FVHD Community Health Assessment Overview

January 26, 2023
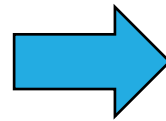
Our Vision:
Exceptional health and well-being for *all people* who work, live, learn and play in the *Farmington Valley*

FVHD

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What is a Community Health Assessment (CHA)?

- Collaborative, systematic, data-driven report that describes the health status, behaviors, and outcomes of residents

Understand the health of the population

→

Inform the prioritization of strategies and interventions to be undertaken to improve health in our communities

CHA Advisory Board

- **Membership:** Senior and social services, academia, mental health professionals, community health nursing, school nurses, medical providers, environmental health, women's health

- Roles:
  - Identified major public health issues in our communities
  - Decided on criteria for issue prioritization and data collection
  - Established vision and values for CHA process
  - Identified, reviewed, and analyzed secondary data sources and measures
  - Conducted data gap analyses
  - Brainstormed ideas for primary data collection
  - Identified community assets
  - Reviewed CHA drafts

Topical Areas

I. **Demographics**

    I. Population, Age Distribution, Racial and Ethnic Diversity, Language

II. **Social Determinants of Health**

    I. Educational Attainment, Income and Poverty, Employment, Housing, Environmental Conditions, Transportation, Access to Care

III. **Health Behaviors**

    I. Physical Activity, Substance Use, Routine Medical Care Visits, Vaccinations, Screenings, Sleep

IV. **Health Outcomes**

    I. Perceived Health Status, Leading Causes of Death, Chronic Disease, Infectious Disease, Maternal and Child Health, Mental Health, Accidents, Environmental Health

V. **Youth Health**

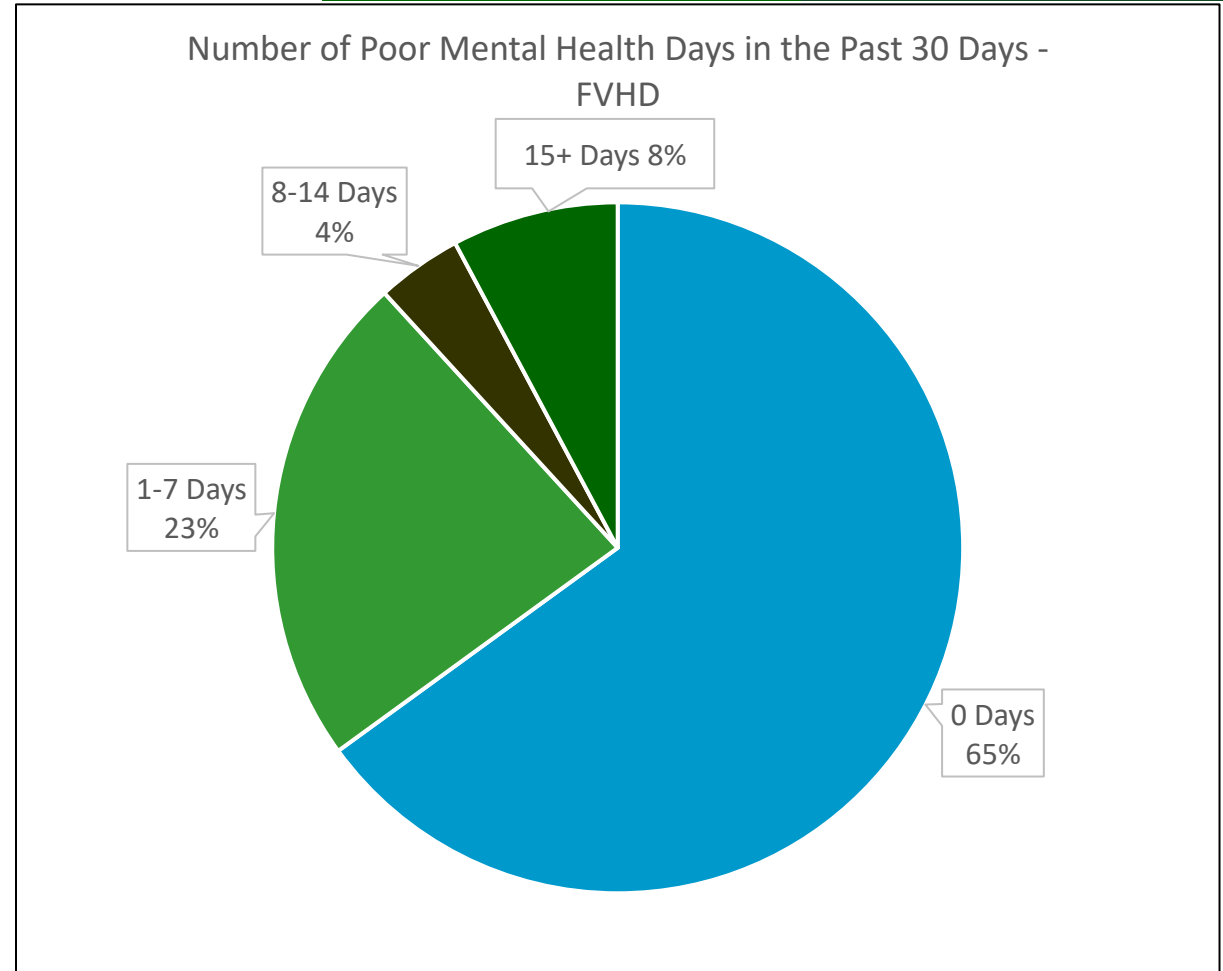   I. Health Behaviors, Mental Health

Data Sources

- US Census Bureau – American Community Survey
- CT Department of Public Health
- CT Behavioral Risk Factor Surveillance System
- CT School Health Survey
- Connecticut Data Portal
- Connecticut Data Collaborative
- CT State Unintentional Drug Overdose Reporting System
- CT Electronic Disease Surveillance System

