

Community Health: Barton County's Journey to Understand and Meet Perceived Needs

2016

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I. EXECUTIVE SUMMARY

The healthcare landscape in the United States and in the state of Missouri is changing on a daily basis. With the passage and enactment of the Affordable Care Act (ACA), changes in major entitlement programs such as Medicare, and a challenging economy, it is important to utilize existing resources while minimizing costs associated with creating and maintaining new programs. Poverty and unemployment are socioeconomic characteristics that have a direct influence on community health status. People living in poverty experience limited ability to pay for health related services, such as medications, doctor visits, and healthy food (DYNE et al). The purpose of this survey is to identify gaps in healthcare, establish and prioritize needs, and ground priorities in the necessary and appropriate resources.

Creating healthy communities requires a high level of mutual understanding and collaboration with individuals and organizations in the community. The development of this assessment brought together community health leaders and providers, along with local residents, to research and prioritize community health needs and to document community health delivery successes. The 2016 Barton County Memorial Hospital (BCMh) Community Health Needs Assessment (CHNA) represents the hospital's efforts to share information that can lead to an improved health status and improved quality of care available to the community. This health assessment will serve as the foundation for the BCMh community health improvement efforts for the next three years.

The Patient Protection and Affordable Care Act (PPACA) was signed into law in March 2010 and included a section that creates additional requirements for 501(c)(3) hospitals that will be enforced by the Treasury Department and the Internal Revenue Service (IRS)(Wells & McFadden, 2011). Section 9007 of PPACA states that each tax-exempt hospital must conduct a CHNA at least once every three years and adopt a strategy to meet community health needs in

order to retain its tax-exempt status and avoid penalties (Rosenbaum & Margulies, 2011).

BCMh conducted the required assessment as indicated in this report.

Further, Section 501(r)(3)(A)(i); Part III, Section 2.03 of the Internal Revenue Code states that the CHNA must define the community served, take into account input from persons who represent the broad interests of the community served by the hospital, including those with public health knowledge or expertise, and the results must be made widely available to the public. Individuals participated in the survey from a broad spectrum of the Barton County community.

The tax-exemption provisions of the Internal Revenue Code were amended as part of the PPACA, the Treasury Department and Internal Revenue Service are required to enforce the regulations. In July 2011, the Treasury Department and the IRS published Notice 2011-52 to provide regulatory guidance related to CHNAs. Proposed regulations were published by the IRS on April 5, 2013. The IRS regulations were finalized on December 29, 2014. Barton County Memorial Hospital is conducting the CHNA to meet the requirements specified in the Patient Protections and Affordable Care Act and in the IRS regulations (“New ACA Requirements”, 2014).

In preparing for this needs assessment, BCMh sought input from a multi-sector, multidisciplinary, external advisory team from the community. Team members include personnel from BCMh, the Barton County Health Department (BCHD), the University of Missouri Extension (MU EXT), Lamar City Government, County Commission, private industry, area schools, a dental specialist, mental health specialists, Chamber of Commerce, Community Development Corporation, Good Samaritan, Hospice, and insurance agency owners. Local healthcare providers, law enforcement, the ambulance district, and nursing home personnel were invited, but they were unable to attend planning meetings.

Purpose Statement

The purpose of the survey was to identify gaps in healthcare, establish and prioritize identified needs, and ground priorities in the necessary and appropriate resources. The primary goal was to identify perceived needs of the community and refine community leaders understanding of barriers to accessing healthcare in an effort to improve health outcomes of the population served.

II. COMMUNITY HEALTH NEEDS ASSESSMENT

Community Defined: Significance of Problem

Barton County Memorial Hospital (BCMh) is located in Lamar, MO which hosts a population of approximately 4,508 residents. The County of Barton has a total of 12,275 persons who live in the 591.76 square mile report area defined for this assessment according to the U.S. Census Bureau State and County Quick Facts (*CDC Quick facts*, 2014).

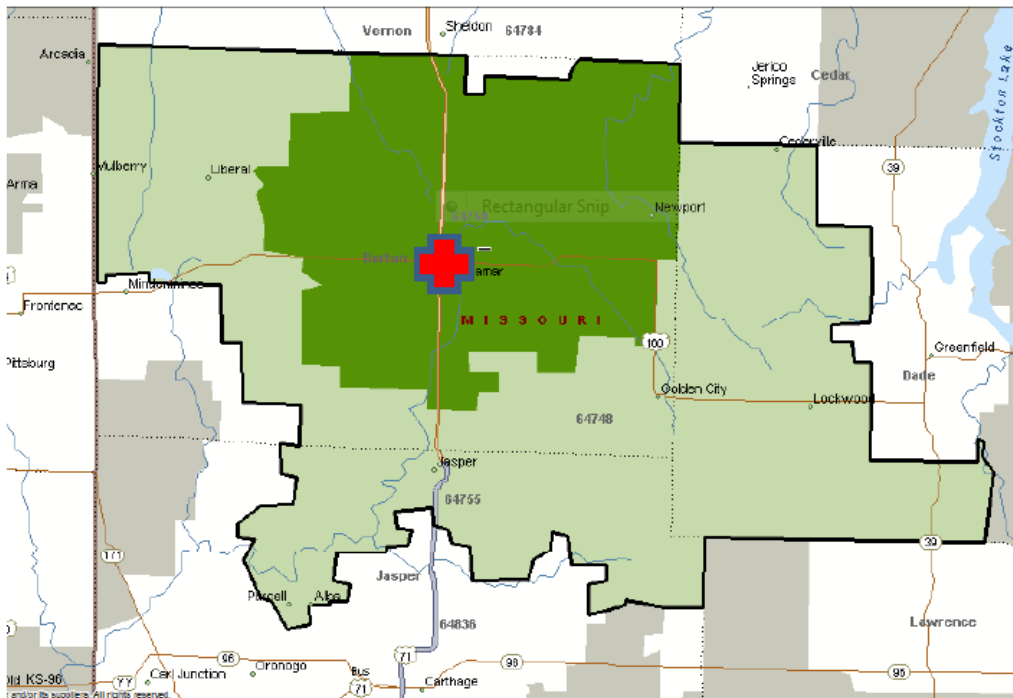


Figure 1

Investigators reviewed published quantitative community health indicators from multiple sources. The data focuses on a set of published health indicators in the results from the 2014 Robert Wood Johnson County Health Rankings. The Robert Wood Foundation collaborates with

the University of Wisconsin Population Health Institute to release annual *County Health*

Rankings. As seen in the model below, these rankings are based on a number of health factors.

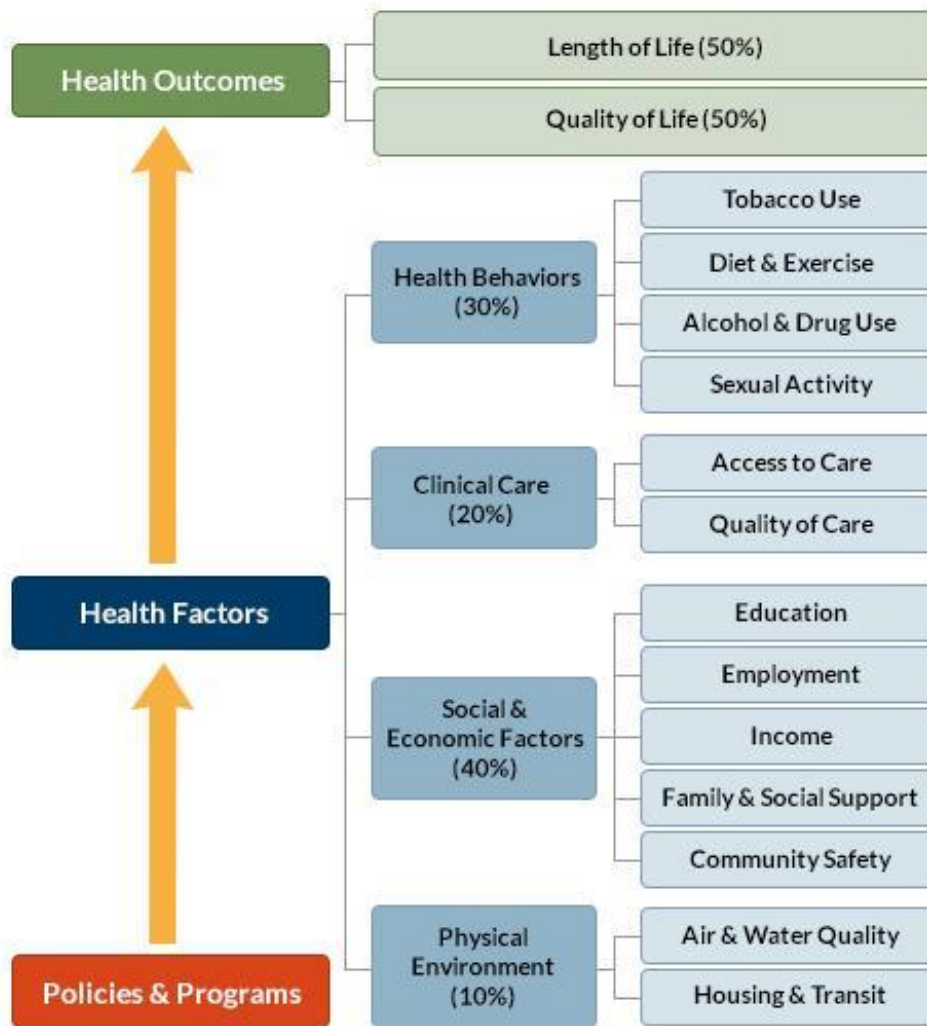


Figure 2

Each of these ranks represents a weighted summary of a number of measures. Health outcomes represent how healthy a county is; health factors represent what influences the health of the county (Missouri 2014). According to the results from the 2014 Robert Wood Johnson County Health Rankings, Barton County currently ranks 48 out of 115 Missouri counties for health outcomes and 73 out of 115 counties for health factors. Barton County is represented by a ‘BR’ on the southwest side of the state.

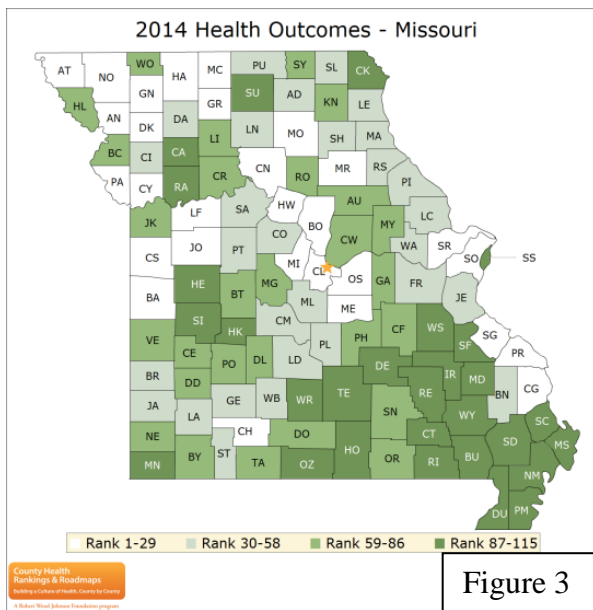


Figure 3

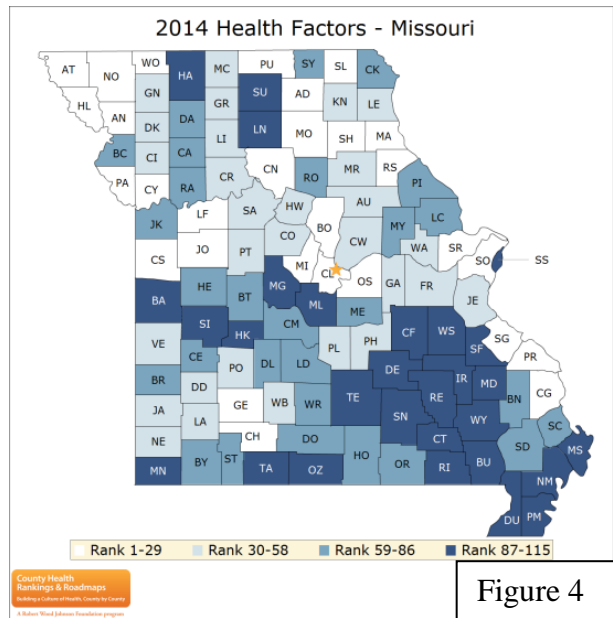


Figure 4

The maps on this page display Missouri’s counties divided into groups by health rank. Maps help locate the healthiest and least healthy counties in the state. The lighter colors indicate better performance in the respective summary rankings. The Figure 3 map shows the distribution of summary health outcomes. The Figure 4 map displays the distribution of the summary rank for health (Missouri 2014).

Counties are ranked according to summaries of a variety of health measures. Those having lower ranks are considered to be the *healthiest* [emphasis added]. For example, a ranking of one is considered one of the healthiest counties. Counties are ranked relative to the health of other counties in the same state on the following summary measures: Health outcomes and health factors. Health outcomes are rankings based on an equal weighting of one length of life (mortality) measure and four quality of life (morbidity) measures. Health factors are rankings based on weighted scores of four types of factors:

1. Health Behaviors
2. Clinical Care
3. Social and Economic
4. Physical Environment

The at-risk population is pervasive in this community; below is a list of indicators that are relevant to this assessment. Poverty creates barriers to access health services, healthy food, and other necessities that contribute to poor health status (Missouri 2014).

- 1,128 public school students or 54.23% were eligible for Free/Reduced Price lunch out of 2,080 total students enrolled (Community Commons Maps and Data).
 - In the report area, 44.95%, or 5,522 individuals, were living in households with income below 200% of the Federal Poverty Level (FPL) (Community Commons Maps and Data).
 - The per capita household income as represented by U.S. Census Bureau was \$19,036.00 (US Census Bureau, 2013).
 - Population age 65 or above is 2,186 (17.59%). By gender: 13.72% male, 19.46% female (Community Commons Maps and Data). This population will have unique health needs.
 - 30.70% of adults age 20 and older self-reported a Body Mass Index (BMI) that was above 30.0 (obese) in the report area (Community Commons Maps and Data).
- This study will provide essential data to inform planning and implementation of community benefit activities provided by BCMH and partnering healthcare entities.

Theoretical Framework

There are several models and theories used for health promotion. The Stages of Change Transtheoretical Model can be helpful in assessing community readiness to change (“Theories and Models,” n.d.) and the PRECEDE-PROCEED model has been found very useful in planning and developing health promotion programs (Li et al., 2009). The Stages of Change Model advocates adopting healthy behaviors and eliminating unhealthy activities in order to reduce risk factors and improve health outcomes. The PRECEDE-PROCEED Model engages the target population in the process of identifying their most pressing healthcare needs and leads researchers to discover causes or predisposing factors for those issues. Interventions are developed and prioritized based on this new understanding, so resources can be targeted to the

populations expressed needs. The framework of this study will use fundamental elements from both of these models.

An essential question to health promotion is to understand what the population wants, what is actually needed, and what can be accomplished (Li et al., 2009). This study will seek to answer the following questions:

1. What is the perceived health profile of the residents of Barton County?
2. What are the beliefs and perceived healthcare needs of citizens living in Barton County based on the assessment tool developed by a diverse, multidisciplinary, community advisory team?
3. What are the challenges of the Barton County healthcare system?
4. What are the demographics of respondents in terms of age, income, education level, and gender?
5. What are the leading healthcare issues reported by respondents?

Summary

The undertaking of this study is a collaborative effort of strong and diverse community partners with the unified goal of increasing understanding of perceived and actual healthcare needs of Barton County residents, especially, the vulnerable. Barton County currently ranks 48 out of 115 Missouri counties for health outcomes and 73 out of 115 counties for health factors. In order to create a culture of health and make lasting changes, it is vital to recognize and address multiple factors that affect the health of the community. Conducting this study will also fulfill requirements of Affordable Care Act that state each tax-exempt hospital must conduct a CHNA at least once every three years and adopt a strategy to meet identified community health needs in order to retain its tax-exempt status and avoid penalties (Rosenbaum & Margulies, 2011).

Meeting community healthcare needs may seem like a daunting and overwhelming task. There are many aspects and details that need to be taken into consideration in order to successfully improve community health outcomes.

Importance of Community Needs Assessment

Assessment of community needs is no longer an optional activity for tax-exempt hospitals; it is now a US federal mandate. Section 9007 of the Patient Protection and Affordable Care Act (PPACA) commands tax-exempt hospitals to make a Health Needs Assessment of the community every three years (Rosenbaum & Margulies, 2011). The PPACA was signed into law in March 2010 and included a section that creates additional requirements for 501(c)(3) hospitals that will be enforced by the Treasury Department and the Internal Revenue Service (Wells & McFadden, 2011). Hospitals must adopt a strategy to meet community health needs in order to retain their tax-exempt status and avoid financial penalties (Rosenbaum & Margulies, 2011). Additionally, Section 501(r)(3) of the Internal Revenue Code states that the CHNA must define the community served, take into account input from persons who represent the broad interests of the community served by the hospital, including those with public health knowledge or expertise, and the results must be made widely available to the public (“New ACA requirements”, 2014).

The purpose of this assessment, according to the article “Provision of Community Benefits by Tax-Exempt Hospitals,” by Dr. Gary Young, is so that the assessment can be analyzed and utilized to implement strategies to meet those identified needs (Young, Chou, Alexander, Lee, & Raver, 2013). The needs that are identified differ from community to community, but one thing remains constant: hospitals must invest a percentage of their capital budget to address the major healthcare needs identified through the assessment. Expenses the hospitals accrue are marked as community benefit money and reported on the revised Schedule H of Form 990; this form has

been beneficial in helping to make uniform the way that hospitals track their community benefit expenditures.

The Center for Community Health and Evaluation (CCHE) recently completed a study into the evaluation of Health Impact Assessments (HIA) to answer the question: do HIA's really make a difference? The study concluded that the HIAs may be time consuming, but they really work.

HIAs "contribute directly to the decision-making process and help achieve policy outcomes that are better for health" (Center for Community Health and Evaluation [CCHE], 2014, p. 1).

Community health assessments heighten awareness of needs that may have been overlooked in the past. The CCHE study cites several instances of HIAs transforming minds and projects to take into consideration health determinants that had previously been ignored. In sixteen out of twenty-three cases, the community assessment helped leaders see the connection between health and other factors at work. One example is where county decision makers were made aware of the connection between transportation design elements and health, making it a priority to provide special consideration for families who walk and bike together along city streets (CCHE, 2013).

The community needs assessment allows stakeholders to acquire a more complete and comprehensive view of their community than previously possible

Perceptions

When trying to meet the needs and expectations of an entire community, it is important to remember that every individual comes with their own experiences and world-view. Life shapes individuals. Residents, multidisciplinary advisory team members, government officials, business owners, employed, and unemployed citizens have their own views about what is best for their environment. Humans live life based on how their perceptions have molded them.

Community members may perceive their healthcare needs to be different from their real needs, as recognized by real numbers and statistics in assessment data. How can an advisory team change the health culture of a community? An article entitled "A Framework for Developing

Evaluation Tools Used in Washington State's *Health Communities* Projects," discusses *Social Capital* [emphasis added], which includes a community's relationships, networks, norms, and values (Smith, Johnson, Lamson, & Sitaker, 2006, pg 1). With wisdom an advisory team can use their Social Capital in order to change policy, environment, attitudes, and behaviors for more positive health outcomes.

Diversity of Team

Diversity of the advisory team is crucial to the success of the whole initiative. The concept of social capital comes into play. If enough of the right people are not invested in the success of the project, it will fail. If community partnerships striving to complete the task do not form, it will fail. If a project does not entice more people to join the pursuit, it will fail.

It is extremely important that members of the advisory team have the ability to influence others and are faithfully committed to modifying their communities in a positive way. A research study called: "From Model to Action: Using a System Dynamics Model of Chronic Disease Risks to Align Community Action," headed by Dr. Heather Loyo, looked into a 2008 action lab conducted in Austin, Texas by health officials in order to align actions and promote healthier conditions (Loyo et al., 2013). There were 56 participants selected based on "their leadership in the community, participation in existing coalitions, or as representative employees from various sectors (Loyo et al, 2013, p. 55). At the end of the action lab, participants who perceived themselves to have higher levels of influence in the community were more committed to change than those who perceived they did not have as much influence (Loyo, et al, 2013, p. 58). The members that are on the advisory team need to bring determination and a persuasion to influence others around them in order to make a lasting difference.

Rural Challenges

Obesity, addiction to drugs, and lack of access to proper healthcare may be common needs in the realm of Public Health, but the way that these problems are handled is vastly different in a rural

setting versus an urban setting. Perceived barriers lead people to try coping strategies like delaying treatment and self-care, which can be harmful. Each location has its unique challenges about how to conquer the major issues plaguing the community. K Pieh-Holder's (2012) research study, entitled "Qualitative needs assessment: healthcare experiences of underserved populations in Montgomery County, Virginia, USA," focuses on a rural Medically Underserved Area (MUA). The greatest obstacle to proper healthcare treatment in Montgomery County is the perceived barriers that residents have conceived from their experiences. Whenever researchers made an inquiry into lives of community members, they found some very concrete reasons members do not utilize healthcare the way it is intended. The researchers discovered that the populace believed there was a limited availability of affordable care, facilities have inconvenient locations and hours of operation, and that the medical care system is complicated (Peih-Holder, Callahan, & Young, 2012, p. 7). When healthcare needs of a community are discovered, it allows leaders and decision makers to start the invaluable process of rectifying the situation, closing the disparity gap, and meeting the needs of an underserved population.

A Health Impact Assessment allows a rural area to visualize the projected benefits of addressing community needs by using standardized qualitative methods of study (CCHE, 2014). In a rural community, there are additional factors that policy makers need to take into consideration; among those are agricultural policy, employment, and safe modes of transportation. By allowing residents to express their feelings on controversial issues, new and enduring relationships are created, enabling the potential to improve health outcome (CCHE, 2014). Rural community leaders with constrained budgets may believe that it is too expensive to address health needs. However, with objective data which indicates long-term health benefit, that will be reaped in the future, community leaders can be assured that health benefits outweigh the upfront financial cost. If decision makers can be convinced that quality of life, health outcomes, and productivity within the community are more valuable than the costs to change a built environment, like a street, and

more valuable than the cost of offending citizens with implementing a policy change, such as smoke-free public buildings, they may opt to partner with health officials to transform their community today.

Assessment Tool

Optimally, there are two assessment tools that should be constructed and administered. The first is an assessment tool for the advisory team. The second assessment tool that needs to be synthesized is the avenue through which leaders and decision-makers will collect data from community members. The second assessment tool is the most important component of the CHNA. This is where information is gathered from community members.

If a community wants lasting change, then the community needs to take responsibility – it is the community that needs to take the initiative to address the socio-economic and environmental determinants of outcomes (Smith et al., 2006). It is important to keep survey questions focused on the views of the partnerships that have been established. If an advisory team wants to reach the target population of their community, they need to go where the residents will be. Advisory team members may attend local events and venues, such as business expositions, health fairs, places of faith, and educational institutions to pass out the assessment tool in order reach a wide demographic.

Gathering Information and Analyzing Data

Before beginning the study, as many facts and data were gathered as possible. Most of this data was secondary data – but it is important to know where to look, what is available, and how to ascertain the relevant information. The *County Health Rankings & Roadmaps* program is the result of a partnership between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The county health rankings are done annually and are viewed as a starting point for change. Counties are ranked according to summaries of a variety of health measures. Those having lower ranks are considered to be the “healthiest”. For

example, a one is considered the healthiest county. Counties are ranked relative to the health of other counties in the same state on the following summary measures: Health Outcomes – rankings are based on an equal weighting of one length of life (mortality) measure and four quality of life (morbidity) measures; Health Factors-rankings are based on weighted scores of four types of factors; and Health Behaviors - clinical care, social and economic factors, and physical environment (Missouri 2014). The Centers for Disease Control (CDC) provides invaluable demographic information as well as population, employment and housing statistics that are essential to understanding community assets and needs (*State & County QuickFacts*, 2014).

Action

Once a plan has been developed to address health needs: action is the next step! For some, realistically implementing a strategy to combat negative health factors and outcomes is the most difficult step, but it is the step with the most potential impact on a community. After a multidisciplinary advisory team looks at the raw data accrued from the community assessment, it is time to develop a plan. However, the best laid plans can turn awry if they are not implemented in a timely manner. When it is time for the advisory team to act, they need to act quickly.

Definition of Terms

- Interdisciplinary team –“A coordinated group of experts from several different fields who work together toward a common business goal. A business might use an interdisciplinary team of professionals to work on a complex project that requires multiple skills sets or areas of expertise in order to succeed” (Business Dictionary.com, 2014, screen 1), as defined by Business Diction
- Multidisciplinary team – “A team of professionals including representatives of different disciplines who coordinate the contributions of each profession, which are not considered

to overlap, in order to improve patient care” (The Free Dictionary: Medical Dictionary, 2014, team 3).

- Perceived - According to the Merriam-Webster online dictionary, perceived is “to regard as being such”. In this study, it is important to understand the perceived needs of community members in order to improve health outcomes .
- Social Capital – According to the CDC, “the fabric of a community and the community pool of human resources available to it is often called its “social capital.” This term refers to the individual and communal time and energy that is available for such things as community improvement, social networking, civic engagement, personal recreation, and other activities that create social bonds between individuals and groups”.
- Stakeholders – The CDC asserts that a stakeholder is defined as “people or organizations that are invested in the program, are interested in the results of the evaluation, and/or have a stake in what will be done with the results of the evaluation. Representing their needs and interests throughout the process is fundamental to good program evaluation” (“Engage Stakeholders” 2006, para. 1).
- Vulnerable population – The American Journal of Managed Care states that “vulnerable populations include the economically disadvantaged, racial and ethnic minorities, the uninsured, low-income children, the elderly, the homeless, those with Human Immunodeficiency Virus (HIV), and those with other chronic health conditions, including severe mental illness. It may also include rural residents, who often encounter barriers to accessing healthcare services. The vulnerability of these individuals is enhanced by race, ethnicity, age, sex, and factors such as income, insurance coverage (or lack thereof), and absence of a usual source of care. Their health and healthcare problems intersect with social factors, including housing, poverty, and inadequate education” (“Vulnerable populations,” 2006, p.1).

Conclusion

Articles in this literature review point to the same conclusion: community assessment, designed by a diverse interdisciplinary team, is essential for identifying needs, developing and implementing plans, and changing the future of community health outcomes. A diverse interdisciplinary team allows stakeholders in the community from multiple backgrounds to speak for the population they influence, ensure that no vulnerable populations are excluded, take initiative in their environments and workplaces to implement lasting change, and set an example of positive health choices. Community assessments do not have to be complicated. The main purpose of assessments is to discover how community perceived needs differ from actual needs. A person's perception of the world greatly affects behavior. The advisory team is assigned the daunting task of understanding and changing people's perceptions. There are perceived needs and there are real needs, meeting both is vital to affecting change in health outcomes of the community. It may seem overwhelming to attempt to change the health culture of an entire county; however, tax-exempt hospitals are expected to demonstrate assessing, understanding, and meeting identified healthcare needs.

III. COMMUNITY HEALTH NEEDS ASSESSMENT: Process

Barton County Memorial Hospital conducted the Community Health Needs Assessment (CHNA) to meet the requirements specified in the Accountable Care Act (ACA) and in the IRS regulations ("New ACA Requirements" 2014). The purpose of the survey was to identify gaps in healthcare, establish and prioritize identified needs, and ground priorities in the necessary and appropriate resources. The primary goal of this study was to identify perceived needs of the community and refine community leaders understanding of barriers to accessing healthcare in an effort to improve health outcomes of the population served. This study sought to discover the current health profile of residents of Barton County; this entails the beliefs and perceived healthcare needs of citizens living in Barton County based on the assessment tool developed by

the multidisciplinary, external advisory team. The study sought to understand the perceptions of key stakeholders towards the health of area citizens and the strengths and weaknesses of the Barton County healthcare system.

Design

This research study will compare Barton County to state and national rankings. Primary and secondary data are used to identify, prioritize, and meet acknowledged community healthcare needs. BCMH sought input from a multi-sector, multidisciplinary external advisory team in order to prioritize and assess community healthcare needs. An initial gathering of secondary information was conducted in spring 2014. Secondary data was shared with the multidisciplinary advisory team; this, along with data from the most recent CHNA, was used to build and prioritize the CHNA tool. The information collected provided preliminary knowledge about the community's health status, risk factors, service utilization, and community resource needs. The data was reviewed and prioritized by members of advisory team. This collaboration of key stakeholders met in a focus group setting to gain insight into the community's health needs from leaders and organizations that hold a deep understanding of the populations in greatest need.

Sample

The target population for this study is the residents of Barton County. Barton County is a rural, primarily farming community with three small towns, all of which have school systems. Lamar, a town of about 4,500, is the county seat. The nearest large health system is in Joplin, MO, approximately 45 miles south of Lamar. There are large health systems available in Springfield, MO, approximately 80-90 miles southeast of Lamar. There are also rural hospitals that are approximately 30 miles north, south, and west of Lamar that are comparable in size and services offered. Barton County qualifies as Health Professional Shortage Area (HPSA) due to the poverty level of the county. Barton County's poverty level and unemployment rates are above

state and national averages. It was determined by the multidisciplinary advisory team that residents needed to be 18 years old or older to participate in the survey. Participation in the survey will be incentive driven to maximize community involvement. Participants who complete and turn in the survey during the Lamar Free Fair were entered into a drawing for \$100.00.

Instrumentation

In order to collect primary data, a comprehensive assessment tool was rigorously developed and revised. A hardcopy of the previously used assessment tool was provided to the external advisory team members via e-mail, each member was instructed to take the survey with the target population in mind. In the focus group setting (at two separate meetings) the tool was laboriously scrutinized and revised to ensure clarity and understandability. The completed assessment tool was evaluated to ensure a fifth grade reading level via computer software. The tool was rigorously analyzed by the team with the goal of obtaining valid data from participants. The newly revised and developed CHNA tool was distributed via computer and hard copy to the target population. Primary data was collected at the Lamar Free Fair, Community Health Fair, places of faith, civic organizations, through e-mail trees, and public venues, such as all three public libraries. Once data was collected, software from the University of Missouri Extension was utilized to tabulate the data for dissemination.

Procedure

This project began in the fall of 2013 with the development of the multi-sector, multidisciplinary advisory team and preliminary data collection. Each valued team member was asked to share their unique perspective and knowledge of community needs and healthcare gaps. The team committed to attending three focus group meetings to revise and develop a comprehensive assessment tool for residents of Barton County. The newly constructed assessment tool was widely dispersed throughout the service area for primary data collection. There will be no

identifying information for residents of Barton County who participate in this survey; therefore, patient personal information is a nonissue and an Internal Review Board is not required. The last primary data was gathered in October 2014.

An important element of this procedure is primary data collection. In an effort to have access to a wide demographic audience the final draft of the assessment tool was distributed first at the Lamar Free Fair in August 2014, again in September at Wyatt Earp Days, and in October at the Community Health Fair. Members of the advisory team presented the assessment tool to civic organizations and community meetings. The assessment tool was delivered to the external multidisciplinary, external advisory team for disbursement through personal and organizational e-mail trees. The CHNA tool was made widely available; BCMH partnered with the Barton County Health Department (BCHD), the University of Missouri Extension (MU EXT), Lamar City Government, County Commission, private industry, area schools, mental health specialists, Chamber of Commerce, Community Development Corporation, Good Samaritan, Hospice, insurance agencies, the local super market, all three county libraries, the Ministerial Alliance, and the Senior Citizens Center in order to reach a broad spectrum of the population. The University of Missouri Extension agreed to put the completed assessment tool online for ease of access and tallying. Print copies were provided to the community at large, collected, and input for tabulation. Notification, with a link to access the assessment tool or how to get a print copy, was put in the local paper and in a free publication that goes to the entire BCMH service area. The survey link was also available on the BCMH, the Barton County Health Department, and the Barton County Chamber WebPages. The notice was posted on the BCMH Facebook page. The link was provided to the Ministerial Alliance to be shared in local congregations. Hard copies were made available at the hospital, at all three public libraries in the county, the Senior Citizens Center and at the Barton County Chamber office.

Analysis Plan

Primary data was collected at the Lamar Free Fair, Community Health Fair, places of faith, civic organizations, through e-mail trees, and public venues, such as all three public libraries. Once data was collected, Qualtrics software from the University of Missouri Extension was utilized to tabulate the data for dissemination.

IV. COMMUNITY HEALTH NEEDS ASSESSMENT: Input from the Community

This descriptive study was conducted to ensure Barton County Memorial Hospital (BCMh) meets the requirements specified in the Patient Protections and Affordable Care Act and in the IRS regulations. In preparing for this needs assessment, was accomplished in collaboration with a multi-sector, multidisciplinary, external advisory team from the community. The purpose of the survey is to identify gaps in healthcare, establish and prioritize identified needs, and ground priorities in the necessary and appropriate resources. The primary goal is to identify perceived needs of the community and refine community leaders understanding of barriers to accessing healthcare in an effort to improve health outcomes of the population served.

Demographic Data

Data was collected over a ten week period and came from a wide range of educational, socioeconomic, and income levels of the target population. Respondents were asked to give their zip code; to assure those living in Barton County were identified and included in responses. There were 199 respondents, 54 were male and 145 were female. 95.94% of Respondents reported being white. The ages of the group were diverse with 52% of respondents being 40-64 year old, 20 % came from the 65 and over age group, with 18% coming from the 27-39 age group and 9% were in the 18-26 age group. The majority of respondents, 65%, have lived in the area for more than twenty years, 19.44% have lived live in the area eleven to twenty years. Those living in the area six to ten years comprised 8.33 % of the respondents while those living in the area less than a year made up 1.67% of those surveyed. The majority of respondents

(75.94%) own a house or condo, 8.72% rent a house, apartment or room, 2.67% live temporarily with a friend or relative. No respondents reported living in a shelter, group home, a motel, in senior housing or assisted living.

The education level of respondents is well distributed, with 1.60% reporting “some high school”, 26.20% obtaining a high school diploma, 3.74% a GED, 21.39% are currently attending or have attended some college. 14.97% of respondents report a 2 year college degree, while 21.93% report a 4 year college degree and 10.16% have achieved a graduate level degree. The respondents were asked, how many adults, age eighteen and over in their household are employed full-time, year-round, 25% reported none, 29.79% reported one, 40.43% reported two, 3.72% reported three and 1.06% reported that four adults were employed. The reported combined household income for last year revealed a uniform distribution with the most frequently reported income level (14.92%) falling in the \$50,000-59,000 income bracket.

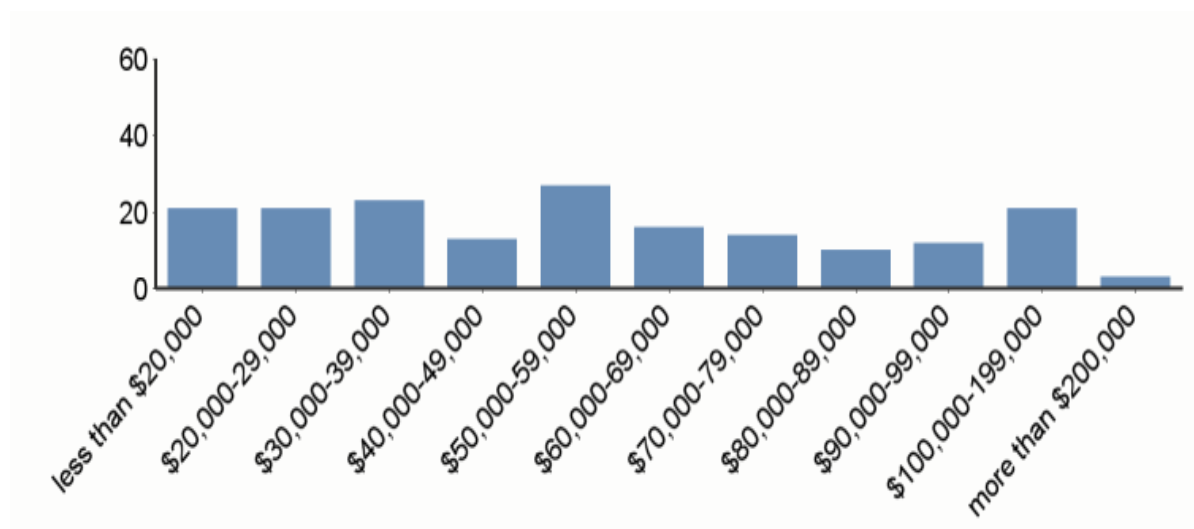


Figure 5

V. COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA): Findings

Respondents were asked to rank the top five health problems in the county from most urgent to the 5th most urgent. The responses are depicted in figure 6, the vertical bars, “total responses” indicate how many respondents picked that problem, most urgent to 5th most urgent. The horizontal line indicates the number of responses perceived as “most urgent” by respondents.

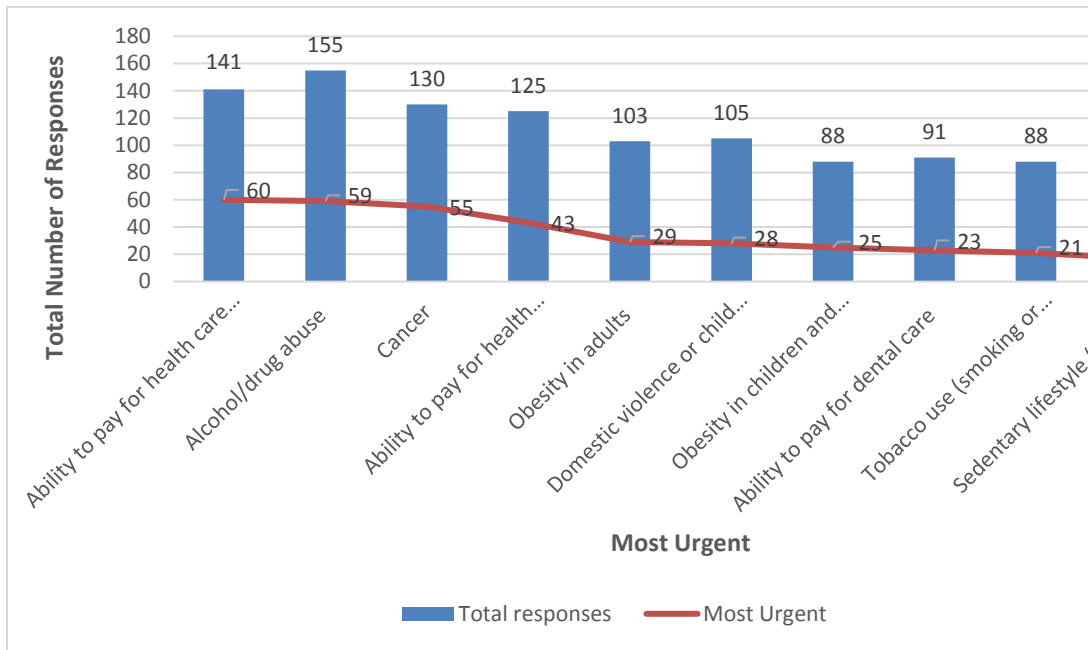


Figure 6

Respondents were given a list of medical services and asked to pick the most needed, they were to mark all that applied to them, and they could free text in the “other” category. Inpatient behavioral health services, baby delivery, urological services, dialysis, senior adult day care were among those listed as needed services.

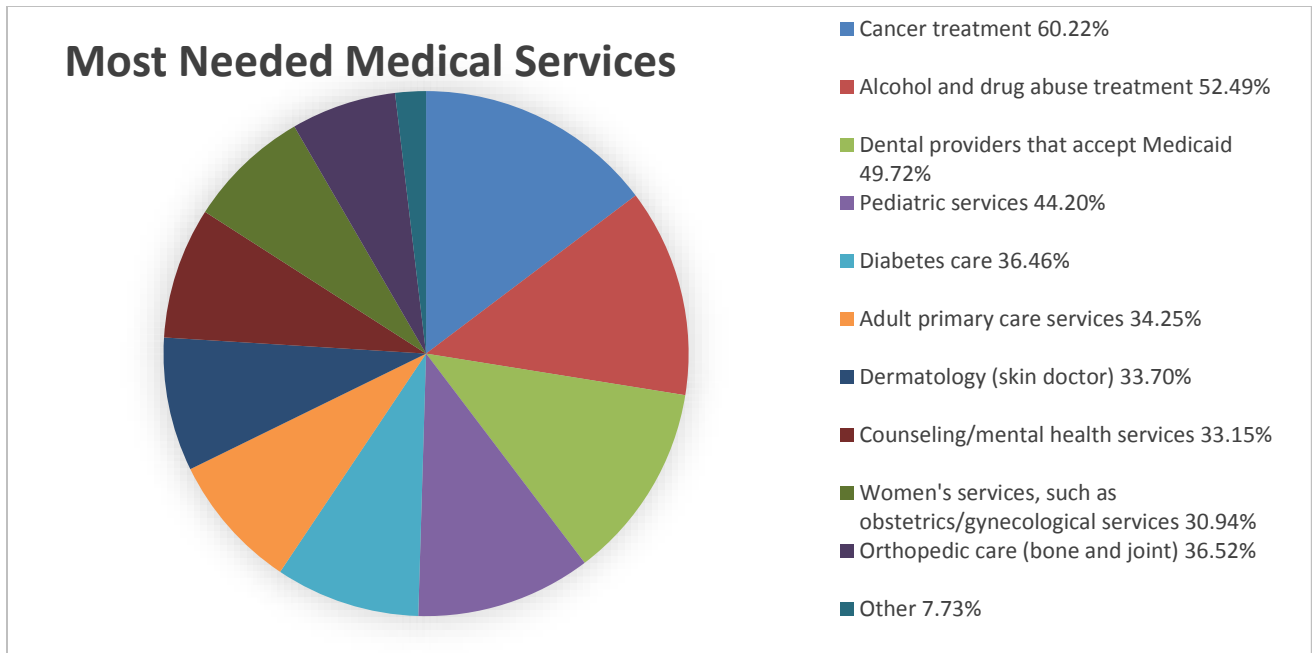


Figure 7

Respondents were asked to give suggestion for improving the overall health of Barton County, 65 responded. The suggestions were broad: Make the healthy choice the easy choice. Safe walking in town to most areas/services. Policy for improved streets with renovation or new builds. Restaurant menu prompts with calories/nutrition facts. All season recreation center. If you don't already, have patients fill out this same questionier. Need more mental health services. More free programs, this was repeated twice. Communicate with teens about drugs. Support meetings. Make healthcare more available to elderly and noninsured. Tear down the old hospital and build a psych inpatient and outpatient facility there. BCMH needs to get with the 20th century and start doing mammo's on women with augmentation. Barton County needs to be a smoke free county (restaurants, bars, etc).

Barton County Memorial Hospital currently offers health education services for: Alzheimer's disease and a memory loss support group, asthma, diabetes, diet and/or exercise, and cessation smoking programs. With this information provided respondents were asked what kind of health education is most needed in Barton County. Stress management and alcohol and drug abuse

were the top picks at 57.58% each, closely followed by drug abuse at 47.88%, child abuse/family violence at 46.67% and cancer screening at 56.97%. Respondents were asked, if health care is needed, is the appropriate health provider available; 86.71% said yes. Of the 13% that answered no, they were asked which providers were unavailable. 61.11% said doctor or nurse, 44.44% said dentist, 16/67% reported a mental health provider, and 11.11% reported that a substance abuse counselor was unavailable.

Several health behaviors were assessed, with the following results: 63.54% of respondents report receiving a flu shot in the past twelve months; 86.32 % report participating in physical activity during the past month; and 41.36% report being active 3-4 days a week. Respondents reported being active from 5 minutes to 1360 minutes per week with the most reporting 60 minutes of activity per week. 68.21% of respondents state they are currently trying to lose weight and 74.81% are using eating fewer calories and increasing physical activity to achieve their health goals. The majority of respondents, 73.47% report they do not smoke. If respondents have a prescribed medication for blood pressure, 89.47% state they take them regularly, while 10.53% do not. Almost 20% of respondents reports that one or more members of their household are disabled and 13/44% of respondents are a caregiver for a disabled or chronically ill family member.

When asked if a fitness center was available in Barton County, 70% said they would use it. If sidewalks or roads/streets were marked for walking or biking 75% said they would use them. Respondents were asked, have you ever been told by a doctor that you have one of the following conditions and to mark all that apply. Responses encompassed: adult asthma, (12.80%), angina or coronary artery disease (8.80%), bacterail pneumonia (4.00%), cancer (15.20%), congstive heart failure (2.40%), chonic obstructive disease (3.20%), diabetes or high blood sugar (30.40%), heart attack (8.00%), high cholesterol (49.60%), hypertension (46.40%), stroke (3.20%) and

overweight (62.40%). For the full results of the 2014 Barton County Community Health Needs Assessment, please see Appendix A.

This descriptive research study was conducted to meet requirements of the Affordable Care Act and to increase understanding of the perceived needs of residents of Barton County in order to meet needs and improve health outcomes. The research study sought to answer several questions:

- 1. What is the perceived health profile of residents of Barton County?**
- 2. What are the beliefs and perceived healthcare needs of citizens living in Barton County based on the assessment tool developed by a diverse multidisciplinary community advisory team?**
- 3. What are the challenges of the Barton County healthcare system?**
- 4. What are the demographics of respondents in terms of age, income, education level, and gender?**
- 5. What are the leading healthcare issues reported by respondents?**

In conducting this descriptive research study the Stages of Change, Transtheoretical Model was helpful in assessing the level of community readiness to change (Velicer, Prochaska J., Fava, Norman, & Redding, 1998). In the Transtheoretical Model there are five stages that are associated with community willingness to change; those levels are pre-contemplation, contemplation, preparation, action, and maintenance. At each stage, specific interventions propel a community forward to the next stage. The multidisciplinary advisory team was tasked with discovering at what stage of change the community is and how to thrust them forward.

Conclusions and Recommendations:

The results of the research study provide data that reflects demographic, social and economic indicators, environmental factors, clinical care information, health behavior, and health outcomes. The assessment tool was put online by the University of Missouri Extension for ease

of gathering and tabulating this data. Qualtrics software was used to provide aggregate descriptive data. The full survey tool and results obtained from the 2014 Community Healthcare Needs Assessment reflect the perceived health profile of Barton County and can be viewed in its entirety, see appendix A.

The perceived health care needs of citizens living in Barton County based on the results of the assessment tool developed by a diverse multidisciplinary community advisory team are numerous. Participants were asked to list the top 5 most urgent health problems in the county; they identified ability to pay for health care or prescriptions, alcohol/drug abuse, cancer, ability to pay for health insurance and obesity in adults as the top issues. The multidisciplinary team Per the Community Commons CHNA, Full indicator report, met in February 2015 and prioritized and set a strategic plan based on the results. Barton County’s obesity rate for adults is 32.1%, higher than state or national rates. See figure 8.

Obesity

32.1% of adults aged 20 and older self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese) in the report area. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Report Area	Total Population Age 20	Adults with BMI > 30.0 (Obese)	Percent Adults with BMI > 30.0 (Obese)
Barton County, MO	8,935	2,886	32.1%
Missouri	4,456,386	1,365,174	30.35%
United States	231,417,834	63,336,403	27.14%

*Note: This indicator is compared with the state average.
Data Source: Centers for Disease Control and Prevention, [National Center for Chronic Disease Prevention and Health Promotion](#). Source geography: County*

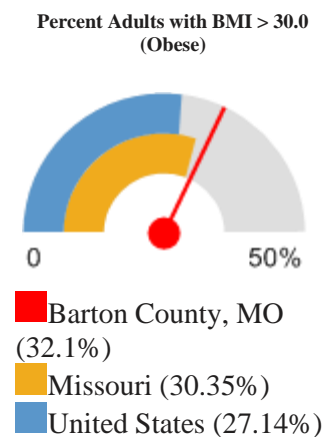


Figure 8

Uninsured Population - Total

The lack of health insurance is considered a key driver of health status. This indicator reports the percentage of the total civilian non-institutionalized population without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

Report Area	Total Population (For Whom Insurance Status is Determined)	Total Uninsured Population	Percent Uninsured Population
Barton County, MO	12,347	1,604	12.99%
Missouri	5,867,503	766,671	13.07%
United States	303,984,256	45,206,152	14.87%

Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, American Community Survey. Source geography: Tract

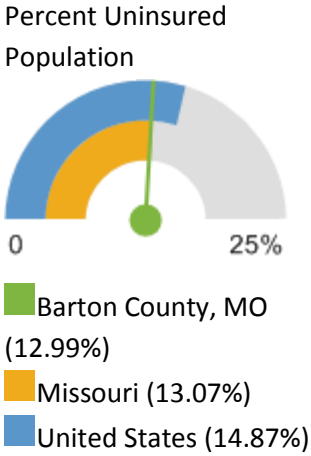


Figure 9

The challenges of the Barton County healthcare system are interlaced in the many aspects of providing care, from access to needed services, such as transportation and qualified providers to the failing economy, unemployment rates and dwindling payer sources. The hospital is facing economic short falls due to Medicare and Medicaid reimbursement cuts and an increasing number of underinsured patients see figure 9. The assessment tool provided insight to perceived needs of residents, as well as information about challenges of the current health care system.

Access to quality healthcare is paramount in effecting change of health outcomes.

Respondent’s demographics, in terms of age, income, education level, and gender are drivers. Input received came from a wide range of socioeconomic, educational and income levels in the target population. Respondent’s ages ranged from 18 to over 65 years of age, with the majority of respondents in the 40 – 64 year old age group. More than 23% of respondents reported a household income level that fell below \$29,000 while 14.92% fell in the \$50,000 - \$59,000 bracket and 1.66% was above \$200,000 annually. The education level of respondents is diverse with 26.20% reporting having a high school diploma, while 21.93% hold a four year college degree. Only 1.60% report they did not complete high school while 10.16% hold graduate level degrees. More women completed the assessment than men, 72.86% were female, while 27.14%

were male. It is interesting to note that 65% of respondents have lived in the area for more than 20 years.

The leading healthcare issues reported by respondents were alcohol and drug abuse, ability to pay for healthcare or prescription, cancer, ability to pay for health insurance and obesity in adults were identified as the most urgent health problems in Barton County. Drug and alcohol abuse and stress management were equally identified by 57.58% of respondents as the most needed health education in Barton County. Cancer screening, child abuse/family violence, and diet and exercise education were among the top educational needs identified. Cancer treatment, weekend urgent care and pediatric services were identified as the most needed medical services in the county.

VI. COMMUNITY HEALTH NEEDS ASSESSMENT: Findings and Dissemination Plan

This unique community health needs assessment speaks to health needs across Barton County. The need for strong medical facilities is supported throughout the document and speaks to the need for programs and services that will lead to better understanding of community health needs in order to improved community health outcomes. Based on the finding from the Community Health Needs Assessment the multidisciplinary team and BCMH administration through strengthened community relationships will continue implement strategic plans to direct actions of BCMH to improve the health of Barton County citizens.

Priority #1 – Ability to pay for healthcare or prescriptions: Barton County Memorial Hospital has one full time staff in the Med One Clinic that is dedicated to helping patients apply for services (Medicaid, Disability, Food Stamps, etc) including prescription assistance.

The Rural Health Clinics have guidelines to provide a Sliding Scale Program for patients who do not have insurance coverage. A Discounted/Sliding Fee Schedule is available to patients who meet specific criteria and circumstances. The discount is based on household income and size.

The availability of this funding is designated by zip code in an effort to provide these discounts for residents of Barton County and neighboring towns that do not have other healthcare possibilities. Some pharmacy and lab services are excluded.

Barton County Memorial Hospital has a “Helping Hand” program for patients who meet specific criteria and circumstances. Discounts are offered based upon household income and size. This discount is available to patients who do not have insurance coverage or any other discounted payor. The availability of this funding is provided to designated zip codes in an effort to provide these discounts to residents of Barton County and nearby towns. Some services are excluded.

Priority #2 – Ability to pay for insurance: Currently Barton County Memorial Hospital has one part-time employee dedicated to helping patients sign-up for insurance on the exchange and or for Medicaid through a grant in collaboration with Freeman Health System.

Priority #3 – Obesity in adults: Barton County Memorial Hospital will partner with the Barton County Health Department and other key community members to implement a prevention strategy.

BCMh is required to evaluate the impact of the actions taken since the most recently completed and disseminated CHNA report was published. Below are the priorities laid out in the last CHNA.

Priority #1 Access to Affordable Healthcare: Primary data indicated that the ability to pay for care was identified as the most pressing problem in Barton by 70% of respondents. Cost of health care was identified as the second most pressing problem by 64% of respondents with lack of insurance cited by 56% of respondents. Lack of dental care was an issue for 32% of respondents and prescription medicine being too expensive was reported by 39% of respondents.

Priority #2 Education on Lifestyle Choices: Per primary data obesity in adults was targeted by 57% of respondents, obesity in children by 38% of respondents as a pressing problem while 58%

of respondents identified diet and/or exercise health education services as the top educational need.

Priority #3 Physical Activity: Primary data revealed that the need for diet and/or exercise health education was given by 58% of the respondents and sedentary lifestyle was identified as a pressing problem by 44% of the respondents. If a community fitness center were available, 72% responded they would use it and 74% of respondents indicated they would use sidewalks or roads/streets that are marked for walking and biking.

Next Steps

In order to meet the community needs, comprehensive community involvement will be necessary. BCMH plans to garner support from the school districts, City Governments, County Commissioners as well as local industry. The Barton County Health Department will spearhead an initiative to work on obesity prevention.

Report release plan

The CHNA report will be released to the public in 2016. A link to access the full report, or how to get a print copy, will be put in the local paper and in a free publication that goes to the entire BCMH service area. The report link will also be put on the BCMH, the Barton County Health Department and the Barton County Chamber websites. The notice will be sent out on the BCMH Facebook page (approximately 1,400 followers) and hard copies will be available at the hospital. An employee of BCMH will make arrangements to speak at civic organizations to provide an overview of the report findings and information on how to access the full report. The next phase of the community health needs assessment may include the following steps:

1. **Internal Communication:** Widely communicate the results of the CHNA to BCMH staff, providers, leadership and Board.

2. External Communication: Widely communicate the results of the CHNA document to community resident through multiple outlets: from internet sites to hard copies upon request.
3. Community Engagement: Partner with community organizations to review existing community outreach efforts and consider the impact of CHNA data on the community benefit programs. Coordinate existing community resources across the continuum of health care.
4. Internal Strategic Planning: Identify specific implementation strategies to be undertaken based on the top needs identified in the CHNA report.

Assumption

It is assumed that the revised assessment tool was rigorously developed and reviewed, is valid, and that the information obtained will be beneficial. Further assumptions include: the vulnerable populations will be reached and assessed, the assessment tool is valid and the data obtained will accurately represent perceived needs of the community, respondents will be from Barton County, and that respondents will answer the survey honestly.

Limitation of Study

This study was strictly done on a voluntary basis. For several health indicators Barton County does not have enough reported data to be analyzed for secondary data gathering; for instance, alcohol use, tobacco use, and childhood obesity. Secondary data is often outdated. The homebound population, who frequently do not have internet access, may be underrepresented. Barton County is a rural community with many homes having limited internet access to complete the survey online and it is unrealistic to reach everyone with a paper version.

