

**Eastern Shore Health District
Community Health Assessment
2023 - 2024
Accomack County
Northampton County**



Protecting You and Your Environment

Letter from the Director

Dear Reader,

On behalf of the Eastern Shore Health District, I am pleased to present the 2023/2024 Eastern Shore Community Health Assessment (CHA). This is the first such assessment conducted with the Eastern Shore Health District as the lead author in the history of the Eastern Shore Health District. This report provides a comprehensive assessment of the community's health and includes input from those who live, work and play on the Eastern Shore of Virginia. The CHA process engaged our community members and many community partner organizations to determine the top health issues they believed should be prioritized and addressed for our community. The Eastern Shore Health District is committed to improving the health of our community through direct action and various community collaborations. It is our goal to continue to work hard to enhance the quality of life within our community through better health.

This CHA would not have been possible without the incredible support and participation from our community members and partners and our CHA Steering Committee members who met several times throughout the process to refine the assessment. In addition, I'd like to provide special recognition to the Eastern Shore Health District employees directly involved with conducting the CHA: Allison Bradshaw, Population Health Manager and CHA lead; Laurie Laird, Population Health Care Coordinator; Gabriela Ramirez, Community Health Worker; and Rossetalina Delouche, Community Health Worker. Without their hard work and dedication to public health and the Eastern Shore community this assessment would not have been possible.

The CHA is just the first phase in improving the health of our community as its purpose is to identify the health issues the community wants to have addressed. We will use that information to guide decisions on which initiatives the Eastern Shore Health District can implement directly, or in partnership with other community members/entities, to address those issues. We look forward to continued collaboration from our community as we develop our Community Health Improvement Plan which will establish the issues we will address, the ways in which we intend to address them and how we will measure progress over the next few years. As always, the Eastern Shore Health District is excited to serve the people of the Eastern Shore and continue to have a positive influence on the health of our community.

Sincerely,

Jon Richardson
Health Director, Eastern Shore Health District

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Acknowledgements

We would like to thank all the agencies and individuals who participated in this process. Their contributions made this effort representative of our community and added unique perspectives to the conversation.

First, we are grateful to all the members of the community who took part in the survey. Their time and thoughts were incredibly valuable in understanding health on the Eastern Shore.

We'd also like to thank the members of our Steering Committee, who provided insight and feedback on the process and results of our community health assessment. They include representatives from the following organizations:

Accomack County Public Schools
Accomack-Northampton Planning District Commission
Accomack County Department of Social Services
Eastern Shore Community Services Board
Eastern Shore Health District
Eastern Shore Rural Health
Northampton County Department of Social Services
Northampton County Public Schools
Riverside Health System

Additionally, we appreciate the input from other members of the local public health network on the Eastern Shore, including the Department of Public Safety, the Department of Veterans Services, Eastern Shore Community College, staff at long-term care facilities, the Town of Chincoteague, and Wallops Flight Facility.

Finally, we would like to thank each of the community partners who worked with us to distribute the survey. Without your help, this assessment would be far less representative of the Eastern Shore. They include:

B & B Convenience	Eastern Shore Area Agency on Aging/
The Book Bin	Community Action Agency
Cape Charles Baptist Church	Eastern Shore Community College
Cape Charles Farmers Market	Eastern Shore Nursery of Virginia
Casa Hispana	Eastern Shore Public Library System
Cherrystone Aqua Farms	Eastern Shore Workforce Development
Chincoteague Alliance Culture Center	Center
Chincoteague Town Office	Eastern Shore YMCA
Cordova Mexican store	Eastville Laundromat
David's Nursery	El Crucero (Belle Haven)
Dos Santos Food Pantry & Thrift Store	El Crucero (Hallwood)
Dunne Avenue Vintage and Thrift	El Mercadito
Eastern Shore Agricultural Fair	El Ranchito
	El Remolino

Habitat for Humanity Restore
Island Community House
Light House Ministries Thrift Store
Lloyds Pharmacy
Mappsville Baptist Church
Matthews Market
Oak Hall Laundromat
Onancock Laundromat and Thrift Store
Perdue Farms
Tienda Emmanuel

Rayfield's Pharmacy
Sawmill Park
Second Chance Thrift Store
Star Transit
Tankard Nurseries
Tractor Supply Co.
Tyson Foods
Wards Tires and Rims
Yiannis Market

Executive Summary

Health and wellbeing are vital parts of a thriving community. These factors are not limited to the physical health of individuals, but also include mental and emotional health, behaviors, the built and natural environment, and social factors.

From May 2023 through February 2024, the Eastern Shore Health District facilitated a Community Health Assessment (CHA) to better understand the top health concerns facing Accomack and Northampton Counties, and to inform the Community Health Improvement Plan (CHIP). The CHIP will include priorities and initiatives the health district will adopt to address the concerns raised in the CHA. The community-centered CHA incorporates data from surveys and local statistics, as well as input from key community partners on the Eastern Shore.

The health assessment revealed several community experiences that offer opportunities for improvement, including poor health outcomes (e.g., diabetes, hypertension), health behaviors that exacerbate these conditions, and difficulty accessing high quality health care. Considering the breadth of these concerns, the health district has identified four priority areas to be utilized in the CHIP. These include health education and behavior change, availability of quality services, social determinants of health, and access to services.

The Eastern Shore Health District will develop a multi-year implementation plan to address these priority areas considering the role of the health district, what evidence-based strategies could be used to address them, and an understanding of the resources needed to do so.

Introduction

Background

The Eastern Shore Health District (ESHD) has historically partnered with outside community organizations to conduct a community health assessment. However, with the evolution of public health in the wake of the COVID-19 pandemic, ESHD saw the opportunity to conduct an independent assessment specifically to review the role of the health district in meeting the community's needs.

Other community health assessments have been conducted on the Eastern Shore by Eastern Shore Rural Health (2021) and Riverside Health System (2022).

For this CHA, the population has been defined as community members of Accomack County and Northampton County, also called the Eastern Shore.

Purpose and Values

The community health assessment offers the opportunity to better understand health on the Eastern Shore. ESHD chose to conduct the CHA to understand the greatest health concerns in our community and identify the ones that the health district may be positioned to address. The information obtained from the CHA will be included in the Community Health Improvement Plan (CHIP) process, in which the health district will identify the evidence-based strategies that can be used to address such concerns, while taking funding and level of effort into consideration.

To accomplish this, it was important to settle on a set of values that the health district would adhere to, including emphasizing our key partnerships, listening to our community, taking a simple and lean approach, and prioritizing effective communication.

Approach and Methods

The Eastern Shore Health District utilized the Mobilizing for Action through Planning and Partnerships (MAPP) framework - a community-driven strategic planning process developed by the National Association of County and City Health Officials (NACCHO). MAPP emphasizes collaboration with various stakeholders and is flexible to fit the needs of the community while providing structure to ensure a thorough and thoughtful assessment and action plan. Additionally, MAPP embraces the concept that health is not simply a matter of medical treatment or the absence of disease, but that health must be viewed from a community perspective.

The MAPP framework is composed of six phases designed to assess the most pressing population health issues, and then follow the work through implementation and evaluation.

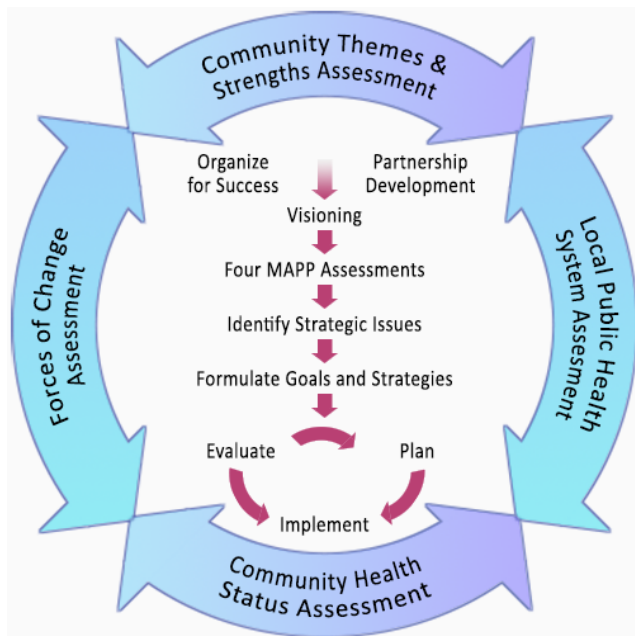


Figure 1. NACCHO's MAPP model

The first two phases of the MAPP process took place during May and June 2023. ESHD formed a Core Group of health district employees and invited partners from key service organizations on the Eastern Shore to be part of the Steering Committee. During the first two phases, this group informed the process, objectives, and values of the CHA.

Starting in July 2023, ESHD began conducting the assessments that make up the content of the CHA. These four different assessments include reviewing the community's health status, the themes that the community itself identifies as most important, external forces that may impact the community and its health, and the strength of the local public health network.

These assessments were completed in February 2024, when the Steering Committee reconvened to review the findings and identify the top health concerns for the community.

The remaining phases - formulating goals and strategies, and the action cycle - will be part of the Community Health Improvement Plan.

Community Health Assessments

Overview

Starting in July 2023, ESHD began conducting the assessments necessary to understand our community's health. The following assessments were included:

1. Community Health Status

This assessment provides quantitative information about health conditions in the community, such as health outcomes, behaviors, demographics, and other

measures that reflect a broad definition of health. This requires a review of secondary data from various sources.

2. Community Themes

This assessment provides qualitative data on how the community perceives its own health, the behaviors that are prevalent in the community, barriers to being healthy, and how the community's health could improve. It requires the collection of primary data directly from community members.

3. Forces of Change

This assessment identifies the trends, factors, and events that affect a community, and its health.

4. Local Public Health Network

This assessment considers the available resources in a community, and how well they are meeting the existing or forecasted needs.

Community Health Status

The data collected through the community health status assessment is one component to determine how healthy a community is. This data is captured through other organizations via various mechanisms, including surveys, reportable data, and statistical modeling. These indicators were selected based on best practices, data availability, and local health department knowledge of emerging health issues. It is helpful to consider this data compared to years past to see the direction in which the indicators are moving, as well as compared to the commonwealth of Virginia as a whole. It can also be analyzed by various subpopulations to identify inequities within our community. It is worth noting that data collected in 2020 was significantly affected by the COVID-19 pandemic.

