2017 PRC Community Health Needs Assessment

Obici Healthcare Foundation Service Area

Western Tidewater, Virginia

Prepared for:

OBICI HEALTHCARE FOUNDATION

By Professional Research Consultants, Inc.

Custom Research
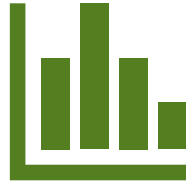*for* **Achieving Excellence**

PRC Community Health Needs Assessment

The PRC Community Health Needs Assessment consists of both primary and secondary data.

BENCHMARKING

- PRC National Health Survey
- Virginia and North Carolina BRFSS data
- State and national vital statistics data
- Healthy People 2020 targets

Secondary Data

Review of Existing Data

- City/County-level and aggregate data
- Census data, vital statistics, other health-related data
- Sentara hospital data

Community Stakeholder Input

PRC Online Key Informant Survey

- Community stakeholder input — *physicians, public health, other health providers, social services, community leaders*
- Based on their experiences, the populations they serve

Population-Based Health Survey

PRC Community Health Survey

- Population-based, stratified by county/city
- Targets health status, experience, behaviors
- Conducted via landline and cell phones

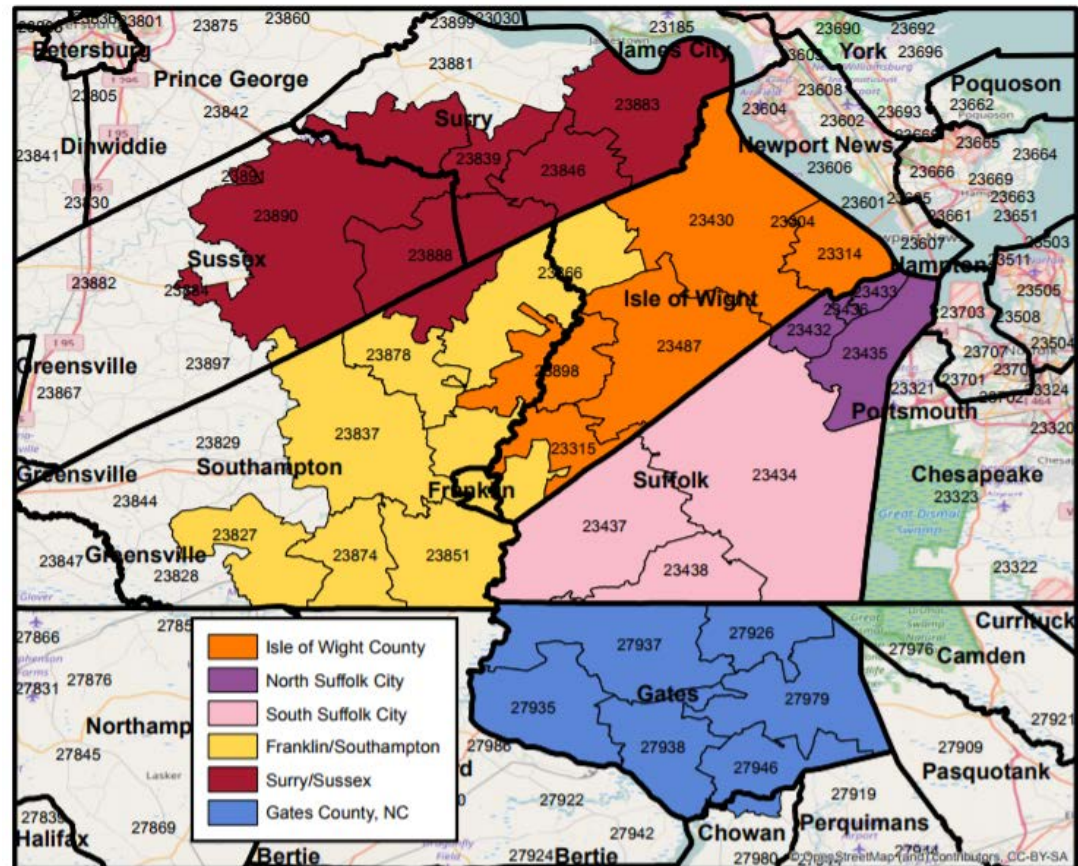**Professional Research Consultants, Inc.**

Population Survey

1,500 surveys stratified across the Obici Healthcare Foundation service area:

- 350 in North Suffolk City
- 500 in South Suffolk City
- 350 in Isle of Wight County
- 100 in Franklin CIty/Southampton County
- 100 in Surry/Sussex Counties
- 100 in Gates County (NC)
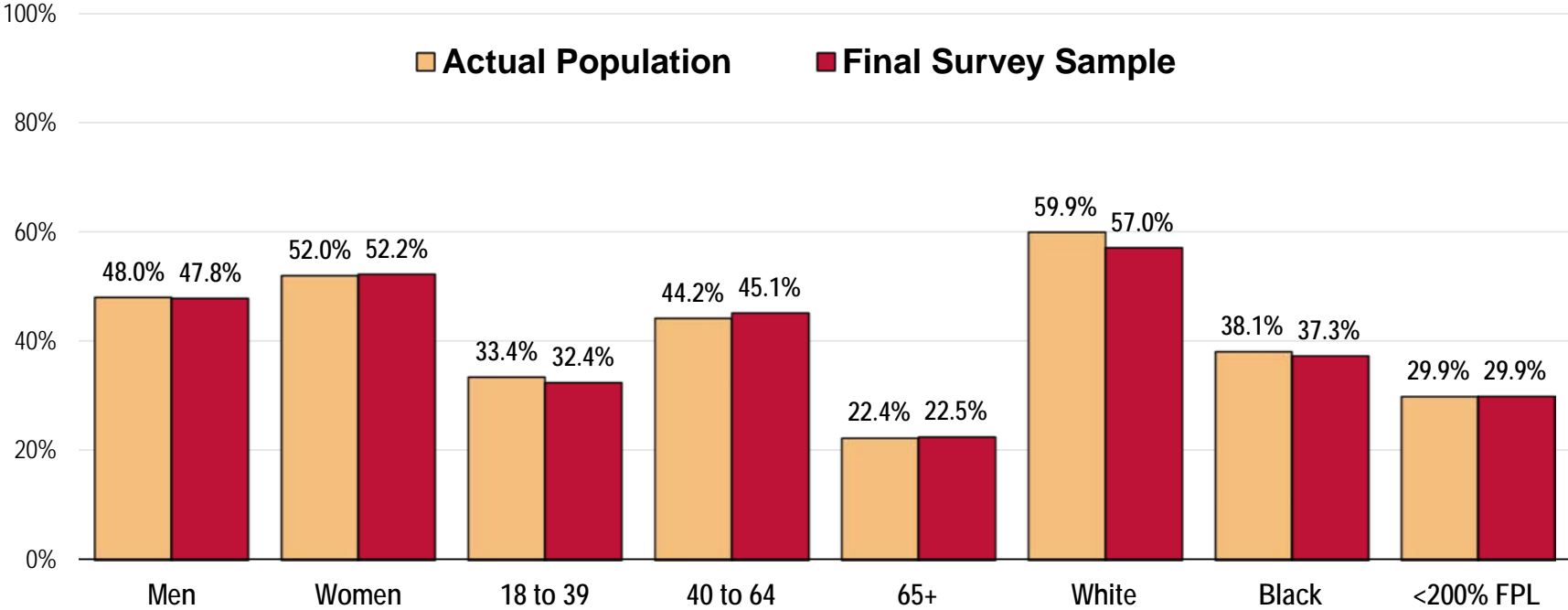- Final sample weighted in proportion to total population

Over 125 survey items; 25-30 minute interview.

Total sample size gives an overall maximum confidence interval of ±2.5%.

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Population & Survey Sample Characteristics
(Total Area, 2017)

Legend: ■ Actual Population   ■ Final Survey Sample

| Category	Actual Population	Final Survey Sample
Men	48.0%	47.8%
Women	52.0%	52.2%
18 to 39	33.4%	32.4%
40 to 64	44.2%	45.1%
65+	22.4%	22.5%
White	59.9%	57.0%
Black	38.1%	37.3%
<200% FPL	29.9%	29.9%

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

Aligning Survey Data with the Virginia Health Opportunity Index

The **Virginia Health Opportunity Index*** "scores" each census tract in Virginia as to the level of opportunity that exists for its residents using 13 indicators relating to:

- Natural, built and social environment

- Consumer resources

- Economic opportunities

- Access to health services

By matching survey respondents to these census tracts, we are able to see if and where correlations in the survey data exist with the Virginia HOI.

Very Low
Low
Average
High
Very High
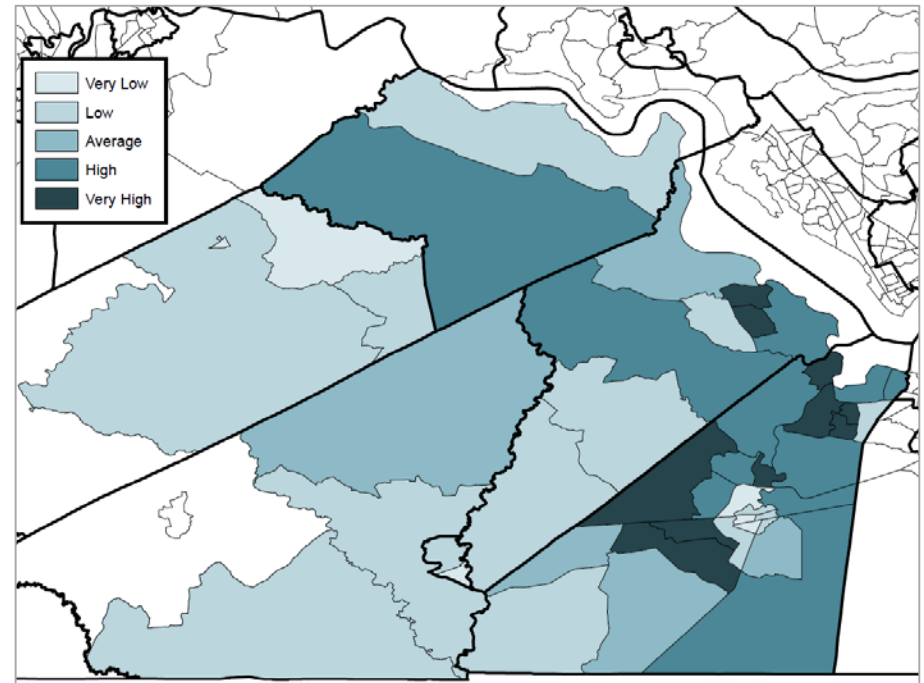
* Virginia Department of Health, Office of Minority Health and Health Equity

Today's Activities

Presentation

- Represents just a fraction of the data collected through this assessment.

- Primarily focuses on areas of need ("Areas of Opportunity"); however, there were many positive findings for the area as well.

- Will allow for Q&A at the end.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A
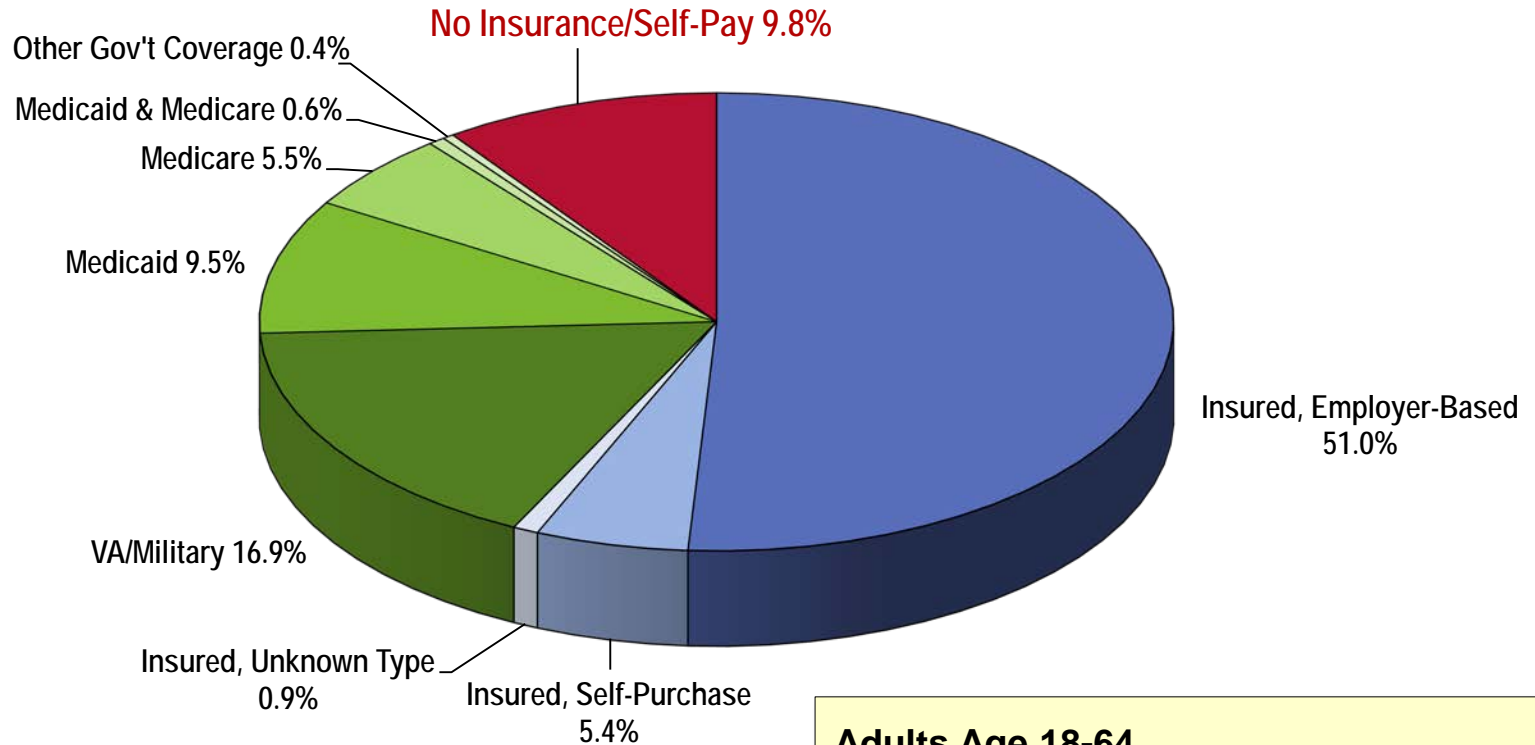
Areas of Opportunity

► **Access to Health Services**

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

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Healthcare Insurance Coverage
(Among Adults Age 18-64; Total Area, 2017)

No Insurance/Self-Pay 9.8%

Other Gov't Coverage 0.4%

Medicaid & Medicare 0.6%

Medicare 5.5%

Medicaid 9.5%

VA/Military 16.9%

Insured, Unknown Type 0.9%

Insured, Self-Purchase 5.4%

Insured, Employer-Based 51.0%

Adults Age 18-64
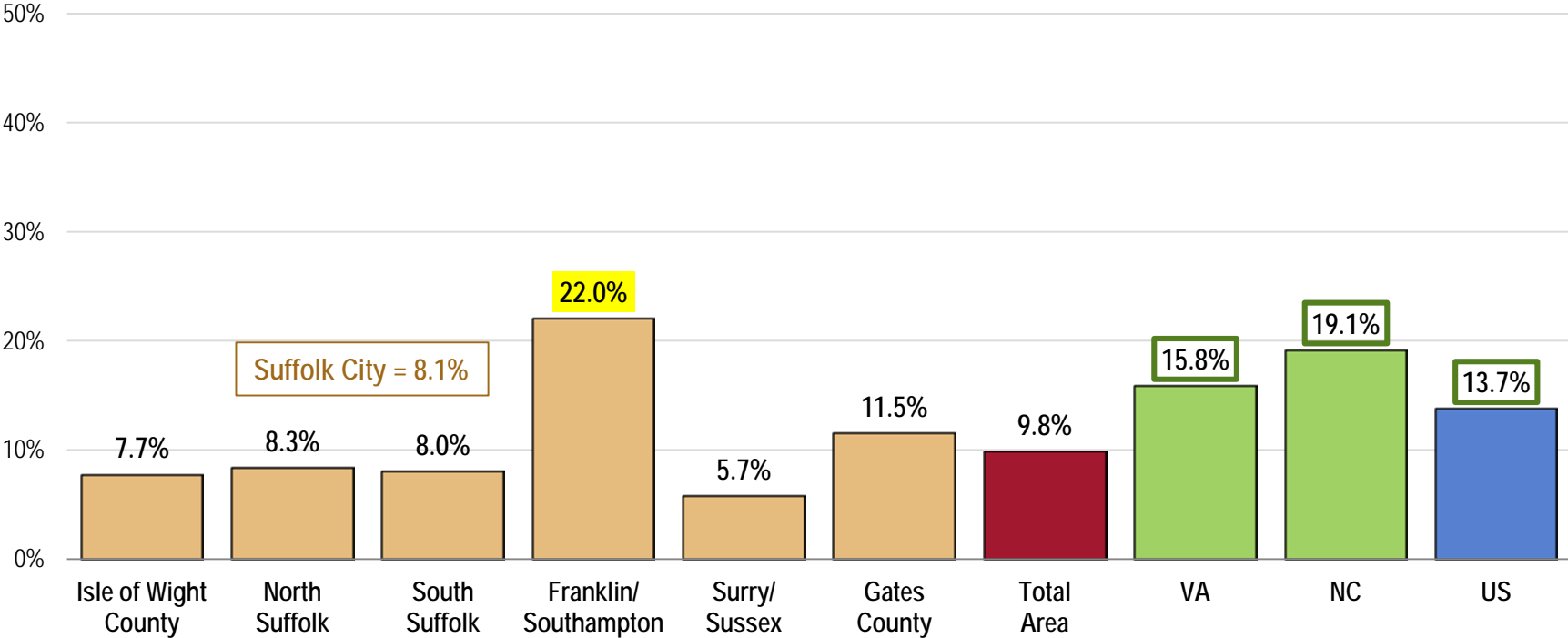
Private Insurance = 57.3%

Military/VA = 16.9%

Medicaid/Medicare/Other Gov't = 16.0%

Uninsured = 9.8%

Sources: • 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 173]

Notes: • Reflects respondents age 18 to 64.

