

SULLIVAN COUNTY, MO COMMUNITY HEALTH NEEDS ASSESSMENT 2022



Sullivan County Health Department promotes a healthy lifestyle and environment through education and public health services for the well-being of our community.



Commissioned by Ms. Deborah
Taylor, Administrator



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63556

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SULLIVAN COUNTY, MO COMMUNITY HEALTH NEEDS ASSESSMENT: 2022

DEMOGRAPHICS: SOCIAL ECONOMIC

ZIP CODES: 63544- GREEN CASTLE; 63545- GREEN CITY; 63556- MILAN; 63560- POLLOCK; 63566- WINIGAN; 64641- GALT; 64645; HARRIS- 64646; HUMPHREYS; 64667- NEWTOWN

Sullivan County, with a population estimate of 5934 (2218 households), covers an area of 648 square miles in rural Northeast MO (US Census, 2021), contains about 1.4% of MO's land area (Name Census, 2022).



(Hearthstonelegacy.com, n.d.)

Approximately 21% of county residents are 65 years or older, majority are White/Non-Hispanic (76.7%), followed by Hispanic or Latino (18.6%), and Black (3.2%) (US Census, 2021). A language other than English is spoken at home by 16.5% of the population, higher than the state rate of 5.9% (MCDC ACS Profiles, 2022). In addition, the proportion of limited English households (7.61%) is also higher than state and national rates (ExploreMohealth.org, 2022).

Sullivan County's population decreased ~10% over the past decade as MO population increased almost 3% over that same period. The percentage of Black residents increased ~2% as the non-Hispanic White population decreased ~3% over that period. Also, over the past decade, the proportion of those 65 and older increased ~3% (USA Facts, 2022). Only 10.4% of the population, however, possesses any disability, lower than state and national rates (ExploreMOhealth.org, 2022).

Most (85.5%) county adults possess a high school degree or higher, lower than both state and national rates (MCDC ACS Profiles, 2022). High school graduate rates (94%) in the county are higher than both state and national rates, though. Free/reduced lunch rates (over 60%), however, are higher than state and national rates, and elementary school reading proficiency levels (49.6%) are lower than state and national rates (ExploreMOhealth.org, 2022). Additionally, both overall reading and math scores are below the state average (County Health Rankings and Roadmaps, 2022).

The unemployment rate (4.3% overall; current month = ~2.8%) is lower than the national rate, and most adults are employed in the manufacturing/production (27.8%) and education/health/social service sectors (25.5%) (MCDC ACS Profiles, 2022). In the county, however, earnings have declined by ~8% as statewide average wages have increased (MU Extension, 2022).

Median household income is \$44,056 [lower than state/national medians] (MCDC ACS Profiles, 2022), median household value is \$75,600, and 73.4% of households have internet access



HIGHLIGHTED COUNTY-LEVEL ISSUES FOR SULLIVAN COUNTY

*Statewide Rank of 115
(1=best)
(ExploreMOhealth.org, 2022)

Overall, Sullivan County ranks among the least healthy MO counties (Lowest 0%- 25%) for Health Outcomes. With 'I' equivalent to the 'best' ranking, Sullivan ranks 95/115 in quality of life and in health outcomes, and 90/115 in length of life compared to other MO counties (County Health Rankings and Roadmaps, 2022).

A higher proportion of county adults (24.4%) rated their health as poor or fair compared to state/national rates. County low birth rate babies (9.5%) and teen birth rate/1k (39.7) were higher than state/national rates, and county resident life expectancy (75.6) was a little lower than state/national averages. Frequent mental health concerns (16.7%) are reported at higher proportions among county residents than among state/national reports (US News/Healthiest Communities, 2022). For mental health concerns, adults receiving psychiatric services for psychotic disorders and anxiety disorders have trended up since 2016 (MDMH, 2021).

Premature death rate was higher than the state but with no significant trends over time (County Health Rankings and Roadmaps, 2022). Heart disease, cancer, unintentional injury, and stroke are the leading causes of death in the county.

Heart disease and motor vehicle crash rates are significantly higher in the county than in the state (MDHSS, 2019). Cancer incidence rates/100k (366.2) are lower than state/national rates, but heart disease prevalence rates (6.8%) are a little higher than state/national rates (US News/Healthiest Communities, 2022).

For county adults, diabetes rate (11.5%), as a contributing cause of mortality, is significantly higher than state/national rates (10.4%; 9.8%) (US News/Healthiest Communities, 2022). Hypertension as risk factor for stroke is also significantly higher than the state rate (MDHSS, 2019). Specifically for chronic disease in the county, emergency room visits for ischemic heart disease, stroke, chronic obstructive pulmonary disease, and arthritis were significantly higher than state rates (MDHSS, 2019), and alcohol and drug-related (secondary diagnoses) emergency room visits are trending upwards in the county (MDMH, 2021).

Workplace injuries in the county for 2022 are 14 to-date (MO Safe at Work, 2022). About 9-15% of county residents are uninsured, and of those insured, 21.7% receive Medicaid (ExploreMOhealth.org, 2022). Injury emergency room visits for children are significantly higher than the state rate (MDHSS, 2019). Emergency room visits for unintentional injuries, especially burns and falls, were significantly higher than the state rate (MDHSS, 2019). Rates of falls hospitalizations have increased as a trend (MU Extension, 2022). Accidental death rate /100k was 86.4 in the county compared to 61.4 in the state and to 58.5 nationally (US News/Healthiest Communities, 2022).