See all data sources listed in Appendix A.

Demographics

The Eastern Shore is home to just over 45,000 people, though it has a robust summer tourist population, as well as migrant laborers who work in agriculture and aquaculture for approximately half the year. Accomack County's population (33,000+) is over twice the size of the population in Northampton County (12,000+). These populations have remained relatively stable over the past 10 years.

The median age in Accomack is 47.1, while the median age in Northampton is 50.7, both of which are in the top quartile for highest median age in counties in Virginia. In Accomack, this number has been consistent over the past several years, while in Northampton, the median age has increased.

The population on the Eastern Shore is mostly non-Hispanic White (58.4%). The two other largest ethnic or racial groups are non-Hispanic Black or African American (29.4%) and Hispanic (of any race) (9.1%). There is also a growing population of Haitian Creole people, though there are no formal census numbers for this community.

Table 1. Demographic data for Accomack County, Northampton County, and combined as the Eastern Shore

Demographics	Accomack County N (%)	Northampton County N (%)	Eastern Shore N (%)
Total Population	33,388 (100)	12,226 (100)	45,614 (100)
Age			
Under 18	7,543 (20.8)	2,387 (19.5)	9,336 (10.5)
18 - 24	1,915 (5.7)	748 (6.1)	2,751 (6.0)
25 - 34	3,799 (11.4)	1,183 (9.7)	4,982 (10.9)
35 - 44	3,233 (9.7)	1,080 (8.8)	4,313 (9.5)
45 - 54	4,007 (12.0)	1,395 (11.4)	5,402 (11.8)
55 - 64	5,336 (16.0)	2,125 (17.4)	7,461 (16.4)
65 or over	8,061 (24.1)	3,308 (27.1)	11,369 (24.9)
Median age	47.1	50.7	48.1
Gender			
Female	17,129 (51.3)	6,354 (52.0)	23,483 (51.5)
Male	16,259 (48.7)	5,872 (48.0)	22,131 (48.5)
Race/Ethnicity			
African American or Black alone	9,503 (28.5)	3,899 (31.9)	13,402 (29.4)
Asian alone	255 (0.8)	130 (1.1)	385 (0.8)
Hispanic or Latino (of any race)	3,042 (9.1)	1,131 (9.3)	4,173 (9.1)
Native American alone	69 (0.2)	0 (0.0)	69 (0.2)
White or Caucasian alone	19,932 (59.7)	6,713 (54.9)	26,646 (58.4)
Two or more races (non-Hispanic) or some other race (non-Hispanic)	587 (1.7)	352 (2.9)	939 (2.1)
Household Income			
Less than \$25,000	3,071 (21.7)	1,138 (21.5)	4,208 (21.6)
\$25,000 - \$49,999	3,977 (28.1)	1,498 (28.3)	5,474 (28.2)
\$50,000 - \$74,999	2,491 (17.6)	847 (16.0)	3,337 (17.2)
\$75,000 or more	4,642 (32.8)	1,815 (34.3)	6,457 (33.2)
Median household income	\$50,900	\$51,100	\$51,000
Ever Served in Any Branch of the U.S Military (civilian population 18 years and over)			
Yes	2,489 (9.5)	976 (10.0)	3,465 (9.6)
No	23,807 (90.5)	8,791 (90.0)	32,598 (90.4)

The Eastern Shore is a rural community with a strong history of agriculture and aquaculture industry. It is only connected to the mainland of Virginia by a 17-mile span of bridges and tunnels, and includes Tangier Island, the half-mile square island in the Chesapeake Bay that is accessible only by plane or boat. Some of the largest employers are two poultry plants located in Accomack County, the schools and county offices, NASA (Wallop's Flight Facility

located in northern Accomack County), Riverside Health System, and Eastern Shore Rural Health, along with several agriculture and aquaculture companies.

Social Determinants of Health

Aside from general demographics of a community, there are additional conditions where people live, learn, work, play, worship, and age that affect a wide range of health outcomes and risks. This includes measures of economic stability, access to quality education, access to quality healthcare, the neighborhood and built environment, and the social and community context. The following table reflects the most recent available data as of January 2024 for each county in the district, as well as the value for the entire commonwealth of Virginia.

There are several data points that show a dramatic difference between the population on the Eastern Shore compared to the commonwealth of Virginia. The percentage of households without broadband of any type and households with no vehicle available are significantly higher on the Eastern Shore than across Virginia. Both of these measures are an indicator of access to services and information and are highly correlated with health. Additionally, the percentage of people without insurance is significantly higher on the Eastern Shore than across Virginia, which is correlated to health care access as well.

It is also of note that there are differences within communities on the Eastern Shore. For example, the median household income for White community members on the Eastern Shore is \$57,800; for Hispanic community members it is \$46,500; and for Black community members it is \$39,100.

Table 2. Social Determinants of Health measures

	Accomack	Northampton	Virginia
Median household income	\$50,900	\$51,100	\$80,900
Living Wage	\$38.35	\$40.37	\$49.23
High school graduation rate	82%	93%	89%
Percent of households with broadband of any type	77.0%	81.4%	87.6%
Percent of households with no vehicle available	8.7%	9.1%	6%
Percent of population who speak English less than "very well"	5.9%	3.9%	5.8%
Uninsured adults (19 - 64 years)	3352 (18.9%)	931 (14.6%)	10.9%
Uninsured children (under 19 years)	682 (9.5%)	320 (13.1%)	4.9%
Veteran status	9.7%	10.0%	10.2%
Children in single-parent households	37%	37%	24%
Households with individuals under 18 years	24.7%	22.8%	30.8%
Childcare cost burden	22%	27%	27%
Food insecurity	12%	13%	8%
Juvenile arrest per 1,000 juveniles	24	79	n/a

Length of Life

Life expectancy on the Eastern Shore is somewhat lower than for the commonwealth of Virginia (79.1 years). In Accomack County, the life expectancy is 75.3 years; in Northampton County, it is 75 years.

The leading causes of death for people under the age of 75 in Accomack County include malignant neoplasms (e.g., cancers), diseases of the heart, accidents, diabetes mellitus, and chronic lower respiratory diseases. In Northampton County, the top two causes of death for people under the age of 75 are malignant neoplasms and diseases of the heart. The following table reflects the most recent available data as of January 2024 for each county in the district, as well as the value for the entire commonwealth of Virginia.

Several of these rates are significantly higher than the rate for Virginia, prompting a closer look at some of the underlying causes and implications.

Table 3. Length of Life measures

	Accomack	Northampton	Virginia
Life expectancy	75.3	75	79.1
Maternal mortality rate (maternal deaths per 100,000 live births)	195.31	0	47.94
Infant mortality rate (deaths of infants up to 1 year old per 1,000 live births)	8.79	3	5.75
Child mortality rate (deaths of children ages 1- 9 years old per 1,000 children ages 1 - 9 years old)	0.61	0.59	0.15
Motor vehicle crash deaths per 100,000 population	19	25	10
Percentage of driving deaths with alcohol involvement	33%	21%	30%
Firearm fatalities per 100,000 population	16	19	19
Injury deaths per 1000,000 population	84	98	68

Quality of Life

Quality of life indicators are collected through the Behavioral Risk Factor Surveillance System and ask respondents about the number of days in the past month they have experienced mental or physical health that was not good. The data for the Eastern Shore shows that people here experience more days with poor health each month than across the commonwealth of Virginia.

Table 4. Quality of Life measures

	Accomack	Northampton	Virginia
Percentage of adults reporting fair or poor health	20%	18%	12%
Average number of physically unhealthy days reported in the last 30 days	3.9	3.6	2.7
Average number of mentally unhealthy days reported in the last 30 days	4.8	4.9	4.1

Health Behaviors

There are several behaviors that can affect an individual's health, and when considered at the population level are worth addressing. Adult smoking and physical inactivity rates are higher on the Eastern Shore than the rest of Virginia. The physical inactivity rate is likely influenced by the limited access to exercise opportunities (see Table 8 below).

Table 5. Health Behaviors measures

	Accomack	Northampton	Virginia
Adult smoking	21%	19%	14%
Excessive drinking	15%	16%	17%
Physical inactivity	29%	27%	20%

Health Outcomes

There are several adverse health outcomes that occur at higher rates on the Eastern Shore than the commonwealth of Virginia, including arthritis, high blood pressure, cancer, high cholesterol, kidney disease, COPD, heart disease, diabetes, and stroke. Additionally, the percentage of people with limited mobility is higher on the Eastern Shore than for the commonwealth of Virginia.

Table 6. Health Outcomes measures; percentage of adults over age 18 who have the following conditions.

	Accomack	Northampton	Virginia
Arthritis	31.4%	37.1%	25.2%
Asthma	11.2%	10.8%	10.4%
High blood pressure	45.5%	45.1%	32.2%
Cancer	8.7%	9.4%	6.2%
High cholesterol	42.4%	43.4%	35.7%
Kidney disease	4.3%	4.5%	2.7%
COPD	10.6%	9.8%	6.2%
Heart disease	8.9%	8.8%	4.9%
Diabetes	16.6%	16.4%	10.1%
Depression	34.1%	37.1%	n/a
Obesity	39.9%	36.9%	34.8%
Stroke	4.9%	4.9%	2.8%
All teeth lost	14.2%	12.6%	11.0%
Disability - Hearing	4.3%	6.4%	3.3%
Disability - Vision	3.6%	3.0%	2.2%
Disability - Cognitive	4.7%	5.2%	4.7%
Disability - Mobility	8.5%	11.8%	6.2%
Disability - Independent living	6.0%	7.1%	5.3%

Reproductive Health measures

The Eastern Shore has high rates of teen births, neonatal abstinence syndrome, pre-term births, and newly diagnosed cases of chlamydia.

