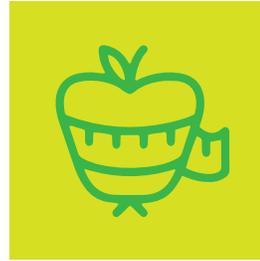


2015 Clay County
community
HEALTH ASSESSMENT
EXECUTIVE SUMMARY ■ ■ ■



The state of American health is a much-discussed topic. You don't have to search hard to find news stories, magazine articles, opinion columns, and documentaries dissecting the health status of American citizens. Obesity is skyrocketing. Cancer, heart disease, and diabetes are leading killers. Far too few people are eating a healthy diet or finding time to exercise. Mental health issues, including substance abuse, are taking a major toll on individuals and families. And while we have the most sophisticated medical care available anywhere in the world, a substantial portion of the population struggles to gain access to care of any kind.

We know there are significant health issues facing America, and facing us right here in Clay County. The question is, what do we do about them?

How do we help the kids and parents, the teens and seniors, the men and women who call Clay County home, to live healthier lives?

How do we improve the health of our community, and ultimately, the quality of the life for our citizens?

We begin by asking questions.

Community Feedback

Northland Health Care Alliance Member Organizations

- Clay County Public Health Center
- Kansas City Health Department
- KC Metro Physicians-ACO
- Liberty Hospital
- MetroCARE
- North Kansas City Hospital
- Northland Community Services Coalition
- Northland Health Care Access
- Platte County Health Department
- Saint Luke's Hospital
- Samuel U. Rodgers Health Center
- Tri-County Mental Health

In 2014 Clay County Public Health Center (CCPHC) played a key role in initiating a Community Health Assessment to gather qualitative and quantitative data about the current state of health in our county. This effort was part of a larger Northland Community Health Assessment, examining the health of citizens in Clay and Platte Counties, undertaken by the Northland Health Care Alliance. CCPHC is a key partner in the Alliance and took a leadership role in driving the Community Health Assessment utilizing the Mobilizing for Action through Planning and Partnerships (MAPP) process.

The assessment included a Northland community health survey shared with citizens through 63 partner organizations, as well as social and traditional media. The survey asked participants to rate the overall health of the community, to identify the health problems they believe are most important, to rate the “risky behaviors” they believe are having the greatest impact on the community, to identify resources, gaps, and barriers regarding access to care. The survey was made available in English and Spanish language versions and in online and paper formats. More than 1100 Northland residents responded (over 600 from Clay County).

The MAPP process includes six phases:

- 1 Organizing for Success and Partnership Development
- 2 Visioning
- 3 Four MAPP Assessments
- 4 Identify Strategic Issues
- 5 Formulate Goals & Strategies
- 6 Take Action



Diversity Advisory Council For Health Equity Members

American Indian Council
 Catholic Charities
 Children's Mercy Hospital
 Clay County African American Legacy
 Clay County Public Health Center
 Coalition of Hispanic Women Against Cancer
 Communities Creating Opportunities
 Homeless Service Coalition of Greater Kansas City
 Independence Health Department
 Jackson County Health Department
 Jewish Vocational Services
 Kansas City Anti-Violence Project
 Kansas City Missouri Health Department
 Liberty Parks and Recreation
 Lopez Language Services
 MCKC Community Health Worker
 Metropolitan Community Colleges
 Mid Continent Public Library
 Mother and Child Health Coalition
 Platte County Health Department
 Samuel U Rodgers Health Center
 St. Luke AME Church
 The Human Agenda
 U.S. Department of Health and Human Services
 UMKC
 United Way of Greater Kansas City
 Vietnamese American Community of Greater Kansas City
 YMCA

In addition to the survey, Clay County Public Health Center also conducted public forums in six communities (Excelsior Springs, Smithville, North Kansas City, Kearney, Gladstone, Liberty) to gather feedback and gain deeper insight into the health issues most important to individual communities. To further its commitment to gathering feedback from as broad and diverse an audience as possible, CCPHC established the Diversity Advisory Council on Health Equity (DACHE). This group has met monthly since 2014 to discuss health care and access issues from the perspectives of minority and underserved communities.

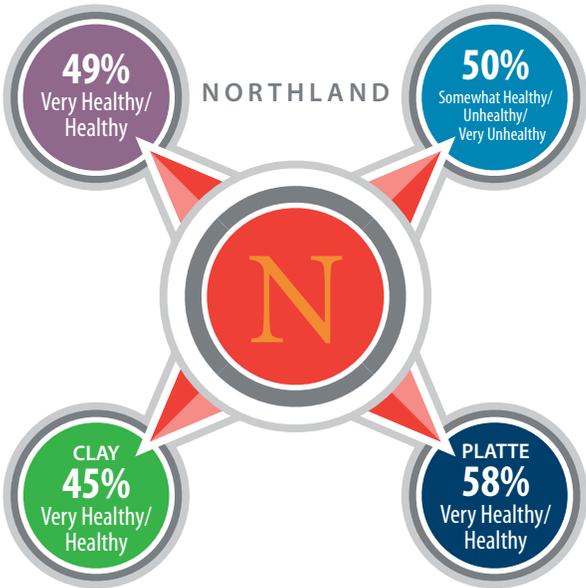
Community Survey Partners

Alzheimer's Association	Northland Community Services Coalition
American Indian Council	Northland Health Care Access
CHIA Award Winners	Northland Mother and Child Health Partnership
Clay County Public Administrator	Northland Neighborhoods
Clay County Public Health Center	Northland Shepherd's Center
Clay County Senior Services	Park Hill School District
Crossroads Hospice	Parkville, City of
Diversity Advisory Council for Health Equity	Phoenix Housing
Family Promise	Platte City Area Chamber of Commerce
Gladstone, City of	Platte City, City of
Good Samaritan Center	Platte County Back-to-School Fair Committee
HealthCare USA	Platte Co. Board of Services
Heartland Habitat for Humanity	Platte County Health Department
Hillcrest Hope Clay Co.	Platte County Public Administrator
Home State Health	Platte County R-3 School District
KCP&L	Platte County Senior Fair Committee
Kansas City Missouri Health Department	Platte County Senior Fund
Liberty, City of	Primrose Retirement
Liberty Hospital	Rebuilding Together Clay County
Linden Woods Village	Right at home
Little Wolf Productions	Riverside, City of
Love Inc. of Clay County	Saint Luke's Health System
Missouri City School District	Seniors Blue Book
Missouri Gas Energy	Shepherds Center – Kansas City
North Kansas City, City of	St. Therese School
North Kansas City Business Council	The Whole Person
North Kansas City Hospital	Tri-County Mental Health
North Platte School District	University of Missouri Extension
Northland Career Center	Vocational Rehabilitation
	West Platte School District

