

2022

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# MONETT COMMUNITY SUMMARY


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Regional Health  
Assessment



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**“There is mental health stigma and a lot of shame. People don’t admit it at initial intake, but once you build relationships, they’re more likely to trust.”**

**-Monett Community member**

# INTRODUCTION

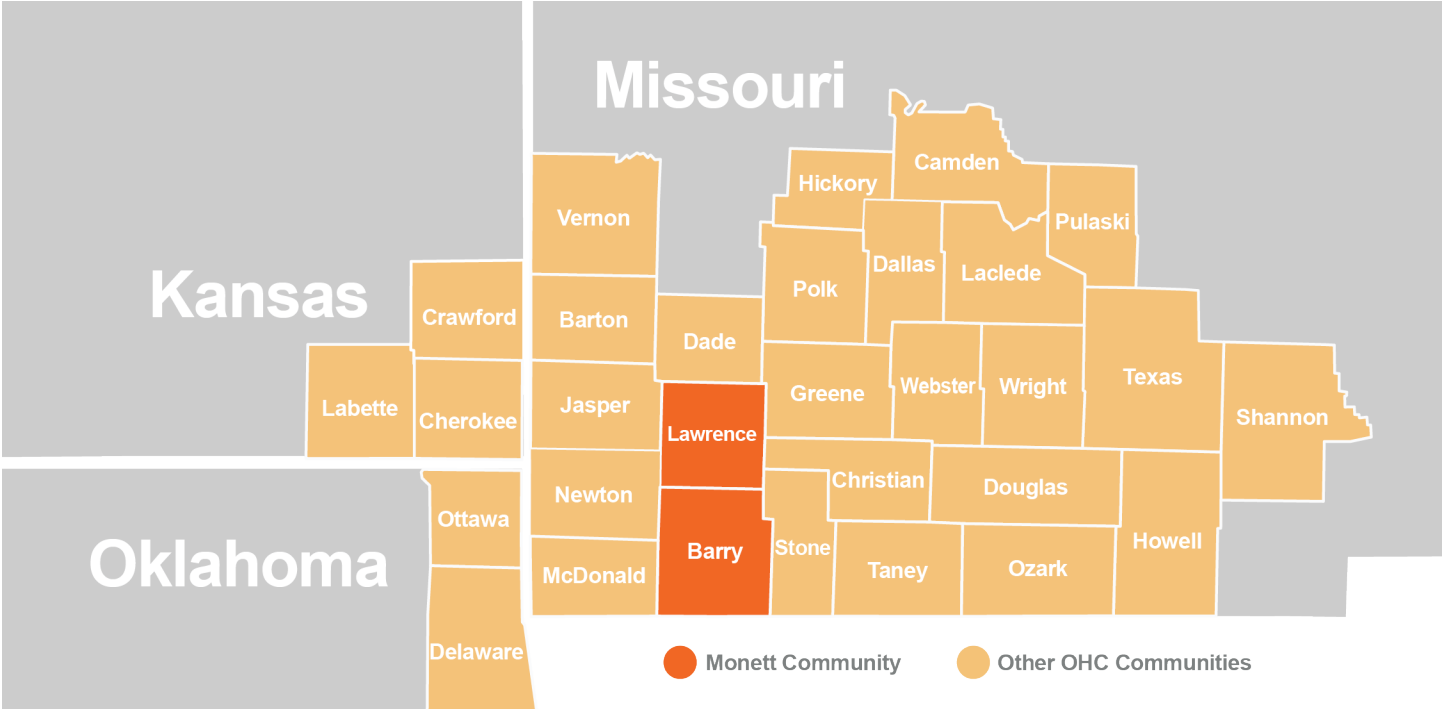


Every three years since 2016, organizations under the umbrella of Ozarks Health Commission (the Commission) come together to publish a Regional Health Assessment (RHA). The Commission's work has been recognized at the annual meeting of the American Public Health Association, honored as a Promising Practice by the National Association of County and City Health Officials and awarded the Group Merit Award from the Missouri Public Health Association.

Building upon the success of the 2016 and 2019 regional health assessments, in 2021 partners again sought to better understand the health status, behaviors and needs of the populations served. The resulting 2022 Regional Health Assessment combines more than 200 hospital and community indicators with feedback from stakeholders and citizens. The region includes counties spanning southwest Missouri, southeast Kansas and northeast Oklahoma. The full Ozarks Health Commission RHA can be found at [ozarkshealthcommission.org](http://ozarkshealthcommission.org).

Within the Commission Region, seven multi-county communities were defined based on hospital service areas. The Monett Community is a two-county area that is serviced by CoxHealth Center Monett. The Monett Community Summary presents key findings for the area and describes the process used to prioritize the top assessed health issues of concern. The document provides local stakeholders and organizations with information necessary to better understand the health needs of the community.

# SERVICE AREA



The Monett Community is made up of 2 counties: Lawrence and Barry. These counties were based on the participating hospitals serving this area: Mercy Hospital Cassville, Mercy Hospital Aurora and CoxHealth Hospital Monett. The area includes state parks, lakes, rural communities, small townships, and three cities, including Monett, Cassville and Aurora.

Monett is the most-populous city the Community, with an estimated population of 9,576 people, according to the 2020 census. Cassville is a city in Flat Creek Township, Barry County, Missouri. It was established as the county seat of Barry County in 1845. Cassville has a population of just over 3,300. Cassville is minutes away from Roaring River State Park and Table Rock Lake. Aurora is known as “the Summit City of the Ozarks,” as the town sits on a high plateau in the southwest corner of Missouri in Barry County. The population of Aurora is approximately 7,900 individuals. It was reportedly named Aurora after the Roman goddess of dawn.