Table 7. Reproductive Health measures

	Accomack	Northampton	Virginia
Percentage of live births with low birthweight	10.0%	9.0%	8.0%
Percentage of live births that occur before 37 weeks of pregnancy	13.9%	10.0%	9.6%
Teen births per 1,000 female population age 15 - 19	29	32	15
Neonatal Abstinence Syndrome per 1,000 birth hospitalizations	11.9	0	5.7
Sexually Transmitted Infections, newly diagnosed chlamydia cases per 100,000 population	649.8	597.8	479.9
Percentage of mothers who have not received adequate prenatal care	3.6%	6%	4.1%

Prevention measures

To understand a community's relationship with health, it's also important to consider the prevalence of certain prevention measures, such as regular primary healthcare and screenings for certain diseases. The rates of these indicators on the Eastern Shore are generally on par with the rate across Virginia. However, access to exercise opportunities, such as living within three miles of a recreational facility in a rural area, on the Eastern Shore are dramatically lower than for the commonwealth of Virginia.

Table 8. Prevention measures

	Accomack	Northampton	Virginia
Annual checkup	80.3%	81.4%	75.0%
Dental visit	59.2%	62.4%	68.3%
Blood pressure medication	84.3%	85.2%	75.4%
Cholesterol screening	87.7%	89.5%	86.3%
Mammography	75.0%	75.7%	78.4%
Cervical cancer screening	81.9%	82.7%	n/a
Colorectal cancer screening	74.1%	75.5%	72.4%
Access to exercise opportunities	35.0%	43.0%	83.0%

Human Resources for Health

Having enough human resources for health for the population is a critical component to the health of a community. On the Eastern Shore, there are typically fewer health care providers per person than for the whole commonwealth of Virginia.

Table 9. Human Resources for Health measures

	Accomack	Northampton	Virginia
Ratio of population to Mental Health Providers	810:1	1010:1	450:1
Ratio of population to Primary Care Physicians	2300:1	970:1	1350:1
Ratio of population to Primary Care Providers who are not physicians	1230:1	810:1	860:1

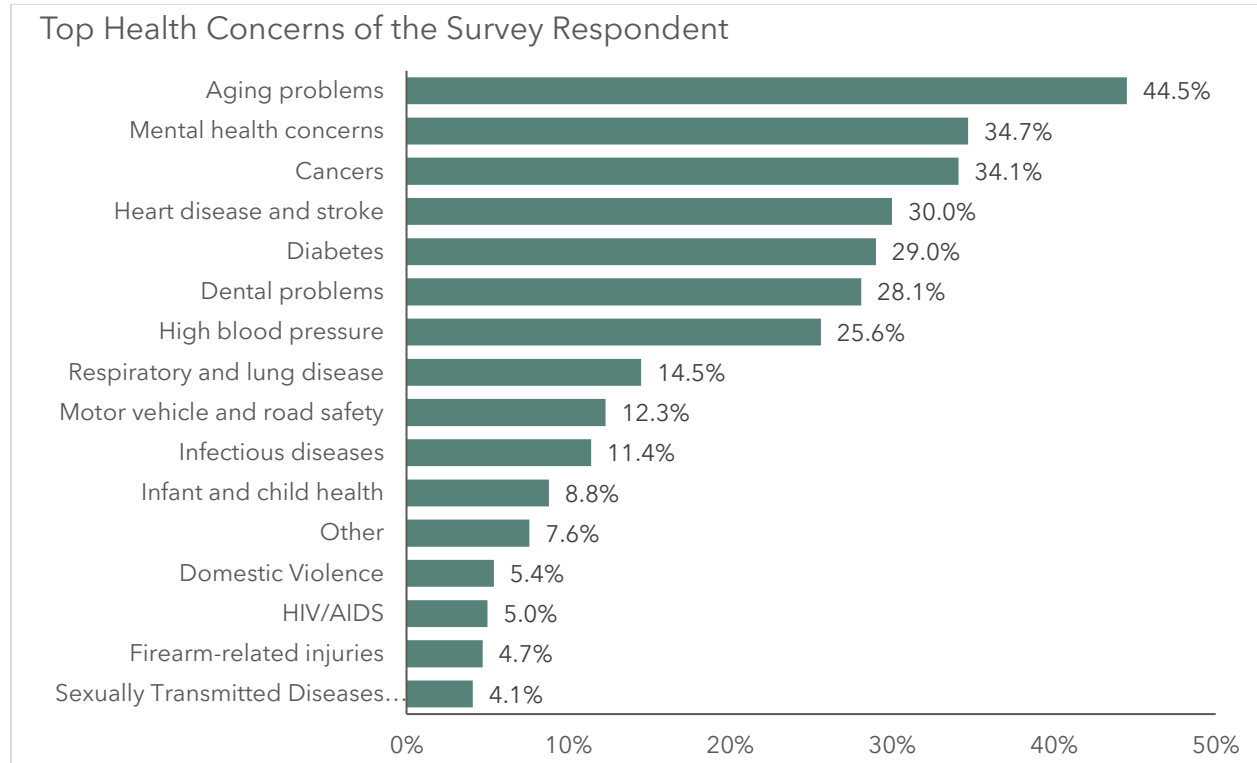
Community Themes

The community health survey was distributed throughout the Eastern Shore between July and November 2023. The Eastern Shore Health District received 320 responses from community members and an additional 49 responses from individuals who work for organizations that support public health. The survey was available in English, Spanish, and Haitian Creole; it was also available online, over the phone, and on paper, and was distributed in a wide range of spaces and events. The survey inquired about the top health concerns, risky behaviors, and barriers to health that are perceived by the responder, both for themselves and for the community. The survey also asked open-ended questions to gauge what else was important to the responder about health, as well as potential initiatives and partnerships that the responder would like to see in the future.

See survey tools in Appendix B.

Health Concerns

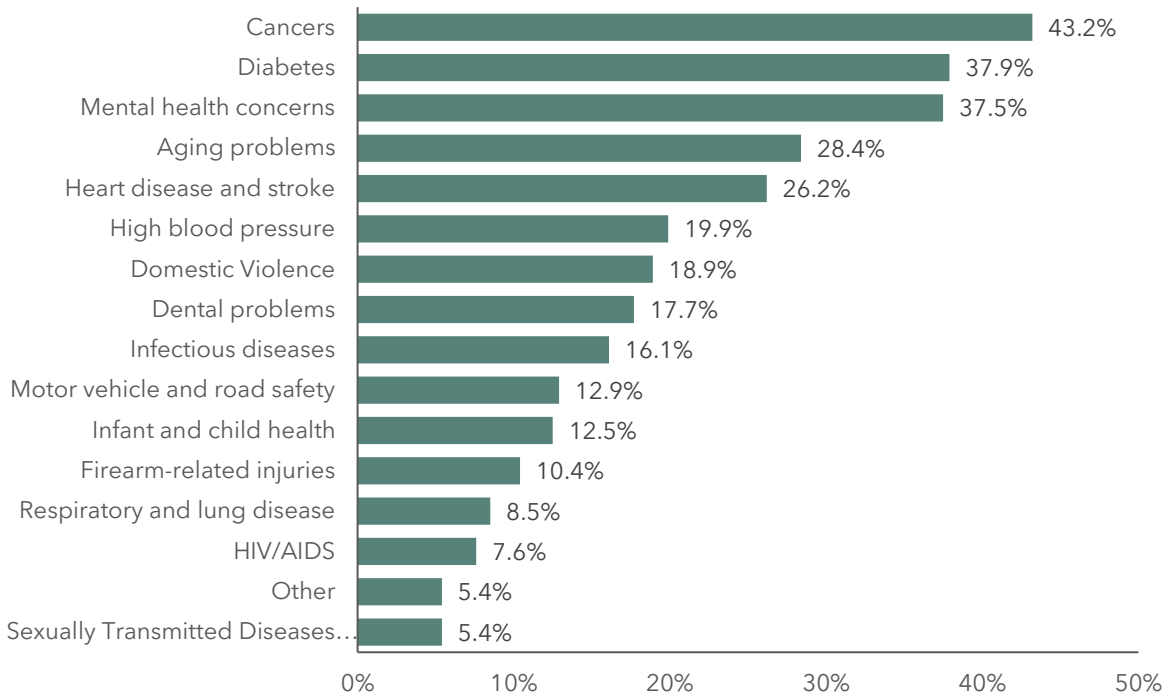
The following reflects how many respondents chose each option as the top health concerns for themselves. They were able to choose more than one and were encouraged to choose three.



Individuals that marked 'Other' were able to write what their concern was. These responses included individual health concerns, themes that were included later in the survey as risky behaviors or barriers to health, "environmental concerns", and "racism".

We also asked what the respondent felt were the top health concerns for the community as a whole. Again, respondents were able to choose more than one, and encouraged to choose three. This table reflects those answers.

Top Health Concerns of the Community

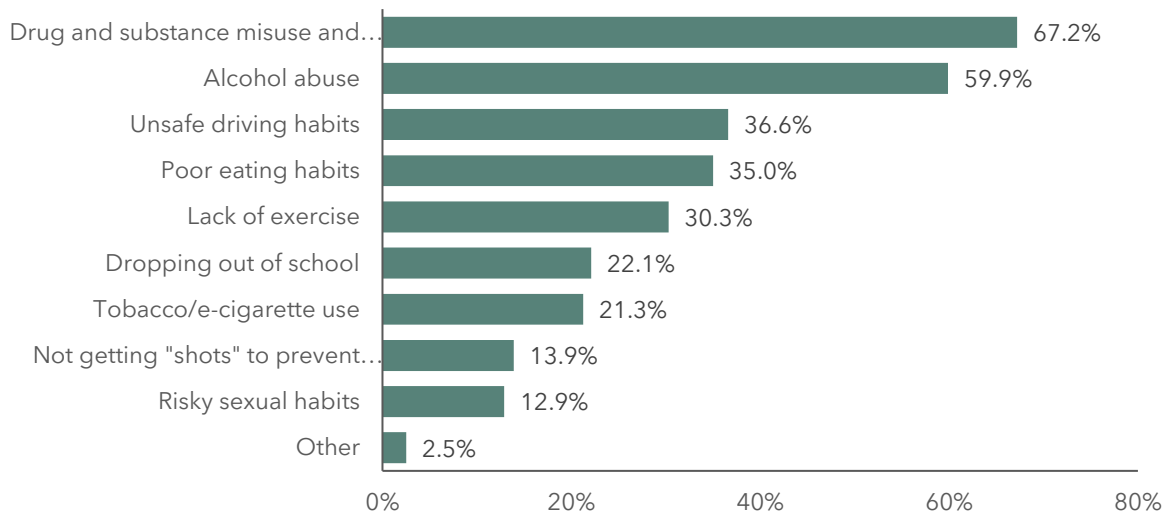


Again, those who marked 'Other' were able to write what their concern was. The responses included themes that were included later in the survey as risky behaviors or barriers to health; social concerns such as loneliness, bullying in schools, and social activities for young adults; and "climate-related issues".