Here’s what the responses to the survey and feedback from the forums and meetings told us:

Opinion is fairly evenly divided about how healthy the community is, but the majority of people are satisfied with the quality of life in the Northland, and feel it is a good place to live, raise children and grow old.

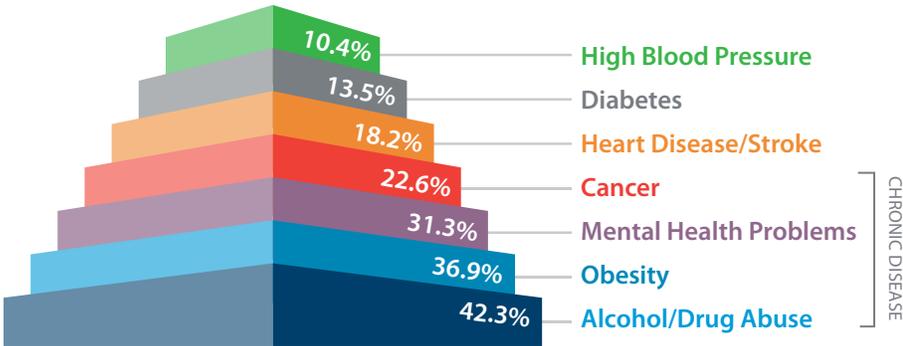
1. How healthy is my community?



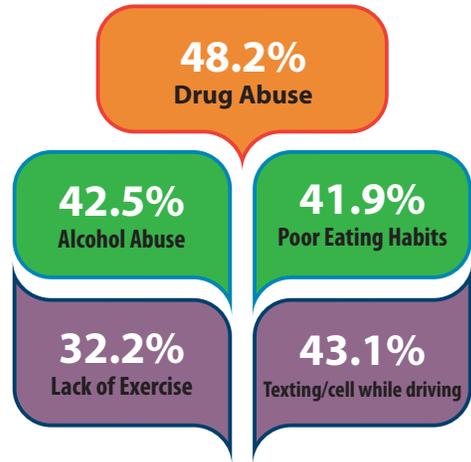
2. What is my quality of life in the Northland?



3. What are the most important health problems in my community?

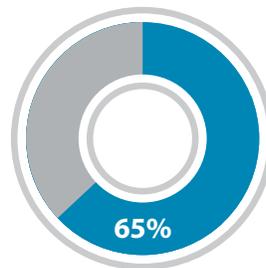


4. What are the most important “risky behaviors” in my community?



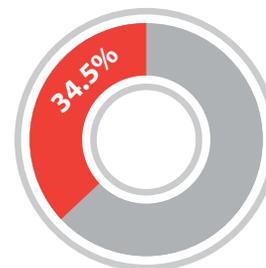
Health and wellness are inextricably tied to health care access. The community survey, community forums, and discussions with the Diversity Advisory Council raised this issue repeatedly. While more than half of survey respondents agreed the Northland has enough health and wellness assets, resources, and activities to meet their needs, a third also said there is not enough health care access for low income citizens in the community. The financial implications of health care are underscored by the 30% of residents who said they chose not to receive health care services in the past year because of cost. In Clay County, this statement was especially true for the uninsured, those who pay for health care by cash only.

5. Is there adequate Health Care Access in my Community?



Agree/Strongly Agree

The community has enough health and wellness activities to meet my needs.



Disagree/Strongly Disagree

There is enough access to medical care for residents with low income in our community.



Agree/Strongly Agree

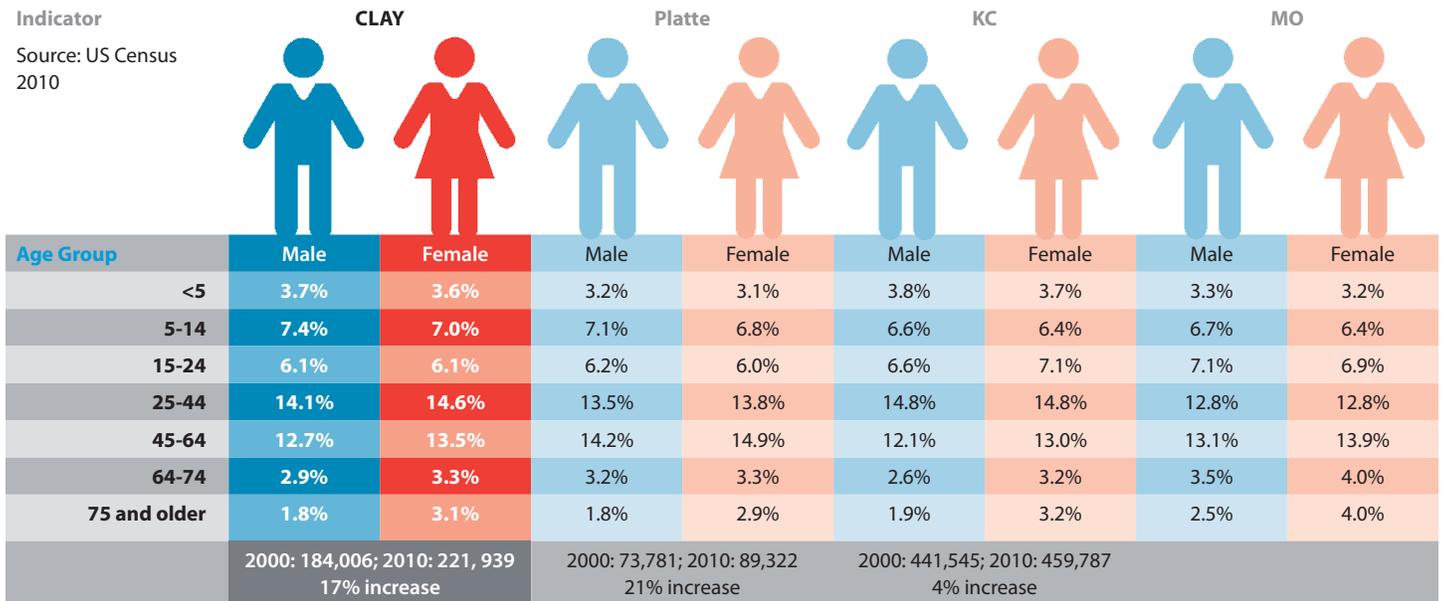
In the last year, I chose not to receive health care services due to cost.

