

2012 Austin/Travis County Community Health Assessment

Summer 2012 Public Presentations















Community Health Improvement Planning

- Engage community members on health and social issues
- Collaborate with partners, meet new partners
- Helps to understand health disparities in communities
- Enables leaders to establish health priorities based on community needs
- Satisfies requirements (grants; non-profit hospitals; HHSD accreditation)
- Strengthens viability to successfully compete for funding opportunities













Today's Presentation

- Goals and methods of the assessment
- Key findings

Key themes and next steps















Vision and Mission

- Vision: Healthy People are the Foundation of our Thriving Community
- Mission: Our community individuals and organizations (public, private, nonprofit) – works together to create a healthy and sustainable Austin/Travis County













Goals of the Assessment

- Examine the current health status across Austin/Travis County
- Explore current health concerns among residents

Identify community strengths, resources, forces of change, and gaps in services





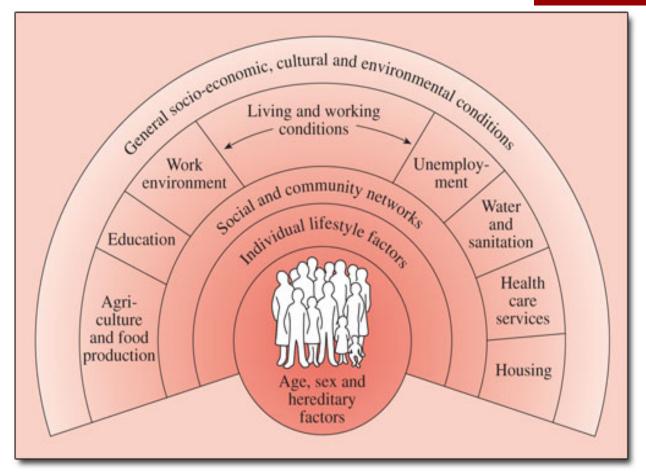








Framework: Considering the Social Determinants of Health



Source: World Health Organization, 2005















Methods

Reviewed existing data sources (national, state and local) to examine indicators:

- Demographics
- Social and Physical Environment
- Health Behaviors and Outcomes
- Health Care Access and Resources















Methods

Over 300 participants engaged through forums, focus groups, and interviews:

- 4 community forums
- 14 focus groups
- 28 key informant interviews
- Findings from 25 key informant interviews conducted for the Central Health Connection Leader Dialogue Series













Priority Sectors

- Economic Development/Business
- Philanthropic
- Public Safety
- Faith Community
- Behavioral and Mental Health
- Hospital/Health Care
- Culture/Arts
- Government/Political

- Health Promotion
- Education
- Housing
- Asian Americans
- Blacks/African Americans
- Latinos/Hispanics
- Aging/Elderly/ Disabled
- Parents
- Immigrants/Refugees













Key Findings











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Demographics

- Population of Austin/Travis County:
 - Experiencing rapid growth, including demographic shifts:
 - Increasing Aging population
 - Increasing Latino/Hispanic population
 - Increasing Asian American population
 - Decreasing African-American/Black population
 - Ethnically and linguistically diverse
 - Wide variations in socioeconomic characteristics