Risky Behaviors

The following chart reflects how many respondents perceive each option as the top risky behaviors in our community.

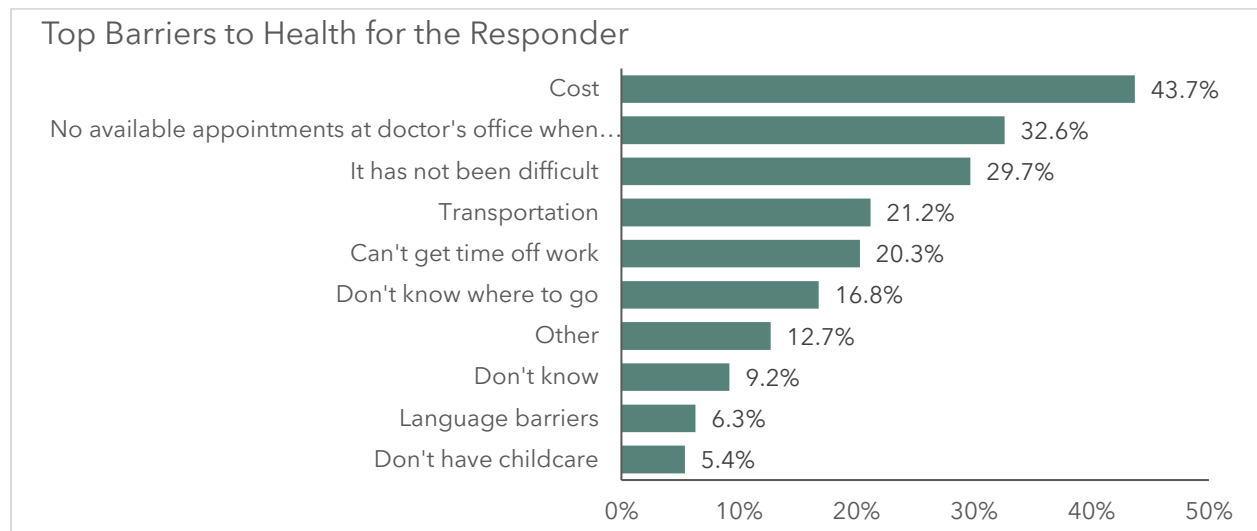
Top Risky Behaviors of the Community



The responses included in the 'Other' category included themes that would be considered barriers to health.

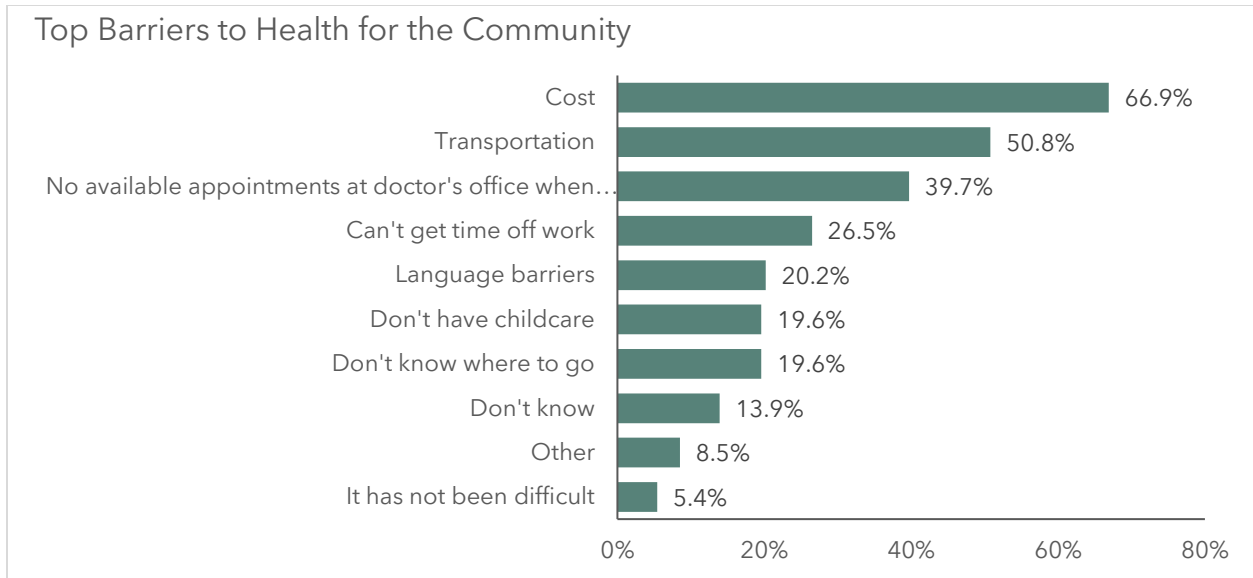
Barriers to Health

Survey respondents were asked to choose what barriers prevented them from being healthier in the last 12 months. What "healthier" meant was left up to the responder, and they were able to choose more than one answer.



For those that marked 'Other', the responses included many themes that were already articulated, including availability of doctors, specifically specialists (mentioned 8 times), quality of care, insurance, distance to care and transportation, limited mobility and ADA compliance, and personal habits.

We also asked respondents about their perception of barriers to health for the community as a whole. They were able to choose more than one answer. The following table reflects these answers:



Those that marked 'Other' generally included the same theme that was included for the question about themselves (e.g., availability of doctors, access to specialists, etc.).

Open-ended Questions

We asked two open-ended questions in the survey. The first was "what else should we know about health in our community?" and the second was "How would you improve health in our community?". Because they were asked after the other questions, it is likely they were somewhat influenced by those themes. After categorizing the answers by content area, four (4) main themes took shape. See Figure 2 for content that was included in each theme.

Table 10. Themes from the open-ended survey questions

Theme	Number of times mentioned
Health Education and Behavior Change	48
Availability of Quality Services	47
Social Determinants of Health	12
Access to Services	7

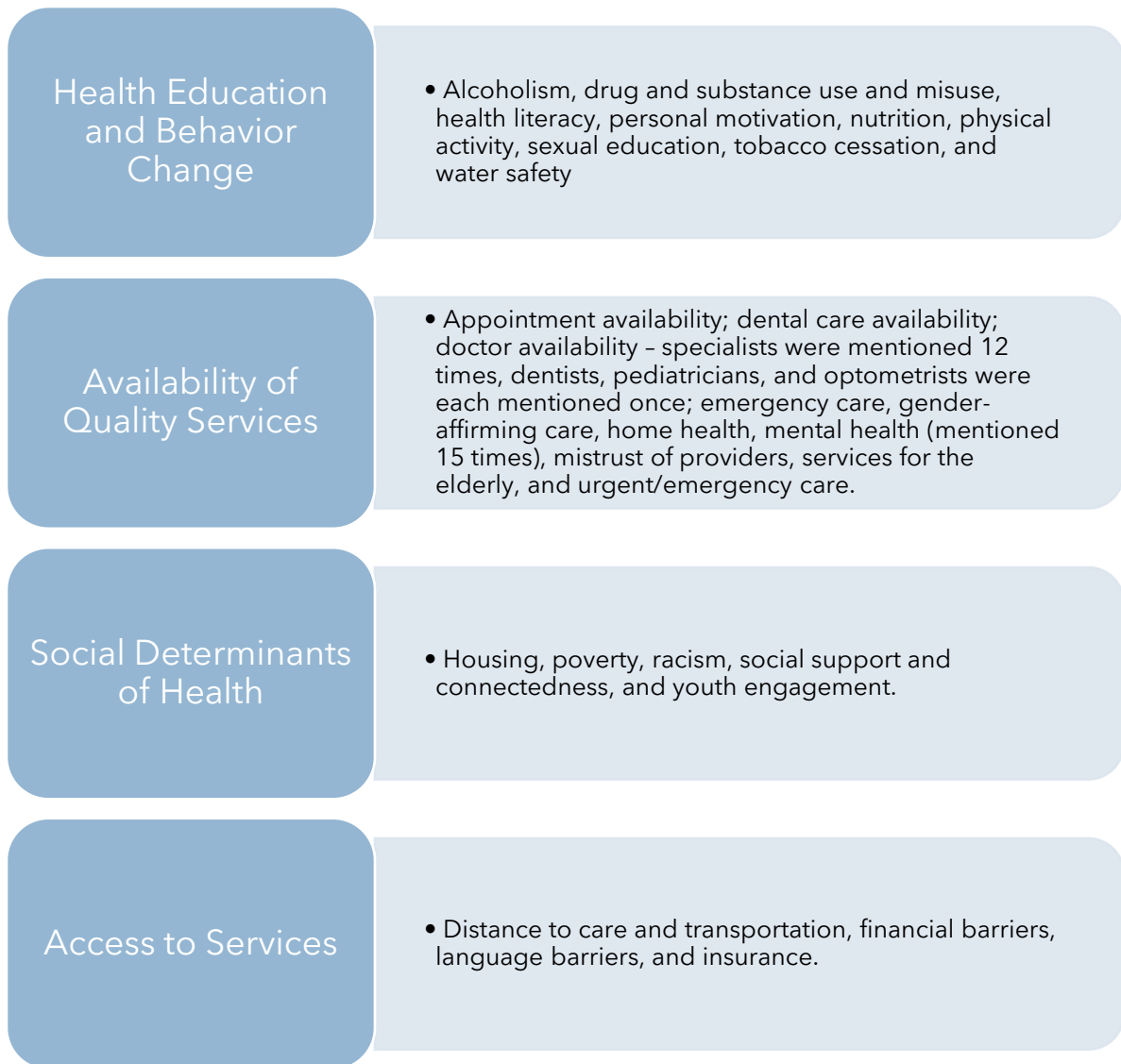


Figure 2. Content that was included in each theme.

Ideas for improvement fell into the same four themes. Ideas ranged from simple and straightforward, to complex and challenging. Many just stated the outcome they would like to see as it related to their top concern, while others proposed a solution.