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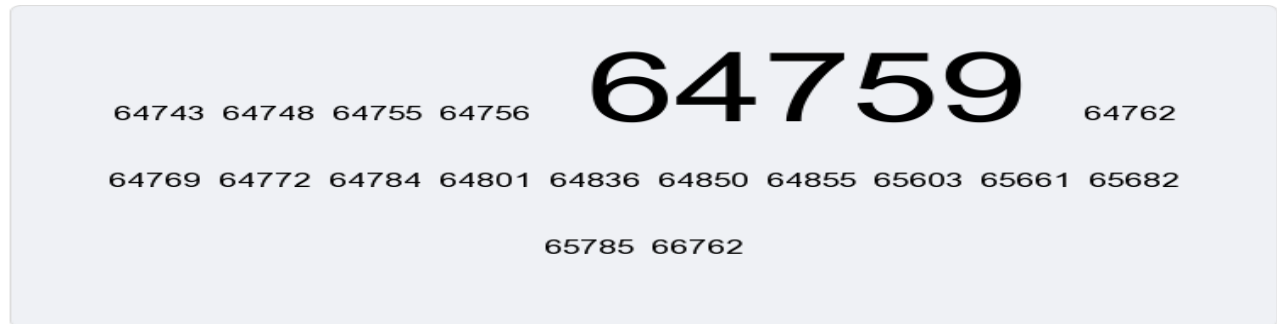
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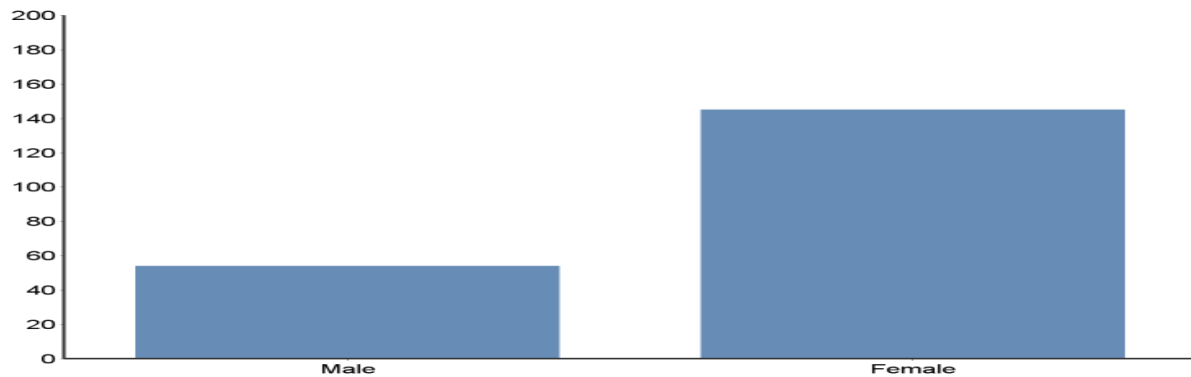
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Appendix A

What is your ZIP code?



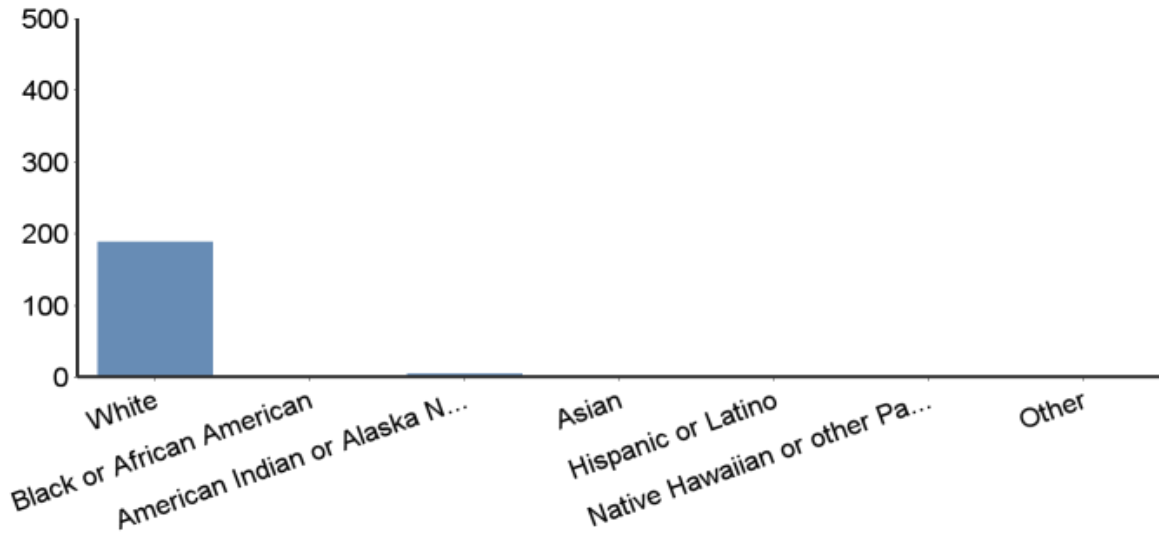
What is your gender?



#	Answer	Bar	Response	%
1	Male		54	27.14%
2	Female		145	72.86%
	Total		199	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.73	0.20	0.45	199	199

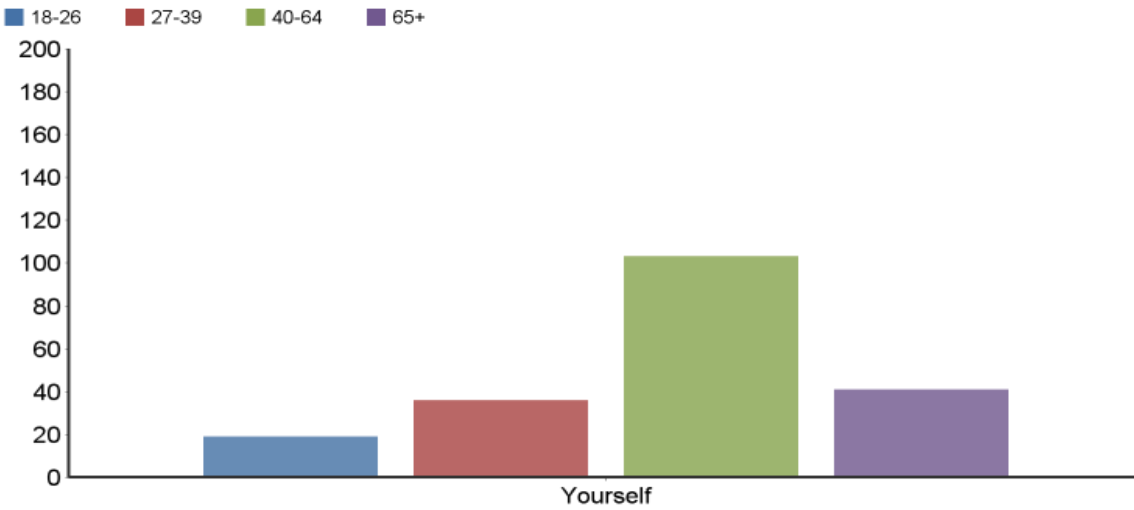
What is your race?



#	Answer	Bar	Response	%
1	White		189	95.94%
2	Black or African American		2	1.02%
3	American Indian or Alaska Native		5	2.54%
4	Asian		0	0.00%
5	Hispanic or Latino		0	0.00%
6	Native Hawaiian or other Pacific Islander		0	0.00%
7	Other		1	0.51%
	Total		197	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	7	1.09	0.29	0.54	197	197

Please indicate your age.



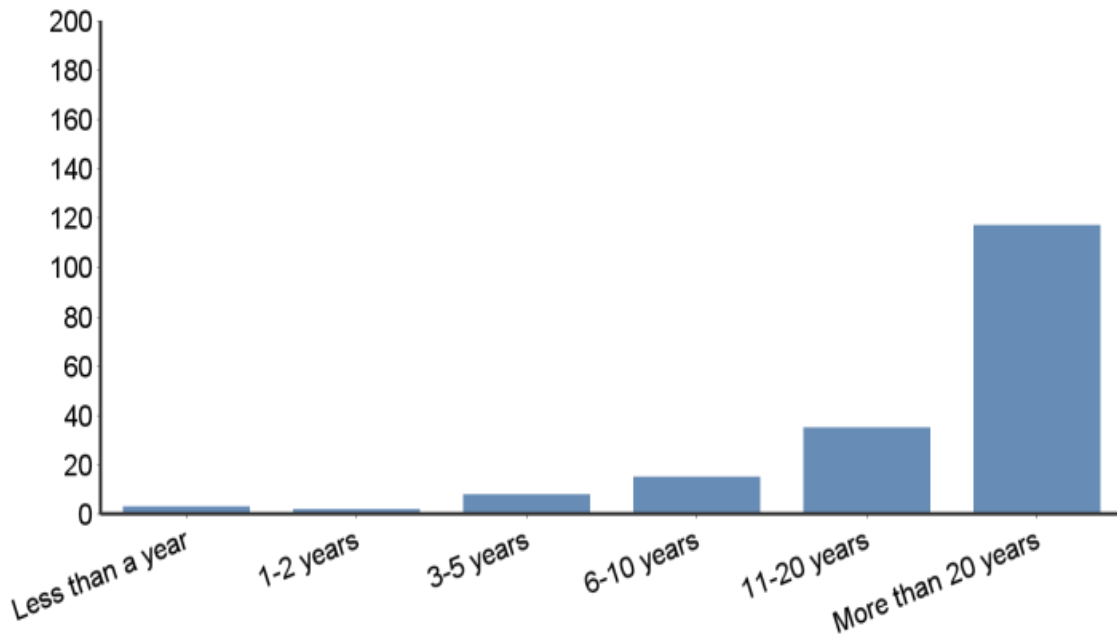
#	Question	18-26	27-39	40-64	65+	Response
1	Yourself	19	36	103	41	199

Please indicate the ages of all other the people living in your household. (For example, if there are two pre-schoolers in the household, you would enter the number "2" in the 0-5 column.)

0 **1** 2 3 4 5 60 64

#ReportTableColumnHeaders, Statistic#	0-5	6-17	18-39	40-64	65+
Min Value	0	0	0	0	0
Max Value	3	5	3	64	2
Mean	1.04	1.57	1.39	2.53	1.09
Variance	0.62	1.08	0.44	74.01	0.37
Standard Deviation	0.79	1.04	0.66	8.6	0.61
Total Responses	25	54	62	99	43
Total Respondents	25	54	62	99	43

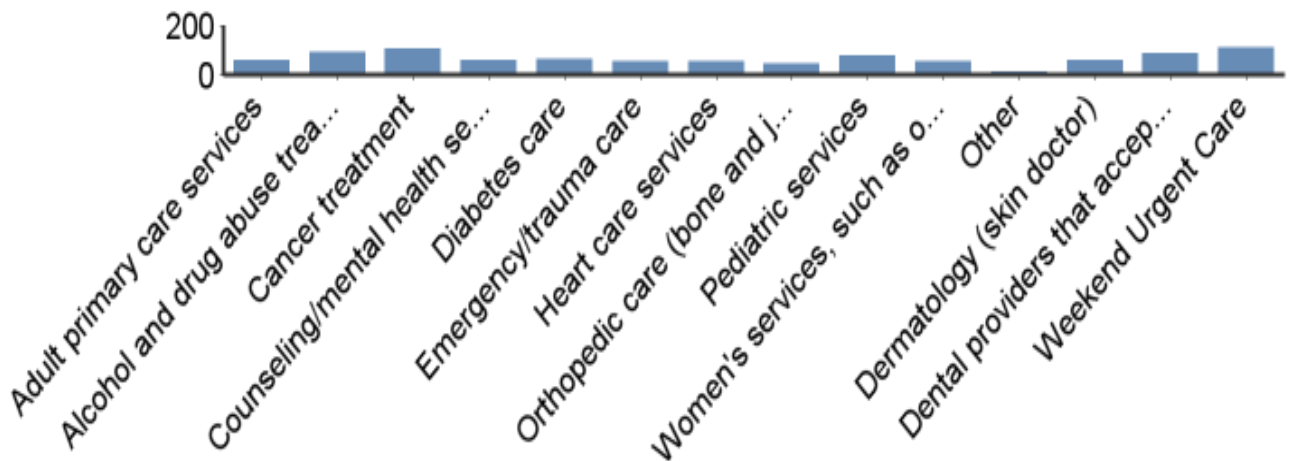
How long have you lived in the area?



#	Answer	Bar	Response	%
1	Less than a year		3	1.67%
2	1-2 years		2	1.11%
3	3-5 years		8	4.44%
4	6-10 years		15	8.33%
5	11-20 years		35	19.44%
6	More than 20 years		117	65.00%
	Total		180	100.00%

Rank the top 5 of the following as the most urgent health problems in the county

Question	Most urgent	2nd most urgent	3rd most urgent	4th most urgent	5th most urgent	# of Resp
Alcohol or drug abuse (includes dependency or abuse, and illegal, prescription or over the counter medications)	59	29	31	15	21	155
Cancer	55	35	15	11	14	130
Domestic violence or child abuse	28	26	26	9	16	105
Ability to pay for health care or prescriptions	60	26	25	17	13	141
Ability to pay for health insurance	43	25	22	21	14	125
Ability to pay for dental care	23	16	23	15	14	91
Lack of prenatal care	11	13	16	6	8	54
Mental health	16	17	23	18	13	87
Obesity in adults	29	24	20	20	10	103
Obesity in children and teenagers	25	17	15	15	16	88
Sedentary lifestyle (lack of exercise)	17	18	24	16	11	86
Teen pregnancy	21	17	13	11	22	84
Tobacco use (smoking or chewing)	21	17	16	15	19	88

















What kind of health education is most needed in Barton County? (Mark all that apply).

The hospital currently has health education services for: Alzheimer's disease and a memory loss support group, asthma, diabetes, diet and/or exercise, and stop smoking programs (smoking cessation).

Stats	Alcohol or drug abuse	Cancer	Domestic violence or child abuse	Ability to pay for health care or RX	Ability to pay for health ins.	Ability to pay for dental care	Lack of prenatal care	Mental health	Obesity in adults
Min Value	1	1	1	1	1	1	1	1	1
Max Value	5	5	5	5	5	5	5	5	5
Mean	2.42	2.18	2.61	2.27	2.5	2.79	2.76	2.94	2.59
Variance	2.02	1.83	1.87	1.86	1.96	1.94	1.73	1.75	1.79
Std Deviation	1.42	1.35	1.37	1.36	1.4	1.39	1.32	1.32	1.34
Total Responses	155	130	105	141	125	91	54	87	103
Total Responses	153	126	103	138	124	91	54	87	102

What medical services are most needed in Barton County? (Mark all that apply)

#	Answer	Bar	Response	%
1	Adult primary care services		62	34.25%
2	Alcohol and drug abuse treatment		95	52.49%
3	Cancer treatment		109	60.22%
4	Counseling/mental health services		60	33.15%
5	Diabetes care		66	36.46%
6	Emergency/trauma care		55	30.39%
7	Heart care services		54	29.83%
8	Orthopedic care (bone and joint)		48	26.52%
9	Pediatric services		80	44.20%
10	Women's services, such as obstetrics/gynecological services		56	30.94%
11	Other		14	7.73%
12	Dermatology (skin doctor)		61	33.70%
13	Dental providers that accept Medicaid		90	49.72%
14	Weekend Urgent Care		112	61.88%
	Total		962	100.00%

Other

inpatient behavioral health services
 baby delivery
 urological services
 Dialysis
 senior adult

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	14	7.43	19.13	4.37	962	181

What medical services do you go out of the county for?

& Aba Assumed Augmentation Back Barton Big Bloodwork Bone **Cancer** Cardiac **Care** Change Cheaper Columbia Control County
Covered **Dental** Dentist Dentures Dermatologist **Dermatology** Dermatology Diabetes Dialysis
Doctor Ear Emergency Endocrinology Endodontics Endrinology Endrocrine Er Established **Eye** Family Fit Foot Freeman Gastroenterology Gyn
Gynecology Health Healthcare Hearing **Heart** Hospital Husband Imaging Implant Insurance Joplin Kidney Lymphedema Mammograms Medical Memorial
Mental Mo Mobile Mri Neurological Ob Obygn Obstetrics Obtain Ophthalmologist Opthamology Orthodontics Orthopedic Pain Pediatric Pediatrician
Physician Podiatry Pretty Primary Psychiatrist Pulmonologist Routine **Services** Skin Specialists Specifically Surgical Surgery Surgical
Therapy Thyroid Time Treatment Unit Urgent Urologist Urology Vision Wear Womens Wound

Text Entry

Endocrinology services not provided at BCMH (thyroid biopsy) Chiropractic services

none at this time

All

EYE DOCTOR

Dermatology

Specialists in skin cancer, diabetes and pain control

Dermatology

CHEAPER DENTAL AND EYE CARE. DERMATOLOGY, MENTAL HEALTH

Mammograms (augmentation), dental (dental implant care)

Eye surgery

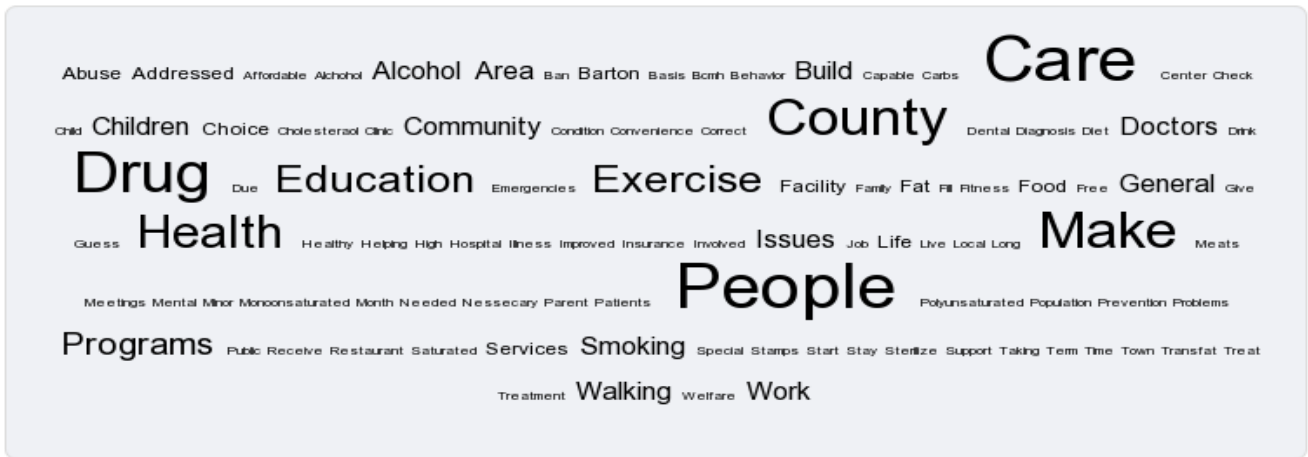
What kind of health education is most needed in Barton County? (Mark all that apply).

The hospital currently has health education services for: Alzheimer's disease and a memory loss support group, asthma, diabetes, diet and/or exercise, and stop smoking programs (smoking cessation).

#	Answer	Bar	Response	%
1	Alcohol and/or drug abuse		95	57.58%
2	Alzheimer's disease		39	23.64%
3	Asthma		37	22.42%
4	Cancer screening		94	56.97%
5	Child abuse/family violence		77	46.67%
6	Diabetes		49	29.70%
7	Diet and/or exercise		63	38.18%
8	Drug abuse		79	47.88%
9	HIV/AIDS		24	14.55%
10	Sexually transmitted diseases		35	21.21%
11	Smoking cessation and/or prevention		43	26.06%
12	Stress management		95	57.58%
13	Other		4	2.42%
	Total		734	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	13	6.33	13.03	3.61	734	165

What ideas or suggestion do you have for improving the overall health of Barton County?



Text Entry

Make the healthy choice the easy choice. Safe walking in town to most areas/services. Policy for improved streets with renovation or new builds. Restaurant menu prompts with calories/nutrition facts. All season Recreation Center -

none

If you don't already, have patients fill out this same questionier.

Need more mental health services

more free programs

communicate with teens about drugs

Support meetings

Make healthcare more available to elderly and non insured

Tear down the old hospital and build a psych inpatient and outpatient facility there. BCMH needs to get with the 20th century and start doing mammo's on women with augmentation. Barton County needs to be a smoke free county (restaurants, bars, etc)

Other

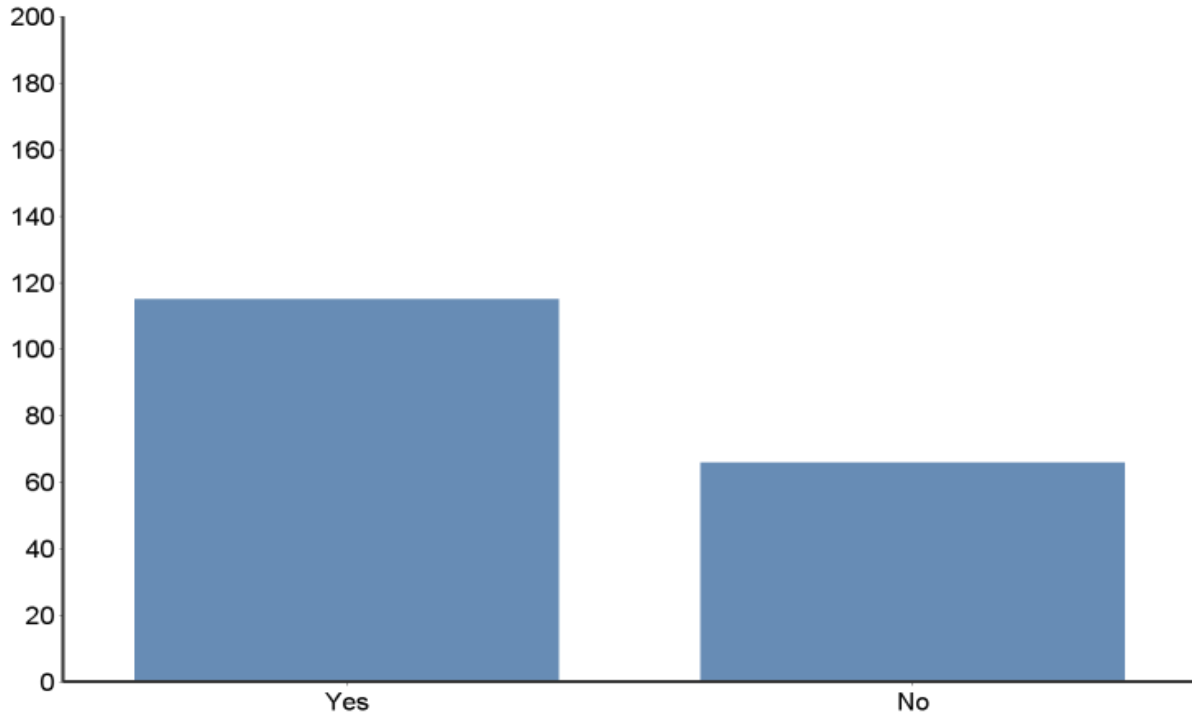
How insurance does and does not work

abstinence

Discontinue smoking on hospital grounds completely

Statistic	Value
Respondents	65

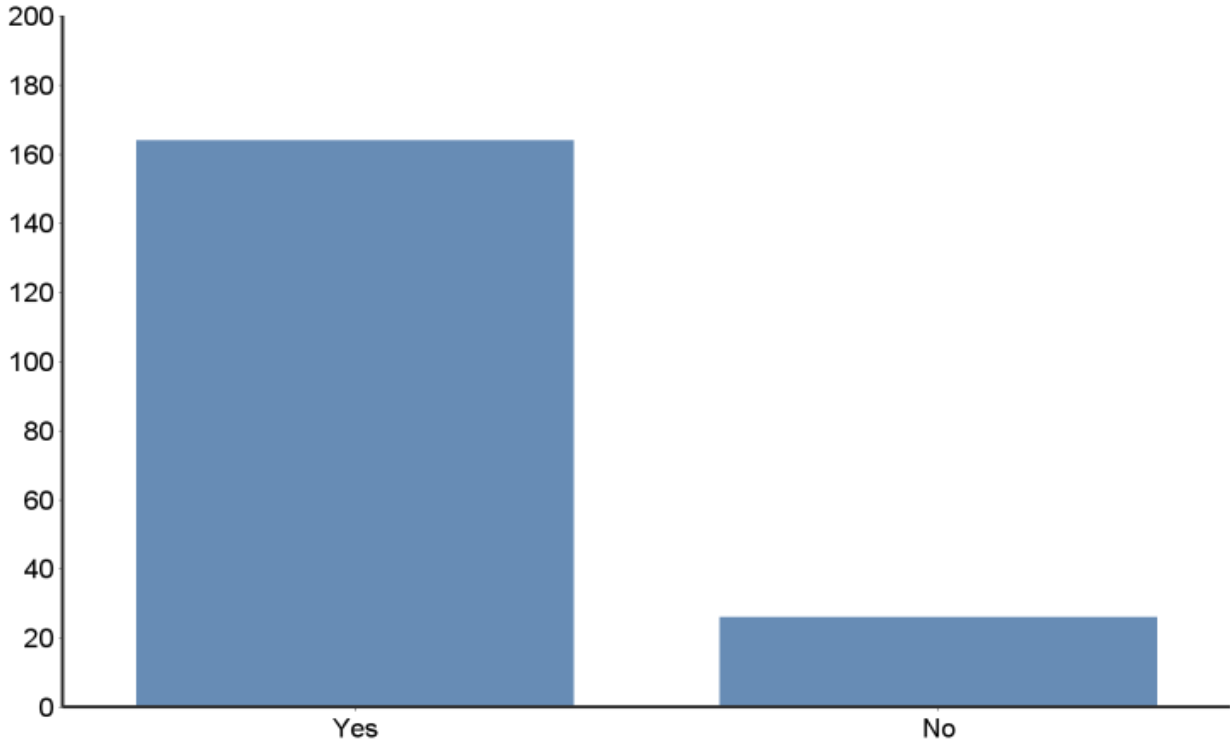
during the past 12 months, have you received a flu shot?



#	Answer	Bar	Response	%
1	Yes		115	63.54%
2	No		66	36.46%
	Total		181	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.36	0.23	0.48	181	181

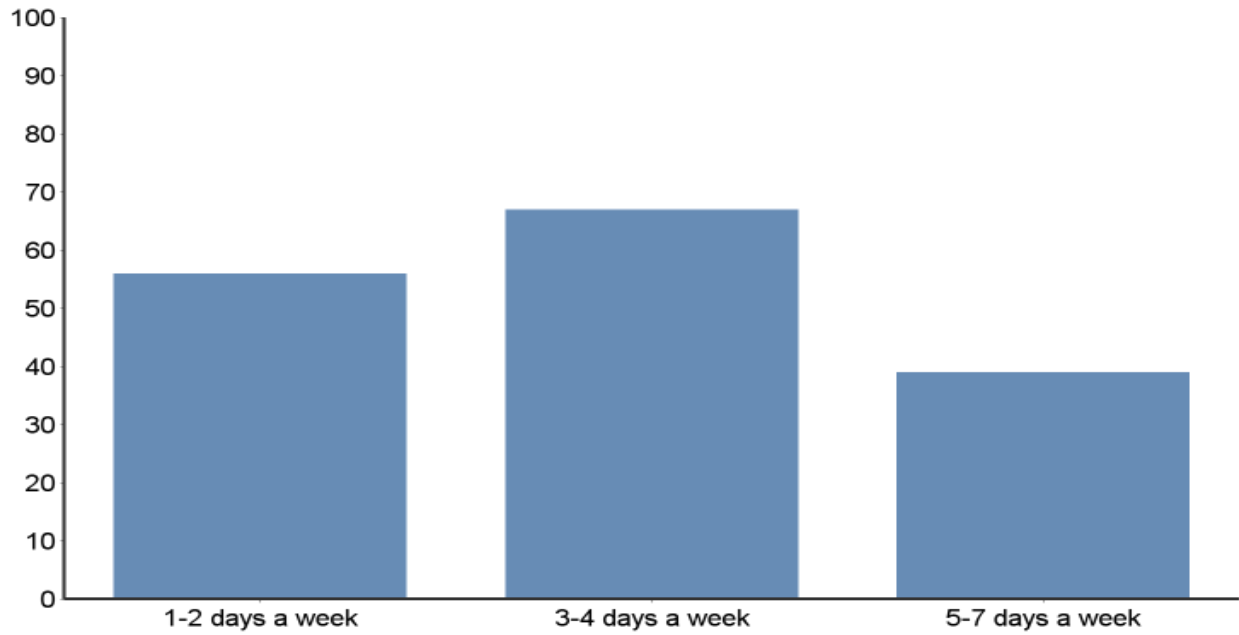
During the past month have you participated in any physical activities or exercise such as running, walking, golf, etc?



#	Answer	Bar	Response	%
1	Yes		164	86.32%
2	No		26	13.68%
	Total		190	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.14	0.12	0.34	190	190

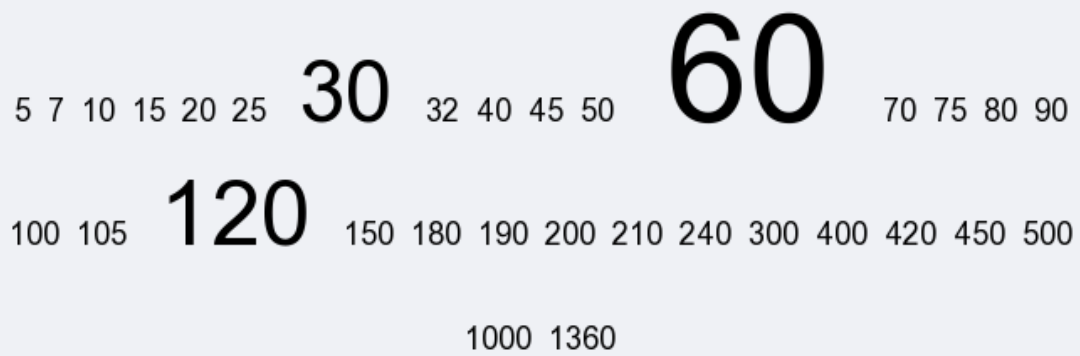
How many times a week do you take part in this activity?



#	Answer	Bar	Response	%
0	1-2 days a week		56	34.57%
1	3-4 days a week		67	41.36%
2	5-7 days a week		39	24.07%
	Total		162	100.00%

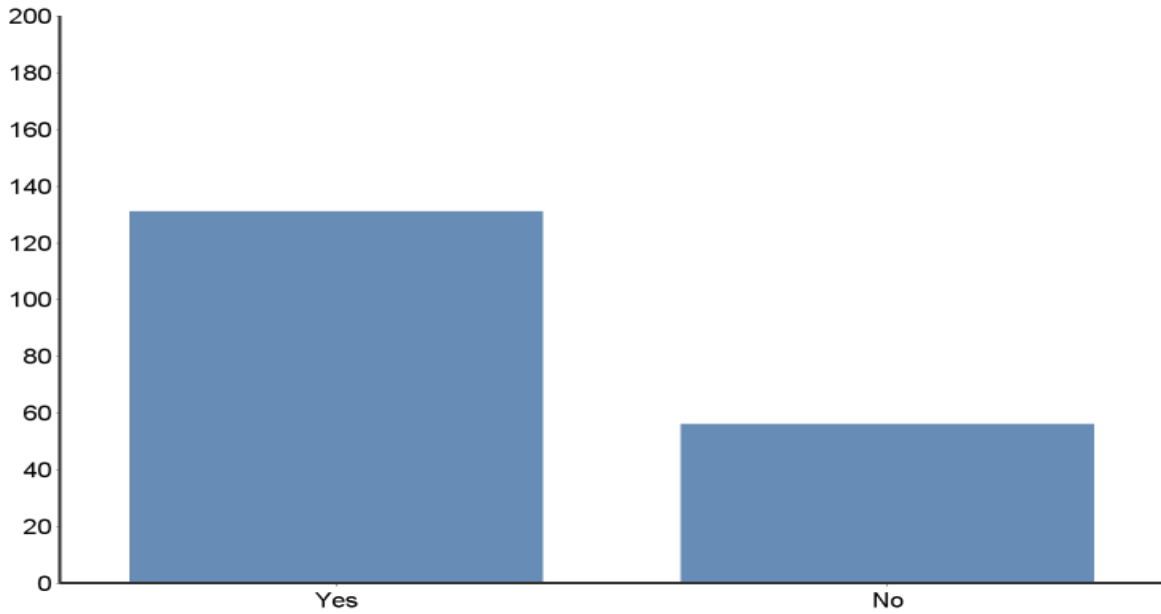
Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
0	2	0.90	0.58	0.76	162	162

How many minutes do you usually spend at this activity per week?



Min Value	Max Value	Average Value	Total Responses	Total Respondents
5	1360	113.86	155	199

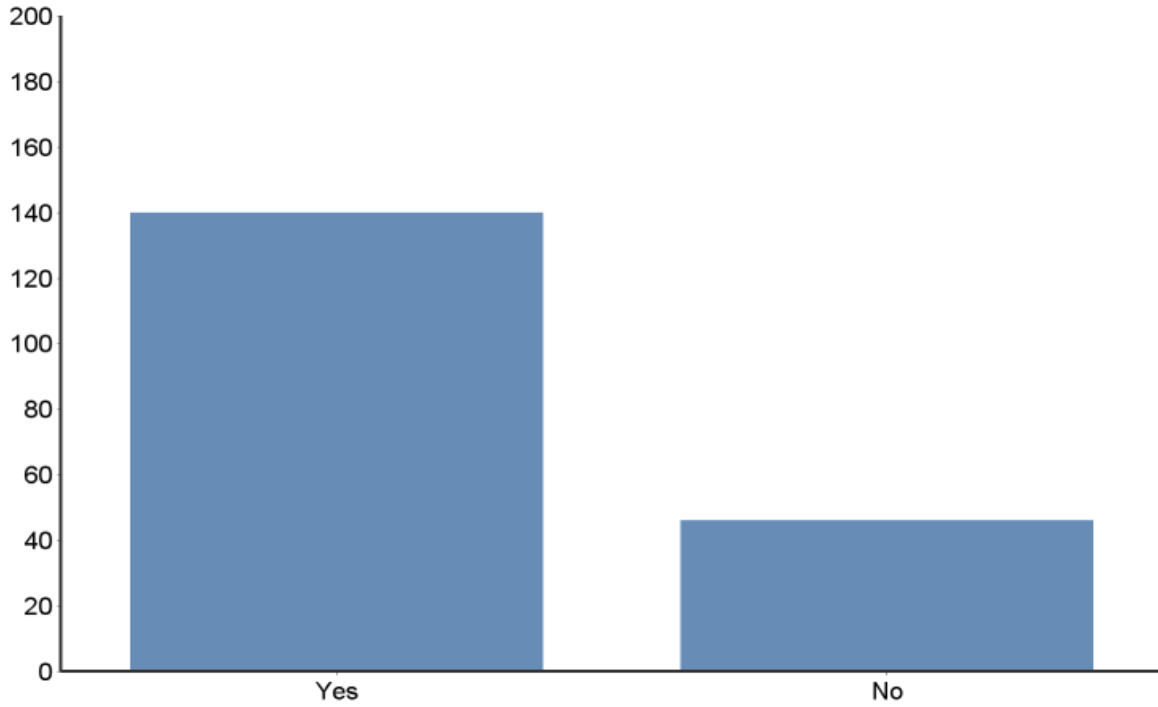
Would you use a community fitness center if one were available in Barton County?



#	Answer	Bar	Response	%
1	Yes		131	70.05%
2	No		56	29.95%
	Total		187	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.30	0.21	0.46	187	187

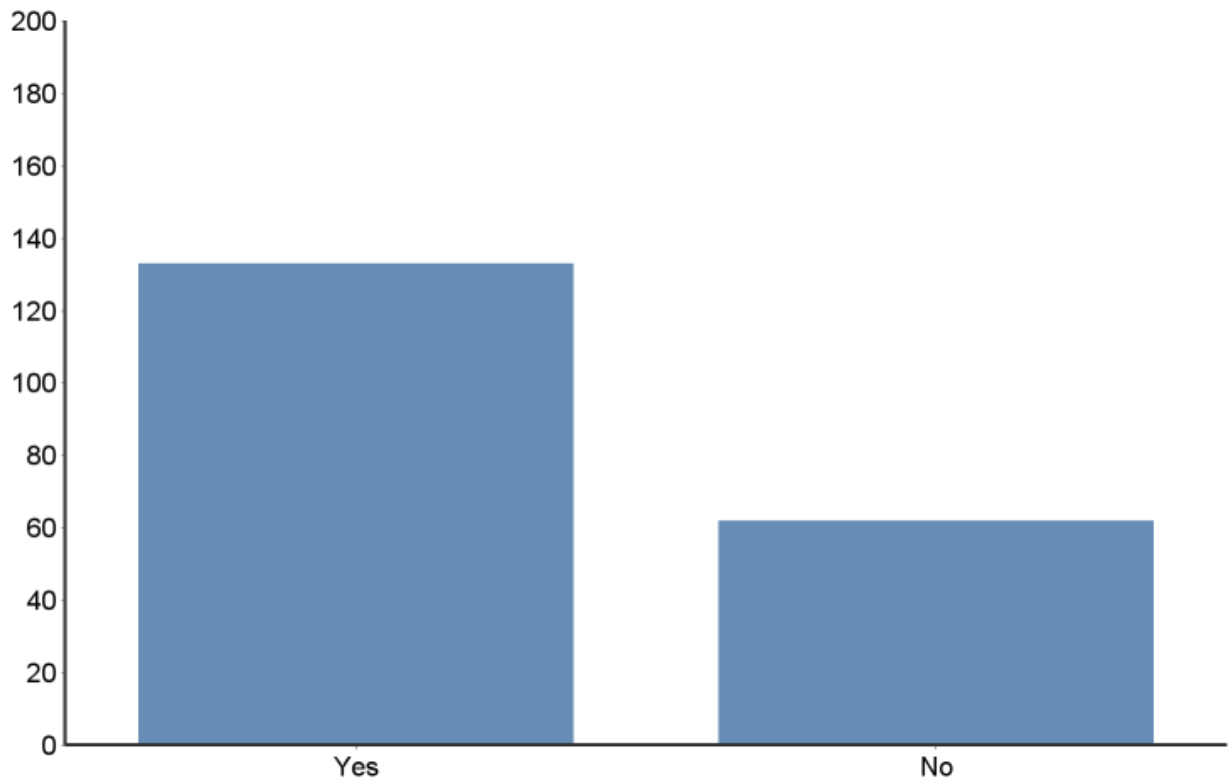
Would you use sidewalks or roads/streets that have shoulders marked for walking or biking in your county?



#	Answer	Bar	Response	%
1	Yes		140	75.27%
2	No		46	24.73%
	Total		186	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.25	0.19	0.43	186	186

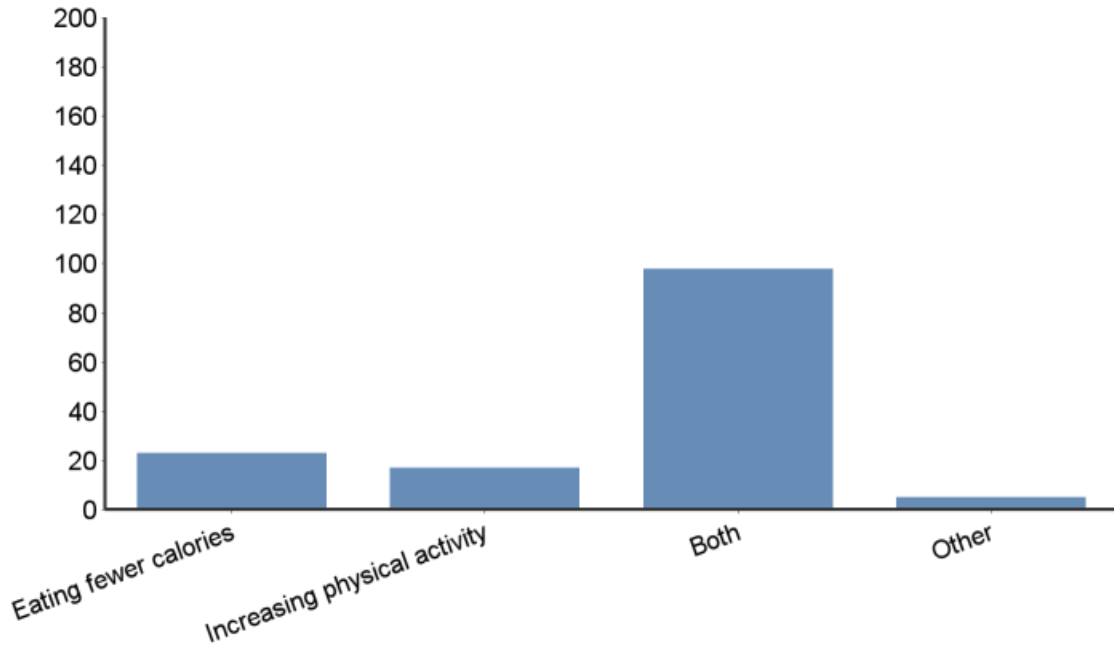
Are you currently trying to lose weight?



#	Answer	Bar	Response	%
1	Yes		133	68.21%
2	No		62	31.79%
	Total		195	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.32	0.22	0.47	195	195

How are you trying to lose weight? (mark all those that apply)



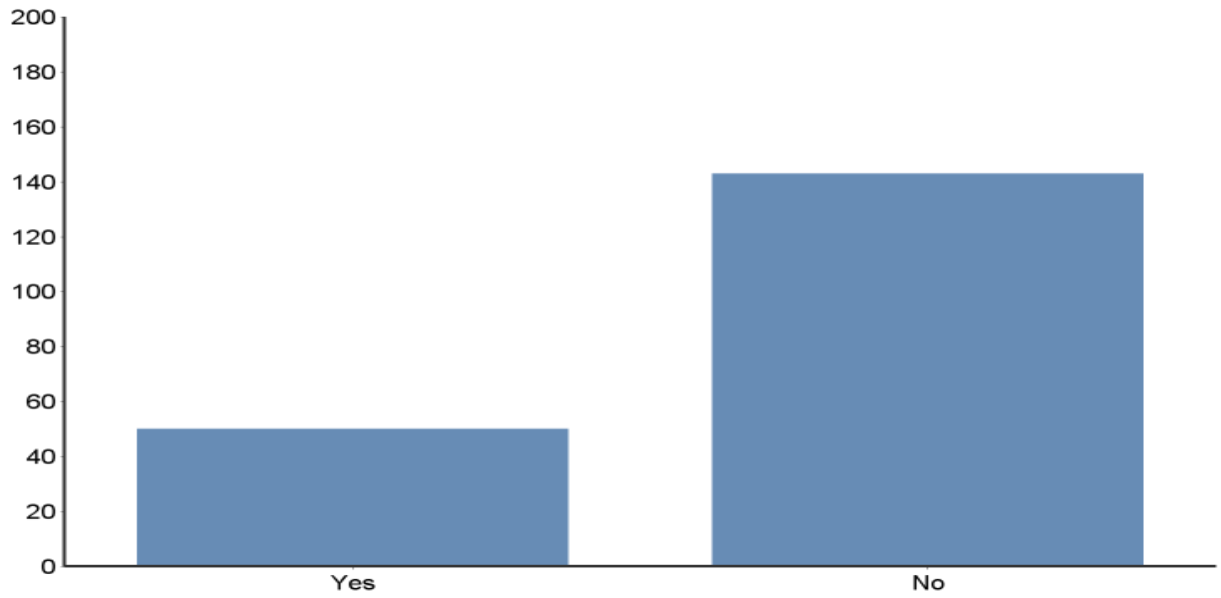
#	Answer	Bar	Response	%
0	Eating fewer calories		23	17.56%
1	Increasing physical activity		17	12.98%
2	Both		98	74.81%
3	Other		5	3.82%
	Total		143	100.00%



Other

more fruits and vegeables
walking
Weight Watchers
eating healthier

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
0	3	1.59	0.64	0.80	143	131

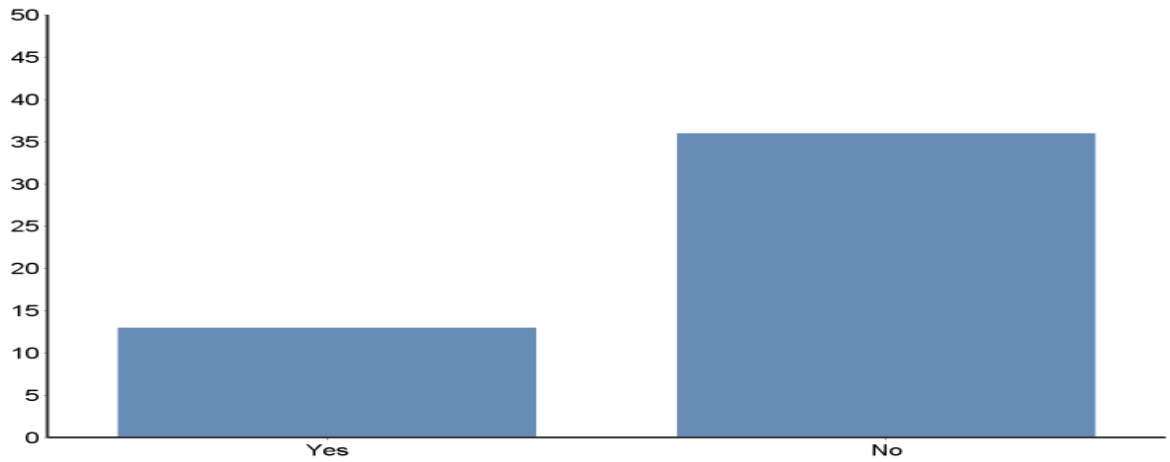
Have you smoked at least 100 cigarettes in your life?



#	Answer	Bar	Response	%
1	Yes		50	25.91%
2	No		143	74.09%
	Total		193	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.74	0.19	0.44	193	193

Do you smoke now?



#	Answer	Bar	Response	%
1	Yes		13	26.53%
2	No		36	73.47%
	Total		49	100.00%

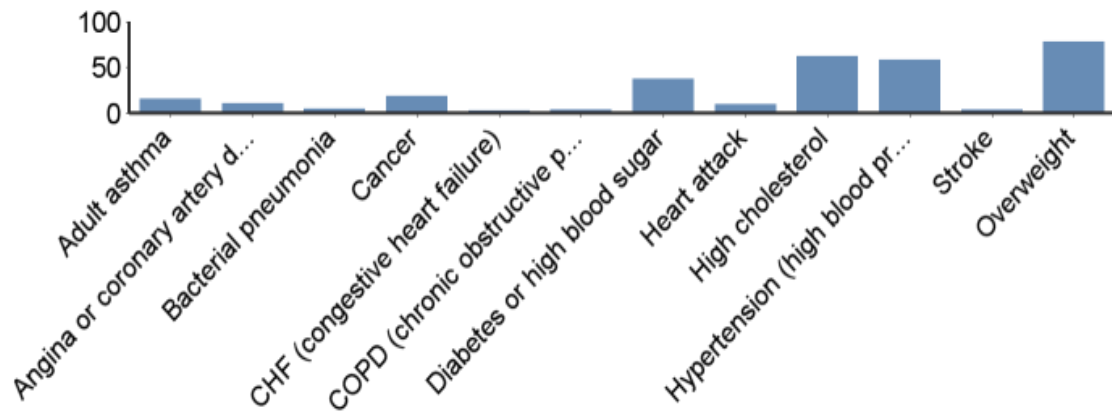
Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.73	0.20	0.45	49	49

If yes, how many cigarettes do you smoke on an average day?

10 12 15 **20**

Min Value	Max Value	Average Value	Variance	StdDev	Total Responses	Total Respondants
10	20	15.75	21.48	4.63	12	199

**Have you ever been told by a doctor that you have one of the following conditions?
(Mark all that apply)**



#	Answer	Bar	Response	%
1	Adult asthma		16	12.80%
2	Angina or coronary artery disease		11	8.80%
3	Bacterial pneumonia		5	4.00%
4	Cancer		19	15.20%
5	CHF (congestive heart failure)		3	2.40%
6	COPD (chronic obstructive pulmonary disease)		4	3.20%
7	Diabetes or high blood sugar		38	30.40%
8	Heart attack		10	8.00%
9	High cholesterol		62	49.60%
10	Hypertension (high blood pressure)		58	46.40%
11	Stroke		4	3.20%
13	Overweight		78	62.40%
	Total		308	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	13	8.80	12.29	3.51	308	125

What actions did your health provider recommend? For example: eat fewer calories, increase physical activity

Activity Back Bcmh Blood Borderline Bread Cal Calories Carbohydrate Carbs Control Cut
 Department Diabetic Diet Drugs Eat Education Exercise Excercise
 Exercise Fat Fatty Fewer Fewr Foods Fruits Healthier Increase
 Intake Lifestyle Limit Lose Low Lower Medication Medicine Mediterrean Meds Mention Physical Portion
 Prescribed Pressure Pt Reduced Relieve Size Stay Stress Sugar Thursdays Time Top Tuesdays Vegables Walk Watch
 Water Weight Work

Text Entry

eat less

all above

eat less, meds., walking/exercise

increase activity, diabetic diet, low fat diet.

increase physical activity

prescribed diabetic medication, exercise, eat fewer calories, and less sugar intake.

increase physical activity

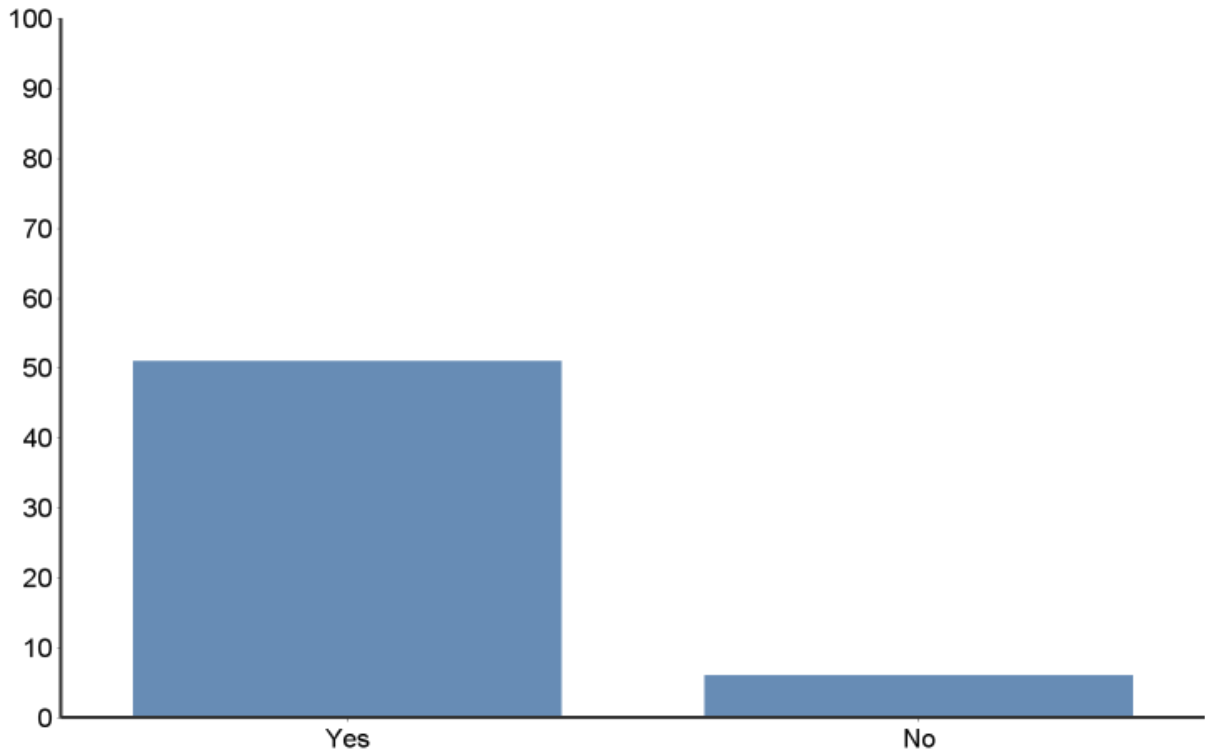
LOWER PORTION SIZE, EXCERSIZE,EAT BETTER



eat less, exercise more

diabetes education, fewr calories, more exercize, more water, drugs

Statistic	Value
Respondents	58

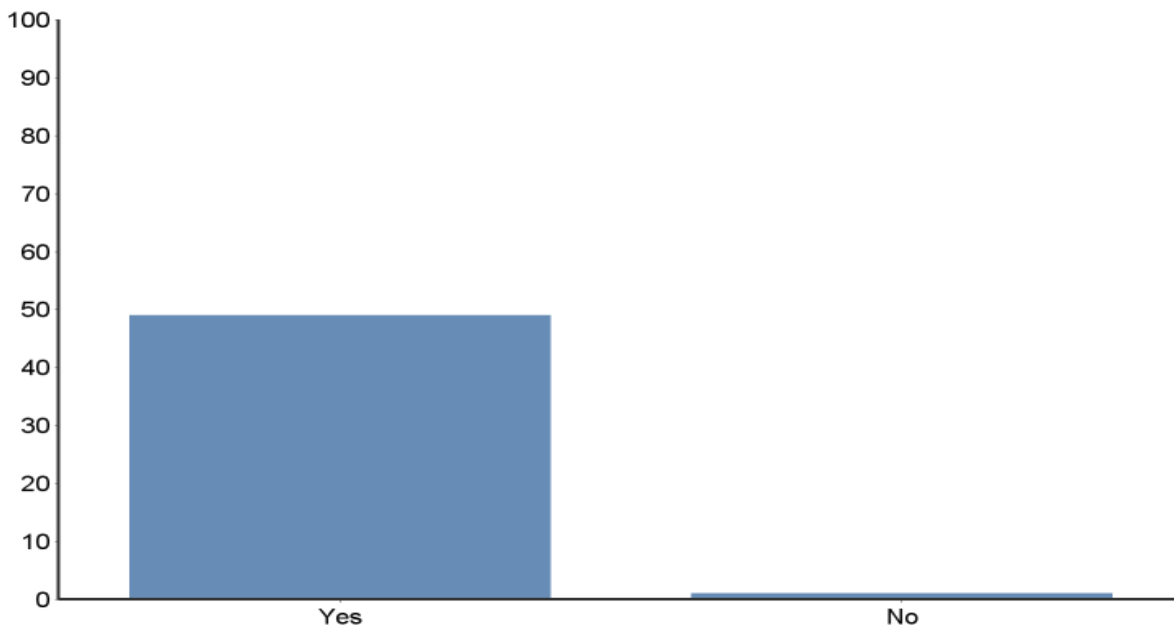
Is any medication currently prescribed for your hypertension (high blood pressure)?



#	Answer	Bar	Response	%
1	Yes		51	89.47%
2	No		6	10.53%
	Total		57	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.11	0.10	0.31	57	57

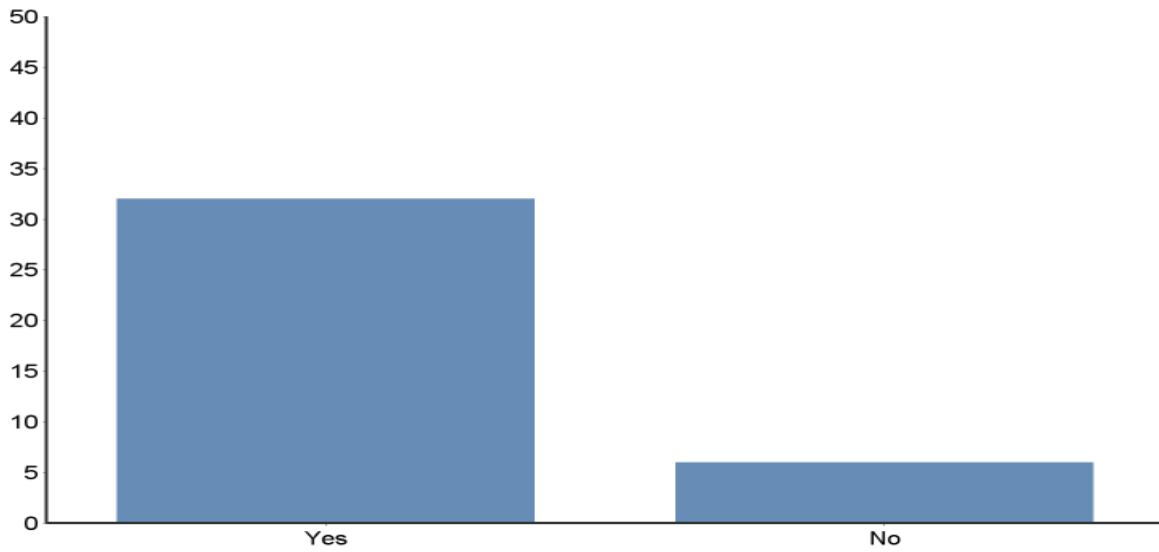
Are you taking the medication regularly?