- CT Department of Mental Health and Addiction Services
- CT Department of Energy and Environmental Protection
- CT Department of Education
- CT Department of Labor
- CT Department of Housing
- CT Crash Data Repository
- CT United Way
- United States Geological Survey
- FVHD Town Social Services Directors

Key Findings based on secondary data prior to COVID-19 pandemic

- Mental health concerns (adult and youth)

- Substance use concerns (adult and youth)

- High number of adults who have fallen and high proportion who subsequently required medical attention or whose fall contributed to their death

- High levels of overweight and obesity

- Low seasonal flu vaccine uptake

- High household radon levels
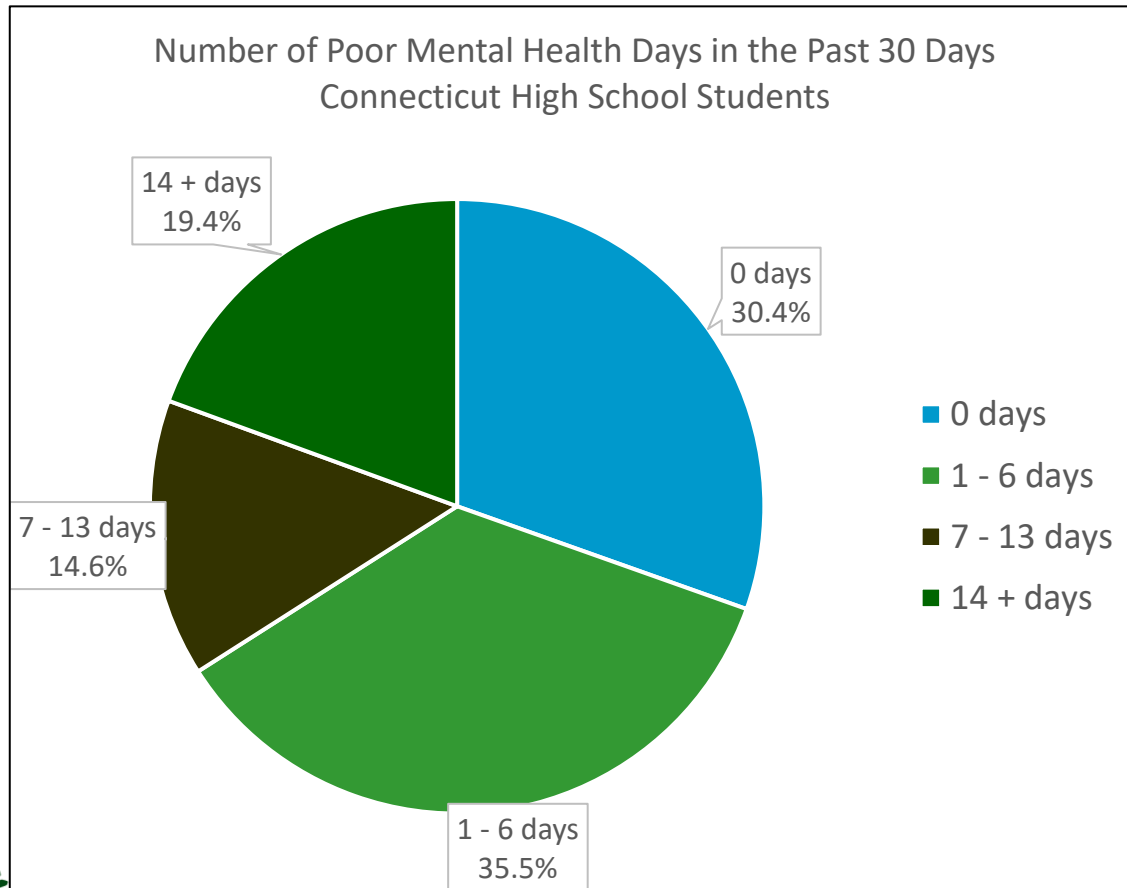
- Lack of affordable housing

Adult Mental Health

- 23% of FVHD respondents reported between one and seven days poor mental health in last 30 days
- 12% of FVHD respondents reported at least eight days of poor mental health in last 30 days
- 15.7% of FVHD residents report ever having been diagnosed with a depressive disorder
- 46% of individuals who die by suicide have a known mental illness

Number of Poor Mental Health Days in the Past 30 Days - FVHD

- 15+ Days 8%
- 8-14 Days 4%
- 1-7 Days 23%
- 0 Days 65%

Source: Connecticut Behavioral Risk Factor Surveillance System, 2016-2020

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Youth Mental Health – Poor mental health days

Number of Poor Mental Health Days in the Past 30 Days
Connecticut High School Students

