2018 Community Health Needs Assessment

Executive Summary

Obici Healthcare Foundation Service Area
Western Tidewater, Virginia

Prepared for:

Obici Healthcare Foundation

By:

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Project Overview

Project Goals

This Community Health Needs Assessment is a systematic, data-driven approach to determining the health status, behaviors, and needs of residents in the service area of Obici Healthcare Foundation. Subsequently, this information may be used to inform decisions and guide efforts to improve community health and wellness.

A Community Health Needs Assessment provides information so that communities may identify issues of greatest concern and decide to commit resources to those areas, thereby making the greatest possible impact on community health status. This Community Health Needs Assessment will serve as a tool toward reaching three basic goals:

- **To improve residents' health status, increase their life spans, and elevate their overall quality of life.** A healthy community is not only one where its residents suffer little from physical and mental illness, but also one where its residents enjoy a high quality of life.
- **To reduce the health disparities among residents.** By gathering demographic information along with health status and behavior data, it will be possible to identify population segments that are most at-risk for various diseases and injuries. Intervention plans aimed at targeting these individuals may then be developed to combat some of the socio-economic factors that historically have had a negative impact on residents' health.
- **To increase accessibility to preventive services for all community residents.** More accessible preventive services will prove beneficial in accomplishing the first goal (improving health status, increasing life spans, and elevating the quality of life), as well as lowering the costs associated with caring for late-stage diseases resulting from a lack of preventive care.

This assessment was conducted on behalf of Obici Healthcare Foundation by Professional Research Consultants, Inc. (PRC). PRC is a nationally recognized healthcare consulting firm with extensive experience conducting Community Health Needs Assessments in hundreds of communities across the United States since 1994.

Methodology

This assessment incorporates data from both quantitative and qualitative sources. Quantitative data input includes primary research (the PRC Community Health Survey) and secondary research (vital statistics and other existing health-related data); these quantitative components allow for comparison to benchmark data at the state and national levels. Qualitative data input includes primary research gathered through an Online Key Informant Survey.

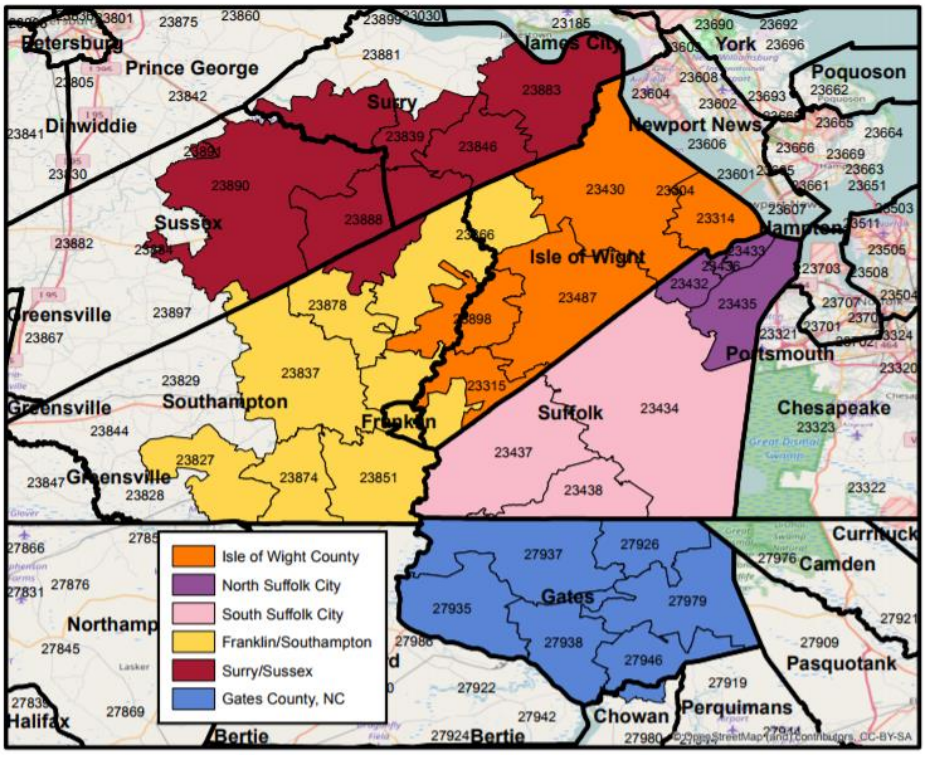
PRC Community Health Survey

Survey Instrument

The survey instrument used for this study is based largely on the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS), as well as various other public health surveys and customized questions addressing gaps in indicator data relative to health promotion and disease prevention objectives and other recognized health issues. The final survey instrument was developed by Obici Healthcare Foundation and PRC.

Community Defined for This Assessment

The study area for the survey effort (referred to as the "OHF Service Area") is defined as the combined area incorporating Isle of Wight County, Suffolk City, Franklin City, portions of Southampton County, portions of Surry and Sussex counties, and Gates County in North Carolina. This community definition is illustrated in the following map.