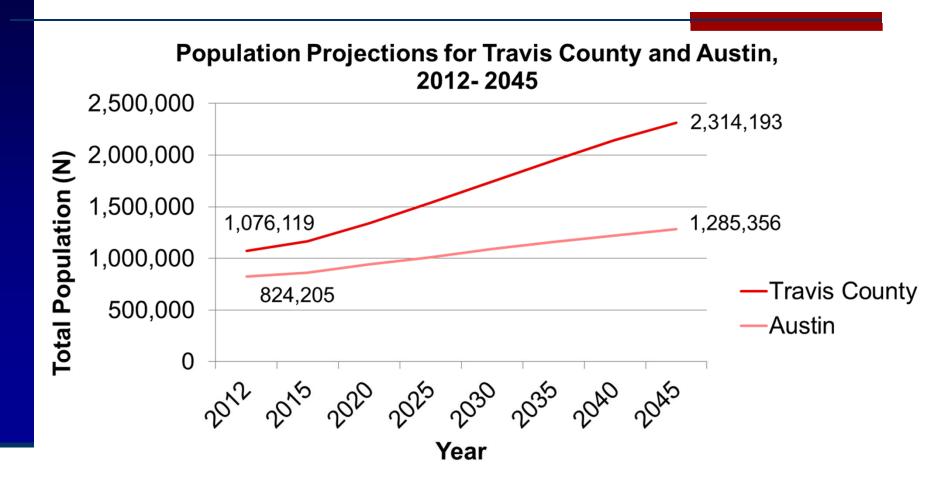








Population Growth



Source: Ryan Robinson, City Demographer, Department of Planning, City of Austin, 2012.







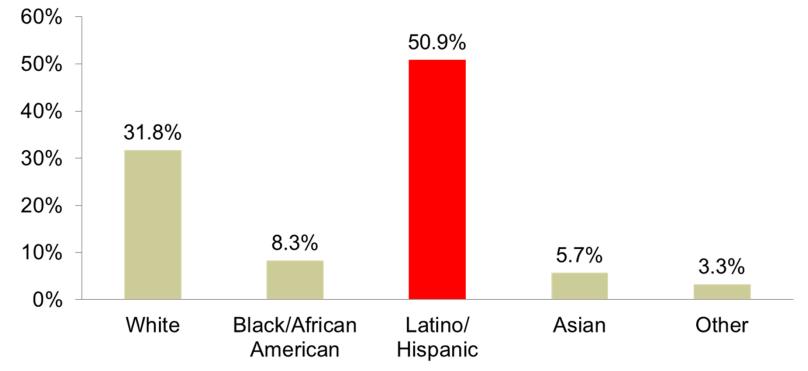






Racial and Ethnic Diversity

Percent Population under Age 18 by Race/Ethnicity in Austin, 2010



Source: U.S. Department of Commerce, Bureau of the Census, 2010 Census.













Socioeconomic Characteristics

High educational attainment; perceived as unequal

- Over 40% of Travis County adults had a bachelor's degree or higher compared to 26% of Texas adults
- Median income was higher in the County (\$51,743) than the State overall (\$48,615)
- Poverty disproportionately affects certain segments of the population
 - Latinos/Hispanics (27% living in poverty)
 - Blacks/African Americans (21% living in poverty)

Source: U.S. Department of Commerce, Bureau of the Census, 1-year estimate American Community Survey, 2010











Social and Physical Environment

- Demographic characteristics of Austin/Travis County are unequally distributed across the region
- Resulting in geographic disparities where residents lack access to services and resources
 - Transportation
 - Housing
 - Healthy food
 - Physical activity





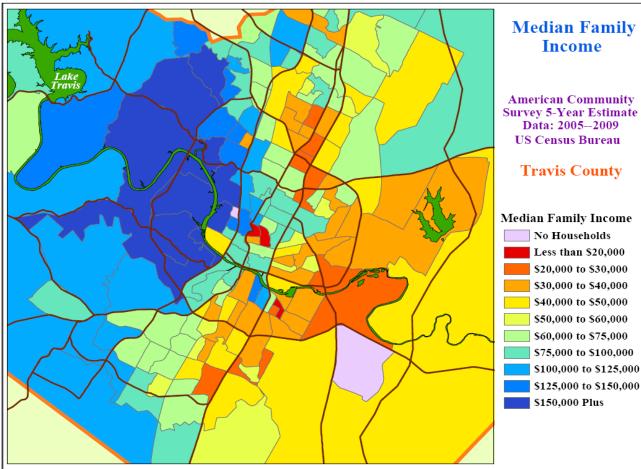








Geographic Disparities



Source: U.S. Department of Commerce, Bureau of the Census, 2005-2009 ACS as cited by Ryan Robinson, City Demographer, Department of Planning, City of Austin, 2012