Community Profile

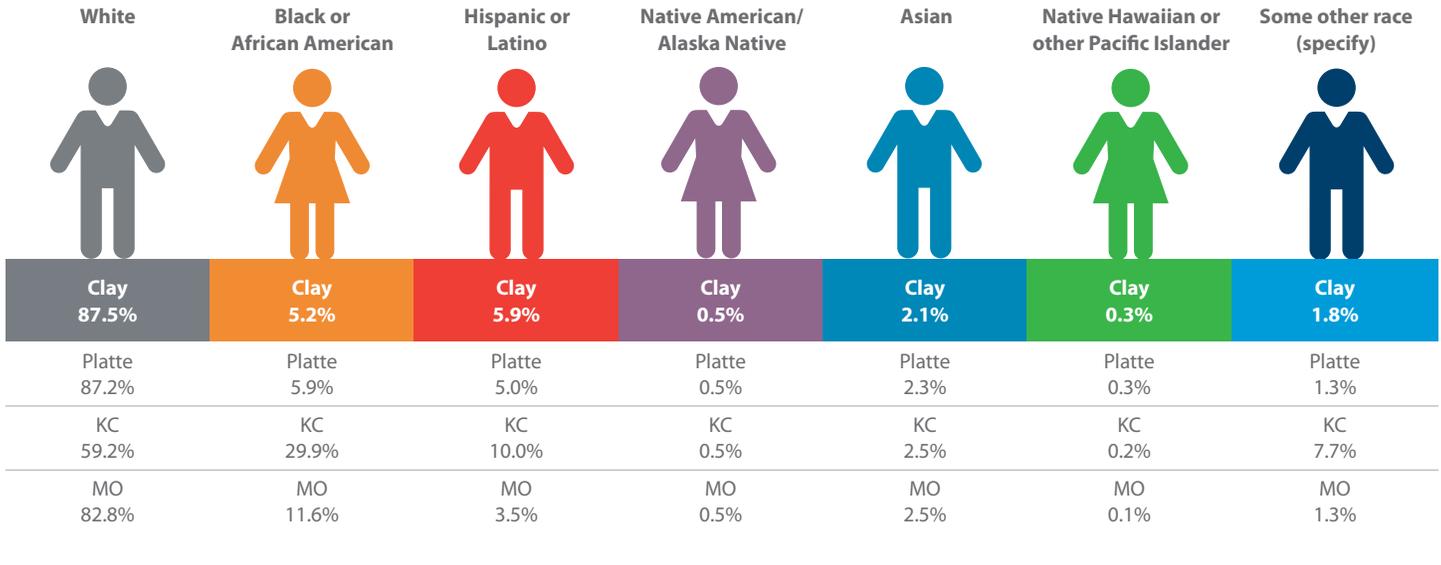
Before asking the question, “How healthy is our community?” it is important to first gain an understanding of just what that community looks like. A review of general demographic information and socioeconomic indicators helped the staff of Clay County Public Health Center gain insight into the factors having the most significant effect on the overall health of our community. This analysis of statistical data about illness, health behaviors, and social determinants of health (e.g. poverty), uncovered crucial information about the health status of county citizens. It is enlightening to note this analysis identified the same health issues and concerns as those raised through the community health survey and community health forums.

Clay County by the Numbers

Indicator
Source: US Census
2010



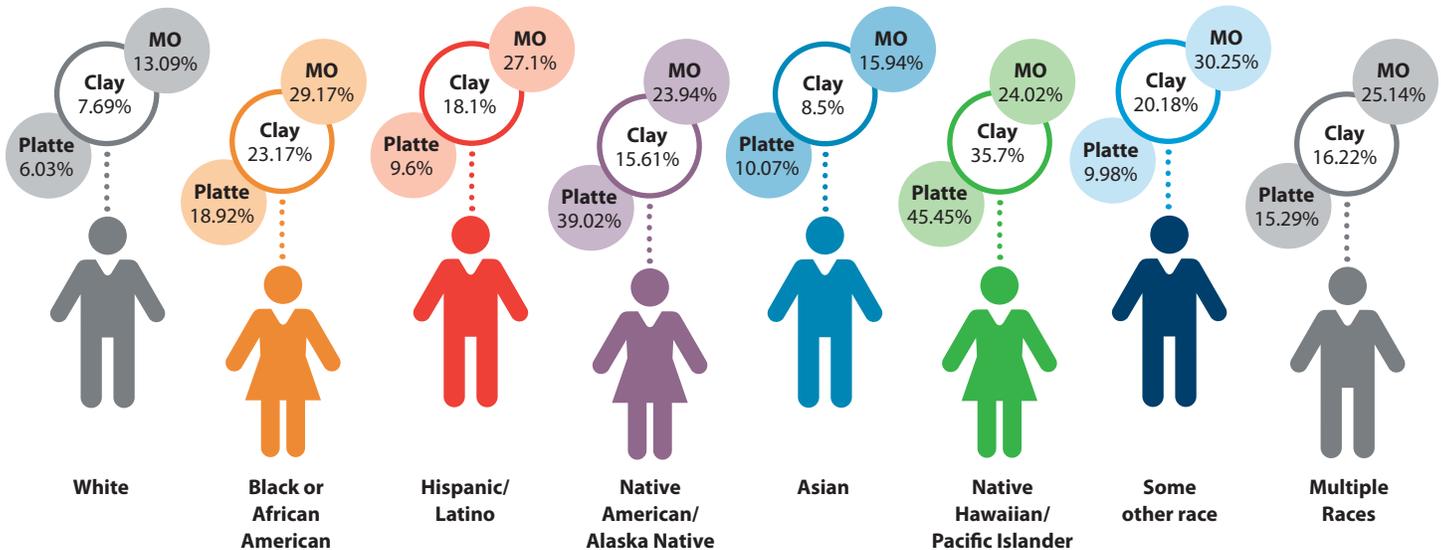
Demographic Profile: Race/Ethnic Distribution