Lack of Healthcare Insurance Coverage
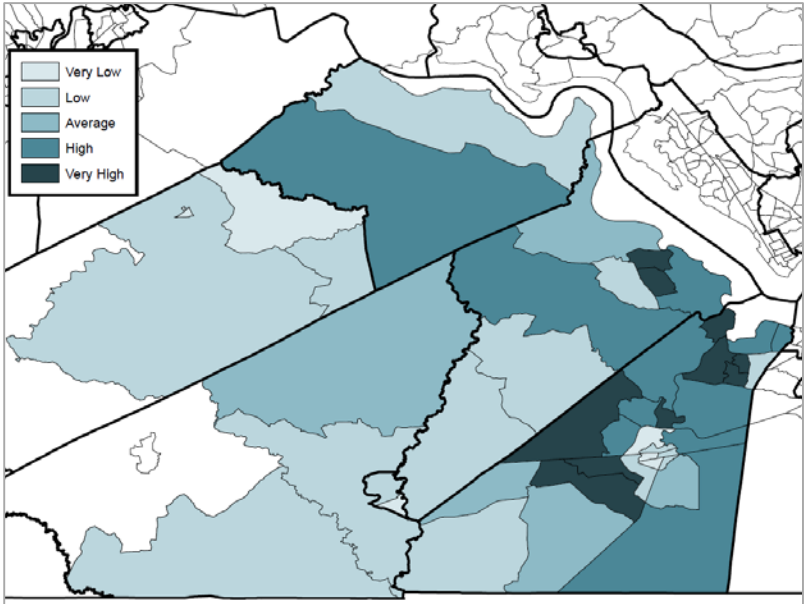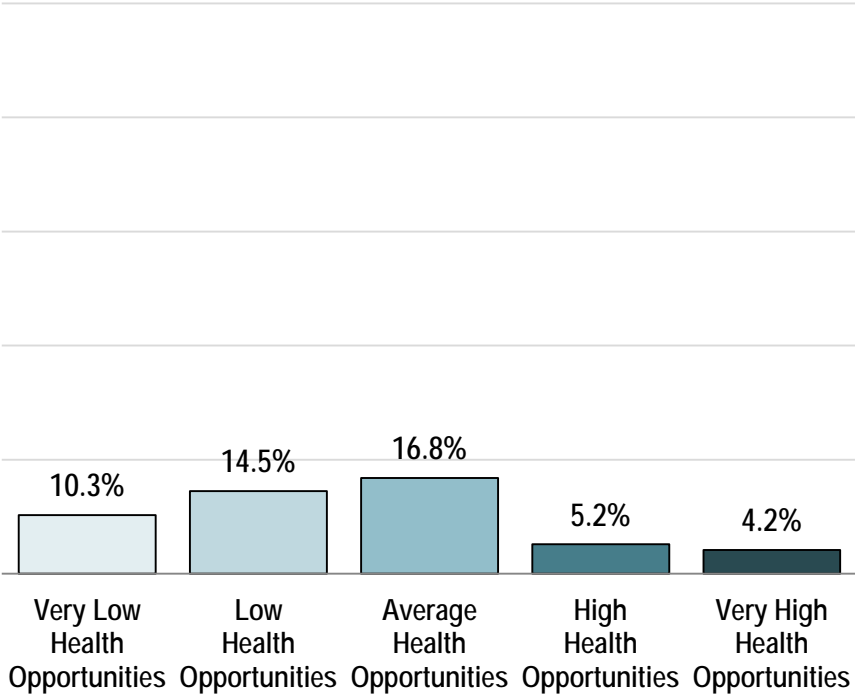## (Among Adults Age 18-64)
Healthy People 2020 Target = 0.0% (Universal Coverage)

Suffolk City = 8.1%

Location	Value
Isle of Wight County	7.7%
North Suffolk	8.3%
South Suffolk	8.0%
Franklin/Southampton	22.0%
Surry/Sussex	5.7%
Gates County	11.5%
Total Area	9.8%
VA	15.8%
NC	19.1%
US	13.7%

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 173]
- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2015 VA and NC data.
- 2017 PRC National Health Survey, Professional Research Consultants, Inc.
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective AHS-1.1]

Notes:
- Asked of all respondents under the age of 65.

Lack of Healthcare Insurance Coverage (18-64)
(OHF Service Area by Health Opportunity Index Classification)

Bar chart values:
- Very Low Health Opportunities: 10.3%
- Low Health Opportunities: 14.5%
- Average Health Opportunities: 16.8%
- High Health Opportunities: 5.2%
- Very High Health Opportunities: 4.2%

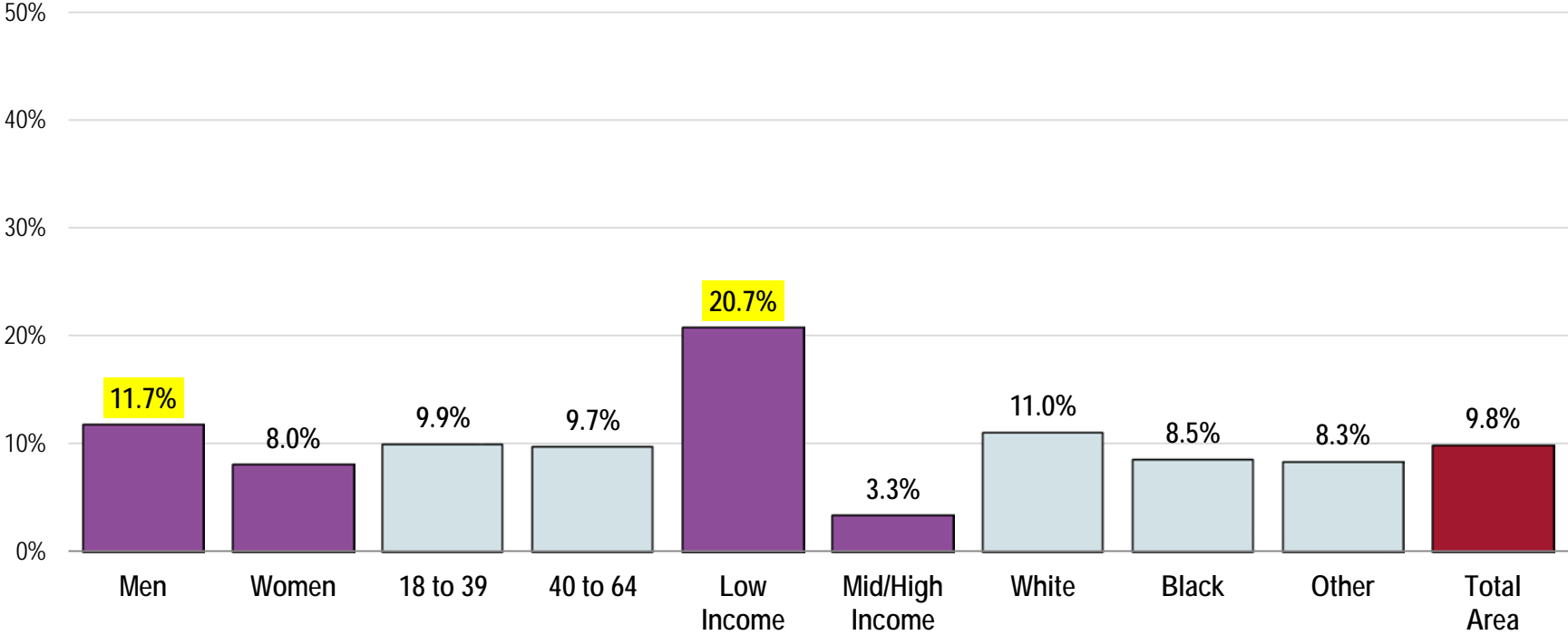Map legend:
- Very Low
- Low
- Average
- High
- Very High

Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 173]
Notes: ● Asked of all respondents.

Lack of Healthcare Insurance Coverage
(Among Adults Age 18-64; Total Area, 2017)
Healthy People 2020 Target = 0.0% (Universal Coverage)

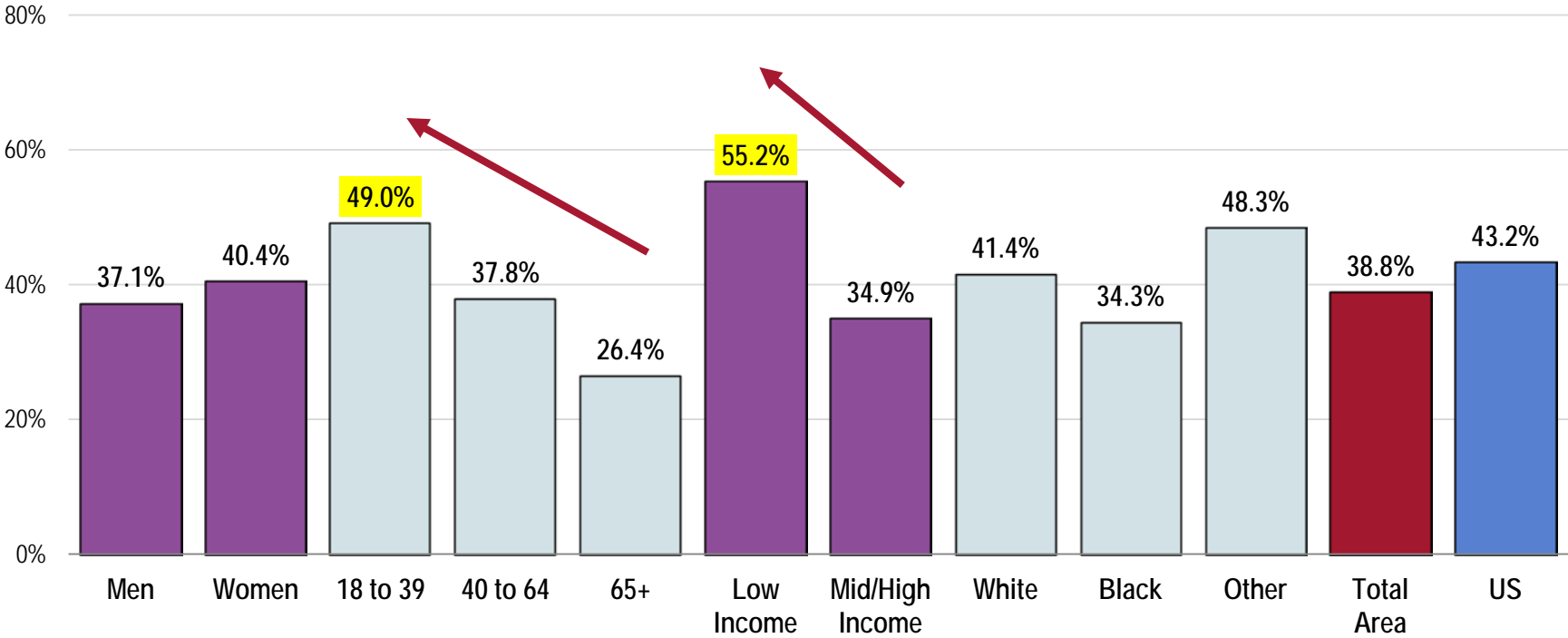|	
Men	11.7%
Women	8.0%
18 to 39	9.9%
40 to 64	9.7%
Low Income	20.7%
Mid/High Income	3.3%
White	11.0%
Black	8.5%
Other	8.3%
Total Area	9.8%

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 173]
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective AHS-1.1]

Notes:
- Asked of all respondents under the age of 65.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
- Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Low Income" includes households with incomes up to 200% of the federal poverty level; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.

Experienced Difficulties or Delays of Some Kind in Receiving Needed Healthcare in the Past Year
## (Total Area, 2017)

|											
Men	Women	18 to 39	40 to 64	65+	Low Income	Mid/High Income	White	Black	Other	Total Area	US
37.1%	40.4%	49.0%	37.8%	26.4%	55.2%	34.9%	41.4%	34.3%	48.3%	38.8%	43.2%

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 1
Notes:
- Asked of all respondents.
- Represents the percentage of respondents experiencing one or more barriers to access
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations
- Income categories reflect respondent's household income as a ratio to the federal pove
  with incomes up to 200% of the federal poverty level; "Mid/High Income" includes house

The survey found that access difficulties increase for those with multiple chronic conditions.

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Experienced Difficulties or Delays of Some Kind in Receiving Needed Healthcare in the Past Year
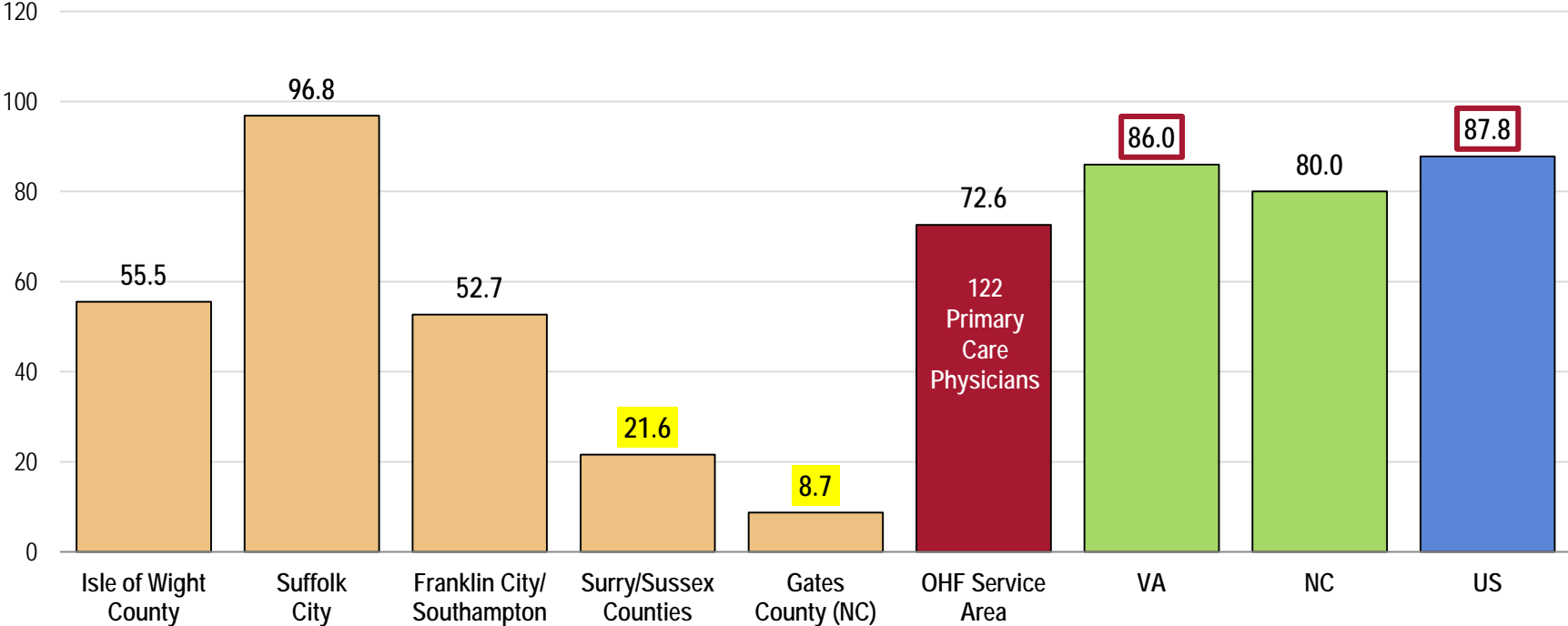## (OHF Service Area by Health Opportunity Index Classification)
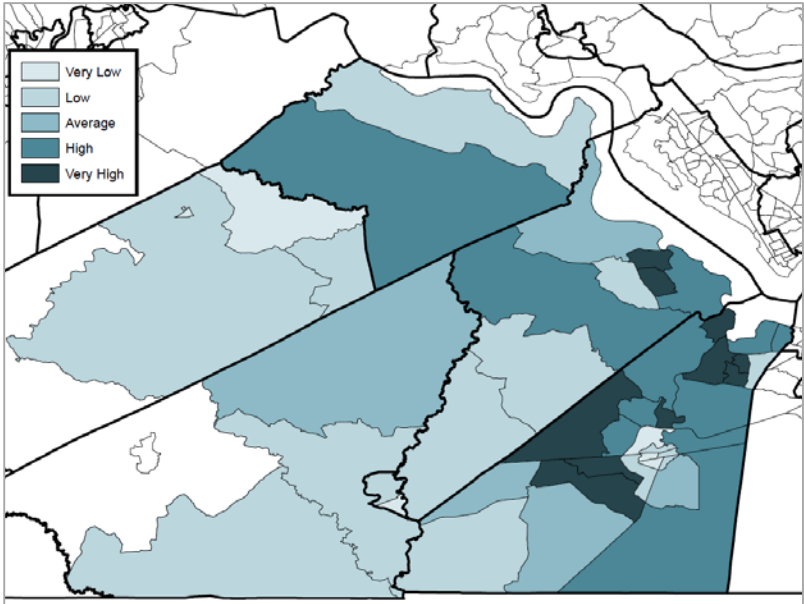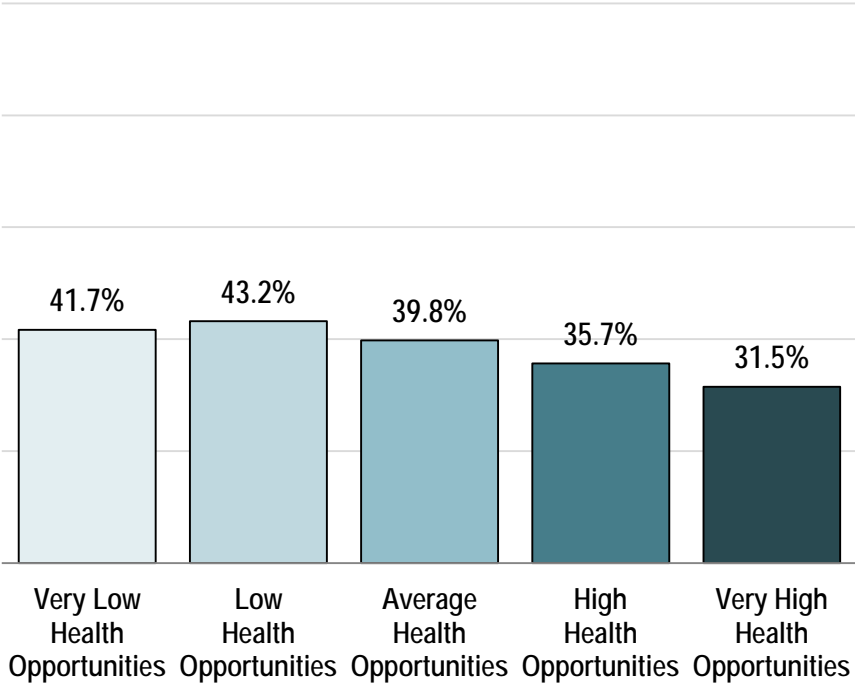
Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 177]
Notes: ● Asked of all respondents.

Access to Primary Care
## (Number of Primary Care Physicians per 100,000 Population, 2014)

|	
Isle of Wight County	55.5
Suffolk City	96.8
Franklin City/ Southampton	52.7
Surry/Sussex Counties	21.6
Gates County (NC)	8.7
OHF Service Area	72.6 (122 Primary Care Physicians)
VA	86.0
NC	80.0
US	87.8

Sources:
- US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File.
- Retrieved October 2017 from Community Commons at http://www.chna.org.

