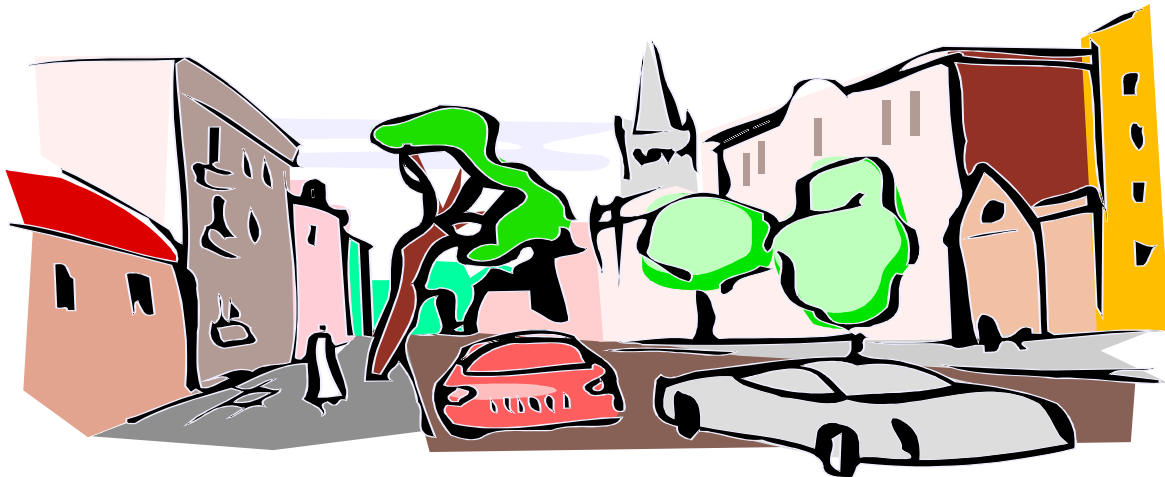


Community Health Assessment of Springdale, Ohio

March 2005



Prepared by
The Center for Healthy Communities
Dayton, Ohio

SPRINGDALE COMMUNITY HEALTH ASSESSMENT MARCH 31, 2005

Prepared by Kay Parent, MPH, RN, CHES & Carla Clasen, MPH, RN
Center for Healthy Communities, Wright State University
Dayton, OH

Executive Summary

As part of a community health assessment process, the Springdale Health Department conducted a community-wide survey and involved Springdale residents in two focus groups to identify the public health issues most important to the community. The following issues were identified by Springdale's citizens as the health issues of most concern to the community:

- **obesity (related to lack of physical activity and poor nutritional practices),**
- **cardiovascular diseases**
- **diabetes**
- **substance abuse.**

Focus group participants were also asked to discuss how the Health Department can work with the community to address these health priorities. Participants agreed on the following strategies:

- **The Community Center is a great asset – use it more.**
- **Partner with the Community Center and provide more outreach.**
- **Provide health education in community centers, senior center and schools.**
- **Motivate behavior change through competitions, walking groups, community awareness campaigns**
- **Keep the Health Department in the public eye**
- **Encourage personal responsibility**

Background

The Springdale Community

Springdale is a city of approximately 10,000 people located in the northern part of Hamilton County, Ohio. The population consists of White Non-Hispanics (66.3%), African Americans (25.6%), Hispanics (3.6%), with the remaining 4.5% of the population

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consisting of persons of two or more races, American Indian, Asian Indian, Vietnamese, or other race. The median household income in Springdale is \$44,732 (Census data, 2002). Manufacturing provides 20.5% of the jobs in Springdale, while education, health, and social services provide 17.4% and retail trades provide 11.1% of jobs (City-data.com at <http://www.city-data.com/city/Springdale-Ohio.html>). The community is bisected by major interstate highway 275 and is home to the large Tri-County Mall. Many more people visit daily to work and shop in Springdale than live there. Consequently, most EMS runs involve visitors to Springdale rather than residents.

Springdale Health Department

The Health Department staff consists of the Health Commissioner, the Nursing Director, a secretary, and two part time sanitarians. The state mandated Health Department services and programs include: license and inspect food services and vending machines, investigate food service-related complaints, , investigate public health nuisance complaints, inspect schools and cafeterias, and issue permits and inspect pools and spas. Additional local programs include: food safety training, nuisance animal control, hotel/motel inspections, and nursing services of health education, TB testing, referrals, home visits, lipid and glucose screenings, communicable disease investigations, and immunization clinics.