14 + days
19.4%

0 days
30.4%

- 0 days
- 1 - 6 days
- 7 - 13 days
- 14 + days

7 - 13 days
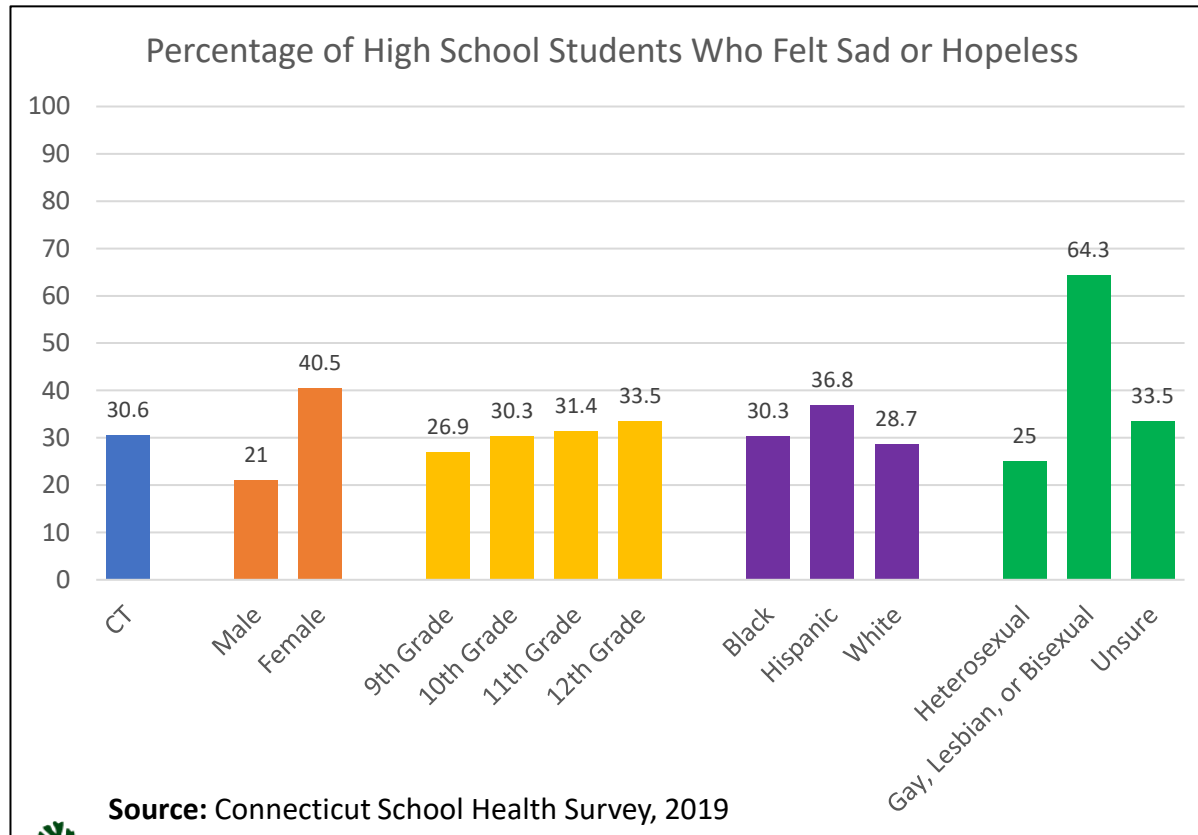14.6%

1 - 6 days
35.5%

Source: Connecticut School Health Survey, 2019

When asked "During the past 30 days, on how many days was your mental health not good?"

- 34% of high school students reported mental health not good for 7 days or more
- 8% reported mental health not good for all 30 days

Youth Mental Health in Connecticut – Feeling sad or hopeless

Percentage of High School Students Who Felt Sad or Hopeless

Category	Value
CT	30.6
Male	21
Female	40.5
9th Grade	26.9
10th Grade	30.3
11th Grade	31.4
12th Grade	33.5
Black	30.3
Hispanic	36.8
White	28.7
Heterosexual	25
Gay, Lesbian, or Bisexual	64.3
Unsure	33.5

Source: Connecticut School Health Survey, 2019

When asked "During the past 12 months, did you ever feel so sad or hopeless almost every day for 2 weeks or more in a row that you stopped doing some usual activities"

- 30.6% of high school students and 64.3% of gay, lesbian, bisexual students answered yes

- Statistically significant increase from 24.8% reported in 2005.