Notes:
- This indicator is relevant because a shortage of health professionals contributes to access and health status issues.
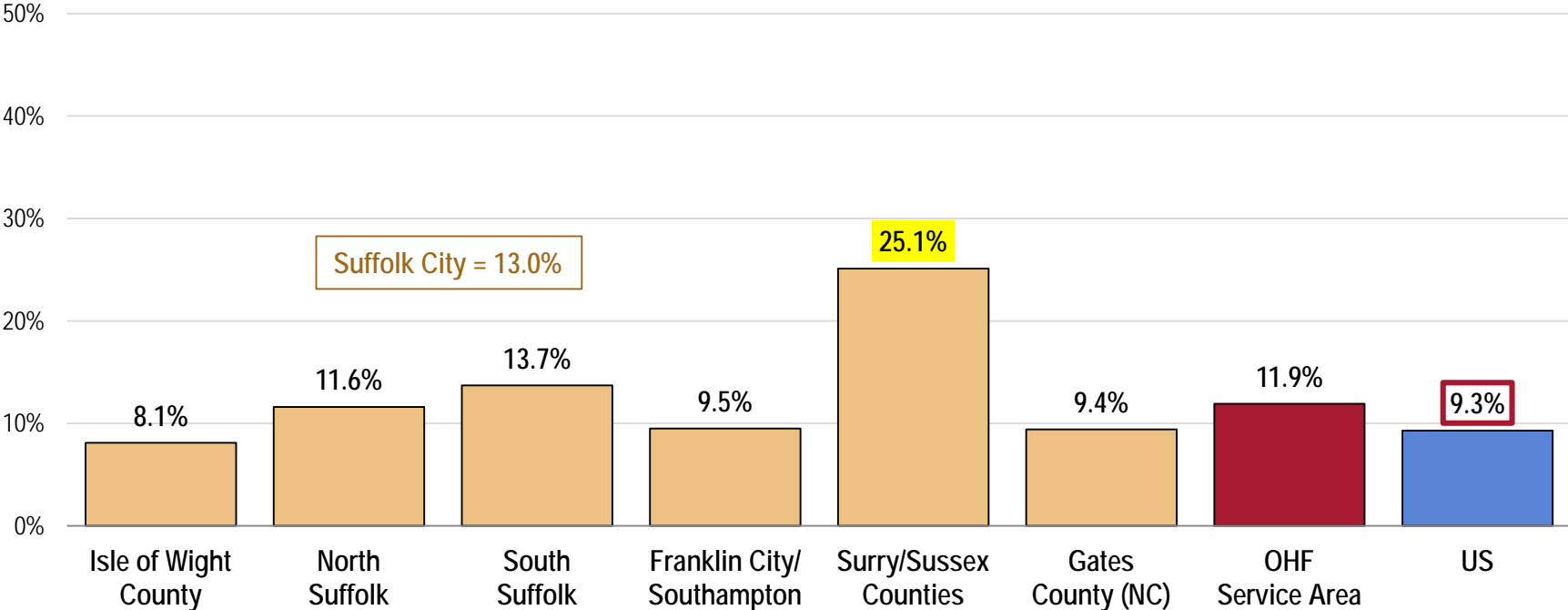
Have Visited a Physician for a Checkup in the Past Year
(OHF Service Area by Health Opportunity Index Classification)
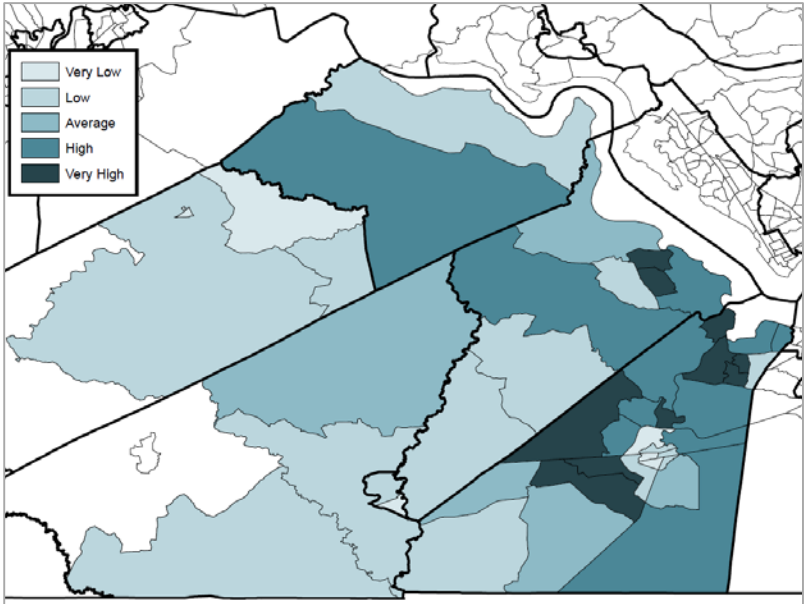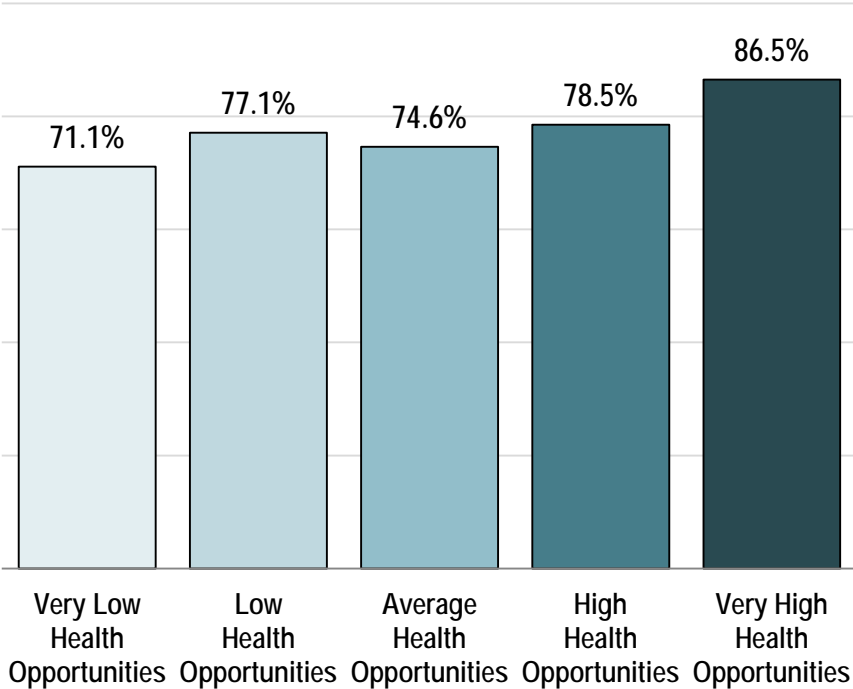
Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 18]
Notes: ● Asked of all respondents.

Have Used a Hospital
Emergency Room More Than Once in the Past Year

Suffolk City = 13.0%

- Isle of Wight County: 8.1%
- North Suffolk: 11.6%
- South Suffolk: 13.7%
- Franklin City/Southampton: 9.5%
- Surry/Sussex Counties: 25.1%
- Gates County (NC): 9.4%
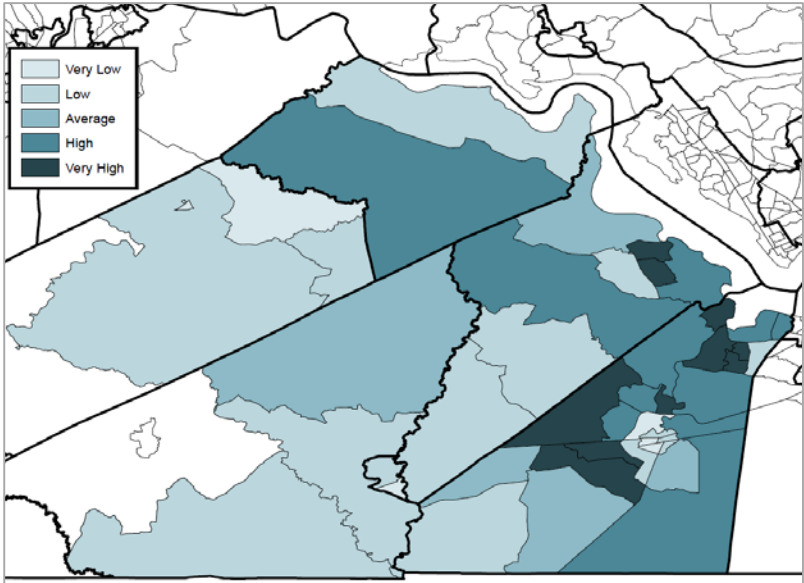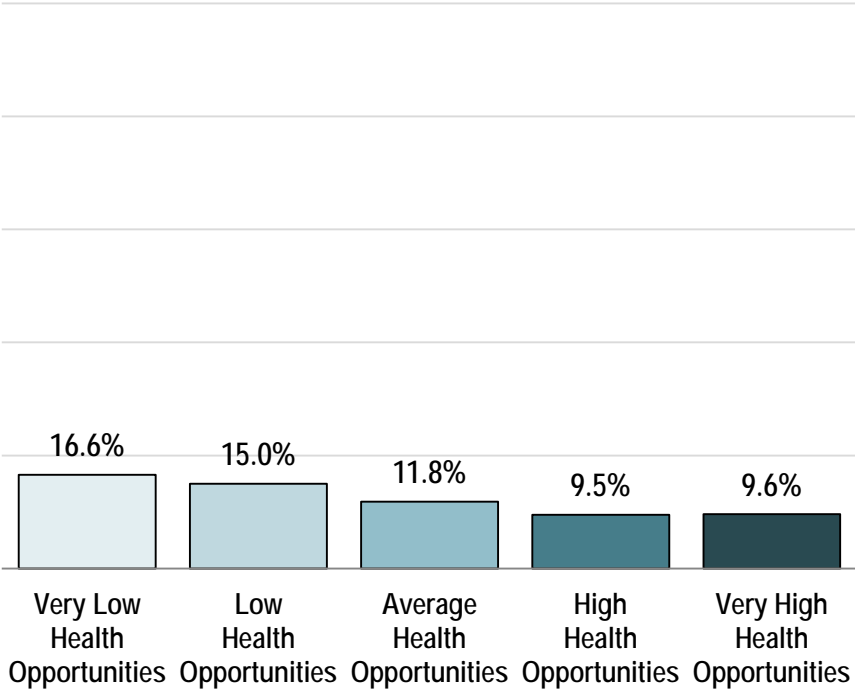- OHF Service Area: 11.9%
- US: 9.3%

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 22-23]
- 2017 PRC National Health Survey, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.

Used the ER More Than Once in the Past Year
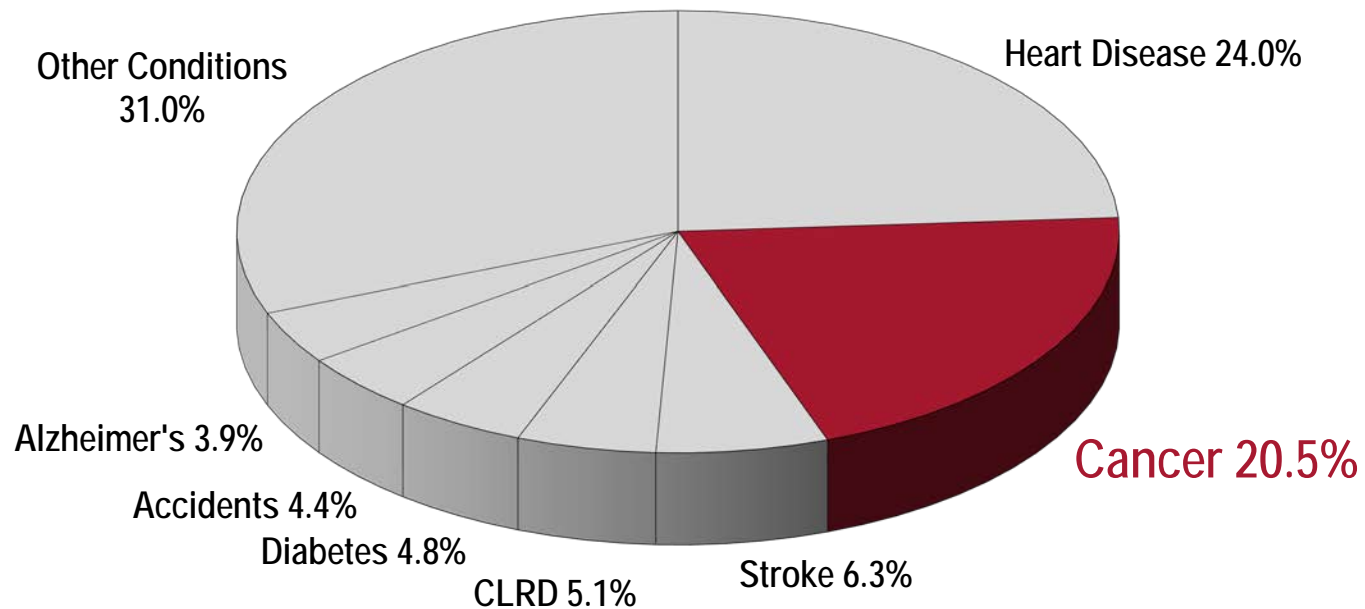## (OHF Service Area by Health Opportunity Index Classification)

Very Low Health Opportunities: 16.6%
Low Health Opportunities: 15.0%
Average Health Opportunities: 11.8%
High Health Opportunities: 9.5%
Very High Health Opportunities: 9.6%

Map legend: Very Low, Low, Average, High, Very High

Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 22]
Notes: ● Asked of all respondents.

Areas of Opportunity

► Access to Health Services

► **Cancer**

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.

Leading Causes of Death
(OHF Service Area, 2014)

Other Conditions 31.0%

Heart Disease 24.0%

Cancer 20.5%

Alzheimer's 3.9%

Accidents 4.4%

Diabetes 4.8%

CLRD 5.1%

Stroke 6.3%

Sources:
- CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted October 2017.

Notes:
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
- CLRD is chronic lower respiratory disease.

Age-Adjusted Cancer Death Rates by Site
(2013–2015 Annual Average Deaths per 100,000 Population)

|	OHF Service Area	VA	NC	US	HP2020
ALL CANCERS	173.8	161.0	167.2	161.0	161.4
Lung Cancer	44.2	42.2	47.6	42.0	45.5
Prostate Cancer	31.5	19.4	20.0	19.0	21.8
Female Breast Cancer	29.0	21.7	21.0	20.6	20.7
Colorectal Cancer	14.5	14.0	14.0	14.4	14.5

Sources:
- CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted October 2017.
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov
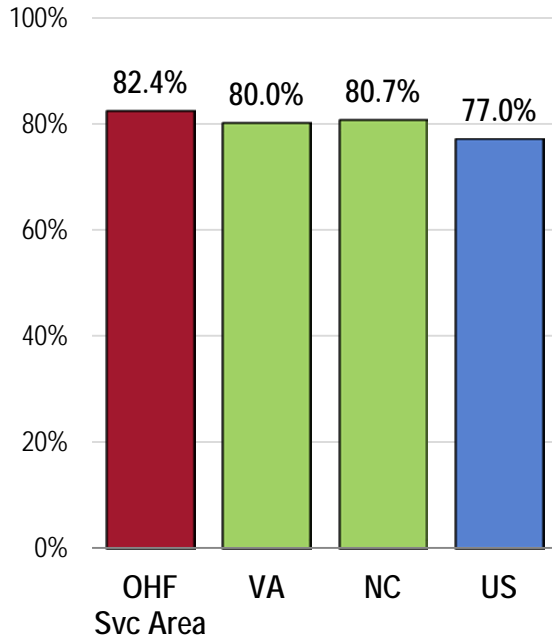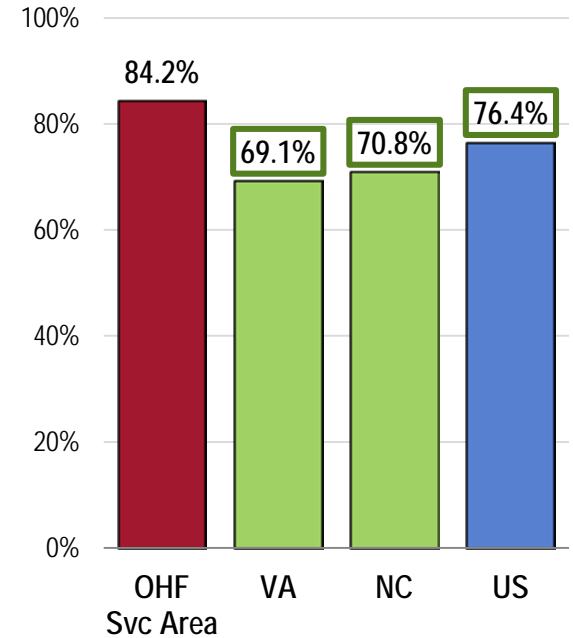
Cancer Screenings

Mammogram in the Past 2 Years
(Women 50-74)
Healthy People 2020 Target = 81.1% or Higher
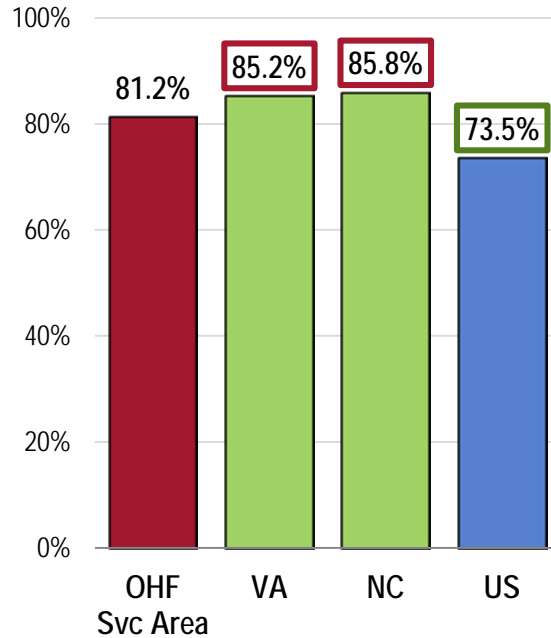
Pap Smear in the Past 3 Years
(Women Age 21-65)
Healthy People 2020 Target = 93.0% or Higher

Colorectal Cancer Screening
(Adults Age 50-75)
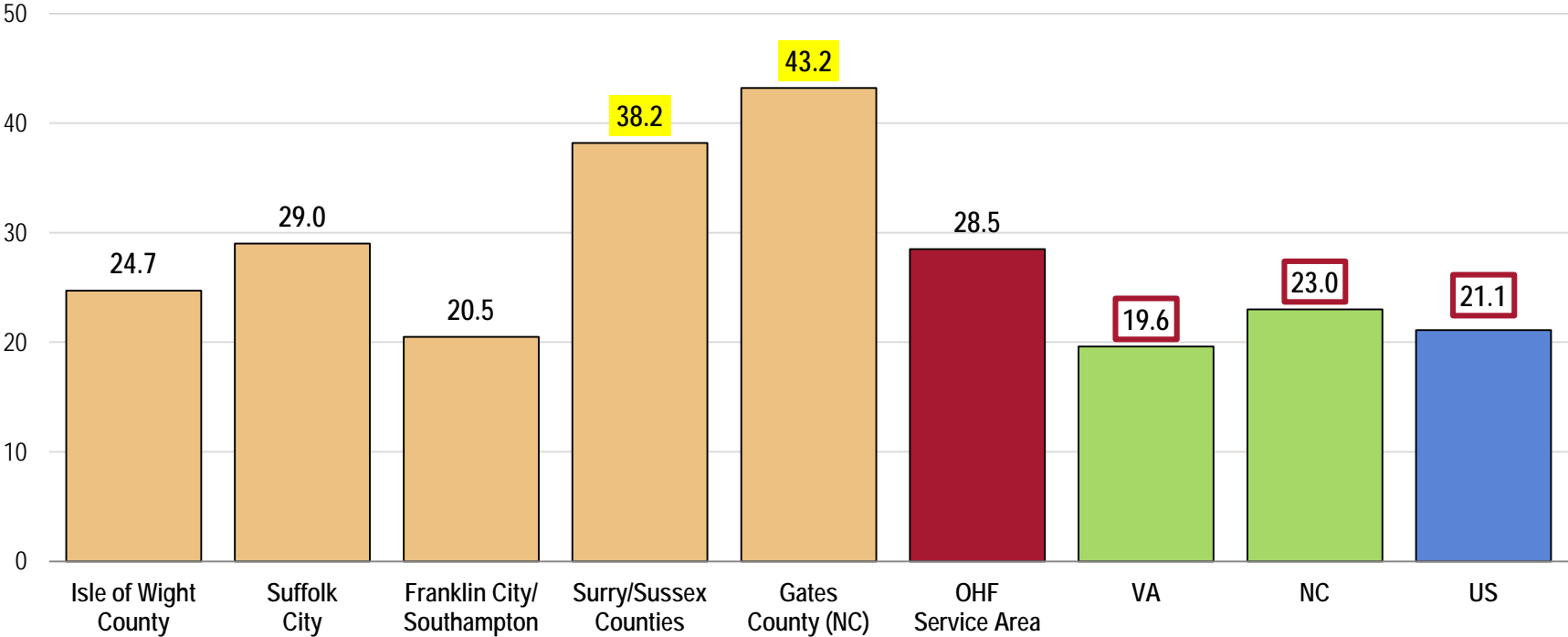Healthy People 2020 Target = 70.5% or Higher

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Areas of Opportunity

► Access to Health Services

► Cancer

► **Diabetes**

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.

Diabetes: Age-Adjusted Mortality
(2013–2015 Annual Average Deaths per 100,000 Population)
### Healthy People 2020 Target = 20.5 or Lower (Adjusted)

	Isle of Wight County	Suffolk City	Franklin City/ Southampton	Surry/Sussex Counties	Gates County (NC)	OHF Service Area	VA	NC	US
Value	24.7	29.0	20.5	38.2	43.2	28.5	19.6	23.0	21.1

Sources:
- CDC WONDER Online Query System. Centers for Disease Control and [...] Informatics. Data extracted October 2017.
- US Department of Health and Human Services. Healthy People 2020. [...]

Notes:
- Deaths are coded using the Tenth Revision of the International Statistic [...]
- Rates are per 100,000 population, age-adjusted to the 2000 US Standa [...]
- The Healthy People 2020 target for Diabetes is adjusted to account for [...]

Mortality is more than twice as high among African Americans as other residents.

