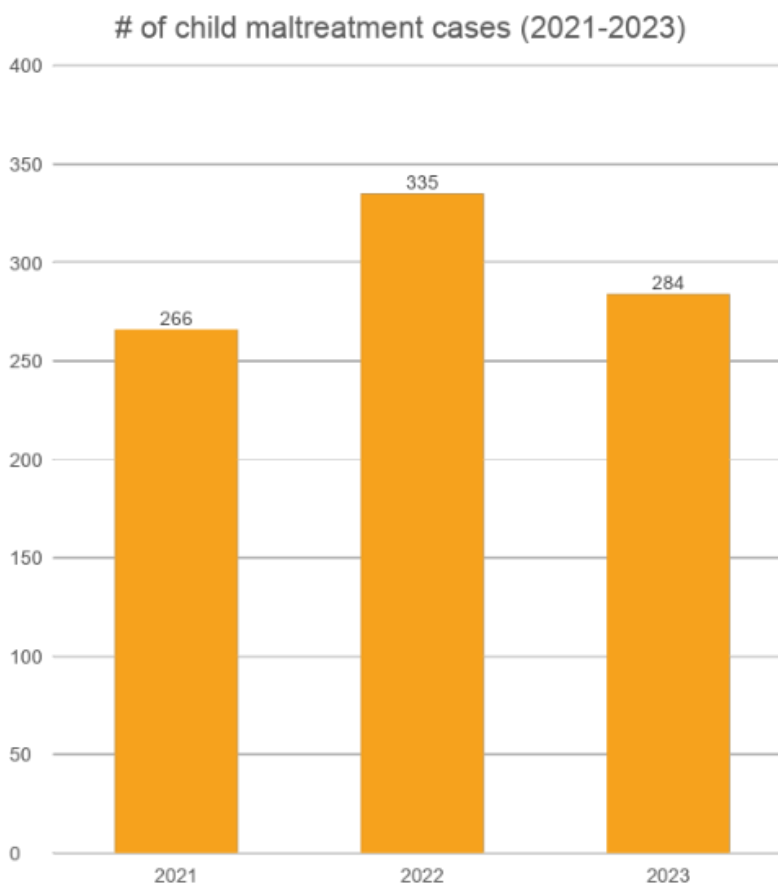
SIGNIFICANCE

Juvenile felony offense data helps measure the level of serious youth justice involvement in the community. While this indicator does not capture all youth behavior or all public safety concerns, it can point to trends in serious offenses, system involvement, and the need for prevention, intervention, diversion, mentoring, behavioral health support, and family stabilization services. Juvenile justice involvement is often connected to broader risk factors, including school disengagement, poverty, trauma, substance use, mental health needs, and limited positive youth opportunities.

ANALYSIS

The chart shows relatively stable percentages of juvenile felony intake cases from 2021 through 2024, followed by a notable increase in 2025. Intake cases increased from roughly 6% in 2024 to approximately 12% in 2025. Probation dispositions were not shown for most years but appear at approximately 5% in 2023 and approximately 28% in 2025. This increase should be interpreted carefully, particularly because percentages may be affected by relatively small numbers of youth. However, the 2025 increase suggests the need to monitor youth justice trends and consider how prevention, school engagement, family support, mental health services, substance-use prevention, and positive youth programming may help reduce deeper system involvement.

INDICATOR: CHILD MALTREATMENT



Definition: The number of reported child maltreatment cases in Allegany County.

Source: Maryland Department of Human Services.

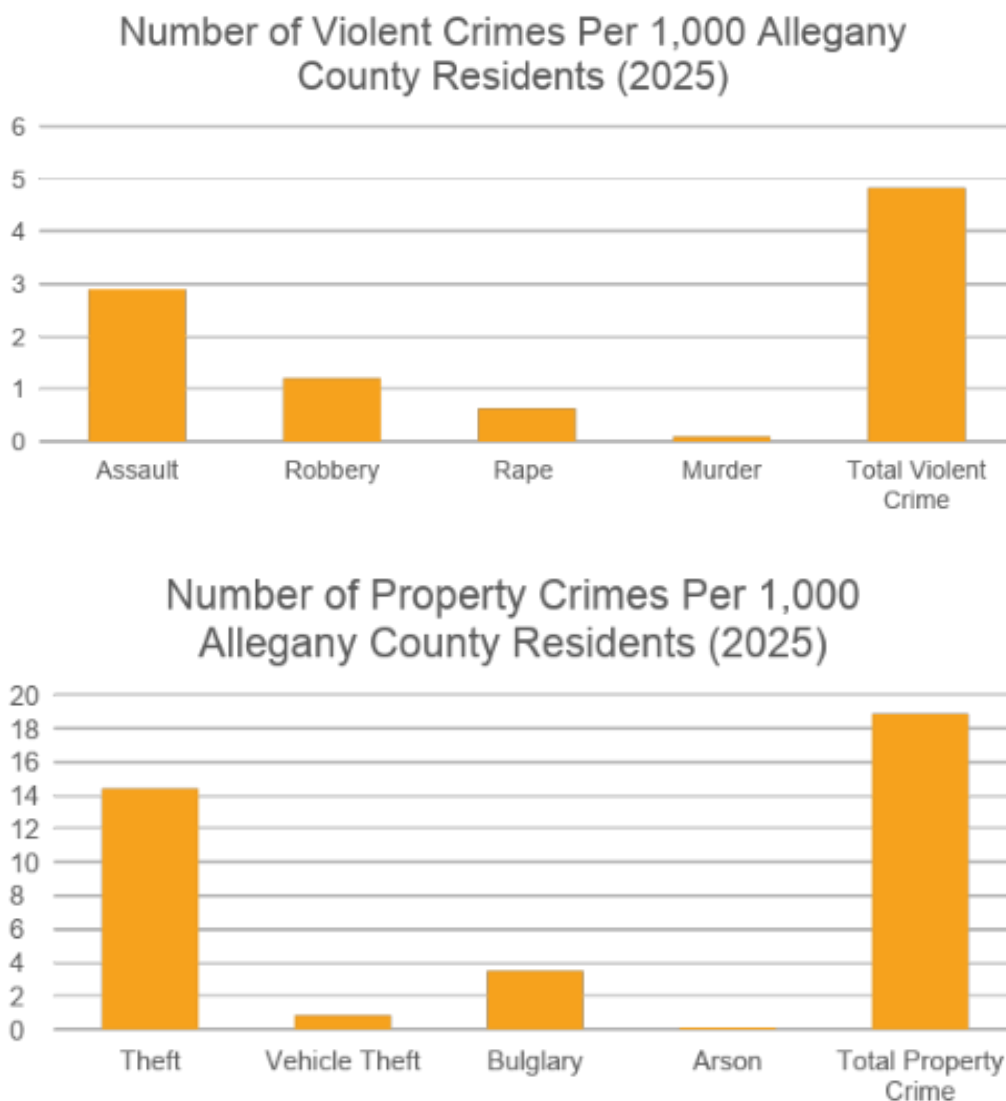
SIGNIFICANCE

Child maltreatment is a critical child safety indicator. Maltreatment may include neglect, physical abuse, sexual abuse, or emotional harm, depending on the reporting and classification system used. Child maltreatment can have long-term effects on physical health, mental health, school performance, relationships, and future economic stability. It is also closely connected to family stressors such as poverty, housing instability, substance use, mental health needs, domestic violence, and lack of social support.

ANALYSIS

Allegany County recorded 266 child maltreatment cases in 2021, 335 in 2022, and 284 in 2023. The number of cases increased from 2021 to 2022, then declined in 2023, though the 2023 figure remained above the 2021 level. This pattern suggests that child maltreatment remains a significant concern even with the recent decline. Continued focus should be placed on prevention, early identification, family support, behavioral health services, substance-use treatment, home visiting, parenting supports, and coordinated response among schools, social services, health providers, and community organizations.

INDICATOR: VIOLENT AND PROPERTY CRIME



Definition: The number of violent crimes and property crimes per 1,000 Allegany County residents.

Source: Allegany County, MD, CrimeGrade.org.

SIGNIFICANCE

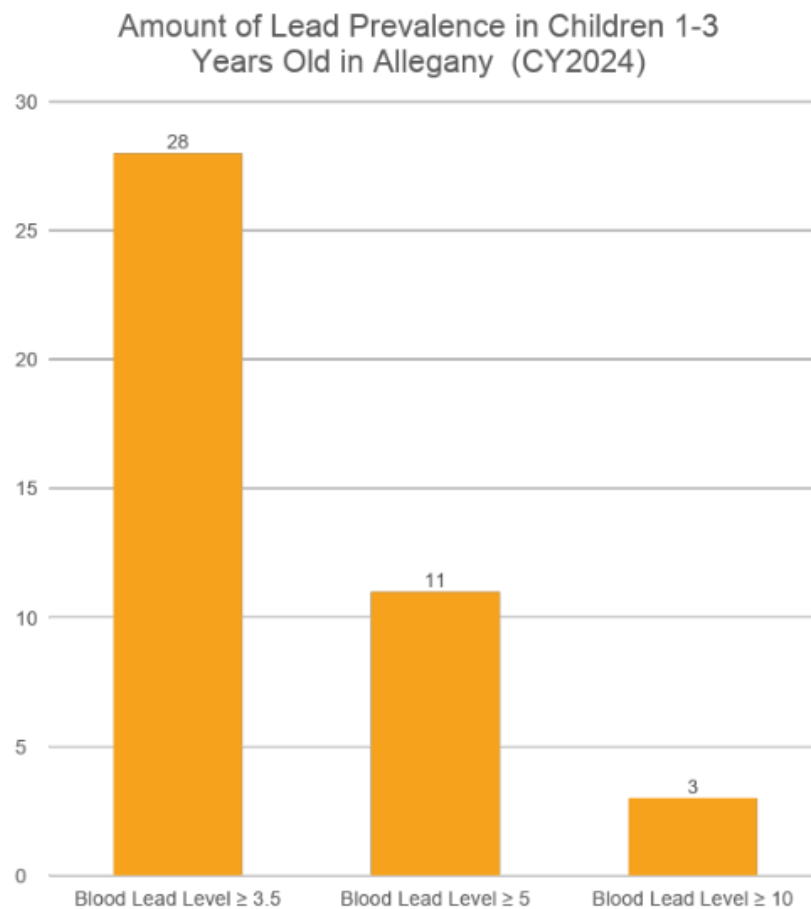
Community crime indicators provide context for the environments in which children, youth, and families live,

attend school, use public spaces, and access services. Crime can affect family stress, neighborhood trust, perceptions of safety, youth mobility, and participation in after-school or community programs. Property crime and violent crime may also influence whether residents feel comfortable using parks, playgrounds, libraries, recreation centers, or other community spaces.

ANALYSIS

The chart shows 4.8 total violent crimes per 1,000 residents and approximately 19 total property crimes per 1,000 residents in Allegany County in 2025. Among violent crime categories, assault accounts for the largest share. Among property crime categories, theft accounts for the largest share, followed by burglary, with smaller rates for vehicle theft and arson. These data suggest that both actual and perceived safety should remain part of local planning, especially as the community considers youth programming, transportation, public spaces, and neighborhood-level engagement.