Youth Mental Health in Connecticut – Self harm and suicide

Percentage of High School Students who Reported Engaging in Self Harm Behaviors
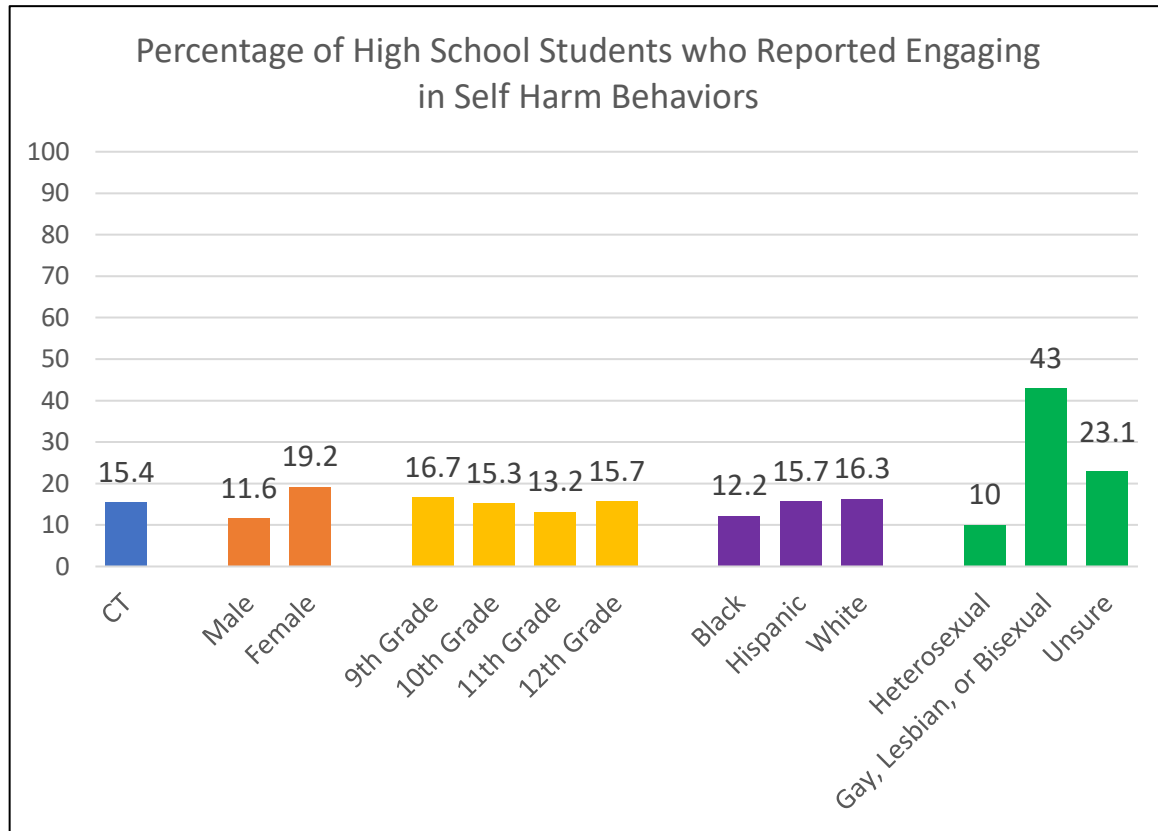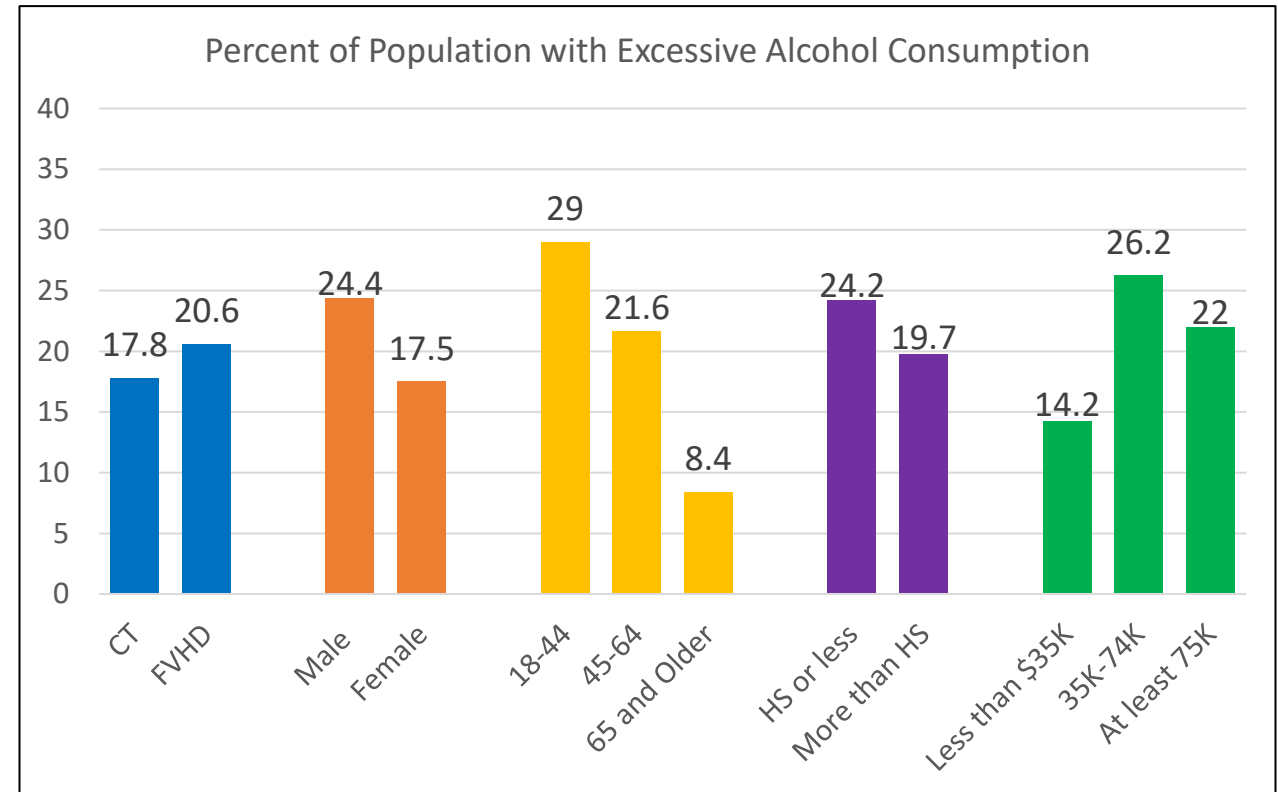
Source: Connecticut School Health Survey, 2019

When asked "During the past 12 months, how many times did you do something to purposely hurt yourself without wanting to die, such as cutting or burning yourself on purpose."

- 15.4% of high school students, 19.2% of female students and 43% of gay, lesbian and bisexual students engaged in self-harm behaviors