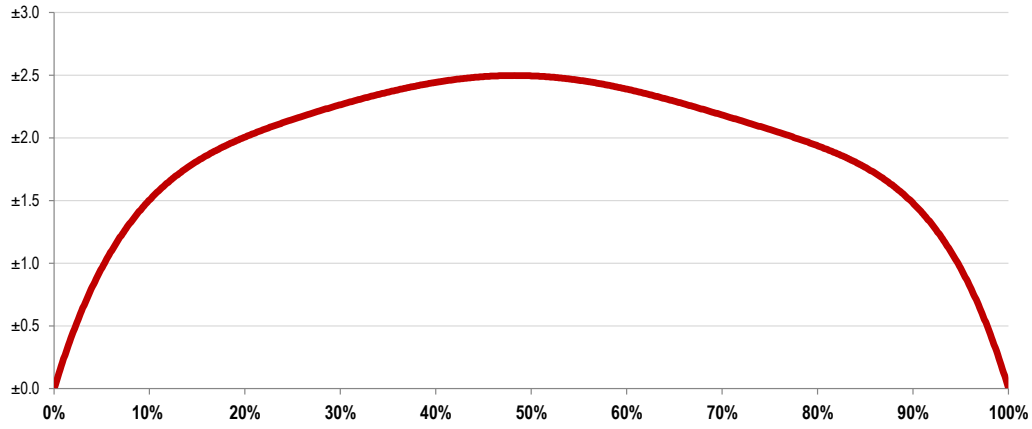
Sample Approach & Design

A precise and carefully executed methodology is critical in asserting the validity of the results gathered in the PRC Community Health Survey. Thus, to ensure the best representation of the population surveyed, a telephone interview methodology — one that incorporates both landline and cell phone interviews — was employed. The primary advantages of telephone interviewing are timeliness, efficiency, and random-selection capabilities.

The sample design used for this effort consisted of a stratified random sample of 1,500 individuals age 18 and older in the OHF Service Area, including 350 each in Isle of Wight County and North Suffolk City; 500 in South Suffolk City; and 100 each in Franklin City/Southampton County, Surry/Sussex counties, and Gates County (NC). Once the interviews were completed, these were weighted in proportion to the actual population distribution so as to appropriately represent the OHF Service Area as a whole. All administration of the surveys, data collection, and data analysis was conducted by PRC.

For statistical purposes, the maximum rate of error associated with a sample size of 1,500 respondents is ±2.5% at the 95 percent confidence level.

Expected Error Ranges for a Sample of 1,500 Respondents at the 95 Percent Level of Confidence



Note:
- The "response rate" (the percentage of a population giving a particular response) determines the error rate associated with that response. A "95 percent level of confidence" indicates that responses would fall within the expected error range on 95 out of 100 trials.

Examples:
- If 10% of the sample of 1,500 respondents answered a certain question with a "yes," it can be asserted that between 8.5% and 11.5% (10% ± 1.5%) of the total population would offer this response.
- If 50% of respondents said "yes," one could be certain with a 95 percent level of confidence that between 47.5% and 52.5% (50% ± 2.5%) of the total population would respond "yes" if asked this question.

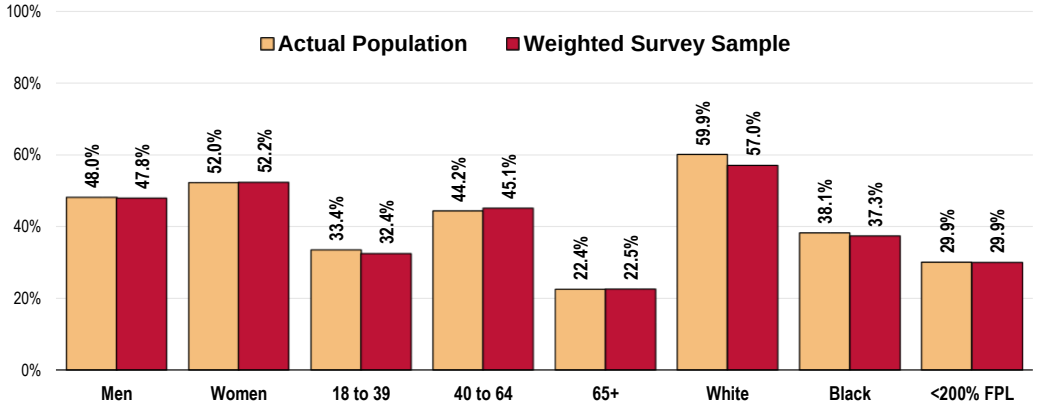
Sample Characteristics

To accurately represent the population studied, PRC strives to minimize bias through application of a proven telephone methodology and random-selection techniques. While this random sampling of the population produces a highly representative sample, it is a common and preferred practice to “weight” the raw data to improve this representativeness even further. This is accomplished by adjusting the results of a random sample to match the

geographic distribution and demographic characteristics of the population surveyed (poststratification), so as to eliminate any naturally occurring bias. Specifically, once the raw data are gathered, respondents are examined by key demographic characteristics (namely sex, age, race, ethnicity, and poverty status), and a statistical application package applies weighting variables that produce a sample which more closely matches the population for these characteristics. Thus, while the integrity of each individual's responses is maintained, one respondent's responses may contribute to the whole the same weight as, for example, 1.1 respondents. Another respondent, whose demographic characteristics may have been slightly oversampled, may contribute the same weight as 0.9 respondents.

The following chart outlines the characteristics of the OHF Service Area sample for key demographic variables, compared to actual population characteristics revealed in census data. [Note that the sample consisted solely of area residents age 18 and older; data on children were given by proxy by the person most responsible for that child's healthcare needs, and these children are not represented demographically in this chart.]

Population & Survey Sample Characteristics
(OHF Service Area, 2017)



Sources:
- Census 2010, Summary File 3 (SF 3). US Census Bureau.
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc.

The sample design and the quality control procedures used in the data collection ensure that the sample is representative. Thus, the findings may be generalized to the total population of community members in the defined area with a high degree of confidence.