INDICATOR: LEAD PREVALENCE



Definition: The number of children ages 1–3 in Allegany County with elevated blood lead levels at selected thresholds.

Source: Maryland Lead Registry Annual Surveillance Report.

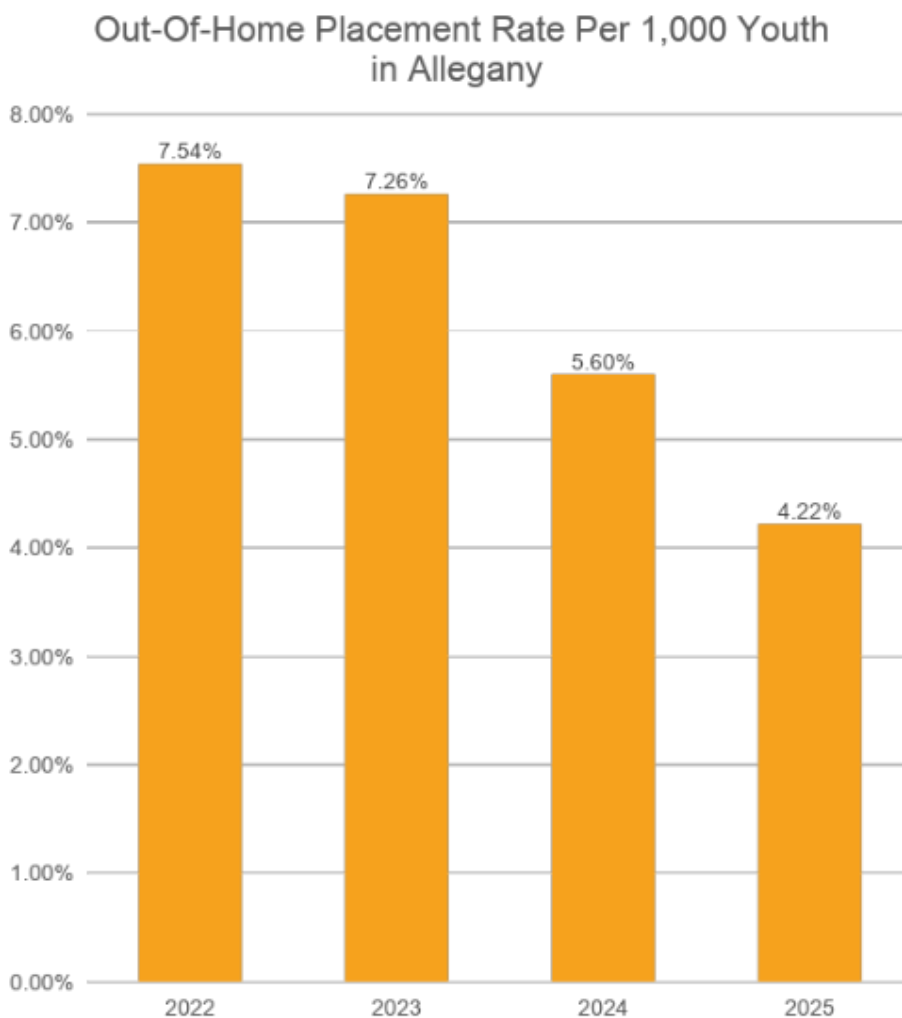
SIGNIFICANCE

Lead exposure is a serious environmental health concern for young children. Even low levels of lead exposure can affect brain development, behavior, learning, attention, and long-term health. Young children are especially vulnerable because their bodies and brains are still developing. Lead prevalence is also connected to housing conditions, older housing stock, poverty, environmental safety, screening, and access to timely remediation and health services.

ANALYSIS

In CY2024, Allegany County had 28 children ages 1–3 with blood lead levels at or above 3.5, 11 children with blood lead levels at or above 5, and 3 children with blood lead levels at or above 10. These figures show that lead exposure remains a concern for a subset of young children in the county. Given the connection between lead exposure and later learning and behavioral challenges, continued attention should be given to screening, prevention, housing conditions, family education, and coordination among health, housing, and early childhood partners.

INDICATOR: OUT-OF-HOME PLACEMENT



Definition: The out-of-home placement rate among youth in Allegany County.

Source: State of Maryland Out-of-Home Placement Dashboard.

SIGNIFICANCE

Out-of-home placement is an important indicator of child safety, family stability, and system involvement. Children may enter out-of-home placement for reasons related to abuse, neglect, caregiver capacity, behavioral health needs, substance use, domestic violence, housing instability, or other family crises. While out-of-home placement may be necessary for safety, it can also be disruptive for children and families. Lower placement rates may indicate progress in prevention, family preservation, kinship care, or other supports that help children remain safely with family or in less restrictive settings.

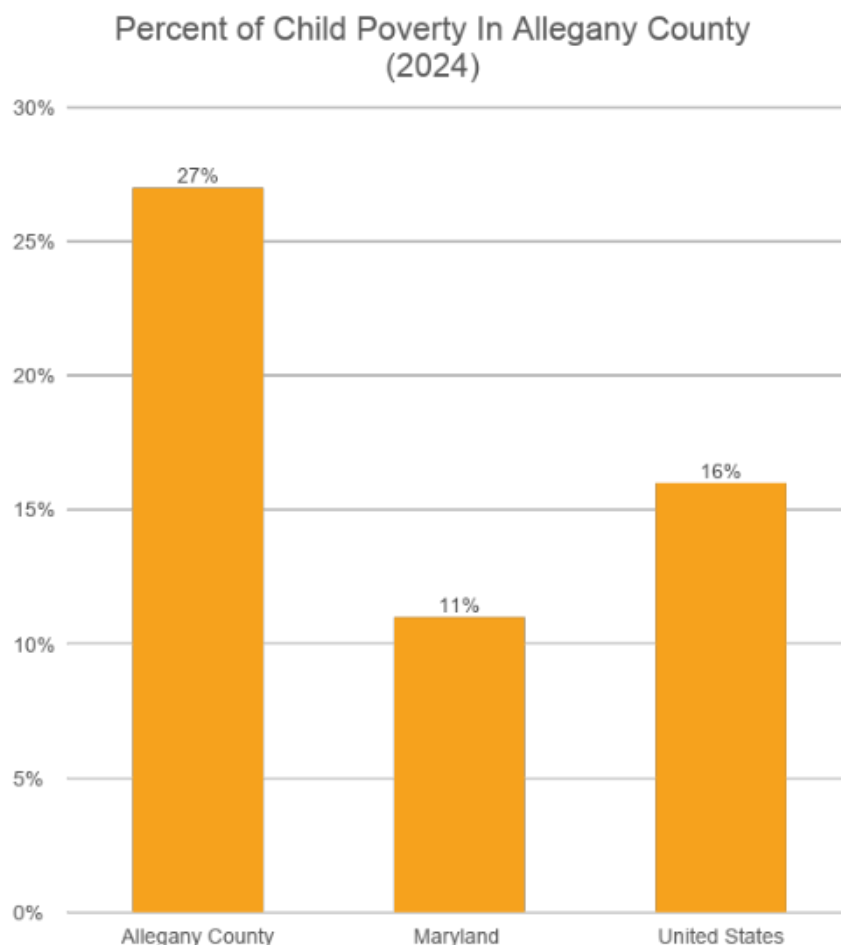
ANALYSIS

Allegany County's out-of-home placement rate declined steadily over the period shown, from 7.54% in 2022 to 7.26% in 2023, 5.60% in 2024, and 4.22% in 2025. This downward trend is encouraging and may suggest progress in prevention, family preservation, or placement-reduction efforts. However, the indicator should be considered alongside child maltreatment data and broader family stressors. Continued investment in early intervention, family support, behavioral health, substance-use treatment, housing stability, and coordinated case management may help sustain progress while ensuring child safety remains the central priority.

RESULT: FAMILIES ARE SAFE AND ECONOMICALLY STABLE

The "Families Are Economically Stable" result area examines whether families in Allegany County have the financial resources, housing stability, and basic supports needed to maintain safe and healthy households. Indicators in this section include child poverty, household income, housing cost burden, and homelessness. Together, these measures help show the economic pressures facing families and the ways financial instability may affect children's health, education, safety, and long-term opportunity.

INDICATOR: CHILD POVERTY



Definition: The percentage of children living below the federal poverty level.

Source: Allegany County, MD, Census Reporter.

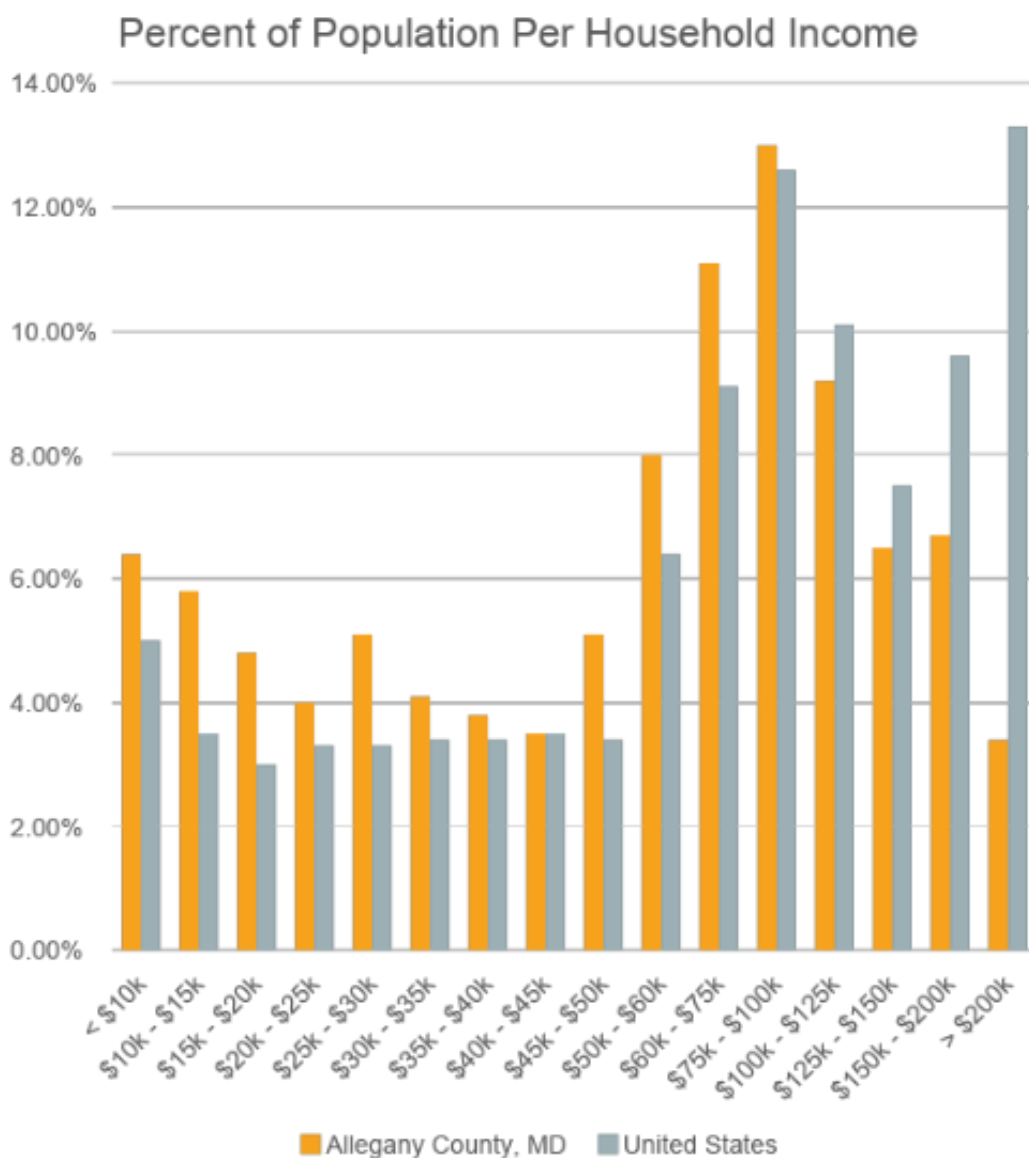
SIGNIFICANCE

Child poverty is one of the most important indicators of family economic stability and child well-being. Children growing up in poverty are more likely to experience food insecurity, housing instability, limited access to health care, transportation barriers, educational challenges, and higher levels of family stress. Poverty can also affect school readiness, attendance, mental health, and long-term economic mobility.