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Prevalence of Diabetes
(OHF Service Area, 2017)
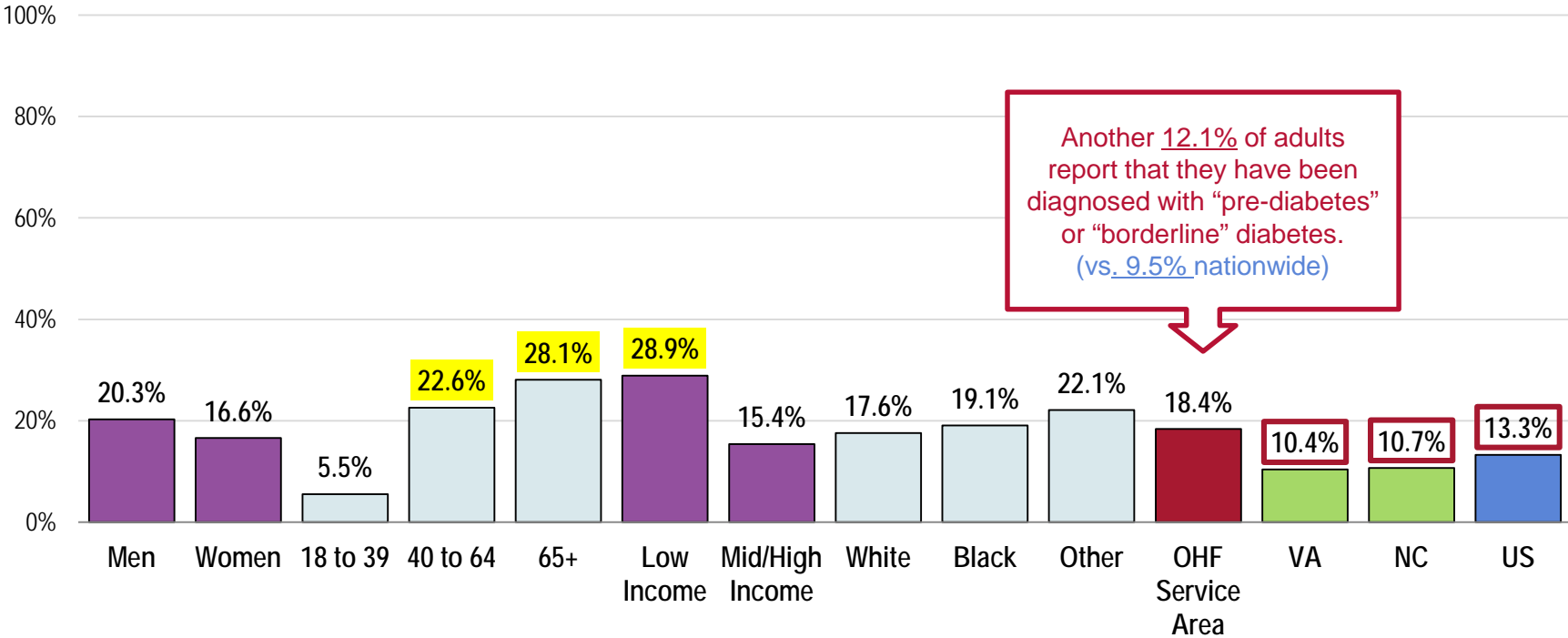
Another 12.1% of adults report that they have been diagnosed with "pre-diabetes" or "borderline" diabetes. (vs. 9.5% nationwide)
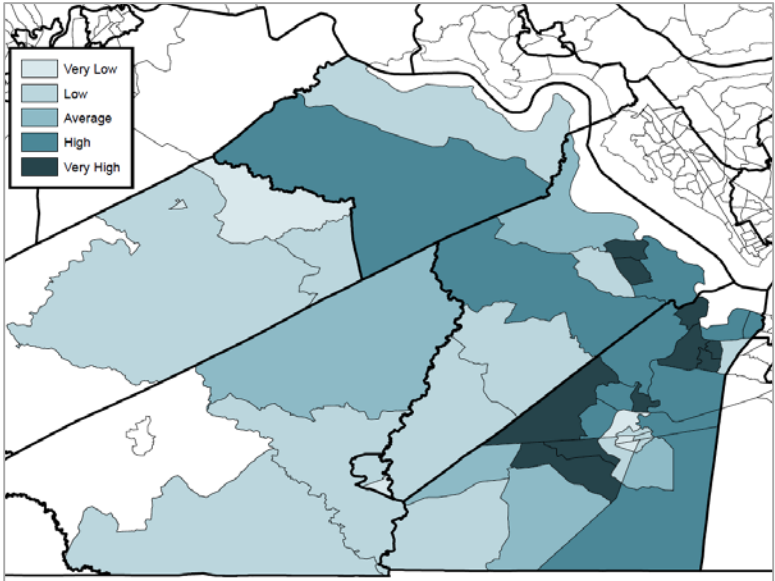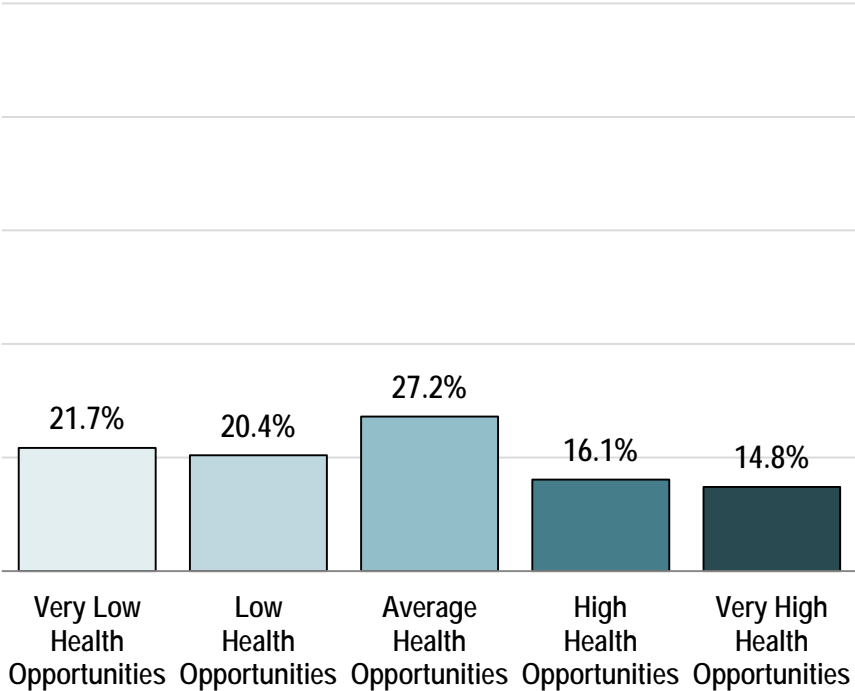
Category	Value
Men	20.3%
Women	16.6%
18 to 39	5.5%
40 to 64	22.6%
65+	28.1%
Low Income	28.9%
Mid/High Income	15.4%
White	17.6%
Black	19.1%
Other	22.1%
OHF Service Area	18.4%
VA	10.4%
NC	10.7%
US	13.3%

Highest (27.2%) in Surry/Sussex Counties.

Sources: ● 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 140]
Notes: ● Asked of all respondents.
● Hispanics can be of any race. Other race categories are non-Hispanic.
● Income categories reflect respondent's household income as a ratio [...] with incomes up to 200% of the federal poverty level: "Mid/High Inc[...]
● Excludes gestational diabetes (occurring only during pregnancy).

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Prevalence of Diabetes
(OHF Service Area by Health Opportunity Index Classification)

Very Low	21.7%
Low	20.4%
Average	27.2%
High	16.1%
Very High	14.8%

Very Low Health Opportunities — 21.7%
Low Health Opportunities — 20.4%
Average Health Opportunities — 27.2%
High Health Opportunities — 16.1%
Very High Health Opportunities — 14.8%

Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 140]
Notes: ● Asked of all respondents.

Perceptions of Diabetes
as a Problem in the Community
(Key Informants, 2017)

■ Major Problem ■ Moderate Problem ■ Minor Problem ■ No Problem At All

| 66.7% | 22.2% | 7.9% | |

Sources: ● PRC Online Key Informant Survey, Professional Research Consultants, Inc.
Notes: ● Asked of all respondents.

Top Reasons for "Major Problem" Responses:
- Cost/Affordability
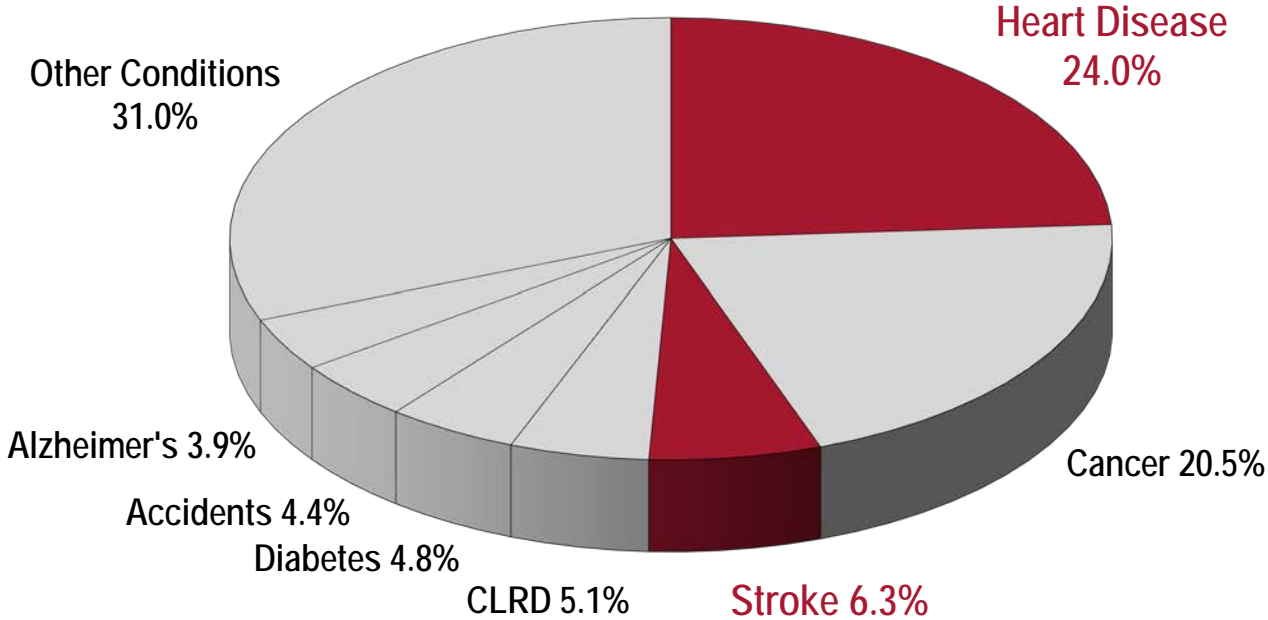- Health Education/Awareness
- Nutrition
- Access to Care/Services

Key Informant Input

Professional Research Consultants, Inc.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► **Heart Disease & Stroke**

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

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Leading Causes of Death
(OHF Service Area, 2014)

Heart Disease
24.0%

Other Conditions
31.0%

Cancer 20.5%

Alzheimer's 3.9%

Accidents 4.4%

Diabetes 4.8%

CLRD 5.1%

Stroke 6.3%

Sources: ● CDC WONDER Online Query System. Centers for Disease C
Informatics. Data extracted October 2017.

Notes: ● Deaths are coded using the Tenth Revision of the Internationa
● CLRD is chronic lower respiratory disease.

Age-adjusted stroke mortality rates are similar to
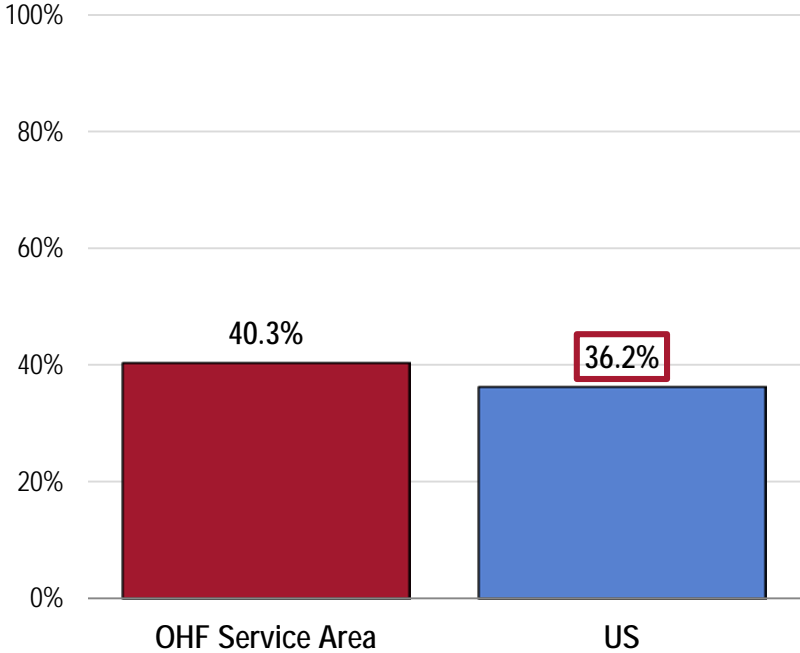statewide rates, but worse than national rates.

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Prevalence of
High Blood Pressure
Healthy People 2020 Target = 26.9% or Lower
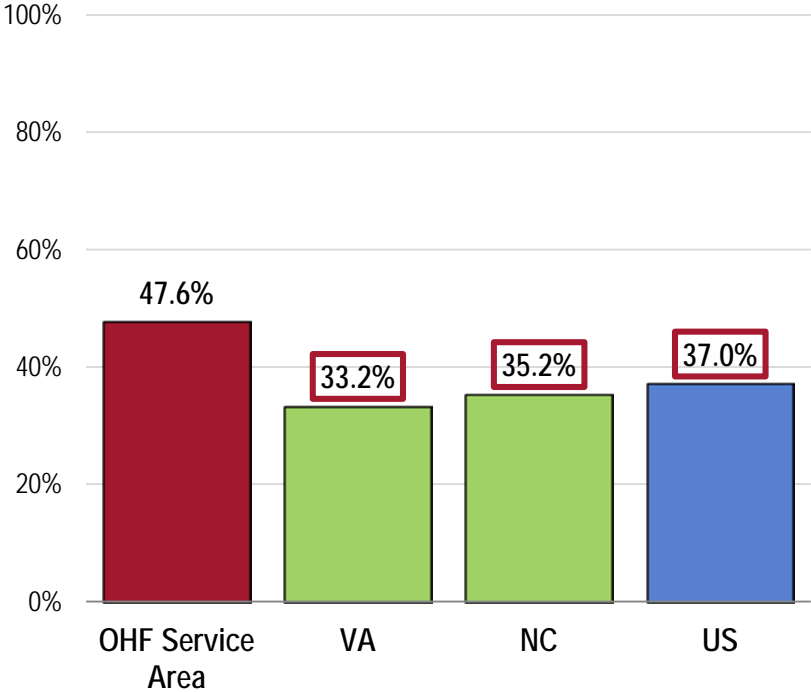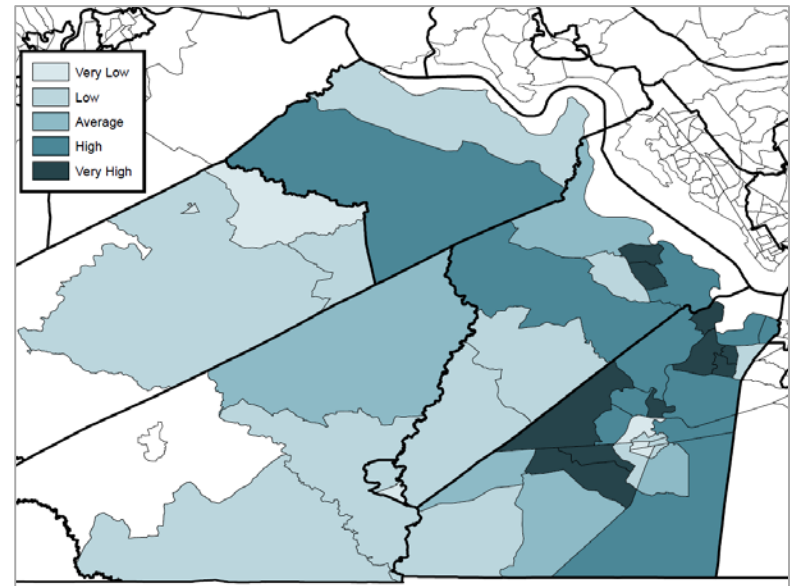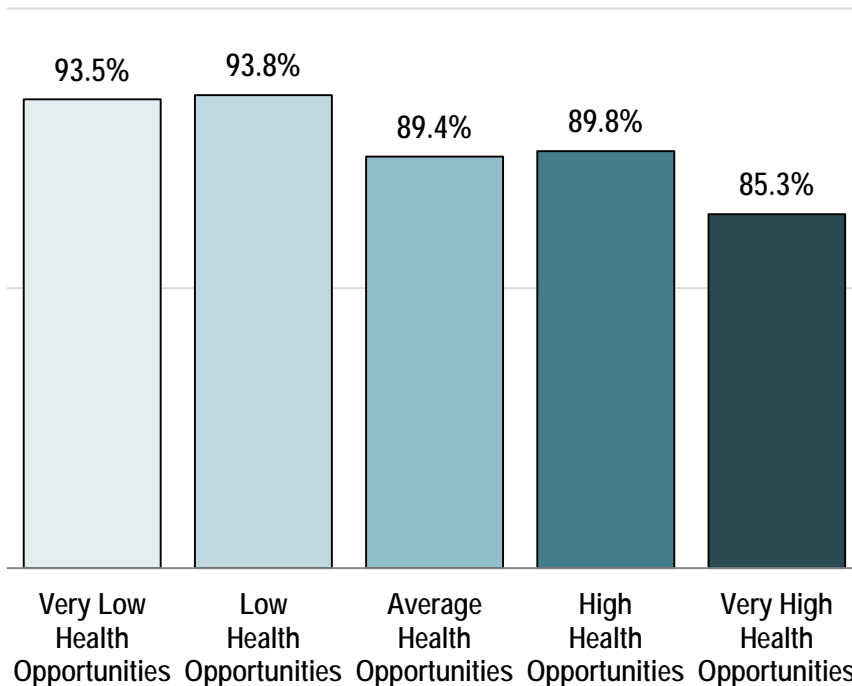
Prevalence of
High Blood Cholesterol
Healthy People 2020 Target = 13.5% or Lower

Blood pressure and blood cholesterol **screening** levels are actually <u>better</u> than US.

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Present One or More Cardiovascular Risks or Behaviors
(OHF Service Area by Health Opportunity Index Classification)

|	
93.5% Very Low Health Opportunities	
93.8% Low Health Opportunities	
89.4% Average Health Opportunities	
89.8% High Health Opportunities	
85.3% Very High Health Opportunities	

Map legend: Very Low, Low, Average, High, Very High

OHF Service Area = 90.3%

US = 87.2%

Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 131]
Notes: ● Asked of all respondents.

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Perceptions of Heart Disease and Stroke
as a Problem in the Community
(Key Informants, 2017)

■ Major Problem   ▢ Moderate Problem   ■ Minor Problem   ▢ No Problem At All

54.0%	36.5%	6.3%	
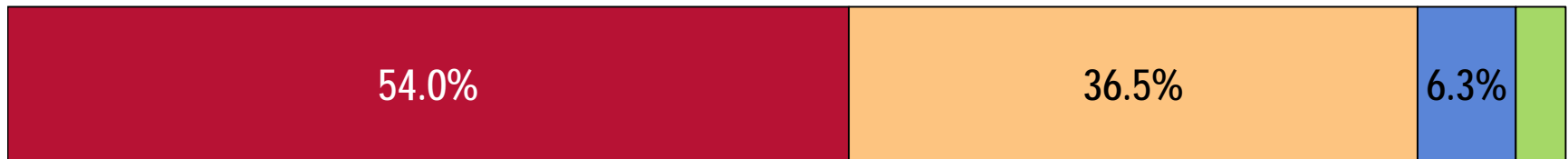
Sources: ● PRC Online Key Informant Survey, Professional Research Consultants, Inc.
Notes: ● Asked of all respondents.