Outcomes desired:

Health Education and Behavior Change

- (none)

Availability of Quality Services

- More clinics
- More doctors and nurses, especially specialists and dentists
- More urgent/emergency care, especially in Northampton County
- Access to sick appointments
- Additional services for youth mental health, especially in schools

- Activities and facilities for seniors
- Timely doctor appointments
- Home health

Access to Services

- Improved transportation to medical facilities
- Affordable alternatives to doctor-ordered physical therapy
- Affordable/safe public space for exercise
- Improved parks
- Improved access for people who have limited mobility (in general)
- Cheaper insurance
- Affordable dental care

Social Determinants of Health

- Affordable healthy foods
- Better school lunches
- Affordable housing
- Better job opportunities
- Resources in multiple languages
- Programs for youth

Solutions proposed:

Health Education and Behavior Change

- Provide education on nutrition
- Offer monthly or quarterly information meetings in each county
- Teach children the importance of nutrition
- Encourage walking groups
- Free weekly mental and physical health event once a month in English and Spanish
- Encourage people to go to the doctor
- Distribute harm reduction kits
- Increase family planning education
- Provide early childhood education to parents
- Provide tobacco use prevention and cessation services
- Provide condoms in schools and college

Availability of Quality Services

- Bring in more visiting specialists
- Start a paramedicine program on the Eastern Shore
- Attract/recruit/retain more medical staff to come to the Eastern Shore

Access to Services

- Increase awareness of services offered by the Health Department
- Provide preventative screenings, not just at the health department buildings
- Help people enroll in insurance
- Provide primary care at the health department for uninsured patients
- Offer public services announcements in English, Spanish, and Haitian Creole

Social Determinants of Health

- Provide financial literacy training
- Other
- Mandate lifeguards at all pools
 - Staff for public safety programs

Demographics

The following table describes the self-reported demographic data of the survey respondents.

Table 11. Demographics of the survey respondents

Demographics	Participants N (%)
Age	
18 - 24	20 (6.9)
25 - 39	66 (22.9)
40 - 54	68 (23.6)
55 - 64	59 (20.5)
65 or over	75 (26.0)
Gender	
Female	200 (69.2)
Male	74 (25.6)
Non-binary or non-conforming	1 (0.3)
Prefer not to respond	14 (4.8)
Race/Ethnicity*	
African American or Black	95 (32.9)
Asian or Pacific Islander	2 (0.7)
Haitian Creole	27 (9.3)
Hispanic or Latino	39 (13.5)
Native American	2 (0.7)
White or Caucasian	120 (41.5)
Other	9 (3.1)
Household Income	
Less than \$25,000	75 (26.0)
\$25,000 - \$49,999	83 (28.7)
\$50,000 - \$74,999	42 (14.5)
\$75,000 or more	61 (21.1)
Prefer not to respond	28 (9.7)
Ever Served in Any Branch of the U.S Military	
Yes	19 (6.6)
No	269 (93.4)
Employed at Poultry Plant	
Yes	42 (14.5)
No	247 (85.5)

*Please note respondents were able to pick more than one race or ethnicity.

Forces of Change

In February 2024, ESHD conducted a brainstorming session around the external forces that may shape our community's health in various ways over the coming years. Some of the themes that were highlighted include:

- Demographic changes, such as immigration and emigration
- Employment opportunities
- Affordable quality housing
- Food accessibility, including changes to the requirements to receive Supplemental Nutrition Assistance Program benefits
- Transportation
- Family support, including parental education
- Health literacy
- Availability of appointments and providers in the healthcare system, specifically around obstetrics and gynecology and pediatrics
- Addiction

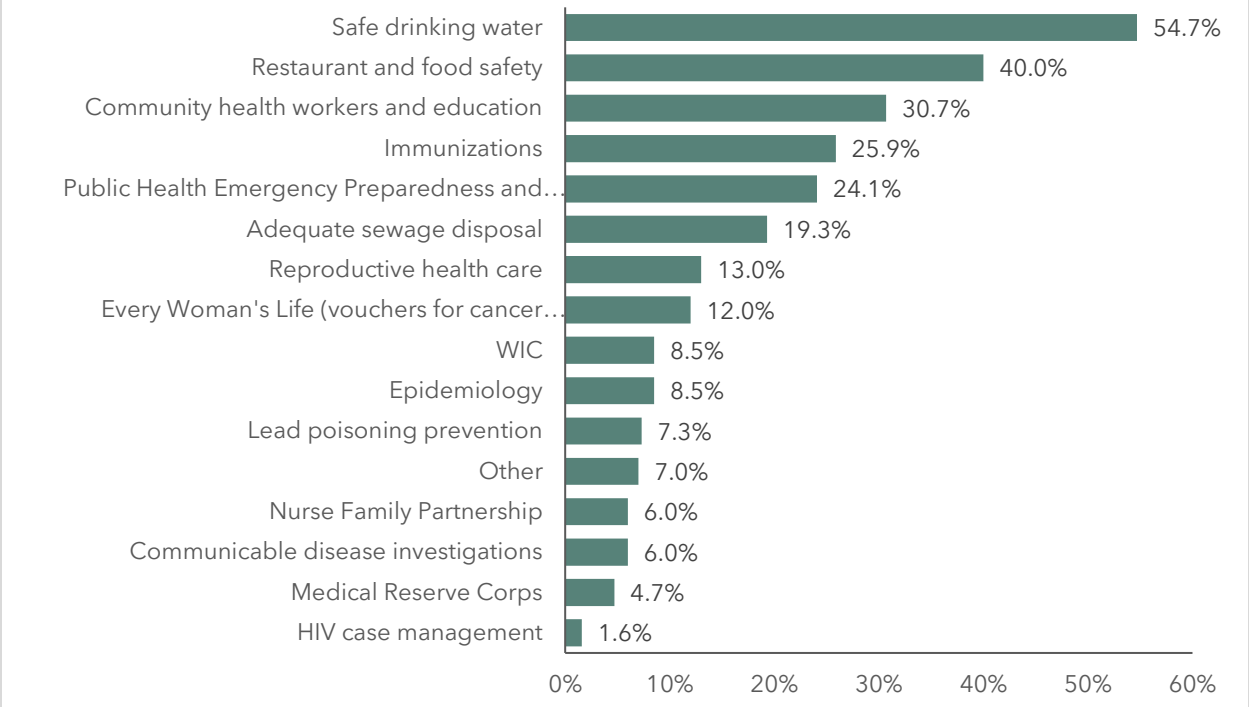
These themes are reflected many of the same concerns that were raised in the Community Themes survey, reinforcing their importance to the community.

Local Public Health Network

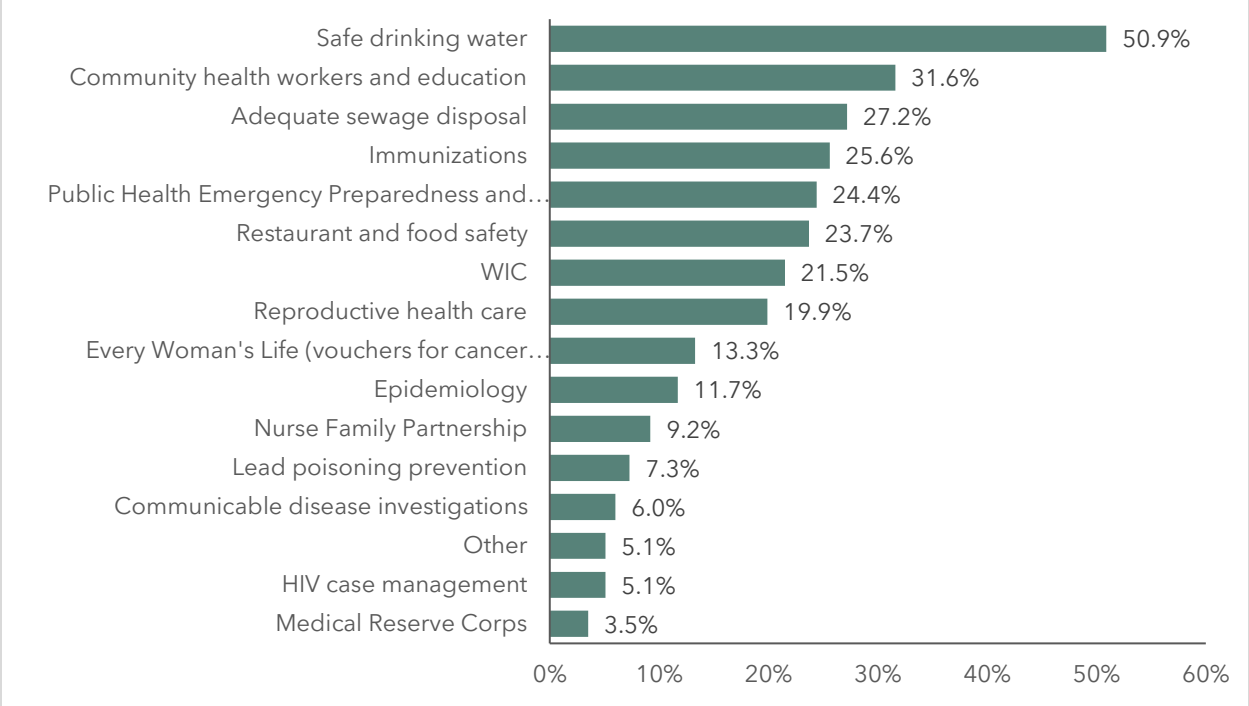
As part of the survey, ESHD also asked which existing health department services most impacted the health of the respondent and which existing health department services the respondent thought most impacted the health of the community.

Environmental health services, such as safe drinking water, adequate sewage disposal, and restaurant and food safety; community health workers and education; Public Health Emergency Preparedness; and Immunizations accounted for 75% of the responses.

Most Important Health Department Services to the Respondent



Most Important Health Department Services for the Community



The distribution was similar for when we asked what most impacted the respondent's health and their perception of what most impacted the health of the community, though WIC and reproductive health care saw small increases when the respondent considered the health of

the community. Additionally, the responses from members of the public health network specifically saw the value in those services. Responses for those who marked 'Other' were ideas for additional services that would be helpful, rather than existing services.