ANALYSIS

The chart shows that 27% of children in Allegany County live in poverty, compared with 11% in Maryland and 16% in the United States. Allegany County's child poverty rate is therefore substantially higher than both the state and national rates. This indicator suggests that child poverty should remain a central focus of local planning, particularly in connection with food security, housing stability, utility assistance, transportation, child care, health care access, and family economic mobility.

INDICATOR: HOUSEHOLD INCOME



Definition: The percentage of the population by household income category in Allegany County compared with the United States.

Source: Data USA.

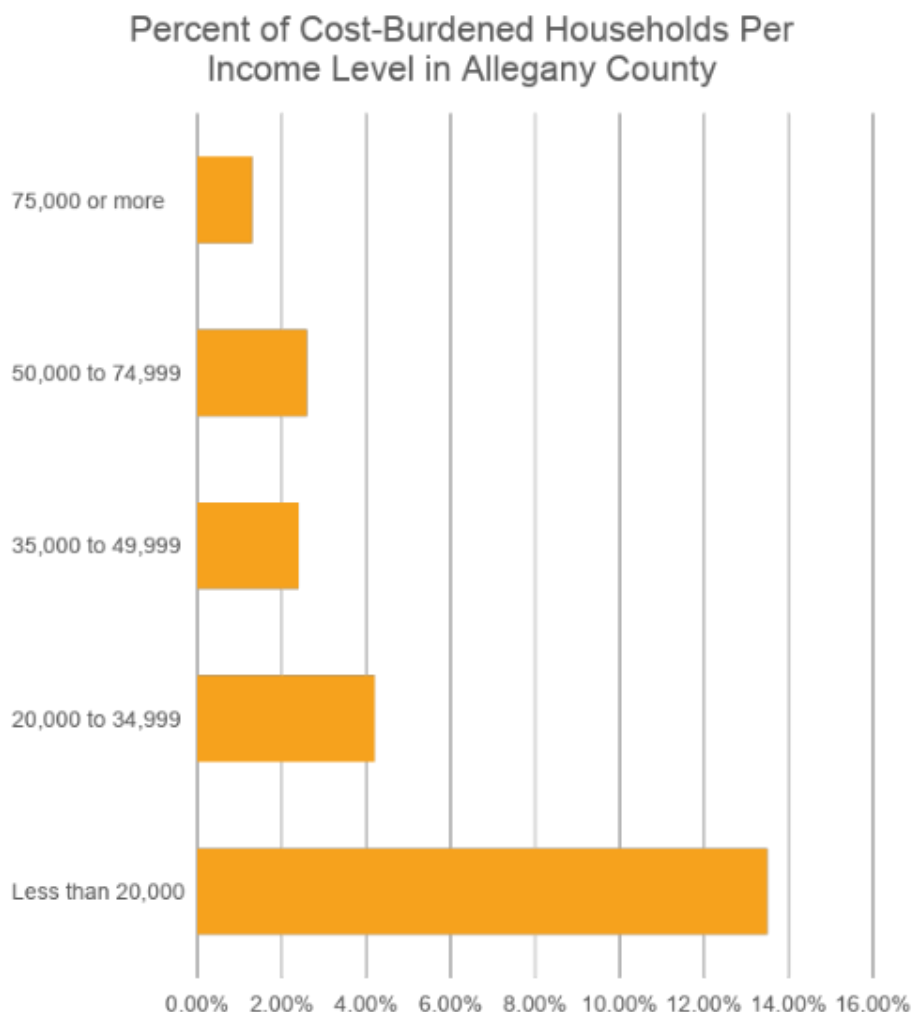
SIGNIFICANCE

Household income provides important context for understanding economic stability, access to basic needs, and family opportunity. Income affects whether families can afford housing, utilities, transportation, child care, health care, food, and educational supports. Lower household income can increase the likelihood that families will need public benefits, emergency assistance, or nonprofit support. It can also limit a family's ability to absorb unexpected expenses such as medical bills, car repairs, job loss, or changes in housing costs.

ANALYSIS

The household income chart shows that Allegany County has a larger share of households in several lower- and moderate-income categories compared with the United States. The county also appears to have a smaller share of households in the highest income categories. This income distribution provides important context for other findings in this assessment, including child poverty, housing cost burden, food and utility challenges, and barriers to transportation and child care. The data suggests that many families may be working with limited financial flexibility, making access to supports and economic mobility strategies especially important.

INDICATOR: FAMILY SPENDING MORE THAN 30% OF INCOME ON HOUSING



Definition: The percentage of households spending more than 30% of gross income on housing costs, including rent or mortgage, utilities, insurance, and taxes.

Source: United States Census Bureau.

SIGNIFICANCE

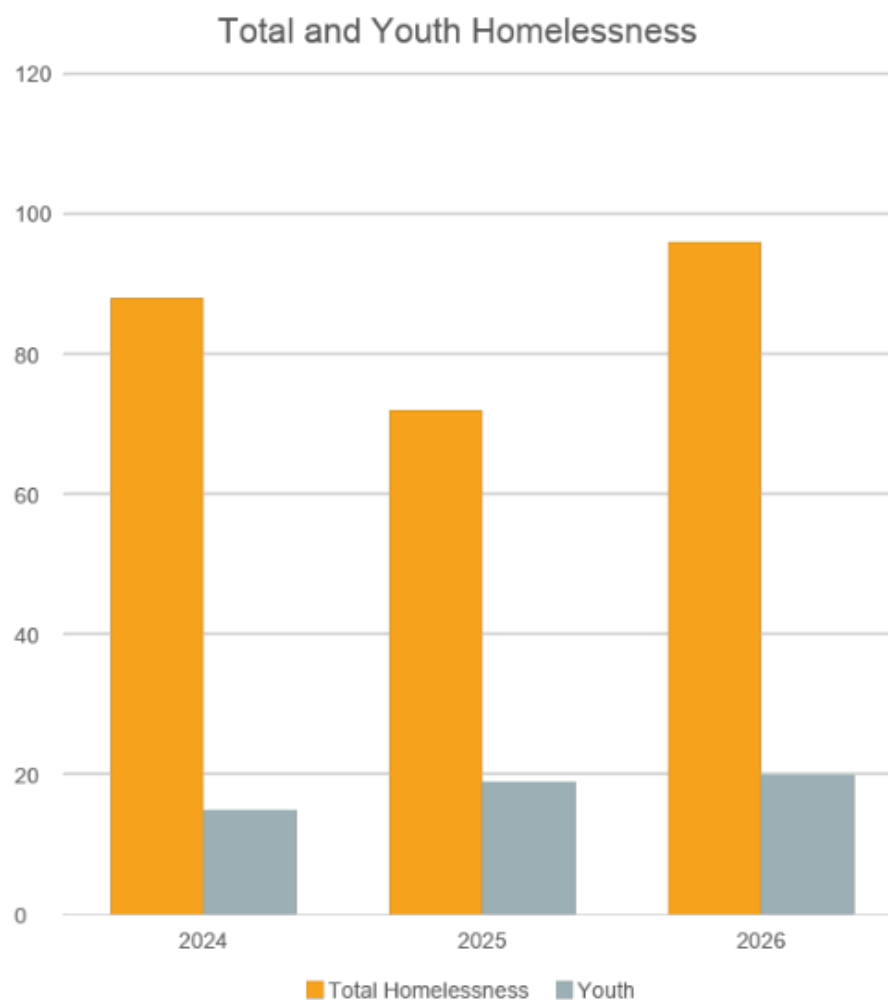
Housing cost burden is a key measure of economic stress. By federal standards, a household is considered cost-burdened when it spends more than 30% of gross income on housing. Families that are cost-burdened

may have less money available for food, transportation, health care, child care, school needs, and emergency expenses. Housing cost burden can also contribute to housing instability, eviction risk, overcrowding, frequent moves, and stress for both parents and children.

ANALYSIS

The chart shows that housing cost burden is most severe among Allegany County households earning less than \$20,000 per year. Households in this income group have the highest percentage of cost burden among the income categories shown. Cost burden decreases as household income rises, although some burden remains in moderate-income categories. This pattern suggests that housing affordability is especially difficult for the county's lowest-income families and should be considered alongside poverty, homelessness, utility costs, and access to employment.

INDICATOR: HOMELESSNESS



Definition: The number of individuals experiencing homelessness in Allegany County, including total homelessness and youth homelessness.

Source: Maryland Balance of State Continuum of Care.

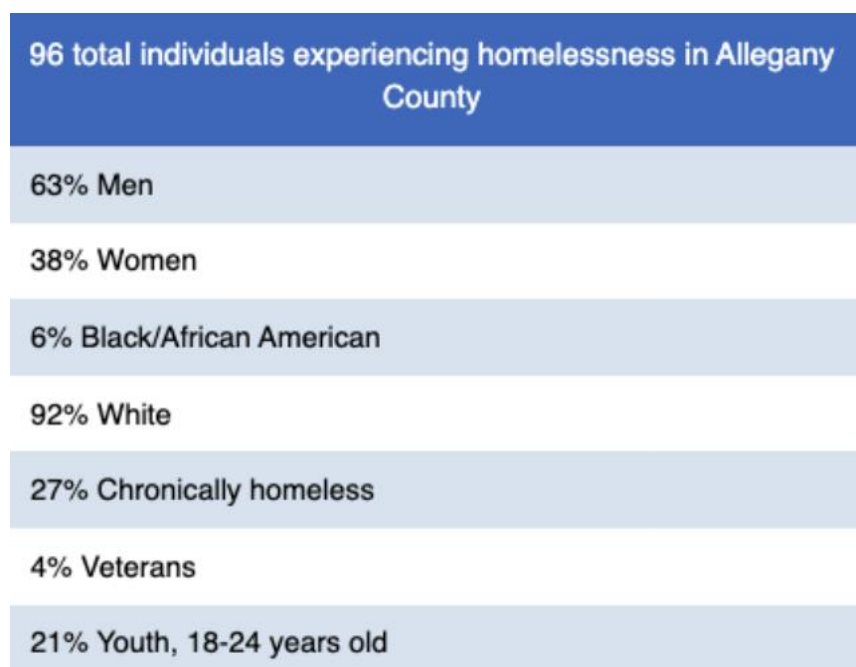
SIGNIFICANCE

Homelessness is one of the most serious indicators of family and individual instability. For children and youth, homelessness can disrupt school attendance, health care, relationships, sleep, nutrition, transportation, and emotional well-being. Even short periods of homelessness can create long-term challenges for families. Homelessness data also helps identify gaps in housing affordability, shelter capacity, prevention services, behavioral health supports, and coordinated entry systems.