- 12.7% seriously considered suicide
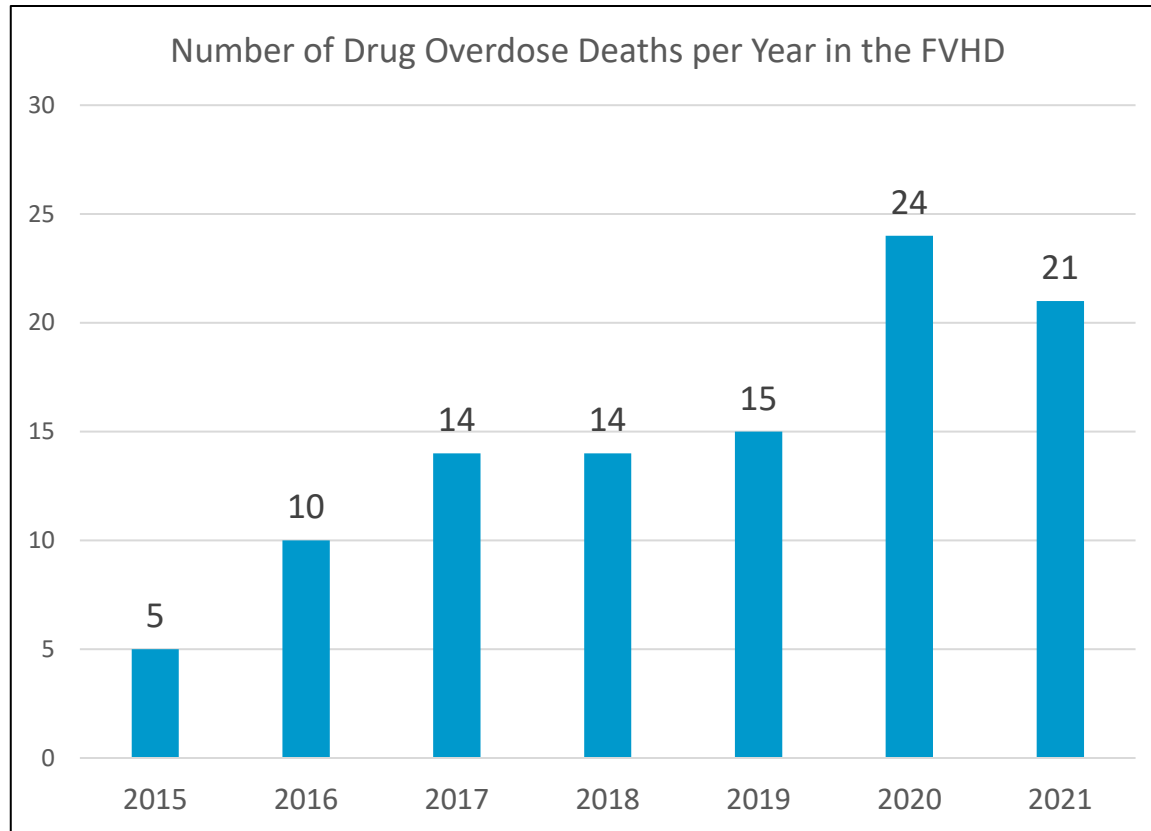
- 6.7% attempted suicide

Adult Substance Use

- 8% of FVHD adults currently smoke cigarettes
- 25.5% of FVHD adults use e-cigarettes every day or some days
- 20.6% of the FVHD population reports excessive alcohol consumption
- Town Social Services Directors note that alcohol use and alcohol abuse in the senior citizen population is currently at an all-time high

Percent of Population with Excessive Alcohol Consumption

Category	Value
CT	17.8
FVHD	20.6
Male	24.4
Female	17.5
18-44	29
45-64	21.6
65 and Older	8.4
HS or less	24.2
More than HS	19.7
Less than $35K	14.2
35K-74K	26.2
At least 75K	22

Source: Connecticut Behavioral Risk Factor Surveillance System, 2016-2020

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Overdose Deaths

Number of Drug Overdose Deaths per Year in the FVHD

- Deaths from drug overdoses more than quadrupled from 5 in 2015 to 21 in 2021
- Of the 103 drug overdose deaths since 2015, 74% were in males and 94% were in White, non-Hispanic residents
- The 35- to 44-year-old age group had the highest number of drug overdoses (25)
- Opioids were involved in 90.3% of drug overdose deaths; Fentanyl or an analog were involved in 73.8% of deaths

Falls occur for a variety of reasons – household hazards, improper footwear, medication issues, etc..
Falls are mostly preventable!

- The FVHD has an aging population with 19% age 65 and older
- 26.1% of the FVHD population has fallen in the past 12 months and 33% reported having fallen in the 65 and older age group
- Accidents are the third leading cause of death in the FVHD.
- 33.8% of deaths from accidents are the result of a fall
- Significant cause of emergency department visits and hospitalizations among 65 and older
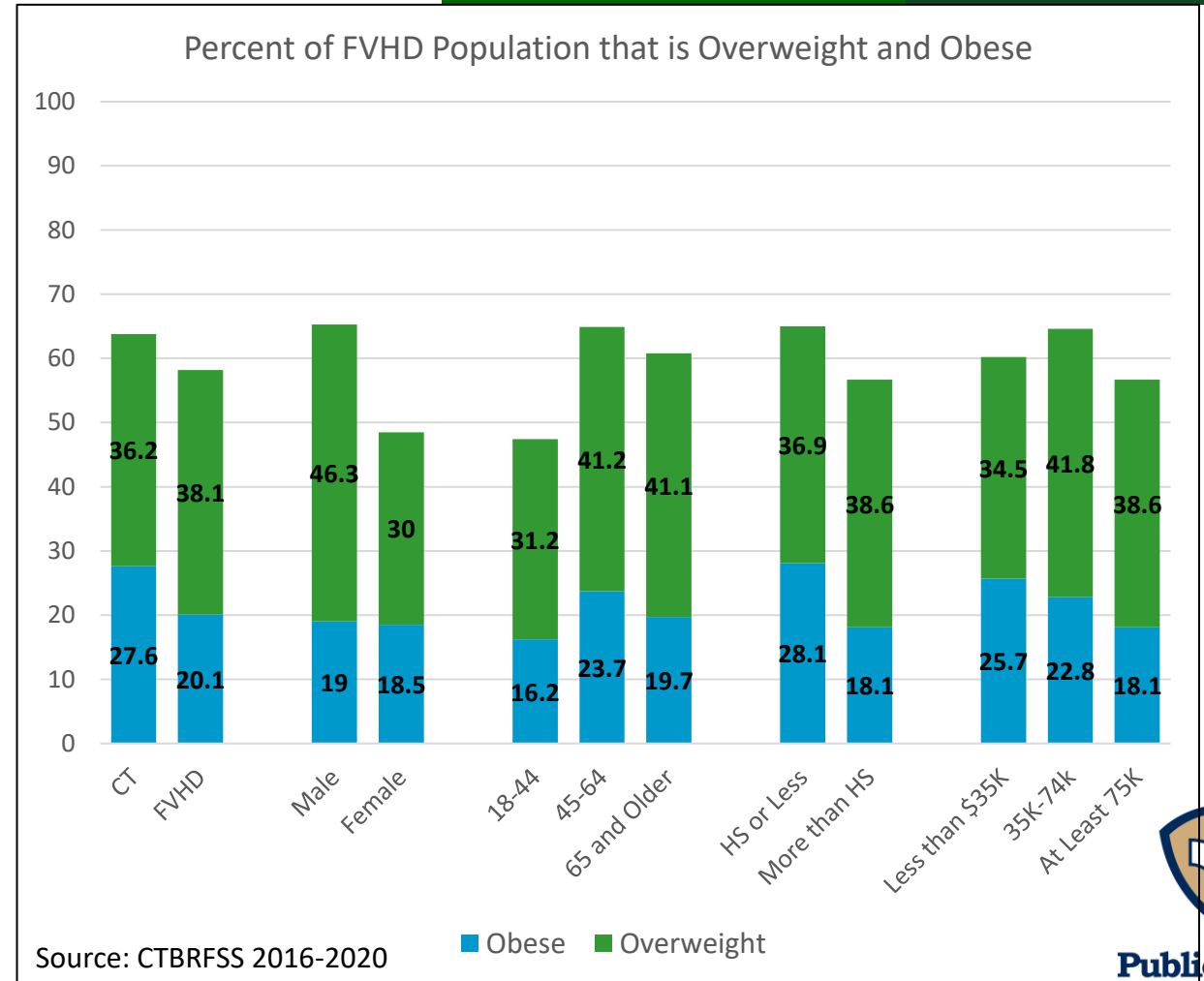