HEALTH BEHAVIORS/FACTORS

For Health Factors, Sullivan County ranks in the higher middle range of MO counties (Higher 50% - 75%) (County Health Rankings and Roadmaps, 2022)

IN THE TOP-RANKED COUNTY ZIP CODES:

The top health factor in 64641- Galt is Obesity with the top social factor as Unemployment

The top health factor in 64630- Browning is Cancer with the top social factor as Low Birthweight

The top health factor in 63544- Green Castle is Asthma with the top social factor as HS Education

The top health factor in 63566- Winigan is Stroke with the top social factor as After Hour ER Visits

The top health factor in 63545- Green City is Teen Pregnancy with the top social factor as Housing

IN THE BOTTOM-RANKED COUNTRY ZIP CODES

The top health factor in 63560- Pollock is Premature Deaths with the top social factor as Childhood Poverty

The top health factor in 64646- Humphreys is Liver Disease with the top social factor as Health Care Worker Availability

The top health factor in 64645- Harris is Teen Pregnancy with the top social factor as Health Care Worker Availability

The top health factor in 64667- Newtown is Substance Use Disorder with the top social factor as Median Home Value

The top health factor in 63556- Milan is Teen Pregnancy with the top social factor as Multilingual Households

(County Health Rankings and Roadmaps, 2022)

Overall contributing behavioral risk factors for chronic conditions in county adults include the negative health behavior of smoking (24%; higher than state/national rates: 20%; 16.1%) (US News/Healthiest Communities, 2022; MU Extension, 2022). Smoking as a risk factor for heart disease is significantly higher than the state rate (MDHSS, 2019).

Self-reported smoking in the home and 'advised by a provider to quit' has been trending higher over the past few years, too (MDHSS, 2019).

Physical inactivity levels (25-39%) are also higher than state (24.8-30%) and national (22%) levels (County Health Rankings and Roadmaps, 2022; MU Extension, 2022). Only 43% of county adults reported access to exercise as compared to 70% statewide (County Health Rankings and Roadmaps, 2022). Activity limitations due to diagnosis of hypertension, asthma, and diabetes were also reported by county residents as a barrier to exercise with reported prevalence trending higher over the past few years (MDHSS, 2019).

Hand-in-hand with physical inactivity is obesity as a related behavioral risk factor. County obesity prevalence of 40.7% is higher than state/national levels (35-36%) (US News/Healthiest Communities, 2022; County Health Rankings and Roadmaps, 2022). County females, however, are less likely to be obese than county males (MU Extension, 2022). Other related behaviors include self-reported lack of sleep (county 37%; state 35%) (County Health Rankings and Roadmaps, 2022) and opioid drug claims (5.4%; state/national: 4.9%, 4.4%) (MU Extension, 2022). Also, many adults (37%) reported visiting a dentist more than 2 years ago (MDHSS, 2019).

Lack of positive preventive behaviors such as flu vaccination (39.1%; state 47.5%) and pneumonia vaccination (US News/Healthiest Communities, 2022) may also contribute to negative health outcomes. For example, only 36% of county Medicare enrollees recently received their annual flu vaccination (MU Extension, 2022).

Preventive screening rates are also low and significantly lower than state rates

are also low and significantly lower than state rates [no mammogram 49%; no pap 38%; no colonoscopy 49-57%]. Only 35% of women with Medicare recently received their annual mammogram screening (MU Extension, 2022).

For county youth, past 30-day self-reported use rates of tobacco (6.6%; state: 5.3%) and prescription drugs not prescribed by a doctor (7.5%; state: 6.3%) were a little higher than state rates. In addition, past year bullied at school (29.7%; state 26.2%) and in a fight (22.8%; state 15.9%) as well as past 30 day spreading lies/rumors at school (21.9%; state 16.2%) were also higher than state rates (MDMH, 2020).

CLINICAL

The county uninsured population (~9-15.2%) is higher than state (11.9%) and national (11%) percentages (US News/Healthiest Communities, 2022) with 10% uninsured children compared to 7% statewide (County Health Rankings and Roadmaps, 2022). Hospital bed availability/1k is better than state and national rates; however, primary care provider availability/1k (0.74) is lower than state (1.34) and national (0.97) rates (US News/Healthiest Communities, 2022). Even with health insurance, the county ratio of persons per PCP is 311:1, and persons per dentist is 6089:1 (ExploreMohealth.org, 2022). For senior citizens, the overall person to provider ratio is 630:1, higher than the state average (MU Extension, 2022).

This rural census tract is a HRSA-designated Health Professional Shortage Area for primary care, dental, and mental health as well as a medically underserved area (data.hrsa.gov, 2022). There is one

hospital in the county. Sullivan County Memorial Hospital, a General Acute Care Hospital (MO Hospital Profiles by County, 2022). There are no Federally-Qualified Health Centers or Look-Alike in the county (dataHRSA.gov, 2022). The Sullivan County Health Department, however, provides public health, environmental health, WIC, home health, vital records, and other health programs and services (Sullivan County Health Department/About, n.d.).

Other providers include:

- Ambulance/EMS services - Sullivan County Ambulance District
- Nine doctors and healthcare providers in Milan, MO
- Two dentists in Milan, MO
- Two home health services
- One hospice facility
- One mental health center
- One rehabilitation clinic
- One assisted living facility
- One physical therapy clinic

NUTRITION

Diabetes (11.5%) and obesity (40.7%) prevalence are higher than state and national rates.

Interestingly, household expenditures on fruits/vegetables are lower than state/national levels, and expenditures on soda and sugary beverages are higher than state/national levels (US News/Healthiest Communities, 2022).

On one hand, the food environment index score, overall rating of a healthy food environment, is high (19.23), the food insecurity rate (11%) and the child food insecurity rate (16.49%) are better than state/national rates (MU Extension). On the other hand, 27.3% of the population does not have access to a large grocery store (US News/Healthiest Communities, 2022), and 55% live in tracts with no healthy food outlets (MU Extension, 2022).

