



2016 South Heartland District Health Department  
Community Health Needs Assessment



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# Executive Summary

The following table presents highlighted data organized by indicators of need and indicators of progress across eight key areas of public health from the 2016 South Heartland Community Health Needs Assessment.

| Table ES1. Data Highlights from the 2016 South Heartland Community Health Needs Assessment |  |
|--|--|
| Area   | Description  |
| ➤ <b>Obesity</b>   | <p><i>Indicators of Need</i></p> <ul style="list-style-type: none"> <li>• In 2014, 16.5% of South Heartland high school students reported <u>eating fruits</u> two or more times per day in the last 7 days (compared to 26.8% for the state).</li> <li>• In 2014, 46.2% of South Heartland adults reported meeting <u>the aerobic physical activity</u> recommendation (compared to 50.1% for the state).</li> <li>• In 2014, 44.3% of South Heartland adults reported a height and weight that identified them as <u>obese</u> (compared to 40.6% for the state).</li> <li>• In 2014, 33.7% of South Heartland high school students reported a height and weight that identified them as <u>overweight or obese</u> (compared to 29.9% for the state).</li> </ul> <p><i>Indicator of Progress</i></p> <ul style="list-style-type: none"> <li>• The percentage of South Heartland high school students reporting that they ate <u>vegetables</u> three or more times per day in the past 7 days increased from 10.8% in 2012 to 14.5% in 2014.</li> </ul> |
| ➤ <b>Cancer</b>  | <p><i>Indicators of Need</i></p> <ul style="list-style-type: none"> <li>• In 2008-2012, incidence rates of <u>female breast cancer, cervical cancer, colorectal cancer, prostate cancer, melanoma, and lung cancer</u> were all higher in the South Heartland District compared to the state.</li> <li>• In 2009-2013, mortality rates for the above mentioned cancers were all higher in the South Heartland District compared to the state, with the exceptions of female breast cancer and prostate cancer.</li> </ul> <p><i>Indicator of Progress</i></p> <ul style="list-style-type: none"> <li>• The percentage of South Heartland adults aged 50 to 75 years who reported being up-to-date on <u>colorectal cancer screening</u> increased from 59.9% in 2012 to 62.8% in 2014.</li> </ul>  |

|                                       |  |
|---------------------------------------|--|
| <p>➤ <b>Mental Health</b></p>         | <p><i>Indicators of Need</i></p> <ul style="list-style-type: none"> <li>• In 2014, 20.7% of South Heartland adults reported that they have ever been told by a medical or mental health professional that they have <u>depression</u> (compared to 17.7% for the state).</li> <li>• In 2014, 13.5% of South Heartland high school students reported <u>attempting suicide</u> (compared to 8.9% for the state).</li> </ul> <p><i>Indicator of Progress</i></p> <ul style="list-style-type: none"> <li>• The proportion of <u>primary care facilities that provide mental health services onsite or by telehealth</u> in the South Heartland District increased from 4 out of 14 in 2013 to 6 out of 14 in 2015.</li> </ul>   |
| <p>➤ <b>Substance Abuse</b></p>       | <p><i>Indicators of Need</i></p> <ul style="list-style-type: none"> <li>• In 2014, 28.1% of South Heartland high school students reported <u>using alcohol</u> in the past 30 days (compared to 22.7% for the state).</li> <li>• In 2014, 23.9% of South Heartland high school students reported <u>riding in the past 30 days with a driver who had been drinking alcohol</u> (compared to 22.3% for the state).</li> </ul> <p><i>Indicators of Progress</i></p> <ul style="list-style-type: none"> <li>• The percentage of South Heartland adult <u>smokers who attempted to quit smoking</u> in the past year increased from 47.9% in 2011 to 63.2% in 2014.</li> <li>• The percentage of South Heartland adults who reported <u>binge drinking</u> (five or more drinks for men, four for women, in a row) decreased from 22.8% in 2011 to 20.2% in 2014.</li> </ul>   |
| <p>➤ <b>Access to Health Care</b></p> | <p><i>Indicators of Need</i></p> <ul style="list-style-type: none"> <li>• The percentage of South Heartland adults who reported <u>having a personal doctor or health care provider</u> decreased from 88.2% in 2012 to 81.7% in 2014.</li> <li>• The percentage of South Heartland adults who reported <u>cost as a barrier to visiting a doctor in the past year</u> increased from 9.5% in 2012 to 11.2% in 2014.</li> <li>• The percentage of South Heartland adults who reported <u>visiting a dentist in the past year</u> decreased from 67.9% in 2012 to 61.6% in 2014.</li> </ul> <p><i>Indicators of Progress</i></p> <ul style="list-style-type: none"> <li>• The percentage of South Heartland adults who reported <u>visiting a doctor for a routine exam</u> in the past year increased from 56.9% in 2011 to 64.2% in 2014.</li> <li>• The number of <u>medical home model clinics</u> in the South Heartland District increased from 0 in 2013 to 4 in 2015.</li> <li>• The number of <u>certified Community Health Workers</u> in the South Heartland District increased from 0 in 2013 to 7 in 2015.</li> <li>• The number of <u>available access points for those seeking behavioral health</u> increased from 4 clinics in 2013 to 6 clinics in 2015.</li> </ul> |

|   |   |
|---|---|
| <p>➤ <b>Racial-Ethnic Health Disparities</b></p>  | <p><i>Indicator of Need</i></p> <ul style="list-style-type: none"> <li>• There is a statistically significant difference between South Heartland White, non-Hispanics and minorities in the district (with minorities faring worse) on the indicator of <u>poor physical health limiting usual activities</u>.</li> </ul>   |
| <p>➤ <b>Socio-Economic Health Disparities</b></p> | <p><i>Indicators of Need</i></p> <ul style="list-style-type: none"> <li>• There were statistically significant differences across the three income groups (&lt;\$25,000, \$25,000-\$49,999, and \$50,000+), with the lowest income group faring the worse on numerous indicators, including <u>physical health not good, mental health not good, poor physical health limiting activities, obesity, diabetes, and several others</u>.</li> </ul>  |
| <p>➤ <b>Community Perceptions</b></p>             | <p><i>Indicators of Need</i></p> <ul style="list-style-type: none"> <li>• In 2015, 52.8% of South Heartland residents reported that there are enough <u>medical specialists</u> in their county.</li> <li>• In 2015, 29.3% of South Heartland residents reported that there are enough <u>behavioral health services</u> in their county.</li> <li>• In 2015, 52.0% of South Heartland residents reported sometimes <u>the cost of medical care prevents them from getting the care they need</u>.</li> </ul> |

# 2016 Community Health Needs Assessment Overview

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The 2016 South Heartland Community Health Needs Assessment is designed to provide a picture of the overall community health in Adams, Clay, Nuckolls, and Webster Counties, Nebraska. This report will provide key needs assessment data to hospitals in the district, as well as serve as a community-wide document for the purpose of strategic planning.

The needs assessment was conducted with funds from the 1422 grant to the South Heartland District Health Department, with additional support from Brodstone Memorial Hospital in Superior (Nuckolls County) and Mary Lanning Healthcare in Hastings (Adams County).

This report consists of six sections, each of which are described below.

|   |   |
|---|---|
| ➤ <b>Section I. Performance Measures for the Community Health Improvement Plan</b>          | An update of performance measures included in the six-year (2013 through 2018) community health improvement plan for the district. The plan includes performance measures along with strategies and activities under the priority areas of obesity, cancer, mental health, substance abuse, and access to health care.  |
| ➤ <b>Section II. Racial/Ethnic and Socio-Economic Disparities (Data for the 1422 Grant)</b> | Data focusing on racial/ethnic and social/economic health disparities under the topics of mortality due to diabetes, heart disease, and stroke; physical health; mental health; healthy eating; obesity and overweight; high blood pressure; physical activity; and other topics related to public health.  |
| ➤ <b>Section III: Community Survey Results</b>  | Results from a public health survey covering a broad range of public health and community issues in the areas of the healthcare system, supports for raising children, supports for older adults, recreational and leisure options, jobs and the economy, housing, safety and social support, health issues and risky behaviors, and alcohol use and prevention.        |
| ➤ <b>Section IV. Community Focus Group Results</b>  | Results from three focus groups conducted in the district focusing on community health. Topics of discussion included exercise and recreation opportunities, worksite wellness, communicating with doctors, barriers to receiving health care, health screenings, behavioral health, and other related topics.  |
| ➤ <b>Section V. County Health Rankings</b>  | County Health Rankings provides rankings on health outcomes (length and quality of life) and health factors (health behaviors, clinical care, social and economic factors, and the physical environment). Rankings for both health outcomes and health factors from the last four years are included in this report, as well as supporting data from the 2015 rankings. |
| ➤ <b>Section VI. Community Themes and Strengths Assessment</b>                              | The Community Themes and Strengths Assessment is a focus group/workshop approach to identifying the perceived quality of life in the community. Strengths and areas of need are identified across the spectrum of public health and community services.   |

# Section I. Performance Measures for the Community Health Improvement Plan

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Following are updates on all of the performance measures included in the South Heartland District Health Department's Community Health Improvement Plan (CHIP). The plan covers the six-year period of 2013 through 2018. The plan includes performance measures along with strategies and activities under the priority areas of obesity, cancer, mental health, substance abuse, and access to health care.

The primary data sources for the performance measures are the Youth Risk Behavior Survey (YRBS) and the Behavioral Risk Factor Surveillance System (BRFSS). The YRBS is a survey of various health topics for high school aged youth (grades 9-12). The BRFSS is a survey of various health topics for adults aged 18 and over.

Target goals were set for each performance measure for the year 2018. In general, a 6% improvement was used as the target setting method (1% for each year).

## ***Priority Goal: Obesity***

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***Goal 1: Reduce obesity and associated chronic disease risk through consumption of healthful diets, daily physical activity, and achievement and maintenance of health body weights.***

### ***Discussion***

Eleven performance measures are included within the obesity priority area. The data focus on consumption of fruits, vegetables, and soda; physical activity, and overweight/obesity. Note that alternate measures are being used in Tables 1.2 and 1.3 due to a change in the BRFSS.

Noteworthy updated data from 2014 include a lower rate of fruit consumption among South Heartland high school aged youth compared to their peers in the state: 16.5% of South Heartland youth reported eating fruits 2 or more times per day in the past 7 days (compared to 26.8% for the state (Table 1.3). However, vegetable consumption was slightly higher among South Heartland youth compared to the state: 14.5% of South Heartland youth reported eating vegetables 3 or more times per day in the past 7 days (compared to 13.2% for the state) (Table 1.4).

There are lower rates of physical activity and higher rates of obesity among South Heartland adults compared to the state: 46.2% of South Heartland adults reported meeting the aerobic physical activity recommendation (compared to 50.1% for the state) (Table 1.6) and 44.3% of South Heartland adults are obese (compared to 40.6% for the state) (Table 1.10). In addition, 33.7% of South Heartland youth are obese (compared to 29.9% for the state) (Table 1.11).

## Short-term Performance Measures

**Table 1.1 (alternate measure). Consumed fruits less than 1 time per day**

|                 | 2011  | 2013  |
|-----------------|-------|-------|
| South Heartland | 44.4% | 41.4% |
| Nebraska        | 40.1% | 39.7% |

Original Performance Measure:

Increase the percentage of adults consuming five or more servings of fruits and vegetables daily.

Baseline (2009-2010): 22.9% (State 21.1%)

2018 Target: 24.3%

*Data Source: Behavioral Risk Factors Surveillance System (BRFSS)*

Note: original BRFSS indicator no longer available.

**Table 1.2 (alternate measure). Consumed vegetables less than 1 time per day**

|                 | 2011  | 2013  |
|-----------------|-------|-------|
| South Heartland | 27.1% | 24.8% |
| Nebraska        | 26.2% | 23.3% |

Original Performance Measure:

Increase the percentage of adults consuming five or more servings of fruits and vegetables daily.

Baseline (2009-2010): 22.9% (State 21.1%)

2018 target: 24.3%

*Data Source: Behavioral Risk Factors Surveillance System (BRFSS)*

Note: original BRFSS indicator no longer available.

**Table 1.3. Increase the percentage of youth who report eating fruits two or more times per day in the past 7 days (does not include fruit juices)**

|                 | 2012 (baseline) | 2014  |
|-----------------|-----------------|-------|
| South Heartland | 23.4%           | 16.5% |
| Nebraska        | 26.4%           | 26.8% |

2018 target: 24.8%

*Data Source: Youth Risk Behavior Survey (YRBS)*

**Table 1.4. Increase the percentage of youth who report eating vegetables three or more times per day in the past 7 days**

|                 | 2012 (baseline) | 2014  |
|-----------------|-----------------|-------|
| South Heartland | 10.8%           | 14.5% |
| Nebraska        | 11.7%           | 13.2% |

2018 target: 11.4%

*Data Source: Youth Risk Behavior Survey (YRBS)*



**Table 1.5. Decrease the percentage of high school students who report consuming soda one or more times per day during the past 7 days**

|   | 2012 (baseline) | 2014  |
|---|-----------------|-------|
| South Heartland                                       | 21.1%           | 23.7% |
| Nebraska  | 22.3%           | 20.4% |
| <i>2018 target: 19.8%</i>                             |                 |       |
| <i>Data Source: Youth Risk Behavior Survey (YRBS)</i> |                 |       |

**Table 1.6. Increase the percentage of adults meeting the aerobic physical activity recommendation\***

|   | 2012 (baseline) | 2014  |
|---|-----------------|-------|
| South Heartland   | 49.1%           | 46.2% |
| Nebraska  | 49.0%           | 50.1% |
| <i>2018 target: 52.0%</i>   |                 |       |
| <i>Data Source: Behavioral Risk Factors Surveillance System (BRFSS)</i> |                 |       |

\*Percentage of adults 18 and older who report at least 150 minutes of moderate-intensity physical activity, or at least 75 minutes of vigorous-intensity physical activity, or an equivalent combination of moderate and vigorous-intensity aerobic activity per week during the past month.

**Table 1.7. Increase the percentage of youth who report 60 minutes of physical activity 5 days or more per week**

|   | 2012 (baseline) | 2014  |
|---|-----------------|-------|
| South Heartland                                       | 58.7%           | 52.3% |
| Nebraska  | 57.6%           | 52.8% |
| <i>2018 target: 62.2%</i>                             |                 |       |
| <i>Data Source: Youth Risk Behavior Survey (YRBS)</i> |                 |       |

**Table 1.8. Increase the number of mothers who meet the recommendations for breastfeeding (exclusive for 6 months)**

*No data available for the general population about duration*

*2018 target: Collect duration data for the general population*

*Data Source: TBD*

**Long-term Performance Measures**

**Table 1.9. Decrease the percentage of adults who are overweight or obese (BMI of 25 or higher)**

|                        | <b>2012 (baseline)</b> | <b>2013</b> | <b>2014</b> |
|------------------------|------------------------|-------------|-------------|
| <b>South Heartland</b> | 68.7%                  | 63.5%       | 69.4%       |
| <b>Nebraska</b>        | 65.0%                  | 65.5%       | 66.7%       |

*2018 target: 64.6%*

*Data Source: Behavioral Risk Factors Surveillance System (BRFSS)*

**Table 1.10. Decrease the percentage of adults who are obese (BMI of 30 or higher)**

|                        | <b>2012 (baseline)</b> | <b>2013</b> | <b>2014</b> |
|------------------------|------------------------|-------------|-------------|
| <b>South Heartland</b> | 42.1%                  | 35.2%       | 44.3%       |
| <b>Nebraska</b>        | 40.7%                  | 42.7%       | 40.6%       |

*2018 target: 28.8%*

*Data Source: Behavioral Risk Factors Surveillance System (BRFSS)*

**Table 1.11. Decrease the percentage of children under 18 years who are overweight or obese (BMI at 85<sup>th</sup> percentile or higher)**

|                        | <b>2012 (baseline)</b> | <b>2014</b> |
|------------------------|------------------------|-------------|
| <b>South Heartland</b> | 32.1%                  | 33.7%       |
| <b>Nebraska</b>        | 26.5%                  | 29.9%       |

*2018 target: 30.0%*

*Data Source: Youth Risk Behavior Survey (YRBS)*

## Priority Goal: Cancer

**Goal 2:** Reduce the number of new cancer cases as well as illness, disability, and death caused by cancer.

### Discussion

Fifteen performance measures are included within the Cancer priority area. The data focus on screening for cancer and incidence and mortality of cancer.

Rates of cancer screening are basically on par with the state or slightly lower (Tables 1.12-1.14). Potentially alarming data are seen in the cancer incidence and mortality data. From 2008-2012 there were incidence rates of female breast cancer, cervical cancer, colorectal cancer, prostate cancer, melanoma, and lung cancer in the South Heartland District that were all higher than the rest of the state. Mortality rates from 2009-2013 in the South Heartland District were also higher than the state for all of these cancers, with the exceptions of Female Breast Cancer and Prostate Cancer (Tables 1.17-1.28).

### Screening Performance Measures

**Table 1.12. Increase the percentage of women aged 50 to 74 years who are up-to-date on breast cancer screening\***

|                 | 2012 (baseline) | 2014  |
|-----------------|-----------------|-------|
| South Heartland | 75.8%           | 71.7% |
| Nebraska        | 74.9%           | 76.1% |

2018 target: 80.3%

Data Source: Behavioral Risk Factors Surveillance System (BRFSS)

\*Mammogram in the last 2 years

**Table 1.13. Increase the percentage of women aged 21 to 65 years who are up-to-date on cervical cancer screening\***

|                 | 2012 (baseline) | 2014  |
|-----------------|-----------------|-------|
| South Heartland | 85.6%           | 79.3% |
| Nebraska        | 83.9%           | 81.7% |

2018 target: 90.7%

Data Source: Behavioral Risk Factors Surveillance System (BRFSS)

\*Women without a hysterectomy who had a pap test within the last 3 years

**Table 1.14. Increase the percentage of adults aged 50 to 75 who are up-to-date on colorectal cancer screening\***

|                 | 2012 (baseline) | 2013  | 2014  |
|-----------------|-----------------|-------|-------|
| South Heartland | 59.9%           | 61.0% | 62.8% |
| Nebraska        | 61.1%           | 62.8% | 64.1% |

2018 target: 63.5%

Data Source: Behavioral Risk Factors Surveillance System (BRFSS)

\*Annual fecal occult blood test [FOBT], or sigmoidoscopy every 5 years plus FOBT every 3 years, or colonoscopy every 10 years

**Table 1.15 (developmental). Increase the percentage of men 40 years and older who have discussed with their health care provider the advantages and disadvantages of the prostate-specific antigen (PSA) test to screen for prostate cancer**

Local baseline: data unavailable

National baseline: 14.4% (2010)

Data Source: NHIS, CDC/NCHS

**Table 1.16 (developmental). Increase the percentage of youth and adults who follow protective measures that reduce the risk of skin cancer**

Data Source: TBD

### **Incidence and Mortality Performance Measures**

**Table 1.17. Reduce incidence rates (per 100,000) of Female Breast Cancer**

|                 | 2003-2007 (baseline) | 2008-2012 |
|-----------------|----------------------|-----------|
| South Heartland | 128.9                | 130.7     |
| Nebraska        | 123.2                | 122.7     |

2018 target: 121.2

Data Source: Nebraska DHHS, Cancer Registry

**Table 1.18. Reduce mortality rates (per 100,000) due to Female Breast Cancer**

|                 | 2004-2008 (baseline) | 2009-2013 |
|-----------------|----------------------|-----------|
| South Heartland | 19.0                 | 16.4      |
| Nebraska        | 22.0                 | 19.7      |

2018 target: 18.0

Data Source: Nebraska DHHS, Vital Records

**Table 1.19. Reduce incidence rates (per 100,000) of Cervical Cancer**

|                 | 2003-2007 (baseline) | 2008-2012 |
|-----------------|----------------------|-----------|
| South Heartland | 9.9                  | 10.5      |
| Nebraska        | 7.2                  | 6.9       |

*2018 target: 9.6*

*Data Source: Nebraska DHHS, Cancer Registry*

**Table 1.20. Reduce mortality rates (per 100,000) due to Cervical Cancer**

|                 | 2004-2008 (baseline) | 2009-2013 |
|-----------------|----------------------|-----------|
| South Heartland | 0.0                  | 2.6       |
| Nebraska        | 1.8                  | 2.0       |

*2018 target: 0.0*

*Data Source: Nebraska DHHS, Vital Records*

**Table 1.21. Reduce incidence rates (per 100,000) of Colorectal Cancer**

|                 | 2003-2007 (baseline) | 2008-2012 |
|-----------------|----------------------|-----------|
| South Heartland | 64.7                 | 54.5      |
| Nebraska        | 56.2                 | 46.1      |

*2018 target: 60.9*

*Data Source: Nebraska DHHS, Cancer Registry*

**Table 1.22. Reduce mortality rates (per 100,000) due to Colorectal Cancer**

|                 | 2004-2008 (baseline) | 2009-2013 |
|-----------------|----------------------|-----------|
| South Heartland | 15.5                 | 19.7      |
| Nebraska        | 18.5                 | 16.3      |

*2018 target: 14.6*

*Data Source: Nebraska DHHS, Vital Records*

**Table 1.23. Reduce incidence rates (per 100,000) of Prostate Cancer**

|                 | 2003-2007 (baseline) | 2008-2012 |
|-----------------|----------------------|-----------|
| South Heartland | 161.3                | 128.2     |
| Nebraska        | 158.9                | 125.7     |

*2018 target: 151.6*

*Data Source: Nebraska DHHS, Cancer Registry*

**Table 1.24. Reduce mortality rates (per 100,000) due to Prostate Cancer**

|                 | 2004-2008 (baseline) | 2009-2013 |
|-----------------|----------------------|-----------|
| South Heartland | 25.1                 | 19.1      |
| Nebraska        | 24.5                 | 21.6      |

2018 target: 23.6  
Data Source: Nebraska DHHS, Vital Records

**Table 1.25. Reduce incidence rates (per 100,000) of Skin Cancer (Melanoma)**

|                 | 2003-2007 (baseline) | 2008-2012 |
|-----------------|----------------------|-----------|
| South Heartland | 18.5                 | 30.9      |
| Nebraska        | 17.1                 | 18.4      |

2018 target: 17.4  
Data Source: Nebraska DHHS, Cancer Registry

**Table 1.26. Reduce mortality rates (per 100,000) due to Skin Cancer (Melanoma)**

|                 | 2004-2008 (baseline) | 2009-2013 |
|-----------------|----------------------|-----------|
| South Heartland | 4.6                  | 6.1       |
| Nebraska        | 3.0                  | 3.1       |

2018 target: 4.3  
Data Source: Nebraska DHHS, Vital Records

**Table 1.27. Reduce incidence rates (per 100,000) of Lung Cancer**

|                 | 2003-2007 (baseline) | 2008-2012 |
|-----------------|----------------------|-----------|
| South Heartland | 66.2                 | 64.0      |
| Nebraska        | 65.6                 | 58.9      |

2018 target: 62.3  
Data Source: Nebraska DHHS, Cancer Registry

**Table 1.28. Reduce mortality rates (per 100,000) due to Lung Cancer**

|                 | 2004-2008 (baseline) | 2009-2013 |
|-----------------|----------------------|-----------|
| South Heartland | 48.2                 | 44.7      |
| Nebraska        | 47.2                 | 43.6      |

2018 target: 45.3  
Data Source: Nebraska DHHS, Vital Records

## ***Priority Goal: Mental Health***

**Goal 3:** *Improve mental health through prevention and by ensuring access to appropriate, quality mental health services*

### ***Discussion***

Thirteen performance measures were selected for the mental health priority area. The data focus on mental health outcomes for youth and adults (depression, mental distress, and youth suicide attempts), as well as performance measures of the more developmental type around access to mental health and other system-related issues.

In 2014, 20.7% of South Heartland adults reported that they have ever been told by a medical or mental health professional that they have depression (compared to 17.7% for the state) (Table 1.29). In addition, 8.1% of South Heartland adults reported that they have experienced frequent mental distress in the past 30 days (compared to 8.2% for the state), frequent mental distress being defined as mental health not being good on 14 or more of the past 30 days (Table 1.30). Lastly, in 2014, 13.5% of South Heartland youth reported attempting suicide in the past 30 days (compared to 8.9% for the state) (Table 1.31).