## POPULATION OVERVIEW

The Commission noted several important demographic and population trends within the Monett Community. This 2-county Community is home to 73,734 individuals, a decline of 2.3% between 2000 and 2010. A shrinking population can lead to aging populations, job losses, declining tax revenues and shrinking schools and neighborhoods. These effects can already be seen today with nearly 24% of the Community being under the age of 17, while approximately 33% are over the age of 55. Meaning, that the population is, on average, older than both the Region and nation. Older residents are more likely to be living with chronic illnesses and require access to more health services. Further, approximately 43% of the Community is within the age grouping of 18-64, which drives the workforce in the community.

### MONETT DEMOGRAPHICS



#### FAMILIES

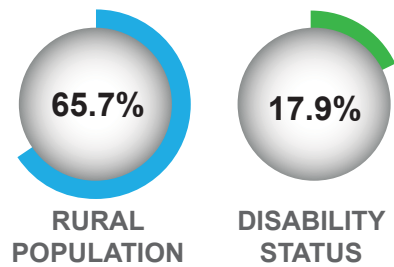
Families with children make up **30.5%** of the Monett Community population.



#### POPULATION

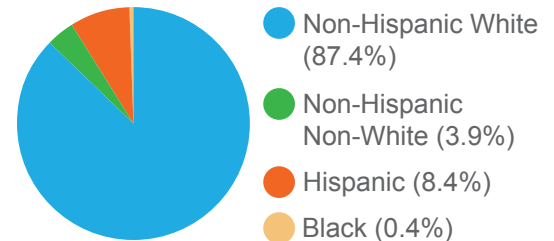
The Monett Community population has **decreased** by **2.3%** since 2010.

Approximately 18% of the total population is living with a disability, which is higher than the OHC Region rate at 17.3% and national rate of 12.62%. This may contribute to access to care and disparities amongst the disability community members, which should be considered when planning for improvement in rural versus urban areas.



A few of these factors contribute to the overall vulnerability of the population of the Community. Vulnerable populations, such as people in poverty, minorities and the elderly, often experience higher rates of chronic illness and worse health outcomes. To ensure vulnerable and at-risk populations were considered when identifying and addressing community health needs, the Commission identified them in each Community using the Center for Disease Control and Prevention (CDC) Social Vulnerability Index (SVI).

### RACE & ETHNICITY



Using U.S. Census and American Community Survey data, the SVI identifies the most vulnerable groups across all comparative census tracts. Out of the highest vulnerability score of 1.0, the Monett Community has an overall SVI score of 0.8, meaning that it is more vulnerable than 80% of the rest of counties in the OHC Region. Scores

for Socioeconomic Status (0.7), Household Composition and Disability (0.8), and Minority Status and Language (0.6) demonstrate significant vulnerability of the local population. Homeless students' status (4.3) is above the OHC region (4.2), Missouri (4.0) and the United States (3.0).

Monett has a higher rate of physical inactivity (30%), tobacco use (23.8%) than the OHC Region, Missouri, and the U.S. These are all areas of concern and result in poorer health outcomes.

### WHAT MAKES A POPULATION VULNERABLE?

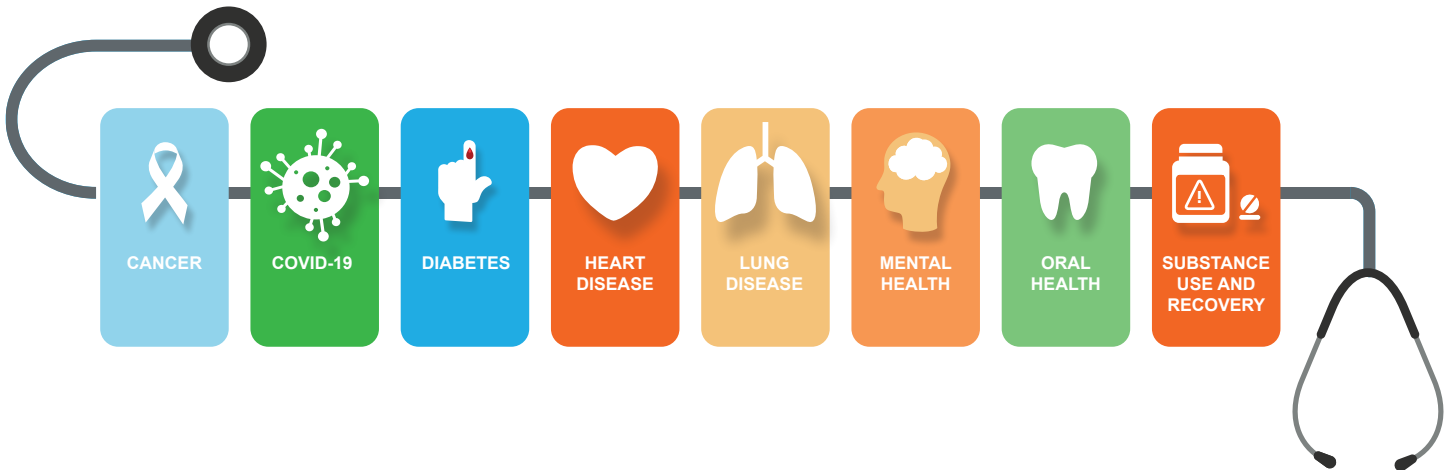
		Barry County	Lawrence County	Monett Community
<b>SOCIO-ECONOMIC STATUS</b>	<b>Below Poverty</b>	0.80	0.55	0.68
	<b>Unemployed</b>	0.46	0.71	0.58
	<b>Income</b>	0.71	0.61	0.66
	<b>No High School Diploma</b>	<b>0.81</b>	0.77	0.79
<b>HOUSEHOLD COMPOSITION &amp; DISABILITY</b>	<b>Aged 65+</b>	0.62	0.39	0.50
	<b>Under Age 18</b>	0.42	<b>0.91</b>	0.67
	<b>Disability Status</b>	0.63	0.66	0.64
	<b>Single-Parent Households</b>	0.39	0.60	0.49
<b>MINORITY STATUS &amp; LANGUAGE</b>	<b>Minority</b>	<b>0.82</b>	0.70	0.76
	<b>Speaks English "Less than Well"</b>	<b>0.97</b>	<b>0.93</b>	<b>0.95</b>
<b>HOUSING TYPE &amp; TRANSPORTATION</b>	<b>Multi-Unit Structures</b>	0.22	0.49	0.36
	<b>Mobile Homes</b>	<b>0.83</b>	0.49	0.66
	<b>Crowding</b>	<b>0.99</b>	<b>0.94</b>	<b>0.96</b>
	<b>No Vehicle</b>	0.27	0.44	0.36
	<b>Group Quarters</b>	0.04	0.37	0.21