#	Answer	Bar	Response	%
1	Yes		49	98.00%
2	No		1	2.00%
	Total		50	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.02	0.02	0.14	50	50

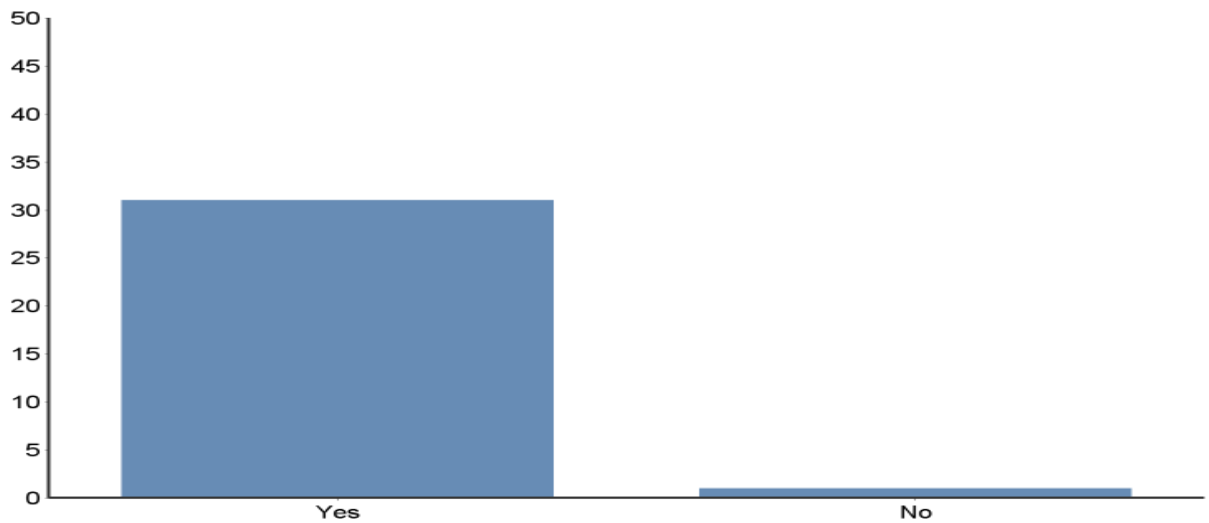
Is any medication currently prescribed for your diabetes?



#	Answer	Bar	Response	%
1	Yes		32	84.21%
2	No		6	15.79%
	Total		38	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.16	0.14	0.37	38	38

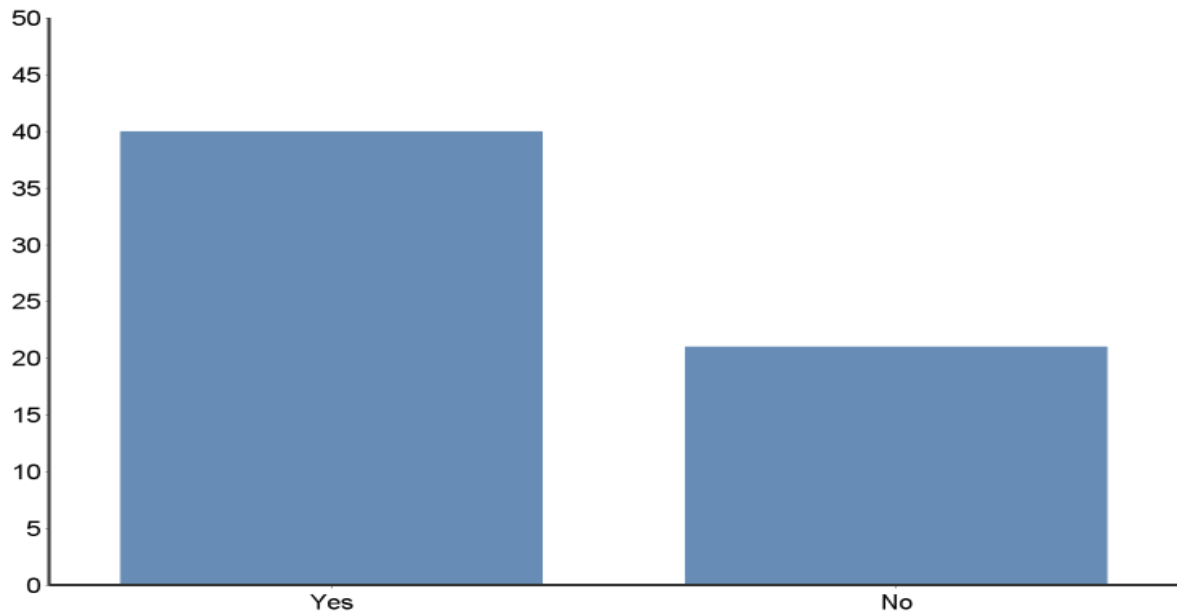
Are you taking the medication regularly?



#	Answer	Bar	Response	%
1	Yes		31	96.88%
2	No		1	3.13%
	Total		32	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.03	0.03	0.18	32	32

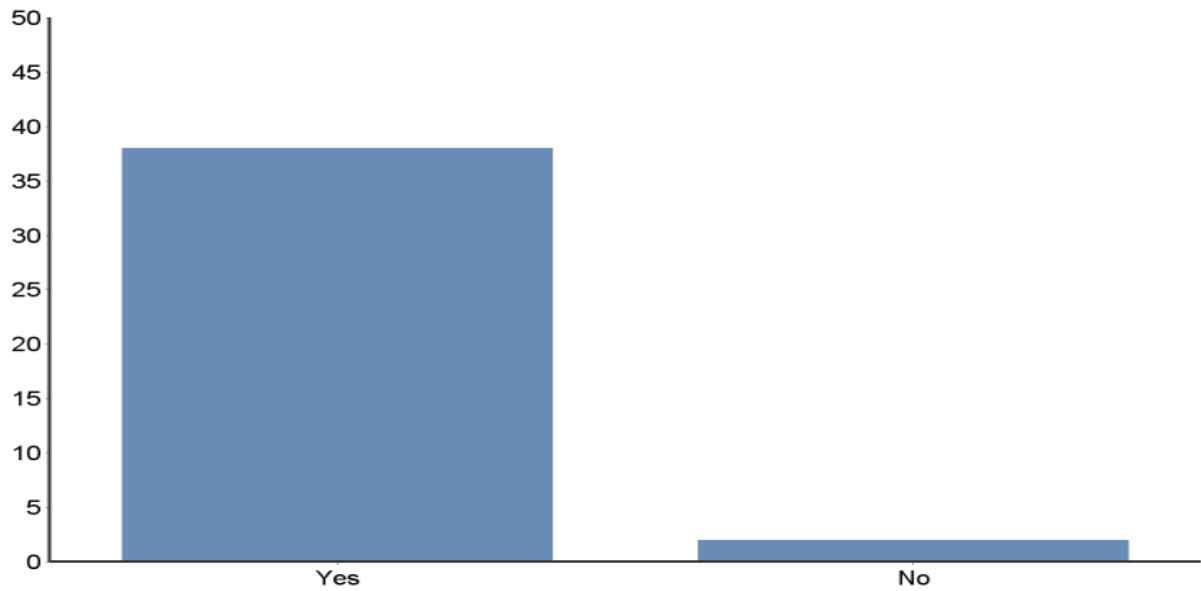
Is any medication currently prescribed for your high cholesterol?



#	Answer	Bar	Response	%
1	Yes		40	65.57%
2	No		21	34.43%
	Total		61	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.34	0.23	0.48	61	61

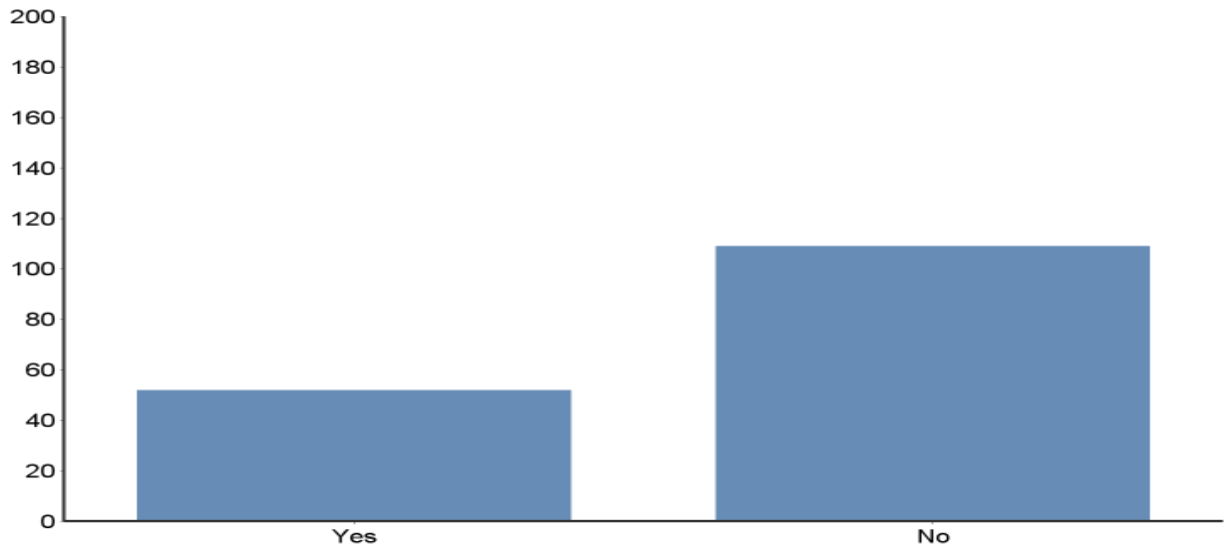
Are you taking the medication regularly?



#	Answer	Bar	Response	%
1	Yes		38	95.00%
2	No		2	5.00%
	Total		40	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.05	0.05	0.22	40	40

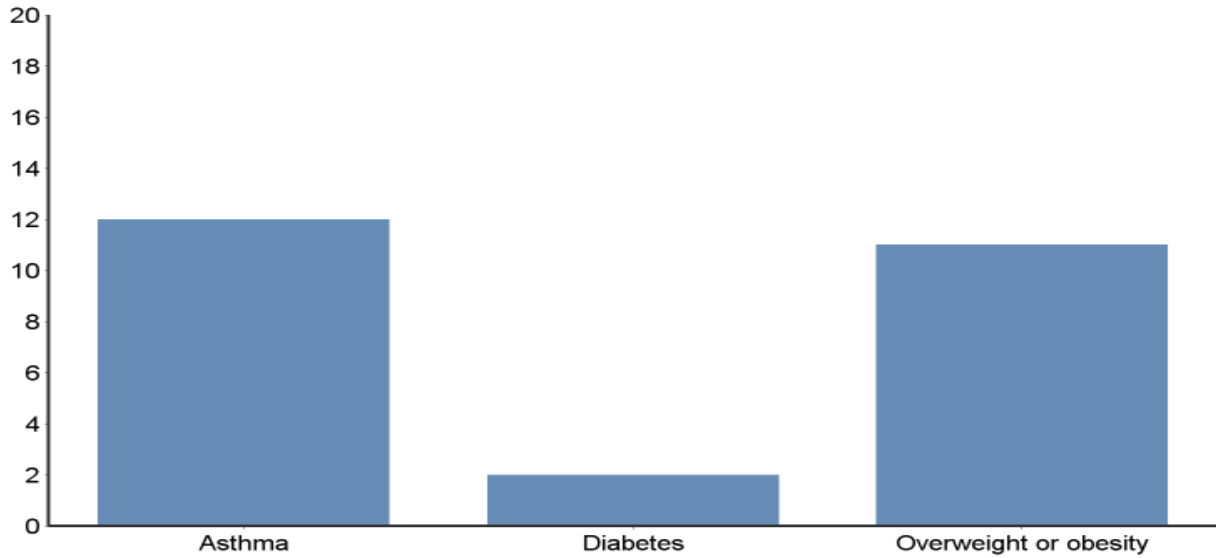
Do you have a child 17 or younger living in your home?






#	Answer	Bar	Response	%
1	Yes		52	32.30%
2	No		109	67.70%
	Total		161	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.68	0.22	0.47	161	161

Has a child in your household (age 17 or younger) been told by a doctor that they have one of the following conditions? (Mark all that apply)



#	Answer	Bar	Response	%
1	Asthma		12	63.16%
2	Diabetes		2	10.53%
3	Overweight or obesity		11	57.89%
	Total		25	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	3	1.96	0.96	0.98	25	19

If a child in your household has asthma, how many times during the past 12 months did you visit an emergency room because of the asthma?

0 2

Min Value	Max Value	Average Value	Variance	StdDev	Total Responses	Total Respondents
0	2	0.33	0.61	0.78	12	199

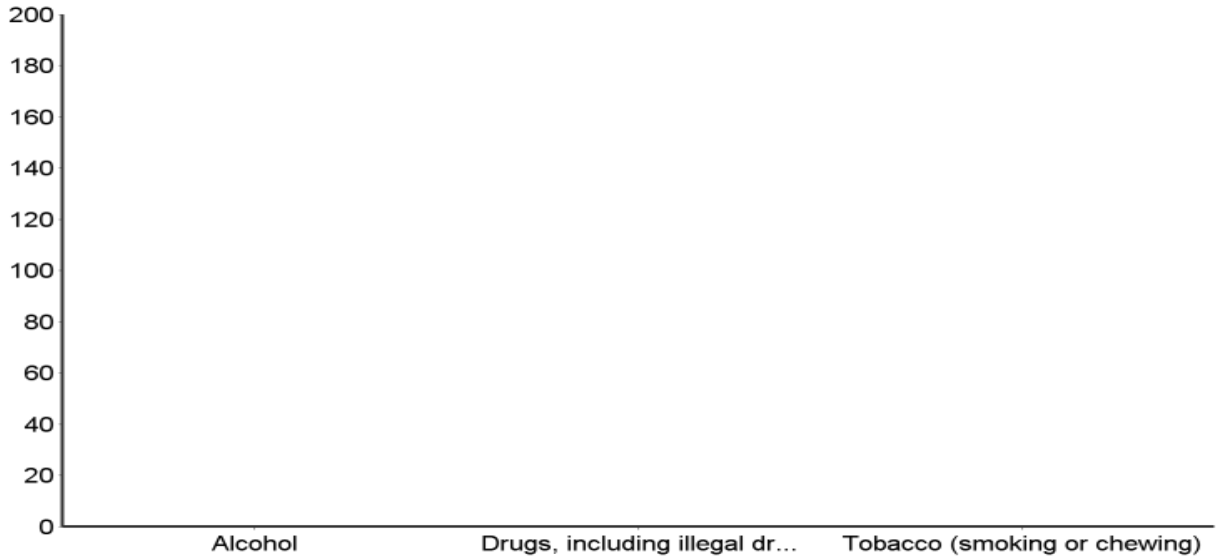
If a child in your household has diabetes, how many times during the past 12 months did you visit an emergency room because of the diabetes?

0

Min Value	Max Value	Average Value	Variance	StdDev	Total Responses	Total Respondents
0	0	0.00	0.00	0.00	5	199

Has a child in your household (age 17 or younger) used the following?

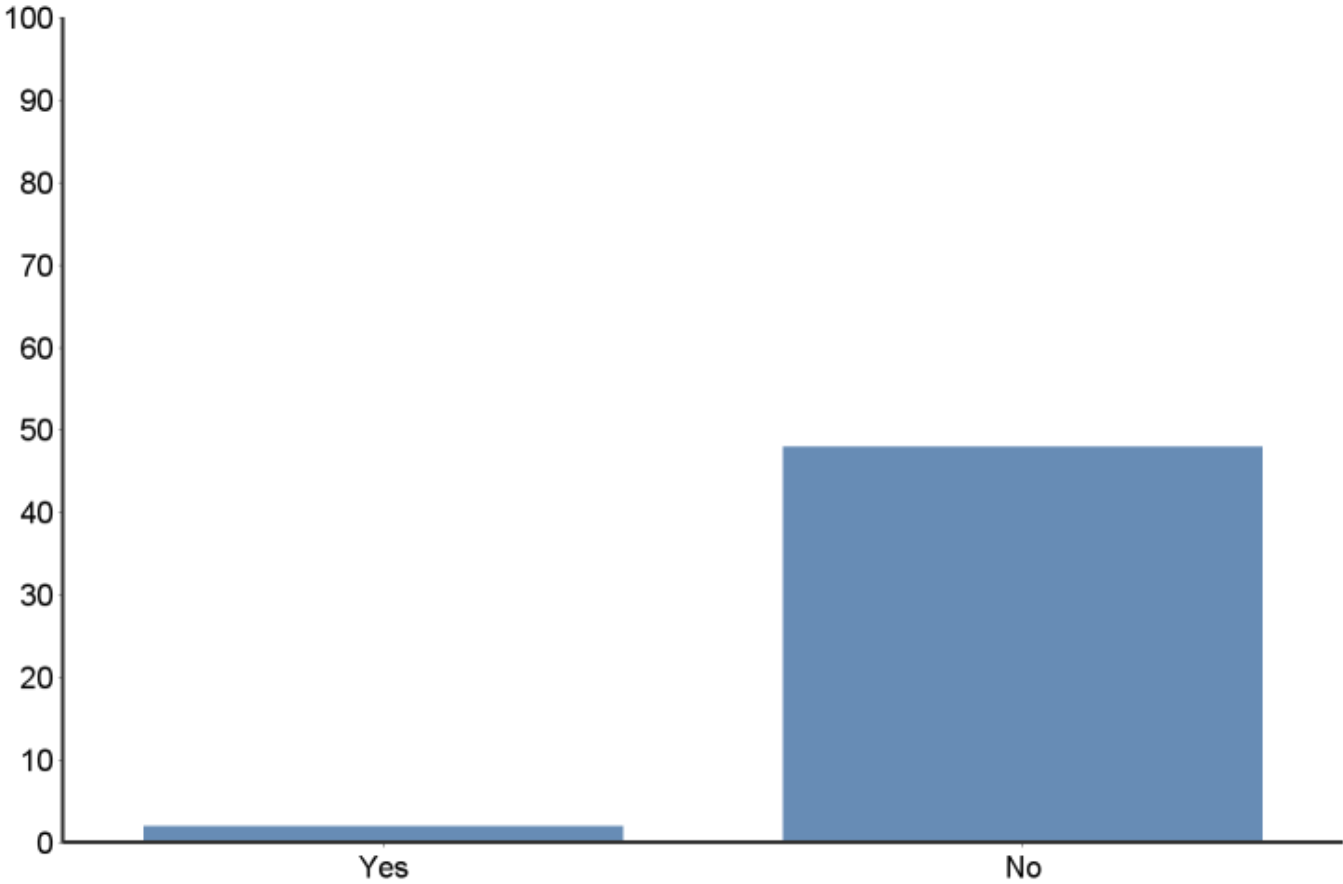
(Mark all that apply)



#	Answer	Bar	Response	%
1	Alcohol		0	0.00%
2	Drugs, including illegal drugs, abuse of prescription or over the counter drugs		0	0.00%
3	Tobacco (smoking or chewing)		0	0.00%
	Total		0	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
-	-	-	-	-	0	0

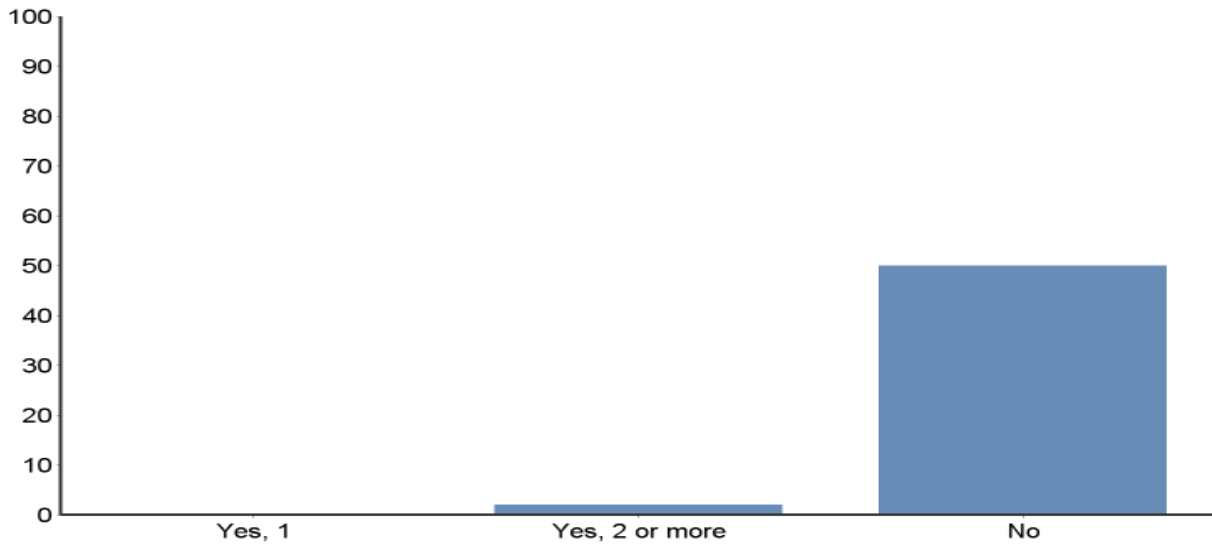
Has a child in your household (age 17 or younger) become pregnant?



#	Answer	Bar	Response	%
1	Yes		2	4.00%
2	No		48	96.00%
	Total		50	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.96	0.04	0.20	50	50

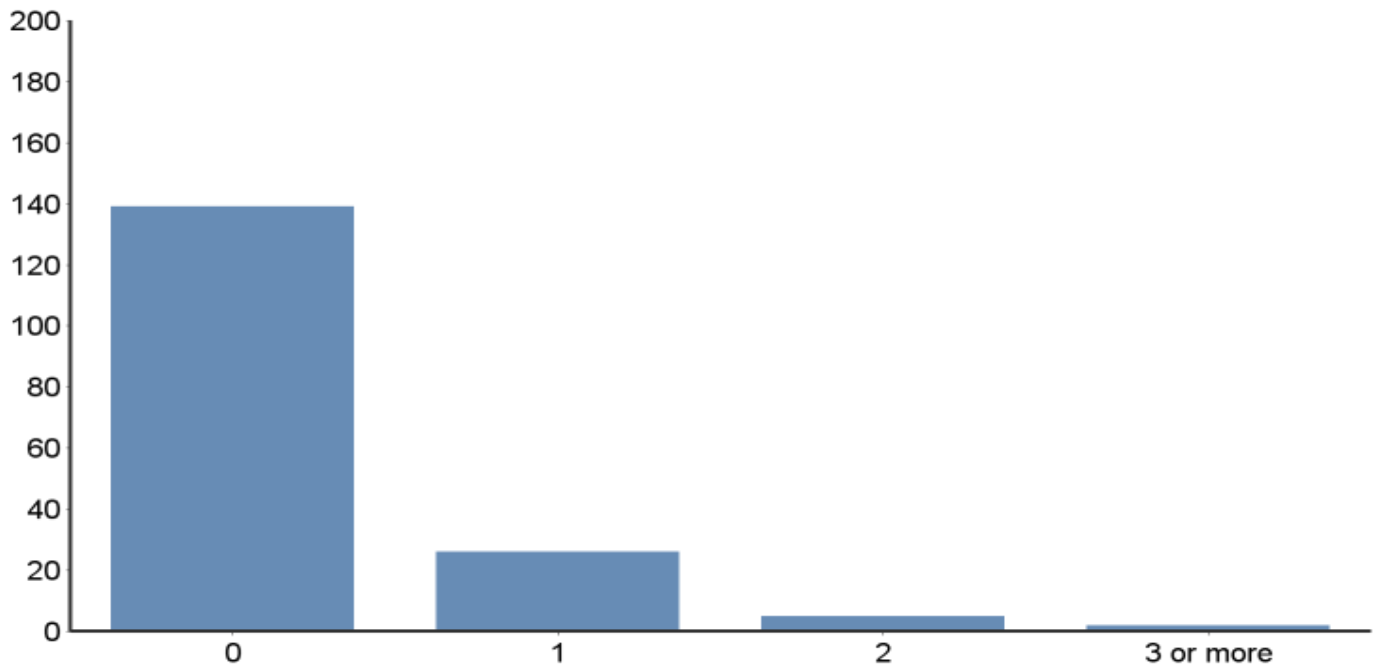
Is any child (age 17 or younger) in your household in fair-to-poor health?



#	Answer	Bar	Response	%
1	Yes, 1		0	0.00%
2	Yes, 2 or more		2	3.85%
3	No		50	96.15%
	Total		52	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
2	3	2.96	0.04	0.19	52	52

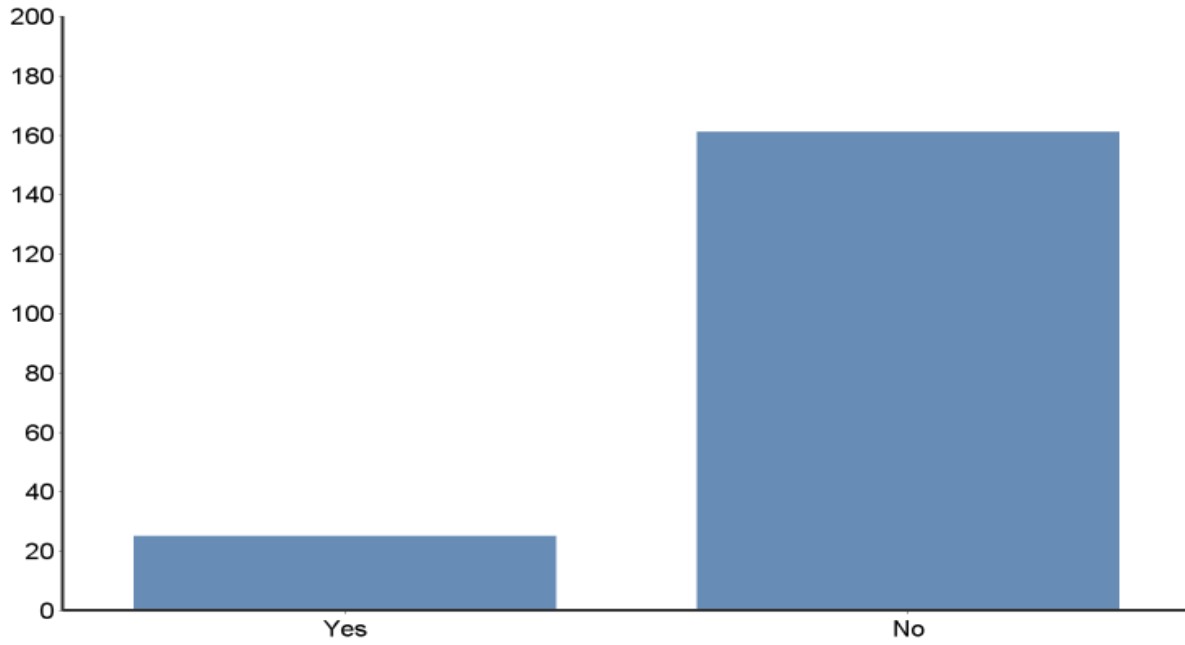
Including yourself, how many members of your household are disabled?



#	Answer	Bar	Response	%
1	0		139	80.81%
2	1		26	15.12%
3	2		5	2.91%
4	3 or more		2	1.16%
	Total		172	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	4	1.24	0.31	0.56	172	172

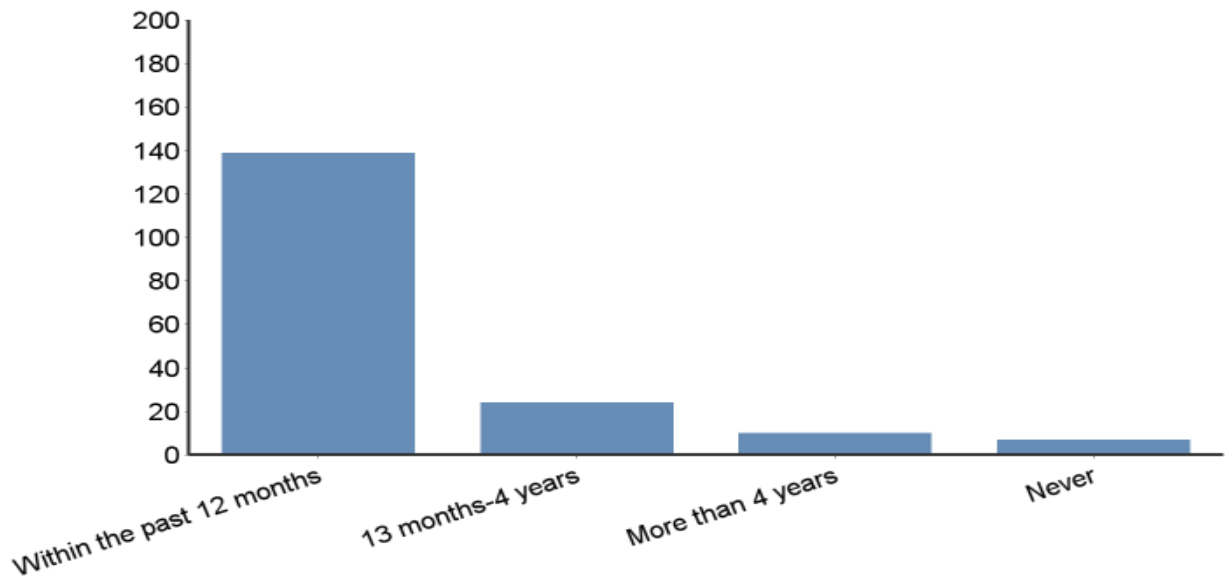
**Are you or any household member a PRIMARY caregiver for an aged, disabled, or chronically ill person?
(including a parent, spouse, or other relative)**



#	Answer	Bar	Response	%
1	Yes		25	13.44%
2	No		161	86.56%
	Total		186	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.87	0.12	0.34	186	186

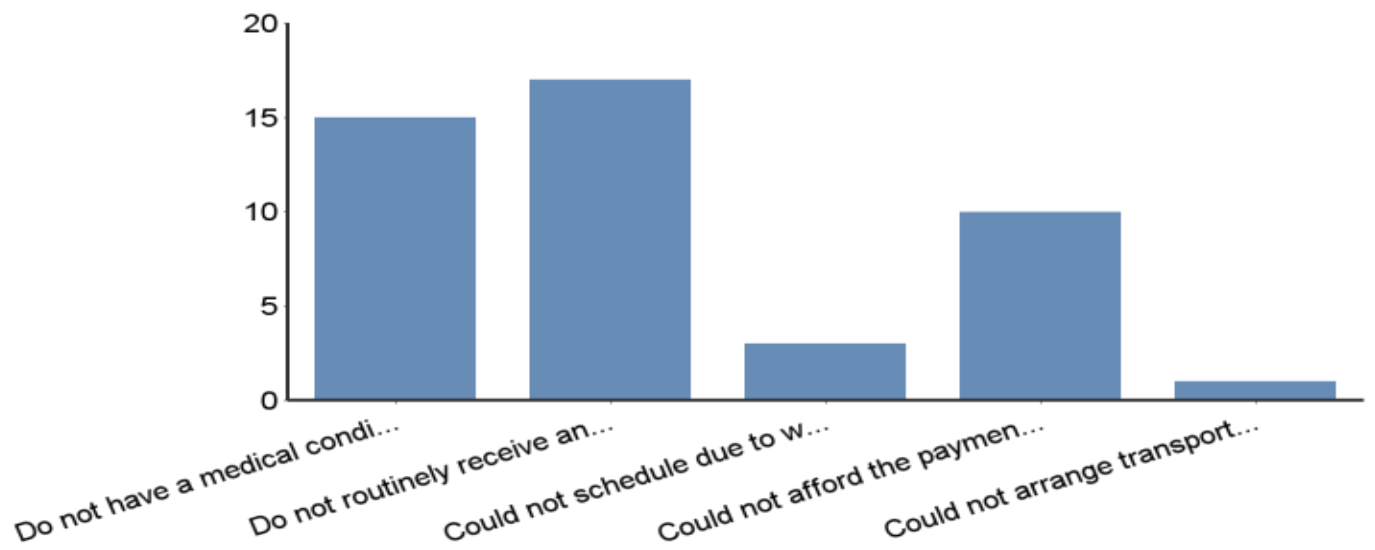
How long has it been since you last visited a healthcare provider for a routine check-up? (A routine check-up is a general visit, not a visit for a specific injury, illness or condition).



#	Answer	Bar	Response	%
1	Within the past 12 months		139	77.22%
2	13 months-4 years		24	13.33%
3	More than 4 years		10	5.56%
5	Never		7	3.89%
	Total		180	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	5	1.40	0.82	0.91	180	180

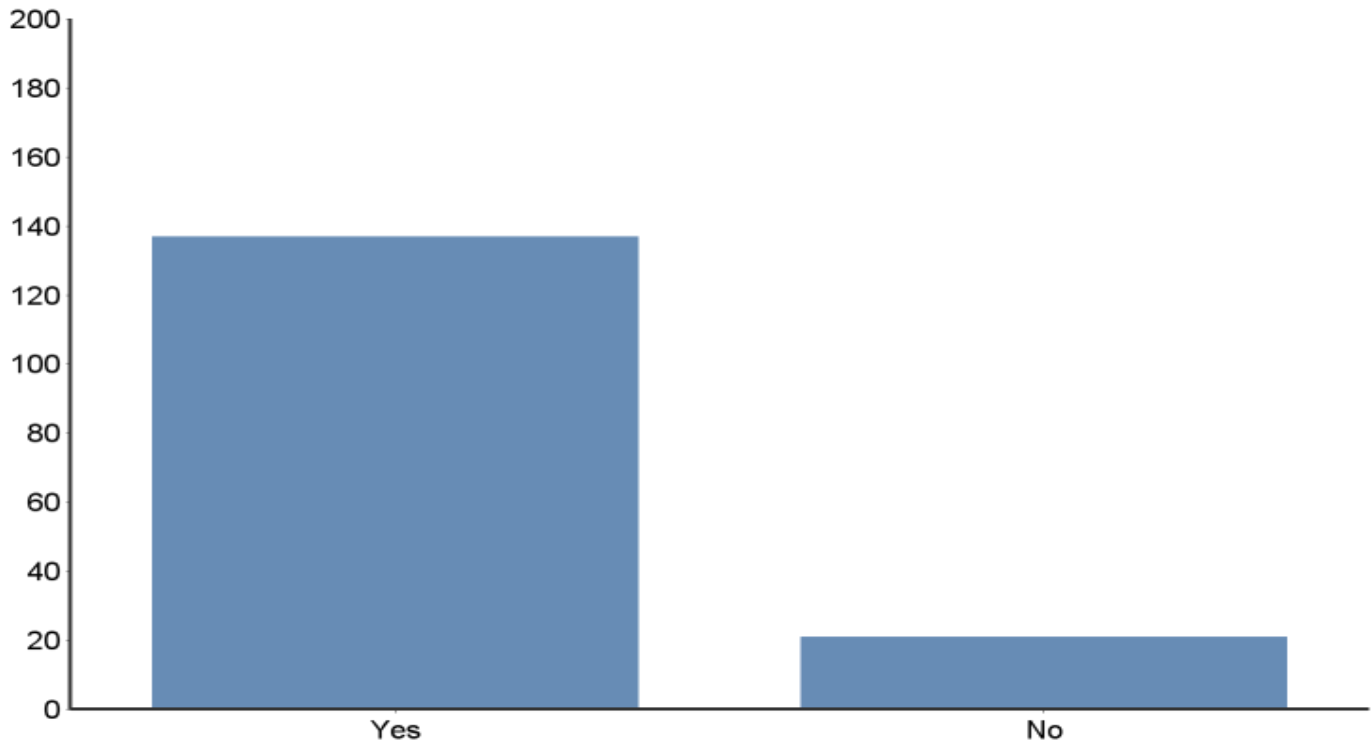
Your last visit was more than a year ago. Is it because you . . . (mark all that apply)



#	Answer	Bar	Response	%
1	Do not have a medical condition that requires any care and I receive health screenings from another provider service		15	40.54%
2	Do not routinely receive any health screenings		17	45.95%
3	Could not schedule due to work or personal conflicts with normal business hours		3	8.11%
4	Could not afford the payments due, regardless of insurance status		10	27.03%
5	Could not arrange transportation		1	2.70%
	Total		46	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	5	2.24	1.43	1.20	46	37

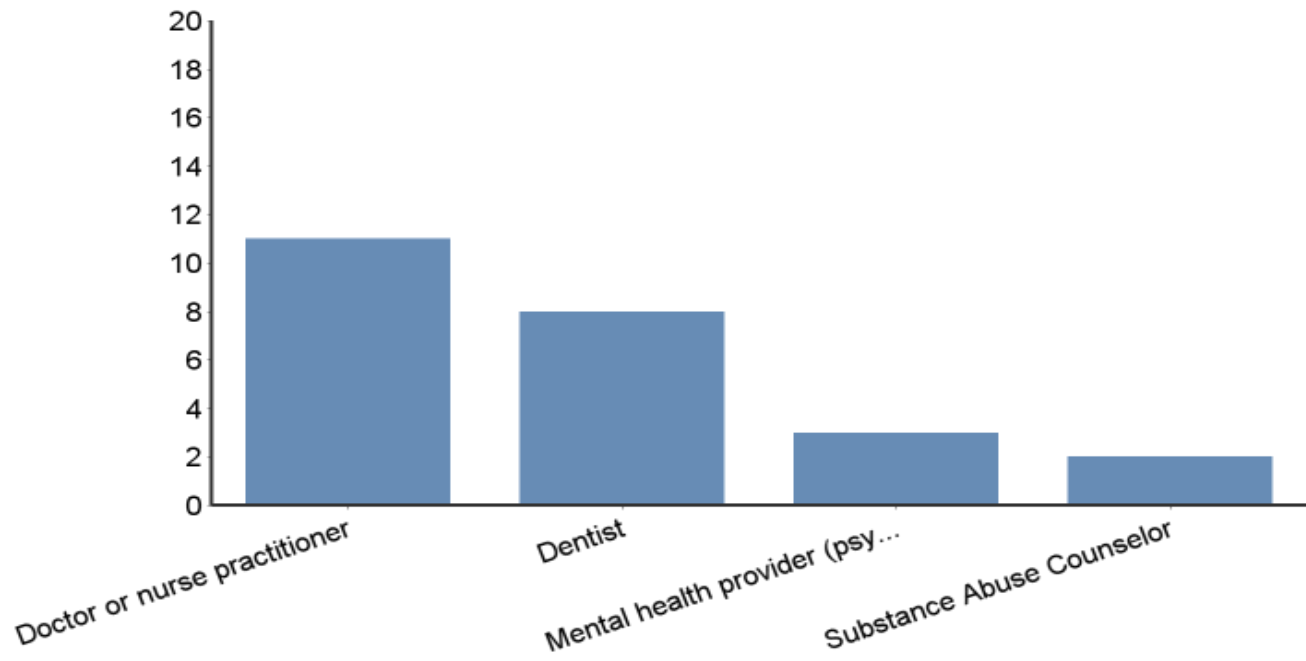
If you or a household member has a health care need, is the appropriate health provider available?



#	Answer	Bar	Response	%
1	Yes		137	86.71%
2	No		21	13.29%
	Total		158	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.13	0.12	0.34	158	158

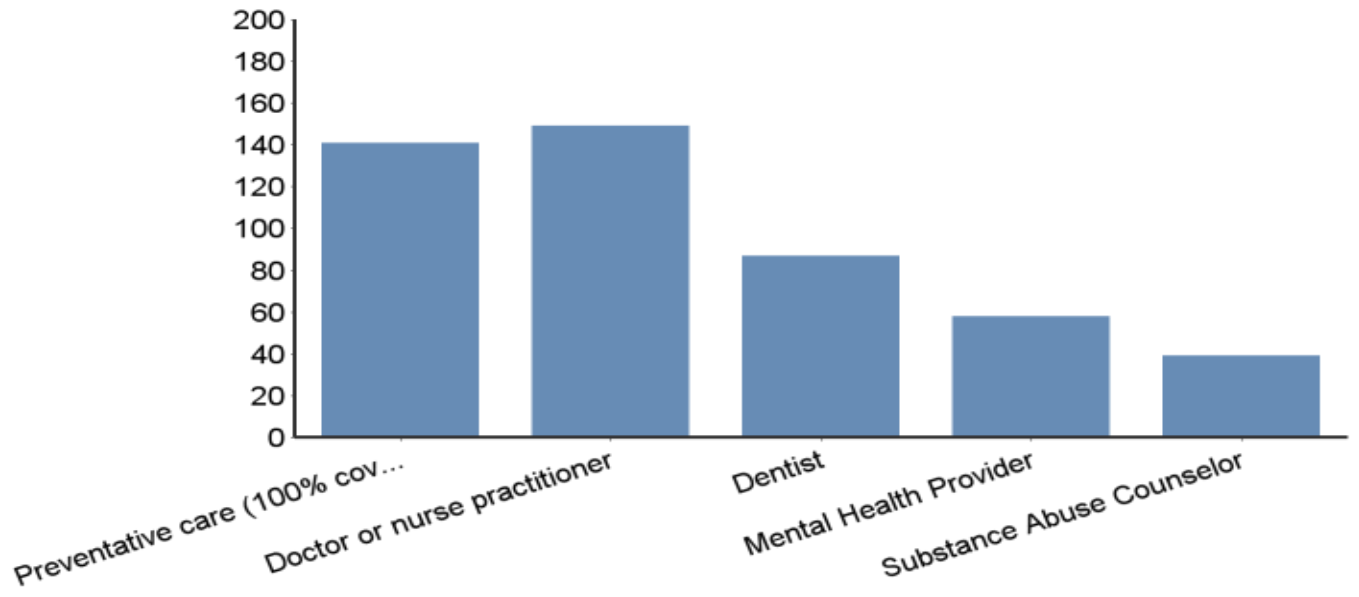
Which providers are unavailable? (Select all that apply)



#	Answer	Bar	Response	%
1	Doctor or nurse practitioner		11	61.11%
3	Dentist		8	44.44%
4	Mental health provider (psychologist, licensed social worker or counselor, therapist, psychologist)		3	16.67%
5	Substance Abuse Counselor		2	11.11%
	Total		24	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	5	2.38	1.98	1.41	24	18

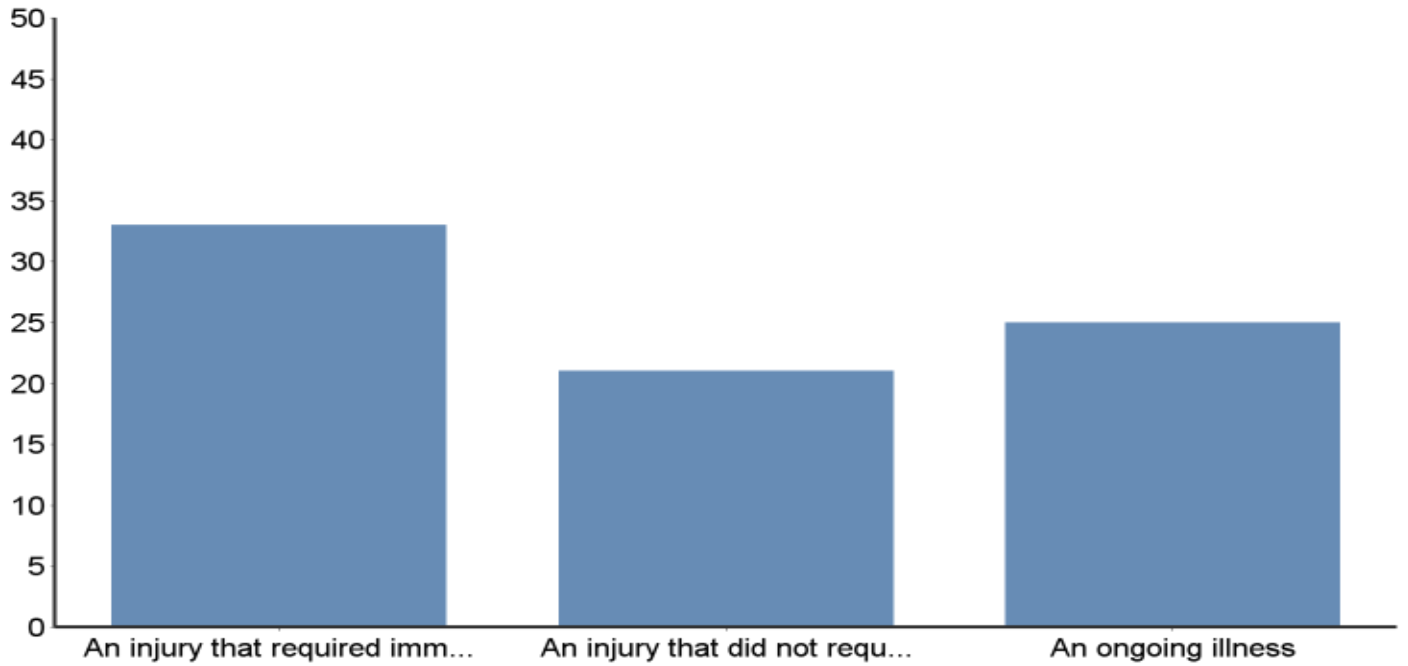
Does your insurance cover the health services you need? (Choose all that are covered)



#	Answer	Bar	Response	%
1	Preventative care (100% coverage for routine wellness exam, mammograms, pap smear, immunizations, prostate exams)		141	87.04%
2	Doctor or nurse practitioner		149	91.98%
3	Dentist		87	53.70%
4	Mental Health Provider		58	35.80%
5	Substance Abuse Counselor		39	24.07%
	Total		474	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	5	2.38	1.57	1.25	474	162

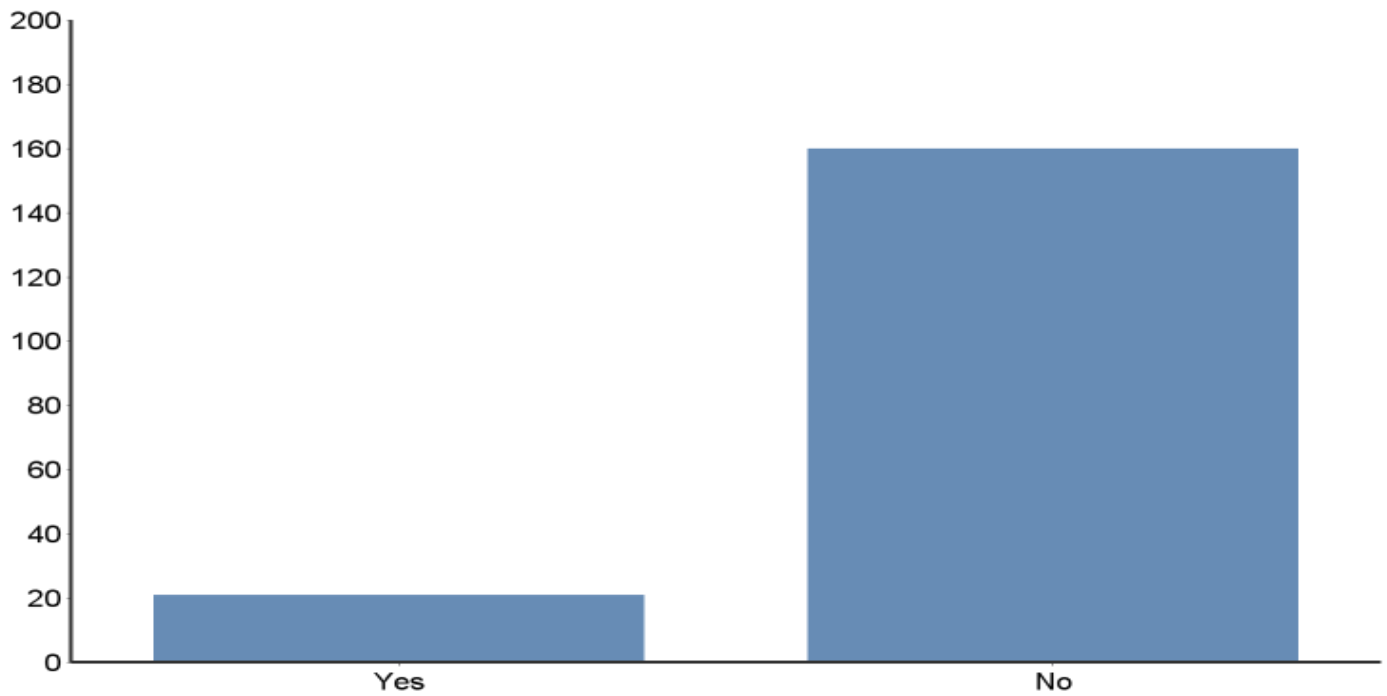
If you or a household member used a hospital emergency room in the past 12 months was it due to: (mark all that apply)





#	Answer	Bar	Response	%
1	An injury that required immediate attention		33	44.00%
2	An injury that did not require immediate attention but it was the most convenient/only service available		21	28.00%
3	An ongoing illness		25	33.33%
	Total		79	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	3	1.90	0.73	0.86	79	75

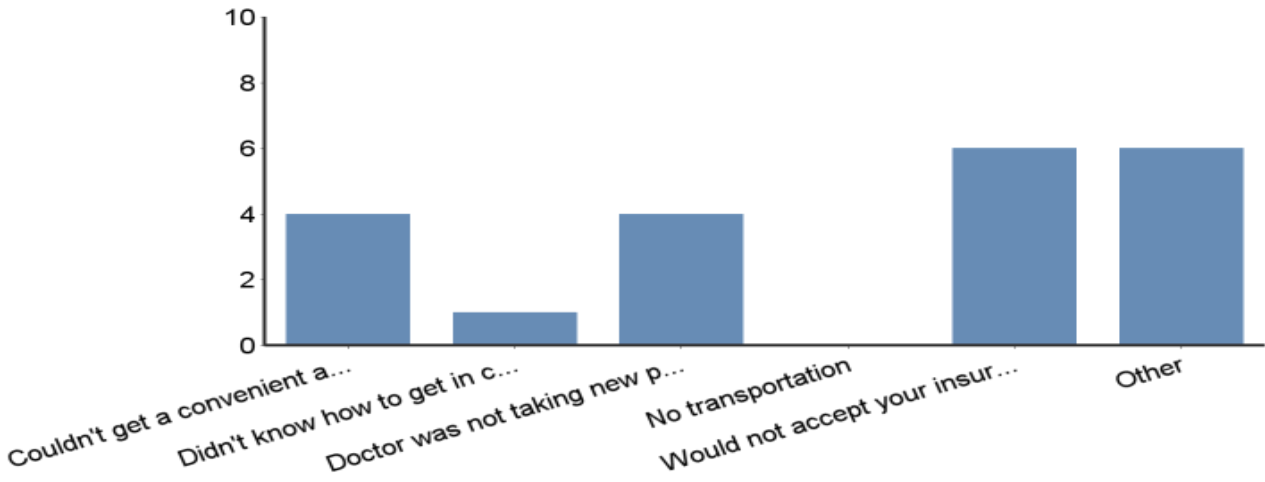
Have you or anyone in your household had any difficulty finding a doctor within the past two years?



#	Answer	Bar	Response	%
1	Yes		21	11.60%
2	No		160	88.40%
	Total		181	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.88	0.10	0.32	181	181

If yes, why would you say you had trouble finding a doctor?

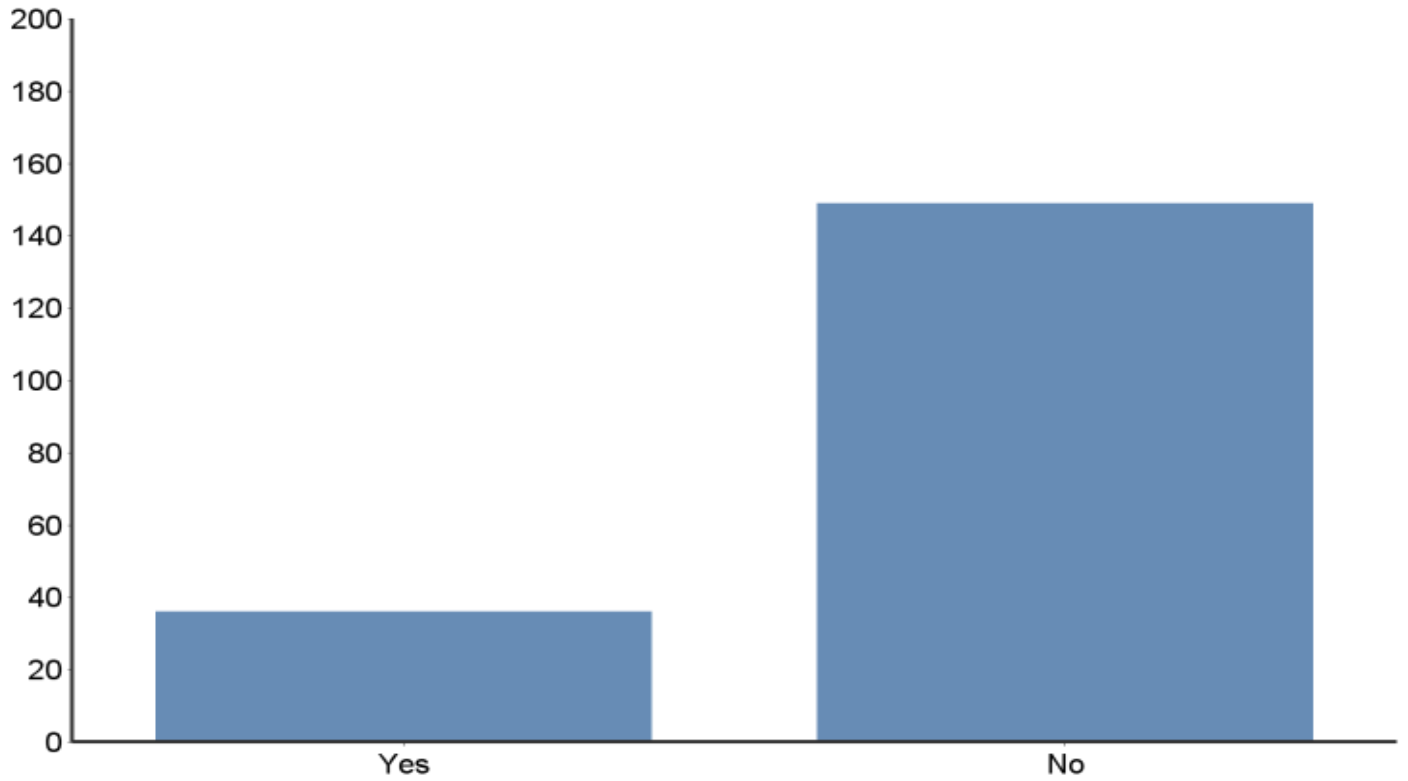


#	Answer	Bar	Response	%
1	Couldn't get a convenient appointment		4	19.05%
2	Didn't know how to get in contact with one		1	4.76%
3	Doctor was not taking new patients		4	19.05%
4	No transportation		0	0.00%
5	Would not accept your insurance		6	28.57%
6	Other		6	28.57%
	Total		21	100.00%

Other

- did not want to back surgery that another dr messed up
- i did not like them
- Dr not appropriate for child
- haven't looked due to lack of need
- no insurance

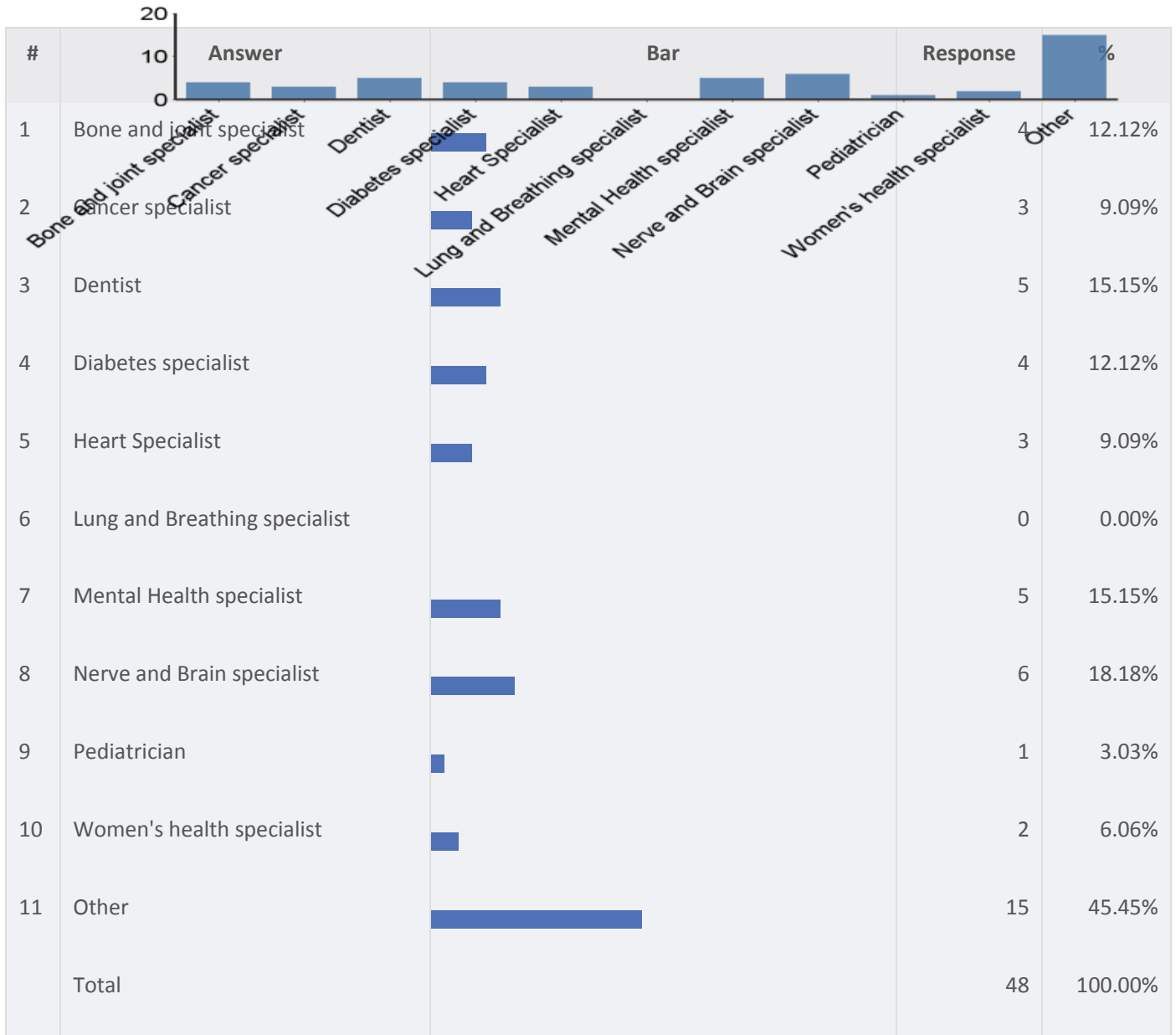
Have you or anyone in your household had any difficulty finding a doctor that treats specific illnesses or conditions in your area within the past two years?