Built Environment

Transportation options

- "My aunt is diabetic and she has stomach problems and it's hard for her to catch the bus with three children. When she's on the bus she has to take all the groceries and carry the baby also. Why does she have to go do all that? Why doesn't someone help her out with that issue?" Focus group participant
- Affordability of housing (reported in Imagine Austin Comprehensive Plan)
 - Housing and renting costs in Austin increased by 31% and 22% respectively, between 2000 and 2009
- Access to healthy food and physical activity (reported in 2012 County Health Rankings)
 - 9% of Travis County's low-income population did not live within 1 mile of grocery stores
 - Higher rate of recreational facilities in Travis County (11 facilities per 100,000 population) than in Texas as a whole (7 facilities per 100,000 population)













Health Behaviors

Obesity considered a pressing health issue

"The most pressing health concerns in my community are obesity, which will lead into high blood pressure, and a lack of physical activity which leads to diabetes..."–Focus group participant







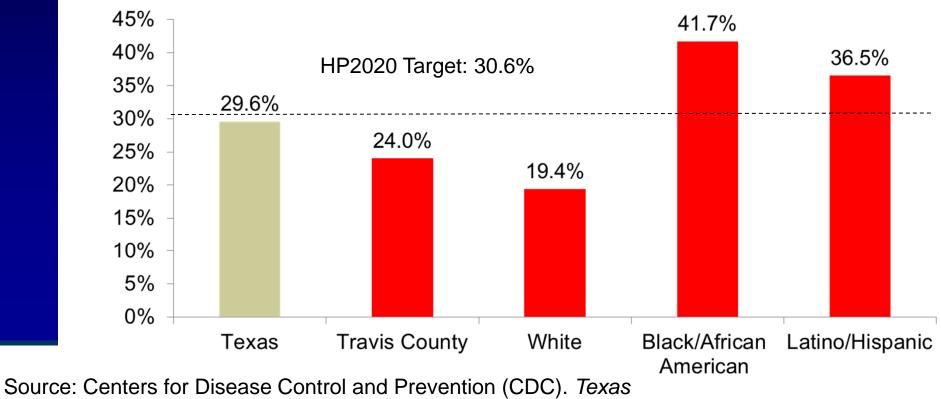






Obesity

Percent of Obese Adults (BMI≥30) in Texas and by Race/Ethnicity in Travis County, 2008-2010



Behavioral Risk Factor Surveillance Survey Data, 2008-2010













Healthy Eating and Physical Activity

 Less than 30% of County residents reported eating five or more fruit and vegetable servings per day
 Cost of healthy food poses a barrier to healthy eating

Source: Centers for Disease Control and Prevention (CDC). *Texas Behavioral Risk Factor Surveillance Survey Data*, 2009 and 2010

- About one in five adults indicated that they get no physical activity
 - Lack of access to recreational spaces prohibits physical activity (e.g., Lady Bird Lake)

Source: Centers for Disease Control and Prevention (CDC). *Texas Behavioral Risk Factor Surveillance Survey Data*, 2008-2010













Health Outcomes

- Chronic diseases emerged as a key concern
 Diabetes, heart disease, and cancer
- Mental health and need for services was the foremost community health issue
- Blacks/African Americans and Latinos/Hispanics experience higher rates of several health outcomes