For students in the county, 66.3% receive free-reduced lunch (zipdatamaps, 2022).

ENVIRONMENTAL FACTORS

Air quality, drinking water quality, and lack of natural hazards rate higher than state/national levels. Only 11.3% of the county possesses a tree canopy, and only 1% is within a half mile of a park (US News/Healthiest Communities, 2022). For housing, although 33.6% of houses are vacant (higher than state/national rates) (US News/Healthiest Communities, 2022) and 2.53% are over-crowded (higher than state/national rates), the percentage of cost-burdened homes (over 50% of income) (6.45%) is lower than state/national rates (MU Extension, 2022).

BARRIERS/ACCESS GAPS

Sullivan County residents enjoy a clean natural environment, a generally safe community, relatively high employment rates, affordable housing; and county children graduate high school at high rates. Some demographic, economic, and personal health behavior trends in the county may affect population health outcomes and healthcare access, though.

A decreasing and aging population with many limited English-speaking households, low median income levels, and high uninsured present a challenge. Although most residents possess at least a high school diploma and are employed; many households, especially those with children, live below the poverty level.

Lower income has been associated with increased healthcare barriers, poorer clinical outcomes, and premature death (McMaughan et al., 2020). Premature death rate in the county is higher than the state rate, and life expectancy a little lower. Families with low incomes are also more likely to be uninsured (Kaiser Family Foundation/Key Facts about the Uninsured Population, 2020). Uninsured rates for adults and children are high in the county. With the aging population and low-income families,

Medicaid may be more heavily relied upon in the future. Uninsured also lack access to some healthcare (Kaiser Family Foundation/Key Facts about the Uninsured Population, 2020). In the county, utilization rates for preventive services such as vaccinations and screenings are lower than state rates. Even with insurance, only about one-third of Medicaid recipients received their annual flu vaccinations, and female Medicaid enrollees, their annual mammograms.

The chronic conditions of heart disease, cancer, unintentional injury, and stroke are the leading causes of death in the county. County residents participate in the risky health behaviors of smoking, physical inactivity, and obesity/poor nutrition at levels higher than both state and national residents, adding to the negative effects of lack of preventive healthcare. Those with chronic health conditions, especially multiple conditions, tend to delay necessary medical care (Ward, 2017). In the county, emergency room visits for heart disease and stroke were significantly higher than state rates. Although hospitals can be safety nets for the low-income/uninsured with chronic conditions, they have limited resources (Kaiser Family Foundation/Key Facts about the Uninsured Population, 2020). Overall, too, the county possesses limited healthcare resources. Sullivan County is a HRSA-designated medically underserved area and a health professional shortage area.

PRIMARY

The survey team defined the priority population and stakeholders, assessed resources needed for the process, defined success metrics, and considered assessment methodology. Surveys were identified as an appropriate method for soliciting community data for two reasons. **1.** It would allow for a large number of community members to provide direct feedback on the

perceived needs of the community. **2.** It was a cost-effective means to collect data from a large number of people. Hard copy surveys were distributed summer 2022-fall 2022 at the health department, other health/healthcare agencies and organizations, and businesses as well as at large community wellness events. E-copies/links were distributed through health department and other related agency/county social media outlets. See Appendix for survey copy.

SPECIFIC TARGET POPULATIONS

Just under 40% of respondents (n = 75, 39.1%) were from the 63556 zip code followed by the 63545 zip code (n = 19, 9.9%) and then the 64667 zip code (n = 18, 9.4%). Of the remaining respondents who reported zip codes, only six or fewer represented any other individual zip code.

RESPONSE RATE BY SETTING AND POPULATION

Five hundred eighty-seven paper surveys were distributed (573 English/14 Spanish), and the survey link was provided on local social media outlets. A total of 192 individuals submitted a paper survey or clicked on the link to complete an electronic survey. Of those 192, a total of 170 (88.5%) completed some or all of the survey.

Of those respondents who answered items addressing gender, ethnicity, and age, most were female (n = 106, 73.6%), most respondents were White (n = 111, 78.2%) followed by Hispanic or Latino (n = 28, 19.7%), and age ranges were diverse with 34.7% (n = 50) reporting ages 35-54, 22.0% (n = 32) reporting ages 65+, 20.1% (n = 29) reporting ages 55-64, 16.0% (n = 23) reporting ages 25-34, and 6.9% (n = 10) reporting ages 18-24. The most frequent number of adults (over 18) in a household was two (n = 76, 56.7%) followed by one (n = 37, 27.6%) and ranged from 0-4. The most frequent number of children in the household was zero (n = 36, 37.1%) followed by 2 (n = 21, 21.6%) and

ranged from 0-6. The majority of respondents (n = 100, 70.4%) reported having lived in the area for 15+ years. Of those reporting income ranges, the most frequent response was \$50,000-\$99,999 (n = 51, 40.2%), followed by \$20,001-\$49,999 (n = 46, 36.2%), followed by less than \$20,000 (n = 17, 13.4%), and the least number of respondents reported incomes of \$100,000+ (n = 13, 10.2%). Finally, most respondents indicated they lived in a house/condo they owned (n = 115, 79.9%). Primary data were collected by means of a survey distributed in paper format and electronically. Survey items included quantitative variables and solicited qualitative responses by way of open-ended questions.

STATISTICAL TESTS OR PROCESSES

Descriptive statistics were computed on all quantitative items as appropriate. Qualitative data were compiled into one document, and themes that emerged in the data were identified accordingly.

RESULTS

Respondents to the primary assessment identified the most pressing health problems in the community. Illicit drug abuse, ability to pay for care, cost of healthcare, and mental health concerns were reported as the biggest health concerns. Each of these items had more than 50 respondents selecting them. See **figure 1**.

