

# Community Health Needs Assessment

2015 FINAL SUMMARY REPORT



SUBMITTED BY



July 2015

## TABLE OF CONTENTS

Executive Summary	2
Community Health Needs Assessment Overview	3
Secondary Data Profile	5
Key Informant Interviews	11
Online Community Member Survey	34
Identification of Community Health Needs & Planning	55
Appendix A. Secondary Data Sources	56
Appendix B. Key Informant Participants	57
Appendix C. Key Informant Survey Tool	60
Appendix D. Online Community Member Survey Tool	66
Appendix E. Prioritization Session Participants	86

## EXECUTIVE SUMMARY

Beginning in January 2015, Beacon Health System undertook a comprehensive community health needs assessment (CHNA) to evaluate the health needs of individuals living in Elkhart and St. Joseph counties in Indiana. The purpose of the assessment was to gather current statistics and qualitative feedback on the key health issues facing county residents. The assessment examined a variety of health indicators including chronic health conditions, access to health care, and social determinants of health. Beacon Health System contracted with Holleran, a research firm based in Lancaster, Pennsylvania, to execute this project.

The completion of the CHNA enabled Beacon Health System to take an in-depth look at the Elkhart and St. Joseph county communities. The findings from the assessment were utilized by Beacon Health System to prioritize public health issues and develop a community health implementation plan focused on meeting community needs. Beacon Health System is committed to the people it serves and the communities where they reside. Healthy communities lead to lower health care costs, robust community partnerships, and an overall enhanced quality of life. This CHNA Final Summary Report serves as a compilation of the overall findings of each research component.

### CHNA Components

- Secondary Data Research
- Key Informant Interviews
- Online Community Member Survey
- Prioritization Session
- Implementation Plan

### Key Community Health Issues

Beacon Health System, in conjunction with community partners, examined the findings of the Secondary Data, Key Informant Interviews, and Online Community Member Survey to select Key Community Health Issues. The following issues were identified:

- 
- 
- 
- 

### Prioritized Community Health Issues

Based on feedback from community partners, including health care providers, public health experts, health and human service agencies, and other community representatives, Beacon Health System plans to focus community health improvement efforts on the following health priorities over the next three-year cycle:

- 
- 
-

## COMMUNITY HEALTH NEEDS ASSESSMENT OVERVIEW

### Organization Overview

Beacon Health System is the non-profit parent organization of Elkhart General Hospital and Memorial Hospital of South Bend. Elkhart General Hospital and Memorial Hospital of South Bend, two accomplished medical legacies, have each delivered exceptional and compassionate care for more than 100 years. Together, Elkhart General Hospital and Memorial Hospital of South Bend employ more than 6,000 team members and volunteers; operate more than 1,000 hospital beds and are staffed by nearly 1,000 physicians. Each year, approximately 4,500 babies are delivered at both hospitals. Its community-owned hospitals have been frequently honored for outstanding care by some of the country's most respected health care ranking systems, including HealthGrades, Inc. and Thomson Reuters 100 Top Hospitals®. Beacon Health System is also a research and education organization, guiding clinical research trials for a variety of illnesses and helping train medical residents in the fields of family medicine and hospital pharmacy.

The Mission of Beacon Health System exists to enhance the physical, mental, and emotional well-being of the communities we serve. Beacon Health System operates under the following Values:

1. We put patients at the center.
2. We respect one another.
3. We demonstrate compassion.
4. We operate with integrity.
5. We are trustworthy.

### Community Overview

Beacon Health System defined their current service area based on an analysis of the geographic area where individuals utilizing their services reside. Beacon Health System's service area is considered to be the Elkhart and St. Joseph county communities. The counties are situated in the Northcentral part of Indiana and encompass a total population of approximately 466,000. Elkhart County encompasses a total population of approximately 199,000 and St. Joseph County encompasses a total population of approximately 267,000.

### Methodology

The CHNA was comprised of both quantitative and qualitative research components. A brief synopsis of the research components is included below with further details provided throughout the document:

- A Statistical Secondary Data Profile depicting population and household statistics, education and economic measures, morbidity and mortality rates, incidence rates, and other health statistics for Elkhart and St. Joseph counties was compiled.
- Key Informant Interviews were conducted with 106 community leaders and partners between January and March, 2015. Key informants represented a variety of sectors, including public health and medical services, non-profit and social organizations, children and youth agencies, and the business community.

- An Online Community Member Survey was conducted with community residents between March and June, 2015. The survey was designed to assess their health status, health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. A total of 1,053 resident surveys were completed throughout the counties to promote geographical and ethnic diversity among respondents.

### Research Partner

Beacon Health System contracted with Holleran, an independent research and consulting firm located in Lancaster, Pennsylvania, to conduct research in support of the CHNA. Holleran has 23 years of experience in conducting public health research and community health assessments. The firm provided the following assistance:

- Collected and interpreted data from secondary data sources
- Analyzed and interpreted data from key informant interviews
- Conducted, analyzed, and interpreted data from the online community member survey; and
- Prepared all reports

### Community Representation

Community engagement and feedback were an integral part of the CHNA process. Beacon Health System sought community input through key informant interviews with community leaders and partners, an online community member survey available to all residents, and inclusion of community leaders in the prioritization and implementation planning process. Public health and health care professionals shared knowledge and expertise about health issues, and leaders and representatives of non-profit and community-based organizations provided insight on the community, including the medically underserved, low income, and minority populations.

### Research Limitations

Language barriers, timeline, and other restrictions may have impacted the ability to survey all community stakeholders. Beacon Health System sought to mitigate limitations by including representatives of diverse and underserved populations throughout the research components.

### Prioritization of Needs

Following the completion of the CHNA research, Beacon Health System prioritized community health issues and developed an implementation plan to address prioritized community needs.

## SECONDARY DATA PROFILE

### Background

One of the initial undertakings of the CHNA was to create a Secondary Data Profile. Secondary data is comprised of data obtained from existing resources and includes demographic and household statistics, education and income measures, morbidity and mortality rates, and health indicators, among other data points. The data was gathered and integrated into a graphical report to portray the current health and socio-economic status of residents in Elkhart and St. Joseph counties.

Secondary data was collected from reputable sources, including the U.S. Census Bureau, Centers for Disease Control and Prevention (CDC), and Indiana State Department of Health. A full reference list is included in Appendix A. The data represents a point in time study using the most recent data possible. When available, state and national comparisons are provided as benchmarks.

The profile details data covering the following areas:

- Demographic/Socioeconomic Statistics
- Mortality & Morbidity Statistics
- Maternal & Child Health Statistics
- Sexually Transmitted Illness & Communicable Disease Statistics
- Mental Health Statistics
- Environmental Health

### Secondary Data Profile Study Findings

The following section highlights the key takeaways from the secondary data profile. A full report of the findings is available through Beacon Health System.

The key takeaways are summarized as Areas of Strength, Areas of Opportunity, and Areas of Difference. Areas of Strength highlight factors in which the counties have a more favorable outcome than Indiana and/or the nation. In contrast, Areas of Opportunity highlight factors in which the counties can improve upon. Areas in which the counties differ notably from Indiana and/or the nation, but that cannot be considered strengths or opportunities, are considered Areas of Difference. For example, if a county has a notably larger male population versus female population, this is neither a strength nor an opportunity, but it is an Area of Difference.

### Areas of Strength

#### Household Statistics

- Both Elkhart County and St. Joseph County have a lower percentage of vacant homes (8.8% and 10.7% respectively) when compared to Indiana (11.5%) and the nation (12.6%).

#### Education Statistics

- Residents aged 25 years and over in St. Joseph County are more likely to have graduated from high school (87.7%) and to have attained a bachelor's degree or higher (27.1%) when compared to Elkhart County and Indiana.

**Mortality Statistics**

- The age-adjusted mortality rate per 100,000 is notably lower in Elkhart County (775.2) when compared to St. Joseph County (807.2) and Indiana (828.4), but Elkhart's mortality rate is slightly higher than the national figure of 731.9.
- The age-adjusted mortality rate per 100,000 for deaths due to influenza and pneumonia is lower in both Elkhart and St. Joseph counties (13.5 and 13.2 respectively) when compared to the state (15.2) and the nation (15.9).

**Maternal & Child Health Statistics**

- The percentages of low birth weight, very low birth weight, and preterm births are generally low in both Elkhart and St. Joseph counties and exceed the HP 2020 goals of 7.8%, 1.4%, and 11.4% respectively.
- The teenage pregnancy rate is lower in St. Joseph County (32.4) when compared to Elkhart County (43.6) and the state (37.9).

**Sexually Transmitted Disease Statistics**

- St. Joseph County has lower incidence rates for chlamydia, gonorrhea, and syphilis when compared to Elkhart County, Indiana, and the nation.

**Mental Health Statistics**

- The suicide rate per 100,000 in Elkhart County is lower (10.8) when compared to St. Joseph County (13.4), Indiana (14.2), and the nation (12.6) and nearly meets the HP 2020 goal of 10.2.

**Cancer Statistics**

- The overall cancer incidence rate per age-adjusted 100,000 is lower in Elkhart County (443.4) than in St. Joseph County (469.6), Indiana (456.9), and the nation (459.8). In addition, incidence rates for female breast cancer and colorectal cancer are lower in Elkhart County when compared to St. Joseph County, the state, and the nation.
- The overall cancer mortality rate per age-adjusted 100,000 is lower in Elkhart County (167.8) when compared to St. Joseph County (179.9) and Indiana (178.7). In addition, the mortality rate due to breast cancer is lower in Elkhart County when compared to St. Joseph County, the state, and the nation.
- The prostate cancer mortality rate per age-adjusted 100,000 is lower in Elkhart County (8.0), St. Joseph County (7.8), and the state overall (7.8) when compared to the nation (19.2).

**Environmental Health Statistics**

- Elkhart County adults are less likely to be diagnosed with asthma (13.0%) when compared to St. Joseph County (15.3%), Indiana (13.4%), and the nation (13.4%). In addition, adults and children with asthma in Elkhart County are less likely to visit the emergency department or be hospitalized for their condition.

**County Health Rankings**

- Elkhart County and St. Joseph County have positive Physical Environment ranks (4 and 7 respectively) out of 92.

## Areas of Opportunity

### Household Statistics

- In St. Joseph County, a higher percentage of grandparents living with grandchildren are responsible for their grandchildren (48.1%) when compared to Elkhart County (42.4%), Indiana (47.5%), and the nation (38.2%).
- The percentage of renters spending 30% or more of their income on rent is lower in both counties when compared to the state and the nation. However, the percentage still constitutes approximately half of all rented households.
- Elkhart County and St. Joseph County have a slightly larger proportion of single-female householders (13.6% and 13.4% respectively) when compared to Indiana (12.4%) and the nation (13.1%).

### Income Statistics

- Both Elkhart County and St. Joseph County have higher overall poverty rates for families, married-couple families, female-headed households, and individuals when compared to the state and the nation.
- St. Joseph County has a larger proportion of households that are receiving food stamps and that are below the poverty level (60.5%) when compared to Elkhart County (55.8%), Indiana (55.7%), and the nation (52.0%). However, Elkhart County households are also more likely to rely on cash public assistance (3.3%) and food stamps/SNAP benefits (15.4%) when compared to St. Joseph County, Indiana, and the nation. In particular, 66.4% of Elkhart County households with children under 18 years rely on food stamps/SNAP benefits.
- The food insecurity rate for all residents and children is higher in St. Joseph County (16.4% and 23.1% respectively) than in Elkhart County, the state, and the nation.
- The percentage of students receiving free or reduced lunches is higher in both counties than across the state.

### Employment Statistics

- St. Joseph County had a higher unemployment rate in 2014 (6.7%) when compared to average annual unemployment rates for Elkhart County (5.2%), Indiana (6.0%), and the nation (6.2%).

### Education Statistics

- Elkhart County residents are less likely to have graduated high school (79.8%) and to have attained a bachelor's degree or higher (17.8%) when compared to residents in St. Joseph County, Indiana, and the nation.

### Health Insurance Coverage Statistics

- Residents of Elkhart County are more likely to be uninsured (20.8%) when compared to residents in St. Joseph (14.5%), Indiana (14.2%), and the nation (14.8%).



## Mortality Statistics

- The top three causes of death in both of the counties, the state, and the nation are diseases of the heart, malignant neoplasms (cancer), and chronic lower respiratory disease. However, the following differences are noted among the two counties:
  - The age-adjusted death rate per 100,000 due to heart disease is higher in Elkhart County (194.3) than in St. Joseph County (182.3), Indiana (185.5), and the nation (169.8).
  - The age-adjusted death rate per 100,000 due to cancer is higher in St. Joseph County (179.9) when compared to Elkhart County (167.8), the state (178.7), and the nation (163.2). Mortality rates are particularly high for pancreatic and breast (male and female) cancer.
- Elkhart County has a higher age-adjusted death rate per 100,000 due to Alzheimer's disease (49.2) when compared to St. Joseph County (26.8), Indiana (28.5), and the nation (23.5). It is the fourth leading cause of death in the county.

## Maternal & Child Health Statistics

- The teenage birth rate is notably higher in Elkhart County (43.5) when compared to St. Joseph County (28.4), Indiana (30.3), and the nation (26.5). The teenage pregnancy rate is also higher in Elkhart County.
- St. Joseph County had a higher percentage of infants born to unmarried women (46.2%) when compared to Elkhart County (42.7%), Indiana (43.2%), and the nation (40.7%). Research indicates that unmarried women bearing children are more likely to require public assistance, to live in poverty and expose the fetus to harmful substances, such as tobacco or alcohol.
- More than half of mothers in Elkhart and St. Joseph counties are Medicaid beneficiaries (53.2% and 51.7% respectively). The proportion of mothers who are on Medicaid is notably higher when compared to Indiana (44.9%).
- The percentage of mothers who started prenatal care during their first trimester is lower in Elkhart County (60.7%) when compared to St. Joseph County (65.7%) and Indiana (68.4%). However, both counties have low first trimester prenatal care rates among Black/African American residents (approximately 50%).
- Infant and neonatal mortality rates are higher in St. Joseph County (8.7 and 6.7 respectively) when compared to Indiana, the nation, and the HP 2020 goal of 6.0 and 4.1 respectively.

## Cancer Statistics

- Overall, residents of St. Joseph County are more likely to be diagnosed with cancer (469.6 per 100,000) when compared to residents in Elkhart County (443.4), Indiana (456.9), and the nation (459.8). Specifically:
  - Females are more likely to be diagnosed with breast cancer (122.6 per age-adjusted 100,000) than females across Elkhart County (117.4) and Indiana (118.5). The incidence rate for breast cancer in St. Joseph County closely resembles the nation's figure of 122.7.
  - Adults are more likely to be diagnosed with colorectal cancer (49.8 per age-adjusted 100,000) than adults across Elkhart County (42.1), Indiana (46.3), and the nation (43.3).
  - Males are more likely to be diagnosed with prostate cancer (136.1 per age-adjusted 100,000) than males across Elkhart County (119.0) and Indiana (117.4).

**Environmental Health Statistics**

- St. Joseph County has a higher proportion of adults ages 18 and over who are diagnosed with asthma (15.3%) when compared to residents in Elkhart County (13.0%), Indiana (13.4%), and the nation (13.4%). However, in general, emergency department visits and hospitalization rates are lower when compared to the state.

**County Health Rankings**

- St. Joseph County received a health outcomes rank of 41 of 92, while Elkhart County received a health outcomes rank of 20 of 92. The following factors contribute to the county rankings:
  - The years of potential life lost before age 75 per age-adjusted 100,000 is notably higher in St. Joseph County (7,424) when compared to Elkhart County (6,524) and the national benchmark of 5,200.
  - St. Joseph County residents reported a higher rate of poor physical health days in the past month (3.6) when compared to residents in Elkhart County (3.1) and the national benchmark (2.5). This figure may indicate the burden of chronic diseases and disabilities facing the county.
  - Elkhart County, St. Joseph County, and Indiana overall report more average days of poor mental health when compared to the national benchmark (3.6 and 3.7 versus 2.3).
- St. Joseph County received a health behaviors rank of 35 of 92, while Elkhart County received a health behaviors rank of 25 of 92. The following factors contribute to the county rankings:
  - St. Joseph County has a food environment index score of 6.6 on a scale of 1 to 10. In contrast, Elkhart County and Indiana have food environment index scores of 7.3 and 7.2 respectively. The national benchmark is 8.4.
  - Only 64% of residents in Elkhart County have access to exercise opportunities compared to 77% in St. Joseph County, 75% across Indiana, and the national benchmark of 92%.
  - Nineteen percent of St. Joseph County adults drink excessively compared to 10% in Elkhart County, 16% across Indiana, and the national benchmark of 10%. In addition, St. Joseph County has a higher mortality rate due to alcohol-impaired driving.
  - The teen birth rate per 1,000 is 52 in Elkhart County compared to 38 in St. Joseph County, 39 across Indiana, and the national benchmark of 20.
- Elkhart County received a clinical care rank of 72 of 92, while St. Joseph County received a clinical care rank of 10 of 92. The following factors contribute to the county rankings:
  - Twenty-two percent of adults less than 65 years of age are uninsured in Elkhart County compared to 17% in St. Joseph County, 17% across Indiana, and the national benchmark of 11%.
  - The ratio of primary care physicians, dentists, and mental health providers to residents is worse in Elkhart County than in St. Joseph County, all of Indiana, and the national benchmark.
- St. Joseph County received a social and economic factors rank of 79 of 92, while Elkhart County received a social and economic factors rank of 59 of 92. Many socioeconomic factors were addressed earlier in the report. However, the following factors further contribute to the county rankings:
  - The income inequality ratio is higher in St. Joseph County (4.5) than in Elkhart County (3.8), Indiana (4.3), and the national benchmark (3.7).

- St. Joseph County residents have a lower rate of social associations per 10,000 (11.2) when compared to Elkhart County (13.0), Indiana (12.7), and the national benchmark of 22.0.
- The violent crime rate per 100,000 is higher in St. Joseph County (370) than in Elkhart County (264), Indiana (334), and the national benchmark (59).

## Areas of Difference

### Population Statistics

- St. Joseph County experienced negative population growth between 2010 and 2013 (-0.12%), whereas comparison locations experienced positive population growth: Elkhart County (0.96%), Indiana (0.89%), and the nation (1.66%).
- The population in both Elkhart County and St. Joseph County is primarily White. However, Elkhart County has a larger Hispanic population (14.6%) when compared to St. Joseph County and Indiana; and St. Joseph County has a larger Black/African American population (14.5%) when compared to Elkhart County and Indiana.
- Elkhart County has a lower median age (35.1) when compared to St. Joseph County (36.5), Indiana (37.2), and the nation (37.4).
- The percentage of individuals who speak a language other than English at home is notably higher in Elkhart County (19.1%) when compared to St. Joseph County (9.5%) and Indiana (8.3%), but slightly lower than the national figure of 20.9%. Residents who speak a language other than English at home in Elkhart County are more likely to speak Spanish (12.3%).

### Household Statistics

- A larger proportion of Elkhart County residents are married and living together (52.6%) when compared to St. Joseph County (46.1%), Indiana (49.4%), and the nation (48.2%). In contrast, St. Joseph County residents are more likely to be unmarried and living in non-family households.
- The median home value in Elkhart County (\$120,600) is higher than that of St. Joseph County (\$111,900), but lower than that of Indiana (\$122,300) and the nation (173,200).
- Elkhart County has a larger average family size (3.24) when compared to St. Joseph County (3.10) and Indiana (3.13). Elkhart's figure closely resembles the nation's figure of 3.25.

### Income Statistics

- In Elkhart County, the median income for households and families falls below that of St. Joseph County, Indiana, and the nation.

### Maternal & Child Health Statistics

- The birth rate per 1,000 is higher in Elkhart County (14.8) and in St. Joseph County (13.3), when compared to Indiana (12.6) and the nation (12.4).

## KEY INFORMANT INTERVIEWS

### Background

Key informants were interviewed to gather a combination of quantitative and qualitative feedback through open-ended questions. Key informants were defined as community stakeholders with expert knowledge and included public health and health care professionals, social service providers, non-profit leaders, business leaders, faith-based organizations, county government, and other community leaders. A full listing of key informants and their affiliated organizations can be found in Appendix B.

Holleran staff worked with Beacon Health System to identify key informant participants and develop the key informant survey tool. A total of 106 key informants completed the survey between January and March, 2015. The survey assessed the most pressing issues in the community, barriers to accessing health care, the impact of social determinants of health, how to best address wellness in the community, resources and wellness programs in the community, and underserved populations. A copy of the survey tool can be found in Appendix C.

