2017 PRC Community Health Needs Assessment

Obici Healthcare Foundation Service Area
Western Tidewater, Virginia

Prepared for:
OBICI HEALTHCARE FOUNDATION
By Professional Research Consultants, Inc.
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

**Review of Existing Data**
- City/County-level and aggregate data
- Census data, vital statistics, other health-related data
- Sentara hospital data

**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

**PRC Community Health Survey**
- Population-based, stratified by county/city
- Targets health status, experience, behaviors
- Conducted via landline and cell phones
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%.
Population & Survey Sample Characteristics
(Total Area, 2017)

<table>
<thead>
<tr>
<th>Category</th>
<th>Actual Population</th>
<th>Final Survey Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>48.0%</td>
<td>47.8%</td>
</tr>
<tr>
<td>Women</td>
<td>52.0%</td>
<td>52.2%</td>
</tr>
<tr>
<td>18 to 39</td>
<td>33.4%</td>
<td>32.4%</td>
</tr>
<tr>
<td>40 to 64</td>
<td>44.2%</td>
<td>45.1%</td>
</tr>
<tr>
<td>65+</td>
<td>22.4%</td>
<td>22.5%</td>
</tr>
<tr>
<td>White</td>
<td>59.9%</td>
<td>57.0%</td>
</tr>
<tr>
<td>Black</td>
<td>38.1%</td>
<td>37.3%</td>
</tr>
<tr>
<td>&lt;200% FPL</td>
<td>29.9%</td>
<td>29.9%</td>
</tr>
</tbody>
</table>

Sources:
- 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.

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

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

Notes:
- Reflects respondents age 18 to 64.

- Insured, Employer-Based: 51.0%
- Insured, Self-Purchase: 5.4%
- Insured, Unknown Type: 0.9%
- VA/Military: 16.9%
- Medicaid: 9.5%
- Medicaid & Medicare: 0.6%
- Other Gov't Coverage: 0.4%
- Uninsured/Self-Pay: 9.8%

Adults Age 18-64

- Private Insurance = 57.3%
- Military/VA = 16.9%
- Medicaid/Medicare/Other Gov't = 16.0%
- Uninsured = 9.8%
Lack of Healthcare Insurance Coverage
(Among Adults Age 18-64)
Healthy People 2020 Target = 0.0% (Universal Coverage)

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

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)

<table>
<thead>
<tr>
<th>Health Opportunity Index Classification</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low</td>
<td>10.3%</td>
</tr>
<tr>
<td>Low</td>
<td>14.5%</td>
</tr>
<tr>
<td>Average</td>
<td>16.8%</td>
</tr>
<tr>
<td>High</td>
<td>5.2%</td>
</tr>
<tr>
<td>Very High</td>
<td>4.2%</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Category</th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Other</th>
<th>Total Area</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>11.7</td>
<td>8.0</td>
<td>9.9</td>
<td>9.7</td>
<td>20.7</td>
<td>3.3</td>
<td>11.0</td>
<td>8.5</td>
<td>8.3</td>
<td>9.8</td>
</tr>
</tbody>
</table>

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

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)

The survey found that access difficulties increase for those with multiple chronic conditions.
Experienced Difficulties or Delays of Some Kind in Receiving Needed Healthcare in the Past Year (OHF Service Area by Health Opportunity Index Classification)

<table>
<thead>
<tr>
<th>Health Opportunities</th>
<th>Very Low</th>
<th>Low</th>
<th>Average</th>
<th>High</th>
<th>Very High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>41.7%</td>
<td>43.2%</td>
<td>39.8%</td>
<td>35.7%</td>
<td>31.5%</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Location</th>
<th>Number of Primary Care Physicians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isle of Wight County</td>
<td>55.5</td>
</tr>
<tr>
<td>Suffolk City</td>
<td>96.8</td>
</tr>
<tr>
<td>Franklin City/Southampton</td>
<td>52.7</td>
</tr>
<tr>
<td>Surry/Sussex Counties</td>
<td>21.6</td>
</tr>
<tr>
<td>Gates County (NC)</td>
<td>8.7</td>
</tr>
<tr>
<td>OHF Service Area</td>
<td>122</td>
</tr>
<tr>
<td>VA</td>
<td>72.6</td>
</tr>
<tr>
<td>NC</td>
<td>80.0</td>
</tr>
<tr>
<td>US</td>
<td>87.8</td>
</tr>
</tbody>
</table>

Sources:
- US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File.