Additionally, when asked about which conditions they had been told by a doctor that they have, respondents most frequently cited high blood pressure, high cholesterol, and obesity. See **figure 2**.

Finally, regarding health issues that were problems within their households within the past 12 months, not having enough money to pay the doctor/dentist/pharmacy and mental health concerns were the most often noted minor problems, and were also the top two major problems. See **Table 1**.

Figure 1

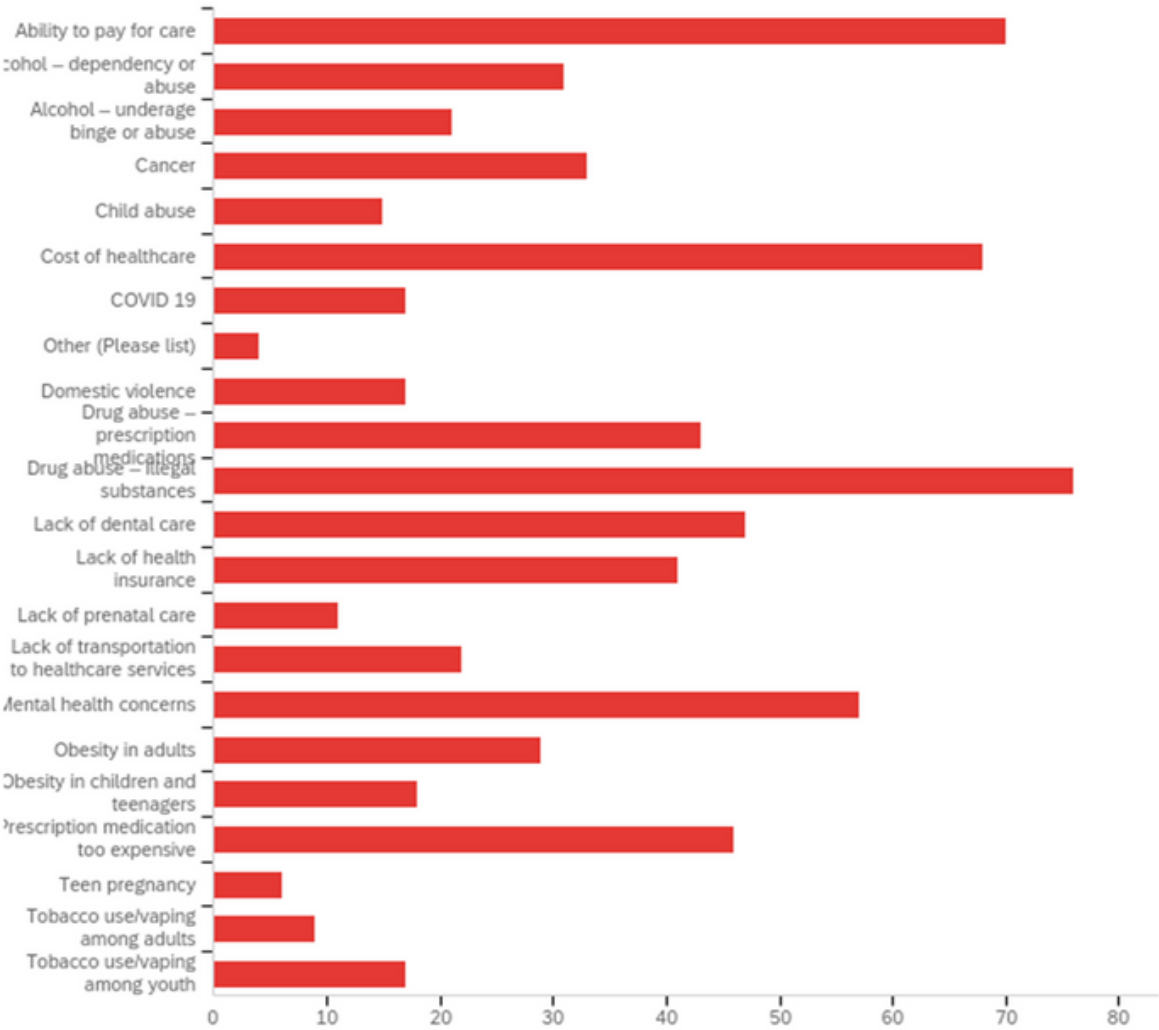


Figure 2

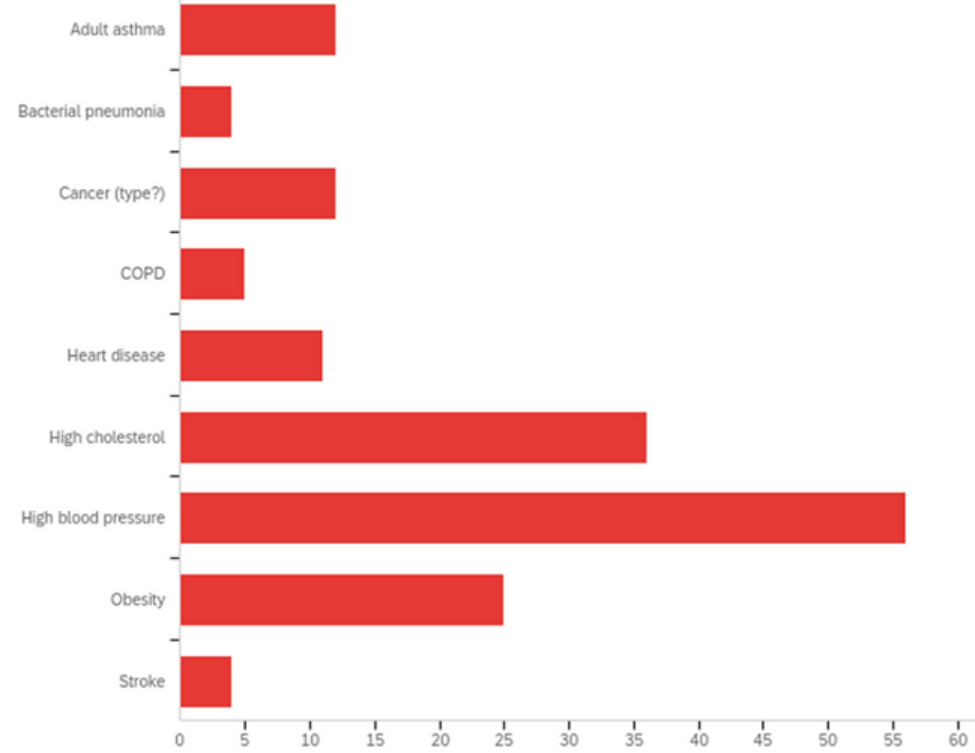


Table 1

Health Issue	Not a Problem %, n		Minor Problem %, n		Major Problem %, n		Total Responses
Adult substance abuse (alcohol or legal medications)	92.65%	126	2.94%	4	4.41%	6	136
Adult substance abuse (illegal drugs)	93.48%	129	2.17%	3	4.35%	6	138
Youth substance abuse (alcohol, drugs, etc.)	93.98%	125	3.01%	4	3.01%	4	133
Caring for an adult with disabilities	82.27%	116	9.93%	14	7.80%	11	141
Caring for a child with disabilities	93.43%	128	3.65%	5	2.92%	4	137
Child abuse	95.59%	130	2.21%	3	2.21%	3	136
Physical violence against adults	97.04%	131	1.48%	2	1.48%	2	135
Mental health concerns	72.26%	99	17.52%	24	10.22%	14	137
Not having enough money for food	78.83%	108	12.41%	17	8.76%	12	137
Not able to afford nutritious food (fresh vegetables and fruits)	76.09%	105	15.94%	22	7.97%	11	138
Not able to afford transportation	83.21%	114	13.87%	19	2.92%	4	137
Not having enough money to pay for housing	85.93%	116	9.63%	13	4.44%	6	135
Not having enough money to pay the doctor, dentist or pharmacy	63.31%	88	25.90%	36	10.79%	15	139
Not having enough money to pay for mental health counselor	77.78%	105	14.07%	19	8.15%	11	135
Use of tobacco/vaping products	82.71%	110	10.53%	14	6.77%	9	133
Not being able to find or afford after-school childcare	85.19%	115	10.37%	14	4.44%	6	135
Sexual abuse	98.52%	133	0.00%	0	1.48%	2	135
Teen pregnancy	97.04%	131	0.74%	1	2.22%	3	135
Other issues (list):	92.42%	61	4.55%	3	3.03%	2	66

SUMMARY OF PRIMARY DATA

ANALYSIS

A summary of primary data that is not previously presented is included below.

-

Respondents answered two questions regarding service needs within the community. Specific to needed medical services, counseling/mental health services (n= 69) was noted as the greatest need followed by adult primary care services (n = 62) See **figure 3**. Specific to needed health education services, drug abuse (n= 62) was noted as the greatest need followed by diet and exercise (n = 58). See **figure 4**.

Respondents were asked two open-ended questions about services and improvement in community health. The first questioned what services should Sullivan County Health Department provide that are not currently available. Responses were categorized into themes, and themes with 5 or more responses included mental health services (n = 10), doctors/specialists (specific specialists noted included: pediatrics, nerve doctor, dentists, and chiropractor) (n = 13), and unsure/not applicable (n = 13).