Unless otherwise noted, all numbers are percentile rankings with values ranging from 0 to 1, with higher values indicative of greater vulnerability. Percentiles are from the CDC's SVI data.

**Orange highlight:** The population in this county is more vulnerable than 90% of all other counties in its respective state.

**Blue highlight:** The population in this county is more vulnerable than 80% of all other counties in its respective state.

# ASSESSED HEALTH ISSUES



Commission stakeholders began the RHA process with analysis of publicly available health data (secondary data) and participating health systems' emergency room utilization data (primary data) to identify health issues of greatest concern across the region. The result was a ranked list of eight Ozarks Health Commission Region health issues. A full description of the health issues and indicators used can be found in the OHC Regional Health Assessment.

To represent diverse views from across the region and population, qualitative data was garnered. Across the OHC Region, these viewpoints were solicited via 75 individual interviews, 10 focus groups and 2,638 surveys. Methodologies used for the initial scoring/ranking of the health issues and the full report of the qualitative work can be found in the OHC Regional Report. This prioritization information can be used by organizations to develop community health improvement plans, guide decision-making, and foster collaboration across initiatives.

During September and October 2021, four individual interviews, in addition to ten virtual focus group discussions in both Barry and Lawrence Counties were completed. Those interviewed represented health and social service organizations, education and community collaboratives.

Of the 2,628 survey respondents from the Region, 5.28% indicated they lived in the Monett Community. Respondents were asked to rank perceived community needs, and the top 10 that emerged were:

1. Drug and other substance abuse treatment and rehabilitation services, including detox
2. Emergency mental health services for issues such as suicidal thinking or actions, homicidal thinking or actions, self-harm, or harm to others
3. Integrated care, or where people can get medical care and counseling at the same time
4. Affordable, quality childcare
5. Drug and other substance abuse, education, prevention, and early intervention services
6. Coordination of patient care between the hospital and other clinics, private doctors, or others
7. Counseling services for mental health issues such as depression, anxiety, trauma, or others for adults
8. Counseling services for mental health issues such as depression, anxiety, trauma, or others for adolescents and children
9. Affordable housing
10. Social services (other than healthcare) for people experiencing homelessness

Those interviewed represented health and social service organizations, education and community collaboratives. Stakeholders, education and community individual interviews and focus groups agreed that a top challenge was access to mental health services and healthcare. This information was considered during the process of establishing health priorities for the Monett Community. Methodologies used for the initial scoring/ranking of the health issues and the full report of the qualitative work can be found in the OHC Regional Report. This prioritization information can be used by organizations to develop community health improvement plans, guide decision-making, and foster collaboration across initiatives.

**MONETT COMMUNITY HEALTH PRIORITIES**

Each Commission Community convened stakeholders to assess the feasibility of addressing the health issues identified through primary and secondary data sources, and further illuminated the qualitative community feedback. In the Monett Community, this was organized by Heather Coulter, Director of Community Health Improvement for CoxHealth and was held virtually Tuesday, February 15, with every effort made to invite all public health agencies, organizations engaged by Crescendo Consulting, CHC members and leaders of vulnerable and underrepresented communities.

Based on the eight health issues identified by the Commission using publicly available and participating health systems' data, stakeholders from the Monett Community convened to further discuss top priorities for the community.

The feasibility of changing each issue and readiness to address each issue was assessed. Feasibility rankings were influenced by stakeholders' perceptions of the readiness of the community to address an issue, existing initiatives or momentum, whether leadership was established around the condition, perceived feasibility to change, complexity of the issue and the time frame to improve the issue (within 2-3 years or more than 2-3 years). The higher the score, the more significant the impact of the condition on the community, and the more difficult the condition was to address.

Participants using a short survey, which was opened one week before the meeting, assessed feasibility. Survey responses equaled roughly 50% of the total weighted ranking for each health issue.

**MONETT COMMUNITY PRIORITIZATION**

Rank	Initial Ranking Emergency Department and Public Health Data	Final Ranking Emergency Department, Public Health and Feasibility Data	Rank Change
1	Oral Health 3.67	COVID-19 2.92	+3
2	Lung Disease 3.32	Oral Health 2.91	-1
3	Heart Disease 2.99	Lung Disease 2.89	-1
4	COVID-19 2.83	Heart Disease 2.76	-1
5	Diabetes 2.67	Diabetes 2.69	no change
6	Mental Health 2.44	Mental Health 2.66	no change
7	Cancer 2.25	Cancer 2.14	no change
8	Substance Use & Recovery 1.42	Substance Use & Recovery 2.11	no change



**MENTAL HEALTH**

Mental health includes a person's emotional, psychological and social well-being. It affects how individuals think, feel and act. A person's mental health status also contributes to how they handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. Many factors contribute to mental health problems, including biology (factors such as genes or brain chemistry), life experiences (such as trauma or abuse) and family history. Within the broad category of mental health, mental illness specifically refers to all diagnosable mental disorders. Mental illness can be chronic or acute. An acute mental health crisis will require different intervention than managing a chronic mental illness.