### **Mental Health Outcome Performance Measures**

***Table 1.29 (alternate measure). Percentage of adults ever told they have depression***

|                        | <b>2012</b> | <b>2013</b> | <b>2014</b> |
|------------------------|-------------|-------------|-------------|
| <b>South Heartland</b> | 13.8%       | 18.5%       | 20.7%       |
| <b>Nebraska</b>        | 16.7%       | 18.2%       | 17.7%       |

**Original Performance Measure:** Reduce the percentage of persons who reported currently experiencing depression (based on a Severity of Depression score of 10 or more)  
Baseline (2008): 5.2% (State: 8.7%)  
2018 Target: 4.9%

**Data Source:** Behavioral Risk Factors Surveillance System (BRFSS)

Note: original BRFSS indicator no longer available.

**Table 1.30 (alternate measure). Percentage of adults experiencing frequent mental distress in the past 30 days\***

|                        | 2012 | 2013 | 2014 |
|------------------------|------|------|------|
| <b>South Heartland</b> | 7.2% | 9.0% | 8.1% |
| <b>Nebraska</b>        | 9.0% | 8.9% | 8.2% |

*Original Performance Measure:* Reduce the percentage of adults reporting serious psychological distress (SPD) in the last 30 days.

Baseline (2008): 7.0%% (State: 2.4%)

2018 Target: 6.6%

*Data Source: Behavioral Risk Factors Surveillance System (BRFSS)*

\*Percentage of adults 18 and over who report that their mental health (including stress, depression, and problems with emotions) was not good on 14 or more of the previous 30 days.

Note: original BRFSS indicator no longer available.

**Table 1.31. Reduce reported suicide attempts by high school students during the past year**

|                        | 2012 (baseline) | 2014  |
|------------------------|-----------------|-------|
| <b>South Heartland</b> | 9.6%            | 13.5% |
| <b>Nebraska</b>        | 6.0%            | 8.9%  |

*2018 target: 9.0%*

*Data Source: Youth Risk Behavior Survey (YRBS)*

### **Access Performance Measures**

**Table 1.32. Increase the proportion of primary care facilities that provide mental health services onsite or by telehealth**

| 2013 (baseline) | 2015   |
|-----------------|--|
| 4 of 14 clinics | 6 of 14 clinics<br>(two new providers in Edgar and Sutton) |

*2018 target: 7 clinics*

*Data Source: South Heartland District Health Department*

**Table 1.33. Increase access to mental health assistance/services through local educational institutions and worksites.**

| 2013 (baseline)   | 2015   |
|---|--|
| 3 trainers, 2 trainings, 60 trained<br>Target groups reached: law enforcement (35),<br>behavioral health (25) | 27 individuals trained for Mental Health First Aid and<br>Psychological First Aid (24 in Adams County and 3 from<br>Clay County) |

*2018 target: Developmental*

*Data Source: Region 3 Behavioral Health Services*



**Table 1.34 (developmental). Increase the number of mental health patients who participate in recovery support programs (NAMI peer support, Community Support, support groups, VA-sponsored programs, Vocational Rehab, etc.)**

| 2013 (baseline)   | 2014  | 2015  |
|---|---|---|
| Number served by South Central Behavioral Services:<br><u>806</u>                         | Number served by South Central Behavioral Services:<br><u>856</u>         | Number served by South Central Behavioral Services:<br><u>928</u>                         |
| Number who participated in a SCBS support/recovery program:<br><u>340</u>                 | Number who participated in a SCBS support/recovery program:<br><u>353</u> | Number who participated in a SCBS support/recovery program:<br><u>381</u>                 |
|   | Number served by Horizon Recovery and Counseling:<br><u>311</u>           | Number served by Horizon Recovery and Counseling:<br><u>864</u> (January through October) |
|   |   | Number served by Goodwill's Behavioral Health Employment in Hastings:<br><u>62</u>        |
| <i>2018 target: Improve by 6% over the next 3 years.</i>                                  |   |   |
| <i>Data Source: South Central Behavioral Services and Horizon Recovery and Counseling</i> |   |   |

**Table 1.35 (developmental). Increase collection and accessibility of local mental health data**

| 2013 (baseline)   | 2015   |
|---|--|
| Potential sources for local data: Magellan, Horizon Recovery, BRFSS, YRBS, County Attorney's Office, Region 3, South Central Behavioral Services, Network of Care for Behavioral Health | Region 3 will be a data source for collection and accessibility of local mental health data. |
| <i>2018 target: Developmental</i>   |  |
| <i>Data Source: Region 3 Behavioral Health Services</i>   |  |

**Table 1.36. Increase awareness of available mental health services by 10%**

|  |
|--|
| 2012 (baseline)<br>35.8%               |
| <i>2018 target: 40.0%</i>              |
| <i>Data Source: Schmeckle Research</i> |

---

**Table 1.37. Decrease stigma as a barrier to accessing services**

**2012 (baseline)**

62.9%

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2018 target: 56.6%

*Data Source: Schmeckle Research*

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## ***Priority Goal: Substance Abuse***

**Goal 4:** Reduce substance abuse to protect the health, safety, and quality of life for all, especially young people.

### ***Discussion***

Seven performance measures were selected for the Substance Abuse priority area (five for youth and two for adults). The data focus on youth alcohol and substance use, youth riding with alcohol impaired drivers, youth distracted driving, adult binge drinking, and adult smoking cessation.

Noteworthy data from 2014 include 28.1% of South Heartland youth reporting past 30 day alcohol use (compared to 22.7% for the state) (Table 1.38), and 13.3% of South Heartland youth reporting past 30 day marijuana use (compared to 13.7% for the state) (Table 1.39). In 2014, nearly one-fourth (23.9%) of South Heartland youth reported riding in the past 30 days with a driver who had been drinking alcohol (compared to 22.3% for the state) (Table 1.41).

Among South Heartland adults, 20.2% reported binge drinking in the past 30 days (compared to 20.3% for the state) (Table 1.43). Smoking cessation appears to be on the rise among South Heartland adults. In 2014, 63.2% of current smokers reported attempting to quit smoking in the past year, up from 47.9% in 2011 (Table 1.44).

### **Youth Performance Measures**

***Table 1.38. Decrease the percentage of high school students who report the use of alcohol in the past 30 days***

|                        | <b>2012 (baseline)</b> | <b>2014</b> |
|------------------------|------------------------|-------------|
| <b>South Heartland</b> | 24.2%                  | 28.1%       |
| <b>Nebraska</b>        | 22.1%                  | 22.7%       |

***2018 target: 22.7%***

*Data Source: Youth Risk Behavior Survey (YRBS)*

***Table 1.39. Decrease the percentage of high school students who report marijuana use in the past 30 days***

|                        | <b>2012 (baseline)</b> | <b>2014</b> |
|------------------------|------------------------|-------------|
| <b>South Heartland</b> | 12.3%                  | 13.3%       |
| <b>Nebraska</b>        | 11.7%                  | 13.7%       |

***2018 target: 11.5%***

*Data Source: Youth Risk Behavior Survey (YRBS)*

**Table 1.40. Decrease the percentage of high school students who ever took prescription drugs without a doctor's prescription**

|   | 2012 (baseline) | 2014  |
|---|-----------------|-------|
| South Heartland                                       | 11.8%           | 11.2% |
| Nebraska  | 10.4%           | 13.5% |
| <i>2018 target: 11.1%</i>                             |                 |       |
| <i>Data Source: Youth Risk Behavior Survey (YRBS)</i> |                 |       |

**Table 1.41. Decrease the percentage of high school students who report riding in the past 30 days with a driver who had been drinking alcohol**

|   | 2012 (baseline) | 2014  |
|---|-----------------|-------|
| South Heartland                                       | 22.7%           | 23.9% |
| Nebraska  | 20.3%           | 22.3% |
| <i>2018 target: 21.3%</i>                             |                 |       |
| <i>Data Source: Youth Risk Behavior Survey (YRBS)</i> |                 |       |

**Table 1.42. Decrease the percentage of high school students who report texting or e-mailing while driving in the past 30 days**

|   | 2012 (baseline) | 2014  |
|---|-----------------|-------|
| South Heartland                                       | 38.7%           | 52.9% |
| Nebraska  | 46.6%           | 49.4% |
| <i>2018 target: 36.4%</i>                             |                 |       |
| <i>Data Source: Youth Risk Behavior Survey (YRBS)</i> |                 |       |

### **Adult Performance Measures**

**Table 1.43. Reduce the percentage of adults who report binge drinking (five or more drinks in a row for men, four for women) in the past 30 days**

|   | 2011 (baseline) | 2012  | 2013  | 2014  |
|---|-----------------|-------|-------|-------|
| South Heartland   | 22.8%           | 20.0% | 17.1% | 20.2% |
| Nebraska  | 22.7%           | 22.1% | 20.0% | 20.3% |
| <i>2018 target: 21.4%</i>   |                 |       |       |       |
| <i>Data Source: Behavioral Risk Factors Surveillance System (BRFSS)</i> |                 |       |       |       |

**Table 1.44. Increase the percentage of current smokers who report attempting to quit smoking in the past year**

|   | 2011 (baseline) | 2012  | 2013  | 2014  |
|---|-----------------|-------|-------|-------|
| South Heartland   | 47.9%           | 55.5% | 62.9% | 63.2% |
| Nebraska  | 55.6%           | 57.1% | 57.1% | 58.2% |
| <i>2018 target: 50.8%</i>   |                 |       |       |       |
| <i>Data Source: Behavioral Risk Factors Surveillance System (BRFSS)</i> |                 |       |       |       |

## Priority Goal: Access to Health Care

**Goal 5:** Improve access to comprehensive, quality health care services

### Discussion

Eleven performance measures were selected for the Access to Health Care priority area. The data focus on access to personal doctor or health care providers, cost, access to dentists, and a number of developmental indicators focusing on system-related issues.

Among South Heartland adults, four-fifths (81.7%) reported having a personal doctor or health care provider (compared to 79.8% for the state) (Table 1.45). More than one-in-ten (11.2%) of South Heartland adults reported cost as a barrier to visiting a doctor in the past year (compared to 11.9% for the state) (Table 1.48).

### Short-term Performance Measures

**Table 1.45. Increase the percentage of adults who report having a personal doctor or health care provider**

|   | 2012 (baseline) | 2013  | 2014  |
|---|-----------------|-------|-------|
| South Heartland   | 88.2%           | 80.5% | 81.7% |
| Nebraska  | 82.8%           | 79.1% | 79.8% |
| <i>2018 target: 93.5%</i>   |                 |       |       |
| <i>Data Source: Behavioral Risk Factors Surveillance System (BRFSS)</i> |                 |       |       |

**Table 1.46. Increase the percentage of adults who report visiting the doctor for a routine exam in the past year**

|   | 2009-2010* | 2011  | 2012  | 2013  | 2014  |
|---|------------|-------|-------|-------|-------|
| South Heartland   | 60.3%      | 56.9% | 63.0% | 61.8% | 64.2% |
| Nebraska  | 58.0%      | 57.7% | 60.4% | 61.6% | 63.3% |
| <i>2018 target: 63.6%</i>   |            |       |       |       |       |
| <i>Data Source: Behavioral Risk Factors Surveillance System (BRFSS)</i> |            |       |       |       |       |

\*There is a break in the trend for BRFSS data beginning in 2011 due to a change in methodology.

**Table 1.47. Decrease the percentage of adults who report not having a personal doctor or health care provider**

|   | 2012 (baseline) | 2013  | 2014  |
|---|-----------------|-------|-------|
| South Heartland   | 11.8%           | 19.5% | 18.3% |
| Nebraska  | 17.2%           | 20.9% | 20.2% |
| <i>2018 target: 18.1%</i>   |                 |       |       |
| <i>Data Source: Behavioral Risk Factors Surveillance System (BRFSS)</i> |                 |       |       |

**Table 1.48. Decrease the percentage of adults who report cost as a barrier to visiting a doctor in the past year**

|                 | 2012 (baseline) | 2013  | 2014  |
|-----------------|-----------------|-------|-------|
| South Heartland | 9.5%            | 8.7%  | 11.2% |
| Nebraska        | 12.8%           | 13.0% | 11.9% |

*2018 target: 8.4%*

*Data Source: Behavioral Risk Factors Surveillance System (BRFSS)*

**Table 1.49. Increase the percentage of adults who report visiting a dentist for any reason in the past year**

|                 | 2012 (baseline) | 2014  |
|-----------------|-----------------|-------|
| South Heartland | 67.9%           | 61.6% |
| Nebraska        | 67.6%           | 66.4% |

*2018 target: 72.0%*

*Data Source: Behavioral Risk Factors Surveillance System (BRFSS)*

**Long-term Performance Measures**

**Table 1.50 (developmental). Increase the number of medical home model clinics (patient-centered medical homes) within the district**

| 2013 (baseline) | 2015   |
|-----------------|--|
| 0               | 4<br>(2 in Hastings, 1 in Blue Hill, 1 in Edgar) |

*2018 target: 1*

*Data Source: Senator Glore's Office*

**Table 1.51 (developmental). Develop a Community Health Worker (CHW) program/system to increase the number of Community Health Workers serving as bridges between providers of health services and the community**

| 2013 (baseline)                      | 2015   |
|--------------------------------------|--|
| No program available in the district | Five total CHW in the district who have received a certificate through DHHS. Hastings CCC reports two participants have completed the Community Health Worker Certificate Program. |

*2018 target: Program/system in place which provides training and oversight in core competencies, educates and promotes CHW utilization by providers of health care services in the community*

*Data Source: South Heartland District Health Department and Hastings CCC*

**Table 1.52 (developmental). Increase the available access points across the district for those seeking behavioral health care**

| 2013 (baseline)  | 2015      |
|--|-----------|
| 4 clinics  | 6 clinics |
| <i>2018 target:</i> Add access in at least one primary care clinic |           |
| <i>Data Source:</i> South Heartland District Health Department     |           |

**Table 1.53 (developmental). Adoption of EHR technology that meets meaningful use criteria, Health Information Exchange (NEHII), telehealth, and other technology upgrades that support and improve access to health care services**

| 2013 (baseline)   | 2015   |
|---|--|
| None of the 16 clinics in the South Heartland district have adopted EHR technology that meets meaningful use criteria | 14 of 16 clinics in the South Heartland district have adopted EHR technology that meets meaningful use criteria and have met Level 1 of meaningful use |
| <i>Data Source:</i> South Heartland District Health Department  |  |

**Table 1.54 (developmental). Increase the number of Health Literate Organizations – organizations that make it easier for people to navigate, understand, and use information and services to take care of their health.**

| 2013 (baseline)   | 2015   |
|---|--|
| Need to assess the number of organizations meeting the 10 attributes of a health literate organization  | In 2015, Mary Lanning and Morrison Cancer Center and SHDHD completed organizational assessments for health literacy. The organizations do not yet meet 80% of the attributes |
| <i>2018 target:</i> South Health District Health Department, all three hospitals, and at least one clinic in each county meet 80% of the attributes of a health literate organization |  |
| <i>Data Source:</i> South Heartland District Health Department  |  |

**Table 1.55 (developmental). Create a web-based resource for reliable, local health information and resources related to healthy choices and disease prevention, diagnosis, treatment, and management.**

| 2013 (baseline)  | 2015   |
|--|--|
| Individual stakeholder websites and SHDHD Network of Care website for local health status data             | The Veteran’s Network of Care website is a one-stop shop of web-based resources for veterans, military service members, and their families |
| <i>2018 target:</i> One-stop searchable, comprehensive, linked network of resources and health information |  |
| <i>Data Source:</i> TBD  |  |

**Table 1.56 (developmental). Support community education and recruitment efforts for health care professions**

|                         |  |
|-------------------------|--|
| <i>Data Source:</i> TBD |  |
|-------------------------|--|

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**Table 1.57 (developmental). Support community education and recruitment efforts for health care professions**

**2015**

- Smart Moves program provides diabetes education.
- Breast Cancer screenings clinic provided by SHDHD.
- Mary Lanning has recruited local specialists to include an endocrinologist, allergist/immunologist, additional doctors who specialize in cardiology, pathology, pain management, plastic surgery and psychiatry.

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*Data Source: South Heartland District Health Department*

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## Section II. Racial/Ethnic and Socio-Economic Disparities (Data for the 1422 Grant)

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This section of the report presents data on health disparities among racial/ethnic groups and socio-economic classes. The data are divided into two sections: mortality data and Behavioral Risk Factor Surveillance System (BRFSS) data.

### ***Mortality Data***

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*Note: All mortality data indicators are age-adjusted, including for sub-populations.*

#### ***Discussion***

Age-adjusted data on mortality due to diabetes, heart disease, and stroke are contained below in Tables 2.1 through 2.4 for each of the four counties within the South Heartland District, the overall South Heartland District, and the state. It is worth noting that the South Heartland District as a whole has a notably higher rate of mortality due to heart disease as compared to the state, due largely to high rates in Adams and Clay Counties (Table 2.3).

In addition, each mortality indicator compares the two racial/ethnic categories of White, non-Hispanic and Minority for the South Heartland District. For each of the four indicators, minorities have lower rates of mortality compared to the White, non-Hispanic category.

#### ***Data***

***Table 2.1. Death rate due to diabetes (underlying cause) per 100,000  
Years: 2011-2014, combined***

| Nebraska  | South Heartland     | Adams               | Clay                     | Nuckolls            | Webster            |
|---|---------------------|---------------------|--------------------------|---------------------|--------------------|
| 21.3<br>(1,845 deaths)  | 16.2<br>(45 deaths) | 11.5<br>(20 deaths) | 27.9<br>(11 deaths)      | 27.5<br>(11 deaths) | 12.6<br>(3 deaths) |
| <b><i>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</i></b> |                     |                     |                          |                     |                    |
| White, non-Hispanic: 16.7 (45 deaths)   |                     |                     | Minority: 0.0 (0 deaths) |                     |                    |
| <i>Data Source: NDHHS, Division of Public Health, Vital Statistics (2015)</i> |                     |                     |                          |                     |                    |

**Table 2.2. Death rate due to diabetes (any mention) per 100,000  
Years: 2011-2014, combined**

| Nebraska  | South Heartland      | Adams               | Clay                    | Nuckolls             | Webster             |
|---|----------------------|---------------------|-------------------------|----------------------|---------------------|
| 79.9<br>(7,006 deaths)  | 64.6<br>(182 deaths) | 50.6<br>(85 deaths) | 55.9<br>(22 deaths)     | 107.4<br>(44 deaths) | 93.0<br>(31 deaths) |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</i>        |                      |                     |                         |                      |                     |
| White, non-Hispanic: 66.1 (181 deaths)  |                      |                     | Minority: 7.4 (1 death) |                      |                     |
| <i>Data Source: NDHHS, Division of Public Health, Vital Statistics (2015)</i> |                      |                     |                         |                      |                     |

**Table 2.3. Death rate due to heart disease (underlying cause) per 100,000  
Years: 2011-2014, combined**

| Nebraska  | South Heartland       | Adams                 | Clay                      | Nuckolls             | Webster              |
|---|-----------------------|-----------------------|---------------------------|----------------------|----------------------|
| 145.4<br>(13,240 deaths)  | 188.9<br>(548 deaths) | 204.1<br>(362 deaths) | 186.0<br>(75 deaths)      | 132.2<br>(56 deaths) | 167.7<br>(55 deaths) |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</i>        |                       |                       |                           |                      |                      |
| White, non-Hispanic: 192.1 (542 deaths)                                       |                       |                       | Minority: 81.6 (6 deaths) |                      |                      |
| <i>Data Source: NDHHS, Division of Public Health, Vital Statistics (2015)</i> |                       |                       |                           |                      |                      |

**Table 2.4. Death rate due to stroke (underlying cause) per 100,000  
Years: 2011-2014, combined**

| Nebraska  | South Heartland      | Adams               | Clay                      | Nuckolls            | Webster             |
|---|----------------------|---------------------|---------------------------|---------------------|---------------------|
| 35.6<br>(3,206 deaths)  | 37.6<br>(112 deaths) | 38.8<br>(71 deaths) | 32.1<br>(13 deaths)       | 36.3<br>(14 deaths) | 39.5<br>(14 deaths) |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</i>        |                      |                     |                           |                     |                     |
| White, non-Hispanic: 37.8 (110 deaths)  |                      |                     | Minority: 28.2 (2 deaths) |                     |                     |
| <i>Data Source: NDHHS, Division of Public Health, Vital Statistics (2015)</i> |                      |                     |                           |                     |                     |

## ***Behavioral Risk Factors Surveillance System (BRFSS) Data***

*Note: All BRFSS indicators are age-adjusted, including for sub-populations. Data are not statistically different unless noted with an asterisk.*

### ***Discussion***

A wide array of health outcome indicators from the BRFSS survey are included below in Tables 2.5 through 2.21. Trend data from 2011 to 2014 for the four-county South Heartland district and the state. In addition, combined years of data (2011-2014) for the South Heartland District are available by race/ethnicity (White, non-Hispanic and minority) and income. In general, minority groups in the South Heartland tend to fare slightly worse on a number of health indicators as compared to White, non-Hispanics. However, the difference was statistically significant for just one indicator: *poor physical or mental health limited usual activities on 14 or more of the past 30 days*.

There are greater differences across the three income groups (<\$25,000, \$25,000-\$49,999, and \$50,000+), with the lowest income group faring the worst on nearly every health indicator. Statistically significant disparities in which low income individuals fare worse on health outcomes compared to higher income groups include:

- *Physical health was not good on 14 or more days of the past 30 days*
- *Mental health was not good on 14 or more of the past 30 days*
- *Poor physical or mental health limited usual activities on 14 or more of the past 30 days*
- *Consumed vegetables less than 1 time per day*
- *Obese (BMI = 30 or higher)*
- *Ever told they have diabetes (excluding pregnancy)*
- *Ever told they had a heart attack or coronary heart disease*
- *Ever told they had a stroke*
- *Ever told they have high blood pressure (excluding pregnancy)*

## Data

**Table 2.5. Physical health was not good on 14 or more days of the past 30 days**

|  | 2011  | 2012                    | 2013  | 2014            |
|--|-------|-------------------------|-------|-----------------|
| <b>South Heartland</b>   | 10.1% | 11.2%                   | 10.8% | 10.4%           |
| <b>Nebraska</b>  | 9.6%  | 9.8%                    | 9.2%  | 9.0%            |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</u> |       |                         |       |                 |
| White, non-Hispanic: 9.2%  |       | Minority: 14.6%         |       |                 |
| <u>South Heartland Income Comparison (2011-2014, combined):</u>        |       |                         |       |                 |
| <\$25,000: 17.7%*  |       | \$25,000-\$49,999: 8.4% |       | \$50,000+: 4.6% |
| <i>Data Source: BRFSS (2011-2014)</i>                                  |       |                         |       |                 |

\*Statistically significant difference between "low income" (<\$25,000) and other income categories.

**Table 2.6. Mental health was not good on 14 or more of the past 30 days**

|  | 2011  | 2012                    | 2013 | 2014            |
|--|-------|-------------------------|------|-----------------|
| <b>South Heartland</b>   | 11.0% | 7.2%                    | 9.0% | 8.1%            |
| <b>Nebraska</b>  | 9.2%  | 9.0%                    | 8.9% | 8.2%            |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</u> |       |                         |      |                 |
| White, non-Hispanic: 9.6%  |       | Minority: 11.8%         |      |                 |
| <u>South Heartland Income Comparison (2011-2014, combined):</u>        |       |                         |      |                 |
| <\$25,000: 19.6%*  |       | \$25,000-\$49,999: 7.1% |      | \$50,000+: 5.0% |
| <i>Data Source: BRFSS (2011-2014)</i>                                  |       |                         |      |                 |

\*Statistically significant difference between "low income" (<\$25,000) and other income categories.

**Table 2.7. Poor physical or mental health limited usual activities on 14 or more of the past 30 days**

|  | 2011 | 2012                    | 2013 | 2014            |
|--|------|-------------------------|------|-----------------|
| <b>South Heartland</b>   | 4.4% | 5.6%                    | 7.1% | 6.4%            |
| <b>Nebraska</b>  | 5.8% | 6.4%                    | 5.8% | 5.8%            |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</u> |      |                         |      |                 |
| White, non-Hispanic: 4.8%  |      | Minority: 14.7%*        |      |                 |
| <u>South Heartland Income Comparison (2011-2014, combined):</u>        |      |                         |      |                 |
| <\$25,000: 11.9%*  |      | \$25,000-\$49,999: 4.7% |      | \$50,000+: 1.9% |
| <i>Data Source: BRFSS (2011-2014)</i>                                  |      |                         |      |                 |

\*Statistically significant difference between minority and White, NH, and between "low income" (<\$25,000) and other income categories.