It is important to note that the results reflect the perceptions of some community leaders, but may not necessarily represent all community representatives within Elkhart and St. Joseph counties.

### Key Informant Study Findings

#### Demographics

Respondents were asked to provide their gender, race, and community affiliation. The key informants were primarily female (69% in Elkhart County and 82% in St. Joseph County) and White/Caucasian (82% in Elkhart County and 77% in St. Joseph County). The largest percentage of informants were affiliated with Health Care/Public Health Organizations, followed by Non-Profit/Social Services/Aging Services. The following table further depicts participants' community affiliations. "Other" affiliations included the community foundation (Elkhart County) and a firefighter (St. Joseph County).

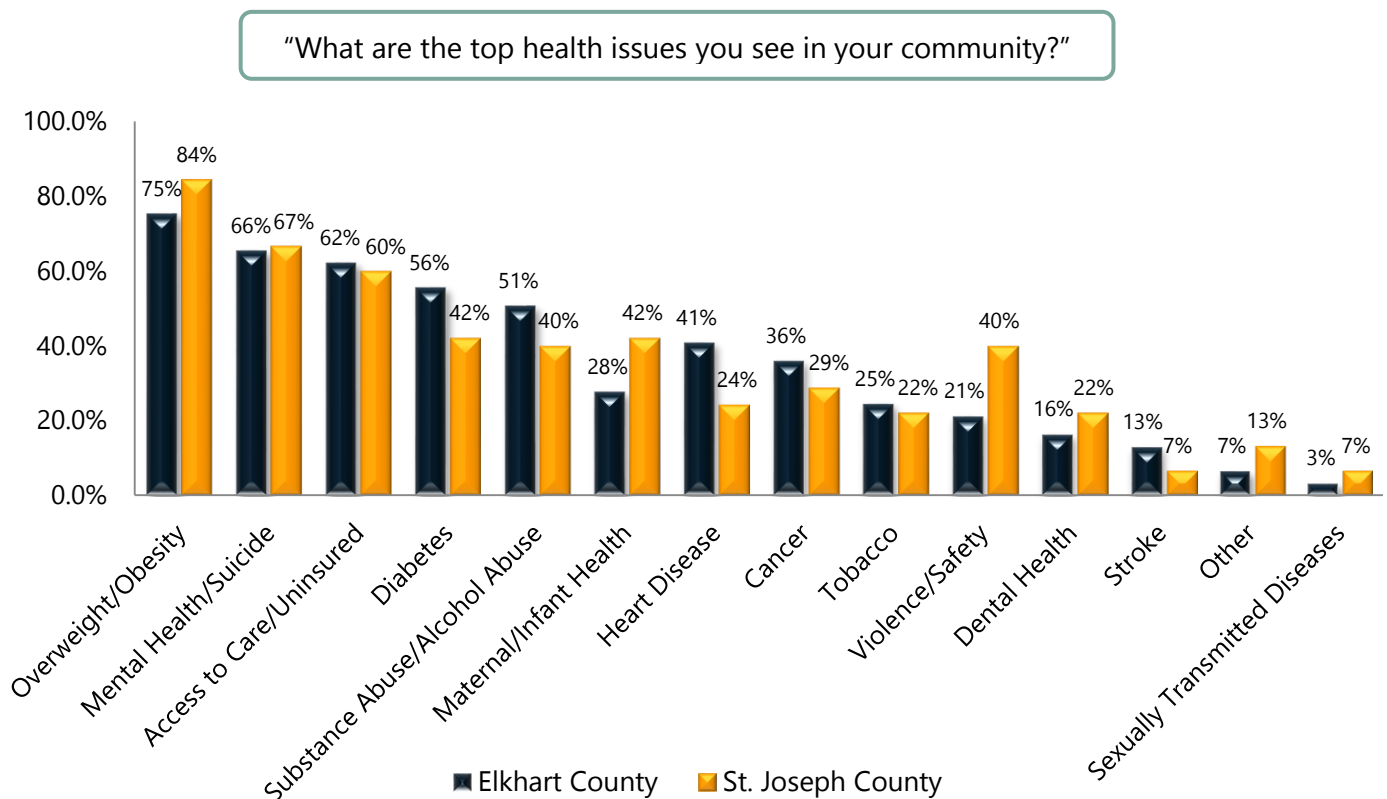
Community Affiliation	Elkhart County	St. Joseph County
Health Care/Public Health Organization	33.3%	31.8%
Mental/Behavioral Health Organization	1.7%	4.5%
Non-Profit/Social Services/Aging Services	28.3%	29.5%
Faith-Based/Cultural Organization	13.3%	2.3%
Education/Youth Services	10.0%	11.4%
Government/Housing/Transportation Sector	8.3%	4.5%
Business Sector	1.7%	6.8%
Community Member	1.7%	6.8%
Other	1.7%	2.3%
<b>Total Respondents</b>	<b>60</b>	<b>44</b>

### Key Health Issues

Key informants were asked to rank the five most pressing health-related issues from a list of 14 focus areas identified in the survey. Key Informants in both counties ranked the top three issues as:

- Overweight/Obesity
- Mental Health/Suicide
- Access to care/Uninsured

In Elkhart County, the fourth and fifth most pressing health-related issues were diabetes and substance abuse/alcohol abuse. In St. Joseph County, the fourth and fifth most pressing health-related issues were diabetes and maternal/infant health. “Other” key health issues that key informants mentioned included healthcare for low-income seniors, effective communication in healthcare, the underinsured, safe and affordable housing, poverty (particularly childhood poverty), transportation, and lack of education. The figure below depicts the rankings by key informants in each county.



Respondents were also asked of those health issues mentioned, which one issue is the most significant. The top three most significant health issues in the community were the same in both counties:

- Overweight/Obesity
- Access to care/Uninsured
- Mental Health/Suicide

The tables below depict the results by county, including a summary of the number of times an issue was mentioned and the percentage of respondents who rated the issue as being the most significant in the community.

Ranking of the Most Pressing Key Health Issues (Elkhart County)

Rank	Key Health Issue	Count	Respondents who selected the issue	Respondents who selected the issue as the most significant
1	Overweight/Obesity	46	75.4%	24.6%
2	Access to Care/Uninsured	38	62.3%	23.0%
3	Mental Health/Suicide	40	65.6%	16.4%
4	Substance Abuse/Alcohol Abuse	31	50.8%	8.2%
5	Cancer	22	36.1%	8.2%
6	Heart Disease	25	41.0%	4.9%
7	Maternal/Infant Health	17	27.9%	4.9%
8	Diabetes	34	55.7%	3.3%
9	Tobacco	15	24.6%	3.3%
10	Violence/Safety	13	21.3%	1.6%
11	Other	4	6.6%	1.6%
12	Dental Health	10	16.4%	0.0%
13	Stroke	8	13.1%	0.0%
14	Sexually Transmitted Diseases	2	3.3%	0.0%

Ranking of the Most Pressing Key Health Issues (St. Joseph County)

Rank	Key Health Issue	Count	Respondents who selected the issue	Respondents who selected the issue as the most significant
1	Overweight/Obesity	38	84.4%	24.4%
2	Access to Care/Uninsured	27	60.0%	20.0%
3	Mental Health/Suicide	30	66.7%	17.8%
4	Maternal/Infant Health	19	42.2%	11.1%
5	Substance Abuse/Alcohol Abuse	18	40.0%	4.4%
6	Violence/Safety	18	40.0%	4.4%
7	Heart Disease	11	24.4%	4.4%
8	Other	6	13.3%	4.4%
9	Diabetes	19	42.2%	2.2%
10	Cancer	13	28.9%	2.2%
11	Tobacco	10	22.2%	2.2%
12	Sexually Transmitted Diseases	3	6.7%	2.2%
13	Dental Health	10	22.2%	0.0%
14	Stroke	3	6.7%	0.0%

Additionally, respondents were asked to share information regarding these issues and their reasons for ranking them this way. Verbatim responses are listed below for each county.

**Additional Information Regarding Key Health Issues Facing Elkhart County:**

- "Issues such as violence, substance and alcohol abuse are related to mental health, and there are not enough providers of mental health services in our community, let alone mental health services for people who do not have the ability to pay for those services."
- "Lack of mental health resources, no ongoing plan for interventions. Many end up in the legal system as there is no rehabilitation."
- "Lack of providers, limited care."
- "Mental health is so important and so underfunded and not available to the general population."
- "Obesity impacts so many other issues such as diabetes, cardiac care etc."
- "Obesity is the beginning of many health problems such as high blood pressure, diabetes, high cholesterol and as consequence heart diseases and a lot of mental health issues related with low self-esteem."
- "Obesity leads to so many of the other health issues. It's a problem in our community that is linked to poor food quality and for those in low income."
- "Our mental health services are too limited in this area."
- "Overweight and obesity is the most prevalent, but in terms of societal impact substance abuse including tobacco use causes the most damage."
- "People have lost their insurance or can't afford what's being offered."
- "Research shows that adverse childhood experiences lead to the major adult health concerns our society faces. If we ensure that every child experiences safe, stable, nurturing relationships, we could avoid significant societal costs (CDC)."
- "So many other symptoms are derivatives from mental illness and other mental health issues."
- "Still a large portion of the population that is uninsured or underinsured and often only seeks medical help for treatment and has no avenue to preventative care."
- "The cost is the factor for the uninsured."
- "The life style and patterns leads to overweight/obesity and I believe this is a contributing factor to diabetes, mental health, and substance abuse. It is a significant issue."
- "There seems to be a dearth of sound psychological counselors. Sound psychiatric help would be those who have a foundation in positive Psychology, or a value based approach. Good habits lead to sound mental health, it is important to use sound scientific data to support sound behavior."
- "This was very difficult to rank. In my position I've seen all of the above issues being of great concern. The nonprofit I work for assists in paying for prescriptions. Most of the prescriptions are for either heart related conditions, diabetes and/or mental health. The prescriptions come from the area emergency room where the client has sought non-emergency care because of the lack of health insurance. There's next to no dental assistance in Elkhart County that I'm aware of for adults."
- "Working with families and individuals, it is extremely difficult to find quality care if there is no insurance or if there is no transportation."

**Additional Information Regarding Key Health Issues Facing St. Joseph County:**

- "Availability of services has declined, especially for children."
- "Better access to health care in the under-served population would address many of the other issues on the list."
- "Good diet and nutrition mediate the impact of the other 4 options I chose."
- "I feel like all of the health issues are negatively impacted by lack of access to care."
- "I listed mental health as the most significant because St. Joseph County severely lacks the resources and providers to address this issue."
- "Individuals who are overweight/obese are at higher risk of many of the other diseases mentioned - yet managing weight and keeping weight at a healthy range are ways to reduce the onset of those same diseases."
- "Mental health issues are much broader than Suicide, depression, bipolar, PTSD, etc. are just as serious."
- "My ratings were determined by those I felt got the least amount of resources, the community had the least amount of knowledge about and were compounded by undeserved stigma."
- "Obesity leads to many of the other health problems mentioned and if it can be dealt with at an earlier age, many other chronic diseases can be prevented."
- "Prevention wise I believe it is obesity. Regarding needing care that is not available it is mental health issues... not suicide as much as treatment and case management of other mental health issues, bipolar, schizophrenia, etc. And addiction case management and follow up."
- "The American Academy of Pediatrics named poverty as the #1 threat to children's health. Children of color suffer poverty in much higher rates. It is a component of the conditions for childhood trauma. It underlies many of these other problems: diabetes obesity, asthma, mental health, dental health, smoking, chronic heart disease, and violence."
- "These are issues that can be prevented in some way. All need community education in a positive way at the places where people can see reasons for education."
- "They are all significant; it is really hard to choose just 1. Infant Mortality in St. Joseph County is too high and is a direct indicator of how "healthy" a community is."
- "Transportation is an issue for people who are ill in our community. They have trouble getting to doctor's appointments, chemo, radiation, etc."
- "We have a young population that doesn't seem to understand the effects of their decisions on the community and themselves through gun violence."



### Health Care Access

Respondents rated the ability of local residents to access health care services such as primary care providers, medical specialists, dentists, transportation, and Medicaid and Medical Assistance providers. Key informants were asked to rate their agreement with these statements on a scale of 1 (Strongly Disagree) through 5 (Strongly Agree).

According to key informants, Elkhart County residents are least able to access providers accepting Medicaid and Medical assistance, transportation for medical appointments, and mental/behavioral health providers.

“On a scale of 1 (Strongly Disagree) through 5 (Strongly Agree), please rate each of the following statements about Health Care Access.” (Elkhart County)

Factor	Mean Score	Percent of Respondents who “Agree” or “Strongly Agree”
Residents in the area are able to access a primary care provider when needed.	2.88	45.0%
Residents in the area are able to access a medical specialist when needed (Cardiologist, Dermatologist, Neurologist, etc.).	2.62	28.3%
Residents are able to access a dentist when needed.	2.73	33.3%
There is a sufficient number of providers accepting Medicaid and Medical Assistance in the area.	2.22	8.3%
There is a sufficient number of bilingual providers in the area.	2.25	13.3%
There is a sufficient number of mental/behavioral health providers in the area.	1.86	11.9%
Transportation for medical appointments is available to area residents when needed.	2.05	10.0%

According to key informants, St. Joseph County residents are least able to access mental/behavioral health providers, transportation for medical appointments, and bilingual providers.

“On a scale of 1 (Strongly Disagree) through 5 (Strongly Agree), please rate each of the following statements about Health Care Access.” (St. Joseph County)

Factor	Mean Score	Percent of Respondents who “Agree” or “Strongly Agree”
Residents in the area are able to access a primary care provider when needed.	2.96	40.0%
Residents in the area are able to access a medical specialist when needed (Cardiologist, Dermatologist, Neurologist, etc.).	2.71	28.9%
Residents are able to access a dentist when needed.	2.62	24.4%
There is a sufficient number of providers accepting Medicaid and Medical Assistance in the area.	2.55	11.4%
There is a sufficient number of bilingual providers in the area.	2.42	9.3%
There is a sufficient number of mental/behavioral health providers in the area.	1.71	6.7%
Transportation for medical appointments is available to area residents when needed.	2.11	8.9%

### Barriers to Health Care Access

After rating health care access service issues facing both counties, the informants were asked about the most significant barriers that keep people in the community from accessing health care when they need it. The top four barriers that were selected most frequently by informants were the same in both counties. However, the order in which they were ranked differed between the two counties.

#### Top Four Barriers in Rank Order in Elkhart County

- Inability to Pay Out of Pocket Expenses (Co-pays, prescriptions, etc.)
- Lack of Health Insurance Coverage
- Lack of Transportation
- Inability to Navigate Health Care System

#### Top Four Barriers in Rank Order in St. Joseph County

- Inability to Pay Out of Pocket Expenses (Co-pays, prescriptions, etc.)
- Lack of Transportation
- Inability to Navigate Health Care System
- Lack of Health Insurance Coverage

“Other” responses that key informants mentioned as barriers to accessing care included denial of the need for care, lack of affordable health care, and lack of case management.

The tables below depict the results for health care access barriers, including a summary of the number of times a barrier was mentioned and the percentage of respondents who rated the barrier as being the most significant in the community. The inability to pay out of pocket expenses was ranked as the most significant barrier in both counties.

Ranking of Barriers to Health Care Access (Elkhart County)

Rank	Access to Care Barrier	Count	Respondents who selected the barrier	Respondents who selected the barrier as the most significant
1	Inability to Pay Out of Pocket Expenses (Co-pays, Prescriptions, etc.)	50	82.0%	32.8%
2	Lack of Health Insurance Coverage	39	63.9%	23.0%
3	Inability to Navigate Health Care System	34	55.7%	11.5%
4	Availability of Providers/Appointments	27	44.3%	9.8%
5	Basic Needs Not Met (Food/Shelter)	27	44.3%	4.9%
6	Time Limitations (Long Wait Times, Limited Office Hours, Time off Work)	20	32.8%	4.9%
7	Lack of Transportation	38	62.3%	3.3%
8	None/No Barriers	2	3.3%	3.3%
9	Other	2	3.3%	3.3%
10	Lack of Trust	15	24.6%	1.6%
11	Language/Cultural Barriers	21	34.4%	1.6%
12	Lack of Child Care	6	9.8%	0.0%

Ranking of Barriers to Health Care Access (St. Joseph County)

Rank	Access to Care Barrier	Count	Respondents who selected the barrier	Respondents who selected the barrier as the most significant
1	Inability to Pay Out of Pocket Expenses (Co-pays, Prescriptions, etc.)	37	84.1%	32.6%
2	Inability to Navigate Health Care System	34	77.3%	25.6%
3	Lack of Health Insurance Coverage	33	75.0%	11.6%
4	Basic Needs Not Met (Food/Shelter)	25	56.8%	7.0%
5	Time Limitations (Long Wait Times, Limited Office Hours, Time off Work)	25	56.8%	7.0%
6	Lack of Transportation	35	79.5%	7.0%
7	Other	1	2.3%	4.7%
8	Lack of Trust	16	36.4%	2.3%
9	Lack of Child Care	19	43.2%	2.3%
10	Availability of Providers/Appointments	17	38.6%	0.0%
11	None/No Barriers	0	0.0%	0.0%
12	Language/Cultural Barriers	22	50.0%	0.0%

Key informants also shared additional information regarding barriers to health care access. Their responses are summarized below.

**Additional Information Regarding Barriers to Health Care in Elkhart County:**

- “Even if health coverage expands for US Citizens, we will still have a large number of uninsured immigrants.”
- “Very limited after work hours or on weekends.”
- “Lack of education and lack of affordable healthcare.”
- “Our community needs more adult providers offering a sliding fee scale.”
- “Education is essential. Too often people seem to be exploited rather than valued. Care should be incentivized by those able to give it. Give healthcare professionals an incentive to care for the poor. Empower the individual to be charitable; do not create a super structure that has no credible sense of the local situations.”
- “Lack of transportation and availability of providers are both equally a barrier.”
- “Lack of trust, cultural barriers and inability to pay probably form the greatest barriers.”
- “Medical is typically only sought out if it is an illness or emergency. Basic needs are barely covered and we have far too many folks that have no extra monies for other than basic needs.”
- “The Hispanic population is particularly at risk.”
- “We have a significant population that is poor in our area.”
- “Paying premiums for healthcare coverage, along with co-pays, out of pocket expenses and deductibles prohibit most individuals from getting healthcare. When you have to choose between buying food and medication, the system is broken. And, if you are on a fixed income, the choice is a place to live or medicine.”
- “Nobody is taking the time to train them [immigrants] properly about their rights regarding health access. For example it is incredible to have families with kids that were born in USA and still said that their kids don't have Medicaid because the people in charge of enrolling are mean and nobody take their time to explain to them properly how to complete the paperwork and how the system works.”
- “The out of pocket cost of medical care and medications has increased over the past several years. Even when co-pays for office visits were very low, there was a reluctance to pay anything for care. Many view medical care as a right and behave as if it should be free of charge. People choose to pay for other things, not necessarily needed for daily living, and do not allow for the cost of medical care. Many cannot set any amount aside, however, it is more common that there is a choice not to.”
- “There are still too many people that fall through the cracks when it comes to obtaining health care. I think much of that is people don't know how to navigate the healthcare system. It becomes frustrating for them to understand what information is being asked of them to provide, to gather information and then making sure it gets sent it to the right people. And many people aren't able to access computers and/or phones to apply for assistance. The lack of transportation in Elkhart County is an added burden to those trying to access any services.”
- “Services may be available but that doesn't mean patients can afford it - mental health in particular. Lots of services available but cost prohibitive.”
- “Cannot afford the insurance and still pay all their bills.”