**Twenty-two percent** of all emergency department visits associated with an assessed health issue were due to mental health or substance use.



Men in the Monett Community were **33% more likely** to visit the emergency department with a mental illness diagnosis.



Younger (under age 18) and older (over age 65) residents are less likely to be diagnosed with a mental health substance use and recovery diagnosis in the Monett Community.

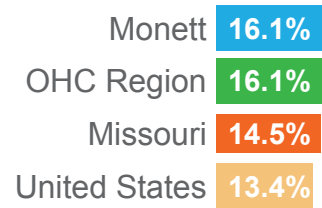


Community-level data used to analyze and prioritize mental health is limited, but what local data is available is convincing and of great concern among care providers, public health and healthcare partners, media and the community. Although the prevalence of depression (18.9%) is lower than the state and OHC Region average, the number of self-reported poor mental health days in a 30-day period throughout the Monett Community is 16.1%, higher than the OHC Region, state, and national rates. Moreover, the suicide mortality rate in the Monett Community is nearly 30% higher than the state and national rates.

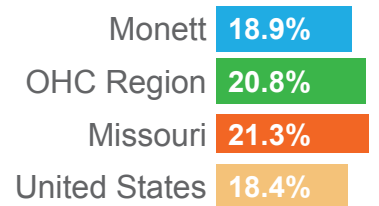
The rate of mental health providers in the Monett Community is more than 92% lower than the state rate per 100,000 residents. In the Community, there are 14.9 providers per 100,000 residents, compared to 204.2 per 100,000 for all of Missouri. Even if there were ample providers in the Community, an inability to pay for mental health services would remain a barrier. One in three emergency department visits for mental health in the Monett Community were classified as self-pay, meaning the patient would either be required to pay out-of-pocket or the hospital would be required to utilize safety net funds to cover the treatment. Moreover, the second most common way of paying for an emergency room visit associated with a mental health substance use and recovery diagnosis is through Medicaid, indicating a financial or lifestyle hardship for the patient.

Community stakeholders recount that the COVID-19 pandemic has made mental health more relevant. They are seeing "...very little treatment options and very few therapists who work with children". Furthermore, mental health issues influence the onset, development, and effects of physical illnesses. Making the improvement of this already concerning health issue a priority for the Monett Community.

## POOR MENTAL HEALTH

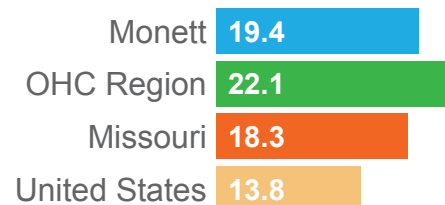


## DEPRESSION PREVALENCE



*Medicare population only*

## SUICIDE MORTALITY RATE



*Rate per 100,000 population*





# SUBSTANCE USE & RECOVERY

Substance use as a behavioral health disorder, known as a substance use disorder (SUD), encompasses the use of intoxicating substances in a manner which negatively effects the persons global wellness. For the purposes of this report, substances abused include, but are not limited to, alcohol, opiates, stimulants, narcotics, benzodiazepines, and other prescribed or illicit substances that could cause poisoning. (Not included are things like carbon monoxide poisoning, pesticides, or venomous animals or plants.)

Recovery from substance use disorder is a process through which the individual improves that health and wellness, starts living a self-directed life and striving to reach a more fulfilling purpose. This comes in a variety of pathways, from public health and behavioral health providers, social supports, community resources and mutual aid. There are currently 22.75 million individuals openly in recovery in the US. Only 1 in 4 people needing substance use support and assistance will receive services<sup>1</sup>.

The Monett Community has a substance use disorder prevalence rate that is nearly equal to the state average, and slightly lower than the national rate. Moreover, the drug poisoning mortality rate for the Monett Community is 41% better than the state average and 31% better than the national average. As a result, substance use and recovery ranked last out of the eight top priorities for the Monett Community when considering hospital utilization, public health and community data. However, the community stakeholders felt that this assessed health issue was of great priority to the community.

Community context data provided by Crescendo showed that drug and other substance use treatment and rehabilitation services, including detox was the top-ranking health issue among survey respondents. Additionally, this data showed that drug and other substance use, education, prevention and early intervention services, was the fifth most important health issue among survey respondents. According to one individual that was interviewed, "There are a lot of drugs like meth and prescription drugs, and few treatment options. People must pay cash to go to rehab facilities and few places for people to detox safely".

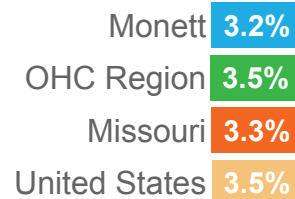
Substance use complicates many other health issues. Prevention efforts, treatment and recovery services present an important opportunity to improve overall community health outcomes.



**Twenty-two percent** of all emergency department visits associated with an assessed health issue were due to mental health or substance use.