Further analysis of the local public health network will occur as part of the CHIP process as the health district considers what services currently exist in the community for the top health concerns.

Top Health Concerns

In January 2024, the Steering Committee met to review the assessment findings. The following themes were identified as the top health concerns on the Eastern Shore.

Disability

People with disabilities are at risk for not being able to access the support and services that are critical for their health and wellbeing. Research shows that people with disabilities are less likely to get preventative healthcare services. They frequently have difficulties finding a job, going to school, or getting around both inside and outside of their home. A key goal in this community is independent living.

Depression, anxiety, and pain are key drivers of disability. The disability rate is not necessarily driven by age. Potential factors that exacerbate an individual's ability include older buildings that are not ADA-compliant, transportation barriers, organizations that are unaware of accessibility concerns, people not receiving care to address disabilities, and social isolation.

Why this matters on the Eastern Shore

- Between 3% and 12% of the population identifies as having at least one of the following disabilities: vision, hearing, cognition, mobility, and independent living. This is equal to, or higher than, each rate across the commonwealth of Virginia.
- Better access for people with disabilities was identified specifically as something that would improve health on the Eastern Shore by at least 3 people in the survey.

Cancers

Cancers are the leading cause of death for people under the age of 75 in Accomack and Northampton Counties. Some risk factors that lead to cancer are preventable, such as cigarette smoking and secondhand smoke exposure; exposure to sun and tanning beds; and alcohol consumption. Others are not preventable, such as age.

Cancer prevention can include individual behavior change, such as tobacco cessation and getting the vaccine against human papilloma virus (HPV), which is proven to prevent some cancers.

Cancer care and survivorship includes early screening and diagnosis, as well as advanced treatment methods.

Why this matters on the Eastern Shore

- In Accomack County, 8.7% of the population have cancer; in Northampton County, 9.4% of the population have cancer. This rate is higher than the rate across Virginia.
- Breast cancer, lung cancer, cervical cancer, and prostate cancer are all high concern.
- Cancers were one of the top health concerns perceived by our community.

Chronic Disease

Chronic disease is a significant health challenge due to its impact on quality of life, mortality, and healthcare costs. It includes arthritis, asthma, high blood pressure, high cholesterol, kidney disease, COPD, heart disease, diabetes, and others. Many of these diseases overlap with each other.

Many chronic diseases are caused by tobacco use, poor nutrition, physical inactivity, and excessive alcohol use. Environmental and occupational factors can also increase the risk of chronic disease. Access to primary care, including screening and appropriate treatment, are correlated with better health outcomes.

Why this matters on the Eastern Shore

- Chronic disease rates on the Eastern Shore are all higher than across the rest of Virginia. At least 45% of the population 18 years of age and older has high blood pressure and/or high cholesterol.
- Chronic diseases accounted for one-third of the top health concerns chosen by survey responders.
- For people surveyed at Eastern Shore Community College, diabetes was the second most important concern.

Reproductive Health

Reproductive health includes the health of men and women, throughout their lives, not just in their child-bearing years. The metrics that monitor reproductive health in a community include maternal, infant, and child mortality rates; teen pregnancy rates; pre-term birth and low-birthweight rates; and neonatal abstinence syndrome rates, among others. The causes of these outcomes are both clinical and social.

Health initiatives to support reproductive health include helping women stay healthy before, during, and after pregnancy; promoting healthy relationships and strong emotional health; and parenting support. Such initiatives can also include supporting men's health, as a male partner's health also influences the health of their partner and child. Interventions to prevent unintended pregnancies can help reduce negative outcomes.

Why this matters on the Eastern Shore

- Maternal, infant, and child mortality rates on the Eastern Shore are higher than across the rest of Virginia.
- Teen birth rates on the Eastern Shore are nearly twice the rate as the rest of Virginia.
- Pre-term birth rates, low birthweights, and neonatal abstinence syndrome (Accomack County only) are higher than the rest of Virginia.

- Approximately 18 mothers give birth to babies with late or no pre-term care each year on the Eastern Shore.
- This was a top concern of the Steering Committee members.

Sexually Transmitted Infections

While many sexually transmitted infections (STIs) are preventable and treatable, the rates of these infections have remained high over the past several years. STI rates are correlated with poverty and marginalization, access to healthcare, substance abuse, and stigma.

Prevention, testing, and treatment are all part of a comprehensive approach that will improve the health and well-being of people who have STIs, as well as reduce the risk of STIs spreading to others.

Why this matters on the Eastern Shore

- STI rates on the Eastern Shore are very high, and have been for several years.
- Risky sexual behaviors was reported as a top concern among some pockets of our community.
- The Eastern Shore has communities that have historically been vulnerable to the risk factors associated with STIs.

Nutrition

Many people do not eat the recommended amounts of food to meet their nutritional needs, which puts them at risk for chronic diseases. Some people do not have the information they need to choose nutritious foods; others don't have access to these foods, or even feel comfortable preparing them. Strategies that focus on helping everyone get healthy foods are key to reducing food insecurity and hunger, and improving overall health.

Why this matters on the Eastern Shore

- Between 12%-13% of the population on the Eastern Shore is considered "food insecure".
- Access to grocery stores is limited on the Eastern Shore by distance and transportation.
- Nutrition was a top concern in the community survey.

Physical Inactivity

Physical activity can help prevent diseases, disability, injury, and even premature death. Most people do not get the recommended amount of physical activity, especially older adults and people with chronic disease or disabilities.

Some of the underlying factors that influence physical activity levels are access to safe exercise facilities, including cost and availability; education about the importance of physical activity; and personal motivation, which can be related to mental health. Making physical activity safer and easier are key to improving these rates.

Why this matters on the Eastern Shore

- Both counties have low ratings regarding access to physical activity opportunities.
- Physical activity was mentioned frequently on the community survey.

Drug and Substance Use and Misuse (including Alcohol)

Substance use disorders are linked to many health problems, and overdoses can lead to emergency health use and deaths. Factors that contribute to substance use include low educational attainment, poverty, unemployment, lack of access to mental health care, isolation and hopelessness, and stigma.

Strategies aimed at preventing drug and alcohol misuse and helping people with substance use disorders get treatment can reduce the health concerns and deaths associated with it.

Why this matters on the Eastern Shore

- The adult smoking rate is higher on the Eastern Shore than the rest of Virginia, and the excessive drinking rate is the same as the rest of Virginia.
- Drug, substance, and alcohol use and misuse were the top risky behaviors identified by the community survey by a wide margin.
- In 2022, there were 45.1 overdoses per 10,000 emergency department (ED) visits for Accomack County, which has remained steady over the past 6 years.
- For Northampton County, there were 49.5 overdoses per 10,000 ED visits, which has been increasing over the past 6 years.
- The Eastern Shore Community Services Board is currently (January 2024) conducting a survey of all community resources available for drug and substance use and misuse.

Transportation

Transportation is a significant social determinant of health. Availability of safe, reliable transportation impacts a person's ability to access appropriate and well-coordinated healthcare, to purchase nutritious food or access physical activity opportunities, and to otherwise care for themselves. Improving transportation services in an area can also decrease the burden on emergency medical services, improve utilization of healthcare services, decrease no-show rates, and increase access to health-supporting services. As a community-based service, adequate transportation can allow some populations to live independently; as an individual service, it is important to consider road safety. Transportation is especially a concern for the older population and those with disabilities.

Why this matters on the Eastern Shore

- 8% - 9% of households on the Eastern Shore do not have a vehicle.
- The public transportation system (Star Transit) is mostly a fixed-route system that runs Monday - Friday, though they do make as many accommodations as possible. There are other, smaller, transportation companies, but they are not as well known.
- Motor vehicle crash deaths are higher on the Eastern Shore than the rest of Virginia.
- Transportation is perceived as one of the top barriers to being healthy in the community.

Rates of Insured People

People without insurance are less likely to get the healthcare services and medications they need, and are more likely to have poor health outcomes.

Some of the factors that influence how many people have insurance include the cost of available plans, immigration status, and the level of understanding of the plans, platforms, and processes associated with insurance coverage.

Why this matters on the Eastern Shore

- The rates of people without insurance on the Eastern Shore is higher than the rest of Virginia. Between 14%-19% of Eastern Shore resident aged 19-64 do not have insurance. Between 9%-13% of children under the age of 19 do not have insurance. This includes 15.3% of children under 6 years old in Northampton County.

Availability of Providers

Maintaining the healthcare workforce is fundamental to providing access to quality healthcare. Effective systems have enough providers who are adequately trained, culturally competent, and hold the appropriate licensure or certification. Coordination between healthcare providers improves the quality of care in a community.

Why this matters on the Eastern Shore

- The ratio of population to providers is higher in Accomack County than the rest of Virginia, including mental health providers, primary care physicians, and other primary care providers. This means there are fewer providers per person on the Eastern Shore than in other parts of Virginia.
- The ratio of population to mental health providers in Northampton County is much higher than across the rest of Virginia.
- This was a top concern across the community, with people specifically mentioning how many providers have left the area recently, the difficulty in accessing specialist care, and the availability of appointments.
- The Eastern Shore has high rates of people who saw a primary care provider for an annual checkup in the past 12 months (80% versus 75% across the rest of Virginia).

Conclusion and Next Steps

These top health concerns reflect the community's awareness of health outcomes (e.g., diabetes, hypertension), health behaviors that exacerbate these conditions, and difficulty accessing high quality health care on the Eastern Shore. It also highlights what community members would like to see addressed by our public health network. Given the breadth of the top health concerns, the health district will continue to utilize the four themes identified by the open-ended Community Themes survey questions as the priority areas moving forward: health education and behavior change, availability of quality services, social determinants of health, and access to services.

This community health assessment informs the next phase of the MAPP process: formulating goals and strategies, and the action cycle. This is also known as the community health improvement plan, or CHIP. Based on the top health concerns identified by the CHA, the health district leadership will meet to determine which concerns fall within the purview of the health district, what evidence-based strategies could be used to address them, and identify the resources needed to do so. ESHD will continue to consult with the Steering Committee and share information with our community as these goals and initiatives are set.