**Additional Information Regarding Barriers to Health Care in St. Joseph County:**

- "All of the barriers are higher for the under and uninsured. For those with insurance, I would say that family practice physicians are easily accessible, along with most specialists. It does seem that we could use more dermatologists in our area."
- "Difficult to reach appropriate provider. Communication and customer service issues to frontline employees, (on phone) with courtesy and respect for caller no matter what language or degree of communication difficulties person has to explain need to office Especially if not from area or decreased knowledge of problem and ability to communicate...no matter how trivial it sounds to personnel.. if they call they have a need."
- "All of the above are barriers; however as a working, insured adult I find myself and hear of my colleagues putting off appointments due to time issues. This includes the length of time between calling for an appointment to actually getting one to the limited hours as well as the time you wait when going to see a physician."
- "Again, I think there are several options that deserve the #1 spot i.e. transportation, child care, time limitations, out of pocket expenses."
- "I am responding from the perspective of under-resourced people. People with resources would have a different set of issues, and many fewer. You created an excellent list, I would simply add that it is not one or two, but the way so many of these barrier interact piling up the stress and negative impacts, and creating the outcome that people wait until a condition is crisis or chronic to deal with it, and then it is much more expensive for them and the health care system."
- "I believe the biggest problem is lack of case management which includes inability to navigate health care system. Not knowing where to go and when they should go. No one to ask general questions of in making decision as to what to do early in a problem. So they let it go until it is a crisis. Public health nursing in my county is pathetic. No case management to speak of, which is the fault of the county commissioners and county health board. County has only had part time leadership and not leadership with a public health background. Do a decent job managing crisis but not being proactive and working on prevention."
- "Lack of transportation is also a significant barrier to accessing health care. If a person does not know how they are able to get to an appointment, the less likely they are going to make that appointment."
- "As a school nurse I have observed many families inability to leave their job without penalty to seek medical care for their children. Many parents need assistance in accessing the health care system. They just don't seem to know where to begin."
- "There are deep cultural frameworks that contribute to lack of access and distrust. Inability to pay and no health insurance just magnify the problems. Navigating the system has become the most difficult in recent years."
- "There are often resources available that people are not aware of."

### Underserved Populations

Informants were asked whether they think there are specific populations that are not being adequately served by local health services. Seventy-five percent of respondents in Elkhart County and 86% of respondents in St. Joseph County indicated there are underserved populations in the community. The most underserved populations according to respondents in both counties included:

- Uninsured/Underinsured
- Low income/Poor

The third most underserved population differed between the counties. Respondents in Elkhart County identified homeless individuals, while respondents in St. Joseph County identified Hispanic/Latino individuals. The following table depicts the percentage of respondents who selected a population as underserved. "Other" responses in Elkhart County included veterans and individuals who have government insurance, but cannot afford the out of pocket expenses. "Other" responses in St. Joseph County included undocumented residents, the uneducated, individuals with mental illness, the LGBTQ population, and adolescents.

Underserved Populations as Identified by Key Informants

Underserved Population	Elkhart County	St. Joseph County
Uninsured/Underinsured	81.4%	86.8%
Low - income/Poor	74.4%	84.2%
Homeless	46.5%	39.5%
Hispanic/Latino	41.9%	44.7%
Immigrant/Refugee	32.6%	34.2%
Seniors/Aging/Elderly	32.6%	28.9%
Black/African American	25.6%	39.5%
Disabled	18.6%	15.8%
Children/Youth	14.0%	31.6%
Young Adults	7.0%	23.7%
Other	4.7%	18.4%
None	0.0%	0.0%

## Health Care for Uninsured/Underinsured

Key informants were asked to identify where uninsured/underinsured individuals go to access health care. The vast majority of respondents (72% in Elkhart County and 76% in St. Joseph County) indicated the Hospital Emergency Department as a primary place where uninsured or underinsured individuals go when they are in need of medical care. The remaining respondents indicated that uninsured or underinsured individuals access care through the following locations. The locations are ranked in order by the number of respondents who selected the location.

- Walk-in/Urgent Care Center
- Health Clinic/FQHC
- Other
- Doctor's Office

"Other" responses by informants in both counties indicated that these individuals do not seek any care. However, Elkhart County informants also mentioned Heart City and The Center for Healing and Hope as additional locations.

Key informants also shared additional opinions regarding uninsured/underinsured individuals and underserved populations.

### **Additional Information Regarding Uninsured/Underinsured Populations in Elkhart County:**

- "Amish population is uninsured and price sensitive but not unwilling to pay."
- "Most physician practices require payment at time of service."
- "Simple they will not be rejected in an emergency room; that is why if doctors were given tax credits to help the poor, costs would plummet."
- "Individuals go to the emergency room because they know they can receive care and they don't worry about the bill. If you have no assets or income, what does it matter if you can't pay for an emergency room visit?"
- "They go because there is no any other choice but they don't feel welcome. If the clinic will take some time to explain how the health care system works and the rules of the clinic (for ex. arrive on time, bring an interpreter, etc.) things will run smoother."
- "Concerned about the people who make too much money to qualify for assistance and don't make enough money to afford premiums."

**Additional Information Regarding Uninsured/Underinsured Populations in St. Joseph County:**

- “It is not only the Hispanic population that has these difficulties though this survey is strongly leading to it. These issues are as strong to low economic, low educated persons who need care. Also new people to our community who are from any foreign country, any state they have left for any reason, and a large population of mentally ill persons.”
- “I think more hospitals are responding to this practice by putting Walk-in Urgent Care Centers within hospital emergency rooms.”
- “Folks habituate going to the Emergency Room because of several factors including not having a medical home, not having preventive care, 24/7 availability, and a hope that they won't have to foot the bill.”
- “I have heard about several cases where the uninsured went to the emergency rooms and were not given all appropriate tests and then a short time later were diagnosed with serious life threatening conditions.”
- “I think providers underestimate how much care the poor and uninsured DO NOT GET. We often think that they go to the ER/ED, which they do, but the bigger problem is that they do not get care at all.”
- “While there are several low-income and sliding scale clinics in the community, they are overburdened such that there are often closed waitlists or long periods of time before they can accept new patients. Also, since this population is so habituated to "oughing it out" for financial reasons they still only access primary care when things are very bad; preventive care is still considered a luxury.”
- “Most providers are inadequately equipped to address the psych/social/sexual health needs of individuals. There is way too much cultural discrimination especially when it comes to Blacks, Africans, undocumented and the LGBTQ communities.”
- “It's been my experience to observe families choose to utilize the emergency department rather than establish a medical home or request an appointment with their PCP.”

**Resources Needed to Improve Access**

Respondents were asked to identify key resources or services that are needed to improve access to health care for residents in the community. As depicted in the figure below, the most needed resources to improve access to health care differ between the counties. The top three needed resources in each county include:

**Elkhart County**

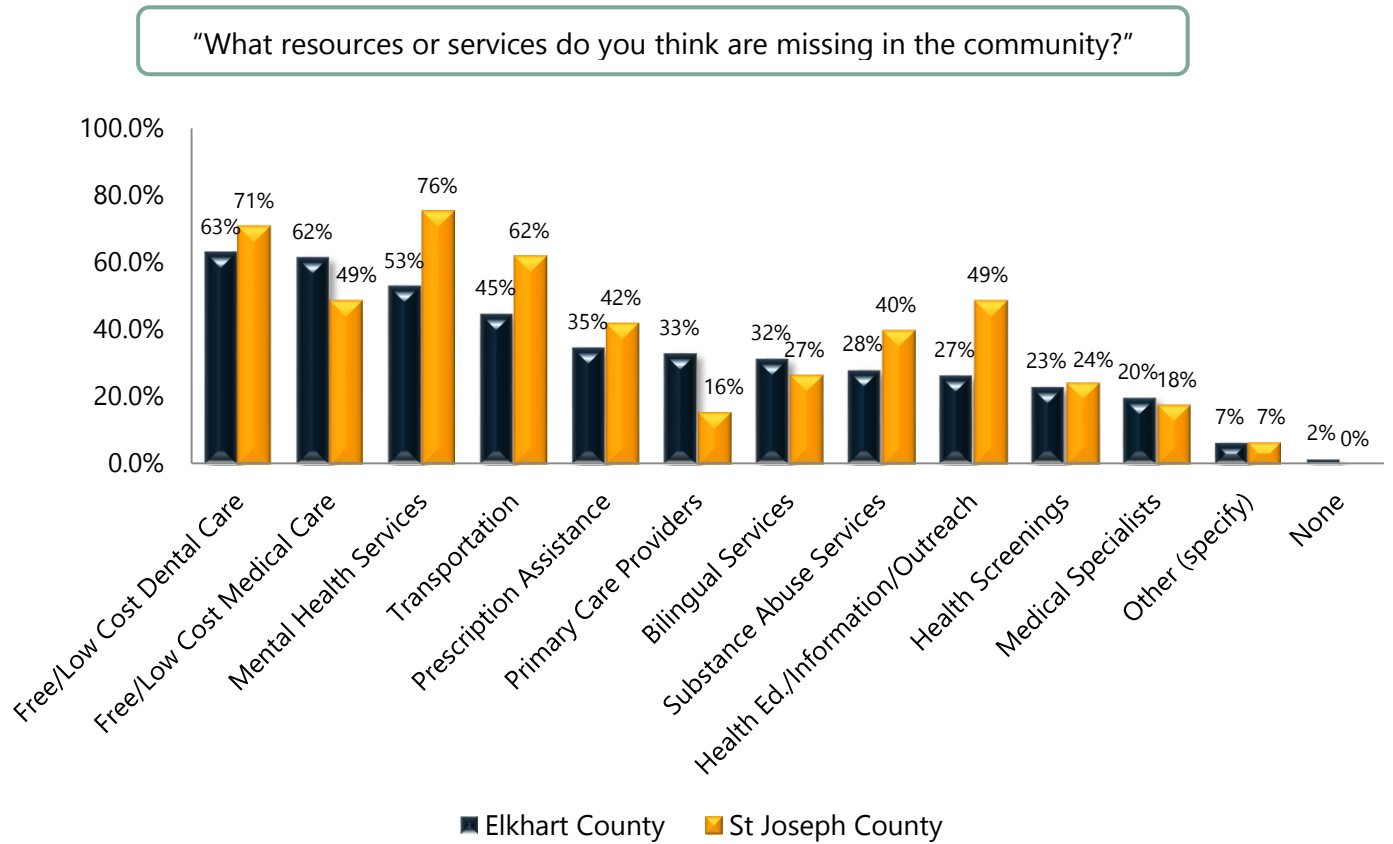
- Free/Low Cost Dental Care
- Free/Low Cost Medical Care
- Mental Health Services

**St. Joseph County**

- Mental Health Services
- Free/Low Cost Dental Care
- Transportation



“Other” responses that informants provided in Elkhart County included a health organization committed to self-pay pricing strategies, better labor/delivery plans and more prenatal education, transportation for wheelchair-bound individuals, and tax credits for medical professionals who help the poor. “Other” responses that informants provided in St. Joseph County included case management, public health nursing, and high quality professionals and specialists. The figure below depicts the rankings by key informants in each county.



### Challenges and Solutions

Respondents were asked, “What challenges do people in the community face in trying to maintain healthy lifestyles like, exercising and eating healthy and/or trying to manage chronic conditions, like diabetes or heart disease?” Key informants identified a variety of prominent and overlapping issues in the counties. These challenges included lack of education/health literacy regarding healthy lifestyles, lack of motivation, time constraints, the weather, financial barriers, and lack of services and infrastructure to promote healthy lifestyles and manage disease. In addition, informants in St. Joseph County emphasized transportation and a culture of substance abuse.

In regards to health literacy, respondents felt there was a need to increase the understanding of health issues and the importance of maintaining healthy lifestyles. Informants felt a coordinated effort needs to

be in place to work with community members and providers to make health information more comprehensive and accessible.

**Select Comments Regarding Challenges People in Elkhart County Face  
in Trying to Maintain Healthy Lifestyles:**

- “Access to PCP and diabetic supplies are an issue. Eating healthy is difficult when people are below poverty level. It is easier to purchase fast foods or pre-packaged foods.”
- “Availability of low cost and expanded after hour services.”
- “Better diet habits and funds...affordable healthcare.”
- “Cost of healthy food options and education on chronic diseases.”
- “Cost. The monthly cost to join a gym is not affordable for most families and fresh fruits and vegetables cost more than purchasing in the can.”
- “Culturally held stigmas and habits.”
- “Education on how to manage their illness and changing eating habits.”
- “Elkhart County has high population of blue collar workers who tend not to have healthy lifestyles.”
- “Financial challenges including transportation, basic food/shelter.”
- “I believe a portion of it is simply lack of knowledge. Also, inadequate opportunities to learn about how to fit exercising and healthy eating into a hectic schedule. Many people are too tired to exercise and prepare a healthy meal for their families and/o don't know how to change their life styles. Money has a lot to do with health eating It can be very expensive to eat well therefore access to good choices is limited.”
- “It costs more to eat healthy and most seniors are on a fixed income and cannot afford it.”
- “Lack of community based interventions to support chronic conditions.”
- “Lack of facilities for exercise in Elkhart County in general. Also, only a limited number of community events to support healthy lifestyles. Overall, there is a support for tobacco use relative to other parts of the country where smoking rates are far lower.”
- “Lack of knowledge, breaking destructive family or origin cycles, finances.”
- Limited access to facilities that are designed to promote wellness/exercise. We do not have a community that is built around exercise and fitness. Dining and grocery stores do not always promote healthy options.”
- “Limited finances results in eating food from food pantries--very little raw fruits and vegetables. Many are so overwhelmed with the process of obtaining their basic needs that there is no energy left for exercising.”
- “Limited safe walking and biking opportunities. Limited access to fresh fruits and vegetables in some areas. Great access to fast food and alcohol.”
- “Poor examples in their lives for a healthy lifestyle. Access to quality low cost healthy foods in their neighborhood.”
- “Salad is more expensive than hamburgers. We have a driving culture and infrastructure that discourages walking and cycling.”
- “The community does not appear to foster outdoor activities. Sidewalks, walking paths, etc. The County (Elkhart) is very dispersed, and transportation is needed to go nearly everywhere - as there is no 'core hub', therefore you cannot walk or bike to job, or non-work activity.”

- “The cost of belonging to a fitness facility is prohibitive for many in the community; however, there are free parks and bike trails, if someone wants to walk or ride a bike for exercise.”
- “There are not enough places to go (under budget), language barrier. They don't receive customer service of quality. Sometimes you feel that you are begging for services because the way that people treat you. But no even the paperwork is written in good Spanish and the frustration starts in both ends.”
- “Weather creates difficulty with exercise good portion of the winter months. Eating healthy costs more than fast food and starchy foods.”

**Select Comments Regarding Challenges People in St. Joseph County Face  
In Trying to Maintain Healthy Lifestyles:**

- “There are a lot of programs available, but people do not know what they are or whether they qualify. And if they do qualify for a program, a lot of people have problems with transportation. Also, there are not enough healthy eating options or parks in lower-income areas. Actually, there aren't enough parks in St. Joseph County in general.”
- “Affordable options; location of services; lack of motivation of the individual and lack of knowledge”
- “Again, it depends if you are resourced or under-resourced. If under-resourced, then safe spaces, free time, lack of money, food deserts, and overwhelming stress all contribute.”
- “Challenges include unpredictable (and sometimes harsh) weather, safety concerns (cannot always walk/run/bike in neighborhoods), cost to join club/participate in fitness and sports.”
- “Costs associated with gym memberships, inclement weather, lack of information with regards to eating healthy.”
- “Eating healthier and exercising are habits that need to be established early. Cost is a big factor to having access to healthier foods and exercise routines.”
- “Eating whole foods/raw/organic is extremely expensive and it's much more economical to eat highly processed shelf stable foods. There are limited free exercise options and those are impacted greatly by the weather.”
- “Financial burden for a gym membership and purchasing healthy foods. Time crunch when working 1 or more jobs and raising a family. Habits are hard to change and there can be push back from family members when a healthier meal is made.”
- “Health is low priority for those whose basic needs for companionship, family, human connectedness are not met. When they are not listened to, when their concerns are diminished and when basic survival is the primary challenge.”
- “Higher cost of health foods, winter weather makes exercise difficult outdoors.”

- “It is more expensive and requires planning to eat healthy foods. The default is fast overly processed foods high in salt and sugars. Exercise is no longer part of our work and play. We have created a society less focused on physical activity to socialize and get things done. Exercise in a gym is either costly and our weather does not encourage outdoor play. We also lack free outdoor hiking and recreation in our most urban areas.”
- “Lack of education on the benefits of exercise and healthy eating; cost of medication for disease management.”
- “Lack of education on their health conditions. No other information or continual education is given to the person after their diagnosis. Continual follow up is needed.”
- “Lack of educational training for Spanish speakers on the topic. The more education given to the older generations the less likely that future generations will follow bad habits.”
- “Lack of money, transportation, knowledge of healthy lifestyle, commitment to healthy lifestyle.”
- “Low income people cannot afford fresh fruit and vegetables and food pantries often are unable to supply fresh produce.”
- “One of our challenges is the weather, considering that 4-5 months out of the year are cold and snow-covered it can be hard to be consistent in working out and those without access to a gym membership suffer the most. Also, education is key, I do not think people know what foods to eat, or appropriate meal sizes. In addition, many stores in low-income communities lack any fresh fruit and vegetables.”
- “People who live in economically disadvantage neighborhoods often do not have access to a safe place to walk for exercise. Also, their eating habits are passed down through the family and they do not have any reference points for a healthy diet.”
- “Poverty, substance abuse, lack of mental/emotional healthcare.”
- “The inability to pay for a membership to a fitness center or information about cheap or free classes being offered in the community. Also they have no transportation to get there.”

Next, key informants were asked, “What’s being done well in the community in terms of health and quality of life?” Community outreach programs, hospitals and other health care providers, and community agencies and non-profit organizations providing health education and free/affordable health care services were frequently mentioned by informants. The following text boxes highlight select feedback given by participants for each county.

**Select Comments regarding What’s being Done Well in the Community in Elkhart County:**

- “A few agencies that I think are doing a good job meeting the needs of low income households who struggle with health concerns include: Center for Healing and Hope, SPA (Spiritual & Personal Adjustments) Women's Ministry Homes, and Heart City Health Care.”
- “Agencies like the NIHHC that honestly wants to work as a coach with the community members to help them to make changes in their habits for their good. Also, giving tools (for ex. the Community Resource Directory) to empower them to make healthy choices regarding new habits, and places to go and get their services.”
- “Center on the aging is trying to make huge changes for the community it serves.”

- “Church Community Services is one of the agencies doing an amazing job of reaching out to clients and trying to respond to the individual needs of their clients. I also think Faith Mission is an outstanding agency trying to help their clients find their pace in the community.”
- “Churches and Support systems are excellent.”
- “Community Health Centers are branching out and opening facilities in areas where people can access them more readily.”
- “EGH does a lot of Community Outreach to get people thinking about their health and offers free screenings at employer and Elkhart County fair.”
- “Fine FQHCs, Fine hospitals Mental health working with PCPs and hospitals.”
- “Heart city health center opened another clinic site. Center for healing and hope is a tremendous help in the community.”
- “Heart City is doing a nice job serving the underinsured and uninsured children.”
- “Maternity is covered.”
- “More hiking/biking trails available...”
- “More options for urgent care providers.”
- “Relatively strong health systems and better than average health departments.”
- “The Center for Healing and Hope is providing urgent care and advocacy to uninsured and underinsured in our community.”
- “The Elkhart Community Foundation is positioned to be a catalyst for some efforts.”
- “There are numerous healthy lifestyle sessions available to the community, and both county hospitals are active in community outreach efforts.”
- “There is a concerted effort to reach persons in all demographics to ensure primary health care and especially urgent care for those in need. I am thankful, for the community is only as strong as it weakest members.”
- “We have many not-for-profit agencies reaching out.”
- “We have the best system in terms of technology and innovation.”

#### **Select Comments regarding What’s being Done Well in the Community in St. Joseph County:**

- “I really appreciate Memorial's efforts to support low income, minority, and marginalized people with low cost health clinics, the fantastic diabetes outreach program, and support to many nonprofits. We have a caring group of nonprofits.”
- “Biking paths improving Revitalizing the riverfront and bringing people and jobs to downtown Access to healthy, local options for wealthier populations Some strong outreach efforts Some good school food efforts.”
- “Collaboration with hospital systems and other health-related organizations to share ideas and work in groups to try and impact the community in a positive way - through the Health Improvement Alliance. The expanded river walk and the continuation of this project. Bike lanes.”
- “Good databases, willingness to learn and grow, support systems in place.”
- “Health alliance; involvement of major health organizations; number of non-profits in our area.”
- “I like seeing more bike routes and pedestrian friendly centers.”