There's a strong connection between income and health. It has long been clear richer, better-educated people live longer than poorer, less-educated people. Looking at the county as a whole, only 11% of the total Clay County population is living below the Federal Poverty Level (\$20,008 for a family of four). **However, when the numbers are broken down by race and by head of household they reveal that 23% of African American households, and nearly 30% of households headed by females in the county are living at or below the Federal Poverty Level.**

Percent of Persons in Poverty by Race and Ethnicity

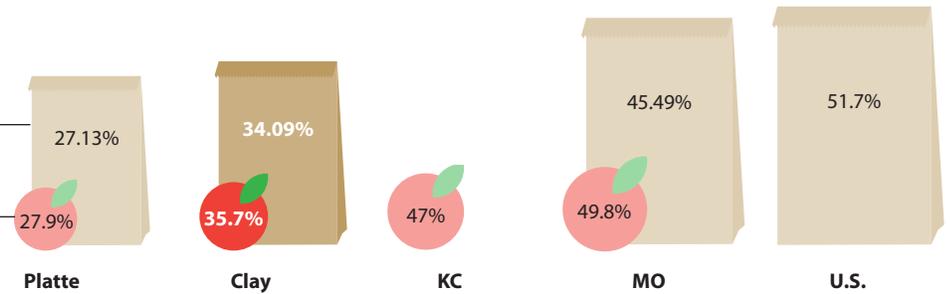
Population below 100% FPL – Percent by race and ethnicity
 American Community Survey via Community Commons, 2009-2013



One-third of Clay County students are eligible for Free or Reduced Price Lunches, although in some schools, the number of eligible students is 70% or greater.

Free and Reduced Price Lunch

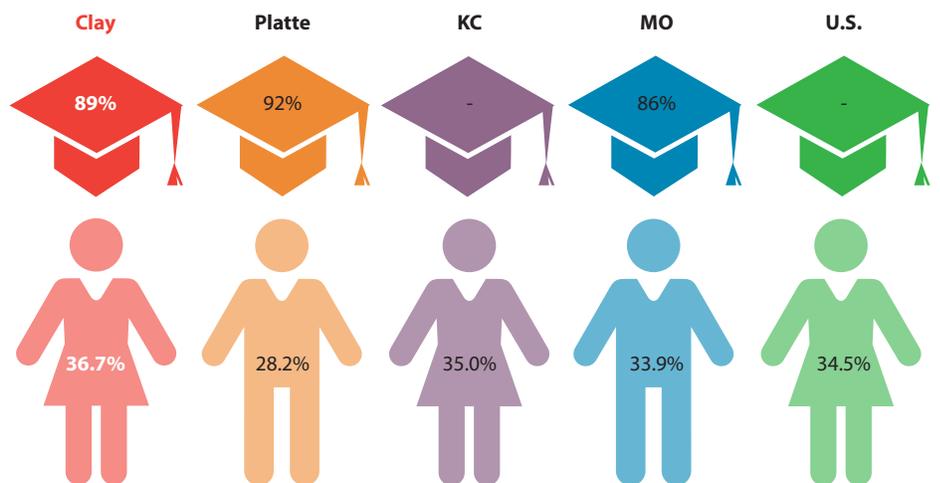
Children Eligible for Free and Reduced Price Lunch
 National Center for Education Statistics, 2012-13
 Percent of children enrolled in school free/reduced lunch programs
 Kids Count, Dese.mo.gov, 2013



Some might be surprised by the correlation between educational attainment and health. Research has demonstrated the better educated a person is, the better health outcomes he or she is likely to enjoy. These better health outcomes can be seen in both morbidity rates for acute and chronic diseases, in mortality rates, and in life expectancy. Further, those with four years of education beyond high school also report more positive health behaviors. They are less likely to smoke, to drink a lot, to be overweight or obese, or to use illegal drugs. **These findings may have serious implications for Clay County where 36.7% of residents aged 25 and above have a high school diploma or less.**

High School Graduation Rate

High School graduation Rate: Percent of 9th grade cohorts that graduate in 4 years
 County Health Rankings & Roadmaps, 2015 Report, 2011-12



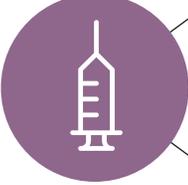
Persons aged 25 and older with a high school diploma or less

U.S. Department of Commerce United States Census Bureau American Fact Finder, 2013

How Healthy Is Clay County?

Chronic Disease

Chronic diseases are the leading causes of death and disability in the U.S. They are associated with high healthcare cost, low productivity and loss of quality of life, yet they are the most preventable of all health problems. According to the Missouri Department of Health and Senior Services, nearly 7 out of every 10 Missourians who die each year will die of a chronic disease. As expected, cancer, heart disease, chronic lower respiratory disease and cerebrovascular disease (stroke) were the leading causes of death for Clay County citizens in 2014.