Springdale Community Health Assessment

In the fall of 2004, the Springdale Health Commissioner and the Board of Health contracted with the Center for Healthy Communities (Center), Wright State University in Dayton, Ohio to assist with the community health assessment. The Center reviewed health data provided by the Health Department, other city departments, Hamilton County, and the state of Ohio to identify health issues applying to Springdale. (Please see appendix A for the list of health issues and rationale for inclusion.) In consultation with the Board of Health, six concerns were selected as being the most relevant to the community of Springdale. These were:

- ◆ Obesity/fitness/nutrition
- ◆ Mental health issues, including depression
- ◆ Diabetes
- ◆ Cancer
- ◆ Cardiovascular diseases, including heart disease, stroke, high blood pressure, high cholesterol
- ◆ Environmental issues

It should be noted that many concerns raised initially by board members could be and were grouped into categories, such as heart disease, stroke, high blood pressure,

and high cholesterol, which were grouped into the one category of cardiovascular diseases. Similarly, obesity, nutrition, and fitness were at first listed as separate concerns but board members decided that as they were all so closely related, these issues could be grouped into one category.

Two focus groups were conducted with Springdale residents at which the above health concerns were discussed. Focus group participants were also given the opportunity to add other issues to the above list and discuss them prior to choosing priority concerns to focus on.

In addition to the input of the board of health and the focus groups, a survey asking individuals to indicate to what extent a number of health problems were a problem in their community was circulated in the city's monthly newsletter. (Please see appendix B for a copy of the survey.) Results of these surveys were tabulated by the Center for Healthy Communities.

Methods

Description of focus groups

Residents were recruited to take part in the community groups through flyers, notice in the newsletter, and personal contact by Board of Health members. Two focus groups were held, one in the afternoon and another in the evening. A total of 21 Springdale residents took part in the groups. There were 16 women and 5 men participating. All but two of the participants were Caucasian. Participants were primarily older adults and well educated; ages ranged from 22 to 88, with an average age of 61 years, all were high school graduates, and most had at least some college experience (table 1).

Two Center staff members conducted the groups, one facilitating and recording participants' responses on a flip chart and the other one taking notes. Each focus group lasted approximately ninety minutes. The purpose of the group was explained, and participants were asked to read and sign a consent form. The groups were recorded to enable the facilitators to check the accuracy of their notes, but not transcribed. The groups were shown the list of health concerns identified in the process outlined above, and were given the opportunity to discuss them. They were asked to eliminate any of the concerns if they felt the concern didn't really apply to their community, and to suggest other concerns that didn't appear on the list. After further discussion, participants were given three colored dots and asked to place them next to the issues which they felt were most important. They could place one, two, or three dots next to an issue. The number of dots next to each issue were counted, and the three issues receiving the highest number of dots were deemed to be priorities. Participants were then asked what they knew about programs or agencies that already existed to address

the issue, and to suggest other ways that the Health Department might work with the community to address these issues.

Description of the survey

A survey asking about residents' perceptions of 23 public health problems or issues was sent out with the city's monthly newsletter (appendix B). For each issue, individuals could respond "this is not a problem", "this is somewhat of a problem", "this is a major problem", or "don't know." The newsletter and survey went to approximately 4800 households; 64 responses were received. Again, those completing and returning the survey tended to be older adults, with 88% being over 45 and 35% being over age 75. Sixty-five percent of survey responders were female, and 77% were Caucasian.

Table 1. Demographic description of focus group and survey participants

	Focus group participants	Survey respondents
<u>Gender</u>		
Female	16	43
Male	5	19
(missing)		4
<u>Age</u>		
18-24 yrs	1	1
25-34	1	0
35-44	3	3
45-64	7	20
65-74	2	15
75+	7	23
<u>Race</u>		
White	19	51
African-American	2	8
Latino	0	1
American Indian	0	1
Other	0	1
<u>Education</u>		
HS grad	3	<i>(not requested)</i>
1-3 yrs college	9	
4 yrs college	7	
post-graduate	2	

Priority Health Issues

While other health issues were not dismissed as unimportant, focus group participants and survey respondents agreed fairly well on the health issues with highest priority in Springdale. After discussion in the focus groups, when participants were asked to rank the top health issues affecting Springdale, the so-called "lifestyle" issues of obesity, lack of physical activity, and poor nutrition predominated, receiving a total

of 18 votes in both focus groups. In the survey, lack of physical activity, obesity, and poor eating habits were cited as problems by over 60% of respondents (table 2).