Percent of FVHD Population Who Have Fallen in Past 12 Months, 2016-2020

Category	Value
CT	23.1
FVHD	26.1
Male	21.8
Female	29.2
45-64	21.6
65 and Older	33
HS or Less	30.2
More than HS	24.9
Less than $35K	37.5
$35K - $74K	23.3
At Least $75K	22.2
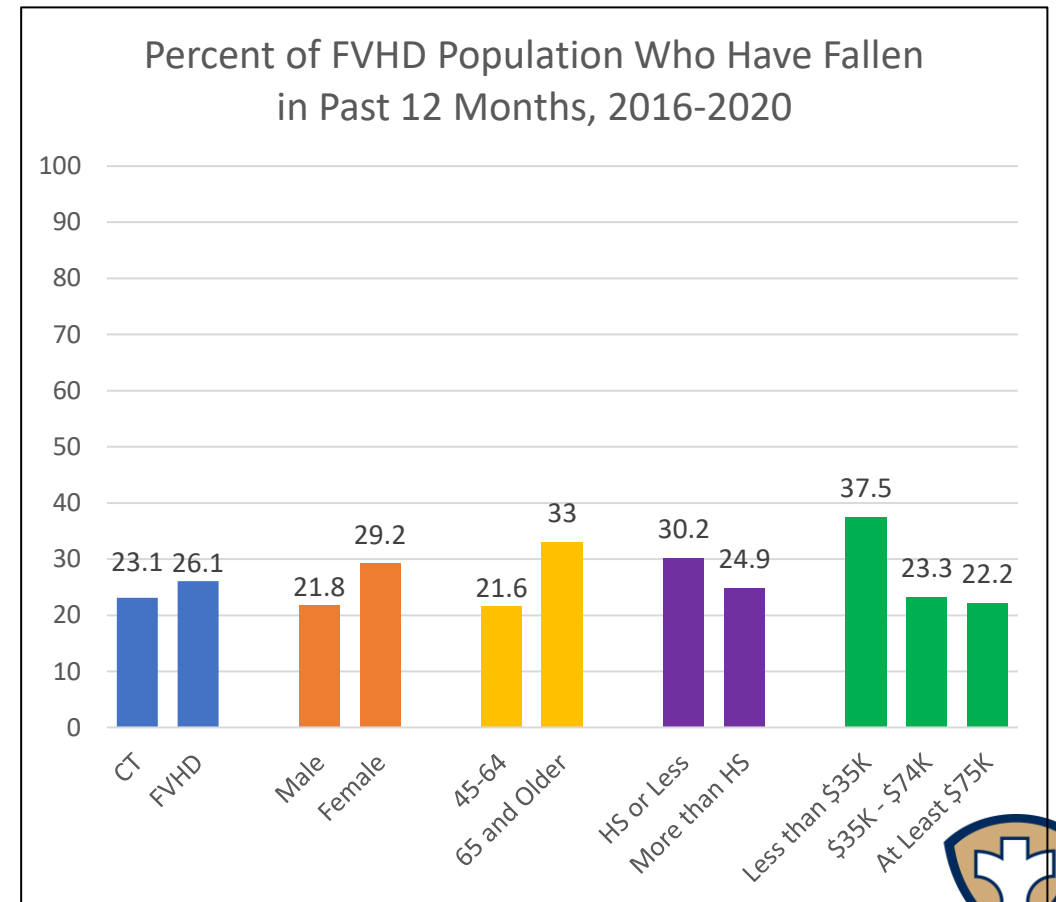
Source: Connecticut Behavioral Risk Factor Surveillance System, 2016-2020

Overweight and Obesity
58.2% of FVHD is classified as overweight or obese

- Overweight and obese adults are at risk for developing a wide range of health problems, including high blood pressure, type 2 diabetes, coronary heart disease, certain cancers, strokes, and other diseases.