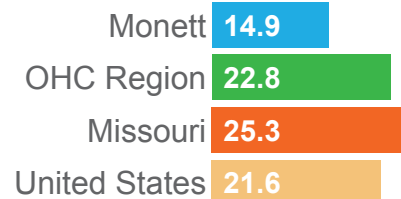
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## SUBSTANCE USE DISORDER PREVALENCE



*Medicare population only*

## DRUG POISONING MORTALITY



*Rate per 100,000 population*



# DIABETES

Diabetes is a chronic health condition that affects how your body turns food into energy. If you have diabetes, your body either doesn't make enough insulin or is resistant to the effects of insulin, leading to high blood sugar levels in the bloodstream. Over time, this can cause damage to multiple organs in the body, including the eyes, nerves, blood vessels and kidneys. It can also increase the risk of cardiovascular disease, decrease the body's immunity and lead to decreased life expectancy.



**Nine percent** of all emergency department visits associated with an assessed health issue were due to diabetes.

...

One in five adults in the U.S. have diabetes and do not know it. Diabetes was the seventh leading cause of death in the U.S. in 2019, accounting for 87,647 deaths annually. Direct medical costs and lost productivity attributed to diabetes was estimated to be \$327 billion in 2017<sup>2</sup>. The Monett Community has a diabetes prevalence rate that is higher than the OHC Region, state, and national rates, at 12.5%. Moreover, the obesity prevalence rate in the Community is 2.4% higher than state average and 3% higher than the national average. Barry County has the highest rate at 40%, while Lawrence County is lower at 31.4%.

Poor physical health in the Monett Community is, on average, 4% higher than both the state and national averages. Looking to closely related social determinants of health, the Monett Community reports a 30% rate of physical inactivity, which is higher than both the state and national averages. Moreover, residents of the Monett Community spend on average over \$680 on fruits and vegetables, which is higher than the state average, but nearly \$60 less than the national average.

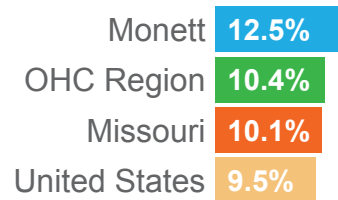
Though diabetes ranked sixth out of the top eight priorities for the Monett Community when considering hospital utilization, public health and community data, the community stakeholders felt that diabetes could be more feasibly addressed than other conditions in a timely manner. The stakeholders believe that a coordinated community effort, along with organizational leadership throughout the Monett Community, shows a readiness to change as it pertains to diabetes.



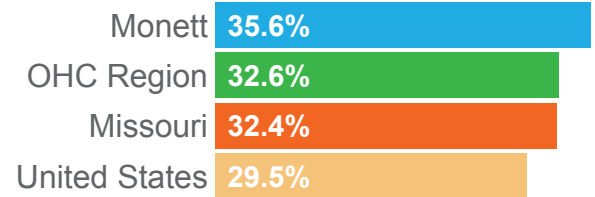
Females are **15% more likely** to be admitted for diabetes.

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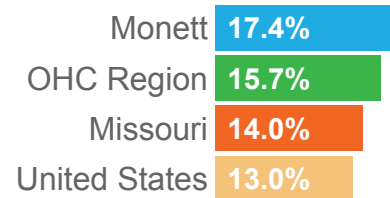
## DIABETES PREVALENCE



## OBESITY PREVALENCE



## POOR PHYSICAL HEALTH





# SPECIAL HEALTH ISSUE: COVID-19

Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus. Most people infected with the virus experience mild to moderate respiratory illness and recover without requiring special treatment. However, some become seriously ill and require more advanced medical care. People over the age of 64 and those with underlying medical conditions like cardiovascular disease, diabetes, chronic respiratory disease or cancer are more likely to develop serious illness. Even after recovery, some people may have post-COVID conditions. These conditions can present as different types and combinations of health problems for different lengths of time. Multiorgan effects can affect many body systems, including heart, lung, kidney, skin and neurologic functions.

Throughout the pandemic, the Monett Community saw a case rate 1% lower than the state and 7% lower than the national case rate. This was largely due to lower transmission in Barry County, resulting in a case rate 7% lower than the rest of the state and 13% better than the U.S.

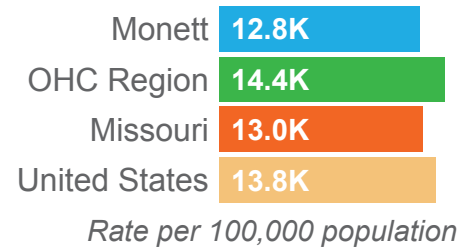
However, deaths from COVID-19 were more common in this Community, with a nearly 15% higher mortality rate compared to the state average and close to 3% higher than the national average. Lawrence County accounts for much of this disparity, with a mortality rate 29% higher than the Missouri rate and nearly 20% higher than the national rate. While Barry County saw around 10% fewer deaths than the state and more than 20% fewer than the nation.

COVID-19 was the reason for 3% of emergency department visits in the Monett Community, with 46% of patients paying for care through Medicare and 32% utilizing commercial insurance.

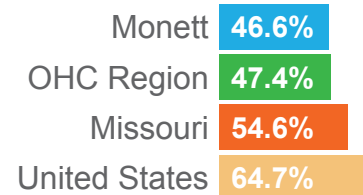
Comments from individual interviews and focus groups about the impact of COVID-19 for the Community showed concern that residents stopped visiting the ER, unless major emergency. Residents died from problems because they didn't get the care they needed. It was also mentioned that "Covid hasn't taken distrust away from providers – residents may not get the vaccine, but they'll see their doctor for other reasons".