ANALYSIS

The chart shows total homelessness at 88 individuals in 2024, 72 in 2025, and 96 in 2026. Youth homelessness increased from 16 in 2024 to 19 in 2025 and 20 in 2026. While total homelessness declined in 2025, it increased again in 2026 and exceeded the 2024 level. Youth homelessness also increased slightly across the period shown. These trends suggest that homelessness and housing instability remain important concerns, particularly for young people and families who may be affected by poverty, housing cost burden, limited income, transportation barriers, and access to supportive services.

INDICATOR: HOMELESSNESS BY THE NUMBERS



Definition: A demographic and descriptive breakdown of individuals experiencing homelessness in Allegany County.

Source: Maryland Balance of State Continuum of Care.

SIGNIFICANCE

Looking at who is experiencing homelessness helps identify populations that may need targeted outreach, prevention, shelter, housing, or supportive services. Demographic and descriptive homelessness data can help local partners understand whether homelessness is concentrated among certain age groups, household types, chronic homelessness status, veterans, or other groups. This can inform both immediate service coordination and longer-term housing strategies.

ANALYSIS

The data shows 96 total individuals experiencing homelessness in Allegany County. Among those individuals, 63% were men and 38% were women (the total exceeds 100% due to rounding or source-data reporting). The racial breakdown shown includes 92% White and 6% Black/African American. The data also shows that 27% were chronically homeless, 4% were veterans, and 21% were youth ages 18–24. These findings suggest that homelessness planning should include attention to chronic homelessness, young adults, and the broader relationship between housing instability, poverty, behavioral health, employment, and access to supportive services.

V. QUALITATIVE DATA

The qualitative section of the assessment summarizes input gathered from residents, community partners, and key informants. This input helps explain how families experience local systems, what barriers they encounter, and what types of services or supports they believe would make the greatest difference. While quantitative data shows measurable conditions across Allegany County, qualitative data provides context, lived experience, and insight into how those conditions affect children, youth, and families.

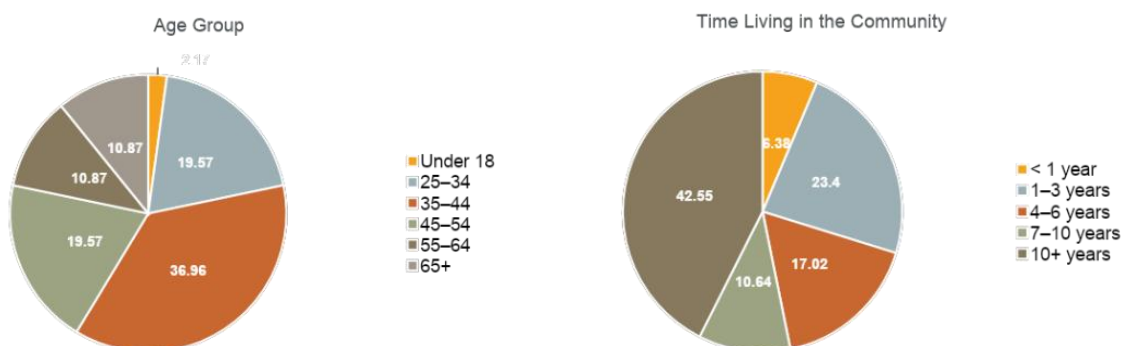
COMMUNITY SURVEY FINDINGS

The community survey gathered input from residents about local needs, barriers, program access, and priorities for future services. These responses help provide context for the quantitative data by showing how families and community members experience local systems in daily life. While the quantitative indicators show countywide conditions, the community survey highlights resident perspectives on basic needs, employment, youth opportunity, service access, communication, and trust.

The survey included **50 respondents** from eight neighborhoods or community school areas. Respondents were asked about the challenges their families face, the services they use, barriers to employment and education, preferred program formats, and the types of supports they would like to see expanded in the future.

RESPONDENT PROFILES

Survey respondents represented a range of ages, neighborhoods, and lengths of time living in the community. Respondents came from eight neighborhood or community school areas, with the largest share from South Penn, followed by John Humbird, Cash Valley, and Beall. A substantial share of respondents were long-term residents: 42% reported living in the community for more than 10 years, while only 6% reported living there for less than one year.

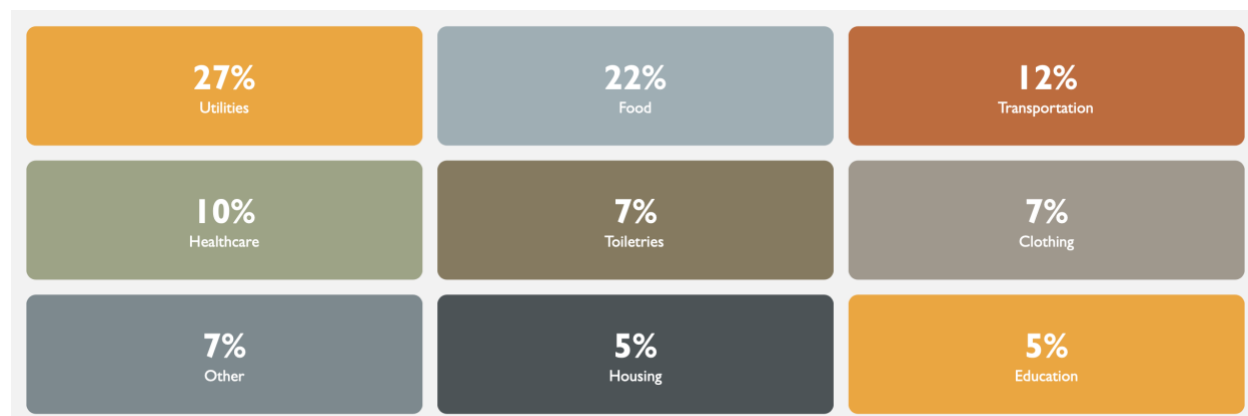


This respondent profile is useful because it shows that the survey reflects input from residents with sustained experience in the community. Their responses offer insight not only into immediate needs, but also

into longer-term patterns they have observed around services, barriers, neighborhood conditions, and family supports.

BASIC NEEDS AND HOUSEHOLD STABILITY

Survey respondents identified several challenges related to household stability and basic needs. The most frequently selected challenges were **utilities, food, transportation, and health care**, followed by toiletries, clothing, housing, education, and other needs. Write-in responses also included broader concerns such as “everything” and mental health for children and adolescents.



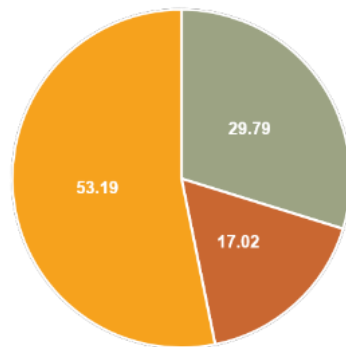
These findings suggest that many families are facing immediate household pressures, not only long-term economic concerns. Utility costs, food access, transportation, and health care all affect whether families can remain stable, participate in school and work, and access the services available in the community. The responses also reinforce the quantitative findings around child poverty, housing cost burden, and economic instability.

Planning Consideration: Support for basic needs should remain central to local planning, particularly food assistance, utility assistance, transportation access, health care navigation, and coordinated referrals.

ACCESS TO BASIC SERVICES

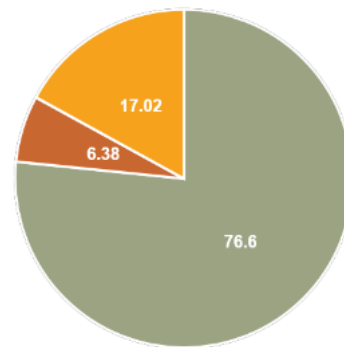
Respondents were asked about access to safe and affordable housing, physical and mental health care, and quality early childhood education. The responses suggest that access varies by service area. A large share of respondents indicated only partial access to safe, affordable housing options, while access to physical and mental health care and early childhood education appeared more mixed.

Safe, Affordable Housing Options



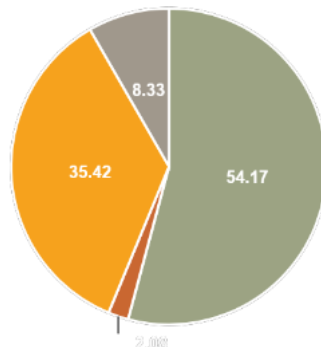
■ Yes ■ No ■ Somewhat

Access to Physical/Mental Health Care



■ No Trouble ■ Trouble ■ Somewhat

Access to Quality Early Childhood Education



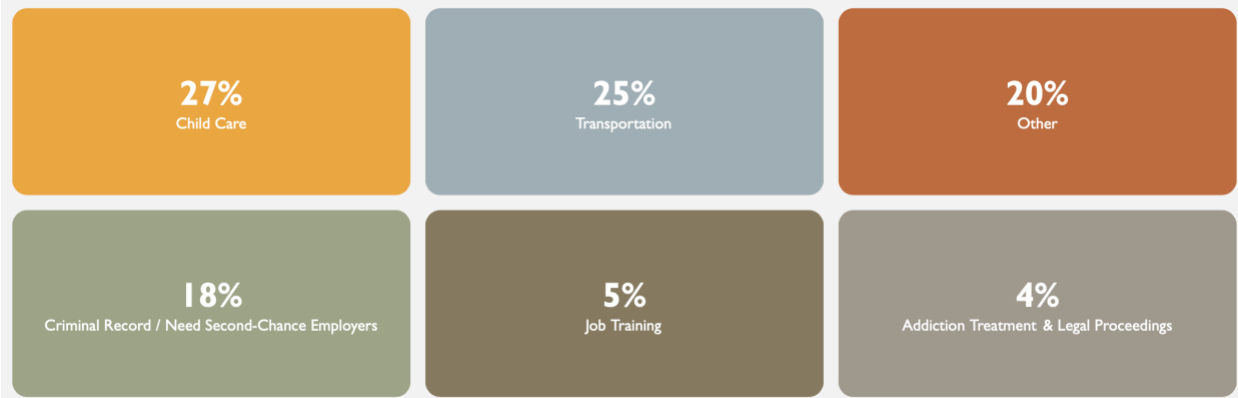
■ Yes ■ No ■ Somewhat ■ Other

This distinction is important because access is not simply a question of whether services exist. Families may still face barriers related to cost, eligibility, location, transportation, appointment availability, hours of operation, or awareness of where to go for help. Housing, health care, and early childhood education are especially important because they shape family stability and children's ability to succeed in school and community life.