**Table 2.8. Consumed fruits less than 1 time per day**

|  | 2011  | 2012                     | 2013  | 2014             |
|--|-------|--------------------------|-------|------------------|
| <b>South Heartland</b>   | 44.4% | -                        | 41.4% | -                |
| <b>Nebraska</b>  | 40.1% | -                        | 39.7% | -                |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</u> |       |                          |       |                  |
| White, non-Hispanic: 43.3%   |       | Minority: 46.4%          |       |                  |
| <u>South Heartland Income Comparison (2011-2014, combined):</u>        |       |                          |       |                  |
| <\$25,000: 44.9%   |       | \$25,000-\$49,999: 44.6% |       | \$50,000+: 37.2% |
| <i>Data Source: BRFSS (2011-2014)</i>                                  |       |                          |       |                  |

**Table 2.9. Consumed vegetables less than 1 time per day**

|  | 2011  | 2012                     | 2013  | 2014             |
|--|-------|--------------------------|-------|------------------|
| <b>South Heartland</b>   | 27.1% | -                        | 24.8% | -                |
| <b>Nebraska</b>  | 26.2% | -                        | 23.3% | -                |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</u> |       |                          |       |                  |
| White, non-Hispanic: 25.0%   |       | Minority: 35.8%          |       |                  |
| <u>South Heartland Income Comparison (2011-2014, combined):</u>        |       |                          |       |                  |
| <\$25,000: 31.2%*  |       | \$25,000-\$49,999: 30.8% |       | \$50,000+: 14.3% |
| <i>Data Source: BRFSS (2011-2014)</i>                                  |       |                          |       |                  |

\*Statistically significant difference between "low income" (<\$25,000) and higher income (\$50,000+).

**Table 2.10. Overweight or obese (BMI = 25 or higher)**

|  | 2011  | 2012                     | 2013  | 2014             |
|--|-------|--------------------------|-------|------------------|
| <b>South Heartland</b>   | 63.2% | 68.7%                    | 63.5% | 69.4%            |
| <b>Nebraska</b>  | 69.4% | 65.0%                    | 65.5% | 66.7%            |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined):</u> |       |                          |       |                  |
| White, non-Hispanic: 67.3%   |       | Minority: 62.7%          |       |                  |
| <u>South Heartland Income Comparison (2011-2014, combined):</u>        |       |                          |       |                  |
| <\$25,000: 64.9%   |       | \$25,000-\$49,999: 73.0% |       | \$50,000+: 64.0% |
| <i>Data Source: BRFSS (2011-2014)</i>                                  |       |                          |       |                  |

| <b>Table 2.11. Obese (BMI = 30 or higher)</b>  |             |                          |                  |             |
|--|-------------|--------------------------|------------------|-------------|
|  | <b>2011</b> | <b>2012</b>              | <b>2013</b>      | <b>2014</b> |
| <b>South Heartland</b>   | 29.6%       | 30.6%                    | 26.3%            | 34.6%       |
| <b>Nebraska</b>  | 28.4%       | 28.6%                    | 29.6%            | 30.3%       |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |             |                          |                  |             |
| White, non-Hispanic: 30.9%   |             | Minority: 31.0%          |                  |             |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |             |                          |                  |             |
| <\$25,000: 35.6%*  |             | \$25,000-\$49,999: 33.4% | \$50,000+: 25.7% |             |
| <i>Data Source: BRFSS (2011-2014)</i>  |             |                          |                  |             |

\*Statistically significant difference between “low income” (<\$25,000) and higher income (\$50,000+).

| <b>Table 2.12. Ever told they have diabetes (excluding pregnancy)</b>                |             |                         |                 |             |
|--|-------------|-------------------------|-----------------|-------------|
|  | <b>2011</b> | <b>2012</b>             | <b>2013</b>     | <b>2014</b> |
| <b>South Heartland</b>   | 7.8%        | 9.4%                    | 11.8%           | 10.8%       |
| <b>Nebraska</b>  | 8.4%        | 8.1%                    | 9.2%            | 9.2%        |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |             |                         |                 |             |
| White, non-Hispanic: 8.1%  |             | Minority: 13.2%         |                 |             |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |             |                         |                 |             |
| <\$25,000: 13.6%*  |             | \$25,000-\$49,999: 7.6% | \$50,000+: 5.2% |             |
| <i>Data Source: BRFSS (2011-2014)</i>  |             |                         |                 |             |

\*Statistically significant difference between “low income” (<\$25,000) and other income categories.

| <b>Table 2.13. Ever told they had a heart attack or coronary heart disease</b>       |             |                         |                 |             |
|--|-------------|-------------------------|-----------------|-------------|
|  | <b>2011</b> | <b>2012</b>             | <b>2013</b>     | <b>2014</b> |
| <b>South Heartland</b>   | 6.3%        | 8.5%                    | 9.1%*           | 8.0%*       |
| <b>Nebraska</b>  | 5.9%        | 6.0%                    | 5.9%            | 5.8%        |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |             |                         |                 |             |
| White, non-Hispanic: 6.6%  |             | Minority: 5.8%          |                 |             |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |             |                         |                 |             |
| <\$25,000: 11.5%*  |             | \$25,000-\$49,999: 7.4% | \$50,000+: 4.5% |             |
| <i>Data Source: BRFSS (2011-2014)</i>  |             |                         |                 |             |

\*Statistically significant difference between South Heartland and Nebraska, and between “low income” (<\$25,000) and higher income (\$50,000+).

**Table 2.14. Ever told they had a stroke**

|  | <b>2011</b> | <b>2012</b>             | <b>2013</b>     | <b>2014</b> |
|--|-------------|-------------------------|-----------------|-------------|
| <b>South Heartland</b>   | 3.2%        | 3.4%                    | 5.8%*           | 2.8%        |
| <b>Nebraska</b>  | 2.6%        | 2.4%                    | 2.5%            | 2.6%        |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</u> |             |                         |                 |             |
| White, non-Hispanic: 3.1%  |             | Minority: 5.4%          |                 |             |
| <u>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</u>        |             |                         |                 |             |
| <\$25,000: 6.4%*   |             | \$25,000-\$49,999: 3.0% | \$50,000+: 1.4% |             |
| <i>Data Source: BRFSS (2011-2014)</i>  |             |                         |                 |             |

\*Statistically significant difference between South Heartland and Nebraska, and between "low income" (<\$25,000) and higher income (\$50,000+).

**Table 2.15. Met aerobic physical activity recommendation**

|  | <b>2011</b> | <b>2012</b>              | <b>2013</b>      | <b>2014</b> |
|--|-------------|--------------------------|------------------|-------------|
| <b>South Heartland</b>   | 49.1%       | -                        | 46.2%            | -           |
| <b>Nebraska</b>  | 49.0%       | -                        | 50.1%            | -           |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</u> |             |                          |                  |             |
| White, non-Hispanic: 47.0%   |             | Minority: 41.3%          |                  |             |
| <u>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</u>        |             |                          |                  |             |
| <\$25,000: 43.6%   |             | \$25,000-\$49,999: 48.1% | \$50,000+: 52.4% |             |
| <i>Data Source: BRFSS (2011-2014)</i>  |             |                          |                  |             |

**Table 2.16. Met muscle strengthening recommendation**

|  | <b>2011</b> | <b>2012</b>              | <b>2013</b>      | <b>2014</b> |
|--|-------------|--------------------------|------------------|-------------|
| <b>South Heartland</b>   | 24.2%       | -                        | 22.7%            | -           |
| <b>Nebraska</b>  | 28.1%       | -                        | 28.4%            | -           |
| <u>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</u> |             |                          |                  |             |
| White, non-Hispanic: 24.0%   |             | Minority: 20.3%          |                  |             |
| <u>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</u>        |             |                          |                  |             |
| <\$25,000: 23.7%   |             | \$25,000-\$49,999: 19.6% | \$50,000+: 30.1% |             |
| <i>Data Source: BRFSS (2011-2014)</i>  |             |                          |                  |             |

**Table 2.17. Met both aerobic physical activity and muscle strengthening recommendations**

|  | 2011  | 2012                     | 2013  | 2014             |
|--|-------|--------------------------|-------|------------------|
| <b>South Heartland</b>   | 17.4% | -                        | 14.1% | -                |
| <b>Nebraska</b>  | 19.0% | -                        | 18.8% | -                |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |       |                          |       |                  |
| White, non-Hispanic: 15.7%   |       | Minority: 15.4%          |       |                  |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |       |                          |       |                  |
| <\$25,000: 16.4%   |       | \$25,000-\$49,999: 13.5% |       | \$50,000+: 18.0% |
| <i>Data Source: BRFSS (2011-2014)</i>  |       |                          |       |                  |

**Table 2.18. Had blood pressure checked in past year**

|  | 2011 | 2012                     | 2013  | 2014             |
|--|------|--------------------------|-------|------------------|
| <b>South Heartland</b>   | -    | -                        | 85.0% | -                |
| <b>Nebraska</b>  | -    | -                        | 84.6% | -                |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |      |                          |       |                  |
| White, non-Hispanic: 86.4%   |      | Minority: - °            |       |                  |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |      |                          |       |                  |
| <\$25,000: 90.0%   |      | \$25,000-\$49,999: 86.0% |       | \$50,000+: 82.2% |
| <i>Data Source: BRFSS (2011-2014)</i>  |      |                          |       |                  |

\*Rate masked. Sample size smaller than 50 respondents.

**Table 2.19. Ever told they have high blood pressure (excluding pregnancy)**

|  | 2011   | 2012                     | 2013  | 2014             |
|--|--------|--------------------------|-------|------------------|
| <b>South Heartland</b>   | 35.7%* | -                        | 35.9% | -                |
| <b>Nebraska</b>  | 28.5%  | -                        | 30.3% | -                |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |        |                          |       |                  |
| White, non-Hispanic: 32.3%   |        | Minority: 34.8%          |       |                  |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |        |                          |       |                  |
| <\$25,000: 40.6%*  |        | \$25,000-\$49,999: 36.7% |       | \$50,000+: 23.6% |
| <i>Data Source: BRFSS (2011-2014)</i>  |        |                          |       |                  |

\*Statistically significant difference between South Heartland and Nebraska, and between "low income" (<\$25,000) and higher income (\$50,000+).



**Table 2.20. Had cholesterol checked in the past 5 years**

|  | 2011  | 2012               | 2013            | 2014             |
|--|-------|--------------------|-----------------|------------------|
| <b>South Heartland</b>   | 73.7% | -                  | 74.7%           | -                |
| <b>Nebraska</b>  | 71.8% | -                  | 74.0%           | -                |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |       |                    |                 |                  |
| White, non-Hispanic:   | 73.8% |                    | Minority: 56.0% |                  |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |       |                    |                 |                  |
| <\$25,000:   | 63.7% | \$25,000-\$49,999: | 78.4%           | \$50,000+: 72.0% |
| <i>Data Source: BRFSS (2011-2014)</i>  |       |                    |                 |                  |

\*Statistically significant difference between minority and White, NH.

**Table 2.21. Ever told they have high cholesterol, among those who have ever had it checked**

|  | 2011  | 2012               | 2013          | 2014             |
|--|-------|--------------------|---------------|------------------|
| <b>South Heartland</b>   | 41.4% | -                  | 43.2%         | -                |
| <b>Nebraska</b>  | 38.3% | -                  | 37.4%         | -                |
| <i>South Heartland Racial/Ethnic Comparison (2011-2014, combined, age-adjusted):</i> |       |                    |               |                  |
| White, non-Hispanic:   | 33.3% |                    | Minority: - ° |                  |
| <i>South Heartland Income Comparison (2011-2014, combined, age-adjusted):</i>        |       |                    |               |                  |
| <\$25,000:   | 40.8% | \$25,000-\$49,999: | 34.6%         | \$50,000+: 33.3% |
| <i>Data Source: BRFSS (2011-2014)</i>  |       |                    |               |                  |

°Rate masked. Sample size smaller than 50 respondents.

## Section III: Community Survey Results

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The South Heartland District Health Department Community Survey is a broad survey covering numerous public health and community issues in the areas of the healthcare system, supports for raising children, supports for older adults, recreational and leisure options, jobs and the economy, housing, safety and social support, health issues and risky behaviors, and alcohol use and prevention. Results from the survey will be used to gauge community needs and will help set priorities for improving the overall health of the population within the district.

The Community Survey was distributed across the four counties within the district (Webster, Adams, Nuckolls, and Clay). The survey was conducted online via SurveyMonkey and was promoted by various health clinics and hospitals. The survey was conducted in both English and Spanish, with a large proportion of the Spanish surveys conducted on paper.

Results from Adams and Nuckolls Counties are presented here, along with the overall results. Due to the small sample size, survey results from Webster and Clay Counties are not able to be presented with any reliability. See the appendix for the results from Webster and Clay Counties.

Below is some basic information about the survey response. For more details about respondent demographics, see the end of this section.

### Total Number of Respondents: 635

| Table 3.1    | County (n=561) |               |              |                    |  |
|--------------|----------------|---------------|--------------|--------------------|--|
| Webster      | Adams          | Nuckolls      | Clay         | County Unspecified |  |
| 8.2%         | 63.1%          | 18.7%         | 10.0%        | -                  |  |
| 46 responses | 354 responses  | 105 responses | 56 responses | 74 responses       |  |

Note: those who did not specify a county are still included in the South Heartland total.

| Table 3.2     | Language (n=635) |  |
|---------------|------------------|--|
| English       | Spanish          |  |
| 91.5%         | 8.5%             |  |
| 581 responses | 54 responses     |  |

## The Healthcare System

### Discussion

In general, a strong majority (80% or more) of respondents from Adams and Nuckolls Counties perceive that basic health care services (hospitals, doctor’s offices, etc.) are available in their community (Tables 3.3 and 3.4), and most (80.0% or more) perceive that the health care services in their community are excellent (Table 3.5).

However, less than three fifths of respondents from Adams and Nuckolls Counties perceive that there are enough medical specialists available (Table 3.6), and a minority of respondents (37.9% from Adams County and just 16.2% from Nuckolls County) perceive that there are enough behavioral health services in their community (Table 3.7).

The cost of medical care is a strong barrier for many individuals in the South Heartland District. Approximately half (50.6%) of respondents from Adams County and 56.2% of respondents from Nuckolls County agreed or strongly agreed that sometimes the cost of medical care prevents them from getting the care they need for themselves or their immediate family (Table 3.9). Additional barriers to health care include language or cultural barriers, indicated by 81.5% of Spanish speaking respondents to the survey (Table 3.11); and inconvenient hours of operation at doctor’s offices and health clinics, indicated by 44.6% of all South Heartland respondents (Table 3.12).

The majority of respondents indicated that they have a personal doctor or health care provider (84.9% in Adams County and 94.3% in Nuckolls County) and a personal dentist (84.1% in Adams County and 76.2% in Nuckolls County (Tables 3.15 and 3.18).

### Results

| Table 3.3   | There are enough hospitals, emergency rooms, urgent care clinics and so forth available: |                 |                                  |
|---|--|-----------------|----------------------------------|
|   | % Agree or Strongly Agree*   |                 |                                  |
|   | Adams County   | Nuckolls County | South Heartland (4-County Total) |
| In my community (town/city closest to where I live) | 89.3% (n=354)  | 87.6% (n=105)   | 83.5% (n=635)                    |
| In my county (county where I live)                  | 85.6% (n=354)  | 80.0% (n=105)   | 78.7% (n=635)                    |
| In my region (within 1 hour drive from my home)     | 87.6% (n=354)  | 86.7% (n=105)   | 88.5% (n=635)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.4</b>   | <b>There are enough doctor's offices, health clinics and so forth available:</b> |                        |   |
|--|--|------------------------|---|
| <b>% Agree or Strongly Agree*</b>                          |  |                        |   |
|  | <b>Adams County</b>  | <b>Nuckolls County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community (town/city closest to where I live)</b> | 85.9% (n=354)  | 80.0% (n=105)          | 80.2% (n=635)                           |
| <b>In my county (county where I live)</b>                  | 80.2% (n=354)  | 79.0% (n=105)          | 75.9% (n=635)                           |
| <b>In my region (within 1 hour drive from my home)</b>     | 82.5% (n=354)  | 84.8% (n=105)          | 84.6% (n=635)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.5</b>                     | <b>The health care services that are available:</b> |                        |   |
|--------------------------------------|---|------------------------|---|
| <b>% Agree or Strongly Agree*</b>    |   |                        |   |
|                                      | <b>Adams County</b>                                 | <b>Nuckolls County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community are excellent</b> | 85.6% (n=354)                                       | 82.7% (n=104)          | 81.2% (n=626)                           |
| <b>In my county are excellent</b>    | 81.8% (n=352)                                       | 85.7% (n=105)          | 77.9% (n=628)                           |
| <b>In my region are excellent</b>    | 81.0% (n=348)                                       | 84.8% (n=105)          | 81.9% (n=626)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.6</b>                                       | <b>There are enough medical specialists available:</b> |                        |   |
|--|--|------------------------|---|
| <b>% Agree or Strongly Agree*</b>                      |  |                        |   |
|  | <b>Adams County</b>                                    | <b>Nuckolls County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community</b>                                 | 57.3% (n=354)  | 56.2% (n=105)          | 53.9% (n=635)                           |
| <b>In my county</b>                                    | 54.0% (n=354)  | 58.1% (n=105)          | 52.8% (n=635)                           |
| <b>In my region (within 1 hour drive from my home)</b> | 63.8% (n=354)  | 76.2% (n=105)          | 69.4% (n=635)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.7</b>                                       | <b>There are enough behavioral health services (counselors, licensed mental health practitioners):</b> |                        |   |
|--|--|------------------------|---|
| <b>% Agree or Strongly Agree*</b>                      |  |                        |   |
|  | <b>Adams County</b>  | <b>Nuckolls County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community</b>                                 | 37.9% (n=354)  | 16.2% (n=105)          | 31.3% (n=635)                           |
| <b>In my county</b>                                    | 34.7% (n=354)  | 15.2% (n=105)          | 29.3% (n=635)                           |
| <b>In my region (within 1 hour drive from my home)</b> | 40.7% (n=354)  | 32.4% (n=105)          | 41.7% (n=635)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.8</b>   | <b>The hospital care being provided:</b> |                        |   |
|--|--|------------------------|---|
| <b>% Agree or Strongly Agree*</b>                                    |  |                        |   |
|  | <b>Adams County</b>                      | <b>Nuckolls County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community are excellent</b>                                 | 85.3% (n=353)                            | 84.0% (n=100)          | 81.1% (n=610)                           |
| <b>In my county are excellent</b>                                    | 80.7% (n=352)                            | 79.8% (n=104)          | 75.9% (n=618)                           |
| <b>In my region (within 1 hour drive from my home) are excellent</b> | 74.9% (n=350)                            | 81.9% (n=105)          | 78.2% (n=629)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.9</b>                  | <b>Sometimes the cost of medical care prevents me from getting the care I need for myself or my immediate family.</b> |   |  |
|-----------------------------------|---|---|--|
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 50.6% (n=354)                     | 56.2% (n=105)   | 52.0% (n=635)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.10</b>                 | <b>Sometimes language or cultural barriers prevent me from getting the care I need for myself or my immediate family.</b> |                         |   |
|-----------------------------------|---|-------------------------|---|
| <b>% Agree or Strongly Agree*</b> |   |                         |   |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>Spanish Speakers</b> | <b>South Heartland (4-County Total)</b> |
| 13.0% (n=354)                     | 0.0% (n=105)  | 81.5% (n=54)            | 10.4% (n=635)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.11</b>                 | <b>Sometimes I have difficulty finding transportation to health care providers.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland<br/>(4-County Total)</b> |  |
| 10.2% (n=354)                     | 3.8% (n=105)  | 9.9% (n=635)                                |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>Table 3.12</b>                 | <b>The regular hours of operation at doctor's offices and health clinics are sometimes not convenient for scheduling care for myself or my immediate family.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>   | <b>South Heartland<br/>(4-County Total)</b> |  |
| 48.0% (n=354)                     | 32.4% (n=105)  | 44.6% (n=635)                               |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|  |   |                        |   |  |
|--|---|------------------------|---|--|
| <b>Table 3.13</b>                                      | <b>During the past 12 months, I have personally received health care services at a hospital or emergency room located</b> |                        |   |  |
| <b>% Yes*</b>  |   |                        |   |  |
|  | <b>Adams County</b>   | <b>Nuckolls County</b> | <b>South Heartland<br/>(4-County Total)</b> |  |
| <b>In my county</b>                                    | 44.0% (n=352)   | 43.8% (n=105)          | 38.7% (n=633)                               |  |
| <b>In my region (within 1 hour drive from my home)</b> | 25.9% (n=352)   | 27.6% (n=105)          | 26.7% (n=632)                               |  |

\*Response options: yes, no

|  |   |                        |   |  |
|--|---|------------------------|---|--|
| <b>Table 3.14</b>                                      | <b>During the past 12 months, I have personally received health care services at a doctor's office, health clinic, or health department located</b> |                        |   |  |
| <b>% Yes*</b>  |   |                        |   |  |
|  | <b>Adams County</b>   | <b>Nuckolls County</b> | <b>South Heartland<br/>(4-County Total)</b> |  |
| <b>In my community</b>                                 | 84.9% (n=350)   | 82.2% (n=101)          | 77.1% (n=612)                               |  |
| <b>In my county</b>                                    | 66.5% (n=316)   | 64.4% (n=101)          | 60.8% (n=579)                               |  |
| <b>In my region (within 1 hour drive from my home)</b> | 54.7% (n=307)   | 51.5% (n=99)           | 56.0% (n=568)                               |  |

\*Response options: yes, no

| Table 3.15    | I have one person I think of as my personal doctor or health care provider (my medical “home” where I go for most health care needs) |                                  |  |
|---------------|--|----------------------------------|--|
| % Yes*        |  |                                  |  |
| Adams County  | Nuckolls County  | South Heartland (4-County Total) |  |
| 84.9% (n=352) | 94.3% (n=105)  | 85.8% (n=632)                    |  |

\*Response options: yes, no

| Table 3.16                                      | [If responded “no” the preceding question]<br>Instead, when I need them I receive my health care services from (check all that apply): |  |
|---|--|--|
|   | South Heartland (4-County Total) (n=72)  |  |
| Free clinics                                    | 12.5%  |  |
| Community Health Center                         | 26.4%  |  |
| Health Department / Immunization Clinic         | 13.9%  |  |
| Family Planning Agency                          | 8.3%   |  |
| Emergency Room at a hospital                    | 9.7%   |  |
| Urgent Care Clinic                              | 25.0%  |  |
| Chiropractor                                    | 16.7%  |  |
| I delay care as long as possible or refuse care | 40.3%  |  |
| Other   | 22.2%  |  |

| Table 3.17                                      | During the past 12 months, I have personally received dental care services at a dental clinic located |                 |                                  |  |
|---|---|-----------------|----------------------------------|--|
| % Yes*  |   |                 |                                  |  |
|   | Adams County  | Nuckolls County | South Heartland (4-County Total) |  |
| In my community                                 | 64.9% (n=353)   | 36.2% (n=105)   | 51.8% (n=633)                    |  |
| In my county                                    | 47.0% (n=351)   | 40.0% (n=105)   | 39.9% (n=631)                    |  |
| In my region (within 1 hour drive from my home) | 47.7% (n=352)   | 45.7% (n=105)   | 51.2% (n=633)                    |  |

\*Response options: yes, no

| <b>Table 3.18</b>   | <b>I have one person I think of as my personal dentist</b> |   |  |
|---------------------|--|---|--|
| <b>% Yes*</b>       |  |   |  |
| <b>Adams County</b> | <b>Nuckolls County</b>                                     | <b>South Heartland (4-County Total)</b> |  |
| 84.1% (n=353)       | 76.2% (n=105)  | 81.7% (n=633)                           |  |

\*Response options: yes, no

| <b>Table 3.19</b>                                      | <b>During the past 12 months, I have personally received behavioral health services (counseling, life coaching, etc.)</b> |                        |   |  |
|--|---|------------------------|---|--|
| <b>% Yes*</b>  |   |                        |   |  |
|  | <b>Adams County</b>   | <b>Nuckolls County</b> | <b>South Heartland (4-County Total)</b> |  |
| <b>In my community</b>                                 | 8.5% (n=354)  | 2.9% (n=105)           | 7.6% (n=635)                            |  |
| <b>In my county</b>                                    | 6.3% (n=351)  | 2.9% (n=105)           | 5.9% (n=631)                            |  |
| <b>In my region (within 1 hour drive from my home)</b> | 9.7% (n=351)  | 4.8% (n=105)           | 8.9% (n=631)                            |  |

\*Response options: yes, no



## Supports for Raising Children

### Discussion

The vast majority of respondents agreed or strongly agreed with the statement: my community is a good place to raise children (93.4% in Adams County and 91.3% in Nuckolls County) (Table 3.20). Yet, safe and affordable childcare is an issue for many respondents, especially in Nuckolls County where just 51.7% feel that there is safe childcare available in their community and just 39.4% feel that there is affordable childcare in their community. In Adams County, just 48.6% of respondents felt that there is affordable childcare in their community (Tables 3.21 and 3.22).