Appendices

A. Data Sources

Demographics

Source

Age

U.S. Census Bureau. "ACS DEMOGRAPHIC AND HOUSING ESTIMATES." *American Community Survey, ACS 5-Year Estimates Data Profiles, Table DP05, 2021*, <https://data.census.gov/table/ACSDP1Y2022.DP05>. Accessed on October 16, 2023.

Race and Ethnicity

U.S. Census Bureau. "ACS DEMOGRAPHIC AND HOUSING ESTIMATES." *American Community Survey, ACS 5-Year Estimates Data Profiles, Table DP05, 2021*, <https://data.census.gov/table/ACSDP1Y2022.DP05>. Accessed on October 16, 2023.

Gender

U.S. Census Bureau. "ACS DEMOGRAPHIC AND HOUSING ESTIMATES." *American Community Survey, ACS 5-Year Estimates Data Profiles, Table DP05, 2021*, <https://data.census.gov/table/ACSDP1Y2022.DP05>. Accessed on October 16, 2023.

Population

U.S. Census Bureau. "ACS DEMOGRAPHIC AND HOUSING ESTIMATES." *American Community Survey, ACS 5-Year Estimates Data Profiles, Table DP05, 2021*, <https://data.census.gov/table/ACSDP1Y2022.DP05>. Accessed on October 16, 2023.

Health

Social Determinants of Health

Definition

Source

Median household income

The income where half of households in a county earn more and half of households earn less.
University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Living Wage

The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children.
The Living Wage Calculator, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

High School Graduation

Percentage of adults ages 25 and over with a high school diploma or equivalent.
University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Percent of households with broadband of any type

Percentage of households with broadband of any type.
U.S. Census Bureau. "TYPES OF COMPUTERS AND INTERNET SUBSCRIPTIONS." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S2801, 2021*, <https://data.census.gov/table/ACSST5Y2022.S2801>. Accessed on October 16, 2023.

Percent of households with no vehicle available

Percentage of households with no vehicle available.
U.S. Census Bureau. "SELECTED HOUSING CHARACTERISTICS." *American Community Survey, ACS 5-Year Estimates Data Profiles, Table DP04, 2021*, <https://data.census.gov/table/ACSDP5Y2022.DP04>. Accessed on October 16, 2023.

Uninsured adults (19 - 64 years)

Number and percentage of residents aged 19 - 64 years old who do not have medical insurance

U.S. Census Bureau. "SELECTED CHARACTERISTICS OF HEALTH INSURANCE COVERAGE IN THE UNITED STATES." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S2701*, 2021, <https://data.census.gov/table/ACSST5Y2021.S2701>. Accessed on October 16, 2023.

Uninsured children (under 19 years)

Number and percentage of residents under the age of 19 years old who do not have medical insurance.

U.S. Census Bureau. "SELECTED CHARACTERISTICS OF HEALTH INSURANCE COVERAGE IN THE UNITED STATES." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S2701*, 2021, <https://data.census.gov/table/ACSST5Y2021.S2701>. Accessed on October 16, 2023.

Veteran Status

Percent of population age 18 and over who are veterans of the U.S. military.

U.S. Census Bureau. "VETERAN STATUS." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S2101*, 2021, <https://data.census.gov/table/ACSST5Y2021.S2101>. Accessed on October 16, 2023.

Children in Single-Parent Households

Percentage of children that live in a household headed by a single parent.

University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Households with individuals under 18 years

Percentage of households with one or more people under 18 years of age.

U.S. Census Bureau. "SELECTED SOCIAL CHARACTERISTICS IN THE UNITED STATES." *American Community Survey, ACS 5-Year Estimates Selected Population Data Profiles, Table DP02*, 2021, <https://data.census.gov/table/ACSDP5YSPT2021.DP02>. Accessed on October 16, 2023.

Childcare Cost Burden

Childcare costs for a household with two children as a percent of median household income.

The Living Wage Calculator; Small Area Income and Poverty Estimates, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Food Insecurity

Percentage of population who lack adequate access to food.

Map the Meal Gap, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Juvenile Arrests

Rate of delinquency cases per 1,000 juveniles. Rate in whole of US is 24.

Easy Access to State and County Juvenile Court Case Counts, 2019, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Percent of population who speak English less than "very well"

Percent of population age 5 and older who speak English less than "very well".

U.S. Census Bureau. "SELECTED SOCIAL CHARACTERISTICS IN THE UNITED STATES." *American Community Survey, ACS 5-Year Estimates Selected Population Data Profiles, Table DP02*, 2021, <https://data.census.gov/table/ACSDP5YSPT2021.DP02>. Accessed on October 16, 2023.

Length of Life

Definition

Source

Life Expectancy

Average number of years a person can expect to live.

National Center for Health Statistics - Mortality Files; 2018-2020, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Maternal mortality

This indicator reports the three-year average rate of maternal deaths per 100,000 live births with Virginia residence from 2018 to 2020. Maternal death is defined as deaths during pregnancy and up to 42 days postpartum that are related to pregnancy.

Vital Event Statistics Program, Virginia Department of Health,
<http://vdhweb.vdh.virginia.gov/information-management/vital-event-statistics/>

Infant Mortality

This indicator reports the three-year average rate of deaths of infants per 1,000 live births with Virginia residence from 2018 to 2020. Infant mortality is defined as deaths of children under one year of age, some of whom may have been born in the previous year. Note: rates in Black populations are twice as high as in White populations.

Vital Event Statistics Program, Virginia Department of Health,
<http://vdhweb.vdh.virginia.gov/information-management/vital-event-statistics/>

Child Mortality

This indicator reports the three-year average rate of deaths of children ages 1-9 per 1,000 children ages 1-9 with Virginia residence from 2018 to 2020.

Vital Event Statistics Program, Virginia Department of Health,
<http://vdhweb.vdh.virginia.gov/information-management/vital-event-statistics/>

Motor Vehicle Crash Deaths

Number of motor vehicle crash deaths per 100,000 population.

National Center for Health Statistics - Mortality files; 2014 - 2020; via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023.
www.countyhealthrankings.org.

Alcohol-impaired driving deaths

Percentage of driving deaths with alcohol involvement.

Fatality Analysis Reporting System, 2016-2020; via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Firearm Fatalities

Number of deaths due to firearms per 100,000 population.

National Center for Health Statistics - Mortality files; 2016 - 2020; via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023.
www.countyhealthrankings.org.

Injury deaths

Number of deaths due to injury per 100,000 population.

University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023.
www.countyhealthrankings.org.

Premature Death

Years of potential life lost before age 75 per 100,000 population (age-adjusted).

Leading causes of death under age 75 in Accomack: malignant neoplasms, diseases of the heart, accidents, diabetes mellitus, chronic lower respiratory diseases. Leading causes of death under age 75 in Northampton: malignant neoplasms, diseases of heart, (others unreliable) accidents, chronic lower respiratory diseases, cerebrovascular diseases. Source: CDC WONDER

National Center for Health Statistics - Mortality Files; 2018-2020, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023.
www.countyhealthrankings.org.

Quality of Life

Definition

Source

Poor or Fair Health

Percentage of adults reporting fair or poor health (age-adjusted).

Behavioral Risk Factor Surveillance System 2020, CDC, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Poor Physical Health Days

Average number of physically unhealthy days reported in past 30 days (age-adjusted).

Behavioral Risk Factor Surveillance System 2020, CDC, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Poor Mental Health Days

Average number of mentally unhealthy days reported in past 30 days (age-adjusted).

Behavioral Risk Factor Surveillance System 2020, CDC, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Health Behaviors

Definition

Source

Adult Smoking

Percentage of adults who are current smokers (age-adjusted).

Behavioral Risk Factor Surveillance System 2020, CDC, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Excessive Drinking

Percentage of adults reporting binge or heavy drinking (age-adjusted).

Behavioral Risk Factor Surveillance System 2020, CDC, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Physical Inactivity

Percentage of adults age 18 and over reporting no leisure-time physical activity (age-adjusted).

Behavioral Risk Factor Surveillance System 2020, CDC, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Health Outcomes

Definition

Source

Arthritis

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Asthma

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

High Blood Pressure

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Cancer

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

High Cholesterol

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Kidney Disease

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

COPD

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Heart Disease

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Diabetes

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Depression

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Obesity

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Stroke

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

All teeth lost

Prevalence among adults ≥ 65 years (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Health Outcomes

Definition

Source

Disability - hearing

Prevalence among adults age 18 or older (%)

U.S. Census Bureau. "DISABILITY CHARACTERISTICS." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S1810, 2021*, <https://data.census.gov/table/ACSST5Y2021.S1810>. Accessed on October 16, 2023.

Disability - vision

Prevalence among adults age 18 or older (%)

U.S. Census Bureau. "DISABILITY CHARACTERISTICS." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S1810, 2021*, <https://data.census.gov/table/ACSST5Y2021.S1810>. Accessed on October 16, 2023.

Disability - Cognitive

Prevalence among adults age 18 or older (%)

U.S. Census Bureau. "DISABILITY CHARACTERISTICS." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S1810, 2021*, <https://data.census.gov/table/ACSST5Y2021.S1810>. Accessed on October 16, 2023.

Disability - Mobility

Prevalence among adults age 18 or older (%)

U.S. Census Bureau. "DISABILITY CHARACTERISTICS." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S1810*, 2021, <https://data.census.gov/table/ACSST5Y2021.S1810>. Accessed on October 16, 2023.

Disability - independent living

Prevalence among adults age 18 or older (%)

U.S. Census Bureau. "DISABILITY CHARACTERISTICS." *American Community Survey, ACS 5-Year Estimates Subject Tables, Table S1810*, 2021, <https://data.census.gov/table/ACSST5Y2021.S1810>. Accessed on October 16, 2023.

Reproductive Health

Definition

Source

Low birthweight

Percentage of live births with low birthweight (< 2,500 grams).

National Center for Health Statistics - Natality files, 2014-2020, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Pre-term Births

This indicator reports the percentage of preterm births of total live births with Virginia residence in 2020. Preterm birth is defined as births that occur before 37 weeks of pregnancy have been completed.

Vital Event Statistics Program, Virginia Department of Health, <http://vdhweb.vdh.virginia.gov/information-management/vital-event-statistics/>

Teen Births

Number of births per 1,000 female population ages 15-19.