- "I think we are blessed with quality hospitals and doctors. There is good access to health care, even for those who "can't afford it"."
- "Lots of chances to get out and do things for free (ROC event, city parks, bike lanes and paths, playgrounds, free community events with activities such as downtown exercise series in the summer..."
- "Memorial's diabetes self-management program, REAL services discharge transition management."
- "No-cost Community programming: e.g. Memorial's Healthy Diabetics, SJRMC seniors programming, United Way's Prescription 2 play, SB Parks Dept./County Health Dept.'s Passport to Play & Roc Your Body events"
- "RiverBend Cancer Services provides low income people financial help with their prescriptions related to their cancer diagnosis and cancer treatment. United Health Services provides free mammograms for low income people."
- "Several coalitions are emerging in the community which should help to break down barriers and align objectives."
- "The community is constantly evaluating itself and looking at areas for improvement. Community health providers are joining together to talk about these issues and to gain a better understanding of the role that everyone plays."
- "The Kroc Center is a great addition to our community, along with community service announcements that promote a healthier life style. The St. Joseph County Health Dept. is making great strides to plan activities for kids such as the "walking school bus" and "prescription to play" programs brought about through the Reducing Obesity Coalition."
- "The St. Joseph County Health Improvement Alliance has formed to collaborate with providers and target areas of great need in our community."
- "There are a lot of coalitions and initiatives happening; they just need to work together rather than in silos."
- "There has been great improvement in providing language services to the non-English speaking population."
- "This community has several options for low income/uninsured to get medical services, FQHCs and free clinics."
- "We have many health care providers competing for business and this creates a more customer-friendly environment."
- "We have a wide variety of doctors/ specialists in the community. We also have excellent hospitals. Community outreach for health screenings and education could be more comprehensive."
- "We have agencies that serve meals free, 3/day, 7 days/ week. We have a well-coordinated shelter service, though there are some gaps. Access to healthy food in season is improved through open gardens and there are free classes on gardening and nutrition."

Key informants were then asked to provide suggestions or recommendations to improve health and quality of life in their community.

### **Suggestions/Recommendations in Elkhart County:**

- “Be humble, understand that we are living in a multicultural environment and everybody needs to learn and growth. No because you are behind a desk you deserve respect, everybody deserves to be treated as a human being. Everybody should take cultural sensitivity seminars (community and health care providers). It will help us to growth and to understand the reason why so many immigrants behave the way they behave.. is in their culture.. it is not their intention to drive the system crazy. If the system doesn't take the time to educate and train them, so why they expect that things start working better. We need tolerance, education, and compassion. We need an inclusive community/system if we want to be successful.”
- “Better community networking with electronic systems.”
- “Certified trained midwives and proper prenatal care and education provided in the Amish community. Affordable delivery plans in place.”
- “Choosing to focus on the Senior community in this area would make a significant impact on the community. Not having Seniors isolated, afraid and forgotten would be help improve health. Imagine how improved health would be for all Seniors if they didn't have to worry about how they were going to get to their medical appointments and the grocery store.”
- “Collaboration of social service agencies to create "wrap-around" services that coordinate people not shying away from Affordable Care Act and embrace what it can do for people.”
- “Community outreach and more Hispanic healthcare workers.”
- “Develop a plan for the entire community to develop wellness options such as walking/bike paths, Create more green spaces and provide better lit neighborhoods.”
- “Educating the people where they are. If they are in a homeless shelter take the medical professionals to them for general screenings. Go into the classroom and teach the young adults how to start living a healthy lifestyle. Come up with some low cost weight loss activities for the youth to help cut down on obesity.”
- “Educational component in elementary schools to teach healthy lifestyle choices.”
- “Establish more satellite clinics in inner city. Walking distance for many who transportation is an issue”
- “I think that it's vital that we improve the transportation system in Elkhart County. This would help people get to their appointments AND get to jobs where they can hopefully get health insurance. I would like to see businesses use temporary services les and instead of letting people go after 90 days they get hired. I know I'm dreaming but I'd like to see fewer or better yet NO check into cash places that prey on poor people and have more banks that would help with low interest loans. This I believe would help the quality of life in our county.”
- “Improve access to substance abuse treatment, wellness resources, violence reduction, gun control, decrease water and air pollution and improve health literacy.”
- “Increase public transportation options.”
- “Lower cost of health care. Places like CVS and Walgreens having a nurse practitioner would be helpful.”

- “More and better community funded programs to education individuals and that also provide a place for individuals to socialize, exercise and participate in free health screenings.”
- “More community collaboration on initiatives to spread the burden among many agencies.”
- “More services after hours, low or free services with weight loss and improve physical wellbeing.”
- “One area to focus on is the need for a vibrant 'downtown' one that is used 24X7, 7 days a week. This has a ripple effect throughout the county. You see towns all across the nation that have built up their core, really showcase alternative methods of transport (bike, electric plug in spots, etc.).”
- “Possibly formulating a successful outreach program for low income families and individuals to help teach how to eat good, fresh, whole foods at a low cost and help people to understand the many mental and physical benefits to adequate nutrition and exercise.”
- “Support aging population programs such as offered by Council on Aging to keep people in their homes. Community Based Mental Health that is multidisciplinary and has a team approach.”
- “Support organizations such as those above that are meeting needs and bringing hope to what would seem to be hopeless situations!”
- “We are in desperate need for a detox and residential treatment service for chemical/substance abuse.”
- “We need low to no cost medical, dental and mental health services - there are Health Centers, but they are not able to provide enough caregivers for the whole county's needs.”
- “We need more adult providers in under-insured population.”

### **Suggestions/Recommendations in St. Joseph County:**

- “A health professional in schools would help with children's general health and education about healthy choices.”
- “Academic-professional-community partnerships Centralized resource organization that keeps track of all efforts related to health in community so that organizations can pool resources (Memorial working on Blue Zones; city working on Let's Move... might be better to pool resources into fewer but more effective efforts; mobilize funds, volunteers, data collection/evaluation, etc.)”
- “Better access to fresh food; additional healthy restaurants that serve vegetarian/vegan dishes or have farm-to-table concept; more parks; better transportation; more fitness related events and activities, especially in the winter.”
- “Better collaborations with the resources we have available.”
- “Better/longer bus schedules. I understand that South Bend is nowhere near the size of Chicago, which is where I am from, but what made Chicago work is that the buses run a lot later and on weekends. Many of the working poor work on weekends and have no transportation. Many of the working poor want to be involved in their community but without transportation they are not able to do that. I believe that a better transportation system is the first step to improving the healthy and quality of life in the community. The 2nd is more affordable fitness centers or even a free day 2xs a week for a couple of hours so that they can utilize a community based center like the Y or The Kroc Center.”



- “Clearly identified bicycle paths with wayfinding signs More ethnic, (more than Hispanic), events and celebrations. Invite community. Continue health screens at all events. Sponsored by different foundations, i.e. Breast cancer, prostate cancer, cardiology, infant health, women’s and men’s health . Dental screens.”
- “Create and fund programs that go out into the community and offer regularly scheduled, free programming for the entire family to participate in locations and time convenient to working households with transportation constraints.”
- “Create more free community access points to walk/run year round.”
- “Greater collaboration and partnership between hospital systems, health organizations and community.”
- “I think it is imperative that our community look at services from the client perspective and see how we can create a system that is much easier to navigate. A One Stop concept with evening and weekend hours would make great sense and has been done effectively in other communities. It could include training and screening opportunities. It should include other resource builders like WorkOne and Ivy Tech.”
- “I think sidewalks are key to improve the health and quality of life in the community. If there were sidewalks, I could walk everywhere, but walking on the street or on the grass isn't safe.”
- “Implement more tobacco free areas. Encourage employers to be proactive and support wellness initiatives to better the health of their employees. More public transportation options.”
- “Increased transportation access, increased access for low income.”
- “Mental health services and access need to be dramatically increased. Waiting times are absurd and discharge times are shortened.”
- “More availability of fresh fruits and vegetables. Create neighborhood farmer's markets where people can walk to purchase healthier foods. Safe community parks with planned recreation programs. More bike and walking paths. Better access to health care or the lower income population and more PCP's and Dentists willing to accept Medicaid patients.”
- “More bike routes, more free (and preferably indoor) fitness options, and a concerted effort to bring these to parts of the community with the greatest need/fewest resources.”
- “More community-based screening, disease specific education and case management.”
- “More education for young parents so they can break the pattern of unhealthy lifestyles that are passed on to their children.”
- “More education regarding mental health issues and how it affects children.”
- More free clinics throughout the city that the uninsured/underinsured can access. Expanded Transportation Access that can help more people get to doctor's appointments, treatment, etc.
- “More opportunities for educational programs on various health conditions. Increase locations, more locations in minority communities.”
- “Need to find "role models" that live within the community you are trying to reach with the message. Who IS healthy in spite of facing the same challenges? How do they do it?; need more "walkable" areas in low-income neighborhoods, better connections to existing trails; finding ways to encourage use of parks for hiking/recreation; finding better ways to align resources and maximize community engagement/philanthropic funding.”
- “Provide more information to the community about insurance and where they may obtain services.”

Lastly, key informants were asked to share any additional comments.

**General/Additional Comments:**

- “The St. Joseph Health Improvement Alliance is working on some innovative solutions to address transportation issues (working with enFocus), Diabetes education and prevention, dental and preventative health, behavioral health and obesity. Beacon Health System is part of this collaborative and could be instrumental in finding funding sources to move these ideas forward and with a sustainable plan.”
- “Our community needs to build on the strengths we have (people and place) and find ways to bring like-minded groups together for positive change and action. As a major employer and health organization, you have the opportunity to bring best practices to our region and influence change. To achieve permanent change, I believe you have to find existing achievers in many different pockets of our community and empower them to lead and influence others in a positive direction.”
- “Nurture the positive. Build on the strong foundations already present in the community. Don't forget to include the church bringing a holistic focus of health to the community.”
- “It's wonderful that Beacon Health System is working on solutions. Thank you for the investment of your resources. I truly believe that a huge partnership that is being missed is that Beacon Health Systems does not use nonprofit resources that are available to the best advantage. For example, why is it that Beacon Health chose to provide non-medical home care services rather than partnering with nonprofits who provide the same service? I'm sure there are numerous reasons, but my guess is that the overriding reason is to make money. Can you just imagine the partnerships that could bloom if we stopped duplicating services and worked together?”
- “It is time to respond to the total health care needs of members of our community. There needs to be more collaborative efforts and valuing of methodology outside the status quo.”
- “I think Beacon is doing a great job. However, there is a lack of mental health services and substance abuse detox and residential services. If someone doesn't have financial support they are out of luck. Unfortunately both mental health and substance abuse in their very nature make it difficult to hold a job and sometime pay for treatment.”
- “Access to primary care physicians in the Beacon system is difficult, requiring a tiered system of communication in order to get questions answered. A return call is often hours later or the following day. For those without unlimited access to their phone, this can create an insurmountable obstacle. For others it is annoying.”

## ONLINE COMMUNITY MEMBER SURVEY

### Background

Beacon Health System, in conjunction with Holleran, used a customized survey tool consisting of approximately 50 questions to assess access to health care, health status and behaviors, social constraints, and health-related community strengths and opportunities. The survey tool was adapted from the Center for Disease Control and Prevention’s Behavioral Risk Factor Surveillance System (BRFSS) and included custom questions developed by Beacon Health System. BRFSS is the largest telephone health survey in the world. It is used nationally to identify new health problems, monitor current problems and goals, and establish and evaluate health programs and policies.

The survey took approximately 15 to 20 minutes to complete. In total, 1,053 residents completed the survey, 510 from Elkhart County and 543 from St. Joseph County. A copy of the survey tool can be found in Appendix D.

The following section provides an overview of the findings from the online community member survey, including highlights of important health indicators and health disparities. In addition, comparisons to the 2012 community health survey conducted in St. Joseph County are provided where applicable. It should be noted that while the 2012 and 2015 surveys are similar, they were conducted using different methodologies. The 2012 survey was conducted via phone interviews and was based on a statistically valid sampling of 599 individuals. The 2015 survey was conducted solely online and was based on a convenience sample. Results for 2012 and 2015 should be compared and interpreted accordingly.

### Online Community Member Survey Study Findings

#### Demographic Information

The demographic profile of the respondents who completed the survey is depicted in the tables below. Approximately 53% of all respondents in Elkhart County resided in zip codes 46517, 46516, and 46514. Approximately 51% of all respondents in St. Joseph County resided in zip codes 44619, 46628, 46530, 46614, and 46544. Of the total 1,053 respondents, 77.6% were female and 48.5% were between the ages of 35 and 54 years. Whites comprised 78.2% of study participants. However, a significant percentage of respondents in St. Joseph County (21.6%) were Black or African American. Approximately 15% of all respondents identified as Hispanic/Latino. “Other” race/ethnicity responses primarily included Hispanic/Latino or mixed race.

Elkhart County Zip Code Representation

Zip Code	%	Zip Code	%
46517	20.4%	46573	4.7%
46516	19.2%	46553	2.7%
46514	13.7%	46540	2.5%
46526	13.3%	46507	2.0%

---

46550	12.4%	46543	1.2%
46528	7.1%	46561	0.8%

St. Joseph County Zip Code Representation

Zip Code	%	Zip Code	%
46619	12.2%	46561	3.3%
46628	10.7%	46613	3.1%
46530	10.1%	46635	2.0%
46614	9.6%	46554	1.3%
46544	8.1%	46536	1.1%
46615	7.9%	46552	0.7%
46601	7.0%	46574	0.6%
46637	6.3%	46626	0.4%
46616	6.1%	46629	0.4%
46545	5.2%	46624	0.2%
46617	3.9%		

Demographic Information	Elkhart County		St. Joseph County	
	n	%	n	%
<b>Gender</b>				
Female	407	79.8%	410	75.5%
Male	103	20.2%	133	24.5%
<b>Age</b>				
18 - 24	16	3.1%	24	4.4%
25 - 34	95	18.6%	86	15.8%
35 - 44	176	34.5%	89	16.4%
45 - 54	119	23.3%	127	23.4%
55 - 64	72	14.1%	134	24.7%
65 and over	32	6.3%	83	15.3%
<b>Race/Ethnicity</b>				
White	432	88.7%	368	71.5%
Black or African American	9	1.8%	111	21.6%
Asian	1	0.2%	3	0.6%
Native Hawaiian or Other Pacific Islander	1	0.2%	2	0.4%
American Indian or Alaska Native	8	1.6%	7	1.4%
Other	47	9.7%	34	6.6%
Hispanic/Latino*	88	17.4%	65	12.1%
Arab or Middle Eastern*	2	0.4%	1	0.2%
Amish*	0	0.0%	2	0.4%

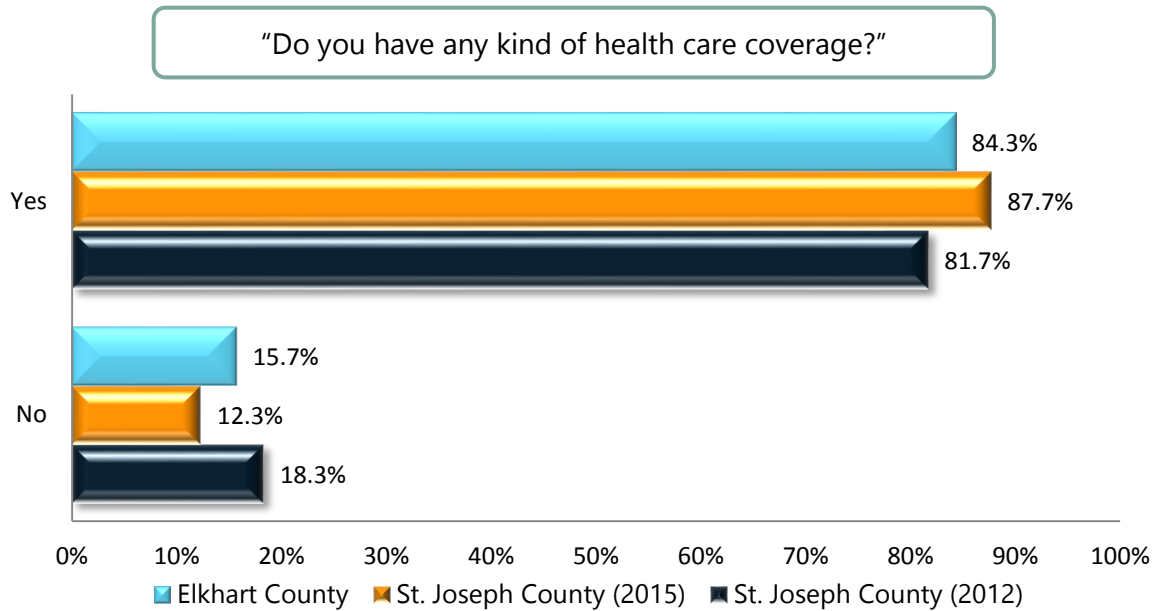
\*Respondents can be of any race, for example, White Hispanic or Black/African American Hispanic

The socioeconomic status of respondents, including education, employment, and income, was also assessed. Approximately three-quarters of respondents attended college for at least one year; approximately half of respondents attended college for four years or more. In addition, the majority of respondents were employed for wages. However, a notable percentage of respondents in St. Joseph County were retired. Approximately 69% of respondents in Elkhart County had an annual household income of \$50,000 or more. In contrast, only 41.4% of respondents in St. Joseph County had an annual household income of \$50,000 or more and 14.4% had an annual household income of less than \$10,000.

<b>Socioeconomic Information</b>	<b>Elkhart County</b>		<b>St. Joseph County</b>	
	<b>n</b>	<b>%</b>	<b>n</b>	<b>%</b>
<b>Level of Education</b>				
Never attended school or only attended kindergarten	0	0.0%	2	0.4%
Grades 1-8 (Elementary School)	12	2.4%	24	4.4%
Grades 9-11 (High school, no diploma)	10	2.0%	30	5.6%
Grade 12 (High school diploma or GED)	84	16.6%	77	14.3%
College 1 year to 3 years (Some college or technical school)	159	31.4%	140	25.9%
College 4 years or more (College graduate)	242	47.7%	267	49.4%
<b>Employment Status</b>				
Employed for wages	369	73.5%	317	58.8%
Self-employed	30	6.0%	22	4.1%
Out of work for more than 1 year	8	1.6%	24	4.5%
Out of work for less than 1 year	7	1.4%	13	2.4%
Homemaker	47	9.4%	32	5.9%
Student	11	2.2%	19	3.5%
Retired	18	3.6%	80	14.8%
Unable to work	12	2.4%	32	5.9%
<b>Annual Household Income from All Sources</b>				
Less than \$10,000	20	4.4%	72	14.4%
\$10,000-\$14,999	16	3.5%	41	8.2%
\$15,000-\$19,999	21	4.7%	22	4.4%
\$20,000-\$24,999	33	7.3%	25	5.0%
\$25,000-\$34,999	50	11.1%	71	14.2%
\$35,000-\$49,999	60	13.3%	62	12.4%
\$50,000-\$74,999	111	24.6%	95	19.0%
\$75,000 and more	140	31.0%	112	22.4%

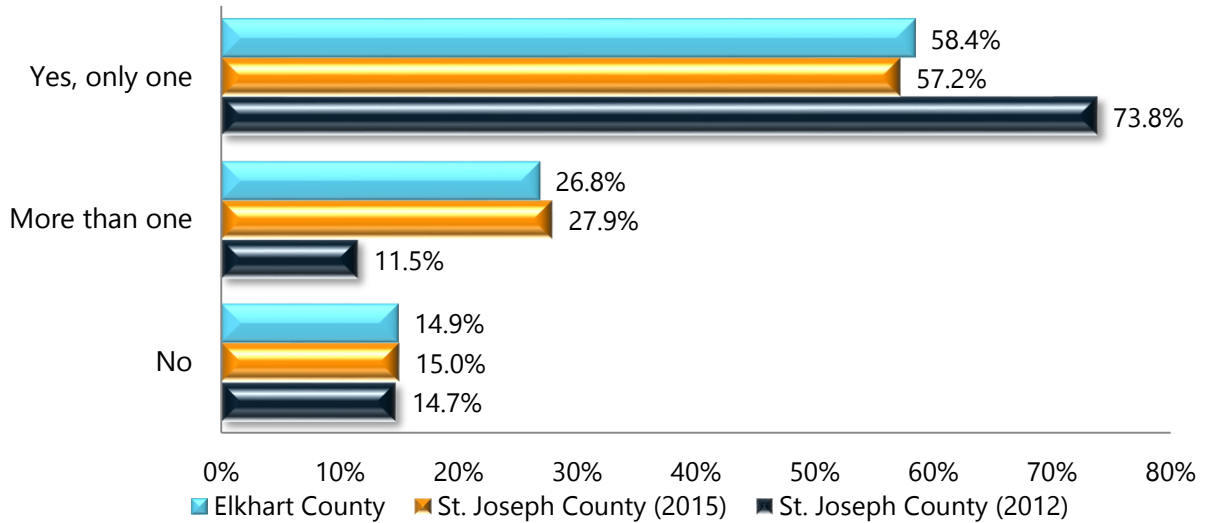
### Access to Health Care

Respondents were asked to indicate whether or not they have health care coverage, including health insurance, prepaid plans, or government plans, such as Medicare and Medicaid. Approximately 16% of respondents in Elkhart County and 12% of respondents in St. Joseph County are currently uninsured. The percent of uninsured individuals in St. Joseph County represents a 6% decrease since 2012.