Online Key Informant Survey

To solicit input from key informants, those individuals who have a broad interest in the health of the community, an Online Key Informant Survey also was implemented as part of this process. A list of recommended participants was provided by Obici Healthcare Foundation; this list included names and contact information for physicians, public health representatives, other health providers, social services providers, educators, and a variety of other church and

community leaders. Potential participants were chosen because of their ability to identify primary concerns of the populations with whom they work, as well as of the community overall.

Key informants were contacted by email, introducing the purpose of the survey and providing a link to take the survey online; reminder emails were sent as needed to increase participation. In all, 67 community stakeholders took part in the Online Key Informant Survey, as outlined below:

Online Key Informant Survey Participation		
Key Informant Type	**Number Invited**	**Number Participating**
Church Leader	8	1
Community Leader	95	25
Educator	31	10
Other Health Provider	37	18
Physician	1	1
Public Health Representative	15	8
Social Services Provider	8	4

Final participation included representatives of the organizations outlined below.

- Albemarle Regional Health Services
- Alzheimer's Association
- Bon Secours Health System
- Catholic Charities of Eastern Virginia
- CCEVA, Obici Life Coach Program
- City of Franklin
- City of Suffolk
- County Government
- Cross Management Corporation
  Eastern Virginia Medical School
  Endocrine and Metabolic Disorders
- Eastern Virginia Medical School
  Strelitz Diabetes Center of Western Tidewater
- ForKids, Inc.
- Franklin City Health Department
  Medical Assistance Program
- Franklin Southampton Economic Development, Inc.
- Gates County Aging and Adult Services
- Girls on the Run Hampton Roads
- Healthy Suffolk
- Horizon Health Services, Inc.
- Isle of Wight County Schools
- Lakeland High School
- Local Government Commission
- Nursing CAP, Inc.
- Rx Partnership (RxP)
- School System
- Sentara Obici Hospital
- Smart Beginnings Western Tidewater
- Southampton County Board of Supervisors

- Southampton County Public Schools
- Southampton County, Department of Social Services
- Southampton Memorial Hospital
- Suffolk Christian Church
- Suffolk City Council
- Suffolk Department of Social Services
- Suffolk Family YMCA
- Suffolk Meals on Wheels
- Surry County Public Schools
- Surry Department of Social Services
- Sussex County Middle School, Principal
- Western Tidewater Free Clinic
- Western Tidewater Health District

Through this process, input was gathered from several individuals whose organizations work with low-income, minority, or other medically underserved populations.

Minority/medically underserved populations represented:

> *African-Americans, children/adolescents, disabled, elderly, Hispanics, HIV/AIDS, homeless, low-income, Medicare/Medicaid, mentally ill, pregnant, rural population, substance abusers, uninsured/underinsured.*

In the online survey, key informants were asked to rate the degree to which various health issues are a problem in their own community. Follow-up questions asked them to describe why they identify problem areas as such and how these might better be addressed. Results of their ratings, as well as their verbatim comments, are included throughout the full Community Health Needs Assessment report as they relate to the various other data presented.

NOTE: These findings represent qualitative rather than quantitative data. The Online Key Informant Survey was designed to gather input regarding participants' opinions and perceptions of the health needs of the residents in the area. Thus, these findings are based on perceptions and not facts.

Public Health, Vital Statistics & Other Data

A variety of existing (secondary) data sources was consulted to complement the research quality of this Community Health Needs Assessment. Data for the OHF Service Area (roughly the Western Tidewater region) were obtained from the following sources (specific citations are included with the graphs throughout the full Community Health Needs Assessment report):

- Center for Applied Research and Environmental Systems (CARES)
- Centers for Disease Control & Prevention, Office of Infectious Disease, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
- Centers for Disease Control & Prevention, Office of Public Health Science Services, Center for Surveillance, Epidemiology and Laboratory Services, Division of Health Informatics and Surveillance (DHIS)
- Centers for Disease Control & Prevention, Office of Public Health Science Services, National Center for Health Statistics
- Community Commons
- ESRI ArcGIS Map Gallery
- National Cancer Institute, State Cancer Profiles
- OpenStreetMap (OSM)
- Sentara Obici Hospital Discharge Data
- US Census Bureau, American Community Survey
- US Census Bureau, County Business Patterns
- US Census Bureau, Decennial Census
- US Department of Agriculture, Economic Research Service
- US Department of Health & Human Services
- US Department of Health & Human Services, Health Resources and Services Administration (HRSA)
- US Department of Justice, Federal Bureau of Investigation
- US Department of Labor, Bureau of Labor Statistics

Note that secondary data reflect the entirety of the cities and counties that encompass the OHF Service Area.

Benchmark Data

Virginia and North Carolina Risk Factor Data

Statewide risk factor data are provided where available as an additional benchmark against which to compare local survey findings; these data represent the most recent *BRFSS (Behavioral Risk Factor Surveillance System) Prevalence and Trends Data* published online by the Centers for Disease Control and Prevention. State-level vital statistics are also provided for comparison of secondary data indicators.

Nationwide Risk Factor Data

Nationwide risk factor data, which are also provided in comparison charts, are taken from the *2017 PRC National Health Survey*; the methodological approach for the national study is similar to that employed in this assessment, and these data may be generalized to the US population with a high degree of confidence. National-level vital statistics are also provided for comparison of secondary data indicators.

Healthy People 2020

Healthy People provides science-based, 10-year national objectives for improving the health of all Americans. For three decades, Healthy People has established benchmarks and monitored progress over time in order to:

- Encourage collaborations across communities and sectors.
- Empower individuals toward making informed health decisions.
- Measure the impact of prevention activities.