#	Answer	Bar	Response	%
1	Yes		36	19.46%
2	No		149	80.54%
	Total		185	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.81	0.16	0.40	185	185

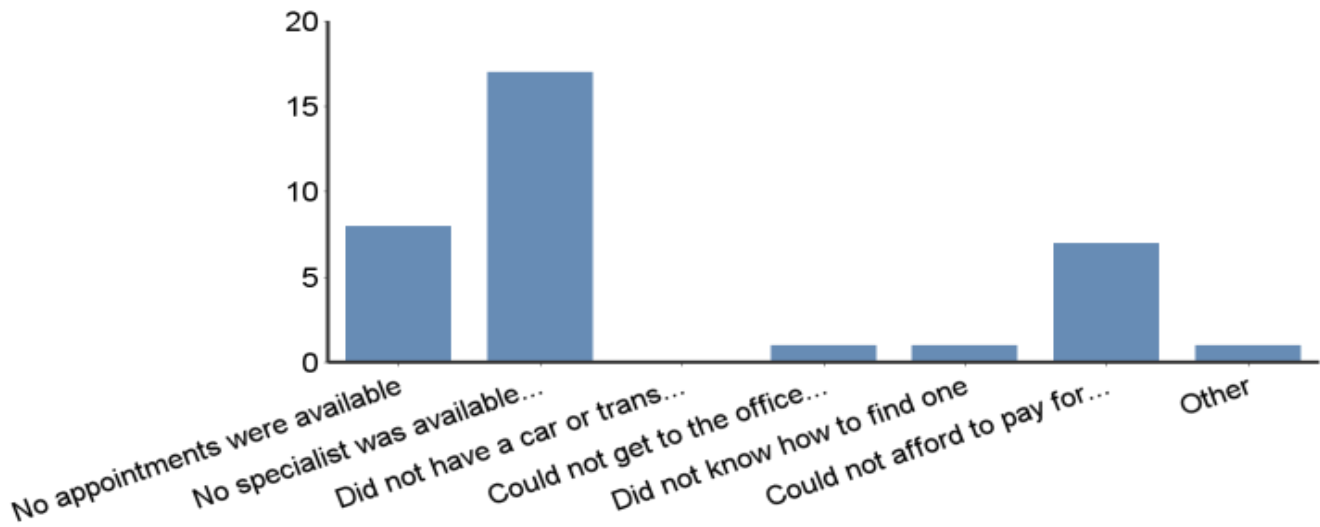
If yes, what kind of specialist did you look for? (mark all that apply)



Other

- allergy specialist
- Dermatologist
- Beriatic surgeon
- vision
- Dermatologist

Why were you unable to visit the specialist when you needed one? (Mark all that apply)



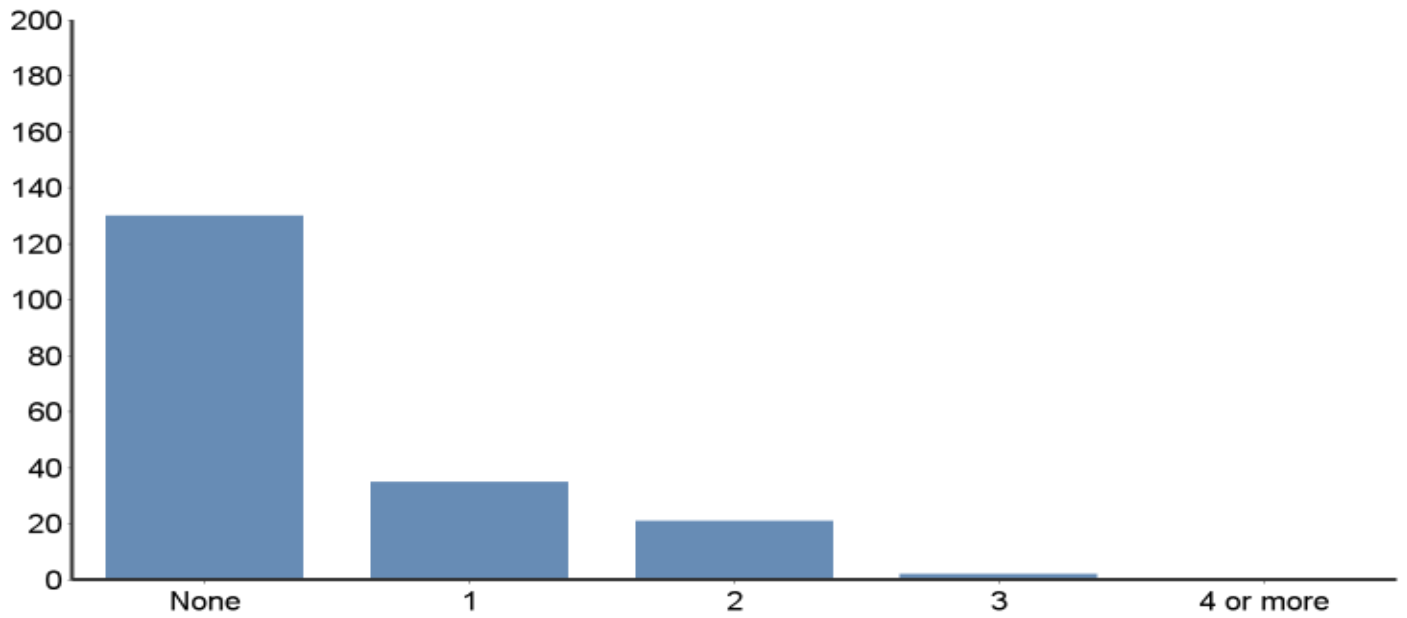
#	Answer	Bar	Response	%
1	No appointments were available		8	26.67%
2	No specialist was available in this area		17	56.67%
3	Did not have a car or transportation to get to the office		0	0.00%
4	Could not get to the office while they were open		1	3.33%
5	Did not know how to find one		1	3.33%
6	Could not afford to pay for the specialist		7	23.33%
7	Other		1	3.33%
	Total		35	100.00%

Other

not a doctor here in town one in Nevada doesn't want to try again

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	7	2.86	3.89	1.97	35	30

Including yourself, how many adults in your household are retired?



#	Answer	Bar	Response	%
1	None		130	69.15%
2	1		35	18.62%
3	2		21	11.17%
4	3		2	1.06%
5	4 or more		0	0.00%
	Total		188	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	4	1.44	0.54	0.73	188	188

How many household ADULTS are currently covered by health insurance?

0 1 **2** 3 4 5 20

Text Entry

2
2
1
2
3
1
2
2
2
3

Min Value	Max Value	Average Value	#ReportTableColumnHeaders, Variance#	#ReportTableColumnHeaders, StdDev#	Total Responses	Total Respondents
0	20	2.02	2.41	1.55	178	199

How many household children are currently covered by health insurance?

0 1 2 3 4 5

Text Entry

0
0
0
2
0
2
0
0
0
0

Min Value	Max Value	Average Value	#ReportTableColumnHeaders, Variance#	#ReportTableColumnHeaders, StdDev#	Total Responses	Total Respondents
0	5	0.83	1.48	1.22	140	199

How many household members ARE NOT covered by insurance

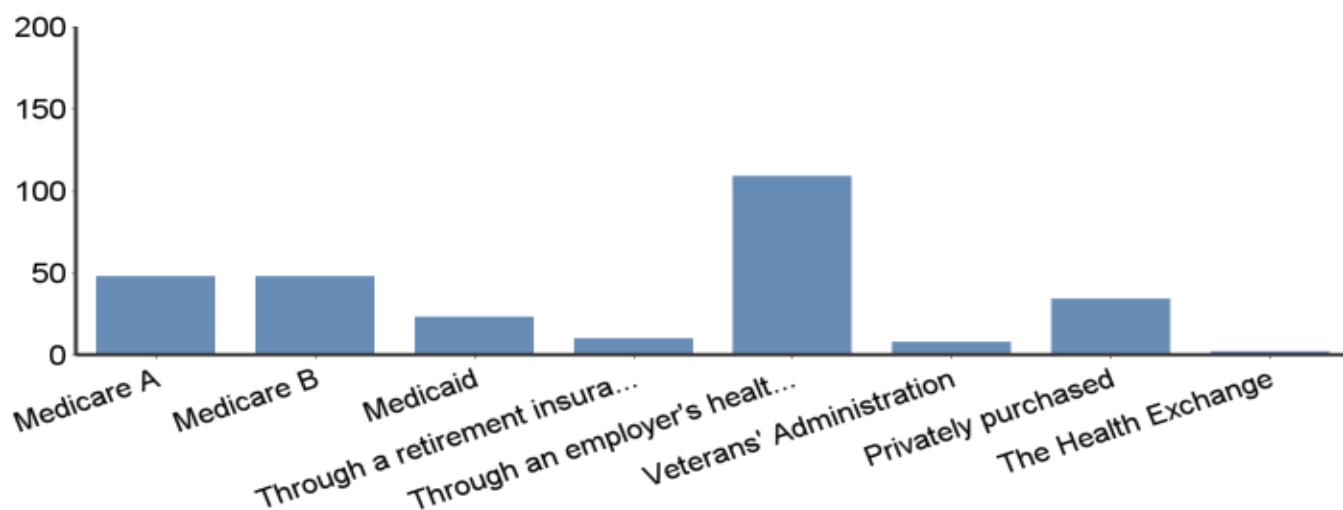
0 1 2 3 4 5

Text Entry

0
0
0
0
0
0
0
0
0
0
0

Statistic	Value
Respondents	145

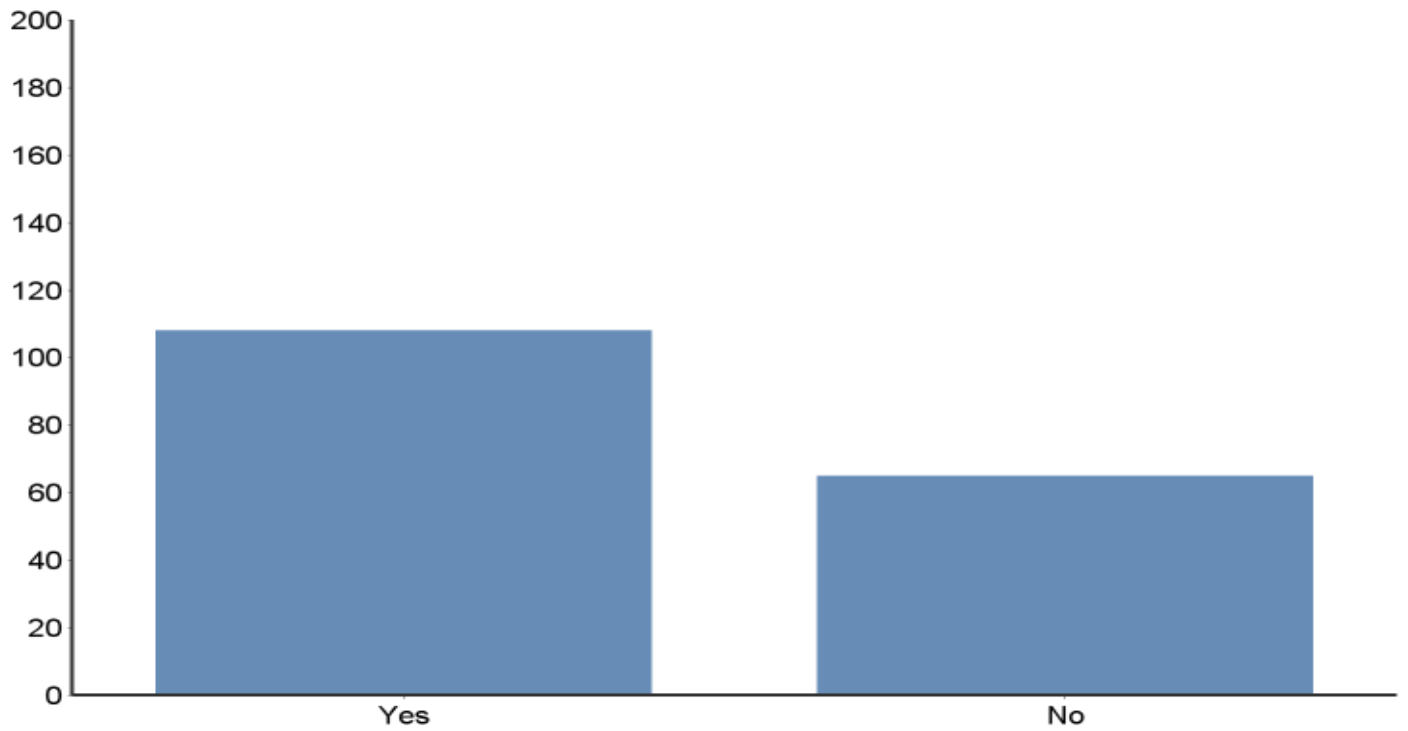
If you or members of your household have health insurance coverage, how is it obtained? (Mark all that apply)



#	Answer	Bar	Response	%
1	Medicare A		48	27.75%
2	Medicare B		48	27.75%
3	Medicaid		23	13.29%
4	Through a retirement insurance plan		10	5.78%
5	Through an employer's health insurance plan		109	63.01%
6	Veterans' Administration		8	4.62%
7	Privately purchased		34	19.65%
8	The Health Exchange		2	1.16%
	Total		282	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	8	3.90	4.00	2.00	282	173

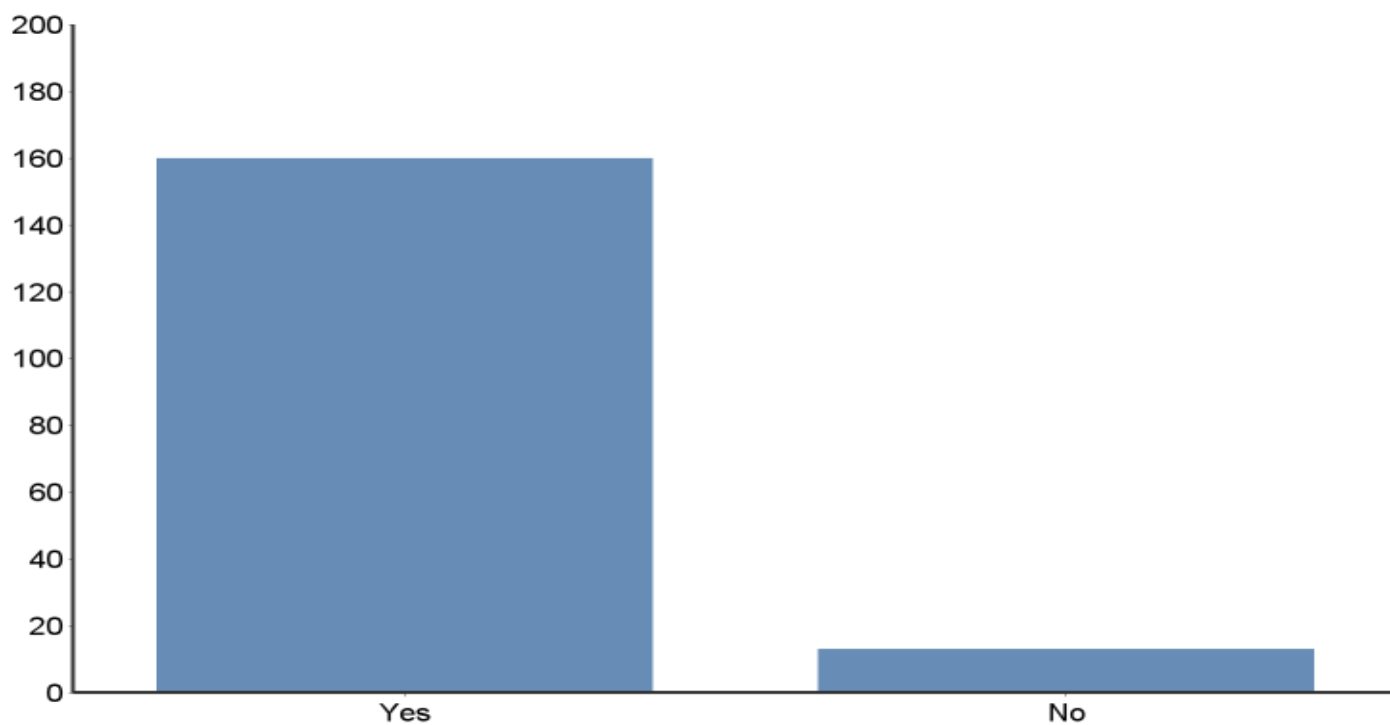
Do any of these policies provide dental coverage



#	Answer	Bar	Response	%
1	Yes		108	62.43%
2	No		65	37.57%
	Total		173	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.38	0.24	0.49	173	173

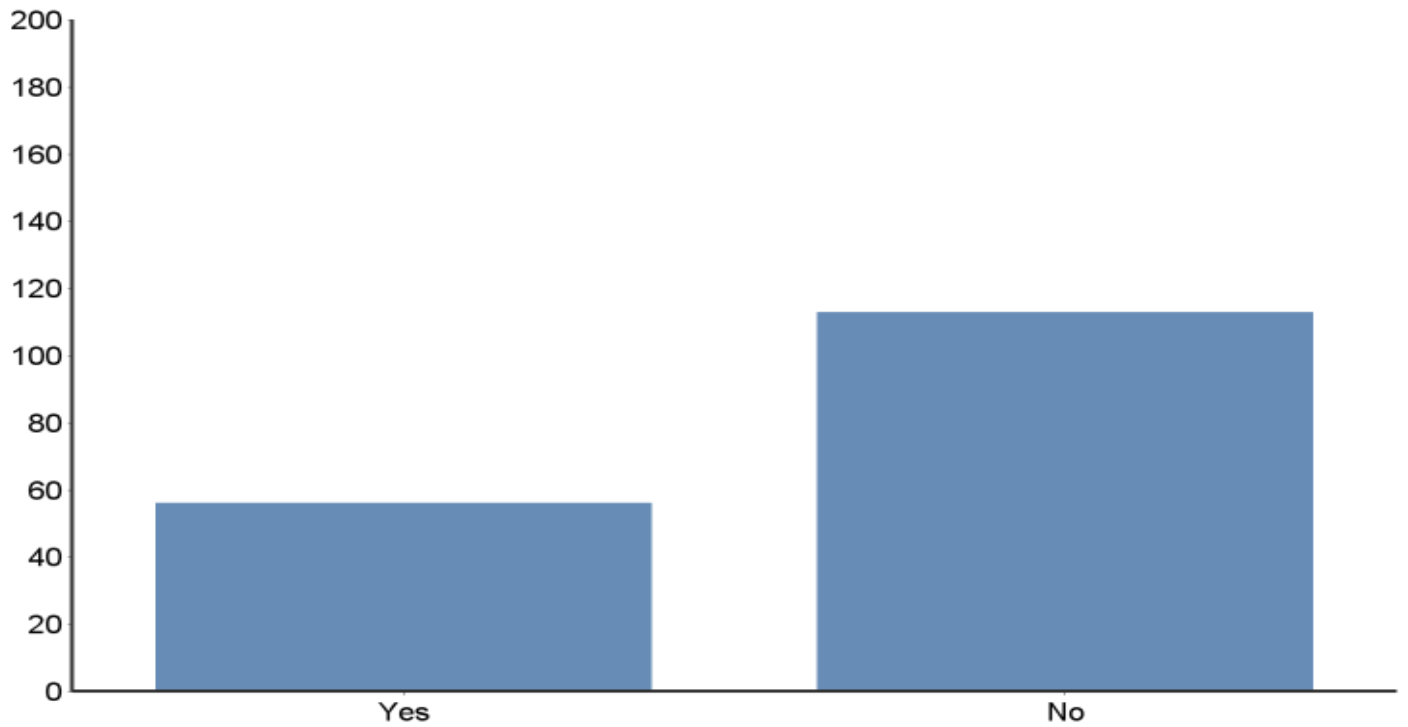
Do any of these insurances pay for prescription drugs?



#	Answer	Bar	Response	%
1	Yes		160	92.49%
2	No		13	7.51%
	Total		173	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.08	0.07	0.26	173	173

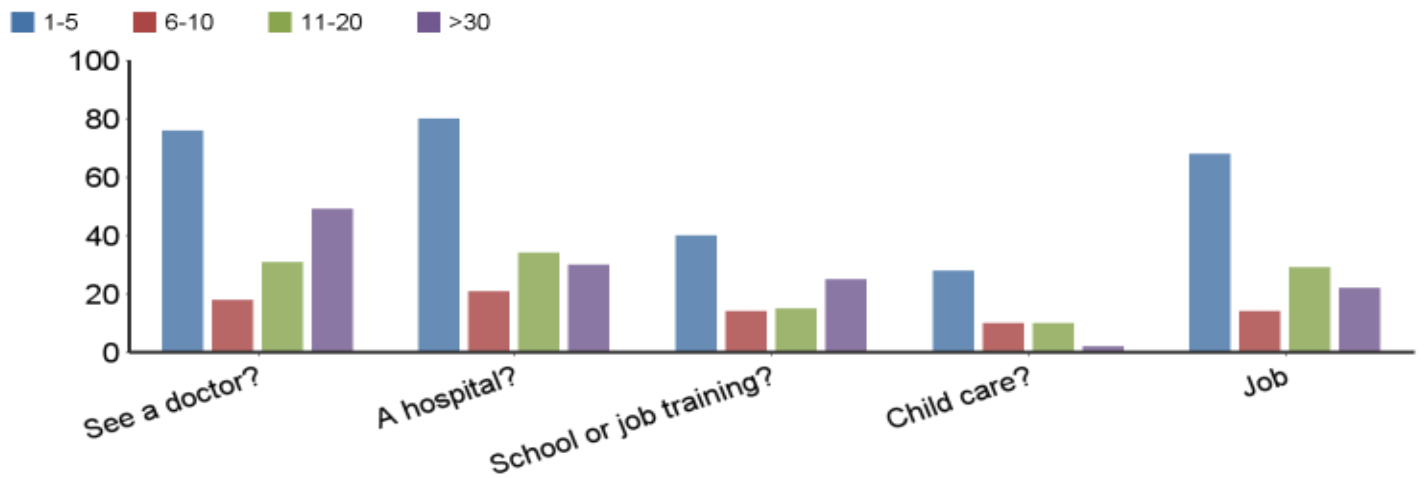
Are medical, dental or prescription co-pays a large enough problem that you postpone or go without services or prescriptions?



#	Answer	Bar	Response	%
1	Yes		56	33.14%
2	No		113	66.86%
	Total		169	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.67	0.22	0.47	169	169

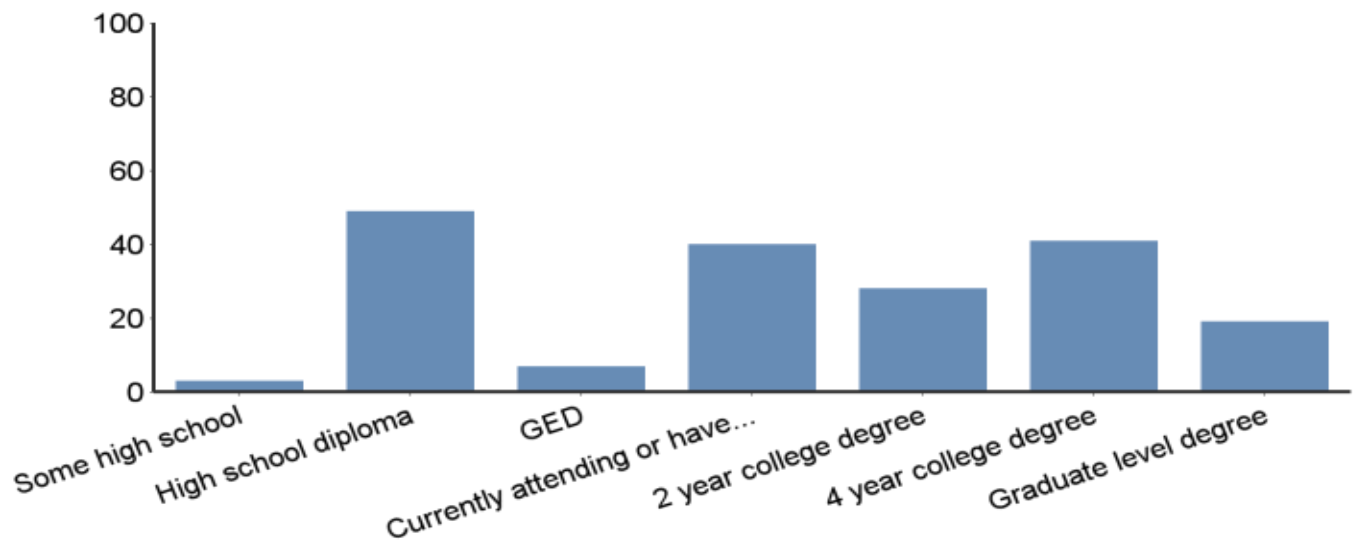
How many miles do you travel one way to:



#	Question	1-5	6-10	11-20	>30	Response	Average Value
1	See a doctor?	76	18	31	49	174	2.30
2	A hospital?	80	21	34	30	165	2.08
3	School or job training?	40	14	15	25	94	2.27
4	Child care?	28	10	10	2	50	1.72
5	Job	68	14	29	22	133	2.04

Statistic	See a doctor?	A hospital?	School or job training?	Child care?	Job
Min Value	1	1	1	1	1
Max Value	4	4	4	4	4
Mean	2.3	2.08	2.27	1.72	2.04
Variance	1.66	1.42	1.6	0.86	1.4
Standard Deviation	1.29	1.19	1.26	0.93	1.18
Total Responses	174	165	94	50	133
Total Respondents	174	165	94	50	133

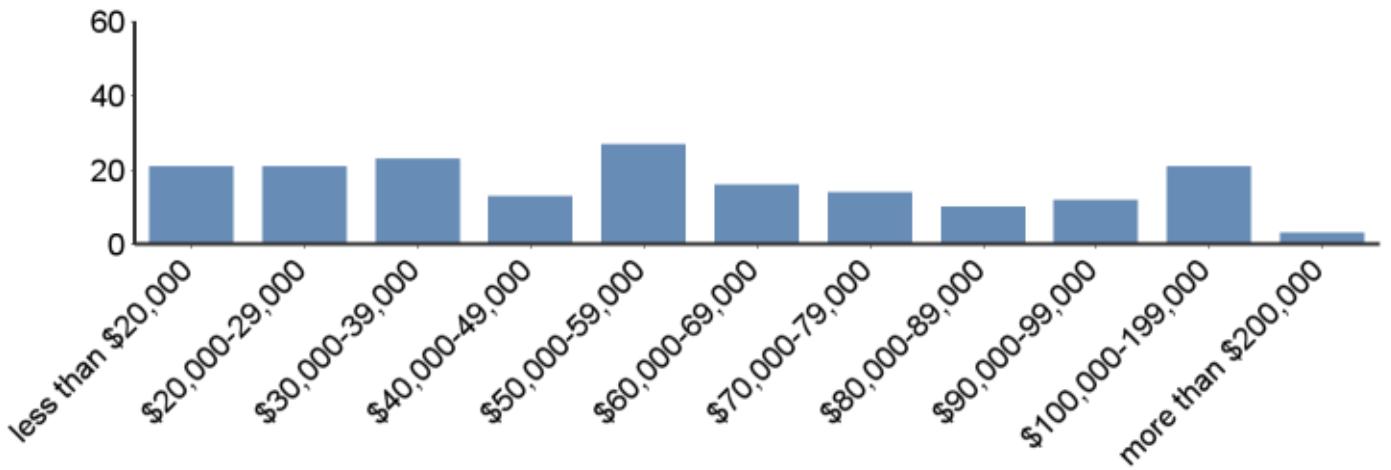
What is your highest level of education?



#	Answer	Bar	Response	%
1	Some high school		3	1.60%
2	High school diploma		49	26.20%
3	GED		7	3.74%
4	Currently attending or have some college		40	21.39%
5	2 year college degree		28	14.97%
6	4 year college degree		41	21.93%
7	Graduate level degree		19	10.16%
	Total		187	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	7	4.28	3.11	1.76	187	187

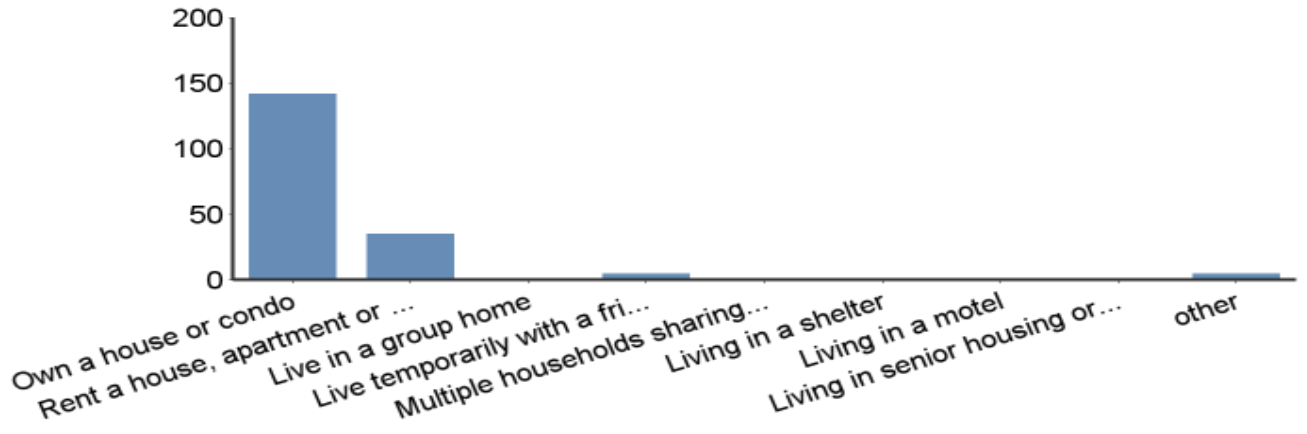
Counting all income sources from everyone in your household, what was the combined household income last year



#	Answer	Bar	Response	%
1	less than \$20,000		21	11.60%
2	\$20,000-29,000		21	11.60%
3	\$30,000-39,000		23	12.71%
4	\$40,000-49,000		13	7.18%
5	\$50,000-59,000		27	14.92%
6	\$60,000-69,000		16	8.84%
7	\$70,000-79,000		14	7.73%
8	\$80,000-89,000		10	5.52%
9	\$90,000-99,000		12	6.63%
10	\$100,000-199,000		21	11.60%
11	more than \$200,000		3	1.66%
	Total		181	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	11	5.22	8.94	2.99	181	181

How would you describe your housing situation?

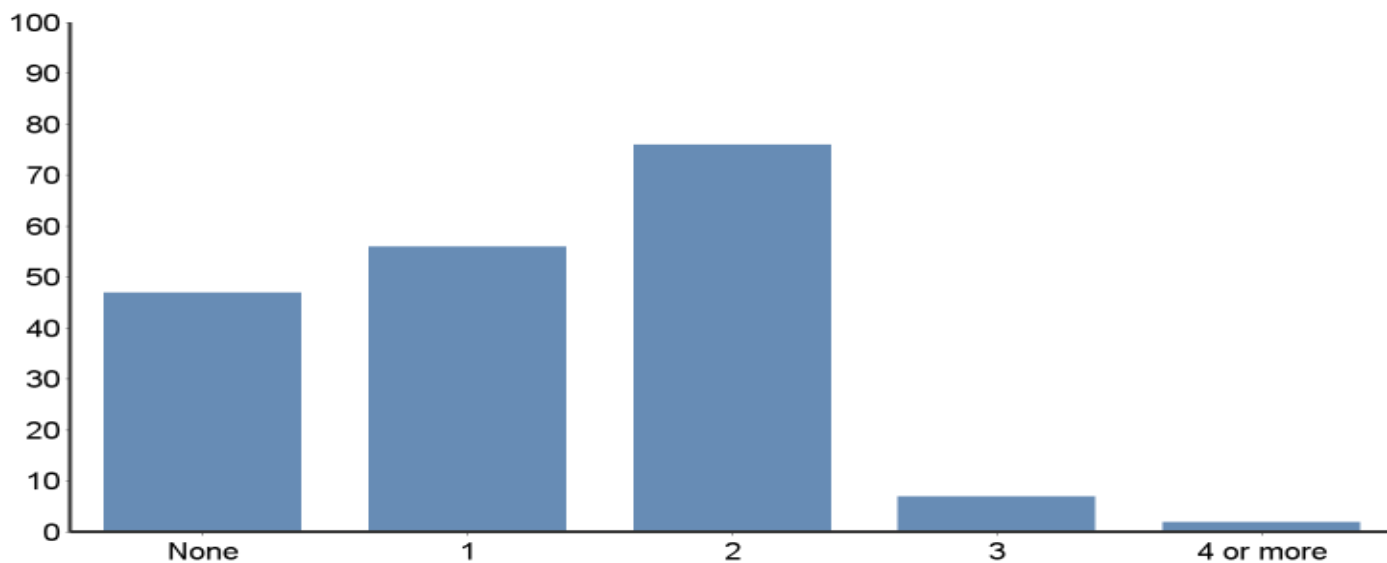


#	Answer	Bar	Response	%
1	Own a house or condo		142	75.94%
2	Rent a house, apartment or room		35	18.72%
3	Live in a group home		0	0.00%
4	Live temporarily with a friend or relative		5	2.67%
5	Multiple households sharing an apartment or house		0	0.00%
6	Living in a shelter		0	0.00%
7	Living in a motel		0	0.00%
8	Living in senior housing or assisted living		0	0.00%
9	other		5	2.67%
	Total		187	100.00%

other

buying house

Including yourself, how many adults (18+) in your household are employer full-time, year-round?



#	Answer	Bar	Response	%
1	None		47	25.00%
2	1		56	29.79%
3	2		76	40.43%
4	3		7	3.72%
5	4 or more		2	1.06%
	Total		188	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	5	2.26	0.84	0.91	188	188

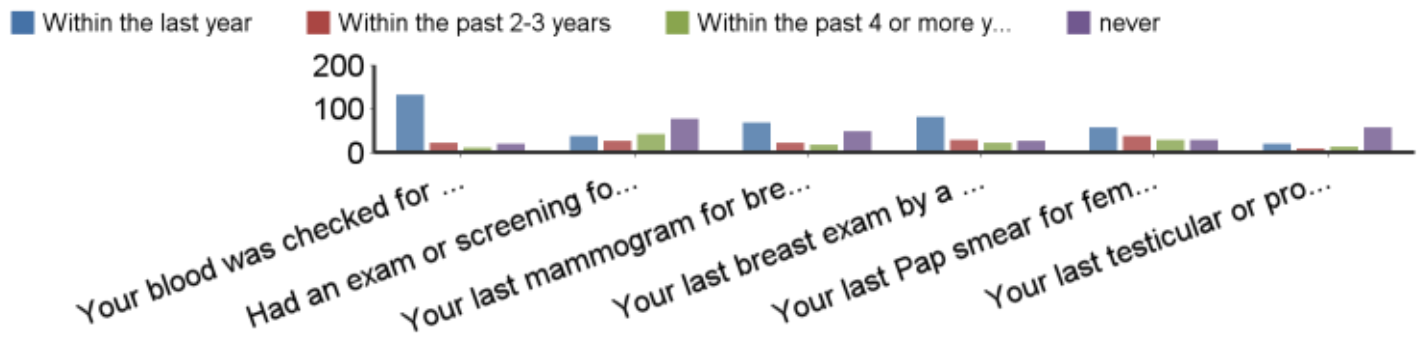
Household issues If any of the following have been a problem in your household during the PAST 12 MONTHS, please indicate how much of a problem it has been (Mark all that apply)

#	Question	Not a problem	Minor problem	Major problem	Response	Average Value
1	Adult substance abuse (alcohol or legal medication)	124	6	1	131	1.06
2	Adult substance abuse (illegal drugs)	126	4	2	132	1.06
3	Youth substance abuse (alcohol, drugs, etc)	126	1	-	127	1.01
4	Caring for an adult with disabilities	116	10	7	133	1.18
5	Caring for a child with disabilities	122	4	1	127	1.05
6	Child abuse	126	-	-	126	1.00
7	Physical violence against adults	127	-	1	128	1.02
8	Depression	92	32	11	135	1.40
9	Not having enough money for food	108	15	7	130	1.22
10	Not able to afford nutritious food (fresh fruits and vegetables)	104	18	11	133	1.30
11	Not able to afford transportation	118	10	5	133	1.15
12	Not having enough money to pay for housing	117	9	5	131	1.15
13	Not having enough money to pay the doctor, dentist or pharmacy	101	21	12	134	1.34
14	Not having enough money to pay for mental health counselor	116	9	4	129	1.13
15	Use of tobacco products	117	7	10	134	1.20
16	Not being able to find or afford after-school care	119	4	-	123	1.03
17	Sexual abuse	126	-	-	126	1.00
18	Teen pregnancy	124	1	-	125	1.01
19	Other issues	65	-	2	67	1.06

Other issues

Getting appointments without sacrificing work
 copays, rx copays
 surgery costs

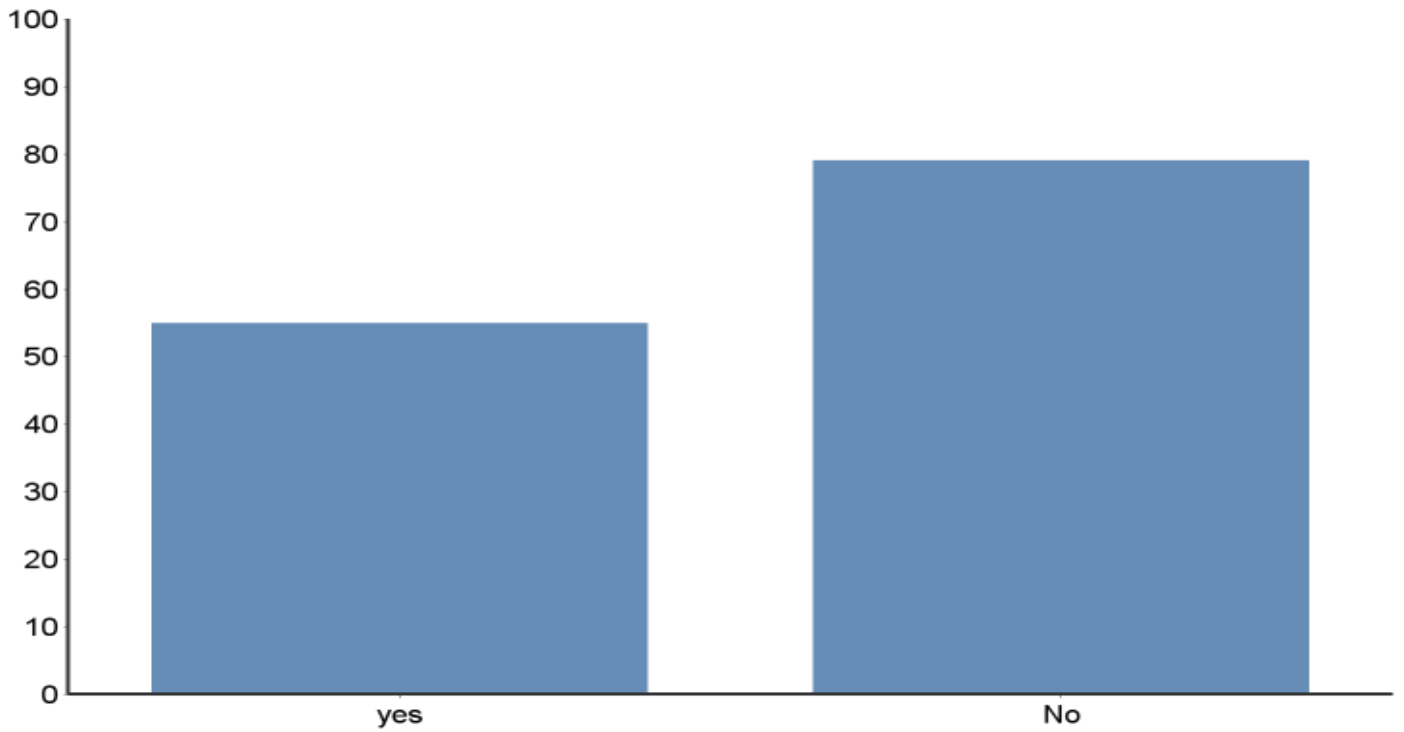
About how long has it been since:



#	Question	Within the last	Within the past 2-3 years	Within the past 4 or more years	never	Response	Average Value
1	Your blood was checked for diabetes	132	21	10	19	182	1.54
2	Had an exam or screening for colon cancer	37	26	42	76	181	2.87
3	Your last mammogram for breast cancer	68	23	17	48	156	2.29
4	Your last breast exam by a doctor or nurse	82	28	22	27	159	1.96
5	Your last Pap smear for female-related cancers?	57	38	29	28	152	2.18
6	Your last testicular or prostate exam?	20	8	14	58	100	3.10

Statistic	Your blood was checked for diabetes	Had an exam or screening for colon cancer	Your last mammogram for breast cancer	Your last breast exam by a doctor or nurse	Your last Pap smear for female-related cancers?	Your last testicular or prostate exam?
Min Value	1	1	1	1	1	1
Max Value	4	4	4	4	4	4
Mean	1.54	2.87	2.29	1.96	2.18	3.1
Variance	0.99	1.37	1.7	1.34	1.28	1.46
Standard Deviation	1	1.17	1.31	1.16	1.13	1.21
Total Responses	182	181	156	159	152	100
Total Respondents	182	181	156	159	152	100

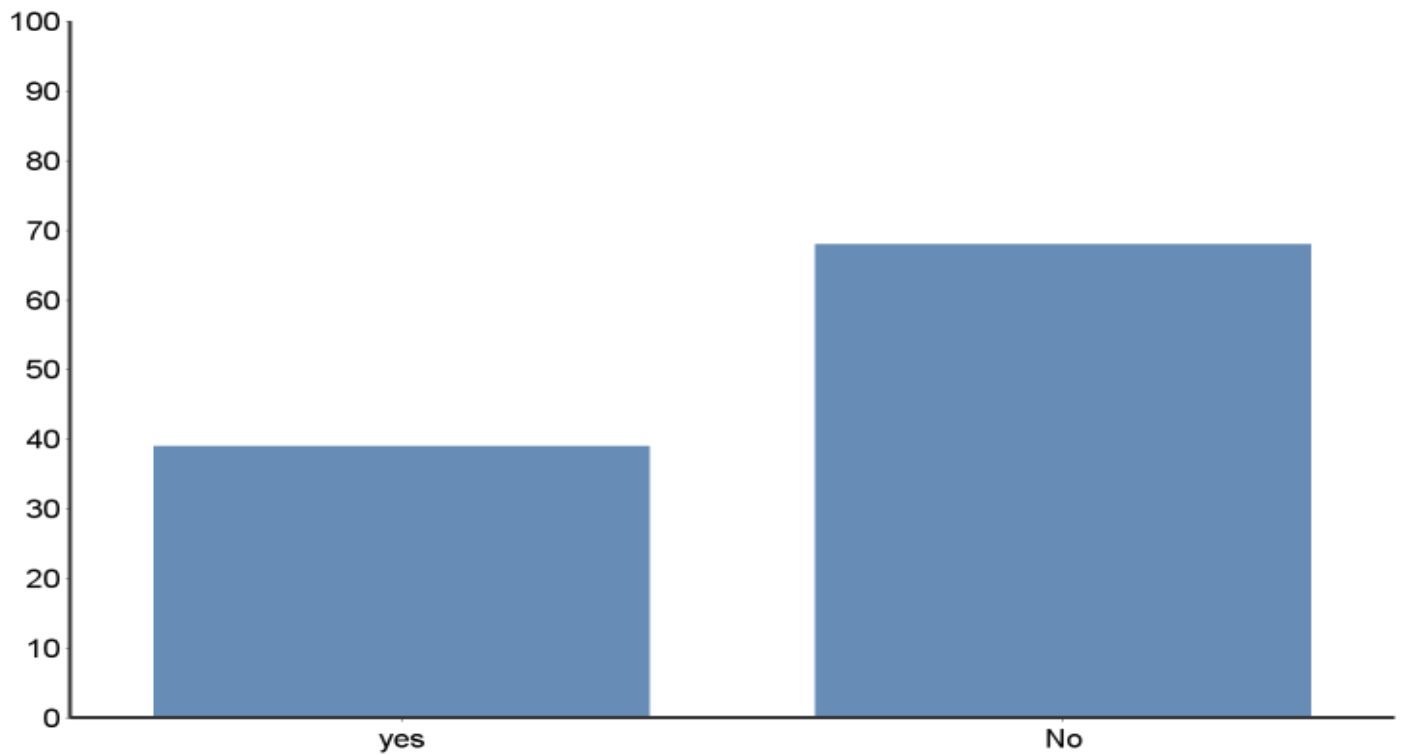
Do you currently use the available walking trails in Lamar, Golden City and Liberal?





#	Answer	Bar	Response	%
1	yes		55	41.04%
2	No		79	58.96%
	Total		134	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.59	0.24	0.49	134	134

Has your use of the walking trails increased in the last two years?



#	Answer	Bar	Response	%
1	yes		39	36.45%
2	No		68	63.55%
	Total		107	100.00%

Min Value	Max Value	Average Value	Variance	Standard Deviation	Total Responses	Total Respondents
1	2	1.64	0.23	0.48	107	107

**Appendix B
Secondary Data**

Total Population

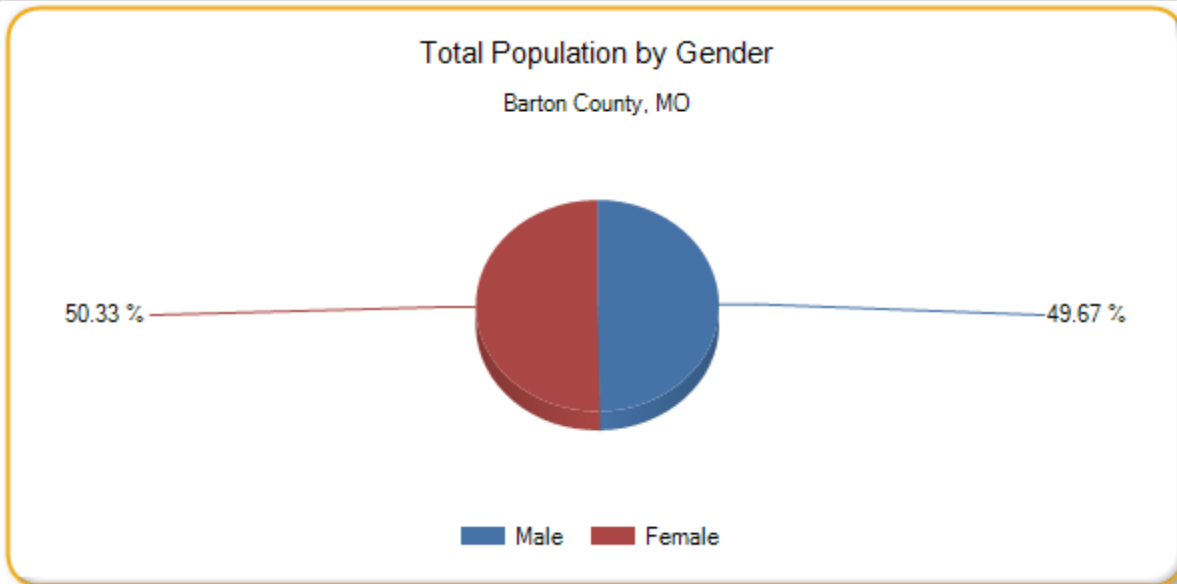
A total of 12,428 people live in the 591.76 square mile report area defined for this assessment according to the U.S. Census Bureau American Community Survey 2008-12 5-year estimates. The population density for this area, estimated at 21 persons per square mile, is less than the national average population density of 87.55 persons per square mile.

Report Area	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
Barton County, MO	12,428	591.76	21
Missouri	5,982,413	68,723.35	87.05
United States	309,138,709	3,530,997.6	87.55

Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Total Population by Gender

Report Area	Male	Female	Percent Male	Percent Female
Barton County, MO	6,173	6,255	49.67%	50.33%
Missouri	2,929,988	3,052,425	48.98%	51.02%
United States	152,018,800	157,119,904	49.17%	50.83%

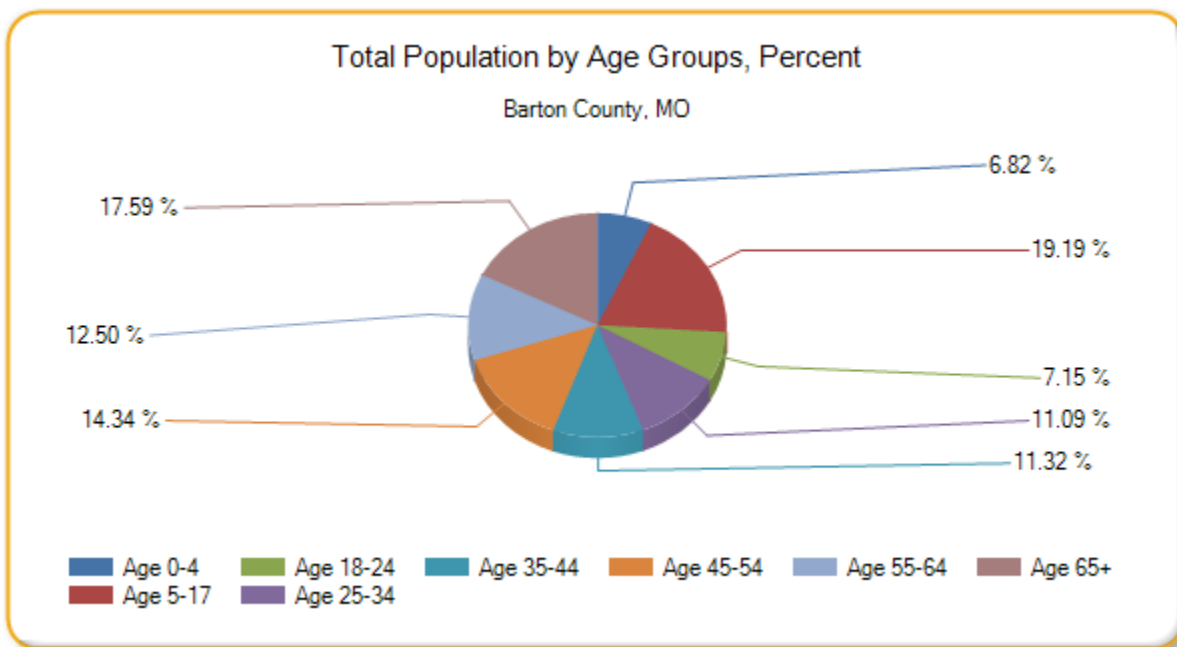


Total Population by Age Groups, Total

Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65
Barton County, MO	847	2,385	889	1,378	1,407	1,782	1,554	2,186
Missouri	385,372	1,033,023	590,404	775,601	751,724	877,179	725,638	843,472
United States	20,137,884	53,841,976	30,822,834	41,184,288	41,227,504	44,646,976	36,605,800	40,671,440

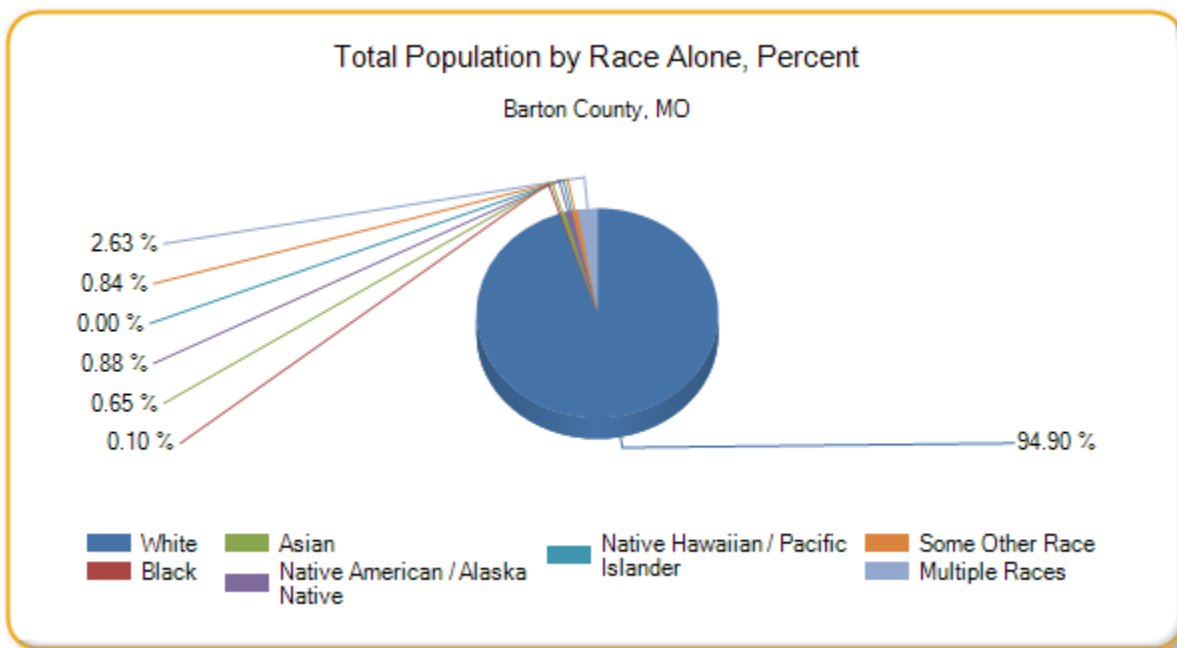
Total Population by Age Groups, Percent

Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65
Barton County, MO	6.82%	19.19%	7.15%	11.09%	11.32%	14.34%	12.5%	17.59%
Missouri	6.44%	17.27%	9.87%	12.96%	12.57%	14.66%	12.13%	14.1%
United States	6.51%	17.42%	9.97%	13.32%	13.34%	14.44%	11.84%	13.16%



Total Population by Race Alone, Percent

Report Area	White	Black	Asian	Native American / Alaska Native	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Races
Barton County, MO	94.9%	0.1%	0.65%	0.88%	0%	0.84%	2.63%
Missouri	83.12%	11.53%	1.61%	0.38%	0.1%	1.03%	2.24%
United States	74.17%	12.56%	4.81%	0.82%	0.17%	4.79%	2.68%



Population Age 65

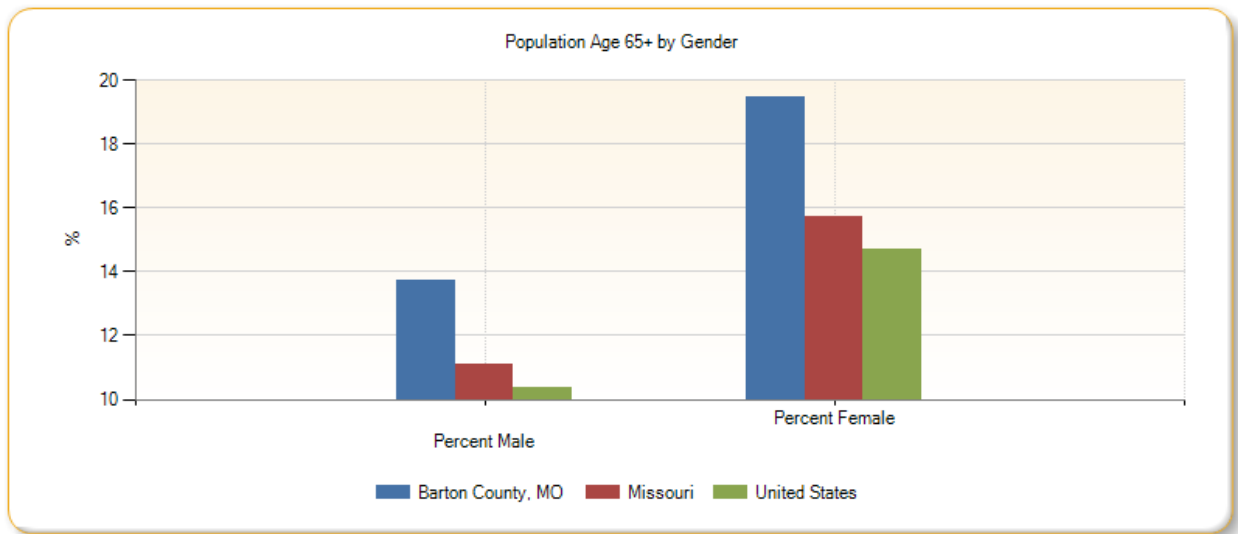
An estimated 17.59% percent of the population in the report area are at or over the age of 65, according to the U.S. Census Bureau American Community Survey 2008-12 5-year estimates. An estimated total of 2,186 older adults resided in the area during this time period. The number of persons age 65 or older is relevant because this population has unique health needs which should be considered separately from other age groups.