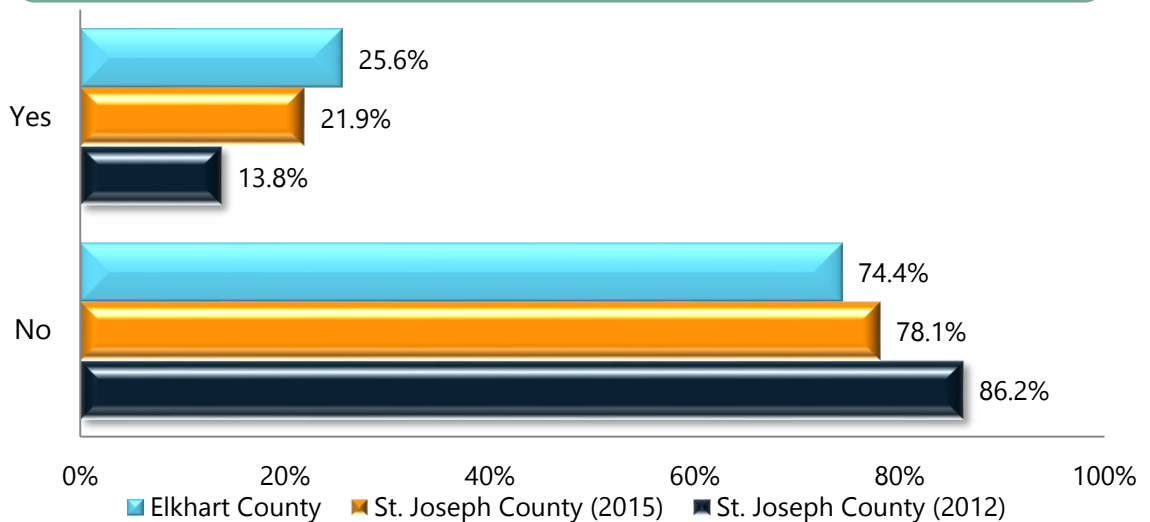
Approximately 85% of respondents in both counties have at least one person who they think of as their personal doctor, indicating that approximately 15% are without a medical home. The percentage of respondents in St. Joseph County without a personal doctor is consistent from 2012; however, a greater percentage of respondents now have more than one personal doctor.

"Is there one healthcare professional or health care provider you think of as your personal doctor?"



Lastly, respondents were asked to indicate whether cost was a barrier to seeing a doctor within the past 12 months. More than 20% of respondents in St. Joseph County and 25% of respondents in Elkhart County stated that cost was a barrier to seeking care. In addition, the percentage in St. Joseph County represents an increase of 8.1%.

“Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?”



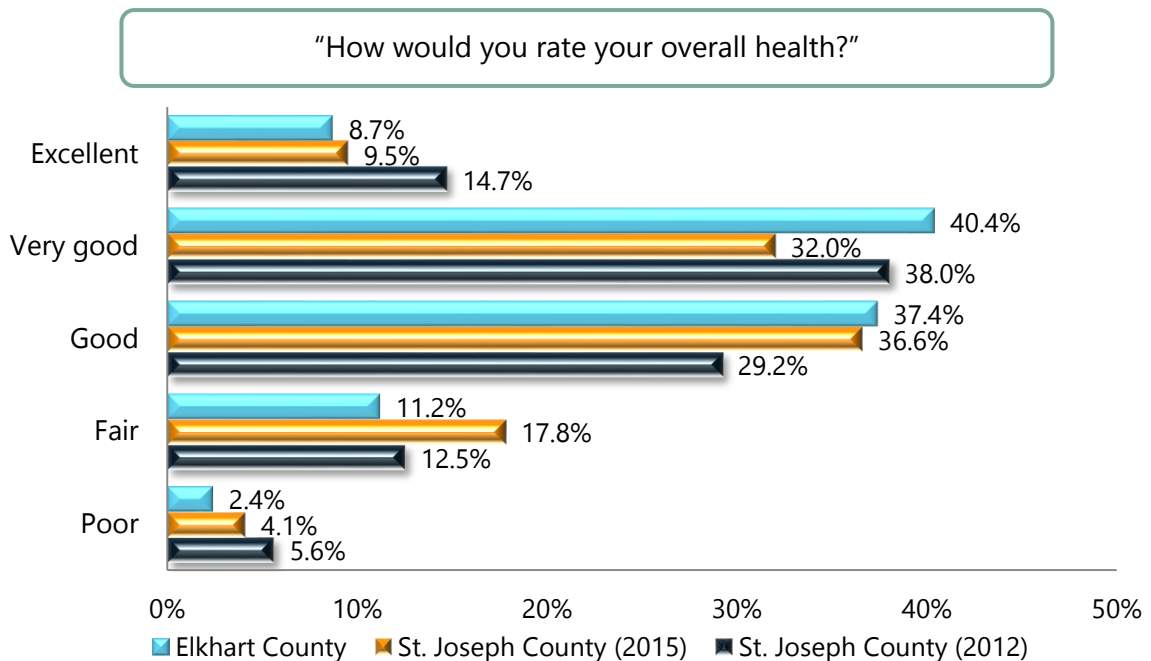
### Overall Physical & Mental Health Status

#### Overall Health Status

Respondents were asked to rate their overall health status and mental health status. In general, respondents were most likely to report having “Good” or “Very good” health. However, a notable percentage reported having “Fair” health, particularly in St. Joseph County (17.8%). In addition, St.



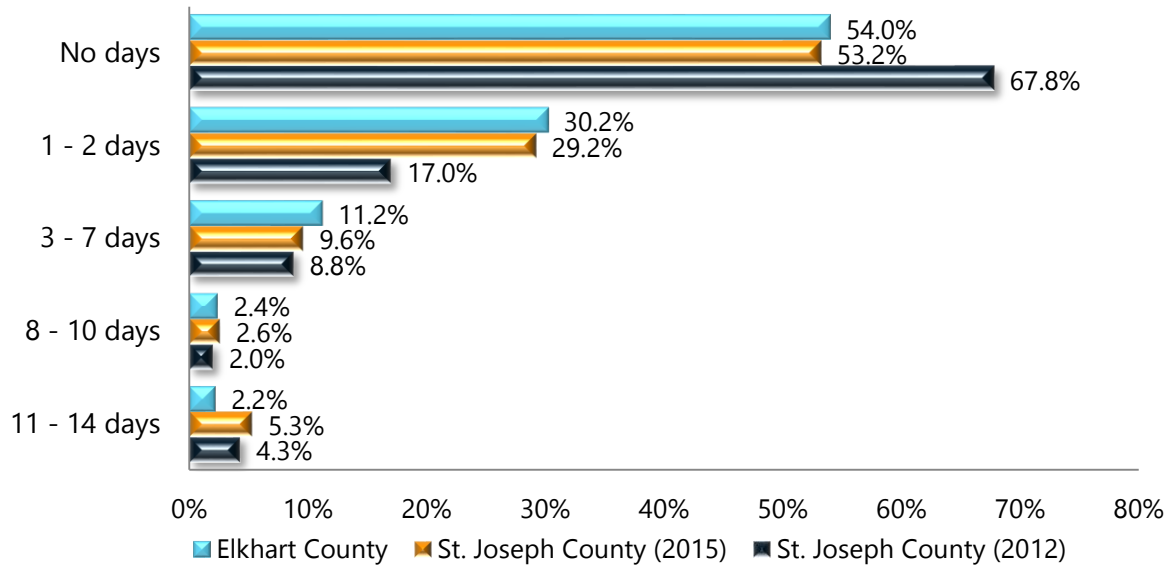
Joseph County experienced a notable decrease in the percentage of respondents reporting “Excellent” or “Very good” health.



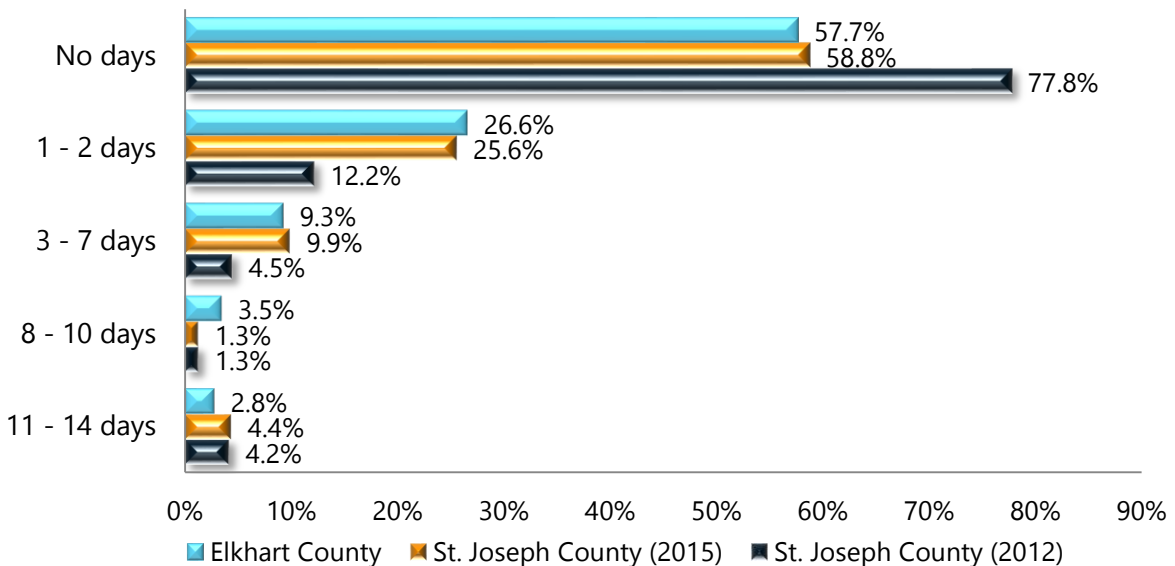
**Mental Health Status**

Respondents were asked to rate their feelings of anxiety and depression. A little less than half of all respondents in both counties felt down, depressed, or hopeless at least once over the last two weeks. A slightly lower percentage of respondents felt bad about themselves or like they are a failure or like they let their family down. St. Joseph County experienced a notable increase since 2012 in the percentage of respondents who experienced a form of depression.

“Over the last two weeks, how many days have you felt down, depressed, or hopeless?”

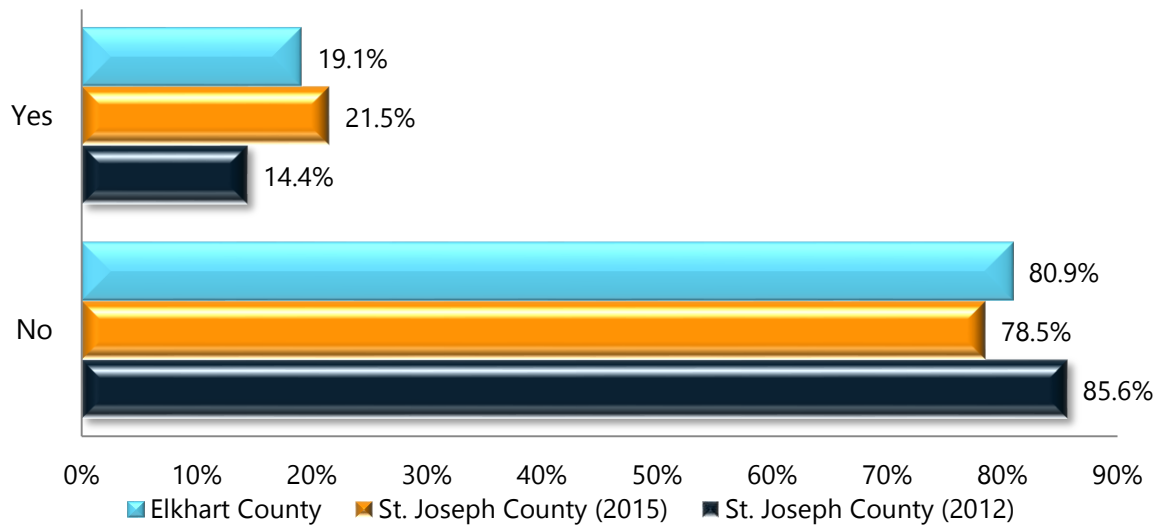


“Over the last two weeks, how many days have you felt bad about yourself or that you were a failure or had let yourself or your family down?”

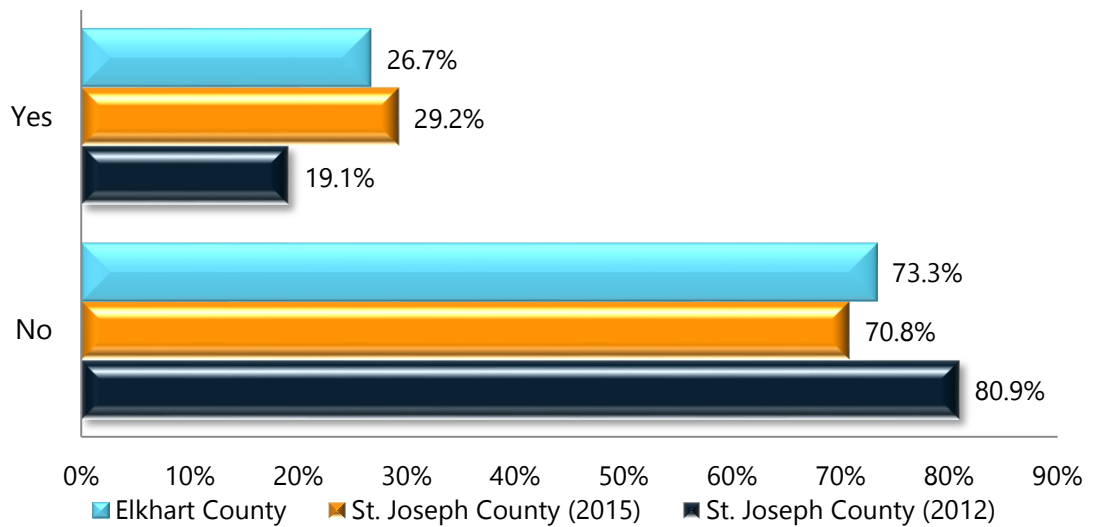


Respondents were then asked to report if they have been diagnosed with an anxiety or depressive disorder. In Elkhart County, 19.1% of respondents have been diagnosed with an anxiety disorder and 26.7% have been diagnosed with a depressive disorder. In St. Joseph County, 21.5% of respondents have been diagnosed with an anxiety disorder and 29.2% have been diagnosed with a depressive disorder. Both percentages in St. Joseph County increased between 2012 and 2015.

“Has a doctor or other health care provider ever told you that you have an anxiety disorder?”



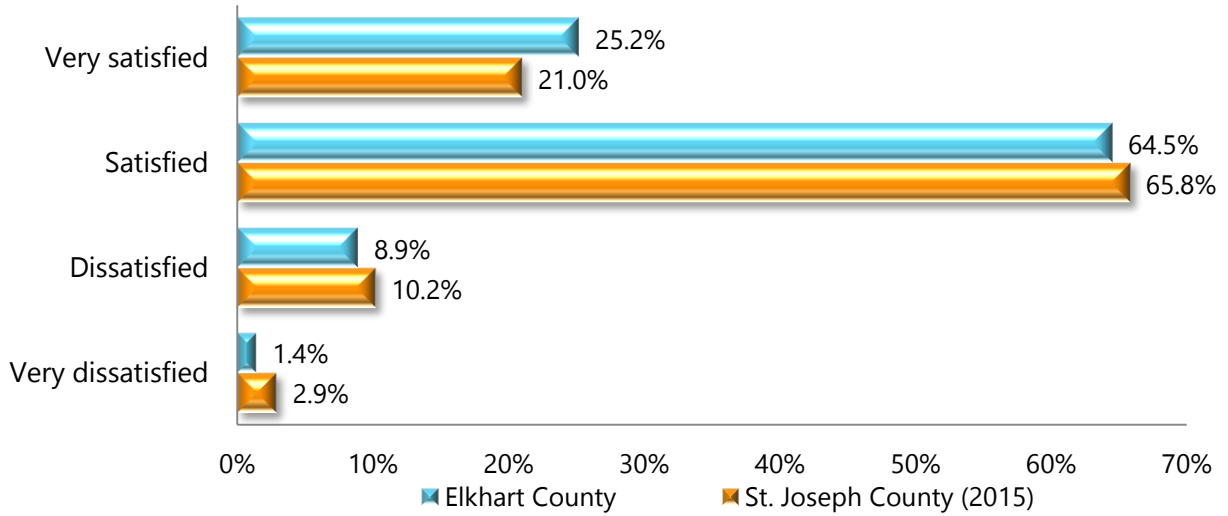
“Has a doctor or other health care provider ever told you that you have a depressive disorder?”



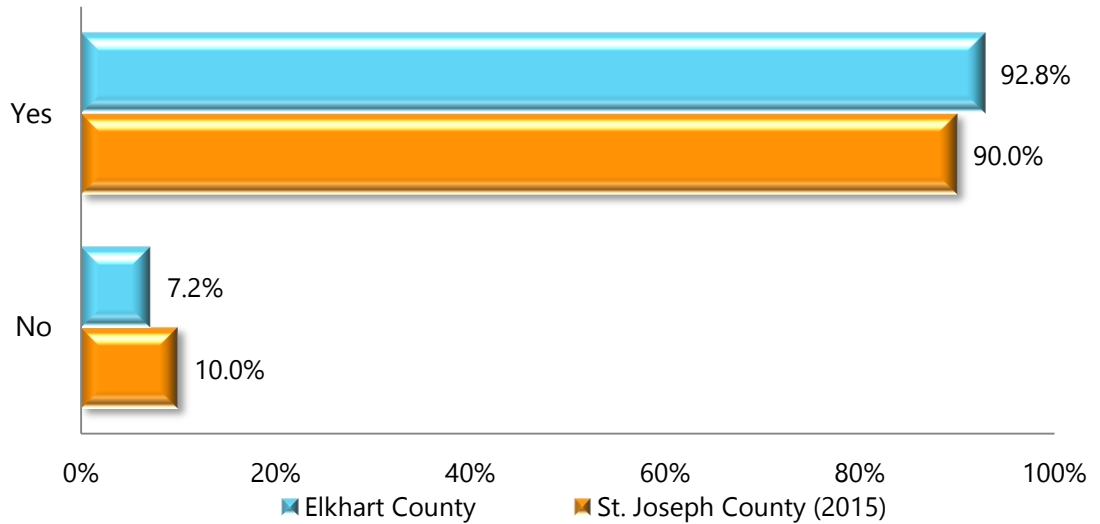
**Life Satisfaction & Purpose**

Lastly, respondents were asked to rate how satisfied they are with life and report on if their life has direction/purpose and is meaningful. In Elkhart County, approximately 90% of respondents are “Satisfied” or “Very satisfied” with their life, 93% have direction or purpose in their life, and 95% find their life meaningful. In St. Joseph County, approximately 87% of respondents are “Satisfied” or “Very satisfied” with their life, 90% have direction or purpose in their life, and 94% find their life meaningful.