Planning Consideration: Local planning should consider both service availability and practical access, including affordability, transportation, timing, eligibility, and awareness.

EMPLOYMENT BARRIERS AND ECONOMIC MOBILITY

When asked what prevents residents from getting or keeping good jobs, respondents most frequently identified child care and transportation. Other responses included criminal records and the need for second-chance employers, job training, addiction treatment, and legal proceedings.

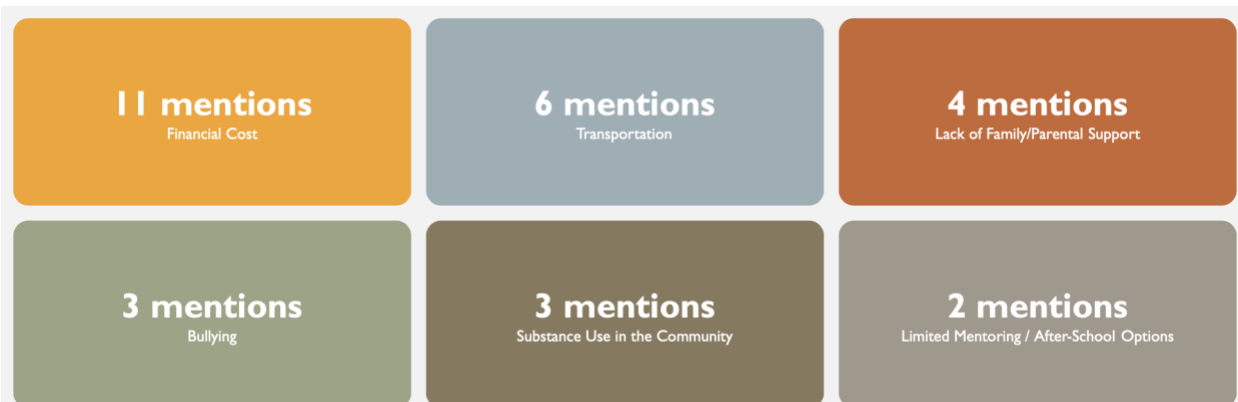


These findings show that employment barriers are often practical and interconnected. For many residents, the ability to work is not only about whether jobs exist. It may also depend on whether they can find child care, travel reliably, resolve legal or recovery-related barriers, obtain training, and connect with employers willing to hire individuals facing past challenges. This connects directly to broader goals around family economic stability and mobility.

Planning Consideration: Employment strategies should be connected to child care, transportation, second-chance hiring, workforce training, recovery supports, and legal-system navigation.

YOUTH OPPORTUNITY, SCHOOL BARRIERS, AND POSITIVE ACTIVITIES

Respondents identified several barriers affecting local students' ability to complete school or attend college. The most common theme was financial cost, followed by transportation, lack of family or parental support, bullying, substance use in the community, and limited mentoring or after-school options.

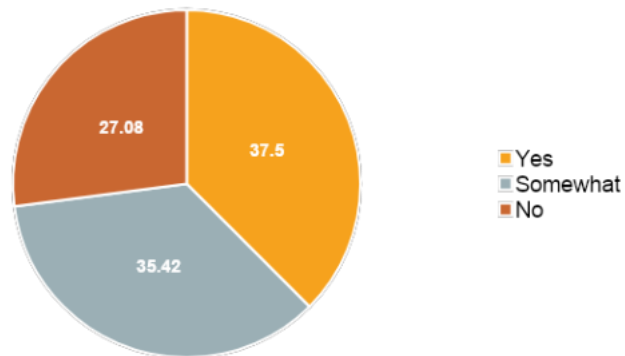


These responses suggest that youth success is shaped by more than classroom instruction alone. Students may need financial guidance, transportation, family support, safe environments, mentoring, and accessible activities outside the school day. The survey findings also align with several quantitative indicators, including chronic absenteeism, youth mental health concerns, and the need for positive youth development opportunities.

Planning Consideration: Youth opportunity strategies should include mentoring, after-school programming, transportation supports, college and career guidance, bullying prevention, substance-use prevention, and family engagement.

PROGRAM AWARENESS, USE, AND ACCESS BARRIERS

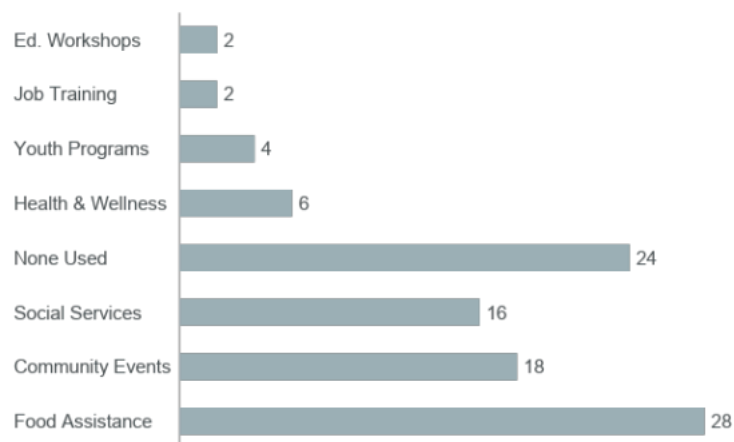
Aware of Programs & Services for Children, Youth & Families



The survey indicates that awareness of programs and services remains uneven. While 37.5% of respondents reported being aware of programs and services for children, youth, and families, 35.42% reported being only somewhat aware, and 27.08% reported not being aware. This suggests that a significant share of residents may not have a clear understanding of what services are available, who is eligible, or how to access support.

Program use also varied by service type. Food assistance was the most commonly used service in the past 12 months, followed by community events and social services. Fewer respondents reported using health and wellness programs, youth programs, job training, or educational workshops. Notably, a large number of respondents reported using no services in the past year.

Services Used in Past 12 Months

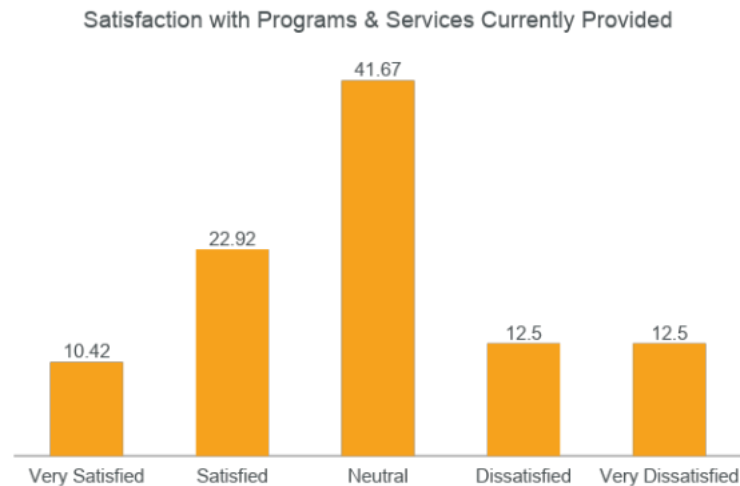


These findings suggest that the presence of programs does not automatically translate into resident awareness or participation. Families may face barriers related to communication, eligibility, transportation, timing, trust, or simply knowing where to begin.

Planning Consideration: Service navigation, outreach, and referral coordination should be treated as core strategies. Improving awareness of existing services may be as important as creating new programs.

PROGRAM SATISFACTION AND ACCESS CHALLENGES

Survey respondents expressed mixed levels of satisfaction with programs and services currently provided. The largest share of respondents reported being satisfied or neutral, while smaller shares reported being very satisfied, dissatisfied, or very dissatisfied. At the same time, 34.78% of respondents reported encountering challenges or barriers when accessing programs for children, youth, and families.

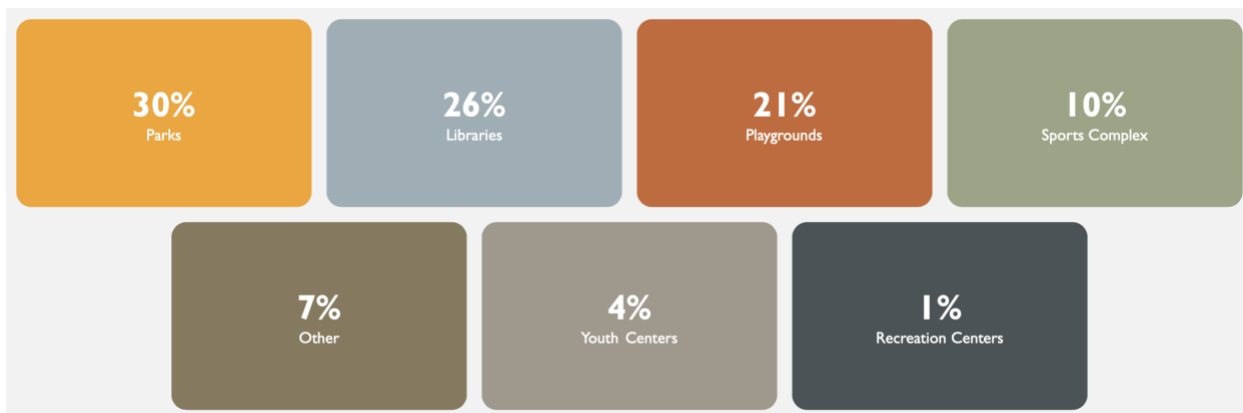


Overall satisfaction does not eliminate the presence of access barriers. Some residents may view existing services positively but still struggle to access them consistently. Barriers may include transportation, limited hours, lack of child care, unclear eligibility requirements, limited communication, paperwork, stigma, or difficulty navigating multiple agencies.

Planning Consideration: Future planning should examine both service quality and service access. A program may be valued by residents but still need improvements in outreach, scheduling, transportation, eligibility navigation, or follow-up.

COMMUNITY SPACES AND CONNECTION

Residents identified several community spaces that bring people together, including parks, libraries, playgrounds, sports complexes, youth centers, recreation centers, and other public or community-based spaces. Parks and libraries were among the most commonly identified spaces.

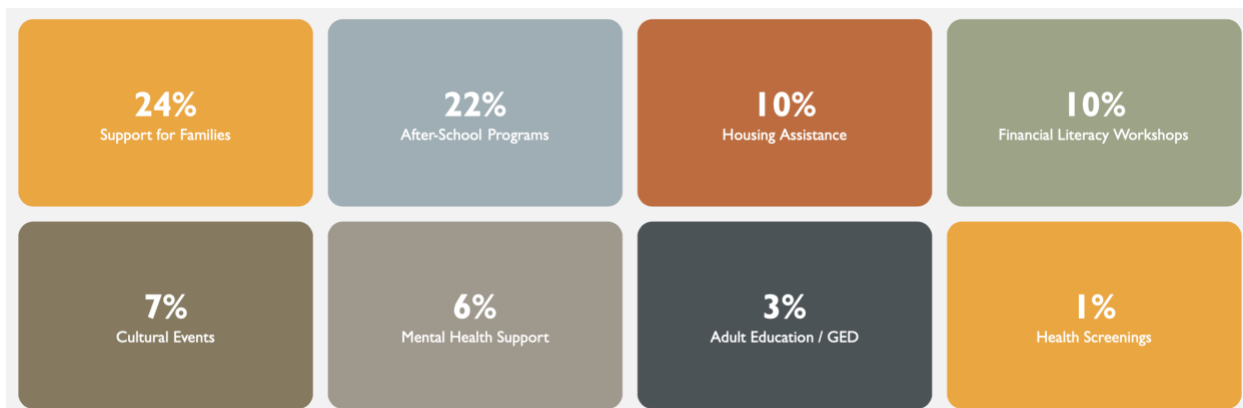


These findings point to important community assets. Public spaces are recreational amenities that can also serve as trusted locations for outreach, programming, family engagement, youth activities, and service connection. In communities where transportation and trust are barriers, familiar public spaces may be especially valuable for reaching families.