Though COVID-19 initially ranked fourth as an assessed health issue in the Monett Community, when feasibility and readiness to change were factored in, it was determined by community stakeholders that there was already a strong system in place to continue to address screening, testing, contact tracing, vaccination and treatment. The ongoing efforts and the lack of confidence that the virus would continue to be a dominating issue over the next several years resulted in the determination that COVID-19 is not a priority health issue. However, the full impacts of the virus will be seen in the months and years to come, so it will be prudent to continue evaluation of its impact.

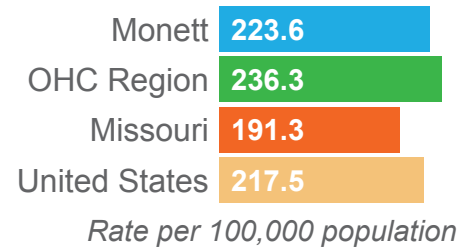
## COVID-19 CASE RATE



## COVID-19 VACCINATION RATE



## COVID-19 MORTALITY RATE



# SOCIAL DETERMINANTS OF HEALTH



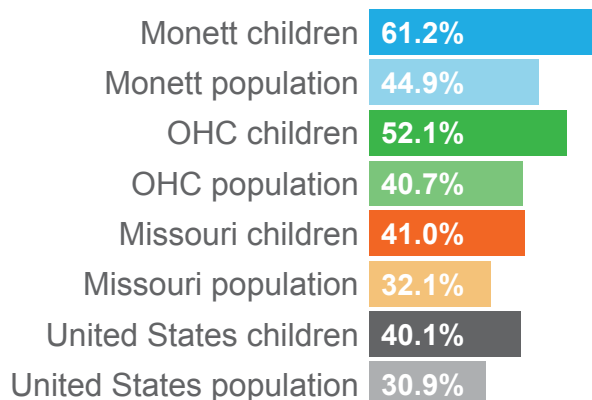
Additional data critical to understanding the health of the population and the vulnerability of the Community was discerned by examining six groupings classified as social determinants of health: Economic Stability, Education Access and Quality, Healthcare Access and Quality, Neighborhood and Built Environment, Social and Community Context and Health Behaviors. The social determinants of health have a major impact on people’s health, well-being, and quality of life while also contributing widely to health disparities and inequities. Twenty percent of a person’s health and well-being is related to access to care of quality of services provided. Rather, 80% is related to the physical environment (10%), social determinants of health (40%) and health behaviors (30%). Therefore, examination of these factors is important as they play a significant role in the impact the assessed health issues have on the Monett Community.

## ECONOMIC STABILITY

In the United States, 3 in 10 people live in poverty, and many people can’t afford things like healthy foods, health care, and housing. People with steady employment are less likely to live in poverty and more likely to be healthy, but many people have trouble finding and keeping a job. People with disabilities, injuries, or conditions like arthritis may be especially limited in their ability to work. In addition, many people with steady work still don’t earn enough to afford the things they need to stay healthy.

In the Monett Community, close to half of residents (44.9%) live at or below 200% of the federal poverty level (FPL), meaning a family of four cannot earn more than \$25,750 annually. The percentage of children living in poverty is much higher, at 61.2%. In fact, the per capita income in the Monett Community is below the FPL for a family of four, 22% lower than the Missouri average income and nearly 30% lower than the national average.

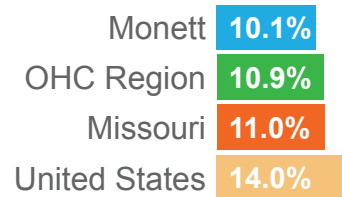
### POVERTY RATE



*Below 200% Federal Poverty Level*

In addition to living in poverty, many in the Monett Community struggle to find affordable housing. Twenty-six percent of those in the Monett Community live in substandard housing according to the U.S. Census Bureau and 10.1% report a severe housing cost burden. Forty-one percent of citizens currently have affordable housing that is below 60% of the area median income (AMI). Community stakeholders note that housing costs in the Monett Community have outpaced salaries. There are long wait lists for lower cost rental housing, which is contributing to higher costs.

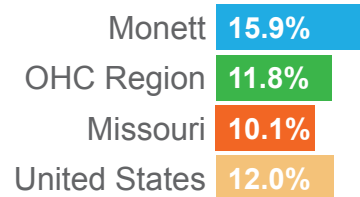
## SEVERE HOUSING COST BURDEN



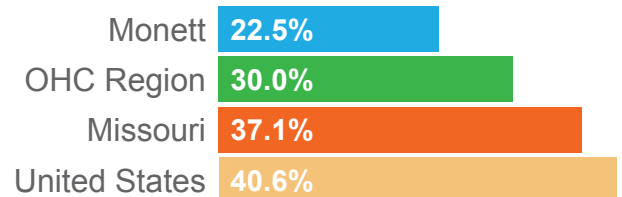
## EDUCATION ACCESS & QUALITY

Education can be an indicator of health, with persons with higher levels of education often living healthier and longer lives. Nearly 16% of adults over 25 years old in the Monett Community do not have a high school diploma. This is nearly 5% worse than the state average and 4% higher than the national rate. Moreover, the Monett Community struggles with community members achieving college degrees. Those receiving their associates degree or higher account for 22.5% of the population, which is nearly 40% below the state average and 45% below the national average.