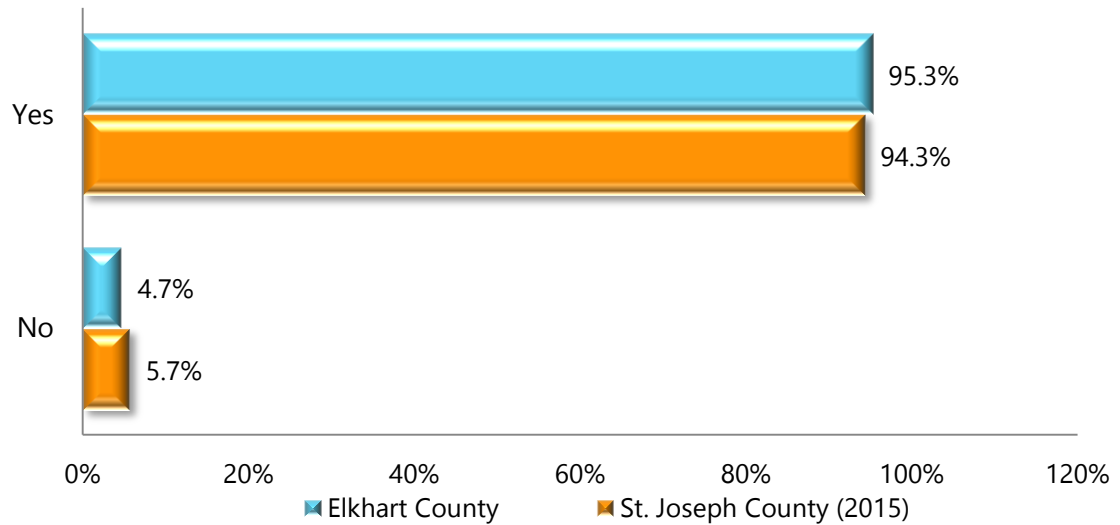
“In general, how satisfied are you with your life?”



"I have a sense of direction and purpose in life."



"My life is meaningful."



**Health Behaviors**

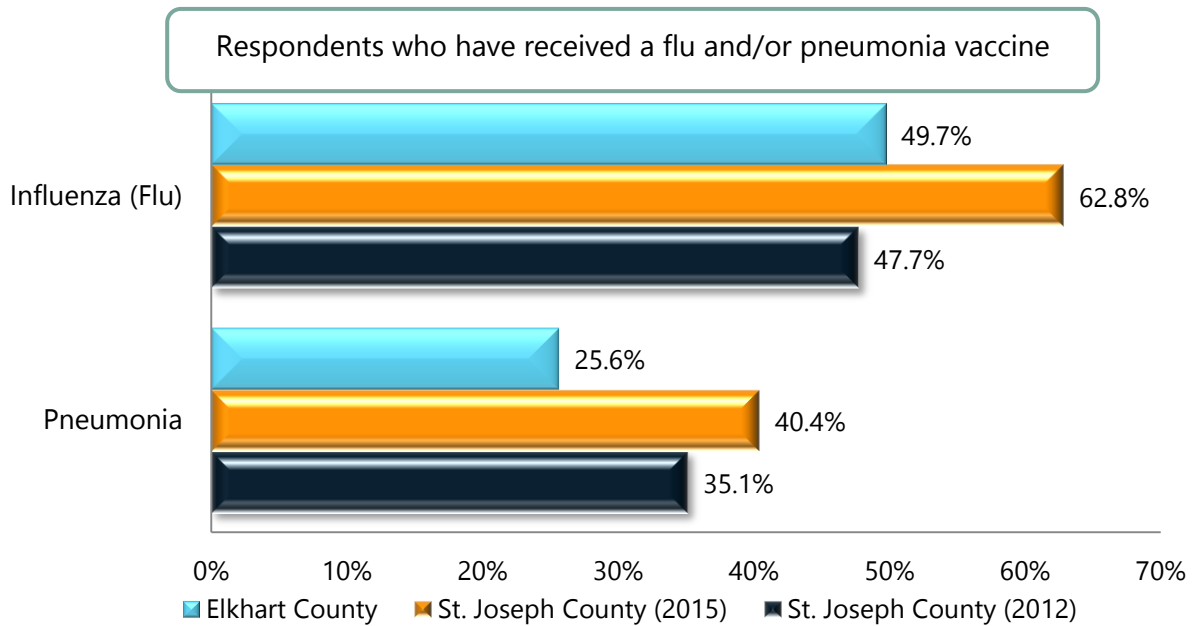
**Lifestyle Behaviors**

Respondents were asked about lifestyle behaviors related to substance abuse, sexual health, high blood pressure, and obesity. The following table depicts the percentage of respondents who are or were performing each behavior. In general, respondents in St. Joseph County are more likely to engage in risky behaviors like smoking, alcohol use, and drug use. They are also more likely to have high blood pressure. Approximately one-third of respondents in both counties are considered obese and less than 42% of females who have been pregnant have received prenatal care.

Lifestyle Behavior	Elkhart County	St. Joseph County
Smoke/d (Used tobacco products)	12.9%	17.5%
Drink/drank alcohol	45.0%	50.2%
Take/Took drugs or medication that wasn't/weren't prescribed by my doctor	2.0%	6.3%
I/We had a teen pregnancy	2.7%	2.1%
I had prenatal care while pregnant	34.4%	41.2%
I have/had a sexually transmitted infection (STI)	2.0%	2.5%
I have/had high blood pressure	21.9%	31.2%
I am/was considered obese	33.1%	31.9%

In addition, respondents were asked if they receive immunizations for influenza and pneumonia. Approximately 63% of St. Joseph County respondents received a flu vaccine in the past year, an increase of 15.1% from 2012. In addition, 40.4% of St. Joseph County respondents have received a pneumonia

vaccine, an increase of 5.3% from 2012. In Elkhart County, only 49.7% of respondents received a flu vaccine in the past year and only 25.6% have received a pneumonia vaccine.



**Diet & Exercise Behaviors**

Respondents were also asked about their consumption of fruits and vegetables. Fruit could be fresh, frozen, or canned, but fruit juice was excluded. Approximately half of all respondents in both counties consume fruits and vegetables one to four times per day. However, approximately one-quarter of respondents are only consuming fruits and vegetables one to four times per week.

Fruit Consumption	Elkhart County	St. Joseph County
1 – 2 times per day	40.9%	39.7%
3 – 4 times per day	13.2%	15.8%
5 or more times per day	2.6%	3.2%
Once per week	5.9%	8.1%
2 – 4 times per week	21.7%	20.3%
5 – 6 times per week	9.6%	6.0%
1 – 3 times per month	5.3%	6.0%
Never	0.8%	0.9%

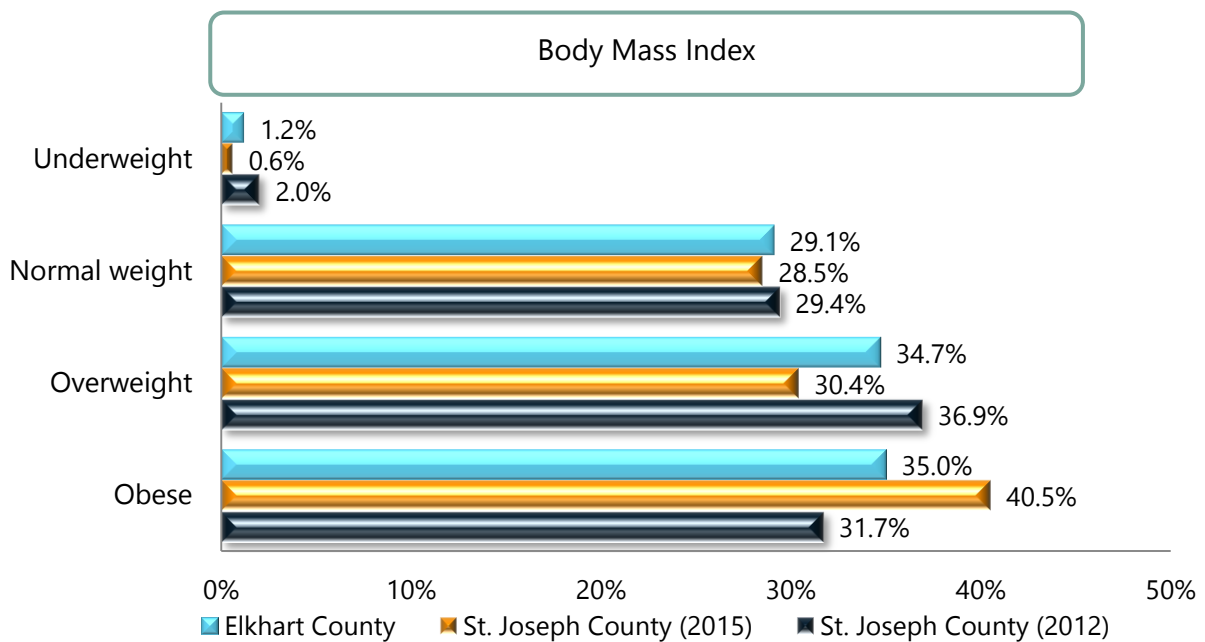
Vegetable Consumption	Elkhart County	St. Joseph County
-----------------------	----------------	-------------------

1 – 2 times per day	41.9%	40.1%
3 – 4 times per day	10.9%	15.1%
5 or more times per day	1.6%	3.6%
Once per week	6.9%	6.4%
2 – 4 times per week	21.7%	18.5%
5 – 6 times per week	10.7%	10.9%
1 – 3 times per month	5.1%	3.8%
Never	1.2%	1.7%

It is widely supported that physical activity can inhibit health concerns such as obesity and overweight, heart disease, joint and muscle pain, and many others. It is recommended that individuals regularly engage in at least 30 minutes of moderate physical activity, preferably daily, and at least 20 minutes of vigorous physical activity several days a week. Approximately 80% of respondents in Elkhart County and 77% of respondents in St. Joseph County reported engaging in exercise, outside of their regular job, during the past month. The St. Joseph County percentage decreased by 3.1% from 2012.

**Body Mass Index**

Body Mass Index (BMI) is a factor of diet and physical activity and is often correlated with chronic health conditions. It is calculated based on the height and weight of an individual. Approximately 70% of all respondents in both counties are overweight or obese. The percentage in St. Joseph County is comparable to the 2012 figure. However, a notably higher percentage of St. Joseph County respondents are now obese versus overweight.



## Chronic Health Conditions

### Cancer

Respondents were asked if they have ever been diagnosed with cancer. Approximately 6% of Elkhart County respondents and 11% of St. Joseph County respondents have been diagnosed with cancer. The percentage in St. Joseph County is comparable to 2012 (11.9%). The following table represents the type(s) of cancer respondents reported being diagnosed with. The most common types of cancer in both counties were skin cancer (excluding melanoma) and breast cancer. It should be noted the data was not weighted for gender and therefore, cancer types specific to women may be more prevalent.

Cancer Type	Elkhart County	St. Joseph County (2015)	St. Joseph County (2012)
Other skin cancer	25.0%	21.4%	20.1%
Breast cancer	18.8%	17.9%	17.4%
Cervical cancer (cancer of the cervix)	15.6%	12.5%	9.6%
Melanoma	15.6%	7.1%	9.6%
Endometrial cancer (cancer of the uterus)	9.4%	3.6%	1.8%
Lung	9.4%	1.8%	3.3%
Colon (intestine) cancer	6.3%	10.7%	8.3%
Renal (kidney) cancer	6.3%	0.0%	4.7%
Cancer Type	Elkhart County	St. Joseph County (2015)	St. Joseph County (2012)
Esophageal (esophagus)	3.1%	0.0%	0.0%
Non-Hodgkin's Lymphoma	3.1%	0.0%	0.9%
Testicular cancer	3.1%	0.0%	1.5%
Other	3.1%	5.4%	4.6%
Oral cancer	0.0%	1.8%	0.0%
Ovarian cancer (cancer of the ovary)	0.0%	8.9%	1.4%
Thyroid	0.0%	7.1%	0.0%
Pancreatic (pancreas) cancer	0.0%	1.8%	0.0%
Leukemia (blood) cancer	0.0%	1.8%	2.1%
Prostate cancer	0.0%	8.9%	10.5%
Bladder cancer	0.0%	1.8%	1.2%
Neuroblastoma	0.0%	1.8%	0.0%

Respondents with a past or current cancer diagnosis were asked if they have ever received instruction from a health professional about where they should return or who they should see for routine cancer check-ups after completing treatment. Approximately 90% of respondents in Elkhart County and 93% of



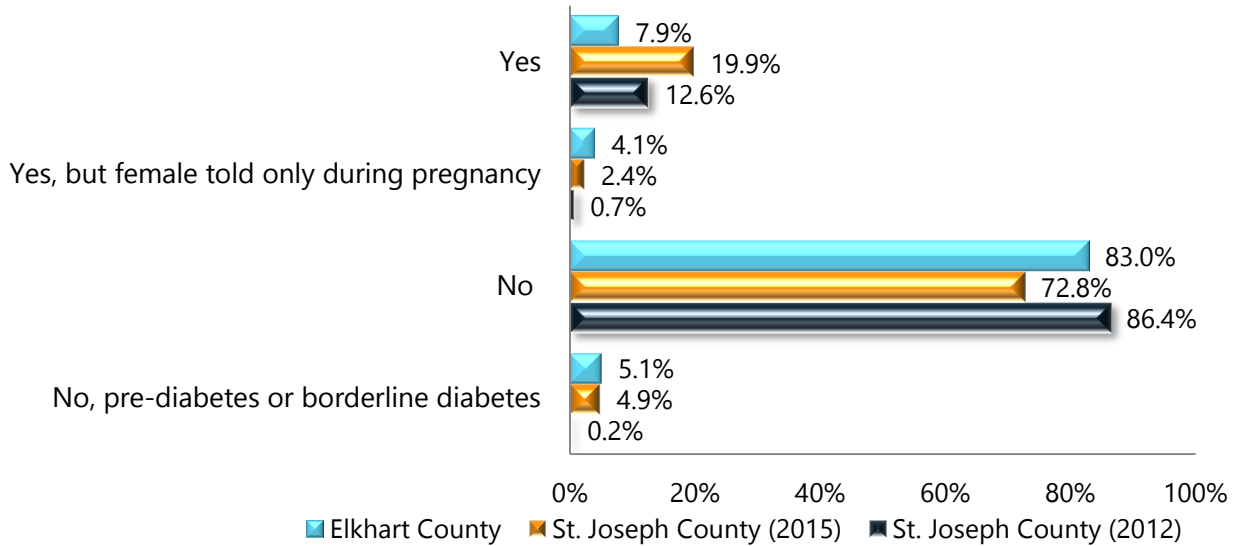
respondents in St. Joseph County stated they did receive instructions. In contrast, only 68.8% of respondents in St. Joseph County in 2012 received instructions.

Lastly, respondents with a past or current cancer diagnosis were asked if they have any memory problems caused by their cancer diagnosis or treatment. Approximately 17% of respondents in Elkhart County and 10% of respondents in St. Joseph County have memory loss. In contrast, only 7.1% of respondents in St. Joseph County in 2012 had memory loss.

### **Diabetes**

Respondents were then asked to report if they have ever been diagnosed with diabetes. Nearly 8% of respondents in Elkhart County and 20% of respondents in St. Joseph County have been diagnosed with diabetes. An additional 5.1% of respondents in Elkhart County and 4.9% of respondents in St. Joseph County are pre-diabetic. In St. Joseph County, the percentage of respondents with diabetes, pre-diabetes, or gestational diabetes increased.

“Has a doctor, nurse, or other health professional ever told you  
that you have diabetes?”



The A1C test measures the average blood sugar level of an individual over the past two or three months. It is used to diagnose diabetes and then determine how well the condition is being managed. Individuals who have diabetes should maintain an A1C level of 7% or less. Approximately 37% of diabetic respondents in Elkhart County and 49% of diabetic respondents in St. Joseph County maintain an A1C level of 7% or below.

A1C Level among Diabetics	Elkhart County	St. Joseph County
7.0% or below	36.7%	48.8%
7.1% - 8.9%	46.7%	37.5%
9.0% or above	16.7%	13.8%

**Heart Conditions**

Respondents were next asked to report on the diagnosis of heart conditions, such as a heart attack, coronary heart disease, and stroke. Less than 4% of respondents in both counties have been diagnosed with a heart condition. However, the percentages for a heart attack and stroke are higher in St. Joseph County when compared to Elkhart County, despite having dropped from 2012.

Heart Condition Diagnosis	Elkhart County	St. Joseph County (2015)	St. Joseph County (2012)
Heart Attack	1.2%	2.6%	6.0%
Angina/Coronary Heart Disease	3.8%	3.0%	5.2%
Stroke	1.0%	3.6%	4.6%

Respondents who have been diagnosed with a heart attack were asked if outpatient rehabilitation was part of their recovery. Among the six respondents in Elkhart County who reported having a heart attack,

three or 50% received outpatient rehabilitation. Among the 14 respondents in St. Joseph County who reported having a heart attack, six or 42.9% received outpatient rehabilitation.

### Respiratory Health Conditions

Respondents were also asked if they have ever been diagnosed with asthma or chronic obstructive pulmonary disease (COPD). Nearly one-quarter of respondents in St. Joseph County have been diagnosed with asthma. In addition, 68.2% still have the condition. In 2012, only 16.1% of respondents had ever been diagnosed with asthma and 59.4% still had the condition. In Elkhart County, 15.3% of respondents have asthma and 58.5% still have the condition. The percentage of respondents with COPD is notably lower in both counties (less than 6%); however, the percentage is higher in St. Joseph County.

Respiratory Health Condition Diagnosis	Elkhart County	St. Joseph County (2015)	St. Joseph County (2012)
Asthma	15.3%	23.7%	16.1%
COPD	3.6%	5.8%	8.8%

### Other Health Conditions

Lastly, respondents were asked if they have ever been diagnosed with a form of arthritis, kidney disease, and/or dementia/Alzheimer's disease. Approximately one-quarter of respondents in Elkhart County and 36% of respondents in St. Joseph County have been diagnosed with arthritis. Less than 3% of respondents in both counties have been diagnosed with kidney disease. The percentage of respondents with dementia/Alzheimer's disease is higher in St. Joseph County (9.4%) versus Elkhart County (4.1%). In St. Joseph County, the percentage of respondents with arthritis increased from 2012 and the percentage of respondents with kidney disease decreased from 2012.

Other Health Condition Diagnosis	Elkhart County	St. Joseph County (2015)	St. Joseph County (2012)
Arthritis	25.7%	36.4%	28.2%
Dementia/Alzheimer's	4.1%	9.4%	N/A
Kidney Disease	2.8%	2.6%	3.7%

## Maternal & Child Health

### Preconception Health/Family Planning

Female respondents age 18 to 44 years were asked to report on their behaviors regarding preconception health and family planning. All females, regardless of their pregnancy status, were asked if they have been consulted by a health care professional on ways to prepare for a healthy pregnancy. Approximately 72% of female respondents in Elkhart County and 62% of female respondents in St. Joseph County have been consulted on preparing for a healthy pregnancy. The percentage in St. Joseph

County increased by 5.6% from 2012. In addition, all females, regardless of their age, were asked if they are currently taking a multivitamin, a prenatal vitamin, or a folic acid vitamin. Approximately 53% of females in Elkhart County and 46% of females in St. Joseph County are not taking a vitamin. Approximately 37% of females in Elkhart County and 44% of females in St. Joseph County are taking a vitamin at least four times per week. The percentage of females in St. Joseph County who are taking a vitamin at least once per week increased significantly from 2012.

<b>Females Taking a Vitamin</b>	<b>Elkhart County</b>	<b>St. Joseph County (2015)</b>	<b>St. Joseph County (2012)</b>
Every day of the week	28.4%	33.0%	24.8%
4 – 6 times per week	8.4%	11.0%	0.0%
1 – 3 times per week	10.7%	10.5%	12.9%
0 times per week	52.5%	45.5%	62.3%

Among females age 18 to 44 years, nine females in Elkhart County (2.2%) and 11 females in St. Joseph County (2.7%) reported being pregnant at the time of the survey. Among all female respondents, approximately 77% in Elkhart County and 56% in St. Joseph County were pregnant at some point in their lifetime. Among females age 18 to 44 years who are or who have been pregnant, 38.3% in Elkhart County and 63.6% in St. Joseph County employed some method during their last sexual encounter to prevent pregnancy. The percentage in St. Joseph County increased by 23.4% from 2012. The reasons for not trying to prevent pregnancy are detailed in the table below.

<b>Reason for Not Preventing Pregnancy</b>	<b>Elkhart County</b>	<b>St. Joseph County (2015)</b>	<b>St. Joseph County (2012)</b>
You had tubes tied (sterilization)	25.8%	30.0%	15.3%
Your partner had a vasectomy (sterilization)	25.8%	0.0%	9.5%
You want a pregnancy	12.9%	20.0%	4.0%
You just didn't think about it/don't care if you get pregnant	9.7%	0.0%	16.2%
You had a hysterectomy	9.7%	30.0%	4.3%
You are pregnant now	6.5%	10.0%	0.0%
Other reason	6.5%	10.0%	14.6%
You or your partner don't like birth control/side effects	3.2%	0.0%	0.0%

### **Infant Mortality**

Female respondents who have been pregnant were asked if any of their children died before the age of one year. In Elkhart County, five females lost children before the age of one year; three females lost one child and two females lost two to four children. All of these females were between the ages of 20 and 40 years. In St. Joseph County, one female lost two to four children before the age of one year. She was 19 years or younger at the time of their death.