- The prevalence of obese adults is of particular interest because obesity has been shown to be a major cause of preventable morbidity and mortality in the United States.

Percent of FVHD Population that is Overweight and Obese

Category	Obese	Overweight
CT	27.6	36.2
FVHD	20.1	38.1
Male	19	46.3
Female	18.5	30
18-44	16.2	31.2
45-64	23.7	41.2
65 and Older	19.7	41.1
HS or Less	28.1	36.9
More than HS	18.1	38.6
Less than $35K	25.7	34.5
35k-74k	22.8	41.8
At Least 75K	18.1	38.6

Source: CTBRFSS 2016-2020

Influenza Vaccine (a.k.a. Flu shot)

- Overall, 50.6% of FVHD adults reported they had received the influenza vaccine in the last 12 months falling short of the HP2030 goal of 70%.

- Higher percentages were reported in adults 65 years and older.

- The influenza vaccine is a vaccine that protects individuals against the flu or, if they do get the flu, the vaccine reduces severity of disease and risk of hospitalization and death.

- It is estimated that the influenza vaccine prevented 7.5 million flu illnesses during the 2019 to 2020 flu season and it reduced the risk of being admitted to an intensive care unit (ICU) with the flu by 82%.
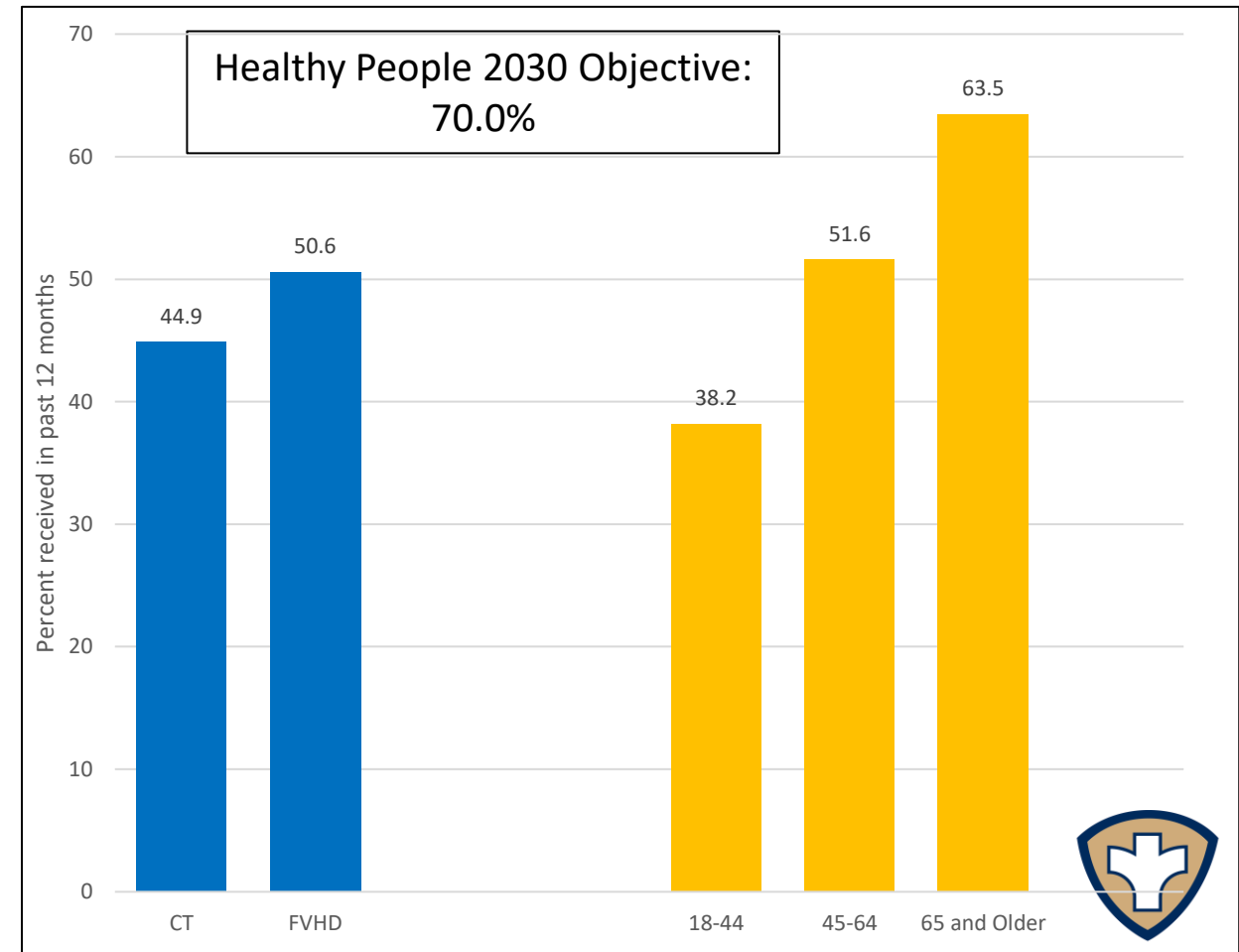
Source: CT BRFSS 2016-2020

Household Radon Levels
Approximately one in four kits analyzed in this time period exceeded the recommended EPA level of 4.0 pCi/l

Why is it important to test?

- Radon is an odorless, tasteless, naturally occurring gas that seeps up through the ground and diffuses into the air.

- Radon is the leading cause of death from lung cancer in non-smokers and the second leading cause of lung cancer deaths overall.

- In the FVHD, lung cancer was the leading cause of death from cancer for both males and females, accounting for 24.9% of all cancer deaths.

- It is estimated that lung cancer deaths could be reduced two to four percent by lowering radon levels in homes.