Healthy People strives to:

- Identify nationwide health improvement priorities.
- Increase public awareness and understanding of the determinants of health, disease, and disability and the opportunities for progress.
- Provide measurable objectives and goals that are applicable at the national, State, and local levels.
- Engage multiple sectors to take actions to strengthen policies and improve practices that are driven by the best available evidence and knowledge.
- Identify critical research, evaluation, and data collection needs.

Virginia Health Opportunity Index (HOI)

The Virginia Health Opportunity Index (HOI) is a product of the Virginia Department of Health Office of Minority Health and Health Equity that "scores" each census tract in Virginia as to the level of opportunity that exists for its residents. The HOI consists of 13 indicators that act as building blocks; each indicator is conceived as an indication of the opportunity to live a long and healthy life in each area. These indicators were chosen based on social determinants of health and are organized into these four profiles of opportunity: **Economic Opportunity Profile** (including the indicators of air quality, population churning, population density, and walkability), **Consumer Opportunity Profile** (including affordability, education, food accessibility, and material deprivation), **Community Environment Profile** (employment accessibility, income inequality, and job participation), and **Wellness Opportunity Profile** (access to care and segregation). The data are then combined into a single index of information in an interactive, web-based format.

The HOI is remarkably predictive of health outcomes and, as such, plays a complementary role to this Community Health Needs Assessment. Where applicable and possible, HOI-related charts are included in an effort to provide a more robust picture of community health in the Obici Healthcare Foundation Service Area.

Throughout the full Community Health Needs Assessment report, PRC highlights select survey findings, segmented by service area geographies that share similar opportunity levels as determined by the HOI. This will demonstrate where correlations exist (and don't exist) with these social determinant groupings.

Determining Significance

Differences noted in this report represent those determined to be significant. For survey-derived indicators (which are subject to sampling error), statistical significance is determined based on confidence intervals (at the 95 percent confidence level), using question-specific samples and response rates. For the purpose of this report, "significance" of secondary data indicators (which do not carry sampling error but might be subject to reporting error) is determined by a 15% variation from the comparative measure.

Summary of Findings

Significant Health Needs of the Community

The following "Areas of Opportunity" represent the significant health needs of the community, based on the information gathered through this Community Health Needs Assessment and the guidelines set forth in Healthy People 2020. From these data, opportunities for health improvement exist in the area with regard to the following health issues (see also the summary tables presented in the following section).

The Areas of Opportunity were determined after consideration of various criteria, including: standing in comparison with benchmark data (particularly national data); the preponderance of significant findings within topic areas; the magnitude of the issue in terms of the number of persons affected; and the potential health impact of a given issue. These also take into account those issues of greatest concern to the community stakeholders (key informants) giving input to this process.

Areas of Opportunity Identified Through This Assessment	
Access to Healthcare Services	• Primary Care Physician Ratio • Access to the Internet for Personal Use • Emergency Room Utilization
Cancer	• Cancer is a leading cause of death. • Cancer Deaths ○ Including Prostate Cancer and Female Breast Cancer Deaths • Cancer (Non-Skin) Prevalence • Cervical Cancer Screening [Age 21-65]
Diabetes	• Diabetes Deaths • Diabetes Prevalence • Prevalence of Borderline/Pre-Diabetes • *Diabetes ranked as a top concern in the Online Key Informant Survey.*
Heart Disease & Stroke	• Cardiovascular disease is a leading cause of death. • Stroke Deaths • High Blood Pressure Prevalence • High Blood Cholesterol Prevalence • Overall Cardiovascular Risk • *Heart Disease & Stroke ranked as a top concern in the Online Key Informant Survey.*
Infant Health & Family Planning	• Low-Weight Births • Infant Mortality • Teen Births
Injury & Violence	• Motor Vehicle Crash Deaths
Kidney Disease	• Kidney Disease Deaths • Kidney Disease Prevalence

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Areas of Opportunity (continued)	
Mental Health	• Seeking Professional Help • *Mental Health ranked as a top concern in the Online Key Informant Survey.*
Nutrition, Physical Activity, & Weight	• Overweight & Obesity [Adults] • Sugar-Sweetened Beverages • Low Food Access • Trying to Lose Weight [Overweight Adults] • Access to Recreation/Fitness Facilities • *Nutrition, Physical Activity & Weight ranked as a top concern in the Online Key Informant Survey.*
Oral Health	• *Oral Health ranked as a top concern in the Online Key Informant Survey.*
Potentially Disabling Conditions	• Multiple Chronic Conditions • Arthritis/Rheumatism Prevalence [Age 50+] • Caregiver
Respiratory Diseases	• Asthma Prevalence [Adults] • Chronic Obstructive Pulmonary Disease (COPD) Prevalence • Flu Vaccination [Age 65+] • Pneumonia Vaccination [Age 65+]
Sexually Transmitted Diseases	• Gonorrhea Incidence • Chlamydia Incidence
Substance Abuse	• Sought Help for Alcohol/Drug Issues • *Substance Abuse ranked as a top concern in the Online Key Informant Survey.*

Summary Tables: Comparisons With Benchmark Data

The following tables provide an overview of indicators in the OHF Service Area, including comparisons among the individual city/county areas. These data are grouped to correspond with the Focus Areas presented in Healthy People 2020.

Reading the Summary Tables

Survey Data Indicators: Note that survey data reflect the ZIP Code-defined OHF Service Area.

Other (Secondary) Data Indicators: Secondary data reflect city/county-level data.