Report Area	Total Population	Population Age 65	Percent Population Age 65
Barton County, MO	12,428	2,186	17.59%
Missouri	5,982,413	843,472	14.1%
United States	309,138,720	40,671,440	13.16%

Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Population Age 65 by Gender

Report Area	Total Male	Total Female	Percent Male	Percent Female
Barton County, MO	847	1,217	13.72%	19.46%
Missouri	325,637	480,239	11.11%	15.73%
United States	15,754,421	23,115,796	10.36%	14.71%



Median Age

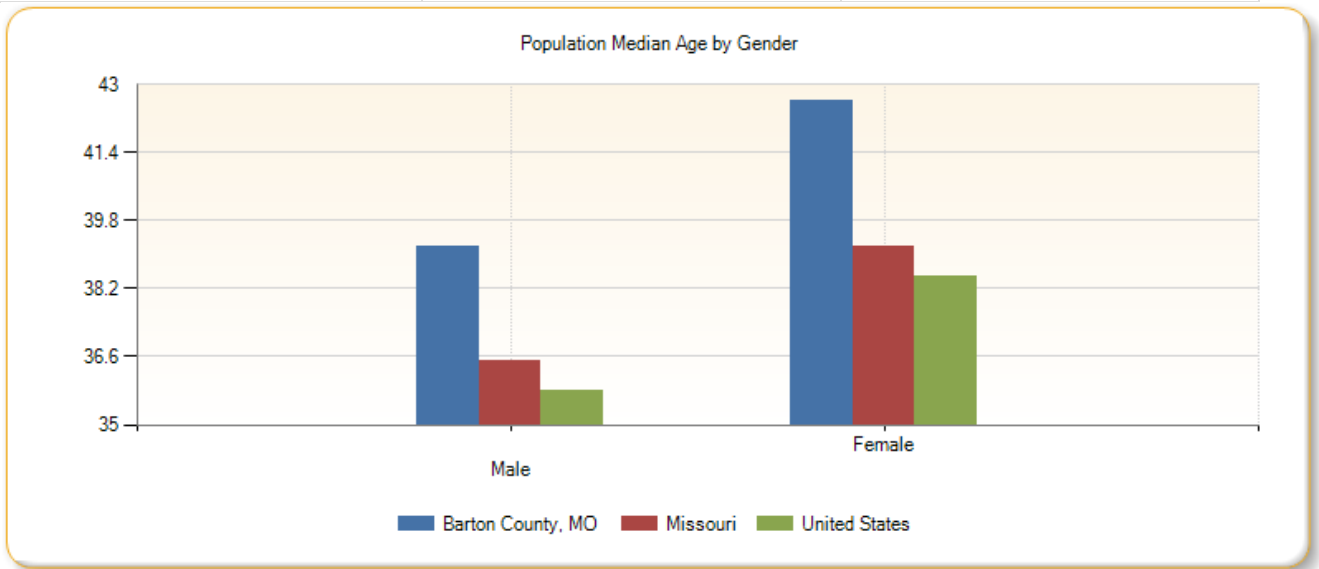
This indicator reports population median age based on the 5-year American Community Survey estimate.

Report Area	Total Population	Median Age
Barton County, MO	12,428	40.5
Missouri	5,982,413	37.9
United States	309,138,720	37.2

Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Population Median Age by Gender

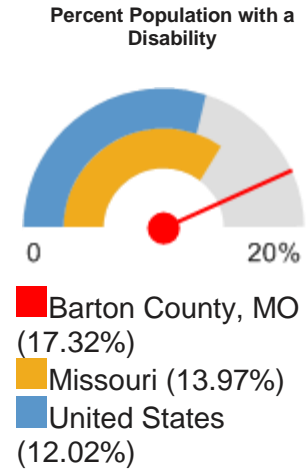
Report Area	Male	Female
Barton County, MO	39.2	42.6
Missouri	36.5	39.2
United States	35.8	38.5



Population with Any Disability

This indicator reports the percentage of the total civilian noninstitutionalized population with a disability. This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

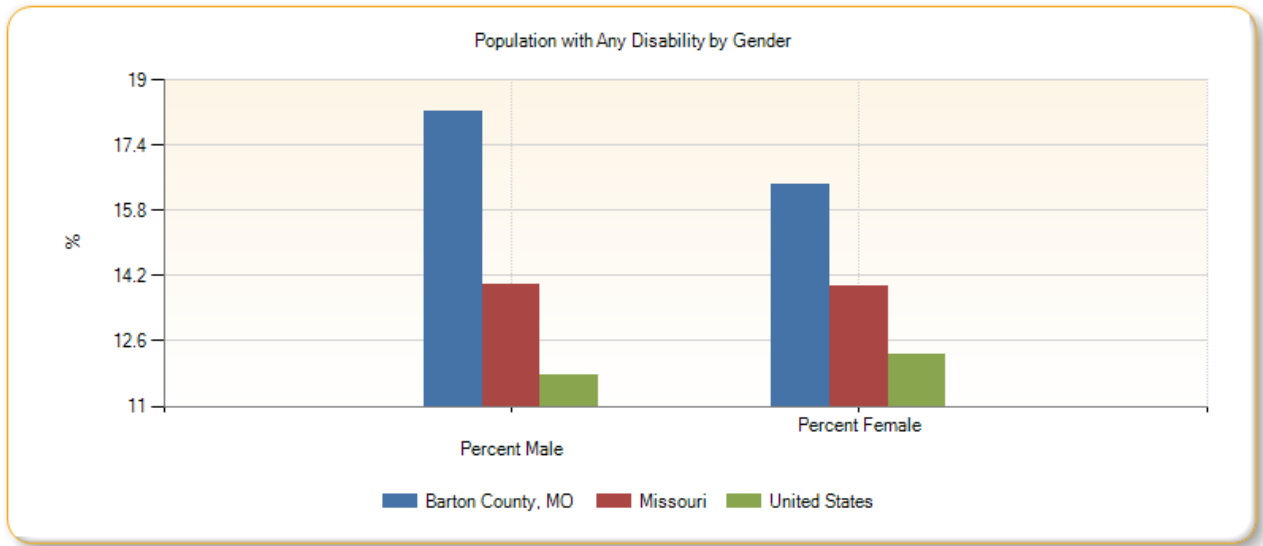
Report Area	Total Population (For Whom Disability Status Is Determined)	Total Population with a Disability	Percent Population with a Disability
Barton County, MO	12,347	2,139	17.32%
Missouri	5,867,503	819,802	13.97%
United States	303,984,256	36,551,036	12.02%



Note: This indicator is compared with the state average.
Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

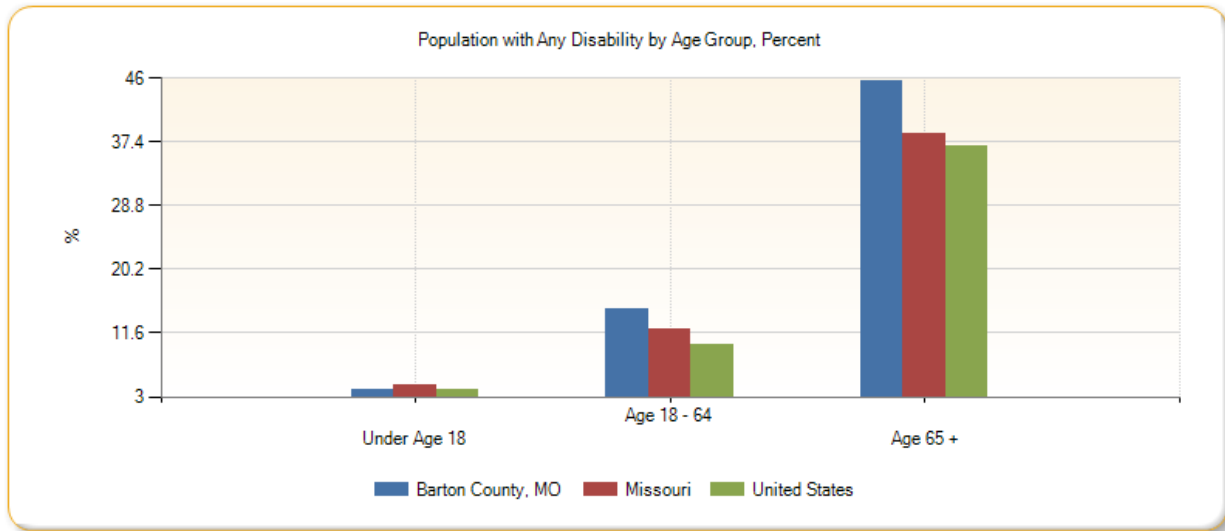
Population with Any Disability by Gender

Report Area	Total Male	Total Female	Percent Male	Percent Female
Barton County, MO	1,118	1,021	18.24%	16.42%
Missouri	399,250	420,552	13.98%	13.96%
United States	17,460,136	19,090,904	11.77%	12.26%



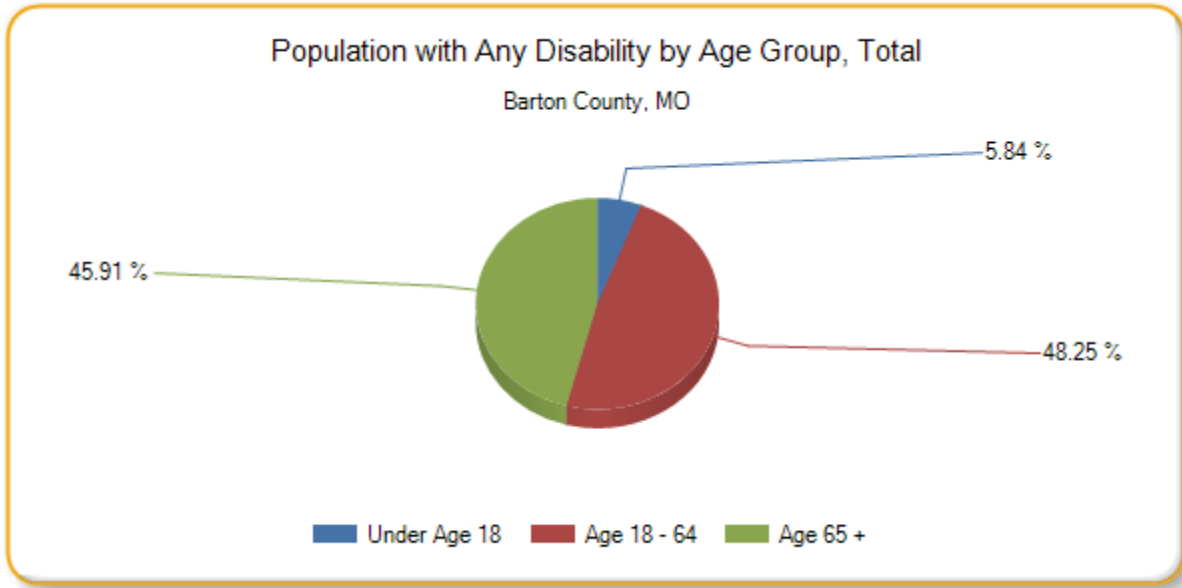
Population with Any Disability by Age Group, Percent

Report Area	Under Age 18	Age 18 - 64	Age 65
Barton County, MO	3.89%	14.78%	45.59%
Missouri	4.65%	12.16%	38.53%
United States	4%	10.03%	36.76%



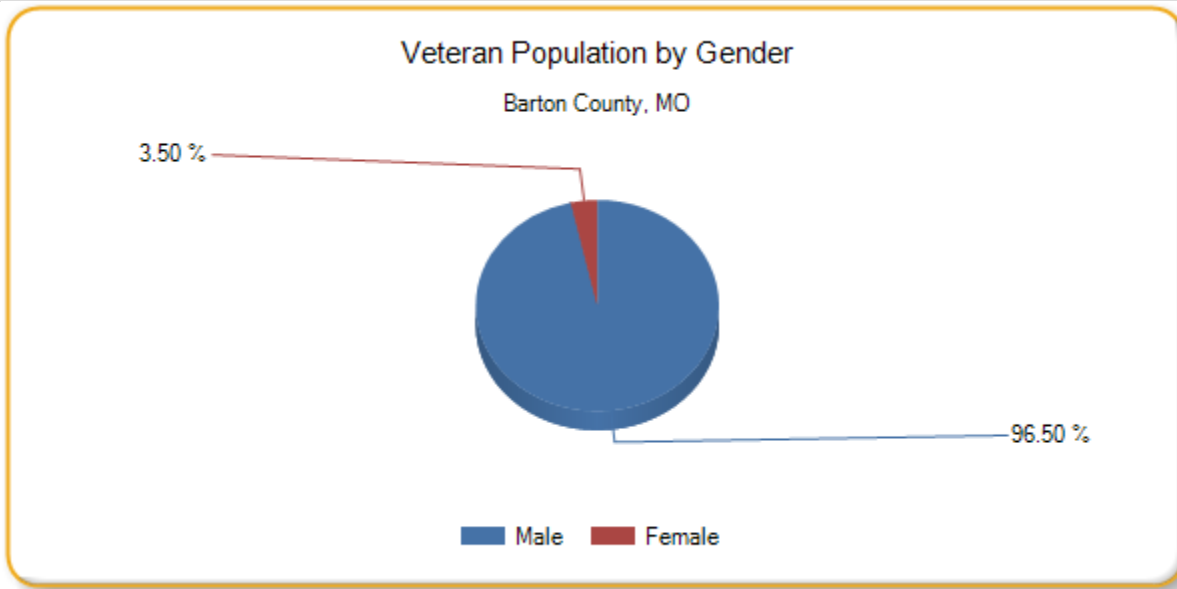
Population with Any Disability by Age Group, Total

Report Area	Under Age 18	Age 18 - 64	Age 65
Barton County, MO	125	1,032	982
Missouri	65,812	443,610	310,380
United States	2,952,899	19,128,854	14,469,285



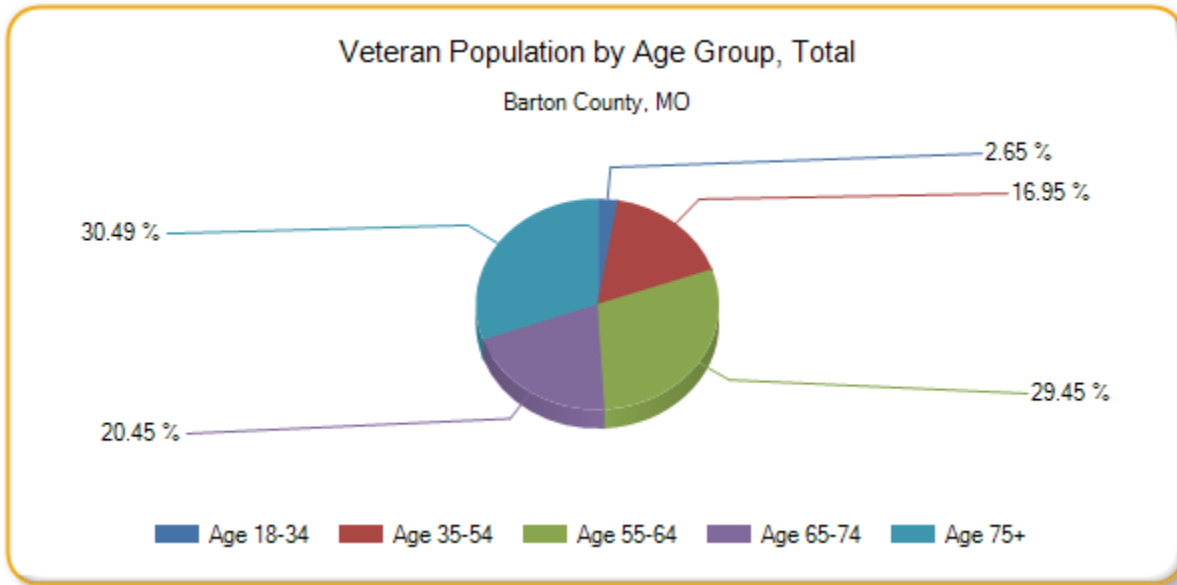
Veteran Population by Gender

Report Area	Male	Female	Percent Male	Percent Female
Barton County, MO	1,019	37	22.86%	0.78%
Missouri	463,857	31,019	21.21%	1.32%
United States	20,306,044	1,547,868	17.94%	1.28%



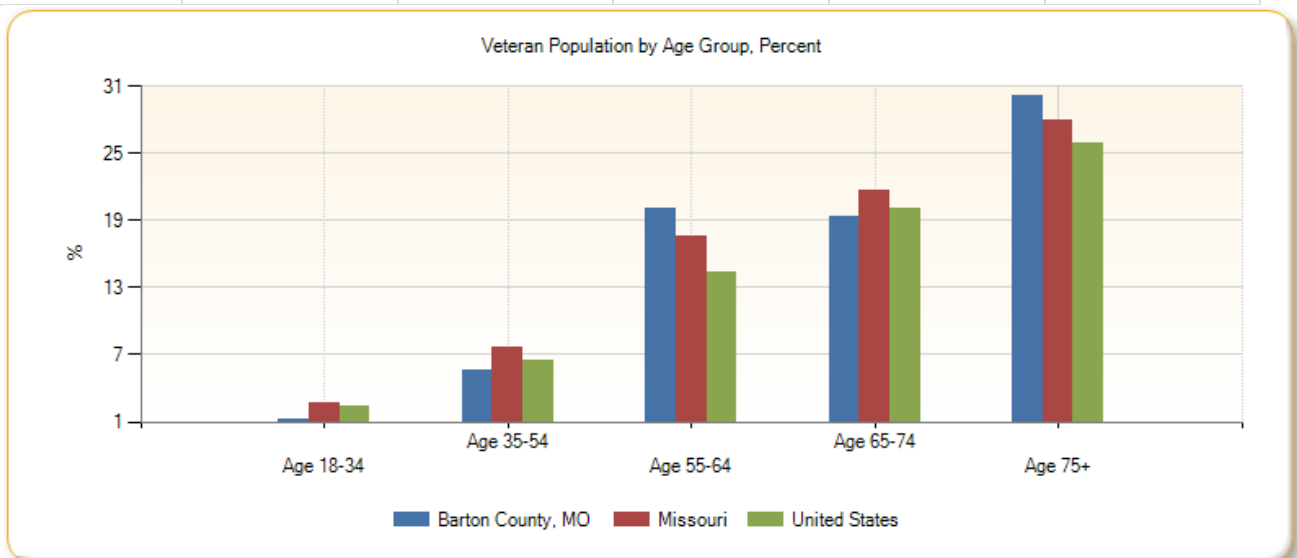
Veteran Population by Age Group, Total

Report Area	Age 18-34	Age 35-54	Age 55-64	Age 65-74	Age 75
Barton County, MO	28	179	311	216	322
Missouri	35,269	125,212	127,320	98,507	108,568
United States	1,730,597	5,582,366	5,281,863	4,413,347	4,845,739



Veteran Population by Age Group, Percent

Report Area	Age 18-34	Age 35-54	Age 55-64	Age 65-74	Age 75
Barton County, MO	1.24%	5.62%	20.01%	19.29%	30.21%
Missouri	2.61%	7.71%	17.55%	21.67%	27.92%
United States	2.43%	6.52%	14.43%	20.05%	25.97%



Urban and Rural Population

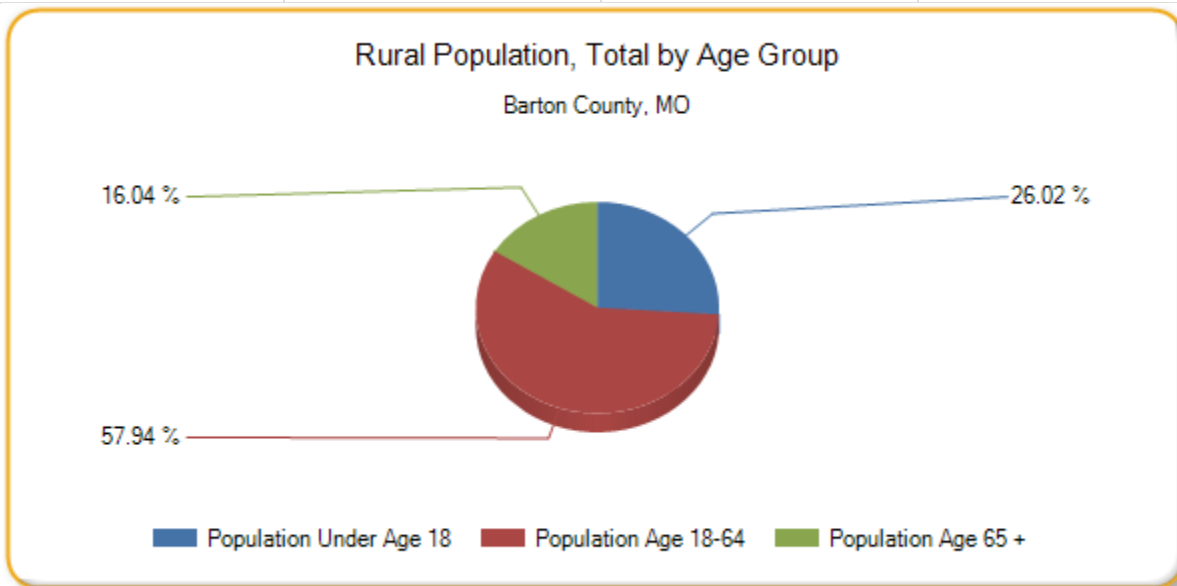
This indicator reports the percentage of population living in urban and rural areas. Urban areas are identified using population density, count, and size thresholds. Urban areas also include territory with a high degree of impervious surface (development). Rural areas are all areas that are not urban.

Report Area	Total Population	Urban Population	Rural Population	Percent Urban	Percent Rural
Barton County, MO	12,402	4,470	7,932	36.04%	63.96%
Missouri	5,988,927	4,218,371	1,770,556	70.44%	29.56%
United States	312,471,327	252,746,527	59,724,800	80.89%	19.11%

Data Source: US Census Bureau, [Decennial Census](#). Source geography: Tract

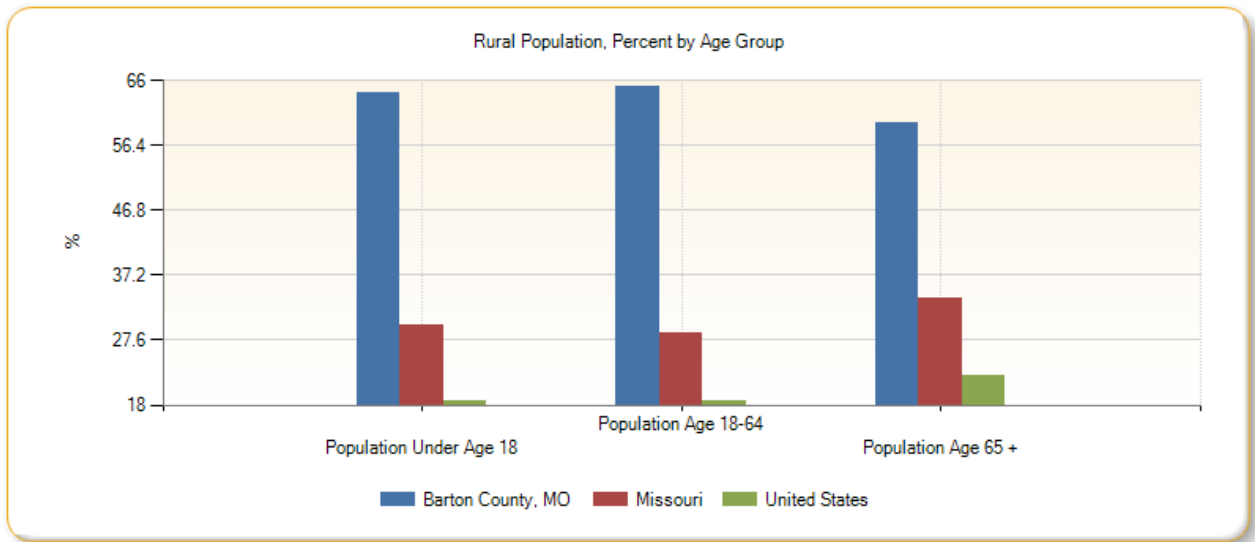
Rural Population, Total by Age Group

Report Area	Population Under Age 18	Population Age 18-64	Population Age 65
Barton County, MO	2,064	4,596	1,272
Missouri	423,970	1,063,115	283,471
United States	13,907,394	36,734,957	9,082,449



Rural Population, Percent by Age Group

Report Area	Population Under Age 18	Population Age 18-64	Population Age 65
Barton County, MO	64.22%	65.14%	59.66%
Missouri	29.74%	28.54%	33.82%
United States	18.52%	18.69%	22.26%

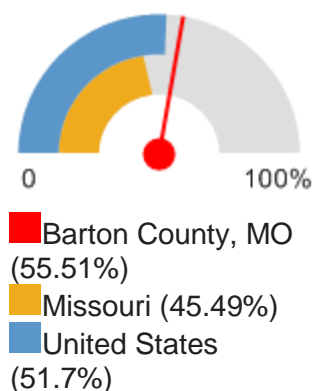


Children Eligible for Free/Reduced Price Lunch

Within the report area 1,138 public school students or 55.51% are eligible for Free/Reduced Price lunch out of 2,050 total students enrolled. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs. Additionally, when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

Report Area	Total Students	Number Free/Reduced Price Lunch Eligible	Percent Free/Reduced Price Lunch Eligible
Barton County, MO	2,050	1,138	55.51%
Missouri	913,399	408,726	45.49%
United States	49,936,793	25,615,437	51.7%

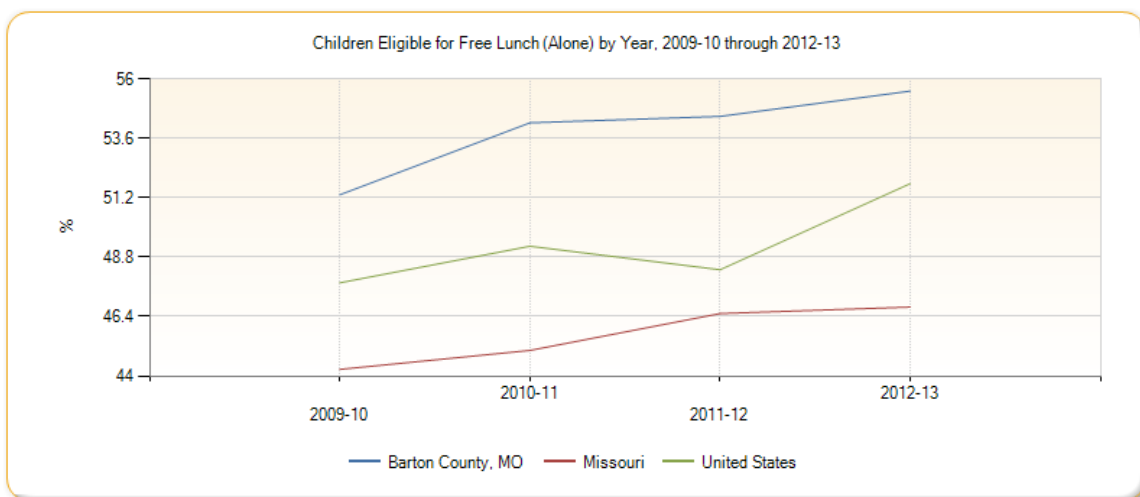
Percent Students Eligible for Free or Reduced Price Lunch



Note: This indicator is compared with the state average.
 Data Source: National Center for Education Statistics, [NCES - Common Core of Data](#). Source geography: Address

Children Eligible for Free Lunch (Alone) by Year, 2009-10 through 2012-13

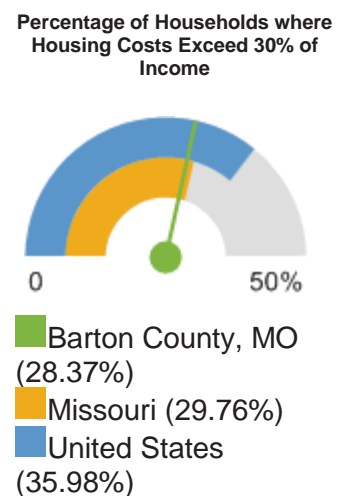
Report Area	2009-10	2010-11	2011-12	2012-13
Barton County, MO	51.32%	54.23%	54.49%	55.51%
Missouri	44.26%	45.03%	46.52%	46.78%
United States	47.76%	49.24%	48.29%	51.77%



Cost Burdened Households (30%)

This indicator reports the percentage of the households where housing costs exceed 30% of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.

Report Area	Total Households	Cost Burdened Households (Housing Costs Exceed 30% of Income)	Percentage of Cost Burdened Households (Over 30% of Income)
Barton County, MO	4,932	1,399	28.37%
Missouri	2,358,270	701,876	29.76%
United States	115,226,800	41,455,168	35.98%

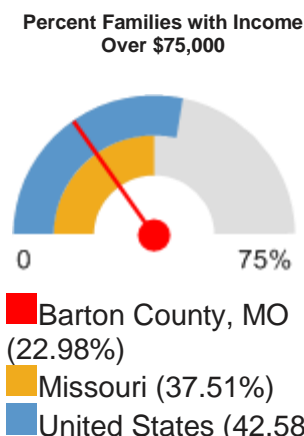


Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Families with Income Over \$75,000

In the report area, 22.98%, or 801 families report a total annual income of \$75,000 or greater. Total income includes all reported income from wages and salaries as well as income from self-employment, interest or dividends, public assistance, retirement, and other sources.

Report Area	Total Families	Families with Income Over \$75,000	Percent Families with Income Over \$75,000
Barton County, MO	3,485	801	22.98%
Missouri	1,543,528	579,003	37.51%
United States	76,595,552	32,616,244	42.58%

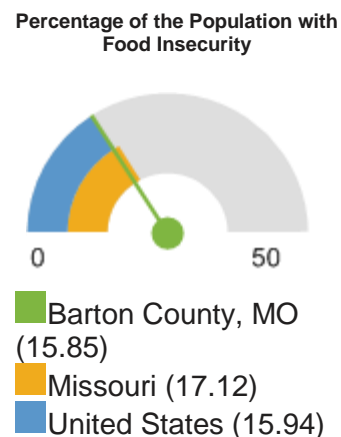


Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Food Insecurity Rate

This indicator reports the estimated percentage of the population that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

Report Area	Total Population	Food Insecure Population, Total	Food Insecure Population, Percent
Barton County, MO	12,428	1,970	15.85%
Missouri	6,021,988	1,031,030	17.12%
United States	313,281,717	49,943,940	15.94%



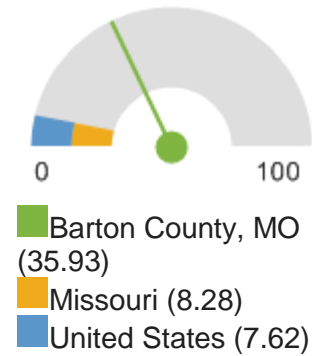
Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
 Data Source: [Feeding America](#). Source geography: County

Head Start

This indicator reports data on overcrowded housing from the latest 5-year American Community Survey. The Census Bureau has no official definition of crowded units, but this report considers units with more than one occupant

Report Area	Total Children Under Age 5	Total Head Start Programs	Head Start Programs, Rate (Per 1,000 Children)
Barton County, MO	835	3	35.93
Missouri	390,237	377	8.28
United States	20,426,118	17,442	7.62

Head Start Programs Rate (Per 1,000 Children Under Age 5)



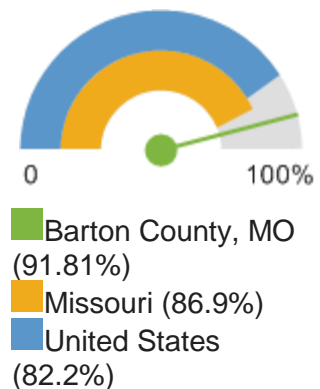
Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
 Data Source: US Department of Health & Human Services, [Administration for Children and Families](#). Source geography: Point

High School Graduation Rate (EdFacts)

Within the report area 91.81% of students are receiving their high school diploma within four years. This indicator is relevant because research suggests education is one the strongest predictors of health ([Freudenberg & Ruglis, 2007](#)).

Report Area	Total Student Cohort	Estimated Number of Diplomas Issued	Cohort Graduation Rate
Barton County, MO	147	135	91.81
Missouri	66,138	57,469	86.9
United States	3,351,452	2,754,352	82.2

Cohort Graduation Rate

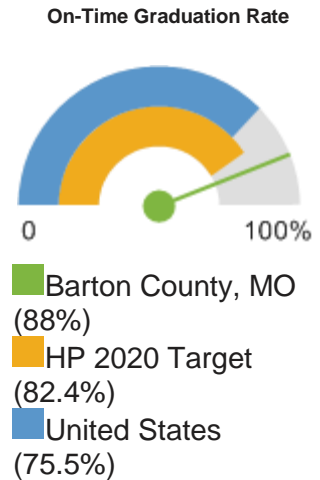


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
 Data Source: US Department of Education, [EDFacts](#). Accessed via [DATA.GOV](#). Additional data analysis by [CARES](#). Source geography: School District

High School Graduation Rate (NCES)

Within the report area 88% of students are receiving their high school diploma within four years. This is greater than the Healthy People 2020 target of 82.4%. This indicator is relevant because research suggests education is one the strongest predictors of health ([Freudenberg & Ruglis, 2007](#)).

Report Area	Average Freshman Base Enrollment	Estimated Number of Diplomas Issued	On-Time Graduation Rate
Barton County, MO	180	158	88
Missouri	75,801	62,969	83.1
United States	4,024,345	3,039,015	75.5
HP 2020 Target			>=82.4

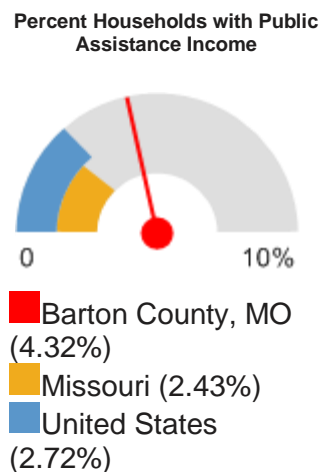


Note: This indicator is compared with the Healthy People 2020 Target. Data breakout by demographic groups are not available.

Data Source: National Center for Education Statistics, [NCES - Common Core of Data](#). Source geography: County

Households Receiving Public Assistance Income

Report Area	Total Households	Households with Public Assistance Income	Percent Households with Public Assistance Income
Barton County, MO	4,932	213	4.32%
Missouri	2,358,270	57,255	2.43%
United States	115,226,800	3,132,921	2.72%

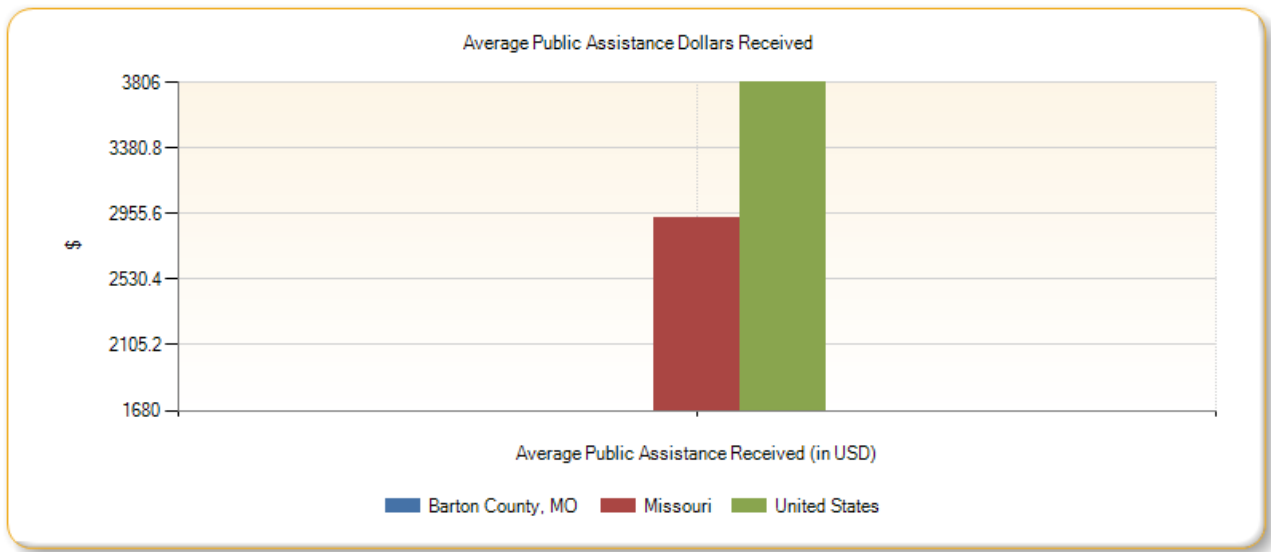


Note: This indicator is compared with the state average.

Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Average Public Assistance Dollars Received

Report Area	Total Households Receiving Public Assistance Income	Aggregate Public Assistance Dollars Received	Average Public Assistance Received (in USD)
Barton County, MO	213	358,000	\$1,680
Missouri	57,255	167,840,896	\$2,931
United States	3,132,921	11,926,642,688	\$3,806

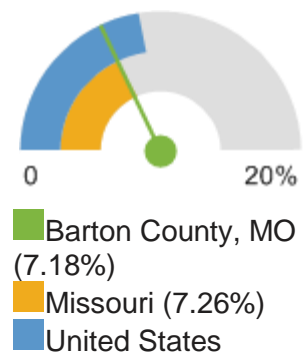


Households with No Motor Vehicle

This indicator reports the number and percentage of households with no motor vehicle based on the latest 5-year American Community Survey estimates.

Report Area	Total Occupied Households	Households with No Motor Vehicle	Percentage of Households with No Motor Vehicle
Barton County, MO	4,932	354	7.18%
Missouri	2,358,270	171,138	7.26%
United States	115,226,800	10,405,375	9.03%

Percentage of Households with No Motor Vehicle



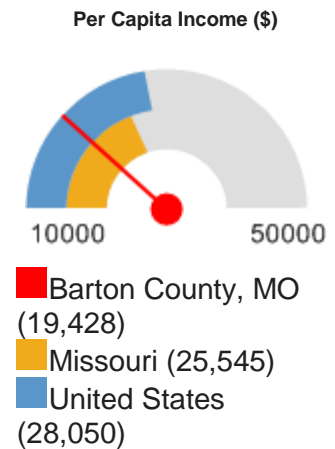
Note: This indicator is compared with the state average.

Data Source: US Census Bureau, [American Community Survey](#). Source (9.03%)
 geography: Tract

Income Per Capita

The per capita income for the report area is \$19,428. This includes all reported income from wages and salaries as well as income from self-employment, interest or dividends, public assistance, retirement, and other sources. The per capita income in this report area is the average (mean) income computed for every man, woman, and child in the specified area.

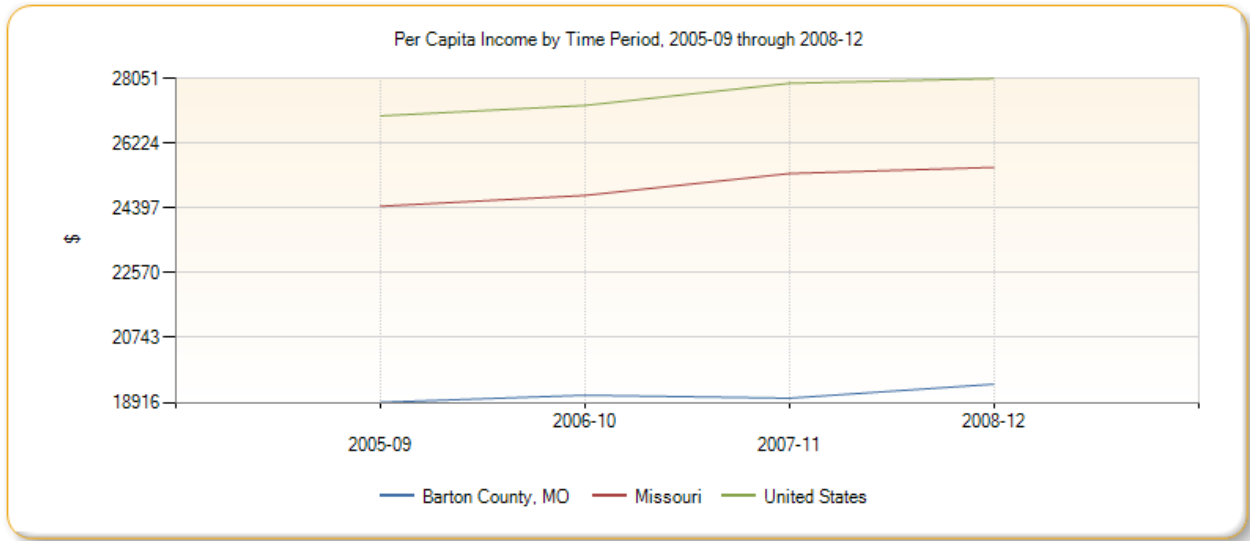
Report Area	Total Population	Total Income (\$)	Per Capita Income (\$)
Barton County, MO	12,428	\$241,458,704	\$19,428
Missouri	5,982,413	\$152,824,676,352	\$25,545
United States	309,138,720	\$8,671,497,551,872	\$28,050



Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Per Capita Income by Time Period, 2005-09 through 2008-12

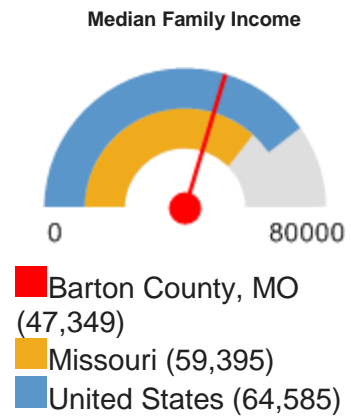
Report Area	2005-09	2006-10	2007-11	2008-12
Barton County, MO	\$18,916.42	\$19,117.16	\$19,035.53	\$19,428.61
Missouri	\$24,447.5	\$24,754.22	\$25,370.65	\$25,545.66
United States	\$26,997.54	\$27,293.32	\$27,915.03	\$28,050.51



Median Family Income

This indicator reports median household income based on the latest 5-year American Community Survey estimates. This includes the incomes of all members 15 years old and over who are related to the householder.

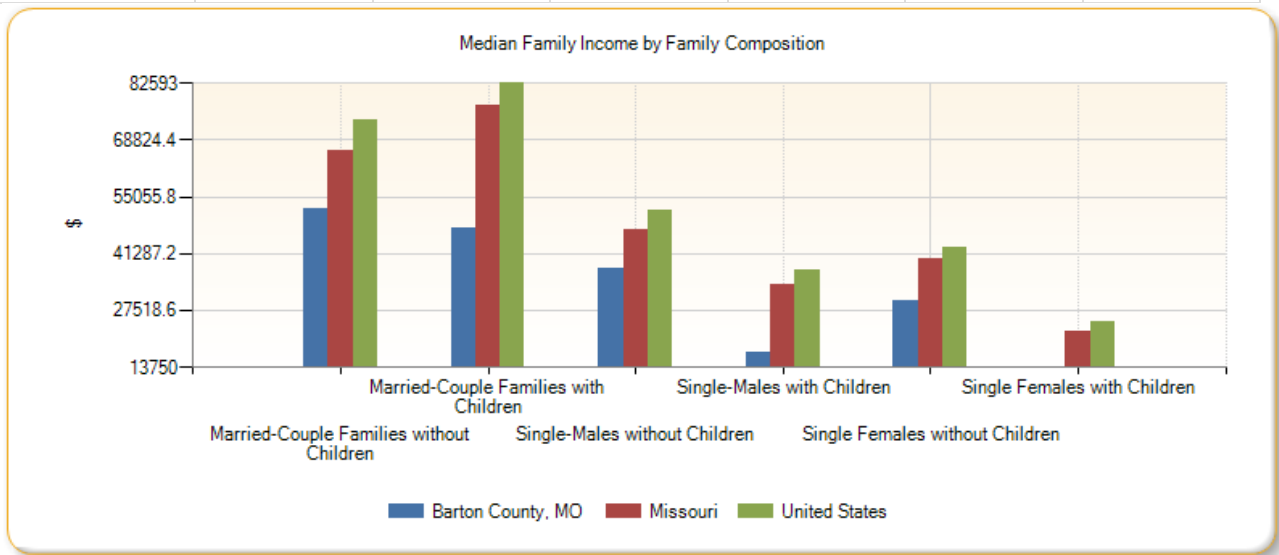
Report Area	Total Family Households	Median Family Income
Barton County, MO	3,485	\$47,349
Missouri	1,543,528	\$59,395
United States	76,595,552	\$64,585



Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#).
 Source geography: Tract

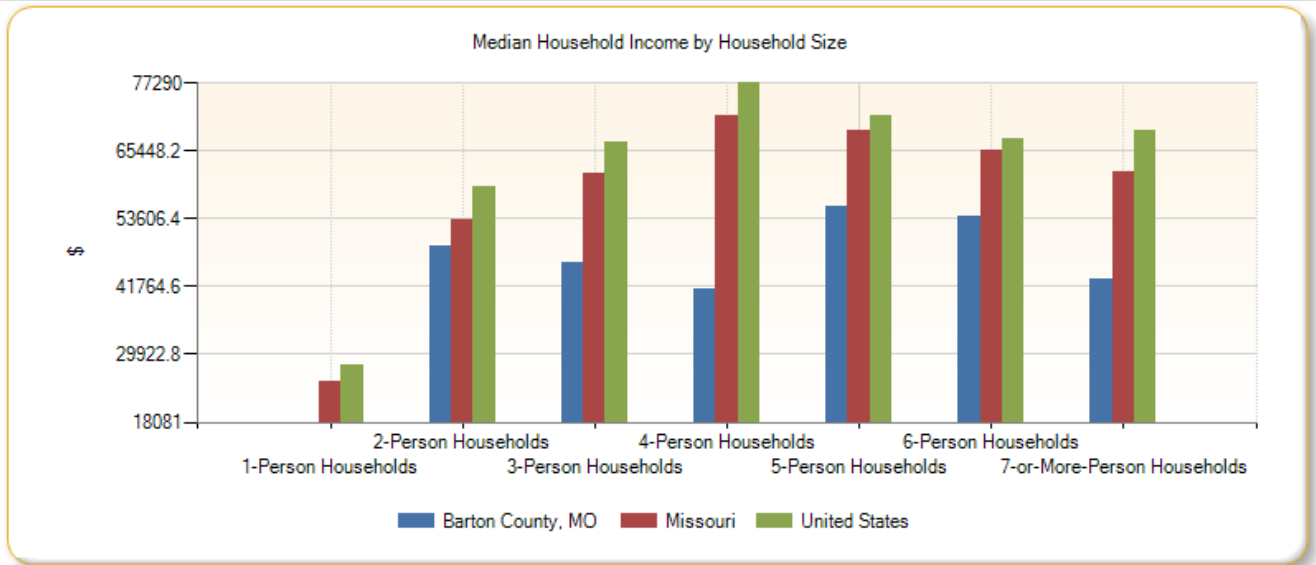
Median Family Income by Family Composition

Report Area	Married-Couple Families without Children	Married-Couple Families with Children	Single-Males without Children	Single-Males with Children	Single Females without Children	Single Females with Children
Barton County, MO	\$52,021	\$47,386	\$37,625	\$17,419	\$30,000	\$13,750
Missouri	\$66,073	\$77,230	\$47,165	\$33,813	\$39,962	\$22,311
United States	\$73,848	\$82,593	\$51,610	\$37,117	\$42,737	\$24,617



Median Household Income by Household Size

Report Area	1-Person Households	2-Person Households	3-Person Households	4-Person Households	5-Person Households	6-Person Households	7-or-More-Person Households
Barton County, MO	\$18,081	\$48,803	\$45,865	\$41,250	\$55,781	\$53,958	43,036\$
Missouri	\$25,168	\$53,412	\$61,354	\$71,688	\$68,868	\$65,487	61,693\$
United States	\$27,992	\$59,252	\$66,941	\$77,290	\$71,715	\$67,489	69,067\$

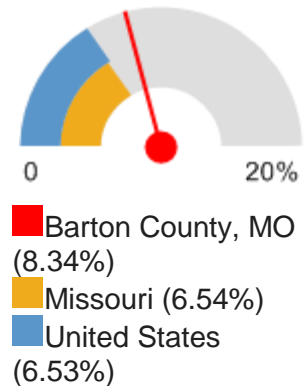


Population in Poverty - 50% FPL

In the report area 8.34% or 1,025 individuals are living in households with income below 50% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population with Income at or Below 50% FPL	Percent Population with Income at or Below 50% FPL
Barton County, MO	12,285	1,025	8.34%
Missouri	5,802,726	379,696	6.54%
United States	301,333,408	19,671,878	6.53%

Percent Population with Income at or Below 50% FPL



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

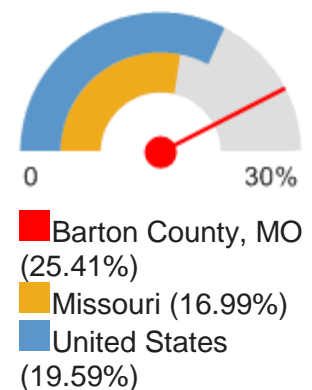
Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Population Receiving Medicaid

This indicator reports the percentage of the population with insurance enrolled in Medicaid (or other means-tested public health insurance). This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

Report Area	Total Population (For Whom Insurance Status is Determined)	Population with Any Health Insurance	Population Receiving Medicaid	Percent of Insured Population Receiving Medicaid
Barton County, MO	12,347	10,743	2,730	25.41%
Missouri	5,867,503	5,100,832	866,575	16.99%
United States	303,984,256	258,778,080	50,682,900	19.59%

Percent of Insured Population Receiving Medicaid

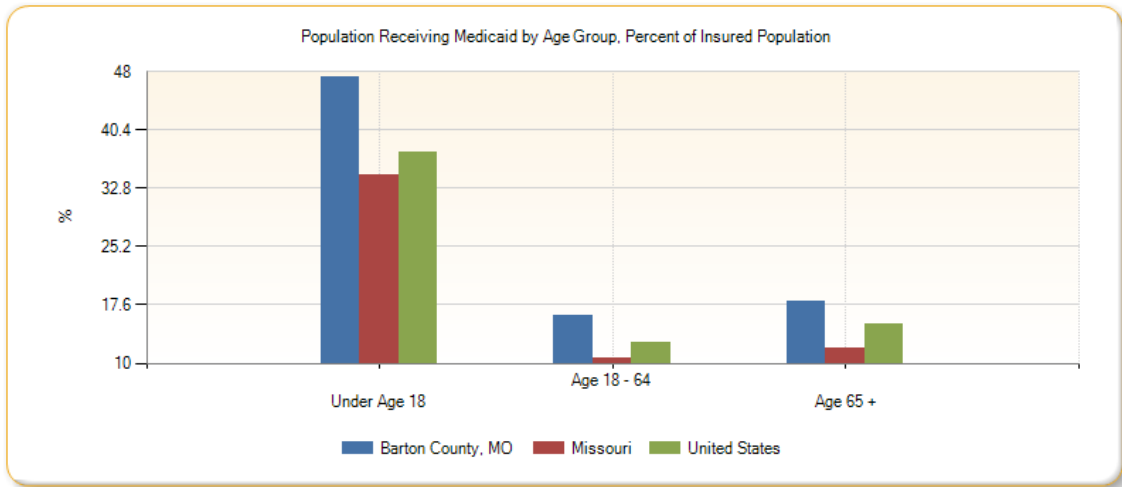


Note: This indicator is compared with the state average.

Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

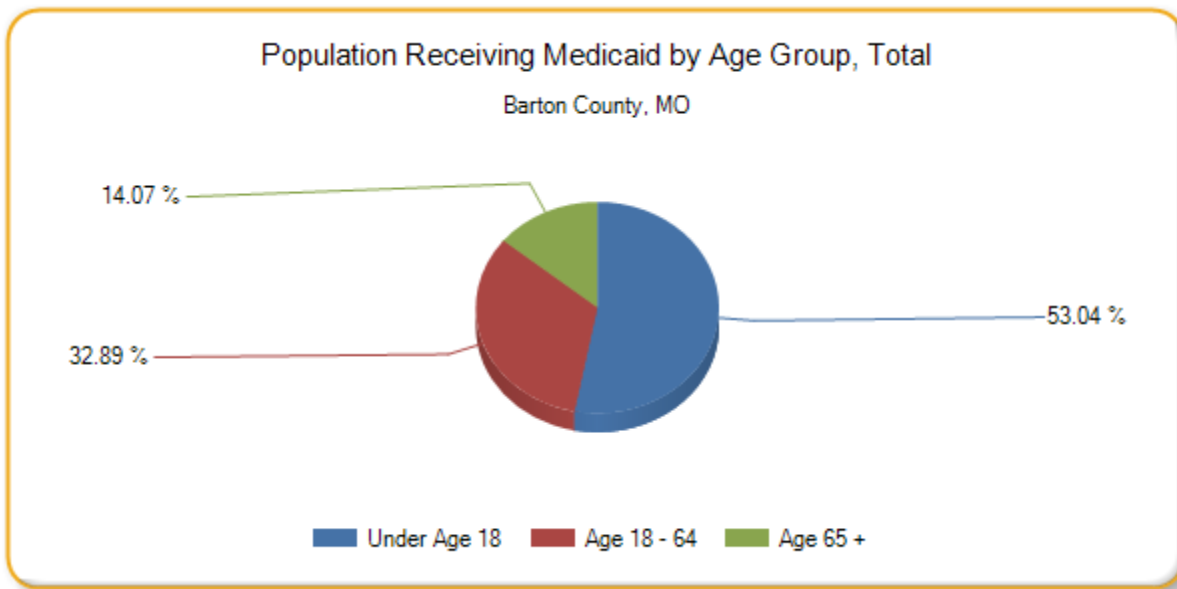
Population Receiving Medicaid by Age Group, Percent of Insured Population

Report Area	Under Age 18	Age 18 - 64	Age 65
Barton County, MO	47.34%	16.19%	17.96%
Missouri	34.44%	10.63%	11.96%
United States	37.4%	12.76%	15.15%



Population Receiving Medicaid by Age Group, Total

Report Area	Under Age 18	Age 18 - 64	Age 65
Barton County, MO	1,448	898	384
Missouri	453,963	316,645	95,967
United States	25,390,208	19,385,884	5,906,811



Population Receiving SNAP Benefits (ACS)

This indicator reports the estimated percentage of households receiving the Supplemental Nutrition Assistance Program (SNAP) benefits. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrolment.

Report Area	Total Households	Households Receiving SNAP Benefits	Percent Households Receiving SNAP Benefits
Barton County, MO	4,932	719	14.58%
Missouri	2,358,270	308,905	13.1%
United States	115,226,800	13,180,710	11.44%

Percent Households Receiving SNAP Benefits



- Barton County, MO (14.58%)
- Missouri (13.1%)
- United States (11.44%)

Note: This indicator is compared with the state average.
Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Population Receiving SNAP Benefits (SAIPE)

This indicator reports the average percentage of the population receiving the Supplemental Nutrition Assistance Program (SNAP) benefits between the months of July 2010 and July 2011. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

Report Area	Total Population	Population Receiving SNAP Benefits	Percent Population Receiving SNAP Benefits
Barton County, MO	12,189	2,585	21.21%
Missouri	5,831,548	950,262	16.3%
United States	303,778,193	46,139,780	15.19%

Percent Population Receiving SNAP Benefits



- Barton County, MO (21.21%)
- Missouri (16.3%)
- United States (15.19%)

Note: This indicator is compared with the state average.
Data Source: US Census Bureau, [Small Area Income & Poverty](#)

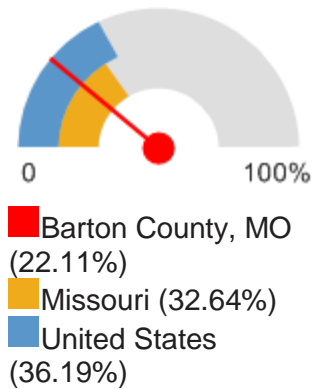
Estimates. Source geography: County

Population with Associate's Level Degree or Higher

22.11% of the population aged 25 and older, or 1,837 have obtained an Associate's level degree or higher. This indicator is relevant because educational attainment has been linked to positive health outcomes.

Report Area	Total Population Age 25	Population Age 25 with Associate's Degree or Higher	Percent Population Age 25 with Associate's Degree or Higher
Barton County, MO	8,307	1,837	22.11%
Missouri	3,973,614	1,296,820	32.64%
United States	204,336,016	73,941,024	36.19%

Percent Population Age 25 with Associate's Degree or Higher



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

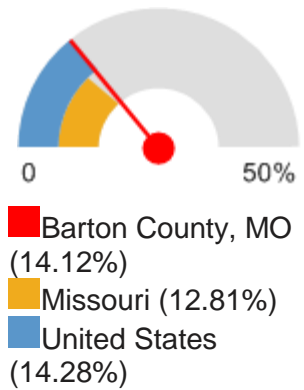
Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Population with No High School Diploma

Within the report area there are 1,173 persons aged 25 and older without a high school diploma (or equivalency) or higher. This represents 14.12% of the total population aged 25 and older. This indicator is relevant because educational attainment is linked to positive health outcomes ([Freudenberg & Ruglis, 2007](#)).

Report Area	Total Population Age 25	Population Age 25 with No High School Diploma	Percent Population Age 25 with No High School Diploma
Barton County, MO	8,307	1,173	14.12%
Missouri	3,973,614	508,960	12.81%
United States	204,336,016	29,179,820	14.28%

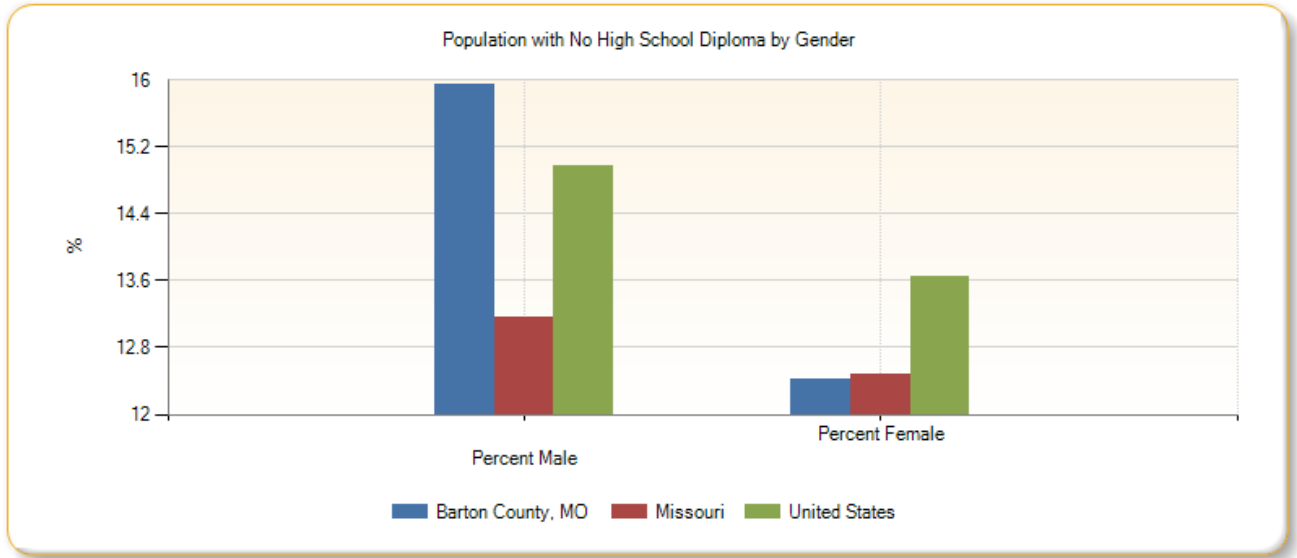
Percent Population Age 25 with No High School Diploma



Note: This indicator is compared with the state average.
Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Population with No High School Diploma by Gender

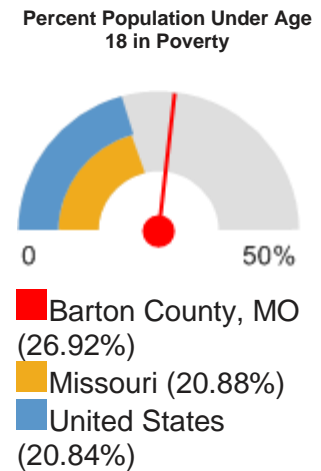
Report Area	Total Male	Total Female	Percent Male	Percent Female
Barton County, MO	641	532	15.95%	12.41%
Missouri	250,841	258,119	13.16%	12.48%
United States	14,729,078	14,450,741	14.97%	13.64%



Poverty - Children Below 100% FPL

This indicator reports the percentage of children aged 0-17 living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

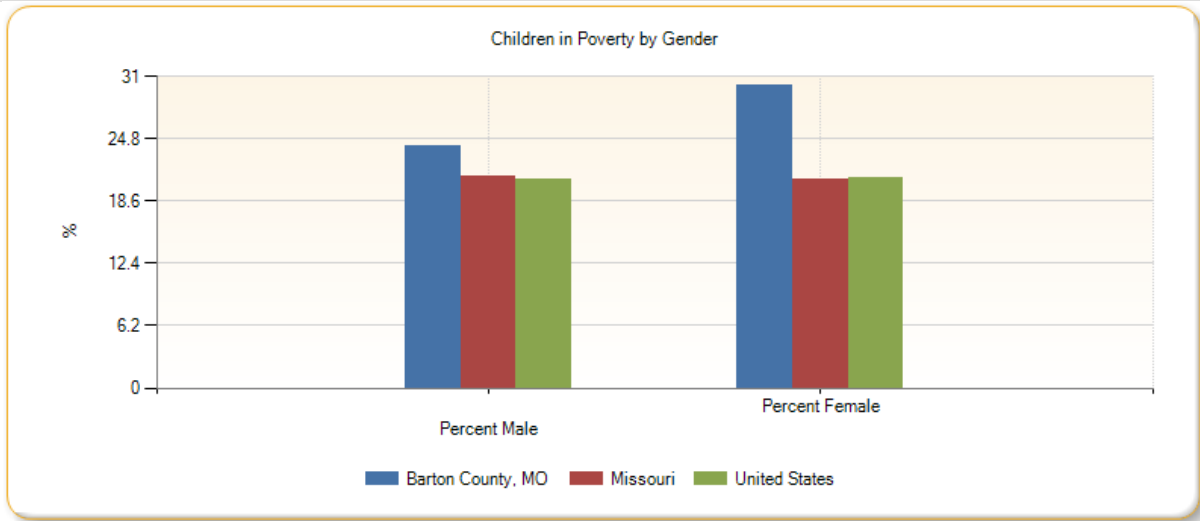
Report Area	Total Population	Population Under Age 18	Population Under Age 18 in Poverty	Percent Population Under Age 18 in Poverty
Barton County, MO	12,285	3,146	847	26.92%
Missouri	5,802,726	1,389,586	290,184	20.88%
United States	301,333,408	72,869,120	15,188,844	20.84%



Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Children in Poverty by Gender

Report Area	Total Male	Total Female	Percent Male	Percent Female
Barton County, MO	400	447	24.07%	30.12%
Missouri	149,272	140,912	21.01%	20.75%
United States	7,717,162	7,471,682	20.72%	20.98%



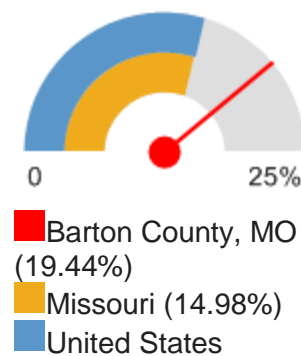
Poverty - Population Below 100% FPL

Poverty is considered a *key driver* of health status.

Within the report area 19.44% or 2,388 individuals are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population in Poverty	Percent Population in Poverty
Barton County, MO	12,285	2,388	19.44%
Missouri	5,802,726	869,036	14.98%
United States	301,333,408	44,852,528	14.88%

Percent Population in Poverty

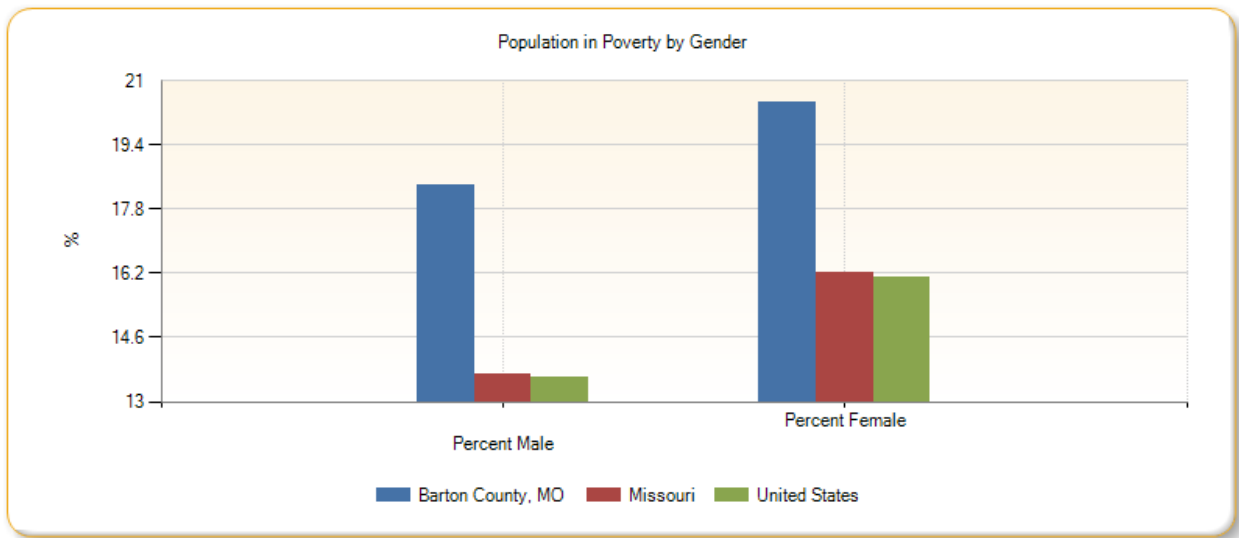


Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

(14.88%)

Population in Poverty by Gender

Report Area	Total Male	Total Female	Percent Male	Percent Female
Barton County, MO	1,122	1,266	18.4%	20.47%
Missouri	386,918	482,118	13.68%	16.21%
United States	20,059,080	24,793,446	13.61%	16.1%

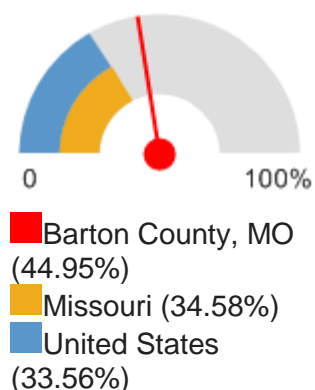


Poverty - Population Below 200% FPL

In the report area 44.95% or 5,522 individuals are living in households with income below 200% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population with Income at or Below 200% FPL	Percent Population with Income at or Below 200% FPL
Barton County, MO	12,285	5,522	44.95%
Missouri	5,802,726	2,006,334	34.58%
United States	301,333,408	101,133,072	33.56%

Percent Population with Income at or Below 200% FPL



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Social Capital Index

Social capital is a measure of economic benefits gained from cooperation between individuals and groups. The indicator measures each county's social capital as an index relative to all other counties in the United States.

Report Area	Total Population (2009)	Associations, Rate per 100,000 Population (2009)	Total Not-for-Profit Associations (2009)	Census Mail-In Reponse Rate (2010)	Average Voter Turnout Rate (2008)	Social Capital Index < 0 = Low > 0 = High
Barton County, MO	12,386	13.7	88	73	63.3	0.24
Missouri	5,987,580	12.05	37,084	75.04	61.55	no data
United States	304,894,495	9.66	1,535,711	74.27	56.88	no data

Note: Data breakout by demographic groups are not available.

Data Source: Pennsylvania State University, College of Agricultural Sciences, Northeast Regional Center for Rural Development. Source geography: County

Teen Births

This indicator reports the rate of total births to women age of 15 - 19 per 1,000 female population age 15 - 19. This indicator is relevant because in many cases, teen parents have unique social, economic, and health support services. Additionally, high rates of teen pregnancy may indicate the prevalence of unsafe sex practices.

Report Area	Female Population Age 15 - 19	Births to Mothers Age 15 - 19	Teen Birth Rate (Per 1,000 Population)
Barton County, MO	393	17	44.1
Missouri	206,847	8,170	39.5
United States	10,736,677	392,962	36.6

Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. Source geography: County

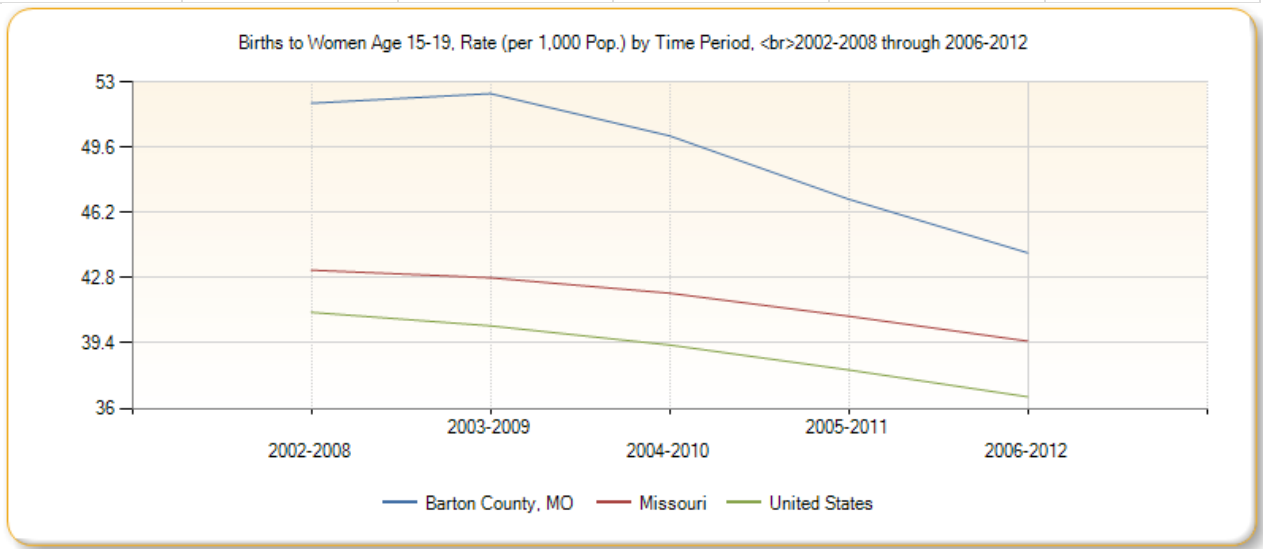
Teen Birth Rate (Per 1,000 Population)



- Barton County, MO (44.1)
- Missouri (39.5)
- United States (36.6)

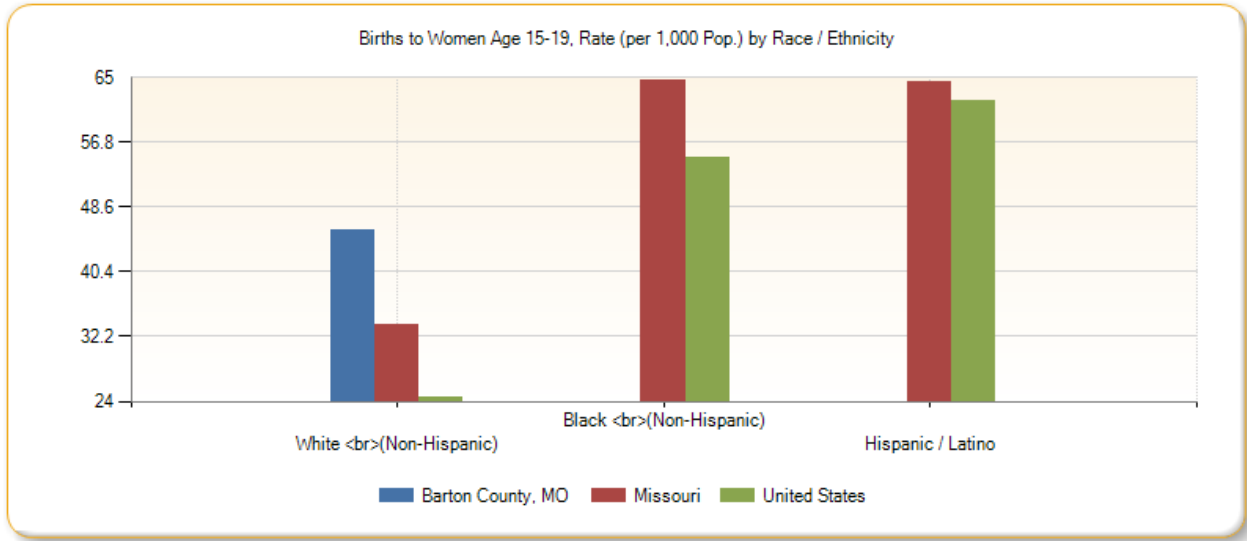
Births to Women Age 15-19, Rate (per 1,000 Pop.) by Time Period, 2002-2008 through 2006-2012

Report Area	2002-2008	2003-2009	2004-2010	2005-2011	2006-2012
Barton County, MO	51.9	52.4	50.2	46.9	44.1
Missouri	43.2	42.8	42	40.8	39.5
United States	41	40.3	39.3	38	36.6



Births to Women Age 15-19, Rate (per 1,000 Pop.) by Race / Ethnicity

Report Area	White (Non-Hispanic)	Black (Non-Hispanic)	Hispanic / Latino
Barton County, MO	45.7	no data	no data
Missouri	33.6	64.6	64.5
United States	24.6	54.9	62

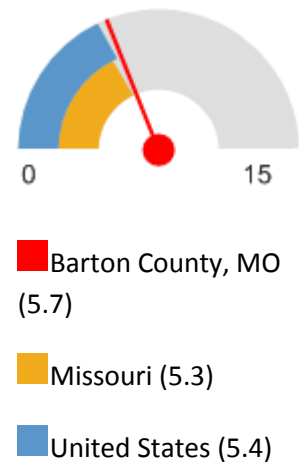


Unemployment Rate

Total unemployment in the report area for the current month was 281, or 5.7% of the civilian non-institutionalized population age 16 and older (non-seasonally adjusted). This indicator is relevant because unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Labor Force	Number Employed	Number Unemployed	Unemployment Rate
Barton County, MO	4,941	4,660	281	5.7
Missouri	3,060,510	2,899,588	160,922	5.3
United States	156,669,187	148,199,073	8,470,114	5.4

Unemployment Rate

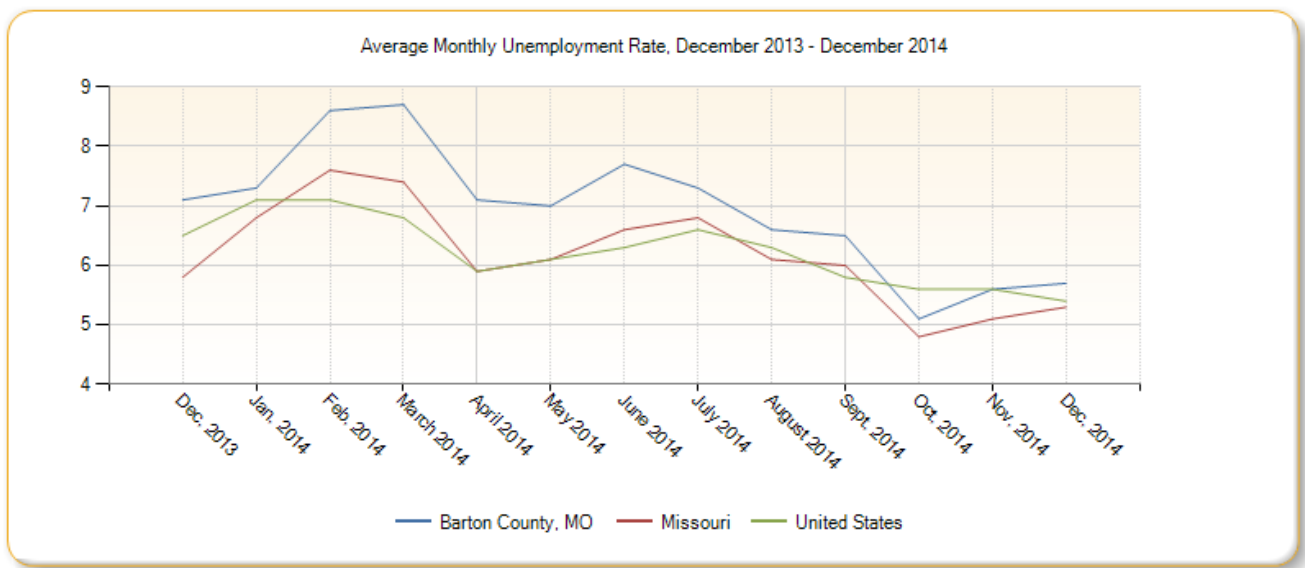


Note: This indicator is compared with the state average.

Data Source: US Department of Labor, Bureau of Labor Statistics. Source geography: County

Average Monthly Unemployment Rate, December 2013 - December 2014

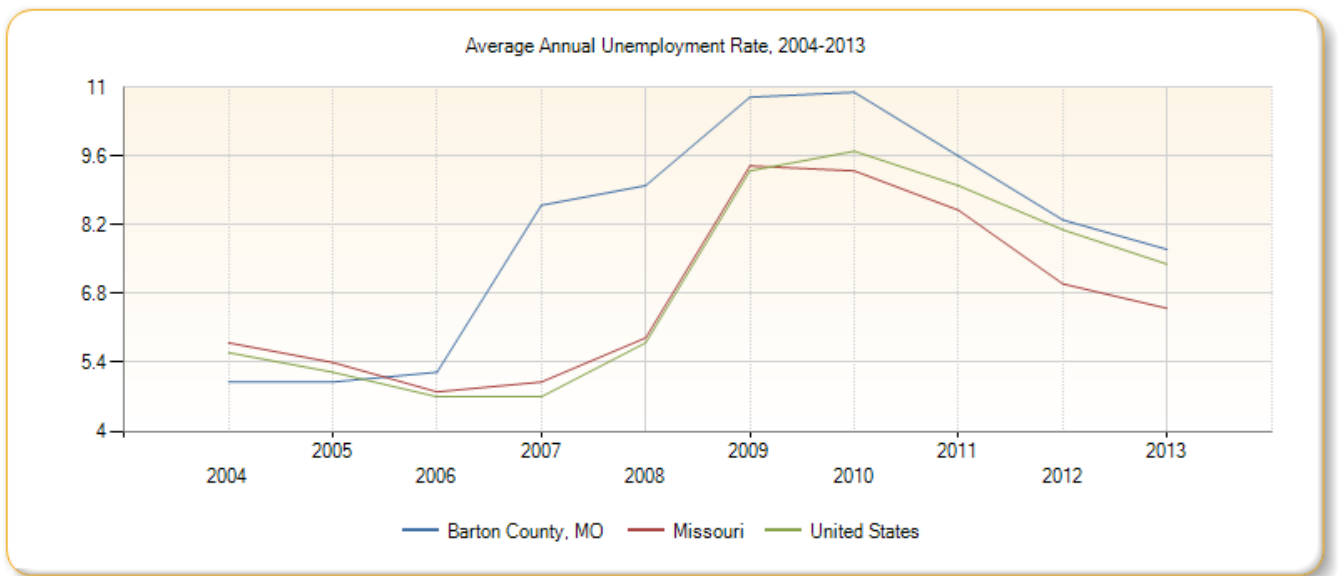
Report Area	Dec. 2013	Jan. 2014	Feb. 2014	March 2014	April 2014	May 2014	June 2014	July 2014	August 2014	Sept. 2014	Oct. 2014	Nov. 2014	Dec. 2014
Barton County, MO	7.1	7.3	8.6	8.7	7.1	7	7.7	7.3	6.6	6.5	5.1	5.6	5.7
Missouri	5.8	6.8	7.6	7.4	5.9	6.1	6.6	6.8	6.1	6	4.8	5.1	5.3
United States	6.5	7.1	7.1	6.8	5.9	6.1	6.3	6.6	6.3	5.8	5.6	5.6	5.4



Average Annual Unemployment Rate, 2004-2013

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Barton County, MO	5	5	5.2	8.6	9	10.8	10.9	9.6	8.3	7.7

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Missouri	5.8	5.4	4.8	5	5.9	9.4	9.3	8.5	7	6.5
United States	5.6	5.2	4.7	4.7	5.8	9.3	9.7	9	8.1	7.4



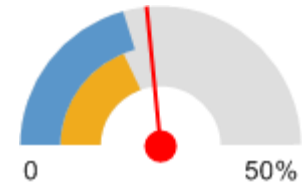
Uninsured Population - Adults

The lack of health insurance is considered a key driver of health status.

This indicator reports the percentage of adults age 18 to 64 without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

Report Area	Total Population Age 18 - 64	Population with Medical Insurance	Percent Population With Medical Insurance	Population Without Medical Insurance	Percent Population Without Medical Insurance
Barton County, MO	6,975	5,351	76.7%	1,623	23.3%
Missouri	3,619,857	2,925,034	80.81%	694,823	19.19%
United States	191,640,968	151,849,368	79.24%	39,791,596	20.76%

Percent Population Without Medical Insurance



- Barton County, MO (23.3%)
- Missouri (19.19%)
- United States (20.76%)

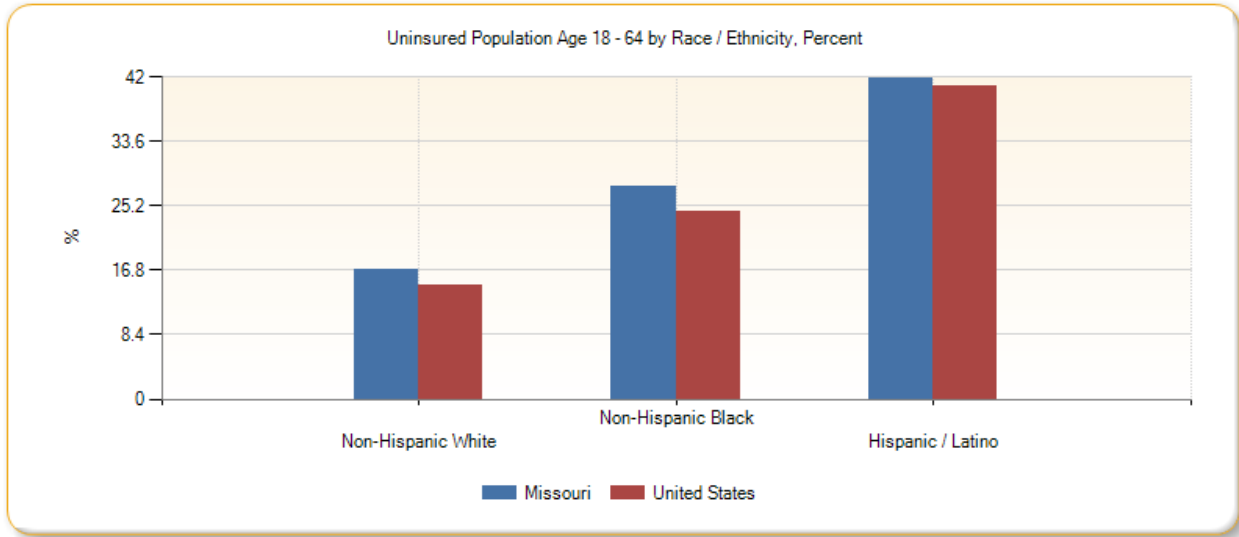
Note: This indicator is compared with the state average.

Data Source: US Census Bureau, Small Area Health Insurance Estimates.

Source geography: County

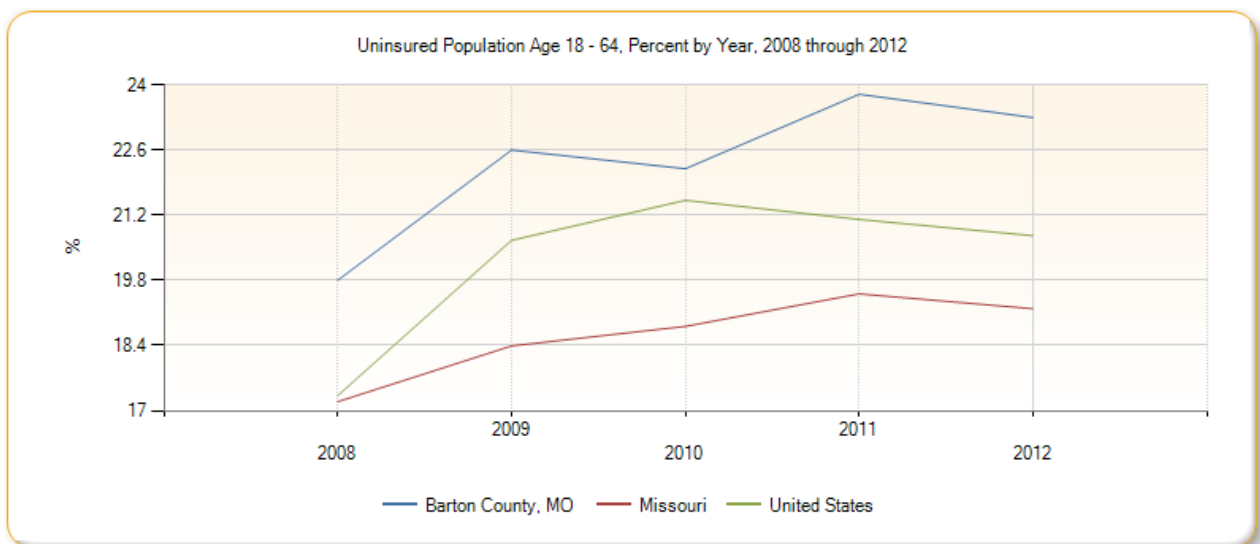
Uninsured Population Age 18 - 64 by Race / Ethnicity, Percent

Report Area	Non-Hispanic White	Non-Hispanic Black	Hispanic / Latino
Missouri	16.78%	27.71%	41.93%
United States	14.81%	24.37%	40.84%



Uninsured Population Age 18 - 64, Percent by Year, 2008 through 2012

Report Area	2008	2009	2010	2011	2012
Barton County, MO	19.8%	22.6%	22.2%	23.8%	23.3%
Missouri	17.19%	18.39%	18.81%	19.51%	19.19%
United States	17.32%	20.66%	21.52%	21.11%	20.76%



Uninsured Population - Children

The lack of health insurance is considered a key driver of health status.

This indicator reports the percentage of children under age 19 without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

Report Area	Total Population Under Age 19	Population with Medical Insurance	Percent Population With Medical Insurance	Population Without Medical Insurance	Percent Population Without Medical Insurance
Barton County, MO	3,238	2,949	91.1%	289	8.9%
Missouri	1,444,067	1,337,602	92.63%	106,464	7.37%
United States	76,468,844	70,705,585	92.46%	5,763,259	7.54%

Percent Population Without Medical Insurance



- Barton County, MO (8.9%)
- Missouri (7.37%)
- United States (7.54%)

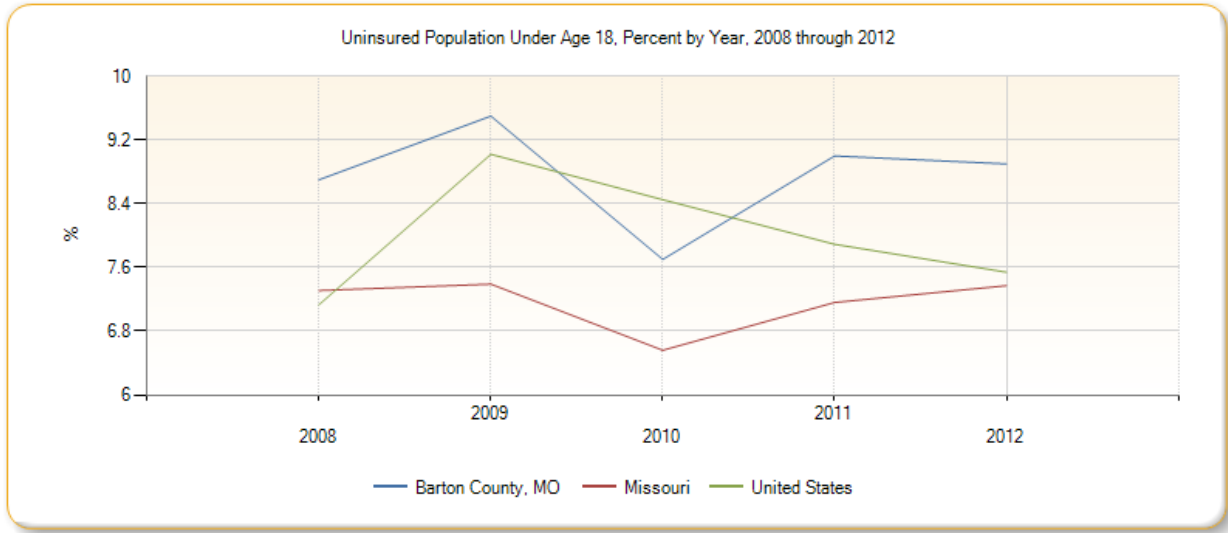
Note: This indicator is compared with the state average.

Data Source: US Census Bureau, Small Area Health Insurance Estimates.

Source geography: County

Uninsured Population Under Age 18, Percent by Year, 2008 through 2012

Report Area	2008	2009	2010	2011	2012
Barton County, MO	8.7%	9.5%	7.7%	9%	8.9%
Missouri	7.31%	7.39%	6.56%	7.16%	7.37%
United States	7.13%	9.02%	8.45%	7.89%	7.54%



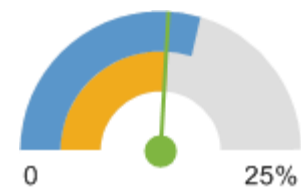
Uninsured Population - Total

The lack of health insurance is considered a key driver of health status.

This indicator reports the percentage of the total civilian non-institutionalized population without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

Report Area	Total Population (For Whom Insurance Status is Determined)	Total Uninsured Population	Percent Uninsured Population
Barton County, MO	12,347	1,604	12.99%
Missouri	5,867,503	766,671	13.07%
United States	303,984,256	45,206,152	14.87%

Percent Uninsured Population



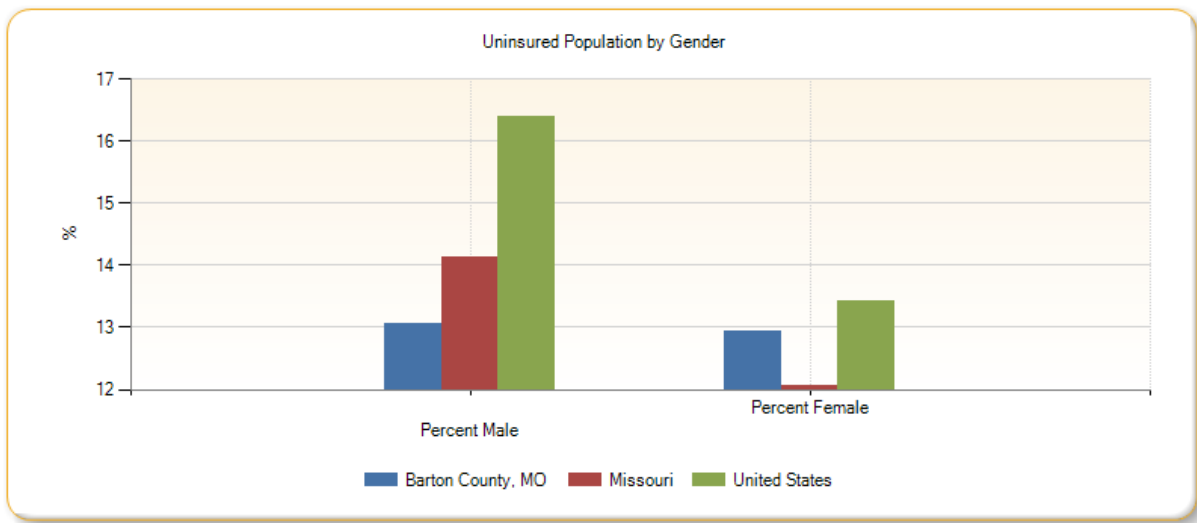
- Barton County, MO (12.99%)
- Missouri (13.07%)
- United States (14.87%)

Note: This indicator is compared with the state average.

Data Source: US Census Bureau, American Community Survey. Source geography: Tract

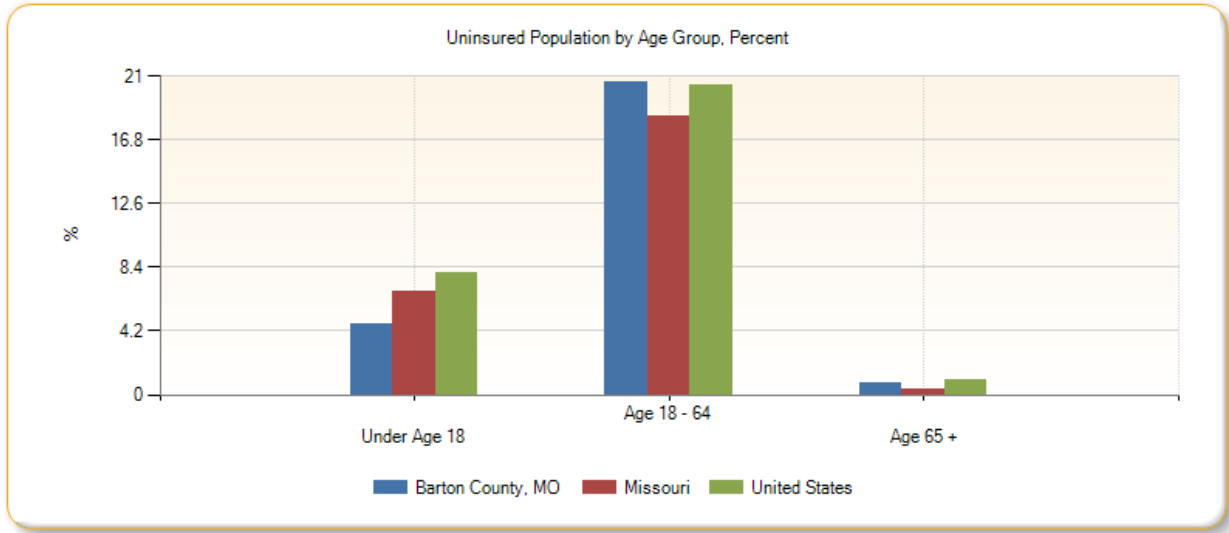
Uninsured Population by Gender

Report Area	Total Male	Total Female	Percent Male	Percent Female
Barton County, MO	800	804	13.05%	12.93%
Missouri	403,217	363,454	14.12%	12.07%
United States	24,317,904	20,888,248	16.4%	13.42%



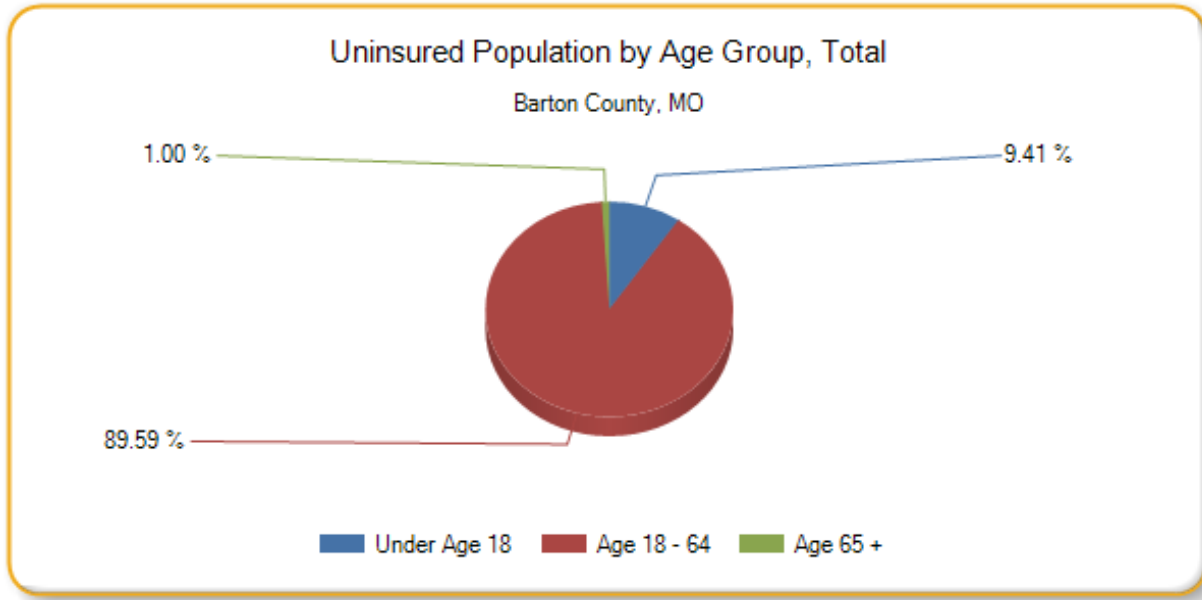
Uninsured Population by Age Group, Percent

Report Area	Under Age 18	Age 18 - 64	Age 65
Barton County, MO	4.7%	20.58%	0.74%
Missouri	6.76%	18.31%	0.36%
United States	8.06%	20.38%	0.94%



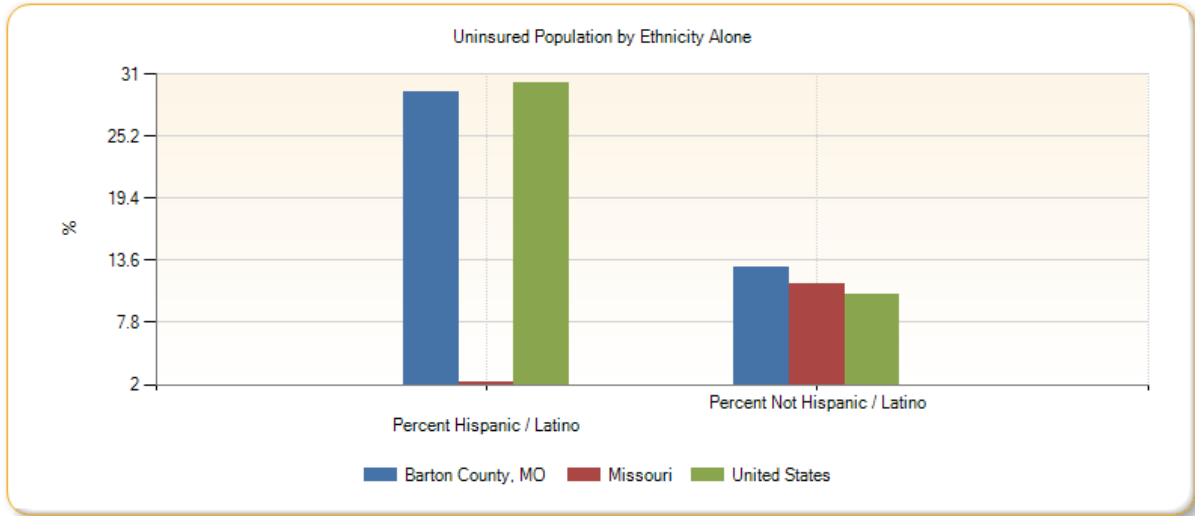
Uninsured Population by Age Group, Total

Report Area	Under Age 18	Age 18 - 64	Age 65
Barton County, MO	151	1,437	16
Missouri	95,615	668,149	2,907
United States	5,953,533	38,883,928	368,687



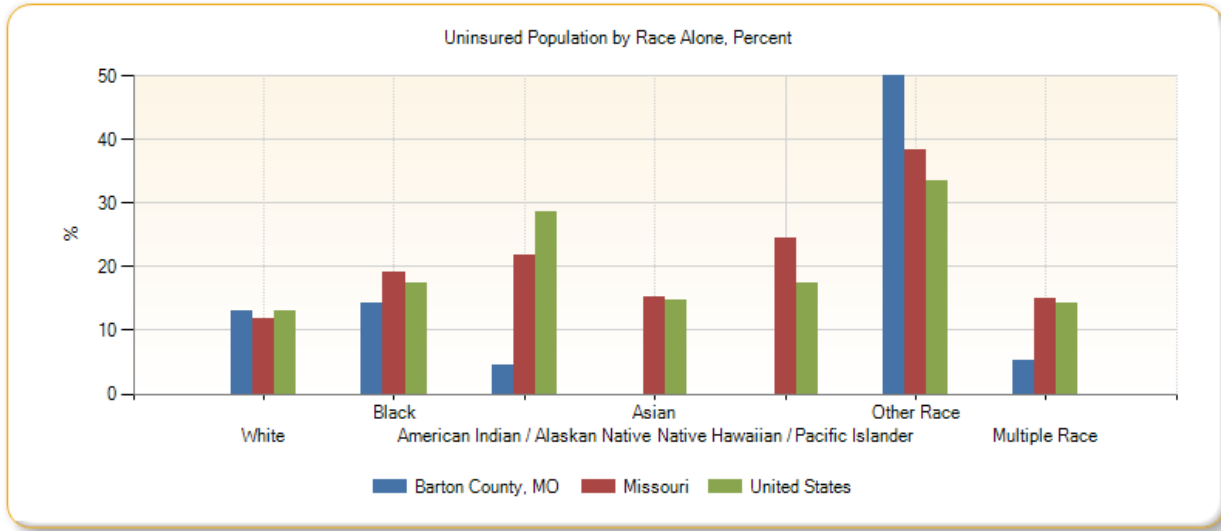
Uninsured Population by Ethnicity Alone

Report Area	Total Hispanic / Latino	Total Not Hispanic / Latino	Percent Hispanic / Latino	Percent Not Hispanic / Latino
Barton County, MO	71	1,510	29.34%	12.97%
Missouri	61,693	542,182	2.05%	11.39%
United States	15,017,022	20,139,664	30.14%	10.38%



Uninsured Population by Race Alone, Percent

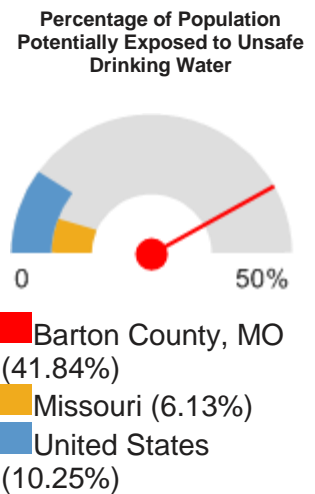
Report Area	White	Black	American Indian / Alaskan Native	Asian	Native Hawaiian / Pacific Islander	Other Race	Multiple Race
Barton County, MO	13.05%	14.29%	4.59%	0%	no data	50%	5.2%
Missouri	11.8%	19.09%	21.69%	15.11%	24.44%	38.44%	14.87%
United States	13.1%	17.48%	28.54%	14.85%	17.31%	33.55%	14.26%



Drinking Water Safety

This indicator reports the percentage of the population getting drinking water from public water systems with at least one health-based violation.

Report Area	Estimated Total Population	Estimated Population Potentially Exposed to Unsafe Drinking Water	Percentage of Population Potentially Exposed to Unsafe Drinking Water
Barton County, MO	6,420	2,686	41.84%
Missouri	4,120,358	231,669	6.13%
United States	222,143,515	21,635,309	10.25%



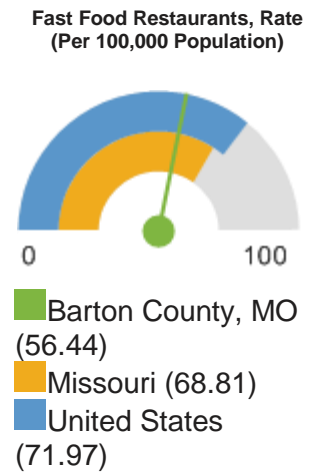
Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: University of Wisconsin Population Health Institute, [County Health Rankings](#). Source geography: County

Fast Food Restaurant Access

This indicator reports the number of fast food restaurants per 100,000 population. Fast food restaurants are defined as limited-service establishments primarily engaged in providing food services (except snack and nonalcoholic beverage bars) where patrons generally order or select items and pay before eating. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Barton County, MO	12,402	7	56.44
Missouri	5,988,927	4,121	68.81
United States	312,471,327	224,877	71.97

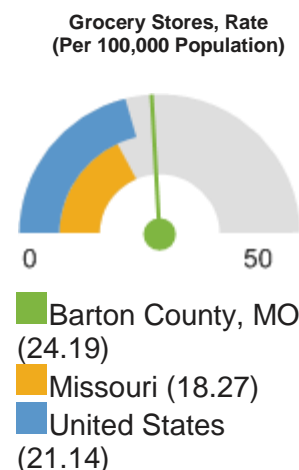


Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [County Business Patterns](#). Additional data analysis by [CARES](#). Source geography: County

Grocery Store Access

This indicator reports the number of grocery stores per 100,000 population. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Included are delicatessen-type establishments. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores are excluded. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Barton County, MO	12,402	3	24.19
Missouri	5,988,927	1,094	18.27
United States	312,471,327	66,047	21.14



Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [County Business Patterns](#). Additional data analysis by [CARES](#). Source geography: County

Housing Environment - Assisted Housing

This indicator reports the total number of HUD-funded assisted housing units available to eligible renters as well as the unit rate (per 10,000 total households).

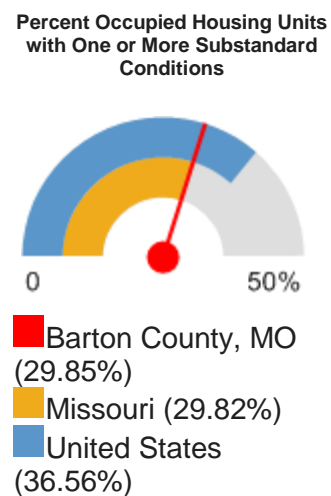
Report Area	Total Housing Units (2010)	Total HUD-Assisted Housing Units	HUD-Assisted Units, Rate per 10,000 Housing Units
Barton County, MO	5,600	87	155.36
Missouri	13,035,872	1,846,762	1,416.68
United States	654,954,581	96,159,779	1,468.19

Data Source: [US Department of Housing and Urban Development](#). Source geography: County

Housing Environment - Substandard Housing

This indicator reports the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1.01 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30 percent, and 5) gross rent as a percentage of household income greater than 30 percent. Selected conditions provide information in assessing the quality of the housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard.