		Platte	Clay	KC	MO	Healthy People 2020
Heart Disease MICA, 2012 		121.1	151.6	165.2	191.5	103.5
		Heart Disease (mortality per 100,000)				
		149.6/100,000	165.5/100,000	187.9/100,000	181.0/100,000	161.4/100,000
Cancer MICA, 2012 		Mortality – Age adjusted Rates: All cancers: AAM, Total (mortality per 100,000)				
		151/100,000	167.7/100,000	174.6/100,000	177.5/100,000	
		Mortality – Age adjusted Rates: All cancers: White (mortality per 100,000)				
	90.4@/100,000	104.9@/100,000	212.6/100,000	222.3/100,000		
	Mortality – Age adjusted Rates: All cancers: Black/African American (mortality per 100,000)					
COPD MICA–Chronic, 2012 		38.9/100,000	51.1/100,000	48.7/100,000	51.6/100,000	
		Chronic obstructive lung disease (mortality per 100,000)				
		15.4/100,000	15.8/100,000	23.5/100,000	20.2/100,000	66.6/100,000
Diabetes MICA, 2011-2013 		Mortality – Age adjusted Rates: All cancers: AAM, Total (mortality per 100,000)				
		14.0/100,000	15.5/100,000	18.3/100,000	18.6/100,000	
		Mortality – Age adjusted Rates: All cancers: White (mortality per 100,000)				
	91.9@/100,000	18.7@/100,000	36.1/100,000	38.0/100,000		
	Mortality – Age adjusted Rates: All cancers: Black/African American (mortality per 100,000)					

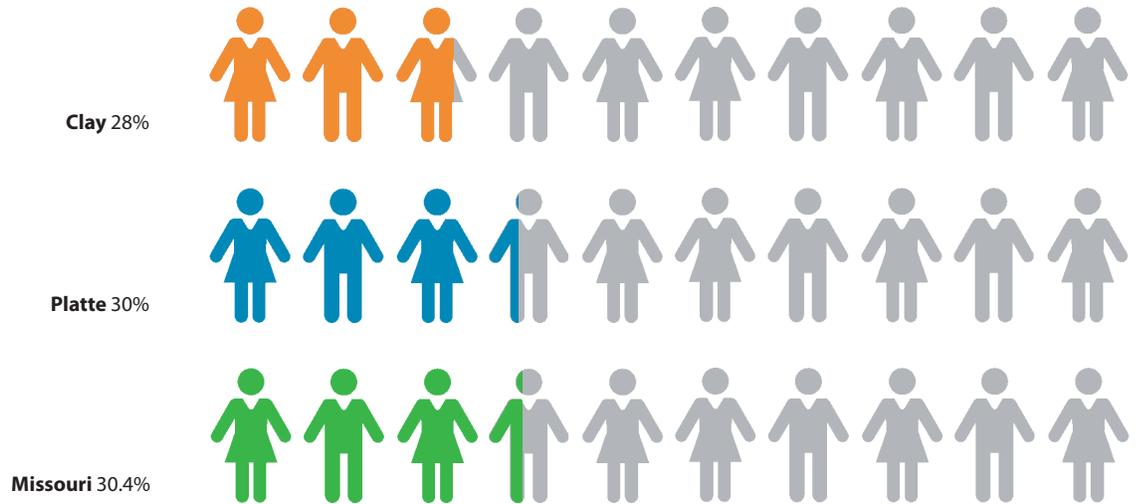
* @ symbol indicates an unstable rate with fewer than 20 events.

Health Behaviors - A Description of Contributing Causes

Chronic diseases are impacted by health choices. Those who are overweight/obese, who smoke, who use or abuse drugs or alcohol, and who do not eat a healthy diet or exercise regularly are at far greater risk to develop and die from a chronic disease. The most current health behavior data captured for Clay County makes clear where the greatest challenges to reducing chronic diseases lie. Nearly 30% of the population is obese. Far too few are eating an adequate diet of fruits and vegetables, and 25% of adults reported they are participating in no leisure time physical activity. Discussion at the Community Health Forums revealed a lack of access to healthy eating and active living opportunities for residents.

Obesity

Healthy People 2011
Baseline 33.9; Target 30.5



Fruit and Vegetable Consumption

Percent of Adults with Inadequate Fruit and Vegetable Consumption

BRFSS via Community Commons, 2005-2009



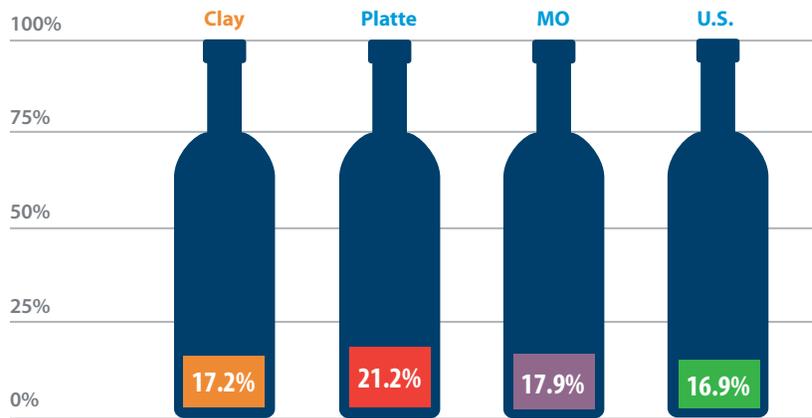
Mental Illness and Substance Abuse

The Missouri Department of Mental Health estimates that nearly one in five Missouri adults suffers from mental illness and one in 13 suffers from substance use disorders. It's not surprising that mental health problems and alcohol/drug abuse were among the top health issues identified in the community health assessment survey. The issue is particularly significant as the U.S. Department of Health and Human Services, Health Resources and Services Administration **identified Clay County as a Designated Health Professional Shortage Area (HPSA) for Mental Health in 2015, meaning the county does not have an adequate number of mental health professionals to meet community needs.**

Mental health and substance abuse issues are frequently inter-related. Data gathered through the National Survey on Drug Use and Health suggest over 40 percent of adults with a substance disorder have co-occurring mental illness. While little county-level statistical data on the use and abuse of alcohol and drugs is available, we do know binge drinking (consuming 5 or more drinks in a single occasion for males, 4 or more drinks in single occasion for females) is a problem in Clay County. Additionally, the Missouri Student Survey administered to students in 6th through 12th grades by the Missouri Department of Mental Health provides interesting insights into possible future trends.