In the following charts, OHF Service Area results are shown in the larger, blue column. For survey-derived indicators, this column represents the ZIP Code–defined Obici Healthcare Foundation service area; for data from secondary sources, this column represents findings for the combined cities/counties as a whole. *Tip: Indicator labels beginning with a "%" symbol are taken from the PRC Community Health Survey; the remaining indicators are taken from secondary data sources.*

The green columns [to the left of the OHF Service Area column] provide comparisons among the 6 city/county areas (and the combined Suffolk City), identifying differences for each as "better than" (☼), "worse than" (☠), or "similar to" (☁) the combined opposing areas.

The columns to the right of the OHF Service Area column provide comparisons between local data and any available state and national findings, and Healthy People 2020 targets. Again, symbols indicate whether the OHF Service Area compares favorably (☼), unfavorably (☠), or comparably (☁) to these external data.

Note that blank table cells signify that data are not available or are not reliable for that area and/or for that indicator.

Social Determinants	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
Linguistically Isolated Population (Percent)	0.2			0.4	0.0	0.0	0.5	0.3	2.8	3.0	4.6	
Population in Poverty (Percent)	11.7			11.6	17.5	16.7	14.2	13.0	11.5	17.4	15.5	
Population Below 200% FPL (Percent)	24.1			27.1	38.9	38.6	38.4	29.3	26.8	38.5	34.3	
Children Below 200% FPL (Percent)	34.6			38.1	48.4	51.7	57.3	40.0	33.8	48.9	43.9	
No High School Diploma (Age 25+, Percent)	13.7			12.5	19.6	25.5	15.4	15.5	11.7	14.2	13.4	
Unemployment Rate (Age 16+, Percent)	4.3			4.7	4.5	6.0	5.2	4.7	4.0	5.1	4.9	
% Worry/Stress Over Rent/Mortgage in Past Year	21.1	23.9	24.8	24.5	30.3	18.8	21.3	23.8			30.8	
% Low Health Literacy	17.9	14.4	18.7	17.1	27.5	14.1	17.3	18.4			23.3	

Social Determinants (continued)	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% Have Access to the Internet	91.5	91.2	85.5	87.6	78.4	77.3	82.6	86.3			91.9	
% Have a Smartphone	81.5	85.6	79.2	81.6	69.4	68.8	63.6	77.8			72.2	

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

Overall Health	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% "Fair/Poor" Overall Health	16.0	15.9	20.0	18.5	17.4	25.2	16.3	18.1	15.2	19.3	18.1	
% Multiple Chronic Conditions	63.3	67.0	66.1	66.4	70.0	84.3	62.3	67.1			56.8	
% Activity Limitations	25.9	28.0	23.6	25.3	13.1	22.8	26.8	23.9	17.6	21.6	25.0	
% Caregiver to a Friend/Family Member	25.2	26.2	28.3	27.5	22.1	13.6	22.2	25.0			20.8	

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

Access to Health Services	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% [Age 18-64] Lack Health Insurance	7.7	8.3	8.0	8.1	22.0	5.7	11.5	9.8	15.8	19.1	13.7	0.0
% Difficulty Accessing Healthcare in Past Year (Composite)	35.2	39.0	38.2	38.5	42.8	45.2	39.8	38.8			43.2	
% Difficulty Finding Physician in Past Year	6.3	13.3	6.8	9.3	11.5	10.2	5.5	8.6			13.4	
% Difficulty Getting Appointment in Past Year	17.8	13.1	15.2	14.4	17.9	18.8	13.8	15.9			17.5	
% Cost Prevented Physician Visit in Past Year	7.8	10.0	9.9	9.9	17.2	8.7	16.3	10.7			15.4	
% Transportation Hindered Dr Visit in Past Year	4.6	4.0	7.3	6.1	6.5	10.3	7.1	6.1			8.3	
% Inconvenient Hrs Prevented Dr Visit in Past Year	15.1	9.6	7.6	8.3	18.0	15.1	9.2	11.6			12.5	
% Language/Culture Prevented Care in Past Year	0.8	0.2	0.2	0.2	1.5	1.6	1.4	0.7			1.2	
% Cost Prevented Getting Prescription in Past Year	6.3	16.9	15.8	16.3	19.4	10.4	14.7	13.8			14.9	
% Skipped Prescription Doses to Save Costs	7.0	16.9	10.2	12.7	13.4	20.0	17.1	12.3			15.3	

Access to Health Services (continued)	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% Difficulty Getting Child's Healthcare in Past Year	3.3	2.9	1.4	2.1				2.3			5.6	
Primary Care Doctors per 100,000	55.5			96.8	52.7	21.6	8.7	72.6	86.0	80.0	87.8	
% Have a Specific Source of Ongoing Care	82.9	78.5	81.9	80.7	71.9	68.7	82.1	79.4			74.0	95.0
% Have Had Routine Checkup in Past Year	73.5	77.0	80.0	78.9	80.4	83.4	78.4	78.1	75.0	73.5	68.3	
% Child Has Had Checkup in Past Year	84.3	83.5	98.8	91.8				87.9			87.1	
% Two or More ER Visits in Past Year	8.1	11.6	13.7	13.0	9.5	25.1	9.4	11.9			9.3	
% Rate Local Healthcare "Fair/Poor"	11.1	9.6	7.2	8.0	12.4	24.6	23.8	11.6			16.2	