Planning Consideration: Future programs may be more effective when offered in familiar, accessible, and trusted community spaces such as parks, libraries, schools, playgrounds, and neighborhood-based facilities.

FUTURE PROGRAMS AND SERVICES RESIDENTS WANT

When asked what types of programs or services they would like to see more of in the future, respondents most frequently identified support for families and after-school programs. Other priorities included housing assistance, financial literacy workshops, cultural events, mental health support, adult education or GED programs, and health screenings.

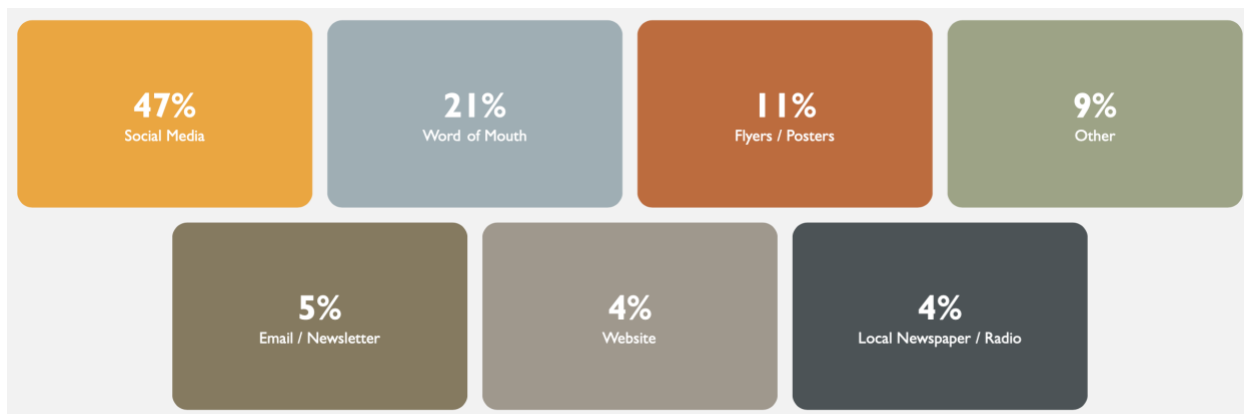


These responses show that residents are looking for both practical supports and community-building opportunities. The interest in family support, housing assistance, financial literacy, and mental health reflects the pressures many households are facing. At the same time, the interest in after-school programs and cultural events suggests a desire for positive, preventive, and connection-building activities.

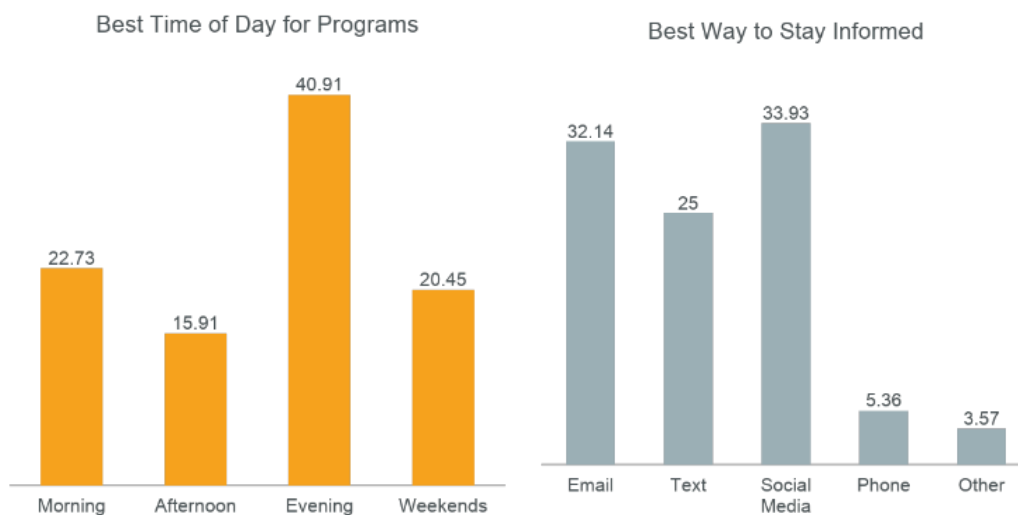
Planning Consideration: Future programming should balance immediate family stabilization with prevention, enrichment, and community-building efforts.

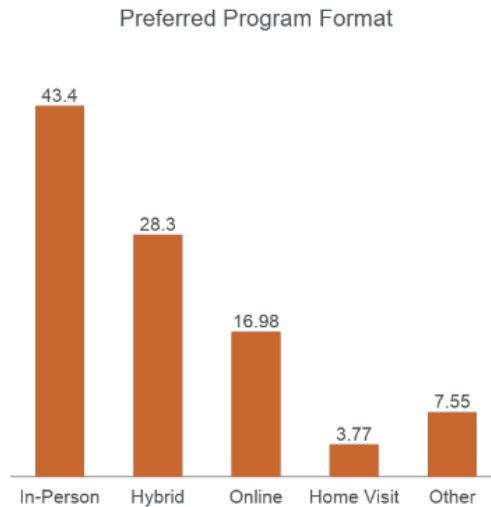
COMMUNICATION AND OUTREACH

The survey shows how residents prefer to receive information and participate in programs. Respondents most commonly reported learning about programs through social media, followed by word of mouth, flyers or posters, email or newsletters, websites, and local newspaper or radio.



Respondents also expressed preferences related to timing and format. Evening was identified as the preferred time of day for programs, followed by morning, weekends, and afternoon. In-person programming was the most preferred format, followed by hybrid and online options. For staying informed, respondents identified social media, email, and text as leading communication methods.





These findings suggest that outreach should be practical and repeated. Traditional websites or printed notices alone are unlikely to reach all residents. Programs may need to rely on trusted messengers, social media, direct communication, and neighborhood-based outreach.

Planning Consideration: Communication strategies should reflect how residents actually receive information, with a focus on social media, word of mouth, email, text messaging, evening availability, and in-person or hybrid programming.

OPEN-ENDED THEMES: WHAT RESIDENTS TOLD US

Open-ended survey responses were grouped into several recurring themes: health and wellness, youth and mentorship, safety, program access and timing, and communication and trust. Residents raised concerns about affordable healthy food, drug activity, cleaner and safer streets, insurance coverage, cost of living, youth activities, mentoring, transportation, program timing, and whether community voices are truly heard.

Health & Wellness

- Affordable, healthy food options — “too much junk fast food” available locally
- Reduce drug use; cleaner, safer streets
- Better insurance coverage and lower cost of living

Youth & Mentorship

- More sports and activities to keep kids off the streets
- Big Brothers/Big Sisters-style mentoring programs
- Affordable before- and after-school care for working parents

Safety

- Many feel safe because neighbors know each other and look out for one another
- Recurring concern: drug activity near/in the neighborhood
- Some report limited police response to non-urgent issues

Program Access & Timing

- Offer more/better transportation to and from programs
- Make programs available evenings and weekends, not just 9–5

Communication & Trust

- Residents want to feel their voice is actually heard
- Better, more consistent notification about events and how to get there

These responses add important context to the survey results. Residents are identifying categories of need and describing how those needs are experienced in daily life. Concerns about drug activity, transportation, limited program hours, and communication point to the importance of trust, accessibility, and neighborhood-level engagement.

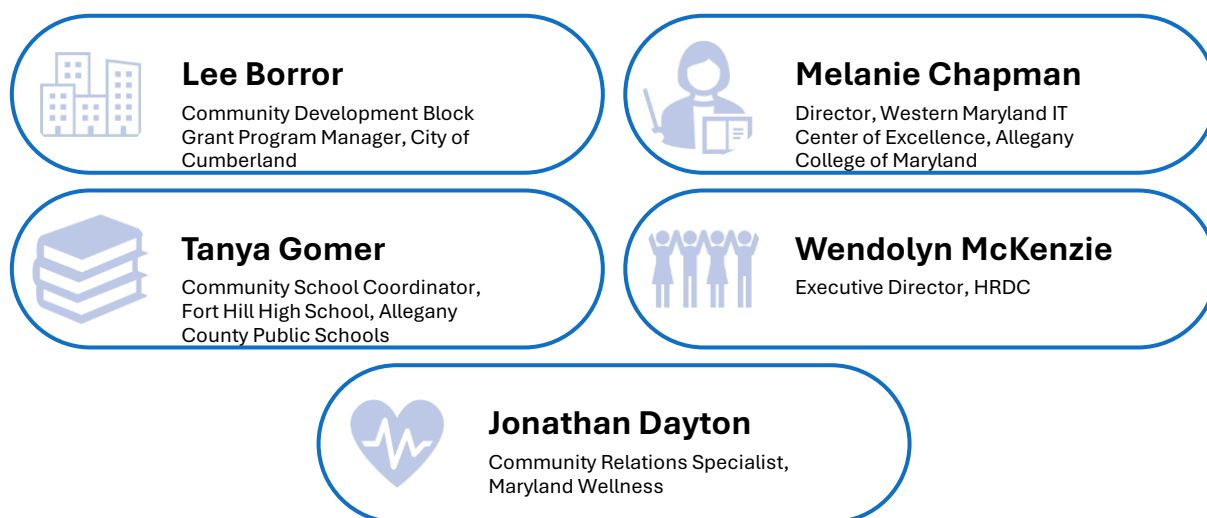
The open-ended responses also highlight community strengths. Some residents reported feeling safe because neighbors know one another and look out for each other. This suggests that local planning should build on existing social connection and neighbor-to-neighbor support while also addressing the safety, access, and trust concerns residents identified.

Planning Consideration: Resident feedback should shape not only what services are offered, but how, when, and where they are delivered. Trust, timing, transportation, and communication should be treated as essential parts of program design.

KEY INFORMANT INTERVIEWS

Key informant interviews were conducted to gather system-level insight from individuals familiar with children, youth, families, public systems, education, housing, workforce, transportation, and community-based services in Allegany County. These interviews were intended to supplement the community survey and quantitative data by identifying local strengths, persistent barriers, service gaps, and opportunities for improved coordination.

The interviews reinforced many of the issues identified in the community survey, including basic needs, housing, utilities, food, transportation, child care, service navigation, youth opportunity, and family economic stability. Informants also provided additional context on system-level challenges, including transportation policy, affordable housing, program eligibility cliffs, fragmented service delivery, and the need for stronger coordination among agencies and local government.