Female respondents who experienced a child death were asked if they initiated specific positive and/or negative behaviors. All of the respondents, in both counties, received prenatal care, took prenatal vitamins, and had a supportive partner/family. However, in Elkhart County, 60% of respondents were under a lot of stress, 40% of respondents were obese, and 20% of respondents had high blood pressure and/or a chronic medical condition.

### Adverse Childhood Experience

Respondents were asked about events in their childhood (before the age of 18 years) that may indicate they lived in an adverse household. These events included living in a household in which someone was mentally ill, was a problem drinker/alcoholic, used illegal street drugs or abused prescription medications, and/or served time in a correctional facility. They also included living in a household in which the parents were separated or divorced. The table below depicts the percentage of respondents who lived in a household with at least one of these events. In both counties, approximately 25% of respondents lived in a household with someone who was mentally ill and/or with separated or divorced parents. In St. Joseph County, the percentage of respondents indicating they experienced an adverse childhood event increased from 2012 for every event, except living with someone who served time at a correctional facility.

<b>Adverse Childhood Experience</b>	<b>Elkhart County</b>	<b>St. Joseph County (2015)</b>	<b>St. Joseph County (2012)</b>
Someone in the household was depressed, mentally ill, or suicidal	20.0%	28.0%	15.5%
Someone in the household was a problem drinker or alcoholic	24.8%	26.7%	25.2%
Someone in the household used illegal street drugs or abused prescription medications	8.0%	12.4%	11.7%
Someone in the household served time or was sentenced to serve time in a prison, jail, or other correctional facility	6.3%	7.8%	9.2%
Parents were separated or divorced	24.2%	26.7%	25.2%

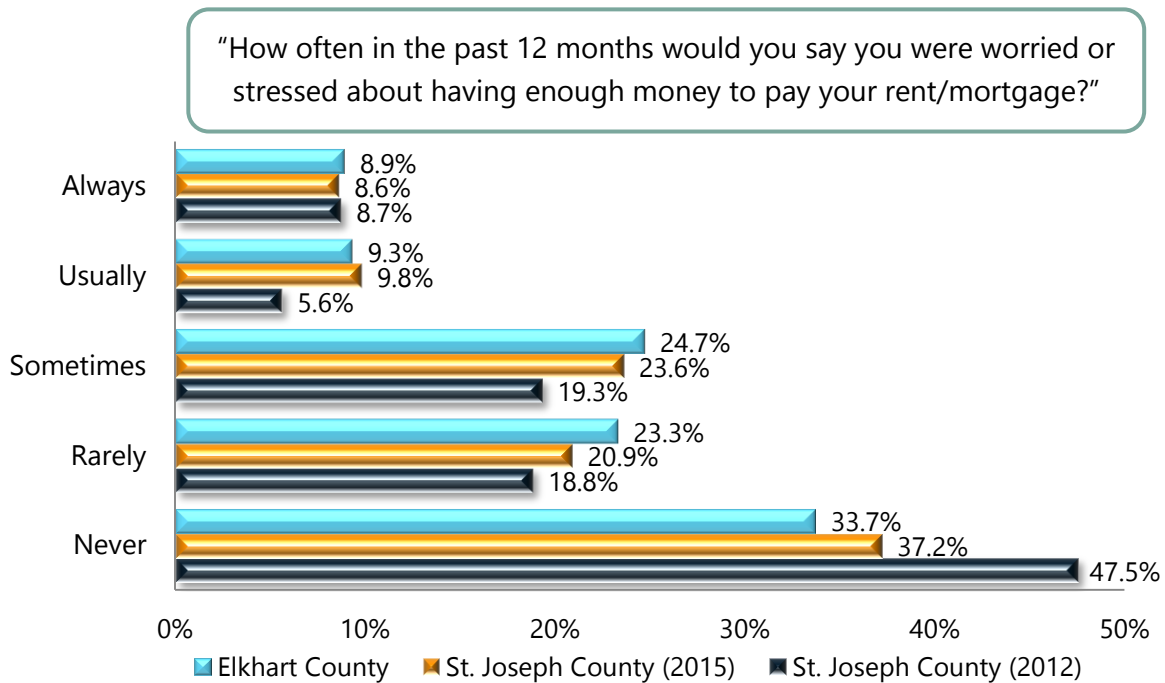
In addition, respondents were asked about events in their childhood that may indicate they were physically or mentally abused. In both counties, more than 20% of respondents stated they were physically hurt and more than 40% of respondents stated they were mentally hurt by a parent or adult in the home. Approximately 19% of respondents in Elkhart County and 15% of respondents in St. Joseph County were sexually abused. In St. Joseph County, the percentage of respondents indicating they experienced childhood abuse increased.

Childhood Abuse	Elkhart County	St. Joseph County (2015)	St. Joseph County (2012)
Hit, beat, kicked, or physically hurt by a parent or adult in the home (Do not include spanking)	20.8%	22.9%	18.9%
Swore at, insulted, or put down by a parent or adult in the home	40.5%	42.9%	34.2%
Touched sexually by anyone at least 5 years older than you or an adult	18.8%	15.3%	9.9%

## Social & Community Environment

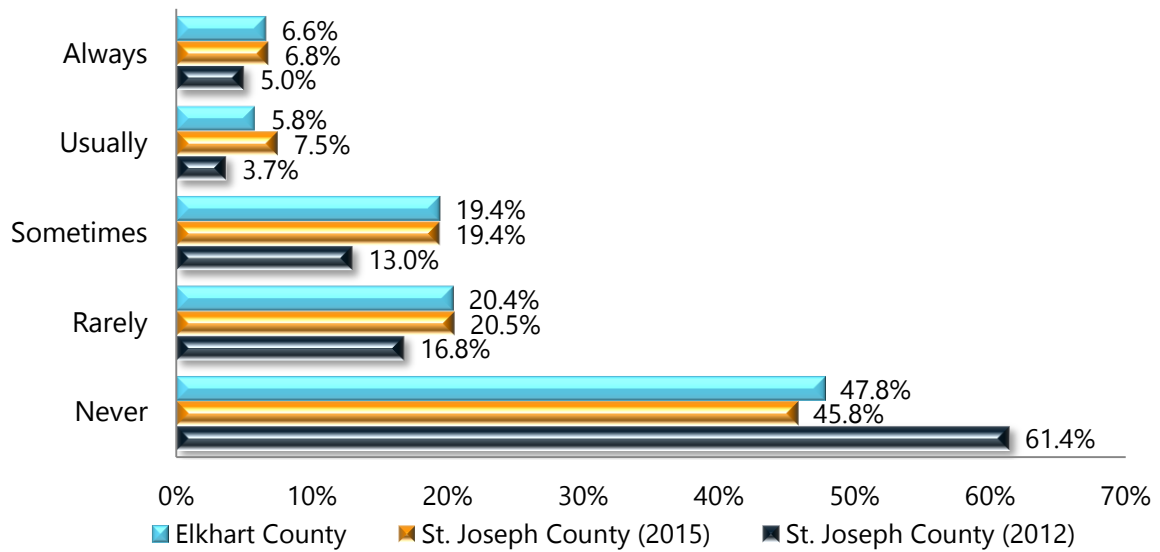
### Social Context

Respondents were asked several questions to identify how financially secure they are and how safe they are in their community. Respondents were first asked if they are worried or stressed about being able to pay their rent or mortgage. Less than 38% of respondents in both counties are “Never” worried. Approximately 9% are “Always” worried and approximately 10% are “Usually” worried. In St. Joseph County, the percentage of respondents who are worried about this issue increased by 10.3% from 2012.



Respondents were then asked if they are worried or stressed about being able to buy nutritious meals. Less than 48% of respondents in both counties are “Never” worried about this issue. Approximately 7% are “Always” worried and approximately 6-8% are “Usually” worried. In St. Joseph County, the percentage of respondents who are worried about this issue increased by 15.6% from 2012.

“How often in the past 12 months would you say you were worried or stressed about having enough money to buy nutritious meals?”



Lastly, respondents were asked if they were the victim of specific criminal or legal events during the past 12 months. In Elkhart County, 65.2% of respondents were burglarized and 30.4% were the victim of domestic violence or abuse. In St. Joseph County, 41.9% of respondents were burglarized and 25.8% were a victim of domestic violence or abuse and/or were robbed, mugged, or held-up.

Criminal Activity	Elkhart County	St. Joseph County
Burglarized, or was your home or property broken into	65.2%	41.9%
A victim of domestic violence, or abuse by a spouse or significant other	30.4%	25.8%
Robbed, mugged, or held-up	4.3%	25.8%
Personally attacked with a weapon, assaulted, or beat up	4.3%	22.6%
A victim of sexual assault or a sexually-based offense	4.3%	12.9%

**Community Environment**

Respondents were asked about their community in regards to how important it is to be a part of the community, whether or not the community cares for each other, and how safe it is. Their responses to these questions are detailed in the table below.

	Elkhart County	St. Joseph County
--	----------------	-------------------

Feel it is important to be a part of the community	93.3%	90.7%
Feel that members of the community care about each other	86.9%	80.4%
Feel safe where they live	97.7%	92.5%

### Social Issue Priorities

Respondents were asked to identify the top three social issues in their community. In both counties, health was identified as the top priority. In Elkhart County, education and public safety were the second and third priorities, respectively. In St. Joseph County, public safety was the second priority and education and poverty tied as the third priority. "Other" priorities included employment/economic issues, mental health and substance abuse, faith/spiritual wellness, caring for older adults, and access to reproductive health care. A full listing of responses is provided in the table below.

Social Issue	Elkhart County	St. Joseph County
Health	52.7%	50.4%
Education	52.3%	48.5%
Public Safety	40.7%	48.7%
Poverty	39.0%	48.5%
Environment (parks, sidewalks, roads, biking paths)	28.3%	26.0%
Housing	27.4%	22.7%
Transportation	19.4%	17.6%
Hunger	16.9%	17.7%
Pollution (clean, safe air quality, safe water quality)	16.0%	11.6%
Other	7.2%	8.4%

### Health Issue Priorities

Respondents were asked to identify the top three health issues in their community. In both counties, overweight/obesity and access to care/uninsured were identified as the top priorities, respectively. In Elkhart County, substance abuse/alcohol abuse was the third priority. In St. Joseph County, diabetes was the third priority. In St. Joseph County, "Other" priorities primarily related to reproductive health/education and unwanted pregnancies and domestic violence/child abuse. In Elkhart County,



“Other” priorities included access to primary care, nutrition and eating disorders, and alcohol abuse. A full listing of responses is provided in the table below.

<b>Health Issue</b>	<b>Elkhart County</b>	<b>St. Joseph County</b>
Overweight/Obesity	65.3%	56.7%
Access to Care/Uninsured	38.3%	38.3%
Substance Abuse/Alcohol Abuse	32.6%	27.3%
Cancer	27.1%	17.3%
Mental Health/Suicide	20.5%	24.3%
Diabetes	19.9%	29.8%
Aging Population	18.2%	17.6%
Tobacco	16.5%	14.6%
Violence/Safety	16.3%	25.2%
Dental Health	15.2%	15.9%
Heart Disease	15.2%	14.6%
Maternal/Infant Health	6.3%	6.8%
Sexually Transmitted Diseases	4.4%	4.6%
Stroke	2.7%	3.0%
Other	1.5%	3.8%

## IDENTIFICATION OF COMMUNITY HEALTH NEEDS & PLANNING

### Prioritization Session

#### Process

## Key Community Health Issues

### Identified Health Priorities

## Appendix A. Secondary Data Sources

Annie E. Casey Foundation. (2013). *Kids Count Data Center*. Retrieved from <http://datacenter.kidscount.org/data#IN/2/0>

- Bureau of Labor Statistics. (2014). *Local Area Unemployment Statistics*. Retrieved from <http://www.bls.gov/lau/>
- Centers for Disease Control and Prevention. (2015). *CDC wonder*. Retrieved from <http://wonder.cdc.gov/>
- Centers for Disease Control and Prevention. (2015). *National vital statistics reports*. Retrieved from <http://www.cdc.gov/nchs/nvss.htm>
- Community Commons. (n.d.). *Maps and data*. Retrieved from <http://www.communitycommons.org/>
- Feeding America. *Data by County in Each State*. Retrieved from <http://www.feedingamerica.org/hunger-in-america/our-research/map-the-meal-gap/data-by-county-in-each-state.html>
- Indiana State Department of Health. *Reports and Statistics*. Retrieved from <http://www.in.gov/isdh/18888.htm>
- National Cancer Institute. *State Cancer Profiles*. Retrieved from <http://statecancerprofiles.cancer.gov/index.html>
- Robert Wood Johnson Foundation. (2013). *County health rankings & roadmaps*. Retrieved from <http://www.countyhealthrankings.org>
- U.S. Census Bureau. (2011-2013). *American fact finder*. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>
- U.S. Department of Health and Human Services. (2012). *Healthy People 2020*. Retrieved from <http://www.healthypeople.gov/2020/default.aspx>
- U.S. Department of Health and Human Services. (2015). *The 2015 HHS poverty guidelines*. Retrieved from <http://aspe.hhs.gov/poverty/15poverty.cfm>

## Appendix B. Key Informant Participants

Elkhart County	
Name	Agency
Allison Berger	Elkhart General Hospital

Barb Scanlong	Elkhart General Hospital
Barb Vernon	CAPS
Becky Gausche	Center for Healing and Hope
Bonnie Waltz	Elkhart County Council on Aging
Candy Yoder	1000 East Hively
Carole Denlinger	Elkhart County Health Department
Carrie Zickefoose	SPA Ministries
Cindy Hayes	Beacon Medical Group
Dan Nafziger, M.D.	Elkhart County Health Department
Darren Bickel	Elkhart County United Way
David VanRyn, M.D.	Emergency Physicians, Inc
Donna Belsaur	ADEC
Esther Hershberger	Elkhart General Hospital Maternity Services
Genevieve Lankowicz	Elkhart General Hospital
Glenn Kohrman	St. Viincent De Paul
Grace Carpenter	Elkhart General Hospital For Women Only
Greg Losasso	Elkhart General Hospital
Gwen Jaeger	ECHD Nursing
Jane Allen	Middlebury Community Schools
Jared Yoder	
Jeanne VanPutten	Elkhart General Hospital
Jessica Koscher	United Way of Elkhart County
Jim DuBois	Baugo Community Schools
Joe Szabo	WaNee Communtiy Schools
John Hulewicz	ECHD Health Education
Karleen Brenneeman	Elkhart General Hospital
Kate Irelan	La Casa, Inc.
Katie Craft	REAL Services, Inc.
Kim Griesing	Elkhart General Hospital
Kris Krueger	ECHD
Krystal Anderson	Heart City Health Center
Kyle Hannon	Greater Elkhart Chamber of Commerce
Larry Rohrer	Belmont Mennonite Church

### Elkhart County (cont'd)

Name	Agency
Loretta Salchert	Ribbon of Hope
Lori King	Guidance Ministries

Melanie Sizemore	ECHD Healthy Beginnings
Melvin Miller	
Michelle Howe, M.D.	Beacon Medical Group
Omobola Olaniyan, M.D.	Heart City Health Center
Orva Lehman	
Pam Hluchota	YWCA of North Central Indiana
Rhonda Yoder	City of Goshen Planning
Roger Hershberger	Elkhart General Hospital
Scott Tilley	River Oaks Community Church
Steve Thalheimer	Fairfield Community Schools
Terri Geiser	Elkhart General Hospital
Vernon Beech	
Vicky Becker	Elkhart County Prosecutor's Office
Vonda Horst	Church Community Services
Vonda Marrow	Elkhart County Council on Aging
Wendy Fletcher	Golden Living Center

<b>St. Joseph County</b>	
<b>Name</b>	<b>Agency</b>
Alexandra Sobieski	Samaritan Counseling Center
Amy Kanouse	MDWise
Angie Cavaliere	Harper Cancer Research Institute ND
Angie Skwarczan	Junior League of SB
Bonnie Bazata	Bridges Out of Poverty
Dale Freeman	City of Mishawaka Fire
Dale Patterson M.D.	Memorial Family Residency Program
Dani Elgas	YMCA
Dave Vanderveen	Hope Ministries
Debie Coble	Goodwill Industries
Debra Stanley	Imani Unidad
Ella Harmeyer	Saint Mary's College
Harry Thiabult	IN-MI River Trail
Holly Griffen	Healthy Families of St. Joe Co

<b>St. Joseph County (cont'd)</b>	
<b>Name</b>	<b>Agency</b>
Jeanne Blad	Bike the Bend
Jessica Brookshire	University of Notre Dame
Jim Lopez	City of South Bend Fire
Josh Kellems	American Cancer Society
Judy Lee	Michiana Bike Coalition
Kari Tarman	Oak Lawn
Karl Nichols	Minority Health Coalition
Kate Lee	SJC Chamber
Kim Rollings	University of Notre Dame
Krista Bailey	City of South Bend
Kwajalein Dodd	Catholic Charities
Lani Vivirito	Center for the Homeless
Latorya Greene	Tobacco Free St. Joe Co.
Laura Lehner	Riverbend Cancer Services
Margo DeMont	Memorial Hospital
Mario Ortiz	IUSB
Michelle Peters	St. Joseph Regional Medical Center
Sam Centallas	La Casa De Amistad
Sandy Sampson	Kroc Center
Sara Stewart	Unity Gardens
Solenia Carr	Bendix Family Physicians
Steve Camilleri	Center for the Homeless
Sue Coney	SBCSC
Sue Cullen	Memorial Hospital
Sue Taylor	WIC
Susie Brennan	Michiana Health Info Network
Teresa Carroll	PHM
Theresa Verslype	PHM/School City Mishawaka
Tim Roberts	Michiana Health Information Network
Waldo Mikels-Carrasco	MHIN
Whitney Craig	ADEC

## Appendix C. Key Informant Survey Tool

As part of its ongoing commitment to improving the health of the communities it serves, Beacon Health System is spearheading a comprehensive Community Health Needs Assessment.

You have been identified as an individual with valuable knowledge and opinions regarding community health needs, and we appreciate your willingness to participate in this survey.

The survey should take about 10-15 minutes to complete. Please be assured that all of your responses will go directly to our research consultant, Holleran Consulting, and will be kept strictly confidential. Please note that while your responses, including specific quotations, may be included in a report of this study, your identity will not be directly associated with any quotations.

When answering the questions, please consider the community and area of interest to be the county (Elkhart or St. Joseph) that you primarily serve or represent.

### Key Health Issues

What are the top 5 health issues you see in your community?

- Access to Care/Uninsured
- Cancer
- Dental Health
- Diabetes
- Heart Disease
- Maternal/ Infant Health
- Mental Health/Suicide
- Overweight/Obesity
- Sexually Transmitted Diseases
- Stroke
- Substance Abuse/Alcohol Abuse
- Tobacco
- Violence/Safety
- Other (specify): \_\_\_\_\_

Of those health issues mentioned, which 1 is the most significant?

- Access to Care/Uninsured
- Cancer
- Dental Health
- Diabetes
- Heart Disease
- Maternal/ Infant Health
- Mental Health/Suicide
- Overweight/Obesity
- Sexually Transmitted Diseases
- Stroke
- Substance Abuse/Alcohol Abuse
- Tobacco
- Violence/Safety
- Other (specify): \_\_\_\_\_

Please share any additional information regarding these issues and your reasons for ranking them this way in the box below:



**Access to Care**

On a scale of strongly disagree through strongly agree, please rate each of the following statements about Health Care Access in the area.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Residents in the area are able to access a primary care provider when needed. (Family Doctor, Pediatrician, General Practitioner)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Residents in the area are able to access a medical specialist when needed. (Cardiologist, Dermatologist, Neurologist, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Residents are able to access a dentist when needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a sufficient number of providers accepting Medicaid and Medical Assistance in the area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a sufficient number of bilingual providers in the area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a sufficient number of mental/behavioral health providers in the area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transportation for medical appointments is available to area residents when needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What are the most significant barriers that keep people in the community from accessing health care when they need it? (Select all that apply)

- Availability of Providers/Appointments
- Basic Needs Not Met (Food/Shelter)
- Inability to Navigate Health Care System
- Inability to Pay Out of Pocket Expenses (Co-pays, Prescriptions, etc.)
- Lack of Child Care
- Lack of Health Insurance Coverage
- Lack of Transportation
- Lack of Trust
- Language /Cultural Barriers
- Time Limitations (Long Wait Times, Limited Office Hours, Time off Work)
- None/No Barriers
- Other (specify): \_\_\_\_\_

Of those barriers mentioned, which 1 is the most significant?