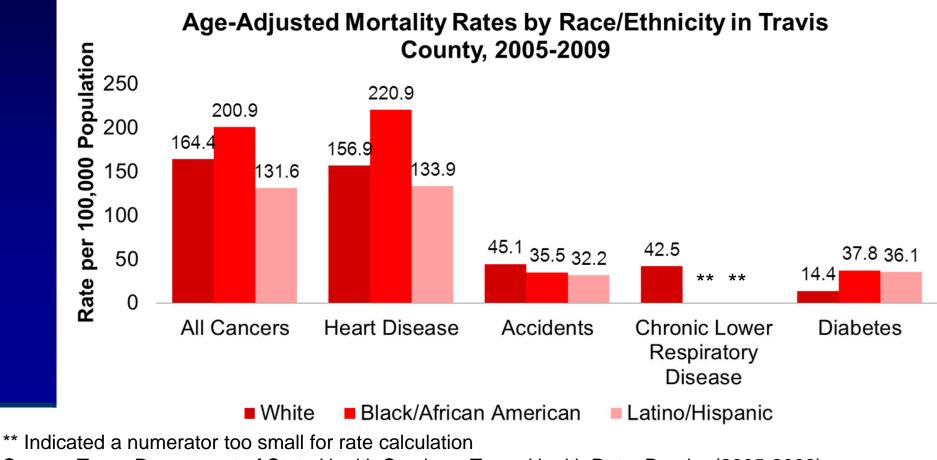








Leading Causes of Death: Chronic Disease



Source: Texas Department of State Health Services, Texas Health Data: Deaths (2005-2009).





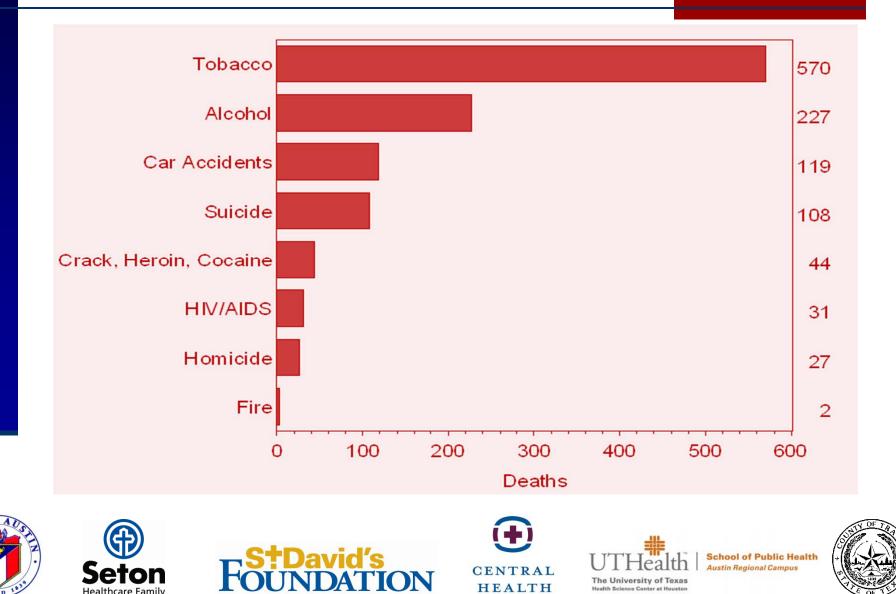




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Leading Cause of Preventable Deaths in Travis County, 2008



Mental Health

- "We are under a lot of stress and need more mental health services, but we never talk about this topic." – Focus group participant
- There is no continuum of care... An acute, psych hospital is not the answer. We need group homes and transitional living environments."—Interview participant













Mental Health

Approximately 20% of Travis County adults experienced five or more days of poor mental health in the past month

Source: Centers for Disease Control and Prevention (CDC). Texas Behavioral Risk Factor Surveillance Survey Data. 2008-2010

759 psychiatric discharges per 100,000 population across County hospitals

Source: Texas Department of State Health Services, Texas Health Care Information Collection and Texas Hospital Association Patient Data System, 2010

17 psychiatrists per 100,000 population, more than double that of Texas (7 psychiatrists per 100,000 population)*

Source: Texas Department of State Health Services, Center for Health Statistics, Health Professions Resource Center, 2011













Health Care Access

- Access to health care was a predominant theme:
 - Availability and accessibility of health care facilities and resources
 - Emergency room overuse
 - Challenges of navigating a complex health care system
 - Health insurance and cost related barriers