For the open-ended question that asked for ideas or suggestions for improving overall community health, response varied significantly, but two themes were identified with five or more responses and included improvements in healthy food availability/education (n = 5) (included but not limited to ideas such as community gardens to increase access to and education about fresh fruits and vegetables) and exercise (n = 5) (included but not limited to ideas such as YMCA, walking trails, better sidewalks for walking).

In response to an open-ended item asking about the biggest challenge they faced as an individual, two overwhelming themes emerged

and included stress/mental health (n = 15), money/economy/costs of goods/services (includes all types of services within and outside of healthcare) (n = 20). Similarly, when asked about the biggest challenge their family faced, the same two themes emerged: stress/mental health (n = 12) and money/economy/costs of goods/services (includes all types of services within and outside of healthcare) (n = 26). Finally, in regard to what is most concerning about children (under 18) in the household, other than not applicable/none/I don't know, the two most dominant themes were peer pressure (n = 7) and alcohol/tobacco/vaping/drugs (n = 7).

When asked if all family members living in the household had seen a healthcare professional at least once in the last year, 70.6% responded yes. The most common reason cited for those who had not done so was "does not have a medical condition that requires any care/I only seek healthcare when I need to".

Regarding emergency room use in the past 12 months, 57.9% (n = 66) reported that no household member had used the ER. For reasons the ER was used, most commonly it was for an injury needing immediate attention (n = 27, 23.7%), followed by an injury not needing immediate attention but the ER was convenient (n = 12, 10.5%), followed by an ongoing illness (n = 9, 7.9%)

Regarding how effective do you feel local resources are at caring for your community's healthcare needs, the most common response was "somewhat effective (n = 72, 45.6%). See **figure 5**.

In response to an item asking, how effective were Sullivan County resources in their response to the Covid-19 pandemic, nearly half of respondents answered "effective" (n = 70, 49.3%). See **figure 6**.

In response to an open-ended question on how Sullivan County resources could have improved its response to COVID-19, the overwhelming theme identified was nothing/did great with 20 respondents (some responses included N/A, nothing, did great/good/well). The only other theme that could be identified was vaccination with four respondents noting more education on vaccination and/or availability was needed.