Approximately three-fourths of respondents from both Adams and Nuckolls Counties feel satisfied with the school system in their community (Table 3.23), yet just around half or fewer of respondents from both counties feel that there are adequate after school opportunities for children (Tables 3.24 and 3.25).

Two out of five (39.4%) respondents from Nuckolls County agree or strongly agree that there are adequate recreation opportunities for children in their community; 56.1% of respondents from Adams County agreed or strongly agreed with this statement (Table 3.26).

### Results

| Table 3.20                 | My community is a good place to raise children. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Adams County               | Nuckolls County                                 | South Heartland (4-County Total) |  |
| 93.4% (n=347)              | 91.3% (n=104)                                   | 91.8% (n=598)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.21                 | Safe childcare is available in my community. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Adams County               | Nuckolls County                              | South Heartland (4-County Total) |  |
| 81.2% (n=313)              | 51.7% (n=98)                                 | 74.8% (n=540)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.22</b>                 | <b>Affordable childcare is available in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>                                    | <b>South Heartland (4-County Total)</b> |  |
| 48.6% (n=290)                     | 39.4% (n=94)  | 48.5% (n=503)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.23</b>                 | <b>I am satisfied with the school system in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 77.2% (n=324)                     | 73.2% (n=97)  | 75.4% (n=565)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.24</b>                 | <b>There are adequate after school opportunities for elementary age children (including those run by schools and community groups).</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 50.2% (n=287)                     | 32.6% (n=89)  | 46.2% (n=509)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.25</b>                 | <b>There are adequate after school opportunities for middle and high school age students (sports teams, clubs, groups, etc.).</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 54.9% (n=295)                     | 50.5% (n=91)  | 56.0% (n=525)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>Table 3.26</b>                 | <b>There are adequate recreation opportunities for children and youth in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 56.1% (n=312)                     | 39.4% (n=99)   | 50.3% (n=553)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Supports for Older Adults

### Discussion

A strong majority (over 80%) of respondents from both Adams and Nuckolls County agreed or strongly agreed that their community is a good place to grow old (Table 3.27). However, respondents from Nuckolls County generally perceived a lack of adequate recreation opportunities for older adults (Table 3.28), housing options for older adults (Table 3.29), adequate transportation for older adults, and services such as social clubs, social services, and groups for older adults (Table 3.32), with less than half of respondents from Nuckolls County agreeing or strongly agreeing that these are available in their community.

Respondents from Adams County also perceived a lack of availability of services and supports for older adults in their community. Less than half of the respondents from Adams County perceived the availability of adequate transportation for older adults (Table 3.30), programs that provide meals for older adults (Table 3.31), and services such as social clubs, social services, and groups for older adults (Table 3.32).

### Results

| Table 3.27                 | This community is a good place to grow old. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Adams County               | Nuckolls County                             | South Heartland (4-County Total) |  |
| 81.6% (n=342)              | 81.0% (n=105)                               | 81.6% (n=587)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.28                 | There are adequate recreation and exercise opportunities (parks, trails, fitness centers) for older adults in my community. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Adams County               | Nuckolls County   | South Heartland (4-County Total) |  |
| 71.2% (n=340)              | 33.0% (n=103)   | 58.7% (n=583)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>Table 3.29</b>                 | <b>There are adequate housing options (assisted living, retirement centers, maintenance-free homes/apartments) for older adults in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 61.2% (n=307)                     | 47.1% (n=102)  | 55.8% (n=538)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.30</b>                 | <b>There are adequate transportation options (public buses, shuttles, handi-vans, taxis) available to take older adults to medical facilities and shopping.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 31.7% (n=309)                     | 43.0% (n=100)   | 34.9% (n=539)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.31</b>                 | <b>There are adequate programs that provide meals for older adults in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 47.1% (n=276)                     | 51.1% (n=88)  | 49.4% (n=478)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>Table 3.32</b>                 | <b>There are a range of available services (social clubs, social services, groups) in my community for older adults that are living alone.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 37.3% (n=263)                     | 21.8% (n=87)   | 33.9% (n=460)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |                        |   |
|-----------------------------------|--|------------------------|---|
| <b>Table 3.33</b>                 | <b>There are adequate local options (residential care, intermediate and skilled nursing homes) for persons who need long-term care services.</b> |                        |   |
| <b>% Agree or Strongly Agree*</b> |  |                        |   |
| <b>Adams County</b>               |  | <b>Nuckolls County</b> | <b>South Heartland<br/>(4-County Total)</b> |
| 51.5%                             | (n=291)  | 57.6%                  | (n=99)                                      |
|                                   |  | 50.6%                  | (n=514)                                     |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Recreational and Leisure Options

### Discussion

Compared to respondents from Adams County, respondents from Nuckolls County hold the perception that there are fewer opportunities for recreation and leisure in their community. More than four-fifths (82.4%) of respondents from Adams County agreed or strongly agreed that there are adequate places to exercise and play in their community, compared to just 39.4% for Nuckolls County (Table 3.34).

Less than half of respondents from Adams County perceived that there are adequate cultural events and leisure time activities in their community. However, the perception of the availability of such activities was still notably higher in Adams County compared to Nuckolls County (Tables 3.35 and 3.36).

### Results

| Table 3.34                 | There are adequate places to exercise and play in my community (parks, walking/biking trails, swimming pools, gyms, fitness centers, and so forth). |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Adams County               | Nuckolls County   | South Heartland (4-County Total) |  |
| 82.4% (n=353)              | 39.4% (n=104)   | 69.9% (n=585)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.35                 | There are adequate music, art, theater, and cultural events in my community. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Adams County               | Nuckolls County  | South Heartland (4-County Total) |  |
| 49.4% (n=336)              | 7.7% (n=104)   | 37.6% (n=569)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.36</b>                 | <b>There are adequate organized leisure time activities available in my community (such as groups, clubs, teams, and other social activities).</b> |                        |   |
|-----------------------------------|--|------------------------|---|
| <b>% Agree or Strongly Agree*</b> |  |                        |   |
|                                   | <b>Adams County</b>  | <b>Nuckolls County</b> | <b>South Heartland (4-County Total)</b> |
| <b>For young adults</b>           | 44.8% (n=306)  | 19.8% (n=96)           | 37.2% (n=527)                           |
| <b>For middle-aged adults</b>     | 41.9% (n=313)  | 16.5% (n=97)           | 35.1% (n=533)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Jobs and the Economy

### Discussion

Respondents from Adams County were again substantially more positive about jobs and the economy in their community compared to respondents from Nuckolls County, with 54.5% agreeing or strongly agreeing that there are enough jobs located in town or a short drive away, compared to 23.0% for Nuckolls County (Table 3.38). Over half of respondents (55.8%) from Adams County agreed or strongly agreed that there are opportunities for employment advancement in the region (within a one hour drive), compared to 33.0% among Nuckolls County respondents (Table 3.38).

While just half (50.6%) of respondents from Adams County perceive the economy as being strong in their community, only 16.5% of respondents from Nuckolls County perceive the same (Table 3.41).

### Results

| Table 3.37   | For people living in my community, there are enough jobs |         |                 |         |                                  |
|--|--|---------|-----------------|---------|----------------------------------|
| % Agree or Strongly Agree*                                   |  |         |                 |         |                                  |
|  | Adams County   |         | Nuckolls County |         | South Heartland (4-County Total) |
| Located in town or a short drive away                        | 54.5%  | (n=334) | 23.0%           | (n=100) | 43.6% (n=548)                    |
| Located within the county                                    | 49.5%  | (n=325) | 27.0%           | (n=100) | 41.4% (n=536)                    |
| Located within the region (within 1 hour drive from my home) | 59.8%  | (n=323) | 48.9%           | (n=94)  | 59.9% (n=529)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.38                                      | There are opportunities for employment advancement (promotions, job training, higher education) |         |                 |         |                                  |
|---|---|---------|-----------------|---------|----------------------------------|
| % Agree or Strongly Agree*                      |   |         |                 |         |                                  |
|   | Adams County  |         | Nuckolls County |         | South Heartland (4-County Total) |
| In my community                                 | 48.8%   | (n=320) | 11.0%           | (n=100) | 35.1% (n=535)                    |
| In my county                                    | 45.4%   | (n=306) | 8.1%            | (n=99)  | 32.3% (n=520)                    |
| In my region (within 1 hour drive from my home) | 55.8%   | (n=303) | 33.0%           | (n=94)  | 40.1% (n=529)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree



|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.39</b>                 | <b>Jobs in my county are “family friendly” (allow for flexible scheduling, reasonable hours, health insurance, and so forth).</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 44.4% (n=324)                     | 32.3% (n=99)  | 40.1% (n=529)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.40</b>                 | <b>My employer encourages/promotes healthy behaviors.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>                                    | <b>South Heartland (4-County Total)</b> |  |
| 84.1% (n=345)                     | 82.9% (n=105)   | 81.5% (n=561)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table 3.41</b>                 | <b>The economy is strong in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Adams County</b>               | <b>Nuckolls County</b>                        | <b>South Heartland (4-County Total)</b> |  |
| 50.6% (n=332)                     | 16.5% (n=103)                                 | 41.0% (n=549)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Housing

### Discussion

Quality housing that is affordable was generally not strongly perceived as being available in their community by most respondents. Overall, around one-fourth of respondents perceived that there is enough quality housing in their community and that quality housing in their community is affordable for the average person. Again, responses were more positive in Adams County compared to Nuckolls County (Tables 3.42 and 3.43).

### Results

| <b>Table 3.42</b>                 | <b>There is enough quality housing available in my community, including homes and apartments.</b> |   |         |
|-----------------------------------|---|---|---------|
| <b>% Agree or Strongly Agree*</b> |   |   |         |
| <b>Adams County</b>               | <b>Nuckolls County</b>  | <b>South Heartland (4-County Total)</b> |         |
| 31.0% (n=329)                     | 19.6% (n=97)  | 27.1%                                   | (n=542) |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table 3.43</b>                 | <b>Quality housing in my community is affordable for the average person.</b> |   |         |
|-----------------------------------|--|---|---------|
| <b>% Agree or Strongly Agree*</b> |  |   |         |
| <b>Adams County</b>               | <b>Nuckolls County</b>   | <b>South Heartland (4-County Total)</b> |         |
| 22.0% (n=323)                     | 17.2% (n=93)   | 23.5%                                   | (n=531) |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Safety and Social Support

### Discussion

Nearly 90% of all respondents perceive their community as a safe place to live, work, and play (Table 3.44). Among respondents from Adams County, 70.4% perceived the availability of social networks (compared to 60.4% for Nuckolls County) (Table 3.45).

Respondents from Nuckolls County generally appear to perceive a lack of volunteers in their community, with just 19.1% agreeing or strongly agreeing that there are an adequate number of volunteers to fill the volunteer needs of their community (compared to 41.6% for Adams County) (Table 3.46).

### Results

| Table 3.44                 | My community is a safe place to live, work, and play. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Adams County               | Nuckolls County                                       | South Heartland (4-County Total) |  |
| 88.4% (n=354)              | 81.7% (n=104)   | 87.0% (n=576)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.45                 | There are support networks in my community that help during times of stress and need (neighbors, support groups, faith community outreach, community organizations, etc.). |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Adams County               | Nuckolls County  | South Heartland (4-County Total) |  |
| 70.4% (n=324)              | 60.4% (n=96)   | 67.2% (n=527)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.46                 | There are an adequate number of volunteers to fill the volunteer needs in my community. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Adams County               | Nuckolls County   | South Heartland (4-County Total) |  |
| 41.6% (n=298)              | 19.1% (n=94)  | 37.3% (n=499)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Health Issues and Risky Behaviors

### Discussion

Among all respondents, the top five risky behaviors that have the most impact on the health and well-being of their community were perceived as (1) alcohol abuse, (2) distracted driving, (3) drug abuse, (4) poor eating habits, (5) not enough exercise. The most notable difference between Nuckolls and Adams Counties was the perception among a strong contingent of respondents from Nuckolls County that tobacco use one of the top risky behaviors in terms of impact on the health and well-being of their community (Table 3.47).

Across the four-county South Heartland region, the top five most troubling health-related problems were: (1) overweight/obesity, (2) mental health issues (including depression), (3) cancers, (4) addictions, and (5) aging problems (arthritis, hearing/vision loss, falls). There were some differences between Adams and Nuckolls Counties, with respondents from Nuckolls County tending to favor aging problems and cancers as the most troubling health problems, and respondents from Adams County tending to favor mental health issues and overweight/obesity (Table 3.48).

### Results

| Table 3.47   | From the following list, choose 3 risky behaviors that you think have the most impact of health and well-being in your community? Choose only 3 |                         |  |
|--|---|-------------------------|--|
|  | Adams County (n=354)  | Nuckolls County (n=105) | South Heartland (4-County Total) (n=572) |
| Alcohol abuse  | 45.8%   | 51.4%                   | 48.1%                                    |
| Distracted driving (cell phone use, texting, etc.)   | 44.4%   | 31.4%                   | 41.4%                                    |
| Drug abuse   | 42.9%   | 42.9%                   | 40.7%                                    |
| Poor eating habits                                   | 36.2%   | 31.4%                   | 34.4%                                    |
| Not enough exercise                                  | 35.0%   | 39.0%                   | 34.3%                                    |
| Tobacco use (including smokeless tobacco)            | 18.4%   | 39.0%                   | 23.8%                                    |
| Drunk driving  | 16.1%   | 14.3%                   | 16.3%                                    |
| Avoiding routine visits to health professional       | 10.2%   | 16.2%                   | 11.4%                                    |
| Not managing stress                                  | 11.0%   | 9.5%                    | 10.8%                                    |
| Not using seatbelts                                  | 8.5%  | 7.6%                    | 9.8%                                     |
| Violence (domestic violence, fighting, etc.)         | 10.7%   | 3.8%                    | 8.6%                                     |
| Unsafe sex   | 9.3%  | 2.9%                    | 7.9%                                     |
| Not getting vaccine "shots" to prevent disease       | 6.8%  | 4.8%                    | 6.5%                                     |
| Not using child safety seat (or not using correctly) | 3.4%  | 3.8%                    | 4.7%                                     |

| Table 3.48  | Thinking about what you know from your personal experience and/or the experiences of others you know, what do you think are the 3 most troubling health-related problems in your community? (Choose ONLY 3) |                            |  |
|---|---|----------------------------|--|
|   | Adams County<br>(n=354)   | Nuckolls County<br>(n=105) | South Heartland<br>(4-County Total)<br>(n=577) |
| Overweight/obesity  | 52.8%   | 45.7%                      | 51.6%  |
| Mental health issues (including depression)   | 52.8%   | 36.2%                      | 45.2%  |
| Cancers   | 32.2%   | 54.3%                      | 36.6%  |
| Addictions  | 38.7%   | 34.3%                      | 35.7%  |
| Aging problems (arthritis, hearing/vision loss, falls)  | 19.2%   | 42.9%                      | 26.5%  |
| Diabetes  | 22.3%   | 18.1%                      | 21.5%  |
| Heart disease   | 14.1%   | 19.0%                      | 15.3%  |
| High blood pressure   | 6.2%  | 11.4%                      | 9.0%   |
| Poor dental health  | 9.3%  | 2.9%                       | 8.3%   |
| Child abuse or neglect  | 8.8%  | 6.7%                       | 7.5%   |
| Teenage pregnancy   | 8.8%  | 0.0%                       | 6.8%   |
| Injuries (from crashes, falls, violence, etc.)  | 4.2%  | 6.7%                       | 6.6%   |
| Domestic violence   | 6.8%  | 1.0%                       | 5.0%   |
| Suicide   | 6.2%  | 0.0%                       | 4.3%   |
| Stroke  | 2.8%  | 5.7%                       | 3.6%   |
| Respiratory/lung disease  | 3.1%  | 4.8%                       | 3.3%   |
| Motor vehicle crash injuries  | 1.1%  | 1.0%                       | 1.7%   |
| Unsafe environment (poor air/water quality, chemical exposures)                                       | 1.4%  | 1.9%                       | 1.7%   |
| Asthma  | 0.3%  | 1.0%                       | 1.4%   |
| Sexually transmitted diseases   | 1.7%  | 1.0%                       | 1.4%   |
| Infectious diseases (hepatitis, TB, pertussis, flu, other diseases transmitted from person to person) | 1.7%  | 1.0%                       | 1.2%   |
| Rape/sexual assault   | 0.6%  | 0.0%                       | 0.9%   |
| Infant death  | 0.6%  | 0.0%                       | 0.5%   |
| HIV/AIDS  | 0.0%  | 0.0%                       | 0.2%   |
| Other   | 5.1%  | 7.6%                       | 5.7%   |

## Alcohol Use and Prevention

### Discussion

More than three-fourths (78.0%) of respondents from Adams County agreed or strongly agreed that alcohol use is a problem among individuals under 21 in their community (compared to 67.0% for Nuckolls County) (Table 3.49). Again, over three fourths (76.9%) of respondents from Adams County felt that their community should do more to prevent alcohol use among individuals under 21 (compared to 61.5% for Nuckolls County) (Table 3.50).

### Results

| Table 3.49                 | Alcohol use among individuals under 21 years old is a problem in my community. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Adams County               | Nuckolls County  | South Heartland (4-County Total) |  |
| 78.0% (n=328)              | 67.0% (n=91)   | 76.0% (n=516)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.50                 | My community should do more to prevent alcohol use among individuals under 21 years old. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Adams County               | Nuckolls County  | South Heartland (4-County Total) |  |
| 76.9% (n=338)              | 61.5% (n=96)   | 73.7% (n=536)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table 3.51                 | People sometimes say that "drinking is a rite of passage for youth" meaning that it is an important milestone for them as they move into adulthood. What is your level of agreement? |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Adams County               | Nuckolls County  | South Heartland (4-County Total) |  |
| 9.1% (n=350)               | 4.8% (n=104)   | 7.7% (n=558)                     |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Additional Questions

### Discussion

Following are results from a set of additional miscellaneous survey items. A couple of interesting responses can be found in Tables 3.52 and 3.53, in which respondents from Adams County rated the overall quality of life in their community at a higher rate than respondents from Nuckolls County, but respondents from Nuckolls rated their own personal health as more healthy than respondents from Adams County.

### Results

| Table 3.52                | How would you rate the overall quality of life in your community? |                                  |         |
|---------------------------|---|----------------------------------|---------|
| % Excellent or Very Good* |   |                                  |         |
| Adams County              | Nuckolls County   | South Heartland (4-County Total) |         |
| 61.9% (n=354)             | 40.0% (n=105)   | 55.8%                            | (n=561) |

\*Response options: excellent, very good, good, fair, poor

| Table 3.53                 | How would you rate your own personal health? |                                  |         |
|----------------------------|--|----------------------------------|---------|
| % Healthy or Very Healthy* |  |                                  |         |
| Adams County               | Nuckolls County                              | South Heartland (4-County Total) |         |
| 57.6% (n=354)              | 67.6% (n=105)                                | 59.0%                            | (n=561) |

\*Response options: very unhealthy, unhealthy, somewhat healthy, healthy, very healthy

| <b>Table 3.54</b>    | <b>Approximately how many hours per month do you volunteer your time to community service? (e.g., schools voluntary organizations, churches, hospitals, etc.)</b> |                                    |   |
|----------------------|---|------------------------------------|---|
|                      | <b>Adams County<br/>(n=354)</b>   | <b>Nuckolls County<br/>(n=105)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=561)</b> |
| <b>None</b>          | 29.9%   | 21.9%                              | 28.3%   |
| <b>1-5 hours</b>     | 46.3%   | 57.1%                              | 48.1%   |
| <b>6-10 hours</b>    | 15.3%   | 12.4%                              | 14.4%   |
| <b>Over 10 hours</b> | 8.5%  | 8.6%                               | 9.1%  |

| <b>Table 3.55</b>  | <b>Considering stressors in your life, would you say you...?</b> |                                    |   |
|--|--|------------------------------------|---|
|  | <b>Adams County<br/>(n=354)</b>                                  | <b>Nuckolls County<br/>(n=105)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=561)</b> |
| <b>Feel alone with nowhere to turn</b>                     | 11.6%  | 12.4%                              | 13.2%   |
| <b>Know who to turn to in time of need</b>                 | 63.6%  | 56.2%                              | 60.6%   |
| <b>Do not think stress is a significant factor for you</b> | 24.9%  | 31.4%                              | 26.2%   |