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

Cancer	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
Cancer (Age-Adjusted Death Rate)	158.3			177.0	174.8	204.5	158.1	173.8	161.0	167.2	161.0	161.4
Lung Cancer (Age-Adjusted Death Rate)								44.2	42.2	47.6	42.0	45.5
Prostate Cancer (Age-Adjusted Death Rate)								31.5	19.4	20.0	19.0	21.8
Female Breast Cancer (Age-Adjusted Death Rate)								29.0	21.7	21.0	20.6	20.7
Colorectal Cancer (Age-Adjusted Death Rate)								14.5	14.0	14.0	14.4	14.5
Female Breast Cancer Incidence Rate	143.3			140.7	141.9	122.2	82.8	139.5	125.5	128.4	123.4	
Prostate Cancer Incidence Rate	117.2			140.9	141.8	153.0	112.2	137.0	116.5	130.2	123.4	
Lung Cancer Incidence Rate	63.0			68.3	69.6	79.1	51.8	68.7	62.1	70.7	62.6	
Colorectal Cancer Incidence Rate	35.3			44.8	44.4	47.9	32.1	42.9	37.5	38.4	40.6	
% Cancer (Other Than Skin)	8.6	9.0	9.7	9.4	5.0	4.7	16.5	8.9	6.2	7.3	7.1	

Cancer (continued)	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% Skin Cancer	9.7	7.9	5.7	6.5	6.5	2.7	3.6	6.8	5.7	7.1	8.5	
% [Women 50-74] Mammogram in Past 2 Years	78.1	89.1	84.6	86.4			81.4	82.4	80.0	80.7	77.0	81.1
% [Women 21-65] Pap Smear in Past 3 Years	71.8	79.4	85.3	83.1				81.2	85.2	85.8	73.5	93.0
% [Age 50-75] Colorectal Cancer Screening	83.1	87.7	85.7	86.4	71.7	83.8	91.9	84.2	69.1	70.8	76.4	70.5

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

Dementias, Including Alzheimer's Disease	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
Alzheimer's Disease (Age-Adjusted Death Rate)	19.4			37.4	17.0			28.5	22.0	31.0	26.1	

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

Diabetes	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
Diabetes (Age-Adjusted Death Rate)	24.7			29.0	20.5	38.2	43.2	28.5	19.6	23.0	21.1	20.5
% Diabetes/High Blood Sugar	17.6	18.0	16.6	17.1	22.6	27.2	14.3	18.4	10.4	10.7	13.3	
% Borderline/Pre-Diabetes	14.3	12.2	11.3	11.6	12.7	11.2	8.3	12.1			9.5	
% [Non-Diabetes] Blood Sugar Tested in Past 3 Years	62.3	60.3	57.7	58.7	53.6	58.4	58.0	58.9			50.0	

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

Heart Disease & Stroke	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
Diseases of the Heart (Age-Adjusted Death Rate)	166.4			193.0	157.7	212.0	156.4	180.2	155.8	162.1	168.0	156.9
Stroke (Age-Adjusted Death Rate)	32.6			41.4	61.3	60.9		44.2	37.9	43.4	36.8	34.8
% Heart Disease (Heart Attack, Angina, Coronary Disease)	6.6	4.4	6.5	5.7	6.5	11.5	15.7	7.2			8.0	

Heart Disease & Stroke (continued)	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% Stroke	3.8	3.6	1.7	2.4	4.5	4.2	3.9	3.2	3.1	3.7	4.6	
% Blood Pressure Checked in Past 2 Years	93.4	97.0	97.9	97.6	92.8	93.7	93.5	95.5			90.4	92.6
% Told Have High Blood Pressure (Ever)	42.5	43.6	46.7	45.5	65.6	52.8	42.7	47.6	33.2	35.2	37.0	26.9
% [HBP] Taking Action to Control High Blood Pressure	95.5	95.3	92.0	93.1	82.2			92.5			93.8	
% Cholesterol Checked in Past 5 Years	88.8	95.8	93.6	94.4	91.3	92.8	88.5	92.1	81.1	81.7	85.1	82.1
% Told Have High Cholesterol (Ever)	39.9	44.4	39.0	41.0	31.0	48.0	44.8	40.3			36.2	13.5
% [HBC] Taking Action to Control High Blood Cholesterol	85.6	84.8	86.0	85.5			90.2	87.5			87.3	
% 1+ Cardiovascular Risk Factor	86.4	91.1	88.8	89.7	98.7	96.9	86.8	90.3			87.2	

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

HIV	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
HIV/AIDS (Age-Adjusted Death Rate)								3.0	1.9	3.1	2.7	3.3
HIV Prevalence Rate	160.6			334.2	247.1	397.2	131.1	289.6	314.5	326.3	353.2	22.1

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better similar worse

Immunization & Infectious Diseases	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% [Age 65+] Flu Vaccine in Past Year	77.8	77.6	63.2	68.3		55.6		68.3	61.5	70.5	76.8	70.0
% [High-Risk 18-64] Flu Vaccine in Past Year	42.5	58.3	76.4	69.4				57.7			55.7	70.0
% [Age 65+] Pneumonia Vaccine Ever	77.8	86.7	71.3	76.8		71.5		75.9	74.3	73.6	82.7	90.0
% [High-Risk 18-64] Pneumonia Vaccine Ever	40.0	53.5	59.3	57.1				47.0			39.9	60.0

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better similar worse

Infant Health & Family Planning	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
No Prenatal Care in First Trimester (Percent)	13.1			14.2	22.4	19.1		15.8	13.2			22.1
Low Birthweight Births (Percent)	8.1			9.9	11.3	11.3	10.1	9.9	8.3	9.1	8.2	7.8
Infant Death Rate	7.1			7.6	13.4	10.6		8.7	7.1	6.1	6.5	6.0
Births to Teenagers Under Age 20 (Percent)	8.9			7.9	7.6	14.6		9.0	7.3			
Births to Unwed Mothers (Percent)	36.9			37.9	57.4	59.9		42.7	34.6			