Figure 3

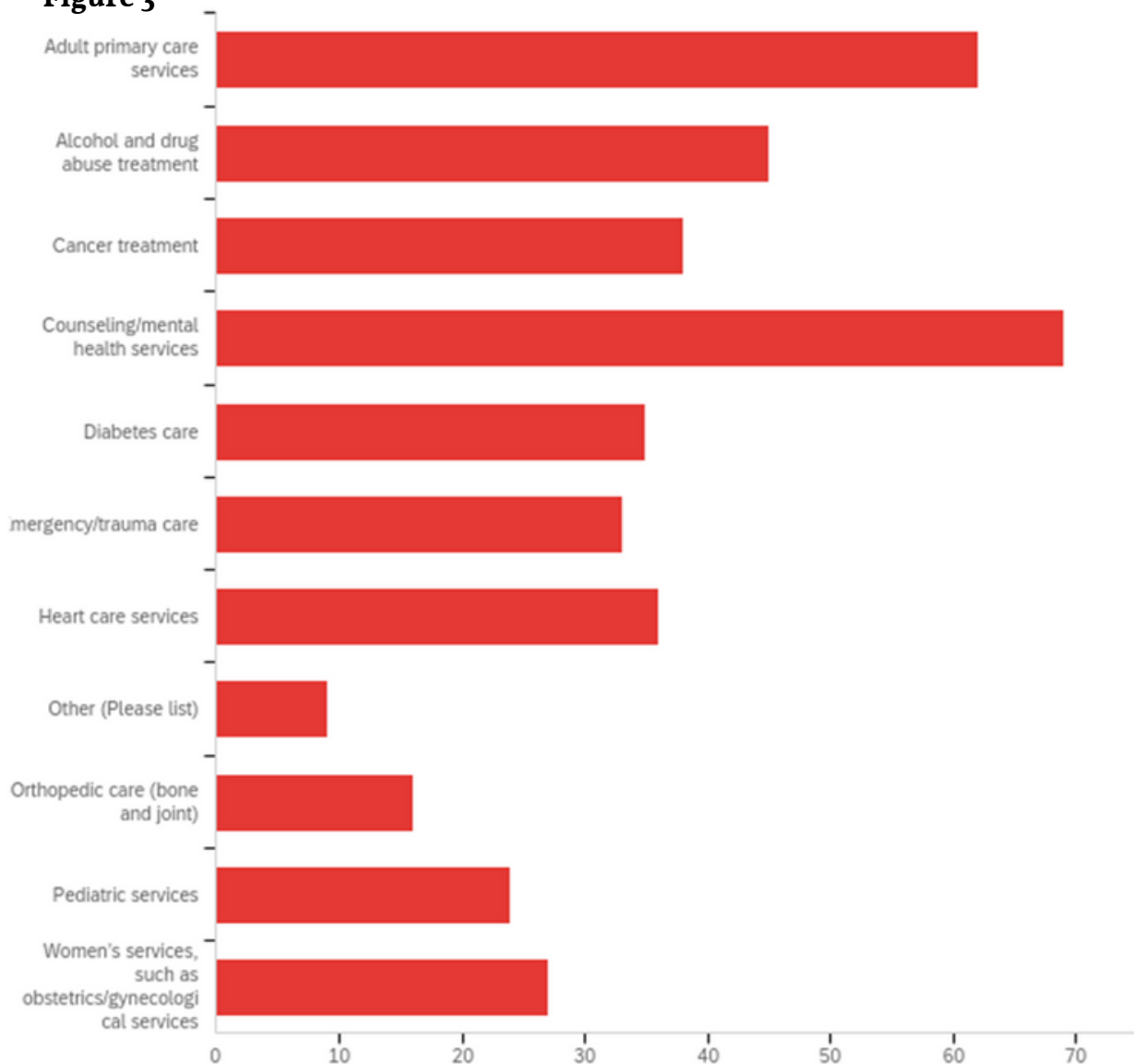


Figure 4

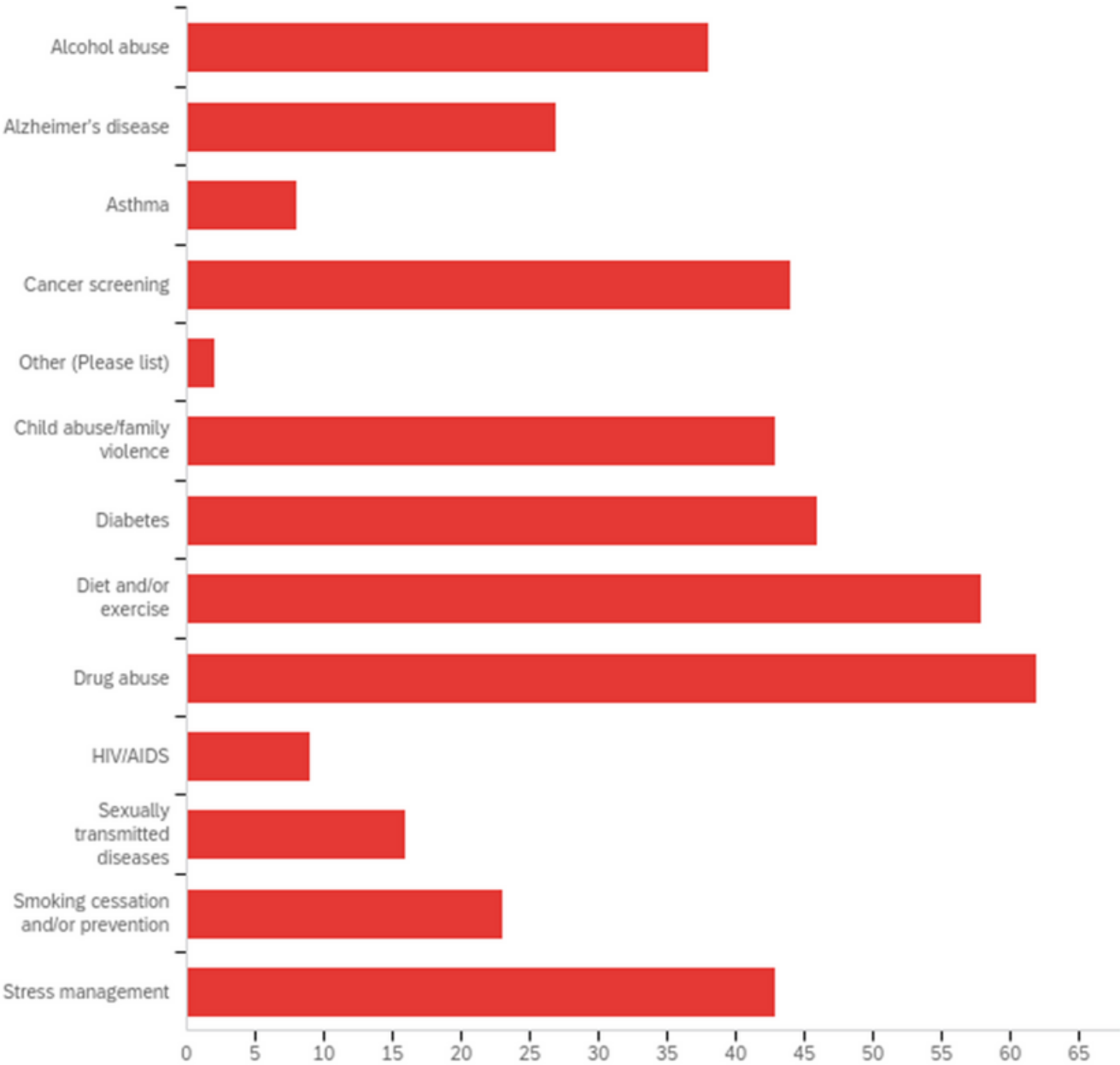


Figure 5

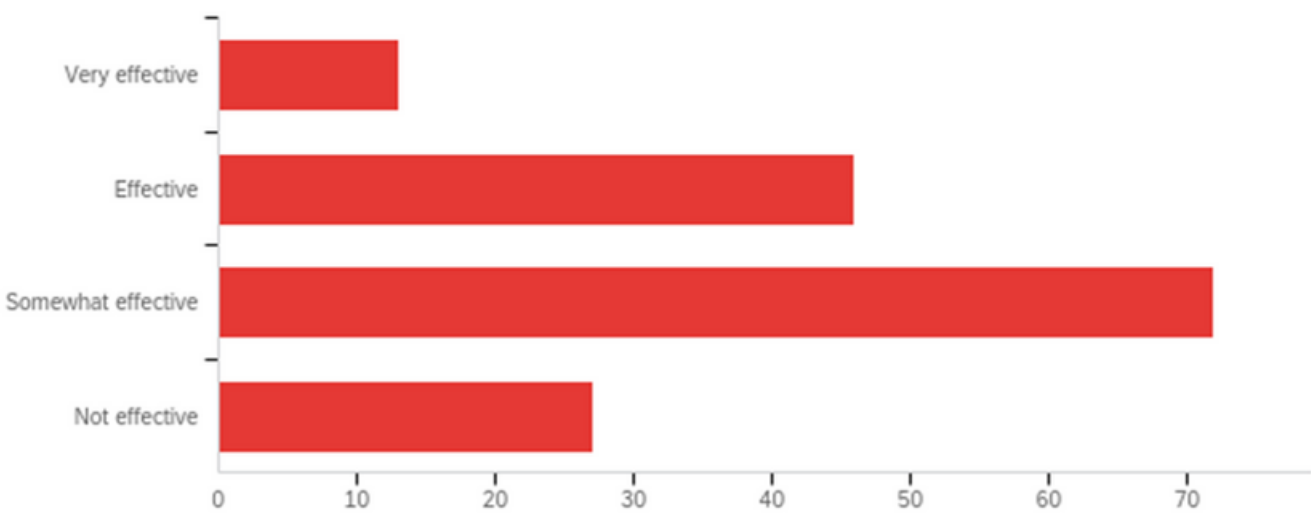