### NO HIGH SCHOOL DIPLOMA



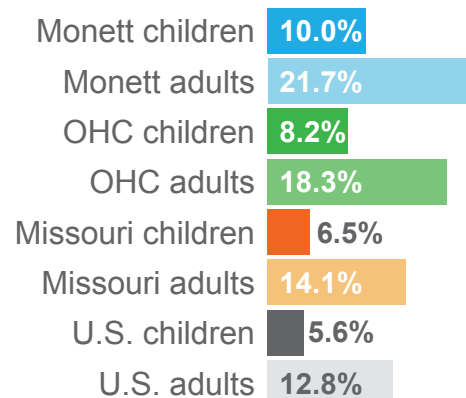
### ASSOCIATE'S DEGREE OR HIGHER



## HEALTHCARE ACCESS & QUALITY

Many people in the United States don't get the health care services they need. About 1 in 10 people don't have health insurance. In the Monett Community, the rate of uninsured is even higher, with more than 20% of adults and 10% of children not having health insurance. People without insurance are less likely to have a primary care provider, and they may not be able to afford the health care services and medications they need. In addition, people may not trust the healthcare system. Some reasons for this may include lack of cultural awareness by providers, feeling unwelcome or uncomfortable in traditional clinical settings, previous negative experiences with healthcare providers, insufficient accommodations for the disabled, language barriers or clinics not having convenient times or locations.

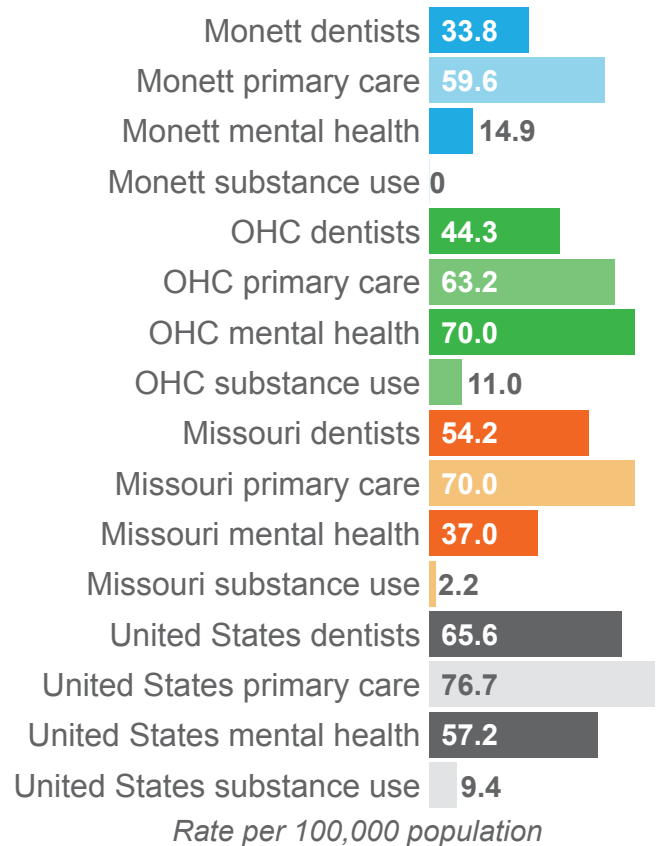
### UNINSURED



Those with the financial means to access healthcare in the Community have nearly 15% fewer primary care providers per 100,000 residents to seek services with than the rest of Missouri and more than 20% fewer the U.S. Moreover, the Community has nearly 60% fewer mental health care providers than Missouri and more than 70% fewer than the U.S. Overall, the Monett Community struggles with retaining and attracting healthcare providers, with 40% of residents living in Health Professional Shortage Areas. A rate that is nearly twice as high as the state and national rates.

Input from the community highlighted that the low-income community has few resources to travel for healthcare due to unreliable transportation. They need more basic services in community, and to work with others to get more advanced care including appointments, transportation Mission Fund to help patients pay for services or equipment, but there's still a large gap and access to services.

## HEALTHCARE PROVIDER RATES

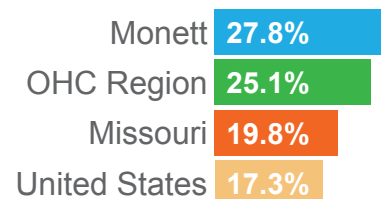


## NEIGHBORHOOD & BUILT ENVIRONMENT

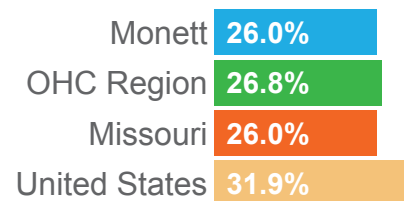
The neighborhoods people live in have a major impact on their health and well-being. Where we live affects the basics of our daily lives and health. When affordable housing is lacking it impacts families and where they can afford to live. In the Monett Community, 26% of community members live in substandard housing. The Community also reports nearly one in five of community members have limited/low access to food. The Monett Community performs better in these areas than both the state and national rates.

However, 27 out of 100 households in the Monett Community have low or slow internet access, a rate higher than the OHC Region, Missouri, and the U.S. As evidenced by the Covid pandemic, this lack of connectivity can affect resident's ability to learn, work, and play. In Barry County, only 7 in 10 households have internet that is not low or slow.

### HOUSEHOLDS WITH LOW OR SLOW INTERNET ACCESS



### SUBSTANDARD HOUSING





# HEALTH BEHAVIORS

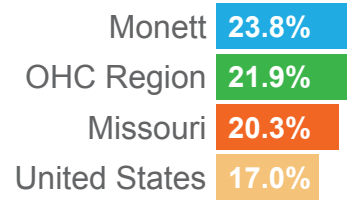
Health behaviors include individual-level behaviors, often influenced by access or quality of services, that can impact the overall health of an individual or community. Measured health behaviors include physical activity, fruit and vegetable expenditures, smoking, alcohol binge drinking, sexually transmitted infection (STI) rates and the prevalence of HIV. These behaviors can affect a wide range of health, functioning, and quality-of-life outcomes and risks.