KEY TAKEAWAYS

1. BASIC NEEDS REMAIN CENTRAL

Across the interviews, informants consistently identified basic needs as the foundation of family stability. Housing, utilities, food, transportation, and child care were repeatedly named as major concerns for limited-income residents. Lee Borrer described the core issues simply as “housing, utilities, food,” while also adding low-paying jobs, the benefits cliff, and the ALICE population as important parts of the local economic picture.

This theme aligns closely with the community survey, where respondents identified utilities, food, transportation, and health care as leading challenges in meeting basic needs. The key informants added that these needs are connected rather than separate. Melanie Chapman noted that a parent may want to enroll in training or accept a better job, but may not be able to do so without child care or reliable transportation; likewise, an unexpected utility bill or car repair can affect a family’s ability to pay for food, housing, or remain in a program.

Transportation was one of the strongest and most repeated themes. Informants described transportation as a barrier to school

2. TRANSPORTATION IS A CROSS-CUTTING BARRIER

attendance, employment, health care, child care, food access, training programs, and service participation. Tanya Gomer's interview focused heavily on how transportation barriers affect Fort Hill High School students, particularly those who live within the 1.5-mile non-busing radius but still face long, difficult, or unsafe walks to school. She explained that if students are not physically present at school, staff cannot provide food, clothing, social-emotional support, paperwork assistance, job application help, or college-readiness support.

Several informants also connected transportation to workforce access. Major employment centers are not always located within walkable areas, taxis may be unreliable or unaffordable, and existing public transportation may not align with the schedules or locations residents need. Wendolyn McKenzie identified transportation expansion as a "root solution" that could affect high school attendance, employment, child care, health care, and food security.

3. SERVICE AVAILABILITY DOES NOT ALWAYS MEAN SERVICE ACCESS

Informants repeatedly emphasized the gap between services

existing and residents being able to use them. Melanie Chapman described help as being spread across multiple organizations, each with its own applications, eligibility rules, hours, and locations. She also noted that transportation, child care, and scheduling can determine whether residents are actually able to take advantage of education, workforce, or service opportunities.

This theme is especially important for the gap analysis section later in the report. The interviews suggest that Allegany County has many committed providers and programs, but residents may still fall through the cracks because the system can be difficult to navigate. Informants pointed to the need for stronger follow-through after referrals, better coordination among providers, and direct connections to services rather than simply handing residents information.

Child care was identified as a major barrier to employment, training, and family economic

4. CHILD CARE AND ELIGIBILITY CLIFFS AFFECT WORKFORCE AND EDUCATION

mobility. Wendolyn McKenzie specifically noted challenges with child care subsidies, early Head Start availability for infants through age three, and the difficulty faced by ALICE families who earn slightly too much to qualify for some programs but still cannot afford services independently.

This theme connects directly to the community survey finding that child care was the leading barrier to getting or keeping good jobs. Informants added important nuance: families may be motivated to work or pursue training, but child care costs, program eligibility, and transportation can make those opportunities unrealistic. This suggests that workforce development strategies should be paired with child care, transportation, and family-support strategies.

5. YOUTH ATTENDANCE, MENTAL HEALTH, AND POSITIVE DEVELOPMENT ARE CONNECTED

Key informants described youth needs as broader than academics alone. Tanya Gomer emphasized that many students may be dealing with trauma,

adult responsibilities at home, sibling care, transportation barriers, and lack of reliable family support. At Fort Hill High School, she described attendance as a major concern, particularly for students who live within the school system's 1.5-mile walking radius but still face difficult, uphill, or unsafe walks from neighborhoods such as Riverbend Court, Industrial Boulevard, and Old Town Manor. She noted that many students do not have access to a vehicle at home, public buses do not operate in ways that meet the school's attendance needs, and bad weather can be enough to keep students from coming to school at all.

This is important because it connects chronic absenteeism to larger family and community conditions. Attendance is not simply a school compliance issue. For some students, it is affected by transportation, caregiving, weather, family instability, mental health, and whether the school can meet practical needs once students arrive. Informants suggested that flexible, place-specific solutions may be needed, especially in ENOUGH communities where barriers may differ from other parts of the county. In the Fort Hill example, a targeted transportation solution (such as a short shuttle loop or policy adjustment for students within the walking radius) was discussed as a potentially practical intervention that could improve attendance and increase access to school-based supports.

Informants identified strong relationships and community cooperation as major local assets. Lee Borrer named "community cooperation among service providers and agencies" as a primary strength.

Melanie Chapman similarly noted that schools, the college,

6. COLLABORATION IS A STRENGTH, BUT COORDINATION CAN BE IMPROVED

employers, libraries, health care providers, and community agencies are all working to support families, and that partners often know each other personally.

At the same time, informants also described fragmentation, duplication, and the need for better coordination. Jonathan Dayton's interview summary identified an "excessive number" of local organizations, agencies, and stakeholders involved in community initiatives without unified coordination. This suggests that Allegany County has a strong foundation of committed providers, but would benefit from clearer convening, shared priorities, and more streamlined systems.

IN THEIR WORDS

On basic needs:

“The basics: housing, utilities, food. I would add low-paying jobs.”

On connected barriers:

“A parent may want to enroll in training or accept a better job but cannot do so without childcare or a reliable way to get there.”

On service access:

“There can be a real gap between a service being available and someone being able to use it.”

On school attendance and transportation:

“If they’re not here, we can’t give them the supports they need. If they’re not here, I can’t give them clothes. If they’re not here, I can’t give them food.”

On collaboration:

“I think now, more than ever, we do work better together.”

On the need for flexible solutions:

“We cannot have this one-size-fits-all approach.”

PERCEIVED EFFECTIVENESS & CAPACITY NEEDS

Key informants described several parts of the local service system as effective, particularly the strong relationships among providers and the ability to respond quickly when specific needs are identified. At the same time, they identified capacity needs related to transportation, service navigation, referral follow-through, child care, and clearer coordination across organizations.

PERCEIVED EFFECTIVENESS	CAPACITY NEEDS
Providers often know one another and can respond quickly when a specific need is identified.	Stronger follow-through after referrals so residents actually receive the help they were referred to.
Community schools provide a useful structure for connecting students and families to supports.	Transportation flexibility, especially for students, workers, and families trying to access services.
Existing programs and agencies provide many services across the county.	Better service navigation so residents can understand eligibility, applications, hours, and locations.
HRDC and other providers have transportation-related assets and experience.	More targeted or flexible transportation models, including pilots and route adjustments.
Education, workforce, and service providers are invested in family success.	Child care access, especially for infants/toddlers and ALICE families who do not qualify for some programs.
There is strong local commitment and community pride.	Clearer convening, priority-setting, and coordination across organizations and local government.

SWOT ANALYSIS: KEY INFORMANT FEEDBACK

The following SWOT analysis summarizes key informant feedback into internal strengths and weaknesses, as well as external opportunities and challenges.

INTERNAL FORCES	EXTERNAL FORCES
STRENGTHS	OPPORTUNITIES
• Strong cooperation among service providers and agencies. • Existing relationships among schools, college partners, employers, libraries, health care providers, nonprofits, and community agencies. • Project Connect and similar networks allow providers to respond quickly when needs are identified. • Community schools provide an important structure for connecting students and families to supports.	• Expand or pilot targeted transportation solutions, especially for students and workers. • Improve warm handoffs and follow-through after referrals. • Use ENOUGH as a framework to test flexible, neighborhood-specific responses. • Build stronger alignment between education, workforce, child care, and family supports. • Maximize existing resources and reduce duplication before creating new programs.
WEAKNESSES	THREATS / CHALLENGES
• Services can be fragmented across multiple organizations, locations, applications, and eligibility rules. • Residents may not know where to begin or may fall through the cracks after referral. • Transportation systems do not consistently match the needs of students, workers, families, or people seeking health care. • Limited coordination and lack of clear convening authority can reduce system effectiveness.	• Persistent poverty, low wages, housing affordability, utility costs, child care barriers, transportation limitations, behavioral health needs, substance use, and workforce shortages. • Eligibility cliffs leave some ALICE families earning too much to qualify for supports but too little to meet basic needs. • Potential funding cuts or policy restrictions could limit community-school flexibility and family-support programming.

POTENTIAL FUNDING PRIORITIES IDENTIFIED BY KEY INFORMANTS

Key informants identified several areas where additional investment could strengthen outcomes for children, youth, and families. These priorities reflect both immediate and system-level needs.



SUMMARY OF KEY INFORMANT FINDINGS

Overall, key informants reinforced many of the themes identified through the community survey and quantitative data. They described a community with committed providers, strong relationships, and meaningful existing resources, but also one where families continue to face persistent barriers related to poverty, housing, utilities, food, transportation, child care, employment, health care, and service navigation.

The interviews suggest that Allegany County's challenge is not only whether services exist, but whether families can find them, reach them, qualify for them, and follow through successfully. Informants repeatedly emphasized the importance of coordination, flexible local solutions, transportation, child care, and stronger follow-through across agencies. Their input supports a planning approach focused on improving access, reducing duplication, maximizing existing resources, and aligning services around the real conditions families face.

VI. ENOUGH INITIATIVE ALIGNMENT

The Engaging Neighborhoods, Organizations, Unions, Governments and Households, or ENOUGH, Initiative is Maryland's place-based effort to address concentrated, generational child poverty by helping communities identify needs, strengthen partnerships, and develop strategies rooted in resident voice. In Allegany County, the initial ENOUGH work is focused on the South Penn and John Humbird neighborhoods, with the Local Management Board working alongside the City of Cumberland, Allegany County HRDC, and the Allegany County Department of Social Services.



Although this assessment is countywide, many of its findings are directly relevant to ENOUGH. The quantitative data, community survey responses, key informant interviews, and resource review all point to issues that affect child poverty, family economic mobility, neighborhood conditions, and access to services. These include basic needs, housing, transportation, child care, school attendance, youth supports, health, safety, and service navigation.

The assessment also helps connect countywide indicators with resident input and provider perspective. This is important because ENOUGH planning depends not only on understanding broad data trends, but also on identifying how families experience barriers in specific neighborhoods and service systems.

Several assessment findings are especially relevant to Allegany County's ENOUGH work. Child poverty remains a major concern, with 27% of children in Allegany County living in poverty, compared with 11% in Maryland and 16% nationally. The assessment also identifies related challenges in housing cost burden, homelessness, chronic absenteeism, youth mental health, and access to basic needs.

Community survey responses reinforce these concerns. Residents identified utilities, food, transportation, health care, housing, and education as barriers to meeting basic needs. Respondents also identified child care and transportation as major barriers to getting or keeping good jobs, and many reported limited awareness of programs and services for children, youth, and families. Survey outreach also included respondents from the South Penn and John Humbird ENOUGH communities, making the findings useful for neighborhood-level planning.

Key informant interviews provided additional context. One example involved Fort Hill High School attendance and transportation barriers for students living within the school system's 1.5-mile walking radius. Informants described how students from neighborhoods such as Riverbend Court, Industrial Boulevard, and Old Town Manor may still face difficult, uphill, or unsafe walks to school. They also described how transportation barriers can affect attendance, and how attendance then affects access to food, clothing, social-emotional support, life skills, job application help, and college-readiness support.