National Center for Health Statistics - Natality files, 2014-2020, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Neonatal Abstinence Syndrome

This indicator reports the number and rate of hospital inpatient stays due to neonatal abstinence syndrome (NAS), per 1,000 birth hospitalizations.

Vital Event Statistics Program, Virginia Department of Health, <http://vdhweb.vdh.virginia.gov/information-management/vital-event-statistics/>

Sexually Transmitted Infections

Number of newly diagnosed chlamydia cases per 100,000 population.

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2020, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Mothers with late or no pre-term care

This indicator reports the percentage of mothers who have not received adequate prenatal care of total live births with Virginia residence in 2020. Late or no prenatal care is defined as pregnancy-related care beginning in the 3rd trimester (7-9 months) or when no pregnancy-related care was received at all.

Vital Event Statistics Program, Virginia Department of Health, <http://vdhweb.vdh.virginia.gov/information-management/vital-event-statistics/>

Prevention

Definition

Source

Annual Checkup

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Dental Visit

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Blood Pressure Medication

Prevalence of taking high blood pressure medication among adults aged 18 years and older with high blood pressure (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Cholesterol Screening

Prevalence among adults age 18 or older (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Mammography

Prevalence of use among women aged 50 - 74 (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Cervical Cancer Screening

Prevalence of use among women aged 21 - 65 (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Colorectal Cancer Screening

Prevalence of use among adults ages 50 - 75 (%)

Behavioral Risk Factor Surveillance System, 2020/2021, CDC, via PLACES. Centers for Disease Control and Prevention. Accessed October 16, 2023.

Access to Exercise Opportunities

Percentage of population with adequate access to locations for physical activity.

ArcGIS Business Analyst and Living Atlas of the World, YMCA, US Census TIGER/Line Shapefiles, 2022/2020, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Human Resources for Health

Definition

Source

Mental Health Providers

Ratio of population to mental health providers.

Center for Medicare and Medicaid Services, National Provider Identification, 2022, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Primary Care Physicians

Ratio of population to primary care physicians.

Area Health Resource File/American Medical Association 2020, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

Other primary care providers

Ratio of population to primary care providers other than physicians.

Center for Medicare and Medicaid Services, National Provider Identification, 2022, via University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. www.countyhealthrankings.org.

B. Surveys

The following are the English versions of the on-paper surveys used in the Community Themes assessment. The digital and phone versions used identical questions. Please contact the Eastern Shore Health District to review the surveys that were translated into Spanish and Haitian Creole.

Community Health Assessment Survey

The Eastern Shore Health District wants to know what health issues are most important in our community and for you. We are working with our community partners to understand the needs of the Eastern Shore so we can improve the health of our community. We will use your feedback to create strategies to improve health and well-being on the Eastern Shore. All answers will be kept confidential. Please respond to each question. If you have any questions, please contact Allison Bradshaw at allison.bradshaw@vdh.virginia.gov or 757-787-5967.

From the following list, please identify what you think are the 3 biggest health concerns for YOU.

TOP 3

- Aging problems, such as arthritis, hearing/vision loss, memory loss
- Cancers
- Dental problems
- Diabetes
- Domestic Violence
- Firearm-related injuries
- Heart disease and stroke
- High blood pressure
- HIV/AIDS
- Infant and child health
- Infectious diseases, such as hepatitis, TB, flu, COVID-19
- Mental health concerns, such as anxiety, depression
- Motor vehicle and road safety
- Respiratory and lung disease, such as asthma, COPD
- Sexually Transmitted Diseases (STDs)
- Other (please specify)

From the following list, please identify what you think are the 3 biggest health concerns for our COMMUNITY.

TOP 3

- Aging problems, such as arthritis, hearing/vision loss, memory loss
- Cancers
- Dental problems
- Diabetes
- Domestic Violence
- Firearm-related injuries
- Heart disease and stroke
- High blood pressure
- HIV/AIDS
- Infant and child health
- Infectious diseases, such as hepatitis, TB, flu, COVID-19
- Mental health concerns, such as anxiety, depression
- Motor vehicle and road safety

- Respiratory and lung disease, such as asthma, COPD
- Sexually Transmitted Diseases (STDs)
- Other (please specify)

From the following list, what do you think are the 3 most common "risky behaviors" in our COMMUNITY?

TOP 3

- Alcohol abuse
- Dropping out of school
- Drug and substance misuse and abuse
- Lack of exercise
- Not getting "shots" to prevent disease
- Poor eating habits
- Risky sexual habits
- Tobacco/e-cigarette use
- Unsafe driving habits, such as texting while driving, not using seat belts/child safety seats
- Other (please specify)

What are the things that have made it difficult for YOU to be healthier in the past 12 months (choose up to 3)?

TOP 3 BARRIER

- Cost
- Transportation
- No available appointments at doctor's office when needed
- Can't get time off work
- Don't know where to go
- Don't have childcare
- Language barriers
- Other
- It has not been difficult
- Don't know

What are the things that have made it difficult for our COMMUNITY to be healthier in the past 12 months (choose up to 3)?

TOP 3 BARRIER

- Cost
- Transportation
- No available appointments at doctor's office when needed
- Can't get time off work
- Don't know where to go
- Don't have childcare
- Language barriers
- Other
- It has not been difficult

_____ Don't know

From the following list, what are the existing health department services that MOST influence the health of YOU (please choose up to 3)?

TOP 3 SERVICE

- _____ Adequate sewage disposal
- _____ Safe drinking water
- _____ Restaurant and food safety
- _____ Lead poisoning prevention
- _____ Community health workers and education
- _____ Epidemiology
- _____ Public Health Emergency Preparedness and Response
- _____ Medical Reserve Corps
- _____ Communicable disease investigations
- _____ HIV case management
- _____ Immunizations
- _____ Nurse Family Partnership
- _____ Reproductive health care, such as maternity care and family planning
- _____ Every Woman's Life (vouchers for cancer screenings)
- _____ WIC
- _____ Other (please specify)

From the following list, what are the existing health department services that MOST influence the health of OUR COMMUNITY (please choose up to 3)?

TOP 3 SERVICE

- _____ Adequate sewage disposal
- _____ Safe drinking water
- _____ Restaurant and food safety
- _____ Lead poisoning prevention
- _____ Community health workers and education
- _____ Epidemiology
- _____ Public Health Emergency Preparedness and Response
- _____ Medical Reserve Corps
- _____ Communicable disease investigations
- _____ HIV case management
- _____ Immunizations
- _____ Nurse Family Partnership
- _____ Reproductive health care, such as maternity care and family planning
- _____ Every Woman's Life (vouchers for cancer screenings)
- _____ WIC
- _____ Other (please specify)

What else should we know about health in our community?

How would you improve health in our community?

Please tell us a little about yourself.

Zip Code Where You Live

Zip Code Where You Work

 Poultry

Age

- 18 – 24
- 25 – 39
- 40 – 54
- 55 – 64
- 65 or over

Gender

- Female
- Male
- Non-binary/non-conforming
- Prefer not to respond

Ethnic and Racial Group(s) you most identify with:

- African American/Black
- Asian/Pacific Islander
- Haitian Creole
- Hispanic/Latino
- Native American
- White/Caucasian
- Other

Household Income

- Less than \$25,000
- \$25,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 or more

Have you ever served in any branch of the US military?

- Yes No

Have you ever interacted with the health department before?

- Yes No

If yes, which services?

- Clinic services, such as immunizations (not including COVID-19), maternity care, or family planning

COVID-19 testing, vaccinations or
case investigations

WIC

NFP

Water and sewage

Food and restaurant safety

Other

Internal use only: Entered

Public Health Network Survey

The Eastern Shore Health District wants to know what health issues are most important in our community and for you. We are working with our community partners to understand the needs of the Eastern Shore so we can improve the health of our community. We will use your feedback to create strategies to improve health and well-being on the Eastern Shore. All answers will be kept confidential. Please respond to each question. If you have any questions, please contact Allison Bradshaw at allison.bradshaw@vdh.virginia.gov or 757-787-5967.

From the following list, please identify what you think are the <u>3 biggest health concerns</u> for individuals in THE POPULATION YOUR WORKPLACE SERVES.	
CONCERN	CONCERNS
Aging problems, such as arthritis, hearing/vision loss, memory loss	
Cancers	
Dental problems	
Diabetes	
Domestic Violence	
Firearm-related injuries	
Heart disease and stroke	
High blood pressure	
HIV/AIDS	
Infant and child health	
Infectious diseases, such as hepatitis, TB, flu, COVID-19	
Mental health concerns, such as anxiety, depression	
Motor vehicle and road safety	
Respiratory and lung disease, such as asthma and COPD	
Sexually Transmitted Diseases (STDs)	
Other (please specify)	

From the following list, what do you think are the <u>3 most common "risky behaviors"</u> that occur in THE POPULATION YOUR WORKPLACE SERVES?	
RISKY BEHAVIOR	APPLIES
Alcohol abuse	
Dropping out of school	
Drug and substance misuse and abuse	
Lack of exercise	
Not getting "shots" to prevent disease	
Poor eating habits	
Risky sexual habits	
Tobacco use	
Unsafe driving habits, such as texting while driving, not using seat belts/child safety seats	

Other (please specify)	
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What are the things that have made it difficult for THE POPULATION YOU SERVE to be healthier (check all that apply)?	
BARRIER	APPLIES
Cost	
Transportation	
No available appointments at doctor's office when needed	
Can't get time off work	
Don't know where to go	
Don't have childcare	
Language barriers	
Other	
It has not been difficult	
Don't know	

From the following list, what are the existing health department services that MOST influence the health of THE POPULATION YOU SERVE (please choose up to 3)?	
SERVICE	APPLIES
Adequate sewage disposal	
Safe drinking water	
Restaurant and food safety	
Lead poisoning prevention	
Community health workers and education	
Epidemiology	
Public Health Emergency Preparedness and Response	
Medical Reserve Corps	
Communicable disease investigations	
HIV case management	
Immunizations	
Nurse Family Partnership	
Reproductive health, such as maternity care and family planning	
Every Woman's Life (vouchers for cancer screenings)	
WIC	
Other (please specify)	

What other services would you like to see the health department offer?

Are there ways you would like to partner with the health department to bring these services to the population you serve?

Where do you work, and what is your role there?