Top Reasons for "Major Problem" Responses:
- Prevalence/Incidence
- Leading Cause of Death
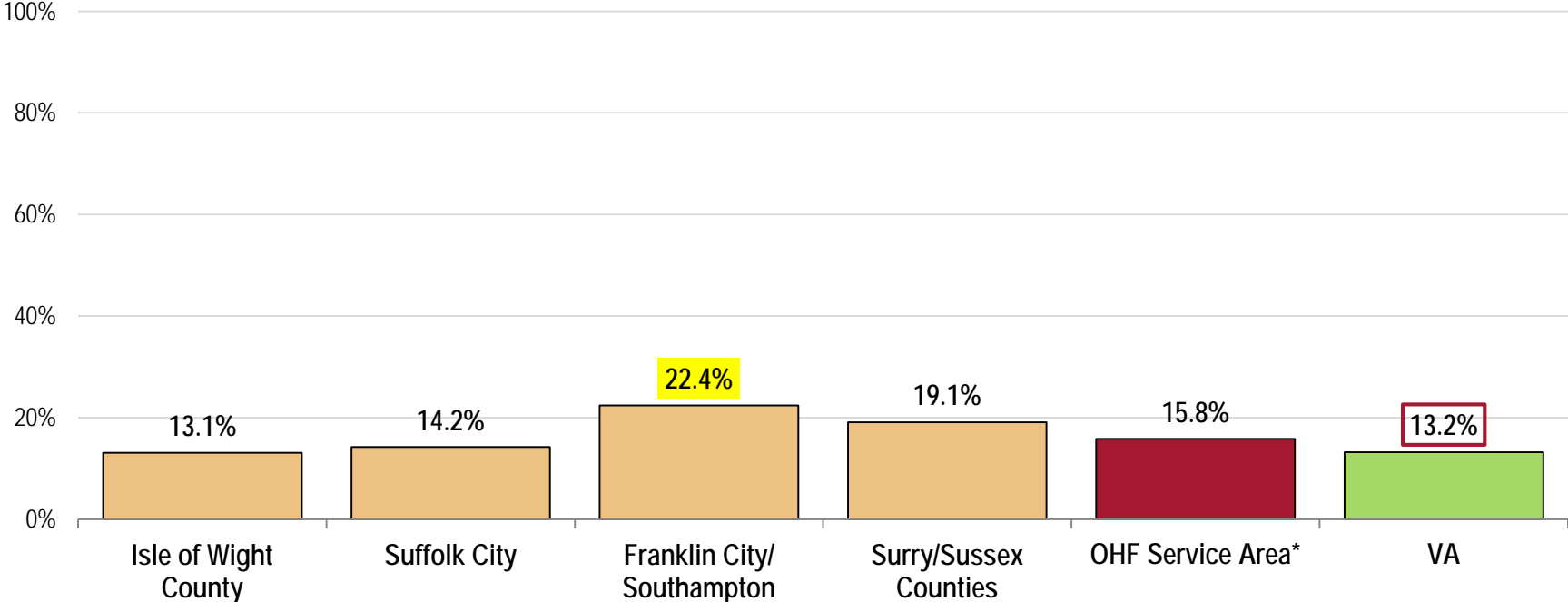- Nutrition
- Lifestyle

Key Informant Input

Professional Research Consultants, Inc.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► **Infant Health & Family Planning**

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.

Lack of Prenatal Care in the First Trimester
(Percentage of Live Births, 2013)
Healthy People 2020 Target = 22.1% or Lower

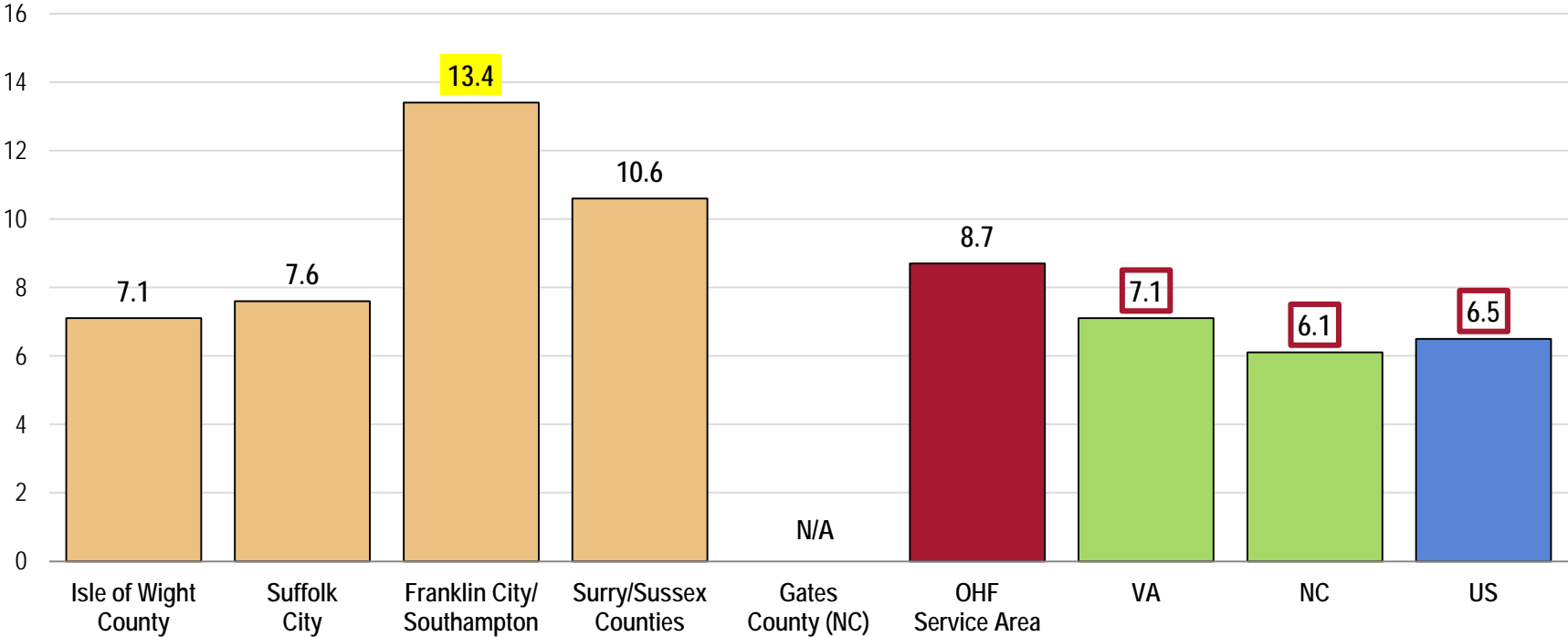|	Isle of Wight County	Suffolk City	Franklin City/ Southampton	Surry/Sussex Counties	OHF Service Area*	VA
%	13.1%	14.2%	22.4%	19.1%	15.8%	13.2%

Sources:
- Sentara Obici datafile 9/30/16
- US Department of Health and Human Services. Healthy People 2020. Dece...

Note:
- This indicator reports the percentage of women who do not obtain prenatal ca...
  in prenatal care decreases the likelihood of maternal and infant health risks. ...
  knowledge insufficient provider outreach, and/or social barriers preventing ut...
- *Excludes Gates County data.

The prevalence of **low-weight births** in the OHF Service Area (9.9%) is also above that throughout VA and the US.

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Infant Mortality Rate
(Annual Average Infant Deaths per 1,000 Live Births, 2006–2010)
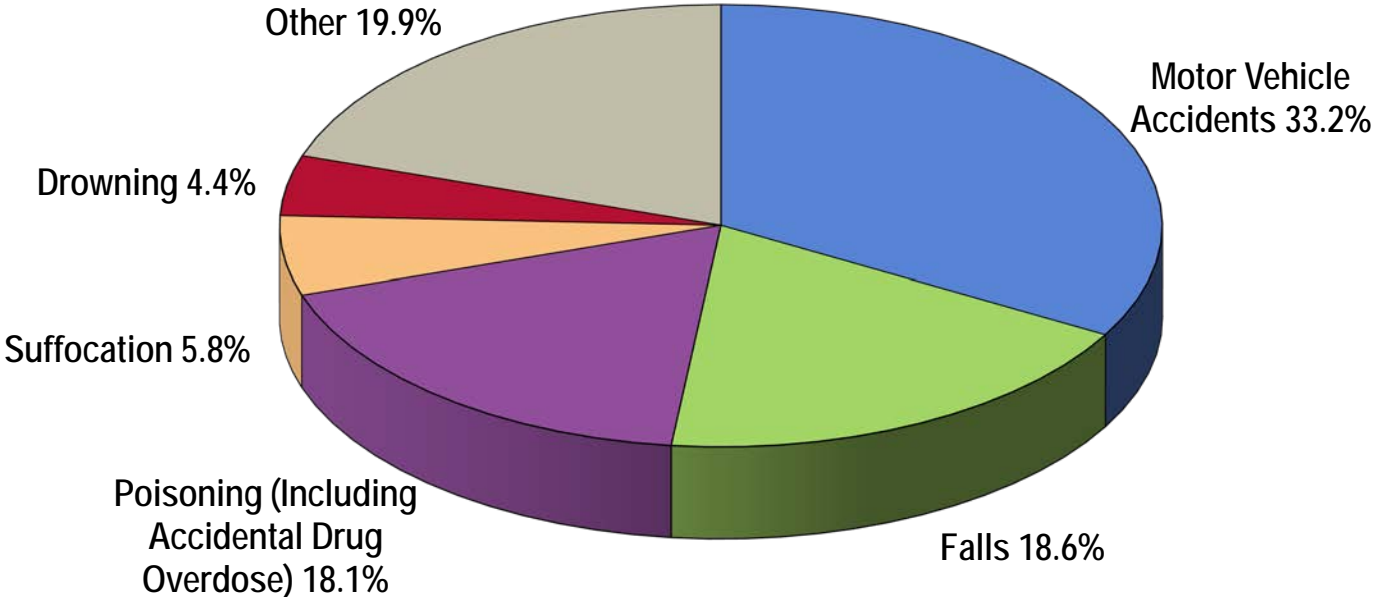### Healthy People 2020 Target = 6.0 or Lower

Location	Rate
Isle of Wight County	7.1
Suffolk City	7.6
Franklin City/Southampton	13.4
Surry/Sussex Counties	10.6
Gates County (NC)	N/A
OHF Service Area	8.7
VA	7.1
NC	6.1
US	6.5

Sources:
- CDC WONDER Online Query System. Centers for Disease Control and Prevention, National Center for Health Statistics, Division of Vital Statistics. Data extracted October 2017.
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective MICH-1.3]

Notes:
- Infant deaths include deaths of children under 1 year old.
- This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► **Injury & Violence**

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Leading Causes of Accidental Death
(OHF Service Area, 2013–2015)

Other 19.9%

Motor Vehicle
Accidents 33.2%

Drowning 4.4%

Suffocation 5.8%

Poisoning (Including
Accidental Drug
Overdose) 18.1%

Falls 18.6%

Sources: ● CDC WONDER Online Query System. Centers for Disease Control and
Informatics. Data extracted October 2017.

Notes: ● Deaths are coded using the Tenth Revision of the International Statistical
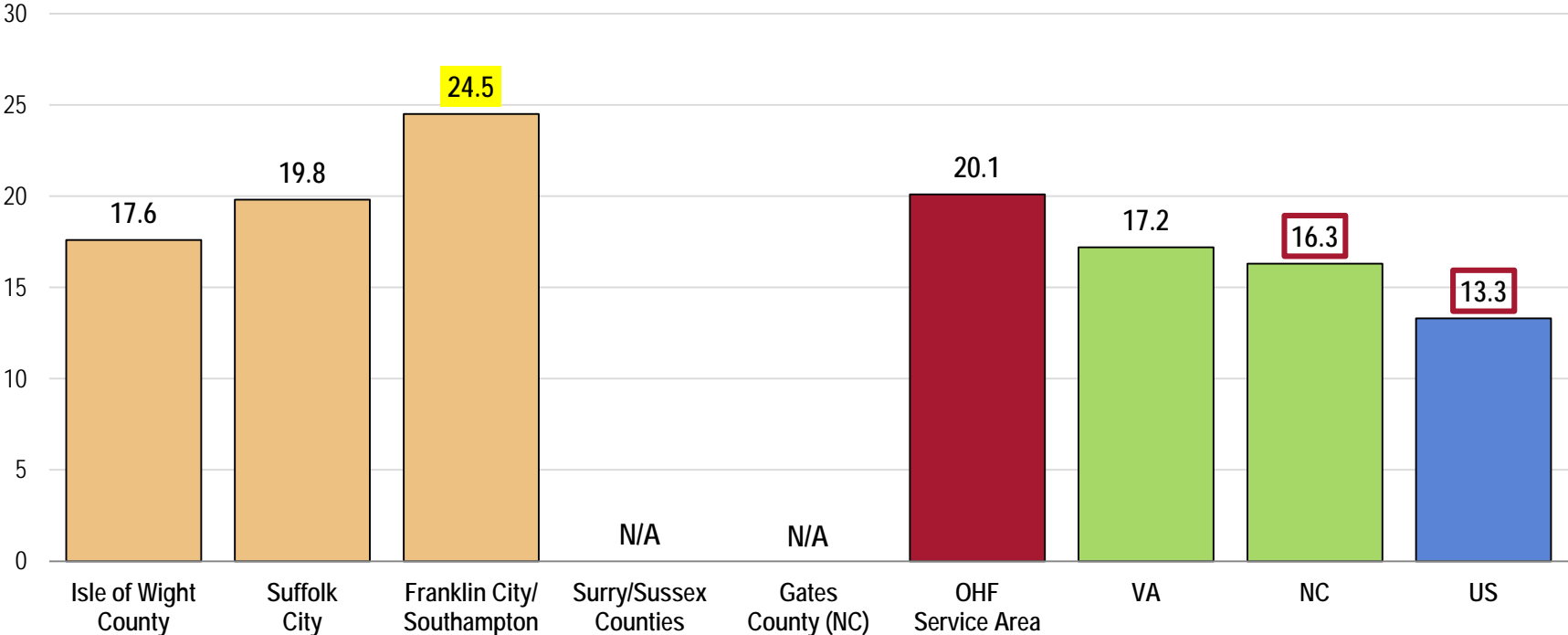
Death rates attributed to falls or drugs are
better than found nationally (and for VA),
but **motor vehicle crash** deaths are worse.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► **Kidney Disease**

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.

Kidney Disease: Age-Adjusted Mortality
(2013–2015 Annual Average Deaths per 100,000 Population)

Bar chart values:
- Isle of Wight County: 17.6
- Suffolk City: 19.8
- Franklin City/Southampton: 24.5
- Surry/Sussex Counties: N/A
- Gates County (NC): N/A
- OHF Service Area: 20.1
- VA: 17.2
- NC: 16.3
- US: 13.3

Sources: ● CDC WONDER Online Query System. Centers for Disease Control and [...] Informatics. Data extracted October 2017.

Notes: ● Deaths are coded using the Tenth Revision of the International Statistic[...]
● Rates are per 100,000 population, age-adjusted to the 2000 US Standa[...]

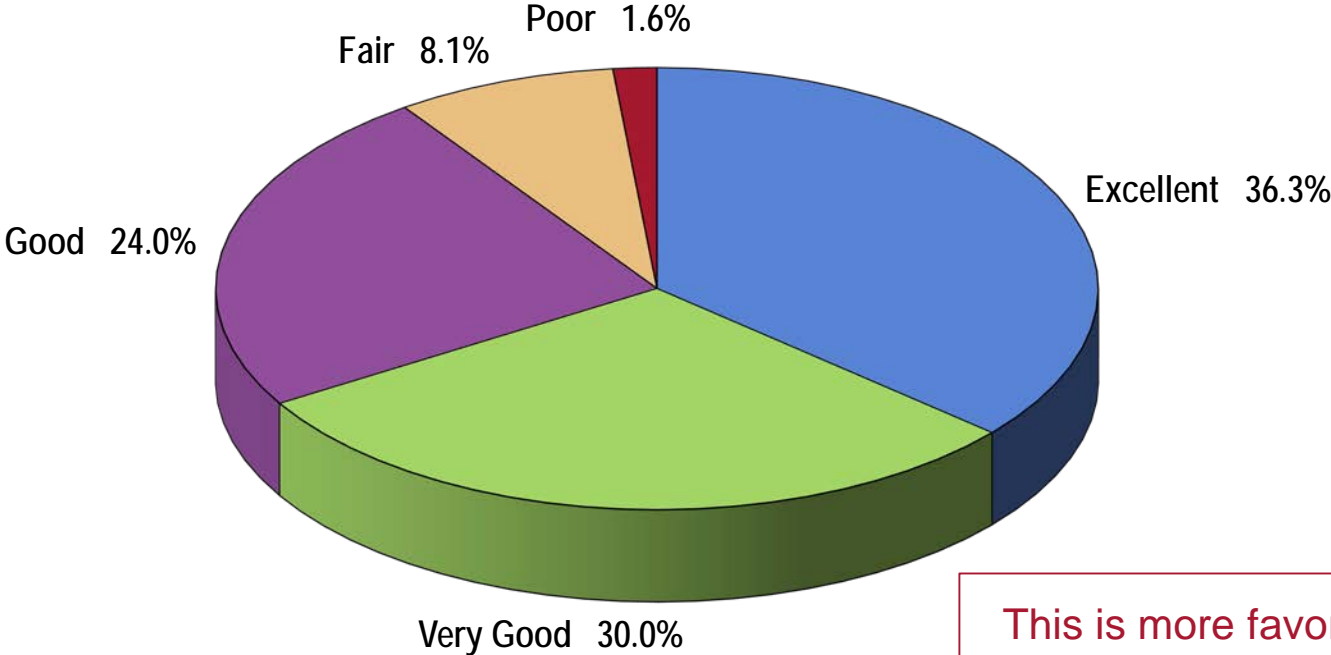Mortality is more than twice as high among African Americans as other residents.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► **Mental Health**

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.

Self-Reported Mental Health Status
(OHF Service Area, 2017)

Poor 1.6%

Fair 8.1%

Excellent 36.3%

Good 24.0%

Very Good 30.0%

This is more favorable than found nationally.

Other indicators, such as suicide rate, are also better than found nationally.