Table 2. Health issues identified by Springdale residents through survey and focus groups

Survey Health issue	SURVEY Somewhat a problem or major problem	FOCUS GROUPS Identified as a priority
Lack of physical activity*	73%	*
High blood pressure**	65%	**
Obesity*	62%	*
Smoking – under 18	62%	
Poor eating habits*	61%	*
Heart disease**	59%	**
Smoking-Adults	59%	
Diabetes	55%	
Alcohol abuse	53%	
Drinking & driving	53%	
High cholesterol**	50%	**
Illegal drug/substance abuse	44%	
Depression	41%	
Stroke**	41%	**
Non-use of seatbelts	38%	
Pneumonia/Flu	36%	
Dental health	33%	
Prostate cancer	30%	
Breast Cancer	27%	
Colon cancer	26%	
Inadequate child health care	26%	
Sexually transmitted diseases	20%	
HIV/AIDS	15%	

* corresponds to “obesity/fitness/nutrition” discussed in focus groups

** corresponds to “cardiovascular diseases” discussed in focus groups

Cardiovascular diseases received a total of 16 votes in the focus groups, and heart disease, high blood pressure, stroke, and high cholesterol were all ranked as problems in the survey as well. Diabetes received 8 focus group votes, and was mentioned as a problem by 55% of survey respondents. In one focus group, alcohol and substance abuse received 7 votes, and in the survey, tobacco use by adults and under 18 year olds was stated as a problem by about 60% of respondents. Tobacco use was not on the original list of health issues given to the focus groups; however, smoking did emerge as an issue during discussion, particularly in relation to second hand smoke: “smoking also contributes to air pollution. You have to walk through the smoking section of restaurants to get to non-smoking, or you're seated in nonsmoking section that is right next to smoking”. Tobacco use was not identified as a priority area by the focus groups.

Focus group participants relied heavily on their own personal experience and observations as well as on their general knowledge of the health issues. For instance, participants noted that they see large numbers of overweight people, and instances of poor nutritional habits:

“Some of our problems are our own fault. I’ve seen mothers at the mall giving their kids pop in a baby bottle. Adults model bad behavior to kids.”

“Another example—I’ve seen families at the movies and every member has a giant tub of popcorn.”

Participants were aware of how interrelated many health issues are, particularly how lack of physical activity and poor nutrition can contribute to diabetes and cardiovascular diseases. Several people noted that diabetes and vascular disease can lead to additional health problems, such as kidney disease. There was a consensus in both groups that individuals need to take more responsibility for their health habits:

“We have a really good fitness center and Community Centers. It's up to the people, they have to take advantage of them.”

“You have to get into the habit of exercising.”

Awareness of current community efforts to address priorities

Focus group participants were aware of several ongoing community efforts to address the issues of obesity and lack of physical activity. Participants were generally very well informed about the Community Center and what it offers. They stated that while a lot of people currently use the center, they believe that it could be utilized more. They wondered if seniors are aware that the use of the Community Center is free to them. They mentioned that the Community Center has a staff person that will design an activity program for you, that they have several incentive programs to increase participation, and that they provide some educational services. One participant also mentioned a program called “Hamilton County on the Move” and stated that more effort was needed to get people involved in such programs. Residents cited the presence of parks in every neighborhood and sidewalks as a strength of their community that can facilitate more physical activity. With special reference to youth, participants noted that more organized programs for young people would be beneficial, and that schools should be offering healthier menus to students.

Some residents were aware that the Health Department conducts screenings for blood pressure, cholesterol, and blood glucose. In addition, they were aware that other organizations such as the Lions Club also periodically offer free screenings for blood glucose. Participants recognized, however, that there are barriers in getting people to act on screenings: "... a lot of people have a fear of finding out something is wrong...It's still hard to get them to go to the doctor, even when they know." Participants, while appearing to be generally knowledgeable about Health Department services, were less sure that the whole community was well informed about the Health Department, although it was noted that information is regularly shared in the newsletter and the Tri-County press.

Participants were aware of some programs that address the issues of drug use, like DARE in the schools and effective television ad campaigns. One stated "the community is already doing all it can" about this issue.

Suggestions on how health priorities can continue to be addressed

◆ The Community Center is a great asset – use it more.

The consensus among focus group participants was that the Community Center is an excellent resource for physical activity, but that more people needed to be aware of it and to take advantage of it. It was felt that more outreach by the Health Department and Parks and Recreation is needed to attract both more seniors and adults in the 20-30 year age range who are non-traditional exercisers, like beginners who don't feel comfortable working out. Additionally, Parks and Recreation could let people know what's available to them in the parks: "For instance, they have a PAR course but you don't hear much about it. People don't know what they can do in the park once they get there." One person suggested that health messages could be put up at the Community Center, maybe along the walking track. Another suggested putting distance measures along the outdoor walking path.

◆ Education, education, education.