## Demographics

| Table 3.56  | How do you pay for your health care? (check all that apply) |                            |  |
|---|---|----------------------------|--|
|   | Adams County<br>(n=353)                                     | Nuckolls County<br>(n=105) | South Heartland<br>(4-County Total)<br>(n=558) |
| Pay cash (do not have insurance)  | 10.5%   | 8.6%                       | 10.9%  |
| Veterans' Administration/TRICARE  | 1.1%  | 1.0%                       | 1.1%   |
| Medicaid  | 2.3%  | 1.0%                       | 2.2%   |
| Medicare  | 7.4%  | 1.0%                       | 6.3%   |
| Private Health Insurance (e.g., Blue Cross, HMO, including insurance through an employer) | 86.7%   | 97.1%                      | 87.3%  |
| Indian Health Services  | 0.0%  | 0.0%                       | 0.0%   |
| Other   | 3.7%  | 1.0%                       | 4.9%   |

| Table 3.57  | How do you pay for dental care? (check all that apply) |                            |  |
|---|--|----------------------------|--|
|   | Adams County<br>(n=353)                                | Nuckolls County<br>(n=105) | South Heartland<br>(4-County Total)<br>(n=558) |
| Pay cash (do not have insurance)  | 22.4%  | 41.9%                      | 26.9%  |
| Veterans' Administration/ TRICARE   | 0.6%   | 0.0%                       | 0.9%   |
| Medicaid  | 2.0%   | 0.0%                       | 1.8%   |
| Medicare  | 2.5%   | 0.0%                       | 2.2%   |
| Private Health Insurance (e.g., Blue Cross, HMO, including insurance through an employer) | 78.2%  | 64.8%                      | 73.7%  |
| Indian Health Services  | 0.0%   | 0.0%                       | 0.0%   |
| Other   | 1.1%   | 1.9%                       | 2.0%   |

| <b>Table 3.58</b>                      | <b>How many children less than 18 years of age live in your household?</b> |   |  |
|--|--|---|--|
| <b>% One or more children under 18</b> |  |   |  |
| <b>Adams County</b>                    | <b>Nuckolls County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 40.2% (n=346)                          | 41.0% (n=105)  | 43.3% (n=550)                           |  |

| <b>Table 3.59</b>         | <b>How long have you lived in your community?</b> |                                |   |  |
|---------------------------|---|--------------------------------|---|--|
|                           | <b>Adams County (n=354)</b>                       | <b>Nuckolls County (n=105)</b> | <b>South Heartland (4-County Total) (n=561)</b> |  |
| <b>Less than one year</b> | 4.2%  | 2.9%                           | 4.1%  |  |
| <b>1-2 years</b>          | 5.1%  | 4.8%                           | 4.6%  |  |
| <b>3-4 years</b>          | 5.4%  | 4.8%                           | 6.1%  |  |
| <b>5-9 years</b>          | 11.0%   | 11.4%                          | 11.8%   |  |
| <b>10 or more years</b>   | 74.3%   | 76.2%                          | 73.8%   |  |

| <b>Table 3.60</b>     | <b>Age</b>                  |                                |   |  |
|-----------------------|-----------------------------|--------------------------------|---|--|
|                       | <b>Adams County (n=354)</b> | <b>Nuckolls County (n=105)</b> | <b>South Heartland (4-County Total) (n=561)</b> |  |
| <b>Under 18 years</b> | 0.6%                        | 0.0%                           | 2.7%  |  |
| <b>18-24</b>          | 3.7%                        | 1.0%                           | 3.0%  |  |
| <b>25-39</b>          | 26.8%                       | 30.5%                          | 26.0%   |  |
| <b>40-54</b>          | 32.2%                       | 35.2%                          | 33.0%   |  |
| <b>55-64</b>          | 25.4%                       | 21.9%                          | 24.8%   |  |
| <b>65-80</b>          | 10.5%                       | 7.6%                           | 9.3%  |  |
| <b>Over 80</b>        | 0.8%                        | 3.8%                           | 1.2%  |  |

| <b>Table 3.61</b> | <b>Gender</b>                   |                                    |   |
|-------------------|---------------------------------|------------------------------------|---|
|                   | <b>Adams County<br/>(n=354)</b> | <b>Nuckolls County<br/>(n=105)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=561)</b> |
| <b>Male</b>       | 20.3%                           | 10.5%                              | 18.9%   |
| <b>Female</b>     | 79.7%                           | 89.5%                              | 81.1%   |

| <b>Table 3.62</b>                    | <b>Marital Status</b>           |                                    |   |
|--------------------------------------|---------------------------------|------------------------------------|---|
|                                      | <b>Adams County<br/>(n=354)</b> | <b>Nuckolls County<br/>(n=105)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=560)</b> |
| <b>Married</b>                       | 71.5%                           | 75.2%                              | 72.5%   |
| <b>Divorced</b>                      | 9.3%                            | 12.4%                              | 8.9%  |
| <b>Separated</b>                     | 2.0%                            | 1.0%                               | 1.4%  |
| <b>Widowed</b>                       | 5.6%                            | 2.9%                               | 5.0%  |
| <b>Never married</b>                 | 9.3%                            | 3.8%                               | 9.3%  |
| <b>Member of an unmarried couple</b> | 2.3%                            | 4.8%                               | 2.9%  |

| <b>Table 3.63</b>                          | <b>Which of the following best reflects your race</b> |                                    |   |
|--|---|------------------------------------|---|
|  | <b>Adams County<br/>(n=354)</b>                       | <b>Nuckolls County<br/>(n=105)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=558)</b> |
| <b>White</b>                               | 96.0%   | 100%                               | 97.1%   |
| <b>Black or African American</b>           | 0.6%  | 0.0%                               | 0.5%  |
| <b>Asian</b>                               | 0.8%  | 0.0%                               | 0.5%  |
| <b>American Indian or Alaska Native</b>    | 0.3%  | 0.0%                               | 0.2%  |
| <b>Native Hawaiian or Pacific Islander</b> | 0.0%  | 0.0%                               | 0.2%  |
| <b>Other</b>                               | 2.3%  | 0.0%                               | 1.4%  |

| <b>Table 3.64</b>   | <b>Are you Hispanic or Latino?</b> |   |  |
|---------------------|------------------------------------|---|--|
| <b>% Yes</b>        |                                    |   |  |
| <b>Adams County</b> | <b>Nuckolls County</b>             | <b>South Heartland (4-County Total)</b> |  |
| 14.4% (n=354)       | 10.5% (n=105)                      | 11.8% (n=558)                           |  |

| <b>Table 3.65</b>                                       | <b>Education: Highest Year of School Completed?</b> |                                |   |
|---|---|--------------------------------|---|
|   | <b>Adams County (n=354)</b>                         | <b>Nuckolls County (n=105)</b> | <b>South Heartland (4-County Total) (n=557)</b> |
| Never attended school or only attended kindergarten     | 0.3%  | 0.0%                           | 0.2%  |
| Grades 1-8 (Elementary)                                 | 2.8%  | 0.0%                           | 2.7%  |
| Grades 9-11 (Some high school)                          | 2.5%  | 0.0%                           | 3.9%  |
| Grade 12, High school graduate or GED                   | 6.8%  | 13.3%                          | 8.8%  |
| College 1 to 3 years (some college or technical school) | 37.6%   | 47.6%                          | 38.2%   |
| College 4 years or more (college graduate)              | 29.1%   | 33.3%                          | 28.7%   |
| Post-college (Graduate school / Advanced Degree)        | 20.9%   | 5.7%                           | 17.4%   |

| <b>Table 3.66</b>    | <b>Household income</b>     |                                |   |
|----------------------|-----------------------------|--------------------------------|---|
|                      | <b>Adams County (n=354)</b> | <b>Nuckolls County (n=105)</b> | <b>South Heartland (4-County Total) (n=559)</b> |
| Less than \$20,000   | 9.3%                        | 1.9%                           | 7.7%  |
| \$20,000 to \$29,999 | 8.5%                        | 12.4%                          | 9.7%  |
| \$30,000 to \$49,999 | 16.9%                       | 18.1%                          | 18.8%   |
| \$50,000 to \$74,999 | 29.7%                       | 37.1%                          | 30.4%   |
| \$75,000 to \$99,999 | 17.2%                       | 17.1%                          | 17.5%   |
| Over \$100,000       | 18.4%                       | 13.3%                          | 15.9%   |

| <b>Table 3.67</b>   | <b>Are you or an immediate family member (child, spouse parent or sibling) either currently serving in the military or a veteran of the military (mark all that apply)</b> |                                    |   |
|---|--|------------------------------------|---|
|   | <b>Adams County<br/>(n=350)</b>  | <b>Nuckolls County<br/>(n=103)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=552)</b> |
| <b>Neither I nor an immediate family member currently serves in the military or is a military veteran</b> | 76.9%  | 79.6%                              | 76.6%   |
| <b>I currently serve in the military</b>  | 0.0%   | 0.0%                               | 0.0%  |
| <b>I am a veteran of the military</b>   | 4.3%   | 2.9%                               | 3.6%  |
| <b>An Immediate family member currently serves in the military</b>  | 5.7%   | 6.8%                               | 6.5%  |
| <b>An immediate family member is a veteran of the military</b>  | 17.1%  | 13.6%                              | 17.2%   |

## Section IV. Community Focus Group Results

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Three community focus groups were conducted on December 22, 2015 with participants recruited to fit a certain sub-population of the SHDHD service area. A Spanish-speaking focus group was conducted by bi-lingual staff from SHDHD in Hastings with participants from Hastings, Harvard, and Sutton. Two other focus groups were conducted by Joyce Schmeeckle, PhD of Schmeeckle Research. The first of these two was located in Superior with low income individuals of rural/agricultural background. The second of the two focus groups conducted by Schmeeckle Research was located in Hastings with individuals of low income background living in Hastings.

The results of the focus group are reported by sub-population and by question theme. Table 4.1 identifies the specific group, the location of the focus group, and the number and demographics of the participants. The Superior group was primarily retired while all of the Hastings group was employed except one stay-at-home mom.

**Table 4.1. Focus Group Participants**

| Focus Group Sub-Population                 | Location   | Number of Participants | Participant Age Range (Estimate) and Ethnicity             | Participants' Gender |
|--|--|------------------------|--|----------------------|
| Spanish-speaking                           | Hastings (participants from Hastings, Harvard, and Sutton) | 12                     | All Hispanic<br>Age 26-41 – 6<br>Age 41-65 – 6             | 6 Men<br>6 Women     |
| Low-income (rural/agricultural background) | Superior   | 8                      | 35 to 70<br>All Caucasian                                  | 2 Men<br>6 Women     |
| Low-income (living in Hastings)            | Hastings   | 7                      | 25 to 45<br>3 Caucasian, 3 Hispanic and 1 African American | 3 Men<br>4 Women     |

## *Individual, Family and Community Health Concerns*

### *Discussion*

Focus group participants from all three focus groups reported a wide array of personal or family health problems ranging from the less to severe to highly severe. Examples of more severe issues include cancer, diabetes, heart disease, and brain injury. When asked to discuss community health problems, the focus group participants from Superior focused heavily on cancer, while those from Hastings focused on mental health issues and work-related injuries. In response to being asked “what could be different?”, participants from Superior keyed on a need for specialty medical services at the hospital in Superior, while those from the English-speaking Hastings group focused on cost and health insurance issues, and those from the Spanish-speaking Hastings group focused on cost and language barriers.

### *Superior*

#### *Personal health problems*

- Heart Disease. One man had multiple heart attacks before moving to Superior. First heart attack was mis-diagnosed and not treated appropriately.
- Breast cancer. Tumor was detected with the 3-D mammogram machine at Brodstone. Tumor was caught early but Hastings surgeon couldn't find it to do the biopsy. Brodstone doctor said to wait 6 months. Was going to send to her to Hastings again but she decided to go to a breast specialist in Omaha and had the biopsy right away. Blamed herself for listening to the doctor for waiting even the tumor hadn't changed in size.
- Lung cancer. Brother in Superior was diagnosed with lung cancer 3 months ago but they still haven't decided what to do, but told her he has 3 months to live.
- Child birth. One woman had all three babies at the hospital.

#### *Community health problems*

- Cancer and MS
  - According to one participant, in her daughter's 2012 class of 33 students, 6 of the parents have had cancer.
  - Percent of cancer extremely high in the area. May be the water.
  - It was understood that the water testing was only required by law to publish nitrate levels. They know what is in the water but they don't have to publish it. Participant believes it should be pushed to publish the results of everything in the water– the atrazine, the herbicides, etc. They are there but not known by the community. Fluoride levels are not published either. Well water on the farm is nice but may have the same containments. FFA will water test and are present at the health fairs. Community nitrate testing has resulted in acceptable levels.
  - High rates of brain cancer in the state that may be due to aerial spraying according to one participant.

### *What could be different*

- Lucky to have a 3-D mammogram at the hospital.
- All participants doctored in Superior and were satisfied with their care.
- Hospital has a diagnostic machine that is “not big enough” for all patients. Some big farmers around. If you can’t get them in a machine that fits them, they could die by the time you get them to somewhere else. They need one that is big enough that can go right over you. Same with MRI machine. Need the right equipment.
- No general surgeon in Superior. Someone should be able to do minor surgeries in Superior. Would prefer not to drive.
- Can’t get treated in Superior for cancer. Have to go to Hastings for chemo (60 miles) and there is no transportation available.

### ***English-speaking – Hastings***

#### *Personal health problems*

- Child birth
- Pneumonia
- Epilepsy – aunt that needs help with medication, etc.
- Pneumonia
- Children with lots of health concerns: one failure to thrive, one obese, and one with allergies.
- Health issues as a result of motorcycle accident many years ago. Family history of health problems. His brother died of a blood clot and father died of heart problems and had diabetes.
- High cholesterol and diabetes in the family.

#### *Community health problems*

- Mental health issues. The community has many treatment centers, Crossroads, Homeless Connect and rehab centers but still unmet needs for mental health patients that don’t know how to connect as there is nothing advertised. “If I had a mental health issue, where would I go?”
- Factories in the community can create work related injuries, like carpal tunnel and joint problems. One participant had surgery on both knees because of his work on the pig farm.

### *What could be different*

- Need for more outreach from the health care system. Some are intimidated by the doctors so just go to the emergency room.
- Paying bills to so many different people – such as the radiologist, hospital, doctor.
- Some people are afraid to go to the doctor because of hidden costs even with insurance. You first have to pay the deductible and then the 20%.
- Some people don’t have health insurance but everyone in the room did have health insurance.



## ***Spanish-speaking – Hastings, Harvard, and Sutton***

### *Personal health problems*

- Tendonitis
- Brain Injury
- Diabetic
- Depression
- Obesity
- Anxiety

### *What could be different*

- “I think providers give too many referrals for a health problems and at the end there is not a clear diagnostic.”
- “Health care is really expensive.”
- “I go to collection and no explanation, I think language barrier.”
- “We need more low income dental clinics that accept Medicaid clients and for those that don’t have insurance. I understand CCC can help with cleaning but the majority of the time what we need is a filling or an extraction.”

## ***Community Resources for Healthy Living***

### ***Discussion***

When asked about community resources for healthy living, respondents from Superior noted that bike trails might be coming to the community. Superior respondents also mentioned the privately owned fitness center and the cardiac rehab center in the hospital. Participants from Hastings (both English-speaking and Spanish-speaking) mentioned the YMCA. Participants from all three focus groups noted at least some healthy-eating options.

### ***Superior***

- Superior has community wellness committee and they just received a walkability grant to make the community more walker and biker friendly. May be working creating some bike trails. Others believe people will really use the trails as they are well used in other communities.
- Cardiac rehab at the hospital has machines to workout. You have to be referred by a doctor but can go on your own later in the day for \$3.
- The community has a privately owned fitness center. You have a key for access so can go anytime. Pretty well used but concerned about people being by themselves if something were to happen. One didn’t join because there are only treadmills and bikes and can go to cardiac rehab for cheaper. Fitness center should have elliptical and weights.

- Nutritious food options: Subway, a salad bar and the grocery store. But can't find steamed vegetables anywhere. Other food options in the community: Casey's has deli sandwiches, Pizza Hut, Bad Rooster, Dave's, Dairy Queen. Hard to find healthy food at the Dairy Queen.

### ***English-speaking – Hastings***

- YMCA is where most people workout.
- YWCA has a dance program and after-school program.
- Hy-Vee in Grand Island has a wellness program – how to shop and eat. One participant just started eating “clean” (no processed food). A wellness program could be started with a local grocery store.
- Once a month activity or program and a support program at the YMCA for the Hispanic.

### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- We have the YMCA and other gyms in town
- We have the new sidewalks that helps us use the bicycle for longer distance.
- Hastings Catholic Social Services help us with food.
- Diabetic group help us stay healthy with their education and information every month.
- Harvard: CATCH Kids program for our children.
- The information above is what they know they have in the community; however, they stated that they usually walk because they live far from Hastings and they don't have a membership to the YMCA. During the winter season they don't walk because of how cold it gets. They would like to find a place in Sutton or Harvard that they can use during the winter.
- Programs such as the “Parent Education” in Harvard have helped that community stay informed about healthy lifestyle. They mentioned that they learned healthy meals with the UNL Extension presentation and the Physical Activity/Nutrition presentations that SHDHD did in collaboration with MLH.

## ***Employer Support for Physical Activity and Health***

### ***Discussion***

In response to questions about employer support for physical activity and health, each focus group participant seemed to have a unique perspective. Some participants noted that their job is physically demanding (and so there is no need to seek other opportunities for physical activity, though healthy eating may not be addressed), others noted that their employer offers an employee wellness program, and others discussed how their employer does not offer support or programming for wellness.

### ***Superior***

- Superior Good Samaritan Retirement Home is very aggressive on preventive healthcare – shingles vaccine, flu shots, etc.
- Wellness committee at Head Start. Employees get their blood panel done for free and they have physical activity during breaks.
- No breaks were given at the Sheriff's Office so there was not time for physical activity during the day.

### ***English-speaking – Hastings***

- Some are lifting 100 pigs all day and don't need to work out. No overweight people at the farm.
- High cholesterol and high diabetes in the family so attends a once a month activity or program and a support program at the YMCA for the Hispanic population. Found high cholesterol as a result of the blood screening done at work.
- A small non-profit office doesn't do anything specific for health but in a previous job they used to offer healthy snacks.
- Community college pushes health and there is an option to sign up for the wellness committee activities that each month has different initiatives. They provide little incentives, for example, to increase water intake with a water bottle and at the end of the month they have a drawing. Some women walk on their breaks.
- At Perkins (previous employer), boss was a big fitness guru and would talk to high school boys and get them involved in community sports. Sponsored boxing and other events and was very interested in physical health.
- As a stay at home mom gets involved through a church that offers a wellness ministry.
- As a staff member at the YMCA, they offer members an incentive and a discounted price and t-shirts or gift cards to be in the program because they want staff to "walk the walk".
- Some employers offer discounted health insurance rates if you get an annual physical. Annual check-ups are required for some for their jobs (i.e., truck driver), and the children get regular check-ups.

### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- "The work that I do is heavy and they do not support healthy habits."
- The meat packing plant in Hastings, GVS in Sutton and Thermo King does support healthy habits. They worry about our health.
- "When we get to work we have to work and there isn't really any motivation or support we can use to stay healthy."
- Paper Works in Hastings is a great workplace, they go every year to give the flu shot to employees.

## ***Adequacy of Medical Communication and Information***

### ***Discussion***

English-speaking focus group participants from Hastings and Superior had varied experiences in terms of medical communication and information, with some reporting good communication with their doctors and others reporting various issues around communication. Spanish-speaking participants noted several issues related to language barriers.

### ***Superior***

- One area where communication could be better is when you take tests and they tell you if you don't hear from them, "everything is okay". But what if they misplaced it or didn't read it? Wish they would let you know either way. Otherwise communication is good."
- Doctor is good at communicating but participants take responsibility for continuing to ask questions and are not afraid to ask. They get everything answered that they ask.
- Calling in to get prescriptions filled and if doctor is out, you have to wait as they may say another doctor will fill it but they don't.
- All questions are answered by the doctor.

### ***English-speaking – Hastings***

- Communication with doctor is verbal and for the most part good and helpful but then they send you home with printouts of the information that you will never read. You come out with a "novel".
- Printed information is to cover everything or is it to scare you?
- ENT doctor problems. As a recovering drug addict has nose problems. Doctor did a nose scope and he prescribed nasal spray but did not communicate what was going on. Didn't want just to relieve the symptoms. Really frustrating but not life threatening so didn't push it.
- Clean for 2 years off meth and cocaine and it is very important not to be given narcotics and wish they would listen to her. With the C-section at Mary Lanning they tried to give her narcotics even with explicit records of not wanting the drugs. They kept pushing pain medications every 2 hours. Realize it is about the pain management but did not feel listened to or respected.
- Knee surgery experience when seeing a different doctor in the same clinic and told him my knees were hurting and he said he was "getting old". He dismissed the pain and then went to a different doctor in the same clinic and he sent him to get an MRI that led to surgery.

### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- “If we are able to have an interpreter we do understand the information they give us at the clinics. The Hastings Hospital does have that service and we really appreciate it.”
- “We, in Sutton come to Hastings to see a Doctor, since we have the help of the interpreters.”
- “My son was hospitalized at MLH and I didn’t have an interpreter, this was October 31 2015.”
- “Sometimes the language that the doctor use is kind of hard but I’m not afraid to ask the interpreter to clarify what the provider said.”
- “I usually do, however if I forget something I have the confident to call the Hospital/Interpreter’s cell or Clinic and ask for clarification.”
- “Every time I go to the Hospital or Clinics I understand everything that is being said.”
- “If I go with a family member it is better because they help me remember after the appointment.”

## ***Barriers to Health Care***

### ***Discussion***

Barriers to receiving health care were by and large focused on the two issues of cost and transportation/distance across all three focus groups.

### ***Superior***

- Not only is transportation a concern to travel for certain healthcare treatments but it is a burden on the family as well to have to travel and the cost of hotel rooms and for gas money. When you are on a limited budget, or on your own, you don’t have the money for gas and you may not have reliable transportation (beater car) or you have to depend on someone else to transport you and they may have to take off of work.

### ***English-speaking – Hastings***

- The cost of medication – recent prescriptions for pneumonia alone was \$100.
- Cost of medication on a sliding fee scale was great in treatment but how do you get it paid after? Cost of medication difficult.
- Sometimes you are in the income bubble where you make too much money to get help but not enough to pay for healthcare. You want to be independent and pay your bills and make advances but you really can’t. It can encourage you to stay stuck. Currently work 30 hours a week and still get benefits. If you want to work more or achieve more, you will lose your benefits. Really discouraging.
- As a single mom with 2 small children and when I went to college I lost my benefits. It’s hard.
- Pre-existing conditions. Went to the doctor to get help with health issues from accident and insurance won’t pay for it so had to pay for it out of pocket.

### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- Language
- Transportation
- “I still need to familiarize with the medical system here in town. I just arrived a few months to Hastings.”
- Distance, in order to see a specialty clinic (such as OB/GYN, Dentist, Endocrinology...)
- Resources, where to go for what or what program exists.
- Insurance
- Medicaid and Medicare: Clinic restrictions in Hastings and our four counties.

## ***Health Care System Needs***

### ***Discussion***

A variety of health care system needs were addressed by focus group participants. Those from Superior noted a need for dental services, specialists, and mental health services. Those from the English-speaking Hastings group mentioned a need for programs for obese children, the cost of insurance, specialists, and dental services. Those from the Spanish-speaking Hastings group discussed cost, travel, dental care, and specialists, among other issues.

### ***Superior***

- Dental services are also not paid for by Medicaid and Medicare (or through disability). An infection with your teeth can lead to other health problems. No dental and no vision. Part A and Part B for those on disability. Have to pay for Part C and Part D. Force you to take Medicare when on disability.
- There are a few dentists but only one that is there two days a week and very negative comments about the local dentist. Other dentists in surrounding communities. Only one eye doctor but he doesn't take all insurances and it is very expensive.
- Specialists also come in from various other hospitals in the area and they don't work with just one larger institution. People can see who they want to see. Quite an assortment of people who come down, even hearing specialists. Oncologist and 3 heart specialists come to the community and are the busiest but everyone has different needs.
- It's difficult to drive to see specialists in Omaha, Kearney, Lincoln, Grand Island, etc.
- No general surgeon in Superior. Someone should be able to do minor surgeries in Superior. Would prefer not to drive.
- Need newer and more machines at cardiac rehab. Even in physical therapy. A physical therapy pool would be nice.
- Maybe community is short on counseling or mental health professionals. There are some but can't meet all of the needs. Even people with depression. There aren't a lot of options if you don't get along with the two in the community. Sometimes personalities don't work together so people go to Hastings. People know they may have a problem

but they want it to be private. Privacy issues in the hospital have improved. Hospital is the center of the community and they keep it private. But coming to the hospital for a mental issue and people seeing them might be a problem so they go out of the community. The privacy may be an obstacle. They also offer tele-psych. All you have to do is walk in or be seen with someone and people will talk and assume – it doesn't matter what it is. There are not enough people here to help others.

### ***English-speaking – Hastings***

- No programs for obese children. She couldn't get her child in YMCA because of her high risk.
- PE a part of school curriculum. Daughter's doctor is going to the physical education teacher to see if the child can receive training from the school. There is no community outreach for children with obesity. Doctor advised mom to go into the community and do outreach.
- Need outreach to new community members as they don't know how to get to the emergency room. It is a mess around the hospital with one way streets. If I had an emergency I would be in trouble.
- Some participants doctor in Grand Island where they used to live and some don't have a doctor. One participant goes to the community clinic.
- One individual that came to the U.S. 20 years ago went to the Mary Lanning Health Center with a sliding fee scale and was able to get care for the family. He was happy with the care. After 3 years, was able to get insurance and had to change clinics. Thought it would be better care, but it wasn't.
- One individual is pretty healthy so has just gone to community health when needed.
- Community health center attached to hospital. In college when he went he never got a bill.
- Shortage of pediatric gastrologists in the state. Had to travel for daughter and difficult with other children at home. Husband is a veteran and receives VA benefits.
- Dental hole in the system. Cannot find a dentist from here to Lincoln that will take Medicare. Husband needed two root canals and community health wouldn't do it because he had insurance, so ended up in Columbus. No veteran dental benefits.
- Has dental insurance that pays half of dental costs. Currently has a \$500 dental bill and had to pay for additional work up front.
- Hastings College of Dentistry is awesome provides cleaning and x-rays.
- Work with a woman whose English isn't great and has her make the phone call for the doctor. Need more assistance to help with communication over the phone for medical help for non-English speaking individuals. No option to speak with someone who speaks Spanish.

### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- "I think a good insurance or money to pay for a medical diagnostic screening test."
- "What we usually do is travel to our country where medicine is free, there we have done all of our testing, we see a doctor and we even have our annual eye and dental care."

- “We need a place that will take us for an emergency dental care, it will be nice to have a clinic just like the one in Columbus, UNL or the dental clinic that just opened in GI because we live far away from them.” (Sutton, Harvard)
- Usually the clinics that accept low income such as the Columbus dentist, the majority of the time they are full and the next appointment that they give you is in a minimum of one month if not more.
- “We are thankful we have CCC in Hastings and this has helped us with the cleaning, however there is a large amount of people that usually go to the dentist once they need a filling or oral extraction”
- “In my case, Medicare does not cover a dentist visit or an eye exam, I will have to get an insurance that will cost me more money.”
- The Salvation Army (Emergency Program) ask for a lot of information.
- Lack of specialty care:
  - Dentist
  - Low Income counseling
  - Neurology
  - Bilingual clinics
  - We would like: Harvard & Sutton: After school physical activity programs for kids again. This will help prevent obesity

## ***Participants’ Healthy Living Behaviors***

### ***Discussion***

Healthy living behaviors noted by participants include healthy diet (cited most frequently), exercise at the YMCA, and walking, among other activities. Participants were varied in their focus on a healthy lifestyle

### ***Superior***

- Diet, stay active, workout at cardiac rehab, tai chi in the community by the Area Agency on Aging.
- Disability will put you on physical therapy but only for so much.