Binge Drinking

BRFSS via Community Commons, 2006-2012



Clay County, Missouri, Student Survey Responses



38% said marijuana is easy to get.



18% believe it would be easy to get other drugs, such as cocaine, methamphetamine and ecstasy.



Nearly 60% of students indicated they believe it is easy to obtain alcohol.



51% have friends who drink alcohol.

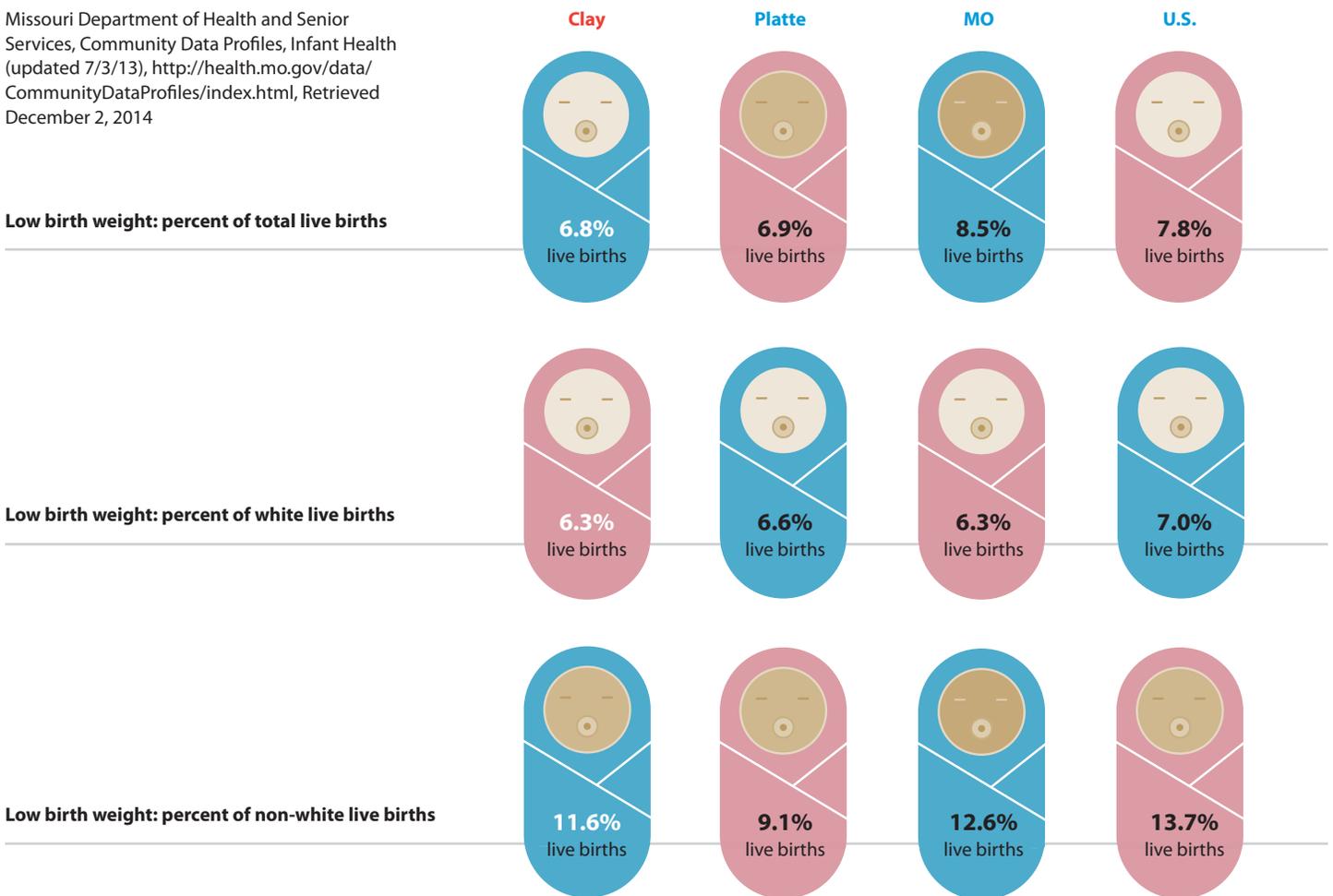
Maternal and Child Health

Ensuring healthy pregnancies, births and infancies protects adult health and plays a key role in determining the health of the next generation. Yet social determinants such as poverty and racial disparities can impact the health status of a mother as well as her ability to access to care. The data from Clay County suggests these issues may be having negative implications for poor mothers and children in the community. The good news is the majority of Clay County mothers receive prenatal care during pregnancy. While the incidence of low birth weight babies is lower in Clay County than in neighboring Kansas City, **nonwhite mothers are almost twice as likely to have low birth weight babies than white mothers.** The disparity in neonatal and postnatal mortality rates between white and nonwhite mothers in Clay County is stark. **The neonatal mortality rate for nonwhite mothers is double for nonwhite infants.**