This example illustrates why place-based planning matters. A county- or state-wide policy or service model may affect neighborhoods differently depending on transportation access, sidewalks, safe routes, family responsibilities, and proximity to schools or services. ENOUGH provides a framework for identifying these

kinds of neighborhood-specific barriers and connecting them to broader goals related to child poverty, family economic mobility, and community well-being.

The findings of this assessment can support Allegany County's ENOUGH work by helping the LMB and community partners identify priority needs, connect resident voices with data, understand existing service assets, and inform the Neighborhood Action Plan. The FY26–FY28 Community Plan builds on these findings by organizing strategies and progress measures around the four ENOUGH planning areas: Cradle-to-Career Education, Healthy Families, Economically Secure Families, and Safe and Thriving Communities.

VII. RESOURCE INVENTORY AND GAPS

Appendix A provides an inventory of community assets organized by service category and aligned with the four ENOUGH planning areas: Cradle-to-Career Education, Healthy Families, Economically Secure Families, and Safe and Thriving Communities. The inventory includes public agencies, nonprofit organizations, schools, health providers, housing providers, food assistance programs, transportation resources, workforce partners, faith-based organizations, and youth-serving programs.

The asset inventory shows that Allegany County has a strong base of organizations serving children, youth, and families. Resources include food assistance providers, housing and homelessness services, public health and behavioral health providers, early childhood and education programs, youth development organizations, workforce partners, and public agencies. Several organizations also operate across more than one area of need. For example, HRDC is listed as providing Head Start and Early Head Start, energy assistance, weatherization, housing, and transportation, while Allegany County Public Schools, the Health Department, DSS, the LMB, and other partners also play roles across multiple result areas.

At the same time, the assessment suggests that the presence of services does not always mean that families can easily find, reach, qualify for, or use them. Community survey responses and key informant interviews point to several recurring access issues, including transportation, child care, service awareness, eligibility, program hours, referral follow-through, and coordination among providers.

Several general gaps emerged from the resource review and assessment findings:

- **Navigation and awareness:** Families may not know what services exist, where to begin, or how to move through eligibility, application, and referral processes.
- **Transportation and location:** Services may exist but still be difficult to reach, especially for families without reliable transportation or for students and residents whose needs do not align with existing routes or schedules.
- **Child care and scheduling:** Parents and caregivers may struggle to participate in employment, training, services, or programs when child care is unavailable, unaffordable, or not aligned with work and program hours.
- **Capacity and scale:** Existing providers may be doing important work but may not have enough capacity to meet the full level of need, particularly around housing, behavioral health, youth programming, and family stabilization.
- **Coordination and follow-through:** Providers often know one another and collaborate, but families may still experience services as fragmented across multiple agencies, applications, locations, and requirements.
- **Neighborhood-level access:** Countywide resources may not be equally accessible or practical for all neighborhoods, especially in areas where poverty, transportation barriers, school attendance challenges, and basic-needs pressures overlap.

CONCLUSION

The 2026 Allegany County Community Needs Assessment provides a foundation for local planning, coordination, and investment decisions affecting children, youth, and families. The findings show that Allegany County has significant community assets, including committed service providers, strong local relationships, public agencies, schools, libraries, health providers, housing resources, food assistance programs, youth-serving organizations, and community spaces.

The assessment also shows that families continue to face persistent and connected challenges. Economic instability, housing pressure, transportation, child care, health care access, mental health, school attendance, youth opportunity, and service navigation all affect the daily lives of children, youth, and families. These issues do not operate separately; they overlap and often reinforce one another.

The community asset inventory included in Appendix A shows that many important resources already exist. However, the assessment also suggests that access, awareness, coordination, capacity, and follow-through remain important areas for continued attention. The findings of this assessment should therefore be used to inform the FY26–FY28 Community Plan, including priority-setting, progress measures, ENOUGH alignment, and future investment decisions

APPENDIX A. LIST OF COMMUNITY ASSETS.

Asset	Asset Category	Key Services	Cradle-to-Career Education	Healthy Families	Economically Secure Families	Safe & Thriving Communities
Allegany Mountain Fresh Farmers Market	Food Assistance & Nutrition	Fresh food access, SNAP and nutrition incentive redemption		X		
First Church of the Nazarene	Food Assistance & Nutrition	Western Maryland Food Bank distribution site and congregational food support		X		
Healing Hunger Food Service	Food Assistance & Nutrition	Community food service and meal distribution		X		
Interfaith Community Pantry	Food Assistance & Nutrition	Community food pantry		X		
Our Lady of the Mountains - St. Anthony Place	Food Assistance & Nutrition	Food pantry and community meals		X		
Second Baptist Church	Food Assistance & Nutrition	Food pantry and congregational community support		X		
Western Maryland Food Bank	Food Assistance & Nutrition	Regional food distribution and the Bagman backpack program for children		X	X	
1st Way Pregnancy Support Center	Community & Faith-Based Organizations	Pregnancy support, parenting education, infant and baby supplies		X		
Allegany County Department of Social Services (DSS)	Community & Faith-Based Organizations	Child welfare, child support, SNAP and TCA benefits, burial and emergency assistance			X	X
Allegany County Transit Department	Community & Faith-Based Organizations	Public transit and paratransit service			X	X

Asset	Asset Category	Key Services	Cradle-to-Career Education	Healthy Families	Economically Secure Families	Safe & Thriving Communities
CASA of Western Maryland	Community & Faith-Based Organizations	Court appointed special advocates for children in foster care and abuse or neglect proceedings				X
Local Management Board of Allegany County	Community & Faith-Based Organizations	Child and family services coordination, local child wellbeing data, and funding for community programs		X		X
Maryland Legal Aid	Community & Faith-Based Organizations	Civil legal aid: eviction defense, benefits appeals, family law			X	X
Potomac Highlands United Way	Community & Faith-Based Organizations	Community funding, 2-1-1 referral, basic needs and family stability initiatives			X	X
Safe Space Cumberland	Community & Faith-Based Organizations	Youth drop-in space, basic needs, education and housing support		X		X
Allegany County Health Department	Health & Behavioral Health	Public health, care coordination, dental clinic, behavioral health, school health services		X		X
Archway Station, Inc.	Health & Behavioral Health	Psychiatric rehabilitation for children and adults, supported employment, community support		X		X
Maryland AHEC West	Health & Behavioral Health	Health insurance navigation, community health education, behavioral health initiatives		X	X	
Maryland Coalition of Families	Health & Behavioral Health	Peer support and navigation for families raising children with behavioral health needs		X		

Asset	Asset Category	Key Services	Cradle-to-Career Education	Healthy Families	Economically Secure Families	Safe & Thriving Communities
Mountain Laurel Medical Center	Health & Behavioral Health	Federally qualified health center: primary care, behavioral health and dental services on a sliding fee scale		X		
Service Coordination, Inc.	Health & Behavioral Health	Coordination of community services for children and adults with developmental disabilities		X		X
Spectrum Support, Inc.	Health & Behavioral Health	Autism and developmental disability services for children and families		X		X
Tri-State Community Health Center	Health & Behavioral Health	Federally qualified health center: primary care on a sliding fee scale for uninsured and underinsured families		X		
Unified Community Connections	Health & Behavioral Health	Disability services, supported living, day and community services		X		X
UPMC Western Maryland	Health & Behavioral Health	Hospital care, emergency behavioral health, community health workers, maternal and child health		X		
WVU Medicine Children's Medical Group	Health & Behavioral Health	Pediatric primary care and developmental screening		X		
Cumberland Housing Group	Housing & Homeless Services	Public housing and Section 8 Housing Choice Vouchers			X	X
Family Crisis Resource Center	Housing & Homeless Services	Domestic violence shelter, rape crisis services, legal advocacy, child services		X		X
Frostburg Housing Authority	Housing & Homeless Services	Public housing administration			X	X

Asset	Asset Category	Key Services	Cradle-to-Career Education	Healthy Families	Economically Secure Families	Safe & Thriving Communities
Human Resources Development Commission (HRDC)	Housing & Homeless Services	Head Start and Early Head Start, energy assistance, weatherization, housing, transportation	X	X	X	X
Interfaith Housing Alliance	Housing & Homeless Services	Affordable housing development, homeownership and housing counseling			X	X
Union Rescue Mission of Western Maryland	Housing & Homeless Services	Emergency shelter, meals, clothing and basic needs		X		X
Allegany College of Maryland	Schools & Educational Programs	Higher education, adult education and GED, workforce training, dental clinic, campus food pantry	X		X	
Allegany County Library System	Schools & Educational Programs	Early literacy, out-of-school learning, public computing, community space	X			X
Allegany County Public Schools	Schools & Educational Programs	Public K-12 education, community schools, student health and family supports	X	X	X	X
Beginnings Montessori	Schools & Educational Programs	Montessori early childhood education and preschool	X			
Bishop Walsh School - Jennifer Dunn Jones Early Childhood Center	Schools & Educational Programs	Early childhood education and preschool	X			
Child Care Choices	Schools & Educational Programs	Child care resource and referral, child care scholarship assistance, provider training	X		X	
Council for Exceptional Children and Adults	Schools & Educational Programs	Special education advocacy, family support, life skills	X			

Asset	Asset Category	Key Services	Cradle-to-Career Education	Healthy Families	Economically Secure Families	Safe & Thriving Communities
Frostburg State University	Schools & Educational Programs	Higher education, counseling services, community programming	X			
Maryland Family Network	Schools & Educational Programs	Early childhood system support, Judy Center and family support center network, child care resource services	X			
Parents' Place of Maryland	Schools & Educational Programs	Parent training and information for families of children with disabilities, special education advocacy	X	X		
Sheppard Pratt - Cumberland	Schools & Educational Programs	Nonpublic special education school, behavioral health, transition services	X	X		
Boy Scouts of America - Laurel Highlands Council	Youth Development Programs	Youth development, mentoring, outdoor and leadership programming	X			X
Jane's Place Child Advocacy Center	Youth Development Programs	Child abuse response, forensic interviewing, victim advocacy and trauma services		X		X
The Children's League	Youth Development Programs	Early intervention and therapeutic services for children with developmental needs	X	X		
The Salvation Army - Cumberland (incl. Red Shield Youth Center)	Youth Development Programs	After-school and out-of-school-time programming, food assistance, emergency financial help	X	X	X	
University of Maryland Extension - Allegany County	Youth Development Programs	4-H youth development, nutrition education, SNAP-Ed	X	X		

Asset	Asset Category	Key Services	Cradle-to-Career Education	Healthy Families	Economically Secure Families	Safe & Thriving Communities
YMCA of Cumberland - Family Center	Youth Development Programs	Out-of-school time, child care, recreation and family programming at the Family Center facility	X	X		X
YMCA of Cumberland - Riverside	Youth Development Programs	Out-of-school time, recreation, swim instruction, family programming	X	X		X
Horizon Goodwill Industries	Workforce Development & Employment	Job training and placement, education services, donated goods			X	
Maryland Division of Rehabilitation Services (DORS)	Workforce Development & Employment	Pre-employment transition services for students with disabilities, vocational rehabilitation	X		X	
Western Maryland Consortium	Workforce Development & Employment	Workforce development, job training, youth employment programs	X		X	