In the Monett Community, physical activity has declined slightly since the prior assessment in 2019. Nearly one in three (30%) residents report no leisure time physical activity, which is higher than both state and national averages.

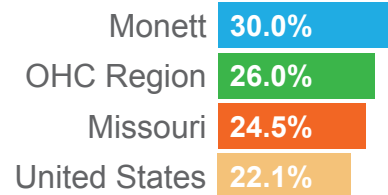
Analysis of fruit and vegetable expenditures are a way of determining how many community members have the inclination and ability to enjoy healthy foods. In the Monett Community, a household spends just over \$681 on fruits and vegetables (fresh, frozen, or canned), which is more than \$60 less than the national average.

Additionally, the Monett community has a smoking rate slightly higher than the state average, and 6.8% higher than the national averages.

## CURRENT SMOKERS



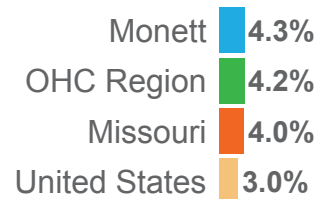
## PHYSICAL INACTIVITY



# SOCIAL & COMMUNITY CONTEXT

Health begins where we live, learn and play. Community connections and social relationships can have a major impact on their health and well-being. Many people face challenges and dangers they can't control, like unsafe neighborhoods, discrimination or trouble affording the things they need. The Monett Community has total social vulnerability index (SVI) of 0.8, with 1.0 indicating the highest possible vulnerability. This is 50% higher than both state and national averages. SVI scores that are higher show areas that are more vulnerable to socio-economic factors that can influence their health choices and behaviors. A prime example of this is homelessness. In the Monett Community, 4.3% of elementary and secondary students have been identified as homeless, which is greater than the OHC Region, Missouri, and national rates. Homelessness is closely connected to declines in physical and mental health. Persons without homes often lack access to health care and resources for treatment.

## HOMELESS STUDENTS



# CONCLUSION

The issues and trends discussed in the Monett Community summary have their limitations and cannot tell the full story of the health of these counties. Other factors, such as environmental, social and economic, impact individual and community health and provide context necessary to understanding the Community. Therefore, it is important to consider the Social Determinants of Health outlined in this summary when creating plans to address mental health, substance use & recovery, diabetes or any of the other assessed health issues.



## ENDNOTES

- 1 Substance Abuse and Mental Health Services Administration. (2020). Key substance use and mental health indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (HHS Publication No. PEP20-07-01-001, NSDUH Series H-55). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.
- 2 <https://www.cdc.gov/chronicdisease/resources/publications/factsheets/diabetes-prediabetes.htm>



## DISSEMINATION

The Ozarks Health Commission Regional Health Assessment and related community reports are resources designed for public dissemination, and multiple dissemination methods listed below will reach a wide variety of audiences.

### WEBSITES

Please visit the following websites to access the full RHA, Community Summaries, and related resources:

**Ozarks Health Commission**  
[www.ozarkshealthcommission.org](http://www.ozarkshealthcommission.org)

**CoxHealth**  
[www.coxhealth.com](http://www.coxhealth.com)

**Mercy Hospital Springfield**  
[mercy.net](http://mercy.net)

### PRINTED COPIES

Printed copies will be available by request through hospital and public health partners. Please refer to the websites above or contact a participating organization directly.

### SOCIAL MEDIA

Announcements of the availability of the regional health assessment, as well as community health improvement plans by each organization will be made via social media channels, including Facebook and Twitter.

**Barry County Health Department**  
[www.facebook.com/BarryCoHealthDept/](http://www.facebook.com/BarryCoHealthDept/)

**CoxHealth**  
[www.facebook.com/coxhealth/](http://www.facebook.com/coxhealth/)  
[twitter.com/coxhealth](https://twitter.com/coxhealth)

**Lawrence County Health Department**  
[www.facebook.com/pages/Lawrence-County-Health-Department/112761872148312](http://www.facebook.com/pages/Lawrence-County-Health-Department/112761872148312)

**Mercy Hospital Springfield**  
[www.facebook.com/MercyHospitalSpringfield/](http://www.facebook.com/MercyHospitalSpringfield/)  
[twitter.com/MercySpringfield](https://twitter.com/MercySpringfield)

## HEALTH SERVICES AVAILABLE

In addition to the websites of participating health systems and public health agencies, there are several robust resource directories available to assist consumers in locating care. These include:

**Burrell Behavioral Health**  
[burrellcenter.com/get-help/](http://burrellcenter.com/get-help/)

**Barry County Health Department**  
[barrycountyhealth.com/](http://barrycountyhealth.com/)

**CoxHealth**  
[doctors.coxhealth.com/](http://doctors.coxhealth.com/)  
[coxhealth.com/services/](http://coxhealth.com/services/)

**Jordan Valley Community Health Center**  
[jordanvalley.org/request-an-appointment/](http://jordanvalley.org/request-an-appointment/)

**Lawrence County Health Department**  
[lawrencecohealth.com/](http://lawrencecohealth.com/)

**Mercy Hospital Springfield**  
[mercy.net/search/service/](http://mercy.net/search/service/)  
[mercy.net/search/doctor/](http://mercy.net/search/doctor/)

**The Arc of the Ozarks**  
[thearcoftheozarks.org/about/springfield-division/](http://thearcoftheozarks.org/about/springfield-division/)

## ACKNOWLEDGMENTS

The Ozark Health Commission Steering Committee expresses appreciation to the many organizations and stakeholders that contributed to this report. To see a complete list, please visit [ozarkshealthcommission.org](http://ozarkshealthcommission.org).