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)

<table>
<thead>
<tr>
<th>Health Opportunities</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low</td>
<td>71.1%</td>
</tr>
<tr>
<td>Low</td>
<td>77.1%</td>
</tr>
<tr>
<td>Average</td>
<td>74.6%</td>
</tr>
<tr>
<td>High</td>
<td>78.5%</td>
</tr>
<tr>
<td>Very High</td>
<td>86.5%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Location</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isle of Wight County</td>
<td>8.1%</td>
</tr>
<tr>
<td>North Suffolk</td>
<td>11.6%</td>
</tr>
<tr>
<td>South Suffolk</td>
<td>13.7%</td>
</tr>
<tr>
<td>Franklin City/Southampton</td>
<td>9.5%</td>
</tr>
<tr>
<td>Surry/Sussex Counties</td>
<td>25.1%</td>
</tr>
<tr>
<td>Gates County (NC)</td>
<td>9.4%</td>
</tr>
<tr>
<td>OHF Service Area</td>
<td>11.9%</td>
</tr>
<tr>
<td>US</td>
<td>9.3%</td>
</tr>
</tbody>
</table>

Suffolk City = 13.0%

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)

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
Leading Causes of Death
(OHF Service Area, 2014)

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)

<table>
<thead>
<tr>
<th></th>
<th>OHF Service Area</th>
<th>VA</th>
<th>NC</th>
<th>US</th>
<th>HP2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALL CANCERS</td>
<td>173.8</td>
<td>161.0</td>
<td>167.2</td>
<td>161.0</td>
<td>161.4</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>44.2</td>
<td>42.2</td>
<td>47.6</td>
<td>42.0</td>
<td>45.5</td>
</tr>
<tr>
<td>Prostate Cancer</td>
<td>31.5</td>
<td>19.4</td>
<td>20.0</td>
<td>19.0</td>
<td>21.8</td>
</tr>
<tr>
<td>Female Breast Cancer</td>
<td>29.0</td>
<td>21.7</td>
<td>21.0</td>
<td>20.6</td>
<td>20.7</td>
</tr>
<tr>
<td>Colorectal Cancer</td>
<td>14.5</td>
<td>14.0</td>
<td>14.0</td>
<td>14.4</td>
<td>14.5</td>
</tr>
</tbody>
</table>

**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.
**Cancer Screenings**

- **Mammogram in the Past 2 Years**
  - (Women 50-74)
  - Healthy People 2020 Target = 81.1% or Higher
  - OHF Svc Area: 82.4%
  - VA: 80.0%
  - NC: 80.7%
  - US: 77.0%

- **Pap Smear in the Past 3 Years**
  - (Women Age 21-65)
  - Healthy People 2020 Target = 93.0% or Higher
  - OHF Svc Area: 81.2%
  - VA: 85.2%
  - NC: 85.8%
  - US: 73.5%

- **Colorectal Cancer Screening**
  - (Adults Age 50-75)
  - Healthy People 2020 Target = 70.5% or Higher
  - OHF Svc Area: 84.2%
  - VA: 69.1%
  - NC: 70.8%
  - US: 76.4%
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
Diabetes: Age-Adjusted Mortality
(2013–2015 Annual Average Deaths per 100,000 Population)
Healthy People 2020 Target = 20.5 or Lower (Adjusted)

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

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).
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- The Healthy People 2020 target for Diabetes is adjusted to account for only diabetes mellitus coded deaths.
Prevalence of Diabetes  
(OHF Service Area, 2017)

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age Group</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Other</th>
<th>OHF Service Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>18 to 39</td>
<td>22.6%</td>
<td>28.1%</td>
<td>15.4%</td>
<td>17.6%</td>
<td>22.1%</td>
<td>18.4%</td>
</tr>
<tr>
<td>Women</td>
<td>18 to 39</td>
<td>20.3%</td>
<td>28.9%</td>
<td>19.1%</td>
<td>22.6%</td>
<td>20.7%</td>
<td>13.3%</td>
</tr>
<tr>
<td>40 to 64</td>
<td>Men</td>
<td>20.6%</td>
<td>28.1%</td>
<td>15.4%</td>
<td>17.6%</td>
<td>21.6%</td>
<td>18.4%</td>
</tr>
<tr>
<td>40 to 64</td>
<td>Women</td>
<td>21.6%</td>
<td>29.9%</td>
<td>16.4%</td>
<td>18.6%</td>
<td>22.1%</td>
<td>13.3%</td>
</tr>
<tr>
<td>65+</td>
<td>Men</td>
<td>21.6%</td>
<td>28.9%</td>
<td>15.4%</td>
<td>17.6%</td>
<td>22.1%</td>
<td>18.4%</td>
</tr>
<tr>
<td>65+</td>
<td>Women</td>
<td>21.6%</td>
<td>29.9%</td>
<td>16.4%</td>
<td>18.6%</td>
<td>22.1%</td>
<td>13.3%</td>
</tr>
</tbody>
</table>