Health Care Access

- Travis County adults were more likely to have health insurance or a health care provider compared to statewide rates.
 - 81% reported having private or public health care coverage (BRFSS, 2008-2010)
 - 75% indicated they had a personal doctor or health care provider (BRFSS, 2008-2010)
 - 96 primary care physicians per 100,000
 population (Texas Department of State Health Service Supply and Distribution Tables for State-Licensed Health Professions, 2011)













Health Care Access, continued

As noted in A/TCHHSD's 2012 Critical Health Indicator's Report :

"The percent of the civilian non-institutionalized population with health insurance coverage is slightly higher in the city and county (approximately 78% to 79%) than the state (76%). More children under the age of 18 years are covered by insurance at the city and the county levels than at the state level."

Source: U.S. Census Bureau, 2010 American Community Survey 1-Year Estimates.













Strengths and Resources

Social and human capital

- Neighborhood cohesion, community engagement
- Access to services
 - Public safety, education system, hospitals, and churches
- Organizational leadership and partnerships
 - "Breadth and depth of collaborative activities going on in the county; there are lots of people thinking about public health and working together to leverage dollars to serve folks." – Interview participant













External Factors

Population growth and demographic shifts

- Latino/Hispanic, Asian, Aging, and African-American/Black populations
- Fiscal and political environments
 - "We're still operating in a less than perfect economic environment. It's still hard to make big things happen." – Interview participant
 - "Our policies around planning have not evolved because of bureaucracies that have always done it the same way." – Interview participant

Fragmented organizational efforts

"We need to better coordinate planning groups...A lot of groups are doing similar things." – Interview participant













Vision and Opportunities

- Integrated and holistic health care system that focuses on prevention
- Ensuring equitable access to health care
 - "Basic public health care needs to be available and affordable." – Focus group participant
- Improving the built environment
 - "Providing an urban environment that is conducive to physical activity is probably the most important thing that we can do to prevent many issues." – Interview Participant
- Engaging in policy change and strategic city planning















- Disparities and wide variation in demographics and socioeconomic status
- Needs of growing Latino/Hispanic population
- Limited transportation options, including walkability
- Insufficient mental health services to meet increasing demand













Key Themes

- Chronic conditions and related health behaviors (physical activity, healthy eating, obesity)
- Access to primary care, especially among vulnerable populations
- Prevention focus in health care services and programs
- Strategic, coordinated, and collaborative approach to address health issues













Next Steps

- Community Health Improvement Plan (CHIP):
 - Priorities for the CHIP were identified based on the Community Health Assessment (CHA)
 - 1. Establish workgroup for each priority area
 - Create action plans, including goals, objectives, evidence-based strategies, and key indicators
 - 2. Engage community partners for feedback and partnership in plan adoption













CHIP Priority Areas

HEALTH IMPROVEMENT PRIORITIES	FOCUS AREAS
CHRONIC DISEASE	1. Obesity
BUILT ENVIRONMENT	 2. Transportation 3. Access to healthy foods
ACCESS TO PRIMARY CARE and MENTAL/BEHAVIORAL HEALTH	4. Navigating the healthcare system
Note: Health education/literacy was selected as a key CROSS-CUTTING STRATEGY for all 3 priorities and focus areas.	













Timeline

Item / Activity	Timeline
Draft CHA Report	July – August 2012
Presentations to Public City Hall Council Chambers • 3:30 to 4:30 pm • 6:30 to 7:30 pm	July 26 th
 Issue Area Workgroups Learning Resource Center 2800 Spirit of Texas Drive 9 am to 12 pm 	August 17 th August 31 st September 14 th September 28 th October 12 th
Draft CHIP	November – December 2012
CHIP Presentations	Beginning January 2013













Questions



You may also send questions to <u>CHACHIP@austintexas.gov</u> or call (512) 972-5888.













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