Sources: ● 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 99]
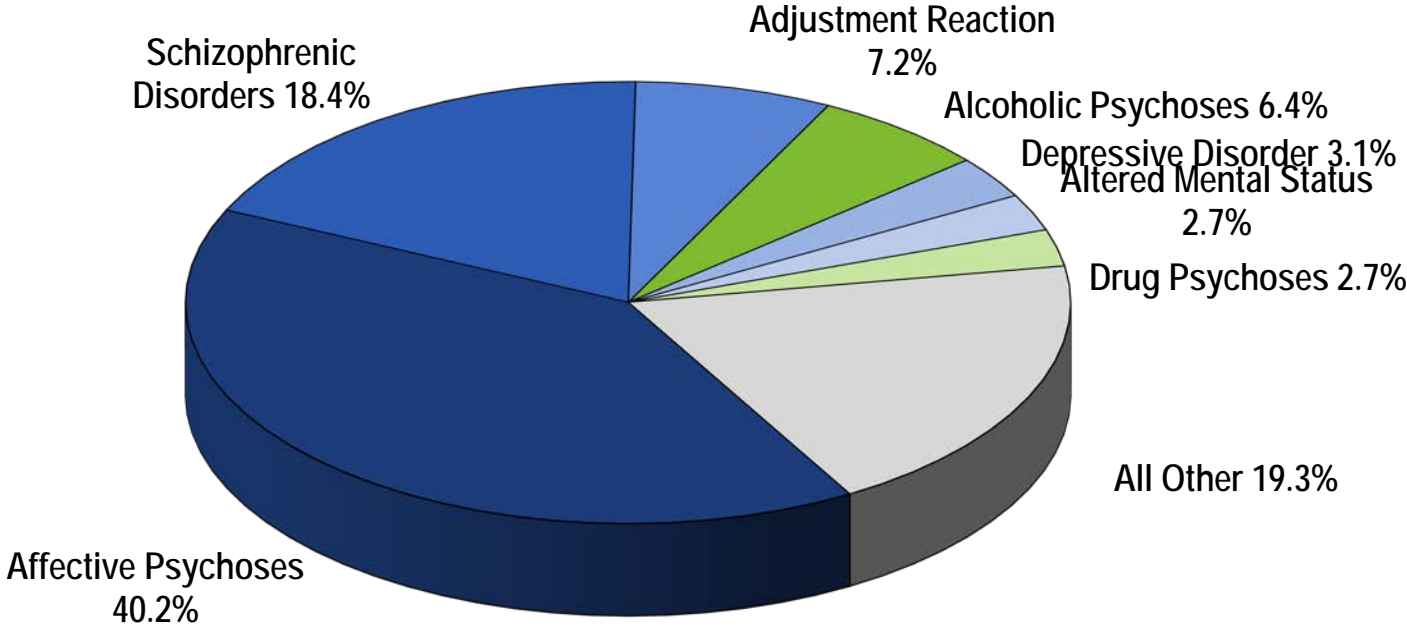Notes: ● Asked of all respondents.
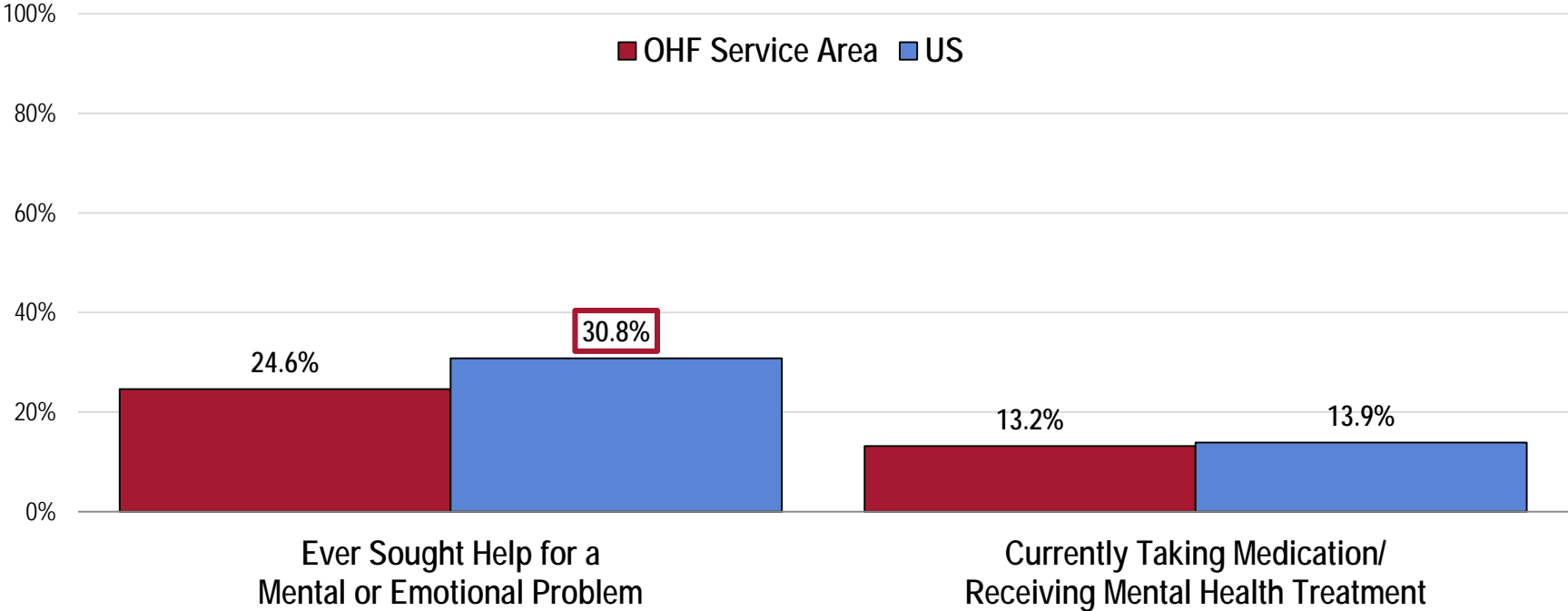
Professional Research Consultants, Inc.

Mental Health Treatment

Legend: ■ OHF Service Area ■ US

Ever Sought Help for a Mental or Emotional Problem
- OHF Service Area: 24.6%
- US: 30.8%

Currently Taking Medication/ Receiving Mental Health Treatment
- OHF Service Area: 13.2%
- US: 13.9%

Professional Research Consultants, Inc.

Total Behavioral Health Hospitalization
(OHF Service Area, Excluding Gates County; 2013)

Schizophrenic Disorders 18.4%

Adjustment Reaction 7.2%

Alcoholic Psychoses 6.4%

Depressive Disorder 3.1%

Altered Mental Status 2.7%

Drug Psychoses 2.7%

All Other 19.3%

Affective Psychoses 40.2%

Sources: ● Sentra Obici Hospital datafile 9/30/16
Notes: ● Results exclude Gates County data.

Professional Research Consultants, Inc.

Behavioral Health Hospitalization Age-Adjusted Discharges
(2013 Age-Adjusted Discharges per 100,000 Population)

Bar chart with values:
- Isle of Wight County: 258.9
- Suffolk City: 193.8
- Franklin City: 527.2
- Southampton County: 519.4
- Surry County: 902.1
- Sussex County: 4,569.9
- OHF Service Area*: 601.8 (1,003 Discharges)
- VA: 650.4
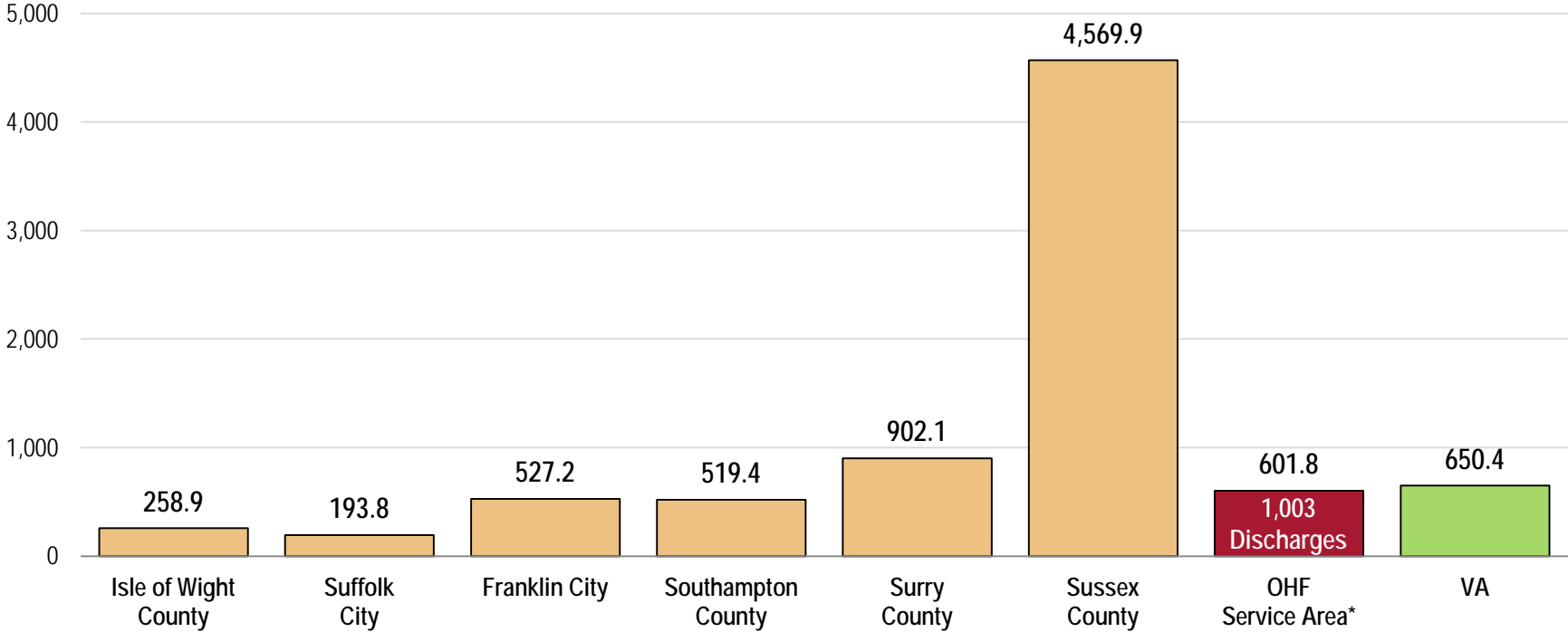
Sources:
- Sentara Obici Hospital datafile 9/30/16

Notes:
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- *Results exclude Gates County data.

Perceptions of Mental Health
as a Problem in the Community
(Key Informants, 2017)

■ Major Problem ■ Moderate Problem ■ Minor Problem ■ No Problem At All

| 54.5% | 36.4% | 9.1% |

Sources: ● PRC Online Key Informant Survey, Professional Research Consultants, Inc.
Notes: ● Asked of all respondents.

Top Reasons for "Major Problem" Responses:
• Access to Care/Services
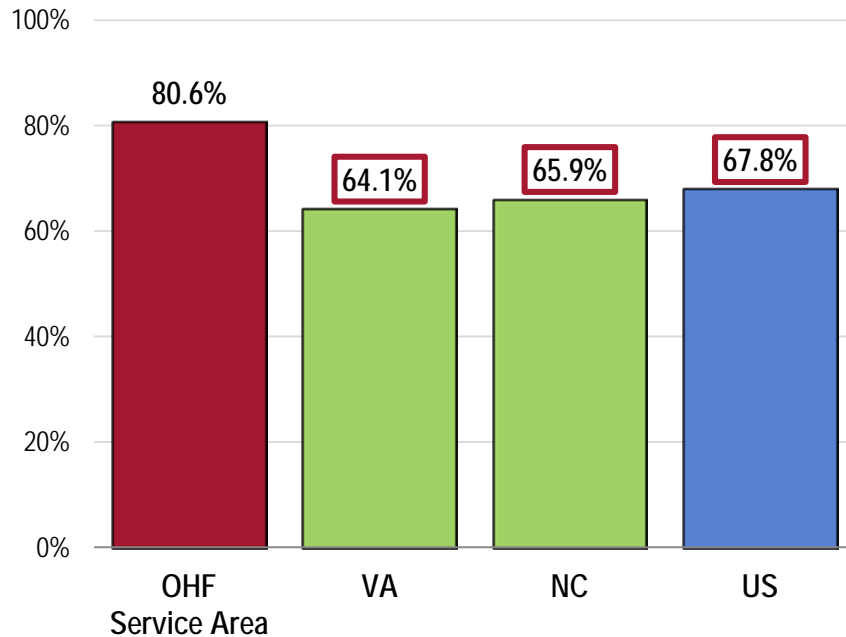• Lack of Providers
• Denial/Stigma

Key Informant Input

Professional Research Consultants, Inc.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► **Nutrition, Physical Activity & Weight**

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.

Adult Overweight Prevalence
(Percent of Adults With a Body Mass Index of 25.0 or Higher)

Adult Obesity Prevalence
(Percent of Adults With a Body Mass Index of 30.0 or Higher)
Healthy People 2020 Target = 30.5% or Lower

Adult Overweight Prevalence chart:
- OHF Service Area: 80.6%
- VA: 64.1%
- NC: 65.9%
- US: 67.8%

Adult Obesity Prevalence chart:
- 59.7% in Surry/Sussex
- OHF Service Area: 45.6%
- VA: 29.2%
- NC: 30.1%
- US: 32.8%

54.4% of overweight adults are **trying to lose weight** (US=61.3%).
- 43.3% in Gates County
- 39.1% in Franklin/Southampton
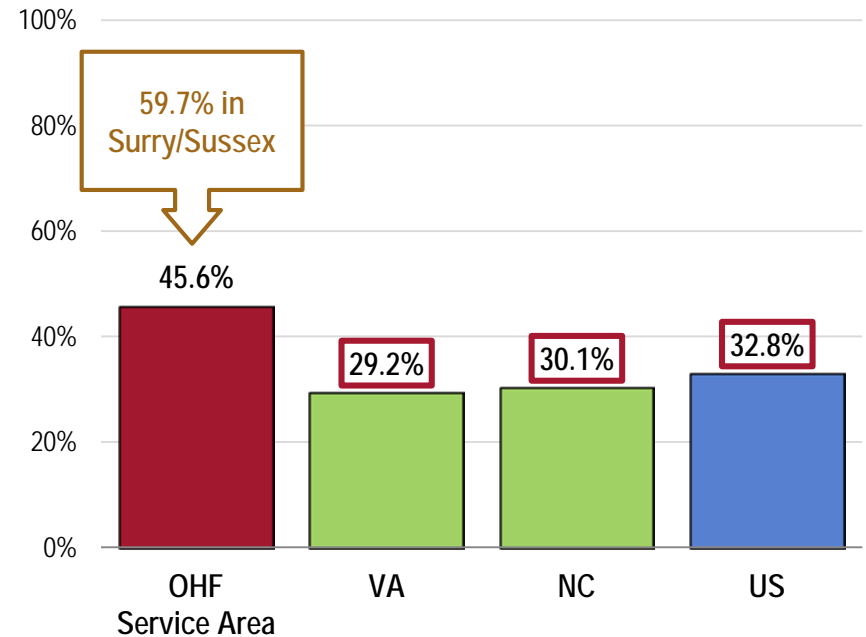
Obesity is particularly high in low-income and African American residents.

Prevalence of Obesity
(OHF Service Area by Health Opportunity Index Classification)

Very Low — 63.9%
Low — 48.3%
Average — 40.3%
High — 43.2%
Very High — 40.0%

| Very Low Health Opportunities | Low Health Opportunities | Average Health Opportunities | High Health Opportunities | Very High Health Opportunities |

Map legend: Very Low, Low, Average, High, Very High
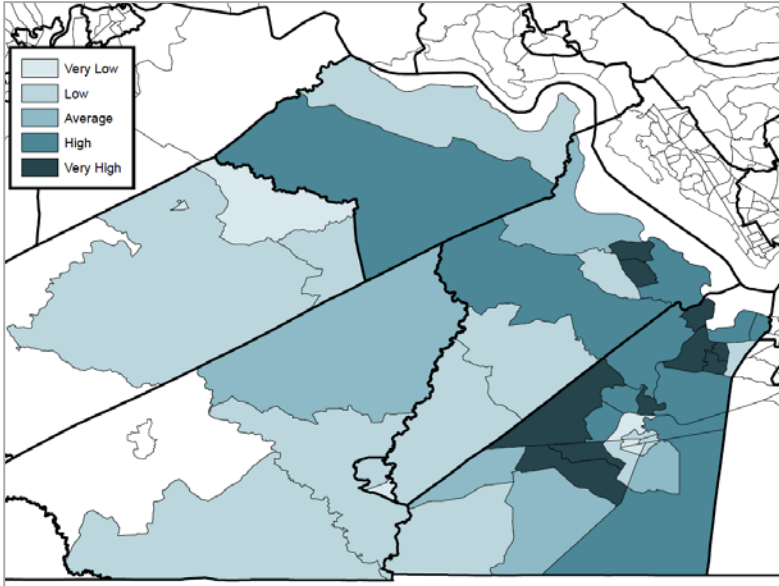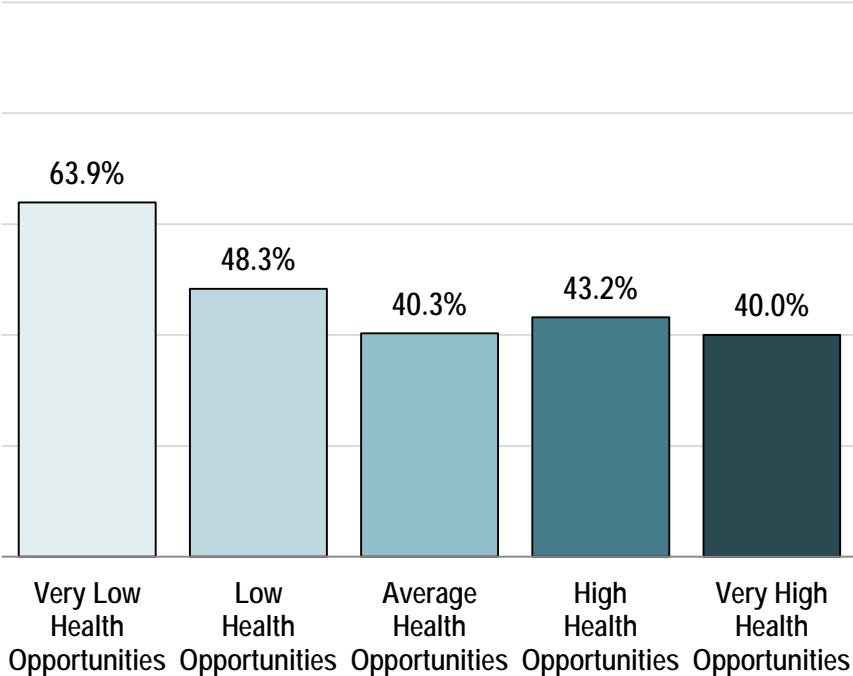
Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 158]
Notes: ● Based on reported heights and weights, asked of all respondents.
● The definition of obesity is having a body mass index (BMI), a ratio of weight to height (kilograms divided by meters squared), greater than or equal to 30.0, regardless of gender.
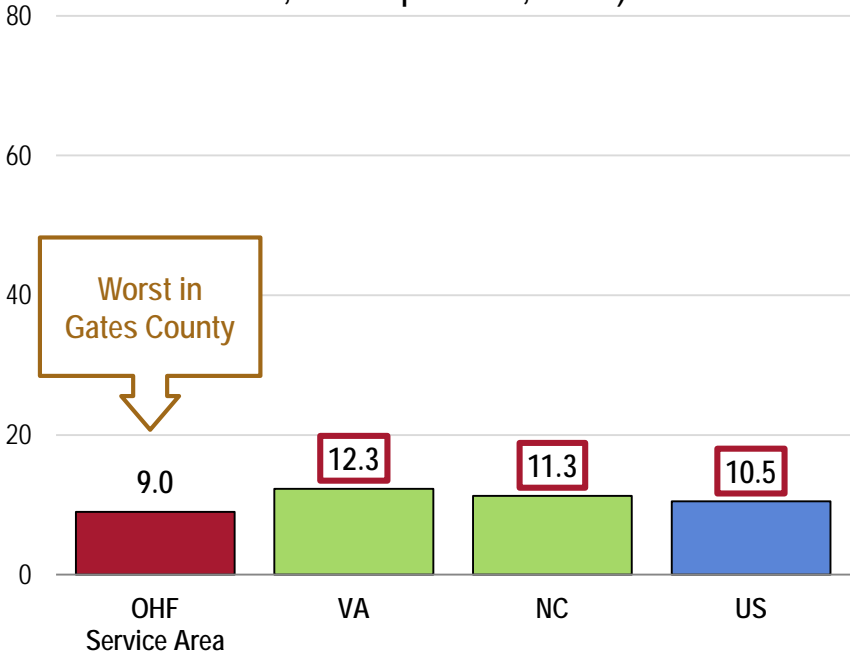
Relationship of Overweight With Other Health Issues
(By Weight Classification; OHF Service Area, 2017)

Legend: ☐ Healthy Weight ☐ Overweight/Not Obese ■ Obese

	Healthy Weight	Overweight/Not Obese	Obese
High Blood Pressure	32.3%	44.3%	56.6%
High Cholesterol	27.5%	41.8%	45.2%
Chronic Depression	21.5%	27.1%	33.3%
Diabetes	6.3%	13.5%	27.3%
Child Is Obese	12.5%	15.8%	23.9%
"Fair/Poor" Health	12.9%	16.6%	21.1%
Asthma	6.1%	9.5%	14.7%
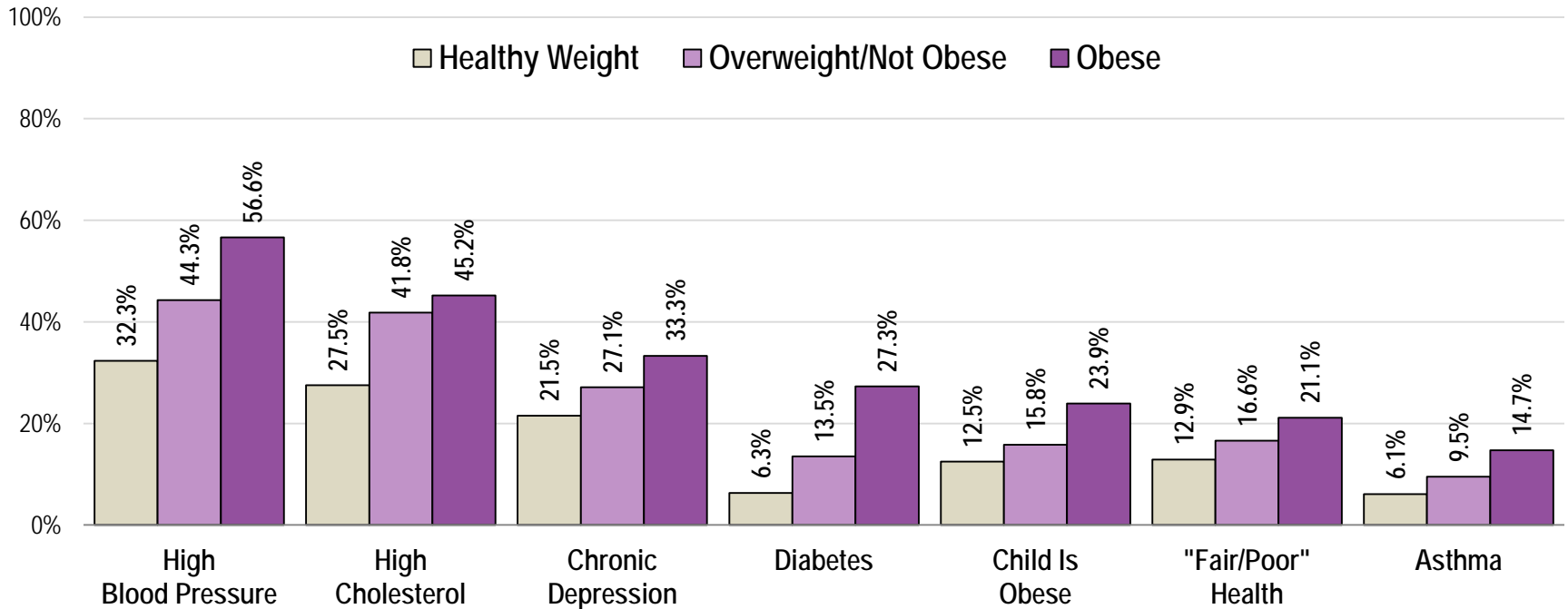
Sources: ● 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 5, 100, 129, 130, 138, 140, 162]

Notes: ● Based on reported heights and weights, asked of all respondents.