Low Birth Weight

2008-2012

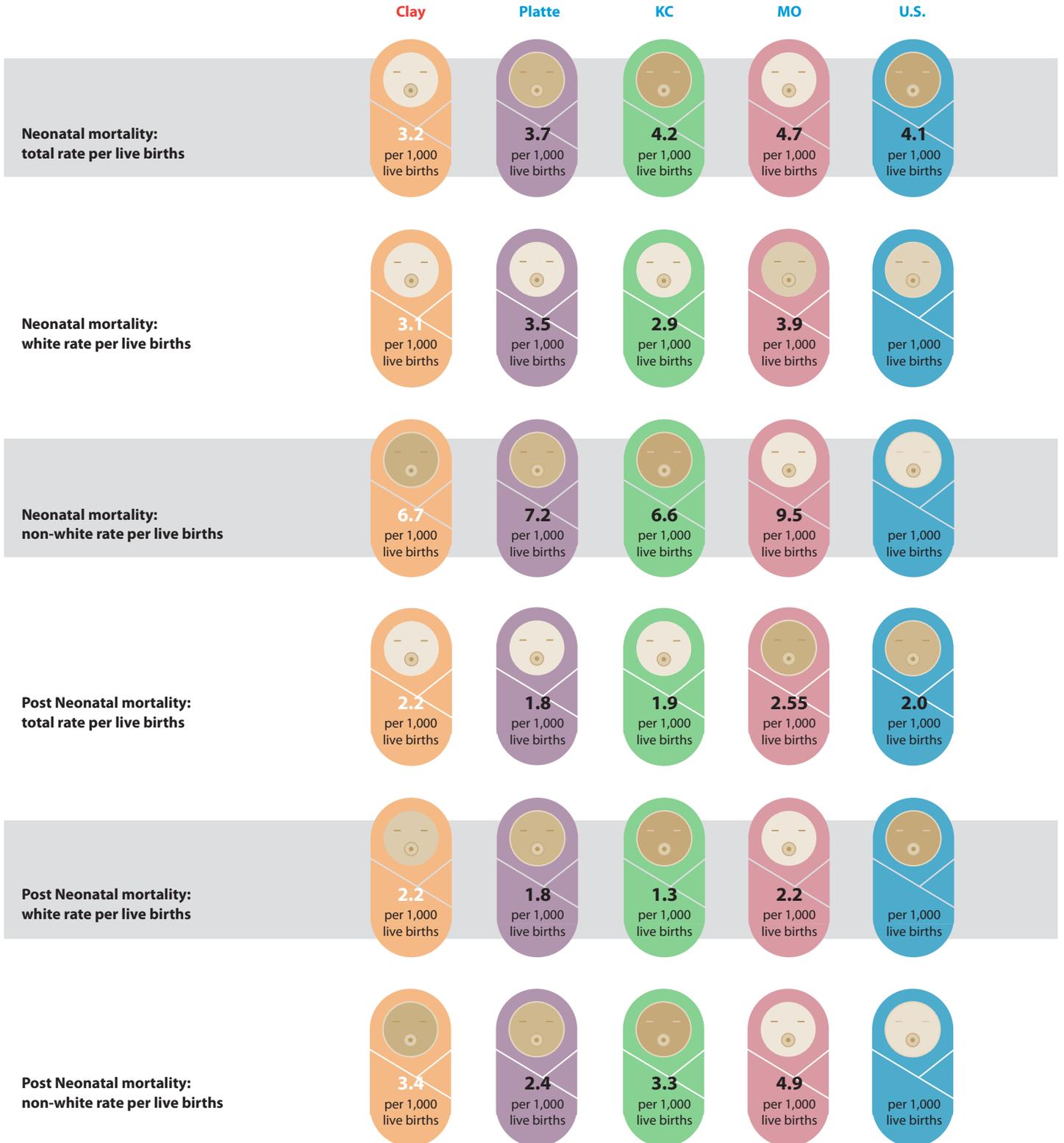
Missouri Department of Health and Senior Services, Community Data Profiles, Infant Health (updated 7/3/13), <http://health.mo.gov/data/CommunityDataProfiles/index.html>, Retrieved December 2, 2014



Neonatal Mortality

2002-2012

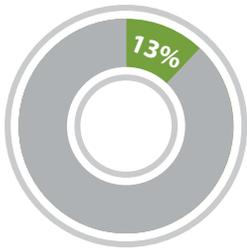
Missouri Department of Health and Senior Services, Community Data Profiles, Infant Health (updated 7/3/13), <http://health.mo.gov/data/CommunityDataProfiles/index.html>, Retrieved November 19, 2014



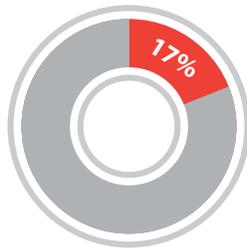
Health Care Access

Having access to care, and in particular to care from a primary care provider, is an essential component to improving the health of an individual and to influencing positive health outcomes in the community as a whole. Access to this kind of health care is a challenge for some Clay County and Northland residents.

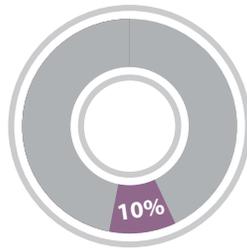
Health Care Access



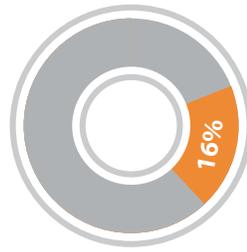
13%
of the Clay County population has no health insurance.



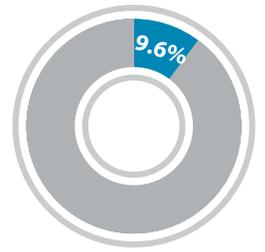
17%
of Community Health Survey respondents indicated they do not have a doctor they see when they are sick.



10%
of survey respondents say they do not have access to the medical specialists they need.



16%
of Clay County survey respondents who pay for health services by cash only say they do not have access to the medical specialists they need.

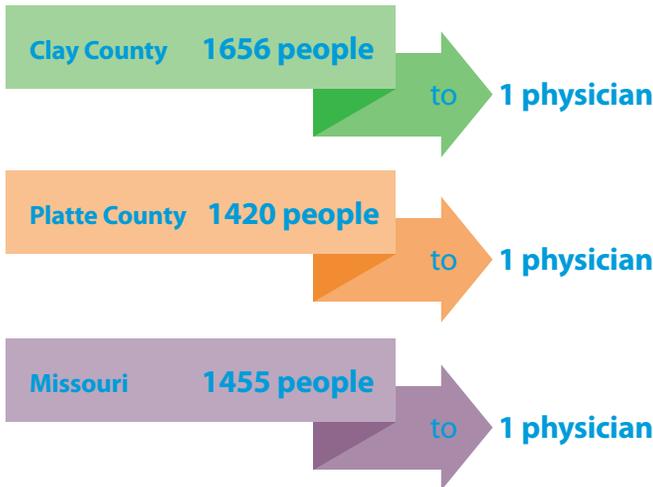


9.6%
of the Clay County population is without a regular source of primary care, and did not get health care in the last 12 months.