Measurement of Radon Levels, 1/1/2005 through 8/26/2022 - FVHD Towns

|	Number of Analyses	Number of Analyses where result was at or above 4.0 pCi/l	% Kits at action level
AVON	505	126	25%
BARKHAMSTED	101	28	27.7%
CANTON	388	94	24.2%
COLEBROOK	24	7	29.1%
EAST GRANBY	115	30	26.1%
FARMINGTON	615	177	28.8%
GRANBY	247	51	20.6%
HARTLAND	26	6	23.1%
NEW HARTFORD	203	47	23.2%
SIMSBURY	437	108	24.7%

Source: Connecticut Department of Public Health Radon Program (Note – Total number of analyses is likely higher than total number of households tested due to post-mitigation measurements.)

Affordable Housing
5.26% of FVHD housing units qualifies as affordable

- Affordable housing is associated with positive health outcomes as it allows individuals to spend a reasonable amount of income on the home.

- Overall, the percentage of housing units in each FVHD town that qualify as affordable is lower than the goal of 10% put forth by the State of Connecticut.

- Focus groups with Social Service Directors highlighted this issue as a pressing concern

Source: https://data.ct.gov/Housing-and-Development/Affordable-Housing-by-Town-2011-2021/3udy-56vi/data
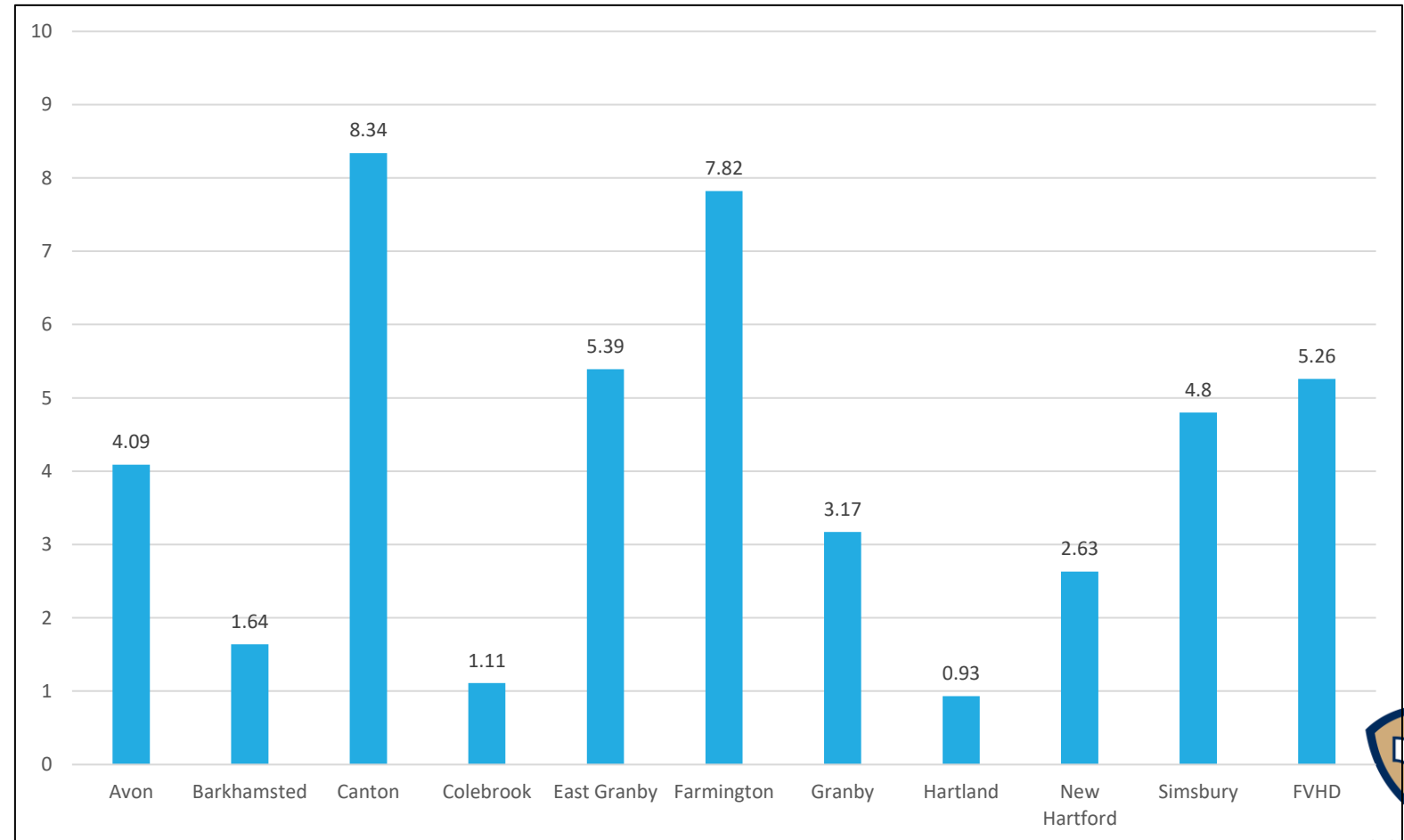
To view the complete
FVHD Community Health Assessment:

https://fvhd.org/wp-content/uploads/2023/01/2022-FVHD-Community-Health-Assessment.pdf

Next Steps

1. Broadly disseminate the findings of the CHA to the community
   - Developing topic-specific summary documents
   - Prioritize issues based on key findings
2. Establish workgroups by priority topic
   - Members are organizations, agencies, and community members with expertise and/or interest in topic
3. Develop community health improvement plan
   - Goals, objectives, strategies, action steps, and indicators to address priorities

How Can You Help?

- Recommend community organizations, agencies, and community members that should be involved in community health improvement

Contact Us!

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