- Availability of Providers/Appointments
- Basic Needs Not Met (Food/Shelter)
- Inability to Navigate Health Care System
- Inability to Pay Out of Pocket Expenses (Co-pays, Prescriptions, etc.)
- Lack of Child Care
- Lack of Health Insurance Coverage
- Lack of Transportation
- Lack of Trust
- Language/Cultural Barriers
- Time Limitations (Long Wait Times, Limited Office Hours, Time off Work)
- None/No Barriers
- Other (specify): \_\_\_\_\_

Please share any additional information regarding barriers to health care in the box below:

Are there specific populations in this community that you think are not being adequately served by local health services?

- Yes
- No

Which populations are underserved? (Select all that apply)

- Uninsured/Underinsured
- Low - income/Poor
- Hispanic/Latino
- Black/African - American
- Immigrant/Refugee
- Disabled
- Children/Youth
- Young Adults
- Seniors/Aging/Elderly
- Homeless
- None
- Other \_\_\_\_\_

In general, where do you think MOST uninsured and underinsured individuals living in the area go when they are in need of medical care?

- Doctor's Office
- Health Clinic/FQHC
- Hospital Emergency Department
- Walk-in/Urgent Care Center
- Don't Know
- Other \_\_\_\_\_

Please share any additional information regarding Uninsured/Underinsured Individuals & Underserved Populations in the box below:

Related to health and quality of life, what resources or services do you think are missing in the community? (Select all that apply)

- Free/Low Cost Medical Care
- Free/Low Cost Dental Care
- Primary Care Providers
- Medical Specialists
- Mental Health Services
- Substance Abuse Services
- Bilingual Services
- Transportation
- Prescription Assistance
- Health Education/Information/Outreach
- Health Screenings
- None
- Other (specify) \_\_\_\_\_

### **Challenges & Solutions**

What challenges do people in the community face in trying to maintain healthy lifestyles like exercising and eating healthy and/or trying to manage chronic conditions like diabetes or heart disease?

In your opinion, what is being done well in the community in terms of health and quality of life? (Community Assets/Strengths/Successes)

What recommendations or suggestions do you have to improve health and quality of life in the community?

**Demographics**

Which one of these categories would you say BEST represents your community affiliation?

- Health Care/Public Health Organization
- Mental/Behavioral Health Organization
- Non-Profit/Social Services/Aging Services
- Faith-Based/Cultural Organization
- Education/Youth Services
- Government/Housing/Transportation Sector
- Business Sector
- Community Member
- Other \_\_\_\_\_

What is your gender?

- Male
- Female

Which of these groups would you say BEST represents your race / ethnicity?

- White/Caucasian
- Black/African American
- Hispanic/Latino
- Asian/Pacific Islander
- Other \_\_\_\_\_

Beacon Health System and its partners will use the information gathered through this survey in guiding their community health improvement activities. Please share any other feedback you may have for them below:

Thank you! That concludes the survey.

## Appendix D. Online Community Member Survey Tool

Thank you for participating in the Community Health Survey. All information gathered in this survey will be anonymous and confidential.

The information gathered from this survey will be used to help better understand the health issues and needs of our community. By completing this survey you are helping efforts to make Elkhart and St. Joseph counties a healthier place to live, work, and play.

The survey should take about 10-15 minutes to complete and is only open to individuals 18 years of age and older. At the completion of the survey, you will be eligible to enter a cash prize drawing. The first 500 respondents from each county will receive a \$5 gift card and every respondent will be eligible for one of five \$100 drawings in each county. To be eligible for the prizes you will be required to provide your name and phone number at the end of the survey. However, your information will not be associated with your responses and will be used strictly for identifying prize recipients.

Which county do you live in?

- Elkhart County
- St. Joseph County
- Neither

What is your zip code? (Elkhart County)

- 46507
- 46514
- 46515
- 46516
- 46517
- 46526
- 46527
- 46528
- 46540
- 46543
- 46550
- 46553
- 46573
- 46561
- Other

What is your zip code? (St. Joseph)

- |                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="radio"/> 46530 | <input type="radio"/> 46601 | <input type="radio"/> 46628 |
| <input type="radio"/> 46536 | <input type="radio"/> 46604 | <input type="radio"/> 46629 |
| <input type="radio"/> 46544 | <input type="radio"/> 46612 | <input type="radio"/> 46634 |
| <input type="radio"/> 46545 | <input type="radio"/> 46613 | <input type="radio"/> 46635 |
| <input type="radio"/> 46546 | <input type="radio"/> 46614 | <input type="radio"/> 46637 |
| <input type="radio"/> 46552 | <input type="radio"/> 46616 | <input type="radio"/> 46660 |
| <input type="radio"/> 46554 | <input type="radio"/> 46617 | <input type="radio"/> 46680 |
| <input type="radio"/> 46556 | <input type="radio"/> 46619 | <input type="radio"/> 46699 |
| <input type="radio"/> 46561 | <input type="radio"/> 46620 | <input type="radio"/> Other |
| <input type="radio"/> 46574 | <input type="radio"/> 46624 |                             |
| <input type="radio"/> 46595 | <input type="radio"/> 46626 |                             |

What is your gender?

- Male
- Female

What is your age?

- 18 - 24
- 25 - 34
- 35 - 44
- 45 - 54
- 55 - 64
- 65 years and over
- Don't know/Not sure
- Refused

### Section 1: Health Status

Would you say that in general your health is ---?

- Excellent
- Very good
- Good
- Fair
- Poor
- Don't know/Not sure
- Refused

**Section 2: Health Care Access**

Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare and Medicaid?

- Yes
- No
- Don't know/Not sure
- Refused

Do you have one person you think of as your personal doctor or health care provider?

- Yes, only one
- More than one
- No
- Don't know/Not sure
- Refused

Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

- Yes
- No
- Don't know/Not sure
- Refused

**Section 3: Exercise**

During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

- Yes
- No
- Don't know/Not sure
- Refused

**Section 4: Demographics**

Are you Hispanic or Latino?

- Yes
- No
- Don't know/Not sure
- Refused

Are you Arab or Middle Eastern?

- Yes
- No
- Don't know/Not sure
- Refused

Are you Amish?

- Yes
- No
- Don't know/Not sure
- Refused

Which one or more of the following would you say is your race? (Check all that apply)

- White
- Black or African American
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native
- Other (specify) \_\_\_\_\_
- Don't know/Not sure
- Refused

What is the highest grade or year of school you completed?

- Never attended school or only attended kindergarten
- Grades 1 through 8 (Elementary)
- Grades 9 through 11 (Some high school)
- Grade 12 or GED (High school graduate)
- College 1 year to 3 years (Some college or technical school)
- College 4 years or more (College graduate)
- Refused



Are you currently...?

- Employed for wages
- Self-employed
- Out of work for more than 1 year
- Out of work for less than 1 year
- A Homemaker
- A Student
- Retired
- Unable to work
- Refused

Is your annual household income from all sources---

- Less than \$10,000
- \$10,000 - \$14,999
- \$15,000 - \$19,999
- \$20,000 - \$24,999
- \$25,000 - \$34,999
- \$35,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 or more
- Don't know/Not sure
- Refused

About how much do you weigh without shoes?

- (Pounds/Kilograms) \_\_\_\_\_
- Don't know/Not sure
- Refused

About how tall are you without shoes?

To your knowledge, are you now pregnant?

- Yes
- No
- Don't know/Not sure
- Refused

**Section 5: Immunization**

A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a seasonal flu shot?

- Yes
- No
- Don't know/Not sure
- Refused

A pneumonia shot or pneumococcal vaccine is usually given only once or twice in a person's lifetime and is different from the flu shot. Have you ever had a pneumonia shot?

- Yes
- No
- Don't know/Not sure
- Refused

**Section 6: Cancer**

Have you EVER been told by a doctor, nurse, or other health professional that you had cancer?

- Yes
- No
- Don't know/Not sure
- Refused

What type of cancer was it?

- Breast cancer
- Cervical cancer (cancer of the cervix)
- Endometrial cancer (cancer of the uterus)
- Ovarian cancer (cancer of the ovary)
- Head and neck cancer
- Oral cancer
- Pharyngeal (throat) cancer
- Thyroid
- Colon (intestine) cancer
- Esophageal (esophagus)
- Liver cancer
- Pancreatic (pancreas) cancer
- Rectal (rectum) cancer
- Stomach
- Hodgkin's Lymphoma (Hodgkin's disease)
- Leukemia (blood) cancer
- Non-Hodgkin's Lymphoma
- Prostate cancer
- Testicular cancer
- Melanoma
- Other skin cancer
- Heart
- Lung
- Bladder cancer
- Renal (kidney) cancer
- Bone
- Brain
- Neuroblastoma
- Other
- Don't know/Not sure
- Refused

Have you EVER received instructions from a doctor, nurse, or other health professional about where you should return or who you should see for routine cancer check-ups after completing your treatment for cancer?

- Yes
- No
- Don't know/Not sure
- Refused

Do you currently have memory problems caused by your cancer or cancer treatment?

- Yes
- No
- Don't know/Not sure
- Refused

### **Section 7: Anxiety and Depression**

Over the last 2 weeks, how many days have you felt down, depressed or hopeless?

- 1 - 2 Days
- 3 - 7 Days
- 8 - 10 Days
- 11 - 14 Days
- None
- Don't know/Not sure
- Refused

Over the last 2 weeks, how many days have you felt bad about yourself or that you were a failure or had let yourself or your family down?

- 1 - 2 Days
- 3 - 7 Days
- 8 - 10 Days
- 11 - 14 Days
- None
- Don't know/Not sure
- Refused

Has a doctor or other healthcare provider EVER told you that you have an anxiety disorder (including acute stress disorder, anxiety, generalized anxiety disorder, obsessive-compulsive disorder, panic disorder, phobia, post-traumatic stress disorder, or social anxiety disorder)?

- Yes
- No
- Don't know/Not sure
- Refused

Has a doctor or other healthcare provider EVER told you that you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?

- Yes
- No
- Don't know/Not sure
- Refused

### **Section 8: Social Context**

How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage? Would you say you were worried or stressed---

- Always
- Usually
- Sometimes
- Rarely
- Never
- Not applicable
- Don't know/Not sure
- Refused

How often in the past 12 months would you say you were worried or stressed about having enough money to buy nutritious meals? Would you say you were worried or stressed---

- Always
- Usually
- Sometimes
- Rarely
- Never
- Not applicable
- Don't know/Not sure
- Refused

Did any of the following criminal or legal events happen to you during the past 12 months, that is since February 2014? Just a reminder, the information you provide will never be connected to you. Were you...

- Burglarized, or was your home or property broken into
- Robbed, mugged, or held-up
- A victim of domestic violence, or abuse by a spouse or significant other
- A victim of sexual assault or a sexually-based offense
- Personally attacked with a weapon, assaulted, or beat up
- Other
- None of the above
- Don't know/Not sure
- Refused

### **Section 9: Adverse Childhood Experience**

We'd like to ask you some questions about events that happened during you childhood. This information will allow us to better understand problems that may occur early in life, and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. At the end of this section, we will give you a phone number for an organization that can provide information and referral for these issues. Please keep in mind that you can skip any question you do not want to answer. All questions refer to the time period before you were 18 years of age.

Did you live with anyone who was depressed, mentally ill, or suicidal?

- Yes
- No
- Don't know/Not sure
- Refused

Did you live with anyone who was a problem drinker or alcoholic?

- Yes
- No
- Don't know/Not sure
- Refused

Did you live with anyone who used illegal street drugs or who abused prescription medications?

- Yes
- No
- Don't know/Not sure
- Refused

Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility?

- Yes
- No
- Don't know/Not sure
- Refused

Were your parents separated or divorced?

- Yes
- No
- Parents not married
- Don't know/Not sure
- Refused

Before age 18, how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Do not include spanking. Would you say---

- Never
- Once
- More than once
- Don't know/Not sure
- Refused

How often did a parent or adult in your home ever swear at you, insult you, or put you down?

- Never
- Once
- More than once
- Don't know/Not sure
- Refused

How often did anyone at least 5 years older than you or an adult, ever touch you sexually?

- Never
- Once
- More than once
- Don't know/Not sure
- Refused

As mentioned at the beginning of this section, we are offering a phone number for an organization that can provide information and referral for these issues. National Hotline for Child Abuse 1-800-422-4453

**Section 10: Chronic Health Conditions**

Has a doctor, nurse, or other health professional EVER told you that you had any of the following?

Ever told you that you had a heart attack also called a myocardial infarction?

- Yes
- No
- Don't know/Not sure
- Refused

Following your heart attack, was outpatient rehabilitation part of your recovery?

- Yes
- No
- Don't know/Not sure
- Refused

Ever told you that you had angina or coronary heart disease?

- Yes
- No
- Don't know/Not sure
- Refused

Ever told you that you had a stroke?

- Yes
- No
- Don't know/Not sure
- Refused

Ever told you that you had asthma?

- Yes
- No
- Don't know/Not sure
- Refused

Do you still have asthma?

- Yes
- No
- Don't know/Not sure
- Refused



Ever told you that you have (COPD) chronic obstructive pulmonary disease, emphysema or chronic bronchitis?

- Yes
- No
- Don't know/Not sure
- Refused

Ever told you that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia? Arthritis diagnoses include:-rheumatism, polymyalgia, rheumatica-osteoarthritis (not osteoporosis)-tendonitis, bursitis, bunion, tennis elbow-carpal tunnel syndrome, tarsal tunnel syndrome-joint infection, Reiter's syndrome-ankylosing spondylitis; spondylosis-rotator cuff syndrome-connective tissue disease, scleroderma, polymyositis, Raynaud's syndrome-vasculitis (giant cell arteritis, Henoch-Schonleinpurpura, Wegener's granulomatosis, polyarteritis nodosa)

- Yes
- No
- Don't know/Not sure
- Refused

Ever told you that you had kidney disease? DO NOT include kidney stones, bladder infection or incontinence?

- Yes
- No
- Don't know/Not sure
- Refused

Ever told you that you have diabetes?

- Yes
- Yes, but female told only during pregnancy
- No
- No, pre-diabetes or borderline diabetes
- Don't know/Not sure
- Refused

What was your most recent A1c reading?

- 7.0 or BELOW
- 7.1 – 8.9
- 9.0 or ABOVE
- Don't know/Not sure
- Refused

**Section 11: Fruits and Vegetables**

During the past month, not counting juice, how many times per day, week, or month did you eat fruit? Count fresh, frozen, or canned fruit. Include apples, bananas, applesauce, oranges, grape fruit, fruit salad, watermelon, cantaloupe or musk melon, papaya, lychees, star fruit, pomegranates, mangos, grapes, and berries such as blueberries and strawberries. Do not count fruit jam, jelly, or fruit preserves. Do not include dried fruit in ready-to-eat cereals. Do include cut up fresh, frozen, or canned fruit added to yogurt, cereal, jello, and other meal items.

- 1 - 2 Times per day
- 3 - 4 Times per day
- 5 or more times per day
- Once per week
- 2 - 4 Times per week
- 5 - 6 Times per week
- 1 - 3 Times per month
- Never
- Don't know/Not sure
- Refused

During the past month, how many times per day, week, or month did you eat vegetables for example broccoli or dark leafy greens including romaine, chard, collard greens or other colored vegetables such as spinach, sweet potatoes, pumpkin, winter squash, or carrots?

- 1 - 2 Times per day
- 3 - 4 Times per day
- 5 or more times per day
- Once per week
- 2 - 4 Times per week
- 5 - 6 Times per week
- 1 - 3 Times per month
- Never
- Don't know/Not sure
- Refused

**Section 12: Preconception Health/Family Planning**

Has a doctor, nurse, or other health care worker ever talked with you about ways to prepare for a healthy pregnancy and baby?

- Yes
- No
- Don't know/Not sure
- Refused

Have you ever been pregnant?

- Yes
- No
- Don't know/Not sure
- Refused

Did you or your husband/partner do anything the last time you had sex to keep you from getting pregnant?

- Yes
- No
- No partner/not sexually active
- Same sex partner
- Don't know/Not sure
- Refused

What was your main reason for not doing anything the last time you had sex to keep you from getting pregnant?

- You didn't think you were going to have sex/no regular partner
- You just didn't think about it/don't care if you get pregnant
- You want a pregnancy
- You or your partner don't want to use birth control
- You or your partner don't like birth control/side effects
- You couldn't pay for birth control
- You had a problem getting birth control when you needed it
- Religious reasons
- Lapse in use of a method
- Don't think you or your partner can get pregnant (infertile or too old)
- You had tubes tied (sterilization)
- You had a hysterectomy
- Your partner had a vasectomy (sterilization)
- You are currently breast-feeding
- You just had a baby/postpartum
- You are pregnant now
- Same sex partner
- Other reason
- Don't know/Not sure
- Refused

How many times a week do you currently take a multivitamin, a prenatal vitamin, or a folic acid vitamin?

- 0 times a week
- 1 to 3 times a week
- 4 to 6 times a week
- Every day of the week
- Don't know/Not sure
- Refused

**Section 13: Emotional Support and Life Satisfaction**

In general, how satisfied are you with your life?

- Very satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied
- Don't know/Not sure
- Refused

**Section 14: Life Purpose**

I have a sense of direction and purpose in life.

- Yes
- No
- Don't know/Not sure
- Refused

My life is meaningful.

- Yes
- No
- Don't know/Not sure
- Refused

**Section 15: Community**

It is very important to be part of this community.

- Yes
- No
- Don't know/Not sure
- Refused

Members of this community care about each other.

- Yes
- No
- Don't know/Not sure
- Refused

**Section 16: Lifestyle Behaviors**

The following statements apply to me now, or have during last 12 months: Select all that apply

- I smoke/d (used tobacco products).
- I drink/drank alcohol.
- I take/took drugs or medication that wasn't/weren't prescribed by my doctor.
- I/We had a teen pregnancy
- I had prenatal care while pregnant.
- I have/had an sexually transmitted infection (STI)
- I have/had high blood pressure.
- I am/was considered obese.
- None
- Don't know/Not sure
- Refused

**Section 17: Infant Mortality**

Did any of your children die before age of 1?

- Yes
- No
- I have no children
- Don't know/Not sure
- Refused

How many?

- Just one
- 2 -4
- 5 or more
- Don't know/Not sure
- Refused

What was your age when you were pregnant with the first child that died before the age of 1?

- 19 or younger
- 20 - 40
- 41 or older
- Don't know/Not sure
- Refused

Did any of the following apply to you during this pregnancy? Select all that apply

- I had prenatal care.
- I took prenatal vitamins.
- I had a supportive partner/family.
- I smoked.
- I consumed alcohol.
- I took drugs or medication that wasn't prescribed by my doctor.
- I was obese.
- I had high blood pressure.
- I was under a lot of stress.
- I had a chronic medical condition.
- None
- Don't know/Not sure
- Refused

### **Section 18: Safety**

I feel safe where I live.

- Yes
- No
- Don't know/Not sure
- Refused

### **Section 19: Brain Health**

Have you or a member of your household, had a diagnosis of Dementia or Alzheimer's?

- Yes
- No
- Don't know/Not sure
- Refused

**Section 20: Social Issues Priorities**

Please select the top three social issues in your community (city/town/neighborhood/zip code).

- Public Safety
- Hunger
- Health
- Transportation
- Poverty
- Housing
- Education
- Environment (parks, sidewalks, roads, biking paths)
- Pollution (clean, safe air quality, safe water quality)
- Other (please specify \_\_\_\_\_)

**Section 21: Health Issues Priorities**

Please select the top three health issues in your community (city/town/neighborhood/zip code).

- Access to Care/Uninsured
- Cancer
- Dental Health
- Diabetes
- Heart Disease
- Maternal/Infant Health
- Mental Health / Suicide
- Aging Population
- Overweight / Obesity
- Sexually Transmitted Diseases
- Stroke
- Substance Abuse/Alcohol Abuse
- Tobacco
- Violence/Safety
- Other (please specify \_\_\_\_\_)

**Survey Conclusion**

This concludes our survey. As a thank you for participating, you're eligible to enter a prize drawing. Would you like to be entered in the drawing?



- Yes
- No

Thank you for your input!

## **Appendix E. Prioritization Session Participants**