Professional Research Consultants, Inc.

Population With Low Food Access
(Percent of Population That Is Far From a Supermarket or Large Grocery Store, 2015)
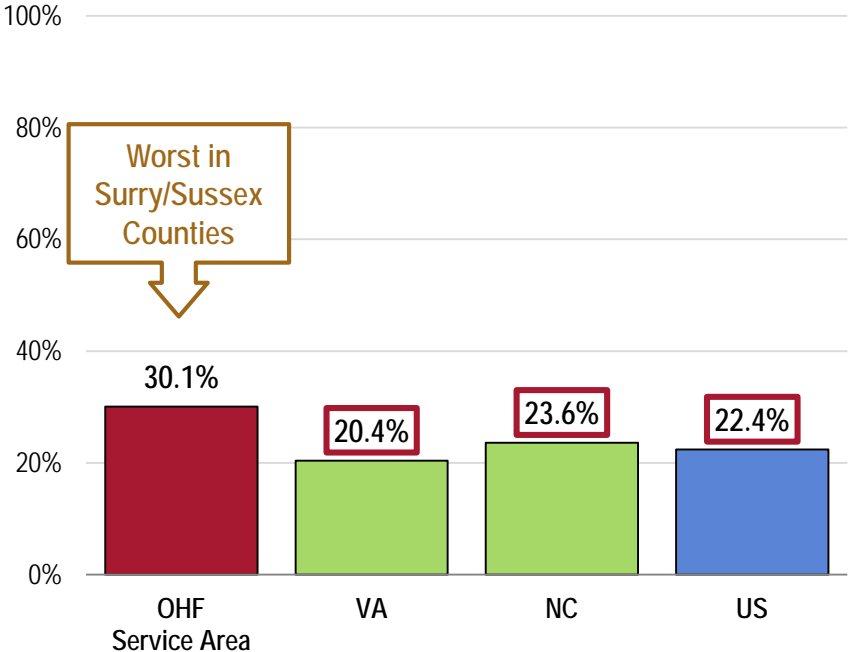
Population With Recreation & Fitness Facility Access
(Number of Recreation & Fitness Facilities per 100,000 Population, 2015)

Worst in Surry/Sussex Counties

	OHF Service Area	VA	NC	US
Low Food Access	30.1%	20.4%	23.6%	22.4%

Worst in Gates County

	OHF Service Area	VA	NC	US
Rec & Fitness	9.0	12.3	11.3	10.5

Sources: ● US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas (FARA).
● US Census Bureau, County Business Patterns. Additional data analysis by CARES.
● Retrieved October 2017 from Community Commons at http://www.chna.org.
Notes: ● This indicator reports the percentage of the population living in census tracts designated as food deserts. A food desert is defined as low-income areas where a significant number or share of residents is far from a supermarket, where "far" is more than 1 mile in urban areas and more than 10 miles in rural areas.
● Recreation and fitness facilities are defined by North American Industry Classification System (NAICS) Code 713940 , which include *Establishments engaged in operating facilities which offer "exercise and other active physical fitness conditioning or recreational sports activities". Examples include athletic clubs, gymnasiums, dance centers, tennis clubs, and swimming pools.*

Find It "Very" or "Somewhat"
Difficult to Buy Affordable Fresh Produce
(OHF Service Area by Health Opportunity Index Classification)
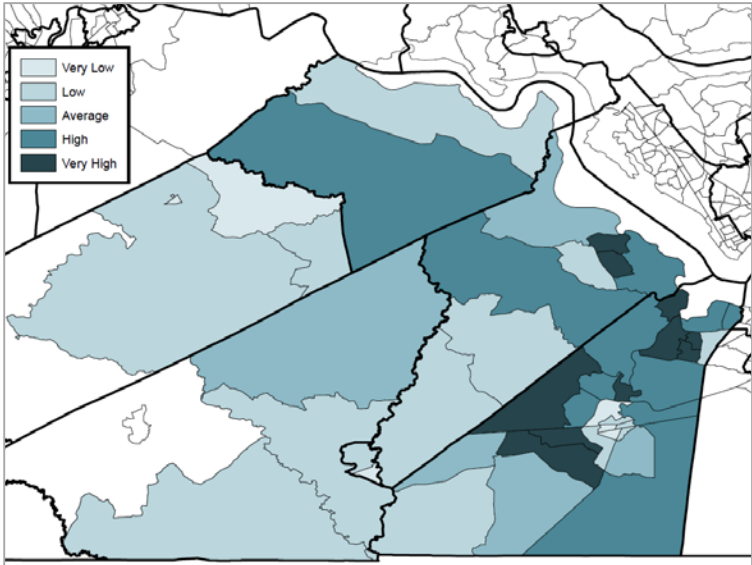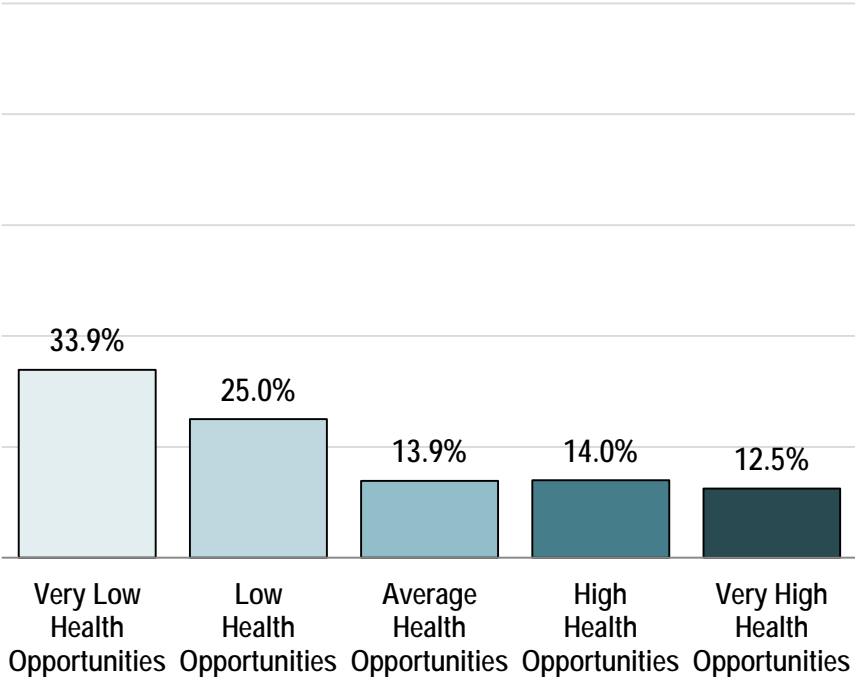
Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 86]
Notes: ● Asked of all respondents.

Perceptions of Nutrition, Physical Activity, and Weight as a Problem in the Community
(Key Informants, 2017)

■ Major Problem   ▢ Moderate Problem   ■ Minor Problem   ■ No Problem At All

57.1%	27.0%	15.9%

Sources: ● PRC Online Key Informant Survey, Professional Research Consultants, Inc.
Notes: ● Asked of all respondents.

Top Reasons for "Major Problem" Responses:
• Health Education/Awareness
• Insufficient Physical Activity
• Food Deserts & Fast Food
• Lifestyle

Key Informant Input

Professional Research Consultants, Inc.

Areas of Opportunity

- ► Access to Health Services
- ► Cancer
- ► Diabetes
- ► Heart Disease & Stroke
- ► Infant Health & Family Planning
- ► Injury & Violence
- ► Kidney Disease
- ► Mental Health
- ► Nutrition, Physical Activity & Weight
- ► **Potentially Disabling Conditions**
- ► Respiratory Diseases
- ► Sexually Transmitted Diseases
- ► Substance Abuse

Q & A

Chronic conditions measured:

- **Arthritis**
- Asthma
- Cancer
- Chronic Back Pain
- **Diabetes**
- Depression
- Heart Attack/ Angina
- **High Cholesterol**
- **High Blood Pressure**
- Kidney Disease
- **Lung Disease**
- **Obesity**
- Osteoporosis
- Stroke

Currently Suffer From Multiple Chronic Conditions
(OHF Service Area, 2017)

Category	Percentage
Men	65.6%
Women	68.3%
18 to 39	43.1%
40 to 64	73.7%
65+	87.9%
Low Income	85.7%
Mid/High Income	61.9%
White	65.0%
Black	69.1%
Other	72.5%
OHF Service Area	67.1%
US	30.8%

Highest (84.3%) in Surry/Sussex Counties.

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Multiple Chronic Conditions
(OHF Service Area by Health Opportunity Index Classification)

Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 197]
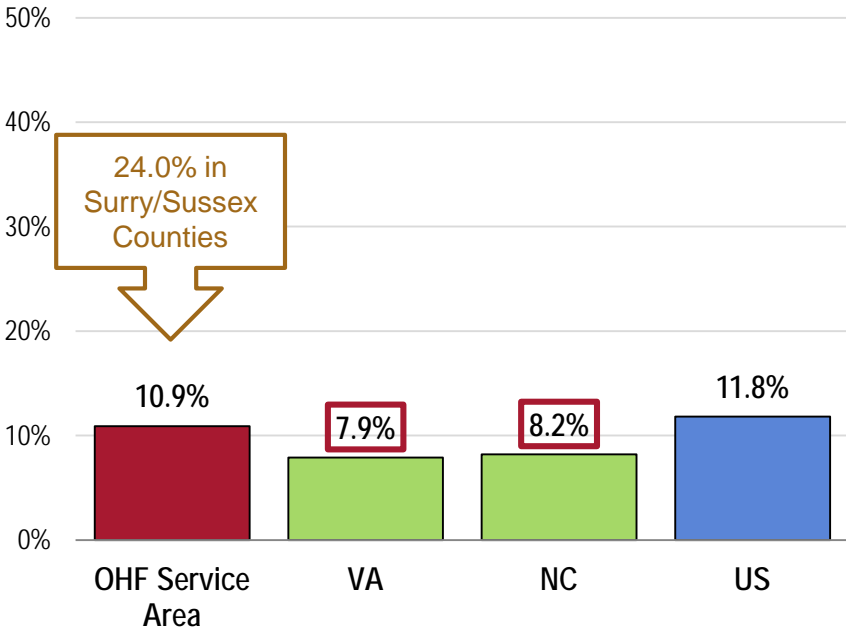Notes: ● Asked of all respondents.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► **Respiratory Diseases**
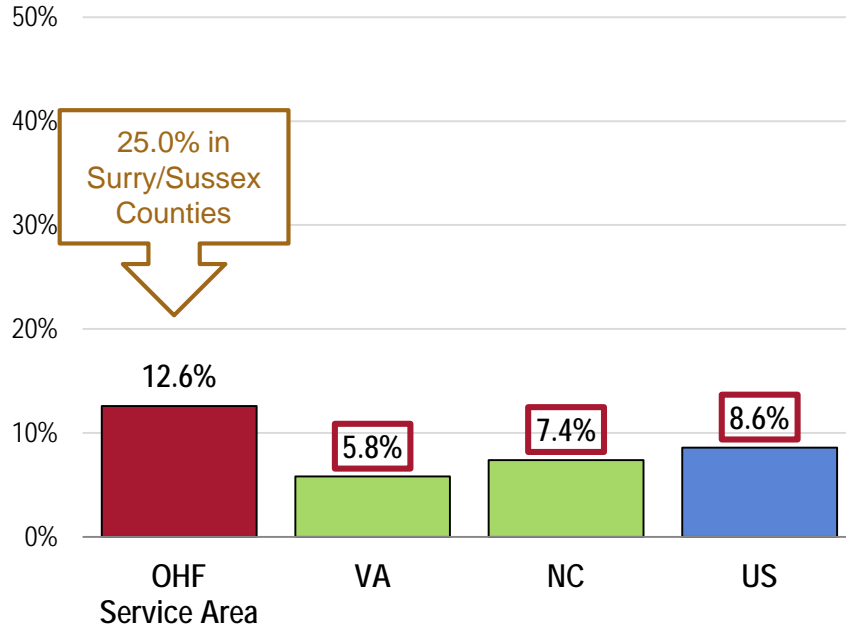
► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.

Currently Have Asthma
(OHF Service Area, 2017)

24.0% in Surry/Sussex Counties

OHF Service Area	10.9%
VA	7.9%
NC	8.2%
US	11.8%

Prevalence of
Chronic Obstructive Pulmonary Disease (COPD)

25.0% in Surry/Sussex Counties

OHF Service Area	12.6%
VA	5.8%
NC	7.4%
US	8.6%

Sources: ● 2017 PRC Community Health Survey, Professional Research Consultants, Inc.
Notes: ● Asked of all respondents.

Current Asthma
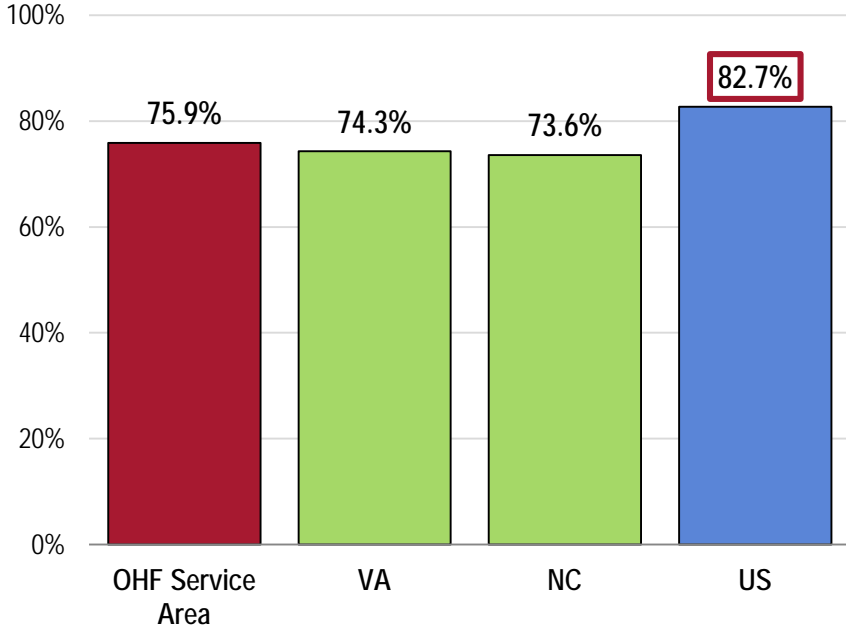## (OHF Service Area by Health Opportunity Index Classification)

Sources: ● PRC Community Health Survey, Professional Research Consultants, Inc. [Item 138]
Notes: ● Asked of all respondents.
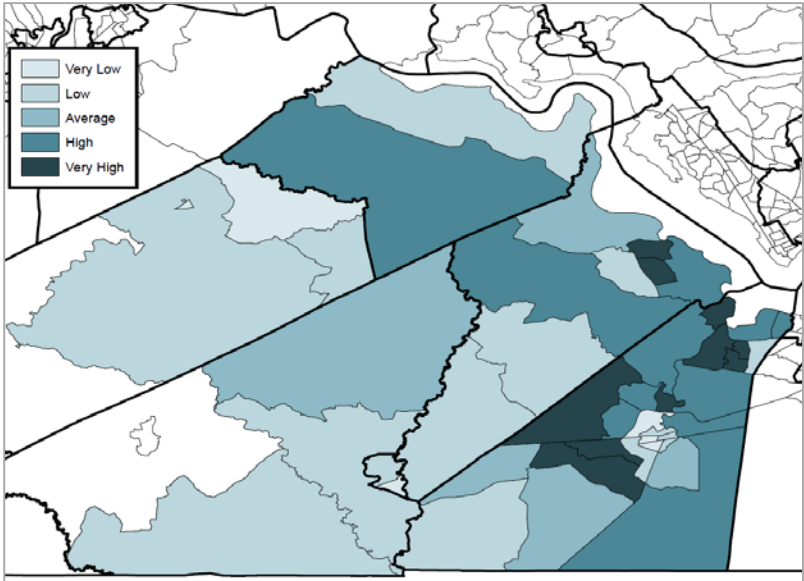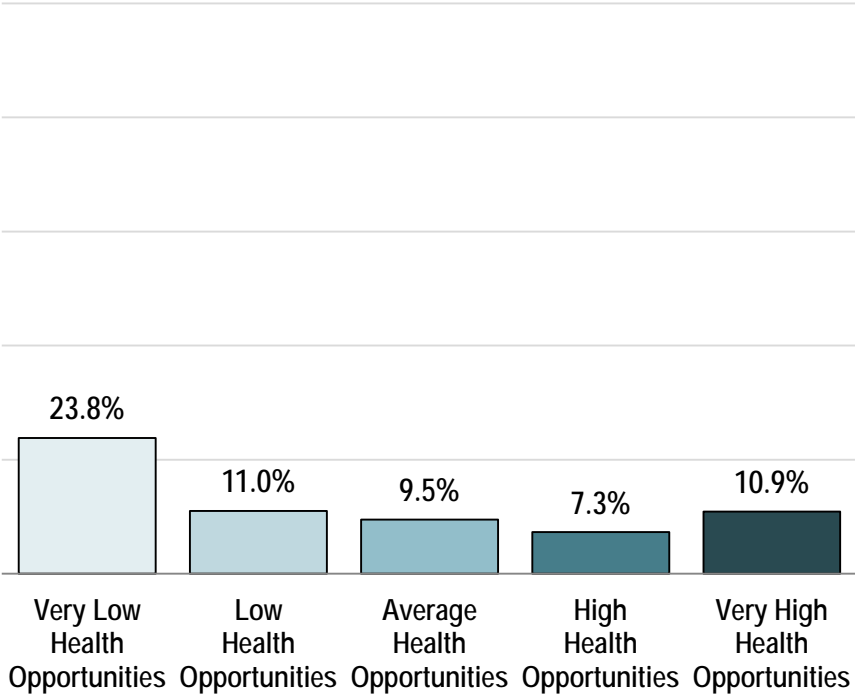
Correlation with COPD also exists, although not quite as clear.