Another 12.1% of adults report that they have been diagnosed with “pre-diabetes“ or “borderline“ diabetes. (vs. 9.5% nationwide)

Highest (27.2%) in Surry/Sussex Counties.
Prevalence of Diabetes
(OHF Service Area by Health Opportunity Index Classification)

<table>
<thead>
<tr>
<th>Health Opportunity Index Classification</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low Health Opportunities</td>
<td>21.7%</td>
</tr>
<tr>
<td>Low Health Opportunities</td>
<td>20.4%</td>
</tr>
<tr>
<td>Average Health Opportunities</td>
<td>27.2%</td>
</tr>
<tr>
<td>High Health Opportunities</td>
<td>16.1%</td>
</tr>
<tr>
<td>Very High Health Opportunities</td>
<td>14.8%</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major Problem</td>
<td>66.7%</td>
</tr>
<tr>
<td>Moderate Problem</td>
<td>22.2%</td>
</tr>
<tr>
<td>Minor Problem</td>
<td>7.9%</td>
</tr>
<tr>
<td>No Problem At All</td>
<td></td>
</tr>
</tbody>
</table>

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

Sources: PRC Online Key Informant Survey, Professional Research Consultants, Inc.
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
Leading Causes of Death
(OHF Service Area, 2014)

- Heart Disease: 24.0%
- Cancer: 20.5%
- Stroke: 6.3%
- Other Conditions: 31.0%
- Alzheimer's: 3.9%
- Accidents: 4.4%
- Diabetes: 4.8%
- CLRD: 5.1%

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 stroke mortality rates are similar to statewide rates, but worse than national rates.
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 better than US.
Present One or More Cardiovascular Risks or Behaviors
(OHF Service Area by Health Opportunity Index Classification)

<table>
<thead>
<tr>
<th>Health Opportunities</th>
<th>Very Low</th>
<th>Low</th>
<th>Average</th>
<th>High</th>
<th>Very High</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>93.5%</td>
<td>93.8%</td>
<td>89.4%</td>
<td>89.8%</td>
<td>85.3%</td>
</tr>
</tbody>
</table>

OHF Service Area = 90.3%
US = 87.2%

Sources:  
- PRC Community Health Survey, Professional Research Consultants, Inc. [Item 131]
Notes:  
- Asked of all respondents.
Perceptions of Heart Disease and Stroke as a Problem in the Community
(Key Informants, 2017)

- **Major Problem**: 54.0%
- **Moderate Problem**: 36.5%
- **Minor Problem**: 6.3%
- **No Problem At All**: 3.2%

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

**Sources:**
- PRC Online Key Informant Survey, Professional Research Consultants, Inc.

**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
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: 13.1%
Suffolk City: 14.2%
Franklin City/Southampton: 22.4%
Surry/Sussex Counties: 19.1%
OHF Service Area*: 15.8%
VA: 13.2%

Sources:
● Sentara Obici datafile 9/30/16

Note:
● This indicator reports the percentage of women who do not obtain prenatal care during their first trimester of pregnancy. Engagement in prenatal care decreases the likelihood of maternal and infant health risks.
● Knowledge insufficient provider outreach, and/or social barriers preventing utilization of services.
● *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.
Infant Mortality Rate
(Annual Average Infant Deaths per 1,000 Live Births, 2006–2010)
Healthy People 2020 Target = 6.0 or Lower

Sources:

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)

- Motor Vehicle Accidents 33.2%
- Falls 18.6%
- Poisoning (Including Accidental Drug Overdose) 18.1%
- Suffocation 5.8%
- Drowning 4.4%
- Other 19.9%

Notes:
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
- Deaths 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
Kidney Disease: Age-Adjusted Mortality
(2013–2015 Annual Average Deaths per 100,000 Population)

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

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).
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard.
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
Self-Reported Mental Health Status
(OHF Service Area, 2017)

- Excellent: 36.3%
- Very Good: 30.0%
- Good: 24.0%
- Fair: 8.1%
- Poor: 1.6%

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.
Mental Health Treatment

- 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%

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 103-104]
- 2017 PRC National Health Survey, Professional Research Consultants, Inc.