There was general agreement that more public education would be beneficial. Several participants mentioned that while the internet is a good resource for information about health, some residents might not have access to it, especially seniors. The Community Center was suggested as a good place to have health education classes, although other community centers and schools were also suggested. Participants suggested a variety of topics for education, including what foods are high in cholesterol and sodium, how to cook on a budget and how to read labels, what diet is best (versus diet fads that come and go), and education about diabetes in general. One person suggested that once someone is diagnosed with a medical condition, his or her doctor

provides information about the condition; therefore, the Health Department should focus on general prevention through addressing prevention and control of obesity.

◆ **Motivate.**

Focus group participants recognized that often, lack of information is not what keeps people from changing unhealthy behaviors. As noted above, sometimes “people have a fear of finding out something is wrong.” Another participant noted that “people know [about the link between obesity, heart disease, and diabetes], but it’s so hard to lose weight.” Some suggestions motivating increased involvement in physical activity and healthy behaviors were:

- Sponsor a health/exercise competition, maybe asking businesses to sponsor by offering giveaways or prizes (example – shoe or sports stores that sell athletic shoes and gear).
- Encourage a “buddy system” of exercising with a friend to get people to exercise regularly.
- Partner with a mall and/or Mercy Healthplex to create a walking club.
- Organize walking groups in neighborhoods/subdivisions.
- Get schools involved in a health campaign: “kids are very creative.” Some participants remarked that some high schools require students to do a community service project – this might be a resource.

◆ **Keep the Health Department in the public eye.**

While many of the focus group participants knew a lot about the Health Department and its activities, some did not. For instance, one participant said she never knew they had an immunization clinic while another didn’t know they did cholesterol screening. Few seemed to know that the Health Department has a web site on the City of Springdale page. Some suggested that, in addition to the newsletter, announcements through the public access channel might reach additional residents, since people take in information in different ways. However, people recognized that it is difficult to gain peoples’ attention.

Another suggestion was to have an open house and a “Health Day” for residents. Participants stated that the police and the fire departments had each done something similar with great success. It was pointed out, however, that it would be crucial to have attractive incentives to motivate people to come.

◆ **Encourage personal responsibility.**

While the Health Department can play a large role in improving the health of the community, an underlying theme of the focus groups seemed to be that the ultimate responsibility for healthy behaviors rests with the individual. Many participants noted that people have to be willing to take advantages of the opportunities they have to

improve their health, like using fitness and recreation centers and getting regular check ups. They noted that it takes effort to get into the habit of exercising, and that whatever your fitness or mobility level, it's important to stay active. They pointed out the responsibility that parents and adults in general have to set a good example for young people in healthy behaviors and in encouragement to stay away from drugs.

Conclusion

Survey respondents and focus group participants agree substantially on the health concerns facing their community. Each method of data collection revealed that lifestyle factors such as poor nutrition and lack of physical activity are contributing to high rates of cardiovascular disease and diabetes. Focus group participants provided a number of suggestions that would use assets already present in their community to increase Springdale citizens' levels of physical activity and improve the health status of the community.

Most focus group participants were aware of at least some of the activities of the Health Department and were very appreciative of what the Health Department does. A major focus of the suggestions they had was that the Health Department should continue to publicize its efforts so that the community as a whole will be more aware of the Health Department as an asset.