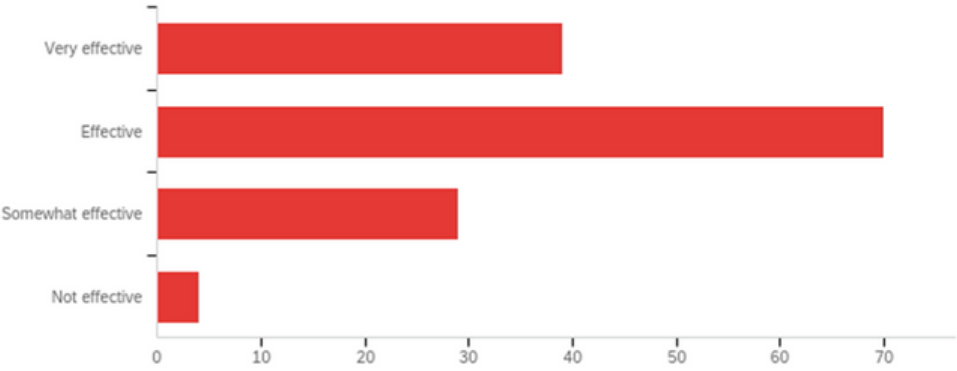


Figure 6



Appendix

Sullivan County, MO

1. What do you think are the most pressing health problems in your community?

Check up to five.