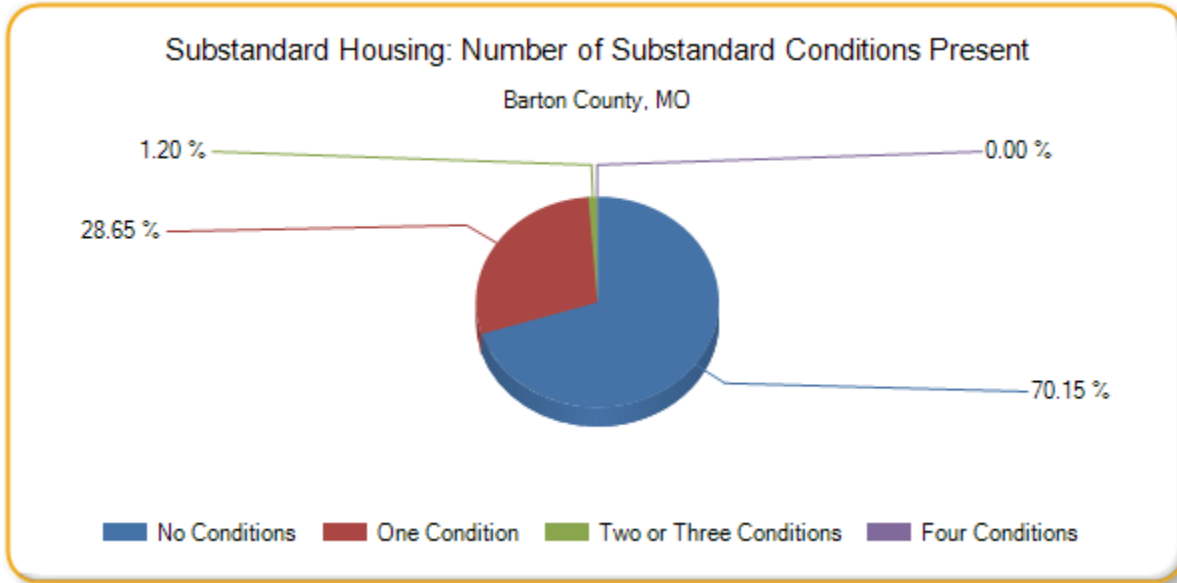
Report Area	Total Occupied Housing Units	Occupied Housing Units with One or More Substandard Conditions	Percent Occupied Housing Units with One or More Substandard Conditions
Barton County, MO	4,932	1,472	29.85%
Missouri	2,358,270	703,137	29.82%
United States	115,226,800	42,129,344	36.56%



Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Substandard Housing: Number of Substandard Conditions Present

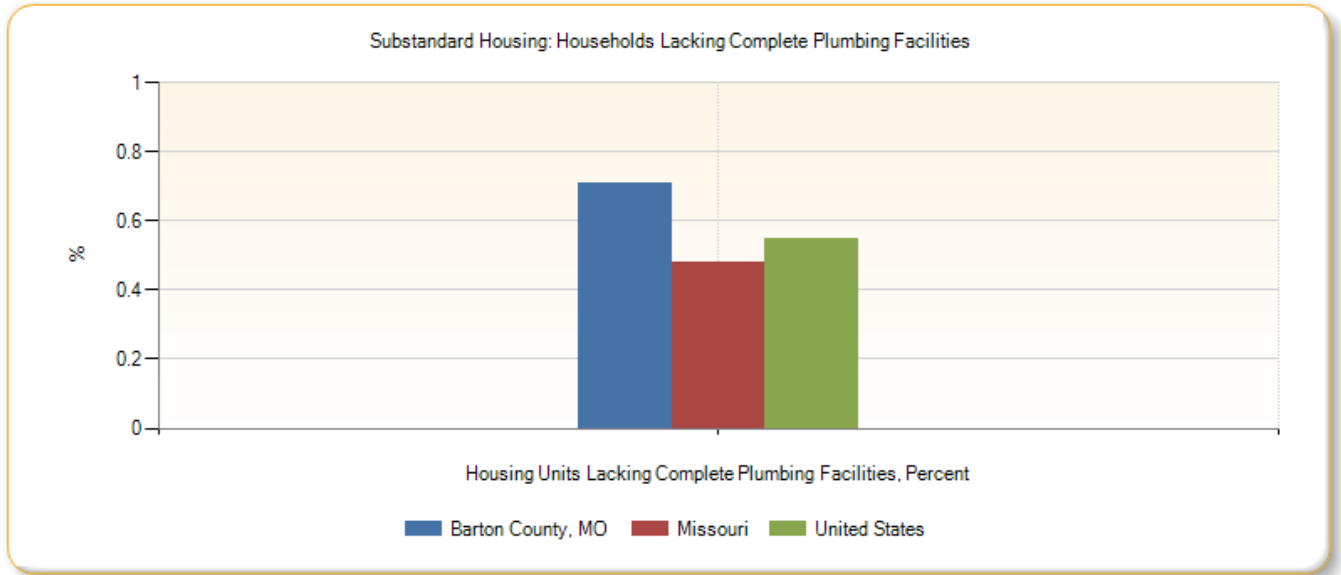
Report Area	No Conditions	One Condition	Two or Three Conditions	Four Conditions
Barton County, MO	70.15%	28.65%	1.2%	0%
Missouri	70.18%	28.66%	1.15%	0.01%
United States	63.44%	34.39%	2.16%	0.01%



Substandard Housing: Households Lacking Complete Plumbing Facilities

Complete plumbing facilities include: (a) hot and cold running water, (b) a flush toilet, and (c) a bathtub or shower. All three facilities must be located inside the house, apartment, or mobile home, but not necessarily in the same room. Housing units are classified as lacking complete plumbing facilities when any of the three facilities is not present.

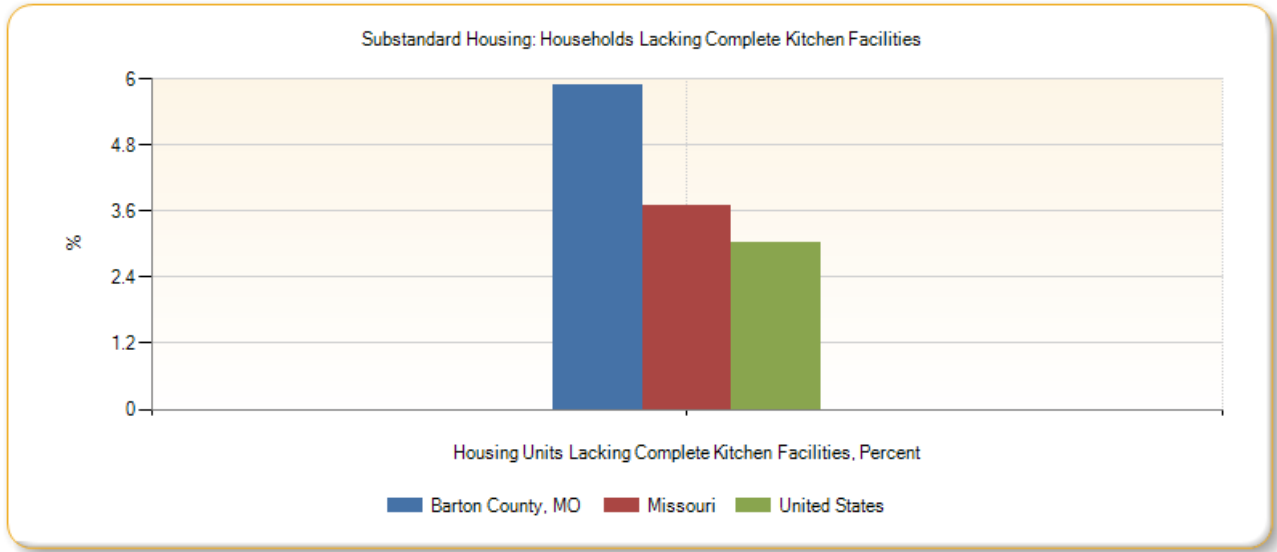
Report Area	Total Occupied Housing Units	Housing Units Lacking Complete Plumbing Facilities	Housing Units Lacking Complete Plumbing Facilities, Percent
Barton County, MO	4,932	35	0.71%
Missouri	2,358,270	11,217	0.48%
United States	115,226,800	628,104	0.55%



Substandard Housing: Households Lacking Complete Kitchen Facilities

A unit has complete kitchen facilities when it has all three of the following facilities: (a) a sink with a faucet, (b) a stove or range, and (c) a refrigerator. All kitchen facilities must be located in the house, apartment, or mobile home, but they need not be in the same room. A housing unit having only a microwave or portable heating equipment such as a hot plate or camping stove should not be considered as having complete kitchen facilities. An icebox is not considered to be a refrigerator.

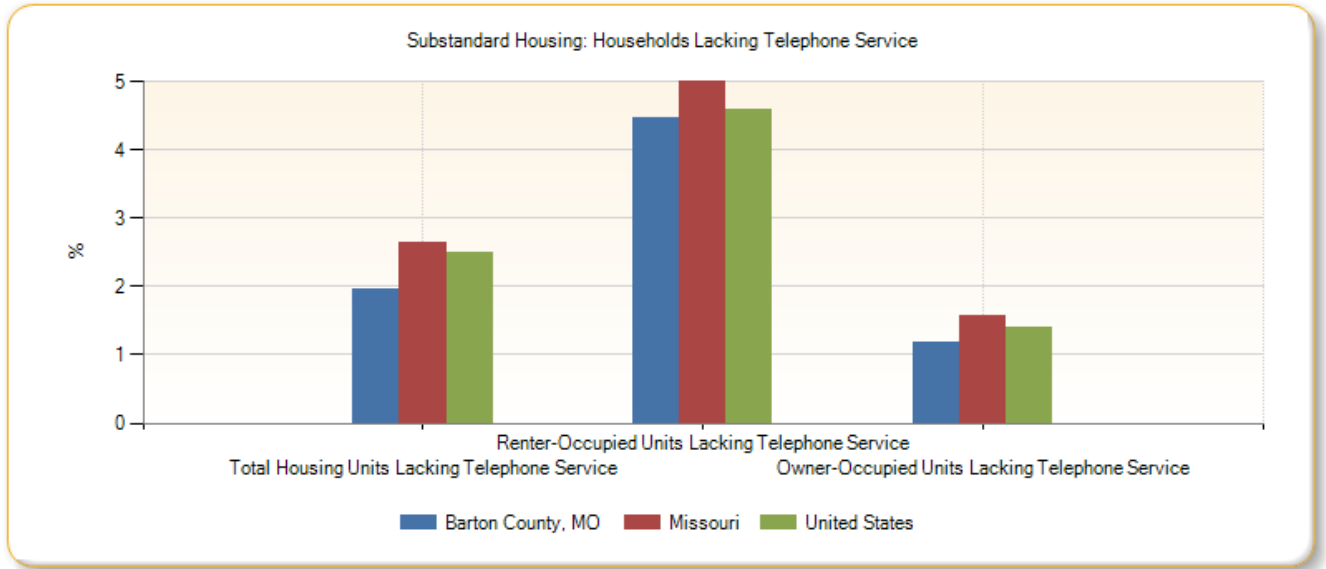
Report Area	Total Occupied Housing Units	Housing Units Lacking Complete Kitchen Facilities	Housing Units Lacking Complete Kitchen Facilities, Percent
Barton County, MO	5,604	330	5.89%
Missouri	2,710,506	100,612	3.71%
United States	131,642,456	3,973,415	3.02%



Substandard Housing: Households Lacking Telephone Service

A telephone must be in working order and service available in the house, apartment, or mobile home that allows the respondent to both make and receive calls. Households that have cell-phones (no land-line) are counted as having telephone service available. Households whose service has been discontinued for nonpayment or other reasons are not counted as having telephone service available.

Report Area	Total Housing Units Lacking Telephone Service	Total Housing Units Lacking Telephone Service	Owner-Occupied Units Lacking Telephone Service	Owner-Occupied Units Lacking Telephone Service	Renter-Occupied Units Lacking Telephone Service	Renter-Occupied Units Lacking Telephone Service
Barton County, MO	96	1.95%	44	1.17%	52	4.46%
Missouri	62,262	2.64%	25,635	1.58%	36,627	5%
United States	2,879,289	2.5%	1,060,663	1.41%	1,818,626	4.58%

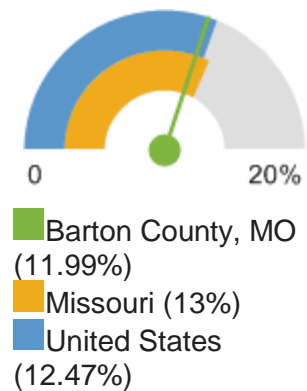


Housing Environment - Vacancy Rate

This indicator reports the number and percentage of housing units that are vacant. A housing unit is considered vacant by the American Community Survey if no one is living in it at the time of interview. Units occupied at the time of interview entirely by persons who are staying two months or less and who have a more permanent residence elsewhere are considered to be temporarily occupied, and are classified as “vacant.”

Report Area	Total Housing Units	Vacant Housing Units	Vacant Housing Units, Percent
Barton County, MO	5,604	672	11.99%
Missouri	2,710,506	352,236	13%
United States	131,642,456	16,415,655	12.47%

Vacant Housing Units, Percent



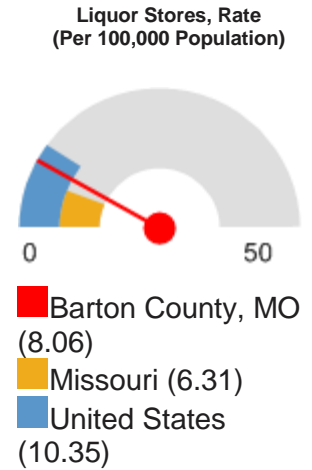
Note: This indicator is compared with the state average.
 Data Source: US Census Bureau, [American Community Survey](#). Source geography: County

Liquor Store Access

This indicator reports the number of beer, wine, and liquor stores per 100,000 population, as defined by North American Industry Classification System (NAICS) Code 445310. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Barton County, MO	12,402	1	8.06
Missouri	5,988,927	378	6.31
United States	312,471,327	32,327	10.35

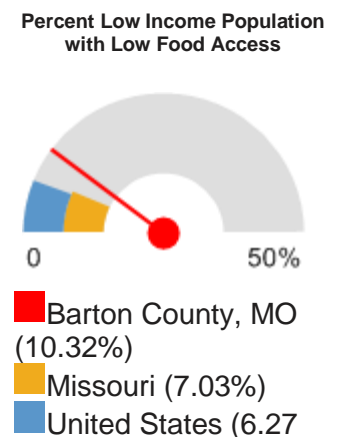
Note: This indicator is compared with the state average.
Data Source: US Census Bureau, [County Business Patterns](#). Additional data analysis by [CARES](#). Source geography: County



Low Income Population with Low Food Access

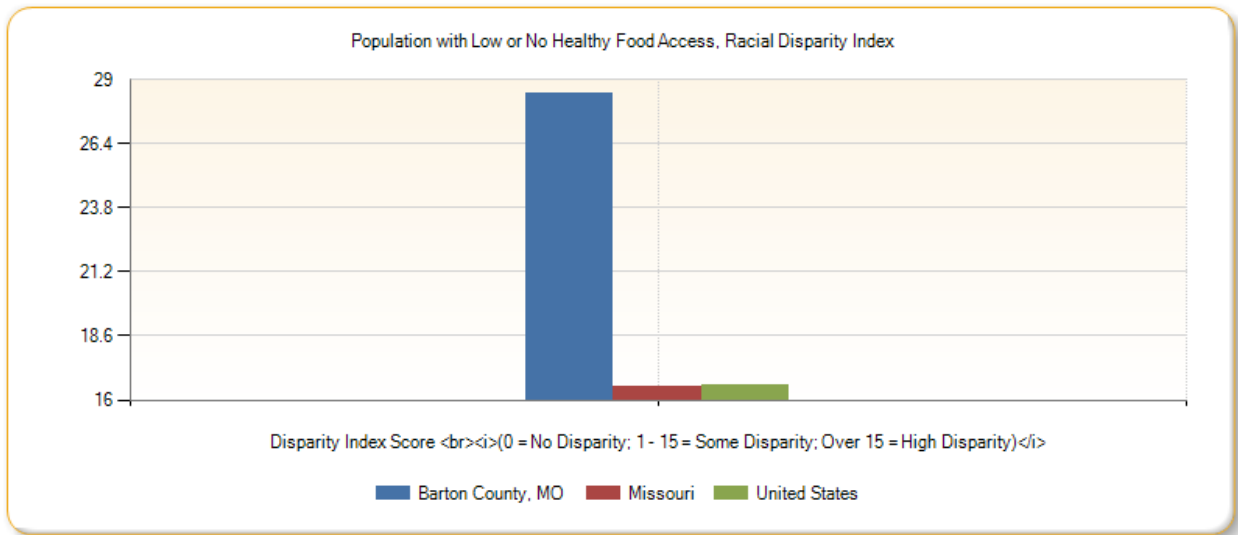
Report Area	Total Population	Low Income Population with Low Food Access	Percent Low Income Population with Low Food Access
Barton County, MO	12,402	1,280	10.32%
Missouri	5,988,927	420,821	7.03%
United States	308,745,538	19,347,047	6.27%

Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
Data Source: US Department of Agriculture, Economic Research Service, [USDA - Food Access Research Atlas](#). Source geography: Tract



Population with Low or No Healthy Food Access, Racial Disparity Index

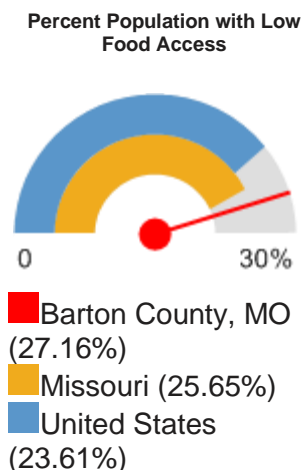
Report Area	Disparity Index Score <i>(0 = No Disparity; 1 - 15 = Some Disparity; Over 15 = High Disparity)</i>
Barton County, MO	28.42
Missouri	16.56
United States	16.59



Population with Low Food Access

This indicator reports the percentage of the population living in census tracts designated as food deserts. A food desert is defined as a low-income census tract (where a substantial number or share of residents has low access to a supermarket or large grocery store. This indicator is relevant because it highlights populations and geographies facing food insecurity.

Report Area	Total Population	Population with Low Food Access	Percent Population with Low Food Access
Barton County, MO	12,402	3,368	27.16%
Missouri	5,988,927	1,535,954	25.65%
United States	308,745,538	72,905,540	23.61%

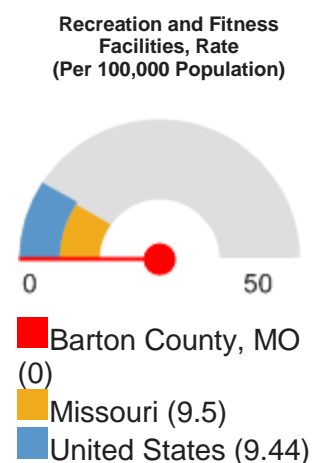


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available. Data Source: US Department of Agriculture, Economic Research Service, [USDA - Food Access Research Atlas](#). Source geography: Tract

Recreation and Fitness Facility Access

This indicator reports the number per 100,000 population of recreation and fitness facilities as defined by North American Industry Classification System (NAICS) Code 713940. This indicator is relevant because access to recreation and fitness facilities encourages physical activity and other healthy behaviors.

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Barton County, MO	12,402	0	0
Missouri	5,988,927	569	9.5
United States	312,471,327	29,511	9.44



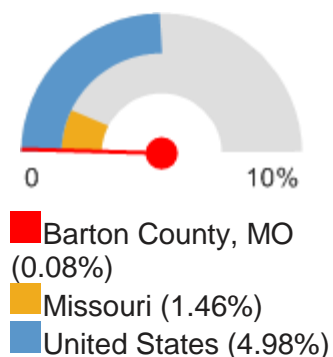
Note: This indicator is compared with the state average. Data Source: US Census Bureau, [County Business Patterns](#). Additional data analysis by [CARES](#). Source geography: County

Use of Public Transportation

This indicator reports the percentage of population using public transportation as their primary means of commute to work. Public transportation includes buses or trolley buses, streetcars or trolley cars, subway or elevated rails, and ferryboats.

Report Area	Total Population Employed Age 16	Population Using Public Transit for Commute to Work	Percent Population Using Public Transit for Commute to Work
Barton County, MO	4,949	4	0.08%
Missouri	2,747,695	40,115	1.46%
United States	139,893,632	6,967,689	4.98%

Percent Population Using Public Transit for Commute to Work



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: US Census Bureau, [American Community Survey](#). Source geography: Tract

Walkability

This indicator is relevant because an environment with safe walking routes and nearby amenities encourages physical activity and other healthy behaviors and decreases dependence on motor vehicle transportation.

Report Area	Walk Score	Population in Walk Score Area	Percent of Population in Walk Score Area
Missouri	38.2	2,556,494	42.69%
United States	43.3	165,954,856	53.86%

Source geography: City

Total Walkability

Report Area	Population Living in "Car Dependent (Almost Exclusively)" Cities	Population Living in "Car Dependent (Some Amenities)" Cities	Population Living in "Somewhat Walkable" Cities	Population Living in "Very Walkable" Cities	Population Living in "Walker's Paradise" Cities	Population Living Outside Walk Score Areas
Missouri	101,399	2,040,724	414,371	0	0	3,432,433
United States	6,210,081	90,598,685	50,242,340	18,739,102	164,648	142,188,959

Percent Walkability

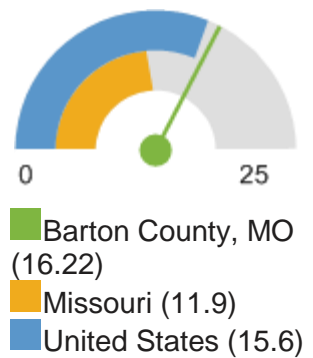
Report Area	Percent Population Living in "Car Dependent (Almost Exclusively)" Cities	Percent Population Living in "Car Dependent (Some Amenities)" Cities	Percent Population Living in "Somewhat Walkable" Cities	Percent Population Living in "Very Walkable" Cities	Percent Population Living in "Walker's Paradise" Cities	Percent Population Living Outside Walk Score Areas
Missouri	1.69%	34.07%	6.92%	0%	0%	57.31%
United States	2.02%	29.40%	16.30%	6.08%	0.05%	46.14%

WIC-Authorized Food Store Access

This indicator reports the number of food stores and other retail establishments per 100,000 population that are authorized to accept WIC Program (Special Supplemental Nutrition Program for Women, Infants, and Children) benefits and that carry designated WIC foods and food categories. This indicator is relevant because it provides a measure of food security and healthy food access for women and children in poverty as well as environmental influences on dietary behaviors.

Report Area	Total Population (2011 Estimate)	Number WIC-Authorized Food Stores	WIC-Authorized Food Store Rate (Per 100,000 Pop.)
Barton County, MO	12,327	2	16.22
Missouri	6,036,320	722	11.9
United States	318,921,538	50,042	15.6

WIC-Authorized Food Stores, Rate (Per 100,000 Population)



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

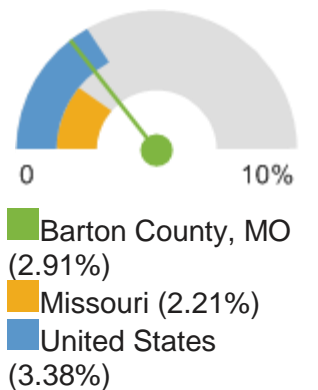
Data Source: US Department of Agriculture, Economic Research Service, [USDA - Food Environment Atlas](#). Source geography: County

Workers Commuting by Walking or Biking

This indicator reports the percentage of the working population that primarily walks or bikes when they commute to work.

Report Area	Total Working Population Age 16	Workers Commuting by Walking or Biking	Percent of Workers Commuting by Walking or Biking
Barton County, MO	4,949	144	2.91%
Missouri	2,747,695	60,621	2.21%
United States	139,893,632	4,724,083	3.38%

Percent of Workers Commuting by Walking or Biking



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: US Census Bureau, [American Community Survey](#).

Clinical Care

A lack of access to care presents barriers to good health. The supply and accessibility of facilities and physicians, the rate of uninsurance, financial hardship, transportation barriers, cultural competency, and coverage limitations affect access.

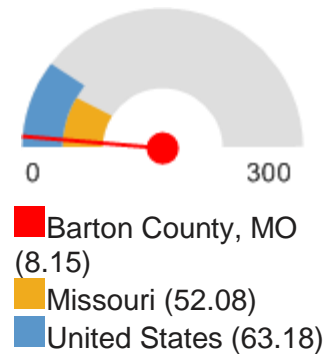
Rates of morbidity, mortality, and emergency hospitalizations can be reduced if community residents access services such as health screenings, routine tests, and vaccinations. Prevention indicators can call attention to a lack of access or knowledge regarding one or more health issues and can inform program interventions.

Access to Dentists

This indicator reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.

Report Area	Total Population, 2013	Dentists, 2013	Dentists, Rate per 100,000 Pop.
Barton County, MO	12,275	1	8.15
Missouri	6,044,171	3,148	52.08
United States	316,128,839	199,743	63.18

Dentists, Rate per 100,000 Pop.



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

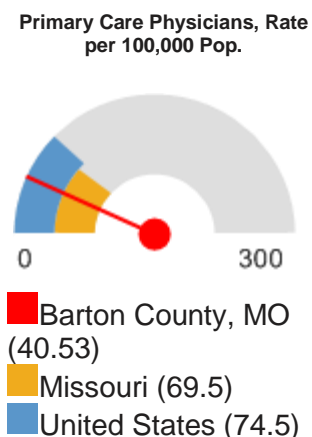
Data Source: US Department of Health & Human Services, Health Resources and Services Administration, [Area Health Resource File](#).

Source geography: County

Access to Primary Care

This indicator reports the number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

Report Area	Total Population, 2012	Primary Care Physicians, 2012	Primary Care Physicians, Rate per 100,000 Pop.
Barton County, MO	12,337	5	40.53
Missouri	6,021,988	4,185	69.5
United States	313,914,040	233,862	74.5

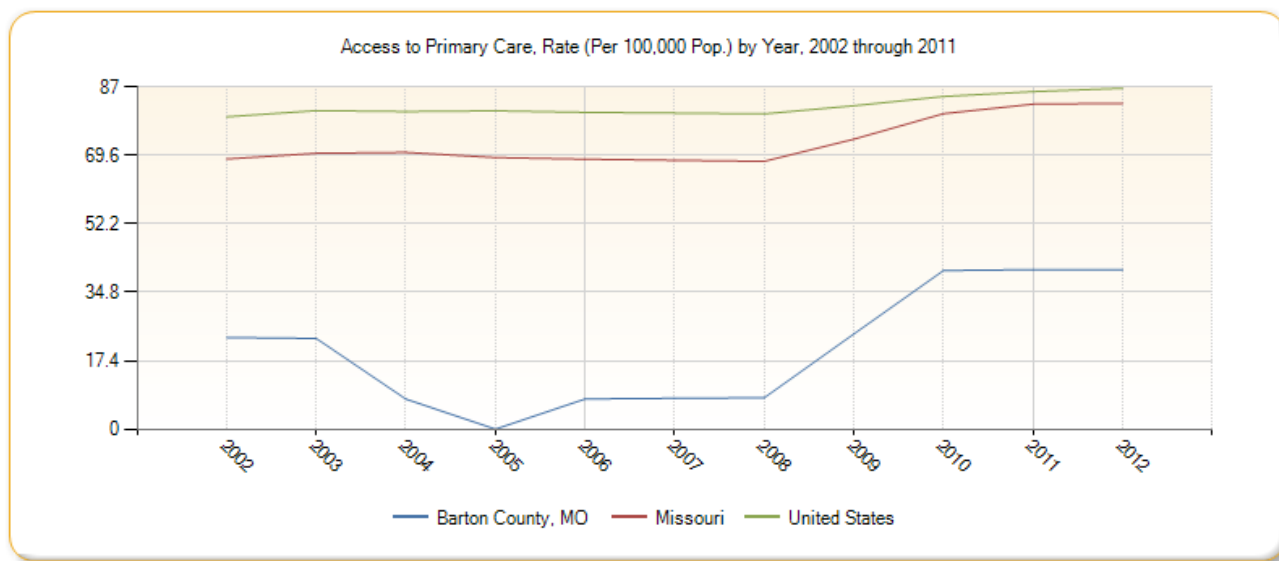


Note: This indicator is compared with the state average.
Data Source: US Department of Health & Human Services, Health Resources and Services Administration, [Area Health Resource File](#).
Source geography: County

Access to Primary Care, Rate (Per 100,000 Pop.) by Year, 2002 through 2011

This indicator reports the rate of primary care physicians per 100,000 population by year. This figure represents all primary care physicians practicing patient care, including hospital residents. In counties with teaching hospitals, this figure may differ from the rate reported above.

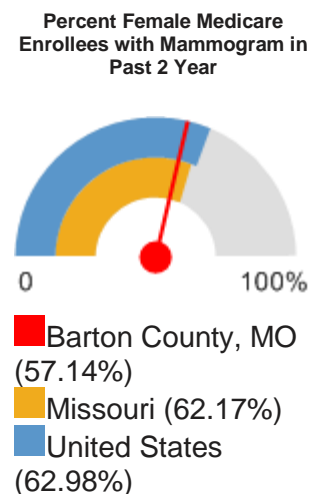
Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012
Barton County, MO	7.65	0	7.68	7.86	7.98	24.22	40.32	40.56	40.53
Missouri	70.36	69.05	68.63	68.35	68.09	73.74	80.21	82.64	82.86
United States	80.76	80.94	80.54	80.38	80.16	82.22	84.57	85.83	86.66



Cancer Screening - Mammogram

This indicator reports the percentage of female Medicare enrollees, age 67-69 or older, who have received one or more mammograms in the past two years. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Report Area	Total Medicare Enrollees	Female Medicare Enrollees Age 67-69	Female Medicare Enrollees with Mammogram in Past 2 Years	Percent Female Medicare Enrollees with Mammogram in Past 2 Year
Barton County, MO	1,597	112	63	57.14%
Missouri	578,710	48,778	30,322	62.17%
United States	53,131,712	4,402,782	2,772,990	62.98%

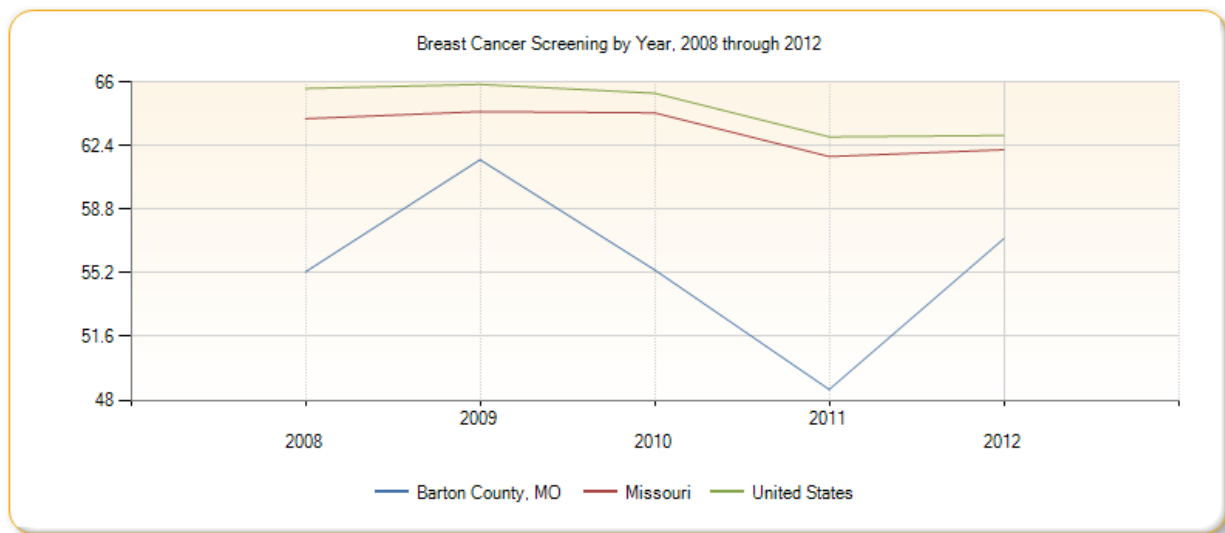


Note: This indicator is compared with the state average.
 Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, [Dartmouth Atlas of Health Care](#). Source geography: County

Breast Cancer Screening by Year, 2008 through 2012

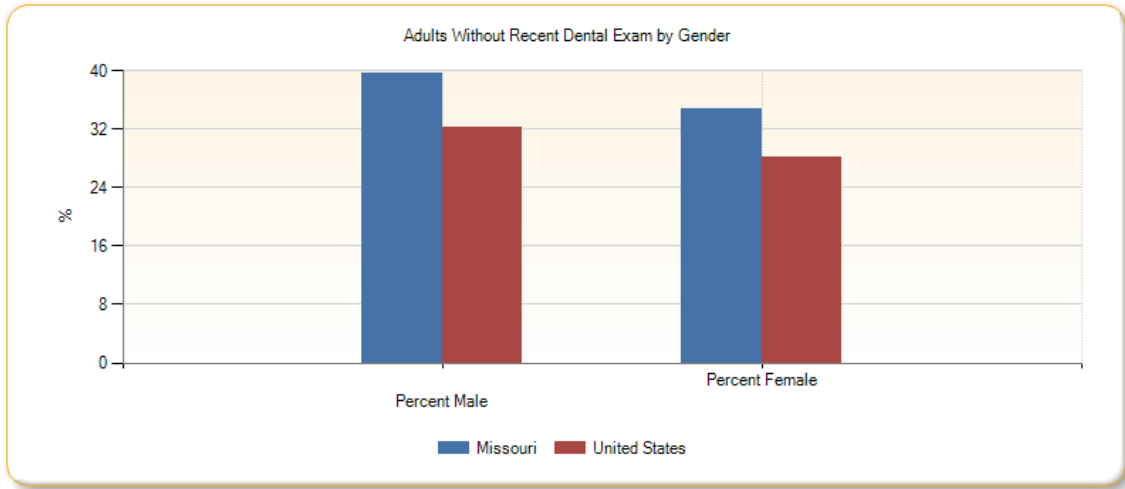
Percent of Female Medicare Beneficiaries Age 67-69 with Mammogram in Past 2 Years

Report Area	2008	2009	2010	2011	2012
Barton County, MO	55.26	61.61	55.37	48.6	57.14
Missouri	63.93	64.33	64.26	61.79	62.17
United States	65.64	65.87	65.37	62.9	62.98



Adults Without Recent Dental Exam by Gender

Report Area	Total Male	Total Female	Percent Male	Percent Female
Missouri	851,712	816,310	39.59%	34.81%
United States	36,311,042	34,083,921	32.3%	28.12%

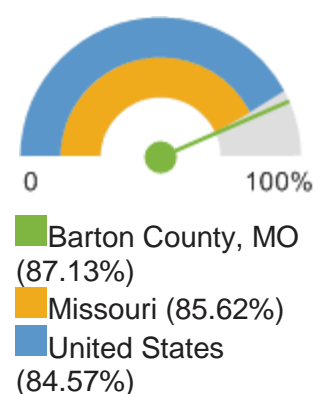


Diabetes Management - Hemoglobin A1c Test

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. In the report area, 176 Medicare enrollees with diabetes have had an annual exam out of 202 Medicare enrollees in the report area with diabetes, or 87.13%. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Report Area	Total Medicare Enrollees	Medicare Enrollees with Diabetes	Medicare Enrollees with Diabetes with Annual Exam	Percent Medicare Enrollees with Diabetes with Annual Exam
Barton County, MO	1,597	202	176	87.13%
Missouri	578,710	72,934	62,447	85.62%
United States	53,131,712	6,517,150	5,511,632	84.57%

Percent Medicare Enrollees with Diabetes with Annual Exam



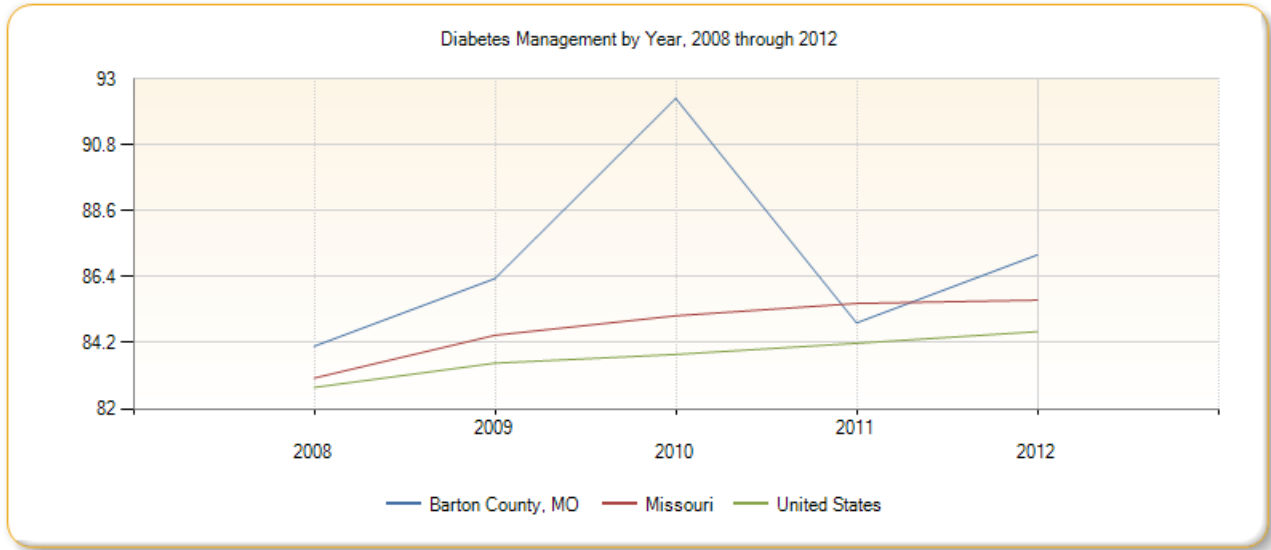
Note: This indicator is compared with the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, [Dartmouth Atlas of Health Care](#). Source geography: County

Diabetes Management by Year, 2008 through 2012

Percent of Medicare Beneficiaries with Diabetes with Annual Hemoglobin A1c Test

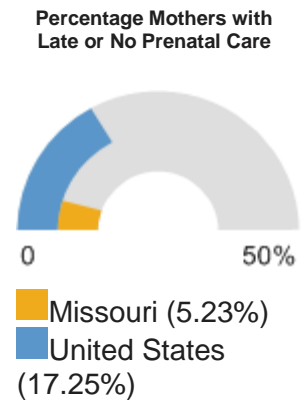
Report Area	2008	2009	2010	2011	2012
Barton County, MO	84.08	86.34	92.35	84.86	87.13
Missouri	83.02	84.45	85.1	85.51	85.62
United States	82.71	83.52	83.81	84.18	84.57



Lack of Prenatal Care

This indicator reports the percentage of women who do not obtain prenatal care during their first trimester of pregnancy. This indicator is relevant because engaging in prenatal care decreases the likelihood of maternal and infant health risks. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Report Area	Total Births	Mothers Starting Prenatal Care in First Semester	Mothers with Late or No Prenatal Care	Prenatal Care Not Reported	Percentage Mothers with Late or No Prenatal Care
Barton County, MO	no data	no data	no data	no data	suppressed
Missouri	318,557	56,322	16,666	245,569	5.23%
United States	16,693,978	7,349,554	2,880,098	6,464,326	17.25%



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

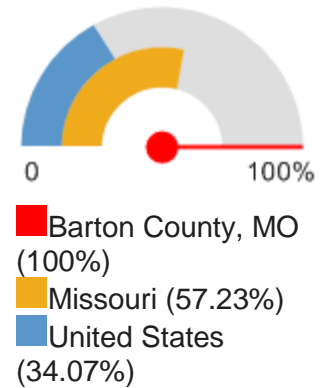
Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#).

Population Living in a Health Professional Shortage Area

This indicator reports the percentage of the population that is living in a geographic area designated as a "Health Professional Shortage Area" (HPSA), defined as having a shortage of primary medical care, dental or mental health professionals. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

Report Area	Total Area Population	Population Living in a HPSA	Percentage of Population Living in a HPSA
Barton County, MO	12,402	12,402	100%
Missouri	5,988,927	3,427,496	57.23%
United States	308,745,538	105,203,742	34.07%

Percentage of Population Living in a HPSA



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

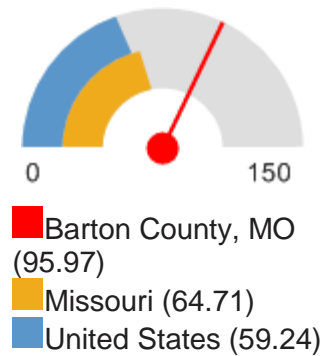
Data Source: US Department of Health & Human Services, Health Resources and Services Administration, [Health Professional Shortage Areas](#). Source geography: HPSA

Preventable Hospital Events

This indicator reports the discharge rate (per 1,000 Medicare enrollees) for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients. This indicator is relevant because analysis of ACS discharges allows demonstrating a possible “return on investment” from interventions that reduce admissions (for example, for uninsured or Medicaid patients) through better access to primary care resources.

Report Area	Total Medicare Part A Enrollees	Ambulatory Care Sensitive Condition Hospital Discharges	Ambulatory Care Sensitive Condition Discharge Rate
Barton County, MO	1,676	160	95.97
Missouri	620,963	40,179	64.71
United States	58,209,898	3,448,111	59.24

Preventable Hospital Events, Age-Adjusted Discharge Rate (Per 1,000 Medicare Enrollees)



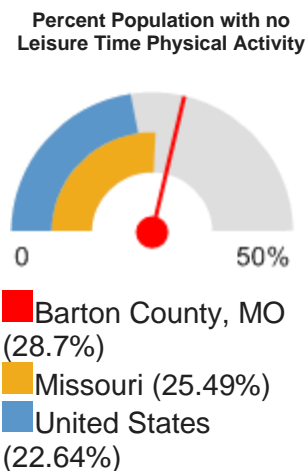
Note: This indicator is compared with the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, [Dartmouth Atlas of Health Care](#). Source geography: County

Physical Inactivity

Within the report area, 2,720 or 28.7% of adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?". This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

Report Area	Total Population Age 20	Population with no Leisure Time Physical Activity	Percent Population with no Leisure Time Physical Activity
Barton County, MO	8,918	2,720	28.7%
Missouri	4,455,541	1,171,655	25.49%
United States	231,341,061	53,415,737	22.64%

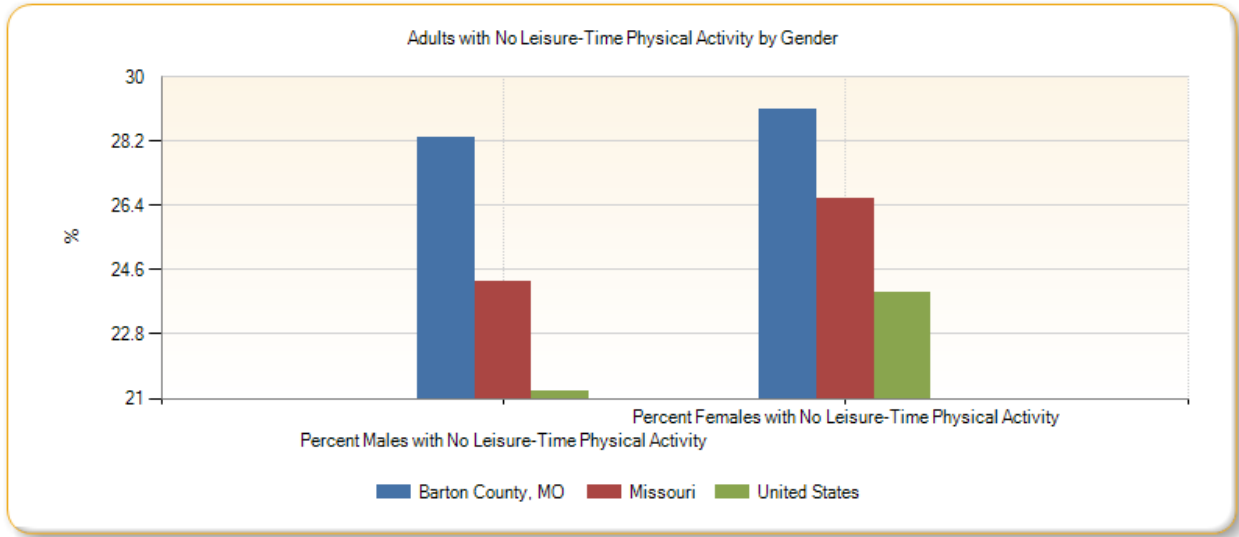


Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, [National Center for Chronic Disease Prevention and Health Promotion](#). Source geography: County

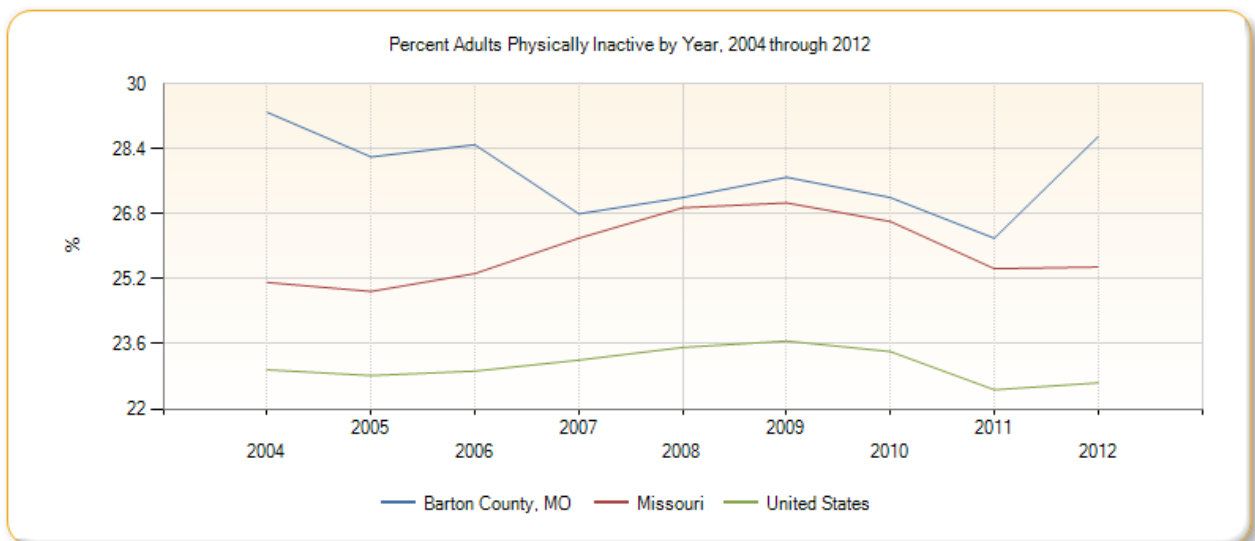
Adults with No Leisure-Time Physical Activity by Gender

Report Area	Total Males with No Leisure-Time Physical Activity	Percent Males with No Leisure-Time Physical Activity	Total Females with No Leisure-Time Physical Activity	Percent Females with No Leisure-Time Physical Activity
Barton County, MO	1,273	28.3%	1,447	29.1%
Missouri	533,714	24.27%	637,861	26.57%
United States	24,071,561	21.2%	29,344,293	23.94%



Percent Adults Physically Inactive by Year, 2004 through 2012

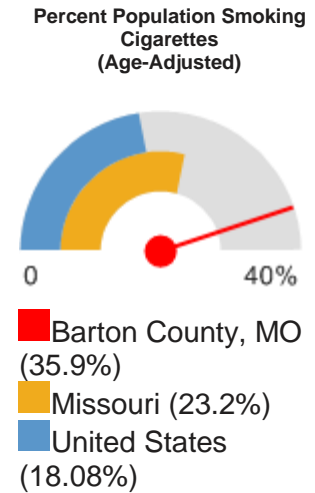
Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012
Barton County, MO	29.3%	28.2%	28.5%	26.8%	27.2%	27.7%	27.2%	26.2%	28.7%
Missouri	25.11%	24.89%	25.33%	26.2%	26.95%	27.07%	26.61%	25.45%	25.49%
United States	22.96%	22.82%	22.93%	23.2%	23.51%	23.67%	23.41%	22.47%	22.64%



Tobacco Usage - Current Smokers

This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.

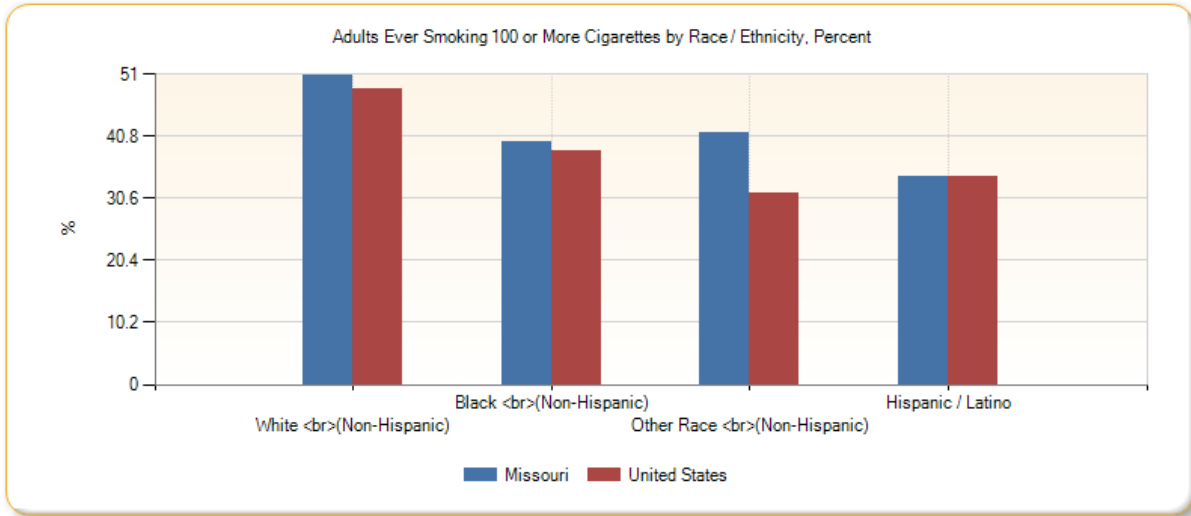
Report Area	Total Population Age 18	Total Adults Regularly Smoking Cigarettes	Percent Population Smoking Cigarettes (Crude)	Percent Population Smoking Cigarettes (Age-Adjusted)
Barton County, MO	9,242	no data	suppressed	35.9%
Missouri	4,532,155	1,024,267	22.6%	23.2%
United States	232,556,016	41,491,223	17.84%	18.08%



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
 Data Source: Centers for Disease Control and Prevention, [Behavioral Risk Factor Surveillance System](#). Accessed via the [Health Indicators Warehouse](#). Source geography: County

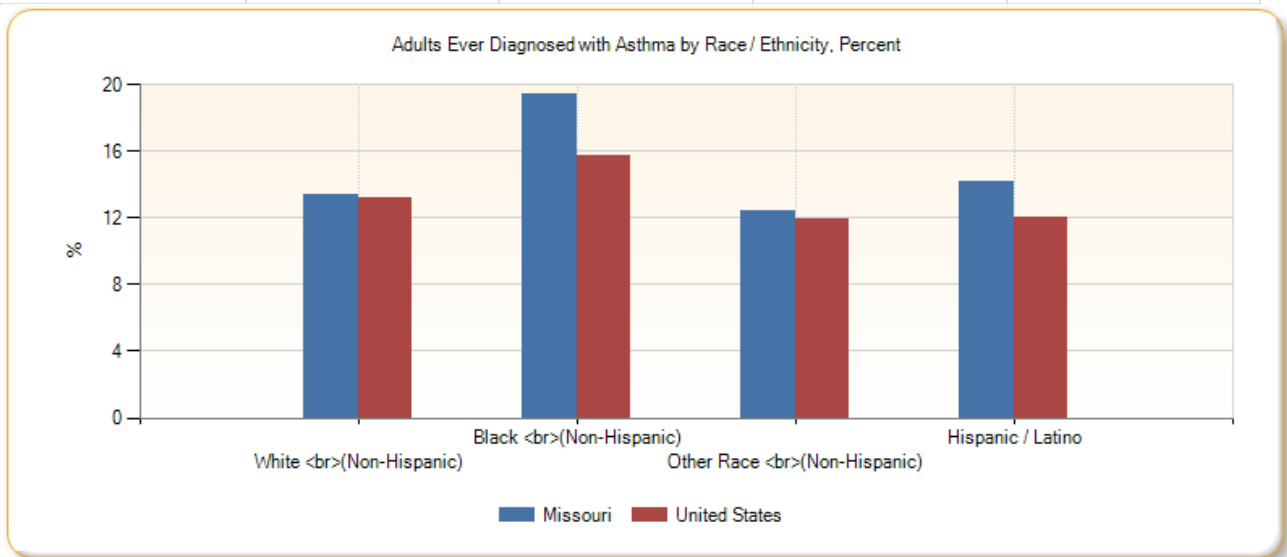
Adults Ever Smoking 100 or More Cigarettes by Race / Ethnicity, Percent

Report Area	White (Non-Hispanic)	Black (Non-Hispanic)	Other Race (Non-Hispanic)	Hispanic / Latino
Missouri	50.82%	39.9%	41.38%	34.04%
United States	48.52%	38.34%	31.3%	34.17%



Adults Ever Diagnosed with Asthma by Race / Ethnicity, Percent

Report Area	White (Non-Hispanic)	Black (Non-Hispanic)	Other Race (Non-Hispanic)	Hispanic / Latino
Missouri	13.35%	19.45%	12.46%	14.13%
United States	13.19%	15.75%	11.9%	12.02%

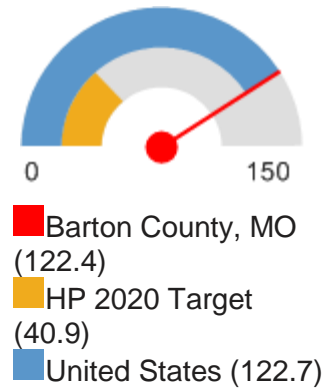


Cancer Incidence - Breast

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of females with breast cancer adjusted to 2000 U.S. standard population age groups (Under Age 1, 1-4, 5-9, ..., 80-84, 85 and older). This indicator is relevant because cancer is a leading cause of death and it is important to identify cancers separately to better target interventions.

Report Area	Female Population	Average New Cases per Year	Annual Incidence Rate (Per 100,000 Pop.)
Barton County, MO	6,292	10	122.4
Missouri	3,040,527	4,363	122.6
United States	155,863,552	216,052	122.7
HP 2020 Target			<= 40.9

Annual Breast Cancer Incidence Rate (Per 100,000 Pop.)

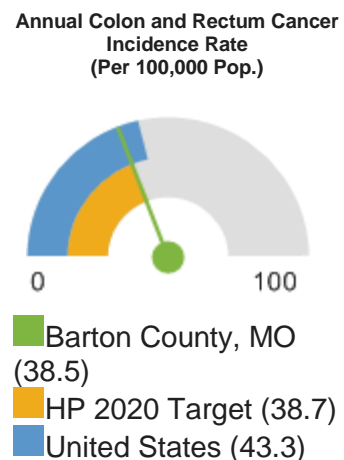


Note: This indicator is compared with the Healthy People 2020 Target. Data Source: National Institutes of Health, National Cancer Institute, [Surveillance, Epidemiology, and End Results Program](#). [State Cancer Profiles](#). Source geography: County

Cancer Incidence - Colon and Rectum

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of colon and rectum cancer adjusted to 2000 U.S. standard population age groups (Under age 1, 1-4, 5-9, ..., 80-84, 85 and older). This indicator is relevant because cancer is a leading cause of death and it is important to identify cancers separately to better target interventions.

Report Area	Total Population	Average New Cases per Year	Annual Incidence Rate (Per 100,000 Pop.)
Barton County, MO	12,506	7	38.5
Missouri	5,955,802	3,048	45.6
United States	306,603,776	142,173	43.3
HP 2020 Target			<= 38.7

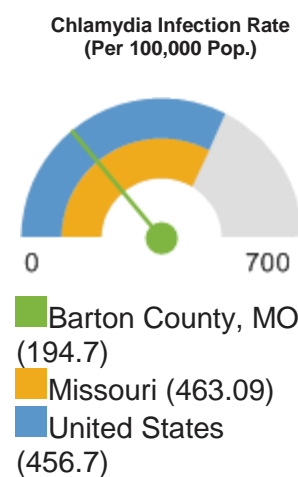


Note: This indicator is compared with the Healthy People 2020 Target. Data Source: National Institutes of Health, National Cancer Institute, [Surveillance, Epidemiology, and End Results Program](#). [State Cancer Profiles](#). Source geography: County

Chlamydia Incidence

This indicator reports incidence rate of chlamydia cases per 100,000 population. This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.