### ***English-speaking – Hastings***

- Clean food
- Work that involves physical labor
- Work out regularly at the Y – sometimes twice a day
- Eating healthy is more challenging and it is more expensive especially if you want to go organic. Hy-Vee is awesome, but no health food store. GNC is available but they don’t have broccoli. No place to buy things like flaxseed



### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- Not everyone knows about the YMCA discounts/waiver. I will like to increase advertisement.
- Insurance: Obamacare is not an option for us because our income is not as much, but we also don't qualify for Medicaid.
- "I don't work out because in my community I don't have a place I could go to exercise."
- "We walk in Harvard but we can't during the winter days. They have not let us walk at the Public Schools. We don't have a place where we can walk and stay active. (We talked about the YMCA, they have scholarships, and the Hastings Mall have a big space to walk).
- "We have a park in Sutton but right now is too cold."
- Usually walk during the summer with some friends I have in Harvard.
- Waterpark with the kids.
- Walk around the Mall in Hastings
- Walk at the park in Sutton

## ***Health Screenings and Impact on Healthy Behaviors***

### ***Discussion***

Most participants appear to have a good experience in obtaining health screenings. Many noted receiving a physical every year. A few participants discussed the importance of obtaining health screenings towards changing behavior.

### ***Superior***

- Most participants get physicals but one woman doesn't go to the doctor at all and feels fine and will only go to the doctor if she doesn't feel well. She is 65 and believes you just need to keep going (in life). Others go to the doctor all of the time because of ongoing health issues. Most insurance pays for physicals as well as Medicaid and Medicare.
- Biggest thing happening and is probably being pushed by the insurance companies and the hospital is the screenings. There is the annual health fair and keep promoting. Promoting the preventive care. Cancer is extremely high in the area and screening is important. No environmental testing has been done.
- Other health screenings that are done are mammograms, colonoscopy, blood counts that you can go over with your doctor. If you get the report and don't do anything with it, not beneficial. If you meet with your doctor, you can get help. Have to keep going, you have to do something for it. If you put your medical results away and do nothing with it, it isn't going to help you.
- Physical every year, Cholesterol or PSA checked and if they are high - medical providers will stay on it, and follow-up with phone calls for appointments etc. – benefit of small community.

- Screenings can change people’s behaviors but they believe the percentage is small. The socio-economic group in the community like all other communities, and maybe they are stereotyped and they do not get involved, 30-50% of community not involved. Not sure how to get them.
- Some don’t want to go and get screened because they don’t want to know because they don’t want to know. It scares you. If you don’t hear than there is nothing to worry about.

***English-speaking – Hastings***

- Most participate in annual physicals in order to receive health insurance reduction. (Most participants are too young for cancer screenings.)
- Found high cholesterol as a result of the blood screening done at work.
- Women health screenings – mammogram.
- Church on Burlington have screenings once a year; hearing, etc. Sam’s Club also has screenings.
- The community has lots of health fairs.
- Grand Island has a free dental fair where people are camping out to get help.

***Spanish-speaking – Hastings, Harvard, and Sutton***

- Colonoscopy
- A1C/Cholesterol
- Pap Smear
- Dental cleaning
- Eye care

***Help for Individuals with Behavioral Health Issues (Mental Health and Substance Abuse)***

***Discussion***

Participants, for the most part, appeared to share the perception that there are behavioral health services available, but they may not always be affordable or adequate. Some participants noted that there are many mental health or substance abuse related issues that are unaddressed among individuals in their community.

***Superior***

- People may not be getting the help they need
- One individual was having trouble with depression a year ago as a result of health problems, death of family members, etc. and was referred to counselor and she hit it off and was feeling better about things. She was recommended to her and would not have known where to go if she hadn’t been referred. One counselor in the hospital. They weren’t sure who else was in town.

- Substance abuse issues. There are a lots of bars in town and many don't recognize they need help or they don't want help.
- Prison system filters down to local community. Those that are making mistakes or getting in trouble have no long term care and only receive punishment. No help for mental health or substance abuse. People in the corrections system are not getting help as it is the same people getting in trouble over and over again.
- One person was referred to Grand Island to a mental health professional for depression and all he did was go every two weeks was prescribed medicine (no counseling). It was believed that his family doctor could have asked the same questions and prescribed the same medication. He thought he was going to a psychiatrist for therapy and all he did was go to get medication.
- A lot of financial/economic pressure/stress in rural areas because the ag business is down and the local business income is down and farmers can't find good help. And then there are people who can't find a job so a lot of financial pressure in rural America. Stress about churches and schools and businesses closing. This can lead to mental and physical health. Superior has been fortunate however and has many good things happening.
- Businesses that are always looking for help like Dollar General. If you want to work, there is a job but there isn't day care and she can't make it work financial. For single parents, it is difficult. Some day care facilities you have to pay even if you are on vacation.
- Stress for people living on a limited income in the area. Very much an aging community.
- Brodstone is very willing to work you if you have a problem in paying your bill instead of sending people to collections. They do a lot to help people which helps keep stress off of people.

### ***English-speaking – Hastings***

- Have psychologist and psychiatrist and counselors and substance abuse treatment but sliding fee professionals so full and in demand so you don't get the time. One woman looking for a faith-based counselor.
- Lacking mental health specialists for kids. You have to refer them to others outside of Hastings.
- Continue to work with counselor in the Panhandle through phone visits. Didn't want to relive entire life with a new person as there can be huge trust issues with a new person.
- Stigma with individuals with MH/SA. There are many places in Hastings; Revive, Opportunity House or Crossroads are awesome but it is definitely a separation from the rest of society.
- Many people want help but they have to act out and they end up on the "7<sup>th</sup> floor of the hospital" (i.e., psych ward) when they may have just needed someone to listen to them or some support or some guidance. There is no early intervention.

### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- A lot of people have found relief in their religion.
- Every time I have depression and/or anxiety, instead of scheduling an appointment with the psychologist I decide to see a friend.
- Getting together as a community had helped us maintain a healthy mind.
- “I have a friend that I can talk to because if I go to the doctor, everything is too expensive.”
- I think it is URGENT, we need low income clinics for mental health.
- I see that there is more help in the community for alcohol or drugs but how about us that suffer from depression and anxiety, were do we go for help? We don’t need more bills or collection agencies calling us because we can’t pay, we need something that is low income.

## ***Other Comments***

### ***Superior***

- Would like a rehab pool at the hospital.
- Very fortunate with the healthcare available in the community. Communication a big deal at the hospital. Not with doctors but when you call in and need something you do not a quick response.

### ***English-speaking – Hastings***

- Love Mary Lanning’s second floor (baby floor) and doctor from Hastings Medical Park. Loved the care and attention I get and the attention and the care for the baby. Answered all my questions and returned all my phone calls. Very positive. Makes me not worry so much.
- Very positive feelings about the hospital.
- Blood Pressure/Diabetes support group they have two translators and they will make doctor appointments.

### ***Spanish-speaking – Hastings, Harvard, and Sutton***

- The MLH Diabetic program is also a resource for us.
- The public schools are also offering healthy meals for students.
- “The Migrant program have help us guide our kids in school. Sometimes the language barrier doesn’t let us help our kids in school but The Migrant Program and the Coordinator are always there for us.”
- Groups such as the SHDHD have helped me stay in touch with other community members, this has helped us learned more about our community and to have a support group of people
- The Hispanic community is always there to spread the voice for information on events.

## Section V. County Health Rankings

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County Health Rankings provides *health outcomes* rankings at the county-level for every state in the country. There are two primary sub-categories that comprise the health outcomes ranking: length of life and quality of life. The county that is ranked first is considered the healthiest county in the state. Following are the 2012 through 2015 Health Outcomes Rankings for the four counties in the South Heartland District (Table 5.1).

| Table 5.1              | <b>Health Outcomes (length and quality of life) County Health Rankings</b> |                             |                             |                             |
|------------------------|--|-----------------------------|-----------------------------|-----------------------------|
|                        | <b>2012<br/>(out of 79)</b>  | <b>2013<br/>(out of 79)</b> | <b>2014<br/>(out of 79)</b> | <b>2015<br/>(out of 78)</b> |
| <b>Adams County</b>    | 29   | 48                          | 48                          | 40                          |
| <b>Clay County</b>     | 11   | 41                          | 60                          | 10                          |
| <b>Nuckolls County</b> | 62   | 30                          | 25                          | 41                          |
| <b>Webster County</b>  | 44   | 53                          | 53                          | 47                          |

Source: County Health Rankings (2015)

County Health Rankings also provides *health factors* rankings at the county-level for every state in the country. The sub-categories that comprise the health factors rankings include health behaviors, clinical care, social & economic factors, and physical environment. Following are the 2012 through 2015 Health Factors Rankings for the four counties in the South Heartland District (Table 5.2).

| Table 5.2              | <b>Health Factors (health behaviors, clinical care, social and economic factors, and the physical environment) County Health Rankings</b> |                             |                             |                             |
|------------------------|---|-----------------------------|-----------------------------|-----------------------------|
|                        | <b>2012<br/>(out of 79)</b>   | <b>2013<br/>(out of 79)</b> | <b>2014<br/>(out of 79)</b> | <b>2015<br/>(out of 78)</b> |
| <b>Adams County</b>    | 35  | 39                          | 31                          | 27                          |
| <b>Clay County</b>     | 50  | 50                          | 42                          | 45                          |
| <b>Nuckolls County</b> | 27  | 17                          | 39                          | 19                          |
| <b>Webster County</b>  | 44  | 55                          | 36                          | 39                          |

Source: County Health Rankings (2015)

## 2015 County Health Rankings Data – Health Outcomes

Following are the data included in the 2015 Health Outcomes Rankings. Five indicators were used to determine the rankings.

**Table 5.3: Health Outcomes Data**

| Focus Area            | Measure                   | Description   | Weight | Source  | Year(s)   | Adams County | Clay County | Nuckolls County | Webster County | Nebraska | U.S. Overall | Top Performers |
|-----------------------|---------------------------|---|--------|---|-----------|--------------|-------------|-----------------|----------------|----------|--------------|----------------|
| Length of life (50%)  | Premature death           | Years of potential life lost before age 75 per 100,000 population (age-adjusted)    | 50%    | National Center for Health Statistics - Mortality files | 2010-2012 | 5,625        | 4,629       | 6,269           | 7,131          | 5,792    | 6,622        | 5,200          |
| Quality of life (50%) | Poor or fair health       | Percentage of adults reporting fair or poor health (age-adjusted)                   | 10%    | Behavioral Risk Factor Surveillance System              | 2006-2012 | 12.7%        | 12.5%       | 11.3%           | 12.5%          | 12.0%    | 16%          | 10%            |
|                       | Poor physical health days | Average number of physically unhealthy days reported in past 30 days (age-adjusted) | 10%    | Behavioral Risk Factor Surveillance System              | 2006-2012 | 2.8          | 3.3         | 1.9             | 1.9            | 2.8      | 3.7          | 2.5            |
|                       | Poor mental health days   | Average number of mentally unhealthy days reported in past 30 days (age-adjusted)   | 10%    | Behavioral Risk Factor Surveillance System              | 2006-2012 | 2.5          | 2.9         | 2.3             | 2.4            | 2.7      | 3.4          | 2.3            |
|                       | Low birthweight           | Percentage of live births with low birthweight (< 2500 grams)                       | 20%    | National Center for Health Statistics - Natality files  | 2006-2012 | 7.2%         | 4.4%        | 6.6%            | 6.3%           | 7.0%     | 8%           | 6%             |

## 2015 County Health Rankings Data – Health Factors

Following are the data included in the 2015 Health Factors Rankings. There are four domains with multiple indicators in each. The four domains are health behaviors, clinical care, social and economic environment, and physical environment.

**Table 5.4: Health Behaviors Data (30%)**

| Focus Area                     | Measure                          | Description  | Weight | Source  | Year(s)     | Adams County | Clay County | Nuckolls County | Webster County | Nebraska | U.S. Overall | Top Performers |
|--------------------------------|----------------------------------|--|--------|---|-------------|--------------|-------------|-----------------|----------------|----------|--------------|----------------|
| <b>Tobacco use (10%)</b>       | Adult smoking                    | Percentage of adults who are current smokers   | 10%    | Behavioral Risk Factor Surveillance System                            | 2006-2012   | 15.1%        | 13.8%       | 13.4%           | 11.8%          | 17.6%    | 20%          | 14%            |
| <b>Diet and exercise (10%)</b> | Adult obesity                    | Percentage of adults that report a BMI of 30 or more                                   | 5%     | CDC Diabetes Interactive Atlas  | 2011        | 29.2%        | 34.4%       | 29.2%           | 30.9%          | 29.2%    | 27%          | 25%            |
|                                | Food environment index           | Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) | 2%     | USDA Food Environment Atlas, Map the Meal Gap                         | 2012        | 7.8          | 7.8         | 7.4             | 6.7            | 4.3      | 7.4          | 8.4            |
|                                | Physical inactivity              | Percentage of adults aged 20 and over reporting no leisure-time physical activity      | 2%     | CDC Diabetes Interactive Atlas  | 2011        | 24.3%        | 30.7%       | 32.2%           | 34.9%          | 23.8%    | 23%          | 20%            |
|                                | Access to exercise opportunities | Percentage of population with adequate access to locations for physical activity       | 1%     | Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files | 2010 & 2013 | 78.5%        | 52.0%       | 66.5%           | 60.1%          | 81.4%    | 85%          | 92%            |

| Focus Area                | Measure                         | Description  | Weight | Source  | Year(s)   | Adams County | Clay County | Nuckolls County | Webster County | Nebraska | U.S. Overall | Top Performers |
|---------------------------|---------------------------------|--|--------|---|-----------|--------------|-------------|-----------------|----------------|----------|--------------|----------------|
| Alcohol and drug use (5%) | Excessive drinking              | Percentage of adults reporting binge or heavy drinking           | 2.5%   | Behavioral Risk Factor Surveillance System                            | 2006-2012 | 16.1%        | 14.2%       | 19.8%           | 17.8%          | 19.5%    | 15%          | 10%            |
|                           | Alcohol-impaired driving deaths | Percentage of driving deaths with alcohol involvement            | 2.5%   | Fatality Analysis Reporting System                                    | 2009-2013 | 33.3%        | 45.5%       | 66.7%           | 16.7%          | 35.4%    | 31%          | 14%            |
| Sexual activity (5%)      | Sexually transmitted infections | Number of newly diagnosed chlamydia cases per 100,000 population | 2.5%   | National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention | 2012      | 244.8        | 124.8       | 90.1            | -              | 363.7    | 453.3        | 138.2          |
|                           | Teen births                     | Teen birth rate per 1,000 female population, ages 15-19          | 2.5%   | National Center for Health Statistics - Natality files                | 2006-2012 | 34.2         | 30.2        | 28.2            | 20.7           | 32.0     | 36.6         | 19.5           |



**Table 5.5: Clinical Care Data (20%)**

| Focus Area                   | Measure                    | Description  | Weight | Source  | Year(s) | Adams County | Clay County | Nuckolls County | Webster County | Nebraska | U.S. Overall | Top Performers |
|------------------------------|----------------------------|--|--------|---|---------|--------------|-------------|-----------------|----------------|----------|--------------|----------------|
| <b>Access to care (10%)</b>  | Uninsured                  | Percentage of population under age 65 without health insurance                                 | 5%     | Small Area Health Insurance Estimates                           | 2012    | 13.8%        | 13.6%       | 14.0%           | 13.7%          | 12.9%    | 17%          | 11%            |
|                              | Primary care physicians    | Ratio of population to primary care physicians   | 3%     | Area Health Resource File/American Medical Association          | 2012    | 1,258:1      | 6,411:1     | 888:1           | 1,242:1        | 1,405:1  | 1,342:1      | 1,045:1        |
|                              | Dentists                   | Ratio of population to dentists  | 1%     | Area Health Resource File/National Provider Identification file | 2013    | 1,264:1      | 6,392:1     | 1,471:1         | 3,688:0        | 1,450:1  | 1,583:1      | 1,377:1        |
|                              | Mental health providers    | Ratio of population to mental health providers   | 1%     | CMS, National Provider Identification file                      | 2014    | 307:1        | 6,392:1     | 883:1           | 1,229:1        | 435:1    | 529:1        | 386:1          |
| <b>Quality of care (10%)</b> | Preventable hospital stays | Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees | 5%     | Dartmouth Atlas of Health Care                                  | 2012    | 59.6         | 68.0        | 65.3            | 68.5           | 55.8     | 59.3         | 41.2           |
|                              | Diabetic monitoring        | Percentage of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring             | 2.5%   | Dartmouth Atlas of Health Care                                  | 2012    | 88.9%        | 90.2%       | 90.5%           | 90.5%          | 85.7%    | 85%          | 90%            |
|                              | Mammography screening      | Percentage of female Medicare enrollees ages 67-69 that receive mammography screening          | 2.5%   | Dartmouth Atlas of Health Care                                  | 2012    | 63.3%        | 65.9%       | 76.1%           | 67.9%          | 61.8%    | 63%          | 71%            |

**Table 5.6: Social and Economic Environment Data (40%)**

| Focus Area       | Measure                | Description   | Weight | Source   | Year(s)   | Adams County | Clay County | Nuckolls County | Webster County | Nebraska | U.S. Overall | Top Performers |
|------------------|------------------------|---|--------|--|-----------|--------------|-------------|-----------------|----------------|----------|--------------|----------------|
| Education (10%)  | High school graduation | Percentage of ninth-grade cohort that graduates in four years                     | 5%     | data.gov, supplemented w/ National Center for Education Statistics | 2011-2012 | 87.0%        | -           | -               | -              | 86.4%    | 80%          | 93%            |
|                  | Some college           | Percentage of adults ages 25-44 years with some post-secondary education          | 5%     | American Community Survey  | 2009-2013 | 67.6%        | 61.9%       | 64.3%           | 61.0%          | 70.0%    | 63%          | 71%            |
| Employment (10%) | Unemployment           | Percentage of population ages 16 and older unemployed but seeking work            | 10%    | Bureau of Labor Statistics   | 2013      | 3.5%         | 3.7%        | 3.5%            | 3.7%           | 3.9%     | 7.0%         | 4%             |
| Income (10%)     | Children in poverty    | Percentage of children under age 18 in poverty                                    | 7.5%   | Small Area Income and Poverty Estimates                            | 2013      | 16.2%        | 17.9%       | 18.8%           | 15.1%          | 17.1%    | 22%          | 13%            |
|                  | Income inequality      | Ratio of household income at the 80th percentile to income at the 20th percentile | 2.5%   | American Community Survey  | 2009-2013 | 4.2          | 4.0         | 3.6             | 3.6            | 4.2      | 4.6          | 3.7            |

| Focus Area                            | Measure                              | Description   | Weight | Source                        | Year(s)   | Adams County | Clay County | Nuckolls County | Webster County | Nebraska | U.S. Overall | Top Performers |
|---------------------------------------|--------------------------------------|---|--------|-------------------------------|-----------|--------------|-------------|-----------------|----------------|----------|--------------|----------------|
| <b>Family and social support (5%)</b> | Children in single-parent households | Percentage of children that live in a household headed by single parent | 2.5%   | American Community Survey     | 2009-2013 | 22.6%        | 30.5%       | 28.7%           | 15.0%          | 28.3%    | 21%          | 20%            |
|                                       | Social associations                  | Number of membership associations per 10,000 population                 | 2.5%   | County Business Patterns      | 2012      | 16.8         | 20.3        | 38.3            | 13.4           | 14.2     | 9.4          | 22.0           |
| <b>Community safety (5%)</b>          | Violent crime                        | Number of reported violent crime offenses per 100,000 population        | 2.5%   | Uniform Crime Reporting - FBI | 2010-2012 | 154.6        | -           | 66.4            | 87.3           | 263.6    | 392          | 59             |
|                                       | Injury deaths                        | Number of deaths due to injury per 100,000 population                   | 2.5%   | CDC WONDER mortality data     | 2008-2012 | 59.4         | 70.8        | 93.4            | 84.8           | 54.3     | 59           | 50.1           |

**Table 5.7: Physical Environment Data (40%)**

| Focus Area                 | Measure   | Description   | Weight | Source   | Year(s)   | Adams County | Clay County | Nuckolls County | Webster County | Nebraska | U.S. Overall | Top Performers |
|----------------------------|---|---|--------|--|-----------|--------------|-------------|-----------------|----------------|----------|--------------|----------------|
| Air and water quality (5%) | Air pollution - particulate matter <sup>1</sup> | Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)  | 2.5%   | CDC WONDER Environmental data                            | 2011      | 11.5         | 11.0        | 11.0            | 11.5           | 12.1     | 11.1         | 9.5            |
|                            | Drinking water violations                       | Percentage of population potentially exposed to water exceeding a violation limit during the past year                                      | 2.5%   | Safe Drinking Water Information System                   | FY2013-14 | 4.8%         | 7.6%        | 12.4%           | 44.9%          | 8.4%     | 7%           | 0%             |
| Housing and transit (5%)   | Severe housing problems                         | Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities | 2%     | Comprehensive Housing Affordability Strategy (CHAS) data | 2007-2011 | 11.1%        | 8.5%        | 8.1%            | 7.6%           | 12.7%    | 19%          | 9%             |
|                            | Driving alone to work                           | Percentage of the workforce that drives alone to work   | 2%     | American Community Survey                                | 2009-2013 | 84.2%        | 77.6%       | 74.3%           | 74.9%          | 80.8%    | 76%          | 71%            |
|                            | Long commute - driving alone                    | Among workers who commute in their car alone, the percentage that commute more than 30 minutes  | 1%     | American Community Survey                                | 2009-2013 | 13.7%        | 28.5%       | 20.6%           | 25.7%          | 16.9%    | 33%          | 15%            |

## Section VI. Community Themes and Strengths Assessment

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The **Community Themes and Strengths Assessment** provides a deep understanding of the issues that residents feel are important by answering the questions: "What is important to our community?" "How is quality of life perceived in our community?" and "What assets do we have that can be used to improve community health?"

This assessment is a key part of the Nebraska Mobilizing for Action through Planning and Partnerships (MAPP) Initiative. The methodology for conducting the Community Themes and Strengths Assessment was a focus group using the "Technology of Participation" workshop approach.