Notes:
- Reflects the total sample of respondents.
Total Behavioral Health Hospitalization
(OHF Service Area, Excluding Gates County; 2013)

- Affective Psychoses: 40.2%
- 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%

Sources:
- Sentra Obici Hospital datafile 9/30/16

Notes:
- Results exclude Gates County data.
Behavioral Health Hospitalization Age-Adjusted Discharges
(2013 Age-Adjusted Discharges per 100,000 Population)

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)

<table>
<thead>
<tr>
<th>Major Problem</th>
<th>Moderate Problem</th>
<th>Minor Problem</th>
<th>No Problem At All</th>
</tr>
</thead>
<tbody>
<tr>
<td>54.5%</td>
<td>36.4%</td>
<td>9.1%</td>
<td></td>
</tr>
</tbody>
</table>

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
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
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

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)

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)

- Healthy Weight
- Overweight/Not Obese
- Obese

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.
Population With Low Food Access
(Percent of Population That Is Far From a Supermarket or Large Grocery Store, 2015)

- OHF Service Area: 30.1%
- VA: 20.4%
- NC: 23.6%
- US: 22.4%

Worst in Surry/Sussex Counties

Population With Recreation & Fitness Facility Access
(Number of Recreation & Fitness Facilities per 100,000 Population, 2015)

- OHF Service Area: 9.0
- VA: 12.3
- NC: 11.3
- US: 10.5

Worst in Gates County

Sources:
- US Census Bureau, County Business Patterns. Additional data analysis by CARES.

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)

<table>
<thead>
<tr>
<th>Health Opportunity Classification</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low</td>
<td>33.9%</td>
</tr>
<tr>
<td>Low</td>
<td>25.0%</td>
</tr>
<tr>
<td>Average</td>
<td>13.9%</td>
</tr>
<tr>
<td>High</td>
<td>14.0%</td>
</tr>
<tr>
<td>Very High</td>
<td>12.5%</td>
</tr>
</tbody>
</table>

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**: 57.1%
- **Moderate Problem**: 27.0%
- **Minor Problem**: 15.9%
- **No Problem At All**:  

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

Sources: PRC Online Key Informant Survey, Professional Research Consultants, Inc.
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
Currently Suffer From Multiple Chronic Conditions
(OHF Service Area, 2017)

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

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 197]
- Asked of all respondents.
- 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. “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.
- In this case, chronic conditions include lung disease, arthritis, sciatica, cancer, osteoporosis, high blood cholesterol, diabetes, obesity, and/or diagnosed depression.

Highest (84.3%) in Surry/Sussex Counties.
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
Currently Have Asthma
(OHF Service Area, 2017)

Prevalence of Chronic Obstructive Pulmonary Disease (COPD)

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.

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

- **O HF Service Area**: 604.0  
- **VA**: 435.8  
- **NC**: 478.6  
- **US**: 456.1

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

- **O HF Service Area**: 167.9  
- **VA**: 99.9  
- **NC**: 146.4  
- **US**: 110.7

**Sources:**
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 143-144]
- 2017 PRC National Health Survey, Professional Research Consultants, Inc.

**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
Alcohol & Drug Use

Sources:
- 2017 PRC Community Health Survey, Professional Research Consultants, Inc.
- 2017 PRC National Health Survey, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.

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

Illicit Drug Use in Past Month
- OHF Service Area: 1.2%
- US: 2.5%
  - Highest in Gates County

Used Marijuana in Past Month
- OHF Service Area: 2.4%
- US: 8.5%
  - Highest in Gates County
Drug-Induced Deaths: Age-Adjusted Mortality
(2013–2015 Annual Average Deaths per 100,000 Population)
Healthy People 2020 Target = 11.3 or Lower

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).
- 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)

Only 1.2% of residents have ever sought help for an alcohol/drug problem (US=3.4%).
Perceptions of Substance Abuse as a Problem in the Community
(Key Informants, 2017)

- 49.2% Major Problem
- 39.7% Moderate Problem
- 9.5% Minor Problem
- 9.5% No Problem At All

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.
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