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better similar worse

Injury & Violence	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
Unintentional Injury (Age-Adjusted Death Rate)	34.8			34.6	56.5		59.3	39.2	37.1	45.0	41.0	36.4
Motor Vehicle Crashes (Age-Adjusted Death Rate)								12.9	8.8	13.6	10.6	12.4
[65+] Falls (Age-Adjusted Death Rate)								45.1	62.6	69.5	59.0	47.0
% [Age 45+] Fell in the Past Year	25.4	23.5	26.6	25.5	30.5	23.7	32.3	26.5			31.6	
Firearm-Related Deaths (Age-Adjusted Death Rate)								10.7	10.5	12.1	10.6	9.3
Homicide (Age-Adjusted Death Rate)								6.0	4.6	6.3	5.6	5.5
Violent Crime Rate	135.9			313.6	223.3	218.2		250.1	201.1	353.6	395.5	
% Victim of Violent Crime in Past 5 Years	0.8	5.9	1.1	2.9	0.0	2.8	0.0	1.8			3.7	
% Victim of Domestic Violence (Ever)	9.3	10.3	8.8	9.3	11.9	3.6	9.0	9.2			14.2	

Injury & Violence (continued)	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
% Child [Age 5-17] "Always" Wears Bicycle Helmet	44.3	60.3	43.4	50.8				49.9			48.8	
% Child [Age 0-17] "Always" Uses Seat Belt/Car Seat	97.2	98.5	99.4	99.0				98.7			85.6	

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Kidney Disease	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
Kidney Disease (Age-Adjusted Death Rate)	17.6			19.8	24.5			20.1	17.2	16.3	13.3	
% Kidney Disease	3.2	3.8	3.8	3.8	4.5	8.5	1.6	3.9	2.3	2.8	3.8	

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Mental Health	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
% "Fair/Poor" Mental Health	11.6	7.5	11.2	9.8	6.9	8.6	8.5	9.7			13.0	
% Diagnosed Depression	16.9	12.2	20.0	17.1	9.1	20.2	12.3	15.9	15.7	18.8	21.6	
% Symptoms of Chronic Depression (2+ Years)	24.8	23.9	36.5	31.8	22.8	30.0	27.7	28.6			31.4	
% Typical Day Is "Extremely/Very" Stressful	11.3	6.8	12.3	10.3	6.3	5.3	5.7	9.3			13.4	
Suicide (Age-Adjusted Death Rate)								11.2	12.7	13.0	13.0	10.2
% Taking Rx/Receiving Mental Health Trtmt	11.4	15.3	18.0	16.9	6.1	7.9	10.0	13.2			13.9	
% Have Ever Sought Help for Mental Health	24.3	25.9	29.5	28.1	14.7	21.4	21.1	24.6			30.8	
% [Those With Diagnosed Depression] Seeking Help								91.1			87.1	
% Unable to Get Mental Health Svcs in Past Yr	2.0	0.9	2.8	2.1	1.5	2.8	0.0	1.9			6.8	

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

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Nutrition, Physical Activity & Weight	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% Food Insecure	16.1	20.3	24.1	22.7	12.6	17.0	18.0	19.2			27.9	
% Eat 5+ Servings of Fruit or Vegetables per Day	30.8	30.7	28.4	29.3	42.3	40.6	18.1	31.1			33.5	
% "Very/Somewhat" Difficult to Buy Fresh Produce	15.7	16.2	17.2	16.8	27.7	36.1	29.9	20.2			22.1	
% 7+ Sugar-Sweetened Drinks in Past Week	36.0	36.2	34.4	35.1	47.2	31.2	44.6	37.3			29.0	
Population With Low Food Access (Percent)	26.8			26.7	34.9	44.8	0.0	30.1	20.4	23.6	22.4	
% No Leisure-Time Physical Activity	22.7	20.9	22.5	21.9	38.1	20.2	28.3	24.4	25.2	26.2	26.2	32.6
% Meeting Physical Activity Guidelines	20.2	24.3	29.5	27.5	5.0	27.3	24.2	22.8	22.1	18.9	22.8	20.1
Recreation/Fitness Facilities per 100,000	11.3			9.5	3.7	10.5	0.0	9.0	12.3	11.3	10.5	
% Overweight (BMI 25+)	79.8	81.8	78.8	79.9	84.8	86.6	75.9	80.6	64.1	65.9	67.8	
% Healthy Weight (BMI 18.5-24.9)	19.1	17.1	18.8	18.2	14.9	13.3	24.2	18.1	34.0	32.7	30.3	33.9

Nutrition, Physical Activity & Weight (continued)	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% [Overweights] Trying to Lose Weight	53.0	58.0	63.5	61.4	39.1	48.1	43.3	54.4			61.3	
% Obese (BMI 30+)	46.1	42.3	47.3	45.4	43.3	59.7	36.9	45.6	29.2	30.1	32.8	30.5
% Medical Advice on Weight in Past Year	31.9	32.2	28.2	29.7	29.8	31.4	31.8	30.5			24.2	
% [Overweights] Counseled About Weight in Past Year	37.5	37.2	32.9	34.6	34.7	35.9	37.5	35.6			29.0	
% Child [Age 5-17] Healthy Weight	61.1	63.0	47.7	55.2				57.1			58.4	
% Children [Age 5-17] Overweight (85th Percentile)	29.8	27.2	40.8	34.1				33.6			33.0	
% Children [Age 5-17] Obese (95th Percentile)	18.7	20.3	23.7	22.0				20.1			20.4	14.5
% Child [Age 2-17] Physically Active 1+ Hours per Day	54.5	52.1	48.8	50.2				59.0			50.5	