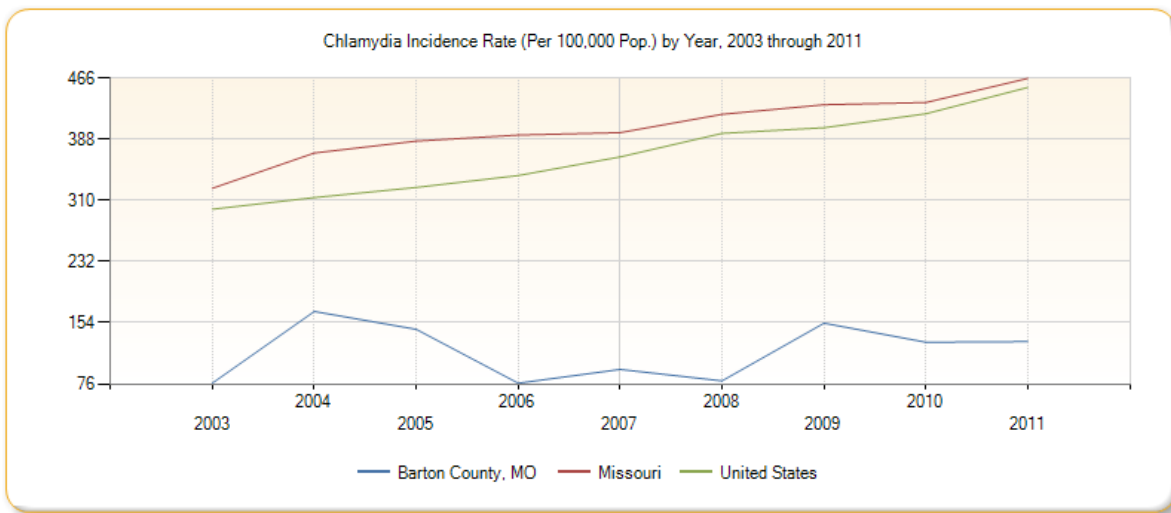
Report Area	Total Population	Total Chlamydia Infections	Chlamydia Infection Rate (Per 100,000 Pop.)
Barton County, MO	12,327	24	194.7
Missouri	6,010,688	27,835	463.09
United States	311,577,841	1,422,976	456.7



Note: This indicator is compared with the state average. Data Source: Centers for Disease Control and Prevention, [National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention](#). Source geography: County

Chlamydia Incidence Rate (Per 100,000 Pop.) by Year, 2003 through 2011

Report Area	2003	2004	2005	2006	2007	2008	2009	2010	2011
Barton County, MO	76.9	168.3	145.5	76.8	94.3	79.8	153.4	129	129.8
Missouri	325.53	370.47	385.69	393.34	396.5	419.8	432.03	434.95	465.64
United States	298.78	313.66	326.59	341.74	365.5	395.54	402.72	420.56	454.12

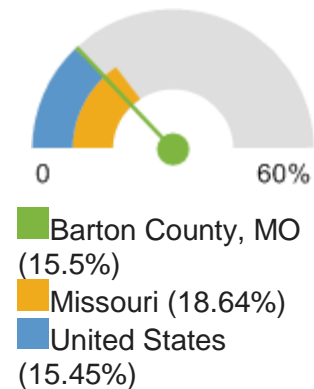


Depression (Medicare Population)

This indicator reports the percentage of the Medicare fee-for-service population with depression.

Report Area	Total Medicare Beneficiaries	Beneficiaries with Depression	Percent with Depression
Barton County, MO	2,020	313	15.5%
Missouri	771,145	143,706	18.64%
United States	34,126,305	5,271,176	15.45%

Percentage of Medicare Beneficiaries with Depression

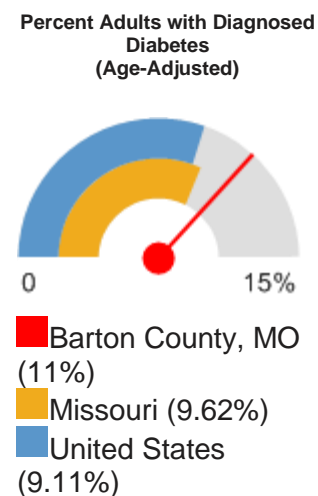


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
 Data Source: [Centers for Medicare and Medicaid Services](#). Source geography: County

Diabetes (Adult)

This indicator reports the percentage of adults aged 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

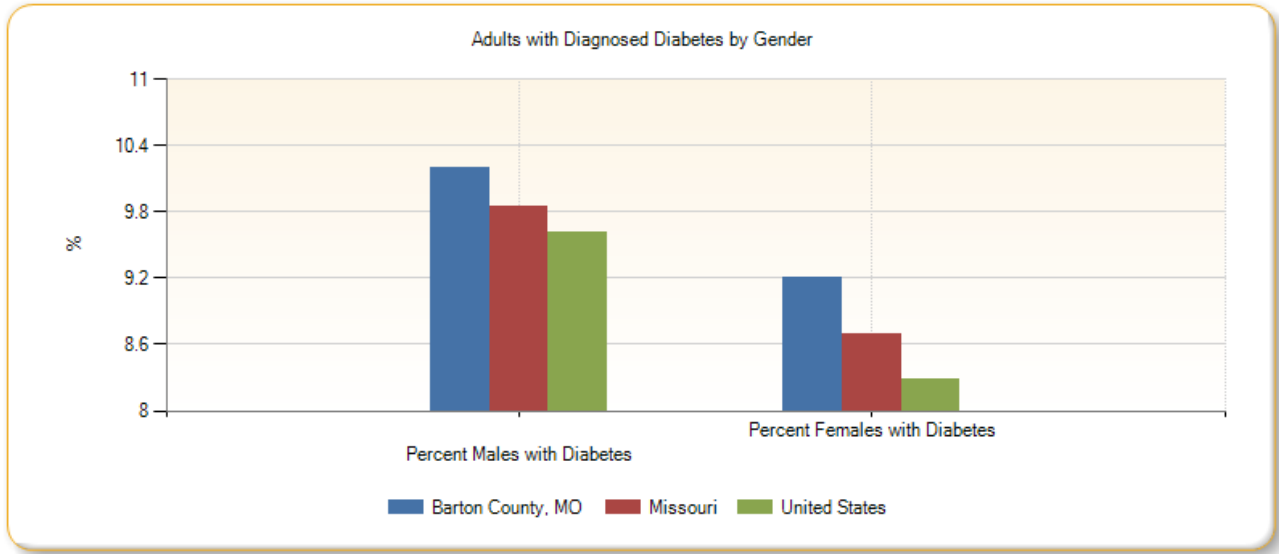
Report Area	Total Population Age 20	Population with Diagnosed Diabetes	Population with Diagnosed Diabetes, Crude Rate	Population with Diagnosed Diabetes, Age-Adjusted Rate
Barton County, MO	8,947	1,190	13.3	11
Missouri	4,451,148	476,233	10.7	9.62
United States	234,058,710	23,059,940	9.85	9.11



Note: This indicator is compared with the state average.
 Data Source: Centers for Disease Control and Prevention, [National Center for Chronic Disease Prevention and Health Promotion](#). Source geography: County

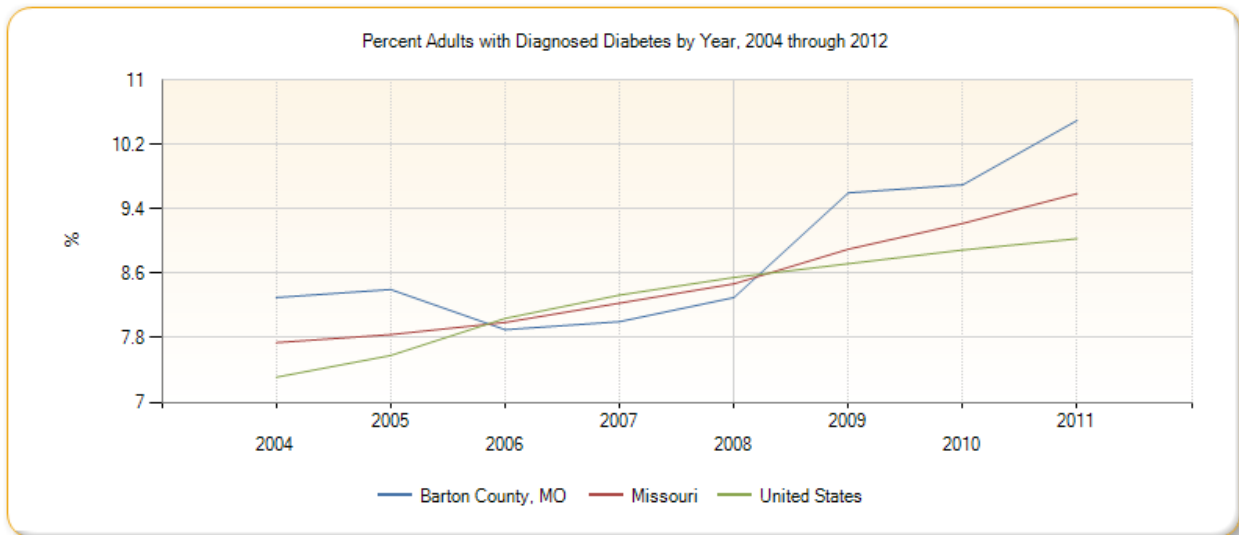
Adults with Diagnosed Diabetes by Gender

Report Area	Total Males with Diabetes	Percent Males with Diabetes	Total Females with Diabetes	Percent Females with Diabetes
Barton County, MO	514	10.2%	517	9.2%
Missouri	223,426	9.85%	221,473	8.69%
United States	10,907,085	9.62%	10,574,108	8.28%



Percent Adults with Diagnosed Diabetes by Year, 2004 through 2012

Report Area	2004	2005	2006	2007	2008	2009	2010	2011
Barton County, MO	8.3%	8.4%	7.9%	8%	8.3%	9.6%	9.7%	10.5%
Missouri	7.74%	7.84%	7.99%	8.23%	8.47%	8.9%	9.22%	9.59%
United States	7.31%	7.58%	8.04%	8.33%	8.55%	8.72%	8.89%	9.03%



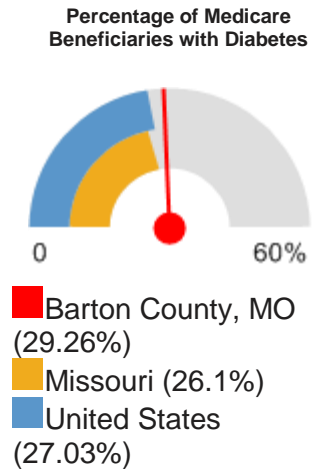
Diabetes (Medicare Population)

This indicator reports the percentage of the Medicare fee-for-service population with diabetes.

Report Area	Total Medicare Beneficiaries	Beneficiaries with Diabetes	Percent with Diabetes
Barton County, MO	2,020	591	29.26%
Missouri	771,145	201,307	26.1%
United States	34,126,305	9,224,278	27.03%

Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: [Centers for Medicare and Medicaid Services](#). Source geography: County



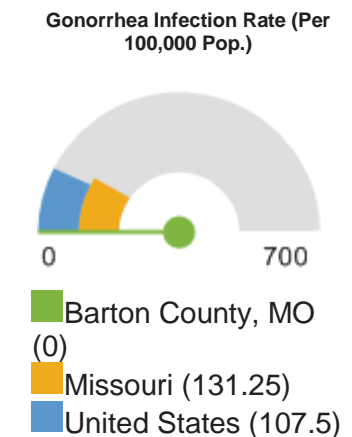
Gonorrhea Incidence

This indicator reports incidence rate of Gonorrhea cases per 100,000 population. This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.

Report Area	Total Population	Total Gonorrhea Infections	Gonorrhea Infection Rate (Per 100,000 Pop.)
Barton County, MO	12,327	0	0
Missouri	6,010,688	7,889	131.25
United States	311,466,046	334,826	107.5

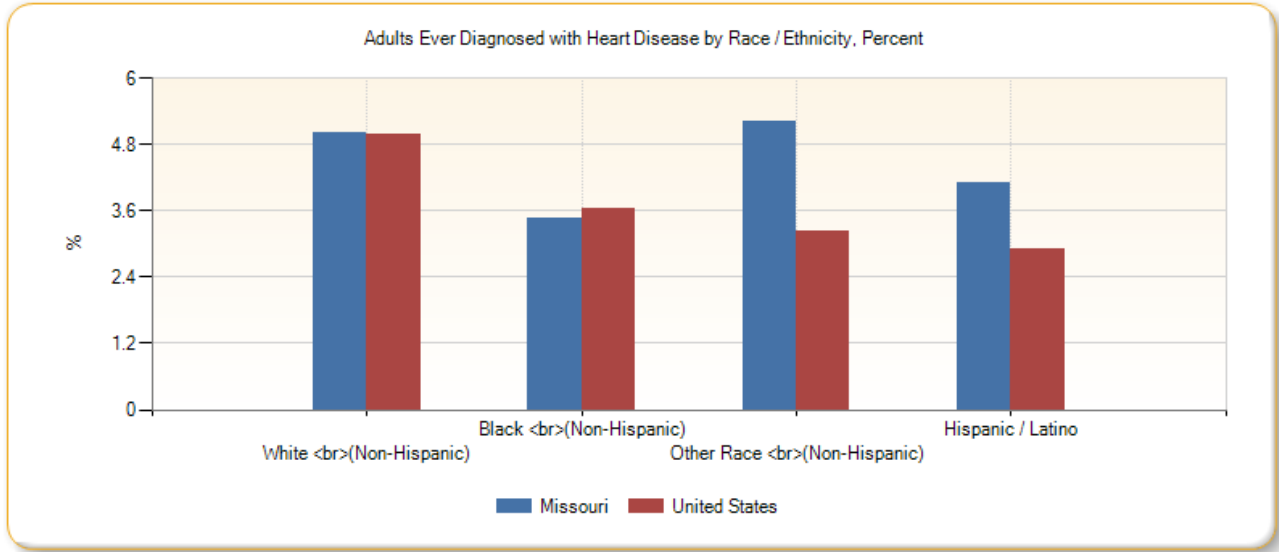
Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, [National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention](#). Source geography: County



Adults Ever Diagnosed with Heart Disease by Race / Ethnicity, Percent

Report Area	White (Non-Hispanic)	Black (Non-Hispanic)	Other Race (Non-Hispanic)	Hispanic / Latino
Missouri	5%	3.47%	5.21%	4.1%
United States	4.99%	3.63%	3.23%	2.92%

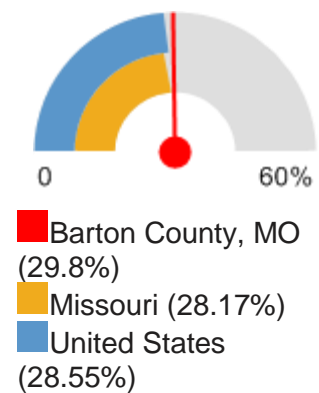


Heart Disease (Medicare Population)

This indicator reports the percentage of the Medicare fee-for-service population with ischaemic heart disease.

Report Area	Total Medicare Beneficiaries	Beneficiaries with Heart Disease	Percent with Heart Disease
Barton County, MO	2,020	602	29.8%
Missouri	771,145	217,195	28.17%
United States	34,126,305	9,744,058	28.55%

Percentage of Medicare Beneficiaries with Heart Disease



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: [Centers for Medicare and Medicaid Services](#). Source geography: County

High Blood Pressure (Medicare Population)

This indicator reports the percentage of the Medicare fee-for-service population with hypertension (high blood pressure).

Report Area	Total Medicare Beneficiaries	Beneficiaries with High Blood Pressure	Percent with High Blood Pressure
Barton County, MO	2,020	1,151	56.98%
Missouri	771,145	424,899	55.1%
United States	34,126,305	18,936,118	55.49%

Percentage of Medicare Beneficiaries with High Blood Pressure



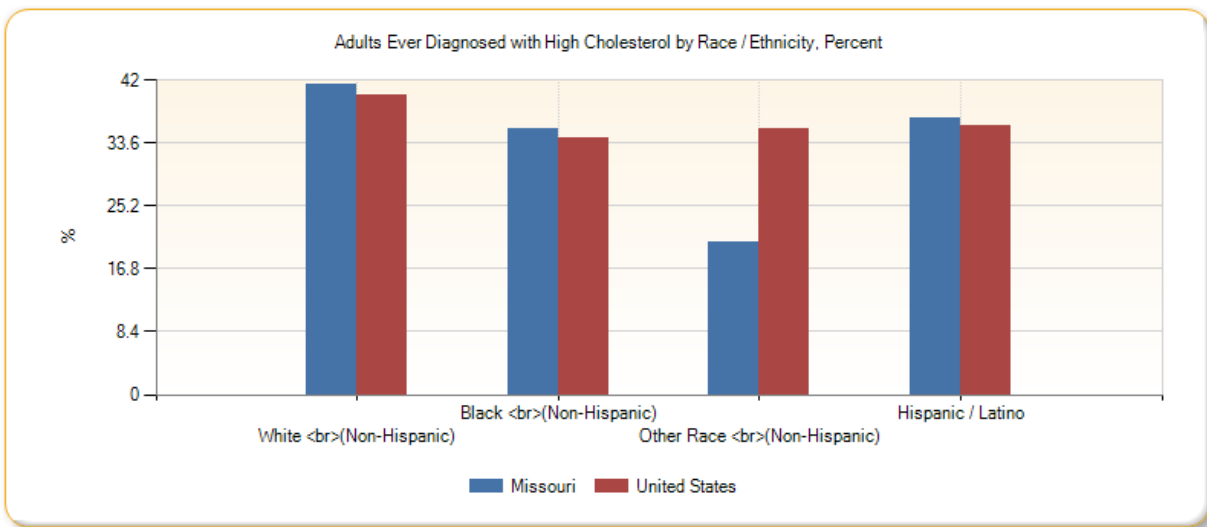
- Barton County, MO (56.98%)
- Missouri (55.1%)
- United States (55.49%)

Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: [Centers for Medicare and Medicaid Services](#). Source geography: County

Adults Ever Diagnosed with High Cholesterol by Race / Ethnicity, Percent

Report Area	White (Non-Hispanic)	Black (Non-Hispanic)	Other Race (Non-Hispanic)	Hispanic / Latino
Missouri	41.44%	35.54%	20.3%	36.98%
United States	39.95%	34.28%	35.42%	35.97%



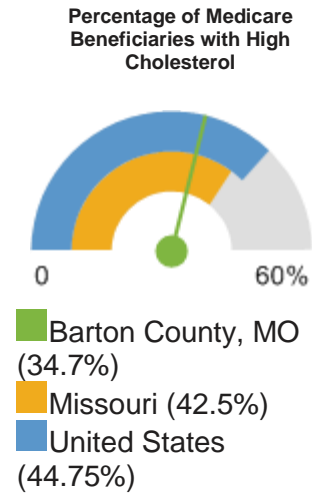
High Cholesterol (Medicare Population)

This indicator reports the percentage of the Medicare fee-for-service population with hyperlipidemia, which is typically associated with high cholesterol.

Report Area	Total Medicare Beneficiaries	Beneficiaries with High Cholesterol	Percent with High Cholesterol
Barton County, MO	2,020	701	34.7%
Missouri	771,145	327,740	42.5%
United States	34,126,305	15,273,052	44.75%

Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: [Centers for Medicare and Medicaid Services](#). Source geography: County

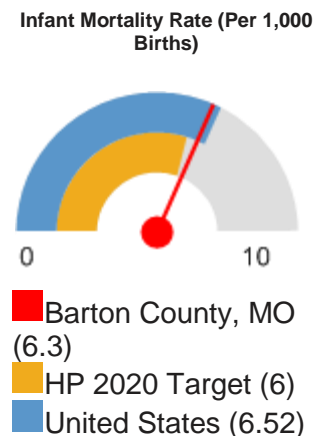


Infant Mortality

This indicator reports the rate of deaths to infants less than one year of age per 1,000 births. This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health.

Report Area	Total Births	Total Infant Deaths	Infant Mortality Rate (Per 1,000 Births)
Barton County, MO	735	5	6.3
Missouri	399,460	2,876	7.2
United States	20,913,535	136,369	6.52
HP 2020 Target			<= 6.0

Note: This indicator is compared with the Healthy People 2020 Target. Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#). Source geography: County

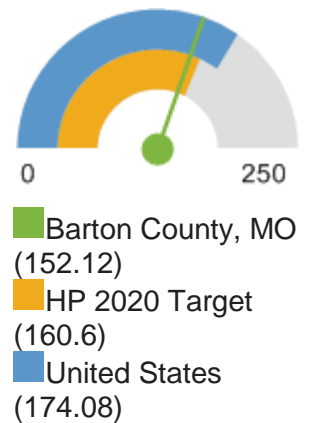


Mortality - Cancer

This indicator reports the rate of death due to malignant neoplasm (cancer) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because cancer is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Barton County, MO	12,508	26	204.67	152.12
Missouri	5,954,446	12,495	209.84	186.11
United States	306,486,831	569,481	185.81	174.08
HP 2020 Target				<= 160.6

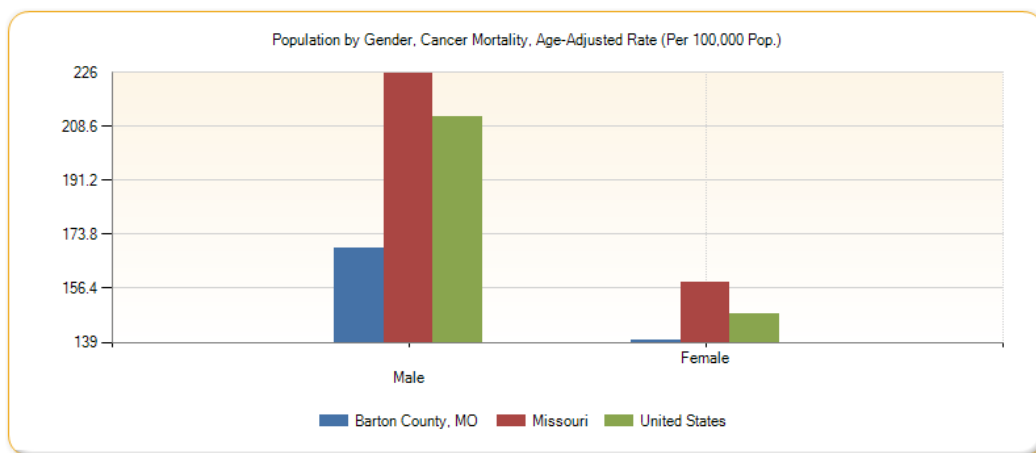
Cancer Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)



Note: This indicator is compared with the Healthy People 2020 Target. Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#). Source geography: County

Population by Gender, Cancer Mortality, Age-Adjusted Rate (Per 100,000 Pop.)

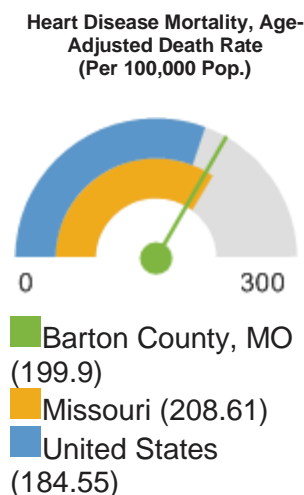
Report Area	Male	Female
Barton County, MO	169.22	139.01
Missouri	225.72	158.14
United States	211.52	147.92



Mortality - Heart Disease

Within the report area the rate of death due to coronary heart disease per 100,000 population is 199.9. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because heart disease is a leading cause of death in the United States.

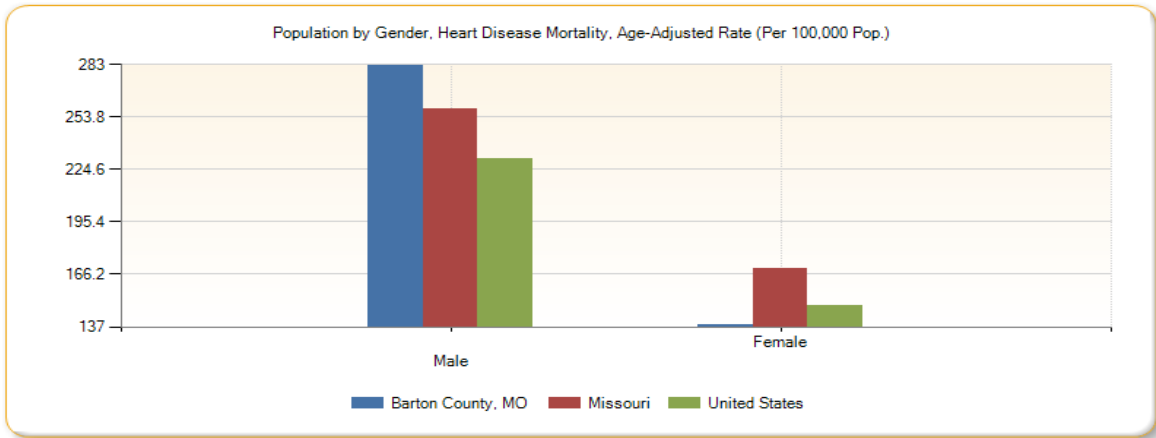
Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Barton County, MO	12,508	35	281.42	199.9
Missouri	5,954,446	14,110	236.96	208.61
United States	306,486,831	605,315	197.5	184.55



Note: This indicator is compared with the state average.
 Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#). Source geography: County

Population by Gender, Heart Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.)

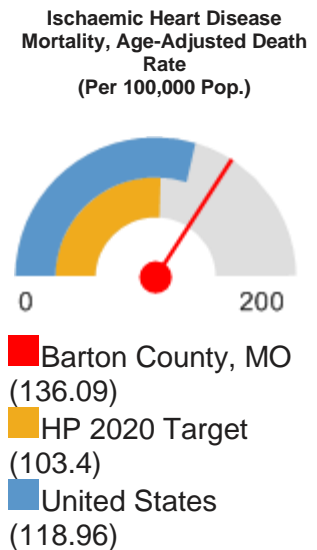
Report Area	Male	Female
Barton County, MO	282.4	137.57
Missouri	258.38	169.37
United States	230.61	148.54



Mortality - Ischemic Heart Disease

Within the report area the rate of death due to coronary heart disease per 100,000 population is 136.09. This rate is greater than than the Healthy People 2020 target of less than or equal to 103.4. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because heart disease is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Barton County, MO	12,508	24	190.28	136.09
Missouri	5,954,446	9,463	158.92	139.76
United States	306,486,831	390,568	127.43	118.96
<u>HP 2020 Target</u>				<= 103.4

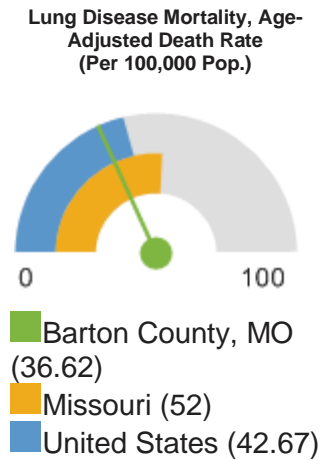


Note: This indicator is compared with the Healthy People 2020 Target. Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#). Source geography: County

Mortality - Lung Disease

This indicator reports the rate of death due to chronic lower respiratory disease per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because lung disease is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Barton County, MO	12,508	6	51.17	36.62
Missouri	5,954,446	3,470	58.28	52
United States	306,486,831	137,478	44.86	42.67



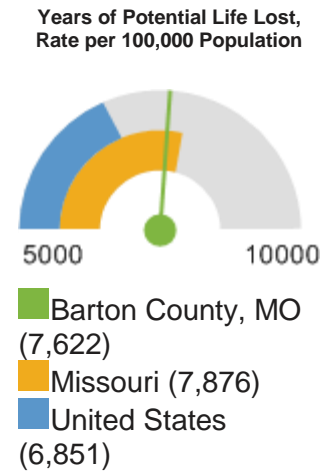
Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#). Source geography: County

Mortality - Premature Death

This indicator reports Years of Potential Life Lost (YPLL) before age 75 per 100,000 population for all causes of death, age-adjusted to the 2000 standard. YPLL measures premature death and is calculated by subtracting the age of death from the 75 year benchmark. This indicator is relevant because a measure of premature death can provide a unique and comprehensive look at overall health status.

Report Area	Total Population, 2008-2010 Average	Total Premature Deaths, 2008-2010 Average	Total Years of Potential Life Lost, 2008-2010 Average	Years of Potential Life Lost, Rate per 100,000 Population
Barton County, MO	12,327	50	940	7,622
Missouri	6,010,688	24,293	473,410	7,876
United States	311,616,188	1,074,667	21,327,690	6,851



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

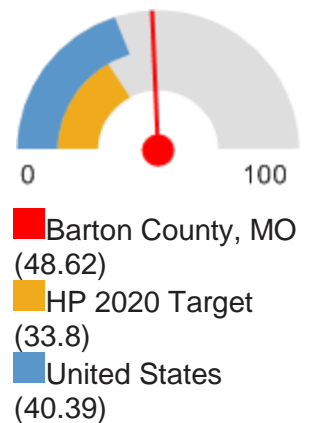
Data Source: University of Wisconsin Population Health Institute, [County Health Rankings](#). Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Source geography: County

Mortality - Stroke

Within the report area there are an estimated 48.62 deaths due to cerebrovascular disease (stroke) per 100,000 population. This is greater than than the Healthy People 2020 target of less than or equal to 33.8. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because stroke is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Barton County, MO	12,508	9	71.95	48.62
Missouri	5,954,446	3,108	52.2	46.13
United States	306,486,831	131,470	42.9	40.39
<u>HP 2020 Target</u>				<= 33.8

Stroke Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)



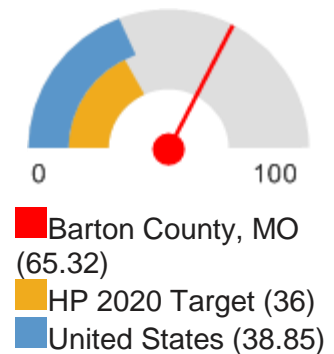
Note: This indicator is compared with the Healthy People 2020 Target. Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#). Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#). Source geography: County

Mortality - Unintentional Injury

This indicator reports the rate of death due to unintentional injury (accident) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because accidents are a leading cause of death in the U.S.

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Barton County, MO	12,508	10	76.75	65.32
Missouri	5,954,446	3,011	50.57	48.77
United States	306,486,831	122,185	39.87	38.85
HP 2020 Target				<= 36.0

Unintentional Injury (Accident) Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)



Note: This indicator is compared with the Healthy People 2020 Target.
 Data Source: Centers for Disease Control and Prevention, [National Vital Statistics System](#).
 Accessed via [CDC WONDER](#). Centers for Disease Control and Prevention, [Wide-Ranging Online Data for Epidemiologic Research](#). Source geography: County

Obesity

32.1% of adults aged 20 and older self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese) in the report area. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Report Area	Total Population Age 20	Adults with BMI > 30.0 (Obese)	Percent Adults with BMI > 30.0 (Obese)
Barton County, MO	8,935	2,886	32.1%
Missouri	4,456,386	1,365,174	30.35%
United States	231,417,834	63,336,403	27.14%

Percent Adults with BMI > 30.0 (Obese)

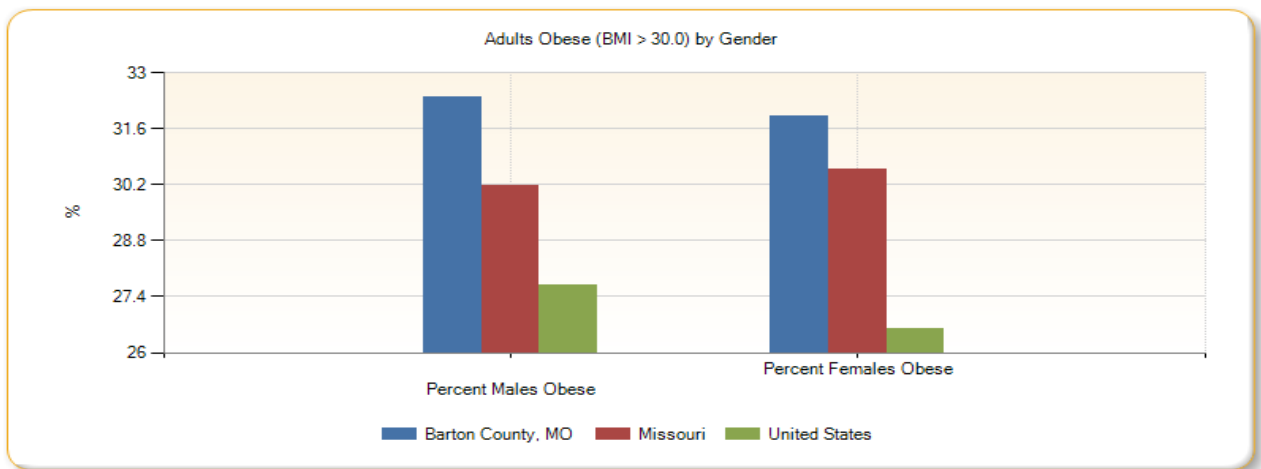


- Barton County, MO (32.1%)
- Missouri (30.35%)
- United States (27.14%)

Note: This indicator is compared with the state average.
 Data Source: Centers for Disease Control and Prevention, [National Center for Chronic Disease Prevention and Health Promotion](#). Source geography: County

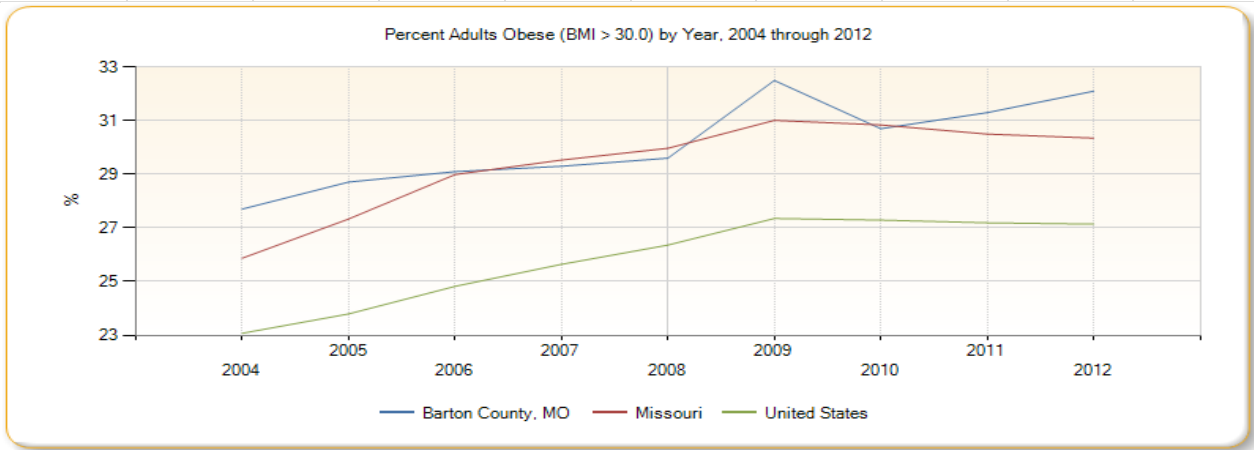
Adults Obese (BMI > 30.0) by Gender

Report Area	Total Males Obese	Percent Males Obese	Total Females Obese	Percent Females Obese
Barton County, MO	1,414	32.4%	1,472	31.9%
Missouri	658,134	30.17%	707,050	30.58%
United States	31,423,447	27.7%	31,912,963	26.59%



Percent Adults Obese (BMI > 30.0) by Year, 2004 through 2012

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012
Barton County, MO	27.7%	28.71%	29.1%	29.3%	29.6%	32.5%	30.7%	31.3%	32.1%
Missouri	25.87%	27.33%	28.99%	29.53%	29.97%	31.01%	30.84%	30.5%	30.35%
United States	23.07%	23.79%	24.82%	25.64%	26.36%	27.35%	27.29%	27.19%	27.14%



Obesity (Child)

This indicator reports the percentage of low-income children aged 2-4 whose Body Mass Index (BMI) is in the 95th percentile or above for their sex and age. BMI is based on height and weight. This indicator is relevant because excess weight is a prevalent problem in the U.S.; it indicates an unhealthy lifestyle and puts individuals at risk for further health issues.

Report Area	Estimated Total Low-Income Children Age 2-4	Estimated Number Obese	Estimated Percentage Obese
Barton County, MO	164	19	11.59%
Missouri	57,860	7,685	13.3%
United States	2,865,853	391,689	14.38%

Percent Low Income Children Age 2-4 Obese



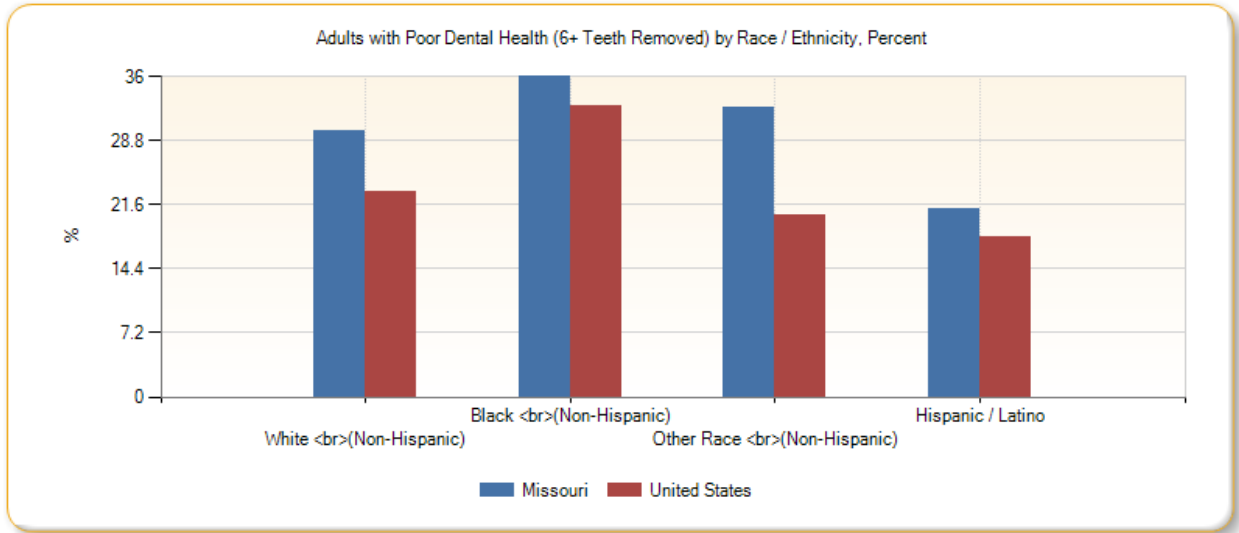
- Barton County, MO (11.59%)
- Missouri (13.3%)
- United States (14.38%)

Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: Centers for Disease Control and Prevention, [Pediatric Nutrition Surveillance System](#). Accessed via the USDA [Food Environment Atlas](#). Source geography: County

Adults with Poor Dental Health (6 Teeth Removed) by Race / Ethnicity, Percent

Report Area	White (Non-Hispanic)	Black (Non-Hispanic)	Other Race (Non-Hispanic)	Hispanic / Latino
Missouri	29.81%	35.95%	32.51%	21.11%
United States	22.98%	32.63%	20.47%	18.05%

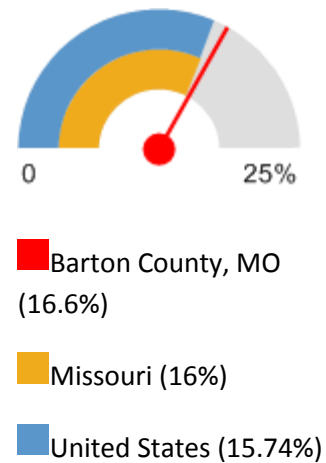


Poor General Health

This indicator is relevant because it is a measure of general poor health status.

Report Area	Total Population Age 18	Estimated Population with Poor or Fair Health	Crude Percentage	Age-Adjusted Percentage
Barton County, MO	9,242	no data	suppressed	16.6%
Missouri	4,532,155	765,934	16.9%	16%
United States	232,556,016	37,766,703	16.24%	15.74%

Percent Adults with Poor or Fair Health (Age-Adjusted)













Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. Source geography: County

(Community Commons Maps and Data).

Barton (BR) County Snapshot

	Barton County	Trend(Click for info)	Error Margin	Top U.S. Performers*	Missouri	Rank (of 115)
Health Outcomes						48
Length of Life						37
Premature death	7,622		5,840-9,404	5,317	7,827	
Quality of Life						67
Poor or fair health	17%		11-24%	10%	16%	
Poor physical health days	5.2		2.4-8.1	2.5	3.7	
Poor mental health days				2.4	3.8	
Low birthweight	7.1%		5.5-8.6%	6.0%	8.1%	
Health Factors						73
Health Behaviors						34
Adult smoking				14%	23%	
Adult obesity	31%		24-39%	25%	31%	
Food environment index	7.1			8.7	7.3	
Physical inactivity	29%		21-38%	21%	27%	
Access to exercise opportunities	44%			85%	70%	
Excessive drinking				10%	17%	
Alcohol-impaired driving deaths	15%			14%	34%	
Sexually transmitted infections	130			123	464	
Teen births	47		39-55	20	41	
Clinical Care						108
Uninsured	19%		17-21%	11%	16%	
Primary care physicians	2,465:1			1,051:1	1,455:1	
Dentists	12,337:1			1,392:1	1,985:1	
Mental health providers	2,467:1			521:1	947:1	

	Barton County	Trend(Click for info)	Error Margin	Top U.S. Performers*	Missouri	Rank (of 115)
Preventable hospital stays	120		104-136	46	72	
Diabetic screening	85%		72-98%	90%	86%	
Mammography screening	49%		35-62%	71%	62%	
Social & Economic Factors						72
High school graduation	87%				82%	
Some college	55%		45-64%	70%	63%	
Unemployment	8.4%			4.4%	6.9%	
Children in poverty	27%		20-35%	13%	23%	
Inadequate social support				14%	19%	
Children in single-parent households	21%		12-31%	20%	33%	
Violent crime	169			64	466	
Injury deaths	100		77-128	49	73	
Physical Environment						75
Air pollution - particulate matter	8.7			9.5	10.2	
Drinking water violations	42%			0%	4%	
Severe housing problems	12%		9-16%	9%	14%	
Driving alone to work	81%		77-84%	71%	81%	
Long commute - driving alone	27%		21-32%	15%	30%	
Demographics						
Population				12,337	6,021,988	
% below 18 years of age				26%	23%	
% 65 and older				18%	15%	
% Non-Hispanic African American				0%	12%	
% American Indian and Alaskan Native				1%	1%	

	Barton County	Trend(Click for info)	Error Margin	Top U.S. Performers*	Missouri	Rank (of 115)
% Asian			0%	2%		
% Native Hawaiian/Other Pacific Islander			0%	0%		
% Hispanic			2%	4%		
% Non-Hispanic white			94%	81%		
% not proficient in English			1%	1%		
% Females			51%	51%		
% Rural			64%	30%		
Health Outcomes						
Diabetes			12%	10%		
HIV prevalence rate				223		
Premature age-adjusted mortality			370	387		
Infant mortality				8		
Child mortality				65		
Health Behaviors						
Food insecurity			16%	17%		
Limited access to healthy foods			9%	6%		
Motor vehicle crash deaths			31	17		
Drug poisoning deaths				13		
Health Care						
Uninsured adults			24%	20%		
Uninsured children			9%	7%		
Health care costs			\$10,401	\$9,652		
Could not see doctor due to cost				14%		
Other primary care providers			3,084:1	1,843:1		

	Barton County	Trend(Click for info)	Error Margin	Top U.S. Performers*	Missouri	Rank (of 115)
Social & Economic Factors						
Median household income				\$37,460	\$45,320	
Children eligible for free lunch				44%	37%	
Homicide rate					7	

* Data supplied on behalf of state

Note: Blank values reflect unreliable or missing data

(Missouri 2014)

Rankings & roadmaps [Health rankings]. (2014). Unpublished instrument. Retrieved from

<http://www.countyhealthrankings.org/app/missouri/2014/overview>

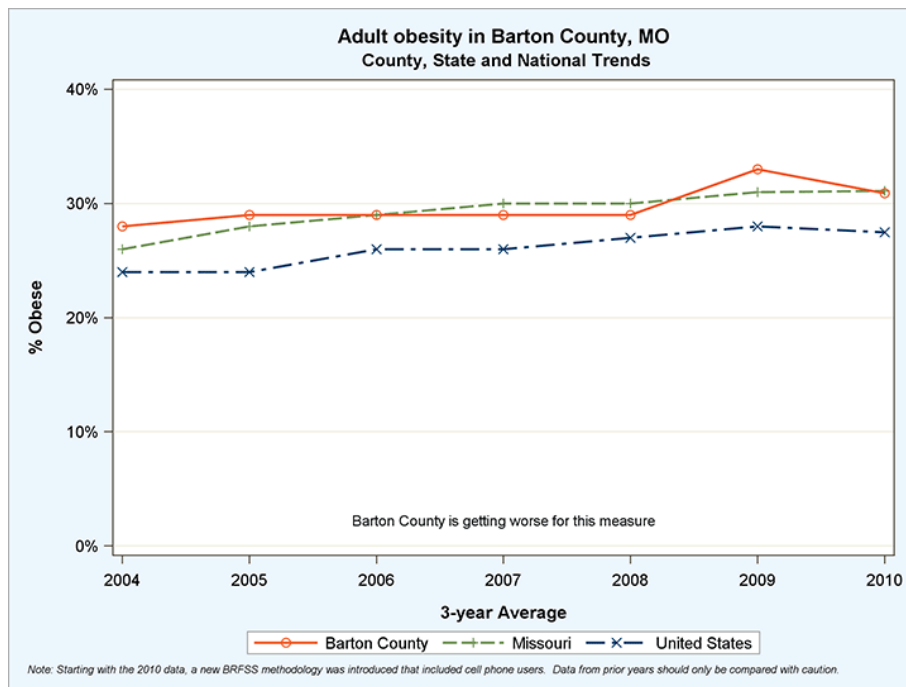


Figure 1

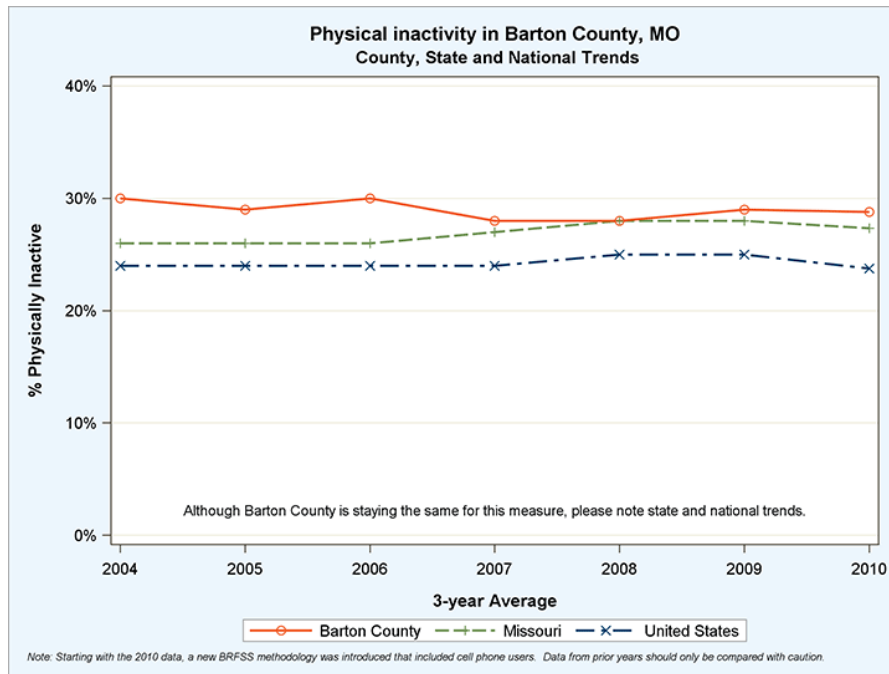


Figure 2

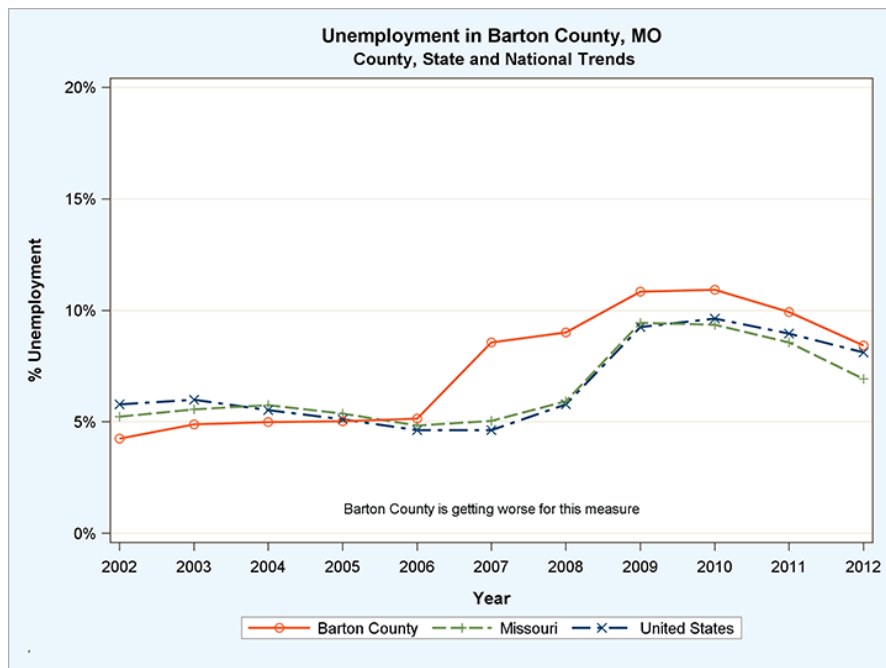


Figure 3

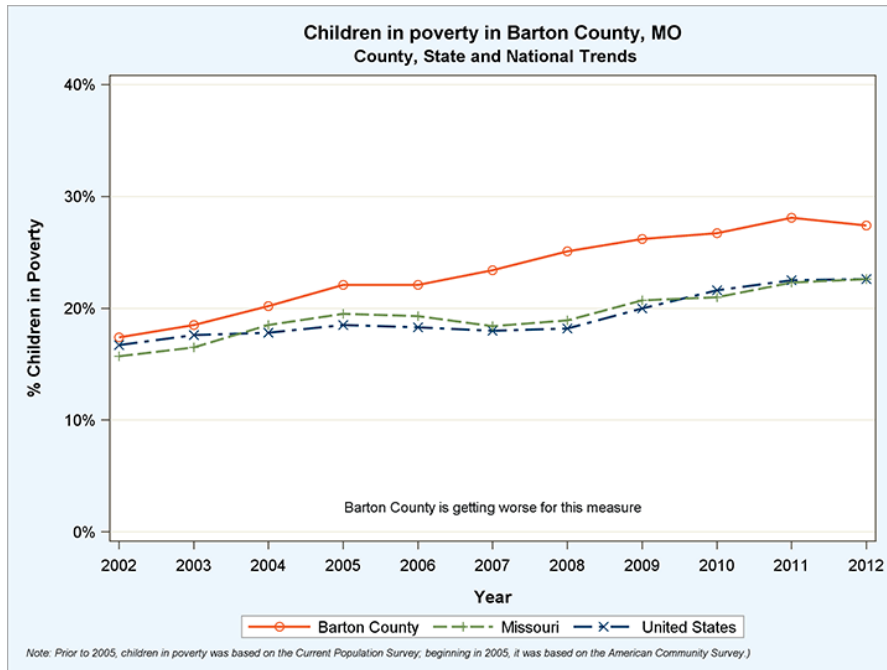


Figure 4

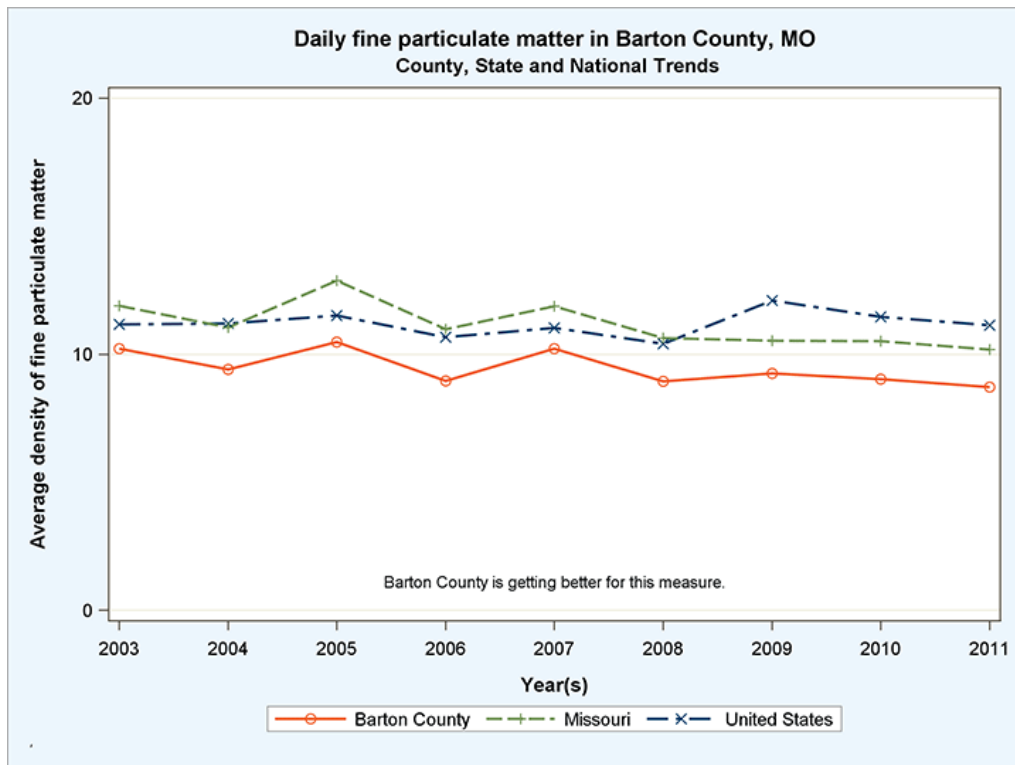


Figure 5

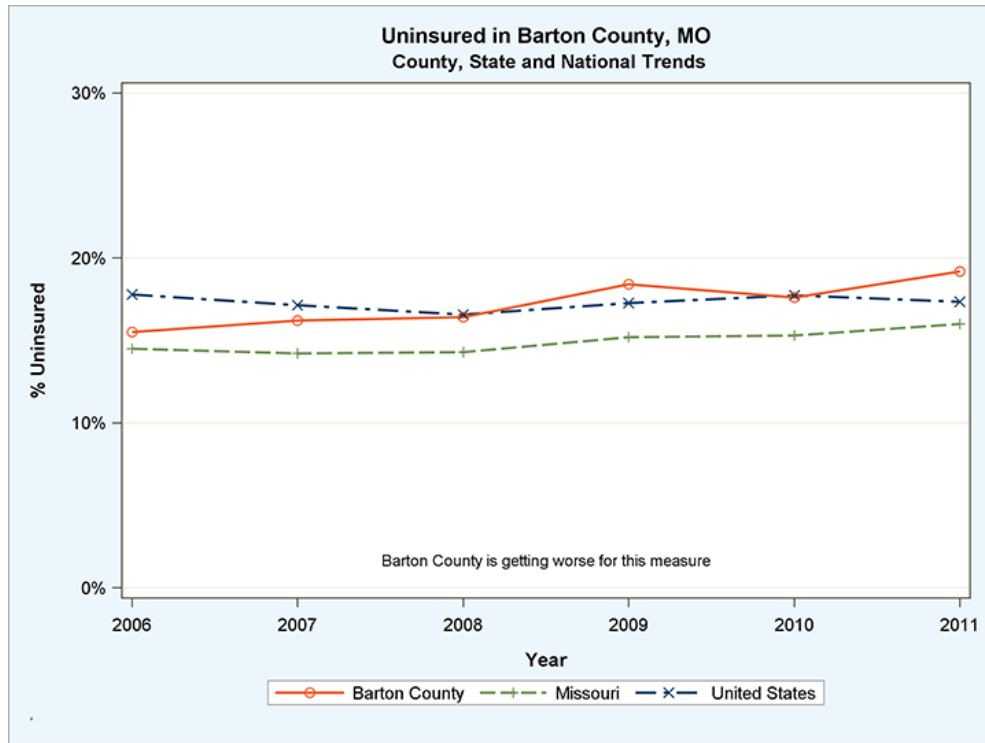


Figure 6

(Missouri 2014)