The Community Themes and Strengths Assessment was conducted in Hastings on April 22, 2015. Following is a summary of the focus group's perspective of their community's strengths and weaknesses

| <b>#1 Our Health Care System – Hospitals, medical specialists, access, quality, costs, behavioral health, dental care</b>   |   |
|---|---|
| <p>Strengths:</p> <ul style="list-style-type: none"> <li>● NC – Multiple specialists, multiple dentists</li> <li>● Webster is limited but Hastings is close – Hastings has many medical specialists and cooperates with other hospitals</li> <li>● Hastings great coverage</li> <li>● Hastings has much more for behavioral health than other areas &amp; yet still need more</li> <li>● More clinics are beginning to develop patient-centered medical home models</li> <li>● Good hospital with numerous providers</li> <li>● NC – Access to quality – up to date diagnostic technology</li> <li>● Mary Lanning expanding into Hall County</li> </ul> | <p>Weaknesses:</p> <ul style="list-style-type: none"> <li>● NC – need ENT, orthodontist, Behavioral Health – need more access</li> <li>● Webster: Necessary to leave county for most services</li> <li>● Behavioral – Mental health for children/teens</li> <li>● Need for pediatric specialists – medical</li> <li>● Few physicians will see uninsured patient without upfront payment –lack of access for them</li> <li>● Access in rural areas (geographic and schedule barriers)</li> <li>● Working on integrated care (BH &amp; 1<sup>o</sup> care) but not there yet with this initiative</li> <li>● Hard to access emergency dental care</li> <li>● Medicare – no hearing aid help or dental care, so elderly often go without – seniors health issues</li> <li>● Increase in calls for service on EMS providers &amp; need for more people to fill this role</li> <li>● Continuity between providers</li> </ul> |

**#2 Community Support for Raising Children – Safe, affordable childcare, school system, after school activities, recreational opportunities**

|  |  |
|--|--|
| <p>Strengths:</p> <ul style="list-style-type: none"> <li>● Blue Hill – school system</li> <li>● Adams-Hastings – YMCA offers after school program, City offers after school program for middle school at the armory</li> <li>● The Zone Program after school</li> <li>● Bike path (North)</li> <li>● Head Start</li> <li>● 4H program</li> <li>● YWCA</li> <li>● Pooh Corner</li> <li>● PAC <sup>2</sup></li> <li>● Small neighborhoods</li> <li>● Backpack program</li> <li>● Good school &amp; community</li> <li>● Grad schools spread evenly in Hashnep (sp?) for access</li> <li>● Community based youth athletics</li> </ul> | <p>Weaknesses:</p> <ul style="list-style-type: none"> <li>● After school activities</li> <li>● After school program – troubled kids</li> <li>● Schools – transportation, interpreting</li> <li>● Activities for Latino kids</li> <li>● More complete bike routes in town (near schools) and south</li> <li>● More volunteers for the Zone project</li> <li>● Activities for teens – weekends, evenings</li> <li>● Skate park = drugs</li> <li>● Affordable child care – even HHS daycare program = \$\$</li> <li>● No paid family leave with most employers</li> <li>● Pure Performance Policies (substance and alcohol abuse)</li> <li>● Community coordination with Hastings College</li> <li>● Small rural area – few activities for older kids</li> <li>● Not all kids can access backpack program (weekend food)</li> <li>● Summer Activities kids (6-13)</li> <li>● Lack of sufficient day care</li> <li>● Employers &amp; support schedules for families</li> </ul> |
|--|--|

**#3 Community Supports for Older Adults – Recreation and exercise opportunities, housing option, transportation options, meals, long-term care services)**

|   |  |
|---|--|
| <p>Strengths:</p> <ul style="list-style-type: none"> <li>● Hike/bike trail</li> <li>● YMCA classes – Silver Sneakers, water classes</li> <li>● Good Samaritan Village – senior services</li> <li>● Midland Area Agency on Aging</li> <li>● Tai Chi programs</li> <li>● Assisted Living</li> <li>● Meals on Wheels for lunch</li> <li>● Hand-Bus for local transport</li> <li>● Clay Co. Home Health</li> <li>● Super Seniors – Clay Center</li> <li>● Good for small towns</li> </ul> | <p>Weaknesses:</p> <ul style="list-style-type: none"> <li>● Increased expense of long term care</li> <li>● Lack of low income for older adults</li> <li>● Exercise for seniors in winter</li> <li>● Low cost/free exercise options</li> <li>● Recreation options for elderly (Note: another person disagreed with this)</li> <li>● No community center</li> <li>● Separation of family – need sponsors or adopted family</li> <li>● Rural areas – seniors may not have immediate family close</li> <li>● Lack of assisted living rooms/facilities</li> <li>● Somewhat limited choices</li> </ul> |
|---|--|

**#4 Recreational and Leisure Options – Places to exercise and play (parks, trails, pools, fitness centers, etc.), fine arts events, organized leisure time activities (clubs, teams, social groups)**

|  |   |
|--|---|
| <p>Strengths:</p> <ul style="list-style-type: none"> <li>● Waterpark</li> <li>● Parks</li> <li>● Downtown – offers fine arts events – LARK</li> <li>● YMCA, YWCA</li> <li>● Community Theater</li> <li>● Prairie Loft – Flatwater Music Festival</li> <li>● Sutton Pool!!</li> <li>● Softball complex</li> <li>● Duncan Field</li> <li>● Blue Moon</li> <li>● Prairie Lake Recreational Area/Archery</li> <li>● Pool, movie theater, youth sports</li> <li>● The Lark – musical/theater opportunities</li> <li>● Running Club</li> <li>● Hastings Symphony</li> <li>● God for small towns</li> <li>● Bike Route great where complete</li> <li>● Skating rink</li> <li>● Movie theater</li> <li>● Clay Co. – have to travel for Hastings, etc., but have pools &amp; fitness centers</li> </ul> | <p>Weaknesses:</p> <ul style="list-style-type: none"> <li>● Costs</li> <li>● Incomplete walking trail</li> <li>● Lack of coordination – competing events</li> <li>● Enough lighting and safety for trails</li> <li>● Bike paths</li> <li>● Scholarship for the low income families</li> <li>● Nothing for teenagers (little)</li> <li>● Streets/sidewalks not always conducive for walking/biking</li> <li>● Safe routes to school? Need complete bike routes to school</li> <li>● No venues for dancing</li> <li>● More social venues</li> <li>● Limited choices</li> <li>● Safe walking/jogging</li> <li>● Lack of social groups</li> </ul> |
|--|---|

**#5 Jobs and the Economy – Opportunities for employment and job advancement, “family-friendly” job culture, overall economic climate**

|  |   |
|--|---|
| <p>Strengths:</p> <ul style="list-style-type: none"> <li>● Strong industrial support</li> <li>● Some large employers</li> <li>● Decreased unemployment</li> <li>● Lower cost of living compared to Lincoln/Omaha</li> <li>● Good in north half of county</li> <li>● Hastings in close</li> <li>● Overall economic culture good with agriculture</li> </ul> | <p>Weaknesses:</p> <ul style="list-style-type: none"> <li>● Diversity of job market limited (Nuckolls)</li> <li>● Job opportunities for college students/high school kids</li> <li>● Difficulty identifying job opportunities</li> <li>● Less commercial growth (Tri-Cities) – Kearney, GI faster</li> <li>● Not everyone has access to Internet for online applications</li> <li>● Low unemployment</li> <li>● Same jobs making a lot more in larger Nebraska cities</li> <li>● Poor in south half of county – Hastings is a long drive</li> <li>● No paid family medical leave with most employers</li> <li>● Trouble finding jobs for those of less education</li> <li>● Only one or two employers with staff of 50+ employees. Most employment opportunities are low wages</li> <li>● Brain drain – loss of young people who go off to education &amp; training and don’t return</li> <li>● Lack of retail stores to keep residences here to buy local</li> </ul> |
|--|---|

**#6 Housing – Enough quality housing, affordability**

|  |  |
|--|--|
| <p>Strengths:</p> <ul style="list-style-type: none"> <li>● Lots of small affordable housing</li> <li>● Places for low income/homeless – Crossroads</li> <li>● Rehab housing</li> <li>● Blue Hill: Good housing</li> <li>● Red Cloud: Inexpensive housing</li> <li>● Recent increase of assisted living (Nuckolls) &amp; affordable aging individuals housing</li> <li>● Hastings Housing Authority</li> <li>● Some GREAT neighborhoods for families</li> <li>● Low cost rentals</li> </ul> | <p>Weaknesses:</p> <ul style="list-style-type: none"> <li>● Limited mid-sized housing</li> <li>● Limited family 3 bedroom homes</li> <li>● A lot of homes in need of repair</li> <li>● Blue Hill: Limited lots available</li> <li>● Red Cloud: Poor quality housing</li> <li>● Lack of affordable low income housing (Nuckolls)</li> <li>● Homeless housing is restrictive</li> <li>● Not enough houses for rent in Hastings</li> <li>● No new construction (very little) with many houses that should be torn down</li> <li>● Some rentals poor quality</li> <li>● Home purchase higher prices</li> <li>● Landlords NOT updating rentals – poor living environment for families, especially low income families</li> <li>● Limited number of quality housing</li> <li>● Limited advertising</li> <li>● Limited renting properties/apartments/condos</li> <li>● No communication with the college</li> </ul> |
|--|--|

**#7 Safety and Social Supports to Fill Community Needs – Safe place to live, work and play, support networks for times of stress (neighbors, support groups, faith community, outreach, community organizations, etc.), adequate volunteers**

|  |  |
|--|--|
| <p>Strengths:</p> <ul style="list-style-type: none"> <li>● Faith community outreach – YES!</li> <li>● PFLAG</li> <li>● Small communities – strong community supports (Nuckolls)</li> <li>● Good city and county police, fire EMT</li> <li>● Some organizations bring programs into higher risk schools</li> <li>● Small town: People helping people</li> <li>● South Central Partnership</li> <li>● Project Homeless Connect</li> <li>● Increasing community health workers</li> <li>● Good Sam Village</li> <li>● Active AA groups</li> </ul> | <p>Weaknesses:</p> <ul style="list-style-type: none"> <li>● Support networks</li> <li>● Sense of independence = persons not utilizing supports</li> <li>● Mental health facilitators</li> <li>● More male role models needed</li> <li>● We need more promotoras to educate the Spanish speaking families</li> <li>● Limited organizations for support groups</li> <li>● Homeless shelter full, lots of meals given by CSS &amp; could use more</li> <li>● Increase in suicide = not enough resources</li> <li>● Aging population – not as many volunteers</li> </ul> |
|--|--|



**#8 Health Issues – What are the most troubling health-related problems in our community?**

- Mental health (NOTE: lots of dittos here) – Access to prescription meds for those without insurance
- Fall prevention for the elderly
- Chronic disease & obesity/diabetes/heart disease/stroke
- Cancer and heart disease
- Access to healthcare – people that have a medical home
- Obesity
- People want to be health, but don't want to work at it
- Alcohol addiction
- More talk than action
- Drug addiction
- Need more prevention opportunities (cancer, etc.)

**#9 Risky Behaviors – What risky behaviors have the most impact on health and wellbeing in our community?**

- Alcohol/drugs
- Teen pregnancy/unprotected sex
- Not vaccinating
- Driving issues – drugs – driving under the influence
- Distracted drivers
- Suicide
- Intimate partner violence
- Not wearing seatbelts!!
- Texting and driving
- Bullying amongst youth
- Teenage drinking
- Social media
- Decrease income stress
- Family stress
- Depression
- Single parent
- Pornography, easy access
- Kids having kids (frowny face)
- Lack of parental supervision
- Marijuana

**#10 What specific assets (resources) does our community have that can be used to improve community health?**

- Healthy Hastings
- South Central Partnership
- Community grants
- Strong hospital and staff
- Safe kids
- Public safety – EMS
- Health Department
- Family planning
- Low crime rate
- Good Beginnings
- YMCA/City parks
- Schools
- Multicultural Coalition
- YMCA scholarships
- UNL Extension
- Church & religious organizations
- Superior Youth Athletic Association (SYAA) K12
- Access to young people and college students who are willing to help and volunteer
- Limited in small towns

# Appendix 1: Community Survey Results for Webster and Clay Counties

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*Use extreme caution when interpreting these results for Webster and Clay Counties due to the small sample sizes for each county.*

**Total number of respondents: 635**  
**Respondents from Webster County: 46**  
**Respondents from Clay County: 56**

| Table A1.1   | County (n=561) |               |              |                    |
|--------------|----------------|---------------|--------------|--------------------|
| Webster      | Adams          | Nuckolls      | Clay         | County Unspecified |
| 8.2%         | 63.1%          | 18.7%         | 10.0%        | -                  |
| 46 responses | 354 responses  | 105 responses | 56 responses | 74 responses       |

Note: those who did not specify a county are still included in the South Heartland total.

## The Healthcare System

| Table A1.2  | There are enough hospitals, emergency rooms, urgent care clinics and so forth available: |        |                |        |                                  |
|---|--|--------|----------------|--------|----------------------------------|
| % Agree or Strongly Agree*                          |  |        |                |        |                                  |
|   | Clay County  |        | Webster County |        | South Heartland (4-County Total) |
| In my community (town/city closest to where I live) | 42.9%  | (n=56) | 78.3%          | (n=46) | 83.5% (n=635)                    |
| In my county (county where I live)                  | 41.1%  | (n=56) | 71.7%          | (n=46) | 78.7% (n=635)                    |
| In my region (within 1 hour drive from my home)     | 87.5%  | (n=49) | 95.7%          | (n=44) | 88.5% (n=635)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.3  | There are enough doctor's offices, health clinics and so forth available: |        |                |        |                                  |
|---|---|--------|----------------|--------|----------------------------------|
| % Agree or Strongly Agree*                          |   |        |                |        |                                  |
|   | Clay County   |        | Webster County |        | South Heartland (4-County Total) |
| In my community (town/city closest to where I live) | 53.6%   | (n=56) | 67.4%          | (n=46) | 80.2% (n=635)                    |
| In my county (county where I live)                  | 48.2%   | (n=56) | 60.9%          | (n=46) | 75.9% (n=635)                    |
| In my region (within 1 hour drive from my home)     | 85.7%   | (n=56) | 93.5%          | (n=46) | 84.6% (n=635)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.4                    | The health care services that are available: |        |                |        |                                  |
|-------------------------------|--|--------|----------------|--------|----------------------------------|
| % Agree or Strongly Agree*    |  |        |                |        |                                  |
|                               | Clay County                                  |        | Webster County |        | South Heartland (4-County Total) |
| In my community are excellent | 63.0%  | (n=54) | 67.4%          | (n=43) | 81.2% (n=626)                    |
| In my county are excellent    | 54.5%  | (n=55) | 65.2%          | (n=46) | 77.9% (n=628)                    |
| In my region are excellent    | 83.6%  | (n=55) | 87.0%          | (n=46) | 81.9% (n=626)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.5</b>                                      | <b>There are enough medical specialists available:</b> |                       |   |
|--|--|-----------------------|---|
| <b>% Agree or Strongly Agree*</b>                      |  |                       |   |
|  | <b>Clay County</b>                                     | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community</b>                                 | 30.4% (n=56)   | 43.5% (n=46)          | 53.9% (n=635)                           |
| <b>In my county</b>                                    | 37.5% (n=56)   | 37.0% (n=46)          | 52.8% (n=635)                           |
| <b>In my region (within 1 hour drive from my home)</b> | 82.1% (n=56)   | 78.3% (n=46)          | 69.4% (n=635)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.6</b>                                      | <b>There are enough behavioral health services (counselors, licensed mental health practitioners):</b> |                       |   |
|--|--|-----------------------|---|
| <b>% Agree or Strongly Agree*</b>                      |  |                       |   |
|  | <b>Clay County</b>   | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community</b>                                 | 12.5% (n=56)   | 28.3% (n=46)          | 31.3% (n=635)                           |
| <b>In my county</b>                                    | 16.1% (n=56)   | 23.9% (n=46)          | 29.3% (n=635)                           |
| <b>In my region (within 1 hour drive from my home)</b> | 48.2% (n=56)   | 54.3% (n=46)          | 41.7% (n=635)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.7</b>  | <b>The hospital care being provided:</b> |                       |   |
|--|--|-----------------------|---|
| <b>% Agree or Strongly Agree*</b>                                    |  |                       |   |
|  | <b>Clay County</b>                       | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community are excellent</b>                                 | 53.1% (n=49)                             | 75.0% (n=40)          | 81.1% (n=610)                           |
| <b>In my county are excellent</b>                                    | 38.8% (n=49)                             | 68.9% (n=45)          | 75.9% (n=618)                           |
| <b>In my region (within 1 hour drive from my home) are excellent</b> | 80.4% (n=45)                             | 93.5% (n=46)          | 78.2% (n=629)                           |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table A1.8</b>                 | <b>Sometimes the cost of medical care prevents me from getting the care I need for myself or my immediate family.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 50.0% (n=56)                      | 52.2% (n=46)  | 52.0% (n=635)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |                         |   |  |
|-----------------------------------|---|-------------------------|---|--|
| <b>Table A1.9</b>                 | <b>Sometimes language or cultural barriers prevent me from getting the care I need for myself or my immediate family.</b> |                         |   |  |
| <b>% Agree or Strongly Agree*</b> |   |                         |   |  |
| <b>Clay County</b>                | <b>Webster County</b>   | <b>Spanish Speakers</b> | <b>South Heartland (4-County Total)</b> |  |
| 25.0% (n=56)                      | 0.0% (n=46)   | 81.5% (n=54)            | 10.4% (n=635)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table A1.10</b>                | <b>Sometimes I have difficulty finding transportation to health care providers.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 28.6% (n=56)                      | 4.3% (n=46)   | 9.9% (n=635)                            |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>Table A1.11</b>                | <b>The regular hours of operation at doctor's offices and health clinics are sometimes not convenient for scheduling care for myself or my immediate family.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Clay County</b>                | <b>Webster County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 44.6% (n=56)                      | 50.0% (n=46)   | 44.6% (n=635)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.12</b>                                     | <b>During the past 12 months, I have personally received health care services at a hospital or emergency room located</b> |                       |   |
|--|---|-----------------------|---|
| <b>% Yes*</b>  |   |                       |   |
|  | <b>Clay County</b>  | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my county</b>                                    | 10.7% (n=56)  | 26.1% (n=46)          | 38.7% (n=633)                           |
| <b>In my region (within 1 hour drive from my home)</b> | 28.6% (n=56)  | 34.8% (n=46)          | 26.7% (n=632)                           |

\*Response options: yes, no

| <b>Table A1.13</b>                                     | <b>During the past 12 months, I have personally received health care services at a doctor's office, health clinic, or health department located</b> |                       |   |
|--|---|-----------------------|---|
| <b>% Yes*</b>  |   |                       |   |
|  | <b>Clay County</b>  | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| <b>In my community</b>                                 | 32.7% (n=46)  | 63.4% (n=41)          | 77.1% (n=612)                           |
| <b>In my county</b>                                    | 26.5% (n=49)  | 50.0% (n=44)          | 60.8% (n=579)                           |
| <b>In my region (within 1 hour drive from my home)</b> | 54.7% (n=53)  | 76.7% (n=43)          | 56.0% (n=568)                           |

\*Response options: yes, no

| <b>Table A1.14</b> | <b>I have one person I think of as my personal doctor or health care provider (my medical "home" where I go for most health care needs)</b> |   |  |
|--------------------|---|---|--|
| <b>% Yes*</b>      |   |   |  |
| <b>Clay County</b> | <b>Webster County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 78.2% (n=55)       | 80.4% (n=46)  | 85.8% (n=632)                           |  |

\*Response options: yes, no

| <b>Table A1.15</b> | <b>[If responded “no” the preceding question]<br/>Instead, when I need them I receive my health care services from (check all that apply):</b> |  |
|--------------------|--|--|
|                    |  | <b>South Heartland<br/>(4-County Total)<br/>(n=72)</b> |
|                    | <b>Free clinics</b>  | 12.5%  |
|                    | <b>Community Health Center</b>   | 26.4%  |
|                    | <b>Health Department / Immunization Clinic</b>   | 13.9%  |
|                    | <b>Family Planning Agency</b>  | 8.3%   |
|                    | <b>Emergency Room at a hospital</b>  | 9.7%   |
|                    | <b>Urgent Care Clinic</b>  | 25.0%  |
|                    | <b>Chiropractor</b>  | 16.7%  |
|                    | <b>I delay care as long as possible or refuse care</b>   | 40.3%  |
|                    | <b>Other</b>   | 22.2%  |

| <b>Table A1.16</b> | <b>During the past 12 months, I have personally received dental care services at a dental clinic located</b> |              |                       |               |   |  |
|--------------------|--|--------------|-----------------------|---------------|---|--|
|                    | <b>% Yes*</b>  |              |                       |               |   |  |
|                    | <b>Clay County</b>   |              | <b>Webster County</b> |               | <b>South Heartland<br/>(4-County Total)</b> |  |
|                    | <b>In my community</b>   | 16.1% (n=56) | 30.4% (n=46)          | 51.8% (n=633) |   |  |
|                    | <b>In my county</b>  | 12.5% (n=56) | 26.1% (n=46)          | 39.9% (n=631) |   |  |
|                    | <b>In my region (within 1 hour drive from my home)</b>   | 69.6% (n=56) | 60.9% (n=46)          | 51.2% (n=633) |   |  |

\*Response options: yes, no

| <b>Table A1.17</b> | <b>I have one person I think of as my personal dentist</b> |                       |   |
|--------------------|--|-----------------------|---|
|                    | <b>% Yes*</b>  |                       |   |
|                    | <b>Clay County</b>   | <b>Webster County</b> | <b>South Heartland<br/>(4-County Total)</b> |
|                    | 67.9% (n=56)   | 82.6% (n=46)          | 81.7% (n=633)                               |

\*Response options: yes, no



| Table A1.18                                     | During the past 12 months, I have personally received behavioral health services (counseling, life coaching, etc.) |                |                                  |
|---|--|----------------|----------------------------------|
|   | % Yes*   |                |                                  |
|   | Clay County  | Webster County | South Heartland (4-County Total) |
| In my community                                 | 7.1% (n=56)  | 2.2% (n=46)    | 7.6% (n=635)                     |
| In my county                                    | 5.4% (n=56)  | 0.0% (n=46)    | 5.9% (n=631)                     |
| In my region (within 1 hour drive from my home) | 7.1% (n=56)  | 6.5% (n=46)    | 8.9% (n=631)                     |

\*Response options: yes, no

## Supports for Raising Children

| <b>Table A1.19</b>                | <b>My community is a good place to raise children.</b> |   |  |
|-----------------------------------|--|---|--|
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Clay County</b>                | <b>Webster County</b>                                  | <b>South Heartland (4-County Total)</b> |  |
| 88.5% (n=52)                      | 95.7% (n=46)   | 91.8% (n=598)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.20</b>                | <b>Safe childcare is available in my community.</b> |   |  |
|-----------------------------------|---|---|--|
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>                               | <b>South Heartland (4-County Total)</b> |  |
| 84.4% (n=45)                      | 56.1% (n=41)  | 74.8% (n=540)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.21</b>                | <b>Affordable childcare is available in my community.</b> |   |  |
|-----------------------------------|---|---|--|
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>                                     | <b>South Heartland (4-County Total)</b> |  |
| 63.4% (n=41)                      | 42.1% (n=38)  | 48.5% (n=503)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.22</b>                | <b>I am satisfied with the school system in my community.</b> |   |  |
|-----------------------------------|---|---|--|
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 73.6% (n=53)                      | 65.9% (n=44)  | 75.4% (n=565)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |                       |   |
|-----------------------------------|---|-----------------------|---|
| <b>Table A1.23</b>                | <b>There are adequate after school opportunities for elementary age children (including those run by schools and community groups).</b> |                       |   |
| <b>% Agree or Strongly Agree*</b> |   |                       |   |
| <b>Clay County</b>                |   | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| 44.0%                             | (n=50)  | 31.7%                 | (n=41)                                  |
|                                   |   | 46.2%                 | (n=509)                                 |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |                       |   |
|-----------------------------------|---|-----------------------|---|
| <b>Table A1.24</b>                | <b>There are adequate after school opportunities for middle and high school age students (sports teams, clubs, groups, etc.).</b> |                       |   |
| <b>% Agree or Strongly Agree*</b> |   |                       |   |
| <b>Clay County</b>                |   | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| 57.7%                             | (n=52)  | 56.1%                 | (n=41)                                  |
|                                   |   | 56.0%                 | (n=525)                                 |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |                       |   |
|-----------------------------------|--|-----------------------|---|
| <b>Table A1.25</b>                | <b>There are adequate recreation opportunities for children and youth in my community.</b> |                       |   |
| <b>% Agree or Strongly Agree*</b> |  |                       |   |
| <b>Clay County</b>                |  | <b>Webster County</b> | <b>South Heartland (4-County Total)</b> |
| 39.2%                             | (n=51)   | 31.8%                 | (n=44)                                  |
|                                   |  | 50.3%                 | (n=553)                                 |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Supports for Older Adults

| Table A1.26                | This community is a good place to grow old. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Clay County                | Webster County                              | South Heartland (4-County Total) |  |
| 86.5% (n=52)               | 76.1% (n=46)                                | 81.6% (n=587)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.27                | There are adequate recreation and exercise opportunities (parks, trails, fitness centers) for older adults in my community. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Clay County                | Webster County  | South Heartland (4-County Total) |  |
| 51.9% (n=52)               | 34.8% (n=46)  | 58.7% (n=583)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.28                | There are adequate housing options (assisted living, retirement centers, maintenance-free homes/apartments) for older adults in my community. |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Clay County                | Webster County  | South Heartland (4-County Total) |  |
| 35.6% (n=45)               | 62.2% (n=45)  | 55.8% (n=538)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.29                | There are adequate transportation options (public buses, shuttles, handi-vans, taxis) available to take older adults to medical facilities and shopping. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Clay County                | Webster County   | South Heartland (4-County Total) |  |
| 25.0% (n=48)               | 54.3% (n=46)   | 34.9% (n=539)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table A1.30</b>                | <b>There are adequate programs that provide meals for older adults in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 33.3% (n=39)                      | 73.8% (n=42)  | 49.4% (n=478)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>Table A1.31</b>                | <b>There are a range of available services (social clubs, social services, groups) in my community for older adults that are living alone.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Clay County</b>                | <b>Webster County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 35.7% (n=42)                      | 25.6% (n=39)   | 33.9% (n=460)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>Table A1.32</b>                | <b>There are adequate local options (residential care, intermediate and skilled nursing homes) for persons who need long-term care services.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Clay County</b>                | <b>Webster County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 35.7% (n=42)                      | 45.5% (n=44)   | 50.6% (n=514)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Recreational and Leisure Options