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better similar worse

Oral Health	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
% Have Dental Insurance	74.1	74.2	76.3	75.5	64.6	70.7	55.7	72.0			59.9	
% [Age 18+] Dental Visit in Past Year	66.8	74.7	71.1	72.5	67.1	57.9	56.8	68.4	69.3	64.2	59.7	49.0
% Child [Age 2-17] Dental Visit in Past Year	92.0	86.6	80.0	82.9				85.5			87.0	49.0

Note: In the green section, each subarea is compared against all other areas combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

better similar worse

Potentially Disabling Conditions	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
% [50+] Arthritis/Rheumatism	44.9	44.0	39.5	41.2	45.2	50.5	49.2	44.0			38.3	
% [50+] Osteoporosis	10.5	10.0	9.5	9.7	9.0	9.0	12.3	10.0			9.4	5.3
% Sciatica/Chronic Back Pain	20.6	28.5	19.9	23.2	23.2	29.5	27.6	23.3			22.8	
% Eye Exam in Past 2 Years	60.2	67.1	64.9	65.7	53.7	54.0	49.2	60.9			55.3	

Respiratory Diseases	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
CLRD (Age-Adjusted Death Rate)	40.3			37.1	44.5	60.9	51.0	40.0	36.6	45.6	41.4	
Pneumonia/Influenza (Age-Adjusted Death Rate)								13.6	16.6	18.1	15.4	
% [Adult] Currently Has Asthma	7.3	12.5	11.7	12.0	8.3	24.0	7.5	10.9	7.9	8.2	11.8	
% [Child 0-17] Currently Has Asthma	18.5	5.1	15.1	10.7				11.6			9.3	
% COPD (Lung Disease)	13.0	14.6	8.6	10.8	13.3	25.0	10.7	12.6	5.8	7.4	8.6	

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better similar worse

Sexually Transmitted Diseases	Each Sub-Area vs. Others: Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County	OHF Service Area	OHF Service Area vs. Benchmarks: vs. VA	vs. NC	vs. US	vs. HP2020
Chlamydia Incidence Rate	434.7			664.9	661.3	565.3	291.9	604.0	435.8	478.6	456.1	
Gonorrhea Incidence Rate	95.4			191.3	227.9	113.1	34.3	167.9	99.9	146.4	110.7	

Substance Abuse	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
Drug-Induced Deaths (Age-Adjusted Death Rate)								9.5	11.8	14.8	15.8	11.3
Cirrhosis/Liver Disease (Age-Adjusted Death Rate)								9.6	9.1	10.4	10.5	8.2
% Current Drinker	54.9	55.4	45.2	49.0	40.6	46.3	27.8	47.5	54.0	46.2	55.0	
% Binge Drinker (Single Occasion - 5+ Drinks Men, 4+ Women)	14.2	15.0	13.1	13.8	8.5	5.6	8.1	12.3			20.0	24.4
% Excessive Drinker	17.7	20.5	16.7	18.1	16.8	6.1	9.1	16.4			22.5	25.4
% Drinking & Driving in Past Month	1.9	0.4	0.5	0.5	0.0	0.0	1.0	0.8			5.2	
% Illicit Drug Use in Past Month	0.4	0.2	1.3	0.9	0.2	0.0	8.4	1.2			2.5	7.1
% Have Used Marijuana/Hashish in Past 30 Days	2.1	3.3	1.0	1.9	0.2	2.2	10.5	2.4			8.5	
% Ever Sought Help for Alcohol or Drug Problem	1.7	0.4	0.9	0.7	0.0	0.0	5.5	1.2			3.4	
% Life Negatively Affected by Substance Abuse	37.7	34.3	25.8	29.0	35.5	28.6	35.4	32.3			37.3	

Tobacco Use	Each Sub-Area vs. Others							OHF Service Area	OHF Service Area vs. Benchmarks			
	Isle of Wight	North Suffolk	South Suffolk	Suffolk City	Franklin/ Southampton	Surry/ Sussex	Gates County		vs. VA	vs. NC	vs. US	vs. HP2020
% Current Smoker	8.6	16.7	7.9	11.2	10.2	15.6	20.9	11.5	16.5	19.0	11.0	12.0
% Someone Smokes at Home	13.2	8.1	7.9	8.0	6.9	17.2	13.2	10.0			10.7	
% [Nonsmokers] Someone Smokes in the Home	10.5	4.3	5.6	5.1	5.4	4.6	1.8	6.2			4.0	
% [Household With Children] Someone Smokes in the Home								11.6			7.2	
% [Smokers] Have Quit Smoking 1+ Days in Past Year								59.4			34.7	80.0
% [Smokers] Received Advice to Quit Smoking								77.7			58.0	
% Currently Use Electronic Cigarettes	2.6	6.1	4.3	5.0	6.5	0.8	2.8	4.1			3.8	
% Use Smokeless Tobacco	4.5	5.6	3.4	4.2	6.1	4.8	1.5	4.4	4.4	4.9	4.4	0.3
% Smoke Cigars	6.5	4.5	1.7	2.7	0.0	4.5	4.1	3.5			7.5	0.2

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Summary of Key Informant Perceptions

In the Online Key Informant Survey, community stakeholders were asked to rate the degree to which each of 20 health issues is a problem in their own community, using a scale of "major problem," "moderate problem," "minor problem," or "no problem at all." The following chart summarizes their responses; these findings also are outlined throughout the full Community Health Needs Assessment report, along with the qualitative input describing reasons for their concerns. (Note that these ratings alone do not establish priorities for this assessment; rather, they are one of several data inputs considered for prioritization.)