- | | |
|---|---|
| _____ Ability to pay for care | _____ Lack of health insurance |
| _____ Alcohol – dependency or abuse | _____ Lack of prenatal care |
| _____ Alcohol – underage binge or abuse | _____ Lack of transportation to healthcare services |
| _____ Cancer | _____ Mental health concerns |
| _____ Child abuse | _____ Obesity in adults |
| _____ Cost of healthcare | _____ Obesity in children and teenagers |
| _____ COVID 19 | _____ Prescription medication too expensive |
| _____ Domestic violence | _____ Teen pregnancy |
| _____ Drug abuse – prescription medications | _____ Tobacco use/vaping among adults |
| _____ Drug abuse – illegal substances | _____ Tobacco use/vaping among youth |
| _____ Lack of dental care | _____ Other (list): _____ |

2. How effective do you feel local resources are at caring for your community's healthcare needs?

☐ Very effective ☐ Effective ☐ Somewhat effective ☐ Not effective

3. What medical services are most needed in your community? **Check up to three.**

- | | |
|---|---|
| _____ Adult primary care services | _____ Emergency/trauma care |
| _____ Alcohol and drug abuse treatment | _____ Heart care services |
| _____ Cancer treatment | _____ Orthopedic care (bone and joint) |
| _____ Counseling/mental health services | _____ Pediatric services |
| _____ Diabetes care | _____ Women's services, such as obstetrics/gynecological services |
| _____ Other (list): _____ | |

4. What are the most important types of health education services needed in your community? **Check up to three.**

- | | |
|-----------------------------------|---|
| _____ Alcohol abuse | _____ Diet and/or exercise |
| _____ Alzheimer's disease | _____ Drug abuse |
| _____ Asthma | _____ HIV/AIDS |
| _____ Cancer screening | _____ Sexually transmitted diseases |
| _____ Child abuse/family violence | _____ Smoking cessation and/or prevention |
| _____ Diabetes | _____ Stress management |
| _____ Other (list): _____ | |

5. What health or community services should Sullivan County Health Department provide that currently are not available?

6. What ideas or suggestions do you have for improving the overall health of your community?
7. How effective were Sullivan County resources in their response to the Covid-19 pandemic?
- ☐ Very effective ☐ Effective ☐ Somewhat effective ☐ Not effective
8. How could Sullivan County resources have improved their response to the Covid-19 pandemic?

9. Have you ever been told by a doctor that you have one of the following conditions?

Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Adult asthma | <input type="checkbox"/> High cholesterol |
| <input type="checkbox"/> Bacterial pneumonia | <input type="checkbox"/> High blood pressure |
| <input type="checkbox"/> Cancer (type?): _____ | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> COPD | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Heart disease | |

10. How would you describe your housing situation? **Check only one.**

- ☐ Own a house or condo
- ☐ Rent a house, apartment or room
- ☐ Living in a group home
- ☐ Living temporarily with a friend or relative
- ☐ Multiple households sharing an apartment or house
- ☐ Living in a shelter
- ☐ Living in a motel
- ☐ Living in senior housing or assisted living
- ☐ Other (explain): _____

11. For each issue below, please check the box that best describes if it has been a problem in your household during the past 12 months.				
	Not a problem	Minor Problem	Major Problem	Don't Know
Adult substance abuse (alcohol or legal medications)				
Adult substance abuse (illegal drugs)				
Youth substance abuse (alcohol, drugs, etc.)				
Caring for an adult with disabilities				
Caring for a child with disabilities				
Child abuse				
Physical violence against adults				
Mental health concerns				
Not having enough money for food				
Not able to afford nutritious food (fresh vegetables and fruits)				
Not able to afford transportation				
Not having enough money to pay for housing				
Not having enough money to pay the doctor, dentist or pharmacy				
Not having enough money to pay for mental health counselor				
Use of tobacco/vaping products				
Not being able to find or afford after-school childcare				
Sexual abuse				
Teen pregnancy				
Other issues (list):				

12. What is the biggest challenge you face?

As an individual: _____

As a family: _____

13. What issues most concern you regarding young persons (under 18) in your household?

14. Has everyone in your family (those living in your household) seen a healthcare professional at least once in the last 12 months?

☐ Yes, everyone ☐ No, but some have ☐ No, no one has

15. If the last visit for a household member was more than 12 months ago, please check why. **Check all that apply.**

☐ Do not have medical condition that requires any care/I only seek healthcare when I need to

☐ Do not routinely receive any health screenings

☐ Could not schedule due to work or personal conflicts with normal business hours

☐ Could not afford the payments due, regardless of insurance status

☐ Could not arrange transportation

16. If you or a household member used a hospital emergency room in the past 12 months, was it due to:

☐ No one in my household used a hospital emergency room in the past 12 months

☐ An injury that required immediate attention

☐ An injury or illness that did not require immediate attention, but ER was the most convenient or only service available

☐ An ongoing illness

17. Please write your ZIP code: _____

18. What is your gender?

☐ Female

☐ Male

☐ Other

19. What is your age?

☐ 18-24

☐ 25-34

☐ 35-54

☐ 55-64

☐ 65+

20. What is your ethnicity?

☐ White

☐ Black or African American

☐ American Indian or Alaska Native

☐ Asian

☐ Hispanic or Latino

☐ Native Hawaiian & Other Pacific Is-

lander

☐ Other

☐ Choose not to answer

21. Including you, how many in your household are over 18 _____ Under 18 _____?

22. About how long have you lived in the area?

☐ Less than a year ☐ 1-5 years ☐ 5-15 years ☐ 15 + years

23. Counting all income sources from everyone in your household, what was the combined household income last year?

☐ Less than \$20,000 ☐ \$20,001 - \$49,999 ☐ \$50,000 - \$99,999 ☐ \$100,000 or more

Thank you for completing this survey.