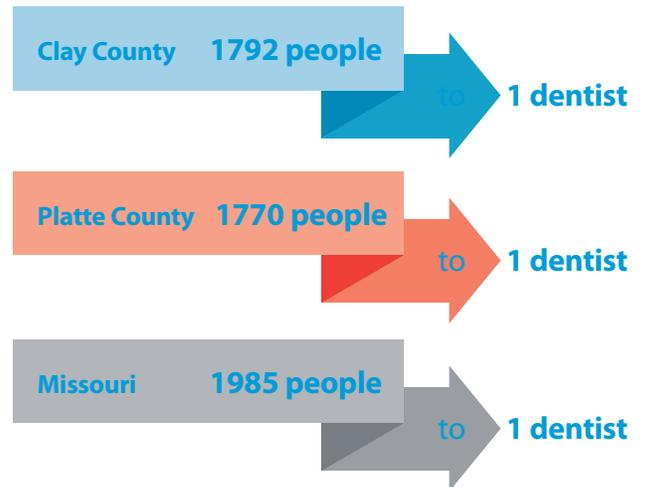
General Population to Physician Ratio

Licensed primary care physicians

(general practice, family practice, internal, ob/gyn, and pediatrics)



Dentists



What does this mean and where do we go from here?

Analysis of the health data, including the feedback obtained through the community health assessment survey and forums, led Clay County Public Health Center to identify three key health priorities that must be addressed in order to improve the health and quality of life for Clay County citizens.

Priority 1: Access to care

Why?

- In 2015, the U.S. Department of Health and Human Services, Health Resources and Services Administration identified Clay County as a Designated Health Professional Shortage Area (HPSA) for Mental Health.
- There are 1792 patients to every dentist in Clay County. In primary data provided by three hospitals in the Northland, unspecified disorder of the teeth and dental caries (tooth decay) were among the top ten leading diagnoses for emergency room visits in the patient pay population. This suggests access to dental care may be an issue for some populations.
- According to the latest data available, nearly 10% of Clay County residents have no regular source for primary care and reported they had not received medical care in the previous 12 months.
- 30% of respondents to the Northland Community Health Survey said they had chosen not to receive health care in the past year due to cost.
- More than 23% of African Americans living in Clay County live below the Federal Poverty Level, compared to 8% of whites. Poverty is a significant indicator of health inequities.
- Households headed by females are at particular risk for living in poverty. In Clay County, just under 30% of female headed households live at 125% or below the Federal Poverty Level. This could have serious implications for access to health care services for these women and their families.
- Rural residents are at a higher risk for experiencing higher rates of risky health behaviors and tend to have reduced access to health care. About 10% of Clay County residents live in rural communities. This was clear from the discussion at the Community Health Forums in rural communities, where residents shared issues accessing specialty care, urgent care, and general wellness opportunities.

- Low birth weights occur more frequently in non-white infants in the Northland. In Clay County 6.3% of white children are born with low birth weights, while 11.6% percent of non-white children have low birth weights.
- The neonatal mortality rate for nonwhite infants in Clay County is double the rate for white infants.

Priority 2: Mental health and substance abuse

Why?

- The Missouri Department of Mental Health estimates that nearly one in five Missouri adults experiences mental illness and one in 13 have been diagnosed with use disorders. Recognition of the impact mental health issues and substance abuse has on the community is large and growing.
- Mental health problems were identified by 31% of the Community Health Survey respondents as one of the top three health problems in the community.
- More than 42% of respondents identified substance abuse, frequently linked to mental health problems, as a top health priority in for the community.
- 38% of Clay County youth responding to the Missouri Student Survey said marijuana is easy to get; 18% believe it would be easy to get other drugs such as cocaine, methamphetamine and ecstasy; 59% of youth said they believe it is easy to obtain alcohol; 51% have friends who drink alcohol.
- Primary data provided by Northland hospitals showed the two leading causes of inpatient visits for the 1-14 age group were related to depression. Depression was also the leading cause of inpatient hospitalizations in the 15-24 age group.

Priority 3: Chronic Disease

Why?

- Chronic disease is the number one killer in Clay County.
- The seriousness of this issue is recognized by the community at large as indicated by the high percentage of Northland Community Health Survey respondents who listed obesity (37%), heart attack and stroke (18%), and high blood pressure (10%) as serious community health problems.
- Missouri has the 16th highest rate of adult obesity (BMI of 30 or more) in America at 30.4%. In Clay County, 28% of the population is obese.
- More than 80% of Clay County adults do not eat an adequate diet of fruits and vegetables.
- More than a quarter of adults in the Northland reported that they did not participate in any leisure time physical activity.

These priorities were chosen for their interconnectedness and for the monumental impact they are having on the overall health of our community. Moving the needle on these issues will require collaboration and communication to develop and implement a thoughtful and effective plan of action focused on improving the health of our community. Clay County Public Health Center is committed to taking a leadership role as convener for this effort, engaging a wide range of organizations including public health systems, government agencies, schools, faith-based organizations, the business community, nonprofit entities, as well as individual citizens as champions of health, to effect change and make Clay County a healthier place to live, work, and play.

The full Community Health Assessment Report is available on Clay County Public Health Center's website, clayhealth.com.

Acknowledgments

Data Collection and Analysis:

Clay County Public Health Center

Corrie Courtney
Jody Light
Nkolika Obiesie
Jamie Powers

Kansas City Health Department

Mary T. Fangman
Frank Thompson

Liberty Hospital

Suzanne Leamer

Platte County Health Department

Erin Sanders

Samuel U. Rodgers Health

Tim Loethen

St. Luke's Health System

Audrey Hill

Report Content:

iBossWell, Inc.

Lynne Brown

Graphic Design:

Dawn Allman Design

Dawn Allman

A2Z Designs

Alexis Zaborac