Older Adults:
Flu Vaccination in the Past Year
(Among Adults Age 65+)
Healthy People 2020 Target = 70.0% or Higher

- OHF Service Area: 68.3%
- VA: 61.5%
- NC: 70.5%
- US: 76.8%
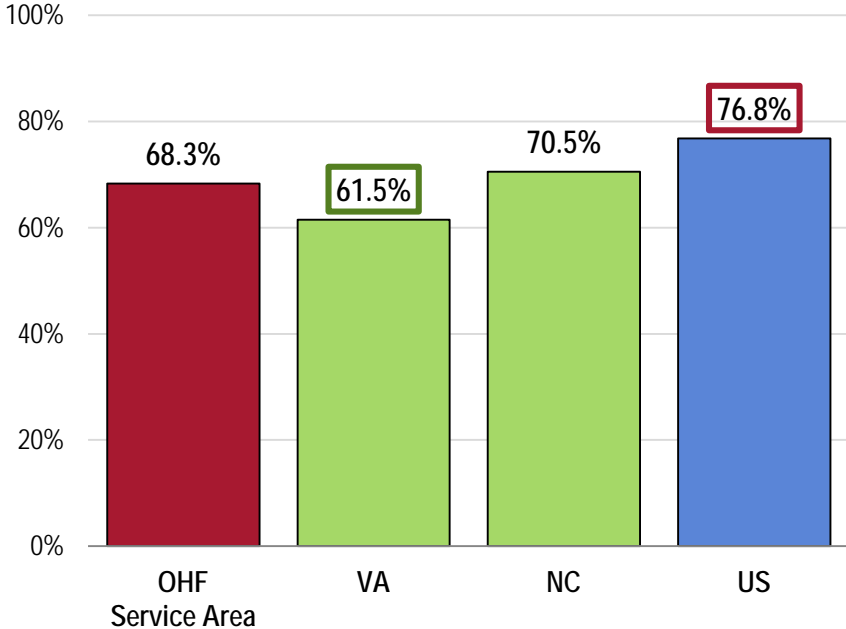
Older Adults:
Ever Had a Pneumonia Vaccine
(Among Adults Age 65+)
Healthy People 2020 Target = 90.0% or Higher

- OHF Service Area: 75.9%
- VA: 74.3%
- NC: 73.6%
- US: 82.7%

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 143-144]
- 2017 PRC National Health Survey, Professional Research Consultants, Inc.
- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2015 VA and NC data.
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IID-12.12]

Notes:
- Reflects respondents 65 and older.
- "High-Risk" includes adults age 18 to 64 who have been diagnosed with heart disease, diabetes, or respiratory disease.
- *Franklin City/Southampton and Gates County were combined in order to provide a more robust sample size for this indicator.
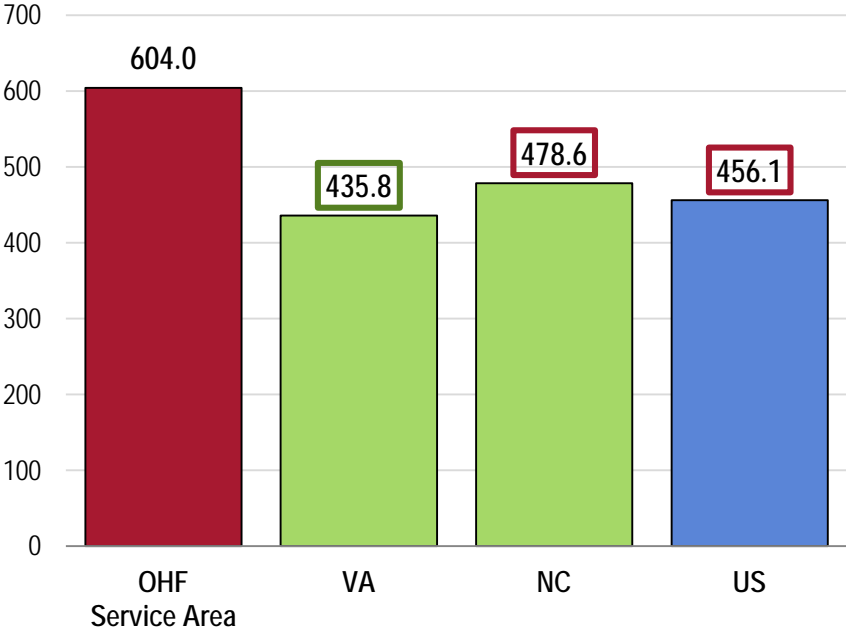
Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► **Sexually Transmitted Diseases**

► Substance Abuse

Q & A

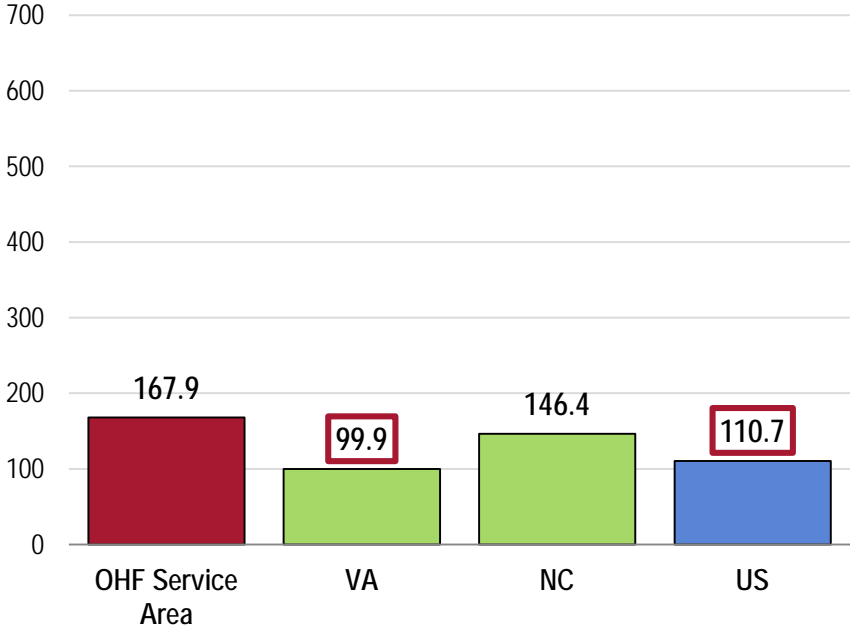**Professional Research Consultants, Inc.**

Chlamydia Incidence
(Incidence Rate per 100,000 Population, 2014)

OHF Service Area	VA	NC	US
604.0	435.8	478.6	456.1

Gonorrhea Incidence
(Incidence Rate per 100,000 Population, 2014)

OHF Service Area	VA	NC	US
167.9	99.9	146.4	110.7

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 143-144]
- 2017 PRC National Health Survey, Professional Research Consultants, Inc.
- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2015 VA and NC data.
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IID-12.12]

Notes:
- Reflects respondents 65 and older.
- "High-Risk" includes adults age 18 to 64 who have been diagnosed with heart disease, diabetes, or respiratory disease.
- *Franklin City/Southampton and Gates County were combined in order to provide a more robust sample size for this indicator.
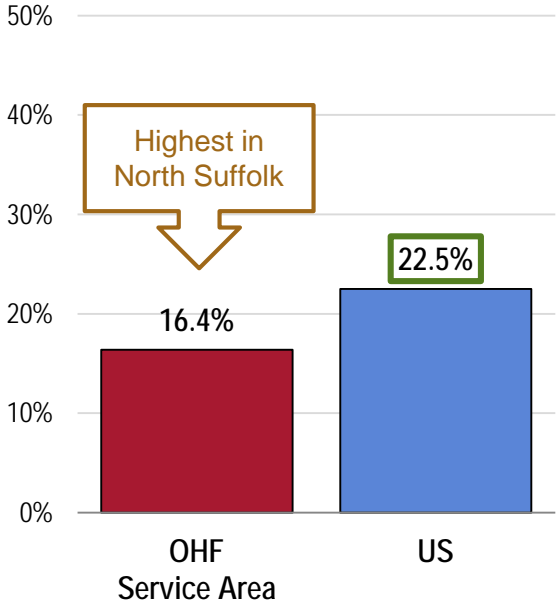
Professional Research Consultants, Inc.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► **Substance Abuse**

Q & A
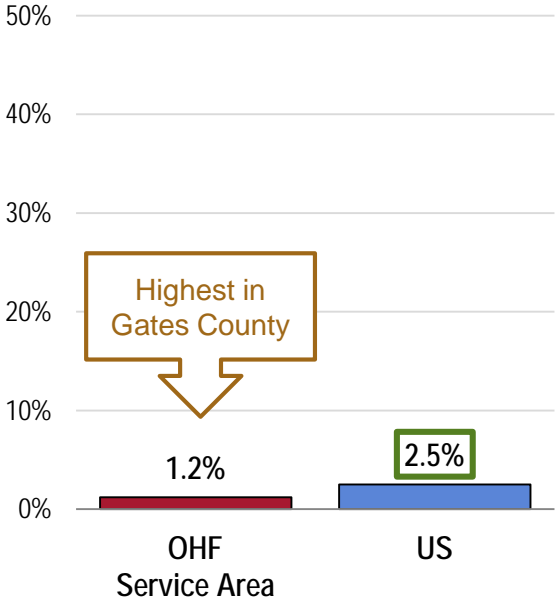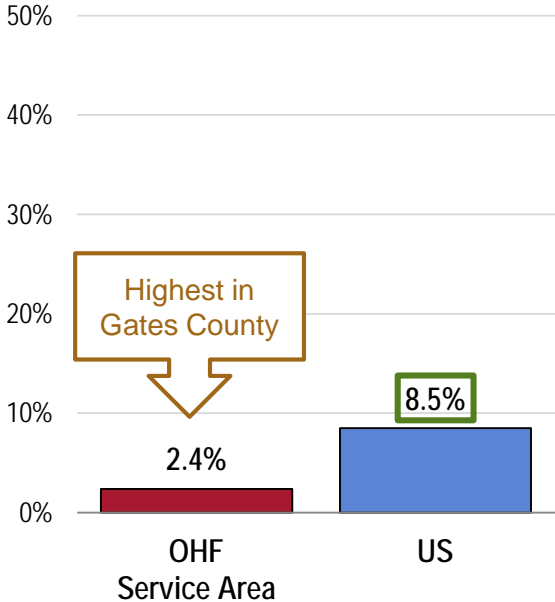
Professional Research Consultants, Inc.

Alcohol & Drug Use

Excessive Drinkers

- Highest in North Suffolk
- OHF Service Area: 16.4%
- US: 22.5%

Illicit Drug Use in Past Month

- Highest in Gates County
- OHF Service Area: 1.2%
- US: 2.5%

### Used Marijuana in Past Month

- Highest in Gates County
- OHF Service Area: 2.4%
- US: 8.5%

Sources: ● 2017 PRC Community Health Survey, Professional Research Consultants, Inc,
● 2017 PRC National Health Survey, Professional Research Consultants, Inc.
● US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective SA-15]
Notes: ● Asked of all respondents.

Drug-Induced Deaths: Age-Adjusted Mortality
(2013–2015 Annual Average Deaths per 100,000 Population)
Healthy People 2020 Target = 11.3 or Lower
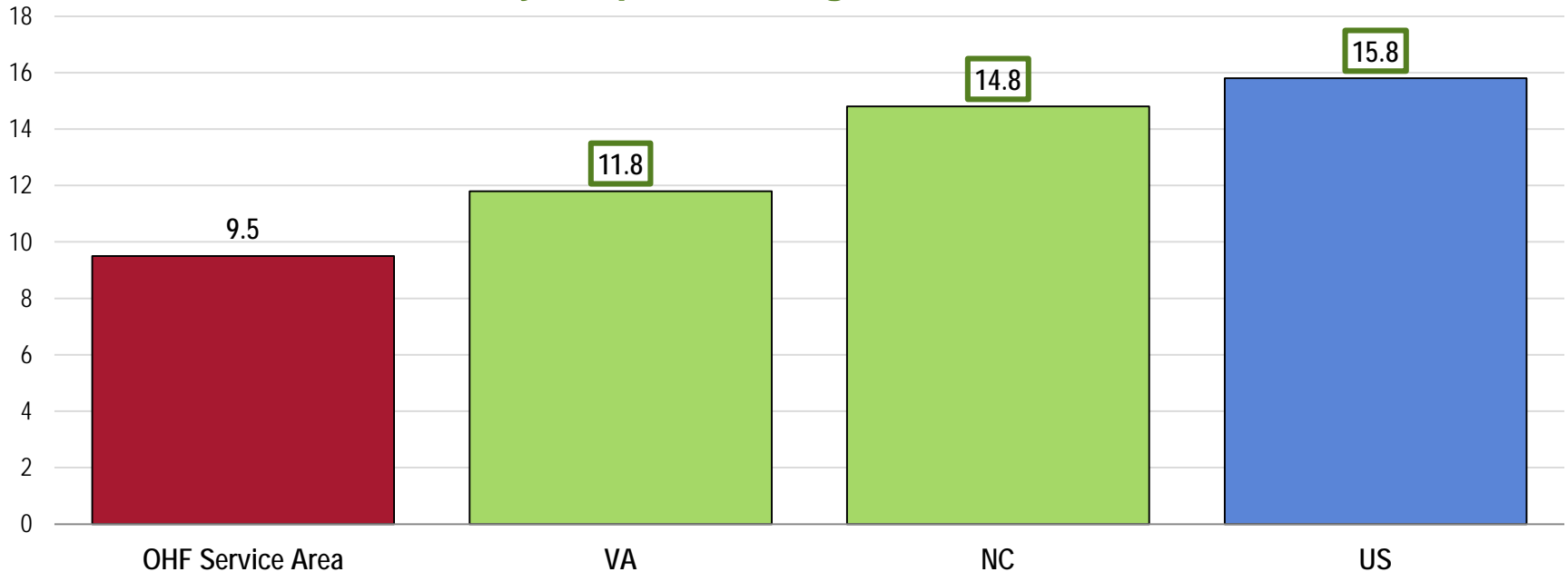
Category	Value
OHF Service Area	9.5
VA	11.8
NC	14.8
US	15.8

Sources:
- CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted October 2017.
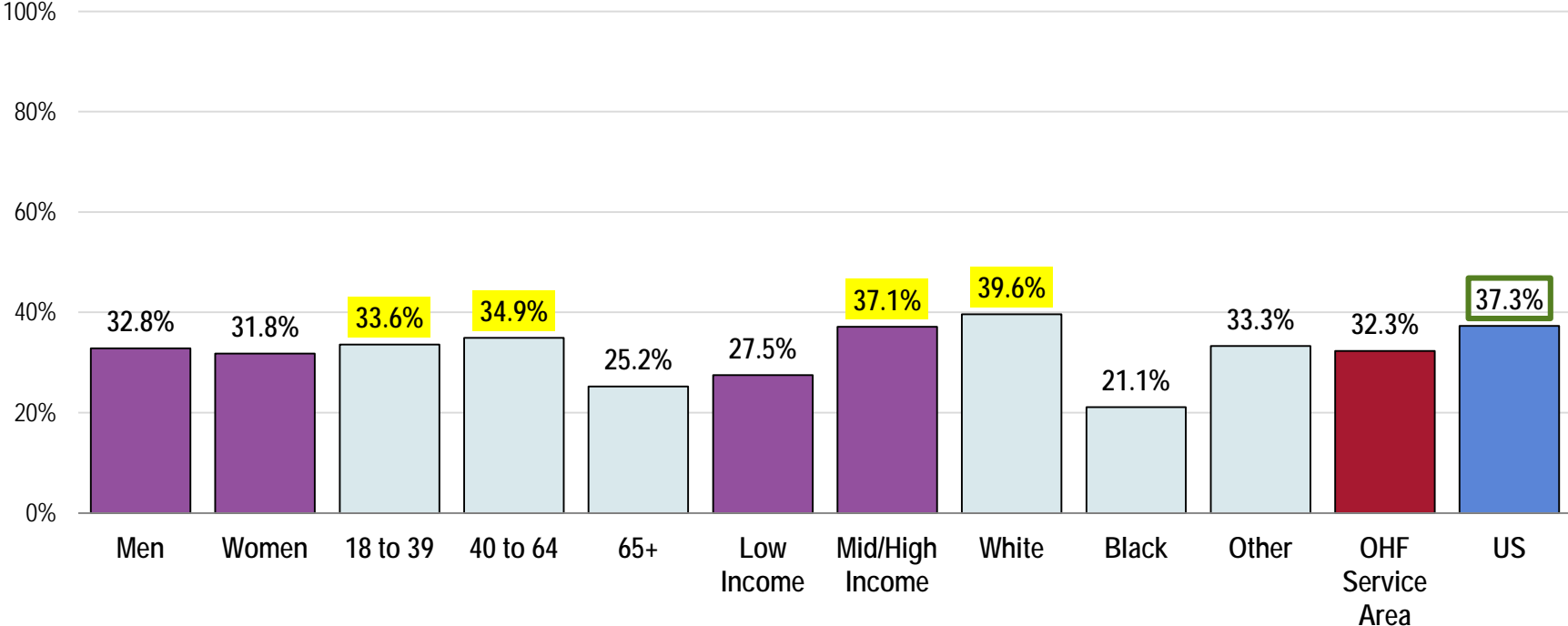- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective SA-12]

Notes:
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

Life Has Been Negatively Affected
# by Substance Abuse (by Self or Someone Else)
(OHF Service Area, 2017)

Category	Percentage
Men	32.8%
Women	31.8%
18 to 39	33.6%
40 to 64	34.9%
65+	25.2%
Low Income	27.5%
Mid/High Income	37.1%
White	39.6%
Black	21.1%
Other	33.3%
OHF Service Area	32.3%
US	37.3%

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 61]

Notes:
- Asked of all respondents.
- Includes response of "a great deal," "somewhat," and "a little."
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e
- Income categories reflect respondent's household income as a ratio to the federal pover
  with incomes up to 200% of the federal poverty level; "Mid/High Income" includes housel

Only 1.2% of residents have ever sought help for an alcohol/drug problem (US=3.4%).

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Perceptions of Substance Abuse
as a Problem in the Community
(Key Informants, 2017)

■ Major Problem ■ Moderate Problem ■ Minor Problem ■ No Problem At All

| 49.2% | 39.7% | 9.5% | |
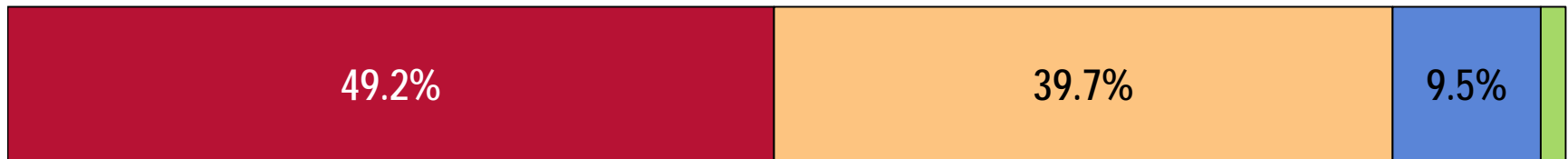
Sources: ● PRC Online Key Informant Survey, Professional Research Consultants, Inc.
Notes: ● Asked of all respondents.

Top Reasons for "Major Problem" Responses:
• Access to Care/Services
• Denial/Stigma
• Affordable Care/Services
Most problematic substances included: heroin or
other opioids, alcohol, and prescription medications.

Key Informant Input

Professional Research Consultants, Inc.

Areas of Opportunity

► Access to Health Services

► Cancer

► Diabetes

► Heart Disease & Stroke

► Infant Health & Family Planning

► Injury & Violence

► Kidney Disease

► Mental Health

► Nutrition, Physical Activity & Weight

► Potentially Disabling Conditions

► Respiratory Diseases

► Sexually Transmitted Diseases

► Substance Abuse

Q & A

Professional Research Consultants, Inc.