| Table A1.33                | There are adequate places to exercise and play in my community (parks, walking/biking trails, swimming pools, gyms, fitness centers, and so forth). |                                  |  |
|----------------------------|---|----------------------------------|--|
| % Agree or Strongly Agree* |   |                                  |  |
| Clay County                | Webster County  | South Heartland (4-County Total) |  |
| 65.4% (n=52)               | 48.9% (n=45)  | 69.9% (n=585)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.34                | There are adequate music, art, theater, and cultural events in my community. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Clay County                | Webster County   | South Heartland (4-County Total) |  |
| 22.6% (n=53)               | 34.8% (n=46)   | 37.6% (n=569)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.35                | There are adequate organized leisure time activities available in my community (such as groups, clubs, teams, and other social activities). |                |                                  |  |
|----------------------------|---|----------------|----------------------------------|--|
| % Agree or Strongly Agree* |   |                |                                  |  |
|                            | Clay County   | Webster County | South Heartland (4-County Total) |  |
| For young adults           | 34.0% (n=50)  | 23.9% (n=46)   | 37.2% (n=527)                    |  |
| For middle-aged adults     | 24.5% (n=49)  | 28.3% (n=46)   | 35.1% (n=533)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Jobs and the Economy

| Table A1.36  | For people living in my community, there are enough jobs |        |                |        |                                  |
|--|--|--------|----------------|--------|----------------------------------|
| % Agree or Strongly Agree*                                   |  |        |                |        |                                  |
|  | Clay County  |        | Webster County |        | South Heartland (4-County Total) |
| Located in town or a short drive away                        | 32.0%  | (n=50) | 29.5%          | (n=44) | 43.6% (n=548)                    |
| Located within the county                                    | 36.7%  | (n=49) | 25.6%          | (n=43) | 41.4% (n=536)                    |
| Located within the region (within 1 hour drive from my home) | 79.6%  | (n=49) | 65.9%          | (n=44) | 59.9% (n=529)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.37                                     | There are opportunities for employment advancement (promotions, job training, higher education) |        |                |        |                                  |
|---|---|--------|----------------|--------|----------------------------------|
| % Agree or Strongly Agree*                      |   |        |                |        |                                  |
|   | Clay County   |        | Webster County |        | South Heartland (4-County Total) |
| In my community                                 | 20.8%   | (n=48) | 9.1%           | (n=44) | 35.1% (n=535)                    |
| In my county                                    | 24.5%   | (n=49) | 6.8%           | (n=44) | 32.3% (n=520)                    |
| In my region (within 1 hour drive from my home) | 67.3%   | (n=49) | 59.1%          | (n=44) | 40.1% (n=529)                    |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.38                | Jobs in my county are "family friendly" (allow for flexible scheduling, reasonable hours, health insurance, and so forth). |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Clay County                | Webster County   | South Heartland (4-County Total) |  |
| 39.1% (n=46)               | 27.3% (n=44)   | 40.1% (n=529)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.39                | My employer encourages/promotes healthy behaviors. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Clay County                | Webster County                                     | South Heartland (4-County Total) |  |
| 67.3% (n=49)               | 76.7% (n=43)                                       | 81.5% (n=561)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

|                                   |   |   |  |
|-----------------------------------|---|---|--|
| <b>Table A1.40</b>                | <b>The economy is strong in my community.</b> |   |  |
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>                         | <b>South Heartland (4-County Total)</b> |  |
| 51.1% (n=47)                      | 17.8% (n=45)                                  | 41.0% (n=549)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree



## Housing

| <b>Table A1.41</b>                | <b>There is enough quality housing available in my community, including homes and apartments.</b> |   |  |
|-----------------------------------|---|---|--|
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 19.6% (n=51)                      | 20.0% (n=45)  | 27.1% (n=542)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.42</b>                | <b>Quality housing in my community is affordable for the average person.</b> |   |  |
|-----------------------------------|--|---|--|
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Clay County</b>                | <b>Webster County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 26.5% (n=49)                      | 36.4% (n=44)   | 23.5% (n=531)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Safety and Social Support

| <b>Table A1.43</b>                | <b>My community is a safe place to live, work, and play.</b> |   |  |
|-----------------------------------|--|---|--|
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Clay County</b>                | <b>Webster County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 90.6% (n=53)                      | 84.8% (n=46)   | 87.0% (n=576)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.44</b>                | <b>There are support networks in my community that help during times of stress and need (neighbors, support groups, faith community outreach, community organizations, etc.).</b> |   |  |
|-----------------------------------|---|---|--|
| <b>% Agree or Strongly Agree*</b> |   |   |  |
| <b>Clay County</b>                | <b>Webster County</b>   | <b>South Heartland (4-County Total)</b> |  |
| 73.3% (n=45)                      | 47.7% (n=44)  | 67.2% (n=527)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| <b>Table A1.45</b>                | <b>There are an adequate number of volunteers to fill the volunteer needs in my community.</b> |   |  |
|-----------------------------------|--|---|--|
| <b>% Agree or Strongly Agree*</b> |  |   |  |
| <b>Clay County</b>                | <b>Webster County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 48.8% (n=43)                      | 24.4% (n=45)   | 37.3% (n=499)                           |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Health Issues and Risky Behaviors

| Table A1.46   | Thinking about what you know from your personal experience and/or the experiences of others you know, what do you think are the 3 most troubling health-related problems in your community? (Choose ONLY 3) |                          |  |
|---|---|--------------------------|--|
|   | Clay County<br>(n=55)   | Webster County<br>(n=46) | South Heartland<br>(4-County Total)<br>(n=577) |
| Overweight/obesity  | 43.6%   | 60.9%                    | 51.6%  |
| Mental health issues (including depression)   | 29.1%   | 30.4%                    | 45.2%  |
| Cancers   | 40.0%   | 30.4%                    | 36.6%  |
| Addictions  | 20.0%   | 32.6%                    | 35.7%  |
| Aging problems (arthritis, hearing/vision loss, falls)  | 21.8%   | 52.2%                    | 26.5%  |
| Diabetes  | 27.3%   | 19.6%                    | 21.5%  |
| Heart disease   | 12.7%   | 17.4%                    | 15.3%  |
| High blood pressure   | 14.5%   | 17.4%                    | 9.0%   |
| Poor dental health  | 14.5%   | 8.7%                     | 8.3%   |
| Child abuse or neglect  | 1.8%  | 8.7%                     | 7.5%   |
| Teenage pregnancy   | 5.5%  | 2.2%                     | 6.8%   |
| Injuries (from crashes, falls, violence, etc.)  | 25.5%   | 2.2%                     | 6.6%   |
| Domestic violence   | 3.6%  | 0.0%                     | 5.0%   |
| Suicide   | 5.5%  | 0.0%                     | 4.3%   |
| Stroke  | 5.5%  | 4.3%                     | 3.6%   |
| Respiratory/lung disease  | 0.0%  | 4.3%                     | 3.3%   |
| Motor vehicle crash injuries  | 9.1%  | 0.0%                     | 1.7%   |
| Unsafe environment (poor air/water quality, chemical exposures)                                       | 3.6%  | 2.2%                     | 1.7%   |
| Asthma  | 9.1%  | 0.0%                     | 1.4%   |
| Sexually transmitted diseases   | 1.8%  | 0.0%                     | 1.4%   |
| Infectious diseases (hepatitis, TB, pertussis, flu, other diseases transmitted from person to person) | 0.0%  | 0.0%                     | 1.2%   |
| Rape/sexual assault   | 1.8%  | 4.3%                     | 0.9%   |
| Infant death  | 1.8%  | 0.0%                     | 0.5%   |
| HIV/AIDS  | 1.8%  | 0.0%                     | 0.2%   |
| Other   | 3.6%  | 8.7%                     | 5.7%   |

| <b>Table A1.47</b>  | <b>From the following list, choose 3 risky behaviors that you think have the most impact of health and well-being in your community? Choose only 3</b> |                                  |   |
|---|--|----------------------------------|---|
|   | <b>Clay County<br/>(n=56)</b>  | <b>Webster County<br/>(n=46)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=572)</b> |
| <b>Alcohol abuse</b>  | 53.6%  | 58.7%                            | 48.1%   |
| <b>Distracted driving (cell phone use, texting, etc.)</b>   | 42.9%  | 37.0%                            | 41.4%   |
| <b>Drug abuse</b>   | 21.4%  | 41.3%                            | 40.7%   |
| <b>Poor eating habits</b>                                   | 30.4%  | 30.4%                            | 34.4%   |
| <b>Not enough exercise</b>                                  | 32.1%  | 21.7%                            | 34.3%   |
| <b>Tobacco use (including smokeless tobacco)</b>            | 16.1%  | 37.0%                            | 23.8%   |
| <b>Drunk driving</b>  | 17.9%  | 21.7%                            | 16.3%   |
| <b>Avoiding routine visits to health professional</b>       | 10.7%  | 10.9%                            | 11.4%   |
| <b>Not managing stress</b>                                  | 16.1%  | 8.7%                             | 10.8%   |
| <b>Not using seatbelts</b>                                  | 14.3%  | 15.2%                            | 9.8%  |
| <b>Violence (domestic violence, fighting, etc.)</b>         | 8.9%   | 2.2%                             | 8.6%  |
| <b>Unsafe sex</b>   | 10.7%  | 4.3%                             | 7.9%  |
| <b>Not getting vaccine "shots" to prevent disease</b>       | 8.9%   | 4.3%                             | 6.5%  |
| <b>Not using child safety seat (or not using correctly)</b> | 14.3%  | 6.5%                             | 4.7%  |

## Alcohol Use and Prevention

| Table A1.48                | Alcohol use among individuals under 21 years old is a problem in my community. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Clay County                | Webster County   | South Heartland (4-County Total) |  |
| 79.2% (n=48)               | 76.7% (n=43)   | 76.0% (n=516)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.49                | My community should do more to prevent alcohol use among individuals under 21 years old. |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Clay County                | Webster County   | South Heartland (4-County Total) |  |
| 76.5% (n=51)               | 72.7% (n=44)   | 73.7% (n=536)                    |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

| Table A1.50                | People sometimes say that "drinking is a rite of passage for youth" meaning that it is an important milestone for them as they move into adulthood. What is your level of agreement? |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Agree or Strongly Agree* |  |                                  |  |
| Clay County                | Webster County   | South Heartland (4-County Total) |  |
| 9.6% (n=52)                | 0.0% (n=45)  | 7.7% (n=558)                     |  |

\*Response options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree

## Additional Questions

| Table A1.51               | How would you rate the overall quality of life in your community? |                                  |  |
|---------------------------|---|----------------------------------|--|
| % Excellent or Very Good* |   |                                  |  |
| Clay County               | Webster County  | South Heartland (4-County Total) |  |
| 55.4% (n=56)              | 45.7% (n=46)  | 55.8% (n=561)                    |  |

\*Response options: excellent, very good, good, fair, poor

| Table A1.52                | How would you rate your own personal health? |                                  |  |
|----------------------------|--|----------------------------------|--|
| % Healthy or Very Healthy* |  |                                  |  |
| Clay County                | Webster County                               | South Heartland (4-County Total) |  |
| 53.6% (n=56)               | 56.5% (n=46)                                 | 59.0% (n=561)                    |  |

\*Response options: very unhealthy, unhealthy, somewhat healthy, healthy, very healthy

| Table A1.53   | Approximately how many hours per month do you volunteer your time to community service? (e.g., schools voluntary organizations, churches, hospitals, etc.) |                       |  |
|---------------|--|-----------------------|--|
|               | Clay County (n=56)   | Webster County (n=46) | South Heartland (4-County Total) (n=561) |
| None          | 39.3%  | 17.4%                 | 28.3%                                    |
| 1-5 hours     | 37.5%  | 54.3%                 | 48.1%                                    |
| 6-10 hours    | 14.3%  | 13.0%                 | 14.4%                                    |
| Over 10 hours | 8.9%   | 15.2%                 | 9.1%                                     |

| Table<br>A1.54                                      | Considering stressors in your life, would you say you...? |                          |  |
|---|---|--------------------------|--|
|   | Clay County<br>(n=56)                                     | Webster County<br>(n=46) | South Heartland<br>(4-County Total)<br>(n=561) |
| Feel alone with nowhere to turn                     | 21.4%   | 17.4%                    | 13.2%  |
| Know who to turn to in time of need                 | 48.2%   | 63.0%                    | 60.6%  |
| Do not think stress is a significant factor for you | 30.4%   | 19.6%                    | 26.2%  |

## Demographics

| Table A1.55   | How do you pay for your health care? (check all that apply) |                          |  |
|---|---|--------------------------|--|
|   | Clay County<br>(n=54)                                       | Webster County<br>(n=46) | South Heartland<br>(4-County Total)<br>(n=558) |
| Pay cash (do not have insurance)  | 22.2%   | 6.5%                     | 10.9%  |
| Veterans' Administration/TRICARE  | 0.0%  | 2.2%                     | 1.1%   |
| Medicaid  | 1.9%  | 4.3%                     | 2.2%   |
| Medicare  | 9.3%  | 6.5%                     | 6.3%   |
| Private Health Insurance (e.g., Blue Cross, HMO, including insurance through an employer) | 72.2%   | 87.0%                    | 87.3%  |
| Indian Health Services  | 0.0%  | 0.0%                     | 0.0%   |
| Other   | 11.1%   | 4.3%                     | 4.9%   |

| Table A1.56   | How do you pay for dental care? (check all that apply) |                          |  |
|---|--|--------------------------|--|
|   | Clay County<br>(n=54)                                  | Webster County<br>(n=46) | South Heartland<br>(4-County Total)<br>(n=558) |
| Pay cash (do not have insurance)  | 37.0%  | 15.2%                    | 26.9%  |
| Veterans' Administration/ TRICARE   | 3.7%   | 2.2%                     | 0.9%   |
| Medicaid  | 1.9%   | 4.3%                     | 1.8%   |
| Medicare  | 5.6%   | 0.0%                     | 2.2%   |
| Private Health Insurance (e.g., Blue Cross, HMO, including insurance through an employer) | 55.6%  | 80.4%                    | 73.7%  |
| Indian Health Services  | 0.0%   | 0.0%                     | 0.0%   |
| Other   | 7.4%   | 2.2%                     | 2.0%   |



| <b>Table A1.57</b>                     | <b>How many children less than 18 years of age live in your household?</b> |   |  |
|--|--|---|--|
| <b>% One or more children under 18</b> |  |   |  |
| <b>Clay County</b>                     | <b>Webster County</b>  | <b>South Heartland (4-County Total)</b> |  |
| 64.1% (n=53)                           | 45.7% (n=46)   | 43.3% (n=550)                           |  |

| <b>Table A1.58</b>        | <b>How long have you lived in your community?</b> |                              |   |
|---------------------------|---|------------------------------|---|
|                           | <b>Clay County (n=56)</b>                         | <b>Webster County (n=46)</b> | <b>South Heartland (4-County Total) (n=561)</b> |
| <b>Less than one year</b> | 7.1%  | 2.2%                         | 4.1%  |
| <b>1-2 years</b>          | 3.6%  | 2.2%                         | 4.6%  |
| <b>3-4 years</b>          | 14.3%   | 4.3%                         | 6.1%  |
| <b>5-9 years</b>          | 10.7%   | 19.6%                        | 11.8%   |
| <b>10 or more years</b>   | 64.3%   | 71.7%                        | 73.8%   |

| <b>Table A1.59</b>    | <b>Age</b>                |                              |   |
|-----------------------|---------------------------|------------------------------|---|
|                       | <b>Clay County (n=56)</b> | <b>Webster County (n=46)</b> | <b>South Heartland (4-County Total) (n=561)</b> |
| <b>Under 18 years</b> | 23.2%                     | 0.0%                         | 2.7%  |
| <b>18-24</b>          | 5.4%                      | 0.0%                         | 3.0%  |
| <b>25-39</b>          | 17.9%                     | 19.6%                        | 26.0%   |
| <b>40-54</b>          | 25.0%                     | 43.5%                        | 33.0%   |
| <b>55-64</b>          | 23.2%                     | 28.3%                        | 24.8%   |
| <b>65-80</b>          | 5.4%                      | 8.7%                         | 9.3%  |
| <b>Over 80</b>        | 0.0%                      | 0.0%                         | 1.2%  |

| <b>Table A1.60</b> | <b>Gender</b>                 |                                  |   |
|--------------------|-------------------------------|----------------------------------|---|
|                    | <b>Clay County<br/>(n=56)</b> | <b>Webster County<br/>(n=46)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=561)</b> |
| <b>Male</b>        | 19.6%                         | 26.1%                            | 18.9%   |
| <b>Female</b>      | 80.4%                         | 73.9%                            | 81.1%   |

| <b>Table A1.61</b>                   | <b>Marital Status</b>         |                                  |   |
|--------------------------------------|-------------------------------|----------------------------------|---|
|                                      | <b>Clay County<br/>(n=55)</b> | <b>Webster County<br/>(n=46)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=560)</b> |
| <b>Married</b>                       | 65.5%                         | 82.6%                            | 72.5%   |
| <b>Divorced</b>                      | 1.8%                          | 6.5%                             | 8.9%  |
| <b>Separated</b>                     | 0.0%                          | 0.0%                             | 1.4%  |
| <b>Widowed</b>                       | 7.3%                          | 2.2%                             | 5.0%  |
| <b>Never married</b>                 | 23.6%                         | 4.3%                             | 9.3%  |
| <b>Member of an unmarried couple</b> | 1.8%                          | 4.3%                             | 2.9%  |

| <b>Table A1.62</b>                         | <b>Which of the following best reflects your race</b> |                                  |   |
|--|---|----------------------------------|---|
|  | <b>Clay County<br/>(n=53)</b>                         | <b>Webster County<br/>(n=46)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=558)</b> |
| <b>White</b>                               | 98.1%   | 97.8%                            | 97.1%   |
| <b>Black or African American</b>           | 1.9%  | 0.0%                             | 0.5%  |
| <b>Asian</b>                               | 0.0%  | 0.0%                             | 0.5%  |
| <b>American Indian or Alaska Native</b>    | 0.0%  | 0.0%                             | 0.2%  |
| <b>Native Hawaiian or Pacific Islander</b> | 0.0%  | 2.2%                             | 0.2%  |
| <b>Other</b>                               | 0.0%  | 0.0%                             | 1.4%  |

| <b>Table A1.63</b> | <b>Are you Hispanic or Latino?</b> |   |  |
|--------------------|------------------------------------|---|--|
| <b>% Yes</b>       |                                    |   |  |
| <b>Clay County</b> | <b>Webster County</b>              | <b>South Heartland (4-County Total)</b> |  |
| 20.8% (n=53)       | 2.2% (n=46)                        | 11.8% (n=558)                           |  |

| <b>Table A1.64</b>                                      | <b>Education: Highest Year of School Completed?</b> |                              |   |
|---|---|------------------------------|---|
|   | <b>Clay County (n=52)</b>                           | <b>Webster County (n=46)</b> | <b>South Heartland (4-County Total) (n=557)</b> |
| Never attended school or only attended kindergarten     | 0.0%  | 0.0%                         | 0.2%  |
| Grades 1-8 (Elementary)                                 | 9.6%  | 0.0%                         | 2.7%  |
| Grades 9-11 (Some high school)                          | 25.0%   | 0.0%                         | 3.9%  |
| Grade 12, High school graduate or GED                   | 7.7%  | 15.2%                        | 8.8%  |
| College 1 to 3 years (some college or technical school) | 19.2%   | 43.5%                        | 38.2%   |
| College 4 years or more (college graduate)              | 15.4%   | 30.4%                        | 28.7%   |
| Post-college (Graduate school / Advanced Degree)        | 23.1%   | 10.9%                        | 17.4%   |

| <b>Table A1.65</b>   | <b>Household income</b>   |                              |   |
|----------------------|---------------------------|------------------------------|---|
|                      | <b>Clay County (n=54)</b> | <b>Webster County (n=46)</b> | <b>South Heartland (4-County Total) (n=559)</b> |
| Less than \$20,000   | 11.1%                     | 4.3%                         | 7.7%  |
| \$20,000 to \$29,999 | 14.8%                     | 6.5%                         | 9.7%  |
| \$30,000 to \$49,999 | 24.1%                     | 28.3%                        | 18.8%   |
| \$50,000 to \$74,999 | 25.9%                     | 26.1%                        | 30.4%   |
| \$75,000 to \$99,999 | 9.3%                      | 30.4%                        | 17.5%   |
| Over \$100,000       | 14.8%                     | 4.3%                         | 15.9%   |

| <b>Table A1.66</b>  | <b>Are you or an immediate family member (child, spouse parent or sibling) either currently serving in the military or a veteran of the military (mark all that apply)</b> |                                  |   |
|---|--|----------------------------------|---|
|   | <b>Clay County<br/>(n=53)</b>  | <b>Webster County<br/>(n=46)</b> | <b>South Heartland<br/>(4-County Total)<br/>(n=552)</b> |
| <b>Neither I nor an immediate family member currently serves in the military or is a military veteran</b> | 75.5%  | 69.6%                            | 76.6%   |
| <b>I currently serve in the military</b>  | 0.0%   | 0.0%                             | 0.0%  |
| <b>I am a veteran of the military</b>   | 0.0%   | 4.3%                             | 3.6%  |
| <b>An Immediate family member currently serves in the military</b>  | 11.3%  | 6.5%                             | 6.5%  |
| <b>An immediate family member is a veteran of the military</b>  | 20.8%  | 21.7%                            | 17.2%   |

## Appendix 2: YMCA of Hastings Community Needs Assessment Survey Results

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The YMCA of Hastings conducted a survey in June and July, 2015 to assess the needs of the community. The survey was distributed online through a multitude of channels and contained questions for two segments of the population: adults and youth/teens. A total of 284 community members responded to the survey. Following is a summary of the results broken down into the two sections of community needs for adults and community needs for youth/teens.

The top identified adults needs include services aimed at engaging the entire family unit, supporting adults in practicing positive habits, and the availability of learning opportunities for adults (Table A2.1).

| Table A2.1 | Community needs for <u>adults</u>  |   |
|------------|--|---|
|            |  | % Identifying topic as a community need |
|            | Availability of services aimed at engaging the entire family unit                                    | 24%                                     |
|            | Adults are supported in practicing positive habits that include physical activity and healthy eating | 17%                                     |
|            | Availability of learning opportunities for adults  | 13%                                     |
|            | Presence of community spaces where adults can develop connections with others                        | 13%                                     |
|            | Presence of safe and secure community spaces for adults  | 11%                                     |
|            | Adults have convenient access to structured activities in a community facility                       | 10%                                     |
|            | Availability of services that engage senior populations  | 10%                                     |
|            | Adults receiving support from groups within the community  | 10%                                     |
|            | Availability of service or volunteer opportunities for adults  | 4%                                      |

(Source: YMCA of Hastings, Online Community Needs Assessment)

The top identified needs for youth/teens include the availability of non-athletic programs, youth are supported in practicing positive habits, and the availability of academic support structures for youth outside of school (Table A2.1).

| Table A2.2  | Community needs for <u>youth/teens</u> |   |
|---|--|---|
|   |  | % Identifying topic as a community need |
| Availability of non-athletic programs that draw out youth skills, creativity, and confidence        |  | 41%                                     |
| Youth are supported in practicing positive habits that include physical activity and healthy eating |  | 34%                                     |
| Availability of academic support structures for youth outside of school (tutoring, mentoring, etc.) |  | 30%                                     |
| Youth exit high school with college or career readiness skills                                      |  | 30%                                     |
| Safe and secure community spaces for our youth  |  | 28%                                     |
| Presence of community spaces where youth can develop connections with others                        |  | 26%                                     |
| Youth have opportunities to build good character  |  | 26%                                     |
| Availability of service or volunteer opportunities for youth  |  | 24%                                     |
| Youth have convenient access to structured activities in a community facility                       |  | 20%                                     |
| Children enter kindergarten prepared for success  |  | 18%                                     |

(Source: YMCA of Hastings, Online Community Needs Assessment)