APPENDIX A. HEALTH CONCERNS RELEVANT TO SPRINGDALE

Health Concern or Indicator	Rationale
Reproductive health and birth outcomes	Late Prenatal Care Hamilton County's late prenatal care is significantly higher at 5.6% than either Ohio (2.9%) or the U.S. (3.6%). In the north central quadrant of Hamilton county, late prenatal care percentages at 8.5% are significantly higher in this area than in the county, state, or nation. However, in Springdale only 1.8% of prenatal care begins in the 3 rd trimester of pregnancy, while 87.1% begins within the 1 st trimester.
	Infant Mortality Rate Hamilton county's infant mortality rate is persistently higher than comparable urban counties and national figures, and at 10.5/1000 live births, much higher than U.S. rate of 6.8. African-American rate and infant mortality rate are double those of non-Appalachian whites. No specific data is available for Springdale.
	Premature Births In the north central quadrant of Hamilton county, 33% of the communities in this district area reported that more than 10% of all births were premature. In Springdale in 2001, 9% of babies were born at or before 36 weeks gestation (13 out of 38 births); in 2002, 13% of babies were born before 36 weeks (18 out of 136). The two year average was 11.3% premature births
	Teen Births In the north central quadrant of Hamilton county, the teen birth rate mirrors the state and national rate, however, it is significantly higher at 10.4% than the county's percentage as a whole at 6.7%. The 3 year average county rate of 30.5 is higher than the state rate of 23.6
	Sexually Transmitted Diseases Chlamydia is the most frequently reported STD in Ohio and Hamilton County. Approximately half of the reported cases are African American and about 80% are women. Chlamydia accounted for 47.4% of cases of Class A Reportable Diseases in 2001-2002. Gonorrhea is the 2 nd most common STD in Hamilton County, accounting for 34.2% of cases of Class A reportable diseases in 2001-2002. Ninety percent of gonorrhea cases occur the 15-44 year age range; with 60% of all cases occurring in the 15-24 year age group.
	Chronic Diseases
Stroke Hamilton county 3 year average death rate of 68.6 is higher than the state rate of 61.9	
Cancer Hamilton county cancer deaths 3 year average rate of 222 is slightly higher than state average of 211. In Springdale, all malignant neoplasms accounted for an average of 22% of all deaths in 2001-2002. Three year average death rates for lung, breast, and cervical cancer are all higher than the state average rates.	
Diabetes Over 43,000 residents of Hamilton county have diabetes. Risk factors include obesity, smoking, lack of physical activity. Diabetes leads to many complications.	
Injuries	Homicide 3 yr average rate for Hamilton county is 6.1, higher than the state's 3 year average of 4.3.
	Injuries – Falls In Springdale, falls accounted for more than half (53%) of all deaths and hospitalizations caused by injuries in 1998-2002; and nearly a third (31%) of ER visits for injuries during the same time period. The elderly are especially vulnerable to falls.

Mental health issues, depression	Mental disorders are as disabling as cancer or heart disease in terms of premature death and lost productivity. 80-90% of mental disorders are treatable using medication and other therapies, yet fewer than half of adults and 1/3 of children receive help. Effects include increased stress and cognitive impairment, which in turn can have physical health implications.
Obesity/Fitness/Nutrition	Related to all other personal health problems listed. Life style changes can prevent risk of cardiovascular disease, cancer, diabetes, depression.
Environmental health issues	Springdale has two major highways impinging on the community, and presence of industry and manufacturing.

Springdale Community Health Opinion Survey

The Springdale Health Department is in the process of learning how healthy our community is. The following questions will help us assess **your opinion** of local health needs and concerns. Please take a few minutes to fill out this survey. Thank you.

Part I: Information about You

Please circle the number to the left of your answer.

1) What is your age?

1. Under 18
2. 18–24
3. 25–34
4. 35–44
5. 45–64
6. 65–74
7. Over 74

2) Are you? 1. Male

2. Female

3) What is your race?

- | | |
|---------------------------|---------------------------|
| 1. White/Caucasian | 4. Native American |
| 2. Black/African American | 5. Asian/Pacific Islander |
| 3. Hispanic/Latino/Latina | 6. Other Race |

Part II: Health Services Opinion Survey

For each issue, select one response:

No Problem: This is **not a problem** and requires no additional attention by my community.

A Problem: This issue is a **problem**. My community needs to address this problem.

Don't Know: I do not have enough information to determine if this issue is a problem.

Diseases and Disabilities In **your opinion**, does your community have a problem with any of these diseases or disabilities? (Circle your answer)

	No Problem	Somewhat of a Problem	Major Problem	I Don't Know
Breast cancer	0	1	2	n/a
Lung cancer	0	1	2	n/a
Other cancers	0	1	2	n/a
Diabetes	0	1	2	n/a
Heart disease	0	1	2	n/a
High blood pressure	0	1	2	n/a
HIV/AIDS	0	1	2	n/a
Pneumonia/Flu	0	1	2	n/a
Stroke	0	1	2	n/a
Mental health problems	0	1	2	n/a
Dental health problems	0	1	2	n/a
Other _____	0	1	2	n/a

Unhealthy Behaviors In your opinion, are these unhealthy behaviors a problem in your community? (Circle your answer)

	No Problem	Somewhat of a Problem	Major Problem	I Don't Know
Alcohol abuse	0	1	2	n/a
Illegal drug use/substance abuse	0	1	2	n/a
Cigarette smoking among adults	0	1	2	n/a
Cigarette smoking among people under 18	0	1	2	n/a
Drinking and driving	0	1	2	n/a
Driving or riding in a car without seatbelts	0	1	2	n/a
Sexually transmitted diseases	0	1	2	n/a
Lack of physical activity or exercise	0	1	2	n/a
Poor eating habits/lack of good nutrition	0	1	2	n/a

What other problems do **you** think affect your community that we didn't ask about?

Thank you very much for your response!

Mail completed survey to: Springdale Health Department, 11700 Springfield Pike, Springdale, Ohio 24246